



STATE OF WISCONSIN
Department of Employee Trust Funds
Robert J. Conlin
SECRETARY

Wisconsin Department
of Employee Trust Funds
PO Box 7931
Madison WI 53707-7931
1-877-533-5020 (toll free)
Fax 608-267-4549
etf.wi.gov

Correspondence Memorandum

Date: January 25, 2018
To: Group Insurance Board
From: Liz Doss-Anderson, Ombudsperson
James Kates, Ombudsperson
Mary Richardson, Ombudsperson
Dan Hayes, Supervising Attorney
Subject: 2017 Ombudsperson Quality Assurance Report

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

Ombudsperson Services staff work with various Divisions and Offices throughout the Department of Employee Trust Funds (ETF) on initiatives related to the quality of service received by participants in ETF's benefit programs regarding administration of their benefits. Through our day-to-day interactions with members we identify areas of concern and areas in need of clarification in order to make large-scale improvements. Ombudsperson Services then provides quality-related recommendations to managers throughout ETF. These improvements benefit all parties, notably members, employers, plans and third-party administrators.

As ombudspersons, we have multiple daily communications with program participants, plan contacts and employers. As a result of these interactions, we learn about the issues, questions and problems our members' experience with their health, pharmacy and dental plans. We are often the first ones at ETF to know about a problem, issue or concern. On occasion, we see several of our members encounter the same issue or we consider whether a single reported problem may actually affect a larger number of our members. This report provides an overview of our quality assurance activities in 2017.

Benefit Administration

Ombudsperson Services staff respond to members' inquiries and complaints primarily regarding health insurance and prescription drug benefit administration. These member contacts may involve questions or concerns about how a benefit is structured, how a

Reviewed and approved by David Nispel, General Counsel, Legal Services

Electronically Signed 1/30/18

| Board | Mtg Date | Item # |
|-------|----------|--------|
| GIB | 2.21.18 | 9E |

plan is following contract requirements or clarification of a benefit so members have a better understanding of their benefits.

For example, Ombudsperson Services:

- Along with the Office of Strategic Health Policy (OSHP), continued participation in meetings with a health plan, previously identified as experiencing ongoing customer service, enrollment and eligibility issues. As a result of those regular interactions, the plan was able to identify and correct or improve their internal processes which had a positive effect on the numbers of complaint calls. In addition, the process for terminations of direct pay contracts was clarified with a new timetable for notifications, lessening the chance for pharmacy benefit overpayments. As the year progressed, the improvements led to a noticeable decrease in complaints, as well as more timely terminations of health insurance contracts. Future meetings were agreed to on an as needed basis.
- Identified a problem with health plan's members being incorrectly disenrolled when one member became Medicare eligible. Although the plan processed the corrections, reestablishing coverage for the affected non-Medicare member and dependents, there appeared to be no formal corrective action taken by the plan to prevent this error in the future. This plan is not a participating health plan for 2018.
- Worked with the Office of Communications (OC) to clarify language for rehabilitation therapy limits on the website. Additionally, notified the OC regarding missing or inactive links to information and the need for updated Certificates and FAQs, as they became evident.
- Clarified with OSHP and Total Administrative Services Corporation (TASC), ETF's Flexible Spending Account Administrator, the processes members may use for recovering reimbursements that were issued by check, but never cashed.
- Regularly collaborated with OSHP staff on benefit clarification for members and plans when there was a discrepancy in understanding how a benefit of the plan contract is administered.

Publications, Correspondence and Website Information

Quality assurance efforts by Ombudsperson Services include assistance with periodic evaluation and updating of ETF's benefit publications. Two major examples are:

1. Timely issuance of ETF website updates to assist our members in understanding new topics related to WRS benefits, and;
2. Working internally with the health plans in order to clarify or correct WRS benefit information in their materials.

Much of our quality assurance work focuses on health insurance benefits and the information provided in ETF's yearly It's Your Choice (IYC) outreach materials and at health fairs. ETF forms associated with health insurance enrollment were updated, and information provided to our members by their individual health plans was reviewed by ETF staff.

For example, Ombudsperson Services:

- Participated in OSHP's Member Communication and Education Workgroup focused on development of consumer-friendly materials for the It's Your Choice period.
- Provided feedback to the OC on various aspects of IYC open enrollment materials including web site content, brochures, and e-learning modules.
- Worked with the OC to convey clearly to members, via brochures and ETF's website, the substantial health plan changes for 2018.

Technology-Related Efforts

In our role as ombudspersons we are involved in supporting and maintaining our internal Benefit Complaints System and other IT systems by providing feedback to technical staff regarding performance issues or areas in need of quality improvement. Ombudsperson Services has also provided subject matter expertise for the Department's major IT initiative: implementation of the new Benefit Administration System (BAS), branded as myETF.

For example, Ombudsperson Services staff:

- Identified enrollment processing error by a health plan related to Medicare contracts. Ensured issue was corrected and verified members were properly enrolled.
- Served as a member of the ETF Change Management workgroup focused on Department changes, their impact on employees and development of strategies for implementation of changes with an emphasis on BAS and the new building.
- Served as subject matter experts in development of myETF business requirements and bridging of information from the Benefit Complaint System (BCS) to myETF.
- Maintained coding in the Benefit Complaint System to be consistent with myETF Benefits (MEBS).

Staff will be available at the Board meeting to answer any questions.