

Welcome

to the University of Wisconsin–Madison



New Employee Benefits Summary | 2020

For employees covered by the Wisconsin Retirement System (WRS)
with appointment start dates between December 2, 2019–December 1, 2020

- University Staff
- Academic Staff
- Faculty
- Limited Appointees



Office of Human Resources
21 N. Park Street, Suite 5101
Madison, Wisconsin 53715-1218

Walk-ins: 9 am–3 pm
(first-come, first-served)



INFORMATION IN DIFFERENT LANGUAGES

ENGLISH

If you have any questions about this information, please contact us at benefits@ohr.wisc.edu or (608) 262-5650 to communicate in English. If you would like to request translation or interpretation services, please call Cultural Linguistic Services (Office of Human Resources) at (608) 265-2257. Thank you.

ESPAÑOL / SPANISH

Si quiere solicitar servicios de traducción o interpretación en español por favor llame a la Oficina de Servicios Lingüísticos y Culturales (Oficina de Recursos Humanos) al (608) 265-1489 o al (608) 265-0838. Gracias.

HMOOB / HMONG

Yog koj xav tau kev pab txhais ntawv los lus Hmoob, thov hu Kev Pa Cuam Txhais Lus (Chaw Pab Neeg Ua Haujlwm) rau (608) 263-2217. Ua Tsaug.

བོད་ཡིག / TIBETAN

ཁྱེད་ལ་བོད་སྐད་ཐོག་སྐད་སྒྱུར་དང་ཡིག་སྒྱུར་གྱི་འོག་ས་ལམ་དགོས་ཚེ། རིག་གཞུང་སྐད་ཡིག་ཞབས་ཞུ་ཁང་ (ལས་བྱེད་བདག་གཉེར་ལས་ཁུངས་) ལ་ཁ་པར་
(608) 890-2545 ཐོག་འབྲེལ་བ་གནང་རོགས་ཞུ། ལུགས་རྗེ་ཚེ།

中文 / CHINESE

如果您需要汉语笔译或口译服务，请联系文化语言服务中心（人力资源办公室），电话（608）890-2628。谢谢！



WISCONSIN

UNIVERSITY OF WISCONSIN-MADISON

Welcome to the University of Wisconsin-Madison!

This packet includes information regarding the benefit plans UW-Madison offers you and your family. Whether you are interested in health, dental, vision, or life insurance benefits, we are confident you will find plans that suit your needs. The University contributes toward the cost of several benefit plans adding to your total compensation.

Selecting your benefits is an important process. We encourage you to read this information promptly and thoroughly as **some plans require enrollment within the first 30 days of employment**, or of becoming a benefits-eligible employee.

Visit our website for more information: hr.wisc.edu/benefits

If you have questions about your benefits, please contact UW-Madison Benefits Services at benefits@ohr.wisc.edu or 608-262-5650.

Once again, welcome to UW-Madison.

On Wisconsin!





WISCONSIN
UNIVERSITY OF WISCONSIN-MADISON

Benefits 101 Presentation for New Employees

For employees covered by the Wisconsin Retirement System (WRS)

Presented by: UW-Madison Office of Human Resources, Benefit Services

Welcome to the University of Wisconsin-Madison!

If you are a new employee, or an existing employee who is newly covered by the Wisconsin Retirement System, register for this session within your first 30 days!



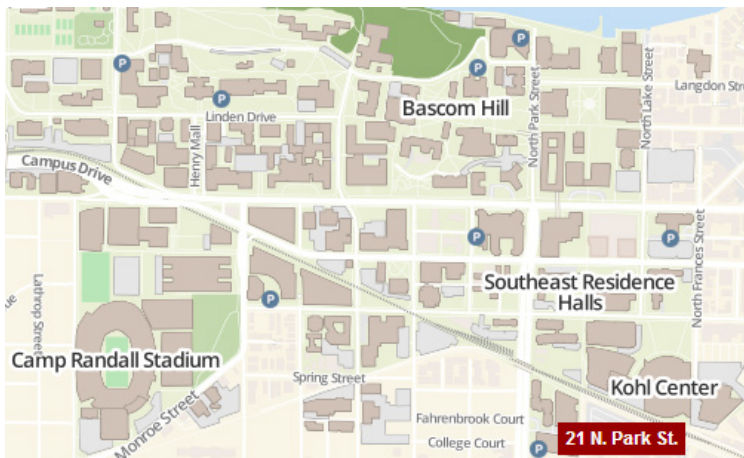
Register at hr.wisc.edu/benefits-101

Features

- An overview of your extensive UW benefits package; your choices and options
- An explanation of the information and forms on the benefits website, hr.wisc.edu/benefits
- An introduction to the mandatory Wisconsin Retirement System and optional retirement programs
- A question and answer session with a benefits expert
- You will receive a personalized worksheet with your enrollment deadlines

Locations

Most Benefits 101 sessions are held at 21 N. Park Street. Some sessions are held at Union South or other campus locations. Be sure to check the location of the session for which you have registered.



