

Welcome to the  
School  
District of  
Menomonee  
Falls Benefit  
Program!

# Employee Benefits Guide 2021



Engage | Learn | Improve

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## What's New?

### Real Appeal

Online weight loss program available to employees and spouses enrolled on the health plan. Get started today at [enroll.realappeal.com](http://enroll.realappeal.com)

### Teladoc

The cost per general office visit it is set to increase to \$49 per visit effective 1/1/21

### Expanded Qualified Medical Expenses

Over the Counter Medications are now allowable for the use of FSA and HSA funds

### Employee Assistance Program Enhancement

The number of FREE sessions available has been increased to 6 per incident

## 2021 HDHP Health/Rx Premium Rates

Coverage Level	Total Premium	District Monthly Contribution	Employee Monthly Contribution	Premium per check (20)	Premium per check (24)
Single	\$829.48	\$721.65	\$107.83	\$64.70	\$53.92
Family	\$1,914.92	\$1,665.98	\$248.94	\$149.36	\$124.47

## Dental Premium Rates

Coverage Level	Total Premium	District Monthly Contribution	Employee Monthly Contribution	Premium per check (20)	Premium per check (24)
Single	\$49.66	\$43.20	\$6.46	\$3.87	\$3.23
Family	\$133.74	\$116.35	\$17.39	\$10.43	\$8.69

## Vision Premium Rates

Coverage Level	Total Premium	Employees pay 100% of the premium for vision coverage if enrolled	Premium per check (20)	Premium per check (24)
Single	\$6.16		\$3.70	\$3.08
Family	\$15.30		\$9.18	\$7.65

# Benefit Basics

The School District of Menomonee Falls offers a comprehensive suite of benefits to promote health and financial security for you and your family. This booklet provides a summary of your benefits. Please review it carefully so you can choose the coverage that is right for you and your family.

## Coverage for you and your family

As the Superintendent, Administrator or Professional/Technical employee you are eligible for benefits if you work at least 20 hours per week. Benefits are effective on the first day of work. You may enroll your eligible dependents for coverage, including:

- Your legally married spouse
- Your children up to age 26.

Once your benefit elections become effective, they remain in effect for the plan year from 1/1 – 12/31. You may only change coverage if you experience a qualifying life event, as described below.

## Qualifying Life Events

Generally, you may only change your benefit elections during the annual enrollment period. However, you may change your benefit elections during the year if you experience an event such as:

- Marriage
- Divorce or legal separation
- Birth of your child
- Death of your spouse or dependent child
- Adoption of or placement for adoption of your child
- Change in employment status of employee, spouse or dependent child
- Qualification by the Plan Administrator of a child support order for medical coverage
- Entitlement to Medicare or Medicaid

You must notify Human Resources within 30 days of a qualifying life event. Depending on the type of event, you may need to provide proof of the event, such as a marriage license. If you do not contact Human Resources within 30 days of the qualified event, you will have to wait until the next annual enrollment period to make changes (unless you experience another qualifying life event).

## Benefit Costs

The District pays the full cost of some of your benefits; you share the cost for some others. In addition, you pay the full cost for any voluntary benefits you elect.

Benefit	Who Pays	Tax Treatment
Medical Coverage	The District and You	Pretax
Dental Coverage	The District and You	Pretax
Vision Coverage	You	Pretax
Basic Life and Accidental Death and Dismemberment (AD&D) Insurance	The District	After-tax
Voluntary Life and Accidental Death and Dismemberment (AD&D) Insurance	You	After-tax
Long-Term Disability Coverage	The District	After-tax
Short-Term Disability Coverage	You	After-tax
Flexible Spending Accounts	You	Pretax
Employee Assistance Plan	The District	After-tax
403(b) Retirement Savings Plan	You	Pre or Post tax

*PLEASE NOTE: Medical and Dental premiums are pro-rated to a maximum of 50% of the premium cost for part-time employees.*

# Medical and Prescription Drug Coverage

SDMF offers comprehensive Medical and Prescription Drug coverage to employees. The plan is a qualified high deductible health plan and employees who enroll may establish and fund a health savings account, if eligible.

