UW System Fringe Benefits Advisory Committee Meeting May 9, 2014

780 Regent St., Room 123, 1:00pm – 2:30pm

Call-in information:

1 (855) 947-8255 US Toll Free; Passcode: 57275#

Blackboard Information (click on link below to see visual portion of meeting):

https://sas.elluminate.com/m.jnlp?sid=1304&password=M.6C945AF6C766B35A2B4BEC68BCD9E3

AGENDA

Agenda Item	Length	Presenter
Welcome and Introductions	5 minutes	Susan Fontana
Review and Approval of November 8, 2013 Minutes	5 minutes	Susan Fontana
FBAC Charge	20 minutes	Susan Fontana
Update on UPS Project	10 minutes	Margo Lessard
Overview of the Affordable Care Act	15 minutes	Beth Ritchie
Overview of the Implementation of the High Deductible Health Plans (HDHP) and Health Savings Accounts	20 minutes	Beth Ritchie
Legislative Update: Proposed Change to Use Five High Years of Earnings to Determine WRS Annuity	10 minutes	Beth Ritchie
Expansion of FBAC members to include all institutions	15 minutes	Sharon Fontana

Attachments:

November 8, 2013 FBAC Minutes - draft PowerPoint Slides Institution Participation on the FBAC – Historical FBAC Membership Roster

Fringe Benefit Advisory Committee

May 9, 2014

1:00 pm - 2:30 pm

Agenda

- Welcome and Introductions
- FBAC Charge
- Update on the UPS project
- Overview of the Affordable Care Act (ACA)
- Overview of Implementation of High Deductible Health Plans (HDHP) and Health Savings Account (HSA) for 2015
- Legislative Update
- Expansion of FBAC members to include all institutions



Welcome New Members!

- Lisa Goetsch, UW-Oshkosh
 - UW-Oshkosh has not had an FBAC representative since 2010
 - Classified
- Kelly Delaney-Klinger, UW-Whitewater
 - Replaces Steve Guo
 - Unclassified (9-month faculty)
- Lisa and Kelly will both serve 3-year terms

PURPOSE

The Committee is established to provide an advisory resource of knowledgeable faculty, academic and classified staff to assist in the analysis of existing fringe benefits, to propose possible changes in the fringe benefit package, and to secure those changes which can be accomplished through administrative action of the appropriate regulatory boards. It is intended to be a resource for the biennial budget working group on compensation, the President, the Chancellors, and Faculty, Academic Staff and Classified Staff Representatives.

The Committee will have the following specific functions:

- 1. To study existing fringe benefit programs and their impact on faculty, academic, and classified staff and on institutional programs and secure their implementation;
- 2. To help define the alternatives for fringe benefit improvements that should be considered by biennial budget working groups, the Secretary of the Office of State Employment Relations (OSER), and the President in the formulation of recommendations for biennial compensation plans;
- 3. To improve the quality of information available to faculty, academic and classified staff and to contribute to an understanding of their needs by soliciting the views of retirement counselors and by conducting or supporting surveys of employee opinion on fringe benefits;

- 4. To assist in evaluating legislation or other policy and procedural changes initiated by state agencies or policy makers, and to make recommendations on behalf of the System both in writing and through appearances before the Regents, regulatory boards and the legislative committee;
- 5. To monitor various studies conducted by executive and legislative agencies, to take positions on behalf of the System, and to advise the President and working groups on their implications.

MEMBERSHIP

The Committee will consist of nine people appointed by the President of the UW System from among institutional nominations of faculty, academic and classified employees. The normal term of each appointment will be three years, and the terms will be staggered to provide continuity to the function of the committee.



- Wis. Stat. §36.115 provides the authority to establish two new personnel system – one for UW-Madison and one for the UW System.
- In June 2013 the Legislature changed the original implementation date of July 1, 2013 to July 1, 2015.
- On April 23, 2014, the state's Joint Committee on Employment Relations (JCOER) approved both personnel systems.
- The "pause" in implementation is over!



Three points at JCOER Meeting

Approval of the systems...

- Will allow all UW System and UW-Madison employees to work under one set of guiding principles and procedures – not have 25% of employees follow rules established by an outside entity.
- Will establish a personnel system with the opportunity to more readily adapt to the unique needs and mission of the UW System.
- Will allow time for necessary training and education outreach to ensure compliance with the statutory implementation date of July 1, 2015.

