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In The Matter Of:

*PUBLIC EMPLOYEES' BENEFITS PROGRAM BOARD
TRANSCRIPT OF PROCEEDINGS*

June 11, 2021

*Capitol Reporters
628 E. John St # 3
Carson City, Nevada 89706
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1 PUBLIC EMPLOYEES' BENEFITS PROGRAM BOARD
2 TRANSCRIPT OF PROCEEDINGS
3 ZOOM/TELEPHONIC MEETING NOTICE AND AGENDA
4 FRIDAY, JUNE 11, 2021
5 CARSON CITY AND LAS VEGAS, NEVADA
6
7

8 The Board: LAURA FREED - Chair
9 LINDA FOX - Vice Chair
10 DON BAILEY- Member
11 MARSHA URBAN - Member
12 APRIL CAUGHRON - Member
13 TOM VERDUCCI - Member
14 JENNIFER KRUPP - Member
15 TIM LINDLEY - Member
16 MICHELLE KELLEY Member
17 BETSEY AIELLO, Member
18
19 For the Board: PETER KEEGAN
20 Deputy Attorney General
21
22 For Staff: LAURA RICH
23 Executive Officer
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Executive Assistant
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1 FRIDAY, JUNE 11, 2021, CARSON CITY, NEVADA

2 -oOo-

3 THE COURT: Well, I see we are live now. Good
4 morning everybody. It is 8:30 in the morning, and we will
5 call to order the meeting of the Public Employees' Benefits
6 Board for June 11th.

7 All right. Item One, roll call.

8 MS. LUNZ: Laura Freed?

9 CHAIRWOMAN FREED: Here.

10 MS. LUNZ: Linda Fox?

11 VICE CHAIR FOX: Here.

12 MS. LUNZ: Betsey Aiello?

13 MEMBER AIELLO: Present.

14 MS. LUNZ: Don Bailey?

15 MEMBER BAILEY: Here.

16 MS. LUNZ: April Caughron?

17 MEMBER CAUGHRON: Here.

18 MS. LUNZ: Michelle Kelley?

19 MEMBER KELLEY: Here.

20 MS. LUNZ: Jennifer Krupp? On mute but I see
21 you.

22 MEMBER KRUPP: I'm present. Mute was not working
23 for a second. Sorry.

24 MS. LUNZ: Tim Lindley?
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1 MEMBER LINDLEY: I am here.

2 MS. LUNZ: Tom Verducci?

3 MEMBER VERDUCCI: I am here.

4 MS. LUNZ: Marsha Urban? And I do not see Marsha
5 at the moment.

6 We do have a quorum.

7 CHAIRWOMAN FREED: All right. Thank you very
8 much. Welcome, everybody.

9 I would like to extend a welcome to our new
10 deputy attorney general, Mr. Keegan. Thanks for joining us
11 and we look forward to working with you. And I'm going to
12 call on you on Agenda Item Number Three anyway.

13 So with that we'll move to Agenda Item Two,
14 public comment.

15 MR. MARTIN: For those who have joined for public
16 comment, your name or the last four digits of your phone
17 number will be announced and you may now make your comments.
18 Due to time considerations each caller will be limited to
19 three minutes.

20 And, Caller Brooke, you may now unmute and make
21 your comment.

22 MS. MALAFF: Thank you. My name is Brooke Malaff
23 for the record.

24 And I need to call your attention to certain
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1 issues that I recently discovered in some of the ancillary
2 insurance coverage. First, a little bit of history. In the
3 fall of 2014 I presented to the PEBP Board about opening the
4 plan to be able to cover gender-affirming surgeries for
5 transgender employees and that was granted and the PEBP plan
6 has been covering gender-affirming procedures since July 1st,
7 2015.

8 So you can imagine my surprise when I was
9 reviewing the material for the Aflac Group Hospital Indemnity
10 Plan that specifically has an exclusion in it that this plan
11 does not cover services related to sex or gender change which
12 is, runs counter to the fact that you're already covering
13 those types of surgeries within your health plan but then
14 you're denying any additional coverage in case something goes
15 wrong in the indemnity plan.

16 Further, this is in violation of NRS 613.330
17 because this essentially targets just transgender people for
18 no reasons, no discernible reasons and affects only
19 transgender people in the lack of coverage for those, you
20 know, for any of those kind of issues. So you have a huge
21 liability issue that the plan is -- is guilty of right there
22 on its face unless you are able to get a hold of the
23 insurance provider Aflac and have them remove that exclusion
24 immediately from the plan.

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1 So I would like to be able to see that done with
2 all possible haste and have everybody in the plan notified of
3 its removal so that we can be able to put this behind us and
4 Nevada can continue to be an encompassing equal opportunity
5 employer in all of its compensation, its plans and its hiring
6 of gender diverse people. So thank you.

7 CHAIRWOMAN FREED: Thank you.

8 MR. MARTIN: Caller with the last four digits
9 8853, please spell your name for the record. Press start
10 six.

11 MR. UNGER: Doug Unger, D-o-u-g U-n-g-e-r,
12 president UNLV Chapter and Southern Nevada Government Affairs
13 Representative, Nevada Faculty Alliance and UNLV Employee
14 Benefits Advisory Committee.

15 With deep respect and sincere appreciation for
16 the PEBP Board and its members who served in such good faith
17 we nevertheless must state that this past year's budgeting
18 and plan design process has been distressing and
19 dissolutioning resulting in severe cuts to PEBP benefits
20 ostensibly justified by the COVID-19 economic downturn.

21 The major portion of these cuts were not restored
22 by the 81st Legislature despite 586,000,000 more than
23 anticipated in state revenues and 2.7 billion in American
24 Rescue Plan funds.

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1 Clearly, the powers that be in Nevada have acted
2 as though we do not deserve recovery, not the thousands of
3 faculty and staff at our colleges and universities, not tens
4 of thousands of other state employees, including the staff of
5 PEBP. No matter that so many of us answered the call of the
6 pandemic emergency to work time and a half and more in short
7 staffed departments and offices to keep our state running and
8 to deliver quality education to our students through
9 unimaginable difficulties, our reward now appears to be
10 severe and unnecessary cuts to health insurance and benefits
11 that add even more stress to us and to our families.

12 We hope you agree that this is not right and that
13 budget restorations should be a top priority of the PEBP
14 Board.

15 Agenda Item Number Five you will hear today
16 includes a report on American Rescue Plan funds. Policies
17 guiding how these funds will be distributed and by what means
18 have changed since the Board packet was written.

19 The Governor's Office is soliciting applications
20 from state agencies for our funds allocations requesting or
21 applying is a PEBP Board and executive officer
22 responsibility. We ask the Board to apply for restoration of
23 the PEBP budget by at least 25 to 30,000,000 from American
24 Rescue Plan funds. These funds could be transferred back to
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1 the PEBP budget from the general fund and used first to lower
2 out-of-pocket maximums for FY23 plan designs to relieve the
3 sickest and most vulnerable and then to restore long-term
4 disability and life insurance benefits.

5 We ask you to do everything possible to restore
6 the PEBP budget from American Rescue Plan funds and to take
7 that action or at least visit today. Thank you.

8 MR. MARTIN: Caller Kent Ervin, you may now
9 unmute and slowly state and spell your name for the record
10 and make your comment.

11 MR. ERVIN: Hello. This is Kent Ervin, K-e-n-t
12 E-r-v-i-n for the Nevada Faculty Alliance. Good morning,
13 Executive Officer Rich, Chair Freed, and committee members.

14 We appreciate the decisions to cut health care
15 benefits for state workers due to the pandemic induced budget
16 crisis have been very difficult for the PEBP Board members
17 and staff and that the input of the PEBP Board on plan design
18 division was not always accepted.

19 Regardless, at this juncture, just as the
20 pandemic is subsiding and the economy is coming back in full
21 force state employees are facing cuts to benefits and higher
22 premiums compared with the pre pandemic FY2020 plan,
23 including the elimination of long-term disability income
24 benefits, an essential safety net.

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1 We also appreciate that the legislature restored
2 the Medicare retiree HRA contributions and gave a one-month
3 premium holiday. However, those decisions were made before
4 treasury guidance was received by the state on how the state
5 can spend its 2.7 billion, with a B, in our American Rescue
6 Plans, ARP funds.

7 According to section one of SB461 we estimate
8 that 400,000,000 to 600,000,000 or more in ARP funds will be
9 transferred to the state general fund for addressing budget
10 shortfalls which is one of the strategic -- one of the sub
11 and strategic priorities in the Governor's Every Nevadan
12 Recovery framework.

13 The cuts to the PEBP budget were caused by
14 pandemic related shortfalls and need to be addressed
15 according to the strategic goal with ARP funds. The state
16 should now use ARP funds to fully restore PEBP benefits and
17 premiums to pre pandemic FY2020 levels, including restoring
18 life insurance and long-term disability starting at FY22 and
19 fully restoring deductibles, out-of-pocket maximums, HSA
20 contributions, HMO, EPO co-pays and zero percent co-insurance
21 and the premiums to FY2020 levels for FY2023. The total
22 estimated cost is 25,000,000 to 30,000,000, depending on use
23 of excess reserves.

24 Under the discussion of ARP funding and Action
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1 Item Five we respectfully request Chair Freed and the PEBP
2 Board to direct the Executive Director Rich to proactively
3 seek full restoration of benefits through the Governor's
4 Finance Office and Interim Finance Committee, the process
5 provided by SB461. This should not be left up to legislators
6 to do it on their own without a formal request and backup
7 information from the agency.

8 Since our inquiry to executive director was not
9 answered we have to ask here in public comment whether that
10 has already happened or not. Thank you.

11 MR. MARTIN: Caller Marlene Lockard, please
12 slowly state and spell your name for the record, and you may
13 make your comment.

14 MS. LOCKARD: Yes, thank you. My name is Marlene
15 Lockard, L-o-c-k-a-r-d, representing the Retired Public
16 Employees of Nevada.

17 With the legislative session behind us I would
18 like to take this opportunity to thank the PEBP Board members
19 who supported the advocates, excuse me, alternative options
20 for the required recommended budget cuts for the 81st
21 session.

22 I am very pleased to report that through a
23 collective effort by advocates representing various
24 participant groups in the PEBP system we were able to
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1 restore, as you all know, some of those cuts. In addition
2 RPEN was pleased to support AB48 and help defeat AB337 which
3 we felt was an intrusion on this Board's authority.

4 While there is much discussion regarding the
5 expected influx of federal funds to be used to restore the
6 balance of the cuts I want to put on the record my profound
7 disappointment that yet again there will be quote excess
8 reserves available that could have prevented these cuts and
9 thus the pain and anxiety many of our participants are
10 experiencing.

11 Those of you who were engaged in the hearing
12 process regarding PEBP and its budget know that I repeatedly
13 called out the proper name for excess reserves to be called
14 what it actually is, profits, plain and simple.

15 Every year since 2011 in the onset of multi
16 million dollar reserves began accumulating I have heard
17 Cassandra's cry that the sky will fall in and that these
18 profits could not be used because they were just an estimate
19 only to see -- only to see year end with a more than what was
20 projected.

21 Many of us have called for an audit of why an
22 actuary with a multi million dollar contract with PEBP could
23 miss the mark so substantially year after year, and we will
24 continue to do so and the Board should address this issue as
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1 well.

2 I believe that enough legislators heard our story
3 and are beginning to understand the history of some of PEBP's
4 past, spontaneous policy decisions that have had a
5 detrimental impact on its participants.

6 Finally, I feel compelled to put this on the
7 record. I find it unconscionable for the Chair of this Board
8 to refuse to meet or speak with an advocate who is a
9 respected and knowledgeable professional representing a major
10 portion of PEBP members. Hiding from the facts doesn't make
11 them go away.

12 Finally, I want to express RPEN's appreciation to
13 Don Bailey for his many years of service and his dedication
14 and hard work on this Board. We appreciate you, Don. Thank
15 you very much.

16 MR. MARTIN: Caller Kevin Ranft, please slowly
17 state and spell your name for the record and make your
18 comment.

19 MR. RANFT: Good morning. Can you hear me?

20 MR. MARTIN: Yes, we can hear you.

21 MR. RANFT: Thank you. Good morning respective
22 Chair and committee members. My name is Kevin Ranft. Last
23 name spelling R-a-n as in Nancy f as in frank t as in Tom.
24 With AFSCME Local 4041 representing state employees.

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1 In regards to this upcoming plan year effective
2 July 1st, 2021, as stated through this year, we are extremely
3 disappointed. We do appreciate a few restorations that were
4 made. However, we feel the Board could have notified the
5 legislature that it's 100 percent feasible to delay open
6 enrollment or delay the plan year to take an opportunity to
7 fully take advantage of the ARP funds or other funds that
8 have been found. This clearly would have been an opportunity
9 to restore lost benefits and the cost that had been placed on
10 state employees and their families.

11 We ask that -- excuse me. We ask that this Board
12 continue to seek ARP funds and restore all lost benefits and
13 lower premiums, including but limiting the HMO deductible and
14 the 20 percent co-insurance along with the other cuts. This
15 was done previously to plan year 2023 so the employees do not
16 have to continue to carry the weight, especially with
17 reserved funds being un-existing in the current budget.

18 These cuts on the upcoming plan year could have
19 been prevented. We need to seriously look at all options,
20 notify the appropriate personnel within the legislature to
21 ensure that things could have been delayed. Again, I cannot
22 stress this enough. State employees did not deserve during
23 the pandemic to have this extra burden placed on them and
24 their families.

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1 I do have comments about advocates. It's time
2 that we all get together to ensure that things like this
3 never happen again. Thank you for your time.

4 MR. MARTIN: Caller with the last four digits
5 7338, please slowly state and spell your name for the record.
6 Please press star six to unmute.

7 MS. MALONEY: Good morning, Chair Freed, members
8 of the Board. Priscilla Maloney with the AFSCME Retiree.
9 That's P-r-i-s-c-i-l-l-a M-a-l-o-n-e-y. The nice thing about
10 going later in the cue for public comment is that I get to
11 echo all of those fine and well thought out comments of those
12 that went before me.

13 So I will say ditto to everything that the Nevada
14 Faculty Alliance has put on the record already this morning,
15 to Mr. Ranft from the AFSCME Retirees to Ms. Lockard,
16 Dr. Ervin, Dr. Unger.

17 But I would like to make two specific points on
18 behalf of the AFSCME Retirees. One is that we completely
19 echo Dr. Ervin's point on SB461 subsection (1) subsection
20 (2)(g)(1) is not aspirational. It is now in statute and the
21 disbursements, and I'm reading from the statute or the
22 proposed or the proposed language which will be in statute
23 for purposes of this bill. Disbursements for any other
24 purpose authorized for the use of the money received from the
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1 coronavirus state and local fiscal recovery funds, so they
2 are referring obviously to the American Rescue Plan Act
3 funds, and the very first category listed in the list below
4 this statement, this global statement is increasing access to
5 health care and community based services.

6 So when we get to Agenda Item Five on this
7 morning's docket I would like to suggest that this is not to
8 be a philosophical or existential discussion. PEBP has a
9 mandate now from the Governor's Office which is to submit a
10 plan on how they intend -- the program intends to restore the
11 benefits cut due to the coronavirus pandemic.

12 The second point I would like to make briefly is
13 I do echo strongly Ms. Lockard's and Dr. Ervin's comments. I
14 would like to suggest to the PEBP Board that when this
15 organization during legislative session takes a position with
16 a fiscal note on a bill there is an absolute duty of the
17 agency to meet with the proponents of the bill and discuss
18 the fiscal notes.

19 I need not say more other than this is a
20 completely unacceptable situation that there is a fiscal note
21 on a bill from PEBP. PEBP needs to meet with the sponsor of
22 the bill, full stop. Thank you for your time.

23 MR. MARTIN: Caller Nathan, please slowly state
24 and spell your name for the record and you may make your
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1 comment. Caller Nathan, please unmute. Slowly state and
2 spell your name for the record and make your comment.

3 Madam Chair, the public comment has concluded.

4 CHAIRWOMAN FREED: Okay. Thank you.

5 With that we'll move to Agenda Item Three, PEBP
6 Board disclosures for applicable Board meeting agenda items.
7 Mr. Keegan?

8 MR. KEEGAN: Thank you, Madam Chair. This is
9 Deputy Attorney General Peter Keegan for the record.

10 This is the agenda item that allows me to make
11 disclosure on behalf of the Nevada Public Employees' Benefit
12 Program Board members who are eligible for PEBP benefits. Of
13 course, most of the items on today's agenda have an indirect
14 effect on these benefits but in particular it appears that
15 Items 5 and 7 deal specifically with benefits and of the
16 future allocation thereof.

17 Pursuant to NRS 281A.420, on behalf of the Board
18 members who are eligible for PEBP benefits I'm offering this
19 disclosure that they will be voting on those items that may
20 affect the benefits to them and/or their family members. I
21 know that the law does not preclude them from voting on these
22 items. And I would like to invite any member that has an
23 additional ethics disclosure to please make it now. Thank
24 you.

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1 CHAIRWOMAN FREED: All right. Thank you.

2 Agenda Item Four, consent agenda. Usually this
3 is a much bigger and longer agenda item than it is today.
4 All we have is 4.1, approval of minutes from three past
5 meetings, March 11th, March 25th and April 7th.

6 Board members, I hope you've had a chance to read
7 all of these minutes and offer any corrections on the record
8 if you choose to. Hearing none, I will accept a motion to
9 approve the minutes from March 11th, March 25th and
10 April 7th, 2021 Board meetings.

11 VICE CHAIR FOX: Linda Fox for the record. I
12 will make that motion.

13 CHAIRWOMAN FREED: Thank you. Do I have a
14 second?

15 MEMBER LINDLEY: Tim Lindley. Second.

16 CHAIRWOMAN FREED: Okay, thanks.

17 It's been moved and seconded. All in favor say
18 aye. Any opposed say no.

19 (The vote was unanimously in favor of the
20 motion.)

21 CHAIRWOMAN FREED: Okay. Motion carries. Thank
22 you.

23 All right. Moving to Agenda Item Five, Executive
24 Officer Report.

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1 MS. RICH: Good morning. Laura Rich for the
2 record.

3 I do want to start out before I get into this
4 report, I do want to start out with just making the
5 announcement that it is Ms. Urban and Mr. Bailey's last Board
6 meeting, and I do want to thank both of them for everything
7 that they have brought to the PEBP Board and their expertise
8 and their input and advocacy, especially Mr. Bailey. I think
9 you've been with PEBP now for going on eight or nine years.
10 So I think he's done his time at PEBP, not to mention all of
11 the time that he put in as a state employee prior to that.

12 So with that, I mean, you know, Don, do you want
13 to take a minute to just say some parting words, especially,
14 you know, after you've been here that long.

15 MEMBER BAILEY: Can you hear me now?

16 MS. RICH: We can hear you.

17 MEMBER BAILEY: Oh, okay. Laura applauded when
18 you made the announcement it was my last meeting. I hope
19 that's not a signal.

20 CHAIRWOMAN FREED: No, of course not. I'm just
21 happy for you, Mr. Bailey. But I agree with the executive
22 officer, do you have any words of wisdom for the rest of the
23 Board.

24 MEMBER BAILEY: I'm only tormenting you, okay.
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1 That's my job. What I can give -- what I would like to say
2 is I've had a wonderful time in a little over eight years now
3 and it's a tough Board to be on. You make a right move and
4 the left people don't like it. You make a left move the
5 right people don't like it. It's just a tough Board. But I
6 would say to the new members and there's almost all new
7 members.

8 Tom, I want to give a special atta boy because
9 Tom has stuck with me most time.

10 But to the new Board members which is a great
11 deal. Most of the Board is new now. And I would say lean on
12 your president of your Board. Lean on your executive leader,
13 and most of all lean on your Board staff. You got a
14 wonderful staff working for you. All of these people have
15 been around, most of them a long time, and they have the
16 background and they know what's gone on since, oh, eight or
17 nine, ten, 15 years. So lean on them because they are the
18 experts in their jobs, and I leaned on them many many times
19 and they have always come through for me.

20 When you don't -- if you have a question on that
21 agenda and you don't really understand it, call one of the
22 staff and get some input to it because that will clear the
23 air. And when you sit on the Board and you make a decision,
24 vote yes or no, you're going to feel very comfortable in

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1 doing so.

2 But, again, I will miss the Board. I know that
3 seems hard to believe, but I'm not going to miss reading 300
4 and 400 pages. That I won't miss. But if you don't read
5 them I have a standard in my thinking is I read everything
6 twice and then by the time -- and I tab everything. And by
7 the time I'm done and I attend a meeting in real life, which
8 I hope you can all get back to some day. Virtual is fine,
9 but it's not the personality and I like the personalities.

10 You have got some great Board members now. And
11 so to all, get the information and do what your heart tells
12 you because that's really the key to voting. Do what your
13 heart tells you.

14 I have represented RPEN a long time, and I'm
15 proud of that, and they have backed me. I was sort of like
16 the only retiree for a while and I don't know who is a
17 retiree anymore, but I've enjoyed it.

18 And, Ms. Freed, will you please tell the Governor
19 thank you for giving me this opportunity. Thank you. That's
20 it.

