



# My Insurance Benefits Member Guide

ET-1109 (REV 6/30/2025)  
Version 1.0



Revised October 24, 2023

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*Benefitfocus*

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**Disclaimer**

This resource includes images containing sample data to better illustrate the functionality of the software. All sample data displayed in the figures throughout this document is simulated, non-personal data.

**Version Control**

The information contained within is documented jointly by Benefitfocus and ETF. Changes to this document are summarized in the table below.

Version	Describe reason for change, changes made and any other important items to note	Updates Made by	Date
1.0	Original Version	Kari Navis, Jennifer Henry, Kim Powell	06/27/2025
1.1			
1.2			
1.3			
1.4			
1.5			
1.6			
1.7			
1.8			
1.9			
2.0			

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# 1. About This Guide

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This guide demonstrates step-by-step procedures to help you enroll in your benefit elections and covers a variety of scenarios, such as new hire enrollment, open enrollment, or changes due to a qualified life event, such as birth, marriage, etc. The benefit enrollment examples in this document are for typical benefit elections.

The following icons are used to highlight additional information, alerts, and suggestions:

Icon	Description
	The <i>note</i> icon provides additional or important information about special conditions, suggestions, or actions that should be taken.
	The <i>alerts</i> icon is a warning, often cautioning you against taking certain actions.
	The <i>tip</i> icon provides additional, more efficient instructions when completing a task.

## 1.1. Tips for This Guide

The My Insurance Benefit application is a user-friendly system that allows you to take a more active role in managing your ETF-administered insurance benefits. All eligible members are encouraged to actively use this application, which provides you with access to your ETF insurance benefits and other resources.

	My Insurance Benefits is ETF's name for the Benefitplace platform. My Insurance Benefits and Benefitplace are interchangeable. Benefitfocus is the company that owns, supports, and administers the Benefitplace platform.
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## 1.2. Protected Health Information (PHI) or Personally Identifiable Information (PII)

ETF is committed to protecting the privacy and security of member information in digital and paper format. We use information only for the purposes for which it was provided to us. We ensure strong privacy and security policies and educate staff on proper handling of your identifying information. Electronic information is protected by safeguards such as firewalls and we employ numerous tools to ensure the quality and integrity of your digital information.

# 2. Getting Started – Important Information

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## 2.1. Best Practices & Useful Information

The following are general principles that apply broadly to this guide and the My Insurance Benefits platform:

- The Wisconsin Department of Employee Trust Funds offers insurance and wellness programs to a variety of state

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and local agencies and employers. Not all groups will offer all benefits nor utilize all system functionality. Benefit plans and programs vary by organization; not all benefit plans/programs are available to all organizations.

- Rules documented within this guide are as defined by ETF. More information on the plan offerings, coverage, and eligibility rules can be found on the ETF website at [etf.wi.gov/insurance](http://etf.wi.gov/insurance).
- Data accuracy is a key component of ensuring that your record is up to date. Be sure to immediately notify your employer whenever there is an address change. In the event of a qualified life event, such as birth, marriage, etc., make sure to visit My Insurance Benefits within the applicable time period (generally 30 days from event) to update your coverage, as needed. Accurate data ensures that you always have the most current benefits available to you and your benefits carriers have the information they need.
- The examples displayed within this guide are some of the most common examples you will encounter on a regular basis. The process to elect, change, or add and remove coverage is defined by the system and very similar regardless of plan. The system will guide the HR Administrator and/or member through the execution of the activity.
- Screenshots are included within this guide to assist with navigation and understanding. These screenshots may contain years, plan names, rates, carriers, and/or other information that is not an exact match to current information nor to your particular employer or employee. While the details within these screenshots will vary overtime, they are examples, not exact replicas of the platform at all times. Any names or information that seems similar to a real person is not as all individuals and data sets are scrambled, test data.
- Your employer may offer additional benefit programs that need to be enrolled in outside of My Insurance Benefits. Be sure to make changes and/or complete your enrollments for all benefits that are available to you.
- Blue text throughout the My Insurance Benefits site works like a webpage hyperlink. Just like a web link, if you click on it, the link will take you to another screen and/or open a new window that allows access to more information and/or the completion of a process.
- The instructions provided in the guide are one way to access information and complete an action. However, there are often other ways that the same activity can be completed. The platform is designed to provide users with a simple experience, so do the way that is easiest for you.

## **2.2. Terminology**

This document uses the following terms:

- Employee, member, participant, etc. may be used interchangeably. Depending on context these terms may reflect the individual that is employed by the organization, a person who has retired from the organization, and/or someone who is enrolled and/or eligible but is a dependent of the member.
- Employer, group, sponsor, and organization are used interchangeably to reference employers and departments under the ETF umbrella.
- Open Enrollment (OE), Annual Enrollment (AE), and Annual Renewal are interchangeable terms that relate to the ability for members to review and change their health-related benefits enrollments on an annual basis without a qualifying life event.

## **2.3. System of Record**

Your employer's Human Resource Information System (HRIS), payroll, and/or other employee tracking system or method is the system of record. This means demographic data points including legal name, date of birth, Social Security Number (SSN), as well as employment-related data elements such as:

- Status (active, term, on leave, retiree etc.)
- Date of Hire
- Date of Termination
- Work email Address

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- Job Title
- Manager
- Rate of Pay
- Tenure

	Certain other member data cannot be manually adjusted (added, changed, or deleted) within the My Insurance Benefits platform. The source system and/or tracking process must be corrected by the member by working with their employer, which once corrected will be supplied to My Insurance Benefits.
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## 2.4. Reference Material

For more information or additional help, please reference the following sources:

Self-Service Support - 24 Hours a Day	
<b>ETF Website</b> Provides Benefit program information including policies, plan information, and a wide variety of other helpful reference materials.	<a href="https://etf.wi.gov/benefits">Benefits   ETF (wi.gov)</a> <a href="https://etf.wi.gov/benefits">etf.wi.gov/benefits</a>
<b>Member Login, Account Set-Up</b>	<a href="https://det.wi.gov/Pages/MyWisconsin_ID.aspx">DET MyWisconsin ID</a> <a href="https://det.wi.gov/Pages/MyWisconsin_ID.aspx">https://det.wi.gov/Pages/MyWisconsin_ID.aspx</a>
<b>My Insurance Benefits Member User Guide</b> Detailed steps of how to complete activities as a member.	Log into My Insurance Benefits, then on the left hand-side, click on <i>Resources</i> to access the guide.
<b>Member Education and Frequently Asked Questions (FAQs)</b>	<a href="https://etf.wi.gov/member-education">Member Education   ETF (wi.gov)</a> <a href="https://etf.wi.gov/member-education">https://etf.wi.gov/member-education</a>
<b>Glossary of Terms - Standard ETF Terms</b>	<a href="https://etf.wi.gov/glossary">Glossary   ETF (wi.gov)</a> <a href="https://etf.wi.gov/glossary">https://etf.wi.gov/glossary</a>
<b>Qualified Life Event (QLE) Information</b>	<a href="https://etf.wi.gov/insurance/life-events-guide">https://etf.wi.gov/insurance/life-events-guide</a>
<b>Dependent Verification &amp; Documentation Requirements</b>	<a href="https://etf.wi.gov/its-your-choice/2025/health-benefits/dependent-information-fags">Dependent Information FAQs   ETF (wi.gov)</a> <a href="https://etf.wi.gov/its-your-choice/2025/health-benefits/dependent-information-fags">etf.wi.gov/its-your-choice/2025/health-benefits/dependent-information-fags</a>  <a href="https://etf.wi.gov/insurance/life-events-guide/life-change-events-and-documentation-requirements">etf.wi.gov/insurance/life-events-guide/life-change-events-and-documentation-requirements</a>

## 2.5. Additional Assistance

If you have reviewed this guide and still need assistance and/or would just like someone to help you, please utilize the below help options as appropriate.

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Active Employee Support	
Contact your employer's human resources department	
Retiree Support	
Contact ETF Call Center	<a href="#">Contact Us   ETF (wi.gov)</a> <a href="http://etf.wi.gov/contact-us">etf.wi.gov/contact-us</a> Call: 1-877-533-5020 7:00 a.m. – 5:00 p.m. (CST)

### 3. My Insurance Benefits

My Insurance Benefits provides participating employers, their members, and retirees with access to ETF-managed benefit programs. Some employers may offer additional benefit programs independently of ETF. Be sure to understand and enroll (if desired) in all benefit programs available to you. It is especially important to review benefits prior to retirement. This may require you to access another system, complete paperwork, or work with your employer directly to get enrolled in other benefit programs.

Within My Insurance Benefits, you will be able to manage and review your ETF insurance benefits and related information, including:

- Benefit plan information
- Ability to make benefit elections during enrollment periods
  - Initial (new hire) enrollment
  - Open enrollment
  - Qualified life event
- Update and manage certain personal information.

	This guide provides an example of some insurance benefit options offered through ETF. However, not all employees nor retirees are eligible for all benefit programs provided in these examples. Program offerings are determined by your employer or former employer in the case with retirees. If you have questions related to which benefit programs are available to you, contact your employer's HR Administrator or ETF.
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#### 3.1. Enrollment Overview

ETF's insurance benefits enrollment experience within My Insurance Benefits, is a guided, step-by-step process that allows you to review and elect or decline coverage.

If your employer offers medical insurance and you are eligible to enroll, your first coverage election option will be medical, followed by dental, if eligible. You will have the ability to review all other coverage options that are available to you after completion of the medical/dental portion of the enrollment.

If your employer does not offer medical insurance, your first options will vary depending on what you are eligible for as determined by your employer.

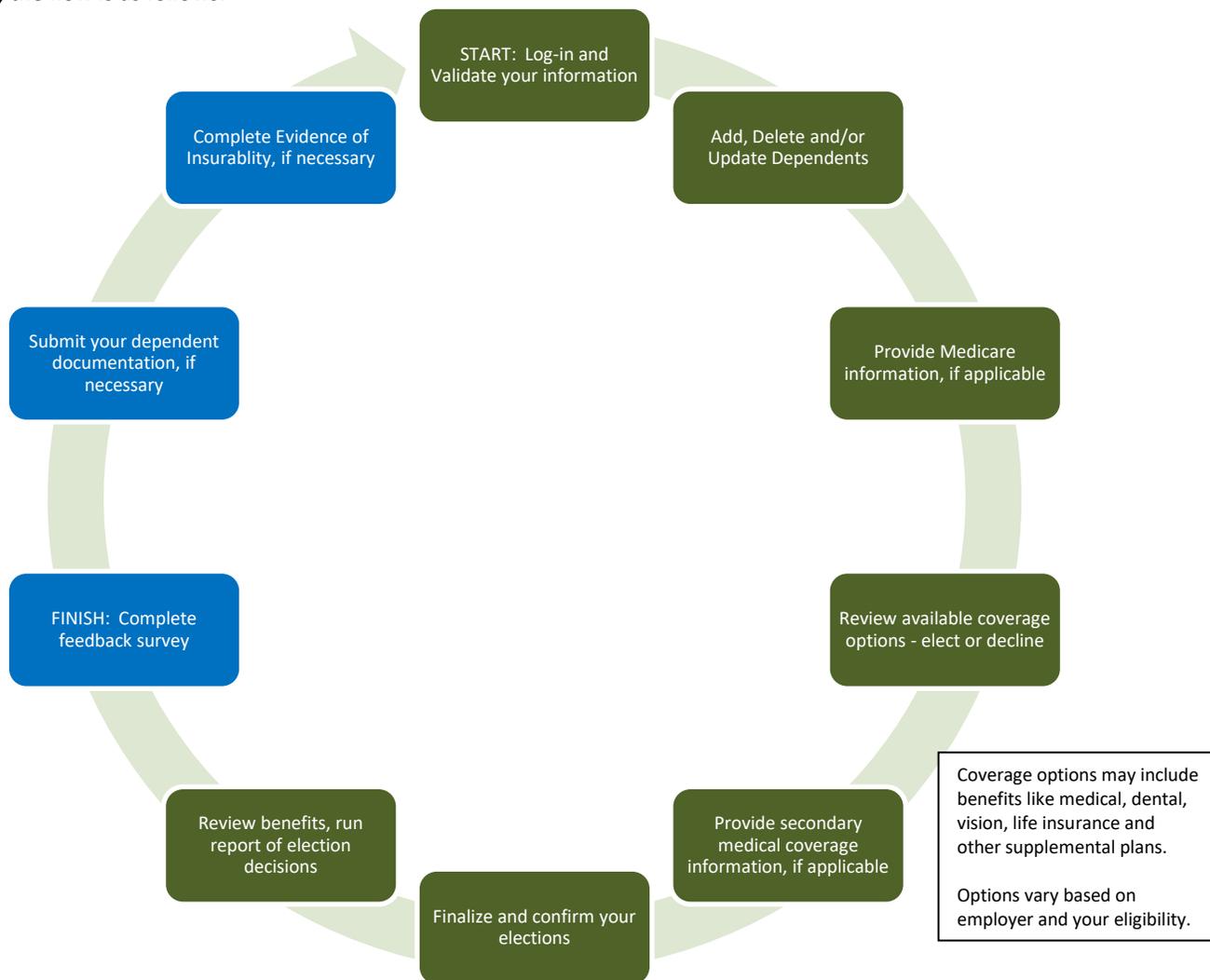
Regardless of benefits offered, you should review and elect or decline all coverage options based on your needs. The system clearly indicates status and identifies if anything is incomplete. You also can make changes to your elections as long as the enrollment window remains open.

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In general, the flow is as follows:



## 4. Accessing My Insurance Benefits

The Department of Employee Trust Funds is committed to ensuring that information is kept in a secure manner to prevent unauthorized access. There is a first-time authentication process, as well as an ongoing process. The process to create an account is the same whether you are an active employee or retiree.

### 4.1. Accessing Your My Insurance Benefits Account

If you do not have a MyWisconsin ID, go to [https://det.wi.gov/Pages/MyWisconsin\\_ID.aspx](https://det.wi.gov/Pages/MyWisconsin_ID.aspx) to understand how to create one. This must be done prior to accessing My Insurance Benefits. In general, retirees and terminated employees will need to create this ID prior to being able to access My Insurance Benefits.

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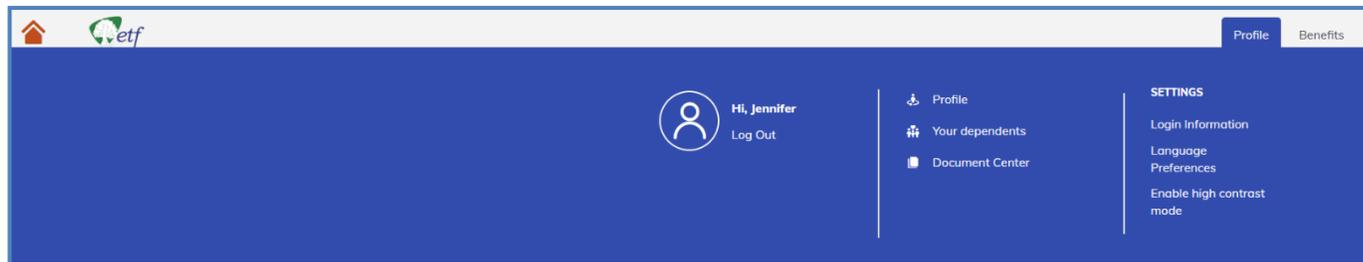
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## 4.2. Dual Employment: Enrolling in Benefits When you Have Multiple Employers

If you are an employee who is employed with two or more participating employers or a retiree with different previous employers, you will have two or more employer options when you attempt to log-in. Be sure to select the primary employer to access the benefits that are available to you from that employer. After your primary employer enrollment is complete, log-out, then relog-in under your secondary employer to review any other benefits that may be available to you.

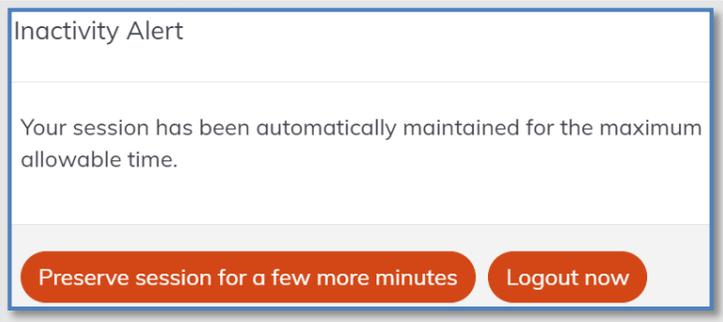
## 4.3. Logging Out

To avoid unauthorized access to your information, be sure to log-out by selecting *Log Out* in the upper right under *Profile*. You will be prompted with a notification message if you have incomplete benefit elections. The notification will provide options for you to continue and *Save* any changes you made before exiting or logging out of the system.



## 4.4. Inactivity Logout Alert

After 15 minutes, the system will generate a warning message indicating that you will be logged out of the system due to inactivity. This warning message will provide you the opportunity to preserve your session or log out. If you do not select *Preserve session for a few more minutes* before the 15 minutes is up, you will be logged out and will need to log back in again.



## 5. Navigating My Insurance Benefits

This section will vary based on the options and information available to you, which are established by your employer and your individual enrollment selections. You can explore the links on the home page and make any necessary updates before or during the benefits enrollment process.



Note: Do not use the back button or arrow to return to a prior screen. Use the *Previous* button at the bottom of window or select from the menu. Using the back button or arrow will result in an error and will cause you to need to log back in.

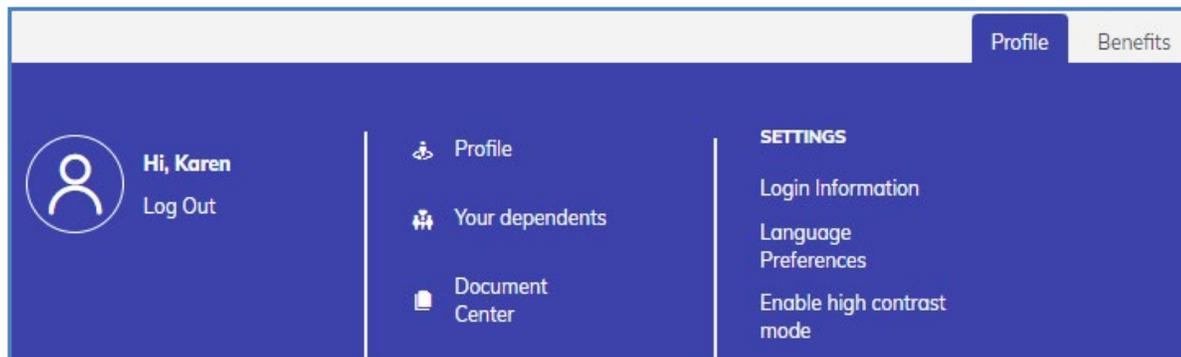
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## 5.1. Menu Bar – Profile, Benefits, Accessibility Features

After logging into the system, you can access and manage your information from the home page or from the menu bar. Starting with the main menu bar, at the top right, you can access a variety of information including:



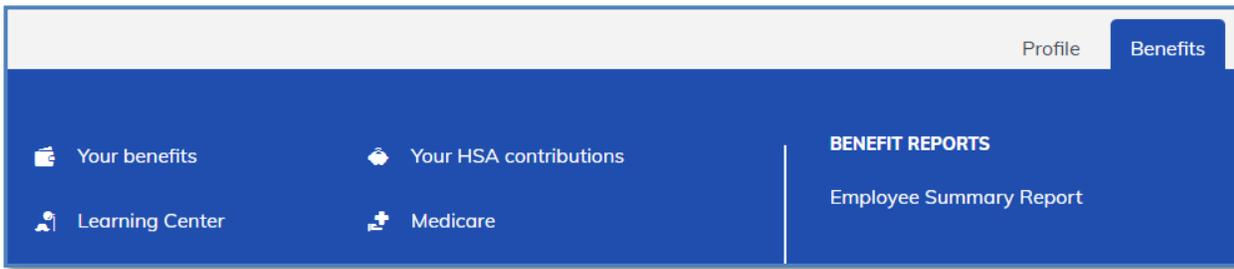
1. **Profile:** Contains a link to Logout as well as information about you, your dependents, and your preferences.
  - **Logout:** Formally logout of this application. You may also just close the window.
  - **Profile:** View your personal profile information as provided by your employer, as well as manage secondary contact information, if desired.
  - **Dependents:** View and/or update your dependents' demographic information. You may also add dependents here.
  - **Document Center:** Manage documents and documentation requests.
  - **Settings:**
    - 1.1.1. **Login Information** displays your username for reference.
    - 1.1.2. Accessibility Features can be found under *Profile*, then *Settings* and include:
    - 1.1.3. **Language Preferences:** Select your preferred language, either English or Spanish. The application defaults to English.
    - 1.1.4. **High Contrast**

	<p>Please note, you can adjust settings to improve visibility of My Insurance Benefits.</p> <p>High Contrast can be enabled to improve visibility. If required, you may switch to a high-contrast theme from the home page using the High Contrast Mode switch located below the navigation menu on the left or in the lower-right corner of the page.</p> <p>Your web browser (e.g., Google Chrome, Microsoft Edge, Firefox, Safari, etc.) has the ability to increase fonts and image sizes by using the Zoom feature.</p> <p>Using the Zoom's + (plus) or – (minus) feature,  you can increase or decrease the size of the screen's content.</p> <p>This is generally found at the far right of the URL address bar and is part of the Settings, Controls and/or Menu section</p>
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2. *Benefits*: Review or update your benefits. This link is available after you have enrolled in benefits. This section’s content will vary based on your employer and individual elections..
- *Your benefits* Shows the coverages you have elected.
  - *Learning Center*: Access informational videos and documents to assist you in understanding and enrolling in your benefits.
  - *Your HSA contributions*: Shows the amount of your contribution and allows you to edit.
  - *Medicare*: This link can be used to add and update Medicare information for you and/or your dependents.
  - *Benefit Reports*
    - *Employee Summary Report*: View a report showing cost and enrollment summary information for each plan and coverage level that you have selected.

