



**Medical Rate Summary**  
**Battle Creek Public School District**  
**All Employees**  
 Assumed Effective Date: 1/1/2022

Current Plan(s) and Segment:	1P	2P	FF		Total Annual Cost
<b>All Employees Enrolled in MESSA Choices \$500-20%</b>	<b>Census</b> 39	22	65	126	
MESSA Choices \$500-20%; 3-Tier Rx	<b>Rate</b> \$728.98	\$1,640.20	\$2,041.15		\$2,366,272
<b>All Employees Enrolled in MESSA Choices \$1000-0%</b>	<b>Census</b> 45	22	41	108	
MESSA Choices \$1000-0%; Saver Rx	<b>Rate</b> \$803.08	\$1,806.91	\$2,248.61		\$2,017,004
<b>All Employees Enrolled in MESSA ABC Plan 1 \$1400-0%</b>	<b>Census</b> 1	2	6	9	
MESSA ABC Plan 1 \$1400-0%; 3-Tier Rx	<b>Rate</b> \$719.94	\$1,619.85	\$2,015.81		\$192,654
<b>All Employees Enrolled in MESSA ABC Plan 2 \$2000-0%</b>	<b>Census</b> 11	6	17	34	
MESSA ABC Plan 2 \$2000-0%; 3-Tier Rx	<b>Rate</b> \$673.04	\$1,514.34	\$1,884.51		\$582,314
<b>All Employees Enrolled in MESSA Essentials \$375-20%; EbM Rx</b>	<b>Census</b> 24	17	36	77	
MESSA Essentials \$375-20%; Essentials Rx	<b>Rate</b> \$571.70	\$1,286.31	\$1,600.74		\$1,118,577
<b>TOTALS:</b>	<b>120</b>	<b>69</b>	<b>165</b>	<b>354</b>	<b>\$6,276,820</b>

Product Name	1P Rate	2P Rate	FF Rate	Total Annual Cost	Estimated Annual Savings
<b>BCN HMO Plans</b>					
BCN HMO \$250-20% - \$2500 ECM; \$10/\$30/\$60/\$80/20%/20% Rx	\$752	\$1,804	\$2,255	\$7,042,038	-\$765,218
BCN HMO \$500-0%; \$10/\$30/\$60/\$80/20%/20% Rx	\$792	\$1,902	\$2,377	\$7,423,294	-\$1,146,473
BCN HMO \$500-20%; \$4/\$15/\$40/\$80/20%/20% Rx	\$735	\$1,764	\$2,206	\$6,886,536	-\$609,716
<b>BCN HMO HSA Plans</b>					
BCN HMO HSA \$1400-0%; \$10/\$30/\$60/\$80/20%/20% Rx	\$665	\$1,597	\$1,996	\$6,231,725	\$45,095
<b>BCBSM Simply Blue Plans</b>					
BCBSM SB PPO \$250-20%; \$2500 ECM; \$10/\$40/\$80 Rx	\$825	\$1,980	\$2,475	\$7,726,428	-\$1,449,608
BCBSM SB PPO \$500-20%; \$2500 ECM; \$10/\$40/\$80 Rx	\$801	\$1,922	\$2,402	\$7,500,300	-\$1,223,479
<b>BCBSM Simply Blue HSA Plans</b>					
BCBSM SB PPO HSA \$1400-0%; \$10/\$40/\$80 Rx	\$745	\$1,787	\$2,234	\$6,974,695	-\$697,875
<b>Priority Health POS Plans</b>					
Priority Health POS \$500-20%; \$10/\$40/\$80 Rx	\$700	\$1,575	\$1,960	\$6,193,879	\$82,941
<b>Priority Health POS HSA Plans</b>					
Priority Health POS HSA \$1400-0%; \$10/\$40 Rx	\$611	\$1,375	\$1,711	\$5,407,007	\$869,813
Priority Health POS HSA \$2000-0%; \$10/\$40 Rx	\$553	\$1,244	\$1,548	\$4,890,083	\$1,386,738
<b>MESSA</b>	Solicited and provided 2022 Renewal as bid				

\*MESSA rates include taxes and fees.

\*MESSA renewal rates exclude the required \$5,000 Basic Term Life fee of \$1.50.

\*Proposed rates are based on census provided by the district. Rates may change based on actual group enrollment and participation.

Product Name	1P Rate	2P Rate	FF Rate	Total Annual Cost	Estimated Annual Savings
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\*BCBSM, BCN & Priority Health rates include certain federal taxes and fees established by the Affordable Care Act as well as certain State taxes and assessments. The figures are estimates and may change for future billings.

