

**It's Your Choice:  
Benefits That Fit Your Lifestyle**



# **2021 Health Benefits Decision Guide**

State of Wisconsin Group Health  
Insurance for Retirees  
and COBRA Continuants

ET-2108 (9/4/2020)



# About This Guide

This guide provides a high-level overview of benefits available to you for 2021; open enrollment is **September 28 - October 23, 2020**. For complete information, visit [etf.wi.gov/benefits-by-employer](http://etf.wi.gov/benefits-by-employer)

## 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.
  - You do not need to re-enroll in health, dental, or vision insurance each year if you want to keep the same coverage you have now. Double check that your providers are still available.
  - Every year, you *do* need to re-enroll for other options, such as an HSA account.

- 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.

HDHP participants only

- Re-enroll in your Health Savings Account (HSA)**  
You must re-enroll each year. 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](http://etf.wi.gov/ALEX) to get started. Or follow along in this guide. There are steps and guidance throughout.

#### **Are you a retiree with Medicare and non-Medicare members on your health insurance?**

Pick the Medicare health plan first.

- If Medicare Advantage or Medicare Plus is selected, then pick a second plan for your non-Medicare members.
- If Health Plan Medicare is selected, your non-Medicare members will have the same health plan, just the non-Medicare version.

- Enroll**

Once you've used ALEX or followed the steps in this book, go to our website to learn how to enroll or complete a paper application.



Do you have questions? Contact ETF at 1-877-533-5020.

# What's Changing in 2021

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## 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.

### Service Area Changes

The State Maintenance Plan will no longer be available in Forest County. Make sure your providers are in-network or select another plan.

## New Administrator for Vision

DeltaVision, in partnership with EyeMed Vision Care, is the new administrator for the supplemental vision benefit. If you currently have supplemental vision, your enrollment will automatically transfer to DeltaVision for plan year 2021. Keep an eye on your mailbox for your new vision member card from EyeMed!

## Pre-Tax Savings Accounts

### Contribution Limit Increases

Annual contribution limits for the Health Savings Account (HSA) have been raised to \$3,600 for individuals and \$7,200 for families.

### New Eligible Expenses

Eligible expenses for the HSA now include:

- Over-the-counter drugs and medicines not prescribed by a doctor (aspirin, cough medicine, decongestants, etc.).
- Menstrual care products (pads, liners, tampons, etc.).

## HDHP Telehealth

Not only is telehealth fast and affordable, it's also available to most members without any out-of-pocket costs. Federal COVID-19 relief legislation allows for telehealth services to be covered under a High Deductible Health Plan (HDHP) before the deductible is met for plan year 2021.

## Wellness

### New "Health Check" Activities

All non-Medicare Advantage members have more options to complete your "health check" activity, including a routine dental exam or a health coaching call, to earn your \$150 Well Wisconsin incentive in 2021.

### Health Plan-Offered Wellness Incentives

Effective January 1, 2021, UnitedHealthcare is the only health plan that may offer financial wellness incentives to members. All other members are encouraged to participate in Well Wisconsin, administered by StayWell, to earn the \$150 wellness incentive.

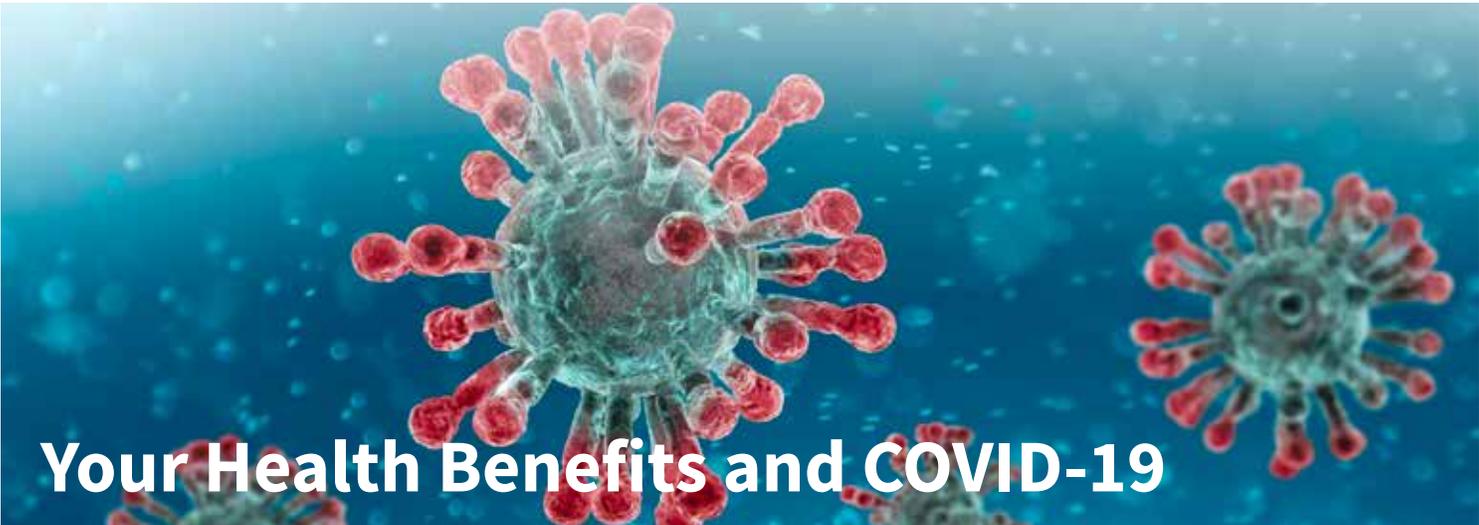
Silver Sneakers will still be available to Medicare Plus and Medicare Advantage members.

