



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

## Benefit Program Cost Summary

### Effective 10/01/2017

**Onkama Consolidated Schools**  
 772 East Parkdale  
 Manistee, MI 49660

Group: 784D-Teachers & Counselors

Employer ID: 784  
 MESSA Field Rep: Viola Collin

Job	FT/PT Eligibility Rule ID	Job	FT/PT Eligibility Rule ID
Teacher - 100000	FT/PT 784D		

  

PAK A	Plan	Brief Description	Census Used	Rate	MESSA Codes
Medical	MESSA ABC Plan 1	In-Network Ded: \$1300 Single Cov; \$2600 2-Person & Family Cov Medical In-Network OOP Max Including IN Ded: \$2300 Single Cov; \$4600 2-Person & Family Cov Total IN OOP Max: \$2300 Single Cov; \$4600 2-Person & Family Cov Out-of-Network Ded: \$2600 Single Cov; \$5200 2-Person & Family Cov Out-of-Network Coins: 20% of approved amount after deductible Out-of-Network OOP Cap: \$4600 Single Cov; \$9200 2-Person & Family Cov Prescription Coverage: MESSA ABC Rx Health Savings Account with Health Equity	Single: 4 2-Person: 3 Family: 7	610.99 1,374.72 1,710.77	7V            2AKX 2AKY 2AKZ
Dental	Dent100/90/90/90:1500/1000:2 6101-0002	Class I: 100% Class II: 90% Class III: 90% Class IV: 90% Annual Max Class I, II, III: \$1,000, Lifetime Max Class IV: \$1,500 X-Rays paid under: Class II Adult Orthodontics: No Sealants: No Cleanings: 2 per year	Single: 4 2-Person: 3 Family: 7	33.35 66.68 128.29	D0077A            2AL3 2AL4 2AL5
Vision	VSP 3 G	Plan year July to July	Single: 4 2-Person: 3 Family: 7	6.99 15.01 22.56	V3GD 2ALC 2ALD 2ALE
Negotiated LTD	Neg LTD 66 2/3% Max \$5,000	Replacement %: 66.67 Maximum Benefit: \$5,000 Maximum Monthly Salary: \$7,500 Waiting Period: 60 Calendar Days Modified Fill Alcohol/Drug: Same as any other illness Mental/Nervous: Same as any other illness Social Security Offset: Family Own Occupation: 2 years Minimum Benefit: 5% Survivor Income Benefit: 0 months Pre-Existing Conditions: Waived Freeze on Offsets: Yes COLA: No Educational Supplemental Program: No	Individuals: 14 Volume: 62,746 Rate per 100: 0.82	36.75	LT359B 2E19
PAK Life	\$50,000 PAK Life		Individuals: 14 Volume: 700,000 Rate per 1000: 0.17	8.50	P0500B 2E13
PAK AD&D	\$50,000 PAK AD&D		Individuals: 14 Volume: 700,000 Rate per 1000: 0.03	1.50	K0500B 2E16
Basic Term Life	Basic Term Life w/Med \$5,000			1.50	BTLM01 001Z

