



Focus on Benefits

Full-Time Employees (Except WPPA)

2026

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We encourage you to read the entire enrollment guide before you enroll.

This is a summary of your benefits only. Certain restrictions and exclusions apply. For exact terms and conditions, please refer to your Summary Plan Description or Certificate of Coverage. If information in this summary differs from the Summary Plan Description or Certificate of Coverage, the Summary Plan Description or Certificate of Coverage is the ruling document.

Welcome To Your Benefits

Chippewa County offers excitement and adventure all year round! The County is also home to nationally acclaimed music festivals, Northern Wisconsin State Fair, and other festivals and celebrations throughout the year. There are abundant natural resources in Chippewa County for those who love the outdoors, including bike and ski trails, snowmobile and ATV trails, picturesque parks, acres of pristine forest lands, and fish-laden lakes and streams, camping, golfing and opportunities to view birds and other wildlife.

At Chippewa County, we value our employees and are committed to providing a comprehensive and competitive benefits package. Since the benefits provided to you are an important part of your total compensation as an employee of Chippewa County, you are encouraged to take some time to read this Focus on Benefits and become familiar with its contents. This guide gives you a brief description of the benefits offered and is not intended to be a complete source of information on the plans.

For more detailed information, flyers can be located on the Chippewa County Employee Portal under: Human Resources, Benefits.



2026 BENEFIT OVERVIEW

The chart below provides an overview of the basic benefits and optional coverage offered to you and your eligible dependents (as defined on page 6).

Benefit	Your options	Coverage levels	Cost sharing
Health	AmeriBen	Employee only Employee + Spouse Employee + Child(ren) Family	Chippewa County employee's contribution is 3.2% of the premium for Employee only coverage and 6.7% for all other coverage levels.
FSA Healthcare	Diversified Benefit Services	Employee and Eligible dependents	100% Employee Funded
FSA Dependent Care	Diversified Benefit Services	Employee and Eligible dependents	100% Employee Funded
Dental	Delta	Employee only Employee + Spouse Employee + Child(ren) Family	100% Employee Funded
Vision	VSP	Employee only Employee + Spouse Employee + Child(ren) Family	100% Employee Funded
Accident	New York Life	Employee only Employee + Spouse Employee + Child(ren) Family	100% Employee Funded
Critical Illness	New York Life	Employee only Employee + Spouse Employee + Child(ren) Family	100% Employee Funded
Wisconsin Retirement System	Employee Trust Funds		Employee & Employer Funded
Life Insurance	MN Life Insurance New York Life	Employee & Spouse/Dependent Options	100% Employee Funded
Disability	New York Life	Short-Term Disability Long-Term Disability	100% Employee Funded 100% Employer Funded

Changing Benefit Elections

MAKING CHANGES TO YOUR COVERAGE DURING THE PLAN YEAR

To protect the tax advantages of your benefits, Chippewa County is required to follow certain IRS rules. These rules effect when you may change your benefits and what changes you may make.

You may change your benefit elections mid-year for the following events:

- Birth or adoption of a child
- Marriage
- Death
- Change in the employment status of your spouse or dependent, including the termination or commencement of employment, loss of work due to a strike or lockout
- Unpaid leave of absence
- Dependent loses or gains benefit eligibility of an employer's benefit plan
- Spouse or dependent's employer's open enrollment
- Divorce, legal separation, annulment



Notification must be made within 30 days of the event.

Eligibility

Full-time employees are eligible to sign up for the following insurance benefits:

- Health Insurance
- FSA Healthcare // Dependent Care
- Dental Insurance
- Vision Insurance
- Accident Insurance
- Critical Illness Insurance
- Life Insurance
- Short-Term Disability

Your eligible dependents can enroll in some benefits as well. Eligible dependents include:

- Your legal spouse.
- Dependent children up to the age of 26.
- Your physically or mentally disabled children beyond age 26 if meeting specific criteria established by the Plan.

Ultimately determination of eligibility is based on the terms, conditions and limitation of the plan document. For more information contact your Human Resources Department.

WHEN COVERAGE BEGINS AND ENDS

New employee benefits become effective first of the month following 30 days.

Remember, due to Internal Revenue Service (IRS) regulations, changes can only be made to your enrollment elections during Open Enrollment or if you experience a qualifying event that allows you to make a change mid-year (see page 5).



2026 Health Plan Benefit Summary

HEALTH PLAN NETWORK

AmeriBen is tied to Anthem's BluePreferred network.

Anthem BluePreferred Network

- In-network providers include: Marshfield Clinic, Mayo Clinic, and OakLeaf Clinic.



DEDUCTIBLES

- The deductible is \$3,000 single and \$6,000 family for in-network providers.
- The deductible is \$6,000 single and \$12,000 family for out-of-network providers

COINSURANCE

Most services are subject to a coinsurance after you satisfy your deductible. The coinsurance levels vary based on plan and network. See page 8 for specifics.

OUT-OF-POCKET MAXIMUM

If your out-of-pocket medical and prescription expenses reach the annual out-of-pocket maximum, the plan pays 100% of the allowable maximum charges for the rest of the plan year. Your deductible and coinsurance count toward the out-of-pocket maximum.

For those covering family members, all of our plans have a protective feature where individuals in the family have their out-of-pocket maximum capped at the single level. One member of a family is not required to satisfy the entire out-of-pocket maximum.

2026 Health Insurance Premiums

Coverage Level	Total Monthly Cost	Monthly Employer Contribution	Monthly Employee Contribution
Employee	\$930	\$900	\$30
Employee + Child(ren)	\$1,855	\$1,731	\$124
Employee + Spouse	\$2,225	\$2,075	\$150
Family	\$3,152	\$2,940	\$212

Health Plan Benefits become effective first of the month following 30 days. Monthly employee contributions are deducted one month in advance, spread evenly over 24 paychecks annually.