## New Medical Benefit

Biofeedback for urinary incontinence will now be covered.

## Electronic Pharmacy Enhancements

Navitus, the Pharmacy Benefit Manager, will launch the new eHealth Program for electronic prescribing, electronic prior authorization, and pharmacy benefit check. This new tool accesses your pharmacy benefit information at the site of care, helping to ensure your prescriptions are cost-effective and integrate with your current drug regimen. Your doctor can also submit electronic prescriptions and electronic prior authorizations, helping you to get the medications you need faster.



# Your Health Benefits and COVID-19

ETF continues to work closely with state health officials and health plans to ensure you receive the care you need during the COVID-19 outbreak. Visit [etf.wi.gov/etf-response-covid-19](https://etf.wi.gov/etf-response-covid-19) for the latest information about your health benefits and COVID-19.

## Testing

Your health plan provider will cover diagnostic and antibody testing received from an in-network provider. Cost sharing may apply. Some plans may cover out-of-network testing. Contact your plan for details.

## Vaccine Coverage

Should a COVID-19 vaccine become available during the 2021 plan year, the vaccine will be covered by your health plan.



## ETF Will Not Attend In-Person Benefit Fairs

Instead, ETF will host online events to provide information for the 2021 health plan year and answer your questions in an online forum.

- **Register online**  
Register anytime for an online event that fits with your schedule.
- **Save time, stay safe**  
Ask your questions from the comfort of home, no travel needed.
- **Stay connected**  
Hear from vendors like Delta Dental and StayWell, and ask your questions directly to the health plans.

Visit [etf.wi.gov](https://etf.wi.gov) for member education opportunities and to register.

# Need Care Fast? Know Your Options

When you need medical care, it's important to know where to turn. See [etf.wi.gov/video/get-medical-care-when-you-need-it-fast](https://etf.wi.gov/video/get-medical-care-when-you-need-it-fast) for a video that explains your options, including what makes sense for you and your wallet. Many health plans also offer a 24-hour nurseline. A nurseline may be useful to determine what type of care is most appropriate for your symptoms.

 <b>Telehealth</b>	 <b>Doctor's Office</b>	 <b>Urgent Care</b>	 <b>Emergency Care</b>
Fast, usually within 30 minutes	Same day appointments may be available	Expanded hours, open evenings and weekends	24/7 access
\$	\$\$	\$\$\$	\$\$\$\$
Minor, non-emergency medical needs	When you need in-person care	Non-life threatening, immediate medical needs	Serious medical needs

## Who's Your REASON?

### WELL WISCONSIN 2021: More Choices, Same Rewards

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 2021:** More options to complete your "health check" activity, including a routine dental visit and a health coaching call!

**Note:** Retirees will see taxes removed from the total gift card amount. Medicare Advantage participants are not eligible for the Well Wisconsin incentive and have wellness incentives available through UnitedHealthcare.



**WELL WISCONSIN**  
Healthier starts with you

[wellwisconsin.staywell.com](https://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.



For Participants without Medicare  
**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

# Quick Comparison

A high-level overview of the available plan designs. See the next page for a breakdown of costs when you visit the doctor, have labs drawn or fill a prescription.

	IYC Health Plan	High Deductible Health Plan (HDHP)	Access Plan	Access HDHP
Monthly Cost (Premium)	\$\$\$\$	\$\$\$\$	\$\$\$\$	\$\$\$\$
Cost Per Visit	\$\$\$\$	\$\$\$\$	\$\$\$\$	\$\$\$\$
Provider Availability	Local	Local	Nationwide	Nationwide
Nationwide Pharmacies	✓	✓	✓	✓
Out-of-Network Benefits	Emergency and urgent care	Emergency and urgent care	✓	✓
Available Health Plan(s)	9 plans	9 plans	WEA Trust	WEA Trust
Save money pre-tax in a Health Savings Account (required to have open account)	---	✓	---	✓

# Breakdown of Your Medical Costs

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

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

 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.

	IYC Health Plan	Access Plan	HDHP	Access HDHP
<b>Prescription Deductible</b> (Individual / Family)	None		Combined medical & pharmacy: \$1,500 / 3,000 You pay 100% of most pharmacy costs until deductible is met <sup>1</sup>	
<b>Prescription Copay / Coinsurance</b>				
<b>Level 1</b>	\$5 or less		After deductible: \$5 or less	
<b>Level 2</b>	20% (\$50 max)		After deductible: 20% (\$50 max)	
<b>Level 3</b>	40% (\$150 max) <sup>2</sup>		After deductible: 40% (\$150 max) <sup>2</sup>	
<b>Level 4</b>	\$50 copay <sup>3</sup>		After deductible: \$50 copay <sup>3</sup>	
<b>Preventive</b> (As federally required)	\$0 - Plan pays 100%		\$0 - Plan pays 100%	
<b>Prescription Out-Of-Pocket Limit</b>				
<b>Levels 1 &amp; 2</b> (Individual / Family)	\$600 / 1,200		Combined medical & pharmacy: \$2,500 / 5,000	
<b>Level 3</b> (Individual / Family)	\$6,850 / 13,700			
<b>Level 4</b> (Individual / Family)	\$1,200 / 2,400			

<sup>1</sup>Before 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.

