



Crivitz School District

2026-2027 Employee Benefits Guide

QUESTIONS?

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Benefits Enrollment Checklist

This guide will help you get to know your benefits and your choices for the 2026 plan year. Be sure to learn about your options so you can make informed choices for yourself and your eligible dependents.

IN THE FIRST 30 DAYS

Enroll in these plans or waive coverage:

- ☐ Medical
- ☐ Dental
- ☐ Voluntary Vision
- ☐ Long Term Disability
- ☐ Voluntary Short Term Disability
- ☐ Life
- ☐ Voluntary Life
- ☐ Voluntary Accident
- ☐ Voluntary Cancer



Carrier Contacts

Coverage	Carrier	Contact
Medical	WCA Group Health Trust	866.404.2700 www.wcaght.org
FSA & HRA Benefit	DBS	800.234.1229 www.dbsbenefits.org
Dental	Delta Dental	800.236.3712 www.deltadentalwi.com
Voluntary Vision	Superior Vision	800.507.3800 www.superiorvision.com
LTD & Voluntary STD	The Standard	888.937.4783 www.standard.com
Employee Assistance Program (EAP)	The Standard	888.293.6948 www.healthadvocate.com/standard3
Travel Assistance	The Standard	800.872.1414 www.assistamerica.com
Life AD&D and Voluntary Life	Unum	800.421.0344 www.unum.com/employees/contact-us
Voluntary Worksite	Aflac	800.992.3522 www.aflac.com
	Allstate	920.730.1100 paulmichaels@allstate.com
	Globe Life	920.471.3052 awinfree.fhl@gmail.com

This document is an outline of the coverage proposed by the carrier(s), based on information provided by your employer. It does not include all of the terms, coverage, exclusions, limitations and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request. The intent of this document is to provide you with general information regarding the status of and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issue. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.

**For questions and forms contact Sarah Jones (715) 854-2721 ext. 311
or sjones@crivitz.k12.wi.us**

Medical Plan

Medical Plan

You get the most from your benefits when you take the time to learn about your options and make decisions that are best for you and your family. Crivitz School District provides eligible employees coverage with **the WCA Group Health Trust**.

You have access to providers participating in the UHC Choice Plus network. **Find a participating health care provider in your area by going to: [UMR.com](https://www.UMR.com).**

Refer to the Summary of Benefits Coverage (SBCs) for detailed medical plan coverage information.

Waiver Of Coverage

The District may provide an alternative benefit plan in lieu of health insurance coverage to employees eligible for plan group coverage. Currently, Cash in lieu is paid at \$10,000 annually for those with qualified waivers of coverage. Contact Sarah Jones for additional information.

Eligibility

- All full-time employees who work 12 months and 30 hours or more per week

And Your...

- Spouse
- Biological children, stepchildren, legally adopted children (effective from the placement date for adoption), and foster children up to age 26.

Terms To Know

Deductible

The amount **you pay** out of your pocket each year **before the plan begins** sharing costs for most services. Payments to in-network and out-of-network providers count toward your annual deductible and annual out-of-pocket maximum.

Copay

The dollar amount you must pay for certain covered services. Payments count toward your annual out-of-pocket maximum but ***not*** toward your deductible.

Out-of-Pocket Maximum

The most you'll have to pay out of your pocket in a calendar year for covered services.

Coinsurance

The cost share between you and the plan after you meet the calendar year deductible. In other words, after you meet your deductible, you share any remaining covered expenses with the plan. The plan covers the percentage of the expense shown.

Medical Plan Highlights

WCA Group Health Trust Network: UHC Choice	Plan Year: July 1 – June 30 \$3,000/\$6,000 Deductible The HRA will be funded at \$2,500 single/\$5,000 family after you pay your portion of the deductible: \$500 single/\$1,000 family	
	In-Network	Out-of-Network
Deductible		
Single	\$3,000	N/A
Family	\$6,000	
Health Reimbursement Account (HRA)		
Single	\$2,500	N/A
Family	\$5,000	
Out-of-Pocket Maximum		
Single	\$4,000	N/A
Family	\$8,000	
Annual Copay Out-of-Pocket Maximum		
Single	\$1,000	N/A
Family	\$2,000	
Coinsurance	100% covered after deductible	N/A
Physician Services		
Routine / Preventive Care	Select Services Are FREE	N/A
Primary / Specialty Care Visits	\$25 Copay/Deductible	N/A
Teladoc (Virtual Care)	\$0 Copay	N/A
Hospital Services (Inpatient/Outpatient)	Deductible Applies	N/A
Urgent Care ER		
Urgent Care	\$25 Copay/Deductible	N/A
Emergency Care	\$200 Copay / PPO Deductible	\$200 Copay / PPO Deductible
Prescription Drugs		
Retail (30 Days)	\$0 / \$10 / \$25 / \$50 / 30% (\$0 w/ PrudentRx)	
Mail Order (90 Days)	\$0 / \$20 / \$50 / \$100	
Rx Out-of-Pocket Maximum	\$2,000 person / \$4,000 family	