Health Plan Benefit Summary

CHIPPEWA COUNTY EMPLOYEE HEALTHCARE PLANS



Benefit	In-Network	Out-of-Network Coverage
Network	Anthem's Blue Preferred Network	Non-Anthem Contracted Provider
Deductible Limit Single Family	\$3,000 \$6,000	\$6,000 \$12,000
Co-insurance After deductible plan pays	80%	60%
Out-of-pocket maximum Single Family	\$7,000 \$14,000	\$14,000 \$28,000
Preventive care	100%, no deductible	Not covered
Office visit	\$25.00 copay	Subject to deductible and co-insurance
Urgent Care	\$75 copay	Subject to deductible and co-insurance
Inpatient hospitalization	80% after deductible	Subject to deductible and co-insurance
Emergency room	\$350 copay + the balance of charge after copayment applies to ded/coins	\$350 copay + the balance of charge after copayment applies to ded/coins
Prescription drugs Tier 1 Tier 2 Tier 3 Tier 4	\$10.00 \$45.00 \$75.00 25%	Not covered

AmeriBen Contact Information:

Member Services: 1-877-379-5806

Dedicated Medical Management (Pre-Certifications): Phone: 1-866-438-0179, Fax: 1-888-338-8959

Pharmacy Member Services: 1-833-267-2133

AmeriBen's Website: <https://ameriben.com/>

Check out Anthem's In-Network Providers: <https://www.anthem.com/> - CLICK, FIND CARE

Health Plan – Health Reimbursement Account

HEALTH REIMBURSEMENT ACCOUNT (HRA)

An account Chippewa County contributes money on the employee's behalf and can be used for qualified Medical, Dental, or Vision expenses.



The account is to assist to offset deductibles and out-of-pocket medical costs not covered **under** insurance.

ELIGIBILITY

All employees and dependents enrolled on the Chippewa County Health Insurance Plan.

CONTRIBUTION AMOUNTS

A total of \$500 per person enrolled on the Health Insurance Plan, up to a max of 4 (\$500 x 4) = \$2,000 annually.

- Deposited quarterly (January, April, July, and October); effective the quarter following enrollment on the Health Insurance Plan.
- Annually deposit amount is prorated based off of Health Insurance enrollment coverage.

Health Insurance Plan Coverage	Quarterly Deposit	Annually Deposit
Employee only	\$125	\$500
Employee + 1 Dependent	\$250	\$1,000
Employee + 2 Dependents	\$375	\$1,500
Employee + 3 or more Dependents	\$500	\$2,000

These dollars continue to build and build if unused, they rollover from year to year, and you take them with you if and when you separate employment from the County.

ELIGIBLE EXPENSES

The account can be used to cover the cost of Medical, Dental, Vision or Hearing expenses which are not covered under an insurance plan for you and your dependents which are considered an eligible Healthcare HRA expense.

IRS Publication 502 (2022), Medical and Dental Expenses, contains a complete list of Section 213(d) eligible healthcare HRA Eligible Products & Services. Go to www.irs.gov for a complete copy of the list.

The Health Reimbursement Account (HRA) is administered by **Pelion Benefits**; <https://pelionbenefits.com/>

Health Plan – Near-Site Clinic

NEAR-SITE CLINIC – REFORMEDICINE

All employees and dependents enrolled on the Chippewa County Health Insurance Plan have access to services at ReforMedicine.

ReforMedicine^{sc}

- Services with ReforMedicine are **FREE** for employees and dependents!
- ReforMedicine offers better quality care, same day or next day appointments, longer visit times which improves quality care and outcomes for patients, lower cost labs and services.

SERVICES AVAILABLE

- **Office Visits**
 - Primary and preventative care; Acute care – respiratory, stomach, infections, cold/flu, etc.; Chronic conditions – high blood pressure, thyroid, diabetes, etc.
- **Labs**
 - Any lab test needed! Even if a Provider in another system requests labs.
- **DOT and Sports Physicals**
- **Vaccines/Immunizations**
- **Medical Weight Loss Program**
 - Intake/Welcome Visit with Medical Assistant
 - Initial Provider Visit/Monthly Provider Visits
 - Health Coaching Visit (3 included)
- **In-Clinic Dispensed Medications**

ALL SERVICES ARE **FREE TO
EMPLOYEES AND DEPENDENTS!!**

Clinic Locations:

Eau Claire

3004 Golf Road | Eau Claire, WI 54701

(715) 514 - 2827

Menomonie

800 Wilson Ave. #28 | Menomonie, WI 54751

(715) 895 - 6234

Hudson

596 Outpost Circle Suite G | Hudson, WI 54016

(715) 895 - 6226

Lake Hallie

3026 Commercial Blvd | Chippewa Falls, WI 54729

(715) 895 - 6215

For more information visit the ReforMedicine for Chippewa County Employees website:

<https://www.reformedicine.com/for-employers/current-employers/chippewa-county/>

Health Plan – Amplify

SolarteHealth – Amplify



All employees and dependents enrolled on the Chippewa County Health Insurance Plan have the ability to utilize SolarteHealth – Amplify Network.

- Amplify is a Tier 1 in-network practitioners available for Chippewa County members to use. All Amplify providers are independent and are not within a large health system.
- The use of any of Amplify's 1,400 providers at more than 400 locations will be a **\$0 out-of-pocket expense. No deductible, no co-pays, and no co-insurance!**

The Process



Step 1 – Visit your Provider

Step 2 – Informed you need a medical service such as an Imaging (MRI, CT Scan, Mammograms), Colonoscopy, Orthopedic or any type of outpatient surgery.

- Ask your Provider for a copy of the order/referral.
- If you are seeing a ReforMedicine Provider, they will automatically send the referral to **Amplify**.

Step 3 – Contact **Amplify**.

- A Patient Advocate will help guide you through your provider options and help coordinate your visits.

Step 4 – Receive care/procedure.

Step 5 – Amplify Network is a \$0 out-of-pocket expense. The Doctor is paid by SolarteHealth. The member will not receive a bill.

When utilizing the Amplify Network, you may be eligible to receive monetary incentive through Chippewa County for select services. Please allow 30-60 days following any qualifying procedure to be reported to Chippewa County HR. Delays may occur, please inquire with the Amplify Patient Advocate on the status of any incentives.

Additional information, flyers, and Approved Amplify Incentives can be located on Chippewa County Employee Portal under: Human Resources, Benefits, Amplify.

