



City of Madison

Human Resources Department

Date: September 30, 2024

2025 Annual Open Enrollment Period is September 30, 2024 through October 25, 2024, 4:30 pm

To: Active Employees and Elected Officials Enrolled in the Wisconsin Retirement System
From: Kurt Rose, Employee and Labor Relations Manager
Subject: **It's Your Choice Health Insurance Open Enrollment for 2025 Coverage**

The It's Your Choice Health Insurance Open Enrollment period is an opportunity for currently enrolled employees to make changes and for eligible employees who are not enrolled to sign up for 2025 health insurance coverage. Changes to the program for 2025 are summarized in this memo and included in the It's Your Choice 2025 Decision Guide: Local Deductible Plan (ET-2158) available on the Employee Trust Funds (ETF) website: <https://etf.wi.gov/publications/25et-2158/download?inline=>

IF YOU DO NOT WANT TO MAKE ANY CHANGES TO YOUR EXISTING HEALTH INSURANCE COVERAGE, YOU DO NOT NEED TO TAKE ANY ACTION DURING THE HEALTH INSURANCE OPEN ENROLLMENT PERIOD.

Note: Even if you are not making changes, make sure to read memo and review the 2025 Decision Guide for What's Changing in 2025.

Employees and elected officials who are actively participating in the Wisconsin Retirement System (WRS) through their employment or elected service with the City are eligible to participate in the group health insurance program. This includes WRS-eligible hourly and seasonal employees. Employees and elected officials who are not actively participating in the WRS are not eligible for City-sponsored health insurance.

No access to the internet? You may contact ETF at 877-533-5020 or 608-266-3285 or by mail at PO Box 7931, Madison, WI 53707-7931 to request printed Health Insurance Open Enrollment materials. Reference copies of materials may also be available in agencies and in Human Resources.

HEALTH PROGRAM INFORMATION

In 2025, the City of Madison will again offer ETF's Program Option 14: Local Deductible Plan without Dental.

- This option includes an annual medical deductible of \$500 for individual plans and \$1,000 for family plans. The deductible applies to all services except certain preventive services and prescription drugs.
- For a list of preventive services, visit <https://www.healthcare.gov/coverage/preventive-care-benefits/>
- **Dental coverage is not offered through the health insurance program.** The City of Madison does not offer ETF's Uniform Dental Benefit or ETF's Supplemental Dental plans. If you are not currently enrolled in the City's separate Delta Dental group plan, you must enroll online through Employee Self Service (ESS) by logging into your account at ess.cityofmadison.com if you would like dental insurance for the 2025 plan year, subject to eligibility. Complete instructions are provided on the Delta Dental open enrollment memo. Hourly and seasonal employees are not eligible for group dental coverage.
- **Domestic partner health coverage** is not available through the City's health insurance program. Due to a change in State law that took effect January 1, 2018, employees' domestic partners are not eligible to be covered under the City's health insurance program, but employees who meet certain eligibility requirements may receive a stipend to offset the cost of a domestic partner obtaining health coverage outside of the City's program. See <https://www.cityofmadison.com/human-resources/benefits/domestic-partnership-benefits> for more information.
- ETF will be hosting a number of webinars during the open enrollment period for you to learn about the 2025 plan year. Opportunity to ask questions directly to health plans. Visit etf.wi.gov/insurance to register.

Informational/ Drop In Sessions:

October 11, 2024,

Madison Municipal Building, 215 Martin Luther King Jr. Blvd.

- Room 204 8:30 – 4:00 pm HR Staff to assist in the Open Enrollment process
- Room 215 11:30 - 3:30 pm Resource fair with health, dental, vision, and flex spending providers

IMPORTANT HEALTH PLAN, MEDICAL & PHARMACY BENEFIT CHANGES

Health Plan Changes

Dean Health Plan – Prevea360 West and Mayo Clinic will now be known as Dean Health Plan-Medica West and Mayo Clinic Health System.

State Maintenance Plan

The State Maintenance Plan (SMP) is a health plan that offers Uniform Benefits. SMP is designed to provide a health plan option for members who live or work in areas without adequate access to in-network providers or hospitals.

