

Request for Benefit Implementation/Cancellation Forest Park Schools (Part of APA - Upper Peninsula) RBI Rates Effective 01/01/2024 through 12/31/2024

RBI#: 505282 MESSA Field Rep: RaeAnn Loy Date Created: 09/12/2023

Quoted Group(s): 434A - APA - UP Teacher

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ш	78	Cu	ш				•		3

Medical plans	<u> </u>				Quote ID	353597	
					4401010	Rate	
			Cens	us		w/ 2%	
Description	Current Benefits Rat	e	Use		Quoted Benefits	Discount	
Plan	Choices (7F)				Choices (7F)		
IN Deductible:	\$500/\$1000				\$500/\$1000		
IN Coinsurance:	0% \$841	.74	S:	3	0%	\$841.74	
OV/SV Copay:	\$20/\$20 \$1,893	- 1	2P:	4	\$20/\$20	\$1,893.90	
UC/ER Copay:	\$25/\$50 \$2,356			9	\$25/\$50	\$2,356.86	I I
Rx Coverage:	Saver Rx		•	-	Saver Rx	4 2,000.00	
Riders:	None	ł			None		
Plan	Choices (8C)				Choices (8C)		
IN Deductible:	\$1000/\$2000				\$1000/\$2000		
IN Coinsurance:	0% \$793	.76	S:	2	0%	\$793.76	
OV/SV Copay:	\$20/\$20 \$1,785		2P:	0	\$20/\$20	\$1,785.95	'I
UC/ER Copay:	\$25/\$50 \$2,222			1	\$25/\$50	\$2,222.51	
Rx Coverage:	Saver Rx		•	•	Saver Rx	42,222.01	
Riders:	None				None		
Plan	ABC Plan 1 (7V)				ABC Plan 1 (7V)		
IN Deductible:	\$1500/\$3000				\$1600/\$3200		
IN Coinsurance:	0% \$743	.98	S:	2	0%	\$ 743.98	
OV/SV Copay:	\$0/\$0 \$1,673		2P:	2	\$0/\$0	\$1,673.96	
UC/ER Copay:	\$0/\$0 \$2,083			2	\$0/\$0	\$2,083.15	I I
Rx Coverage:	ABC Rx			_	ABC Rx	V2,000.10	
Riders:	HEQ]			HEQ		
Plan	ABC Plan 2 (9H)				ABC Plan 2 (9H)		
IN Deductible:	\$2000/\$4000				\$2000/\$4000		
IN Coinsurance:	20% \$636	.85	S:	0	20%	\$636.85	
OV/SV Copay:	\$0/\$0 \$1,432		2P:	ō	\$0/\$0	\$1,432.90	
UC/ER Copay:	\$0/\$0 \$1,783			0	\$0/\$0	\$1,783.17	
Rx Coverage:	ABC Rx			-	ABC Rx	V.I	
Riders:	HEQ				HEQ		
Plan	Not Included in Benefit Package	e			Balance+ (ED)		
IN Deductible:		_			\$1600/\$3200		
IN Coinsurance:		ı	S:	0	20%	\$632.38	
OV/SV Copay:			2P:	0	\$25/\$50	\$1,422.85	
UC/ER Copay:			F:	0	\$50/\$200	\$1,770.66	
Rx Coverage:			-	-	Balance+Rx	7.,	
Riders:					HEQ		
Basic Term Life w/Med							
Volume:	\$5,000 \$1	.50		25	\$5,000	\$1.50	

The MESSA supplemental plans, accident, critical illness and hospital indemnity, are included as a bundled benefit with the MESSA Balance+ plan.