<sup>2</sup>For 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.

<sup>3</sup>Must fill at Lumicera Health Services specialty pharmacy or UW Health Specialty Pharmacies.

## Save \$ on Your Medications with Mail Service



- **Lower cost**  
Get a 3-month supply for only 2 copays.
- **Easy refills**  
Order refills online or sign up for EZAutoFill.
- **Pharmacist support**  
Have a question about your medication? Pharmacists are available 24/7.
- **Secure, free, and fast delivery**  
Packaging is safe and respects your privacy. Delivery is free and fast.

For more information, visit [serve-you-rx.com/navitus](http://serve-you-rx.com/navitus) or call **1-800-481-3340**.



For Participants with Medicare

## 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 your health plan will help pay for services not covered by Medicare

## Quick Comparison

A high-level overview of the available It's Your Choice plan designs. See the next page for a breakdown of costs when you visit the doctor, have labs drawn or fill a prescription.

	Medicare Advantage	Medicare Plus	Health Plan Medicare
Monthly Cost (Premium)	\$\$\$	\$\$\$	\$\$\$
Provider Availability (Provider must accept Medicare payments)	Nationwide	Worldwide	Local
Nationwide Pharmacies	✓	✓	✓
Available Health Plan(s)	UnitedHealthcare	WEA Trust	9 plans
Helps Pay for Services Not Covered by Medicare	✓ Also helps pay for: hearing aids, routine hearing and vision exams, durable medical equipment not covered by Medicare	None	✓ Also helps pay for: hearing aids, routine hearing and vision exams, durable medical equipment not covered by Medicare
Covered Length of Stay at a Skilled Nursing Facility	120 days at any facility	120 days at a Medicare-approved facility, or 30 days at a facility not approved by Medicare	120 days at any facility

# Breakdown of Your Medical Costs

	Medicare Advantage & Health Plan Medicare	Medicare Plus
<b>Annual Medical Deductible</b>	\$0	\$0
<b>Annual Medical Coinsurance</b>	\$0*	\$0*
<b>Annual Medical Out-of-Pocket Limit (OOPL)</b>	None*	None*
<b>Outpatient illness/injury related services</b>	\$0	\$0
<b>Emergency Room Copay</b>	\$60 copay (Waived if admitted as an inpatient directly from the emergency room or for observation for 24 hours or longer)	\$0
<b>Licensed Skilled Nursing Facility</b> Medicare-covered services in a Medicare-approved facility	\$0 for the first 120 days, 100% after 120 days <b>3-day hospital stay required</b> for Health Plan Medicare (Not required for Medicare Advantage)	\$0 for the first 120 days, 100% after 120 days <b>Requires a 3-day hospital stay</b>
<b>Licensed Skilled Nursing Facility</b> (Non-Medicare approved facility) If admitted within 24 hours following a hospital stay	\$0 for the first 120 days, 100% after 120 days	\$0 for eligible expenses for the first 30 days, 100% after 30 days
<b>Hospital</b> Semiprivate room and board, and miscellaneous hospital services and supplies such as drugs, X-rays, lab tests and operating room	\$0 Must be medically necessary and in-network unless emergency	\$0 for first 90 days and up to 150 days with “lifetime reserve” "Lifetime reserve" days are a one-time additional 60 days of hospital coverage paid by Medicare Once “lifetime reserve” is exhausted, you pay 100% after 90 days
<b>Medical Supplies</b> Durable medical equipment, durable diabetic equipment and related supplies	<b>Medicare-approved supplies:</b> 20% up to \$500 OOPL per individual, after OOPL: \$0 <b>Supplies NOT covered by Medicare:</b> 20% up to \$500 OOPL per individual, after OOPL: \$0	<b>Medicare-approved supplies: \$0</b> <b>Supplies NOT covered by Medicare: 100%</b>
<b>Routine Hearing Exam</b>	\$0	100%
<b>Hearing Exam for Illness or Disease</b>	\$0	\$0

	Medicare Advantage & Health Plan Medicare	Medicare Plus
<b>Hearing Aid</b> per ear, every 3 years	20% until plan pays \$1,000, then 100% of the costs	100%
<b>Home Health Care</b> If receiving care under a doctor for part-time skilled nursing care, part-time home health aide care, physical therapy, occupational therapy, speech-language pathology services, medical social services	<p><b>Medicare pays:</b> 100% for visits considered medically necessary by Medicare, generally fewer than 7 days a week, less than 8 hours a day and 28 or fewer hours per week for up to 21 days</p> <p><b>Plan pays:</b> 100% for 50 visits per year, plan may approve an additional 50 visits</p> <p><b>Medicare Advantage</b> has no visit limits</p> <p><b>You pay:</b> Full costs of visits not covered by Medicare and the plan beyond the 50 (or if approved, 100) visits per year</p>	<p><b>Medicare pays:</b> 100% for visits considered medically necessary by Medicare, generally fewer than 7 days a week, less than 8 hours a day and 28 or fewer hours per week for up to 21 days</p> <p><b>Plan pays:</b> 100% for up to 365 visits per year</p> <p><b>You pay:</b> Full costs of visits beyond 365 visits per year</p>

