



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

Benefit Program Cost Summary Effective 09/01/2009

Harbor Springs Public Schools
 800 State Road
 Harbor Springs, MI 49740

Group: 101C-Support Staff wking30+hrs

Employer ID: 101
 MESSA Field Rep: Carol Barrett

Job	FT/PT	Eligibility Rule ID	Job	FT/PT	Eligibility Rule ID
Food Service Worker - 130005	FT/PT	101C	Technician - 170052	FT/PT	101C
Facilities Maint Worker - 180003	FT/PT	101C	Custodian - 180014	FT/PT	101C
Bookkeeper/Acct - 190003	FT/PT	101C	Secretary - 190022	FT/PT	101C
Paraprofessional - 200013	FT/PT	101C	Teaching Assistant - 200014	FT/PT	101C
Bus Driver/Transportation - 210000	FT/PT	101C			

Standard Hours: 30.00 hours to 99.00 hours.

PAK A	Plan	Brief Description	Census Used	Rate	MESSA Codes
Medical	MESSA Choices II 07067-022	In-Network Deductible: None			36F
		Out-Of-Network Deductible: \$250/\$500	Member Only: 7	1,116.70	1XIC
		OV/UC/ER Copay: \$5/\$10/\$25	Member + Dependent: 3	1,116.70	1XID
		RX: \$10	Member + Dependents: 9	1,116.70	1XIE
Dental	Dent 90/90/90/90:1300(1000) 0974-0006	Class I: 90%			D0248A
		Class II: 90%			
		Class III: 90%			
		Class IV: 90%			
		Annual Max Class I, II, III: \$1,000, Lifetime Max Class IV: \$1,300			
		X-Rays paid under: Class II			
		Adult Orthodontics: No	Member Only: 7	81.75	1XIF
		Sealants: No	Member + Dependent: 3	81.75	1XIG
		Cleanings: 2 per year	Member + Dependents: 9	81.75	1XIH
Vision	VSP 3	Plan year July to July	Member Only: 7	15.85	V31 1XIL
			Member + Dependent: 3	15.85	1XIM
			Member + Dependents: 9	15.85	1XIN
Negotiated LTD	Neg LTD 66 2/3% Max \$2,500	Replacement %: 66.67	Individuals: 19	27.60	LT207E 122W
		Maximum Benefit: \$2,500	Volume: 48,109		
		Maximum Monthly Salary: \$3,750	Rate per 100: 1.09		
		Waiting Period: 90 Calendar Days Modified Fill			
		Alcohol/Drug: 2 Year Limitation			
		Mental/Nervous: 2 Year Limitation			
		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: No					
Educational Supplemental Program: No					
PAK Life	\$30,000 PAK Life		Individuals: 19	4.80	P0300C 122X
			Volume: 570,000		
			Rate per 1000: 0.16		
PAK AD&D	\$30,000 PAK AD&D		Individuals: 19	0.90	K0300C 122V
			Volume: 570,000		
			Rate per 1000: 0.03		
Basic Term Life	Basic Term Life w/Med \$5,000			1.50	BTLM01 001Z

COBRA RATES:

The COBRA rates for Dental and Vision are the same as the rates above, Medical COBRA rates for PAK A are as follows:

Medical - Member Only	585.31
Medical - Member + Dependent	1,316.94
Medical - Member + Dependents	1,463.27

\$ 1249¹⁰



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

Benefit Program Cost Summary

Effective 09/01/2009

PAK B	Plan	Brief Description	Census Used	Rate	MESSA Codes
Dental	Dent 90/90/90/90:1300(1000) 0974-0007	Class I: 90% Class II: 90% Class III: 90% Class IV: 90% Annual Max Class I, II, III: \$1,000, Lifetime Max Class IV: \$1,300 X-Rays paid under: Class II Adult Orthodontics: No Sealants: No Cleanings: 2 per year	Member Only: 0 Member + Dependent: 0 Member + Dependents: 2	106.01 106.01 106.01	D0248C 1XII 1XIJ 1XIK
Vision	VSP 3	Plan year July to July	Member Only: 0 Member + Dependent: 0 Member + Dependents: 2	20.93 20.93 20.93	V33 1XIO 1XIP 1XIQ
Negotiated LTD	Neg LTD 66 2/3% Max \$2,500	Replacement %: 66.67 Maximum Benefit: \$2,500 Maximum Monthly Salary: \$3,750 Waiting Period: 90 Calendar Days Modified Fill Alcohol/Drug: 2 Year Limitation Mental/Nervous: 2 Year Limitation 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: No Educational Supplemental Program: No	Individuals: 2 Volume: 5,503 Rate per 100: 1.09	29.99	LT207G 123E
PAK Life	\$10,000 PAK Life		Individuals: 2 Volume: 20,000 Rate per 1000: 0.16	1.60	P0100B 123F
PAK AD&D	\$10,000 PAK AD&D		Individuals: 2 Volume: 20,000 Rate per 1000: 0.03	0.30	K0100B 123D

COBRA RATES:

The COBRA rates for Dental and Vision are the same as the rates above.

\$ 158⁸³

Please refer to plan coverage booklets for a complete description of benefits.