

PEBP BOARD MEETING – FEBRUARY 24, 2026

TERRI LAIRD, RPEN PUBLIC COMMENT

Good afternoon, Executive Officer Carsten, Board Chair Wells, fellow board members and staff.

My name for the record is Terri Laird, and I am the Exec. Director of RPRN, the Retired Public Employees of Nevada. Incorporated in 1976, we have 14 active chapters statewide serving nearly 7-thousand dues paying members.

We are in full support of the grave concern expressed by hundreds of participants in PEBP, actives and retirees, who worry about the ever-escalating cost of healthcare. RPEN works alongside other public employee groups you will, or have heard from already who are also very worried about what will be decided today or in the near future.

As you are keenly aware, wages for entry level state jobs are lower than they should be, and now health care costs along with PERS contribution rate costs don't leave much for these folks to live on. Additionally, retirees living on fixed incomes have similar concerns and rising health care costs impact them as well...especially when Health Reimbursement Arrangements (HRA's) have been the same for 10 years (\$260 per month for someone with 20 years' service) with NO increases since then. Our coalition fought for a \$1.00 increase at the last legislative session that was vetoed and so any thought of raising health care costs AGAIN for this group is unacceptable.

We hope this board will consider the proposals before you long and hard---as well as all of the public comments received about this subject--- before acting on something that could have dire consequences not just for them, but for the state as well if employees leave because they can no longer afford to work here. And the retirees who served their state, and earned the benefits they're receiving, deserve better too.

Thank you.

Terri Laird, RPEN Executive Director

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

The proposed increase would be detrimental to my family reducing my net income by an even more unrealistic amount combining with PERS deductions, my full time classified employment with the state would result in an unsurvivable minimum wage income.

ALEXANDRA MIGUEZ-RUIZ

Board Members,

After reviewing the PY2027 Plan Design and Rate Methodology presentation, I am outraged. An 80–133% increase in health insurance costs is not a minor adjustment--it is an extreme financial blow, and once again, the burden is being placed squarely on employees.

State employees did not create this budget problem. We should not be punished for the state's inability to manage its finances without gutting the take-home pay of its workforce. The assumption that employees, many of whom are already in lower-paying classifications, can absorb increases of this magnitude is detached from reality.

We do not receive automatic annual COLAs. PERS contributions are set to increase again on July 1, 2027. How is it reasonable to expect employees to sustain having nearly 30% of their salary consumed by PERS and health insurance alone? That is not sustainable. It is not responsible. And it will not retain a reliable, experienced workforce.

Raising already high premiums and out-of-pocket costs further strains employees who are already stretched thin. These increases directly threaten our financial stability, our ability to care for our families, and our capacity to remain healthy and productive in our roles.

If the goal is to maintain a functioning and committed state workforce, this proposal moves us in the opposite direction. Dedicated public servants cannot continue absorbing unchecked cost increases while their wages remain stagnant.

I urge the Board to reject these proposed increases and pursue alternatives that do not disproportionately shift the financial burden onto employees and retirees. Affordable healthcare is not a luxury, it is a necessity for a stable, effective workforce.

State employees deserve better than this.

My name is Tuwisha Dennis, and I live and work in Nevada. I am writing to oppose the proposed PY2027 Premium increases because the scale of the projected increases would create severe financial hardship for State employees, retirees, and their families.

Although I am employed by the State of Nevada Division of Aging and Disability Services, I am submitting this comment in my capacity as a private citizen and State employee, and not as a representative of the State of Nevada or any agency. The views expressed here are solely my own.

As a State employee, I work closely with vulnerable populations every day and understand firsthand the financial pressures many Nevada families face. The proposed premium adjustments—reported as necessary to address a funding gap and reserve target—would increase employee and retiree premiums by approximately 133% over current PY2026 rates if the full funding gap is closed through premiums alone. This magnitude of increase is unprecedented and unsustainable.

For example, under the illustrative PY2027 premiums:

- A State Active employee with family coverage under the EPO/HMO plan would see monthly premiums rise from \$801.97 to \$1,868.59—an increase of over \$1,000 per month.
- A retiree with family coverage under the CDHP plan would see premiums increase from \$862.09 to \$2,008.67 per month.
- Even single participants would experience dramatic increases, with CDHP premiums for active employees rising from \$55.26 to \$128.76 per month.

For many employees, these increases would effectively reduce take-home pay by thousands of dollars annually. For retirees on fixed incomes, these increases could force difficult decisions between maintaining health coverage and covering essential living expenses such as housing, food, and utilities. Premium spikes of this size may also discourage qualified professionals from seeking or remaining in State employment, negatively affecting recruitment and retention across agencies.

While I recognize the importance of addressing the funding gap and meeting reserve targets to ensure the long-term stability of the health plan, relying primarily on premium increases shifts a disproportionate burden onto employees and retirees. The funding strategy should consider the broader impact on workforce stability, employee morale, and the State's ability to deliver critical public services.

I respectfully recommend that the Board consider alternative approaches, including:

- Phasing in increases over multiple plan years to lessen the immediate financial impact.
- Exploring additional State contributions or budget adjustments.
- Conducting a deeper review of cost-containment strategies within the health plan.
- Increasing transparency around actuarial assumptions and reserve targets to ensure stakeholders understand the necessity and scope of the increases.

A balanced approach that protects both the financial health of the plan and the financial well-being of employees and retirees is essential.

Thank you for the opportunity to provide public comment and for your consideration of the significant impact these proposed changes would have on Nevada's public workforce.

Sincerely,

TUWISHA DENNIS

Tuwisha Dennis

Public comment for PEBP meeting February 24, 2026

To whom it may concern:

Health insurance premiums are rising at a rate much faster than our incomes. Between rent, utilities, gas, required automobile insurance, and required medical insurance, there will be little left to live on. In addition, the health care providers have new add-on charges they are implementing for care that should be preventive care. Even retirement contributions are getting increased and as employees, we have no control over any of these required expenses. I strongly encourage you to help the workforce for a change, let the corporations look elsewhere for additional income instead of us needing to find second and third jobs.

Terresa Mettler
Administrative Assistant
College of Southern Nevada

Renee Huber

Public Comment Opposing Premium Increases

State employees are already stretched thin by rising costs across every part of daily life. Increasing our health insurance premiums would add yet another financial burden to a workforce that is essential to keeping Nevada running. Our plans are already expensive, and many employees are struggling to maintain coverage for themselves and their families.

Raising premiums would also undermine the state's ability to recruit and retain qualified staff. Many agencies are already operating with vacancies, heavier workloads, and burnout. Additional financial strain will only make it harder to keep experienced employees and attract new ones, directly affecting service delivery to the public.

I urge the PEBP Board to reject any premium increases and protect the stability, health, and retention of Nevada's public workforce. Keeping coverage affordable is critical to ensuring we can continue serving our state effectively.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Sincerely,

Renee Huber

Public Comment

To: PEBP Board

From: Lars Jensen

Date: February 24, 2026

Subject: Plan design changes and rate methodology for Plan Year 2027, agenda item 4

Dear Members of the PEBP Board,

My name is Lars, and I am a long-standing faculty member in the mathematics department at Truckee Meadows Community College (TMCC) in Reno. I am writing to express my deep concern regarding the proposed plan design changes and rate methodology for Plan Year 2027.

The fiscal crisis at PEBP is distressing news for state employees who are being asked to absorb tens of millions of dollars of budget shortfalls, the origins of which are not well explained or documented.

Before adopting any dramatic policy changes, I urge the Board to address the following critical priorities:

- **Conduct a Full Independent Audit:** It is deeply alarming that Segal's projected revenue for FY2026 and FY2027 is lower than the legislatively budgeted amounts by \$96 million and \$110 million, respectively. Having spent my career working with mathematics and institutional data in higher education, I find these massive, unexplained shortfalls deeply troubling. Furthermore, the use of erroneous funding values for active employees and retirees as recently as January 2026 undermines the integrity of the proposed rates. The sudden fiscal crisis calls for an independent audit of PEBP accounting, budgeting, and rate-setting.
- **Implement a Three-Year Phase-In for Premium Increases:** Any increases in employee premiums should be phased in over three or more years, with necessary increased state support sought in the next budget cycle. A longer phase-in period is the only equitable approach to manage these costs.
- **Maintain Flat-Dollar Employer Contributions:** The current board policy uses flat-dollar employer contributions across the three plan options. The new proposal to set employee premiums as percentages of total rates, varying arbitrarily by plan option and dependent tier, is unfair and inequitable. Notably, the mathematical anomalies in the proposal—such as the 2-year phase-in actually appearing more expensive than the 1-year phase-in for several dependent tiers—require thorough explanation.
- **Halt the Unacceptable Out-of-Pocket Maximum Increases:** Out-of-pocket maximums should not be increased any further. Increases in out-of-pocket maximums hurt most the members who have chronic or acute conditions, especially lower-income employees. The whole point of health insurance is to protect against catastrophic

medical debt.

As a dedicated faculty member at TMCC, I have seen firsthand how salaries have not kept pace with the rising cost of living in Nevada. Asking our lowest-income campus colleagues—and faculty alike—to absorb these drastic premium hikes and higher deductibles is simply unfair. An unexpected jump in monthly healthcare costs directly cuts into our ability to pay utility bills and put food on the table. State employees should not be forced to bear the brunt of PEBP's accounting errors.

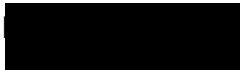
PEBP's stated mission is to provide members with access to high-quality benefits at affordable prices. Its values statement includes Accountability, Transparency, Fairness, Compassion, and Sustainability. I ask that you uphold those values today by pausing these dramatic changes to protect the state employees who rely on this program.

Thank you for your time and service to the state.

Sincerely,

Lars Jensen

TMCC Faculty



As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Dear PEBP leadership,

As a concerned employee working for the Nevada Department of Corrections, I feel compelled to express the serious impact the proposed health insurance rate increases will have on our workforce. While we acknowledge that the Department of Corrections received a substantial raise under the FOP 2023 contract, the reality for many of us is that those gains have already been significantly offset.

- In 2023, staff received a 20% raise.
- In 2025, PERS contributions increased by 4.5%, followed by only a 1% COLA for two consecutive years.
- This left employees effectively **3.5% short in year one and 2.5% short in year two**, with non-police/fire members receiving no COLA but an additional 1.6% increase.

Now, with the proposed health insurance increases—some exceeding **50% or more**—employees stand to lose **15% to 40% of their pay**. Personally, this would cost me approximately **\$400 more per month**, while others could lose **\$1,000 or more monthly**.

For example:

- **Family HMO Plan:**
 - Prior 2025: \$651.51
 - **Current: \$801.97**
 - Proposed 2026: \$1,443.55 (+\$641.58)
 - Proposed 2027: \$1,868.59 (+\$1,066.62)
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 - Prior 2025: \$423.54
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These increases are not sustainable. They will **cripple our ability to hire and retain quality employees**, especially in areas already facing severe staffing shortages outside Las Vegas and Carson City. Employees with little seniority will be forced to seek other employment simply because they cannot afford to work for the state under these conditions.

We urge the PEBP leadership to reconsider this proposal and explore alternative solutions. Implementing these increases as proposed would be detrimental to all state employees and to the long-term stability of our workforce.

Respectfully,

Correctional Officer Walter Wilson

To the PEBP Board,

I have dedicated 21 years of my career to serving the State of Nevada. I chose public service understanding that salaries may not always match the private sector, but believing that stability and benefits would provide long-term security.

The proposed premium increases and benefit reductions would be devastating to me personally. An increase of this magnitude, combined with higher deductibles and new prescription costs, would significantly reduce my take-home pay at a time when the cost of living continues to rise across every category.

In addition, the State is currently facing a severe hiring and retention crisis. Many agencies are operating with extremely high vacancy rates. Employees are stretched thin, absorbing additional workloads, and struggling to keep up with basic operational demands.

Implementing significant increases to employee health insurance costs during a workforce crisis risks further destabilizing agencies. It will make recruitment more difficult, accelerate burnout, and potentially push experienced employees to leave public service altogether.

After 21 years of service, it is deeply concerning to see the financial burden shifted so heavily onto employees who have remained committed to the State through challenging times.

I respectfully ask the Board to:

- Advocate strongly for sustainable state funding,
- Consider phased or incremental adjustments rather than immediate large-scale increases,
- Fully evaluate the workforce impact before approving changes of this magnitude.

Health insurance is a core component of total compensation. Decisions made now will directly affect employee retention, recruitment, and the State's ability to deliver services to the public.

Thank you for your time and consideration.

Crystal Novotny
State Employee – 21 Years of Service

Increasing state employees benefits at there expense is not the way to take care of your state employees. If you raise these rates you will lose a lot of state workers and we all know that we are in a staffing crisis already. I work for the Nevada department of corrections and we have been hurting for staff. If you choose to raise the rates who will keep prisons running because officers will go elsewhere to work and you won't have any officers left. The cost should not come on the backs of your state employees. I ask the board to reconsider and not raise our rates.

From: Danial Jacobs, Sgt. NDOC Ely State Prison

To Board Members,

I have been working for NDOC for almost 13 years and have seen many changes during that time. It has always been to increase the amount we have to pay out. As I get older and my wife gets older, trips to the doctor's has increased, and will continue. She is unable to work and so the burden has only gotten worse for us in medical bills. Her condition is degenerative and will not get better. Having to live with slowly losing my wife, making it harder to get care and be able to pay for it should not have to be something anyone should go through. You look at us as a number, we aren't, we're people with loved ones who may be sick. Or we may be the ones who are sick that will have a horrendous medical burden that we leave our loved ones.

One of the questions we need to ask is why the deductibles weren't adjusted annually with inflation. This had to be something that was discussed each year unless it was purposely left out. That would beg the question why if it was left out. You are supposed to be the experts or at least have access to experts. Inflation happens every year and has for decades. It's not a new experience.

Please keep in mind, we're in the trenches every day. We need to know that if we get hurt or sick outside of work, we're not having to go bankrupt due to medical bills and higher premiums and deductibles. Please seek other means of taking care of your officers so that working is something positive and not negative, that we have a paycheck to look forward to instead of a disappointment because of a large increase in premiums taken out of our pay.

you for taking our comments.

When I learned about the huge increase that will be deducted from our insurance every pay check, I immediately couldn't help but think "how is this going to be possible to afford?" With the cost of hard working state employees increasing, ygyr, leaving a lot of employees with the choice of having no insurance for their families or doing a MASS amount of overtime in order to pay for the new bi-weekly insurance. This incredibly disrupts my time with my family or it disrupts their health insurance.

With inflation increasing, why weren't the deductibles increased with it?

I am demanding that the State of Nevada provides adequate funding for this.

If anything, a phased increase over a stretched period of time would help state employees.

Moreover and most importantly, I hope that the State puts in efforts to scope for alternative solutions to avoid devastating our state employees.

Thank you.

Good afternoon,

My name is Kevin Norwood, and I am a Correctional Officer with the Nevada Department of Corrections. I am here to formally oppose the proposed changes to the Public Employees' Benefits Program that would increase premiums while reducing benefits for state employees. As PEBP participants, we already contribute a significant portion of our compensation toward healthcare coverage. Between mandatory retirement contributions, taxes, and benefit deductions, a large portion of our take-home pay is already committed. Increasing employee premium contributions while reducing plan value effectively amounts to a pay cut for frontline public safety employees.

Correctional Officers work in one of the most hazardous environments in state service. Our facilities are chronically understaffed, and officers are routinely exposed to physical danger, communicable diseases, and high-stress conditions. Healthcare coverage is not a luxury for us — it is essential.

When PEBP reduces benefits or shifts more costs onto employees, it directly impacts recruitment and retention within the Department of Corrections. We are already facing staffing shortages. Weakening benefit packages makes it harder to attract and retain qualified officers, which ultimately affects institutional safety and public safety.

The state of Nevada relies on Correctional Officers to maintain order, safety, and security within its institutions. If the work we do is recognized as essential and hazardous, then our healthcare benefits should reflect that reality.

I respectfully ask the Board to reconsider any proposal that increases employee costs while reducing coverage under PEBP. Supporting state employees' health is an investment in workforce stability and public safety.

Thank you for your time.

EROS MAROGY

Board Members,

After reviewing the PY2027 Plan Design and Rate Methodology presentation, I am outraged. An 80–133% increase in health insurance costs is not a minor adjustment--it is an extreme financial blow, and once again, the burden is being placed squarely on employees.

State employees did not create this budget problem. We should not be punished for the state's inability to manage its finances without gutting the take-home pay of its workforce. The assumption that employees, many of whom are already in lower-paying classifications, can absorb increases of this magnitude is detached from reality.

We do not receive automatic annual COLAs. PERS contributions are set to increase again on July 1, 2027. How is it reasonable to expect employees to sustain having nearly 30% of their salary consumed by PERS and health insurance alone? That is not sustainable. It is not responsible. And it will not retain a reliable, experienced workforce.

Raising already high premiums and out-of-pocket costs further strains employees who are already stretched thin. These increases directly threaten our financial stability, our ability to care for our families, and our capacity to remain healthy and productive in our roles.

If the goal is to maintain a functioning and committed state workforce, this proposal moves us in the opposite direction. Dedicated public servants cannot continue absorbing unchecked cost increases while their wages remain stagnant.

I urge the Board to reject these proposed increases and pursue alternatives that do not disproportionately shift the financial burden onto employees and retirees. Affordable healthcare is not a luxury, it is a necessity for a stable, effective workforce.

State employees deserve better than this.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Rene' Davies

Board Members,

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Jessica Adams

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PEBP BOARD

As most of us state employees know the Insurance has been subpar as it is with the state for years the perks of working for the state are going by the wayside most of us still here is due to so many years vested. Now you are planning to increase our Health Insurance benefits due to shortfall that has been happening for years. It does not seem fair you put off to employees, We cannot cancel our insurance so most are stuck we do not get any pay increases to offset costs. Why would anyone want to work for the STATE so many people have left to go to Private sector due to the pay and other perks being way better that the state offers. We are also stuck with a company UMR that a lot of medical offices do not want to deal with. We live check to check barely making it and you want to take more...when we get a COLA raise our PERS goes up so really there are not increases.

just another state employee that will probably not be read but had to express the concern and stress you are putting on us.

Sherrie Parker

Dear PEBP leadership,

As both a concerned employee and a supervisor working for the Nevada Department of Corrections, I feel compelled to express the serious impact the proposed health insurance rate increases will have on our workforce. While we acknowledge that the Department of Corrections received a substantial raise under the FOP 2023 contract which brought us closer to an adequate salary, the reality for many of us is that those gains have already been significantly offset.

- In 2023, staff received a 20% raise.
- In 2025, PERS contributions increased by 4.5%, followed by only a 1% COLA for two consecutive years.
- This left employees effectively **3.5% short in year one and 2.5% short in year two**, with non-police/fire members receiving no COLA but an additional 1.6% increase.

Now, with the proposed health insurance increases—some exceeding **50% or more**—employees stand to lose **15% to 40% of their pay**.

For example:

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These increases are not sustainable. They will **cripple our ability to hire and retain quality employees**, especially in areas already facing severe staffing shortages outside Las Vegas and Carson City. Employees with little seniority will be forced to seek other employment simply because they cannot afford to work for the state under these conditions.

We urge the PEBP leadership to reconsider this proposal and explore alternative solutions. Implementing these increases as proposed would be detrimental to all state employees and to the long-term stability of our workforce.

Respectfully,

Sgt. Jason O'Dea

As a state worker, but on my own time and as a family of 4, we have a hard time affording things as they are and we CANNOT afford yet another increase –let alone the 2027 Illustrative--- there IS NOT WAY FOR US TO PAY THAT!!!! We would have vital medicines we would have to try to do without and still try to work for the public and the State--- we should not be increasing costs just because it appears everyone else is. There may be such a thing as allowing the paygrades below say 40 – be allowed to have Medicaid as a secondary if you are going to increase costs- that way the feds have to contribute some to cover us.

The cost of the insurance is the reason several people cannot retire that are eligible to. Please consider that we are paying enough already. --- IT IS NOT POSSIBLE AT ALL for me to pay over 1000.00 per month for me and my children. I just don't make enough to cover that and live!!!! I would literally be bankrupt.

To whom it may concern,

The recent increase in healthcare fees for state employees is concerning. Raising these rates places additional financial strain on employees, many of whom may struggle to afford coverage. As employees dedicated to keeping the state functioning effectively, we expect fair treatment and consideration. Unfortunately, ongoing issues with the state's healthcare system—such as provider access problems and some practices refusing to accept state insurance due to program inefficiencies—highlight a lack of support for those who serve Nevada.

It is perplexing that rates have not been gradually increased over time, but instead, an abrupt proposal now suggests a rise of up to 133%. Such a significant increase seems to contradict the goal of supporting Nevada's workforce. Before implementing such substantial rate hikes, what alternative options have been considered or proposed? The current approach appears to disproportionately impact employees and their families, especially when combined with declines in care quality.

As a younger state employee, I entered the workforce expecting stable healthcare coverage, but the past five years have been stressful and disappointing. State employees work diligently to improve Nevada, and it is crucial that we are adequately supported. The proposal to increase rates dramatically, alongside declining service quality, is troubling. We are expected to pay more while receiving less, which undermines morale and commitment.

Furthermore, after working approximately 33½ years for a state pension and healthcare, the subpar levels of care and the lack of comprehensive support are discouraging. This treatment raises concerns about attracting new talent and retaining committed employees. We deserve a healthcare system that balances affordability, quality, and respect for those who dedicate their careers to serving Nevada.

Sincerely,

Loren Borst

Misty Allen

Public Comment

Hello,

If the decision to increase Health Care Plan Premiums by 60-130% will cause me and many other individuals' financial hardships. Additionally, the proposed changes to prescriptions will cause many of my medications to become completely out of pocket at almost \$2,600.00 a month. If these changes become implemented, I will no longer be able to maintain my health to continue employment. Unfortunately, the ultimate outcome will be needing to terminate my employment with the State and attempt to file for Disability Social Security in order to receive basic care that allows me to be employable and complete basic life functions. This change will affect not only me but hundreds to thousands of other employees in the same way or possibly even worse.

Please consider the individual effect that this will cause and in the long term the State of Nevada's employment rating as many may be forced financially to look for employment in the private sector or file for government assistance.

Thank you,

Dear PEBP Board Members,

I am writing to state my unequivocal opposition to the proposed increase in health insurance premiums for State of Nevada employees and retirees. A 133% hike is not only unjustifiable—it is outrageous. How can such an extreme measure be considered acceptable? Why was this proposal not communicated directly to every member affected?

State employees have already endured financial setbacks through increased PERS deductions and prior premium hikes. Imposing an additional, exorbitant increase threatens access to affordable, quality healthcare and places an undue burden on employees and retirees who have dedicated years of service to this state.

Without a substantial pay increase, even a phased implementation would result in severe financial hardship. This proposal is unreasonable and unacceptable. I strongly urge you to reject it and prioritize the well-being of those who serve Nevada. Affordable healthcare is not a privilege—it is a necessity.

Thank you for your immediate attention to this matter.

Most Sincerely,

Brittanie Caldwell

Brittanie Caldwell

John Taft State of Nevada citizen and employee

To the Board and Administrators of the State of Nevada Public Employees' Benefits Program,

I am submitting this public comment to formally express my serious concern regarding the recent and ongoing cost increases within the Public Employees' Benefits Program (PEBP). The magnitude of these increases has placed an extraordinary financial burden on Nevada's public employees, retirees, and their families.

While healthcare costs may rise over time, the scale and pace of the current increases suggest deeper structural and governance failures. It is widely understood that prior board decisions and management practices contributed to the program's present instability. However, public employees—who had no role in those decisions—are now being asked to absorb the consequences in the form of significantly higher premiums, deductibles, and out-of-pocket costs.

Many public servants dedicate their careers to serving the State of Nevada with the expectation of stable and affordable benefits. Instead, they are facing uncertainty and financial strain. For some families, these increases are not merely inconvenient, they are destabilizing.

I respectfully request that the Board:

1. Provide full transparency regarding the financial factors that led to these increases.
2. Clearly outline what corrective measures are being implemented to prevent further escalation.
3. Explore alternative cost-containment strategies that do not disproportionately impact employees and retirees.
4. Establish stronger oversight and accountability mechanisms to prevent future mismanagement.

Public trust in PEBP depends on responsible governance, financial transparency, and equitable decision-making. Moving forward, it is essential that current leadership acknowledge past shortcomings and demonstrate a concrete, sustainable plan to restore stability and affordability.

Nevada's public employees deserve a benefits program that reflects sound stewardship and fiscal responsibility. I urge the Board to take decisive action to correct course and protect the individuals who rely on this program.

Thank you for your consideration.

Sincerely,

John Taft

Paul Humphreys
Carson City, NV 89701

Nevada Public Employee's Benefits Program (PEBP)
3427 Goni Road, Suite 109
Carson City, NV 89706

Dear members of the PEBP board,

Thank you for the opportunity to make a public comment regarding possible increases in PEBP healthcare premiums. State of Nevada staff members with whom I work are exceedingly alarmed at the possibility. They are already considering contingencies including leaving State employment.

