

ICI Plan Changes  
11/16/2022  
Effective February 1, 2024

Item	Plan	Article/Section	Proposed Change	Comments
1.	Local	1.14 (c) EMPLOYEE has received a military leave of absence under ss. 230.32 (3) (a) or 230.35 (3), Wis. Stats. under a collective bargaining agreement under subch. V of ch. 111, or under rules promulgated by the Office of State Employment Relations or is eligible for reemployment with the state under ss. 45.50, Wis. Stats. after completion of his or her service in the U.S. armed forces.	1.14 (c) EMPLOYEE has received a military leave of absence under ss. 230.32 (3) (a) or 230.35 (3), Wis. Stats. under a collective bargaining agreement under subch. V of ch. 111, or under rules promulgated by the <del>Office of State Employment Relations</del> <u>Division of Personnel Management</u> or is eligible for reemployment with the state under ss. 45.50, Wis. Stats. after completion of his or her service in the U.S. armed forces.	Updates obsolete reference.
2.	State	1.15 (c) EMPLOYEE has received a military leave of absence under ss. 230.32 (3) (a) or 230.35 (3), Wis. Stats. under a collective bargaining agreement under subch. V of ch. 111, or under rules promulgated by the Office of State Employment Relations or is eligible for reemployment with the state under ss. 45.50, Wis. Stats. after completion of his or her service in the U.S. armed forces.	1.15 (c) EMPLOYEE has received a military leave of absence under ss. 230.32 (3) (a) or 230.35 (3), Wis. Stats. under a collective bargaining agreement under subch. V of ch. 111, or under rules promulgated by the <del>Office of State Employment Relations</del> <u>Division of Personnel Management</u> or is eligible for reemployment with the state under ss. 45.50, Wis. Stats. after completion of his or her service in the U.S. armed forces.	Updates obsolete reference.
3.	Local	1.15 "SUPPLEMENTAL COVERAGE means coverage based on the annual salary amount that exceeds \$64,000.00 up to maximum of \$120,000.00, with the EMPLOYEE paying the entire premium for the portion of the coverage that exceeds the salary over \$64,000.00.	<del>1.15 "SUPPLEMENTAL COVERAGE means coverage based on the annual salary amount that exceeds \$64,000.00 up to maximum of \$120,000.00, with the EMPLOYEE paying the entire premium for the portion of the coverage that exceeds the salary over \$64,000.00.</del>	Eliminates definition of Supplemental Coverage.
4.	Local	1.16 "INCIDENTAL WORK FUNCTIONS" means work tasks which are minor or inconsequential. This will be determined by the CONTRACTOR on a case-by-case basis.	<del>1.16</del> <u>1.15</u> "INCIDENTAL WORK FUNCTIONS" means work tasks which are minor or inconsequential. This will be determined by the CONTRACTOR on a case-by-case basis.	Renumbering only.

Items in blue: related to Standard and Supplemental coverage changes.

Items in green: changes requested to simplify the development of the new Insurance Administration System.

Items in yellow: technical changes

5.	State	1.16 "SUPPLEMENTAL COVERAGE" means coverage based on the annual salary amount that exceeds \$64,000.00 up to maximum of \$120,000.00.	<del>1.16 "SUPPLEMENTAL COVERAGE" means coverage based on the annual salary amount that exceeds \$64,000.00 up to maximum of \$120,000.00.</del>	Eliminates definition of Supplemental Coverage.
6.	State	1.17 "INCIDENTAL WORK FUNCTIONS" means work tasks which are minor or inconsequential. This will be determined by the CONTRACTOR on a case-by-case basis.	<del>1.17</del> 1.16 "INCIDENTAL WORK FUNCTIONS" means work tasks which are minor or inconsequential. This will be determined by the CONTRACTOR on a case-by-case basis.	Renumbering only.
7.	State	2.02 (2) Each EMPLOYEE shall be insured under the Plan without furnishing medical evidence of insurability, provided the EMPLOYEE completes and signs an application furnished by the DEPARTMENT and files it with the employing state agency within thirty (30) calendar days of becoming an eligible EMPLOYEE under § 40.02 (25) (a) 1 or 2, Wis. Stats. If an EMPLOYEE is employed at more than one employer or falls under a different ICI plan with a different elimination period, the EMPLOYEE must file a separate application for each position held.	2.02 (2) Each EMPLOYEE shall be insured under the Plan without furnishing medical evidence of insurability, provided the EMPLOYEE completes and signs an application furnished by the DEPARTMENT and files it with the employing state agency within thirty (30) calendar days of becoming an eligible EMPLOYEE under § 40.02 (25) (a) 1 or 2, Wis. Stats. <u>(a) If an EMPLOYEE is employed at in more than one employer position or falls under a different ICI plan with a different elimination period payroll centers, the EMPLOYEE must file a separate applications for each position held under each payroll center.</u> <u>(b) If an EMPLOYEE is employed in more than one position under a single payroll center, only one application is necessary. The EMPLOYEE's combined earnings from all WRS-eligible positions will be used to determine ICI premiums and benefits.</u> <u>(c) If an EMPLOYEE at the UW is employed in both a University Staff position and a WRS-eligible UW Faculty or Academic Staff position, upon electing coverage, they must be enrolled in the UW FACULTY PLAN. The EMPLOYEE's combined earnings from both positions will be used to determine ICI premiums and benefits.</u>	Eliminates requirement for an employee to enroll more than once if they are working more than one job under the same payroll center.  Requires a University of Wisconsin employee who is employed in both a "University Staff" position and a Faculty or Academic Staff position to be enrolled in the UW Faculty plan.

