



Hartland Consolidated Schools LVCC - Administrators 0960 MESSA Benefit Summary Description

Effective Date: 01/01/2023 Monica McKay, Field Representative Print Date: 11/11/2022

Medical plans

Plans:

MESSA Choices \$500/\$1000 0% \$200L/\$200V/\$20SV \$25UC/\$50ER Saver Rx

(Includes \$5,000 Basic Term Life with AD&D)

MESSA Choices \$1000/\$2000 10% \$200L/\$200V/\$20SV \$25UC/\$50ER SRX Mail

(Includes \$5,000 Basic Term Life with AD&D)

MESSA ABC Plan 1 \$1500/\$3000 0% ABC Rx Health Savings Account with HealthEquity (Includes \$5,000 Basic Term Life with AD&D)

MESSA ABC Plan 1 \$1500/\$3000 20% ABC Mail Rx

Health Savings Account with HealthEquity (Includes \$5,000 Basic Term Life with AD&D)

Ancillary plans with medical

Dental:

Group/Subgroup:

06517-0010 100%

Diagnostic & Preventive Services:

80% (X-Rays)

Basic Services:
Major Services:
Annual Maximum:
Orthodontic Services:
Lifetime Maximum:
Adult Orthodontics:

\$2,500 80% \$2,500 No

80%

Adult Ortho Sealants: Cleanings:

No 2 per year

Vision:

Plan: Plan Year: VSP 3 G Jan-Dec

Examination Copay:

on Copay:

No copayment

OptometristOphthalmologist

No copayment

Contact Lenses (Includes examination):

DisposableNon-disposable

\$135 allowance \$135 allowance

Medically necessary

MESSA pays 100% of the approved amount

Eyeglass frames: \$130 allowance

Life/AD&D:

2X Salary Negotiated Life (Max of \$225,000) 2X Salary Negotiated AD&D (Max of \$225,000)

Negotiated LTD:

ex dataly negotiated Abdb (Max of \$220,

70% Benefit Level \$8,000 Maximum Benefit 60 Calendar Days Modified Fill 5% Minimum Benefit Survivor Income Benefit - No Pre-Existing Condition - Waived

Alcohol/Drug - Same as any other illness Mental/Nervous - Same as any other illness

Education Supplement Program - No

Family Social Security Offset

Maternity - Yes

COLA Provision - No

2 Year Own Occupation

Freeze on Offsets - Yes



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Life/AD&D:

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Print Date: 11/11/2022

Monica McKay, Field Representative

Ancillary plans without medical

Group/Subgroup: 06517-0011 Dental:

Diagnostic & Preventive Services: 100%

90% (X-Rays) Basic Services:

Major Services: 90% \$3,000 Annual Maximum: Orthodontic Services: 90% \$3,000 Lifetime Maximum: Adult Orthodontics: No Sealants: No

Cleanings: 2 per year

Vision: Plan: VSP 3 Plus P Jan-Dec Plan Year:

Examination Copay:

 Optometrist No copayment No copayment Ophthalmologist

Contact Lenses (Includes examination):

\$250 allowance · Disposable

MESSA pays 100% of the approved amount Non-disposable MESSA pays 100% of the approved amount Medically necessary

\$130 allowance Eyeglass frames:

2X Salary Negotiated Life (Max of \$225,000) 2X Salary Negotiated AD&D (Max of \$225,000)

70% Benefit Level 5% Minimum Benefit Negotiated LTD:

\$8,000 Maximum Benefit Survivor Income Benefit - No 60 Calendar Days Modified Fill Pre-Existing Condition - Waived

Alcohol/Drug - Same as any other illness COLA Provision - No

Education Supplement Program - No Mental/Nervous - Same as any other illness

Family Social Security Offset Maternity - Yes

2 Year Own Occupation Freeze on Offsets - Yes