



Office of Human Resources
Employee Benefits Checklist
 for Classified Staff, Academic Staff, Faculty

Instructions for the Department Payroll & Benefit Coordinator:

1. Complete Section 1 – Employee Information.
2. Have the employee read, sign and date Section 2 – Employee Acknowledgement.
3. Record in Section 3 the Application Received Dates.
4. Sign, date and retain a copy of this form for your files.

Section 1 – Employee Information

Last Name	First Name	Middle	Date of Birth (mm/dd/yyyy)
Department/Division	Person ID	Employment Start Date (mm/dd/yyyy)	

Section 2 – Employee Acknowledgement

I acknowledge I have been informed how to locate the information and applications noted below at <http://benefits.wisc.edu> and that I need to attend Benefits 101.

Employee Signature	Date (mm/dd/yyyy)

Section 3 – Benefit Information and Applications located at <http://benefits.wisc.edu>

Benefit Plan	Application Received Dates (mm/dd/yyyy)
State Group Health Insurance	
EPIC Benefits+	
Dental Wisconsin Insurance	
VSP Vision Insurance	
Income Continuation Insurance (ICI)	
State Group Life Insurance	
Individual and Family Group Life Insurance	
University Insurance Association Life Insurance (UIA)	Mandatory for all eligible Unclassified employees. No Application Required.
UW Employees Inc. Life Insurance	
Accidental Death and Dismemberment Insurance (AD&D)	
Employee Reimbursement Accounts Program (ERA)	
Wisconsin Retirement System (WRS)	No Application Required.
Tax Sheltered Annuity 403(b) Program (TSA)	Voluntary Retirement Savings Program
Wisconsin Deferred Compensation (WDC)	Voluntary Retirement Savings Program

Coordinator Signature	Date (mm/dd/yyyy)



Benefits 101: Benefits Seminar for New Employees for Employees covered by the Wisconsin Retirement System

Presented by: Office of Human Resources, Benefit Services

Welcome to the University of Wisconsin – Madison

If you are a new employee, or an existing employee who is newly covered by the Wisconsin Retirement System, register for this seminar within your first 30 days!

Register Today

Go to www.ohrd.wisc.edu and select **Benefits 101**, under Learn About Your Benefits.

Benefits 101 will help you understand your benefit choices and options. You will receive a *personalized* worksheet with your enrollment deadlines.

Benefits 101 features:

- An overview of your extensive UW benefits package
- An explanation of the information and forms available to you on the benefits website
- An explanation of the value of your sick leave benefit
- An introduction to the mandatory Wisconsin Retirement System and optional retirement programs
- A live question and answer session with a benefits expert

Benefits 101 location:

21 North Park Street – please check the events monitor in the Welcome Center lobby for the room location.



Overview Map



21 North Park Street (southeast campus area)

Benefits information: <http://benefits.wisc.edu>

Send questions to: benefits@ohr.wisc.edu

Coordinator Checklist – WRS Benefits Enrollments

GENERAL REMINDERS:

- ALL employees should attend Benefits 101 within 30 days of coming under the WRS. Many benefit enrollments are only available for selection within 30 days of the WRS start date. For those benefits, the application must be signed and dated within 30 days of WRS start date. Always check with our office to see if the employee has prior service under the WRS. If they do, it can impact their enrollment deadlines.
 - Classified (CP/CJ)
 - Unclassified
 - LTE's (CL)
- Divisions/Departments need to order “New Employee Packet” directly from Materials Distribution Service (MDS) for Classified/Unclassified employees: <http://mds.bussvc.wisc.edu/order/default.asp>. The packets are not provided at Benefits 101. All new employee benefit information is listed online. Grads do not get a packet.
- Encourage employee to complete “fillable” forms online at benefits.wisc.edu. Must print the form to sign/date prior to submission.
- If a department accepts an application they should:
 - Review the application to make sure it is complete and all necessary documentation is attached.
 - Make sure the employee has signed the application
 - Complete the “Received Date” (date you physically receive the application) and “Received By” portions of the form – usually at the bottom of the form. Do not complete the coverage effective date; hire date or other boxes as this will be done at the Service Center.
 - Best Practice: make a copy for the employee once you sign the application with the received date (if possible).
 - Send the application to the Service Center, at 21 N Park St, Ste 5101, as soon as possible. **Do NOT email application as there is restricted data on forms (i.e. SSN).**
- Have employee review Domestic Partner and Imputed Income information prior to enrolling DP for coverage, if applicable. Contact Employee Services (benefits@ohr.wisc.edu) if the employee has questions.
- It is the employee’s responsibility to monitor his/her earnings statement on a Per Pay Period Basis to reconcile appropriate deductions.

