

2025 MANAGEMENT AND NON-REPRESENTED BENEFIT SUMMARY

Wisconsin State Retirement (WRS)	13.9% (i.e. 2025 rate) of gross wages paid by Iowa County. Iowa County currently pays 50% of that contribution.		
Health Insurance	Wisconsin Public Employers' Group Health Insurance Program (ETF) – 2025 Plan – Low Deductible Plan. (Deductible is \$500 – Single/\$1,000 – Family).		
	2025 Monthly Premium Rates (employee contributions):		
	Medical Associates: Single: \$119.62 Family: \$288.48		
	Dean: Single: \$280.50 Family: \$690.68 GHC Neighbors:		
	Single: \$203.64 Family: \$498.54 State Maintenance Plan:		
	Single: \$260.78 Family: \$641.42 GHC Dane Choice:		
	Single: \$66.78 Family: \$156.38 Quartz Central:		
	Single: \$541.58 Family: \$1,343.38 Quartz UW:		
	Single: \$127.58 Family: \$308.38 *Premium contributions are pro-rated for part-time employees		
	Employees may enroll in a different health plan provider than listed above.		
	Coverage is effective 1 st day of the month following thirty (30) days of employment.		
Dental Insurance	Iowa County offers a Low and High Dental Plan with Delta Dental. County pays 100% of the Low single plan and 85% of the Low family Plan.		
	2025 Monthly employee contributions: Low Single: \$0.00 High Single: \$24.29		
	Low Single: \$0.00 High Single: \$24.29 Low Family: \$11.38 High Family: \$78.22		
	*Premium contributions are pro-rated for part-time employees		
	Coverage is effective 1 st day of the month following thirty (30) days of employment.		
Life Insurance	Basic Plan Coverage is Employee paid, but Iowa County contributes 20% in addition to employee's Basic coverage premium. Additional coverage available.		
Vision Insurance	Voluntary. Employees pay premiums, ranging from \$5.67/mo. (Employee Only) to \$14.94/mo. (Employee+Family)		
Disability Insurance	Voluntary Short and Long Term disability plans. Monthly premium is 100% Employee paid		
Flex Spending	Voluntary. Employees may place qualified unreimbursed medical care and/or qualified dependent care expenses in a pre-tax spending account. Healthcare maximum contribution level is up to \$3,300 per plan year. Dependent Care maximum contribution level if married		

	filing jointly or single is up to \$5,000 per plan year and if married filing separately is up to \$2,500 per plan year.			
	Iowa County will pay a \$3 annual enrollment fee and \$3.75 monthly administrative fee for non-represented employees who elect an annual minimum of \$628.			
Section 125 Premium Only	Voluntary. Employees may place health, dental and vision insurance premium contributions in a pre-tax account.			
Deferred Compensation	Optional benefit for employees to defer income tax on some of their earnings.			
Long Term Care Insurance	Voluntary. Employees pay premiums for their own or family members' future long term care needs, such as assisted living, adult day care, in-home care or institutional care.			
Employee Assistance Plan	Confidential consultation provided at no cost to employees.			
Managed Time Off (MTO)	MTO Plan replaces paid time that covered vacation pay, sick pay, bereavement pay and personal holiday pay plans.			
	A correct Powind	Maximum Annual Accrual for Employees Working 40 Hours		
	Accrual Period 0-1.99 year	per week 136 hours		
	2-5 years	176 hours		
	6-10 years	208 hours		
	11-15 years	248 hours		
	16-20 years	288 hours		
	21 or more years	312 hours		
Holidays	9 holidays: New Year's I Good Friday Memorial Da Independence Labor Day Thanksgiving Day After Th Christmas Ev Christmas Da	ny e Day g nanksgiving ve		