

Dental Rate Summary Johannesburg-Lewiston Schools All Employees

Assumed Effective Date: 7/1/2014

					Monthly	Total Annual	
Current Plan(s) and Segment:		1P	2P	FF	Composite	Cost	Rate Period
					\$111.67	¢E 260	7/1/2014-
Administrators with Medical	Census			4	\$111.07	\$5,360	6/30/2015
80/80/80/80/1000/1300	Rate	\$30.43	\$57.99	\$111.67			
						ćoca	7/1/2014-
Administrators without Medical	Census		1		\$71.81	\$862	6/30/2015
80/80/80/80/1000/1300	Rate	\$38.02	\$71.81	\$126.05			
						Ć44 224	7/1/2014-
Support Staff	Census	1	8	4	\$71.93	\$11,221	6/30/2015
80/80/80/80/1000/1300	Rate	\$32.18	\$60.50	\$104.73			
						407.007	7/1/2014-
Teachers with Medical	Census	4	5	29	\$81.86	\$37,327	6/30/2015
80/80/80/80/1000/1300	Rate	\$27.18	\$51.34	\$94.66			
						40.504	7/1/2014-
Teachers without Medical	Census			2	\$105.58	\$2,534	6/30/2015
80/80/80/1000/1300	Rate	\$32.01	\$60.23	\$105.58			
	TOTALS:	5	14	39		\$57,304	

					Monthly		Estimated
Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Composite	Total Cost	Annual Savings
SET Fully Insured Dntal Plan 80/80/80/80/1000/1300	7/1/2014-6/30/2015	\$35.90	\$71.81	\$118.48	\$100.10	\$69,667	-\$12,363
SET Self-Funded Dental Plan 80/80/80/80/1000/1300	7/1/2014-6/30/2015	\$26.44	\$63.47	\$79.33	\$70.94	\$49,376	\$7,928

^{*}Current claims data was not available, therefore proposed SET SF plan cost was based on an industry standard utilization of 80% for dental

^{*}SET SF and insured dental plans do not include a network



DISCLAIMER: This document is a summary of certain plan features. It should not be interpreted as a complete comparison of the products represented.

Dental Plan Comparison
Johannesburg-Lewiston Schools
All Employees

	CURREN	T PLAN	CURREN	T PLAN	CURR	ENT PLAN	CUR	RRENT PLAN	CURREN	NT PLAN	. O	otion 1
Name Carrier	Administrators MES	SA	Administrators v MES	SA	N	oort Staff NESSA		rs with Medical MESSA	Teachers witl ME:	SSA	80/80/80/	ded Dental Plan /80/1000/1300 SET
Rate Period	7/1/2014-6	/30/2015	7/1/2014-6	5/30/2015	7/1/201	.4-6/30/2015	7/1/20	014-6/30/2015	7/1/2014-	6/30/2015	7/1/201	4-6/30/2015
Purchased Plan Features	Coverage A	llowance	Coverage /	Allowance	Coverag	ge Allowance	Covera	age Allowance	Coverage	Allowance	Coverag	e Allowance
Prevent %	80'	%	80	%		80%		80%	80	0%		80%
Basic %	80'	%	80	%		80%		80%	80	0%		80%
Major %	80	%	80	%		80%		80%	80	0%		80%
Ortho %	809	%	80	%		80%		80%	80	0%		80%
Basic Ded	\$0)	Şı)		\$0		\$0	\$	0		\$0
Major Ded	\$0)	Şı)		\$0		\$0	\$	0		\$0
Ortho Ded	\$0)	\$)		\$0		\$0	\$	0		\$0
Bas/Maj Max	\$1,0	00	\$1,0	000	Ş	51,000		\$1,000	\$1,0	000	Ş	1,000
Ortho Max	\$1,3	00	\$1,3	300	Ş	51,300		\$1,300	\$1,	300	\$	1,300
Sealants Covered	Ne		N	0		No		No	N	lo		No
Implants Covered	No		N	0		No		No	N	lo		No
Purchased Plan Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates
One Person (1P)	0	\$30.43	0	\$38.02	1	\$32.18	4	\$27.18	0	\$32.01	5	\$26.44
Two Person (2P)	0	\$57.99	1	\$71.81	8	\$60.50	5	\$51.34	0	\$60.23	14	\$63.47
Family (FF)	4	\$111.67	0	\$126.05	4	\$104.73	29	\$94.66	2	\$105.58	39	\$79.33
Total Annual Premium	4	\$5,360	1	\$862	13	\$11,221	38	\$37,327	2	\$2,534	58	\$49,376
Combined Annual Premium	\$57,	304	<t0"< td=""><td>TALS</td><td><1</td><td>TOTALS</td><td>·</td><td>TOTALS</td><td><t0< td=""><td>TALS</td><td></td><td></td></t0<></td></t0"<>	TALS	<1	TOTALS	·	TOTALS	<t0< td=""><td>TALS</td><td></td><td></td></t0<>	TALS		
Estimated Cost for Benefit Increase - \$ Estimated Savings - %											\$11	\$7,928 14%