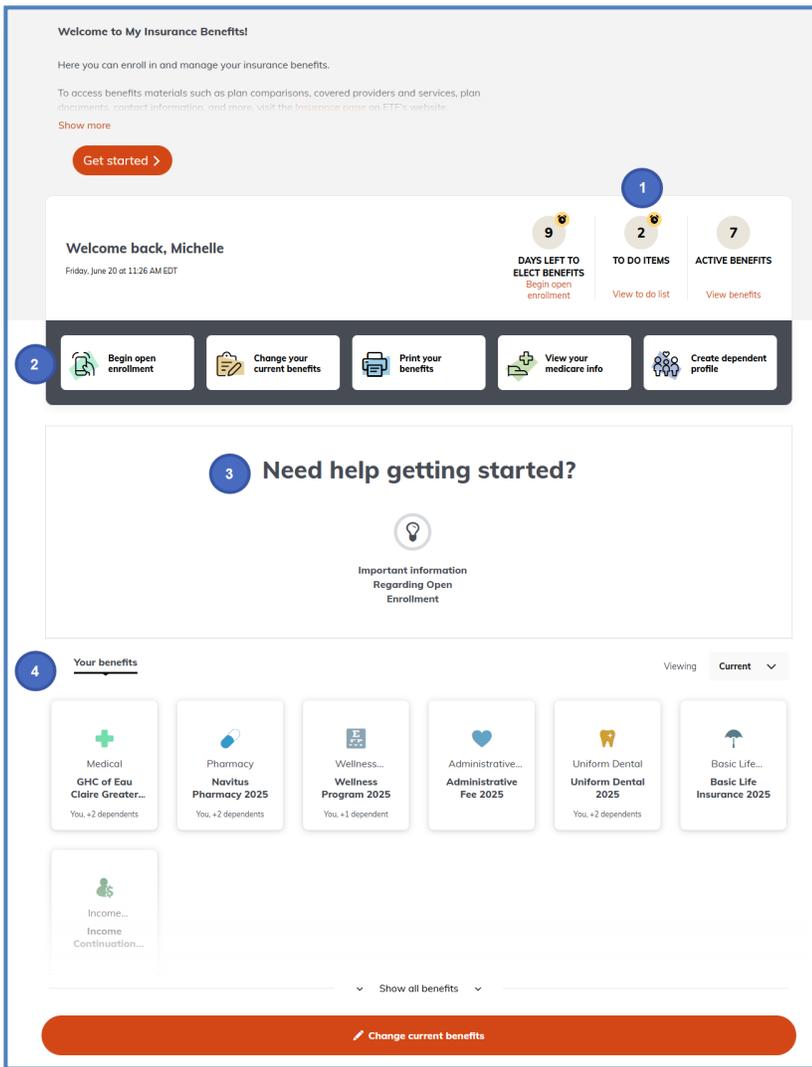
## 5.2. Main Page Information

When you log into My Insurance Benefits, the screen below is the main home page. The content on this screen will vary depending on when you log into the system, i.e., as a new hire, during open enrollment, or at any other time of year.

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1. Click *To Do Items* to view the actionable items. You may click the corresponding action link beside the item to continue working on the task at hand. It also provides important messages about actions that need to be taken such as required documents that need to be uploaded or enrollment that need to be completed.
2. *Welcome Banner*: Provides information about available enrollment periods and quick access to select or update benefit elections.
3. *Open Enrollment Help Section*: This section may appear during open enrollment below the Welcome Banner, featuring information to assist you. If available, you may click any of the available items to view the additional information.
4. *Your Benefits*: This section is available after you have enrolled in benefits. It gives you a quick overview of your enrolled benefits. You can click each tile to view additional information about your benefits.

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## 6. Understanding Enrollment Opportunities

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There are different scenarios in which you may be able to enroll in benefits. The most common include:

- Making benefit elections for the first time as a newly hired employee.
- Making changes to benefit elections due to a qualified life event, such as marriage, birth, or adoption.
- Making benefit elections during the annual open enrollment period.
- Enrolling in benefits as new hire for current year benefits as well as simultaneously enrolling in future year benefits during the annual open enrollment period.

The process for enrolling in benefits is similar for each of these types of scenarios. If you are eligible to enroll in benefits for the current plan year and the coming plan year, you should make any elections for the current period and then proceed to make future elections. If you are eligible for the same programs in both periods, you may be given the option to copy your current elections forward to save time.

After you click the *Get Started* button to begin the enrollment process, the system will guide you through all the necessary steps. You will complete each screen by providing the information requested and/or electing or denying coverage, as well as who is covered, then move on to the next screen. The following sections may include more or less benefit options than you have available based on your employer and your personal eligibility, regardless, the process to elect coverage is the same. The system will accurately display your benefit offerings, creating a unique experience for each individual.

### 6.1. Enrolling in Benefits as a New Hire

As a new hire, you will have the opportunity to enroll in the benefits available to you during a set window. It is especially important that you complete your enrollment during this time. If you do not enroll, your next opportunity will be due to a qualified life event, or during open enrollment. You may not be eligible for all of the same benefits and coverage options as you had during initial enrollment.

As a new hire, your home page will provide you with the option to begin enrollment and will count down the number of days remaining until your enrollment window closes. Be sure to complete your enrollment(s) within that time period.

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**Welcome to My Insurance Benefits!**

Here you can enroll in and manage your insurance benefits.

To access benefits materials such as plan comparisons, covered providers and services, plan documents, contact information, and more, visit the [Insurance page](#) on ETF's website.

**Open Enrollment and New Employees**  
Click the "Get Started" button to start the enrollment process.

**Life Event**  
Have you recently had a baby? Gotten married? Divorced? Moved? Some life events allow you to change your benefits outside of the annual open enrollment period. Visit the [Life Event Guide](#) on ETF's website to see which events allow you to make changes, deadlines, and required documentation.

Once you've gathered any required documentation, select "Benefits" in the top menu, and then select "Your Benefits" to make changes.

[Show less](#)

[Get started >](#)

---

**Welcome back, SampleK**  
Friday, June 20 at 12:09 PM EDT

**20**  
DAYS LEFT TO ELECT BENEFITS  
[Begin enrollment](#)

**2**  
TO DO ITEMS  
[View to do list](#)

[Begin enrollment](#)   [Create dependent profile](#)   [Update your profile](#)   [Change website language](#)   [Update login information](#)

	While the system also shows the option to submit a Qualifying Life Event, this is not how you would enroll as a new hire. Select the Get started button to begin.
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Since this is a new, initial enrollment, you will be asked to:

- Verify your personal information. Carefully review this information to ensure it is accurate. Contact your employer to make any corrections if you cannot edit the information in My Insurance Benefits.
- Add any dependents that you wish to enroll in any benefits.
- Review each benefit option that is available to you. Since this is your first time enrolling in coverage, you will be required to decide on every option.
- Follow the directions to move from screen to screen, answering questions, and/or providing the necessary information as appropriate.
- If you are eligible for medical insurance, you will automatically move to dental and HSA account options after making your medical election, if eligible. After this section is completed, you will have the option to review and then enroll in other supplemental coverages.
- If you are not eligible for medical insurance, you will likely see life insurance as your first enrollment option. You will need to elect your individual coverage before electing coverage for a spouse or dependent.
- Be sure to submit the appropriate documentation to prevent any issues with your coverage.
- You may return to complete your enrollment later, however, be sure to fully complete and select *Confirm your elections* prior to your enrollment window closing.

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## 6.2. Changing Benefits Due to a Qualifying Life Event

Qualifying life events are reasons that you may add or remove dependents or change benefit elections outside normal enrollment windows (new hire and open enrollment). They typically include events such as having a baby, adoption, marriage, divorce, legal separation, military leave, return from military leave, and/or loss of coverage. If you are not in initial enrollment or open enrollment, or do not have an employment status change (part-time to full-time, new position, etc.), you will need to have experienced a qualifying life event to make updates to your benefits. For more information on life events visit the [Life Events Guide on the ETF website](#).

Some qualifying life events require support from the HR Administrator at your employer, or at ETF if you are a retiree. This is especially true if you wish to change insurance plans in conjunction with another life event, such as a birth, marriage, or divorce. The system will automatically adjust your plan from single to family or family to single. If you would like to change coverage from one carrier to another, contact your employer, or ETF if you are a retiree, for assistance.



There is usually a time limit on making changes before or after a qualifying life event has occurred. For example, you may only have 30 days after getting married to add dependents to your benefits. You are not able to enter a life event in advance of the event occurring. If you have specific questions, reach out to your employer or ETF if you are a retiree.

Follow the steps below to enter a qualifying life event to make changes to benefit elections:

1. Scroll to the bottom and select *Change Current Benefits* on the home page.

Welcome to My Insurance Benefits!

Here you can enroll in and manage your insurance benefits.

To access benefits materials such as plan comparisons, covered providers and services, plan documents, contact information, and more, visit the [Insurance page](#) on ETF's website.

Show more

Get started >

Welcome back, Michelle  
Friday, June 20 at 9:24 AM EDT

1 TO DO ITEMS  
View to do list

8 ACTIVE BENEFITS  
View benefits

Change your current benefits | Print your benefits | View your medicare info | Create dependent profile | Update your profile

Your benefits | Viewing | Current

Medical: GHC of Eau Claire Greater... You, +2 dependents

Pharmacy: Navitus Pharmacy 2025 You, +2 dependents

Wellness: Wellness Program 2025 You, +1 dependent

Administrative: Administrative Fee 2025

Uniform Dental: Uniform Dental 2025 You, +2 dependents

Basic Life: Basic Life Insurance 2025

Supplemental: Supplemental Life Insurance... 2 dependents

Spouse and: Spouse and Dependent Lif... 2 dependents

Show all benefits

Change current benefits

[Click here to go back to the top and the Table of Contents.](#)

2. On the next window, choose *New life event*, then select the correct life event from the drop-down menu and enter the date of the event, then click *Next*.

### Did you recently experience a life event?

Life events are significant moments (e.g. birth of a child) that might require you to make a change to your benefits. A life event is often, but not always, required to make changes to most benefits.

Select a Life Event  
The life event you select will help determine which benefits can be edited.

New life event (ex. Marriage, birth, death, loss of other coverage, etc.)

Select reason for change \*    Enter the date of this life event \*

--- please select ---   

I do not have a specific life event

3. Click the *Create dependent profile* button to add any new dependents you would like to add to your coverage.

### Take a moment to review your family

If anyone is missing, you may add them below. Keeping an accurate record of your family is important, because it allows us to better suggest benefits and plans that may be right for you.

Name	Relationship	Date of Birth	Sex	Actions
Manny Smith	Spouse	11/13/1981	Male	<a href="#">Edit</a>
Annie Smith	Child	06/06/2010	Female	<a href="#">Edit</a>

4. Enter the dependent's required information and click *Save*.

---

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---

### Create dependent profile

First Name \*  Middle Name  Last Name \*

Suffix  Preferred Name

Date of Birth \*

Sex \*  
 Female  Male  Unspecified

Race (formal response)  
 None selected

Ethnicity (formal response)  
 None selected

Please enter one of the following  
 SSN  
 ITIN (Individual Tax Identification Number)  
 ETF Member ID

Relationship \*  
 ---Please Select---

Use Employee Address

5. Click Next.

### Take a moment to review your family

If anyone is missing, you may add them below. Keeping an accurate record of your family is important, because it allows us to better suggest benefits and plans that may be right for you.

Name	Relationship	Date of Birth	Sex	Actions
Manny Smith	Spouse	11/13/1981	Male	<a href="#">Edit</a>
Annie Smith	Child	06/06/2010	Female	<a href="#">Edit</a>

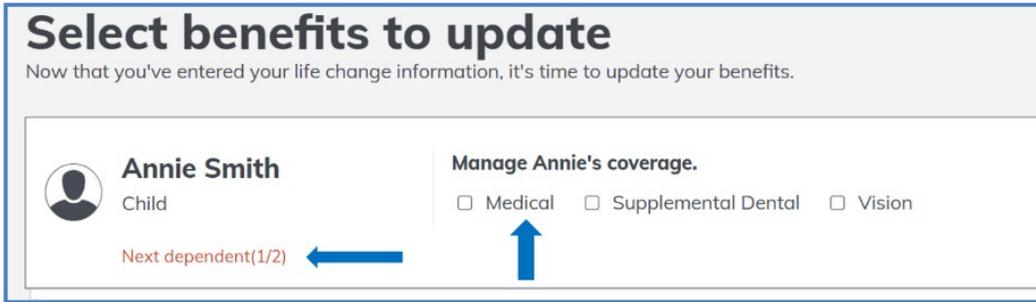
- 6. You may then be asked whether anyone is covered by Medicare Coverage; answer the questions as applicable.
- 7. To add or remove dependents to or from existing coverage, you may use the following methods:

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- A section of the screen will display one of your dependents and any benefits eligible to enroll above the benefits list. Select each benefit you want to add and deselect any benefits you want to remove for the dependent. Use the *Next dependent* link to update enrolled benefits for each dependent.
- Each plan will list each eligible dependent in the plan details next to *Persons Covered*. Click *Add* to add any additional dependents not listed. Scroll through each plan to update.
  - To add a dependent to coverage, select the dependent for the benefit plan.
  - If you would like to remove an eligible dependent from coverage, deselect the dependent you would like to remove by clicking on the box and removing the blue highlighted checkmark.
  - Names with a checkmark indicate you would like this person covered, while names without a checkmark should not be covered.



	If you attempt to exit the benefit list without adding your dependent to coverage you will be warned. You need to add dependents to the plan to ensure they have coverage.
	Depending on the plan, coverage of dependents may be automatically selected, or you may be prevented from removing a dependent from a plan.

8. Click *Edit coverage* for each plan you would like to change.

---

*Click here to go back to the top and the [Table of Contents](#).*

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## You may want to update these benefits

+

**Update your Medical coverage**

Helps cover the cost of medical.

- Upload documentation of the following items on letterhead from the previous insurer or the former employer (such as a COBRA notice): 1. Who was covered (must show the name of the participant who is requesting the enrollment), 2. Name of health insurer, 3. Subscriber name, 4. Date coverage was terminated, and 5. Reason for the cancellation (that is voluntary such as due to nonpayment of premium vs. involuntary such as due to job loss).

---

Dean Health Plan by Medica: HDHP 2025

Offered By: Dean Health Plan

Effective Date: 01/01/2025

Persons Covered:  ETF Member Smith  Manny Smith  Annie Smith

+ Add

**\$11.06**

twice per month

Edit coverage
Show Plan Details ▾

Save changes

Cancel

- Click *Save Changes* at the bottom of the screen when complete. You will receive a confirmation message listing each benefit type that was updated.

## Success! You have updated these benefits.

+

Medical

P

Pharmacy

W

Wellness

Continue

- Click *Continue* on the confirmation message after reviewing.
- Be sure to submit the appropriate documentation to prevent any issues with your coverage(s).

### 6.2.1. Updating Health Plans due to a Qualified Life Event

There are a few instances where you must contact your HR administrator before you are able to change your health plan and enroll in a new health plan. These include the following event types:

- Adoption
- Birth
- Guardianship of a Child
- Legal Custody of a Child
- National Medical Support Notice

---

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- Marriage
- Divorce
- Loss of Other Coverage

You should complete the qualified life event per the instructions above, however, in the event you want to change your health plan to a different plan, you will need to contact your HR administrator. They will then create an event that will allow you to enroll in different health coverage.

### 6.3. Enrolling in Benefits during Open Enrollment

The annual open enrollment period is a designated time that occurs once per year, during which you may be able to:

- Enroll or make changes to your health insurance,
- Add or decline Uniform Dental,
- Enroll in or make changes to supplemental coverages like dental, vision, or the accident plan, and
- Enroll in a pre-tax savings account to save money on health care, dependent day care, or parking and transit expenses.

Depending on whether you have current benefits, there are a few scenarios that can impact which actions you are required to take during open enrollment, such as:

- **You may have new benefits to elect.** *In the event you do not elect these new coverages, you will not have coverage for the coming year.*
- **By default, the system will carry over your previous elections for most benefit options into the new plan year.** By default, ETF assumes that you want to retain the exact same plans as you currently have. Regardless of whether this is true or not, you should review all benefits annually. Some elections, such as for pre-tax savings plans, require you to re-enroll every year.
- **If available to you, you must elect your contributions for all pre-tax savings plans,** such as the Health Savings Accounts (HSA) and Flexible Spending Accounts (FSA) every year. Be sure to take the time to review, save, and complete your benefit elections during open enrollment.
- **If applicable, a decision to opt-out of medical coverage for a credit must be completed in the system each year.**
- **In some cases, while your employer offers the same benefits as your current elections, you may or may not have the ability to make changes to them.** If you cannot make changes to your open enrollment elections, you may receive a notification on the home page to confirm that you have reviewed your benefits.

Regardless of your situation, your benefits administrator will inform you of your open enrollment options and how long you have to make your enrollment decisions. Do not wait until the last minute and miss your opportunity to enroll in benefits.



Notice there may be two options at the top of the page during this time, one for your current benefits and one for the Open Enrollment Benefits elections. Ensure you are reviewing/making changes to the correct enrollment period.

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[PROFILE](#) - **BENEFITS** - [CHECKOUT](#)
🛒

## Open Enrollment Benefits

[Looking for your current benefits? →](#)

Whether you want to change your benefits or keep them the same as last year, it's still important that you carefully complete each step in the enrollment process to make sure all of your benefits are covered for the upcoming plan year.

[Compare to current benefits](#)

 **Medical**

Helps cover the cost of medical and surgical expenses.

 You had this benefit last year

✔ Currently selected

**Quartz Central: IYC Health Plan 2026** **\$48.72**  
twice per month

Covers you  [+ Create dependent profile](#)

Effective 07/01/2025

[Show plan details](#)   [Compare to last year's plan](#)

[Edit coverage](#)

[Confirm changes](#)

[Return home](#)

#### 6.4. Enrolling in Benefits as a New Hire during Open Enrollment

If you are hired during the open enrollment period and your coverage becomes effective prior to the new plan year, you will need to make two benefit elections. The first election is for the current plan year. The second election is for the coming plan year. The system will guide you through both enrollments to ensure you have current and future coverage, starting with new hire.

If you make an election or update in the first new hire enrollment period that is available in the next open enrollment period, the benefit elections will be automatically applied to the future year.

1. To begin, select the *Get started* button to complete your new hire enrollment.
2. Follow the instructions on the screen, providing the necessary information, enrolling in or declining coverage.
3. The system will indicate all the elections that are copied forward. Click the *Next* button. Some elections may be carried forward by default while other benefits may need to be elected, such as benefits you are newly eligible for in the coming plan year.

i

Note, contributory benefits, such as a Health Savings Account (HSA) and other pre-tax savings accounts, are never copied forward and must be elected every year.

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✓ PROFILE – ● BENEFITS – ○ CHECKOUT

## Please Note

- Medical elections have been successfully applied to the upcoming benefit year.
- Pharmacy elections have been successfully applied to the upcoming benefit year.
- Wellness elections have been successfully applied to the upcoming benefit year.
- Uniform Dental elections have been successfully applied to the upcoming benefit year.

Next

	Adding a dependent does not automatically enroll them in coverage. Be sure to closely review your elections and who is covered.
---	---

4. After you have made all your elections in the first period, click *Confirm and continue* at the end of the Benefit Listing.

<p>Confirm and continue</p>	<p>Return home</p>
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5. A *Congratulations* message will display. Click *Continue to 20YY Open Enrollment* to proceed to the Benefit Listing page for the next period.

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*Click here to go back to the top and the [Table of Contents](#).*

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## Congratulations Karen, you have finished selecting your 2025 benefits!

 <b>Medical</b> Quartz Central: IYC Health Plan 2025 Just You	 <b>Pharmacy</b> Navitus Pharmacy 2025 Just You	 <b>Wellness Program</b> Wellness Program 2025 Just You	 <b>Administrative Fee</b> Administrative Fee 2025
---	---	---	---

Show all 5 of my benefits ▼

Helpful things to do right now



Review and print a copy of your **Benefit Summary Report**



Continue to your 2026 Open Enrollment

### Next up: Enroll in your 2026 Open Enrollment benefits

Need a break? You have until 07/20 to complete your 2026 Open Enrollment benefits selections.

