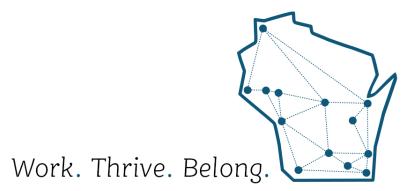


## 2025 Employee Benefits

Graduate Assistants, Employees-in-Training, Fellows Scholars and Short-Term Academic Staff



# **Your Benefits**

**PURPOSE** 

Prepare you for your benefits enrollment

AGENDA

Payroll schedule & deductions Benefits enrollment opportunities **Benefits plans** Resources

Health Insurance **Paid Time** Denta & Leave Insurance **Employee Benefits** Vision Wellnes Life FSA/HSA Insurance Retirement Plans http://www.wisconsin.edu/ohrwd/admin/download/benefits-orientation-pdf-Grad.pdf

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# **Payroll Schedule & Deductions**

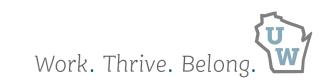
• All employees are paid every other Thursday

Taxes	Insurance Benefit Premiums	Spending & Savings Accounts and Supplemental Retirement Plans Contributions
<ul> <li>Per IRS regulations, no taxes are withheld from earnings for:</li> <li>Advanced Opportunity Fellow, fellow, Grad Intern or Trainee, Post-doc Fellow, Scholar or Trainee</li> <li>May be responsible for paying taxes on income when you file your tax return</li> </ul>	Deducted from two paychecks each month to pay for month of coverage Health, dental & vision insurance premiums are deducted pretax for Federal, State, Social Security & Medicare	Deducted from two paychecks each month Deducted pretax for Federal, State, Social Security & Medicare Retirement plans allow after-tax (Roth) contributions
For more inform	Work. Thrive. Belong	



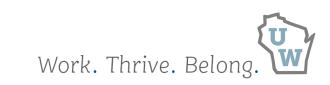
## **Insurance Premiums for 9-Month Employees**

- Deducted from the first two paychecks each month during the academic year
- Benefits prepay: Multiple insurance premiums are deducted during the 9-month academic year to keep coverage active between academic years (if appointment will continue in the fall)
- Summer earnings: Insurance premiums are generally not deducted from summer session/appointment pay. Flexible Spending Account and Retirement Plan contributions are deducted from summer session/appointment pay.



# **Benefits Enrollment Opportunities**

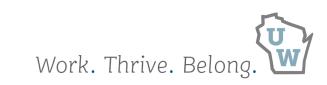
- Initial Benefits Enrollment You have 30 days from your benefits eligibility date to enroll
- Annual Benefits Enrollment Occurs each fall with changes effective January 1
- Life Events You may have a **30-day** window to enroll in or make changes if you experience a qualifying life event



# Initial Benefits Enrollment

Effective Dates:

- Most benefits are effective the first of the month on or following your benefits eligibility date and will remain in place for the entire calendar year
- Your benefits contact may provide you with an enrollment deadline worksheet that specifies your 30-day enrollment period and effective date for each benefit plan



# **Qualifying Life Event**

Family Status Change Examples	Employment Status Change Examples	
Marriage or divorce	Change in employment category or	
Birth, adoption, guardianship of a child	appointment percentage	
(60 days to enroll)	Disability	
Permanent Relocation		
Spouse or dependent child death		

- Life Events allow you to enroll in or change some benefits
- Enroll or make changes **within 30 days** following the event
- For more information, review the <u>Life Events web page</u> or reach out to your <u>Benefits Contact</u>

# **Eligible Dependents**

Most plans provide coverage for you and your eligible family members such as:

- Spouse
- Dependent children (until age 26\*) Includes stepchildren, adopted children, preadoption placement, legal wards that become your permanent ward before age 26 and grandchildren until your insured child (the grandchild's parent) turns age 18

If you need to cover your spouse and dependent children, you must enter their social security number when you enroll in your benefits electronically. Your spouse and dependent children will not be covered until you enter their social security number.

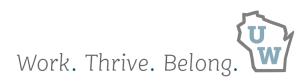
#### Review the **Dependent Eligibility Chart** for more details.

\*A child with a disability of long-standing duration dependent on you or the other parent for at least 50% support and maintenance, and incapable of self-support, may remain covered past age 26. \*Social Security numbers and dependent verification documents are required for all dependents.



# **Eligible Dependents**

- If you choose to cover your spouse or dependent children on your health, dental, vision, or accident insurance, you will need to upload appropriate documentation when you enroll to verify they are eligible.
  - Spouse Marriage certificate
  - Dependent children Birth certificates
  - Adoption Certificate of adoption or adoption decree
- Your spouse and dependent children will not be covered unless you upload documentation.



