City of Reno

Summary of Request for Qualifications (RFQ)

Medical & Dental Third-Party Administrator (TPA)

July 18, 2023



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City of Reno Request for Qualifications Introduction

Introduction

- ❖ This RFQ was released by City of Reno Purchasing on May 17, 2023 for a January 1, 2024 effective date.
- Three TPAs responded who met the minimum RFQ qualifications of having all major Reno hospitals included in the TPA's PPO network.
- ❖ The responding qualified bidders include Aetna, Anthem and UMR (United Healthcare).

Lockton's TPA Summary Comparison

Lockton Summary of TPA Responses

In our role as The City's employee benefits consultant, we completed an in-depth review of TPA RFQ submissions, as outlined in our summary below. Following our summary is a side-by-side comparison of bidder key responses abbreviated for clarity. Bidders also submitted proposals and exhibits, which are incorporated into this presentation.

Administrative Fees:

For purposes of comparison, Lockton calculated a composite cost for current TPAs, Hometown and Prominence, by blending their fees weighted by enrollment in each TPA. The Hometown/Prominence medical administrative fee is \$25.03 per Employee/Retiree per month, approximately \$703,000 annually. The current local hospital owned TPAs do not have national integrated PPO networks nor the depth of technical tools and capabilities, and their medical administrative fees are below market.

Overall annual medical TPA fees, based on 2,340 Employee/Retirees enrollees are as follows:

Current blended			
Hometown/Prominence	Aetna	Anthem	UMR
\$702,900	\$822,500	\$1,114,000	\$864,900

Aetna quoted a one-year fee with a 3% increase in years 2 and 3. Anthem quoted a one-year fee with a 2.7% increase in years 2 and 3. UMR quoted a 3-year fixed cost fee. TPA fees represent roughly 2% of The City's annual medical/rx/dental total health plan costs. The above medical administrative fees reflect the bulk of the overall cost including medical management and pre-authorization services. All TPAs, including current TPAs, have a variety of smaller fees such as dental administration, HSA services and other fees as outlined. These additional fees are quoted in slightly different ways; however, none are materially different or significant.

All three bidders can provide FSA and COBRA services as well as HSA plans to support the high deductible health plan. This would allow The City to consolidate benefit services to one vendor which would significantly simplify services and administration for both employees and City staff.

Lockton requested that bidding TPAs propose illustrative stop loss quotes. These costs are not included within this summary as they were for comparison purposes only, and current costs are lower than any quoted.

Integration with COR Outside PBM and Stop Loss:

The RFQ noted that The City has separate contracts with Prescription Benefit Manager (PBM) Maxor and separate Stop Loss contract with Voya and would be retaining these direct contracts. RFQ questions asked about set up and/or ongoing costs for retaining these direct contracts. The Data/Integration section indicates that Aetna has both set up and ongoing fees for outside PBM and Stop Loss coordination. Anthem lists a fee for an external PBM, however Anthem's proposal indicates that their proposed administrative fees would change if Anthem PBM is not included. Further, Anthem's proposal indicated that the administrative fee was not valid without use of Anthem's Stop Loss. UMR does not have separate fees for The City retaining outside PBM and Stop Loss Contracts.

References / Nevada Experience:

We requested references to determine if the TPA has current clients in Nevada. This indicates the TPA's knowledge of the healthcare market and confirms there are local clinical providers onsite in Reno hospitals for continuity of care. The three UMR references rated the TPA very highly. The one Aetna reference who responded rated Aetna very highly. Anthem chose not to provide references at this time.

Medical PPO Network and Discounts:

All three bidding TPAs provide solid and consistent responses in this area. All three have all primary hospitals in Reno and national networks to support out-of-state retirees. The average network discounts for all three TPAs are within a 2% range as shown in the Lockton Network Discount Analysis (Exhibit 1). This analysis, referred to in the industry as UDS, compiles discount data uploaded from all major national networks. The percentage discounts shown in our Exhibit are weighted utilizing zip codes of enrolled northern Nevada employees.

Top Utilized Providers:

The RFQ provided the TPAs with a list of the top utilized medical and dental providers and asked to indicate if each provider was in the TPA's network. Exhibit 2 provides a comparison of the Top Utilized Medical providers based on total plan paid claims over a recent 12-month period. All bidding TPA networks had at least 90% of top providers in their networks. Exhibit 3 provides a comparison of Top Utilized Dental providers based on number of paid claims over a 12-month period. All bidding TPAs have a similar number of PPO dentists in network.

The RFQ provided bidding TPAs with a list of all the states where The City has retirees residing. Given that most states had only a very small number of retirees, we asked only that the TPA indicate if their PPO networks had providers in most major metropolitan areas of that state. All TPAs indicated that their networks have providers in those states as indicated on Exhibit 4.

The City's current medical plans do not currently include Disease Management programs. However, all three TPAs have comprehensive programs should The City be interested adding programs in future years.

Employee Online Enrollment:

Bidding TPAs listed a number of methods for ongoing eligibility and enrollment. Aetna and UMR offer an option for employees to enroll and make changes online, however, Anthem does not offer this option.

High Deductible Health Plan and HSAs:

All three bidding TPAs have options for High Deductible Health Plans (HDHPs) integrated either internally or externally with Health Savings Accounts (HSAs). Currently only 45 COR employees participate in this HDHP/HSA medical plan, however, enrollment is certain to grow as employees become more familiar with the value and advantages of these plans. Any of these TPAs could administer the programs well.

Aetna offers an HDHP with a coordinated HSA using PayFlex allowing Single Sign On. Anthem manages HSA accounts using a Single Technology Platform. UMR offers either an integrated Single Sign On with Wex or would allow current HSA enrollees to retain the current Optum Financial HSAs.

Lockton's TPA Recommendation:

Please review each TPA's response to the final question, "Why is your organization uniquely qualified to replace The City's current TPAs?" on the last page of the questionnaire (slide 17).

