

2019 Benefit Summary

Preschool Teachers



Description/Vendor	Basic Plan	Contact	Monthly Employer Share of Premiums	Monthly Employee Share
Medical-MESSA / CHOICES \$500/\$1,000	\$500/\$1,000 in-network deductible, \$20 OV, \$25 Urgent, \$50 ER, Save Rx.	800-292-4910 www.messa.org	S:\$ 568.23 2P:\$ 568.23 FF:\$ 568.23	S:\$ 100.15 2P:\$ 933.76 FF:\$ 1,298.53
Medical-MESSA ABC Plan 1	\$1,400/\$2,800 in-network deductible.	800-292-4910 www.messa.org	S:\$ 568.23 2P:\$ 568.23 FF:\$ 568.23	S:\$ 28.66 2P:\$ 772.92 FF:\$ 1,100.38
Medical-MESSA ABC Plan 1 With Co-Insurance	\$1,400/\$2,800 in-network deductible <u>with 10% Co-Insurance</u>		:\$ 568.23 2P:\$ 568.23 FF:\$ 568.23	S:\$ 00.00 2P:\$ 680.50 FF:\$ 985.36
Medical MESSA ABC Plan 2 With Co-Insurance	\$2,000/\$4,000 in-network deductible <u>with 10% Co-Insurance and 3 Tier RX Prescription coverage.</u>		:\$ 568.23 2P:\$ 568.23 FF:\$ 568.23 0	S:\$ 00.00 2P:\$ 551.98 FF:\$ 825.43
Health Savings Account	Maximum contribution: \$3,550 for Single / \$7,100 for Family Coverage. <u>Annual Election Required.</u>			
Medical-MESSA/ Essentials	\$375/\$750 in-network deductible, \$25 OV, \$50 Specialty OV, \$50 Urgent Care, \$200 ER Visit. Out of Pocket Max \$7,900/\$15,800	800-292-4910 www.messa.org	:\$ 568.23 2P:\$ 568.23 FF:\$ 568.23	S:\$ 00.00 2P:\$ 440.63 FF:\$ 686.86
Dental/ADN Administrators	Coordination Plan —50% for Class I & II, and 50% for III, \$1,000 annual max \$1,500 lifetime orthodontia.	888-236-1100 www.adndental.com	S: \$ 27.42	S: \$ 4.84
Vision—N.V.A.	Glasses or Contacts 1x per year. See summary sheets for details.	800-672-7723 www.e-nva.com	S: \$ 3.53	S: \$.00
Life /CIGNA	\$40,000 Life plus AD&D	800-732-1603	100%	0%
F.S.A. /Wage Works Plan Year: January 1	Contribute pretax dollars to offset expenses for dependent care and approved medical expenses. <u>Annual Election Required.</u>	877-924-3967 www.wageworks..com	0%	100%

*Based On Full Time Employment