



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

**Quote Summary Exclusively for  
 Jackson County Consortium  
 Rates Effective 01/01/2023 through 12/31/2023**

Quote Request ID: 232138  
 MESSA Field Rep: Julie Berryman Adams  
 Date Created: 10/07/2022

**Quoted Group(s): 060A - JCC Teacher, Librarian, SocWork, 153H - JCC Teacher, 227G - JCC Teachers, 253G - JCC Teachers, 430A - JCC Teachers, 437A - JCC Teachers, 498A - JCC Teachers, 563C - JCC Teachers, 572A - JCC Teachers, 586I - JCC Teacher, 751G - JCC Teachers, 950A - JCC Teachers**

**Medical plans**

Description	Current Benefits	Rate	Census Used	Quote ID 351645	
				Quoted Benefits	Rate w/ 2% Discount
<b>Plan</b> IN Deductible: \$500/\$1000 IN Coinsurance: 0% \$716.31 OL/OV/SV Copay: \$20/\$20/\$20 \$1,611.71 UC/ER Copay: \$25/\$50 \$2,005.66 Rx Coverage: Saver Rx Riders: EA1			S: 62 2P: 46 F: 214	Choices (6Z) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx EA1	<b>\$716.31</b> <b>\$1,611.71</b> <b>\$2,005.66</b>
<b>Plan</b> IN Deductible: \$1000/\$2000 IN Coinsurance: 0% \$675.48 OL/OV/SV Copay: \$20/\$20/\$20 \$1,519.85 UC/ER Copay: \$25/\$50 \$1,891.35 Rx Coverage: Saver Rx Riders: EA1			S: 11 2P: 9 F: 44	<i>Choices (AX)</i> <i>\$1000/\$2000</i> <i>0%</i> <i>\$20/\$20/\$20</i> <i>\$25/\$50</i> <i>3Tier Mail</i> <i>EA1</i>	<b>\$636.47</b> <b>\$1,432.07</b> <b>\$1,782.11</b>
<b>Plan</b> IN Deductible: ABC Plan 1 (7U) \$1400/\$2800 IN Coinsurance: 0% \$633.13 OL/OV/SV Copay: \$0/\$0/\$0 \$1,424.56 UC/ER Copay: \$0/\$0 \$1,772.78 Rx Coverage: ABC Rx Riders: EA1, HEQ			S: 51 2P: 56 F: 251	ABC Plan 1 (7U) \$1500/\$3000 0% \$0/\$0/\$0 \$0/\$0 ABC Rx EA1, HEQ	<b>\$633.13</b> <b>\$1,424.56</b> <b>\$1,772.78</b>
<b>Plan</b> IN Deductible: Essentials by MESSA (EB) \$375/\$750 IN Coinsurance: 20% \$480.89 OL/OV/SV Copay: \$10/\$25/\$50 \$1,082.02 UC/ER Copay: \$50/\$200 \$1,346.50 Rx Coverage: EbM Riders: EA1			S: 0 2P: 0 F: 0	Not Included in Benefit Package	
<b>Plan</b> IN Deductible: Not Included in Benefit Package IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:			S: 7 2P: 2 F: 4	<i>ABC Plan 1 (BR)</i> <i>\$1500/\$3000</i> <i>0%</i> <i>\$0/\$0/\$0</i> <i>\$0/\$0</i> <i>3Tier Mail</i> <i>EA1, HEQ</i>	<b>\$598.40</b> <b>\$1,346.42</b> <b>\$1,675.52</b>
<b>Basic Term Life w/Med</b> Volume:	\$5,000	\$1.50	757	\$5,000	\$1.50

The above rates are based on plans and enrollment as of 10/07/2022. 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.

**If you have any questions, please contact your MESSA Field Representative, Julie Berryman Adams, at 800.292.4910.** Page 1



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**Ancillary plans with medical - 757 members**