Amplify Contact Information:

Amplify Patient Advocate: 1-800-890-4017

Email: info@solartehealth.com

solartehealth.com

Health Plan – Musculoskeletal Partner

MUSCULOSKELETAL PARTNER – DOCTORS OF PHYSICAL THERAPY



All employees and dependents enrolled on the Chippewa County Health Insurance Plan have access to services at Doctors of Physical Therapy.

- Physical Therapy services with Doctors of Physical Therapy are **FREE** for employees and dependents!
- Doctors of Physical Therapy provides compassionate, evidence-based care. Every patient receives individualized, one-on-one treatment from an expert clinician.

No Prior authorization or prescription is needed!

Common diagnoses:

- ACL, Knee Meniscus Injuries and Surgeries
- Ankle Sprain
- Arthritis
- Back Pain
- Bursitis
- Cancer
- Carpal Tunnel Syndrome
- Cerebral Palsy
- Chronic Fatigue Syndrome
- Chronic Pain
- Concussion
- Foot Pain
- Fracture
- Golfer's and Tennis Elbow
- Headaches
- Huntington's Disease
- ITB Syndrome
- Joint Replacement
- Lymphedema
- Muscular Dystrophy
- Neck Pain
- Osteoarthritis
- Plantar Fasciitis
- Rotator Cuff Disease and Repair
- Sciatica
- Sports Injuries
- TMJ
- Total Hip, Knee and Shoulder Replacement
- Vertigo

Doctors of Physical Therapy

Locations:

Augusta	Lake Hallie
Cameron	Thorp
Chetek	

To make an appointment: 833-950-0865

ALL SERVICES ARE **FREE** TO EMPLOYEES AND DEPENDENTS!!

Additional information and flyers can be located on Chippewa County Employee Portal under: Human Resources, Benefits, [Doctors of Physical Therapy](#).

Flexible Spending Accounts



DIVERSIFIED
BENEFIT SERVICES, INC.

Flexible Spending Accounts allow you to set aside money to pay for eligible expenses with tax-free dollars.

The spending accounts offer significant tax advantages because you don't pay Social Security, Federal or State taxes on the portion of your income that you contribute to your spending account.

Because you don't pay taxes on the money you contribute to your account, you gain an easy way to save money while paying for expenses you expect to incur.

YOUR CHOICES

- 1. Healthcare Flexible Spending Account:** Use this account to cover the cost of health, dental, vision and hearing expenses which are not covered under an insurance plan for you and your dependents which are considered an eligible healthcare FSA expenses. You may contribute up to **\$3,300** per year.
- 2. Dependent Care Spending Account:** Use this account to cover the cost of dependent care while you work. You may use this for expenses for the care of a child under age 13 or a disabled spouse, child or parent. If you are married, your spouse must be employed or attending classes full time for you to use the Dependent Care Spending Account. You may contribute up to **\$7,500** per year per household to this account or **\$3,750** per year if you are married and file your taxes separately.

The Flexible Spending Account is administered by **Diversified Benefit Services**. For more information, visit <https://www.dbsbenefits.com/>

ELIGIBLE HEALTHCARE FSA EXPENSES

INCLUDE:

- Deductibles, coinsurance, and copays
- Prescription drug copays
- Over-the-counter medicines, if prescribed by a doctor
- Medical care items that are not prescription drugs, such as equipment (crutches), supplies (bandages and contact lens solution), and diagnostic devices (blood sugar testing kits)
- Dental expenses, including orthodontia
- Vision expenses, including eye exams, glasses, and contact lenses
- Hearing expenses, including hearing aids and exams
- Mental health expenses (does not include marriage counseling)
- Orthopedic expenses
- Weight loss programs (if medically necessary)
- Medical expenses for certain procedures not covered by your plan, such as laser vision correction

IRS Publication 502, Medical and Dental Expenses, contains a list of Section 213(d) eligible healthcare FSA expenses. Go to www.irs.gov for a complete copy of the list.

Flexible Spending Accounts



FLEX SPENDING ACCOUNTS (FSA) AND DEPENDENT CARE COULD HELP YOU SAVE

	FSA Healthcare		FSA Dependent Care	
	With account	Without account	With account	Without account
Annual salary	\$50,000	\$50,000	\$50,000	\$50,000
Pre-tax FSA contribution	-\$2,000	\$0	-\$5,000	\$0
Taxable Income	\$48,000	\$50,000	\$45,000	\$50,000
Estimated taxes (20%)	\$9,600	\$10,000	\$9,000	\$10,000
After-tax expenses	\$0	-\$2,000	\$0	-\$5,000
Net Income	\$38,400	\$38,000	\$36,000	\$35,000

ELIGIBLE DEPENDENT CARE FSA EXPENSES INCLUDE:

- Child or adult care center that complies with State and Local regulations (not including nursing homes)
- Sitter inside or outside the home
- Day care during school vacation, provided it is not primarily for educational purposes
- Nursery school, even if the school provides educational services
- Relative who cares for eligible dependents, as long as that relative is not your dependent and is age 19 or older

IRS Publication 503, Child and Dependent Care Expenses, contains a list of expenses eligible for reimbursement under the FSA — Dependent Care. Go to www.irs.gov for a complete copy of the list.

Diversified Benefit Services, Inc. Contact Information:

DBS Customer Service: 800-234-1229

Employer PIN: CHIPPEWA

<https://www.dbsbenefits.com/>

2026 Dental Plan Benefit Summary

CHIPPEWA COUNTY EMPLOYEE DENTAL PLAN

		Delta Dental PPO	Delta Dental Premier
Individual Annual Maximum		\$1,000	\$1,000
Deductible - Individual Family		\$50 \$150	\$50 \$150
Preventative Services	- Exams - Cleanings - Fluoride Treatments - X-Rays - Space Maintainers - Sealants	100%	80%
	Deductible applies	No	Yes
Basic and Major Services	- Fillings - Emergency Treatment to relieve pain	80%	60%
	- Endodontics - Periodontics - Extractions - Crowns, inlays, onlays - Bridges, dentures - Repairs - Implants	50%	40%
	Deductible applies	Yes	Yes
Orthodontic	- Individual lifetime maximum - Coverage coinsurance - Dependent eligible to age	\$1,000 50% 19	\$1,000 50% 19

2026 Dental Premiums

Coverage Level	Total Monthly Premiums
Employee Only	\$34.42
Employee + Spouse	\$69.86
Employee + Child(ren)	\$96.76
Family	\$142.22

Dental Plan Benefits become effective first of the month following 30 days. Monthly employee contributions are deducted one month in advance, spread evenly over 24 paychecks annually.