**** Separate prescription drug out-of-pocket maximum: \$2,000 person / \$4,000 family. This is in addition to the maximum out of pocket ****

Refer to the Summary Plan Descriptions (SPDs) or Summary of Benefits Coverage (SBCs) for detailed medical plan coverage information.

EMPLOYEE PREMIUM CONTRIBUTIONS EFFECTIVE JULY 1, 2026

Monthly Premiums	Employee Cost
Employee	\$118.90
Employee + Spouse	\$243.75
Employee + Child(ren)	\$202.14
Family	\$291.23

Understanding Your Care Options

Proactively understanding your care options can have a big impact in the amount you pay out-of-pocket when seeking care. The chart below is intended to help you identify the right setting for your specific needs.

Type of Care	Common Services		Approximate Wait Time	Average Member Cost
Teladoc 	- Colds or flu - Bronchitis - Respiratory infection - Pink eye	- Sinus problems - Allergies - Urinary tract infection - Poison ivy	15-20 Minutes	FREE
Your Doctor's Office 	- Preventative services - Vaccinations	Medical problems that are not an immediate, serious threat to your health or life	1 Week or More	\$
Urgent Care 	- Sprains or strains - Mild asthma attack - Sore throat - Earaches	- Minor broken bone - Minor cut - Minor infection - Minor rash	20 – 30 Minutes	\$\$
Emergency Room 	- Sudden change in vision - Sudden trouble talking - Large open wounds - Major burn	- Severe head injury - Heavy bleeding - Chest pain - Major broken bone	3 – 12 Hours	\$\$\$



You've got
Teladoc Health



Access to quality care at your fingertips

General Medical
free/visit

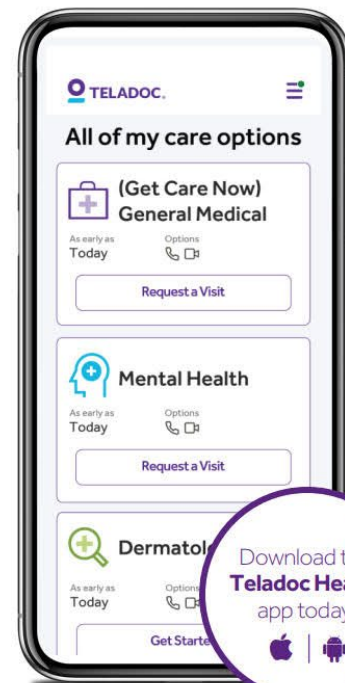
Talk to a licensed doctor for non-emergency conditions 24/7
Flu • Sinus infections • Sore throats • And more

Mental Health
free/ therapist visit
free/ psychiatrist first visit
free/ psychiatrist ongoing visit

Talk to a therapist 7 days a week

Dermatology
free / consult

Upload images of a skin issue online and get a custom treatment plan within two days
Eczema • Acne • Rashes • And more



Set up your account or log in today

Visit [Teladoc.com](https://www.teladoc.com)

Call 1-800-TELADOC (835-2362) | Download the app  

Refer to your employee booklet at umr.com for Teladoc benefits



Reduce out-of-pocket costs on your specialty medications

An innovative way to help you save

What is the program

CVS Caremark® has collaborated with PrudentRx exclusively for a program that may help save you money when you fill eligible specialty medications.*

How it works

A PrudentRx trained member advocate will be able to assist you through a high-touch, proactive engagement process to facilitate enrollment and help you obtain non-need based manufacturer assistance where applicable.** Participating members will have a **\$0 out-of-pocket** cost on eligible specialty medications!†

How to get started

Your enrollment in the program will begin automatically, but additional steps may be needed.†† You can choose to opt-out at any time.‡

We'll send more information before we make this plan change. In the meantime, you can continue to fill your prescriptions as usual.