All three TPAs have in depth capabilities to provide The City with improved health plan administration. In our review, based on all information provided, UMR would be the best choice for TPA for The City of Reno. We base this recommendation on UMR's overall pricing, simplicity and clarity in working with external vendors, demonstrated Nevada health care experience, and excellent references.

Administrative Fees

Aetna's fee was lowest, though it has a 3% increase in years two and three. UMR was 5% higher than Aetna, however, it was fixed for three years. Anthem's fee was 28% higher than UMR's and had a 2.7% increase for years two and three.

Integration with COR Outside PBM and Stop Loss

UMR is most flexible with no set up or ongoing fees for The City's outside PBM and Stop Loss vendors. Aetna has set-up and ongoing fees. Anthem notes fees on PBM, and the Anthem proposal states that quoted administration fees will change if an outside PBM or Stop Loss provider is used.

References / Nevada Experience

UMR provided three Nevada references which all rate UMR very highly. Aetna provided one Nevada and two Washington state public entities. The Nevada reference rated Aetna very highly, however, this reference is fully-insured, not using Aetna as a TPA. We did not receive responses from two Aetna Washington clients. Anthem chose not to provide references at this time.

Medical PPO Network and Discounts

All three TPAs documented comprehensive networks both in and outside Nevada, including all Reno hospitals, and very similar overall network discounts.

Top Utilized Providers

- Medical—all three TPAs matched at least 90% of top utilized providers
- Dental—all three have dental PPOs with similar in-network dentists as the percentages of current Guardian dental PPO

Employee Online Enrollment

Aetna and UMR can offer employee online enrollment systems while Anthem does not have an employee enrollment option.

High Deductible / HSA Options

TPA Questionnaire Responses

<u>-</u>			
	Aetna	Anthem	UMR
Administrative/Network Fees (PEPM Basis)			
Medical Administrative Service Fee Annual cost based on 2340 subscribers Current: Hometown/Prominence \$25.03 composite	29.29	39.69	30.80
\$702,900 Annual	\$822,500	\$1,114,500	\$864,900
Network Access Fee	Included	Included	Included
Claims Fiduciary	Included	Included	Included
Telehealth Fee	Included	Included	Included
Nurseline Fee	Included	Included	Included
Initial Standard ID Cards	Included	Included	Included
HSA Administrative Service Fee - Setup and Ongoing	\$0.95/PPPM and no set up fee	\$2.35	Current Optum HSA pricing or integrated WEX option at \$4.00 PPPM
COBRA Administrative Service Fee - Setup and Ongoing	\$0.30/PEPM with no set up fee	\$10.75 per qualifying event, \$10.75 per COBRA continuant. If you prefer a PCPM fee, Anthem can accommodate	\$1.05 PEPM
Other	Additional services outlined in proposal	Refer to the ASO Fee Sheet for a complete listing of services included in the proposed administrative fee, as well as those available for an additional fee	Refer to the UMR Proposal document for all quoted services, applicable fees and conditions
Medical Management Fees			
Utilization Management/Pre-Certification (Includes Maternity and Nurseline) - Assume PEPM	Included	Included	Included
Disease Management Fee - PEPM or per Case COR does not have DM programs at this time	Optional - \$735 per engaged member, per month for Aetna one Flex	Included in Anthem's Enhanced Foundational clinical package	Optional - \$3.85 PEPM
Data/Integration Fees (PEPM Basis)			
PBM Interface Fee	3rd-party Pharmacy data benefit accumulators (Set Up): \$5,000 3rd-party Pharmacy data benefit accumulators (Ongoing): \$0.60 is included in fee above	\$2.50 not included in Admin Fee above Proposal notes fees will change if PBM is not with Anthem	Included
Stop Loss Interface Fee	Monthly Reports to Third Party Stop Loss Vendor: \$4,600.00 Annual	Included Proposal notes Admin fee is not valid without Anthem Stop Loss	Included
Infolock Interface Fee	No Fee	No Fee	No Fee
Other File Feed/Integration Fees	Other fees possible for pharmacy data integration	12 annual standard electronic feeds are included in proposed pricing	Initial set-up fee - \$500
Dental			
Dental Administrative Service Fee PEPM	\$3.04	\$2.75 PCPM	\$2.61 PEPM
Dental PPO Access Fee PEPM	Included	\$0.00	\$1.25 PEPM
FSA			
FSA Administration Set Up Fee	Waived	None Listed	None Listed
Dependent Care PEPM	\$3.00 PPPM	\$3.40 PPPM	\$4.50 PPPM
Medical Reimbursement PEPM	\$3.00 PPPM	\$3.40 PPPM	\$3.50 PPPM

