



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

**2023 Rate Renewal Exclusively for
 Mason Co Eastern Public School**

Quote #: 350978
 MESSA Field Rep: Jacqueline Mast
 Date Created: 08/04/2022

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

Quoted Group(s): 435A - Teacher

Ancillary plans with medical - 11 members

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00747-01 100% 80% (X-Rays) 80% \$1,000 50% \$500 2 Cleanings Jan-Dec	Single: 3 2-Person: 2 Family: 6	\$30.58 \$57.66 \$110.37	\$31.88 \$60.12 \$115.09
Vision (All)* Plan Year:	VSP 2 S Jan-Dec	Single: 8 2-Person: 6 Family: 9	\$6.05 \$12.95 \$19.51	\$5.47 \$11.71 \$17.64
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$30,000 \$330,000	11	\$0.17 \$5.10	\$0.18 \$5.40
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$30,000 \$330,000	11	\$0.03 \$0.90	\$0.03 \$0.90
Dependent Life (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$2,000 \$46,000	23	\$0.23 \$0.46	\$0.23 \$0.46
LTD Benefit (All)* 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 \$2,500 \$3,750 90 CDMF Same as any other illness Same as any other illness Family 2 years Waived Yes Yes \$81,801	23	\$0.82 \$29.01	\$0.81 \$28.81

Total Monthly Rate per Member: Single \$72.10 \$72.92
 Total Monthly Rate per Member: 2-Person \$106.08 \$107.40
 Total Monthly Rate per Member: Family \$165.35 \$168.30

COBRA RATES:

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

* Indicates total ancillary plan enrollment and volume for quoted group(s).

The above rates are based on plans and enrollment as of 08/02/2022. Material changes in the composition of the group such as number of enrollees, definable group, eligibility requirements or plans offered may affect the final rates.

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

Quoted Group(s): 435A - Teacher

Ancillary plans without medical - 12 members

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00747-02 100% 80% (X-Rays) 80% \$1,000 80% \$800 2 Cleanings Jan-Dec	Single: 5 2-Person: 4 Family: 3	\$30.26 \$59.02 \$112.26	\$31.55 \$61.54 \$117.06
Vision (All)* Plan Year:	VSP 2 S Jan-Dec	Single: 8 2-Person: 6 Family: 9	\$6.05 \$12.95 \$19.51	\$5.47 \$11.71 \$17.64
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$40,000 \$480,000	12	\$0.17 \$6.80	\$0.18 \$7.20
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$40,000 \$480,000	12	\$0.03 \$1.20	\$0.03 \$1.20
Dependent Life (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$2,000 \$46,000	23	\$0.23 \$0.46	\$0.23 \$0.46
LTD Benefit (All)* 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 \$2,500 \$3,750 90 CDMF Same as any other illness Same as any other illness Family 2 years Waived Yes Yes \$81,801	23	\$0.82 \$29.01	\$0.81 \$28.81

Total Monthly Rate per Member: Single \$73.78 \$74.69
 Total Monthly Rate per Member: 2-Person \$109.44 \$110.92
 Total Monthly Rate per Member: Family \$169.24 \$172.37

COBRA RATES:

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

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Quoted Group(s): 435B - Administrators&NonUnionEmp

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00747-07 100% 80% (X-Rays) 80% \$1,000 80% \$800 2 Cleanings Jan-Dec	Single: 4 2-Person: 2 Family: 4	\$32.18 \$60.29 \$112.66	\$33.55 \$62.87 \$117.48
Vision Plan Year:	VSP 3 Plus Jan-Dec	Single: 4 2-Person: 2 Family: 4	\$10.50 \$22.54 \$33.94	\$9.49 \$20.38 \$30.70
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$40,000 \$400,000	10	\$0.17 \$6.80	\$0.18 \$7.20
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$40,000 \$400,000	10	\$0.03 \$1.20	\$0.03 \$1.20
Dependent Life Volume: Total Volume: Rate/\$1,000: Composite:	\$2,000 \$20,000	10	\$0.23 \$0.46	\$0.23 \$0.46
LTD Benefit 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 \$2,500 \$3,750 90 CDMF Same as any other illness Same as any other illness Family 2 years Waived Yes Yes \$28,666	10	\$1.24 \$35.92	\$1.39 \$39.85

Total Monthly Rate per Member: Single \$87.06 \$91.75
 Total Monthly Rate per Member: 2-Person \$127.21 \$131.96
 Total Monthly Rate per Member: Family \$190.98 \$196.89

COBRA RATES:

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Quoted Group(s): 435F - Superintendent

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00747-08 100% 80% (X-Rays) 80% \$1,000 80% \$800 2 Cleanings Jan-Dec	Single: 0 2-Person: 0 Family: 1	\$28.49 \$53.36 \$99.41	\$31.09 \$58.36 \$117.58
Vision 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
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$110,000 \$110,000	1	\$0.17 \$18.70	\$0.18 \$19.80
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$110,000 \$110,000	1	\$0.03 \$3.30	\$0.03 \$3.30
Dependent Life Volume: Total Volume: Rate/\$1,000: Composite:	\$2,000 \$2,000	1	\$0.23 \$0.46	\$0.23 \$0.46
LTD Benefit 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 \$2,500 \$3,750 90 CDMF Same as any other illness Same as any other illness Family 2 years Waived Yes Yes \$3,750	1	\$0.72 \$27.00	\$0.70 \$26.25

Total Monthly Rate per Member: Single \$88.45 \$90.39
 Total Monthly Rate per Member: 2-Person \$125.36 \$128.55
 Total Monthly Rate per Member: Family \$182.81 \$198.09

COBRA RATES:

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