



# Public Employees' Benefits Program (PEBP)

Presentation to:
Legislative Commission's Budget
Subcommittee





# Agenda

- Agency Mission & Vision
- Plan Overview
- Financial Status and Reserves
- 2013-15 Governor's Recommended Budget
- Priority and Performance Based Budget
- Other Post-Employment Benefits Liability
- Legislative Agenda





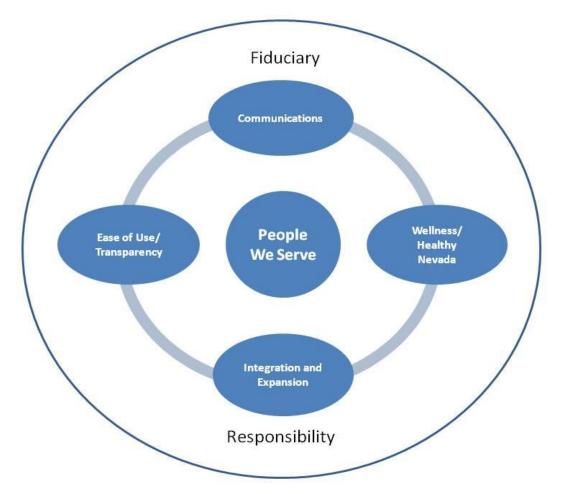








# Vision: To operate a well managed group insurance program that promotes a healthy population and protects members from catastrophic financial loss







# **PEBP Board Philosophy Statements**

- > PEBP strives to be an innovative health benefit program.
- > PEBP believes that protection from catastrophic healthcare expense to the participant is core to the program.
- > PEBP believes that personal responsibility is a cornerstone to the health and welfare of its members.
- > PEBP commits to providing tools to assist participants in managing their healthcare resources.
- > PEBP commits to maintaining transparency regarding the operation and finances of the plan.
- > PEBP commits to a clear communication of program design to all stakeholders.
- > PEBP Board members and staff possess managerial and financial expertise in the health benefits industry.





#### **Plan Overview**



Eligible Participants

Current Enrollment & Projections

Current Benefit Options

Wellness Program





### **Eligible Participants**

- State
  - Active employees
  - Retirees
    - Eligible at the time of retirement, or
    - Re-enroll during an annual open enrollment period
- Non-state
  - Actives if employer "participates" in the Program
  - Retirees
    - Eligibility frozen for those enrolled as of 11/30/08 except those from any "participating" entity
    - "All in or all out" policy of SB 544 (2007)



**Total** 

**Percentage Change** 



#### **Enrollment**

FY 2012

	(Actual)	FY 2013	FY 2014	FY 2015
<u>State</u>				
Actives	23,534	23,289	23,146	23,146
<b>Early Retirees</b>	3,914	3,375	4,090	4,189
<b>Medicare Retirees</b>	4,768	5,429	5,152	5,354
	32,216	32,093	32,388	32,689
Non-State				
Actives	228	69	55	34
<b>Early Retirees</b>	4,380	3,251	2,986	2,476
<b>Medicare Retirees</b>	4,239	4,787	4,465	4,532

January 30, 2013

8,107

39,876

**-2.1%** 

7,506

39,894

0.05%

7,042

39,731

0.41%

8,847

41,063





### **Current Benefit Options**

- Medical Coverage (Including Prescription Drugs)
  - Active Employees and Non-Medicare Retirees:
    - Self-funded Consumer Driven Preferred Provider Organization High Deductible Health Plan Option coupled with a Health Savings Account or a Health Reimbursement Arrangement
    - Health Maintenance Organization (HMO) Option
  - Medicare Retirees eligible for Premium Free Part A:
    - Medicare Advantage or Medicare Supplement (Medigap) and Part D RX plans through a private market Medicare Exchange
  - Health and Wellness Program
- Dental