Review of the principles that have guided work to date:

- Simplicity promotes efficient and effective policies and procedures.
- Consistency provides for fairness of policies and procedures.
- Coherence governs over simplicity and consistency so that the desire for one does not overtake the other in the development of new personnel systems. This ensures that different aspects of the new systems will work together toward fulfilling the purposes of a personnel system.

Implementation priority items

Operational policies in place for 12,000 classified staff members to University Staff

- University staff recruitment practices
- University staff grievances procedures
- University staff layoff procedures
- University staff compensation procedures
- Exempt staff to academic staff or limited appointee

Potential impact on benefits July 1, 2015

- Recommending one catastrophic leave program
- Recommending university staff use vacation from 1st day of employment
- Recommending university staff project employees keep leave banks if accept an appointment with an expectation of continued employment

- Historic opportunity to create and improve a personnel system
- Structure used to recruit, appoint, pay, provide benefits, and management personnel matters
- Governed by the UW Board of Regents
- A merit recruitment system
- The systems will be dynamic and flexible and build upon the foundations established by July 1, 2015

Overview of the Affordable Care Act (ACA)

- The Affordable Care Act is the nation's health reform law enacted in March 2010.
- Provisions already in force include: Coverage of dependents to age 26, no pre-existing condition limitations, 100% coverage of preventive services, minimum loss-ratios...
- Recently effective: Health Insurance Marketplace Notice

Coming Next: Employer Shared Responsibility Provisions (Play or Pay)

ACA: Health Insurance Marketplace

- The Health Insurance Marketplace (also called the Exchange) is a one-stop shop to compare health insurance plans offered by private insurance companies.
- The insurance plans in the Marketplace all offer the same core set of benefits (much like Uniform Benefits under the State Group Health Insurance program). These are called essential health benefits.
- The Marketplace lets people compare plans based on price, benefits, quality, and other features.
- If someone is not eligible for health insurance through their job or the coverage is not considered to be affordable, the Marketplace may provide other options for insurance. Depending on their income, they may be able to get a subsidy to help in paying the premium.

ACA:

Health Insurance Marketplace Notice

- Phase 1: Health Insurance Marketplace Notice
 - Complete / Ongoing
 - ➤ All current employees as of October 1, 2013 received the required notice.
 - ➤ Process was developed to ensure that all new employees hired on or after October 2, 2013, receive the Marketplace notice within 14 days of the employee's start date.
 - Notice must be provided to all employees regardless of their eligibility to enroll in the State Group Health Insurance program.

Phase 2: Employer Shared Responsibilities

- Evaluation of potential penalties for non-compliance is almost complete. Working with DOA Central Payroll, OSER, ETF, UWHC.
- Affordability: A health plan is considered to be affordable if the employee's cost for single coverage under the least costly offered plan does not exceed 9.5% of an eligible employee's household income.
- Eligibility: Under ACA, an eligible employee is defined as someone who typically works 30 hours a week or more. Employers may use a look-back period to establish hours worked for variable hour employees.

- Employees cannot be required to wait more than 90 days for coverage to become effective.
- Employer may be fined (fines waived for 2014) if an eligible employee purchases health insurance through the Marketplace and they are eligible for a subsidy because the employer did not offer the minimum value coverage to the employee at an affordable cost.



- Potential penalties under Employer Shared Responsibilities provisions of ACA
 - We are in compliance with minimum value requirements (plan must pay approx 60% of covered claims). No risk of penalty.
 - If qualifying coverage is offered to less than 95% of full-time employees and at least one employee purchases coverage through the Marketplace and receives a subsidy, the employer faces a penalty of:
 - \$2,000 per year per FTE (\$60 \$70 million for UWS). This is reduced to 70% of eligible employees in 2015. Risk of penalty is low. Initial analysis shows that 99% of "full-time" employees are eligible for State Group Health Insurance.
 - If plan is unaffordable to an employee or if the employee is not eligible for coverage and he or she purchases coverage through the Marketplace and receives a subsidy, the employer faces a penalty of:
 - \$3,000 per year incident/ \$250 per month.

