State of Wisconsin Group Health Benefits Annual Report 2023



MAY 2, 2024

Wisconsin Department of Employee Trust Funds



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Introduction

Following a hectic year in 2022 with the departure of WEA Trust, the third largest health insurance plan, from the Group Health Insurance Program (GHIP), 2023 presented fewer disruptions. This allowed for the focus of efforts to shift to things such as improving customer experience and expanding educational resources for GHIP members.

The Department of Employee Trust Funds (ETF) and their vendors found ways to "help members feel empowered and trust us to meet their needs through personalized convenient and helpful interactions," in line with the ETF Customer Experience (CX) vision. There are multiple examples to highlight, from the way the Well Wisconsin Program continued to expand its reach, the support ETF provided to members through updated open enrollment activities, and the creation of online educational materials for members like the Mental Health Resources webpage.

2023 Program Highlights

Well Wisconsin Expanding Its Reach

Over 50,000 members earned their \$150 Well Wisconsin incentive in 2023, an increase from prior years following intensified engagement efforts by the Well Wisconsin Administrator, WebMD. The Well Wisconsin for Members webpage was updated to include new videos for members to learn more about the multiple benefits and service offerings available through Well Wisconsin. The webpage had over 47,000 visits in 2023. The health coaching video highlights testimonials from members directly, giving a personal look into how Well Wisconsin resources helped members accomplish their well-being goals. Members called the programs "insightful," and "worth it," and said it gives them "accountability," "support to believe in yourself," and the feeling that they "don't have to do it alone." A second video was also released in 2023, and updated for 2024, which includes an overview of the key Well Wisconsin Program details including eligibility, earning the incentive, benefits of participating, and resources offered.

Updated Virtual Vendor Forums

ETF updated the format of its successful Meet the Vendor series of online events to host virtual vendor forums in 2023. These forums allowed employers and members to connect with multiple benefits vendors during a single online event, giving them the opportunity to ask questions about the GHIP while receiving meaningful information. They also provided the same personal interaction with vendors that employers and members have previously experienced at benefit fairs or informational events but from the comfort and convenience of a member's own home or office.

New Mental Health Web Resources

ETF added a webpage called "Mental Health Resources." This webpage was created to raise awareness for GHIP members about how their health benefits provide coverage for medically necessary outpatient, inpatient, and transitional care services, medication treatment, and access to mental health coaching and resources through Well Wisconsin.

Growth in Pre-Tax Program Participation

ETF continues to see growth and savings in the pre-tax programs overall. The Health Savings Account (HSA) program continues to have the largest growth in participation, contributions, and savings. Participation in the HSAs continues to increase, with an 8% growth in 2023 with 14,681 members. The overall total contributions for the pre-tax programs equate to \$80.8 million, with a total of \$30 million in tax savings for members and employers.

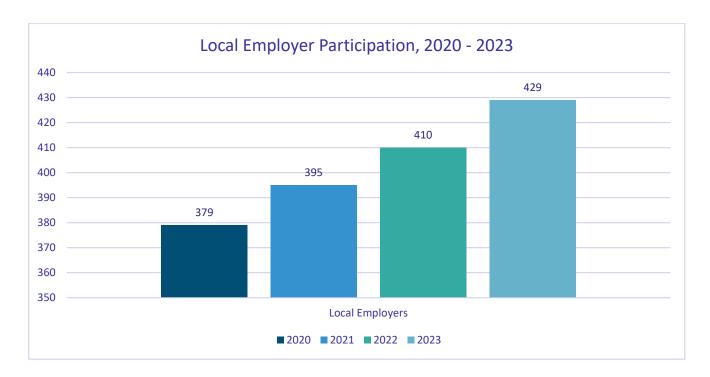
Medical Benefits

Health Insurance for Active Employees & Early Retirees

The GHIP provides high-quality health benefits to employees and their dependents. Many employees can opt to continue benefits when they retire, even if they are not yet Medicare-eligible. Benefits are provided by 10 insured health plans. All plans in the GHIP must offer the same service coverage under the Board's Uniform Benefits.

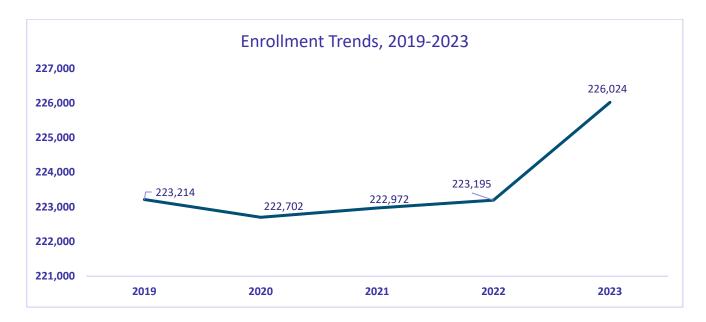
Employers

ETF is the administrator for GHIP benefits on behalf of state agencies, the Universities of Wisconsin (UW) System, UW Hospitals and Clinics (UWHC), and participating local employers. In total, ETF served nine different payroll and benefits administrators at the state and university level, as well as 429 local employers in 2023. Enrollment in the local government employer portion of the program increased 4.6% from 2022 to 2023.



