



JOE LOMBARDO
Governor



STATE OF NEVADA
PUBLIC EMPLOYEES' BENEFITS PROGRAM
3427 Goni Road, Suite 109 | Carson City, Nevada 89706
Telephone 775-684-7000 | 702-486-3100 | 1-800-326-5496
<https://pebp.nv.gov>

CELESTENA GLOVER
Executive Officer

JOY GRIMMER
Board Chair

January 23, 2025

SCOTT KIPPER, COMMISSIONER
NEVADA DIVISION OF INSURANCE
1818 E. COLLEGE PARKWAY, SUITE 103
CARSON CITY, NV 89706

Re: System for Resolving Complaints of Insured Annual Report pursuant to NAC 287.750 for 2024

Dear Commissioner Kipper:

In accordance with Nevada Administrative Code (NAC) 287.750, the Public Employees' Benefits Program (PEBP) presents to the Nevada Division of Insurance (DOI), this report to obtain approval of a system for resolving complaints. DOI requires insureds to provide information for three specific areas pursuant to NAC 287.750.

- 1) NAC 287.750(1)(a), the "name and title of the employee[s] responsible for the system for resolving complaints":

Leslie Bittleston, MSQA, Quality Control Officer, PEBP
Gina Reynolds, Quality Control Analyst, PEBP
Allison Walker, Quality Control Analyst, PEBP

- 2) NAC 287.750(1)(b), a "description of the procedure used to notify an insured of the decision regarding his or her complaint":

- A. A complaint may be made to PEBP by any participant, provider, or vendor, regarding any PEBP process or service. Complaints may be submitted in person, in writing, by email, over the phone, or other methods of communication.
 - Some complaints begin with PEBP's Member Services Unit (MSU) who attempt to resolve the issue. If the issue cannot be resolved by MSU, MSU forwards the issue, as a compliant, to the Quality Control Unit.
 - Some complaints are routed directly to the Quality Control Unit.

- B. Quality Control Staff logs all complaints received in the Unit for tracking and reporting purposes with the pertinent details of the complaint and reaches out to the complainant within two (2) business days to acknowledge receipt of the complaint. Complaints will be acknowledged in the same manner as they were received.
- C. Quality Control Staff investigate all complaints by reviewing the complainants file and/or reaching out to complainant and/or vendors for additional information. Additionally, Quality Control Staff review master plan documents, NRS, and NAC to ensure the determination is in accordance with plan documents and state law.
- D. Quality Control Staff will make a determination on the complaint within seven (7) business days of receipt. In cases where more time is needed, Quality Control Staff will reach out to the complainant every seven (7) business days to provide a status update.
- E. Once the determination is made, Quality Control Staff will prepare and sign a written response which is mailed to the complainant.
- F. Quality Control Staff may note a complainants account in the current PEBP Client Relations Management Tool but will not include any Personal Health Information (PHI).

3) NAC 287.750(1)(c), a “copy of the explanation of rights and procedures that will be provided to insureds”.

PEBP provides a great deal of information to participants in the form of annual notices, newsletters, mailings, and master plan documents. All master plan documents include a section on complaints and appeals.

- Notices, newsletters, and mailings can be found [here](#).
- Master plan documents can be found [here](#).

Summary Data for 2024

Complaints are defined as something believed to be wrong or unfair. This definition of complaints does not include appeals or external reviews which are tracked separately. There were 349 complaints received and resolved in the year 2024 calendar year. Roughly 42% of complaints were directed at PEBP for eligibility and enrollment issues, 33% were directed at PEBPs Third Party Administrator, UMR, for claims processing, pricing issues, and denials, 14% were directed at Express Scripts for pricing and prescription coverage issues, and the remaining 11% were directed towards other PEBP vendors for reimbursement issues.

There was a 41% decrease in complaints in 2024 (349) as compared to 2023 (597) that were handled by Quality Control Staff. This is attributed to MSU placing more emphasis on resolving issues prior to escalating them to Quality Control; especially regarding default coverage for new hires which is outlined in Nevada Revised Statutes (NRS) 287.045.(8).

Sincerely,

Leslie Bittleston

Leslie Bittleston, MSQA
Quality Control Officer
Public Employees' Benefits Program