

2021 Employee Benefits

Grad Assistants, Employees-in-Training, Fellows, Scholars and
Short-Term Academic Staff Employees

Agenda

1. Payroll



- Payroll Schedule
- MyUW
- 12-month Employees
- 9-month Employees

SCAN ME TO



ACCESS LINKS

<http://www.wisconsin.edu/ohrwd/benefits/download/newemp/gradppt21.pdf>

2. Benefits

- Paid Leave
- Choosing Your Benefits (Prepare, Decide, Act)
- State Group Health Insurance & Pharmacy Benefits
- Well-being Resources
- Dental Insurance
- Vision Insurance
- Flexible Spending Accounts
- Life Insurance
- Accidental Death & Dismemberment Insurance
- Accident Insurance
- Retirement Programs
- Other Benefits



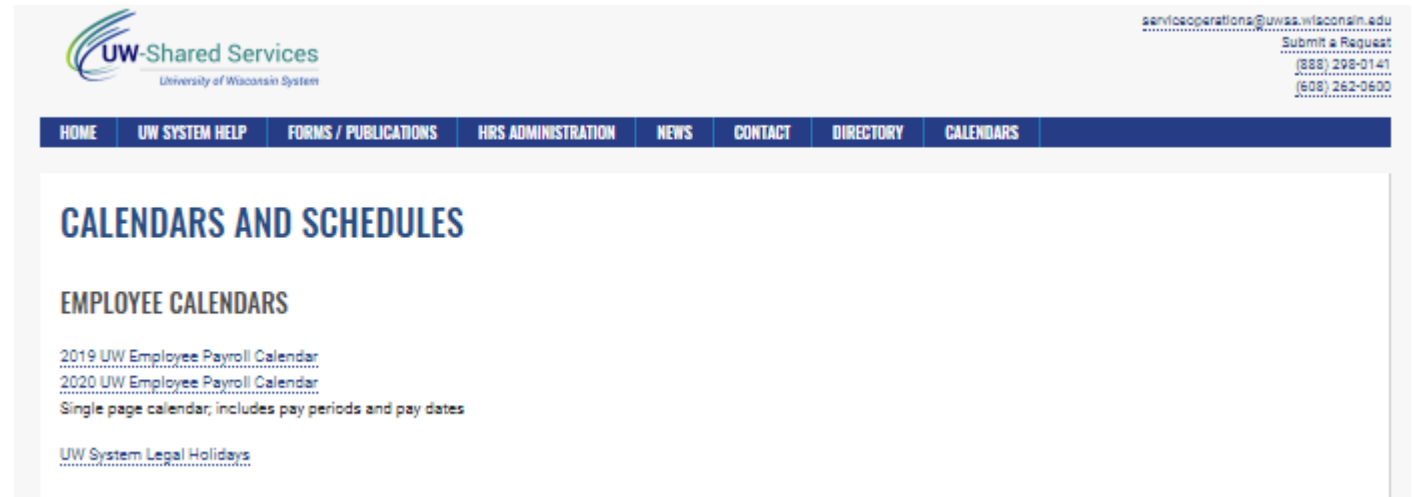
Payroll



Payroll Schedule

- ✓ You are paid one time per month. *
- ✓ Per IRS regulations, there are no taxes withheld from earnings for: Advanced Opportunity Fellow, Fellow, Grad Intern or Trainee, Post-Doc Fellow, Scholar or Trainee. **

- * Monthly paid employees will move from a monthly payroll cycle to a biweekly payroll in July 2021.
- ** You may be responsible for paying taxes on income when you file your tax return.



See the [Payroll Schedule](#) for pay period dates and payroll.

Additional information:

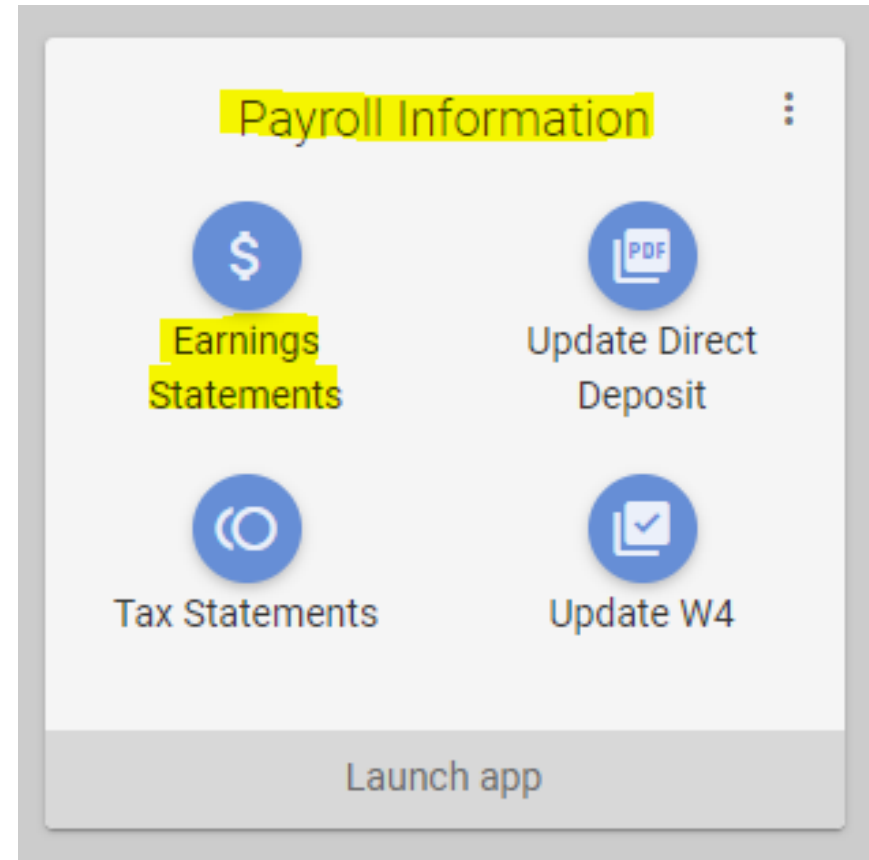


[Payroll Changes Webpage](#)



MyUW

Earnings statements are available in the [MyUW portal](#).



12-month Employees

- ✓ Benefit plan premiums are taken via payroll deduction.
- ✓ Most benefit plan premiums are paid in advance of coverage.
- ✓ There may be multiple deductions from your first check.
(Due to the timing of when you make your elections)



12-month employees have benefit premium deductions every month. *

*Monthly paid employees will move from a monthly payroll cycle to a biweekly payroll in July 2021.

*Deductions will be split evenly across the first two paychecks of the month.

9-month Employees

- ✓ Benefit plan premiums are deducted via payroll deduction.
 - ✓ Most benefit plan premiums are paid in advance of coverage.
 - ✓ There may be multiple deductions from your first check (due to the timing of when you make your elections).
-
- Benefit premium deductions only taken during 9-month academic year.
 - Multiple benefit deductions taken from one to three checks prior to the end of the spring semester to keep your coverage active between academic years if the appointment will continue the following semester.
 - Benefit deductions do not come out of summer session or summer appointment pay.

Benefits



Paid Leave – Short-term Academic Staff

Paid leave is available only for short-term academic staff who are expected to work:

- ✓ At least 440 hours **and**
- ✓ At least one year



CHOOSING YOUR BENEFITS (PREPARE, DECIDE, ACT)

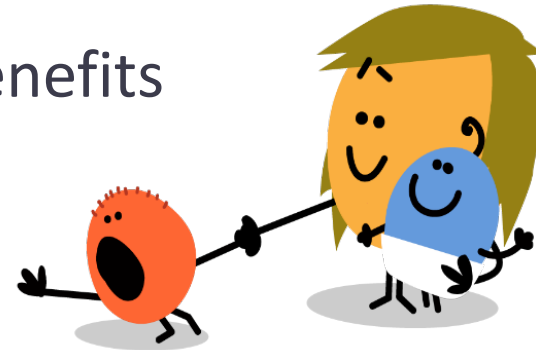
Prepare

- ✓ Consider your needs and the needs of your spouse and/or dependent(s).
- ✓ Use ALEX, your online personalized benefits counselor.
- ✓ Explore the UW System Employee Benefits website.



Decide

- ✓ Decide which plans you would like to enroll in.
- ✓ Decide if your spouse and/or eligible dependent(s) need to be covered.
- ✓ Use the resources available on the [UW System Employee Benefits website](#) to help you decide:
 - Health Plan Search
 - Comparison of Health and Pharmacy Benefits
 - Dental Plan Comparison
 - Premiums



Act

Complete your elections **within 30 days** of your benefits eligibility date.

- ✓ Most employees may enroll online. Log into **Self Service** through your [MyUW portal](#) (Benefit Information module).
- ✓ If you have **prior service**, you may need to enroll using paper applications. Submit to your human resources office within 30 days of eligibility.
- ✓ Paper applications are available on the [UW System Employee Benefits website](#).

Benefits are generally effective the 1st of the month on or following your eligibility date if your elections are submitted within 30 days.

