



Medical Rate Summary
Onaway Area Schools
All Employees

Assumed Effective Date: 10/1/24

DISCLAIMER: This document is a summary of certain plan features. It should not be interpreted as a complete comparison of the products represented.

| Current Plans and Segments | | 1P | 2P | FF | Total Annual Cost |
|---|----------------|----------|------------|------------|-------------------|
| All Employees (PH HMO HBCI Choice/Standard \$0-0%) | Census | 0 | 0 | 3 | \$74,659 |
| PH HMO HBCI \$0-0% (Choice) or \$1,000-20% (Standard); \$10/\$40/\$80/\$40/\$80 Rx | Rate | \$760.44 | \$1,590.31 | \$2,073.87 | |
| All Employees (PH HMO HBCI Choice/Standard \$250-10%) | Census | 1 | 1 | 10 | \$244,675 |
| PH HMO HBCI \$250-10% (Choice) or \$1,500-30% (Standard); \$10/\$40/\$80/\$40/\$80 Rx | Rate | \$671.52 | \$1,404.35 | \$1,831.37 | |
| All Employees (Priority Health HMO HSA \$1500-0%) | Census | 3 | 3 | 11 | \$280,344 |
| Priority Health HMO HSA \$1500-0%; \$10/\$40/\$80/\$40/\$80 after Ded. Rx | Rate | \$594.86 | \$1,244.03 | \$1,622.30 | |
| | TOTALS: | 4 | 4 | 24 | \$599,678 |

| Product Name | 1P Rate | 2P Rate | FF Rate | Total Cost | Estimated Annual Savings |
|---|------------|------------|------------|------------|--------------------------|
| BCBSM | | | | | |
| BCBSM SB PPO HSA \$1,600-0%; \$10/\$40/\$80 after Ded. Rx | \$734.64 | \$1,763.14 | \$2,203.93 | \$754,625 | -\$154,947 |
| BCN | | | | | |
| BCN HMO \$500-0%; \$10/\$30/\$60/\$80/20%/20% Rx | \$735.86 | \$1,766.06 | \$2,207.58 | \$755,875 | -\$156,197 |
| BCN BEP POS HSA \$1600-0%; \$10/\$30/\$60/\$80/20%/20% Rx | \$612.33 | \$1,469.58 | \$1,836.98 | \$628,982 | -\$29,304 |
| BCN BEP POS HSA \$2000-10%; \$4/\$15/\$40/\$80/20%/20% Rx | \$555.50 | \$1,333.20 | \$1,666.50 | \$570,610 | \$29,068 |
| Priority Health | | | | | |
| PH HMO HBCI Choice/Standard \$0-0%; \$10/\$40/\$80/\$40/\$80 Rx | \$1,008.43 | \$2,108.93 | \$2,750.19 | \$941,688 | -\$342,010 |
| PH HMO HBCI Choice/Standard \$250-10%; \$10/\$40/\$80/\$40/\$80 Rx | \$889.01 | \$1,859.18 | \$2,424.51 | \$830,172 | -\$230,494 |
| Priority Health HMO HSA \$1600-0%; \$10/\$40/\$80/\$40/\$80 after Ded. Rx | \$772.69 | \$1,615.92 | \$2,107.28 | \$721,550 | -\$121,872 |
| SET SEG | | | | | |
| SET SEG MEC (VEBA) | \$74.00 | \$148.00 | \$222.00 | \$74,592 | \$525,086 |

**SET MEC, provides only essential benefits as required under the ACA. \$200 admin fee and \$74 per enrolled life per month.



Dental Rate Summary
 Oneway Area Schools
 All Employees

Assumed Effective Date: 10/1/24

DISCLAIMER: This document is a summary of certain plan features. It should not be interpreted as a complete comparison of the products represented.

| Current Plans and Segments | | 1P | 2P | FF | Total Annual Cost | Rate Period |
|--|----------------|----------|-----------|-----------|-------------------|------------------|
| All Employees (SET SF 100%/75%/75%/50%-\$1000/\$1000) | Census | 9 | 10 | 42 | \$77,909 | 7/1/24 - 6/30/25 |
| SET SEG SF 100%/75%/75%/50%-\$1000/\$1000 | Rate | \$45.48 | \$84.40 | \$124.74 | | |
| | TOTALS: | 9 | 10 | 42 | \$77,909 | |

| Product Name | Rate Period | 1P Rate | 2P Rate | FF Rate | Total Cost | Estimated Annual Savings |
|--|---------------------------------|---------|---------|----------|------------|--------------------------|
| BCBSM | | | | | | |
| \$50/\$150 Ded.; 100/80/50/50; \$1,000/\$1,000 | 10/1/24 - 9/30/25 | \$34.55 | \$69.10 | \$120.92 | \$72,967 | \$4,942 |
| Equitable | | | | | | |
| \$0 Ded.; 100/75/60; \$1,000 | 10/1/24 - 9/30/25 | \$43.21 | \$80.18 | \$118.50 | \$74,012 | \$3,897 |
| Guardian | | | | | | |
| \$0 Ded.; 100/75/85/50; \$1,000/\$1,000 | 10/1/24 - 9/30/26 | \$38.82 | \$77.45 | \$142.76 | \$85,438 | -\$7,529 |
| Beam | Solicited and declined to quote | | | | | |

*SET ADN Dental SF rates are illustrative and include a \$6.95 per employee per month dental administration/network fee.

*BCBSM Quoted plan has enrollment tied to medical



Vision Rate Summary
 Onaway Area Schools
 All Employees

Assumed Effective Date: 10/1/24

DISCLAIMER: This document is a summary of certain plan features. It should not be interpreted as a complete comparison of the products represented.

| Current Plans and Segments | | 1P | 2P | FF | Total Annual Cost | Rate Period |
|---|---------------|----------|-----------|-----------|-------------------|------------------|
| All Employees (SET SF NVA \$0/\$0 Copay; \$65 Frame) | Census | 9 | 10 | 42 | \$8,803 | 7/1/24 - 6/30/25 |
| SET SF NVA \$0/\$0 Copay; \$65 Frame | Rate | \$5.36 | \$8.77 | \$14.23 | | |
| TOTALS: | | 9 | 10 | 42 | \$8,803 | |

| Product Name | Rate Period | 1P Rate | 2P Rate | FF Rate | Total Cost | Estimated Annual Savings |
|---|---------------------------------|---------|---------|---------|------------|--------------------------|
| Equitable | | | | | | |
| \$10/\$25 Copay; \$150 Frame/\$150 Contacts | 10/1/24 - 9/30/26 | \$5.09 | \$8.33 | \$13.52 | \$8,363 | \$440 |
| Guardian | | | | | | |
| \$0 Copay; \$130 Frame/ \$130 Contacts | 10/1/24 - 9/30/25 | \$8.70 | \$14.91 | \$26.09 | \$15,878 | -\$7,075 |
| \$0 Copay; \$150 Frame/\$150 Contacts | 10/1/24 - 9/30/25 | \$9.34 | \$16.01 | \$28.02 | \$17,052 | -\$8,249 |
| VSP | | | | | | |
| \$0 Copay; \$130 Frame/\$130 Contacts | 10/1/24 - 9/30/25 | \$13.49 | \$20.60 | \$36.93 | \$22,542 | -\$13,738 |
| BEAM | Solicited and declined to quote | | | | | |

*SET NVA SF Vision rates are illustrative and include a \$1.95 per employee per month vision administration fee. These plans do include network access.