From:	<u>Carl</u>
То:	ETF SMB Board Feedback
Cc:	Doss-Anderson, Liz - ETF
Subject:	Item for 13 may 2020 meeting
Date:	Friday, April 24, 2020 1:13:31 PM
Attachments:	Letter to WI group insurance board 2020.pdf

Dear Chaiman Day and Board members,

Please find attached a letter describing a provision I hope you will consider including as a state health insurance requirement for 2021 and beyond. Briefly, I hope you will require coverage for routine preventive screening for important health problems that are ignored by the USPSTF A&B list.

I understand that the A&B list is determined statistically - i.e. is there strong statistical evidence that said screening is an effective preventive measure? However, in many cases, the lack of hard statistical evidence might simply mean that the requisite studies have not yet been done due to limited research funds. For example, we know that diabetes, heart disease, problems with liver and kidney function are important health issues. But most of the metabolic test panels that physicians use for early detection and prevention of these problems are not on the A&B list. Shouldn't medical knowledge trump statistical significance in some cases?

I look forward to your consideration of this important health insurance issue.

Sincerely, Carl Watras Date: 24 April 2020

To: Mr. Herschel Day, Chair, WI Group Insurance Board

From: Carl Watras, 7228 County Road P, Presque Isle, WI 54557

Re: Item for Board consideration on 13 May 2020

Dear Chairman Day and Board members,

I am a WI state employee, and Liz Doss-Anderson (ETF) suggested that I contact you about an item for consideration when setting the health insurance requirements for 2021.



Although my physician feels that early detection is an important preventive measure, and although prevention is a primary goal of Wisconsin's wellness program, these tests are not covered under Wisconsin's current health insurance requirements. Instead, they are applied to my deductible, co-pay and co-insurance.

Liz kindly provided the following clarification: "ETF does not specify which codes should or should not be covered by health plans as preventive; we must defer to health plan judgment....The panel that you listed (80048) consists of testing for calcium (total), carbon dioxide, chloride, creatinine, glucose, potassium, sodium, and urea nitrogen. Because the majority of that panel is not considered preventive by USPSTF, your plan may not consider it to be preventive and will apply deductible and coinsurance."

I checked the current USPSTF guidelines and was surprised to find that the A & B list ignores most common health problems. It does not even include routine screening for cholesterol or glucose, even though heart disease and diabetes are widespread health problems in America. Oddly, the A&B guideline for glucose screening is restricted to "adults between 40 and 70 who are overweight or obese." It is well-known that diabetes is all too common among young people and people of normal weight. Sadly, my dad died of complications related to undiagnosed type-2 diabetes. Screening for problems with liver and kidney function are totally ignored by the A&B list.

It is my hope that you will revise the insurance requirements so that important preventive screening, such as the 80048 and 80061 panels, are included for 2012.

Respectfully,

Carl J. Watras



STATE OF WISCONSIN Department of Employee Trust Funds

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May 14, 2020

MR CARL J WATRAS 7228 COUNTY RD P PRESQUE ISLE, WI 54557

Dear Mr. Watras,

Thank you for reaching out to the Department of Employee Trust Funds (ETF) regarding coverage of certain diagnostic services. We appreciate the time you took to share your concerns and request with us. Feedback from members, such as this, helps determine potential changes to future programs and coverages. In addition to sharing your request with the Group Insurance Board, we have provided some information below for your review.

ETF reviews the services covered by the Group Health Insurance Program (GHIP) each year. As Ms. Doss-Anderson stated in the response you referenced, we required our plans to follow the guidance provided by the United States Preventive Services Task Force (USPSTF) in determining what tests are considered diagnostic and which are considered preventive.

The USPSTF gives one of five letter grades to indicate how much scientific evidence there is that a service or test has a "net benefit," which USPSTF defines as "benefit minus harm of the preventive service as implemented in a general, primary care population." Following the guidance of the Patient Protection and Affordable Care Act (ACA), services that receive a grade of B or better meet the definition of preventive services and are covered without any cost to the member. Other services can be covered but are not preventive and therefore deductible and coinsurance apply.

The lab tests that you mention do not currently have a grade of A or B as assigned by the USPSTF for the general population. Since ETF does not employ clinical staff, we must rely on external experts to determine whether specific tests are clinically appropriate. We are also bound by Wis. Stats. §40.03(6)(c) and cannot change coverage in a way that increases costs to the GHIP without a concurrent reduction in costs to the plan elsewhere unless we are required to cover a service by law.

Again, thank you for reaching out to us. If you have any additional comments or concerns, please feel free to reach out for further assistance.

Mr. Carl Watras May 14, 2020 Page 2

Sincerely,

Dia

Brian Stamm, MBA Deputy Director, Office of Strategic Health Policy Department of Employee Trust Funds