

Important Dates

Due Date	Topic	Employee Group
October 1	Credit Deadline	Teachers
October 15 – November 15	Open Enrollment	All Employees
January 1	Open Enrollment Elections Effective	All Employees
January 15	Retirement Notice Due	Administrators
February 1	Credit Deadline	Teachers
February 15	Retirement Notice Due	Teachers
June 10	Staff Only Day	All Employees
June 15	Contracts Due	Teachers
July 31	10 or 12 Paycheck Election	Teachers
July 1	Credit Deadline	Teachers
July 1	Health & Dental Premiums Change	All Employees

Other Important Dates

- Personal contact information updates, such as name or address changes, should be made immediately at https://mmsd.munisselfservice.com/default.aspx
- Changes made outside of open enrollment due to benefits due to marriage, divorce, birth of a child, etc., must be made within 30 days of the event.
- Long-term Leave of Absence requests should be made at least 30 days in advance, when possible.
- Child Rearing Leave of Absence requests should be made at least 90 days in advance.
- Work-related injury reporting, including Student Assault Forms, should be completed within 3 days of injury.
- School Calendar: https://www.madison.k12.wi.us/event

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Compliance Addendum:	
https://resources.finalsite.net/images/v1633979491/madisonk12wius/yyjrii6sdyw1jmi6lrx3/2021-	
<u>22Compliance-Addendum.pdf</u>	

Contact Information

HR Department	(608) 663-1693	
	https://hr.madison.k12.wi.us	
Benefits Division	(608) 663-1692	
	benefits@madison.k12.wi.us	
Payroll Division	(608) 663-5387	
	payroll@madison.k12.wi.us	



Introduction

Open Enrollment is a time when you can make changes to your benefit elections and enroll in a flexible spending account. Open Enrollment is always between October 15 and November 15. Any changes made during that time frame are effective as of the following January 1st.

The purpose of this guide is to provide you with the necessary information regarding your benefits through the Madison Metropolitan School District and options for your election changes during Open Enrollment. In this guide, you will find a general overview of plan designs, premiums, directions on how to make changes during Open Enrollment and required legal notices. Specific information about benefits can be found online at https://www.madison.k12.wi.us/human-resources/employee-benefits

Please note: The information in this guide is not intended to advise you on which particular benefits are appropriate for you and your family. Additionally, all plan documents, laws and regulations supersede information shared in this guide.

Open Enrollment

Open enrollment for the 2021-22 school year is October 15, 2021 – November 15, 2021. Any changes or new elections made during open enrollment will be effective January 1, 2022.

Flexible Spending Accounts (FSA) must be renewed every year. That means to continue with or to initiate new enrollment into an FSA for 2022, you **MUST** (re)enroll during the Open Enrollment period.

All other benefits will remain the same unless you make changes during Open Enrollment. Possible changes might include, for example, changing from Dean to GHC, or changing from a POS plan to an HMO plan.

What do I need to do?

- If you want to have a Flexible Spending Account for 2022, you must complete your enrollment at the MMSD's Benefits Enrollment Website (https://standard.benselect.com).
- If you want to make any changes to your existing benefits, you must make those changes at the MMSD's Benefits Enrollment Website (https://standard.benselect.com).
- If you are **not** making any changes to your current benefits **AND** are **NOT** electing a flexible spending account for 2022, you do not need to do anything.

What will I need if I'm making changes?

Step 1: Gather the required information for you and your dependents. This will include complete legal names, dates of birth and Social Security Numbers.

Step 2: Log in to the MMSD's Benefits Enrollment Website (https://standard.benselect.com)

- Your username is your b number without the "b"
- If you have not previously logged in, your default PIN is the last 4 digits of your SSN followed by the last 2 digits of your year of birth. You will be required to create a more secure PIN. Please be sure to save your new password for future logins. If you do not remember your PIN, email benefits@madison.k12.wi.us for assistance.
- Once logged in, click the "Next" button on the top right portion of the page to navigate through your benefit elections. Continue to click "Next" until all benefit elections have been made.
- Step-by-step directions can be found at: https://resources.finalsite.net/images/v1623078425/madisonk12wius/pcup5al78ontg8uep9rt/202 1-22-enrollment-help-guide-general 1.pdf

Step 3: Review and complete your elections and/or changes no later than **November 15, 2021**.

