

THINGS TO REMEMBER ABOUT YOUR HEALTH INSURANCE

- You are responsible for your health care decisions.
- Not every service you want or need is covered by your health insurance. Contact your plan if you are uncertain about coverage or to find out if you need prior authorization for the services you want to receive.
- You will have to pay for services you choose to receive that are not covered by your plan.
- If you are in a plan with a network of providers, you must always use that network's providers for your care or obtain prior authorization for services outside of the network.
- Some services require copayments. Know your plan coverage.

Wisconsin Department of Employee Trust Funds

Ombudsperson Services
P.O. Box 7931
Madison, WI 53707-7931



1-877-533-5020 ext. 17947
Local: (608) 261-7947
ombudsperson@etf.state.wi.us

Wisconsin Relay Service
(for speech- and hearing-impaired individuals):
7-1-1 or
1-800-947-3529 (English)
1-800-833-7813 (Español)

etf.wi.gov

Ombudsperson Services



When You Have
Wisconsin Retirement
System Insurance
Questions About:

- Claims
- Clarification of Benefit Coverage
- Denial of Referrals or Prior Authorizations
- Enrollment & Eligibility
- Grievance Process
- Independent Review
- It's Your Choice Enrollment Period
- Prescription Drug Benefits

Contact us at:

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WHAT SERVICES ARE AVAILABLE THROUGH THE OMBUDSPERSON PROGRAM?

The Department of Employee Trust Funds (ETF) Ombudsman staff attempts to resolve questions and issues on behalf of Wisconsin Retirement System (WRS) participants.

AN OMBUDSPERSON CAN HELP:

- When a prior authorization request has been denied.
- When claims have not been processed correctly.
- When you have been told that you have no insurance coverage.
- If you would like to know how to file a grievance.
- If you receive a bill for services that have been covered in the past.

OMBUDSPERSON:

A confidential resource for people in the WRS who acts as a neutral party to work for equity, fairness and compliance with program policies and insurance contracts.

WHY USE AN OMBUDSPERSON?

The Ombudsman gives you an additional way to resolve your plan issue outside of the grievance process; however, this does not replace the plan grievance process. ETF staff try to promptly resolve your complaint, often by working directly with the plan.

If your complaint cannot be resolved informally by the Ombudsman and you wish to pursue the complaint further, a staff member will explain the multi-level grievance process available to all WRS participants.

AN OMBUDSPERSON CANNOT:

- Guarantee a favorable outcome.
- Change any plan's policy.
- Authorize claims payment.
- Make medical determinations.
- Violate confidentiality.
- Make ETF policy or management decisions.

OMBUDSPERSON:

Offers Impartiality—
Not an advocate for any particular individual or group. Considers the rights and interests of all parties to reach a fair resolution.

I HAVE AN INSURANCE ISSUE. WHERE DO I BEGIN?

First, contact your plan and clearly explain the problem. Many issues are resolved with a few calls to the plan or your provider.

If you are unable to resolve the matter yourself, you can choose to go through your plan's grievance process. Contact your plan for information about their grievance process.

You may contact an ETF Ombudsman before or after going through the plan grievance process. In either case, the Ombudsman can assist as a "navigator," by providing guidance, options and resources.

Call, e-mail or write the Ombudsman Program if you have questions or would like more details about services available or the grievance and appeal process.