

Open Enrollment Guidebook



MONDAY, OCT. 26 - SATURDAY, NOV. 07

Benefits 2027

FOR YOU & YOUR FAMILY

Waukesha County is excited to announce our 2027 benefits program, which we designed to help you stay healthy, feel secure, and maintain a positive work/life balance. Offering a competitive benefits package is just one way we strive to provide our employees with a rewarding workplace. Please read the information provided in this guide carefully. This guidebook serves as a program overview and is not a certified document of the individual plan parameters.

For full details about our plans, please refer to the summary plan descriptions. Please reach out to the Benefits Team with any questions you may have HRBenefits@waukeshacounty.gov.

All benefit eligible employees are required to elect or waive benefits for 2027 in Workday. For coverage effective January 1, 2027, benefit elections must be submitted in Workday by the Open Enrollment close date, which is Saturday, November 7 at 11:59 p.m. CST.

RESOURCES

- Call: Human Resources 262.548.7044
- Email: hrbenefits@waukeshacounty.gov
- Intranet (Internal): <https://waukeshacountywi.sharepoint.com/sites/workdayatwaukesha>
- Internet: (External): <https://www.waukeshacounty.gov/administration/human-resources/employee-benefits/open-enrollment/>

The Benefit Team will host **Open Enrollment Hours** in ADM Room 355 on the following dates:

- Thursday, October 29: 9 – 11 PM
- Tuesday, November 3: 1 – 3 PM

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Eligibility & Changes

Eligible Employees

All regular full-time employees are eligible to participate in the Waukesha County health plan. Eligible dependents generally include:

- Your legally married spouse
- Children up to age 26, including natural, adopted, stepchildren, or children obtained through court-appointed legal guardianship.
- Your unmarried child who is disabled, and unable to support themselves due to a mental or physical disability.

Dependent Verification - You must provide proof of eligibility for any dependent(s) you add to your benefit plans who **are not already covered** under your current elections.

Qualifying Life Events

All new hire and open enrollment elections are final. You can only make changes to your election if you experience a qualifying event, such as marriage, divorce, birth of child, adoption & placement for adoption, change in employee employment status, change in spouses' employment status - loss/gain of coverage.

A qualifying event must be reported to Human Resources within **30 days** of the event.

What's Changing for 2027?

- Health insurance premiums are increasing for both health plans.
 - Choice Plus is increasing by **9.7%**
 - A per paycheck increase of **\$9.72** for single employee premium and **\$26.34** for family premium.
 - HDHP is increasing by **7.7%**
 - A per paycheck increase of **\$3.98** for single employee premium and **\$10.77** for family premium.
- Dental Delta Exclusive are increasing by **8%**
 - A per paycheck increase of **\$2.83** for single employee premium and **\$8.79** for family premium.
- Vision Insurance premiums are increasing by **9%**
 - A per paycheck increase of **\$0.34** for EE+1 employee premium and **\$0.57** for family premium
- 2027 Health Savings Account, Flexible Spending and Dependent Care annual maximum limits are increasing.
- Voluntary Short Term Disability Insurance is a new benefit option in 2027.



PREMIUMS / PLAN COST – FULL TIME

MEDICAL - DENTAL – VISION - PREMIUMS				
PLAN	COVERAGE LEVEL	EMPLOYEE PER PAY PERIOD DEDUCTION (BI-WEEKLY)	EMPLOYEE PREMIUM (MONTHLY)	WAUK CO. PREMIUM (MONTHLY)
MEDICAL – HDHP	Single	\$55.72	\$120.73	\$684.13
	Family	\$150.57	\$326.23	\$1,848.61
MEDICAL – Choice Plus (HRA Completed)	Single	\$110.38	\$239.15	\$956.58
	Family	\$297.91	\$645.47	\$2,581.86
MEDICAL – Choice Plus (No HRA)	Single	\$165.56	\$358.72	\$837.01
	Family	\$446.86	\$968.20	\$2,259.13
MEDICAL – Choice Plus (1 of 2 HRA Completed)	Family	\$372.38	\$806.83	\$2,420.50
DENTAL – Standard	Single	\$1.38	\$2.98	\$26.82
	Family	\$4.78	\$10.36	\$93.25
DENTAL – Exclusive	Single	\$25.91	\$56.15	\$26.82
	Family	\$75.57	\$163.73	\$93.25
VISION	Single	\$1.77	\$3.84	\$3.84
	Employee + 1	\$3.46	\$7.49	\$7.49
	Family	\$5.30	\$11.49	\$11.49

HEALTH SAVINGS ACCOUNT (HSA) CONTRIBUTION – MUST BE ON HDHP			
COVERAGE LEVEL	WAUK CO. HRA INCENTIVE APPLIED (BI-WEEKLY)	WAUK CO. HRA INCENTIVE APPLIED (ANNUALLY)	2027 IRS HSA LIMIT (ANNUALLY)
Single – HDHP	\$43.27	\$1,125	\$4,500
Family – HDHP (2 HRA Completed)	\$86.54	\$2,250	\$9,000
Family – HDHP (1 of 2 HRA Completed)	\$57.70	\$1,500	\$9,000

SHORT TERM DISABILITY
STD is calculated based on the employees' annual earnings and their age. Below are the rates per age. The benefit amount is equal to 60% of your weekly covered earnings up to \$1,500 per week.

Formula Below:

1. Enter your weekly earnings, not exceed \$1,500.
2. Multiply the amount on Line 1 by 0.60.
3. Find your rate from the age table displayed.
4. Multiply the amount on Line 2 by the rate for your age entered on Line 3.
5. Divide the amount on Line 4 by 10 and enter the amount on Line 5 to get your monthly payroll deduction.

Example: Jane Smith is age 35.

1. Weekly earnings = \$400
2. $400 \times 0.60 = \$240$
3. Age rate = \$0.478
4. $\$240 \times \$0.478 = \$114.72$
5. $\$114.72 / 10 = \11.47 monthly premium deduction

Age	Rate per \$10 benefit
18-24	\$0.535
25-29	\$0.624
30-34	\$0.617
35-39	\$0.478
40-44	\$0.438
45-49	\$0.493
50-54	\$0.607
55-59	\$0.720
60-64	\$0.806
65-69	\$1.009
70+	\$1.303

VOLUNTARY DEPENDENT LIFE INSURANCE			
PLAN COVERAGE	EMPLOYEE PAY PERIOD DEDUCTION (BI-WEEKLY)	CHILD COVERAGE	SPOUSE COVERAGE
\$5,000 / \$10,000	\$0.92	\$5,000	\$10,000
\$10,000 / \$20,000	\$1.85	\$10,000	\$20,000

