

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF WISCONSIN

ALINA BOYDEN and
SHANNON ANDREWS,

Plaintiffs,

Case No. 17-cv-264

v.

STATE OF WISCONSIN DEPARTMENT
OF EMPLOYEE TRUST FUNDS, et al.,

Defendants.

DECLARATION OF CAITLIN M. MADDEN

I, Caitlin M. Madden, certify under penalty of perjury that the following is true and correct to the best of my knowledge and recollection:

1. I am an attorney licensed to practice in the state of Wisconsin and am one of the attorneys representing the Plaintiffs in the above-captioned matter.

2. The parties in this case have engaged in discovery. Attached to this Declaration is a true and correct copy of the following document produced in discovery:

a. Attached hereto as **Exhibit A** is a true and correct copy of Lisa Ellinger's February 12, 2015 notes, Bates labelled ETF000618.

3. I declare under penalty of perjury that the foregoing is true and correct.

Executed this 26th day of June, 2018.

/s/ Caitlin M. Madden
Caitlin M. Madden

Exhibit A

KS: generally look very high. National PPO could be <\$300/mo
Bid Tool – addendum 1 -- unlocked

DxCG – Segal planning to use this for this year. Best you are going to get for Rx.
Navitus report from CMS – Kirsten will send a description. Looking for info that stratifies risk.
? individualized rates for MC – may not be worth it.

2/12/15 ETF/Segal

**Ken, Rick, Richard, Kirsten, Jennifer, Gina
Bill, Mary**

Standing Agenda item(s):

--Segal contacts (Segal: note contacts with health plans, vendors, etc)
RW: Aetna, Anthem, Cigna, Humana, UHC -- hear about initiatives and innovations they are implementing in WI, network access, VBP

BK question about regions – which marketplace plans are they comparing us to? We are 95% AV, platinum only needs to be 90%

-far along in benchmarking – seeing region around us has higher benefits and costs...WI rises to the top

-WHIO – have worked with it fairly significantly...and some initial disease prevalence reports and gaps in care analysis to look for 2016 opportunities for plan design changes and VB opportunities using the current structure. No cost info is a limitation

-also exploring the fact that exchange rates are lower than ours

-Rx – market check comparing the deal we are getting from Navitus to others. Also looking at clinical programs. Focus is on net costs and value being delivered.

-Excise tax exposure in 2018 given current structure.

KS: very positive work with Navitus

State Budget (ETF: updates)

-RW: emphasized in Dec that this would be extremely aggressive

GIB 3/25 Presentation Outline (Segal: status)

-will also address what is advisable for 2016 vs. 2017

-see revised scope letter (page 3)

-DM: risk managed by the different plans (using WHIO)

-HDHP: improvements to structure, benchmarking, potential ties to wellness/dm

-ACA

*self-insurance – what should be expected with that approach, what the statewide network would look like vs. a regional approach; self-funded vs.

-structure and content of the WHIO database and how that compares to best practices – build to support statewide and market bases vs. what ETF needs

Segal: would probably pay 2-3x with another vendor

? Could we use leverage at WHIO to make it what we need OR supplement WHIO with data we need OR get data to ETF only OR Optum interface vs. WHIO



-real #s on WHIO subscription rates – LE follow up with Jo
BK: also noted accessibl

Health Plan Survey (ETF/Segal: status/results) LE: will send our survey and review Jen's email

Non-Disclosure Agreement (ETF: status)

WHIO (ETF: Bott/Flick email r/t WHAIC) – overall WHIO approach is statewide – plan by plan are getting into issues

Dental RFP (ETF: status, 2/19 release date)

2016 Negotiation process (ETF: 2/12 “kick-off” meeting) – Kirsten is up to speed to Adden Gender Assignment (ETF) – helped another state develop benefits and service they would cover for gender reassignment – would cover procedures that were medically necessary for gender reassignment, but not cosmetic...mandated coverage in a few states and a few other public plans. Segal Will reach out to Maryland to see how they handle. Found it was cheaper and easier. ? could also lay out criteria for switch (psycho therapy)

-WEA Trust plan? PPO, UB

Future Discussion:

Wellness program (ETF will send background for 2/19 weekly check-in meeting)

Disease Management Survey (ETF will send background for 2/19 check-in meeting)

2/5/15 Segal/ETF

Ken, Rick, Richard, Kirsten, Gina

Bill, Mary

2/16 doesn't work for Navitus

2/26 may need to reschedule

Send budget in brief

Standing Agenda item(s):

--Segal contacts (Segal: note contacts with health plans, vendors, etc)

State Budget (ETF: released 2/3, key ETF provisions, value based purchasing initiative)

-\$25m savings and opt out

-budget allocation

Dental RFP (ETF: status -- revised release date of 2/19)

-Gina is going to review Cost Tool to make sure all codes are cover

Dental Fiscal Estimate (ETF/Segal: status, process, timeline)

Health Plan Survey (ETF/Segal: status, follow up required)

-Agenda item for 2/12

-Follow up survey? Yes...have discussed a bit internally, don't yet know what those areas will be...first survey will inform where we need to drill down.

WHIO (Segal: status, early observations)

-has run some disease prevalence issues; early focus is to see what opportunities are in WHIO

-schedule a meeting just to discuss findings? Target date?

2016 Negotiation process (ETF: target date for “kick-off” meeting to discuss submissions, timeline, Segal points of contact, etc). Ken, Richard, Kirsten – next Thursday or Friday.