

**It's Your Choice:  
Benefits That Fit Your Lifestyle**



# **2020 Health Benefits Decision Guide**

Local High Deductible Health Plan  
Insurance for Employees and Retirees

ET-2169 (9/3/2019)  
PO7, PO17



# About This Guide

This guide provides a high-level overview of benefits available to you for 2020; open enrollment is September 30 - October 25, 2019. For complete information, visit [etf.wi.gov/benefits-by-employer](http://etf.wi.gov/benefits-by-employer)

## What's Changing in 2020

### 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.

#### No Longer Available

- Security Health Plan - Central
- Security Health Plan - Valley

If you are currently enrolled in one of the health plans above, you must enroll in a new plan during open enrollment. If you do not, you will not have coverage as of January 1, 2020. Find health plans available in your area on pages 9-12. Provider directories are available on our website.

#### Service Area Changes

Dean Health Plan - Prevea360 will expand to include the following western counties: Barron, Buffalo, Chippewa, Dunn, Eau Claire and Pepin.

WEA Trust - East will expand to include the following counties: Langlade, Lincoln, Oneida, Price, Taylor and Vilas. WEA Trust - East will also offer limited provider availability in Forest County.

Network Health will expand to include Marathon County.

The State Maintenance Plan (SMP) will no longer be available in the following counties: Buffalo, Marinette, Polk, Shawano, St. Croix, Waupaca, Waushara and Wood.

SMP will continue to be offered in the following counties: Florence, Forest, Pepin, Pierce and Rusk. Make sure your providers are in-network or select another plan.

### New Enrollment Option for Retirees Families with Medicare & Non-Medicare Members

Are there people on your health insurance that are not enrolled in Medicare? Now, when you enroll in Medicare Advantage or Medicare Plus, you can enroll in a second health plan for your non-Medicare members.

Why make a change? This option may help you save on monthly premiums, since both plans have low premiums. To see if this could save you money, turn to pages 14-15.

### New Life Event for Retirees

#### Becoming Medicare Eligible or Ineligible

When you or someone on your health insurance becomes eligible for Medicare or no longer eligible, you can now choose a new health plan or plan design.

You must file an application within 30 days of the Medicare coverage change. This is **not** an opportunity to enroll.

### Uniform Dental Benefits

New benefits include:

- No-cost periodontal maintenance
- Pulp vitality test (helps a dentist determine a treatment plan)
- Caries assessments (helps predict future dental health)

## Supplemental Dental

Three new plans are available. The Preventive Plan offers the same benefits as Uniform Dental, with coverage for basic procedures such as cleanings, fluoride treatment, fillings and orthodontics. The Select plan and Select Plus plan cover items such as crowns, bridges, dentures, implants and root canals. Learn more on pages 16-18.

Available to:

- Employees, if your employer offers it
- All retirees

## Pharmacy Benefits

### Vaccines at Pharmacies Covered

Vaccines will be covered at in-network retail pharmacies. Find an in-network pharmacy at [etf.benefits.navitus.com](http://etf.benefits.navitus.com) (no login required).

### New Medical Benefit

Bariatric surgery and weight loss services will be provided for participants with a body mass index (BMI) of 35 or greater, or as determined by your health plan.

# 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.

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- 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.

Questions?



Employees: Contact your payroll/benefits office.

Retirees: Contact ETF at 1-877-533-5020.

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

- Follow the steps in this guide**  
This guide was designed for you. There are steps and guidance throughout.

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- Are you a retiree with Medicare and non-Medicare members on your health insurance?**  
  
Pick the Medicare health plan first.
  - If Medicare Advantage or Medicare Plus is selected, then pick a second plan for your non-Medicare members.
  - If Health Plan Medicare is selected, your non-Medicare members will have the same health plan, just the non-Medicare version.

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- Enroll**  
Employees: Contact your payroll/benefits office.  
  
Retirees: Complete a paper application or go to our website to learn how to enroll.



