



# Blue Cross Blue Shield of Michigan Rate Quote

## New Policy ERS Quote

Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

Agency: Action Benefits- Jason H      Client: Lakers School

Group/Subgroup/Suffix(Class) Specific Data  
 Group/Suffix: 0      000      Effective Date: 1/1/2016  
 BCBSM Area: 6      Renewal Date: 1/1/2016

Agent: Pigeon MI 48755  
 Assoc: None

County: Huron      Total Eligibles: 101  
 Zip: 48755      Customer Size: 56  
 Suffix/Class Size: 56  
 Number of FTE's: 101

Group SIC: 8211 Elementary and secondary      BCBSM: Class4  
 Sponsorship: Association      Average Age: 41.3

Quoted Benefits	Person			Med Suppl.	Total Monthly Premium
	One	Two	Family		
Simply Blue HSA \$2000/0%, \$2,000 Deductible, 0% Co-Insurance, \$3,000 OOP Max, Include Elective Abortion	307.68	738.43	923.03	299.18	
PD-TTC \$15/\$30/\$60-RXCM	46.33	111.19	138.99	315.30	
Total Medical and Drug Rate	354.01	849.62	1062.02	614.48	
Medical and Drug Enrollment	12	10	34	0	
Total Plan Rate	354.01	849.62	1062.02	614.48	
<b>Total Monthly Premium</b>					<b>\$48,853.01</b>

A Summary of Benefits and Coverage corresponding to the coverage being quoted has been provided to your agent by Blue Cross Blue Shield of Michigan. Your Agent is providing an SBC to you with this quote. A paper copy is available free of charge by contacting your agent that has provided the quote.

Certificates, riders, and rates are subject to regulatory approval. Please submit quote with enrollment documentation.

BCBSM reserves the right to adjust rates if any of the assumptions or calculations used in the quoting process are incorrect. Final rates will be determined by BCBSM underwriting based on actual group enrollment and participation.

**Cross RRL = 2.4780, Shield RRL = 1.6774**  
**Drug RRL = 7.6834, Dental RRL = 1.8172, Vision RRL = 1.5255**

This quote is based on there being no defined retiree segment. Note: If this is existing business that you are trying to transfer to ERS 50-99 please contact your Sales Representative or Managing Agent for assistance. The quoted rates may not be applicable.

To comply with new requirements in the Patient Protection and Affordable Care Act (PPACA)(also referred to as health care reform) groups may be required to make changes to their health insurance coverage. If necessary, this may result in an adjustment to the rates. To learn more about the PPACA, please visit our webpage, <http://www.bcsm.com/healthreform/>. You should also consult with your legal counsel on how you may comply with the law and regulations and the applicability to your plan. The Michigan Claims tax was based on your calculated rate of 0.



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Suffix/Class Size: 56

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 Sponsorship: Association      Average Age: 41.3

**Quoted Benefits**

Simply Blue \$1000, \$1,000 Deductible, 20% Co-Insurance, \$2,500 Embedded Co-Insurance Max, \$6,350 OOP Max, \$30 OV Copay, \$150 ER Copay, Include Elective Abortion

	One	Two	Family	Suppl.	Med
PD-TTC \$15/\$30/\$60-RXCM	108.72	260.93	326.16	315.30	
Total Medical and Drug Rate	417.30	1001.53	1251.91	614.48	
Medical and Drug Enrollment	12	10	34	0	
Total Plan Rate	417.30	1001.53	1251.91	614.48	
<b>Total Monthly Premium</b>					<b>\$57,587.86</b>

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