Health

- ✓ Employees should complete an application to enroll, change, or decline coverage.
- ✓ If an employee is retiring, if they are not currently enrolled in Health insurance with the UW or State of Wisconsin themselves or through a spouse, they can submit an application to enroll in the Standard Plan, for the month in which they retire.
- ✓ If the employee is married or has a (Domestic Partner) DP, did they provide the detail requested in section 1?
- ✓ **Classified Employees:** Double check the “I Want My Coverage to be Effective” section. Notify the employee that if they mark the “As soon as possible” box, this

Coordinator Checklist – WRS Benefits Enrollments

means that they will pay the FULL premium until the employer contribution starts (after 2 months of WRS for CP/CJ and 6 months for LTE).

- ✓ Is there a health plan selected (Standard Plan, Dean, GHC-SCW, Physicians Plus, Unity-UW Health, etc.)?
- ✓ Did the employee list all dependents covered under section 3? Do they each have a SSN listed? If they do not all have SSN's, employee must complete/attach affidavit (<http://www.bussvc.wisc.edu/ecbs/uws93.pdf>).
- ✓ If the employee is REMOVING Dependents, is that dependent listed in section 3?
- ✓ Department/Division must update the "Work out of State Required" Field on UW Benefits Page for Tier 2 Rates. The Eligibility for Standard Plan Tier 2 Rates form must be completed and submitted to the Service Center: <http://www.bussvc.wisc.edu/ecbs/sgh-certification-eligibility-tier2-rate.pdf>.
- ✓ Section 7 – Terms and Conditions box MUST be checked – Employee must sign and date application.
- ✓ Section 8 –COORDINATOR MUST COMPLETE three boxes!! 1) Write in date the application is received in "Date Application Received by Employer (MM/DD/CCYY)" box, 2) Sign in the "Payroll Representative Signature" box and 3) Provide your telephone number.

Situations where additional documentation is required:

- ✓ Paternity – birth certificates, paternity adjudication or orders for health insurance coverage will be requested for mothers and fathers who are single parents. Information can be found on page 40 of the It's Your Choice Reference Guide.
- ✓ Adoption/Legal Ward (Need to attach legal documents)
- ✓ Does the application include a Domestic Partner (DP)? If so, follow the Domestic Partnership Processing Checklist (<http://uwservice.wisc.edu/docs/forms/sgh-domestic-partnership-checklist-process-uwmadison.pdf>)
- ✓ Personnel Transfer Record – if transfer from another state agency, you must contact that agency for the transfer information. The employee must complete a new health insurance application (and new applications for each plan he/she wishes to continue). If the employee is moving from the service area, they have 30 days from the date of move to change to a new health carrier if their previous health carrier is not available in the area they are moving to. The coverage levels must match the coverage at the previous agency, e.g. a transfer does not give the employee an opportunity to increase life insurance coverage. You can forward a copy of the transfer record to your CHR rep.
- ✓ Loss of Coverage – need "Letter of Credible Coverage" from former provider if you are adding coverage due to involuntary loss of coverage within 30 days of loss. If dependent is entering the USA from a foreign country, must show that the country of origin had National Health Care coverage <http://truecostblog.com/2009/08/09/countries-with-universal-healthcare-by-date/> and include a copy of the passport (Main passport information page and stamped page) or visa paperwork showing date of entry to the USA.
- ✓ Affidavit (<http://www.bussvc.wisc.edu/ecbs/uws93.pdf>) for dependents who do not have SSN's

EPIC BENEFITS+

Coordinator Checklist – WRS Benefits Enrollments

- ✓ Employees should complete an application to enroll/change coverage
- ✓ Employee **MUST** have preventative dental coverage to enroll in EPIC Benefits+ (either through SGH-HMO or another health/dental plan that covers cleanings, x-rays, check-ups).
- ✓ Double check the application for completeness (i.e. if family coverage selected, make sure the employee listed dependents).
- ✓ Sign/Date the application with the received date
- ✓ Include DP affidavit, if applicable.
- ✓ Cancellation request must be received prior to 12/01/XXXX to be effective at the end of the calendar year.

Dental Wisconsin Insurance

- ✓ Employees should complete an application to enroll/change coverage
- ✓ Double check the application for completeness (i.e. if family coverage selected, make sure the employee listed dependents). Common Errors:
 - Did the Employee Select a PLAN (PPO or Select)?
 - If Loss of Coverage/mid-year enrollment, attach applicable documentation
 - Make sure the employee completes Section 5 in its entirety.
- ✓ Sign/Date the application with the received date
- ✓ Include DP affidavit, if applicable.
- ✓ Cancellation request must be received prior to 12/01/XXXX to be effective at the end of the calendar year.