21 Laura Rich, you're back.

22 MS. RICH: Thank you so much, Tom, and we are
23 definitely going to miss you. We hope to see you back at
24 public comment maybe. You are always welcome at our Board
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1 meetings. And --

2 MEMBER BAILEY: I may hold you to that one.

3 MS. RICH: Marsha, do you have anything that you
4 want to add? I know you've been around. You took over a
5 previous member's position, and you've kind of carried out
6 that term, and this is your last Board meeting. So any
7 parting words?

8 MEMBER URBAN: Thank goodness it's over. I took
9 the year that was probably the worst one possible and that
10 taught me to go elsewhere, to do other things, but it has
11 been an education, and I think every one of the Board members
12 work really hard to represent state employees and to make
13 their health care a priority.

14 MS. RICH: Well, thank you so much for your
15 service. And I know you have -- you have endured the worst
16 year possible. I agree. So thank you and we'll see you at
17 public comment as well.

18 Okay. So to get back to Agenda Item Number Five,
19 which is the Executive Officer Report, I will say that there
20 are some updates to this report. When it was written we
21 actually had to cancel the Board meeting originally on
22 May 27th and reschedule it due to a variety of reasons, and
23 so some of these reports are somewhat outdated. So I'm going
24 to give some verbal updates to them.

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1 So budget closing, the budget was heard on
2 May 7th at the joint meeting of the Senate Committee on
3 Finance and Assembly Committee on Ways and Means. The PEBP
4 budget was largely approved based on what was proposed in the
5 Governor's recommended budget, but there were some
6 suggestions that were approved later by the committee as
7 well.

8 So as you heard in public comment, the
9 restoration of the Medicare Exchange, HRA contribution from
10 the original cuts brought it back to 11. We are now funded
11 back to the \$13 that we were at before the pandemic. This
12 cost is going to -- it's about 3.3 million and it will be
13 funded through differential cash or excess cash.

14 The -- also there was a one-month premium holiday
15 that was approved. So there's a premium holiday in plan year
16 '22 and a premium holiday in plan year '23. The approximate
17 cost of this is about \$6,000,000 a year and will be funded
18 through a general fund appropriation. So this was actually
19 funded by the legislature.

20 This premium holiday, what it is is anyone who --
21 any member who pays a premium will receive a one-month during
22 the plan year that they won't have to pay their insurance
23 premiums. This is -- this -- the premium, some people may
24 end up getting a premium holiday of \$40. Others may

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1 depending on what tier and what plan they are in they will
2 get a much larger subsidy or contribution. So it just is --
3 it is not necessarily a flat cost across the board or a flat
4 contribution across the board. It just depends on where you
5 are at in your -- in -- where the member is at in the tier
6 and the plan they have chosen.

7 So I think this is going to -- to relieve some of
8 the, you know, the pressure of increased costs. It's not
9 obviously ideal because we did have, as you heard through
10 public comment, really significant cuts during the pandemic
11 but this is helpful. Members will receive, you know, one
12 month where they get free insurance, so.

13 None of these changes to the budget had any
14 adverse affects on open enrollment, and I think that's --
15 that's -- that was the intent of the legislature. What can
16 we do that will not mess up open enrollment because when you
17 have significant plan changes you have to provide an open
18 enrollment period for folks to be able to change plans or to
19 be able to make decisions based on those plan -- plan design
20 changes.

21 And so when the legislature was looking into how
22 can we help PEBP this is really what they were looking at is
23 how can we -- how can we do it without messing up open
24 enrollment and without, you know, throwing a wrench in
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1 things.

2 So even though that there is -- there was no
3 impact to open enrollment there's still going to be
4 communication. We will be communicating to those Medicare
5 recipients that Medicare HRA contributions are going back to
6 \$13 per year of service. So we'll be developing
7 communication and making sure that, you know, all of our --
8 our guides and things like that, any of our communication
9 within PEBP is updated to reflect those changes.

10 The one thing that we as a Board need to discuss
11 is that the legislature opted not to specify which month that
12 premium holiday should occur and really instead has left the
13 decision up to PEBP. So PEBP staff have already reached out
14 to our largest pay centers because in order to -- to
15 accommodate the -- the premium holiday we have to make sure
16 that those pay centers can accommodate the premium holiday.
17 So we wanted to make sure you know what does it take. What
18 does it take for specifically central payroll and NSHE and
19 PERS. Those are the three largest pay centers that we have
20 and automated systems that we work with within PEBP. What --
21 how could they accommodate this and what -- what kind of lead
22 time did they need to accommodate this.

23 It turns out that they are able to -- to really
24 just do this fairly easily. There are some changes that need
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1 to be done and it needs to be made in the files that go over,
2 but to address those data changes would be pretty simple.

3 So what we need to discuss is what month makes
4 the most sense to provide this -- this premium holiday. PEBP
5 will be transitioning to a new eligibility and enrollment
6 system vendor on January 1st, 2022. So I think it's very
7 important that this happens before we transition, just
8 because of, you know, that introduces an element of risk if
9 we wait until after that time. So I think in order to avoid
10 any potential issues we really need to focus on doing it for
11 that.

12 So the recommendation here is to ensure that the
13 planning and coordination with vendors and pay centers, as
14 well as to avoid any potential system issues PEBP recommends
15 that the holiday occur in either August, September or October
16 of 2021 and then again for consistency that same month in
17 2022 and -- and, you know, for us to be able to plan ahead as
18 well.

19 So I will -- I'm going to stop right there and
20 just address some of these questions, and I don't know if we
21 want to just discuss and take a vote on this before we move
22 on to the next section.

23 CHAIRWOMAN FREED: This is Laura Freed. Yeah, I
24 think we do.

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1 I'll start the questions off though. So the
2 premium holiday is approximately \$6,000,000 in the general
3 fund. I want to get clear on what we mean by premium
4 holiday. Back before the great recession when PEBP used to
5 do premium holidays to eat through reserves, premium holiday
6 was defined as a holiday both for participants paying their
7 share as well as a subsidy holiday, if you will, when for
8 that month state subsidies were collected and brought into
9 the AGIS, REGI accounts. Is that what we're talking about
10 here or is this pure or is this \$6,000,000 purely the
11 participants don't pay their share but PEBP continues to
12 collect for that month?

13 MS. RICH: For the record Laura Rich.

14 That's actually, that's a good question. This is
15 purely for participants. The employer portion will still be
16 paid by the agencies. This is purely for participants. This
17 is something that was intended to relieve some of the
18 pressure off of participants who have been affected by these.

19 Now, that being said, there is a -- a question
20 that came up recently, and it may be something that the Board
21 needs to decide as well. So the intent here is to provide
22 employees and retirees relief. There's a small number of
23 COBRA participants.

24 With COBRA participants they have their
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1 terminated employees. They have for whatever reason decided
2 to continue to stay on the plan and they are paying
3 102 percent of the total premium. So it's not just the
4 employee premium it is the total premium. This is employee
5 and employer premium and plus that two percent. There was no
6 discussion nor was it even considered, you know, through the
7 legislative process as to whether or not this applies to
8 COBRA participants.

9 This is probably something that we as a Board
10 need to discuss because does it make sense to apply this to
11 or was the intent to apply this to COBRA participants? You
12 know, you can make the argument that COBRA participants
13 know -- they do participate in PEBP. However, they are not
14 employees nor are they retirees nor do they -- nor do they
15 receive any of the benefits, right, or are eligible for any
16 of the benefits through the state.

17 So there's -- it's kind of a fine line. I have
18 asked the our LCB fiscal analyst and he also concurred that
19 this is probably a Board decision as to what makes sense. My
20 opinion is that the legislative intent was to help out our
21 employees and retirees. Therefore, I don't know if this
22 applies to COBRA, but this is probably something that we need
23 to discuss as a group.

24 MEMBER URBAN: Marsha Urban for the record.
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1 When you say participant, if someone has
2 dependents when you have that holiday, they have their
3 monthly premium is set in one lump would they then separate
4 that out and just give the participant or would it also
5 include their dependents?

6 MS. RICH: For the record Laura Rich.

7 No. So it is -- yes, it is 100 percent based on
8 tier. So if they are in the employee plus family tier they
9 get and they are paying whatever that -- that premium is that
10 month they are not paying it. Does that make sense?

11 MEMBER URBAN: Yes, it does. Marsha Urban for
12 the record. Thank you.

13 MEMBER KRUPP: Jennifer Krupp for the record.

14 I had a quick question regarding the COBRA
15 population. You said it was a small population but how small
16 is that population?

17 MS. RICH: I think last time that we checked --
18 Laura Rich for the record.

19 Last time we checked it was somewhere around
20 80ish so it's a small -- it's a small number.

21 MEMBER KRUPP: My other thing -- Jennifer Krupp
22 for the record.

23 That I want to point out too that it might be
24 helpful for Board members to take into consideration if under
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1 COBRA it's subsidized 100 percent through September 30th so
2 when making decision we may want to factor that in in terms
3 of what month to offer the premium holiday, if we would like
4 to continue subsidizing COBRA beneficiary, so just
5 information to put on the record.

6 MS. RICH: And that is also just for
7 clarification for PEBP, there are some -- there are some
8 folks that have qualified for this benefit through -- through
9 the stimulus funding. However, the only way to qualify for
10 it is you have had to -- you've had to -- you've had to have
11 lost your job through either a layoff or a termination. If
12 you quit then they are not eligible for that. And so not
13 everyone who has COBRA is eligible for this benefit.

14 MEMBER KRUPP: Jennifer Krupp for the record.
15 Thank you for that additional information.

16 MEMBER VERDUCCI: Tom Verducci for the record.

17 I wanted to thank Marsha and Don for their
18 service also. Don, I'm going to especially miss you. You've
19 been a solid, practical voice, and you've listened very well
20 to the needs of the participants. I'm going to truly miss
21 not having you at the meetings.

22 But I did want to ask a question on the
23 restoration of the HRA contributions from 11 to \$13. And my
24 question is to Laura, with the -- I believe there was a
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1 policy change and there was changes to the NRS that the
2 excess reserve differential cash could only come from one
3 time payments and not recurring. So is this a recurring type
4 of expense or is it considered one time and what is the
5 rationale in terms of making it a recurring if indeed it is.

6 MS. RICH: So Laura Rich for the record.

7 I believe, Mr. Verducci, what you are referring
8 to was, is Board policy, not in the NRS. We had discussed
9 this as part of the Board policies that there's a desire to
10 not fund ongoing costs with reserves, excess reserves.

11 When it comes to the legislature they can do what
12 they please and so they -- this was a decision that was made
13 by the legislature during our budget process and during our
14 budget hearing and they -- the decision was made to -- to
15 fund that benefit through the -- by absorbing it through
16 excess cash.

17 MEMBER VERDUCCI: Okay. Because I do recall we
18 were corrected in the past by the legislature for doing this.
19 So I just wanted to point that out to make sure that we're
20 not continuing to do anything incorrectly.

21 MEMBER KELLEY: Michelle Kelley for the record,
22 Chair Freed.

23 CHAIRWOMAN FREED: Sure. Go ahead, please.

24 MEMBER KELLEY: Executive Officer Rich, I just
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1 have a question regarding the COBRA piece as well. So I'm
2 just wondering, so the \$6,000,000 that was funded through
3 general funds, from your question I'm assuming, perhaps
4 incorrectly, that they did not fund this premium holiday for
5 COBRA recipients; is that correct?

6 MS. RICH: Laura Rich for the record.

7 They had asked for a cost estimate and when we
8 gave them the cost estimate we did not include COBRA in that.
9 However, because it's such a small number of, either such a
10 small number of COBRA participants it's only a couple of
11 hundred thousand dollars.

12 That being said, I'm looking at the COBRA
13 premiums right now and they can go, you know, depending on if
14 you're on an employee plus family tier, you're above, you
15 know, almost at \$2,200 on, you know, in certain plans.

16 So there's -- there's definitely a -- you're
17 funding -- if we choose to fund, cover the COBRA participants
18 we are funding them at much much higher levels than we would
19 be for the typical state employee and retiree.

20 MEMBER KELLEY: Okay. Just a follow-up then on
21 what Member Krupp had asked, so, or had reminded us. Can you
22 talk a little bit about the COBRA subsidy that's covered for
23 people who have lost their job because of the pandemic. How
24 long has that been in place because obviously that's a
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1 significant benefit.

2 MS. RICH: Sure. Laura Rich for the record.

3 So this was part of the federal stimulus that
4 basically if you have lost your job involuntarily, so this
5 does not cover like I said if you voluntarily leave your job
6 you do not qualify for this. But if you have involuntarily
7 lost your job either through position elimination or a layoff
8 or even if you have been involuntarily terminated it is -- it
9 allows for 100 percent -- a 100 percent subsidy coverage
10 through COBRA from April 1st to, all the way through
11 September.

12 We are still working it out through the
13 Governor's Finance Office because the way the language is
14 written the way that you receive a -- a -- the reimbursement
15 from the federal government is through a Medicare tax credit.

16 Well, PEBP does not -- there's -- there's a --
17 there's a complexity there because how does PEBP eventually
18 if we are absorbing this cost, how does PEBP get that money
19 back through, you know, because we are not -- we're not
20 obviously paying the Medicare tax credit. On top of that
21 it's even more complex because we have different pay centers.

22 So for example, you know, someone, we worked it
23 out to a degree with central payroll where we can move money
24 around and likely through work programs, through IFC will

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1 get, PEBP will be reimbursed for those costs. But we have
2 several people in the university system who have used this
3 benefit, and we're still trying to work out a plan for that.
4 So there's definitely some operational challenges to getting
5 that reimbursement. However, PEBP has made the -- the --
6 made it easy on participants. We're just, we're giving them
7 that benefit today as of April 1st and figuring it out, you
8 know, behind the scenes through the different agencies on how
9 we're going to get reimbursed. Eventually, you know, we hope
10 that happens at some point but we're still working through
11 the -- the challenges on that.

12 MEMBER KELLEY: So this was a six-month period,
13 sorry, April 1, 2021 through September 30th, 2021, okay.
14 Okay.

15 And is there -- is there any -- so clearly you've
16 already differentiated between people who lost their jobs
17 because of the pandemic with the state and those who have
18 just moved on for whatever reason.

19 So, Chair Freed, I wonder, I know there was also
20 some legislation passed because it was in the newspaper about
21 job restorations and the legislature passed or provided
22 money, right, to rehire many positions. So I'm wondering are
23 -- are the people we're talking about who are receiving this
24 subsidy because they lost their job in the pandemic are they

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1 likely to get their jobs back in some way, shape or form,
2 last out, first back in or whatever the rule is?

3 CHAIRWOMAN FREED: Laura Freed for the record.

4 Yes, they are. I mean, you know, I can tell you
5 that, right, the use of, now I'm blanking whether it was CRF
6 or ARP. I want to say it was CRF money, sorry, Coronavirus
7 Relief Fund to restore positions slated for elimination to
8 get them -- to get agencies through the upcoming biennium was
9 approved in the budget process.

10 And I think, you know, GFO and LCB staff work
11 very very hard to identify layoffs across the bureaucracy and
12 undue them wherever they can. So the answer -- short answer
13 to your question is yes.

14 MEMBER KELLEY: Okay. Thank you. And I think
15 with that that, you know, I feel comfortable that the
16 legislative -- the legislative vote specifically targeted
17 this premium holiday to employees and retirees because of the
18 pay cuts and there was no -- not much restoration. So I
19 think I'm comfortable and it sounds like the pandemic people
20 have been handled separately, you know, people who lost their
21 jobs because of that. So, you know, obviously, you know, we
22 have to consider those. So but I feel comfortable excluding
23 the COBRA population from a motion.

24 CHAIRWOMAN FREED: Thank you.
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1 MEMBER LINDLEY: Tim Lindley here.

2 I just want to share a couple of comments and
3 things that I learned throughout the legislative process. Of
4 course, I'm a newer Board member learning how the budgeting
5 process works and legislative session. And I just want to
6 say at the beginning I was met with a, I think it was
7 12 percent cuts, and I've learned throughout the process that
8 that changed. It went down to six percent cuts in Governor's
9 recommendation, and over time it landed in to the legislature
10 who changed it again.

11 And so one thing I've learned is expect a lot of
12 change because what we do may not always be set in stone.
13 For example, the Medicare Exchange, HRA contribution went
14 from 11 to 13, and so it's been enlightening, and I
15 appreciate it.

16 And that ties into Don Bailey and Marsha Urban.
17 Sorry to see you go. I've learned a lot in my short time and
18 I've learned a lot from you, Marsha. I don't want to leave
19 you out of the loop, but I appreciate you educating me on how
20 you became a Board member and your position and how you were
21 not a member of a bargaining unit I believe. Correct me if
22 I'm wrong, of course, Ms. Urban, but I've learned and I
23 appreciate your insights and education.

24 The next thing I learned was the one-month
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1 premium holiday. I was listening to some public comment.
2 They were mad about how we didn't extend the open enrollment
3 period or we didn't extend the plan year. And the one-month
4 premium holiday came into effect because I remember watching
5 the legislative session regarding that and they knew it was
6 such an arduous task whereas there may have been
7 miscommunication in the public comment. They said, oh, it's
8 an easy switch, and watching the process it's not really an
9 easy switch to extend open enrollment to do all of these
10 things. So I just wanted to kind of address those things.

11 The questions asked earlier before me I just
12 thought they were fantastic because I didn't think about
13 those. And I would side with Michelle Kelley that I would
14 motion -- I would support the motion to relieve active and
15 retirees for the premium holiday.

16 But I appreciate the education I've learned for
17 this whole legislative session. I've learned quite a bit and
18 everything changes. You know, it leaves our desk. It goes
19 to the Governor's desk and it goes to the legislative
20 session, and nothing is set in stone until the legislature
21 decides. So that wraps up my comments. I appreciate it.
22 Thank you very much.

23 Oh, the premium holiday, I would probably lean
24 towards November or December, Christmastime. That's just my
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1 opinion. But, of course, that goes before the January 1st,
2 2022 implementation of the new eligibility and enrollment
3 system, but I just wanted to put that out there. Thank you.

4 CHAIRWOMAN FREED: Okay. Thank you.

5 Okay. So, Board members, as you chime in on the
6 action for the premium holiday to cover COBRA participants or
7 not, would you please give me your sense for what month as
8 Mr. Lindley has. For myself I would just say not August
9 because I would like to be well clear of the fiscal year end
10 closing process with the controller's office and they don't
11 actually stop processing transactions in the system until
12 August 31st. So I would say probably just -- just because I
13 know that PEBP has some work to do to close out every fiscal
14 year I would say not August, but that's my feeling.

15 MEMBER VERDUCCI: Tom Verducci for the record.

16 I like November the best. If we wait until
17 December there is issues with vacations, holidays and it
18 pushes the last minute, and I do think November would be the
19 appropriate month in my opinion.

20 MS. AIELLO: This is Betsey.

21 And I would just like to ask PEBP because they
22 suggested August which I can understand Laura saying let's
23 not do that, September and October and they avoided November.
24 So I don't know if there's some issues logistically that make
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1 November harder for them and we should look at September or
2 October as the benefits the same but for ease of operations.

3 MS. RICH: So this is Laura Rich.

4 You're right, Betsey. November is pushing that
5 timeline. Originally I did have November in here, and then
6 my staff said wait. Wait. Wait. Don't do that just in
7 case. And so there's just, we want to reduce the amount of
8 risk.

9 Let's say something goes wrong and we have to
10 make adjustments and, you know, in payroll adjustments and
11 things like that. I mean, we hope nothing goes wrong but
12 let's say something does go wrong and we have to make
13 adjustments, then we're making adjustments during a time when
14 we're transitioning to a new vendor. And so that is why I --
15 I'm thinking maybe October at the latest, so it sounds like
16 maybe September or October.

17 MEMBER AIELLO: And this is Betsey.

18 With that philosophy, Tim, maybe you could have
19 it for October for your Thanksgiving holiday purchases.

20 MEMBER LINDLEY: Just in time for Black Friday,
21 right. I like October too, Nevada's Nevada Family Day.

22 MEMBER VERDUCCI: Tom Verducci.

23 I'm good with October, and I do think we need to
24 lean on the PEBP staff for what's going to work best for the
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1 department as well.

2 MEMBER URBAN: Marsha Urban for the record.

3 I agree with that. I want it closer to the
4 holiday so that you have money to buy Christmas gifts and me,
5 maybe giving me one. But if it works better for the staff in
6 October then that's the closest we can go to the shopping
7 time then that works for me.

8 CHAIRWOMAN FREED: Well, okay, ladies and
9 gentlemen, I feel a motion coming on. Does -- would someone
10 like to make a motion regarding the month of the premium
11 holiday for 2021 and 2022, as well as whether to cover our
12 COBRA participants or not. Excuse me.

13 MEMBER KELLEY: Michelle Kelley. Oh, sorry.

14 MEMBER URBAN: No, go ahead.

15 CHAIRWOMAN FREED: Go ahead, Michelle.

16 MEMBER KELLEY: Michelle Kelley here for the
17 record.

18 I'll make a motion that we direct PEBP staff to
19 extend the premium holiday to participants in the month of
20 October and that as part of this process that the premium
21 holiday be directed at active employees and retirees and
22 exclude the COBRA population.