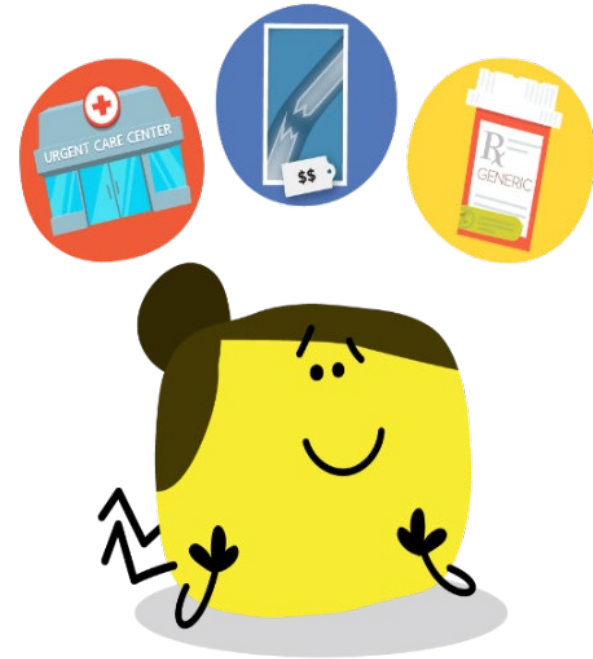
Eligible Dependents

Most of the plans provide coverage for you and your eligible family members. This includes your:

- ✓ Spouse
- ✓ Dependent children (until age 26*). Includes stepchildren, adopted children and pre-adoption placement, legal wards that become your permanent ward before age 26 and grandchildren until your insured child (the grandchild's parent) turns age 18.

Review the [Dependent Eligibility Chart](#) for more details.

**A child with a disability of long-standing duration, who is dependent on you or the other parent for at least 50% of support and maintenance, and are incapable of self-support, may remain covered past age 26.*



STATE GROUP HEALTH INSURANCE

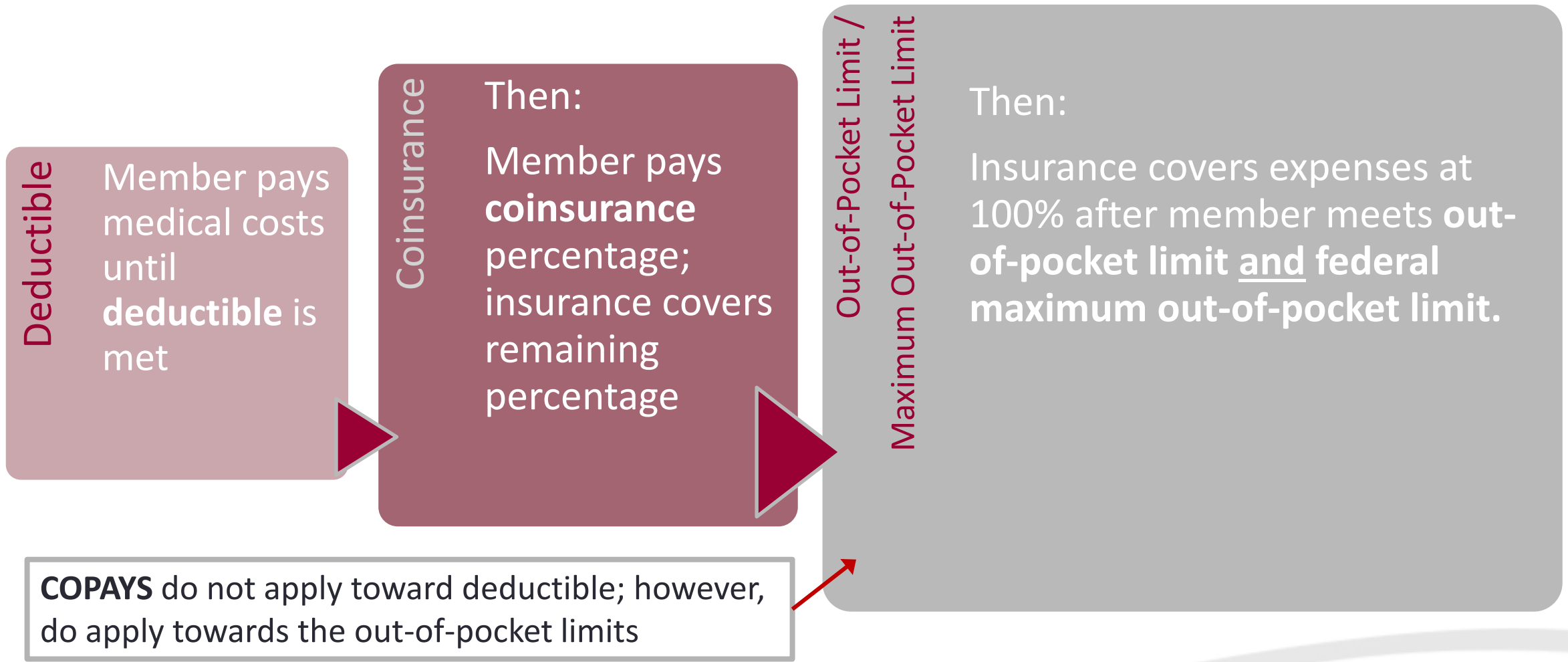
Health Insurance Terminology

	Definition	Example for Each Health Plan Design
Deductible	<p>Amount you pay for covered services before the plan pays.</p> <p>Preventive services not subject to deductible per the Affordable Care Act.</p> <p>Office visits not subject to deductible for Health Plan and Access Plan. Other services received during office visits are subject to deductible (e.g. labs, X-rays).</p>	<p>Health Plan and Access Plan: \$250 Single \$500 Family</p>
Coinsurance	<p>Percentage of covered services you pay.</p> <p>Most services require the deductible to be met before coinsurance applies.</p>	<p>10% Health Plans, in-network Access Plan 20% All plans (covered durable and disposable medical equipment, certain hearing aids and cochlear implants) 30% Out-of-network Access Plan</p>
Copayment	<p>Fixed amount you pay for a covered service, each visit, until the annual out-of-pocket limit has been met.</p>	<p>\$15 Primary Care Physician and Therapy \$25 Specialty Services and Urgent Care Services \$75 Emergency Room</p>