	Aetna	Anthem	UMR	
Credits				
Implementation Credit	\$50,000.00	\$25,000.00	\$20,000.00	
What can credit be used for?	Can be used for reasonable expenses applicable to the plan year for which they are offered		Implementation	
Paid to Client or Vendors?	Preferred method of payment is directly to the vendor	Client credit	Client credit	
Communication Credit	\$25,000 year 2 and 3 general allowance	No communication credit; however, Anthem offers a \$25,000 wellness credit	\$20,000.00	
Annual or One-Time?	\$25,000 year 2 and 3 general allowance	One-time	Annual	
What can credit be used for?	Can be used for reasonable expenses applicable to the plan year for which they are offered	Services provided by Anthem or an outside vendor	Wellness Programs	
Paid to Client or Vendors?	Preferred method of payment is directly to the vendor	Standardly reimburse the client but are willing to pay a vendor directly	Client or Vendor	
Claims Audit Credit		Payment or credit for claims audit not offered		
Additional Service Fees				
Replacement ID Cards	Included	Included	Included	
Summary Plan Description Development/Restatement	Included	Included	Included	
SBC/Benefit Summary/SPD/Amendments Development	Included	Included	Included	
Ad-hoc Reporting Fee	Will retain 30% of savings(?)	20 hours of ad hoc reporting included. The charge beyond 20 hours per year is \$150 per hour	10 hours of ad hoc reporting included. Thereafter, a cos of \$100 per hour will apply	
Integration with HRIS platform	Included	12 annual standard electronic feeds are included in proposed pricing	Included	
Employee Online Enrollment	Included Anthem does not have an online employee facing enrollment platform. Anthem offers an online option for employers that choose to enter enrollment directly into the system versus arranging for a file feed.		Included UMR has an online enrollment application	
Misc. Network Fees				
Out-of-Network Claim Management/Shared Savings Percentage	Aetna retains 37.5% of savings	Anthem retains 50% of savings	UMR retains 20% to 30% of savings. Cap per claim of 50k	
Shared Savings percentage retained by TPA	Aetna retains 37.5% of savings	Anthem retains 50% of savings of which the TPA will retain 2% of the 50%	UMR retains 20% to 30% of savings depending on the program selected	
Shared Savings Cap (% or \$ amount per claim)	No cap	No cap per claim	\$50,000 cap per claim	
Subrogation	Aetna retains 37.5% of savings on any recoveries	Anthem retains a 25% contingency fee on all recoveries	UMR retains 30% on any recovery	
Compliance Fees				
CAA and Transparency Regulations - Machine Readable Files and Mental Health Parity	No Surprises Act (NSA) claim administration fee (per NSA eligible claim): \$50 (NSA) Independent Dispute Resolution (IDR) initial fee (per arbitration case): \$350 (NSA) Independent Dispute Resolution (IDR) arbitration expenses (per arbitration case): ~\$200 to \$900+	At this time, Anthem does not anticipate a direct cost to the client for standard compliance with this provision, except for the surprise bill/IDR process. IDR fees may apply.	Currently, no separate additional administrative fees wi be applied to customer plans for CAA compliance including machine readable files and mental health parity. IDR fees may apply.	
Independent Review Organizations/Appeals	Enhanced Clinal Review Program: \$0.80	The administration fee is \$500 per case	UMR includes a set number of free external reviews Additional reviews will incur a fee	
Fee Guarantee				
If you are willing to guarantee fees for longer than 12 months, indicate the applicable fees and the guarantee period	Aetna's offer includes a 3% increase each year for the year 2 and year 3 of the 3 year agreement	Anthem has provided a multi-year proposal with a 2.7% escalator/increase for year 2 and year 3	UMR is offering a three (3) year fixed cost fee	
			LOCKTON COMPANIES 10	

-	Aetna	Anthem	UMR
References			
Company Name:	Lyon County School District	In an effort to respect the privacy of our current	Clark County
Contact Person:	Dawn Huckaby	clients, and to provide them with adequate	Geree Gonzales
City/State:	Yerington, NV	notification that they will be contacted by you, we	Las Vegas, Nevada
Phone #:	775-463-6800 x 10053	would like to defer providing contact information for	(702) 455-3172
E-mail address:	dhuckaby@lyoncsd.org	references until we are selected as a finalist. We call	Geraldine.Gonzales@ClarkCountyNV.gov
# of Enrolled	1,500	each client as a courtesy to provide the name of the	Approximately 15,000
Employees:		individual who will be contacting them. While we	
Description of service	Med, Dental, Vison	apologize for this inconvenience, be assured we	Medical/Dental Administration/network and Medical
provided:		would extend the same courtesy to you.	Management via Sierra Healthcare Options
Length of Service:	1/1/2021		5 years under HealthSCOPE Benefits – migrated to
			UMR in 2022
Company Name:	Kitsap County	In an effort to respect the privacy of our current	Station Casinos
Contact Person:	Alicia Hartnett	clients, and to provide them with adequate	Jaime Crozier
City/State:	Port Orchard, WA	notification that they will be contacted by you, we	Las Vegas, Nevada
Phone #:	360-307-4342	would like to defer providing contact information for	(702) 495-3528
E-mail address:	ahartnet@kitsap.gov	references until we are selected as a finalist. We call	Jaime.Crozier@StationCasinos.com
# of Enrolled	1,381	each client as a courtesy to provide the name of the	Approximately 6,700
Employees:		individual who will be contacting them. While we	
Description of service	Med, RX	apologize for this inconvenience, be assured we	UMR, OptumRx, SHO UM/CM, Total Population Health
provided:		would extend the same courtesy to you.	(HEW), Nurseline, Teladoc
Length of Service:	1/1/2019		Started with UMR 1/1/23
Company Name:	City of Seattle	In an effort to respect the privacy of our current	Washoe County
Contact Person:	Renee Freiboth	clients, and to provide them with adequate	Ashley Berrington
City/State:	Seattle, WA	notification that they will be contacted by you, we	Reno, Nevada
Phone #:	206-684-7833	would like to defer providing contact information for	(775) 328-2088
E-mail address:	renee.freiboth@seattle.gov	references until we are selected as a finalist. We call	aberrington@washoecounty.gov
# of Enrolled	21,000	each client as a courtesy to provide the name of the	Approximately 3,500
Employees:		individual who will be contacting them. While we	
Description of service	Med, RX, MA	apologize for this inconvenience, be assured we	Medical admin, network, utilization management, case
provided:		would extend the same courtesy to you.	management, dental admin
Length of Service:	1/1/2013		Effective 1/1/2023