\*Different for medical supplies and hearing aids

## Breakdown of Your Pharmacy Costs

You must use an in-network pharmacy. Visit [members.navitus.com](https://members.navitus.com) to find an in-network pharmacy near you. In-network pharmacies are available nationwide. All It's Your Choice Medicare plan designs have the same pharmacy benefits.

<b>Prescription Deductible</b>	None
<b>Prescription Copay / Coinsurance</b>	
<b>Level 1</b>	Up to \$5
<b>Level 2</b>	20% (\$50 max)
<b>Level 3</b>	40% (\$150 max)
<b>Level 4</b>	\$50*
<b>Preventive</b> As federally required	\$0 - Plan pays 100%
<b>Prescription Out-Of-Pocket Limit</b>	
<b>Levels 1 &amp; 2</b> (Individual / Family)	\$600 / 1,200
<b>Level 3</b> (Individual / Family)	\$6,850 / 13,700
<b>Level 4</b> (Individual / Family)	\$1,200 / 2,400

\*Price if you fill at Lumicera specialty pharmacy or UW Health Specialty Pharmacies. If you do not fill at one of these pharmacies, you will pay 40% (\$200 max). The amounts paid will not apply to the Level 4 OOP, rather, to a limit of \$6,850 individual / \$13,700 family.



## For all participants Step 2: Choose a Health Plan

Complete this step if you selected the IYC Health Plan, HDHP or Health Plan Medicare. Skip the map and turn to pages 15-17 for rates if you selected:

- an Access Plan design (available worldwide),
- Medicare Advantage (available nationwide), or
- Medicare Plus (available worldwide).

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\*

Available in every county: **Medicare Advantage** (available nationwide), or the **Access Plan** or **Medicare Plus** (both available worldwide).

\*limited provider availability

## Brown

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

## Buffalo

- Dean Health Plan - Prevea360\*
- HealthPartners Health Plan
- WEA Trust West - Mayo Clinic Health System

## Burnett

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

## Calumet

- Network Health
- Robin with HealthPartners
- WEA Trust - East

## Chippewa

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

## Clark

- GHC of Eau Claire
- HealthPartners Health Plan
- Quartz - Community\*
- WEA Trust West - Chippewa Valley

## Columbia

- Dean Health Plan
- GHC of South Central Wisconsin
- Quartz - Community
- WEA Trust - East

## Crawford

- Dean Health Plan\*
- HealthPartners Health Plan
- Medical Associates Health Plan
- Quartz - Community
- WEA Trust West - Mayo Clinic Health System

## Dane

- Dean Health Plan
- GHC of South Central Wisconsin
- Quartz - UW Health

## Dodge

- Dean Health Plan
- Network Health
- Quartz - Community
- WEA Trust - East
- WEA Trust West - Mayo Clinic Health System\*

## Door

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

## Douglas

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

## Dunn

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

## Eau Claire

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

## Florence

- Robin with HealthPartners

## Fond du Lac

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

## Forest

- HealthPartners Health Plan
- WEA Trust - East

## Grant

- Dean Health Plan
- HealthPartners Health Plan
- GHC of South Central Wisconsin\*
- Medical Associates Health Plan
- Quartz - Community

## Green

- Dean Health Plan
- MercyCare Health Plan\*
- Quartz - Community

## Green Lake

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

## Iowa

- Dean Health Plan
- GHC of South Central Wisconsin
- Medical Associates Health Plan
- Quartz - Community

## Iron

- GHC of Eau Claire
- HealthPartners Health Plan\*
- WEA Trust West - Chippewa Valley\*

## Jackson

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

\*limited provider availability

Available in every county: **Medicare Advantage** (available nationwide), or the **Access Plan** or **Medicare Plus** (both available worldwide).

## Jefferson

- Dean Health Plan
- GHC of South Central Wisconsin
- MercyCare Health Plan
- Quartz - Community
- WEA Trust - East

## Juneau

- Dean Health Plan
- GHC of South Central Wisconsin
- HealthPartners Health Plan
- Quartz - Community
- WEA Trust - East

## 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
- GHC of South Central Wisconsin\*
- 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
- 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

## Oneida

- GHC of Eau Claire
- HealthPartners Health Plan
- 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

## Pierce

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

## Polk

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

## Portage

- HealthPartners Health Plan
- Network Health
- WEA Trust - East

## Price

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

## 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

\*limited provider availability

Available in every county: **Medicare Advantage** (available nationwide), or the **Access Plan** or **Medicare Plus** (both available worldwide).