Premium increases will have a serious negative impact on current State staffing levels and future recruiting efforts. I personally know a staff member who will be forced to leave State employment if the premium increases are adopted. This employee depends on life-sustaining medications.

I urge maximum transparency about PEBP finances. What is the magnitude of PEBP financial reserves as of today?

I urge maximum use of innovative solutions. Segal Group, Inc's website advertises their ability to "design responsive, innovative solutions to help ensure the health and well-being of [client's] people." Frankly, draconian premium increases and benefit reductions do not constitute "innovative" solutions.

I urge the PEBP Board to make humane decisions with an eye towards unintended staffing consequences.

Respectfully,

Paul Humphreys

Dear Members of the PEBP Board,

I am writing to respectfully ask the Board to reconsider its proposed changes to state employee insurance. I am a Nevada state employee currently enrolled in the Health Plan of Nevada HMO Access Plan as an individual participant. My current premium is \$219.91 per month. Based on the proposals under consideration, my premium could rise to more than \$400 per month while benefits are reduced.

For me personally, as a newer state employee living on my own, that increase would have a devastating impact on my budget. Like many state employees, I am already balancing rising housing/rent and grocery prices here in Nevada. Doubling my health insurance premium would force me to drastically reconsider my budget for rent and basic necessities. Health coverage should not come at the cost of housing and food security for public servants.

I am also respectfully asking the Board to consider the following before approving these changes:

- Work with state leadership to secure additional funding so employees are not asked to absorb disproportionate increases.
- Phase in any necessary premium adjustments over multiple years.
- Provide transparency about why deductibles and copays were not adjusted gradually in prior years.
- Explore alternative cost-control strategies before reducing benefits and increasing employee costs so dramatically.

I understand healthcare costs are rising nationwide, but these proposed changes would significantly reduce the real compensation of state employees and retirees. This is also not sustainable for workforce recruitment, retention, or morale. Please seek a more balanced solution that protects access to affordable healthcare for Nevada's public workforce.

Thank you for your consideration.

Respectfully,

Reino Graves

Nevada Office of Emergency Management/Homeland Security

Henderson, NV



Public Comment for PEBP meeting 02.24.26

February 23, 2026

To whom it may concern:

The proposed increased health care costs for all Nevada State employees are astronomical and I am not sure you are considering the ramifications of the already exorbitant amounts coming out of our paychecks. With the added inflation, higher PERS costs, zero employer HSA contributions, as well as zero COLA for two years, we as State workers are faced with decreased income and no offset for these inflated costs. With now double if not triple premium costs, less coverage and more out of pocket expense many of us will be forced to look for employment with the City, private sector, or County where their health costs are zero to the employee if not minimal. This will create an even larger vacancy rate than there already is with the State as well as poor quality of work due to over worked employees trying to cover the vacancies. The biggest draw for people to come work for the State used to be stability and the benefits (medical and retirement) but lately those benefits are dwindling as fast. In your proposed plan there are no benefits for State employees. Only drawbacks of less coverage, increased premiums and increased out-of-pocket expenses. We all would like a better option than what you are proposing and feel we deserve that. We would like to see the State of Nevada thrive and that can't happen when the employees working to keep this State functioning are not treated fairly and given proper benefits.

Thank you for your time,

LH

February 23, 2026

From: Amy Meisler

Re: Proposed Rate Increase

To Whom It May Concern,

I am writing to express strong opposition to the proposed increase in PEBP health insurance premiums scheduled for July 1, 2026.

State of Nevada Employee's are already absorbing rising costs in nearly every aspect of daily life (e.g. housing, groceries, and childcare) without corresponding cost of living adjustments. Any increase in health insurance premiums would force families to make the difficult financial tradeoffs between healthcare coverage and other essential needs.

Additionally, amongst ongoing recruitment retention challenges, this proposal makes state employment less competitive compared to local governments and private employers. I respectfully urge you to reconsider this proposal and pursue alternatives that protect employees.

Thank you for your time and consideration.

Amy Meisler

Lauren Sanew

TMCC

Members of the PEBP Board,

I am writing to express serious concern regarding the proposed premium increases and plan design changes being considered to address the projected budget shortfall.

The scale of these proposed increases is simply unacceptable. Employees are facing premium hikes of 23% to 84% on employee-only plans and as much as 82% for employee + family coverage. At the same time, deductibles, out-of-pocket maximums, and prescription drug costs are being increased across multiple plans. For many employees, this represents a significant reduction in take-home pay and access to affordable care.

These changes place an undue financial burden on employees who have already absorbed effective salary decreases in recent years due to rising costs and stagnant compensation. Asking employees to shoulder even more of the cost through both higher premiums and higher cost-sharing amounts is a double hit: we pay more each month and receive less coverage in return.

While the projected \$103 million shortfall and declining reserves are serious and warrant thoughtful action, shifting the majority of the solution onto employees is not equitable or sustainable. Public employees should not be forced into financially precarious positions in order to maintain basic health coverage.

I urge the Board to reconsider a solution that relies so heavily on premium increases and benefit reductions. A balanced approach that includes additional revenue strategies and protects employees from drastic cost escalation is essential.

Thank you for your consideration.

Dear PEBP,

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Thank you,

A handwritten signature in black ink that reads "Leah Young". The signature is written in a cursive, flowing style.

Leah Young

Proposed PEBP Benefit Changes

Over the past several decades, wages and benefits for state employees have steadily eroded, even as productivity and workload expectations have increased. Historically, state employment was highly sought after because strong benefits helped offset salaries that were often lower than those offered by city and county agencies. Those benefits provided stability and long-term security.

During periods of economic downturn, many of those valued benefits were reduced or eliminated. However, when economic conditions improved, they were not meaningfully restored. Cost-of-living adjustments have remained minimal, while health insurance premiums have increased by three to five percent or more. Now, once again, state employees are being asked to absorb additional costs under the justification of budgetary shortfalls.

Nevada's cost of living is at an all-time high. Meanwhile, many city and county agencies have restored benefits and maintained competitive cost-of-living increases, while the state continues to fall behind. These ongoing financial pressures make it increasingly difficult for employees to focus on their professional responsibilities, particularly when faced with rising healthcare costs and the potential of medical emergencies. Institutional knowledge is steadily lost as experienced employees leave for better opportunities, and morale declines among those who remain.

The proposed PEBP changes are deeply concerning. The state cannot reasonably expect to retain dedicated, hardworking employees while continuing to increase costs and reduce benefits. State employees are already doing more with fewer resources and less personnel, yet compensation has not kept pace with inflation or market standards. Insurance rates continue to rise, forcing some employees to delay or forgo necessary medical care simply because it is unaffordable.

It is increasingly difficult for workers, especially those with low or moderate incomes, to afford housing, raise a family, and plan for retirement in Nevada. Every service, trash, power, water, and sewer have increased along with outrageous fees for insurance, medical expenses, and groceries. Meaningful solutions are needed to ensure that state employment remains sustainable, competitive, and worthy of the public servants who keep Nevada running. We must ensure our voices are heard; these proposed adjustments jeopardize our ability to survive and receive the medical care we deserve. These proposed rate increases are simply unaffordable!!

Hello, I would like to express my feelings about the proposed increase. How in the world can you run the budget like this. You tell me I have to run UNLV HVAC DEPT with in a budget. I no longer feel supported by this University and policies. This is very sad to say but you will be taking all the passion that we have tried to keep this University running with the terrible support from Carson City.

Thank You, Darby Britt HVACR IV

Dear PEBP leadership,

I am very concerned about the upcoming planned price hikes for health insurance. PEBP is currently the only option I have to cover myself, my wife and my children. I am currently paying 400.99 a paycheck. This alone is almost untenable, as I am already having to pay 27%ish of my gross pay for PERS. That is 801.98 dollars a month. Last budgeting period, I already took a cumulative 1% pay cut. With the proposed increase I would be paying more than twice for the same coverage I am receiving now. PEBP insurance is already expensive and almost universally unexcepted by most providers, and as such I almost always have to pay out of network prices in my own city. With the proposed increase more than doubling the current cost, this would force me to start looking for other employment options. Per the Bureau of Labor Statistics, the average monthly cost of subsidized family insurance is between \$570 and \$750 per month. We are currently at \$800. Going to the proposed 1,868.59 per month would be significantly more than double the national average, and even higher than the Unsubsidized average rate of \$1,500. This is not reasonable. For what is already sub-par coverage, to cost as much as if I was getting personal insurance is ridiculous.

This benefit is not just a nice thing you give to state employees, but is a requisite of reasonable, and consensus employers. Raising the rates that much will literally make my Health insurance cost more than my mortgage. It will consume around ¼ of my total paycheck.

Please reconsider this unreasonable price hike. With the entire state using PEBP you should be able to get better rates, due to the size of the group who will be paying the premium.

Thank you.

Charles Schmidlein

I am writing to protest the unacceptable rate hikes for the insurance plan.

On a personal level, these increases will seriously impact my family of five. We chose the HMO option to manage costs, and now those costs will have a serious impact as we attempt to pay for education and cost of living.

However, as a manager, I am particularly concerned about the impact of these hikes on the faculty and staff I work with and supervise. I am well aware of the many times our employees have had to make difficult choices related to cost of living and health. It has become increasingly difficult to afford housing, health care, and food in Southern Nevada. So many people have had to supplement with campus resources such as the food pantry. Are we now going to decimate their access to health care? In particular, these rate hikes will devastate our most vulnerable low-wage employees who work so hard to care for our educational communities..

These hikes are irresponsible. PEBP should model good stewardship, caring for the people who work here in the system. To not do so will erode trust and goodwill and impact people's ability to do their jobs.

These high out-of-pocket maximums increases for 2027 are unacceptable. PEBP must spread out the premium increases over at least three years to help our employees address the cost. Relatedly, the state must increase contributions to PEBP.

Board members,

I have found in my conversations with my fellow State employees that people work for the government for two major reasons: 1. the desire to help others and 2. the benefits. If number 2 cannot support an individual or a family, then people can't afford to work for the government for reason number 1.

It has become increasingly difficult to fill positions or keep employees here at the State. Between the frustrations of dealing with outdated software and hardware, too few people doing the work of too many, the wages being lower than those for similar jobs in the private sector, and a lack of commensurate benefits to outweigh that - there has been less and less on offer to entice or retain employees.

We in Carson already must deal with the problems between UMR and our major medical provider in the area. UMR, a company which has been up to its eyeballs in lawsuits, including having lost a major lawsuit last year to the US Department of Labor for improper health claim denials. And yes, we Carson City employees are very aware that this doesn't impact folks in Vegas. "Oh, but you can go to Reno to get healthcare." Yes, and watch as an appointment that might take 1 hour of sick leave from a Carson provider become three. For families with children, that's not acceptable.

Do I understand that to some extent this is a much bigger problem than improper calculations? It would take too long for me to address the systemic issues that plague Nevada and leave us in the bottom 5 in almost every metric that's important to human health and welfare. It does not change the fact that the people in the most basic positions in this system already do not earn enough to support decent housing if they live on their own. Raising the cost of our premiums 84% can mean the difference between having to choose between meeting basic needs like healthcare and food.

People work entry level positions at the State, even though they could earn more at In and Out because of the ability to work their way higher in the system. An 84% increase will mean people cannot afford to support themselves much less a family before they can work their way out of entry level positions.

It is incredibly important you find a way to deal with this imbalance over several years rather than dropping it on us all in one.

Thank you,

Mary Crawley

To the Public Employees' Benefits Program (PEBP) Board,

I am submitting this public comment to formally oppose the proposed increases to employee health insurance premiums and the simultaneous reduction in benefits being considered by the Board.

The proposal to increase premiums by 60–130%, while also increasing deductibles, raising copayments, and introducing new prescription deductibles, places a severe and unreasonable financial burden on state employees. These changes are especially concerning when viewed alongside increasing retirement contribution rates, reduced retention incentives, and minimal annual pay increases that fail to keep pace with inflation and the rising cost of living.

As a state correctional officer with the Nevada Department of Corrections, I believe it is important to emphasize that these decisions affect more than just our paychecks—they affect the morale, stability, and integrity of the workforce responsible for maintaining public safety.

Correctional officers work in one of the most demanding and high-risk environments in state government. Every day we are tasked with maintaining order, protecting one another, and ensuring the safety of the public. These responsibilities require a workforce that is supported, respected, and valued by the state we serve. Unfortunately, proposals like this send the opposite message.

When the state increases financial burdens on its employees while simultaneously reducing benefits and limiting compensation growth, it signals a lack of respect and recognition for the work that correctional officers and other state employees perform every day. Over time, policies like this erode morale, weaken trust in leadership, and damage the integrity of the department.

Low morale within correctional institutions is not a minor issue—it directly impacts staff retention, recruitment, safety, and operational effectiveness. When officers feel unsupported or undervalued, agencies struggle to retain experienced personnel, leaving facilities understaffed and placing additional strain on those who remain.

Additionally, I am a single parent, and the majority of my monthly financial obligations already consist of medical expenses for my child. Recently, my own health has been compromised, creating additional medical costs that I must now manage as well. The proposed increases in premiums and out-of-pocket expenses would significantly affect my ability to provide necessary healthcare for my family.

While some state employees may qualify for Medicaid due to extremely low wages, many of us do not qualify for Medicaid yet still cannot reasonably absorb increases of this magnitude. This creates a dangerous gap where employees earn too much to qualify for assistance but not enough to afford dramatically increased health insurance costs.

If these increases move forward, many employees may be forced to forgo health insurance entirely because the premiums and out-of-pocket costs will simply become unaffordable. The consequences of that are serious—not only for employees and their families, but for the department itself.

Employees without health insurance are more likely to delay necessary medical care, work through illness or injury, and face significant financial hardship when medical issues arise. In a profession like corrections, where physical and mental health are critical to maintaining safety and effective operations, this creates substantial risks for both staff and the institutions we are responsible for operating.

A workforce that cannot afford healthcare is a workforce that is less healthy, more stressed, and more vulnerable to burnout and attrition. Ultimately, that impacts institutional safety, operational stability, and the state's ability to recruit and retain qualified correctional officers.

These circumstances raise serious concerns that deserve clear answers:

- Why were deductibles and copayments not adjusted gradually over time instead of creating the sudden crisis we now face?
- Why did state funding fall \$56 million short, and why are employees expected to absorb the consequences of that shortfall?
- What alternatives were considered before proposing increases that significantly impact employee families and financial stability?
- How does the state intend to maintain morale, recruitment, and retention in critical public safety positions under these conditions?

State employees—particularly correctional officers—serve in roles that are physically demanding, mentally taxing, and essential to public safety. Policies that increase financial strain while reducing benefits undermine not only employee well-being but also the strength and stability of the agencies that protect our communities.

I strongly urge the Board to reconsider these proposals and work toward solutions that include increased state funding, transparent financial planning, and a more balanced approach that does not place disproportionate burdens on employees.

The decisions made by this Board will have real consequences for the families, morale, and operational strength of Nevada's public workforce. I respectfully ask that you take those consequences seriously.

Amanda Macias

Correctional Officer

Nevada Department of Corrections

PEBP Board Public Comment 2-23-2026

It has come to my attention that the Board is considering a premium increase of up to 84% for the coming year. I am writing to urge the Board to reconsider such a drastic change in such a short time frame and one that requires us dedicated public servants to once again shoulder the burden.

I am the main financial provider in my household, as my husband has recently become disabled and must now work only part-time. This means that an already significant amount of my income (~\$800/month) goes strictly to our health insurance premiums, to say nothing about the cost of prescriptions, doctor visits, procedures, etc. For that cost to jump to over \$1,440 per month, for coverage that involves higher copays, higher deductibles, and higher out-of-pocket maximums, and combined with other costs such as loss of COLA and increased PERS contributions, is **not** sustainable.

I am also dismayed by the proposed premium increases that would affect retirees. While I am not retired yet, it is on the horizon. Such an increase would make it so that I would not really be able to retire at all, as I would need to continue to work part-time for the rest of my life, just to afford health insurance for myself and my family.

I have been a proud state employee for nearly 23 years. And while I greatly appreciate the opportunity to be a public servant and serve my fellow Nevadans, I have witnessed our benefits gradually chipped away over that time. Please do not allow this to happen yet again.

In short, we absolutely cannot afford to take on such an immense increase in our health insurance premiums at this time. I understand that the financial issues that the Board must tackle are formidable. However, at the very minimum, please consider other options first, before phasing in any necessary premium increases over a long span of time. Thank you.

To the Public Employees' Benefits Program (PEBP) Board,

I am submitting this public comment to express my strong opposition to the proposed increases in employee health insurance premiums and the reduction of benefits currently being considered.

According to the information presented for the February 24 PEBP Board meeting, the Board's consultant has recommended premium increases ranging from approximately 60% to as high as 130% across multiple plans, along with significant reductions in benefits. For example, under the LDPPO plan, the employee-only premium could increase from \$92 per month to between \$169 and \$203, while family coverage could rise from \$498 per month to between \$915 and \$1,160. At the same time, deductibles would increase from \$300 to \$500, copays for doctor visits would increase from \$30/\$50 to \$35/\$70, and a new \$200 prescription deductible would be introduced. In addition, non-preferred brand medications would move from a copay structure to 100% out-of-pocket costs.

Employees in EPO and HMO plans would face similar impacts, with employee-only premiums potentially rising from \$220 to between \$373 and \$438, and family premiums from \$802 to between \$1,276 and \$1,553, alongside comparable benefit reductions.

These proposals represent not only drastic premium increases, but also a significant shift of healthcare costs onto employees. State data indicates that the employee and retiree share of total healthcare costs would increase from approximately 19.3% to nearly 28–30%, while overall benefits are simultaneously reduced.

Even more concerning is the fact that even with these dramatic increases and benefit reductions, the program is still projected to face a funding gap unless the state increases funding. Employees are therefore being asked to absorb substantial financial burdens while the underlying structural funding issues remain unresolved.

As a state correctional officer, I believe it is important to emphasize that these decisions affect more than just our paychecks—they directly impact the morale, stability, and integrity of the workforce responsible for maintaining public safety.

Correctional officers work in one of the most demanding and high-risk environments in state government. Every day we are responsible for maintaining order, protecting one another, and ensuring the safety of the public. These responsibilities require a workforce that is supported, respected, and valued by the state we serve. Proposals that dramatically increase employee costs while reducing benefits send the opposite message.

Low morale within correctional institutions is not simply an internal personnel issue—it has real operational consequences. Staffing shortages, burnout, and difficulty recruiting and retaining qualified officers all directly impact institutional safety and the ability of the department to effectively perform its mission.

I am also speaking from a personal perspective. I am a single parent, and a significant portion of my financial obligations already consists of medical expenses for my youngest child.

For employees like myself, these proposed increases are not simply budget adjustments—they create real uncertainty about whether healthcare coverage will remain affordable.

While the state's own data indicates that more than 1,700 state employees and their families already rely on Medicaid because they cannot afford the insurance offered through the state, many of us fall into a different but equally difficult position. We do not qualify for Medicaid, yet we may also be unable to afford these dramatically increased premiums and out-of-pocket costs.

This creates a serious coverage gap where employees earn too much to qualify for assistance but not enough to reasonably absorb increases of this magnitude. If these proposals move forward, some employees may be forced to go without health insurance entirely.

A workforce without reliable access to healthcare is a workforce that may delay treatment, work through illness or injury, and face significant financial hardship when medical issues arise. In a profession like corrections—where physical health, mental resilience, and operational readiness are critical—this presents serious concerns not only for employees and their families but for the overall functioning and safety of the department.

The information presented also raises several important questions:

- Why were deductibles and copayments not adjusted gradually over time instead of creating a situation requiring sudden and dramatic increases?
- Why did state funding fall \$56 million short, and why are employees now expected to absorb the consequences of that shortfall?
- What alternatives were explored before proposing changes that significantly increase costs while reducing coverage?
- How will these decisions affect recruitment, retention, and morale among critical public safety positions such as correctional officers?

State employees dedicate their careers to serving Nevada and supporting the institutions that protect and sustain our communities. Policies that substantially increase financial burdens while reducing benefits undermine not only employee well-being but also the long-term strength and stability of the state workforce.

I respectfully urge the Board to reconsider these proposals and pursue solutions that include adequate state funding, greater transparency regarding the program's financial challenges, and a more gradual and equitable approach to plan adjustments.

The decisions made by this Board will have lasting consequences for the employees and families who rely on these benefits. I ask that those consequences be carefully considered before moving forward with changes of this magnitude.

Sincerely,

Wayne Wilson, Sr.

Senior Correctional Officer

Nevada Department of Corrections

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Logan-Ashley Kisner

2/23/2026

Dear Members of the PEBP Board,

I am writing to formally request that the Board reconsider the proposed health insurance premium increases. As a public employee who has not received a Cost-of-Living Adjustment (COLA) for the past two years, I cannot absorb these additional costs.

The combination of stagnant wages and rising inflation has already strained my household budget. Implementing a substantial premium hike—alongside increased deductibles—will create a severe financial crisis for my family, making essential healthcare unaffordable.

I urge the Board to seek alternative funding solutions that do not place this entire burden on employees.

Thank you for your consideration of the financial stability of Nevada's public servants.

Sincerely

Anna Marie Valbuena

Program Officer of Vocational Rehabilitation Program

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Troy Ternes Nevada Department of Corrections

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Statement to the Board

As state employees, we dedicate our time, skill, and effort to ensuring that all Nevadans receive high-quality services, infrastructure, and care. We take pride in serving this state. Many of us work long hours, overtime, and in demanding conditions to keep Nevada functioning safely and effectively. However, like the citizens we serve, we are increasingly burdened by the rising costs of everyday life. Housing, groceries, fuel, utilities, and basic necessities continue to climb. Despite our commitment to public service, our wages have not kept pace with inflation or the growing financial pressures placed upon us. Now we are faced with the possibility of further increases to our already costly health insurance plans. Health insurance is not a luxury — it is a necessity. It protects our families, our children, and our ability to continue working without fear of financial ruin from medical expenses. We respectfully but firmly ask the board to consider the cumulative strain placed on state employees. Each additional cost increase may appear small in isolation, but together they create a heavy and unsustainable burden. Morale suffers. Retention suffers. Recruitment suffers. And ultimately, the quality of service to the public suffers. We are proud to serve Nevada. But service should not require personal financial sacrifice to the point of instability. A strong state requires a strong workforce — one that is healthy, stable, and able to focus on serving the public without constant financial stress. We ask the board to prevent yet another burden by rejecting increases to our health insurance costs. Support the workforce that supports Nevada. Invest in the people who keep this state running. We deserve fairness. We deserve stability. And we deserve to be heard.

Lara Evans

Reno, NV 89506



February 23, 2026

To whom it concerns,

I hope this letter finds you well. I am writing to discuss a matter of utmost importance that requires your immediate attention, as it will significantly impact state employees and their families. As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Best Regards,

Lara C Evans

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Scott

Karina Meza

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

HELEN HARRIFF

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I do not support another staggering increase to our health insurance, especially as a mother of a special needs son who depends on affordable insurance to cover therapy costs. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Good afternoon. My name is Lisa Butler, and I am a Nevada state employee.

As state employees, we work every day to ensure that all Nevadans receive high-quality care and essential services. We are proud to serve our state.

Like all Nevadans, however, we are struggling under the weight of rising costs for housing, groceries, utilities, and childcare. While recent raises were appreciated, increases in retirement contributions and health insurance premiums have effectively erased those gains. In many cases, employees are taking home less than before. A raise that results in lower take-home pay is not truly a raise.

Now we are facing the possibility of yet another increase to already costly health insurance plans — coverage that many employees feel does not reflect the premiums we are paying.

I respectfully ask the Board to prevent adding yet another financial burden to state employees. A healthy and stable workforce is essential to keeping Nevada strong. Supporting state employees means ensuring that compensation moves forward, not backward.

Thank you for your time and consideration.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Subject: Concern Regarding Proposed Health Insurance Rate Increases

Dear PEBP Leadership,

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As an Administrative Assistant employed by the State of Nevada, I am writing to express serious concern regarding the impact the proposed health insurance premium increases will have on classified employees.

Administrative Assistants are part of the State's classified pay structure and are compensated according to legislatively approved grade and step schedules. For example, Administrative Assistant classifications commonly fall within:

- Grade 27 – approximately \$45,000–\$60,000 annually depending on step
- Grade 29 – approximately \$50,000–\$67,000 annually
- Grade 30 – approximately \$53,000–\$71,000 annually

While compensation is structured and predictable, it also means earnings are capped within assigned grade ranges, and increases are incremental.

In recent years, employees have experienced:

- Increased PERS contribution rates (including a 1.6% increase in 2025)
- Limited cost-of-living adjustments that have not kept pace with inflation
- Rising costs in everyday living expenses

Now, the proposed health insurance premium increases present an additional and substantial financial burden.

For example:

Family HMO Plan

- Prior 2025: \$651.51/month
- Current: \$801.97/month
- Proposed 2026: \$1,443.55/month (+\$641.58/month)
- Proposed 2027: \$1,868.59/month (+\$1,066.62/month)

Family PPO Plan

- Prior 2025: \$423.54/month
- Current: \$497.68/month
- Proposed 2026: \$895.82/month (+\$398.14/month)
- Proposed 2027: \$1,159.59/month (+\$661.91/month)

To illustrate the real impact:

If an Administrative Assistant earns \$55,000 annually (mid-range Grade 29), their approximate gross monthly income is \$4,583 before taxes and mandatory deductions.

