

# **2015 It's Your Choice**

(October 6, 2014 – October 31, 2014)

\*All new enrollments and changes will take effect January 1, 2015\*

The 2015 "It's Your Choice" materials will be distributed electronically. The DPI payroll offices have a limited number of printed materials that can be borrowed upon request. Central office, RLLL, and WEOP employees, contact [Jenn Stubbe](#) via email or by phone at (608) 266-3458 if you need to borrow printed materials or have questions.

WESP-DHH and WCBVI employees, please contact [Liz Barbarick](#) via email or by phone at (262) 728-7115 or at (608) 758-6164.

## **Health Fair Information**

Click on the link above to take you to the ETF website for dates and locations of health fairs around the state.

The Department of Natural Resources is holding a Health Fair in Madison on Wednesday, October 8 from 10 a.m. – 2 p.m. DPI employees will need to have their state issued IDs to get into GEF 2.

## **Health Insurance Enrollment**

"It's Your Choice" enrollment allows eligible and/or uninsured employees to enroll for health coverage effective January 1st of the following calendar year.

For employees who are currently insured, this is your opportunity to make the following changes to your health insurance effective January 1st of the following calendar year.

- Change from single to family or family to single coverage.
- Change health plan providers.
- Cancel coverage.
- Enroll or remove your adult dependent child(ren), domestic partner, or domestic partner's dependent child(ren) from your family policy.
- Complete a spouse-to-spouse transfer of insurances, if spouse is also a state employee. Otherwise, the spouse-to-spouse transfer can only be done during the calendar year if the spouse carrying the insurance is terminating their employment with the state.

If you are already enrolled in a health plan and do not wish to make any changes, you do not need to take any action and your coverage will continue.

There are important changes to health plans in 2015. Be sure to review these changes by reading the ["Important Changes for 2015"](#) on page 2, as well as individual [health plan descriptions](#) starting on page 38 of the 2015 "It's Your Choice 2015 Decision Guide."

### **2015 Premium Rates**

(Monthly premiums are taken pre-tax once per month on the A payroll)

	Single Rate	Family Rate
Tier – 1	\$92	\$230
Tier – 2	N/A	N/A
Tier – 3	\$267	\$666

*\*Note: WPS Standard Plan is the only Plan in Tier 3 for 2015\**

[2015 "It's Your Choice" Decision guide](#)

[2015 "It's Your Choice" Reference guide](#)

### **HDHP and HSA**

**NEW FOR 2015:** High Deductible Health Plan and Health Savings Account (HDHP and HSA) The certificate of coverage appears in the *It's Your Choice Reference Guide* in the Uniform Benefits section. [HDHP/HSA: New Insurance Program For 2015](#)

Beginning January 1, 2015, the State of Wisconsin Group Health Insurance Program will offer the option of a High Deductible Health Plan. In addition, those who enroll in an HDHP must enroll in a Health Savings Account.

An HDHP is a health plan that has a minimum annual deductible and a maximum annual out-of-pocket limit. An HDHP generally begins paying for health care costs once the annual deductible has been met (exception: preventative services mandated by federal law are covered at 100%, regardless of the deductible).

An HSA is a savings or investment account set up to pay for qualified health care expenses.

### **2015 HDHP Annual Deductibles**

<b><u>Coverage Level</u></b>	<b><u>Deductible Amount</u></b>
Single Plan	\$1,500
Family Plan	\$3,000

### **2015 Monthly Premiums for the HDHP Uniform Benefits**

	<b>Single Plan</b>	<b>Family Plan</b>
<b>Tier – 1</b>	\$32	\$81
<b>Tier – 2</b>	N/A	N/A
<b>Tier – 3</b>	\$207	\$517

*(Note: WPS Standard Plan is only plan in Tier 3 pricing for 2015)*

### **2015 Employer Contribution Amounts to HSA**

<b>Coverage Level</b>	<b>2015 Employer Contribution</b>
Family	\$340.00
Single	\$170.00

### **HSA Contribution Limits**

<b>Coverage Level</b>	<b>Annual Contribution Limit*</b>	<b>Additional Annual Catch-up</b>
Single Plan	\$3,350	\$1,000
Family Plan	\$6,650	\$1,000

*\*Contributions from all sources, such as employee and employer, count toward meeting the annual contribution limits*

A presentation on the HDHP and HSA Option and more information on the option are available [HERE](#).