Dental Plan Benefits & Features

Delta Dental Maximum Benefit Bonus Rollover

Delta will roll over a portion of your unused annual maximum into your personal Maximum Benefit Bonus (MBB) account. If you reach your Plan Annual Maximum in future years, you can use money from your MBB. To qualify for a MBB, you must have a paid claim (even just a cleaning) and must not have exceeded the paid claims threshold during the benefit year. Your MBB account may not exceed the \$1,000 maximum.

You can view your MBB, claims and other dental plan information by creating an online account at www.deltadentalwi.com and clicking “Register” in the upper right hand corner.

Evidence-Based Integrated Care Plan

Your dental coverage includes Delta Dental of Wisconsin’s Evidence-Based Integrated Care Plan (EBICP), which provides additional cleaning(s) and/or fluoride treatments to individuals with specific medical conditions that have oral health implications. Enhanced benefits can play an important role in the management of certain medical conditions, which include: cancer-related treatments, weakened immune systems, periodontal (gum) disease, high-risk cardiac conditions, kidney failure or dialysis, diabetes, or pregnancy.

If you or an individual on your plan have one or more of these conditions, you can enroll online. Once you enroll, you are immediately eligible for EBICP benefits. You can enroll by logging into your Delta Dental Account online, www.deltadentalwi.com. On the dashboard under “Preventative Care and Plan Features” section for Additional Benefits, select “Enroll Now.” In the “Enroll in EBICP” section, select the member & their condition, and hit “Select”. This member will be listed under “Your Current EBICP Benefits”.

Delta Dental Contact Information:

Member Services: 1-800-236-3712

Delta Dental Website: www.deltadentalwi.com

Find a Dentist: <https://www.deltadental.com/us/en/find-a-dentist.html> - Enter the Specialty, Plan: Delta Dental PPO and click FIND dentists.

2026 Vision Plan Benefit Summary

CHIPPEWA COUNTY EMPLOYEE VISION PLAN

VSP Provider Network: VSP Choice

Benefit		Copay	Frequency
WellVision Exam	Focuses on your eyes & overall wellness	\$10	Every 12 months
Frame	\$130 allowance for a wide selection of frames \$150 allowance for featured frame brands 20% savings on the amount over your allowance \$70 Walmart frame allowance	Included in Prescription Glasses	Every 24 months
Lenses	Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children	Included in Prescription Glasses	Every 12 months
Lens Enhancements	- Standard progressive lenses - Premium progressive lenses - Custom progressive lenses - Average savings of 20-25% on other lens enhancements	\$55 \$95 - \$105 \$150 - \$175	Every 12 months
Contacts	\$130 allowance for contacts; copays does not apply Contact lens exam (fitting & evaluation)	Up to \$60	Every 12 months
Extra Savings	Glasses & Sunglasses - Extra \$20 to spend on featured frame brands. Go to vsp.com/specialoffers for details. 20% savings on additional glasses & sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam.		
	Retinal Screening No more than a \$39 copay on routine retinal screening as an enhancement o a WellVision Exam		
	Laser Vision Correction Average 15% off the regular price or 5% off the promotional price, discounts only available from contracted facilities.		
Out-of-Network Providers	Visit vsp.com for plan details. - Exam – up to \$45 - Progressive Lenses – up to \$50 - Lined Trifocal Lenses – up to \$65 - Single Vision Lenses – up to \$30	- Lined Bifocal Lenses – up to \$50 - Frame – up to \$70 - Contacts – up to \$105	

2026 Vision Premiums

Coverage Level	Total Monthly Premiums
Employee Only	\$6.80
Employee + Spouse	\$10.88
Employee + Child(ren)	\$11.12
Family	\$17.92

Vision Plan Benefits become effective first of the month following 30 days. Monthly employee contributions are deducted one month in advance, spread evenly over 24 paychecks annually.

Vision Plan Benefits & Features



GET ACCESS TO THE BEST IN EYE CARE AND EYEWEAR WITH CHIPPEWA COUNTY AND VSP® VISION CARE.

Why enroll in VSP Vision Care? As a member, you'll receive access to care from great eye doctors, quality eyewear, and the affordability you deserve, all at the lowest out-of-pocket costs.

YOU'LL LIKE WHAT YOU SEE WITH VSP.

- **Value and Savings.** You'll enjoy more value and the lowest out-of-pocket costs.
- **High Quality Vision Care.** You'll get the best care from a VSP network doctor, including a WellVision Exam®—the most comprehensive exam designed to detect eye and health conditions.
- **Choice of Providers.** The decision is yours to make—choose a VSP network doctor, a participating retail chain, or any out-of-network provider.
- **Great Eyewear.** It's easy to find the perfect frame at a price that fits your budget.

USING YOUR VSP BENEFIT IS EASY.

- **Create an account at vsp.com.** Once your plan is effective, review your benefit information.
- **Find an eye doctor who's right for you.** Visit vsp.com or call **800.877.7195**.
- **At your appointment, tell them you have VSP.** There's no ID card necessary. If you'd like a card as a reference, you can print one on vsp.com.

That's it! We'll handle the rest—there are no claim forms to complete when you see a VSP provider.

CHOICE IN EYEWEAR

From classic styles to the latest designer frames, you'll find hundreds of options. Visit vsp.com to find a Premier Program location that carries these brands. Plus, save up to 40% on popular lens enhancements. Check out all of the brands at eyeconic.com®, VSP's online eyewear store.