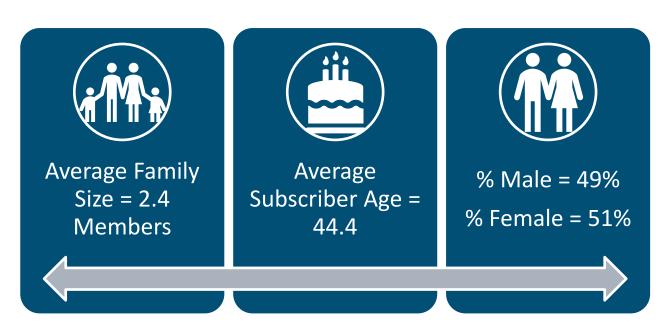
Enrollment

Participation in the GHIP increased slightly in 2023, up 1.3% from 2022. In 2023, 226,024 active employees, non-Medicare retirees, and their dependents were enrolled in the benefit. Service utilization slightly decreased, from 85.09% in 2022 to 84.16% in 2023.



Demographics

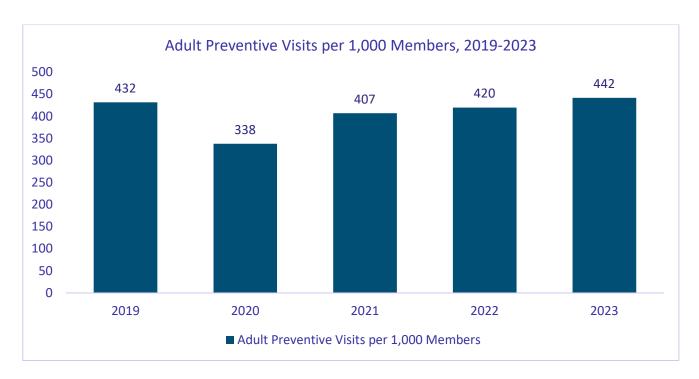
The demographics of the GHIP stayed the same in 2023, except for the average subscriber age, which slightly decreased from 44.7 in 2022 to 44.4 in 2023.



Utilization and Cost Trends

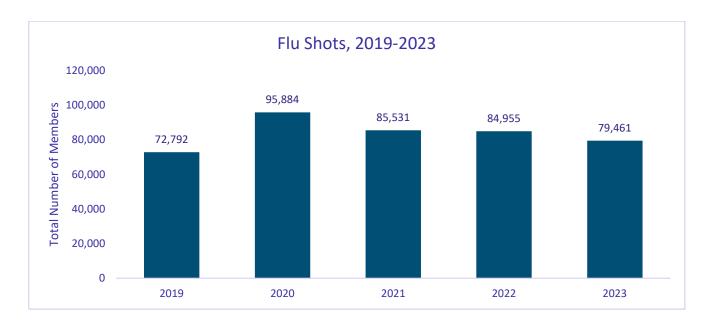
Using ETF's data warehouse, DAISI, ETF can track trends in how members use their benefits and identify opportunities.

People who receive regular preventive care have better long-term health outcomes on average. Preventive care use increased 5.3% from 2022 to 2023, with four out of every 10 GHIP members receiving a primary care appointment.

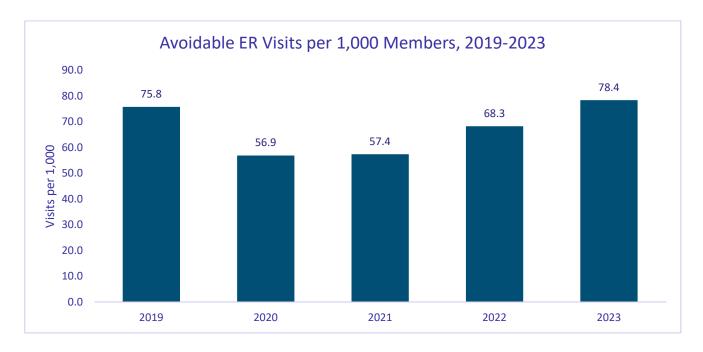


ETF will continue to work with employers, health plans, and the wellness vendor to promote preventive care use.

Flu vaccination was another area identified as having potential for improvement in prior years, and in 2020 members increased their influenza vaccination rates. Since 2020, influenza vaccination rates have declined, though they remain above pre-pandemic rates by about 6,670 shots (not including vaccines provided at employer sponsored flu clinics). The continued decline of flu vaccination rates may be the result of vaccination fatigue being seen nationwide. ETF and GHIP vendors will continue to focus on education and communication campaigns to encourage members to get their annual flu vaccine. Additionally, the Well Wisconsin team is planning to host regional flu vaccines clinics around the state this fall.

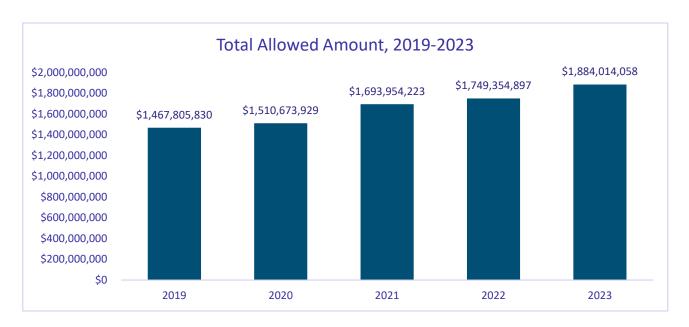


ETF continues to monitor emergency room (ER) utilization as a part of the Board's initiative to reduce avoidable ER visits and help members find more appropriate and affordable sites of care.



The notable reduction in avoidable ER visits between 2019 and 2020 is likely due in part to the pandemic and individuals reducing in-person health care visits. Since that time, visits have steadily risen and are now above pre-pandemic rates. ETF will revisit the work done by the ER workgroup as part of the Board's initiative to identify whether there are opportunities to improve ER use rates.