See the State Maintenance Plan (SMP) by Dean Health Plan web page at etf.wi.gov for more information.

Medical Benefit Changes: Effective January 1, 2025

- Expanded the lifetime limit on orthoptic eye training from two to no more than twelve.
- Clarified nutritional counseling coverage. The certificate language was clarified to allow for nutritional counseling services related to weight management.

Pharmacy Benefit Changes: Effective January 1, 2025

- Levels 3 & 4 (Individual/Family) Prescription Out-Of-Pocket limit decrease in 2025 to \$9,200/\$18,400

Refer to the It's Your Choice 2025 Decision Guide and the ETF website for more health program information.

Reminders for Participants without Medicare

Preventative Care

Your health plan pays 100% of certain preventative care services with no out-of-pocket costs to you. Preventative care is routine health care that includes screenings, checkups, and patient counseling to help prevent illnesses, disease, or other health problems.

To learn more on preventative care coverage, visit etf.wi.gov/preventive-care-services-covered-100

Preventive Drugs Covered at 100%

Your pharmacy benefit pays 100% of certain preventive drugs with no out-of-pocket costs to you. A preventive drug is used to help avoid disease and maintain health. These drugs are considered effective in preventing the development of a health condition or disease.

To learn more on preventive drug coverage, visit etf.wi.gov/preventive-drugs-covered-100

HEALTH INSURANCE RATES AND ADDITIONAL INFORMATION

Health insurance rates for permanent full-time employees are provided on a rate chart with this memo. Employee and employer contribution amounts are prorated based on an eligible employee's percentage of full-time employment. Employee required premium contributions for less-than-full-time employees will generally be greater than the required contributions for full-time employees. Expanded premium rate charts, including employee and employer contributions for less-than-full-time equivalent employees, are available on the City of Madison Human Resources Benefits website at <https://www.cityofmadison.com/human-resources/benefits/open-enrollment> and may be included with less-than-full-time employees' open enrollment materials.

To cancel coverage, add coverage, change plan or level of coverage, add or remove dependents, etc., you must submit a health insurance application/change either online through myETF Benefits or on paper (Form ET-2301) before the October 25, 2024 deadline (4:30 pm for paper application/change forms). If you are enrolling in coverage for the first time, a paper application may be required. **Open Enrollment changes are effective January 1, 2025.** Outside of the Open Enrollment period, changes may be made only within certain time limits, typically 30 calendar days (60 calendar days for birth/adoption), following a qualifying event (family status change or other eligibility change).

- To remain with your current plan and continue your existing health insurance coverage in 2025, you do not need to take any action.
- **If possible, please use the myETF online system for enrolling or making health insurance changes.** Instructions for making changes online are available on the City of Madison Human Resources Benefits website at <https://www.cityofmadison.com/human-resources/benefits/health-dental-and-vision-insurance/changing-health-coverage>. Your unique 8-digit ETF member number may be found on your Navitus Pharmacy Benefit card. ETF member number is also on the label of your Open Enrollment packet. You may contact Human Resources at 608-266-4615 or benefits@cityofmadison.com to obtain your ETF member number if necessary. Paper copies of Form ET-2301: Health Insurance Application/Change Form may be printed from the ETF website or obtained from City Human Resources (please call (608) 266-4615 or email benefits@cityofmadison.com to request a form).
- The City of Madison Benefits website has more detailed enrollment and supporting information. All eligible employees will receive an electronic copy of this memo by email from City Human Resources. A paper copy of the Open Enrollment packet is available upon request. The City's Benefits website can be accessed from any internet-connected device at <http://www.cityofmadison.com/human-resources/benefits>.
- Questions about specific coverages should be directed to the health plans, whose websites and phone numbers are available through the It's Your Choice section of the ETF website at: <https://etf.wi.gov/its-your-choice/2025/health-plan-search/local> (click the appropriate health plan name to view contact information).
- ETF has E-Learning resources available, including information on the It's Your Choice Open Enrollment period. Visit <https://etf.wi.gov/member-education> to view these resources.

