



Effective Date: 01/01/2023

Monica McKay, Field Representative

Print Date: 11/11/2022

## Medical plans

Plans:

MESSA Choices \$500/\$1000 0% \$20OL/\$20OV/\$20SV \$25UC/\$50ER Saver Rx  
(Includes \$5,000 Basic Term Life with AD&D)

MESSA Choices \$1000/\$2000 10% \$20OL/\$20OV/\$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:	06517-0040
	Diagnostic & Preventive Services:	80%
	Basic Services:	80% (X-Rays)
	Major Services:	80%
	Annual Maximum:	\$2,000
	Orthodontic Services:	80%
	Lifetime Maximum:	\$1,500
	Adult Orthodontics:	No
	Sealants:	No
	Cleanings:	2 per year
Vision:	Plan:	VSP 2 S
	Plan Year:	Jan-Dec
	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:	\$50,000 Negotiated Life	
	\$50,000 Negotiated AD&D	
Negotiated LTD:	66.67% Benefit Level	5% Minimum Benefit
	\$7,500 Maximum Benefit	Survivor Income Benefit - No
	90 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



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### Ancillary plans without medical

Dental:	Group/Subgroup:	06517-0041
	Diagnostic & Preventive Services:	80%
	Basic Services:	80% (X-Rays)
	Major Services:	80%
	Annual Maximum:	\$2,000
	Orthodontic Services:	80%
	Lifetime Maximum:	\$2,000
	Adult Orthodontics:	No
	Sealants:	No
	Cleanings:	2 per year
Vision:	Plan:	VSP 2 S
	Plan Year:	Jan-Dec
	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:	\$50,000 Negotiated Life	
	\$50,000 Negotiated AD&D	
Negotiated LTD:	66.67% Benefit Level	5% Minimum Benefit
	\$7,500 Maximum Benefit	Survivor Income Benefit - No
	90 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