Allowed amounts continued to increase in 2023, approximately 7.7% over 2022. The 7.7% trend reflects healthcare cost inflation and other cost drivers. Outpatient and prescription drug prices were the largest positive contributors to the overall cost trend.



Retirees with Medicare

Retirees who continue their health insurance coverage into retirement are required to sign up for Medicare Parts A and B when they become eligible. Many Medicare-eligible retirees experience an increase in their benefits and a decrease of their premium, since Medicare picks up most of the cost of medical services, and the GHIP picks up Medicare deductibles and other out-of-pocket costs.

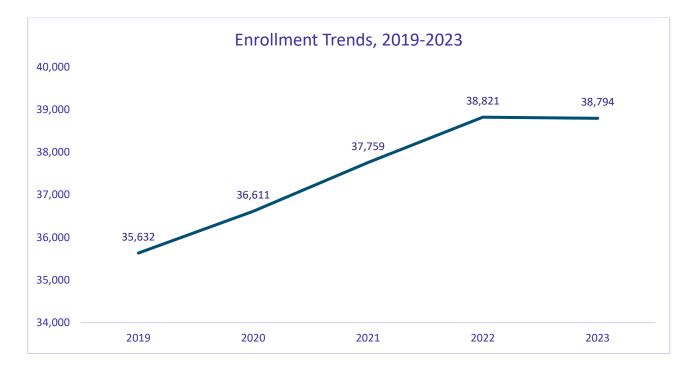
Retirees with Medicare can choose to continue their existing health plan or select from two additional benefit designs.

- Medicare Plus is a Medicare Supplement plan that pays the additional out-of-pocket costs of any medical services after Medicare covers the base cost. It also offers worldwide coverage for retirees who live overseas.
- The Board also offers a Medicare Advantage plan to retirees. This plan offers Uniform Benefits, and some additional benefits permitted by Medicare for Medicare Advantage plans. The Medicare Advantage plan offers coverage nationwide and in the U.S. territories.

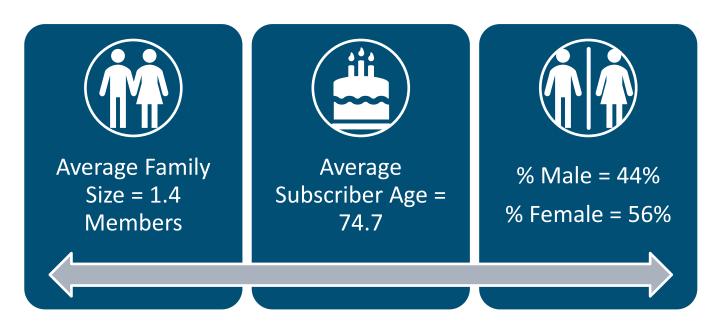
Enrollment and Demographics

The Medicare-age retiree population in the GHIP is smaller than the active and early retiree but still a substantial number. In 2023, member enrollment remained relatively flat compared to the prior year.

Medicare members maintained their benefits use in 2023; 96.25% accessed benefits in 2023, up slightly from 2022.



Demographics for Medicare retirees stayed the same in 2023. Fewer Medicare retirees have dependents on their plans other than a spouse, which contributes to the smaller average family size compared to the non-Medicare GHIP group.



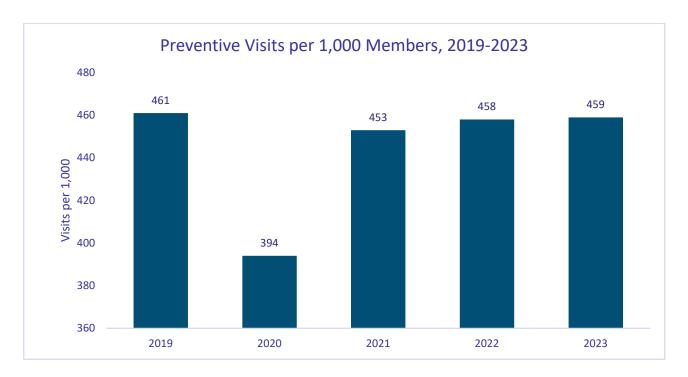
Benefits

Retirees in the GHIP who have Medicare can keep the same health plan they had when they were state employees and reduce their medical out-of-pocket costs. All health plans who offer benefits for GHIP members offer a coordinated Medicare plan where they pay all Uniform Benefit services that Medicare does not pay, as well as Medicare deductibles and out-of-pocket costs.

Utilization and Cost Trends

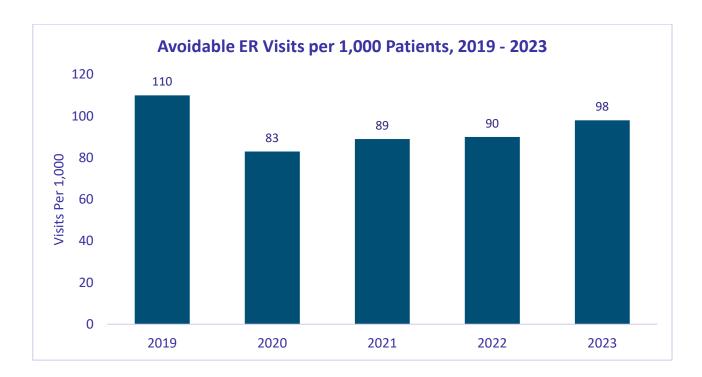
The Medicare-coordinated, Medicare Plus, and Medicare Advantage plans benefit from being able to share claim costs with Medicare to lower premiums and out-of-pocket expenses for retirees.

ETF tracks similar utilization patterns in preventive care, immunization, telehealth, and ER use for the Medicare population. Below are charts showing use per 1,000 members for 2019 to 2023.



