

MESSA gives you options



Take time now to re-evaluate your family's financial protection needs. The following is a summary of MESSA's variable options, along with monthly contribution rates for each plan.

Group Basic Term Life Insurance

(If you choose not to enroll in a MESSA medical plan, you must enroll in group basic term life insurance in order to enroll in other optional coverage, except indemnity plans.)

- » \$5,000 term life insurance benefit.
- » Includes corresponding accidental death and dismemberment benefits. The AD&D portion terminates when you reach age 65.
- » Available during open enrollment, and without medical evidence of insurability.

Group Dependent Life Insurance

- » Available only with Group Basic Term Life or a medical plan.
- » Provides lump sum benefit of \$2,000 for a spouse and \$2,000 for each child. A child is eligible for coverage from 14 days of age through the calendar year they turn 25, if unmarried and dependent on you for majority of support. Benefit may continue past the age of 25 if the child is approved by MESSA as having a physical or intellectual impairment, is unmarried, dependent upon you for a majority of their support and is incapable of self-sustaining employment by reason of their physical or intellectual impairment.

Group Supplemental Term Life Insurance

- » Available only with Group Basic Term Life or a medical plan.
- » You may select one of the options below:

Fixed amount

- You may purchase \$10,000, \$20,000, \$30,000 or \$40,000 in term life insurance benefits.
- Includes corresponding AD&D benefits.
- Medical evidence of insurability is not required if you are a new MESSA member electing coverage for the first time or if you want to increase your existing fixed amount by \$10,000.
- Medical evidence of insurability is required if you did not enroll in this coverage within 31 days following the date you first became eligible or if you elect to increase coverage by more than \$10,000.
- Insurance ends the first day of the calendar month in which you become age 65. However, for a person over age 65 and actively school employed, insurance ends upon cessation of active school employment.

Please refer to the certificate booklet for specific coverage details.

Times salary

- You may purchase an amount of term life insurance benefits determined by a multiple of 1, 2, 3 or 4 times your salary, up to a maximum of \$150,000.
- Includes corresponding AD&D benefits.
- Medical evidence of insurability is not required when enrolling in up to \$75,000 in coverage.
- Medical evidence of insurability is required when selecting over \$75,000 in coverage.
- Insurance ends the first day of the calendar month in which you become age 65. However, for a person over age 65 and actively school employed, insurance ends upon cessation of active school employment.

Group Survivor Income Insurance

- » Available only with Group Basic Term Life or a medical plan, subject to age and family status requirements on spouse and children.
- » Net monthly benefit: \$400 spouse; \$200 child(ren)

Spouse benefit

- Spouse is eligible until the day before their 65th birthday; benefit will continue until the spouse remarries or dies.

Child benefit

- Children receive benefits until age 25, get married or the member's spouse dies, whichever occurs first. Benefit may continue past the age of 25 if the child is approved by MESSA as having a physical or intellectual impairment, is unmarried, dependent upon you for a majority of their support and is incapable of self-sustaining employment by reason of their physical or intellectual impairment.

Group Short Term Disability Income Insurance

(If you need financial protection in the event of a loss of salary due to a disability because you have inadequate sick days to fill in your district's long-term disability waiting period, or your district has no LTD coverage.)

- » Available only with Group Basic Term Life or a medical plan.
- » Can select a weekly benefit ranging from \$20 to \$700, provided the amount selected does not exceed the weekly benefit corresponding to your contracted annual salary. (Contracted annual salary includes only basic earnings and does not include any other compensation.)
- » Benefits are not payable during a summer vacation period unless it is medically necessary for you to be house-confined or hospital-confined. If a disability commences within 30 days from the date of an accidental injury, it is not necessary to be house- or hospital-confined.
- » Any condition for which you received advice or treatment within three months prior to the effective date of insurance will not be covered until after expiration of the earlier of the following:
 - A period of three consecutive months ending on or after the effective date of insurance if during this time no medical treatment or service, including prescribed drugs or medicines, has been received in connection with the illness or injury; or
 - A period of six consecutive months if during this time the employee has been continuously insured and there has been no loss of time from active employment due to the pre-existing condition; or
 - A period of 12 consecutive months if during this time the employee has been continuously insured for these benefits.
- » Choice of either seven-day or 28-day waiting period with benefits beginning on either the eighth day or the 29th day.
- » Duration of benefits:
 - Maximum period of payment is 52 weeks. Benefits are payable during the maximum period of payment providing you are wholly and continuously unable to perform any and every duty pertaining to your regular occupation and you are under the regular care and attendance of a physician.
- » Maternity disability is treated the same as any other illness.
- » Benefits will be reduced by any income a member