• To save and submit your benefit elections, you must click "I Agree" on the Submit Your Enrollment page. Once submitted, a confirmation page will be displayed. Save or print this page for your records.

• Elections will be processed and sent to the insurance carriers in early December for a January 1, 2022 effective date. Insurance cards will be mailed to your home prior to January 1, 2022.

QUESTIONS?

Contact the Benefits Helpdesk at (608) 663-1692 or at benefits@madison.k12.wi.us

General Plan Information

Plan Year

The Madison Metropolitan School District benefits plan year is January 1 through December 31. This guide outlines the benefits available during this identified plan year.

Annual Deductible Year

The annual deductible for all Madison Metropolitan School District benefit plans is January 1 through December 31. The annual deductible resets each year on January 1.

Eligibility

Eligibility is outlined in the Employee Handbook. In general, employees who are a part of the following employee units are eligible for coverage if working 19 or more hours per week.

- Administrator
- Custodial
- Educational Assistant / Special Educational Assistant
- Food Service

- Non-Union Clerical
- Play and Learn
- Professional (NUP)
- Professional Instruction (PR-I)
- Security Assistant

- Supportive Educational Employee
- Teacher
- Trades

All other MMSD employees who are not eligible for benefits may be eligible for health insurance for 2022 if working an average of 30 hours per week between the time frame of October 5, 2020 – October 4, 2021. Employees in this category will be notified if eligible to enroll in health insurance.

Dependent Coverage

In addition to covering yourself, you can elect to cover your eligible dependents. Your eligible dependents include:

- Your spouse
- Your child(ren) through the year in which they turn 26
- Your child of any age who is not self-supporting due to a mental and/or physical disability

Waive Option

You have the option of not participating in the insurance plans available to you. If you do not enroll in the health insurance plan offered, please indicate you are waiving coverage and your reason. If you waive the health insurance, you are still eligible to enroll in the other benefit options.

Making Changes to Your Benefits

The Internal Revenue Service (IRS) states that eligible employees may only make elections to the plan once a year; annual open enrollment benefit choices are binding through December 31, 2022.

Qualifying life events allow you to make plan changes at other times during the year in which they occur. For any allowable changes, you must enroll online within 30 calendar days of the event (60 days for the birth of a child, CHIP/ Medicaid eligibility or loss of eligibility) to avoid a lapse in coverage. The following include reasons you may change your benefits during the year.

- Marriage;
- Birth, adoption or placement of a child for adoption;
- Divorce or legal separation;
- Termination or commencement of your spouse's coverage;
- Shift from part-time to full-time status (or vice versa) by you or your spouse;
- Death of spouse or dependent;

- When a dependent satisfies or ceases to satisfy eligibility requirements;
- Taking an unpaid leave of absence (you or your spouse);
- Eligibility (or loss of eligibility) for Children's Health Insurance Plan (CHIP) or Medicaid; or
- Eligibility for a special enrollment or annual enrollment in Health Insurance Marketplace ("Exchange") coverage (to avoid a period of duplicate coverage or no coverage).

Online Information

Comprehensive information about MMSD's benefits is available online!

