

800.292.4910

## Quote Summary Exclusively for Nice Community Schools

Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208939 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749C-Full Time Teachers

Total Monthly Rate Per Member - Family

\$1,958.76

Description	Current - 749C	Rate	Census Used	Quote ID 315764	Rate	Quote ID 315765	Rate	
	PAK A			PAK A		PAK A		
Medical;	MESSA Choices II	727.81	Single: 12	MESSA Choices	585.78	MESSA Choices	559.94	
IN Deductible:	\$100/\$200	1,635.69	2-Person: 10	\$300/\$600	1,316.14	\$500/\$1000	1,257.97	
OON Deductible:	\$250/\$500	1,817.27	Family: 34	\$600/\$1200	1,462.21	\$1000/\$2000	1,397.58	
OV/UC/ER Copay:	\$20/\$25/\$50			\$20/\$25/\$50		\$20/\$25/\$50		
RX Drug Copay:	\$5/\$10			SaverRX		SaverRX	'	
Riders included:	None			None		None		
Dental:		33.65	Single: 12		33.65		33,65	
Class I:	100%	62.43	2-Person: 10	100%	62.43	100%	62.43	
Class II:	80%	113.03	Family: 34	80%	113.03	80%	113.03	
Class III:	80%			80%		80%		
Annual Max:	\$1,000			\$1,000		\$1,000		
Class IV:	80%			80%		80%		
Lifetime Max:	\$1,300			\$1,300		\$1,300		
Riders Included:	2 Cleanings			2 Cleanings		2 Cleanings		
Vision:	VSP 3	7.32		VSP 3	7.32	VSP 3	7.32	
		15.73	2-Person: 10		15.73		15.73	
		23.66	Family: 34		23.66		23.66	
Life Ins:	\$30,000		56	\$30,000		\$30,000	·	
Volume:					1,680,000		1,680,000	
Rate/\$1,000:					0.13		0.13	
Composite:		3.90			3.90		3.90	
AD&D ins:	\$30,000		56	\$30,000		\$30,000		
Volume:	•				1,680,000		1,680,000	
Rate/\$1,000:					0.03		0.03	
Composite:		0.90			0.90		0.90	
Dep Life Ins:	Not Included in Benefi	it Package		Not Included in Bene	efit Package	Not included in Ber	nefit Package	
Volume:				•				
Rate/\$1,000:								
Composite:								
LTD:	Not Included in Benefi	it Package		Not Included in Bene	efit Package	Not Included in Ber	nefit Package	
Waiting Period:				1				
Alcohol/Drug:				1				
Mental/Nervous:								
SS Offset:								
COLA:								
Volume:								
Rate/\$100:								
Total Monthly Rate	Per Member - Single	\$773.58	!	1	\$631.55	1	\$605.71	
Total Monthly Rate	Per Member - 2 Perso	n \$1,718.65			\$1,399.10		\$1,340.93	
	Dan Marchan Family	P4 050 70			64 000 70		<b>.</b> . <b>.</b>	

The above rates are based on the information provided. Material changes in the composition of the group such as number of enrollees, definable group, eligibility requirements or plans offered will affect final rates.

Final rates will be calculated at time of implementation in accordance with MESSA Underwriting and Rating guidelines.

\$1,603.70

\$1,539.07



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Quote Summary Exclusively for Nice Community Schools Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208939 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749C-Full Time Teachers

