# State of Wisconsin Group Health Benefits Annual Report 2024



MAY 2, 2025

**Wisconsin Department of Employee Trust Funds** 



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## Introduction

2023 was a relatively quiet year and allowed for ETF to increase focus on improving customer experience. The effects of these efforts in 2024 aligned with continued growth in many of the programs that make up the Group Health Insurance Program (GHIP).

ETF saw growth in overall GHIP membership, even despite premium rate increases for many of its programs. Additionally, an increase in subscribers to the High Deductible Health Plan (HDHP) may indicate that previous efforts by ETF to increase both awareness and education about the plan have started to pay off. Many of ETF's other programs continue to expand, including Well Wisconsin's resources and services and the Pre-Tax Savings program.

# **2024 Program Highlights**

## Savings with the Clear Bagging Program

In 2024, for the second year in a row, members with Quartz Health Insurance who were receiving level 4 specialty medications in a medical setting at UW Hospital were able to participate in the clear bagging program. The clear bagging program allows for members to have those level 4 specialty medications covered under the pharmacy benefit. In 2024, the plan paid \$3,331,392 for 367 members to fill 1,281 prescriptions through the program, \$1.6 million less than what these drugs would have cost under the medical benefit.

## Well Wisconsin Resource Expansion

2024 marked the first year of new contracts with WebMD in well-being, mental health, and condition management. The contracts were designed to better support the needs of the population and help with managing costly conditions like obesity, diabetes management and prevention, musculoskeletal conditions, and mental health. The dedicated well-being team had almost 67,000 contacts with GHIP members through programming efforts. Initial data for the new and expanded services demonstrates measurable improvements and risk reduction for participants.

## **GHIP Growth and Member Savings**

In 2024, total GHIP membership rose to 244,243 members and 114,236 subscribers, marking the highest membership count since 2016 and the highest subscriber count since at least 2014. Compared to 2023, total membership increased by 4,514 members (1.88%), while subscriber counts grew by 2,706 (2.43%). Nearly all of this growth occurred within the State program, with a modest increase in enrollment for the Local program.

The High Deductible Health Plan (HDHP) also continues to grow, with an increase of 3,024 members (9.15%) in 2024. Total HDHP membership now exceeds 36,000, representing nearly 15% of total plan membership. As HDHP enrollment has grown, so too have contributions to Health Savings Accounts (HSAs). In 2024, participant HSA contributions increased by 17.2%, or approximately \$8 million, bringing total contributions to nearly \$51 million. As a result of these contributions, employees realized an estimated \$27.4 million in FICA savings, while employers saved approximately \$7.0 million—for a combined total of \$34.3 million in savings.

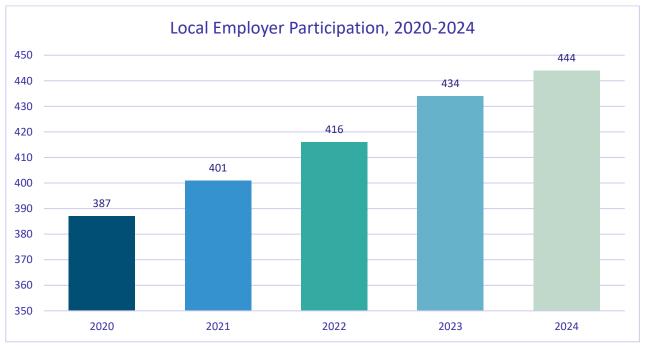
## **Medical Benefits**

## 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 aren't yet Medicare-eligible. Benefits are provided by 10 fully insured health plans. All plans in the GHIP must offer the same service coverage under the Board's Uniform Benefits.

