



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

## Current Bargained Benefits Group Benefit Program Statement

**Fowler Public Schools**  
**700 N Main St**  
**Fowler, MI 48835-9777**

Group: **Administration**  
 County: **Clinton**  
 Employer ID: **526**

Benefit Program As Of Date: **01/01/2015**  
 Contact: **Teresa Pline, Billing Contact**

| Job                     | FT/PT Eligibility Rule ID | Job                       | FT/PT Eligibility Rule ID |
|-------------------------|---------------------------|---------------------------|---------------------------|
| Supervisor - 100023     | FT/PT 526A                | Principal - 110004        | FT/PT 526A                |
| Superintendent - 110005 | FT/PT 526A                | Business Manager - 110009 | FT/PT 526A                |

| PAK A                  | Plan                                       | Brief Description   | Rate   | MESSA Codes  |
|------------------------|--|---|--|--|
| <b>Medical</b>         | MESSA ABC Plan 1                           | In-Network Ded: \$1300 Single Cov; \$2600 2-Person & Family Cov<br>In-Network OOP Cap: \$1000 Single Cov; \$2000 2-Person & Family Cov<br>Out-of-Network Ded: \$2600 Single Cov; \$5200 2-Person & Family Cov<br>Out-of-Network Coins: 20% of approved amount after deductible<br>Out-of-Network OOP Cap: \$2000 Single Cov; \$4000 2-Person & Family Cov<br>Prescription Coverage: MESSA ABC Rx<br>Health Savings Account with Health Equity                     | Single: 527.64<br>2-Person: 1,187.21<br>Family: 1,477.42 | 7V<br><br><br><br><br><br>2L20<br>2L21<br>2L22     |
| <b>Dental</b>          | Dent100/100/50/50:1000/1500:2<br>6484-0003 | Class I: 100%<br>Class II: 100%<br>Class III: 50%<br>Class IV: 50%<br>Annual Max Class I, II, III: \$1,500, Lifetime Max Class IV: \$1,000<br>X-Rays paid under: Class II<br>Adult Orthodontics: No<br>Sealants: No<br>Cleanings: 2 per year  | Single: 49.73<br>2-Person: 93.01<br>Family: 159.54       | D2064D<br><br><br><br><br><br>2L23<br>2L24<br>2L25 |
| <b>Vision</b>          | VSP 3                                      | Plan year July to July  | Single: 7.17<br>2-Person: 15.42<br>Family: 23.19         | V3F<br>2L26<br>2L27<br>2L28                        |
| <b>Negotiated LTD</b>  | Neg LTD 66 2/3% Max \$3,000                | Replacement %: 66.67<br>Maximum Benefit: \$3,000<br>Maximum Monthly Salary: \$4,500<br>Waiting Period: 60 Calendar Days Modified Fill<br>Alcohol/Drug: Same as any other illness<br>Mental/Nervous: Same as any other illness<br>Social Security Offset: Family<br>Own Occupation: 2 years Minimum Benefit: 5%<br>Survivor Income Benefit: 0 months<br>Pre-Existing Conditions: Waived<br>Freeze on Offsets: Yes COLA: No<br>Educational Supplemental Program: No | 35.62  | LT250B 2L2B  |
| <b>PAK Life</b>        | \$25,000 PAK Life                          |   | 3.00   | P0250B 2L29  |
| <b>PAK AD&amp;D</b>    | \$25,000 PAK AD&D                          |   | 0.75   | K0250B 2L2A  |
| <b>Basic Term Life</b> | Basic Term Life w/ Med \$5,000             |   | 1.50   | BTLM03 001Z  |

