## Health Insurance Premium Payment at Layoff

Name (Last, First, Middle):		Employee ID:		
	Name (Last, First, Middle):			
Personal Email (check if preferred form of contact):				
Home Address (Street, City, State, Zip Code) (check if preferred form of contact):				
Institution:	Department:	Appointment End Date (Due to Layoff):		
Health Insurance at Layoff				
date (provided the premium is paid). Yo	u are then eligible for up to th Ist return this form with your	Is at the end of the month following your termination ree months of the employer contribution towards elections and pay your share of the premium during		
Note: Employees who were on an unpaid leave of absence, including a consecutive day furlough, immediately preceding layoff and have not met the return to work requirements as outlined in <u>Wis. Stat. § 40.02 (40)</u> are not eligible for an additional three months of employer contribution towards health insurance. Employees may receive the remainder of the three months of health insurance with employer share if only one to two months have been received while on an unpaid leave of absence or furlough.				
When your employment ends due to layoff, your sick leave hours will be converted to credits by multiplying your accumulated sick leave by your highest basic pay rate. If you have 15 years of continuous or adjusted continuous state service at layoff, you may be eligible for supplemental sick leave credits.				
Your health insurance premiums can be paid from sick leave credits until the earliest of the following events: 1. The credits are exhausted.				
<ol> <li>The first of the month following the begin date of other employment offering comparable health insurance coverage.</li> <li>Five years have elapsed from the date of layoff (no time restriction if you have 20 years of WRS creditable service); or</li> <li>Your death. Your insured surviving spouse and dependents can continue to use your remaining sick leave credits to pay for health insurance.</li> </ol>				
If you return to a sick leave eligible position with the Universities of Wisconsin or a State Agency within your reinstatement period (three years for Faculty / Academic Staff / Limited appointees, five years for University Staff), your unused sick leave will be restored (excludes supplemental credits).				
If you have at least 20 years of WRS service, you may continue to use sick leave credits until they are exhausted. If you have comparable health insurance, you may save your certified sick leave credits for use at a later date.				
	en en la companya de	the Wisconsin Retirement System (WRS).		
Benefits at layoff summary: <u>https://www.wisconsin.edu/ohrwd/benefits/download/empcha/layoff/uws42.pdf</u> If you are at least 55 years old (at least 50 years old for protective category employees) and are vested in the Wisconsin Retirement System (WRS), you can apply for an immediate WRS retirement benefit and have your sick leave converted to credits to help pay health insurance premiums in retirement.				
Please Complete: I am applying for a WRS retirement benefit upon layoff. Yes No				
•	is processed. Since you are re	partment of Employee Trust Funds (ETF) after your iring due to layoff, you are eligible for up to three nium.		
	employee health insurance e ate the form).	c <b>tion A</b> and sign and date the form). nding with the Universities of Wisconsin at the end of selections in <b>Sections A and B</b> and sign.		

## UNIVERSITIES I Health Insurance Premium Payment at Layoff

**Employees who are not vested in the Wisconsin Retirement System (WRS) and are above minimum retirement age.** Benefits at layoff summary: <u>https://www.wisconsin.edu/ohrwd/benefits/download/empcha/layoff/uws41.pdf</u>

If you are under minimum retirement age or are not vested in the Wisconsin Retirement System (WRS) at the time of layoff, you are eligible to use your converted sick leave to pay for health insurance until the earliest event as outlined in the Health Insurance at Layoff section. Complete **Section A and B** and sign.

## Section A: Select Payment Method While Eligible for Employer Contribution Towards Health Premium

You are eligible to receive the full employer contribution towards your health insurance for up to three months after your employment ends due to layoff provided you pay the employee portion of the premium and this form is returned with your elections completed.

Select your payment method:

Payroll Deduction (Pre-Tax) Personal Check/Cash (Post-Tax)

Credit Card (Post-Tax) Conv

Converted Sick Leave Credits

## Section B: Election to Use Converted Sick Leave Credits

If you are under minimum retirement age at layoff (or you are over minimum retirement age but are electing not to begin an immediate WRS annuity or are not vested), indicate below whether you would like to convert your sick leave credits to pay for your health insurance premium after the employer contribution towards the premium ends.

I elect to convert my accumulated sick leave hours to credits to pay for State Group Health Insurance premiums during my layoff:

Yes No

Once eligibility to use converted sick leave credits to pay for your health insurance premium ends or you exhaust your sick leave credits, you will be sent a COBRA/Continuation notice that will allow you to continue coverage for an additional 36 months through direct payment to your health insurance carrier.

Return this form at least 10 business days before your layoff date.

If this form is not returned your health insurance coverage will end at the end of the month following your layoff date.

Employee Signature:	Date:			
Return Completed Form To:				
All Institutions (except UW-Madison)	UW-Madison Employees			
UW-Shared Services, Service Operations	UW-Madison Office of Human Resources			
Attn: Benefits	Attn: Benefits			
Email: <a href="mailto:serviceoperations@support.wisconsin.edu">serviceoperations@support.wisconsin.edu</a>	Email: <u>benefits@ohr.wisc.edu</u>			
Fax: (608) 890-2327	Fax: (608) 265-1456			
Mail: 660 W. Washington Ave, Ste 201	Mail: 21 North Park St, Ste 5101			
Madison, WI 53703	Madison, WI 53715			
Phone: (888) 298-0141	Phone: (608) 262-5650			

For Employer Use			
Date Received:	Received By:	Ticket #:	