8.	Local	2.02 (2) Subsequent to the EMPLOYER's effective date of participation, each EMPLOYEE shall be insured under the Plan without furnishing medical evidence of insurability, provided the EMPLOYEE completes and signs an application furnished by the DEPARTMENT and files it with the EMPLOYER within thirty (30) calendar days after eligibility as determined in accordance with § ETF 50.10, Wis. Admin. Code. If an EMPLOYEE is employed at more than one employer or falls under a different elimination period, the EMPLOYEE must file a separate application for each position held.	(2) Subsequent to the EMPLOYER's effective date of participation, each EMPLOYEE shall be insured under the Plan without furnishing medical evidence of insurability, provided the EMPLOYEE completes and signs an application furnished by the DEPARTMENT and files it with the EMPLOYER within thirty (30) calendar days after eligibility as determined in accordance with § ETF 50.10, Wis. Admin. Code. If an EMPLOYEE is employed <u>at-by</u> more than one <del>employer</del> <u>EMPLOYER</u> <del>or falls under a different elimination period</del> , the EMPLOYEE must file a separate application <u>for-under</u> <del>each position held</del> <u>EMPLOYER</u> .	Clarifies that "employer" as used here is the same as defined under 1.05.  Eliminates unnecessary language.
9.	State & Local	2.02 (3) An EMPLOYEE whose annual salary as determined under § 2.11 exceeds \$64,000.00 may also apply for SUPPLEMENTAL COVERAGE as part of the initial eligibility.	<del>2.02 (3) An EMPLOYEE whose annual salary as determined under § 2.11 exceeds \$64,000.00 may also apply for SUPPLEMENTAL COVERAGE as part of the initial eligibility.</del>	Eliminates Supplemental Coverage language.
10.	State & Local	2.03 (1) (a) An EMPLOYEE, who is approved for coverage under evidence of insurability, and whose annual salary as determined under § 2.11 exceeds \$64,000.00 may also apply for SUPPLEMENTAL COVERAGE. However, an EMPLOYEE who already has standard coverage cannot enroll in SUPPLEMENTAL COVERAGE through evidence of insurability, but can apply during the SUPPLEMENTAL COVERAGE open enrollment period.	<del>2.03 (1) (a) An EMPLOYEE, who is approved for coverage under evidence of insurability, and whose annual salary as determined under § 2.11 exceeds \$64,000.00 may also apply for SUPPLEMENTAL COVERAGE. However, an EMPLOYEE who already has standard coverage cannot enroll in SUPPLEMENTAL COVERAGE through evidence of insurability, but can apply during the SUPPLEMENTAL COVERAGE open enrollment period.</del>	Eliminates Supplemental Coverage language.
11.	State	2.03 (1) (b) If the EMPLOYEE's application is approved, insurance coverage shall become effective on the first day of the calendar month following the date of approval and premium shall be based on salary and sick leave accumulation then in effect or the selected elimination period for UW faculty. Charges for medical examinations and records, if required, shall be the responsibility of the EMPLOYEE.	2.03 (1) (b) If the EMPLOYEE's application is approved, insurance coverage shall become effective on the first day of the calendar month following the date of approval, <del>and p</del> premium shall be based on <u>salary</u> <u>average monthly earnings as determined under § 2.11</u> and sick leave accumulation <del>then in effect</del> <u>as of the last complete payroll period of the previous calendar year</u> or the selected elimination period for UW faculty. <del>If the EMPLOYEE was on an</del>	Clarifies average monthly earnings and sick leave balance to be used for premium purposes when an employee applies for coverage through evidence of insurability.

			<u>unpaid LEAVE OF ABSENCE in the previous calendar year, average monthly earnings will be determined as if the EMPLOYEE were newly hired under § 2.11 (2) (a).</u> Charges for medical examinations and records, if required, shall be the responsibility of the EMPLOYEE.	
12.	Local	2.03 (1) (b) If the EMPLOYEE's application is approved, insurance coverage shall become effective on the first day of the calendar month following the date of approval. Premiums will be based on the selected elimination period and the earnings reported to the Wisconsin Retirement System for the previous calendar year rounded to the next higher thousand and divided by twelve (12). For a new EMPLOYEE, premiums will be based on a projected annual base salary rounded to the next higher thousand and divided by twelve (12). Charges for medical examinations and records, if required, shall be the responsibility of the EMPLOYEE.	2.03 (1) (b) If the EMPLOYEE's application is approved, insurance coverage shall become effective on the first day of the calendar month following the date of approval. Premiums will be based on the selected elimination period and the <u>average monthly earnings as determined under § 2.11. If the EMPLOYEE was on an unpaid LEAVE OF ABSENCE in the previous calendar year, average monthly earnings will be determined as if the EMPLOYEE were newly hired under § 2.11 (2) (a).</u> <del>reported to the Wisconsin Retirement System for the previous calendar year rounded to the next higher thousand and divided by twelve (12). For a new EMPLOYEE, premiums will be based on a projected annual base salary rounded to the next higher thousand and divided by twelve (12).</del> Charges for medical examinations and records, if required, shall be the responsibility of the EMPLOYEE.	Clarifies average monthly earnings to be used for premium purposes when an employee applies for coverage through evidence of insurability.
13.	State & Local	2.03 (1) (c) If the application is denied by the CONTRACTOR due to lack of medical evidence, the CONTRACTOR will notify the EMPLOYEE. If medical evidence is not received within ten (10) days of notice to the EMPLOYEE, the CONTRACTOR shall deny the application.	2.03 (1) (c) If the application <del>is denied</del> <u>cannot be approved</u> by the CONTRACTOR due to lack of medical evidence, the CONTRACTOR will notify the EMPLOYEE. If medical evidence is not received within <del>ten</del> <u>thirty (30)</u> days of notice to the EMPLOYEE, the CONTRACTOR shall deny the application.	Extends time period for employees to submit medical evidence from their physicians.  Clarifies review process.
14.	State & Local	Create 2.03 (1) (f)	<u>2.03 (1) (f) If an EMPLOYEE submits an application while on a LEAVE OF ABSENCE, the application will be rejected. The EMPLOYEE may reapply upon return to work.</u>	Clarifies that an employee cannot enroll for coverage through evidence of insurability while on a leave of absence.

