Today’s topics include:

- Payroll & benefits resources
- Health insurance
- Accident plan
- Life

- Dental
- Vision
- Flexible Spending Accounts
- Retirement plans
New Employee Benefits Presentation

Who should review this information?

- Short Term Academic Staff
  if appointment is full semester or longer but < 1 calendar year*

- Grad Assistants (e.g., T.A.s)
- Fellows
- Scholars
- Post-Docs
  if holding at least 33.4% appointment for the entire 2020 spring semester
  or the full 2020/2021 academic year.

*and if not covered by the Wisconsin Retirement System (WRS) but 21% FTE or more
UW-Madison Benefits Services

benefits@ohr.wisc.edu
hr.wisc.edu/benefits
21 N. Park Street, Suite 5101, Madison, WI  53715
Brief walk-ins welcome 9am - 3pm, Mon - Fri

We provide:
• Support for your departments’ HR staff
• Annual Benefit Enrollment (ABE) sessions each fall
Your Local HR Contacts

hr.wisc.edu/contact
How long can I take to think my options? When would my coverage begin?

- HR must receive your new employee enrollment within **30 days** of the first day of your eligible appointment.

- If you enroll on time, most plans are effective the 1st day of the month after your first day in your eligible appointment.
Ask ALEX

Meet ALEX, your online benefits counselor

- Review 2020 insurance options
- Keeps your data secure
  - Informational only
  - No password required
  - Enter your email to save your review

[wisconsin.edu/ohrwd/benefits/alex](http://wisconsin.edu/ohrwd/benefits/alex)
Payroll & Benefit Resources

Benefits summary booklet: hr.wisc.edu

HUMAN RESOURCES

HOME  PAY  BENEFITS  POLICIES  CONTACT HR

BENEFITS FOR EMPLOYEES NOT COVERED BY THE WRS

If you are uncertain whether you qualify for these Grad/Short-Term Academic Staff benefits, contact HR.

WITHIN YOUR FIRST 30 DAYS OF EMPLOYMENT...

ATTEND A BENEFITS SEMINAR »

WATCH THE "GRAD NEBS" VIDEO »

REVIEW THE BENEFITS SUMMARY »

Employees not covered by the WRS

- Graduate Assistants
- Employees-In-Training (including postdocs)
- Fellows and Scholars
- Short-Term Academic Staff
New Hire Self Service (eBenefits)

my.wisc.edu

You’ll need your NetID and Password

Login
NetID
Ex: bbadger
Forgot NetID

Password
Forgot password

Login

Contact your department with any questions you have regarding your NetID or eBenefits.
New Hire Self Service (eBenefits)

my.wisc.edu > Benefit Information

Contact your department with any questions you have regarding your NetID or eBenefits.
Self Service (eBenefits)

Enroll/Waive online with Self Service

If you cannot find the Benefit Information module in your MyUW portal...

Where is it?

Learn more: hr.wisc.edu/benefits/new-employee-benefits-enrollment/online-enrollment

Contact your department with any questions you have regarding your NetID or eBenefits.
If you cannot find the Benefit Information module in your MyUW portal...

There may be a name / personal information mismatch in our systems.

Contact your local HR Representative & ask them to help you “self link” your account(s)
Self Service (eBenefits)

Enroll/Waive online with Self Service

If you cannot find the Benefit Information module in your MyUW portal...

Questions about the “self link” process? Contact DoIT at (608) 264-4357
New Hire Self Service (eBenefits)

my.wisc.edu > Benefit Information > Statements

Confirmation Statement provided to your portal 24 - 48 hours after submission

Contact your department with any questions you have regarding your NetID or eBenefits.
Paper Applications

I don’t have access to Self Service (eBenefits)?

1. Contact your department HR and check your Self Service eligibility

2. If ineligible for Self Service, complete paper applications

Application forms are online. Print, complete, and hand-in by deadline.

hr.wisc.edu/forms

Contact your department with any questions you have about the application forms.
Submit them to your department by deadline (get a copy with their signature/date)
Life Events & Benefits Changes

Some benefits allow future enrollments or changes if you submit paper applications **within 30 days of a life event**

Example events:
- Marriage
- Divorce
- Birth / Adoption
- Address change to a new county
- Loss of other coverage

Life Event resources:
- [www.wisconsin.edu/ohrwd/benefits/life-events/](http://www.wisconsin.edu/ohrwd/benefits/life-events/)
Life Events & Benefits Changes

International Employees:

• If you enroll in Individual coverage now and your spouse or child arrive in the USA at a later date, you can change to Family coverage then only if they can prove their **loss of universal health insurance coverage from the home country**.

• If their home country does not have universal health coverage:
  • Enroll for Family coverage now, or
  • Add them during the annual benefit enrollment (ABE) in autumn of 2020* for coverage effective January 1st, 2021

*exact dates of ABE unknown at the time these slides were created
www.wisc.edu > MyUW tab [use NetID to log in]

Paycheck stubs
  • Payroll Information > Earnings Statement

Benefits Summary
  • Benefit Information > Summary
Earnings Statements

Review your *Earnings Statements* for accuracy:

- Rate of pay & hours worked
- Insurance premium deductions

Contact your Payroll & Benefit Coordinator if your Earnings Statement is missing pay or deductions or appears incorrect.

UW Madison Benefits Services 2019
State Group Health Insurance

2020 Health Benefits Decision Guide
State of Wisconsin Group Health Insurance for Employees
ET-2107 (Revised 9/9/2019)

https://etf.wi.gov/its-your-choice/2020/20et-2107/direct
State Group Health

What is my monthly premium cost if I enroll?

Which doctors or providers may I visit?

How are services covered?

It depends on which of the plan designs you elect:

- **Regional, Wisconsin-based**
  - IYC Health Plan

- **Nationwide**
  - Access Health Plan
# State Group Health - Premiums

See Page 4 of ETF’s Decision Guide 2020
(ET-2107)

<table>
<thead>
<tr>
<th>UW Grad Assistants</th>
<th>IYC Health Plan</th>
<th>Access Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$48.50 / $44.50</td>
<td>$138.50 / $134.50</td>
</tr>
<tr>
<td>With / Without Uniform Dental</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td>$120 / $111</td>
<td>$344 / $335</td>
</tr>
<tr>
<td>With / Without Uniform Dental</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you elect the IYC Health Plan design you must also **choose a network** of providers for the year!

**Dane County examples:**
- Dean
- GHC-SC
- Quartz-UW

---

**State Group Health - Premiums**

**See Page 4 of ETF’s Decision Guide 2020 (ET-2107)**

<table>
<thead>
<tr>
<th>UW Grad Assistants</th>
<th>IYC Health Plan</th>
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<tbody>
<tr>
<td><strong>Individual</strong></td>
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<td>With / Without Uniform Dental</td>
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<tr>
<td><strong>Family</strong></td>
<td></td>
</tr>
<tr>
<td>With / Without Uniform Dental</td>
<td>$120 / $111</td>
</tr>
</tbody>
</table>

[link](https://etf.wi.gov/its-your-choice/2020/20et-2107/direct)
State Group Health

What is my monthly premium cost if I enroll?  
Which doctors or providers may I visit?  
How are services covered?