The plan year deductible resets every January 1<sup>st</sup>.

Qualified High Deductible Health Plan (HDHP)		
	In- Network Benefits	Out-of-Network Benefits
Annual Deductible (Individual/Family)	\$2,000 / \$4,000	\$4,000 / \$8,000
Coinsurance	The plan pays 100% after deductible	The plan pays 50% after deductible
Out-of-Pocket Maximum (Includes Deductible)	\$4,000 / \$8,000 (no one individual can exceed \$6,550)	\$6,000 / \$12,000
Lifetime Maximum	Unlimited	Unlimited
Preventive Care	100%, No deductible	Deductible and Coinsurance
Primary Physician Office Visit	Deductible then 100%	Deductible then 50%
Specialist Office Visit	Deductible then 100%	Deductible then 50%
X-Ray and Lab	Deductible then 100%	Deductible then 50%
Inpatient Hospital Services	Deductible then 100%	Deductible then 50%
Outpatient Hospital Services	Deductible then 100%	Deductible then 50%
Urgent Care	Deductible then \$75 Copay Applicable	Deductible then \$75 Copay Applicable
Emergency Room Care	Deductible then \$250 Copay Applicable	Deductible then \$250 Copay Applicable
Prescription Drug Deductible (Individual/Family)	Prescription Drugs will track to the Annual Deductible and Out of Pocket Maximum	
Retail Prescription Drugs (30-day supply) • Generic • Brand Preferred • Brand Non-preferred	Copays Applicable after Deductible \$10 Copay \$25 Copay \$50 Copay	Copays Applicable after Deductible \$10 Copay \$25 Copay \$50 Copay
Mail Order Prescription Drugs (90-day supply) • Generic • Brand Preferred • Brand Non-preferred	Copays Applicable after Deductible \$20 Copay \$50 Copay \$100 Copay	Copays Applicable after Deductible \$20 Copay \$50 Copay \$100 Copay

## FIND CARE & COSTS

Online tools that give you information about the cost or services based on location and medical provider. Log on to [www.umar.com](http://www.umar.com)

## LOWER YOUR PRESCRIPTION COSTS

Compare costs of generic and brand name medications to lower your out of pocket costs at [www.express-scripts.com](http://www.express-scripts.com)

## TELADOC

Telephonic consultations with board certified physicians available 24 hours per day, 365 days per year. Sign up before you need services at [www.teladoc.com](http://www.teladoc.com)

## REAL APPEAL

Online weight loss program available to employees and spouses enrolled on the health plan. Get started today at [enroll.realappeal.com](http://enroll.realappeal.com)

## Pharmacy Benefits: Express Scripts

The District contracts with Express Scripts to manage our pharmacy benefits.

**Preventive Medications:** The District offers an expanded list of preventive drugs covered under the high deductible health plan (HDHP) with ZERO cost share to members.

**Mail Service:** Mail order is mandatory under the pharmacy benefits after two 30-day fills at a retail pharmacy. Members may choose to order through Express Scripts mail order service, or access the Walgreens Smart90 program.

**Specialty Pharmacy:** Certain Specialty medications must be obtained through Accredo, the specialty pharmacy vendor for Express Scripts.

# Health Savings Account (HSA)

A Health Savings Account (HSA) is a special account that enables you to pay for qualified medical, dental and vision expenses on a tax-free basis. You can also use this account to save for retirement as there is no “use it or lose it” rule.

You can use the money in your HSA to pay for eligible out-of-pocket health care expenses incurred by you, your spouse, and dependent children (that you claim on your tax return). However, your dependents do not need to be covered under the SDMF health plan to be eligible for reimbursement from your HSA.

**NEW:** Coverage for Over the Counter (OTC) medications has been reinstated!

- [CLICK HERE](#) to review the OTC Product Guide
- [CLICK HERE](#) for the full IRS Publication 502 outlining qualified medical expenses



## Special Note:

Be sure to keep your receipts for any funds used from your HSA. If audited by the IRS, you will need to prove the withdrawals were for qualified medical expenses. Any funds withdrawn for non-qualified expenses will be subject to income taxes and an additional penalty of over 20%.