PPO Networks	Aetna	Anthem	UMR
Please confirm your ability to administer the plans as they exist today.	plan designs and matched as closely as possible to the Aetna Dental PPO, Aetna Choice POS II and Aetna Choice POS II with Health Savings plans. Aetna's Benefit Review Document itemizes minor plan change recommendations.	effort to replicate current benefits as closely as possible within system limitations and state-approved benefit designs. Anthem has included a deviations	Confirmed. UMR can administer your submitted plan designs. The following may require manual intervention in certain areas that are not UMR's standard such as pre-cert penalties, transplants, DME, Barinet Bariatric, and a few others.
2 Describe your outside NV PPO Network in general relative to the outside NV zip code list. Tab 3 has the number of out of state retirees, including some actives (primarily residing just across the NV/CA border). Due to small enrollment counts in each area, we are not requesting a geo-access. Instead, in Tab 3 of this workbook, we ask you to indicate "Y" or "N" to the "widespread network access" in most major metropolitan areas for each state. It is not expected you have networks in small towns or rural areas.	Confirmed. Please see the completed Tab 3 for information on outside NV Networks.	hospitals participating in Anthem's network in Nevada, members enjoy access to Blue Cross and Blue Shield providers at in-network rates across the country. The City's employees will have access to more than 1.8 million providers across the country through the BlueCard® program, which offers the best provider discounts in the industry with a \$20 per member, per month (PMPM) savings advantage. Proposal states that Blue Card fees will be included in paid claim amounts for non-Anthem states.	management/care management team. This network includes approximately seven out of every 10 available physicians and nine out of 10 hospitals nationwide. It currently consists of over 730,000 physicians and 6,000 hospitals. Please refer to Tab 3 for outside NV networks results.
What is the average weighted discount (based on book of business utilization) in Reno, Nevada?	negotiated with providers to be proprietary. Fees are adjusted geographically and may also vary among providers in the same geographical area as determined by market considerations. The average cost savings generally reflected by our contracts and ranges include the following averages: Hospital IP 45%, Hospital OP 40%, PCP /Specialist 45%, Ancillary (e.g., lab, rad.) 50%, and Mental health 35%. The ranges provided are	UDS results Lockton receives from all carriers, the average discount in Reno is 63.3%. To ensure a true comparison across all carriers, we encourage continued use of UDS discount data for any financial	The average weighted discount (based on book of business utilization) in Reno, Nevada, is 58.2 percent. See Exhibit 1, Lockton Network Discount Analysis slide utilizing UDS national database based on employee zip codes in northern Nevada.
4 List any unusual in-network arrangements that would cause a provider to be innetwork for some claims, but out-of-network for others.		being quoted for the City, there are no unusual in- network arrangements where a contracted Anthem provider would be in-network for some claims and out-of-network for others.	Yes, UMR's behavioral health providers are contracted separately from our medical providers. As a result, it is possible for a provider to hold a contract with us for medical services and not behavioral health services, or vice versa. This could cause a provider to be in-network for certain claims and out-of-network for other claims.
5 Are the following three hospitals in Reno contracted with your network? Renown Hospital Renown South Meadows Medical Center Northern Nevada Medical Center - Sierra & Sparks	Yes Yes	Yes Yes	Yes Yes
different networks they are not? Please clearly define.	The hospitals listed show as PAR in the general categories of Aetna's products including: MC, HMO, EPO, and PPO.		Yes As a TPA, UMR works with other custom networks. In relationship to the network UMR is quoting for City of Reno, all are contracted.

See Exhibits 1, 2, and 3 for Network Discount Analysis, Top Utilized Medical Providers, and Top Utilized Dental Providers

Reporting and Disease Management	Aetna	Anthem	UMR
7 Please confirm comprehensive reporting and Ad hoc (at client request) will be no cost.	Aetna provides standard reports at no cost . The report package includes secure access to Analyze-Rethink-Transform (ART), a powerful analytic platform.	(CII) tool. When the CII tool does not yield the desired information, Anthem can provide additional generic and ad hoc reporting at no additional charge for most reports. A variety of more complex ad hoc reports can also be provided. For custom reporting requests, additional charges, if any, are determined by the complexity of the request, required production time, and frequency.	secure reporting tool, which provides authorized users with the option to create, customize, schedule and run on-demand reports. Report types include paid claims, benefit utilization, financial activities, network performance, enrollment and more. Data is updated daily with a lag of two business days.
Disease Management: Please submit detail on your disease management program and list the conditions monitored. The condition of the co	Our care advocates develop a customized approach to address their conditions. This personalized approach helps ensure we're meeting our members where they are in their health care journey. Aetna's One Flex program is grounded in member data that goes well beyond claims, taking into account a complete view of all the factors that influence a member's health such as their prescriptions, where they reside, their specific care plan, social determinants of health and their individual attitudes toward receiving care based on previous engagements. Our program also utilizes advanced machine learning and analytics to optimize care advocate outreach that's informed by what we know about our members and how others like them think and respond to their care needs and options. The underlying algorithm our program uses provides predictive modeling and brings together a diverse set of information and data to best identify members for participation in the program and put them on a path toward behavior change and better health. Personalized engagement: Aetna's care advocates use an integrated dashboard that helps them focus on high risk	is a core component of our proposed ASO Enhanced Foundational Package offering to the City. Enhancement is available and would include the following 3 additional condition management programs; MSK, Low Back Pain & Vascular. With the ConditionCare disease management program, members with asthma (pediatric and adult), diabetes (pediatric and adult), heart failure (HF), coronary artery disease (CAD), and chronic obstructive pulmonary disease (COPD) have a direct opportunity to maximize their health state and control their healthcare expenses. ConditionCare will provide each City employee with the most appropriate level of targeted interventions through an individualized CarePlan. Our program focuses on more than the condition, but also addresses comorbidities, behavioral health issues, family dynamics, financial and social issues, and each participant's motivations. Community-connected care addresses health-related social needs through cost-effective, evidence-based, sustainable interventions and social support care coordination. Using sophisticated predictive modeling tools, Anthem will stratify City employees into low-, medium-, and high-acuity levels. All members receive introductory material that provides condition-specific education. For those moderate- and high-risk individuals requiring a higher level of management, we provide a care manager to work one-on-one with the member to achieve the goal of	manages chronic conditions through member education, closing gaps in care and continued assessment. UMR has found that customers receive the maximum value by managing high-cost conditions that have a significant prevalence in most populations. By addressing gaps in the comprehensive, evidence-based standards of care for these ongoing conditions and modifiable risk factors, members can achieve improved clinical outcomes, quality of life and reduced health care costs related to complications from poorly managed conditions. These conditions include: Respiratory Disorders: Asthma (children and adults), chronic obstructive pulmonary disease (COPD) Cardiovascular Disorders: Heart failure (HF), coronary artery disease (CAD), hypertension Industry disease (CAD), hypertension