VSP Vision Care Contact Information:

VPS Vision Care Member Service: 800-877-7195

VSP.com

2026 Accident Plan Benefits Summary



New York Life acts as financial protection that can fill financial gaps caused by out-of-pocket expenses such as deductible, co-pay, and non-covered medical expenses.

Benefits are paid regardless of what is covered by Health Insurance.

2026 Accident Insurance Premiums	
Coverage Level	Total Monthly Premiums
Employee Only	\$5.94
Employee + Spouse	\$11.42
Employee + Child(ren)	\$12.30
Family	\$15.40

Health Screening Benefit - \$50 per person enrolled on the Accident Insurance Plan!

Coverage Level	Total Monthly Premiums	Annual	Health Screening Benefit	Annual Cost
Employee Only	\$5.94	\$71.28	\$50	\$21.28
Employee + Spouse	\$11.42	\$137.04	\$100 (\$50 per person)	\$37.04
Employee + Child(ren)	\$12.30	\$147.60	\$50 per person	\$0 - \$47.60*
Family	\$15.40	\$184.80	\$50 per person	\$0 - \$84.80*

Payment Example: Jose fell from bicycle and dislocated his knee and fractured wrist.

Covered Event	Benefit Amount	Covered Event	Benefit Amount
Doctor Office Visit	\$75	Fractured Wrist	\$1,500
X-Ray	\$75	Follow-Up Appointment	\$75
Dislocated Knee	\$4,000	Five (5) PT Visits	\$250

Benefits paid by New York Life Group Accident Insurance - \$5,975

Accident Insurance Plan Benefits become effective first of the month following 30 days. Monthly employee contributions are deducted one month in advance, spread evenly over 24 paychecks annually.

New York Life Contact Information:

New York Life Customer Service: 1-800-225-5695

newyorklife.com

Accident Plan Benefits & Features

With New York Life, you'll have a choice of a comprehensive plan which provides payment in addition to any other insurance payments you may receive. Here are just some of the covered events/services.

Benefit Type	Accidental Insurance Pays YOU
Injuries	
Fractures	\$50 - \$3,000
Dislocations	\$50 - \$4,000
Second and Third Degree Burns	\$50 - \$5,000
Concussions	\$200
Cuts/Lacerations	\$25 - \$200
Eye Injuries	\$200
Medical Services & Treatment	
Ambulance	\$200 - \$750
Emergency Care	\$25 - \$50
Non-Emergency Care	\$25
Physician Follow-Up	\$50
Therapy Services (including physical therapy)	\$15
Medical Testing Benefit	\$100
Medical Appliances	\$50 - \$500
Inpatient Surgery	\$100 - \$1,000
Hospital Coverage (Accident)	
Admission	\$500 (non-ICU) - \$1,000 (ICU) per accident
Confinement	\$100 a day (non-ICU) – up to 31 days \$200 a day (ICU) – up to 31 days
Inpatient Rehab (paid per accident)	\$100 a day, up to 15 days
Accidental Death	
Employee receives 100% of amount shown, spouse receives 50% and children receive 20% of amount shown.	\$25,000 \$75,000 for common carrier
Dismemberment, Loss & Paralysis	
Dismemberment, Loss & Paralysis	\$250 - \$10,000 per injury
Other Benefits	
Lodging – Pays for lodging for companion up to 30 nights per calendar year	\$100 per night, up to 31 nights
Health Screening Benefit (Wellness)	\$50 per person enrolled on plan

2026 Critical Illness Plan Benefits Summary

New York Life helps cover critical health condition expenses that are not covered by your medical plan regardless of what your health insurance plan pays.



Critical illness insurance works to supplement your medical coverage. It's coverage that helps provide financial support when you or a dependent becomes seriously ill. Upon verified diagnosis, it provides you with a lump-sum payment of either: \$10,000, \$20,000 or \$30,000 in initial benefits.

In the event that you or a dependent experience more than one covered condition, the total benefit amount available is 3 times that of the initial benefit amount, which is either: \$30,000, \$60,000 or \$90,000. The payment you receive is yours to spend however you like.

2026 Critical Illness Insurance Premiums

Coverage Level	Benefit Amount
Employee Only	\$10,000
	\$20,000
	\$30,000
Spouse	50% of the Employee's Initial Benefit Amount
Dependent Child(ren)	50% of the Employee's Initial Benefit Amount

Critical Insurance Plan Benefits become effective first of the month following 30 days. Monthly employee contributions are deducted one month in advance, spread evenly over 24 paychecks annually.

Employees can elect a benefit amount of either: \$10,000, \$20,000 or \$30,000. The cost of the premium is based of your age and coverage level as described in the green table below.

Example:

Employee (29 years old) elects \$20,000 coverage and Employee + Spouse. Use the age the employee will be on January 1st.

$20 \times \$1.03 = \text{\$20.60 monthly premium}$

Premium per \$1,000 of Coverage

Attained Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Family – Employee + Spouse + Child(ren)
<25	\$.57	\$.90	\$.85	\$1.19
25 – 29	\$.65	\$1.03	\$.94	\$1.31
30 – 34	\$.81	\$1.26	\$1.09	\$1.54
35 – 39	\$.99	\$1.53	\$1.28	\$1.82
40 – 44	\$1.34	\$2.06	\$1.63	\$2.34
45 – 49	\$1.83	\$2.79	\$2.11	\$3.07
50 – 54	\$2.61	\$3.98	\$2.90	\$4.26
55 – 59	\$3.59	\$5.46	\$3.88	\$5.75
60 – 64	\$4.96	\$7.54	\$5.24	\$7.82
65 – 69	\$6.91	\$10.49	\$7.19	\$10.78
70 – 74	\$9.31	\$14.12	\$9.60	\$14.41
75+	\$12.87	\$19.45	\$13.15	\$19.74

Eligible for a Health Screening Benefit (Wellness) - \$50 per person enrolled on the Critical Illness Insurance Plan!

May receive double the Health Screening Benefit if enrolled in Accident and Critical Illness Insurance.

New York Life Contact Information:

New York Life Customer Service:
1-800-225-5695

newyorklife.com

Critical Illness Plan Benefits & Features



With New York Life, you'll have a choice of a comprehensive plan which provides payment in addition to any other insurance payments you may receive. Here are just some of the covered events/services.