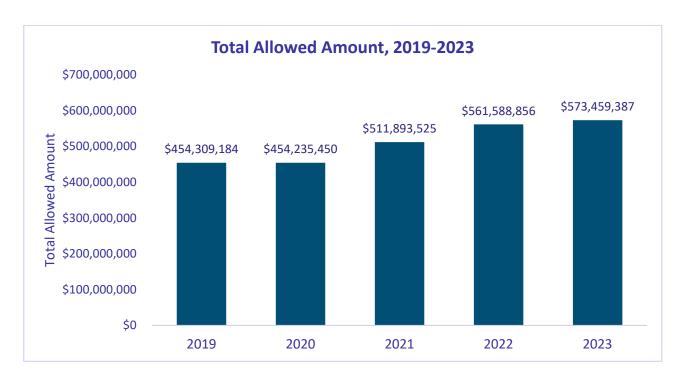
Preventive visits in 2023 remained slightly below pre-pandemic levels but rebounded and are nearing pre-pandemic levels. Preventive visit use only slightly increased by 0.12% in 2023.

Similar to the non-Medicare group, avoidable ER visits continue to increase. There was an 8.5% increase in avoidable ER visits from 2022 to 2023, but rates still remain below pre-COVID rates.



While use rates remain below pre-pandemic levels, the increase in use among Medicare members is concerning. This change and opportunities to improve will be examined when ETF reviews its ER initiative.

The total allowed amount spent for Medicare retirees increased 2.11% in 2023.



Changes in 2023

2023 was the first full year following the departure of WEA Trust, which involved over 40,000 members moving to new health plans and two vendors taking over the standalone, nationwide product offerings (Access Plan and Medicare Plus). Despite the significant disruption from WEA's departure, members were all able to find new plans, and health plan vendors stepped in to expand their offerings and provide additional county coverage.

Pharmacy Benefits

The Board's Pharmacy Benefit program helps members save on a variety of generic and specialty prescription drugs. Prescriptions are grouped into four different member cost tiers. The benefit includes coverage for members with and without Medicare.

Pharmacy benefits are administered by Navitus Health Solutions (Navitus), a separate vendor from the medical benefits, but are closely coordinated to ensure members receive the best care at the best price. The Pharmacy Benefit program not only provides coverage to members at a retail pharmacy, but also provides access to a mail order pharmacy service that sends medications directly to members at home.

Participation

All GHIP members are automatically enrolled in the pharmacy benefit. Participants who do not yet have Medicare (active employees, early retirees, and their dependents) are enrolled in the Commercial plan. Retirees with Medicare are enrolled in an Employer Group Waiver Plan (EGWP) which is a member's Medicare Part D coverage. The drug formularies of the Commercial plan and the EGWP are similar.

While there was a 1.7% increase in the total number of eligible commercial members in 2023 from 2022, there was a 2.8% decrease in commercial members that used the pharmacy benefit over that same time. The EGWP benefit saw a 1.6% increase in members from 2022 to 2023 and a 3.3% increase in total scripts filled.

Plan Type:	Commercial	Medicare	Total
Number of Eligible Participants*:	205,400	36,087	241,487
Participants Who Used the Pharmacy Benefit:	165,142	36,448	201,590
Total Prescriptions Filled:	1,997,067	965,864	2,962,931
Total Cost (plan & participant):	\$263,353,035	\$152,640,861	\$415,993,896

^{*}The number of eligible participants is an average over the year, while the number of participants using the benefit is a total.

The following are the top five non-specialty drug categories for 2023 by script count for the commercial and EGWP benefit.

Commercial

Rank	Drug Category	Script Count
1	Antidepressants	253,768
2	Antihypertensives	100,041
3	ADHD/Anti-Narcolepsy	97,159
4	Antidiabetics	99,235
5	Antihyperlipidemics	94,842

EGWP

Rank	Drug Category	Script Count
1	Antihyperlipidemics	95,992
2	Antihypertensives	69,711
3	Antidepressants	59,254
4	Antidiabetics	54,401
5	Beta Blockers	46,451

Where Participants Get Prescriptions

Participants have several options for filling their prescriptions. The most common is filling a 30-day supply at a retail pharmacy, but they can also fill maintenance medications for 90 days at a retail pharmacy or take advantage of Navitus' mail order prescription service, ServeYouRx.

Members who take specialty drugs receive their medication through specialty pharmacies. Commercial members must use either Lumicera Health Services or UW Specialty Pharmacy to receive those drugs. Both deliver directly to members' homes, and UW Specialty Pharmacy offers in-pharmacy pickup for members who prefer to go to a retail location.

Below is a breakdown of where participants filled their prescriptions in 2023:

	Mail-Order	Standard Retail	90-Day Retail	Specialty Pharmacy
Utilizing Members	5,559	191,992	112,680	2,736
Percentage of Total Utilizing Members*	2.75%	95.06%	55.79%	1.35%
Total Plan Cost of RX Filled	\$12,603,907	\$295,610,934	\$86,325,363	\$158,396,428
Percentage of Total Cost	2.28%	53.46%	15.61%	28.67%

^{*}The percentage of participants who filled a prescription is not a unique number with many members filling different prescriptions at different pharmacy types.

Cost Trends

The 2023 plan paid per member per month cost increased by 6.6% for the commercial program. This was mostly driven by price inflation. The total cost paid by the plan for medications provided through the pharmacy benefit increased by 8.4% for the commercial plan.

For members enrolled in Medicare, the 2023 plan paid per member per month cost increased by 13.3%. The total cost paid by the plan for medications provided through the pharmacy benefit increased by 15.1% from 2022 to 2023 for the EGWP plan.

