

800.292.4910

2018 Rate Renewal Exclusively for

Concord Community Schools (430)

(Part of Jackson County Consortium)

Renewal Effective 01/01/2018

Quote #: 340246

MESSA Field Rep: Julie Berryman Adams

Date Created: 09/13/2017

PAK A - JCC FT TRANSPORT JCC FT Transportation			Enrollment		2018 Rates with Taxes
Medical: IN Deductible: IN Coinsurance: IN Copay (OV/UC/ER): Rx Coverage: Riders Included:	MESSA Choices \$500/\$1000 N/A \$20/\$25/\$50 \$10/\$20 EA1		Single: 0 2-Person: 0 Family: 0	\$637.38 \$1,432.25 \$1,781.96	\$651.11 \$1,463.14 \$1,820.41
Dental: Class I: Class II: Class III: Annual Max: Class IV: Lifetime Max: Riders:	80% 80% 80% \$1,000 80% \$900 2 Cleanings		Single: 0 2-Person: 0 Family: 0	\$36.29 \$70.14 \$124.07	\$36.90 \$71.32 \$126.16
Vision:	VSP 2 S		Single: 0 2-Person: 0 Family: 0	\$5.45 \$11.70 \$17.61	\$5.57 \$11.95 \$17.99
Life Insurance: Rate/\$1000 Volume Composite:	\$20,000		0		\$0.12 \$0.00
AD&D Coverage: Rate/\$1000 Volume Composite:	\$20,000		0		\$2.40 \$0.03 \$0.00 \$0.60
LTD Benefit Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Pre-Exist Cond.: COLA: Rate/\$100 Covered Salary	66 2/3% Max \$2,500 \$3,750 90 CDMF Same as any other illness Same as any other illness Primary Waived No		0		\$2.19
Covered Salary Composite: Total Monthly Rate per Member - Single Total Monthly Rate per Member - 2-Person Total Monthly Rate per Member - Family					\$0.00 \$35.20 \$731.78 \$1,584.61
Total Monthly Rate per M	PAK A COBRA RATES:	Medical	Single	\$635.88	\$2,002.76 \$649.61
2-Person Family The COBRA rates for Dental and Vision are t			\$1,430.75 \$1,780.46 are the same as the rates ab	\$1,461.64 \$1,818.91 ove.	

The above rates are effective 01/01/2018 through 12/31/2018 and based on plans and enrollment as of 09/13/2017. Rates will be effective for 12 months for plans which remain in compliance with MESSA Underwriting and Rating guidelines. Material changes in the composition of the group such as number of enrollees, definable group, eligibility requirements or plan may require re-calculation of rates.



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2018 Rates without Taxes	2018 Rates with Taxes	
Single: 0 \$33.94		
\$68.54	\$34.51 \$69.70	
\$122.82	\$124.89	
	2 2772433747	
\$7.56	\$7.72	
\$16.24	\$16.59	
\$24.42	\$24.94	
	\$0.12	
	\$0.00	
	\$3.00	
	ψ3.00	
	\$0.03	
	\$0.00	
	\$0.75	
	\$2.19	
	\$0.00	
	\$35.20	
	\$81.18	
	\$125.24	
	\$188.78	

The COBRA rates for Dental and Vision are the same as the rates above.

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PAK B COBRA RATES:



Good health. Good business. Great schools. 1475 Kendale Boulevard, PO Box 2560 East Lansing, MI 48826-2560 800.292.4910

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PAK C - JCC FT TRANS	PORT JCC FT Transportation		Enrollment	2018 Rates without Taxes	2018 Rates with Taxes	
Medical: IN Deductible: IN Coinsurance: IN Copay (OV/UC/ER): Rx Coverage: Riders Included:	MESSA Choices \$500/\$1000 N/A \$20/\$25/\$50 Saver Rx EA1		Single: 0 2-Person: 0 Family: 0	\$595.56 \$1,338.15 \$1,664.87	\$608.39 \$1,367.02 \$1,700.79	
Dental: Class I: Class II: Class III: Annual Max: Class IV: Lifetime Max: Riders:	80% 80% 80% \$1,000 80% \$900 2 Cleanings		Single: 0 2-Person: 0 Family: 0	\$36.29 \$70.14 \$124.07	\$36.90 \$71.32 \$126.16	
Vision:	VSP 2 S		Single: 0 2-Person: 0 Family: 0	\$5.45 \$11.70 \$17.61	\$5.57 \$11.95 \$17.99	
Life Insurance: Rate/\$1000 Volume Composite:	\$20,000		0		\$0.12 \$0.00	
AD&D Coverage: Rate/\$1000 Volume Composite:	\$20,000		0		\$2.40 \$0.03 \$0.00 \$0.60	
LTD Benefit Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Pre-Exist Cond.: COLA: Rate/\$100 Covered Salary Composite:	66 2/3% Max \$2,500 \$3,750 90 CDMF Same as any other illness Same as any other illness Primary Waived No		0		\$2.19 \$0.00	
Total Monthly Rate per Member - Single Total Monthly Rate per Member - 2-Person Total Monthly Rate per Member - Family					\$35.20 \$689.06 \$1,488.49 \$1,883.14	
	PAK C COBRA RATES:	Medical	Single 2-Person Family	\$594.06 \$1,336.65 \$1,663.37	\$606.89 \$1,365.52 \$1,699.29	
		The COBRA ra	The COBRA rates for Dental and Vision are the same as the rates above.			

