



June 25, 2020

Hon. Jacques Blanchette  
Tyler County Judge  
100 W Bluff Rm 105  
Woodville, TX 75979

Dear Judge Blanchette:

The Texas Association of Counties Health and Employee Benefits Pool (TAC HEBP) is pleased to enclose Tyler County's employee benefit renewal packet for your upcoming plan anniversary date. Please be sure to read through your entire packet for information about how to process your renewal, as well as information about the new EAP benefits included with your health plan. Note that your enrollment window in OASys is open earlier than ever before, so we hope you will allow your employees to make their open enrollment changes online through the Employee Self-Service portal, <https://mybenefits.county.org>.

Here are some highlights of your Plan Year 2020-21 (PY2021) renewal:

As it has been for over a decade, the Pool renewal for PY2021 is below the national average for health plan rate increases (trend). This year, we are projecting a national combined medical and Rx trend of 6.4%. Renewal rates are set annually using a comprehensive process which determines the actuarial needs of the Pool for the coming year. We then evaluate each individual county or district based on a combination of the group's size, claims experience, age, and geographic area. Based on this analysis, your group's renewal rate may be above or below the trend rate.

***Tyler County's Renewal Rate change(s):***

***Health Plan:*** -1%

***Dental Plan:*** Not Applicable

***Life and Vision:*** No change to Life or Vision Rates for PY2021

Your renewal information may include alternate benefit plans with pricing (if not, alternates are available upon request). Please see the enclosed 'Alternate Plan instructions' document to learn how to view and select a plan that is not the same as your current benefit. Contact your Employee Benefits Consultant right away if you:

- Want to discuss other alternates, and/or to learn about the impact of changes to your plan
- Want information about other TAC HEBP employee benefit plans (Dental, Life, or Vision)
- Are considering changes to your personnel policies that will affect benefits (such as adding/dropping retiree benefits, changing waiting period, etc.)

***Your Employee Benefits Consultant: Orlando Espinoza (orlandoe@county.org) (800) 456-5974***

***Deadline for returning signed renewal documents to TAC HEBP: August 18, 2020***

**Other important items to note for the upcoming plan year:**

- **NEW: EAP Benefits:** Beginning on October 1, your employees will have access to an outstanding Employee Assistance Program (EAP) as a part of your TAC HEBP health plan. Please see the attached EAP Introduction document for more information.
- **Healthy County forms:** Your renewal packet includes Healthy County Contacts and CSI (County Specific Incentive) documents. Please review and make changes as needed to your Wellness contact information. Please be sure to complete both forms and return them with your renewal. Questions? Contact your TAC Wellness Consultant, Ashley Cureton, at ashleyc@county.org or (800) 456-5974.
- **Affordable Care Act Fees:** The HEBP Board voted to pay 2020 ACA fees on behalf of Pooled groups; see attached 'Health Care Reform Updates' document for details.
- **Open Enrollment Toolkit:** This will be sent via email by August 18, and contains the forms and notices your group will need to process employee benefit renewals.
- **Easy Peasy Quick & Easy:** Once your renewal benefit decision has been approved, complete Tyler County's Renewal Notice and Benefits Confirmation (RNBC) online through the OASys system. After the form has been entered online, please print and initial/sign where indicated, and return to TAC HEBP via email, or fax to (512) 481-8481 on or before the date shown below.

**ACTION REQUIRED:** Please present the renewal, with Alternates if desired, to the Commissioners Court for a decision. Once the renewal plan has been selected, complete the RNBC form online, and return the initialed and signed RNBC to TAC no later than August 18, 2020.

**NOTE:** *Submitting your RNBC after the due date will result in a delay in implementing your benefit plan renewal, including employee enrollment changes.*

TAC HEBP understands how valuable medical coverage is for your employees and their families. We appreciate your partnership with the Pool, and want to continue helping Tyler County offer this important benefit. Again, we thank you for your membership in the Pool and look forward to working with you for the upcoming plan year.

Sincerely,



Quincy Quinlan, Director  
Health and Benefits Services Department  
Texas Association of Counties

cc: Jackie Skinner  
cc: Leann Monk

## **Renewal Attachments:**

Renewal Letter

Renewal Documents

- Renewal Notice and Benefit Confirmation (RNBC)
- Alternate Health Plan Proposal (available by request for HRA or HSA plans)
- 12-month Claims Report
- High-Cost Claimant (HCC) Report

Healthy County Wellness Contacts designation form

Healthy County County-Specific Incentive (CSI) election form

Renewal Packet

## **Renewal Packet contents:**

Renewal Checklist

Renewal Calendar

Alternate Plan Selection and Online RNBC completion instructions

New Benefit: Employee Assistance Program (EAP) Introduction

Employee Self-Service for Open Enrollment instructions

Health Care Reform update memo for 2020-21

TAC HEBP Territory Map and Contacts

TAC HEBP Voluntary Dental Plans

Grandfathered Plan FAQ





## 2020 - 2021 Renewal Notice and Benefit Confirmation

Group: 22946 - Tyler County

Anniversary Date: 11/01/2020

Return to TAC by: 08/18/2020

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, \$0 Ded

Your % rate increase is: -1.00%

Your payroll deductions for medical benefits are: **Pre Tax**

Tier	Current Rates	New Rates Effective 11/1/2020	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$761.82	\$754.20	\$	\$	\$
Employee + Child	\$1,003.66	\$993.62	\$	\$	\$
Employee + Child(ren)	\$1,180.32	\$1,168.52	\$	\$	\$
Employee + Spouse	\$1,449.04	\$1,434.54	\$	\$	\$
Employee + Family	\$1,812.72	\$1,794.58	\$	\$	\$

\_\_\_\_\_ Initial to accept Medical Plan and New Rates.

### VISION

**Vision:** Plan I

Your % rate increase is: 0.00%

Your payroll deductions for vision benefits are: **Pre Tax**

Tier	Current Rates	New Rates Effective 11/1/2020	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$6.20	\$6.20	\$	\$	\$
Employee + Child(ren)	\$12.44	\$12.44	\$	\$	\$
Employee + Spouse	\$11.80	\$11.80	\$	\$	\$
Employee + Family	\$18.28	\$18.28	\$	\$	\$

\_\_\_\_\_ Initial to accept Vision Plan and New Rates.



**LIFE - BASIC**

**Basic Life Products:**  
(Rates are per thousand)

Coverage Volume per Employee: 2 x Ann Salary

	<b>Current Rates</b>	<b>New Rates Effective 11/1/2020</b>	<b>Amount Employer Pays</b>	<b>Amount Employee/ Retiree Pays (if applicable)</b>
Basic Term Life	\$0.270	\$0.270	100%	0%
Basic AD&D	\$0.035	\$0.035	100%	0%

Coverage Volume per Retiree: \$10,000

Basic Retiree Life	\$3.250	\$3.250	100%	0%
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\_\_\_\_\_ Initial to accept New Basic Life Rates.

**LIFE - VOLUNTARY**

**Additional Voluntary Life Products Elected:**

Voluntary Term Life

Voluntary Spouse Term Life Insurance

Voluntary Child Term Life Insurance

\* Please see attachment for detail listing of Voluntary Life product rates.

\_\_\_\_\_ Initial to accept New Voluntary Life Rates.

**RETIREE**

Please circle one for each benefit that applies.

Your group allows retiree coverage for:

Medical  Pre 65  Post 65

\_\_\_\_\_ Initial to confirm.

**WAITING PERIOD**

Waiting period applies to all benefits.

**Employees**  
60 days - Day following waiting period

**Elected Officials**  
Date of hire

\_\_\_\_\_ Initial to confirm.

## 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.
- If applicable, 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 **08/18/2020** in order to avoid additional administrative fees.
- Signature on the following page is required to confirm and accept your group's renewal.

## 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** Jacques L Blanchette/Judge

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

**Phone** 409-283-2141

**Fax** 409-331-0028

**Email** judge@co.tyler.tx.us

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### BILLING CONTACT

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

Please list changes and/or corrections below.

**Name/Title** Jackie Skinner/County Auditor

**Address** 100 West Bluff Street, Room 110  
Woodville, TX 75979

**Phone** 409-283-3652

**Fax** 409-283-6305

**Email** jskinner.aud@co.tyler.tx.us

**HIPAA Secured Fax**

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### COUNTY REPRESENTATIVE

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

Please list changes and/or corrections below.