And your monthly premium depends on if you elect preventive Uniform Dental with your health
**State Group Health - Uniform Dental**

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Uniform Dental &amp; Preventive Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Network providers (No out-of-network coverage)</td>
<td>Delta Dental PPO &amp; Premier providers</td>
</tr>
<tr>
<td>Annual deductible</td>
<td>None</td>
</tr>
<tr>
<td>Annual benefit max</td>
<td>$1,000 / person</td>
</tr>
<tr>
<td>Waiting period</td>
<td>None</td>
</tr>
<tr>
<td>Routine evaluations, dental cleanings, sealants, bitewing and panoramic X-rays, fluoride treatments, pulp vitality tests</td>
<td>100%</td>
</tr>
<tr>
<td>Fillings</td>
<td>100% *</td>
</tr>
<tr>
<td>Anesthesia (general and IV sedation)</td>
<td>80%</td>
</tr>
<tr>
<td>Emergency pain relief</td>
<td>80%</td>
</tr>
<tr>
<td>Periodontal maintenance</td>
<td>100%</td>
</tr>
<tr>
<td>Crown, bridges, dentures, implants</td>
<td>No coverage</td>
</tr>
<tr>
<td>Surgical extraction, root canal (endodontics), periodontics (except maintenance), oral surgery</td>
<td>No coverage</td>
</tr>
<tr>
<td>Non-surgical extractions (above gumline)</td>
<td>90%</td>
</tr>
<tr>
<td>Orthodontics coverage</td>
<td>50% (Under age 19)</td>
</tr>
<tr>
<td>Orthodontics lifetime maximum</td>
<td>$1,500</td>
</tr>
</tbody>
</table>

See Page 12 of Decision Guide

### Uniform Dental

<table>
<thead>
<tr>
<th>Plan Type</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$4</td>
</tr>
<tr>
<td>Individual + Child(ren)</td>
<td>---</td>
</tr>
<tr>
<td>Individual + Spouse</td>
<td>---</td>
</tr>
<tr>
<td>Family</td>
<td>$9</td>
</tr>
</tbody>
</table>

*If you receive a composite/resin aka tooth-colored filling on a back tooth, you will pay the difference in amount your provider charges for an amalgam filling vs. the composite/resin filling.*
State Group Health - Uniform Dental

Group # 50316-001
www.deltadentalwi.com/state-of-wi

Contact Information

Phone: 844-337-8383

Hours: Monday - Friday, 7:30 am - 5 pm CST

Email: etfcustomerservice@deltadentalwi.com
State Group Health

Which doctors & providers may I visit?

Enroll in a network & visit your chosen network’s providers

Regional, WI-based designs:

• See in-network providers only

• If out-of-network, **no coverage** except for **urgent or emergency** care

Nationwide designs:

• May see providers in- or out-of-network

• If out-of-network, **less coverage** (higher out-of-pocket costs)
State Group Health

See pages 7-10 of the IYC 2020 Decision Guide

etf.wi.gov > search “health plan search”
State Group Health

How do I find out which network is best for me?

Visit the network websites and/or call them with questions. You may want to ask:

- Is my current medical provider in their network?
- I live ____ and work ____; are there clinics nearby?
- Do you offer telemedicine or video visits?
- If I need surgery, which hospital(s) would be in-network?

[etf.wi.gov/its-your-choice/2020/health-plan-search/state](etf.wi.gov/its-your-choice/2020/health-plan-search/state)
Preventive Health Services

Preventive services in-network covered 100%

• Federal law requires that specific preventive services provided by in-network providers be offered at no cost to you, including
  ➢ Routine annual check-ups
  ➢ Certain screenings for illness
  ➢ Certain Prescriptions

Learn more:
• healthcare.gov > search: preventive
What if it’s **not** Preventive?

- OOPL – Medical
- OOPL – Rx
- Plan MOOP
- Copayments
- Deductible
- Coinsurance
What is a Copay?

**Copay:** A fixed dollar amount you pay for certain covered health care services or prescription drugs.

You usually pay the copay when you receive the service or drug.
What is a Copay?

With the **Health Plan** and **Access Plan**, you pay copays for in-network, non-preventive **primary care & specialty office visits**.

<table>
<thead>
<tr>
<th>Visit Type</th>
<th>Includes</th>
<th>Copayment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Primary Care Office Visit</strong></td>
<td>· General Physicians</td>
<td>$15</td>
</tr>
<tr>
<td></td>
<td>· Pediatrician</td>
<td></td>
</tr>
<tr>
<td></td>
<td>· Mental Health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>· Chiropractor</td>
<td></td>
</tr>
<tr>
<td></td>
<td>· OB/GYN</td>
<td></td>
</tr>
<tr>
<td><strong>Specialty Care Office Visit</strong></td>
<td>· Specialty Providers</td>
<td>$25</td>
</tr>
<tr>
<td></td>
<td>· Urgent Care</td>
<td></td>
</tr>
<tr>
<td></td>
<td>· Vision Exam in office visit setting</td>
<td></td>
</tr>
<tr>
<td><strong>Emergency Room</strong></td>
<td>· Emergency Room</td>
<td>$75</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(waived if admitted)</td>
</tr>
</tbody>
</table>
Telemedicine Services

Telemedicine services in-network are covered 100%

• Your health plan may offer telemedicine or video visits for access to a medical provider for certain diagnosis and prescription needs, for example:
  
  - Allergies
  - Cough
  - Fever
  - Stuffy/runny nose
  - Sore throat
  - Painful/difficult urination
  - Diarrhea
  - Pink eye and other eye infections
  - Nausea and vomiting
  - Joint pain
  - Headache
  - Minor skin problems

• Contact your health plan directly to ask if they offer telemedicine or video appointments.

https://etf.wi.gov/telehealth-options
What is a Deductible?

**Deductible:** the amount you must pay toward the full negotiated cost of certain health services *before* your insurance begins to pay a share.

**Health Plan and Access Plan deductibles:**

<table>
<thead>
<tr>
<th>Annual Deductible 2020</th>
<th>Single</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$250</td>
<td>$500</td>
</tr>
</tbody>
</table>
What is Coinsurance?

Coinsurance is the percentage (%) of the negotiated cost of a covered service that a member splits with the insurance company (usually after the deductible is met).

When receiving in-network care:

- Medical Care  90/10
- Durable Medical Equipment (crutches, etc.)  80/20
What is our medical Out of Pocket Limit?

Your **out of pocket limit** (“OOPL”) is the most you might pay for in-network, covered medical services during a plan year.

