

# 2021 Health Benefits Decision Guide

State of Wisconsin Group Health Insurance for Employees



### **About This Guide**

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

### Your Enrollment Checklist

### I'm happy with my benefits

- ☐ Review changes for next year
  Each year there are changes to your
  benefits. Make sure that your plan is still
  available in your area. You do not need
  to re-enroll in health, dental, or vision
  insurance each year if you want to keep
  the same coverage you have now.
  - Every year, you do need to re-enroll for other options, like an FSA account.
- ☐ Make sure your doctors are still covered

Go to our website to see the provider directory for your health plan.

If you are not changing health coverage, no action is needed.

### ☐ Re-enroll in pre-tax savings accounts

If you have any of the following accounts, you must re-enroll each year:

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

Visit our website for enrollment instructions.



Contact your payroll/benefits office if you have questions.

#### I'd like to make a change or I'm new

☐ Learn the way that works best for you, either:



Use ALEX®, our virtual benefits counselor. He will ask you a few questions about your health care needs, crunch some numbers and point out what benefits make the most sense for you.

Visit **etf.wi.gov/ALEX** to get started. Or follow along in this guide. There are steps and guidance throughout.

#### ☐ Enroll

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

#### I'd like to opt out

You may be eligible to receive \$2,000 for opting out of health insurance for 2021. To receive this incentive, **you must opt out every year**.

- ☐ Review eligibility and important considerations on our website Search for "opt out" on our website.
- ☐ Submit application

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

### What's Changing in 2021

#### **Health Plans**

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

#### Service Area Changes

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

#### **New Administrator for Vision**

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

#### **Pre-Tax Savings Accounts**

#### **Limit Increases**

Annual contribution limits have been raised for multiple pre-tax savings accounts. The Health Care Flexible Spending (FSA) and Limited Purpose Flexible Spending Account (LPFSA) carryover limit has increased to \$550. See page 16 for details.

#### New Eligible Expenses

Eligible expenses for Health Savings Accounts and FSAs now include:

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

#### Parking & Transit Availability

UW System employees may enroll in parking and transit accounts for plan year 2021. Elections will be effective January 1, 2021.

#### **New Medical Benefit**

Biofeedback for urinary incontinence will now be covered.

#### **Supplemental Insurance**

#### **Accident Plan**

The accidental death and dismemberment (AD&D) payment amount has been increased for members up to \$100,000.

#### **Long-Term Care Insurance**

Long-term care insurance is open for new enrollments with HealthChoice. Enrollment is available throughout the plan year. See the ETF website for more details.

#### Wellness

#### New "Health Check" Activities

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

#### Health Plan-Offered Wellness Incentives

Due to ongoing tax administration concerns, health plans will no longer be offering wellness incentives effective January 1, 2021. You remain eligible for the \$150 wellness incentive available via Well Wisconsin, administered by StayWell.

#### **HDHP Telehealth**

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

#### **Electronic Pharmacy Enhancements**

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



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

#### **Testing**

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

#### Vaccine Coverage

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



#### **ETF Will Not Attend In-Person Benefit Fairs**

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

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

Visit **etf.wi.gov** for member education opportunities and to register.



## Step 1: Choose a Plan Design

A plan design determines:

- How much you pay per month
- How much you pay when you visit a provider
- Whether you can see providers locally or nationwide
- If you can see providers out-of-network

### Monthly Cost (Premium)

			•	
	IYC Health Plan	High Deductible Health Plan (HDHP)	Access Plan	Access HDHP
Active Employees				
Individual With / Without Uniform Dental	\$96 / \$92	\$36 / \$32	\$255 / \$251	\$195 / \$191
Family With / Without Uniform Dental	\$238 / \$229	\$89 / \$80	\$632 / \$623	\$483 / \$474
UW Grad Assistants				
Individual With / Without Uniform Dental	\$50 / \$46	Not available	\$129.50 / \$125.50	Not available
Family With / Without Uniform Dental	\$123.50 / \$114.50	Not available	\$320.50 / \$311.50	Not available

Employees appointed fewer than 1,040 hours (50% of full time) pay 50% of the total monthly premium; visit etf.wi.gov for full premium amounts.

### **Quick Comparison**

Cost Per Visit	<b>\$\$</b> \$\$	\$\$\$\$	<b>\$\$</b> \$\$	\$\$\$\$
Provider Availability	Local	Local	Nationwide	Nationwide
Nationwide Pharmacies	<b>~</b>	<b>~</b>	<b>~</b>	<b>~</b>
Out-of-Network Benefits	Emergency and urgent care	Emergency and urgent care	<b>~</b>	<b>~</b>
Available Health Plan(s)	9 plans	9 plans	WEA Trust	WEA Trust
Employer may add money to required Health Savings Account (HSA)		Individual: \$750 Family: \$1,500		Individual: \$750 Family: \$1,500

### Breakdown of Your Medical Costs

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

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



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

### Breakdown of Your Pharmacy Costs

You must use an in-network pharmacy. Visit **etf.benefits.navitus.com** to find an in-network pharmacy near you. In-network pharmacies are available nationwide.