- A \$641 monthly increase (2026 HMO proposal) equals \$7,692 annually, or roughly 14% of gross annual salary.
- A \$1,066 monthly increase (2027 HMO proposal) equals \$12,799 annually, or approximately 23% of gross annual salary.

For an employee earning \$50,000 annually, the \$12,799 projected annual increase would represent more than 25% of gross pay.

These figures do not account for existing retirement contributions, taxes, or other deductions, meaning the actual impact on take-home pay would be even more significant.

For classified employees whose compensation is fixed within established grade structures, increases of this magnitude are not sustainable. They directly affect retention, recruitment, and the overall stability of the state workforce—particularly in rural and hard-to-fill locations.

Administrative professionals provide essential operational support to state agencies, ensuring compliance, fiscal accountability, and public service delivery. Substantial reductions in net income will inevitably drive experienced employees to seek alternative employment where total compensation is more competitive and predictable.

I respectfully urge PEBP leadership to reconsider the scope of the proposed increases and explore alternative solutions that protect both the financial stability of state employees and the long-term sustainability of the workforce.

Respectfully,
Brandi Miller
Administrative Assistant IV
NSHE

Evonna Lintz

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Thank you.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

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I am a single mother who is already struggling with rising costs in health insurance. If these costs go up I will need to really consider looking elsewhere for work as that's going to substantially impact my take home and what I am able to provide for my son. Please make the right decision and take care of your people who chose to work in public service and show us you have our back.

Elise Clark

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans that were already increased. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

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As state employees, we work hard to ensure all Nevadans receive high quality care and support. However, like all Nevadans, state employees are also struggling under the weight of increasing costs for daily life.

I ask the board to please prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

3:03



February 24, 2026 at 3:02 AM

I am a single 60 year old woman with some serious health issues.

My current copays for doctor appointments and my medications are high enough. Please don't demand us to pay more for our health care!!!

Sammie Glover

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong. I have been a State worker for over 8 years and each year there is a increase each year which has been a burden in my household. I love my job but if this increase is approved I could not continue to work for the State. I think you should reconsider this decision and think about your State workers. We are what makes this state run.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

PEBP Sirs,

The burden set upon Nevada State Employees will be greatest for those whose compensation is least. Perhaps it would be wise to scale that burden based upon the compensation rate, whereas those who are compensated more are assigned the same percentage of healthcare rate increase. For example "Everybody's healthcare insurance rate goes up 10%". Please know that I (We, my wife and I) are on the upper half of the compensation schedule, soon to retire in fact. Financially we're sound; "We can take the hit." The coming changes will be even more burdensome to State Retirees. There too it would be wise to scale any increases in a similar manner.

We know that the State budget must be balanced and that the situation we are all in is not due to any action on part of the State of Nevada. But State Employees would consider a single percentage increase based upon the payscale chart a much more fair and equitable way to distribute the burden.

From: Justin L. Henley

Sent: Tuesday, February 24, 2026

To: PEBP's Public Comment Regarding Insurance Increases.

Good morning,

My name is Justin L Henley. I have been an employee of the state of Nevada for over 13 years and am presently a AFSCME local 4041 member.

I have been a diligent and faithful employee of state of Nevada for all this time. When I started my service with the state of Nevada we were still amid furloughs which meant a loss in pay. Later I, along with many of my other brothers and sisters, kept the state afloat through every crisis, from staffing shortages to a worldwide pandemic and even in recent history with rises in our contributions to PERS and PEBPS. However, this must stop!

State employees are being bled dry, and I for one cannot afford it anymore. We are all aware of how prices for everything have gone up. The cost of groceries, rent, gas, and interest rate hikes have all made having a sustainable house less and less a viable option. Now when many state employees are still struggling to keep their checkbook balanced.

Now PEBP's seeks to increase our health insurance rates to nearly double the current rate. Any increase in contribution is ludicrous, let alone one that is nearly double the current rate. This increase will put many state of Nevada employees in the red. There is no possible way to justify this increase in contributions to state employees who must choose between health and feeding their family or keeping a roof overhead.

This is to say nothing of the simple fact that health insurance companies, including the ones who have been contracted to serve state of Nevada employees over the years have seen marked increase in profits with over \$1.7 trillion in total revenue across major providers and more than \$54 billion in profits. Among those providers who have served Nevada who I can recollect are not outliers in these profits. Aetna saw in excess of \$11 billion dollars in profit for 2025, and United Health Group, the parent company to UMR has seen an excess of \$12 billion dollars in profit for 2025. Thus, there is no reason the insurance companies that we are contracted with cannot shoulder more of the cost on their end and leave state employees at their present rates.

Additionally, state employees and agencies are more aware than ever of the consistent and gross staffing issues that has plagued our state. It is nearly impossible to hire qualified individuals in many state offices when the private sector outpaces employees in every way. From pay, to benefits, and even in some cases retirement. This increase will cut employee pay exponentially. And thus make the hemorrhaging manpower deficit even worse with some employees in my office considering early retirement or seeking employment elsewhere considering this would make their current job an unviable source of income when more lucrative employment exists elsewhere.

It is poignantly clear that state employees cannot shoulder another hit. We cannot take more financial hits and hardships. We cannot permit ourselves to be trampled on in the wake of providers who continue to make profits while bleeding us dry with a legislature that fails to heed our needs. There is no question in this matter. You must refuse any increase in employee contribution or the state will suffer. Employees will leave, replacing them will be near impossible, and the situation will only grow worse. Public safety will be reduced, the state government will lose effectiveness, and Nevadans will suffer.

I ask you to prevent this burden. I ask you not to ask any more from state employees who have already given so much. I ask you to prevent any further hardships for state employees and Nevadans as a whole. I urge you to reject any increase in employee contributions to health insurance.

Respectfully,
Justin L. Henley

Hello,

My name is Laney Parow and I have served the State of Nevada for eight years.

For my family, the proposed premium increase is not minor — it is significant. If implemented as proposed, our monthly health insurance premium will be nearly the same as what we pay for childcare. For a middle-income state employee household already navigating rising costs in housing, groceries, and fuel, absorbing two expenses of that size is simply not sustainable.

We plan our finances carefully. We budget responsibly. But this level of increase forces families like mine to consider dropping coverage altogether and enrolling our child in Medicaid just to remain financially stable. Leaving us without health insurance. That outcome shifts costs to another public system and puts additional strain on programs that are already stretched thin.

Over my eight years of service, I have watched the overall value of our benefits steadily decline while costs continue to rise. Health insurance is one of the primary reasons professionals choose public service despite lower wages compared to the private sector. If premiums continue to increase at this pace, the State will face even greater challenges recruiting and retaining qualified employees.

State workers dedicate their careers to serving Nevada. We show up in emergencies, we support our communities, and we carry out critical public functions every day. We are simply asking for benefits that are stable and affordable for working families.

I respectfully urge you to reconsider the scale of these increases and explore funding solutions that do not place this burden on employees.

Thank you.

2/24/2026

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce at reasonable and affordable costs to keep our state strong.

Yvonne Vestal

2/24/2026

To Whom it May Concern,

I am a Nevada State employee, however I am making this statement as a private citizen. My views and comments do not represent the views of my employer or any state agency. I am against the increase in deductions/ premiums as we are trying to survive. Everything is expensive and this will cause a major impact to my household. It is critical for my home to have medical insurance, however, increasing premiums will cause a great hardship. Please reconsider,

- Yadira Gomez
Guerrero

Hello,

My name is Dshamba Prater , retired from NDOC and currently serving as the Secretary for FOP Lodge 21. I am writing to express deep concern regarding the proposed increases to health insurance premiums and co-pays. These changes represent a serious and unacceptable burden on Nevada's state workforce.

Time and again, whenever the State faces a deficit or funding shortfall, it is the employees who absorb the impact. According to recent reports, this situation stems from an accounting error. If that is the case, the responsibility for correcting it should fall on the State's general fund or the rainy-day fund—not on the backs of hardworking employees who had no role in creating the problem.

The continuous and compounding increases from both PEBP and PERS are financially breaking Nevada's public servants. These are individuals performing demanding, often dangerous jobs—particularly within the correctional system—while already earning modest wages. To now ask them to shoulder even higher costs is not only unfair, it is unsustainable.

Nevada's revenue streams—gaming, housing growth, and population influx—are strong. The State has the resources to address this issue without placing additional financial strain on its workforce. The rainy-day fund exists for circumstances exactly like this. It is time to use it responsibly.

I urge you to reconsider these proposed increases. Do not move forward without exhausting every alternative. The State cannot continue to overburden its employees and expect them to remain in public service. Recruitment and retention are already critical challenges; further financial pressure will only accelerate the loss of experienced workers.

I hope you take this matter seriously and act in the best interest of all state employees.

Thank you for your time and attention.

Paul Lunkwitz, President FOP Nevada C.O. Lodge 21, retired PEBP Member

Public Comments for 2/24/2026 PEBP Meeting

Members of the PEBP Board, your proposal to increase premiums and reduce benefits for active and retired employees is disgraceful. For far too long, your lack of effort to shop for and negotiate insurance benefits at a reasonable price on behalf of state employees has caused the State of Nevada to fall further behind in the job market to recruit and retain qualified, loyal employees. State employees currently pay higher premiums than most local government agencies and receive less benefits from their plans. There are smaller private companies that do not have 1% of the employees that the state does and even they pay lower premiums for better benefits. Clark County Police Department has UMR for their provider and they pay less than we do, without the threat of increased premiums. Their insurance is self funded by the Metro Health Trust. If you are complacent with the idea that UMR is charging competitive rates, every single one of you should be invited to the unemployment line. Insurance companies will line up to offer lower cost premiums, better benefits, and at a fraction of the cost that the state pays for subsidies. The current subsidies paid by the State of Nevada may even be enough to pay the full premiums for employees. This requires that you demand a better provider and better benefits, on behalf of the employees you serve.

The fallout from increases like the ones you have proposed will be catastrophic to agencies like NDOC in their efforts to recruit and retain employees. This will also have dire consequences in all state agencies. Furthermore, now that employees and retirees are outraged by these increases, you will see a sharp decline in plan participation. There are already discussions of having entire agencies opt out of coverage in May, in order to obtain group insurance directly with providers who are obligated to provide competitive rates and benefits. If you have no one paying into your plan, it will not matter how much you increase premiums as you will go bankrupt and the state will take its subsidies elsewhere. As a retiree and on behalf of our 1400 members in the FOP Lodge 21, I strongly urge you to seek competitive alternatives if the current provider is not willing to discuss reasonable premiums and benefits.

Paul Lunkwitz

Tanya Nawrocki

State employees continue to deal with pay cuts, as the cost of living increases, our medical care increases, and our wages do not keep up. Increasing health care costs is not only burdensome, but unethical as more employees like myself cannot afford to pay for daily essentials. Do the right thing – do not increase healthcare costs for state employees.

Good morning,

My name is Jesse, and I am a State of Nevada employee with over 11 years of State service. I am here today because the proposed increases to our insurance premiums is not just a rate adjustment-it is a pay cut. For my family, this increase takes my monthly premium from \$801 to \$1497, that is the equivalent of a 9% reduction in my take home pay.

No State employee received a 9% raise this year, No State employee can absorb a 9% pay cut without consequences. This increase is not a cost share, it is a cost shift, and it shifts the burden of budget shortfalls onto families. Especially, families with children, medically unwell dependents, and it forces impossible choices. The employees might have to leave PEBP entirely, drop dependents, or leave State service for employers who offer stability.

I cannot afford this loss, in addition to other losses from the legislature not funding our contract and cutting out incentives that we previously had. In closing, I expect accountability, what options were looked at? Why wasn't this brought up before contract negotiations, so that legislation could fund pay increases to offset this? What internal financial decisions over the last two plan years have contributed to this shortfall, and who is accountable for them? Did PEBP make funding requests to the Governors officer and Legislature to prevent this? Has there been a survey conducted on how many State employees will be forced to drop dependents or leave state service because of this increase? How does the board justify calling this a premium adjustment when the real term is a 9% pay cut for the families of employees that serve this State?

To Whom it May Concern,

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

And we are already underpaid for the jobs we do. Please do not place yet another burden to a happy life with this change.

Sincerely,

Lina Sundstrom

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

JO WHITELEY

Board Members,

After reviewing the PY2027 Plan Design and Rate Methodology presentation, I am outraged. An 80–133% increase in health insurance costs is not a minor adjustment--it is an extreme financial blow, and once again, the burden is being placed squarely on employees.

State employees did not create this budget problem. We should not be punished for the state's inability to manage its finances without gutting the take-home pay of its workforce. The assumption that employees, many of whom are already in lower-paying classifications, can absorb increases of this magnitude is detached from reality.

We do not receive automatic annual COLAs. PERS contributions are set to increase again on July 1, 2027. How is it reasonable to expect employees to sustain having nearly 30% of their salary consumed by PERS and health insurance alone? That is not sustainable. It is not responsible. And it will not retain a reliable, experienced workforce.

Raising already high premiums and out-of-pocket costs further strains employees who are already stretched thin. These increases directly threaten our financial stability, our ability to care for our families, and our capacity to remain healthy and productive in our roles.

If the goal is to maintain a functioning and committed state workforce, this proposal moves us in the opposite direction. Dedicated public servants cannot continue absorbing unchecked cost increases while their wages remain stagnant.

I urge the Board to reject these proposed increases and pursue alternatives that do not disproportionately shift the financial burden onto employees and retirees. Affordable healthcare is not a luxury, it is a necessity for a stable, effective workforce.

State employees deserve better than this.

Booker Reid

To the PEBP Board,

I'm writing as a Nevada state employee to share my concerns regarding potential increases to employee health insurance costs.

For many of us working in public service, salaries have not kept pace with rising living expenses. Even modest increases to premiums, deductibles, or out-of-pocket costs can create real strain for employees and our families.

Quality health coverage is one of the main reasons people choose and remain in public service. If costs continue to rise, it risks making state employment less sustainable for many of us.

I respectfully ask the board to carefully consider the financial impact these changes will have on employees before approving any increases.

Thank you for taking employee feedback into account.

Booker Reid

Members of the PEBP Board,

I am submitting this comment to formally oppose the proposed increases in premiums and reductions in benefits for both active employees and retirees. These proposals represent a continued failure to adequately negotiate, shop, and secure competitive health insurance coverage on behalf of the employees and retirees you are charged with serving. For years, PEBP members have paid higher premiums while receiving fewer benefits than comparable public-sector employees and even many private-sector workers. State employees now routinely pay more for coverage than local government agencies, despite the State of Nevada's larger bargaining power and ability to leverage economies of scale. Smaller employers—some with a fraction of the workforce covered by PEBP—are able to secure lower premiums and better benefits, which raises serious questions about the effectiveness of PEBP's negotiations and vendor selection process.

Comparable agencies in Nevada have demonstrated that better outcomes are achievable. Other public entities using self-funded or competitively managed plans pay less in premiums, experience more stable costs, and do not face the constant threat of annual increases. Accepting the assertion that current rates are "competitive" without aggressively testing the market or demanding improved terms is not acceptable. Insurance carriers will compete for this business if required to do so, and the State's existing subsidy levels could potentially offset a much greater share—if not all—of employee premiums under a properly negotiated plan.

The consequences of these proposed increases will be severe. Agencies already struggling with recruitment and retention will fall further behind, particularly in high-stress and high-risk positions. Morale among employees and retirees has deteriorated, and continued cost increases will accelerate attrition. As costs rise, participation in PEBP plans will decline, undermining the stability of the risk pool and threatening the long-term viability of the program itself. There are already discussions among employees about seeking coverage outside of PEBP if these increases move forward.

As a retiree and on behalf of others who depend on these benefits, I strongly urge the Board to reject the proposed increases and immediately pursue competitive alternatives if the current provider is unwilling to offer reasonable premiums and meaningful benefits. Your responsibility is not to manage decline, but to actively advocate for the people who fund and rely on this program. I am currently fighting stage 4 cancer these increases will absolutely kill me!

Respectfully,

Cara Saracino-Bora

Subject: Impact of Health Insurance Premium Increase on My Family

To Whom It May Concern,

I am writing to formally express my concern regarding the recent increase in my health insurance premiums and to outline the impact this change will have on my family. As a working professional and parent, maintaining health insurance coverage is a necessity, not a luxury. However, the increase in monthly premiums significantly affects our household budget. Like many families, we operate on a structured financial plan that includes housing, utilities, childcare, transportation, groceries, and other essential living expenses. An increase in health insurance costs reduces the flexibility we have to manage these necessary obligations. This adjustment will require us to reallocate funds from other critical areas of our budget. In practical terms, it may impact our ability to save for emergencies, contribute to our children's future needs, and manage routine living expenses without financial strain. Increased healthcare costs also create additional stress when planning for unexpected medical needs, prescriptions, or specialist visits. Health insurance is intended to provide stability and security for families. When premiums rise substantially, it can create financial hardship and uncertainty, particularly for households supporting children. My priority is ensuring that my family has consistent access to medical care without sacrificing other essential needs. I respectfully ask that this concern be taken into consideration. Any efforts to minimize cost increases or provide alternative solutions would greatly benefit families like mine who are committed to maintaining coverage while responsibly managing household finances.

Sincerely,
Angela Searle

9:52

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To PEBP Board and office members. What you guys doing by increasing our Medical premiums it's strait out crazy •

I Pedro Guerra member of pebp and employee of the state I'm here by to state my opinion. I think what you guy proposing by increasing our Medical is strait out crazy . I as a family father I'm paying over \$800 a month, having a family in America was a dream that is now becoming a nightmare. 85% increase is mind boggling We have bills to pay and a family to take care of. By doubling our monthly premium you not just destroying my career you also destroying others . Please over think what damage you can cause to others before taking this step.

Sincerely

Pedro Guerra



Public Employees' Benefits Program Board February 24, 2026

Good afternoon. My name is Anna Marie Binder.

My husband has served the State of Nevada for over fifteen years with the Nevada Department of Corrections. He has dedicated his career to public service inside correctional institutions — environments that most people will never see and cannot fully understand.

Our family depends entirely on his single state employee income and the benefits that come with it. We are also raising children with special needs, which makes stable, accessible healthcare essential for our family's ability to function and remain secure.

But I want to be very clear about something that extends beyond my family.

Correctional officers and NDOC staff do not simply work difficult jobs. They accept personal risk as part of their duty to this state. Every single day, they walk into environments where violence is unpredictable, where staffing shortages increase danger, and where the possibility of serious injury or worse is real.

When they leave for work, their families live with the reality that there is no guarantee they will come home safely.

That is the level of sacrifice this workforce makes to serve Nevada.

A workforce that accepts that level of personal risk deserves stability from the systems that support them. They deserve benefits that reflect professional respect, moral responsibility, and an understanding of the sacrifices they make on behalf of this state.

When healthcare costs become unstable or unaffordable, it directly affects recruitment, retention, and workforce sustainability. Experienced officers leave. Staffing shortages worsen. Remaining officers face even greater danger. That risk compounds — not just for employees, but for the safety and stability of the institutions themselves.

These are not abstract workforce metrics. These are human consequences.

The State of Nevada depends on this workforce to maintain safety and order in some of the most challenging environments in public service. In return, that workforce deserves benefits that demonstrate professional, moral, and empathetic support — not increasing instability or financial strain.

Public employees, especially correctional staff, already give more than most will ever be asked to give. The sustainability of this workforce must remain a priority.

I respectfully urge the Board to fully consider the real human, workforce, and safety implications of these decisions before moving forward.

Thank you for your time and your service.

Anna Marie Binder

To: PEBP Board.

Nevada Public Employee' Benefit Program (PEBP) the health insurance provider for more than 70,000 Nevada State workers and retirees is considering implementing significant changes including raising rates this coming July 1st, 2026 alleging they are experiencing a deep deficit which necessitate raising revenue, which raises premiums and or decreasing costs, which would mean cutting benefits or changing certain plan terms. Some news sources state report that an Independent financial analysts determined that premiums would need to increase by 84 percent to cover expected shortfalls in the upcoming fiscal year. This is not just a significant increase it is a catastrophic increase. My family is currently enrolled in the PEBP Consumer Driven Health Plan (CDHP-PPO) under the Employee & Family plan with a participant premium of \$410.94 per month with an \$8000 Family out-of-pocket max which stipulates a 20% copay after the deductible is met. An 84 percent increase would likely increase my month premium to \$756.12 per month which is around 11% of my total gross pay. That would be a whopping \$9073.44 per year in just premiums before considering any actual use of the insurance. My wife and I have serious chronic health conditions and already often have to forgo many necessary medical treatments due to the additional already high cost. Several existing benefits such as the so-called vision plan are non-existent as there is a \$100 deductible before the plan pays for a screening which the doctor charges \$100 for anyway and no lenses or glasses are covered. I am eligible to retire from state serve, but needed to work a two more years to maximize the service credits to help cover the retirees premiums, and if this proposed increase goes through, I will not be able to afford or will have to employment after retirement all while suffering from a disability that may not allow me to work.

What does not make sense to me is that with the pool and purchasing power of some 70,000 participants, PEBP has continually failed to find more financially beneficial plans and coverage as some AETNA and Blue Cross Blue Sheild plans appear to offer similar coverage at with significantly lower premiums. Even some Plans on the State's own Health Care Exchange seem to officer better overall rates and premiums. How is this possible? Can those same networks be used to reduce costs to PEBP and reduce or eliminate the necessity for these proposed increased? With the passing of Collective Bargaining for some state workers and subsequently, the ability for the workers to bargain health insurance with the employer, how will this proposed rate effect that process, as bargaining units could potentially opt out of the PEBP plans and remove the bargaining units to alternative insurance plans reducing the states pool and purchasing power?

Respectfully,

Jonathan R. Allen-Ricksecker

Heather Cerniglia

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Cheryl Hunt

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

My name is Patricia Cullinan, and I am a participant in the PEBP, Consumer Driven Health Plan.

I am writing to express my profound concern regarding the projected premium increases. While I recognize that the program is facing a fiscal crisis of an unprecedented scale, the current trajectory is unsustainable for the participants you serve.

A simple "no" to premium increases may not solve the underlying deficit, but an 84% increase—or anything near it—cannot "win the day" either. It would effectively price state employees and retirees out of the very healthcare they rely on.

I am urging the Board to prioritize the following three actions before any final decisions are made:

- **Fulfill the Obligation of Affordability:** The Board has a fiduciary and moral obligation to keep these plans affordable. Before asking participants to shoulder this burden, the Board must demonstrate that every other avenue for cost mitigation, including the strategic use of reserves and legislative appeals, has been exhausted.
- **Demand Reliable Data:** We cannot make life-altering financial decisions based on shifting projections. There is a clear lack of confidence in the current "crisis" numbers. We need a clear, transparent breakdown of how we reached this "fiasco" and why previous projections failed so significantly.
- **Independent Third-Party Audit:** Before any participant is asked to pay a single additional dollar, we require an independent, third-party audit of PEBP's financial health and actuarial assumptions. We need an objective set of eyes to verify these shortfalls and ensure that the proposed "fix" is both necessary and accurate.

You have a responsibility to the participants to ensure that we are not being asked to pay for systemic fiscal mismanagement or poor forecasting. We deserve transparency and verified data before our livelihoods are impacted.

Thank you for your time and for considering the long-term stability of the participants.

Sincerely,

Patricia Cullinan, English Professor
Truckee Meadows Community College

Subject: Concern Regarding Proposed Health Insurance Rate Increases

Dear PEBP Leadership,

As an Administrative Assistant employed by the State of Nevada, I am writing to express serious concern regarding the impact the proposed health insurance premium increases will

have on classified employees.

Administrative Assistants are part of the State's classified pay structure and are compensated

according to legislatively approved grade and step schedules. For example, Administrative Assistant classifications commonly fall within:

- Grade 27 – approximately \$45,000–\$60,000 annually depending on step
- Grade 29 – approximately \$50,000–\$67,000 annually
- Grade 30 – approximately \$53,000–\$71,000 annually

While compensation is structured and predictable, it also means earnings are capped within

assigned grade ranges, and increases are incremental.

In recent years, employees have experienced:

- Increased PERS contribution rates (including a 1.6% increase in 2025)
- Limited cost-of-living adjustments that have not kept pace with inflation
- Rising costs in everyday living expenses

Now, the proposed health insurance premium increases present an additional and substantial

financial burden.

For example:

Family HMO Plan

- Prior 2025: \$651.51/month
- Current: \$801.97/month

- Proposed 2026: \$1,443.55/month (+\$641.58/month)
- Proposed 2027: \$1,868.59/month (+\$1,066.62/month)

Family PPO Plan

- Prior 2025: \$423.54/month
- Current: \$497.68/month
- Proposed 2026: \$895.82/month (+\$398.14/month)
- Proposed 2027: \$1,159.59/month (+\$661.91/month)

To illustrate the real impact:

If an Administrative Assistant earns \$55,000 annually (mid-range Grade 29), their approximate

gross monthly income is \$4,583 before taxes and mandatory deductions.

