



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

**2022 Rate Renewal Exclusively for
 North Central Area Schools
 (Part of APA - Upper Peninsula)**

Quote #: 349120
 MESSA Field Rep: RaeAnn Loy
 Date Created: 08/16/2021

Rates Effective 01/01/2022 through 12/31/2022

Quoted Group(s): 584A - APA - UP Support Staff

Medical plans

Description	Benefits	Enrollment	2021 Rate ¹ w/ 2% Discount	2022 Rate ² w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (7F) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 3 2-Person: 4 Family: 3	\$739.06 \$1,662.87 \$2,069.36	\$756.39 \$1,701.86 \$2,117.88
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (8C) \$1000/\$2000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 0 2-Person: 0 Family: 0	\$696.93 \$1,568.08 \$1,951.40	\$713.27 \$1,604.86 \$1,997.16
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1400/\$2800 0% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 0	\$659.82 \$1,484.61 \$1,847.50	\$668.54 \$1,504.22 \$1,871.92
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 2 (9H) \$2000/\$4000 20% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 1	\$564.81 \$1,270.82 \$1,581.47	\$572.27 \$1,287.61 \$1,602.36
Basic Term Life with Medical Volume:	\$5,000	11	\$1.50	\$1.50

¹Medical Rate includes 1.547% for federal and state taxes and fees.

²Medical Rate includes 1.490% for federal and state taxes and fees.

COBRA RATES:

The COBRA rates for this group are the same as the rates above.



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

**2022 Rate Renewal Exclusively for
 North Central Area Schools**

(Part of APA - Upper Peninsula)

Rates Effective 01/01/2022 through 12/31/2022

Quote #: 349120
 MESSA Field Rep: RaeAnn Loy
 Date Created: 08/16/2021

Quoted Group(s): 584A - APA - UP Support Staff

Ancillary plans with medical - 11 members

Description	Benefits	Enrollment	2021 Rate	2022 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00925-06 100% 70% (X-Rays) 70% \$1,500 70% \$1,500 2 Cleanings Jul-Jun	Single: 1 2-Person: 5 Family: 5	\$35.96 \$68.24 \$126.22	\$35.96 \$68.24 \$126.22
Vision (All)* Plan Year:	VSP 3 G Jul-Jun	Single: 2 2-Person: 6 Family: 5	\$8.51 \$18.27 \$27.46	\$8.09 \$17.36 \$26.10
Life Insurance (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$260,000	13	\$0.17 \$3.40	\$0.18 \$3.60
AD&D Coverage (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$260,000	13	\$0.03 \$0.60	\$0.03 \$0.60

Total Monthly Rate per Member: Single \$48.47 \$48.25
 Total Monthly Rate per Member: 2-Person \$90.51 \$89.80
 Total Monthly Rate per Member: Family \$157.68 \$156.52

COBRA RATES:

The COBRA rates for this group are the same as the rates above.

* Indicates total ancillary plan enrollment and volume for quoted group(s).

The above rates are based on plans and enrollment as of 07/31/2021. 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.



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

**2022 Rate Renewal Exclusively for
 North Central Area Schools
 (Part of APA - Upper Peninsula)**

Quote #: 349120
 MESSA Field Rep: RaeAnn Loy
 Date Created: 08/16/2021

Rates Effective 01/01/2022 through 12/31/2022

Quoted Group(s): 584A - APA - UP Support Staff

Ancillary plans without medical - 2 members

Description	Benefits	Enrollment	2021 Rate	2022 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00925-07 100% 70% (X-Rays) 70% \$1,500 70% \$1,500 2 Cleanings Jul-Jun	Single: 1 2-Person: 1 Family: 0	\$29.26 \$57.74 \$118.13	\$29.26 \$57.74 \$118.13
Vision (All)* Plan Year:	VSP 3 G Jul-Jun	Single: 2 2-Person: 6 Family: 5	\$8.51 \$18.27 \$27.46	\$8.09 \$17.36 \$26.10
Life Insurance (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$260,000	13	\$0.17 \$3.40	\$0.18 \$3.60
AD&D Coverage (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$20,000 \$260,000	13	\$0.03 \$0.60	\$0.03 \$0.60
Total Monthly Rate per Member: Single			\$41.77	\$41.55
Total Monthly Rate per Member: 2-Person			\$80.01	\$79.30
Total Monthly Rate per Member: Family			\$149.59	\$148.43

COBRA RATES:

The COBRA rates for this group are the same as the rates above.

* Indicates total ancillary plan enrollment and volume for quoted group(s).

The above rates are based on plans and enrollment as of 07/31/2021. 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.