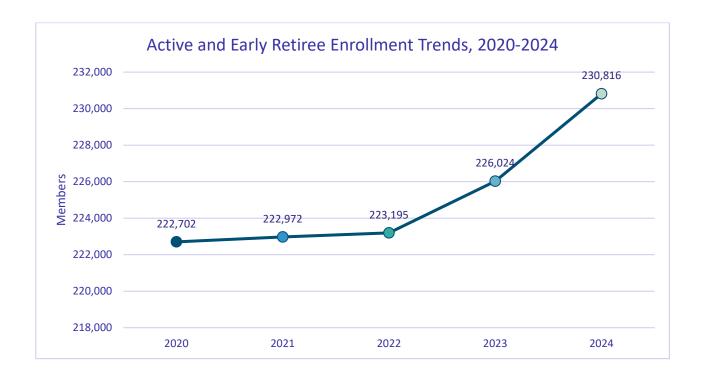
#### **Employers**

ETF is the administrator for GHIP benefits on behalf of state agencies, the Universities of Wisconsin System, UW Hospitals and Clinics, and participating local employers. In total, ETF served nine different payroll and benefits administrators at the state and university level, as well as 444 local employers in 2024. Enrollment in the local government employer portion of the program increased 1.1% from 2023 to 2024.



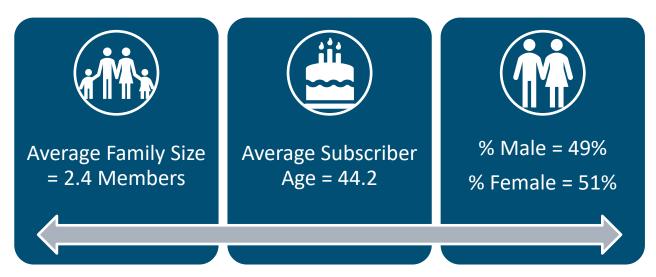
#### **Enrollment**

Participation in the GHIP increased by 2.1% in 2024 compared to 2023 membership. In 2024, 230,816 active employees, non-Medicare retirees, and their dependents were enrolled in the benefit. Service utilization increased slightly, from 84.3% in 2023 to 84.7% in 2024.



#### **Demographics**

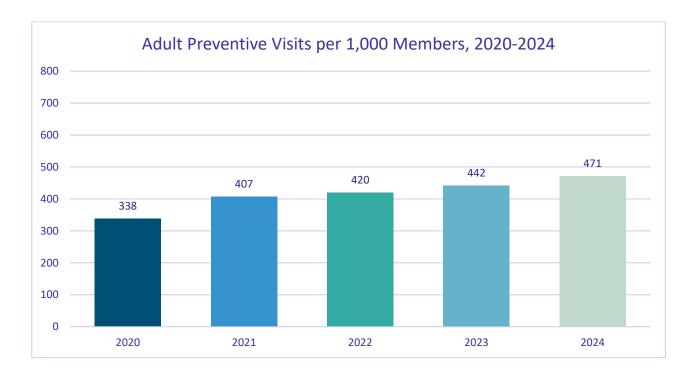
The demographics of the GHIP stayed the same in 2024, except for the average subscriber age. The average subscriber age slightly decreased from 44.4 in 2023 to 44.2 in 2024.



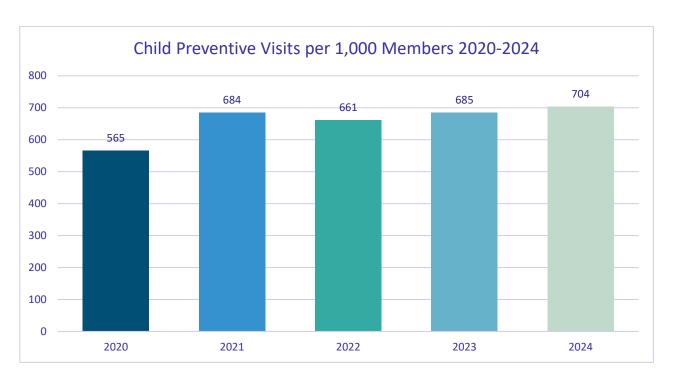
#### **Utilization & Cost Trends**

Using ETF's data warehouse, DAISI, ETF can track trends in how members use their benefits and identify opportunities. The following are highlights identified in the GHIP data.

