Accident Plan: Preparing for the unexpected

Accidents happen when you least expect them. But an accident plan can help you be more financially prepared. It pays you cash benefits when you or a covered family member are faced with a covered accidental injury on or off the job.

Jorge’s story*

“My 10-year-old recently took a major tumble during his school soccer match and ended up breaking his leg.”

“Between the ER visit, surgery, and countless appointments, the bills really added up. Thankfully, my accident plan helped me make ends meet.”

“It paid me cash to use toward my deductible and copays, bills and even my car payment. And, filing a claim on the app was a breeze!”

Your plan, your benefits
Here’s what you’d receive if you enrolled in the accident plan and experienced a situation like Jorge’s.

<table>
<thead>
<tr>
<th>Covered care</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial treatment – ER</td>
<td>$100</td>
</tr>
<tr>
<td>X-ray</td>
<td>$50</td>
</tr>
<tr>
<td>Broken leg (surgically repaired)</td>
<td>$2,250</td>
</tr>
<tr>
<td>Appliances (crutches)</td>
<td>$100</td>
</tr>
<tr>
<td>Follow-up care visit</td>
<td>$50</td>
</tr>
<tr>
<td>Physical therapy (6 visits)</td>
<td>$150</td>
</tr>
<tr>
<td>Child sports rider (25% additional)</td>
<td>$687.50</td>
</tr>
</tbody>
</table>

Total Paid: $3,387.50

Want to learn more? Check out your benefit summary for a complete list of benefits, details, exclusions, and limitations.

*The above member story is for illustrative purposes and does not reflect events experienced by actual participants.

**With the organized sports rider, the plan pays a higher percentage of benefits if a dependent child is injured while playing as a registered member of an organized sporting activity. Some benefits are excluded from the additional benefit percentage.
Supplemental health plans

We make it simple

If you’re eligible to enroll and apply for coverage, your acceptance is guaranteed. Cash benefits are paid directly to you and not reduced by other insurance you might have. You get access to negotiated group rates and you enjoy the convenience of payroll deduction to pay premiums. And, if your employment ends, you can take your coverage with you - you'll just pay premiums directly to Aetna.

Managing your plans

Once you're a member, you can access plan information and documents through your MyMESSA member portal at messa.org. You can also download the My Aetna Supplemental app or visit Aetna’s member portal at Myaetnasupplemental.com.

Aetna Easy File™

Filing claims is easy. Once you register on the My Aetna Supplemental member app or at Myaetnasupplemental.com, just answer a few short questions. Our system retrieves medical information needed to process your claim. That’s less paperwork for you. You can also view your coverage and sign up for direct deposit.

Got questions?

If you want more information on these benefits, call MESSA Member Services at 800-336-0013, Monday through Friday, 8 a.m. to 5 p.m.
Exclusions and Limitations

These plans have exclusions and limitations. Refer to the actual policy and certificate to determine which benefits are not payable. The following is a partial list of services and supplies that are generally not covered. However, the plans may contain exceptions to this list based on state mandates or the plan design purchased. Benefits under the policy will not be payable for anything related to the following:

**Accident Plan Exclusions and Limitations**

1. Certain competitive or recreational activities, including but not limited to: ballooning, bungee jumping, parachuting, skydiving;
2. Any semi-professional or professional competitive athletic contest, including officiating or coaching, for which you receive any payment;
3. Riot, war;
4. Operating, learning to operate or serving as a pilot or crew member of any aircraft, whether motorized or not;
5. Any loss to which a contributing cause was your commission of or attempt to commit a felony, or to which a contributing cause was your engagement in an illegal occupation or other willful criminal activity;
6. Bacterial infections that are not caused by a cut or wound from an accidental injury;
7. Care provided by immediate family members or any household member;
8. Elective or cosmetic surgery;
9. Nutritional supplements
10. Violating any cellular device use laws of the state in which the accident occurred, while operating a motor vehicle;
11. Accidental injury sustained while engaging in an illegal occupation or committing, or attempting to commit, a felony and were intoxicated or under the influence of any drug intoxicant, including those prescribed by a physician that are misused.

We will not pay any benefits for a service or supply rendered or received that are not specifically covered or not related to an accidental injury.

