What’s Changing in 2020

Health Plans
Changes can happen each year. Use the health plan search on our website to find health plans and covered providers where you receive care.

No Longer Available
• Security Health Plan - Central
• Security Health Plan - Valley

If you are currently enrolled in one of the health plans above, you must enroll in a new plan during open enrollment. If you do not, you will not have coverage as of January 1, 2020. Find health plans available in your area on pages 7-10. Provider directories are available on our website.

Service Area Changes
Dean Health Plan - Prevea360 will expand to include the following western counties: Barron, Buffalo, Chippewa, Dunn and Eau Claire. Prevea360 will also offer limited provider availability in Pepin County.

WEA Trust - East will expand to include the following counties: Langlade, Lincoln, Oneida, Price, Taylor and Vilas. WEA Trust - East will also offer limited provider availability in Forest County.

Network Health will expand to include Marathon County.

The State Maintenance Plan (SMP) will continue to be offered in Forest County for 2020. There will be fewer providers; make sure your providers are in-network or select another plan.

Vaccines at Pharmacies Covered
Vaccines will be covered at in-network retail pharmacies. Find an in-network pharmacy at etf.benefits.navitus.com (no login required).

New Medical Benefit
Bariatric surgery and weight loss services will be provided for participants with a body mass index (BMI) of 35 or greater, or as determined by your health plan.

Uniform Dental Benefits
New benefits include:
• No-cost periodontal maintenance
• Pulp vitality test (helps a dentist determine a treatment plan)
• Caries assessments (helps predict future dental health)

Supplemental Benefits
Preventive Dental Plan
Provides the same Uniform Dental Benefits and is available to participants not enrolled in health insurance through ETF. See page 11.

Mutual of Omaha Long-Term Care Insurance
If you wish to enroll, you must do so by December 31, 2019. No new enrollments will be allowed after this date. Current participants can continue their policies and do not need to take any action.

AD&D by Zurich No Longer Available
Accidental Death & Dismemberment (AD&D) policies with Zurich will end December 31, 2019. Choose the new accident plan if you would like this type of coverage in 2020.

Accident Plan by Securian Financial
Pays money directly to participants to help cover the unexpected, such as concussion, burns, dislocation, fracture, emergency care, hospitalization, loss of a limb, surgery, accidental death and dismemberment.

Disclaimer: UW System and UW Hospital and Clinics employees may have different supplemental benefits. Check with your HR/benefits office for details.
New Administrator for Pre-Tax Savings Accounts

ConnectYourCare is the new administrator for pre-tax savings accounts, which include:

- Health Care Flexible Spending Account (FSA)
- Limited Purpose Flexible Spending Account (LPFSA)
- Health Savings Account (HSA)
- Dependent Day Care Account
- Parking Account
- Transit Account

Do I need to do anything?

You will still need to re-enroll for 2020. Elections do not carry forward from year to year. Eligible existing accounts with carryover balances except for the HSA will automatically transition from TASC to ConnectYourCare, no action required. See page 14 for carryover limits.

If you have an HSA, you can transfer your account to ConnectYourCare through an online portal. If you do not transfer your account and stay with TASC, you will pay a $3/month administrative fee starting February 2020.

Timeline for Account Changes

2020 elections available.
- Full balances available for Health Care FSA and LPFSA.
- Money is available as it is deposited to all other accounts.

TASC card deactivated. New payment card activated.

Documentation must be submitted for any outstanding 2019 claims.
Any remaining 2019 FSA or LPFSA balances over $500 will be forfeited.
Any remaining 2019 Dependent Day Care Account balance will be forfeited.

Jan. 1

Feb. 3-29

HSA balance transferred to ConnectYourCare.

Mar. 31

2019 carryover balances available.

