

Monthly 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: **\$2.19**

Available only if not enrolled in MESSA medical plan.

\$2,000 GROUP DEPENDENT LIFE INSURANCE Monthly rate: **\$1.38**

\$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	\$1.40	UNDER AGE 40	\$2.79
AGE 40-49	\$2.79	AGE 40-49	\$5.58
AGE 50-59	\$6.05	AGE 50-59	\$12.09
AGE 60-64	\$10.70	AGE 60-64	\$21.39
AGE 65-69	\$16.28	AGE 65-69	\$32.55
AGE 70-74	\$27.90	AGE 70-74	\$55.80
AGE 75 AND OLDER	\$40.92	AGE 75 AND OLDER	\$81.84

\$30,000 LIFE AND AD&D		\$40,000 LIFE AND AD&D	
UNDER AGE 40	\$4.19	UNDER AGE 40	\$5.58
AGE 40-49	\$8.37	AGE 40-49	\$11.16
AGE 50-59	\$18.14	AGE 50-59	\$24.18
AGE 60-64	\$32.09	AGE 60-64	\$42.78
AGE 65-69	\$48.83	AGE 65-69	\$65.10
AGE 70-74	\$83.70	AGE 70-74	\$111.60
AGE 75 AND OLDER	\$122.76	AGE 75 AND OLDER	\$163.68

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

Calculate monthly cost: Salary x coverage (1-4 x salary) ÷ 1,000 x rate. Refer to the benefits site or invoice for exact amounts as the rates below are rounded.

UNDER AGE 40	\$0.14	AGE 65-69	\$1.63
AGE 40-49	\$0.28	AGE 70-74	\$2.79
AGE 50-59	\$0.60	AGE 75 AND OLDER	\$4.09
AGE 60-64	\$1.07		

GROUP SURVIVOR INCOME INSURANCE

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

UNDER AGE 30	\$2.96	AGE 45-49	\$11.57
AGE 30-34	\$3.91	AGE 50-54	\$14.69
AGE 35-39	\$5.47	AGE 55 AND OLDER	\$17.58
AGE 40-44	\$8.28		

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

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

SUPPLEMENTAL PLANS

3-PLAN BUNDLE

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

Members enrolled in MESSA Balance+ medical coverage are automatically enrolled in all three supplemental plans at no additional cost.

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
OPTIONAL CRITICAL ILLNESS		PLUS		PLUS		PLUS

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