VOLUNTARY LIFE - EMPLOYEE											
COVERAGE	PREMIUM (BI-WEEKLY) BASED ON AGE										
	18-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$25,000	\$1.15	\$1.15	\$1.38	\$1.73	\$2.19	\$3.12	\$5.08	\$8.19	\$12.46	\$23.54	\$38.08
\$50,000	\$2.31	\$2.31	\$2.77	\$3.46	\$4.38	\$6.23	\$10.15	\$16.38	\$24.92	\$47.08	\$76.15
\$75,000	\$3.46	\$3.46	\$4.15	\$5.19	\$6.58	\$9.35	\$15.23	\$24.58	\$37.38	\$70.62	\$114.23
\$100,000	\$4.62	\$4.62	\$5.54	\$6.92	\$8.77	\$12.46	\$20.31	\$32.77	\$49.85	\$94.15	\$152.31
\$125,000	\$5.77	\$5.77	\$6.92	\$8.65	\$10.96	\$15.58	\$25.38	\$40.96	\$62.31	\$117.69	\$190.38
\$150,000	\$6.92	\$6.92	\$8.31	\$10.38	\$13.15	\$18.69	\$30.46	\$49.15	\$74.77	\$141.23	\$228.46
\$175,000	\$8.08	\$8.08	\$9.69	\$12.12	\$15.35	\$21.81	\$35.54	\$57.35	\$87.23	\$164.77	\$266.54
\$200,000	\$9.23	\$9.23	\$11.08	\$13.85	\$17.54	\$24.92	\$40.62	\$65.54	\$99.69	\$188.31	\$304.62
\$225,000	\$10.38	\$10.38	\$12.46	\$15.58	\$19.73	\$28.04	\$45.69	\$73.73	\$112.15	\$211.85	\$342.69
\$250,000	\$11.54	\$11.54	\$13.85	\$17.31	\$21.92	\$31.15	\$50.77	\$81.92	\$124.62	\$235.38	\$380.77

VOLUNTARY LIFE - SPOUSE											
COVERAGE	PREMIUM (BI-WEEKLY) BASED ON AGE (SPOUSE'S AGE MATCHES EMPLOYEE'S AGE)										
	18-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$5,000	0.23	0.23	0.28	0.35	0.44	0.62	1.02	1.64	2.49	4.71	7.62
\$10,000	0.46	0.46	0.55	0.69	0.88	1.25	2.03	3.28	4.98	9.42	15.23
\$15,000	0.69	0.69	0.83	1.04	1.32	1.87	3.05	4.92	7.48	14.12	22.85
\$20,000	0.92	0.92	1.11	1.38	1.75	2.49	4.06	6.55	9.97	18.83	30.46
\$25,000	1.15	1.15	1.38	1.73	2.19	3.12	5.08	8.19	12.46	23.54	38.08
\$30,000	1.38	1.38	1.66	2.08	2.63	3.74	6.09	9.83	14.95	28.25	45.69
\$35,000	1.62	1.62	1.94	2.42	3.07	4.36	7.11	11.47	17.45	32.95	53.31
\$40,000	1.85	1.85	2.22	2.77	3.51	4.98	8.12	13.11	19.94	37.66	60.92
\$45,000	2.08	2.08	2.49	3.12	3.95	5.61	9.14	14.75	22.43	42.37	68.54
\$50,000	2.31	2.31	2.77	3.46	4.38	6.23	10.15	16.38	24.92	47.08	76.15

VOLUNTARY LIFE – CHILD(REN)	
COVERAGE	PREMIUM (BI-WEEKLY)
\$2,000	\$0.18
\$4,000	\$0.35
\$6,000	\$0.53
\$8,000	\$0.70
\$10,000	\$0.88
\$12,000	\$1.05
\$14,000	\$1.23
\$16,000	\$1.40
\$18,000	\$1.58
\$20,000	\$1.75

CRITICAL ILLNESS INSURANCE						
COVERAGE	EMPLOYEE AGE (PREMIUM BI-WEEKLY)					
	18 - 29	30 – 39	40 – 49	50 – 59	60 - 69	70+
\$10,000	\$1.62	\$2.40	\$4.98	\$10.29	\$19.06	\$33.55
\$20,000	\$3.23	\$4.80	\$9.97	\$20.58	\$38.12	\$67.11
\$30,000	\$4.85	\$7.20	\$14.95	\$30.88	\$57.18	\$100.66

ACCIDENT INSURANCE	
COVERAGE	PREMIUM (BI-WEEKLY)
Employee	\$3.74
Employee + Spouse	\$5.97
Employee + Child(ren)	\$7.06
Family	\$11.06

HOSPITAL INDEMNITY INSURANCE	
COVERAGE	PREMIUM (BI-WEEKLY)
Employee	\$6.45
Employee + Spouse	\$11.04
Employee + Child(ren)	\$9.19
Family	\$16.31

PREMIUMS / PLAN COST – PART TIME

MEDICAL- DENTAL- VISION- PREMIUMS				
PLAN	COVERAGE LEVEL	EMPLOYEE PER PAY PERIOD DEDUCTION (BI-WEEKLY)	EMPLOYEE PREMIUM (MONTHLY)	WAUK CO. PREMIUM (MONTHLY)
MEDICAL – HDHP	Single	\$92.87	\$201.22	\$603.65
	Family	\$501.89	\$1,087.42	\$1,807.42
MEDICAL – Choice Plus (HRA Completed)	Single	\$137.97	\$298.93	\$896.80
	Family	\$744.77	\$1,613.67	\$1,613.67
MEDICAL – Choice Plus (No HRA)	Single	\$275.94	\$597.87	\$597.87
	Family	\$1,117.15	\$2,420.50	\$806.83
MEDICAL – Choice Plus (1 of 2 HRA Completed)	Family	\$1,117.15	\$2,420.50	\$806.83
DENTAL – Standard	Single	\$6.88	\$14.90	\$14.90
	Family	\$23.91	\$51.80	\$51.80
DENTAL – Exclusive	Single	\$31.42	\$68.07	\$14.90
	Family	\$94.69	\$205.17	\$51.81
VISION	Single	\$1.77	\$3.84	\$3.84
	Employee + 1	\$3.42	\$7.40	\$7.40
	Family	\$5.30	\$11.49	\$11.49

HEALTH SAVINGS ACCOUNT (HSA) CONTRIBUTION – MUST BE ON HDHP			
COVERAGE LEVEL	WAUK CO. HRA INCENTIVE APPLIED (BI-WEEKLY)	WAUK CO. HRA INCENTIVE APPLIED (ANNUALLY)	2027 IRS HSA LIMIT (ANNUALLY)
Single – HDHP	\$43.27	\$1,125	\$4,500
Family – HDHP (2 HRA Completed)	\$86.54	\$2,250	\$9,000
Family – HDHP (1 of 2 HRA Completed)	\$57.70	\$1,500	\$9,000