May 1

Well Wisconsin

Well Wisconsin, administered by StayWell®, supports you on your personal health journey and rewards you with a $150 incentive. Access free and confidential resources and services, such as health coaching, online challenges and more. NEW FOR 2020: An updated and improved StayWell website and app, plus a simpler way to receive your incentive.

wellwisconsin.staywell.com | 1-800-821-6591

StayWell® is a registered trademark of StayWell® Company, LLC. All health and wellness incentives are considered taxable income to the subscriber and are reported to your employer. Personal health information is protected by federal law and will not be shared with ETF, the group insurance board, or your employer.

Open Enrollment 2020
Your Enrollment Checklist

I’m happy with my benefits

☐ Review changes for next year
   Each year there are changes to your benefits. Make sure that your plan is still available in your area.

☐ Make sure your doctors are still covered
   Go to our website to see the provider directory for your health plan.
   If you are not changing health coverage, no action is needed.

☐ Re-enroll in pre-tax savings accounts
   If you have any of the following accounts, you must re-enroll each year:
   • Health Care Flexible Spending Account (FSA)
   • Limited Purpose Health Care Flexible Spending Account (LPFSA)
   • Dependent Day Care Account
   • Parking & Transit Accounts
   • Health Savings Account (HSA)
   Visit our website for enrollment instructions.

I’d like to make a change or I’m new

☐ Learn the way that works best for you, either:
   Use ALEX®, our virtual benefits counselor. He will ask you a few questions about your health care needs, crunch some numbers and point out what benefits make the most sense for you.
   Visit etf.wi.gov/ALEX to get started. Or follow along in this guide. There are steps and guidance throughout.

☐ Enroll
   Once you’ve used ALEX or followed the steps in this book, go to our website to learn how to enroll.

I’d like to opt out

You may be eligible to receive $2,000 for opting out of health insurance for 2020. To receive this incentive, you must opt out every year.

☐ Review eligibility and important considerations on our website
   Search for “opt out” on our website.

☐ Submit application
   STAR and UW employees can opt out electronically. Check with your employer to see if you can. If not, submit the Health Insurance Application/Change (ET-2301) form.

Contact your payroll/benefits office if you have questions.
Step 1: Choose a Plan Design
A plan design determines:
- How much you pay per month
- How much you pay when you visit a provider
- Whether you can see providers locally or nationwide
- If you can see providers out-of-network

### Monthly Cost (Premium)

<table>
<thead>
<tr>
<th></th>
<th>IYC Health Plan</th>
<th>High Deductible Health Plan (HDHP)</th>
<th>Access Plan</th>
<th>Access HDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Active Employees</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Individual</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>With / Without Uniform Dental</td>
<td>$93 / $89</td>
<td>$35 / $31</td>
<td>$273 / $269</td>
<td>$215 / $211</td>
</tr>
<tr>
<td><strong>Family</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>With / Without Uniform Dental</td>
<td>$231 / $222</td>
<td>$87 / $78</td>
<td>$679 / $670</td>
<td>$535 / $526</td>
</tr>
<tr>
<td><strong>UW Grad Assistants</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Individual</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>With / Without Uniform Dental</td>
<td>$48.50 / $44.50</td>
<td>Not available</td>
<td>$138.50 / $134.50</td>
<td>Not available</td>
</tr>
<tr>
<td><strong>Family</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>With / Without Uniform Dental</td>
<td>$120 / $111</td>
<td>Not available</td>
<td>$344 / $335</td>
<td>Not available</td>
</tr>
</tbody>
</table>