The following are the top five non-specialty drug categories for 2023, ranked by how much the plan paid for the commercial and EGWP benefit:

Commercial

Rank	Drug Category	Plan Paid
1	Antidiabetics	\$21,528,893
2	ADHD/Anti-Narcolepsy	\$8,080,326
3	Antivirals	\$7,004,840
4	Vaccines	\$6,965,309
5	Anticoagulants	\$4,708,989

EGWP

Rank	Drug Category	Plan Paid
1	Antidiabetics	\$15,311,338
2	Anticoagulants	\$12,153,314
3	Vaccines	\$4,326,919
4	Antiasthmatic and Bronchodilator Agents	\$4,259,120
5	Antihyperlipidemics	\$2,519,084

Changes in 2023

2023 marked the start of the Board's clear bagging program. In the clear bagging program, members with Quartz Health Insurance who have certain specialty drugs administered in a medical setting at the UWHC have those drugs filled through UW Specialty Pharmacy and paid for through the pharmacy benefit. Prior to 2023 those drugs were paid for through a member's medical benefit.

Dental Benefits

The Uniform Dental Benefit (UDB) provides basic dental coverage to employees and retirees who enroll in the GHIP. UDB covers diagnostic services like x-rays, preventive cleanings and exams, and basic fillings. It also provides some coverage for children's orthodontic services. The UDB is administered by a single vendor, Delta Dental of Wisconsin (Delta), for all members enrolled in the plan.

Participants

Participants who have the plan offered to state and UW employees and retirees can choose whether to add the low-cost UDB to their health insurance premiums. Local government employees and retirees whose employer chooses to offer UDB can opt in as well. Below is the total enrollment for the Uniform Dental Plan in 2023:







Total Membership 205,460

Enrollment increased between 2022 and 2023. Both subscribers and total members enrolled increased.

Features

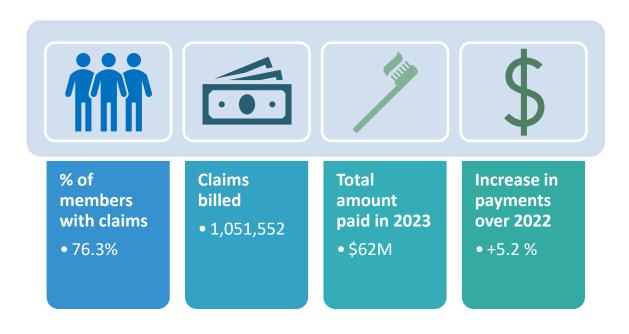
The UDB covers diagnostic, preventive, and basic services for all members. It also covers orthodontic services for children under 19 years of age. The coverage has no deductible or waiting period, and it has an annual benefit maximum of \$1,000 per person. Orthodontics coverage has an additional \$1,500 lifetime maximum benefit with 50% coverage.



For members with specific medical conditions that have oral health implications, the UDB coverage also includes Delta's Evidence-Based Integrated Care Plan (EBICP), which provides additional cleanings and/or fluoride treatments to these individuals. Enhanced benefits can play an important role in the management of some of these medical conditions, which include gum disease, diabetes, high risk cardiac conditions, and kidney disease, among others.

Visits & Services

Around 76.3% of participants had at least one claim for dental services in 2023, up from 75.3% in 2022:



Well Wisconsin

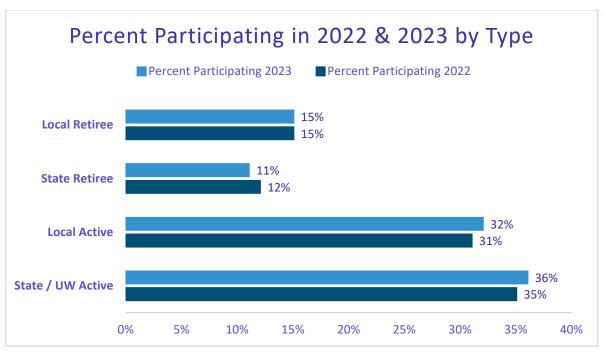
Well Wisconsin is designed to improve the health and well-being of employees, retirees, and their spouses through education and activities that support a healthy lifestyle. Participants can earn a \$150 incentive each year by completing a health check, a health assessment questionnaire, and a well-being activity.

The Well Wisconsin Program is administered by a single wellness vendor for all participants. 2023 was the third year WebMD administered the program, providing access to health coaching, chronic condition management, flu shot clinics, an online portal, and educational materials, as well as communications and customer service support.

All subscribers and spouses enrolled in the GHIP are eligible to participate in the Well Wisconsin Program. A total of 105,401 state and UW active employees and their spouses were eligible in 2023; 19,181 active local employees and spouses were eligible. Meanwhile, 42,206 state retirees and their spouses and 2,797 local retirees and their spouses were eligible in 2023. Following federal law, Well Wisconsin does not include dependent children as eligible for the incentive program.