## Enrollment Process: review, decide, enroll

Employee Benefits website: wisconsin.edu/ohrwd/benefits/

#### REVIEW

- Review the <u>Employee Benefits</u> <u>website</u> for details about benefits and eligibility
- Review the Benefits Summary

#### **Employee Benefits**

General Employee Information	on Understand your options to make the most of your benefits!			
Health Insurance	>	Universities of Wisconsin offers a comprehensive benefits package to meet the diverse needs of our community.		
Dental & Vision Insurance	>	The Universities of Wisconsin contributes towards the cost of several benefit plans which is a valuable piece of your total rewards package. Other plans offer favorable group rates and convenient payroll deductions. Some health and life insurance premiums are deducted from salary on a pre-tax basis, saving you money.		
Life Insurance	>			
AD&D and Accident Insurance	>			
Disability and Income Continuation	>			
Spending & Savings Accounts	>			
Retirement Plans	>	General Employee		How to Choose a
Leave Benefits	>	Information		Health Plan
Other Benefits	>	For Current and New		For Employees Making their
Life Events	>	Employees Learn more about benefit		Health Insurance Plan Election

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## Enrollment Process: review, decide, enroll

### DECIDE

- Consider your needs and the needs of your spouse and dependents
- Review the <u>How to Choose</u> <u>Your Health Insurance Plan</u> <u>web page</u>
- Dental Comparison
- Vision Insurance Summary

Steps are listed below to help you select a **health insurance plan design** that fits your needs and select a **health insurance plan carrier** that will provide services in the county you would like to receive services in.

#### Step 1: Choose a Health Insurance

#### **Plan Design**

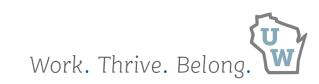
Below are resources to help you choose a plan design and brief descriptions of each plan design offered in the State Group Health Insurance Program. The plan designs offered in the State Group Health Insurance Program differ in monthly premiums, cost-sharing, and whether there is out-of-network coverage.

#### **RESOURCES:**

- Review each plan design listed in the left hand menu,
- Use the comparison for the appropriate plan year:

#### HOW TO CHOOSE YOUR HEALTH INSURANCE PLAN

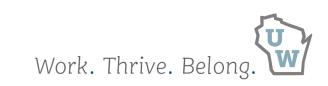
Step 1: Choose a Health Insurance Plan Design Step 2: Choose a Health Insurance Plan Carrier Step 3: Decide if you need Uniform Dental Benefits Step 4: Enroll



# Enrollment Process: review, decide, enroll

ENROLL

- Watch for an email that includes information about how to enroll in your benefits electronically.
- Then, choose your benefits, add your dependents and their social security numbers, and upload dependent documentation.
- You must enroll *within 30 days* of your hire/benefits eligibility date.
- If you miss your benefits enrollment period, your next opportunity to enroll will be in the fall for the following calendar year, unless you have a qualifying life event prior to then.











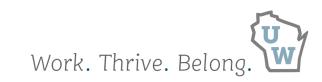
## Paid Leave – Short-Term Academic Staff

Paid leave is available for short-term academic staff expected to work

- At least 440 hours and
- At least one year

If eligible, paid leave is allocated on a fiscal year basis (July 1 – June 30)

Graduate assistants, employees-in-training, fellows, and scholars are not eligible for paid leave benefits.





# State Group Health Insurance

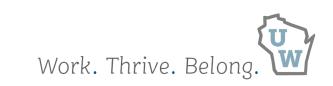
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## **State Group Health Insurance – Effective Date**

### Grad Assistants/Short-Term Academic Staff:

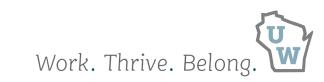
- Coverage is effective 1<sup>st</sup> of the month following hire or eligibility
- Employer contribution to your premium starts immediately

You have a 30-day enrollment period from your benefit eligibility date (usually date of hire). Your spouse and eligible dependent children may also be enrolled at this time.



