



This document acknowledges the below audits have been completed by Optum Financial (Optum) according to the contract agreement and plan design for the administration of the State of Wisconsin employee reimbursement accounts and commuter benefits.

A full audit has been completed of the 2022 Plan Finalization Report to ensure the report accurately reflects the status of the accounts on the Optum system as of 5/31/2023 prior to providing to the Wisconsin Department of Employee Trust Funds. The following key areas were audited by Optum staff:

	Description of Audit
<i>General</i>	Column headings are consistent across all versions of the report Check for SSN = EE ID Check for missing SSN Check for missing EE ID Check for duplicate SSN for different employee Check for duplicate EE ID for different employee Confirm Employment Status Date <= 12/31/2022 Compare contributions to Comprehensive Payroll Deductions and Contributions Report Compare employment status, contributions, and paid claims to Participant Account Balance Report
<i>FSA</i>	Confirm Carryover Into 2022 <= \$550 for all accounts Confirm Carryover Into 2023 <= \$570 for 'Active', 'On Leave' Employment Status Confirm Annual Election <= \$2750 for all accounts Confirm Total 2022 Contributions <= \$2750 for all accounts Confirm Carryover Into 2023 = \$0 for 'Terminated', 'Retired' Employment Status Confirm Carryover Into 2023 = \$0 for account cancellations < 1/1/23 Confirm Annual Election + Carryover Into 2022 - Carryover Into 2023 - Total Paid Claims + Forfeiture = \$0 for all accounts Research accounts where Annual Election <> Total 2022 Contributions
<i>DCAP</i>	Confirm Carryover Into 2022 = \$0 for all accounts Confirm Carryover Into 2023 = \$0 for all accounts Confirm Annual Election <= \$5000 for all accounts Confirm Total 2022 Contributions <= \$5000 for all accounts Confirm Total Paid Claims <= \$5000 for all accounts Confirm Total 2022 Contributions - Total Paid Claims + Forfeiture = \$0 for all accounts Research accounts where Annual Election <> Total 2022 Contributions for 'Active', 'On Leave' Employment Status, and account cancellations = 1/1/23
<i>Parking/ Transit</i>	Confirm Total 2022 Contributions <= \$3,360 (\$280*12 mos.) for all accounts Confirm Total 2022 Contributions + Carryover Into 2022 - Carryover Into 2023 - Total Paid Claims + Forfeiture = \$0 Confirm Carryover Into 2023 = \$0 for 'Terminated', 'Retired' Employment Status Confirm Carryover Into 2023 = \$0 for account cancellations < 1/1/23 Confirm Forfeiture = \$0 for 'Active', 'On Leave' Employment Status Confirm Forfeiture = \$0 for account cancellations = 1/1/23



Optum has reviewed, via three separate audits, related to carryovers, forfeitures, paid claims, and financial components of the plan finalization report to be accurate for the Health Care FSA, Limited Purpose FSA, Dependent Day Care Account, Parking, and Transit Account.

Signature	Title	Date
<i>Todd Forwood</i>	Relationship Executive	05/31/2023
<i>Allesia Messer</i>	Client Service Manager	05/31/2023
<i>Earl McKnight</i>	Client Service Manager	05/31/2023



This document acknowledges the below audits have been completed by Optum Financial (Optum) according to the contract agreement and plan design for the administration of the State of Wisconsin employee reimbursement accounts and commuter benefits.

A full audit has been completed of the 2022 Business Debt Report to ensure the report accurately reflects the status of the accounts on the Optum system as of 3/31/2023, prior to providing to the Wisconsin Department of Employee Trust Funds. The following key areas were audited by Optum staff:

Description of Audit	
<i>General</i>	Identify the following claims from the Unsubstantiated Claims process: <ul style="list-style-type: none"> • Claims with no payroll withholding applied • Claims with payroll withholding partially applied, (the balance of the claim will be assigned as Business Debt)
	Identify claims submitted after 12/31/2022 through the end of runout 3/31/23, still in need of documentation, substantiation and/or repayment
	Request a final determination of any claim in an 'Under Review' status
	Update the status of all Business Debt claims to: 'To be Added to Wages'
	Add the following note to all Business Debt claims: <ul style="list-style-type: none"> • This claim was not substantiated in accordance with plan guidelines. Repayment cannot be made directly to Optum and providing documentation will not resolve the obligation to pay the invoice from ETF. The decision may be appealed by completing and returning the Business Debt Appeals Form found on the home page of myoptumfinancial.com/etf.

Optum has reviewed, via three separate audits, 2022 plan year claims missing documentation; determined to be ineligible; or otherwise have not been properly substantiated. The status of the identified claims has been updated to 'To be Added to wages' in order to prevent member repayments directly to Optum. The list of claims has been provided to ETF for the production and distribution of invoices to impacted members for repayment of the claim(s) directly to the State.

Signature	Title	Date
<i>Todd Forwood</i>	Relationship Executive	05/15/2023
<i>Allesia Messer</i>	Client Service Manager	05/16/2023
<i>Ann Burke</i>	Client Service Manager	05/16/2023



UnitedHealth Group

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21 July 2023

State of Wisconsin
Department of Employee Trust Funds
P.O. Box 7931
Madison, WI 53707-7931

In response to actions #2 and #5 from OIA Audit finding #2 (ERA and CB Claims Substantiation), Jaya Pérez, (Director, Quality Centre of Excellence, Optum Bank), provided the following details:

Action #2. Claim substantiation examples from the OIA Audit were passed along to both the leadership of the Claims Team and the Quality Centre of Excellence. While the specific situations identified in the audit were not added to training materials, similar scenarios, and examples of insufficient documentation and/or incorrect claims approval are part of the processor training curriculum, (please see the curriculum outline below).

- I. Introduction to the Claims Adjudication Process
- II. IRS Regulatory Requirements
- III. The HDHP Enrollment Process
- IV. The Claim Life-Cycle – Step-by-Step
- V. High-dollar Claims
- VI. Complex Claims
- VII. Coordination of Benefits
- VIII. Eligibility
- IX. Denials
- X. Claims Documentation/Substantiation

Actual training materials are considered Company Proprietary Information and, therefore, not able to be shared externally. However, the State can be assured proper claim approval and the guidelines and rules governing suitable documentation are an integral part of the extensive processor training.

Action #5. The Optum Financial Quality Department uses a risk-based, stratified claim auditing methodology to ensure complex and 'high-risk' claims are included in scope for the randomized claim sampling. The audit process focuses on quality assurance and specific claim compliance with all U.S. Federal, State, and county financial, healthcare, and banking regulatory requirements. In the past, ConnectYourCare operated as a TPA for the administration of HBA/CDH accounts and did not have the oversight framework that is now in place. As a wholly owned subsidiary of United Health Group, Optum Financial is required to abide by the same strict claims adjudication and review process as any medical provider. The Quality Center of Excellence is tasked with ensuring that process is being followed and that claims are being evaluated, approved, and processed correctly and in compliance. To further ensure all claims processing is held to, and achieves a high standard of correctness and compliance, members of the Optum Financial Quality Program are ISO9000 Certified:

- Claims Operations Unit is ISO9000 Certified
- Claim Quality auditors are ISO9000 certified
- Claim Quality Audit Manager is ISO9000 certified and a certified Green Belt/Lean Six Sigma

Sincerely,

Todd Forwood
Relationship Executive, Optum Financial