VOLUNTARY DEPENDENT LIFE INSURANCE			
PLAN COVERAGE	EMPLOYEE PAY PERIOD DEDUCTION (BI-WEEKLY)	CHILD COVERAGE	SPOUSE COVERAGE
\$5,000 / \$10,000	\$0.92	\$5,000	\$10,000
\$10,000 / \$20,000	\$1.85	\$10,000	\$20,000

VOLUNTARY LIFE - EMPLOYEE											
COVERAGE	PREMIUM (BI-WEEKLY) BASED ON AGE										
	18-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$25,000	\$1.15	\$1.15	\$1.38	\$1.73	\$2.19	\$3.12	\$5.08	\$8.19	\$12.46	\$23.54	\$38.08
\$50,000	\$2.31	\$2.31	\$2.77	\$3.46	\$4.38	\$6.23	\$10.15	\$16.38	\$24.92	\$47.08	\$76.15
\$75,000	\$3.46	\$3.46	\$4.15	\$5.19	\$6.58	\$9.35	\$15.23	\$24.58	\$37.38	\$70.62	\$114.23
\$100,000	\$4.62	\$4.62	\$5.54	\$6.92	\$8.77	\$12.46	\$20.31	\$32.77	\$49.85	\$94.15	\$152.31
\$125,000	\$5.77	\$5.77	\$6.92	\$8.65	\$10.96	\$15.58	\$25.38	\$40.96	\$62.31	\$117.69	\$190.38
\$150,000	\$6.92	\$6.92	\$8.31	\$10.38	\$13.15	\$18.69	\$30.46	\$49.15	\$74.77	\$141.23	\$228.46
\$175,000	\$8.08	\$8.08	\$9.69	\$12.12	\$15.35	\$21.81	\$35.54	\$57.35	\$87.23	\$164.77	\$266.54
\$200,000	\$9.23	\$9.23	\$11.08	\$13.85	\$17.54	\$24.92	\$40.62	\$65.54	\$99.69	\$188.31	\$304.62
\$225,000	\$10.38	\$10.38	\$12.46	\$15.58	\$19.73	\$28.04	\$45.69	\$73.73	\$112.15	\$211.85	\$342.69
\$250,000	\$11.54	\$11.54	\$13.85	\$17.31	\$21.92	\$31.15	\$50.77	\$81.92	\$124.62	\$235.38	\$380.77

VOLUNTARY LIFE - SPOUSE											
COVERAGE	PREMIUM (BI-WEEKLY) BASED ON AGE (SPOUSE'S AGE MATCHES EMPLOYEE'S AGE)										
	18-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$5,000	0.23	0.23	0.28	0.35	0.44	0.62	1.02	1.64	2.49	4.71	7.62
\$10,000	0.46	0.46	0.55	0.69	0.88	1.25	2.03	3.28	4.98	9.42	15.23
\$15,000	0.69	0.69	0.83	1.04	1.32	1.87	3.05	4.92	7.48	14.12	22.85
\$20,000	0.92	0.92	1.11	1.38	1.75	2.49	4.06	6.55	9.97	18.83	30.46
\$25,000	1.15	1.15	1.38	1.73	2.19	3.12	5.08	8.19	12.46	23.54	38.08
\$30,000	1.38	1.38	1.66	2.08	2.63	3.74	6.09	9.83	14.95	28.25	45.69
\$35,000	1.62	1.62	1.94	2.42	3.07	4.36	7.11	11.47	17.45	32.95	53.31
\$40,000	1.85	1.85	2.22	2.77	3.51	4.98	8.12	13.11	19.94	37.66	60.92
\$45,000	2.08	2.08	2.49	3.12	3.95	5.61	9.14	14.75	22.43	42.37	68.54
\$50,000	2.31	2.31	2.77	3.46	4.38	6.23	10.15	16.38	24.92	47.08	76.15

VOLUNTARY LIFE – CHILD(REN)	
COVERAGE	PREMIUM (BI-WEEKLY)
\$2,000	\$0.18
\$4,000	\$0.35
\$6,000	\$0.53
\$8,000	\$0.70
\$10,000	\$0.88
\$12,000	\$1.05
\$14,000	\$1.23
\$16,000	\$1.40
\$18,000	\$1.58
\$20,000	\$1.75

CRITICAL ILLNESS INSURANCE						
COVERAGE	EMPLOYEE AGE (PREMIUM BI-WEEKLY)					
	18 - 29	30 – 39	40 – 49	50 – 59	60 - 69	70+
\$10,000	\$1.62	\$2.40	\$4.98	\$10.29	\$19.06	\$33.55
\$20,000	\$3.23	\$4.80	\$9.97	\$20.58	\$38.12	\$67.11
\$30,000	\$4.85	\$7.20	\$14.95	\$30.88	\$57.18	\$100.66

ACCIDENT INSURANCE	
COVERAGE	PREMIUM (BI-WEEKLY)
Employee	\$3.74
Employee + Spouse	\$5.97
Employee + Child(ren)	\$7.06
Family	\$11.06

HOSPITAL INDEMNITY INSURANCE	
COVERAGE	PREMIUM (BI-WEEKLY)
Employee	\$6.45
Employee + Spouse	\$11.04
Employee + Child(ren)	\$9.19
Family	\$16.31

Medical Insurance



HEALTH PLAN COMPARISON

Nothing is more important than your overall health and well-being! That's why your benefits program provides medical insurance and access to our Waukesha Employee Health and Wellness Center to help keep you and your family healthy. Waukesha County offers health insurance through UnitedHealthcare.

WDSLU Employees & Employees hired after 1/1/2017 are only eligible for the HDHP option.

Medical Plan Details In-Network	Choice Plus	High Deductible Health Plan (HDHP)
Calendar Year Deductible		* Pay deductible first, then co-pay
Single	\$800	\$2,100
Family	\$2,400	\$4,200
Co-Insurance after Deductible		
Single / Family	Tier 1 Provider - 80%/20% Non-Tier 1 Provider - 70%/30%	
Out of Pocket Maximum (Deductible + Co-Insurance + Rx Co-Pays)		
Single	\$2,600	\$3,250
Family	\$6,600	\$6,500
Waukesha Employee Health & Wellness Center		
Preventive	\$0	\$0
Non-Preventive	\$0	\$28
Physical Therapy	\$0	\$28
Physician Office Visit (Co-Pays)		
Preventive Care	100%	
Primary Care	Tier 1 - \$35 / Non-Tier 1 - \$50	
Specialist Office	Tier 1 - \$70/ Non-Tier 1 - \$100	
UHC Approved Virtual Provider	\$10	
Urgent Care	\$150	
Hospital Services		
Emergency Room	Deductible then Co-Insurance	
Inpatient		
Outpatient		
Prescription Drugs / Mail Order *		
Generic	\$10	
Preferred Brand	\$35	
Non- Preferred Brand	\$50	
WEHWC Clinic	No Separate Charge	

HSA

Health Savings Account

OPTUM BANK

Health Savings Accounts (HSA) are like a 457 for healthcare. It is a tax-advantaged personal savings or investment account that individuals can use to save and pay for qualified healthcare expenses, now or in the future. **Only those on the HDHP can participate in the HSA.**



The dollars roll over from year to year. If not used for health care, they can be used in retirement for non-medical expenses and taxed like a 457.