UW-Madison, southeast overview map



21 N. Park Street, southeast campus area

Visit hr.wisc.edu/benefits for complete comprehensive benefits information.

If you have questions, contact benefits@ohr.wisc.edu.

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Every effort has been made to ensure the information in this benefit summary is true and accurate. If there is any discrepancy between this summary and the official plan documents, the language in the official documents shall be considered accurate.

To enroll and participate in the benefit plans outlined in this document, you must meet all eligibility requirements as defined by the Wisconsin Retirement System, Wisconsin State Statutes, and University personnel rules.

Coverage Deadlines and Effective Date of Coverage

Most benefit plans have a 30 day enrollment period from the start date of your appointment. Some plans have additional requirements.

If you do not enroll during your initial enrollment opportunity, you may have an opportunity to enroll during an open enrollment event (usually held in the fall), or if you experience a life event such as marriage, domestic partnership, birth or adoption, or loss of other coverage. You will typically have 30 days from a life event to make changes to your benefits. Contact your department HR Payroll & Benefits contact as soon as a life event occurs. Coverage effective dates vary by plan. For some plans you may also have an opportunity to enroll through evidence of insurability.

New Employee Resources

The resources listed below will help you review your benefits options and make informed choices. Please use these resources that have been designed for you.

- **Benefits Website**

For detailed information about the benefit plans included in this summary, visit the UW–Madison Benefits Services website: hr.wisc.edu/benefits

- **Benefits 101: Benefits Presentation for New Employees**

If you are a new employee, or an existing employee who is newly covered by WRS, register for Benefits 101 within your first 30 days: hr.wisc.edu/benefits-101

- **Ask ALEX: Your Personalized Online Benefits Counselor**

ALEX is an online resource to help you better understand the comprehensive benefits offered to UW–Madison employees. ALEX will ask you a series of questions to walk you through your benefits options and suggests plans based on your answers. Before you make your benefits elections, let ALEX explain your options.

Get started: myalex.com/uwssystem/2020

The Ask ALEX tool doesn't answer everything. For additional information, contact benefits@ohr.wisc.edu with any questions prior to enrolling in a new plan.

- **Benefits Walkthrough**

The Benefits Walkthrough is an online tool designed to assist you in determining your benefit plan options and estimating your premiums. The Walkthrough will produce a worksheet summarizing your selections, but it will not enroll you in the benefits plans.

Start the Walkthrough: uwservice.wisconsin.edu/ebenefits

See your department HR Payroll & Benefits contact for help with the following, or visit the listed website:

- **Pay schedules:** hr.wisc.edu/pay
- **Leave benefits:** hr.wisc.edu/benefits/leave/paid-leave
- **Transportation and parking:** transportation.wisc.edu

Completing Benefit Applications

Complete your benefit enrollments using Self Service (eBenefits) through MyUW. Some benefit enrollments may require a paper application or additional documentation. Work with your department HR Payroll & Benefits contact for assistance completing your timely enrollment elections.

In addition to your benefit applications, there are many essential forms that you must complete as a new employee, such as the Employee Withholding Form W-4 and the Direct Deposit Authorization Form. If you have not yet completed these forms, visit hr.wisc.edu/new-employees or see your department HR Payroll & Benefits contact.

Wisconsin Retirement System

Plan Description

Wisconsin Retirement System (WRS) participation is automatic for all eligible employees, with coverage beginning on the first day an employee is eligible. Your retirement income will be based on your years of service, your age at retirement, and the average of your highest three years of earnings or based on the total cash value of your account, whichever is greater. WRS also provides death, permanent disability, and separation benefits.

For detailed information about the WRS: hr.wisc.edu/benefits/wisconsin-retirement-system

There is a five year vesting requirement if you were hired on or after July 1, 2011 and have no WRS credible service prior to July 1, 2011. You are immediately vested if you have WRS service prior to July 1, 2011.

WRS consists of a Core Fund and a Variable Fund. By default, 100% of retirement contributions are deposited in the Core Fund, which is a diversified fund with investments in stocks, bonds and more. If you elect to participate in the Variable Fund, 50% of the required contributions and additional contributions made after your election will be deposited in the Variable Fund. The Variable Fund is invested in stocks only. Unlike the Core Fund, there is no limit on Variable Fund annuity decreases.

Each year, around mid-April, you will receive a Statement of Benefits from the WI Department of Employee Trust Funds (ETF), which contains important WRS account information that will eventually be used in benefit calculations.

Available Coverage

WRS participation is automatic for all eligible employees.