	IYC Health Plan	Access Plan	HDHP	Access HDHP
<b>Prescription Deductible</b> (Individual / Family)	None		Combined medio \$1,500 / You pay 100% of costs until ded	\$3,000 most pharmacy
Prescription Copay / Coinsurance				
Level 1	\$5 or less		After deductil	ole: \$5 or less
Level 2	20% (\$50 max)		After deductible: 20% (\$50 max)	
Level 3	40% (\$150 max) <sup>2</sup>		After deductible:	40% (\$150 max) <sup>2</sup>
Level 4	\$50 copay <sup>3</sup>		After deductib	le: \$50 copay³
<b>Preventive</b> (As federally required)	\$0 - Plan p	pays 100%	\$0 - Plan p	pays 100%
Prescription Out-Of-Pocket Limit				
Levels 1 & 2 (Individual / Family)	\$600/	\$1,200		
Level 3 (Individual / Family)	\$6,850 /	\$13,700	Combined media \$2,500 /	
Level 4 (Individual / Family)	\$1,200 /	\$2,400		

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

#### Save \$ on Your Medications with Mail Service



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

For more information, visit **serve-you-rx.com/navitus** or call **1-800-481-3340**.

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

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



## Step 2: Choose a Health Plan

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

A health plan determines:

- Where you can receive care
- What providers you can see

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

### Health Plans by County



#### **Adams**

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

#### **Ashland**

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

#### Barron

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

#### **Bayfield**

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

\*limited provider availability

The **Access Plan** is available in every county and worldwide.

#### Brown

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

#### Buffalo

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

#### Burnett

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

#### Calumet

- Network Health
- Robin with HealthPartners
- WEA Trust East

#### Chippewa

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

#### Clark

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

#### Columbia

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

#### Crawford

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

#### Dane

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

#### Dodge

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

#### Door

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

#### Douglas

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

#### Dunn

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

#### Eau Claire

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

#### **Florence**

Robin with HealthPartners

#### Fond du Lac

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

#### **Forest**

- HealthPartners Health Plan
- WEA Trust East

#### Grant

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

#### Green

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

#### **Green Lake**

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

#### Iowa

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

#### Iron

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

#### Jackson

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

\*limited provider availability

The **Access Plan** is available in every county and worldwide.

#### **Jefferson**

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

#### Juneau

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

#### Kenosha

- Network Health
- WEA Trust East

#### Kewaunee

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

#### La Crosse

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

#### Lafayette

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

#### Langlade

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

#### Lincoln

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

#### Manitowoc

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

#### Marathon

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

#### Marinette

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

#### Marquette

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

#### Menominee

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

#### Milwaukee

- Network Health
- · WEA Trust East

#### Monroe

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

#### Oconto

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

#### Oneida

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

#### Outagamie

- Dean Health Plan Prevea360\*
- Network Health
- Robin with HealthPartners
- WFA Trust Fast

#### Ozaukee

- Network Health
- WEA Trust East

#### Pepin

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

#### Pierce

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

#### Polk

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

#### Portage

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

#### Price

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

#### Racine

- Network Health
- WEA Trust East

#### Richland

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

#### Rock

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

\*limited provider availability

The **Access Plan** is available in every county and worldwide.

#### Rusk

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

#### Sauk

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

#### Sawyer

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

#### Shawano

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

#### Sheboygan

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

#### St. Croix

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

#### **Taylor**

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

#### Trempealeau

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

#### Vernon

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

#### Vilas

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

#### Walworth

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

#### Washburn

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

#### Washington

- Network Health
- WEA Trust East

#### Waukesha

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

#### Waupaca

- Network Health
- Robin with HealthPartners
- WEA Trust East

#### Waushara

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

#### Winnebago

- Network Health
- Robin with HealthPartners
- WEA Trust East

#### Wood

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

\*limited provider availability

The **Access Plan** is available in every county and worldwide.



### Health Plan Quality

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



## **Step 3: Consider Supplemental Benefits**

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

Get a tax break and save money by contributing to a pre-tax savings account for health care, dependent day care or work-related parking/transit expenses.

### **Dental Insurance**

#### Step 1: Sign up for basic coverage

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

#### **Uniform Dental**

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

or

Delta Dental PPO Plus Premier™ – Preventive Plan

Only available to those **not enrolled** in health insurance through the program

### **Step 2: Add more coverage if needed**

Get covered for items such as crowns, bridges, dentures, implants and root canals

Delta Dental PPO™ -Select Plan

or

Delta Dental PPO Plus Premier™ -Select Plus Plan

### Monthly Cost (Premium)

The Uniform Dental premium is added to your health insurance premium. Preventive Plan, Select Plan and Select Plus Plan are separate deductions.

