



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

2021 Rate Renewal Exclusively for Au Gres-Sims School District

Quote #: 346762
MESSA Field Rep: Robert Kwiatkoski
Date Created: 07/31/2020

Rates Effective 01/01/2021 through 12/31/2021

Quoted Group(s): 291C - Teacher

Medical plans

Description	Benefits	Enrollment	2020 Rate ¹ w/ 2% Discount	2021 Rate ² w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (3R) \$100/\$200 0% \$20/\$20/\$20 \$25/\$50 \$10/\$20 None	Single: 2 2-Person: 0 Family: 10	\$819.63 \$1,844.16 \$2,294.95	\$821.72 \$1,848.88 \$2,300.83
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1400/\$2800 0% \$0 \$0 ABC Rx HEQ	Single: 2 2-Person: 0 Family: 5	\$614.61 \$1,382.87 \$1,720.91	\$616.18 \$1,386.42 \$1,725.31
Basic Term Life with Medical Volume:	\$5,000	19	\$1.50	\$1.50

¹Medical Rate includes 4.349% for federal and state taxes and fees.

²Medical Rate includes 1.547% 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): 291C - Teacher

Ancillary plans with medical

Description	Benefits	Enrollment	2020 Rate	2021 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	06407-06 100% 75% (X-Rays) 50% \$1,000 50% \$1,500 2 Cleanings Jul-Jun	Single: 4 2-Person: 0 Family: 15	\$28.48 \$54.74 \$109.58	\$28.48 \$54.74 \$109.58
Vision Plan Year:	VSP 3 Jul-Jun	Single: 4 2-Person: 0 Family: 15	\$7.59 \$16.30 \$24.52	\$7.59 \$16.30 \$24.52
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$5,000 \$105,000	21	\$0.14 \$0.70	\$0.14 \$0.70
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$5,000 \$105,000	21	\$0.03 \$0.15	\$0.03 \$0.15
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 \$3,000 \$4,500 90 CDMF Same as any other illness Same as any other illness Family 2 years Waived No Yes \$84,041	21	\$0.70 \$28.70	\$0.66 \$26.41

Total Monthly Rate per Member: Single	\$65.62	\$63.33
Total Monthly Rate per Member: 2-Person	\$100.59	\$98.30
Total Monthly Rate per Member: Family	\$163.65	\$161.36

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Quoted Group(s): 291C - Teacher

Ancillary plans without medical

Description	Benefits	Enrollment	2020 Rate	2021 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	06407-07 100% 75% (X-Rays) 50% \$1,000 50% \$1,500 2 Cleanings Jul-Jun	Single: 0 2-Person: 0 Family: 0	\$27.18 \$51.33 \$102.19	\$27.18 \$51.33 \$102.19
Vision Plan Year:	VSP 3 Jul-Jun	Single: 4 2-Person: 0 Family: 15	\$7.59 \$16.30 \$24.52	\$7.59 \$16.30 \$24.52
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$10,000 \$0	0	\$0.14 \$1.40	\$0.14 \$1.40
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$10,000 \$0	0	\$0.03 \$0.30	\$0.03 \$0.30
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 \$3,000 \$4,500 90 CDMF Same as any other illness Same as any other illness Family 2 years Waived No Yes \$84,041	21	\$0.70 \$28.70	\$0.66 \$26.41

Total Monthly Rate per Member: Single	\$65.17	\$62.88
Total Monthly Rate per Member: 2-Person	\$98.03	\$95.74
Total Monthly Rate per Member: Family	\$157.11	\$154.82

COBRA RATES:

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