

Benefits **Enrollment Packet** (Group 145Y)

Open Enrollment November 6th - November 17th

OPEN ENROLLMENT CHECKLIST

- Review your benefit packet before making your selections.
- If you decide to keep the same benefits as last year, you do not need to make benefit elections. Your options will slide to the new plan automatically. Although Open Enrollment can be a great time to update your beneficiaries and address through the MESSA Member Portal Website.
- If you want to participate in a FSA because you have a low deductible health care plan or are on your spouse's low deductible health care plan, you will need to sign onto your MESSA account and elect the FSA.
- Visit the MESSA website (https://secure.messa.org/MemberPortal/Login) and select Open Enrollment to select your 2024 benefits. Open Enrollment User Guide instructions included in this packet.
- ✓ If you are eligible and elect to Opt Out of medical insurance to receive the monthly stipend incentive, you must complete the Health Benefit Opt Out Form found in this packet. You will also need to provide supporting documentation as required.*

MESSA will not show the hourly employees' cost share amount as it is dependent on the number of hours you work. Please refer to cost share amounts in this packet.

*All completed forms and supporting documentation are due to the RCS Benefits Coordinator's office within thirty (30) days of your benefits eligibility date, to ensure timely processing of your benefits and payroll deductions. Forms and supporting documentation can either be dropped off at the Business Services Office, mailed, or emailed accordingly:

Romeo Community Schools Business Services Department 316 N. Main St. Romeo, MI 48065

employeebenefits@romeok12.org

145Y Full Time Child Care

BC - MESSA Choices \$500/\$1000				
0% Coinsurance, 3Tier RX				
Effective Date: 01/01/2024				
Monthly Cost (Full Time)				
	Employee	Employer		
Single	145.39	641.90		
2-Person	1129.50	641.90		
Full Family	1562.52	641.90		

BG - MESSA Choices \$500/\$1000			
20% Coinsurance, 3Tier RX			
Effective Date: 01/01/2024			
Monthly Cost (Full Time)			
	Employee	Employer	
Single	59.37	641.90	
2-Person	935.95	641.90	
Full Family	1321.66	641.90	

CU - MESSA ABC Plan 1 \$1600/\$3200 HSA			
0% Coinsurance, 3Tier RX after deductible			
Effective Date: 01/01/2024			
Monthly Cost (Full Time)			
	Employee	Employer	
Single	50.67	641.90	
2-Person	916.38	641.90	
Full Family	1297.29	641.90	

DG - MESSA ABC Plan 2 \$2000/\$4000 HSA				
0% Coinsurance, 3Tier RX after deductible				
Effective Date: 01/01/2024				
Monthly Cost (Full Time)				
	Employee	Employer		
Single	5.56	641.90		
2-Person	814.88	641.90		
Full Family	1170.98	641.90		

MESSA In-Network Plan Comparison - Effective 1/1/2024 Romeo Community Schools - All Employees

	MESSA Choices \$500/\$1,000 0% 3-Tier Rx	MESSA Choices \$500/\$1,000 20% 3-Tier Rx	MESSA ABC Plan 1 \$1,600/\$3,200 HSA 0% 3-Tier Rx	MESSA ABC Plan 2 \$2,000/\$4,000 HSA 0% 3-Tier Rx
In-Network Cost Share A	fter Deductible			
Deductible	\$500/\$1,000	\$500/\$1,000	\$1,600/\$3,200	\$2,000/\$4,000
Coinsurance	0%	20%	0%	0%
Teladoc Health virtual 24/7 care for minor illnesses, injuries and mental health copay/coinsurance	\$20	\$20	0%	0%
Teladoc Health virtual primary care visit copay/coinsurance	\$20	\$20	0%	0%
Office visit copay/coinsurance	\$20	\$20	0%	0%
Specialist visit copay/coinsurance	\$20	\$20	0%	0%
Urgent care copay/coinsurance	\$25	\$25	0%	0%
Emergency room copay/coinsurance	\$50	\$50	0%	0%
Total out-of-pocket maximum	\$3,500/\$7,000	\$4,500/\$9,000	\$3,600/\$7,200	\$4,000/\$8,000
Certain Benefit Difference	es			
Chiropractic manipulations	Up to 38 visits per calendar year, including therapeutic massage; Covered 100% after deductible; \$20 office visit copay may apply	Up to 38 visits per calendar year, including therapeutic massage; Covered 80% after deductible; \$20 office visit copay may apply	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
Osteopathic manipulations	Up to 38 visits per calendar year; Covered 100% after deductible; \$20 office visit copay may apply	Up to 38 visits per calendar year; Covered 80% after deductible; \$20 office visit copay may apply	Up to 38 visits per calendar year; Covered 100% after deductible	Up to 38 visits per calendar year; Covered 100% 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 80% 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
Bariatric surgery	Covered 100% after deductible	Covered 80% after deductible	Covered 100% after deductible	Covered 100% after deductible
Acupuncture	Covered 100% after deductible	Covered 80% after deductible	Covered 100% after deductible	Covered 100% after deductible
Hearing aids	Covered 100% up to a maximum benefit after deductible	Covered 80% 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