Description	Current - 749C	Rate	Census Used	Quote ID 315764	Rate	Quote ID 315765	Rate		
	PAK B			PAK B		PAK B			
Medical: IN Deductible: OON Deductible: OV/UC/ER Copay: RX Drug Copay: Riders Included:	Not Included in Bene	efit Package		Not Included in Bene	fit Package	Not included in Benei	fit Package		
Dental:		32.98	Single: 0		32,98		32.98		
Class I:	100%	61.21	2-Person: 0	100%	61.21	100%	61,21		
	80%		Family: 15	80%	111.86	1			
Class II:	80%	111.86	ramily: 15	1	111.00	80%	111.86		
Class III:				80%					
Annual Max:	\$1,000			\$1,000		\$1,000			
Class IV:	80%			80%		80%			
Lifetime Max:	\$1,300			\$1,300		\$1,300			
Riders Included:	2 Cleanings			2 Cleanings		2 Cleanings			
Vision:	VSP 3	7.32	Single: 0	VSP 3	7.32	VSP 3	7.32		
		15.73	2-Person: 0		15.73		15.73		
		23.66	Family: 15		23.66		23.66		
Life Ins:	\$40,000		15	\$40,000		\$40,000			
Volume:					600,000		600,000		
Rate/\$1,000:					0.13	:	0.13		
Composite:		5.20			5.20		5.20		
AD&D Ins:	\$40,000		15	\$40,000		\$40,000			
Volume:				' '	600,000	' '	600,000		
Rate/\$1,000:					0.03		0.03		
Composite:		1.20	1		1.20		1.20		
Dep Life Ins:	Not Included in Ben	efit Package		Not Included in Bene	fit Package	Not included in Bene	fit Package		
Volume:		_			•				
Rate/\$1,000:									
Composite:								•	
LTD:	Not Included in Ben	efit Package		Not included in Bene	fit Package	Not Included in Bene	fit Package		
Waiting Period:		• · · · · · · · · · · · · · · · · · · ·	1		<b>-</b>				
Alcohol/Drug:									
Mental/Nervous:									
SS Offset:									
COLA:									
Volume:									
Rate/\$100:									
rate/ψ jou.									
•	Per Member - Single				\$46.70		\$46.70		
•	Per Member - 2 Pers				\$83.34		\$83.34		
Total Monthly Rate	Per Member - Family	y \$141.92			\$141.92		\$141.92		



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Quote Summary Exclusively for Nice Community Schools

Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208940 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749G-PartTime Teachers

Description	Current - 749G	Rate	Census Used	Quote ID 315769	Rate	Quote ID 315770	Rate		
	Bundle 1	· tuto	00.1040 0004	Bundle 1	Rute	Bundle 1	Nate	ne manus.	
Medical:	MESSA Choices II	742.63	Single: 1	MESSA Choices	597.70	MESSA Choices	<i>571.</i> 33		
IN Deductible:	\$100/\$200	1,669.04	2-Person: 1	\$300/\$600	1,342.96	1	1,283.62		
OON Deductible:	\$250/\$500	1,854.32	Family: 0	\$600/\$1200	1,492.01		1,426.07		
OV/UC/ER Copay:		.,		\$20/\$25/\$50	.,	\$20/\$25/\$50	.,.20.07		
RX Drug Copay:	\$5/\$10			SaverRX		SaverRX			
Riders Included:	None			None		None			
								W = N = N	
Dental: Class I:	Not Included in Benefi	it Package		Not Included in Benef	it Package	Not Included in Benefi	t Package		
1									
Class II:									
Class III: Annual Max:									
Class IV:									
	, , , , , , , , , , , , , , , , , , ,								
Lifetime Max:									
Riders Included:									
Vision:	Not Included in Benefi	it Package		Not included in Bener	fit Package	Not Included in Benefi	t Package		
Life Ins:	Not Included in Benefi	it Backago		Not included in Bene	fit Dookses	Not Included in Benefi	t Doolsoon		
Volume:	Not included in Dellett	it rackage		Not included in belie.	III Fackage	Not included in perion	l Package		
Rate/\$1,000:									
Ιταιο/φ1,000.									
AD&D ins:	Not Included in Benefi	it Package		Not Included in Bene	fit Package	Not Included in Benefi	t Package		
Volume:							-		
Rate/\$1,000:									
Dep Life Ins:	Not included in Benefi	it Daakaga		Not Included in Bene	Et Dookses	Not included in Densii	t Daelsers		
Volume:	Not included in belief	it rackage		Not included in belie	пгаскаде	Not included in Benefi	гРаскаде		
Rate/\$1,000:									
1 (αιε/ψ1,000,									
LTD:	Not Included in Benefi	it Package		Not Included in Bene	fit Package	Not Included in Benefi	t Package		
Waiting Period:		-			-		•		
Alcohol/Drug:									
Mental/Nervous:									
SS Offset:									
COLA:									
Volume:									
Rate/\$100:									
		,						:	



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## Quote Summary Exclusively for Nice Community Schools

Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208940 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749G-PartTime Teachers