Please refer to the certificate booklet for specific coverage details.

receives or is entitled to receive from an employer, workers' compensation, MPERS, Social Security (including Social Security retirement benefits) or any employer-paid group benefit plan. Benefits are generally payable only after you've exhausted your sick days.

- » Benefits are not payable for disability due to:
 - Self-inflicted injuries if intentional or while insane
 - War
 - Participation in the committing of a felony
 - Cosmetic surgery unless:
 - Caused by accidental bodily injury sustained while insured or an active illness contracted while insured, and
 - You have been continuously insured under this program since such injury was sustained or such illness was contracted.

Group Long Term Disability Income Insurance

(To continue disability income protection beyond 52 weeks if your district has no LTD coverage.)

Important: If you are enrolled in an employer-sponsored long-term disability plan, you should know that enrollment in MESSA's long-term disability plan may be of limited value. If you have any questions or concerns, be sure to contact your MESSA field representative.

- » Available only with Group Basic Term Life Insurance or a medical plan.
- » Can select a monthly benefit ranging from \$100 to \$1,500 provided the amount selected does not exceed the monthly benefit corresponding to your contracted annual salary. (Contracted annual salary includes only basic earnings and does not include any other compensation.)
- » The amount of the monthly benefit will be offset by any disbursement from any annuity, retirement or pension plan, or life insurance plan because of disability from any employer. It will also be offset by Social Security benefits, any salary, wages,

commissions, or other periodic employer disability plan benefits or similar disbursement (i.e., workers' disability compensation).

- » Any condition for which you received advice or treatment within three months prior to the effective date of insurance will not be covered until after expiration of the earlier of the following:
 - A period of three consecutive months ending on or after the effective date of insurance if during this time no medical treatment or service, including prescribed drugs or medicines, has been received in connection with the illness or injury; or
 - A period of 12 consecutive months if during this time the employee has been continuously insured for these benefits.
- » Waiting period: 52 consecutive weeks of disability.
- » Must be wholly and continuously unable to perform any and every duty pertaining to your regular occupation while you are under the regular care and attendance of a physician.
- » Duration of benefits:
 - Option 1: Benefits may be provided up to five years but not beyond the day before your 70th birthday.
 - Option 2: Benefits may be provided until the day before your 70th birthday.
 - Disability due to mental or nervous disorder: Benefits are limited and payable for two years during any one period of disability, but not beyond the day before your 70th birthday.
- » Benefits are not payable for disability due to:
 - Self-inflicted injuries if intentional or while insane
 - War
 - Participation in the committing of a felony
 - Cosmetic surgery unless:
 - Caused by accidental bodily injury sustained while insured or an active illness contracted while insured, and
 - You have been continuously insured under this program since such injury was sustained or such illness was contracted.

Please refer to the certificate booklet for specific coverage details.

Indemnity Plans

Critical Illness Coverage

- » Benefits paid when diagnosed with a covered serious illness or condition.
- » Use benefits to pay out-of-pocket medical costs or personal expenses.
- » Select between two plans:
 - Critical Illness
 - Critical Illness Plus
- » Plan highlights:
 - HSA compatible
 - Cash paid directly to you
 - Pre-existing conditions waived
- » Plan features:
 - Subsequent critical illness diagnosis benefit
 - Recurrence critical illness diagnosis benefit
 - Recurrence cancer (invasive) diagnosis benefit
 - Recurrence carcinoma (non-invasive) diagnosis benefit
 - Health screening benefit
 - Portable coverage should employment terminate
- » Premium discount for non-tobacco users.
- » Coverage available for member, spouse and dependents under the age of 26.