\*BCBSM/BCN quoted rates do not include commission. SET SEG has added 3% to the quoted rates to account for commission.



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

Battle Creek Public School District  
All Employees  
Assumed Effective Date: 1/1/2022

Plan	RENEWAL PLAN		RENEWAL PLAN		RENEWAL PLAN		RENEWAL PLAN		RENEWAL PLAN		Option 1	Option 2	Option 3	
	All Employees Enrolled in MESSA Choices \$500-20%		All Employees Enrolled in MESSA Choices \$1000-0%		All Employees Enrolled in MESSA ABC Plan 1 \$1400-0%		All Employees Enrolled in MESSA ABC Plan 2 \$2000-0%		All Employees Enrolled in MESSA Essentials \$375-20%; EbM Rx		Priority Health POS \$500-20%; \$10/\$40/\$80 Rx	Priority Health POS HSA \$1400-0%; \$10/\$40 Rx	Priority Health POS HSA \$2000-0%; \$10/\$40 Rx	
	MESSA Choices \$500-20%; 3-Tier Rx		MESSA Choices \$1000-0%; Saver Rx		MESSA ABC Plan 1 \$1400-0%; 3-Tier Rx		MESSA ABC Plan 2 \$2000-0%; 3-Tier Rx		MESSA Essentials \$375-20%; Essentials Rx					
Rate Period	1/1/2022-12/31/2022		1/1/2022-12/31/2022		1/1/2022-12/31/2022		1/1/2022-12/31/2022		1/1/2022-12/31/2022		1/1/2022 - 12/31/2022		1/1/2022 - 12/31/2022	
Purchased Plan Features	In Network		In Network		In Network		In Network		In Network		In Network		In Network	
Deductible														
Annual Deductible - 1P	\$500		\$1,000		\$1,400		\$2,000		\$375		\$500		\$1,400	
Annual Deductible - 2P/FF	\$1,000		\$2,000		\$2,800		\$4,000		\$750		\$1,000		\$2,800	
Additional Cost After Deductible														
Employee Coinsurance after Deductible	20%		0%		0%		0%		20%		20%		0%	
Coinsurance Max - 1P	N/A		N/A		N/A		N/A		N/A		\$1,500		N/A	
Coinsurance Max - 2P/FF	N/A		N/A		N/A		N/A		N/A		\$3,000		N/A	
Out of Pocket Maximum														
Max ded, coinsurance, copays - 1P	Med Max:\$2,500 Rx Max: \$2,000		Med Max:\$2,000 Rx Max: \$1,000		\$3,400		\$4,000		\$8,150		\$6,350		\$2,300	
Max ded, coinsurance, copays - 2P/FF	Med Max: \$5,000 Rx Max: \$4,000		Med Max: \$4,000 Rx Max: \$2,000		\$6,800		\$7,000		\$16,300		\$12,700		\$4,600	
Copayments														
Office Visit/Specialist	\$20/\$20 after Ded.		\$20/\$20 after Ded.		0% after Ded.		0% after Ded.		\$25/\$50 after Deductible		\$20/\$35		0% after Ded.	
Urgent Care/ER	\$25/\$50 after Ded.		\$25/\$50 after Ded.		0% after Ded.		0% after Ded.		\$50/\$200 after Deductible		\$75/\$150		0% after Ded.	
Chiropractic Limit/Copay	38/Subject to Deductible and Coinsurance		38/Subject to Deductible and Coinsurance		38/0% after Ded.		38/0% after Ded.		12/Subject to Office Copay, Deductible and Coinsurance		30/\$20		30/0% after Ded.	
Rx Copay	3-Tier Rx		Saver Rx		3-Tier Rx		3-Tier Rx		Essentials Rx		\$10/\$40/\$80		\$10/\$40 after Ded.	
Total Monthly Costs	Census	Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates
One Person (1P)	39	\$728.98	45	\$803.08	1	\$719.94	11	\$673.04	24	\$571.70	120	\$700.11	120	\$611.17
Two Person (2P)	22	\$1,640.20	22	\$1,806.91	2	\$1,619.85	6	\$1,514.34	17	\$1,286.31	69	\$1,575.25	69	\$1,375.13
Family (FF)	65	\$2,041.15	41	\$2,248.61	6	\$2,015.81	17	\$1,884.51	36	\$1,600.74	165	\$1,960.31	165	\$1,711.27
<b>Total Annual Premium</b>	<b>126</b>	<b>\$2,366,272</b>	<b>108</b>	<b>\$2,017,004</b>	<b>9</b>	<b>\$192,654</b>	<b>34</b>	<b>\$582,314</b>	<b>77</b>	<b>\$1,118,577</b>	<b>354</b>	<b>\$6,193,879</b>	<b>354</b>	<b>\$5,407,007</b>
<b>Combined Current Lives</b>	354		< TOTALS		< TOTALS		< TOTALS		< TOTALS		< TOTALS		< TOTALS	
<b>Combined Annual Premium</b>	\$6,276,820		< TOTALS		< TOTALS		< TOTALS		< TOTALS		< TOTALS		< TOTALS	
One Person Cost Share														
One Person Rate	\$728.98		\$803.08		\$719.94		\$673.04		\$571.70		\$700.11		\$611.17	
One Person PA 152 Cap	\$608.71		\$608.71		\$608.71		\$608.71		\$608.71		\$608.71		\$608.71	
<b>One Person Monthly Cost</b>	<b>\$120.27</b>		<b>\$194.37</b>		<b>\$111.23</b>		<b>\$64.33</b>		<b>-\$37.01</b>		<b>\$91.40</b>		<b>\$2.46</b>	
Two Person Cost Share														
Two Person Rate	\$1,640.20		\$1,806.91		\$1,619.85		\$1,514.34		\$1,286.31		\$1,575.25		\$1,375.13	
Two Person PA 152 Cap	\$1,273.00		\$1,273.00		\$1,273.00		\$1,273.00		\$1,273.00		\$1,273.00		\$1,273.00	
<b>Two Person Monthly Cost</b>	<b>\$367.20</b>		<b>\$533.91</b>		<b>\$346.85</b>		<b>\$241.34</b>		<b>\$13.31</b>		<b>\$302.25</b>		<b>\$102.13</b>	
Family Cost Share														
Family Rate	\$2,041.15		\$2,248.61		\$2,015.81		\$1,884.51		\$1,600.74		\$1,960.31		\$1,711.27	
Family PA 152 Cap	\$1,660.12		\$1,660.12		\$1,660.12		\$1,660.12		\$1,660.12		\$1,660.12		\$1,660.12	
<b>Family Monthly Cost</b>	<b>\$381.03</b>		<b>\$588.49</b>		<b>\$355.69</b>		<b>\$224.39</b>		<b>-\$59.38</b>		<b>\$300.19</b>		<b>\$51.15</b>	

