



## Dental Plan Summary

NICE Community School District

Administration

Assumed Effective Date: 10/1/2011

Current Plan(s) and Segment:	1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
Administration with Medical MESSA 100/80/80/80/1000/1500	Census Rate \$33.92	3 \$63.01	2 \$114.87	\$83.75	\$5,025	7/1/2011 - 6/30/2012
Administration without Medical MESSA 100/80/80/80/1000/1500	Census Rate \$37.72	1 \$69.92	1 \$122.01	\$122.01	\$1,464	7/1/2011 - 6/30/2012
<b>TOTALS:</b>		<b>3</b>	<b>3</b>		<b>\$6,489</b>	

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Monthly Composite	Total Cost	Estimated Annual Savings
SET FF 100/80/80/80/1000/1500	10/1/2011 - 6/30/2012	\$36.88	\$88.52	\$110.65	\$99.59	\$7,170	-\$681
SET SF 100/80/80/80/1000/1500	10/1/2011 - 6/30/2012	\$28.00	\$67.21	\$84.01	\$75.61	\$5,444	\$1,045

\*SET Self-Funded plans do not utilize a network.

\*SET Self-Funded plan cost was based on an industry standard utilization of 80%

\*Proposed SET Self-funded plan is a composite calculation of each segment remaining at their current benefit level



## Dental Plan Summary

NICE Community School District

Support Staff

Assumed Effective Date: 10/1/2011

Current Plan(s) and Segment:		1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
Support Staff 30-39.99 Hours	Census	3	1		\$54.13	\$2,598	7/1/2011 - 6/30/2012
MESSA 100/70/70/0/1000/0	Rate	\$40.10	\$96.23	\$120.29			
Support Staff 40-99 Hours with Medical	Census	2	2	7	\$81.79	\$10,796	7/1/2011 - 6/30/2012
MESSA 100/70/70/0/1000/0	Rate	\$33.76	\$61.89	\$101.20			
Support Staff 40-99 Hours without Medical	Census			1	\$108.33	\$1,300	7/1/2011 - 6/30/2012
MESSA 100/70/70/0/1000/0	Rate	\$37.52	\$68.70	\$108.33			
<b>TOTALS:</b>		<b>5</b>	<b>3</b>	<b>8</b>		<b>\$14,695</b>	

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Monthly Composite	Total Cost	Estimated Annual Savings
SET FF 100/80/80/80/1000/1500	10/1/2011 - 6/30/2012	\$28.01	\$67.22	\$84.03	\$63.37	\$12,167	\$2,527
SET SF 100/80/80/80/1000/1500	10/1/2011 - 6/30/2012	\$28.61	\$68.67	\$85.84	\$64.74	\$12,429	\$2,265

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## Dental Plan Summary

NICE Community School District

Teachers

Assumed Effective Date: 10/1/2011

Current Plan(s) and Segment:		1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
Teachers with Medical	Census	12	10	34	\$86.98	\$58,453	7/1/2011 -
MESSA 100/80/80/80/1000/1300	Rate	\$33.65	\$62.43	\$113.03			6/30/2012
Teachers without Medical	Census	1	1	17	\$105.04	\$23,950	7/1/2011 -
MESSA 100/80/80/80/1000/1300	Rate	\$32.98	\$61.21	\$111.86			6/30/2012
<b>TOTALS:</b>		<b>13</b>	<b>11</b>	<b>51</b>		<b>\$82,403</b>	

Product Name	Rate Period	1P Rate	2P Rate	FF Rate	Monthly Composite	Total Cost	Estimated Annual Savings
SET FF 100/80/80/80/1000/1500	10/1/2011 - 6/30/2012	\$33.50	\$80.39	\$100.49	\$85.93	\$77,337	\$5,066
SET SF 100/80/80/80/1000/1500	10/1/2011 - 6/30/2012	\$29.92	\$71.80	\$89.75	\$76.75	\$69,072	\$13,331

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## Dental Plan Comparison

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### NICE Community School District Administration

	CURRENT PLAN		CURRENT PLAN		SET SF 100/80/80/80/1000/1500 SET TPA	
Name	Administration with Medical		Administration without Medical			
Carrier	MESSA		MESSA			
Rate Period	7/1/2011 - 6/30/2012		7/1/2011 - 6/30/2012		10/1/2011 - 6/30/2012	
Purchased Plan Features	In Network		In Network		In Network	
Prevent %	100%		100%		100%	
Basic %	80%		80%		80%	
Major %	80%		80%		80%	
Ortho %	80%		80%		80%	
Basic Ded	\$0		\$0		\$0	
Major Ded	\$0		\$0		\$0	
Ortho Ded	\$0		\$0		\$0	
Bas/Maj Max	\$1,000		\$1,000		\$1,000	
Ortho Max	\$1,500		\$1,500		\$1,500	
Sealants Covered	No		No		No	
Implants Covered	No		No		No	
Purchased Plan Rates	Census	Rates	Census	Rates	Census	Rates
One Person (1P)	0	\$33.92	0	\$37.72	0	\$28.00
Two Person (2P)	3	\$63.01	0	\$69.92	3	\$67.21
Family (FF)	2	\$114.87	1	\$122.01	3	\$84.01
Projected Increase (0%)	0%		0%			
Total Annual Premium	5	\$5,025	1	\$1,464	6	\$5,444
Combined Annual Premium	\$6,489		< TOTALS			
Estimated Savings - \$					\$15	\$1,045
Estimated Savings - %						16%