Employees enrolling in the HDHP and HSA option MUST enroll using MyETF Benefits Online Health Insurance Enrollment System. Employees making changes to their current plan are strongly encouraged to use the MyETF Benefits Online Health Insurance Enrollment System for making health insurance changes. Paper health insurance applications will be accepted for the "It's Your Choice" period for employees unable to access the MyETF Benefits system.

[Group Health Insurance Application/Change form \(ET-2301\)](#)

All applications must be completed on-line through [myETFBenefits](#) or if paper, submitted to your payroll office by October 31, 2014.

How to log in to myETFBenefits:

1. Click on the secure [myETFBenefits](#) link.
2. Select the **Register Now** button if you have not already registered for online access. Follow the online screen instructions to set up a Wisconsin User ID and password. (The Wisconsin User ID is also referred to as a WAMS account; or if you work at the schools it is the same user ID and password you use to access FRED.)

Note: You will be asked for your ETF Member Id during the registration process. This is an 8-digit number found on your annual Statement of Benefits or on your Navitus pharmacy benefit card. If you are not covered under a state group health plan, contact your payroll office to get an ID prior to registering.

3. If you previously registered for online access, then follow the prompts for registered users.
4. **Need help?** Read the instructions and/or review the instructional webcast on the myETFBenefits log on page. Or you may call ETF at 1-877-533-5020 or (608) 266-3285. DO NOT CONTACT THE DPI IT HELP DESK.

If you forgot your WAMS password and/or log-on ID, use the following link to send a service request to the Dept of Administration Helpdesk requesting assistance. <https://on.wisconsin.gov/WAMS/FormattedEmail>

Employees at the Wisconsin School for the Deaf or the Wisconsin School for the Blind and Visually Impaired, instructions for setting up a WAMS account is available on each school's intranet. If you are having difficulties in establishing your WAMS account or accessing FRED or MyETFBenefits please contact your IT Help Desk at your specific school for assistance.

## **VSP Vision Insurance Open Enrollment**

VSP Website: [vsp.com/go/stateofwiemployees](http://vsp.com/go/stateofwiemployees)

VSP Vision Service Plan is an optional employee paid vision insurance for employees and their spouse/dependents. The program provides an affordable, easy-to-use benefit for you and your eligible dependents. This plan provides comprehensive vision care through VSP doctors. For more information see the [VSP Vision Care Brochure](#).

If you are already enrolled in this plan and do not wish to make changes to your coverage, you do not need to take any action and your coverage will continue. If you are not currently enrolled in VSP, you may enroll during "It's Your Choice" enrollment period.

VSP will be mailing informational material on enrolling or making changes to your coverage to your home.

### **VSP 2015 Monthly Premium Rates (pre-tax)**

<b>Type of Plan</b>	<b>Monthly Premium</b>
Single	\$6.54
Insured/Spouse	\$13.08
Insured/Children	\$14.73
Family	\$23.54

You may enroll, change or cancel your coverage by October 31, 2014 by:

- Internet enrollment: <http://vsp.com/go/stateofwiemployees>
- Telephone enrollment: 1-800-400-4569 Mon - Fri 7 AM to 9 PM
- Completing a paper enrollment form included with the mailing from VSP. If you no longer have the special enrollment form, you will need to enroll by internet or by telephone.

If you are enrolling a domestic partner and/or their eligible dependents for the first time, the ETF Affidavit of Domestic Partnership form will be sufficient proof of relationship. More information on domestic partners and qualifying dependents is provided below.

## **Dental Insurances**

### **Dental Plan Comparison**

### **Anthem DentalBlue Insurance**

Website: [www.anthem.com](http://www.anthem.com)

Anthem DentalBlue is an optional employee paid dental insurance for employees and their spouse/dependents. It provides the option of supplemental, HMO or PPO coverage. For more information see the [Anthem DentalBlue Dental Plan brochure](#).

If you are already enrolled in this plan and do not wish to make changes to your coverage, you do not need to take any action and your coverage will continue.

If you are not currently enrolled in Anthem, you may enroll during the "It's Your Choice" enrollment period.

For 2015 the Supplemental offers increased coverage. Dentacare HMO and Preferred PPO have decreased premiums. Please review the brochure for details.

