## **City Clerk**

OCT 3 1 2025

From: Stefanie Blaisdell <sblaisdell@acrisure.com>

**Sent:** Friday, October 31, 2025 9:48 AM **To:** City Clerk; Mayor's Assistant

Subject: 01/01/2026 City of Mackinac Island Medical Renewal -13.04 Increase

Attachments: City of Mackinac Island Medical Renewal Exhibit.pdf

## Good morning,

City of Mackinac Island Medical renewal was received with a 13.04% increase in premium. Please see attached for the current vs. renewal comparison as well as the comparable plan designs quoted.

Dental renewal received with 7% increase in rate and no changes in benefits.

Coverage	Current Rate(s)	Renewal Rate(s)	Lives	Renewal Annual Premium	% Change
Voluntary Dental				\$19,154.28	7.0%
Employee Only	\$29.60	\$31.67	15		
Employee + 1 Dependent	\$71.03	\$76.00	6		
Employee + Family	\$88.80	\$95.02	7		
Total Lives			28		

Please take a moment to review and let me know a good time to discuss.

Thank you,

## Stefanie Blaisdell

Sr. Account Manager Midwest Division

1406 N Mitchell Street Cadillac, MI 49601 Direct: 231-306-1017 Cell: 231-878-4440



## **UPCOMING OUT OF OFFICE: October 27th - October 31st**

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**RENEWAL SUMMARY** 

Contract/Group #:

007003463 - 0002

**Renewal Date:** 1/1/2026



	Group Health Options:			Current/	Renewal Plan		Reimbur	sed Plan
(1)	Deductible			\$5,00	00/\$10,000		\$1,000/	\$2,000
	Coinsurance %				30%		09	
	Coinsurance Max			\$1,3!	50/\$2,700		\$0/	<b>'\$0</b>
	Prescription			\$20/\$60/\$	\$100/20%/25%		\$20/\$60/\$10	0/20%/25%
	90 Day Supply			MOI	PD3x-\$10		MOPD:	
	OV/SP/CH/UC/ER			\$30/\$50/\$3	30 (30)/\$60/\$150		\$25/\$25/\$0	
	Out of Pocket Max			\$6,35	50/\$12,700		\$6,350/	\$12,700
	Notes:							
	Plan Design:			Simply Blue HRA	PPO Platinum \$500	0	Acrisure Sea	amless HRA
				simply	<b>blue</b> <sup>SM</sup>			ISURE"
- 51		Total#	#		ent Rates		Renewa	
	Single	7	7	\$1	673.97		\$763	3.17
	Double	4	4	\$1	,617.53		\$1,83	1.61
8	Family	<u>5</u>	<u>5</u>	\$2	,021.91	- 1	\$2,28	9.51
ă		16	16	_		- 1		
MEDICAL	Total Annual Cost:	10	1.0	, ¢2	255,570		\$289	394
				ļ		- 1	\$33,8	
	Cost Change from Current:					- 1	13.2	
إ	% Difference from Current:	_					13.2	470
		Total#	#	Curr	ent Rates		Renewa	l Rates
	Single	7	7	\$	81.57		\$54	.62
- 4	Double	4	4	\$:	155.03		\$103	3.80
	Family	<u>5</u>	5	s:	186.51	- 1	\$124	1.88
Ħ	A COLA A COL	16   16						
	Total Annual Cost:		\$25,484			\$17,063		
	Cost Change from Current:						(\$8,4	
	% Difference from Current:						-33.04%	
				Tier 4:	: Max \$200			
				Tier 5:	: Max \$300			Acres 18 and
Pates	Include Fully Insured Premium				urrent		Rene	
	& HRA Illustrative Rates.	Total			strative		Illustr	
	& TITO MUSDOUVE ROLES.	#	#		Cost		Со	
	Single	7	7	\$	755.54		\$817	7.79
	Double	4	4	\$1	,772.56		\$1,93	5.41
필	Family	5	<u>5</u>	\$2,	,208.42		\$2,41	4.39
듦	•	16	16					
Σ	Annual Total Cost:			\$2	81,053		\$306,	458
	Cost Change from Current:			ļ -			\$25,4	
	• •						9.04	
_	% Difference from Current:				,		9.04	7,0
	COMBINED CURRENT COST			\$281,053	]			
	COMBINED RENEWAL COST			\$306,458	l .			
-	COST CHANGE			\$25,404	I			
I	% CHANGE			9.04%	]			
						( <u>*</u>		
	2026 PA152 Calculations	1					Hard	20%
	Annual Hard Cap:						Сар	Cost
	Single \$7,942.09					Single	\$200.75	\$163.56
	Two Person \$16,609.38					Double	\$481.80	\$387.08
	Family \$21,660.30	J				Family	\$602.25	\$482.88
	DISCLAIME	RS			< Please rea	ad prior	to making any dec	cision >

