

## **Medical Rate Summary**

## Hesperia Community Schools All Employees

Assumed Effective Date: 1/1/2021

						Total Annual
Current Plan(s) and Segment:		1P	2P	FF		Cost
Administrators MESSA ABC Plan 1	Census	1		3	4	
MESSA ABC Plan 1 \$1400/\$2800-0%; ABC Rx	Rate	\$759.51	\$1,708.91	\$2,126.63		\$85,673
Teachers MESSA Choices	Census	4	1	5	10	
MESSA Choices \$200-0%; Saver Rx	Rate	\$941.32	\$2,117.98	\$2,635.71		\$228,742
Teachers MESSA ABC Plan 1	Census	2	4	20	26	
MESSA ABC Plan 1 \$1400/\$2800-0%; ABC Rx	Rate	\$759.51	\$1,708.91	\$2,126.63		\$610,647
Support Staff MESSA ABC Plan 1	Census		1		1	
MESSA ABC Plan 1 \$1400/\$2800-0%; ABC Rx	Rate	\$767.26	\$1,726.34	\$2,148.33		\$20,716
	TOTALS:	7	6	28	41	\$945,778

					Estimated	
				<b>Total Annual</b>	Annual	
Product Name	1P Rate	2P Rate	FF Rate	Cost	Savings	
BCN HMO Plans						
BCN HMO \$250-20%; \$2500 ECM; \$4/\$15/\$40/\$80/20%/20% Rx	\$624	\$1,499	\$1,873	\$789,772	\$156,006	
BCN HMO \$1500-0%; \$4/\$15/\$40/\$80/20%/20% Rx	\$584	\$1,402	\$1,753	\$739,020	\$206,757	
BCBSM Simply Blue Plans						
BCBSM SB PPO \$250-20%; \$2500 ECM; \$10/\$40/\$80 Rx	\$673	\$1,615	\$2,018	\$850,865	\$94,912	
BCBSM SB PPO \$1500-0%; \$10/\$40/\$80 Rx	\$640	\$1,535	\$1,919	\$809,013	\$136,764	
Priority Health PPO Plans						
Priority Health PPO \$200-0%; \$10/\$40 Rx	\$943	\$2,121	\$2,639	\$1,118,703	-\$172,925	
Priority Health PPO HSA Plans						
Priority Health PPO HSA \$1400-0%; \$10/\$40 Rx	\$713	\$1,604	\$1,996	\$846,117	\$99,661	
Priority Health POS Plans						
Priority Health POS \$200-0%; \$10/\$40 Rx	\$933	\$2,099	\$2,612	\$1,107,203	-\$161,425	

					Estimated	
				<b>Total Annual</b>	Annual	
Product Name	1P Rate	2P Rate	FF Rate	Cost	Savings	
Priority Health POS HSA Plans						
Priority Health POS HSA \$1400-0%; \$10/\$40 Rx	\$689	\$1,550	\$1,929	\$817,671	\$128,106	
McLaren	Solicited a	and declined	to quote			
HAP	Solicited a	and declined	to quote			
MESSA	Solicited a	and did not re	eceive options			

<sup>\*</sup>BCBSM, BCN and Priority Health rates include certain federal taxes and fees established by the Affordable Care Act as well as certain State taxes and assessments. The figures are estimates and may change for future billings.

<sup>\*</sup>BCBSM/BCN quoted rates do not include commission. SET SEG has added 3% to the quoted rates to account for commission.

<sup>\*</sup>MESSA rates include taxes and fees.

<sup>\*</sup>MESSA renewal rates exclude the required \$5,000 Basic Term Life fee of \$1.50.

<sup>\*</sup>Proposed rates are based on census provided by the district. Rates may change based on actual group enrollment and participation.



Dental Rate Summary Hesperia Community Schools All Employees

Assumed Effective Date: 1/1/2021-12/31/2021

					Monthly	<b>Total Annual</b>	
Current Plan(s) and Segment:		1P	2P	FF	Composite	Cost	Rate Period
Administrators w/ Medical	Census	1		3	\$100.57	\$4,827	1/1/2021-12/31/2021
MESSA Dental: 80%/80%/80%/80%; \$1250/\$2150	Rate	\$33.51	\$64.58	\$122.92			
Administrators w/o Medical	Census	2	3		\$54.34	\$3,260	1/1/2021-12/31/2021
MESSA Dental: 80%/80%/80%/80%; \$1250/\$2150	Rate	\$35.79	\$66.70	\$119.43			
Teachers w/ Medical	Census	6	7	25	\$92.38	\$42,125	1/1/2021-12/31/2021
MESSA Dental: 80%/80%/80%/80%; \$1250/\$2150	Rate	\$31.11	\$59.71	\$116.23			
Teachers w/o Medical	Census	6	2	8	\$78.21	\$15,017	1/1/2021-12/31/2021
MESSA Dental: 80%/80%/80%/80%; \$1250/\$2150	Rate	\$30.74	\$58.61	\$118.72			
Support Staff	Census		6	3	\$53.43	\$5,771	1/1/2021-12/31/2021
MESSA Dental: 100%/50%/50%; \$1000-No Ortho	Rate	\$23.29	\$43.13	\$74.04			
	TOTALS:	15	18	39		\$71,000	

					Monthly			
Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Composite	<b>Total Cost</b>	<b>Estimated Annual Savings</b>	
BCBSM Dental 100/80/50/50; \$1250/\$1250	1/1/2021-12/31/2021	35.87	71.74	125.55	\$93.41	\$80,709	-\$9,709	
Guardian	Solicited and declined to quote							
SunLife	Solicited and declined to quote							
MetLife	Solicited and declined to quote							
MESSA	Solicited and did not provide options							

<sup>\*</sup>MESSA & BCBSM rates include taxes and fees.



Vision Rate Summary
Hesperia Community Schools
All Employees

Assumed Effective Date: 1/1/2021

					Monthly	<b>Total Annual</b>	
Current Plan(s) and Segment:		1P	2P	FF	Composite	Cost	Rate Period
Administrators and Teachers	Census	15	12	36	\$18.92	\$14,306	1/1/2021-12/31/2021
MESSA VSP 3 \$0 Copay - \$65 Frame/\$115 CL	Rate	\$7.59	\$16.30	\$24.52			
	TOTALS:	15	12	36		\$14.306	

					Monthly			
Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Composite	<b>Total Cost</b>	<b>Estimated Annual Savings</b>	
NVA Vision \$0 Copay - \$65 Frame/ \$115 CL	1/1/2021-12/31/2024	\$4.95	\$10.64	\$16.00	\$12.35	\$9,335	\$4,971	
EyeMed SF Vision \$0 Coapy - \$65 Frame/ \$115 CL	1/1/2021-12/31/2024	\$5.69	\$11.19	\$16.49	\$12.91	\$9,759	\$4,547	
Guardian	Solicited and declined to quote							
SunLife	Solicited and declined to quote							
MetLife	Solicited and declined to quote							
MESSA	Solicited and did not provide options							

<sup>\*</sup>All rates include taxes and fees.

<sup>\*</sup>EyeMed rates are illustrative and include a \$2.00 pepm vision administration/network fee.

<sup>\*</sup>All proposed options, frames are in-lieu of contacts.