People who receive regular preventive care have better long-term health outcomes on average. Adult preventive care use increased 5.3% from 2023 to 2024, with 45 out of 100 of adult non-Medicare retirees and their dependents receiving a primary care appointment.



Preventative care visits for children aged 3-17 years old increased by 2.9% from 2023 to 2024. In 2024, 69 out of 100 of children received a primary care visit compared to 67 out of 100 in 2023. ETF will continue to work with employers, health plans, and the wellness vendor to promote preventive care use across all age groups.



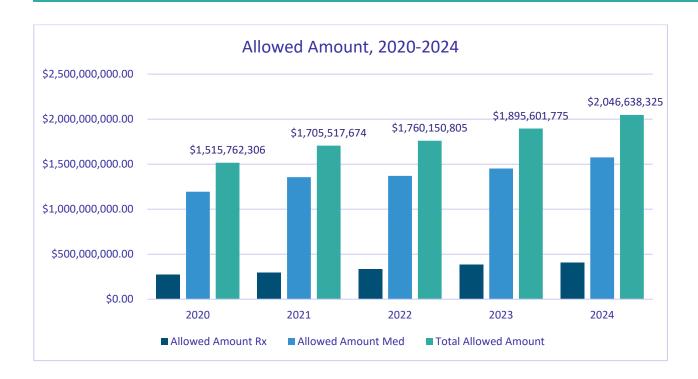
ETF continues to monitor emergency room (ER) utilization as a part of the Board's initiative to reduce avoidable ER visits and help members find more appropriate and affordable sites of care.



Although there was a reduction in avoidable ER visits between 2019 and 2020, likely due in part to the pandemic and individuals reducing all in-person health care visits, visits have steadily risen and are now above pre-pandemic rates by about 17%.

ETF will revisit the initial work done by the ER workgroup to explore whether there are opportunities to improve emergency room utilization rates. This will include evaluating potential strategies such as benefit design adjustments, enhanced member communication and education, and collaboration with health plans to identify additional opportunities to support appropriate care-seeking behavior. The goal is to encourage use of more appropriate lower cost settings such as primary care, virtual visits, or urgent care when clinically appropriate and to promote more informed health care decision making.

Allowed amounts continued to increase in 2024. Total allowed amount increased by approximately 8.0% over 2023. Allowed amount for medical increased by 8.5%, and pharmacy allowed amount increased by 6.3%.



#### Retirees with Medicare

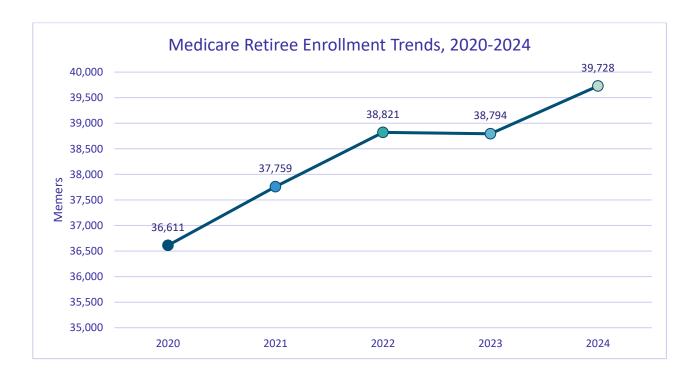
Retirees who continue their health insurance coverage into retirement are required to sign up for Medicare Parts A and B when they become eligible. Many Medicare-eligible retirees experience an increase in their benefits and a decrease of their premium, since Medicare picks up most of the cost of medical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

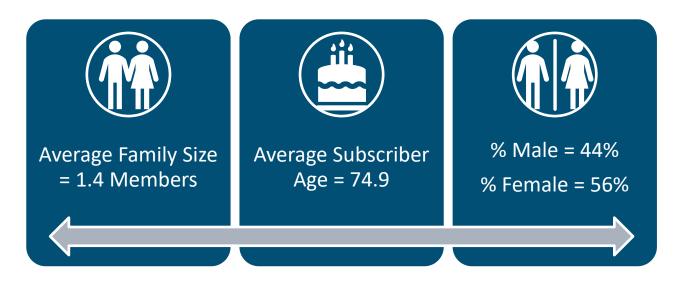
- 1. Medicare Plus is a Medicare Supplement plan that pays the additional out-of-pocket costs of any medical services after Medicare covers the base cost. It also offers worldwide coverage for retirees who live overseas.
- The Board also offers a Medicare Advantage plan to retirees. This plan offers 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 & Demographics**