## State Group Health Insurance – Plan Designs

Health Plan	Access Health Plan
Local county-based coverage, mainly in	Nationwide coverage
Wisconsin	Health Insurance Carrier: Dean Health Plan
Select from various health insurance carriers that use specific networks	<ul> <li>Provider Networks: Dean Health Plan and First Health</li> </ul>
Out-of-network coverage for urgent and emergency care only	<ul> <li>Lower out-of-pocket costs when in-network providers are used</li> </ul>
Lower monthly premium than the Access Plan	<ul> <li>Higher monthly premium than the Health Plan</li> </ul>

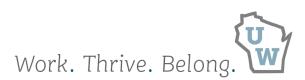


### **State Group Health Insurance – Plan Designs**

- All insurers offer the same uniform benefits
- All plan designs include pharmacy benefits, automatically
- All plan designs allow you to choose either individual or family coverage
- If you enroll in health insurance, you will receive a health insurance ID card, and a pharmacy benefits ID card

If you are married to another state/Universities of Wisconsin employee also eligible for State Group Health Insurance, you and your spouse may enroll in two individual policies **or** one family policy.

For more information: State Group Health Insurance web page

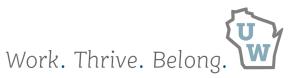


## State Group Health Insurance – Plan Designs

	Health Plan and Access Health Plan		
Deductible Individual / Family	\$250 / \$500*		
Copayment Primary Care / Specialty Care	\$15 / \$25 (does not go toward deductible)		
Coinsurance	After deductible: 10%		
Out-of-Pocket Limit Individual / Family	\$1,250 / \$2,500		
Preventive Services	\$0 (plan pays 100%)		
Emergency Room	\$75 copay then deductible then coinsurance		

\*After an individual within a family plan meets the \$250 deductible, medical services are covered at the appropriate coinsurance level for that individual

For more information: Comparison of Health & Pharmacy Benefits



# State Group Health Insurance

- How to Choose Your Health Insurance Plan web page provides the steps to help you choose:
  - Plan design
    - Use the Comparison of Health & Pharmacy Benefits
  - Health insurance carrier
    - Use the Health Plan Search to find out which health insurance carriers will cover services provided in the **county** that you will receive them in

#### Filters

Use the filter fields to narrow the results shown.

Where You Want to Get Care

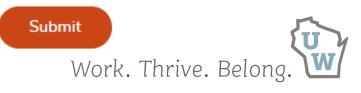
Type a county or state and then select it from the drop-down that appears. See a map of Wisconsin counties.

#### Coverage Area



#### Plan Type

- Any -	~
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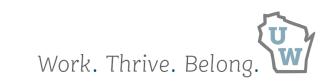


# State Group Health Insurance – Coverage (local versus nationwide)

Local County-based Coverage	Nationwide Coverage		
Choose the Health Plan	Choose the Access Plan		
<ul> <li>Choose a health plan carrier that provides coverage for the county you will receive services in using the Health Plan Search</li> <li>Reminder: Local county-based coverage includes coverage for out-of-network services for emergency and urgent care</li> </ul>	<ul> <li>Health Insurance Carrier: Dean Health Plan</li> <li>Provider Networks: Dean Health Plan and First Health</li> </ul>		

## State Group Health Insurance – Enrollment Options when Covered by Another Plan

- If the other plan is the State Group Health Insurance plan through a spouse or parent, you may not be covered on both plans. Therefore, you may:
  - Remain on your spouse's or parent's plan until no longer eligible OR
  - Enroll in your own plan through the Universities of Wisconsin





# Pharmacy Benefits

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### State Group Health Insurance – Pharmacy Benefits

	Out-of-Pocket Cost	Out-of-Pocket <u>Limit</u> Health Plan and Access Health Plan
Level 1	\$5 per fill	¢COO individual
Level 2	20% (up to \$50 maximum per fill)	\$600 individual \$1,200 family
Level 3	40% (up to \$150 maximum per fill + difference if dispense as written drug)	Does not apply to out-of-pocket limit; only applies to <b>federal</b>
<b>Level 4</b> (through preferred specialty pharmacy only)	\$50 per fill	maximum out-of-pocket limit (\$9,200 individual / \$18,400 family)

Find information about in-network pharmacies, mail order, and the formulary list on the Pharmacy Benefits web page





# **Dental Insurance**

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# **Dental Insurance – Plan Designs**

#### Uniform Dental Plan Preventive Dental Plan

You are eligible for **one** plan based on your State Group Health Insurance enrollment.

The plans provide the **same** benefits & networks.

- Diagnostic & Preventive Services
  - Cleanings
  - Sealants
  - X-rays
  - Fluoride Treatments (to age 19)
  - Fillings
- Non-surgical extractions
- Orthodontics: children
- Annual benefit maximum per person: \$1,000

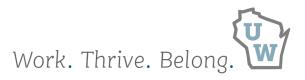
Select Plan Select Plus Plan

You may enroll in **one** plan.

The plans have **different** benefits levels & networks.