Health Insurance Terminology, continued

	Definition	Example for each Health Plan Design
Out-of-Pocket Limit	<p>The most you pay in a calendar year for covered services. Inclusive of copayments, the deductible and coinsurance.</p> <p>Once you reach this limit the plan pays 100%.</p>	<p>Health Plan and Access Plan: \$1,250 Single \$2,500 Family (separate out-of-pocket limit for pharmacy benefits)</p>
Maximum Out-of-Pocket Limit	<p>The most you pay in a calendar year for covered services before benefits are payable at 100% for costs not limited to the Out-of-Pocket limit.</p> <p>Includes costs for level 3 pharmacy benefits, hearing aids or cochlear implants for adults and some other expenses that do not accumulate toward the Out-of-Pocket limit.</p>	<p>Health Plan and Access Plan: \$6,850 Single \$13,700 Family (separate out-of-pocket limit for pharmacy benefits)</p>

Health Insurance Basics



Life Events

Contact your human resources office **within 30 days** of a Life Event. You only have 30 days following a life event to change and/or enroll in most benefit plans. A life event may be either a family or employment change.

Family Change Examples	Employment Status Change Examples
<ul style="list-style-type: none">• Marriage or divorce• Birth, adoption, guardianship of a child (60 days to enroll)• Permanent Relocation• Spouse or dependent child death	<ul style="list-style-type: none">• Termination of employment• Disability• Change in employment status

State Group Health Insurance Overview

Enrollment Opportunities

- ✓ Initially upon hire or within 30 days of eligibility date
- ✓ Annual Benefits Enrollment (each fall for the upcoming calendar year)

Decisions

- ✓ Elect health insurance or
- ✓ Waive health insurance

*If married to another state/UW System employee who is also eligible for State Group Health Insurance, you may elect 2 single policies **or** 1 family policy.*

State Group Health Insurance Overview

If you **elect** health insurance, choose:

- ✓ Health Plan Design
- ✓ Health Plan Carrier
- ✓ Coverage Level (single, family)*

Health Plan Designs	IYC Health Plan	Access Plan
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

Health Plan Design Options

- This plan uses a specific network of doctors, clinics and hospitals in a **local** geographic area. You must receive services within the network. Coverage is only available out-of-network for urgent and emergency care.
- Premiums: The premium is lower than the Access Plan.

Health Plan



- This plan provides freedom of choice for doctors, clinics and hospitals across the country. Your out-of-pocket costs are lower when in-network providers are used.
- Premium: The Access Plan has **higher** premiums than the Health Plan.

Access Plan




Health Plan Design Options, continued

- ✓ All insurers offer the same uniform benefits.
- ✓ All plan designs include pharmacy benefits.
- ✓ All plan designs include uniform dental benefits, if elected (minimal cost).

Review the [Comparison of Health and Pharmacy Benefits](#).

Regardless of the plan design you select, **preventive health services** are covered at 100%, even if you have not met your deductible. The covered [preventive health services](#) were established by the Patient Protection and Affordable Care Act.

Health Plan Carrier Options

- ✓ If you select the **Health Plan**, you need to select a health plan carrier.
If you select the **Access Health Plan**, your health plan carrier is WEA Trust.
- ✓ To decide on a health plan carrier, review the provider directories through the [Health Plan Search](#). 
- ✓ Health Plan Carrier determines:
 - What county you may receive services in.
 - What doctors, urgent care facilities and hospitals you may use.

State Group Health Insurance Overview

- ✓ Enrollment options when covered by another health plan:
 - If the other plan **is** the State Group Health Insurance plan through a spouse or parent, you may remain on your spouse's or parent's plan until no longer eligible OR you may enroll in your own plan. You may not be covered on both plans.
- ✓ You may **waive** health insurance

State Group Health Insurance Premiums

Graduate Assistants/Short-Term Academic Staff

2021	Health Plan (without Uniform Dental)		Health Plan (with Uniform Dental)	
	Single	Family	Single	Family
Health Plan (excluding Access Plans)	\$46.00	\$114.50	\$50.00	\$123.50
Access Health Plan (work in WI)	\$125.50	\$311.50	\$129.50	\$320.50

Review the State Group Health Insurance [total premium rates](#).