Covered Conditions	Initial Benefit	Recurrence Benefit
Benign Brain Tumor	100% of Benefit Amount	100% of Initial Benefit
Invasive Cancer	100% of Benefit Amount	100% of Initial Benefit
Non-Invasive Cancer	25% of Benefit Amount	100% of Initial Benefit
Skin Cancer	5% of Benefit Amount, but not less than \$250	NONE
Coronary Artery Bypass Graft	50% of Benefit Amount	100% of Initial Benefit
Childhood Disease(s): Cerebral Palsy, Cleft Lip or Palate, Cystic Fibrosis, Type 1 Diabetes, Down Syndrome, Spina Bifida	100% of Benefit Amount	NONE
Coma, Paralysis of 2 or more limb, Heart Attack	100% of Benefit Amount	100% of Initial Amount
Heart Attack	100% of Benefit Amount	100% of Initial Amount
Diphtheria, Malaria, Rabies, Tetanus, Tuberculosis	25% of Benefit Amount	NONE
Kidney Failure, Major Organ Transplant, Occupational HIV	100% of Benefit Amount	NONE
ALS, Alzheimer's, Multiple Sclerosis, Muscular Dystrophy, Parkinson's, SLE	100% of Benefit Amount	NONE
Sever Burn	100% of Benefit Amount	100% of Initial Benefit
Stroke	100% of Benefit Amount	100% of Initial Benefit

Wisconsin Retirement System (WRS)



The Wisconsin Retirement System was created to protect public employees and their beneficiaries against the financial hardships of old age and disability.

HOW THE WRS PENSION WORKS

The WRS offers a retirement benefit based on a defined contribution plan or a defined benefit plan.

- A defined contribution plan means there is a set amount of money (that may change each year) paid into a member's retirement account.
 - **2026** – Employees will contribute **7.20%** and Chippewa County will contribute **7.20%**. For a total of **14.40%**.
 - New Jail Employees – Please reference the Act 4 Memo within offer packet.
- A defined benefit plan means that the amount paid to you in retirement is based on a formula that is fixed, and therefore “defined.”

The WRS refers to these plan types as Money Purchase (defined contribution) and Formula (defined benefit). ETF calculates your retirement benefit using both methods and you will automatically be paid the highest amount.

THE RETIREMENT CALCULATIONS

Your money purchase benefit is calculated by multiplying your money purchase account balance by a factor based on your age. This money purchase balance is shown on your annual Statement of Benefits.

Your formula benefit is based on your three highest years of earnings (“final average earnings”), a formula multiplier (based on your employment category), your years of creditable service (including any creditable military service) and an actuarial reduction if you retire before your normal retirement age.

Participating members will receive a Statement of Benefits every year in April. It shows your account balances, earnings, years of service, and much more. Keep this document with your important papers.

In most cases a retirement benefit is paid as a monthly annuity payable for your lifetime.

VESTING

Vested members are eligible to receive a retirement benefit at age 55 (age 50 for protective category members) once they terminate all WRS employment. Members who are not vested may only receive a separation benefit.

You must have 5 years of WRS creditable service to be vested. 1 year of creditable service is based on the hours you work. To earn 1 year of service, employees need to work 1,904 hours.

Wisconsin Department of Employee Trust Funds (ETF) Contact Information:

ETF Benefit Specialist : 1-877-533-5020, Wisconsin Relay: 711

www.etf.wi.gov

Deferred Compensation – Retirement

Chippewa County's deferred compensation carrier is Nationwide! Deferred compensation is a way to save for retirement above and beyond Wisconsin Retirement System!



You can invest after-tax (ROTH) or pre-tax. With ROTH the dollars are taxed now so that you don't have to pay taxes on them at the time of withdrawal. Another option is to contribute on a pre-tax basis, and any earnings grow tax-deferred. You pay taxes only as you withdraw your assets, usually as retirement income.

If you decide to participate in Deferred Compensation, you will contribute every paycheck, before you receive your take home pay. Because it's "money you never see," participating through the Deferred Compensation Plan is the easiest way to take advantage of dollar costs averaging and other benefits of investing.

Employees can enroll or make contribution amount changes quarterly (January, April, July, and October).

While Nationwide is our Deferred Compensation carrier, Chippewa County contracts with Hays Financial to provide our employees unbiased fiduciary oversight and financial consultation. Hays Financial will be on site twice a year to offer half hour one-on-one consultations to employees. Your Human Resources Division will provide information throughout the year on the meeting dates and sign-up opportunities.

During Human Resources New Employee Orientation, you will receive additional Deferred Compensation information along with Hays Financial contact information.

Life Insurance

MINNESOTA LIFE INSURANCE



Wisconsin Retirement System (WRS) employees are also eligible to elect into Minnesota Life Insurance (MNL) beginning the first of the month following 30 days of employment. MNL allows for employees to elect up to five (5) times their Annual Salary of Term Life Insurance on themselves and Spouse & Dependent Coverage. To elect Spouse & Dependent Coverage – 1 Unit or 2 Units, Basic coverage must be elected.

To determine the monthly premium costs for Minnesota Life Insurance, complete the following steps:

Hourly Rate x 2088 (Full-time yearly hours) = Annual Salary

Round Annual Salary up to the nearest \$1,000 (i.e. if Annual Salary is \$39,456 then round up to \$40,000)

Take first two numbers rounded up **Annual Salary** as the base amount (i.e. \$40)

Find your age on the right table to determine your **Monthly Premium Rate**.

