

EXPIRED CONTRACTS - RATES SUBJECT TO PA54

Bay City Public Schools

	MCLAREN	MCLAREN	MCLAREN	For Employees taking Dental & Vision ONLY
	2016-2017	2016-2017	2016-2017	Dental & Vision 2016/2017
	Plan 4	Plan 6	Plan 5	ADN Inc.
Big Table Group Only	HMO	HMO	HMO	
Office Visit/Specialist Copay	\$40/\$40	\$40/\$40	\$20/\$20	
Urgent Care Copay	\$50	\$50	\$35	
ER Copay	\$150	\$150	\$150	
First Dollar Deductible - (Employee Paid)	\$500/\$1000	\$500/\$1000	\$250/\$500	
Coinsurance Percentage (Percentage=Employee's Share)	20%	20%	10%	
Potential Max Paid Out of Pocket (Employee's Share)	\$1500/\$3000	\$1500/\$3000	\$500/\$1000	
	Rx	Rx	Rx	
OTC	\$0	\$0	\$0	
Rx Copay - Generic	\$10	\$10	\$10	
90 Day - Generic	\$20	\$20	\$20	
Rx Copay- Brand Pref	\$30	\$30	\$20	
90 Day Brand Pref	\$60	\$60	\$40	
Rx Copay- Non/Pref B	\$60	\$60	\$30	
90 Day - Non/Pref B	\$120	\$120	\$60	
NOTES	Chiropractic - NO COVERAGE Hearing Benefits(excluded) Private Duty Nurses(excluded)	Chiropractic (100% up to \$1500) Hearing Benefits(excluded) Private Duty Nurses(excluded)	Chiropractic (100% up to \$1500) Hearing Benefits(excluded) Private Duty Nurses(excluded)	
DENTAL:	Self-Funded-ADN	Self-Funded-ADN	Self-Funded-ADN	Self-Funded-ADN
Class I	80%	80%	80%	80%
Class II	80%	80%	80%	80%
Class III	80%	80%	80%	80%
Class IV	80%	80%	80%	80%
Annual Max	\$1,300	\$1,300	\$1,300	\$1,300
Riders Included:	2 Cleanings, Sealants	2 Cleanings, Sealants	2 Cleanings, Sealants	2 Cleanings, Sealants
Ortho: \$1,300 Lifetime Max	\$1,300	\$1,300	\$1,300	\$1,300
VISION:	ADN Self-Funded	ADN Self-Funded	ADN Self-Funded	ADN Self-Funded
FIXED MONTHLY PREMIUMS:				
Single	\$ 551.41	\$ 562.41	\$ 629.41	\$ 37.41
2-Person	\$ 1,294.91	\$ 1,321.91	\$ 1,482.91	\$ 71.91
Family	\$ 1,485.42	\$ 1,515.42	\$ 1,694.42	\$ 116.42
FIXED ANNUAL PREMIUMS:				
Annual Single Premium	\$ 6,616.92	\$ 6,748.92	\$ 7,552.92	\$ 448.92
Annual 2P Premium	\$ 15,538.92	\$ 15,862.92	\$ 17,794.92	\$ 862.92
Annual Family Premium	\$ 17,825.04	\$ 18,185.04	\$ 20,333.04	\$ 1,397.04
Employer Premium Contribution				
Single	\$ 5,207.42	\$ 5,207.42	\$ 5,207.42	\$ 359.14
2 Person	\$ 11,278.58	\$ 11,278.58	\$ 11,278.58	\$ 690.34
Full-Family	\$ 14,260.03	\$ 14,260.03	\$ 14,260.03	\$ 1,117.63
Total Annual Employee Premium Cost				
Single	\$ 1,409.50	\$ 1,541.50	\$ 2,345.50	\$ 89.78
2 Person	\$ 4,260.34	\$ 4,584.34	\$ 6,516.34	\$ 172.58
Full-Family	\$ 3,565.01	\$ 3,925.01	\$ 6,073.01	\$ 279.41
Total Annual Employee Premium Cost Divided Over 26 Pays				
Single	\$ 54.21	\$ 59.29	\$ 90.21	\$ 3.45
2 Person	\$ 163.86	\$ 176.32	\$ 250.63	\$ 6.64
Full-Family	\$ 137.12	\$ 150.96	\$ 233.58	\$ 10.75
Total Annual Employee Premium Cost Divided Over 21 Pays				
Single	\$ 67.12	\$ 73.40	\$ 111.69	\$ 4.28
2 Person	\$ 202.87	\$ 218.30	\$ 310.30	\$ 8.22
Full-Family	\$ 169.76	\$ 186.91	\$ 289.19	\$ 13.31