Employee/Employer Contribution

The required 2020 contribution for most employees is 13.5% of gross earnings. Employees are required to contribute 6.75% of their salary to their WRS account. The University contributes 6.75% of your salary to your WRS account. WRS contributions are subject to IRS limits - both you and the University pay WRS contributions on the first \$285,000 in calendar year earnings. The limit for the 2019–2020 fiscal year is \$282,500.

Contributions are taken on a pre-tax basis for federal and state income tax purposes. Contribution rates are set on an annual basis by ETF.

State Group Health Insurance

Plan Description

The State Group Health Insurance plan provides comprehensive medical coverage, a [Well Wisconsin \\$150 incentive through StayWell](#), and prescription coverage administered through Navitus. All health plans have an option to include dental coverage for diagnostic and preventive services. See the Dental page for coverage information.

You can choose between an IYC Health Plan (formerly known as Coinsurance Uniform Benefit plan) or a High Deductible Health Plan (HDHP). The HDHP offers lower monthly premiums in exchange for a higher deductible. The annual deductible (\$1,500 single / \$3,000 family) must be met before any medical, dental or prescription drug costs are paid for, with the exception of preventive services. Each health plan offers a HDHP option.

If you elect the HDHP option, you are required to open a Health Savings Account (HSA) that helps pay for qualified medical expenses. If you are covered by another health insurance plan, including Medicare or Tricare, or participate in a Flexible Spending Account (including coverage by a spouse's FSA), you are not eligible for a HDHP.

For detailed information regarding the State Group Health Insurance program see the *It's Your Choice Guide* available at etf.wi.gov/its-your-choice/2020/20et-2107/direct. To review a hard copy, contact your department HR Payroll & Benefits contact.

Opt-Out Incentive

You may be eligible to receive up to \$2,000 (pro-rated for the number of months coverage is waived) if you opt out of State Group Health Insurance coverage. To opt out, you must submit your election to opt out within 30 days of your eligibility date. Craft workers are not eligible for the incentive.

Available Coverage

Coverage is available for the employee, employee spouse and dependents.

Employee/Employer Contribution

State Group Health Insurance premiums are paid through a combination of employer and employee contributions. University Staff who elect coverage to begin immediately with their appointment start date must pay both the employer and employee contribution for the first two months of coverage.

2020 Premiums for WRS Covered Employees

State Group Health Insurance Plans	Medical With Dental		Medical Without Dental	
	Single	Family	Single	Family
Health Plan	\$93.00	\$231.00	\$89.00	\$222.00
HDHP	\$35.00	\$87.00	\$31.00	\$78.00
Access Health Plan	\$273.00	\$679.00	\$269.00	\$670.00
Access HDHP	\$215.00	\$535.00	\$211.00	\$526.00
Access Health Plan (Tier 2*)	\$147.00	\$367.00	\$143.00	\$358.00
Access HDHP (Tier 2*)	\$89.00	\$223.00	\$85.00	\$214.00

**required to work out of state*

NOTE: *Employees working below 50% time (and LTEs with one appointment) must pay 50% of the entire premium for their health plan.*

Comparison of Benefit Options

The charts on the following pages are designed to compare Health Plans, High Deductible Health Plans, and the Access Plan. The outlines are not intended to be a complete description of coverage. The Access Plan details are located in the Access Plan (ET-2112) benefits booklet.

Federally required Summaries of Benefits and Coverage (SBCs) and the Uniform Glossary are available through etf.wi.gov/its-your-choice/2020/state-employee-retiree-health-plan/health-insurance-employees-cobra-and-retirees-without-medicare/summary-benefits-and-coverage. If you need printed copies sent to you, please call the Department of Employee Trust Funds (ETF) at 1-877-533-5020 to let them know which plan's Summary of Benefits and Coverage you want.

Enrollment and Effective Date of Coverage

You must apply within 30 days of your appointment start date.

Coverage is effective the first of the month on or following your appointment, as long as your application is received within 30 days.

Examples:

- If you are hired on January 1, and your application is received by January 31, coverage is effective on January 1.
- If you are hired on any day of the month after the 1st, and your application is received within 30 days, coverage is effective on the first of the month following your date of hire.

University Staff must complete two full months of WRS service in order to receive employer contribution toward health insurance premiums. You must apply within 30 days of your appointment start date even if you elect to delay your effective date of coverage.

Any employee not electing to enroll in State Group Health insurance coverage must submit an application to decline coverage.