### Quick Comparison

<table>
<thead>
<tr>
<th></th>
<th>$$$</th>
<th>$$$$</th>
<th>$$</th>
<th>$$$$</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cost Per Visit</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ProviderAvailability</strong></td>
<td>Local</td>
<td>Local</td>
<td>Nationwide</td>
<td>Nationwide</td>
</tr>
<tr>
<td><strong>NationwidePharmacies</strong></td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td><strong>Out-of-NetworkBenefits</strong></td>
<td>Emergency and urgent care</td>
<td>Emergency and urgent care</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td><strong>AvailableHealthPlan(s)</strong></td>
<td>9 plans</td>
<td>9 plans</td>
<td>WEA Trust</td>
<td>WEA Trust</td>
</tr>
<tr>
<td><strong>Employer may add money to required Health Savings Account (HSA)</strong></td>
<td>---</td>
<td>Individual: $750 Family: $1,500</td>
<td>---</td>
<td>Individual: $750 Family: $1,500</td>
</tr>
</tbody>
</table>

Open Enrollment 2020
etf.wi.gov/benefits-by-employer
## Breakdown of Your Medical Costs

The table below lists how much you will pay for common services received in-network.

<table>
<thead>
<tr>
<th>Service</th>
<th>IYC Health Plan</th>
<th>Access Plan</th>
<th>HDHP</th>
<th>Access HDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Medical Deductible</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual / Family</td>
<td>$250 / $500</td>
<td></td>
<td>$1,500 / $3,000</td>
<td>Families: Must meet full family deductible</td>
</tr>
<tr>
<td>Counts toward out-of-pocket limit (OOPL)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Annual Medical Out-of-Pocket Limit (OOPL)</strong></td>
<td>$1,250 / $2,500</td>
<td></td>
<td>$2,500 / $5,000</td>
<td>Families: Must meet full family OOPL before your plan pays 100%</td>
</tr>
<tr>
<td>Individual / Family</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The most you will pay in a year for covered medical services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Medical Coinsurance</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applies to services beyond the office visit copay such as X-rays and lab work</td>
<td>100% until deductible met</td>
<td>After deductible: 10%</td>
<td>100% until deductible met</td>
<td>After deductible: 10%</td>
</tr>
<tr>
<td><strong>Preventive Services</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>See healthcare.gov/preventive-care-benefits</td>
<td>$0</td>
<td></td>
<td>$0</td>
<td>Plan pays 100%</td>
</tr>
<tr>
<td><strong>Telehealth Visit</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$0</td>
<td></td>
<td></td>
<td>100% until deductible met</td>
<td>After deductible: $0</td>
</tr>
<tr>
<td><strong>Primary Care Office Visit</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$15 copay</td>
<td></td>
<td></td>
<td>100% until deductible met</td>
<td>After deductible: $15 copay</td>
</tr>
<tr>
<td>Does not count toward deductible</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Specialty Provider Office Visit</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$25 copay</td>
<td></td>
<td></td>
<td>100% until deductible met</td>
<td>After deductible: $25 copay</td>
</tr>
<tr>
<td>Does not count toward deductible</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Urgent Care</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$25 copay</td>
<td></td>
<td></td>
<td>100% until deductible met</td>
<td>After deductible: $25 copay</td>
</tr>
<tr>
<td>Does not count toward deductible</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Emergency Room</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copay waived if admitted to inpatient directly from emergency room or for observation for 24 hours or longer</td>
<td>$75 copay</td>
<td>Deductible and coinsurance applies to services beyond the copay</td>
<td>100% until deductible met</td>
<td>After deductible: $75 copay, coinsurance applies to services beyond the copay</td>
</tr>
</tbody>
</table>

The Access Plan and Access HDHP offer out-of-network benefits. To learn about the out-of-network benefits, visit our website.
Breakdown of Your Pharmacy Costs

You must use an in-network pharmacy. Visit [etf.benefits.navitus.com](http://etf.benefits.navitus.com) to find an in-network pharmacy near you. In-network pharmacies are available nationwide.