**COBRA RATES:**

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



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| PAK B                 | Plan                                       | Brief Description   | Rate   | MESSA Codes                        |
|-----------------------|--|---|--|------------------------------------|
| <b>Dental</b>         | Dent100/100/50/50:1000/1500:2<br>6484-0004 | Class I: 100%<br>Class II: 100%<br>Class III: 50%<br>Class IV: 50%<br>Annual Max Class I, II, III: \$1,500, Lifetime Max Class IV: \$1,000<br>X-Rays paid under: Class II<br>Adult Orthodontics: No<br>Sealants: No<br>Cleanings: 2 per year  | Single: 47.55<br>2-Person: 89.03<br>Family: 155.44 | D2064E<br><br>2L2C<br>2L2D<br>2L2E |
| <b>Vision</b>         | VSP 3                                      | Plan year July to July  | Single: 7.17<br>2-Person: 15.42<br>Family: 23.19   | V3J 2L2F<br>2L2G<br>2L2H           |
| <b>Negotiated LTD</b> | Neg LTD 66 2/3% Max \$3,000                | Replacement %: 66.67<br>Maximum Benefit: \$3,000<br>Maximum Monthly Salary: \$4,500<br>Waiting Period: 60 Calendar Days Modified Fill<br>Alcohol/Drug: Same as any other illness<br>Mental/Nervous: Same as any other illness<br>Social Security Offset: Family<br>Own Occupation: 2 years Minimum Benefit: 5%<br>Survivor Income Benefit: 0 months<br>Pre-Existing Conditions: Waived<br>Freeze on Offsets: Yes COLA: No<br>Educational Supplemental Program: No | 35.62  | LT250C 2L2K                        |
| <b>PAK Life</b>       | \$25,000 PAK Life                          |   | 3.00   | P0250C 2L2I                        |
| <b>PAK AD&amp;D</b>   | \$25,000 PAK AD&D                          |   | 0.75   | K0250C 2L2J                        |

**COBRA RATES:**

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

Please refer to plan coverage booklets for a complete description of benefits.



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## Current Bargained Benefits Group Benefit Program Statement

**Fowler Public Schools**  
**700 N Main St**  
**Fowler, MI 48835-9777**

Group: **Maintenance & Office Personnel**  
 County: **Clinton**  
 Employer ID: **526**

Benefit Program As Of Date: **01/01/2015**  
 Contact: **Teresa Pline, Billing Contact**

| Job                              | FT/PT Eligibility Rule ID | Job                | FT/PT Eligibility Rule ID |
|----------------------------------|---------------------------|--------------------|---------------------------|
| Facilities Maint Worker - 180003 | FT/PT 526C                | Custodian - 180014 | FT/PT 526C                |
| General Office Clerk - 190006    | FT/PT 526C                | Secretary - 190022 | FT/PT 526C                |