Plug the data into formulas below to determine **Monthly Life Insurance Premium** cost at each level of coverage:

Level of Coverage		Monthly Premium Rate	Monthly Life Insurance Premium
Basic (1x Annual Salary)	<u> </u> (i.e. \$40)	x <u> </u>	= \$ <u> </u>
Supplemental (2x Annual Salary)	<u> </u> (i.e. \$80)	x <u> </u>	= \$ <u> </u>
Additional I (3x Annual Salary)	<u> </u> (i.e. \$120)	x <u> </u>	= \$ <u> </u>
Additional II (4x Annual Salary)	<u> </u> (i.e. \$160)	x <u> </u>	= \$ <u> </u>
Additional III (5x Annual Salary)	<u> </u> (i.e. \$200)	x <u> </u>	= \$ <u> </u>
Spouse & Dependent Coverage – 1 Unit	Spouse (\$10,000)	Dependent (\$5,000)	\$1.60
Spouse & Dependent Coverage – 2 Units	Spouse (\$20,000)	Dependent (\$10,000)	\$3.20

Age	Monthly Premium Rate
Under 30	\$0.05
30-34	\$0.06
35-39	\$0.07
40-44	\$0.08
45-49	\$0.12
50-54	\$0.22
55-59	\$0.39
60-64	\$0.49
65-69	\$0.57
70 +	Contact HR

MN Life Insurance become effective first of the month following 30 days. Monthly employee contributions are deducted the first paycheck of each month, 12 paychecks.

Wisconsin Department of Employee Trust Funds (ETF) Contact Information:

ETF Benefit Specialist : 1-877-533-5020, Wisconsin Relay: 711

www.etf.wi.gov

Life Insurance



GROUP BENEFIT
SOLUTIONS

VOLUNTARY LIFE INSURANCE

New York Life offers additional Life Insurance in the amount of **\$10,000 minimum to \$500,000 maximum**, in increments of **\$10,000**. The employee has the option to elect the Voluntary Life Insurance at a monthly premium based on benefit amount elected and employee's age.

The Guaranteed Issue Amount is \$100,000. Coverage amounts exceeding this limit require the submission of Evidence of Insurability (EOI) to New York Life, who will then determine your eligibility for additional coverage. EOI is a health questionnaire.

If an employee elects coverage above the Guaranteed Issue Amount, Human Resources will provide the required Evidence of Insurability documentation and instructions.

To determine the monthly premium cost for New York Life Insurance, complete the following steps:

Choose your desired coverage amount. Select the total amount of life insurance – between \$10,000 and \$500,000 (in \$10,000 increments).

Divide your chosen coverage amount by 1,000.

Example: $\$100,000 \div 1,000 = 100$

Find your age and rate. Locate your age range in the rate table below to find your monthly cost per \$1,000 of coverage.

Example: Age 37, \$0.090

Calculate your monthly premium.

Example: $\$100,000 \div 1,000 = 100 \times \$0.090 = \$9.00$ Monthly Premium

\$ _____ Life Insurance Coverage Amount	/ \$1,000	x _____ Rate per \$1,000 of Life Insurance	= \$ _____ Monthly Premium
Age	Rate per \$1,000 of Volume	Age	Rate per \$1,000 of Volume
0-24	\$0.050	50-54	\$0.300
25-29	\$0.060	55-59	\$0.510
30-34	\$0.080	60-64	\$0.680
35-39	\$0.090	65-69	\$1.270
40-44	\$0.120	70-74	\$2.060
45-49	\$0.200	75-79	\$3.560

Voluntary Life Insurance becomes effective first of the month following 30 days. Monthly employee contributions are deducted one month in advance, spread evenly over 24 paychecks annually.

New York Life Contact Information: New York Life Customer Service: 1-800-225-5695 newyorklife.com

Disability Insurance



GROUP BENEFIT
SOLUTIONS

SHORT-TERM DISABILITY

Short-Term Disability is insurance that helps supplement an employee's wages when off of work for a serious health condition such as illness or surgery for themselves. Short-Term Disability supplements 66 2/3% of the employee's weekly income. There is a **14-day waiting period** from the date of injury or illness that an employee must take either unpaid or utilize PTO before Short-Term Disability will begin.

\$_____ / 52 = (Annual Salary)	\$_____ x .66 = (Weekly Salary)	\$_____ x _____ / 10 = (Weekly Benefit) (Rate)	\$_____ Monthly Premium
Age	Rate per \$10 of Weekly Benefit	Age	Rate per \$10 of Weekly Benefit
0-24	\$0.283	45-49	\$0.319
25-29	\$0.33	50-54	\$0.402
30-34	\$0.378	55-59	\$0.4532
35-39	\$0.295	60-64	\$0.65
40-44	\$0.307	65 +	\$0.792

LONG-TERM DISABILITY

Long-Term Disability is insurance that helps supplement an employee's wages when off of work for a serious health condition such as illness or surgery. Long-Term Disability supplements 60% of the employee's monthly income. There is a 90-day waiting period from the date of injury or illness before Long-Term Disability will begin. **Chippewa County pays for Long-Term Disability!** Short-Term Disability, if elected, will roll into long-term disability if the carrier approves the long-term disability claim.

Short-Term and Long-Term Disability become effective first of the month following 30 days. Short-Term Disability monthly employee contributions are deducted one month in advance, spread evenly over 24 paychecks annually.

New York Life Contact Information: New York Life Customer Service: 1-800-225-5695 newyorklife.com

Paid Time Off (PTO) & Holidays

Paid Time Off (PTO)

Chippewa County new part-time employees begin accruing PTO at a rate of 7.09 hours per pay period for full-time employees. The PTO is all encompassing of all paid time off you may need including: sick, vacation, appointments, etc. PTO hours rollover from year to year and caps at 480 hours!