15.	State	2.03 (2) (d) Any EMPLOYEE, who has a sick leave balance of more than 1040 hours at the end of the calendar year, may be insured by filing an application with the EMPLOYER during the 60-day enrollment period for an April 1 effective date. If the 60-day enrollment period ends on a weekend day the application shall be due by the next business day.	2.03 (2) (d) Any EMPLOYEE <u>in 2.03 (2) (c)</u> , who has a sick leave balance of more than 1040 hours at the end of the calendar year, may be insured by filing an application with the EMPLOYER during the 60-day enrollment period for an April 1 effective date. If the 60-day enrollment period ends on a weekend day the application shall be due by the next business day.	Clarification that this provision does not apply to employees in the UW Faculty Plan.
16.	State	2.03 (2) (g) An EMPLOYEE, who is eligible for deferred coverage, and whose annual salary, as determined under § 2.11 exceeds \$64,000.00 may also apply for SUPPLEMENTAL COVERAGE during any subsequent ICI deferred coverage enrollment period. An EMPLOYEE, who has standard ICI coverage and receives a salary increase or promotion during the year that causes their annual salary to be greater than \$64,000, or an EMPLOYEE who was eligible for, but did not initially elect SUPPLEMENTAL COVERAGE, is eligible to enroll for SUPPLEMENTAL COVERAGE during any subsequent SUPPLEMENTAL ICI deferred coverage enrollment.	<del>2.03 (2) (g) An EMPLOYEE, who is eligible for deferred coverage, and whose annual salary, as determined under § 2.11 exceeds \$64,000.00 may also apply for SUPPLEMENTAL COVERAGE during any subsequent ICI deferred coverage enrollment period. An EMPLOYEE, who has standard ICI coverage and receives a salary increase or promotion during the year that causes their annual salary to be greater than \$64,000, or an EMPLOYEE who was eligible for, but did not initially elect SUPPLEMENTAL COVERAGE, is eligible to enroll for SUPPLEMENTAL COVERAGE during any subsequent SUPPLEMENTAL ICI deferred coverage enrollment.</del>	Eliminates Supplemental Coverage language.
17.	State	2.03 (2) (h) SUPPLEMENTAL COVERAGE is discontinued as of February 1 <sup>st</sup> if the annual salary amount is below \$64,000.00 at the time of the annual premium review under 2.11 (2) (b). An EMPLOYEE who has lost SUPPLEMENTAL COVERAGE due to salary reduction may re-apply during any subsequent deferred coverage enrollment period for SUPPLEMENTAL COVERAGE under this section if their annual salary, as determined under § 2.11 exceeds \$64,000.00.	<del>2.03 (2) (h) SUPPLEMENTAL COVERAGE is discontinued as of February 1<sup>st</sup> if the annual salary amount is below \$64,000.00 at the time of the annual premium review under 2.11 (2) (b). An EMPLOYEE who has lost SUPPLEMENTAL COVERAGE due to salary reduction may re-apply during any subsequent deferred coverage enrollment period for SUPPLEMENTAL COVERAGE under this section if their annual salary, as determined under § 2.11 exceeds \$64,000.00.</del>	Eliminates the requirement to discontinue Supplemental Coverage for employees whose annual salary drops below \$64,000. Also eliminates the need for employees to reenroll for Supplemental Coverage during an open enrollment period when their annual salary exceeds \$64,000.
18.	State	2.03 (2) (i) Eligible EMPLOYEES on LEAVE OF ABSENCE during the deferred coverage enrollment period have 60 days from their	2.03 (2) (i) Eligible EMPLOYEES on LEAVE OF ABSENCE during the deferred coverage enrollment period have 60 days from their	Eliminates Supplemental Coverage language. The word “standard” is also eliminated

