



June 28, 2022

Hon. Jacques L. Blanchette
Tyler County Judge
201 Veterans Way Ste 9
Woodville, TX 75979-5662

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 for your upcoming plan anniversary date.

For over a decade, the Pool renewal has been below the state average for health plan rate increases. We continue to see an uptick in high-cost claimants (individuals whose claims exceed \$50,000). Claims related to the COVID-19 pandemic surged between late 2020 and early 2022 (so far, the Pool has paid nearly \$37 million in COVID-19-related claims). Still, the Pool renewal average of 5.9% is once again well below the projected 2022 medical and prescription drug trend (healthcare cost inflation) for Texas, which is 9.8–13.8%.

Renewal rates are set annually using a comprehensive actuarial process that determines the amount needed by the Pool to fund claims and operating costs 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 gender statistics, and geographic area (healthcare claims vary significantly by geographic region of the state). Based on this analysis, your group's renewal rate may be above or below the Pool average. Your renewal rates for Plan Year 2023 are enclosed, along with your TAC Employee Benefits and Wellness Consultants' contact information. Your renewal information may include alternate benefit plans with pricing (if not, alternates are available upon request).

We are pleased to announce that TAC HEBP is offering a new service to our members: Cafeteria Plan (aka Section 125) Administration. The base service, free to Pool members, will provide you with compliance education and a plan document. Additional services are coming – please see the material included with your renewal packet for more information.

TAC HEBP understands how valuable healthcare benefits are 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 during the upcoming plan year.

Sincerely,

A handwritten signature in black ink, appearing to read "Quincy Quinlan".

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

cc: Leann Monk
Jackie Skinner



TEXAS ASSOCIATION of COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL

Tyler County's Renewal Rate change(s) for Plan Year 2023:

Health Plan: 3.5%

Dental Plan: Employee or Employer-paid options available

Life Plan(s): No change to current Basic Life rates.

Vision Plan: Plan update: lower copays for PY 2023 with no change to Vision rates

NOTE: Deadline for returning signed renewal documents to TAC HEBP: August 16, 2022

Contact your TAC Employee Benefits Consultant right away if you:

- Want to discuss alternates (which may lower rates), 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

- **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 complete both forms and return them with your renewal. Contact your TAC Wellness Consultant if you have any questions.

Your Wellness Consultant: Ashley Cureton (ashleyc@county.org) (800) 456-5974.

- **Employee Open Enrollment:** You have the option to allow employees to make their open enrollment changes online through the Employee Self-Service portal by logging on to <https://mybenefits.county.org>.
- **Affordable Care Act Fees:** The HEBP Board voted to pay 2022 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 22 and contains the forms and notices your group will need to process employee benefit renewals.
- **When It's Due:** Once your renewal benefit decision has been approved, complete Tyler County's Renewal Notice and Benefits Confirmation (RNBC), 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 16, 2022.**

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

Renewal Attachments:

Renewal Letter

Renewal Documents

- Renewal Notice and Benefit Confirmation (RNBC)
- Alternate Health Plan Proposal (available by request for HRA, HSA or BEN 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

New: Introduction to Cafeteria Plan Administration services

Voluntary Dental plans - quote available upon request

Improved for PY2023: Vision Plan Benefit Highlights

Health Care Reform update memo for 2022-23

Employee Self-Service for Open Enrollment instructions

Alternate Plan Selection and Online RNBC completion instructions

TAC HEBP Territory Map and Contacts

Grandfathered Plan FAQ



2022 - 2023 Renewal Notice and Benefit Confirmation

Group: 22946 - Tyler County

Anniversary Date: 11/01/2022

Return to TAC by: 08/17/2022

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 haileyg@county.org.

For any plan or funding changes other than those listed below, please contact Hailey Gajewski 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: 3.50%

Your payroll deductions for medical benefits are:

Pre Tax

Tier	Current Rates	New Rates Effective 11/1/2022	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$793.42	\$821.18	\$ 821.18	\$ ∅	\$ ∅
Employee + Child	\$1,045.28	\$1,081.86	\$ 821.18	\$ 260.68	\$ ∅
Employee + Child(ren)	\$1,229.28	\$1,272.30	\$ 821.18	\$ 451.20	\$ ∅
Employee + Spouse	\$1,509.14	\$1,561.96	\$ 821.18	\$ 740.78	\$ ∅
Employee + Family	\$1,887.90	\$1,953.98	\$ 821.18	\$ 1132.80	\$ ∅

_____ 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 11/1/2022	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$6.20	\$6.20	\$ 6.20	\$ ∅	\$ ∅
Employee + Child(ren)	\$12.44	\$12.44	\$ 6.20	\$ 6.24	\$ ∅
Employee + Spouse	\$11.80	\$11.80	\$ 6.20	\$ 5.60	\$ ∅
Employee + Family	\$18.28	\$18.28	\$ 6.20	\$ 12.08	\$ ∅

_____ 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

	Current Rates	New Rates Effective 11/1/2022	Amount Employer Pays	Amount Employee/ Retiree Pays (if applicable)
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*

County/Group processes TAC HEBP Continuation of Coverage on OASys (< 20 employees)

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

_____ 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 **08/17/2022** 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

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

COUNTY REPRESENTATIVE

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

Please list changes and/or corrections below.

