

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

Quote Summary Exclusively for West Branch-Rose City Area Sch Rates Effective 01/01/2026 through 12/31/2026

Quote Request ID: 2001175 MESSA Field Rep: Jake Louks Date Created: 10/16/2025

Quoted Group(s): 951C - Teachers

Medical plans

Medical plans				Quote ID 3001452			
						Rate	
			Cen	sus		w/ 2%	
Description	Current Benefits	Rate	Us		Quoted Benefits	Discount	
Plan	Choices (6Z)				ABC Plan 2 (DJ)		
IN Deductible:	\$500/\$1000				\$2000/\$4000		
IN Coinsurance:	0%		S:	19	0%	\$637.05	
TH:24-7/MH/PC Copay:	\$20/\$20/\$20		2P:	11	\$0/\$0/\$0	\$1,433.36	
OV/SV/UC/ER Copay:	\$20/\$20/\$25/\$50		F:	19	\$0/\$0/\$0/\$0	\$1,783.74	
Rx Coverage:	Saver Rx				3Tier		
Riders:	EA1				EA1, HEQ		
Plan	Choices (EH)				Choices (EH)		
IN Deductible:	\$500/\$1000				\$500/\$1000		
IN Coinsurance:	0%	\$746.97	S:	1	0%	\$746.97	
TH:24-7/MH/PC Copay:	\$20/\$20/\$20	\$1,680.68	2P:	4	\$20/\$20/\$20	\$1,680.68	
OV/SV/UC/ER Copay:	\$20/\$20/\$25/\$50	\$2,091.52	F:	9	\$20/\$20/\$25/\$50	\$2,091.52	
Rx Coverage:	5Tier				5Tier		
Riders:	EA1				EA1		
Plan	Choices (AV)				Choices (AV)		
IN Deductible:	\$500/\$1000				\$500/\$1000		
IN Coinsurance:	20%	\$686.52	l	1	20%	\$686.52	
TH:24-7/MH/PC Copay:	\$20/\$20/\$20	\$1,544.67	2P:	0	\$20/\$20/\$20	\$1,544.67	
OV/SV/UC/ER Copay:	\$20/\$20/\$25/\$50	\$1,922.26	F:	1	\$20/\$20/\$25/\$50	\$1,922.26	
Rx Coverage:	3Tier Mail				3Tier Mail		
Riders:	EA1				EA1		
Plan	ABC Plan 1 (7U)				ABC Plan 2 (FH)		
IN Deductible:	\$1650/\$3300				\$2000/\$4000		
IN Coinsurance:	0%		S:	5	0%	\$605.61	
TH:24-7/MH/PC Copay:	\$0/\$0/\$0		2P:	7	\$0/\$0/\$0	\$1,362.62	
OV/SV/UC/ER Copay:	\$0/\$0/\$0/\$0		F:	15	\$0/\$0/\$0/\$0	\$1,695.71	
Rx Coverage:	ABC Rx				5Tier		
Riders:	EA1, HEQ				EA1, HEQ		
Plan	ABC Plan 1 (EV)				ABC Plan 1 (EV)		
IN Deductible:	\$1650/\$3300				\$1700/\$3400		
IN Coinsurance:	0%	\$656.30	l	1	0%	\$656.30	
TH:24-7/MH/PC Copay:	\$0/\$0/\$0	\$1,476.68	l	0	\$0/\$0/\$0	\$1,476.68	
OV/SV/UC/ER Copay:	\$0/\$0/\$0/\$0	\$1,837.64	F:	5	\$0/\$0/\$0/\$0	\$1,837.64	
Rx Coverage:	5Tier				5Tier		
Riders:	EA1, HEQ				EA1, HEQ		
Basic Term Life w/Med							
Volume:	\$5,000	\$1.50		98	\$5,000	\$1.50	

Medical plans with SaverRx or ABCRx, with and without Mandatory Mail, will be discontinued effective 12/31/2025. Rate information is not available for these plan designs with a quote effective date of 01/01/2026 or later.



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Ancillary plans

Anciliary plans	<u> </u>			—				Т	
		,	1	ļ	Quote ID 3001	452	2		
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	1.		Cens		1			1	
Description	Current Benefits	Rate	Use	:d	Quoted Benefits	F	Rate		
Dental	00827-02	J	1	ļ					
Diag & Prev:	100% (X-Rays)	ļ	1	ļ	100% (X-Rays)				
Basic Services:	80%	ļ	1	ļ	80%				
Major Services:	80%	\$43.05		28	80%		43.05		
Annual Max:	\$2000	\$80.86	1	30	\$2000		80.86		
Orthodontics:	60%	\$168.24	F:	61	60%	\$1	168.24		
Lifetime Max:	\$2000	ļ	1	ļ	\$2000				
Riders:	2 Cleanings	ļ	1	ļ	2 Cleanings				
Plan Year:	Jan-Dec	!	<u> </u>	!	Jan-Dec				
Vision	MESSA Vision Preferred	\$6.18	S:	28	MESSA Vision Preferred	\$	6.18		
Plan Year:	Jan-Dec	\$13.25	2P:	30	Jan-Dec	\$	13.25		
		\$19.95	1	61		\$	19.95		
Life Insurance									
Volume:	\$50,000	ļ	1	ļ	\$50,000				
Total Volume:	\$5,950,000	ļ	1 1	119	\$5,950,000				
Rate/\$1,000:		\$0.12	1	ļ		\$	0.12		
Composite Rate:		\$6.00		ļ					
AD&D Coverage									
Volume:	\$50,000	J		J	\$50,000				
Total Volume:	\$5,950,000	ļ	1 1	119					
Rate/\$1,000:	1	\$0.03	1	1		\$	0.03		
Composite Rate:		\$1.50		ļ		•	1.50		
LTD Benefit									
Benefit:	66 2/3% Max \$5,000	I		J	66 2/3% Max \$5,000				
Max. Monthly Salary:	\$7.500	ı		J	\$7,500				
Waiting Period:	90 CDMF	ļ	1	ļ	90 CDMF				
Alcohol/Drug:	2 Year Limitation	ļ	1	ļ	2 Year Limitation				
Mental/Nervous:	2 Year Limitation	ļ	1	ļ	2 Year Limitation				
Soc. Sec. Offset:	Family	ļ	1	ļ	Family				
Own-Occupation:	2 years	I		Į	2 years				
Pre-Exist Condition:	Waived	I		Į	2 years Waived				
COLA:	No	I		Į	No				
SS Freeze:	Yes	I		Į	Yes				
Volume:	\$612,020	I	Ι,	110					
	\$612,020	#0.00	'	119	\$612,020	•	0.00		
Rate/\$100:		\$0.33	1	ļ		\$	0.33		
Composite Rate:		\$16.97	Ь				16.97		
Total Monthly Rate/Memb	Jer - S 3	\$ 73.70			•	\$	73.70		

Total Monthly Rate/Member - 2P \$ 118.58 \$ 118.58 Total Monthly Rate/Member - F \$ 212.66 \$ 212.66