

IT'S YOUR CHOICE

2018

Decision Guide

Local Deductible Plan
Insurance for Employees
and Retirees

**ACTION
REQUIRED**

Your health plan may not be available in 2018. You may need to choose a new health plan.



ET-2158 (10/9/2017)
PO4, PO14

KNOW YOUR BENEFIT ENROLLMENT OPPORTUNITIES

There are certain times throughout the year when you may enroll in health and supplemental insurance benefits, or change your coverage. Visit It's Your Choice 2018 at etf.wi.gov/IYC2018 to learn more about choices available to you, view an eLearning and see instructions on how to enroll. You can also request a paper application from your payroll or benefits office if you are an employee, or from the Department of Employee Trust Funds if you are a retiree.

OPEN ENROLLMENT: OCTOBER 2 - 27, 2017



This is your opportunity to change health plans, change from family to individual coverage, enroll if you had previously deferred coverage, cancel coverage for yourself or an adult dependent child and more. Open enrollment is available to employees, currently insured retirees, COBRA continuants, surviving spouses and dependents. Changes become effective January 1, 2018.

Generally, if you are not changing coverage, you don't need to do anything. Be aware available health plans are changing for 2018; review important changes.

NEW EMPLOYEES



If you are electing health insurance coverage, you must enroll within 30 days of your date of hire (in an eligible position), or first eligible appointment. Coverage will be effective on the first of the month on or following your hire date, or on the date you are eligible for an employer contribution, whichever you choose. Check with your payroll or benefits office to find out when your employer contribution begins. If you choose to start your coverage before you receive employer contributions, you will pay the full premium.

LIFE CHANGE EVENT



Did you recently have a change in marital status, add a dependent, have an eligible move to a new county or have another life change event? You may be able to enroll or change your coverage outside of the open enrollment period. There are various rules related to life change events. Check out the *Life Change Event Guide* on the Resources tab at etf.wi.gov/IYC2018 to see what your options are and how long you have to submit an application to enroll or make a change.

RETIREE



When you retire, your health insurance plan (if you are enrolled) will automatically continue in most circumstances. If you terminate employment after 20 years of creditable service but are not eligible for an immediate annuity, you may continue your coverage by filing a *Continuation-Conversion Notice* (ET-2311) form with ETF within 90 days of your employment termination date. This form is available online or by contacting ETF.

MEDICARE



If you are eligible for Medicare, you and your Medicare-eligible dependents must be enrolled in the hospital (Part A) and medical (Part B) portions of Medicare at the time of your retirement, as soon as you turn age 65 or have another Medicare enrollment opportunity. You will then automatically be enrolled in the prescription drug (Part D) plan, Navitus MedicareRx, offered by Navitus. Because all It's Your Choice plans have coverage options that are coordinated with Medicare, you will remain covered by your health plan even after you enroll in Medicare. Please contact ETF if you do not receive the required *Medicare Eligibility Statement* (ET-4307) at least one month before your 65th birthday, or if you have been on Social Security disability for 24 months.



TAKE ACTION CHECKLIST

STEP 1 Choose a Plan Design

Pages 3 - 4 highlight the available plan design options and compare key factors such as monthly payments, coverage levels and out-of-network benefits availability.

Pages 5 - 6 highlight the available Medicare plan design options and compare key factors such as monthly payment, coverage area and costs of commonly used benefits.

Consider your annual medical expenses or any upcoming medical procedures you may need as you make your selection.

STEP 2 Choose a Health Plan

Pages 7 - 12 provide maps with available health plans, health plan quality ratings and premium rates.

Things to Consider:

- Uniform Benefits means that all health plans provide the same in-network benefits.
- Out-of-Network services are generally not covered by most plans. Check the provider directories on the Map tab at etf.wi.gov/IYC2018 to ensure your plan covers providers where you live or choose to receive services.
- Quality matters. Visit etf.wi.gov/IYC2018 to see health plan report cards for performance and quality ratings.

STEP 3 Consider Supplemental Benefits


Things to Consider:

- Check with your benefits office to see if your employer is offering the Uniform Dental Benefit. If the Uniform Dental Benefit is an option for you, see **page 13** for details.

STEP 4 Take Action

Visit the Enrollment tab at etf.wi.gov/IYC2018 for instructions on how to enroll or make changes. Contact ETF or your payroll/benefits office if you have questions.

STEP 5 Stay Informed

Sign up for *What's New* and *IYC E-Alerts: Health & Wellness* along with any other topics of interest. Visit etf.wi.gov and look for the red envelope for ETF E-mail Updates. 

WHAT IS CHANGING

This section highlights the most significant changes for 2018. Visit etf.wi.gov/IYC2018 for complete information.

HEALTH PLAN CHANGES

Use the new interactive map at etf.wi.gov/IYC2018 to find health plans and covered providers where you receive care.

ACTION REQUIRED

Health Plans No Longer Available

- Anthem Blue Preferred Northeast
- Arise Health Plan
- Health Tradition Health Plan
- Humana-Eastern or Western, including Medicare Advantage
- UnitedHealthcare of Wisconsin

You must select a new health plan during open enrollment or you will not have coverage as of 1/1/2018.

Medicare Advantage Not Available in 2018

If currently enrolled, choose a new plan during open enrollment. Another option with nationwide provider access is IYC Medicare Plus. See details on pages 5 - 6.

Health Plan Name Changes

(No Action Required)

- Unity Health Insurance - Community *now* Quartz – Community
- Unity Health Insurance – UW Health *now* Quartz – UW Health

Health Plan Mergers

(No Action Required)

- Gundersen Health Plan *now part of* Quartz – Community
- Physicians Plus *now part of* Quartz – UW Health or Quartz – Community, depending on primary care provider's location
- Network Health – Northeast & Network Health – Southeast *now combined as* Network Health Plan

NOTE: If you take no action during open enrollment, you'll be enrolled in the renamed or merged plan listed above.