PHARMACY BENEFIT INFORMATION

In 2025, Navitus continues to be the pharmacy benefit manager (PBM) for all available health plans. Out-of-Pocket Limit for Levels 3 & 4 decrease for 2025. Other Copays/coinsurance and annual out-of-pocket limits for prescription drugs will remain as they were in 2024.

Visit etf.wi.gov or contact Navitus at 866-333-2757 for more pharmacy benefit information.

WELL WISCONSIN PROGRAM

The \$150 Well Wisconsin incentive will continue to be available to you and your enrolled spouse. To earn the \$150, you will need to complete a health screening, health assessment, and well-being activity through StayWell. The \$150 incentive will be paid via a physical gift card that will be mailed to your home. Employees and their spouses will continue to see taxes on their incentives processed via payroll. StayWell also provides access to free and confidential resources and services, such as health coaching, online challenges, and more. Visit <https://www.webmdhealth.com/wellwisconsin/> for more information.

Other Enrollment Opportunities Outside of the It's Your Choice Open Enrollment Period

Loss of other coverage is a "qualifying event" that allows employees to enroll outside the open enrollment period. (For example: If a City employee has had health coverage through a spouse's employment and the spouse loses coverage.) There is a 30 calendar day deadline following the loss of other coverage to submit an enrollment request to City HR. Other events that may qualify an employee to make changes to health coverage include the birth or adoption of a child, marriage, and divorce.

AFFORDABLE CARE ACT (ACA)

The Health Insurance Marketplace will offer open enrollment from November 1, 2024 – December 15, 2024. Plans sold during the open enrollment period start January 1, 2025. Please contact the Marketplace at 800-318-2596 or visit www.healthcare.gov for more information. Less-than-full-time employees who are eligible for modest or no City contribution to health insurance coverage may be able to obtain more affordable coverage through the Marketplace.

For EEOC, COBRA, ACA marketplace and more federal and state notices, visit etf.wi.gov

In the event of conflicting information, federal law, state statute, state health contracts, and/or policies and provisions established by the State of Wisconsin Group Insurance Board will be followed. The most current information can be found at etf.wi.gov.

2025 DENTAL AND VISION OPEN ENROLLMENT

The Open Enrollment period for the 2025 Dental Insurance and Vision Insurance plan year will run concurrently with the Open Enrollment period for health insurance. **Flexible Spending Open Enrollment will be November 4 - November 22, 2024.**

- Employees and elected officials certified at 50% or more of full-time equivalent employment are eligible to participate in the Dental Insurance and Vision Insurance plans. Eligible employees and elected officials will receive separate memos for those benefits.
- Hourly and seasonal employees are not eligible for the City's Dental Insurance or Vision Insurance plans.
- Separate forms are required to enroll, make changes, or cancel existing Health, Dental, and/or Vision Insurance.
- Health, dental, and vision insurance are each standalone benefits – eligible employees may elect to enroll in none, one, two, or all three of these benefits and coverage levels may differ among the plans an employee is enrolled in (For example: An employee could have Family Health Insurance, Employee + Children Dental Insurance, and Employee Only Vision Insurance).

CONTACT INFORMATION

City of Madison Human Resources

Email: benefits@cityofmadison.com
Phone: 608-266-4615
Fax: 608-267-1115
Mail: Madison Municipal Building
215 Martin Luther King Jr Blvd Suite 261
Madison, WI 53703

Employee Trust Funds

Phone (toll free): 877-533-5020
Phone (local): 608-266-3285
Mail: PO Box 7931
Madison, WI 53707

