



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

**2023 Rate Renewal Exclusively for
 Madison District Public School**

Quote #: 351082
 MESSA Field Rep: Mark Middlewood
 Date Created: 08/04/2022

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

Quoted Group(s): 686A - FT Teachers

Medical plans

Description	Benefits	Enrollment	2022 Rate ¹ w/ 2% Discount	2023 Rate ² w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (7F) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 16 2-Person: 6 Family: 13	\$754.74 \$1,698.16 \$2,113.27	\$826.44 \$1,859.50 \$2,314.05
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (8C) \$1000/\$2000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 3 2-Person: 0 Family: 5	\$711.72 \$1,601.36 \$1,992.81	\$779.34 \$1,753.51 \$2,182.14
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1500/\$3000 0% \$0 \$0 ABC Rx HEQ	Single: 15 2-Person: 1 Family: 1	\$667.09 \$1,500.95 \$1,867.85	\$730.46 \$1,643.55 \$2,045.32
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 2 (9H) \$2000/\$4000 20% \$0 \$0 ABC Rx HEQ	Single: 1 2-Person: 0 Family: 5	\$571.03 \$1,284.81 \$1,598.87	\$625.27 \$1,406.87 \$1,750.77
Basic Term Life with Medical Volume:	\$5,000	66	\$1.50	\$1.50

¹Medical Rate includes 1.490% for federal and state taxes and fees.

²Medical Rate includes 1.335% 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): 686A - FT Teachers

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	06503-01 100% 80% (X-Rays) 80% \$1,000 80% \$1,000 2 Cleanings, Sealants Jan-Dec	Single: 39 2-Person: 12 Family: 28	\$34.61 \$66.65 \$129.19	\$34.08 \$66.25 \$127.21
Vision Plan Year:	VSP 2 S Jan-Dec	Single: 39 2-Person: 12 Family: 28	\$6.05 \$12.95 \$19.51	\$5.47 \$11.71 \$17.64
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$40,000 \$3,160,000	79	\$0.10 \$4.00	\$0.10 \$4.00
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$40,000 \$3,160,000	79	\$0.03 \$1.20	\$0.03 \$1.20
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 \$4,000 \$6,000 90 CDSW 2 Year Limitation 2 Year Limitation Primary 2 years Waived No No \$315,856	79	\$0.43 \$17.02	\$0.43 \$17.19

Total Monthly Rate per Member: Single \$62.88 \$61.94
 Total Monthly Rate per Member: 2-Person \$101.82 \$100.35
 Total Monthly Rate per Member: Family \$170.92 \$167.24

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Quoted Group(s): 686D - FT Admin & Principals

Medical plans

Description	Benefits	Enrollment	2022 Rate ¹ w/ 2% Discount	2023 Rate ² w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (7F) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 3 2-Person: 1 Family: 3	\$754.74 \$1,698.16 \$2,113.27	\$826.44 \$1,859.50 \$2,314.05
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (8C) \$1000/\$2000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 1 2-Person: 1 Family: 1	\$711.72 \$1,601.36 \$1,992.81	\$779.34 \$1,753.51 \$2,182.14
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1500/\$3000 0% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 1 Family: 0	\$667.09 \$1,500.95 \$1,867.85	\$730.46 \$1,643.55 \$2,045.32
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 2 (9H) \$2000/\$4000 20% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 0	\$571.03 \$1,284.81 \$1,598.87	\$625.27 \$1,406.87 \$1,750.77
Basic Term Life with Medical Volume:	\$5,000	11	\$1.50	\$1.50

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²Medical Rate includes 1.335% for federal and state taxes and fees.

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Quoted Group(s): 686D - FT Admin & Principals

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	06503-03 100% 80% (X-Rays) 80% \$1,000 80% \$1,000 2 Cleanings, Sealants Jan-Dec	Single: 5 2-Person: 3 Family: 4	\$33.37 \$62.86 \$121.60	\$34.75 \$64.85 \$122.37
Vision Plan Year:	VSP 2 S Jan-Dec	Single: 5 2-Person: 3 Family: 4	\$6.05 \$12.95 \$19.51	\$5.47 \$11.71 \$17.64
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$100,000 \$1,200,000	12	\$0.10 \$10.00	\$0.10 \$10.00
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$100,000 \$1,200,000	12	\$0.03 \$3.00	\$0.03 \$3.00
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 \$4,000 \$6,000 90 CDSW 2 Year Limitation 2 Year Limitation Primary 2 years Waived No No \$58,302	12	\$0.56 \$28.26	\$0.64 \$31.09