<table>
<thead>
<tr>
<th>Prescription Deductible (Individual / Family)</th>
<th>IYC Health Plan</th>
<th>Access Plan</th>
<th>HDHP</th>
<th>Access HDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
<td>Combined medical &amp; pharmacy: $1,500 / $3,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>You pay 100% of most pharmacy costs until deductible is met¹</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Prescription Copay / Coinsurance</th>
<th>IYC Health Plan</th>
<th>Access Plan</th>
<th>HDHP</th>
<th>Access HDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Level 1</strong></td>
<td></td>
<td></td>
<td>After deductible: $5 or less</td>
<td></td>
</tr>
<tr>
<td>$5 or less</td>
<td></td>
<td></td>
<td>After deductible: 20% ($50 max)</td>
<td></td>
</tr>
<tr>
<td><strong>Level 2</strong></td>
<td></td>
<td></td>
<td>After deductible: 20% ($50 max)</td>
<td></td>
</tr>
<tr>
<td>20% ($50 max)</td>
<td></td>
<td></td>
<td>After deductible: 40% ($150 max)²</td>
<td></td>
</tr>
<tr>
<td><strong>Level 3</strong></td>
<td></td>
<td></td>
<td>After deductible: 40% ($150 max)²</td>
<td></td>
</tr>
<tr>
<td>40% ($150 max)²</td>
<td></td>
<td></td>
<td>After deductible: $50 copay³</td>
<td></td>
</tr>
<tr>
<td><strong>Level 4</strong></td>
<td></td>
<td></td>
<td>After deductible: $50 copay³</td>
<td></td>
</tr>
<tr>
<td>$50 copay³</td>
<td></td>
<td></td>
<td>After deductible: $50 copay³</td>
<td></td>
</tr>
<tr>
<td><strong>Preventive</strong> (As federally required)</td>
<td>$0 - Plan pays 100%</td>
<td></td>
<td>$0 - Plan pays 100%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Prescription Out-Of-Pocket Limit</th>
<th>IYC Health Plan</th>
<th>Access Plan</th>
<th>HDHP</th>
<th>Access HDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Levels 1 &amp; 2</strong> (Individual / Family)</td>
<td>$600 / $1,200</td>
<td></td>
<td>Combined medical &amp; pharmacy: $2,500 / $5,000</td>
<td></td>
</tr>
<tr>
<td><strong>Level 3</strong> (Individual / Family)</td>
<td>$6,850 / $13,700</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Level 4</strong> (Individual / Family)</td>
<td>$1,200 / $2,400</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

¹Before you meet your deductible, preventive drugs are covered 100% and certain maintenance medications only require a copayment or coinsurance. See our website for more information.

²For Level 3 “Dispense as Written” or “DAW-1” drugs, your doctor must submit a one-time FDA MedWatch form to Navitus. If there is no form on file with Navitus, you will pay more. Contact Navitus for details.

³Must fill at Lumicera specialty pharmacy or UW Health Specialty Pharmacies

**Mail-Order Pharmacy**

Why use a mail-order pharmacy?

- **You’ll pay less**
  Only 2 copays for a 3-month supply

- **It’s safe and confidential**
  Your medications are delivered in a confidential and weather-resistant package

- **You’re supported**
  Have a question about your medication? Pharmacists are available 24/7

For more information, visit [serve-you-rx.com/navitus](http://serve-you-rx.com/navitus) or call 1-800-481-4940

**Vaccines at Pharmacies**

Get vaccinated at any in-network pharmacy, using your pharmacy benefit.

- **How much does it cost?** $0, it’s free!

- **Which vaccines are available?** Influenza, Pneumonia, Tetanus, Hepatitis, Shingles, Measles, Mumps, Human Papillomavirus (HPV), Pertussis, Varicella, Meningitis

Just show your Navitus card at the pharmacy. If you prefer, you can still get vaccinated at your doctor’s office using your medical benefit.
Step 2: Choose a Health Plan

Complete this step if you selected the IYC Health Plan or HDHP. Skip this step if you selected an Access Plan design; your health plan is WEA Trust.

A health plan determines:
- Where you can receive care
- What providers you can see

Provider directories can be found on our website. Some plans let you see providers in nearby states.