- Major Services
  - Crowns
  - Bridges
  - Root canals
  - Implants
  - Surgical extractions
- Deductibles and annual benefit maximums vary by plan
- Orthodontics: children & adults (Select Plus Plan only)
- No coverage for preventive or basic services

#### Benefits provided by: DELTA DENTAL

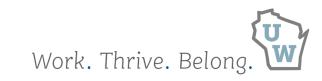


# **Dental Insurance- Plan Designs**

Uniform Dental Plan	Preventive Dental Plan		
<ul> <li>Eligible if you <b>enroll</b> in State Group Health Insurance</li> <li>Premium is less than Preventive Dental</li> </ul>	<ul> <li>Eligible if you waive State Group Health Insurance</li> <li>Premium is more than Uniform Dental</li> </ul>		

View the coverage comparison and premiums in your Benefits Summary.

Locate an in-network dentist: **Delta Dental website** 



# **Dental Insurance – Plan Comparison**

	Uniform Dental (SGH enrollees) and Preventive Dental (non-SGH enrollees)	Select Plan	Select Plus Plan
Provider Network	Delta Dental PPO and Delta Dental Premier	Delta Dental PPO	Delta Dental PPO and Delta Dental Premier
Benefit Maximum	\$1,000	\$1,000	\$2,500
Preventive services	100%	Not covered	Not covered
Non-surgical extractions	90%	Not covered	Not covered
Surgical extraction, root canal, crowns, bridges, periodontics (except maintenance)	Not Covered	50%	60% or 80%
Orthodontia	50% up to \$1,500 (up to age 19)	Not covered	50% up to \$1,500 (includes <b>adult</b> ortho)

For more information (including the monthly premium for each plan), review the **Dental Comparison Chart** 





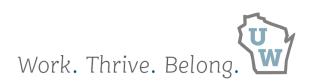
# **G** Vision Insurance

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# **Vision Insurance**

- If you are eligible for State Group Health Insurance, you are eligible for vision insurance
- Provides coverage for eye exam and materials (for example, glasses and contacts)
- Once enrolled, you must remain enrolled for the entire calendar year
- DeltaVision administers the vision insurance and uses EyeMed's Insight network
- A vision exam is covered by the State Group Health Insurance; however, materials are not covered.

Find a DeltaVision provider near you: **Find a DeltaVision/EyeMed provider** For more information: **Vision Insurance Plan Summary** 





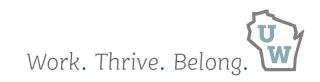


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# Life Insurance

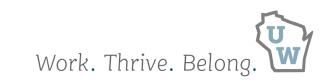
- You may enroll in the Individual & Family Life Insurance plan
- Coverage is guaranteed without proof of good health if you enroll when first eligible
- If you do not enroll when first eligible, you may be able to enroll with proof of good health (evidence of insurability) but approval is not guaranteed

For more information: Life Insurance Premiums



# Life Insurance

- Enroll in up to \$20,000 in employee coverage initially
- Enroll in up to \$10,000 spouse/domestic partner and \$5,000 child(ren) coverage
- Maximum coverage amounts are:
  - \$300,000 employee
  - \$150,000 spouse/domestic partner
  - \$25,000 child(ren)
- Annual increase opportunity each fall without proof of good health



# **Beneficiary Designations**

- Name a beneficiary for any plan that has a death benefit.
- Some plans allow you to name a beneficiary online (such as: Individual & Family Life Insurance). Others require a paper form.
- Mail paper beneficiary designation forms directly to the address on each form.
- If you do not name a beneficiary, benefits will be paid per standard sequence.
- Update as necessary, especially when you have a life event.

For more information: **Beneficiary Information web page** 





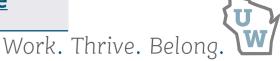
# Accidental Death & Dismemberment Insurance



## Accidental Death & Dismemberment Insurance

- Provides a benefit to you if you die because of an accident or if you suffer the loss of a limb, your eyesight, hearing, or speech.
- Enroll in individual or family coverage.
- Family coverage includes coverage for yourself, your spouse or domestic partner, and your eligible dependent children.
- May enroll, change or cancel coverage at any time.
- Coverage levels range from \$25,000 to \$500,000.
- Name a beneficiary if you enroll in this plan.

For more information: Accidental Death & Dismemberment Insurance web page





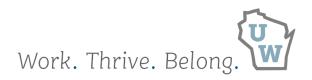
# **Accident Insurance**



## **Accident Insurance**

- Provides you a cash payment in the event of an injury due to an accident. Benefit amounts vary depending on the injury. Includes an accidental death & dismemberment benefit, identity theft resources, and a travel assist benefit.
  - Enroll in coverage for yourself, your spouse, and your dependent children.
  - Once you enroll, you must remain enrolled for the entire calendar year.
  - Name a beneficiary if you enroll in this plan.