The Medicare-age retiree population in the GHIP is smaller than the active and early retiree population, but still a substantial number. In 2024, member enrollment increased by 2.4% compared to the prior year. Medicare members maintained high utilization of their benefits in 2024; 96.4% accessed benefits in 2024, up slightly from 2023.



Demographics for Medicare retirees in 2024:



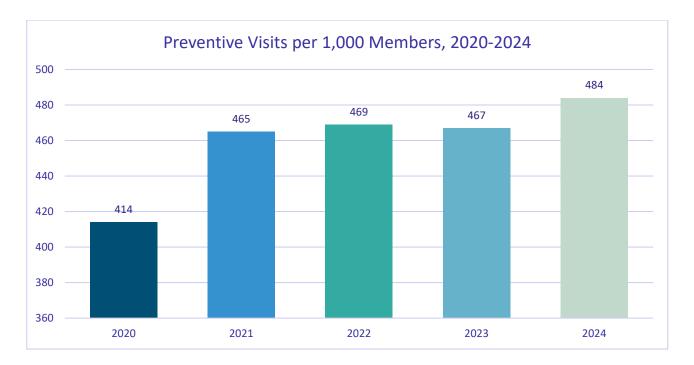
#### **Benefits**

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 the health plans who offer benefits for GHIP members offer a coordinated Medicare plan where they pay all Uniform Benefit services that Medicare doesn't pay, as well as Medicare deductibles and out-of-pocket costs.

#### **Utilization & Cost Trends**

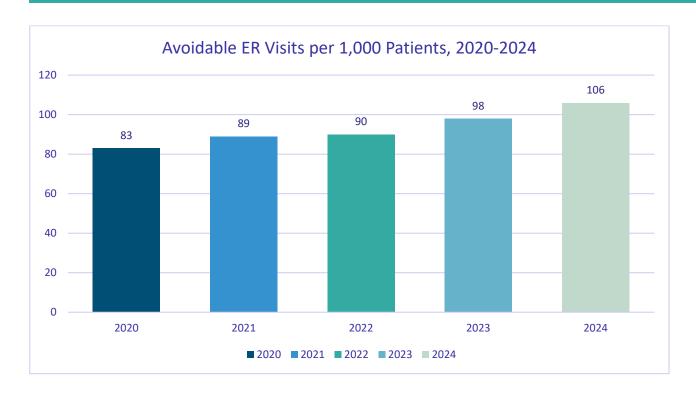
The Medicare-coordinated, Medicare Plus, and Medicare Advantage plans benefit from being able to share claim costs with Medicare to lower premiums and out-of-pocket expenses for retirees.

ETF tracks similar utilization patterns in preventive care and ER use for the Medicare population. Below are charts showing use per 1,000 members for 2020 to 2024.

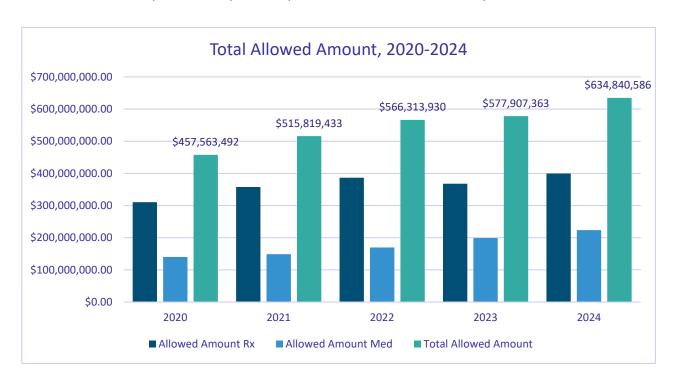


Preventive visit use increased by 3.6% in 2024 with 47 out of 100 Medicare retirees having a preventative visit in 2024.