For Participants without Medicare

# 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


## Quick Comparison


A high-level overview of the available plan designs. See the next page for a breakdown of costs when you visit the doctor, have labs drawn or fill a prescription

	Local High Deductible Health Plan	Local Access High Deductible Health Plan
Monthly Cost (Premium)	\$\$\$\$	\$\$\$\$
Cost Per Visit	\$\$\$\$	\$\$\$\$
Provider Availability	Local	Nationwide
Nationwide Pharmacies	✓	✓
Out-of-Network Benefits	Emergency and urgent care	✓
Available Health Plan(s)	9 plans	WEA Trust

# Breakdown of Your Medical Costs

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

	Local High Deductible Health Plan	Local Access High Deductible Health Plan 
<b>Annual Medical Deductible</b> Individual / Family Counts toward out-of-pocket limit (OOPL)	\$1,500 / \$3,000 Deductible must be met before coverage begins Families: Must meet full family deductible	
<b>Annual Medical Out-of-Pocket Limit (OOPL)</b> Individual / Family The most you will pay in a year for covered medical services	\$2,500 / \$5,000	
<b>Medical Coinsurance</b> Applies to services beyond the office visit copay such as X-rays and lab work	100% until deductible met After deductible: 10%	
<b>Preventive Services</b> See <a href="https://healthcare.gov/preventive-care-benefits">healthcare.gov/preventive-care-benefits</a>	\$0 Plan pays 100%	
<b>Telehealth Visit</b>	100% until deductible met After deductible: \$0	
<b>Primary Care Office Visit</b>	100% until deductible met After deductible: \$15 copay	
<b>Specialty Provider Office Visit</b>	100% until deductible met After deductible: \$25 copay	
<b>Urgent Care</b>	100% until deductible met After deductible: \$25 copay	
<b>Emergency Room</b> Copay waived if admitted to inpatient directly from emergency room or for observation for 24 hours or longer	100% until deductible met After deductible: \$75 copay, coinsurance applies to services beyond the copay	

 The Local Access HDHP offers 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](http://etf.benefits.navitus.com) to find an in-network pharmacy near you. In-network pharmacies are available nationwide. Both plan designs have the same pharmacy benefits.

<b>Prescription Deductible</b> (Individual / Family)	Combined medical & pharmacy: \$1,500 / \$3,000  You pay 100% of most pharmacy costs until deductible is met <sup>1</sup>
<b>Prescription Copay / Coinsurance</b>	
<b>Level 1</b>	After deductible: \$5 or less
<b>Level 2</b>	After deductible: 20% (\$50 max)
<b>Level 3</b>	After deductible: 40% (\$150 max) <sup>2</sup>
<b>Level 4</b>	After deductible: \$50 <sup>3</sup>
<b>Preventive</b> (As federally required)	\$0 - Plan pays 100%
<b>Prescription Out-Of-Pocket Limit</b>	
<b>Levels 1 &amp; 2</b> (Individual / Family)	\$600 / \$1,200
<b>Level 3</b> (Individual / Family)	\$6,850 / \$13,700
<b>Level 4</b> (Individual / Family)	\$1,200 / \$2,400

<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.

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



## Mail-Order Pharmacy

Why use a mail-order pharmacy?

- **You’ll pay less**  
Only 2 copays for a 3-month supply
- **It’s safe and confidential**  
Your medications are delivered in a confidential and weather-resistant package
- **You’re supported**  
Have a question about your medication?  
Pharmacists are available 24/7

For more information, visit [serve-you-rx.com/navitus](http://serve-you-rx.com/navitus) or call **1-800-481-4940**



## Vaccines at Pharmacies

Get vaccinated at any in-network pharmacy using your pharmacy benefit.

- **How much does it cost?** \$0, it’s free!
- **Which vaccines are available?** Influenza, Pneumonia, Tetanus, Hepatitis, Shingles, Measles, Mumps, Human Papillomavirus (HPV), Pertussis, Varicella, Meningitis

Just show your Navitus card at the pharmacy. If you prefer, you can still get vaccinated at your doctor’s office using your medical benefit.





For Retirees with Medicare  
**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 your health plan will help pay for services not covered by Medicare

# Quick Comparison

A high-level overview of the available plan designs. See the next page for a breakdown of costs when you visit the doctor, have labs drawn or fill a prescription.