Description	Current - 749G	Rate	Census Used	Quote ID 315769	Rate	Quote ID 315770	Rate		
-	Bundle 2			Bundle 2		Bundle 2			
Medical:	Not Included in Bene	efit Package		Not Included in Benef	it Package	Not Included in Bene	fit Package		
IN Deductible:						, , , , , , , , , , , , , , , , , , , ,			
OON Deductible:									
OV/UC/ER Copay:									
RX Drug Copay:									
Riders Included:									
Kiders moldded.									
Dental:	Not Included in Bene	efit Package		Not Included in Benef	fit Package	Not Included in Bene	fit Package		
Class I:		_			_		•		
Class II:									
Class III:									
Annual Max:									
Class IV:									
Lifetime Max:									
Riders Included:							İ		
Muers michaged:									
Vision:	VSP 3	7.32	Single: 1	VSP 3	7.32	VSP 3	7.32		
		15.73	2-Person: 2		15.73		15.73		
		23.66	Family: 2		23.66		23.66		
								1	
Life Ins:	Not Included in Bene	efit Package		Not Included in Bene	fit Package	Not Included in Bene	fit Package		
Volume:									
Rate/\$1,000:			•						
AD&D Ins:	Not included in Bene	efit Package		Not included in Bene	fit Package	Not Included in Bene	fit Package		
Volume:									
Rate/\$1,000:									
Dep Life Ins:	Not included in Bene	ofit Doolsooo		Not Included in Bene	Et Daaleana	Net technical in Desc	Sit Deeleses		
Volume:	Mor included in Delic	ent rackage	ļ	Not included in bene	in rackage	Not Included in Bene	an Package		
				1	•	5			
Rate/\$1,000:									
LTD:	Not Included in Bene	efit Package		Not included in Bene	fit Package	Not Included in Bene	fit Package		
Waiting Period:		-			ū		ŭ		
Alcohol/Drug:									
Mental/Nervous:									
SS Offset:									
COLA:									
Volume:							'		
Rate/\$100:									



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## Quote Summary Exclusively for Nice Community Schools

Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208936 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749B-SupportStf 40-99Standard Hrs

Description	Current - 749B	Rate	Census Used	Quote ID 315759	Rate	
, <u>2000; ption</u>	PAK A			PAK A	, tuto	
Medical:	MESSA Choices II	681.76	Single: 4	MESSA Choices	585.78	
IN Deductible:	\$0	1,532.09	2-Person: 2	\$300/\$600	1,316.14	
OON Deductible:	\$250/\$500	1,702.15		\$600/\$1200	1,462.21	
		1,102.10	1 Cillings 7	\$20/\$25/\$50	1,702,27	
RX Drug Copay:	\$10/\$20			SaverRX		1
Riders Included:	None			None		
raders meladed.	None			None		
Dental:	,	33.76	Single: 4		33.76	
Class I:	100%	61.89	2-Person: 2	100%	61.89	
Class II:	70%	101.20	Family: 7	70%	101.20	
Class III:	70%		·	70%		
Annual Max:	\$1,000			\$1,000		
Class IV:	•					
Lifetime Max:	\$0			\$0		
Riders Included:	2 Cleanings			2 Cleanings	1	
Vision:	VSP 3	7.32	Single: 4	VSP 3	7.32	
		15.73	2-Person: 2		15.73	•
		23.66	Family: 7		23.66	
		•				
Life Ins:	\$15,000		13	\$15,000		
Volume:					195,000	
Rate/\$1,000:					0.13	
Composite:		1.95			1.95	
AD&D Ins:	\$15,000		13	\$15,000		
Volume:					195,000	
Rate/\$1,000:					0.03	
Composite:		0.45			0.45	
Dep Life Ins:	Not included in Benef	it Package		Not Included in Benefit	Package	
Volume:						
Rate/\$1,000:				1		
Composite:						
LTD:	Not Included in Benef	it Package		Not Included in Benefit	Package	
Waiting Period:		_			-	
Alcohol/Drug:						
Mental/Nervous:						
SS Offset:						
COLA:						
Volume:						·
Rate/\$100:						
.,						
T	Per Member - Single	\$725.24		*	\$620.26	 

Total Monthly Rate Per Member - Single \$725.24
Total Monthly Rate Per Member - 2 Person
Total Monthly Rate Per Member - Family \$1,829.41

\$629.26 \$1,396.16 \$1,589.47



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## Quote Summary Exclusively for Nice Community Schools Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208936 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749B-SupportStf 40-99Standard Hrs