\*MESSA rates include taxes and fees.

\*MESSA renewal rates exclude the required \$5,000 Basic Term Life fee of \$1.50.

\*Proposed rates are based on census provided by the district. Rates may change based on actual group enrollment and participation.

\*Priority Health rates include certain federal taxes and fees established by the Affordable Care Act as well as certain State taxes and assessments. The figures are estimates and may change for future billings.



**Medical Rate Summary**

**Battle Creek Public School District**

**Everyone But Teachers**

Assumed Effective Date: 1/1/2022

Current Plan(s) and Segment:	1P	2P	FF		Total Annual Cost
<b>Admin/Food Service/Paras/Behavioral Specialist/Secretary/Facilities with MESSA Choices \$500-20%</b>	<b>Census</b> 11	10	17	38	
MESSA Choices \$500-20%; 3-Tier Rx	<b>Rate</b> \$728.98	\$1,640.20	\$2,041.15		\$709,444
<b>Admin/Food Service/Paras/Behavioral Specialist/Secretary/Facilities with MESSA Choices \$1000-0%</b>	<b>Census</b> 17	5	12	34	
MESSA Choices \$1000-0%; Saver Rx	<b>Rate</b> \$803.08	\$1,806.91	\$2,248.61		\$596,043
<b>Admin/Food Service/Paras/Behavioral Specialist/Secretary/Facilities with MESSA ABC Plan 1 \$1400-0%</b>	<b>Census</b> 1	1		2	
MESSA ABC Plan 1 \$1400-0%; 3-Tier Rx	<b>Rate</b> \$719.94	\$1,619.85	\$2,015.81		\$28,077
<b>Admin/Food Service/Paras/Behavioral Specialist/Secretary/Facilities with MESSA ABC Plan 2 \$2000-0%</b>	<b>Census</b> 3	3	6	12	
MESSA ABC Plan 2 \$2000-0%; 3-Tier Rx	<b>Rate</b> \$673.04	\$1,514.34	\$1,884.51		\$214,430
<b>All Employees Enrolled in MESSA Essentials \$375-20%; EbM Rx</b>	<b>Census</b> 24	17	36	77	
MESSA Essentials \$375-20%; Essentials Rx	<b>Rate</b> \$571.70	\$1,286.31	\$1,600.74		\$1,118,577
<b>TOTALS:</b>	56	36	71	<b>163</b>	<b>\$2,666,571</b>