New IYC Local Access Plan Administrator

(No Action Required)
WEA Trust is the new administrator for the Local Access Plan, IYC Medicare Plus and State Maintenance Plan (SMP). **NOTE:** If you take no action during open enrollment, your enrollment will continue with the new administrator.

What is Changing continued on page 14

STEP 1

CHOOSE A PLAN DESIGN

Employees and Retirees **Without Medicare**

No matter which plan design option or health plan you choose, **the in-network coverage is the same (Uniform Benefits)**. The main differences are premiums and out-of-network benefits. Choose a plan design option that fits best with your situation.

Visit etf.wi.gov/IYC2018 for complete information.



	It's Your Choice Local Deductible Health Plan	It's Your Choice Local Access Plan
Monthly Payment (Premium) See page 11	\$\$\$\$	\$\$\$\$
Cost-Per-Visit Until deductible is met; see breakdown of your costs on next page	\$\$\$\$	\$\$\$\$
Health Plan Selection Visit etf.wi.gov/IYC2018 for provider directories	See pages 7 - 10 for available health plans	Administered by WEA Trust
Statewide / Nationwide Access All plans include nationwide pharmacy coverage; visit www.navitus.com for in-network pharmacies	Local, county-based coverage area See pages 7 - 10	✓
Out-of-Network Benefits	Emergency and urgent care only	✓



Breakdown of Your Costs by Plan Design, **Without Medicare**

The information below will help you compare the benefits available through the different It's Your Choice (IYC) health plan design options. This list contains only the most commonly used benefits. **Complete information is available online.**

Most members are in this plan

	Local Deductible Health Plan	Local Access Plan 
Annual Medical Deductible Individual / Family	\$500 / \$1,000 Counts toward out-of-pocket limit (OOPL)	
Annual Medical Coinsurance Paid after deductible and until OOPL is met	After deductible, plan pays 100% for most services Exceptions: durable medical equipment, certain hearing aids and cochlear implants	
Annual Medical Out-of-Pocket Limit (OOPL) For federally required essential health benefits	\$6,850 Individual / \$13,700 Family Only applies to durable medical equipment, certain hearing aids and cochlear implants	
Preventive Services See healthcare.gov/preventive-care-benefits	Plan pays 100%	
Emergency Room Copay waived if admitted to inpatient directly from emergency room or for observation for 24 hours or longer	\$60 copay per visit	
Vision Exam Limited Annual Preventive Exam (child) Annual Routine Exam (adult) or Illness/Injury (child or adult)	Plan pays 100% Plan pays 100% after deductible	
Hearing Exam	Plan pays 100% after deductible	
Hearing Aid (per ear, every 3 years)	Child: Plan pays 100% after deductible Adult: You pay 20% and 100% of costs exceeding plan payment of \$1,000	
Durable Medical Equipment	You pay 20% after deductible, up to \$500 per person	
Physical/Speech/Occupational Therapy	Plan pays 100% after deductible, up to 50 combined visits per year Plan may approve 50 more visits per therapy type per year	
Skilled Nursing Facility (non-custodial care)	Plan pays 100% after deductible for 120 days per plan year	
Prescription Deductible	None	
Prescription Copay Level 1 / 2 / 3 Level 4 Specialty Preventive	\$5 / 20% (\$50 max) / 40% (\$150 max) \$50 copay (Must fill at Lumicera or UW specialty pharmacies) Plan pays 100%	
Prescription Out-of-Pocket Limit Levels 1 & 2 - Individual / Family Level 3 - Individual / Family Level 4 - Individual / Family	\$600 / \$1,200 \$6,850 / \$13,700 \$1,200 / \$2,400	



Plan features out-of-network benefits. Learn more at etf.wi.gov/IYC2018





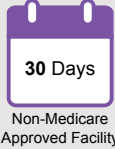
STEP 1

CHOOSE A PLAN DESIGN, CONTINUED

Retirees **With Medicare**

The table below highlights key differences between the available plan design options.




	It's Your Choice Deductible Medicare	It's Your Choice Medicare Plus
Monthly Payment (Premium) See page 12	\$\$\$	\$\$
Coverage Area Emergency and urgent care are covered out-of-network for all plans	 Local, county-based	 Worldwide
Administered By	Many health plans, see pages 7 - 10	WEA Trust
Coverage Includes Items Not Covered by Medicare	✓ Hearing aids, routine hearing and vision exams, durable medical equipment	✗ Only helps pay for items partially covered by Medicare
Skilled Nursing Facilities Covered length of stay	 120 Days	 120 Days Medicare Approved Facility  30 Days Non-Medicare Approved Facility


Breakdown of Your Costs by Plan Design, **With Medicare**

All plan design options coordinate with Medicare, meaning Medicare pays first and the health plan pays second. You'll pay any remaining costs. The table below includes the cost to you for only the most commonly used benefits. Complete information is available at etf.wi.gov/IYC2018. Only medically necessary services and equipment are paid by your health plan. Custodial care is excluded.

Most Medicare members are in this plan

	IYC Deductible Medicare	IYC Medicare Plus 
Annual Medical Deductible	You pay: \$500 Individual / \$1,000 Family	You pay: \$0
Annual Medical Coinsurance	You pay: After plan deductible, \$0	You pay: \$0
Annual Medical Out-of-Pocket Limit (OOPL)	None	None
Outpatient illness/injury related services	You pay: After plan deductible, \$0	You pay: \$0
Emergency Room Copay	You pay: \$60 copay (Waived if admitted as an inpatient directly from the emergency room or for observation for 24 hours or longer.)	You pay: \$0
Licensed Skilled Nursing Facility Medicare-covered services in a Medicare-approved facility	Requires a 3-day period of hospital stay You pay: After plan deductible, \$0 for the first 120 days, full cost after 120 days	Requires a 3-day period of hospital stay You pay: \$0 for the first 120 days, full cost after 120 days

