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AGENDA ITEM

- Action Item
- Information Only

Date: May 26, 2022

Item Number: IV.III

Title: Summary of Changes to finalized Plan Year 2023 Master Plan Documents

SUMMARY

In the process of transitioning plan design to the new Third Party Administrator (UMR) system, there were some technical variances identified. Additionally, discussion with the new Utilization Management vendor has provided some recommended changes. This has resulted in changes in the Master Plan Documents since the March 24, 2022 board meeting.

The overall changes are generally benefit enhancements.

REPORT

OVERALL CHANGES

Changes were made to the listed sections and are noted on the Master Plan Documents, respectively.

Utilization Management

- “Pregnancy” section should be removed from plan documents because the MPD’s sufficiently address pregnancy.

Benefits

- Chemotherapy
 - Enhancement: “Patients undergoing chemotherapy may be eligible for 1 wig, any type, synthetic or not, per Plan Year (excluding sales tax).”
- Speech Therapy

Revisions to Plan Documents

May 26, 2022

Page 2

- Clarification: There was a conflict between benefits and exclusions for Speech Therapy. The exclusion was updated to cooperate with the benefit.
- Bariatric Surgery
 - Removal of the 10% weight loss requirement.

Limitations and Exclusions

- Cosmetic Services and Surgery reflects overall changes primarily removing a list of excluded examples.
- Gender Dysphoria and/or Gender Services reflects overall changes primarily removing a list of excluded examples.
- Rehabilitation Therapy reflects changes for childhood speech disorders.

Key Terms and Definitions

- Cosmetic Surgery or Treatment had examples removed.
- Step Therapy to include Nevada Senate Bill 290 requirements for PEBP health plans.

BENEFIT CHANGES BY PLAN TYPE

The following changes were made specific to the listed plans and are noted on the Master Plan Documents, respectively.

Consumer Driven Health Plan

Benefit Change

- Telemedicine: removed reference to copays. The CDHP does not have copayments. The following changes are per the Doctor on Demand contract rate change with our Third-Party Administrator:
 - Psychology Visit (50-min visit) is increasing to \$129, after deductible.
 - Psychiatry Visit (initial 45-min visit) is decreasing to \$229, after deductible.This is updated on page 77 for the CDHP.

Health Savings Account

- Added Calendar Year 2023 Contribution Limits: On April 29, 2022, the Internal Revenue Service (IRS) announced the 2023 inflation-adjusted amounts for Health Savings Accounts (HSAs). For calendar year 2023, the annual limitation on deductions for an individual with self-only coverage under a high-deductible health plan is \$3,850. The annual limitation on deductions for an individual with family coverage under a high-deductible health plan is \$7,750. This is updated on page 22 for the CDHP.

Low Deductible PPO

Benefit Change

- Skilled Nursing Facility has two different day limits in page 34 and page 75 reflecting 100 days and 60 days, respectively. This is updated to show 100 days on page 75 of the LD-PPO.

Premier Plan

Benefit Change

- Skilled Nursing Facility has two different day limits in page 37 and page 78 reflecting 100 days and 60 days, respectively. This is updated to show 100 days on page 78 on the EPO.
- Mammogram benefits were adjusted to match the previously approved, enhanced CDHP and LD-PPO Plan. This allows screening mammograms “beginning at age 35 for members with a high-risk of breast cancer.” This is reflected on page 75 of the EPO.

Full edited versions of the MPD’s can be accessed electronically here:

<https://pebp.state.nv.us/meetings-events/board-meetings/may-26-2022-board-meeting/>