- Rates do include estimated federal and state taxes, fees and assessments.

- nates do michae estimated receira and state taxes, rees and assessments.

   All carriers reserve the right to adjust rates if any of the assumptions or calculations used in the quoting process are incorrect.

   All carriers reserve the right to adjust rates if there is a +/- 10% change in enrollment, demographics or contract mix, or change in benefits.

   Final rates are determined by the underwriting carrier based on actual group enrollment and participation. This is only a brief summary of benefits, it is not a contract.

   Additional limitations and exclusions may apply. If there is a discrepancy between this document and any applicable plan document, the plan document will control.

   Census based on most current membership numbers available.

- Administrative fees may apply.

   Pre-existing conditions, participation rules, and medical underwriting rules may apply prior to final rates (not included above).
- Plan design above shows in-Network comparisons only. See specific plan benefit summary sheets for out of network.
   All benefit changes are subject to underwriting approval. Exceptions may apply with prior underwriting approval of union contract.
   Michigan public employers must comply with PA 152, Publicly Funded Health Insurance Act. Assistance with PA 152 calculations available upon request. Public employers who opt out of
- PA 152 should notify their representative
   Please allow a minimum of 45-60 days for a benefit change (varies based on carriers)
- This is not a binder of coverage, please do not cancel current coverage until final approval is given by new carrier.
   HRA and/or Rx Illustrative rates are not a guarantee of performance. Results may vary.
- Employee cost share cannot be higher than actual medical premium
- Acrisure is not responsible for typographical errors.

Original Date: 11/13/2025 SL

Modified Date:

007003463 - 0003

Contract/Group #: Renewal Date: 1/1/2026

**Customer Name:** 





Group Health Options:			Current/Renewal Plan	Reimbursed Plan
Deductible			\$5,000/\$10,000	\$500/\$1,000
Coinsurance %			30%	0%
Coinsurance Max			\$1,350/\$2,700	\$0/\$0
Prescription			\$20/\$60/\$100/20%/25%	\$20/\$60/\$100/20%/25%
90 Day Supply			MOPD3x-\$10	MOPD3x-\$10
OV/SP/CH/UC/ER			\$30/\$50/\$30 (30)/\$60/\$150	\$25/\$25/\$0/\$0/\$50
Out of Pocket Max			\$6,350/\$12,700	\$6,350/\$12,700
Notes:				
Plan Design:			Simply Blue HRA PPO Platinum \$5000	Acrisure Seamless HRA
			simply <b>blue</b> <sup>SM</sup>	ACRISURE"
	Total#	#	Current Rates	Renewal Rates
Single	7	7	\$692.24	\$780.15
_	2	2	\$1,661.38	\$1,872.36
Double Family Total Appual Cost:	2	2	\$2,076.72	\$2,340.45
,y	11	11	7=,=====	
Total Annual Cost:	**	11	\$147,863	\$166,640
Total Allindar Cost.			\$147,003	\$18,777
Cost Change from Current:				12.70%
% Difference from Current:				12.70%
	Total#	#	Current Rates	Renewal Rates
Single	7	7	\$98.76	\$66.12
Double	2	2	\$196.28	\$131.42
Family	2	2	\$238.07	\$159.40
Family	11	11		
Total Annual Cost:		9	\$18,720	\$12,534
Cost Change from Current:			7=3,1=1	(\$6,186)
% Difference from Current:			ľ	-33.05%
N Dijjerence from current.	-		Tier 4: Max \$200	V-1
			Tier 5: Max \$300	
es Include Fully Insured Premium			Current	Renewal
& HRA Illustrative Rates.	lotai		Illustrative	Illustrative
& IMA MUSICULE ROLES.	#	#	Cost	Cost
Single	7	7	\$791.00	\$846.27
	7	7	\$791.00	\$846.27
	7 2	7	\$791.00 \$1,857.66	\$846.27 \$2,003.78
	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66	\$846.27 \$2,003.78
Double Family Annual Total Cost:	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79	\$846.27 \$2,003.78 \$2,499.85
	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79	\$846.27 \$2,003.78 \$2,499.85 \$179,174
Double Family  Annual Total Cost:  Cost Change from Current:	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79	\$846.27 \$2,003.78 \$2,499.85 \$179,174 \$12,591
Double Family  Annual Total Cost:  Cost Change from Current:  % Difference from Current:	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79 <b>\$166,583</b>	\$846.27 \$2,003.78 \$2,499.85 \$179,174 \$12,591
Double Family  Annual Total Cost: Cost Change from Current: % Difference from Current: COMBINED CURRENT COST	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79 \$166,583 \$179,174	\$846.27 \$2,003.78 \$2,499.85 \$179,174 \$12,591
Double Family  Annual Total Cost: Cost Change from Current: % Difference from Current: COMBINED CURRENT COST COMBINED RENEWAL COST	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79 \$166,583	\$846.27 \$2,003.78 \$2,499.85 \$179,174 \$12,591
Double Family  Annual Total Cost: Cost Change from Current: % Difference from Current: COMBINED CURRENT COST COMBINED RENEWAL COST COST CHANGE % CHANGE	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79 \$166,583 \$179,174 \$12,591	\$846.27 \$2,003.78 \$2,499.85 <b>\$179,174</b> \$12,591 7.56%
Double Family  Annual Total Cost: Cost Change from Current: % Difference from Current: COMBINED CURRENT COST COMBINED RENEWAL COST COST CHANGE % CHANGE  2026 PA152 Calculations	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79 \$166,583 \$179,174 \$12,591	\$846.27 \$2,003.78 \$2,499.85 \$179,174 \$12,591 7.56%
Double Family  Annual Total Cost: Cost Change from Current: % Difference from Current: COMBINED CURRENT COST COMBINED RENEWAL COST COST CHANGE % CHANGE  2026 PA152 Calculations Annual Hard Cap:	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79 \$166,583 \$179,174 \$12,591 7.56%	\$846.27 \$2,003.78 \$2,499.85 \$179,174 \$12,591 7.56% Hard 20% Cap Cost
Double Family  Annual Total Cost: Cost Change from Current: % Difference from Current: COMBINED CURRENT COST COMBINED RENEWAL COST COST CHANGE % CHANGE  2026 PA152 Calculations Annual Hard Cap: Single \$7,942.09	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79 \$166,583 \$179,174 \$12,591 7.56%	\$846.27 \$2,003.78 \$2,499.85 \$179,174 \$12,591 7.56% Hard 20% Cap Cost \$220.23 \$169.25
Double Family  Annual Total Cost: Cost Change from Current: % Difference from Current: COMBINED CURRENT COST COMBINED RENEWAL COST COST CHANGE % CHANGE  2026 PA152 Calculations Annual Hard Cap:	7 2 <u>2</u>	7 2 <u>2</u>	\$791.00 \$1,857.66 \$2,314.79 \$166,583 \$179,174 \$12,591 7.56%	\$846.27 \$2,003.78 \$2,499.85 \$179,174 \$12,591 7.56% Hard 20% Cap Cost

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