

STATE OF WISCONSIN Department of Employee Trust Funds David A. Stella

SECRETARY

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CORRESPONDENCE MEMORANDUM

DATE: March 25, 2010

TO: Group Insurance Board

- FROM: Sharon Walk, Appeals Coordinator
- **SUBJECT:** Pending Appeals

This memo is for informational purposes only. No Board action is necessary.

As of March 25, 2010, there are 24 appeals pending before all boards. Seven of these appeals involve programs overseen by the Group Insurance Board. Four have been sent to the Division of Hearings and Appeals for an administrative hearing and the remaining three are being reviewed in the Internal Record Review (IRR) process.

The IRR process, which was implemented in 2001, has been instrumental in resolving appeals without the need for a hearing. Below are several examples of appeals that were closed recently.

Appeal No. 2009-011-GIB

The participant filed an application for a Long-Term Disability Insurance (LTDI) benefit. Her application was cancelled because she failed to complete the application process within one-year. She filed an appeal of the Department's determination. The participant was encouraged to file a second application for LTDI. Her second application was monitored closely by IRR staff to ensure that she completed the steps in a timely fashion. Her second application was approved and she is now receiving LTDI benefits. The appeal was withdrawn.

Appeal No. 2009-016-GIB

The participant applied for LTDI benefits and was denied. She filed an appeal because she believed that her failure to do so would result in an estimated offset from her Income Continuation Insurance (ICI) benefit. IRR staff worked with Aetna to assure the participant that her ICI would not be affected. No further action was needed and the appeal file was closed.

Reviewed and approved by Robert J. Conlin, Deputy Secretary.
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Board	Mtg Date	Item #
GIB	4.13.10	7G

Signature

Date

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Appeal No. 2009-007-GIB

The participant was denied payment for medical services that were obtained out-ofplan. It was the participant's belief that he could not receive a diagnosis from his Health Maintenance Organization (HMO) and that it was necessary for him to go out-of-plan for services. He did not receive a prior authorization. In the Departmental Determination letter, the Department noted that the HMO believed there were physicians in the plan that would be able to assist the participant. After the appeal was received, IRR staff asked the participant to provide further evidence explaining his position. After numerous contacts requesting this information were not successful, the appeal file was closed.

Appeal No. 2009-018-GIB

The participant did not meet the eligibility requirements for LTDI. Upon receipt of her appeal, IRR staff sent her redacted copies of several prior Board decisions that dealt with this issue. Although she claims that she was never told about this benefit by her employer, previous Board decisions clearly state that the Department cannot grant her the relief she seeks. The appeal file was closed.

Staff will be available at the April 13, 2010, meeting to answer any questions you may have.