**Name/Title** Gwendolyn L. Monk/

**Address** 100 West Bluff Street, Room 109  
Woodville, TX 75979-5245

**Phone** 409-283-3054

**Fax** 409-283-6305

**Email** lmonk.cotreas@co.tyler.tx.us

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Date: \_\_\_\_\_

\_\_\_\_\_  
**Signature of County Judge or Contracting Authority**

**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.*





## 2020 - 2021 Alternate Plan Proposal

Group: 22946 - Tyler County

Effective Date: 11/01/2020

	Current Plan Year	Renewal Rates	Option 1	Option 2
Plan:	600	600	600-G2	800-NG
Option:	RX-2A	RX-2A	RX-2A-G2	RX-2A-NG
<b>Rates</b>				
Employee Only	\$761.82	\$754.20	\$731.30	\$733.48
Employee + Child	\$1,003.66	\$993.62	\$963.34	\$966.20
Employee + Child(ren)	\$1,180.32	\$1,168.52	\$1,132.82	\$1,136.20
Employee + Spouse	\$1,449.04	\$1,434.54	\$1,390.64	\$1,394.78
Employee + Family	\$1,812.72	\$1,794.58	\$1,739.54	\$1,744.74
<b>Medical Plan</b>				
Deductible In/Out Network	\$250/500	\$250/500	\$340/680	\$500/750
Co-Insurance % In/Out	80/60	80/60	80/60	80/60
Co-Insurance Maximum	\$2000/4000	\$2000/4000	\$2750/5500	\$2500/5000
Office Visit	\$25	\$25	\$30	\$25
Specialist Visit				
Emergency Room Hospital	\$90	\$90	\$100	\$100
<b>Prescription Plan</b>				
Prescription Card Co-Pay	5/20/35	5/20/35	10/25/45	5/20/35
Deductible	\$0	\$0	\$0	\$0

Proposal rates are based on the following information:

- 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.
- Rates are based on a minimum employer contribution of 100% of the employee only rate or current funding level.
- Retirees pay the same premium as active employees regardless of age for medical and dental.
- Form must be received by 08/18/2020 in order to avoid a delay in implementation of benefits and/or late processing fees.

Please indicate the selected plan here \_\_\_\_\_.

Fax the signed document to 1-512-481-8481.

Signature \_\_\_\_\_ Date \_\_\_\_\_

# PY 2021 12 Month Medical Report

Post Date : Mar 2020

Metrics : (Average Members, Average Subscribers, Total Contribution, Medical Paid, Pharmacy Paid, Paid)  
 Rows : (Paid Date)  
 Columns : (Metrics)  
 Paid Date : Last 12 TimeMonths  
 Coverage Type : (Medical)  
 Group : (022946 - TYLER COUNTY/TAC)

Paid Date	Average Subscribers	Average Members	Total Contribution	Medical Paid	Pharmacy Paid	Paid
Apr 2019	105	133	\$87,862.80	\$30,327.87	\$18,559.96	\$48,887.83
May 2019	107	135	\$89,359.52	\$35,050.47	\$24,184.17	\$59,234.64
Jun 2019	107	135	\$90,107.88	\$39,930.67	\$19,780.75	\$59,711.42
Jul 2019	108	136	\$90,856.24	\$38,789.79	\$19,618.53	\$58,408.32
Aug 2019	106	135	\$89,121.96	\$21,203.07	\$19,743.38	\$40,946.45
Sep 2019	104	133	\$88,036.34	\$56,252.39	\$24,022.93	\$80,275.32
Oct 2019	103	136	\$86,777.18	\$27,546.21	\$22,685.01	\$50,231.22
Nov 2019	104	137	\$89,443.90	\$42,422.21	\$14,528.24	\$56,950.45
Dec 2019	105	140	\$92,780.26	\$73,248.32	\$25,391.44	\$98,639.76
Jan 2020	107	143	\$94,545.74	\$89,807.75	\$33,815.48	\$123,623.23
Feb 2020	106	144	\$94,202.42	\$93,303.06	\$26,126.58	\$119,429.64
Mar 2020	107	143	\$94,545.74	\$37,443.65	\$24,909.03	\$62,352.68
<b>Total: Selected Filter(s)</b>	<b>106</b>	<b>138</b>	<b>\$1,087,639.98</b>	<b>\$585,325.46</b>	<b>\$273,365.50</b>	<b>\$858,690.96</b>

# PY 2021 - No PHI HCC Report

Post Date : Mar 2020

**Paid Band :** Total (\$10,001 - \$30,000, \$30,001 - \$50,000, \$50,001 - \$75,000, \$75,001 - \$100,000, \$100,001 - \$150,000, \$150,001 - \$200,000, \$200,001 - \$250,000, \$250,001 - \$300,000, \$300,001 - \$400,000, \$400,001 - \$500,000, \$500,000+)

**Metrics :** (Paid)

**Group :** (022946 - TYLER COUNTY/TAC)

**Paid Month :** Last 12 TimeMonths

**Service Category :** Exclude (Dental)

**Paid :** descending

Encrypted Member ID	Member Status	Medical Paid	Pharmacy Paid	Paid
6380269581	Active	\$76,639.66	\$1,918.29	\$78,557.95
17080240642	Active	\$6,370.61	\$71,432.15	\$77,802.76
19020302024	Active	\$58,989.66	\$627.91	\$59,617.57
18870681741	Active	\$37,463.52	\$6,062.71	\$43,526.23
18270543764	Active	\$20,584.29	\$19,509.78	\$40,094.07
17913610630	Active	\$5,126.55	\$27,339.23	\$32,465.78
16790501337	Active	\$22,334.74	\$8,311.67	\$30,646.41
3240197865	Active	\$29,154.32	\$1,259.49	\$30,413.81
18240562794	Active	\$5,147.26	\$19,719.62	\$24,866.88
16991208109	Active	\$20,830.79	\$1,908.98	\$22,739.77
11220000818	Active	\$20,709.30	\$7.15	\$20,716.45
3049975099	Active	\$7,071.46	\$12,996.11	\$20,067.57
7040089285	Active	\$12,662.61	\$5,699.77	\$18,362.38
8610391720	Active	\$16,813.87	\$435.49	\$17,249.36
3043696860	Active	\$15,855.61	\$26.96	\$15,882.57
11690019670	Under 65 Retiree	\$15,359.25	\$19.22	\$15,378.47
3040610801	Active	\$11,223.49	\$4,044.42	\$15,267.91
18990194643	Active	\$13,496.07	\$1,278.00	\$14,774.07
3040610741	Active	\$922.31	\$12,312.58	\$13,234.89
14890301692	Active	\$13,198.01	\$0.20	\$13,198.21
3120190238	Active	\$1,114.05	\$10,406.66	\$11,520.71
3061484121	Active	\$6,838.52	\$3,867.28	\$10,705.80
<b>Query Total</b>	<b>22</b>	<b>\$417,905.95</b>	<b>\$209,183.67</b>	<b>\$627,089.62</b>
<b>Report Total</b>	<b>22</b>	<b>\$417,905.95</b>	<b>\$209,183.67</b>	<b>\$627,089.62</b>





TEXAS ASSOCIATION of COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL

## HEALTHY COUNTY: COUNTY SPECIFIC INCENTIVE PROGRAM

A County Specific Incentive (CSI) is a wellness program that rewards employees and/or spouses for healthy behaviors such as completing an annual exam, tobacco affidavit, or participating in a physical activity program in exchange for avoiding a premium contribution, a lower monthly premium, earn additional days of PTO, or other rewards decided on by the County or District. Penalties and Rewards are administered at the county or district level.

Healthy County is available to assist in the process of designing, communicating, and tracking a CSI. Employees will be able to view their progress and completion of the incentive on the Healthy County energized by Sonic Boom portal.

### YOUR COUNTY OR DISTRICT'S CSI

Our records indicate that your County or District does not currently have a CSI. Please make a selection below to let us know if you would like to implement a CSI or learn more about implementing a CSI. Your county or district's Wellness Consultant will reach out to you to discuss design options. Also, please feel free to contact your county or district's Wellness Consultant at any time to begin this process. If your County or District decides to implement a CSI, there is a six week waiting period before employees can view the program online.