[Continue to 2026 Open Enrollment](#)

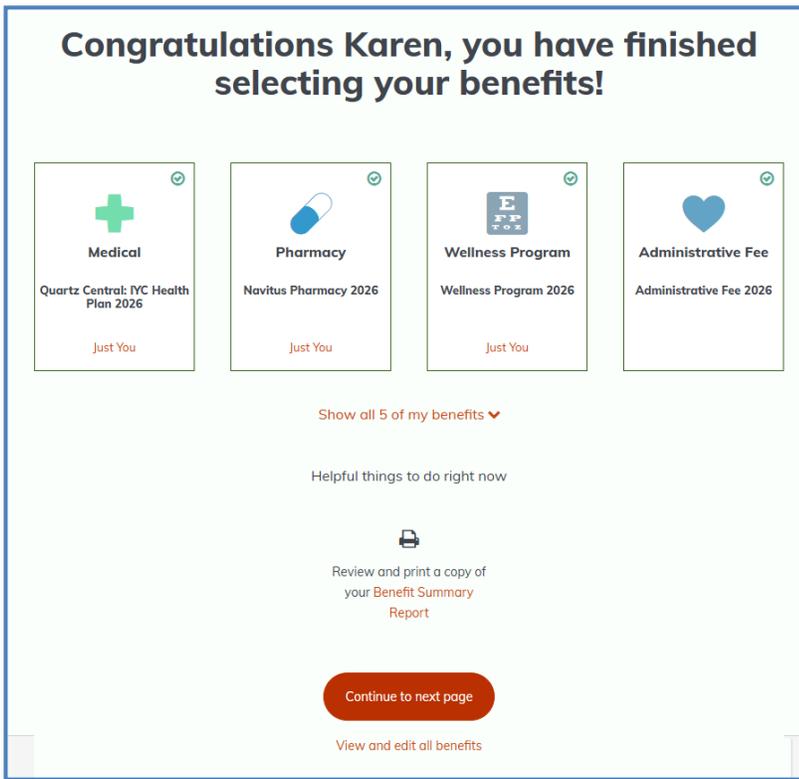
[Return home](#)

6. Even if all your elections are copied forward to the next year, you should take a moment to review your benefit elections, dependents, and that dependents are enrolled in coverage as you intended.
7. After you have made all your elections and reviewed, click *Confirm changes* at the end of the page. A *Congratulations* message will display.

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- Be sure to review both current year and future year enrollments to make sure that you have all coverages you need and that you added all dependents. Click *Continue to next page* to return to the home page.

## 6.5. Enrolling in Benefits with a Qualifying Life Event during Open Enrollment

### **Before Open Enrollment**

If you have a qualifying life event during the current year that occurs during open enrollment, you should complete the qualified life event process first, then complete open enrollment. By default, the elections in the current period should carry forward, however, you should review to ensure the elections are as you expect.

### **After Completing Open Enrollment**

If you have a qualified life event after you have completed open enrollment, but the open enrollment period is still open, you should complete the qualified life event. By default, the revised elections should carry forward, however, you should review to ensure the elections are as you expect.

### **After Open Enrollment Period Has Ended**

If you have a qualified life event after open enrollment has closed, you should complete the qualified life event, then you will have the opportunity to confirm those benefits for the future coverage period.

## 7. Quick Enrollment Steps

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The following one-pagers are quick reference guides for individuals who do not need step by step instructions or screenshots to complete the documented activities. More detailed supporting information, including screenshots, is provided earlier in

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this guide.

## 7.1. Completing Initial or Open Enrollment

You will have the opportunity to enroll in benefits as a new hire as well as annually during open enrollment. To enroll in benefits, follow the steps below.

Step	Description	For Awareness
1.	Go to <a href="https://det.wi.gov/Pages/MyWisconsin_ID.aspx">DET MyWisconsin ID</a> ( <a href="https://det.wi.gov/Pages/MyWisconsin_ID.aspx">https://det.wi.gov/Pages/MyWisconsin_ID.aspx</a> ) and click My Insurance Benefits	<b>For more information see:</b> <a href="#">Logging-in and Out</a>
2.	On the Welcome page, click the <i>Get Started</i> button to begin your enrollment immediately.	The system will show how many days remain to make your elections and complete your enrollment
3.	Review your personal information that has been provided by your employer and/or former employer if you are a retiree.	<p>Most of your information is provided by your employer. Fields you are unable to update have a Ø (zero with a slash through it).</p> <ul style="list-style-type: none"> <li>• <b>If you are actively working</b> and find incorrect information in a field with a Ø (zero with a slash through it), please contact your employer to correct.</li> <li>• <b>If you are a retiree</b> and find incorrect information in a field with a Ø (zero with a slash through it), please contact the ETF Call Center for assistance.</li> </ul> <p>After it is corrected, the information will update in My Insurance Benefits within 2-5 business days.</p> <p><b>For more information see:</b> <a href="#">Validating Information &amp; Preparing to Enroll</a></p>
4.	Set your communication preferences.	<p>This allows you to indicate how you would like to receive communications – which type of communications and via which method.</p> <p><b>For more information see:</b> <a href="#">Communication Preferences</a></p>
5.	<p>If applicable, add/update and/or delete any dependents that may be eligible to enroll or remove from benefits coverage.</p> <p>Note: New hires will need to add all dependents during their initial enrollment period. During open enrollment, you may have the option to add, update, or remove coverage as well as dependents, depending on the benefit type.</p>	<p>To enroll an eligible dependent, you must have their:</p> <ul style="list-style-type: none"> <li>• Full Name</li> <li>• Social Security Number (SSN), preferred- not required</li> <li>• Date of Birth (DOB)</li> <li>• Address, if different than yours</li> <li>• Sex</li> </ul> <p><b>For more information see:</b> <a href="#">Review, Add and/or Update Dependents</a> and/or <a href="#">Adding Coverage for Dependents</a></p>
6.	<a href="#">Begin Enrollment</a> by answering any questions presented, then review and elect or decline the	The system will walk through each benefit option available through your employer. Under each option you

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Step	Description	For Awareness
	<p>benefit options as they are presented.</p> <p>Continue making elections by clicking on the <i>Select plan</i> button until you have documented your decisions for all coverages.</p> <ul style="list-style-type: none"> <li>• <a href="#">Medical Enrollment</a></li> <li>• <a href="#">Life Insurance &amp; Evidence of Insurability (EOI)</a></li> <li>• <a href="#">Other Benefits</a></li> </ul> <p>Be sure to hit <i>Save &amp; Continue</i> throughout your enrollment to ensure all your elections are saved.</p> <p>When complete, click the <i>Confirm changes</i> button.</p>	<p>can click:</p> <ul style="list-style-type: none"> <li>• <i>Edit coverage</i> to change who is enrolled and/or what plan you are enrolled in.</li> <li>• <i>Decline</i> if you know you do not want coverage at all.</li> </ul> <p>For medical you may need to complete a few questionnaires, if required by your employer.</p> <ul style="list-style-type: none"> <li>• <a href="#">Medicare</a></li> <li>• <a href="#">Coordination of Coverage (Additional Insurance)</a></li> </ul>
7.	<p>After you have <i>Confirmed changes</i>, you should review the <i>Congratulations</i> page to:</p> <ul style="list-style-type: none"> <li>• Print/Download a <i>Benefit Summary Report</i> which shows all the coverages that you have elected.</li> <li>• <i>View and edit all benefits</i>. Be sure to make any changes necessary. At this time, all your elections are final unless you edit now or return and modify before your enrollment window closes.</li> <li>• Select <i>Continue</i> to return to the homepage.</li> </ul>	<p>You can return and make changes to your elections until your enrollment window closes.</p> <p>You can return to My Insurance Benefits at any time to review your coverages and related information.</p> <p><b>For more information see:</b> <a href="#">Completing your enrollment and/or Employee Reports</a></p>
8.	<p>If you added dependents to your coverage, you need to visit the <i>Document Center</i> to add the supporting documents.</p>	<p>If documentation is not provided within the applicable timeframe, coverage will be delayed until received.</p> <p><b>For more information see:</b> <a href="#">Document Center</a></p>

## 7.2. Changing Health Saving Account (HSA) and/or pre-tax Transit or Parking Contributions

Without a qualifying life event you can increase, decrease, or stop your Health Savings Account (HSA) and pre-tax savings Transit and/or Parking account within legal limits, if needed throughout the year. Contribution changes will be reflected in one to two pay periods depending on timing of the change and the next upcoming pay period.

	A qualified life event is required to make contribution changes to your pre-tax savings health care, limited purpose (LPFSA), and/or dependent day care accounts. Be sure to think through your contribution amount prior to electing.
---	--

The steps to make contribution a contribution change are below.

Step	Description	For Awareness
1.	Go to <a href="https://det.wi.gov/Pages/MyWisconsin_ID.aspx">DET MyWisconsin ID</a> ( <a href="https://det.wi.gov/Pages/MyWisconsin_ID.aspx">https://det.wi.gov/Pages/MyWisconsin_ID.aspx</a> )	<b>For more information see:</b> <a href="#">Logging-in and Out</a>

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Step	Description	For Awareness
	and click the My Insurance Benefits.	
2.	On the Welcome page, click <i>Change Current Benefits at the bottom of the page</i>	Whether or not you have a qualified life event, will determine which benefits you can change. A qualified life event is required to update pre-tax flexible spending (FSA) accounts, including Health care, Limited Purpose Savings Account and Dependent Day Care. A qualified life event is not required to update a Health Savings Account (HSA) or transit or parking pre-tax savings account.  <b>For more information see:</b> <a href="#">Changing Benefits Due to a Qualifying Life Event</a> and/or <a href="#">Changing Contribution Amounts after initial enrollment</a>
3.	Be sure to hit <i>Save Changes</i> to ensure all your elections are saved.	Benefits are not final until you select the <i>Save changes</i> button.
4.	After you have <i>Saved Changes</i> , you should review the <i>homepage</i> to: <ul style="list-style-type: none"> <li>• Print/Download an <i>Employee Summary Report</i> which shows all the coverages that you have elected.</li> <li>• <i>View and edit all benefits</i>. Be sure to make any changes necessary. At this time, all your elections are final unless you edit now or return and modify before your enrollment window closes.</li> </ul>	You can return to My Insurance Benefits at any time to increase, decrease, stop or restart your HSA or transit and parking contributions.  <b>For more information see:</b> <a href="#">Completing your enrollment and/or Employee Reports</a>

### 7.3. Qualified Life Event (QLE)

You will have the opportunity to enroll in benefits when you experience a qualified [life event](#). This event permits you to add, change, or terminate your coverages. In general, there are strict timelines to submit a qualified life event, and some enrollments may require substantiating documentation. Some examples of the most common qualified life events include marriage, birth, divorce, adoption, death, or change in employment.

In the event that you do not have a qualified life event, you must wait until open enrollment to add, update, or remove coverage as well as dependents, depending on the benefit type.

To enroll in benefits, follow the steps below. More detailed supporting information on each step is referenced and provided in this guide.

Step	Description	For Awareness
1.	Go to <a href="https://det.wi.gov/Pages/MyWisconsin_ID.aspx">DET MyWisconsin ID (https://det.wi.gov/Pages/MyWisconsin_ID.aspx)</a> and click My Insurance Benefits.	<b>For more information see:</b> <a href="#">Logging-in and Out</a>

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Step	Description	For Awareness
2.	On your home page click go to Benefits and then click on <i>Life Change</i> .	Ensure that you are reporting the life event within the appropriate time period.  <b>For more information see:</b> <a href="#">Changing Benefits Due to a Qualifying Life Event</a>
3.	Provide the <ul style="list-style-type: none"> <li>Reason for the qualified life event</li> <li>Effective date</li> </ul>	<b>For more information see:</b> <a href="#">Changing Benefits Due to a Qualifying Life Event</a> and/or <a href="#">Enrolling in Benefits with a Qualifying Life Event during Open Enrollment</a>
4.	If applicable, add/update and/or delete any dependents that may be eligible to enroll or to be remove from benefits coverage.  Note: A qualified life event will determine who can be added to existing coverage.	Prior to beginning your enrollment, make sure to have the following information available for all eligible dependents: <ul style="list-style-type: none"> <li>Full Name</li> <li>Social Security Number (SSN), preferred- not required</li> <li>Date of Birth (DOB)</li> <li>Address, if different than yours</li> <li>Sex</li> </ul> <b>For more information see:</b> <a href="#">Review, Add and/or Update Dependents</a> and/or <a href="#">Adding Coverage for Dependents</a>
5.	Update/revise the coverages as necessary to ensure your needs are met.	<b>For more information see:</b> <a href="#">Completing your enrollment</a>
6.	<i>Save Changes</i> to ensure all your elections are saved.	Benefits are not final until you select the <i>Save Changes</i> button.
7.	After you have <i>Confirmed your benefits</i> , you should review the <i>homepage</i> to: <ul style="list-style-type: none"> <li>Print/Download an <i>Employee Summary Report</i>, which shows all the coverages that you have elected.</li> <li><i>View and edit all benefits</i>. Be sure to make any changes necessary. At this time, all your elections are final unless you edit now or return and modify before your enrollment window closes.</li> </ul>	You can return and make changes to your elections until your enrollment window closes.  You can return to My Insurance Benefits at any time to review your coverages and their related information.  <b>For more information see:</b> <a href="#">Completing your enrollment and/or Employee Reports</a>
8.	You will need to visit the <i>Document Center</i> to add the supporting documents as requested and necessary.	If documentation is not provided within the applicable timeframe, coverage will be delayed until received.  <b>For more information see:</b> <a href="#">Document Center</a>

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## 7.4. Life Insurance Initial Enrollment

If your employer offers life insurance, and you are eligible to enroll, the chart below offers a high-level overview to this process for this benefit only. In the event you have other benefits available, this benefit may be part of the decisions you need to make. Retirees cannot enroll in life insurance. They may only cancel life insurance within My Insurance Benefits.

Step	Description	For Awareness
1.	Go to <a href="https://det.wi.gov/Pages/MyWisconsin_ID.aspx">DET MyWisconsin ID (https://det.wi.gov/Pages/MyWisconsin_ID.aspx)</a> and click My Insurance Benefits.	<b>For more information see:</b> <a href="#">Logging-in and Out</a>
2.	On your home page click the <i>Get Started</i> button to begin your enrollment immediately.	<p>Prior to beginning your enrollment, make sure to have the following information available for all eligible dependents:</p> <ul style="list-style-type: none"> <li>• Full Name</li> <li>• Social Security Number (SSN), preferred- not required</li> <li>• Date of Birth (DOB)</li> <li>• Address, if different than yours</li> <li>• Sex</li> </ul> <p>The system will show how many days remain to make elections and complete your enrollment.</p> <p><b>For more information see:</b> <a href="#">Navigating the Member Role</a></p>
3.	Review your personal information that has been provided by your employer.	<p>Most of your information is provided by your employer. Fields you are unable to update have a Ø (zero with a slash through it).</p> <p>If you find incorrect information, please contact your employer to correct. After it is corrected, the information will automatically update in My Insurance Benefits within 2-5 business days.</p> <p><b>For more information see:</b> <a href="#">Profile Review</a></p>
4.	Set your communication preferences.	<p>This allows you to indicate how you would like to receive communications – which type of communications and via which method.</p> <p><b>For more information see:</b> <a href="#">Communication Preferences</a></p>
5.	If applicable, add/update and/or delete any dependents that may be eligible to enroll or remove from benefits coverage.	<b>For more information see:</b> <a href="#">Review, Add and/or Update Dependents</a> and/or <a href="#">Adding Coverage for Dependents</a>
6.	To enroll in life insurance, you will elect the appropriate coverage level.	<p>If you want to enroll your spouse and/or child(ren) in coverage, you must elect your Basic Life coverage first.</p> <p><b>For more information see:</b> <a href="#">Life Insurance &amp; Evidence of</a></p>

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Step	Description	For Awareness
		<a href="#">Insurability (EOI)</a>
7.	After you have completed your enrollment, you may now select coverages for your spouse and/or child(ren).	<b>For more information see:</b> <a href="#">Life Insurance &amp; Evidence of Insurability (EOI)</a>
8.	This completes the life insurance enrollment process. After you click <i>Save and Continue</i> , you will be brought back to the Health Summary page. This page allows you to: <ul style="list-style-type: none"> <li>• Review the coverages you elected,</li> <li>• See the cost to you per pay period of all the plans you have elected,</li> <li>• Make changes/corrections, if necessary, and</li> <li>• Review and elect or decline other benefits.</li> </ul>	If you have additional benefits available to you, you should: <ul style="list-style-type: none"> <li>• Review each coverage option and elect or decline coverage as appropriate.</li> <li>• After you have reviewed a benefit option, you will be brought back to this same page where you can see the <i>Summary of cost</i> and any other benefits available for your consideration.</li> </ul> <p>You are not able to <i>Confirm changes</i> until you either elect or decline all required benefits.</p> <p><b>For more information see:</b> <a href="#">Completing your enrollment</a></p>
9.	After you have completed your elections, review one final time then finalize your decisions by selecting the <i>Confirm changes</i> button.	You can return and make changes to your elections until your enrollment window closes.
10.	After you have <i>Confirmed changes</i> , you should review the <i>Congratulations</i> page to: <ul style="list-style-type: none"> <li>• Print/Download a <i>Benefit Summary Report</i>, which shows all the coverages that you elected.</li> <li>• <i>View and edit all benefits</i>. Be sure to make any changes necessary. At this time, all your elections are final unless you edit now or return and modify before your enrollment window closes.</li> <li>• Select <i>Continue</i> to return to the homepage.</li> </ul>	You can return and make changes to your elections until your enrollment window closes. <p>Additionally, you can return to My Insurance Benefits at any time to review your coverages and their related information.</p> <p><b>For more information see:</b> <a href="#">Completing your enrollment and/or Employee Reports</a></p>

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## 7.5. Health (Medical, Pharmacy, Wellness, and Dental) Initial and Open Enrollment

If your employer offers medical, pharmacy, wellness, and dental insurance, and you are eligible to enroll, the chart below offers a high-level overview to this process. More detailed supporting information on each step is referenced and provided later in this guide.

Step	Description	For Awareness
1.	Go to <a href="https://det.wi.gov/Pages/MyWisconsin_ID.aspx">DET MyWisconsin ID (https://det.wi.gov/Pages/MyWisconsin_ID.aspx)</a> and click My Insurance Benefits	<b>For more information see:</b> <a href="#">Logging-in and Out</a>
2.	On your home page click the <i>Get Started</i> button to begin your enrollment immediately.	<p>Prior to beginning your enrollment, make sure to have the following information available for all eligible dependents:</p> <ul style="list-style-type: none"> <li>• Full Name</li> <li>• Social Security Number (SSN), preferred- not required</li> <li>• Date of Birth (DOB)</li> <li>• Address, if different than yours</li> <li>• Sex</li> </ul> <p>The system will show how many days remain to make and complete your enrollment.</p> <p><b>For more information see:</b> <a href="#">Navigating the Member Role</a></p>
3.	Review your personal information that has been provided by your employer and/or former employer if you are a retiree.	<p>Most of your information is provided by your employer. Fields you are unable to update have a ∅ (zero with a slash through it).</p> <p>If you find incorrect information, please contact your employer to correct. If you are a retiree, contact the ETF Call Center for assistance. After it is corrected, the information will automatically update in My Insurance Benefits within 2-5 business days.</p> <p><b>For more information see:</b> <a href="#">Profile Review</a></p>
4.	Set your communication preferences.	<p>This allows you to indicate how you would like to receive communications – which type of communications and via which method.</p> <p><b>For more information see:</b> <a href="#">Communication Preferences</a></p>
5.	<p>If applicable, add/update and/or delete any dependents that may be eligible to enroll or remove from benefits coverage.</p> <p>Note: New hires will need to add all their dependents during their initial enrollment period. During open enrollment, you may have the option to add, update or remove coverage as well as dependents, depending on the benefit type.</p>	<p><b>For more information see:</b> <a href="#">Review, Add and/or Update Dependents</a> and/or <a href="#">Adding Coverage for Dependents</a></p>
6.	Answer the Medicare Survey as applicable.	If you and/or a dependent has Medicare coverage, ensure that you have the following information available from your

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Step	Description	For Awareness
		Medicare card: <ul style="list-style-type: none"> <li>• MBI Number</li> <li>• Eligibility Date</li> <li>• Eligibility Reason</li> <li>• Part A Effective Date</li> </ul> <b>For more information see:</b> <a href="#">Medicare</a>
7.	<p><a href="#">Begin Enrollment</a> by reviewing all the medical options available to you, then:</p> <ol style="list-style-type: none"> <li>1. Determine if you want to enroll,</li> <li>2. Choose your coverage, and</li> <li>3. Choose who you are covering, if necessary.</li> </ol> <p>Be sure to hit <i>Next</i> and/or <i>Save &amp; Continue</i> to move forward in the enrollment process.</p>	<p>The system will walk you through each benefit option available to you. Under each option you can click on:</p> <ul style="list-style-type: none"> <li>• <i>Edit coverage</i> to change who is enrolled and/or what plan you are enrolled in.</li> <li>• <i>Decline</i> if you know you do not want coverage at all.</li> </ul> <b>For more information see:</b> <a href="#">Medical Enrollment</a>
8.	<p>If you and/or a dependent have additional medical coverage, provide those additional details here.</p>	<p>To complete, you will need the following information available:</p> <ul style="list-style-type: none"> <li>• Policy Number</li> <li>• Policyholder name</li> <li>• Carrier contact information</li> <li>• Who is covered and effective dates</li> </ul> <b>For more information see:</b> <a href="#">Coordination of Coverage (Additional Insurance) – ETF -To determine if capturing</a>
9.	<p><i>Administrative fees</i> are displayed, which help to cover the administrative cost of the plans.</p>	<p>These fees are for awareness only. You may not decline these fees.</p>
10.	<p>Review and elect dental, if available.</p>	<p>Under each option you can click on:</p> <ul style="list-style-type: none"> <li>• <i>Edit coverage to change who is enrolled (This only applies to Preventive Dental. All dependents who have been enrolled in medical will be enrolled into uniform dental coverage as well).</i></li> <li>• <i>Decline</i> if you know you do not want coverage at all.</li> </ul> <b>For more information see:</b> <a href="#">Uniform Dental / Preventive Dental</a>
11.	<p>If you elected a High Deductible Health Plan (HDHP) for your medical coverage, you may have the option to contribute pre-tax funds to a Health Savings Account (HSA).</p> <p>You will also have the option to contribute to a Flexible Spending Account (FSA) later in the enrollment process.</p>	<p>If your employer contributes to the HSA account on your behalf, that amount will be reflected. You can still contribute any amount up to the annual maximum. The system will ensure you do not over contribute.</p> <b>For more information see:</b> <a href="#">Savings Account Contributions – HSA, FSA</a>

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Step	Description	For Awareness
12.	<p>This completes the main health (medical and dental) enrollment process. After you click <i>Save and Continue</i>, you will be brought back to the Health Summary page. This page allows you to:</p> <ul style="list-style-type: none"> <li>Review the coverages you have elected,</li> <li>See the cost to you per pay period of all the plans you have elected,</li> <li>Make changes/corrections if necessary, and</li> <li>Review and elect or decline other benefits.</li> </ul> <p><i>Confirm changes</i>, after you have actioned all offers as required</p>	<p>If you have additional benefits available to you, you should:</p> <ul style="list-style-type: none"> <li>Review each coverage option and elect or decline coverage as appropriate.</li> <li>After you have reviewed a benefit option, you will be brought back to this same page where you can see the <i>Summary of cost</i> and any other benefits available for your consideration.</li> </ul> <p>You are not able to <i>Confirm changes</i> until you elect or decline all required benefits.</p>
13.	<p>After you have <i>Confirmed changes</i>, you should review the <i>Congratulations</i> page to:</p> <ul style="list-style-type: none"> <li>Print/Download a <i>Benefit Summary Report</i> which shows all the coverages that you elected.</li> <li><i>View and edit all benefits</i>. Be sure to make any changes necessary. At this time, all your elections are final unless you edit now or return and modify before your enrollment window closes.</li> <li>Select <i>Continue</i> to return to the homepage.</li> </ul>	<p>You can return and make changes to your elections until your enrollment window closes.</p> <p>Additionally, you can return to My Insurance Benefits at any time to review your coverages and their related information.</p> <p><b>For more information see:</b> <a href="#">Completing your enrollment and/or Employee Reports</a> and <a href="#">Accessing &amp; Understanding Your Benefits in the Future</a></p>
14.	<p>If you have added dependents to your coverage, you will need to visit the <i>Document Center</i> to add the supporting documents.</p>	<p>If documentation is not provided within the applicable timeframe, coverage will be delayed until received.</p> <p><b>For more information see:</b> <a href="#">Document Center</a></p>

## 8. Preparing to and Enrolling in Benefits

The following sections cover some options and features you may encounter during enrollment. These features depend on your employer’s benefit offerings, as well as your individual eligibility. Not all options may be available to you. The system will only display the benefit programs you are eligible for based on your unique criteria.