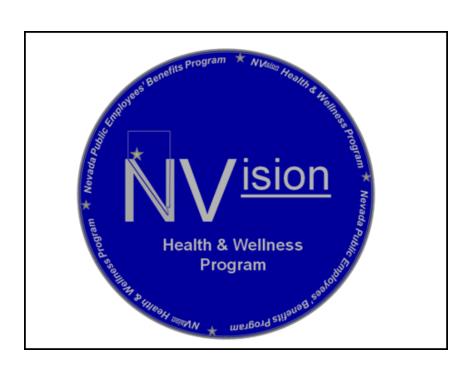
# **Current Benefit Options (cont.)**

- Basic Life Insurance
- Long Term Disability
- Voluntary Products
  - Flexible Spending Accounts Medical, Limited Purpose and Dependent Care
  - Additional Life Insurance
  - Long Term Care
  - Short Term Disability
  - Home & Auto





# NVision Health & Wellness Program



#### **Program Goals**

- Inform participants of their health risks
- Improve participants' health and quality of life
- Reduce avoidable claim costs associated with preventable conditions





# NVision Health & Wellness Program (cont.)

#### Four Year Program:

- Year One EducateYourself
- Year Two Get Active
- Year Three Eat Right
- Year Four See Results

#### **Components:**

- Registration
- Health AssessmentQuestionnaire
- Biometric Screening
- Preventive Screenings
- Action Programs