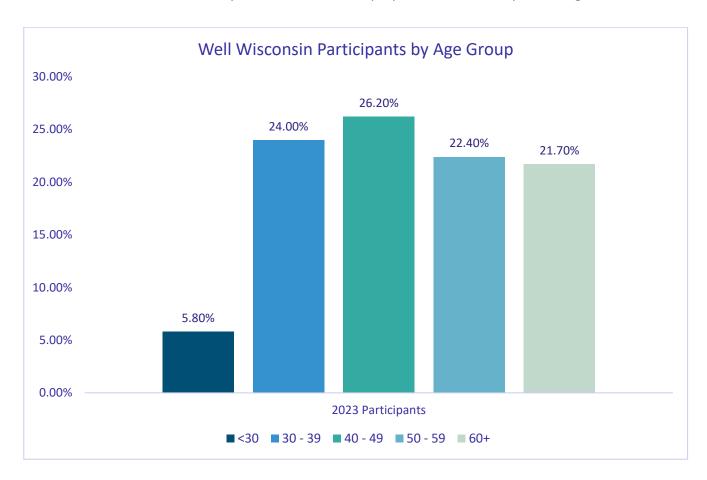
Incentive Participation

2023 marks the first year that more 50,000 participants earned their \$150 incentive. Approximately 30% of those eligible (50,645) completed the incentive activities. Participation varied by group.



Demographics

Well Wisconsin participation is spread somewhat evenly among age bands. The largest group of participants is 40 to 49 years old, closely followed by participants 30 to 39 years old. All age ranges, except those under 30, are similarly represented. This is consistent with the overall demographics of state workers, where a relatively small number of employees are under 30 years of age.



Participants in Well Wisconsin are slightly more female than the overall GHIP population; 59% of Well Wisconsin participants were female, 41% were male.

Program Satisfaction

The Well Wisconsin program continues to report high levels of satisfaction among those who participate in the program. The 2023 program goal was to reach and maintain a satisfaction rate of 90% in all measured categories.



Health Outcomes and Risks

Using the health assessment as the measurement tool, WebMD reported changes in aggregate health risks for participants who completed the assessment in 2022 and again in 2023. Out of 42,172 participants, there was a 5.2% improvement in health risks. There was a 7.0% improvement in health risks for the 4,042 members who also participated in health coaching. There was a 4.8% improvement in health risks for the 1,372 members who completed a condition management program.

Culture of Wellness

Employers are given an opportunity to create a culture of wellness in the workplace that can help to support employees to maintain and/or improve their health. ETF assists employers by providing technical support, training, and grant funding.

In 2023, WebMD completed 681 wellness champion meeting interactions/consultations and 77,027 participant engagements.

ETF and WebMD will continue to leverage existing channels to communicate with all employers throughout the year regarding wellness opportunities and will work to design wellness resources that are easy to implement at employer sites.

Supplemental Benefits

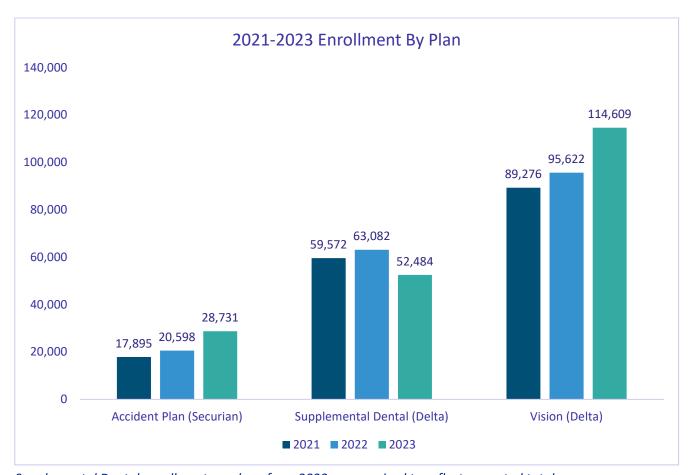
The supplemental benefit programs discussed in this section include those benefit programs whereby the premiums are paid for in full by the employees and retirees who elect to participate in them.

Participation

Supplemental plans in 2023 were offered by three vendors:

- Securian: Accident Plan
- Delta Dental of Wisconsin (Delta): Supplemental Dental & Vision
- Mutual of Omaha/HealthChoice: Long-Term Care (LTC)

The chart below shows the enrollment in each plan from 2021 to 2023 for subscribers and dependents. Enrollment in each benefit plan was relatively stable year over year.



Supplemental Dental enrollment numbers from 2022 were revised to reflect corrected totals.

Dental Plans

Supplemental dental plans continued to be popular among employees in 2023. In total, members paid \$23,163,080 in premiums in 2023 for all three plans. Utilization also increased in 2023 from 2022.

	Supplemental Dental Claims 2022	Supplemental Dental Claims 2023
Number of Claims Paid	194,259	205,707
Dollar Amount Paid	\$19,843,725	\$20,805,780
Premium	\$21,482,477	\$23,163,080

Vision Plan

The supplemental vision insurance offered by DeltaVision includes allowances for yearly exams, as well as frames, lenses, and contacts for members who need vision correction. There are additional exams allowed for diabetic eye care. The DeltaVision policy also offers discounts on laser vision correction, sunglasses, and lens enhancements. DeltaVision's provider network is provided in partnership with EyeMed.

	Supplemental Vision Claims 2022	Supplemental Vision Claims 2023
Number of Claims Paid	54,770	60,976
Dollar Amount Paid	\$5,120,579	\$5,992,847
Premium	\$6,063,385	\$6,714,745

Accident Plan

Accident insurance provides a lump-sum cash payment directly to the employee regardless of income, expenses incurred, or other insurance coverage when injured in a covered accident. The plan is open to active employees, but retired or former employees can choose to convert to a plan with Securian. The plan has experienced continuous growth since replacing a standard accidental death and dismemberment (AD&D) plan in 2020.