Enrollment and HDHP/HSA	Aetna	Anthem	UMR
system allowing employees to enroll/change directly through your system, and how this could electronically transfer enrollment data to The City of Reno?	Aetna can accept and process eligibility data in any of the following methods: - Internet-based enrollment systems - With EZenroll®, our online enrollment application, customers can perform several enrollment functions online, including additions, changes, terminations and PCP selection. - EZLinkTM, a fully integrated, web-based benefits administration service, links to our enrollment and billing systems and provides online eligibility, account maintenance and billing. It supports Aetna-initiated electronic funds transfer or customer-initiated wire transfer. - In addition, EZLink allows you to leverage Employee Self Service to allow eligible employees to manage their own life event and open enrollment activity. EZLink streamlines many benefits functions saving time and simplifying administration. - Internet-based eligibility transfer solution - SecureTransportTM allows you or your vendor to transmit eligibility files to us during open enrollment and for ongoing updates. SecureTransport is a trademark of Axway(used under license.) - Electronic transport method - you can submit eligibility through any number of electronic transport methods. Depending on what method is used, we can accommodate secure Internet FTP and EDI ANSI X12 formats.	enrollment platform, we do offer an online option for the City to enter enrollment directly into our system as part of Anthem's reimagined benefits management through personalized tools for employers. To that end, the EmployerAccess online tool and app is your one-stop destination for news and plan administration. Anthem's EmployerAccess application offers: • A secure digital solution – A dashboard to enroll employees, make eligibility changes, and view or pay your Anthem bill • An interactive, personalized dashboard – to quickly navigate your tasks, the latest news, or your transaction history • Support features - including live chat, frequently asked questions, a self-guided tour to help first-time users, and an Employer Resource Center with curated materials to help your employees understand their benefits. • Client Information Insights reporting tool – makes it easy	UMR can receive eligibility information through electronic submission, Internet enrollment or paper forms. The most efficient and accurate methods are Internet enrollment or electronic submission. To maintain data integrity, Internet enrollment and electronic submission are exclusive of one another. If a full electronic file cannot be provided, UMR can accept an Excel file for the initial eligibility load only. Ongoing eligibility updates can be done using our Internet enrollment process. INTERNET ENROLLMENT Employees can submit enrollment and changes online via a UMR enrollment application PAPER FORMS UMR uses a standard enrollment form for paper submissions. Any deviations from this form must be approved by UMR. Forms are submitted to the enrollment services department and loaded by a specialist. All changes and updates must be submitted using this form.
HDHP/HSA			
Do you have an HSA integrated on a common platform with your HDHP?	Yes. Aetna HealthFund HSA administered by PayFlex integrates member website and mobile app with omnichannel contact support for email, chat and text.	Yes. Anthem administers and manages our Health Savings Accounts (HSAs) using a single technology platform.	Yes. Members can manage and maintain their investments online through the UMR portal. UMR provides an employer portal to customers that elect the UMR HSA. Client may maintain the current Optum Financial HSA or move to UMR's WEX HSA which is fully integrated.
	Yes. PayFlex's integrated experience also includes Single Sign-On (SSO) capability, so members can access medical claim activity through our member website and easily navigate to review HSA balance and transition activity through PayFlex.	HSA recordkeeping features. In addition, this platform is integrated with the medical platform for a robust and enhanced employee experience. All real-time features are enabled on anthem.com as well as our mobile app.	The HSA is fully owned by the member, all account information is provided directly to the member. Access to account balances, transaction detail and investment earnings is provided through web portal, customer service center and detailed member account statements. Utilizing the existing Optum Financial site would involve a separate sign on for HSA access. Utilizing the integrated WEX site would involve a single sign on.

HDHP/HSA	Aetna	Anthem	UMR
If yes, can they obtain reports on demand?	- Create and download reports in PDF or CSV format,	contributions submitted within a specified date range • HSA Customer Identification Program Aging Report	(via the WEX employer portal) to run on demand i.e., the enrollment report and the HSA account detail report. UMR provides an employer portal to customers that elect the UMR HSA. Capabilities on the employer portal include: HSA employer reporting - account detail report, plan funding notification, funding collection notification
to use?	Yes. The PayFlex mobile app provides members with easy, secure access to their accounts on the go. It's available as a free download for iPhone ® and iPad ® mobile digital devices, as well as Android™ smartphones.	Yes	Yes. UMR supports members who prefer mobile access to their health benefits information in two ways: ■ The UMR App: The UMR app helps members stay up to date with their latest claims and account balances. Registered users can sign in anytime to view benefits information, find network health care providers, view or order copies of their ID cards and contact UMR via chat or secure messaging. ■ Mobile Web: Members who are registered on umr.com also have access to the full functionality of their member portal through a mobile-responsive website. Users can place a bookmark icon on their device's home screen for easy, frequent access.
online app?	Yes. Through the member website, members can download a report of all transactions, as well as view receipts, documents, and expenses. We provide a spending snapshot which separates transactions by expense types.	Yes. Members can go to anthem.com or use the mobile app to upload and store receipts for recordkeeping or reimbursement.	UMR offers an option to reimburse the member with HSA funds directly for any eligible medical expenses they have paid out of pocket. Members can submit requests online, with the app, or use a withdrawal form if they do not use the debit card provided.
			Outsourced. UMR partners with WEX Health Inc., an industry leading debit card processor, HSA custodian and system vendor for account-based benefit administration.
			LOCKTON COMPANIES 15