 Plan features out-of-network benefits. Learn more at etf.wi.gov/IYC2018

	IYC Deductible Medicare	IYC Medicare Plus 
Licensed Skilled Nursing Facility (Non-Medicare approved facility) If admitted within 24 hours following a hospital stay	You pay: After plan deductible, \$0 for the first 120 days, full cost after 120 days	You pay: \$0 for eligible expenses for the first 30 days, full cost after 30 days
Hospital Semiprivate room and board, and miscellaneous hospital services and supplies such as drugs, X-rays, lab tests and operating room	You pay: After plan deductible, \$0 Must be medically necessary and in-network unless emergency	You pay: \$0 for first 90 days and up to 150 days with "lifetime reserve." "Lifetime reserve" days are a one-time additional 60 days of hospital coverage paid by Medicare. Once "lifetime reserve" is exhausted, you pay the full cost after 90 days
Medical Supplies, Durable Medical Equipment and Durable Diabetic Equipment and Related Supplies	Medicare-approved supplies You pay: After plan deductible, 20% up to \$500 OOPL per participant, after OOPL, \$0	Medicare-approved supplies You pay: \$0
	Supplies NOT covered by Medicare You pay: After plan deductible, 20% up to \$500 OOPL per participant, after OOPL, \$0	Supplies NOT covered by Medicare You pay: Full cost of supplies
Home Health Care Under an approved plan of care, part-time services of an RN, LPN or home health aide; physical, respiratory, speech or occupational therapy; medical supplies, drugs, lab services and nutritional counseling	Medicare pays: 100% for visits considered medically necessary by Medicare, generally 5 visits per week for 2 to 3 weeks; or 4 or fewer visits per week as long as required Plan pays: 100% for 50 visits per year, plan may approve an additional 50 visits You pay: After plan deductible, full costs of visits not covered by Medicare and the plan beyond the 50 (or if approved, 100) visits per year	Medicare pays: 100% for visits considered medically necessary by Medicare, generally 5 visits per week for 2 to 3 weeks; or 4 or fewer visits per week as long as required Plan pays: 100% for up to 365 visits per year You pay: Full costs of visits beyond 365 visits per year
Hearing Exam	For routine exams: You pay: After plan deductible, \$0	For routine exams: You pay: Full cost of hearing exam
	For illness or disease: You pay: After plan deductible, \$0	For illness or disease: You pay: \$0
Hearing Aid (per ear, every 3 years)	You pay: After plan deductible, 20% coinsurance and 100% of costs exceeding plan payment of \$1,000	You pay: Full cost of hearing aid
Prescription Deductible	None	
Prescription Copay Level 1 / 2 / 3 Level 4 Specialty Preventive Drug List	\$5 / 20% (\$50 max) / 40% (\$150 max) \$50 copay if filled at Lumicera or UW specialty pharmacies (40% to \$200 max elsewhere) Plan pays 100%	
Prescription Out-of-Pocket Limit Levels 1 & 2 - Individual / Family Level 3 - Individual / Family Level 4 - Individual / Family	\$600 / \$1,200 \$6,850 / \$13,700 \$1,200 / \$2,400	



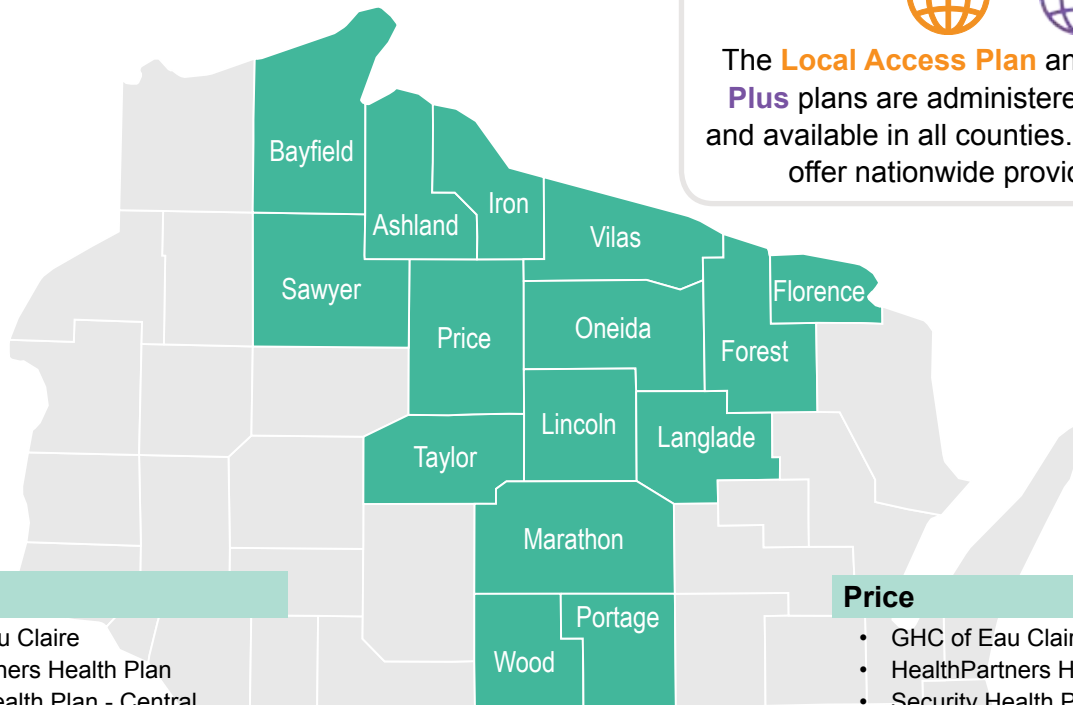
Plan features out-of-network benefits. Learn more at etf.wi.gov/IYC2018

STEP 2

CHOOSE A HEALTH PLAN



The **Local Access Plan** and **IYC Medicare Plus** plans are administered by WEA Trust and available in all counties. These plans also offer nationwide provider access.