## 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

## Shawano

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

## Sheboygan

- Dean Health Plan - Prevea360
- Network Health
- WEA Trust - East

## St. Croix

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

## Taylor

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

## Trempealeau

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

## Vernon

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

## Vilas

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

## Walworth

- Dean Health Plan\*
- MercyCare Health Plan
- Quartz - Community
- WEA Trust - East

## Washburn

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

## Washington

- Network Health
- WEA Trust - East

## Waukesha

- Dean Health Plan
- Network Health
- Quartz - Community
- WEA Trust - East

## Waupaca

- Network Health
- Robin with HealthPartners
- WEA Trust - East

## Waushara

- Network Health\*
- Robin with HealthPartners
- WEA Trust - East

## Winnebago

- Network Health
- Robin with HealthPartners
- WEA Trust - East

## Wood

- HealthPartners Health Plan
- Quartz - Community\*
- WEA Trust - East

\*limited provider availability

Available in every county: **Medicare Advantage** (available nationwide), or the **Access Plan** or **Medicare Plus** (both available worldwide).



# Health Plan Quality

Each year, participating health plans are evaluated on key care delivery areas, such as wellness, prevention, disease management, customer satisfaction, and efficient use of resources. Participating health plans report health care quality outcomes to leading national organizations, such as the National Committee for Quality Assurance (NCQA) and the Centers for Medicare & Medicaid Services (CMS). Visit [etf.wi.gov](http://etf.wi.gov) for more information about health plan quality. You can use these quality resources to help make an informed decision about which health plan is right for you.

# Monthly Premiums (Retirees without Medicare)

Uniform Dental premiums are added to your medical premiums if you choose coverage. Prices are shown with and without Uniform Dental. Other dental plans are available. See page 19 for dental information.

	IYC Health Plan		HDHP	
	Individual with / without dental	Family with / without dental	Individual with / without dental	Family with / without dental
Dean Health Insurance	\$748.40 / 718.20	\$1,834.02 / 1,758.52	\$651.30 / 621.10	\$1,591.26 / 1,515.76
Dean Health Insurance - Prevea360	\$832.60 / 802.40	\$2,044.52 / 1,969.02	\$723.72 / 693.52	\$1,772.32 / 1,696.82
GHC of Eau Claire	\$880.96 / 850.76	\$2,165.42 / 2,089.92	\$765.30 / 735.10	\$1,876.26 / 1,800.76
GHC of South Central Wisconsin	\$720.20 / 690.00	\$1,763.52 / 1,688.02	\$627.04 / 596.84	\$1,530.62 / 1,455.12
HealthPartners Health Plan	\$869.92 / 839.72	\$2,137.82 / 2,062.32	\$755.80 / 725.60	\$1,852.52 / 1,777.02
Medical Associates Health Plans	\$806.68 / 776.48	\$1,979.72 / 1,904.22	\$701.42 / 671.22	\$1,716.56 / 1,641.06
MercyCare Health Plans	\$746.40 / 716.20	\$1,829.02 / 1,753.52	\$649.58 / 619.38	\$1,586.96 / 1,511.46
Network Health	\$897.36 / 867.16	\$2,206.42 / 2,130.92	\$779.40 / 749.20	\$1,911.52 / 1,836.02
Quartz - Community	\$853.94 / 823.74	\$2,097.86 / 2,022.36	\$742.06 / 711.86	\$1,818.16 / 1,742.66
Quartz - UW Health	\$738.26 / 708.06	\$1,808.66 / 1,733.16	\$642.58 / 612.38	\$1,569.46 / 1,493.96
Robin with HealthPartners Health Plan	\$903.90 / 873.70	\$2,222.76 / 2,147.26	\$785.02 / 754.82	\$1,925.56 / 1,850.06
State Maintenance Plan (SMP) <sup>1</sup> by WEA Trust	\$987.60 / 957.40	\$2,432.02 / 2,356.52	\$840.44 / 810.24	\$2,064.12 / 1,988.62
WEA Trust - East	\$874.28 / 844.08	\$2,148.72 / 2,073.22	\$759.56 / 729.36	\$1,861.92 / 1,786.42
WEA Trust West - Chippewa Valley	\$896.52 / 866.32	\$2,204.32 / 2,128.82	\$778.68 / 748.48	\$1,909.72 / 1,834.22
WEA Trust West - Mayo Clinic Health System	\$938.52 / 908.32	\$2,309.32 / 2,233.82	\$814.80 / 784.60	\$2,000.02 / 1,924.52
	Access Plan		Access HDHP	
	Individual with / without dental	Family with / without dental	Individual with / without dental	Family with / without dental
WEA Trust <sup>1</sup>	\$1,466.00 / 1,435.80	\$3,628.02 / 3,552.52	\$1,242.28 / 1,212.08	\$3,068.74 / 2,993.24

<sup>1</sup>Members with the Access Plan or SMP coverage who enroll in Medicare Parts A and B will automatically be moved to the Medicare Plus plan. All other non-Medicare family members will remain covered under the Access Plan or the State Maintenance Plan (SMP).

# Monthly Premiums (Retirees with Medicare)

“**Medicare All**” is family coverage where all insured members are enrolled in Medicare Parts A, B and D.

