

Ann Arbor Public Schools

Period: 07/01/2014 - 06/30/2015

(Support Staff)

		Plan Year Deductible	Co-Insurance	2013 Co-Insurance Maximum	2014 Out of Pocket Maximum*	Emergency Room Copay	Benefit Riders	Prescription Drug Plan	Single 2Person Family Composite	Monthly Rates	Monthly Premium	Annual Premium	% Increase Over Current Plan Design
Current eff. 07/2013	Priority Health 100% HMO Plan In Network	None	100%	None	N/A	\$50	\$20 Office Visit \$20 Specialist \$20 Urgent Care	\$10/\$40 Mail Order 2x Contraceptives	7 5 7 338	\$471.17 \$1,035.58 \$1,223.68 \$934.87	\$338,159.39	\$4,057,912.68	
Option 1	Priority Health HealthByChoice Choice	None	100%	None	\$6350/12,700	\$25	\$5 Office Visit \$5 Specialist \$5 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	7 5 7 338	\$496.53 \$1,091.37 \$1,289.59 \$1,078.08	\$382,350.73	\$4,588,208.76	13.07%
	Standard	\$250/500	80/20%	\$1250/2500	\$6350/12,700	\$25	\$20 Office Visit \$20 Specialist \$20 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	7 5 7 338	\$496.53 \$1,091.37 \$1,289.59 \$1,078.08	\$382,350.73	\$4,588,208.76	13.07%
Option 2	Priority Health \$100 Deductible In Network	\$100/200	100%	None	\$6350/12,700	\$50	\$20 Office Visit \$20 Specialist \$20 Urgent Care	\$10/\$40 Mail Order 2x Contraceptives	7 5 7 338	\$482.60 \$1,060.71 \$1,253.36 \$916.57	\$327,255.93	\$3,927,071.16	-3.22%
Option 3	Priority Health \$200 Deductible In Network	\$200/400	100%	None	\$6350/12,700	\$50	\$20 Office Visit \$20 Specialist \$20 Urgent Care	\$10/\$40 Mail Order 2x Contraceptives	7 5 7 338	\$471.97 \$1,037.34 \$1,225.75 \$896.38	\$320,047.18	\$3,840,566.16	-5.36%
Option 4	Priority Health \$250 Deductible In Network	\$250/500	100%	None	\$6350/12,700	\$50	\$20 Office Visit \$20 Specialist \$20 Urgent Care	\$10/\$40 Mail Order 2x Contraceptives	7 5 7 338	\$467.06 \$1,026.55 \$1,213.00 \$887.06	\$316,719.45	\$3,800,633.40	-6.34%
Option 5	Priority Health \$0 Deductible In Network	None	100%	None	\$6350/12,700	\$50	\$25 Office Visit \$25 Specialist \$25 Urgent Care	\$10/\$40 Mail Order 2x Contraceptives	7 5 7 338	\$492.01 \$1,081.39 \$1,277.80 \$934.45	\$333,639.72	\$4,003,676.64	-1.34%
Option 6	Priority Health \$1250 HSA In Network	\$1250/2500	80/20%	None	\$2000/4000	Subject to ded/coins.	Subject to ded/coins.: Specialist Urgent Care	Subject to ded. then \$10/\$40 Mail Order 2x Contraceptives	7 5 7 338	\$336.22 \$738.98 \$873.20 \$638.56	\$227,994.12	\$2,735,929.44	-32.58%

A.M.Best Rating: A- (Excellent)

Renewal rates **INCLUDE** Michigan claim taxes and mandatory fees/taxes due to the Patient Protection and Affordable Care Act (PPACA).

\*Annual out-of-pocket maximums - applies to deductibles, copays and coinsurance amounts for all covered services - including cost sharing amounts for prescription drugs.