- 1. Find benefit information on line at https://www.madison.k12.wi.us/human-resources/employee-benefits
- 2. Enroll in benefits at MMSD's Benefits Enrollment Website (https://standard.benselect.com)
 TO LOG IN AND ENROLL:
 - Your username is your b number without the "b"
 - Your PIN is the last 4 digits of your SSN followed by the last 2 digits of your year of birth. Note, you may be required to reset your PIN. Please be sure to save your new password for future logins.
 - If you have not previously logged in, your default PIN is the last 4 digits of your SSN followed by the last 2 digits of your year of birth. You will be required to create a more secure PIN. Please be sure to save your new password for future logins. If you do not remember your PIN, email benefits@madison.k12.wi.us for assistance.
 - Once logged in, click the "Next" button on the top right portion of the page to navigate through your benefit elections. Continue to click "Next" until all benefit elections have been made.
 - To save and submit your benefit elections, you must click "I Agree" on the Submit Your Enrollment page. Once submitted, a confirmation page will be displayed. Save or print this page for your records.
 - Step-by-step directions can be found at: https://resources.finalsite.net/images/v1623078425/madisonk12wius/pcup5al78ontg8uep9rt/2021-22-enrollment-help-guide-general/2.pdf
- 3. There's an app for that! Scan the QR code below or go to mmsd-benefits.com on your mobile device.





Health Insurance

Carriers

You have the opportunity to enroll in health insurance through Dean Health Plan or Group Health Cooperative of South Central Wisconsin. These carriers provide you with a diverse range of networks and providers, yet have the exact same type of coverage (copays, etc.). They do have slightly different employee premiums (what you pay per pay period for your coverage).

Plan Options

Each carrier provides a Health Maintenance Plan (HMO), Point-of-Service Plan (POS) or Preferred Provider Organization Plan (PPO). The PPO plan is only available to employees who do not live in South Central Wisconsin.

The HMO plan allows you to use in-network providers only. GHC uses GHC Clinics, UW Hospital and Meriter Hospital. Dean Health Plan uses SSM Health/Dean Clinics and SSM Hospital for Dean. If you need to see an out-of-network provider, such as provider at Mayo Clinic or a specialty care provider, your doctor will request a referral to these providers. The referral will be approved if there are no in-network providers that can treat the condition. The HMO plans have an annual deductible of \$100 per person (\$200 per family). The annual deductible resents every January 1. They have \$20 office visit copays (this does not apply to preventive care visits and visits for children age 18 and younger). They also have a \$150 emergency room copay.

Under the POS plan, you have the option to use in-network providers, but you are also able to use out-of-network providers without pre-approval or a referral. With out-of-network providers, you have an additional \$250 individual annual deductible (\$500/family) and an 80/20 co-insurance cost -- you pay the first \$250/\$500 of services and then 20% of the costs once the annual deductible has been met.

Some employees elect the POS plan for the flexibility to see out-of-network providers, even if it may never happen. As a reminder, if you need a referral to an out-of-network provider due to a medical condition that an in-network provider cannot treat, you can request a referral to a



specialist that can treat that condition. Other employees have selected the POS plan due to dependents who live outside of the area, such as college students, or due to significant family travel needs. **The HMO plans cover urgent care and emergency care anywhere within the USA.** If you or a family member needs urgent or emergency care, the HMO plan will cover those costs. By enrolling in a POS plan and not using out-of-network providers, you are incurring additional costs (higher premiums out of your paycheck and district resources) and you may be enrolled in a plan that doesn't meet your medical needs.

There are circumstances wherein a POS plan may be the best plan for you. That's ok, you can enroll in a POS plan. But, be mindful that the premium contribution difference between the HMO and POS plan may be more than what it would cost you to pay for the out-of-network medical care out of your pocket.