*Due to limitations that exist within various external pharmacy systems, implementing the PrudentRx solution on high-deductible health plans (HDHPs) with health savings accounts (HSAs) will be limited to only those medications included on the client's specialty drug list and dispensed by CVS Specialty® and will not include limited distribution drugs.

**Not all specialty prescriptions offer manufacturer assistance. Eligibility for third-party copay assistance program is dependent on the applicable terms and conditions required by that particular program and are subject to change. Copay assistance program may not be used with any Federal health care program.

†Participating members enrolled in an HDHP with HSA must fully satisfy their deductible before they are eligible for a final \$0 out-of-pocket cost, unless the member has been prescribed a medication that qualifies as "preventive care" under the Internal Revenue Code, which is administered and enforced by the Internal Revenue Service.

††Some manufacturers require you to sign up to obtain copay assistance that they provide for their medications – in that case, you must call PrudentRx to participate in the copay assistance for that medication. PrudentRx will also contact you if you are required to enroll in the copay assistance for any medication that you take.

‡If you choose to opt out of the program or if you do not affirmatively enroll in any copay assistance as required by a manufacturer, you will be responsible for 30 percent of the cost of your specialty medications.

Jaw Dropping



Transformations Guaranteed!

We'll guide you to the best version of you yet — no starvation, fads, or medications needed.



★★★★★ | 4.9 rating from members

Say goodbye to frustration and hello to your new, Betr life!

Betr uses "Food as Medicine" and simple lifestyle changes to target chronic inflammation - the root cause of poor health.

Forget about band-aid fixes, costly medications counting calories or the latest diet fads. With live 1:1 coaching, community and a 24/7 AI co-pilot, we ensure you get a personalized path to your jaw-dropping transformation.



\$0 COST TO YOU!

100% Covered Program for Select WCA GHT Members and spouses:

Naturally Improve

- ✓ Energy
- ✓ Digestion
- ✓ Mood
- ✓ Pain
- ✓ Sleep
- ✓ Weight

Check your eligibility and enroll today!

Scan the QR code below



Or visit

<https://betrhealth.com/pages/wca-ght>

Health Reimbursement Account (HRA)

HRAs are being implemented by many employers to help manage increasing health care costs and to provide employees with an incentive to be better consumers of health care. The Crivitz School District HRA covers a portion of the deductible after a member meets the first \$500 single and \$1,000 family deductible. The District will then cover the next \$2,500 Single and \$5,000 family deductible.

Your employer is working with DBS to manage and administer the HRA.

The program works as follows:

- You and/or your family members utilize your health plan as you normally would. When you use your health plan, the insurance company will process your claim and send an Explanation of Benefits form (EOB) to you. The EOB form shows the date of service, service provided, cost of the service, and the amount insurance paid on the claim.
- After you've paid your up-front deductible, the remaining deductible will be paid automatically from your HRA with DBS.
- The deductible amounts will be paid directly to the vendor/provider based on your employer's HRA reimbursement plan parameters.
- Create your online account with DBS to review claims and payments as they are processed.
- There are no claim forms to file for the HRA. (However, if you have dual health coverage, you must manually submit EOB forms from the secondary insurance carrier along with a signed claim form for reimbursement.)
- The plan follows the health insurance plan year July 1 through June 30.

Flexible Spending Account (FSA)

With an FSA, you can set aside tax-free money to pay for eligible medical and dependent care expenses. When you participate in an FSA, you decide how much you want to contribute each plan year (July 1 through June 30). The money you contribute is deducted from your pay before taxes are taken out. ***This lowers your taxable income, which means lower taxes for you!***

Crivitz School District offers two types of FSAs administered by Diversified Benefit Services (DBS).

Traditional Health Care FSA

You can use this FSA to pay any qualified health care expense, including copays and deductibles, dental care and vision care. You're not eligible for the General Purpose FSA if you are currently contributing to a Health Savings Account.

Traditional Health Care FSA Contribution Limits

Crivitz School District follows the indexed contribution limits set for this type of account by the Internal Revenue Service (IRS). The contribution limits for the Traditional Health Care FSA work on an individual employee/financial representative basis. The individual maximum is \$3,400. However, if you and your spouse are both eligible for the same employer's FSA, you can each contribute separately to have your own \$3,400 cap.

Dependent Care FSA

The Dependent Care FSA covers the eligible day care expenses for your tax-qualified dependent(s). This can include a tax-qualified dependent under the age of 13 or an elderly parent or spouse who is physically or mentally incapable of self-care and lives with the account owner.