“**Medicare Some**” is family coverage with at least one insured family member enrolled in Medicare Parts A, B and D. The “Medicare Some” rates below include the IYC Health Plan for non-Medicare members. For HDHP rates, visit our website. Prices are shown with and without Uniform Dental. Other dental plans are available. See page 19 for dental information.

	<b>Individual</b> with / without dental	<b>Medicare Some</b> with / without dental	<b>Medicare All</b> with / without dental
<b>Medicare Advantage</b>			
UnitedHealthcare	\$278.16 / 247.96	See next page	\$531.66 / 471.26
<b>Medicare Plus</b>			
WEA Trust	\$383.48 / 353.28	See next page	\$742.30 / 681.90
<b>Health Plan Medicare</b>			
Dean Health Insurance	\$442.16 / 411.96	\$1,165.90 / 1,105.50	\$859.66 / 799.26
Dean Health Insurance - Prevea360	\$508.04 / 477.84	\$1,315.98 / 1,255.58	\$991.42 / 931.02
GHC of Eau Claire	\$491.64 / 461.44	\$1,347.94 / 1,287.54	\$958.62 / 898.22
GHC of South Central Wisconsin	\$459.92 / 429.72	\$1,155.46 / 1,095.06	\$895.18 / 834.78
HealthPartners Health Plan	\$410.26 / 380.06	\$1,255.52 / 1,195.12	\$795.86 / 735.46
Medical Associates Health Plans	\$384.16 / 353.96	\$1,166.18 / 1,105.78	\$743.66 / 683.26
MercyCare Health Plans	\$423.86 / 393.66	\$1,145.60 / 1,085.20	\$823.06 / 762.66
Network Health	\$471.24 / 441.04	\$1,343.94 / 1,283.54	\$917.82 / 857.42
Quartz - Community	\$464.18 / 433.98	\$1,293.46 / 1,233.06	\$903.70 / 843.30
Quartz - UW Health	\$416.74 / 386.54	\$1,130.34 / 1,069.94	\$808.82 / 748.42
Robin with HealthPartners Health Plan	\$421.36 / 391.16	\$1,300.60 / 1,240.20	\$818.06 / 757.66
State Maintenance Plan (SMP) by WEA Trust	\$383.48 / 353.28	\$1,346.42 / 1,286.02	\$742.30 / 681.90
WEA Trust - East	\$429.82 / 399.62	\$1,279.44 / 1,219.04	\$834.98 / 774.58
WEA Trust West - Chippewa Valley	\$437.46 / 407.26	\$1,309.32 / 1,248.92	\$850.26 / 789.86
WEA Trust West - Mayo Clinic Health System	\$452.02 / 421.82	\$1,365.88 / 1,305.48	\$879.38 / 818.98

# Monthly Premiums

## “Medicare Some” Rates for Medicare Plus & Medicare Advantage

When you select Medicare Advantage or Medicare Plus to coordinate with your Medicare coverage, you can select a different health plan for your non-Medicare members. The rates below are for the IYC Health Plan design. Prices are shown with and without Uniform Dental. Other dental plans are available. See page 19 for dental information. For HDHP rates, visit our website.

Non-Medicare Health Plan	with Medicare Advantage with / without dental	with Medicare Plus with / without dental
Dean Health Insurance	\$1,001.90 / 941.50	\$1,107.22 / 1,046.82
Dean Health Insurance - Prevea360	\$1,086.10 / 1,025.70	\$1,191.42 / 1,131.02
GHC of Eau Claire	\$1,134.46 / 1,074.06	\$1,239.78 / 1,179.38
GHC of South Central Wisconsin	\$973.70 / 913.30	\$1,079.02 / 1,018.62
HealthPartners Health Plan	\$1,123.42 / 1,063.02	\$1,228.74 / 1,168.34
Medical Associates Health Plans	\$1,060.18 / 999.78	\$1,165.50 / 1,105.10
MercyCare Health Plans	\$999.90 / 939.50	\$1,105.22 / 1,044.82
Network Health	\$1,150.86 / 1,090.46	\$1,256.18 / 1,195.78
Quartz - Community	\$1,107.44 / 1,047.04	\$1,212.76 / 1,152.36
Quartz - UW Health	\$991.76 / 931.36	\$1,097.08 / 1,036.68
Robin with HealthPartners Health Plan	\$1,157.40 / 1,097.00	\$1,262.72 / 1,202.32
State Maintenance Plan (SMP) by WEA Trust	\$1,241.10 / 1,180.70	\$1,346.42 / 1,286.02
WEA Trust - East	\$1,127.78 / 1,067.38	\$1,233.10 / 1,172.70
WEA Trust West - Chippewa Valley	\$1,150.02 / 1,089.62	\$1,255.34 / 1,194.94
WEA Trust West - Mayo Clinic Health System	\$1,192.02 / 1,131.62	\$1,297.34 / 1,236.94
Access Plan by WEA Trust	\$1,719.50 / 1,659.10	\$1,824.82 / 1,764.42



For all participants

## Step 3: Consider Supplemental Benefits

Get even more coverage by signing up for vision or dental insurance.