Dean Health Plan

Group Health Cooperative

	НМО	POS and PPO		НМО		POS and PPO	
	In-Network	In-Network Out-of-Network		In-Network	In-Network	Out-of-Network	
Deductible*	\$100 per member \$200 family max	\$100 per member \$200 family max	\$250 single \$500 family	\$100 per member \$200 family max	\$100 per member \$200 Family max	\$250 single \$500 family	
Coinsurance	0%	0%	20% after deductible	0%	0%	20% after deductible	
Maximum Out-of- Network Out-of-Pocket	\$7,150 single \$14,300 family	\$7,150 single \$14,300 family	\$14,350 single \$28,600 family	\$6,600 single \$13,200 family	\$6,600 single \$13,200 family	\$1,250 single \$2,500 family	
Office Visit**	\$20	\$20	20% after deductible	\$20	\$20	20% after deductible	
Preventive Care***	100% covered	100% covered	20% after deductible	100% covered	100% covered	20% after deductible	
Vision Exam	\$20	\$20	Not Covered	\$20	\$20	20% after deductible	
Chiropractor	\$20	\$20	20% after deductible	\$20	\$20	20% after deductible	
Therapy (PT/OT/ST)	0% after deductible	0% after deductible	20% after deductible	0% after deductible	0% after deductible	20% after deductible	
Hospital (In-Patient)	No charge after Deductible	No charge after Deductible	20% after deductible	No charge after Deductible	No charge after Deductible	20% after deductible	
Hospital (Out-Patient)	No charge after Deductible	No charge after Deductible	20% after deductible	No charge after Deductible	No charge after Deductible	20% after deductible	
Emergency Room	\$150	\$150	\$150	\$150	\$150	\$150	
Urgent Care	\$20	\$20	\$20	\$20	\$20	\$20	
Prescriptions	\$6, \$15, \$30	\$6, \$15, \$30	Not covered	\$6, \$15, \$30	\$6, \$15, \$30	Not covered	

^{*}Annual deductibles reset each January 1

Additional Benefits

Listed below are some of the programs in place to help you utilize all of the benefits available through the health insurance plan. Wellness benefits are provided through both Dean and GHC.

- Dean's Living Healthy program allows you to earn up to \$150 in wellness rewards (\$100 for covered spouses and adult children 18 & older) for completing a heath assessment, having a MyChart account, and more! More information can be found at:
 - https://www.deancare.com/wellness/health-and-wellness
- GHC's ManageWell rewards program provides you and your family an opportunity to earn points on a quarterly basis. Visit https://ghcscw.com/wellness/wellness-reimbursement for details.
- GHC Care OnDemand provides 24/7/365 virtual access to providers and therapists.
- My Chart and mobile phone applications are provided to access your benefit and claim information.



^{**}Labs are subject to deductible and coinsurance

^{***}Preventive care is defined by the federal guidelines

Health Insurance Premiums

The health insurance premium contributions – the amount you pay for your coverage – is based on which carrier you choose, which plan you enroll in, the coverage tier (single vs family) and your payroll frequency.

The premium contribution is a percentage of the total monthly cost of the coverage. The amount owed is based on a sliding scale for the various employee groups. The percentages are 2.50%, 6.0%, 10.0%, or 12.0% depending upon your employment unit. If you are paid monthly, premiums are withheld from each monthly check. If you are paid bi-weekly, premiums are withheld from the first two checks in each month, half from each check (in months where there are 3 checks, premiums will only be deducted from the first two).

Premiums for health insurance are paid a month in advance. For example, the January health insurance premiums will be taken from your December paycheck(s). You may notice an adjustment on your paycheck after enrolling or changing coverage to catch-up on premiums.

The charts below show the employment groups and the corresponding premiums and pre-tax employee contributions.