Ashland

- GHC of Eau Claire
- HealthPartners Health Plan
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley

Bayfield

- GHC of Eau Claire*
- HealthPartners Health Plan
- Security Health Plan - Central*
- WEA Trust - Northwest Chippewa Valley

Florence

- HealthPartners Health Plan*
- Security Health Plan - Central*
- State Maintenance Plan (SMP) by WEA Trust

Forest

- HealthPartners Health Plan*
- Security Health Plan - Central
- State Maintenance Plan (SMP) by WEA Trust

Iron

- GHC of Eau Claire*
- HealthPartners Health Plan*
- Security Health Plan - Central
- State Maintenance Plan (SMP) by WEA Trust
- WEA Trust - Northwest Chippewa Valley*

Langlade

- GHC of Eau Claire
- HealthPartners Health Plan
- Security Health Plan - Central

Lincoln

- GHC of Eau Claire
- HealthPartners Health Plan
- Security Health Plan - Central

Marathon

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

Oneida

- GHC of Eau Claire
- HealthPartners Health Plan
- Security Health Plan - Central

Portage

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

Price

- GHC of Eau Claire*
- HealthPartners Health Plan*
- Security Health Plan - Central
- State Maintenance Plan (SMP) by WEA Trust

Sawyer

- GHC of Eau Claire
- HealthPartners Health Plan
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley

Taylor

- GHC of Eau Claire
- HealthPartners Health Plan
- Security Health Plan - Central

Vilas

- GHC of Eau Claire
- HealthPartners Health Plan*
- Security Health Plan - Central

Wood

- HealthPartners Health Plan*
- Quartz - Community*
- Security Health Plan - Central
- WEA Trust - East

*limited provider availability



Use the interactive map at eff.wi.gov/IYC2018 to find major providers and provider directories for health plans in your county.

Adams

- Dean Health Insurance
- Quartz - Community
- Security Health Plan - Central
- WEA Trust - East

Columbia

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

Crawford

- Dean Health Insurance*
- HealthPartners Health Plan
- Medical Associates Health Plans
- Quartz - Community
- WEA Trust - Northwest Mayo Clinic Health System

Dane

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

Dodge

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

Grant

- Dean Health Insurance
- HealthPartners Health Plan
- Medical Associates Health Plans
- Quartz - Community

Green

- Dean Health Insurance
- MercyCare Health Plans*
- Quartz - Community

Iowa

- Dean Health Insurance
- Medical Associates Health Plans
- Quartz - Community

Jefferson

- Dean Health Insurance
- MercyCare Health Plans
- Quartz - Community
- WEA Trust - East

Juneau

- Dean Health Insurance
- HealthPartners Health Plan
- Quartz - Community
- Security Health Plan - Central
- WEA Trust - East

Lafayette

- Dean Health Insurance
- Medical Associates Health Plans
- Quartz - Community

Richland

- Dean Health Insurance
- HealthPartners Health Plan
- Quartz - Community

Rock

- Dean Health Insurance
- MercyCare Health Plans
- Quartz - Community
- WEA Trust - East

Sauk

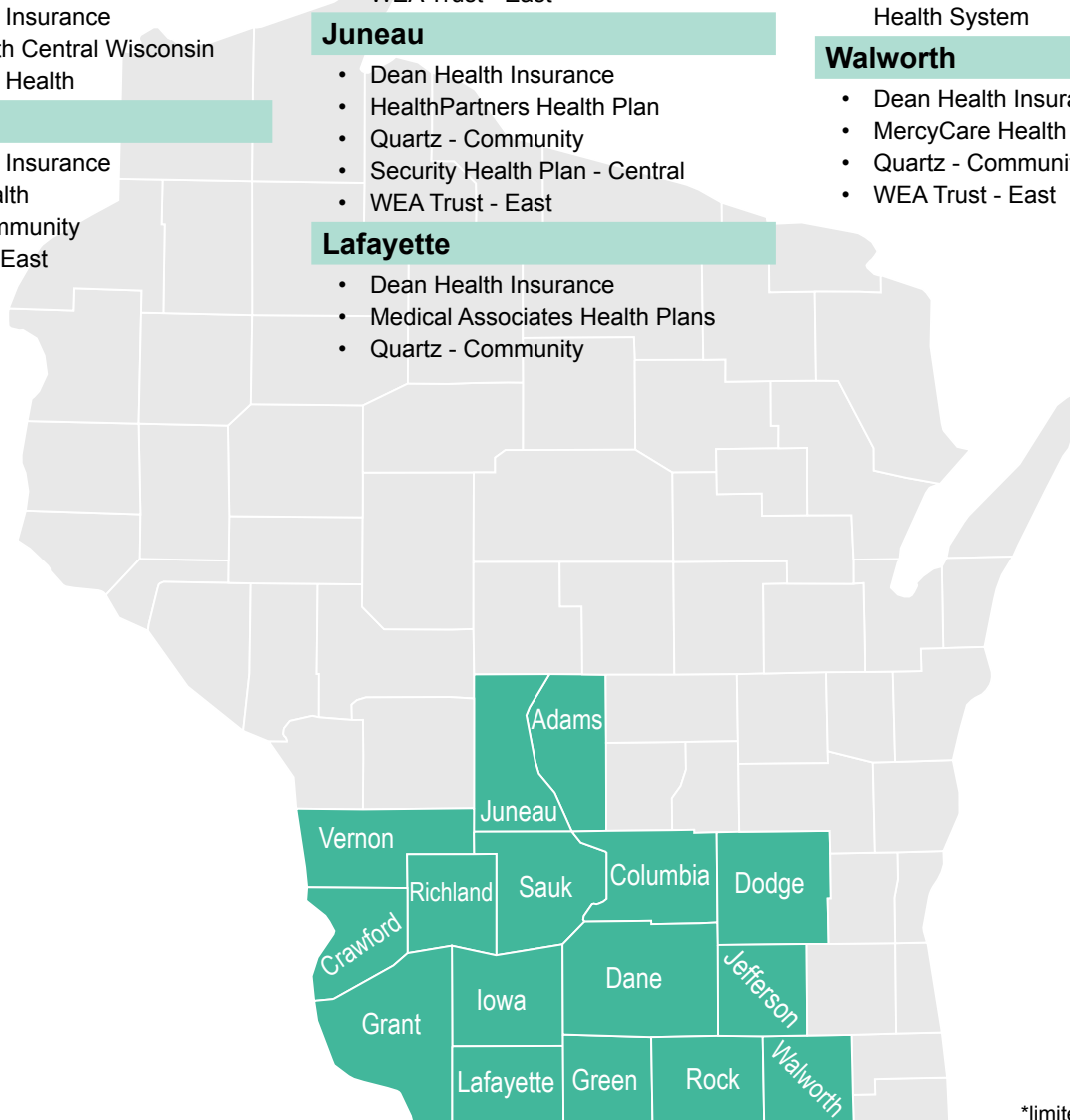
- Dean Health Insurance
- GHC of South Central Wisconsin
- Quartz - Community

