

## Hickory R. Hurie of Madison, Wisconsin

1522 Vilas Avenue  
Madison, Wisconsin  
United States of America 53711

Cell Phone: 608.609.7437  
Email hrhurie@gmail.com

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Michael Farrell, Chair  
Wisconsin Group Insurance Board  
% Board Liaison, Department of Employee Trust Funds  
PO Box 7931  
Madison, Wisconsin 53707-7931

Dear Mr. Farrell

Over the last several years, I have listened to GIB discussions on the group health insurance program. I have two concerns about the Board's directions related to A)) the evaluation of the impact of its overall policy goals, and B) the involvement of participants/beneficiaries in feedback to the Board.

### EVALUATION OF POLICY DECISIONS:

The Board has made several major policy design decisions over the last several years that have caused significant changes in the shape of the health care insurance system for ordinary Wisconsinites: consolidation of health providers and insurers, push incentives toward a high-deductible plan, cost shifting to individuals, cost containment measures, the development of an exhaustive data base of private medical information, and the exclusion of certain spousal beneficiaries and their children.

I have not yet seen the Board, ETF staff, or your consultants fully evaluate the separate outcomes of each major policy decision, nor the overall impact of these cumulative decisions on its beneficiaries and their communities:

1. Have the decisions improved the overall health of participants?
2. Have these cumulative decisions decreased the total cost of health care for the individual participants and their families, not merely the employer share of health care?
3. Have these cumulative policy design decisions strengthened the overall delivery of health care in Wisconsin?

I believe that as a major purchaser of health care in this state, the GIB has the responsibility to evaluate the impact of its decisions on the total cost/expense of its policies on individual participants and their families. GIB also has a fiduciary duty to its employees and annuitants. I also believe that as a major employer and statewide public entity, the GIB should review its leadership role as a model employer to enhance the long term benefit and effectiveness of the overall health care system, not merely focus on its own employers' short term 'costs'.

### BENEFICIARY INVOLVEMENT IN GIB DELIBERATIONS:

I notice that the GIB has used several avenues to review possible program changes and to provide feedback to the Board:

- A) A Study Group" made up primarily of industry and employer representatives, as well as ETF staff..."
- b) A Member Communication and Education work group "comprises employer representatives and ETF staff"; and
- c) An ETF Council on Health Program Improvement "various vendors and ETF". I see only one mention of "member feedback" in the Walk memo to the GIB on Health Benefit program Agreement...for the 2019 Plan dated February 1, 2018, related to lab costs for biometric screenings (page 5). I have heard little mention of member feedback during Board deliberations. The 'letters to the Board' are sometimes not

included in the public agenda but are said to be made available at or after the Board meeting. Sometimes this correspondence is not made available to the public at all.

In light of current research on the value of a “customer focus” and best business practices, I hope that the Board would take additional steps to systematically gather participant member feedback and ‘customer’ representation as ETF and the Board move ahead on 2019 program changes. The GIB should pay special attention to the unique status of its annuitants, since they pay 100% of their health care premiums with their own previously earned funds and Medicare.

I believe the Board yet has the opportunity to be more open about its deliberations on the public group health insurance. The GIB has no scheduled meeting time for public comment, and does not appear to acknowledge nor respond to written public correspondence received prior to Board meetings. The implementation of a seven-day advance posting of key agenda documents seems essential for any public input into Board discussion, or public understanding of how Board decisions affect participants, the health providers, and Wisconsin communities. Further the Board, you as its chair, or ETF staff could at least summarize key issues raised by any correspondence to the Board, and provide some sort of brief comment, similar to those summaries of comments found in the Federal Register.

I appreciate this opportunity to offer some suggestions regarding evaluation and customer feedback. I hope that they will contribute to a fuller discussion at your coming meetings.

Sincerely

  
Hickory R. Hurie

CC: Other members of the GIB, where addresses are available