

STATE OF WISCONSIN Department of Employee Trust Funds

Robert J. Conlin SECRETARY

Correspondence Memorandum

Date: January 10, 2020

To: Group Insurance Board

From: Liz Doss-Anderson, Ombudsperson Mary Richardson, Ombudsperson Dan Hayes, Supervising Attorney Office of Legal Services

Subject: 2019 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 members in ETF's benefit programs. Through our interactions with members we identify areas of concern and areas in need of clarification and make recommendations for program improvements to managers throughout ETF. These improvements benefit all parties. This includes ETF's members, employers, plans (health, pharmacy and dental), and third-party administrators.

As ombudspersons, we have daily communications with program members, plan contacts, and employers. We answer many questions about member benefits and through these interactions, we learn about the issues and problems our members experience with their health, pharmacy and dental plans. Due to the nature of our member contacts, we are in a unique position to discern whether and when to make recommendations for program improvements. This report provides an overview of Ombudsperson Services' quality assurance activities in 2019.

Benefit Administration

Ombudsperson Services staff respond to members' inquiries and complaints primarily regarding health insurance and prescription drug benefit administration. These member contacts involve responding to questions or concerns about how a benefit is structured, how a plan is following contract requirements, and clarification of a benefit so members have a better understanding of their health insurance and other benefits.

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

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In 2019, Ombudsperson Services:

- Participated in meetings with ETF's Office of Strategic Health Policy (OSHP) and Employer Services Section as well as United Health Care (ETF's new Medicare Advantage vendor) to provide ongoing feedback in the first year of implementation. Examples of issues discussed include Uniform Benefits wrap coverage, the Appeal process, and enrollment for members with End Stage Renal Disease.
- Attended the ETF Council on Health Program Improvement (CHPI) meetings to work with ETF staff and managers and health plan representatives to improve the Group Health Insurance Program. Areas of focus included the clarity of health plan contract language, uniformity of benefit decisions among plans, disease management pilot programs and potential benefit changes for the coming year. These bi-monthly meetings will continue in 2020.
- Reviewed health plan transition of care documents for members affected by Security Health Plan leaving the health insurance program in 2020.
- Provided feedback to OSHP on issues members were having regarding substantiation of claims with their TASC Flexible Spending Account. OSHP worked with employers and TASC to improve communication about the process for substantiation of claims, and Ombudsperson Services worked with members on a case-by-case basis to determine what action was needed.
- Provided urgent information to ETF's Pharmacy Benefits Manager after we learned that a health plan was moving a specific insulin delivery device from durable medical coverage to a pharmacy benefit. This change was critical for members because the device was not on the Navitus formulary.
- Clarified information for members, employers and ETF staff about a VSP website log on issue.
- Investigated how a retiree obtained information from ETF that Security Health Plan was leaving the program before it was made public and provided feedback to ETF staff on our findings.
- Worked with a health plan to re-educate its customer service staff about the hearing aid benefit, after we learned that they were giving members incorrect information.
- Met with Connect Your Care staff to introduce the new administrator for the flexible spending account, commuter benefits and health savings account programs to ETF culture and our members' customer service needs to ensure a smooth implementation in 2020.

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Publications, Correspondence and Website Information

Quality assurance efforts by Ombudsperson Services include helping with periodic evaluation and updating of ETF's benefit publications, correspondence and website. Examples include:

- Provided timely feedback to the Office of Communications on website content and/or improvements to improve member education on WRS benefits-related topics.
- Participated in the Office of Communications Customer Interaction Council, a workgroup that focuses on improving ETF forms and publications to make them more concise and user friendly.
- Reviewed health plan grievance decision letter templates to ensure that the plans were providing the correct ETF Administrative Review Process and Independent External Review language. This project began toward the end of 2019; we will continue to work with plans that had deficiencies and provide corrective action.

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

For example, Ombudsperson Services:

- Participated throughout the year in OSHP's Member Communication and Education Workgroup on development of consumer-friendly materials for IYC open enrollment, including printed guides, website information and videos.
- Worked with the Office of Communications to explain health plan changes for 2020 to members via brochures and ETF's website.

Technology-Related Efforts

In our role as ombudspersons we are involved in supporting and maintaining ETF's internal Benefit Complaints System, which documents member complaints and inquiries, and other IT systems by providing feedback to technical staff regarding performance issues or areas in need of quality improvement.

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For example, Ombudsperson Services staff:

- Served as subject matter experts in development of myETF business requirements and bridging of information from the Benefit Complaint System to myETF.
- Provided requirements for the Benefit Complaint System, which will be included in the Insurance Administration System RFP.
- 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.