Request for Benefit Implementation/Cancellation **Forest Park Schools** (Part of APA - Upper Peninsula) RBI Rates Effective 01/01/2024 through 12/31/2024

RBI#: MESSA Field Rep: **Date Created:**

505282 RaeAnn Loy 09/12/2023

Quoted Group(s): 434A - APA - UP Teacher

<u>Ancil</u>	lary	plans	3

					Quote ID 35	3597		
Description			Cens					
		Rate	Use	<u>d_</u>	Quoted Benefits		Rate	
	123-13							
Diag & Prev: 100					100%			
	% (X-Rays)				90% (X-Rays)			
Major Services: 75%	% \$	37.18	S:	10	75%	\$	37.18	
Annual Max: \$20	000 \$	74.34	2P:	8	\$2000	\$	74.34	
Orthodontics: 75%	% \$1	46.70	F:	18	75%	\$	46.70	
Lifetime Max: \$30	000				\$3000			
Riders: 2 C	leanings				2 Cleanings			
Plan Year: Jan	-Dec				Jan-Dec			
Vision VS	P 3 Plus P 250CL	\$9.31	S:	10	VSP 3 Plus P 250CL	\$	9.31	
Pian Year: Jan	n-Dec \$	20.00	2P:	8	Jan-Dec	S	20.00	
		30.07	F:	18			30.07	
Life Insurance								
Volume: \$40	,000				\$40,000			
Total Volume: \$1,	440,000			36	\$1,440,000			
Rate/\$1,000:		\$0.09			,,	s	0.09	
Composite Rate:		\$3.60				Š	3.60	
AD&D Coverage								
Volume: \$40	0,000				\$40,000			
	440,000			36	\$1,440,000			
Rate/\$1,000:	<u>-</u>	\$0.03				s	0.03	
Composite Rate:		\$1.20				Š	1.20	
Total Monthly Rate/Member - 5		51.29		_		-	51.29	
Total Monthly Rate/Member - 2	•	99 14				7	99 14	

Total Monthly Rate/Member - 2P 99.14 99.14 Total Monthly Rate/Member - F \$ 181.57 \$ 181.57



Request for Benefit Implementation/Cancellation Forest Park Schools (Part of APA - Upper Peninsula) RBI Rates Effective 01/01/2024 through 12/31/2024

RBI#: MESSA Field Rep: Date Created:

505283 RaeAnn Loy 09/12/2023

Quoted Group(s): 434C - APA - UP Administrators

N	ı	ed	ical	pla	ns

Medical plans			·		
			Quote ID 35	53598	
				Rate	
		Census		w/ 2%	
Description	Current Benefits Rate	Used	Quoted Benefits	Discount	
Plan	Choices (7F)	1	Choices (7F)		
IN Deductible:	\$500/\$1000		\$500/\$1000		
IN Coinsurance:	0% \$841.74	s: 0	0%	\$841.74	
OV/SV Copay:	\$20/\$20 \$1,893.90	2P: 0	\$20/\$20	\$1,893.90	
UC/ER Copay:	\$25/\$50 \$2,356.80	F: 0	\$25/\$50	\$2,356.86	
Rx Coverage:	Saver Rx	1	Saver Rx		
Riders:	None		None		
Plan	Choices (8C)		Choices (8C)		
IN Deductible:	\$1000/\$2000		\$1000/\$2000		
IN Coinsurance:	0% \$793.70	s s: 0	0%	\$793.76	
OV/SV Copay:	\$20/\$20 \$1,785.9	2P: 0	\$20/\$20	\$1,785.95	
UC/ER Copay:	\$25/\$50 \$2,222.5	F: 1	\$25/\$50	\$2,222.51	
Rx Coverage:	Saver Rx		Saver Rx	-	
Riders:	None		None		
Plan	ABC Plan 1 (7V)		ABC Plan 1 (7V)		
IN Deductible:	\$1500/\$3000		\$1600/\$3200		
IN Coinsurance:	0% \$743.9	s: 0	0%	\$743.98	
OV/SV Copay:	\$0/\$0 \$1,673.90	2P: 1	\$0/\$0	\$1,673.96	
UC/ER Copay:	\$0/\$0 \$2,083.19	F: 2	\$0/\$0	\$2,083.15	
Rx Coverage:	ABC Rx		ABC Rx		
Riders:	HEQ		HEQ		
Pian	ABC Plan 2 (9H)	1	ABC Plan 2 (9H)		
IN Deductible:	\$2000/\$4000	ļ	\$2000/\$4000		
IN Coinsurance:	20% \$636.8	S: 0	20%	\$636.85	
OV/SV Copay:	\$0/\$0 \$1,432.9	2P: 0	\$0/\$0	\$1,432.90	
UC/ER Copay:	\$0/\$0 \$1,783.1	F: 0	\$0/\$0	\$1,783.17	
Rx Coverage:	ABC Rx		ABC Rx		
Riders:	HEQ		HEQ		
Plan	Not Included in Benefit Package		Balance+ (ED)		
IN Deductible:		1	\$1600/\$3200		
IN Coinsurance:		S: 0	20%	\$632.38	
OV/SV Copay:		2P: 0	\$25/\$50	\$1,422.85	
UC/ER Copay:		F: 0	\$50/\$200	\$1,770.66	
Rx Coverage:			Balance+Rx		
Riders:			HEQ		
Basic Term Life w/Med					
Volume:	\$5,000 \$1.50	4	\$5,000	\$1.50	

