

EXHIBIT-PG
EMPLOYER NAME: YELLOWSTONE COUNTY
Employer Account Number: 252390
Employer Group Numbers: 252391 and 252392

Effective for the Settlement Period beginning July 1, 2025, and ending June 30, 2026

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 756 Covered Employees, based on a total of 840 contracts. Performance measurement will begin July 1, 2025. Performance Guarantees are measured and settled annually.

SERVICE - Medical	Defined Performance Guarantees	Performance Guarantee	Percentage of the Administrative Charge at Risk
Claims Processing Turnaround Time – All Claims	Claims Processing Turnaround Time means the period beginning on the date the Claim Administrator or Host Blue Plan receives a Claim for processing through the date the Claim passes all system edits and benefits are approved or denied by the Claim Administrator. The performance guarantee is measured as a percent of all Claims processed within 30 calendar days. Method of Measurement: The number of Claims processed in 30 calendar days divided by the total number of claims. Measurement is based on claims processed for those customers assigned to the Unit.	97.0% - 100% 95.0% - 96.9% 0% - 94.9%	0% 1% 2%
Claim Processing Accuracy	Claim Processing Accuracy is defined as the percent of Claims processed accurately in accordance with the provisions of the medical benefit coverage administered by the Claim Administrator. Claim Processing Accuracy refers to Claims without processing errors such as: 1. Coding - incorrect claim data entry. 2. Failure to adhere to the Employer's health care benefit program design. 3. Failure to adhere to the administrative procedures. 4. System generated errors, benefit programming errors, calculation errors. 5. Excluding: a. Any administrative inaccuracies that do not impact claims disposition or customer reporting; b. Errors entered by providers of service; c. Benefits provided to an ineligible claimant due to the Employer's failure to provide timely and accurate eligibility information to the Claim Administrator. Method of measurement: The accuracy rate is determined from a statistically valid random stratified sample audit of all Claims processed during the settlement period. A Claim Processing Accuracy percentage is calculated for each stratum by dividing the number of accurately processed Claims by the number of Claims selected in the stratum. Each accuracy	95.0% - 100% 93.0% - 94.9% 0% - 92.9%	0% 1% 2%

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 MONTANA, a
Division of Health Care Service Corporation, a Mutual Legal
Reserve Company

YELLOWSTONE COUNTY

By: Kathy M. Selk

Kathy Selk
Please Print Name

By: Kevin Gillen

Kevin Gillen
Please Print Name

Title: Vice President & Chief Underwriter

Date: January 23, 2025

Title: H.R. Dierker

Date: 9-23-25