Health Plans by County

Adams
- Dean Health Plan*
- Quartz - Community
- WEA Trust - East

Ashland
- GHC of Eau Claire
- HealthPartners Health Plan
- WEA Trust West - Chippewa Valley
- WEA Trust West - Mayo Clinic Health System*

Barron
- Dean Health Plan - Prevea360
- HealthPartners Health Plan
- WEA Trust West - Chippewa Valley
- WEA Trust West - Mayo Clinic Health System

Bayfield
- GHC of Eau Claire
- HealthPartners Health Plan
- WEA Trust West - Chippewa Valley
- WEA Trust West - Mayo Clinic Health System*

Brown
- Dean Health Plan - Prevea360
- Robin with HealthPartners
- WEA Trust - East
- Network Health

*limited provider availability
<table>
<thead>
<tr>
<th>County</th>
<th>Health Plans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buffalo</td>
<td>Dean Health Plan - Prevea360, HealthPartners Health Plan, WEA Trust West - Mayo Clinic Health System*</td>
</tr>
<tr>
<td>Burnett</td>
<td>GHC of Eau Claire, HealthPartners Health Plan, WEA Trust West - Chippewa Valley, WEA Trust West - Mayo Clinic Health System</td>
</tr>
<tr>
<td>Calumet</td>
<td>Network Health, Robin with HealthPartners, WEA Trust - East</td>
</tr>
<tr>
<td>Chippewa</td>
<td>Dean Health Plan - Prevea360, HealthPartners Health Plan, Quartz - Community, WEA Trust West - Chippewa Valley, WEA Trust West - Mayo Clinic Health System</td>
</tr>
<tr>
<td>Clark</td>
<td>GHC of Eau Claire, HealthPartners Health Plan, Quartz - Community, WEA Trust West - Chippewa Valley</td>
</tr>
<tr>
<td>Columbia</td>
<td>Dean Health Plan, GHC of South Central Wisconsin, Quartz - Community, WEA Trust - East</td>
</tr>
<tr>
<td>Dodge</td>
<td>Dean Health Plan, Network Health, Quartz - Community, WEA Trust - East, WEA Trust West - Mayo Clinic Health System*</td>
</tr>
<tr>
<td>Door</td>
<td>Dean Health Plan - Prevea360, Network Health, Robin with HealthPartners*, WEA Trust - East</td>
</tr>
<tr>
<td>Douglas</td>
<td>GHC of Eau Claire, HealthPartners Health Plan, WEA Trust West - Chippewa Valley, WEA Trust West - Mayo Clinic Health System</td>
</tr>
<tr>
<td>Dunn</td>
<td>Dean Health Plan - Prevea360, HealthPartners Health Plan, WEA Trust West - Chippewa Valley, WEA Trust West - Mayo Clinic Health System</td>
</tr>
<tr>
<td>Eau Claire</td>
<td>Dean Health Plan - Prevea360, HealthPartners Health Plan, Quartz - Community, WEA Trust West - Chippewa Valley, WEA Trust West - Mayo Clinic Health System</td>
</tr>
<tr>
<td>Florence</td>
<td>Robin with HealthPartners</td>
</tr>
<tr>
<td>Fond du Lac</td>
<td>Dean Health Plan, Network Health, Quartz - Community, Robin with HealthPartners, WEA Trust - East</td>
</tr>
<tr>
<td>Forest</td>
<td>HealthPartners Health Plan*, State Maintenance Plan (SMP) by WEA Trust, WEA Trust - East*</td>
</tr>
<tr>
<td>Grant</td>
<td>Dean Health Plan, HealthPartners Health Plan, Medical Associates Health Plan, Quartz - Community</td>
</tr>
<tr>
<td>Green</td>
<td>Dean Health Plan, MercyCare Health Plan*, Quartz - Community</td>
</tr>
<tr>
<td>Green Lake</td>
<td>Dean Health Plan, GHC of South Central Wisconsin, Medical Associates Health Plan, Quartz - Community</td>
</tr>
<tr>
<td>Iowa</td>
<td>Dean Health Plan, GHC of South Central Wisconsin, Medical Associates Health Plan, Quartz - Community</td>
</tr>
<tr>
<td>Iron</td>
<td>GHC of Eau Claire, HealthPartners Health Plan*, WEA Trust West - Chippewa Valley*</td>
</tr>
<tr>
<td>Jackson</td>
<td>HealthPartners Health Plan, Quartz - Community, WEA Trust West - Chippewa Valley, WEA Trust West - Mayo Clinic Health System</td>
</tr>
<tr>
<td>Jefferson</td>
<td>Dean Health Plan, GHC of South Central Wisconsin, HealthPartners Health Plan, Quartz - Community, WEA Trust - East</td>
</tr>
<tr>
<td>Juneau</td>
<td>Dean Health Plan, GHC of South Central Wisconsin, HealthPartners Health Plan, Quartz - Community, WEA Trust - East</td>
</tr>
<tr>
<td>Dane</td>
<td>Dean Health Plan, GHC of South Central Wisconsin, Quartz - UW Health</td>
</tr>
</tbody>
</table>