	Supplemental Accident Claims 2022	Supplemental Accident Claims 2023
Number of Claims Paid	368	620
Dollar Amount Paid	\$451,450	\$675,621
Premium	\$1,895,815	\$2,278,826

Long-Term Care Insurance

Long-term care (LTC) insurance was provided by Mutual of Omaha through a local broker, HealthChoice. Coverage was available to active state employees, retirees, their spouses, and the parents of members and spouses. Enrollees were also required to live in the state of Wisconsin. LTC insurance is the only employee-pay-all offering that has premiums based on a person's age, gender, and health at the time of enrollment. LTC insurance policies offered in this program are individual policies, rather than group policies.

Life Insurance

The Board has offered life insurance since 1958, making it the longest-running benefit program offered to employees and retirees. Program participants can choose from a variety of affordable coverage options to provide peace of mind. Benefits are administered by Securian Financial Group.

The Group Life Insurance Program offers four different term life policies:

- Basic Plan: pays out an employee's prior year earnings rounded to the highest \$1,000.
- Supplemental Plan: pays an additional year of earnings at the same rate as the initial year.
- Additional Plan: coverage in addition to the Basic Plan at up to three times the prior year's earnings.
- Spouse & Dependent Plan: participants may choose from two levels of coverage with fixed dollar values.

Participants can keep the Basic Plan into retirement, while the Supplemental and Additional plans end when a retiree turns 65.

Enrollment

Enrollment changes across plan options were minimal in 2023:

Basic Plan

- State = 87,487 +1.6% from 2022
- Local = 126,277 +0.8% from 2022

Supplemental Plan

- State = 37,669 Members, +0.1% from 2022
- Local = 28,494 Members, -0.1% from 2022

Additional Plan

- State = 26,201 Members, +0.3% from 2022
- Local = 32,639 Members, -0.5% from 2022

Spouse & Dependent Plan

- State = 23,071, +1.1% from 2022
- Local = 30,300, -1.2% from 2022

Claims Costs in 2023

About 2,891 claims were paid in 2023. The total amount paid out by the life insurance benefit in 2023 was \$77,774,662. About 98.7% of claims were paid within 10 calendar days of receiving the claim.

Demographics in 2023

The average member age in 2023 was 49.7 among state participants and 47.6 among local participants, which was very similar in 2022.

Average Age of Death

- State = 80
- Local = 80

Gender Mix of Members

- State M(F) = 50%(50%)
- Local M(F) = 53%(47%)

Gender Mix of Claims Paid

- State M(F) = 62%(38%)
- Local M(F) = 53%(47%)

Pre-Tax Savings Accounts

The pre-tax savings account programs offered by the Board help members grow their savings while paying less for medical, dental, vision, pharmaceutical, and commuter expenses. Pre-tax programs include the health care flexible spending accounts (FSAs), limited-purpose flexible spending accounts (LPFSAs), dependent daycare accounts, health savings accounts (HSA), parking accounts, and transit accounts. The HSA has been offered in conjunction with the Board's qualified high deductible health plan (HDHP) product. The pre-tax programs are offered only to state employers.

In 2023, Optum Financial (Optum) was the third-party administrator (TPA) of ETF's pre-tax savings account programs. Optum has been the TPA for the Board since 2020, with the contract extension expiring at the end of 2025.

Participation and Contributions

Participation in the pre-tax saving accounts program increased in 2023. The figure below shows the total participation, as well as contributions for the 2023 plan year.



Healthcare FSA

• Participants: 19,556

• Contributions: \$21.4M



Limited Purpose FSA

• Participants: 1,135

• Contributions: \$525K



Health Savings Account

Participants: 14,681

• Contributions: \$43.4M



Dependent Day Care

• Participants: 3,627

Contributions: \$14.5M



Parking Account

• Participants: 2,428

• Contributions: \$808K



Transit Account

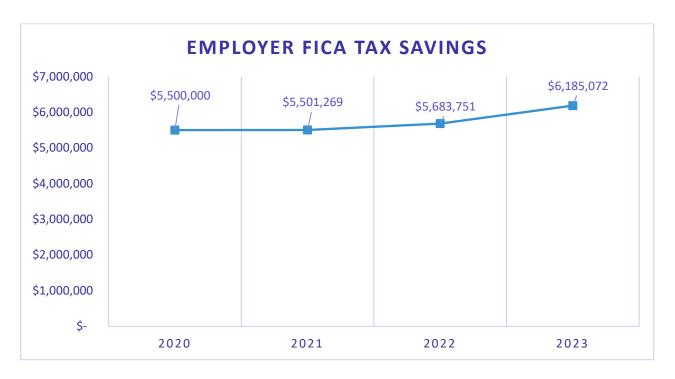
• Participants: 731

Contributions: \$66K

Overall enrollment in the pre-tax programs increased by 3% (with 40,805 participants in 2022). Contributions increased by 9% in 2023 (with \$74.3 million in 2022) totaling \$80.8 million. The HSA program had the largest increase in participation, up 8% (with 13,577 participants in 2022).

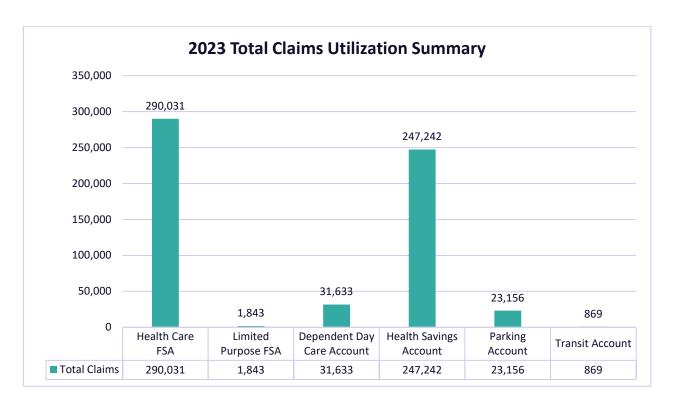
Employer Tax Savings

Offering the pre-tax saving account programs allows employers to save and pay less in (Federal Insurance Contributions Act) FICA taxes. FICA tax savings are calculated at an estimated rate of 7.65% of the total annual contributions. For 2023, the employer FICA tax savings is estimated to be around \$6.1 million. The chart below shows employer tax savings over the past four years.