23 CHAIRWOMAN FREED: Understood.

24 MEMBER URBAN: Marsha Urban for the record. I
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1 second.

2 CHAIRWOMAN FREED: All right, great. Thank you.

3 MEMBER URBAN: Sorry, Laura.

4 CHAIRWOMAN FREED: It's been moved and seconded
5 to offer the premium holiday in October 2021 and October 2022
6 and to make the premium holiday available to actives and
7 retirees. All those in favor signify by saying aye or waving
8 your hand in your little box. Any opposed say nay.

9 MEMBER KRUPP: Nay.

10 (The vote was in favor of the motion.)

11 MEMBER KRUPP: And the reason for that is while I
12 agree with keeping the premium holiday in October I would
13 like to see the subsidies expanded to our COBRA participants.

14 CHAIRWOMAN FREED: Okay. Thank you, Member
15 Krupp. I appreciate that.

16 All right. Motion carries.

17 Okay. You knew where I was going. Take it away.

18 MS. RICH: So Laura Rich for the record.

19 The next section is on the American Rescue Plan
20 Act. There's -- what I have included in the report is
21 outdated. So I'm just really going to talk about the
22 updates. So Senate Bill 461 was introduced during the final
23 days of the legislative session by the Senate Committee on
24 Finance, and what that bill does is it sets requirements for
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1 how the state will spend the 2.7 billion dollar that was
2 received through the American Rescue Plan.

3 So specifically the legislation addresses the
4 state's loss of revenue by allowing for a transfer of the
5 ARPA funds back to -- to fill the state's general fund. The
6 Governor's Finance Office is tasked with allocating these
7 funds and coordinating with state agencies to do this and
8 then receiving final approval through the Interim Finance
9 Committee.

10 So there's still a lot of questions up in the
11 air. This is not as simple as, hey, we're getting
12 2.7 billion dollars and we're going to be able to restore
13 budgets. That is the hope and intent, but there are a lot of
14 requirements to this funding and it's just not an open-ended
15 backfilling of budgets.

16 There's -- I don't have a lot of information on
17 this quite yet. There is still guidance that is trickling
18 in. I have spoken to the Governor's Finance Office and was
19 able to get, you know, some -- some information and some
20 direction. But they are still sifting through the guidance
21 and are still continuing to receive guidance consistently.
22 And so there's a lot of questions as to what falls under
23 this. What can we restore. What can we not restore.

24 But what is important to highlight is that
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1 there's this conception, especially through public comment
2 that I just heard that this money can be used to simply
3 replenish agency budgets to match pre-pandemic budgets, and
4 that's just not the case. It does not work that way. PEBP
5 can't just ask for \$36,000,000 because that's what our budget
6 was cut by and then we reinstate benefits with those
7 \$36,000,000.

8 There are -- the funds are restricted and they
9 must meet a plethora of criteria. That is why the state has
10 set up a system where agencies are allowed to submit proposed
11 funding ideas. And as I understand it that list is already
12 very long. I've heard that it's over 1,000 requests and
13 that's even after I think a couple of weeks ago. So it's
14 probably increased since then.

15 So GFO staff have to go through one by one and
16 verify if these requests even meet the criteria to, you know,
17 to be able to use this funding. So the second piece of this
18 is that the legislation requires states to identify lost
19 revenue that was specifically tied to the pandemic during the
20 calendar year. So we all know that we don't operate on a
21 calendar year. We operate on a fiscal year. So the state
22 isn't able to say, well, we cut budgets by X amount of
23 dollars so now we're going to return that to each agency
24 dollar for dollar.

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1 Not only do they have to rework the methodology
2 from the state fiscal year now to a calendar year but they
3 also have to go through and identify specific pandemic
4 related losses. So it may not match the total losses of, you
5 know, of the, what the budgets were reduced by.

6 So one of the challenges to identifying
7 opportunity for these funds is that it is one time funding,
8 it really is. It's one time funding. If we receive these
9 funds it is for essentially one year in fiscal year '23 or
10 plan year '23 and it won't cover ongoing costs to reinstate
11 of benefits.

12 So if we -- if we are able to identify a benefit
13 that we want to reinstate and that is then approved through
14 that process then we're reinstating it for a year and that is
15 it. We have no assurance that that benefit then can continue
16 in FY24 and '25.

17 So we -- we don't know what the budget directives
18 are going to look like next biennium but considering that
19 there was legislation passed that gives education first dibs
20 on any new revenue. I don't know if we can assume that
21 agencies are going to return to pre pandemic budget levels.
22 So that's going to be a challenge, identifying basically what
23 benefits fall under this -- you know, what benefits would
24 meet the criteria because, again, it has to be tied

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1 100 percent to the pandemic.

2 And I'm -- I don't have the details on this. The
3 GFO is obviously the, they are probably much more subject
4 matter experts than I am on this. So I don't know exactly
5 what the criteria is but I do know that you have to tie the
6 benefit or the way that you spend that money directly to the
7 pandemic.

8 So if we don't know in FY24 or '25 the next
9 biennium if we are going to be able to return to pre pandemic
10 budgets, which I am not confident we will be, any benefits
11 that get reinstated through the use of this fund will be
12 earned or use of this funding, we either have to accept the
13 fact that it's for one year only or be confident that we're
14 going to be able to fund it through, you know, through our
15 own established budget at the current budget levels.

16 Now, there was some discussion about excess cash,
17 differential cash. Yes, there is a significant bucket of
18 excess that -- that PEBP has accumulated over the last year
19 or through, you know, the last year and a half because of
20 COVID.

21 I will say that we had cautioned against touching
22 this because of the expected return of high utilization and
23 above and beyond the norm we are already seeing this. I have
24 in the last two months we have received, we call them EMR
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1 reports and basically they -- they highlight the experience
2 month by month.

3 The loss ratios are very significant. They are
4 coming in. There's a lot of utilization. Costs have gone
5 up. If this continues we will use those reserves as
6 expected. Will we use all I don't know. Will we use all and
7 need more, maybe. We don't know this yet, but in the last
8 two months we are seeing that trend. If it continues we're
9 not going to have those -- that excess.

10 So, again, it's -- we have to be careful and we
11 have to be fiscally responsible with this. We have -- we do
12 have safety nets in our program to cover catastrophic cost.
13 But then again, remember, we do have to backfill those. So
14 eventually if we dip into those it comes back to haunt us the
15 next year in terms of rate increases and things like that.

16 So these are all things that we need to take into
17 consideration when thinking about and when planning for
18 the -- you know, how we would like to or request to receive
19 any of this, you know, potential funding. I hope to be able
20 to bring some ideas and opportunities to the Board at the
21 July Board meeting or at a minimum more information.

22 But in the meantime PEBP is going to work with
23 the Governor's Finance Office and the Governor's Office to
24 work through some of this and be able to identify the most
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1 appropriate ways that PEBP can leverage any of these funds
2 considering the challenges and all of the criteria we have.

3 So I know that's not the greatest news but, you
4 know, it's -- and it's -- there's a lot that is still
5 unanswered. But that's -- that's what we know so far. So I
6 will stop there for questions.

7 MEMBER AIELLO: Laura, may or, Chair Freed, may I
8 ask Laura a question. This is Betsey.

9 CHAIRWOMAN FREED: Go ahead.

10 MEMBER AIELLO: Laura, you had said a lot of
11 agencies have submitted requests for the money. I would
12 wonder if PEBP had submitted requests and if it was -- for me
13 I have a big hole in my heart for the disability plan. I
14 think it's been in PEBP for years and so I don't know. I was
15 wondering if we could add to the request list or if there was
16 a reason why we wouldn't do it, with the understanding it may
17 be only for one year but one year is one year. I don't know.

18 MEMBER URBAN: Marsha Urban for the record.

19 Since I'm not going to be here when you make this
20 decision, I want to really push the fact that long-term
21 disability is essential for our state employees. And I
22 agree, I want that -- I mean, even if like Betsey said it's
23 something that's really important, even if we can only do it
24 for one more year I think that's essential.

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1 This Board did not want to cut long-term
2 disability. When we met, suggestions for cuts, that was not
3 cut and there's a reason for that. It is essential for
4 workers.

5 MS. RICH: So Laura Rich for the record.

6 This is actually one of the -- the topics that I
7 brought up in, you know, these conversations and it's -- it
8 ties back to the benefit has to meet the criteria from the
9 guidance received from the feds.

10 And while I don't know for sure and we didn't,
11 you know, get into obviously these were high level
12 discussions, you know, we didn't get into the details about
13 it, it could be that LTD is not considered a health -- a
14 health benefit or access to health -- health care. So it
15 could be that LTD does not meet the requirements, and I'm not
16 saying that it does not. I don't know the answer to that.

17 I'm just saying that there's a lot of complexity
18 in this and there's definitely the criteria is -- is still
19 it's -- there's a lot of criteria that it needs to meet and
20 this is what GFO is working through. So that will definitely
21 be something that is discussed, that is researched along with
22 a lot of other ideas.

23 But, again, we are in very early discussions on
24 this, and so I'm hoping to be able to bring back some ideas
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1 and have that discussion in further detail in July. I had
2 this conversation two days ago. So there's -- you know,
3 there's definitely -- there's a lot of detail we don't know
4 at this point.

5 MEMBER URBAN: Thanks, Tim. I just want to make
6 two points. One, it can be drawn directly to COVID for
7 long-term disability because, one, we do not know the lasting
8 side effects of COVID. They are already talking about it
9 impacting heart and brain. And, number two, the stress
10 related in the last year between mental health and physical
11 health because, of course, stress is a huge impact on our --
12 on our physical health. Those two things are COVID related
13 and both of them can, in fact, have someone have heart
14 attacks, whatever so that they have to go into disability.
15 So I think it's a direct line to COVID.

16 MEMBER LINDLEY: Tim Lindley here.

17 Remembering about a year ago we had to prioritize
18 types of cuts we had to do to benefits. Would this be
19 something the Board should prioritize? You know, we want to
20 restore this first and kind of prioritize what we want to
21 restore? Is that something the Board should do to help guide
22 the PEBP staff in their discussions with the GFO?

23 MS. RICH: For the record Laura Rich.

24 I'm trying to determine that because there's
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1 like -- like Ms. Urban just said, she believes that it can be
2 tied directly to the pandemic. Unfortunately PEBP doesn't
3 get to decide what is -- what meets that criteria and what
4 does not.

5 The GFO, the Governor's Office, they are going
6 through and sifting out. They are the ones who have the
7 guidance. They are the ones who are not only figuring out
8 what meets the criteria but there's a lot of request, and so
9 they are also trying to prioritize, and there is in Senate
10 Bill 461 there is, you know, priority levels that are lined
11 out.

12 And so, again, there's not a lot of detail. I'm
13 going to try to work through some of this stuff between now
14 and our July Board meeting so that I can come back to the
15 Board with some, you know, ideas or even decisions, you know,
16 something that we can, you know, try to leverage these,
17 whatever is available to us.

18 A lot of it is going to depend on, you know,
19 conversations with the Governor's Office. What is it --
20 where does PEBP fall in priority on the list, right. So
21 there's a lot of unknown right now and it's difficult to say
22 the Board is going to get to do, you know, A, B or C when
23 there's so many moving parts to this.

24 **MEMBER VERDUCCI:** Tom Verducci for the record.
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1 So when the pandemic hit we were quick to
2 implement cuts and here we are. We're very -- we're going
3 very slow to restore them and it would seem to me that we
4 would have a request that should be submitted to GFO, IFC and
5 restore the benefit cuts, submit a plan, get it in order and
6 try to keep the process moving.

7 We are asked to reduce \$32,000,000. We had it
8 immediately on our agenda. There were calls going on
9 throughout the night with Aon. And I just think that state
10 employees deserve better and they have done a lot to get us
11 through the pandemic, and I think we have a responsibility to
12 do everything that we can to restore the budget's pre
13 pandemic levels. So that's just my comment.

14 MEMBER CAUGHRON: April Caughron for the record.

15 Director Rich, I just, I want to make sure I
16 understand this correctly. We already are looking at where
17 agencies have submitted approximately 1,000 requests. What
18 is our timeline here in order to get our requests in the
19 pipe? You know, it's a little bit concerning that we're
20 already 1,000 in and we're just now talking about this. Do
21 you -- can you give any information on that?

22 MS. RICH: Laura Rich for the record.

23 So while there are many many requests, I imagine
24 a lot of those requests are kind of line item requests. I
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1 think PEBP is a much bigger discussion. That's -- you know,
2 PEBP will submit something, will likely submit something.
3 But I think a lot of this is going to be a much bigger
4 discussion with the Governor's Office and Governor's Finance
5 Office. We're not submitting line item requests, right.
6 Everything that we would submit is a, you know, we really
7 need to, it's a bigger request and a bigger discussion item
8 that is going to need to include state leadership.

9 So that being said we do have time because these
10 funds can be used through I believe it was 2025. However, we
11 cannot make any decisions for -- usually our November Board
12 meeting is when we make decisions for our following plan
13 year, and so we have time between now and November to kind of
14 come up with a plan, and so that's my idea of, you know,
15 we're not doing anything for this plan year anyway.

16 And so we're -- I'm trying to ramp up to that
17 November Board meeting so we have something in place by that
18 November Board meeting so that we can make plan design --
19 design decisions at that November Board meeting for the
20 following plan year.

21 MEMBER CAUGHRON: Okay. Thank you.

22 MEMBER LINDLEY: Tim Lindley for the record.

23 So we discussed restoring benefits. Mr.

24 Verducci, I appreciate your comments. I think the Board as a
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1 consensus agreed upon and if I remember the agenda they were
2 the first two line items on the agenda.

3 Director Rich, if you can clarify, one was for
4 prescription and something else. I don't remember off the
5 top of my head.

6 MS. RICH: So we changed some -- there were some
7 cost saving solutions that we had. And, yes, we did narrow
8 the network for pharmacy, and so we made some changes there.
9 We also made some changes to the way that we negotiate our
10 out-of-network claims.

11 MEMBER LINDLEY: Yes. So what I'm kind of
12 leaning towards is kind of what we did in the November Board
13 meeting last year is prioritizing which benefits we
14 definitely want to restore. Of course, tying with
15 Ms. Urban's comments, making LTD a priority, so when you go
16 to GFO, you say, hey, the Board really wants LTD back. This
17 is their logic and reasoning, and we can kind of push for it,
18 more than just restoring some ancillary benefits that or cuts
19 such as the, I think it was 140 percent and then the pharmacy
20 benefits or the pharmacy program that we did, and we can kind
21 of guide you so then you know and then you can present that
22 to us in the hopefully next Board meeting, hey, these are the
23 restorations.

24 The one thing that kind of shocked me in the
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1 public comment was someone asked you what have you done. And
2 I'm like, well, the Board -- the director -- the executive
3 director serves at the behest of the Board, and I don't want
4 the executive director saying give us all of this money for
5 these things without the Board chiming in saying, hey, you
6 asked for money for something that we didn't ask for or
7 something that we didn't think was a priority.

8 So I would -- I'm leaning towards the Board kind
9 of giving you a plan for prioritizing what benefits we
10 definitely want to restore, and maybe that might also include
11 restoring the life insurance benefit, you know, going from
12 12,500 or 15 -- and doubling it back to where it was pre
13 pandemic.

14 MS. RICH: So Laura Rich for the record.

15 Mr. Lindley, yes, and that was the problem with
16 making a recommendation today is it would be, it's a blind
17 recommendation. My hope is to come in July with better
18 recommendations that I know meet the criteria that we -- you
19 know, that are not just -- we're not just spewing information
20 or request that may or may not meet the criteria of these --
21 of the funding.

22 And so my hope is to come back in July to be able
23 to kind of set the stage and then we can work up to that
24 November Board meeting to where in November we have, you

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1 know, clear decisions to make.

2 MEMBER AIELLO: May I ask a question please.

3 This is Betsey Aiello.

4 So, Laura, you're saying that nothing would be
5 restored until the next plan year, even some of the things
6 that don't actually affect the health plan levels or the open
7 enrollment such as the disability or life insurance, that
8 wouldn't be something that could be brought back mid year if
9 the monies were available.

10 MS. RICH: Laura Rich for the record.

11 That's -- you know, that's a good question. It's
12 iffy. So a lot of the -- sometimes changing benefits,
13 especially basic benefits there's -- the rule is if there is
14 significant change, well, what is significant, right? And so
15 potentially let's say that I had declined insurance and I had
16 declined insurance because the LTD benefit was no longer
17 available. And I thought, well, it's not worth it. I'll get
18 my own insurance elsewhere through -- through my spouse or
19 whatever it is and then we reinstate LTD mid year. Well, I
20 can come back and say, hey, if I would have known I would
21 have elected to have, you know, to have insurance through
22 PEBP.

23 And so that is where what is significant and what
24 would entice people to or encourage people to want to change
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1 their plan. And so with those significant changes you have
2 to have an open enrollment period. And I would rather err on
3 the side of caution. And if we do have any significant
4 changes in the middle of the year then have an open
5 enrollment period and allow those changes.

6 Obviously when you do that it's -- it's a lot of
7 work. It changes a lot of assumptions. You know, what do
8 you do with accumulators if people change plans. I mean it's
9 a huge ordeal. And so that's the problem with it is that
10 even small little changes could have a large effect on the
11 program, and so that is why I would side on the, just
12 cautionary because of, you know, what constitutes as a
13 significant change.

14 MEMBER VERDUCCI: Tom Verducci.

15 CHAIRWOMAN FREED: Go ahead, Mr. Verducci.

16 MEMBER VERDUCCI: Thank you. So, you know,
17 there's a start. There's a middle and there's an end to
18 everything. So at some point COVID is not going to last
19 forever and let's say things start recovering. In the end I
20 don't see how we should short change employees on their
21 benefits where we have an opportunity to restore it.

22 We heard the words here significant budget
23 surplus and I don't see employees having a surplus. I think
24 a plan has got to be submitted. We need to get in line here,
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1 and I just don't see dragging our feet and being cautious
2 really being where we need to be right now. I think there's
3 got to be a plan put in place and perhaps get it on the
4 agenda as soon as possible to restore. I don't know the
5 order, if it's long-term care, out-of-pocket, life insurance,
6 but I just think there's more that we can be doing here. I
7 just really want to have my voice to be heard on this subject
8 is my comment there.

9 MEMBER KELLEY: Michelle Kelley. Go ahead, Chair
10 Freed. Sorry.

11 CHAIRWOMAN FREED: Oh, thank you.

12 Boy, do I hear the frustration and I understand
13 it so much because here's all of this money, like hundreds of
14 millions of dollars just laying out there waiting for states
15 to take it and, you know, as part of our state and local
16 recovery funds, and but there's a couple of process things
17 and I want to share my perspective as a department director.

18 Number one, the GFO and the Interim Finance
19 Committee are still working through leftover Coronavirus
20 Relief Funds. If you were to look in the state accounting
21 system there are hundreds of millions of dollars in CRF's
22 monies still not spent, and some of those are going to be up
23 for consideration at the June Interim Finance Committee.

24 There's a whole bunch of CRF work programs from various
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1 agencies. So some of that money will get out of the door.

2 But what those of us that are kind of watching
3 this money very carefully for our, you know, own department's
4 reasons, you know, are noticing is that we seem to be having
5 a little bit of trouble spending our CFR money. And the CFR
6 money goes away on December 31st on this calendar year.

7 So what I suspect will happen and understand I
8 haven't had a discussion with the budget director or anything
9 like that. But what I suspect will happen is that they will
10 turn their attention to, okay, now that the session is over
11 how do we get the CFR money out the door, and are we going to
12 go back to agencies and say, okay, we're taking more requests
13 for CFR money or are they going to put it all in the UI trust
14 fund or what. I mean, I don't know, and that's a discussion
15 I intend to have. Those are questions I would like to pose
16 because that CARES Act money is, has a much narrower
17 eligibility set of criteria. It's just for, you know,
18 un-budgeted expenses that agencies incur due to the pandemic
19 basically.

20 So that's -- I think we won't -- as much as I
21 would like to see more guidance come out from the budget
22 folks about what expenses they consider eligible for ARP
23 reimbursement, I don't know that we're going to see it
24 immediately. So that's -- that's one thing I would say.
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1 The other thing I would say is that, you know,
2 folks have asked if PEBP staff has gone into that ARP portal
3 and put requests in, and it was kind of an interesting thing
4 to happen. Once the every Nevadan and recovery portal was
5 live it kind of went around state bureaucracy as a rumor, oh,
6 it's live. Go. Go. Go. And a lot of us, my own department
7 included, put in requests that we thought were, met that
8 nexus of what we, you know, the treasury's interim final
9 rule.

10 And then, of course, last week or the week before
11 additional frequently asked questions document came out from
12 treasury and we all poured over that too. So that's why
13 there probably a 1,000 requests in that ARP portal because
14 between nonprofits and community people putting in their
15 request and state agencies putting in their request, there
16 was this kind of rush to -- to get anything and everything
17 under the sun. You know, we all try to be I think
18 conscientious about what might be eligible.

19 But we -- you know, there was that feeling of,
20 like, oh, well, first movers advantage is a real thing and it
21 may or it may not be, depending on, you know, how GFO and the
22 Governor's Office and I think Treasurer's Office is involved
23 in this too and legislative leadership.

