From: <u>Darren Martin</u>

To: <u>ETF SMB Board Feedback</u>

Subject: correspondence regarding exclusions from State of WI Group Health Insurance Plans

Date: Friday, October 22, 2021 5:05:14 PM

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Dear Group Insurance Board,

I am writing this correspondence in the hopes that GIB members along with ETF staff would consider including coverage of the WalkAide (https://acplus.com/walkaide) and BioNess 300 (https://www.bioness.com/Home.php) Functional Electrical Stimulation System (FES) devices as part of the group health insurance plans for State of Wisconsin, UW System and other public employees in the Certificate of Coverage and Schedule of Benefits through Group Health Insurance plans.

I have spoken with numerous medical staff ranging from physicians, to occupational/physical therapists along with other medical professionals with UW Hospital and Clinics and Meriter-Unity Point Health about the current exclusion and lack of coverage of these devices and am writing to advocate for the inclusion of coverage for the WalkAide and BioNess 300 FES devices through Group Health Insurance plans.

The inclusion would assist current and future group health insurance members impacted by a variety of conditions including past/ongoing traumatic brain injuries, neurological conditions/ailments, stroke patients, along with those impacted by muscle weakness/spasticity, foot drop and individuals suffering with gait.

Currently, standard approved procedures and treatments range from one time or ongoing PT/OT outpatient services, outpatient services including medical steroid treatments along with durable medical equipment such as canes, AFO leg or knee braces and at the extreme level, knee/hip replacements to gastric bypass for some.

There is academic medical literature showing the efficacy of Functional Electrical (FES) Stimulation System devices to support patients, but due to their price points (approx. \$4,000-6,000) it is common for AFO braces to be stated as the lower/lowest preferred alternative and efficacious alternative for most of these sufferers.

Also, the following items that are covered as part of group insurance plans are significantly more expensive but are still approved benefits at or above the price point of FES devices including for example:

- hip/knee replacements
- gastric bypass/lap band procedures
- gender reassignment services/procedures

• level 4/5 prescription medications

The current exclusion and lack of coverage of the WalkAide and BioNess 300 FES devices currently continues to have a negative impact on impacted members due to the lack of access to these currently tested and proven medical treatment options causing people to seek alternative funding options from non-profits organizations (if available) including using personal retirement funds and at worst, personal and/or pay day loans.

Thank you for your consideration.

Darren Martin dmmartin@uwalumni.com



STATE OF WISCONSIN Department of Employee Trust Funds

A. John Voelker SECRETARY Wisconsin Department of Employee Trust Funds PO Box 7931 Madison WI 53707-7931 1-877-533-5020 (toll free) Fax 608-267-4549 etf.wi.gov

MID:

November 2, 2021

DARREN MARTIN	
dmmartin@uwalumni.com	

Thank you for your inquiry regarding the State of Wisconsin Group Health Insurance Program. As the Health Program Manager for the Office of Strategic Health Policy, it's a pleasure to respond to your email. If you find that you still have questions or concerns after reading my reply, please don't hesitate to reach out to me. I've provided my contact details at the end of this email.

In your message, you inquired about adding coverage for the WalkAide and BioNess 300 Functional Electrical Stimulation System (FES) devices to the Certificates of Coverage and the Schedule of Benefits for health insurance plans. Any changes that are made to these plans must undergo a specific process.

The Department of Employee Trust Funds (ETF) reviews benefits coverage annually, and we will begin our review for 2023 changes in the coming months. During this time, we take in suggestions from members and health plans. Changes are reviewed and approved based on clinical evidence and impact to overall program cost. ETF is limited in adding benefits that increase program costs based on state statutes. ETF brings any changes to the Group Insurance Board for their approval in May of each year.

ETF will examine the possibility of covering FES devices in the 2023 health insurance plan year program agreement. We appreciate the feedback that we receive from members like you as we strive to provide members with the best possible options available. Again, if you have additional questions, please reach out to me at Korbey.White@etf.wi.gov or by phone at (608) 261-8925.

Thank you!

Sincerely,

Korbey White Health Program Manager, Office of Strategic Health Policy