- We would like to implement a CSI Program for the 2020-2021 plan year.
- We are interested in learning more about the CSI Program.
- We are not interested in learning more about the CSI Program at this time.

County or District Name: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_

Contracting Authority Signature: \_\_\_\_\_

Date: \_\_\_\_\_



TEXAS ASSOCIATION of COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL

## HEALTHY COUNTY WELLNESS CONTACT DESIGNATION

### Tyler County

#### WELLNESS COORDINATOR

The Wellness Coordinator is the primary contact regarding the Healthy County wellness program. The wellness coordinator is responsible for administrating Healthy County components and informing employees of all wellness resources available.

**Current Wellness Coordinator**

**Name:** Ms. Jackie Skinner

**Title:** Auditor

**Address:** 100 W Bluff St Rm 110  
Woodville, TX 75979-5245

**Email:** jskinner.aud@co.tyler.tx.us

**Phone Number:** (409) 283-3652

**Fax Number:**

**Please list changes and/or corrections:**

Hon. Leann Monk  
title: County Treasurer  
100 W Bluff St, Room 103  
Woodville, TX 75979  
lmonk.cotreas@co.tyler.tx.us  
409 283-3054

#### WELLNESS SPONSOR

The Wellness Sponsor is responsible for supporting the coordinator in administrating Healthy County components and encouraging county employees to access all Healthy County wellness resources available. An elected official in this role is preferred to illustrate management support for wellness.

**Current Wellness Sponsor**

**Name:** Hon. Bryan Weatherford

**Title:** Sheriff

**Address:** 702 N Magnolia St Ste 100  
Woodville, TX 75979-4915

**Email:** weatherford.sheriff@co.tyler.tx.us

**Phone Number:** (409) 283-2172

**Fax Number:**

**Please list changes and/or corrections:**

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Contracting Authority Signature: \_\_\_\_\_

Date: \_\_\_\_\_



# TEXAS ASSOCIATION *of* COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

## Plan Year 2021 Renewal Checklist

To renew your TAC HEBP medical and prescription drug, dental, life, and/or vision benefits, please refer to the enclosed calendar and the procedures listed below:

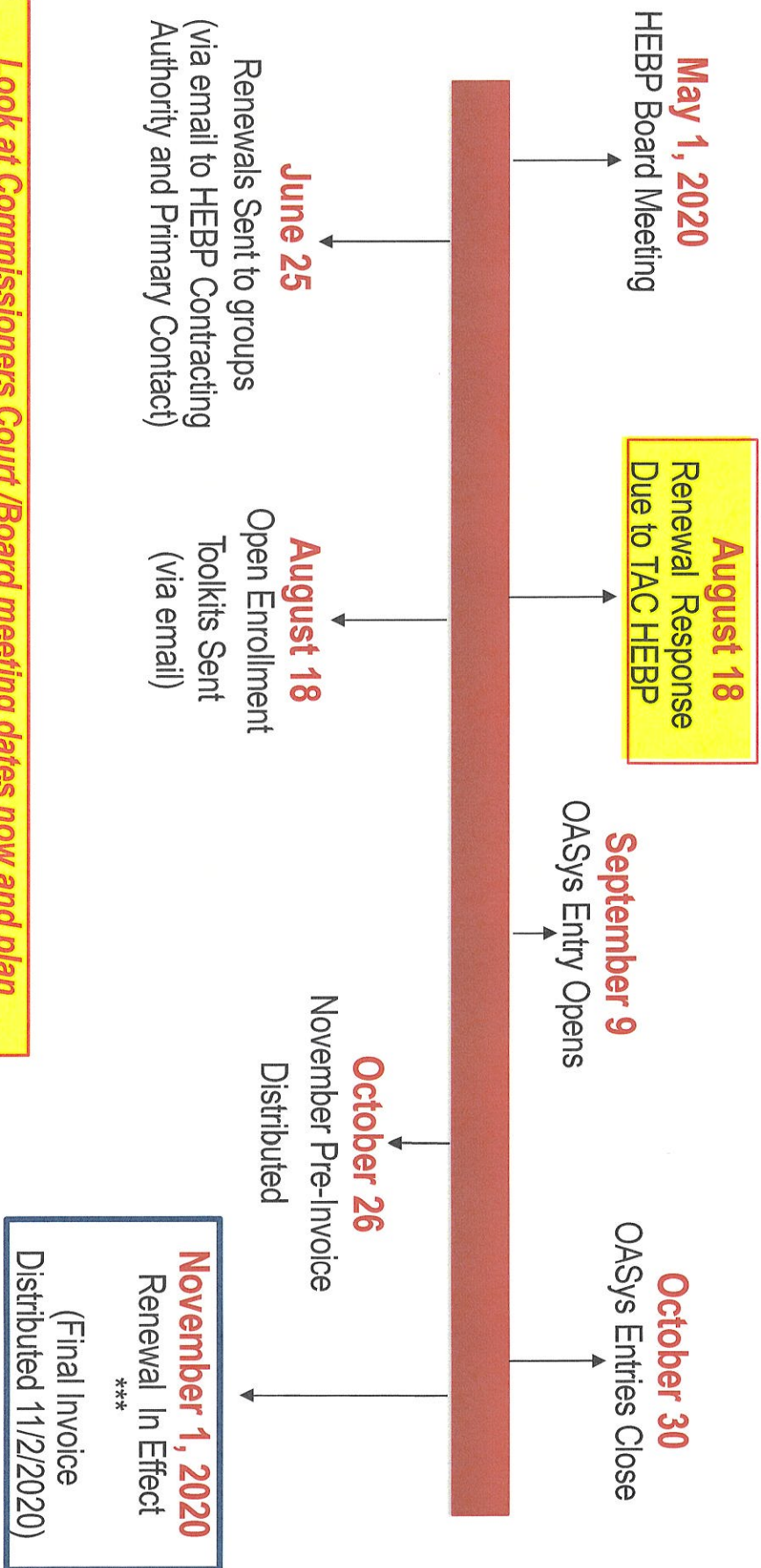
- 1.) **Print the Renewal Notice and Benefit Confirmation (RNBC) form with alternate plan options if applicable**, and other relevant documents from this Renewal Packet that your commissioners court or governing board may wish to review.
- 2.) **Have your commissioners court or governing board approve the renewal plan and rates.** If you are interested in an alternate plan, or making changes to your current benefits, please call your Employee Benefits Consultant at (800) 456-5974.
- 3.) **In OASys, complete the RNBC form, including alternate option selection if applicable.** Instructions are included in this Renewal Packet. Be sure to review all pages, and fill in the contribution amounts for all of your health and dental plans.
- 4.) **Print the completed RNBC form** and have your county judge or contracting authority initial and sign in the indicated spaces.
- 5.) **Return the signed Renewal Notice & Benefit Confirmation.** Please email or fax the signed form to your Employee Benefits Specialist at (512) 481-8481, no later than **August 18, 2020.**

***NOTE: Returning your RNBC past the due date will result in a delay in implementing your Plan Year 2021 renewal, including employee open enrollment changes.***

*Please make copies of all documents for your records.*



# Plan Year 2021 Key Renewal Dates: November 1 Anniversary Date



**Look at Commissioners Court /Board meeting dates now and plan to place renewal discussion on agenda(s) or schedule workshops**

# RENEWAL NOTICE AND BENEFIT CONFIRMATION (RNBC) ALTERNATE PLAN SELECTION and ONLINE COMPLETION INSTRUCTIONS

Thank you for using OASys to view alternate plan options and completing your  
Renewal Notice and Benefit Confirmation (RNBC) *online and on time!*

**NOTE: If you do not want to view alternate renewal plans,  
please skip to Section III on page 4 of this document.**

## I. To view alternate renewal Medical and Rx Options (Alternate RNBC)

Log onto OASys and click on the RNBC tab.