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

**2022 Rate Renewal Exclusively for
 North Central Area Schools
 (Part of APA - Upper Peninsula)**

Quote #: 349120
 MESSA Field Rep: RaeAnn Loy
 Date Created: 08/16/2021

Rates Effective 01/01/2022 through 12/31/2022

Quoted Group(s): 584B - APA - UP Teachers

Medical plans

Description	Benefits	Enrollment	2021 Rate ¹ w/ 2% Discount	2022 Rate ² w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (7F) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 5 2-Person: 1 Family: 8	\$739.06 \$1,662.87 \$2,069.36	\$756.39 \$1,701.86 \$2,117.88
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (8C) \$1000/\$2000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 0 2-Person: 0 Family: 0	\$696.93 \$1,568.08 \$1,951.40	\$713.27 \$1,604.86 \$1,997.16
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1400/\$2800 0% \$0 \$0 ABC Rx HEQ	Single: 2 2-Person: 1 Family: 1	\$659.82 \$1,484.61 \$1,847.50	\$668.54 \$1,504.22 \$1,871.92
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 2 (9H) \$2000/\$4000 20% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 1	\$564.81 \$1,270.82 \$1,581.47	\$572.27 \$1,287.61 \$1,602.36
Basic Term Life with Medical Volume:	\$5,000	19	\$1.50	\$1.50

¹Medical Rate includes 1.547% for federal and state taxes and fees.

²Medical Rate includes 1.490% for federal and state taxes and fees.

COBRA RATES:

The COBRA rates for this group are the same as the rates above.



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

**2022 Rate Renewal Exclusively for
 North Central Area Schools
 (Part of APA - Upper Peninsula)**

Quote #: 349120
 MESSA Field Rep: RaeAnn Loy
 Date Created: 08/16/2021

Rates Effective 01/01/2022 through 12/31/2022

Quoted Group(s): 584B - APA - UP Teachers

Ancillary plans with medical - 19 members

Description	Benefits	Enrollment	2021 Rate	2022 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00925-01 100% 90% (X-Rays) 90% \$2,000 90% \$2,000 2 Cleanings Jul-Jun	Single: 7 2-Person: 2 Family: 10	\$40.88 \$78.05 \$149.84	\$40.88 \$78.05 \$149.84
Vision (All)* Plan Year:	VSP 3 Plus P 250CL Jul-Jun	Single: 7 2-Person: 2 Family: 13	\$10.83 \$23.28 \$35.00	\$10.30 \$22.12 \$33.26
Life Insurance (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$30,000 \$660,000	22	\$0.17 \$5.10	\$0.18 \$5.40
AD&D Coverage (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$30,000 \$660,000	22	\$0.03 \$0.90	\$0.03 \$0.90

Total Monthly Rate per Member: Single \$57.71 \$57.48
 Total Monthly Rate per Member: 2-Person \$107.33 \$106.47
 Total Monthly Rate per Member: Family \$190.84 \$189.40

COBRA RATES:

The COBRA rates for this group are the same as the rates above.

* Indicates total ancillary plan enrollment and volume for quoted group(s).

The above rates are based on plans and enrollment as of 07/31/2021. 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.



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

**2022 Rate Renewal Exclusively for
 North Central Area Schools
 (Part of APA - Upper Peninsula)**

Quote #: 349120
 MESSA Field Rep: RaeAnn Loy
 Date Created: 08/16/2021

Rates Effective 01/01/2022 through 12/31/2022

Quoted Group(s): 584B - APA - UP Teachers

Ancillary plans without medical - 3 members

Description	Benefits	Enrollment	2021 Rate	2022 Rate
Dental	00925-02			
Diag & Prev:	100%			
Basic Services:	90% (X-Rays)			
Major Services:	90%	Single: 0	\$35.37	\$35.37
Annual Max:	\$2,000	2-Person: 0	\$67.31	\$67.31
Orthodontics:	90%	Family: 3	\$141.30	\$141.30
Lifetime Max:	\$2,000			
Riders:	2 Cleanings			
Plan Year:	Jul-Jun			
Vision (All)*	VSP 3 Plus P 250CL	Single: 7	\$10.83	\$10.30
Plan Year:	Jul-Jun	2-Person: 2	\$23.28	\$22.12
		Family: 13	\$35.00	\$33.26
Life Insurance (All)*				
Volume:	\$30,000			
Total Volume:	\$660,000	22		
Rate/\$1,000:			\$0.17	\$0.18
Composite:			\$5.10	\$5.40
AD&D Coverage (All)*				
Volume:	\$30,000			
Total Volume:	\$660,000	22		
Rate/\$1,000:			\$0.03	\$0.03
Composite:			\$0.90	\$0.90

Total Monthly Rate per Member: Single \$52.20 \$51.97
 Total Monthly Rate per Member: 2-Person \$96.59 \$95.73
 Total Monthly Rate per Member: Family \$182.30 \$180.86

COBRA RATES:

The COBRA rates for this group are the same as the rates above.

* Indicates total ancillary plan enrollment and volume for quoted group(s).

The above rates are based on plans and enrollment as of 07/31/2021. 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.



