

Welcome

Your Partner in Health.

Our mission is to be a cost-effective resource for assisting Wisconsin counties, local units of government and school districts.



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At the WCA Group Health Trust, it is our mission to be a cost-effective resource for assisting Wisconsin counties, local units of government and school districts in fulfilling their employee healthcare insurance obligations in a fiscally responsible manner.

The focus of the WCA Group Health Trust has been to provide employee benefit programs that meet the unique needs of these groups. This founding principle continues to guide us today and remains at the core of everything we do. Working together, we are your partner in health.

Kim Hurtz, Aegis Corporation

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The WCA Group Health Trust provides:

- Medical benefit plans
- Health reimbursement accounts (HRAs)
- Self-funded health program
- Prescription drug programs
- Dental plans
- Vision plans
- Wellness programs
- Network access to participating preferred provider organizations (PPOs)

www.wcaght.org

Your Partner in Health.

The WCA Group Health Trust was created when county officials joined together to create an employee benefit program that would meet the unique needs of local governments.



About the WCA Group Health Trust

The WCA Group Health Trust was established in 1991 when a concerned group of Wisconsin county officials joined together to create an employee benefit program that would meet the unique needs of local governments. Today, their founding principles still remain at the core of the WCA Group Health Trust. They include:

- Offering financial security by participation in a trust.
- Providing adaptability and flexibility by custom designing employee benefit programs.
- Providing options for cost savings, including managed care services, access to preferred provider organizations (PPOs) and other healthcare networks.
- Offering stability in healthcare programs.
- Providing availability to healthcare utilization data.
- Offering comprehensive wellness programs.

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One of the things that make the WCA Group Health Trust unique is that it is governed by officials from participating units of government. With the WCA Group Health Trust, the decision makers are the consumers and the direct involvement of these officials makes the WCA Group Health Trust more responsive to local healthcare needs.

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Benefits Coverage

The WCA Group Health Trust has the ability to design plans to meet the specific needs of an individual entity by matching their current benefit levels. Our flexible administrative services allow our plan designs to vary from the traditional indemnity programs to preferred provider organization-based plans to the latest point-of-service plan designs.

We will help you strategize to develop a plan that fits your goals and objectives. We will then analyze your claims experience to determine where your claim dollars are being spent and offer possible solutions for cost savings, as well as monitor your results.

The WCA Group Health Trust will help you strategize to develop a plan that fits your group's goals and objectives.

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Our reputation for quality service, plan-design innovations and flexibility are unsurpassed in the industry. We understand the collective bargaining and budgeting environment in which you exist and pride ourselves on working together and gaining the trust of both management and unions.

The WCA Group Health Trust also keeps our health plans current by closely following market trends of the health insurance industry.

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Prescription Administration

Our prescription drug program offers you comprehensive, affordable and flexible pharmacy benefit management capabilities to complement and enhance your current healthcare benefits. The dedicated client team works closely with you to:

- Align customized pharmacy management strategies and solutions to our members' unique needs.
- Provide cost effective, quality, and safety objectives through comprehensive clinical, financial and benefit administration issues.
- Communicate and provide personalized customer service to your members.

We believe new approaches to controlling prescription plan costs will be the key to staying ahead in today's complicated healthcare environment. Our prescription drug program specializes in employer's controlling these costs and we work closely with you to ensure that you reach your goals.

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In today's complicated healthcare environment, our prescription drug program aligns customized pharmacy management strategies and solutions to our members' unique needs, while seeking out new approaches to control prescription plan costs.

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The WCA Group Health Trust offers quick and secure access to online reports to help you manage your health benefit program.

Claims Administration & Access

The WCA Group Health Trust's full-service claims administrator is flexible, efficient and innovative. This includes personalized claims services and effective claims cost management.

The administrator's claim payment system allows them to process custom-plan designs online. Your plan design options are not restricted by claims-processing limitations and they customize their software applications so your claims are processed quickly and efficiently based on your specific plan benefits.

In addition, they offer a "customer first" approach that replaces the traditional department structure employed by most of our competitors. The dedicated client team will provide you and your benefit program with timely, personal service that is hard to find in today's industry.

There are a broad range of online reports available to help you manage your benefit plan costs. You will have access to your reports that are available on the administrator's secure, password-protected extranet site. These reports will provide you with valuable information about your plan's claims cost, benefit utilization, PPO network savings and special claims cost savings.

Specialized Reports

The WCA Group Health Trust offers our clients a broad range of online reports to help you manage your health benefit program. The reports are available on a secure, password protected extranet site and available at any time to our group contacts.

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This information includes:

- Eligibility census and eligibility
- Monthly paid claims (medical and prescription)
- Large claimant summary
- Network savings
- Top procedures
- Top providers

For compliance with the Protected Health Information (PHI), as defined by the Health Insurance Portability and Accountability Act (HIPAA), we do not include any individual insured's information. All information is summarized in a format eliminating and not identifying any individual insured's name.

The information you receive in the reports identifies and provides you with the pertinent analysis to assist in negotiating and managing your claims to keep up with medical trends and of your group's utilization.