



Health Plan Rate Confirmation for:

Rock Ridge ISD 2909

Effective Date: 9/1/2026

Please complete and return a signed copy of this rate confirmation to your Service Cooperative Representative no later than:

7/1/2026

Plan(s)	Health Plan Description(s)	Coverage	Employees *	Current Rates	EFFECTIVE 9/1/2026	Elect this plan? Yes / No
1	MSI PP MN 0%-25	Single	59	\$1,117.02	\$1,227.60	<input type="checkbox"/>
		Family	29	\$2,976.92	\$3,271.64	
2	MSI PP MN 1850-0% HRA	Single	48	\$977.42	\$1,074.18	<input type="checkbox"/>
		Family	32	\$2,604.86	\$2,862.76	
3	MSI PP MN 4000-0% HSA	Single	0	\$839.58	\$922.68	<input type="checkbox"/>
		MHC 436 Family	0	\$2,237.50	\$2,459.00	
TOTAL ALL PLANS			Monthly Premium	\$282,507	\$310,475	
			Annual Premium	\$3,390,078	\$3,725,699	
* Based on the group's most recent employee enrollment data. Rates are guaranteed for one year beginning 9/1/2026.			% Annual Adjustment		9.90%	
			\$ Annual Adjustment		\$335,621	

Broker commissions included?	Yes	N/A	per subscriber per month	1.00%	of total plan premium
Broker name:	Aaron Casper		Broker agency:	NIS	

Plans, Monthly Rates and Commissions (if applicable) are recognized and approved by:

Print name: _____
for: **Rock Ridge ISD 2909**

Signature: _____

Date: _____

Health Plan Descriptions (see SBCs and SPDs for details) for: Rock Ridge ISD 2909		Effective: 9/1/2026
Plan 1:	MSI PP MN 0%-25	\$0/0 Ded, \$25, 100/0% Coins, \$6350/12700 OOP, \$7/15/15 No Prev Rx, (OON: \$0/0, 0%, \$6350/12700) DED/OOP Comb INN & OON Embedded
Plan 2:	MSI PP MN 1850-0% HRA	\$1850/3700 Ded, 100/0% Coins, \$1850/3700 OOP, Ded/Coins No Prev Rx, (OON: \$1850/3700, 0%, \$1850/3700) DED/OOP Comb INN & OON Embedded
Plan 3:	MSI PP MN 4000-0% HSA	\$4000/8000 Ded, 100/0% Coins, \$4000/8000 OOP, Ded/Coins with Prev Rx, (OON: \$10000/20000, 50%, \$15000/29000) Embedded