Description	Current - 749B	Rate	Census Used	Quote ID 315759 Rate		1
Description	PAK B	Nate	Celisus Useu	PAK B		
Medical:	Not included in Benef	fit Dackage		Not Included in Benefit Package	•	
IN Deductible:	Not included in Delie	iit i ackage		Not included in Deficit Package		
OON Deductible:						
OV/UC/ER Copay:						
RX Drug Copay:						
Riders Included:						
Dental:		37.52	Single: 0	37.52		
Class I:	100%	68.70		100% 68.70		
Class II:	70%	108.33		70% 108.33		
Class III:	70%	100.00	r cannay.	70%		
Annual Max:	\$1,000			\$1,000		
Class IV:	Ψ 1,000			ψ1,550		
Lifetime Max:	\$0			\$0		
Riders Included:	φυ 2 Cleanings			2 Cleanings		
Riders included:	z cleanings			2 Cleanings		
Vision:	VSP 3	7.32	Single: 0	VSP 3 7.32		
		15.73	2-Person: 0	15.73		
	•	23.66	Family: 1	23.66		
Life Ins:	\$15,000		1	\$15,000		
Volume:				15,000		
Rate/\$1,000:				0.13		
Composite:		1.95		1.95		
AD&D Ins:	\$15,000		1	\$15,000		
Volume:				15,000		
Rate/\$1,000:				0.03	<b>f</b>	
Composite:		0.45		0.45		
Dep Life Ins:	Not Included in Bene	fit Package		Not Included in Benefit Package		
Volume:						
Rate/\$1,000:						
Composite:						
LTD:	Not Included in Bene	fit Package		Not Included in Benefit Package		
Waiting Period:		•				
Alcohol/Drug:						
Mental/Nervous:						
SS Offset:						
COLA:						
Volume:						
Rate/\$100:						
ταισιφ του.					İ	
Total Monthly Rate	Per Member - Single	\$47.24		\$47.24	I.	1-,-

Total Monthly Rate Per Member - Single \$47.24 \$47.24 Total Monthly Rate Per Member - 2 Person \$86.83 \$86.83 Total Monthly Rate Per Member - Family \$134.39 \$134.39



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Quote Summary Exclusively for Nice Community Schools

Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208937 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749E-Spprt Stf Grndfthr Wkg20-29Hrs

Description	Current - 749E	Data	Census Used	Quote ID 315761	Dete		
Description	NON-PAK	Rate	Census used	NON-PAK	Rate		
Madiani	MESSA Choices II	005.04	Olasia 4	MESSA Choices	597.70		
Medical:		695.64	Single: 1				
IN Deductible:	\$0	1,563.33		\$300/\$600	1,342.96		
OON Deductible:	\$250/\$500	1,736.86	Family: 0	\$600/\$1200	1,492.01		
OV/UC/ER Copay:				\$20/\$25/\$50			
RX Drug Copay:	\$10/\$20			SaverRX			
Riders Included:	None			None			
Dental:	Not Included in Benefit	Package		Not Included in Benef	it Package		
Class I:							
Class II:							
Class III:							
Annual Max:							
Class IV:							
Lifetime Max:							
Riders Included:							
Vision:	VSP 3		Single: 1	VSP 3	7.32		
		15.73	2-Person: 2		15.73		
		23.66	Family: 0		23.66		
Life Ins:	\$5,000		3	\$5,000			
Volume:	φο, <sub>000</sub>		3	<b>φ5,000</b>	15 000		
		0.40			15,000		
Rate/\$1,000:		0.13			0.13		
AD&D ins:	\$5,000		3	\$5,000			
Volume:					15,000		
Rate/\$1,000:		0.03			0.03		
Dep Life Ins:	Not Included in Benefit	t Package		Not Included in Bene	fit Package		
Volume:		-			_		
Rate/\$1,000:							
LTD:	Not included in Benefit	t Package		Not Included in Bene	fit Package		
Waiting Period:				1			
Alcohol/Drug:			1	]			
Mental/Nervous:							
SS Offset:							
COLA:							
Volume:			ļ				
Rate/\$100:							
			I.	<del></del>		1	I



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Quote Summary Exclusively for Nice Community Schools

Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208938 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749F-Support Stf Wkg 30 To 39.99