#### **Financial Status of PEBP**

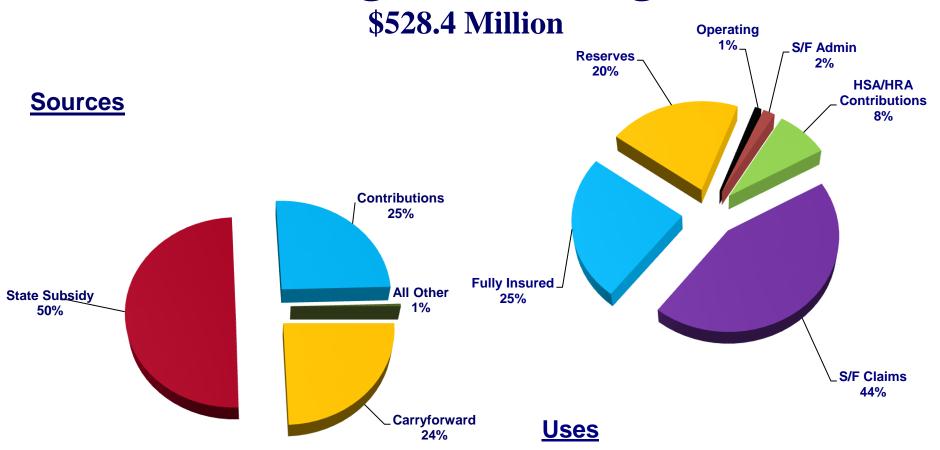


Current Funding
Fiscal Year 13 Projections
Reserves





# **Current Budgeted Funding FY 2013**







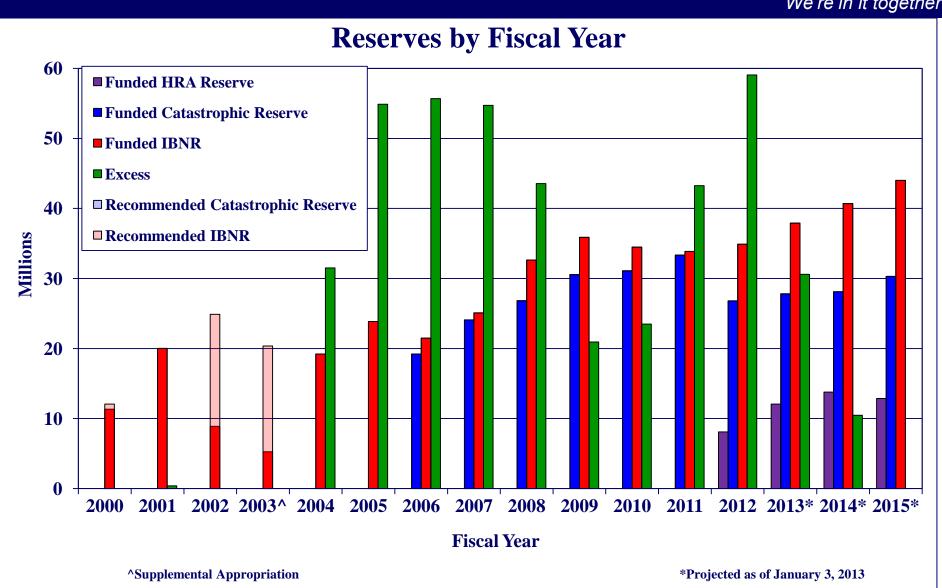
# **FY 2013 Projection**

<b>Budgeted and Projected Income (Budget Account 1338)</b>							
Description	Budget	<b>Actual 11/30/12</b>	Projected	Difference			
Carryforward	128,851,573	128,851,573	128,851,573	0	0.0%		
State Subsidies	263,461,206	91,545,045	230,080,719	(33,380,487)	-12.7%		
Contributions	133,725,522	40,515,586	105,154,005	(28,571,517)	-21.4%		
All Other	2,314,874	2,196,871	8,263,402	5,948,528	257.0%		
Total	528,353,175	263,109,076	472,349,699	(56,003,476)	-10.6%		
Budge Description	ted and Projec	cted Expenses (I	Budget Accou	int 1338) Difference			
Operating	5,453,485	1,663,812	5,219,090	234,394	4.3%		
Self-Funded Admin	9,896,992	3,356,304	8,581,420	1,315,572	13.3%		
Self-Funded Claims	231,298,404	58,230,505	188,806,225	42,492,179	18.4%		
HSA/HRA Contributions	43,642,058	26,061,437	47,610,923	(3,968,865)	-9.1%		
Fully Insured Products	129,706,770	46,247,988	111,252,906	18,453,864	14.2%		
Reserves	108,355,466	127,549,029	110,879,136	(2,523,670)	-2.3%		
Total	528,353,175	263,109,076	472,349,699	56,003,474	10.6%		





We're in it together



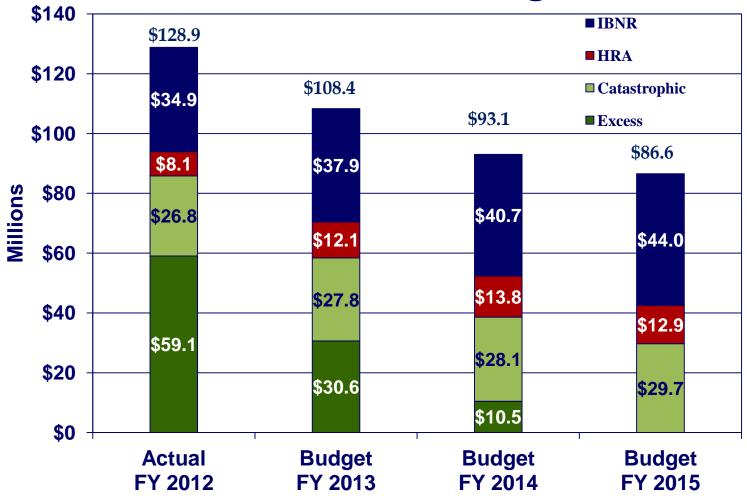
**January 30, 2013** 

**16** 





#### Governor's Recommended Budgeted Reserves







#### Plan Year 2013 Rebate of Excess Reserves

- Rate mitigation (\$6.9 M)
- One-time HSA/HRA Contributions (\$11.8 M)
  - \$400 for each primary participant
  - \$100 for each dependent (maximum of 3 dependents)
  - \$200 for actives over age 45 and retirees over 20 YOS
- One-time Retiree HRA Contributions (\$3.9 M)
  - \$2 per month per year of service for Medicare retirees
- Subsidize domestic partners the same as spouses (\$500k)