Unmarried individuals and married couples who file a joint tax return can contribute up to a maximum of \$7,500 per year. Individuals who are married and file taxes separately can contribute up to a maximum of \$3,750. You cannot contribute more than you or your spouse earned in income for the year. ***If you're enrolling during the year, you may not be eligible to make the maximum contribution to your FSAs. Talk to your tax advisor before signing up for pretax deductions. See IRS Publication 502 for more information.***

Dental Plan Highlights

Healthy teeth and gums are an important part of maintaining your overall health. That's why Crivitz School District offers a dental plan administered by Delta Dental.

Delta Dental	
Individual Annual Maximum	\$1,000 Policy Year
Deductible	
Employee Only	\$0
Family	\$0
Preventive Care Services	
Exams	100%
Cleanings	100%
Fluoride Treatments	100%
X-Rays	100%
Space Maintainers	100%
Sealants	100%
Emergency Treatment to Relieve Pain <i>(Deductible Applies)</i>	100%
Basic Restorative Services	
Fillings	100%
Endodontics – Surgical / Non-Surgical	100%
Periodontics – Surgical / Non-Surgical	100%
Extractions – Surgical / Non-Surgical and other oral surgery <i>(Deductible Applies)</i>	100%
Major Restorative Services	
Crowns, Inlays, Onlays	100%
Bridges and Dentures	100%
Repairs and Adjustments to Bridges and Dentures	100%
Implants	100%
Orthodontic Services	
Coinsurance	50%
Individual Lifetime Maximum	\$2,000
Dependents Eligible to Age	26
Full-Time Students Eligible to Age	26

EMPLOYEE PREMIUM CONTRIBUTIONS EFFECTIVE JULY 1, 2026

Monthly Premiums	Employee Cost
Employee	\$5.46
Employee + Spouse	\$10.92
Employee + Child(ren)	\$10.64
Family	\$16.10

Delta Dental Plan Programs & Value Adds

Save Money by Staying in the Network

You may seek dental care from any provider; however, your out-of-pocket expenses will be greatly reduced if care is provided by a dentist in the Delta Dental network. For more details or to find a provider in the network, visit www.deltadentalwi.com or call 1-800-236-3712.

Evidence Based Integrated Care*

Your dental plan includes Evidence-Based Integrated Care Plan, which offers additional cleanings and fluoride treatment for certain medical conditions, such as periodontal disease, heart disease, diabetes, and cancer-related treatments. You will need to self-register for the benefit by calling Delta Dental's customer service team, or you can register on the member portal. It's very simple to enroll, and proof of condition is not required.

Check Up Plus*

Your dental plan also includes a feature called Check Up Plus. With Check Up Plus, diagnostic and preventive services don't count against your individual annual maximum! So, you will have more of your annual maximum available if you do need basic and/or restorative care.

Vision Care Discount*

Delta Dental of Wisconsin has partnered with EyeMed Vision Care, to offer you savings on optical costs (up to 35%), with access to thousands of private practice and retail providers nationwide.

Amplifon Hearing Discount*

Delta Dental has partnered with Amplifon to provide member with resources for hearing aids, including access to an Amplifon Hearing Health Care discount card, custom hearing solutions, continuous care, and a risk-free 60 day trial.

*Please see attached flyers for more information.

Vision Plan Highlights

Your eyes provide doctors with a clear picture of your overall health. A comprehensive eye exam can identify serious medical problems such as high blood pressure, diabetes, heart disease and much more. That's why Crivitz School District provides vision care administered by Superior Vision.

Superior Vision	In-Network	Out-of-Network
Frequency		
Vision Exam	Once per 12 months	
Frame	Once per 12 months	
Lenses	Once per 12 months	
Contact Lenses	Once per 12 months	
Vision Benefits		Plan Pays Up To
Vision Examination	\$10 Copay, then 100%	\$35
Retail Frames	\$10 Copay, \$150 Allowance, then 20% off amount over allowance	\$75
Lens Benefit		Plan Pays Up To
Single Vision	100%	\$25
Bifocal	100%	\$40
Trifocal	100%	\$45
Contact Lenses*		Plan Pays Up To
Lens Fitting/Evaluation	Covered in lieu of lenses & frames	No Coverage
Conventional Contacts	\$10 Copay, \$175 Allowance, then 20% off amount over allowance	\$150
Lasic Surgery		\$200 Allowance & Discounts
\$200 Allowance & Discounts <i>Contact Superior Vision for Details</i> <i>Subject to certain exclusions & Limitations</i>		

*Covered in lieu of lenses & frame benefit

EMPLOYEE PREMIUM CONTRIBUTIONS EFFECTIVE JULY 1, 2026

Monthly Premiums	Employee Cost
Employee	\$9.80
Limited Family	\$19.60
Family	\$25.95

Protection Plans

Voluntary Short Term Disability (STD)

Crivitz School District's Short Term Disability plan is administered by The Standard and paid for by the employee. This benefit pays a weekly percentage of your salary if you become temporarily disabled, meaning that you are not able to work for a short period of time due to sickness or injury.

