

From: [REDACTED]
To: [ETF SMB Board Feedback](#)
Subject: UHC EOBs
Date: Wednesday, October 2, 2024 11:55:18 AM

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October 2, 2024

Two weeks ago I submitted a complaint about UnitedHealthcare Medicare Plus EOBs via the DETF website. A response from the ombudsperson in the Office of the Secretary did not address my concerns.

UHC will not make paperless EOBs available to participants in the Medicare Plus plan. The purpose of my email was to criticize the lack of that option. My complaint also regards excessive paper waste as well as data processing and mailing costs for USPS EOBs, which participants ultimately pay for.

UHC sends us a separate EOB mailing for each service along with papers regarding language choices and appeal instructions. We often receive several each week. This is environmentally unacceptable. The GIB should pressure UHC to provide a paperless option and to consolidate EOB mailings, perhaps sending them once a month or at most, semimonthly.

I would like to know what the GIB can do to make UHC more responsible and cost-effective in its processing and mailings of EOBs.

Thank you,
Robert Goodberg

[REDACTED]



STATE OF WISCONSIN
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October 14, 2024

Robert Goodberg
[REDACTED]

Dear Robert Goodberg:

Thank you for your October 2, 2024, email to the Group Insurance Board (Board) and the Department of Employee Trust Funds (ETF) regarding your concerns about the delivery of UnitedHealthcare's (UHC's) Medicare Plus plan's Explanation of Benefits (EOB).

We shared your concerns about the lack of electronic EOBs and the frequency in which you get paper EOBs with UHC. UHC reported they are working toward offering electronic EOBs for Medicare Plus and their other Senior Supplement plans to begin at some point in 2025. They further stated that at this time, paper Medicare Plus EOBs are sent out once a month to include any claim that was processed the month prior. They are required under federal law to include information about language choices and appeal instructions.

For the future, an evaluation committee is currently reviewing bids following a Request for Proposal (RFP) for the Medicare Advantage and Medicare Plus plans. We asked that vendors submit sample EOBs for review by the evaluation committee. ETF will present the findings of the committee and make recommendations for the selection of vendor(s) to the Board during its February 26, 2025 meeting. The selected vendor(s) will offer members the choice of coverage during open enrollment in the fall of 2025. Coverage will begin effective January 1, 2026.

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 copy of your letter and ETF's response will be included in the materials for the November 13, 2024, Board meeting.

Sincerely,

Arlene Larson, Manager of Federal Program and Policy
Office of Strategic Health Policy

Department of Employee Trust Funds

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