2025 HEALTH INSURANCE PREMIUMS

100% of Low: Only CG's 41 and 42

CARRIER	Benefit FTE %	TOTAL	CITY COST	EMPLOYEE COST	CARRIER	Benefit FTE %	TOTAL	CITY COST	EMPLOYEE COST
DEAN HEALTH FAMILY	100	2,614.98	2,080.68	534.30	DEAN HEALTH SINGLE	100	1,062.90	849.18	213.72
	95	2,614.98	1,976.65	638.33		95	1,062.90	806.72	256.18
	90	2,614.98	1,872.61	742.37		90	1,062.90	764.26	298.64
	85	2,614.98	1,768.58	846.40		85	1,062.90	721.80	341.10
	80	2,614.98	1,664.54	950.44		80	1,062.90	679.34	383.56
	75	2,614.98	1,560.51	1,054.47		75	1,062.90	636.89	426.01
	70	2,614.98	1,456.48	1,158.50		70	1,062.90	594.43	468.47
	65	2,614.98	1,352.44	1,262.54		65	1,062.90	551.97	510.93
	60	2,614.98	1,248.41	1,366.57		60	1,062.90	509.51	553.39
	55	2,614.98	1,144.37	1,470.61		55	1,062.90	467.05	595.85
	50	2,614.98	1,040.34	1,574.64		50	1,062.90	424.59	638.31
25	2,614.98	520.17	2,094.81	25	1,062.90	212.30	850.60		
GHC - DANE FAMILY	100	2,080.68	2,080.68	-	GHC - DANE SINGLE	100	849.18	849.18	-
	95	2,080.68	1,976.65	104.03		95	849.18	806.72	42.46
	90	2,080.68	1,872.61	208.07		90	849.18	764.26	84.92
	85	2,080.68	1,768.58	312.10		85	849.18	721.80	127.38
	80	2,080.68	1,664.54	416.14		80	849.18	679.34	169.84
	75	2,080.68	1,560.51	520.17		75	849.18	636.89	212.29
	70	2,080.68	1,456.48	624.20		70	849.18	594.43	254.75
	65	2,080.68	1,352.44	728.24		65	849.18	551.97	297.21
	60	2,080.68	1,248.41	832.27		60	849.18	509.51	339.67
	55	2,080.68	1,144.37	936.31		55	849.18	467.05	382.13
	50	2,080.68	1,040.34	1,040.34		50	849.18	424.59	424.59
25	2,080.68	520.17	1,560.51	25	849.18	212.30	636.88		
QUARTZ - UW FAMILY	100	2,232.68	2,080.68	152.00	QUARTZ - UW SINGLE	100	909.98	849.18	60.80
	95	2,232.68	1,976.65	256.03		95	909.98	806.72	103.26
	90	2,232.68	1,872.61	360.07		90	909.98	764.26	145.72
	85	2,232.68	1,768.58	464.10		85	909.98	721.80	188.18
	80	2,232.68	1,664.54	568.14		80	909.98	679.34	230.64
	75	2,232.68	1,560.51	672.17		75	909.98	636.89	273.09
	70	2,232.68	1,456.48	776.20		70	909.98	594.43	315.55
	65	2,232.68	1,352.44	880.24		65	909.98	551.97	358.01
	60	2,232.68	1,248.41	984.27		60	909.98	509.51	400.47
	55	2,232.68	1,144.37	1,088.31		55	909.98	467.05	442.93
	50	2,232.68	1,040.34	1,192.34		50	909.98	424.59	485.39
25	2,232.68	520.17	1,712.51	25	909.98	212.30	697.68		
MERCYCARE FAMILY	100	2,286.78	2,080.68	206.10	MERCYCARE SINGLE	100	931.62	849.18	82.44
	95	2,286.78	1,976.65	310.13		95	931.62	806.72	124.90
	90	2,286.78	1,872.61	414.17		90	931.62	764.26	167.36
	85	2,286.78	1,768.58	518.20		85	931.62	721.80	209.82
	80	2,286.78	1,664.54	622.24		80	931.62	679.34	252.28
	75	2,286.78	1,560.51	726.27		75	931.62	636.89	294.73
	70	2,286.78	1,456.48	830.30		70	931.62	594.43	337.19
	65	2,286.78	1,352.44	934.34		65	931.62	551.97	379.65
	60	2,286.78	1,248.41	1,038.37		60	931.62	509.51	422.11
	55	2,286.78	1,144.37	1,142.41		55	931.62	467.05	464.57
	50	2,286.78	1,040.34	1,246.44		50	931.62	424.59	507.03
25	2,286.78	520.17	1,766.61	25	931.62	212.30	719.32		
GHC NEIGHBORS FAMILY	100	2,422.84	2,080.68	342.16	GHC NEIGHBORS SINGLE	100	986.04	849.18	136.86
	95	2,422.84	1,976.65	446.19		95	986.04	806.72	179.32
	90	2,422.84	1,872.61	550.23		90	986.04	764.26	221.78
	85	2,422.84	1,768.58	654.26		85	986.04	721.80	264.24
	80	2,422.84	1,664.54	758.30		80	986.04	679.34	306.70
	75	2,422.84	1,560.51	862.33		75	986.04	636.89	349.15
	70	2,422.84	1,456.48	966.36		70	986.04	594.43	391.61
	65	2,422.84	1,352.44	1,070.40		65	986.04	551.97	434.07
	60	2,422.84	1,248.41	1,174.43		60	986.04	509.51	476.53
	55	2,422.84	1,144.37	1,278.47		55	986.04	467.05	518.99
	50	2,422.84	1,040.34	1,382.50		50	986.04	424.59	561.45
25	2,422.84	520.17	1,902.67	25	986.04	212.30	773.74		