| PAK A                  | Plan                                       | Brief Description   | Rate   | MESSA Codes  |
|------------------------|--|---|--|--|
| <b>Medical</b>         | MESSA ABC Plan 1                           | In-Network Ded: \$1300 Single Cov; \$2600 2-Person & Family Cov<br>In-Network OOP Cap: \$1000 Single Cov; \$2000 2-Person & Family Cov<br>Out-of-Network Ded: \$2600 Single Cov; \$5200 2-Person & Family Cov<br>Out-of-Network Coins: 20% of approved amount after deductible<br>Out-of-Network OOP Cap: \$2000 Single Cov; \$4000 2-Person & Family Cov<br>Prescription Coverage: MESSA ABC Rx<br>Health Savings Account with Health Equity                     | Single: 527.64<br>2-Person: 1,187.21<br>Family: 1,477.42 | 7VB<br><br><br><br><br><br><br><br><br>2L2L<br>2L2M<br>2L2N    |
| <b>Dental</b>          | Dent100/100/50/50:1000/1500:2<br>6484-0005 | Class I: 100%<br>Class II: 100%<br>Class III: 50%<br>Class IV: 50%<br>Annual Max Class I, II, III: \$1,500, Lifetime Max Class IV: \$1,000<br>X-Rays paid under: Class II<br>Adult Orthodontics: No<br>Sealants: No<br>Cleanings: 2 per year  | Single: 49.73<br>2-Person: 93.01<br>Family: 159.54       | D2064H<br><br><br><br><br><br><br><br><br>2L2O<br>2L2P<br>2L2Q |
| <b>Vision</b>          | VSP 3                                      | Plan year July to July  | Single: 7.17<br>2-Person: 15.42<br>Family: 23.19         | V3N<br>2L2R<br>2L2S<br>2L2T                                    |
| <b>Negotiated LTD</b>  | Neg LTD 66 2/3% Max \$3,000                | Replacement %: 66.67<br>Maximum Benefit: \$3,000<br>Maximum Monthly Salary: \$4,500<br>Waiting Period: 60 Calendar Days Modified Fill<br>Alcohol/Drug: Same as any other illness<br>Mental/Nervous: Same as any other illness<br>Social Security Offset: Family<br>Own Occupation: 2 years Minimum Benefit: 5%<br>Survivor Income Benefit: 0 months<br>Pre-Existing Conditions: Waived<br>Freeze on Offsets: Yes COLA: No<br>Educational Supplemental Program: No | 39.86  | LT250D 2L2U  |
| <b>PAK Life</b>        | \$25,000 PAK Life                          |   | 3.00   | P0250D 2L2V  |
| <b>PAK AD&amp;D</b>    | \$25,000 PAK AD&D                          |   | 0.75   | K0250D 2L2W  |
| <b>Basic Term Life</b> | Basic Term Life w/Med \$5,000              |   | 1.50   | BTLM04 001Z  |

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## Current Bargained Benefits Group Benefit Program Statement

| PAK B                 | Plan                                       | Brief Description   | Rate   | MESSA Codes                        |
|-----------------------|--|---|--|------------------------------------|
| <b>Dental</b>         | Dent100/100/50/50:1000/1500:2<br>6484-0006 | Class I: 100%<br>Class II: 100%<br>Class III: 50%<br>Class IV: 50%<br>Annual Max Class I, II, III: \$1,500, Lifetime Max Class IV: \$1,000<br>X-Rays paid under: Class II<br>Adult Orthodontics: No<br>Sealants: No<br>Cleanings: 2 per year  | Single: 47.55<br>2-Person: 89.03<br>Family: 155.44 | D2064I<br><br>2L30<br>2L31<br>2L32 |
| <b>Vision</b>         | VSP 3                                      | Plan year July to July  | Single: 7.17<br>2-Person: 15.42<br>Family: 23.19   | V3K 2L2X<br>2L2Y<br>2L2Z           |
| <b>Negotiated LTD</b> | Neg LTD 66 2/3% Max \$3,000                | Replacement %: 66.67<br>Maximum Benefit: \$3,000<br>Maximum Monthly Salary: \$4,500<br>Waiting Period: 60 Calendar Days Modified Fill<br>Alcohol/Drug: Same as any other illness<br>Mental/Nervous: Same as any other illness<br>Social Security Offset: Family<br>Own Occupation: 2 years Minimum Benefit: 5%<br>Survivor Income Benefit: 0 months<br>Pre-Existing Conditions: Waived<br>Freeze on Offsets: Yes COLA: No<br>Educational Supplemental Program: No | 39.86  | LT250E 2L33                        |
| <b>PAK Life</b>       | \$25,000 PAK Life                          |   | 3.00   | P0250E 2L34                        |
| <b>PAK AD&amp;D</b>   | \$25,000 PAK AD&D                          |   | 0.75   | K0250E 2L35                        |

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# Current Bargained Benefits Group Benefit Program Statement

**Fowler Public Schools**  
**700 N Main St**  
**Fowler, MI 48835-9777**

Group: **Full & Part Time Teachers**  
 County: **Clinton**  
 Employer ID: **526**