Coordination of Benefits (COB)

- ✓ If you enroll in State Group Health Insurance, you **must** provide information about other health coverage you may have; Coordination of Benefits (COB) information.
- ✓ This should be provided when you enroll or if other coverage through your spouse is added.



Pharmacy Benefits

- ✓ Your cost at the pharmacy depends on the:
 - **Plan design** you select and
 - **Level of the drug** on the formulary list (e.g. generic vs. brand name)
- ✓ You pay a copay or coinsurance per 30-day supply as outlined on the formulary list, up to the annual out-of-pocket maximum.

To find an in-network pharmacy:



[Navitus website](#)



Pharmacy Benefits

Health Plan & Access Health Plan	Copayments / Coinsurance	Out-of-Pocket Limits
Level 1	You pay \$5 per fill	\$600 Single / \$1,200 Family
Level 2	You pay 20% (\$50 max)	\$600 Single / \$1,200 Family
Level 3 <i>Your out-of-pocket could be significantly more for level 3 "dispense as written" drugs. Contact Navitus to determine your options prior to filling level 3 "dispense as written" prescriptions.</i>	You pay 40% (\$150 max)	\$6,850 Single / \$14,700 Family
Level 4 <i>Must fill at a specialty pharmacy</i>	You pay \$50 per fill	\$1,200 Single / \$2,400 Family
Preventive	Plan pays 100%; deductible, copayment and coinsurance do not apply	

Additional information:



[Pharmacy Benefits webpage](#)



WELL-BEING RESOURCES



Employee Assistance Program (EAP)

Provides you and your immediate family members free and confidential resources to address personal issues and/or work-related concerns (e.g. counseling, legal and financial services, work/life services).*

Provides up to six in-person sessions per issue per year.

*Graduate assistants are not eligible; however, similar services may be available through your institution's student health services.

For information specific to the program at your institution:



[EAP webpage](#)



Mental Health Resource



SilverCloud is an online, anonymous, **self-guided** and interactive resource that provides you confidential help with mental health well-being and stress management.

- ✓ Helps manage mild to moderate symptoms of anxiety, depression and/or day-to-day stress
- ✓ Modules will teach you skills on how to understand your thoughts, feelings and behaviors
- ✓ Available 24 hours a day, 7 days a week, at no cost to you

Additional information:



[Mental Health Resources webpage](#)



Well Wisconsin Program

If you enroll in State Group Health Insurance, you (and your enrolled spouse) are eligible to participate in the Well Wisconsin Program.

- ✓ Voluntary wellness program, administered by StayWell, designed to make you more aware of your current/future health risks.
- ✓ StayWell offers a \$150 wellness incentive for completing a:
 - Health check
 - Health assessment
 - Well-Being activity



Health check, assessment and activity must be completed **by October 8, 2021.**

Additional information:



[Well Wisconsin Program](#)



DENTAL INSURANCE



Uniform & Preventive Dental Plans

Both plans provide the same coverage for:

- ✓ Diagnostic,
- ✓ Preventive and
- ✓ Some Basic Services

Uniform Dental

- ✓ Eligible if you **enroll** in State Group Health Insurance (*select a health plan with **OR** without Uniform Dental*)
- ✓ Premium is less than Preventive Dental Plan
- ✓ Premium added to your health insurance premium on your paycheck

Preventive Dental

- ✓ Eligible if you **waive** State Group Health Insurance
- ✓ Premium is more than Uniform Dental Plan
- ✓ Premium will appear as a separate deduction on your paycheck

Locate an in-network dentist:



[Delta Dental website](#)



Supplemental: Select and Select Plus Plans

Provides coverage for major services and **you pay the full premium.**

- ✓ No coverage for preventive or basic services.
- ✓ Administered by Delta Dental.

You may choose **one** of the supplemental plans:

- ✓ Delta Dental PPO – Select
- ✓ Delta Dental PPO Plus Premier – Select Plus

Locate an in-network dentist
(PPO or Premier dentist):



[Delta Dental website](#)



Dental Insurance Plan Comparison

	Uniform and Preventive Plans	Select Plan	Select Plus Plan
Provider Network	PPO & Premier	PPO	PPO & Premier
Benefit Maximum	\$1,000 per person	\$1,000 per person	\$2,500 per person
Deductible	None	\$100 per person	\$25 per person
Preventive Services	100%	No Coverage	No Coverage
Basic Services	90%	No Coverage; except Anesthesia at 50%	No Coverage; except Anesthesia at 80%
Major Services	No Coverage	50%	60% or 80%
Orthodontia	50% up to \$1,500 lifetime maximum; up to age 19; in addition to Select Plus plan	No Coverage	50% up to \$1,500 lifetime maximum; includes adult orthodontia; in addition to Uniform Dental

Note: This is a brief illustration of the main differences. For a thorough comparison, review the [Dental Comparison Chart](#)

Dental Insurance Network Comparison

Networks

- The dentists in this network provide the **deepest** discounts for services (per their contract with Delta Dental).

