CLARK CO WISCONSIN

Benefits at a Glance

Please contact Human Resources for additional information and any questions.

All Employees | 2026

Benefit	What you Receive	Eligibility	Who Pays What/Other Notes

Medical & Prescription Drugs	**Carrier: WCA Group Health Trust & CVS**
	Protect your health.
	• Preventive care covered at 100%
	• $100 Individual/$200 Family Deductible. In network services and prescription drugs covered are 85% and out of network services are covered at 65%.
	  • $1,600 Individual and $3,200 Family out of pocket maximums
	  • Rx Copays (Retail-30 day supply):
	    ○ Generic $10 Copay
	    ○ Preferred $20 Copay
	    ○ Non-Preferred $35 Copay
		Available to Employees averaging a minimum of 30 hours per week. First of the month following start date.	**Employee Premium:**
			• Single $81.89
			• Employee & Child(ren) $162.56
			• Employee & Spouse $194.83
			• Family $243.14
			Premiums are deducted bi-weekly.

Telemedicine	**Teladoc** Use virtual doctor visits for common, non-emergency medical conditions. • Cold, respiratory problems, flu • Ear infections • Pink eye • Urinary tract infections Care for General Medicine, Behavioral Health and Dermatology	All members enrolled on the medical plan.	Covered as part of the Medical Plan

Benefit	What you Receive	Eligibility	Who Pays What/Other Notes
Dental	**Delta Dental of Wisconsin** Protect your smile. • Coverage for preventive, basic and major services. Orthodontia for adults and dependents up to age 26.	Available to employees averaging a minimum of 30 hours per week. First of the month following start date.	**Employee Premium:** • Single $5.38 • Employee & Child(ren) $10.77 • Employee & Spouse $12.91 • Family $16.15 Premiums deducted bi-weekly.
Vision **Delta-Insight Network**	**DeltaVision-Insight Network** Protect your eyesight. • Coverage for exams, lenses and frames. • $0 copay for a routine vision exam!	Available to employees averaging a minimum of 30 hours per week. First of the month following start date.	**Employee Premium:** • Single $.60 • Employee & Child(ren) $1.22 • Employee & Spouse $1.19 • Family $1.81 Premiums deducted bi-weekly.
Tax-Advantaged Accounts **EBC Corp.**	**EBC Corp**. Use pre-tax dollars to pay for qualified expenses. • **Health FSA:** Available for health, prescription, dental, and vision expenses. • **Limited-Purpose FSA:** Available for dental and vision expenses. • **Dependent Care FSA:** Available to all eligible employees for dependent care expenses.	Available to employees averaging a minimum of 30 hours per week and/or enrolled on the medical plan. First of the month following start date.	**Employee Paid:** **Heath FSA:** Annual Maximum of $3,400 **Limited Purpose FSA:** Annual Maximum of $3,400 **Dependent Care FSA:** Annual Maximum of $7,500 Contributions deducted bi-weekly.
Wisconsin Retirement System	**Department or Employee Trust Funds (ETF)** Pension plan provides a lifetime retirement payment.	Available immediately to employees averaging over 1200 hours annually.	**Employee Pays** 7.2% **Employer pays:** 7.2% for **General Employees** 14.7% for **Protected Employees** Deducted bi-weekly.
Life/Accidental Death &	**MetLife** Basic Life:	Available to Employees averaging a minimum of 30 hours per week First of the month following start date.	**Employer Paid Benefit**

Dismemberment (AD&D)	• $30,000 Benefit with $30,000 AD&D-Employee • $3,000 Benefit-Spouse • $1,500 Benefit-Child		
Voluntary Life Insurance	**MetLife** Purchase additional life insurance to protect your loved ones. • Employee: $10,000 increments to a maximum of the lesser of 5 times base pay or $500,000 plus AD&D • Spouse Benefit: $5,000 increments to a maximum of $100,000, not to exceed 100% of employee's voluntary life. • Child Benefit: $1,000-$10,000 Maximum	Available to Employees averaging a minimum of 30 hours per week First of the month following start date.	**Employee Paid-varies based on age and earnings.** Deducted bi-weekly.
Benefit	What you Receive	Eligibility	Who Pays What/Other Notes
Long-Term Disability	**Lincoln Financial Group** Protects your income. • 60% of income up to a maximum of $5,000 monthly benefit • 90 calendar day elimination period • 2 years maximum benefit period if less than Age 68 at time of disability	Available to Employees averaging a minimum of 30 hours per week. First of the month following start date.	**Employer Paid Benefit**
Short-Term Disability	**Lincoln Financial Group** Protects your income • 60% of income up to a maximum of $1,000 weekly benefit • 7 day elimination period • 13-week maximum duration	Available to Employees averaging a minimum of 30 hours per week. First of the month following start date.	**Employer Paid Benefit**

DISCLAIMER: This is a summary of the official Summary Plan Documents (SPD) that legally govern the terms and operations of their respective plans. If there is a conflict between this summary and the plan document, the plan document prevails.