Like the non-Medicare group, avoidable ER visits continue to increase. There was an 8.1% increase in avoidable ER visits from 2023 to 2024. Unlike the non-Medicare group, avoidable ER visits for the Medicare population remain slightly below the pre-COVID rate of 112 per 1,000 members in 2019. 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 9.9% in 2024. Allowed amount for medical increased by 8.5%, and pharmacy allowed amount increased by 12.5%.



# **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). The Pharmacy Benefit provides coverage to members at both retail pharmacies and mail order pharmacies.

#### **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.

There was a 2.3% increase in the total number of eligible commercial members in 2024 from 2023 and a 6% increase in the commercial prescriptions filled from 2023 to 2024 despite a 0.4% decrease in commercial members that used the pharmacy benefit over that same time. The EGWP benefit saw a 1.8% increase in members from 2023 to 2024 and a 2.3% increase in total scripts filled despite a 0.7% decrease in EGWP members using the pharmacy benefit.

Plan Type:	Commercial	Medicare	Total
Number of Eligible Participants*:	210,118	36,729	246,847
Participants Who Used the Pharmacy Benefit:	168,305	36,765	201,590
Total Prescriptions Filled:	2,116,599	988,119	3,104,718
Total Cost (plan & participant):	\$289,124,283	\$168,152,557	\$457,276,842

<sup>\*</sup>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 2024 by script count for the commercial and EGWP benefit.

#### Commercial

Rank	Drug Category	<b>Script Count</b>
1	Antidepressants	264,762
2	Antidiabetics	113,710
3	ADHD/Anti-Narcolepsy	112,625
4	Antihypertensives	107,246
5	Antihyperlipidemics	101,658

#### **EGWP**

Rank	Drug Category	Script Count
1	Antihyperlipidemics	100,920
2	Antihypertensives	71,395
3	Antidepressants	60,901
4	Antidiabetics	58,664
5	Beta Blockers	47,312

#### Where Participants Get Prescriptions

Members can fill 30-day prescriptions or a 90-day supply at a retail pharmacy or a mail order pharmacy. 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.

Below is a breakdown of where participants filled their prescriptions in 2024:

	30-Day Retail	90-Day Retail	Mail Order	Specialty Pharmacy
Utilizing Members	193,646	114,366	5,295	2,958
Percentage of Total Benefit Users	94.43%	55.77%	2.58%	1.44%
Total Plan Cost of RX Filled	\$316,483,899	\$94,088,198	\$12,528,521	\$175,305,875
Percentage of Total Cost	74.80%	22.24%	2.96%	41.43%

#### **Cost Trends**

- The 2024 plan paid per member per month cost increased by 6.7%, for the commercial program. Commercial plans savings increased by 6.5%.
- With a 6% increase in total commercial prescriptions filled in 2024 over 2023, the total cost paid by the plan for commercial prescriptions increased by 9.2%.
- Members on the EGWP filled 2.3% more prescriptions in 2024. The EGWP benefit saw a 19.9% increase in rebates in 2024. For members enrolled in Medicare, the 2024 plan paid per member per month cost increased by 8.7%. The total cost paid by the plan for medications provided through the pharmacy benefit increased by 10.7% from 2023 to 2024 for the EGWP plan.

The following are the top five non-specialty drug categories for 2024, ranked by how much the plan paid for the commercial and EGWP benefit:

## Commercial

Rank	Drug Category	Plan Paid
1	Antidiabetics	\$25,232,206
2	Antivirals	\$11,479,939
3	ADHD/Anti-Narcolepsy	\$8,894,718
4	Vaccines	\$6,852,273
5	Antiasthmatic and Bronchodilator Agents	\$5,634,997

## **EGWP**

Rank	Drug Category	Plan Paid
1	Antidiabetics	\$17,808,213
2	Anticoagulants	\$12,536,805
3	Antiasthmatic and Bronchodilator Agents	\$4,739,465
4	Antihyperlipidemics	\$2,600,309
5	Ophthalmic Agents	\$2,079,632

## **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 Delta Dental of Wisconsin (Delta), and at the November 2024 GIB meeting, the board approved a contract extension for a period of two years, effective January 2027 through December 2028.