However, unlike other financial savings plans (Roth IRA, Traditional IRA, 457, etc.), an HSA has the unique potential to offer triple tax savings through:

- Pre-tax or tax-deductible contributions to the HSA
- Tax-free interest or investment earnings
- Tax-free distributions, when used for qualified medical expenses

HOW MUCH CAN YOU CONTRIBUTE TO AN HSA?

For those on the HDHP, who have completed the Health Risk Assessment (HRA) / Biometric Screen, will receive a health savings contribution from Waukesha County. The HRA consists of a biometric screening that includes a blood draw, height, weight, and blood pressure measuring. If you are 55+ you can contribute an additional \$1,000 to your account.

2027 HSA CONTRIBUTION LIMITS

Annual Maximum			
Single	\$4,500	Family	\$9,000

If you are contributing to an HSA and completed the HRA; include Waukesha Co. HRA contribution in the maximum.

Changes can be made at any time in Workday

Reach out to the HR Benefits Team for instructions to make HSA Election Change at hrbenefits@waukeshacounty.gov

WHAT CAN I USE HSA DOLLARS FOR?

- All expenses covered under your health plan
- Prescription drug, dental or vision plans
- Deductible Expenses
- Coinsurance Expenses
- Dental and Vision out of pockets
- Out of Network benefits
- COBRA Premiums
- Chiropractor
- Acupuncture
- Braces
- Homeopathic
- Psychiatrist/Psychologist
- Lodging when away from home for medical treatment
- Vitamins (with prescription)

WHO IS ELIGIBLE TO CONTRIBUTE TO AN HSA?

- You are not covered by any other non-high-deductible health plan, such as a spouse's plan, that provides any benefits covered by the County's high-deductible health plan.
- You are not enrolled in Medicare or Tricare.
- You have not received Veterans Administration (VA) benefits within the past three months. Veterans enrolled in a high-deductible health plan and who have a service-related disability only, may make or receive an HSA contribution regardless of when they receive VA benefits.
- You cannot be claimed as a dependent on another person's tax return.
- You are not covered by a health care flexible spending account (FSA) or health reimbursement account (HRA).

If you are not eligible to contribute to an HSA or your circumstances change and you are no longer eligible, you are responsible for notifying Human Resources. If you are not eligible to contribute to an HSA, you still may be able to contribute pre-tax dollars to the Flexible Spending Account. More information is provided later in the guidebook. If you have questions about your own situation, please consult a tax or legal professional.

A change in eligibility is not a qualifying event to change health plans. If you enroll in the High-Deductible Health Plan, Waukesha County will assume you are eligible to receive the annual employer contribution unless notified not to make the contribution. However, once you are no longer eligible to contribute to the HSA, you can keep the account as long as you like and use it to pay for qualified medical expenses income tax-free.

Value Added

Programs with Medical Insurance

Must be enrolled in the Waukesha County's Health Plan to use these programs. [All these programs are free except for One Pass](#)



Noom is a weight-loss program that helps users build healthier habits through behavior change, personalized coaching, food and activity tracking, educational tools, and community support. Its focus is on sustainable lifestyle changes for long-term health and weight management.

Virta Health helps people manage—and potentially reverse—type 2 diabetes through personalized care, lifestyle changes, and medical supervision. The program combines individualized treatment plans, low-carb nutrition, continuous health monitoring, and educational support to improve.



Hinge Health is a leading digital musculoskeletal (MSK) care solution that helps reduce chronic pain, improve mobility, and enhance quality of life. It combines personalized exercise therapy, expert support, convenient virtual access, and data-driven insights to deliver effective, comprehensive MSK care.

Bend Health is a digital health platform that supports mental, emotional, and physical well-being of children, teens, and young adults (ages 1–25). It offers personalized care plans, expert support, progress tracking, and convenient access to wellness tools—all in one place.



Maven Maternity is your dedicated partner in navigating the journey of pregnancy with confidence and care. Maven Maternity offers a suite of personalized services and expert support to help you and your baby thrive from conception through postpartum.

True Genomics with TrueRx helps you understand how your genetics may affect your response to medications, helping identify the most effective treatment while reducing trial-and-error and potential side effects. Participation is voluntary and not required to receive pharmacy benefits



One Pass Select is an exclusive UnitedHealthcare wellness benefit that gives members flexible access to fitness and wellness services through a subscription-based program. Key benefits include a large fitness network, flexible access with no long-term commitment, integrated wellness resources, easy enrollment, and exclusive member perks.

Waukesha County has partnered with Curally to support you and your family members whose lives are impacted by major health issues and long-term chronic conditions like Diabetes, Hypertension, Respiratory, Gastrointestinal and Cardiac Disease.

The Curally model involves ongoing face to face management with a highly skilled nurse and a physician Medical Director. Dedicated Curally staff for Waukesha County include Ernie Vesta, MD and Norma Mercado, RN.

If you participate in the program, Curally will coordinate with your existing providers and develop a care plan that is designed specifically for you. The Curally program is voluntary and is provided at no cost to you. Additionally, Curally takes every step necessary to ensure complete confidentiality.

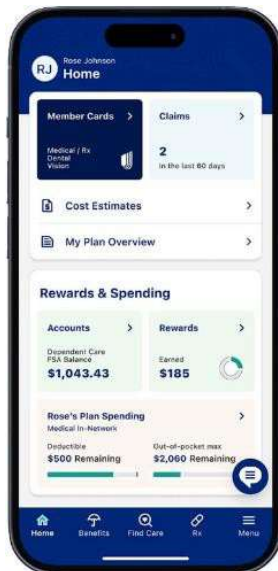
Find out more by visiting this link <https://curally.com/waukesha>



HEALTHCARE MEMBER PORTAL & UHC APP

View your member ID card, review medical claims, and find providers in your area! Download the mobile app to take the features of www.myuhc.com on the go with your smartphone or tablet. Find tools and information to help you manage and improve your health and save money.

- Track Claims and expenses
- Check the status of a claim
- Find Care and Costs
- Find providers
- See your account balance for your Optum HSA
- Print a temporary ID card



FIND CARE AND COST

Step 1: Visit myuhc.com or the UnitedHealthcare App. Once you are logged in, click “Find Care & Costs” on the main dash.

Step 2: Search for a condition or treatment. Try phrases like colonoscopy or MRI. Then hit the search button.

Step 3: Select a provider and/or facility.