	Medicare Advantage	Medicare Plus	Health Plan Medicare
Monthly Cost (Premium)	\$\$\$	\$\$\$	\$\$\$
Provider Availability (Provider must accept Medicare payments)	Nationwide	Worldwide	Local
Nationwide Pharmacies	✓	✓	✓
Available Health Plan(s)	UnitedHealthcare	WEA Trust	9 plans
Helps Pay for Services Not Covered by Medicare	✓ Also helps pay for: hearing aids, routine hearing and vision exams, durable medical equipment	None	✓ Also helps pay for: hearing aids, routine hearing and vision exams, durable medical equipment
Covered Length of Stay at a Skilled Nursing Facility	120 days at any facility	120 days at a Medicare-approved facility 30 days at a facility not approved by Medicare	120 days at any facility

# Breakdown of Your Medical Costs

	Medicare Advantage & Health Plan Medicare	Medicare Plus
<b>Annual Medical Deductible</b>	\$0	\$0
<b>Annual Medical Coinsurance</b>	\$0*	\$0*
<b>Annual Medical Out-of-Pocket Limit (OOPL)</b>	None*	None*
<b>Outpatient illness/injury related services</b>	\$0	\$0
<b>Emergency Room Copay</b>	\$60 copay (Waived if admitted as an inpatient directly from the emergency room or for observation for 24 hours or longer.)	\$0
<b>Licensed Skilled Nursing Facility</b> Medicare-covered services in a Medicare-approved facility	\$0 for the first 120 days, 100% after 120 days <b>3-day hospital stay required</b> for Health Plan Medicare. (Not required for Medicare Advantage)	\$0 for the first 120 days, 100% after 120 days <b>Requires a 3-day hospital stay</b>
<b>Licensed Skilled Nursing Facility</b> (Non-Medicare approved facility) If admitted within 24 hours following a hospital stay	\$0 for the first 120 days, 100% after 120 days	\$0 for eligible expenses for the first 30 days, 100% after 30 days
<b>Hospital</b> Semiprivate room and board, and miscellaneous hospital services and supplies such as drugs, X-rays, lab tests and operating room	\$0 Must be medically necessary and in-network unless emergency	\$0 for first 90 days and up to 150 days with “lifetime reserve” “Lifetime reserve” days are a one-time additional 60 days of hospital coverage paid by Medicare Once “lifetime reserve” is exhausted, you pay 100% after 90 days
<b>Medical Supplies</b> Durable medical equipment, durable diabetic equipment and related supplies	<b>Medicare-approved supplies:</b> 20% up to \$500 OOPL per individual, after OOPL: \$0 <b>Supplies NOT covered by Medicare:</b> 20% up to \$500 OOPL per individual, after OOPL: \$0	<b>Medicare-approved supplies:</b> \$0 <b>Supplies NOT covered by Medicare:</b> 100%
<b>Routine Hearing Exam</b>	\$0	100%
<b>Hearing Exam for Illness or Disease</b>	\$0	\$0



	Medicare Advantage & Health Plan Medicare	Medicare Plus
<b>Hearing Aid</b> Per ear, every 3 years	20% until plan pays \$1,000, then 100% of the costs	100%
<b>Home Health Care</b> If receiving care under a doctor for part-time skilled nursing care, part-time home health aide care, physical therapy, occupational therapy, speech-language pathology services, medical social services	<p><b>Medicare pays:</b> 100% for visits considered medically necessary by Medicare, generally fewer than 7 days a week, less than 8 hours a day and 28 or fewer hours per week for up to 21 days</p> <p><b>Plan pays:</b> 100% for 50 visits per year, plan may approve an additional 50 visits</p> <p><b>Medicare Advantage</b> has no visit limits</p> <p><b>You pay:</b> Full costs of visits not covered by Medicare and the plan beyond the 50 (or if approved, 100) visits per year</p>	<p><b>Medicare pays:</b> 100% for visits considered medically necessary by Medicare, generally fewer than 7 days a week, less than 8 hours a day and 28 or fewer hours per week for up to 21 days</p> <p><b>Plan pays:</b> 100% for up to 365 visits per year</p> <p><b>You pay:</b> Full costs of visits beyond 365 visits per year</p>

\*Different for medical supplies and hearing aids.