## Benefits of an HSA

- TRIPLE tax savings
  - Contributions are pre-tax
  - Earnings grow tax-free
  - Distributions are tax-free as long as you are paying for qualified medical expenses
- The funds stay with you, regardless of employment or enrollment in the plan
- The funds rollover every year – there is no use it or lost it rule

## How is my HSA Funded?

You can make tax-free contributions to the HSA. You may do this by setting up a payroll deduction from your paycheck, or by making a deposit directly into your HSA account.

## How much can I add to my HSA?

Your total HSA contributions cannot exceed the Contribution Limits (based on a calendar year) set by the IRS shown below. If you are age 55 or older, you are allowed to contribute an additional \$1,000 per year.

Coverage Level	2020 Max	2021 Max	55+ Catch-Up Contribution
Family	\$7,100	\$7,200	\$1,000
Single	\$3,550	\$3,600	\$1,000

## Opening Your HSA

Employees who enroll on the health plan with the District are eligible to establish a health savings account.

The District does not partner with a specific vendor and you may choose to establish your HSA with a financial institution of your choice.

Our health plan offers an option through Optum Bank. If you would like to establish an HSA you may contact them directly at 866-234-8913, or [www.optumbank.com](http://www.optumbank.com).

There are many other financial institutions who offer HSA's as well and checking with your current bank may be a good option.

In establishing a HSA, remember to review monthly maintenance fees, minimum balance requirements and investment options.

**You may not establish and fund a HSA if any of the below apply:**

- You are enrolled on another health plan that is NOT a qualified high deductible health plan
- You are covered under a FSA or HRA under another employers health plan
- You are enrolled in Medicare or Tricare
- You are being claimed as a dependent on someone else's tax return (excluding spouses)

# Health Savings Account FAQ's

## How do I open a HSA account?

Many financial institutions offer health savings accounts. When searching for a financial institution for your HSA needs, here are a few questions to ask:

1. Ask for the fee Schedule
2. What is the interest rate for the HSA?
3. Do you offer online services/mobile app? Can I pay my bills online?
4. Do I have access to checks and/or a debit/credit card?
5. Do you offer an investment option, and if so what is the minimum balance requirement?

## How do I use my HSA funds to pay for IRS-qualified medical expenses?

Dependent on the bank where your HSA account is, you may have access to a debit card or checks or online bill pay. You can also pay for part or all of your qualified medical expenses out of pocket and reimburse yourself later with HSA funds.

## Do I need to submit receipts for my HSA expenses?

No. You do not need to submit any receipts or file any claims. Just be sure to use the money for IRS-qualified medical expenses and save your receipts for tax purposes. It is the responsibility of the account holder to ensure the funds are not misused. If you are ever audited, the IRS may request documentation of the use of your HSA funds.

## What happens if I use my HSA funds to pay for an expense that isn't a qualified medical expense?

If you are under age 65 and realize you have done so in error, you should contact your bank and deposit the misused funds back into your HSA account as a Withdrawal in Error. If you do not, you must report it on your taxes as taxable income and pay a penalty of over 20%.

## Can an HSA be used to pay for previous year expenses?

You can only pay or reimburse yourself for qualified medical expenses incurred after your HSA account was established and you were eligible to fund it.

## Who can contribute to an HSA?

Any eligible individual may contribute to an HSA. For an HSA established on behalf of an employee both the employee and the employer may make contributions. Family members may also make contributions on behalf of other family members as long as the other family member is an eligible individual (has a qualified high deductible health plan and is not otherwise insured).

## What if I do not use all my funds within the year?

Unused HSA funds roll over year after year; there is no "use it or lose it" penalty. Funds that are rolled over continue to grow and earnings are tax free. At age 65, you will have the ability to use your HSA funds for any purpose on a taxable basis. This makes funding your HSA a great way to save for retirement.

