



STATE OF WISCONSIN  
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**CORRESPONDENCE MEMORANDUM**

**DATE:** August 4, 2005  
**TO:** Group Insurance Board  
**FROM:** Liz Doss-Anderson, Ombudsperson, Quality Assurance Services Bureau  
Christina Licari, Ombudsperson, Quality Assurance Services Bureau  
Pam Licht, Section Chief, Staff Services Section  
**SUBJECT:** Correspondence and Complaint Summary

This summary is provided for informational purposes and contains a listing of issues raised by participants relating to insurance benefits under the authority of the Group Insurance Board (GIB). The tables below include a summary of the following:

- (1) correspondence received by the Department written to the Secretary or the GIB
- (2) the number of written formal and informal complaints (usually via telephone) handled by the ombudspersons in the Quality Assurance Services Bureau

The information provided in the attached tables is from the time period of May 1, 2005, through July 31, 2005.

Quality Assurance Services Bureau staff will be available at the Board meeting to address any questions you have regarding this report. Thank you.

Attachments

Reviewed and approved by Pam Henning, Administrator, Division of Management Services.	
_____ Signature	_____ Date

Board	Mtg Date	Item #
GIB	08/30/2005	7

**Correspondence:**

	Number
<b>Health Insurance</b>	<b>4 (67%)</b>
<i>Issues:</i> <ul style="list-style-type: none"> <li>Request of benefit changes</li> <li>Concern that date of birth was on the mailing label of the Consumer Assessment of Health Plans Survey</li> </ul>	<p>3</p> <p>1</p>
<b>Pharmacy Benefit</b>	<b>1 (17%)</b>
<i>Issues:</i> <ul style="list-style-type: none"> <li>Request for a 90-day supply through local pharmacy, not mail order program</li> </ul>	1
<b>Disability Benefits</b>	<b>1 (17%)</b>
<i>Issues:</i> <ul style="list-style-type: none"> <li>Request for further information on ICI overpayment</li> </ul>	1
<b>Total</b>	<b>6 (100%)</b>

**Formal Written and Informal Complaints:**

From May 2005 through July 2005 the ombudspersons handled 138 formal and informal complaints regarding insurance programs. The majority of these complaints involved health insurance, disability programs, and the pharmacy benefit. The following highlights the variety of issues handled by the ombudspersons.

	Number
<b>Health Insurance Complaints</b>	<b>99 (72%)</b>
Health Maintenance Organizations <i>Most Common Issues:</i>	73
<ul style="list-style-type: none"> <li>• <i>Billing (27%)</i></li> <li>• <i>Enrollment and Eligibility (21%)</i></li> <li>• <i>Non-covered Services (16%)</i></li> </ul>	
Standard Plans (all) <i>Most Common Issues:</i>	26
<ul style="list-style-type: none"> <li>• <i>Billing (27%)</i></li> <li>• <i>Non-covered Services (19%)</i></li> <li>• <i>Referrals (15%)</i></li> </ul>	
<b>Pharmacy Benefit Complaints</b>	<b>22 (16%)</b>
<i>Most Common Issues:</i>	
<ul style="list-style-type: none"> <li>• <i>Enrollment and Eligibility (41%)</i></li> <li>• <i>Billing (27%)</i></li> <li>• <i>Prior Authorization (18%)</i></li> </ul>	
<b>Disability Program Complaints</b>	<b>13 ( 9%)</b>
Income Continuation Insurance <i>Most Common Issues:</i>	8
<ul style="list-style-type: none"> <li>• <i>Overpayment (50%)</i></li> <li>• <i>Payment/Check Error (25%)</i></li> </ul>	
Disability Retirement (§ 40.63)	2
Duty Disability (§ 40.65)	0
Long-Term Disability Insurance	3
<b>Other Program Type Complaints (Life, ERA, EPIC, Spectera)*</b>	<b>4 (3%)</b>
<b>Total</b>	<b>138 (100%)</b>

\*It is not common to receive a large number of complaints regarding these programs. The availability of ombudsperson assistance isn't as widely known and most of the programs are not under contract with ETF, rather they are benefits that the Board simply approves to be offered through payroll deduction.

**Key:**

- *ERA: Employee Reimbursement Accounts. Optional pre-tax savings account for medical expenses and dependent care.*
- *EPIC: Optional supplemental benefit plan that provides coverage for dental, excess medical and accidental death and dismemberment.*
- *Spectera: Optional vision benefit.*