



1475 Kendale Boulevard, PO Box 2560  
East Lansing, MI 48826-2560  
800.292.4910

## 2023 Rate Renewal Exclusively for Forest Area Community Schools

Quote #: 351000  
MESSA Field Rep: Viola Collin  
Date Created: 08/04/2022

Rates Effective 01/01/2023 through 12/31/2023

Quoted Group(s): 486E - Full Time Union Support Staff

### Medical plans

Description	Benefits	Enrollment	2022 Rate <sup>1</sup> w/ 2% Discount	2023 Rate <sup>2</sup> w/ 2% Discount
<b>Plan</b> IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (AE) \$1500/\$3000 0% \$0 \$0 ABC Mail HEQ	Single: 0 2-Person: 2 Family: 3	\$528.32 \$1,188.72 \$1,479.30	\$575.36 \$1,294.56 \$1,611.02
<b>Plan</b> IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (AI) \$1500/\$3000 10% \$0 \$0 ABC Mail HEQ	Single: 0 2-Person: 0 Family: 1	\$491.52 \$1,105.92 \$1,376.25	\$535.28 \$1,204.39 \$1,498.79
<b>Basic Term Life with Medical</b> Volume:	\$5,000	6	\$1.50	\$1.50

<sup>1</sup>Medical Rate includes 1.490% for federal and state taxes and fees.

<sup>2</sup>Medical Rate includes 1.335% for federal and state taxes and fees.

### COBRA RATES:

The COBRA rates for this group are the same as the rates above.



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Quoted Group(s): 486E - Full Time Union Support Staff

### Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
<b>Dental</b> Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00906-06 60% 60% (X-Rays) 60% \$1,500 60% UCR 2 Cleanings, Sealants Jan-Dec	Single: 0 2-Person: 2 Family: 5	\$25.04 \$50.96 \$106.96	\$26.26 \$52.03 \$110.19
<b>Vision</b> Plan Year:	VSP 3 Plus Jan-Dec	Single: 0 2-Person: 2 Family: 5	\$10.50 \$22.54 \$33.94	\$9.49 \$20.38 \$30.70
<b>Life Insurance</b> Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$140,000	7	\$0.11 \$2.20	\$0.10 \$2.00
<b>AD&amp;D Coverage</b> Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$140,000	7	\$0.03 \$0.60	\$0.03 \$0.60
<b>LTD Benefit</b> Benefit: Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Own-Occupation: Pre-Exist Cond.: COLA: SS Freeze: Volume: Rate/\$100: Composite:	66 2/3% Max \$5,000 \$7,500 90 CDMF 2 Year Limitation Same as any other illness Family 2 years Waived No Yes \$18,514	7	\$1.58 \$43.55	\$1.46 \$38.61

Total Monthly Rate per Member: Single	\$81.89	\$76.96
Total Monthly Rate per Member: 2-Person	\$119.85	\$113.62
Total Monthly Rate per Member: Family	\$187.25	\$182.10

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Quoted Group(s): 486G - Teachers

### Medical plans

Description	Benefits	Enrollment	2022 Rate <sup>1</sup> w/ 2% Discount	2023 Rate <sup>2</sup> w/ 2% Discount
<b>Plan</b> IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (AE) \$1500/\$3000 0% \$0 \$0 ABC Mail HEQ	Single: 7 2-Person: 1 Family: 10	\$528.32 \$1,188.72 \$1,479.30	\$575.36 \$1,294.56 \$1,611.02
<b>Plan</b> IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (AI) \$1500/\$3000 10% \$0 \$0 ABC Mail HEQ	Single: 2 2-Person: 2 Family: 6	\$491.52 \$1,105.92 \$1,376.25	\$535.28 \$1,204.39 \$1,498.79
<b>Basic Term Life with Medical</b> Volume:	\$5,000	28	\$1.50	\$1.50

<sup>1</sup>Medical Rate includes 1.490% for federal and state taxes and fees.

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Quoted Group(s): 486G - Teachers

### Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
<b>Dental</b> Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00906-03 60% 60% (X-Rays) 60% \$1,500 60% UCR 2 Cleanings, Sealants Jan-Dec	Single: 10 2-Person: 4 Family: 19	\$20.52 \$39.85 \$92.37	\$21.85 \$43.67 \$98.72
<b>Vision</b> Plan Year:	VSP 3 Plus Jan-Dec	Single: 10 2-Person: 4 Family: 19	\$10.50 \$22.54 \$33.94	\$9.49 \$20.38 \$30.70
<b>Life Insurance</b> Volume: Total Volume: Rate/\$1,000: Composite:	\$25,000 \$825,000	33	\$0.11 \$2.75	\$0.10 \$2.50
<b>AD&amp;D Coverage</b> Volume: Total Volume: Rate/\$1,000: Composite:	\$25,000 \$825,000	33	\$0.03 \$0.75	\$0.03 \$0.75
<b>LTD Benefit</b> Benefit: Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Own-Occupation: Pre-Exist Cond.: COLA: SS Freeze: Volume: Rate/\$100: Composite:	66 2/3% Max \$5,000 \$7,500 90 CDMF 2 Year Limitation Same as any other illness Family 2 years Waived No Yes \$140,021	33	\$0.49 \$19.92	\$0.45 \$19.09

