

IOSCO RESA

Medical Quote (PA 106)

	Results	Comments
BCBSM	Quoted. Refer to medical plan and cost analysis	Current
BCN	Quoted. Refer to medical plan and cost analysis	Current
HAP	Quoted. Refer to medical plan and cost analysis	4% higher than renewal
Priority Health	Declined to quote.	Estimated 6% higher than renewal

Iosco RESA
Simply Blue PPO Plan

State of Michigan Hard Caps

	Single - 6,685	2 Person - 13,981	Family - 18,232		
	SB 1000	SB 2500	SB 4000	SB (HSA) 1350	SB (HSA) 3000
Deductible					
1 Person	1,000	2,500	4,000	1,350 ¹	3,000 ¹
2 Person/Family	2,000	5,000	8,000	2,700 ¹	6,000 ¹
Co-Insurance	20%	20%	30%	20%	20%
Out-of-Pocket Maximum					
1 Person	3,500	5,000	6,350	2,250	4,000
2 Person/Family	7,000	10,000	12,700	4,500	8,000
Preventive Care	100%	100%	100%	100%	100%
Co-Pays					
Office Visit	30	30	30	Subject to deductible and co-insurance	Subject to deductible and co-insurance
Specialist	50	50	50		
Urgent Care	60	60	60		
Emergency Room ²	150	150	150		

Prescription Drugs - 10/40/80 RXCM Drug card does not apply until after the deductible is met on HSA plans.

¹ Deductibles are based on amounts defined annually (January 1) by the Federal Government.

The above Deductibles, Co-Insurance, Co-Pays, and Out-of-Pocket maximums are for in-network services only. They are normally doubled for out-of-network services.

² After deductible, ER Co-pay waived if admitted.

Annual Premium	SB 1000	SB 2500	SB 4000	SB (HSA) 1350	SB (HSA) 3000
1 Person	6,939	6,266	5,864	6,377	5,503
2 Person	16,654	15,038	14,072	15,306	13,208
Family	20,818	18,798	17,590	19,132	16,510

1 Person Cost to Employee	SB 1000	SB 2500	SB 4000	SB (HSA) 1350	SB (HSA) 3000
Per Pay - 26 pays	10	No Cost	No Cost	No Cost	No Cost
Per Pay - 21 pays	12	No Cost	No Cost	No Cost	No Cost
Annual	254	No Cost	No Cost	No Cost	No Cost
Annual HSA Contribution	-	-	-	308	1,181.97

2 Person Cost to Employee	SB 1000	SB 2500	SB 4000	SB (HSA) 1350	SB (HSA) 3000
Per Pay - 26 pays	103	41	4	51	No Cost
Per Pay - 21 pays	127	50	4	63	No Cost
Annual	2,673	1,058	91	1,325	No Cost
Annual HSA Contribution	-	-	-	None	773

Family ³ Cost to Employee	SB 1000	SB 2500	SB 4000	SB (HSA) 1350	SB (HSA) 3000
Per Pay - 26 pays	99	22	No Cost	35	No Cost
Per Pay - 21 pays	123	27	No Cost	43	No Cost
Annual	2,586	565	No Cost	900	No Cost
Annual HSA Contribution	-	-	-	None	1,723

³ Family of 4 used in presentation.

Final prices may vary based on application of taxes and rounding.

Tawas Bay Insurance Agency, LLC

3/26/2019

Iosco RESA

BCN Plans

State of Michigan Hard Caps

	Single - 6,685	2 Person - 13,981	Family - 18,232		
	BCN 1000	BCN 2500	BCN 4000	BCN (HSA) 1350	BCN (HSA) 3000
Deductible					
1 Person	1,000	2,500	4,000	1,350 ¹	3,000 ¹
2 Person/Family	2,000	5,000	8,000	2,700 ¹	6,000 ¹
Co-Insurance	20%	20%	30%	20%	20%
Out-of-Pocket Maximum					
1 Person	3,500	5,000	6,350	2,250	4,000
2 Person/Family	7,000	10,000	12,700	4,500	8,000
Preventive Care	100%	100%	100%	100%	100%
Co-Pays					
Office Visit	30	30	30	Subject to deductible and co-insurance	Subject to deductible and co-insurance
Specialist	50	50	50		
High Technology Imaging (MRI, CAT, PET); after deductible ²	150	150	150		
Urgent Care	50	50	50		
Emergency Room ³	150	150	150		

Prescription Drugs - 10/40/80 Drug card does not apply until after the deductible is met on HSA plans.

¹ Deductibles are based on amounts defined annually (January 1) by the Federal Government.

² Co-insurance for most covered services, 50% co-insurance applies to some services see SBC for details

³ Applies \$150 copay or 50% of the approved amount to MRI, MRA, CAT and PET scans.

⁴ After deductible, ER Co-pay waived if admitted.

Total Annual Premium	BCN 1000	BCN 2500	BCN 4000	BCN (HSA) 1350	BCN (HSA) 3000
1 Person	6,356	5,860	5,544	5,562	4,793
2 Person	15,255	14,063	13,304	13,350	11,504
Family	19,068	17,579	16,630	16,688	14,380

1 Person Cost to Employee	BCN 1000	BCN 2500	BCN 4000	BCN (HSA) 1350	BCN (HSA) 3000
Per Pay - 26 pays	No Cost	No Cost	No Cost	No Cost	No Cost
Per Pay - 21 pays	No Cost	No Cost	No Cost	No Cost	No Cost
Annual	No Cost	No Cost	No Cost	No Cost	No Cost
Annual HSA Contribution	-	-	-	1,123	1,892

2 Person Cost to Employee	BCN 1000	BCN 2500	BCN 4000	BCN (HSA) 1350	BCN (HSA) 3000
Per Pay - 26 pays	49	3	No Cost	No Cost	No Cost
Per Pay - 21 pays	61	4	No Cost	No Cost	No Cost
Annual	1,274	82	No Cost	No Cost	No Cost
Annual HSA Contribution	-	-	-	631	2,477

Family Cost to Employee	BCN 1000	BCN 2500	BCN 4000	BCN (HSA) 1305	BCN (HSA) 3000
Per Pay - 26 pays	32	No Cost	No Cost	No Cost	No Cost
Per Pay - 21 pays	40	No cost	No Cost	No Cost	No Cost
Annual	836	No Cost	No Cost	No Cost	No Cost
Annual HSA Contribution	-	-	-	1,544	3,852

Final prices may vary based on application of taxes and rounding.

Tawas Bay Insurance Agency, LLC

3/26/2019