HDHP/HSA	Aetna	Anthem	UMR
	PayFlex is the administrator, custodian and trustee of our HSA administration. Aetna built the HSA administration and account management technology platform from the ground up. Employers and employees make initial contributions to an interest-bearing FDIC-insured deposit account within our HSA. In managing the HSA deposit account, PayFlex will invest with several money-center banks such as Citibank, Goldman Sachs, and others. Our HSA investment platform partner is Bank of New York Mellon, and the investment adviser acting as fiduciary to our investment menu is Lockwood Advisors, Inc.		WEX Health Inc. is the HSA custodian and system vendor for account-based benefit administration. UMR's core processes for administering consumerdriven health (CDH) programs are handled internally. UMR's claim staff pays claims for the underlying medical plan in a CDH design, as well as flexible spending account (FSA), health reimbursement account (HRA) and HSA benefits. The UMR service center model allows internal team members to service inbound consumer calls and process/adjust claims.
8 What is the threshold for investment in the HSA (in dollars)?		funds into the investment options.	UMR has a range of investment options with a minimum account balance of \$2,000 which must be met and maintained prior to being able to elect the investment option. Once the account holder has entered into the investment options, they can manage their investments through UMR's online processes.
from their current HSA vendor?	transactions have been paid and, for members with checkbooks, that all checks have been cleared. Members also receive seamless support from member services and PayFlex teams. These teams are well educated on this process and collaborate closely to	employees and helps you through the process. Our Implementation team manages the transfer process from prior HSA administrators and custodians to our offering. We offer multiple methods for transferring balances; our team will explore these options with you	UMR has an established process for transferring accounts and would be able to help members understand the process and facilitate a smooth experience for account holders. Member consent is required to transfer accounts to a different financial institution. Members may choose to retain their current HSA banking relationship.

TPA Summary / Performance Guarantee Offers

Please provide a concise one paragraph summary indicating why your organization is uniquely qualified to replace The City of Reno's current TPAs. If possible, provide 2-3 quantifiable performance quarantees.

TPA Summary Response

We know your health benefits are a crucial part of recruiting and retention. When we work together, you have a partner committed to your goals and success. You will have unrivaled access to seamless integrated medical and dental care, strong account stewardship, and a plan prepared exclusively for you with:

- One comprehensive local and national network to provide seamless coverage for your employees and their dependents wherever they go
- 20% of fees at risk for service guarantees, like implementation and account management satisfaction 20% of fees at risk to guarantee your costs, either through a claim target or discount guarantee Strong financial offering

Aetna is prepared to embark on this journey with the City of Reno. Let's create better health together.

what is possible and to deliver employer solutions that enhance care while reducing cost and administrative burden while promoting an effective nealthcare strategy that reinforces innovation, ntegration, and collaboration through:

- Your Account Management team from big-pictur strategy to small-detail implementation. We will support your goals every step of the way bringing your healthcare vision to life with continuity, flexibility, and expertise;
- virtual solutions, advanced analytics, and innovative delivery;
- Collaborative expertise with our network advantage balancing the needs of accessibility, personal choice, and affordability through our broad national network, collaborative partnerships, and strong provider relationships; and,
- Enhanced Personal Health Care Holding Providers | benefits (EOB) statements and check individual Accountable for Cost and Quality Outcomes in Nevada through value-based care with the goal of radically shifting the current payment parad \dot{q} gm away \dot{q} UMR is offering claims and account management from fee-for-service to fee-for-value.

As your trusted partner, Anthem is here to reimagine Our Nevada based account management, network, clinical, analytics, and operational teams are experts in healthcare in Nevada and will partner with the City and vour consultant to deliver a best-in-class benefit offering to the City of Reno employees and their families. Our medical management solution is staffed locally in Nevada where we have nurses physically located in most Nevada hospitals conducting daily rounds on patients. Our 24/7/365 Access Center is available for patients and their families and providers to connect at any time of day with a registered nurse. A transformative digital-first experience – providing We have an extensive background working with large groups, including those represented by multiple product designs that simplify and enhance healthcare bargaining units, such as labor organizations and state, county, and city customers. Our approach is custom tailored for each of our customers. Members can access their claims and benefits information anytime on their desktop, tablet or mobile devices. Our online services make it quick and easy to look up network providers, view recent claims and explanation of coverage and out-of-pocket amounts.

> performance guarantees. A total of 15% of fees at risk based on meeting the targets listed below. Details in proposal.

Financial accuracy: 99% Payment accuracy: 98% Procedural accuracy: 95% Turnaround time, 10 business days or less: 90% Percent abandonment rate: 3% or less Average speed of answer: 30 seconds Positive customer survey rate: 90%

Exhibits

Exhibit 1 – Lockton Network Discount Analysis

Blinded Summary Employees in Blend

City of Reno

Historical Adjusted and Projected Discounts with Normative IX/OX

1	Carrier 1	2 Carrier 2	3 Carrier 3
Hist:	-61.2%	-60.8%	-59.5%
Proj:	-62.5%	-62.1%	-61.1%

Normative IX/OX assume a -30% discount for IX/OX across all carriers.

Reported Discounts have a +/- 2% margin of error due to factors such as variations in provider mix and service mix.

REQUIRED DISCLAIMER IN ALL PRESENTATIONS:

Proprietary information containing trade secrets and/or commercial and financial information exempt from disclosure under any applicable state or federal law including without limitation the federal Freedom of Information Act (5 U.S.C. § 552) and similar state laws.

You, the Recipient, accept this Report imposes on you a duty to keep it confidential and acknowledge that the information included in the Report is highly confidential to the carrier and intended solely for the Recipient and, as such, cannot be distributed to any third party without Lockton's express written consent.

