



Medical Rate Summary

**Van Buren ISD
All Employees**

Assumed Effective Date: 7/1/2022

Current Plan(s) and Segment:		1P	2P	FF		Total Annual Cost
VBCC ACA, VBCC Covert, & VBCC Other Adm. Supp. w/ MESSA Choices \$500	Census	20	10	10	40	
MESSA Choices \$500-0%; Saver Rx w/Mandatory Mail	Rate	\$748.18	\$1,683.43	\$2,094.92		\$632,965
VBCC ACA, VBCC Covert, & VBCC Other Adm. Supp. w/ MESSA ABC Plan 1 \$1400-0%	Census	12	10	15	37	
MESSA ABC Plan 1 \$1400-0%; ABC Rx w/Mandatory Mail	Rate	\$668.18	\$1,503.43	\$1,870.91		\$613,393
VBCC ACA, VBCC Covert, & VBCC Other Adm. Supp. w/ MESSA ABC Plan 1 \$1400-10%	Census	14	3	9	26	
MESSA ABC Plan 1 \$1400-10%; ABC Rx w/Mandatory Mail	Rate	\$621.64	\$1,398.70	\$1,740.59		\$342,772
VBCC ACA, VBCC Covert, & VBCC Other Adm. Supp. w/ MESSA Essentials \$375	Census	15	5		20	
MESSA Essentials \$375-20%; Essentials Rx	Rate	\$508.69	\$1,144.56	\$1,424.32		\$160,238
VBCC All Employees w/ MESSA Choices \$500	Census	74	29	84	187	
MESSA Choices \$500-0%; Saver Rx w/Mandatory Mail	Rate	\$733.22	\$1,649.76	\$2,053.03		\$3,294,670
VBCC All Employees w/ MESSA ABC Plan 1 \$1400-0%	Census	57	40	203	300	
MESSA ABC Plan 1 \$1400-0%; ABC Rx w/Mandatory Mail	Rate	\$654.82	\$1,473.37	\$1,833.50		\$5,621,520
VBCC All Employees w/ MESSA ABC Plan 1 \$1400-10%	Census	62	21	99	182	
MESSA ABC Plan 1 \$1400-10%; ABC Rx w/Mandatory Mail	Rate	\$609.20	\$1,370.74	\$1,705.78		\$2,825,138
VBCC All Employees w/ MESSA Essentials \$375	Census	42	9	43	94	
MESSA Essentials \$375-20%; Essentials Rx	Rate	\$498.52	\$1,121.67	\$1,395.84		\$1,092,648
VBCC Lawrence w/ MESSA Essentials \$375	Census	1			1	
MESSA Essentials \$375-20%; Essentials Rx	Rate	\$503.60	\$1,133.11	\$1,410.08		\$6,043
TOTALS:		297	127	463	887	\$14,589,388

Product Name	1P Rate	2P Rate	FF Rate	Total Annual Cost	Estimated Annual Savings
Priority Health					
BCBSM					
BCN					

*MESSA rates include taxes and fees.

*MESSA rates exclude the required \$5,000 Basic Term Life fee of \$1.50.



Dental Rate Summary

Van Buren ISD

All Employees

Assumed Effective Date: 7/1/2022

Current Plan(s) and Segment:		1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
VBCC All Employees w/ Medical	Census	204	124	435	\$73.50	\$672,985	1/1/2022-12/31/2022
MESSA Dental 80%/80%/80%/80%; \$1,500/\$1,200	Rate	\$28.46	\$53.70	\$100.27			
VBCC All Employees w/out Medical	Census	74	73	243	\$77.11	\$360,894	1/1/2022-12/31/2022
MESSA Dental 80%/80%/80%/80%; \$1,500/\$1,200	Rate	\$27.38	\$52.18	\$99.75			
VBCC Lawrence	Census	4		2	\$60.95	\$4,388	1/1/2022-12/31/2022
MESSA Dental 80%/80%/80%/80%; \$1,000/\$1,000	Rate	\$33.52	\$64.68	\$115.81			
Employees w/ Self-funded Dental	Census	29	28	44	\$83.64	\$101,368	7/1/2022-6/30/2023
SET ADN SF Dental 100%/80%/80%/80%; \$1400/\$1200	Rate	\$35.56	\$64.77	\$127.33			
TOTALS:		311	225	724		\$1,139,635	

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Monthly Composite	Total Cost	Estimated Annual Savings
Guardian		Solicited and declined to quote					
MetLife		Solicited and declined to quote					
SunLife		Solicited and declined to quote					
Ameritas		Solicited and declined to quote					

*MESSA rates include taxes and fees

*SETSEG SF/ADN rates are illustrative only and include a \$6.35 per employee per month dental administration/network fee.



Vision Rate Summary
Van Buren ISD
All Employees
Assumed Effective Date: 7/1/2022

Current Plan(s) and Segment:	1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
All Employees w/ MESSA Vision	Census 21	22	39	\$17.65	\$17,367	1/1/2022-12/31/2022
MESSA VSP 3 G	Rate \$7.46	\$16.01	\$24.06			
All Employees w/ Self-funded Vision	Census					7/1/2022-6/30/2023
SET ADN SF Vision \$0/\$0 Copay	Rate \$8.18	\$14.51	\$27.77			
TOTALS:	21	22	39		\$17,367	

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Monthly Composite	Total Cost	Estimated Annual Savings
Guardian		Solicited and declined to quote					
MetLife		Solicited and declined to quote					
SunLife		Solicited and declined to quote					
Ameritas		Solicited and declined to quote					

*MESSA rates include taxes and fees

*SETSEG SF/ADN rates are illustrative only and include a \$6.35 per employee per month dental administration/network fee.