Description	Current - 749F	Rate	Census Used	Quote ID 315763	Rate		
· · · · •	NON-PAK			NON-PAK		" * "	
Medical:	MESSA Choices II	695.64	Single: 2	MESSA Choices	597.70		
IN Deductible:	\$0	1,563.33	2-Person: 2	\$300/\$600	1,342.96		
OON Deductible:	\$250/\$500	1,736.86	Family: 0	\$600/\$1200	1,492.01		
OV/UC/ER Copay:		.,.		\$20/\$25/\$50	,,		
RX Drug Copay:	\$10/\$20			SaverRX			
Riders Included:	None			None			
Dental:	Not Included in Bene	fit Package		Not Included in Bene	fit Package	,	
Class I:							
Class II:							
Class III:					ļ		
Annual Max:							
Class IV:							
Lifetime Max:							
Riders Included:							
Vision:	VSP 3	7.32	Single: 2	VSP 3	7.32		
		15.73	2-Person: 2		15.73		
		23.66	Family: 0		23.66		
			-				
Life ins:	\$15,000		6	\$15,000	,		
Volume:					90,000		
Rate/\$1,000:	•	0.13			0.13		
AD&D Ins:	\$15,000		6	\$15,000			
Volume:					90,000		
Rate/\$1,000:		0.03			0.03		
Dec 1 the lase	Not be alreaded to Dance	Elt Desiles		Not to the deal to Done	C. D. J		
Dep Life Ins:	Not Included in Bene	пт Раскаде		Not included in Bene	пт Раскаде		
Volume:							
Rate/\$1,000:						·	
LTD:	Not included in Bene	fit Package		Not Included in Bene	fit Package		
Waiting Period:	TOT MOIGING IN DOILE	r aonage		1401 HOURSES IN DELIG	in i acrage		
Alcohol/Drug:							
Mental/Nervous:							
SS Offset:							
COLA:							
Volume:							
Rate/\$100:							
Rate/\$100:							



800.292.4910

Quote Summary Exclusively for Nice Community Schools Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208934 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749D-Support Staff Wkg 20-29hrs

Medical: MI IN Deductible: \$0	urrent - 749D   F ON-PAK ESSA Choices II	Rate	Census Used	Quote ID 315756	Rate		
Medical: Mi IN Deductible: \$0				NON-PAK	1		
IN Deductible: \$0		695.64	Single: 0	MESSA Choices	597.70		
		1,563.33	2-Person: 0	\$300/\$600	1,342.96		
	250/\$500	1,736.86	Family: 0	\$600/\$1200	1,492.01		
OV/UC/ER Copay: \$5	•	1,1 00.00	, anny o	\$20/\$25/\$50	7,402.01		
	10/\$20			SaverRX			
	one			None			
Dental: No	ot Included in Benefit P	ackage		Not Included in Benefit	t Package		
Class I:							
Class II:							
Class III:							
Annual Max:							
Class IV:							
Lifetime Max:							
Riders Included:							
	* ***						
Vision: No	ot Included in Benefit P	ackage		Not Included in Benefi	t Package		
					ì		
Life Ins: \$	\$5,000		24	\$5,000			
Volume:					120,000		
Rate/\$1,000:		0.13			0.13		
	\$5,000		24	\$5,000			
Volume:					120,000		
Rate/\$1,000:		0.03			0.03		
Dep Life Ins: No	ot Included in Benefit P	ackace		Not Included in Benefi	t Package		
Volume:	or moladod in Bolloiir i	aonago		1401 III Oldaca III Dolloli	i i donago		
Rate/\$1,000:							
. (415) \$ 1,555							
LTD: No	ot Included in Benefit P	ackage		Not Included in Benefi	t Package		
Waiting Period:	*	-			J		
Alcohol/Drug:				•			
Mental/Nervous:							
SS Offset:							
COLA:							
Volume:							
Rate/\$100:							
, 							



800.292.4910

Quote Summary Exclusively for Nice Community Schools

Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208933 MESSA Field Rep: Barbara Frisk