The stay, visit, or service must be on or after the effective date of coverage, while coverage is in force and take place in the United States or its territories.

**Accident Policy form issued in Oklahoma include:** GR-96841, AL HPOL-VOL Acc 01, AL HCOC-VOL Acc 01.

**Accident Policy form issued in Missouri include:** GR-96842 01, AL HPOL-VOL Acc 01, AL HCOC-VOL Acc 01.

**THESE PLANS DO NOT COUNT AS MINIMUM ESSENTIAL COVERAGE UNDER THE AFFORDABLE CARE ACT. THESE ARE A SUPPLEMENT TO HEALTH INSURANCE AND NOT A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE. LACK OF MAJOR MEDICAL COVERAGE (OR OTHER MINIMUM ESSENTIAL COVERAGE) MAY RESULT IN AN ADDITIONAL PAYMENT WITH YOUR TAXES.**

These plans provide limited benefits. They pay fixed dollar benefits for covered services without regard to the health care provider’s actual charges. The benefits payments are not intended to cover the full cost of medical care. You are responsible for making sure the provider’s bills get paid. These benefits are paid in addition to any other health coverage you may have. This material is for information only. Insurance plans contain exclusions and limitations. Not all health services are covered, and coverage is subject to applicable laws and regulations, including economic and trade sanctions. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features, rates, eligibility and availability may vary by location and are subject to change. Providers are independent contractors and are not agents of Aetna. Aetna does not provide care or guarantee access to health services. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professional. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to Aetna.com.
Non-Discrimination Notice

Aetna complies with applicable Federal civil rights laws and does not discriminate, exclude or treat people differently based on their race, color, national origin, sex, age, or disability.

Aetna provides free aids/services to people with disabilities and to people who need language assistance. If you need a qualified interpreter, written information in other formats, translation or other services, call 1-888-772-9682.

If you believe we have failed to provide these services or otherwise discriminated based on a protected class noted above, you can also file a grievance with the Civil Rights Coordinator by contacting:
Civil Rights Coordinator, P.O. Box 14462, Lexington, KY 40512
1-800-648-7817, TTY: 711, Fax: 859-425-3379, CRCordinator@aetna.com.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or at 1-800-368-1019, 800-537-7697 (TDD).

Availability of Language Assistance Services
TTY: 711

For language assistance in your language call 1-888-772-9682 at no cost. (English)
Para obtener asistencia lingüística en su idioma, llame sin cargo al 1-888-772-9682. (Spanish)
欲取得以您的語言提供的語言協助，請撥打1-888-772-9682，無需付費。（Chinese）
Pour une assistance linguistique dans votre langue, appeler le 1-888-772-9682 sans frais. (French)
Para sa tulong sa inyong wika, tumawag sa 1-888-772-9682 nang walang bayad. (Tagalog)
Hilfe oder Informationen in deutscher Sprache erhalten Sie kostenlos unter der Nummer 1-888-772-9682. (German)
(阿拉伯语) للمساعدة اللغوية بلغتك الراجئة الاتصال على الرقم المجاني 1-888-772-9682.
(法语) Pou jwenn asistans nan lang pa w, rele nimewo 1-888-772-9682 gratis. (French Creole)
Per ricevere assistenza nella sua lingua, può chiamare gratuitamente il numero 1-888-772-9682. (Italian)
日本語で援助をご希望の方は 1-888-772-9682 (フリーダイヤル) までお電話ください。（Japanese）
본인의 언어로 통역 서비스를 받고 싶으시면 비용 부담 없이 1-888-772-9682번으로 전화해 주십시오. (Korean)
(波斯语) برای راهنمایی به زبان شما با شماره 1-888-772-9682 بدون هزینه ای تماس بگیرید. (Persian)
Aby uzyskać pomoc w swoim języku, zadzwoń bezpłatnie pod numer 1-888-772-9682. (Polish)
Para obter assistência no seu idioma, ligue gratuitamente para o 1-888-772-9682. (Portuguese)
Чтобы получить помощь с переводом на ваш язык, позвоните по бесплатному номеру 1-888-772-9682. (Russian)
Để được hỗ trợ ngôn ngữ bằng ngôn ngữ của bạn, hãy gọi miễn phí đến số 1-888-772-9682. (Vietnamese)