

Howell Public Schools Maintenance 587K **MESSA Benefit Summary Description**

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 Health Equity (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:

00762-0019

Diagnostic & Preventive Services:

75%

Basic Services:

75% (X-Rays) 75%

Major Services: Annual Maximum: Orthodontic Services: Lifetime Maximum:

\$1,000 0%

Adult Orthodontics: Sealants:

\$0 No No

Cleanings:

2 per year

Vision:

Plan:

VSP 2 S

Plan Year: **Examination Copay:** Jul-Jun

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:

\$40,000 Negotiated Life

\$40,000 Negotiated AD&D

Negotiated LTD:

66.67% Benefit Level

\$3,000 Maximum Benefit

90 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



Life/AD&D:

Negotiated LTD:

HOWEII PUDIIC SCHOOIS Maintenance 587K **MESSA Benefit Summary Description**

Effective Date: 01/01/2022 Monica McKay, Field Representative Print Date: 11/12/2021

Ancillary plans without medical

Group/Subgroup: 00762-0020 Dental:

Diagnostic & Preventive Services: 75%

Basic Services: 75% (X-Rays)

Major Services: 75% Annual Maximum: \$1,000 Orthodontic Services: 0% Lifetime Maximum: \$0 Adult Orthodontics: No Sealants: Νo Cleanings: 2 per year

Plan: VSP 2 S Vision:

\$40,000 Negotiated Life

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

\$40,000 Negotiated AD&D

66.67% Benefit Level 5% Minimum Benefit \$3,000 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 Education Supplement Program - No Mental/Nervous - Same as any other illness

Maternity - Yes Family Social Security Offset

2 Year Own Occupation Freeze on Offsets - Yes