		return to work to apply for standard coverage and/or for SUPPLEMENTAL COVERAGE to be effective the first day of the month that first occurs during the 60-day enrollment period, but no earlier than April 1 <sup>st</sup> of the year in which the EMPLOYEE becomes eligible. EMPLOYEES currently receiving ICI benefits may enroll in SUPPLEMENTAL COVERAGE when they return to work and are no longer receiving ICI benefits. EMPLOYEES wishing to enroll in SUPPLEMENTAL COVERAGE must submit an enrollment application within 60 days after termination of ICI benefits.	return to work to apply for <del>standard coverage and/or for SUPPLEMENTAL COVERAGE</del> to be effective the first day of the month that first occurs during the 60-day enrollment period, but no earlier than April 1 <sup>st</sup> of the year in which the EMPLOYEE becomes eligible. <del>EMPLOYEES currently receiving ICI benefits may enroll in SUPPLEMENTAL COVERAGE when they return to work and are no longer receiving ICI benefits. EMPLOYEES wishing to enroll in SUPPLEMENTAL COVERAGE must submit an enrollment application within 60 days after termination of ICI benefits.</del>	since there would only be one level of coverage.
19.	Local	2.03 (3) (a) If, as a result of employer error, an eligible employee has not filed an application for ICI, including SUPPLEMENTAL COVERAGE if eligible, or made premium contributions within 60 days after becoming eligible for ICI coverage, the EMPLOYEE is considered not to be insured for that coverage. The EMPLOYEE may become insured by filing a new application within 30 days after the EMPLOYEE receives from the EMPLOYER written notice of the error. An EMPLOYEE is not required to furnish evidence of insurability to become insured. An EMPLOYEE becomes insured on the first day of the first month beginning after the date on which the EMPLOYER receives the EMPLOYEE's new application and upon approval by the DEPARTMENT.	2.03 (3) (a) If, as a result of employer error, an eligible employee has not filed an application for ICI, <del>including SUPPLEMENTAL COVERAGE if eligible, or and has not</del> made premium contributions within 60 days after becoming eligible for ICI coverage, the EMPLOYEE is considered not to be insured <del>for that coverage</del> . The EMPLOYEE may become insured by filing a new application within 30 days after the EMPLOYEE receives from the EMPLOYER written notice of the error. An EMPLOYEE is not required to furnish evidence of insurability to become insured. An EMPLOYEE becomes insured on the first day of the first month beginning after the date on which the EMPLOYER receives the EMPLOYEE's new application and upon approval by the DEPARTMENT.	Eliminates Supplemental Coverage language.
20.	Local	2.03 (4) (a) The SUPPLEMENTAL COVERAGE annual open enrollment period begins on January 1 of each year and lasts for a period of 60 days.	<del>2.03 (4) (a) The SUPPLEMENTAL COVERAGE annual open enrollment period begins on January 1 of each year and lasts for a period of 60 days.</del>	Eliminates the Supplemental Coverage open enrollment period.
21.	Local	2.03 (4) (b) An EMPLOYEE, who has standard ICI coverage and receives a salary increase or promotion during the year that causes their	<del>2.03 (4) (b) An EMPLOYEE, who has standard ICI coverage and receives a salary increase or promotion during the year that causes their</del>	Eliminates the Supplemental Coverage open enrollment period.

		annual salary to be greater than \$64,000, or an EMPLOYEE who was eligible for, but did not initially elect SUPPLEMENTAL COVERAGE, is eligible to enroll for SUPPLEMENTAL COVERAGE during any subsequent SUPPLEMENTAL COVERAGE open enrollment period.	<del>annual salary to be greater than \$64,000, or an EMPLOYEE who was eligible for, but did not initially elect SUPPLEMENTAL COVERAGE, is eligible to enroll for SUPPLEMENTAL COVERAGE during any subsequent SUPPLEMENTAL COVERAGE open enrollment period.</del>	
22.	Local	2.03 (4) (c) A SUPPLEMENTAL COVERAGE open enrollment application shall be received by the EMPLOYER on or before the end of the SUPPLEMENTAL COVERAGE annual open enrollment period. If the end of the SUPPLEMENTAL COVERAGE annual open enrollment period falls on a weekend day, the application shall be due by the next business day. Coverage shall be effective April 1.	<del>2.03 (4) (c) A SUPPLEMENTAL COVERAGE open enrollment application shall be received by the EMPLOYER on or before the end of the SUPPLEMENTAL COVERAGE annual open enrollment period. If the end of the SUPPLEMENTAL COVERAGE annual open enrollment period falls on a weekend day, the application shall be due by the next business day. Coverage shall be effective April 1.</del>	Eliminates the Supplemental Coverage open enrollment period.
23.	Local	2.03 (4) (d) SUPPLEMENTAL COVERAGE is discontinued as of April 1st if the annual salary amount is below \$64,000.00 at the time of the annual premium review under 2.11 (2) (b). An EMPLOYEE who has lost SUPPLEMENTAL COVERAGE due to salary reduction may re-apply during any subsequent open enrollment period for SUPPLEMENTAL COVERAGE under this section if their annual salary, as determined under § 2.11 exceeds \$64,000.00.	<del>2.03 (4) (d) SUPPLEMENTAL COVERAGE is discontinued as of April 1st if the annual salary amount is below \$64,000.00 at the time of the annual premium review under 2.11 (2) (b). An EMPLOYEE who has lost SUPPLEMENTAL COVERAGE due to salary reduction may re-apply during any subsequent open enrollment period for SUPPLEMENTAL COVERAGE under this section if their annual salary, as determined under § 2.11 exceeds \$64,000.00.</del>	Eliminates the requirement to discontinue Supplemental Coverage for employees whose annual salary drops below \$64,000. Also eliminates the need for employees to reenroll for Supplemental Coverage during an open enrollment period when their annual salary exceeds \$64,000.
24.	Local	2.03 (4) (e) Eligible EMPLOYEES on LEAVE OF ABSENCE during the SUPPLEMENTAL COVERAGE open enrollment period have 60 days from their return to work to apply for SUPPLEMENTAL COVERAGE. EMPLOYEES currently receiving ICI benefits may enroll in SUPPLEMENTAL COVERAGE, if eligible, when they return to work and are no longer receiving ICI benefits. An enrollment application must be submitted within 60 days after termination of ICI benefits. Coverage shall be effective on the first day of the month that first occurs during the 60-day enrollment period	<del>2.03 (4) (e) Eligible EMPLOYEES on LEAVE OF ABSENCE during the SUPPLEMENTAL COVERAGE open enrollment period have 60 days from their return to work to apply for SUPPLEMENTAL COVERAGE. EMPLOYEES currently receiving ICI benefits may enroll in SUPPLEMENTAL COVERAGE, if eligible, when they return to work and are no longer receiving ICI benefits. An enrollment application must be submitted within 60 days after termination of ICI benefits. Coverage shall be effective on the first day of the month that first occurs during the 60-day enrollment period</del>	Eliminates the Supplemental Coverage open enrollment period.