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## Dental Plan Comparison

NICE Community School District

Support Staff

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	CURRENT PLAN		CURRENT PLAN		CURRENT PLAN			
Name	Support Staff 30-39.99 Hours		Support Staff 40-99 Hours with		Support Staff 40-99 Hours		SET FF 100/80/80/80/1000/1500	
Carrier	MESSA		Medical		without Medical		SET	
Rate Period	7/1/2011 - 6/30/2012		7/1/2011 - 6/30/2012		7/1/2011 - 6/30/2012		10/1/2011 - 6/30/2012	
Purchased Plan Features	In Network		In Network		In Network		In Network	
Prevent %	100%		100%		100%		100%	
Basic %	70%		70%		70%		80%	
Major %	70%		70%		70%		80%	
Ortho %	0%		0%		0%		80%	
Basic Ded	\$0		\$0		\$0		\$0	
Major Ded	\$0		\$0		\$0		\$0	
Ortho Ded	\$0		\$0		\$0		\$0	
Bas/Maj Max	\$1,000		\$1,000		\$1,000		\$1,000	
Ortho Max	\$0		\$0		\$0		\$1,500	
Sealants Covered	No		No		No		No	
Implants Covered	No		No		No		No	
Purchased Plan Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates
One Person (1P)	3	\$40.10	2	\$33.76	0	\$37.52	5	\$28.01
Two Person (2P)	1	\$96.23	2	\$61.89	0	\$68.70	3	\$67.22
Family (FF)	0	\$120.29	7	\$101.20	1	\$108.33	8	\$84.03
Projected Increase (0%)	0%		0%		0%			
Total Annual Premium	4	\$2,598	11	\$10,796	1	\$1,300	16	\$12,167
Combined Annual Premium	\$14,695		< TOTALS		< TOTALS		\$12,429	
Estimated Savings - \$							\$13	\$2,527
Estimated Savings - %								17%

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## Dental Plan Comparison

NICE Community School District  
Teachers

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	CURRENT PLAN		CURRENT PLAN					
Name	Teachers with Medical		Teachers without Medical		SET FF 100/80/80/80/1000/1500		SET SF 100/80/80/80/1000/1500	
Carrier	MESSA		MESSA		SET		SET TPA	
Rate Period	7/1/2011 - 6/30/2012		7/1/2011 - 6/30/2012		10/1/2011 - 6/30/2012		10/1/2011 - 6/30/2012	
Purchased Plan Features	In Network		In Network		In Network		In Network	
Prevent %	100%		100%		100%		100%	
Basic %	80%		80%		80%		80%	
Major %	80%		80%		80%		80%	
Ortho %	80%		80%		80%		80%	
Basic Ded	\$0		\$0		\$0		\$0	
Major Ded	\$0		\$0		\$0		\$0	
Ortho Ded	\$0		\$0		\$0		\$0	
Bas/Maj Max	\$1,000		\$1,000		\$1,000		\$1,000	
Ortho Max	\$1,300		\$1,300		\$1,500		\$1,500	
Sealants Covered	No		No		No		No	
Implants Covered	No		No		No		No	
Purchased Plan Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates
One Person (1P)	12	\$33.65	1	\$32.98	13	\$33.50	13	\$29.92
Two Person (2P)	10	\$62.43	1	\$61.21	11	\$80.39	11	\$71.80
Family (FF)	34	\$113.03	17	\$111.86	51	\$100.49	51	\$89.75
Projected Increase (0%)	0%		0%					
Total Annual Premium	56	\$58,453	19	\$23,950	75	\$77,337	75	\$69,072
Combined Annual Premium	\$82,403		< TOTALS					
Estimated Savings - \$					\$6	\$5,066	\$15	\$13,331
Estimated Savings - %						6%		16%

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# Vision Plan Summary

NICE Community School District

Administration

Assumed Effective Date: 10/1/2011

Current Plan(s) and Segment:		1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
Administration	Census		3	3	\$28.69	\$2,065	7/1/2011 - 6/30/2012
	MESSA VSP Plan 3 Plus	Rate \$10.65	\$22.90	\$34.47			
<b>TOTALS:</b>			<b>3</b>	<b>3</b>		<b>\$2,065</b>	