Exhibit 2 - Top utilized medical providers

Medical

Top 50 Utilized Providers: By Total Paid

Paid Medical Claims Between January - December 2022			Anthem	UMR
Provider	Claim Count		PPO	_
Fiovidei	Claim Count	~	Y/N 🔻	~
RENOWN REGIONAL MEDICAL CENTER	7088	Υ	Υ	Υ
RENOWN SOUTH MEADOWS MEDICAL CENTER	1029	Υ	Υ	Υ
REGENTS OF THE UNIVERSITY OF CA DAVIS	13	Υ	Υ	Υ
RENO ORTHOPAEDIC SURGERY CENTER LLC	113	Υ	Υ	Υ
RENOWN REGIONAL MEDICAL CENTER	47	Υ	Υ	Υ
PRIME HEALTHCARE SERVICES RENO LLC DBA ST MARYS REG MED CTR	229	Υ	Υ	Υ
SPARKS FAMILY HOSPITAL INC DBA NORTHERN NEVADA MEDICAL CNTR	117	Υ	Υ	Υ
TAHOE FOREST HOSPITAL DISTRICT	45	Υ	Υ	Υ
JOHN MUIR HEALTH DBA JOHN MUIR MEDICAL CENTER CONCORD	2	Υ	Υ	Υ
TAHOE FOREST HOSPITAL DISTRICT	3	Υ	Υ	Υ
RENO ORTHOPAEDIC SURGERY CENTER LLC	44	Υ	Υ	Υ
CARSON TAHOE REGIONAL MEDICAL CENTER	153	Υ	Υ	Υ
SINGH, TEJVIR	17	Υ	Υ	Υ
SPARKS FAMILY HOSPITAL INC DBA NORTHERN NEVADA SIERRA MEDICA	25	Υ	Y	Υ
SUNRISE HOSPITAL & MEDICAL CENTER LL	1	Υ	Υ	Υ
JOHN A SHIELDS MD STEVEN A SCHIFF MD	15	Υ	Υ	Υ
OPTION CARE HEALTH	91	Υ	Υ	Υ
SPARKS FAMILY HOSPITAL INC DBA NORTHERN NEVADA MEDICAL CNTR	3	Υ	Υ	Υ
REGIONAL EMERGENCY MEDICAL SERVICES	68	Υ	Υ	Υ
UNIVERSITY OF CALIFORNIA IRVINE DBA UCI MEDICAL CENTER	30	Υ	Υ	Υ
BANNER CHURCHILL COMMUNITY HOSPITAL	17	Υ	Υ	Υ
CAROMONT REGIONAL MEDICAL	5	Υ	Y	Υ
SURGERY CENTER OF RENO	36	Υ	Y	Υ
JOHN A SHIELDS MD STEVEN A SCHIFF MD	20	Υ	Y	Υ
BOWMAN, AARON	13	Υ	Y	Υ
JOHN A SHIELDS MD STEVEN A SCHIFF MD	28	Υ	Y	Υ
PLACENTIA LINDA HOSPITAL INC	7	Υ	Y	Υ
REACH AIR MEDICAL SERVICES LLC	1	Υ	Y	Υ
CARSON TAHOE REGIONAL HEALTHCARE	52	Υ	Y	Υ
JOHN MUIR MEDICAL CENTER	4	Υ	Y	Υ
AMBIKA, SANTHOSH	12	Y	Y	Y
NEW METHOD WELLNESS INC	32	N	Y	N
PRIDE MEDICAL SPA AND WELLNESS CENTER INC	77	Y	Y	Υ
JOHN A SHIELDS MD STEVEN A SCHIFF MD	23	Y	Y	Y
JOHN A SHIELDS MD STEVEN A SCHIFF MD	80	Y	Y	Ү
SOUTHERN MONO HEALTH CARE DIST DBA MAMMOTH HOSPITAL	1	Y	Y	<u>.</u> Ү
WASHOE BARTON MEDICAL CLINIC	38	Y	Y	<u>.</u> Ү
SPARKS FAMILY HOSPITAL INC	27	Y	Y	<u>.</u> Ү
UROLOGY NEVADA LTD DR GHOIDOIAN	68	Y	Y	Y
EDWARDS AND VON RAVENSBERG PROF LLC	413	Y	Y	N
STACEY HUDSON MD	59	N	Y	Y
STANFORD HEALTH CARE	13	Y	Y	Y
ERIN CHAPEL CPC	350	Y	Y	Y
LEIF L ROGERS MD	4	Y	N	N
MEASE DUNEDIN HOSPITAL	2	<u>т</u> Ү	Y	Y
VHS SAN ANTONIO PARTNERS LLC	1	<u>т</u> Ү	Y	Y
MISSISSIPPI BAPTIST MEDICAL CENTER INC	69	Y	Y	<u>ү</u> Ү
CEDAR PARK HEALTH SYSTEM LP DBA CEDAR PARK REGIONAL MEDICAL	3	Y	Y	Y
RGH ENTERPRISES INC	3 121	Y	Y	<u>ү</u> Ү
	6	<u> Ү</u> Ү	Y	<u>ү</u> Ү
REDDY, SURESH V	Ь	Y	Y	Y