Open Enrollment 2020
Kenosha
- Network Health
- WEA Trust - East

Kewaunee
- Dean Health Plan - Prevea360
- Network Health
- Robin with HealthPartners
- WEA Trust - East

La Crosse
- HealthPartners Health Plan
- Quartz - Community
- WEA Trust West - Mayo Clinic Health System

Lafayette
- Dean Health Plan
- Medical Associates Health Plan
- Quartz - Community

Langlade
- GHC of Eau Claire
- HealthPartners Health Plan
- WEA Trust - East

Lincoln
- GHC of Eau Claire
- HealthPartners Health Plan
- WEA Trust - East

Manitowoc
- Dean Health Plan - Prevea360
- Network Health
- Robin with HealthPartners
- WEA Trust - East

Marathon
- GHC of Eau Claire
- Network Health
- HealthPartners Health Plan
- WEA Trust - East

Marinette
- Dean Health Plan - Prevea360*
- Network Health
- Robin with HealthPartners
- WEA Trust - East

Marquette
- Dean Health Plan*
- Network Health*
- Quartz - Community
- Robin with HealthPartners*
- WEA Trust - East

Menominee
- Dean Health Plan - Prevea360
- Network Health*
- Robin with HealthPartners
- WEA Trust - East

Milwaukee
- Network Health
- WEA Trust - East

Monroe
- HealthPartners Health Plan
- Quartz - Community
- WEA Trust West - Mayo Clinic Health System

Oconto
- Dean Health Plan - Prevea360
- Network Health
- Robin with HealthPartners
- WEA Trust - East

Oconto
- Dean Health Plan - Prevea360
- Network Health
- Robin with HealthPartners
- WEA Trust - East

Outagamie
- Dean Health Plan - Prevea360*
- Network Health
- Robin with HealthPartners
- WEA Trust - East

Ozaukee
- Network Health
- WEA Trust - East

Pepin
- Dean Health Plan - Prevea360*
- HealthPartners Health Plan
- WEA Trust West - Chippewa Valley
- WEA Trust West - Mayo Clinic Health System*

Racine
- Network Health
- WEA Trust - East

Richland
- Dean Health Plan
- HealthPartners Health Plan*
- Quartz - Community

Rock
- Dean Health Plan
- MercyCare Health Plan
- Quartz - Community
- WEA Trust - East

Rusk
- HealthPartners Health Plan
- WEA Trust West - Chippewa Valley
- WEA Trust West - Mayo Clinic Health System*

Sauk
- Dean Health Plan
- GHC of South Central Wisconsin
- Quartz - Community

Sawyer
- GHC of Eau Claire
- HealthPartners Health Plan
- WEA Trust West - Chippewa Valley
- WEA Trust West - Mayo Clinic Health System
Health Plan Ratings

Each year, participating health plans are evaluated on key care delivery areas, such as wellness, prevention, disease management and efficient use of resources. Use these ratings along with other information to make an informed decision. Full methodology and health plan report cards are available on our website.

