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## Correspondence Memorandum

**Date:** July 22, 2022  
**To:** Group Insurance Board  
**From:** Liz Doss-Anderson, Ombudsperson  
Mary Richardson, Ombudsperson  
Office of the Secretary  
**Subject:** Ombudspersons Case Report

**This memo is for informational purposes only. No Board action is required.**

This report contains information about complaints and inquiries received by the Department of Employee Trust Funds (ETF) Ombudsperson Services (OS) staff. Case files are created to address complaints and inquiries reported by active members, retirees, their families, employers, and external advocacy organizations. Complaints and inquiries are primarily related to benefits under the authority of the Group Insurance Board (GIB) and the majority involve health plan-related complaints. However, any dissatisfaction or inquiry regarding any Wisconsin Retirement System (WRS) benefit can be addressed through Ombudsperson Services.

The most frequent cases from January 1, 2022, through June 30, 2022, came from retirees or their dependents, with 190 contacts; state active employees and their dependents with 158 contacts; and local active employees and retirees with 34 contacts.

From January 1 through June 30, 2022, OS received 395 complaints and inquiries from members or their representatives, an increase of two over the same period in 2021. Actions of health insurance plans generated most of the cases, with 186 complaints and inquiries—approximately 47% of the total. This is an 8% increase in health plan complaints compared to the same period in 2021.

The largest complaint category was Enrollment and Eligibility. One hundred twenty-five cases involved ETF administration of enrollment and eligibility issues related to the Group Health Insurance Program (GHIP), in comparison with 66 cases during the first six months of 2021—an increase of 89% in cases for this category. Cases involving Navitus, the pharmacy benefit manager (PBM), accounted for 50 cases in the first half of 2022, a decrease of 16 cases in comparison with the 2021. These cases typically involve Medicare Part D prescription enrollment issues, requests for non-formulary

Reviewed and approved by Pamela Henning, Assistant Deputy  
Secretary  
Electronically Signed 07/27/2022

*Pamela L Henning*

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drugs, or prior authorizations. Another frequent issue for our members is a lack of understanding on how the pharmacy benefit works when they move from a commercial plan (non-Medicare) to the Medicare RX Part D plan. We continue to work with our PBM, ETF's Office of Strategic Health Policy (OSHP) and Office of Communications to add cautionary notices to members transitioning to Medicare informing them to check with Navitus about how their coverage may change and steps they can take to avoid unnecessary frustrations and costs. With new strategies in place, decreased contacts on this matter demonstrate that efforts have made an improvement in the members understanding of their benefits.

Another improvement in the first six months of 2022 is the reduced number of new cases involving Employee Reimbursement Accounts. OS staff opened 19 cases from January 2022 through June 2022 compared to the same time period in 2021, when 55 cases were opened. Improved communication strategies to both members and employers regarding the Unsubstantiated Debt Process and assistance moving through the process have clearly contributed to the decrease in cases opened during this six-month period.

A significant portion of these cases involve educating members who have experienced a plan denial of a service or procedure and eligibility issues. OS staff also explain how plans use medical management criteria within Uniform Benefit guidelines and how to request reviews. This typically includes substantial time counseling members on how a plan grievance process works, what to expect as they go through the process, and their rights, depending upon the grievance outcomes. OS staff educate members on how to advocate for themselves or family members, how to ask their providers for help in demonstrating medical need, and their rights for independent reviews or further departmental review. Providing support to members in crafting the strongest justification for an argument in the appeals process is an important service provided by OS staff. OS staff also provide explanations of the outcomes and options available to members participating in the appeals process, including how a negative outcome has been justified.

Most of the cases reviewed by OS from January 1 through June 30 were related to the following complaint type categories:

- Enrollment and Eligibility (125)
- General Program Provision of Design (102)
- Billing and Claims Processing Errors (35)
- Non-Covered Benefits (34)

Working with our partners including health plans, employers, other Department staff and drawing in expertise from other state agency staff, when needed, OS staff collaborate to attempt to resolve member issues before they reach the appeal process. If OS staff are unable to resolve an issue on behalf of a member, members are advised of their additional avenues of appeal or resources.

## **Looking Ahead**

As OS staff move into the 2023 It's Your Choice Open Enrollment (IYC), we anticipate escalated calls related to the departure of WEA Trust and changes to existing plans' networks. OS staff will be working with various areas of the Department to help ensure that members who will need to transition to new plans have the resources available to them to make an educated decision. As members of the Member Communication and Education workgroup, OS will be able to provide feedback on how to transition from one plan to another including information on the ETF web site, the IYC Decision Guides and planned webinars during IYC.

In 2023 OS staff will take steps to increase the visibility of the OS program. These include adding additional easy-to-find links on the ETF web site for OS information, links to resources related to each plan's grievance process, and the ETF Administrative Review process. OS will also provide presentations for both the state and local ETF Update meetings for employers and revise the OS brochure and fact sheet.

Staff will be available at the GIB meeting if you have any questions.