The Standard	Benefit Highlights
Premium	Employee Paid
Weekly Benefit	You may elect varying benefit options (\$147 - \$504)
Sickness Benefit Begins On	4 th Day
Accident Benefit Begins On	1 st Day
Maximum Benefit Duration	90 Days

Long Term Disability (LTD)

Crivitz School District's Long Term Disability plan is administered by The Standard and paid for by the district. This benefit pays a monthly percentage of your salary if you become disabled and are unable to work for an extended period of time.

The Standard	Benefit Highlights
Premium	Employer Paid
Monthly Benefit	90% to \$9,450
Elimination Period	90 Days
Maximum Benefit Duration	Social Security Normal Retirement Age

NOTE: Both the STD and LTD include pre-existing condition limitations. Please review the plan summaries for more details. Earnings for STD and LTD benefits are based on your base annual earnings and do not include other income such as bonuses and commissions.

Protection Plans (continued)

Group Term Life and Accidental Death & Dismemberment (AD&D)

Life Insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump payment if you pass away while employed by Crivitz School District. As an eligible employee, you are covered for Group Term Life and AD&D insurance at no cost to you.

Crivitz School District offers a Group Term Life and AD&D benefit outlined below. Specific details of the plan are covered in the Plan Certificate.

Unum Plan Highlights

Premium	Crivitz School District pays this premium at 100%
Amount of Life Insurance Benefit	Class 1: 2x your annual earnings to \$275,000 Class 2: \$20,0000
Amount of AD&D Benefit	Equal to term life

**Class 1: Administrators & 12 Month Non-Represented Staff*

**Class 2: Employees not eligible in another group*

Voluntary Life Insurance

In addition to the Basic Term Life and AD&D insurance, you have the option to purchase Supplemental Life Insurance coverage for you and your eligible family members. Please see a representative from HR with any questions.

Unum Plan Highlights

Employee Coverage (\$10,000 increments)	Guarantee Issue: \$110,000 Maximum: 5x Earnings or \$500,000
Spouse Coverage (\$5,000 increments)	Guarantee Issue: \$25,000 Maximum: 100% of EE Life or \$500,000
Child Coverage (\$2,000 increments)	Guarantee Issue: Full Benefit Maximum: 100% of EE Life or \$10,000

**Premiums are dependent on age and tobacco use. For a full list of employee premiums, please see your Unum materials.*

Aflac, Allstate, and Globe Life Benefits

Worksite Benefits

As an added benefit, Crivitz School District offers a variety of supplemental benefits through Aflac, Allstate, and Globe Life. These include short term disability, life insurance, cancer and accident coverage. These are paid for by the employee through payroll deduction and tailored to your specific needs.

Please see HR for more information on these products.

The Standard Add-Ons

Employee Assistance Program (EAP)

You, your dependents (including children to age 26) and all household members can contact masters- degreed clinicians 24/7 by phone, online, live chat, email and text. There is even a mobile EAP app. Receive referrals to support groups, a network counselor, community resources or your health plan. If necessary, you will be connected to emergency services. Your program includes up to three face-to-face assessment and counseling sessions per issue. EAP services can help with:

- Depression, grief, loss and emotional well-being
- Family, marital and other relationship issues
- Life improvement and goal-setting
- Addictions such as alcohol and drug abuse
- Stress or anxiety with work or family
- Financial and legal concerns
- Identity theft and fraud resolution



Help, when you need it most

With your Employee Assistance Program and Work/Life Balance services, confidential assistance is as close as your phone or computer.

Employee Assistance Program (EAP)

Your EAP is designed to help you lead a happier and more productive life at home and at work. Call for confidential access to a Licensed Professional Counselor* who can help you.

A Licensed Professional Counselor can help you with:

- Stress, depression, anxiety
- Relationship issues, divorce
- Anger, grief and loss
- Job stress, work conflicts
- Family and parenting problems
- And more

Work/Life Balance

You can also reach out to a specialist for help with balancing work and life issues. Just call and one of our Work/Life Specialists can answer your questions and help you find resources in your community.

