



ACCREDITED

CORE

Expires 04/01/2021

BRIAN SANDOVAL
Governor

STATE OF NEVADA
PUBLIC EMPLOYEES' BENEFITS PROGRAM

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PATRICK CATES
Board Chairman

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Executive Officer

Approved: September 27, 2018

BACKGROUND

The Public Employees' Benefits Program (PEBP) administers a group health, life insurance program which offers comprehensive medical, prescription drug, dental, vision, life, and long-term disability insurance. Our organization is responsible for designing and managing a quality health care program for approximately 42,000 primary participants and 28,000 covered dependents, totaling over 70,000 lives.

PEBP is governed by a ten member Board. The PEBP Board consists of members appointed by the Governor, including an Executive Officer who directs the program and serves at the pleasure of the Board. PEBP works to ensure the PEBP Board consists of members with varied and relevant education and professional backgrounds. The Board's purpose is to adopt regulations, Nevada Administrative Code (NAC), enforcement, and policy for the agency. The Board approves plan benefit designs for health plans and annual rates for all programs and services sponsored by the program.

Funding for PEBP operations and insurance plans comes primarily from participant and employer contributions. PEBP submits its funding and operational requirements to the legislature as part of the biennial budget. Upon approval, each participating employer is assessed an amount to contribute toward both the active-employee and retiree health plans.

PEBP employs a staff of 34 full-time employees. Operations include quality control, accounting, member services and eligibility, public information, and information technology.

MISSION

Provide employees, retirees, and their families with access to high quality benefits at affordable prices.

VISION

PEBP will be a member focused, strategic, innovative, nationally recognized, affordable program of employer sponsored benefits serving employees, retirees, their families and the Nevada taxpayer through continuous evaluation and improvement.

VALUES

- Service
- Innovation
- Accountability
- Transparency
- Fairness
- Integrity
- Compassion
- Sustainability
- Collaboration
- Health Improvement

GOALS

- Program Administration
 1. Position the Program to be able to pivot on federal and state healthcare rulemaking
 2. Ensure long-term Program solvency and sustainability
 3. Balance the needs and desires of the employer, the employee/retiree, and the NV taxpayer
 4. Consistently evolve and modernize
 5. Develop and provide benefits desired by the employers and members
 6. Improve member experience
 7. Acknowledge and address the disparity between northern, southern and rural Nevada
- Transparency
 1. Consistently provide reporting on utilization, finances, and policy decisions
 2. Showcase plan design and rate approvals publicly in an easy-to-understand format
 3. Commit to Program transparency tools
- Collaboration
 1. Coordinate policy with stakeholders (Legislature, Executive Branch, Advocacy Groups)
 2. Develop program strategy by aligning agendas
 3. Evolve the Program through partnership with current and future vendors/partners
 4. Encourage communication and coordination between partners
- Communications
 1. Maximize utilization of multiple communication channels
 2. Review/update and coordinate a comprehensive multi-partner communications plan
 3. Develop communication strategies balancing digital, person-to-person and cost resources

SWOT ANALYSIS

- Strengths
 - Supportive Board
 - Plan solvency (CDHP) and long-term sustainability (CDHP, Exchange)
 - Available excess reserves
 - Innovative
 - Transparency
 - Strong relationships with advocacy groups
 - Strong agency units: Operations, Finance, Quality Control & Information Technology
 - Negotiating contracts
 - National recognition
 - Committed contracted partners
- Weaknesses
 - One-size-fits-all design (statewide plan design but regional risk pools and models of care)

- Cannot make changes rapidly (BOE, IFC, Budget Office, Legislature, Board schedules, etc.)
- No direct access to drafting BDRs (must be included in the Governor's 110)
- Reaching all members consistently
- Opportunities
 - Member tools (online decision support, disease management program enhancements, implement more digital member applications)
 - Increase access to care (direct hospital contracting, increase network providers, increase voluntary benefit offerings, coordinating assets with HPN, leverage more Centers of Excellence, improve disease management)
 - Innovation (system upgrades, ERP system, voluntary benefit platform, digital member applications, leverage higher education resources)
 - Cost containment (mandatory Smart90 Rx network, more PAs, more Reference Based Pricing, direct contracting with providers)
 - Improve communications (modernize guides, revamp HMO reporting, coordinate distribution with partners)
- Threats
 - New Administration in 2019 (supportive?)
 - Member entitlement to previous plan benefit levels
 - Federal rulemaking (ACA survive? Cadillac Tax?)