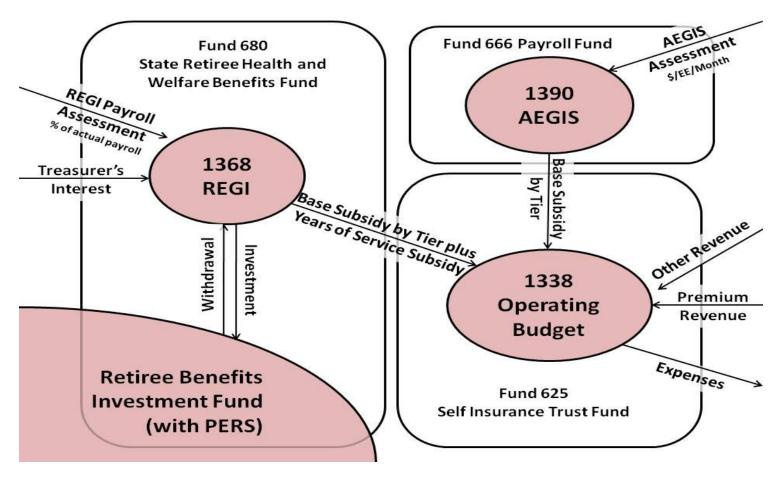
# Governor's 2013-15 Recommended Budget \*

Summary





#### **How PEBP is Funded**



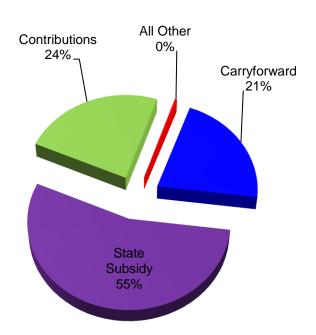




#### Governor Recommends 2013 - 15

**\$939.5 Million** 

#### **Sources**



Funding	Base	Maint	Enhance	Biennium Total
Carryforward	240.4	(35.2)	(3.8)	201.4
State Subsidy	424.2	88.4	0.2	512.9
Contributions	200.7	21.2	0.1	222.0
All Other	10.4	(7.2)	-	3.2
Total	875.8	67.3	(3.5)	939.5

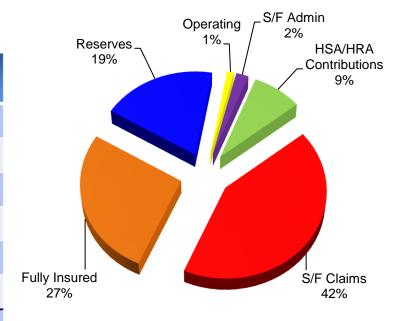




#### Governor Recommends 2013 - 15

**\$939.5 Million** 

Funding	Base	Maint	Enchance	Biennium Total
Operations	10.2	0.4	0.1	10.7
Fully Insured	211.7	42.6	-	254.3
S/F Admin	16.1	3.4	-	19.5
S/F Claims	296.4	100.7	-	397.1
HSA/HRA	53.6	20.7	3.9	78.3
Reserves	287.8	(100.7)	(7.5)	179.6
Total	875.8	67.3	(3.5)	939.5



#### <u>Uses</u>





#### **Maintenance Decision Units**

#### M101: Inflation Increases

- Based on actuarial trend projections, historical inflation and contract maximum increase provisions
- \$48.9 M in FY 14 and \$54.5 M in FY 15

	FY 2014	FY 2015
Medical Claims	9.0%	8.75%
Rx Claims	9.0%	8.75%
Dental Claims	4.5%	4.5%
HMO Premiums	8.0%	12.5%
Life Insurance Premiums	10.0%	10.0%
LTD Premiums	10.0%	10.0%