## Breakdown of Your Pharmacy Costs

You must use an in-network pharmacy. Visit [members.navitus.com](http://members.navitus.com) to find an in-network pharmacy near you. In-network pharmacies are available nationwide. All Medicare plan designs have the same pharmacy benefits.

Prescription Deductible	None
<b>Prescription Copay / Coinsurance</b>	
<b>Level 1</b>	\$5
<b>Level 2</b>	20% (\$50 max)
<b>Level 3</b>	40% (\$150 max)
<b>Level 4</b>	\$50*
<b>Preventive</b> As federally required	\$0 - Plan pays 100%
<b>Prescription Out-Of-Pocket Limit</b>	
<b>Levels 1 &amp; 2</b> (Individual / Family)	\$600 / \$1,200
<b>Level 3</b> (Individual / Family)	\$6,850 / \$13,700
<b>Level 4</b> (Individual / Family)	\$1,200 / \$2,400

\*Price if you fill at Lumicera specialty pharmacy or UW Health Specialty Pharmacies. If you do not fill at one of these pharmacies, you will pay 40% (\$200 max). The amounts paid will not apply to the Level 4 OOPL, rather, to a limit of \$6,850 individual / \$13,700 family.



For all participants

## Step 2: Choose a Health Plan

Complete this step if you selected the Local Health Plan or Health Plan Medicare. Skip the map and turn to pages 13-15 for rates if you selected the Local Access Plan, Medicare Advantage or Medicare Plus.

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\*

### Brown

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

\*limited provider availability

## 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
- State Maintenance Plan (SMP) by WEA Trust

## Fond du Lac

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

## Forest

- HealthPartners Health Plan\*
- State Maintenance Plan (SMP) by WEA Trust
- WEA Trust - East\*

## Grant

- Dean Health Plan
- HealthPartners Health Plan
- 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

## 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
- 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
- Network Health
- 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
- WEA Trust - East

## Ozaukee

- Network Health
- WEA Trust - East

## Pepin

- Dean Health Plan - Prevea360\*
- HealthPartners Health Plan
- State Maintenance Plan (SMP) by WEA Trust
- WEA Trust West - Chippewa Valley
- WEA Trust West - Mayo Clinic Health System\*

## Pierce

- HealthPartners Health Plan
- State Maintenance Plan (SMP) by WEA Trust
- 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

## Rusk

- HealthPartners Health Plan
- State Maintenance Plan (SMP) by WEA Trust
- 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

# Health Plan Ratings

Each year, participating health plans are evaluated on key care delivery areas, such as wellness, prevention, disease management and efficient use of resources. Use these ratings along with other information to make an informed decision. Full methodology and health plan report cards are available on our website.

<b>Dean Health Insurance</b> Dean, Prevea360	★★★★☆	<b>Network Health</b>	★★★★☆
<b>GHC of Eau Claire</b>	★★★★☆	<b>Quartz</b> Community, UW Health	★★★★☆
<b>GHC of South Central Wisconsin</b>	★★★★☆	<b>WEA Trust</b> Access Plan, East, West - Chippewa Valley, West - Mayo Clinic Health System, State Maintenance Plan (SMP)	★★★★☆
<b>HealthPartners</b> HealthPartners, Robin	★★★★☆	<b>UnitedHealthcare</b> Medicare Advantage <sup>1</sup>	★★★★☆
<b>Medical Associates</b>	★★★★☆		
<b>MercyCare</b>	★★★★☆		

<sup>1</sup>UnitedHealthcare score derived from Centers for Medicare & Medicaid Services (CMS) Five-Star Quality Rating System

# Monthly Premiums (Participants without Medicare)

Uniform Dental premiums are added to your medical premiums if you choose coverage. See premiums on page 18.

