



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

**Quote Summary Exclusively for  
 Lakeview Community Schools**  
 Quote Effective 07/01/2011

Requested: 03/14/2011  
 Quote Request ID: 207708  
 MESSA Field Rep: Larry Donston

**Quoted Group(s): 135A-Teachers**

Description	Current - 135A	Rate	Census Used	Quote ID 314499	Rate	Quote ID 314503	Rate	Quote ID 314508	Rate
Medical:	PAK A MESSA Choices II	615.54	Single: 10	PAK A MESSA Choices II	597.12	PAK A MESSA Choices	586.54	PAK A MESSA Choices	541.63
IN Deductible:	\$100/\$200	1,383.09	2-Person: 16	\$200/\$400	1,341.64	\$300/\$600	1,317.85	\$500/\$1000	1,216.81
OOB Deductible:	\$250/\$500	1,536.59	Family: 49	\$400/\$800	1,490.55	\$600/\$1200	1,464.11	\$1000/\$2000	1,351.84
OV/UC/ER Copay:	\$10/\$25/\$50			\$10/\$25/\$50		\$10/\$25/\$50		\$10/\$25/\$50	
RX Drug Copay:	\$10/\$20			\$10/\$20		\$10/\$20		SaverRX	
Riders Included:	AI			AI		AI		AI	
Dental:		24.32	Single: 10		24.32		24.32		24.32
Class I:	100%	44.93	2-Person: 16	100%	44.93	100%	44.93	100%	44.93
Class II:	50%	84.31	Family: 49	50%	84.31	50%	84.31	50%	84.31
Class III:	50%			50%		50%		50%	
Annual Max:	\$1,000			\$1,000		\$1,000		\$1,000	
Class IV:	50%			50%		50%		50%	
Lifetime Max:	\$1,000			\$1,000		\$1,000		\$1,000	
Riders Included:	2 Cleanings, Adlt Ortho			2 Cleanings, Adlt Ortho		2 Cleanings, Adlt Ortho		2 Cleanings, Adlt Ortho	
Vision:	VSP 2	5.45	Single: 10	VSP 2	5.45	VSP 2	5.45	VSP 2	5.45
		11.72	2-Person: 16		11.72		11.72		11.72
		17.63	Family: 49		17.63		17.63		17.63
Life Ins:	\$5,000		75	\$5,000		\$5,000		\$5,000	
Volume:					375,000		375,000		375,000
Rate/\$1,000:					0.14		0.14		0.14
Composite:		0.70			0.70		0.70		0.70
AD&D Ins:	\$5,000		75	\$5,000		\$5,000		\$5,000	
Volume:					375,000		375,000		375,000
Rate/\$1,000:					0.03		0.03		0.03
Composite:		0.15			0.15		0.15		0.15
Dep Life Ins:	Not Included in Benefit Package			Not Included in Benefit Package		Not Included in Benefit Package		Not Included in Benefit Package	
Volume:									
Rate/\$1,000:									
Composite:									
LTD:	66 2/3% Max \$3,500		75	66 2/3% Max \$3,500		66 2/3% Max \$3,500		66 2/3% Max \$3,500	
Waiting Period:	90 CDSW			90 CDSW		90 CDSW		90 CDSW	
Alcohol/Drug:	2 Year Limitation			2 Year Limitation		2 Year Limitation		2 Year Limitation	
Mental/Nervous:	2 Year Limitation			2 Year Limitation		2 Year Limitation		2 Year Limitation	
SS Offset:	Family			Family		Family		Family	
COLA:	No			No		No		No	
Volume:					332,146		332,146		332,146
Rate/\$100:					0.52		0.52		0.52
Composite:		23.03			23.03		23.03		23.03
Total Monthly Rate Per Member - Single		\$669.19			\$650.77		\$640.19		\$595.28
Total Monthly Rate Per Member - 2 Person		\$1,463.62			\$1,422.17		\$1,398.38		\$1,297.34
Total Monthly Rate Per Member - Family		\$1,662.41			\$1,616.37		\$1,589.93		\$1,477.66

The above rates are based on the information provided. Material changes in the composition of the group such as number of enrollees, definable group, eligibility requirements or plans offered will affect final rates. Final rates will be calculated at time of implementation in accordance with MESSA Underwriting and Rating guidelines.