Vernon

- Dean Health Insurance*
- HealthPartners Health Plan
- Quartz - Community
- WEA Trust - Northwest Mayo Clinic Health System

Walworth

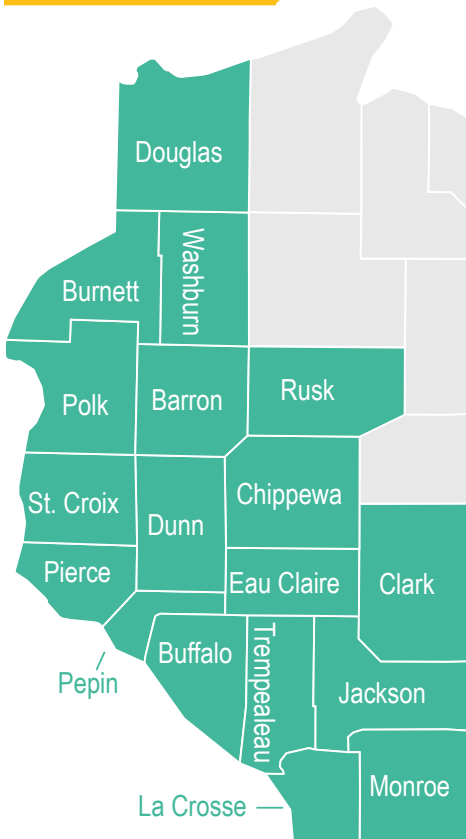
- Dean Health Insurance
- MercyCare Health Plans
- Quartz - Community
- WEA Trust - East



*limited provider availability

STEP 2

CHOOSE A HEALTH PLAN, CONTINUED



Clark

- GHC of Eau Claire
- HealthPartners Health Plan
- Quartz - Community*
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley

Douglas

- GHC of Eau Claire
- HealthPartners Health Plan
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley

Dunn

- HealthPartners Health Plan
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley
- WEA Trust - Northwest Mayo Clinic Health System

Eau Claire

- HealthPartners Health Plan
- Quartz - Community
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley
- WEA Trust - Northwest Mayo Clinic Health System

Jackson

- HealthPartners Health Plan
- Quartz - Community
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley
- WEA Trust - Northwest Mayo Clinic Health System

La Crosse

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

Monroe

- HealthPartners Health Plan
- Quartz - Community
- Security Health Plan - Central*
- WEA Trust - Northwest Mayo Clinic Health System

Pepin

- HealthPartners Health Plan
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley
- WEA Trust - Northwest Mayo Clinic Health System

Pierce

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

Polk

- HealthPartners Health Plan
- WEA Trust - Northwest Chippewa Valley

Rusk

- HealthPartners Health Plan*
- Security Health Plan - Central
- State Maintenance Plan (SMP) by WEA Trust
- WEA Trust - Northwest Chippewa Valley

St. Croix

- HealthPartners Health Plan
- WEA Trust - Northwest Chippewa Valley

Trempealeau

- HealthPartners Health Plan
- Quartz - Community
- Security Health Plan - Central
- WEA Trust - Northwest Mayo Clinic Health System

Washburn

- GHC of Eau Claire
- HealthPartners Health Plan
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley

Barron

- HealthPartners Health Plan
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley
- WEA Trust - Northwest Mayo Clinic Health System

Buffalo

- HealthPartners Health Plan
- Security Health Plan - Central
- WEA Trust - Northwest Mayo Clinic Health System*

Burnett

- GHC of Eau Claire
- HealthPartners Health Plan
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley

Chippewa

- HealthPartners Health Plan
- Quartz - Community*
- Security Health Plan - Central
- WEA Trust - Northwest Chippewa Valley
- WEA Trust - Northwest Mayo Clinic Health System

*limited provider availability

Brown

- Dean Health Insurance - Prevea360
- Network Health
- Security Health Plan - Valley
- WEA Trust - East

Calumet

- Network Health
- WEA Trust - East

Door

- Dean Health Insurance - Prevea360
- HealthPartners Health Plan*
- Network Health
- WEA Trust - East

Fond du Lac

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

Green Lake

- Dean Health Insurance
- Network Health
- Security Health Plan - Valley*
- WEA Trust - East

Kenosha

- Network Health
- WEA Trust - East

Kewaunee

- Dean Health Insurance - Prevea360
- Network Health
- Security Health Plan - Valley
- WEA Trust - East

Manitowoc

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

Marinette

- Dean Health Insurance - Prevea360*
- Network Health
- Security Health Plan - Valley*
- WEA Trust - East

Marquette

- Dean Health Insurance
- Network Health*
- Quartz - Community
- Security Health Plan - Valley*
- WEA Trust - East