#### **Participants**

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. Enrollment for both subscribers and total members increased between 2023 and 2024. Below is the total enrollment for the Uniform Dental Plan in 2024:



#### **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 includes gum disease, diabetes, high risk cardiac conditions, and kidney disease, among others.

#### Visits & Services

76.8% of participants had at least one claim for dental services in 2024, up only slightly from 76.3% in 2023:



#### Changes in 2024

The State of Wisconsin passed legislation to authorize dental therapy in some or all settings, allowing for the licensure of dental therapists, addressing gaps in oral healthcare. This also enhances access to dental services, particularly in underserved communities, with dental therapists working under the supervision of a dentist. ETF will monitor for impacts of this change to the Board's dental benefit.

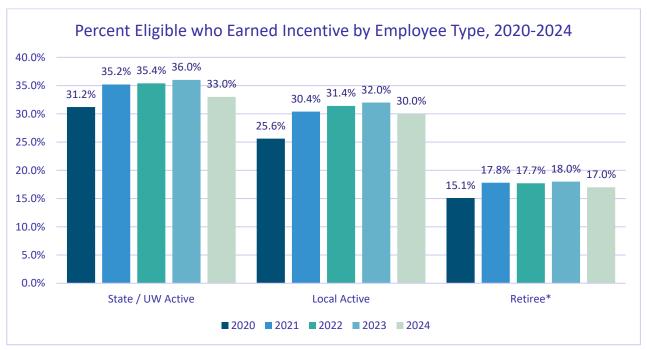
## **Well Wisconsin**

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. All subscribers and spouses enrolled in the GHIP are eligible to participate in the Well Wisconsin Program. In 2024 a total of:

- 108,795 state and UW active employees and their spouses were eligible
- 19,518 active local employees and spouses were eligible
- 44,921 state and local retirees and their spouses were eligible

#### Incentive Participation

Participants can earn a \$150 incentive each year by completing a health check, a health assessment, and a well-being activity. Approximately 31% (47,621) of those eligible completed the incentive activities. Participation varied by employee type.



<sup>\*</sup>Medicare Advantage members are not eligible to earn the incentive but are able to participate in the program.

#### **Program Satisfaction**

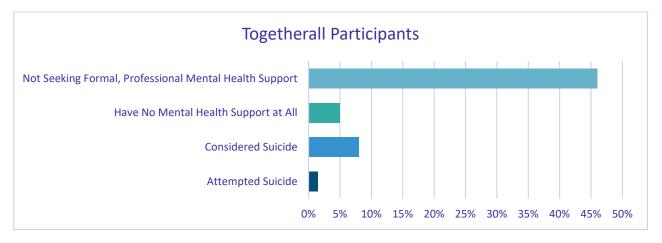
The Well Wisconsin program continues to report high levels of satisfaction among those who participate in the program. Over 90% of participants are satisfied with customer service, health screenings, lifestyle management, condition management, and the health assessment and web portal.

#### Health Outcomes and Risks

Typically, year over year changes in risk, as measured by the health assessment, are reported. Due to an issue with the health assessment in 2023, aggregate health risk changes from 2022 to 2024 are available. For those who completed the health assessment in 2022 and 2024, there was a 2.6% improvement in health risks. Additionally, there was a 6.7% improvement in health risks for the members who participated in health coaching and a 6.9% improvement in health risks for the members who completed a condition management program.

#### Mental Health Support

Participants who engaged in new mental health resources realized mental health improvements and risk reduction. Over 2,100 mental health coaching sessions were completed, supporting members with depression, anxiety, grief, and more. Togetherall, an anonymous peer-to-peer support forum moderated by clinical professionals, is filling a gap for those who are not receiving support elsewhere and is also providing clinical support and referrals for high-risk individuals. 247 participants engaged with Togetherall for a total of 5,845 activities.



meQuilibrium, Well Wisconsin's stress and resilience-building app, saw an increase in new enrollments in 2024 with over 3,500 participants. meQ maintains a strong level of member engagement throughout the year with 59% using it every month.