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	PAK D - JCC FT TRANSPORT JCC FT Transportation		Enrollment	2018 Rates without Taxes	2018 Rates with Taxes
Medical: IN Deductible: IN Coinsurance: IN Copay (OV/UC/ER): Rx Coverage: Riders Included:	MESSA ABC Plan 1 \$1350 1P; \$2700 2P&FF N/A N/A ABC Rx EA1		Single: 0 2-Person: 0 Family: 0	\$531.88 \$1,194.88 \$1,486.58	\$543.34 \$1,220.65 \$1,518.65
Dental: Class I: Class II: Class III: Annual Max: Class IV: Lifetime Max: Riders:	80% 80% \$1,000 80% \$900 2 Cleanings		Single: 0 2-Person: 0 Family: 0	\$36.29 \$70.14 \$124.07	\$36.90 \$71.32 \$126.16
Vision:	VSP 2 S		Single: 0 2-Person: 0 Family: 0	\$5.45 \$11.70 \$17.61	\$5.57 \$11.95 \$17.99
Life Insurance: Rate/\$1000 Volume Composite: AD&D Coverage: Rate/\$1000 Volume Composite:	\$20,000 \$20,000		0		\$0.12 \$0.00 \$2.40 \$0.03 \$0.00 \$0.60
LTD Benefit Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Pre-Exist Cond.: COLA: Rate/\$100 Covered Salary Composite:	66 2/3% Max \$2,500 \$3,750 90 CDMF Same as any other illness Same as any other illness Primary Waived No		0		\$2.19 \$0.00 \$35.20
Total Monthly Rate per Member - Single Total Monthly Rate per Member - 2-Person Total Monthly Rate per Member - Family					\$624.01 \$1,342.12 \$1,701.00
	PAK D COBRA RATES:	Medical	Single 2-Person	\$530.38 \$1,193.38	\$541.84 \$1,219.15

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PAK E - JCC FT TRANSPORT JCC FT Transportation		Enrollment	without Taxes	2018 Rates with Taxes
MESSA Choices \$1000/\$2000 N/A \$20/\$25/\$50 Saver Rx EA1		Single: 0 2-Person: 0 Family: 0	\$561.71 \$1,261.97 \$1,570.07	\$573.81 \$1,289.19 \$1,603.94
80% 80% 80% \$1,000 80% \$900 2 Cleanings		Single: 0 2-Person: 0 Family: 0	\$36.29 \$70.14 \$124.07	\$36.90 \$71.32 \$126.16
VSP 2 S		Single: 0 2-Person: 0 Family: 0	\$5.45 \$11.70 \$17.61	\$5.57 \$11.95 \$17.99
\$20,000		0		\$0.12 \$0.00
\$20,000		0		\$2.40 \$0.03 \$0.00 \$0.60
66 2/3% Max \$2,500 \$3,750 90 CDMF Same as any other illness Same as any other illness Primary Waived No		0		\$2.19 \$0.00 \$35.20
Total Monthly Rate per Member - Single Total Monthly Rate per Member - 2-Person Total Monthly Rate per Member - Family				\$654.48 \$1,410.66 \$1,786.29
PAK E COBRA RATES:	Medical	Single 2-Person Family	\$560.21 \$1,260.47 \$1,568.57	\$572.31 \$1,287.69 \$1,602.44
	\$1000/\$2000 N/A \$20/\$25/\$50 Saver Rx EA1 80% 80% 80% \$1,000 80% \$900 2 Cleanings VSP 2 S \$20,000 \$20,000 \$20,000 \$20,000 \$1000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$3,750 90 CDMF Same as any other illness Same as any other illness Primary Waived No ember - Single ember - 2-Person ember - Family	\$1000/\$2000 N/A \$20/\$25/\$50 Saver Rx EA1 80% 80% 80% \$0% \$1,000 80% \$990 2 Cleanings VSP 2 S \$20,000 \$20,000 \$20,000 \$40,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$20,000 \$3,750 90 CDMF Same as any other illness Same as any other illness Primary Waived No ember - Single ember - 2-Person ember - Family PAK E COBRA RATES:	\$1000/\$2000 N/A \$20/\$25/\$50 Saver RX EA1 80% 80% \$80% \$1,000 80% \$900 2 Cleanings VSP 2 S \$Single: 0 2-Person: 0 Family: 0 \$20,000 \$2	\$1000/\$2000 N/A \$20/\$25/\$50 Saver Rx EA1 Single: 0 \$1,570.07 \$1,

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