Once the medical OOPL is met, coinsurance and copayments no longer apply for health care visits that year.

<table>
<thead>
<tr>
<th>Health Plan &amp; Access Plan</th>
<th>Single</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>OOPL</td>
<td>$1,250</td>
<td>$2,500</td>
</tr>
</tbody>
</table>
Navitus Pharmacy Benefits

How much will I pay for my prescription?

Search the Navitus formulary:  https://etf.benefits.navitus.com
Navitus Pharmacy Benefits

As of Jan 1, 2020:

Vaccines at In-Network Pharmacies

Cost: $0, it’s free!

Available Vaccines

- Influenza
- Pneumonia
- Tetanus
- Hepatitis
- Shingles
- Measles
- Mumps
- Human Papillomavirus (HPV)
- Pertussis
- Varicella
- Meningitis

See Page 6 of ETF’s Decision Guide 2020 (ET-2107)
Navitus Pharmacy Benefits

<table>
<thead>
<tr>
<th>Preventive</th>
<th>You pay $0 (see Navitus’ list of eligible Rx)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>$5 per fill</td>
</tr>
<tr>
<td>Level 2</td>
<td>Member pays 20% (up to $50 per fill)</td>
</tr>
<tr>
<td>Level 3</td>
<td>Member pays 40% (up to $150 and the difference in cost between the Level 3 and alternate drug)</td>
</tr>
<tr>
<td>Level 4</td>
<td>$50 per fill</td>
</tr>
<tr>
<td>Preferred Rx</td>
<td></td>
</tr>
</tbody>
</table>

- A “fill” is usually a 30-day supply
- **Serve You** mail order pharmacy fills 90-days of Level 1 & 2 drugs at the cost of 60-days
- Fill Level 4 at **UW Specialty Pharmacy** or **Lumicera**
Once the OOPL for a level is met, coinsurance & copayments no longer apply for that level of prescription drugs that year.

<table>
<thead>
<tr>
<th>Levels</th>
<th>Health and Access Plans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Levels 1 &amp; 2</td>
<td>$600 / $1,200</td>
</tr>
<tr>
<td>Level 3*</td>
<td>$6,850 / $13,700</td>
</tr>
<tr>
<td>Level 4 Preferred Rx &amp; Pharmacy</td>
<td>$1,200 / $2,400</td>
</tr>
</tbody>
</table>

*Level 3 apply toward plan MOOP
Overview of In-Network Coverage

We pay our drug copays / coinsurance when filling Rx

Insurance will cover most additional Rx costs in a Tier after the Tier’s maximum OOPL is met

We pay our medical costs until we reach our deductible

Then, we pay medical coinsurance amounts while insurance pays the remainder of covered medical care costs

Office visit copays are separate from the deductible and apply toward the OOPL

Insurance will cover most additional health costs after we reach our plan medical OOPL
Medical care if you are out of network

Regional, WI-based designs:

- IYC Health Plan

Dane county examples:
- Dean
- GHC-SC
- Quartz-UW

- If out-of-network, **no coverage** except for urgent or emergency care

Nationwide designs:

- Access Plan

- May see providers in- or out-of-network

- If out-of-network, **less coverage** (higher out-of-pocket costs)
Health Plan –
Medical care if you are out of network

You’ll find network pharmacies across the country!
Health Plan –
Medical care if you are out of network

What’s considered Emergency or Urgent Care?

<table>
<thead>
<tr>
<th>Emergency Care</th>
<th>Urgent Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Severe allergic reactions</td>
<td>• Most broken bones</td>
</tr>
<tr>
<td>• Severe asthma attacks</td>
<td>• Minor cuts</td>
</tr>
<tr>
<td>• Convulsions</td>
<td>• Sprains</td>
</tr>
<tr>
<td>• Severe bleeding</td>
<td>• Most drug reactions</td>
</tr>
<tr>
<td>• Acute appendicitis</td>
<td>• Non-severe bleeding</td>
</tr>
<tr>
<td>• Loss of consciousness</td>
<td>• Minor burns</td>
</tr>
<tr>
<td>• Heart attack</td>
<td></td>
</tr>
<tr>
<td>• Stroke</td>
<td></td>
</tr>
</tbody>
</table>

Must use in-network urgent care if you are in service area

https://etf.wi.gov/publications/20et2107cc/direct
Medical care if you are out of network

Regional, WI-based designs:

IYC Health Plan

- See network providers only
- Dane county examples:
  - Dean
  - GHC-SC
  - Quartz-UW

- If out-of-network, no coverage except for urgent or emergency care

Nationwide designs:

Access Plan

- May see providers in- or out-of-network
- If out-of-network, less coverage (higher out-of-pocket costs)
Access Plan with WEA Trust — Medical Care if you are out of network

If covered by Access Plan and visiting a provider who is out of network

- **$500 deductible** per calendar year per individual ($1,000 maximum per year for a family)
  - would include Preventive Services

- If deductible is met, most covered medical services that calendar year are then covered via **coinsurance of 70/30** (i.e., you pay 30%)

- **OOPL is $2,000** per individual ($4,000 per year for a family)

- Telemedicine – not covered out of network
- MOOP – n/a, no maximum out of pocket

https://etf.wi.gov/publications/20et2112/direct
State Group Health

Where do I find more details?
Where are the networks’ phone numbers?
I have more questions about coverage!

https://etf.wi.gov/benefits-by-employer > University of Wisconsin System

- Health Plan Search / Provider Directories
- 2019 Health Plan Report Card
- Certificates of Coverage
What is a Certificate of Coverage?

See Certificate of Coverage for more detail on what is covered and what is excluded (not covered) under your plan

https://etf.wi.gov/publications/20et2107cc/direct

Example of Covered Expenses:

<table>
<thead>
<tr>
<th>Benefits</th>
<th>State of Wisconsin</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cochlear Implants</strong> for  PARTICIPANTS <strong>under age 18</strong></td>
<td></td>
</tr>
<tr>
<td>Includes all charges related to implant and follow-up training sessions.</td>
<td>PARTICIPANT pays full allowed cost until the DEDUCTIBLE is met.</td>
</tr>
<tr>
<td></td>
<td>After DEDUCTIBLE: PARTICIPANT pays 10% COINSURANCE.</td>
</tr>
<tr>
<td></td>
<td>COINSURANCE applies to the OOPL and MOOP.</td>
</tr>
</tbody>
</table>
What is a Certificate of Coverage?

Example of detail within certificate:

Gender Reassignment (aka Gender Identity or Transgender) Services

Based on a permanent injunction issued on October 11, 2018 and the summary judgment decision issued on September 18, 2018 by the federal district court for the Western District of Wisconsin, all procedures, services, and supplies related to surgery and sex hormones associated with gender reassignment should be reviewed by the health plans for medical necessity.