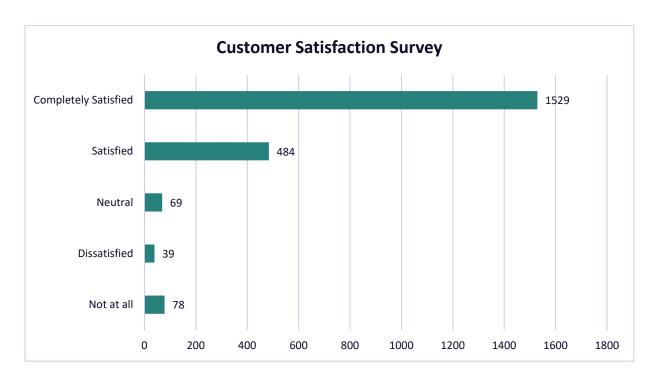
Pre-tax Claims Utilization

Claims for the Health Care FSA and HSA pre-tax programs were high. In 2023, there were a total of 290,031 Health Care FSA claims and 247,242 HSA claims. Transit Account utilization remains the lowest at 869 claims. Medical expenses, including hospital visits, clinic appointments, vision, dental, pharmaceutical, and co-pays are eligible expenses that can be reimbursed with a Health Care FSA and HSA.



2023 Member Satisfaction Survey

Throughout the 2023 plan year, Optum surveyed 2,199 members who contacted Optum's customer service, either by phone, through their portal app, chat feature assistance, or through email support. When asked about their experience with customer service and the level of service they received, 92% reported being either completely satisfied or satisfied with Optum's customer services. This data can be seen in the chart below.



Optum and ETF continued to work on engagement and education materials for members to better understand both how pre-tax savings account programs work, and the requirements needed for claims substantiation.

2024 Preview

The GHIP continued to support members in 2023 to live healthier lives. The Board and ETF look forward to continuing to maintain quality and services that support public employees and retirees.

Looking ahead to 2024, ETF will be able to share more information on benefit changes.

Questions regarding this report can be sent to: ETFSMBInsuranceSubmit@etf.wi.gov

Sources

Health and claims related data: DAISI Data Warehouse and Analytics Tool administered by Merative

Vendor information provided by: Navitus Health Solutions, WebMD Health Services Group, Inc., Delta Dental of Wisconsin, and Securian Financial Group, Inc.

ETF complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-533-5020, Wisconsin Relay 711.

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Appendix A: Our Programs

The State of Wisconsin Group Health Insurance Program (GHIP) benefits are governed by federal and state law. Programs are overseen by the Group Insurance Board (Board) and administered by the Department of Employee Trust Funds (ETF).

The GHIP is available to employees and retirees of:

- State agencies and authorities (State)
- The University of Wisconsin System (UW)
- The University of Wisconsin Hospitals & Clinics (UWHC)
- Local government employers who are part of the Wisconsin Retirement System and choose to participate.

The GHIP's medical benefits offer four different plan designs to State, UW, and UWHC employees. Employees in these programs can pick any of the following options:

 Local coverage IYC Health Plan 2nd lowest premium Lower cost when visiting providers **High Deductible** Local coverage Lowest premum Health Plan (HDHP) Higher cost when visiting providers Nationwide coverage Access Health Plan Out-of-network benefits Highest premium Nationwide coverage **Access HDHP** Out-of-network benefits •3rd highest premium

For local government employers, the GHIP offers four different program options, with varying levels of out-of-pocket costs for employees. Each program has both a local coverage version as well as an Access Plan option with nationwide coverage.

Local No deductible Few copays Traditional Plan Highest premiums Local •\$500 deductible per person Few copays Deductible Plan •Third highest premiums Local Health Similar benefits to state employee IYC Health Plan Second highest premiums Plan Similar benefits to the state employee IYC HDHP Local HDHP Lowest premiums

Local government employers pick a program option from the list above; their employees can choose either the local coverage plan or the Access Plan version of those program options.

When a State, UW, or UWHC employee retires, the employee can continue health insurance coverage. When the retiree turns 65, they are required to enroll in Medicare Parts A and B. With Medicare, the retiree can choose to keep their existing health plan and the same benefits they had while employed, or they can choose one of two other plans:

Medicare Plus

- •Medicare Supplemental plan
- •Covers the out-of-pocket costs not covered by Medicare
- Does not cover services not covered by Medicare
- Worldwide coverage

Medicare Advantage

- "Part C" plan
- Covers Uniform Benefits as well as some additional benefits
- •Coverage nationwide and in the US Territories

Some local government employers may also offer health benefits in retirement; employees should check with their employers before retiring.

All employees and retirees have the same Uniform Pharmacy Benefit coverage, which offers a four-tier pharmacy benefit:



Employees and retirees can also elect basic dental benefits coverage with their health insurance through the Uniform Dental Benefit.

All employees, retirees, and their spouses have access to a uniform wellness program benefit, Well Wisconsin, that is administered through a single vendor. As a part of this program, participants can complete activities to receive a \$150 incentive, as well as participate in disease management and lifestyle coaching to help with healthy habits that contribute to their overall wellbeing.