

**ADDENDUM PG**  
**PERFORMANCE GUARANTEES**

The Performance Guarantees described herein shall apply to the Administrative Services Agreement (the "Agreement") to which this Addendum is attached and have the same force and effect as the Agreement's most current Fee Schedule, unless amended, replaced, or terminated by the parties to the Agreement in writing.

All obligations, definitions, terms, conditions, promises, agreements, and language in the Agreement and its most current Fee Schedule apply equally to the obligations, terms, conditions, promises, agreements, and language in this Addendum PG and its most current Exhibit-PG.

**SECTION I**  
**TIMING**

- A. The period for which the Claim Administrator's performance will be measured and for which Employer may receive a refund is referred to as the Settlement Period and is indicated on the most current Exhibit-PG.
- B. The measurement of Performance Guarantees will begin on the date indicated on the most current Exhibit-PG provided all of the requirements listed below are completed. The requirements are as follows:
  - 1. Benefit information and claims administrative procedures have been provided by Employer to the Claim Administrator,
  - 2. All accumulation totals, if applicable, have been received from the prior carrier and have been loaded onto the Claim Administrator's claims processing system,
  - 3. Accurate and complete membership information has been received and loaded onto the Claim Administrator's claims processing system, and
  - 4. Transfer Payment procedures have been established in accordance with the Agreement.

**SECTION II**  
**DETERMINATION**

- A. The Claim Administrator agrees to guarantee performance levels as indicated on the most current Exhibit-PG. In the event that the Claim Administrator's level of performance is determined to be less than any of the standards described in the most current Exhibit-PG during a Settlement Period for which the Claim Administrator's performance shall be evaluated for any reason, except any disaster or epidemic which substantially disrupts the Claim Administrator's normal business operation, the Claim Administrator will be responsible for reimbursing Employer a portion of the Administrative Charge.

- B. The Claim Administrator will measure Performance Guarantees and report the measurement results to Employer, and any refund amounts due in accordance with this Addendum PG within 120 days following the close of all measurement periods necessary to finalize Performance Guarantee results for the Settlement Period.
- C. The Claim Administrator will not be obligated to measure Performance Guarantees and will not be obligated to refund Employer based thereon until the Administrative Services Agreement (including the most current Exhibit-PG) has been executed and is on file with the Claim Administrator by the close of the applicable Settlement Period.
- D. The Claim Administrator will not be obligated to measure Performance Guarantees and will not be obligated to refund Employer based thereon for any portion of the Settlement Period in which the Employer:
  - 1. Fails to provide the Claim Administrator with Timely changes in enrollment or membership information or any other reports or information as may be necessary for the Claim Administrator to perform its administrative duties, including but not limited to identification or certification of claimants eligible for benefits, dates of eligibility, number of employees and dependents covered under the Plan; or
  - 2. Fails to pay Administrative Charges in accordance with the terms of the Agreement or comply with all established Transfer Payment procedures.
- E. The Claim Administrator will not be obligated to measure any Performance Guarantee impacted by changes requested in writing by Employer during the time period required to modify the Claim Administrator's system and to complete all other tasks necessary to achieve the same qualitative standard of execution that existed before the change was requested. All changes or amendments to the Plan must be submitted to the Claim Administrator in accordance with the Agreement.
- F. If for any reason there is a significant change in the benefit structure or the administrative procedures of the benefit coverage administered by the Claim Administrator, Medicare payment systems, or if the enrollment of the Plan's benefit coverage administered by the Claim Administrator varies in number of enrolled Covered Employees as indicated in the most current Exhibit-PG attached to and made a part of this Addendum during any Settlement Period, the Claim Administrator reserves the right to re-evaluate and renegotiate the level of performance and/or the Administrative Charges at risk in this Addendum PG and the attached Exhibit-PG.
- G. If for any reason the Agreement is terminated prior to the end of any Settlement Period, the Performance Guarantees will not be measured and Employer will not receive any refund, based on that part of the Settlement Period in which the Administrative Services Agreement was in effect.
- H. If (i) changes to the formula, methodology or manner in which a third-party benchmark (such as AWP) is calculated or reported take effect, or (ii) such third party ceases to publish such benchmark, then the performance guarantees and/or standards based on such benchmark in this Agreement, if any, shall be re-evaluated and adjusted or converted to an alternative benchmark by Claim Administrator or its designee at the time of such change to return the parties to their respective economic positions with respect to such guarantees and/or standards as they existed under the Agreement immediately prior to such change.