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(Teachers)

	Plan Year Deductible	Co-Insurance	2013 Co-Insurance Maximum	2014 Out of Pocket Maximum*	Emergency Room Copay	Benefit Riders	Prescription Drug Plan	Single 2Person Family Composite	Monthly Rates	Monthly Premium	Annual Premium	% Increase Over Current Plan Design	
Current eff. 07/2013	Priority Health 100% HMO Plan In Network	None	100%	None	N/A	\$25	\$5 Office Visit \$5 Specialist \$5 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	3 0 6 318	\$486.96 \$1,070.34 \$1,264.73 \$966.22	\$321,181.06	\$3,854,172.72	
Option 7	Priority Health \$0 Deductible In Network	None	100%	None	\$6350/12,700	\$25	\$15 Office Visit \$15 Specialist \$15 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	3 0 6 318	\$503.50 \$1,106.69 \$1,307.69 \$1,093.21	\$356,997.42	\$4,283,969.04	11.15%
Option 8	Priority Health \$100 Deductible In Network	\$100/200	100%	None	\$6350/12,700	\$25	\$5 Office Visit \$5 Specialist \$5 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	3 0 6 318	\$498.86 \$1,096.49 \$1,295.64 \$1,083.13	\$353,705.76	\$4,244,469.12	10.13%
Option 9	Priority Health Health By Choice Choice Standard	None \$250/500	100% 80/20%	None \$1250/2500	\$6350/12,700	\$25	\$5 Office Visit \$5 Specialist \$5 Urgent Care  \$20 Office Visit \$20 Specialist \$20 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives  \$15/\$30 Mail Order 2x Contraceptives	3 0 6 318  3 0 6 318	\$496.53 \$1,091.37 \$1,289.59 \$1,078.08	\$352,056.57	\$4,224,678.84	9.61%
Option 10	Priority Health \$0 Deductible In Network	None	100%	None	\$6350/12,700	\$25	\$25 Office Visit \$25 Specialist \$25 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	3 0 6 318	\$495.43 \$1,088.96 \$1,286.73 \$1,075.69	\$351,276.09	\$4,215,313.08	9.37%
Option 11	Priority Health \$200 Deductible In Network	\$200/400	100%	None	\$6350/12,700	\$25	\$5 Office Visit \$5 Specialist \$5 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	3 0 6 318	\$487.86 \$1,072.32 \$1,267.07 \$1,059.25	\$345,907.50	\$4,150,890.00	7.70%
Option 12	Priority Health \$250 Deductible In Network	\$250/500	100%	None	\$6350/12,700	\$25	\$5 Office Visit \$5 Specialist \$5 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	3 0 6 318	\$482.78 \$1,061.15 \$1,253.88 \$1,048.22	\$342,305.58	\$4,107,666.96	6.58%
Option 13	Priority Health \$1250 HSA In Network	\$1250/2500	80/20%	None	\$2000/4000	Subject to ded/coins.	Subject to ded/coins.: Specialist Urgent Care	Subject to ded. then \$10/\$40 Mail Order 2x Contraceptives	3 0 6 318	\$335.48 \$737.38 \$871.31 \$728.40	\$237,865.50	\$2,854,386.00	-25.94%

Rates INCLUDE Michigan claim taxes and mandatory fees/taxes due to the Patient Protection and Affordable Care Act (PPACA).

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(Support Staff)

		Calendar Year Deductible	Co-Insurance	2013 Co-Insurance Maximum	2014 Out of Pocket Maximum*	Emergency Room Copay	Benefit Riders	Prescription Drug Plan	Single 2Person Family Composite	Monthly Rx Rates	Monthly Premium	Annual Premium	% Increase Over Current Plan Design
Current eff. 07/2013	Blue Care Network BCN5 HMO Plan In Network	None	100%	None	N/A	\$50	\$20 Office Visit \$20 Specialist \$20 Urgent Care	\$10/\$40 Mail Order 2x Contraceptives	1	\$474.53	\$92,218.47	\$1,106,621.64	
									1	\$1,043.98			
									11	\$1,233.81			
								72	\$1,028.06				
Option 14	Blue Care Network HMO Plan TROOP In Network	None	100%	None	\$6350/12,700	\$50	\$20 Office Visit \$20 Specialist \$20 Urgent Care	\$10/\$40 Mail Order 2x Contraceptives	1	\$498.51	\$98,801.29	\$1,185,615.48	7.14%
									1	\$1,096.72			
									11	\$1,296.11			
								72	\$1,106.63				
Option 15	Blue Care Network Healthy Blue Living Enhanced	None	100%	None	\$6350/12,700	\$50	\$20 Office Visit \$20 Specialist \$20 Urgent Care	\$10/\$40 Mail Order 2x Contraceptives	1	\$452.94	\$86,798.85	\$1,041,586.20	-5.88%
									11	\$996.48			
									72	\$1,177.65			
	Standard	None	100%	None	\$6350/12,700	\$125	\$30 Office Visit \$30 Specialist \$30 Urgent Care	\$10/\$40 Mail Order 2x Contraceptives		\$1,005.49			