- How to determine if coverage is affordable:
 - Two allowable ways to establish the employee's household income (called "safe harbors").
 - Can use different approach for different categories of employees as long as the employer is consistent.
 - Premium cost for single coverage cannot exceed:
 - 9.5 percent of rate of pay as of the first day of the coverage period (generally the first day of the plan year). Hourly rate x 130 hours (lowest rate of pay is \$7.25/hr. \$7.25 x 130 = \$94.25); or
 - 9.5 percent of the federal poverty level (FPL) for a single individual (\$11,490 divided by 9.5% = \$1,091.55 divided by 12 = \$100.79).

- Areas of concern for potential penalties:
 - Tracking variable hour employees
 - Use a look-back period of 3 12 months.
 - Recommendation is to use a 12-month look-back period (NOT the same as WRS look-back)
 - Conversion rates for lump sums to hourly wages
 - WRS-eligible LTEs (ACA requires affordable coverage within 90 days: state statute requires LTEs to be covered under the WRS for six months before becoming eligible for the employer share of premium).
 - Student employees by statute, not eligible for state group health insurance
 - Crafts workers by statute, employee pays full premium cost.

LTEs and the ACA

- Statutorily, LTEs must be covered under the WRS for six months before eligible for the employer share of premium.
- ▶ LTEs average hourly rate is \$14.42
- The UW has 1042 LTEs in 1430 jobs who are under the WRS.
- In 2012- 2013, 315 LTEs went under the WRS.
- UW could face a penalty if an LTE is:
 - Eligible under the ACA but not under the WRS;
 - Is in the waiting period for the employer contribution, he or she gets coverage through the Marketplace and gets a subsidy

Student Employees and the ACA

- Statutorily prohibited from offering state group health insurance.
- Federal work-study hours do not count when determining student's eligibility under ACA.
- In 2013, less than 70 student hourlies exceeded an average of 30 hours per week. Does not include students paid a lump sum.
- Students under age 26 may be covered under parent's health insurance.
- If a student employee is eligible under ACA, gets coverage through the Marketplace and gets a subsidy, UW could face a penalty.
- Risk of penalty is small.

Student Employees and the ACA

- Student Hourly Lump Sum Significant number of student employees are paid with lump sums.
 - 2013 3B payroll snapshot: 25,410 SH paychecks processed; 1440 were lump sums (5.6%)
 - Average monthly paychecks to SH = 20,730
 - Total SH paychecks in 2013: 539,111
 - Highest number on 2013 11A payroll (27,291); lowest in 2013 1A (9760).
 - 47,032 unique jobs.
 - Only 77 employees with SH appointment as well as other pay

High Deductible Health Plan (HDHP) and Health Savings Account (HSA)

2011 Wisconsin Act 10 requires that as of January 1, 2015, the Group Insurance Board (GIB) shall offer to all state employees the option of receiving health care coverage through a high-deductible health plan (HDHP) and the establishment of a health savings account (HSA).



High Deductible Health Plan (HDHP)

- HDHPs are generally defined as insurance policies with lower premiums and a higher deductible (the amount you have to pay before the insurer picks up any of the cost) than standard health insurance.
- Another term for these is "consumer-directed health plans" (CDHP).
- Federal rules require these plans to have deductibles of at least \$1,300 for an individual and \$2,600 for family coverage for 2015.
- Premiums are lower than standard insurance premiums by an average of \$1,000 to \$2,000 per year.

Health Savings Account (HSA)

- The HSA is portable and goes with the employee if the employee changes jobs.
- The maximum HSA annual contributions have not been set. (Federal law allows contributions up to \$3,300 for an individual and \$6,550 for a family in 2014.)
- It is anticipated that the State of WI employers will make tax-free contributions to their employees' HSAs and that there will be one HSA for all HDHPs.

Health Savings Account (HSA)

- Health savings accounts will accompany high-deductible plans.
 - An HSA is a tax-advantaged savings account that a member can open to pay for qualified medical expenses.
 Contributions to an HSA can be made by both a member and his or her employer, but the money belongs to the member.
 - The money invested in an HSA is tax-deductible, and any earnings are tax-deferred.
 - The member can withdraw funds tax-free and without penalty from the account if the funds are used to pay for qualified medical expenses.