See chart below for increased accruals based on years of continuous service:

Multiplier Level	Years of Continuous Service	Hour for Hour Multiplier Used	Per Pay Period Multiplier (based on 80 hours)	Approximate Annual Accrual
Level 1	Less than 5	.0886	7.09	184
Level 2	5-less than 10	.0983	7.86	204
Level 3	10-less than 15	.1079	8.63	224
Level 4	15-less than 20	.1271	10.17	264
Level 5	20 and greater	.1464	11.71	304

Holidays

Chippewa County offers employees 10 paid holidays. Full-time employees shall receive 8 hours of holiday pay on the observed holiday. If an employee is required to work on a holiday, the employee shall receive holiday pay for the holiday in addition to the actual hours worked. Holidays observed listed below:

New Years Day	Labor Day
Spring Holiday (Friday before Easter)	Thanksgiving Day
Memorial Day	Day after Thanksgiving Day
Independence Day	December 24th
Day after Independence Day	December 25th

Funeral Leave & Longevity Bonus

Funeral Leave

Chippewa County offers employees funeral leave in the event of death of an employee's loved one for all full-time and part-time employees. The purpose of funeral leave is to allow time for employees to make funeral arrangements, attend or travel to and from the funeral, celebration of life, visitation, wake, burial or pay respects to family. Funeral leave also allows employees to handle any estate related activities in which the employee has a role. See chart below for amount of paid funeral leave is permitted:

Family Member Classification	Paid Funeral Leave Permitted by Classification
Group 1: Employee's Spouse, Parent (includes Step-Parent), and Child (includes biological, adopted, step or foster child).	5 days and no more than 40 hours
Group 2: Defined as Father-in-law, Mother-in-law, Grandparent, Step-Grandparent, Grandparent-in-law, Grandchild, Step-Grandchild, Sibling (including step), brother-in-law, sister-in-law, uncle or aunt.	3 days and no more than 24 hours
Group 3: County Board Supervisor/County Employee – any active County Board Supervisor, County employee, or retired County employee that was with the County for 1 year or more.	4 hours at the discretion of the Department Head

Longevity Bonus

Chippewa County offers employees a longevity bonus to recognize, express appreciation for and reward long standing employees for their dedicated service to the County. This policy applies to all full-time and part-time employees with a milestone anniversary as of May 1st of each year. Employees who qualify will receive a bonus according to the chart below and the HR Policy on the second paycheck in May.

Longevity bonuses are not prorated; if an employee terminates from the County and returns at a later date (no matter how long the gap in employment) the most recent rehire date is used to establish the years of service for longevity.

Years of Consecutive Service as of May 1 st	Bonus Amount
5 years	\$500
10 years	\$1,000
15 years	\$1,500
20, 25 and 30 years	\$2,000
35, 40 and 45 years	\$2,500

Employee Referral Bonus & EAP

Employee Referral Bonus

Chippewa County encourages employees to seek out and refer people they know to apply for open positions with Chippewa County. Current employees are well equipped to know who will connect with County government and our mission to serve the public. We trust that employees know who may fit our culture best and for this reason, the County will offer a Referral Reward (less tax) via direct deposit to employees who refer a candidate who is subsequently hired for a posted position.

Employees must complete an Employee Referral Form – located on the Employee Portal under, HR Forms, Miscellaneous and submit it no later than the last day of the close of the recruitment. Recruitments typically run for 2 weeks. The Referral Reward is in two payment installments once the applicant/referral completes 2 months and 12 months of employment with Chippewa County. See chart below for amount of paid and the HR Policy:

Total: The County employee making the referral is eligible for up to a \$1,000 Referral Reward (less taxes)

Payment 1: After the referred employee successfully completes 2 months of employment, \$250 (less taxes) will be paid to the County employee who made the referral on the next pay period following eligibility.

Payment 2: After the referred employee successfully completes 12 months of employment, \$750 (less taxes) will be paid to the County employee who made the referral on the next pay period following eligibility.

Employee Assistance Program (EAP)

REALiving's Employee Assistance Program (EAP) offers support to equip employees with the tools they need to manage any issue that may arise in life!

REALiving Benefits include:



- 4 FREE Confidential Counseling and/or Professional Coaching Sessions within the Health Insurance Network
 - Counseling can be used by you or your immediate family members (4 per family)
- 30 minute financial consultation session per topic
- 30 minutes legal consultation per topic
- 1 online additional training credit per employee
- Additional, above and beyond, emergency services counseling

REALiving publications will be available to employees through pamphlets in breakrooms, weekly/monthly newsletters, and a quarterly magazine.

REALiving Contact Information:

855-233-1048 www.realiving.com/

WELLNESS WORKGROUP & EMPLOYEE DISCOUNTS

WELLNESS WORKGROUP

Employees are able to join and participate in the Wellness Workgroup at Chippewa County. The Wellness Workgroup aim to build a culture of health and wellness, with a mission to inspire transformation, help create healthy environments and empower employees. This mission is carried out through 5 pillars: eat well, move well, think well and rest well.

The Wellness Workgroup brainstorms ideas, launches initiatives, and volunteers at events in each of those pillars in ways such informative newsletters on a variety of topics, on-demand presentations, health challenges, fitness events, salad bars, and more!

The Wellness page on the Employee Portal has a lot of great resources. If you are interested in learning more or joining the Wellness Workgroup, contact the Human Resource Division!



EMPLOYEE DISCOUNTS

Chippewa County employees have access to multiple discount programs.

- **AAA** – Waive enrollment fee, discounts on memberships, 24-Hour roadside assistant, discounts at thousands of places Nationwide, insurance services, etc.
- **DELL** – 30% off select Windows PCs, tablets, Dell electronics and accessories, etc.
- **FirstNet** (Cellular Provider) – 3 months FREE, deals on new phones, discounts on smartwatches and tablets, etc.
- **Royal Credit Union (RCU)** – Open a NEW checking account, mortgage closing or mortgage appraisals, etc.
- **Tickets at Work** – Discounts on attractions, hotels, rental cars, etc.

Additional information is located on the Employee Portal under Human Resources, Benefits and Employee Savings.

The Chippewa County Focus on Benefits flyer provides a general overview of the benefits available to eligible employees. It is intended for informational purposes only and does not include all terms, conditions, or details contained in the official plan documents or contracts. In the event of any discrepancy between this summary (or any verbal explanation) and the official plan documents or contracts, the official documents will take precedence and govern all interpretations.

Chippewa County reserves the right to modify, amend, suspend, or terminate any benefit plan or program described in this guide, in whole or in part, at any time and for any reason. This flyer does not constitute an employment contract, and participation in any benefit plan does not guarantee continued employment. Additional benefit information and related materials can be found on the **Chippewa County Employee Portal** under **Human Resources** → **Benefits**.

For questions or clarification, please contact the **Chippewa County Human Resources Division** at **715-726-7969** or via email at **humanresources@chippewacountywi.gov**.