Description	Current Benefits	Rate	Census Used	Quote ID 351645	
				Quoted Benefits	Rate
<b>Dental (All)*</b>					
Diag & Prev:	100%			100%	
Basic Services:	80% (X-Rays)			80% (X-Rays)	
Major Services:	80%	\$36.00	S: 153	80%	\$ 36.00
Annual Max:	\$2000	\$68.63	2P: 130	\$2000	\$ 68.63
Orthodontics:	80%	\$135.58	F: 629	80%	\$135.58
Lifetime Max:	\$2000			\$2000	
Riders:	2 Cleanings			2 Cleanings	
Plan Year:	Jan-Dec			Jan-Dec	
<b>Vision (All)*</b>	VSP 2 S	\$5.98	S: 153	VSP 2 S	\$ 5.98
Plan Year:	Jan-Dec	\$12.79	2P: 129	Jan-Dec	\$ 12.79
		\$19.26	F: 630		\$ 19.26
<b>Life Insurance</b>					
Volume:	\$30,000			\$30,000	
Total Volume:	\$22,710,000		757	\$22,710,000	
Rate/\$1,000:		\$0.12			\$ 0.12
Composite Rate:		\$3.60			\$ 3.60
<b>AD&amp;D Coverage</b>					
Volume:	\$30,000			\$30,000	
Total Volume:	\$22,710,000		757	\$22,710,000	
Rate/\$1,000:		\$0.03			\$ 0.03
Composite Rate:		\$0.90			\$ 0.90
<b>LTD Benefit (All)*</b>					
Benefit:	66 2/3% Max \$7,000			66 2/3% Max \$7,000	
Max. Monthly Salary:	\$10,500			\$10,500	
Waiting Period:	90 CDMF			90 CDMF	
Alcohol/Drug:	Same as any other illness			Same as any other illness	
Mental/Nervous:	Same as any other illness			Same as any other illness	
Soc. Sec. Offset:	Primary			Primary	
Own-Occupation:	2 years			2 years	
Pre-Exist Condition:	Waived			Waived	
COLA:	No			No	
SS Freeze:	Yes			Yes	
Volume:	\$4,853,248		911	\$4,853,248	
Rate/\$100:		\$0.48			\$ 0.48
Composite Rate:		\$25.57			\$ 25.57
Total Monthly Rate/Member - S		\$ 72.05			\$ 72.05
Total Monthly Rate/Member - 2P		\$ 111.49			\$ 111.49
Total Monthly Rate/Member - F		\$ 184.91			\$ 184.91

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

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**Ancillary plans without medical - 155 members**

Description	Current Benefits	Rate	Census Used	Quote ID 351645	
				Quoted Benefits	Rate
<b>Dental (All)*</b>					
Diag & Prev:	100%			100%	
Basic Services:	80% (X-Rays)			80% (X-Rays)	
Major Services:	80%	\$36.00	S: 153	80%	\$ 36.00
Annual Max:	\$2000	\$68.63	2P: 130	\$2000	\$ 68.63
Orthodontics:	80%	\$135.58	F: 629	80%	\$135.58
Lifetime Max:	\$2000			\$2000	
Riders:	2 Cleanings			2 Cleanings	
Plan Year:	Jan-Dec			Jan-Dec	
<b>Vision (All)*</b>	VSP 2 S	\$5.98	S: 153	VSP 2 S	\$ 5.98
Plan Year:	Jan-Dec	\$12.79	2P: 129	Jan-Dec	\$ 12.79
		\$19.26	F: 630		\$ 19.26
<b>Life Insurance</b>					
Volume:	\$35,000			\$35,000	
Total Volume:	\$5,425,000		155	\$5,425,000	
Rate/\$1,000:		\$0.12			\$ 0.12
Composite Rate:		\$4.20			\$ 4.20
<b>AD&amp;D Coverage</b>					
Volume:	\$35,000			\$35,000	
Total Volume:	\$5,425,000		155	\$5,425,000	
Rate/\$1,000:		\$0.03			\$ 0.03
Composite Rate:		\$1.05			\$ 1.05
<b>LTD Benefit (All)*</b>					
Benefit:	66 2/3% Max \$7,000			66 2/3% Max \$7,000	
Max. Monthly Salary:	\$10,500			\$10,500	
Waiting Period:	90 CDMF			90 CDMF	
Alcohol/Drug:	Same as any other illness			Same as any other illness	
Mental/Nervous:	Same as any other illness			Same as any other illness	
Soc. Sec. Offset:	Primary			Primary	
Own-Occupation:	2 years			2 years	
Pre-Exist Condition:	Waived			Waived	
COLA:	No			No	
SS Freeze:	Yes			Yes	
Volume:	\$4,853,248		911	\$4,853,248	
Rate/\$100:		\$0.48			\$ 0.48
Composite Rate:		\$25.57			\$ 25.57
Total Monthly Rate/Member - S		\$ 72.80			\$ 72.80
Total Monthly Rate/Member - 2P		\$ 112.24			\$ 112.24
Total Monthly Rate/Member - F		\$ 185.66			\$ 185.66

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

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