The screenshot shows the OASys website interface. At the top left is the Texas Association of Counties (UAT) logo. A navigation bar contains several tabs: EMPLOYEE ADMINISTRATION, ADD EMPLOYEE, STATUS CHANGE, COBRA, REPORTING, SEARCH, RESOURCES, RNBC (highlighted in red), and LOGOUT. Below this is a sub-navigation bar with 'Renewal Information' and 'Alternate Renewal Information' tabs. A light blue banner reads 'Welcome to your online Renewal Notice and Benefit Confirmation!'. On the right side of the banner is a red 'Next' button. Below the banner are two dropdown menus: 'PlanYear' set to 2021 and 'Group' set to Training.

Click the 'Next' button, then click on the 'Alternate Renewal Information' tab.

The screenshot shows the 'Alternate Renewal Medical & Rx Options' section. It features a light blue banner with the following text: 'Alternate Renewal Medical & Rx Options. You may have alternative renewal medical and RX plans available. Please click the "View Alternate Options" red button to view and select an Alternate for your medical and RX plan. Once you have selected and saved an alternate plan, please click the "Print Alternate RNBC" button to print and sign your Alternate RNBC. Once you have signed the Alternate RNBC, please email the signed form to your Employee Benefits Specialist at TAC. You must print the Alternate RNBC before clicking the "Submit" button because you will not be able to print after clicking "Submit". You will need to click the "Submit" button to finalize the selection. Please note you can only click "Submit" once, so you'll want to review and confirm everything is correct before clicking "Submit".' Below the banner are three dropdown menus: 'PlanYear' set to 2021, 'Group' set to Training, and 'Plan' with 'Select a Plan' and 'Plan 700' options. On the right side of the banner is a red 'View Alternate Options' button.

Plan Year will default to 2021 (PY2021), and you will see your Group's name. Use the dropdown menu for 'Plan' to select a plan, then click the red "View Alternate Options" button tab on the right side of the window.



The screen will then populate with a side by side comparison of highlights for your Current Plan, your Renewal Plan and up to 3 alternative plans.

**NOTE: If no Alternate Options are listed, or if you would like to see different plan options, contact your TAC Employee Benefits Specialist (EBS) for assistance.**

### Alternate Renewal Medical & Rx Options

You may have alternative renewal medical and RX plans available. Please click the "View Alternate Options" red button to view and select an Alternate for your medical and RX plan. Once you have selected and saved an alternate plan, please click the "Print Alternate RNBC" button to print and sign your Alternate RNBC. Once you have signed the Alternate RNBC, please email the signed form to your Employee Benefits Specialist at TAC. You must print the Alternate RNBC before clicking the "Submit" button because you will not be able to print after clicking "Submit".

You will need to click the "Submit" button to finalize the selection. Please note you can only click "Submit" once, so you'll want to review and confirm everything is correct before clicking "Submit".

Plan Year:   
 Group:   
 Plan:

[Print Alternate RNBC](#) [Submit](#)

MEDICAL & RX OPTIONS					
Benefit	Current Plan	Renewal Plan	Alternate Option 1	Alternate Option 2	Alternate Option 3
Medical	700	700	700-G2	1100-NG	
Rx	RX-3A	RX-3A	RX-3A-G2	RX-3A-NG	
MEDICAL & RX RATES					
Tier	Current Rates	Renewal Rates	Alternate Option 1	Alternate Option 2	Alternate Option 3
Employee Only	\$554.58	\$554.58	\$537.84	\$523.98	
Employee + Child(ren)	\$862.80	\$862.80	\$836.54	\$814.60	
Employee + Spouse	\$1,162.50	\$1,162.50	\$1,126.96	\$1,097.30	
Employee + Family	\$1,471.74	\$1,471.74	\$1,426.64	\$1,389.98	
Medical Plan					
Plan Benefits	Current Plan	Renewal Plan	Alternate Option 1	Alternate Option 2	Alternate Option 3
Deductible In/Out Network	\$500/750	\$500/750	\$680/1020	\$750/1000	
Co-Insurance % In/Out	80/70	80/70	80/70	80/60	
Co-Insurance Maximum	\$2000/4000	\$2000/4000	\$2750/5500	\$3000/6000	
Office Visit	\$25	\$25	\$30	\$25	
Emergency Room Hospital	\$90	\$90	\$100	\$150	
Specialist Visit					
Prescription Plan					
Plan Benefits	Current Plan	Renewal Plan	Alternate Option 1	Alternate Option 2	Alternate Option 3
Prescription Card Co-Pay	10/20/35	10/20/35	15/25/45	10/20/35	
Deductible	\$0	\$0	\$0	\$0	

Please select an alternate plan and choose which plan to replace with the alternate.

Proposal rates are based on the following information:

- 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.
- Rates are based on a minimum employer contribution of 100% of the employee only rate or current funding level.
- Retirees pay the same premium as active employees regardless of age for medical and dental.

You can print the screen by clicking the red "Print Alternate Options" button. This will open another screen in PDF format that you can save to your computer or print on paper for review.

If you request additional Alternate Options from your EBS, they will be updated on this screen. Please note that only 3 Alternate Options will be viewable at one time, so if you are considering more than three, you will need to print the first 3 options before you request more.

## II. To select an alternate renewal Medical and Rx option for your plan renewal

After you have reviewed your Alternate Options and the commissioners court or governing body has approved an Alternate Option as your plan and rates for PY2021, you will need to select the correct plan on the RNBC Alternate Renewal Information tab.

Repeat the steps from Section I to get to the Alternate Renewal Information screen.

Click on the box beneath the Alternate plan your group has chosen to place a checkmark in the box.

Please select an alternate plan and choose which plan to replace with the alternate.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
--	--------------------------	-------------------------------------	--

Before you submit, click the red "Print Alternate RNBC" button (close to the top on the right side of the screen). This will allow you to print your newly chosen RNBC either to paper or save it as a PDF.

Renewal Information | **Alternate Renewal Information**

### Alternate Renewal Medical & Rx Options

You may have alternative renewal medical and RX plans available. Please click the "View Alternate Options" red button to view and select an Alternate for your medical and RX plan. Once you have selected and saved an alternate plan, please click the "Print Alternate RNBC" button to print and sign your Alternate RNBC. Once you have signed the Alternate RNBC, please email the signed form to your Employee Benefits Specialist at TAC. You must print the Alternate RNBC before clicking the "Submit" button because you will not be able to print after clicking "Submit".

You will need to click the "Submit" button to finalize the selection. Please note you can only click "Submit" once, so you'll want to review and confirm everything is correct before clicking "Submit".

PlanYear: 2021  
 Group: Training  
 Plan: Plan 700

**Print Alternate RNBC** **Submit**

MEDICAL & RX OPTIONS					
Benefit	Current Plan	Renewal Plan	Alternate Option 1	Alternate Option 2	Alternate Option 3
Medical	700	700	700-G2	1100-NG	
RX	RX-3A	RX-3A	RX-3A-G2	RX-3A-NG	

Once you are certain that you have selected the correct Alternate and printed it, click "Submit" button close to the top on the right side of the screen. NOTE: you cannot print the Alternate RNBC after clicking the Submit button.

TEXAS ASSOCIATION of COUNTIES (UAT)
 TAC Admin | County Admin | Billing Admin | Case Management

EMPLOYEE ADMINISTRATION
ADD EMPLOYEE
STATUS CHANGE
COBRA
REPORTING
SEARCH
RESOURCES
**RNBC**
LOGOUT

Renewal Information | **Alternate Renewal Information**

### Complete!

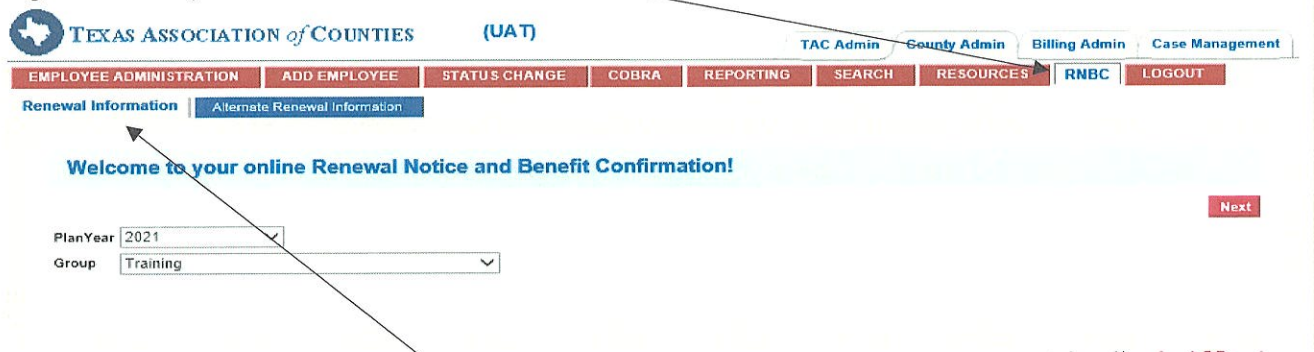
You have successfully submitted your alternative medical and RX plans. Now that you have submitted your alternative plans, please continue to the Renewal Information tab to finish reviewing and updating your Group's information for the new plan year.