	Uniform Dental	Preventive Plan	Select Plan	Select Plus Plan
Individual	\$4	\$30.20	\$9.28	\$16.82
Individual + Child(ren)			\$12.52	\$31.12
Individual + Spouse			\$18.56	\$33.64
Family	\$9	\$75.50	\$22.28	\$51.30

### Dental: What is Covered

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

#### **Things to Note**

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

#### **Plan Administrator**



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

All plans are offered through Delta Dental.

Visit their website and create an account to find innetwork providers, print ID cards, view your claims and more!

### Vision Insurance 🔘



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

### Monthly Cost (Premium)

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

Individual	Individual + Spouse	Individual + Child(ren)	Family
\$5.72	\$11.42	\$12.88	\$20.58

### Vision: What is Covered

	In-Network Providers	Out-of-Network Providers
Yearly routine exam copay	\$15 / person (covered up to twice a year for children)	Up to \$45 / person
Eyeglasses exam copay	\$15 / person	Up to \$45 / person
Contact lens exam copay	\$40 / person	Up to \$45 / person
Retinal imaging copay	Up to \$39 / person	No coverage
Frames/lens copay	\$0 copay \$150 allowance 20% off any cost over \$150	Up to \$70 / person
Lenses benefit frequency per calendar year	12 months	12 months
Frames benefit frequency per calendar year	24 months for adults 12 months for children	24 months
Single vision eyeglasses copay	\$25 / person	Up to \$30 / person
Bifocal vision eyeglasses copay	\$25 / person	Up to \$50 / person
Progressive lenses	Standard: covered in full Premium: \$95 - \$105 Custom: \$150 - \$175	Up to \$50 / person

### Vision: What is Covered, continued

	In-Network Providers	Out-of-Network Providers
Conventional contacts	\$0 copay \$150 allowance 15% off any cost over \$150	Up to \$105 / person
Disposable contacts	\$0 copay \$150 allowance	Up to \$105 / person
Contact lens fitting/follow-up visit	Standard: up to \$40 / person Premium: 10% off retail price	No coverage

#### **Things to Note**

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

#### **Plan Administrator**

New provider for 2021!

### Delta Vision®

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

See etf.wi.gov for complete coverage. Contact DeltaVision with questions.



#### Get Easy Access to Your Prescription Benefits with Navitus' Mobile App

Enjoy greater convenience at your fingertips! With our mobile app you can:

- · Compare medication prices to find the lowest cost option for you
- Locate the most convenient network pharmacies
- See medication and benefit information

With just a few taps you can get help to make more informed prescription decisions and be on your way to better health.

#### Download the Navitus Prescription Benefits mobile app today!\*

\*Registration is simple and secure and may require your member ID. The app is available to iOS and Android users. You must be 18 years or older and currently covered under Navitus' pharmacy benefit plan. Hover your phone's camera over the code to download the app.





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### More Supplemental Benefits

#### **Accident Plan**

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

#### Coverage Includes

Concussions

Fractures

Hospitalization

Support care

Dislocations

X-rays

Surgeries

 Accidental death & dismemberment

Lacerations

Emergency care

Follow-up care

(up to \$100,000)

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

#### No Health Questions

All coverage is guaranteed at initial eligibility, qualified family status changes, and annual enrollment. You do not need state group health insurance to be eligible for the accident plan.

#### **Monthly Premium**

Individual	Individual + Spouse	Individual + Child(ren)	Family
\$4.38	\$6.26	\$8.44	\$12.32

#### **How It Works**

Here's an example of how Securian Financial's accident insurance works\*: Janet elects accident coverage offered by her employer. Janet falls, breaks her leg, and spends two days in the hospital. Janet gets a payment from Securian Financial and uses the money to pay her mortgage and obtain a cleaning service.

#### Plan Administrator



1-866-295-8690

www.LifeBenefits.com/plandesign/WIETF

madisonbranch@securian.com

#### **Additional Benefits**

Visit our website to learn about additional benefits such as income continuation insurance (ICI), life insurance, disability insurance, long-term care insurance, and Wisconsin Deferred Compensation.