24 So, you know, Mr. Lindley raises a good point.
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1 I -- I, you know, borderline I want to see restoration of
2 certain benefits for this group. But it's probably not wise
3 for the executive officer to just throw stuff in without
4 running it by the Board, that's the first thing.

5 And the second thing is I don't know how much of
6 benefit restoration is going to support the ARP relief goals
7 which is -- you know, it's, I'm going back through my -- it's
8 support public health expenditure, address negative economic
9 impacts caused by the public health emergency economic harms
10 to workers, household, small businesses, replace loss sector
11 revenue. That's an indirect thing that could help PEBP but I
12 think that's not -- you know, I think we all read that to
13 mean replenishing the general fund.

14 Premium pay for essential workers, that doesn't
15 really fit with PEBP. Invest in water, sewer and broadband
16 infrastructure, that doesn't really mesh with PEBP. So
17 there's this -- we all as department directors kind of took
18 our chances with stuff we thought would have a policy nexus
19 to what the feds want, but we don't know if the GFO and LCB
20 are really going to see it that way, and that's all I wanted
21 to say.

22 MEMBER VERDUCCI: Tom Verducci for the record.

23 As a follow-up I think what I would like to see
24 is the Chair submit a plan that we move forward with a, you
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1 know, plan to restore the cuts just so it moves along and it
2 doesn't just sit in limbo. We have a very large plan here.
3 We responded so quick to the budget cuts. I just think it
4 affects so many employees and I do think we need some
5 direction to get a plan going.

6 MEMBER KELLEY: Michelle Kelley here. Can I just
7 make a statement if you don't mind.

8 You know, Chair Freed, and, Executive Officer
9 Rich, I very much appreciate you level setting and trying to
10 tamper down I think everybody's expectations because I agree
11 with everything you said.

12 But on the other hand I am also concerned because
13 I know that you're, you know, Executive Officer Rich, you
14 come from a financial background where one plus one equals
15 two and that's always the case, right. You're our conduit to
16 the GFO. You know, you're the Board's conduit. And
17 therefore, I think of you as our cheerleader, if you will,
18 and I don't mean that to denigrate the position. You are so
19 important to us and our participants.

20 And so I -- what I would say is that I think
21 that, you know, my expectation would be that you would be
22 aggressively and creatively talking to the GFO about and
23 shoehorning our benefits into the rules because, you know,
24 the rules are general, and it's the creativity that's going

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1 to win the day here.

2 And I don't -- personally I don't think you have
3 to be creative to -- to get out the benefit reductions that
4 have happened, many of them, not all of them, to get them to
5 fit. I think in the end it's the GFO who decides if it fits
6 well enough, but we shouldn't be and I don't think you should
7 be making that decision. You should let them do it because I
8 just fear that there are so many expectations on this money
9 as you both talked about and I fear we'll get lost in the
10 rush.

11 And so I think from, you know, from the very
12 first conversations we need to be aggressively going after
13 this money and making the arguments about why it's so
14 important. And, you know, throughout the session I kept
15 hearing the legislature and the Governor for the last couple
16 of years say how important state employees are and yet we got
17 very little through the legislative session.

18 And so I would just beg you frankly to be out
19 there to be our participants champion, to be really
20 aggressive and let them decide if it fits. Let's just go
21 after what we think what we know our participants have asked
22 for. You know, I don't think we have to guess very much, but
23 we also have our priority list.

24 And so, you know, I just, I know it's difficult
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1 for you. You are kind of in the middle of the Board and the
2 Governor's Office. So I understand all of that. But I just
3 think that I, obviously I'm a quiet and aggressive person. I
4 get quite passionate so I apologize.

5 But I think that you need to be taking our
6 energy, you're the only one who can take our energy to the
7 Governor's Office and really be making the case. And I
8 appreciate you and your staff. I know that it's been a heck
9 of a session for you guys. And apparently because of the ARP
10 monies it's not going to stop. But, you know, we really need
11 that 120 percent because you're the only voice. And with
12 that I'll hand it back to the next person. Thank you.

13 MEMBER LINDLEY: Chair Freed, Tim Lindley for the
14 record.

15 I want to thank Michelle Kelley for her comments
16 and thank Director Rich for bringing this to the Board. Now
17 she knows kind of where the Board stands and she can make
18 those actions and bring that passion that Ms. Kelly
19 referenced versus just acting willie-nillie. I would have
20 hate for her to come to the Board and say, hey, this is what
21 I did. We would have maybe leaned a different direction but
22 now she knows the direction kind of we're leaning towards.
23 And as we get more information and more details we're not
24 walking into a snowstorm or a sandstorm and being blind.

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1 But thank you very much, Ms. Kelly. I appreciate
2 your comments.

3 MS. RICH: And Laura Rich for the record.

4 And, Ms. Kelly, I also appreciate your comments.
5 And I do recognize that, you know, as the executive officer I
6 am the voice. And so to -- you know, just to, you know, to
7 understand that I do recognize that, that is why instead of,
8 you know, here, let's just -- let's type something into the
9 system and we're one of -- one of 1,000 or 2,000 requests and
10 leave it at that.

11 That's actually, you know why the addition was
12 made to, you know, have some of these conversations with
13 those that are heavily, you know, that are overseeing this
14 process and just having, you know, having those conversations
15 and saying, hey, here's -- let's level set. Here's the
16 situation. We have a Board. They are going to want to weigh
17 in. Let's strategize so we can collectively work together
18 versus, you know, just here's our request and we go into this
19 big bucket and hopefully we hear something.

20 I'm trying to be a little bit more proactive than
21 that. But, again, it's early and so I wanted to provide the
22 Board with an update and level set those expectations because
23 I do know there's -- you know, there's this idea that it's
24 just easy. While we can just replenish our budget and

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1 everything will be fine. It's not that simple. So I did
2 want to make sure to level set there. But, yes, my plan is
3 to come back and, of course, I want to reinstate benefits.
4 This is something that I think, you know, it's our duty.
5 It's an obligation. If we can leverage these benefits or
6 this funding we need to use every single dollar that's
7 available to us.

8 But we also need to work with the Governor's
9 Office, the Governor's Finance Office. And just like we
10 think we're a priority so do 100 other agencies, and so we
11 need to make sure that, you know, we have those conversations
12 and that we can -- you know, we can make that argument and
13 that that argument is going to stick, you know, if this is
14 ever audited or, you know, just to make sure that, you know,
15 the funding that we're getting is actually appropriate.

16 So my plan is to come back at the next Board
17 meeting hopefully with more information, hopefully with more
18 ideas so that we can have a more robust conversation and be
19 able to, you know, really come up with a plan together
20 collectively.

21 MEMBER URBAN: Marsha Urban for the record.

22 MEMBER AIELLO: This is Betsey. May I say one
23 more thing.

24 And, Laura, I still have a concern that some
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1 things may go all the way to the next plan year. I
2 understand that some things are more risky than others. So
3 maybe making changes to actual plan tiers would change
4 people's mind, but I'm not sure the amount of people that
5 would have chosen not to enroll changed significantly by a
6 drop in life insurance or by a drop of disability insurance
7 from the plan.

8 And that if we're super cautious it may cause
9 issues for other people that are more significant but there
10 are some things that would maybe directly have made someone
11 choose this plan over this if there's changes to the plans
12 themselves. But I think we need to weigh some of those and
13 just -- I just wanted to put that out. I don't know if other
14 people feel that way but that's -- that's my thought that we
15 need to weigh what's significant might be a little bit.

16 MEMBER URBAN: Marsha Urban for the record.

17 I think that people need to be reminded that
18 state workers worked through this whole thing to keep this
19 state going and their health is important so they continue to
20 do that. And I don't know whether the -- the legislature
21 understands that, but we have been working through this.

22 And, I mean, I know I have been regularly on campus since
23 August and I worked through it and I have some health issues
24 that, you know, and I still went in and wore my mask and did

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1 everything, and I think that it's important for them to be
2 reminded that we kept the state going even in the terms of
3 during this turmoil.

4 CHAIRWOMAN FREED: Thank you. I so appreciate
5 that because you're absolutely right. The executive branch
6 just kept on rolling.

7 Board members, do you all need a break. Okay,
8 great. Let's take a -- well, let's come back at 10:30. It's
9 10:14 right now.

10 (Whereupon, a brief recess was taken.)

11 CHAIRWOMAN FREED: We are on Agenda Five, the
12 Executive Officer Report. I don't know if Board members want
13 to continue talking about the American Rescue Plan funds or
14 if you wanted to go into an open enrollment update.

15 MEMBER BAILEY: Madam Chair?

16 CHAIRWOMAN FREED: Yes, Mr. Bailey.

17 MEMBER BAILEY: I would just like to regress back
18 just a few minutes, if I could, before the break.

19 CHAIRWOMAN FREED: Okay.

20 MEMBER BAILEY: I know I'm on my last go around
21 here. But I would like to say to the Board who they serve,
22 they know who they serve. That's the active members,
23 retirees, our wonderful and very very important state
24 employees. I would like to see the Board consider through
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1 the president of the Board and the executive director and her
2 great staff that this Board consider something in a way of an
3 action for the July meeting.

4 CHAIRWOMAN FREED: Okay.

5 MEMBER BAILEY: I think you can all wait until
6 the end of the year, the middle of the year, whatever you
7 want to call it. These people are hurting now.

8 CHAIRWOMAN FREED: Okay.

9 MEMBER BAILEY: We in the very beginning, like
10 Tom pointed out, we made cuts very quickly, and I think we
11 did the right thing as a Board. We were trying to serve the
12 Governor's Office, the finance people and the situation this
13 country has been in over the pandemic. We need to address
14 this issue I say early on, not wait until the end of the
15 year.

16 CHAIRWOMAN FREED: Okay.

17 MEMBER BAILEY: You must get together, put your
18 heads together, come up with a plan, ask for the funding.
19 Whether you get it or not, number one, you don't even know
20 what funding you're going to ask for because that figure is
21 so unknown, and now they point out that there's 1,000 people
22 lined up or departments, agencies, whatever they call
23 themselves. After 30 years of service you would think I
24 would remember that answer.

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1 The point is you really need to get this figured
2 out, not sit on it. And I'm not lecturing this Board, I'm
3 really not. I'm just trying to give you my last opinion of
4 what I heard over the last 20 minutes in comments, wonderful
5 comments. The Board members I can see are right on top of
6 the subject. Their heart needs to be with the people we
7 serve, and the people we serve are the ones that are hurting
8 right now.

9 Long-term life, there's a lot of things that can
10 be put back if you had the money or I'll point it out that
11 you may have a reserve. Well, I go back to history. We had
12 a reserve. We got isolated and chopped up a little bit the
13 way we went about using the reserve. Tom can answer to that.
14 We did what we thought was right for the people we served and
15 that was our members, and I think we gave them some benefits
16 back that they still were using and that's important.

17 But the reserve issue now also has to go back to
18 the advisory committee from the legislature before we can
19 touch reserve funds. So you must keep that in mind. That
20 was taken away from us. We were a very dependent, maybe a
21 little too independent sometimes, but we no longer have that
22 luxury of being totally independent. We must address the
23 Governor's Office, the legislature.

24 But really I really really wish you consider
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1 doing something and not waiting. Jump on board. Ask for the
2 money. Whatever funds come through to the Governor's Office
3 and finance department will trickle down somewhere along the
4 line to make it. Laura, you may not get anything but we have
5 to be ready for that. So try to do something. I say the
6 Board should stand up and try to do something in the July
7 meeting. That's all. Thank you.

8 CHAIRWOMAN FREED: Thank you.

9 MEMBER VERDUCCI: Tom Verducci for the record.

10 I would very much agree with Don. Don, I'm sure
11 going to miss your logical voice on this Board and, you know,
12 I'm not trying to be a pain. I'm good with, you know, July.
13 It's just I would like to see it on the agenda. I just want
14 to make sure we have a plan that's submitted in place
15 requesting these ARP funds and we don't wait too long.

16 I think we should be getting a plan in place
17 right now and putting our request in just as soon as
18 possible, and I'm just not sure that we actually are on the
19 right direction, and we do have a plan that's mapped out.

20 CHAIRWOMAN FREED: Okay. You know, I think I'm
21 going to ask that this be agendized for July. And, you know,
22 I think off line the executive officer, and I will talk to
23 the budget director, and we're going to try to get some
24 policy direction from the Governor's Office about its

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1 priorities. And then see if we can come back with some
2 alternatives that -- that PEBP staff can submit into that ARP
3 portal with those thousand other requests.

4 But, you know, the executive officer is right.
5 It's not like your -- it's not wise to throw something into
6 the ARP portal like it's a lottery or something and wait and
7 hope to hear. I mean, you have to -- obviously you birddog
8 it a little bit as any director would, but she's a little bit
9 different than me in the sense that she's got a board that
10 hires and that hires her and she reports to.

11 So but, you know, I will commit to this Board. I
12 will agendize it for July, and we'll talk about what -- what
13 kind of alternatives we can implement in the current biennium
14 to provide a little bit of, excuse me, benefit add-backs, if
15 you will, and we'll, you know, consult the budget oracles for
16 their guidance on, you know, what is essentially the best
17 chance of getting approved by the people who make those
18 decisions which is unfortunately not us, so.

19 MEMBER URBAN: Marsha Urban for the record.

20 I want to get something clarified. I know you're
21 talking about ARP or, yes, funds.

22 CHAIRWOMAN FREED: Right.

23 MEMBER URBAN: Yeah, you were talking about the
24 funds that end in December.

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1 CHAIRWOMAN FREED: Yeah.

2 MEMBER URBAN: What are those funds?

3 CHAIRWOMAN FREED: Okay. So the Coronavirus
4 Relief Funds monies come from the CARES Act that was passed
5 really early in the pandemic last year, and those are the
6 ones that run out for states on December 31st. And the --
7 what is the -- American Rescue Plan Act or ARPA, depending on
8 who you ask. I think the executive officer was right. That
9 was passed in January of this year, is that right, okay. And
10 those funds are good I think -- I think, again, Ms. Rich is
11 right, until FY25 I think we have to spend those monies.

12 And so the -- yeah, CRF monies, the Coronavirus
13 Relief Monies have been doled out to the states whereas ARP
14 monies have not yet. And so we've got, you know, a couple of
15 hundred million dollars sitting in one of the state's budget
16 accounts, in our CRF budget account. And agencies, you know,
17 submit work program requests for that money, and then they
18 typically go to interim finance and then they get approved
19 and then the money goes out to the agency's budget.

20 MEMBER URBAN: Marsha Urban for the record.

21 Can we submit something for the coronavirus money
22 for long-term disability now and then in July set up that
23 plan? It's just that I'm -- this is my last meeting. This
24 is what I'm pushing, long-term disability.

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1 CHAIRWOMAN FREED: Okay.

2 MEMBER URBAN: You can see that. Is there any
3 way that we might be able to get some of the Corona money for
4 that to get it going, get it started so there's no lack. I
5 just -- it's just a big thing for me.

6 MS. RICH: Laura Rich for the record.

7 CRF funds from my understanding are only to
8 reimburse for specific pandemic related costs. So we tapped
9 into those for claims cost. We used some of that. We were
10 able to get some of the CRF funding to be reimbursed for
11 COVID claims, any kind -- you know, testing claims, any kind
12 of CARE claims that we had specifically for coronavirus. It
13 is not -- it could not be used from my understanding for
14 things like long-term disability.

15 CHAIRWOMAN FREED: I'm going to read from, this
16 is the U.S. Department of the Treasury website. The CARES
17 Act requires the payments from the Coronavirus Relief Fund
18 only be used to cover expenses that are, one, necessary
19 expenses incurred due to the public health emergency with
20 respect to COVID-19. Two, were not accounted for in the
21 budget most recently approved. That is the current
22 biennium's budget, and were incurred during a period
23 March 1st, 2020 to December 31st, 2021.

24 You know, I mean, we can ask, you know, hey, GFO,
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1 would you consider restoration of LTD, a -- an eligible use
2 of CRF particularly if, you know, what I sort of intimated
3 earlier is true, you know, that we're having a bit of trouble
4 getting the CRF monies out the door, and I'm happy to ask
5 that question. The worst they can say is no. I suspect
6 they, as Laura Rich said, they will say no, but I'm happy to
7 ask.

8 MEMBER URBAN: Marsha Urban for the record.

9 I would really like to see that, especially since
10 the wear and tear on all of the employees working during
11 COVID, I think that has affected our stress levels as well as
12 other things. So I think that it would be a valid ask. But,
13 again, I would just really like to see you approach them and
14 see if they would think so as well.

15 MEMBER KELLEY: It's Michelle Kelley here.

16 So I just I guess I'm coming at it from a
17 different way. I agree with everything Marsha said. But I
18 wonder, Chair Freed, earlier Executive Officer Rich had
19 indicated that the excess reserves were being eaten up by
20 claims. And I think in a previous meeting we, the PEBP Board
21 or Executive Officer Rich had indicated that there were
22 coronavirus expenses that we weren't going to seek recovery
23 from the coronavirus money because the Governor had targeted
24 somewhere else.

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1 So I'm actually wondering if are there Corona
2 claims out there that we haven't already been reimbursed for.
3 Can we bundle those together and take it to the GFO's office
4 and say we would like to be reimbursed at whatever it's
5 called, whatever the acronym is money and we would like to
6 use that money to extend long-term disability.

7 So, you know, instead of just putting that money
8 into reserves we actually target it to be spent. And I would
9 think that some of the reserves that have been eaten up are
10 legitimate COVID expenses. I don't know. Question.

11 CHAIRWOMAN FREED: So, okay, I'll let the
12 executive officer go. The only thing I was going to say is
13 we have, PEBP has received CRF reimbursement for its COVID
14 claims. I don't know what the time frame is for COVID claims
15 run-out. Well, it's probably a year, just like it is for any
16 sort of active claim. It has a year to be paid. But,
17 anyway, I'll let Laura Rich field that one.

18 MS. RICH: So Laura Rich for the record.

19 We -- we did receive reimbursements through CRF
20 funds initially. And then when there was a thought and now
21 that I'm hearing that maybe the CRF funds, we're having
22 trouble using them, there is still -- we do have some claims
23 that we could request for reimbursement at the time the, we
24 were, the program was obviously accruing a lot of savings, a

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1 lot of excess because of the lack of claims that were coming
2 in for normal services, normal procedures, surgeries, things
3 like that.

4 And so we decided to, and this was discussed at a
5 previous Board meeting to not request additional funding
6 knowing that we were seeing these excess reserves accrue.
7 And that other entities, other organizations, other agencies,
8 you know, could leverage those funds, you know, and needed
9 those funds. Now, that we do know we're having a difficulty
10 spending them PEBP could definitely ask for those funds
11 and/or at least submit a request for it.

12 As far as can we allocate that money instead of
13 putting it back into the program, can we allocate it to spend
14 on long-term disability benefits. You know, I -- I would
15 have to think about that and see if there's -- I mean, it's
16 outside of our budget. It's at -- there's definitely some
17 challenges to that. It's -- it's not as simple. I would
18 have to think through that a little bit.

19 MEMBER KELLEY: Thank you for the response. You
20 know, I think honestly my -- my response is that I think
21 whether or not we can use that money immediately to defray
22 some of the costs, you know, LTD I think is on the top of my
23 list as well as Marsha and a few other people or it has to go
24 into reserves, I think that we should be seeking that money.

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1 You know, I mean, I do think even if we can reinstate some of
2 these benefits using that money for the next fiscal year, as
3 well as AFP money, you know, I personally think we should be
4 -- the program should be aggressively seeking all of the
5 money that qualifies, and I understand there's issues with
6 the reserves and there has been for a long time.

7 But at the same time I personally feel that we're
8 doing a disservice to all of our participants, retirees and
9 actives when we don't seek out all income and sources, all
10 sources of money that our participants are entitled to.
11 Anyway, thank you.

12 CHAIRWOMAN FREED: Okay. Other thoughts? Okay.
13 Hearing none I think we should move on to open enrollment
14 update.

15 MS. RICH: All right. Open enrollment update, so
16 open enrollment began on May 1st and ended on May 31st.
17 Obviously we had a lot of changes this year. We -- staff put
18 in a great deal of time and effort preparing for everything
19 that was involved in all of those changes. We are ecstatic
20 to report that keeping with our commitment to conduct
21 thorough outreach and educate members on benefit changes, our
22 open enrollment meetings were a huge success.

23 Typically for those of you who don't know how
24 PEBP typically does our open enrollment meetings we have --
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1 we'll normally go out. We have staff that goes out and
2 vendors that go out to various locations throughout the state
3 and put on meetings for our state employees and retirees. In
4 the last several years, even prior to the pandemic we started
5 doing, offering them in a webinar, a webinar option. And so
6 while we would attend in person meetings and hold these in
7 person meetings we would also have a webinar opportunity to
8 where people could participate in these live meetings through
9 a webinar option.

10 And normally we have about 500ish or so, four to
11 500 people attends these open enrollment meetings yearly.
12 However, this year we had over 2,600 participants. So it was
13 a huge huge success. I will -- you know, I have to give
14 kudos to staff who, you know, really really put a lot of time
15 and energy into this. And as we all know things changed on a
16 daily basis and they were constantly having to, you know, to
17 keep up with the -- with the changes and make updates and
18 accommodate these changes. So staff did amazing.