Product Name	1P	2P	FF	Monthly Composite	Total Annual Cost	Estimated Annual Savings
SET UltraVision Plan 3 - \$80 Frames	\$13.36	\$32.05	\$32.05	\$32.05	\$2,308	-\$242
SET Vision Self-funded Plan 3 - \$80 Frames	\$8.53	\$20.47	\$25.59	\$23.03	\$1,658	\$407
UHCV Platinum	\$22.04	\$22.04	\$22.04	\$22.04	\$1,587	\$478
NVA VSP Plan 3 Plus Match	\$6.25	\$11.27	\$17.63	\$14.45	\$1,040	\$1,025

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\*NVA plan utilizes a network, but provider participation may vary

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## Vision Plan Summary

NICE Community School District

Support Staff

Assumed Effective Date: 10/1/2011

Current Plan(s) and Segment:		1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
Support Staff	Census	5	3	8	\$17.07	\$3,277	7/1/2011 - 6/30/2012
	MESSA VSP Plan 3 Rate	\$7.32	\$15.73	\$23.66			
TOTALS:		5	3	8		\$3,277	

Product Name	1P	2P	FF	Monthly Composite	Total Annual Cost	Estimated Annual Savings
SET UltraVision Plan 3 - \$65 Frames	\$12.54	\$30.08	\$30.08	\$24.60	\$4,723	-\$1,446
SET Vision Self-funded Plan 3 - \$65 Frames	\$6.32	\$15.18	\$18.97	\$14.31	\$2,747	\$530
UHCV Gold	\$21.35	\$21.35	\$21.35	\$21.35	\$4,099	-\$822
NVA VSP Plan 3 Match	\$5.04	\$9.34	\$13.36	\$10.01	\$1,921	\$1,356

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# Vision Plan Summary

NICE Community School District

Teachers

Assumed Effective Date: 10/1/2011

Current Plan(s) and Segment:			1P	2P	FF	Monthly Composite	Total Annual Cost	Rate Period
Teachers	Census		13	11	51	\$19.66	\$17,698	7/1/2011 - 6/30/2012
	MESSA VSP Plan 3	Rate	\$7.32	\$15.73	\$23.66			
<b>TOTALS:</b>			<b>13</b>	<b>11</b>	<b>51</b>		<b>\$17,698</b>	

Product Name	1P	2P	FF	Monthly Composite	Total Annual Cost	Estimated Annual Savings
SET UltraVision Plan 3 - \$65 Frames	\$12.54	\$30.08	\$30.08	\$27.04	\$24,335	-\$6,637
SET Vision Self-funded Plan 3 - \$65 Frames	\$6.33	\$15.20	\$19.00	\$16.25	\$14,622	\$3,076
UHCV Gold	\$21.35	\$21.35	\$21.35	\$21.35	\$19,215	-\$1,517
NVA VSP Plan 3 Match	\$5.04	\$9.34	\$13.36	\$11.33	\$10,195	\$7,503

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## Vision Plan Comparison

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NICE Community School District  
Administration

Name Carrier Rate Period Purchased Plan Features	CURRENT PLAN		SET Vision Self-funded Plan 3 - \$80		UHCV Platinum		NVA VSP Plan 3 Plus Match	
	Administration		Frames		United Healthcare Vision		NVA	
	MESSA VSP Plan 3 Plus		SET TPA		7/1/2011 - 6/30/2012		7/1/2011 - 6/30/2014	
	Out of Network				Out of Network		Out of Network	
	In Network	Allowance			In Network	Allowance	In Network	Allowance
Optometrist Exam	100%	\$35		\$64	100%	\$45	100%	\$35
Ophthalmologist Exam	100%	\$45		\$64	100%	\$45	100%	\$45
Regular Lenses	100%	\$38		\$84	100%	\$56	100%	\$38
Bifocal Lenses	100%	\$60		\$96	100%	\$90	100%	\$60
Trifocal Lenses	100%	\$72		\$120	100%	\$110	100%	\$72
Lentiuclear Lenses	100%	\$108		\$144	100%	\$138	100%	\$108
Frames	\$80	\$66		\$36	\$130	\$66	\$80	\$66
Necessary Contacts	100%	\$150		\$200	100%	\$200	100%	\$150
Cosmetic Contacts	100%	\$150		\$200	\$200	\$200	\$200	\$150
Exam Copay	\$0.00	n/a		\$0.00	\$0.00	n/a	\$0.00	n/a
Material Copay	\$0.00	n/a		\$0.00	\$0.00	n/a	\$0.00	n/a
Purchased Plan Rates	Census	Rates	Census	Rates	Census	Rates	Census	Rates
One Person (1P)	0	\$10.65	0	\$8.53	0	\$22.04	0	\$6.25
Two Person (2P)	3	\$22.90	3	\$20.47	3	\$22.04	3	\$11.27
Family (FF)	3	\$34.47	3	\$25.59	3	\$22.04	3	\$17.63
Projected Increase (0%)	0%							
Total Annual Premium	6	\$2,065	6	\$1,658	6	\$1,587	6	\$1,040
Combined Annual Premium	\$2,065							
Estimated Savings - \$			\$6	\$407	\$7	\$478	\$14	\$1,025
Estimated Savings - %				20%		23%		50%
Quote Expiration			6/30/2012		6/30/2012		6/30/2014	