Lastly, WebMD began to offer mental health first aid training in the latter part of the year, ending with 58 new certifications. These 58 individuals are providing first-level mental health support by helping others to feel seen and heard, while referring them to professional tools and resources.

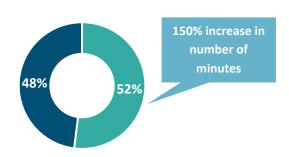
#### **Condition Management**

The biggest area of opportunity for cost savings continues to be related to the reduction of chronic disease progression. In addition to the existing condition management program for diabetes, asthma, coronary artery disease, chronic obstructive pulmonary disease, and heart failure, the expanded Positively Me weight management program further support these efforts. Almost 550 participants enrolled with most reporting an improvement in their weight and physical activity.

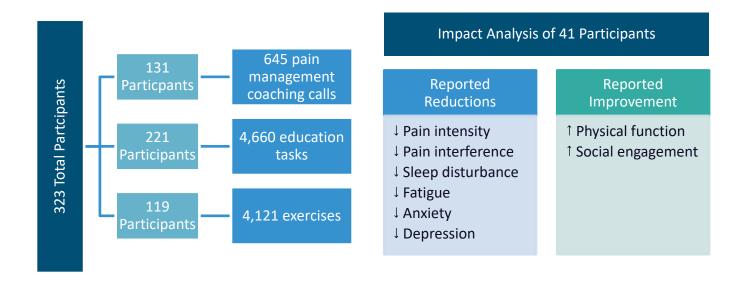


# 59%

#### Increase in Exercise



Fern Health specializes in pain management. Participants are engaging in the program activities and reporting a reduction in pain intensity, and improvements in their physical function and social engagement.



Well Wisconsin will continue to focus on reaching participants at the right time to support them in their health journey. Expanding the use of targeted outreach and using various modes of communication will help educate members on the resources and services available.

# **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 2024 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 subscriber count in each plan from 2020 to 2024. Enrollment in each benefit plan has gradually increased each year.



#### **Dental Plans**

Supplemental dental plans continued to be popular among employees in 2024. Utilization also increased in 2024 from 2023.

Supplemental Dental Claims				
2023 2024				
Number of Claims Paid	205,707	221,318		
<b>Dollar Amount Paid</b>	\$20,805,780	\$22,323,864		

#### 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 offered in partnership with EyeMed.

Supplemental Vision Claims				
2023 2024				
Number of Claims Paid	60,976	65,401		
<b>Dollar Amount Paid</b> \$5,992,847 \$6,587,602				

#### 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 convert to a plan with Securian if they choose. The plan has experienced continuous growth since replacing a standard AD&D plan in 2020.

Supplemental Accident Claims					
2023 2024					
Number of Claims Paid 978 1330					
<b>Dollar Amount Paid</b> \$1,837,454 \$1,874,801					

#### Long-Term Care Insurance

Long-term care (LTC) insurance was provided by Mutual of Omaha through a local broker, HealthChoice. Coverage was available to state active employees, retirees, their spouses, and the parents of members and spouses. Enrollees were also required to live in the state of Wisconsin. LTC insurance was 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 were individual policies, rather than group policies.

## Life Insurance

Life insurance continues to be 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.

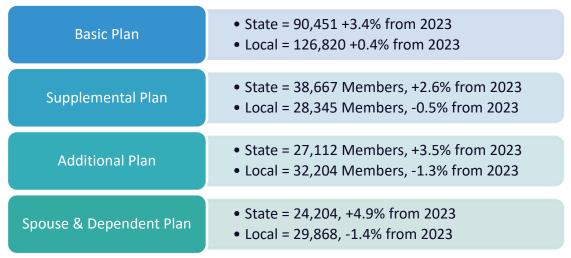
The Group Life Insurance Program offers four different term life policies:

- 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; the Supplemental and Additional plans end when a retiree turns 65.