2020 State - Comparison of Benefits Options

Benefit	Health Plan	Access Plan	
		In-Network	Out-of-Network
Annual Medical Deductible	<p>\$250 individual / \$500 family</p> <p>Deductible applies to annual OOP</p> <p>After an individual within a family plan meets the \$250 deductible, coinsurance will apply to covered medical services except for office visit copayments</p> <p>Medical deductible does not apply to prescription drugs</p>	<p>\$250 individual / \$500 family</p> <p>Deductible applies to annual OOP</p> <p>After an individual within a family plan meets the \$250 deductible, coinsurance will apply to covered medical services except for office visit copayments</p> <p>Medical deductible does not apply to prescription drugs</p>	<p>\$500 individual / \$1,000 family</p> <p>Deductible applies to annual OOP</p> <p>After an individual within a family plan meets the \$500 deductible, coinsurance will apply to covered medical services except for office visit copayments</p> <p>Medical deductible does not apply to prescription drugs</p>
<p>Primary Care Physician Office Visit Copayment includes:</p> <ul style="list-style-type: none"> • Internist • General Physician • Family Practitioner • Pediatrician • Gynecologist / Obstetrician • Nurse Practitioner • Physician Assistant • Chiropractor • Physical / Occupational / Speech Therapy in an office visit setting 	<p>\$15 per visit</p> <p>Office visit copayments are not subject to the deductible, but do apply to the annual OOP</p>	<p>\$15 per visit</p> <p>Office visit copayments are not subject to the deductible, but do apply to the annual OOP</p>	<p>After deductible: 30% member cost up to the annual OOP</p>
<p>Specialty Office Visit Copayment includes:</p> <ul style="list-style-type: none"> • Specialty Providers • Urgent Care • Vision Exam in an office visit setting 	<p>\$25 per visit</p> <p>Office visit copayments are not subject to the deductible, but do apply to the annual OOP</p>	<p>\$25 per visit</p> <p>Office visit copayments are not subject to the deductible, but do apply to the annual OOP</p>	<p>After deductible: 30% member cost up to the annual OOP</p>

Annual Medical Coinsurance	After deductible: 10% member cost Applies to medical services except for office visits Coinsurance applies to the annual OOPL	After deductible: 10% member cost Applies to medical services except for office visits Coinsurance applies to the annual OOPL	After deductible: 30% member cost Applies to medical services Coinsurance applies to the annual OOPL
Annual Medical Out-of-Pocket Limit (OOPL)	\$1,250 individual / \$2,500 family	\$1,250 individual / \$2,500 family	\$2,000 individual / \$4,000 family
Routine, preventive services as required by federal law	Plan pays 100%	Plan pays 100%	Subject to the deductible, copayments and/or coinsurance
Illness/injury related services beyond the office visit copayment (if applicable)	After deductible: 10% member cost up to OOPL	After deductible: 10% member cost up to the annual OOPL	After deductible: 30% member cost up to the annual OOPL
Emergency Room Copayment (Waived if admitted as an inpatient directly from the emergency room or for observation for 24 hours or longer.)	\$75 copayment per visit, then the deductible and coinsurance applies to services beyond the copayment up to the OOPL	\$75 copayment per visit, then the deductible and coinsurance applies to services beyond the copayment up to the OOPL	\$75 copayment per visit, then in-network deductible and coinsurance applies to services beyond the copayment up to the OOPL

2020 State - Comparison of Benefits Options for Prescription Drugs

Drug Level	Health Plan	Access Plan	
		In-Network	Out-of-Network
Deductible			
	None	None	
Copayment / Coinsurance			
Level 1	\$5	\$5	
Level 2	20% (\$50 max)	20% (\$50 max)	
Level 3	If you have a medical need and cannot take the generic equivalent, your M.D. must submit an FDA MedWatch form to Navitus for the prescription. With the form, you pay a 40% coinsurance (with a limit of \$150). Without the form, you pay 40% <u>plus</u> the cost difference between the brand name drug and its generic equivalent. Contact Navitus for details.	If you have a medical need and cannot take the generic equivalent, your M.D. must submit an FDA MedWatch form to Navitus for the prescription. With the form, you pay a 40% coinsurance (with a limit of \$150). Without the form, you pay 40% <u>plus</u> the cost difference between the brand name drug and its generic equivalent. Contact Navitus for details.	
Level 4 Preferred	\$50 Must fill at Lumicera or UW Health Specialty Pharmacy	\$50 Must fill at Lumicera or UW Health Specialty Pharmacy	
Out-of-Pocket Limits			
Levels 1 & 2	\$600 / \$1,200	\$600 / \$1,200	
Level 3	\$6,850 / \$13,700	\$6,850 / \$13,700	Must use In-Network pharmacy
Level 4	\$1,200 / \$2,400	\$1,200 / \$2,400	

