



# Public Employees Benefit Program

April 26, 2022

Quarterly Update –3rd Quarter Plan Year 2022

WTW's Individual Marketplace

# The Public Employees Benefit Program Executive Dashboard

Quarterly Update – 3rd Quarter Plan Year 2022

## Executive Summary

### Plan Enrollment:

- At the end of FY Q3 2022, PEBP's total enrollment into Medicare policies through WTW's Individual Marketplace decreased to 11,283. Since inception, 114 carriers have been selected by PEBP's retirees with current enrollment in 1,717 different plans.
- Medicare Supplement (MS) plan selection decreased to 88% of the total population with the majority of participants selecting AARP and Anthem BCBS of Nevada as their insurer; each carrier holds plans for 6,223 and 2,075 enrollees respectively. The average monthly premium cost for MS plans remained consistent at \$146.
- The percentage of Medicare Advantage (MA or MAPD) plans selected increased to 12%. Top MA carriers include Aetna with 493 individual plan selections and AARP with 269 individual plan selections. The average monthly premium cost to PEBP participants decreased to \$12 compared to the prior quarter of \$13.

### Customer Satisfaction:

- In Q3 2022, PEBP participant satisfaction with Enrollment Calls had an average satisfaction score result of 4.7 out of 5.0 based on 39 surveys returned.
- For Q3 2022, the average satisfaction score for Service Calls was 4.3 out of 5.0 based on 492 surveys returned.
- The combined average satisfaction score for Enrollment Calls and Service Calls was 4.3 out of 5.0 for Q3 2022.

### Health Reimbursement Arrangement:

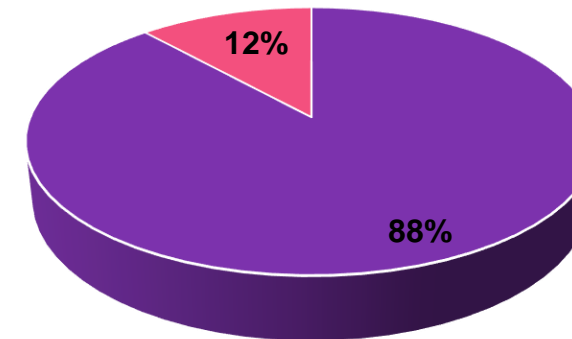
- At the end of Q3 2022 there were 13,254 Health Reimbursement Arrangement (HRA) accounts for PEBP participants.
- There were 85,427 claims processed in Q3, with 96% being submitted via Auto-Reimbursement, meaning that participants did not have to manually submit 81,744 claims for Premium Reimbursement.
- The total reimbursement amount processed for Q3 was \$8,047,314.

## Summary of Retiree Decisions and Costs

Retiree Plan Selection Through 03/31/2022		Previous Qtr.
Total enrolled through individual marketplace	11,283	11,374
Number of carriers**	114	114
Number of plans**	1,717	1,708

Plan Type Selection Through 03/31/2022		Previous Qtr.
Medicare Advantage (MA, MAPD)	1,320	1,306
Medicare Supplement (MS)	9,968	10,088

### Medical Enrollment



"The percentage of Medicare Advantage plans selected by PEBP's retiree population is now slightly below the average for WTW's Book of Business."

■ MS ■ MA

Plan Type	Number Enrolled	Average Premium
Medicare Supplement	9,968	\$146
Medicare Advantage (MA, MAPD)	1,320	\$0 / \$12
Part D drug coverage	6,592	\$23
Dental coverage	1,057	\$38
Vision coverage	2,014	\$11

\*\* Reflects total carriers and plans that PEBP participants have enrolled in nationwide, since inception.

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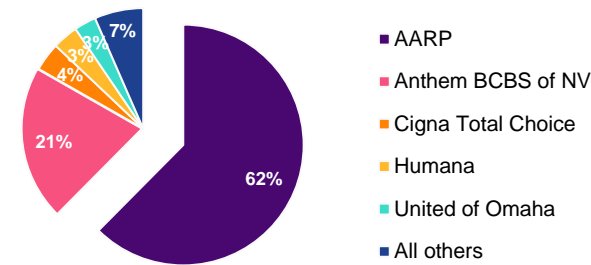
## Summary of Retiree Carrier Choice

Top Medicare Supplement Plans	Total
AARP	6,223
Anthem BCBS of NV	2,075
Cigna Total Choice	380
Humana	343
United of Omaha	294