- A \$641 monthly increase (2026 HMO proposal) equals \$7,692 annually, or roughly 14% of gross annual salary.

- A \$1,066 monthly increase (2027 HMO proposal) equals \$12,799 annually, or approximately 23% of gross annual salary.

For an employee earning \$50,000 annually, the \$12,799 projected annual increase would represent more than 25% of gross pay.

These figures do not account for existing retirement contributions, taxes, or other deductions,

meaning the actual impact on take-home pay would be even more significant.

For classified employees whose compensation is fixed within established grade structures, increases of this magnitude are not sustainable. They directly affect retention, recruitment, and

the overall stability of the state workforce—particularly in rural and hard-to-fill locations.

Administrative professionals provide essential operational support to state agencies, ensuring

compliance, fiscal accountability, and public service delivery. Substantial reductions in net income will inevitably drive experienced employees to seek alternative employment where total

compensation is more competitive and predictable.

I respectfully urge PEBP leadership to reconsider the scope of the proposed increases and explore alternative solutions that protect both the financial stability of state employees and the

long-term sustainability of the workforce.

Respectfully,

Adam Bellwood

Administrative Assistant IV

State of Nevada

Hello PEBP board,

Please review a paystub from a psychiatric caseworker 2 that has been with the state over 5 years. As you can see, my deductions are already near \$1000.00. I am also adding information about the rising costs of living in Reno, NV, so you can fully understand the impact you will have if you choose to increase our insurance. If you think that I am in a position to eat the "loses," for an insurance company after we did not even receive a full cost of living raise, then your board needs an ethics review.

Because it will be so clear that your board works for the insurance companies, and not state employees.

| ASHLEY HOGAN (70215) | | | |
|----------------------------|----------|---------------|------------|
| Agency: | 496 | Organization: | 1281 |
| Pay Period: | C9917 | End Date: | 02/01/26 |
| Begin Date: | 01/19/26 | Check Number: | |
| Issue Date: | 02/13/26 | Net Pay: | \$1,736.53 |
| Deposit in the account of: | | | |
| GROSS PAY | | | |
| Pay Category | | Hours | Amount |
| PRDG | | 80.00 | \$2,700.53 |
| Total Gross | | | \$2,700.53 |
| DEDUCTIONS | | | |
| Deduction Category | | | Amount |
| FIT | | | \$330.07 |
| HTHCP | | | \$109.04 |
| HEDEC | | | \$87.51 |
| PERLE | | | \$520.43 |
| SNEA | | | \$27.04 |
| VDEN | | | \$40.99 |
| Total Deduction | | | \$1067.08 |
| YEAR TO DATE AMOUNTS | | | |

As of February 2026, the average rent in Reno, NV is \$1,462 per month. For comparison, the national average rent price in the US is currently \$1,626/month, which means Reno rent prices are 10% lower than the national average. When you rent an apartment in Reno, you can expect to pay about \$1,135 per month for a studio, \$1,462 for a one-bedroom apartment, and around \$1,793 for a two-bedroom apartment. If you opt for a three-bedroom rental, you could pay \$2,342 or more.

Apartments Houses Townhomes Condos

| Floor Plan Type | Average Rent | Average Sq Ft |
|-----------------|---------------|---------------|
| Studio | \$1,135/month | 410 Sq Ft |
| One Bedroom | \$1,462/month | 686 Sq Ft |
| Two Bedroom | \$1,793/month | 1,000 Sq Ft |
| Three Bedroom | \$2,342/month | 1,315 Sq Ft |



Locations Services Areas Served Blog About

Consumer Expenditure Survey

Another good way to measure the Reno cost of living is to take a look at the **Consumer Expenditure Survey**. This survey is also conducted by the Census Bureau and is used to help calculate the overall CPI. According to the latest report, **the average annual expenditure for a household in Reno is \$89,510 per year**. This is higher than the national average of \$77,280.

Here's how this budget breaks down and how it compares to the national average:

- Housing: \$30,561 (compared to national average of \$25,436)
- Transportation: \$14,881 (compared to national average of \$13,174)
- Food: \$11,374 (compared to national average of \$9,985)
- Healthcare: \$6,436 (compared to national average of \$6,159)
- All other items: \$26,258 (compared to national average of \$22,526)

I urge you not to put my livelihood at stake and vote against increasing our insurance rates.

Ashley Hogan

Premium hike public comment
Claribel Zecena

I understand there are rising costs and that the money has to come from somewhere, yet the answer is always state employees. Other government agencies not only pay more across the board they also cover the cost of medical premiums. The proposed rate hikes are unaffordable for State employees. If you do end up adopting higher premiums please do the ones less impactful to staff. We hope the board can go forward to the legislature with better forecasting to not just throw the burden on state employees. This issue was foreseeable during the legislative process and should have been budgeted accordingly.

Thank you for taking the time to read this!

I am a full time State employee whose salary is just above \$54,000. My actual take home pay is less than \$35,000 per year. Unless one has achieved the perfect set of circumstances, this is not a survivable nor sustainable wage as is. When every cent matters, raising rates is futile for many of your employees and their families.

Surely Nevada isn't failing monetarily so much so that offsetting costs must be placed directly on us?

Is there a plan to increase wages to combat this?

It is hard to accept that of all possible solutions, *this* managed to be the healthiest and best for your people. Please reconsider this abomination of a proposal.

Amy M Zadorozny, M.Ed.

February 24, 2026

To Whom It May Concern,

I am writing as a Nevada state employee of 23 years and a future retiree who is deeply concerned about the proposed PEBP healthcare premium increases. I write today in my personal capacity. These changes would have a devastating impact on my financial stability, both now and in retirement. I am already struggling to keep up with rising costs for housing, utilities, groceries, and other essentials. Any significant increase in my healthcare premiums would push me to a point where I simply cannot afford all of my monthly bills.

For many of us in public service, our benefits are a major reason we remain committed to this work despite modest wages. We have dedicated years of service to the State of Nevada with the understanding that our healthcare coverage would remain accessible and reasonably affordable. The proposed premium hikes break that expectation and place an overwhelming burden on employees who are already stretched thin.

As someone approaching retirement, I am especially alarmed. Retirees live on fixed incomes, and even small increases in premiums can have enormous consequences. If these changes move forward, I will be forced to reconsider whether I can afford to retire at all. The idea that after decades of service I may not be able to maintain basic healthcare coverage is heartbreaking.

I urge PEBP leadership and state decision-makers to reconsider these proposed increases and explore alternatives that do not shift the financial burden onto employees and retirees. Nevada's public workforce deserves stability, transparency, and a benefits system that supports—not jeopardizes—our well-being.

Please take into account the real-life impact these increases will have on people like me. I am not asking for special treatment; I am asking for the ability to continue paying my bills, caring for my health, and planning for a retirement I have worked hard to earn.

Thank you for your time and consideration.

Sincerely,

Amy M Zadorozny, DSAV

My name is Tiffany Rice, and I have been a state employee for over 17 years. The PEBP Board's proposed premium increases represent a drastic and unsustainable shift for employees. Under the current proposal, the Employee + Children tier would rise from approximately \$378 per month to more than \$1,000. Such an increase is simply not feasible for most households, even those with two incomes.

As a single parent, I will no longer be able to afford the EPO plan. Even transitioning to the lower-tier plan would still raise my monthly premium by more than \$100, in addition to higher out-of-pocket costs for copays, prescriptions, and deductibles. These expenses are unmanageable for employees at any pay grade. For many positions—particularly Administrative Assistants—the proposed premium increase alone would consume nearly an entire paycheck.

The magnitude of these increases reflects a significant failure in planning and cost management. Employees are now being asked to absorb the consequences of that failure. Compounding these challenges are rising PERS contributions and the absence of salary adjustments sufficient to address inflation and increasing costs of living. This combination is creating a compensation structure that makes it increasingly difficult for dedicated public employees to afford to remain in state service.

Additionally, during the last Legislative Session, PEBP was placed under the Nevada Health Authority with the explicit promise that this restructuring would lead to more affordable care through the agency's expanded purchasing power, including oversight of Nevada Medicaid and the Health Insurance Exchange. Yet this proposal makes no mention of using that promised leverage to negotiate or reduce costs. The absence of any demonstrated savings from this consolidation is deeply concerning and contrary to what employees were assured.

State employees work hard to ensure all Nevadans receive quality services and support, and like all Nevadans, we are struggling under the growing financial pressures of daily life.

I strongly urge the Board to reconsider these proposed premium increases and pursue alternative solutions that do not place additional burdens on employees. I ask the Board to avoid imposing yet another financial strain by drastically increasing already costly health insurance premiums. This should include evaluating cost-containment strategies, phased adjustments, or funding mechanisms that do not shift disproportionate financial responsibility onto employees.

State employees deserve a benefits system that supports—not undermines—their ability to remain employed and financially secure. A healthy, stable, and supported workforce is essential to keeping our state strong.

To whom it may concern,

I am writing to express my concern of the proposed premium hike on insurance for employees at UNLV. My husband obtained a spinal cord injury in 2020. He is now disabled and cannot work leaving me to be the only one working in our household. I am our only source of income. If the proposed hike of 84% happens, this will be a hardship on our family. Please consider other options.

Thank you,

Kathie Caroon

Dear Members of the PEBP Board,

I am writing as a follow up to my previous message regarding the proposed increases to PEBP premiums and out of pocket costs. Since sharing my concerns, I have heard from many faculty and staff members who share a deep frustration with the direction these changes are taking.

There is significant dissatisfaction among employees across our campus and throughout the Nevada System of Higher Education. Many government employees, particularly those in earlier stages of their careers or in lower paid roles, are already stretching their budgets to manage housing, childcare, and other basic expenses. The assumption that these increases primarily affect higher earning employees does not reflect the reality many of us are living in.

A large number of the employees most affected are those who are newer in their careers and planning to start or grow their families. Many earn well under \$100,000 per year and are supporting one or two children. For these households, an increase of this scale is not an inconvenience. It is a serious financial strain that will force difficult decisions about healthcare and family stability.

Because of this, I want to reiterate several requests that reflect the concerns many of us share:

PEBP should not raise premiums by 84 percent next year. Instead, longer term solutions should be implemented that spread increases over several plan years in order to limit the unacceptable financial impact on members. State contributions to PEBP must increase so that the traditional cost sharing balance between the State of Nevada and its employees is restored.

There should be no further cuts to benefits. For FY2027, benefits should not be reduced beyond the deductible and out of pocket increases that have already been approved. Those changes alone will result in approximately \$5 million in additional out of pocket costs for participants in the coming year.

The higher out of pocket maximums scheduled for 2027, increasing by \$1,000 for individuals and \$2,000 for families under both plan options, represent an unfair burden. Faculty and staff who live with chronic conditions or face unexpected medical situations will be hit the hardest. Lower income state employees are the least equipped to absorb these costs.

Public employees dedicate their careers to serving the people of Nevada. In return, they deserve healthcare coverage that is stable and reasonably affordable. I strongly encourage the Board to reconsider the pace and scale of these changes and to work with employee groups and state leadership to find a more balanced path forward.

Thank you for your time and consideration.

Sincerely,
Nicole Bayreder



Joe Lombardo
Governor

NEVADA HEALTH AUTHORITY

DIRECTOR'S OFFICE

4070 Silver Sage Drive
Carson City, NV 89701
NVHA.NV.GOV



Stacie Weeks
Director

Theresa Carsten
Executive Officer, PEBP

For Immediate Release
February 24, 2026
Chloe Chism
Public Information Officer
[REDACTED]

Nevada PEBP Board considers plan options; focuses on balancing the need for sustainability with affordability amid rising health care costs

Carson City, NV - The state's Public Employees Benefits Program (PEBP) board met today to discuss plan adjustments for the upcoming plan year, which included options for adjustments to monthly premiums, deductibles, and out-of-pocket maximums for many state employees and retirees. These changes come at a time when PEBP is experiencing projected fiscal challenges and rising healthcare expenses in the program.

"We understand that any increase in premiums is difficult for our members, and we hear the concerns voiced by employees and retirees regarding affordability," said Theresa Carsten, Executive Officer, PEBP. "Some adjustments are necessary however to secure the financial health of the program. We have worked with the board to structure options for these decisions in March in a way that minimizes impact on PEBP members, while keeping the plan solvent for everyone."

"Unfortunately, the health care costs affecting PEBP are not unique; we are seeing similar, unprecedented increases in inflationary costs across all health care markets right now," said Stacie Weeks, Director of the Nevada Health Authority. "This is why we are exploring new ways of purchasing and providing coverage at the state level with national experts, including better options for our state employees and retirees. The findings will be available this summer for the board's consideration for future plan years."

In March, the board will make final decisions about necessary adjustments for the upcoming plan year. Open enrollment for this new plan year is scheduled to begin on May 1. Detailed

information regarding new plan options and premiums will be provided to all eligible employees and retirees after the March meeting.

If you wish to provide public comment for the upcoming changes for the March meeting, please submit them via the following [link](#).

About Public Employees' Benefits Program

The Public Employees' Benefits Program (PEBP) is a division of the Nevada Health Authority and oversees the state's health plan coverage for state employees and retirees. PEBP is dedicated to transparency and providing affordable, reliable access to health care for its members while ensuring fiscal sustainability and solvency.

About the Nevada Health Authority

The Nevada Health Authority leads statewide efforts to improve health outcomes for all Nevadans through policy, innovation, and strategic partnerships. NVHA works closely with Nevada Medicaid, the Silver State Health Insurance Exchange, the Public Employee Benefits Program, and other state and local agencies to expand access to care, strengthen the health care workforce, and improve service delivery across communities.

###

Members of the PEBP Board,

My name is Isaiah Sincere Dominguez and I am a state employee. I am writing to voice my concern with the proposed increases to member premiums and cuts to coverage for plan participants for the upcoming plan year.

As a state employee, I am concerned that the changes to the upcoming plan will cause significant disruption and distress to me during my healthcare journey. For example, I have [REDACTED] [REDACTED] conditions that require specialist care. I am not alone, my whole family has conditions and needs, and we rely on our Plans that we earn through our public service.

State employees and retirees cannot bear the financial burden caused by rising healthcare costs, years of underfunding, and failure on the part of Nevada Legislature and PEBP board to adequately anticipate program costs and identify sufficient revenue to fund our program.

I recommend that the PEBP board keep premiums and coverage stable for Plan Year 2027 by seeking immediate fiscal relief from the Interim Finance Committee of the Nevada Legislature to meet funding shortfalls until ongoing program revenue can be addressed more appropriately during the 2027 Legislative Session.

Thank you for the opportunity to comment.

Sincerely,
Isaiah Sincere Dominguez

Members of the PEBP Board,

My name is Veronika Salazar and I am a state employee. I am writing to voice my concern with the proposed increases to member premiums and cuts to coverage for plan participants for the upcoming plan year.

As a state employee, I am concerned that the changes to the upcoming plan will cause significant disruption and distress to me during my healthcare journey. For example, I have [REDACTED] conditions that require specialist care. I am not alone, my whole family has conditions and needs, and we rely on our Plans that we earn through our public service.

State employees and retirees cannot bear the financial burden caused by rising healthcare costs, years of underfunding, and failure on the part of Nevada Legislature and PEBP board to adequately anticipate program costs and identify sufficient revenue to fund our program.

I recommend that the PEBP board keep premiums and coverage stable for Plan Year 2027 by seeking immediate fiscal relief from the Interim Finance Committee of the Nevada Legislature to meet funding shortfalls until ongoing program revenue can be addressed more appropriately during the 2027 Legislative Session.

Thank you for the opportunity to comment.

Sincerely,
Veronika Salazar

Rachel Delovio

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

To whom it may concern:

2/25/26

“With the cost of living continuing to rise, not receiving a raise or even having a 1% raise makes it increasingly difficult to keep up with basic expenses. The recent increase in medical costs will add additional financial strain at a time when many of us are already struggling. I hope our union can help and consider how these combined increases are impacting employees.”

Thank you,

Loretta Kempski

PUBLIC OPINION STATEMENT- ASHLEY MANN

This opinion is offered in my personal capacity, not as an official statement.

As a civil service employee, my salary is modest. I provide health insurance for myself and my four children, and the financial pressure has already been significant. Last year's premium increase, combined with a 2% increase in PERS contributions and only a 1% salary raise, created a real strain on my household budget. Increased payroll deductions are rapidly outpacing any salary increases we receive, effectively resulting in a pay cut while real-world costs continue to rise.

Another increase in insurance premiums would place my family in an even more difficult position, making it challenging to manage rising food and housing costs. I understand that the state is facing rising expenses as well; however, we must find room in the budget that does not come at the expense of state workers' paychecks. State employees dedicate themselves to serving the public, and we should not be placed in a position where we are struggling simply to make ends meet. Further premium increases would only deepen that hardship.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

Rachael Devine – State of Nevada, Division of Nevada Medicaid

Public Comment – In Opposition to Proposed PEBP Rate Increases

I am writing to respectfully, but enthusiastically oppose the proposed increases to monthly premiums, deductibles, and out-of-pocket maximums currently under consideration by the Public Employees' Benefits Program (PEBP).

While I understand that rising healthcare costs are creating financial challenges for the program, these proposed increases will place a significant and immediate burden on state employees and retirees who are already struggling with inflation and rising living expenses and employee wages that do not match the private sector for the work we do. For many of us, there is no room left in our budgets to absorb higher insurance costs.

An increase in premiums is not just an inconvenience, it directly affects our ability to pay for housing, groceries, utilities, and other essentials. Increasing deductibles and out-of-pocket maximums further compounds the problem by shifting more financial risk onto employees and retirees when they actually need care. This could discourage people from seeking necessary medical treatment, ultimately leading to worse health outcomes and higher long-term costs.

State employees and retirees have dedicated years of service to Nevada, enduring furloughs, low wages and the constant whiplash of each office making changes to meet their agendas. We endure and we serve Nevada because we love what we do. This feels like a punishment for our dedicated service. Affordable health coverage is a critical part of our compensation and retirement security. Balancing sustainability should not come at the expense of making coverage unaffordable for the very people the program is designed to serve.

I respectfully ask the Board to consider alternative cost-containment strategies that do not disproportionately impact members. Phased adjustments over 5 or 10 years will meet the budget requirement without strangling the workforce that these benefits are supposed to be supporting.

State employees in many departments and divisions successfully held this ship afloat during the COVID pandemic and entire office suites and buildings were left empty. How much does the state spend on lease agreements and all the other costs associated with keeping employees in the office?

Please prioritize affordability alongside solvency. Thank you for your consideration.

Greetings,

I do not think it is fair to members such as myself who rarely use health insurance as a result of making good life and health decisions. There was a time when we were able to show due diligence in taking care of our health through a series of steps and we're financially rewarded for doing so. It is too bad that system has gone away because it is not fair that members such as myself have to pay more money for folks who do not make good choices and or take good care of themselves. I know this statement sounds cold to some as I understand there are people who do not have a choice and have medical situations that are of no fault of their own. However, I am certain these people are in the minority and that the majority of people taxing our healthcare system are the ones I described prior to this sentence. Anyways, that's all I have to say other than this whole thing reeks of administrators making bad and possibly crooked decisions. The Governor needs to figure this out before he leaves. I understand he's not trying to get reelected so he probably really doesn't care about procurement of current State employees, recruitment of future State employees, and or those of us who devoted our lives working for the State and are now living a well earned retirement.

Good day, Paul Calonico

PEBP Administrators,

I am writing to second the opinions and concerns of the UNLV Faculty Senate in regards to UNLV Faculty and Staff premium increases. Las Vegas is becoming exceptionally expensive in all venues of life. Public schools are poor and many academics are prioritizing private education. PEBP should be looking for ways to make healthcare more affordable for Las Vegas families if the state of Nevada wants families to stay in the state of Nevada. If my children's education and my family's healthcare expenses continue to climb the allure of the strong UNLV retirement package will become meaningless. Like many families, we will consider leaving the state for stronger public education and healthcare systems.

Thank you for your consideration,
Jessica Immonen Ph.D., M.S.
Associate Professor in Residence

Rory Dowd

Greetings,

My name is Rory Dowd, an employee for the State of Nevada speaking as a private citizen. I am writing to you today to request a more moderate increase to our health insurance premium than the ones currently proposed.

While inflationary adjustments to rates are generally expected and unavoidable, the proposed adjustments for the coming 2026 year are staggeringly steep. Adjustments in the past have been small, but the proposed hike represents a near doubling of my expenses for myself and my children, not to mention the separate hike for the plan my spouse has herself as a NV employee as well. In the past it has been something closer to 10-20% rather than 80-100% increases, which is what we are all seeing currently.

Given that the insurance is a plan for State of NV employees and State of NV employees have not seen a commensurate increase in income, it seems at odds that the rates should rise so dramatically. This creates a financial burden that will exceed my monthly budget, which is already modest and tight with a family of four. This burden could potentially cause me to need to find other employment, as a supplement or as a replacement; this is a real fear.

I have spent a good deal of the last year cutting expenses, paying down debt and creating room in our household budget to create meager savings. Not only will this rate hike negate all that diligence, but it will exceed what I have carved out of the budget.

On behalf of my family and the other families and individuals that are members, I ask that you reconsider these rate increases and consider a more modest increase for the coming year.

Thank you for your time,

Rory Dowd

My name is Krista Wesley and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

My name is Spencer Loper, I am commenting as a PEBP member, not on behalf of NDOT where I work.

It is absolutely shameful that what was once a draw for employment with the State of Nevada is now one of its weakest attributes. Not only are employees making far less than even local public agency employees at the County or City level, but we have to endure the continued use of insurance that is becoming nigh worthless.

Healthcare providers across Northern Nevada are blacklisting our coverage due to the unreliability of the insurance, which already has limited options. Nationally, this insurance is known to be garbage – I have friends in healthcare services in other states who can attest to this fact just from the name alone. The parent company, United Healthcare, has been in the news time and time again with countless black marks on their record. They have even been known to have been hacked by foreign states in the past.

State employees can barely make ends meet as is. Our “raises” are not even cost of living adjustments because they cannot keep up with the out-of-control inflation all Americans are experiencing. And then to top it off, whatever increase occurs is lost and then some when the PEBP Board raises the rates on insurance that is nearing uselessness.

As a state employee, this is a slap in the face. We are told to be understanding and accept compromise after compromise, yet we are continually neglected by administration after administration, only seeing increases in wages as a political ploy for election season. And now the board is asking for understanding as rates go up, robbing employees of what little they have left in an economy falling around our ears to pay for health insurance that soon will be accepted nowhere.

Something has to change. We cannot endure any more of this behavior. If this continues, the vacancy crisis in state service will only deepen. Valuable talent will depart for other careers out of self-preservation and state employment will be seen as one of the least desirable career fields, taken only by those who cannot make it anywhere else. It will attract only the least talented with the worst motivation and Nevada will suffer for it.

If this means turning away UMR and seeking other providers, then do so. They have violated the trust of the state, and their incompetence continues to not uphold their end of this deal – if they cannot provide reliable insurance for employees to seek medical care, then they are not worth keeping around.

Something must change and it must change now. Find a new way forward.

Thank you.

I have been a Nevada State employee for just over three years. During that time, we received a nice COLA raise due to the hard work of AFSCME fighting to bring us better wages that reflect the current inflation burden. Unfortunately, since then that COLA raise has been eroded by an increase in our PERS contribution and now the threat of an increase in health insurance costs (that are already substantial as they are) would just further erode the COLA gains we received. As we received ZERO COLA raise for fiscal year 25-26 I implore you to consider not making an increase at this time as it would only create further hardship with the already modest salary that many of us currently earn.

Sincerely,

Brian Rae

Nevada State Employee

3:32

,1 5G L),

<

c!J ...

I am a single mom and I am barely making it as is. If you increase my insurance it will affect how I pay daycare so I can work and food I won't be able to buy for my 3 daughters

PEBP Comment

Good Afternoon,

I believe that we are already paying enough for health insurance. I am covering my family and I am already getting taken out \$300-\$400 a month for health insurance. You guys are raising the amount per month, but we don't seem to be getting paid anymore and I think that also needs to be taken into consideration.

Please, speaking for most of our employees, Do Not Raise Out Health Insurance Cost. If you guys would like to help us out, then maybe consider lowering the cost. More employees would benefit from that!

Thank you!

My name is Valerie Anne Zaragoza and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

I work for the state of Nevada and will be greatly impacted by any PEBP increases especially out of pocket expenses and premium rate increases. These increases will directly impact our paychecks and livelihoods forcing several of us to seek employment elsewhere. I already fear and avoid seeking medical care at our current rates due to costs. An increase will not only make it harder for me to pay my bills but will also prevent me from seeking care I need. Please show your state workers you care about our health and livelihoods and prioritize lowering costs, including premium rates and out of pocket costs.

My name is Robin Stanley, and I am proud to serve as a Nevada State employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out-of-pocket costs.

My name is David Tagupa and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

My name is Tracy Baker, and I am proud to serve as a Nevada state employee. I have worked for the state since 2014 as an LPN II, caring for and helping protect the health and safety of our communities.