Step 4: Click View Full Estimate. You can see your Final Estimate, which includes estimated costs from the doctor or facility you have chosen, along with up-to-date out-of-pocket estimated costs, based on your benefits and current level of coverage.



YOUR CLAIMS CONCIERGE

Navigating the health care system can be difficult. Our benefit consultants at Acrisure Risk Advisors have a dedicated advocate to help resolve issues on behalf of you and your family members. In addition to the services provided by your insurance carriers, your dedicated claims concierge can provide help to you and your spouse for:

- Claims Issue Assistance
- Insurance Carrier or Provider Issues
- Insurance Product Education
- Insurance ID Cards
- Online Assistance
- General Questions
- Provider Directory Searches
- Plan Design Information
- COBRA/State Continuation
- Individual or Short-Term Policies
- Print a temporary ID card

MARGARITA LEWISON

CLAIMS CONCIERGE

p: 262.641.5858

mlewison@acrisure.com

Hablo Espanol



HERO Health Expense Reimbursement

HERO PLAN

If you are on the Waukesha County Health Plan, and if you or your family have access to and select coverage through your spouse or other employer sponsored coverage, Waukesha County will reimburse you, and any other family member currently on the Waukesha County Plan up to 100% of your in-network medical and prescription claims on that plan. Reimbursement is limited to ACA out of pocket maximum of **\$12,000** for an individual and **\$24,000** for a family (2027 limits).

WHAT DOES HERO REIMBURSE?

With a typical employer health insurance plan, an employee and their family will have coverage for doctor and hospital visits, prescription drugs, wellness care and surgical procedures. However, while the plan covers these expenses, the employee and their family generally have out-of-pocket expenses, like deductibles, copays and coinsurance. HERO is designed to cover all in-network costs incurred by the employee and their family by reimbursing you directly for these expenses. The HERO plan will not reimburse claims for plan exclusions, out-of-network expenses, employee premiums, or spousal surcharge costs.

WHO IS ELIGIBLE FOR HERO PLAN?

- Employees, spouses and dependents with access to spousal or other employer sponsored coverage.
- Currently enrolled in the Waukesha County Medical Plan and waiving coverage or a new hire.

WHAT IS THE COST TO PARTICIPATE IN THE HERO PLAN?

You will need to pay the health insurance premiums through your spouse's employer health insurance program.

CAN I ACCESS THE WAUKESHA EMPLOYEE HEALTH & WELLNESS CENTER?

Yes, individuals who enroll in the HERO program may still utilize the Health & Wellness Center. Payments made within the Waukesha Employee Health & Wellness Center would be out-of-network for your other coverage and claims will not be submitted to another carrier besides the County's health plan carrier. The office visit fee schedule will be similar to the High-Deductible Health Plan (HDHP).

CAN I ENROLL IN HERO AND FUND MY HEALTH SAVINGS ACCOUNT?

If you intend to receive reimbursement under the HERO Plan with first-dollar coverage, you may not enroll in HERO and fund your Health Savings Account (HSA); you would be required to suspend contributions into your HSA plan. However, you can use any previously deposited HSA funds to pay for any initial expenses until the reimbursement is processed.

HOW DO I GET REIMBURSED ON HERO PLAN?

After incurring an eligible medical or prescription expense that was incurred on or after January 1, 2027, you must submit your claim for reimbursement by email, mail or fax to 44North. You will need to include a claim form and IRS- required documentation of the expense, e.g. Explanation of Benefits. During your initial welcome call with your Patient Advocate, you will receive a claim form and instructions on how to submit a claim and what documentation is needed.

WHAT IF I HAVE QUESTIONS?

For questions regarding eligibility or HERO plan benefits, contact 44North at 855-306-1099.

Employee Health & Wellness Clinic

Marathon Health

WAUKESHA EMPLOYEE HEALTH AND WELLNESS CENTER

Employees of Waukesha County and their dependents (ages 2+) who are enrolled in the County's health insurance plan or HERO program have access to an onsite medical clinic operated by Marathon Health. The clinic is located at 615 W. Moreland Blvd in Waukesha. Patient confidentiality is of the utmost importance as all staff are employees of Marathon Health. Providers of the clinic include a Board-Certified Physician, two Physician Assistants, and two Physical Therapist.

Patients should be able to schedule same day or next day appointments for service. Virtual visits are also available.

Office visit fees are applied towards health plan deductible and out-of-pocket maximums for County health plans. Office visit fees for those enrolling in the HERO Plan are similar to the High Deductible Health Plan. HERO Plan office visits are considered out-of-network and will not be reimbursed under the HERO Plan.



HOW DO I CONTACT WEH&WC?

- Direct Line **262-896-8420**
- WEH&WC Website: <https://my.marathon-health.com/login>

HOURS OF OPERATION

- Monday, Wednesday 7 AM – 7 PM
- Tuesday, Thursday, Friday 7 AM – 6 PM

HOW MUCH WILL IT COST TO VISIT WEH&WC?

Visit Type	Choice Plus	HDHP	HERO
Preventative Care	\$0	\$0	\$0
Non-Preventative Care	\$0	\$28 / visit	\$28 / visit
Physical Therapy	\$0	\$28 / visit	\$28 / visit
Medication	\$28 / visit, no separate charge		

WHAT CAN I BE SEEN FOR?

Disease Management	Preventative Services	Minor Injuries/Illness	Physical Therapy	Lab Work	Medication
Cholesterol	Routine Annual Physical Exam (age 6+)	Sore Throat	Muscle & Joint Pain	Order, conduct, interpret & consult on routine diagnostic lab work	Prescribe Medication(s)
Blood Pressure	Preventative Screenings	Ear & Sinus Infections	Sprains & Strains	Can complete lab draw with orders from outside provider.	Dispense Pre-Packaged Medications
Manage & Prevent Diabetes	Administer Shots / Vaccinations	Mole or Wart Removal			
		Cold, Flu, etc.			

Pharmacy Insurance

TRUERX

You're more than a number to True Rx Health Strategists, you become our patient. Our motivation is your health and quality of life. Smart medication choices are made by ethical health care providers. Our formularies are designed to keep you healthy and productive.

The TrueRx mobile app lets you compare your medication price at different pharmacies and access your medication history.



WHAT PHARMACIES ARE IN-NETWORK?

Please note that CVS pharmacies remain excluded. The TrueRx standard network includes over 65,000 pharmacies nationwide. Please visit www.truerx.com/members and scroll down the page to click the link to check the list of pharmacies.

HOW DO I RECEIVE MAIL ORDER RX SERVICE?

To contact WB Express, please call **812-642-1044** or toll free via **833-391-0126**.
Online visit: <https://wbrxexpress.com>

IS TRUE RX HEALTH STRATEGIST A PHARMACY?

No, we're not a pharmacy. We're your pharmacy insurance provider. You will continue to receive medications at your local pharmacy while we work in the background to make sure you're getting prescriptions with ease and accuracy.