HSA Plan Design

100%
Preventive
Care
Coverage

Health Savings Account
Funded by Employer and/or Employee.
Employee owns funds.
Unused funds roll over each year.

High Deductible Health Plan
Coverage takes effect once employee has
met the deductible. HSA can be used to
pay for the deductible.

100% coverage once the employee has meet the annual deductible *and* out-of-pocket maximum.

High Deductible Health Plan (HDHP and Health Savings Account (HSA)

- All participating Tier 1 health plans must offer an HDHP in addition to the current plan. It has not be determined if Tier 2 or Tier 3 plans will also be required to offer HDHP.
- HDHP structure to be determined by the GIB.
 Will likely be approved at its May 21, 2014 meeting.
- Funding levels of HSA and premium for HDHP to be determined by OSER Secretary this summer.

High Deductible Health Plan (HDHP and Health Savings Account (HSA)

- The HDHPs will have the same benefits as Uniform Benefits.
 - The annual deductible will need to be met before any benefits are payable (with exception of preventive care).
 - The deductible amount has not yet been established.
 - Under the HDHP, it is likely that the out-of-pocket maximums for medical and prescription services will be combined (will likely remain separate for the non-HDHP plans).
 - Employees may change to or from the HDHP annually during the ABE enrollment period.

High Deductible Health Plan (HDHP and Health Savings Account (HSA)

- Currently 29 states offer some type of HDHP arrangement:
 - 9 states: HDHP only
 - 6 states: HDHP+HRA
 - 14 states: HDHP+HSA
- Plan designs for the HDHP plans and, if applicable, the Health Reimbursement Account (HRA) or HSA vary state by state, though some common design themes have been observed.
- No Big Ten institutions offer HDHP / HSA to graduate assistants / short-term academic staff.

HDHP Design Objectives

- Cost neutral design financial impact to State –
 Cost neutral design includes value of entire HSA.
- Employee contribution differential desired between HMO and HDHP+HSA options that is significant enough to drive enrollment (target of 5% migration to HDHP+HSA).
- HSA funding set at levels such that combination of contribution levels, HDHP deductible levels, and HSA funding levels produce cost-neutral design compared to Uniform HMO.

HSA Plan Design

- The Health Savings Account (HSA) is not administered by the health plans.
- ETF hopes to have a single vendor to administer flexible savings accounts (ERA) and the HSA. Current WageWorks contract ends on 12/31/14.
- The money invested in an HSA is tax-deductible and any earnings are tax-deferred.
- An HSA is savings vehicle for employees to pay for IRSqualified medical expenses the HDHP doesn't cover.

HSA Plan Design

- LTEs will likely be eligible for the HDHP / HSA.
- Employees eligible for the graduate assistant/shortterm academic health insurance plan will likely not be eligible for the HDHP or the HSA.
- More information should be available after the May 21, 2014 Group Insurance Board meeting.
- High level training of system-wide benefits staff about HDHPs/HSAs began in April via monthly teleconference.
- ETF is contracting with a benefits consultant to assist in the education and communication efforts.

Proposal to Change WRS Annuity Calculation

- Rep. Stroebel (60th Assembly District) proposed two bills affected WRS retirement.
- Both failed in the Joint Survey Committee on April 8, 2014.
- 2013 AB 471 changes the formula method for calculating a WRS retirement benefit. Under the bill, a formula benefit would be based on the average of the five highest years of earnings.
- 2013 AB 470 increases the minimum retirement age for all employees by two years.

FBAC Members

- Discuss expanding FBAC membership to include all institutions
- Currently there are 7 FBAC members
 - Representing UW-Eau Claire, Milwaukee, OshKosh,
 Platteville, Stevens Point, Stout and Whitewater
- Two seats to fill to meet current 9-member committee
 - One seat for UW-Madison

- New Business?
- Issues for future meetings?
- Next meeting date



UW System Fringe Benefits Advisory Committee Meeting November 8, 2013 Minutes

FBAC Members Attending: Susan Fontana, Steve Guo, Tracey Hofer, Sharon Pink, Mary Kay Sankey