19 And even through open enrollment we had our
20 member services staff answer the, you know, slough of phone
21 calls that we were getting and things like that. So I do
22 have to thank staff, all of our staff that were involved and
23 also our vendors as well who participated in these open
24 enrollment meetings.

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1 So the chart that I actually have on the
2 Executive Officer Report is obviously outdated. I do have
3 new information. The chart on there was the original numbers
4 that we got were enrollment numbers for all lives, right, not
5 just primary member. And normally what we do when we report,
6 when PEBP reports these types of things we use primary only.
7 We don't use total bellybuttons, total dependents, total
8 lives. So I went back and asked them, you know, hey, can you
9 give me primary numbers.

10 So I think really, I mean rather than me giving
11 you the new numbers, what's important to show here is that
12 the -- the HMO, the EPO, they're, you know, they remained
13 somewhat stable. There was a little bit of a loss on the
14 EPO. You did see a lot of people move from the CDHP to the
15 low deductible plan. About ten percent of the population,
16 not as many as we thought that were going to move over or
17 that we had anticipated moving over to the low deductible
18 plan, but at the same time it was a passive open enrollment.

19 So when you have a passive open enrollment you
20 don't have as many people go in and make changes because they
21 don't have to. If they're not forced to make changes they
22 don't think of other insurance. They just don't look to, you
23 know, see what other options are out there.

24 We anticipate that once this low deductible plan
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1 becomes -- people become more familiar with it that more
2 people are going to move over to it, and you'll see that
3 migration happen, you know, in time.

4 So I will -- I'll leave it at that. And if you
5 have any questions I'm happy to answer.

6 MEMBER AIELLO: This is Betsey.

7 I would like to make a comment, and I don't want
8 to beat a dead horse. But looking at this chart, which is a
9 little bit old, Laura, you said and unless a lot people
10 declined, the decline seemed consistent with the year before
11 which would lead me to feel more comfortable with the belief
12 that people didn't decline because of the changes in life
13 insurance or long-term disability unless those numbers went
14 up at the end and it looks different.

15 MS. RICH: Right. And, Betsey, I agree with you.
16 I don't think a lot of people would see it as significant.
17 It's legally, that's where we fall on, you know, what is
18 significant. So what we would do in this type of situation
19 is so for example if we were to add the LTD benefit back and
20 it changed rates that would be, that would definitely be --
21 that would open the door for a mini enrollment period.

22 But if it didn't change rates at all then there's
23 an argument that it's not significant enough, but I would
24 probably want a legal opinion on that so that we don't get
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1 into hot water later.

2 MEMBER AIELLO: I agree. I'll argue with a
3 lawyer for you if I need to.

4 CHAIRWOMAN FREED: Any other questions, Board
5 members?

6 Okay. Hearing none I think --

7 MEMBER KELLEY: I'm sorry. I was slow to hit. I
8 just actually have a comment.

9 CHAIRWOMAN FREED: Okay.

10 MEMBER KELLEY: Executive Officer Rich, will you
11 in July bring us the final numbers? I think I would like to
12 see the final numbers. And, you know, I understand you don't
13 want to go over them verbally, but is there a way for us to
14 see the final open enrollment numbers?

15 MS. RICH: I can definitely provide the final
16 open enrollment numbers in the next Executive Officer Report.
17 I'll do that.

18 MEMBER KELLEY: Thank you.

19 CHAIRWOMAN FREED: Okay. With that I guess we
20 can move on to Agenda Item Six, presentation and possible
21 action on PEBP's participation in the Patient Protection
22 Commission Peterson-Milbank Program for sustainable health
23 care cost. That's a lot of P alliteration. Let's do it.

24 MS. RICH: So for the record Laura Rich.
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1 So I hoped to have the executive director of the
2 Patient Protection Commission, Ms. Sara Chohagian, and
3 hopefully I did not butcher her name. But unfortunately she
4 is or fortunately for her she's on her honeymoon right now.
5 So she had planned to try to participate remotely. I think
6 she's somewhere in Europe, but she got her time changes or
7 her time differences messed up, and so she is not able to
8 participate. I think she is flying right now.

9 But I think I can field any of the questions
10 that -- that come my way, and if I cannot then we will
11 definitely follow-up with Ms. Chohagian to get these
12 questions answered.

13 So a little bit of background on the Patient
14 Protection Commission. Senate Bill 544 of the 2019
15 Legislative Session created the Patient Protection
16 Commission. The goal of the PPC is to systematically review
17 issues related to health -- to the health care needs of
18 Nevada residents and accessibility, affordability and quality
19 of health care.

20 So in March of 2021 the Milbank Memorial Fund
21 announced that Nevada as well as four other states had been
22 selected to participate in the Peterson-Milbank for
23 sustainable health care cost. They have partnered with
24 Bailit Health. They, to provide technical assistance to each
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1 of the states so that they can explore, set and implement
2 health care cost growth targets. These targets are really
3 the first step making health care more affordable and
4 transparent in our state.

5 So with the lack of an all payer claims database,
6 which on another note did get passed through the legislative
7 session but is not obviously in existence yet, it makes
8 Nevada's participation in this program challenging because in
9 order to -- to really analyze health care you have to have
10 access to claims. And without a statewide database,
11 statewide claims data you just -- you have to ask folks for
12 this data.

13 So as a result PEBP and Nevada Medicaid were
14 asked to participate in this project because of our
15 respective direct access to medical and pharmacy data across
16 the state. They are also going to be approaching the
17 commercial market carriers to participate as well. But,
18 again, this is -- they have -- they have got to get some
19 buy-in because there's no mandate at this point. So because
20 of that it's -- it's now we're starting with Medicaid and
21 PEBP because that's data that the state has and they have
22 access to it.

23 So unlike Medicaid PEBP does not have an in-house
24 analytics team, and so we require the assistance of vendors
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1 to provide the expertise and the tools necessary to perform
2 any analysis that is done at PEBP.

3 So we went to -- to Aon and Aon Consulting and
4 basically said here's the -- here's the project. This is
5 what we're going to need to do. This is the analysis that's
6 going to need to be done. Is there any way, Aon, that you as
7 our consultant can assist in this project, and if so what do
8 we need and how much is it going to cost?

9 So Aon came back and said, you know, in order to
10 be able to do what the, to meet the requirements of this
11 project you're going to need a data warehouse solution. We
12 need to get claims from pharmacy. We need to get claims from
13 the medical side, dental side, et cetera. And then so we're
14 going to need to have a data warehouse solution, and then
15 you're going to have to have that analytics team to perform
16 the function or, you know, develop the reporting that is
17 necessary for this.

18 So the cost estimate is going to be approximately
19 \$150,000. Although PEBP has sought out the solution
20 specifically for this project it will benefit PEBP because a
21 lot of what we are looking at here, and I made myself some
22 notes because, let's see, where did I put it. I made myself
23 some notes on the actual, I'll find it in a moment, on the
24 actual analytics that are going to be performed.

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1 There's going to be very very useful data that
2 comes out of this. Where are the trends in our -- in our
3 membership, you know, where by geography, by demographics,
4 by, you know, different types of procedures that are done,
5 you know, does E states and things like that. We're really
6 going to be able to drill down into a lot of these things.

7 And while this is for a statewide project it
8 definitely will impact our program and help our program and
9 help PEBP staff be able to -- to, you know, strategize and
10 this may actually help us. And although we didn't have a
11 strategic planning session this year for, you know, many
12 reasons, mostly that it's hard to strategically plan when
13 everything is kind of up in the air. But hopefully in the
14 future when we do have these strategic planning sessions we
15 have access to a lot more information than what we have
16 today. And so I think this is really going to help not just
17 the state in general but also the program.

18 And so what I did was I spoke to the executive
19 director of the PPC. And she said, you know, there's some
20 funding that's available in this project. I think that I can
21 go to the board of the Peterson-Milbank project and say,
22 look, let's split the cost with PEBP. So she is going to be
23 making that request. We will be asking for the full \$150,000
24 to be able to participate in this project. However, we
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1 expect that that expense will be split or that cost will be
2 split in terms of, you know, being able to get some funding
3 through this project as well. And then that way, you know,
4 it shows that, look, we're doing this for the state, but it
5 also is beneficial to our program as well.

6 So I do also want to add that the executive
7 officer position of PEBP through AB348, along with a lot of
8 other changes to the Patient Protection Commission makeup,
9 was added as a non voting member. And so this just kind of
10 ties in our -- our new participation into this program or
11 into this commission, you know, to really look at health care
12 not just from a plan perspective and from a, you know,
13 program perspective but also from a statewide perspective and
14 be able to, you know, to really provide input and expertise
15 into -- into this commission.

16 So what we're asking for here is for the approval
17 for staff to move forward in working with the PPC and
18 Medicaid to assist in the Peterson-Milbank program for
19 sustainable health care cost. I probably should add here
20 also that the Board needs to approve the cost that is
21 involved in that. I believe we'll have to do a contract
22 amendment which will come at a later time. But I thought
23 because of the -- of the -- it will probably come in July.

24 I wanted to have this as a separate agenda item
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1 just to discuss the, you know, the appropriateness of the
2 funding and, you know, how it applies not just to PEBP but
3 the state in general. So I will stop there for questions.

4 MEMBER VERDUCCI: This is Tom Verducci for the
5 record.

6 Laura, where does the cost come from on the
7 \$150,000? Is that coming from the reserves or is that a
8 budgeted item and what would be the approval process?

9 MS. RICH: So Laura Rich for the record.

10 That is a very good question and unfortunately
11 Ms. Eaton is not here today. She actually had a family --
12 when we rescheduled our Board meeting, she had a family
13 medical leave situation and so she's not able to be here
14 today.

15 But -- but from what I understand, yes, it would
16 be funded from, we would be increasing our authority into
17 that contract and funded from that excess.

18 MEMBER VERDUCCI: So we would be requesting
19 approval from the lawmakers in the Governor's Office. Does
20 it require that to be approved IFC, GFO?

21 MS. RICH: It would go through the typical GFO
22 process, yes.

23 MEMBER VERDUCCI: And it looks like there's a lot
24 of benefits to the program having this in place. So my
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1 personal thought is I'm very supportive of this, and I think
2 it's good for the program if it's affordable and it does get
3 approved. It's a good thing.

4 CHAIRWOMAN FREED: Thank you, Mr. Verducci.

5 MEMBER KELLEY: Michelle Kelley here. I just
6 have some questions actually.

7 So the first question is easy. Is this one-time
8 funding or is there going to be a regular allocation
9 required? It wasn't clear to me if it was, the 159 was just
10 for the warehouse and then you would need to hire someone to
11 play with the dollar or how that would work.

12 MS. RICH: No. So the first -- it is for a data
13 warehouse but it's also for the analytics that are involved
14 in producing the reports that are necessary for the -- the
15 ongoing. Once we have the data then the Peterson-Milbank
16 team and Bailit Health, they then kind of, that starts the
17 conversation, right. Then we have the data. It starts the
18 conversation, and then you start talking about cost growths
19 and things like that. You start looking at the data and
20 that's where the team of the Peterson-Milbank people come in.

21 But we do need the analytics and the reporting to
22 even begin those conversations. And so this is where that
23 cost comes in is having that data warehouse, being able to
24 produce the reports and pulling the data that's available in

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1 the -- in that warehouse solution.

2 MEMBER KELLEY: So it's a one-time expense?

3 MS. RICH: Right.

4 MEMBER KELLEY: Thank you.

5 So my next question is a little trickier because
6 like, you know, I work with a lot of data and it's nice to
7 have data and there's useful data and there's essential data.
8 I'm not clear how this is even strategically going to benefit
9 PEBP. So can you maybe give me a few examples of how this
10 will directly benefit our participants.

11 MS. RICH: Laura Rich for the record.

12 So it is not just a -- it's an indirect benefit
13 to participants, right. So this is -- this is how are you
14 managing your plan. And so right now we have to ask the
15 question, we have to say, you know, we have to be proactive
16 as staff. Hey, I see in the utilization report that these
17 costs are going up. What is happening here? But it is --
18 it's on staff to really start to, you know, dig into that and
19 notice these types of things.

20 And so this will give us an opportunity to kind
21 of -- to dig into this and highlight and see, well, where --
22 where are these costs happening? Where is this -- the
23 increase in costs. One of the questions I've been asked
24 repeatedly is are, you know, certain increases in costs, are

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1 they based on utilization alone or is it based on the cost of
2 care or maybe a little bit of both. Usually it's a little
3 bit of both, right.

4 And so this will kind of break it down and then
5 we can talk about -- like right now what we don't have is,
6 you know, our utilization reports aren't broken out by
7 geography, right. We all know that in the rurals it's much
8 more expensive, and we actually have plan design policies in
9 place that address some of these rural high costs so for
10 example hip and knee replacements. You know, we have
11 policies in place that steer people into the lower cost --
12 lower cost, high quality facilities to address some of these
13 higher cost issues in the, you know, in the rurals.

14 And so but that's, we don't have things broken
15 down by geography. We don't have things broken down by, you
16 know, certain health conditions but not all health
17 conditions. And so this is our -- this provide PEBP staff
18 and Board members, as I said, through strategic planning.
19 You know, Ms. Kelley, you haven't been around to participate
20 in the strategic planning sessions that we have but those are
21 typically done some time in the summertime and, you know,
22 where PEBP staff and Board members and vendors meet and we
23 talk about a lot of these things and where are we seeing
24 problems and where can we, you know, look at our costs and

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1 what are our cost drivers and what kinds of ideas can we
2 throw out there to, you know, to contains costs.

3 And so this is the more data you have the better
4 it helps the program and the better it helps staff and the
5 Board really identify where our problem areas are, where we
6 can -- you know, it -- it helps with the SWOT, right, with,
7 you know, what are your strengths, what are your weaknesses,
8 what are your opportunities, where are your threats. Without
9 the data it's hard to really identify those. You have to
10 have supporting data to support any kind of, you know, any
11 path that this program takes. And so that's something that
12 we haven't had -- not that we haven't had it, just not to
13 this degree.

14 And so I did put in my notes what we're doing.
15 Spend by market, trend by market, spend by geography, spend
16 by category, spend by health condition, trend and spend by
17 demographic variables, not just the spend but also the -- the
18 differences in costs, right. So we're looking at maybe by
19 this a certain category we spent this much, X amount this
20 year and X amount next year or, you know, the following year,
21 why did that happen. You know, it's -- it's looking at
22 those, really analyzing what is happening in our plan.

23 And so while this isn't a member specific or
24 direct impact it's a way to fiscally look at the program, not
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1 just fiscally but also in a -- in a holistic manner and --
2 and look at it from a quality standpoint.

3 MEMBER KELLEY: Okay, thank you. And the true
4 cost though would be 60,000 or 159 divided by two, right,
5 because you said they would be governed at half. Is that
6 accurate?

7 MS. RICH: So 150,000 divided by two so it would
8 be -- it would be 75,000.

9 MEMBER KELLEY: Okay. Thank you.

10 CHAIRWOMAN FREED: Okay. I have questions. You
11 knew I was going to ask about the contract and the money
12 stuff. Do -- does PEBP currently have an interlocal
13 agreement with the Patient Protection Commission?

14 MS. RICH: We do not.

15 CHAIRWOMAN FREED: Okay.

16 MS. RICH: And this is something we would have
17 to --

18 CHAIRWOMAN FREED: Okay.

19 MS. RICH: We have to work through and this is
20 why the staff recommendation is kind of broad. It's --
21 there's going to be some logistics that are involved in this
22 and so we're going to have to --

23 CHAIRWOMAN FREED: Okay.

24 MS. RICH: -- figure out what we need to do if we
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1 do get that \$75,000 and that's approved.

2 CHAIRWOMAN FREED: Okay. If we -- okay. So
3 there is some question in Patient Protection Commission
4 staff's mind about whether they would get their half of the
5 \$150,000?

6 MS. RICH: They are pretty confident that this
7 falls into the bucket of what would constitute as funding,
8 appropriate funding for this project, but I don't want to say
9 it's a done deal because --

10 CHAIRWOMAN FREED: Okay.

11 MS. RICH: -- just like -- so -- so the executive
12 director is going to have to have go to that board of
13 Peterson-Milbank and I don't know enough about it. Maybe
14 it's not Peterson-Milbank board, but she has to go to a board
15 to get that money to pull that funding and so that has to be
16 approved through the board. There's confidence that it will
17 be approved but I -- I don't want to say that it's a done
18 deal at this point.

19 CHAIRWOMAN FREED: Okay. So -- okay. So there's
20 several process steps for PEBP here. We have to negotiate of
21 interlocal of \$75,000, give or take, take that to the Board
22 of Examiners. Go separately to a work program to get \$75,000
23 out of Category 86 and move it to Category 4. So that's an
24 IFC work program. And then -- and on the Patient Protection
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1 Commission side, as far as I know the PPC budget is funded by
2 the general fund. Is this funding in the PPC budget that's
3 ledge approved?

4 MS. RICH: No. So Laura Rich for the record.

5 This funding is not from the PPC. It is -- it's
6 awarded through this project and so through the
7 Peterson-Milbank project. There's some funding, and that's
8 why -- that's why there were states that were selected to
9 participate in this.

10 CHAIRWOMAN FREED: Okay.

11 MS. RICH: Because there is funding available for
12 a certain amount of states, right. So each state gets a
13 certain amount of money to be able to, you know, to pull to
14 participate in this project. And so there's -- there's steps
15 that the PPC director needs to take to pull that money, but
16 it would definitely be there's -- there are some logistics
17 involved in that, and you are correct.

18 But given the timing situation that we're in we
19 need to bring this to the Board for approval, number one,
20 before we take any additional steps after that.

21 CHAIRWOMAN FREED: Okay.

22 MEMBER AIELLO: This is Betsey. I have a couple
23 of additional questions, Laura.

24 So the data warehouse will be built by Aon is
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1 what I understand. But if in another contract procurement
2 does the data warehouse somehow stay with the state so that
3 we get to keep it and will state staff learn how to query
4 reports or will all of the reports have to be done by Aon?

5 MS. RICH: So the -- Laura Rich for the record.

6 The data warehouse solution is a, it's a tool
7 that Aon has and owns and is something that, you know, that
8 the -- the actuarial consultants would have.

9 So, you know, and unfortunately I don't think
10 Stephanie, I know she's watching, but I don't know if she has
11 speaking credentials today. I didn't anticipate. Oh, I
12 think she is, she is on there.

13 So maybe, Ms. Messier, do you mind chiming in on
14 how it works and if -- if PEBP staff would have access to it.
15 I don't know. I don't think that we would. I don't even
16 know if anyone would be -- we don't have the skills and
17 expertise, right. None of us are actuaries. So I don't know
18 what kind of skills and expertise we would -- that would be
19 required in order to, you know, to have access to this.

20 But in the future this would be in a future
21 actuarial -- you know, when we go out to RFP this would be
22 included as part of a solution that we would, you know,
23 require moving forward.

24 MS. MESSIER: And this is Stephanie Messier for
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1 the record.

2 So yes, Ms. Rich, mostly what you stated is
3 correct. I do believe there's different levels of the data
4 warehouse, some of which would grant you access to kind of a
5 standard set of reporting. And I believe within the standard
6 set is a lot of the requests that we saw in that Bailit
7 Health description of all of the different reports they were
8 asking you to gather as part of this project.

9 And then any of the custom reports is something
10 that my team and myself would be working on in order to
11 produce for you. But you're correct, it would be going
12 forward, right, with your actuarial consulting contract.

13 MEMBER AIELLO: This is Betsey again.

14 I totally believe, having worked at Medicaid for
15 years, data warehouse is 100 percent necessary for overall
16 management, whether it's done by a contractor or not. I was
17 just curious because looking at our contract list, the Aon
18 contract expires next summer so it's only a year longer.
19 And -- and if they already have a data warehouse existing so
20 there isn't a build-out time and a report, long report
21 building time and along that line then -- then I -- you know,
22 I could be more comfortable with that because it would have
23 to be written in to any future RFP.

24 And I also understand that we don't want to lose
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1 the opportunity that we're getting from the money from the
2 project. So that -- that's -- that's big. It may be our
3 step in to being able to move into a data warehouse and have
4 it for the future because it really is important for
5 identifying health trends and outreach for helping people
6 that are in areas that are underserved for something.

7 Again, though I don't know if PEBP doesn't end up
8 with the staffing to do those kinds of things, but anyways
9 thanks.

10 MEMBER KELLEY: It's Michelle Kelley here.

11 Thank you, Betsey, for asking those questions
12 because I had no idea what we were paying for is a license.
13 So, in fact, it's not one shot money. It's money that will
14 be built into future contracts. So it's an ongoing expense
15 we have.

16 And so I wonder -- I wonder why we wouldn't go
17 out for RFP for this or have you explored building in-house
18 the data warehouse because obviously \$159,000 for one year
19 equals 300,000 and rising every biennium. So it turns into
20 serious money I guess.

21 So have you explored other options for the data
22 warehouse?

23 MS. RICH: So this is Laura Rich.

24 We actually had a data warehouse solution back in
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1 the day and it was utilized and it was for some reason, you
2 know, it was prior to my time being the executive officer it
3 was turned off, and so we decided to not use that option or
4 that, you know, that tool. I personally think that that tool
5 is very necessary in order to understand what's happening in
6 our plan.