HOW MUCH WILL MY MEDICATION COST?

You can find the cost of your medication on the TrueRX app and compare prices at different pharmacies in your area. You will also see your deductible and other specific information based on your insurance plan.

WHAT SHOULD I DO IF MY RX CLAIM IS DENIED OR DELAYED?

The first thing you should do is take your new insurance card to the pharmacy to make sure they have your new insurance information. If you're still having difficulties, please give us a call. Our customer service representatives are experts in your pharmacy benefits plan.

HOW DO I REGISTER FOR A TRUERX ACCOUNT?

Visit website at
www.truerx.com/members or
download the
TrueRx app.

HOW CAN I REACH TRUERX?

Reach out at hello@truerx.com or
call **866-921-4047**

WHO IS ELIGIBLE FOR SHARX?

If you are enrolled in a Waukesha County health plan and you currently are on any high-cost prescription medication (\$350 or more), ShaRx may provide potential cost savings. There are considerations for eligibility, and you should follow the instructions in the welcome email or call 314-451-3555.

WHAT HAPPENS IF I DON'T ENROLL IN THE SHARX PROGRAM?

High-cost medications will no longer be covered by the pharmacy benefit plan. Without SHARx, you will be required to pay the full price of the medication. If you are in the advocacy process with SHARx, you may be eligible for a short supply of your urgent medications at your local pharmacy while the advocacy is in process. Certain manufacturers will require additional information to verify your income. Please respond right away to these requests for additional information to ensure there is no delay with your advocacy. Our goal is for everyone to receive the medications they need as quick as possible at the lowest price and this is only accomplished with your help.

WHAT CAN I EXPECT FROM SHARX PROCESS?

It is important to note that this is NOT an overnight solution and usually takes two to four weeks on average to implement your cost savings, depending on outside circumstances such as doctor cooperation, ease of communication and understanding. You may also be asked to verify your income, so please respond right away. Be patient with this process and realize that SHARx advocates want to help you.

HOW DOES SHARX WORK?

Your medication will be denied first with TrueRX due to it being high cost, employees will need to start the process with SHARx. Members will provide SHARx with a HIPAA authorization, allowing the SHARx advocate to communicate with your doctor and drug manufacturer to gather information and apply for discount programs. Financial details needed for assistance programs will only be shared with the manufacturer. The process is repeated annually or when prescribed a new eligible medication.

- **Step 1:** SHARx will explore income-based patient assistance programs, which could provide your medication at no cost.
- **Step 2:** If ineligible, SHARx will pursue copay cards from the manufacturer, which may reduce or eliminate costs. These programs aren't income-based but may require meeting an IRS minimum deductible.
- **Step 3:** If copay cards are unavailable or exhausted, international mail order may provide medication for free. Medications are sourced from FDA-approved Tier 1 countries.

NEED ASSISTANCE?

You can reach SHARx through email sharx@sharxplan.com or call 314-451-3555 option 1. If you are unsure, please reach out to the HR Benefit team.



DENTAL PLAN OVERVIEW

Dental insurance is provided through Delta Dental of Wisconsin. You have two choices of Dental Plans:

- **The Standard Plan:** This plan has more provider choices, costs less, but has a lesser benefit.
- **The Exclusive Plan:** This plan has limited coverage choices to Delta's PPO providers only, has a better benefit, but costs more. If the provider is not in the PPO network, you will not have coverage.

Dental Plan Details	Delta Dental Standard	Delta Dental Exclusive
Network / Provider	PPO, Premier, or Choice of Provider Claim Benefit payments are calculated using the Max Plan Allowance	PPO Provider's Only Claim Benefits payments are calculated using the PPO Fee Allowance
Maximum Allowance	\$1,250 per person per calendar year	Unlimited Maximum per person per calendar year
Calendar Year Deductible		
Single	\$25	No Deductible
Family	\$75 (Per Family Max)	
Services		
Preventive Care; Oral Examinations; Diagnostics	No Deductible Applied 100%	100%
Ancillary	*Deductible Applies	
Local & General Anesthetics	100%	100%
Injection of Antibiotics	100%	100%
Nitrous Oxide-Oxygen Sedation	Not Covered	Not Covered
Emergency Treatment of Pain	100%	100%
Denture Repairs & Adjustments, Recementing of Crowns or Bridges	50%	100%
Restorations	*Deductible Applies	
Amalgam Fillings & Composite Fillings on Anterior Teeth	100%	100%
Cast Metal (gold or non-precious metal) Inlays & Crowns	50%	70%
Other Services	*Deductible Applies	
Endodontics (root canal treatment & pulpal therapy)	80%	100%
Periodontics (treatment for diseases of gums & tissues of the mouth)	80%	100%
Oral Surgery (including simple extractions)	80%	100%
Prosthetics (Bridges, partials, dentures, implants)	50%	70%
Orthodontics	*No Deductible applies	*\$650 Deductible
Braces	50%	100%
Coverage	Limited to dependent children under the age 19	No Age Limit
Lifetime Maximum	\$1,500	No Lifetime Maximum
* Pre-Certification of Benefits: Delta Dental of WI recommends a pretermination of benefits for treatment plans that include crowns, fixed bridges work, implants, or dentures.		

Vision Insurance



VISION OVERVIEW

Waukesha County offers vision insurance through National Vision Administrators (NVA)

Vision Plan Details	Participating Provider	Non- Participating Provider
Examination (one every calendar year) <i>Covers pathology or anomalies, visual acuity, refraction, glaucoma test and dilation.</i>		
	100%	Reimbursed up to \$35
Lenses (once every calendar year) <i>Provides full coverage for standard glass or plastic eyeglass lenses.</i>		
Single Vision	100%	Up to \$25
Bifocal	100%	Up to \$40
Trifocal	100%	Up to \$45
Lenticular		Up to \$80
Polycarbonate		Up to \$25
Progressive - Tier 1		Up to \$50
Frame (once every two calendar years) <i>Cost exceeding your plan allowance is your responsibility. Visits NVA for the Benefit Maximizer Program.</i>		
	Retail Allow Up to \$180	Up to \$75
Contact Lenses (once every calendar year – in lieu of lenses) <i>Coverage includes all types of contact lenses.</i>		
Elective Contact Lenses	Up to \$180 Retail	Up to \$150
Fit/Follow up		
Standard Daily Wear	100% after \$20 Co-Pay	Up to \$20
Standard Extended Wear	100% after \$30 Co-Pay	Up to \$30
Specialty Wear	100% after \$50 Co-Pay	Up to \$50
Medically Necessary	100%	Up to \$150
Lasik (once per lifetime)	Up to \$200	Up to \$200