The MESSA supplemental plans, accident, critical illness and hospital indemnity, are included as a bundled benefit with the MESSA Balance+ plan.



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RBI#: MESSA Field Rep: Date Created:

505283 RaeAnn Loy 09/12/2023

Quoted Group(s): 434C - APA - UP Administrators

An	cill	arv	plans	S

Description Current Dental 06423-1 Diag & Prev: 100% (X Basic Services: 90% Major Services: 75% Annual Max: \$2000 Orthodontics: 75% Lifetime Max: \$3000	•	Census Used	Quoted Benefits	Rate		
Dental 06423-1 Diag & Prev: 100% (X) Basic Services: 90% Major Services: 75% Annual Max: \$2000 Orthodontics: 75%	4 (-Rays)	Osea	Quoted Benefits	Kate		
Diag & Prev: 100% (X) Basic Services: 90% Major Services: 75% Annual Max: \$2000 Orthodontics: 75%	(-Rays)					
Basic Services: 90% Major Services: 75% Annual Max: \$2000 Orthodontics: 75%	• •		100% (X-Rays)			
Major Services: 75% Annual Max: \$2000 Orthodontics: 75%	242.42		90%			
Annual Max: \$2000 Orthodontics: 75%		s: o	· -	\$ 40.48		
Orthodontics: 75%	\$76.99	2P: 1		\$ 76.99		
	\$154.96	F: 4	l ·	\$154.96		
Ellouino Max. 40000	Ψ10-1.30	'' 7	\$3000	¥ 134.50		
Riders: 2 Clean	nae		2 Cleanings]	
Plan Year: Jan-Dec			Jan-Dec			
Vision VSP 3 F		S: 0		\$ 10.46		
Plan Year: Jan-Dec		2P: 1		\$ 10.46 \$ 22.46		
Tian San	\$33.80		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$ 33.80		
Life insurance		1. 4		¥ 33.00		· · · · · · · · · · · · · · · · · · ·
Volume: \$100,00	0		\$100,000			
Total Volume: \$500,00		5	\$500,000			
Rate/\$1,000:	\$0.09		l '	\$ 0.09		
Composite Rate:	\$9.00		·	\$ 9.00		
AD&D Coverage				V 0.00		
Volume: \$100,00	0		\$100,000			
Total Volume: \$500,00	0	5	\$500,000			
Rate/\$1,000:	\$0.03		1	\$ 0.03		
Composite Rate:	\$3.00	1	!	\$ 3.00		
LTD Benefit				-		
Benefit: 66 2/3%	Max \$5,000		66 2/3% Max \$5,000			
Max. Monthly Salary: \$7,500			\$7,500			
Waiting Period: 60 CDM	F		60 CDMF			
Alcohol/Drug: Same as	s any other illness		Same as any other illness			
Mental/Nervous: Same a	s any other illness		Same as any other illness			
Soc. Sec. Offset: Family			Family			
Own-Occupation: 2 years			2 years			
Pre-Exist Condition: Waived			Waived			
COLA: No			No			
SS Freeze: Yes			Yes			
Volume: \$25,294		5	\$25,294			
Rate/\$100:	\$0.78	}	}	\$ 0.78		
Composite Rate:	\$39.46			\$ 39.46	<u> </u>	<u></u>

Total Monthly Rate/Member - S \$ 102.40 \$ 102.40 Total Monthly Rate/Member - 2P \$ 150.91 \$ 150.91 Total Monthly Rate/Member - F \$ 240.22 \$ 240.22