Exhibit 3 — Top utilized dental providers

Dental

Top 50 Utilized Dent By Total Paid	al Providers:	Current Guardian Network	Aetna	Anthem	UMR
Provider 🔻	Claim Count	<u></u>	PPO	Y/N	¥
STOKER, NICOLE M	366	Υ	Υ	Υ	Υ
GANNAM, CAMILLE V	177	Υ	Υ	Υ	Υ
CHAMPAGNE, ANDREW R	175	Υ	Υ	Υ	Υ
GAROL, WHITNEY E	138	Υ	Υ	Υ	Υ
PITTS, ARNOLD C	118	N	N	N	N
FOLGNER, DONALD K	109	Υ	Υ	Υ	Υ
DAVIS, BRADLEE	100	Υ	Υ	Υ	Υ
WILDE, BLAKE	98	Υ	Υ	Υ	Υ
WELMERINK, ADAM D	98	N	N	N	N
SILVAROLI, PATRICK	98	γ	Υ	Υ	Υ
PRINCE, KENNETH B	97	N	N	Υ	Υ
BRUNTZ, LANCE Q	95	N	N	N	N
BOCCHI II, JOHN L	91	γ	Υ	Υ	Υ
DEAN, ERIC	87	Υ	Υ	Υ	Y
LINK, JARED A	83	Υ	Υ	Υ	Y
NEUGEBAUER, BRADY	83	γ	Υ	Υ	Υ
STRUBY, BRIAN D	82	γ	N	Υ	Υ
LEE, MONICA T	80	Υ	Υ	Y	Y
ESCOBAR, ERIC	80	Υ	Υ	Y	Y
CERCEK, MEGAN M	79	γ	Υ	Υ	Υ
OGARA, J MICHAEL	78	Υ	Υ	Y	Y
WALTON, DANIEL K	76	Υ	N	Y	Y
ANDREWS, KEVIN J	75	N	N	N	N
AMARAL, MELISSA	69	N	N	N	N
BANKS, JAKE H	68	Υ	Υ	Υ	Υ
EISSMANN, GREGORY R	64	N	Υ	N	Y
SALA, JASON L	62	Υ	Υ	Υ	Υ
GILMAN, MICHAEL S	59	N	N	N	N
HEINEN, MARGARET	59	γ	N	Υ	Υ
PRINCE, KENNETH B	58	N	N	Υ	Υ
BANKS, JAKE H	56	Υ	Υ	Υ	Υ
GLOVER, JOEL	56	N	N	N	N
WOOLLEY, JOSHUA	54	Υ	Υ	Υ	Υ
HERRERA, MICHAEL JAMES	54	N	N	N	N
THOMAS, MARC A	53	N	Υ	Υ	Υ
KANELLIS, MICHAEL E	48	N	N	N	N
BRUNELLI, ANTHONY M	45	γ	Υ	Υ	Υ
FUTCH, SCOTT	40	Υ	Υ	Υ	Υ
VONG, ROBERT	39	Υ	Υ	Y	Y
DEBRUIN, TOMAS G	37	Υ	Υ	Υ	Y
KNAPP, CHRISTINA	36	Y	Y	Y	Y
ROBINSON, STEVEN D	31	N	N	N	N
MCEVOY, ERIN	31	Y	Y	Y	Y
WALTON, DANIEL K	30	Ϋ́	N	Y	Y
FUGETT, MINDY MICHON	29	N	N	N	N
GALEA, CHRISTOPHER J	24	Y	Y	Y	Y
FULLMER, SPENCER	22	Y	Y	Y	N N
JONES, MELISSA S	22	N	N	N	N
MUFF, DANIEL FREDERICK	19	Y	Y	Y	Y
KANG, JAMES	17	Y	Y	Y	Ϋ́
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Guardian	Aetna	Anthem	UMR
32%	36%	26%	26%
Non-PPO	Non-PPO	Non-PPO	Non-PPC
Dontists	Dontiete	Drovidore	Drovidor

Exhibit 4 — Out-of-state network providers for retirees

Outside NV - Actives & Retirees

	Medical			
	Aetna	Anthem	UMR	
State Employee	Does yo	ur national	network	
Count	include providers in major			
	metropolitan areas of this			
	state?			
AL 2	Υ	Υ	Υ	
AZ 7	Υ	Υ	Υ	
CA 48	Υ	Υ	Υ	
CO 1	Υ	Υ	Υ	
FL 12	Υ	Υ	Υ	
HI 1	Υ	Υ	Υ	
ID 11	Υ	Υ	Υ	
LA 1	Υ	Υ	Υ	
ME 1	Υ	Υ	Υ	
MO 1	Υ	Υ	Υ	
MS 1	Υ	Υ	Υ	
MT 3	Υ	Υ	Υ	
NC 4	Υ	Υ	Υ	
ND 1	Υ	Υ	Υ	
NM 2	Υ	Υ	Υ	
NY 1	Υ	Υ	Υ	
OR 3	Υ	Υ	Υ	
SC 2	Υ	Υ	Υ	
TN 7	Υ	Υ	Υ	
TX 13	Υ	Υ	Υ	
WA 6	Υ	Υ	Υ	
WI 1	Υ	Υ	Υ	
WY 1	Υ	Υ	Υ	

Dental						
		Aetna	Anthem	UMR		
State	Employee	Does yo	ur national	network		
	Count	include	include providers in major			
		metrop	metropolitan areas of this			
		state?				
AL	1	Υ	Υ	Υ		
AZ	13	Υ	Υ	Υ		
CA	63	Υ	Υ	Υ		
CO	1	Υ	Υ	Υ		
FL	12	Υ	Υ	Υ		
HI	1	Υ	Υ	Υ		
ID	13	Υ	Υ	Υ		
LA	2	Υ	Υ	Υ		
MA	1	Υ	Υ	Υ		
ME	2	Υ	Υ	Υ		
MN	1	Υ	Υ	Υ		
MO	2	Υ	Υ	Υ		
MS	3	Υ	Υ	Υ		
MT	3	Υ	Υ	Υ		
NC	4	Υ	Υ	Υ		
ND	1	Υ	Υ	Υ		
NM	2	Υ	Υ	Υ		
NY	1	Υ	Υ	Υ		
OR	4	Υ	Υ	Υ		
PA	1	Υ	Υ	Υ		
SC	2	Υ	Υ	Υ		
SD	1	Υ	Υ	Υ		
TN	9	Υ	Υ	Υ		
TX	13	Υ	Υ	Υ		
VA	1	Υ	Υ	Υ		
WA	10	Υ	Υ	Υ		
WI	1	Υ	Υ	Υ		
WY	3	Y	Υ	Υ		