Product Name	1P Rate	2P Rate	FF Rate	Total Annual Cost	Estimated Annual Savings
<b>BCN HMO Plans</b>					
BCN HMO \$250-20% - \$2500 ECM; \$10/\$30/\$60/\$80/20%/20% Rx	\$709	\$1,702	\$2,127	\$3,024,171	-\$357,600
BCN HMO \$500-0%; \$10/\$30/\$60/\$80/20%/20% Rx	\$753	\$1,808	\$2,260	\$3,212,780	-\$546,209
BCN HMO \$500-20%; \$4/\$15/\$40/\$80/20%/20% Rx	\$691	\$1,658	\$2,073	\$2,946,446	-\$279,875
<b>BCN HMO HSA Plans</b>					
BCN HMO HSA \$1400-0%; \$10/\$30/\$60/\$80/20%/20% Rx	\$653	\$1,567	\$1,959	\$2,784,312	-\$117,741
<b>BCBSM Simply Blue Plans</b>					
BCBSM SB PPO \$250-20%; \$2500 ECM; \$10/\$40/\$80 Rx	\$646	\$1,551	\$1,938	\$2,755,733	-\$89,161
BCBSM SB PPO \$500-20%; \$2500 ECM; \$10/\$40/\$80 Rx	\$731	\$1,753	\$2,192	\$3,115,938	-\$449,366
<b>BCBSM Simply Blue HSA Plans</b>					
BCBSM SB PPO HSA \$1400-0%; \$10/\$40/\$80 Rx	\$711	\$1,706	\$2,133	\$3,031,606	-\$365,035
<b>Priority Health</b>	Solicited and did not provide options				

\*MESSA rates include taxes and fees.

\*MESSA renewal rates exclude the required \$5,000 Basic Term Life fee of \$1.50.

\*Proposed rates are based on census provided by the district. Rates may change based on actual group enrollment and participation.

\*BCBSM and BCN rates include certain federal taxes and fees established by the Affordable Care Act as well as certain State taxes and assessments. The figures are estimates and may change for future billings.

Product Name	1P Rate	2P Rate	FF Rate	Total Annual Cost	Estimated Annual Savings
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\*BCBSM/BCN quoted rates do not include commission. SET SEG has added 3% to the quoted rates to account for commission.



**Dental Rate Summary**  
**Battle Creek Public School District**  
**All Employees**  
**Assumed Effective Date: 1/1/2022**

Current Plan(s) and Segment:	1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
Admin with medical Delta 80%/80%/80%/80% - \$1000/\$1300	Census 13 Rate \$28.80	12 \$54.85	32 \$102.14	\$75.46	\$51,613	1/1/2022 - 12/31/2022
Admin without medical Delta 80%/80%/80%/80% - \$1000/\$1300	Census 2 Rate \$27.53	2 \$51.54	7 \$99.16	\$77.48	\$10,227	1/1/2022 - 12/31/2022
Support Staff & Paraprofessional with medical Delta 80%/80%/80%/80% - \$1000/\$1300	Census 23 Rate \$30.40	15 \$57.95	10 \$104.51	\$54.45	\$31,363	1/1/2022 - 12/31/2022
Support Staff & Paraprofessional without medical Delta 80%/80%/80%/80% - \$1000/\$1300	Census 7 Rate \$27.51	5 \$52.99	6 \$97.73	\$57.99	\$12,527	1/1/2022 - 12/31/2022
PT Teacher Aide Delta 80%/80%/80%/80% - \$1000/\$1300	Census Rate \$31.15	 \$58.08	 \$101.72			1/1/2022 - 12/31/2022
PT Secretary Delta 80%/80%/80%/80% - \$1000/\$1300	Census Rate \$25.17	 \$46.12	 \$92.41			1/1/2022 - 12/31/2022
Teachers with medical Delta 80%/80%/80%/80% - \$1000/\$1300	Census 75 Rate \$27.19	45 \$52.08	119 \$99.21	\$67.74	\$194,266	1/1/2022 - 12/31/2022
Teachers without medical Delta 80%/80%/80%/80% - \$1000/\$1300	Census 19 Rate \$26.34	6 \$52.59	18 \$99.81	\$60.76	\$31,351	1/1/2022 - 12/31/2022
Behavioral Interventionists with medical Delta 80%/80%/80%/80% - \$1000/\$1300	Census 4 Rate \$29.76	3 \$56.79	3 \$105.88	\$60.71	\$7,285	1/1/2022 - 12/31/2022
Behavioral Interventionists without medical Delta 80%/80%/80%/80% - \$1000/\$1300	Census 2 Rate \$31.61	1 \$55.49	1 \$101.64	\$54.95	\$1,978	1/1/2022 - 12/31/2022
<b>TOTALS:</b>	<b>145</b>	<b>88</b>	<b>196</b>		<b>\$340,609</b>	