Request for Benefit Implementation/Cancellation Forest Park Schools (Part of APA - Upper Peninsula) RBI Rates Effective 01/01/2024 through 12/31/2024

RBI#: MESSA Field Rep: Date Created:

505284 RaeAnn Loy 09/12/2023

Quoted Group(s): 434K - APA - UP AFSCME Support Staff

Medica	l plans
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<u> </u>	i	Т		_	Quote ID	353600		
					Quote ib	Rate		
		- 1	Cens	ΠQ		w/ 2%		
Description	Current Benefits Rate	- 1	Use		Quoted Benefits	Discount		
Plan	Choices (7F)			_	Choices (7F)	Diocount		
IN Deductible:	\$500/\$1000				\$500/\$1000		1	
IN Coinsurance:	0% \$841.	74	S:	2	0%	\$841.74		
OV/SV Copay:	\$20/\$20 \$1,893.		2P:	ō	\$20/\$20	\$1,893.90		
UC/ER Copay:	\$25/\$50 \$2,356.			0	\$25/\$50	\$2,356.86		
Rx Coverage:	Saver Rx	۱	• •	Ŭ	Saver Rx	42,000.00		
Riders:	None				None			
Plan	Choices (8C)				Choices (8C)			
IN Deductible:	\$1000/\$2000				\$1000/\$2000			
IN Coinsurance:	0% \$793.	76	S:	1	0%	\$793.76		
OV/SV Copay:	\$20/\$20 \$1,785.		3. 2P:	0	\$20/\$20	\$1,785.95		
UC/ER Copay:	\$25/\$50 \$2,222.			0	\$25/\$50	\$2,222.51		
Rx Coverage:	Saver Rx	٠'	٠.	٠	Saver Rx	42,222.51		
Riders:	None				None			
Plan	ABC Plan 1 (7V)			_	ABC Plan 1 (7V)			
IN Deductible:	\$1500/\$3000				\$1600/\$3200			
IN Coinsurance:	0% \$743.	90	S:	1	0%	\$743.98		
OV/SV Copay:	\$0/\$0 \$1,673.		2P:	1	\$0/\$0	\$1,673.96		
UC/ER Copay:	\$0/\$0 \$2,083.			i	\$0/\$0	\$2,083.15		
Rx Coverage:	ABC Rx	٦,		•	ABC Rx	42,000.10		
Riders:	HEQ	- 1			HEQ			
Plan	ABC Plan 2 (9H)	\dashv			ABC Plan 2 (9H)			
IN Deductible:	\$2000/\$4000				\$2000/\$4000			
IN Coinsurance:	20% \$636.	85 :	S:	2	20%	\$636.85		
OV/SV Copay:	\$0/\$0 \$1,432.	1	2P:	0	\$0/\$0	\$1,432.90		
UC/ER Copay:	\$0/\$0 \$1,783.			0	\$0/\$0	\$1,783.17		
Rx Coverage:	ABC Rx	·	• •	•	ABC Rx	41,700.17		
Riders:	HEQ				HEQ			
Plan	Not Included in Benefit Package	_			Balance+ (ED)			
IN Deductible:					\$1600/\$3200			
IN Coinsurance:			S:	0	20%	\$632.38		
OV/SV Copay:		- 1	2P:	0	\$25/\$50	\$1,422.85		
UC/ER Copay:		- 1	F:	0	\$50/\$200	\$1,770.66		
Rx Coverage:		- []	•	-	Balance+Rx	Ţ.,.,J.		
Riders:					HEQ			
Basic Term Life w/Med		_		_				
Volume:	\$5,000 \$1.	50		8	\$5,000	\$1.50		

The MESSA supplemental plans, accident, critical illness and hospital indemnity, are included as a bundled benefit with the MESSA Balance+ plan.



