

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

Medical Rate Summary Waverly Community Schools All Employees

Assumed Effective Date: 1/1/26

Current Plans and Segments		1P	2P	FF	Total Annual Cost
Employees Enrolled in BCBSM CB PPO \$250/\$500 0% Coinsurance - PPO 8 - Plan 052	Census	7	0	2	\$140,450
BCBSM CB PPO \$250/\$500 0% Coinsurance - PPO 8 - Plan 052; \$10/\$40 Rx	Rate	\$928.91	\$2,090.00	\$2,600.91	
Employees Enrolled in BCBSM SB PPO \$500/\$1,000 20% Coinsurance PPO 6 - Plan 095	Census	13	4	2	\$238,195
BCBSM SB PPO \$500/\$1,000 20% Coinsurance PPO 6 - Plan 095; \$20/\$40/\$80 Rx	Rate	\$719.19	\$1,618.17	\$2,013.72	
Employees Enrolled in BCBSM CB PPO \$1,000/\$2,000 0% Coinsurance PPO 4 - Plan 112	Census	10	7	8	\$505,325
BCBSM CB PPO \$1,000/\$2,000 0% Coinsurance PPO 4 - Plan 112; \$10/\$40 Rx	Rate	\$874.58	\$1,967.77	\$2,448.78	
Employees Enrolled in BCBSM SB HSA \$2,000/\$4,000 0% Coinsurance - HSA - Plan 115/116	Census	12	8	19	\$671,138
BCBSM SB HSA \$2,000/\$4,000 0% Coinsurance - HSA - Plan 115/116; \$10/\$40/\$80 after Ded. Rx	Rate	\$672.23	\$1,512.47	\$1,882.19	
Employees Enrolled in MESSA Choices \$1000/\$2000-10%, 5 Tier	Census	2	2	3	\$151,560
MESSA Choices \$1000-10%; 5 Tier Rx	Rate	\$847.65	\$1,907.21	\$2,373.42	
Employees Enrolled in MESSA ABC Plan 2.5 \$2500/\$5000-0%, 5 Tier	Census	13	3	3	\$256,775
MESSA ABC Plan 2.5 \$2500-0%; 5 Tier Rx	Rate	\$760.14	\$1,710.32	\$2,128.39	
Employees Enrolled in MESSA ABC Plan 2 (DH) \$2,000/\$4,000 0% Coinsurance	Census	26	7	44	\$1,648,684
MESSA ABC Plan 2 \$2000-0%; 3 Tier Rx	Rate	\$832.92	\$1,874.07	\$2,332.18	
Employees Enrolled in MESSA Balance+ \$1700-20%, Balance+ Rx	Census	11	3	7	\$351,976
MESSA Balance+ \$1700-20%; Balance+ Rx	Rate	\$785.31	\$1,766.95	\$2,198.87	
Employees Enrolled in MESSA Essentials, Essentials Rx	Census	8	3	5	\$249,576
MESSA Essentials \$375-20%; Essentials Rx	Rate	\$723.41	\$1,627.67	\$2,025.55	
	TOTALS:	102	37	93	\$4,213,680

Product Name	1P Rate	2P Rate	FF Rate	Total Cost	Estimated Annual Savings	
BCBSM						
BCBSM SB PPO HSA \$2000-0%; \$10/\$40/\$80 after Ded. Rx	\$802.76	\$1,926.62	\$2,408.28	\$4,525,638	-\$311,958	
BCN						
BCN HMO HSA \$2000-0%; \$4/\$15/\$40/\$80/20%/20% after Ded. Rx	\$742.68	\$1,782.44	\$2,228.05	\$4,186,947	\$26,732	
SET SEG						
SET SEG MEC (VEBA)	\$74.00	\$148.00	\$222.00	\$404,040	\$3,809,640	
HAP	Solicited and declined to quote					
Priority Health	Solicited and declined to quote					

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

^{*}BCBSM/BCN: BCBSM 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.

^{*}Proposed rates are based on census provided by the district. Rates may change based on actual group enrollment and participation.



