From:	
To:	ETF SMB Board Feedback
Cc:	
Subject:	RE: REMINDER: It's Your Choice Open Enrollment Period Ends Friday, October 20th!
Date:	Monday, October 16, 2023 9:18:27 AM
Attachments:	

I want to opt-out and be awarded my \$2000 just like everyone else. I am being discriminated against because I opted out in 2015. I also want to be reimbursed all of the money I would have received over the past few years. It has been 8 years, how has there not been more of a push to get this year edited out of the law?



From: DMA Payroll [mailto:DMAPayroll@widma.gov]
Sent: Friday, October 13, 2023 8:35 AM
To: DMA DL All State Employees <DMADLALLStateEmployees@widma.gov>
Subject: REMINDER: It's Your Choice Open Enrollment Period Ends Friday, October 20th!

CAUTION: This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

The annual It's Your Choice Open Enrollment Period ends Friday, October 20, 2023. This is the one time per year that you can make changes to your benefits unless you have a qualified life event.

All elections made during this period will be effective January 1, 2024.

The following plans REQUIRE you to re-enroll every year

Pre-Tax Savings Plans

- Health Savings Account (if enrolled in a High Deductible Health Plan)
- Healthcare or Limited Purpose Flexible Spending Account (FSA)
- Dependent Day Care FSA

<u>Health Insurance Opt-Out Stipend</u> (if not enrolled in health insurance and eligibility requirements met)

The following plans automatically continue. You may also enroll in, make changes to or cancel them during Open Enrollment:

- State Group Health Insurance (unless plan is no longer available for 2024)
- Vision Insurance DeltaVision
- Delta Dental PPO Supplemental Plans (Select and Select Plus)
- Delta Dental PPO Preventive Plan (not eligible to enroll if covered by State Group Health Insurance as an employee or dependent in 2024)
- Securian Accident Plan

Actions that can be taken during Open Enrollment:

Plan Type	Enroll	Add or Remove Dependents	Change Plans	Cancel Coverage	
Health*	Х	Х	Х	X	
Delta Dental PPO - Supplemental Plan	Х	X	Х	X	
Delta Dental PPO - Preventative Plan	Х	Х	N/A	X	
Delta Vision	Х	X	N/A	X	
Accidental Plan	Х	X - change coverage level	N/A	Х	
Healthcare FSA or LPFSA					
Dependent Day Care FSA	Must re-enroll every year				
Pre-Tax Parking & Transit Accounts	Coverage will automatically end if no 2024 enrollment.				
	Must re-enroll every year.				
Health Savings Account	Enrollment will end if employee doesn't elect High Deductible Plan(HDHP) but employee's HSA account remains active.				
Health Insurance Opt	Must re-enroll every year.				
Out Stipend	Must certify that eligibility requirement is met on an annual basis.				

Do you have GHC-SCW health insurance?

• Employees currently enrolled in GHC-SCW who have or wish to select a primary health care provider outside of Dane County will need to enroll in the new GHC-SCW Neighbors plan for 2024. GHC-SCW has become GHC-SCW Dane Choice, serving customers with primary health care providers in Dane County. Their new plan, GHC-SCW Neighbors, will serve customers with primary health care providers outside of Dane County.

See the **2024 It's Your Choice Decision Guide** <u>https://etf.wi.gov/resource/2024-health-benefits-decision-guide-state-wisconsin-group-health-insurance-employees</u> for full details.

All open enrollment elections can be made in STAR. Please review the **eBenefits Quick Guide** <u>https://dpm.wi.gov/Documents/Central%20Benefits/OE_eBN_guide.pdf</u> and **Employee Toolkit** <u>https://dpm.wi.gov/Documents/Central%20Benefits/OE_toolkit.pdf</u>

before making your elections.

Confirmation Statement

Be sure to view your confirmation statement. Go to the STAR self-service landing page . Click on the My Benefits Tile. Click on My Benefits Documents.

Lisa Carlson Military Affairs, Payroll 2400 Wright Street Madison, WI 53704 608-242-3165 Fax: 608-242-3168 Iisa.carlson@widma.gov

If you need an IAM password reset, please visit <u>http://eiam.wisconsin.gov/</u> or email <u>dmahelpdesk@widma.gov</u>



STATE OF WISCONSIN Department of Employee Trust Funds A. John Voelker

SECRETARY

Wisconsin Department of Employee Trust Funds PO Box 7931 Madison WI 53707-7931 1-877-533-5020 (toll free) Fax 608-267-4549 etf.wi.gov

October 30, 2023

Nichole Ebel-Bailey

Dear Nichole Ebel-Bailey:

Thank you for your October 16, 2023, email to the Group Insurance Board (Board) and the Department of Employee Trust Funds (ETF) regarding your concerns about the current opt-out incentive provision.

We understand your frustration. However, ETF must administer this provision in accordance with current law. The intent of the law was to create an incentive for individuals to opt-out of the State of Wisconsin Group Health Insurance Program starting in 2016. It specifies that it is not available for employees who had chosen to opt-out of health insurance coverage in 2015. It reads in part:

Wis. Stat. <u>40.513(</u>3) "A state employee may not be paid an annual stipend under sub. (1) if any of the following occurs:

(a) The employee was eligible for an employer contribution under s. 40.05 (4)
 (ag) during the 2015 calendar year and elected not to receive health care coverage in that calendar year."

I hope you have found this response helpful. If you have additional questions or concerns, please feel free to reach out using the contact information provided below. A copy of your email and ETF's response will be included in the materials for the November 15, 2023, Board meeting.

Sincerely,

Arlene Larson, Manager of Federal Program and Policy Office of Strategic Health Policy Department of Employee Trust Funds <u>arlene.larson@etf.wi.gov</u> 608-264-6624