

Letter 12 with Response

From: [Zabransky, Amy K - BOALTC](#)
To: [ETF SMB Board Feedback](#)
Subject: Inquiry re: Insurance Board
Date: Wednesday, May 8, 2019 11:51:48 AM

Good Afternoon,

I am writing to inquire about how decisions are made regarding which services will be covered under the state of Wisconsin health insurance benefits? I want to be able to understand who makes the decisions about what type of services will be covered and what method is used to decide.

Thank you.

Amy K Zabransky

Volunteer Coordinator- Volunteer Ombudsman Program

State of Wisconsin Board on Aging and Long Term Care

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From: [ETF SMB Board Feedback](#)
To: [Zabransky, Amy K - BOALTC](#)
Subject: RE: Inquiry re: Insurance Board
Date: Monday, May 13, 2019 4:28:00 PM

Attachments: [image001.png](#)
[image002.png](#)
[image003.png](#)
[image004.png](#)

Dear Ms. Zabransky,

Thank you for your inquiry regarding the decision making process for changes to the state employee health insurance offerings. The Group Insurance Board (GIB), subject to the requirements of s. 40.52, Wis. Stat, approves benefit changes to insurance offerings. The GIB receives information and recommendations on requested changes and their cost from staff in the Office of Strategic Health Policy (OSHP). OSHP annually collects all requested benefit changes from affected parties including members, participating health insurers and health care providers. Requested changes are evaluated for compliance with state and federal requirements, cost impact and the impact on plan participants and the information is shared with the GIB to aid in their decision making.

Persons who are interested in plan changes should submit the request to the GIB member feedback mailbox at ETFSMBBoardFeedback@etf.wi.gov.

Best Regards,



Eileen Mallow | Director
Office of Strategic Health Policy
Wisconsin Department of Employee Trust Funds | etf.wi.gov
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