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

**2022 Rate Renewal Exclusively for
 North Central Area Schools
 (Part of APA - Upper Peninsula)**

Quote #: 349120
 MESSA Field Rep: RaeAnn Loy
 Date Created: 08/16/2021

Rates Effective 01/01/2022 through 12/31/2022

Quoted Group(s): 584E - APA - UP Admin/NonUnion

Medical plans

Description	Benefits	Enrollment	2021 Rate ¹ w/ 2% Discount	2022 Rate ² w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (7F) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 0 2-Person: 0 Family: 4	\$739.06 \$1,662.87 \$2,069.36	\$756.39 \$1,701.86 \$2,117.88
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (8C) \$1000/\$2000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 0 2-Person: 0 Family: 0	\$696.93 \$1,568.08 \$1,951.40	\$713.27 \$1,604.86 \$1,997.16
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1400/\$2800 0% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 0	\$659.82 \$1,484.61 \$1,847.50	\$668.54 \$1,504.22 \$1,871.92
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 2 (9H) \$2000/\$4000 20% \$0 \$0 ABC Rx HEQ	Single: 0 2-Person: 0 Family: 0	\$564.81 \$1,270.82 \$1,581.47	\$572.27 \$1,287.61 \$1,602.36
Basic Term Life with Medical Volume:	\$5,000	4	\$1.50	\$1.50

¹Medical Rate includes 1.547% for federal and state taxes and fees.

²Medical Rate includes 1.490% for federal and state taxes and fees.

COBRA RATES:

The COBRA rates for this group are the same as the rates above.



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

**2022 Rate Renewal Exclusively for
 North Central Area Schools
 (Part of APA - Upper Peninsula)**

Quote #: 349120
 MESSA Field Rep: RaeAnn Loy
 Date Created: 08/16/2021

Rates Effective 01/01/2022 through 12/31/2022

Quoted Group(s): 584E - APA - UP Admin/NonUnion

Ancillary plans with medical - 4 members

Description	Benefits	Enrollment	2021 Rate	2022 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00925-04 100% 100% (X-Rays) 80% \$2,500 80% \$2,500 2 Cleanings Jul-Jun	Single: 0 2-Person: 0 Family: 4	\$44.99 \$85.26 \$171.56	\$44.99 \$85.26 \$171.56
Vision (All)* Plan Year:	VSP 3 Plus P 250CL Jul-Jun	Single: 0 2-Person: 0 Family: 4	\$10.83 \$23.28 \$35.00	\$10.30 \$22.12 \$33.26
Life Insurance (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$10,000 \$40,000	4	\$0.17 \$1.70	\$0.18 \$1.80
AD&D Coverage (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$10,000 \$40,000	4	\$0.03 \$0.30	\$0.03 \$0.30
LTD Benefit (All)* Benefit: Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Own-Occupation: Pre-Exist Cond.: COLA: SS Freeze: Volume: Rate/\$100: Composite:	66 2/3% Max \$5,000 \$7,500 90 CDMF Same as any other illness Same as any other illness Family 2 years Waived No Yes \$20,692	4	\$1.00 \$48.12	\$0.79 \$40.87
Total Monthly Rate per Member: Single			\$105.94	\$98.26
Total Monthly Rate per Member: 2-Person			\$158.66	\$150.35
Total Monthly Rate per Member: Family			\$256.68	\$247.79

COBRA RATES:

The COBRA rates for this group are the same as the rates above.

* Indicates total ancillary plan enrollment and volume for quoted group(s).

The above rates are based on plans and enrollment as of 07/31/2021. 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.



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

**2022 Rate Renewal Exclusively for
 North Central Area Schools
 (Part of APA - Upper Peninsula)**

Quote #: 349120
 MESSA Field Rep: RaeAnn Loy
 Date Created: 08/16/2021

Rates Effective 01/01/2022 through 12/31/2022

Quoted Group(s): 584E - APA - UP Admin/NonUnion

Ancillary plans without medical - 0 members

Description	Benefits	Enrollment	2021 Rate	2022 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max: Orthodontics: Lifetime Max: Riders: Plan Year:	00925-05 100% 100% (X-Rays) 80% \$2,500 80% \$2,500 2 Cleanings Jul-Jun	Single: 0 2-Person: 0 Family: 0	\$39.62 \$75.01 \$149.24	\$39.62 \$75.01 \$149.24
Vision (All)* Plan Year:	VSP 3 Plus P 250CL Jul-Jun	Single: 0 2-Person: 0 Family: 4	\$10.83 \$23.28 \$35.00	\$10.30 \$22.12 \$33.26
Life Insurance (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$10,000 \$40,000	4	\$0.17 \$1.70	\$0.18 \$1.80
AD&D Coverage (All)* Volume: Total Volume: Rate/\$1,000: Composite:	\$10,000 \$40,000	4	\$0.03 \$0.30	\$0.03 \$0.30
LTD Benefit (All)* Benefit: Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Own-Occupation: Pre-Exist Cond.: COLA: SS Freeze: Volume: Rate/\$100: Composite:	66 2/3% Max \$5,000 \$7,500 90 CDMF Same as any other illness Same as any other illness Family 2 years Waived No Yes \$20,692	4	\$1.00 \$48.12	\$0.79 \$40.87
Total Monthly Rate per Member: Single			\$100.57	\$92.89
Total Monthly Rate per Member: 2-Person			\$148.41	\$140.10
Total Monthly Rate per Member: Family			\$234.36	\$225.47

COBRA RATES:

The COBRA rates for this group are the same as the rates above.

* Indicates total ancillary plan enrollment and volume for quoted group(s).

The above rates are based on plans and enrollment as of 07/31/2021. 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.