For more information: Accident Insurance web page





# Flexible Spending Accounts (FSAs)



# Flexible Spending Accounts (FSA)

Type of Account	Contribution and Carryover Limits	Description
Health Care	\$3,200 per year \$640 carryover	<ul> <li>Help pay for eligible medical, dental, vision, and pharmacy benefit expenses not covered by insurance</li> <li>Expenses incurred by you, your spouse, child, or other qualifying tax dependent</li> </ul>
Dependent Day Care	Up to \$5,000 per year No carryover	<ul> <li>Help pay for eligible dependent day care expenses such as after-school care, babysitting, adult or child day care, and preschool</li> <li>Eligible dependents include a spouse, child, or other qualifying tax dependent</li> </ul>
Parking & Transit Accounts	\$315/month/account Unlimited carryover	<ul> <li>Help pay for work-related parking expenses (parking ramps, park-and-rides) and transit expenses (bus passes)</li> <li>May enroll or change your contribution at any time</li> </ul>

• Fellows, Trainees, Grad Interns/Trainee and Post-Doc Fellow/Trainees are not eligible for Flexible Spending Accounts.

• For the healthcare, and parking & transit accounts, there is a minimum annual contribution and carryover amount of \$50. Minimum carryover amount does not apply if you re-enroll for the next plan year.

Additional information: **Spending and Savings Accounts web page** 



# Retirement Plans

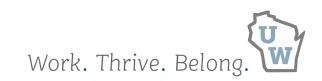


### Retirement Plans – UW 403(b) Supplemental Retirement Program

- UW 403(b) Supplemental Retirement Program (SRP)
  - Administered by Universities of Wisconsin
  - TIAA and Fidelity are the record keepers
  - May enroll or change contribution amount at any time
  - Contribute a flat dollar amount or percent of eligible earnings on a pre-tax basis, Roth aftertax basis, or combination of pre-tax and after-tax
  - Contributions made the first two paychecks of each month (24 paychecks per year)
  - No employer match
  - Offers an array of investment options including Target Date Funds, index and actively managed mutual funds, and a separate Guaranteed Fixed Rate Annuity
  - A self-directed brokerage option is available

### Retirement Plans – Wisconsin Deferred Compensation 457 Program

- Wisconsin Deferred Compensation (WDC) 457 Program
  - Administered by ETF
  - Empower is the record keeper
  - May enroll or change contribution amount at any time
  - Contribute a flat dollar amount or percent of eligible earnings on a pre-tax basis, Roth aftertax basis, or combination of pre-tax and after-tax
  - Contributions made the first two paychecks of each month (24 paychecks per year)
  - No employer match
  - Offers a wide range of investment options





# Other Benefits

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# **Well-Being Resources**

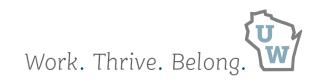
#### Employee Assistance Program (EAP)

- Provides you and your immediate family members (members of your household) free and confidential resources to address personal and work-related concerns
- May also assist with legal services, financial services, and work-life services
- Allows up to six in-person or virtual sessions per person per issue per year

#### Well Wisconsin Program

- Available to you and your spouse if you enroll in State Group Health Insurance
- Designed to help make you more aware of your current and future health risks
- Eligible to earn a taxable \$150 incentive by completing a health assessment, health check, and well-being activity by early October
- Participation is voluntary and confidential

For more information: <u>Well-Being Resources</u>



# **Other Benefits**

#### 529 College Savings Plan

- Allows you to save for K-12 education expenses and post-high school education
- Visit the Edvest website to learn more

#### Empathy Program

- Available to you if you enroll in Individual & Family Life Insurance or Accident Insurance
- Provides comprehensive bereavement support to assist beneficiaries following the loss of a loved one

#### Lifestyle Program

- Available to you if you enroll in Individual & Family Life Insurance
- Provides travel assistance services, legal services, beneficiary financial counseling, and legacy planning services

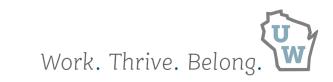
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# **Benefit Plan Resources**

- Universities of Wisconsin Employee Benefits website:
  - General Employee Information page
  - Benefits Summary
  - <u>Benefits Premiums web page</u>



# Questions



Universities of Wisconsin Employee Benefits website: <a href="http://www.wisconsin.edu/ohrwd/benefits/">www.wisconsin.edu/ohrwd/benefits/</a>

#### **Reminder: Enroll within 30 days!**

Questions: Reach out to your <u>benefits contact</u>