2020 State - Comparison of Benefits Options

Benefit	HDHP	Access HDHP	
		In-Network	Out-of-Network
Annual Medical Deductible	<p>\$1,500 individual / \$3,000 family</p> <p>The deductible must be met before coverage begins; for family coverage, the full family deductible must be met</p> <p>The deductible includes prescription drugs and applies to the annual OOPL</p>	<p>\$1,500 individual / \$3,000 family</p> <p>The deductible must be met before coverage begins; for family coverage, the full family deductible must be met</p> <p>The deductible does apply to prescription drugs and also to the annual OOPL</p>	<p>\$2,000 individual / \$4,000 family</p> <p>The deductible must be met before coverage begins; for family coverage, the full family deductible must be met</p> <p>The deductible includes prescription drugs and applies to OOPL</p>
<p>Primary Care Physician Office Visit Copayment includes:</p> <ul style="list-style-type: none"> • Internist • General Physician • Family Practitioner • Pediatrician • Gynecologist / Obstetrician • Nurse Practitioner • Physician Assistant • Chiropractor • Physical / Occupational / Speech Therapy in an office visit setting 	<p>After deductible: \$15 per visit</p> <p>Office visit copayments apply to the annual OOPL</p>	<p>After deductible: \$15 per visit</p> <p>Office visit copayments do apply to the annual OOPL</p>	<p>After deductible: 30% member cost up to the annual OOPL</p>
<p>Specialty Office Visit Copayment includes:</p> <ul style="list-style-type: none"> • Specialty Providers • Urgent Care • Vision Exam in an office visit setting 	<p>After deductible: \$25 per visit</p> <p>Office visit copayments apply to the annual OOPL</p>	<p>After deductible: \$25 per visit</p> <p>Office visit copayments do apply to the annual OOPL</p>	<p>After deductible: 30% member cost up to the annual OOPL</p>

Annual Medical Coinsurance	After deductible: 10% member cost Applies to medical services except for office visits Coinsurance applies to the annual OOPL	After deductible: 10% member cost Applies to medical services except for office visits Coinsurance applies to the annual OOPL	After deductible: 30% member cost Applies to medical services except for office visits Coinsurance applies to the annual OOPL
Annual Medical Out-of-Pocket Limit (OOPL)	\$2,500 individual / \$5,000 family	\$2,500 individual / \$5,000 family	\$3,800 individual / \$7,600 family
Routine, preventive services as required by federal law	Plan pays 100%	Plan pays 100%	Subject to the deductible and coinsurance
Illness/injury related services beyond the office visit copayment (if applicable)	After deductible: 10% member cost up to OOPL	After deductible: 10% member cost up to the annual OOPL	After deductible: 30% member cost up to the annual OOPL
Emergency Room Copayment (Waived if admitted as an inpatient directly from the emergency room or for observation for 24 hours or longer.)	After deductible: \$75 copayment per visit, then coinsurance applies to services beyond the copayment up to the OOPL	After deductible: \$75 copayment per visit, then the deductible and coinsurance applies to services beyond the copayment up to the OOPL	After deductible: \$75 copayment per visit, then in-network deductible and coinsurance applies to services beyond the copayment up to the OOPL

2020 State - Comparison of Benefits Options for Prescription Drugs

Drug Level	Health Plan	Access Plan	
		In-Network	Out-of-Network
Deductible			
	None	None	
Copayment / Coinsurance			
Level 1	\$5	\$5	
Level 2	20% (\$50 max)	20% (\$50 max)	
Level 3	If you have a medical need and cannot take the generic equivalent, your M.D. must submit an FDA MedWatch form to Navitus for the prescription. With the form, you pay a 40% coinsurance (with a limit of \$150). Without the form, you pay 40% <u>plus</u> the cost difference between the brand name drug and its generic equivalent. Contact Navitus for details.	If you have a medical need and cannot take the generic equivalent, your M.D. must submit an FDA MedWatch form to Navitus for the prescription. With the form, you pay a 40% coinsurance (with a limit of \$150). Without the form, you pay 40% <u>plus</u> the cost difference between the brand name drug and its generic equivalent. Contact Navitus for details.	
Level 4 Preferred	\$50 Must fill at Lumicera or UW Health Specialty Pharmacy	\$50 Must fill at Lumicera or UW Health Specialty Pharmacy	
Out-of-Pocket Limits			
Levels 1 & 2	\$600 / \$1,200	\$600 / \$1,200	
Level 3	\$6,850 / \$13,700	\$6,850 / \$13,700	Must use In-Network pharmacy
Level 4	\$1,200 / \$2,400	\$1,200 / \$2,400	

Dental and Vision Plans

UW-Madison offers dental and vision plans that provide coverage beyond the Uniform Dental and vision exam that may be covered under your State Group Health Insurance plan. You are eligible for the dental and vision plans if you are eligible for State Group Health Insurance. The Uniform Dental option listed below is only available through your State Group Health Insurance plan.

