

From: [REDACTED]
To: [ETF SMB Board Feedback](#)
Subject: Open Enrollment and United HealthCare and Aspirus Dispute
Date: Wednesday, October 11, 2023 3:22:42 PM

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A number of retired faculty and staff in the Stevens Point area are struggling with making insurance decisions due to the dispute between United Health Care and Aspirus. Aspirus is our main medical provider and the only Medicare Advantage program being offered by the state is with United Health. We have only nine more days to make a decision and while we are told that there will be a settlement there is no assurance of this or that it will occur prior to October 20th. I have also been given conflicting information about who decides if Aspirus will be willing to bill United Health if we use them as an out-of-network provider. ETF staff say it is the individual clinic while the billing person at my clinic said it would be a corporate decision. Given this situation, has the board considered extending the enrollment period, at least for those of us affected by this problem? While other insurance is available, the monthly premiums are at least twice those of the United Health Care Advantage program. I would appreciate any help or information that could help us resolve this problem.

Nancy Bayne
[REDACTED]



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

October 30, 2023

Nancy Bayne
[REDACTED]

Dear Nancy Bayne:

Thank you for your October 11, 2023, email to the Group Insurance Board (Board) and the Department of Employee Trust Funds (ETF) regarding your concerns about the provider negotiations between UnitedHealthcare's (UHC's) Medicare Advantage plan and Aspirus Health Care providers (Aspirus).

Health plans that have been accepted by the Board into the State of Wisconsin Group Health Insurance Program (GHIP) are given complete authority in negotiating provider contracts. Plans base their renewal rates upon financial assessments of their provider contracts, administrative costs, the utilization of health care services, and the demographics of their enrollees. The Board's actuary reviews the bids and other data supplied by the plans. We make every attempt to have plans only submit rates that are justified by their claims experience. We believe that our system has resulted in lower premium increases compared to other employer groups, especially given that the GHIP continues to offer consistently high benefits.

We understand your concern about the possibility that Aspirus may not sign a provider contract with UHC for 2024; and, as an out-of-network provider, they may refuse to bill UHC. Such actions on their part would make claim payments cumbersome for members.

ETF offers a late open enrollment process that may be of interest to you. If you feel that you were not offered an adequate open enrollment option, you may write an appeal to ETF and also submit an application to choose another health plan. Your letter of appeal must include the facts or circumstances regarding the reason(s) for your late open enrollment application, why it is being filed late, and what outcome you are seeking. While approval of such appeals is not guaranteed, if they are received prior to January, in this situation, they seem likely to be approved.

I hope you have found this response helpful. If you have additional questions or concerns, please feel free to reach out using the contact information provided below. A

Nancy Bayne
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copy of your email and ETF's response will be included in the materials for the November 15, 2023, Board meeting.

Sincerely,

Arlene Larson, Manager of Federal Program and Policy
Office of Strategic Health Policy
Department of Employee Trust Funds
arlene.larson@etf.wi.gov
608-264-6624