Ask our Work/Life Specialists about:

- Child care
- Elder care
- Financial services, debt management, credit report issues
- Identity theft
- Legal questions**
- Even reducing your medical/dental bills!
- And more

Who is covered?

Unum's EAP services are available to all eligible partners and employees, their spouses or domestic partners, dependent children, parents and parents-in-law.

Always by your side

- Expert support 24/7
- Convenient website
- Short-term help
- Referrals for additional care
- Monthly webinars
- Medical Bill Saver™ — helps you save on medical bills

Help is easy to access

Online and Phone support:

Unlimited, confidential, 24/7

In-person: You can get up to 3 visits, available at no additional cost to you with a Licensed Professional Counselor. Your counselor may refer you to resources in your community for ongoing support. Secure, HIPAA-compliant video EAP sessions for those who may prefer the use of technology to receive the service; video counseling services are in lieu of face-to-face sessions.

Employee Assistance Program – Work/Life Balance

Toll-free 24/7 access:

- 1-800-854-1446
- www.unum.com/lifebalance

Turn to us when you don't know where to turn.

Better
benefits
at work.™

unum.com

Not available in all states

*The counselors must abide by federal regulations regarding duty to warn of harm to self or others. In these instances, the consultant may be mandated to report a situation to the appropriate authority.

**State-mandated limitations for legal services in WA apply.

Insurance products are underwritten by the subsidiaries of Unum Group.

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EN-2055 FOR EMPLOYEES (12-23)

The Work-life balance employee assistance program, provided by HealthAdvocate, is available with select Unum insurance offerings. Terms and availability of service are subject to change. Service provider does not provide legal advice; please consult your attorney for guidance. Services are not valid after coverage terminates. Please contact your Unum representative for details.



Don't forget this travel essential!

Pack your worldwide emergency travel assistance phone number and leave travel worries at home.



If you experienced a medical emergency while traveling, would you know whom to call?

Whenever you travel 100 miles or more from home — to another country or just another city — be sure to pack your worldwide emergency travel assistance phone number. Travel assistance speaks your language, helping you locate hospitals, embassies and other “unexpected” travel destinations. Add the number to your cell phone contacts, so it’s always close at hand. Just one phone call connects you and your family to medical and other important services 24 hours a day.

Use your travel assistance phone number to access:

- Hospital admission assistance*
- Emergency medical evacuation
- Prescription replacement assistance
- Transportation for a friend or family member to join a hospitalized patient
- Care and transport of unattended minor children
- Assistance with the return of a vehicle
- Emergency message services
- Critical care monitoring
- Emergency trauma counseling
- Referrals to Western-trained, English-speaking medical providers
- Legal and interpreter referrals
- Passport replacement assistance

With the Assist America Mobile App, you can:

- Call Assist America’s Operation Center from anywhere in the world with the touch of a button.
- Access pre-trip information and country guides.
- Search for local pharmacies (U.S. only).
- Download a membership card.
- View a list of services.
- Search for the nearest U.S. embassy.
- Read Assist Alerts.



Download and activate the app today from the Apple® App Store or Google Play™.

Reference Number: 01-AA-UN-762490

24/7 services anywhere in the world

Unum travel assistance services are provided by Assist America, Inc., a leading provider of global emergency assistance services through employee benefit plans. Assist America's medically certified personnel are ready to help 24 hours a day, 365 days a year, and can connect you with pre-qualified, English-speaking and Western-trained medical providers anywhere in the world.



You can access travel assistance services through the phone number on your travel assistance wallet card. If you have misplaced your card, contact your human resources department and ask for a replacement.

If you need travel assistance anywhere in the world, contact us day or night.



Within the U.S.
1-800-872-1414



Outside the U.S.
(U.S. access code) +609-986-1234



Via e-mail:
medservices@assistamerica.com

Whether traveling for business or pleasure, one phone call connects you to:

- Multilingual, medically certified crisis management professionals
- A state-of-the-art global response operations center
- Qualified medical providers around the world

Travel assistance FAQs

Which countries can I travel to?

Assist America's services have no geographical exclusions. Its worldwide network stands ready to help wherever your travels take you.

Is my family covered?

Your spouse and dependent children up to age 19 (or the age specified by your medical plan) are covered.**

Are pre-existing conditions excluded?

No. Whether your medical emergency is the result of a new or pre-existing condition, Assist America's trained representatives will help you find qualified medical care and facilities.

