

## Letter 8 with response

**From:** [Kuisis, Elisabeth E - DNR](#)  
**To:** [ETF SMB Board Feedback](#)  
**Subject:** Connect Your Care Feedback  
**Date:** Friday, January 22, 2021 8:38:19 AM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image007.png](#)

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Hello,

I am providing feedback regarding Connect Your Care. I have had the worst experiences with Connect Your Care ever since the state switched from TASC. If there is ever an opportunity to switch back to TASC, that would be a welcomed change. Especially because TASC is a Wisconsin company whereas CYC is definitely not.

My latest frustration stems from CYC's terrible communication. I now will have over \$300 deducted from my paycheck over the next three months only to have it reimbursed back to me in April because they did not notify me in a timely manner that A: I needed documentation and then B: that my submitted claim documentation was insufficient. My costs were all eligible and directly from the health care facility but I provided the wrong receipt. Their customer service is frustrating and they give out conflicting information. This is not a unique experience but it is this experience that has motivated me to provide this feedback.

Thank you for the opportunity.

**We are committed to service excellence.**

Visit our survey at <http://dnr.wi.gov/customersurvey> to evaluate how I did.

Elisabeth (Lis) Kuisis

Pronouns: She/Her

Grant Program Manager – Municipal Flood Control & WI Forest Landowner

Wisconsin Department of Natural Resources

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

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of Employee Trust Funds  
PO Box 7931  
Madison WI 53707-7931  
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Fax 608-267-4549  
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February 9, 2020

Dear Mrs. Kuisis,

Thank you for reaching out to the Department of Employee Trust Funds (ETF) and Group Insurance Board (Board) regarding your experiences with the unsubstantiated claims process with ETF's Third-Party Administrator, ConnectYourCare (CYC). We appreciate the feedback that we receive from members of the Group Health Insurance Program and use it when we consider future negotiations with vendors for future benefits. In using the Health Care Flexible Spending Account (FSA), IRS Regulations require that all expenses be substantiated with appropriate receipt or documentation if it is not auto-substantiated using the CYC payment card.

FSA claims that are not properly validated by the end of the plan year will follow ETF's Five Step FSA Recovery Policy consistent with the memorandum issued by the IRS Office of Chief Counsel on February 12, 2014 which set forth acceptable correction procedures for any improper payments using a payment card in an FSA. This procedure is in place to prevent any negative impacts on the member utilization of the payment card and to stop the claim from moving into a business debt collection with ETF after the runout period ends (March 31, 2021).

CYC provides three Substantiation Notifications to participants via mail or email:

- Ten (10) days after the claim requires substantiation (sent via email),
- Forty (40) days after the claim requires substantiation (sent mail and email), and
- Seventy (70) days after the claim requires substantiation as a final reminder that documentation is still lacking (sent via mail and email) .

After eighty-five (85) days, the CYC payment card deactivates until the participant provides substantiation. CYC also sent two additional notifications to participants in December 2020 that had unsubstantiated claims ([December 18](#) and [December 29](#)). If the claim is not resolved before the end of the plan year, the participant can expect possible payroll withholding during the plan correction process in 2021.

You used the CYC payment card to pay for an expense on December 15, 2020. CYC Claims Department processed the transaction and requested additional receipt to substantiate the claim expense. Since your claim transaction occurred in December, you received the communications late in the plan year and without enough time to substantiate your claim.

To substantiate your 2020 unsubstantiated claims, please send the documentation by mail or fax to CYC Claims Department. Documentation must include: Claim ID, Dollar

Amount and Participant Name. You can find the claim information when you log into your CYC portal or mobile account.

Submit Your Documentation to:

ConnectYourCare Document Submission  
P.O. Box 622337  
Orlando, FL 32862-2337; or  
Fax number: 1-443-681-4601

If you substantiate or repay these claim(s) during the runout period and you have had payroll withholdings, you will receive a refund from CYC in April 2021.

ETF is aware of the situation for members who submitted their claims in December and the difficulties this can cause. CYC and ETF will continue to provide member education and communications to help members understand this process throughout the 2021 plan year. ETF is dedicated to continuously improving the substantiation process to reduce obstacles for those who submit claims late in the year and are working on improvements to the program to mitigate these issues going forward.

Again, thank you for your feedback. If you have additional questions, please reach out to me at [Xiong2.Vang@etf.wi.gov](mailto:Xiong2.Vang@etf.wi.gov) or by phone at (608) 266-5875.

Sincerely,

Xiong Vang, HSA & ERA Accounts Program Manager  
Office of Strategic Health Policy  
Department of Employee Trust Funds

cc: Brian Stamm  
Group Insurance Board members