MEDICALLY NECESSARY: A service, treatment, procedure, equipment, drug, device or supply provided by a HOSPITAL, physician or other health care PROVIDER that is required to identify or treat a PARTICIPANT'S ILLNESS or INJURY and which is, as determined by the HEALTH PLAN and/or PBM:

1) Consistent with the symptom(s) or diagnosis and treatment of the PARTICIPANT'S ILLNESS or INJURY, and
2) appropriate under the standards of acceptable medical practice to treat that ILLNESS or INJURY, and
3) not solely for the convenience of the PARTICIPANT, physician, HOSPITAL or other health care PROVIDER, and
4) the most appropriate service, treatment, procedure, equipment, drug, device or supply which can be safely provided to the PARTICIPANT and accomplishes the desired end result in the most economical manner
IV. Exclusions and Limitations

A. Exclusions

(...)

Some of the listed exclusions may be MEDICALLY NECESSARY, but still are not covered under this program, while others may be examples of services which are not MEDICALLY NECESSARY or not medical in nature, as determined by the HEALTH PLAN and/or PBM.

1) **Surgical Services**

   a) Keratorefractive eye surgery, including but not limited to, tangential or radial keratotomy, or **laser surgeries for the correction of vision**.

2) **Medical Services**

   a) Examination and any other services (for example, blood tests) for informational purposes requested by third parties. Examples are physical exams for employment, licensing, insurance, marriage, adoption, participation in athletics, functional capacity examinations or evaluations, or examinations or treatment ordered by a court, unless otherwise covered as stated in the **Benefits and Services** Section.
State Group Health

I’ve decided! How do I enroll/waive?

Within 30 days of the start of your appointment:

my.wisc.edu > Benefit Information

Contact your department with any questions you have regarding Self Service.
State Group Health

I’ve decided! How do I enroll/waive?

If you can’t use Self Service (eBenefits) because you
• don’t have the option on MyUW > Benefit Information, or
• don’t have computer access
within 30 days of the start of your appointment,
complete and submit a paper Health Insurance form

hr.wisc.edu/benefits/state-group-health-insurance

Contact your department with any questions you have regarding Self Service.
When will I receive my insurance cards?

- ~4 weeks after enrollment is processed
- Your insurance network mails them to your home address listed in MyUW
State Group Health

If you must seek services before you have your cards:

• Ask provider’s office to call your insurance network to verify your coverage

• If you must fill a Rx but you’re not yet in the Navitus system, you may need to pay full price at the pharmacy and submit a claim form to Navitus for reimbursement
Student Health Insurance Plan

SHIP

• International Students and J-1 Scholars are required to purchase the Student Health Insurance Plan (SHIP) or file a qualifying waiver.

• More information: www.uhs.wisc.edu/ship
Accident Plan

NEW for 2020!
Accident Plan

- Cash payment to help cover out-of-pocket expenses

- Coverage includes:
  - Concussions
  - Dislocations
  - Lacerations
  - Fractures
  - X-rays
  - Emergency care
  - Hospitalization
  - Surgeries
  - Follow-up care
  - Support care
  - Accidental death & dismemberment (up to $25,000)

- Also offers identity theft protection and travel assistance
# Accident Plan

## What’s covered?

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Benefit amount available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Injury</td>
<td></td>
</tr>
<tr>
<td>Dislocation</td>
<td>Up to $2,000</td>
</tr>
<tr>
<td>Fracture</td>
<td>Up to $3,000</td>
</tr>
<tr>
<td>Paralysis</td>
<td>Up to $5,000</td>
</tr>
<tr>
<td>Child organized sports injury</td>
<td>$50</td>
</tr>
<tr>
<td>Burns</td>
<td>Up to $7,500</td>
</tr>
<tr>
<td>Lacerations</td>
<td>Up to $100</td>
</tr>
<tr>
<td>Emergency care</td>
<td></td>
</tr>
<tr>
<td>Ambulance (air, ground or water)</td>
<td>Up to $500</td>
</tr>
<tr>
<td>Emergency room treatment</td>
<td>$100</td>
</tr>
<tr>
<td>Blood, plasma or platelets</td>
<td>$50</td>
</tr>
<tr>
<td>Hospital care</td>
<td></td>
</tr>
<tr>
<td>Initial</td>
<td>$500</td>
</tr>
<tr>
<td>Daily</td>
<td>Up to $200</td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
</tr>
<tr>
<td>Tendon, ligament or rotator cuff</td>
<td>Up to $300</td>
</tr>
<tr>
<td>Follow-up care</td>
<td></td>
</tr>
<tr>
<td>Appliances</td>
<td>$50</td>
</tr>
<tr>
<td>Follow-up physician’s office visit</td>
<td>$50</td>
</tr>
<tr>
<td>Transportation</td>
<td>$150 per visit</td>
</tr>
<tr>
<td>Support care</td>
<td></td>
</tr>
<tr>
<td>Adult companion lodging</td>
<td>$50 per day</td>
</tr>
<tr>
<td>Accidental death &amp; dismemberment</td>
<td></td>
</tr>
<tr>
<td>Employee</td>
<td>$25,000</td>
</tr>
<tr>
<td>Spouse</td>
<td>$12,500</td>
</tr>
<tr>
<td>Child(ren)</td>
<td>$6,250</td>
</tr>
</tbody>
</table>

2019 UW-Madison Benefits Services
Accident Plan

Coverage benefit payout example

This is an example of how benefits under the accident insurance policy might be paid:*

John elects coverage offered by his employer.

Five months later, John fractures his hip in a skateboarding accident.

John files a claim and receives a payment for his fractured hip, ER visit, ambulance, hospital stay and appliance benefit for his crutches.

John uses the money to pay his mortgage and hire a lawn care service while he recovers.

* Actual experience and benefit payouts may vary from this example.
## Accident Plan

### Covered benefit payout example

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fractured hip</td>
<td>$1,000</td>
</tr>
<tr>
<td>Emergency room treatment</td>
<td>$100</td>
</tr>
<tr>
<td>Ambulance (ground)</td>
<td>$100</td>
</tr>
<tr>
<td>Hospital stay (2 days)</td>
<td>$700</td>
</tr>
<tr>
<td>Appliance (crutches)</td>
<td>$50</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$1,950</strong></td>
</tr>
</tbody>
</table>
Accident Plan

How much does accident insurance cost?

