

May 23, 2023

Alejandra Livingston
1748 Kodiak Circle
Reno, NV 89511
livingstonalejandra@gmail.com
(775) 720-6441

Dear Public Benefits Board Members:

I am contacting you to communicate my concerns with UMR and PEBP. I wish I could attend board meetings, but I am an adjunct professor in higher education and my schedule is very unstructured and go from campus to campus. I worked for the State of Nevada for 27 years and retired last November, and I have noted several issues with the Public Benefits Program and with UMR, one which is the lack of customer service. When one calls PEBS with a question about the plan benefits, they tell you to call UMR. UMR tells us to call our employer's Human Resources, and if you explain to them that PEBS said to call them, they route your call indefinitely and you end up nowhere. I have the same problem when I contact UMR with questions about pre-authorizations.

Specifically, since the end of the summer of last year, I have been needing some costly dental work done which involves a prosthesis that is covered by the plan at 50%. My prosthesis requires something customized, and when my dentist sent the pre-authorization, they approved it without the customized part. My dentist sent it again to be re-evaluated in the fall of 2022 and to this day, May 23, 2023, there has been no pre-authorization generated. The second one was never received; in fact, more than six weeks after the doctor sent it to be re-evaluated, I called their line, and they routed my call multiple times, which lasted more than one hour. Finally, when I got the right department, the person said, "I don't have that, and I don't see the one from before either. How did your doctor send it? By fax, mail, email? My dentist told me that UMR says to only send them by mail. However, they told me that it can be emailed. Then, my dentist emailed it a few weeks ago for a third time, and UMR keeps saying that they never got it, they don't even have a record of the one that was partially approved last fall. My dentist told me that they do the same thing to her about payments, when they call to follow up on claims to get paid for her services, UMR gives her the same round around, that they don't have the claim. My mouth has been hurting for months, it hurts to eat, I have a special condition and must have that prosthesis replaced, as it has been more than 17 years since I have had this one. This is unacceptable. Three of my providers in Carson City no longer contract with any State of Nevada plans, because they have had it. There is a shortage of medical providers and the last thing we need is to lose access to the few that there are in our service area. We pay premiums and work hard to earn our retirement and benefits, and we deserve to get what we pay for.

I have another issue with Legalese, I contacted them on a few occasions for various reasons. They refer you to attorneys, some of those attorneys will talk to you the first time, but when those attorneys learn that you are a Legalese customer, they don't return your calls. This is something that I can easily get rid of, but that is not the case with the dental plan. Please, act and require UMR to adhere to a certain standard, that pre-authorizations need to be processed within a reasonable time frame, or that they be submitted via a portal with a reference number so they don't get lost in the mail or someone's email inbox, and so that providers and patients can see the progress.

I would appreciate your cooperation in addressing this matter and in getting back to me indicating what type of measures the Board will take regarding my complaint.

Sincerely,

Alejandra Livingston

Alejandra Livingston, MBA MS PStat