City of Madison

Human Resources Department

Date: September 30, 2024

2025 Delta Dental Insurance Enrollment

Coverage is effective January 1, 2025

2025 Annual Open Enrollment Period is September 30, 2024 through October 25, 2024, 4:30 pm

Group dental insurance plan information for the 2025 plan year is available on the City of Madison Human Resources Benefits website at <https://www.cityofmadison.com/human-resources/benefits/open-enrollment>, including a Summary of Benefits. Hourly and Seasonal employees are not eligible to participate in the dental insurance plan.

To continue with your existing coverage, you do not need to take any action.

Existing coverage will carry forward to 2025 unless you request changes or cancellation.

OPEN ENROLLMENT, MAKING CHANGES, OR CANCELLING COVERAGE

Open enrollment dental enrollments, changes, and cancellations will be made online through Employee Self Service (ESS) by logging into your account at ess.cityofmadison.com. Click the Login icon in the upper-right corner of the screen to enter your login credentials. Your username is your Employee Number, which can be found in the upper-left corner of your paycheck. The first time you log in to ESS, your password will be the last four digits of your Social Security Number. Note: If you need assistance resetting your password, please contact City IT at (608) 266-4193.

- If you enroll in dental coverage, you are committed to being enrolled in the plan for the entire year. Employees may not withdraw from the dental plan in the middle of the year, except in the case of a qualifying event.
- List all family members to be covered, including dates of birth.
- If you are currently enrolled in the dental plan and want to make changes or cancel coverage, you must submit changes via Employee Self Service (ESS) during the open enrollment period. Once the new plan year starts, you may only enroll, make a change, or cancel coverage if you experience a qualifying event (family status change or eligibility change) and if the request is received within 30 calendar days of the qualifying event (60 calendar days for birth/adoption).
- If you elect to cancel dental coverage during the open enrollment period, your existing coverage will end effective December 31, 2024.
- Enrollment and change requests received outside of the open enrollment period or beyond 30 days from the qualifying event (60 days for birth/adoption) will be denied.
- If you enroll in or make changes to dental coverage during the open enrollment period, it is strongly encouraged that you review your December 20, 2024, paycheck to ensure that the correct premium amount for January's coverage is being deducted for the coverage that you elected.
- Please note: The City of Madison's group dental insurance plan number is 502.

2025 Monthly Dental Premiums:

Premiums are deducted from the second paycheck of each month for the following month's coverage.

Single (Employee only):	\$38.25
Employee + Spouse:	\$87.50
Employee + Child(ren):	\$88.22
Family (Employee + Spouse + Child(ren)):	\$132.82

DENTAL INSURANCE PLAN FEATURES

Your group dental plan from Delta Dental of Wisconsin includes one or more special features designed to encourage good oral health and promote overall health as well. Details of these provisions are addressed in the policy amendments provided with your dental plan handbook. Hard copies of the dental plan handbook and its amendments are available upon request. Electronic copies may be found on the City of Madison Benefits website.