CONTRIBUTIONS.						
		Dean		GHC		
		нмо	POS	нмо	POS	
Full Monthly Pre	emium					
	Single	\$696.12	\$776.71	\$591.92	\$858.09	
	Family	\$1,830.51	\$2,042.75	\$1,580.43	\$2,291.11	
	Employee Month	nly Contribution - 1	.0 Months of Pay			
EA/SEA	Single	\$20.88	\$46.60	\$17.76	\$51.49	
Food Svc.	Family	\$54.92	\$122.57	\$47.41	\$137.47	
Play/Learn	Employee Month	nly Contribution - 1	2 Months of Pay			
Secur. Asst	Single	\$17.40	\$38.84	\$14.80	\$42.90	
	Family	\$45.76	\$102.14	\$39.51	\$114.56	
Custodial	Employee Month	nly Contribution - 1	.0 Months of Pay			
NUC	Single	\$50.12	\$111.85	\$42.62	\$123.56	
SEE Sub Teacher	Family	\$131.80	\$294.16	\$113.79	\$329.92	
Teacher	Employee Month	Employee Monthly Contribution - 12 Months of Pay				
TE-B & TE-G	Single	\$41.77	\$93.21	\$35.52	\$102.97	
Trades	Family	\$109.83	\$245.13	\$94.83	\$274.93	
	Employee Month	nly Contribution - 1	.0 Months of Pay			
	Single	\$83.53	\$186.41	\$71.03	\$205.94	
PR	Family	\$219.66	\$490.26	\$189.65	\$549.87	
PR-I	Employee Monthly Contribution - 12 Months of Pay					
	Single	\$69.61	\$155.34	\$59.19	\$171.62	
	Family	\$183.05	\$408.55	\$158.04	\$458.22	
	Employee Month	ly Contribution - 1	2 Months of Pay			
Admin.	Single	\$83.53	\$186.41	\$71.03	\$205.94	
	Family	\$219.66	\$490.26	\$189.65	\$549.87	

Flexible Spending Accounts



FSAs allow you to save on your health care and dependent care (such as daycare) expenses on a pre-tax basis. MMSD provides you an opportunity to save on some of your expenses by taking advantage of the pre-tax Flexible Spending Accounts.

A Flexible Spending Account (FSA) lets you budget and save for qualified expenses. These funds are put aside before taxes, which means more money in your pocket. The dollars you contribute to an FSA are added pre-tax. For example, if you contribute \$2,500 to an FSA during a plan year and pay a tax rate of 30%, you'd save \$750.

Medical FSA

One of the best benefits of a medical FSA is that funds are available to use at the start of the calendar year. That means if you have a big medical expense at the start of the year, you can access your FSA funds immediately to help cover the cost.

A medical FSA allows you to save for medical expenses for yourself and dependents, including annual deductibles, office visit copayments, prescription drug copayments, dental expenses, vision care expenses (e.g. eyeglasses or contact lenses), hearing care expenses (e.g. a hearing aid) and orthodontia. A full list of eligible and ineligible FSA expenses is defined and listed in IRS Publication 502, available online at www.irs.gov/publications.

The maximum annual amount you can deposit into a Health Care FSA is \$2,750 for 2021. At the time of this publication, the 2022 maximum has not yet been announced.

Health Care FSA Eligible Examples:

- Deductibles & Copays
- Chiropractic visits
- Acupuncture
- Medication with a prescription
- Over-the-counter medicine with a prescription
- Dental services such as fillings, crowns, oral surgery
- Orthodontia
- Contact lenses & supplies
- Eye glasses &prescription sunglasses
- Laser eye surgery
- Hearing exams
- Infertility
- Drug & alcohol addiction treatment

Dependent Care (such as daycare) FSA

A dependent care FSA allows you to save for daycare expenses for your child (up to age 13) or a disabled dependent/spouse. To be eligible for dependent care FSA, you must work or be a full-time student. Expenses include preschool, after-school care, daycare and summer day camps and are <u>not for medical expenses for</u> dependents. The maximum annual amount you can deposit into a dependent care FSA is \$5,000.

Planning and Considerations

The FSA plan runs on a calendar year therefore you'll want to plan ahead. Because the plan is "use it or lose it", you will want to make sure to spend all of your funds by the end of the calendar year. The plan does have a 2½ month grace period built in, allowing for additional spending of remaining funds for up to 2½ months following the end of the calendar year.

To plan ahead, you'll want to estimate how much you think you'll spend on qualified expenses. For the medical FSA, consider any deductibles, trips to the doctor or emergency room, prescription drug refills, dental expenses and vision expenses. You can also visit the FSA Store (https://fsastore.com/) for over-the-counter qualified expenses.