Hospital Indemnity Coverage

- » Pays benefits when you have a planned or unplanned hospital stay.
- » Lump-sum benefit for admission; daily benefit for covered hospital stay.
- » Use benefits to help pay out-of-pocket medical costs or personal expenses.
- » Select between two plans:
 - Hospital Indemnity
 - Hospital Indemnity Plus

- » Plan highlights:
 - HSA compatible
 - Cash paid directly to you
 - Pre-existing conditions waived
- » Plan features:
 - Lump-sum payment for first day of inpatient stay
 - Daily benefit payment beginning the second day
 - Increased per day payment in an intensive care unit (ICU)
 - Waiver of premium
 - Portable coverage should employment terminate
- » Coverage available for member, spouse and dependents under the age of 26.

Accident Coverage

- » Pays benefits for covered minor and serious injuries due to accident.
- » Use benefits to help pay out-of-pocket medical costs or personal expenses.
- » Select between two plans:
 - Accident
 - Accident Plus
- » Plan highlights:
 - HSA compatible
 - Cash benefits paid directly to you
- » Plan features:
 - Full schedule of benefits payable for accidental injuries, including initial and follow-up treatment, medical imaging, surgeries and more
 - Coverage applies both at home and at work
 - Organized sports rider (children only)
 - Waiver of premium
 - Portable coverage should employment terminate
- » Coverage available for member, spouse and dependents under the age of 26.

Please refer to the certificate booklet for specific coverage details.

Contribution rates for optional coverage*

The Group Dependent Life Insurance and/or the coverages below are available only in **addition** to a MESSA health insurance plan **or** the Group Basic Term Life Insurance

LIFE COVERAGE

\$5,000 GROUP BASIC TERM LIFE INSURANCE AND AD&D

Monthly rate: \$2.36

Available only if not enrolled in MESSA medical plan.

\$2,000 GROUP DEPENDENT LIFE INSURANCE

Monthly rate: \$1.48

\$2,000 for spouse, and \$2,000 for each eligible dependent.

FIXED AMOUNT SUPPLEMENTAL TERM LIFE

The monthly rate is based on your age on Jan. 1 of the current year.

\$10,000 LIFE AND AD&D		\$20,000 LIFE AND AD&D	
UNDER AGE 40	\$1.50	UNDER AGE 40	\$3.00
AGE 40-49	\$3.00	AGE 40-49	\$6.00
AGE 50-59	\$6.50	AGE 50-59	\$13.00
AGE 60-64	\$11.50	AGE 60-64	\$23.00
AGE 65-69	\$17.50	AGE 65-69	\$35.00
AGE 70-74	\$30.00	AGE 70-74	\$60.00
AGE 75 AND OLDER	\$44.00	AGE 75 AND OLDER	\$88.00

\$30,000 LIFE AND AD&D		\$40,000 LIFE AND AD&D	
UNDER AGE 40	\$4.50	UNDER AGE 40	\$6.00
AGE 40-49	\$9.00	AGE 40-49	\$12.00
AGE 50-59	\$19.50	AGE 50-59	\$26.00
AGE 60-64	\$34.50	AGE 60-64	\$46.00
AGE 65-69	\$52.50	AGE 65-69	\$70.00
AGE 70-74	\$90.00	AGE 70-74	\$120.00
AGE 75 AND OLDER	\$132.00	AGE 75 AND OLDER	\$176.00

TIMES SALARY SUPPLEMENTAL TERM LIFE | Rates per \$1,000 Life and AD&D

Calculate Times Salary monthly cost: Multiply your contractual annual salary by the level of coverage selected (1, 2, 3, or 4 times salary), divide by 1,000, then multiply by the rate from the Times Salary rate chart.