HDHP participants: don't forget to enroll in a Health Savings Account to save pre-tax money for health care expenses. You must enroll each year.

### Health Savings Account (HSA) HDHP participants only

Use for health care expenses or additional retirement savings

#### What's special about the account:

- You own it - the money stays with you even if you switch health plans
- 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
- After you turn 65, you can withdraw money for any purpose without penalty (though it will be taxed)

You must re-enroll each year. Visit [www.connectyourcare.com/etf](http://www.connectyourcare.com/etf) for enrollment instructions and a copy of the retiree application. To be eligible, you cannot have any other health coverage that pays for out-of-pocket health care expenses before you meet your IYC HDHP deductible, including Medicare A and B.

Retirees that opt out of the HDHP but keep an HSA open and active with ConnectYourCare will pay a monthly administrative service fee. Retirees enrolled in the HDHP/HSA benefit option are not required to pay the monthly administrative fee.



1-833-881-8158

[www.connectyourcare.com/etf](http://www.connectyourcare.com/etf)

**Annual Contribution Limit:**  
Individual: \$3,600 | Family: \$7,200

**Carryover Limit:**  
Unlimited; All money carries over

**Annual Catch-Up Contribution Limit:** (Age 55-65 only)  
\$1,000



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- See medication and benefit information

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# Dental Insurance

## Step 1: Sign up for basic coverage

Get covered for basic procedures such as cleanings, fluoride treatment, fillings and orthodontia

### Uniform Dental

Only available to those **enrolled** in health insurance under the State of Wisconsin Group Health Insurance Program

or

### 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

or

### 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.

	Uniform Dental	Preventive Plan	Select Plan	Select Plus Plan
Retiree	\$30.20	\$30.20	\$15.44	\$27.06
Retiree + Child(ren)	---	---	\$21.19	\$50.06
Retiree + Spouse	---	---	\$31.39	\$54.12
Family	\$75.50*	\$75.50	\$37.67	\$82.54

\*Medicare Some or Medicare All recipients pay a family rate of \$60.40

## 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



1-844-337-8383

[deltadentalwi.com/state-of-wi](http://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!

# 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

# Vision Insurance

DeltaVision, in partnership with EyeMed Vision Care, will be the plan administrator beginning January 2021. Check that your vision provider is in network, or note the cost and coverage differences for out-of-network providers. Visit [www.deltadentalwi.com/state-of-wi-vision](http://www.deltadentalwi.com/state-of-wi-vision) to find more coverage information and [www.eyemedvisioncare.com](http://www.eyemedvisioncare.com) for in-network providers.

## Monthly Cost (Premium)

The DeltaVision premium is an additional monthly cost, and is not included in your health insurance premium. Note the cost and coverage differences when you choose to see an in- or out-of-network provider.

Retiree	Retiree + Spouse	Retiree + Child(ren)	Family
\$5.72	\$11.42	\$11.42	\$13.41

## What is Covered

	In-Network Providers	Out-of-Network Providers
Yearly routine exam copay	\$15 / person (covered up to twice a year for children)	Up to \$45 / person
Eyeglasses exam copay	\$15 / person	Up to \$45 / person
Contact lens exam copay	\$40 / person	Up to \$45 / person
Retinal imaging copay	Up to \$39 / person	No coverage
Frames/lens copay	\$0 copay \$150 allowance 20% off any cost over \$150	Up to \$70 / person
Single vision eyeglasses copay	\$25 / person	Up to \$30 / person
Bifocal eyeglasses copay	\$25 / person	Up to \$50 / person
Conventional contacts	\$0 copay \$150 allowance 15% off any cost over \$150	Up to \$105 / person
Disposable contacts	\$0 copay \$150 allowance	Up to \$105 / person

### Things to Note

- DeltaVision is the new plan administrator. (Yes, a close relation to Delta Dental. Don't worry, they take care of eyes too.)
- Current vision enrollments will continue with DeltaVision in 2021 unless you cancel during the open enrollment period.
- Make sure your vision provider is covered.

### Plan Administrator

New provider for 2021!

# DeltaVision®

1-844-337-8383

[deltadentalwi.com/state-of-wi-vision](http://deltadentalwi.com/state-of-wi-vision)

See [etf.wi.gov](http://etf.wi.gov) for complete coverage. Contact DeltaVision with questions.

# Health Plan and Vendor Contact Information

ConnectYourCare  
1-833-881-8158  
[www.connectyourcare.com/etf](http://www.connectyourcare.com/etf)

Dean Health Insurance  
1-800-279-1301  
[deancare.com/wi-employees](http://deancare.com/wi-employees)

Dean Health Insurance-Prevea360 Health Plan  
1-877-230-7555  
[prevea360.com/wi-employees](http://prevea360.com/wi-employees)

Delta Dental  
1-844-337-8383  
[deltadentalwi.com/state-of-wi](http://deltadentalwi.com/state-of-wi)

DeltaVision in partnership with EyeMed Vision Care  
1-844-337-8383  
[deltadentalwi.com/state-of-wi-vision](http://deltadentalwi.com/state-of-wi-vision)

Group Health Cooperative of Eau Claire (GHC-EC)  
1-888-203-7770, 715-552-4300  
[group-health.com](http://group-health.com)

