Strategies Keep Health Insurance Program Costs in Check

Health insurance premium rate increases for members covered under the Group Health Insurance Programs will, for the fourth consecutive year, average in the single digits next year.

The rate increases for the health plans participating in the program in 2008 will average less than 7%. Rates may be higher or lower for some local government employers, but overall, this is very good news for program participants and employers.

The fact that rate increases have been held down without cutting benefits can be directly attributed to the cost containment strategies set in place four years ago. Initiated by the Group Insurance Board and the governor, the strategies included adopting for state employees a three-tiered structure for premium contributions, incorporating quality measures into the health plan negotiation process, and providing prescription drugs through an innovative, transparent, prescription drug purchasing pool, operated by Navitus Health Solutions, a pharmacy benefit manager.

The tiering process uses consumer pressure to keep costs down and quality standards high without resorting to benefit cuts or shifting costs through higher copayments. The participating health plans and providers are sensitive to this pressure and have responded by holding down premium increases.

One notable change for next year includes the expanded availability of Tier 1 plans to most areas of the state, especially in the northwest part of the state. This is particularly good news for state and university employees in Pierce and St. Croix.

Dual-Choice Enrollment Period Set

The Dual-Choice health insurance enrollment period for 2008 has been set for October 8-26, 2007. Dual-Choice is for currently insured active employees and retirees who take part in the State of Wisconsin Group Health Insurance Program. It gives participants the opportunity to change from one health plan to another or switch from single to family coverage without a waiting period for pre-existing medical conditions. Changes become effective January 1, 2008.

Even if you are satisfied with your current plan, you should take the time to review any changes to the plan's premium, service area and health care providers. If you want to remain with your current plan, you do not need to file a health application if your plan is still offered in 2008.

Active employees: If you want to switch plans or change your level of coverage (e.g., single to family) for 2008, you must complete a new health application. Give it to your payroll representative by 4:30 p.m. on October 26.

Retirees: You must submit a completed application to the Department of Employee Trust Funds postmarked no later than October 26. Significant health plan changes will be listed on the first page of the 2008 It's Your Choice booklet. You will receive the booklet prior to the beginning of the Dual-Choice...
In addition, all of the health maintenance organizations participating in the program for state employees will offer some dental benefits next year. Eight plans in the local government program will offer employees dental coverage through nine networks.

Monthly premiums will increase by about 7% for the approximately 10,200 participants in the state’s Medicare Plus $1,000,000 plan. This group experienced premium decreases over the past three years, but higher than expected medical costs in 2007 required a modest premium increase for 2008.

Other notable changes:

Prescription out-of-pocket maximum increase
For most plans, the annual prescription drug out-of-pocket amount will increase to $350 per individual and $700 per family. The out-of-pocket amount for the Standard Plan has not changed.

Health Plan name changes
- CompCareBlue has changed its name to Anthem Blue Cross & Blue Shield. The plan will mail information to current members prior to the Dual-Choice enrollment period and produce new identification cards at the end of this year.
- WPS Prevea Health Plan has changed its name to Arise Health Plan. Current members have already received new identification cards and information.

Medicare option newly available
A Medicare Advantage Private Fee-For-Service plan administered by Humana is available in 2008. For those members enrolled in Medicare Parts A and B, Medicare has delegated the administration of Parts A and B to Humana. This plan, available nationwide, offers Uniform Benefits with the flexibility to use any doctor that accepts Medicare assignment and Humana’s payment terms and conditions.

Contact Humana at 1-866-396-8810 after October 5, 2007, for more information. Those members with Medicare coverage who are enrolled in Humana for 2008 will automatically have this plan.

Service Area Changes
Please note that a number of plans have changed their service areas. Some have made significant changes by adding or terminating contracts with certain provider groups. Humana and Arise Health Plan are examples of plans that have such changes this year.

In addition, the State Maintenance Plan (SMP) will no longer be available for state active and retired employees in Ashland, Marinette and Pierce counties. SMP will no longer be available for local active and retired employees in Marinette and Marquette counties.

To identify service area changes that affect you, review the map and plan description pages in your 2008 It’s Your Choice booklet. In addition, verify with your health plan that your provider is still available in 2008.

It’s Your Choice booklets for all subscribers will be available by October 1. You can also view them on the Department’s Internet site at the following address:
Did you Know?

Keep Current on Formulary Changes
Did you know that Navitus Health Solutions has published a detailed listing of changes that have been made to the formulary over the past three months? The formulary is our group insurance program’s list of preferred medications. To review both the formulary and the “change” document online, go to: https://www.navitus.com/Pages/ETFFormulary.aspx.