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Monthly Composite	Total Cost	Estimated Annual Savings
SET ADN SF Dental 80%/80%/80%/80% - \$1000/\$1300	1/1/2022 - 6/30/2022	\$32.18	\$58.02	\$113.36	\$74.57	\$383,885	-\$43,276
SET ADN SF Dental 100%/90%/80%/80% - \$1000/\$1300	1/1/2022 - 6/30/2022	\$36.62	\$66.89	\$131.74	\$86.29	\$444,207	-\$103,598
Ameritas Dental 80%/80%/80%/80% - \$1000/\$1300	1/1/2022 - 12/31/2022	\$28.36	\$54.12	\$100.16	\$66.45	\$342,073	-\$1,464
Ameritas Dental 100%/90%/80%/80% - \$1000/\$1300	1/1/2022 - 12/31/2022	\$30.20	\$58.32	\$112.04	\$73.36	\$377,652	-\$37,043
MetLife		Solicited and declined to quote					
SunLife		Solicited and declined to quote					
Unum		Solicited and declined to quote					

\*SETSEG SF/ADN rates are illustrative and include a \$6.35 per employee per month dental administration/network fee. The plan includes access to the ADN/Dentemax network.

\*SETSEG SF/ADN rates are based on enrollment and advance self-funded reserve is required.

\*Ameritas rates include taxes and fees.

\*Proposed rates are based on census provided by the district. Rates may change based on actual group enrollment and participation.



**Vision Rate Summary**  
**Battle Creek Public School District**  
**All Employees**  
**Assumed Effective Date: 1/1/2022**

Current Plan(s) and Segment:		1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
All Employees Enrolled	<b>Census</b>	146	90	191	\$18.10	\$92,744	1/1/22-12/31/22
MESSA VSP 3G \$0/\$0 Copay - \$1360 Frame/\$130 Contacts	<b>Rate</b>	\$8.09	\$17.36	\$26.10			
	<b>TOTALS:</b>	<b>146</b>	<b>90</b>	<b>191</b>		<b>\$92,744</b>	

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Monthly Composite	Total Cost	Estimated Annual Savings
Eyemed 3-Gold Vision \$0/\$0 Copay - \$130 Frame/\$135 Contacts	1/1/2022 - 12/31/2025	\$7.80	\$14.82	\$21.77	\$15.53	\$79,568	\$13,176
EyeMed 3-Plus Platinum Vision \$0/\$0 Copay - \$130 Frame/\$250 Contacts	1/1/2022 - 12/31/2025	\$9.75	\$18.52	\$27.20	\$19.40	\$99,426	-\$6,682
SET ADN SF Vision \$0/\$0 Copay - \$130 Frame/\$135 Contacts	1/1/2022 - 6/30/2022	\$15.62	\$29.38	\$58.48	\$37.69	\$193,133	-\$100,389
SET ADN SF Vision \$0/\$0 Copay - \$130 Frame/\$1250 Contacts	1/1/2022 - 6/30/2022	\$20.96	\$40.07	\$80.47	\$51.61	\$264,435	-\$171,691
Ameritas Plan 1 Vision \$0/\$0 Copay - \$130 Frame/\$130 Contacts	1/1/2022 - 12/31/2023	\$6.96	\$13.64	\$19.72	\$14.08	\$72,123	\$20,620
Ameritas Plan 5 Vision \$0/\$0 Copay - \$150 Frame/\$150 Contacts	1/1/2022 - 12/31/2023	\$7.16	\$14.04	\$20.24	\$14.46	\$74,098	\$18,646
Ameritas Plan 7 Vision \$0/\$0 Copay - \$180 Frame/\$180 Contacts	1/1/2022 - 12/31/2023	\$7.52	\$14.68	\$21.28	\$15.18	\$77,803	\$14,940
MetLife		Solicited and declined to quote					
SunLife		Solicited and declined to quote					

\*SETSEG SF/ADN rates are illustrative and include a \$1.85 per employee per month vision administration fee.