Dental Insurance

Dental Coverage

Delta Dental of Wisconsin is the Dental Insurance carrier for MMSD. Delta Dental has a nation-wide network, and covers more than 75% of the area and nation's dentists. Your lowest out-of-pocket costs will come from seeing a Delta Dental PPO dentist, but you will also receive cost advantages if you see a Premier dentist. Dental expenses are all eligible expenses for Health Care Flexible Spending. Consider enrolling in an FSA to help reduce expenses.

Plan Options

The District offers two plan options: The Base Dental Plan offers an annual maximum of \$1,200 per year whereas the Buy-Up Plan offers a \$1,500 annual maximum. The other differences:

- The Base Plan has a \$25/individual (\$75/family) annual deductible for Basic Restorative or Major Restorative Care services. The annual deductible will not be applied to any Preventive services.
- The Base Plan has a lower premium than the Buy-up Plan.

Plan Overview and Premiums

Plan Overview	Base Plan	Buy-Up Plan		
Annual Maximum	\$1,200 per person	\$1,500 per person		
Deductible	\$25/\$75	\$0		
Preventive Services (not subject to deductible)			
Cleanings	100%	100%		
Examinations	100%	100%		
Bitewings	100%	100%		
Sealants	100%	100%		
Basic Services				
Periodontics	80%	80%		
Endodontics	80%	80%		
Fillings	80%	80%		
Oral Surgery	80%	80%		
Extractions	80%	80%		
Root Canals	80%	80%		
Major Services				
Crowns	50%	50%		
Bridges	50%	50%		
Implants	50%	50%		
Dentures	50% 50%			
Orthodontia				
Orthodontics	100%	100%		
Lifetime Maximum	\$2,000 per person	\$2,000 per person		

Premiums	Base Plan	Buy-Up Plan			
Full Monthly Pr	Full Monthly Premium				
Single	37.94	\$56.79			
Family	\$98.26	\$142.81			
Employee Monthly Contribution – 10 Months of Pay					
Single	\$4.55	\$27.17			
Family	\$11.79	\$67.65			
Employee Monthly Contribution – 12 Months of Pay					
Single	\$3.79	\$22.64			
Family	\$9.83	\$56.38			



Vision Insurance

Vision Coverage

This insurance plan is provided by Delta Dental, in conjunction with EyeMed. The EyeMed network gives you access to a national network of both independent providers along with the nation's most respected optical retail brands such as Target Optical, LensCrafters, and Pearl Vision. You can elect this benefit to cover yourself and your eligible family members. The EyeMed plan allows for materials to be obtained once every 12 months. See the chart below for benefit details.

The benefit is simple to understand and easy to use. Each member enrolled in the plan (either single or family coverage) will receive up to \$250 towards the purchase of frames, lenses and/or contacts. Additionally, any expenses above the benefit maximum are discounted!

Plan Overview and Premiums

Plan Overview	In-Network	Out-of-Network	
Frequency	Glasses or Contacts		
	Once Every 12 Months		
Glasses			
Frames			
Standard Plastic Lenses			
Single Vision			
Bifocal			
Trifocal	\$250		
Lens Options	allowance,		
UV Coating	then 20% off	\$125	
Tint	balance		
Scratch Resistance	Balarice		
Polycarbonate			
Standard Progressive			
Anti-Reflective			
Other Add-ons & Services			
Contact Lenses	I		
Conventional	\$250		
	allowance,		
	then 15% off		
	balance	\$200	
Disposal	\$250		
	allowance		
Medically Necessary	Paid in full		
Laser Vision Correction	T .		
Lasic or PRK	15% off retail		
	price or 5% off		
	of	None	
	promotional		
	price		



Premiums

Employee Monthly Contribution - 10 Months of Pay			
Single	\$7.94		
Family	\$19.73		
Employee Monthly Contribution -			
12 Months of Pay			
Single	gle \$6.61		
Family	\$16.44		

Income Protection

Madison Metropolitan School District provides you with basic life insurance, basic accidental death & dismemberment (AD&D), voluntary life insurance and AD&D, short-term disability, long-term disability and long-term care insurance.