Total Monthly Rate per Member: Single \$80.68 \$84.31
 Total Monthly Rate per Member: 2-Person \$117.07 \$120.65
 Total Monthly Rate per Member: Family \$182.37 \$184.10

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 Date Created: 08/04/2022

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

Quoted Group(s): 686F - FT Custodian/Bus Driver

Medical plans

Description	Benefits	Enrollment	2022 Rate ¹ w/ 2% Discount	2023 Rate ² w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (7F) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 5 2-Person: 3 Family: 0	\$754.74 \$1,698.16 \$2,113.27	\$826.44 \$1,859.50 \$2,314.05
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (8C) \$1000/\$2000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 4 2-Person: 1 Family: 1	\$711.72 \$1,601.36 \$1,992.81	\$779.34 \$1,753.51 \$2,182.14
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1500/\$3000 0% \$0 \$0 ABC Rx HEQ	Single: 1 2-Person: 0 Family: 0	\$667.09 \$1,500.95 \$1,867.85	\$730.46 \$1,643.55 \$2,045.32
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 2 (9H) \$2000/\$4000 20% \$0 \$0 ABC Rx HEQ	Single: 2 2-Person: 0 Family: 0	\$571.03 \$1,284.81 \$1,598.87	\$625.27 \$1,406.87 \$1,750.77
Basic Term Life with Medical Volume:	\$5,000	17	\$1.50	\$1.50

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Quoted Group(s): 686F - FT Custodian/Bus Driver

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	06503-06 100% 80% (X-Rays) 80% \$1,000 80% \$1,000 2 Cleanings, Sealants Jan-Dec	Single: 12 2-Person: 5 Family: 2	\$36.33 \$71.27 \$130.09	\$42.37 \$80.96 \$146.84
Vision Plan Year:	VSP 2 S Jan-Dec	Single: 12 2-Person: 5 Family: 2	\$6.05 \$12.95 \$19.51	\$5.47 \$11.71 \$17.64
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$18,000 \$342,000	19	\$0.10 \$1.80	\$0.10 \$1.80
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$18,000 \$342,000	19	\$0.03 \$0.54	\$0.03 \$0.54
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 CDSW 2 Year Limitation 2 Year Limitation Primary 2 years Waived No No \$48,233	19	\$1.96 \$49.37	\$2.08 \$52.80

Total Monthly Rate per Member: Single \$94.09 \$102.98
 Total Monthly Rate per Member: 2-Person \$135.93 \$147.81
 Total Monthly Rate per Member: Family \$201.31 \$219.62

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Quoted Group(s): 686G - FT Secretaries, Parapro

Medical plans

Description	Benefits	Enrollment	2022 Rate ¹ w/ 2% Discount	2023 Rate ² w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (7F) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 1 2-Person: 1 Family: 2	\$754.74 \$1,698.16 \$2,113.27	\$826.44 \$1,859.50 \$2,314.05
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (8C) \$1000/\$2000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 1 2-Person: 0 Family: 1	\$711.72 \$1,601.36 \$1,992.81	\$779.34 \$1,753.51 \$2,182.14
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1500/\$3000 0% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 0	\$667.09 \$1,500.95 \$1,867.85	\$730.46 \$1,643.55 \$2,045.32
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 2 (9H) \$2000/\$4000 20% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 1	\$571.03 \$1,284.81 \$1,598.87	\$625.27 \$1,406.87 \$1,750.77
Basic Term Life with Medical Volume:	\$5,000	7	\$1.50	\$1.50

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Quoted Group(s): 686G - FT Secretaries, Paraprofessionals

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	06503-07 100% 80% (X-Rays) 80% \$1,000 80% \$1,000 2 Cleanings, Sealants Jan-Dec	Single: 2 2-Person: 3 Family: 4	\$40.19 \$75.68 \$135.13	\$37.77 \$78.39 \$138.29
Vision Plan Year:	VSP 2 S Jan-Dec	Single: 2 2-Person: 3 Family: 4	\$6.05 \$12.95 \$19.51	\$5.47 \$11.71 \$17.64
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$180,000	9	\$0.10 \$2.00	\$0.10 \$2.00
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$180,000	9	\$0.03 \$0.60	\$0.03 \$0.60
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 CDSW 2 Year Limitation 2 Year Limitation Primary 2 years Waived No No \$23,313	9	\$1.21 \$30.54	\$1.07 \$27.72