Clicking the red "Submit" button has updated your plan choice in OASys, but you will need to finalize your renewal information via the Renewal Information tab to complete the renewal process *online and on time*. Please proceed to Section III.



### III. Completing your Plan Year 2021 (PY2021) RNBC online

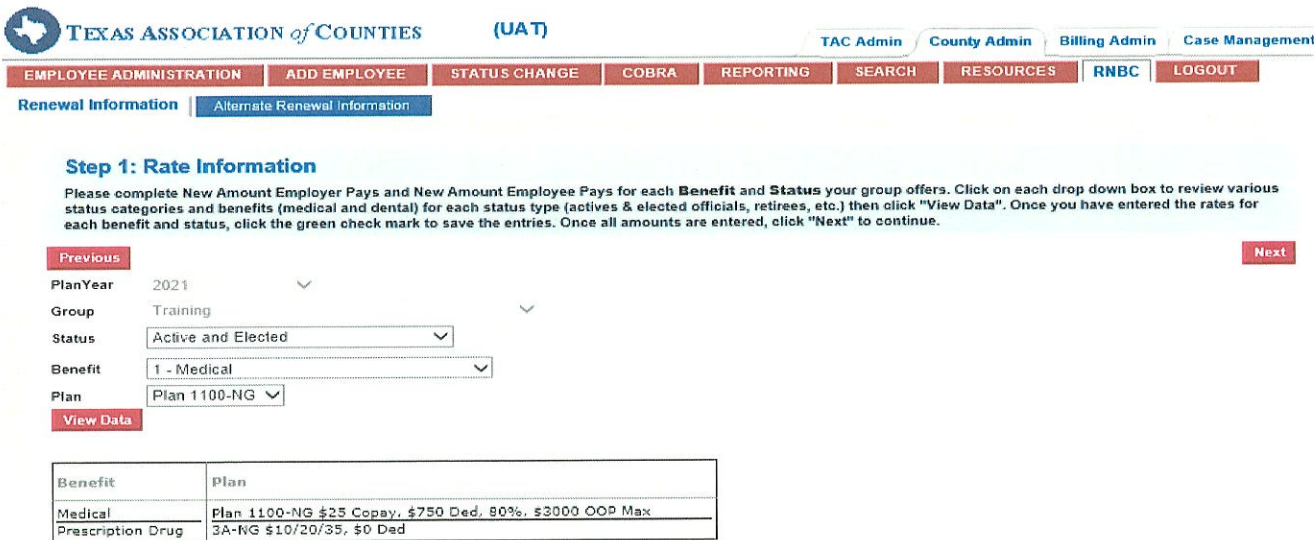
Log onto OASys and click on the red RNBC tab.



Then click on the 'Renewal Information' tab.

Plan Year will default to 2021, and you should see your group's name in the Group box. Click the red 'Next' button on the right to begin completing your PY2021 RNBC.

#### Step 1: Rate Information



- Select a Status from the drop down box. You will need to complete the contribution amounts for each status applicable to your group (Active and Elected, Retiree).  
**NOTE: You do not need to complete COBRA or Continuation of Benefits rates; these have been populated by the system as participants pay 100% of their own costs.**
- Select a Benefit from the drop down below the Status type. You only need to complete contribution amounts for the Medical, Dental and Vision Benefits.
- Select a plan from the Plan box. If your group has more than one Medical or Dental plan, you will need to complete the contribution amounts for each Status and Plan.

- d. Once you have made your selections, click on the red 'View Data' button and the Rate information for that Status, Benefit and Plan will appear.

**Step 1: Rate Information**

Please complete New Amount Employer Pays and New Amount Employee Pays for each Benefit and Status your group offers. Click on each drop down box to review various status categories and benefits (medical and dental) for each status type (actives & elected officials, retirees, etc.) then click "View Data". Once you have entered the rates for each benefit and status, click the green check mark to save the entries. Once all amounts are entered, click "Next" to continue.

Previous Next

PlanYear 2021  
 Group Training  
 Status Active and Elected  
 Benefit 1 - Medical  
 Plan Plan 1100-NG  
 View Data

Benefit	Plan
Medical	Plan 1100-NG \$25 Copay, \$750 Ded, 80%, \$3000 OOP Max
Prescription Drug	3A-NG \$10/20/35, \$0 Ded

Your payroll deductions for medical benefits are: Pre Tax

	Tier	Current Rates	New Rates Effective 10/1/2020	New Amount Employer Pays	New Amount Employee Pays
✓ X	Employee Only	\$0.00	\$523.88	\$0.00	\$0.00
📝	Employee + Child(ren)	\$0.00	\$814.60	\$0.00	\$0.00
📝	Employee + Spouse	\$0.00	\$1,097.30	\$0.00	\$0.00
📝	Employee + Family	\$0.00	\$1,386.98	\$0.00	\$0.00

- e. To update each tier (Employee Only, EE+Children, EE+Spouse, EE+Family), click on the notepad icon next to the push pin. This will open up the 'New Amount Employer Pays' and 'New Amount Employee Pays' boxes so that you can enter your new contributions for PY2021.
- f. Enter the Employer and Employee contribution amounts, then click the green checkmark on the left to save for each tier. The system will automatically calculate to ensure that the "New Amount Employer Pays" plus the "New Amount Employee Pays" totals to the "New Rates Effective" amount. You will receive a warning message and cannot continue until this is corrected.
- g. Continue to the next tier and **repeat steps e and f** until you have entered the PY2021 contributions for each tier.
- h. **Repeat steps a through f** for each Plan and Status type for your Medical and Dental plans, if your County or District offers multiple plan options.



- i. Once all contributions have been entered, click the red 'Next' button on the top right to proceed to Step 2. (If you receive an error message, please make sure that you have entered the contribution rates for EACH Status type and EACH benefit. The system will not allow you to move forward until contributions for every Plan, Status, and Benefit have been entered.)

Benefit	Plan
Medical	Plan 1100-NG \$25 Copay, \$750 Ded, 80%, \$3000 OOP Max
Prescription Drug	3A-NG \$10/20/35, \$0 Ded

Your payroll deductions for medical benefits are: Pre Tax

	Tier	Current Rates	New Rates Effective 10/1/2020	New Amount Employer Pays	New Amount Employee Pays
✓ X	Employee Only	\$0.00	\$523.88	500.00	500.00
	Employee + Child(ren)	\$0.00	\$814.60	\$0.00	\$0.00
	Employee + Spouse	\$0.00	\$1,097.30	\$0.00	\$0.00
	Employee + Family	\$0.00	\$1,388.98	\$0.00	\$0.00

Amount Employer Pays + Amount Employee Pays does not equal the new rate for at least one medical or dental plan. Please review the medical and dental rates and make updates as needed.

## Step 2: Contact Information

### Step 2: Contact Information

Please review your contact information by clicking on the **Contact Type** drop down box to select a contact type then click "View Data". You will need to update information for each Contact Type as needed. Once you have reviewed and updated all contact information, please click Next to continue.

PlanYear 2021   
 Group Training   
 Contact Type

- a. Here you will update your group's contacts. To begin, select the Contracting Authority from the Contact Type drop down box and click on the "View Data" button.
- b. The information shown is current OASys data for your group. Please review it carefully. To make any changes, click on the red "Edit" button and enter updated contact information, then click the red "Save" button to save your updates.
- c. Complete this process for the Contracting Authority, Primary Contact and Billing Contact. If you have a broker or consultant, please also review and update their information by selecting this option from the Contact Type drop down box.
- d. Once all contacts have been reviewed and updated, click on the red "Next" button on the right to proceed to Step 3.