Life Insurance

You are automatically enrolled in Basic Life and AD&D Insurance. Coverage is 1x your salary, rounded up to the next thousand. MMSD pays 100% of the cost of this plan.

The Basic + Retirement Plan is <u>only</u> available for employees hired prior to 7/1/2018 and who were already enrolled in the coverage prior to 7/1/2018. Coverage is 1x your salary, rounded up to the next thousand. MMSD pays 85% of this coverage.

Voluntary Life and AD&D Insurance is available for yourself, spouse, domestic partners, and child(ren). You can enroll in coverage up to \$300,00 or 5x your annual salary, whichever is greater, for yourself, up to 50% of your employee Voluntary Coverage for coverage for your spouse or domestic partner and up to \$10,000 for your child(ren). Premiums for this plan are based on your age and coverage level. Premiums can be found in the Standard Enrollment System when electing the coverage. Enrolling in voluntary coverage or increasing the amount will require you to complete Evidence of Insurability*.

*Evidence of Insurability (EOI)
Evidence of Insurability means
you will have to answer questions
regarding your medical history
and may have to provide medical
records and/or a physical exam
before coverage will be approved
by the insurance carrier.

Disability Insurance

You are automatically enrolled in Long Term Disability Insurance. The benefit level is 80% of your predisability earnings after a 75 calendar day wait period. The benefit will continue as long as you're disabled, through the standard Social Security full retirement age.

Voluntary Short Term Disability Insurance is available to all employees who work 19+ hours per week, except those in the Teacher Unit. The benefit level is 66.67% of your pre-disability earnings, after a 2 week waiting period. If you enroll in coverage during Open Enrollment, you will have a 12 month exclusion period beginning January 1, 2021, for certain conditions before benefits are available. Premiums can be found in the Standard Enrollment System when electing the coverage.



Long Term Care Insurance

Voluntary Long Term Care Insurance is available for you, your spouse/domestic partner and parents. Long Term Care Insurance helps pay for long-term nursing home stays, assisted living facilities, home modification and care coordination for services not covered by health insurance. Premiums are based on the coverage level and additional options.

More information about the coverage options and premiums can be found at:

http://unuminfo.com/MadisonMetroSD74under/index.aspx.

Retirement Savings Plan (403(b))

You have the opportunity to save for retirement by participating in one of MMSD's 403(b) plans. You can participate by electing to make pre-tax contributions or Roth 403(b) after-tax contributions.

403(b) plans can play an important role in building a strong retirement income stream, in addition to your WRS Pension Plan. The value of your 403(b) investments may increase based upon fund performance and other factors, making it possible for you to build account balances greater than what you've contributed.



403(b) Vendors

Preferred vendors are AXA, Fidelity and WEA Member Benefits. Note, if you are currently contributing to a different 403(b) vendor through MMSD, you can continue to contribute to that plan. New enrollments are only available through AXA, Fidelity and WEA Member Benefits.

Contributions

If you are already currently contributing, you can increase or decrease your pre-tax contributions and Roth 403(b) after-tax contributions. To change your contributions, please complete the Salary Reduction Agreement found on the Human Resources website.

When you invest in a Roth account, you pay with after-tax dollars. But when you withdraw money after you retire, you owe zero taxes on that money. The investment returns over time are tax-free, and you have already paid the income tax on your contribution.

If you invest in a traditional retirement account, you pay with pretax dollars. Your taxable income is reduced by the amount you pay in. That softens the impact of the loss in your take-home pay. After you retire, you'll owe income taxes on those pre-tax dollars you put in, and on the investment returns the account generated.

To start new contributions, please contact your preferred investment provider to complete an enrollment application with one of the preferred vendors and salary reduction agreement (found on the Human Resources website).

For 2021, you can contribute up to the following amounts:

Effective deferral limit: \$19,500

Age 50 catch-up: \$6,500

15 years of service catch-up: \$3,000

Wisconsin Retirement System (WRS)

WRS is a retirement pension benefit available to school employees. WRS requires that participants contribute a mandated percentage of their income to the plan pre-tax (50% contributed by you and 50% contributed by MMSD). As of January 1, 2020, the participation percentage is 13.5% (6.75% by you and 6.75% by MMSD).