Quoted Group(s): 749A-Adminstraton

Description	Current - 749A	Rate	Census Used	Quote ID 315755	Rate		W
Boodiption	PAK A	Tuto	0011040 0004	PAK A	Tate	1 356-11/4 (7-7-7-1	
Medical:	MESSA Choices II	681.76	Single: 0	MESSA Choices	585.78		
IN Deductible:	\$0	1,532.09	2-Person: 3	\$300/\$600	1,316.14		
OON Deductible:	\$250/\$500	1,702.15	Family: 3	\$600/\$1200	1,462.21		
OV/UC/ER Copay:	· ·	1,7 02.10	r diffig. 0	\$20/\$25/\$50	1,402.21		
RX Drug Copay:	\$10/\$20			SaverRX			
Riders Included:	None			None			
Macia Majadea.	None			None			
Dental:		33.92	Single: 0		33.92		
Class I:	100%	63.01	2-Person: 3	100%	63.01		
Class II:	80%	114.87	Family: 3	80%	114.87		
Class III:	80%			80%			
Annual Max:	\$1,000			\$1,000			
Class IV:	80%			80%			
Lifetime Max:	\$1,500			\$1,500			
Riders Included:	2 Cleanings			2 Cleanings			
Vision:	VSP 3 Plus	10.65	Single: 0	VSP 3 Plus	10.65		-\-
		22.90	2-Person: 3		22.90		
		34.47	Family: 3		34.47		
Life Ins:	\$50,000		6	\$50,000			
Volume:					300,000		
Rate/\$1,000:					0.13		
Composite:		6.50			6.50		
AD&D Ins:	\$50,000		6	\$50,000			
Volume:					300,000		
Rate/\$1,000:					0.03		
Composite:		1.50			1.50		
Dep Life Ins:	Not Included in Benefit	Package		Not Included in Benefi	t Package	·	
Volume:							
Rate/\$1,000:							
Composite:							
LTD:	70% Max \$5,000		6	70% Max \$5,000			
Waiting Period:	60 CDSW			60 CDSW			
Alcohol/Drug:	Same as any other illne		,	Same as any other illn	ess		
Mental/Nervous:	Same as any other illne	SS		Same as any other illn	ess		
SS Offset:	Family			Family			
COLA:	No			No			
Volume:					32,155		
Rate/\$100:					0.95		
Composite:		50.91		· ·	50.91		
	Per Member - Single	\$785.24			9690 26		 

 Total Monthly Rate Per Member - Single
 \$785.24
 \$689.26

 Total Monthly Rate Per Member - 2 Person
 \$1,676.91
 \$1,460.96

 Total Monthly Rate Per Member - Family
 \$1,910.40
 \$1,670.46



Quote Summary Exclusively for Nice Community Schools Quote Effective 08/01/2011

Requested: 07/12/2011 Quote Request ID: 208933 MESSA Field Rep: Barbara Frisk

800.292.4910 Quoted Group(s): 749A-Adminstraton

East Lansing, MI 48826-2560

Description	Current - 749A	Rate	Census Used	Quote ID 315755 Rate	•			
	PAK B			PAK B				
Medical:	Not included in Benefit	Package		Not Included in Benefit Packs	age			
IN Deductible:		-			i			
OON Deductible:								
OV/UC/ER Copay:								
RX Drug Copay:					ŀ		ļ	
Riders Included:								
Riders included.								
Dental:		37.72	Single: 0		37.72			
Class I:	100%	69.92	2-Person: 0	100%	69.92		Ì	
Class II:	80%	122.01	Family: 0		122.01			
Class III:	80%		· c.i.iiy · c	80%				
Annual Max:	\$1,000			\$1,000				
Class IV:	80%			80%			}	
					İ			
Lifetime Max:	\$1,500			\$1,500				
Riders Included:	2 Cleanings			2 Cleanings				
Vision:	VSP 3 Plus	10.65	Single: 0	VSP 3 Plus	10.65			
VISIOII.	VQ: 01 103	22.90	2-Person: 0	VCI 0.140	22.90			
		34.47	Family: 0		34.47			
		34.47	ranny: 0		34.47			
Life Ins:	\$50,000		0	\$50,000	i			
Volume:					٥			
Rate/\$1,000:					0.13			
Composite:		6.50			6.50			
AD&D Ins:	\$50,000		0	\$50,000				
Volume:	, ·				ol			
Rate/\$1,000:			ļ		0.03			
Composite:		1.50			1.50			
Dep Life Ins:	Not Included in Benefit			Not Included in Benefit Pack				
Volume:	, , , , , , , , , , , , , , , , , , , ,				-3-			
Rate/\$1,000:								
Composite:								
LTD:	70% Max \$5,000	11.11	0	70% Max \$5,000			<del>.</del>	
	60 CDSW		١	60 CDSW				· ·
Waiting Period:				Same as any other illness				
Alcohol/Drug:	Same as any other illne							
Mental/Nervous:	Same as any other illne	ess		Same as any other illness	ļ			
SS Offset:	Family			Family				
COLA:	No			No				
Volume:			1		0			
Rate/\$100:					0.95			
Composite:		50.91	1		50.91			
	e Per Member - Single	\$107.28			107.28			
Total Monthly Rate	e Per Member - 2 Person	s151.73		- 5	151.73	:		
Total Monthly Rate	e Per Member - Family	\$215.39		<b>:</b>	215.39			