**Anthem DentalBlue Monthly Premium Rates (pre-tax)**

	<u>Dentacare HMO</u>	<u>Preferred PPO</u>	<u>Supplemental</u>
Employee	\$23.27 / \$28.78	\$23.51	\$18.08
Employee + 1	\$46.55 / \$57.56	\$47.01	\$36.17
Family	\$74.47 / \$92.10	\$77.56	\$54.28
	Available in: Region 1 / Region 2	Available in: Region 1	Available in: Region 1

\*Region 1 includes: Milwaukee, Waukesha, Ozaukee, Washington, Racine & Kenosha Counties

\*Region 2 includes: All counties not listed in Region 1.

You may contact Anthem Customer Service at 866-511-4476 or by email at [StateOfWIEmpsDnEnrollment@Anthem.com](mailto:StateOfWIEmpsDnEnrollment@Anthem.com) for open enrollment inquiries.

You may enroll, change or cancel your coverage by printing and completing the [Group DentalBlue Application](#) and submitting it to the DPI payroll office by October 31, 2014.

If you are enrolling a domestic partner and/or their eligible dependents for the first time, the ETF Affidavit of Domestic Partnership form will be sufficient proof of relationship. More information on domestic partners and qualifying dependents is found later in this communication.

**EPIC Dental Wisconsin Insurance**

Website: <http://www.epiclif.com/wi-state-employees/>

Dental Wisconsin is an optional employee paid dental insurance for employees and their spouse/dependents. It provides the option of either a Select Plan (supplemental-any dentist/no preventive) or Preferred Provider Plan (Delta PPO dentist with preventive) coverage. For more information see the [Dental Wisconsin Brochure](#).

If you are already enrolled in this plan and do not wish to make changes to your coverage, you do not need to take any action and your coverage will continue. During the "It's Your Choice" period you may enroll, cancel your coverage or make changes by printing, completing the [Dental Wisconsin application](#) and submitting it to the DPI payroll office by October 31, 2014.

### **Dental Wisconsin Monthly Premium rates (pre-tax)**

	<b>Preferred Provider</b>	<b>Dental Select (supplemental)</b>
Employee	\$25.49	\$20.52
Employee/Spouse	\$53.96	\$42.19
Employee/Children	\$60.34	\$48.68
Family	\$91.21	\$71.59

You may contact EPIC at 800-520-5750 for questions.

If you are enrolling a domestic partner and/or their eligible dependents for the first time, the ETF Affidavit of Domestic Partnership form will be sufficient proof of relationship. More information on domestic partners and qualifying dependents is provided below.

### **EPIC Benefits + Insurance Special Enrollment**

Website: <http://www.epiclif.com/wi-state-employees/>

The EPIC Benefits+ plan is an optional employee paid supplemental plan from EPIC that combines hospital and surgery benefits, dental, accidental death and dismemberment insurance and vision. You may select this plan with either a vision discount or a vision insurance add-on. For more information refer to the [EPIC Benefits+ brochure](#).

If you are already enrolled in this plan, you do not need to take any action and your coverage will continue.

If you are not currently enrolled in Benefits +, you may enroll during the "Special" enrollment period that is being offered this year. Review the brochure carefully. There is a 12 month waiting period from the effective date for benefits for orthodontic services and supplies.

You may change, cancel or enroll in coverage by printing and completing the [EPIC Enrollment form](#) and submitting it to the DPI payroll office by October 31, 2014.

## EPIC Benefits + Monthly Premium Rates (pre-tax)

	<b>Without Vision Insurance</b>	<b>With Vision Insurance</b>
<b>Employee</b>	\$19.77	\$24.02
<b>Employee/Spouse</b>	\$39.54	\$47.04
<b>Employee/Child</b>	\$39.54	\$47.04
<b>Family</b>	\$59.31	\$70.34

You may contact EPIC at 800-520-5750 for questions.

### [Aflac Accidental Injury Insurance](#)

Aflac pays cash benefits directly to you (unless assigned) when you're injured. Learn more by visiting the Aflac website: [https://enrollment.aflac.com/AccountSites/S\\_U/StateofWI/Homepage.aspx](https://enrollment.aflac.com/AccountSites/S_U/StateofWI/Homepage.aspx)

### [Employee Reimbursement Accounts \(ERA\)](#)

**\*\*The Employee Reimbursement Accounts Program will have a new third-party administrator for 2015: Total Administrative Services Corporation (TASC).**

An employee must enroll or re-enroll in this program every year. Employees working the full calendar year will have 26 pay periods for deductions. School year employees at the WSD and WSBVI will have 20 pay periods for deductions.