You are automatically enrolled once you become eligible. Once enrolled, you must have five years of credible service to be vested in the plan.

Additional Contributions You may make additional contributions to WRS annually. You must submit the payment directly to WRS by 12/31 of every calendar year and include the form Additional Contributions Remittance. This type of contribution is not pre-tax. To read more about it, visit ETF's site for Additional Contributions.

<u>More Information</u> Visit WRS's website at https://etf.wi.gov/retirement or give them a call at 877-533-5020.

Employee Assistance Program (EAP)

The EAP is a free benefit provided to all employees, your spouse/domestic partner and dependents. The EAP is 100% confidential, no data is reported back to MMSD. All employees and their families are provided free, confidential counseling and referral service pertaining to personal difficulties including, but not limited to stress reduction, domestic abuse, drug and alcohol abuse, adoption assistance, school and college planning or eldercare assessment, financial and legal consultation.

Use the EAP by Contacting HealthAdvocate

Website http://healthadvocate.com/standard3

EAP

The EAP program through The Standard is available to all employees and household members. HealthAdvocate provides free, short-term counseling to help you. Topics include stress reduction, anxiety, relationship issues, addiction help, caregiver assistance and identity theft assistance. If after speaking to a counselor you need more immediate assistance, you can be referred to an in-person counselor for up to 3 free visits. Additionally, immediate referral to an in-person counselor is available in crises.

Travel Assistance

This program allows employees and their family member's assistance while traveling. Help includes assistance with lost luggage/password, emergency medical evacuation and help finding medical care.

Legal Assistance

Employees and family members can receive assistance in preparing legal documents, including *free personal will's and power of attorney declarations*. Additionally, up to 30 minutes of free face-to-face consultation is available.



Financial Assistance

Employees and family members can receive unlimited telephonic assistance and a free 60 minute face-to-face counseling per issue from a Certified Consumer Credit Counselor, Certified Credit Reporting Reviewers and/or financial planners. Help includes issues such as budgeting strategies, managing credit, financial planning, goal setting, homeownership and other personal financial issues. Additionally, identity theft consultations are available for identity theft prevention and a free identity theft kit is available if identity has been stolen.

Additional Contact Information

Madison Metropolitan School District

Address: 545 West Dayton Street, Madison, WI 53704

Telephone: 608-663-1692 (Benefits Helpdesk)

Website: hr.madison.k12.wi.us

Benefits Helpdesk: benefits@madison.k12.wi.us

Compliance Guide

https://resources.finalsite.net/images/v1633979491/madisonk12wius/yyjrii6sdyw1jmi6lrx3/2021-22Compliance-Addendum.pdf

Dean Health Plan (Health Insurance)

Telephone: 800-279-1301 Website: https://www.deancare.com/

Group Health Cooperative (Health Insurance)

Telephone: 800-605-4327 Website: https://www.ghcscw.com/

Delta Dental of Wisconsin (Dental Insurance)

Telephone: 800-236-3712 Website: https://www.deltadentalwi.com/s/

The Standard (Life and Disability Insurance)

Telephone: 800-628-8600 Website: https://www.standard.com/

UNUM (Long Term Care Insurance)

Telephone: 866-679-3054 Website: https://www.unum.com/

Health Advocate (Employee Assistance Program)

Telephone: 888-293-6948 Website: http://healthadvocate.com/standard3

AXA (403b Provider)

Telephone: 888-292-4636 Website: https://us.axa.com/teacher-retirement/403b

Fidelity (403b Provider)

Telephone: 800-343-0860 Website: https://nb.fidelity.com/public/nb/ready2enroll/planoptions

WEA Member Benefits (403b Provider)

Telephone: 800-279-4030 Website: www.weabenefits.com

Wisconsin Retirement System (Pension)

Telephone: 877-533-5020 Website: https://etf.wi.gov/retirement