	<p>Note: Do not use the back button or arrow to return to a prior screen. Use the <i>Previous</i> button at the bottom of window or select from the menu. Using the back button or arrow will result in an error and will cause you to need to log back in.</p>
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### 8.1 Validating Information & Preparing to Enroll

After you click the *Get started* button, the system will begin taking you through the enrollment process.

#### 8.1.1 Profile Review

- Review your profile information. This is your personal information as it has been provided by your

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employer.

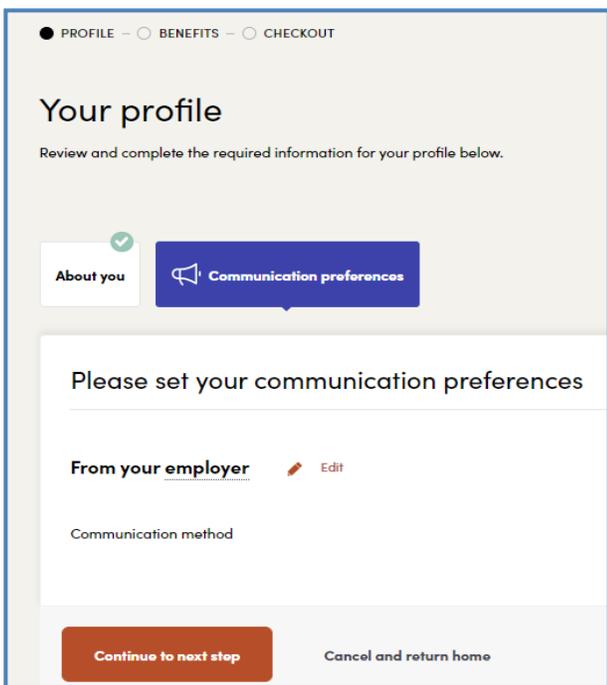
- Click *Edit* to update and/or provide some alternative information.
- Contact your employer’s HR department (contact ETF if you are a retiree) in the event that you are unable to update the information and correction is required.

	<p>Most of your personal information is supplied by your employer. If you see a <math>\emptyset</math> (a zero with a slash through it), you are not allowed to edit this field.</p> <p>If this information is incorrect, you must notify your employer and provide the updated information. If you are a retiree, you should notify ETF.</p> <p>After your employer’s system is updated, My Insurance Benefits will generally update within 2-5 business days.</p>
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### 8.1.2 Communication Preferences

Beginning in 2026, the communications preferences setting may determine where important benefit-related communications are sent based on organizational policies. These communications include system generated reminders telling you to act, informing you of upcoming events as well as employer communications that are sent through My Insurance Benefits. It is important that these benefit communications are received and reviewed.

1. Review your communication preferences and update by clicking on *Edit*. You can select how you want to receive communications.



2. Click *Continue to next step* when updated.

### 8.1.3 Review, Add and/or Update Dependents

The next step allows you:

1. Review existing dependents that are already in the system.

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2. Update existing dependents' information.
3. Add new dependents.

However, if you do not have any dependent information to enter, click *Next*.

1. To add a new dependent, such as a spouse or child, click the *Create dependent profile* button.

## Before You Enroll in Benefits

Do you have a spouse or dependents you want to add to your profile?

Note: You'll also be able to add dependents and select who you want to cover when you enroll in or edit your benefits.

Create dependent profile

Next

2. Alternatively, click *Edit* from the *Actions* menu if you need to update an existing dependent's information.

## Before You Enroll in Benefits

Do you have a spouse or dependents you want to add to your profile?

Note: You'll also be able to add dependents and select who you want to cover when you enroll in or edit your benefits.

Name	Relationship	Date of Birth	Sex	Actions
SampleL TestL SampleSmith	Spouse	07/25/1990	Male	<span style="background-color: #0070C0; color: white; border-radius: 15px; padding: 2px 10px; text-decoration: none; display: inline-block;">Actions -</span>
SampleM TestM SampleSmith	Child	04/15/2020	Female	<span style="background-color: #0070C0; color: white; border-radius: 15px; padding: 2px 10px; text-decoration: none; display: inline-block;">Actions -</span> <div style="border: 1px solid #0070C0; background-color: white; padding: 5px; margin-top: 5px; width: fit-content;"> <span style="color: #0070C0; text-decoration: none; display: block; padding: 2px 10px;">Edit</span> <span style="color: #0070C0; text-decoration: none; display: block; padding: 2px 10px;">Delete</span> </div>

Create dependent profile

Next

3. Enter or update the dependent's demographic information as applicable. Required fields are indicated with an asterisk (\*).

i

Please note, Social Security Numbers (SSN) or Individual Taxpayer Identification Numbers (ITIN) are not required by the system for dependents because it may cause delays in coverage. However, when an SSN or ITIN becomes available, contact your employer, or ETF if you are a retiree. Insurance companies are required by the IRS to track benefits by SSN or ITIN, and you may be contacted if your dependents are missing an SSN or ITIN number.

4. If your dependent has a different address than you, be sure to uncheck the box in front of Use Employee Address toward the

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bottom so that you can provide their correct information.

### Before You Enroll in Benefits

Do you have a spouse or dependents you want to add to your profile?

Note: You'll also be able to add dependents and select who you want to cover when you enroll in or edit your benefits.

#### Create dependent profile

First Name \*  Middle Name  Last Name \*

Suffix  Preferred Name

Date of Birth \*

Sex \*  
 Female  Male  Unspecified

Race (formal response)

Ethnicity (formal response)

Please enter one of the following  
 SSN  
 ITIN (Individual Tax Identification Number)  
 ETF Member ID

Relationship \*

Use Employee Address

- 5. Click *Save & Add Another* if you need to add more dependents.
- 6. Click *Save* after you have entered all dependent information and have no additional dependents to add.
- 7. Review the information on the Summary page then click *Next* to continue or *Actions* and *Edit* to correct.

	You have the option to add any eligible dependents you wish to cover at this time, and you will have the option to add dependents as you are enrolling.
	Adding dependents to your profile does not automatically enroll them in benefits, you must add them to each coverage. Additionally, you may need to provide supporting documentation prior to coverage becoming effective.

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### 8.1.4 Medicare Information



Whether or not this information is requested will vary depending on your employer and whether or not medical is offered by your employer. If medical is not offered, you will not be asked to complete, and the system will move to the next applicable section.

Make sure to have your Medicare information available before beginning enrollment. If you do not have it available and proceed, you will need work with your employer or ETF to update the system to ensure you have accurate coverage.

If you are eligible for medical and if you and/or your dependents have Medicare due to age, disability, or end stage renal disease (ESRD), you will need to provide the following information. Be sure to have this information available when you sit down to enroll.

- Medicare (MBI) number
- Eligibility Reason
- Part A effective date
- Part B effective date



Please do not include a Medicare end date while completing this information. ETF receives this info from the Centers for Medicare and Medicaid Services (CMS) directly.

#### 8.1.4.A. Over 65

If you and/or your spouse is age 65 or older, you may be required to provide your Medicare information before you will be able to proceed with your enrollment. Provide the information. Then click *Next* to continue your enrollment.

### Add & Save Medicare

Enter the following information.

SampleK SampleSmith's Medicare Information

Medicare Number \*  Eligibility Reason \*

Age  Renal Disease  Disability

Hospital Insurance Part A

No  Yes

Eligibility Date \*

Effective Date \*  End Date

Medical Insurance Part B

No  Yes

[Next](#) [Previous](#) [Cancel](#)

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### 8.1.4.B. Under 65

1. For members under age 65, the process will be as follows:
  - If neither you nor your dependents have Medicare, select *No* to this question and click *Next* to continue with the enrollment process.
  - If you and/or your dependents have Medicare, select the *Yes* radio button.
  - Select who is covered by Medicare.

## Covered by Medicare?

If you need to provide additional Medicare information that was not previously provided, click "Yes" below.

If no one on your account is eligible for Medicare or Medicare information is already on file, click "No" below.

Are you or any of your dependents covered by Medicare?

Yes

No

Who is covered by Medicare?

SampleSmith, SampleK Test

SamplesSmith, SampleM TestM

SampleSmith, SampleL TestL

Do you have all required details?

Yes, I have all the required details.

No, I do not have all details at this time.

2. Click *Next*.
3. Enter required Medicare information and click *Next*.

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## Add & Save Medicare

Enter the following information.

SampleL SampleSmith's Medicare Information

Medicare Number \* 

Eligibility Reason \*

Age  Renal Disease  Disability

Hospital Insurance Part A

No  
 Yes

Medical Insurance Part B

No  
 Yes

**Next** Previous Cancel

 You may enter your Medicare number with or without the dashes. The system display without the dashes.

4. Review your Medicare information, then click **Save**.

## Review & Save Medicare

Edit, remove or add Medicare information for yourself or your dependent(s). If updates are not needed select save.

SampleL SampleSmith's Medicare Information

Medicare Number	Part A Effective Date	Actions
1EG4TE5MK73	08/01/2021	<b>Actions</b> ▾

**Save** Add Medicare Cancel

 If applicable, you cannot enroll in an HSA if you indicate that Medicare covers you. Contact your employer or ETF if you are a retiree for more information or if you need assistance.

### 8.1.4.C. Retiree Medicare Advantage & Medicare Part D Pharmacy

My Insurance Benefits support both Medicare Advantage and Medicare Part D Pharmacy plans. There are two ways to be

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eligible to be enrolled in these programs after reaching the initial age criteria:

- a qualified life event (QLE), generally tied to aging into eligibility; or
- an Initial Coverage Election Period (ICEP).

If eligible, you will receive plan information in the mail to explain the Medicare Advantage plan(s) and the Medicare Part D Pharmacy you are eligible for. You will need to return a completed form(s) to ETF. Regardless of qualifying reason, the ETF administrator will be responsible for enrolling you and/or any other eligible member(s) in their selected Medicare Advantage plan based on submitted enrollment paperwork. Medicare Part D Pharmacy enrollment will occur automatically. Coverage for either plan is not active until CMS approval is obtained, generally in seven days or less.

It is very important that you thoroughly complete all information accurately to avoid coverage rejection and delays.

For Medicare Advantage plans, once coverage is elected, it is automatically sent to CMS for review and approval. If coverage is:

- Approved by CMS, then current coverage is automatically dropped and the new Medicare Advantage coverage becomes active.
- Declined by CMS, then the Medicare Advantage election is denied and the current coverage remains in effect. The ETF administrator will then work with you to
  - validate the information provided to look for errors, then correct and resubmit; or
  - select an alternative plan and resubmit; or
  - remain in existing coverage and attempt to reenroll in a future enrollment window.

For Medicare Part D Pharmacy plans, you will be automatically enrolled and automatically sent to CMS for review and approval. If coverage is:

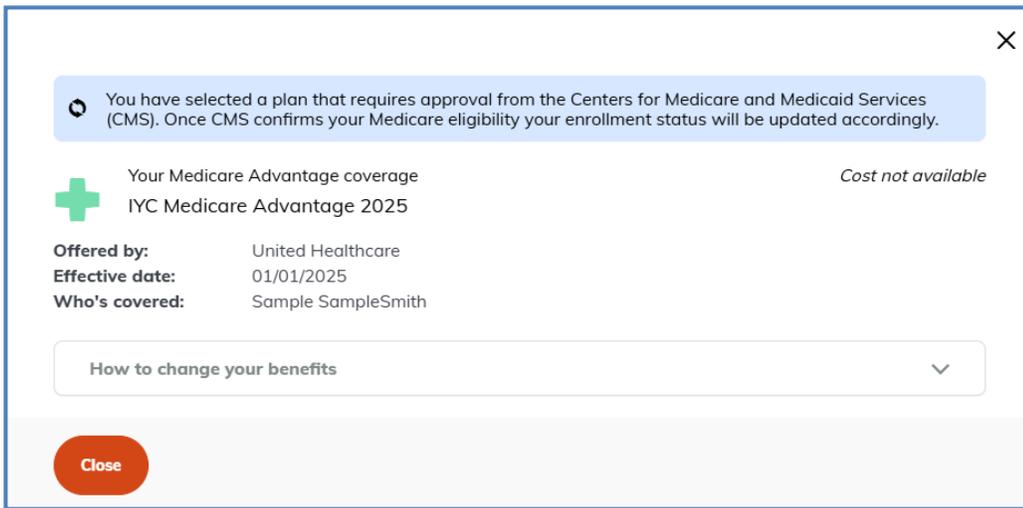
- Approved by CMS, then Medicare Part D Pharmacy coverage becomes active.
- Declined by CMS, then the Medicare Part D Pharmacy election is denied. The ETF administrator will then work with you to
  - validate the information provided to look for errors, then correct and resubmit; or
  - remain in existing coverage and attempt to reenroll in a future enrollment window.

Approval status is indicated in multiple places within My Insurance Benefits.

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### 8.1.5 Medicare Some Coverage

If you have Medicare and non-Medicare eligible persons on your account, Medicare eligible persons can be enrolled into a Medicare Advantage or Medicare Supplement plan while the non-Medicare eligible persons remain enrolled into a Medical plan. This is known as “Medicare Some.” The system will provide you with the appropriate options.

You also have the option of having Medicare and non-Medicare persons enrolled into the same medical plan. You do not have to have Medicare Some coverage.

## 8.2 Begin New Hire or Open Enrollment

After you have completed the review of the system information, if your employer offers medical through ETF, you will start with medical. If medical is not offered, then the Benefit Listing page will appear. The benefits shown on this page will vary between individuals and organizations. Regardless of the benefit type, the system will walk you through reviewing and electing or declining coverage for all benefit plans available to you. Follow the instructions on the screen.

- **Begin enrollment:** For any benefits which are neither enrolled nor declined, you will make a benefit election. Make the elections in the order presented. The eligibility of some plans is determined by your selections for other benefits. For instance, you can only enroll in a state Health Savings Account (HSA) if you enroll in a state High Deductible Health Plan (HDHP). The next available benefit for selection is highlighted and includes a *Begin enrollment* button. Clicking *Begin enrollment* will take you to the first step in the election process for the benefit; this may include selecting who you would like to cover or answering questions to determine your plan rates and eligibility. After completing any required information, you will proceed to the Plan Selection page.
- **Decline coverage:** You can decline coverage for a benefit directly from the *Benefit Listing* page.
- **View cost information:** There are several ways to review your costs on the *Benefit Listing* page. Each selected plan will list the plan cost per payment period. At any time, you may select the shopping cart icon in the upper right corner to view the *Cost Summary*. The shopping cart is available throughout the enrollment process and is updated after each election. The *Cost Summary* lists what you have elected and the total cost, any contributions to pre-tax savings accounts (i.e., Health Savings or Flexible Spending Accounts if applicable), and breaks the costs out by pay frequency.

The running total will be included throughout enrollment next to the shopping cart. As you continue to

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shop for benefits, the amount will increase based on the cost of the benefits you have selected.

Local employers will show the full premium cost under what the employee pays. The employer contribution will appear as \$0, even if they do pay a percentage of the premium. Confirm the premium amounts with your employer before making your election choices.

Other state agencies will generally display both the employee and employer cost of the premiums.



During an enrollment event or window, you can make changes as long as your enrollment window is active. If you do not elect something on your first time through or change your mind later, you can add or remove coverage as many times as you want until the enrollment window closes. When closed, your elections are locked, and not further changes can be made until either the next enrollment event or you have a qualified life event.

### 8.2.1 Declining Coverage

#### **Decline New Coverage**

If you do not want to enroll in a coverage option provided, you must Decline that coverage. For some plans, you can do this by clicking on the *Decline coverage button*.

**Supplemental Dental**  
Coverage for major dental services such as crowns, bridges, and root canals.

Decision required

Would you like Supplemental Dental coverage?

Begin enrollment Decline coverage

For Medical, you must first click on the *Begin enrollment* button.

**Medical**  
Helps cover the cost of medical.

Review required

Please review your Medical

Begin enrollment

Then scroll all the way to the bottom of the page and click on the *Decline coverage* button.

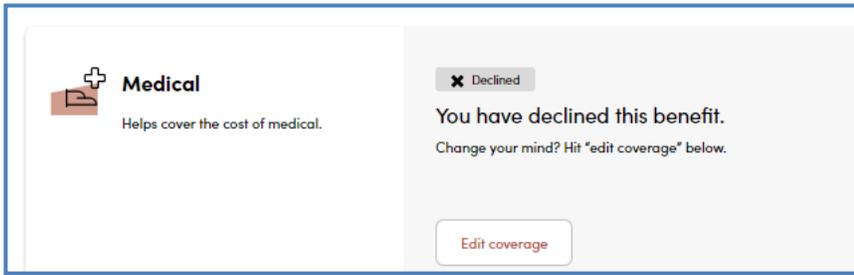
Decline coverage I would like to decline Medical coverage.

Previous Cancel

Some plans like medical, dental, and vision, you are only allowed to make changes to during open enrollment and/or because of a qualified life event. Other benefits such as life insurance or ICI can be added or canceled during a life event or at any time, pending approval or Evidence of Insurability.

When declined, the below screen will appear.

*Click here to go back to the top and the [Table of Contents](#).*

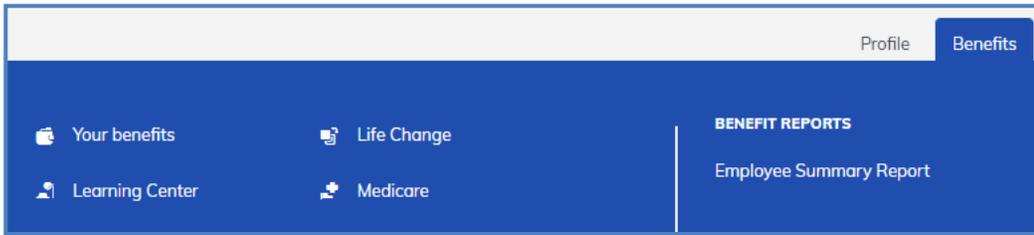


 Note that you can return and elect coverage by selecting the *Edit coverage* button.

### **Decline Existing Coverage**

Outside of Open Enrollment, you will need a valid qualifying life event to cancel existing coverage. There are two ways to initiate a cancellation due to a life event.

On the homepage, hover over the "Benefits" tab on the top right and select "Life Change."



On the next page, you will be required to provide the type of event and the date when it occurred.

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## Did you recently experience a life event?

Life events are significant moments (e.g. birth of a child) that might require you to make a change to your benefits. A life event is often, but not always, required to make changes to most benefits.

### Select a Life Event

The life event you select will help determine which benefits can be edited.

New life event (ex. Marriage, birth, death, loss of other coverage, etc.)

#### Select reason for change \*

Now eligible for other c...

