

School of Medicine & Public Health (UWSMPH)

- [Self Service \(eBenefits\) Online Enrollment](#)
- SMPH Benefits Fax: 608-262-9515
- [SMPH Contact List](#)

UW Medical Foundation (UWMF)

- HR Service Center (HRSC) Phone: 608-263-6500
- [Oracle Help Desk Request](#) (Use UW Health login/EPIC login)
- UW Health IS Phone: 265-7777 (login assistance)

UWSMPH

Complete **Prior to Start Date**

- ☐ **I-9:** I-9 Section 1 online (US Department of Justice Employment Eligibility Verification). UW-Madison partners with HireRight to complete I-9's online. You will receive separate email from noreply@hireright.com with instructions for completing online.

Complete Within **3 Days** from Appointment Date

- ☐ **TAX WITHHOLDING:** Federal/State
<https://uwservice.wisconsin.edu/docs/publications/pay-update-federal-state-w4.pdf>
- ☐ **DIRECT DEPOSIT:**
<https://uwservice.wisconsin.edu/docs/publications/dd-setup.pdf>

Complete No Later than **30 Days** from Appointment Date – Can be completed as early as **7 days** prior to start date

Online Enrollment: <https://hr.wisc.edu/benefits/new-employee-benefits-enrollment/online-enrollment/>

Step 1: Log in to your MyUW portal; Go to the Benefit Information module
Step 2: Click the Benefits Enrollment link to access Self Service; Click 'Select'
Step 3: Choose plans and add dependents; Finalize election and submit

- ☐ **HEALTH:** [Group Health Insurance](#) – Option to include Uniform Dental coverage (preventative/diagnostic) – **REQUIRED** election to either *enroll*, *waive* or *opt out* (If electing Opt-Out Incentive, paper form must be completed)
- ☐ **DENTAL:** [Supplemental Delta Dental](#) - **OPTIONAL** Enrollment
- ☐ **VISION:** [DeltaVision Coverage](#) - **OPTIONAL** Enrollment
- ☐ **FLEX:** [Health Care Flexible Spending Account](#) – **OPTIONAL**
- ☐ **FLEX:** [Dependent Daycare Flexible Spending Account](#) - **OPTIONAL**
- ☐ **HSA:** [Health Savings Account](#) - **REQUIRED** election if enrolling in High Deductible Health Plan (HDHP)
- ☐ **LIFE:** [University Insurance Association](#) **Mandatory coverage
- ☐ **LIFE:** [State Group Life Insurance](#) – **REQUIRED** election enroll for Employee, Spouse, Dependent Coverage, or waive
- ☐ **LIFE:** [UW Employee's Inc Life Insurance](#) - **OPTIONAL** Enrollment
- ☐ **LIFE:** [Individual and Family Life Insurance](#) - **OPTIONAL** Enrollment for Employee or Family Coverage
- ☐ **LIFE:** [Accidental Death & Dismemberment Insurance](#) - **OPTIONAL** Enrollment for Employee or Family Coverage
- ☐ **LIFE:** [Accident Insurance](#) - **OPTIONAL** Enrollment for Employee or Family Coverage
- ☐ **DISABILITY:** [Income Continuation Insurance \(ICI\)](#) – **REQUIRED** election to enroll or waive
- ☐ **RETIREMENT:** [Wisconsin Retirement System \(WRS\)](#)
**Mandatory Coverage
- ☐ **RETIREMENT:** [Supplemental Retirement Plan \(SRP\) 403\(b\)](#): Salary Reduction Agreement- **OPTIONAL** Enrollment
- ☐ **RETIREMENT:** [WDC 457\(b\)](#): Salary Reduction Agreement- **OPTIONAL** Enrollment

UWMF

Complete **Prior to Start Date**

- ☐ **I-9:** I-9 Section 1 online (upon scheduling Employee Health visit you will receive an email from 'Corporate Screening')
I-9 Section 2 – Complete at EHS visit; bring documents

Date of Hire

- ☐ **UW Health Username & Password:** Obtain from your Department Administrator. Call IS for login help 608-265-7777. Will not have Oracle access until 1st day of employment.

Complete No Later Than **7th** of Month in Which You **1st** Get Paid

- ☐ **TAX WITHHOLDING & DIRECT DEPOSIT:** Online Oracle Cloud
[Oracle Cloud](#) > Me > Pay > Tax Withholding
[Oracle Cloud](#) > Me > Pay > Payment Methods (direct deposit)
- ☐ **PERSONAL INFORMATION:** Online Oracle Cloud
[Oracle Cloud](#) > Me > Personal Info > Personal Details
[Oracle Cloud](#) > Me > Personal Info > Contact Info
[Oracle Cloud](#) > Me > Personal Info > Family & Emerg Contacts

No Later than **7-Day** Timeframe Based on Your **1st** Paycheck

Online [Oracle Cloud](#) > Me > Benefits > Make Changes
Any issues completing PRP election, call HR Service Center at 608-263-6500 prior to 7-day window ending

- ☐ **RETIREMENT:** UWMF Physicians Retirement Plan (PRP) Contribution Category Assignment Request. If not completed within 7-day deadline will default to 15% for current 5-year Contribution Cycle; no ability to change. Must click 'submit'.
- ☐ **RETIREMENT:** UWMF Physicians Retirement Plan Investment Elections Online: <https://netbenefits.com> (will not have access until 1st day of employment). ***Due to plan requirements, if not completed will default to age appropriate Target Date Fund
- ☐ **RETIREMENT:** Designation of Beneficiary Online
<https://netbenefits.com> (Menu > Beneficiaries)

Complete No Later than **30 Days** from Appointment Date –

Online [Oracle Cloud](#) > Me > Benefits > Make Changes

If within 30-day window and you have any difficulties completing your new hire enrollments contact the HRSC, if needed.

- ☐ **PEOPLE TO COVER:** Enter first to ensure they are available for benefit enrollment options (includes covered dependents, beneficiaries and emergency contacts)
- ☐ **DENTAL:** Dental Insurance – **OPTIONAL**
- ☐ **FLEX:** Health Care Flexible Spending Account – **OPTIONAL**
- ☐ **LIFE:** VEBA Election and beneficiary– **REQUIRED** to elect or waive
- ☐ **LIFE:** Life & LTD Beneficiaries – **REQUIRED**
- ☐ **LIFE:** Spouse Life Insurance – **OPTIONAL** Enrollment
- ☐ **LIFE:** Dependent Life Insurance – **OPTIONAL**
- ☐ **LIFE:** Accident, Critical Illness, Hospital Indemnity Ins – **OPTIONAL**
- ☐ **VOLUNTARY:** LifeLock Election – **OPTIONAL** (37.5% appt)