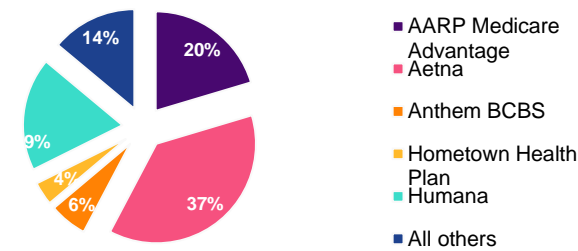
Top Medicare Advantage Plans	Total
AARP Medicare Advantage	269
Aetna	493
Anthem BCBS	81
Hometown Health Plan	50
Humana	243

Top Medicare Part D (RX)	Total
AARP Part D from United Healthcare	1,667
Aetna Medicare Rx (SilverScript)	1,041
Cigna HealthSpring	95
Humana	2,442
WellCare	1,165

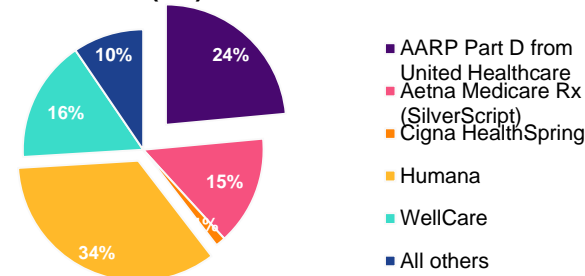
Medicare Supplement Carrier Choice



Medicare Advantage Carrier Choice



Part D (RX) Carrier Choice



Cost Data For MS Plans	Cost
Minimum	\$22
Average	\$146
Median	\$140
Maximum	\$481

Cost Data For MA Plans	Cost
Minimum	\$0
Average	\$12
Median	\$0
Maximum	\$194

Cost Data For Part D (RX)	Cost
Minimum	\$6
Average	\$23
Median	\$16
Maximum	\$127

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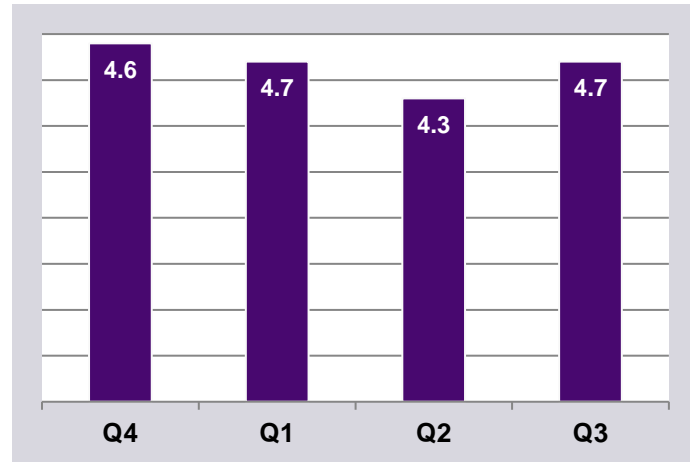
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## Customer Service – Voice of the Customer (VoC)

Individual Marketplace conducts phone and email surveys of all participant transactions. Each survey contains approximately 12-16 questions. Responses are scanned by IBM Mindshare Analytics which expose trends within an hour, alerting Individual Marketplace of issues and allowing for real-time feedback and adjustments