MESSA In-Network Plan Comparison - Effective: 1/1/2024 Romeo Community Schools - All Employees

	MESSA Choices \$500/\$1,000 0% 3-Tier Rx	MESSA Choices \$500/\$1,000 20% 3-Tier Rx	MESSA ABC Plan 1 \$1,600/\$3,200 HSA 0% 3-Tier Rx	MESSA ABC Plan 2 \$2,000/\$4,000 HSA 0% 3-Tier Rx
Prescription Drugs	3-Tier Rx	3-Tier Rx	3-Tier Rx (after deductible)	3-Tier Rx (after deductible)
Up to a 34-day supply				
Generic drugs	\$10	\$10	Free or \$10	Free or \$10
Preferred brand-name drugs	20% coinsurance (\$40 min - \$80 max)	20% coinsurance (\$40 min - \$80 max)	20% coinsurance (\$40 min - \$80 max)	20% coinsurance (\$40 min - \$80 max)
Nonpreferred brand-name drugs	20% coinsurance (\$60 min - \$100 max)	20% coinsurance (\$60 min - \$100 max)	20% coinsurance (\$60 min - \$100 max)	20% coinsurance (\$60 min - \$100 max)
Preferred specialty drugs (includes generic specialty and preferred brand specialty)	Specialty drugs included in one of the above pricing categories	Specialty drugs included in one of the above pricing categories	Specialty drugs included in one of the above pricing categories	Specialty drugs included in one of the above pricing categories
Nonpreferred specialty drugs				
90-day supply				
Generic drugs, Preferred brand-name drugs, Nonpreferred brand-name drugs	2.5x 1-month supply; Available via retail or mail order	2.5x 1-month supply; Available via retail or mail order	2.5x 1-month supply; Available via retail or mail order	2.5x 1-month supply; Available via retail or mail order
Additional Information				
Free preventive drug lists	Affordable Care Act (ACA) Free Preventive Drug Coverage	Affordable Care Act (ACA) Free Preventive Drug Coverage	Affordable Care Act (ACA) Free Preventive Drug Coverage and the Expanded Free Preventive Drug List; These are FREE before you pay your deductible	Affordable Care Act (ACA) Free Preventive Drug Coverage and the Expanded Free Preventive Drug List; These are FREE before you pay your deductible
Supplemental Plans	Not included	Not included	Not included	Not included

[~] The MESSA ABC Plan 1 and Balance+ deductible is subject to change each Jan. 1 to remain HSA-compatible, per IRS rules; out-of-pocket maximums may change based on deductible amounts.

If you have any questions, please contact your MESSA Field Representative, Heather Scott, at 800-292-4910.

This comparison is provided for informational purposes only and MESSA assumes no responsibility or liability for any errors or omissions in the content. Refer to MESSA.org and the plan booklets for additional information.

HSA vs. FSA

What's the difference?

	Health Savings Account (HSA)	Flexible Spending Account (FSA)		
What is it?	Tax-advantaged account owned by employee that allows the account holder to save and pay for qualified medical expenses	Tax-advantaged accounts owned by employer that allows employee to pay for qualified medical expenses		
Who is eligible?	Individuals covered by a high-deductible health plan (HDHP) and who don't have other, non-HDHP coverage	Any employee, subject to employer-designed exclusions		
Who can fund it?	IndividualEmployee via payroll deductionEmployer	Employee via payroll deduction Employer		
Maximum annual contributions in 2024?	 Individual - \$4,150 Family - \$8,300 (Annual limit is subject to change according to the IRS rules) 	• \$3,200 (Annual limit is subject to change according to the IRS rules)		
Catch-up contributions?	Yes, ages 55 and older until they are enrolled in Medicare at age 65 - \$1,000	No		
Is contribution amount adjustable?	Yes	No, unless there is a qualifying life event and the plan document allows for such a change.		
Year-over-year carryover of unused funds?	Yes. An HSA is a savings tool. If you don't spend the money during the calendar year, it rolls over to the next year.	No, funds are forfeited to the employer at the end of the year unless the plan document allows for a carryover up to \$640.		
Interest and earnings?	Yes	No		
Yes, employees do not need to disclose private health information to their employer or HSA administrator to get reimbursed.		No, employee has to provide explanation of expenses to employer and/or FSA administrator to get reimbursed.		
Investment options?	Yes	No		
Portability?	Yes, the employee owns the account and can use it in retirement or if they change employers.	No		
If I close my account, can I receive any remaining balance?	Yes, if the employee is age 65 or older they may close the account and receive any remaining balance without penalties, subject to taxes.	No		
Can I pay COBRA premiums or other plan premiums with it?	Yes	No		