## Can I use my HSA to pay for qualified medical expenses for dependents not covered under the health plan?

Yes, generally HSA funds can cover qualified expense of the account holder, his or her spouse, and tax dependents, regardless of spouse or dependent healthcare coverage. Please consult with a tax-advisor for your specific situation.

## What if I leave employment with SDMF or am no longer covered under a qualified high-deductible health plan (QHDHP)?

Your HSA funds are never lost due to changes in employment or health plan. If at some point you are no longer covered by a QHDHP, you still have access to your funds and can use them to pay for qualified medical expenses; however you are no longer eligible to make contributions.

# Dental Plan

The District offers a comprehensive dental plan through Delta Dental. You may use any dentist for your dental services; however, using a PPO Provider will reduce your out-of-pocket costs.

## Information on the go!

Access your dental account information from your smartphone or mobile device with the Delta Dental app. With this app, you can:

- View your summary of benefits and coverage
- Access your ID card
- Find a network dentist
- Brush with a toothbrush timer



## Evidence Based Integrated Care Plan

Additional cleanings and/or fluoride treatment is available for individuals with specific medical conditions – Cancer related treatments, weakened immune systems, periodontal (gum) disease, high risk cardiac disease, kidney failure or dialysis, diabetes and pregnancy.

Provision	PPO Providers	Premier / Out of Network
Annual deductible	\$0 / \$0	
Annual Maximum per person	\$2,000	
Diagnostic and Preventive, to include cleanings, fluoride treatments, sealants and x-rays	You pay \$0	You pay \$0
Basic Services to include fillings, periodontics, scaling and root planning, oral surgery	You pay 20%	You pay 20%
Major Services to include crowns, bridges, full and partial dentures	You pay 20%	You pay 20%
Orthodontia	You pay 50%; \$1,500 lifetime maximum	You pay 50%; \$1,500 lifetime maximum

# Vision Plan

Benefit	In-Network	Non-Network Reimbursement
Exam	You pay a \$10 copay	\$35
Contact lens fit and follow-up	\$0	\$40
Frequency <ul style="list-style-type: none"> <li>• Exam</li> <li>• Lenses</li> <li>• Frames</li> </ul>	Every 12 months Every 12 months Every 24 months	Every 12 months Every 12 months Every 24 months
Frames	\$150 allowance, then 20% off the balance	\$75
Standard Lenses <ul style="list-style-type: none"> <li>Single vision lenses</li> <li>bifocal lenses</li> <li>trifocal lenses</li> </ul>	You pay a \$10 copay You pay a \$10 Copay You pay a \$10 Copay	Up to \$25 Up to \$40 Up to \$55
Medically necessary contact lenses	Paid in Full	\$200
Elective contact lenses	\$150 allowance	\$120

Your vision plan is offered through EyeMed Vision Care and is available on a voluntary basis to all eligible employees.

This is a comprehensive plan for all vision services. It provides coverage for routine eye exams and also pays for all or a portion of the cost of glasses or contact lenses if you need them. You can see in- or out-of-network providers, however, keep in mind that you always save more money if you stay in-network.



# Flexible Spending Accounts

A Flexible spending account offers employees another way to save and pay for eligible health care and dependent care expenses on a pre-tax basis. With FSA's, you can claim reimbursement for eligible expenses for yourself, your spouse and dependents that you can claim on your income tax return or your adult children to age 26, even if you cannot claim them on your tax return.

Your current FSA elections will not automatically roll over. Participants **must enroll annually** for each plan year.

Each component of the flexible benefit plan requires a separate election. Funds cannot be moved from one component to another.

## Flexible Spending Account Options:

### Health Care FSA

The Health Care FSA is available only if you are not eligible to contribute to an HSA. You can use the Health Care FSA for eligible medical, prescription drug, dental and vision expenses. You can contribute up to \$2,750 for the 2021 plan year. Up to \$550 of unused funds will be rolled over at the end of the plan year. All other funds remaining at the end of the plan year will be forfeited.