SunLife

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Solicited and declined to quote

Dental Rate Summary Waverly Community Schools All Employees

Assumed Effective Date: 1/1/26 1P 2P FF Rate Period **Current Plans and Segments Total Annual Cost** Administrative Supervisor Census 1 1 2 \$4.333 1/1/26 - 12/31/26 \$35.39 \$129.17 MESSA Delta Dental 80%/80%/80%/80%-\$1,000/\$800 Rate \$67.37 **Central Office Administrators** Census 2 0 4 \$9,601 1/1/26 - 12/31/26 MESSA Delta Dental 100%/100%/50%/50%-\$1,200/\$1,500 \$48.93 \$90.05 \$175.55 Rate **Teachers** Census 69 26 100 \$200,204 1/1/26 - 12/31/26 MESSA Delta Dental 80%/80%/80%/70%-\$1,000/\$1,500 Rate \$33.34 \$62.24 \$127.65 Secretary, Paraprofessional, Cafeteria Worker 30+ 42 18 31 \$79,068 Census 1/1/26 - 12/31/26 \$35.21 \$126.43 MESSA Delta Dental 80%/80%/80%/80%-\$1,000/\$800 Rate \$66.16 3 8 **Principals & Assistant Principals** Census 3 \$23,846 1/1/26 - 12/31/26 MESSA Delta Dental 100%/100%/100%/50%-\$1,200/UCR \$52.61 \$97.82 \$191.98 Rate 5 2 5 **Non Union Administrators** \$11,402 1/1/26 - 12/31/26 Census MESSA Delta Dental 80%/80%/80%/80%-\$1,000/\$800 \$36.70 Rate \$67.92 \$126.17 6 9 Custodial, Grounds, Maintenance Census 15 \$35,773 1/1/26 - 12/31/26 MESSA Delta Dental 100%/85%/85%/85%-\$2,500/\$3,500 \$49.05 Rate \$90.35 \$189.25

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Total Cost	Estimated Annual Savings			
BCBSM	Solicited and did not provide	options							
Guardian	Solicited and did not provide	Solicited and did not provide options							
SET ADN	Solicited and declined to quo	ite							

TOTALS:

137

56

159

\$364,228



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Vision Rate Summary Waverly Community Schools All Employees

\$56,348

TOTALS: 156

68

164

Assumed Effective Date: 1/1/26 **Current Plans and Segments** 1P FF Total Annual Rate Period Cost Administrators/Principals/Non-Affiliated/Preschool Teachers, Bus Drivers, Clerical, Food Service, Monitors, Para-professionals, Specialists, Secret@eesus 18 18 21 \$7,345 7/1/25 -Technicians (SET SF NVA \$25/\$0 Copay; \$150 Frame) 6/30/26 SET SF NVA \$25/\$0 Copay; \$150 Frame Rate \$5.53 \$9.11 \$16.60 **Employees Enrolled in MESSA VSP 2 S** Census 124 134 \$42,740 1/1/26 -12/31/26 MESSA VSP 2 S Rate \$5.48 \$11.72 \$17.66 Employees Enrolled in MESSA VSP 3 Plus P 250CL Census 14 6 9 \$6,263 1/1/26 -12/31/26 Rate \$9.33 \$20.03 \$30.12 MESSA VSP 3 Plus P 350Cl

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Total Cost	Estimated Annual Savings	
EyeMed	Solicited and declined to quot	e					
NVA	Solicited and declined to quot	e					
SunLife	Solicited and declined to quot	e					
VSP	Solicited and declined to quot	e					



Waverly Community Schools - Quote Summary

January 1, 2026 Marketing Summary

Carrie	r	Line of Coverage	Response	Notes
Current:				
WMHIP				The district participates in the Western Michigan Health Insurance
***************************************		Medical	Quoted - Renewal	Pool
				Renewed with current plans.
Alternatives:				
None				

RENEWAL-FINANCIAL NOTICE: This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.

COVERAGE NOTICE: This analysis is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

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