Form Required to Escrow Sick Leave Credits
Retiring state employees: Did you know that you are allowed to “escrow” or delay using accumulated sick leave credits if you currently have, and will continue to have, comparable health insurance coverage through other sources? To escrow sick leave credits you must complete the Sick Leave Escrow Application (ET-4305); otherwise, ETF will automatically use your sick leave credits to pay your state group health insurance premiums.

You may download the form from our Internet site, http://etf.wi.gov or call the toll -free Self-Service Line at 1-877-383-1888 and request a paper copy.

Additional 30-day Medication Supply Possible
Did you know that if you are taking a vacation or planning to be away from your local pharmacy for an extended period of time, you can obtain an additional 30-day supply of prescription medications? Contact Navitus Health Solutions Customer Service at 1-866-333-2757 at least one week prior to your departure. For additional information about this provision, called a “30-day limit override,” contact Navitus or review online a set of frequently asked questions on this topic: https://www.navitus.com/Pages/PlanSpecificInfoETF.aspx.

Enroll in the ERA Program and Save Money!

Open enrollment for Medical Expense and Dependent Day Care Reimbursement accounts for the 2008 plan year is from October 8 through November 16. Watch for an Employee Reimbursement Accounts Program (ERA) Summary Guide in early October.

A booklet with more detailed program information is available on the Department of Employee Trust Funds (ETF) Internet site, http://etf.wi.gov. You may also download a paper copy from ERABenefitsGuide@fbmc-benefits.com or call the program administrator toll-free at 1-866-440-7149.

How you can save...
When you participate in the ERA Program, the money that you pay for insurance premiums or deposit into your Medical Expense and/or Dependent Day Care Reimbursement account comes straight out of your gross pay before taxes are calculated. You keep more money in your pocket because you pay less in taxes.

A Medical Expense Reimbursement Account allows you to contribute money on a tax-free basis to pay for your family’s health plan copayments, deductibles, and other qualifying expenses that you pay out-of-pocket such as dental, orthodontia, and vision care. You can contribute up to $7,500 annually. A Dependent Day Care Reimbursement Account allows you to contribute up to $5,000 annually on a tax-free basis to pay for dependent day care expenses.

How you can participate...
Simply log on to the ETF Internet site at http://etf.wi.gov and click on the ERA enrollment link (under the Members tab), or call 1-800-847-8253 and follow the voice prompts to enroll via phone. You must enroll in a Medical Expense and/or Dependent Day Care Reimbursement Account during the fall open enrollment period to participate in 2008.

ERA, continued on page 4
Reminders and Announcements

Watch for Annual “Dependent Verification” Form
For subscribers who have dependents age 19 or older (other than spouses): The Department of Employee Trust Funds (ETF) requires health plans to annually verify student eligibility and disabled dependent eligibility for health insurance. Your health plan will send you a verification form. Here are some important reminders about the verification process:
• Failure to respond will result in loss of coverage for your dependent in 2008.
• Return the completed form to your health plan by November 30, 2007.
• Notify your employer (or ETF if you are an annuitant) if your dependent will no longer be eligible for health insurance coverage or else your dependent will lose the right to continue coverage under this program.

Use the Right ID Card For Pharmacy Benefits
Using the correct pharmacy benefit identification card (ID) is important to ensure claims are paid correctly and appropriately. If you or your covered dependents are no longer eligible but continue to use your ID card when purchasing medications, you will be held responsible for reimbursing all claims.

Employees and retirees enrolled in either the State group or Wisconsin Public Employers (WPE) group health insurance programs, and whose coverage has terminated, no longer have prescription drug benefits covered by Navitus. Likewise, covered individuals who lose their status as students and/or dependents are no longer eligible to receive benefits from Navitus. In addition, Navitus does not cover employees that retired from local government employers, who are eligible for Medicare, and who are enrolled in the WPE Group Health Insurance Program.

If you enroll in the Group Insurance Board’s preferred Medicare Part D prescription drug plan (DeanCare Rx), be sure you know when your DeanCare Rx coverage begins to ensure that you use the correct ID card when receiving prescription drugs.

Optional Insurance Plans Are Not ETF Programs
There are a number of optional insurance programs not administered by the Department of Employee Trust Funds (ETF) that are available to state employees, including Spectera vision care, Epic supplemental benefits, The Hartford accidental death and dismemberment benefits, DentalBlue dental plans, and long-term care insurance from John Hancock and Mutual of Omaha. Questions about or concerns with the benefits of these plans should first be directed to the plan itself or, in some cases, to your payroll and benefits representative. Formal complaints about a plan can be directed to the Office of the Commissioner of Insurance. While the Group Insurance Board (GIB) authorizes each of these plans to establish policies and contract with a participant, the GIB does not administer or oversee these plans.