### Limited Purpose FSA (LPFSA)

If enrolled in an HSA account, you can participate in a LPFSA. While your HSA can be used for medical, prescription drugs, dental and vision expenses, the LPFSA can only be used for eligible dental and vision expenses. You can contribute up to \$2,750 for the 2021 plan year. Up to \$550 of unused funds will be rolled over at the end of the plan year. All other funds remaining at the end of the plan year will be forfeited.

### Dependent Care FSA

The Dependent Care FSA lets you pay for eligible child care or elder care expenses, such as nursery school or elder day care. You can contribute up to \$5,000 for the plan year. These funds do not carry over into the new plan year.

*Note: IRS guidelines stipulate that an individual cannot be enrolled in a FSA and an HSA at the same time. Therefore, you cannot participate in a Health Care FSA (even if it is in your spouse's name) if you are contributing to an HSA. You may however enroll in the LPFSA.*

In order to manage your account online follow the steps below to create your account:

1. Logon to the DBS website at [dbsbenefits.com](https://www.dbsbenefits.com)
2. Select 'User Login' located at the top right of your screen
3. Select 'Create New Account' and enter the employer PIN: SDMF
4. Enter the required information and click submit

Employees will have the option to receive a Prepaid Benefits Card that allows for an easy, automatic way to pay for eligible health care / benefit expenses. [CLICK HERE](#) for the Prepaid Benefits Card Frequently Asked Questions. Although you can use the Prepaid Benefits Card upfront, it is your responsibility to ensure the proper documentation is submitted to Diversified Benefits Services for verification purposes.

To file a claim, you can go online to [www.dbsbenefits.com/participant-resources/online/](https://www.dbsbenefits.com/participant-resources/online/) or fax your claim form and accompanying receipts to (262) 367-5938.



# Life & Disability Benefits

## Life and Accidental Death & Dismemberment Insurance

Life insurance is an important part of your financial security, especially if others depend on you for support. Accidental Death & Dismemberment (AD&D) Insurance is designed to provide a benefit in the event of death by accidental means or dismemberment, which includes loss of the use of certain body parts.

The District provides Basic Life and AD&D Insurance at no cost to you. The benefit amount is 2 times your annual basic earnings, up to a maximum benefit of \$400,000.

Please note that for employer paid policies exceeding \$50,000, the IRS requires the cost of coverage to be included as income and taxed accordingly.

## Supplemental Life Option

Employees may purchase additional life insurance coverage for themselves, spouse and dependent children.

Employees who enrolled upon initial eligibility were guaranteed coverage per the table below. Late enrollees would be subject to medical underwriting and carrier approval.

Coverage	Guarantee Issue Amount	Maximum Amount
Employee	\$125,000	\$300,000
Spouse	\$25,000	\$50,000
Child	\$10,000	\$10,000

Rates are age banded for Employee and Spouse

Age Bands	Rate per \$1000 of Coverage
Through Age 29	\$0.040
30-34	\$0.050
35-39	\$0.070
40-44	\$0.090
45-49	\$0.150
50-54	\$0.230
55-59	\$0.390
60-64	\$0.520

## District Provided Long-Term Disability (LTD)

LTD covers 66.67% of your gross monthly earnings, up to a monthly maximum benefit of \$10,556. Benefits begin after 60 calendar days of disability or illness and continue out to earlier of recovery or the age reduction scheduled as outlined in the certificate of coverage.

## Voluntary Short-Term Disability (STD)

Employees may elect to enroll in short-term disability coverage by paying 100% of the cost. STD covers 66.67% of your weekly pre-disability earnings, to a maximum of \$1,500 per week. Benefits begin on the 1<sup>st</sup> day for an accident and the 7<sup>th</sup> day for an illness and continue to the earlier of recovery or 60 days.

Short-term disability benefits are payable in conjunction with sick leave.

Employees who enrolled upon initial eligibility were guaranteed a \$301 weekly benefit amount. Any late enrollees or changes will be subject to underwriting and carrier approval.