However, the proposed health care increase is simply not affordable for many of us who have dedicated years of service. Like other Nevadans, we are already facing higher costs for groceries, housing, and everyday living. An increase this large in premiums and out-of-pocket expenses would put real financial strain on state employees and our families. I respectfully ask the board to reconsider this increase and prioritize solutions that lower premium rates and out-of-pocket costs so long-time employees like me can continue serving Nevada without risking our financial security.

My name is John Karr, and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out-of-pocket costs.

State of Nevada employees voluntarily choose to participate in either of the two plans mentioned above. Under the Employer Paid Contribution (EPC) plan, the employer pays the total PERS contribution on your behalf. The EPC contribution rate for regular members is 28.00% of gross salary, and the rate for police/fire members is 40.50% of gross salary. Under the Employee/Employer Paid contribution plan, the employee and the employer share equally in the contribution to PERS, which is currently 14.50% of gross salary each for regular members. The contribution rate for Police/fire members is 20.75% of gross salary. By increasing healthcare costs and premiums for those who serve the state of Nevada blatantly disregards their efforts to not only provide care for themselves, but also their families and Nevada families.

The mission of this committee states: "Provide employees, retirees, and their families with access to high quality benefits at affordable prices," but clearly that is not the case here. While everything around us increases in price, no relief has been sought to correct the situation brought on by this committee and its representatives. "PEBP will be a member focused, nationally recognized, affordable program of employer sponsored benefits serving employees, retirees, their families and the Nevada taxpayer," has clearly been lost in the overall scheme of providing for those who serve the state of Nevada.

I implore this committee to act accordingly and look out for those that serve this great state. We cannot allow healthcare premiums and out-of-pocket costs to rise when they are already high enough, yet do not cover fundamental costs accordingly. By allowing these premiums to increase it does not look out for the people, staff, or the Nevada taxpayer. It only looks out for insurance companies and those who collect a check and do not provide a service to this state. Please remember your mission of your position, "Provide employees, retirees, and their families with access to high quality benefits at affordable prices."

I am writing to express concern regarding any proposed increase to premiums, deductibles, or out-of-pocket costs under the Public Employees' Benefits Program.

State employees have continued to serve Nevada's communities through periods of economic uncertainty, inflation, and staffing shortages. Many workers are already facing rising costs for housing, food, fuel, and other essential expenses. Increasing health benefit costs at this time would place an additional financial burden on employees and their families, potentially reducing take-home pay and overall financial stability.

Affordable and stable health benefits are a critical component of public service compensation. Competitive benefits help the State recruit and retain qualified professionals in education, public safety, healthcare, and administrative services. Cost increases risk discouraging retention and recruitment, ultimately affecting the quality and continuity of services provided to Nevada residents.

Before implementing any increases, I respectfully urge decision-makers to fully evaluate alternative cost-containment strategies, administrative efficiencies, or reserve allocations that could minimize the financial impact on employees.

Protecting affordable access to healthcare coverage is not only a matter of fiscal policy, but also one of fairness and workforce sustainability. I strongly encourage maintaining current benefit costs and prioritizing solutions that do not shift additional financial strain onto state employees.

Thank you for your consideration.

Heather Blonsky
Vocational Rehabilitation

My name is Heather Blonsky, and I am a single parent and a proud Nevada state employee. I chose public service because I believe in giving back and helping our community the best version of themselves they can be. But today, I am speaking not just as an employee, but as a parent who is struggling to make ends meet. Like so many Nevadans, I am being crushed by rising costs, and health care expenses are one of the biggest burdens I face. Every increase in premiums or out-of-pocket costs forces impossible choices—between medical care and groceries, between prescriptions and rent. This is not sustainable, and it is not fair to the people who dedicate their careers to serving this state. I can no longer stay silent. I am asking this board to put people first and make lowering health care costs—especially premiums and out-of-pocket expenses—a true priority for state employees and our families.

My name is (Adriana Alvarez and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

To peep

Regarding: the planned health insurance increases

My name is Maria Garcia and I have worked for DSS for the last 23 years. I love my job and I have plans to retire from state service. I want to talk to you today about the plans to raise our health insurance premiums. I currently have HMO for myself and my children and I pay about 400.00 a month already. Which is already hard for a single mom. But I Love my job and we need the health care. If your new planned rates are implemented I could no longer afford the states health insurance, I could no longer afford to work for the State of Nevada. I would be forced to either go with out healthcare for myself or my children, less coverage, or to quit my job. If your planned rate increases go into effect I could no longer afford to eat or pay my home and bills in order to have some sort of healthcare. Please don't do this to my family and so many other State workers.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

My name is Erich Drakeley, and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out-of-pocket costs. I hope your rates went up at the same time as ours. Also Why isn't this this being approve by the workers of Nevada? Why don't you ask them?

Being a single mom on a single income I can't afford another increase. There was one this past summer. All my co pays have gone up and it's going to be to the point I will have insurance but won't be able to afford 30 each dr visit... or 80 for urgent care and over 1000 for the er. This is getting a little out of hand.

My name is Anjelica Blanco Rodriguez, and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

If an increase in rates is unavoidable, it is imperative that we receive the best possible coverage to justify the costs involved with a reputable agency our community healthcare system respects. I urge PEBC to adopt a more innovative and forward-looking strategy. Exploring options to increase funding allocated to pretax accounts for medical expenses could be advantageous. Additionally, the state might consider providing discounts to employees who can prove they have private doctor coverage alongside their existing insurance, which could potentially lead to a reduction in overall costs. I commend the state's new strategy for assessing financial implications and available resources, as well as its commitment to understanding the impacts of these decisions. Laura Rich's proposal to shorten the election period for state employees to 15 days is a constructive step, allowing the state more time to finalize and address plan changes.

Additionally, if rate increases are necessary, it is crucial to consider partnering with a reputable insurance company that can effectively manage the needs of state employees without complications. Based on my experience managing chronic illness, I have encountered various challenges, including insurance denials and delayed payments, which have impeded timely access to appropriate care. A couple of years ago I switched to a private doctor which prevents me from experiencing fluctuations in my quality of care costing me around \$2,100 each year. This choice helps me avoid the stress and complications that come with insurance, even though I still pay for full coverage insurance with PEBC. By opting for this arrangement, I can focus on my health without the added burden of dealing with insurance issues that bill me for cents and send me to collection for bills around \$10.00 when I don't get around to working 20 hours a week to keep up with the billing of out of pockets.

I also want to mention my experience with PEBC when Hometown Health was the insurance agency. The service provided was excellent, reflecting a strong dedication to customer support and comprehensive coverage. If rates are to increase it is essential the agency meet these standards. With UMR I incur \$5,000 to \$6,000 annual out-of-pocket expenses under the EPO Plan for a family of five and find it frustrating to receive bills for trivial amounts, such as .10 cents, .40 cents, or even 3.0 dollars. Managing a chronic condition often requires extensive time spent negotiating with insurance companies and resolving billing issues.

Lori Taylor 02/26/2026

My name is Sarah Ketner and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

My name is Aaron Linebarger and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs. For supervisors like myself we already didn't get the 2% raise like AFSCME members and all the other perks so this would be a big hit for us. As well as the already skyrocketing prices on everything it would be a big financial loss. With our already big deductible and out of pocket cost when we go to the Dr it just don't seem feasible.

My name is Joe Laframboise and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities functioning, healthy and safe. However, we are facing the same economic difficulties that all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out-of-pocket costs. Thank you for your attention to this matter,

To whom it may concern,

My name is Violeta Nunez- Calderon and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

Not only have insurance rates already gone up, but the coverage has gone down. I'm paying more out of pocket health costs than ever before. I no longer receive HRA reimbursement which has prevented me from getting the medical care I need due to being unable to afford the rising cost of healthcare. My children take priority over myself when it comes to medical care and that shouldn't be something to have to even consider. I'm drowning in medical repayment plans and raising the cost will do nothing but continue to dig this financial hole bigger.

I hope you hear this message and see that we are doing everything we can to continue to provide for our families.

Thank you.

9:00

5G UC 93

< Title



My name is Vanesa Garcia-Ruiz and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

Jimmy Chang

I'm a Nevada state employee with UNLV, and I depend on the health care provided through my employment to care for myself and my family. I'm the only person working in my family, so my budget is already tight. Increased health care costs would cause irreparable harm to myself, my colleagues, and everyone else under the purview of Nevada state employment.

LORA ROBB

Hello PEBP Board,

I am a current State of Nevada employee with 6.5 years of service. I watched the public Board meeting on Feb. 24 and was surprised to learn about missing and erroneous data as well as long-time subsidization of more expensive plans. Inflation and cost of living in Northern Nevada are driving my husband and I to consider relocating. The reality is state worker compensation is barely adequate to cover costs and the recent increase in PERS contributions and no COLA eroded my current and future earnings. Like many, I cannot afford to foot more of the bill for the benefits the state "provides" me. I am a participant of the CHDP and want to see a return to the previous out-of-pocket maximums for this plan. I urge the Board to prioritize lowering costs and removing subsidization. Thank you for your service on the Board. It cannot be easy to deal with this fiscal crisis that was clearly along time in the making.

Lora R. Robb



My name is Bryan Norris A 53 year Nevada resident and I am proud to serve as a Nevada state employee for over a decade because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties ALL Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs. We can not afford the premiums and copays for our children with the projected increase in cost. Please Help us

My name is Adam Bellwood and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs. The

My name is Melissa Snoble and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

2/27/2027

Lawanna Davis Woodson

North Las Vegas NV 89084

My name is Lawanna Davis Woodson, and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs including premium rates and out-of-pocket costs.

Thanks,

Sincerely,

Public Comment – Alison Lanctot

Dear PEBP Board Members,

I am writing to express my strong opposition to the proposed increase in health insurance premiums for Nevada state employees. This change would impose a severe financial burden on employees who are already struggling to keep up with rising costs.

For many employees, this increase would result in thousands of dollars in additional annual expenses. Such a drastic increase is not sustainable for employees who are already living on tight budgets.

Nevada state employees have already absorbed pay reductions through increased PERS contributions, and we have not received a cost-of-living adjustment (COLA) for the current biennium. Adding such a significant increase in health insurance premiums would exacerbate these challenges and could force employees to make difficult decisions about healthcare, housing, necessities, or even leaving state employment for the private sector.

While phased approaches have been suggested as an alternative, they are not effective solutions. With no planned COLA in the near future, employees will continue to face stagnant wages while costs rise. Even a gradual increase would still result in significant hardship without corresponding salary adjustments.

I urge you to reconsider this proposal and explore alternatives that do not disproportionately impact employees who are committed to serving the State of Nevada. Affordable healthcare is essential for maintaining a healthy and productive workforce.

Thank you for your time and consideration.

Sincerely,
Alison Lanctot
Nevada State Employee

All you do is rate increases.

Have you ever thought for one minute about what happens to the staff at the lower end of the pay scale.

It appears all you care about is YOU BOTTOM END. Not the employee who do the work. We struggle with bills and now you want us to pay more. You're supposed to be fighting for us to improve our lives as well as yours, not just your lives. We matter too.

As state employees, we work to ensure all Nevadans receive high quality care and support. Like all Nevadans, state employees are struggling under the weight of increasing costs for daily life. I ask the board to prevent yet another burden on us by increasing our already costly health insurance plans. We deserve a healthy and stable workforce to keep our state strong.

My name is Guadalupe Aguirre, and I am proud to serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out-of-pocket costs. Personally, I must cover many of my medical expenses as I'm wheelchair user. Due to my medical condition, increasing care costs would make it harder for me to maintain my therapies and cover any other medical expenses I must cover.

3/02/26

To Whom it May Concern:

I am writing this letter because the rising cost of healthcare premiums has reached a point that is no longer sustainable for many of us. Each year, we're asked to shoulder higher and higher costs for the same essential coverage. This year's increases are especially difficult because they come at a time when inflation continues to drive up the price of nearly everything—housing, groceries, utilities, transportation. Families are already stretched thin, and these premium hikes only deepen that strain.

What makes this situation even more challenging is that state employees did **not** receive a Cost-of-Living Adjustment. While the cost of living has risen sharply, our pay has not kept pace. We are being asked to absorb higher healthcare costs with wages that have effectively lost value. This is not a sustainable or fair expectation.

State employees show up every day to keep our communities functioning—supporting public safety, education, transportation, health services, and so much more. We are proud to serve. But we also need to be able to afford basic necessities, including healthcare for ourselves and our families.

I urge our leaders and decision-makers to recognize the real impact these premium increases have on working people. We need solutions that protect employees from being priced out of essential care. We need a compensation structure that reflects economic reality. And we need a commitment to ensuring that public servants are not left behind as costs continue to rise.

Thank you for your time and for listening to the concerns of the people who keep this state running every day.

Regards,
Jennifer Miller-Baxter



My name is Lea Jacobsen-Guy and I serve as a Nevada state employee because I know the work I do keeps our communities healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premium rates and out of pocket costs.

My name is Cedar Robinson, and I work as a Nevada state employee. I care about the work I do for our community, but I'm very concerned about the possibility of higher health insurance costs. Like many others, I am already dealing with rising expenses, and an increase in premiums or out-of-pocket costs would make it harder for myself and my family to manage.

I'm asking the board to look for ways to keep health insurance affordable for state employees. Access to reasonable health care costs is important for our wellbeing and for keeping experienced employees in public service. Please consider the impact these increases would have on workers like me.

March 3, 2026

Marissa Primo-Sanchez

To whom it may concern:

I am writing this later to make a complaint about the increase in the insurance that we have. I do not think it is fair because we do not have an increase in salary, or because we are state employees, we are supposed to get paid well, but we are not. If we have an increase in insurance, I am going to need to find another job to be able to cover my necessities. If we have a better salaries, I would not be writing this letter to you. Please consider this letter for your files.

Sincerely

Marissa Primo Sanchez

March 3,2026

My name is Mariss Primo Sanchez and I am proud to serve as a Nevada state employee because I know the work I do keeps our community healthy and safe. However, we are facing the same economic difficulties all Nevadans face, and we can no longer stay silent as our health care costs skyrocket. The board must prioritize lowering costs, including premiums rates and out of pocket costs.

Thank you for your attention

Adjoa Mensah, PhD
Las Vegas, ON
89119

Dear PEBP Board Members,

I am writing as a UNLV employee to express serious concern about the proposed increases to Public Employees' Benefits Program (PEBP) health insurance costs.

Based on the materials recently shared with employees, the proposed changes would significantly increase financial burdens on state employees. Reports indicate that premiums could increase dramatically, while out-of-pocket maximums are also scheduled to rise by \$1,000 for individuals and \$2,000 for families beginning in FY2027. For many public employees, these increases are simply not sustainable.

State employees already face rising housing, transportation, and living costs. A sharp increase in health insurance premiums, combined with higher deductibles and out-of-pocket limits, places an unacceptable financial strain on faculty, staff, and other public servants who rely on PEBP for essential healthcare coverage.

I respectfully urge the Board to consider alternatives that would reduce the immediate financial impact on employees. Specifically:

- Avoid implementing a large single-year premium increase. Instead, consider spreading necessary adjustments over several plan years to reduce the sudden financial burden on employees.
- Restore a more balanced cost-sharing model between the State of Nevada and employees, ensuring that public employees are not disproportionately absorbing rising healthcare costs.
- Avoid additional benefit reductions, as employees are already absorbing higher deductibles and out-of-pocket expenses approved for the upcoming plan year.

These proposed changes disproportionately impact employees with chronic health conditions, those facing acute medical needs, and lower-income public workers who are least able to absorb significant cost increases.

Public employees serve Nevada's communities every day. Access to affordable healthcare is a critical component of maintaining a stable and effective workforce. I respectfully ask the Board to reconsider the scale and timing of these proposed increases and pursue solutions that protect both the fiscal sustainability of PEBP and the well-being of the employees it serves.

Thank you for your time and consideration.

Sincerely,

Adjoa Mensah, PhD

Employee, University of Nevada, Las Vegas

Eric Steinmetz
Auditor II
Department of Taxation
March 6, 2026

To the PEBP Board,

I am writing to express my concern regarding the proposed health insurance premium increases for the upcoming fiscal year. I respectfully ask the Board to reconsider these increases, as they will create additional hardship for state employees who are already under significant financial pressure.

State employee morale is extremely low. The cost of living in Nevada has risen sharply in recent years while state salaries have not kept pace. Rising housing, utility, and grocery costs have created a situation where many state employees are struggling simply to maintain basic living standards.

Healthcare prices—both nationally and within Nevada—continue to climb at a pace far beyond general inflation. Nationally, health spending rose 10.5% from 2019 to 2020, 7.4% from 2022 to 2023, and another 7.2% from 2023 to 2024. Nevada’s healthcare cost trends mirror this escalation. According to the Nevada Department of Health and Human Services (DHHS) Office of Analytics, **Nevada per-capita healthcare expenditures have outpaced national inflation for multiple consecutive years** (Nevada DHHS, “Nevada Health Care Cost Growth Benchmark Annual Report,” 2022). The same report identifies hospital inpatient and outpatient prices as a primary driver of these increases, with **Nevada hospital prices rising an estimated 7–10% annually** depending on the service category.

Additionally, according to the **PEBP Plan Year Trend Analysis Report** presented to the Legislative Committee on Health Care (2023), PEBP medical claims costs increased by **approximately 9% annually**, driven by rising utilization, specialty pharmacy costs, and Nevada provider pricing trends.

These documented increases highlight the significant financial burden already placed on Nevada state employees. Asking employees to absorb even more through higher premiums is untenable.

Many state employees already rely on second jobs to make ends meet. Work-life balance—which is essential for both mental health and workplace productivity—is deteriorating, and additional premium increases will worsen this gap.

State service was once viewed as a respected, stable career with compensation that helped offset private-sector disadvantages. Unfortunately, stagnant wages combined with

rising costs have eroded that reputation, making state employment increasingly similar to private-sector roles but without competitive compensation.

I also want to note that at the most recent PEBP Board meeting, the analyst presenting the financial projections appeared uncertain about several of the data points shared. This lack of clarity does not inspire confidence in the justification for the proposed premium increases.

I had also been considering switching from the PPO to the HMO plan to help manage my healthcare expenses. If premiums increase, the HMO will no longer be affordable, and I will be forced to remain on the PPO despite its higher out-of-pocket costs.

For these reasons, I respectfully urge the Board to avoid increasing health insurance premiums for the upcoming fiscal year. Doing so would demonstrate meaningful support for Nevada's dedicated state workforce during a time of significant financial strain.

Thank you for your time and consideration.

Sincerely,

Eric Steinmetz

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the start

Public Comment to the PEBP Board

Dear PEBP Board Members,

I am writing as a State of Nevada employee to express serious concern regarding the proposed increases to health insurance premiums. The current proposal would raise the monthly cost of family coverage under an HMO plan from approximately \$800 per month to nearly \$1,800 per month for essentially the same coverage. This represents more than a 100 percent increase and more than doubles what many state employees are currently paying.

For working families, especially those supported by a single household income with children, this level of increase is simply not sustainable. State employees are already facing rising costs for housing, food, childcare, transportation, and everyday necessities. An additional \$1,000 per month in health insurance premiums would place an overwhelming financial burden on many of us.

At nearly \$2,000 per month, employees may be forced into impossible decisions between maintaining health coverage and meeting basic household needs such as groceries, rent, and utilities. No public servant should have to choose between feeding their family and providing health insurance for their children.

State employees dedicate their careers to serving Nevada and supporting our communities. A stable and effective workforce depends on accessible and affordable healthcare benefits. Passing significant cost increases directly onto employees risks harming morale, retention, recruitment, and overall workforce stability.

I respectfully ask the Board to reject these proposed increases and instead work collaboratively with stakeholders to identify alternative solutions that do not disproportionately shift the financial burden onto state workers. Please explore strategies that improve cost efficiency, strengthen plan competitiveness, and protect affordable access to healthcare coverage.

State employees want to remain committed to public service, but healthcare costs at this level are not financially realistic for many families. I urge the Board to consider the real human and economic impact these increases will have and to prioritize solutions that support, rather than strain, Nevada's public workforce.

Thank you for your time and consideration.

Respectfully,

Edward Lopez

State of Nevada Employee

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the start

Sara Kharrat

3/8/2026

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

Please do not raise the PEBP premiums or deductibles. State employees already contribute about 19% to PERS, and increasing health costs on top of that is unreasonable. We need stability in our benefits to keep a functional workforce.

Matthew Hoffman

As public workers in the Department of Education, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone. We are also now faced with leaving public service in order to make ends meet.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

Public Comment Regarding PY2027 Premiums Proposal-

Dear PEBP Board Members,

I am writing to express my strong opposition to the proposed increase in health insurance premiums for Nevada State employees. This change would impose a severe financial burden on employees who are already struggling to keep up with rising costs.

For many employees, this increase would result in thousands of dollars in additional annual expenses. Such a drastic increase is not sustainable for employees who are already living on tight budgets.

Nevada state employees have already absorbed pay reductions through increased PERS contributions, and 1% cost-of-living adjustment (COLA) for the current biennium. Adding such a significant increase in health insurance premiums would exacerbate these challenges and could force employees to make difficult decisions about healthcare, housing, necessities, or even leaving state employment for the private sector.

While phased approaches have been suggested as an alternative, they are not effective solutions. With low or no planned COLA in the near future, employees will continue to face stagnant wages while costs rise. Even a gradual increase would still result in significant hardship without corresponding salary adjustments.

Every citizen deserves the right to have a comfortable life without the fear of deciding between healthcare and common expenses. As State workers we should be able to work and live a comfortable life without having to work multiple jobs to make ends meet. Please do your diligence to protect us from undue hardships. Please find a better solution and do not let State employees bear the burden.

Thank you for your time and consideration.

Sincerely,
Ana Galdamez Reyes

Nevada State Employee (speaking as a private citizen)

Public Comment - PEBP Strategic Planning Meeting

State employees provide the essential services that keep Nevada's communities functioning every day. However, rising health care costs and decreasing coverage are forcing many employees to choose between medical care and basic necessities. Workers cannot continue to absorb these increases alone.

State employees went six years without a raise, and the State's own compensation study confirmed that many classifications were significantly below comparable positions in other public agencies. Even after recent adjustments, many workers remain well below market levels. In addition, state employees do not receive automatic cost-of-living adjustments, which means that even when wages remain unchanged, inflation steadily reduces real take-home pay. When health insurance premiums rise while wages remain flat and no cost-of-living adjustment is provided, the practical effect is a reduction in employees' real earnings.

When increased premiums and reduced coverage occur on top of these conditions, the financial burden is effectively shifted onto employees who are already working below comparable compensation levels. For many workers, these rising costs are not an abstract budget issue but a real household decision about whether they can afford medical care while meeting basic living expenses.

We urge the Board to prioritize protecting current coverage in the short term and to pursue meaningful structural changes in the strategic plan that improve affordability and long-term sustainability without placing disproportionate financial pressure on state employees. Ensuring that health coverage remains affordable is also critical to retaining experienced public servants and maintaining a stable workforce capable of continuing to serve Nevada's communities effectively.

John Coder

As a public service worker, I help keep our communities strong. We keep the roads clear for you all to get to work, and play. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone. Public service workers are leaving public service due to the costs and lack of care when we need it. Changes need to be made so we can continue to be a strong state where the average person can strive and survive knowing where their next meals are coming from and that healthcare is strong and accessible.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

To Whom It May Concern,

I am writing to express my strong opposition to any proposed increase in health insurance costs for Nevada state employees. As the cost of living continues to rise, increasing healthcare premiums would place an undue financial burden on the public servants who keep our state running.

Many state employees are already facing significant economic pressure. Housing, groceries, and utilities have become increasingly expensive, while wages have not kept pace with inflation. For those living paycheck to paycheck, raising insurance costs forces difficult choices between essential healthcare and basic necessities like rent and food.

Healthcare is a necessity, not a luxury. Increasing premiums risks discouraging talented individuals from remaining in public service and could hinder the state's ability to recruit and retain a qualified workforce.

I urge state leaders to explore solutions that protect the financial stability and well-being of our workforce rather than shifting additional costs onto employees. Supporting Nevada's public servants means ensuring they can afford healthcare while maintaining a reasonable standard of living.

Thank you for your time and for considering this important issue.

Sincerely,

Franie Kenner
Las Vegas, Nevada

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

Subject: Urgent Concern Regarding Proposed Health Insurance Rate Increases

Dear PEBP leadership,

As both a concerned employee and a supervisor working for the Nevada Department of Corrections, I feel compelled to express the serious impact the proposed health insurance rate increases will have on our workforce. While we acknowledge that the Department of Corrections received a substantial raise under the FOP 2023 contract, the reality for many of us is that those gains have already been significantly offset.

- In 2023, staff received a 20% raise.
- In 2025, PERS contributions increased by 4.5%, followed by only a 1% COLA for two consecutive years.
- This left employees effectively **3.5% short in year one and 2.5% short in year two**, with non-police/fire members receiving no COLA but an additional 1.6% increase.

Now, with the proposed health insurance increases—some exceeding **50% or more**—employees stand to lose **15% to 40% of their pay**. Personally, this would cost me approximately **\$400 more per month**, while others could lose **\$1,000 or more monthly**.