ERA, continued from page 3
Before you enroll…
• Carefully review your expected expenses for 2008. The ERA enrollment booklet contains information about qualified expenses for the reimbursement accounts.
• Plan conservatively when contributing to a reimbursement account. Your annual election amount cannot be changed during the plan year unless you experience a qualified change-in-status event.
• Review the It’s Your Choice booklet for changes in your health plan coverage.
• Review the drug formulary found at http://www.Navitus.com to determine the copayment amount for the prescriptions you and your family use. Remember: the out-of-pocket maximums apply only to Level 1 and Level 2 prescription drugs and insulin. Drugs listed under Level 3 are not subject to the out-of-pocket maximums. Mid-year changes in drug coverage (i.e. switching to a lower or higher copayment drug) are not events that allow election changes. If you are unsure of your drug needs for the upcoming year, consider contributing the lower copayment amount for your monthly prescriptions.
When it comes to disposing of prescription drugs, the standard advice used to be simply flush them down the toilet -- but not anymore. Wastewater treatment plants are not designed to remove pharmaceuticals from wastewater. Research has shown that chemicals in drugs end up in waterways, in ground and surface water, and can damage our environment and wildlife. There is rising concern that pharmaceuticals in the water can harm humans as well.

Medication Collection
Medication drop-off programs, also known as take-back programs, are an environmentally friendly way to dispose of unused and expired medications. In general, take-back programs are one- or two-day collections during which you can drop off your unwanted medications, which are then incinerated. The incineration process destroys the medications completely, and all that remains is steam and ash.

Take-back programs are collaborative efforts and would not be possible without pharmacists or pharmacy technicians, a hazardous waste hauler, and local law enforcement. Some of the current regulations surrounding take-back programs are summarized below:

- Wisconsin Department of Natural Resources regulations require hazardous waste to be incinerated in a hazardous waste incinerator, which is different from a biomedical waste incinerator.
- The collection of controlled substances (e.g., narcotics, stimulants and hallucinogens) should be in compliance with federal Drug Enforcement Agency (DEA) guidelines on the handling of controlled substances.
- DEA regulations require local law enforcement to be present when accepting controlled substances from patients, as patients are not DEA registrants.
- A DEA-registered waste hauler is required to transport the collected medications to the incineration facility.
- A log of controlled substances is kept by local law enforcement for a period of two years after the collection date.

The University of Wisconsin Extension-Solid & Hazardous Waste Education Center publishes an online schedule of medicine collection days planned for various locations throughout Wisconsin. Seventeen medication collection dates were scheduled in 2007 -- seven are coming up in September and October. For more information and to view the 2007 medication collection schedule, go to http://www4.uwm.edu/shwec and select the “2007 Medicine Collection Days” tab on the lower left side of the page.

Alternatives
If you cannot get to one of the scheduled medicine collection days, dispose of old medications in the garbage following these guidelines:
- Crush pills or capsules, or dissolve them in a small amount of water.
- Mix liquid or dissolved medications with an absorbent material such as used coffee grounds, kitty litter or sawdust.
- Place the old drugs in a sealed plastic bag and conceal that bag in a second plastic bag. Putting the waste into impermeable, nondescript containers such as empty cans or sealed storage bags will further ensure the drugs are not diverted.
- Dispose of the prescription label separately from the drugs, and cross out personal information.

Of course, it’s best to have fewer leftover drugs in the first place. If you’re trying a new over-the-counter medication such as a headache reliever, buy the smallest amount possible, even if a larger size is on sale. For a prescription drug, don’t hesitate to ask your doctor or pharmacist whether different quantities and potencies are available. You can often save money and reduce waste if they can tailor the prescription to your needs.

Additional Resource
For additional information on household pharmaceutical waste disposal, visit the Wisconsin Department of Natural Resources Web site at the following address: http://dnr.wi.gov/org/aw/wm/pharm/household.htm.

Source: Navitus Health Solutions
How to Find Helpful Information on Provider Quality of Care and Patient Safety Efforts

The Department of Employee Trust Funds is involved in several state and national initiatives focused on reducing medical errors and saving lives through voluntary public reporting. The Plan Description pages in Section G of your It’s Your Choice booklet contain notations on the participating hospitals and clinics that have reported information to several quality and safety reporting organizations.

You can review the results online at the following Internet sites:

- The Leapfrog Group: http://www.leapfroggroup.org
- Check Point: http://www.wichckpoint.org
- The Joint Commission: http://www.jointcommission.org

It’s Your Benefit is published three times a year by the Wisconsin Department of Employee Trust Funds for subscribers in Wisconsin Retirement System insurance programs. To view this newsletter online, go to http://etf.wi.gov/publications.htm.

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