#### UW System and UW Hospital and Clinics (UWHC) Employees

You may have different supplemental plans available. Check with your HR/benefits office for details. UW System: wisconsin.edu/ohrwd/benefits - UWHC: https://uconnect.wisc.edu/depts/uwhealth/benefits

<sup>\*</sup>Your actual experience may vary from example

### Pre-Tax Savings Accounts



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

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

Use for eligible health care expenses not covered by insurance for you and your eligible dependents

Money is available at the beginning of the year

**Annual Contribution Limit:** \$2,750

Carryover Limit:

\$550

HDHP participants only

#### **Health Savings Account (HSA)**

Use for health care expenses or additional retirement savings

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

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

**Annual Contribution Limit:** 

Individual: \$3,600 | Family: \$7,200

**Carryover Limit:** 

Unlimited; all money carries over

Annual Employer Contribution:

(If eligible; paid in installments) Individual: \$750 | Family: \$1,500

**Annual Catch-Up Contribution Limit:** (Age 55-65 only)

\$1,000

HDHP participants only

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

Use for certain dental, vision and post-deductible medical expenses not covered by insurance

Money is available at the beginning of the year

**Annual Contribution Limit:** 

\$2,750

**Carryover Limit:** 

\$550

#### **Dependent Day Care Account**

Use for eligible care expenses for qualified dependents allowing you (or your spouse) to work, look for work or attend school full time

Money is available as it is deposited

**Annual Contribution Limit:** 

\$5,000

**Carryover Limit:** 

\$0; no money carries over

#### **Parking & Transit Accounts**

A parking account is for work-related eligible parking expenses. A transit account is for eligible transit expenses related to your commute to work

Money is available as it is deposited

Not available to: UW Hospital & Clinics employees

**Transit Contribution Limit:** 

\$270 / month

**Parking Contribution Limit:** 

\$270 / month

**Carryover Limit:** 

Unlimited; all money carries over



You must re-enroll each year. Elections do not carry forward from year to year.

### **Need Care Fast? Know Your Options**

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

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



### Health Plan and Vendor Contact Information

ConnectYourCare 1-833-881-8158

www.connectyourcare.com/etf

Dean Health Insurance

1-800-279-1301

deancare.com/wi-employees

Dean Health Insurance-Prevea360 Health Plan

1-877-230-7555

prevea360.com/wi-employees

Delta Dental 1-844-337-8383

deltadentalwi.com/state-of-wi

DeltaVision in partnership with EyeMed Vision Care

1-844-337-8383

deltadentalwi.com/state-of-wi-vision

Group Health Cooperative of Eau Claire (GHC-EC)

1-888-203-7770, 715-552-4300

group-health.com

Group Health Cooperative of South Central Wisconsin

(GHC-SCW)

1-800-605-4327, 608-828-4853

ghcscw.com

HealthPartners Health Plan

1-855-542-6922, 952-883-5000

healthpartners.com/stateofwis

Medical Associates Health Plans

1-866-421-3992

mahealthcare.com

MercyCare Health Plans

1-800-895-2421 option 5

mercycarehealthplans.com

Navitus Health Solutions

1-866-333-2757

www.navitus.com

Navitus MedicareRx (PDP)

(Prescription drug coverage for Medicare eligible

retirees)

1-866-270-3877

medicarerx.navitus.com

Network Health

1-844-625-2208, 920-720-1811

networkhealth.com/employer/state

Quartz

1-844-644-3455

ChooseQuartz.com

Robin with HealthPartners Health Plan

1-855-542-6922

healthpartners.com/etfrobin

Securian Financial

1-866-295-8690

www.LifeBenefits.com/plandesign/WIETF

StayWell

1-800-821-6591

wellwisconsin.staywell.com

UnitedHealthcare

1-844-876-6175

UHCRetiree.com/etf

**WEA Trust** 

1-866-485-0630

weatruststate.com



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

Mailed application must be postmarked by October 23, 2020



#### 1-877-533-5020

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



PO Box 7931 Madison, WI 53707-7931





Nondiscrimination and Language Access 42 U.S. Code § 18116 ETF complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

ETF provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, audio, accessible electronic formats and others). ETF provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact ETF at 1-877-533-5020; TTY: 711. If you believe that ETF has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: ETF Office of Policy, Privacy & Compliance

P.O. Box 7931, Madison, WI 53707-7931 1-877-533-5020; TTY: 711 • Fax: 608-267-4549 Email: ETFSMBPrivacyOfficer@etf.wi.gov

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

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

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

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

ملاحظة: إذا كنت تتحدث اللغة العربية، فهناك خدمة مساعدة متاحة بلغتك دون أي مصاريف: اتصل بالرقم 711. (273-537-78-1 (خدمة الصم والبكم: 711)

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

**Korean -** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-533-5020 (TTY: 711)번으로 전화해 주십시오. If you need help filing a grievance, ETF's Office of Policy, Privacy & Compliance is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal at crportal.hhs.gov/ocr/portal/lobby.jsf or by mail or phone:

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

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

Complaint forms are available at hs.gov/ocr/office/file/index.html.

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

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

**Pennsylvania Dutch** – Wann du [Deitsch (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: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍ ເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 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. Zadzwońpod 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

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.