VISION VALUE ADD PROGRAMS WITH NVA

	Laser refractive surgery discount program - Over 600 provider locations nationwide; free consultation with in-network providers \$800 savings at featured providers
	Contact Fill® – mail order contact lens replacement program - Low prices, dependable service, brand names shipped to members' homes - In-network benefit – no claim form required
	Hearing discount program – NationsHearing® - Up to 60% savings on brand name hearing aids/related professional services - Largest accredited network – providers in all 50 states
	Additional pairs discount program – EyeEssential® - Significant savings on additional materials purchase - Unlimited usage throughout the plan year at participating providers

****MORE INFORMATION ON FIXED PRICING AND COURTESY DISCOUNTS LOCATED ON OUR INTRANET SITE**

Life Insurance

Basic & Voluntary Life

BASIC LIFE & AD&D PAID LIFE

All active regular Full-Time and Part Time employees are auto enrolled in Basic Life Insurance and Accidental Death & Dismemberment. Basic Life and AD&D Insurance is paid for by Waukesha County. Coverage for non-exempt employees is one-times annual salary (up to **\$185k**) and for exempt employees two-times annual salary (up to **\$250k**). If you are interested in additional coverage, you can choose to elect Voluntary Life Insurance.

VOLUNTARY LIFE & AD&D INSURANCE

Voluntary Life & AD&D is in addition to Waukesha County's Basic Life & AD&D. It is 100% paid for by you and voluntary. If you elect Voluntary Life & AD&D coverage for yourself, you then have the option to elect Voluntary Life & AD&D for your eligible dependents (spouse and child(ren)) as well. **If you do not elect Voluntary Life & AD&D for yourself, you cannot cover eligible dependents.**

DEPENDENT LIFE INSURANCE

Dependent Life insurance is in addition to both Waukesha County's Basic Life & AD&D and Voluntary Life & AD&D. It is 100% paid for by you and voluntary. You do not need to elect Voluntary Life & AD&D to elect Dependent Life insurance. This policy stands alone and is for your eligible dependent(s) (spouse and child(ren)).

DID YOU KNOW?

You can mix and match your voluntary and dependent life insurance options?

REMINDER!

Open enrollment is great time to update your beneficiaries on file. This can be done right in Workday!



Short Term Disability

Insurance



Voluntary Short-Term Disability (STD) provides partial income replacement if you are unable to work due to a qualifying non-work-related illness, injury, pregnancy, or recovery from childbirth.

This benefit begins after a 14-day waiting period. The benefit is subject to medical certification, eligibility requirements, and plan limitations.

STD is a voluntary benefit available to active full-time Waukesha County employees who are regularly scheduled to work more than 30 hours per week. Premiums are paid by employees and are based on the employee's age. STD provides a weekly benefit equal to **60% of your covered weekly**, earnings up to a maximum of **\$1,500.00 per week**. **Benefits may be payable for up to 11 weeks, subject to the terms of the plan and required medical document.**



Flexible Spending Account



HOW DO I MANAGE MY FSA ACCOUNT?

Participants can file claims, manage benefits card transactions, and upload documentation online or using Android or Apple Mobile.

- Phone **608-831-8445** or **800-346-2126**
- Website www.ebcflex.com

HEALTHCARE FSA

If you are enrolled in the High-Deductible Health Plan, you may not enroll in the Healthcare FSA. The Healthcare FSA is a flexible spending account (FSA) authorized under Section 125 of the Internal Revenue Code. This plan allows you to set aside money through pre-tax payroll deductions to pay for health care expenses that are not covered under your group health, dental, or vision plans such as deductibles, co-insurance, copays, certain over-the-counter medications, and other uncovered expenses. The minimum annual election is \$260, and the maximum annual election is **\$3,500 for 2027**.

- **PLAN YEAR:** The plan year begins January 1 and ends December 31. You will be required to re-enroll in the plan each year during the annual open enrollment period if you wish to make pre-tax payroll contributions into your account.
- **FORFEITURE:** Employees have up to ninety (90) days following the end of each plan year to request reimbursement for qualified health care claims. To qualify, the covered service or expense must be incurred during the plan year (January 1 – December 31). The employee will forfeit any unreimbursed fund balances following this period. Therefore, it is very important that employees carefully evaluate the contributions they elect under this plan.
- **ELIGIBLE EXPENSES:** Eligible health care reimbursement expenses are those qualified medical or dental expenses that are not covered or only partially covered under your insurance plans. For more information, refer to IRS Publication 502 (Medical and Dental Expenses) located on the Intranet.

DEPENDENT CARE FSA

Dependent Care FSA is an IRS-approved plan that allows you to deduct up to a maximum of **\$7,500** or (**\$3,750** per year if married and filing separate federal income tax returns) per year from your earnings for employment related child and/or elder care expenses before taxes are taken out. The minimum annual deduction is **\$260**. The County pays the administrative fees for every employee in the plan.

USE IT OR LOSE IT

IRS regulations prohibit your employer from returning any unspent FSA funds to you, or transferring them to a different account. Funds remaining at the end of the plan year's runout period are forfeited and returned to your employer. This includes any funds not spent during your grace period.

Worksite Benefits

VOLUNTARY



Protect Your Health. Protect Your Finances.

The Standard's voluntary benefits provide cash benefits paid directly to you when unexpected events impact your life. Use the money for medical bills, household expenses, childcare, travel costs, or anything else you need during recovery

ACCIDENT INSURANCE

When an Accidents Happen – Helps cover costs related to:

- Emergency room and urgent care visits
- Ambulance services
- Fractures and dislocations
- Hospital admissions
- Surgeries and rehabilitation
- Accidental death & dismemberment protection

Why it matters: Unexpected injuries can create expenses beyond your medical plan. Accident Insurance provides cash benefits to help keep your finances on track

CRITICAL ILLNESS INSURANCE

Focus on Recovery, Not Expenses. Provides a lump-sum cash benefit for covered conditions such as:

- Cancer
- Heart Attack
- Stroke
- Kidney Failure
- Major Organ Failure
- Alzheimer's Disease
- Parkinson's Disease

Additional features:

- ✓ Coverage from \$5,000 to \$30,000
- ✓ Spouse and child coverage available
- ✓ Recurrence and additional diagnosis benefits
- ✓ Health Advocate support service

HOSPITAL INDEMNITY INSURANCE

Helps with Hospital Costs:

- Pays cash benefits directly to you for:
- Hospital admission
- Daily hospital confinement
- Critical care unit confinement

Can help cover:

- Deductibles
- Coinsurance
- Transportation
- Childcare
- Household Expenses
- Lost income during recovery

HOW IT WORKS

- 1** Covered Event Occurs
Accident, illness diagnosis, or hospital stay.
- 2** Submit Your Claim
File a claim with The Standard.
- 3** Receive Your Benefit
Benefits are paid directly to you after approval
- 4** Use Funds Your Way
Spend the money where it's needed most

ADDED VALUE \$ Annual Wellness Benefit

Receive a \$50 wellness screening benefit each year for each plan you are enrolled in.
Cash Paid Directly to You.
Use your benefit however you need.

