



Frequently asked questions

Q: What is MESSA Balance+?

A: MESSA Balance+ is a comprehensive medical plan that works with a health savings account (HSA) to give you:

- Access to the largest network of doctors, pharmacies and other medical providers
- MESSA's bundle of supplemental plans that pay cash for covered incidents to provide financial security
- Free preventive care and certain free preventive medications
- The opportunity to contribute pre-tax dollars to an HSA, which lowers your income taxes

Each MESSA Balance+ member receives a HealthEquity HSA with no setup or administration fees.

Q: Can I choose my doctor and other providers?

A: All MESSA health plans use the same large provider network, giving you the greatest choice of doctors and access to expert medical care from the best hospitals, including Mayo Clinic and Cleveland Clinic. If you are moving to Balance+ from a different MESSA plan, your in-network provider(s) will not change.

Q: What makes MESSA Balance+ a high-deductible health plan?

A: HSA-eligible plans are governed by federal law and the IRS code, which specify a minimum deductible level. MESSA Balance+ is set at the minimum deductible; the deductible is subject to change each Jan. 1 in order to remain HSA-eligible, according to IRS rules.

Q: When does the deductible start?

A: The deductible year is the calendar year, Jan. 1 to Dec. 31.

Q: Does the deductible apply to all medical expenses?

A: Under federal law, most medical expenses, including the cost of prescription drugs, are subject to the deductible. If you have 2-person or family coverage, the expenses of one person can meet the full deductible.

Q: What preventive medical services and prescriptions are covered for free?

A: Annual physicals, cancer screenings and certain lab tests are covered for free and are not subject to the plan deductible when you go to an in-network provider. MESSA Balance+ also covers hundreds of free preventive prescriptions to treat certain common conditions.

Q: Do I have to pay the full cost of non-preventive prescription drugs that are subject to the deductible?

A: Yes. Under federal law, all non-preventive prescriptions are subject to the deductible. MESSA's underwriter, Blue Cross Blue Shield of Michigan (BCBSM), caps your cost at the same amount it has negotiated with the pharmacy, which saves you money. With MESSA Balance+ Rx, if you insist on a brand name drug when a generic version is available and medically appropriate the brand-name medication will not be covered.





Questions? Call MESSA's Member Service Center at 800-336-0013. We are happy to help you.



Q: Do I have to go to an in-network provider?

A: You are not required to go to an in-network provider, but you will pay more for an out-of-network provider and your services may not be covered. In-network providers have agreed to accept a discounted fee for medical services from BCBSM. The discount and your savings will be substantial. Using in-network providers saves you money on out-of-pocket costs and lower deductibles. It also saves your MESSA health plan money, helping to hold down costs.

Q: Are there separate deductible levels for medical services received from in-network and out-of-network providers?

A: Yes. The out-of-network deductible is twice the in-network deductible amount.

Q: What happens after I meet the deductible amount?

A: Once you meet your in-network deductible you will be responsible for copayments or coinsurance on appointments, medical services and prescriptions.

Q: What is the difference between preventive care and diagnostic medical services?

A: Preventive care refers to specific services proven to prevent or identify problems early. Diagnostic services start when you already have signs of a health problem; therefore, your doctor may order additional tests. When this happens, these services are subject to your deductible and any applicable copayments or coinsurance.

Q: Where can I get a complete list of my benefits?

A: To view your benefit coverage and read your plan coverage booklet, go to messa.org/plans.

Q: What are MESSA's supplemental plans?

A: MESSA's Accident, Critical Illness and Hospital Indemnity supplemental plans complement your MESSA medical benefits by providing cash payouts for covered injuries, illnesses or hospitalizations for MESSA members and covered dependents. The payouts can be used to cover medical expenses or any other bills (e.g., mortgage, utilities, child care) to provide financial relief when you need it most. Learn more at messa.org/supplemental.

Q: How do I file a supplemental claim?

A: MESSA offers our supplemental plans in partnership with Aetna. You can easily file a claim using the MyAetnaSupplemental app or by setting up an account at MyAetnaSupplemental.com.

Q: Are payouts for supplemental plans taxable?

A: Yes.

Q: With the MESSA Balance+ plan, can I opt out of the supplemental plans?

A: No. They are built into the plan.

