



TEXAS ASSOCIATION of COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL



2016 - 2017 Renewal Notice and Benefit Confirmation

Group: 22946 - Tyler County

Anniversary Date: 11/01/2016

Return to TAC by: 09/16/2016

Please initial and complete each section confirming your group's benefits and fill out the contribution schedule according to your group's funding levels. Fax to 1-512-481-8481 or email to LaurenH@County.Org.

For any plan or funding changes other than those listed below, please contact Lauren Henry at 1-800-456-5974.

MEDICAL

Medical: Plan 600 \$25 Copay, \$250 Ded, 80%, \$2000 OOP Max

RX Plan: Option 2A \$5/20/35

Your % rate increase is: -2.00%

Your payroll deductions for medical benefits are:

Pre Tax

Tier	Current Rates	New Rates Effective 11/1/2016	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$723.84	\$709.36	\$ 709.36	\$.00	\$ *
Employee + Child	\$953.60	\$934.52	\$ 709.36	\$ 225.14	\$
Employee + Child(ren)	\$1,121.46	\$1,099.02	\$ 709.36	\$ 389.64	\$
Employee + Spouse	\$1,376.76	\$1,349.22	\$ 709.36	\$ 639.86	\$
Employee + Family	\$1,722.32	\$1,687.86	\$ 709.36	\$ 978.50	\$

_____ Initial to accept Medical Plan and New Rates.

* see attached policy

COBRA ADMINISTRATION

Please indicate how your group manages COBRA administration:

County/Group processes COBRA on OASYS

**County/Group is responsible for fulfilling COBRA notification process and requirements.*

BCBS COBRA Department processes COBRA

**BCBS COBRA Department administers via COBRA contract with the County/Group*

_____ Initial to confirm COBRA Administration.

PLAN INFORMATION

Broker or Consultant Information

Please confirm your broker or consultant's name, if applicable:

Agency Name: _____

Agency Address: _____

Number and Street

City

State

Zip

Broker Representative or Consultant's Name: _____

Contact Phone Number: _____

Contact Email Address: _____

_____ Initial to confirm Broker or Consultant information

- Please update broker or consultant's information.
- Broker commissions are included in rates listed on page 1.
- Retirees pay the same premium as active employees regardless of age for medical and dental.
- Rates based upon current benefits and enrollment. A substantial change in enrollment (10% over 30 days or 30% over 90 days) may result in a change in rates.
- Form must be received by **09/16/2016** in order to avoid additional administrative fees.
- Signature on the following page is required to confirm and accept your group's renewal.

RETIREE

Please circle one for each benefit that applies.

Your group allows retiree coverage for:

Medical

Pre 65 *

Post 65

Both

_____ Initial to confirm.

WAITING PERIOD

Waiting period applies to all benefits.

Employees

Elected Officials

60 days - Day following waiting period

Date of hire

_____ Initial to confirm.

** see attached policy*

TAC HEBP Member Contact Designation Tyler County

CONTRACTING AUTHORITY

As specified in the Interlocal Participation Agreement, each Member Group hereby designates and appoints, as indicated in the space provided below, a Contracting Authority of department head rank or above and agrees that TAC HEBP shall NOT be required to contact or provide notices to ANY OTHER person. Further, any notice to, or agreement by, a Member Group's Contracting Authority, with respect to service or claims hereunder, shall be binding on the Member. Each Member Group reserves the right to change its Contracting Authority from time to time by giving written notice to TAC HEBP.

Please list changes and/or corrections below.

Name/Title Honorable Sue Saunders/County Treasurer

Address 100 West Bluff Street, Room 105
Woodville, TX 75979-5245

Phone 409-283-3054

Fax 409-283-3054

Email ssaunders.cotreas@co.tyler.tx.us

BILLING CONTACT

Responsible for receiving all invoices relating to HEBP products and services.

Please list changes and/or corrections below.

Name/Title Honorable Sue Saunders/County Treasurer

Address 100 West Bluff Street, Room 105
Woodville, TX 75979

Phone 409-283-3054

Fax 409-283-3054

Email ssaunders.cotreas@co.tyler.tx.us

HIPAA Secured Fax

PRIMARY CONTACT

HEBP's main contact for daily matters pertaining to the health benefits.

Please list changes and/or corrections below.

Name/Title Honorable Sue Saunders/County Treasurer

Address 100 West Bluff Street, Room 105
Woodville, TX 75979-5245

Phone 409-283-3054

Fax 409-283-3054

Email ssaunders.cotreas@co.tyler.tx.us

Date: 07-21-2016

Signature of County Judge or Contracting Authority

TYLER COUNTY JUDGE

Please PRINT Name and Title

The Texas Association of Counties would like to thank you for your membership in the only all county-owned and county directed Health and Employee Benefits Pool in Texas.

Political Activity

Employees of Tyler County shall not:

- A. Use their official authority or influence to interfere with or affect the result of any election or nomination for office;
- B. Directly or indirectly coerce, attempt to coerce, command or advise another person to pay, lend or contribute anything of value to a party, committee, organization, agency or person for a political reason; or
- C. Be a candidate for elective office in a partisan election without taking a leave of absence, unless the incumbent of that office does not seek re-election. For definition purposes, an elected official, serving in office, is not considered an employee for the purpose of this specific provision.
- D. Use any equipment, property, or material owned by the County for political activity or engage in political activity while on duty for the county is prohibited.

Part 3

BENEFITS AND LEAVE

TYLER COUNTY POLICY ON GROUP MEDICAL AND LIFE INSURANCE

Eligibility

1. All regular full-time employees of the County shall be eligible for coverage under the group hospitalization program provided by the county, on the first of the month after employment begins, and will be provided life insurance 60 days after employment begins.
2. The county shall pay the premium for coverage of eligible employees.

Benefits

1. The benefits for this program shall be in accordance with the provisions of the master contract.
2. A copy of the master contract shall be kept in the County Auditor's office, and may be reviewed by employees during normal working hours.
3. When an employee retires from the county at age (62) sixty two, and has (8) continuous (unbroken) years of service to Tyler County, Tyler County will pay 100% of the health insurance premium until they reach the age of sixty five (65) and four (4) months.
4. For the employee who retires before the age of sixty-two (62), the employee has twenty-five (25) years of continuous (unbroken) service with Tyler County and meets the seventy five (75) points rule, the County will pay eighty (80%) of the health insurance premium and the other twenty (20%) will be paid by the Retiree.
5. Retirees are only eligible if they meet the above guidelines and have formally separated from the County and begin drawing an annuity.

Employees who leave the employment of Tyler County or who lose their coverage eligibility, may be eligible for an extension of the medical plan for themselves and their eligible dependents under the Consolidated Omnibus Budget Reconciliation Act (COBRA). If an employee is unable to return to work following FMLA leave, if eligible, they will be offered COBRA. Information on extension of benefits under COBRA is available in the County Tyler Auditor's Office and may be obtained during the normal working hours for that office. COBRA notifications will be provided to all employees within 30 days of their hire date. All eligible

Rev. June 2014