For example:

- **Family HMO Plan:**
 - Prior 2025: \$651.51
 - **Current: \$801.97**
 - Proposed 2026: \$1,443.55 (+\$641.58)
 - Proposed 2027: \$1,868.59 (+\$1,066.62)
- **Family PPO Plan:**
 - Prior 2025: \$423.54
 - **Current: \$497.68**
 - Proposed 2026: \$895.82 (+\$398.14)
 - Proposed 2027: \$1,159.59 (+\$661.91)

These increases are not sustainable. They will **cripple our ability to hire and retain quality employees**, especially in areas already facing severe staffing shortages outside Las Vegas

and Carson City. Employees with little seniority will be forced to seek other employment simply because they cannot afford to work for the state under these conditions.

We urge the PEBP leadership to reconsider this proposal and explore alternative solutions. Implementing these increases as proposed would be detrimental to all state employees and to the long-term stability of our workforce.

Respectfully,

Correction Officer Rytting

I am writing this public comment in opposition to the potential rate increases to our health insurance. Time and time again state employees are forced to take on the burden of the states mismanagement. We already don't make enough, the endless increases of PERS taking now nearly 20% of our paychecks, increases in health insurance costs, forced furloughs, wages not keeping up with cost of living and inflation, etc.

we are tasked to keep the state running but also to financially take on the mistakes of those in charge of it. We are a convenient scape goat, "if the budget has a huge shortfall from mismanagement? Don't worry we can just make the state workers make up the difference." It's a slap in the face to every state employee who shows up to ensure the state functions because without us nothing would happen and despite that the state constantly mistreats us.

If these increases continue to happen, if we continue to be financially responsible for the states mistakes then you're just gonna drive people away from working for it. Why should anyone work for a state that can't manage itself and will use the employees it relies on to make up for whatever mistake it makes? Our raises that we got have effectively been rendered null and void and not only do we have to worry about the huge increases in cost of living here in northern Nevada and not get Cost of Living Increases, but also that we will be punished for the mistakes of the state.

The state needs to understand the burden it puts on us and how it refuses to do right by us. You don't pay us enough to constantly be financially responsible for your failings we are already struggling and if these increases go through it will be an egregious burden on all state workers. The state needs to figure out how to fix its own mistakes without taking it from our paychecks.

To Whom It May Concern,

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

- Jessica Scrogum

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

My name is Corinne Hasenau, and this May will mark four years of service working for the State of Nevada. I am proud to serve my community, and that commitment is a large part of why I chose this career in public service.

However, the ongoing increases to employee contributions whether through PERS rates or the proposed rise in health insurance costs are placing a growing financial burden on state employees. These increases effectively erase the cost-of-living adjustment provided through AB522. At a time when the cost of living continues to rise dramatically, these added expenses are making it increasingly difficult for many of us to make ends meet.

As someone who relies on the state's health insurance and has needed medical care, I can attest that the coverage already falls short of expectations. A visit to urgent care costs me \$80 out of pocket, and I have even received unexpected medical bills more than a year after services were provided. For many employees, these experiences make it difficult to feel confident in the coverage we are paying for.

State employees deserve health insurance that is both dependable and affordable. Public service is often associated with strong benefits, including accessible and comprehensive health care. I respectfully urge the board to prioritize keeping health insurance costs manageable for Nevada state workers and to strengthen the quality of coverage offered. Ensuring that state employment includes reliable and affordable health care will help make public service a sustainable and desirable career choice.

A comment from Ryan Magera,

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

Member: Alexa Salls

Dear Board Members,

I cannot understate how disastrous these proposed rate increases would be. Not just for individual state employees, but also for the function of the state overall.

State employees are already struggling, as inflation and rising costs eat into our bottom lines. Meanwhile, we haven't received a cost-of-living increase or raise in two years, while prices have soared. Tacking on these huge bumps to our health insurance will be more than many of us can survive.

I have already seen many wonderful, talented people leave state service because they cannot adequately take care of their families on what the state pays. My family and I are currently on the EPO plan. Per page 19 of February 24, 2026, presentation by Segal posted on the PEBP website, our costs will increase by at least \$1,100 a month. That's over \$13,000 a year. I can't afford that. I don't think any of us can. We'll have to go to worse coverage, just as I'm expecting the birth of my child. That, or I will have to leave the state and find employment elsewhere, as so many of my coworkers already have. If we can't recruit and retain good talent, how are we going to be able to operate?

Members of the board, please reconsider before adding any additional burdens to State employees.

Thank you for your time and consideration.

A comment from Lea Jacobsen-Guy, a concerned public service worker.

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

The benefits that previously served as incentives for public service workers are steadily being removed, and employees will seek better opportunities elsewhere if no action is taken. Our

Colin Fox

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

As a public service worker I'm concerned about the changes in my insurance coverage. I understand that costs are increasing but the upcoming changes don't seem to reflect those costs. I'm also concerned about the frequency of these changes. It has been difficult to identify health care providers that accept my insurance.

I don't think it's acceptable to constantly be questioning which services I will be covered for.

Sincerely,

Jake Dick

Chris Moreno – Public Comment 3/10/26

As a public service worker, I value my community above all. It's part of the reason I am in public service, to serve those in my community to the best of my ability. As a US Air Force veteran this value runs deep for me (Service before Self, Hooah!). The rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. I have had to change medical providers more than once because coverage the provider was dropped. This interrupted treatment and cost me more time off in scheduling appointments. Workers cannot and should not shoulder these cost increases alone.

I urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

To whom it may concern,

As a mother of five, I work hard to support my family, but with my current wages and mandatory retirement deductions, I am barely staying afloat. The rising cost of living has made it increasingly difficult to provide for my children and meet basic expenses.

I respectfully ask that you take into consideration the many families, including my own, who cannot sustain any additional financial burdens. An increase in medical insurance costs would be extremely detrimental. For families already struggling to make ends meet, higher premiums may force us to make difficult decisions, including the possibility of withdrawing from employer sponsored medical insurance entirely and relying on cash payments for care instead.

Please understand that this is not a matter of convenience — it is a matter of financial survival. I truly hope that the impact on families like mine can be considered in any decisions moving forward.

Thank you for your time, attention, and understanding.

Respectfully,

Aimee McCollum

I would like to express my concern regarding the rising cost of health insurance for Nevada state employees. The premiums and out-of-pocket expenses continue to increase while the level of service and coverage does not reflect the price we are paying.

For example, according to the official PEBP Plan Year 2024 premium tables, a Nevada state employee on the Low Deductible PPO plan pays **\$68.14 per month for Employee-Only coverage** and **\$377.82 per month for Employee + Family coverage** after subsidy. On the Exclusive Provider Organization plan (EPO), that cost rises to **\$161.00 per month for Employee-Only** and **\$598.40 per month for Employee + Family**. [\[1\]](#)

By contrast, when I worked in Portland, Oregon for 20 years, public employees typically contributed **between 1% and 5% of the premium cost** under Oregon's Public Employees' Benefit Board (PEBB). [\[2\]](#) This means an Oregon public employee could be paying as little as **\$20–\$40 per month** for high-quality, comprehensive coverage—far lower than Nevada's monthly premium obligations. In addition, Kaiser Permanente's Oregon plans commonly feature **no deductibles** and **copays around \$20 for office visits** with annual out-of-pocket maximums as low as **\$1,500 for an individual**, according to 2024 SBCs. [\[3\]](#)

The difference is stark: in Oregon I had significantly better service, lower out-of-pocket costs, minimal copays, and far lower monthly paycheck deductions. Nevada employees are paying substantially more for substantially less.

Nevada can and should do better for its public workforce. Competitive, accessible health insurance is essential for employee well-being, financial stability, and recruitment and retention. I respectfully urge the State and PEBP to reevaluate current and proposed rates and work toward offering affordable, high-quality coverage that is aligned with what other states—like Oregon—already provide.

I respectfully ask that the State and PEBP reevaluate the proposed cost increases and work toward providing more competitive, accessible, and employee-centered health insurance options. Doing so would demonstrate real support for the workforce that keeps Nevada running every day.

Thank you for considering this feedback.

References

[1] [PREMIUM RATES - Nevada](#)

[2] [Oregon Health Authority : 2025 Benefit Information : Public Employees ...](#)

[3] [Summary of Benefits and Coverage: What this Plan Covers & What You Pay ...](#)



PEBP Board Members
March 19, 2026 Meeting
Public Comment

Dear Board Members:

I am writing to complain about a recent issue with Express Scripts. I called and spoke with Jasmine at the PEBP call center who informed me that any complaints must be in writing, so I am providing them here.

Please redact my name and other personal information from the letter as it contains personal health information that I would like to remain private.

I satisfied my out-of-pocket maximum on February 1, 2026. Later in the month I suffered an [REDACTED]. I was prescribed short term antibiotics and steroids, and nasal spray. These prescriptions were sent to a local CVS pharmacy which is listed as an in-network pharmacy.

Prior to picking up the prescriptions, I logged into the express-scripts portal and saw that express-scripts flagged one of the nasal sprays indicating that if this was a maintenance medication, that I needed to order a 90-day supply, but I would not be penalized for this initial 30-day script at the local pharmacy. I clicked to order a 90-day supply, then canceled it as I didn't know if I would continue to use this medication long-term.

I picked up the 4 medications at the retail pharmacy and was charged penalty fees for all four medications (there should not have been a co-pay since I had already met the out-of-pocket maximum). Express-Scripts indicates in the processes claims section for these medications that *"Additional costs may occur if there's a better way to fill your medication. You can avoid these costs by getting a larger supply at a maintenance pharmacy. Or, you can switch to an alternative medication that your plan prefers."*

I called and spoke to a supervisor (I believe her name was Nelsy) at Express Scripts who told me that the PEBP plan specifies a penalty if I obtain a prescription at a retail pharmacy if the prescription is for less than 30 days. I also spoke to a pharmacist (Bob) at Express Scripts who verified that all four medications were generic, and not considered brand name drugs.

The Express Scripts supervisor told me it didn't look right, and that if I overpaid, they would reimburse me for the charges. She stated she would escalate the concern to her management

and would return a call within two days. It's been more than two weeks and I have not heard back from Express Scripts.

Neither the explanation provided in the Express Scripts portal (that I need to order a larger supply to avoid the penalty for all four medications or a different brand) or the verbal explanation that a script of less than 30-days results in a penalty make any sense.

I was unable to find information in the PEBP master plan that states there is a penalty for filling a script of less than 30 days. Additionally, it would be absurd to ask for a 30-day supply of steroids or antibiotics when a 5 to 10-day script is all that is needed.

Secondly, although I cancelled the 90-day supply of the nasal spray, Express Scripts filled it and mailed it to me anyway, costing the plan unnecessary expenses.

I did not file an appeal about the prescription drug benefit listed on page 106 of the master plan document because I don't feel that this situation falls into that type of an appeal.

I am writing to complain that I don't believe Express Scripts is following the plan design and is failing to meet its customer service expectations by failing to follow-up with me as they stated they would.

While the amount of the penalty I paid is small, what they are doing may not be. If I had not reached my out-of-pocket maximum, the charge would likely not have been suspicious as it would have been lumped into the copay I would have been paying.

If there is a penalty for a participant obtaining a script of less than 30-days of medication at a retail pharmacy, then this complaint is to say that is ludicrous and I would like to be provided the specific location in the master plan design that provides for this penalty as I have been unable to find it in the MPD.

If there is not such a provision, and Express Scripts is unjustly adding these fees to retail pharmacy claims, then this could be a serious matter and participants may be entitled to refunds for over-payments. In any event, this matter should be investigated to ensure plan members are not being unjustly charged penalties by Express Scripts.

Please include this letter (my name and contact info redacted) with the public comment section of the Board Meeting scheduled for March 19, 2026.

Thank you.

Scott Clifford

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

As state employees, we work every day to ensure that Nevadans receive quality care and support. Like many people across our state, we are also struggling with the rising cost of daily life. I respectfully ask the board not to increase the cost of our already expensive health insurance plans.

One of the reasons I chose to work for the state was the promise of stable benefits that would help support me through retirement. I understood that state wages are often lower than comparable positions, and I accepted that because those benefits were meant to balance the difference.

However, as wages remain largely unchanged while the cost of benefits continues to increase, that balance is disappearing. What was once a tradeoff is now becoming an unsustainable financial burden.

Even when living on only the most basic expenses, it is becoming increasingly difficult for many state employees to maintain a livable income. Increasing the cost of our benefits would only deepen that strain.

I respectfully urge the board to consider the long term impact of this decision. A stable, effective workforce depends on employees who can afford to live and work in the communities they serve.

Kailey Musso

Carson City, NV

It is difficult to convey the difficulties I have experienced with our health insurance over the past three years in a simple public comment letter without getting emotional. I know to the PEBP Board, my oldest son with special needs is nothing but a number. But to my parents, my siblings, my nieces and nephews, our coworkers, preschool teachers, and especially to my youngest son and my husband and I, my oldest son, Michael, is the light of our lives. Michael has a smile that radiates joy, his hugs make you feel like you are worthy of love on your worst day. Michael is so intelligent that people are often shocked when they hear him speak. But Michael is over three years old and the size of an 18-month baby. Michael virtually stopped growing at 3 months old and ever since then, I have been on the worst roller coaster of my entire life, especially when it comes to dealing with UMR. We do not know what is causing Michael's growth issues. Every test leads to more questions. Michael has a team of four specialists at UC Davis because there is no one in Reno to deal with the complexities of Michael's healthcare. Getting approval to even see these specialists was not an easy feat, but more recently my frustrations have escalated. Michael needs a test done which should be a relatively simple procedure in the Children's Cancer Infusion Room at UC Davis. I have been fighting for 7 months to get this test approved, to the point where I had to involve a PEBP employee. Once we were approved to do the test out of state, Accredo Pharmacy (contracted by the State/UMR) denied the medication needed for the procedure because it needs to come from Accredo, even though UC Davis Cancer Infusion center is contracted with their own compound pharmacy for medications and legally cannot use a different pharmacy. I do not know of any other instance in which a procedure is done at a medical facility where they cannot use their own pharmaceuticals. Since UMR/Accredo will not accommodate this, and after four denied appeals, UC Davis has told us that "seeing them is doing Michael a disservice" and that they have exhausted their efforts. Two of the four providers we see at UC Davis have told me they have never experienced an insurance company so difficult, and now I am left with little to no options.

I am now wondering, what am I even paying for when my health insurance is this horrid? I pay for the most expensive plan, and I am getting nothing from it except heartache and stress, and now you want to raise our rates on top of everything. It doesn't matter the percentage you decide, I want you to know that no matter what percentage you decide to raise, you are hurting working families, and precious little boys like Michael.

From: William O'Donnell
Subject: LDPPO price increase

If the rates need to be increased, please do it slowly. I am in the LDPPO State Active Participant + Family category. I can absorb the extra 74.14/month increase on top of the \$423.54 base price for 2026. I think it's a safe bet to assume that most people can't afford the \$895.82/month that your analysis says is the break even point. I've been very happy with the LDPPO. If price increases are needed, can you limit the annual increase to \$75/mo.

Thanks,
William O'Donnell

Natasha Zittel

Dear Board Members,

After reviewing the information posted for the March 19, 2026 meeting there was no indication on what the Board is planning on selecting for the health insurance benefits or the premium rates. So I feel I need to share that it would be detrimental to my family for the premium rate to increase by 50% and/or for our benefits to be lowered. Keep the LLPPO plan with the same copays as FY 26 while allowing for other funding sources to be evaluated and not placing the entire burden on the state employees. We, the employees, have been dealing with increased retirement contribution rates, higher medical out of pockets, and increasing everyday living costs, while receiving negligible pay increases. The State has been having challenges with recruiting and retaining staff as is and the proposed changes will result in staff having to look for other employment to afford to live in Nevada.

I would like the board to consider options that will result in the increased premium on the employees to be minimized and choose an option that will allow the reserve to be brought back up to a health level over multiple years. Substantially increasing our premium while decreasing benefits really does not feel like I am valued as an employee of the State, one of the reasons I am working for the state was to have a better work life balance. In my mind this came with a little less pay for better leave and medical benefits, but with the raising costs being pulled out of my paycheck each year for retirement and raising healthcare cost this may not be feasible in the long run. I really did not think working for the state would result in having to choose between food and medical care.

Additionally not having an insurance company that works with the major hospital in Carson City where a large majority of State workers work is very upsetting, while I understand the contract has been extended that does not mean it will again. I would highly encourage the Board consider collecting bids for the next cycle from more health insurance companies to evaluate if the State is getting the best value for its money.

Please consider settling the deficit over many years and provide a benefit that can keep the State workers working for the State and able to provide for their families.

Sincerely

Erin Smith

I am an employee enrolled in a PEBP plan that covers my spouse and two children. I continue to be deeply concerned about rising premiums and deductibles alongside reduced coverage, including higher copays, fewer in-network providers, and more expensive medications. Just this past week, my spouse learned that two different kinds of preventive care were not covered under our plan. This, combined with long-term health conditions, have resulted in our family delaying care, limiting medical services, and reducing medications. We have also received thousands of dollars in out-of-pocket medical bills after my spouse's recent medical emergency. Now our medical care expenses compete with our mortgage, food, and basic monthly expenses.

Amidst these challenges, I continue to face coverage issues related to medications. In some cases, I cannot get medications prescribed by my doctor because Express Scripts does not authorize them—even after my doctor received pre-authorization for the medication. This issue continues every 3 months, as Express Scripts will only provide a limit of 45 pills in a 60-day period for a daily medication. Their oversight and inability to fulfill medications that are prescribed by doctors is ridiculous, forcing me in some cases to pay out of pocket for medication that is covered.

Health insurance is supposed to protect families from financial harm during medical crises, yet costs are rising faster than wages and the cost of living, shifting more risk onto families who are already stretched thin. I am also seeing similar strain among my UNLV students and colleagues.

I urge the PEBP to pause further increases, add targeted subsidies for families with dependents and chronic health needs, negotiate better rates with carriers, expand provider and medication coverage, and reduce dependent costs. Concrete steps, such as carving out lower copays for essential medications and emergency care, or offering a more affordable family-tier option, would meaningfully improve access while preventing medical events from becoming long-term financial crises for working families. **I also urge the PEBP to stop contracting with Express Scripts as a prescription manager.**

Kathleen Steele for the Record

Dear PEBP Board Members,

As a State of Nevada employee and a mom of young kids, I am deeply concerned about the proposed increase in our health insurance rates by an additional 84%. My premium will go from \$202.48 to \$372.32 just for myself and my children. This increase is simply unsustainable for us. My step increase each year has not kept pace with rising costs, especially with the additional contributions required through PERS and PEBPs. As a result, my paycheck is shrinking, and with the increased costs of living and daycare costs, it is becoming increasingly difficult to make ends meet. This increase may force us to choose which bills to pay or if it's even worth it anymore to work for the State.

Additionally, the temporary agreement between United and Carson Tahoe expires in 2027. Why are our rates increasing when our options for healthcare and providers are decreasing?

I strongly protest this proposed rate hike and urge the state to consider the financial burden it places on hardworking employees like myself. It is the duty of the State to protect consumers from unjust rate increases, especially their own workers. Additionally, I respectfully request that the state look at other providers and publicly show bids from other insurance providers besides United Healthcare, if the Board hasn't already. This will help ensure that we are receiving the best coverage and value for the state as a whole, not just certain more populated areas of the state, and that public resources are being used as effectively as possible.

Or could the Board consider authorizing a flat-rate stipend to those who wish to seek their own insurance? Whatever the state pays already per employee, offered as a per month stipend for employees who want to step outside the PEBP network and find something that works for their individual needs.

Thank you for your attention to this critical matter.

Sincerely,

Kathleen Steele

March 13, 2026

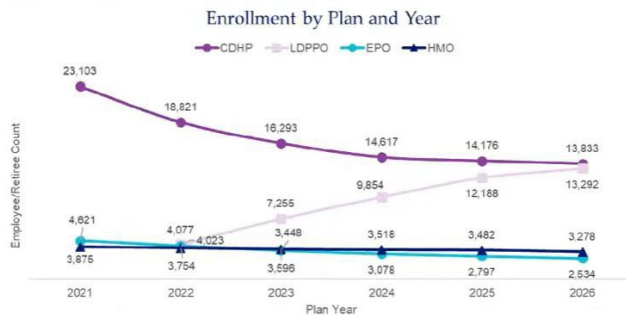
Dear PEPB Board Members,

First and foremost, I wanted to thank you for looking out for the State of Nevada employees in regard to the cost of our healthcare. I did watch the February 24, 2026 PEBP Meeting and I can see you were all concerned about the cost of health care.

I am employed by the DMV in the Southern half of the State for the past seven years. We are one of the lowest paid employees in the state. I have the HMO family option as my husband is not offered health insurance through either of his two jobs. As such, I would be one of the "5,800" subscribers of the EPO and the HMO as described on the chart for the Migration to the LDPPO:

Migration to the LDPPO

- AEGIS/REGI are fixed on a per employee basis
- Migration from the CDHP to the LDPPO increases costs without corresponding increase in revenue



Members are migrating to the LDPPO from both the EPO/HMO and the CDHP.
That is the low deductible PPO, and you can see that enrollment increasing steadily since its introduction in 22, and



ting - February 24, 2026

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When I started working for the State in January 2019, there was only two options for health insurance, the CDHP and HMO/EPO. I am not sure why the North does not have the HMO, and why their plan is much worse than the HMP for the same price.

ACTIVE EMPLOYEE MONTHLY RATES

| State Employee Rates | | |
|--|--|--|
| Effective July 1, 2019 – June 30, 2020 | CONSUMER DRIVEN HEALTH PLAN (CDHP - PPO) | PREMIER PLAN (EPO) AND HEALTH PLAN OF NEVADA (HMO) |
| Employee Only | \$30.95 | \$137.47 |
| Employee + Spouse/DP | \$160.01 | \$415.95 |
| Employee + Child(ren) | \$82.97 | \$275.84 |
| Employee + Family | \$212.02 | \$554.32 |

| Non-State Employee Rates | | |
|--|--|--|
| Effective July 1, 2019 – June 30, 2020 | CONSUMER DRIVEN HEALTH PLAN (CDHP - PPO) | PREMIER PLAN (EPO) AND HEALTH PLAN OF NEVADA (HMO) |
| Employee Only | \$1,252.67 | \$820.61 |
| Employee + Spouse/DP | \$2,402.54 | \$1,585.26 |
| Employee + Child(ren) | \$2,013.58 | \$1,226.87 |
| Employee + Family | \$3,163.48 | \$1,991.52 |

Non-State Employee rates are unsubsidized rates. Employees working for a non-state agency should contact their agency to inquire about any premium subsidies.

MEDICAL BENEFITS OVERVIEW

The information in the table shown contains a general overview of In-Network plan benefits and does not include additional provisions or exclusions. It does not include Out-of-Network benefit information.

| MEDICAL PLAN DESIGN FEATURES | CONSUMER DRIVEN HEALTH PLAN (CDHP - PPO) | HEALTH PLAN OF NEVADA (HPN-Southern HMO) | PREMIER PLAN (Northern EPO) |
|---|---|--|--------------------------------------|
| Service Areas | Global | Southern Nevada | Northern Nevada |
| In-Network | Global | Urgent and Emergent | Urgent and Emergent |
| Out-of-Network | Global | Urgent and Emergent | Urgent and Emergent |
| Annual Deductible (medical and prescription combined) | \$1,500 Individual / \$3,000 Family | N/A | N/A |
| Out-of-Pocket Maximum | \$3,900 Individual / \$7,800 Family | \$7,150 Individual / \$14,300 Family | \$7,150 Individual / \$14,300 Family |
| Base HSA/HRA PEBP Contribution* | Primary Participant: \$700 Dependent (max 3 Dependents): \$200 | N/A | N/A |
| One-Time Additional PEBP HSA/HRA Contribution (Based on Plan Year Funding) | Primary Participant: \$400 (Applied automatically if covered effective 7/1/19) Dependent (max 3 Dependents): None | N/A | N/A |
| Medical Coinsurance | 20% after Deductible | N/A | N/A |
| Primary Care Office Visit | 20% after Deductible | \$20 Copay | \$20 Copay |
| Specialist Care Office Visit (No Referral Required) | 20% after Deductible | \$40 Copay | \$40 Copay |
| Urgent Care Visit | 20% after Deductible | \$80 Copay | \$50 Copay |
| Emergency Room Visit | 20% after Deductible | \$500 Copay per visit | \$500 Copay per visit |

To view more in-depth plan benefits, such as lab services and out-of-network coverage, please log on to your E-PEBP Portal and refer to the applicable Master Plan Document.

I wanted the better coverage for my family, so I chose the HMO as it would cost me less. Even though the CDHP was \$212.02/mo. Vs \$554.32/mo, a difference of \$342.30/mo., it was much cheaper than having to pay for the deductible and co-insurance for doctors visits, bloodwork, imaging tests, etc with the CDHP.