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Options **DO NOT** include hearing aid rider.

Ann Arbor Public Schools

Period: 07/01/2014 - 06/30/2015

(Teachers)

	Calendar Year Deductible	Co-Insurance	2013 Co-Insurance Maximum	2014 Out of Pocket Maximum*	Emergency Room Copay	Benefit Riders	Prescription Drug Plan	Single 2Person Family Composite	Monthly Rates	Monthly Premium	Annual Premium	% Increase Over Current Plan Design	
Current eff. 07/2013	Blue Care Network BCN5 HMO Plan In Network	None	100%	None	N/A	\$50	\$5 Office Visit \$5 Specialist \$10 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	7 2 6 525	\$494.06 \$1,086.96 \$1,284.59 \$1,070.37	\$594,817.63	\$7,137,811.56	
Option 16	Blue Care Network HMO Plan TROOP In Network	None	100%	None	\$6350/12,700	\$50	\$5 Office Visit \$5 Specialist \$10 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	7 2 6 525	\$521.99 \$1,148.39 \$1,357.18 \$1,158.77	\$642,824.85	\$7,713,898.20	8.07%
Option 17	Blue Care Network Healthy Blue Living Enhanced	None	100%	None	\$6350/12,700	\$25	\$5 Office Visit \$5 Specialist \$10 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives	7 2 6 525	\$475.01 \$1,045.03 \$1,235.04 \$1,054.48	\$566,427.37	\$6,797,128.44	-4.77%
	Standard	None	100%	None	\$6350/12,700	\$100	\$15 Office Visit \$15 Specialist \$65 Urgent Care	\$15/\$30 Mail Order 2x Contraceptives					
Option 18	Blue Care Network HSA HMO \$1250 In Network	\$1250/2500	80/20%	None	\$2250/4500	Subject to ded/coins.	Subject to ded/coins.: Office Visit Specialist Urgent Care	Subject to ded. then \$10/\$40/\$80 Mail Order 2x Contraceptives	7 2 6 525	\$345.63 \$760.37 \$898.63 \$767.26	\$412,143.43	\$4,945,721.16	-30.71%
Option 19	Blue Care Network HSA HMO \$1250 In Network	\$1250/2500	80/20%	None	\$2250/4500	Subject to ded/coins.	Subject to ded/coins.: Office Visit Specialist Urgent Care	Subject to ded. then \$4/\$15/\$40/\$80 20% max \$200 20% max \$300 Mail Order 2x Contraceptives	7 2 6 525	\$345.16 \$759.35 \$897.42 \$766.22	\$411,584.84	\$4,939,018.08	-30.80%
Option 20	Blue Care Network HSA HMO \$4000 In Network	\$4000/8000	80/20%	None	\$6350/12,700	Subject to ded/coins.	Subject to ded/coins.: Office Visit Specialist Urgent Care	Subject to ded. then \$6/\$25/\$50/\$80 20% max \$200 20% max \$300 Mail Order 2x Contraceptives	7 2 6 525	\$245.43 \$539.94 \$638.10 \$544.82	\$292,656.99	\$3,511,883.88	-55.28%

Rates **INCLUDE** Michigan claim taxes and mandatory fees/taxes due to the Patient Protection and Affordable Care Act (PPACA).

