

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

Vision Rate Summary Cheboygan-Otsego-Presque Isle ESD All Employees Assumed Effective Date: 1/1/23

Current Plans and Segments		1P	2P	FF	Total Annual Cost	Rate Period
All Employees	Census	40	14	27	\$19,436	1/1/22 - 12/31/22
MESSA VSP 3 Plus P \$0/\$0 Copay; \$130 Frame	Rate	\$10.30	\$22.12	\$33.26		
	TOTALS:	40	14	27	\$19,436	

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Total Cost	Estimated Annual Savings				
EyeMed										
EyeMed \$0/\$0 Copay; \$130 Frame	1/1/23 - 12/31/27	\$11.34	\$21.55	\$31.64	\$19,315	\$121				
MESSA (VSP)										
MESSA VSP 3 Plus P \$0/\$0 Copay; \$130 Frame	1/1/23 - 12/31/23	\$9.31	\$20.00	\$30.07	\$17,571	\$1,865				
SET ADN										
SET ADN \$0/\$0 Copay; \$130 Frame	1/1/23 - 12/31/23	\$21.11	\$40.37	\$80.61	\$43,033	-\$23,596				
BCBSM	Solicited and declined to quote									
VSP	Solicited and declined to quote									

^{*}VSP rates include taxes and fees

^{*}SET ADN SF rates are illustrative and include a \$1.85 per employee per month vision administration fee. These plans do not include a network.