Salary range	Weekly Benefits	Monthly Premium Rate
\$11,465 - \$13,648	\$147.00	\$6.63
\$13,649 - \$17,470	\$175.00	\$7.74
\$17,471 - \$21,291	\$224.00	\$9.93
\$21,292 - \$23,475	\$273.00	\$12.15
\$23,476 - \$27,843	\$301.00	\$13.26
\$27,844 - \$32,757	\$357.00	\$15.83
\$32,758 - \$36,033	\$420.00	\$18.42
\$36,034 - \$39,309	\$462.00	\$20.26
\$39,310 - \$45,236	\$504.00	\$22.10
\$45,237 - \$52,022	\$580.00	\$25.39
\$52,023 - \$59,822	\$667.00	\$29.19
\$59,823 - \$68,791	\$767.00	\$33.57
\$68,792 - \$79,087	\$882.00	\$38.61
\$79,088 - \$90,942	\$1,014.00	\$44.40
\$90,943 - \$104,591	\$1,166.00	\$51.07
\$104,592 - \$116,993	\$1,341.00	\$58.73
\$116,994+	\$1,500.00	\$67.54

# Retirement

## 403(b) / 457 Retirement Savings Plan

The District offers voluntary retirement savings plans to help employees save for a secure retirement. All District employees are eligible to participate by making convenient payroll deducted contributions into a 403(b) or 457. The District Partners with the following three approved vendors:

Vendor	Contact Name	Contact Phone
Retirement Plan Advisors / Security Benefit	Angel Tullar	(866) 669-9500
WEA Trust Member Benefits	Scott Nelson	(800) 279-4030, Ext 2239
Wisconsin Deferred Compensation	Ryan Collier	(877) 457-9327

	Traditional 403(b)	Roth 403(b)	457 Deferred Comp	Roth 457
<b>Contributions</b>	Pre-Tax	After-Tax	Pre-Tax	After-Tax
<b>Growth</b>	Tax-Deferred	Tax-Free	Tax-Deferred	Tax-Free
<b>Distributions</b>	<ul style="list-style-type: none"> <li>• Taxable</li> <li>• Available at age 59 ½ or separation of service</li> <li>• Withdrawals prior to age 59½ may be subject to 10% federal penalty unless separation of service occurred after age 55</li> </ul>	<ul style="list-style-type: none"> <li>• Tax-free at age 59½ and at least 5 tax years from date of first Roth 403(b) contribution</li> <li>• Withdrawals prior to age 59½ may be subject to 10% federal penalty</li> </ul>	<ul style="list-style-type: none"> <li>• Available at separation of service</li> <li>• Taxable</li> <li>• <b>No</b> age requirement.</li> <li>• <b>No</b> 10% federal penalty on early withdrawals</li> </ul>	<ul style="list-style-type: none"> <li>• Available at separation of service</li> <li>• Tax-free at age 59½ and at least 5 tax years from date of first Roth 457 contribution</li> <li>• No 10% federal penalty on early withdrawals (earnings may be taxable)</li> </ul>
<b>Annual Maximum Contributions (2021)</b>	<ul style="list-style-type: none"> <li>• \$19,500 basic</li> <li>• \$6,500 extra if over 50 years of age</li> </ul>	<ul style="list-style-type: none"> <li>• \$19,500 basic</li> <li>• \$6,500 extra if over 50 years of age</li> </ul>	<ul style="list-style-type: none"> <li>• \$19,500 basic</li> <li>• \$6,500 extra if over 50 years of age</li> <li>• \$38,000 “Double Up” provision for 3 consecutive years prior to normal retirement age (if eligible)</li> </ul>	<ul style="list-style-type: none"> <li>• \$19,500 basic</li> <li>• \$6,500 extra if over 50 years of age</li> <li>• \$38,000 “Double Up” provision for 3 consecutive years prior to normal retirement age (if eligible)</li> </ul>
<b>Loans</b>	No	No	No	No
<b>Hardships</b>	Yes	Yes	Yes	Yes
<b>Benefits</b>	<ul style="list-style-type: none"> <li>• Reduces taxable income</li> <li>• Provides tax-deferred income in retirement</li> <li>• Can combine 403(b) Roth, 403(b), 457, and 457 Roth plan contributions</li> </ul>	<ul style="list-style-type: none"> <li>• Tax-free growth</li> <li>• Provides tax-free income in retirement</li> <li>• Can combine 403(b) Roth, 403(b), 457, and 457 Roth plan contributions</li> </ul>	<ul style="list-style-type: none"> <li>• Reduces taxable income</li> <li>• Provides income for employees retiring before age 59 ½</li> <li>• Can combine 403(b) Roth, 403(b), 457, and 457 Roth plan contributions</li> </ul>	<ul style="list-style-type: none"> <li>• Tax-free growth</li> <li>• Provides tax-free income in retirement</li> <li>• Can combine 403(b) Roth, 403(b), 457, and 457 Roth plan contributions</li> </ul>

