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## Benefit Program Cost Summary

### Effective 01/01/2015

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 OOP Cap: \$1000 Single Cov; \$2000 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: \$2000 Single Cov; \$4000 2-Person & Family Cov Prescription Coverage: MESSA ABC Rx Includes EA1 Rider Health Savings Account with Health Equity	Single: 1 2-Person: 0 Family: 0	481.95 1,084.41 1,349.46	7U  2ZIJ 2ZIK 2ZIL
Dental	Dent75/75S/75/75:2000/1500:2 0457-0005	Class I: 75% Class II: 75% Class III: 75% Class IV: 75% Annual Max Class I, II, III: \$1,500, Lifetime Max Class IV: \$2,000 X-Rays paid under: Class II Adult Orthodontics: No Sealants: Yes Cleanings: 2 per year	Single: 1 2-Person: 0 Family: 0	30.21 57.24 106.40	D0593D  2ZIM 2ZIN 2ZIO
Vision	VSP 3	Plan year July to July	Single: 1 2-Person: 0 Family: 0	7.17 15.42 23.19	V3A 2ZIP 2ZIQ 2ZIR
Negotiated LTD	Neg LTD 70% Max \$2,500	Replacement %: 70.00 Maximum Benefit: \$2,500 Maximum Monthly Salary: \$3,571 Waiting Period: 90 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: Yes Educational Supplemental Program: No	Individuals: 1 Volume: 3,505 Rate per 100: 0.87	30.51	LT423D 2ZIS
PAK Life	\$45,000 PAK Life		Individuals: 1 Volume: 45,000 Rate per 1000: 0.12	5.40	P0450C 2ZIT
PAK AD&D	\$45,000 PAK AD&D		Individuals: 1 Volume: 45,000 Rate per 1000: 0.03	1.35	K0450C 2ZIU
Basic Term Life	Basic Term Life w/Med \$5,000			1.50	BTLM10 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.