



**STATE OF WISCONSIN**  
**Department of Employee Trust Funds**  
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 SECRETARY

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**Correspondence Memorandum**

**Date:** July 26, 2022

**To:** Group Insurance Board

**From:** Korbey White, Health Program Manager  
 Office of Strategic Health Policy

**Subject:** New Plan Qualification for 2023 Plan Year

**The Department of Employee Trust Funds (ETF) recommends the Group Insurance Board (Board) accept the application from Security Health Plan (Security) to provide health insurance services within the Group Health Insurance Program (GHIP), contingent upon acceptance of the premium rates.**

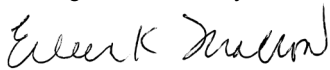
**Background**

On June 9 Security notified ETF of its interest in joining the GHIP as a new health plan for 2023. ETF provided Security with guidelines for the process and requirements for joining the program. ETF received Security’s completed application to join the GHIP. Initial review of the application was conducted by ETF. This completed the application collection process and allowed ETF to proceed with a final review.

**Operating Experience**

The Health Program Agreement requires plans to have a minimum of one year of operating experience to participate in the program. The purpose of this requirement is to provide assurance of financial and operating stability. Security has offered coverage in the state of Wisconsin for 51 years, first doing business as Greater Marshfield Community Health Plan. Security opened for enrollment on March 1, 1971, as a joint venture between the Marshfield Clinic, Blue Cross Blue Shield and Saint Joseph’s Hospital. It was the first health maintenance organization (HMO) in Wisconsin and the first rural HMO in the nation. In 1986 Greater Marshfield Community Health Plan was dissolved, Security Health Plan of Wisconsin, Inc. was established, and the partnership with Blue Cross and St. Joseph’s Hospital ended. Security Health Plan of Wisconsin previously participated in the Group Health Insurance Program in 1992-1995, and again from 2007-2019. ETF considers Security to have met the one-year operating requirement.

Reviewed and approved by Eileen K Mallow, Director, Office of Strategic Health Policy  
 Electronically Signed 08/02/2022



Board	Mtg Date	Item #
GIB	08.17.22	6B

### **Statutory Authority to Contract**

Security meets the requirements of [Wis. Stat. § 40.03\(6\)\(a\)](#) and is licensed by the Office of the Commissioner of Insurance (OCI) to provide insurance in the State of Wisconsin.

### **Attestations for Contract Requirements**

Security has attested to the ability and willingness to comply with all requirements presented in the Health Program Agreement, Uniform Benefits, Department Terms and Conditions, and all data and data security requirements.

### **Provider Network**

Security anticipates offering its health maintenance organization (HMO) in Central Wisconsin in the following counties: Barron, Chippewa, Clark, Eau Claire, Lincoln, Marathon, Oneida, Portage, Price, Rusk, Taylor, Trempealeau, Vilas, and Wood.

ETF believes the addition of Security will provide additional competition and increase access to health care services for members. Several counties where Security intends to offer coverage overlap with counties for which GHIP has historically had a difficult time gaining qualified, Tier 1 plan offerings—therefore requiring the State Maintenance Plan (SMP) for local employers. The addition of Security may help alleviate this concern.

### **Claims Processing and Customer Service**

Security presented recent data regarding its customer service experience and claims processing experience. Security has received six service quality awards, including its sixth consecutive World-Class customer experience certification, for 2021 from Service Quality Management (SQM), a North American research firm that specializes in customer service improvement.

Security is already meeting and/or exceeding all customer service requirements, including call answer timeliness, call abandonment rate, and open call resolution turn-around time. Additionally, Security's customer service team's hours of operation exceed the requirements set in the Health Program Agreement. Security is also already meeting and/or exceeding all claims processing requirements including processing accuracy, processing time, and electronic written inquire response.

### **Prior Authorizations and Medical Management**

Security can authorize services as required by Uniform Benefits and can accommodate the Board's current Uniform Benefit plan design and enhance the value based on its regional network and its ability to administer benefits. Security's systems and processes are governed by annually reviewing organizational policies and operational performance. Quality metrics are monitored regularly through internal reporting as well as National Committee for Quality Assurance (NCQA) certified Consumer Assessment of Healthcare Providers and Systems (CAHPS) as well as Healthcare Effectiveness Data and Information Set (HEDIS) measures.

### **Data and Data Security**

Security attests that they have the capacity and intention to participate in data transfers as described by the Health Program Agreement, the ability to absorb any direct or indirect initial and on-going costs with these data transfers, and the requirements to transfer that data. Security also has prior experience submitting data to the Merative (formerly IBM Watson Health) data warehouse. Security has submitted a SOC 2 Type 2 Audit that is being reviewed by ETF.

### **Recommendation**

ETF has determined that Security appears to be ready, capable, and willing to provide health insurance services in accordance with the requirements set by the Health Program Agreement, Uniform Benefits, and the Department Terms and Conditions. ETF recommend the Board accept the application from Security, so the organization is approved to provide health plan services for plan year 2023 contingent upon acceptance of the premium rates.

Staff will be available at the Board meeting to answer any questions.