Additional Benefit Offerings

Employees and dependents enrolled in any of the MESSA medical plans offered are also eligible for the following programs and health resources at no cost:

- Experian Identity Theft and Credit Protection
- NurseLine access 24 hours/7 days a week (1-800-414-2014)
- Livongo Diabetes Management
- MESSA Case Management Programs for most common chronic illnesses:
 - o Asthma Case Management Program
 - o Diabetes Case Management Program
 - o Cardiovascular Case Management Program
 - Medical Case Management Program
- MESSA Wellness Tools
- Blue365 premier health & wellness discounts

The list above is not all inclusive. All MESSA programs and health resources available to MESSA medical plan enrollees can be found on MESSA's website at www.messa.org.

MESSA Gives You Options

All RCS employees are eligible to enroll or participate in MESSA's variable option plans (voluntary plans) at a minimal cost to the employee.

- Group Supplemental Term Life Insurance
- Group Survivor Income Insurance
- Group Dependent Life Insurance
- Group Short Term Disability Income Insurance
- Group Long Term Disability Income Insurance
- Indemnity Plans (Critical Illness Coverage, Hospital Indemnity Coverage, Accident Coverage)

A summary of the MESSA Variable Option Plans and Rates for those plans can be found at:

https://www.messa.org/pdf/messa gives you options.pdf



ONLINE ENROLLMENT AT A GLANCE



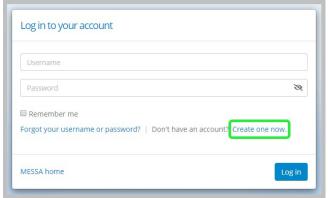






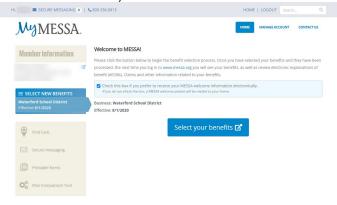
Creating/Logging in to your MYMESSA Account

- Go to www.messa.org
- Click MyMESSA Login
- Log in to your account
- If you do not have an account, Create one now



Accessing MESSA's Online Benefits Website

 Once logged in to your account, click on the "Select your benefits" link in the blue box. (If you do not see this link, please call Member Services at 800.336.0013).



Electing Benefits

Click "Make Benefit Elections"

Demographics

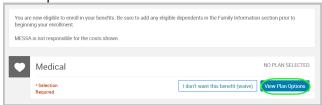
- Review your Demographic Information and make any necessary updates.
- When finished, click the "I agree" box and click "Continue".

Dependents

- Review/add/edit your Family Information.
- When finished, click the "I agree" box and click "Continue".

Benefit Election

 To elect benefits, click on "View Plan Options" Step

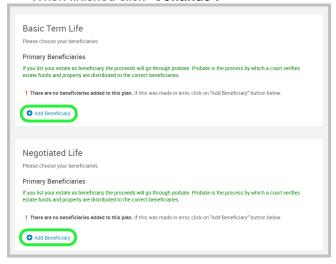


- To cover a dependent, check the box next to their name and click continue.
- To remove a dependent, uncheck the box next to their name.
- Click "Continue".
- Select a benefit plan by clicking "Select".
- When finished electing all benefits, click "Continue" on the right-hand side.



Beneficiaries

- It's recommended that you designate at least one primary beneficiary.
 - Add a beneficiary to this plan from your dependents or add a new beneficiary.
 - Click 'Add Selected'.
 - Percentage total must equal 100%.
- When finished click "Continue".

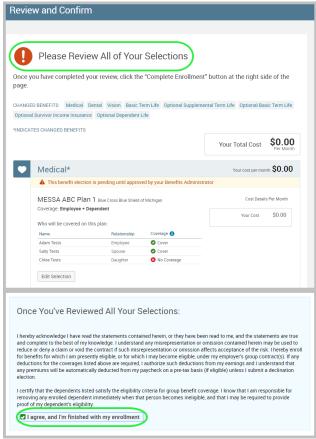


Other Medical Insurance

- If you and/or a dependent are enrolled in MESSA medical coverage and have other medical coverage, you will be required to enter information about the other coverage.
- Click "Yes" next to "Current or Prior Coverages" and enter the following information.
- Once you have entered the information, click "Save".
- If you do not have other medical coverage, keep "Current or Prior Coverages" as "No" and click "Continue".

Review and Confirm

 Now that you have elected all of your benefits, review your selections and scroll to the bottom of the page to view the "Participation" statement. Check the "I agree, and I'm finished with my enrollment" box.



Confirmation Statement

 You may view, email, or print your confirmation statement.