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(Support Staff)

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Current eff. 07/2013	BCBSM PPO Plan B							6	\$830.79			
	In Network	None	100%	None	\$1000/2000	\$50	\$10 Office Visit	0	\$1,993.90			
	Out of Network	\$250/500	80/20%	\$1500/3000	\$2250/4500		\$10 Specialist \$10 Urgent Care	2 10	\$2,492.37 \$1,774.71	\$27,716.58	\$332,598.96	
Current eff. 07/2013	BCBSM PPO Plan A							0	\$757.98			
	In Network	\$100/200	90/10%	\$500/1000	\$600/1200	\$50	\$20 Office Visit	1	\$1,819.14			
	Out of Network	\$250/500	70/30%	\$1500/3000	\$1750/3500		\$20 Specialist \$20 Urgent Care	1 2	\$2,273.94 \$1,619.17	\$7,331.42	\$87,977.04	
Current eff. 07/2013	BCBSM PPO Plan C							0	\$648.02			
	In Network	\$250/500	80/20%	\$1000/2000	\$1250/2500	\$100	\$30 Office Visit	4	\$1,555.26			
	Out of Network	\$500/1000	60/40%	\$3000/6000	\$3500/7000		\$30 Specialist \$30 Urgent Care	0 21	\$1,944.06 \$1,386.37	\$35,334.81	\$424,017.72	
Combined Total:										\$70,382.81	\$844,593.72	
Option 21	BCBSM PPO Plan							6	\$616.34			
	In Network	\$500/1000	80/20%	None	\$6350/12,700	\$150	\$20 Office Visit	5	\$1,479.24			
	Out of Network	\$1000/2000	60/40%		\$12,700/25,400		\$20 Specialist \$20 Urgent Care	3 33	\$1,849.04 \$1,316.62	\$60,089.82	\$721,077.84	-14.62%

Rates **INCLUDE** Michigan claim taxes and mandatory fees/taxes due to the Patient Protection and Affordable Care Act (PPACA).

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Options **DO NOT** include hearing aid rider.

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(Teachers)

	Calendar Year Deductible	Co-Insurance	2013 Co-Insurance Maximum	2014 Out of Pocket Maximum*	Emergency Room Copay	Benefit Riders	Prescription Drug Plan	Single 2Person Family	Monthly Rates	Monthly Premium	Annual Premium	% Increase Over Current Plan Design
Current eff. 07/2013	MESSA Super Care In Network Out of Network \$100/200 N/A	10% N/A	N/A N/A	\$1100/1200 N/A	10% N/A	10% Office Visit 10% Specialist 10% Urgent Care	\$10/\$20/\$40 Mail Order 2x Contraceptives	4 15 14	\$803.31 \$1,805.63 \$2,246.64	\$61,750.65	\$741,007.80	
Current eff. 07/2013	MESSA Choices II In Network Out of Network \$1300/2600 \$2600/5200	N/A 80/20%	N/A N/A	\$2300/4600 \$4500/9000	Subject to deductible	Subject to deductible	\$10/\$40/\$40 Mail Order 2x Contraceptives	13 20 45	\$700.25 \$1,573.69 \$1,958.02	\$128,687.95	\$1,544,255.40	108.40%
Option 22 eff. 01/2015	MESSA ABC Plan 1 In Network Out of Network HSA \$1300/2600 \$2600/5200	100% 80/20%	N/A N/A	\$1000/2000 \$2000/4000	Subject to ded/coins.	Subject to ded/coins: Specialist Urgent Care	Subject to ded. then: \$10/\$20/\$40 Mail Order 2x Contraceptives	0 0 0	\$499.69 \$1,124.34 \$1,399.16	\$0.00	\$0.00	

Rates do **NOT** include Michigan claim taxes and mandatory fees/taxes due to the Patient Protection and Affordable Care Act (PPACA).

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Options **DO NOT** include hearing aid rider.