When the PY2022-23 rates were added with the LDPPPO, the price was only \$50/mo more for employee + family compared to the CDHP. But on the LDPPPO, there was no deductible and there were now small copays vs the 20% after deductible as with CDHP. To which is why so many jumped off the CDHP plan, especially those on the EPO plan as there wasn't much difference between the LDPPPO and EPO in terms of coverage:

| Active State Employee Rates | | | | | | | | | |
|--|---|-----------------|------------------------|-------------------------|-----------------|------------------------|--|-----------------|------------------------|
| Monthly Rates Effective July 1, 2022 - June 30, 2023 | Nationwide PPO | | | Nationwide PPO | | | Statewide EPO/HMO | | |
| | Consumer Driven Health Plan (CDHP PPO) | | | Low Deductible (LD PPO) | | | Premier Plan (EPO) and Health Plan of Nevada (HPN - HMO) | | |
| | Unsubsidized Rate | Base Subsidy | Participant Premium | Unsubsidized Rate | Base Subsidy | Participant Premium | Unsubsidized Rate | Base Subsidy | Participant Premium |
| Employee Only | \$674.67 | \$627.71 | \$46.96 | \$695.83 | \$627.69 | \$68.14 | \$783.32 | \$622.32 | \$161.00 |
| Employee + Spouse/DP | \$1,340.02 | \$1,089.02 | \$251.00 | \$1,382.32 | \$1,088.96 | \$293.36 | \$1,557.32 | \$1,078.22 | \$479.10 |
| Employee + Child(ren) | \$924.17 | \$800.71 | \$123.46 | \$953.27 | \$800.67 | \$152.60 | \$1,073.57 | \$793.27 | \$280.30 |
| Employee + Family | \$1,589.51 | \$1,261.99 | \$327.52 | \$1,639.77 | \$1,261.95 | \$377.82 | \$1,847.58 | \$1,249.18 | \$598.40 |

I did contemplate this as well, however, the thought of having to pay 20% for in-patient hospitalization, did not sit well with me, vs the \$600 copay if admitted using the HMO. The HSA that was given to us in the HMO absolutely helped as well and offset most of the increase in plan as I received \$800 the first year and \$500 the second year. If anyone in my family was to be hospitalized, I still could not afford to pay a 20% deductible for a possible hospitalization.

Plan Year 2023 Medical Plan Comparison In-Network Benefits

The information in the tables below contain general plan benefits and may not include additional provisions or exclusions.
To review more in-depth plan benefits, please refer to the applicable Plan Documents.

| MEDICAL PLAN DESIGN FEATURES | CONSUMER DRIVEN HEALTH PLAN (CDHP PPO) | LOW DEDUCTIBLE (LD PPO) | HEALTH PLAN OF NEVADA (HPN SOUTHERN HMO) | PREMIER PLAN (NORTHERN EPO) |
|--|--|--|---|---|
| | In-Network | In-Network | In-Network | In-Network |
| Service Area | Global | Global | Southern Nevada | Northern Nevada |
| Annual Deductible (medical and prescription* combined) | \$1,500 Individual \$3,000 Family • \$2,800 Individual Family Member Deductible | N/A | N/A With exception of Tier 4 prescription drug coverage, see prescription overview | \$100 Individual \$200 Family • \$100 Individual Family Member Deductible |
| Medical Coinsurance | You pay 20% after deductible | You pay 20% after deductible | N/A | You pay 20% after deductible |
| Out-of-Pocket Maximum | \$4,000 Individual \$8,000 Family • \$6,850 Individual Family Member Max Out-of-Pocket | \$4,000 Individual \$8,000 Family • \$4,000 Individual Family Member Max Out-of-Pocket | \$5,000 Individual \$10,000 Family • \$5,000 Individual Family Member Max Out-of-Pocket | \$5,000 Individual \$10,000 Family • \$5,000 Individual Family Member Max Out-of-Pocket |
| Specialist Referral Required | No | No | No | No |
| Primary Care Office Visit | You pay 20% after deductible | \$30 copay per visit | \$25 copay per visit | \$20 copay per visit |
| Specialist Care Office Visit | You pay 20% after deductible | \$50 copay per visit | \$25 copay per visit with a referral \$40 copay per visit without a referral | \$40 copay per visit |
| Urgent Care Visit | You pay 20% after deductible | \$80 copay per visit | \$50 copay per visit | \$50 copay per visit |
| Telemedicine** | \$49 copay medical visit Dr. On Demand | \$10 copay medical visit Dr. On Demand | \$0 copay 24/7 Advice Nurse | \$10 copay medical visit Dr. On Demand |

*Copayment assistance for specialty drugs will not apply toward your Deductible and Out-of-Pocket Maximum.
** Doctor on Demand for the CDHP is subject to the deductible. Copays apply after the deductible is met.

Plan Year 2023 Medical Plan Comparison In-Network Benefits

The information in the tables below contain general plan benefits and may not include additional provisions or exclusions.
To review more in-depth plan benefits, please refer to the applicable Plan Documents.

| MEDICAL PLAN DESIGN FEATURES | CONSUMER DRIVEN HEALTH PLAN (CDHP PPO) | LOW DEDUCTIBLE (LD PPO) | HEALTH PLAN OF NEVADA (HPN SOUTHERN HMO) | PREMIER PLAN (NORTHERN EPO) |
|-------------------------------------|---|---|--|--|
| | In-Network | In-Network | In-Network | In-Network |
| Emergency Room Visit | You pay 20% after deductible | \$750 copay per visit | \$600 copay per visit | \$600 copay per visit |
| In-Patient Hospital | You pay 20% after deductible <i>Elective hospitalization requires precertification</i> | You pay 20% after deductible <i>Elective hospitalization requires precertification</i> | \$600 copay per admit | \$600 copay per admit <i>Elective hospitalization requires precertification</i> |
| Outpatient Surgery | You pay 20% after deductible <i>Elective hospitalization requires precertification</i> | \$500 copay per visit <i>Elective hospitalization requires precertification</i> | Ambulatory Facility \$50 copay Hospital \$350 copay | \$350 copay per admit <i>Elective hospitalization requires precertification</i> |
| Base HSA/HRA Funding Effective 7/1* | \$600 Primary Participant | N/A | N/A | N/A |

*Prorated amount based on effective date of coverage.
-Dependents will not receive any HSA/HRA contribution for Plan Year 2023.
-For more information about HSA/HRA funding please refer to the Plan Year 2023 Consumer Driven Health Plan Master Plan Document.

MEDICAL BENEFITS OVERVIEW (OUT-OF-NETWORK)

| MEDICAL PLAN DESIGN FEATURES | CONSUMER DRIVEN HEALTH PLAN (PPO) | LOW DEDUCTIBLE PLAN (PPO) | EXCLUSIVE PROVIDER ORGANIZATION PLAN (EPO) | HEALTH PLAN OF NEVADA (HMO) |
|--|--|--|--|--|
| Service Areas Out-of-Network | Global | Global | Urgent and Emergent | Urgent and Emergent |
| Annual Deductible <i>(medical and prescription combined)</i> | \$1,650 Individual \$3,300 Family | \$500 Individual \$1,000 Family | N/A | N/A |
| Out-of-Pocket Maximum | \$10,600 Individual \$21,200 Family | \$10,600 Individual \$21,200 Family | N/A | N/A |
| Medical Coinsurance | 50% after Deductible | 50% of the Allowable Maximum Charge* | N/A | N/A |
| Primary Care Office Visit | 50% after Deductible | 50% after Deductible* | Not Covered | Not Covered |
| Specialist Visit <i>(No Referral Required)</i> | 50% after Deductible | 50% after Deductible* | Not Covered | Not Covered |
| Urgent Care Visit | 50% after Deductible | \$80 Copay subject to Maximum Allowable Charge* | \$50 Copay | Subject to Maximum Allowable Charge* |
| ER Visit | 20% after Deductible | \$750 Copay subject to Maximum Allowable Charge* | \$600 Copay | \$600 Copay subject to Allowable maximum Charge* |

I know you are separate from our PERS retirement plan. We don't have a choice to participate or not to participate in it. That rate has significantly increased as well over the past 7 years as well. In 2019, PERS took out 14.5% of my gross earnings as I am in Employee/Employer pay. However, it is now 19.25% of our pay! Between PEBP and PERS, I have over \$900 taken out of my biweekly pay.

A perk to working for a government agency was to have good and inexpensive health insurance and a retirement that you wouldn't pay much into. That is part of the State's benefits package, a part of our compensation package for employment.

It is absolutely disgraceful to put the burden on the current state employees to pay for past mistakes that may have been made or to pad the budget. Please do not increase the cost of health insurance at any level, do not get rid of the HMO, and do not increase the out of pocket deductibles, copays, and coinsurance. In doing so, there could be a mass exodus of employees as it doesn't pay to work for the State.

Thank you,

Tisha Bernhard

Kent Ervin, PEBP member

As of this submission, it is less than 24 hours before PEBP's two-business-day deadline for written public comment for the March 19th PEBP Board meeting. The materials for agenda item 5, plan design and rate setting, have not been posted. That information is critical for any informed input from members.

Based on the posted official action minutes for the January 20th and February 24th board meetings, members would only know that there were presentations on trend analysis and possible plan design changes, and a failed motion to maintain the PY2026 out-of-pocket maximum for the high-deductible plan. The [Feb 24th presentation](#) agendized for possible action provided "illustrative" employee premium increases of up to 99% (for the participant-only EPO/HMO).

In verbal comments at the February 24th meeting, Chair Wells criticized PEBP members for submitting in public comments quoting the presentations at meetings and not recognizing board member verbal comments at meetings that were neither acted upon with a motion nor included in the meeting minutes as discussion. The Executive Officer report for Thursday's meeting states that the minutes comply with the Nevada Open Meeting Law, but it is hard to see how they comply with NRS 241.035(1) to include:

(c) **The substance of all matters proposed, discussed** or decided and, at the request of any member, a record of each member's vote on any matter decided by vote.

(d) **The substance of remarks made by any member of the general public who addresses the public body if the member of the general public requests that the minutes reflect those remarks** or, if the member of the general public has prepared written remarks, a copy of the prepared remarks if the member of the general public submits a copy for inclusion.

The late posting of board materials as well as minutes that do not include the substance of discussion impede the intent of the Open Meeting Law for meaningful input by the public. All comments "for the record" should be included in the minutes. Directions from the Board to staff, whether or not memorialized in a motion, should be included in the minutes.

The PEBP Board should decline to approve the draft minutes for January 20 and February 19 until they are corrected to comply with the intent of the Open Meeting Law.

Thank you.

Kent Ervin, retired member

The [Q2 UMR Dental Performance Review](#) in agenda item 12.9 shows that the cost of dental services to the plan is \$37.46 per member per month for State employees and retirees.

The [PY2026 dental rate](#) charged is \$53.18 per adult retiree or spouse per month.

What accounts for the 42% higher employee premium compared with plan expenses for the PEBP dental plan?

The PEBP statute requires a single rate pool for active and retired members. It appears that retirees (at least) are being overcharged. The portion of the total PEBP rate for active members attributable to the dental plan has not been reported to the Board recently.

Thank you in advance for an explanation of dental rates.

Kate Coleman

POA and Daughter of PEBP Member David E. Reil, Retiree




March 19, 2026

RE: Smart90 Policy Conflict with Assisted Living Medication Regulations

Dear Members of the Board,

I previously submitted this comment for the February 7, 2026 meeting. Because that meeting understandably received a very large volume of comments focused primarily on potential FY27 plan cost increases, I am respectfully resubmitting this comment in hopes that this specific policy issue may receive consideration as you continue evaluating potential plan updates.

My father is a retired public school teacher and a long-time PEBP member. He has lived with  for more than 30 years and now resides in a state-regulated assisted living facility due to the progression of his condition.

In assisted living settings, medication management is considered a required activity of daily living. Because of this, facilities must dispense medications through licensed specialty pharmacies that meet state regulatory standards. Residents cannot receive medications by mail and cannot receive 90-day prescription supplies.

As a result, assisted living residents are structurally unable to comply with the PEBP Mandatory Smart90 Retail and Home Delivery Program. The inability to meet the 90-day requirement is not a matter of preference or convenience. It is a requirement of state health and safety regulations governing assisted living facilities.

Under the current Smart90 policy, this lack of choice results in significant financial penalties. We currently pay approximately \$213 for a 28-day supply of one of my father's medications. If the same medication were filled under a standard 30-day supply through an allowed Smart90 channel, the cost would be approximately \$52.

Across several medications, this policy results in cost increases ranging from roughly 50 percent to as high as 280 percent for identical prescriptions, based solely on supply requirements that assisted living residents cannot legally meet. These costs also do not count toward deductibles or out-of-pocket maximums.

This creates an unintended situation where complying with Nevada assisted living regulations directly results in higher prescription costs and reduced benefits for some of PEBP's most medically vulnerable retirees.

My father spent his career serving Nevada students as a public school teacher. Like many PEBP retirees, he paid into this system for decades with the expectation that it would support him in retirement. Instead, he is currently being financially penalized for circumstances entirely outside of his control.

As the Board continues evaluating potential updates for the FY27 plan year, I respectfully ask that PEBP consider establishing an exception within the Smart90 policy for individuals residing in state-regulated assisted living facilities where medication management is a required activity of daily living and where mail delivery and 90-day prescription supplies are not permitted.

I also respectfully ask that when no alternative exists, these prescription costs be allowed to count toward deductibles and out-of-pocket maximums.

This issue ultimately comes down to equity, dignity, and fairness for retirees who must rely on assisted living care due to serious medical conditions.

Thank you for your time, your consideration, and for the work you do on behalf of Nevada's public employees and retirees.

Sincerely,

Kate Coleman

Public Comment

To: PEBP Board

From: Lars Jensen

Date: March 19, 2026

Subject: Public Comment for March 19, 2026 Board Meeting (Agenda Items 4 and 5)

Dear Members of the PEBP Board,

My name is Lars Jensen, and I am a mathematics department faculty member from Truckee Meadows Community College (TMCC) in Reno. I am writing to express my profound frustration with the lack of transparency leading up to this meeting, and to reiterate my fierce opposition to any drastic premium increases or benefit reductions.

Transparency and Open Meeting Law Concerns

- The materials for Agenda Item 5, which covers possible plan design changes and rate setting, were not posted in a timely manner.
- This lack of available information makes it impossible for members to provide informed, meaningful input before the written public comment deadline.
- Furthermore, the draft minutes for the February 24 meeting contain no substantial details regarding the discussion of any item.
- For example, the February 24 minutes only note a failed motion regarding the out-of-pocket maximum under Agenda Item 4, completely omitting the substance of the presentation and the Board's discussion.
- This lack of detailed record-keeping appears to violate Nevada Open Meeting Law NRS 241.035(1), which explicitly requires minutes to include the substance of matters proposed, discussed, or decided.
- The Board should decline to approve the draft minutes from the February 24 meeting under Agenda Item 4 until they are corrected to comply with the intent of the Open Meeting Law.

Opposition to Rate Hikes and Plan Reductions Even without the full details for Agenda Item 5, I strongly oppose large premium increases and reiterate the critical priorities I raised to this Board in February:

- **Conduct a Full Independent Audit:** The massive, unexplained revenue shortfalls compared to legislatively budgeted amounts require a thorough, independent audit before any drastic plan changes are adopted.
- **Implement a Three-Year Phase-In:** Any necessary premium increases must be spread over at least three years, with increased state support sought in the next budget cycle.
- **Maintain Flat-Dollar Employer Contributions:** Setting employee premiums as percentages of total rates is inequitable; the Board should retain flat-dollar contributions across all plan options.
- **Halt Out-of-Pocket Maximum Increases:** Increasing out-of-pocket maximums is unacceptable and undermines the fundamental purpose of health insurance, which is to protect against catastrophic medical debt.

As a TMCC faculty member, I cannot easily absorb these punishing cost hikes on a fixed income. An unexpected jump in monthly healthcare costs and higher deductibles directly cuts into the ability of state employees and retirees to pay for basic living expenses. We should not be forced to bear the brunt of PEBP's accounting errors or be kept in the dark about the details of our own healthcare coverage.

Thank you for your time and service to the state.

Sincerely,

Lars Jensen

ljensen@tmcc.edu

Kasha Jennings

I am writing as a Nevada state employee to express serious concern about the proposed increase in health insurance premiums. While I understand that rising healthcare costs are a complex and ongoing challenge, the approach of shifting more of that burden onto employees feels increasingly punitive.

State employees are already contributing significantly toward their retirement through PERS, along with covering rising costs in nearly every aspect of daily life. When additional expenses—such as higher health insurance premiums, deductibles, and out-of-pocket costs—are layered on top, it creates a situation where employees are effectively being asked to absorb the majority of financial pressures. This trend gives the impression that employees are expected to pay for everything, with little relief or shared responsibility.

For many of us, wages have not kept pace with inflation or the cost of living. Housing, food, and transportation costs continue to climb. Adding higher healthcare premiums to this reality is not just burdensome—it is detrimental. It forces employees to make difficult choices between maintaining their health and meeting basic financial obligations.

Beyond the immediate financial strain, there are serious long-term implications for the State's workforce. Increasing costs in this way will likely make it more difficult to attract and retain qualified employees. Many current employees may begin to seek opportunities elsewhere where compensation and benefits are more balanced and sustainable. Recruitment and retention challenges ultimately impact the quality and continuity of public service.

Higher premiums may also lead employees to delay or forgo necessary care, resulting in more serious health issues and increased long-term costs for both employees and the State.

I respectfully urge decision-makers to reconsider this approach and explore alternatives that do not disproportionately place the burden on employees. A more balanced strategy—one that recognizes the contributions employees already make through PERS and other cost-sharing mechanisms—would better support workforce stability and overall organizational success.

Investing in employee well-being is an investment in the State's future. I hope you will carefully consider the real impact of this decision and work toward a solution that supports both fiscal responsibility and the health, stability, and retention of Nevada's workforce.

Thank you for your time and consideration.

Date: March 17, 2026, 8:00 am
To: PEBP Board
From: Kent Ervin, Nevada Faculty Alliance
Subject: Plan design and rates for Plan Year 2027, agenda item 5

As of the imminent deadline for written public comment for the March 19th rate-setting meeting, PEBP has not made its plan design and rate proposals available. PEBP has also not yet explained its reported revenue shortfalls of about \$100 million/year versus budgeted amounts. Without this information, neither the PEBP Board nor members and member advocates can make well-informed decisions or comments. There will not be sufficient time to review and analyze the proposals.

We therefore request that the Board defer any action on agenda item 5 to a subsequent meeting. If necessary, the start of the open enrollment period should be delayed.

Regarding the decisions for FY2027 that still need to be made:

- The **first** priority is to determine why Segal's and PEBP's revenue estimates are about \$100 million per year lower than the legislatively budgeted amounts. That's a huge, unexplained shortfall. Is it real or not? **The sudden fiscal crisis at PEBP after the Legislature and Governor raised state funding by a historically large amount for this biennium calls for an independent audit** of PEBP accounting, budgeting, and rate-setting, along with how the Governor's Finance Office and Legislative Counsel Bureau interact with those processes.
- **Increases in employee premiums should be phased in over three or more years**, with necessary increased state support sought in the next budget cycle.
- **The rates for ongoing expenses should be priced separately, with a temporary surcharge for restoration of reserves**—at the minimum level in FY2027 to keep reserves from going further in deficit.
- **Third, out-of-pocket maximums should be returned to the FY2026 amounts for all three plan options.** Increases in out-of-pocket maximums hurt most the members who have chronic or acute conditions, especially lower-income employees. The whole point of health insurance is to protect against catastrophic medical expenses and debt.
- **Finally**, the board should **retain the current flat-dollar employer contributions across the three plan options and a single percentage contribution for dependents.** The ad hoc employee premium percentages proposed in February that vary arbitrarily by plan option and dependent tier are unfair and inequitable.

The Board should also request and receive a breakdown of the total rates in FY2026 and proposed for FY2027 by medical, pharmacy, dental, life insurance, and administration and by dependent tier. Following those trends separately is important for containing costs and ensuring fair pricing.

Thank you for your consideration.

Member: Rebecca Rice

Urging PEBP to protect health affordability

I am deeply concerned as a UNLV faculty member about the proposed PEBP increases for 2027. An increase of over 100% in premiums is inhumane and unaffordable for public employees. Nevada needs to increase its state contributions to restore the traditional cost share balance. It is alarming to also see the proposed cuts to benefits. Nevada is already a difficult state to receive adequate healthcare in and these changes will quite literally affect the lives and life expectancies of public employees. The state should be conscious of this and should work to restore benefits and reduce the cost increase. Otherwise, I fear we will experience a brain drain as employees leave the state to work in places with both better healthcare and more equitable benefits from their employers.

TO: Jim Wells, Chair; and Public Employee Benefits Program Board

FROM: Douglas Unger, Past President, UNLV Chapter, Nevada Faculty Alliance; & Member,
UNLV Employee Benefits Advisory Committee

PEBP BOARD MEETING – 3-19-2026 -- PUBLIC COMMENT

Doug Unger, Immediate Past President, UNLV Chapter, Nevada Faculty Alliance; and Member,
UNLV Employee Benefits Advisory Committee.

For the record: the preparation and notifications by PEBP and its administration for this much anticipated meeting, to discuss and vote on plan designs and rates for the 2027 fiscal year and perhaps beyond, are extremely disappointing. I believe it is unprecedented that such crucially important proposals are not posted within a reasonable time in advance for state employees and the public to be sufficiently informed and be afforded a fair and reasonable opportunity to make public comments and advocate to the PEBP Board as to the real life effects of Board decisions. What's happening is wrong, for its lack of transparency, for its effective denial of due process and worker's rights for Nevada's state employees. This meeting should be postponed until reasonable advance notification of possible Board decisions can be published, even if this means moving ahead or shortening the open enrollment window.

Furthermore, Agenda item #9, reporting on the PEBP budget (which at least has been posted), is woefully incomplete. State employee advocates have identified more than \$200 Million in discrepancies (or approximately 16% of the total budget) between projected revenues in the PEBP budget closing before the 83rd Legislature last April, 2025 (also figures reported by PEBP in September, 2025) and these current numbers. There is still no explanation whatsoever from the PEBP actuary, Executive Officer Carsten, or anyone else, how more than \$200 Million dollars could have been initially reported in error or now be so egregiously unaccounted for. We are instead left with a chart that shows 14% shortfalls in AEGIS and REGI and projected shortfalls of 24% in employee premiums, with not one further word of explanation but an incomplete sentence, "The overall decrease in projected revenue is due to---" followed by a blank space, by nothing.

This is unacceptable. And it's unprofessional. I can only imagine how frustrated every member of the PEBP Board must be at such a lack of transparency and fiscal responsibility. If this is an issue with the actuary, Segal, then say so; if it's false reporting originally by former officers of the state, then say so; if there is any other explanation, then say so. State employees deserve the truth about the funding of our healthcare and benefits, because all signs point to the sad fact that we will be the ones who must pay the unaffordable price. And that's not fair or right in any way.

Dear PEBP Provider,

I hope this message finds you well. I am writing to respectfully express my concern regarding the potential increase in insurance costs.

I have been employed with the state for the past five years, and during that time I have worked hard to support myself and my family. As a single mother, I am already doing my best to manage day-to-day expenses, and any increase in my insurance premiums would create a significant financial strain. I am currently just getting by, and this change would make it much more difficult to maintain stability for myself and my child.

In addition to financial challenges, I am also dealing with ongoing health concerns. I have been experiencing issues related to my [redacted] as well as a [redacted] caused by UV exposure. This condition has already progressed into [redacted], causing [redacted], and may require surgery in the near future. I have been consistently paying copays and managing medical expenses, which adds to my financial burden.

Alongside my work responsibilities, I have been pursuing my education for the past three years and am now only four credits away from completing my degree. This has required significant dedication, and I am doing everything I can to improve my future while continuing to fulfill my role as an administrative professional.

I respectfully ask that you reconsider any increase in insurance costs, as it would have a profound impact not only on me, but on many other administrative staff who are working hard under similar circumstances. Many people I work with including my mother and father who are employed with the state or individuals with kids on their insurance are in the same situation.

Thank you for your time, understanding, and consideration. I would greatly appreciate the opportunity to discuss this matter further.

Sincerely,
Savannah Hash

[redacted]

Roselyn Tomasulo MSN RN

As the March 19 rate-setting meeting approaches, PEBP has not released its proposed plan design or rates, nor explained the reported \$100 million annual revenue shortfall. Without this information, meaningful review and informed public comment are not possible.

I urge the Board to **defer action on Agenda Item 5** to a future meeting. If needed, the open enrollment period should be delayed allowing adequate transparency and review.

For FY2027 decisions:

- The reported \$100 million revenue gap must be clearly explained. If necessary, an independent audit of PEBP's financial and rate-setting processes should be conducted.
- Any employee premium increases should be phased in over time, with additional state support pursued.
- Ongoing costs should be separated from reserve restoration, with only a minimal, temporary surcharge if required.
- Out-of-pocket maximums should be restored to FY2026 levels to avoid placing undue burden on members, especially those with chronic conditions.
- The current flat-dollar employer contribution structure should be maintained to ensure fairness.

The Board should also provide a clear breakdown of FY2026 and proposed FY2027 rates by medical, pharmacy, dental, life, and administrative costs to support transparency and accountability.

Thank you for your consideration.

