

**Pontiac School District  
MESSA Pak Summary  
Grant Funded – Special Programs  
2018-19 (Rates through 12/31/18)**

**PAK A**

<b>MESSA Choices</b>	<b>\$500 Single/\$1,000 Family In-network deductible; 0% co-insurance \$20 Office Visit copay, \$25 Urgent Care copay, \$50 ER copay 3-tier Mandatory Mail</b>	
<b>Delta Dental</b>	<b>Class 1: Diagnostic &amp; Preventive 80% Class 3: Major Services 80% Class 1, 2, &amp; 3 annual max is \$2,500</b>	<b>Class 2: Basic Services 80% Class 4: Orthodontics 80% Class 4 lifetime max is \$2,000</b>
<b>VSP 2</b>	<b>\$6.50- Exam deductible; Contact allowance \$90: Frame allowance \$65 Frame and Lenses- \$18 deductible</b>	
<b>Long Term Disability</b>	<b>60%: \$850 monthly benefit Waiting period: 90 calendar year straight wait Mental/Nervous, Alcohol/Drug Two year limitations</b>	
<b>Life</b>	<b>\$20,000 with AD&amp;D</b>	
<b>Basic Term Life</b>	<b>\$5,000 basic term life with medical</b>	

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**PAK B**

<b>Delta Dental</b>	<b>For employee not electing Medical Class 1: Diagnostic &amp; Preventive 100% Class 3: Major Services 90% Class 1, 2, &amp; 3 annual max is \$2,000</b>		<b>Class 2: Basic Services 90% Class 4: Orthodontics 90% Class 4 lifetime max is \$2,500</b>
<b>VSP 3</b>	<b>Contact allowance \$115: Frame allowance \$65:Lenses covered</b>		
<b>Long Term Disability</b>	<b>60%: \$850 monthly benefit Waiting period: 90 calendar year straight wait Mental/Nervous, Alcohol/Drug Two year limitations</b>		
<b>Life</b>	<b>\$40,000 with AD&amp;D</b>		

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**PAK C**

<b>MESSA ABC</b>	<b>\$1,350 Single/\$2,700; 0% co-insurance</b>	
<b>Plan 1</b>	<b>MESSA ABC RX Plan with Mandatory Mail Health Savings Account with Health Equity</b>	
<b>Delta Dental</b>	<b>Class 1: Diagnostic &amp; Preventive 80% Class 3: Major Services 80% Class 1, 2, &amp; 3 annual max is \$2,500</b>	<b>Class 2: Basic Services 80% Class 4: Orthodontics 80% Class 4 lifetime max is \$2,000</b>
<b>VSP 2</b>	<b>\$6.50- Exam deductible; Contact allowance \$90: Frame allowance \$65 Frame and Lenses- \$18 deductible</b>	
<b>Long Term Disability</b>	<b>60%: \$850 monthly benefit Waiting period: 90 calendar year straight wait Mental/Nervous, Alcohol/Drug Two year limitations</b>	
<b>Life</b>	<b>\$20,000 with AD&amp;D</b>	
<b>Basic Term Life</b>	<b>\$5.000 basic term life with medical</b>	

## Pak D

### MESSA Choices

\$1,000 Single/\$2,000 Family In-network deductible; 10% co-insurance  
\$20 Office Visit copay, \$25 Urgent Care copay, \$50 ER copay  
3-tier Mandatory Mail

### Delta Dental

Class 1: Diagnostic & Preventive 80%      Class 2: Basic Services 80%  
Class 3: Major Services 80%              Class 4: Orthodontics 80%  
Class 1, 2, & 3 annual max is \$2,500      Class 4 lifetime max is \$2,000

### VSP 2

\$6.50- Exam deductible; Contact allowance \$90: Frame allowance \$65  
Frame and Lenses- \$18 deductible

### Long Term Disability

60%: \$850 monthly benefit  
Waiting period: 90 calendar year straight wait  
Mental/Nervous, Alcohol/Drug Two year limitations

### Life

\$20,000 with AD&D

### Basic Term Life

\$5,000 basic term life with medical

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## Opt out

\$140.00 per month opt-out (into a TSA/403(b) plan)

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Full Summary Descriptions for the above plans can be found at:

<http://www.pontiac.k12.mi.us/Page/225>

MESSA Choices/Pak A	21-Pays
Single	\$116.92
2-Person	\$640.73
Family	\$871.20
MESSA ABC-1/Pak C	21-Pays
Single	\$ 88.68
2-Person	\$577.20
Family	\$792.15
MESSA Choices/Pak D	21-Pays
Single	\$ 61.07
2-Person	\$515.07
Family	\$714.83