Delta Dental

Monthly Cost (Premium)

The Uniform Dental premium is added to your health insurance premium. Preventive Plan, Select Plan and Select Plus Plan are separate deductions.

	Uniform Dental	Preventive Plan	Select Plan	Select Plus Plan
Individual	\$4	\$30.20	\$9.28	\$16.82
Individual + Child(ren)	---	---	\$12.52	\$31.12
Individual + Spouse	---	---	\$18.56	\$33.64
Family	\$9	\$75.50	\$22.28	\$51.30

What is Covered

	Uniform Dental & Preventive Plan	Select Plan	Select Plus Plan
In-Network providers (No out-of-network coverage)	Delta Dental PPO & Premier providers	Delta Dental PPO	Delta Dental PPO & Premier providers
Annual deductible	None	\$100 / person	\$25 / person
Annual benefit max	\$1,000 / person	\$1,000 / person	\$2,500 / person
Waiting period	None	None	None
Routine evaluations, dental cleanings, sealants, bitewing and panoramic X-rays, fluoride treatments, pulp vitality tests	100%	No coverage	No coverage
Fillings	100%	No coverage	No coverage
Anesthesia (general and IV sedation)	80%	50%	80%
Emergency pain relief	80%	No coverage	No coverage
Periodontal maintenance	100%	No coverage	No coverage
Crowns, bridges, dentures, implants	No coverage	50%	60%
Surgical extraction, root canal (endodontics), periodontics (except maintenance), oral surgery	No coverage	50%	80%
Non-surgical extractions (above gumline)	90%	No coverage	No coverage
Orthodontics coverage	50% (Under age 19)	No coverage	50% (Any age)
Orthodontics lifetime maximum	\$1,500	No coverage	\$1,500

VSP Vision

Plan Description

VSP Vision insurance provides coverage to help offset the costs of an annual eye exam, prescription glasses, and contact lenses. For detailed information about VSP Vision: hr.wisc.edu/benefits/vsp-vision-insurance

In-Network coverage includes:

- One well-vision exam per calendar year after \$15 co-payment
- Coverage for glasses or contact lenses each year
 - \$150 retail frame allowance (or \$200 retail frame allowance for featured frame brands) every other year after \$25 co-pay, lenses every year after \$25 co-pay
 - \$150 contact lens allowance per year with co-pay up to \$40
- There is no charge for standard progressive lenses.
- Discounts may be available on services not covered by the plan, such as additional glasses, laser vision correction, and some services/materials.
- KidsCare Program - allows two exams per year, impact resistant lenses, lenses replaced as needed, frames replaced annually with \$25 co-pay

Available Coverage

Coverage is available for the employee, employee spouse and dependents.

Employee/Employer Contribution

There is no employer contribution.

Premiums

2020 Monthly Premium	Employee	Employee + Spouse/DP	Employee + Child(ren)*	Family
VSP	\$6.38	\$12.76	\$14.38	\$22.98

Enrollment and Effective Date of Coverage

You must apply within 30 days of your appointment start date.

Coverage is effective the first of the month on or following your appointment, as long as your enrollment is received within 30 days.

Examples:

- If you are hired on January 1, and your enrollment is received by January 31, coverage is effective on January 1.
- If you are hired on any day of the month after the 1st, and your enrollment is received within 30 days, coverage is effective the first of the month following your date of hire.

Income Continuation Insurance

Plan Description

Income Continuation Insurance (ICI) is disability/income replacement insurance that will provide you with up to 75% of your monthly salary (based on a maximum salary of \$120,000/year) if you become ill or disabled and are unable to work.

Benefits begin after a selected waiting period (minimum of 30 consecutive calendar days) or use of accumulated sick leave (up to 130 days), whichever is longer. There are two coverage levels: Standard ICI covers earnings up to \$64,000; Supplemental ICI covers earnings from \$64,001 to \$120,000.

For detailed information about ICI: hr.wisc.edu/benefits/income-continuation-insurance

Available Coverage

Coverage is available for the employee only.

Employee/Employer Contribution

ICI premiums are paid through a combination of employer and employee contributions. When coverage is elected determines the coverage option and the amount of employer and employee contributions.

Enrollment and Effective Date of Coverage

Faculty/Academic Staff/Limited Staff

You can elect coverage to be effective as soon as possible, but there is no employer contribution toward premiums until after completion of 12 full months of WRS service. You must apply within 30 days of your appointment start date. Coverage is effective on your hire date if you were hired on the 1st of a month. If you were hired any day after the 1st, coverage is effective on the first of the month following your hire date.

If you elect coverage to become effective when the employer contributes to the premium, you must apply within 60 days after completing one year of WRS service. Coverage is effective on the first day of the month after the completion of one year of WRS service.