#### Enter the date of this life event \*

### Now eligible for other coverage allows changes to only these benefits:

- Medical
- Supplemental Dental
- Transit
- Uniform Dental
- Vision
- Parking
- Dependent Day Care Account
- Accident

I do not have a specific life event

Next

Cancel

You can also initiate a life event on a specific benefit. To do this, you would instead select "Your benefits" under the Benefits tab, then click "Edit coverage" on the specific benefit you wish to update.

## Your benefits



### Your Medical coverage

Aspirus: IYC Health Plan 2025

Offered By: Aspirus  
Effective Date: 01/01/2025  
Persons Covered: Sample D SampleSmith

**\$48.72**  
twice per month

Edit coverage

Show Plan Details

After selecting "Life or family change (ex. Marriage, birth, death, loss of other coverage, etc.)" on the following screen, you will be presented with the different life events that can be used to update your current coverage.

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# Medical

Please select a reason for changing your benefit coverage.

You are making a change to benefit elections. Why are you making this change?

Life or family change (ex. Marriage, birth, death, loss of other coverage, etc.)

You must have a qualifying life or family change to change coverage.

**Note:** All changes to your benefits must be approved by your HR Administrator before they become effective.

Next

Previous

Cancel

# Medical

Please select the reason for changing or enrolling for coverage.

- Adoption
- Birth
- Change in Residence
- Death of dependent
- Divorce
- Guardianship of a child
- Legal Custody of a Child
- Loss of other coverage
- Marriage
- Now eligible for other coverage
- I do not have any life or family change events

Next

Previous

Cancel

## 8.2.2 Medical Opt-Out

Certain members, such as state employees and some local employers, may have an opt-out option, whereby, you may receive a medical opt-out payment if you decline medical insurance coverage. For state employees, this payment will be added to your regular paycheck. You will see the medical Opt-Out denoted on your Benefits Summary Page.



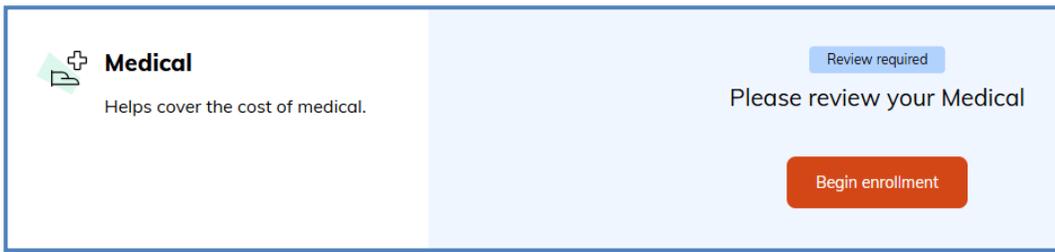
If you decline medical, you will also not have pharmacy, Uniform Dental, or wellness coverages, if offered by your employer. If you decline coverage, you will be unable to elect medical coverage for you and/or your dependents until the next open enrollment period or a qualifying life event.

To decline coverages, select *Begin enrollment* from the main screen:

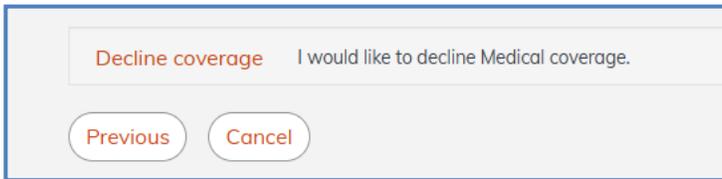
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*Click here to go back to the top and the [Table of Contents](#).*

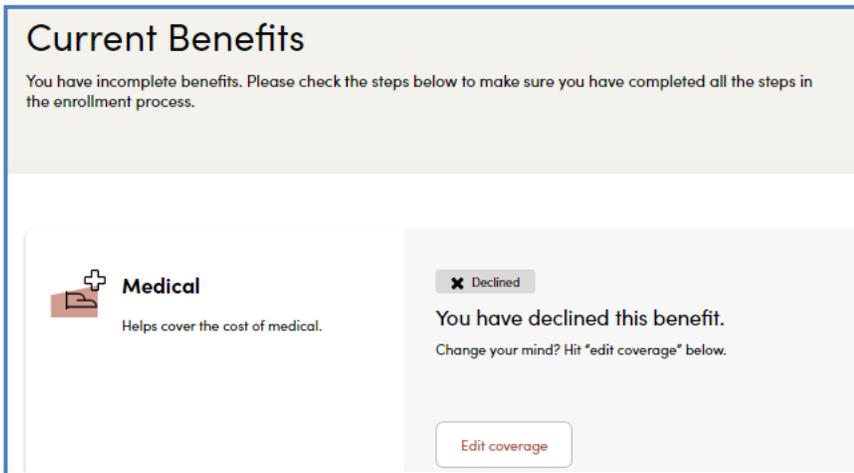
---



Then scroll all the way to the bottom of the page and click on the *Decline coverage* button.



If you change your mind, you can *Edit coverage* as long as your enrollment window is open.



### 8.3 Medical Enrollment

If offered by your employer, you will see medical coverage.

1. To enroll click *Begin Enrollment*. If you do not want to enroll, scroll to the bottom of the Medical Enrollment page and click *Decline Coverage*. You can return later assuming you still have time in your enrollment window and elect coverage if you change your mind.

---

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---



The banner is divided into two sections. The left section has a white background and contains a green medical icon (a cross over a book), the word "Medical" in bold, and the text "Helps cover the cost of medical." below it. The right section has a light blue background and contains a small blue button labeled "Review required" at the top, the text "Please review your Medical" in the middle, and a larger orange button labeled "Begin enrollment" at the bottom.

2. If you Begin Enrollment, you may be asked to complete a Medicare and other coverages survey for you and your dependents. Answer the questions and provide the requested information as appropriate.

### 8.3.1 Adding Coverage for Dependents

If the benefit offers dependent coverage, and you elect it, the system will either provide you with the opportunity to identify who should be covered or will automatically include the appropriate dependents. Be sure all your dependents are listed or add any that are missing. The appropriate coverage level and premium for the plan you select will be determined for you based on the dependents you elect to cover.

	Some dependents may not be available for some benefits. For example, parents or siblings are not covered under medical.
---	---

Complete the following steps to add a dependent to your coverage during your election window for initial, new hire, or open enrollment.

1. Begin enrollment or edit the coverage for a benefit that offers dependent coverage. The *Covered persons* section is displayed at the top of the Plan Listing page.
2. If asked, select the name of any existing dependents that you would like to cover by clicking on their name. This will change their name to green shading with a checkmark to indicate the dependent is selected for coverage. You may also notice that the screen will refresh, and the premium amount may change depending on the benefit selected.
  - To remove an eligible person from coverage, click on their name so that they are no longer shaded green, and the checkmark is gone.
3. If you need to add a new dependent that is not already listed, click *Add Dependent* to the far right. See also Review, Add and/or Update Dependents for more information.
4. After you have determined who you are covering, move on to choosing your coverage.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

PROFILE – ● BENEFITS – ○ CHECKOUT 🛒

## Choose your Medical plan.

Choose your medical plan type

**Who do you want to cover on this plan?** Add Dependent

Sample Sampl...
  SampleC Sample...
  SampleD Sample...

**Health Insurance Premiums**

Filter plans ▼

**Resources**

[ETF's Health & Pharmacy page](#)  
Find plan comparisons, health plans in your area, drug costs, in-network pharmacies, and more.

[ETF's Well Wisconsin page](#)  
Learn about resources and tools available through the wellness program.

[ETF's Health Savings Accounts \(HSAs\) page](#)  
For HDHP Participants Only: Learn how an HSA works, eligible expenses, deadlines and more.

**Terms and Conditions**  
I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

Sort by Plan Cost, low to high ☰

<p>Aspirus: HDHP 2025</p> <p>Plan Cost \$379.30 Employer Cost (\$368.24)</p> <p style="text-align: center;"><b>You Pay (Semi-Monthly Cost)</b></p> <p style="text-align: center; font-size: 1.2em;"><b>\$11.06</b></p> <p style="text-align: center;"><a href="#">Plan details</a></p> <p style="text-align: center; background-color: #0070C0; color: white; padding: 5px;">Select plan</p>	<p>Common Ground: HDHP 2025</p> <p>Plan Cost \$366.48 Employer Cost (\$355.42)</p> <p style="text-align: center;"><b>You Pay (Semi-Monthly Cost)</b></p> <p style="text-align: center; font-size: 1.2em;"><b>\$11.06</b></p> <p style="text-align: center;"><a href="#">Plan details</a></p> <p style="text-align: center; background-color: #0070C0; color: white; padding: 5px;">Select plan</p>	<p>Dean Health Plan by Medica: HDHP 2025</p> <p>Plan Cost \$333.95 Employer Cost (\$322.89)</p> <p style="text-align: center;"><b>You Pay (Semi-Monthly Cost)</b></p> <p style="text-align: center; font-size: 1.2em;"><b>\$11.06</b></p> <p style="text-align: center;"><a href="#">Plan details</a></p> <p style="text-align: center; background-color: #0070C0; color: white; padding: 5px;">Select plan</p>
<p>GHC of Eau Claire Greater Wisconsin: HDHP 2025</p> <p>Plan Cost \$403.06 Employer Cost (\$392.00)</p> <p style="text-align: center;"><b>You Pay (Semi-Monthly Cost)</b></p> <p style="text-align: center; font-size: 1.2em;"><b>\$11.06</b></p>	<p>GHC of Eau Claire River Region: HDHP 2025</p> <p>Plan Cost \$413.72 Employer Cost (\$402.66)</p> <p style="text-align: center;"><b>You Pay (Semi-Monthly Cost)</b></p> <p style="text-align: center; font-size: 1.2em;"><b>\$11.06</b></p>	<p>GHC of South Central Wisconsin Dane Choice: HDHP 2025</p> <p>Plan Cost \$310.35 Employer Cost (\$299.29)</p> <p style="text-align: center;"><b>You Pay (Semi-Monthly Cost)</b></p> <p style="text-align: center; font-size: 1.2em;"><b>\$11.06</b></p>

### 8.3.2 Choosing Medical Coverage

Depending on your employer, you may be eligible to enroll in medical coverage. There may be multiple options available to you, so you may need to scroll down the page to see them all. The premiums on this page are the medical portion of your health insurance premium. Your total health insurance premium will be available on the summary page, after you make your selections.

Your health insurance premium includes a medical premium, pharmacy premium, the wellness program (except for Medicare Advantage plans,) and an administrative fee. You may also have the option to enroll in dental. By enrolling in health insurance, you agree to pay the entire premium. For more information visit the [Components of Your Health Insurance Premium](#) page on the ETF website.

The Plan Listing page may vary greatly depending on the benefit. Some of the options you may encounter are listed below:

- **Covered persons:** This section displays your name along with the dependents that you have previously added. You manage your dependents by selecting or deselecting the name of the dependents to be added to or removed from the benefit coverage. A checkmark indicates the dependent has been selected for coverage. To add another dependent, click the *Add Dependent* link at the bottom of the section.
- **Resources:** This section displays external links to the ETF website with information on available health benefits.

---

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---

1. After you have determined the plan you would like, click *Select plan*.

The screenshot shows a web interface for selecting a health plan. At the top, there are navigation tabs: PROFILE (selected), BENEFITS, and CHECKOUT. A 'Sort by' dropdown is set to 'Plan Cost, low to high'. On the left, there is a 'Resources' section with links for 'ETF's Health & Pharmacy page', 'ETF's Well Wisconsin page', 'ETF's Health Savings Accounts (HSAs) page', and 'Terms and Conditions'. The main area displays a grid of six plan options, each with its own cost breakdown and a 'Select plan' button.

Plan Name	Plan Cost	Employer Cost	You Pay (Semi-Monthly Cost)
Plan 1	\$379.30	(\$368.24)	\$11.06
Plan 2	\$366.48	(\$355.42)	\$11.06
Plan 3	\$333.95	(\$322.89)	\$11.06
GHC of Eau Claire Greater Wisconsin: HDHP 2025	\$403.06	(\$392.00)	\$11.06
GHC of Eau Claire River Region: HDHP 2025	\$413.72	(\$402.66)	\$11.06
GHC of South Central Wisconsin Dane Choice: HDHP 2025	\$310.35	(\$299.29)	\$11.06

The screenshot shows a summary page for 'Health Benefits and Health Savings Accounts 2025'. The page title is 'Health Benefits and Health Savings Accounts 2025 Summary'. Below the title, a note states: 'Your Health Benefits and Health Savings Accounts 2025 benefit summary is shown below. Please note that your benefits have not been saved. You must click Save to complete the section.' The main content area is titled 'Medical' and features a green plus sign icon. The details listed are: 'Quartz UW-Health: IYC Health Plan 2025', 'Offered By: Quartz', 'Effective Date: 07/01/2025', 'You Pay: \$122.85 twice per month', and 'Persons Covered: Sample B SampleSmith, SampleC SampleSmith'. There is an 'Additional Insurance' section with an 'Edit' button and the text 'No policy on record' and 'No additional insurance policy information on record'. At the bottom, there are 'Edit coverage' and 'Edit plan' buttons, and a 'Save' button (highlighted in red) and a 'Cancel' button.

2. If you have elected to cover dependents on your plan and this is the first time they are enrolled on your plan, a reminder

*Click here to go back to the top and the [Table of Contents](#).*

will appear that you will need to provide documentation. Click *Continue* after you read the reminder.

Documentation will be needed

---

You have added one or more dependents which requires documentation for verification of dependent status.

You'll have the opportunity to upload your documentation after you finish enrolling in benefits.

[Continue](#)

### 8.3.3 Additional Insurance - Coordination of Coverage

Depending on if your employer offers medical insurance, you may be asked if you or any of your dependents are covered by additional health insurance. If you or your dependents are covered under another health insurance policy, follow the steps below.

1. Select the *Yes* or the *No* radio button for the *Additional Insurance* question, as appropriate, then click *Next*.
  - a. If you select *No*, you will proceed to the next step in enrollment.
  - b. If you select *Yes*, you be asked to provide additional information.

**MEDICAL**

## Additional Insurance

Currently, do any of the persons covered for this benefit including yourself have other health insurance?

Yes

No

**Please Note:**  
It is very important to enter your and/or your covered dependents' insurance policies. By providing this information, you will ensure that the claims for you and your covered dependents will be processed timely and accurately.

Failure to provide this information will result in your claims not being processed correctly.

[Next](#)   [Previous](#)   [Cancel](#)

2. Indicate *Yes* and *Next* if you have the requested information available including:
  - a. policy number of the additional insurance,
  - b. the name of the policyholder,
  - c. the insurance carrier, and
  - d. the effective dates.

---

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---

Alternatively, select *No*. Then click *Next* if you do not have this information available.

	In the event that you do not supply this information, you may be contacted by either your employer and/or medical carrier to see if you do have additional coverage available in the future.
---	--

**MEDICAL**  
**Additional Insurance**

Do you have all the following required information for entering an insurance policy?  
Policy Number, Policyholder, Carrier's Name, and Effective Dates

Yes, I have all the above required information.  
 No, I do not have all the above required information.

**Next** Previous Cancel

3. Enter the *Policy Number* and click *Next*.

**MEDICAL**  
**Medical: Additional Insurance**

Enter the policy number for this insurance policy.

Policy Number \*

**Next** Previous Cancel

4. Select the policyholder and click *Next*.

**MEDICAL**  
**Medical: Additional Insurance**

Select the policyholder of this insurance policy. (Policy 12345)

Sarah HinTest1957  
 Thomas HinTest1957  
 Sally HinTest1957  
 Other

**Next** Previous Cancel

5. Enter the insurance carrier information and click *Next*.

---

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---

### Medical: Additional Insurance

Enter the carrier information for this insurance policy. (Policy 12345-32101-33)

Carrier Name \*

Carrier Address      Carrier Address 2

City      State / Province

ZIP / Postal code      Country

Phone

**Next**   Previous   Cancel

6. Indicate the coverage status of each person for the policy. For covered persons, indicate the coverage effective date and if coverage has ended, indicate the coverage end date. Click Next after all required information has been entered.

### MEDICAL

### Medical: Additional Insurance

Please enter all additional insurance policy information for the persons covered under this plan including yourself. (Policy 12345)

Full Name	SSN	Current Status	*Coverage Effective Date	Coverage End Date
Sarah HinTest1957	***-**-1957	Never Covered		
Thomas HinTest1957	***-**-5120	Actively Covered	07/22/2023	07/22/2024
Sally HinTest1957	***-**-6789	Never Covered		

Please Note:  
It is very important that you enter a coverage effective date and coverage end date for every person who was covered in the past and a coverage effective date for every person who is actively covered.

**Next**   Previous   Cancel

7. Review the details and/or add additional insurance as necessary.

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**MEDICAL**

## Medical: Additional Insurance

Please review your additional insurance policies.

Policy Number	Policy Holder	Carrier Name	Actions
12345	Thomas HinTest1957	Testing Medical Insurance	Actions -

[Add Additional Insurance Policy](#)

[Next](#) [Previous](#) [Cancel](#)

8. Click **Next** to continue the enrollment process. Click **Save** after your changes are complete.

### 8.3.4 Administrative Fee

There is a standard Administrative Fee that is automatically added to benefits and cannot be declined. This fee covers the costs associated with managing the benefit programs, as well as supporting enrolled members. More information can be found on the [Components of Your Health Insurance Premium](#) page on ETF website. Click **Next**.



## Administrative Fee

Administrative Fee 2025

Offered By: State of Wisconsin  
 Effective Date: 07/01/2025  
 You Pay: \$0.99 twice per month

### 8.3.5 Health Savings Account (HSA)

If you are a state employee and elect a High Deductible Health Plan (HDHP), you may be able to add funds to a Health Savings Account (HSA). An HSA allows you to set aside tax-free dollars each year for health care expenses not covered by insurance. You may use these funds to pay for eligible health care expenses incurred by you, your spouse, and your qualified dependents.

Your employer also contributes to your financial account, you will see the amount before you begin to contribute.

The example shows how you can contribute to a Health Savings Account (HSA) that is associated with a High Deductible Health Plan (HDHP). Be sure to select an HDHP medical plan if you wish to contribute to an HSA when you are electing medical coverage. Closely review the plan name to confirm if the plan allows HSA contributions.

---

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PROFILE — BENEFITS — CHECKOUT

## Choose your Medical plan.

Choose your medical plan type

**Who do you want to cover on this plan?** Add Dependent

✓ Sample Sampl... ✓ SampleC Samp... ✓ SampleD Sam...

Health Insurance Premiums

Sort by Plan Cost, low to high

Filter plans

Resources

[ETF's Health & Pharmacy page](#)  
Find plan comparisons, health plans in your area, drug costs, in-network pharmacies, and more.

[ETF's Well Wisconsin page](#)  
Learn about resources and tools available through the wellness program.

[ETF's Health Savings Accounts \(HSAs\) page](#)  
For HDHP Participants Only: Learn how an HSA works, eligible expenses, deadlines and more.

Plan Name	Plan Cost	Employer Cost	You Pay (Semi-Monthly Cost)
Aspirus: HDHP 2025	\$948.25	(\$918.55)	\$29.70
Common Ground HDHP 2025	\$916.20	(\$886.50)	\$29.70
Dean Health Plan by Medica: HDHP 2025	\$834.87	(\$805.17)	\$29.70

Plan details Select plan

1. If you elected a high deductible health plan, you must elect to contribute to a Health Savings Account. After you have completed the medical and dental enrollment process, you will Select how you would like to contribute to your HSA. Then select *Continue*.
  - A *Custom Amount* is set by you for as much as you would like up to the maximum legal amount (less any employer contributions, if applicable).
  - The *Employer Only*, if applicable, is the amount your employer will contribute on your behalf when you enroll in these plans, and you will not contribute anything additional.

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## Health Savings Account (HSA)

An HSA is an individually-owned, tax advantage savings account. An HSA allows you to pay for current healthcare expenses and save for those in the future. It is used to pay for eligible medical, dental, vision and prescription expenses not covered by insurance. Contributions made through payroll deduction are pre-tax, and the interest earned is tax-free.

An HSA is only available to employees who enroll in a High Deductible Health Plan (HDHP). If you enroll in an HDHP plan, you must enroll in an HSA.

You cannot have any other health coverage that pays out-of-pocket health care expenses before you meet your plan deductible (ex: Medicare A and B, TRICARE, VA benefits received in the past 90 days, Badger Care, non-HDHP coverage through a family member, etc.)

Once you select whether you would like to contribute to the HSA or just receive employer contributions, click "How is this calculated" to confirm the amount you can contribute to maximize your HSA contributions for the year.

1. How would you like to contribute to your HSA?

Custom amount  
Contribute a custom amount to be deducted from every paycheck.

Employer only  
I don't want to contribute right now (you will still receive your employer's contribution).

Continue Previous Cancel & return home

2. If you select *Custom Amount*, you will need to enter the amount you would like to contribute on an annual basis. This amount will be divided by the total number of paychecks left in the year if starting contributions mid-year, or the full year if electing for an upcoming plan year. After you have entered the amount, select *Continue*.

2. Select a way to contribute to your HSA

Ongoing Contribution  
Schedule an amount to be deducted from every paycheck in the upcoming benefit year.