Below is a brief summary.

Check-up Plus – Promoting Wellness: With Check-up Plus, you can obtain diagnostic and preventive services without the costs of those services applying to your individual annual maximum (diagnostic and preventive services include examinations, x-rays, regular cleanings and other related treatments). The full value of your annual maximum is applied to the benefits you receive for basic and major restorative services. Check-up Plus promotes regular visits to the dentist for exams and cleanings, which can improve your oral health and overall health.

X-ray Frequency: Experts at the Department of Health and Human Services, the Food and Drug Administration and the American Dental Association recommended that patients at a low risk of chronic diseases such as cavities and periodontal disease receive less frequent exposure to dental x-rays. In line with these recommendations, this dental plan will allow bitewing x-rays one time per 12-month period and full-mouth x-rays once each 5 years for all patients.

Evidence-Based Integrated Care Plan (EBICP): Delta Dental of Wisconsin's EBICP option is included in your plan. It provides additional benefits for persons with medical conditions that have oral health implications.

Conditions include:

- Diabetes
- Pregnancy
- Specific heart conditions that pose a risk of certain types of infection
- Kidney failure or dialysis
- Suppressed immune system
- Cancer therapy
- Periodontal disease

EBICP's unique enrollment mechanism does not require that medical claims be filed. EBICP requires self-enrollment by the patient or their dentist at Delta Dental's website, or by calling 800-236-3712.

Learn more at <https://www.deltadentalwi.com/s/additional-benefits>

CONTACT INFORMATION

If you have questions about the Delta Dental plan, please contact Taylor Buccelli, our dental plan Account Manager at Risk Strategies Co., by phone at 608-203-3877 or via email at tbuccelli@risk-strategies.com. You may also contact Delta Dental Customer Service directly at 800-236-3712.

Other City benefits questions may be directed to Human Resources at 608-266-4615 or benefits@cityofmadison.com.

- Agency payroll clerks, Human Resources or Central Payroll staff are also available to assist with online enrollment.
- **Dental coverage is not available through the City's health insurance program. If you would like dental coverage, you must enroll in the separate dental insurance plan.**

Informational / Drop In Session:

October 11, 2024

Madison Municipal Building, 215 Martin Luther King Jr. Blvd.

- Room 204 8:30 – 4:00 pm HR Staff available to assist in the Open Enrollment process
- Room 215 11:30 – 3:30 pm Resource fair with health, dental, vision and flex spending providers



City of Madison

Human Resources Department

Date: September 30, 2024

2025 DeltaVision Insurance Enrollment

Coverage is effective January 1, 2025

2025 Annual Open Enrollment Period is September 30, 2024 through October 25, 2024, 4:30 pm

Group vision insurance plan information for the 2025 plan year is available on the City of Madison Human Resources Benefits website at <https://www.cityofmadison.com/human-resources/benefits/open-enrollment>, including a Summary of Benefits. Hourly and seasonal employees are not eligible to participate in the vision insurance plan.

To continue with your existing coverage, you do not need to take any action.

Existing coverage will carry forward to 2025 unless you request changes or cancellation.

OPEN ENROLLMENT, MAKING CHANGES, OR CANCELLING COVERAGE

Vision insurance enrollments, changes, and cancellations will be made online through Employee Self Service (ESS) by logging into your account at ess.cityofmadison.com. Click the Login icon in the upper-right corner of the screen to enter your login credentials. Your username is your Employee Number, which can be found in the upper-left corner of your paycheck. The first time you log in to ESS, your password will be the last four digits of your Social Security Number. Note: If you need assistance resetting your password please contact City IT at (608) 266-4193