	Local High Deductible Health Plan	
	Individual	Family
Dean Health Insurance	\$581.48	\$1,420.18
Dean Health Insurance - Prevea360	\$584.18	\$1,426.94
GHC of Eau Claire	\$680.60	\$1,667.98
GHC of South Central Wisconsin	\$587.06	\$1,434.14
HealthPartners Health Plan	\$771.16	\$1,894.38
Medical Associates Health Plans	\$523.14	\$1,274.34
MercyCare Health Plans	\$620.76	\$1,518.38
Network Health	\$703.54	\$1,725.34
Quartz - Community	\$695.46	\$1,705.14
Quartz - UW Health	\$538.46	\$1,312.64
Robin with HealthPartners Health Plan	\$771.16	\$1,894.38
State Maintenance Plan (SMP) <sup>1</sup> by WEA Trust	\$693.06	\$1,699.16
WEA Trust - East	\$718.26	\$1,762.14
WEA Trust West - Chippewa Valley	\$867.80	\$2,135.98
WEA Trust West - Mayo Clinic Health System	\$786.98	\$1,933.94
	Local Access High Deductible Health Plan	
	Individual	Family
WEA Trust <sup>1</sup>	\$1,050.76	\$2,593.40

<sup>1</sup>Members with the Access Plan or SMP coverage who enroll in Medicare Parts A and B will automatically be moved to the Medicare Plus plan. All other non-Medicare family members will remain covered under the Access Plan or SMP.



# Monthly Premiums (Retirees with Medicare)

“**Medicare All**” is family coverage where all insured members are enrolled in Medicare Parts A, B and D. “**Medicare Some**” is family coverage with at least one insured family member enrolled in Medicare Parts A, B and D. The “Medicare Some” rates below include the Local HDHP for non-Medicare members.

Uniform Dental premiums are added to your medical premiums if you choose coverage. See premiums on page 18.

	Individual	Medicare Some	Medicare All
<b>Medicare Advantage</b>			
UnitedHealthcare	\$240.48	See next page	\$458.62
<b>Medicare Plus</b>			
WEA Trust	\$357.80	See next page	\$693.26
<b>Health Plan Medicare</b>			
Dean Health Insurance	\$431.90	\$991.04	\$841.46
Dean Health Insurance - Prevea360	\$433.54	\$995.38	\$844.74
GHC of Eau Claire	\$413.06	\$1,071.32	\$803.78
GHC of South Central Wisconsin	\$442.56	\$1,007.28	\$862.78
HealthPartners Health Plan	\$394.96	\$1,143.78	\$767.58
Medical Associates Health Plans	\$330.06	\$830.86	\$637.78
MercyCare Health Plans	\$414.38	\$1,012.80	\$806.42
Network Health	\$514.46	\$1,195.66	\$1,006.58
Quartz - Community	\$442.42	\$1,115.54	\$862.50
Quartz - UW Health	\$362.94	\$879.06	\$703.54
Robin with HealthPartners Health Plan	\$394.96	\$1,143.78	\$767.58
State Maintenance Plan (SMP) by WEA Trust	\$357.80	\$1,028.52	\$693.26
WEA Trust - East	\$407.66	\$1,103.58	\$792.98
WEA Trust West - Chippewa Valley	\$481.56	\$1,327.02	\$940.78
WEA Trust West - Mayo Clinic Health System	\$445.66	\$1,210.30	\$868.98

# Monthly Premiums

## “Medicare Some” Rates for Medicare Plus & Medicare Advantage

When you select Medicare Advantage or Medicare Plus to coordinate with your Medicare coverage, you can select a different plan for your non-Medicare members.

Uniform Dental premiums are added to your medical premiums if you choose coverage. See premiums on page 18.