\$ - Enter an annual amount -  
3600.00 / 12 paychecks = \$300.00

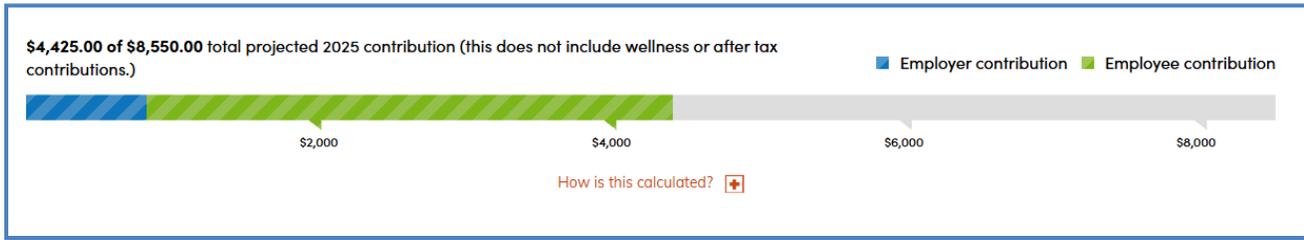
Continue Previous Cancel & return home

To assist you in understanding how much you can contribute and who is contributing, make sure to review the contribution meter on the top of the page.

---

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The meter indicates the maximum annual amount that may be contributed to the HSA based on the coverage level of the selected health plan. Limits are determined annually by the federal government. The system will not allow you to contribute over the annual limit to the HSA account. It monitors your and your employer’s contributions and to ensure the total does not exceed the federal annual maximum. If you are eligible for a catch-up amount based on your age, this will also be included in the amount you may contribute. This meter updates to reflect any change in the contribution total as contributions are entered. Click the *How is this calculated* link below the meter to see additional details regarding current contributions.



- After clicking continue, review your *HSA Contributions* by clicking on the two views.
  - Contribution summary* provides a high-level summary of the planned contributions throughout the year for both the employee and employer.
  - If you would like to change your contribution, click the *Edit* button now. It will take you to the contribution page where you update your amount. Note, you can stop and change contribution amounts in the future. To learn more see the [Changing Contribution Amounts after Initial Enrollment](#) for more information.

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## Review your HSA contributions

At the end of this benefit year, the total amount contributed to your HSA is expected to be \$4,425.00. This does not include wellness or after tax contributions. Please make sure to set your annual goal accordingly.

Contribution summary    Contribution schedule

🔄 Pending

\$ Employer ongoing contribution

Your employer ongoing contribution is scheduled from 07/10/2025 to 12/24/2025

**\$68.75 / \$825.00**

per paycheck / total contribution

🔄 Pending

\$ Employee ongoing contribution

Your ongoing contribution is scheduled from 07/10/2025 to 12/24/2025

**\$300.00 / \$3,600.00**

per paycheck / total contribution

Edit
Delete

You have no available pay periods remaining; however, you may be able to edit your pending or in-progress contributions to change the amount.

Total 2025 Contributions: \$4,425.00

Save & Continue
Add contribution
Cancel & return home

- The *Contribution schedule* provides a detailed list of each contribution that will be made or has been made based on your payroll schedule. It shows who the contribution was from – you or your employer, if applicable, as well as the date, status, and the amount. Toward the bottom is also the total expected annual contribution.

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## Review your HSA contributions

At the end of this benefit year, the total amount contributed to your HSA is expected to be \$4,425.00. This does not include wellness or after tax contributions. Please make sure to set your annual goal accordingly.

Contribution summary   Contribution schedule

Type	Date	Status	Amount
■ Employer ongoing contribution	07/10/2025	Pending	\$68.75
■ Employee ongoing contribution	07/10/2025	Pending	\$300.00
■ Employer ongoing contribution	07/24/2025	Pending	\$68.75
■ Employee ongoing contribution	07/24/2025	Pending	\$300.00
■ Employer ongoing contribution	08/07/2025	Pending	\$68.75
■ Employee ongoing contribution	08/07/2025	Pending	\$300.00
■ Employer ongoing contribution	08/21/2025	Pending	\$68.75
■ Employee ongoing contribution	08/21/2025	Pending	\$300.00
■ Employer ongoing contribution	09/04/2025	Pending	\$68.75
■ Employee ongoing contribution	09/04/2025	Pending	\$300.00
■ Employer ongoing contribution	09/18/2025	Pending	\$68.75
■ Employee ongoing contribution	09/18/2025	Pending	\$300.00
■ Employer ongoing contribution	12/11/2025	Pending	\$68.75
■ Employee ongoing contribution	12/11/2025	Pending	\$300.00
■ Employer ongoing contribution	12/24/2025	Pending	\$68.75
■ Employee ongoing contribution	12/24/2025	Pending	\$300.00

You have no available pay periods remaining; however, you may be able to edit your pending or in-progress contributions to change the amount.

Total 2025 Contributions: \$4,425.00

Save & Continue

Add contribution

Cancel & return home

2. After you have reviewed this information, select *Save & Continue*
3. Please read the terms and conditions for the health savings account.
4. Check the *Acknowledgment* box at the bottom. Then click *Next*.
5. You will be returned to the main enrollment page to review the information for the plans elected so far. Take a moment to review and edit if necessary.

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## Medical

### Common Ground: HDHP 2025

Offered By: GHC-EC  
 Effective Date: 07/01/2025  
 You Pay: \$29.70 twice per month  
 Persons Covered: Sample B SampleSmith, SampleC SampleSmith, SampleD SampleSmith

**Additional Insurance**  [Edit](#)

No policy on record

No additional insurance policy information on record

Edit coverage
Edit plan



## Pharmacy

### Navitus Pharmacy 2025

Offered By: Navitus  
 Effective Date: 07/01/2025  
 You Pay: \$20.60 twice per month  
 Persons Covered: Sample B SampleSmith, SampleC SampleSmith, SampleD SampleSmith

### Cost Summary

This is a summary of your current benefit elections. [Hide all](#)

Benefit Elections (5 items)  

<b>Semi-Monthly</b>	
Medical	\$29.70
Pharmacy	\$20.60
Wellness Program	\$0.71
Administrative Fee	\$0.99
Uniform Dental	\$5.00
<b>Semi-Monthly Total</b>	<b>\$57.00</b>

---

Pre-Tax Savings Accounts (2 items)  

<b>Semi-Monthly Contributions</b>	
Health Savings Account (HSA)	\$300.00
Employee Contribution	
Health Savings Account (HSA)	+\$68.75
Employer Contribution 	
<b>Semi-Monthly Contributions Total</b>	<b>\$368.75</b>

---

You Pay 

**Semi-Monthly Total**  **\$357.00**



## Health Savings Account (HSA)

### Health Savings Account (HSA) 2025

Effective Date: 07/01/2025

**Your Contributions**

Employee Per Pay Period Contribution: \$300.00 Semi-Monthly (07/10/2025 - 12/24/2025)

Total Employee Ongoing Contribution: \$3,600.00 per benefit year

Total Employee Contributions: \$3,600.00 per benefit year

**Employer Contributions**

Employer Ongoing Contributions: \$825.00 per benefit year

Total Employer Contributions: \$825.00 per benefit year

Total Employer and Employee Contributions: \$4,425.00 per benefit year

**Additional Information**

[Show details](#) 

Edit contribution

Save
Cancel

5. Click **Save** to continue with your enrollment.

### 8.3.6 Uniform Dental Benefits

Depending on your employer and medical coverage, you may have the option to enroll in *Uniform Dental* benefits. If you choose to enroll, all dependents who have been enrolled in medical will be enrolled into dental coverage as well. This is automatic and cannot be changed. To select coverage:

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---

1. Click *Select Plan*. If you do not want coverage, select *Decline coverage*.

2. Click *Next* to continue with your enrollment.

### 8.3.7 Preventive Dental Benefits

The availability of Preventive Dental will depend on your employer's dental coverage offerings.. If your employer's medical coverage also offers Uniform Dental, you will only be eligible to elect Preventive Dental if you decline both the medical *and* Uniform Dental coverage. If your employer does not offer medical coverage with Uniform Dental, you may be able to elect Preventive Dental, if offered by your employer, regardless of whether you elect Medical coverage or not.

To select coverage:

1. Select who you would like to be covered by clicking on the names of your dependents to highlight their name in green and have a check next to their name. Then click *Select Plan*. If you do not want coverage, select *Decline coverage*.

### 8.3.8 Reviewing your Health Benefits

The Benefit Listing page can vary depending on your enrollment period, the coverages that are available to you, and the coverages you have elected. It is a summary page that shows what you have elected as well as the cost. This page should be

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carefully reviewed. For more information visit the [Components of Your Health Insurance Premium](#) page on the ETF website.

	<p>The running premium total will be included throughout enrollment next to the shopping cart. As you continue to shop for benefits, the amount will increase based on the cost of the benefits you have selected.</p> <p>Costs shown reflects your pay schedule, i.e., weekly, bi-weekly, semi-monthly, and/or monthly contributions as is applicable to you.</p> <p>Confirm the amount of premium that is covered by your employer, especially local employers. The system does not reflect the premium contribution of local employers.</p> <p>The health insurance premium includes a medical premium, pharmacy premium, wellness program, and an administrative fee. By enrolling in health insurance, you agree to pay the entire premium.</p>
---	--

The following example depicts the Benefit Listing page during open enrollment. On this screen be sure to:

1. Review your elections and make any edits by clicking on *Edit Coverage*.
2. Review the *Cost Summary* section to understand your contributions. Going forward this *Cost Summary* chart will show a running total as you elect each new coverage option. Be sure to review is as you proceed to elect additional coverages to understand how your finances will be impacted.
3. Click the *Save* button so that your elections are saved as of this point in the process.
4. After clicking on *Save*, you will be returned to the list of available benefits, so that you can continue the enrollment process.

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# Health Benefits and Health Savings Accounts 2025 Summary

Your Health Benefits and Health Savings Accounts 2025 benefit summary is shown below. Please note that your benefits have not been saved. You must click Save to complete the section.



## Medical

Common Ground: HDHP 2025

Offered By: GHC-EC

Effective Date: 07/01/2025

You Pay: \$29.70 twice per month

Persons Covered: Sample B SampleSmith, SampleC SampleSmith, SampleD SampleSmith

### Additional Insurance [Edit](#)

No policy on record

No additional insurance policy information on record

[Edit coverage](#) [Edit plan](#)



## Pharmacy

Navitus Pharmacy 2025

Offered By: Navitus

Effective Date: 07/01/2025

You Pay: \$20.60 twice per month

Persons Covered: Sample B SampleSmith, SampleC SampleSmith, SampleD SampleSmith



## Wellness Program

Wellness Program 2025

Offered By: WebMD

Effective Date: 07/01/2025

You Pay: \$0.71 twice per month

Persons Covered: Sample B SampleSmith, SampleC SampleSmith



## Administrative Fee

Administrative Fee 2025

Offered By: State of Wisconsin

Effective Date: 07/01/2025

You Pay: \$0.99 twice per month



## Uniform Dental

Uniform Dental 2025

Offered By: Delta Dental of Wisconsin

Effective Date: 07/01/2025

You Pay: \$5.00 twice per month

Persons Covered: Sample B SampleSmith, SampleC SampleSmith, SampleD SampleSmith

[Edit coverage](#)



## Health Savings Account (HSA)

Health Savings Account (HSA) 2025

Effective Date: 07/01/2025

Your Contributions

Employee Per Pay Period Contribution: \$300.00 Semi-Monthly (07/10/2025 - 12/24/2025)

Total Employee Ongoing Contribution: \$3,600.00 per benefit year

Total Employee Contributions: \$3,600.00 per benefit year

Employer Contributions

Employer Ongoing Contributions: \$825.00 per benefit year

Total Employer Contributions: \$825.00 per benefit year

Total Employer and Employee Contributions: \$4,425.00 per benefit year

### Additional Information

[Show details](#)

[Edit contribution](#)

[Save](#)

[Cancel](#)

## Cost Summary

This is a summary of your current benefit elections.

[Hide all](#)

### Benefit Elections (5 items) [?](#)



#### Semi-Monthly

Medical	\$29.70
Pharmacy	\$20.60
Wellness Program	\$0.71
Administrative Fee	\$0.99
Uniform Dental	\$5.00

**Semi-Monthly Total** **\$57.00**

### Pre-Tax Savings Accounts (2 items) [?](#)



#### Semi-Monthly Contributions

Health Savings Account (HSA) Employee Contribution	\$300.00
Health Savings Account (HSA) Employer Contribution <a href="#">?</a>	+\$68.75

**Semi-Monthly Contributions Total** **\$368.75**

### You Pay [?](#)

**Semi-Monthly Total** **\$357.00**

[Click here to go back to the top and the Table of Contents.](#)

## 8.4 Other Benefits

Depending on your employer, you may be offered a variety of other benefits. It is important to review all the options and decide if you want the benefits. You must either enroll in or decline coverage.

Additionally, as you proceed with each coverage election, the *Cost Summary* chart will show to the right, displaying a running total of what you have chosen. Be sure to review it as you proceed to elect additional coverages to understand how your finances will be impacted.



Some employers may have differently named benefits, their benefits may be in a different order, and/or they may have more or less benefits than documented in the remaining sections. Regardless of these variances, members should follow the directions on the screen and make sure to Save after each decision is made to ensure their elections are captured.

### 8.4.1 Pre-Tax Savings Account: Health Care Flexible Spending Account and Limited Purpose Plans

Depending on your employer, you may be eligible to enroll in pre-tax Health Care savings account. This account allows you to contribute funds pre-tax that can be used to cover approved health expense types. This money must be utilized in the coverage period or prior to the end of the carryover period or it will be lost. Your medical plan choice determines your savings account eligibility – Health Care or Limited Purpose. See the ETF website for more information - [etf.wi.gov/benefits](http://etf.wi.gov/benefits).

- If you are enrolled in the High Deductible Health Plan (HDHP), regardless of whether you are contributing to a Health Savings Account, you can only enroll in the Limited Purpose Flexible Spending Account. You cannot enroll in the Health Care FSA. A Limited Purpose Flexible Spending Account is a pre-tax benefit used to pay for eligible dental, vision care, and post-deductible medical expenses for participants enrolled in a High Deductible Health Plan (HDHP).
- If you are enrolled in a non-HDHP plan, you cannot enroll in the Health Care Flexible Spending Account. A Health Care Flexible Spending Account allows contributions to be used for medical, prescriptions, dental, and vision expenses.

1. To elect coverage, select *Begin enrollment* or if you wish to decline, select *Decline coverage*.



### Health Care FSA

Set aside pre-tax dollars to cover certain out-of-pocket costs for medical, dental and vision.

Decision required

Would you like Health Care FSA coverage?

**Begin enrollment** Decline coverage

2. A reminder of the rules for enrollment will appear. Review the message and click the *Close* button.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

**Eligibility**

Your health plan design determines your Health Care Flexible Spending Account (FSA) eligibility.

If you are enrolled in the High Deductible Health Plan (HDHP) or Access HDHP with a Health Savings Account, you can enroll in the Limited Purpose Flexible Spending Account (LPFSA). You cannot enroll in the Health Care FSA.

If you are not enrolled in a HDHP with a Health Savings Account, you can enroll in the Health Care FSA. You cannot enroll in the LPFSA.

Close

3. Depending on your employer, you may need to choose the correct type of FSA account based on the medical plan that you selected. For other employers, there will only be one choice.
  - *Select plan – Health Care Flexible Spending Account (FSA)*, if you have a non-High Deductible Health Plan, and are not enrolled in a Health Savings Account (HSA)
  - *Select plan – Limited Purpose Health Care Flexible Spending Account*, if you have a High Deductible Health Plan and/or are enrolled in a Health Savings Account (HSA), even if you are not contributing and/or if your employer is.

**Choose your Health Care FSA plan.**

Do you want to participate in a Flexible Spending Account?

Eligibility

Resource

[ETF's Pre-Tax Savings Accounts page](#)  
Learn about the different types of accounts, eligible expenses, deadlines, and more.

[Terms and Conditions](#)  
I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

**Health Care Flexible Spending Account (FSA)**

Not compatible with Health Savings Account

Select plan Plan details

**Limited Purpose Flexible Spending Account (LPFSA)**

Compatible with Health Savings Account

Select plan Plan details

Decline Coverage I would like to decline Health Care FSA coverage.

Previous Cancel

4. Regardless of the plan you select, you will need to elect your annual contribution amount. Enter the total annual *Contribution Amount* in the space provided then click *Next*.

	<p>Remember, only add as much money as you are expecting to incur in eligible expenses within the plan year. The carryover amount changes annually, and funds in excess of the carry over amount will be lost at the end of the carryover period. Additionally, the system will not allow you to over contribute above the maximum annual amount.</p>
---	---

---

*Click here to go back to the top and the [Table of Contents](#).*

---

## Health Care FSA

How much money do you want to contribute to your *Health Care FSA* account?

You can contribute between \$50.00 and \$3,200.00 per plan year.

Contribution Amount

The amount you enter will be divided into individual deductions over the remainder of the year.

**Decline coverage** I would like to decline Health Care FSA coverage.

**Next** **Previous** **Cancel**

5. Review the *Summary* and make any changes. Then click *Save*.

## Health Care FSA 2025 Summary

Your Health Care FSA 2025 benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.



### Health Care FSA

Health Care Flexible Spending Account (FSA) 2025

Effective Date: 07/01/2025

Contribution Amount: \$500.00 Per Plan Year \$45.45 twice per month

**Additional Information**

Show details ▾

**Edit plan** **Edit contribution** **Plan details**

**Save** **Cancel**

6. After clicking *Save*, you will be returned to the list of available benefits, so that you can continue the enrollment process.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

### 8.4.2 Pre-Tax Savings Account: Dependent Day Care FSA

Depending on your employer, you may be eligible to enroll in a Dependent Day Care Flexible Spending Account (FSA). This FSA allows you to contribute funds pre-tax that can be used to cover approved dependent care expense types. This money must be utilized in the coverage period or prior to the end of the carryover period or will be lost. For more information on this benefit, visit the ETF website - [etf.wi.gov/benefits](http://etf.wi.gov/benefits).

1. Depending on your employer, you may be eligible to enroll in *Dependent Care FSA*. To elect coverage, select *Begin enrollment* or if you wish to decline, select *Decline coverage*.



### Dependent Day Care Account

Set aside pre-tax dollars to use for eligible care expenses.

Decision required

Would you like Dependent Day Care Account coverage?

[Begin enrollment](#) [Decline coverage](#)

2. A reminder of the rules for enrollment will appear, review the message and click the *Close* button.

### Eligibility

You are only eligible for this account if you have day care expenses for a child dependent under age 13 or for dependent adults who can't care for themselves.

[Close](#)

3. Choose *Select plan*.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

# Choose your Dependent Day Care Account plan.

Do you want to participate in a Dependent Care Flexible Spending Account?

## Eligibility

### Resource

[ETF's Pre-Tax Savings Accounts page](#)

Learn about the different types of accounts, eligible expenses, deadlines, and more.

### Terms and Conditions

I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

## Dependent Day Care Account 2025

Select plan

Decline coverage I would like to decline Dependent Day Care Account coverage.

Previous

Cancel

- Enter the total annual *Contribution Amount* in the space provided. Then click *Next*.



Remember, only add as much money as you are expecting to incur in eligible expenses within the plan year. Anything that you do not use, will be lost at the end of the carryover period. Additionally, the system will not allow you to over contribute above the maximum annual amount.

## Dependent Day Care FSA

How much money do you want to contribute to your *Dependent Day Care FSA* account?

You can contribute between \$50.00 and \$5,000.00 per plan year.

Contribution Amount

The **dependent care** Flexible Spending Account is separate from the **health** Flexible Spending Account and can be used for non-healthcare expenses related to your dependents (Example: Day care expenses for children under 13). The amount you enter will be divided into individual deductions over the remainder of the year.

Decline Coverage I would like to decline Dependent Day Care FSA coverage.

Next

Previous

Cancel

- Review the *Summary* and make any changes, if necessary. Then click *Save*.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

## Dependent Day Care Account 2025 Summary

Your Dependent Day Care Account 2025 benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.



### Dependent Day Care Account

Dependent Day Care Account 2025

Effective Date: 07/01/2025

Contribution Amount: \$500.00 Per Plan Year \$45.45 twice per month

#### Additional Information

Show details ▾

Edit contribution

Edit coverage

Save

Cancel

6. After clicking *Save*, you will be returned to the list of available benefits, so that you can continue the enrollment process.

#### 8.4.3 Pre-Tax Savings Account: Transit Account

A Transit Account allows you to contribute funds pre-tax that can be used to cover approved work-related mass transit expense types. This money does carry over from year to year. For more information on this benefit, visit the ETF website - [etf.wi.gov/benefits](http://etf.wi.gov/benefits).

1. Depending on your employer, you may be eligible to enroll in *Transit Account*. To elect coverage, select *Begin enrollment* or if you wish to decline, select *Decline coverage*.



### Transit

Set aside pre-tax dollars to pay for eligible work-related mass transit expenses.

Decision required

Would you like Transit coverage?

Begin enrollment Decline coverage

2. Choose *Select plan*.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

## Choose your Transit plan.

Do you want to participate in a Flexible Spending Account?

**Resource**

[ETF's Pre-Tax Savings Accounts page](#)

Learn about the different types of accounts, eligible expenses, deadlines, and more.

**Terms and Conditions**

I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

### Transit Account 2025

[Select plan](#)

---

[Decline coverage](#) I would like to decline Transit coverage.

[Previous](#)
[Cancel](#)

3. Enter the total monthly *Contribution Amount* in the space provided then click *Next*.

## Transit

How much money do you want to contribute to your *Transit* account?

You can contribute between \$4.16 and \$315.00 per month.