UNDER AGE 40	\$0.15	AGE 65-69	\$1.75
AGE 40-49	\$0.30	AGE 70-74	\$3.00
AGE 50-59	\$0.65	AGE 75 AND OLDER	\$4.40
AGE 60-64	\$1.15		

GROUP SURVIVOR INCOME INSURANCE

The monthly rate is based on your age on Jan. 1 of the current year.

UNDER AGE 30	\$3.18	AGE 45-49	\$12.44
AGE 30-34	\$4.20	AGE 50-54	\$15.80
AGE 35-39	\$5.88	AGE 55 AND OLDER	\$18.90
AGE 40-44	\$8.90		

GROUP SHORT TERM DISABILITY INCOME INSURANCE

Benefits are reduced by other income. Waiting period must be satisfied regardless of cause. You may select any amount of weekly benefit in the table below as long as your contracted annual school salary is at least as great as the amount shown in the annual salary column.

ANNUAL SALARY	WEEKLY BENEFIT	8TH DAY	29TH DAY
\$1,300	\$20.00	\$2.00	\$1.40
\$2,600	\$40.00	\$4.00	\$2.80
\$3,900	\$60.00	\$6.00	\$4.20
\$5,200	\$80.00	\$8.00	\$5.60
\$6,500	\$100.00	\$10.00	\$7.00
\$8,000	\$120.00	\$12.00	\$8.40
\$9,500	\$140.00	\$14.00	\$9.80
\$11,000	\$160.00	\$16.00	\$11.20
\$12,500	\$180.00	\$18.00	\$12.60
\$14,000	\$200.00	\$20.00	\$14.00
\$15,500	\$220.00	\$22.00	\$15.40
\$17,000	\$240.00	\$24.00	\$16.80
\$18,500	\$260.00	\$26.00	\$18.20
\$20,000	\$280.00	\$28.00	\$19.60
\$21,500	\$300.00	\$30.00	\$21.00
\$23,000	\$320.00	\$32.00	\$22.40
\$24,500	\$340.00	\$34.00	\$23.80
\$26,000	\$360.00	\$36.00	\$25.20
\$27,500	\$380.00	\$38.00	\$26.60
\$29,000	\$400.00	\$40.00	\$28.00
\$30,500	\$420.00	\$42.00	\$29.40
\$32,000	\$440.00	\$44.00	\$30.80
\$33,500	\$460.00	\$46.00	\$32.20
\$35,000	\$480.00	\$48.00	\$33.60
\$36,500	\$500.00	\$50.00	\$35.00
\$38,000	\$520.00	\$52.00	\$36.40
\$39,500	\$540.00	\$54.00	\$37.80
\$41,000	\$560.00	\$56.00	\$39.20
\$42,500	\$580.00	\$58.00	\$40.60
\$44,000	\$600.00	\$60.00	\$42.00
\$45,500	\$620.00	\$62.00	\$43.40
\$47,000	\$640.00	\$64.00	\$44.80
\$48,500	\$660.00	\$66.00	\$46.20
\$50,000	\$680.00	\$68.00	\$47.60
\$51,500	\$700.00	\$70.00	\$49.00

*All rates shown are monthly rates.

GROUP LONG TERM DISABILITY INCOME INSURANCE

Important – If you are enrolled in an employer-sponsored long term disability plan, you should know that enrollment in this plan may be of limited value. If you have any questions or concerns, be sure to contact your MESSA field representative.

You may elect one \$100 monthly benefit unit for each \$2,000 of annual salary up to \$30,000 (for a maximum of 15 units). The monthly benefit elected can be less than the amount allowed based on your salary, but not more. You must also elect a Maximum Benefit Period. This plan has a 52-week waiting period.

Option 1: Benefits may be provided up to five years but not beyond the day before your 70th birthday.

Option 2: Benefits may be provided, but not beyond the day before your 70th birthday.

Benefits are payable for two years during any one period of disability due to a mental or nervous disorder, but not beyond the day before your 70th birthday.

Determine the amount of monthly benefit you would like: Contractual annual salary divided by \$2,000 equals the number of \$100 benefits you may select (maximum of 15 \$100 benefit units allowed).