<table>
<thead>
<tr>
<th></th>
<th>Monthly cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee only</td>
<td>$3.26</td>
</tr>
<tr>
<td>Employee and spouse</td>
<td>$4.94</td>
</tr>
<tr>
<td>Employee and child(ren)</td>
<td>$7.10</td>
</tr>
<tr>
<td>Employee and family</td>
<td>$10.46</td>
</tr>
</tbody>
</table>

Note: If other family members are employed by UW and/or State of WI, each eligible employee may only be covered as an employee or dependent, not both.
Accident Plan

How to file a claim

• Employees will file their own claims
  – Securian.com/benefits
  – or call 1-866-295-8690

• Must submit claims by deadline, which may be within 72 hours of the accident. See plan certificate.
• Accident claims payable only if treatment is received in the U.S. or a U.S. territory.
• AD&D claims payable regardless of where the death occurs.
Life Insurance options:

Individual & Family life
UW Employees Inc. life
Accidental Death & Dismemberment (AD&D) with Zurich
Life Insurance

**Why would I want life insurance?**

If you die while employed, a life insurance payout could allow you to:

- Protect your family’s home
- Provide for child-care & education
- Replace lost household income
- Leave a charitable gift
Life Insurance

Who gets the money if I die?

Your chosen beneficiaries. Keep your form(s) updated!

[Link to website: wisconsin.edu/ohrwd/benefits/beneficiary]

- Protect your family’s home
- Provide for child-care & education
- Replace lost household income
- Leave a charitable gift
Life Insurance

Who gets the money if I die?

If you don’t designate any beneficiaries, your benefit will be paid out according to Wisconsin law aka Standard Sequence:

- Your surviving spouse, otherwise;
- Your surviving children equally, otherwise;
- Your surviving grandchildren equally, otherwise;
- Your surviving parents equally, otherwise;
- Your surviving siblings equally, otherwise;
- Your estate.

Note: If you wish to name a domestic partner or stepchild as a beneficiary, you must complete the applicable beneficiary designation form(s).

Claims associated with the death of your covered family member(s) are paid to you.
## Life Insurance

### Three optional plans:

<table>
<thead>
<tr>
<th></th>
<th><strong>Individual &amp; Family</strong></th>
<th><strong>UW Employees Inc.</strong></th>
<th><strong>AD&amp;D</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>How much coverage for employee?</strong></td>
<td>Up to $20,000 initially</td>
<td>Depends upon age</td>
<td>Up to $500,000</td>
</tr>
<tr>
<td><strong>How much coverage for family?</strong></td>
<td>Up to $10,000 on spouse/DP, $5,000 on child(ren)</td>
<td>None</td>
<td>% of employee coverage</td>
</tr>
<tr>
<td><strong>When is it effective?</strong></td>
<td>1&lt;sup&gt;st&lt;/sup&gt; of the month following 30 days from the date of hire</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Individual & Family (I&F) life

New employees can select the following coverage levels:

<table>
<thead>
<tr>
<th>Coverage Type</th>
<th>Coverage Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Term Life</td>
<td>$5,000, $10,000, $15,000 or $20,000</td>
</tr>
<tr>
<td>Spouse/Domestic Partner Term Life</td>
<td>$5,000 or $10,000</td>
</tr>
<tr>
<td>Child Term Life</td>
<td>$2,500 or $5,000</td>
</tr>
</tbody>
</table>

If electing $20k:

<table>
<thead>
<tr>
<th>Age</th>
<th>Cost per check</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 28</td>
<td>$0.46</td>
</tr>
<tr>
<td>28-30</td>
<td>$0.50</td>
</tr>
<tr>
<td>31-33</td>
<td>$0.64</td>
</tr>
<tr>
<td>34-36</td>
<td>$0.74</td>
</tr>
<tr>
<td>37-39</td>
<td>$0.90</td>
</tr>
<tr>
<td>40-42</td>
<td>$1.36</td>
</tr>
<tr>
<td>etc.</td>
<td></td>
</tr>
</tbody>
</table>

[https://hr.wisc.edu/benefits/individual-and-family-group-life-insurance/](https://hr.wisc.edu/benefits/individual-and-family-group-life-insurance/)
Individual & Family (I&F) life

If you enrolled as a new employee, you may choose to increase your coverage during the Annual Benefit Enrollment (ABE) period each fall.

ABE increases are not offered if not already enrolled.

<table>
<thead>
<tr>
<th>Maximum coverage levels</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Employee</strong></td>
</tr>
<tr>
<td><strong>Spouse/Domestic Partner</strong></td>
</tr>
<tr>
<td><strong>Child</strong></td>
</tr>
</tbody>
</table>

https://hr.wisc.edu/benefits/individual-and-family-group-life-insurance/
UW Employee Inc.

The level of Group Term Life insurance coverage you are eligible to elect, and your monthly cost, is determined by your current age. Refer to the chart below for the coverage available and the cost.

<table>
<thead>
<tr>
<th>Age</th>
<th>Benefit Amount</th>
<th>Monthly Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 35</td>
<td>$33,000</td>
<td>$0.75</td>
</tr>
<tr>
<td>35-39</td>
<td>$28,000</td>
<td>0.94</td>
</tr>
<tr>
<td>40-44</td>
<td>$25,000</td>
<td>1.20</td>
</tr>
<tr>
<td>45-49</td>
<td>$18,000</td>
<td>1.50</td>
</tr>
<tr>
<td>50-54</td>
<td>$15,000</td>
<td>1.80</td>
</tr>
<tr>
<td>55-59</td>
<td>$13,000</td>
<td>2.85</td>
</tr>
<tr>
<td>60-64</td>
<td>$12,000</td>
<td>3.26</td>
</tr>
<tr>
<td>65 and over</td>
<td>$7,000</td>
<td>2.25</td>
</tr>
</tbody>
</table>

All rates are subject to change.

Rates increase with age.
## AD&D with Zurich

<table>
<thead>
<tr>
<th>Benefit Amounts</th>
<th>$25,000</th>
<th>$50,000</th>
<th>$100,000</th>
<th>$150,000</th>
<th>$200,000</th>
<th>$250,000</th>
<th>$300,000</th>
<th>$350,000</th>
<th>$400,000</th>
<th>$450,000</th>
<th>$500,000</th>
</tr>
</thead>
<tbody>
<tr>
<td><em><em>Employee Cost</em> (Per Month)</em>*</td>
<td>$.73</td>
<td>$1.45</td>
<td>$2.90</td>
<td>$4.35</td>
<td>$5.80</td>
<td>$7.25</td>
<td>$8.70</td>
<td>$10.15</td>
<td>$11.60</td>
<td>$13.05</td>
<td>$14.50</td>
</tr>
<tr>
<td><em><em>Family Cost</em> (Per Month)</em>*</td>
<td>$1.10</td>
<td>$2.20</td>
<td>$4.40</td>
<td>$6.60</td>
<td>$8.80</td>
<td>$11.00</td>
<td>$13.20</td>
<td>$15.40</td>
<td>$17.60</td>
<td>$19.80</td>
<td>$22.00</td>
</tr>
</tbody>
</table>

### Overview of Coverage and Benefits:

**Coverages:**
- 24/7 Accident Protection
- Optional Dependent Coverage

**Dismemberment Schedule (% Princ. Sum to $500K):**
- Both hands or both feet: 100%
- One hand and one foot: 100%
- One hand or One foot plus sight of one eye: 100%
- Sight of both eyes: 100%
- Speech and hearing: 100%
- Speech or hearing: 50%
- One hand; one foot; or sight of one eye: 50%
- Thumb and index finger same hand: 25%