OVERALL STRATEGY

1. Increase Access to Care
2. Improve the Member Experience
3. Reduce Costs to the Program

SPECIFIC STRATEGIES

- Program Administration
 1. **Position the Program to be able to pivot on federal and state healthcare rulemaking**
Strategy: Maintain sufficient reserves, review all laws for impact, retain enough delegated authority from the Board to address rules, implement appropriate regulations
 2. **Ensure long-term Program solvency and sustainability**
Strategy: Maintain sufficient reserves, implement cost-containment activities every year to reduce trend/inflation, approve rates with gradual changes versus sharp impacts, and maintain appropriate staffing levels to meet needs
 3. **Balance the needs and desires of the employer, the employee/retiree, and the NV taxpayer**
Strategy: Implement only value-added benefits, require ROI where appropriate, invest in program infrastructure, evaluate all options rigorously, and leverage interns where applicable
 4. **Consistently evolve and innovate**
Strategy: Stay abreast of the marketplace, upgrade system functionality regularly, implement tools to improve stakeholder experience, invest in the program infrastructure, research and catalog a comprehensive set of digital solutions for evaluation and implementation, and improve real-time data sharing
 5. **Develop and provide benefits desired by the employers and members**
Strategy: Research benefit offerings and present viable options, prioritize access to care, provide added value benefits, and evaluate benefits annually
 6. **Improve member experience**
Strategy: Increase value added tools, communicate benefit changes thoroughly and timely alignment with partner communications, incentivize good behavior, revamp member dashboard, increase benefit offerings
 7. **Acknowledge and address the disparity between northern, southern and rural Nevada**
Strategy: Analyze cost factors and access to care, evaluate alternatives to “one-size-fits-all,” continue to close the gap between marketplaces
- Transparency
 1. **Consistently provide reporting on utilization, finances, and policy decisions**
Strategy: Continue Board reporting, IRBC reporting, update website regularly with reports, implement new report formats
 2. **Showcase plan design and rate approvals publicly in an easy-to-understand format**
Strategy: Develop simple value added plan design review and approval, develop simple value added rate review and approval
 3. **Commit to Program transparency tools**
Strategy: Continue to provide stakeholder access to data, improve HMO reporting data to include more program results
- Collaboration
 1. **Coordinate policy with stakeholders (Legislature, Executive Branch, Advocacy Groups)**
Strategy: Continue bimonthly meetings with RPEN and AFSCME, provide updates to LCB as needed, provide updates to Governor’s Office as scheduled

2. **Develop program strategy by aligning agendas**
Strategy: Obtain input from stakeholders prior to accepting strategic plan, incorporate legislative and executive branch requests in program strategy
 3. **Evolve the Program through partnership with current and future vendors/partners**
Strategy: Obtain input from vendors/partners, develop a roadmap of program improvements and quality improvement strategies
 4. **Encourage communication and coordination between partners**
Strategy: Open up direct communication between partners, allow for coordinated solution building, create opportunities for teamwork and coordination
- **Communications**
 1. **Maximize utilization of multiple communication channels**
Strategy: Modernize communications, coordinate communications efforts with partners, leverage digital solutions where appropriate
 2. **Formalize and review/update communications plan**
Strategy: Review plan annually, develop a multi-partner communications schedule, emphasize in-person education, implement more webinars/trainings online
 3. **Engage subject matter experts to improve communication to members and other stakeholders**
Strategy: Research communications material of other states, coordinate strategies with partners