VSP Vision Insurance

- ✓ Employees should complete an application to enroll/change coverage
- ✓ Double check the application for completeness (i.e. if family coverage selected, make sure the employee listed dependents).
- ✓ Remind Employee that he/she will **NOT** receive a card for this insurance. The Person ID# (from earnings statement) is used to verify enrollment.
- ✓ Sign/Date the application with the received date
- ✓ Include DP affidavit, if applicable.
- ✓ Cancellation request must be received prior to 12/01/XXXX to be effective at the end of the calendar year.

Employee Reimbursement Accounts Program (ERA)

- ✓ Employees should complete an application to enroll in coverage during initial enrollment.
- ✓ Employees **MUST** contact the vendor to enroll each year after the initial enrollment. Departments should not accept an enrollment form for the Open/Annual Enrollment period.
- ✓ Separate form and process for mid-year changes (after initial enrollment)
- ✓ Double check the application for completeness:
 - Check to make sure the employee has designated “Dependent Care” or “Medical Expense” (Amounts cannot be switched/reallocated mid-year).

Coordinator Checklist – WRS Benefits Enrollments

- Remind employees that this will be taken out of EACH paycheck for the CALENDAR YEAR. Make sure the correct # of Pay periods are listed on the form.
- ✓ Sign/Date the application with the received date

Income Continuation Insurance (ICI)

- ✓ Employees should complete an application to enroll or decline coverage
- ✓ Double check the application for completeness:
 - If the employee makes more than \$64,000/year, he/she needs to elect or waive the supplemental coverage.
 - Unclassified Employees (paid monthly) MUST select an elimination period and select a coverage effective date in section 3.
- ✓ Sign/Date the application with the received date

State Group Life Insurance

- ✓ Employees should complete an application to enroll or decline coverage during initial enrollment
- ✓ Double check the application for completeness:
 - Review Section 3 to make sure it is clear what the employee is applying for.
- ✓ Sign/Date the application with the received date
- ✓ If the employee would like to enroll or increase coverage after the initial enrollment period (absent of a qualifying event), he/she must do so through the “Evidence of Insurability” process: <http://etf.wi.gov/publications/et2305.pdf>. This includes adding a spouse if married.
- ✓ Remind employee to complete/update beneficiary information with the vendor

Individual and Family Group Term Life Insurance

- ✓ Employees should complete an application to enroll in coverage during initial enrollment.
- ✓ If the employee would like to enroll in coverage after the initial enrollment period, he/she must do so through the “Evidence of Insurability” process.
- ✓ Employee may increase coverage during the annual open enrollment/change period.
- ✓ Employee may not enroll in coverage if spouse is already enrolled with a family plan.
- ✓ Sign/Date the application with the received date
- ✓ Remind employee to complete/update beneficiary information with the vendor

UW Employees Inc. Life Insurance

- ✓ Employees should complete an application to enroll in coverage during initial enrollment.
- ✓ If the employee would like to enroll in coverage after the initial enrollment period, he/she must do so through the “Evidence of Insurability” process or during an open enrollment offering.
- ✓ Sign/Date the application with the received date

Coordinator Checklist – WRS Benefits Enrollments

- ✓ Remind employee to complete/update beneficiary information with the vendor

Accidental Death and Dismemberment Insurance (AD&D)

- ✓ Employees may complete an application to enroll in coverage at any time – coverage effective on the first of the month following receipt of an application.
- ✓ Double check the application for completeness
- ✓ Sign/Date the application with the received date
- ✓ Remind employee to complete/update beneficiary information with the vendor

Tax Sheltered Annuity 403(b) Program

- ✓ Employees may enroll at any time
- ✓ Must set up a UW Account directly with the selected vendor prior to completing a Salary Reduction Agreement (SRA).
- ✓ Double check the SRA for completeness
 - If the employee chose a % of Salary- make sure this is the intent of the employee. If the employee states 100%, this means that he/she will NOT receive a paycheck because 100% of qualified earnings are submitted to the vendor for TSA.
- ✓ Sign/Date the application with the received date
- ✓ Must complete a new SRA for EACH change request.
- ✓ If retiring and selecting their TSA for final pay, they must also submit additional SRA form to change their contribution amount so it does not continue if they are rehired in the future.

Wisconsin Deferred Compensation (WDC)

- ✓ Employees may enroll at any time
- ✓ Must work directly with the vendor for enrollments and changes.
- ✓ In retirement situations, contact Employee Services for assistance with final payout.
- ✓ If retiring and selecting WDC for final pay, they must also submit additional form with WDC to indicate an end date so it does not continue if they are rehired in the future.

Wisconsin Retirement System (WRS)

- ✓ WRS effective date drives benefit opportunities
- ✓ Must send Beneficiary forms and Variable Fund Enrollments directly to Employee Trust Funds.