7 Without data in a -- in a health plan I don't
8 think that you can make good decisions. And so this would be
9 built in to -- we have not released the RFP for the
10 consultant, the actuarial consultant RFP yet. This would be
11 built into the RFP. I think that, and it was included in the
12 RFP obviously since we had the solution, this tool. It's in
13 the current one as well.

14 And so I think moving forward, while this cost, I
15 think it was maybe turned off as a cost saving opportunity
16 but, again, is it wise? I can make the argument that I don't
17 think it is wise. We're dealing with a billion dollar
18 program here. You want to know where the costs are. Where
19 your cost drivers are. You want to be able to perform those
20 analytics. You want to be able to understand what is
21 happening in the program, and so it makes sense to have
22 access to a tool like this.

23 MEMBER AIELLO: Laura, this is Betsy again.

24 And I totally agree. I mean, I think a health
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1 plan the size we have needs to have the data to analyze the
2 health care of the recipients.

3 Has there been any outreach and maybe it is
4 impossible to link with Medicaid's data warehouse or no?

5 MS. RICH: There hasn't been that discussion.
6 Although, my -- I would think that they are -- they are
7 probably overwhelmed as it is right now. I don't think --
8 they are probably short staffed. I believe they are short
9 staffed, and so does it make sense to leverage Medicaid
10 system, maybe. It would be a cost saver, but at the same
11 time it operationally, you know, we would have access to it.
12 You know, unfortunately states work in silos and, you know, I
13 can't -- I don't think that we would have access to --

14 MEMBER AIELLO: And this is Betsey again.

15 I know it wouldn't happen quickly where Aon is
16 already sitting on your data and it would happen quickly
17 there, but and I know that you need it quickly to be part of
18 this project, but it sounded like Medicaid was going to be
19 part of the project too. For a longer term, not ongoing
20 expense it might be something to start investigating but I
21 don't know because I'm not involved in all of that area --
22 those areas anymore. Sorry.

23 MS. RICH: There would be -- Laura Rich for the
24 record.

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1 There would be some -- some questions that I
2 would have to ask because Medicaid does differ quite
3 significantly from -- you know, from PEBP. And so, you know,
4 they don't have -- for the most part, you know, they don't
5 have co-pays and out-of-pocket maxes and things like that,
6 right. So the makeup of their program is much different than
7 PEBP. So could they differentiate? Is this something that
8 -- you know, is it worth that? Is it worth the cost savings?
9 Is the headache worth the cost savings?

10 I'm sure we would have to -- you know, there
11 would be cost sharing involved in that and to be able to use
12 their analytics team. Is it worth just having our own or,
13 you know, so there's a lot of questions that I would ask and
14 you're right.

15 MEMBER AIELLO: It wouldn't happen overnight,
16 that's for sure.

17 MS. RICH: Right.

18 MEMBER AIELLO: I totally agree. It would be a
19 longer term project.

20 CHAIRWOMAN FREED: Okay. Board members, any
21 other thoughts, comments? So the staff has recommended that
22 the Board approve PEBP staff to move forward in working with
23 Patient Protection Commission and Medicaid to develop a data
24 warehouse solution in conjunction with Aon. Is -- is there
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1 somebody who would like to make that motion or do something
2 different?

3 MEMBER AIELLO: Well, this is Betsey.

4 Despite all of the questions I asked it appears
5 to me that it -- that PEBP should have access to data
6 warehouse that the -- the project which brings additional
7 funding to gather data and information to the state to help
8 the state make some decisions is probably -- is sounds to be
9 a good and important thing for health care. So I will go
10 ahead and make that motion.

11 CHAIRWOMAN FREED: Okay. Thank you.

12 MEMBER LINDLEY: Tim Lindley here. I'll second.

13 CHAIRWOMAN FREED: Thank you.

14 All right. It has been moved and seconded. Is
15 there any discussion or questions about the motion? Excuse
16 me. All right. All in favor signify by saying aye. Any
17 opposed say no.

18 (The vote was unanimously in favor of the
19 motion.)

20 CHAIRWOMAN FREED: Okay. Motion carries. Thank
21 you.

22 With that we'll move to Agenda Item Seven,
23 presentation and possible action on the status and approval
24 of the PEBP contracts, contract amendments and solicitations.

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1 I know that the executive officer indicated that Cari Eaton
2 was absent today. So maybe I will turn it over to Ms. Rich
3 to talk about a couple of contract amendments.

4 MS. RICH: All right, perfect. Laura Rich for
5 the record.

6 So contracts, this report will just get longer
7 and longer and longer as the year progresses. Section 7.1,
8 really that's just the contracts overview. That's included
9 in there, you know, in the report. It's a standard
10 inclusion.

11 No new contracts this time. 7.2, there are no
12 new contracts for ratification. You will see that we are
13 working on a plethora of RFP's of solicitations, and so
14 you'll see that they'll come later on in the year.

15 So 7.3, contract amendment ratifications. I am
16 going to start out by saying that because the Board meeting,
17 the previous Board meeting had to be rescheduled, these
18 contracts and there's timing issues. I'm going to ask for
19 forgiveness on this, but this -- these have already gone to
20 the Board of Examiners and have already been approved.
21 Typically we would bring them to the Board prior to -- to
22 having them go to BOE, but there was just no way we could go
23 about it with the change of schedule and with the
24 cancellation of the last Board meeting.

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1 So the first one was a Hometown Health contract
2 amendment. So back in, when this contract went out to bid in
3 2014 there was something that was not included in the RFP
4 and/or even considered. And so what happened here is that
5 we've got a -- we're changing -- we're changing networks.
6 Hometown Health is our network through June 30th of this
7 year. And then on July 1st we switch to Etna.

8 However, there is in statute a one-year timely
9 filing of claims requirement and so providers have a year to
10 submit a claim. So if someone sees a provider say on
11 June 29th it has to be processed through Hometown Health
12 because that claim occurred during a time when Hometown
13 Health was our network. However, the provider has a full
14 year to submit that claim and to get it paid for, and so we
15 call that the run-out of claims, claims run-out.

16 We had to amend the Hometown Health contract
17 because there was no provision for that claims run-out. So
18 we had to add about 1.4 million dollars in this contract to
19 be able to -- to account for this.

20 So that is -- the recommendation here obviously
21 is to authorize staff to complete this contract amendment but
22 unfortunately this was approved through BOE already and, you
23 know, I don't know if we even need that recommendation at
24 this point since it has already been approved through the
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1 Board of Examiners, but I'll stop there for questions if
2 there are any.

3 CHAIRWOMAN FREED: I have a question.

4 MS. RICH: Sure.

5 CHAIRWOMAN FREED: It's for Mr. Keegan actually.
6 Since this has already gone to the Board of Examiners
7 pursuant to state administrative manual and NRS Chapter 333,
8 the Board's, under the policies and procedures needs to
9 review and approve contract -- new contracts and contract
10 amendments. Do we need to take action on this?

11 MR. KEEGAN: Good afternoon. Peter Keegan for
12 the record.

13 You know, I think it would probably be a good
14 idea. I don't have the state administrative manual in front
15 of me, but I think you can go ahead and retroactively approve
16 it. You know, it's been approved by the Board. I didn't get
17 a chance to look at it. There's been some shuffling in our
18 office. I don't know who it might have been. Andrea
19 Nichols, who was handling the Board before me, reviewed the
20 contract when it went to BOE.

21 So my suggestion is to go ahead and retroactively
22 take measures to approve it for the record and that way
23 unless there are objections, you know, there is a supporting
24 vote by the Board.

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1 CHAIRWOMAN FREED: Okay. Thank you. So --

2 MEMBER KELLEY: I have a question, Chair Freed,
3 if you don't mind.

4 CHAIRWOMAN FREED: Go ahead.

5 MEMBER KELLEY: So regarding the HMO contract,
6 obviously negotiating a run-out after they lost the business
7 we really were holding the losing hand. So my question is
8 about the current contract with the new provider. Do we have
9 run-out language in that contract and/or -- and if we don't
10 then can we negotiate it now so that we're not holding the
11 losing hand? Yeah, that's my question.

12 MS. RICH: Laura Rich for the record.

13 Yes, it is in the new contract and it is
14 definitely something that we have included in the third party
15 administrator RFP as well. So it is covered in moving
16 forward but in this -- in this old solicitation, this was
17 something that was overlooked back in 2014 and so we
18 obviously -- we don't expect to have -- it's per claim, and I
19 can't remember right now off the top of my head how much that
20 claim is. We are trying to get all of the claims in as
21 quickly as possible and have sent out provider notification
22 saying please get your claims in by September 30th, just so
23 that we don't have that continuous trickle of claims moving
24 forward.

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1 But we -- hopefully we expect everything to be
2 done pretty quickly and hopefully that the only claims that
3 are going to be coming in moving forward are those, you know,
4 from like the Junish period, so May, June, right at the end
5 of that plan year, and so the contract authority is almost
6 1.4 million but that's contract authority. It's based on per
7 claim.

8 MEMBER KELLEY: Thank you. That's helpful.

9 CHAIRWOMAN FREED: Okay.

10 MEMBER AIELLO: This is Betsey.

11 I almost suggest that we approve the Hometown
12 Health contract amendment to extend contract authority for
13 claims run-out.

14 MEMBER URBAN: Marsha Urban for the record. I
15 second that.

16 CHAIRWOMAN FREED: Okay, great. It's been moved
17 and seconded to do a contract amendment, retroactive approval
18 I guess for a contract amendment for Contract 15510. All in
19 favor say aye. Any opposed no.

20 (The vote was unanimously in favor of the
21 motion.)

22 CHAIRWOMAN FREED: Motion carries. Thanks.

23 MS. RICH: Okay. So the next one is 7.3.2 which
24 is the Standard. This is basically the contract amendment
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1 that addresses the reduction in basic life insurance coverage
2 and the elimination of long-term disability, and this is just
3 to -- to reference the changes to our benefits.

4 And so we originally brought this to the Board I
5 think previous Board meeting or maybe two Board meetings ago,
6 and I think the discussion there was let's wait and see what
7 happens at the legislature before we -- we actually submit a
8 contract amendment.

9 So since there were no changes during the
10 legislative budget process we need to move forward with the
11 standard so that these -- the changes in our contract reflect
12 the actual benefit levels that are offered through PEBP.
13 And, again, this one was also approved at BOE.

14 MEMBER LINDLEY: Tim Lindley. Motion to approve.

15 CHAIRWOMAN FREED: Okay. Do I have a second?

16 MEMBER BAILE: For the record Don Bailey. I
17 second that motion.

18 CHAIRWOMAN FREED: Thank you, Mr. Bailey.

19 All right. It's been moved and seconded to
20 approve the retroactive approval of contract amendment
21 between PEBP and the standard on Contract 12746. All in
22 favor say aye. Opposed say no.

23 (The vote was unanimously in favor of the
24 motion.)

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1 CHAIRWOMAN FREED: Motion carries. Thanks.

2 MS. RICH: All right. Moving on to 7.3.3 which
3 is Express Scripts. Now this one has not gone to BOE yet.
4 So this one will go to the July BOE. Thank you, Cari. She's
5 apparently watching the Board meeting even at the doctor's
6 office.

7 So -- so PEBP every year conducts a market check
8 for the Pharmacy Benefit Manager Express Scripts. Every year
9 the Board has seen the new market check come in, and
10 typically there are savings that we achieve through that
11 market check. Aon does the analysis. Basically what they do
12 is they compare what -- what ESI is charging PEBP compared to
13 what is the -- you know, what is happening in the market
14 today. What are comparable entities to PEBP paying for these
15 services. And so we're able to -- to negotiate lower pricing
16 based on the market check that is conducted.

17 So this year, and we are in the final year of the
18 Express Scripts contract. We will be going out to bid for a
19 Pharmacy Benefit Manager. This is the final year of the
20 Express Scripts contract. We were able to negotiate and
21 anticipated savings to the program of about 3.6 million. So
22 this contract amendment basically reflects the new savings of
23 that of that pricing.

24 CHAIRWOMAN FREED: This is Laura.
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1 Does anybody have any questions or concerns or
2 want to make that motion?

3 MEMBER KELLEY: Michelle Kelley here for the
4 record.

5 Thank you to staff for, you know, working so
6 proactively in negotiate -- trying to, you know, watching
7 prices and trying to keep them down as much as you can.
8 Obviously, we're in a time of great need so every penny
9 counts, but 3.6 million is a significant savings so thank you
10 for that.

11 And with that I'll go ahead and make the motion
12 that we approve the contract extension for Express Scripts as
13 outlined in the Board documents.

14 CHAIRWOMAN FREED: Okay.

15 MEMBER URBAN: Marsha Urban. Second.

16 CHAIRWOMAN FREED: Okay. Thank you.

17 I just, before we take a vote, I just want to say
18 those of you Board members who are serving on the PBM
19 Evaluation Committee you have my thanks and my sympathy.
20 It's probably a tough one.

21 Okay. With that, it's been moved and seconded to
22 authorize the contract amendment for Contract 17751. All in
23 favor say aye. Any opposed no.

24 (The vote was unanimously in favor of the
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1 motion.)

2 CHAIRWOMAN FREED: Motion carries. Thank you.

3 With that -- oh, I guess we're -- we don't have
4 any contract solicitations. Ms. Rich, do you want to talk
5 about current solicitations because there are so many of
6 them.

7 MS. RICH: Sure. There are a lot, and I will be
8 bringing another one in July. So there's definitely -- we
9 are up to our ears in contract solicitations.

10 I am happy to say that the -- the big one that we
11 have out there right now which is the third party
12 administrator, the proposals actually just came in, and we've
13 got our evaluation team going through those and reading them
14 and we anticipate that a notice of intent to award will be
15 released some time in August.

16 I'm very happy we do have -- we have a fair
17 amount of proposals. I came in, and I'm just going to be --
18 I'm going to err on the safe side because I don't know what I
19 can release at this point and what I can't, but I do know
20 that, you know, we have got some interest in that so that
21 is -- I'm very optimistic about that one. We have put a lot
22 of time and energy into that one. That is a -- a very very
23 important and significant solicitation that we have out to
24 contract and so crossing my fingers on that one.

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1 We are also working towards releasing a few other
2 ones. Our next one is the HSA and HRA administrator, second
3 opinion. We're looking at, pretty soon we're going to start
4 working on telemedicine and the transparency and pharmacy.
5 So those are the next ones that are, while we've got some
6 coming in we're working on putting some more out, and we will
7 be bringing some additional ideas and thoughts to the July
8 Board meeting to, you know, to add to this list as well, so.

9 CHAIRWOMAN FREED: Okay. Thank you very much.

10 With that I think we can move to Agenda Item
11 Eight, legislative update.

12 MS. RICH: Okay. Laura Rich for the record.

13 Instead of, you know, and instead of going
14 through each one of these like I did last time I think I'm
15 just going to touch on the important ones. And then if Board
16 members do have questions, you know, I'm happy to answer
17 questions specifically about any -- any of these bills.

18 But the Board -- obviously the Board report was
19 up-to-date as of May 27th but a lot changed after May 27th.
20 So a lot happened in the last few days of the legislative
21 session.

22 The ones I want to go over are AB48 which is the
23 PEBP bill which we'll go over I think in the next agenda
24 item. So I don't want to spend a lot of time on it, but it
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1 pass. I'm really happy about this. I think it's going to be
2 beneficial to our members and our retirees specifically. So
3 that's -- I'm really glad that that one passed.

4 Senate Bill 290, that's the next one. That --
5 that addresses the step therapy for cancer patients
6 specifically. There was some testimony on that. And it --
7 you know, there was some concerns because PEBP did put a
8 fiscal note of about \$713,000 a year on that. That may be on
9 the high side because it, we're currently unable to identify
10 stage one, two, three, four cancer from each other, right.
11 So -- so we don't have the ability to do that moving forward.

12 We may have the ability, you know, through our
13 new contract to be able to, you know, further identify what
14 stage of cancer that is, but basically it exempts step
15 therapy for certain cancer patients in stage three and four.

16 There was an appropriation made to PEBP to
17 address this, and so PEBP did receive an appropriation to
18 address the fiscal note but it did pass.

19 The next one is Senate Bill 360. This is the one
20 that was making changes to the PEBP Board. And so the last
21 time the Board had a conversation about this, we as a Board
22 decided to propose an amendment that adds. Instead of
23 changing the Board makeup it instead adds an 11th Board
24 member to the PEBP Board that is nominated from or that the
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1 Governor appoints from a nomination submitted by the largest
2 collective bargaining unit. That did pass and with the
3 amendment. So I anticipate here shortly we will be getting
4 an 11th board member some time after July 1st. And so when
5 that happens I -- I will work with the new Board member and
6 the Governor's Office and we will definitely make an
7 announcement.

8 Senate Bill 373, I know that there's been -- I
9 wanted to address this because there's been some -- some
10 heartache about this. Senate Bill 373 was the bill that was
11 introduced and sponsored by Senator Marilyn Dondero Loop.
12 Specifically the intent was or the intent originally I think
13 from the bill sponsors was to provide collective bargaining
14 to the system of higher education.

15 But unfortunately when this bill first came out
16 PEBP and other agencies, including the department of
17 administration, we -- the language, the way it was originally
18 written added health insurance benefits specifically to PEBP,
19 added health insurance benefits and into collective
20 bargaining, and so there was a significant fiscal note that
21 was placed on that both by PEBP and the department of
22 administration dealing with collective bargaining. Now, that
23 was not the intent. It was later explained that was not the
24 intent. However, that was the way that it was written and

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1 the way it was interpreted in the bill.

2 The fiscal note was never removed, and I do want
3 to say that I want to clarify. It was never removed. It is
4 on this legislative tracking report, not because of the fact
5 that I don't agree with that. An amendment, there was an
6 amendment that was produced by the -- by NFA, Nevada Faculty
7 Alliance that fixed this, and it was shared with me.

8 However, everything on this Board report is based
9 on what is in NELIS. And so while I did receive a proposed
10 amendment it was never posted in NELIS. It was not received
11 from the sponsor of the bill. The sponsor of the bill is
12 Senator Marilyn Dondero Loop. I never received that from the
13 sponsor themselves. It was never posted in NELIS. And so I
14 just want to clarify that it is not that we kept the fiscal
15 note on. It is just that that amendment was never posted.
16 In NELIS it was never discussed and it was never heard, and
17 so that is why there is no update to that and there again you
18 still see a fiscal note.

19 I received amendments through e-mail, proposed
20 amendments through e-mail all of the time, through session
21 and I'm sure, you know, Chair Freed can agree with me. There
22 is -- we receive proposed amendments through e-mail all of
23 the time. That doesn't mean that the amendment is going to
24 be accepted by the Chair, by the sponsor, by -- you know it's
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1 not -- it's a proposed amendment. And so that -- this only
2 reflects what is known in NELIS, what is posted in NELIS and
3 the formal -- you know, the formal amendments that have been
4 accepted by the sponsor.

5 So I just wanted to put that on the record. It
6 is not that we did not remove the fiscal note. It just had
7 to do with the sponsor -- you know, not -- that amendment as
8 far as PEBP was concerned because it was not posted in NELIS
9 is it didn't happen.

10 So moving on to the next one.

11 MEMBER KELLEY: Can I just ask a follow-up
12 question.

13 MS. RICH: Sure.

14 MEMBER KELLEY: I think it's just a terminology
15 question.

16 MS. RICH: Sure.

17 MEMBER KELLEY: So you're saying that it was
18 never posted to NELIS. Does that mean that the amendment was
19 not introduced or was it introduced and just never added to
20 NELIS? Like, so I know it's a language thing. I'm just
21 trying to understand how the whole process works.

22 MS. RICH: Right. Laura Rich for the record.
23 It was not introduced.

24 MEMBER KELLEY: Okay.

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1 MS. RICH: And so in NELIS you can have
2 conceptual amendments. You can have proposed amendments.
3 They all, they are posted, right. So in some of these bills
4 when we originally would report on these bills I made sure to
5 say it was either a conceptual amendment or a proposed
6 amendment. Conceptual amendments usually come from
7 stakeholders, things like that. And then you've got your
8 proposed amendments that are accepted by the sponsor of the
9 bill.

10 While I did see an amendment that was provided to
11 me by the Nevada Faculty Alliance it was not -- I received it
12 through e-mail. It was not something that was ever posted
13 publicly. It had never come out publicly. It was not
14 introduced.

15 And so when we develop these reports it's all --
16 it's -- I don't want to put anything out there that is not
17 formalized. You know, there's a lot that comes through
18 e-mail. And so if it is -- it's not up to me to make an
19 amendment public if the sponsor of that bill has not made it
20 public themselves. So, you know, we only post what is in
21 NELIS because of that.

22 MEMBER KELLEY: Thank you.

23 MS. RICH: So the last one I wanted to touch on
24 was Senate Bill 420. This is the public option bill. While
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1 this does not affect PEBP directly there are some significant
2 concerns with the -- the language in the bill and how it
3 could have an impact on PEBP members.

4 We did not put a fiscal note on it specifically
5 because there's really -- it's hard to put a dollar figure on
6 it. The impact really is it comes down to the requirement
7 that any member or any -- anybody -- any provider that
8 participates in PEBP or Medicaid must also participate in the
9 public option.