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## Vision Plan Comparison

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NICE Community School District  
Support Staff

Name Carrier Rate Period Purchased Plan Features	CURRENT PLAN		SET Vision Self-funded Plan 3 - \$65		NVA VSP Plan 3 Match	
	Support Staff		Frames		NVA	
	MESSA VSP Plan 3		SET TPA		NVA	
	7/1/2011 - 6/30/2012		7/1/2011 - 6/30/2012		7/1/2011 - 6/30/2014	
Purchased Plan Features	Out of Network				Out of Network	
	In Network	Allowance			In Network	Allowance
Optometrist Exam	100%	\$35	\$64		100%	\$35
Ophthalmologist Exam	100%	\$45	\$64		100%	\$45
Regular Lenses	100%	\$38	\$84		100%	\$38
Bifocal Lenses	100%	\$60	\$96		100%	\$60
Trifocal Lenses	100%	\$72	\$120		100%	\$72
Lentiuclar Lenses	100%	\$108	\$144		100%	\$108
Frames	\$65	\$55	\$36		\$65	\$55
Necessary Contacts	\$115	\$115	\$200		100%	\$115
Cosmetic Contacts	\$115	\$115	\$200		\$115	\$115
Exam Copay	\$0.00	n/a	\$0.00		\$0.00	n/a
Material Copay	\$0.00	n/a	\$0.00		\$0.00	n/a
Purchased Plan Rates	Census	Rates	Census	Rates	Census	Rates
One Person (1P)	5	\$7.32	5	\$6.32	5	\$5.04
Two Person (2P)	3	\$15.73	3	\$15.18	3	\$9.34
Family (FF)	8	\$23.66	8	\$18.97	8	\$13.36
Projected Increase (0%)	0%					
Total Annual Premium	16	\$3,277	16	\$2,747	16	\$1,921
Combined Annual Premium	\$3,277					
Estimated Savings - \$			\$3	\$530	\$7	\$1,356
Estimated Savings - %			16%		41%	
Quote Expiration			6/30/2012		6/30/2014	

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## Vision Plan Comparison

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NICE Community School District  
Teachers

Name Carrier Rate Period Purchased Plan Features	CURRENT PLAN		SET Vision Self-funded Plan 3 - \$65		NVA VSP Plan 3 Match	
	Teachers		Frames		NVA	
	MESSA VSP Plan 3		SET TPA		NVA	
	7/1/2011 - 6/30/2012		7/1/2011 - 6/30/2012		7/1/2011 - 6/30/2014	
Purchased Plan Features	Out of Network				Out of Network	
	In Network	Allowance			In Network	Allowance
Optometrist Exam	100%	\$35	\$64		100%	\$35
Ophthalmologist Exam	100%	\$45	\$64		100%	\$45
Regular Lenses	100%	\$38	\$84		100%	\$38
Bifocal Lenses	100%	\$60	\$96		100%	\$60
Trifocal Lenses	100%	\$72	\$120		100%	\$72
Lentiuclar Lenses	100%	\$108	\$144		100%	\$108
Frames	\$65	\$55	\$36		\$65	\$55
Necessary Contacts	\$115	\$115	\$200		100%	\$115
Cosmetic Contacts	\$115	\$115	\$200		\$115	\$115
Exam Copay	\$0.00	n/a	\$0.00		\$0.00	n/a
Material Copay	\$0.00	n/a	\$0.00		\$0.00	n/a
Purchased Plan Rates	Census	Rates	Census	Rates	Census	Rates
One Person (1P)	13	\$7.32	13	\$6.33	13	\$5.04
Two Person (2P)	11	\$15.73	11	\$15.20	11	\$9.34
Family (FF)	51	\$23.66	51	\$19.00	51	\$13.36
Projected Increase (0%)	0%					
Total Annual Premium	75	\$17,698	75	\$14,622	75	\$10,195
Combined Annual Premium	\$17,698					
Estimated Savings - \$			\$3	\$3,076	\$8	\$7,503
Estimated Savings - %			17%		42%	
Quote Expiration			6/30/2012		6/30/2014	

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