Benefit Program As Of Date: **01/01/2015**  
 Contact: **Teresa Pline, Billing Contact**

| Job                    | FT/PT Eligibility Rule ID                  | Job   | FT/PT Eligibility Rule ID                                |   |
|------------------------|--|---|--|---|
| Teacher - 100000       | FT/PT 526E                                 |   |  |   |
| PAK A                  | Plan                                       | Brief Description   | Rate   | MESSA Codes   |
| <b>Medical</b>         | MESSA Choices                              | In-Network Ded: \$500 Single/\$1000 Family<br>In-Network Copay: \$20 Office Visit/\$25 Urgent Care/\$50 ER<br>Out-of-Network Ded: \$1000 Single/\$2000 Family<br>Out-of-Network Coins: 20% of approved amount after deductible<br>Out-of-Network OOP Cap: \$2000 Single/\$4000 Family<br>Prescription Coverage: MESSA Saver Rx  | Single: 583.35<br>2-Person: 1,312.53<br>Family: 1,633.37 | 7F<br><br><br><br><br><br><br><br>2H9H<br>2H9I<br>2H9J    |
| <b>Dental</b>          | Dent100/100/50/50:1000/1500:2<br>6484-0001 | Class I: 100%<br>Class II: 100%<br>Class III: 50%<br>Class IV: 50%<br>Annual Max Class I, II, III: \$1,500, Lifetime Max Class IV: \$1,000<br>X-Rays paid under: Class II<br>Adult Orthodontics: No<br>Sealants: No<br>Cleanings: 2 per year  | Single: 45.14<br>2-Person: 84.54<br>Family: 150.02       | D2064<br><br><br><br><br><br><br><br>2H9K<br>2H9L<br>2H9M |
| <b>Vision</b>          | VSP 3                                      | Plan year July to July  | Single: 7.17<br>2-Person: 15.42<br>Family: 23.19         | V3 2H9N<br>2H9O<br>2H9P                                   |
| <b>Negotiated LTD</b>  | Neg LTD 66 2/3% Max \$3,000                | Replacement %: 66.67<br>Maximum Benefit: \$3,000<br>Maximum Monthly Salary: \$4,500<br>Waiting Period: 60 Calendar Days Modified Fill<br>Alcohol/Drug: Same as any other illness<br>Mental/Nervous: Same as any other illness<br>Social Security Offset: Family<br>Own Occupation: 2 years Minimum Benefit: 5%<br>Survivor Income Benefit: 0 months<br>Pre-Existing Conditions: Waived<br>Freeze on Offsets: Yes COLA: No<br>Educational Supplemental Program: No | 21.13  | LT250 2H9Q  |
| <b>PAK Life</b>        | \$25,000 PAK Life                          |   | 3.00   | P02501 2H9R   |
| <b>PAK AD&amp;D</b>    | \$25,000 PAK AD&D                          |   | 0.75   | K02501 2H9S   |
| <b>Basic Term Life</b> | Basic Term Life w/Med \$5,000              |   | 1.50   | BTLM01 001Z   |

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## Current Bargained Benefits Group Benefit Program Statement

| PAK B                 | Plan                                       | Brief Description   | Rate   | MESSA Codes                        |
|-----------------------|--|---|--|------------------------------------|
| <b>Dental</b>         | Dent100/100/50/50:1000/1500:2<br>6484-0002 | Class I: 100%<br>Class II: 100%<br>Class III: 50%<br>Class IV: 50%<br>Annual Max Class I, II, III: \$1,500, Lifetime Max Class IV: \$1,000<br>X-Rays paid under: Class II<br>Adult Orthodontics: No<br>Sealants: No<br>Cleanings: 2 per year  | Single: 46.37<br>2-Person: 86.82<br>Family: 153.27 | D2064A<br><br>2H9T<br>2H9U<br>2H9V |
| <b>Vision</b>         | VSP 3                                      | Plan year July to July  | Single: 7.17<br>2-Person: 15.42<br>Family: 23.19   | V3C 2H9W<br>2H9X<br>2H9Y           |
| <b>Negotiated LTD</b> | Neg LTD 66 2/3% Max \$3,000                | Replacement %: 66.67<br>Maximum Benefit: \$3,000<br>Maximum Monthly Salary: \$4,500<br>Waiting Period: 60 Calendar Days Modified Fill<br>Alcohol/Drug: Same as any other illness<br>Mental/Nervous: Same as any other illness<br>Social Security Offset: Family<br>Own Occupation: 2 years Minimum Benefit: 5%<br>Survivor Income Benefit: 0 months<br>Pre-Existing Conditions: Waived<br>Freeze on Offsets: Yes COLA: No<br>Educational Supplemental Program: No | 21.13  | LT250A 2H9Z                        |
| <b>PAK Life</b>       | \$25,000 PAK Life                          |   | 3.00   | P02502 2HAZ                        |
| <b>PAK AD&amp;D</b>   | \$25,000 PAK AD&D                          |   | 0.75   | K02502 2HB0                        |