University Staff

You must apply within 30 days of your appointment start date. Coverage is effective on the 1st of the month on or following the date of hire.

All employees must be under age 70 to be eligible. Any employee not electing to enroll in ICI must submit an enrollment to decline coverage.

Life Insurance Plans

The University offers life insurance coverage through several different plans.

Plan descriptions for the life insurance plans available to you are listed on the following pages. Comparison charts highlighting the features: wisconsin.edu/ohrwd/benefits/download/life/lifecomp.pdf

Life Insurance Premiums

Premiums for all life insurance plans are available here: wisconsin.edu/ohrwd/benefits/premiums/#life

State Group Life Insurance

Plan Description

State Group Life Insurance (SGL) provides group term life insurance. SGL offers coverage levels of up to five times your annual salary. There is also an option to cover your spouse up to \$20,000 and your children up to \$10,000. SGL will also continue into retirement at the group policy rates.

More information: hr.wisc.edu/benefits/state-group-life-insurance

Available Coverage

Coverage is available for the employee, employee spouse and dependents.

Employee/Employer Contribution

SGL Insurance premiums are paid through a combination of employer and employee contributions

Enrollment and Effective Date of Coverage

You must apply within 30 days of your appointment start date.

Coverage is effective on the first of the month following 30 days from the appointment start date.

If you elect to not enroll in State Group Life insurance, you must submit an enrollment to decline coverage.

Individual and Family Group Life Insurance

Plan Description

The plan provides group term life insurance. Initially, you may select up to \$20,000 of coverage for yourself, up to \$10,000 for a spouse/domestic partner, and up to \$5,000 per child. Maximum employee coverage is \$300,000, \$150,000 for a spouse/domestic partner, and \$25,000 per child. Annually, participants have an opportunity to increase coverage without evidence of insurability. More information: hr.wisc.edu/benefits/individual-and-family-group-life-insurance

Available Coverage

Coverage is available for the employee, employee spouse or domestic partner and dependents.

Enrollment and Effective Date of Coverage

You must apply within 30 days of your appointment start date.

Coverage is effective on the first of the month following 30 days from the appointment start date.

UW Employees, Inc. Life Insurance

Plan Description

UW Employees, Inc. Life Insurance plan offers decreasing term life insurance for employees only. Coverage is based on age and ranges from \$33,000-\$7,000. You are eligible for this life insurance plan if you are eligible for State Group Health Insurance. More information: hr.wisc.edu/benefits/uw-employees-inc-life-insurance

Available Coverage

Coverage is available for the employee only.

Employee/Employer Contribution

There is no employer contribution for UW Employees, Inc. Life Insurance. All plans premiums are paid through employee contribution.

Enrollment and Effective Date of Coverage

You must apply within 30 days of your appointment start date.

Coverage is effective on the first of the month following 30 days from the appointment start date.

University Insurance Association Life Insurance

Plan Description

Participation in this decreasing term life insurance plan is mandatory for all eligible faculty, academic staff, and limited employees. University staff are not eligible. Eligibility will be evaluated annually based on active employment information as of October 1st to ensure that the employee meets the minimum salary requirements. Benefit level is based on employee age at the beginning of the policy year (October 1).

The University Insurance Association (UIA) Life Insurance plan offers decreasing term life insurance to eligible Faculty, Academic Staff, and Limited appointees. If you meet the monthly salary requirement, you will be automatically enrolled in this plan. No application is required. Coverage ranges from \$101,000 - \$3,400 depending on employee age. UIA is eligible for continuation at retirement at the group policy rate.

More information: hr.wisc.edu/benefits/university-insurance-association-life-insurance

Available Coverage

Coverage is available for the employee only.

Employee/Employer Contribution

There is no employer contribution for University Insurance Association Life Insurance. All plans premiums are paid through employee contribution.

Premium

The annual premium of \$24.00 is deducted from October earnings.

Accidental Death and Dismemberment Insurance

Plan Description

The Accidental Death and Dismemberment Insurance plan (AD&D) protects you against losses resulting from a covered accident. You may select a coverage amount up to \$500,000. If you enroll in family coverage, your dependents are covered for a percentage of the benefit amount you select, subject to certain maximums. The plan also includes Zurich Travel Assist® (a comprehensive travel assistance program that provides benefits and services when you are traveling 100 miles or more from your residence) and Identity Theft Protection.

More information: hr.wisc.edu/benefits/accidental-death-and-dismemberment-insurance

Available Coverage

Coverage is available for the employee, employee spouse or domestic partner and dependents.

Employee/Employer Contribution

There is no employer contribution for AD&D. All plans premiums are paid through employee contribution.

Enrollment and Effective Date of Coverage

You may enroll, change, or cancel at any time.

Coverage is effective on the first of the month following 30 days from the appointment start date.