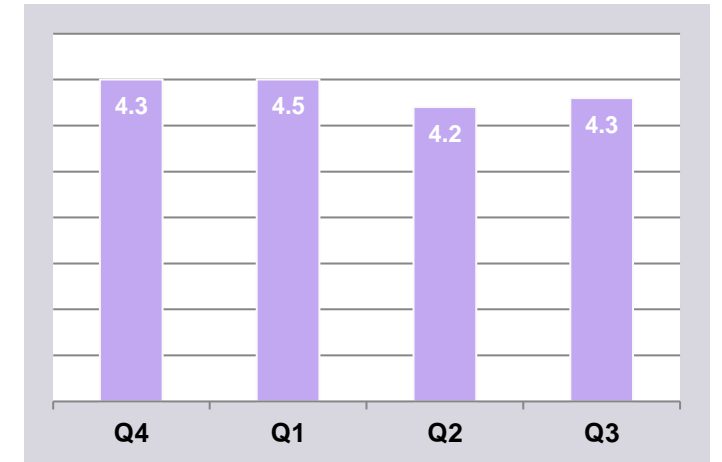
### Q3 Enrollment Satisfaction

CSAT score	Count	%
5	32	82%
4	4	10%
3	2	5%
2	0	0%
1	1	3%
	<b>39</b>	<b>100%</b>



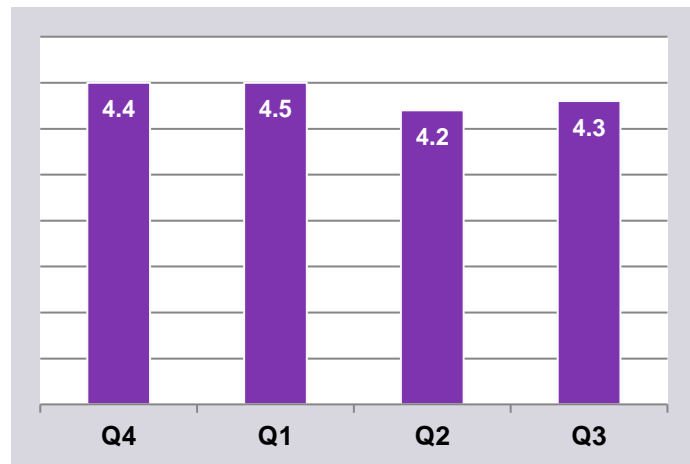
### Q3 Service Satisfaction

CSAT score	Count	%
5	314	64%
4	85	17%
3	45	9%
2	15	3%
1	33	7%
	<b>492</b>	<b>100%</b>



### Q3 Enrollment & Service Combined

CSAT score	Count	%
5	346	65%
4	89	17%
3	47	9%
2	15	3%
1	34	6%
	<b>531</b>	<b>100%</b>

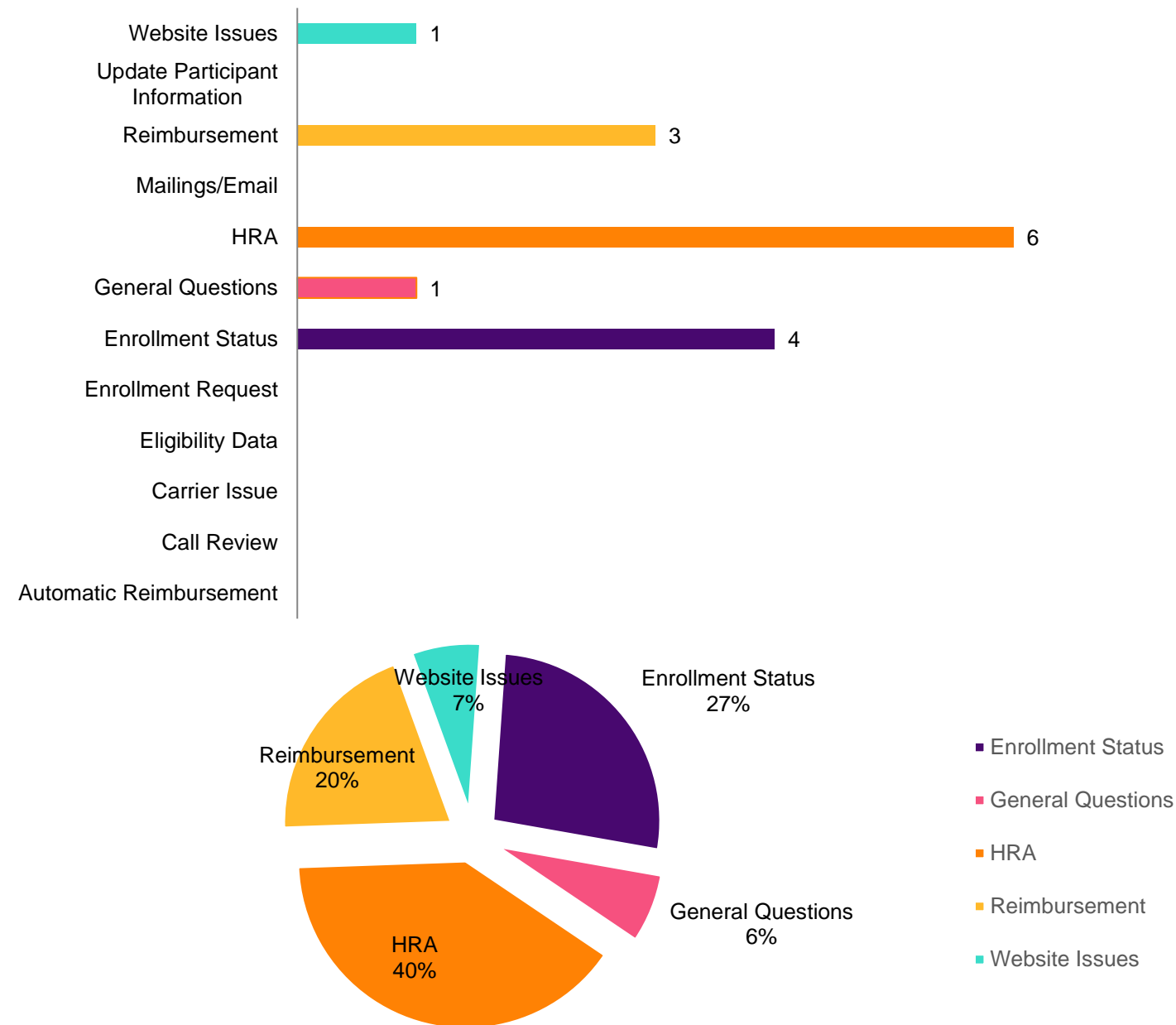


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## Customer Service – Issues Log Resolution