What about sports-related injuries?

Whether you've been involved in recreational or extreme sporting, worldwide emergency travel assistance will provide support for all your medical needs.

Who pays for the services I use if I have a travel emergency?

Assist America arranges and pays for 100% of the services the company provides, with no caps or charge-backs to either you or your employer. But you must call Assist America first — you can't be reimbursed for services you arrange on your own.*



**Better
benefits
at work.™**

unum.com

Apple is a registered trademark of Apple Inc. Google Play is a trademark of Google LLC.

* Hospital admission is coordinated by Assist America, Inc. It may require a validation of your medical insurance or an advance of funds to the foreign medical facility. You must repay any expenses related to emergency hospital admissions to Assist America, Inc. within 45 days. Worldwide emergency travel assistance services, provided by Assist America, Inc., are available with select Unum insurance offerings. Terms and availability of service are subject to change and prior notification requirements. Services are not valid after coverage terminates. Please contact your Unum representative for details. All emergency travel assistance must be arranged by Assist America, which pays for all services it provides. Medical expenses, such as prescriptions or physician, lab or medical facility fees are paid by the employee or the employee's health insurance.

**Spouses and children traveling on business for their employers are not eligible to access these services during those trips.

Insurance products are underwritten by the subsidiaries of Unum Group.

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EN-1567920 FOR EMPLOYEES (6-23)



Smarter Dental Plans

Enhanced dental benefits for
those who need them most.

Your dental coverage includes Delta Dental of Wisconsin's Evidence-Based Integrated Care Plan (EBICP), which provides **additional cleaning(s) and/or fluoride treatments to individuals with specific medical conditions** that have oral health implications. Enhanced benefits can play an important role in the management of certain medical conditions.

If you or an individual on your plan have one or more of these conditions, you can enroll online. Once you enroll, you are immediately eligible for EBICP benefits.

how to enroll

1. Go to www.deltadentalwi.com.
2. Select the purple "Sign In" button and enter your Username & Password.
3. On your dashboard under "Preventive Care and Plan Features" there will be a section for Additional Benefits. Select "Enroll Now."*
4. In the "Enroll in EBICP" section, select the member and their condition, verify the information, and hit "Select."
5. This member will then be listed under "Your Current EBICP Benefits."

Condition	Additional cleaning(s)	Topical fluoride
Cancer-related treatments	✓	✓
Weakened immune systems	✓	✓
Periodontal (gum) disease*	✓	✓
High-risk cardiac conditions	✓	
Kidney failure or dialysis	✓	
Diabetes	✓	
Pregnancy	✓	

This chart provides a brief summary of additional benefits to persons enrolled in EBICP. Frequency limitations may apply. Refer to your handbook.

**Periodontal cleanings may fall under basic services and may not be covered 100% by the EBICP plan. If you have questions regarding coverage for periodontal cleanings, please contact the Benefit Center at 800-236-3712 before services are performed.*

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SS300H-1905

*If your plan does not include EBICP, "Additional Benefits" will not show.



Smarter Dental Plans

CheckUp Plus™

Our CheckUp Plus™ plan option allows enrollees to get diagnostic and preventive dental services without those costs getting applied to the individual annual maximum. Preventive care saves money over the long-term by reducing the need for more expensive services.

CheckUp Plus™ lets you keep your annual maximum for the things you need, not the things you deserve.

The charts show the impact of CheckUp Plus™ on an enrollee's individual annual maximum compared to a traditional plan. Example assumes two routine check-ups, covered at 100% and a \$1,000 annual maximum.

	CheckUp Plus™	Traditional Dental Plan
Delta Dental Pays	\$300	\$300
Enrollee Pays	\$0	\$0
Maximum Remaining	\$1,000	\$700

Plan benefit and dentist charges vary.

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SS300F-1805



Vision Care Discount

A Vision Discount Program is included with your Delta Dental plan.

Delta Dental of Wisconsin has chosen EyeMed Vision Care® as the network provider for your vision care discount program. This is not insurance, but a discount plan that provides:

- Overall savings up to 35%.
- Access to thousands of private practice and retail providers nationwide.
- Choice of any product, including designer brand-name frames (certain brands impose a no-discount policy and the frame discount is not available).
- Savings on laser vision correction.
- Replacement contact lenses by mail.

accessing your benefits

Receiving your vision care discount is easy.