PPO



- The dentists in this network provide discounts for services (per their contract with Delta Dental); however, **not as deep** as the PPO network discounts.

Premier



Dental Plans

- If you enroll in this plan, you **must** choose a dentist in the PPO network.

Select Plan



- If you enroll in any of these plans, you may choose a dentist in the PPO or Premier networks.

Uniform,
Preventive,
Select Plus Plan



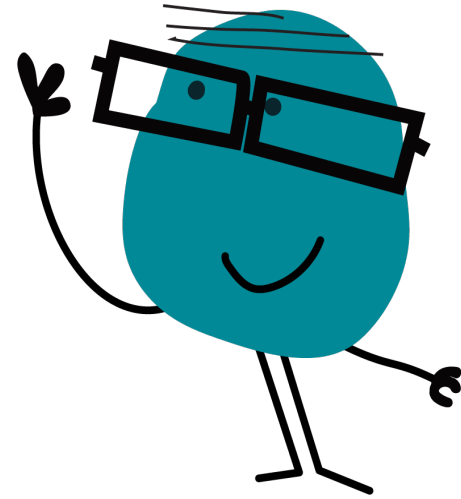
Dental Insurance Network and Premium Comparison

Premiums – All Plans

2021 Monthly Premiums	Employee	Employee + Spouse	Employee + Child(ren)	Family
Uniform Dental *	\$4.00	\$9.00	\$9.00	\$9.00
Preventive Dental	\$30.20	\$75.50	\$75.50	\$75.50
Select	\$9.28	\$18.56	\$12.52	\$22.28
Select Plus	\$16.82	\$33.64	\$31.12	\$51.30

**Added to your State Group Health Premium*

VISION INSURANCE



Vision Insurance



Vision Insurance is administered by DeltaVision
(in partnership with EyeMed Vision Care)

- ✓ Find an in-network provider.
- ✓ You pay the full premium.

2021 Monthly Premiums	Employee	Employee + Spouse	Employee + Child(ren)	Family
Vision Insurance	\$5.72	\$11.42	\$12.88	\$20.58

Additional information:



[Vision Insurance Plan Summary](#)



Vision Insurance Benefits & Coverage

*Summary does not cover all plan details.
Please refer to the Handbook.*

Vision Benefits		
Network	Insight	
Frame/Contact Allowance	\$150/\$150	
Copay (exams/standard plastic lenses)	\$15/\$25	
Frequency (exams/lenses or contact/frames) <i>Based on calendar year</i>	12 months (child - 6 months)/12 months/24 months (child - 12 months)	
Dependent Age Limit	To age 26	
Benefit Details	Network Benefit	Out-of-Network Reimbursement
Exam with Dilation as Necessary	Member pays \$15, plan pays balance	\$45
Retinal Imaging	Member pays up to \$39	N/A
Standard Contact Lens* Fit and Follow-Up	Member pays up to \$40	N/A
Premium Contact Lens** Fit and Follow-Up	10% discount off retail	N/A

**Benefits for out-of-network providers are less.*

Vision Insurance Benefits & Coverage

Benefit Details	Network Benefit	Out-of-Network Reimbursement
Frames (any available frame at provider location)	\$150 allowance, then 20% off balance	\$70
Laser Vision Correction (Lasik or PRK)	15% off retail price or 5% off promotional price	N/A
Plastic Lenses		
Single Vision	Member pays \$25, plan pays balance	\$30
Bifocal	Member pays \$25, plan pays balance	\$50
Trifocal	Member pays \$25, plan pays balance	\$65
Standard Progressive	Member pays \$25	\$50
Premium Progressive	Member pays \$95-\$200	\$50
Lens Options		
UV Coating	Member pays \$0	\$9
Tint (solid and gradient)	Member pays \$15	N/A
Standard Scratch Resistance	Member pays \$0	\$9
Standard Polycarbonate	Member pays \$0 child/\$35 adult	N/A
Anti-Reflective Coating	Member pays \$45-\$85	N/A
Other Add-Ons and Services	20% off retail	N/A
Contact Lenses - In lieu of glasses (Contact lens allowance covers materials only)		
Conventional	\$150 allowance, then 15% off balance	\$105
Disposable	\$150 allowance	\$105
Medically Necessary***	Paid in full by plan	\$210

*Benefits for out-of-network providers are less.



FLEXIBLE SPENDING ACCOUNTS PARKING & TRANSIT ACCOUNTS

Flexible Spending Accounts

Use funds to cover eligible expenses for you, your spouse and qualified dependents.

- ✓ Contributions are deducted from your paycheck in equal amounts throughout the year before Federal, State, and FICA taxes are calculated.
- ✓ Only expenses incurred on/after your coverage effective date through December 31st (or when you lose eligibility) are eligible for reimbursement.
- ✓ Elections do not carry forward from year-to-year. You must re-enroll each year during the Annual Benefits Enrollment period (each fall) for the upcoming year.
- ✓ Changes only allowed mid-year if a qualifying life event occurs.