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**Quoted Group(s): 135A-Teachers**

Description	Current - 135A	Rate	Census Used	Quote ID 314499	Rate	Quote ID 314503	Rate	Quote ID 314508	Rate
Medical: IN Deductible: OON Deductible: OV/UC/ER Copay: RX Drug Copay: Riders Included:	PAK B Not Included in Benefit Package			PAK B Not Included in Benefit Package		PAK B Not Included in Benefit Package		PAK B Not Included in Benefit Package	
Dental: Class I: Class II: Class III: Annual Max: Class IV: Lifetime Max: Riders Included:		24.13 44.55 83.38	Single: 0 2-Person: 2 Family: 8		24.13 44.55 83.38		24.13 44.55 83.38		24.13 44.55 83.38
Vision:	VSP 2	5.45 11.72 17.63	Single: 0 2-Person: 2 Family: 8	VSP 2	5.45 11.72 17.63	VSP 2	5.45 11.72 17.63	VSP 2	5.45 11.72 17.63
Life Ins: Volume: Rate/\$1,000: Composite:	\$5,000		10	\$5,000	50,000 0.14 0.70	\$5,000	50,000 0.14 0.70	\$5,000	50,000 0.14 0.70
AD&D Ins: Volume: Rate/\$1,000: Composite:	\$5,000		10	\$5,000	50,000 0.03 0.15	\$5,000	50,000 0.03 0.15	\$5,000	50,000 0.03 0.15
Dep Life Ins: Volume: Rate/\$1,000: Composite:	Not Included in Benefit Package			Not Included in Benefit Package		Not Included in Benefit Package		Not Included in Benefit Package	
LTD: Waiting Period: Alcohol/Drug: Mental/Nervous: SS Offset: COLA: Volume: Rate/\$100: Composite:	66 2/3% Max \$3,500 90 CDSW 2 Year Limitation 2 Year Limitation Family No		10	66 2/3% Max \$3,500 90 CDSW 2 Year Limitation 2 Year Limitation Family No	35,788 0.52 18.61	66 2/3% Max \$3,500 90 CDSW 2 Year Limitation 2 Year Limitation Family No	35,788 0.52 18.61	66 2/3% Max \$3,500 90 CDSW 2 Year Limitation 2 Year Limitation Family No	35,788 0.52 18.61
Total Monthly Rate Per Member - Single		\$49.04			\$49.04		\$49.04		\$49.04
Total Monthly Rate Per Member - 2 Person		\$75.73			\$75.73		\$75.73		\$75.73
Total Monthly Rate Per Member - Family		\$120.47			\$120.47		\$120.47		\$120.47

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**Quote Summary Exclusively for  
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Quote Effective 07/01/2011

Requested: 03/14/2011  
 Quote Request ID: 207709  
 MESSA Field Rep: Larry Donston

**Quoted Group(s): 135A-Teachers**

Description	Current - 135A	Rate	Census Used	Quote ID 314511	Rate	Quote ID 314513	Rate
Medical:	PAK A MESSA Choices II	615.54	Single: 10	PAK A MESSA Choices II	583.69	PAK A MESSA Choices	576.58
IN Deductible:	\$100/\$200	1,383.09	2-Person: 16	\$200/\$400	1,311.43	\$200/\$400	1,295.44
OON Deductible:	\$250/\$500	1,536.59	Family: 49	\$400/\$800	1,456.97	\$400/\$800	1,439.22
OV/UC/ER Copay:	\$10/\$25/\$50			\$20/\$25/\$50		\$10/\$25/\$50	
RX Drug Copay:	\$10/\$20			\$10/\$20		SaverRX	
Riders Included:	AI			AI		AI	
Dental:		24.32	Single: 10		24.32		24.32
Class I:	100%	44.93	2-Person: 16	100%	44.93	100%	44.93
Class II:	50%	84.31	Family: 49	50%	84.31	50%	84.31
Class III:	50%			50%		50%	
Annual Max:	\$1,000			\$1,000		\$1,000	
Class IV:	50%			50%		50%	
Lifetime Max:	\$1,000			\$1,000		\$1,000	
Riders Included:	2 Cleanings, Adlt Ortho			2 Cleanings, Adlt Ortho		2 Cleanings, Adlt Ortho	
Vision:	VSP 2	5.45	Single: 10	VSP 2	5.45	VSP 2	5.45
		11.72	2-Person: 16		11.72		11.72
		17.63	Family: 49		17.63		17.63
Life Ins:	\$5,000		75	\$5,000		\$5,000	
Volume:				375,000		375,000	
Rate/\$1,000:				0.14		0.14	
Composite:	0.70			0.70		0.70	
AD&D Ins:	\$5,000		75	\$5,000		\$5,000	
Volume:				375,000		375,000	
Rate/\$1,000:				0.03		0.03	
Composite:	0.15			0.15		0.15	
Dep Life Ins:	Not Included in Benefit Package			Not Included in Benefit Package		Not Included in Benefit Package	
Volume:							
Rate/\$1,000:							
Composite:							
LTD:	66 2/3% Max \$3,500		75	66 2/3% Max \$3,500		66 2/3% Max \$3,500	
Waiting Period:	90 CDSW			90 CDSW		90 CDSW	
Alcohol/Drug:	2 Year Limitation			2 Year Limitation		2 Year Limitation	
Mental/Nervous:	2 Year Limitation			2 Year Limitation		2 Year Limitation	
SS Offset:	Family			Family		Family	
COLA:	No			No		No	
Volume:				332,146		332,146	
Rate/\$100:				0.52		0.52	
Composite:	23.03			23.03		23.03	
Total Monthly Rate Per Member - Single		\$669.19			\$637.34		\$630.23
Total Monthly Rate Per Member - 2 Person		\$1,463.62			\$1,391.96		\$1,375.97
Total Monthly Rate Per Member - Family		\$1,662.41			\$1,582.79		\$1,565.04