The [ERA Program](#) is an optional benefit that allows you to set aside pre-tax income to pay for eligible IRS approved expenses. These accounts are known as Flexible Spending Accounts (FSAs). There is a health care FSA and a dependent care FSA. The HSA and a new Limited Purpose Health Care Flexible Spending Account (LPFSA), which are related to the HDHP, are also administered through TASC. **If you enroll in more than one of the FSA options, you will use the same card to receive your reimbursements or make purchases.**

A "Health Care FSA Account" can be used for eligible medical expenses incurred by you and your dependents up to \$2,500 that are not covered by insurance.

A "Dependent Care FSA" Account can be used to pay for eligible dependent care expenses incurred up to \$5,000.

**New [Carryover for 2015](#) Plan Year.** A new carryover provision will be implemented for the 2015 plan year. Up to \$500 of health care FSA balances



remaining at the end of the 2015 run-out period can be carried over into the next plan year (2016), reducing the risk of forfeiting unused dollars.

***Beware:*** Federal tax regulations do not allow the use of flexible benefit plans to pay for medical expenses or for dependent care of a domestic partner's child on a pre-tax basis unless the domestic partner, partner's child, or your adult child (age 19 to 26) qualifies under the Internal Revenue Code as the employee's tax dependent at the time the expense was incurred.

Consult the guidelines in [IRS Publication 501](#) for "qualifying relative", which is available at the web site of the Internal Revenue Service.

### **[Commuter Benefits](#)**

**This benefit will NO LONGER BE ADMINISTERED through WageWorks.**

Beginning in 2015, commuter benefits will be administered by TASC. Please enroll directly through [TASC](#).

Employees can enroll in [commuter benefits](#) at any time. The commuter benefits program can be used for parking, vanpool and public transit costs.

This benefit will be administered completely different with TASC. It will work much like the dependent care FSA, except changes can be made throughout the year. Employees will make an annual election and the money must be in your account before it can be used. If you are enrolled in any of the FSA options, you will use the same card for commuter benefits. TASC will not make payments on your behalf.

### **[Employee Trust Funds - Domestic Partnership](#)**

If you already have an established Domestic Partnership (DP) with the Department of Employee Trust Funds (ETF), the "It's Your Choice" enrollment period is your opportunity to add or drop your eligible DP or the DP's children to/from your policy. This opportunity allows employees to avoid imputed income for these non-tax dependents.

If you have not established a DP with ETF, you can do so at anytime if they can attest to all of the requirements on the [ETF Affidavit of Domestic Partnership](#).

The employee must print, complete and mail the original notarized affidavit to ETF at the address shown on the form. Keep a copy of the affidavit. ETF will send you an acknowledgement letter. Once you receive the acknowledgement letter you have 30

days from the date ETF received your affidavit to add the DP and/or DP's children to your insurances.

If the domestic partners meet the requirements on a notarized ETF affidavit, the health insurance coverage for the DP of the employee or annuitant and the DP's children will be effective the date the completed affidavit is received by ETF.

For State Group Life insurance and other miscellaneous insurances the coverage effective date will be on the first day of the calendar month that begins on/or after the date the application is received by DPI payroll office, provided an Affidavit of Domestic Partnership is on file at ETF. You must use paper applications for these insurances. Copies of the affidavit and ETF acknowledgement letter must be included with the applications if not already provided.

For health insurance we prefer you use the MyETFBenefits system to add your domestic partner and the DP's children. You have 30 days from the date ETF received the affidavit to submit the transactions in MyETFBenefits. You may submit your transactions before receiving the acknowledgement letter, but the transaction will be on hold until you provide the letter to DPI payroll.

Steps to follow to add a Domestic Partner:

1. Provide copies of the affidavit and acknowledgement letter to the DPI payroll office. You may fax them to our confidential line (608) 266-5856.
2. In the MyETFBenefits system, on the "MyInfo" screen, update your Marital Status and add information on Domestic Partner. Scroll to bottom of screen and click on the edit button. Make your changes, submit and confirm.
3. Then go to the "Health" screen. If you have single coverage change to family coverage, click on the edit button next to your health plan information to change the coverage type, submit and confirm.
4. Next, on the "Health" screen you must select Add Dependent to add your DP to your health plan. Make your changes, submit and confirm.
5. The system will not allow you to add DP's children until the above transactions are approved by the DPI payroll office. The transactions will not be approved until the DPI payroll office receives copies of the affidavit and acknowledgement letter.

You will need to check back in a couple of days to see if the transactions are approved.