Calculate the cost for optional LTD: multiply the number of units you would like to purchase by the rate (based on your age) for the plan option you would like.

Monthly rate for each \$100 monthly benefit unit

	OPTION 1	OPTION 2
UNDER AGE 40	\$0.20	\$0.30
AGE 40-49	\$0.50	\$0.80
AGE 50 AND OLDER	\$1.40	\$2.10

OPTIONAL INDEMNITY PROTECTION

3-PLAN BUNDLE

	SINGLE	2-PERSON	FULL-FAMILY
OPTIONAL ACCIDENT OPTIONAL CRITICAL ILLNESS OPTIONAL HOSPITAL INDEMNITY	\$29.69	\$49.63	\$64.41

A LA CARTE

	SINGLE	2-PERSON	FULL-FAMILY
	PLUS	PLUS	PLUS
OPTIONAL ACCIDENT	\$7.79	\$11.60	\$14.04
	\$20.98	\$19.25	\$29.35

OPTIONAL HOSPITAL INDEMNITY	\$13.54	\$20.48	\$23.57	\$35.59	\$33.84	\$51.19
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OPTIONAL CRITICAL ILLNESS	PLUS	PLUS	PLUS
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Non-Tobacco

UNDER AGE 20	\$1.99	\$2.97	\$3.47	\$5.04	\$4.85	\$7.17
AGE 20-24	\$2.33	\$3.65	\$3.96	\$6.04	\$5.35	\$8.16
AGE 25-29	\$2.86	\$4.70	\$4.68	\$7.47	\$6.06	\$9.60
AGE 30-34	\$3.50	\$5.99	\$5.62	\$9.34	\$7.00	\$11.47
AGE 35-39	\$4.48	\$7.96	\$7.06	\$12.23	\$8.44	\$14.36
AGE 40-44	\$6.23	\$11.44	\$9.64	\$17.38	\$11.02	\$19.51
AGE 45-49	\$9.11	\$17.22	\$13.90	\$25.90	\$15.28	\$28.30
AGE 50-54	\$13.74	\$26.46	\$20.85	\$39.80	\$22.23	\$41.93
AGE 55-59	\$20.39	\$39.77	\$30.81	\$59.73	\$32.19	\$61.85
AGE 60-64	\$29.13	\$57.26	\$43.76	\$85.62	\$45.14	\$87.75
AGE 65-69	\$41.28	\$81.54	\$60.66	\$119.43	\$62.04	\$121.55
AGE 70 AND OLDER	\$53.37	\$105.73	\$77.15	\$152.40	\$78.53	\$154.53

Tobacco

UNDER AGE 20	\$2.66	\$4.32	\$4.55	\$7.20	\$6.44	\$10.35
AGE 20-24	\$3.23	\$5.46	\$5.38	\$8.87	\$7.28	\$12.02
AGE 25-29	\$4.12	\$7.23	\$6.59	\$11.29	\$8.49	\$14.44
AGE 30-34	\$5.21	\$9.41	\$8.16	\$14.44	\$10.06	\$17.59
AGE 35-39	\$6.86	\$12.72	\$10.60	\$19.31	\$12.50	\$22.46
AGE 40-44	\$9.80	\$18.59	\$14.94	\$27.99	\$16.84	\$31.14
AGE 45-49	\$14.66	\$28.32	\$22.12	\$42.34	\$24.01	\$45.49
AGE 50-54	\$22.45	\$43.90	\$33.83	\$65.77	\$35.72	\$68.82
AGE 55-59	\$33.67	\$66.33	\$50.62	\$99.34	\$52.51	\$102.49
AGE 60-64	\$48.40	\$95.78	\$72.43	\$142.97	\$74.33	\$146.12
AGE 65-69	\$68.86	\$136.71	\$100.91	\$199.93	\$102.80	\$203.08
AGE 70 AND OLDER	\$89.24	\$177.46	\$128.69	\$255.49	\$130.59	\$258.64