Group Health Cooperative of South Central Wisconsin  
(GHC-SCW)  
1-800-605-4327, 608-828-4853  
[ghcscw.com](http://ghcscw.com)

HealthPartners Health Plan  
1-855-542-6922, 952-883-5000  
[healthpartners.com/stateofwis](http://healthpartners.com/stateofwis)

Medical Associates Health Plans  
1-866-421-3992  
[mahealthcare.com](http://mahealthcare.com)

MercyCare Health Plans  
1-800-895-2421 option 5  
[mercycahealthplans.com](http://mercycahealthplans.com)

Navitus Health Solutions  
1-866-333-2757  
[www.navitus.com](http://www.navitus.com)

Navitus MedicareRx (PDP)  
(Prescription drug coverage for Medicare eligible  
retirees)  
1-866-270-3877  
[medicarerx.navitus.com](http://medicarerx.navitus.com)

Network Health  
1-844-625-2208, 920-720-1811  
[networkhealth.com/employer/state](http://networkhealth.com/employer/state)

Quartz  
1-844-644-3455  
[ChooseQuartz.com](http://ChooseQuartz.com)

Robin with HealthPartners Health Plan  
1-855-542-6922  
[healthpartners.com/etfrobin](http://healthpartners.com/etfrobin)

Securian Financial  
1-866-295-8690  
[www.LifeBenefits.com/plandesign/WIETF](http://www.LifeBenefits.com/plandesign/WIETF)

StayWell  
1-800-821-6591  
[wellwisconsin.staywell.com](http://wellwisconsin.staywell.com)

UnitedHealthcare  
1-844-876-6175  
[UHCRetiree.com/etf](http://UHCRetiree.com/etf)

WEA Trust  
1-866-485-0630  
[weatrusterstate.com](http://weatrusterstate.com)



## Open Enrollment: September 28 - October 23, 2020

Mailed application must be postmarked by October 23, 2020



**1-877-533-5020**

7:00 a.m. to 5:00 p.m. (CST)  
Monday-Friday



**PO Box 7931  
Madison, WI 53707-7931**



**etf.wi.gov**



**@wi\_etf**

### **Nondiscrimination and Language Access** 42 U.S. Code § 18116

ETF complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

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 (large print, audio, accessible electronic formats and others). 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 at 1-877-533-5020; TTY: 711. 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: ETF Office of Policy, Privacy & Compliance  
P.O. Box 7931, Madison, WI 53707-7931  
1-877-533-5020; TTY: 711 • Fax: 608-267-4549  
Email: ETFSMBPrivacyOfficer@etf.wi.gov

**Spanish – ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-533-5020 (TTY: 711).

**Hmong – LUS CEEV:** Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-877-533-5020 (TTY: 711).

**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)

**German – ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.  
Rufnummer: 1-877-533-5020 (TTY: 711).

**Arabic – ملاحظة:** إذا كنت تتحدث اللغة العربية، فهناك خدمة مساعدة متاحة بلغتك دون أي مصاريف: اتصل بالرقم (1-877-533-5020 (خدمة الصم والبكم: 711)

**Russian – ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-877-533-5020 (телетайп: 711).

**Korean – 주의:** 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.  
1-877-533-5020 (TTY: 711)번으로 전화해 주십시오.

If you need help filing a grievance, ETF's Office of Policy, Privacy & Compliance is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal at [crportal.hhs.gov/ocr/portal/lobby.jsf](http://crportal.hhs.gov/ocr/portal/lobby.jsf) or by mail or phone:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201

1-800-368-1019; 1-800-537-7697 (TDD)

Complaint forms are available at [hs.gov/ocr/office/file/index.html](http://hs.gov/ocr/office/file/index.html).

The Wisconsin Department of Employee Trust Funds is a state agency that administers the Wisconsin Retirement System pension, health insurance and other benefits offered to eligible government employees, former employees and retirees.

**Vietnamese – CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-877-533-5020 (TTY: 711).

**Pennsylvania Dutch –** Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzsch, kannsch du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprouch. Ruf selli Nummer uff: Call 1-877-533-5020 (TTY: 711).

**Laotian/Lao – ໂປດຄຳບອກ:** ຖ້າວ່າທ່ານເວົ້າພາສາລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທສ 1-877-533-5020 (TTY: 711).

**French – ATTENTION :** Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.  
Appelez le 1-877-533-5020 (ATS : 711).

**Polish – UWAGA:** Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-877-533-5020 (TTY: 711).

**Hindi – ध्यान दें:** यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-877-533-5020 (TTY: 711) पर कॉल करें।

**Albanian – KUJDES:** Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, papagesë.  
Telefononi në 1-877-533-5020 (TTY: 711).

**Tagalog – PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-877-533-5020 (TTY: 711).

For EEOC, COBRA, ACA marketplace and more federal and state notices, visit [etf.wi.gov](http://etf.wi.gov)

Every effort has been made to ensure information in this guide is accurate. In the event of conflicting information, federal law, state statute, state health contracts and/or policies and provisions established by the State of Wisconsin Group Insurance Board shall be followed. The most current information can be found at [etf.wi.gov](http://etf.wi.gov).