		but no earlier than April 1st of the year in which the EMPLOYEE becomes eligible.	<del>but no earlier than April 1st of the year in which the EMPLOYEE becomes eligible.</del>	
25.	State	2.03 (6) (a) If, as a result of employer error, an eligible employee has not filed an application for ICI, including SUPPLEMENTAL COVERAGE if eligible, or made premium contributions within 60 days after becoming eligible for ICI coverage, the employee is considered not to be insured for that coverage. The employee may become insured by filing a new application within 30 days after the employee receives from the employer written notice of the error. An employee is not required to furnish evidence of insurability to become insured. An employee becomes insured on the first day of the first month beginning after the date on which the employer receives the employee's new application and upon approval by the DEPARTMENT.	2.03 (6) (a) If, as a result of employer error, an eligible employee has not filed an application for ICI, <del>including SUPPLEMENTAL COVERAGE if eligible, or and has not</del> made premium contributions within 60 days after becoming eligible for ICI coverage, the employee is considered not to be insured <del>for that coverage</del> . The employee may become insured by filing a new application within 30 days after the employee receives from the employer written notice of the error. An employee is not required to furnish evidence of insurability to become insured. An employee becomes insured on the first day of the first month beginning after the date on which the employer receives the employee's new application and upon approval by the DEPARTMENT.	Eliminates Supplemental Coverage language.  Clarifies that an employee is not insured if they have not filed an application <b>and</b> have not made premium contributions within 60 days after becoming eligible.
26.	State & Local	2.06 A CLAIMANT who is TOTALLY DISABLED shall pay no premiums for the coverage period which is the first of the month which occurs on or following the date ICI benefits are first payable or upon termination of employment, whichever occurs first. The waiver of premiums shall continue through the last day of the month in which the EMPLOYEE's LEAVE OF ABSENCE ends pursuant to §40.02 (40) Wis. Stat. or ICI benefits are terminated, whichever is later. The EMPLOYER shall not pay the EMPLOYER contribution of premium for same period as the CLAIMANT's waiver period.	2.06 A CLAIMANT who is TOTALLY DISABLED shall pay no premiums for the coverage period <del>which is beginning on</del> the first of the month <del>which occurs</del> on or following the date <del>of the first ICI benefit payment, s are first payable</del> or upon termination of employment, whichever occurs first. The waiver of premiums shall continue through the last day of the month in which the EMPLOYEE's LEAVE OF ABSENCE ends pursuant to §40.02 (40) Wis. Stat. or ICI benefits are terminated, whichever is later. The EMPLOYER shall not pay the EMPLOYER contribution of premium for same period as the CLAIMANT's waiver period.	Clarifies that ICI premiums will be waived starting on the 1st of the month which is on or following the date of the first ICI benefit payment.
27.	State	2.07 (2) (a) An EMPLOYEE may elect to cancel the SUPPLEMENTAL COVERAGE only and continue the ICI coverage for the salary under \$64,000.00 by giving written notice as indicated in (2).	<del>2.07 (2) (a) An EMPLOYEE may elect to cancel the SUPPLEMENTAL COVERAGE only and continue the ICI coverage for the salary under \$64,000.00 by giving written notice as indicated in (2).</del>	Eliminates Supplemental Coverage language. An employee with annual salary greater than \$64,000 would



				have coverage for their salary up to \$120,000.
28.	Local	2.07 (3) (a) An EMPLOYEE may elect to cancel the SUPPLEMENTAL COVERAGE only and continue the ICI coverage for the salary under \$64,000.00 by giving written notice as indicated in (3).	<del>2.07 (3) (a) An EMPLOYEE may elect to cancel the SUPPLEMENTAL COVERAGE only and continue the ICI coverage for the salary under \$64,000.00 by giving written notice as indicated in (3).</del>	Eliminates Supplemental Coverage language. An employee with annual salary greater than \$64,000 would have coverage for their salary up to \$120,000.
29.	State	2.09 (1) The gross monthly premiums as shown in Table I, IV and IV-A shall be based on the earnings level, accumulated sick leave, and appropriate elimination period. Limited-term EMPLOYEES, who are not concurrently appointed to a permanent state position, are eligible for ICI coverage under premium category 1 only.	2.09 (1) The gross monthly premiums <del>as shown in Table I, IV and IV-A</del> shall be based on the earnings level, <del>and</del> accumulated sick leave, <del>and/or</del> appropriate elimination period. Limited-term EMPLOYEES, who are not concurrently appointed to a permanent state position, are eligible for ICI coverage under premium category 1 only.	Supplemental coverage rate tables will no longer be needed. Eliminates unnecessary references to premium rate tables, allowing tables to be reordered.
30.	State	2.09 (2) The gross monthly premiums for the SUPPLEMENTAL COVERAGE are shown in Table IV and IV-A. The EMPLOYEE must pay the entire premium for the portion of the coverage that exceeds the \$64,000.00.	<del>2.09 (2) The gross monthly premiums for the SUPPLEMENTAL COVERAGE are shown in Table IV and IV-A. The EMPLOYEE must pay the entire premium for the portion of the coverage that exceeds the \$64,000.00.</del>	Eliminates the need for separate Supplemental Coverage premium rate tables. Eliminates the provision that employees must pay the full premium for coverage over \$64,000.
31.	Local	2.09 (2) The EMPLOYEE must pay the entire premium, as established in Table II-A, for the portion of the coverage that exceeds the \$64,000.00.	<del>2.09 (2) The EMPLOYEE must pay the entire premium, as established in Table II-A, for the portion of the coverage that exceeds the \$64,000.00.</del>	Eliminates the provision that employees must pay the full premium for coverage over \$64,000. Eliminates the need for separate Supplemental Coverage premium rate tables.
32.	Local	2.10 The minimum EMPLOYER contributions shall be the gross premium rate for the 180 day elimination period option shown in Table I. An EMPLOYER may elect to contribute a greater amount toward the gross premium for any other elimination period selected by the EMPLOYEE. There will be no EMPLOYER contributions toward the EMPLOYEE's SUPPLEMENTAL COVERAGE. (See 2.11 to determine average monthly earnings.)	2.10 The minimum EMPLOYER contributions shall be the gross premium rate for the 180 day elimination period option shown in Table I. An EMPLOYER may elect to contribute a greater amount toward the gross premium for any other elimination period selected by the EMPLOYEE. <del>There will be no EMPLOYER contributions toward the EMPLOYEE's SUPPLEMENTAL COVERAGE.</del> (See 2.11 to determine average monthly earnings.)	Eliminates the provision that does not allow any employer to contribute a portion of the premium for coverage over \$64,000.