Total Monthly Rate per Member: Single \$79.38 \$73.56
 Total Monthly Rate per Member: 2-Person \$121.77 \$120.42
 Total Monthly Rate per Member: Family \$187.78 \$186.25

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Quoted Group(s): 686J - Full Time Food Service

Medical plans

Description	Benefits	Enrollment	2022 Rate ¹ w/ 2% Discount	2023 Rate ² w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (7F) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 1 2-Person: 2 Family: 0	\$754.74 \$1,698.16 \$2,113.27	\$826.44 \$1,859.50 \$2,314.05
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (8C) \$1000/\$2000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 0 2-Person: 0 Family: 0	\$711.72 \$1,601.36 \$1,992.81	\$779.34 \$1,753.51 \$2,182.14
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1500/\$3000 0% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 0	\$667.09 \$1,500.95 \$1,867.85	\$730.46 \$1,643.55 \$2,045.32
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 2 (9H) \$2000/\$4000 20% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 0	\$571.03 \$1,284.81 \$1,598.87	\$625.27 \$1,406.87 \$1,750.77
Basic Term Life with Medical Volume:	\$5,000	3	\$1.50	\$1.50

¹Medical Rate includes 1.490% for federal and state taxes and fees.

²Medical Rate includes 1.335% for federal and state taxes and fees.

COBRA RATES:

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Quoted Group(s): 686J - Full Time Food Service

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	06503-09 100% 80% (X-Rays) 80% \$1,000 80% \$1,000 2 Cleanings, Sealants Jan-Dec	Single: 1 2-Person: 2 Family: 0	\$35.81 \$67.12 \$125.79	\$35.72 \$66.78 \$122.15
Vision Plan Year:	VSP 2 S Jan-Dec	Single: 1 2-Person: 2 Family: 0	\$6.05 \$12.95 \$19.51	\$5.47 \$11.71 \$17.64
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$18,000 \$54,000	3	\$0.10 \$1.80	\$0.10 \$1.80
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$18,000 \$54,000	3	\$0.03 \$0.54	\$0.03 \$0.54
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 CDSW 2 Year Limitation 2 Year Limitation Primary 2 years Waived No No \$6,121	3	\$2.43 \$39.90	\$2.33 \$47.54
Total Monthly Rate per Member: Single			\$84.10	\$91.07
Total Monthly Rate per Member: 2-Person			\$122.31	\$128.37
Total Monthly Rate per Member: Family			\$187.54	\$189.67

COBRA RATES:

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

Quoted Group(s): 686M - Part Time Custodian

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$14,000 \$14,000	1	\$0.10 \$1.40	\$0.10 \$1.40
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$14,000 \$14,000	1	\$0.03 \$0.42	\$0.03 \$0.42
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 CDSW 2 Year Limitation 2 Year Limitation Primary 2 years Waived No No \$1,860	1	\$1.93 \$35.90	\$1.73 \$32.18

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.

If you have any questions, please contact your MESSA Field Representative, Mark Middlewood, at 800.292.4910.



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

Quoted Group(s): 686N - PT Secretaries/Support Staff

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$20,000	1	\$0.10 \$2.00	\$0.10 \$2.00
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$20,000	1	\$0.03 \$0.60	\$0.03 \$0.60
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 CDSW 2 Year Limitation 2 Year Limitation Primary 2 years Waived No No \$2,191	1	\$1.92 \$42.07	\$1.85 \$40.53

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

Quoted Group(s): 6860 - Part Time Food Service

Ancillary plans

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Life Insurance Volume: Total Volume: Rate/\$1,000: Composite:	\$14,000 \$14,000	1	\$0.10 \$1.40	\$0.10 \$1.40
AD&D Coverage Volume: Total Volume: Rate/\$1,000: Composite:	\$14,000 \$14,000	1	\$0.03 \$0.42	\$0.03 \$0.42
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 CDSW 2 Year Limitation 2 Year Limitation Primary 2 years Waived No No \$1,394	1	\$3.06 \$42.66	\$2.91 \$40.57

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