10 So there's a concern. There's actually kind of a
11 twofold concern. One is it may narrow our network. So if
12 you have to have a provider that is, let's say that provider
13 participates from moving on to the Etna network, that
14 provider participates on the Etna network and but they don't
15 want to participate in the public option. For whatever
16 reason they don't want to participate in the public option
17 now they can no longer serve PEBP members through that Etna
18 network.

19 So it could potentially have an impact on access
20 through our PEBP members because there could be providers, if
21 there's a significant number of providers who do not wish to
22 participate in that public option they cannot provide
23 services to PEBP as well, to PEBP members as well. So that's
24 the first piece.

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1 The second piece is enforcement. It's going to
2 be very difficult for PEBP to be able to enforce this. We
3 can definitely work with our network to say you must match
4 the network of the public option and provide those or match,
5 do a comparison on a month to month basis with that network.

6 But then you have -- is there a mechanism in
7 place, you know, other than just a manual process that every
8 month, you know, can you reconcile that because providers
9 change basically on a daily basis. Network providers change
10 on a daily basis, and so we potentially have an enforcement
11 issue there too.

12 That being said there were a lot of last minute
13 changes to Senate Bill 420, and there is going to be an
14 actuarial study that is going to be performed in the next --
15 you know, through this interim time I anticipate that there's
16 going to be some of this, a lot of this will be addressed in
17 the next legislative session. But when part of that
18 actuarial study is to really look at does it really impact
19 PEBP or not and so I think that we'll get some answers, you
20 know, through this study and get a lot of this -- there's a
21 lot of unknown in this bill and a lot of clarification that
22 will be necessary as well.

23 Like I said, PEBP plays a very small role in this
24 but it can definitely have a very significant member impact
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1 should the, you know, providers that we have access to be
2 limited because of this.

3 So I will stop there and take any questions.

4 CHAIRWOMAN FREED: Board members, any questions
5 about any of the bills that were approved or were not
6 approved?

7 MEMBER KELLEY: I guess so I have an easy
8 question. So I think you referred to four bills that were
9 approved and one you provided an explanation on. Are those
10 four bills the only ones that were approved then or passed
11 and will be signed or maybe not otherwise? I guess are those
12 the only four that impacted PEBP that have gone to the
13 Governor?

14 MS. RICH: Those are -- Laura Rich for the
15 record.

16 Those are the big ones, the main ones that have
17 impacted PEBP that have been signed by the Governor.

18 MEMBER KELLEY: A follow-up question then. So we
19 did -- PEBP did put a large fiscal note on SB139. What
20 happened with that bill?

21 MS. RICH: That one I believe died. Let me make
22 sure. I'm -- I'll look it up right now, but I believe that
23 one did --

24 MEMBER KELLEY: I'm sorry. I just can't quite --
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1 it's so busy I can't quite follow.

2 MS. RICH: Right. So that one died.

3 MEMBER KELLEY: It did die.

4 MS. RICH: Yeah.

5 MEMBER KELLEY: Okay. Thank you.

6 CHAIRWOMAN FREED: Okay. I'm not hearing anybody
7 jump up and down. So this was a discussion item. So I think
8 we can move on from that page to Agenda Item Nine, discussion
9 and possible action regarding the implementation of Assembly
10 Bill 48, including the option of a enrollment period for
11 certain retirees.

12 MS. RICH: So Laura Rich for the record.

13 In the interest of time, I think everyone
14 understands what this bill did and, you know, what the
15 problem was and -- and the intent to fix it. So I won't go
16 over again what this is and what it does.

17 But now we have to talk about how do we implement
18 it? The issue here is that typically our plan rules allow
19 for those members who -- those Medicaid or sorry, Medicaid
20 Exchange retirees who fall off the exchange for any reason.
21 They, you know, switch plans, outside of the benefits and
22 this has only been for state retirees up until now. They are
23 allowed a one-time reinstatement, but they are only allowed
24 that one-time reinstatement during open enrollment. So they

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1 have to wait until open enrollment and in order to come back
2 to PEBP and reinstate their benefits.

3 So given that, if we apply the same standard
4 rules to, that we have in policy today, in order to implement
5 Assembly Bill 48, these non-state members who have lost their
6 benefits now have to wait an additional year to get their
7 benefits reinstated. It just didn't make sense.

8 And so what we are proposing here is to those
9 non-state retirees who do fall into this category who want
10 to, who want to use that one-time opportunity to come back to
11 provide them with a special open enrollment period. And I
12 want to make it clear that it's only for this group, a
13 special enrollment period to come back and have their HRA
14 benefits reinstated.

15 And the thought here is that, you know, we don't
16 want to have a wave of people come back. And on top of that
17 we're going to be working with RPEN and other groups to get
18 the word out. And so I anticipate that, you know, we're
19 going to have a trickle in of retirees who, you know, we're
20 hearing about this. And so the thought here is that this --
21 this -- we just open it up this entire year and just allow
22 these retirees the entire year to come back and reinstate
23 their benefits and not have to wait for the next open
24 enrollment period to do so.

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1 Now, after -- after this year then we will go
2 back to the normal process that we have in RPEN rules where
3 we have to wait for open enrollment, but at least until this
4 year we're giving them that opportunity to come back and to,
5 you know, reinstate their benefits because they probably have
6 been waiting a long time anyway because they haven't had
7 benefits in years.

8 So I think that this really just is housekeeping
9 and the ability to implement this bill, how, you know, in a
10 more appropriate manner rather than making people wait for
11 another year to do that.

12 So the recommendation here is to allow a special
13 enrollment period from July 1 of 2021 to May 31st of 2022,
14 which is the last day of open enrollment, for non-state
15 retirees who are eligible for reinstatement of benefits as a
16 result of AB48.

17 MEMBER VERDUCCI: So Tom Verducci for the record.

18 I just had a question for Executive Officer Rich.
19 What would our outreach be in order to communicate with these
20 retirees in addition to RPEN? We have address listing,
21 newsletter. How would we do the outreach?

22 MS. RICH: Laura Rich for the record.

23 We -- we have some challenges to that because
24 some of these people have been -- you know, there are people
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1 who were dropped off eight years ago, right. So we don't
2 have -- we don't keep track -- when someone is terminated we
3 don't get new addresses. We don't get, you know, new contact
4 information. They have been terminated, and so at that point
5 we don't follow them anymore.

6 So there's not a lot of up-to-date addresses. We
7 could send a mailing and this is something that internally
8 we'll have to discuss, you know, with staff when is it most
9 appropriate. You know, but there's a potential to send a
10 mailing to the last known address and say, hey, you may be
11 eligible for benefits. You know, we can be proactive to that
12 degree. But, again, we are challenged by the fact that these
13 people could have moved. Quite honestly, there's probably a
14 large percentage, they are retirees. They -- they could be
15 passed away.

16 MEMBER VERDUCCI: So would it be possible perhaps
17 to work with RPEN and get an article in their newsletter,
18 maybe Facebook communication to get the word out just so if
19 someone has lost their benefits, get the HSA contribution,
20 they know that it's passed and they have that opportunity
21 available to them.

22 MS. RICH: Right. So we'll be working not just
23 with RPEN but probably with AFSCME me as well. We will
24 definitely try to get the word out in, you know, however we
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1 can -- however we can do so, newsletters, things like that.

2 MEMBER VERDUCCI: I'm happy to see this moving
3 through. And I'll be happy to make a motion on this as well.

4 CHAIRWOMAN FREED: Okay. Thank you.

5 Is there a second to the motion?

6 MEMBER BAILEY: For the record Don Bailey. I
7 second that motion.

8 CHAIRWOMAN FREED: Thank you, Mr. Bailey.

9 All right. It's been moved and seconded to ask
10 PEBP staff to move forward with a special enrollment period
11 from July 1st, 2021 to May 31st, 2022 for non-state retirees
12 who are eligible for reinstatement pursuant to Assembly Bill
13 48. Any discussion on that?

14 MEMBER KELLEY: I have just a question I guess.
15 So it's not -- so, Executive Officer Rich, I'm sorry. Can
16 you just -- so for state employees they get an enrollment
17 opportunity every other year so they just had one; is that
18 correct.

19 MS. RICH: Right. So this is actually a -- when
20 -- this is outside of that. So when a -- when a person drops
21 their Via Benefits they enroll outside of Via Benefits.
22 They -- they get terminated from the program and so, yes,
23 they would have that one-time opportunity to come back but
24 they have to wait until open enrollment. So this just

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1 basically matches what state employees have, what state
2 retirees have with non states because non states or sorry.
3 Non states did not have that one-time opportunity to come
4 back.

5 MEMBER KELLEY: And so when you say -- sorry.
6 I'm just trying to understand how it works. So when you say
7 one time, so, you know, Michelle retires. She's enrolled
8 through PEBP. She's done all of the right things and the,
9 you know, some great insurance agent convinces me that they
10 can put up so much better than what I'm getting from Via so I
11 switch and I'm already dropped from Via and I lose my HRA.

12 So then -- so the one time means I get to do that
13 once. I make the mistake once. And then during open
14 enrollment I can come back on. And do I get my HRA as if
15 there was never a break or how -- so I get my full HRA that I
16 earned for years of service?

17 MS. RICH: Your HRA -- Laura Rich for the record.

18 Your HRA is reinstated when you are reinstated.
19 And so let's say that most -- most of these folks do this
20 during Medicare open enrollment and so it happens let's say,
21 you know, in November, October, November and it's effective
22 in January. It's not until January, February that they
23 figure out, oh, wait a minute. I've -- I've messed up. And
24 so they then have to wait until open enrollment to come back.

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1 CHAIRWOMAN FREED: Yep.

2 MS. RICH: And they do not get that the HRA
3 benefit for those six months. And so when they do come back
4 they do get that HRA benefit reinstated, and so it eventually
5 does get reinstated, but there is a time period where they
6 are not receiving it.

7 MEMBER KELLEY: For the non-state retirees when
8 we offer this long period to draw them back in, they will get
9 their -- can they just -- like, how will it work with the
10 insurance plan I guess and then the HRA? So can they just
11 switch back into a Via one any old time or do they?

12 MS. RICH: So, you know, and I do not claim to be
13 a Medicare expert but Ms. Spinelli, I always -- I always
14 depend on her when it comes to Medicare stuff because she's
15 our Medicare SME in the office.

16 Do you mind chiming in here and providing some
17 background on this.

18 MS. SPINELLI: Not at all. Nancy Spinelli for
19 the record.

20 For retirees that are enrolled through a Medicare
21 plan, they have a, it depends on the plan that they are
22 enrolled in. If they have a Medicare Advantage plan their
23 open enrollment in that plan occurs during the Medicare Open
24 Enrollment which is in the fall and December 15th through or
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1 October 15th through December 7th and that's the only time
2 they can change that plan unless they move outside the
3 coverage area, and then the change to that plan would occur
4 on January 1st.

5 And then with the Medigap or the Medicare
6 supplement policies, those individuals, they can change their
7 plan throughout the year, but they have to go through --
8 currently they have to go through medical underwriting. So
9 what happens is if someone loses their plan, like Laura
10 mentioned, they enrolled during open enrollment in a plan
11 that's now through Via Benefits that plan would take effect
12 on January 1st. And if they wanted to switch their Medicare
13 Advantage plan they have until March to do that and they
14 could enroll through Via Benefits at that point, but it's not
15 -- they can't just change these plans any time of year. It's
16 during Medicare Open Enrollment.

17 But there is a bill that just passed that is
18 going to allow our, well, Medicare individuals who have
19 Medicare supplement plans to change their plan every year on
20 their birthday.

21 MEMBER KELLEY: Okay. So I guess -- thank you,
22 Nancy.

23 MS. SPINELLI: Okay.

24 MEMBER KELLEY: So while PEBP will open up the
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1 enrollment for, you know, this ten-month period in actuality
2 the period is much narrower because they only have a limited
3 opportunity to actually do that?

4 MS. SPINELLI: Well, yeah. We do have some
5 people who have switched their plan over to Via Benefits and
6 if -- if they are enrolled in a Via Benefits right now but
7 they haven't participated in the open enrollment period, our
8 non-state retirees, those individuals would be able to come
9 onto the plan as soon as they are notified and start their
10 HRA funding. So we do have people in that situation that are
11 still through Via Benefits, but they are not getting funding
12 because they had a gap in their coverage through Via at one
13 time.

14 And we've worked with those retirees to get them
15 enrolled back through Via Benefits but the problem is they're
16 non-state retirees and they can't come back to the plan. So
17 this bill would allow them to reinstate their benefits as,
18 you know, as soon as they complete their enrollment through
19 PEBP. So we have those individuals. And then we have other
20 ones that will have to wait until next year because they
21 can't change their plan at this point.

22 MEMBER KELLEY: Okay. I see it's going to be a
23 real challenge to communicate. It's, yeah, okay. Thank you.

24 MS. SPINELLI: You're welcome.
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1 CHAIRWOMAN FREED: Okay, Board members, it's been
2 moved and seconded, and so there is a motion on the floor.
3 Are you all ready to vote. Okay. So all in favor say aye.
4 Any opposed say no.

5 (The vote was unanimously in favor of the
6 motion.)

7 CHAIRWOMAN FREED: Okay. Motion carries. Thank
8 you.

9 With that we should move discussion and possible
10 action on remote participation options for the PEBP Board
11 meetings after June 1st.

12 MS. RICH: All right. So one is a -- this one
13 will be fun. I think it's a good discussion item to have.

14 You know, originally when this report was
15 written, AB253 had been heard and but it not yet passed
16 through the senate. It had been through the assembly and not
17 passed through the senate. The reason we are having a remote
18 Board meeting today is because it did pass and it was made
19 effective immediately.

20 So AB253, just it changes open meeting law to
21 allow for the continuation of virtual Board meetings such as
22 the ones we've had through the pandemic. This is really,
23 this is a discussion that needs to be, that needs to happen
24 among the Board members to really, you know, discuss how do
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1 we want to do this moving forward. Do we want to go back to
2 in person board meetings? Do we want to -- do we want to do
3 this virtually or do we want to maybe have a hybrid approach
4 where, you know, we're doing a little bit of both.

5 The other thing too is that we typically through
6 all of our contracts we require vendors to attend these Board
7 meetings. And so, you know, if we do a hybrid approach is
8 this something that we want vendors to attend in person. Do
9 we want vendors to attend -- are we okay with them attending
10 virtually. You know, there's a lot of travel involved and in
11 logistics involved, especially for these vendors that, you
12 know, don't get called up to the table and that aren't
13 participating actively in these discussions. Does it make
14 sense to force them to attend in person.

15 And then also, you know, for the public as well,
16 how do we want to open this up to the public? Do we want to
17 have a -- if we want to do these virtually do we want to have
18 an in person location? You know, these are just some of the
19 things that need to be discussed so that PEBP can move
20 forward. PEBP staff can moved forward and plan accordingly.
21 You know, it does take some planning to get locations. The
22 technology also has to exist as well.

23 So I know in our PEBP Board meeting in our
24 conference room we have -- we have some technology
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1 challenges. We've got to make some upgrades and things like
2 that which IT is definitely working on, but we would have to
3 -- so in the meantime we would have to get rooms that would
4 accommodate the use of technology if we were to do hybrid
5 approach. So for example we could probably use the
6 legislative building any time that, you know, if it's
7 available, and as long as we don't go into special session we
8 should be fine. So these are just some of the discussions
9 that we need to have as far as what Board members would
10 prefer moving forward.

11 The other thing that I do want to put out there
12 too is that, you know, we typically in the past we would have
13 a northern location and southern location. Is this something
14 we want to continue doing because just so that the Board is
15 aware, any time we have a location in Las Vegas PEBP staff
16 would -- someone from the PEBP staff would fly down there and
17 run those Board meetings because you do have to have their
18 technology involved. There's, you know, sign-in sheets and
19 agendas and et cetera, et cetera, and so there's some cost to
20 that as well which we are not opposed to.

21 But I just wanted to make sure that, you know,
22 put it out there that there is, you know, some -- some work
23 to that second location in the south. And so if we were to
24 make it a remote situation, is that something we would be

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1 open to or do we want to continue having a location in the
2 south, et cetera, et cetera.

3 So I'll leave it there. I think this is --
4 that's a good starting point for discussion and maybe having
5 the Board members each discuss what is their preference and
6 how does the technology work for you. Do you feel like, you
7 know, face-to-face is better. Do we want to have certain
8 Board meetings that maybe require face-to-face meetings and
9 then others we don't. So there's just some ideas there, but
10 this is a good discussion to have.

11 MS. RICH: This is Betsey.

12 I have one question. Have you gotten a lot of
13 feedback? I haven't seen it on any public comment that's
14 come in, but that's probably because COVID was still such
15 that everyone is working remote. But has the public given
16 any input regarding they missed having the in person
17 locations and they -- because I haven't seen anything come in
18 that way in public comment. It's like everyone has been
19 fine.

20 MS. RICH: Yeah, Laura Rich for the record.

21 I haven't seen anything. And, you know, I mean
22 just from, you can see it both ways, right. Virtual meetings
23 do provide for flexibility and access. It doesn't matter
24 where you're at. You can attend a Board meeting.

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1 MEMBER AIELLO: And mostly on this agenda and
2 none of the public comment that came in came in regarding
3 this item I don't think.

4 MS. RICH: Right. On the other hand we do
5 service retirees. There's a lot of retirees who, you know,
6 are not -- are not great with technology and they prefer
7 face-to-face. So there's -- there's benefits and downsides
8 to each -- each one of those.

9 MEMBER KELLEY: It's Michelle Kelley here.

10 Obviously I'm in Las Vegas. I think the remote
11 has worked quite well. You know, I think that there was some
12 learnings, especially around public comment. So saying that
13 I think everyone has kind of overcome those and we have all
14 got quite comfortable. And so I would -- I would be
15 supportive of staff's recommendation I think to kind of keep
16 the flexibility.

17 I would also say though that I would like to get
18 to know the Board members better and that's hard to do
19 remotely. You know, I think certainly, you know, we all
20 appear a little differently when we're not having time to
21 chat between agenda items and whatnot. So I would like to
22 have maybe pre-scheduled a couple of times a year where it's
23 face-to-face in Carson City because that's where the majority
24 are, and I would commit to coming down for those meetings.

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1 But as far as running a separate location in Las Vegas,
2 unless we hear otherwise from our participants, I think that
3 remote has kind of worked. So I would be supportive of
4 staff's recommendation.

5 VICE CHAIR FOX: Linda Fox for the record.

6 I agree with that. I think this is very
7 convenient meeting from home or from our offices, wherever
8 we're doing it. But I like the idea of I think once a year
9 is adequate, once a year in person meeting.

10 MEMBER LINDLEY: Tim Lindley for the record.

11 I agree, I do like the hybrid method. And the
12 once a year meeting in person is definitely probably
13 something we should do, especially come the November Board
14 meeting.

15 MEMBER VERDUCCI: Tom Verducci for the record.

16 You know, if we do open them up I'll be showing
17 up in person. You know, I like the idea that some of our
18 vendors, there's a big expense flying in. And if -- you
19 know, if they are not asked to come to a meeting and they are
20 showing up at each meeting we're wasting a lot of their
21 company expenses. And I think the hybrid approach has been
22 working, you know, very well and not everyone is vaccinated.
23 I mean, I'm vaccinated. I feel very safe showing up places,
24 but I think we continue giving people the choice as far as
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1 one mandated meeting a year in November. I think that's all
2 right and I'm all for option three. I think that one makes
3 the best sense.

4 MS. RICH: So I just want to jump in here. Laura
5 Rich for the record.

6 I think so the hybrid approach, the way that I
7 think staff was seeing this is we do have an in person
8 location and someone runs that in person location. Members
9 that want to show up in person show up in person, and members
10 that want to show up, you know, and use remote technology can
11 participate that way and same with the public.

12 So a hybrid approach in our minds was more of
13 we're doing both. We have an in person meeting and -- and
14 those who want to participate in person can. Those who
15 participate in, remotely can do that as well. So that's what
16 the hybrid approach is.

17 Now, we can do a combination of all of those. We
18 can do where sometimes we have in person meetings. Sometimes
19 we have remote meetings. So that's kind of -- that's how
20 we're seeing it. I think there needs to be some -- some
21 clarification as to if there's a hybrid approach is that --
22 is that what the Board wants to do is for every Board meeting
23 we have an in person location as well as that technology
24 component to it as well or do we want to do one or the other

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1 and we just decide every Board meeting how we're going to do
2 it? That's -- that's kind of what we're looking at.

3 CHAIRWOMAN FREED: This is Laura Freed.

4 I would -- I agree with what everybody said. And
5 Mr. Verducci raised a very good point about some people
6 remain unvaccinated, and I think all the time about my
7 employees who have underlying chronic illnesses who medically
8 can't get vaccinated.

9 So but to your question, Ms. Rich, you know, do
10 you -- do we always want to have that in person and that
11 virtual option. I think yes. And then hearing loud and
12 clear a couple of Board members would like to meet in person.

