



**Medical Rate Summary
Allegan Area ESA
All Employees**

Assumed Effective Date: 7/1/2015

Current Plan(s) and Segment:		1P	2P	FF	Total Monthly Cost
Employees Enrolled in MESSA Choices Plan	Census	22	16	30	
MESSA \$300-0%; Saver Rx	Rate	\$609.01	\$1,368.15	\$1,703.84	\$86,403.82
Employees Enrolled in MESSA ABC Plan 1	Census	3	4	9	
MESSA ABC Plan 1 \$1300-0%; ABC Rx	Rate	\$522.61	\$1,172.81	\$1,460.77	\$19,406.00
Employees Enrolled in WMHIP Plan BCBSM PPO Select Plan	Census	5	1	1	
WMHIP BCBSM PPO Select Plan	Rate	\$653.83	\$1,471.54	\$1,830.75	\$6,571.44
Employees Enrolled in WMHIP BCBSM Versatile Plan	Census	7	4	13	
WMHIP BCBSM Versatile Plan	Rate	\$559.01	\$1,257.72	\$1,565.18	\$29,291.29
Employees enrolled in WMHIP BCBSM HSA Plan	Census	0	1	7	
WMHIP BCBSM HSA Plan	Rate	\$518.76	\$1,167.19	\$1,452.52	\$11,334.83

Total Monthly Cost \$153,007.38
Total Annual Cost \$1,836,088.56

Quoted Plans	1P	2P	FF	Total Monthly Cost
BCBSM SB PPO \$250-20%; \$10/\$40/\$80 Rx	37	26	60	\$173,405.80
BCBSM SB PPO \$500-20%; \$10/\$40/\$80 Rx	\$620.64	\$1,489.52	\$1,861.91	\$171,335.55
BCBSM SB PPO HSA \$1250-0%; \$10/\$40/\$80 Rx	\$613.23	\$1,471.74	\$1,839.68	\$154,495.09
BCBSM SB PPO HSA \$1250-20%; \$10/\$40/\$80 Rx	\$552.95	\$1,327.09	\$1,658.86	\$139,222.33
BCBSM SB PPO HSA \$2000-0%; \$10/\$40/\$80 Rx	\$498.29	\$1,195.90	\$1,494.87	\$135,937.89
BCBSM SB PPO HSA \$2000-20%; \$10/\$40/\$80 Rx	\$486.53	\$1,167.68	\$1,459.61	\$123,829.22
Priority Health		See Additional Rate Sheet		
MESSA		Did Not Provide A Quote		
CMI		Did Not Provide A Quote		

Notes:

BCBSM rates do not include SET SEG's \$7.00 pepm fee for billing and enrollment services.
Proposed rates are based on census provided by the district. Rates may change based on actual group enrollment and participation.

BCBSM:

BCBSM rates do not include certain federal taxes and fees established by the Affordable Care Act as well as certain State taxes and assessments.



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WMHIP BCBSM PPO Select Plan	\$653.83	\$1,471.54	\$1,830.75	\$6,571.44
Employees Enrolled in WMHIP BCBSM Versatile Plan	7	4	13	
WMHIP BCBSM Versatile Plan	\$559.01	\$1,257.72	\$1,565.18	\$29,291.29
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WMHIP BCBSM HSA Plan	\$518.76	\$1,167.19	\$1,452.52	\$11,334.83

Total Monthly Cost \$153,007.38
Total Annual Cost \$1,836,088.56

Quoted Plans	1P	2P	FF	Total Monthly Cost
Priority Health POS \$250-0%; \$10/\$40/\$80 Rx	37	26	60	
Priority Health POS \$250-0%; \$10/\$40/\$80 Rx	\$588.21	\$1,321.77	\$1,644.52	\$154,800.99
Priority Health POS \$250-20%; \$10/\$40/\$80 Rx	\$532.73	\$1,197.10	\$1,489.41	\$140,200.21
Priority Health POS \$500-0%; \$10/\$40/\$80 Rx	\$566.78	\$1,273.61	\$1,584.60	\$149,160.72
Priority Health POS \$500-20%; \$10/\$40/\$80 Rx	\$517.05	\$1,161.86	\$1,445.57	\$136,073.41
Priority Health POS HSA \$1300-0%; \$10/\$40/\$80 Rx	\$498.74	\$1,120.72	\$1,394.38	\$131,254.90
Priority Health POS HSA \$1300-20%; \$10/\$40/\$80 Rx	\$436.39	\$980.61	\$1,220.06	\$114,845.89
Priority Health POS HSA \$2000-0%; \$10/\$40/\$80 Rx	\$446.78	\$1,003.96	\$1,249.11	\$117,580.42
Priority Health POS HSA \$2000-20%; \$10/\$40/\$80 Rx	\$384.37	\$863.72	\$1,074.62	\$101,155.61
Priority Health HMO \$250-0%; \$10/\$40/\$80 Rx	\$569.98	\$1,280.80	\$1,593.55	\$150,003.06
Priority Health HMO \$250-20%; \$10/\$40/\$80 Rx	\$515.56	\$1,158.51	\$1,441.40	\$135,680.98
Priority Health HMO \$500-0%; \$10/\$40/\$80 Rx	\$549.90	\$1,235.68	\$1,537.41	\$144,718.58
Priority Health HMO \$500-20%; \$10/\$40/\$80 Rx	\$501.27	\$1,126.40	\$1,401.45	\$131,920.39
Priority Health HMO HSA \$1300-0%; \$10/\$40/\$80 Rx	\$475.69	\$1,068.92	\$1,329.93	\$125,188.25
Priority Health HMO HSA \$1300-20%; \$10/\$40/\$80 Rx	\$416.77	\$936.52	\$1,165.21	\$109,682.61
Priority Health HMO HSA \$2000-0%; \$10/\$40/\$80 Rx	\$424.95	\$954.91	\$1,188.08	\$111,835.61
Priority Health HMO HSA \$2000-20%; \$10/\$40/\$80 Rx	\$365.42	\$821.14	\$1,021.64	\$96,168.58

Notes:

Priority Health rates do not include SET SEG's \$7.00 pepm fee for billing and enrollment services.

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

Priority Health:

Priority Health rates, fees and/or claims projections do not include "Michigan claims tax", PPACA fees and assessments, or similar fees or taxes that may be imposed by the Federal Government or the State of Michigan. Rates and fees will be adjusted as necessary to incorporate such assessments or taxes and will be communicated to you as soon as they are known.