

Effective Date: 01/01/2022

Monica McKay, Field Representative

Print Date: 11/12/2021

Medical plans

Plans:

MESSA Choices \$500/\$1000 0% \$200L/\$200V/\$20SV \$25UC/\$50ER SRX Mail
 (Includes \$5,000 Basic Term Life with AD&D)

MESSA Choices \$500/\$1000 10% \$200L/\$200V/\$20SV \$25UC/\$50ER SRX Mail
 (Includes \$5,000 Basic Term Life with AD&D)

MESSA ABC Plan 1 \$1400/\$2800 0% ABC Rx
 Health Savings Account with HealthEquity
 (Includes \$5,000 Basic Term Life with AD&D)

MESSA ABC Plan 1 \$1400/\$2800 10% ABC Mail Rx
 Health Savings Account with HealthEquity
 (Includes \$5,000 Basic Term Life with AD&D)

Ancillary plans with medical

Dental:	Group/Subgroup: Diagnostic & Preventive Services: Basic Services: Major Services: Annual Maximum: Orthodontic Services: Lifetime Maximum: Adult Orthodontics: Sealants: Cleanings:	00762-0012 100% 90% (X-Rays) 90% \$3,000 90% \$3,000 No No 2 per year
Vision:	Plan: Plan Year: Examination Copay: • Optometrist • Ophthalmologist Contact Lenses (Includes examination): • Disposable • Non-disposable • Medically necessary Eyeglass frames:	VSP 3 Plus Jul-Jun No copayment No copayment \$200 allowance MESSA pays 100% of the approved amount MESSA pays 100% of the approved amount \$80 allowance
Life/AD&D:	2X Salary Negotiated Life (Max of \$300,000) 2X Salary Negotiated AD&D (Max of \$300,000)	
Negotiated LTD:	70% Benefit Level \$8,000 Maximum Benefit 180 Calendar Days Modified Fill Alcohol/Drug - Same as any other illness Mental/Nervous - Same as any other illness Family Social Security Offset 2 Year Own Occupation	5% Minimum Benefit Survivor Income Benefit - No Pre-Existing Condition - Waived COLA Provision - No Education Supplement Program - No Maternity - Yes Freeze on Offsets - Yes

Effective Date: 01/01/2022

Monica McKay, Field Representative

Print Date: 11/12/2021

Ancillary plans without medical

Dental:	Group/Subgroup: 00762-0013 Diagnostic & Preventive Services: 100% Basic Services: 90% (X-Rays) Major Services: 90% Annual Maximum: \$3,000 Orthodontic Services: 90% Lifetime Maximum: \$3,000 Adult Orthodontics: No Sealants: No Cleanings: 2 per year
Vision:	Plan: VSP 3 Plus Plan Year: Jul-Jun Examination Copay: <ul style="list-style-type: none"> • Optometrist No copayment • Ophthalmologist No copayment Contact Lenses (Includes examination): <ul style="list-style-type: none"> • Disposable \$200 allowance • Non-disposable MESSA pays 100% of the approved amount • Medically necessary MESSA pays 100% of the approved amount Eyeglass frames: \$80 allowance
Life/AD&D:	2X Salary Negotiated Life (Max of \$300,000) 2X Salary Negotiated AD&D (Max of \$300,000)
Negotiated LTD:	70% Benefit Level 5% Minimum Benefit \$8,000 Maximum Benefit Survivor Income Benefit - No 180 Calendar Days Modified Fill Pre-Existing Condition - Waived Alcohol/Drug - Same as any other illness COLA Provision - No Mental/Nervous - Same as any other illness Education Supplement Program - No Family Social Security Offset Maternity - Yes 2 Year Own Occupation Freeze on Offsets - Yes