All claims must be submitted and substantiated by March 31st following the end of the plan year (December 31st).

Additional Information:



[ConnectYourCare](#)



Types of Flexible Spending Accounts

Account Type	Eligible Expenses	Availability of Funds	Carryover	Annual Contribution Maximum
Health Care FSA	Medical, dental, vision and pharmacy	Full amount at the beginning of the year	Up to \$550	\$2,750
Dependent Day Care	After school care, adult or child daycare, preschool	As deposited	None	\$5,000 (based on tax filing status)

Parking & Transit Accounts

- ✓ Contributions are deducted from your paycheck in equal amounts throughout the year before Federal, State, and FICA taxes are calculated.
- ✓ Use funds to cover eligible expenses for you.
- ✓ You may enroll in or change your contribution at any time.
- ✓ All amounts remaining at the end of the calendar year roll over to the next calendar year (assuming you remain eligible).
- ✓ Elections do not carry forward from year-to-year. You must re-enroll each year during the Annual Benefits Enrollment period (each fall) for the upcoming year.

➤ **Parking Account** – There is a payment card that may be used for work-related parking expenses.

➤ **Transit Account** – Claims must be submitted manually for reimbursement.

Additional information:



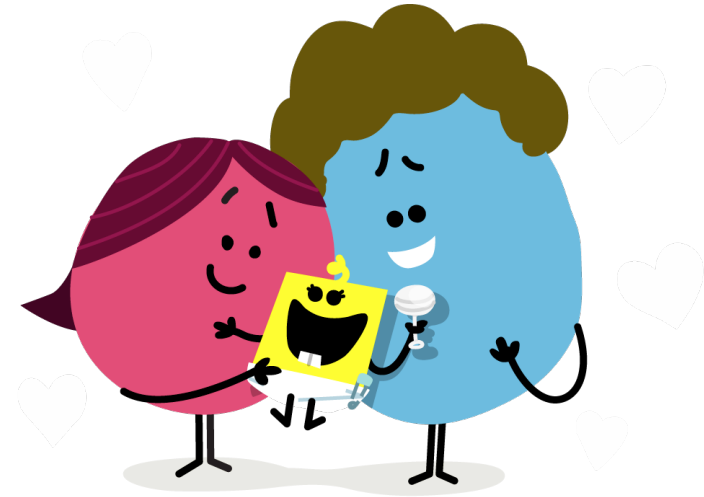
[ConnectYourCare](#)



Parking & Transit Accounts

Account Type	Eligible Expenses	Availability of Funds	Carryover	Monthly Contribution Maximum
Parking *	Work-related parking expenses	As deposited	Unlimited	\$270
Transit	Work-related commuting expenses (public transit, vanpools)	As deposited	Unlimited	\$270

* May not be used for parking that is paid through payroll deduction.



LIFE INSURANCE

Life Insurance

- ✓ You may enroll in more than one plan (if eligible):
 - Individual & Family Life Insurance
 - UW Employees, Inc. Life Insurance
 - University Insurance Association (UIA) Life Insurance*
- ✓ If you do not enroll when you are first eligible, you may enroll through evidence of insurability (proof of good health) or a qualifying life event. Approval not guaranteed.
- ✓ *You are automatically enrolled in the University Insurance Association (UIA) Life Insurance Plan, if eligible. The \$24 annual premium is deducted from December earnings.

Additional information:



[Life Insurance Comparison
Premiums](#)




Life Insurance Coverage

	Individual & Family Life Insurance	UW Employees, Inc. Life Insurance	University Insurance Association (UIA) Life Insurance
Eligibility	Employees eligible for State Group Health Insurance	Employees eligible for State Group Health Insurance	Faculty, Academic Staff or Limited Appointees who meets annual earnings threshold
Who can be covered?	Employee, Spouse or Domestic Partner, Children	Employee only	Employee only
Employee Coverage	Up to \$20,000 initially; can increase coverage annually; \$300,000 maximum coverage	\$7,000 - \$33,000 (coverage based on age)	\$3,400 – \$101,000 (coverage based on age)
Spouse or Domestic Partner Coverage	Spouse or Domestic Partner: Up to \$10,000 initially, can increase coverage annually; \$150,000 maximum coverage	None	None
Child Coverage	Up to \$5,000 initially, can increase coverage annually; \$25,000 maximum coverage	None	None

Beneficiary Designations

Most plans have a separate beneficiary designation.

Exception: *Wisconsin Retirement System (WRS) and Accident Insurance use the same form.*

- ✓ Mail beneficiary designations directly to the address on each form.
- ✓ If you do not submit beneficiary forms, benefits are payable per Standard Sequence.
- ✓ Review your beneficiary designations regularly 
Update as necessary, especially when you have a life event.