Monthly Contribution Amount

[Decline coverage](#) I would like to decline Transit coverage.

[Next](#)
[Previous](#)
[Cancel](#)

The system will not allow you to over contribute above the maximum monthly amount. Funds can rollover year over year.

4. Review the *Summary* and make any changes, if necessary. Then, click *Save*.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

# Transit Account 2025 Summary

Your Transit Account 2025 benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.



## Transit

### Transit Account 2025

Effective Date: 07/01/2025

Contribution Amount: \$50.00 Per Month \$25.00 per paycheck

#### Additional Information

Show details ▾

Edit contribution

Edit coverage

Save

Cancel

5. After clicking on *Save*, you will be returned to the list of available benefits, so that you can continue the enrollment process.

#### 8.4.4. Pre-Tax Savings Account: Parking Account

A Parking Account allows you to contribute funds pre-tax that can be used to cover approved work-related parking expense types. This money does carry over from year to year. For more information on this benefit, visit the ETF website - [etf.wi.gov/benefits](http://etf.wi.gov/benefits).

1. Depending on your employer, you may be eligible to enroll in *Parking Account*. To elect coverage, select *Begin enrollment* or if you wish to decline, select *Decline coverage*.



### Parking

Set aside pre-tax dollars used to cover eligible work-related parking expenses.

Decision required

Would you like Parking coverage?

Begin enrollment Decline coverage

2. Choose *Select plan*.

---

Click here to go back to the top and the [Table of Contents](#).

---

## Choose your Parking plan.

Do you want to participate in a Flexible Spending Account?

**Resource**

[ETF's Pre-Tax Savings Accounts page](#)

Learn about the different types of accounts, eligible expenses, deadlines, and more.

**Terms and Conditions**

I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

### Parking Account 2025

[Select plan](#)

---

[Decline coverage](#) I would like to decline Parking coverage.

[Previous](#)
[Cancel](#)

3. Enter the total monthly *Contribution Amount* in the space provided then click *Next*.

## Parking

How much money do you want to contribute to your *Parking* account?

You can contribute between \$4.16 and \$315.00 per month.

Monthly Contribution Amount

[Decline coverage](#) I would like to decline Parking coverage.

[Next](#)
[Previous](#)
[Cancel](#)

	The system will not allow you to over contribute above the maximum monthly amount. Funds can rollover year over year.
---	---

4. Review the *Summary* and make any changes, if necessary. Then click *Save*.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

## Parking Account 2025 Summary

Your Parking Account 2025 benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.



### Parking

#### Parking Account 2025

Effective Date: 07/01/2025

Contribution Amount: \$25.00 Per Month \$12.50 per paycheck

#### Additional Information

Show details

Edit contribution

Edit coverage

5. After clicking *Save*, you will be returned to the list of available benefits, so that you can continue the enrollment process.

#### 8.4.5. Supplemental Dental

Supplemental Dental provides additional coverage for major dental services. For more information on this benefit, visit the ETF website - [etf.wi.gov/dental-insurance](http://etf.wi.gov/dental-insurance).

1. To elect Supplemental dental coverage, select *Begin enrollment* or if you wish to decline, select *Decline coverage*.



### Supplemental Dental

Coverage for major dental services such as crowns, bridges, and root canals.

Decision required

Would you like Supplemental Dental coverage?

Begin enrollment

Decline coverage

2. Select who you would like to be covered by clicking on the names of your dependents to highlight green and have a check next to their name. Then choose the plan by clicking on *Select Plan*.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

### Choose your Supplemental Dental plan.

Please review your options and choose the plan that best meets your needs.

**Who do you want to cover on this plan?** Add Dependent

Sample Sampl...
  SampleC Sample...
  SampleD Sample...

**Resource**

[ETF's Dental Insurance page](#)  
See which providers and services are covered, review plan documents, and more.

[Terms and Conditions](#)  
I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

**Delta Dental PPO Select Plan 2025**

Plan Cost	\$4.54
Employer Cost	(\$0.00)
You Pay (Semi-Monthly Cost) <b>\$4.54</b>	

[Select plan](#)

**Delta Dental PPO Plus Premier Select Plus Plan 2025**

Plan Cost	\$10.80
Employer Cost	(\$0.00)
You Pay (Semi-Monthly Cost) <b>\$10.80</b>	

[Select plan](#)

[Decline coverage](#) I would like to decline Supplemental Dental coverage.

[Previous](#) [Cancel](#)

3. On the *Supplemental Dental Summary* page, review your decision and adjust as necessary. Then scroll down to click *Save*.

### Supplemental Dental 2025 Summary

Your Supplemental Dental 2025 benefit summary is shown below. To make changes, click [Edit](#). Please note that your benefits have not been saved. You must click [Save](#) to complete the section.

## Supplemental Dental

Delta Dental PPO Select Plan 2025

Offered By: Delta Dental of Wisconsin

Effective Date: 07/01/2025

You Pay: \$4.54 twice per month

Persons Covered: Sample B SampleSmith

[Edit plan](#)

#### 8.4.6. Vision Insurance

Vision Insurance provides coverage vision care. For more information on this benefit, visit the ETF website [-etf.wi.gov/vision-insurance](http://-etf.wi.gov/vision-insurance).

1. To elect vision coverage, select *Begin enrollment*. If you wish to decline coverage, select *Decline coverage*.

---

*Click here to go back to the top and the [Table of Contents](#).*

---



## Vision

Providing coverage for vision care including eye exams, contacts, and glasses.

Decision required

### Would you like Vision coverage?

Begin enrollment
Decline coverage

- Select who you would like to be covered by clicking on the names of your dependents to highlight green and have a check next to their name. Then choose the plan you by clicking on *Select Plan*.

## Choose your Vision plan.

Please choose your coverage level and select your plan.



### Who do you want to cover on this plan?

✓ Sample Sampl...
✓ SampleC Samp...
✓ SampleD Sam...

[Add Dependent](#)

**Resource**

[ETP's Vision Insurance page](#)  
See which providers and services are covered, review plan documents, and more.

[Terms and Conditions](#)  
I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

## DeltaVision 2025

Plan Cost	\$10.29
Employer Cost	(\$0.00)
<b>You Pay</b> (Semi-Monthly Cost) <span style="font-size: 1.5em; font-weight: bold; color: #e67e22;">\$10.29</span>	

Select plan

Decline coverage

I would like to decline Vision coverage.

Previous
Cancel

- On the *Vision Summary* page, review your decision, adjust as necessary. Then scroll down to click *Save*.

## Vision 2025 Summary

Your Vision 2025 benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.



## Vision

### DeltaVision 2025

Offered By: Delta Dental of Wisconsin

Effective Date: 07/01/2025

You Pay: \$10.29 twice per month

Persons Covered: Sample B SampleSmith, SampleC SampleSmith, SampleD SampleSmith

Edit coverage

---

Click here to go back to the top and the [Table of Contents](#).

---

### 8.4.7. Accident Plan

The Accident Plan insurance benefit provides cash payments when certain unplanned accidents and injuries occur. For more information on this benefit, visit the ETF website -[etf.wi.gov/accident-plan](http://etf.wi.gov/accident-plan).

To elect Accident Plan coverage, select *Begin enrollment* or if you wish to decline, select *Decline coverage*.



## Accident

Provides a cash benefit paid directly to you for covered accidents and injuries.

Decision required

Would you like Accident coverage?

[Begin enrollment](#) [Decline coverage](#)

1. Select the plan that has the coverage level that you want by clicking on *Select plan*.

### Choose your Accident plan.

Please review your options and choose the plan that best meets your needs.

Resource

[ETF's Accident Plan page](#)  
See which accidents are covered, review plan documents, get vendor contact information, and more.

[Terms and Conditions](#)  
I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

<h4>Accident - Individual 2025</h4> <p><a href="#">Select plan</a></p>	Plan Cost \$1.86 Employer Cost (\$0.00) <b>You Pay (Semi-Monthly Cost)</b> <b>\$1.86</b>
<h4>Accident - Individual + Spouse 2025</h4> <p><a href="#">Select plan</a></p>	Plan Cost \$2.66 Employer Cost (\$0.00) <b>You Pay (Semi-Monthly Cost)</b> <b>\$2.66</b>
<h4>Accident - Individual + Child(ren) 2025</h4> <p><a href="#">Select plan</a></p>	Plan Cost \$3.58 Employer Cost (\$0.00) <b>You Pay (Semi-Monthly Cost)</b> <b>\$3.58</b>
<h4>Accident - Family 2025</h4> <p><a href="#">Select plan</a></p>	Plan Cost \$5.23 Employer Cost (\$0.00) <b>You Pay (Semi-Monthly Cost)</b> <b>\$5.23</b>

[Decline coverage](#) I would like to decline Accident coverage.

[Previous](#) [Cancel](#)

2. On the *Accident Summary* page, review your decision and adjust as necessary. Then click *Save*.

---

[Click here to go back to the top and the Table of Contents.](#)

---

## Accident 2025 Summary

Your Accident 2025 benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.



### Accident

Accident - Individual 2025

Offered By: Securian Financial

Effective Date: 07/01/2025

You Pay: \$1.86 twice per month

Edit coverage

Edit plan

#### 8.4.8. Life Insurance – Basic & Supplemental

Depending on your employer, you may be able to enroll in life Insurance. If so, in some specific cases you may be required to complete and submit an Evidence of Insurability (EOI) form. Securian, ETF's life insurance carrier, will notify you if this form is required. For more information on the life programs and EOI rules, see the ETF website – [etf.wi.gov/benefits/life-insurance](http://etf.wi.gov/benefits/life-insurance).

Below is an example of completing life insurance enrollment at time of hire. If you are interested in enrolling in life insurance coverage you can choose *Begin enrollment* or *Decline Coverage*. If you choose to enroll, you must select individual basic coverage for yourself first. Then you can enroll in any additional coverage levels offered by your employer, up to three units.

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---

**Basic Life Insurance**

Protect your loved ones financially by enrolling in the State of Wisconsin Group Life Insurance Program. Evidence of Insurability may be required.

Decision required

Would you like Basic Life Insurance coverage?

Begin enrollment
Decline coverage

---

**Supplemental Life Insurance**

Protect your loved ones financially by enrolling in the State of Wisconsin Group Life Insurance Program. Evidence of Insurability may be required.

Requires other decisions first

Availability of this benefit is dependent on your Basic Life Insurance decisions.

---

**Additional Life Insurance**

Protect your loved ones financially by enrolling in the State of Wisconsin Group Life Insurance Program. Evidence of Insurability may be required.

Requires other decisions first

Availability of this benefit is dependent on your Basic Life Insurance decisions.

---

**Spouse and Dependent Life Insurance**

Add Spouse or Dependent coverage to your State of Wisconsin Group Life Insurance coverage. Evidence of Insurability may be required.

Requires other decisions first

Availability of this benefit is dependent on your Basic Life Insurance decisions.

1. You must first elect individual basic life insurance prior to electing other coverages. Choose *Select plan* or *Decline Coverage*.

## Choose your Basic Life Insurance plan.

If you decline Basic Life Insurance coverage during your initial enrollment period, you can only enroll later by providing evidence of insurability or experiencing a qualifying life event.

<p><b>Resource</b></p> <p><a href="#">ETF's Life Insurance page</a> Learn about the types of life insurance, when you can enroll, and more.</p> <p><a href="#">Terms and Conditions</a> I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.</p>	<div style="border: 1px solid #ccc; padding: 10px;"> <h3 style="margin: 0;">Basic Life Insurance 2025</h3> <p style="margin: 5px 0;">Coverage amount: <b>\$50,000.00 (1 times salary)</b></p> <div style="display: flex; justify-content: center; margin-top: 10px;"> <span style="background-color: #C00000; color: white; padding: 5px 15px; border-radius: 3px;">Select plan</span> </div> <div style="margin-top: 10px;"> <p style="color: #C00000; font-size: 0.8em;">Decline coverage</p> <p style="font-size: 0.8em;">I would like to decline Basic Life Insurance coverage.</p> </div> </div>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="font-size: 0.8em;">Plan Cost</td> <td style="text-align: right;">\$2.00</td> </tr> <tr> <td style="font-size: 0.8em;">Employer Cost</td> <td style="text-align: right;">(\$0.00)</td> </tr> <tr> <td colspan="2" style="text-align: center; padding-top: 10px;"> <p style="font-size: 0.8em; margin: 0;">You Pay (Semi-Monthly Cost)</p> <p style="font-size: 1.5em; margin: 0;"><b>\$2.00</b></p> </td> </tr> </table>	Plan Cost	\$2.00	Employer Cost	(\$0.00)	<p style="font-size: 0.8em; margin: 0;">You Pay (Semi-Monthly Cost)</p> <p style="font-size: 1.5em; margin: 0;"><b>\$2.00</b></p>	
Plan Cost	\$2.00							
Employer Cost	(\$0.00)							
<p style="font-size: 0.8em; margin: 0;">You Pay (Semi-Monthly Cost)</p> <p style="font-size: 1.5em; margin: 0;"><b>\$2.00</b></p>								

Previous
Cancel

Click here to go back to the top and the [Table of Contents](#).

- Next determine if you would like to elect individual supplemental life insurance. Choose *Select plan* or *Decline Coverage*.

## Choose your Supplemental Life Insurance plan.

Please review your options and choose the coverage amount that best meets your needs.

**Resource**

[ETF's Life Insurance page](#)  
Learn about the types of life insurance, when you can enroll, and more.

**Terms and Conditions**  
I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

### Supplemental Life Insurance 2025

Coverage amount: **\$50,000.00 (1 times salary)**

Select plan
Plan details

Decline coverage

I would like to decline Supplemental Life Insurance coverage.

Previous
Cancel

Plan Cost \$2.00

Employer Cost (\$0.00)

---

You Pay  
(Semi-Monthly Cost)

\$2.00

- Next determine if you would like to elect individual additional life insurance and how many units of additional life you would like, if your employer offers more than one. Choose *Select plan* or *Decline Coverage*.

## Choose your Additional Life Insurance plan.

Please review your options and choose the coverage amount that best meets your needs.

**Resource**

[ETF's Life Insurance page](#)  
Learn about the types of life insurance, when you can enroll, and more.

**Terms and Conditions**  
I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

### Additional Life Insurance 2025

Coverage amount	Total cost	Employer cost	Semi-monthly cost
<input type="radio"/> <b>\$50,000.00 (1 times salary)</b>	\$3.25	\$0.00	\$3.25
<input type="radio"/> <b>\$100,000.00 (2 times salary)</b>	\$6.50	\$0.00	\$6.50
<input type="radio"/> <b>\$150,000.00 (3 times salary)</b>	\$9.75	\$0.00	\$9.75

Select plan

Decline coverage

I would like to decline Additional Life Insurance coverage.

Next
Previous
Cancel

- Next you will decide whether you want to enroll your spouse and dependent(s) in life insurance coverage. If you elect coverage for your spouse and dependents, make sure to click the check box next to each dependent name. If all dependents available are not added to coverage, this could impact claims if/when one is filed. If you do not want coverage, you may select *Decline coverage*. After you have selected who to cover, click *Next*.

---

Click here to go back to the top and the [Table of Contents](#).

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## Spouse and Dependent Life Insurance: Who do you want to cover?

Note: You'll also be able to add dependents and select who you want to cover when you enroll in or edit your benefits.

If no one, click "Decline coverage" to continue to enroll.

### Eligible For Coverage

Select	Name	Relationship	Date of Birth	Sex	Actions
<input checked="" type="checkbox"/>	SampleC SampleSmith	Spouse	07/18/1980	Female	<a href="#">Edit</a>
<input checked="" type="checkbox"/>	SampleD SampleSmith	Child	11/05/2016	Female	<a href="#">Edit</a>

[Create dependent profile](#)

[Decline coverage](#) I would like to decline Spouse and Dependent Life Insurance coverage.

[Next](#)

[Previous](#)

- Ensure that your dependents are highlighted in green with a check mark appears next to their name, then select the amount of coverage you would like and *Select plan*. You can also decline coverage altogether if you change your mind.

## Choose your Spouse and Dependent Life Insurance plan.

Please review your options and choose the coverage amount that best meets your needs.



### Who do you want to cover on this plan?

[Add Dependent](#)

SampleC Samp...

SampleD Sam...

#### Resource

[ETF's Life Insurance page](#)  
Learn about the types of life insurance, when you can enroll, and more.

[Terms and Conditions](#)  
I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

#### Spouse and Dependent Life Insurance 2025

Coverage amount	Total cost	Employer cost	Semi-monthly cost
<input type="radio"/> \$10000 (Spouse) / \$5000 (Child)	\$1.05	\$0.00	\$1.05
<input type="radio"/> \$20000 (Spouse) / \$10000 (Child)	\$2.10	\$0.00	\$2.10

[Select plan](#)

[Decline coverage](#) I would like to decline Spouse and Dependent Life Insurance coverage.

[Next](#)

[Previous](#)

[Cancel](#)

- You will be brought back to the *Life Benefits Summary* page where you can review and modify your decisions as necessary. When everything is correct, select *Save*.

[Click here to go back to the top and the Table of Contents.](#)

## Life Insurance 2025 Summary

Your Life Insurance 2025 benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.



### Basic Life Insurance

#### Basic Life Insurance 2025

Offered By: Securian Financial  
Coverage Amount: \$50,000.00 (1 times salary)  
Effective Date: 08/01/2025  
You Pay: \$1.50 twice per month

Edit coverage



### Supplemental Life Insurance

#### Supplemental Life Insurance 2025

Offered By: Securian Financial  
Coverage Amount: \$50,000.00 (1 times salary)  
Effective Date: 08/01/2025  
You Pay: \$1.50 twice per month

Edit coverage

Plan details



### Additional Life Insurance

#### Additional Life Insurance 2025

Offered By: Securian Financial  
Coverage Amount: \$50,000.00 (1 times salary)  
Effective Date: 08/01/2025  
You Pay: \$2.00 twice per month

Edit coverage



### Spouse and Dependent Life Insurance

#### Spouse and Dependent Life Insurance 2025

Requested Coverage Amount: \$10000 (Spouse) / \$5000 (Child)  
Effective Date: 08/01/2025  
You Pay: \$1.05 twice per month

 Pending Approval

Edit coverage

Save

Cancel

#### Cost Summary

This is a summary of your current benefit elections.

Hide all

Benefit Elections (4 items)

Semi-Monthly	
Basic Life Insurance	\$1.50
Supplemental Life Insurance	\$1.50
Additional Life Insurance	\$2.00
Spouse and Dependent Life Insurance 	\$1.05

 Pending approval. Costs are subject to change

You Pay

**Semi-Monthly Total**  **\$6.05**

### 8.4.9. Income Continuation Insurance (ICI)

The Income Continuation Insurance benefit provides income continuation when you are unable to work. For more information on this benefit, visit the ETF website - [etf.wi.gov/income-continuation-insurance](https://etf.wi.gov/income-continuation-insurance).

1. To enroll in Income Continuation Insurance (ICI) click *Begin enrollment*. If you do not want to enroll, click *Decline coverage*.

---

Click here to go back to the top and the [Table of Contents](#).

---



**Income Continuation Insurance (ICI)**

If you do not take this opportunity to enroll, you may only enroll through evidence of insurability which requires completion of a medical history questionnaire. Acceptance is not guaranteed.

Decision required

Would you like Income Continuation Insurance (ICI) coverage?

Begin enrollment
Decline coverage

2. Choose your plan from the options provided and click *Select plan*.



This screen will vary depending on who your employer is and your eligibility. You will only be able to select from plans that you are eligible for. Make your selection and continue.

3. Review your selection on the *ICI Benefits Summary* page, then click *Save*.

## Choose your Income Continuation Insurance (ICI) plan.

Please review your options and choose the coverage amount that best meets your needs.

Resource

ETF's [Income Continuation Insurance page](#)

Access the brochures for more information.

Terms and Conditions

I acknowledge that I have read and agree to abide by the terms and conditions of the benefit.

### Income Continuation Insurance 2025

Coverage amount: **\$50,000.00 per year (100% of annual salary maximum of \$120,000.00 per year)**

Select plan

Plan Cost \$19.75

Employer Cost (\$0.00)

---

You Pay  
(Semi-Monthly Cost)

\$19.75

Decline coverage I would like to decline Income Continuation Insurance (ICI) coverage.

Previous
Cancel

### 8.5. Completing your enrollment

After you have made a decision on all plans available to you, the top of the benefits menu page will say *Enrollment Complete*.

## Enrollment Complete!

You have completed enrollment for the current benefit year. To make changes to any of your benefits, select "Edit coverage".

Now you should take a few moments to:

- Ensure all necessary documentation is submitted.
- Review the plans to make sure that every election accurately reflects your decision.
  - Benefit name.
  - Enrolled or declined?
  - Who is covered – you, your spouse, and/or your dependents?
  - Is the correct coverage amount is displayed?

---

*Click here to go back to the top and the [Table of Contents](#).*

---

- Understand the contribution amount.

The example highlights the key information to be reviewed, regardless of benefit type, the process to review and edit/change your decisions is the same.

1. Selected Plan Name
2. Benefit Name
3. Selected Plan Information
4. Selected Plan Cost

The screenshot shows a user interface for selecting a Basic Life Insurance plan. It is divided into two main sections. The left section, labeled '1', contains an umbrella icon and the text: 'Basic Life Insurance', 'Protect your loved ones financially by enrolling in the State of Wisconsin Group Life Insurance Program. Evidence of Insurability may be required.' The right section, labeled '2', shows 'Basic Life Insurance 2025' with a 'Currently selected' status. Below this, it says 'Covers you' with a pencil icon, 'Coverage Amount: \$50,000.00 (1 times salary)', and 'Effective 08/01/2025'. At the bottom of this section are 'Edit coverage' and 'Decline' buttons. On the far right, labeled '4', the cost is shown as '\$3.50 twice per month'. A '3' is placed near the effective date.