<table>
<thead>
<tr>
<th>Health Plan</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dean Health Insurance</td>
<td>★★★★★☆</td>
</tr>
<tr>
<td>Dean, Prevea360</td>
<td></td>
</tr>
<tr>
<td>GHC of Eau Claire</td>
<td>★★★★★☆</td>
</tr>
<tr>
<td>GHC of South Central Wisconsin</td>
<td>★★★★★☆</td>
</tr>
<tr>
<td>HealthPartners</td>
<td>★★★★★☆</td>
</tr>
<tr>
<td>HealthPartners, Robin</td>
<td></td>
</tr>
<tr>
<td>Medical Associates</td>
<td>★★★★★☆</td>
</tr>
<tr>
<td>MercyCare</td>
<td>★★★★★☆</td>
</tr>
<tr>
<td>Network Health</td>
<td>★★★★★☆</td>
</tr>
<tr>
<td>Quartz</td>
<td>★★★★★☆</td>
</tr>
<tr>
<td>Community, UW Health</td>
<td></td>
</tr>
<tr>
<td>WEA Trust</td>
<td>★★★★★☆</td>
</tr>
<tr>
<td>Access Plan, East, West - Chippewa Valley, West - Mayo Clinic Health System, State Maintenance Plan (SMP)</td>
<td></td>
</tr>
</tbody>
</table>
Dental Insurance

Step 1: Sign up for basic coverage
Get covered for basic procedures such as cleanings, fluoride treatment, fillings and orthodontia

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

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

Step 2: Add more coverage if needed
Get covered for items such as crowns, bridges, dentures, implants and root canals

**Delta Dental PPO™ - Select Plan**

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

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.

<table>
<thead>
<tr>
<th></th>
<th>Uniform Dental</th>
<th>Preventive Plan</th>
<th>Select Plan</th>
<th>Select Plus Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$4</td>
<td>$30.20</td>
<td>$9.28</td>
<td>$16.82</td>
</tr>
<tr>
<td>Individual + Child(ren)</td>
<td>---</td>
<td>---</td>
<td>$12.52</td>
<td>$31.12</td>
</tr>
<tr>
<td>Individual + Spouse</td>
<td>---</td>
<td>---</td>
<td>$18.56</td>
<td>$33.64</td>
</tr>
<tr>
<td>Family</td>
<td>$9</td>
<td>$75.50</td>
<td>$22.28</td>
<td>$51.30</td>
</tr>
</tbody>
</table>

New for 2020!
## What is Covered

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

### Things to Note

- Uniform Dental coverage mirrors your health insurance coverage. Example: If you elect family health insurance with dental, you will be enrolled in family dental coverage.
- Enrollment continues each year unless you cancel during the open enrollment period.
- Make sure your dentist is covered. The Select Plan has fewer in-network dentists than the Select Plus, Uniform Dental and Preventive plans.

### Plan Administrator

![Delta Dental Logo]

1-844-337-8383
deltadentalwi.com/state-of-wi

All plans are offered through Delta Dental. Visit their website and create an account to find in-network providers, print ID cards, view your claims and more!
Supplemental Benefits

New for 2020!

**Accident Plan**
Provides a cash payment to help cover out-of-pocket expenses regardless of any other insurance coverage. This plan does not disqualify you for HDHP or traditional medical coverage.

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

And many other medical and support benefits including identity theft protection and travel assistance.