\*SETSEG SF/ADN rates are based on enrollment and advance self-funded reserve is required.

\*Ameritas rates include taxes and fees.

\*Proposed rates are based on census provided by the district. Rates may change based on actual group enrollment and participation.



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## Life Insurance Rate Summary

Battle Creek Public School District  
All Employees  
Assumed Effective Date: 1/1/2022

### Current (Baseline)

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
Teachers, Admin, Support Staff, Paraprofessionals, Secretaries	404	\$10,000	\$10,000	\$4,040,000	\$4,040,000	MESSA	\$0.14	\$0.03	12/31/2022	\$8,242
Paraprofessionals & PT Secretaries w/out Medical	12	\$15,000	\$15,000	\$180,000	\$180,000	MESSA	\$0.14	\$0.03	12/31/2022	\$367
Behavioral Interventionists	13	\$1,000	\$1,000	\$13,000	\$13,000	MESSA	\$0.14	\$0.03	12/31/2022	\$27
<b>Total/Average</b>	<b>429</b>			<b>\$4,233,000</b>	<b>\$4,233,000</b>		<b>\$0.14</b>	<b>\$0.03</b>		<b>\$8,635</b>

### Proposed Plans

Carrier	Life/\$1,000/ Month	AD&D/\$1,000/ Month	Life Volume	AD&D Volume	Total Annual Cost	Total Annual Savings - \$	Total Annual Savings - %
RSLI	\$0.13	\$0.03	\$4,438,000	\$4,438,000	\$8,521	\$114	1%
OneAmerica	\$0.11	\$0.02	\$4,233,000	\$4,233,000	\$6,350	\$2,286	26%
MetLife	Declined to Quote						
UNUM	Declined to Quote						
SunLife	Declined to Quote						

### Coverage Levels

Segment	Employees	Life Coverage	AD&D Coverage
Teachers, Admin, Support Staff, Paraprofessionals, Secretaries	404	\$10,000	\$10,000
Paraprofessionals & PT Secretaries w/out Medical	12	\$15,000	\$15,000
Behavioral Interventionists	13	\$15,000	\$15,000

\*OneAmerica - 3 year rate guarantee

\*RSLI - 2 year rate guarantee





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## LTD Insurance Rate Summary

Battle Creek Public School District

All Teachers

Assumed Effective Date: 1/1/2022

Current Segment(s)	Current Carrier	Rate/ \$100/ Month	Volume	Total Annual Cost	# Emp	Benefit % of Salary	Max Monthly Benefit	Qualifying Period (Days)	COLA	Own Occupation	Survivor Benefit	Medical Waiver of Premium
Teachers	MESSA	\$0.45	\$1,135,043	\$61,292	282	66.67%	\$3,500	30	No	2 Year	None	Yes
<b>Total/Average</b>		<b>\$0.45</b>	<b>\$1,135,043</b>	<b>\$61,292</b>	<b>282</b>							

### Proposed Plans

Carrier	Rate/\$100/ Month	Volume	Total Annual Cost	Total Annual Savings - \$	Total Annual Savings - %
RSLI	\$0.50	\$1,227,002	\$73,620	(\$12,328)	-20%
OneAmerica	\$0.46	\$1,227,026	\$66,996	(\$5,703)	-9%
MetLife	Declined to Quote				
UNUM	Declined to Quote				
SunLife	Declined to Quote				

### 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
<u>RSLI</u>												
Teachers	282	66.67%	\$3,500	30	Full Family	No	No	No	2 Year	3 Month	Yes	\$1,200
<u>OneAmerica</u>												
Teachers - >30 days sick bank	159	66.67%	\$3,500	30	Full Family	No	No	Yes	2 Year	3 Month	Yes	
Teachers - 31-89 days sick bank	81	66.67%	\$3,500	60	Full Family	No	No	Yes	2 Year	3 Month	Yes	
Teachers - <90 days sick bank	42	66.67%	\$3,500	90	Full Family	No	No	Yes	2 Year	3 Month	Yes	

\*OneAmerica - 3 year rate guarantee

\*RSLI - 2 year rate guarantee