1. Locate an EyeMed Vision Care provider using the provider search on our website at www.deltadentalwi.com/vision. Choose the Access Network. Or call EyeMed at **866-246-9041** (toll-free).
2. When scheduling an appointment, inform the office that you have a vision discount plan through the EyeMed Access panel of providers.
3. When you arrive for your appointment, present the enrollee card below to receive services.



This is a discount plan. It is not insurance. This discount plan may not be combined with any other discounts, promotional offers, or insurance coverage, and does not apply to EyeMed provider's professional services, or contact lenses.

Vision Care Discount Program Enrollee Cards

(Please detach cards for use)



EyeMed Group Number: 9231093

Group Name: Delta Dental Vision Discount Program
Name: _____

For provider information, go to www.deltadentalwi.com/vision. Choose the Access network. Or call EyeMed Vision Care at **866-246-9041**.

This is a discount plan. It is NOT insurance.



EyeMed Group Number: 9231093

Group Name: Delta Dental Vision Discount Program
Name: _____

For provider information, go to www.deltadentalwi.com/vision. Choose the Access network. Or call EyeMed Vision Care at **866-246-9041**.

This is a discount plan. It is NOT insurance.

Vision Discount Program	
	 Cost/Savings
Exam (with dilation as necessary)	\$5 off comprehensive exam/ \$5 off contact-lens exam
Complete Pair of Glasses The following discounts and fees for frames, lenses, and lens options apply only if a complete pair is purchased in the same transaction. Items purchased separately will be discounted 20% off of the retail price.	
Frames (any frame available at provider location)	35% off retail price
Single Plastic Lenses (including standard scratch coating) Single-Vision Bifocal Trifocal	Member Pays: \$50 \$70 \$105
Lens Options UV Coating Tint (solid and gradient) Standard Polycarbonate Standard Anti-Reflective Coating Standard Progressive (add-on to bifocal)	Member Pays: \$15 \$15 \$40 \$45 \$65
Conventional Contact Lenses (materials only)	15% off retail price
Laser Vision Correction (LASIK or PRK)	15% off retail price or 5% off promotional price
Frequency (exams, frames, lenses, and contact lenses)	Unlimited

additional notes

- After initial purchase, replacement contact lenses may be obtained online at substantial savings and mailed directly to the member.
- Receive 20% discount on items purchased at participating providers not included under the program. 20% discount may not be combined with any other discounts or promotional offers, and the discount does not apply to EyeMed provider's professional services, or contact lenses.
- Retail prices may vary by location.

plan limitations/exclusions:

- Orthoptic or vision training, subnormal vision aids, and associated supplemental testing
- Medical and/or surgical treatment of the eye, eyes, or supporting structures
- Corrective eyewear required by an employer as a condition of employment, and safety eyewear
- Services provided as a result of any Worker's Compensation law
- Plano non-prescription lenses and non-prescription sunglasses (except for 20% discount)

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SS325-1911

Vision Care Discount Program Enrollee Cards

(Please detach cards for use)

Locate an EyeMed provider convenient to you at:



www.deltadentalwi.com/vision



866-246-9041

When scheduling an appointment, inform the provider that you have a vision discount plan through the **EyeMed Access** panel of providers, with Delta Dental of Wisconsin.

At the time of your appointment, remind the provider that you have a vision discount plan through the **EyeMed Access Plan**.

Providers: This is NOT insurance - it is a vision discount plan.

Delta Dental is a Registered Mark of Delta Dental Plans Association.

Locate an EyeMed provider convenient to you at:



www.deltadentalwi.com/vision



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Call Amplifon at 1-888-901-0132 and we'll find a provider near you

2

We'll explain the Amplifon process and help you schedule an appointment

3

We'll send information to you and the provider, ensuring your discount is activated

www.amplifonusa.com/deltadentalwi

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*Savings on top of our already discounted pricing. Please bring this offer with you to your appointment.

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off one
hearing aid

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off two
hearing aids

Amplifon offers a price match on most hearing devices. Some exclusions apply. Not available where prohibited by law. Visit amplifonusa.com or call for more details.

*Some exclusions apply. Limited to one-time claim for loss and damage. Deductibles may apply.

**Amplifon offers a price match on most hearing devices. Some exclusions apply. Not available where prohibited by law. Visit amplifonusa.com or call for more details.

Hearing services are administered by Amplifon Hearing Health Care, Corp. Amplifon Hearing Health Care is solely responsible for the administration of hearing health care services, and its own financial and contractual obligations. Delta Dental of Wisconsin and Amplifon are independent, unaffiliated companies.

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