<b>Non-Medicare Health Plan</b>	<b>with Medicare Advantage</b>	<b>with Medicare Plus</b>
Dean Health Insurance	\$799.62	\$916.94
Dean Health Insurance - Prevea360	\$802.32	\$919.64
GHC of Eau Claire	\$898.74	\$1,016.06
GHC of South Central Wisconsin	\$805.20	\$922.52
HealthPartners Health Plan	\$989.30	\$1,106.62
Medical Associates Health Plans	\$741.28	\$858.60
MercyCare Health Plans	\$838.90	\$956.22
Network Health	\$921.68	\$1,039.00
Quartz - Community	\$913.60	\$1,030.92
Quartz - UW Health	\$756.60	\$873.92
Robin with HealthPartners Health Plan	\$989.30	\$1,106.62
State Maintenance Plan (SMP) by WEA Trust	\$911.20	\$1,028.52
WEA Trust - East	\$936.40	\$1,053.72
WEA Trust West - Chippewa Valley	\$1,085.94	\$1,203.26
WEA Trust West - Mayo Clinic Health System	\$1,005.12	\$1,122.44
Access HDHP by WEA Trust	\$1,268.90	\$1,386.22



For all participants

## Step 3: Consider Supplemental Benefits

Get even more coverage by signing up for dental insurance. Available to:

- Employees if your employer chooses to offer it
- All retirees

# 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

New for 2020!

#### 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

## 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](http://deltadentalwi.com/state-of-wi)

All plans are offered through Delta Dental.

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

# 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

# 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.

## For Employees

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

\*Added to your health insurance premium and may be partially paid by your employer

## For Retirees

	Uniform Dental	Preventive Plan	Select Plan	Select Plus Plan
Retiree	\$30.20	\$30.20	\$15.44	\$27.06
Retiree + Child(ren)	---	---	\$21.19	\$50.06
Retiree + Spouse	---	---	\$31.39	\$54.12
Family	\$75.50*	\$75.50	\$37.67	\$82.54

\*Medicare Some or Medicare All recipients pay a family rate of \$60.40



## Well Wisconsin

Well Wisconsin, administered by StayWell®, supports you on your personal health journey and rewards you with a \$150 incentive. Access free and confidential resources and services, such as health coaching, online challenges and more.

**NEW FOR 2020:** An updated and improved StayWell website and app, plus a simpler way to receive your incentive.

**Note:** Retirees will see taxes removed from the total gift card amount. Medicare Advantage participants are not eligible for the Well Wisconsin incentive and have wellness incentives available through UnitedHealthcare.

[wellwisconsin.staywell.com](http://wellwisconsin.staywell.com) | 1-800-821-6591

STAYWELL

StayWell® is a registered trademark of StayWell® Company, LLC. All health and wellness incentives are considered taxable income to the subscriber and are reported to your employer. Personal health information is protected by federal law and will not be shared with ETF, the group insurance board, or your employer.



## Open Enrollment: September 30 - October 25, 2019

Mailed application must be postmarked by October 25, 2019



**1-877-533-5020**

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



**PO Box 7931  
Madison, WI 53707-7931**



**etf.wi.gov**



**@wi\_etf**

### **Discrimination is Against the Law 45 C.F.R. §92.8(b)(1) & (d)(1)**

The Wisconsin Department of Employee Trust Funds complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. ETF does not exclude people or treat them differently because 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. 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's Office of Policy, Privacy & Compliance, which serves as ETF's Civil Rights Coordinator.

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: Compliance Office, Department of Employee Trust Funds, P.O. Box 7931, Madison, WI 53707-7931; 1-877-533-5020; TTY: 711; Fax: 608-267-4549; Email: [ETFMBPrivacyOfficer@etf.wi.gov](mailto:ETFMBPrivacyOfficer@etf.wi.gov). If you need help filing a grievance, ETF's Compliance Office 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, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201; 1-800-368-1019; TDD: 1-800-537-7697. Complaint forms are available at [www.hhs.gov/ocr/office/file/index.html](http://www.hhs.gov/ocr/office/file/index.html).

**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).

**Arabic:** ملاحظة: إذا كنت تتحدث اللغة العربية، فهناك خدمة مساعدة متاحة بلغتك اتصل بالرقم 1-877-533-5020 (خدمة الصم والبكم: 711)

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

**Korean:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-533-5020 (TTY: 711)번으로 전화해 주십시오.

**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)] schwetzsch, kannsch 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, ການບໍລິການຊ່ອຍເຫຼືອ ດ້ານພາສາ, ໂດຍບໍ່ຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 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. Zadzwoń pod 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](http://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](http://etf.wi.gov).