**EXHIBIT-PG**  
**EMPLOYER NAME: CITY OF OKLAHOMA CITY**  
**Employer Account Number: 019574**  
**Employer Group Numbers: 019574 & 293447**  
**Effective for the Settlement Period beginning January 1, 2025, through December 31, 2025**

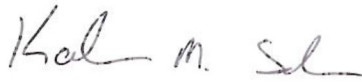
Performance guarantees are contingent upon adherence to the terms and conditions of Addendum-PG to which this Exhibit is attached and maintaining an enrollment in the Plan medical benefit coverage administered by Claim Administrator of not less than **4,406** Covered Employees, based on a total of **4,895** contracts. Performance measurement will begin **January 1, 2025**. Performance Guarantees are measured and settled annually based on Wellbeing Management's book of business.

<b>WELLBEING MANAGEMENT (WBM) – Enable</b>	<b>Defined Performance Guarantees</b>	<b>Performance Guarantee</b>	<b>Percentage of the WBM Enable Administrative Charge at Risk</b>
Engagement	<p><b>Outreach Rate</b> is defined as the number of members identified as candidates for Clinical Program Participation that received one or more contact attempts to the subscriber's household.</p> <p>Measurement: Total number of identified Clinical Program Participation candidates that received one or more contact attempts over number of total Clinical Program Participation candidates with complete contact information. Members without complete contact information will be removed from measurement of Outreach Rate.</p>	<p>95% or More</p> <p>85% - 94.9%</p> <p>84.9% or Less</p>	<p>0%</p> <p>10%</p> <p>20%</p>
<b>Total Wellbeing Management</b>	<p><b>The above Performance Guarantees are based on the WBM Enable package. Any modifications or changes to the package will result in BCBSOK adjusting, up to and including, elimination of the above Performance Guarantees.</b></p> <p><b>Complete contact information is defined as preferred phone at the member level.</b></p> <p><b>Members are identified as candidates for Clinical Program Participation based upon utilization patterns, high cost or probability of becoming high cost, and/or their likelihood of having an adverse event such as an inpatient admission/readmission or emergency room visit, as well as BCBSOK's ability to impact the outcome.</b></p> <p><b>Contact attempts include phone calls, targeted mailings, online or digital communications to members with the intent to inform, educate or engage in Clinical Program Participation.</b></p>		<b>20%</b>

IN WITNESS WHEREOF, the parties have executed this Exhibit-PG to remain in effect for the indicated period of time.

**BLUE CROSS AND BLUE SHIELD OF OKLAHOMA, a Division of  
Health Care Service Corporation, a Mutual Legal Reserve Company**

By:



Kathy Selck

Please Print Name

Title: Vice President & Chief Underwriter

Date: October 3, 2024

**ADOPTED** by the Council and **SIGNED** by the Mayor of The City of Oklahoma City this  
\_\_\_\_ 5TH \_\_\_\_ day of NOVEMBER, 2024.

**ATTEST:**

Amy K. Simpson  
City Clerk



[Signature]  
Vice Mayor

**ADOPTED** by the Trustees and **SIGNED** by the Chairman of the Oklahoma Municipal Facilities Authority this \_\_\_\_ 5TH \_\_\_\_ day of NOVEMBER, 2024.

**ATTEST: (Seal)**

**OKLAHOMA CITY MUNICIPAL  
FACILITIES AUTHORITY**

Amy K. Simpson  
**SECRETARY**



[Signature]  
**VICE CHAIRMAN**

**ADOPTED** by the Trustees and **SIGNED** by the Chairman of the Oklahoma City Post-Employment Benefits Trust this \_\_\_\_ 13TH \_\_\_\_ day of NOVEMBER, 2024

**ATTEST: (Seal)**

**OKLAHOMA CITY POST-EMPLOYMENT BENEFITS  
TRUST**

Amy K. Simpson  
**SECRETARY**

[Signature]  
**CHAIRMAN**

**REVIEWED** for form and legality

[Signature]  
Assistant Municipal Counselor  
City of Oklahoma City 2025 WBM Enable PG Exhibit