# Employee Pension

## Wisconsin Retirement System (WRS)

Employees who are expected to work at least 880 hours within a rolling 12 month period will be automatically enrolled in the Wisconsin Retirement System (WRS). Effective 1/1/21, the employee contribution requirement will be 6.75% of gross earnings per check, and the District matches it 6.75%.

The pension is managed by the State of Wisconsin, not by the District. Employees may contact the Pension directly at (608) 266-3285. Or you may visit the site online at [etf.wi.gov](http://etf.wi.gov).

If an employee hits eligibility during employment, participation is required. The employee will be notified by the payroll office and enrolled in the pension.

# Employee Assistance Program

## Employee Assistance Program

The District provides an Employee Assistance Program (EAP) to all eligible employees – at no cost. The EAP is designed to provide prompt, confidential help with a range of personal and family issues that may affect all of us from time to time.

- Financial
- Stress
- Parenting
- Legal Counseling
- Family Issues



# Benefit Plan Provider Contact Information

Plan	Provider	Phone Numbers	Website
Medical	UMR	800-826-9781	<a href="http://www.umar.com">www.umar.com</a>
Prescription Drug	Express Scripts	800-837-6201	<a href="http://www.express-scripts.com/sdmf">www.express-scripts.com/sdmf</a>
Dental	Delta	800-236-3712	<a href="http://www.deltadentalwi.com">www.deltadentalwi.com</a>
Vision	Delta/Eye Med	866-723-0514	<a href="http://portal.eyemedvisioncare.com">http://portal.eyemedvisioncare.com</a>
Flexible Spending Accounts	Diversified Benefits	800-234-1229	<a href="http://www.dbsbenefits.com">www.dbsbenefits.com</a>
Health Savings Account (HSA)	Optum Bank	866-234-8913	<a href="http://www.optumbank.com">www.optumbank.com</a>
Life & AD&D Coverage	National Insurance Services	800-627-3660	
Short & Long-Term Disability Insurance	National Insurance Services	800-627-3660	
Employee Assistance Program	Optum EAP	855-205-9185	<a href="http://www.liveandworkwell.com">www.liveandworkwell.com</a>
Wisconsin Retirement System	WRS/ETF	877-533-5020	<a href="http://etf.wi.gov">http://etf.wi.gov</a>
SDMF HR Department	Melissa Beck	262-255-8396	<a href="mailto:beckmel@sdmfschools.org">beckmel@sdmfschools.org</a>
SDMF Payroll Department	Tim Hansen	262-255-8371	<a href="mailto:hanstim@sdmfschools.org">hanstim@sdmfschools.org</a>



Engage | Learn | Improve



**2021 SDMF Benefits Enrollment Guide**

**Administrators, Superintendent, Professional/Technical**

*This benefit summary provides selected highlights of the School District of Menomonee Falls benefits program. It is not a legal document and shall not be construed as a guarantee of benefits nor of continued employment at the District. All benefit plans are governed by master policies, contracts and plan documents. Any discrepancies between any information provided through this summary and the actual terms of such policies, contracts and plan documents shall be governed by the terms of such policies, contracts and plan documents. The School District of Menomonee Falls reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time. The authority to make such changes rests with the Plan Administrator.*