The above rates are based on the information provided. Material changes in the composition of the group such as number of enrollees, definable group, eligibility requirements or plans offered will affect final rates. Final rates will be calculated at time of implementation in accordance with MESSA Underwriting and Rating guidelines.



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Description	Current - 135A	Rate	Census Used	Quote ID 314511	Rate	Quote ID 314513	Rate
Medical:	PAK B			PAK B		PAK B	
IN Deductible:	Not Included in Benefit Package			Not Included in Benefit Package		Not Included in Benefit Package	
OCN Deductible:							
OV/UC/ER Copay:							
RX Drug Copay:							
Riders Included:							
Dental:		24.13	Single: 0		24.13		24.13
Class I:	100%	44.55	2-Person: 2	100%	44.55	100%	44.55
Class II:	50%	83.38	Family: 8	50%	83.38	50%	83.38
Class III:	50%			50%		50%	
Annual Max:	\$1,000			\$1,000		\$1,000	
Class IV:	50%			50%		50%	
Lifetime Max:	\$1,000			\$1,000		\$1,000	
Riders Included:	2 Cleanings, Adlt Ortho			2 Cleanings, Adlt Ortho		2 Cleanings, Adlt Ortho	
Vision:	VSP 2	5.45	Single: 0	VSP 2	5.45	VSP 2	5.45
		11.72	2-Person: 2		11.72		11.72
		17.63	Family: 8		17.63		17.63
Life Ins:	\$5,000		10	\$5,000		\$5,000	
Volume:					50,000		50,000
Rate/\$1,000:					0.14		0.14
Composite:		0.70			0.70		0.70
AD&D Ins:	\$5,000		10	\$5,000		\$5,000	
Volume:					50,000		50,000
Rate/\$1,000:					0.03		0.03
Composite:		0.15			0.15		0.15
Dep Life Ins:	Not Included in Benefit Package			Not Included in Benefit Package		Not Included in Benefit Package	
Volume:							
Rate/\$1,000:							
Composite:							
LTD:	66 2/3% Max \$3,500		10	66 2/3% Max \$3,500		66 2/3% Max \$3,500	
Waiting Period:	90 CDSW			90 CDSW		90 CDSW	
Alcohol/Drug:	2 Year Limitation			2 Year Limitation		2 Year Limitation	
Mental/Nervous:	2 Year Limitation			2 Year Limitation		2 Year Limitation	
SS Offset:	Family			Family		Family	
COLA:	No			No		No	
Volume:					35,788		35,788
Rate/\$100:					0.52		0.52
Composite:		18.61			18.61		18.61
Total Monthly Rate Per Member - Single		\$49.04			\$49.04		\$49.04
Total Monthly Rate Per Member - 2 Person		\$75.73			\$75.73		\$75.73
Total Monthly Rate Per Member - Family		\$120.47			\$120.47		\$120.47

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