If you need to make any changes, you can do so at this time by clicking *Edit Coverage* and select a new plan or make other updates.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

PROFILE — BENEFITS — CHECKOUT

# Enrollment Complete!

You have completed enrollment for the current benefit year. To make changes to any of your benefits, select "Edit coverage"

**!** This benefit requires documentation for verification of dependent status. You'll have the opportunity to upload your documentation after you finish enrolling in benefits.

**Medical**

Helps cover the cost of medical.

✔ Currently selected

**Dean Health Plan by Medica: HDHP 2025**

Covers you and SampleC S [+ Create dependent profile](#)

Requested Coverage Level: Family  
Effective 07/01/2025  
[Show plan details](#)

[Edit coverage](#)

**Cost Summary**

This is a summary of your current benefit elections. [Hide all](#)

**Benefit Elections (11 items)**

Semi-Monthly	
Medical	\$29.70
Pharmacy	\$20.60
Wellness Program	\$0.71
Administrative Fee	\$0.99
Uniform Dental	\$5.00
Vision	\$6.44
Accident	\$1.86
Basic Life Insurance	\$2.00
Supplemental Life Insurance	\$2.00
Additional Life Insurance	\$3.25
Spouse and Dependent Life Insurance	\$1.05
<b>⚠ Pending approval. Costs are subject to change</b>	
<b>Semi-Monthly Total</b>	<b>\$73.60</b>

**Pre-Tax Savings Accounts (2 items)**

Semi-Monthly Contributions	
Health Savings Account (HSA) Employee Contribution	\$100.00
Health Savings Account (HSA) Employer Contribution	+\$68.75

**\$20.60**  
twice per month

**!** This benefit requires documentation for verification of dependent status. You'll have the opportunity to upload your documentation after you finish enrolling in benefits.

**Pharmacy**

Helps you manage the cost of prescription drugs.

✔ Currently selected

**Navitus Pharmacy 2025**

Covers you and SampleC S  
Requested Coverage Level: Family

Finally, scroll down to the very bottom of the page and to select *Confirm changes*.

Confirm changes

Return home

	Your enrollment is not complete and final until you click <i>Confirm changes</i> . Click <i>Confirm changes</i> at the end of the page after all elections are complete.
	As a reminder, if you are a new hire and were hired towards the end of the year, you may have to also enroll in your coming year plans as part of open enrollment. If so, the system will continue the process automatically and you will click <i>Confirm and Continue</i> to make your enrollment decisions for the coming year. You must complete elections for both periods to complete enrollment.

After you have confirmed you enrollment, you will see the below page. You may now

- Review your benefits, as well as who is covered.
- Print and Save your *Benefit Summary Report* (this will open in a new window).

---

*Click here to go back to the top and the [Table of Contents](#).*

---

- Edit plans if you find any errors, or have changed your mind (note: you must make any changes before the enrollment window closes).

After you have reviewed, click *Continue to next page* to complete the enrollment survey.

**Congratulations Sample, you have finished selecting your benefits!**



**Medical**

Dean Health Plan by Medica: HDHP 2025

You, +1 dependent



**Pharmacy**

Navitus Pharmacy 2025

You, +1 dependent



**Wellness Program**

Wellness Program 2025

Just You



**Administrative Fee**

Administrative Fee 2025

Show all 12 of my benefits ▼

Helpful things to do right now



Review and print a copy of your **Benefit Summary Report**



Verify the following dependents: SampleC  
SampleSmith

[Continue to next page](#)

### 8.6. Post Enrollment Survey

After you complete your enrollment, you may have the opportunity to complete the *Enrollment Experience Survey*. This survey allows you to provide feedback on your enrollment experience. Carefully review the questions presented and respond accordingly. Responses will be used to improve your experience in the future.

	Remember to upload any required documents prior to logging-out.
---	---

## 9. Dependent Verification & Document Center

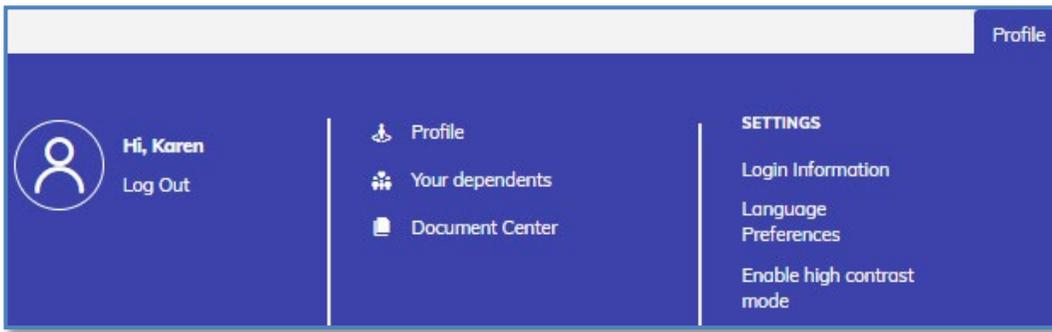
Dependent verification is required for dependent coverage to be effective. If you are adding a dependent, e.g., spouse, child(ren), or other eligible person to your benefits, and/or you have another type of life event, you may need to upload update certain acceptable documents for review. The system will indicate which documents are required. You can upload them into the Document Center. Additional information can be found on the [Document Requirements for Life Events and Dependent Verification](#) page of the ETFs website.

1. Navigate to Document Center by going to the top right, under Profile. Then click Document Center.

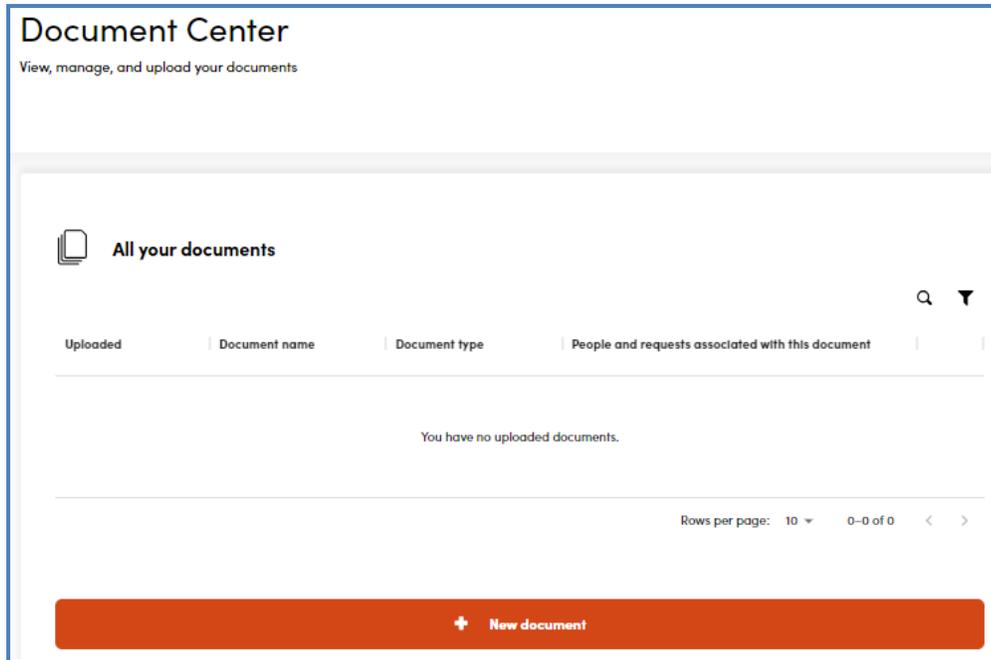
---

*Click here to go back to the top and the [Table of Contents](#).*

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2. Click the *New document* button.



3. Add a file by dragging it to the screen or by clicking the **+** (plus sign) to select a file from your computer to be uploaded. Accepted file formats include jpg, jpeg, gif, png, pdf, doc, docx, xls, and xlsx.

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*Click here to go back to the top and the [Table of Contents](#).*

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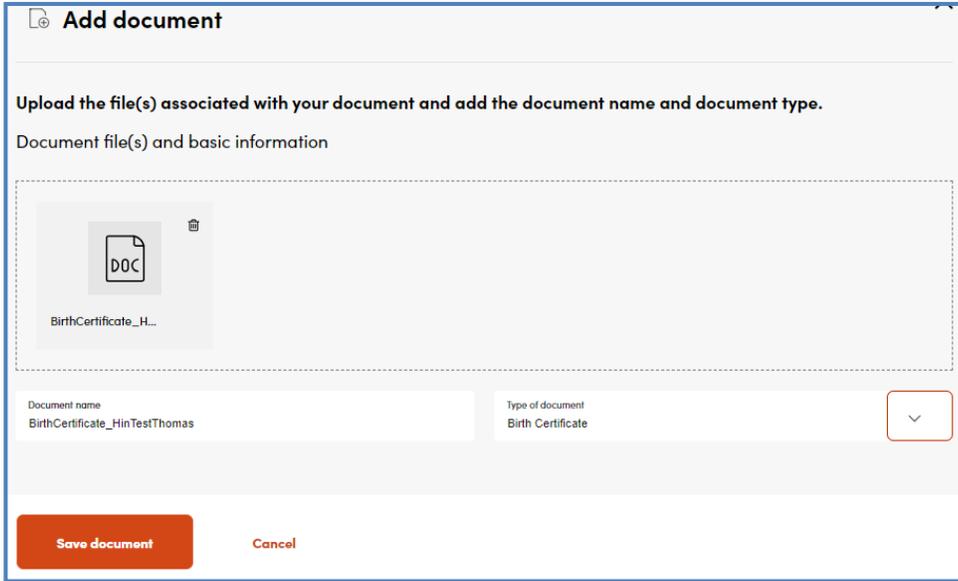
4. Name the file in the *Document name* field. Name the file as clearly as possible because this will be referenced by your employer and ETF, for example Birth Certificate\_Jane Smith.
5. Select a category for the document from the *Category* drop-down menu. Available categories indicate types of documents accepted for verification, such as tax form or birth certificate.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

6. When complete, click *Save document*.



**Add document**

Upload the file(s) associated with your document and add the document name and document type.

Document file(s) and basic information

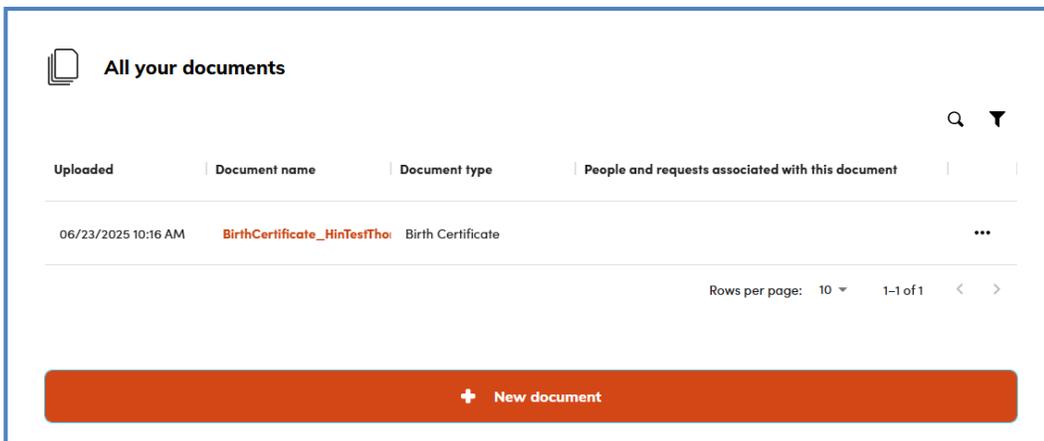
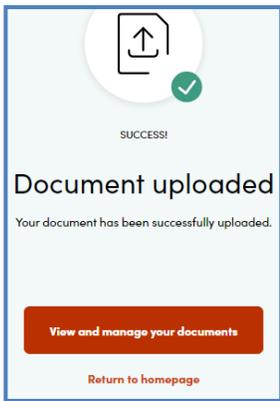
BirthCertificate\_H...

Document name  
BirthCertificate\_HinTestThomas

Type of document  
Birth Certificate

Save document Cancel

7. Click *View and manage your documents* to confirm the file was uploaded, to add another file, and/or to change or delete any file that that was added.



**All your documents**

Uploaded	Document name	Document type	People and requests associated with this document
06/23/2025 10:16 AM	BirthCertificate_HinTestTho	Birth Certificate	...

Rows per page: 10 1-1 of 1

+ New document

---

*Click here to go back to the top and the [Table of Contents](#).*

---

## 10. Accessing & Understanding Your Benefits in the Future

---

After enrollment and at any time in the future, you can see your benefits on the home page in the *Your benefits* section located at the bottom of the *Home* page. If you have elected benefits for different enrollment periods, you can select the appropriate tab to see your benefit selections for each period.

Each tile displays the benefit type, plan name, and plan rate or contribution amount for the plan. You may click one of the action options or click *Close* when you are done reviewing benefit details. To view additional information for a benefit, click the benefit tile. It will appear in a pop-up window.



If you have more than six benefits to view, you may need to click the Show all benefits link below the visible tiles to view all your elections.

There is a variety of information available within each benefits tile, including:

- **Plan name:** This information will always be displayed and appears at the top of the window in larger font.
- **Carrier name:** If included, this information will appear below the plan name labeled as *Offered by*.
- **Effective date/Coverage start date:** This information displays the effective date of the plan. If one of the benefits has an upcoming cancellation date, a clock icon will appear in the upper-left corner. You can hover over the icon to view the cancellation date.
- **Who's covered:** This section lists who is covered by the plan.
- **Cost:** If available, the employee cost per pay period and pay frequency will appear in the upper-right of the window.
- **Contributions:** This information only appears for contributory type benefits, such as a Health Savings Account or Flexible Savings Account. Any employee contributions will display as an annual amount in the upper-right of the window (in the same location where cost is displayed for other benefits).
- **Coverage amount:** This will only display for benefits that include a coverage amount, such as a basic life insurance plan. If the employee has requested a coverage amount that is pending approval, this will display the requested coverage amount (as opposed to any currently approved coverage amount).
- **Plan documents:** This section displays documents, such as Summary of Benefit Coverage.
- **Option to edit or cancel coverage:** This option is only available if applicable because some benefits cannot be changed, and some require a qualifying life event to change.
- **Option to enter a qualifying life event and update coverage:** This only appears if applicable, some benefits cannot be changed even with a qualifying life event. Click to enter a qualifying life event when required before updating the benefit.
- **Option to edit contributions:** This option is only available for pre-tax account benefits. Click to update your contribution amount or schedule, or to cancel future contributions.
- **Pending:** This indication appears above the benefit name in light gray shading if some type of additional approval i.e., administrative review, is required. By hovering over it, you can see why the benefit is pending and get a link to take action either:
  - to the Document Center if the benefit is pending due to required documentation.
  - to complete evidence of insurability, if required.
- **Cancellation notification:** This notification appears at the top of the window if there is an upcoming early cancellation date for the benefit.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

Welcome back, Sample  
Monday, June 23 at 10:32 AM EDT

16  
ACTIVE BENEFITS  
[View benefits](#)

[Change your current benefits](#) [Print your benefits](#) [View your medicare info](#)

**Your benefits** Your accounts

- Medical: Dean Health Plan by Medica... (You, -1 dependent)
- Pharmacy: Navitus Pharmacy 2025 (You, +1 dependent)
- Wellness...: Wellness Program 2025 (Just you)
- Administrative...: Administrative Fee 2025
- Vision: DeltaVision 2025 (You, -1 dependent)
- Accident: Accident - Individual 2025
- Basic Life...: Basic Life Insurance 2025
- Supplemental...: Supplemental Life Insurance...
- Spouse and...: Spouse and Dependent Lif... (1 dependent)
- Income...: Income Continuation...

Your Medical coverage  
Dean Health Plan by Medica: HDHP 2025 \$29.70 twice per month

Offered by: Dean Health Plan  
Effective date: 01/01/2025  
Who's covered: Sample SampleSmith, SampleSmithE SampleSmith

How to change your benefits

Close

Welcome back, Sample  
Monday, June 23 at 10:34 AM EDT

16  
ACTIVE BENEFITS  
[View benefits](#)

[Change your current benefits](#) [Print your benefits](#) [View your medicare info](#)

Your benefits **Your accounts**

- Health Savings...: Health Savings Account (HSA)..
- Dependent Day...: Dependent Day Care Account...
- Transit: Transit Account 2025
- Parking: Parking Account 2025

Your Health Savings Account (HSA) coverage  
Health Savings Account (HSA) 2025 \$2,400.00 per benefit year

Effective date: 01/01/2025  
Who's covered: Sample SampleSmith

Plan Details

How to change your benefits

Edit contribution

Close

### 10.1. Changing Contribution Amounts after Initial Enrollment

In the event that you need to change your contributions to a pre-tax savings account, you should click the applicable tile under *Your Benefits*. However, it is important to note that not all contributions can be changed.

- **Pre-tax savings accounts, including Health Care Flexible Spending Accounts, Limited Purpose Flexible Spending Accounts (LPFSA), and/or Dependent Day Care**, require a qualifying life event to adjust the contribution amount or to cancel. If you click the tile and *Edit Contribution*, you will need to follow the directions presented and provide the type of

[Click here to go back to the top and the Table of Contents.](#)

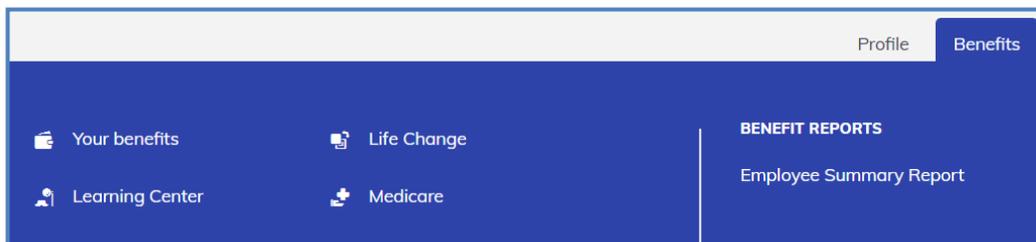
Qualified life event and supporting documentation. If you do not have a qualified life event, click *Cancel*.

- **Pre-tax savings accounts, including Health Savings Account (HSA), Transit and/or Parking**, you can add, change or cancel the contribution as necessary throughout the year. You may do so by clicking on the appropriate tile and choose *Edit Contribution* then follow the directions presented.

## 10.2. Reporting - Viewing your Coverage Decisions

After you have completed your enrollment, you have access to an *Employee Summary Report* which you may print and save for your records. The *Employee Summary Report* shows cost and enrollment summary information for each plan and coverage level that you have selected.

To access the report, go to *Benefits* in the top right of the page. Then, click the report you would like to view.



The report will generate in a new tab so that you can review the output then *Print and/or Save* as you wish.

	By saving the document as a PDF, you will be able to share it with others and/or enlarge as needed.
---	---

Below is an example of the *Employee Summary Report*.

---

*Click here to go back to the top and the [Table of Contents](#).*

---

SampleSmith, Sample		SWI University of Wisconsin System	
Employee Benefit Summary Report			
Sample SampleSmith 123 Main Street Test City, SC, USA 12345	Date of Hire: 06/23/2024 Gender: Male Race (formal response): I choose not to answer		
Home Phone: (123) 456-7890	Ethnicity (formal response): I choose not to answer Marital Status: Divorced ETF Member ID:		
<b>Current Elections</b>		Semi-Monthly Employee Costs: \$312.89*	
<b>Sample SampleSmith</b> Relationship: Subscriber   Date of Birth: 02/19/1982			
<input checked="" type="checkbox"/> Dean Health Plan by Medica: HDHP 2025 Family	Effective: 01/01/2025 Semi-Monthly Cost \$29.70		
<input checked="" type="checkbox"/> Navitus Pharmacy 2025 Family	Effective: 01/01/2025 Semi-Monthly Cost \$20.60		
<input checked="" type="checkbox"/> Wellness Program 2025 Individual	Effective: 01/01/2025 Semi-Monthly Cost \$0.71		
<input checked="" type="checkbox"/> Administrative Fee 2025 Employee Only	Effective: 01/01/2025 Semi-Monthly Cost \$0.99		
<input checked="" type="checkbox"/> Uniform Dental 2025 Family	Effective: 01/01/2025 Semi-Monthly Cost \$5.00		
<input checked="" type="checkbox"/> Health Savings Account (HSA) 2025	Effective: 01/01/2025		
		Employee Annual Total: \$2,400.00 Employer Annual Total: \$1,650.00 Grand Total: \$4,050.00	

## 11. COBRA Coverage

In the event that you terminate your employment with a participating organization, or a dependent is no longer eligible for coverage, you will be eligible for COBRA coverage. You will receive information in the mail which will provide you with information on

- How to access the system.
- What coverage you are eligible for.
- Timeframe for enrollment.
- How to make payments.

It is important to make sure your information is accurate in the system to prevent any delays in coverage. You must also make payments in a timely manner to prevent coverage cancellation. For more information on COBRA coverage, contact your benefits/payroll/personnel office (or ETF for retirees and continuants) in a timely to ensure you apply while you are still eligible.

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*Click here to go back to the top and the [Table of Contents](#).*

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