**Covered Loss of Use of:**
- Four Limbs: 150%
- Three Limbs: 75%
- Two Limbs: 66 2/3%
- One Limb: 50%

**Additional Benefits:**
- Additional Dismemberment Benefit for Children
- Car Jacking Benefit
- Continuation of Insurance Benefit
- Day Care Benefit
- Hearing Aid or Prosthetic Appliance Benefit
- Higher Education Benefit

**Additional Benefits, continued:**
- Home Alteration & Vehicle Modification Benefit
- Natural Disaster Benefit
- Seat Belt/Air Bag Benefit
- Spouse Retraining Benefit
- Surviving Spouse Benefit
- Therapeutic Counseling Benefit
- Travel Assistance Benefit
- Identity Theft (Effective January 1, 2019)
- Critical Burn Benefit (Effective January 1, 2019)
- Rehabilitation Benefit (Effective January 1, 2019)

[https://hr.wisc.edu/benefits/accidental-death-and-dismemberment-insurance/](https://hr.wisc.edu/benefits/accidental-death-and-dismemberment-insurance/)
If you have family coverage and you have:

- Spouse/domestic partner, no dependent child(ren) 60% n/a
- Dependent children, no spouse/domestic partner n/a 20%
- Spouse/domestic partner & dependent child(ren) 15% 15%

Spouse/domestic partner max $300k; dependent child(ren) max $50k
Do you have a visa which requires Medical Evacuation & Repatriation?

Consider enrolling in this plan to satisfy those requirements!

Medical repatriation

Once you have sufficiently recovered from an illness or injury to travel in a non-scheduled commercial air flight or regularly scheduled air flight with special equipment and/or personnel, we will arrange and, if covered by your policy, cover the cost of your transportation to your principal residence or the country where you are currently assigned.

Return of remains

In case of death, Zurich Travel Assist will provide for the local preparation of the body to return the remains for burial, including travel clearances, authorizations and standard shipping container to its country of destination.

https://hr.wisc.edu/benefits/accidental-death-and-dismemberment-insurance/
Life Insurance

When will my coverage begin?

When elected timely as a new hire, your life insurance is effective the first of the month following 30 days from your date of hire.

UIA only: Coverage effective October 1st following hire date assuming eligibility requirements are met.

UW Madison Benefits Services 2019
Life Insurance

Where do I find plan details?

Ask ALEX! - wisconsin.edu/ohrwd/benefits/alex/

hr.wisc.edu > Benefits

- Individual and Family (I&F)
- UW Employees Inc.
- Accidental Death and Dismemberment (AD&D)
Dental Insurance

- Preventive Dental

- Supplemental Dental Insurance
  - Select
  - Select Plus
Dental Insurance

**Uniform Dental**
Available to those enrolled in health insurance under the State of Wisconsin Group Health Insurance Program

**Delta Dental PPO Plus Premier™ - Preventive Plan**
Only available to those not enrolled in health insurance through the program

**Delta Dental PPO™ - Select Plan**

**Delta Dental PPO Plus Premier™ - Select Plus Plan**
Dental Insurance

See Page 12 of Decision Guide

<table>
<thead>
<tr>
<th>In-Network providers (No out-of-network coverage)</th>
<th>Uniform Dental &amp; Preventive Plan</th>
<th>Select Plan</th>
<th>Select Plus Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual deductible</td>
<td>None</td>
<td>$100 / person</td>
<td>$25 / person</td>
</tr>
<tr>
<td>Annual benefit max</td>
<td>$1,000 / person</td>
<td>$1,000 / person</td>
<td>$2,500 / person</td>
</tr>
<tr>
<td>Waiting period</td>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Routine evaluations, dental cleanings, sealants, bitewing and panoramic X-rays, fluoride treatments, pulp vitality tests</td>
<td>100%</td>
<td>No coverage</td>
<td>No coverage</td>
</tr>
<tr>
<td>Fillings</td>
<td>100%</td>
<td>No coverage</td>
<td>No coverage</td>
</tr>
<tr>
<td>Emergency pain relief</td>
<td>80%</td>
<td>No coverage</td>
<td>No coverage</td>
</tr>
<tr>
<td>Periodontal maintenance</td>
<td>100%</td>
<td>No coverage</td>
<td>No coverage</td>
</tr>
<tr>
<td>Crowns, bridges, dentures, implants</td>
<td>No coverage</td>
<td>50%</td>
<td>60%</td>
</tr>
<tr>
<td>Surgical extraction, root canal (endodontics), periodontics (except maintenance), oral surgery</td>
<td>No coverage</td>
<td>50%</td>
<td>80%</td>
</tr>
</tbody>
</table>
### Dental Insurance

<table>
<thead>
<tr>
<th></th>
<th>Uniform Dental &amp; Preventive Plan</th>
<th>Select Plan</th>
<th>Select Plus Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orthodontics coverage</td>
<td>50% (Under age 19)</td>
<td>No coverage</td>
<td>50% (Any age)</td>
</tr>
<tr>
<td>Orthodontics lifetime maximum</td>
<td>$1,500</td>
<td>No coverage</td>
<td>$1,500</td>
</tr>
</tbody>
</table>

**Plan Administrator**

[Delta Dental](https://deltadentalwi.com/state-of-wi)

1-844-337-8383

deltadentalwi.com/state-of-wi

All plans are offered through Delta Dental.
Dental Insurance

DELTA DENTAL NETWORKS

Delta Dental PPO

Delta Dental PPO Dentists
(Accept reduced fees – saving you the most money)

Select

Delta Dental Premier

Delta Dental Premier Dentists
(Accept reduced fees – but not as low as PPO dentists)

*The Delta Dental Premier Plan requires you to see a Delta Dental PPO dentist
Dental Insurance

DELTA DENTAL NETWORKS

Delta Dental PPO + Delta Dental Premier

**Delta Dental PPO Dentists**
(Accept reduced fees – saving you the most money)

**Delta Dental Premier Dentists**
(Accept reduced fees – but not as low as PPO dentists)

*The Delta Dental PPO – Select Plan requires you to see a Delta Dental PPO dentist*
# Dental Insurance Premiums 2020

<table>
<thead>
<tr>
<th></th>
<th>Preventive Plan</th>
<th>Select Plan</th>
<th>Select Plus Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$30.20</td>
<td>$9.28</td>
<td>$16.82</td>
</tr>
<tr>
<td>Individual + Child(ren)</td>
<td>---</td>
<td>$12.52</td>
<td>$31.12</td>
</tr>
<tr>
<td>Individual + Spouse</td>
<td>---</td>
<td>$18.56</td>
<td>$33.64</td>
</tr>
<tr>
<td>Family</td>
<td>$75.50</td>
<td>$22.28</td>
<td>$51.30</td>
</tr>
</tbody>
</table>
VSP Vision