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



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PAK C	Plan	Brief Description	Census Used	Rate	MESSA Codes
Medical	MESSA ABC Plan 1	In-Network Ded: \$1300 Single Cov; \$2600 2-Person & Family Cov In-Network Coins: 10% of approved amount after deductible Medical In-Network OOP Max Including IN Ded: \$3300 Single Cov; \$6550 2-Person & Family Cov Total IN OOP Max: \$3300 Single Cov; \$6550 2-Person & Family Cov Out-of-Network Ded: \$2600 Single Cov; \$5200 2-Person & Family Cov Out-of-Network Coins: 30% of approved amount after deductible Out-of-Network OOP Cap: \$6600 Single Cov; \$13200 2-Person & Family Cov Prescription Coverage: MESSA ABC Rx Health Savings Account with Health Equity	Single: 0 2-Person: 2 Family: 0	568.83 1,279.86 1,592.71	8Y          2AL0 2AL1 2AL2
Dental	Dent100/90/90/90:1500/1000:2 6101-0002	Class I: 100% Class II: 90% Class III: 90% Class IV: 90% Annual Max Class I, II, III: \$1,000, Lifetime Max Class IV: \$1,500 X-Rays paid under: Class II Adult Orthodontics: No Sealants: No Cleanings: 2 per year	Single: 0 2-Person: 2 Family: 0	33.35 66.68 128.29	D0077H          2AL9 2ALA 2ALB
Vision	VSP 3 G	Plan year July to July	Single: 0 2-Person: 2 Family: 0	6.99 15.01 22.56	V3GI 2AL1 2ALJ 2ALK
Negotiated LTD	Neg LTD 66 2/3% Max \$5,000	Replacement %: 66.67 Maximum Benefit: \$5,000 Maximum Monthly Salary: \$7,500 Waiting Period: 60 Calendar Days Modified Fill Alcohol/Drug: Same as any other illness Mental/Nervous: Same as any other illness Social Security Offset: Family Own Occupation: 2 years Minimum Benefit: 5% Survivor Income Benefit: 0 months Pre-Existing Conditions: Waived Freeze on Offsets: Yes COLA: No Educational Supplemental Program: No	Individuals: 2 Volume: 8,964 Rate per 100: 0.82	36.75	LT359D 2E1B
PAK Life	\$50,000 PAK Life		Individuals: 2 Volume: 100,000 Rate per 1000: 0.17	8.50	P0500D 2E15
PAK AD&D	\$50,000 PAK AD&D		Individuals: 2 Volume: 100,000 Rate per 1000: 0.03	1.50	K0500D 2E18
Basic Term Life	Basic Term Life w/Med \$5,000			1.50	BTLM02 001Z

**COBRA RATES:**

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

Please refer to plan coverage booklets for a complete description of benefits.

PAK rates - total

657.42

1409.80

1791.81

PAK B

88.59

129.94

199.10



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## Benefit Program Cost Summary

### Effective 10/01/2017

PAK B	Plan	Brief Description	Census Used	Rate	MESSA Codes
Dental	Dent100/90/90/90:1500/1000:2 6101-0003	Class I: 100% Class II: 90% Class III: 90% Class IV: 90% Annual Max Class I, II, III: \$1,000, Lifetime Max Class IV: \$1,500 X-Rays paid under: Class II Adult Orthodontics: No Sealants: No Cleanings: 2 per year	Single: 1 2-Person: 0 Family: 6	31.20 64.03 128.16	D0077B  2AL6 2AL7 2AL8
Vision	VSP 3 G	Plan year July to July	Single: 1 2-Person: 0 Family: 6	6.99 15.01 22.56	V3GH 2ALF 2ALG 2ALH
Negotiated LTD	Neg LTD 66 2/3% Max \$5,000	Replacement %: 66.67 Maximum Benefit: \$5,000 Maximum Monthly Salary: \$7,500 Waiting Period: 60 Calendar Days Modified Fill Alcohol/Drug: Same as any other illness Mental/Nervous: Same as any other illness Social Security Offset: Family Own Occupation: 2 years Minimum Benefit: 5% Survivor Income Benefit: 0 months Pre-Existing Conditions: Waived Freeze on Offsets: Yes COLA: No Educational Supplemental Program: No	Individuals: 7 Volume: 31,373 Rate per 100: 0.82	36.75	LT359C 2E1A
PAK Life	\$50,000 PAK Life		Individuals: 7 Volume: 350,000 Rate per 1000: 0.17	8.50	P0500C 2E14
PAK AD&D	\$50,000 PAK AD&D		Individuals: 7 Volume: 350,000 Rate per 1000: 0.03	1.50	K0500C 2E17

**COBRA RATES:**

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