Each quarter a certain number of participant inquiries are received by both PEBP and WTW that require escalation to Individual Marketplace Issues Log. Items on the Issues Log are carefully evaluated and continuously monitored by seasoned WTW staff until resolution is reached. The total number of inquiries reviewed during Q3-PY22 is 15 and are associated with the following categories:



## Health Reimbursement Account (HRA)

Claim Activity for the Qtr.	Total
HRA accounts	13,254
Number of payments	48,280
Accounts with no balance	7,340
Claims paid amount	\$8,047,314

Claims By Source	Total 85,427
A/R file	81,744
Mail	15,477
Web	9,825
Mobile App	2,551

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## Performance Guarantees\*

Category	Commitment	Outcome	PG MET
Claims Turnaround Time	≤ 2 days	0.49 Days	Yes
Claim Financial Accuracy	≥ 98%	99.67%	Yes
Claim Processing Payment Precision	≥ 98%	Results not Reported on Benefits Accounts	Yes
Reports	≤ 15 business days	Met	Yes
HRA Web Services	≥ 99%	99.87%	Yes
Benefits Administration Customer Service Avg. Speed to Answer	≤ 2 min. in Q1 ≤ 90 sec in Q3 and Q3 ≤ 5 minutes in Q4  Note - Quarters listed are based on calendar year.	4 Minutes 16 Seconds	No
Benefits Administration Customer Service Abandonment Rate Annual	≤ 5%	Annual	N/A
Customer Satisfaction	≥ 80%	90.77%	Yes
Disclosure of Subcontractors	100%	100%	Yes
Unauthorized Transfer of PEBP Data	100%	100%	Yes

\*Please note that the performance guarantees are ultimately measured based on the annual audit period.

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## Operations Report

### Nevada PEBP Dental Premium File Delays

Historically, WTW received a monthly dental premium file for the Nevada PEBP dental plan where the premium information included in the file was loaded as claims against the participants Health Reimbursement Arrangement (HRA) and would be reimbursed to the participant accordingly. With the transition from LifeWorks to Benefitfocus for 2022, the files stopped due to issues that Benefitfocus faced with the transition. Nevada PEBP communicated the file delays to participants and encouraged them to submit manual claims for reimbursement if they needed to receive reimbursement for their dental premiums while the file issues were being resolved. With the transition of Nevada PEBPs data vendor back to Lifeworks we are hopeful that the previously used dental premium file can be quickly reestablished so WTW can start to receive the file, load claims, and reimburse participants.

### Spring Retiree Meetings

WTW and Nevada PEBP held two days of retiree meetings on March 21 and 22 focusing on participants ageing into Medicare as well as those already enrolled but who may need help with their HRA. Due to the pandemic, the meetings were held virtually, and recordings of the meetings were added to the main page of our Nevada PEBP specific Website at <https://my.viabenefits.com/PEBP> for participants to reference and review. The below chart includes data on the number of members who registered for the meeting and who attended.

Meeting Date/Time	Meeting Type	Registered	Attended
March 21 - 9:30 am PT	Pre-Medicare/Ageing into Medicare	126	104
March 21 – 12:00 pm PT	HRA/Medicare Open Enrollment	77	54
March 22 – 11:30 am PT	Pre-Medicare/Ageing into Medicare	96	93
March 22 - 2:00 pm PT	HRA/Medicare Open Enrollment	74	45

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### Communications:

Below is information on communications that were mailed or will be coming up.

- Spring Newsletter
  - The newsletters that WTW sends to participant is being renamed The Groove. The spring version of the newsletter is sent to participants via email will be sent starting in mid-May. The intent of this communication is to educate participants on Medicare.

### HRA Available Balance Cap of \$8,000:

Effective May 31, 2022, we will process the annual \$8,000 HRA Available Balance Cap reduction on accounts with a balance of more than \$8,000. Nevada PEBP sent communications related to this Cap in late March to participants with balances of \$7,000 or greater as they are expected to be the ones who will potentially be impacted by the Cap this year. The goal of the communication was to remind participants to submit claims against their balance to reduce it below the \$8,000 threshold so they do not lose any of their HRA balance. Once funds are removed because they are over the \$8,000 cap, they cannot be added back.