#### **Maintenance Decision Units (cont.)**

#### M102: Reserve Adjustments

- Based on actuarial estimates provided by Aon Hewitt and utilization of HRA accounts
- IBNR and Catastrophic Reserves using 95% Confidence Interval
- (\$2.8) M in FY 14 and \$1.4 M in FY 15

#### M103: Medicare Exchange Inflation

- HRA contributions proposed to increase \$1.00 per month per year of service in the 2014-2015 biennium to a base amount of \$11
- Based on inflation in Medicare Advantage plans (10%-20%);
   Medicare supplement plans (5%-8%) and Medicare RX plans (10%-20%) provided by Extend Health actuaries
- \$2.0 M in FY 14 and FY 15





#### **Maintenance Decision Units (cont.)**

#### M200: Enrollment Changes

- Based on projected enrollment using historical data and known changes and adjusted for decreasing non-state enrollment
- (\$10.2) M in FY 14 and (\$16.0) M in FY 15

#### M501: Federal Mandates

- Comparative Effectiveness Research Fee
- Starts in FY 13 at \$1 per insured person per year
- Increases in FY 14 and beyond to \$2 per insured person per year adjusted for inflation
- \$144k in FY 14 and FY 15

#### E804: Division of Human Resource Management

\$3k in FY 14 and FY 15





#### **Budget Enhancements**

#### E225: Data Analytics

- Creates a data warehouse to improve query and analysis capability
- More easily benchmark our plan to national averages
- \$105k in FY 14 and \$110k in FY 15

#### E227: Staff Training

- Allows new staff to increase skills and knowledge in the healthcare
- \$9k in FY 14 and FY 15

#### E275: Medicare HRA Contribution

- One-time \$2 per month per year of service contribution to Health Reimbursement Arrangement Accounts
- \$3.9 M in FY 14 only





# Governor's 2013-15 Recommended Budget

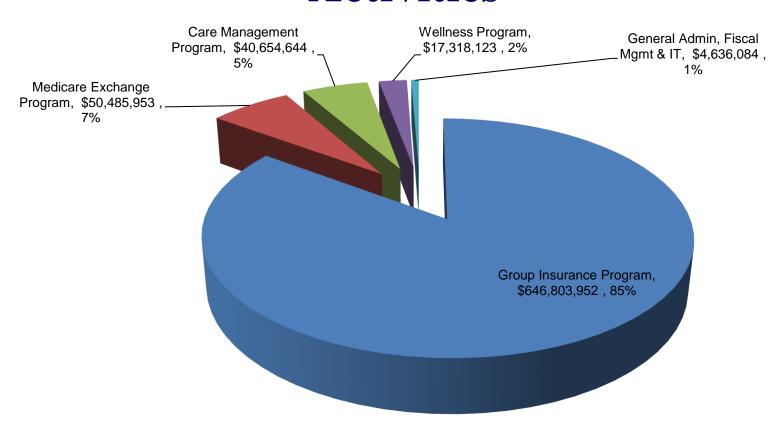
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Priorities and Performance Based Budget
Performance Indicators





# Health Services Core Function Activities







#### **Performance Indicators**

	FY 2012 Budget	FY 2012 (actual)	FY 2013 Budget	FY 2014 Gov Rec	FY 2015 Gov Rec
Expense Ratio	4.20%	4.01%	3.72%	4.11%	3.96%
Claims Loss Ratio	106.70%	87.15%	103.08%	106.90%	101.07%
Generic Drug Utilization	71.60%	78.00%	71.60%	82.00%	83.00%
Medical Network Use	94.50%	92.00%	94.50%	92.00%	92.00%
Dental Network Use	93.20%	89.00%	93.20%	93.20%	93.20%
Appeals per 1,000 Participants	0.15	0.10	0.15	0.15	0.15





# Other Post-Employment Benefits



Governmental Accounting Standards Board
Statements 43 and 45





# Other Post-Employment Benefits (OPEB)

- Liability to the State of the cost to provide subsidized health insurance to retirees
  - Comprised of cash subsidy and benefit of commingling experience with less expensive active employees ("implicit" subsidy)
  - Earned during working career and considered "deferred compensation" since it is provided after retirement
  - Governmental Accounting Standards Board (GASB) requires recognition of cost when incurred not paid
  - Record liability in financial statements or footnotes