ACCIDENTAL DEATH & DISMEMBERMENT ACCIDENT INSURANCE

Accidental Death & Dismemberment Insurance (AD&D)

Provides coverage in case of an accidental death or dismemberment.

- ✓ You may enroll in or make changes at any time.
- ✓ Coverage levels range from \$25,000 to \$500,000.
- ✓ Coverage for you, your spouse/domestic partner and eligible children.

Plan includes:

- ✓ Travel Assist: benefits when you travel at least 100 miles from home.
- ✓ Identity Theft: Education and personalized resolution resources.

You pay the full premium.

Additional information:



[AD&D webpage](#)
[Premiums](#)



Accident Insurance

Provides a cash payment to you if you experience a covered accident.

- ✓ If you do not enroll when first eligible, you may enroll during Annual Benefits Enrollment (fall) for coverage the following year.
- ✓ Coverage for you, your spouse and eligible children.

Plan includes:

- ✓ Accidental Death & Dismemberment benefit
- ✓ Travel Assist benefits
- ✓ Identity Theft: Education and personalized resolution resources.

You pay the full premium:	2021 Monthly Premiums	Employee	Employee + Spouse	Employee + Child(ren)	Family
	Accident Insurance	\$4.38	\$6.26	\$8.44	\$12.32

Additional information:  [Accident Insurance Plan webpage](#)



Accident Insurance Coverage

Review the [Accident Insurance Brochure](#) for a complete listing of covered benefits.

Injuries		
Burn Benefit (varies based on % of body burned)	2 nd degree 3 rd degree	Up to \$500 Up to \$7,500
Child Organized Sports Injury (live birth to 18)		\$50
Concussion		\$100
Dislocation (varies based on type of Dislocation)	Surgical Non-Surgical Partial	Up to \$2,000 Up to \$1,000 Up to \$250
Eye Injury	Removal of Foreign Object: <ul style="list-style-type: none">• With Surgery• Without Surgery	\$125 \$25
Fracture (varies based on type of Fracture)	Surgical Non-Surgical Chip Fracture	Up to \$3,000 Up to \$1,500 Up to \$375
Lacerations	With stitches or staples Without stitches or staples	\$100 \$25

UW Tax-Sheltered Annuity (TSA) 403(b) Program
Wisconsin Deferred Compensation (WDC) 457 Program

RETIREMENT PROGRAMS



UW Tax-Sheltered Annuity (TSA) 403(b) Program

The UW Tax-Sheltered Annuity (TSA) 403(b) Program is a supplemental retirement savings program. Through the TSA Program you can:

- ✓ Contribute a portion of your pay pre-tax, Roth (after-tax) or a combination of both.
- ✓ Select a percentage of pay or a flat dollar amount.
- ✓ Invest in a wide array of mutual funds and fixed and variable annuities.
- ✓ Change your contribution at any time.
- ✓ You make the entire contribution (no employer contribution).
- ✓ Participation is voluntary.

Maximum Annual Contribution

- ✓ If under age 50 - \$19,500
- ✓ If age 50 or older * - \$26,000

** At any time during the year*

Additional Information:



TSA Program



Wisconsin Deferred Compensation (WDC) 457 Program

A 457 deferred compensation plan allows you to save money directly from your paycheck for retirement and offers tax benefits and different investment options.

- ✓ Contribute a portion of your pay pre-tax, Roth (after-tax) or a combination of both.
- ✓ Invest in a wide array of investment options.
- ✓ Change your contribution at any time.
- ✓ You make the entire contribution (no employer contribution).
- ✓ Participation is voluntary.

Maximum Annual Contribution

- ✓ If under age 50 - \$19,500
- ✓ If age 50 or older * - \$26,000

** At any time during the year*

To enroll and/or make changes, complete the forms and submit directly to WDC.

Additional Information:



[WDC Program](#)





OTHER BENEFITS

Edvest 529 College Savings Plan

Save for K-12 education expenses and post-high school education for yourself, a family member, a friend or anyone else.

- ✓ Tax benefits for Wisconsin residents
 - Any earnings have potential to grow tax-free
 - Wisconsin residents may be eligible for a state tax deduction
- ✓ Use for tuition & fees, room & board, computers, books & more!
- ✓ Funds may be used nationwide at universities, colleges, technical colleges, professional schools & graduate programs.
- ✓ You may direct deposit into the 529 College Savings Plan from payroll.
- ✓ Minimum contribution: \$15 per pay period.

Additional information:



[Edvest website](#)



Benefits Plan Resources

UW System Employee Benefits website:

- ✓ General Employee Information page
- ✓ ALEX landing page
- ✓ Benefit Quick Guide
- ✓ Benefit Summary
- ✓ Health & Retirement Contributions Estimator



View earnings, leave, tax statements and benefit information: [MyUW System portal](#).

Thank you for your participation!

SCAN ME TO



ACCESS LINKS

<http://www.wisconsin.edu/ohrwd/benefits/download/newemp/gradppt21.pdf>