Absent: Fred Kolb

UWSA Staff Attending: Nicole Zimm, Beth Ritchie, LaDonna Steinert, Kara Webber

Agenda Item	Discussion							
Review of June 11, 2013 Minutes	Approved							
Review of the Committee Appointment Process	 Susan Fontana introduced the discussion on the FBAC appointment process by asking how current members were recruited to participate on the committee. It varied by institution. At UW-Milwaukee, the HR director is on the Economic Benefits Committee and, by way of that appointment, is UW-Milwaukee's FBAC rep. Sharon Pink is the Chair of the Academic Senate at UW-Platteville. Steve Guo was contacted by the HR Director at UW-Whitewater, Mary Kay Sankey was recommended by Wayne Argo when he retired from UW-Stout. An interest was expressed in utilizing the various governance groups to find nominees. In addition to a preference to include representatives from UW-LaCrosse, UW-OshKosh and UW-River Falls due to the length of time since they have been represented on the FBAC, we also need to have appointment types well represented. Tracy Hofer, from UW-Stevens Point, is currently the only 9-month academic staff and Mary Kay is the only classified employee on the FBAC. There was discussion about whether all institutions should be represented on the FBAC. The decision was to add the three members to the currently open seats. The full FBAC can then discuss whether to expand membership to all institutions. FBAC members and UWSA benefits staff will reach out to HR directors, governance groups and faculty senates to recruit members from LaCrosse, OshKosh and River Falls, preferably with one being classified and one being 12-month academic staff. The FBAC finalized and unanimously approved the recruitment process and application. 							
Annual Benefit Enrollment Update and Benefit	 Beth Ritchie provided the update on the fall enrollment period for 1/1/14 coverage. She reviewed the enrollment options available to employees during this period. Initial self-service enrollment problems with ERA and the annual increase option for individual and family life were resolved within a week. 							
Changes for 2014	 No changes to state group health insurance benefits except the addition of uniform dental. Health plans that offer any level of dental coverage (all plans but Standard Plan and SMP) will offer the same level of dental coverage in 2014. Provides basic dental coverage; does not cover crowns, 							

- implants, etc. Uniform Dental benefits are an increase in benefits or no material change for all insured employees except those currently enrolled in Gundersen, Health Traditions, Humana and WEA, for which this is a benefit reduction. Members of those four plans could enroll in EPIC Benefits+ for 2014 without the graduated dental benefit that was offered to all other enrollees during the fall enrollment.
- In 2014, one vendor will provide health risk assessments and biometric screenings regardless of the health plan. An incentive of \$150 is payable annually to the employee and adult dependents who complete HRA and biometric screening.
- VSP offered an open enrollment. For 2014, coverage is increasing for the
 contact lens allowance, the office visit copay is increasing and the KidsCare
 benefit was added. KidsCare provides additional coverage for replacement
 glasses and lenses for children. The premium is increasing for 2014 VSP's
 first premium increase in 6 years.
- EPIC Benefits+ increasing annual dental maximum from \$1000 to \$1500.
 Offered special enrollment with graduated dental benefits (\$750 in 2014, \$1000 in 2015, full benefit in 2016). No premium increase.
- Individual and Family Life is increasing the maximum benefit levels.
 Employee coverage maximum is increasing from \$200,000 to \$300,000; spouse/domestic partner from \$100,000 to \$150,000 and children from \$10,000 to \$25,000.
- WRS contributions increasing from 6.65% to 7%; from 7% to 7.75% for executives.
- There will be no TSA fee in 2014. Due to newly negotiated admin fees, the fee will be suspended indefinitely.

DOMA Impact

Imputed Income

Beth explained that the June 2013 U.S. Supreme Court decision in the United States v. Windsor struck down a key part of the federal Defense of Marriage Act (DOMA).

- As of September 16, 2013, the IRS issued guidance that same-sex couples
 who are legally married in any jurisdiction are recognized as spouses by the
 federal government. Prior to this date, an employee who covered a samesex spouse for state health insurance assumed additional tax liability based
 on the market value of the coverage provided to the spouse (imputed
 income) and the spouse's children. They are still subject to additional tax
 liability for state taxes.
 - UWSA Benefits worked with the service center to identify the approximately 2000 UWS employees who enrolled a same-sex domestic partner for health insurance.
 - These employees were contacted to determine if they were married to their same-sex domestic partner and to explain the change in imputed income for those who are legally married.
 - An on-going process is being developed.
 - Note: To enroll a same-sex spouse for health insurance and other benefits, the employee must still submit a Domestic Partner Affidavit to establish eligibility. This applies to all plans except for ERA. ERA is a federal program which recognizes same –sex spouses so marriage will create a 30-day enrollment or change in status period.
- Under the federal Family and Medical Leave Act, an employee may now