13 Board members, I'm just going to tell you I think
14 the rate-setting meeting in March, it would be my expectation
15 that everybody shows up in person. And the budget review
16 meeting, whether we do that in July in advance of September
17 budget submission or we do it in November in advance of
18 advance of gov rec's publication, that would be the other
19 meeting that I would expect everybody to be at in person.

20 But other than that, I would let you as Board
21 members use your best judgment and, you know, go with what
22 works for your schedule and your life. And if you want to
23 appear virtually that is, 90 percent of the time that's going
24 to be a-okay with me. That's my feelings on it.

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1 MEMBER AIELLO: This is Betsey. I have a
2 question.

3 Did you notice less public comment this past year
4 than you have had historically?

5 MS. RICH: Laura Rich for the record.

6 Absolutely not. I think -- I think we had over
7 an hour of public comment at our November Board meeting and
8 that's rare, but that happens even in person, so.

9 MEMBER VERDUCCI: Tom Verducci for the record.

10 You know, I think the way it's written with
11 option three looks pretty good. It doesn't really have any
12 mandates that require anyone to show up and it gives us
13 flexibility to change how meetings are to be run without
14 making one meeting a year mandated. Individuals show up or
15 maybe they are not in a position to do so. I think it's
16 worded perfectly right here with option three, my opinion.

17 CHAIRWOMAN FREED: That sounds like a motion.

18 MS. RICH: And as the Board I think one thing we
19 need to identify is the Board okay with vendors participating
20 remotely as well unless specifically asked to participate in
21 person.

22 CHAIRWOMAN FREED: I am.

23 MEMBER AIELLO: This is Betsey.

24 I think there are some meetings where vendors
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1 have been really highlighted or been involved in a lot of the
2 discussion and they should come but otherwise it doesn't make
3 sense.

4 CHAIRWOMAN FREED: Yeah, I agree with that. I
5 mean, and I think that the rate-setting meeting is one where
6 I would expect vendors to be in person. But generally, yeah,
7 I mean, I would love to say if the vendors, the cost and the
8 time and to save ourselves in our contract negotiations,
9 subsequently the cost and the time of them always showing up
10 in person.

11 MEMBER KELLEY: So it's Michelle Kelley here.
12 So, you know, I'm supportive of all of the
13 comments. I guess I would just say I think while flexibility
14 is good I do think it would be helpful to actually, if the
15 Chair expects people to be at two or three meetings let's
16 pre-designate them so that because some of our participants
17 will want to come and make public comment when they can see
18 us, you know like I mean. Same as us wanting to see each
19 other, public comment is probably the same.

20 You know, so if we can give people lots of notice
21 these are the planned in person meetings I think that would
22 be very helpful but otherwise I'm very supportive of the
23 hybrid model and happy to make a motion that matches what
24 staff have in the agenda papers.

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1 MS. RICH: So for clarification, I think every
2 Board meeting will have an in person location. If we're
3 going with option three every Board meeting will have an in
4 person location. Board members who would like to show up in
5 person are going to be welcome to show up in person or if
6 Board members who wish to participate remotely can
7 participate remotely unless there's a request by the Chair to
8 have all Board members show up in person, correct?

9 CHAIRWOMAN FREED: Yes. That is, yes, that
10 summarizes my feelings. And to Member Kelley I would say
11 again the March meeting is one where I would expect everyone
12 to be there in person, but I will let you guys choose whether
13 it's July or November that you would want to do the second
14 one where I think the most people would want to see our
15 little faces in person.

16 MEMBER KELLEY: I guess I'm saying if there's a
17 way to designate differences versus like hybrid for at least
18 March, you know, Board in person. Just so the expectations
19 of our participants or all of the Board, the majority of the
20 Board will be Carson City on this day. The other times, you
21 know, some of them will and others will be remote. That's
22 kind of just --

23 MEMBER AIELLO: This is Betsey.

24 I think that the expectation isn't that the Board
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1 goes to Carson City if they are in Vegas, right? You don't
2 have a Vegas location or no?

3 MS. RICH: We can have a Vegas location if that
4 is what the Board decides. It just complicates it a little
5 bit more because you have to have the technology to be able
6 to, you know, to accommodate it.

7 MEMBER AIELLO: I -- this is Betsey.

8 I think at least we used to, if we had a northern
9 location we almost always had to have a southern location
10 because the public was upset if they had to be remote in one
11 part of the state and not necessarily in the other. In fact,
12 we would open up rural but we did have more -- more people.
13 But my concern would be if we only had a physical location in
14 the north there might be problems and so that's where I bring
15 up the cost to PEBP.

16 If we roll with it this way and nobody is ever
17 showing up in Las Vegas and we've flown someone down there
18 and paid for a site and paid for a room then we might need to
19 readdress. But I'm concerned if we only have a physical
20 location in the north there might be some public concern.

21 MS. RICH: Laura Rich for the record.

22 Traditionally the Las Vegas location does not get
23 as much participation, not to say there's none but there's
24 usually only a couple of people there for public comment, you
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1 know, at the most. That's -- it's not common that we have a
2 huge crowd in -- in the south.

3 MEMBER AIELLO: And this is Betsey.

4 I'm -- because you have a history with PEBP I'm
5 comfortable with what you feel. I'm working with a different
6 history.

7 MEMBER VERDUCCI: Tom Verducci for the record.

8 So if we were going to make any wording changes
9 to option three what might work is throwing in in person
10 meetings may be mandated by the Board Chair. I think that
11 just opens a degree of flexibility, and we're not saying
12 we're doing one a year or two. And it doesn't also have a
13 mandate that -- a mandate that we use hybrid approach but it
14 does leave some flexibility for the Chair to call a meeting
15 where it's mandated in person.

16 MEMBER LINDLEY: Tim Lindley. I would second
17 that if that was a motion.

18 MEMBER VERDUCCI: Yes. Thanks, Tim. I'll make
19 that a motion. Tom Verducci for the record.

20 CHAIRWOMAN FREED: Okay. Board members, it's
21 been moved and seconded to approve option three and -- and
22 giving the Chair the ability to determine that one or two
23 meetings per year should be all of us in person. You know,
24 but again there would always be a conference bridge to the
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1 south. That's typically what's been done. Even before the
2 pandemic we had conference bridges open for people to comment
3 in the south and I would continue with that.

4 Anyway, so that's the motion.

5 MEMBER VERDUCCI: Tom Verducci. And, Chair
6 Freed, I wanted to be clear on the wording here.

7 CHAIRWOMAN FREED: Okay.

8 MEMBER VERDUCCI: The one sentence that I would
9 like to add if this is agreeable -- agreed upon is in person
10 meetings may be mandated by the Board Chair. And I wanted to
11 leave out one or two, just if there's any unforeseeable
12 reasons where one or two does not fit in.

13 CHAIRWOMAN FREED: Understandable.

14 Does the member who seconded agree to that?
15 Sounds good.

16 Board members, you heard the motion all in favor
17 say aye. Any opposed nay.

18 (The vote was unanimously in favor of the
19 motion.)

20 CHAIRWOMAN FREED: Okay. Motion carries. Thank
21 you for the discussion.

22 With that I think we can go back to our second
23 public comment period under Agenda Item 11.

24 MR. MARTIN: For those who have joined for public
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1 comment your name or the last four digits of your phone
2 number will be announced, and you'll be advised you may now
3 make your comment.

4 Caller with the last four digits 7338, please
5 slowly state and spell your name for the record and you may
6 make your comment. Press star six to unmute.

7 MS. MALONEY: This is Priscilla Maloney again
8 with AFSCME Retirees. That's P-r-i-s-c-i-l-l-a
9 M-a-l-o-n-e-y.

10 I had a little difficulty unmuting. Can you hear
11 me, Chair Freed?

12 MR. MARTIN: Yes, we can hear you.

13 MS. MALONEY: Thank you. So first of all I would
14 be remiss and I was remiss if I didn't thank Don Bailey and
15 Dr. Urban for their service to this program for an
16 extraordinarily difficult year. Don Bailey goes back farther
17 and has seen us through some real rocky times prior to this,
18 but I think anybody who stepped up to the plate for public
19 service this year deserves a huge gold star. So I want to
20 thank them for that.

21 On Agenda Item Five, specifically Mr. Bailey's
22 and Dr. Urban's comments along with Dr. -- Mr. Verducci and
23 Ms. Kelley's comments, AFSCME retirees also have concerns
24 about anything that approaches an appearance of an all

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1 deliberate speed approach to getting our request in in a
2 timely manner as -- as quickly as possible to the Governor's
3 program, the portal, for requesting ARP funds to replenish
4 what was lost or damaged through the effects of the pandemic.

5 I would suggest that the Board consider that in
6 this 31st Special Session last summer, so a year ago, AB3 was
7 introduced on July 15th and voted. The final vote was on
8 July 19th. And in four days section 131.1 of AB3 had the
9 so-called employer premium holidays cut which saved, well,
10 which resulted in approximately 24,000,000 taken out of the
11 program by virtue of that cut and that was done.

12 We talked a lot this morning about one-time
13 spending and this was a one-time cut that was done literally
14 in four days. I recognize that there was a tremendous amount
15 of meetings and dialogue going up to the decision to give the
16 employers in PEBP a premium holiday. But I would suggest to
17 you that when we go forward and look at what we're going to
18 be asking the American Rescue Plan Act dollars to be spent on
19 that it's not as -- it's complicated, yes, but it's not --
20 it's not impossible. I mean, this act was passed with the
21 idea of specific relief to both state and local governments
22 for this kind of, exactly this kind of purpose.

23 So we're going to be looking forward to hearing
24 on the July Board meeting my understanding of the decisions
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1 made around Agenda Item Five is that there will be some sort
2 of report on the efforts made up to that point about trying
3 to access those dollars with maybe even some more specific
4 requests like restoring the long-term disability and the life
5 insurance cuts that could be done very quickly.

6 And then finally so I believe Board Member Aiello
7 said that she had not heard in public comment anything about
8 Agenda Item Ten's proposals on the hybrid access versus other
9 kinds of access. And I would say for my personal experience
10 with this session that even though there were concerns,
11 comments and some criticisms of the remote access from
12 certain groups or folks who had that individual experience I
13 also got a lot of feedback, certainly from our members. The
14 AFSCME retirees older and not as -- not as say Zoom savvy as
15 others.

16 But overall there was an appreciation for what I
17 believe was Member Kelley's point which is if you have a life
18 situation and I think Chair Freed touched on this, a life
19 situation where for whatever reason remote access is safer
20 and more convenient for you to have a hybrid model in place
21 is a brilliant idea.

22 And I'm very excited to hear different parts of
23 our civic life because I'm hearing this also from city
24 council, county commission, these kind of conversations going
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1 on. And I think going forward we learned a lot this last
2 13 months about different ways of accessing civic engagement
3 and public comment and involvement. So I think that that's a
4 great vote and I'm really glad that -- that different options
5 now are accessible to whatever the person who wants to get
6 involved in.

7 So thank you again to the Board for all your hard
8 work. I know these are extraordinary times and don't think
9 that it's -- it's -- it's definitely appreciated and noticed.
10 So thank you.

11 MR. MARTIN: Caller with the last four digits
12 4891, please state and slowly spell your name for the record.
13 Press star six to unmute.

14 MS. LAIR: Thank you. And good morning. For the
15 record my name is Kerri Laird spelled K-e-r-r-i L-a-i-r-d.
16 I'm the executive director of RPEN, the Retired Public
17 Employees of Nevada. We are a nonprofit membership
18 organization founded in 1976 and we currently have close to
19 8,000 dues paying members.

20 I would like to echo and give a big ditto on the
21 earlier remarks made at the start of today's meeting by our
22 legislative advocate Marlene Lockard and also from members
23 who also spoke from within our employee advocacy groups. We
24 too hope to see PEBP benefit with some of those American
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1 Rescue Plan Funds and also those other funds that were
2 mentioned during this meeting that will expire come
3 December 31st, and we hope you'll be able to put some of that
4 money back where it belongs to all of the participants in
5 this program.

6 I also look forward to working with Laura Rich
7 and the PEBP staff to get the word out to as many -- in as
8 many ways possible to all of our members who receive a
9 newsletter from us six times a year, and every issue does
10 include PEBP promissory from Laura Rich.

11 And finally I would also like to express RPEN's
12 appreciation and gratitude to Ms. Urban as well as Don Bailey
13 for his eight years of service sitting on this Board. As Don
14 said earlier, it is not an easy Board to sit on. And we do
15 thank him for all of his efforts to our members and PEBP
16 participants. Thank you very much.

17 MR. MARTIN: Caller with the last four digits
18 8853, please slowly state and spell your name for the record
19 and star six to unmute.

20 MR. UNGER: Doug Unger, D-o-u-g U-n-g-e-r,
21 Southern Nevada Government Affairs Representative, Nevada
22 Faculty Alliance and UNLV Employee Benefits Committee.

23 I would also like to thank Don Bailey and
24 Dr. Urban for their service on the Board. It's very much
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1 appreciated by Nevada Faculty as we've listened to you and
2 watched you. And there are in this virtual space I think
3 actually more of us listening than we listened before. So
4 I'm all in favor of the hybrid model.

5 I would like to thank the Board for discussion of
6 Agenda Item Five, the lively discussion and support for state
7 employees that you've voiced. I would also like to state for
8 the record that the Nevada Faculty Alliance reached out to
9 our congressional delegations early on in the American Rescue
10 Plan Funds legislative process asking guidance from the
11 United States Treasury.

12 We received some general guidance and even some
13 more specific to the restoration of Public Employee Benefit
14 Funds in Nevada from American Rescue Plan Funds. It seems
15 clear to our congressional delegation that our restoration of
16 PEBP funds is intended by the legislation.

17 Furthermore, I would like to point to two
18 questions in the frequently asked questions from the U.S.
19 Treasury that clearly indicate that we qualify and we qualify
20 with a priority, especially when you look at the counter
21 language and frequently asked question number 43 in that
22 document.

23 I agree that the money that was taken back in AB3
24 during the special session last summer should be what is
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1 asked to be restored. That fits most precisely within the
2 American Rescue Plan, legislation guidelines according to
3 everyone we have consulted. If we start there with 24 to
4 25,000,000 in restoration we can do a whole lot for getting
5 our plans back in better shape for financial year '23.

6 I would also like to answer Executive Officer
7 Rich's comment about one-time money. Having followed the
8 Nevada Legislative process for almost two decades I want to
9 say that all money in Nevada is one-time money. We have been
10 whiplashed by the budget process so so many times, seeing one
11 thing promised and then cut back. In the next legislature
12 we've seen funds that we expected not delivered, and we've
13 seen funds that were delivered to completely unanticipated
14 ideas and goals according to this biannual legislation that
15 happens which may not be the best way to make the best policy
16 with all do respect to our legislators.

17 All money in Nevada is one-time money. We
18 shouldn't accept the six and a half percent budget reduction
19 on the grounds that it may never be restored to the base. If
20 there's one-time money to restore it we should restore it and
21 see what happens next session.

22 Thank you all for your work and your public
23 service. We very much appreciate it. And have a great rest
24 of the week and look forward to seeing you next meeting.

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1 Thank you.

2 MR. MARTIN: Caller Carter Bundy, please slowly
3 state and spell your name for the record and press unmute and
4 make your comment.

5 MR. BUNDY: This is Carter Bundy with AFSCME,
6 C-a-r-t-e-r B-u-n-d-y.

7 Board members, first of all we want to thank
8 Dr. Urban and Member Bailey for their service. This is an
9 incredibly different job. We all know that. And we're
10 really proud of them for stepping up to serve state employees
11 and retirees. Thank you.

12 Secondly we want to thank the entire Board for
13 participating in Senate Bill 360 for working with us to
14 ensure that an employer organization does get a spot on this
15 Board through the Governor of course. And I can commit to
16 you that our executive board will work very hard to identify
17 nominees with experience and some kind of background that
18 will contribute to PEBP and to the health of our members and
19 retirees.

20 We also want to commend you for continuing with
21 hybrid. It's obviously not possible for everyone to
22 physically be at meetings and we think this increases
23 participation and is a good way for members to have a voice.

24 Finally, we just want to just add a couple of
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1 points to the previous comments about the American Rescue
2 Plan. AFSCME was heavily involved in lobbying for state
3 locally as you might imagine all the way going back to March
4 of 2020. After the CARES Act we fought month after month to
5 try to get additional aid as states and especially Nevada
6 were incredibly harder hit and revenue really fell.

7 In the course of that lobbying we made it crystal
8 clear and it was echoed back to us by Speaker Pelosi and
9 members in both parties that the money should be able to be
10 used for almost anything.

11 Now, there were two major restrictions put into
12 the actual ARP. It can be used for tax cuts. It can be used
13 to shore up pensions. Outside of that virtually all of the
14 2.7 billion dollars is flexible. It's not only flexible in
15 terms of how we can use it, the entire point of the ARP was
16 to restore cuts that happened because of this terrible
17 pandemic. The cuts that happened to PEBP were largely due to
18 the pandemic and we think that this is a perfect use of it.

19 As far as it being one-time money I -- I
20 certainly think Dr. Unger made good points. We do understand
21 there is a difference though in legislators minds between
22 one-time money and recurring funds. However, it is worth
23 noting that you are allowed to use this money through the
24 middle of FY25 until December 21st 2024. So even if you view
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1 it as one-time money it's one-time money that can be used for
2 FY22, '23, '24, '25. So that's a four-year window in which
3 to use this.

4 Other agencies in this state and certainly states
5 all around the country are aggressively pursuing ways to
6 restore cuts that happened to their interest areas, and we
7 certainly hope that PEBP will look at this more closely and
8 aggressively seek to restore cuts because that's precisely
9 what ARP funds are for.

10 We thank you for your time. And again thank you,
11 Dr. Urban, and, Member Bailey, for your service.

12 MR. MARTIN: Caller Marlene Lockard, please
13 slowly state and spell your name for the record. Unmute and
14 press --

15 MS. LOCKARD: Good afternoon, members of the PEBP
16 Board. My name is Marlene Lockard, L-o-c-k-a-r-d. And I am
17 representing the Retired Public Employees of Nevada.

18 Much of my follow-up public comment has been
19 stated already, but I do want to thank the Board members very
20 much for their aggressive push and sense of urgency to apply
21 for these ARP funds. I think the plan must include all cuts
22 that have been made as a result of the directive from the
23 Governor's Office.

24 With respect to the one-time money comment, I
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1 disagree. If the money is put back into the budget as if
2 there were no cuts that is part of PEBP's base budget that
3 would have been fully submitted to the legislature. So if
4 the cuts are restored next legislative session that's part of
5 PEBP's base and it should be included.

6 And I do hope that we can be positive with our
7 approach to the Governor's Office and as was said by another
8 Board member to have our staff be the champion for the
9 participants of PEBP and to restore these budget cuts.

10 I fear that it may not -- it cannot be done kind
11 of concerns will make us fall prey to inherent bureaucracy
12 that exists, and I think we need to cut through the
13 bureaucracy and think about the needs of real humans in this
14 process.

15 So thank you very much, Board. Your comments
16 were wonderful and we appreciate the role you are playing to
17 help everyone be made whole. Thank you.

18 MR. MARTIN: Caller with the last four digits
19 2237, please slowly state and spell your name for the record
20 and make your comment.

21 That caller dropped off, Madam Chair. So I
22 believe we are finished with public comment.

23 CHAIRWOMAN FREED: Okay. Thank you very much.

24 With that we are ready to adjourn this meeting.
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1 It is 12:49. And I thank you Board members, particularly Dr.
2 Urban and, Mr. Bailey, and we will miss both of you. And,
3 again, thank you for stepping in in a crisis year. I know it
4 was no fun.

5 And, Mr. Bailey, you've seen the ups. You've
6 seen the downs. Like the executive officer said, if you're
7 not showing up at public comment to yell at us then I don't
8 know what.

9 So thank you very much everybody. Have a great
10 weekend, and we are adjourned.

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1 STATE OF NEVADA,)
2 CARSON CITY.) ss.

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I, KATHY JACKSON, Official Court Reporter for the State of Nevada, Public Employees' Benefits Program Board, do hereby certify:

That on Friday, the 11th day of June, 2021, I was present on a teleconference for the Public Employees' Benefits Program, Carson City, Nevada, for the purpose of reporting in verbatim stenotype notes the within-entitled public meeting;

That the foregoing transcript, consisting of pages 1 through 155, is a full, true and correct transcription of my stenotype notes of said public meeting.

Dated at Carson City, Nevada, this 21st day of June, 2021.

KATHY JACKSON, CCR
Nevada CCR #402

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	absorbing (2) 31:15;33:18	68:3;81:21;101:23; 104:10;120:9;129:10	adds (2) 112:22,23	99:14;107:13; 114:17;120:16; 123:12;139:11; 141:24;143:7;146:7; 152:10;154:3
\$	accept (3) 18:8;45:12;149:18	actions (1) 63:18	adequate (1) 134:9	against (1) 45:21
\$13 (3) 23:11;25:6;30:23	accepted (4) 9:18;114:24;115:4; 116:8	active (4) 37:14;40:21;67:22; 75:16	adjourn (1) 153:24	agencies (19) 8:20;27:16;34:8; 35:8;42:7;43:10; 44:21;47:11;51:17; 58:1,12,18;59:15; 65:10;68:22;72:16; 76:7;113:16;152:4
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