Menominee

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

Milwaukee

- Network Health
- WEA Trust - East

Oconto

- Dean Health Insurance - Prevea360
- Network Health
- Security Health Plan - Valley
- WEA Trust - East

Outagamie

- Dean Health Insurance - Prevea360*
- Network Health
- Security Health Plan - Valley
- WEA Trust - East

Ozaukee

- Network Health
- WEA Trust - East

Racine

- Network Health
- WEA Trust - East

Shawano

- Dean Health Insurance - Prevea360*
- Network Health*
- Security Health Plan - Central*
- Security Health Plan - Valley*
- WEA Trust - East

Sheboygan

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

Washington

- Network Health
- WEA Trust - East

Waukesha

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

Waupaca

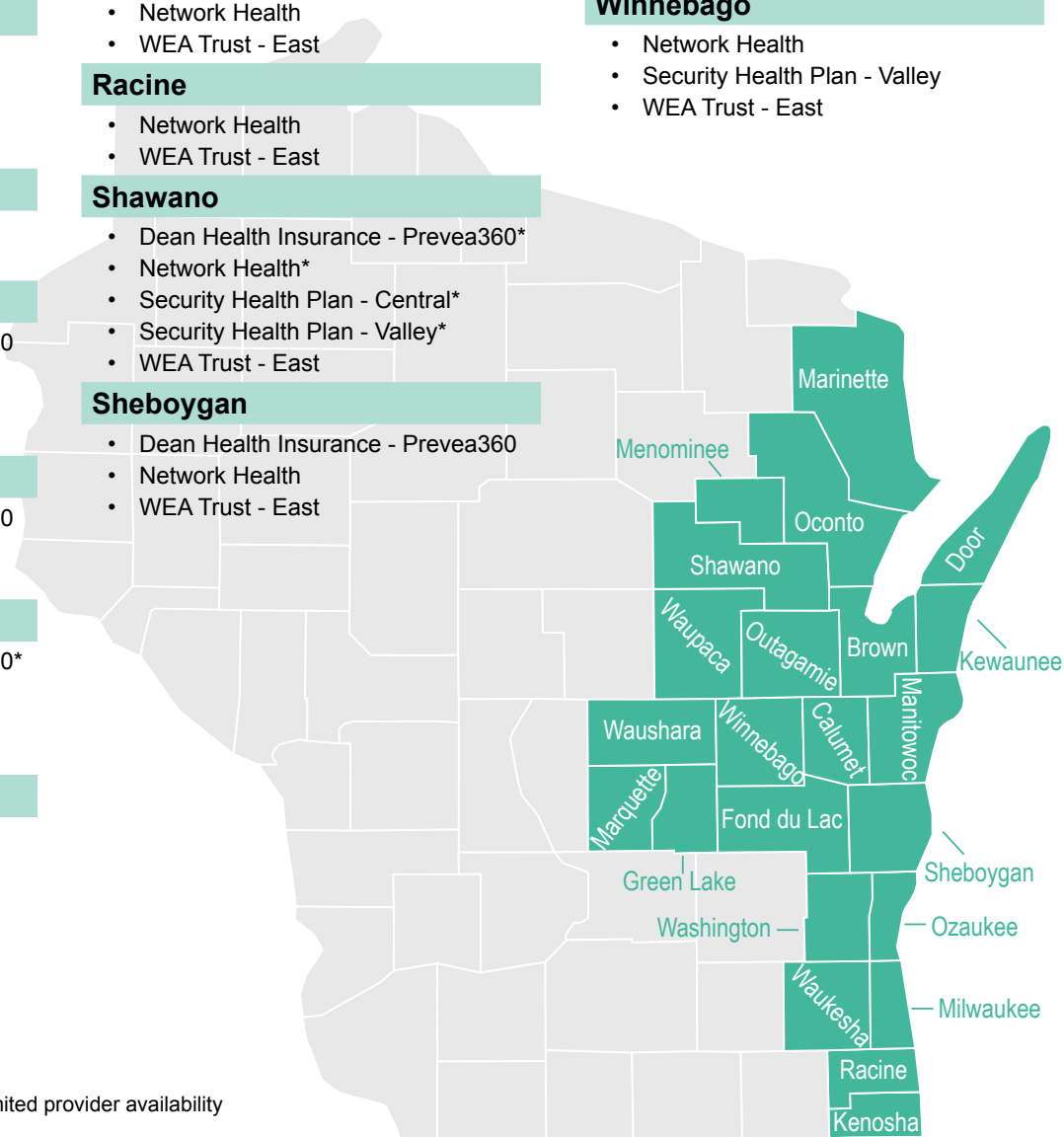
- Network Health*
- Security Health Plan - Central
- Security Health Plan - Valley
- WEA Trust - East

Waushara

- Network Health*
- Security Health Plan - Central
- Security Health Plan - Valley
- WEA Trust - East