• FMLA	take FMLA to care for a seriously ill same-sex spouse but only if they reside in a state that recognizes same sex marriage. This means that if the employee lives in MN, IL or IA, they may take FMLA for their same-sex spouse, however, employees residing in WI cannot. O The FBAC discussed whether they should recommend that there be an employer policy to extend the FMLA rights to employees with same-sex spouses who reside in WI. O Because this right is not legally recognized in WI, if an employee used FMLA to care for a seriously-ill same-sex spouse and then requested FMLA for another qualifying event, the time taken to care for the same-sex spouse could not be applied to the employee's annual FMLA leave amount. Only 38 employees self-identified as having a same-sex spouse so the liability of extending the FMLA rights to WI residents is limited. O While Mary Kay expressed that all employees should be treated consistently, there was concern that this may too political at this time. UW Benefits Staff was asked to see what other states in similar situations are doing. It should be noted that WI is unique in
	being surrounded by states that allow same-sex marriage.
• Affordable Care Act	 UWSA Benefits office is leading a work group to implement the requirements of the Affordable Care Act. The work group includes legal counsel for OSER. Two phases have been identified: Phase 1: Employers were required to notify all current employees by October 1, 2013 of the availability of the Health Insurance Marketplace. This notice must go to all employees, including those not eligible for health insurance. Eighty thousand employees were identified and provided with the notice. The notice was sent electronically unless the employee does not access a computer as part of their daily duties. New employees must receive the notice within 10 days of their start date. A policy is being developed. Phase 2: Work with OSER and identify potential penalties for noncompliance for:

delayed to 2015.

 University Personnel System 	 University Personnel System project has been on hold since the legislature delayed implementation from July 1, 2013 to July 1, 2015. Work will begin again this winter. We anticipate that the FBAC will be involved in the review of benefits-related issues.
• Website	 The new UWSA Office of Human Resources and Workforce Diversity website was brought up on September 15. It included the system-wide resources for the Annual Benefit Enrollment period. The URL for the website is http://www.uwsa.edu/ohrwd/.
 Transition of Service Center to UWSA 	 Effective on December 1, 2013, the Service Center will report to the VP of Finance (Interim VP is Steve Wildeck) rather than to UW-Madison. The service center has a staff of about 100 and will relocate to 660 Regent St. in late spring or early summer. UWSA has hired a new payroll person due to the additional staff and will be hiring a new HR manager as a result of the transition.
Meeting Adjourned	2:40 p.m.



FBAC- CAMPUSES REPRESENTED BY YEAR

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	1994-95	1995-96	1996-97	1997-98	1998-99	1999-2000	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15
COLLEGES																					
EXTENSION	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	х	Х	Х	Х	Х	
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MILWAUKEE	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	х	Х	Х	Х	х	х
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RIVER FALLS	Х	Х	Х	Х	Х	Х	Х														
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WHITEWATER	Х	X	Х	Х	Х	Х										Х	Х	Х	Х	Х	Х

UW System Fringe Benefits Advisory Committee (FBAC) 2013-2014 Membership Roster

Members	Phone	Email	Term Expires
PROFESSOR SUSAN FONTANA (chair) UW-MILWAUKEE Cunningham Hall 531 PO Box 413 Milwaukee, WI 53201	(414) 229-2705	sfontana@uwm.edu	8/2014
PROFESSOR TRACY HOFER UW-STEVENS POINT Division of Business and Economics 469 CCC, 2100 Main Street Stevens Point, WI 54481-3897	(715) 346-3874	thofer@uwsp.edu	8/2014
DR. FREDRIC KOLB (vice chair) UW-EAU CLAIRE Economics Schneider 479, POB 4004 Eau Claire, WI 54702	(715) 836-3518	kolbfr@uwec.edu	8/2014
SHARON PINK UW-PLATTEVILLE 111 Warner Hall Platteville, WI 53818	(608) 342-1811	pink@uwplatt.edu	8/2015
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OPEN			8/2017
OPEN			8/2017

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