For the Record: D.Paige Menicucci

Subject: Formal Objection to Proposed Insurance Rate Increase Exceeding 84-87%

To Whom It May Concern,

I am submitting this letter as a formal objection to the proposed insurance rate increase exceeding 84-87% currently under consideration by the Nevada Public Employees' Benefits Program (PEBP).

As a single State of Nevada retiree with an annual income of less than \$50,000, I am directly and severely impacted by this proposal. An increase of this magnitude is not only unaffordable, it is excessive, inequitable, and inconsistent with the fundamental standards of reasonableness required in insurance rate-setting.

A premium increase exceeding 84-87% cannot reasonably be characterized as an actuarially justified adjustment for inflation or risk. Rather, it represents a disproportionate financial burden placed on retirees and lower- to moderate-income participants who have limited ability to absorb sudden and extreme cost increases. This proposal effectively forces individuals like myself to choose between maintaining essential health coverage and meeting basic living expenses.

Under well-established principles of insurance regulation, rates must not be excessive, inadequate, or unfairly discriminatory. A rate increase of this scale raises serious concerns regarding compliance with these standards. Without clear, detailed, and publicly accessible justification demonstrating that such an increase is actuarially sound and unavoidable, approval of this proposal would be both inappropriate and harmful to plan participants.

Furthermore, PEBP has a responsibility to ensure that benefit structures remain accessible and sustainable for the public employees and retirees it serves. A drastic increase of this nature undermines that responsibility and erodes the financial security of those who rely on these benefits.

I formally request that:

- This proposed rate increase be denied; or
- At a minimum, that it be subjected to heightened regulatory scrutiny, including full transparency of the actuarial data, assumptions, and cost drivers supporting the increase; and
- That meaningful alternatives be explored to mitigate the financial impact on retirees and lower-income participants.

The approval of a rate increase exceeding 84-87% would set a deeply concerning precedent and disproportionately harm those least able to bear such costs.

I respectfully insist that this objection be entered into the official record and given full consideration during the review process.

Thank you for your attention to this matter.

Sincerely,

D. Paige Menicucci
State of Nevada Retiree
20 years

The astronomical increase in health insurance premiums for state employees is completely unacceptable. There was a “mathematical error” that led to a proposed 100% increase, however, that increase itself is absurd. If the initial recommended increase was 30%, we would still have fought it as 30% in one year can be a life changing increase for many making 40-60K per year. 100% was just insane.

Whether it was a shock tactic to throw out a 100% increase, then magically backtrack with a mathematical error, to make a 30% increase more palatable, you are still mistaken. Nevada employees should be able to afford their health insurance, have HMO and PPO options, and not have to worry that the state can't fund it or do math correctly.

I, and many others, will not be able to afford to pay my increased premiums, my nearly 20% mandatory retirement contribution, etc. when you do not also offer cost of living increases. You made up for a decade of no increases in COLA and now it's the standard excuse. Do better, Nevada.

To: PEBP Board of Directors

From: Laura Gardner -UNLV

Date: March 17, 2026

Subject: Support for a Three-Year Rate Stabilization Plan and Targeted Subsidy Reform

To the Members of the PEBP Board:

As the Board evaluates the current projected cost increase, it is clear that a single-year correction is neither sustainable for employees nor politically viable. I am writing to support a **three-year strategic glide path** that prioritizes the stability of the **Consumer Driven Health Plan (CDHP)** while systematically phasing out the subsidies currently propping up high-cost "Cadillac" plans.

A multi-year approach allows the program to recover its reserves without causing a mass exodus of participants or creating immediate financial hardship for state workers. I urge the Board to adopt the following framework:

1. Protect the CDHP as the "Anchor" Plan

The CDHP should remain the baseline for affordable coverage. I propose that the CDHP rates be held steady. By shielding this plan, the Board ensures that all Nevada public employees have a guaranteed "affordable floor," protecting the most vulnerable members from the current market volatility.

2. Three-Year Phase-Out of "Cadillac" Plan Subsidies

The current model, where the general fund effectively subsidizes the highest-premium plans, is no longer defensible. I support a **36-month transition period** to reach actuarial "user-pays" pricing for these tiers:

3. Incentivizing Fiscal Responsibility

By announcing a three-year plan now, the Board provides members with the transparency needed to make informed decisions. Those who currently utilize high-cost plans will have a clear timeline to either absorb the full cost of their choice or transition into the more fiscally responsible CDHP.

Conclusion

An increase in a single year is a shock to the system; a three-year targeted realignment is a strategy. I urge the Board to adopt this tiered, multi-year model to protect the CDHP and ensure that those who choose the most expensive coverage are the ones who pay for it.

Sincerely,

Laura Gardner

IT Support Services Manager - UNLV

As a single mother, I face the constant challenge of making ends meet while raising my children. Every month is a balancing act to ensure that I can cover our essential expenses. I'm already feeling the strain of rising costs in various areas, from groceries to transportation. If our insurance rates were to increase, it would be incredibly difficult for me to maintain our current standard of living. Each additional expense creates a ripple effect, forcing me to tighten our budget even more. With inflation affecting prices everywhere, I worry about how I could manage if we faced yet another financial burden.

Paysha Rhone
Director of Communications, UNLV Foundation



Dear PEBP Board,

I am writing to request that, if you do need to make increases to our healthcare premiums, please ensure those increases are reasonable and implemented over time. With skyrocketing inflation affecting everything we purchase, from gas to groceries to car insurance and everything for our homes and children, working families are being squeezed. In NSHE, we have already recently experienced major increases to our required retirement contributions that affectively ate away at the benefit of our COLA increases. Southern Nevada families are already struggling to make ends meet, and there are no new cost of living pay raises in sight.

I have had younger colleagues, earlier in their careers, tell me they struggle to cover their basic living expenses, as their salaries are not high enough to accommodate the retirement contribution increases; they can't imagine major healthcare premium increases on top of that. Some of these staff have ongoing healthcare needs and must already cover their co-pays and any uncovered or partially covered medical expenses. It is a significant burden.

Please work to ensure any increases are reasonable and gradual, to protect the standard of living for NSHE employees and enable us to properly feed, clothe and care for our families during this difficult economic time in our country.

Thank you for your careful and compassionate attention to this issue, which affects so many families so seriously.

Paysha Rhone

To the Board:

The proposed increases in the health insurance premiums are outlandish. To do this to all the state workers is malfeasance. We should not be taking hits because of the lack of foresight by people running the plans.

We have to use the low deductible plan because my wife and stepdaughter have various health issues causing them to hit the out of pocket maximum every year. We also just lost a child this year. Losing a family member is incredibly expensive in its own right and of course this period of grief is hard. Adding a massive expense onto our family, even after we lost retention bonuses, merit pay, and didn't get a COLA (UNLV faculty) this year and its just too much.

This state will lose talent if we move forward with this. I like living here. I moved here 4 years ago from the Midwest and we're finally settled down. Trying to save for a home and trying to be a part of our larger community. Do not hurt our family anymore than we are already hurting.

This proposed price increase is appalling, and PEBP needs to do a better job shopping for better insurance with better coverage. The fact that we are going to not only keep this abysmal insurance that doesn't pay claims at Carson Tahoe, but also pay more for this spotty coverage is abhorrent. With price gouging at a high in the United States right now, Nevada employees can not afford to continue to have their insurance premiums increased, and their PERS contributions increased. I know more and more State of Nevada employees who can no longer make ends meet with one job alone.

State benefits used to be something to aspire to, now benefits working for this state have become a joke. If PEBP is not able to find more affordable insurance that pays claims on time at our local hospital, PEBP should shoulder the increased prices from the subpar insurance that they have chosen for us. The people of Nevada need representatives within PEBP who can fight for us.

Sarah Ketner

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

My name is Thomas Streegan, and I'm proud to serve the people of Nevada. I show up every day because I believe in the work we do and the communities we support. But the reality is that it's getting harder and harder for public employees like me to keep up.

Health care costs keep rising while our coverage keeps shrinking. Every increase in premiums forces me — and so many of my coworkers — to make tough choices about our own health and our families' needs. We're already dealing with higher rent, higher grocery bills, and the overall cost of living climbing faster than our paychecks. Adding another premium increase on top of that isn't sustainable. Public service workers shouldn't have to choose between going to the doctor and paying for basic necessities. We shouldn't be punished for choosing careers that serve our state.

I'm asking the PEBP Board to reject any premium increases and protect the coverage we have now. And beyond that, the State needs to recognize that wages for public employees have not kept pace with the cost of living. If Nevada wants to recruit and retain a strong workforce, we need fair salaries and affordable health care, not more financial strain.

We make Nevada happen. We deserve a system that supports us, not one that pushes us further behind.

Thank you for listening.

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

Thank you.

Donya M Jamerson

3/17/2026



As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverages are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

I

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

Jason Kollman - RN

March 2026

To whom it may concern:

The ever increasing cost of living is not comeasurate with the employee share of health insurance costs, nor the nominal pay increases.

Either a significant pay increase with no increase in employee share on insurance cost and/or lowered employee insurance cost ass well as pay increase needs to take place.

The employer contribution to retirement, needs to increase and the employee's share lessened.

In all things financial, the employee should take home more of their income, while still having insurance and retirement.

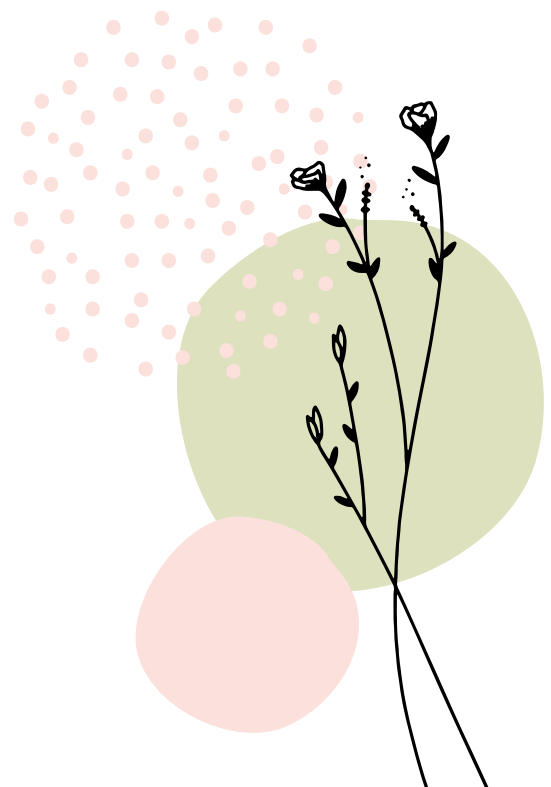
For communication, emergency and research sake, Nursing staff should have access to their cell phones.

As public a service worker, I help keep our communities strong. However, rising health care costs and decreasing coverage are forcing me to choose between medical care and basic necessities. State employees cannot shoulder these cost increases alone.

I urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

03/17/2026

STAND STRONG AGAINST RISING HEALTH CARE COSTS AFFECTING FAMILY SERVICE SPECIALISTS. WE SERVE NEVADA'S FAMILIES EVERY DAY, AND WE DESERVE CARE THAT DOESN'T DRAIN OUR EARNINGS. FAIR PAY MEANS LITTLE WHEN HEALTH CARE BECOMES OUT OF REACH. IT'S TIME TO PUSH FOR CONTRACT PROTECTIONS THAT STOP STEEP INCREASES, STRENGTHEN EMPLOYER SUPPORT, AND KEEP QUALITY CARE AFFORDABLE FOR EVERY FAMILY.



Subject: Opposition to Premium Increases and Reduction of Benefits for PEBP Members

To Whom It May Concern,

I am writing as a participant in the Public Employees' Benefits Program (PEBP) to express my strong opposition to the proposed increase in premiums alongside a reduction in benefits.

Year after year, state employees have been asked to shoulder rising healthcare costs, often without a clear demonstration that all reasonable efforts have been made to control those costs. This ongoing pattern places an unfair and unsustainable burden on the very employees who keep the State of Nevada functioning.

While we understand that healthcare costs can fluctuate, it is deeply concerning that premium increases are being proposed without transparent evidence that PEBP has actively and aggressively pursued more competitive insurance options. As stewards of public employee benefits, there is a responsibility to regularly shop the market, negotiate better rates, and explore alternative plans that could provide equal or better coverage at a lower cost.

Instead, employees are being asked to accept higher premiums and reduced benefits—effectively paying more for less. This is not a reasonable or equitable solution, especially in a time when many state workers are already facing financial strain due to inflation and cost-of-living increases.

Before any rate increases are considered, I urge PEBP to:

- Provide full transparency regarding efforts to seek competitive bids from other insurance providers
- Demonstrate what cost-containment strategies have been pursued beyond shifting costs to employees
- Explore innovative plan designs that prioritize affordability without sacrificing essential coverage
- Engage meaningfully with employees and their representatives to find solutions that do not disproportionately impact them

State employees should not continue to be the default solution to budget shortfalls. We deserve accountability, transparency, and a genuine effort to protect the affordability and

quality of our healthcare.

I respectfully ask that you reconsider any proposed premium increases or benefit reductions until all alternatives have been thoroughly explored and clearly communicated.

Thank you for your time and consideration,

Ashley McAllister

Correctional Officer

Nevada Department of Corrections

6:44

5G+

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan. Nevadans need to be insured, but also need to be able to afford that coverage and have our medical needs met.

Shayla Barry The increase in premiums would seriously financially impact the Nevada state employees. We have a hard enough time making ends meet as it is. There are a lot of employees that commute and pay for fuel which is expensive. The state will lose employees as we won't be able to afford to go to work.

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

Public Comment Submission - Emily Larsen

As public service workers, we are proud to serve and support our communities every day. However, rising health care costs and decreasing coverage are placing many of us in an increasingly difficult position—forcing us to choose between accessing necessary medical care and meeting basic living expenses. This is not sustainable and is already impacting the well-being of the workforce that our communities rely on.

I respectfully urge the Board to take immediate action to protect our current health care coverage in the short term. At the same time, it is critical that the strategic plan includes meaningful, long-term structural changes to address these ongoing challenges.

These decisions are urgent and have a direct impact on the individuals who keep our public services running. Thank you for your consideration.

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

Dear Committee Members,

I am writing to express my strong opposition to the proposed increase in health insurance premiums for State of Nevada employees and retirees. The magnitude of the suggested hike—reportedly as high as 133%—is deeply concerning and, frankly, shocking. It is difficult to understand how such a drastic increase could be considered without fully accounting for the financial strain it would impose on those who have dedicated their careers to serving the State.

State employees and retirees have already endured reduced take-home pay through increased PERS contributions and rising insurance costs in recent years. Implementing an additional, extraordinary premium increase would further jeopardize their ability to maintain access to quality, affordable healthcare. Many are already struggling, and this proposal would only compound those challenges.

I am also concerned that this proposal was not communicated directly to all affected members. Transparency and proactive communication are essential when decisions of this magnitude are being considered.

Without a meaningful increase in wages or retirement benefits, even a gradual rise in premiums would create significant hardship. A sudden and extreme increase would be untenable.

I strongly urge you to reconsider this proposal. Affordable healthcare is not a luxury—it is a necessity for the employees and retirees who have faithfully served the State of Nevada.

Thank you for your attention to this matter.

Sincerely,
Maylen Mosquera
Nevada State Employee

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

Dayna Wilder

H.I.C. II | Lakes Crossing Center

Division of Public and Behavioral Health

[REDACTED]

[REDACTED]

[REDACTED]

I am writing to express my severe concern regarding the proposed increases to the Public Employees' Benefits Program (PEBP) premiums. As a state employee, I am facing an additional \$156 per month in premium costs. With stagnant wages failing to keep pace with these increases and rising pension deductions, I am reaching a point where I can no longer reasonably provide for my family.

A healthy work-life balance is impossible when the cost of maintaining employment requires sacrificing basic family necessities. These compounding costs are driving a crisis in employee affordability, threatening retention, and forcing families into impossible choices. I urge the board to consider the devastating impact these rate hikes have on the household budgets of working families and to seek alternative solutions for financial sustainability

Public Comment Regarding PY2027 Premiums Proposal-

Dear PEBP Board Members,

I am writing to express my strong opposition to the proposed increase in health insurance premiums for Nevada state employees. This change would impose a severe financial burden on employees who are already struggling to keep up with rising costs.

For many employees, this increase would result in thousands of dollars in additional annual expenses. Such a drastic increase is not sustainable for employees who are already living on tight budgets.

Nevada state employees have already absorbed pay reductions through increased PERS contributions, and we have not received a cost-of-living adjustment (COLA) for the current biennium. Adding such a significant increase in health insurance premiums would exacerbate these challenges and could force employees to make difficult decisions about healthcare, housing, necessities, or even leaving state employment for the private sector.

While phased approaches have been suggested as an alternative, they are not effective solutions. With no planned COLA in the near future, employees will continue to face stagnant wages while costs rise. Even a gradual increase would still result in significant hardship without corresponding salary adjustments.

I will soon retire and will be on a fixed income. This burden would most likely return me to the job market at age 70. Seniors have contributed to society, paying taxes and have adjusted to every increase over the years. Every citizen deserves the right to have a comfortable life without the fear of deciding between healthcare and common expenses. Please do your diligence to protect us from undue hardships.

Thank you for your time and consideration.

Sincerely,
Leslie Martinez

Nevada State Employee

From: Amber Powell

I am writing to respectfully urge the Public Employees' Benefits Program to reconsider the proposed 133% increase in insurance premiums. An increase of this magnitude in a single year places an overwhelming financial burden on Nevada's public employees and their families, many of whom are already struggling with rising costs of living.

I recognize that PEBP is facing real financial pressures and that additional funding is necessary to maintain the stability of the program. However, there are more balanced and sustainable approaches than a one-time, triple-digit rate hike. I ask the Board to consider alternatives such as:

- Implementing **smaller, incremental increases** over multiple years rather than a single dramatic jump.
- Exploring **cost-sharing adjustments** that distribute the impact more evenly across plans and tiers.
- Reviewing **administrative efficiencies** or cost-containment strategies that could reduce the funding gap without shifting the entire burden onto members.
- Working with state leadership to identify **additional funding sources**, temporary subsidies, or phased-in solutions that protect both the program and the people it serves.

Public employees rely on PEBP for stability, predictability, and access to essential healthcare. A 133% increase all at once undermines that trust and risks pushing families into financial hardship or forcing them to forgo needed coverage.

I respectfully ask you to reconsider this proposal and pursue a more measured, collaborative solution that keeps PEBP financially sound without placing an unmanageable burden on Nevada's workforce.

Thank you for your time and for your commitment to serving the public.

Amber Powell

Gloria Jarvis

As public service workers, we keep our communities strong. However, rising health care costs and decreasing coverage are forcing us to choose between medical care and basic necessities. Workers cannot shoulder these cost increases alone.

We urge the Board to prioritize protecting our current coverage in the short term and to pursue meaningful structural changes in the strategic plan.

To: PEBP Board

Subject: Health Insurance Increases

Date: March 18, 2026

Dear PEBP Board,

As a State employee of Nevada. I am writing to you about the concerns we are facing for state employee health insurance increases. Unfortunately, this is not great idea to continue to impose higher health insurance rates on state employees, each year the insurance goes up, and services continue to get cut. I end up paying more out of my pocket for health care services. As state employees we already work for less money than in the private sector. We take more hits than regular employees with low pay and mandatory furloughs.

As a person who has an illness living on my income only taking more money out of my check is not feasible. Especially now with how our Country is with raising costs in everyday living expenses. Plus, we never got a cost of living raise last year. The way our salaries and health insurance are calculated is laughable. Working the for-state used to be great and each year it gets worse. I ask how much more do the state employees have to handle? It is not fair to keep raising health insurance for subpar care that costs workers more out of pocket expenses. The idea of taking away benefits is detrimental to me. I am considering removing state health insurance as it is no longer worth the money charged for healthcare services. I personally believe more workers will leave the state for better paying jobs with way better insurance benefits. PEBP needs to take a hard look at making sure it is taking care of the employees that hold up this state.

Please reconsider other options for the state employees when it comes to health insurance. Placing another high increase and taking away more benefits is not the answer to this problem. This issue needs to be addressed in open meeting at the Legislature. State officials need to find a better solution to this problem, instead of making the employees pay more money for less services. Please look at other alternatives, it is not our fault your books were not monitored correctly. The State employees should not have to pay for math errors made by companies who are paid to provide better services. All employees need to be notified way beforehand any actions are made on this critical issue when it comes to State employees' healthcare needs.

Thank you for your time and reconsideration.

Sincerely,

Janae Johnson

As public service workers, we understand the vital role we play in supporting our communities. We recognize that many of us are facing the difficult reality of rising healthcare costs and shrinking coverage, which often forces us to choose between essential medical care and other necessities. It's a heavy burden to bear alone.

We sincerely urge the Board to prioritize the protection of our current coverage in the short term. Additionally, we hope to see meaningful structural changes in the strategic plan that will provide lasting support for all workers. Together, we can navigate these challenges and strengthen our commitment to the well-being of our communities.

Corazon Fontillas

****Public Comment Letter for PEBP Board Meeting – March 19, 2026****

Leighan Schreiber

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

March 18, 2026

PEBP Board Members

Public Employees' Benefits Program

Nevada Health Authority

3427 Goni Road, Suite 109

Carson City, NV 89706

****Re: Public Comment Opposing Proposed Healthcare Premium Increases for Plan Year 2027****

Dear PEBP Board Members,

My name is Leighan Schreiber, and my wife has been a dedicated employee at the University of Nevada, Las Vegas (UNLV) for ten years. Through her employment, our family receives health insurance benefits through the PEBP program. We currently pay nearly \$400 per month for our family coverage. As a young and healthy couple, we have barely used these benefits over the years.

For the past couple of years, we have been trying to start a family. Unfortunately, our PEBP health plan does not cover the medical interventions [REDACTED]

[REDACTED] To pursue our dream of having a child, we have already gone into more than \$40,000 of debt to pay for these treatments out of pocket.

Last year, the Nevada Legislature passed Senate Bill 217, which would have required certain health insurers to provide coverage for infertility treatments and assisted reproduction, helping families like ours avoid these crushing costs. However, Governor Lombardo vetoed the bill, citing fiscal concerns and the burden of unfunded mandates (particularly on Medicaid). While we understand budget challenges, this decision has left state employees and other families without the insurance support needed for fertility care, effectively protecting insurance agencies from new requirements while hurting families who are already struggling to afford parenthood.

We are deeply concerned about the proposed premium increases for Plan Year 2027. Any rise in our monthly cost (whether through the full increase shown in the rate-setting documents for LDPPO or EPO/HMO plans, or even a phased amount) would place an even greater financial strain on our family right now. We are already stretched thin trying to afford the path to parenthood, and higher premiums would force us to divert money away from the treatments we need or delay our plans even further.

Living in Las Vegas adds to these pressures in ways that make every additional cost feel overwhelming. Nevada—and particularly Las Vegas—has some of the highest car insurance rates in the country, with full coverage averaging around \$335 per month and expected to rise further in 2026. Our rent has increased by about \$200 per month in the past year alone. Our energy bills from NV Energy keep climbing, and starting in 2026, new demand charges (and time-of-use structures) will make bills even higher during peak summer hours when air conditioning is essential in our hot climate. UNLV requires a significant portion of my wife's paycheck to go toward mandatory retirement contributions through PERS (around 19.25% employee share for regular members under the current plan), and the university also charges for staff parking (with annual permits around \$504 or monthly options at \$42). After accounting for healthcare premiums, rent, utilities, car insurance, retirement deductions, parking, and other essentials, there's barely anything left in our budget each month.

Our story is one of many families who are young, responsible, and trying to build a future while already facing high out-of-pocket healthcare costs and rising living expenses across the board. We respectfully urge you to choose options that minimize or phase in any premium increases, seek additional state support if possible, and protect employees like my wife who have given a decade of service.

Thank you for the opportunity to share our story and for your thoughtful consideration as you make these important decisions tomorrow.

Sincerely,

Leighan Schreiber

Spouse of UNLV Employee (10+ years)

David M Smith



3/18/2026

To: Public Employees Benefits Board Members

RE: 3/19/26 Public Meeting – Out of Pocket Maximum change for PY2027

I am writing to ask that you specifically consider the IRS limitation on HSA Contributions when setting the out-of-pocket maximum (OOP MAX) each year and also reconsider the increase for PY2027.

The latest change to raise the OOP Max completely wipes out a participants' ability to use tax free HSA funds for dental or eye expenses if they have a condition or issue that results in them reaching the OOP MAX for health care in a plan year.

The IRS Sets the maximum contribution for a single person participating in a high-deductible plan at \$4,400 (participants over 55 can add an additional \$1,000 for "catch-up" purposes).

While the plan provides an HRA/HSA contribution for a single person that helps offset this increase against medical costs, by raising the OOP MAX to \$5,000 without consideration to the cost-sharing to participants for the totality of of medical, dental and eyewear, the plan short-changes certain plan participants and costs them much more than the \$1,000 increase, because they lose the tax benefits of the HSA for other health care costs.

Health care, dental and vision costs continue to increase and losing the ability to reduce the tax burden for these expenses may have been overlooked by the Board when this decision was made.

I request that the Board reconsider its decision to raise the OOP MAX for PY 2027.

Sincerely,

David M Smith