Pet INSURANCE



WHAT IS PET INSURANCE?

Pet insurance is health insurance for dogs and cats. Get reimbursed for costly veterinary bills and focus more on the health of your pets and less on how you're going to pay for it. Plans feature coverage for accidents, illnesses and injuries including cancer coverage.

HOW IT WORKS

- **Enroll** in pet insurance.
- **Pay** your vet.
- **Submit** a claim with your vet bill.
- **Get reimbursed** for eligible expenses.

**This benefit is not managed through payroll deductions.*

ENROLL ONLINE TODAY!

<https://www.petpartners.com/enroll?p=WaukeshaCounty>

Pet Partners = **10%** discount for dogs or cats!

WHAT'S COVERED?

- Common Illness
- Prescriptions Medication
- Toxin Ingestion
- Alternative Treatments
- Behavioral Issues
- Preventative Care
- Digestive Issues
- Diagnostics
- Cancer
- Broken Bones
- Hospitalization
- Surgery

EAP

Employee Assistance Program

WORK/LIFE SERVICES OFFERED THROUGH EAP

The EAP is a free benefit provided to all employees and their family members who reside in their household (college students outside of the home also). The EAP is 100% confidential as specified by both state and federal law. There is no cost to the employee or family member for any services provided by the EAP.

- Legal Consultation (free ½ hour consult per issue)
- Eldercare Assessment
- Financial Counseling (free ½ hour consult per issue)
- Childcare Search
- School & College Planning
- Adoption Assistance
- Mediation (free ½ hour consult per issue)
- Discounted rates on CPAs, Financial Coaches, Attorneys and professional Mediators

EAP ADDITIONAL SERVICES

Advocate Aurora EAP offers face to face, virtual or phone sessions with Masters' level counselors where employees/family members can reach out regarding stress, relationship or family matters, drug or alcohol issues or anything else they desire to discuss. The EAP counselor may then refer to:

- Additional EAP sessions (up to 8 total per clinical issue)
- Insurance based provider
- Community Resources

HOW TO CONTACT THE EAP?

Can call 24/7 to talk to an EAP Counselor. Monday-Friday, 8:00 am to 5:00 pm to schedule appointments.

- Phone [1-800-236-3231](tel:1-800-236-3231)
- Website www.aah.org/eap

FIRST RESPONDERS PSYCHOLOGICAL SERVICES (FRPS)

Eligible for Waukesha County Sheriff's & Emergency Preparedness Department

- Phone [715-401-3322](tel:715-401-3322)
- Email FRPS911@gmail.com
- Website www.frps911.com

Retirement

Pension, 457B & Roth IRA, & Financial Wellness

PENSION – WISCONSIN RETIREMENT SYSTEM

Covers Wisconsin state employees of local government employer. Employees are auto enrolled. Employees are vested in the pension plan after 5 years of creditable WRS service. This is an employee paid and employer paid benefit.

MISSION SQUARE

- In addition to the Pension plan, employees can contribute additional funds into a 457B plan.
- MissionSquare is committed to helping build retirement security. The 457B and Roth IRA are employee paid benefits.
- Opportunity on a monthly basis to meet with a MissionSquare representative.
- Convenient payroll deductions.

457B – Deferred Compensation

- Both options are a defined contribution based entirely on how much you invest in the account.
- Pre-Tax and Roth contribution options.

ROTH IRA

- An individual retirement account funded with after-tax dollars.
- Tax free qualified withdrawals in retirement.

RHS – Retirement Health Savings Account

- Designed to help you pay for future health care costs when you retire from or separate employment with Waukesha County. This is an employer paid benefit.

FRANCIS INVESTMENTS

Francis is nationally recognized for their expert advisors that offer financial wellness advice through education sessions, tools, calculators and representatives. This is a county-paid benefit. Employees can meet with a dedicated Waukesha County representative.

Contact List

Vendor Name	Website	Phone Number
United HealthCare	myuhc.com	866-414-1959
Optum Bank HSA	optumbank.com	866-234-8913
Noom	noom.com	855-980-1937
Virta	virtahealth.com/uhc	844-847-8472
Hinge Health	hingehealth.com	855-902-2777
Bend Health	bendhealth.com	844-202-2050
Maven	mavenclinic.com	833-362-1963
True Genomics	Truerx.com	833-391-0126
One Pass Select	onepassselect.com	877-515-9364
Curally	curally.com/waukesha/	855-581-4398
HERO	claims@44n.com	855-306-1099
Marathon Health Clinic	wehwc.com	262-896-8420
TrueRx	Truerx.com	833-391-0126
SHARx	sharxplan.com	866-742-7749
Delta Dental	www.deltadentalwi.com	800-236-3712
NVA Vision	e-nva.com	800-672-7723
Reliance Matrix	Reliancematrix.com	800-351-7500
Employee Benefits Corp.	Ebcflex.com	608-831-8445
The Standard	standard.com	800-628-8600
Pet Partners	Petpartners.com	866.774.1113
EAP	aah.org/eap	800.236.3231
FRPS	www.frps911.com	715.401.3322
WRS – Pension	etf.wi.gov	877-533-5020
MissionSquare	missionsq.org	800-669-7400
Francis	francisway.com/services/participant-portal/waukesha-county/	866-232-6457



Important Reminders!

- | | |
|--------------------------|---|
| ☐ | Final Date to Make Enrollment Changes is:
November 7, 2027 11:59 CST
<u>NO</u> Exceptions! |
| ☐ | Add or remove eligible dependents. Adding a <u>NEW</u> dependent to coverage?
Must attach supporting document(s). I.e. Marriage certificate for a spouse,
birth certificate for a child and SSN. |
| ☐ | Don't forget to add, change or waive coverage for 2027.
Great time to add a Worksite Benefit or Voluntary Life. |
| ☐ | Confirm or update your beneficiaries in Workday for Basic and Voluntary life
insurance.
Pension (WRS) beneficiaries are updated with the Wisconsin Department of
Employee Trust Funds (ETF) and 457 are updated with Mission Square. |
| ☐ | Need to make a contribution change to 457B or ROTH IRA?
Visit Mission Square <u>Website</u> :
https://retirement.financialtrans.com/msg |

Compliance Notifications

Summary Benefit Comparison and Summary Plan documents are available on the Waukesha County Intranet and the Open Enrollment internet page.

Waukesha County provides you with the following information to ensure you are aware of federal notice regulations as they relate to your group health plan. We have posted on the intranet the health care reform notices, the initial benefits notices that are typically sent upon new employment, as well as the required annual notices. These notices are intended to notify you of your rights and may not address all regulations in detail. If you would like a hard copy of the documents, please contact Human Resources at **262-548-7044**. Please share this information with your dependents and/or plan beneficiaries.