Request for Benefit Implementation/Cancellation Forest Park Schools (Part of APA - Upper Peninsula) RBI Rates Effective 01/01/2024 through 12/31/2024

RBI#: MESSA Field Rep: Date Created:

505284 RaeAnn Loy 09/12/2023

Quoted Group(s): 434K - APA - UP AFSCME Support Staff

Incillary	plans v	with	medical	- 8	member
Micilial y	Pialis 1	AA I LI I	meulcai	- 0	memo

					Quote ID	353600		
			Cens					
Description	Current Benefits	Rate	Use	<u>d_</u>	Quoted Benefits	Rate	e	
Dental (All)*	06423-11							
Diag & Prev:	100%				100%			
Basic Services:	85% (X-Rays)				85% (X-Rays)			
Major Services:	50%	\$39.73	S:	7	50%	\$ 39.7	.73	
Annual Max:	\$1500	\$77.69	2P:	2	\$1500	\$ 77.6	.69	
Orthodontics:	50%	\$142.52	F:	3	50%	\$142.5	52	
Lifetime Max:	\$1500				\$1500			
Riders:	2 Cleanings				2 Cleanings			
Plan Year:	Jan-Dec				Jan-Dec			
Vision (All)*	VSP 3 Plus 200CL	\$8.64	S:	7	VSP 3 Plus 200CL	\$ 8.6	3.64	
Plan Year:	Jan-Dec	\$18.55	2P:	2	Jan-Dec	\$ 18.5	5.55	
		\$27.93	F:	3		\$ 27.9	.93	
Life Insurance								
Volume:	\$5,000				\$5,000			
Total Volume:	\$40,000			8	\$40,000			
Rate/\$1,000:		\$0.09				\$ 0.0	0.09	
Composite Rate:		\$0.45					.45	
AD&D Coverage								
Volume:	\$5,000				\$5,000			
Total Volume:	\$40,000			8	1			
Rate/\$1,000:		\$0.03				\$ 0.0	0.03	
Composite Rate:		\$0.15					.15	
Total Monthly Rate/Mer	mber - S	\$ 48.97					3.97	
T-1-1 54		•				7 70.	· · ·	

Total Monthly Rate/Member - 2P 96.84 96.84 Total Monthly Rate/Member - F \$ 171.05 \$ 171.05



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RBI#:

505284

RaeAnn Loy MESSA Field Rep: 09/12/2023 Date Created:

Quoted Group(s): 434K - APA - UP AFSCME Support Staff

				- 1	Quote ID 353600					
Description	Current Benefits	Rate	Censu		Quoted Benefits	Rate	.			
Dental (All)*	06423-11	itate	0360	•	Quoted Denents		•	 ·		
Diag & Prev:	100%				100%			l		
Basic Services:	85% (X-Rays)			ŀ	85% (X-Rays)			į		
Major Services:	50%	\$39.73	S:	7	50% (X-1\ays)	\$ 39.	72			
Annual Max:	\$1500	\$77.69	2P:	2	\$1500	\$ 77.0		İ		
Orthodontics:	50%	\$142.52	F:	3	50%	\$142.				
Lifetime Max:	\$1500	Ψ142.32	-	٦	\$1500	#142.	.52			
Riders:	2 Cleanings				2 Cleanings			- 1		
Plan Year:	Jan-Dec				Jan-Dec			İ		
Vision (All)*	VSP 3 Plus 200CL	\$8.64	S:	7	VSP 3 Plus 200CL	\$ 8.0	.64	 		
Plan Year:	Jan-Dec	\$18.55	2P:	2	Jan-Dec	\$ 18.				
r idir i dari	Juli-200	\$27.93	F:	3	Juli-DCC	\$ 27.9		1		
Life Insurance		V 200	· · · ·	Ť		<u> </u>				
Volume:	\$6,000				\$6,000					
Total Volume:	\$24,000			- 1	\$24,000			1		
Rate/\$1,000:		\$0.09				\$ 0.0	.09			
Composite Rate:		\$0.54				\$ 0.	.54	i		
AD&D Coverage										
Volume:	\$6,000				\$6,000					
Total Volume:	\$24,000			4	\$24,000					
Rate/\$1,000:		\$0.03				\$ 0.0	.03			
Composite Rate:		\$0.18				\$ 0.	.18			

Total Monthly Rate/Member - S \$ 49.09 49.09 Total Monthly Rate/Member - 2P \$ 96.96 \$ 96.96 Total Monthly Rate/Member - F \$ 171.17 171.17

^{*} Indicates total ancillary plan enrollment and volume for quoted group(s). The above rates are based on plans and enrollment as of 08/15/2023. 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, RaeAnn Loy, at 800.292.4910.