

MESSA In-Network Plan Comparison - Effective 1/1/2022
Holland Public Schools - 949A Teacher

MESSA ABC Plan 1 \$1,400/\$2,800 HSA 0% MESSA ABC Rx	MESSA ABC Plan 2 \$2,000/\$4,000 HSA 0% MESSA ABC Rx	MESSA ABC Plan 2 \$2,000/\$4,000 HSA 0% 3-Tier Rx with Mandatory Mail	MESSA ABC Plan 2 \$2,000/\$4,000 HSA 10% 3-Tier Rx with Mandatory Mail
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In-Network Cost Share After Deductible

Deductible	\$1,400/\$2,800	\$2,000/\$4,000	\$2,000/\$4,000	\$2,000/\$4,000
Coinsurance	0%	0%	0%	10%
Blue Cross online visit copay/coinsurance	0%	0%	0%	10%
Office visit copay/coinsurance	0%	0%	0%	10%
Specialist visit copay/coinsurance	0%	0%	0%	10%
Urgent care copay/coinsurance	0%	0%	0%	10%
Emergency room copay/coinsurance	0%	0%	0%	10%
Total out-of-pocket maximum	\$2,400/\$4,800	\$3,000/\$6,000	\$4,000/\$7,050	\$5,000/\$7,050

Certain Benefit Differences

Chiropractic manipulations	Up to 38 visits per calendar year, including therapeutic massage; Covered 100% after deductible	Up to 38 visits per calendar year, including therapeutic massage; Covered 100% after deductible	Up to 38 visits per calendar year, including therapeutic massage; Covered 100% after deductible	Up to 38 visits per calendar year, including therapeutic massage; Covered 90% after deductible
Osteopathic manipulations	Up to 38 visits per calendar year; Covered 100% after deductible	Up to 38 visits per calendar year; Covered 100% after deductible	Up to 38 visits per calendar year; Covered 100% after deductible	Up to 38 visits per calendar year; Covered 90% after deductible
Outpatient physical, occupational and speech therapy	Up to a combined 60 visits per calendar year; Covered 100% after deductible	Up to a combined 60 visits per calendar year; Covered 100% after deductible	Up to a combined 60 visits per calendar year; Covered 100% after deductible	Up to a combined 60 visits per calendar year; Covered 90% after deductible
Bariatric surgery	Covered 100% after deductible	Covered 100% after deductible	Covered 100% after deductible	Covered 90% after deductible
Acupuncture	Covered 100% after deductible	Covered 100% after deductible	Covered 100% after deductible	Covered 90% after deductible
Hearing aids	Covered 100% up to a maximum benefit after deductible	Covered 100% up to a maximum benefit after deductible	Covered 100% up to a maximum benefit after deductible	Covered 90% up to a maximum benefit after deductible

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Prescription Drugs	MESSA ABC Rx (after deductible)	MESSA ABC Rx (after deductible)	3-Tier Rx with Mandatory Mail (after deductible)	3-Tier Rx with Mandatory Mail (after deductible)
34-day supply				
Generic drug	Free, \$2 or \$10	Free, \$2 or \$10	Free or \$10	Free or \$10
Preferred brand drug	Free, \$20 or \$40	Free, \$20 or \$40	Free or 20% coinsurance (\$40 min - \$80 max)	Free or 20% coinsurance (\$40 min - \$80 max)
Non-preferred brand drug			20% coinsurance (\$60 min - \$100 max)	20% coinsurance (\$60 min - \$100 max)
90-day supply				
Generic drug, Preferred brand drug, Non-preferred brand drug	2x copay of applicable 34- day supply; Available via retail or mail order	2x copay of applicable 34- day supply; Available via retail or mail order	2.5x copay of applicable 34-day supply; Only available via mail order	2.5x copay of applicable 34-day supply; Only available via mail order
Additional Rx Information				
Free preventive drug lists	Affordable Care Act (ACA) Free Preventive Drug Coverage and the extended list of ABC Free Preventive Prescriptions; These are FREE before you pay your deductible	Affordable Care Act (ACA) Free Preventive Drug Coverage and the extended list of ABC Free Preventive Prescriptions; These are FREE before you pay your deductible	Affordable Care Act (ACA) Free Preventive Drug Coverage and the extended list of ABC Free Preventive Prescriptions; These are FREE before you pay your deductible	Affordable Care Act (ACA) Free Preventive Drug Coverage and the extended list of ABC Free Preventive Prescriptions; These are FREE before you pay your deductible

~ For Saver Rx and ABC Rx, the reduced cost Generic drugs at \$2 and Brand Name drugs at \$20, include medications for Asthma, Diabetes, Coronary Artery Disease, High Blood Pressure and High Cholesterol.

~ The MESSA ABC Plan 1 deductible is subject to change each Jan. 1 to remain HSA-compatible according to IRS rules governing HSAs.

If you have any questions, please contact your MESSA Field Representative, Grace Benedict, at 800.292.4910.

Information on this document is a general overview. Refer to MESSA.org and the plan booklets for additional information.