### Step 3: Waiting Periods

- To view your current waiting periods for active Employees and Elected Officials, click on the red "View Data" button.
- NOTE: You cannot change your waiting period via OASys. If your group would like to change their waiting period, please contact your TAC HEBP Employee Benefits Specialist for instructions. TAC will need written confirmation of any waiting period changes.
- Click on the red 'Next' button on the right to proceed to Step 4.

**Step 3: Waiting Periods**  
Please click "View Data" to review your waiting period information for active employees and elected officials. If your group would like to change either or both waiting periods, please contact your Employee Benefits Specialist for instructions.

Previous Next

Plan Year: 2021  
Group: Training

View Data

Employees	Elected Officials
60 days - 1st of the month following date of hire but first of the month	60 days - 1st of the month following date of hire but first of the month

### Step 4: Retiree Information

- If your group covers retirees on any TAC HEBP plans, click the red "View Data" button. You may include Pre and Post 65 retirees in medical, dental, and/or vision coverages if your active employees are offered these plans.
- Please update the information by clicking on the notepad icon and then clicking on the correct box designating Pre or Post 65 eligibility for each applicable type of coverage. Click on the green checkmark to save. If you are changing the way your group covers retirees on any of these plans, please make your EBS aware.
- Click the red "Next" button on the right to proceed to Step 5.

**Step 4: Retiree Information**  
Please click "View Data" to review your pre-65 and post-65 retiree eligibility information and make updates as needed. Once you have reviewed and updated all retiree information, please click Next to continue.

Previous Next

Plan Year: 2021  
Group: Training

View Data

Benefit	Pre 65 Eligibility	Post 65 Eligibility
Medical	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dental	<input type="checkbox"/>	<input type="checkbox"/>
Vision	<input type="checkbox"/>	<input type="checkbox"/>



## Step 5: COBRA Information

- Click on the red View Data button and the system will display the option you currently use for COBRA administration.
- If your group processes your own or uses a third party to administer COBRA, the OASys button (left side of screen) should be checked.
- If your group contracts with the BCBS COBRA Administration department the BCBS COBRA radial button should be checked.
- To update this information, click on the notepad icon, select the correct button, and click on the green checkmark to save. If your group is changing how you process COBRA, please make your EBS aware.

**Step 5: COBRA Information**  
Please click "View Data" to review your COBRA administration information and make updates as needed. Once you have reviewed and updated all COBRA information, please click Submit to continue.

Previous

PlanYear 2021

Group Training

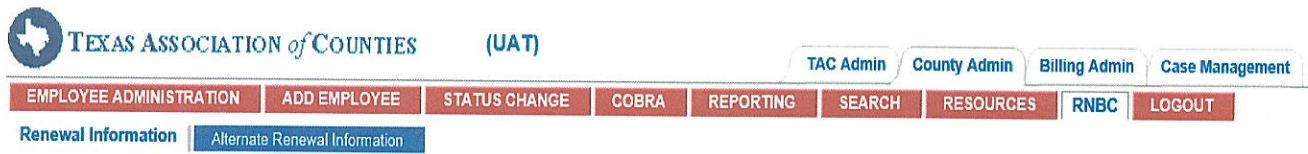
View Data

<input type="radio"/>	County/Group processes COBRA on OASYS *County/Group is responsible for fulfilling COBRA notification process and requirements
<input type="radio"/>	BCBS COBRA Department processes Cobra *BCBS COBRA Department administers via COBRA contract with the County/Group

Submit

You're nearly finished! Click on the red "Submit" button to proceed.

If Steps 1-5 were completed successfully, the system will confirm:



**Complete!**

You have successfully completed your renewal information. Please click the "Print RNBC" button to print and sign your RNBC. Once you have signed the RNBC, please email the signed form to your Employee Benefits Specialist at TAC.

Print RNBC

**Congratulations!!**

The final step is to print your RNBC and secure the necessary initials and signatures, then send the document to TAC HEBP.

- a. Click on the "Print RNBC button" and a completed version of your PY2021 RNBC document will appear.
- b. Please print the completed RNBC document and review it a final time for accuracy. NOTE: Zero dollar amounts will show as blank on your RNBC; this is fine. Have your Contracting Authority initial where indicated and sign at the bottom of the 'Contact Information' page. If you find an error or need to change something once you have completed the process, please contact your Employee Benefits Consultant or your Employee Benefits Specialist.
- c. Scan and email or fax the signed copy to your TAC HEBP Employee Benefits Specialist at TAC HEBP:

Lauren Henry: [laurenh@county.org](mailto:laurenh@county.org)  
Karen Bowers: [karenb@county.org](mailto:karenb@county.org)  
Melissa Lopez: [melissal@county.org](mailto:melissal@county.org)  
Erin Crafton: [erinc@county.org](mailto:erinc@county.org)  
TAC HEBP Secure Fax: (512) 481-8481

**Thank you for completing your RNBC online. We look forward to another wonderful year of working with you.**





## alliance work partners

awp



### NEW BENEFITS INCLUDED WITH YOUR TAC HEBP HEALTH PLAN BEGINNING 11/1/2020

#### INTEGRATED EMPLOYEE ASSISTANCE PROGRAM (EAP), WORK-LIFE AND WELLNESS PROGRAMS AND FEATURES

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- 24-Hour Call Center
- Solution-Focused Counseling – 6 sessions per year, per topic
- Covers entire employee household
- Access to Nationwide Provider Network
- Convenient Counseling Locations
- Procedural Referrals
- Management Consultations

#### WORKPLACE SOLUTIONS & FEATURES

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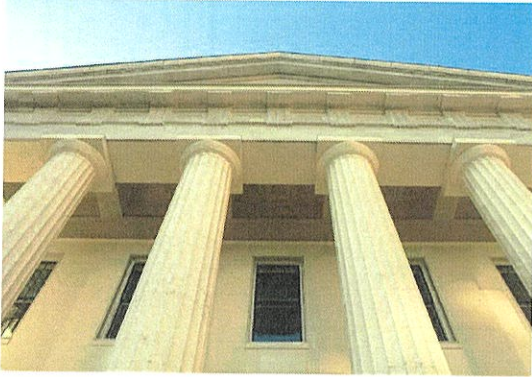
- Management Consultations
- Case Management Services
- Extended Care Referrals
- Critical Incident Stress Response (CISR)
- 24-Hour Resources and Referrals
- Three monthly electronic newsletters
- Online Resources at [www.alliancewp.com](http://www.alliancewp.com)
- SafeRide Program
- Workplace Toolkits
- Legal and Financial Assistance
- HelpNet





## WORKPLACE SOLUTIONS & FEATURES

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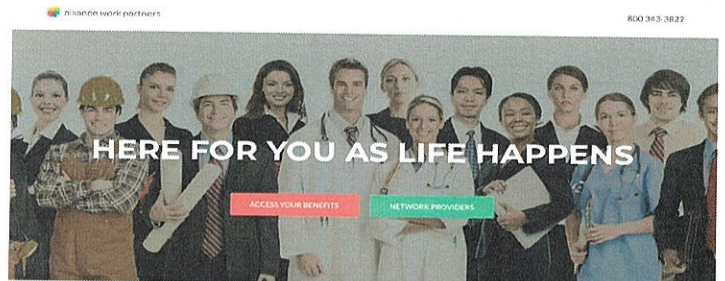


- Workplace Protection
- National Network of Substance Abuse Professionals (SAPs)
- Drug and Alcohol Awareness Training
- Return to Work Programs
- Dedicated Account Management Team
- Transition and Implementation
- Promotional Materials
- Trained Crisis Intervention Staff
- EAP Program Orientation for Employees
- EAP Program Orientation for Supervisors
- Trending and Reports
- Frontline Supervisor
- Health and Benefit Fair Participation
- Ongoing Support

## TRAINING & EDUCATIONAL SEMINARS

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- Professional Development Seminars
- Personal Growth and Development Seminars
- Organizational Training
- Organizational Development and Customized Training
- Drug-Free Workplace Seminars
- Customized EAP Website/Learning Center
- Online Training and Resources



Visit Alliance Work Partners website at: <https://www.awpnow.com/>

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# TEXAS ASSOCIATION *of* COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

**ATTENTION County and District Benefits Administrators:**

**The TAC-HEBP Employee Self-Service (ESS) Portal is available for employees to enter their Open Enrollment elections**

- Employees can make their Open Enrollment elections through the portal during the annual open enrollment window period.
- Employees can make address and phone number changes through the portal throughout the year. Changes will be posted to OASys in real time.

