

\$10K Critical Illness Plan: Facing a serious diagnosis

No one is truly ready to receive a diagnosis of a serious illness. But a critical illness plan pays benefits when you are diagnosed with a covered illness or condition, after your coverage effective date. This can help you relieve some financial stress so you can focus on recovery.

Loretta's story*

“After a routine mammogram, being diagnosed with breast cancer was not something I’d expected. Who can ever plan for something like that?”

“After surgery, chemo and many visits to the oncologist, my out-of-pocket medical costs started to add up. My critical illness plan helped my finances.”

“Filing a claim online was fast and easy. And the benefits were deposited directly into my account. I used the cash for my deductible, plus extras like childcare and groceries.”



Your plan, your benefits

Here’s what your plan would pay if you enrolled in the **\$10K critical illness plan** and experienced a situation like Loretta’s.

Covered diagnosis	Plan Benefits
Health screening benefit	\$50
Cancer	\$10,000
Total benefits paid	\$10,050

Covered critical illness plan benefits

A critical illness plan can help ease some financial worries. Check out some of the benefits:

- Heart attack & stroke
- Major organ failure
- Invasive and non-invasive cancers
- Skin cancer
- Alzheimer’s & lupus
- Acute Respiratory Distress Syndrome (ARDS)
- Recurrent & subsequent illnesses**
- \$50 health screening benefit



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.

**Recurrent illness diagnosis must occur at least 180 days after initial diagnosis. There is no waiting period for subsequent diagnoses benefits.



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 are not reduced by other insurance benefits you may 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 benefit with you – you'll just pay premiums directly to Aetna.

More great benefits

Health screening benefit

The critical illness plan includes a benefit of **\$50** per covered member, per plan year, for certain preventive health screening tests. See the complete list of tests in your benefit summary.

Managing your plans

Once you're a member, you can access plan information and documents through your **MyMESSA** member portal at [messa.org](https://www.messa.org). You can also download the **My Aetna Supplemental** app or visit Aetna's member portal at [Myaetnasupplemental.com](https://www.Myaetnasupplemental.com).

Aetna Easy File™

Filing claims is easy. Once you register on the **My Aetna Supplemental** member app or at [Myaetnasupplemental.com](https://www.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**.



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:

Critical Illness Plan Exclusions and Limitations

Exclusions: Benefits under the Policy will not be payable for any critical illness, cancer (invasive), carcinoma in situ or skin cancer that is diagnosed or for which care was received outside the United States and its territories, or for any loss caused in whole or in part by or resulting in whole or part from the following:

1. Suicide or attempt at suicide, intentional self-inflicted injury or sickness, any attempt at intentional self-inflicted injury, injury caused by a self-inflicted act or sickness, while sane or insane; except when resulting from a diagnosed disorder in the most current version of the Diagnostic and Statistical Manual(DSM);
2. Being under the influence of a stimulant (such as amphetamines or pitrates), depressant, hallucinogen, narcotic or any other drug intoxicant, including those prescribed by a physician that are misused by the insured person; except when resulting from a diagnosed disorder in the most current version of the DSM while engaging in an illegal occupation or in the commission of or attempt to commit a felony or other criminalact;
3. Any act of war, whether declared or not, or voluntary participation in a riot, rebellion or civilinsurrection.

Critical Illness Policy form issued in Oklahoma include: GR-96843.

Critical Illness Policy form issued in Missouri include: GR-96844 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, CRCoordinator@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)

للمساعدة اللغوية بلغتك الرجاء الاتصال على الرقم المجاني 1-888-772-9682. (Arabic)

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)

برای راهنمایی به زبان شما با شماره 1-888-772-9682 بدون هیچ 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)