^{*}Current claims data was not available, therefore proposed SET SF plan cost was based on an industry standard utilization of 80% for dental

^{*}SET SF dental plans do not include a network



Vision Plan Summary Johannesburg-Lewiston Schools All Employees

Assumed Effective Date: 7/1/2014

						Monthly	Total Annual	
	Current Plan(s) and Segment:		1P	2P	FF	Composite	Cost	Rate Period
Administrators		Census		1	4	\$21.64	\$1,298	7/1/2014-6/30/2015
	MESSA VSP Plan 3	Rate	\$7.17	\$15.42	\$23.19			
Support Staff		Census	1	8	4	\$17.18	\$2,679	7/1/2014-6/30/2015
	MESSA VSP Plan 3	Rate	\$7.17	\$15.42	\$23.19			
Teachers		Census	4	5	31	\$20.62	\$9,896	7/1/2014-6/30/2015
	MESSA VSP Plan 3	Rate	\$7.17	\$15.42	\$23.19			
		TOTALS:	5	14	39		\$13.874	

					Monthly	Total Annual	Estimated Annual
Product Name	Rate Period	1P	2P	FF	Composite	Cost	Savings
SET UltraVision Plan 3 - \$65 Frames	7/1/2014-6/30/2015	\$12.85	\$30.83	\$38.54	\$34.47	\$23,988	-\$10,114
SET Self-Funded Vision Plan	7/1/2014-6/30/2015	\$6.24	\$14.98	\$18.73	\$16.75	\$11,657	\$2,217

^{*}SET insured vision rates include ACA taxes and fees

^{*}Current claims data was not available, therefore proposed SET SF plan cost was based on an industry standard utilization of 75% for vision

^{*}SET SF and insured vision plans do not include a network



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Vision Plan Comparison

Johannesburg-Lewiston Schools All Employees

	CURRE	NT PLAN	CURRE	NT PLAN	CURREI	NT PLAN	Opti	on 1
Name Carrier		strators 'SP Plan 3		rt Staff /SP Plan 3		chers /SP Plan 3		ed Vision Plan ET
Rate Period	7/1/2014-	6/30/2015	7/1/2014-	6/30/2015	7/1/2014-	6/30/2015	7/1/2014-	6/30/2015
Purchased Plan Features	Benefit A	llowance	Benefit A	Allowance	Benefit A	llowance	Benefit A	llowance
Optometrist Exam	10	0%	10	0%	100%		10	0%
Ophthalmologist Exam	10	0%	10	0%	10	0%	10	0%
Regular Lenses	10	0%	10	0%	10	0%	10	0%
Bifocal Lenses	10	0%	10	0%	10	0%	10	0%
Trifocal Lenses	10	0%	10	0%	100%		10	0%
Lentiuclar Lenses	10	0%	10	0%	100%		10	0%
Frames	\$	65	\$	65	\$	65	\$	65
Necessary Contacts	10	0%	10	0%	10	0%	10	0%
Cosmetic Contacts	\$1	.15	\$1	115	\$115		\$1	.15
Exam Copay	\$0	.00	\$0	.00	\$0	.00	\$0	.00
Material Copay	\$0	.00	\$0	.00	\$0	.00	\$0	.00
Purchased Plan Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates
One Person (1P)	0	\$7.17	1	\$7.17	4	\$7.17	5	\$6.24
Two Person (2P)	1	\$15.42	8	\$15.42	5	\$15.42	14	\$14.98
Family (FF)	4	\$23.19	4	\$23.19	31	\$23.19	39	\$18.73
Total Annual Premium	5	\$1,298	13	\$2,679	40	\$9,896	58	\$11,657
Estimated Cost for Benefit Increase - \$							\$3	\$2,217