33.	State	2.10 (1) EMPLOYER contributions toward premium shall be made in accordance with the provisions of § 40.05 (5), Wis. Stats., and the rates established in Table I. The determination of State contribution toward premium shall be made in February of each year, based on the total accumulation of unused sick leave recorded and credited in the last complete payroll period, regardless of the date paid, in the previous calendar year. Changes in EMPLOYER contribution toward premiums shall be effective for coverage beginning February 1 <sup>st</sup> of each calendar year. (See Section 2.11 to determine average monthly earnings.)	2.10 (1) EMPLOYER contributions toward premium shall be made in accordance with the provisions of § 40.05 (5), Wis. Stats., and the rates established <del>in Table I</del> <u>by the board</u> . The determination of State contribution toward premium shall be made in February of each year, based on the total accumulation of unused sick leave recorded and credited in the last complete payroll period, regardless of the date paid, in the previous calendar year. Changes in EMPLOYER contribution toward premiums shall be effective for coverage beginning February 1 <sup>st</sup> of each calendar year. (See Section 2.11 to determine average monthly earnings.)	Eliminates unnecessary references to premium rate tables, allowing tables to be reordered with the elimination of the Supplemental rate tables.
34.	State	2.10 (4) Pursuant to § 40.05 (5), Wis. Stats., the following 6 premium categories of sick leave accumulations are established in Tables I, II, and IV. Except for premium category 3 which is prorated for part-time EMPLOYEES, for purposes of § 40.05 (5), Wis. Stats., and this section, a day of sick leave is equal to 8 hours. ...	2.10 (4) Pursuant to § 40.05 (5), Wis. Stats., the following 6 premium categories of sick leave accumulations are established <del>in Tables I, II, and IV</del> . Except for premium category 3 which is prorated for part-time EMPLOYEES, for purposes of § 40.05 (5), Wis. Stats., and this section, a day of sick leave is equal to 8 hours. ...	Supplemental coverage rate tables will no longer be needed. Eliminates unnecessary references to premium rate tables, allowing tables to be reordered.
35.	State	2.10 (7) There will be no EMPLOYER contributions toward the EMPLOYEE's SUPPLEMENTAL COVERAGE.	<del>2.10 (7) There will be no EMPLOYER contributions toward the EMPLOYEE's SUPPLEMENTAL COVERAGE.</del>	Eliminates the provision that does not allow any employer to contribute a portion of the premium for coverage over \$64,000.
36.	State	2.11 (1) EMPLOYEE contributions toward premium shall be made in accordance with the rates established in Table II and III. Premium rates for SUPPLEMENTAL COVERAGE are established in Table IV and IV-A.	2.11 (1) EMPLOYEE contributions toward premium shall be made in accordance with the rates established <del>in Table II and III</del> <u>by the board</u> . <del>Premium rates for SUPPLEMENTAL COVERAGE are established in Table IV and IV-A.</del>	Eliminates the need for separate Supplemental Coverage premium rate tables. Eliminates unnecessary references to premium rate tables, allowing tables to be reordered.
37.	Local	2.11 (1) EMPLOYEE contributions toward premium shall be made in accordance with the rates established in Table I, less the contribution made by the EMPLOYER.	2.11 (1) EMPLOYEE contributions toward premium shall be made in accordance with the rates established in Table I, less the contribution made by the EMPLOYER.	Eliminates the need for separate Supplemental Coverage premium rate tables.