Winnebago

- Network Health
- Security Health Plan - Valley
- WEA Trust - East



*limited provider availability

STEP 2

CHOOSE A HEALTH PLAN, CONTINUED

Monthly Premium Rates (in dollars)	With Dental Individual / Family	Without Dental Individual / Family
	IYC Local Deductible Health Plan ¹	
Dean Health Insurance ★★★★★	752.74 / 1,856.12	723.70 / 1,783.52
Dean Health Insurance - Prevea360 ★★★★★	756.14 / 1,864.62	727.10 / 1,792.02
GHC of Eau Claire ★★☆☆☆	940.04 / 2,324.32	911.00 / 2,251.72
GHC of South Central Wisconsin ★★★★★☆	675.64 / 1,663.32	646.60 / 1,590.72
HealthPartners Health Plan ★★★★★☆	883.44 / 2,182.82	854.40 / 2,110.22
Medical Associates Health Plans ★★☆☆☆	613.44 / 1,507.82	584.40 / 1,435.22
MercyCare Health Plans ★☆☆☆☆	723.04 / 1,781.82	694.00 / 1,709.22
Network Health ★★★★★☆	767.34 / 1,892.62	738.30 / 1,820.02
Quartz - Community ★★★★★☆	692.34 / 1,705.12	663.30 / 1,632.52
Quartz - UW Health ★★★★★☆	622.74 / 1,531.12	593.70 / 1,458.52
Security Health Plan - Central ★★★★★☆	1,055.04 / 2,611.82	1,026.00 / 2,539.22
Security Health Plan - Valley ★★★★★☆	1,051.54 / 2,603.12	1,022.50 / 2,530.52
State Maintenance Plan (SMP) ⁴ by WEA Trust ★★★★★☆	909.62 / 2,248.26	880.58 / 2,175.66
WEA Trust - East ★★★★★☆	876.34 / 2,165.12	847.30 / 2,092.52
WEA Trust - Northwest Chippewa Valley ★★★★★☆	1,091.64 / 2,703.32	1,062.60 / 2,630.72
WEA Trust - Northwest Mayo Clinic Health System ★★★★★☆	1,091.64 / 2,703.32	1,062.60 / 2,630.72
	Local Access Plan ¹	
WEA Trust ⁴ ★★★★★☆ <i>All counties</i>	1,340.86 / 3,326.40	1,311.82 / 3,253.80



The overall performance star ratings are based on several quality measures. Visit the Map tab at etf.wi.gov/IYC2018 and click on the quality rating of the plans you are interested in for more information.

	With Dental Medicare single / Medicare 1 ² / Medicare 2 ³	Without Dental Medicare single / Medicare 1 ² / Medicare 2 ³
IYC Deductible Medicare		
Dean Health Insurance ★★★★★	562.30 / 1,297.88 / 1,121.96	533.26 / 1,239.80 / 1,049.36
Dean Health Insurance - Prevea360 ★★★★★	564.00 / 1,302.98 / 1,125.36	534.96 / 1,244.90 / 1,052.76
GHC of Eau Claire ★★☆☆☆	568.50 / 1,491.38 / 1,134.36	539.46 / 1,433.30 / 1,061.76
GHC of South Central Wisconsin ★★★★★☆	531.00 / 1,189.48 / 1,059.36	501.96 / 1,131.40 / 986.76
HealthPartners Health Plan ★★★★★☆☆	598.10 / 1,464.38 / 1,193.56	569.06 / 1,406.30 / 1,120.96
Medical Associates Health Plans ★★☆☆☆	420.10 / 1,016.38 / 837.56	391.06 / 958.30 / 764.96
MercyCare Health Plans ★☆☆☆☆	531.80 / 1,237.68 / 1,060.96	502.76 / 1,179.60 / 988.36
Network Health ★★★★★☆☆	576.80 / 1,326.98 / 1,150.96	547.76 / 1,268.90 / 1,078.36
Quartz - Community ★★★★★☆☆	490.60 / 1,165.78 / 978.56	461.56 / 1,107.70 / 905.96
Quartz - UW Health ★★★★★☆☆	462.00 / 1,067.58 / 921.36	432.96 / 1,009.50 / 848.76
Security Health Plan - Central ★★★★★☆☆	508.30 / 1,546.18 / 1,013.96	479.26 / 1,488.10 / 941.36
Security Health Plan - Valley ★★★★★☆☆	508.40 / 1,542.78 / 1,014.16	479.36 / 1,484.70 / 941.56
State Maintenance Plan (SMP) ⁴ by WEA Trust ★★★★★☆☆	462.22 / 1,354.68 / 921.78	433.18 / 1,296.60 / 849.18
WEA Trust - East ★★★★★☆☆	522.40 / 1,381.58 / 1,042.16	493.36 / 1,323.50 / 969.56
WEA Trust - Northwest Chippewa Valley ★★★★☆☆	607.20 / 1,681.68 / 1,211.76	578.16 / 1,623.60 / 1,139.16
WEA Trust - Northwest Mayo Clinic Health System ★★★★★☆☆	607.20 / 1,681.68 / 1,211.76	578.16 / 1,623.60 / 1,139.16
IYC Medicare Plus		
WEA Trust ★★★★★☆☆	462.22 / 1,785.92 / 921.78	433.18 / 1,727.84 / 849.18

¹Members of new participating employers may have a surcharge added to their rates. Your employer will inform you. Contact your payroll office with questions.

²Medicare 1 = Family coverage with at least one insured family member enrolled in Medicare Parts A, B and D.

³Medicare 2 = Family coverage with all insured family members enrolled in Medicare Parts A, B and D.


⁴Members with Local Access Plan or SMP coverage who enroll in Medicare Parts A and B will automatically be moved to the IYC Medicare Plus plan. All other non-Medicare family members will remain covered under the Local Access Plan or SMP.

STEP 3

CONSIDER SUPPLEMENTAL BENEFITS

Uniform Dental Benefit Option

Your employer may choose to offer Uniform Dental Benefits along with your health insurance coverage. *Ask your benefits office about available options.* The table lists only the most commonly used benefits. **Visit etf.wi.gov/IYC2018 for complete information, including limitations and benefit exclusions.**

	
Monthly Payment (Premium)	See pages 11-12
In-Network Providers	Delta Dental PPO or Premier providers No out-of-network coverage
Deductible	None
Annual Benefit Max	\$1,000 / person
Diagnostic & Preventive Services Routine evaluations, dental cleanings, sealants, bitewing and panoramic X-rays, fluoride treatments, fillings	100%
Basic Services Local anesthesia, emergency pain relief	80%
Major / Restorative Services Crowns, bridges, dentures, root canal therapy (endodontics)	Not covered
Waiting Period	None
Orthodontics (Under Age 19) Coverage Lifetime Maximum Waiting Period	50% \$1,500 None
Contact	1-844-337-8383 deltadentalwi.com/state-of-wi

Health Insurance Required ✓

Uniform Dental is only available if you enroll in health insurance under the WPE Group Health Insurance Program. Contact your benefits office to see if your employer offers the Uniform Dental Benefit.