***NOTE: OASys will produce a weekly report for admin users listing any changes that have been entered by an employee.***

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**+** Employees can access their Resource Guides and Benefit Booklets through the portal. As always, they will have a direct sign-on into the BCBS and Navitus sites to review their claims, search for providers, and take advantage of all the resources there. We'll also post helpful tips and informational videos from time to time during the year.

**+** TAC HEBP can add links for your other benefit providers to the portal, so employees can use this as a '1-stop shop' for accessing information about all the benefits available to them.

**+** The portal will require enhanced sign-on security with multi-factor authentication. This requires members to register with an email address or cell phone number. Once they register, this information will be saved to their OASys record.



# EMPLOYEE SELF-SERVICE (ESS) PORTAL: MYBENEFITS.COUNTY.ORG

## ***Responses to common questions regarding ESS functionality:***

- Employees are not required to use the self-service portal to enter their open enrollment changes. Many of our groups have been asking for this functionality for some time, but it is up to each county to decide how they would like to keep up with employee's benefit elections.
- The ESS Portal is the same portal (*mybenefits.county.org*) we've used for several years. Employees can directly access BCBS and Navitus, with links to their Wellness programs, TCDRS etc.
- TAC values every member and employee, and respects their privacy. Personal contact information is important to us and our claims administrators (BCBSTX and Navitus) so that members can be reached with information about their benefits and assistance in using them. TAC will not sell or share email addresses with any other entity.
- Employees who don't have (or don't want to provide) an email address are encouraged to set up a free email account (gmail, Yahoo, Hotmail etc.) just for this purpose. They never have to access the account again if they don't want to.





# TEXAS ASSOCIATION *of* COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

## Health Care Reform Updates for 2020 – 2021 Plan Year

### *Affordable Care Act (ACA) Related Legislation*

As of the date of this printing, ACA regulations and requirements are still in effect. TAC HEBP continues to monitor legislative efforts to modify the ACA, and will provide education and guidance to our Pool members if and when changes affecting your plans and/or reporting requirements are forthcoming. We utilize outside sources as well as TAC staff to monitor and analyze this issue. The guidance in this document is based on the law as it currently exists. However, the update should not be regarded as legal advice. We encourage you to check with your county attorney for a thorough discussion of statutory interpretation issues.

### *Large Employer Coverage Mandates*

Effective for plan years beginning on or after Jan. 1, 2016, employers with 50 or more full time equivalent employees must offer health coverage to at least 95% of employees who work an average of 30 hours per week or more. The coverage must meet minimum value (pay at least 60 percent of covered costs; all TAC plans comply with this requirement) and be considered affordable (employer cannot collect more than 9.78% of employee's W-2 Box 1 income for self-only coverage).

### *Measurement Periods*

All groups should have defined a standard measurement period of between 3 and 12 months for tracking the hours of part-time and variable-hour employees. For plan years beginning on or after January 1, 2015, employees who work on average 30 hours per week or more during the preceding measurement period must be offered health coverage. The employee must be offered coverage for a period of time equal to or greater than the length of the measurement period but not less than 6 months. Coverage will start after a standard administrative period of not more than 90 days.

### *ACA Fees*

ACA fees for this plan year are as follows: The Patient-Centered Outcomes Research Institute (PCORI) fee is to help fund research relating to patient-centered outcomes and evaluating risks and benefits of medical treatments, services, etc. This fee was originally set to end after 2019, but has been reinstated. For 2019, the fee was \$2.45 per member per year, payable in July, 2020.

For the 2020-21 plan year, the HEBP Board of Directors has elected to pay these fees on behalf of all Pool members.

## *ACA Reporting*

2020 is the sixth year of reporting requirements under the ACA. In January 2021\*, all employers with 50 or more full time equivalent employees must provide a form 1095C to every employee or former employee who worked full time for any month during calendar year 2020. (Full time for ACA purposes is 30 hours per week on average over the course of the employer's measurement period.)

*\* Historically, each year the IRS has extended this deadline to the end of March.*

A copy of these forms must be provided to the IRS along with an informational transmittal form (1094C). The purpose of this reporting is to allow the IRS to determine whether the employer has satisfied the ACA Employer Mandate, and to determine whether employees and their dependents were eligible for subsidies when purchasing coverage through the Federal Exchange.

TAC HEBP will continue offering ARTS (Affordable Care Act Reporting and Tracking Service) to counties and districts who utilize our health plans at no charge, which will enable them to produce the necessary forms. In addition to producing the required forms, ARTS will also track lookback measurement periods and perform affordability testing when applicable.

Your employees and any covered retiree or COBRA participant may also receive a form 1095B from TAC HEBP. The 1095B provides proof of individual coverage for employees and their enrolled dependents. Although penalties were eliminated for the ACA Individual Mandate as of 1/1/2019, the IRS has not eliminated the requirement for producing and filing these forms. **For 2020, TAC HEBP will provide 1095B forms to employees only upon request.** The forms will still be filed with the IRS as required.

## *Limits on Cost-sharing and Combined maximum out-of-pocket*

Effective for plan years beginning on or after Jan. 1, 2014, **non-grandfathered** health plans are subject to limits on cost-sharing or out-of-pocket costs. For 2020-2021, out-of-pocket expenses may not exceed **\$8,150** for self-only coverage and **\$16,300** for family coverage. Out-of-pocket costs which apply to these limits include medical plan co-payments, deductibles, and co-insurance AND prescription co-payments and deductibles.

## *Excise Tax*

Implementation of an Excise Tax on health plans costing more than a federally-established threshold, a provision of the ACA as originally adopted, has been revoked by Congress as of this time. TAC HEBP will be monitoring this and any other ACA developments, and will update you if changes occur that might affect your health plan.

*Updated May 5, 2020*

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EMPLOYEE BENEFITS CONSULTANT