		Premium rates for SUPPLEMENTAL COVERAGE are established in Table II-A.	<del>Premium rates for SUPPLEMENTAL COVERAGE are established in Table II-A.</del>	
38.	State & Local	2.11 (2) (b) If an EMPLOYEE has a permanent change in percentage of appointment and the new estimated annual salary amount is less than \$64,000, the SUPPLEMENTAL COVERAGE is discontinued as of the first of the month following the change in percentage of appointment.	<del>2.11 (2) (b) If an EMPLOYEE has a permanent change in percentage of appointment and the new estimated annual salary amount is less than \$64,000, the SUPPLEMENTAL COVERAGE is discontinued as of the first of the month following the change in percentage of appointment.</del>	Eliminates the need to discontinue Supplemental Coverage for employees whose annual salary drops below \$64,000.
39.	State	2.135 (3) If an EMPLOYEE has terminated all WRS employment, and, therefore, no longer has use of accumulated sick leave, the previous sick leave balance will not be taken into consideration when determining the elimination period. The sick leave exhaust date will be considered to be the same as the EMPLOYEE's termination date.	2.135 (3) If an EMPLOYEE has terminated all WRS employment, and, therefore, no longer has use of accumulated sick leave, the previous sick leave balance will not be taken into consideration when determining the <del>elimination period</del> benefit effective date. The sick leave exhaust date will be considered to be the same as the EMPLOYEE's termination date.	Clarifies that it is the benefit effective date that is being determined based on the 30-day elimination period and the sick leave exhaust date.
40.	State & Local	2.15 (2) Benefit payments from ICI shall be reduced by benefits paid or payable at the rate of 100% from the following sources, except as specified for the Wisconsin Retirement System (WRS) disability or retirement plan in par. (e):	2.15 (2) Benefit payments from ICI shall be reduced by benefits paid or payable <u>to the CLAIMANT</u> at the rate of 100% from the following sources, except as specified for the Wisconsin Retirement System (WRS) disability or retirement plan in par. (e):	Clarifies that benefit payments from other sources are only offset from the ICI benefit if those benefits are paid or payable to the claimant.
41.	State & Local	2.15 (2) (e) Any WRS disability or retirement plan. WRS periodic disability and retirement payments and lump sum payments will be offset at the equivalent straight life monthly annuity amount using the DEPARTMENT's current actuarial tables. The reduction for the WRS retirement plan will be based on the straight life annuity amount. A CLAIMANT eligible for either a § 40.63, Wis. Stats., benefit or a § ETF 50.40, Wis. Admin. Code, benefit may choose the benefit they prefer.	2.15 (2) (e) Any WRS disability or retirement plan. WRS periodic disability and retirement payments and lump sum payments will be offset at the equivalent straight life monthly annuity amount using the DEPARTMENT's current actuarial tables. <del>The reduction for the WRS retirement plan will be based on the straight life annuity amount. A CLAIMANT eligible for either a § 40.63, Wis. Stats., benefit or a § ETF 50.40, Wis. Admin. Code, benefit may choose the benefit they prefer.</del>	Removes redundant language and obsolete language regarding Long-Term Disability Insurance benefits no longer offered under § ETF 50.40, Wis. Admin. Code.
42.	State & Local	2.15 (2) (e) 2. Once the CLAIMANT reaches normal retirement age under the WRS, the ICI benefit will be offset by the straight life amount from the WRS. If the CLAIMANT does not	2.15 (2) (e) 2. Once the CLAIMANT reaches normal retirement age under the WRS, <u>or age 62, whichever occurs later</u> , the ICI benefit will be offset by the straight life amount from the	Clarifies current practice as required under Title 29 U.S. Code §623(l)(3)(B).

		<p>apply for their WRS retirement benefit at normal retirement age, the offset will be based on an estimated straight life amount.</p> <p>If the CLAIMANT begins receiving WRS retirement benefits prior to reaching normal retirement age, even though not required to apply at that point, the ICI benefit will be offset by the straight life amount.</p>	<p>WRS. If the CLAIMANT does not apply for their WRS retirement benefit at normal retirement age, <u>or age 62, whichever occurs later</u>, the offset will be based on an estimated straight life amount.</p> <p>If the CLAIMANT begins receiving WRS retirement benefits prior to reaching normal retirement age, <u>or age 62, whichever occurs later</u>, even though not required to apply at that point, the ICI benefit will be offset by the straight life amount.</p>	
43.	State	<p>2.15 (2) (g) Earnings, which means the gross amount of wages and salary received from any employment, whether or not it is Wisconsin Retirement System covered employment, for personal service rendered on or after the disability effective date, including any amount which would have been available for payment to the CLAIMANT except for the CLAIMANT's election that part or all of the amount be used for other purposes. The gross amount shall be determined prior to deductions for taxes, insurance premiums, retirement contributions, charitable contributions, etc.</p> <p>Earnings also include any payment or award for lost wages or lost earnings regardless of whether treated as earnings for purposes of the Wisconsin Retirement System under § 40.02 (22), Wis. Stats., or § ETF 20, Wis. Admin. Code, and regardless of whether received from the EMPLOYER or a third party, including a third party subrogation or an insurer.</p> <p>Earnings for personal services rendered also include the net profit of any business enterprise owned, controlled or conducted by the individual, in addition to any salary, wages or other compensation drawn from such a business.</p>	<p>2.15 (2) (g) Earnings, which means the gross amount of wages and salary received from any employment, whether or not it is Wisconsin Retirement System covered employment, for personal service rendered on or after the disability effective date, including any amount which would have been available for payment to the CLAIMANT except for the CLAIMANT's election that part or all of the amount be used for other purposes. The gross amount shall be determined prior to deductions for taxes, insurance premiums, retirement contributions, charitable contributions, etc.</p> <ol style="list-style-type: none"> <li>1. <u>Notwithstanding 2.15 (2) (g) intro., earnings received by a CLAIMANT who has returned to work less than full time with their prior WRS employer will be offset per 2.175 (1).</u></li> <li>2. Earnings also include any payment or award <u>from an EMPLOYER</u> for lost wages or lost earnings regardless of whether treated as earnings for purposes of the Wisconsin Retirement System under § 40.02 (22), Wis. Stats., or § ETF 20, Wis. Admin. Code, and regardless of whether received from the</li> </ol>	<p>Refers reader to existing provisions under 2.175 (1) for offsetting earnings for an employee who returns to work part-time with their prior WRS employer.</p> <p>Clarifies that ICI is only offset by lost wages received from a WRS employer.</p> <p>Reorders section 2.15 (2) (g). Subsequent paragraphs have been numbered.</p>