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## Current Bargained Benefits Group Benefit Program Statement

| PAK C                  | Plan                                       | Brief Description   | Rate   | MESSA Codes  |
|------------------------|--|---|--|--|
| <b>Medical</b>         | MESSA ABC Plan 1                           | In-Network Ded: \$1300 Single Cov; \$2600 2-Person & Family Cov<br>In-Network OOP Cap: \$1000 Single Cov; \$2000 2-Person & Family Cov<br>Out-of-Network Ded: \$2600 Single Cov; \$5200 2-Person & Family Cov<br>Out-of-Network Coins: 20% of approved amount after deductible<br>Out-of-Network OOP Cap: \$2000 Single Cov; \$4000 2-Person & Family Cov<br>Prescription Coverage: MESSA ABC Rx<br>Health Savings Account with Health Equity                     | Single: 527.64<br>2-Person: 1,187.21<br>Family: 1,477.42 | 7VD<br><br><br><br><br><br><br><br>2R5N<br>2R5O<br>2R5P    |
| <b>Dental</b>          | Dent100/100/50/50:1000/1500:2<br>6484-0001 | Class I: 100%<br>Class II: 100%<br>Class III: 50%<br>Class IV: 50%<br>Annual Max Class I, II, III: \$1,500, Lifetime Max Class IV: \$1,000<br>X-Rays paid under: Class II<br>Adult Orthodontics: No<br>Sealants: No<br>Cleanings: 2 per year  | Single: 45.14<br>2-Person: 84.54<br>Family: 150.02       | D2064L<br><br><br><br><br><br><br><br>2TDX<br>2TE0<br>2TE1 |
| <b>Vision</b>          | VSP 3                                      | Plan year July to July  | Single: 7.17<br>2-Person: 15.42<br>Family: 23.19         | V3A 2TE2<br>2TE3<br>2TE4                                   |
| <b>Negotiated LTD</b>  | Neg LTD 66 2/3% Max \$3,000                | Replacement %: 66.67<br>Maximum Benefit: \$3,000<br>Maximum Monthly Salary: \$4,500<br>Waiting Period: 60 Calendar Days Modified Fill<br>Alcohol/Drug: Same as any other illness<br>Mental/Nervous: Same as any other illness<br>Social Security Offset: Family<br>Own Occupation: 2 years Minimum Benefit: 5%<br>Survivor Income Benefit: 0 months<br>Pre-Existing Conditions: Waived<br>Freeze on Offsets: Yes COLA: No<br>Educational Supplemental Program: No | 21.13  | LT250F 2TE5  |
| <b>PAK Life</b>        | \$25,000 PAK Life                          |   | 3.00   | P0250F 2TE6  |
| <b>PAK AD&amp;D</b>    | \$25,000 PAK AD&D                          |   | 0.75   | K0250F 2TE7  |
| <b>Basic Term Life</b> | Basic Term Life w/Med \$5,000              |   | 1.50   | BTLM02 001Z  |

**COBRA RATES:**

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

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