Total Monthly Rate per Member: Single	\$54.44	\$53.68
Total Monthly Rate per Member: 2-Person	\$85.81	\$86.39
Total Monthly Rate per Member: Family	\$149.73	\$151.76

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Quoted Group(s): 486P - Principals

### Medical plans

Description	Benefits	Enrollment	2022 Rate <sup>1</sup> w/ 2% Discount	2023 Rate <sup>2</sup> w/ 2% Discount
<b>Plan</b> IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (AE) \$1500/\$3000 0% \$0 \$0 ABC Mail HEQ	Single: 0 2-Person: 1 Family: 1	\$528.32 \$1,188.72 \$1,479.30	\$575.36 \$1,294.56 \$1,611.02
<b>Plan</b> IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (AI) \$1500/\$3000 10% \$0 \$0 ABC Mail HEQ	Single: 0 2-Person: 1 Family: 0	\$491.52 \$1,105.92 \$1,376.25	\$535.28 \$1,204.39 \$1,498.79
<b>Basic Term Life with Medical</b> Volume:	\$5,000	3	\$1.50	\$1.50

<sup>1</sup>Medical Rate includes 1.490% for federal and state taxes and fees.

<sup>2</sup>Medical Rate includes 1.335% for federal and state taxes and fees.

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Quoted Group(s): 486P - Principals

### Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
<b>Dental</b> Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00906-17 60% 60% (X-Rays) 60% \$1,500 60% UCR 2 Cleanings, Sealants Jan-Dec	Single: 0 2-Person: 2 Family: 2	\$20.36 \$38.83 \$78.28	\$20.88 \$44.62 \$79.93
<b>Vision</b> Plan Year:	VSP 3 Plus Jan-Dec	Single: 0 2-Person: 2 Family: 2	\$10.50 \$22.54 \$33.94	\$9.49 \$20.38 \$30.70
<b>Life Insurance</b> Volume: Total Volume: Rate/\$1,000: Composite:	\$75,000 \$300,000	4	\$0.11 \$8.25	\$0.10 \$7.50
<b>AD&amp;D Coverage</b> Volume: Total Volume: Rate/\$1,000: Composite:	\$75,000 \$300,000	4	\$0.03 \$2.25	\$0.03 \$2.25
<b>LTD Benefit</b> Benefit: Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Own-Occupation: Pre-Exist Cond.: COLA: SS Freeze: Volume: Rate/\$100: Composite:	66 2/3% Max \$5,000 \$7,500 90 CDMF 2 Year Limitation Same as any other illness Family 2 years Waived No Yes \$28,123	4	\$0.68 \$40.58	\$0.56 \$39.37

Total Monthly Rate per Member: Single	\$81.94	\$79.49
Total Monthly Rate per Member: 2-Person	\$112.45	\$114.12
Total Monthly Rate per Member: Family	\$163.30	\$159.75

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Quoted Group(s): 486Q - Administration

### Medical plans

Description	Benefits	Enrollment	2022 Rate <sup>1</sup> w/ 2% Discount	2023 Rate <sup>2</sup> w/ 2% Discount
<b>Plan</b> IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (AE) \$1500/\$3000 0% \$0 \$0 ABC Mail HEQ	Single: 0 2-Person: 0 Family: 1	\$528.32 \$1,188.72 \$1,479.30	\$575.36 \$1,294.56 \$1,611.02
<b>Plan</b> IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (AI) \$1500/\$3000 10% \$0 \$0 ABC Mail HEQ	Single: 0 2-Person: 0 Family: 0	\$491.52 \$1,105.92 \$1,376.25	\$535.28 \$1,204.39 \$1,498.79
<b>Basic Term Life with Medical</b> Volume:	\$5,000	1	\$1.50	\$1.50

<sup>1</sup>Medical Rate includes 1.490% for federal and state taxes and fees.

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Quoted Group(s): 486Q - Administration

### Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
<b>Dental</b> Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00906-19 60% 60% (X-Rays) 60% \$1,500 60% UCR 2 Cleanings, Sealants Jan-Dec	Single: 0 2-Person: 0 Family: 1	\$19.05 \$36.60 \$81.64	\$20.09 \$37.89 \$98.59
<b>Vision</b> Plan Year:	VSP 3 Plus Jan-Dec	Single: 0 2-Person: 0 Family: 1	\$10.50 \$22.54 \$33.94	\$9.49 \$20.38 \$30.70
<b>Life Insurance</b> Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$20,000	1	\$0.11 \$2.20	\$0.10 \$2.00
<b>AD&amp;D Coverage</b> Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$20,000	1	\$0.03 \$0.60	\$0.03 \$0.60
<b>LTD Benefit</b> Benefit: Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Own-Occupation: Pre-Exist Cond.: COLA: SS Freeze: Volume: Rate/\$100: Composite:	66 2/3% Max \$5,000 \$7,500 90 CDMF 2 Year Limitation Same as any other illness Family 2 years Waived No Yes \$4,317	1	\$0.84 \$34.31	\$0.89 \$38.42

Total Monthly Rate per Member: Single	\$66.66	\$70.60
Total Monthly Rate per Member: 2-Person	\$96.25	\$99.29
Total Monthly Rate per Member: Family	\$152.69	\$170.31

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