#### **OPEB** (cont.)

- OPEB liability is actuarially calculated based on current plan design and these components:
  - The number of employees and retirees eligible for the retiree health insurance benefit;
  - The amount of the benefit already earned;
  - The life expectancy of the employees and retirees;
  - The estimate of how long employees/retirees will receive the benefit in the future;
  - The investment earnings of any funds set aside to cover the long term liability, and
  - The estimated medical trend rate associated with the medical plan in future years.





#### **OPEB** (cont.)

- Current eligibility for cash subsidy
  - Five years of service total with Nevada public system(s)
  - Fifteen years of service if hired after January 1, 2010
  - No subsidy for employees hired after January 1, 2012
  - Everyone receives implicit subsidy
- "Base" amount established each Legislative session for following two years
  - Amount received based upon date of retirement and years of service (for post 1/1/94 Retirees)





# GASB OPEB Valuation – July 1, 2010

- Present Value of Benefits \$1.8 Billion
  - Total amount of the expected benefits to be paid in the future including amounts earned by existing employees throughout the remainder of their working career
- Actuarial Accrued Liability \$977 Million
  - Snapshot of the liability for benefits earned as of 7/1/10
- Annual Required Contribution \$119.9 Million
  - Cost of benefits earned during FY11 plus 30 year amortization payment on previous unfunded liabilities
  - "Pay-as-you-go" subsidy payments about \$47 M





# Legislative Agenda



Senate Bill 34
Healthcare Reform Impact





#### **Senate Bill 34 (BDR 23-377)**

- Revises method of commingling claims experience
- Current:
  - One pool for State employees and retirees (except those on the Medicare Exchange)
  - One pool for non-state employees and retirees (except those on the Medicare Exchange)
- Proposed:
  - One pool for "participating" employees and retirees (except those on the Medicare Exchange)
  - One pool for retirees of non-participating employers





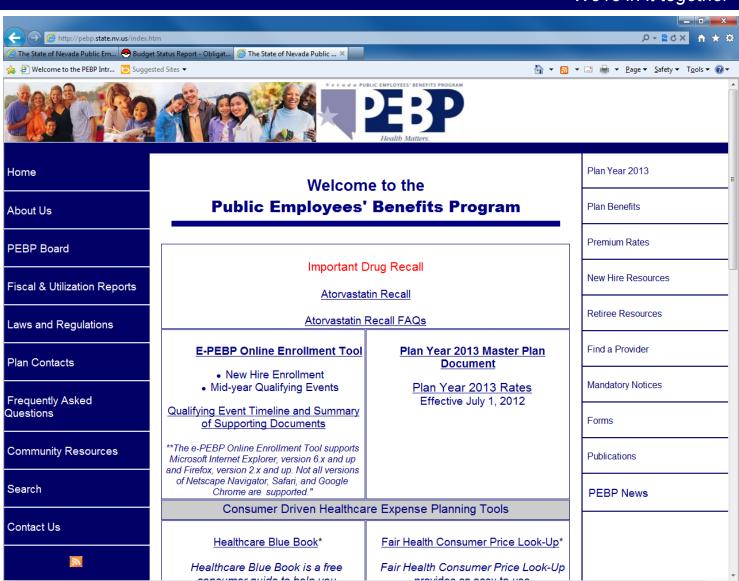
## Affordable Care Act Implementation

- Mandatory Coverage:
  - Children to age 26
  - Preventive Care
  - Pre-existing conditions
  - Elimination of lifetime maximums
- Fees
  - Patient Centered Outcomes Research Institute
  - Transitional Reinsurance Program
- Impact of the Silver State Health Insurance Exchange





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#### Questions? Fiscal & Utilization Reports