		<p>Earnings will be offset as of the date of payment for the gross amount paid.</p> <p>Unless the CLAIMANT has returned to work with the prior EMPLOYER, payments for vacation, sabbatical, holiday time, and compensatory time paid to the CLAIMANT after the date the ICI benefit first becomes payable, will be offset at 100%.</p>	<p>EMPLOYER or a third party, including a third party subrogation or an insurer.</p> <p><u>3.</u> Earnings for personal services rendered also include the net profit of any business enterprise owned, controlled or conducted by the individual, in addition to any salary, wages or other compensation drawn from such a business.</p> <p><u>4.</u> Earnings will be offset as of the date of payment for the gross amount paid.</p> <p><u>5.</u> Unless the CLAIMANT has returned to work with the prior EMPLOYER, payments for vacation, sabbatical, holiday time, and compensatory time paid to the CLAIMANT after the date the ICI benefit first becomes payable, will be offset at 100%.</p>	
44.	Local	<p>2.15 (2) (g) Earnings, which means the gross amount of wages and salary received from any employment, whether or not it is Wisconsin Retirement System covered employment, for personal service rendered on or after the disability effective date, including any amount which would have been available for payment to the CLAIMANT except for the CLAIMANT's election that part or all of the amount be used for other purposes. The gross amount shall be determined prior to deductions for taxes, insurance premiums, retirement contributions, charitable contributions, etc.</p> <p>Earnings also include any payment or award for lost wages or lost earnings regardless of whether treated as earnings for purposes of the Wisconsin Retirement System under § 40.02 (22), Wis. Stats., or § ETF 20, Wis. Admin. Code, and regardless of whether received from</p>	<p>2.15 (2) (g) Earnings, which means the gross amount of wages and salary received from any employment, whether or not it is Wisconsin Retirement System covered employment, for personal service rendered on or after the disability effective date, including any amount which would have been available for payment to the CLAIMANT except for the CLAIMANT's election that part or all of the amount be used for other purposes. The gross amount shall be determined prior to deductions for taxes, insurance premiums, retirement contributions, charitable contributions, etc.</p> <p><u>1.</u> <u>Notwithstanding 2.15 (2) (g) intro., earnings received by a CLAIMANT who has returned to work less than full time with their prior WRS employer should be offset per 2.175 (1).</u></p>	<p>Refers reader to existing provisions under 2.175 (1) for offsetting earnings for an employee who returns to work part-time with their prior WRS employer.</p> <p>Clarifies that ICI is only offset by lost wages received from a WRS employer.</p> <p>Reorders section 2.15 (2) (g). Subsequent paragraphs have been numbered.</p>

		<p>the EMPLOYER or a third party, including a third party subrogation or an insurer.</p> <p>Earnings for personal services rendered also include the net profit of any business enterprise owned, controlled or conducted by the individual, in addition to any salary, wages or other compensation drawn from such a business.</p> <p>Earnings will be offset as of the date of payment for the gross amount paid.</p> <p>The use of sick leave, vacation time, etc., after the elimination period shall be at the CLAIMANT's option, subject to personnel rules or policy. Any earnings paid for sick leave, vacation pay, etc., after the elimination period will be offset from the ICI benefit at 100%. If the CLAIMANT has returned to work with the prior EMPLOYER and payments for vacation, holiday time and compensatory time are paid, the offsets will be applied pursuant to §2.175.</p>	<p><u>2.</u> Earnings also include any payment or award <u>from an EMPLOYER</u> for lost wages or lost earnings regardless of whether treated as earnings for purposes of the Wisconsin Retirement System under § 40.02 (22), Wis. Stats., or § ETF 20, Wis. Admin. Code, and regardless of whether received from the EMPLOYER or a third party, including a third party subrogation or an insurer.</p> <p><u>3.</u> Earnings for personal services rendered also include the net profit of any business enterprise owned, controlled or conducted by the individual, in addition to any salary, wages or other compensation drawn from such a business.</p> <p><u>4.</u> Earnings will be offset as of the date of payment for the gross amount paid.</p> <p><u>5.</u> The use of sick leave, vacation time, etc., after the elimination period shall be at the CLAIMANT's option, subject to personnel rules or policy. Any earnings paid for sick leave, vacation pay, etc., after the elimination period will be offset from the ICI benefit at 100%. If the CLAIMANT has returned to work with the prior EMPLOYER and payments for vacation, holiday time and compensatory time are paid, the offsets will be applied pursuant to §2.175.</p>	
45.	State & Local	<p>2.15 (2) (i) The following payments are NOT offsets to ICI benefits:</p> <ol style="list-style-type: none"> <li>1) VA benefits.</li> <li>2) Non-WRS retirement benefits</li> <li>3) Payments for longevity pay or uniform allowances.</li> </ol>	<p>2.15 (2) (i) The following payments are NOT offsets to ICI benefits:</p> <ol style="list-style-type: none"> <li>1) VA benefits.</li> <li>2) Non-WRS retirement benefits</li> <li>3) Payments for longevity pay or uniform allowances.</li> </ol>	<p>Expands list to include other common income sources that are not offsets to ICI.</p>

			<u>4) Health insurance “opt out” incentives.</u> <u>5) Severance packages.</u> <u>6) Supplemental Security Income (SSI).</u> <u>7) Payments made to survivors or an estate after the death of a CLAIMANT.</u> <u>8) Other payments as determined by the DEPARTMENT.</u>	
46.	State & Local	2.16 (3) (a) The maximum monthly benefit for standard coverage is \$4,000.00 per month, not including any add-on approved by the Board.	2.16 (3) (a) The maximum monthly benefit <del>for standard coverage</del> is \$4,000 <u>7,500</u> .00 per month, not including any add-on approved by the Board.	Eliminates the word “standard” since there will only be one level of coverage if Supplemental Coverage is eliminated. The maximum monthly benefit under the program will remain at \$7,500.00.
47.	State & Local	2.16 (3) (b) The maximum monthly benefit with SUPPLEMENTAL COVERAGE is \$7,500.00 per month, not including any add-on approved by the Board.	<del>2.16 (3) (b) The maximum monthly benefit with SUPPLEMENTAL COVERAGE is \$7,500.00 per month, not including any add-on approved by the Board.</del>	Eliminates Supplemental Coverage language. The maximum monthly benefit under the program will remain at \$7,500.00.