Accident Insurance

Plan Description

Accident Insurance offers coverage in the case of an accident for you, your spouse, and/or eligible child(ren). The plan provides a cash payment to help pay out-of-pocket expenses in the event of an accident. The plan also includes an accidental death & dismemberment benefit.

More information: wisconsin.edu/ohrwd/benefits/life-accident/accident

Available Coverage

Coverage is available for the employee, employee spouse and dependents.

Employee/Employer Contribution

There is no employer contribution.

Premiums

2020 Monthly Premium	Employee	Employee + Spouse	Employee + Child(ren)	Family
Accident Insurance	\$3.26	\$4.94	\$7.10	\$10.46

Enrollment and Effective Date of Coverage

You must apply within 30 days of your appointment start date.

Coverage is effective on the 1st of the month on or following your appointment start date.

Flexible Spending Accounts

Plan Description

The Flexible Spending Accounts program allows you to set aside money on a pre-tax basis to pay for eligible medical and dependent care expenses annually. You decide how much to set aside, and that amount is deducted from each paycheck before federal, state and FICA taxes are calculated so you save money on taxes.

You may only change your annual election amount during the year if you have a life event change in status (e.g. marriage, divorce, birth, leave of absence).

A Health Care FSA is used to pay for eligible medical expenses that aren't covered by your insurance. Eligible expenses include but are not limited to co-insurance, co-payments, dental costs and vision expenses (e.g. glasses, contacts, contact solution). Most over-the-counter medications are not covered unless you have a prescription from your doctor. If you participate in a High Deductible Health Plan you are only eligible for a Limited Purpose FSA for vision and dental expenses.

These expenses can be incurred by you, your spouse (same or opposite-sex spouse) and your qualifying child or relative.

You may contribute a minimum of \$100 or up to \$2,700 to your Health Care FSA. The 2020 plan year is from January 1, 2020–December 31, 2020. If you have unused monies left in your Healthcare or Limited Purpose FSA on December 31, 2020, up to \$500 will carry over to the 2021 plan year. Anything over \$500 will be lost.

A Dependent Day Care FSA is used to pay for eligible dependent care expenses such as after school care, baby-sitting fees, adult or child daycare and preschool.

Eligible dependents include your qualifying child, spouse (same or opposite-sex spouse) and/or relative.

You may contribute a minimum of \$100 or up to \$5,000 into your Dependent Day Care FSA. Plan carefully; any money remaining in your FSA account at the end of the plan year will be lost. For 2020 expenses, you have to incur charges by December 31, 2020 and you will have until March 30, 2021 to submit the dependent day care expenses against 2020 balances.

Enrollment and Effective Date of Coverage

You must apply within 30 days of your appointment start date.

Coverage is effective on the 1st of the month on or following the appointment start date.

Tax-Sheltered Annuity 403(b)

Plan Description

The UW Tax-Sheltered Annuity (TSA) 403(b) Program is a supplemental retirement savings program regulated by Section 403(b) of the Internal Revenue Code. Through the TSA Program you can invest a portion of your income for retirement on either a pre-tax basis, an after-tax basis (Roth) or a combination of both. Participation in the UW TSA Plan is voluntary.

UW TSA 403(b) Program investment options include a wide array of mutual funds and fixed and variable annuities managed by several investment companies:

- TIAA
- Fidelity
- T. Rowe Price
- Ameriprise/RiverSource Life Insurance
- Lincoln National Life Insurance

If you have 15 years or more of service with the UW and your TSA contributions average less than \$5,000 per year over the course of your UW employment, you may be eligible for catch-up contributions.

Available Coverage

Participation is available for the employee only.

Employee/Employer Contribution

You make the entire contribution; there is no employer match. University staff may contribute as little as \$8 per paycheck. Faculty, Academic Staff, and Limited employees may contribute as little as \$20 per paycheck.

There is no enrollment deadline.

Wisconsin Deferred Compensation 457(b)

Plan Description

The Wisconsin Deferred Compensation 457 (WDC) Program is a supplemental retirement savings plan, regulated by Section 457 of the Internal Revenue Code. Through the WDC Program you can invest a portion of your income for retirement on either a pre-tax basis, an after-tax basis (Roth) or a combination of both. Participation in the plan is voluntary.

WDC offers a wide range of investment options to meet your needs. The investment options are divided into 4 tiers:

- Lifecycle Funds
- Passive Index Funds
- Actively Managed Funds
- Self-Directed Brokerage Account

If you are within 3 years of your normal retirement age and you have under-contributed in the past, you may be eligible for catch-up contributions.

Available Coverage

Participation is available for the employee only.

Employee/Employer Contribution

The employee makes the entire contribution; there is no employer match. There is no minimum monthly contribution.



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Revised Jan 2020