

Effective Date: 01/01/2022

Monica McKay, Field Representative

Print Date: 11/12/2021

**Medical plans**

- Plans:
- MESSA Choices \$500/\$1000 0% \$20OL/\$20OV/\$20SV \$25UC/\$50ER SRX Mail  
 Includes EA1 Rider  
 (Includes \$5,000 Basic Term Life with AD&D)
  - MESSA Choices \$500/\$1000 10% \$20OL/\$20OV/\$20SV \$25UC/\$50ER SRX Mail  
 Includes EA1 Rider  
 (Includes \$5,000 Basic Term Life with AD&D)
  - MESSA ABC Plan 1 \$1400/\$2800 0% ABC Rx  
 Health Savings Account with HealthEquity, Includes EA1 Rider  
 (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 EA1 Rider  
 (Includes \$5,000 Basic Term Life with AD&D)

**Ancillary plans with medical**

- Dental:
- |                                   |              |
|-----------------------------------|--------------|
| Group/Subgroup:                   | 00762-0028   |
| Diagnostic & Preventive Services: | 100%         |
| Basic Services:                   | 75% (X-Rays) |
| Major Services:                   | 75%          |
| Annual Maximum:                   | \$1,500      |
| Orthodontic Services:             | 75%          |
| Lifetime Maximum:                 | \$1,000      |
| Adult Orthodontics:               | No           |
| Sealants:                         | No           |
| Cleanings:                        | 2 per year   |
- Vision:
- |  |  |
|--|--|
| Plan:                                  | VSP 2 S                                |
| Plan Year:                             | Jul-Jun                                |
| Examination Copay:                     |  |
| • Optometrist                          | \$6.50                                 |
| • Ophthalmologist                      | \$6.50                                 |
| Contact Lenses (Includes examination): |  |
| • Disposable                           | \$110 allowance                        |
| • Non-disposable                       | \$110 allowance                        |
| • Medically necessary                  | MESSA pays 100% of the approved amount |
| Eyeglass frames:                       | \$130 allowance after copayment        |
- Life/AD&D:
- \$5,000 Negotiated Life
  - \$5,000 Negotiated AD&D



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**Ancillary plans without medical**

Dental:	Group/Subgroup:	00762-0028
	Diagnostic & Preventive Services:	100%
	Basic Services:	75% (X-Rays)
	Major Services:	75%
	Annual Maximum:	\$1,500
	Orthodontic Services:	75%
	Lifetime Maximum:	\$1,000
	Adult Orthodontics:	No
	Sealants:	No
	Cleanings:	2 per year
Vision:	Plan:	VSP 2 S
	Plan Year:	Jul-Jun
	Examination Copay:	
	• Optometrist	\$6.50
	• Ophthalmologist	\$6.50
	Contact Lenses (Includes examination):	
	• Disposable	\$110 allowance
	• Non-disposable	\$110 allowance
	• Medically necessary	MESSA pays 100% of the approved amount
	Eyeglass frames:	\$130 allowance after copayment
Life/AD&D:	\$10,000 Negotiated Life	
	\$10,000 Negotiated AD&D	