Exams

Materials (glasses or contact)
# VSP Vision

## What services are covered?

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Description</th>
<th>Copay</th>
<th>Frequency</th>
</tr>
</thead>
</table>
| **WellVision Exam**   | • Focuses on your eyes and overall wellness  
• Available twice every calendar year for dependent children                                                                                                                | $15    | Every calendar year|
| **Prescription Glasses** |                                                                                                                                                                                                                         | $25    | See frame and lenses|
| **Frame**             | • $150 allowance for a wide selection of frames  
• $200 allowance for featured frame brands  
• 20% savings on the amount over your allowance  
• $80 Costco® frame allowance  
• Available every calendar year for dependent children                                                                                                                               | Included in Prescription Glasses | Every other calendar year|
| **Lenses**            | • Single vision, lined bifocal, and lined trifocal lenses  
• Polycarbonate lenses for dependent children                                                                                                                                                | Included in Prescription Glasses | Every calendar year|
| **Lens Enhancements** | • Scratch Resistant Coating  
• UV Protection  
• Standard progressive lenses  
• Premium progressive lenses  
• Custom progressive lenses  
• Average savings of 20-25% on other lens enhancements                                                                                                                                     | $0     | $0  
$0  
$95 - $105  
$150 - $175 | Every calendar year|
| **Contacts (instead of glasses)** | • $150 allowance for contacts; copay does not apply  
• Contact lens exam (fitting and evaluation)                                                                                                                                 | Up to $40 | Every calendar year|
| **Primary Eyecare**   | • Treatment and diagnosis of eye conditions like pink eye, vision loss and monitoring of cataracts, glaucoma and diabetic retinopathy. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details.                          | $20    | As needed          |

[www.wisconsin.edu/ohrwd/benefits/download/med/vision/broch.pdf](http://www.wisconsin.edu/ohrwd/benefits/download/med/vision/broch.pdf)
# VSP Vision

## What services are covered?

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Description</th>
<th>Copay</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Extra Savings</strong></td>
<td><strong>Glasses and Sunglasses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Extra $20 to spend on featured frame brands. Go to vsp.com/specialoffers for details.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Retinal Screening</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• No more than a $39 copay on routine retinal screening as an enhancement to a WellVision Exam</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Laser Vision Correction</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
VSP Vision

Which vision providers may I visit?

Search for a VSP Choice provider:

uwsystem.vspforme.com
### VSP Vision

#### Monthly Premium:

<table>
<thead>
<tr>
<th></th>
<th>Individual</th>
<th>Individual + Spouse</th>
<th>Individual + Child(ren)</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$6.38</td>
<td>$12.76</td>
<td>$14.38</td>
<td>$22.98</td>
</tr>
</tbody>
</table>

UW Madison Benefits Services 2019
I enrolled. Do I get a VSP card?

VSP doesn’t mail cards. Your provider will confirm benefits online or via phone using your UW employee ID number (located on your earnings statements) with a lead ‘0.’

Example: If your UW Employee ID were 00987654
Your VSP ID would be 000987654

You can log into VSP and print a card:
http://uwsystem.vspforme.com
Supplemental Retirement Plans

Tax Sheltered Annuity (TSA) 457b
Wisconsin Deferred Compensation (WDC) 457b

N/A if in non-service appointment (Fellows, Scholars, Graduate Interns/Trainees, & Post-Doctoral Fellows/Trainees)
## TSA 403(b) and WDC 457(b)

**Tax Sheltered Annuities 403(b)**
- Pre- and Post-Tax options
- 2020 Max contribution of $19,500
- No employer match
- Additional $6,500 if age 50+
- May be allowed $3,000 additional catch-up if 15+ years UW service
- Minimum of $8 or $20 per check
- No admin fee in 2020
- Loan services available
- No hardship withdrawals
- Early-withdrawal penalty

**Wisconsin Deferred Comp 457(b)**
- Pre- and Post-Tax options
- 2020 Max contribution of $19,500
- No employer match
- Additional $6,500 if age 50+
- May be allowed $39,000 catch-up if within 3 yrs normal retirement age
- No minimum contribution
- Admin fees if account > $5,000
- No loans available
- Hardship withdrawals possible
- No penalty for early-withdrawal
Tax Sheltered Annuity 403(b)

1. Choose a provider(s) to invest with
2. Set-up accounts with your provider(s); see Quick Guide for instructions
3. Complete Salary Reduction Agreement and submit to UW payroll/benefits

Tax Sheltered Annuity 403(b)

Fees:

All funds are no-load: there are no sales commissions or broker fees. There is no University fee. The UW TSA providers have no annual fees.

https://www.wisconsin.edu/ohrwd/benefits/ret/tsa/
Enroll today!

Go to www.wdc457.org

- Click on “REGISTER” button
- Click on “I have a plan enrollment code”
- Enter Group ID: **98971-01**
- Enter Plan Enrollment Code: **n2HuviZQ**
- Plan Enrollment Code Expiration Date: **February 1, 2020**

Learn More:

https://wdc457.empower-retirement.com

Need Help?
To speak with a representative regarding your account, contact us Monday - Friday between 7 a.m. - 9 p.m. Central time, and Saturdays between 8 a.m. - 4:30 p.m. Central time.

1-877-457-9327
WI Deferred Compensation 457(b)

Fee scale:

<table>
<thead>
<tr>
<th>Participant Account Balance</th>
<th>2020 Monthly Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1 - $5,000</td>
<td>$0</td>
</tr>
<tr>
<td>$5,001 - $25,000</td>
<td>$1</td>
</tr>
<tr>
<td>$25,001 - $50,000</td>
<td>$3.25</td>
</tr>
<tr>
<td>$50,001 - $100,000</td>
<td>$6.50</td>
</tr>
<tr>
<td>$100,001 - $150,000</td>
<td>$8.50</td>
</tr>
<tr>
<td>$150,001 - $250,000</td>
<td>$11.75</td>
</tr>
<tr>
<td>Over $250,000</td>
<td>$17.50</td>
</tr>
</tbody>
</table>

https://docs.empower-retirement.com/EE/WisconsinWR/DOCS/Plan-Highlights.pdf
Flexible Spending Accounts (FSA)

Health Flexible Spending Account (FSA)
Dependent [Day] Care FSA

N/A if in non-service appointment (Fellows, Scholars, Graduate Interns/Trainees, & Post-Doctoral Fellows/Trainees)
Flex Spending Accounts

**What is an FSA?**

An FSA allows you to send money from your paychecks into an account that you then use to pay for certain health or dependent care expenses throughout your plan year – *without* that money counting as taxable income.