Your dental coverage will mirror your health insurance; if you elect family health insurance with dental, you will be enrolled in family dental coverage. If you elect individual health insurance with dental coverage, you will be enrolled in individual dental coverage.

Go to the Delta Dental website and create an account to:


- ✓ Find in-network providers
- ✓ Print ID cards
- ✓ View your benefits and claims
- ✓ Find valuable dental health resources
- ✓ Ask questions

Other Benefits

May be offered by your employer. Check with your employer if you are uncertain these are available to you.

 **WPE Life Insurance**
Life insurance coverage up to five times your annual earnings, plus optional spouse and dependent coverage. Offered by Securian Financial Group, Inc.

 **Wisconsin Deferred Compensation Program**
A supplemental retirement savings and investment program.


 **Income Continuation Insurance Program**
An "income replacement" benefit payable if you become disabled.

What is Changing *continued from page 2*

MEDICAL BENEFITS (ACTION REQUIRED)

All participants must select a primary care provider. If you don't have one, contact your health plan for help.

No Domestic Partner Coverage

Due to a state budget proposal, it's likely that domestic partners will not be covered in 2018. For updates on this legislation and other important information, visit etf.wi.gov to sign up for ETF Email Updates. 

Local Access Plan

View in-network benefit changes on page 4. See etf.wi.gov/IYC2018 for out-of-network benefit changes and an eLearning. You will receive information in the mail from your health plan.

State Maintenance Plan (SMP) Changes

SMP is no longer available in Bayfield, Buffalo, Marquette, Menominee, Pepin and Vilas counties. There will not be Minnesota providers offered in 2018. If you use providers in these areas, you must select another plan or be limited to the SMP providers available in 2018.

SMP will be newly available in Price County.

SMP now offers some out-of-network benefits; see plan details on the Map tab at etf.wi.gov/IYC2018.

PHARMACY BENEFITS

In-Network Pharmacy Changes

CVS (including Target pharmacies) and certain out-of-state pharmacies are no longer in-network. Find a complete list online.

No Longer Covered: Certain Over the Counter Medications for Non-Medicare Participants

This includes medications such as steroid nasal sprays like Flonase®. You can use your Health Care Flexible Spending account, if offered by your employer, to pay for them, with a prescription.

New Mandatory Specialty Pharmacies (Level 4 Prescriptions) for Non-Medicare Participants

Level 4 prescriptions must be filled at Lumicera or the UW Specialty Pharmacy.

Medicare Rx members should visit medicarerx.navitus.com or call Navitus at 1-866-270-3877 for details.

New Mail Order Pharmacy: Serve You

Serve You is replacing WellDyneRx. Navitus will mail information to current participants. Call Navitus at 1-866-333-2757 with questions.

New Discount Drug List

Prescriptions that are not covered by your pharmacy benefit may be available at a discounted rate. This may include drugs for infertility, weight loss, cosmetic or other lifestyle needs as prescribed by your doctor. Call Navitus at 1-866-270-3877 for details. You can use your Health Care Flexible Spending account to pay for them, with a prescription.

WELL WISCONSIN PROGRAM

The \$150 Well Wisconsin incentive will continue to be available to you and your enrolled spouse. To earn the \$150, you will need to complete the current incentive requirements, plus a third step of an easy health engagement activity through StayWell. Watch for more information from StayWell in 2018.



No access to the internet?

Contact ETF, using the contact information on the back of this guide, to request printed information to be mailed to you.



Well Wisconsin Program

Who's Your Reason?

The Well Wisconsin Program, administered by StayWell®, supports you on your personal health journey and rewards you with a \$150 incentive. The deadline to earn the 2017 incentive is October 20. Watch for more information on the Million Steps Challenge in 2018!

Learn more about incentive eligibility and the free and confidential resources and services available to you through StayWell today.



WELL WISCONSIN
Healthier starts with you

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

StayWell® is a registered trademark of StayWell® Company, LLC. All health and wellness incentives paid to ETF members by StayWell® are considered taxable income to the subscriber and are reported to your employer. Health information, including individual responses to the health survey, are protected by federal law and will not be shared with ETF or your employer.



HAVE QUESTIONS?



etf.wi.gov/IYC2018

1-877-533-5020 (toll free)
608-266-3285 (local Madison)

PO Box 7931
Madison, WI 53707-7931



@WI_ETF

Open Enrollment: October 2 - October 27, 2017

Mailed application must be postmarked by October 27, 2017.

Discrimination is Against the Law 45 C.F.R. §92.8(b)(1) & (d)(1)

The Wisconsin Department of Employee Trust Funds complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. ETF does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

ETF provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats. ETF provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, contact ETF's Compliance Officer, who serves as ETF's Civil Rights Coordinator.

If you believe that ETF has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: Compliance Officer, Department of Employee Trust Funds, 801 West Badger Road, P.O. Box 7931, Madison, WI 53707-7931; 1-877-533-5020; TTY: 711; Fax: 608-267-4549; Email: ETFSMBPrivacyOfficer@etf.wi.gov. If you need help filing a grievance, ETF's Compliance Officer is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201; 1-800-368-1019; TDD: 1-800-537-7697. Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.

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

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

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

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

Arabic: ملاحظة: إذا كنت تتحدث اللغة العربية، فهناك خدمة مساعدة متاحة بلغتنا اتصل بالرقم (خدمة الصم والبكم: 711) 1-877-533-5020

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

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

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

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

Laotian/Lao: ໂປດຊາບ: ຖ້າວ່າທ່ານເວົ້າພາສາລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-877-533-5020 (TTY: 711).

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

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

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

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

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

For EEOC, COBRA, ACA marketplace and more federal and state notices, visit etf.wi.gov/IYC2018

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