- If you enroll in vision coverage, you are committed to being enrolled in the plan for the entire year. Employees may not withdraw from the vision plan in the middle of the year, except in the case of a qualifying event.
- List all family members to be covered, including dates of birth.
- If you are currently enrolled in the vision plan and want to make changes/cancel coverage, you must submit a request via Employee Self Service (ESS) during the open enrollment period. Once the new plan year starts, you may only enroll, make a change, or cancel coverage if you experience a qualifying event (family status change or eligibility change) and if the request is received within 30 calendar days of the qualifying event (60 calendar days for birth/adoption).
- If you elect to cancel vision coverage during the open enrollment period, your existing coverage will end effective December 31, 2024.
- Enrollment and change requests received outside of the open enrollment period or beyond 30 days from the qualifying event (60 days for birth/adoption) will be denied.
- If you enroll in or make changes to vision coverage during the open enrollment period, it is strongly encouraged that you review your December 20, 2024 paycheck to ensure that the correct premium amount for January's coverage is being deducted for the coverage that you elected.
- The City of Madison's group vision insurance plan number is 9795667.

2025 Monthly Premiums: There will be no change in premium rate in 2025.

DeltaVision from Delta Dental is a standalone vision insurance benefit that uses the EyeMed Select Network. Premiums will be deducted from the second paycheck of each month for the following month's coverage. There is no employer contribution to the premium.

Single (Employee only):	\$5.97
Employee + Spouse:	\$11.94
Employee + Child(ren):	\$12.19
Family (Employee + Spouse + Child(ren)):	\$18.16

VISION INSURANCE PLAN INFORMATION

DeltaVision, through the EyeMed Select Vision Care network, partners with easily recognized providers that include major retailers like LensCrafters® and Target OpticalSM as well as many smaller, independent doctors. Retailers offer many conveniences like locations and extended and weekend hours to help members get the service they need, when they need it.

Prescription Glasses and Contacts

With DeltaVision, you can order prescription glasses and contacts through online retailers like Glasses.com or ContactsDirect.com. The in-network benefit will be applied in your shopping cart and items will ship direct to you. Non-network reimbursements are available for out-of-network providers.

Annual Exams

DeltaVision offers covered annual exams (with \$10 copay) at in-network providers. A non-network reimbursement is available for out-of-network providers.

Diabetic Eye Benefit

DeltaVision also has a Diabetic Eye Care Benefit that provides access to more frequent and in-depth eye care – helping to detect and minimize vision-related complications early on.

Additional Group DeltaVision insurance plan information is available on the City of Madison Human Resources Benefits Website at <https://www.cityofmadison.com/human-resources/benefits/health-dental-and-vision-insurance>

Special Notes

- DeltaVision insurance is a standalone benefit that uses the EyeMed Select Network. You do not need to enroll at the same coverage level that you may have for other City benefits. Example: You could have Employee + Spouse vision insurance, Employee + Child(ren) dental insurance, and Family health insurance.
- Employees who are enrolled in the City's group dental plan will continue to have access to the EyeMed vision discount plan even if they do not enroll in the separate DeltaVision group vision insurance plan. The vision discount plan available through the dental plan uses the EyeMed Access Network. EyeMed Select and EyeMed Access benefits cannot be combined – if your vision service provider is included in both the EyeMed Select and EyeMed Access networks, the benefit that results in the greatest savings will be applied.

CONTACT INFORMATION

If you have questions about the DeltaVision plan, please contact Taylor Buccelli, our vision plan Account Manager at Risk Strategies Co., by phone at 608-203-3877 or via email at tbuccelli@risk-strategies.com. You may also contact Delta Customer Service directly at 800-236-3712.

Other City benefits questions may be directed to Human Resources at 608-266-4615 or benefits@cityofmadison.com.

- Agency payroll clerks, Human Resources or Central Payroll staff are also available to assist with online enrollment are also available to assist with online enrollment.

Informational / Drop In Session

October 11, 2024

Madison Municipal Building, 215 Martin Luther King Jr. Blvd.

- Room 204 8:30 – 4:00 pm, HR Staff will be available to assist in the Open Enrollment process
- Room 215 11:30 - 3:30 pm, Resource fair with health, dental, vision and flex spending providers