



PUBLIC EMPLOYEES' BENEFITS PROGRAM

STRATEGIC PLAN

Updated: December 3, 2008

VISION STATEMENT:

To promote improved health status and access to quality care for all PEBP participants.

MISSION STATEMENT:

To design and manage a quality health care program so that all PEBP participants experience excellent service, responsiveness to changing benefit needs over career/life spans, equitable cost sharing, and fiscal soundness for long term viability of the program.

PHILOSOPHY STATEMENTS:

1. PEBP strives to be an innovative and forward thinking health benefit program
2. PEBP provides a quality health benefit program to our participants
3. PEBP believes that protection from catastrophic healthcare expense to the participant is core to the program
4. PEBP commits to participant satisfaction through program design and service delivery
5. PEBP Board members and staff possess managerial and financial expertise in the health benefits industry



PEBP Strategic Plan

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GOAL #1: To provide the best long term delivery systems, plan design, and financially sound rate structure.		
Objectives	Strategies	Performance Measures
1. Insure that the self-funded plan design is structured in such a manner as to include services associated with evidence based practices and the provision of medically necessary services.	a. Include provision(s) in the Master Plan Document that reflect the stated objective. The provision(s) should be written in a manner that allows for modification in covered services during the plan year without having to formally amend the Master Plan Document.	a. Complete review and update of Master Plan Document as necessary – May 2009
2. Insure that providers are of the highest quality and that reimbursement mechanisms recognize quality service from plan providers.	<p>a. Work with plan vendors and other industry groups to establish quality standards consistent with available industry benchmarks.</p> <p>b. Explore financial incentives or pay-for-performance arrangements related to PEBP participants.</p>	<p>a. Participate with Chartered Value Exchange Project to establish provider quality standards for application in Nevada. Provide Board information report by June 2009</p> <p>b. Present report to PEBP Board regarding such arrangements to be included in the PPO Network request for proposal – May 2009.</p> <p>c.</p>



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GOAL #1: To provide the best long term delivery systems, plan design, and financially sound rate structure.		
Objectives	Strategies	Performance Measures
3. Provide participants with the ability to obtain information regarding provider quality and provider use of new health information technologies.	<ul style="list-style-type: none"> a. Communicate informational items to plan participants, with sample questions to ask providers, about quality services and health information technologies. b. Provide information regarding quality standards developed per Objective #2. 	<ul style="list-style-type: none"> a. Establish a dedicated section of the newsletter regarding provider quality and health information technology - beginning Winter 2009. b. Establish and maintain web site content regarding quality standards – beginning January 2009.
4. Insure that provider services are accessible throughout the state.	<ul style="list-style-type: none"> a. Define the geographical access by provider specialty based upon industry benchmarks. b. Monitor provider access within the State of Nevada. c. Institute means for providers to self-report acceptance of new patients to PEBP. 	<ul style="list-style-type: none"> a. Adoption of geographical access standards by PEBP Board – February 2009. b. Design and implement provider access reporting to PEBP – September 2009 c. Provide self-reported data to PEBP participants via PEBP website – January 2010



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GOAL #1: To provide the best long term delivery systems, plan design, and financially sound rate structure.		
Objectives	Strategies	Performance Measures
5. Establish a rate setting process that is reliable, transparent, and documented.	<ul style="list-style-type: none"> a. Document methodology used to determine plan rates. b. Establish internal control procedures for quality assurance and management of data used in rate setting. c. Establish procedure by which prior period results are compared to original forecasts. d. Involve plan stakeholders in all considerations of benefit and cost containment options. 	<ul style="list-style-type: none"> a. Update Board Duties, Policies, and Procedures – each February. b. Update Board Duties, Policies, and Procedures – February 2009. c. Complete look-back analysis – each March. d. Conduct review and update with stakeholder input – each Fall
6. Establish contracting procedures that incorporate cost, quality, and participant satisfaction performance provisions.	<ul style="list-style-type: none"> a. Identify and take advantage of combined purchasing efforts whenever appropriate (intergovernmental and interdepartmental). b. Negotiate “most favored nation” terms in vendor contracts when deemed beneficial to all parties. 	<ul style="list-style-type: none"> a. Formally communicate with State of Nevada agencies and state and local governments in the Western United States to survey interest in combined purchasing projects – March 2009. b. Institute new procedure in all requests for proposals to determine vendor’s willingness to participate in “most favored nation” contract terms. Provide information to Board or Executive Officer as part of final vendor selection background information – 2009 requests for proposals.



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GOAL #2: Improve the wellness program so that it is more beneficial to self-funded plan participants		
Objectives	Strategies	Performance Measures
1. Design and implement a “pilot project” cardiac wellness program.	a. Conduct a second phase of the cardiac wellness pilot project with approximately 2,000 participants in the northern Nevada region.	a. Achieve 20% participation in the pilot project during the first 12 months of the program and report outcomes based upon established criteria – April 2010
2. Implement new initiatives to increase participant utilization of wellness benefits	<p>a. Emphasize PEBP’s wellness benefit in all participant communications.</p> <p>b. Implement new innovative and creative ideas for enhancing the use of PEBP’s wellness benefit.</p>	<p>a. Maintain the primary focus of PEBP’s newsletter to that of providing wellness information and issue wellness benefit “guides” to plan participants as part of the open enrollment material – Quarterly</p> <p>b. Present for Board consideration a new plan option that emphasizes wellness compliance with associated incentives for the participant – September 2009</p>



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GOAL #2: Improve the wellness program so that it is more beneficial to self-funded plan participants		
Objectives	Strategies	Performance Measures
3. Provide a self-funded plan design that emphasizes value based services that will enhance the wellness status of plan participants.	<ul style="list-style-type: none"> a. Recognize evolving medical practice initiatives that enhance the wellness status of plan participants. b. Review other plan designs on an ongoing basis that will help identify industry trends in wellness services and disease management efforts for implementation. 	<ul style="list-style-type: none"> a. Update Master Plan Document to allow for administrative adjustments to plan benefits that will allow for a streamlined recognition of new value based medical practice initiatives – May 2009 b. Annually review plan design with utilization management and plan consultant vendors to identify plan changes that recognize new value based medical practices.



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GOAL #3: Enhance customer service tools and communication efforts to provide stakeholders the ability to obtain accurate and timely information regarding the plan		
Objectives	Strategies	Performance Measures
1. Enable participants to obtain accurate and user friendly information regarding their benefits and financial obligations.	<ul style="list-style-type: none"> a. Implement a web-based process for participants to verify their enrollment status and to submit updates. b. Identify and assess health information tools and techniques. 	<ul style="list-style-type: none"> a. Complete first phase of user interface with Agency Representatives via web – April 2009. b. Implement frequently asked question and topic search functionality to plan description documents on web site – April 2009.
2. Improve quality of participant communications.	<ul style="list-style-type: none"> a. Incorporate a survey and evaluation component to the focus groups. b. Conduct annual customer satisfaction survey. 	<ul style="list-style-type: none"> a. Compile results of focus group evaluations and achieve year-over-year improvements – Each October b. Compile results of customer satisfaction surveys and achieve 5% improvement in level of participant response – Each October