#### **Enrollment**

Enrollment changes across plan options in 2024 can be seen below:



#### Claims Costs in 2024

2,922 claims were paid in 2024. The total amount paid out by the life insurance benefit in 2024 was \$74,673,890. 99.62% of claims were paid within 10 calendar days of receiving the claim.

#### Demographics in 2024

The average member age in 2024 was 49.2 among state participants and 47.5 among local participants, similar to 2023.

Average Age of Death

- State = 80
- Local = 81

Gender Mix of Members

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

Gender Mix of Claims Paid

- State M(F) = 59%(41%)
- Local M(F) = 54%(46%)

# **Pre-Tax Savings Accounts**

The pre-tax savings account programs are offered only to state employers and 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 (HSAs), parking accounts, and transit accounts. The HSA is offered in conjunction with the high deductible health plan (HDHP).

In 2024, Optum Financial (Optum) was the third-party administrator (TPA) of ETF's pre-tax savings account programs.

#### **Participation & Contributions**

The table below shows the total participation in pre-tax savings account programs as well as contributions and utilization (claims) for the 2024 plan year.



#### **Healthcare FSA**

Participants: 18,665Contributions: \$23.4M

•Claims: 318,366



#### **Limited Purpose FSA**

Participants: 1,021Contributions: \$582K

•Claims: 2,749



#### **Health Savings Account**

Participants: 16,114Contributions: \$51.0M

•Claims: 289,084



#### **Dependent Day Care**

Participants: 3,828Contributions: \$15.4M

•Claims: 23,046



#### **Parking Account**

Participants: 2,455Contributions: \$787K

•Claims: 21,652



#### **Transit Account**

Participants: 735Contributions: \$81K

•Claims: 856

Overall enrollment in the pre-tax programs increased by 1.6% (with 42,158 participants in 2023). Contributions increased by 12.8% in 2024, totaling \$91.2 million compared to \$80.9 million in 2023. The HSA program participation increased by 9.8% (with 14,681 participants in 2023) and contributions increased by 17.2% compared to 2023.

#### **Employer Tax Savings**

Offering the pre-tax savings account programs allows employees and employers to save and pay less in FICA taxes. FICA tax savings for employees are based on a 30% total tax rate to calculate estimated tax savings. For 2024, the employee FICA tax savings is estimated to be around \$27.3 million dollars and the employer savings around \$7.0 million. The chart below shows employee, employer, and combined tax savings over the past five years.



## 2025 Preview

The GHIP continued to support members in 2024 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 2025, ETF will be able to share more information on benefit changes.

Questions regarding this report can be sent to: <a href="mailto:ETFSMBInsuranceSubmit@etf.wi.gov">ETFSMBInsuranceSubmit@etf.wi.gov</a>

#### **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.

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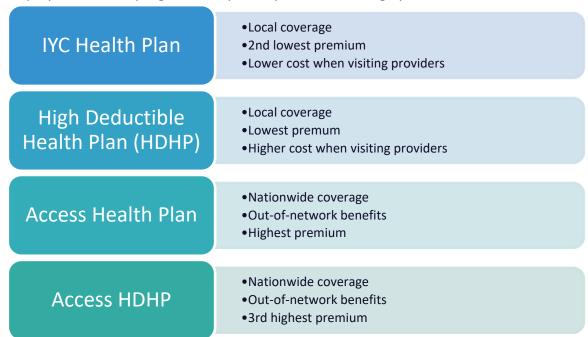
# **Appendix A: Our Programs**

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 Universities of Wisconsin System (UWs)
- 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, UWs, and UWHC employees. Employees in these programs can pick any of the following options:



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 Local •\$500 deductible per person Few copays Deductible Plan Third highest premiums Local Health •Similar benefits to state employee IYC Health Plan Plan Second highest premiums •Similar benefits to the state employee IYC HDHP Local HDHP Lowest premiums

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, UWs, 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.