**Monthly Premium:**

<table>
<thead>
<tr>
<th></th>
<th>Individual</th>
<th>Individual + Spouse</th>
<th>Individual + Child(ren)</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$3.26</td>
<td>$4.94</td>
<td>$7.10</td>
<td>$10.46</td>
</tr>
</tbody>
</table>

**Vision Insurance**
Vision services from a nationwide network of providers with over 667 in Wisconsin.

**Coverage Includes:**
- No charge for standard progressive lenses, scratch resistant coating
- Biannual WellVision Exams for children, annual for adults
- Annual contact lens exam and $150 allowance for contacts or frames

**Monthly Premium:**

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

**Additional Benefits**
Visit our website to learn about additional benefits such as income continuation insurance (ICI), disability insurance, Wisconsin Public Employers Group Life Insurance and Wisconsin Deferred Compensation.

**UW System and UW Hospital and Clinics (UWHC) Employees**
You may have different supplemental plans available. Check with your HR/benefits office for details.
UW System: wisconsin.edu/ohrwd/benefits  -  UWHC: https://uconnect.wisc.edu/depts/uwhealth/benefits
Pre-Tax Savings Accounts

Get a tax break and save on a wide variety of expenses by enrolling in one of these accounts. Money is deducted pre-tax from your paycheck in equal amounts throughout the plan year. Visit www.connectyourcare.com/etf to learn more or call ConnectYourCare at 1-833-881-8158.

Health Care Flexible Spending Account (FSA)

Use for eligible health care expenses not covered by insurance for you and your eligible dependents
Money is available at the beginning of the year

<table>
<thead>
<tr>
<th>Annual Contribution Limit:</th>
<th>$2,700</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carryover Limit:</td>
<td>$500</td>
</tr>
</tbody>
</table>

Health Savings Account (HSA)

Use for health care expenses or additional retirement savings

What's special about the account:
- You own it - if you leave your job or retire, the money stays with you
- Your employer may add money to your account
- Money in your account earns interest and when you have over $1,000, you can invest your money in mutual funds
- Money is available as it is deposited

HDHP participants only

Limited Purpose Flexible Spending Account (LPFSA)

Use for certain dental, vision and post-deductible medical expenses not covered by insurance
Money is available at the beginning of the year

<table>
<thead>
<tr>
<th>Annual Contribution Limit:</th>
<th>$2,700</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carryover Limit:</td>
<td>$500</td>
</tr>
</tbody>
</table>

Dependent Day Care Account

Use for eligible care expenses for qualified dependents allowing you (or your spouse) to work, look for work or attend school full time
Money is available as it is deposited

<table>
<thead>
<tr>
<th>Annual Contribution Limit:</th>
<th>$5,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carryover Limit:</td>
<td>$0; no money carries over</td>
</tr>
</tbody>
</table>

Parking & Transit Accounts

A parking account is for work-related eligible parking expenses. A transit account is for eligible transit expenses related to your commute to work
Money is available as it is deposited

Not available to: UW System and UW Hospital & Clinics employees

<table>
<thead>
<tr>
<th>Transit Contribution Limit:</th>
<th>$265 / month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parking Contribution Limit:</td>
<td>$ 265 / month</td>
</tr>
<tr>
<td>Carryover Limit:</td>
<td>Unlimited; all money carries over</td>
</tr>
</tbody>
</table>

You must re-enroll each year. Elections do not carry forward from year to year.
Discrimination is Against the Law 45 C.F.R. §92.8(b)(1) & (d)(1)
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ETF provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats. ETF provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, contact ETF’s Office of Policy, Privacy & Compliance, which serves as ETF’s Civil Rights Coordinator.
If you believe that ETF has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: Compliance Office, Department of Employee Trust Funds, P.O. Box 7931, Madison, WI 53707-7931; 1-877-533-5020; TTY: 711; Fax: 608-267-4549; Email: ETFSMBPrivacyOfficer@etf.wi.gov. If you need help filing a grievance, ETF’s Compliance Office is available to help you.


Chinese: 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-877-533-5020 （TTY: 711）