For example (assuming a 25% tax):

**Without Pretax Account**

- $100 earned
- $25 tax withheld
- $75 to spend on anything

**With Pretax Account**

- $100 earned and sent to TASC
- $0 (i.e., not taxed)
- $100 to spend on qualifying items
Flex Spending Accounts

*How does this work?*

Your timely enrollment as a new employee means
- your FSA is effective the 1st of the month on or following your date of hire, and
- you can incur **eligible expenses** through 12/31/20
FSA – Examples of Eligible Expenses

Health (or Medical) FSA
$2,700 maximum election

- bandages
- immunizations
- sunscreen
- thermometers
- lab work
- doctor visits
- first aid
FSA – Examples of Eligible Expenses

Dependent Care
$5,000 maximum election per household

- elder care
- before / after-school care
- senior daycare
- summer camp
- babysitter
- day care and preschool
- au pair
Flex Spending Accounts

How does this work?

• Your 2020 election is divided between future benefits-eligible checks
  • If biweekly: 24 checks (“A” and “B” checks, not “C”)
  • If 9-month: 9 checks (not taken from summer session)
  • If 12-month: 12 checks

• Active participants can use the plan’s debit card or submit claims/receipts for reimbursement of eligible expenses incurred before end of day on 12/31/2020

• You must enroll every year during annual benefit enrollment (ABE) if you want to contribute into the following year’s FSA
Flex Spending Accounts

**What should I consider if I’m interested?**

- Reduced tax liability for the year. Ask ALEX
- Health FSAs are prefunded based on your annual pledge amount

**Use it or Lose it**
- Incur expenses from your effective date (e.g., 1st of the month following eligible hire) until 12/31/2020 – no grace period.
- Health & LP FSAs allow maximum $500 rollover
- No rollover for unspent Dependent Daycare FSA
Flex Spending Accounts

Learn more!
www.connectyourcare.com/ETF

FSA Savings Calculator
How much can you save?

Eligible Expenses
See just how useful an FSA can be.
(Limited Purpose FSAs only cover dental and vision).

LEARN MORE
Free and Discounted Resources for Employees

(not all are relevant to students & non-service appointments)
LinkedIn Learning

it.wisc.edu/services/training-for-faculty-staff/

1,000+ courses including:

- Google Analytics
- Design a logo
- Become a video editor
- Facilitating Collaboration
- Improve your Microsoft Excel skills
- And more!
Edvest – 529 College Savings Plan

• Open with as little as $25

• Make additional contributions when desired ($25 minimum)

• WI state income tax deferred
  • $3,200 per beneficiary / tax year

• Account earnings free from federal and WI state income tax
  • If withdrawals are for qualified education expenses

www.edvest.com
Misc. Resources for UW-Madison Employees

- Transportation - transportation.wisc.edu
  - Subsidized Madison Metro bus passes ($48/year for unlimited rides)
  - Emergency taxi vouchers
  - After tax parking deductions via payroll if campus ramp permit
- Commuter Solutions

library.wisc.edu
Misc. Resources
for UW-Madison Employees

• Save 5% on food purchased using Wiscard ID!
  ❖ Babcock Dairy Store
  ❖ WI Union dining
  ❖ University Housing dining locations

wiscard.wisc.edu
Misc. Resources for UW-Madison Employees

uwell.wisc.edu

Campus wellness initiative

- Career
- Emotional
- Environmental
- Financial
- Physical
- Social
- Spiritual

EMPLOYEE WELLNESS

Interested in starting a wellness committee in your department? Contact the Employee Wellness Leader at nicole.youngberg@wisc.edu

LEARN MORE
Misc. Resources for UW-Madison Employees

Meditation Classes
www.uhs.wisc.edu/wellness/meditation

• Tues, 12pm – 1pm
  21 N Park St Room 7045
  (academic year only)

• Weds 12pm – 1pm
  Union South (see TITU)
JOIN THE MOVEMENT.

As a UW-Madison faculty or staff member, you are eligible for an Affiliate Membership with Rec Sports, which includes:

• Unlimited access to four conveniently located facilities around campus
• Cardio & strength training equipment, pool, ice rink, gyms, an indoor track, tennis courts, and more
• Programs like group fitness, personal training, intramural sports, and lessons

Your first week is free. All potential members can use our facilities and attend Group Fitness classes for free before purchasing a membership.

Let us show you around. Just interested in learning more? Our Member Services staff can meet with you to show you around the facility, answer questions, and help you set up your free trial week.

To learn more, visit recsports.wisc.edu.
Wisconsin Union Membership

union.wisc.edu/membership

Wisconsin Union offers you a special discounted membership rate, with two payment options:

1. A Lifetime membership - a single payment of $200
2. Annual membership – purchase at the current rate, renew it, and accrue it! Your Annual membership purchases will accrue toward conversion to a Lifetime membership. Conversion happens when you reach $220 in payments.
Counseling Psychology Training Clinic

(608) 265-8779
eptc.education.wisc.edu/cptc

• Confidential counseling services for individuals, couples, and families

• Fees on sliding scale based on income

• Weekday afternoon and evening sessions available

• Clinic determines appropriateness/availability of services

• Closes for 1-2 weeks during holidays and in the summer
EAO and UW Ombuds

Employee Assistance Office

(608) 263-2987
eao.wisc.edu

- Licensed clinical social workers and counselors
- Counseling appointments at Lowell Center
- Coaching for supervisory staff
- Responds to crisis and traumatic events
- Group facilitation available

UW Ombuds Office

(608) 265-9992 (leave message)
ombuds.wisc.edu

- UW retirees with extensive campus experience
- Work environment assistance via phone or in-person
- Advocates for fair, equitable processes – not on behalf of individuals
- Informal resource

- Free and Confidential
- Use work time for appointments

OMBUDS.WISC.EDU/FAQS/

UW Madison Benefits Services 2019
Employee Assistance Services

Employee Assistance Office
(608) 263-2987
eao.wisc.edu

- Individual, group and management consultation
- 1-5 sessions for personal counseling and consultation
- Conveniently located on campus for in person meetings
- Familiar with campus policies and processes
- Crisis response and grief services

Free and Confidential

Life Matters
(800) 634-6433
mylifematters.com
password: Bucky1

- 24/7 Access
- Diversity of counselor expertise
- Sessions by phone, text, chat, video and in person
- Financial, legal and convenience services
- Training and brown bag seminars
UW Ombuds

- Free and Confidential
- Use work time for appointments

(608) 265-9992 (leave message)
ombuds.wisc.edu

- UW retirees with extensive campus experience
- Work environment assistance via phone or in-person
- Advocates for fair, equitable processes – not on behalf of individuals
- Informal resource
benefits@ohr.wisc.edu

21 N Park St, Suite 5101
hr.wisc.edu/benefits

Madison Benefits Services
OFFICE OF HUMAN RESOURCES
UNIVERSITY OF WISCONSIN–MADISON