**Kathy Davenport**

WELLNESS CONSULTANT

**Stacey Bruington**

EMPLOYEE BENEFITS SPECIALIST

**Melissa Lopez**

## NORTHEAST

EMPLOYEE BENEFITS CONSULTANT

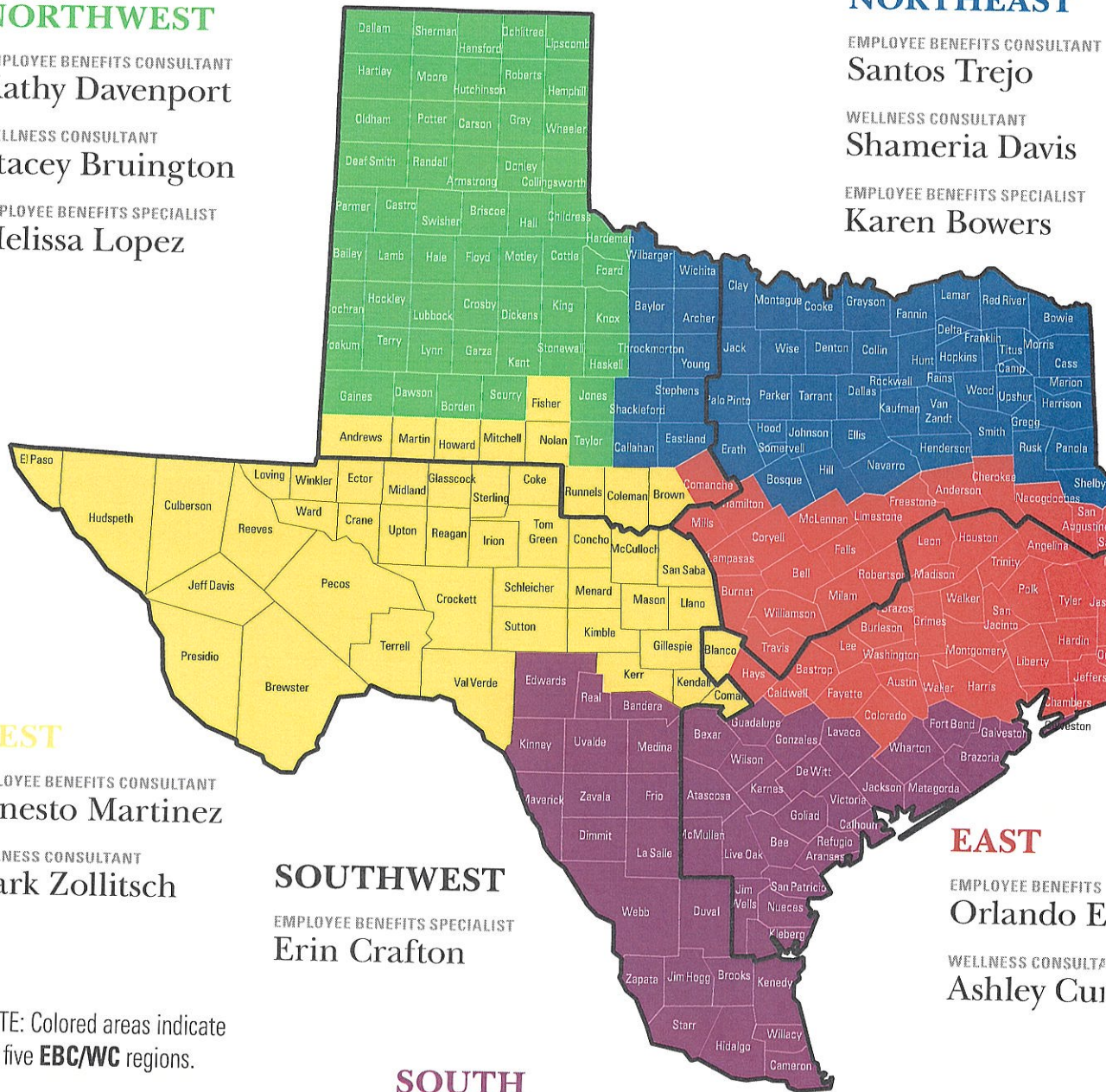
**Santos Trejo**

WELLNESS CONSULTANT

**Shameria Davis**

EMPLOYEE BENEFITS SPECIALIST

**Karen Bowers**



## WEST

EMPLOYEE BENEFITS CONSULTANT

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**Clarissa Martinez**

WELLNESS CONSULTANT

**Biral Patel**

## SOUTHEAST

EMPLOYEE BENEFITS SPECIALIST

**Lauren Henry**

NOTE: Colored areas indicate the five **EBC/WC** regions.

■ East      ■ Northeast

■ Northwest      ■ West

■ South

**Bold lines** indicate the four **EBS** regions.

FEBRUARY 2020

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county.org







# TEXAS ASSOCIATION *of* COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

## *Frequently Asked Questions about Grandfathered Health Benefit Plans*

### 1) What is a “grandfathered plan”?

Grandfathered health plans under the Patient Protection and Affordable Care Act (ACA) are those existing without major changes to their provisions since March 23, 2010, the date of the ACA's enactment.

### 2) What makes a non-grandfathered plan different?

*Grandfathered* plans do not have to comply with several ACA requirements, including those listed below, which *Non-grandfathered* plans must comply with:

- Provide coverage for preventive care without member cost-sharing (no co-pays, deductibles, or coinsurance) when using an in-network provider. There are over 60 services included in this requirement, including annual wellness visits for all ages, age and gender appropriate immunizations and screenings, and contraceptive services for women. A full listing can be found at <http://www.healthcare.gov/what-are-my-preventive-care-benefits>
- Limitations on out-of-pocket maximum amounts
- External review of appeals: a member who contests the denial of a service recommended by his/her medical provider can request an appeal by a federally appointed external review board; the cost of this appeal is charged to the plan
- Coverage for out-of-network emergency services at no additional cost over in-network cost
- Coverage of routine costs associated with clinical trials

### 3) What causes a plan to lose grandfathered status?

*Changing the balance of employer and employee share of costs as follows:*

- Increase co-pays by more than \$5 or a percentage equal to medical inflation plus 15%, whichever is greater.

*Example: if the plan had a \$20 office visit co-pay in March of 2010, it could be increased to \$25 without losing grandfathered status*

- Increase deductible or maximum out-of-pocket amount by more than a percentage equal to medical inflation plus 15%, whichever is greater.

*Example: if the plan had a \$500 deductible and a \$2500 out-of-pocket maximum in March of 2010, it could increase the deductible to \$600 and the out-of-pocket maximum to \$3100 without losing grandfathered status (note that these are non-standard amounts for TAC HEBP plans)*

- Decrease percentage of plan coinsurance rate by any amount.

*Example: if the plan had a 90% coinsurance rate in March of 2010, it could not decrease the rate to 80% without losing grandfathered status*

- Lower the employer contribution rate by more than 5% for any group of covered persons, or increase employee contribution rate from \$0 to any amount.

*Example: if the employer paid \$1000 per month toward the cost of employee and spouse coverage in March of 2010, it could not decrease the contribution below \$950 without losing grandfathered status*

- Add or reduce an annual dollar limit (overall or for a specific service).

*Example: if the plan had no limit on charges for physical therapy services in March of 2010, it could not impose a \$5000 per year maximum on them without losing grandfathered status*

- Eliminate or substantially reduce benefits for a particular condition.

*Example: if the plan covered counseling and prescription drugs to treat certain mental disorders in March of 2010, it could not eliminate coverage for counseling without losing grandfathered status*

#### 4) **What plan changes can be made which will not cause the plan to lose grandfathered status?**

- Changing insurer or third-party administrator, as long as benefits don't change
- Changing from self-insured to fully-insured, as long as benefits don't change
- Increasing benefits, including adding a wellness program
- Passing along premium increases, as long as cost-sharing percentages or flat dollar amounts increase by <5% (exception: if employee contribution is \$0, no increase is allowed).
- Adding a coverage tier (such as employee + 1 child), as long as cost-sharing percentages are consistent with other tiers and stay within the 5% guidelines
- Moving drugs to a different copay tier because the drugs have become available as generic
- Changing provider networks, as long as benefits don't change
- Changes required by law

#### ADDITIONAL NOTES:

- Because of the additional coverage requirements and reduction of employee cost share required by the ACA, changing from grandfathered to non-grandfathered status may result in a small rate increase. For TAC HEBP groups, this increase is estimated at less than 1%.
- Under the current regulations, there is no specific end date for grandfathered status.
- Plan changes are measured cumulatively since March 2010.
- Plans must include a notice about grandfathered status in significant participant communications, such as enrollment materials and summary plan descriptions.
- All plans in the TAC HEBP Private Exchange are non-grandfathered.



# TEXAS ASSOCIATION *of* COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

## Now available: TAC HEBP Voluntary Dental

### Voluntary Dental Plan Options

Plan Benefits	Plan I	Plan II	Plan III	Plan IV
<b>Maximum Annual Benefit</b>	\$2,000.00	\$1,500.00	\$1,000.00	\$750.00
<b>Preventive Care</b>	100%	100%	80%	80%
<b>Basic Care</b>	80%	80%	80%	80%
<b>Major Services</b>	50%	50%	50%	0%
<b>Annual Deductible</b> <i>(waived for preventive care)</i>	\$50.00	\$50.00	\$75.00	\$75.00
<b>If selected, Orthodontic Lifetime Maximum</b> <i>(up to age 26)</i>	50% up to \$2,000.00	50% up to \$1,500.00	50% up to \$1,000.00	Not Available

- Groups may select either a 2-rate or 4-rate structure.
- Orthodontics coverage is optional per group, not per individual family.

**To request a price quote, contact your Employee Benefits Specialist**

P.O. Box 2131 • Austin, Texas 78768-2131 • (512) 478-8753 • (800) 456-5974 • (512) 481-8481 Fax • [www.county.org](http://www.county.org)

Group Health Coverage • Retiree Medical • Dental Benefits • Pharmacy Benefits • Life Insurance • Disability Coverage