^{*}Current claims data was not available, therefore proposed SET SF plan cost was based on an industry standard utilization of 75% for vision

^{*}SET SF vision plans do not include a network



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Life Insurance Rate Summary

Johannesburg-Lewiston Schools All Employees Assumed Effective Date: 7/1/2014

Current

Segment(s)	# of Employees	Life Amount	AD&D Amount	Current Life Volume	Current AD&D Volume	Current Carrier	Current Life Rate/\$1,000	Current AD&D Rate/\$1,000	Current Rate Expiration	Current Annual Cost
Bus Drivers, Cooks, Counselors, Executive Assistant, Food Service Director, Secretaries, Supervisor &										
Teachers	56	\$30,000	\$30,000	\$1,680,000	\$1,680,000	MESSA	\$0.12	\$0.03	6/30/2015	\$3,024
Principals & Superintendent	3	\$30,000	\$30,000	\$90,000	\$90,000	MESSA	\$0.12	\$0.03	6/30/2015	\$162
Total/Average	59			\$1,770,000	\$1,770,000		\$0.12	\$0.03	•	\$3,186

Proposed Plans

Carrier	Life/\$1,000/	AD&D/\$1,000/				Total Annual	Total Annual
	Month	Month	Life Volume	AD&D Volume	Total Annual Cost	Savings - \$	Savings - %
RSLI	\$0.12	\$0.030	\$1.920.000	\$1,920,000	\$3.456	(\$270)	-8%

Coverage Levels

<u>Segment</u>	<u>Employees</u>	<u>Life Coverage</u>	AD&D Coverage
Bus Drivers, Cooks, Counselors, Executive Assistant,			
Food Service Director, Secretaries, Supervisor &			
Teachers	56	\$30,000	\$30,000
Principals & Superintendent	3	\$80,000	\$80,000



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LTD Insurance Rate Summary

Johannesburg-Lewiston Schools All Employees Assumed Effective Date: 7/1/2014

				Total Annual		Benefit % of	Max Monthly	Qualifying		Own	Survivor	Medical Waiver
Current Segment(s)	Current Carrier	Rate/ \$100/ Month	Volume	Cost	# Emp	Salary	Benefit	Period (Days)	COLA	Occupation	Benefit	of Premium
Teachers & Counselors	MESSA	\$0.83	\$172,490	\$17,180	40	66.67%	\$3,000	60	No	2 Year	None	Yes
Secretaries, Bus Drivers & Cooks Principals, Executive Assistant,	MESSA	\$3.42	\$23,738	\$9,742	13	66.67%	\$3,000	60	No	2 Year	None	Yes
Superintendent, Supervisors &												
Food Service Director	MESSA	\$1.08	\$24,396	\$3,162	6	66.67%	\$3,000	60	No	2 Year	None	Yes
Total/Average		\$1.14	\$220,624	\$30,084	59							<u> </u>

Proposed Plans

Carrier	Rate/\$100/ Month	Volume	Total Annual Cost	Total Annual Savings - \$	Total Annual Savings - %							
RSLI	\$0.50	\$220,624	\$13,237	\$16,846	56%							
Coverage Levels												
Segment	# of Emp	Benefit % of Salary	Maximum Monthly Benefit	Qualifying Period (Days)	Offsets	Unrestricted Drug/Alcohol	Unrestricted Mental/Nervous	COLA	Own Occupation	Survivor Benefit	Modified Fill	COBRA Medical Supplement
Segment	# OI LIIIP	Belletit % Of Salary	benefit	Feriou (Days)	Olisets	Di ug/Alconoi	IVIETICAL/INETVOUS	COLA	Own Occupation	benefit	Widumedim	Supplement
Teachers, Counselors, Secetaries,												
Bus Drivers, Cooks, Principals,												
Executive Assistant, Superintendent, Supervisors &												
Food Service Director	59	66.67%	\$3.000	60	Full Family	No	No	No	2 Year	None	Yes	\$1.200