Name/Title Leann Monk/County Treasurer

Address 100 West Bluff Street, Room 103
Woodville, TX 75979-5245

Phone 409-283-3054

Fax 409-283-6305

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

PO Box 2070

WOODVILLE TX 75979

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.



2022 - 2023 Alternate Plan Proposal

Group: 22946 - Tyler County

Effective Date: 11/01/2022

	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
Rates				
Employee Only	\$793.42	\$821.18	\$796.22	\$798.56
Employee + Child	\$1,045.28	\$1,081.86	\$1,048.84	\$1,051.96
Employee + Child(ren)	\$1,229.28	\$1,272.30	\$1,233.40	\$1,237.06
Employee + Spouse	\$1,509.14	\$1,561.96	\$1,514.10	\$1,518.62
Employee + Family	\$1,887.90	\$1,953.98	\$1,894.02	\$1,899.68
Medical Plan				
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
Prescription Plan				
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 08/17/2022 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 _____

12 Month Medical Report

Post Date : Mar 2022

Metrics : (Average Members, Average Subscribers, Total Contribution, Medical Paid, Pharmacy Paid, Paid)

Rows : (Paid Date)

Columns : (Metrics)

Paid Date : Last 12 Months

Coverage Type : (Medical)

Group : (022946 - TYLER COUNTY/TAC)

Paid Date	Average Subscribers	Average Members	Total Contribution	Medical Paid	Pharmacy Paid	Paid
Apr 2021	110	151	\$97,086.32	\$159,991.30	\$23,969.44	\$183,960.74
May 2021	109	148	\$95,291.74	\$49,716.72	\$12,137.98	\$61,854.70
Jun 2021	105	140	\$91,621.20	\$55,127.35	\$20,184.34	\$75,311.69
Jul 2021	104	140	\$90,240.94	\$28,892.36	\$32,283.67	\$61,176.03
Aug 2021	107	148	\$92,577.98	\$87,417.93	\$26,260.86	\$113,678.79
Sep 2021	107	147	\$92,513.46	\$27,681.90	\$19,381.86	\$47,063.76
Oct 2021	106	145	\$92,274.04	\$37,091.19	\$26,519.57	\$63,610.76
Nov 2021	108	146	\$96,356.66	\$45,143.15	\$21,980.43	\$67,123.58
Dec 2021	107	143	\$96,714.22	\$37,097.74	\$32,382.27	\$69,480.01
Jan 2022	108	144	\$96,250.36	\$42,717.10	\$21,363.60	\$64,080.70
Feb 2022	109	145	\$97,043.78	\$46,908.61	\$24,648.98	\$71,557.59
Mar 2022	108	144	\$97,043.78	\$42,702.23	\$25,226.66	\$67,928.89
Total: Selected Filter(s)	107	145	\$1,135,014.48	\$660,487.58	\$286,339.66	\$946,827.24



HCC - No PHI

Post Date: Mar 2022

Service Category: Total (Inpatient Facility, Outpatient Facility, Pharmacy, Professional)

Metrics: (Paid)

Claim Type: (MEDICAL, PHARMACY)

Coverage Type: (Medical)

Group: (022946 - TYLER COUNTY/TAC)

Paid Month: Last 12 Months

Paid: greater or equal 10000.00

Paid: (descending)

Encrypted Member ID	Member Status	Medical Paid	Pharmacy Paid	Paid
6380269581	Active	\$73,836.20	\$17.77	\$73,853.97
17080240642	Active	\$4,152.23	\$69,125.40	\$73,277.63
18411048605	Active	\$22,530.71	\$26,428.85	\$48,959.56
8610115857	Active	\$40,633.35	\$315.61	\$40,948.96
3060360652	Active	\$36,643.96	\$5.87	\$36,649.83
7040089285	Active	\$16,240.41	\$11,569.02	\$27,809.43
3430164460	Active	\$25,666.88	\$60.92	\$25,727.80
19770605457	Active	\$21,216.34	\$3,641.84	\$24,858.18
3040610741	Active	\$4,156.40	\$17,192.85	\$21,349.25
19770605442	Active	\$7,527.45	\$12,029.37	\$19,556.82
19320110657	Active	\$18,804.21	\$0.00	\$18,804.21
3040610727	Active	\$2,109.27	\$16,058.47	\$18,167.74
3061767140	Active	\$9,330.22	\$8,629.10	\$17,959.32
19770707860	Active	\$16,106.74	\$495.96	\$16,602.70
18870681741	Active	\$5,461.27	\$10,364.72	\$15,825.99
17740312333	Active	\$15,236.11	\$0.00	\$15,236.11
17560626902	Active	\$14,708.71	\$40.81	\$14,749.52
18270543764	Active	\$2,342.94	\$12,257.91	\$14,600.85
19270418257	Active	\$6,214.51	\$8,203.53	\$14,418.04
5910374100	Active	\$5,222.80	\$8,585.36	\$13,808.16
19670098461	Active	\$9,750.55	\$2,946.56	\$12,697.11
5950015259	Active	\$12,218.70	\$14.39	\$12,233.09
16790501337	Active	\$5,754.57	\$6,239.09	\$11,993.66



TEXAS ASSOCIATION of COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL

Encrypted Member ID	Member Status	Medical Paid	Pharmacy Paid	Paid
4000862035	Active	\$8,621.83	\$3,064.50	\$11,686.33
19490201819	Active	\$10,599.32	\$936.55	\$11,535.87
3055500443	Active	\$11,202.44	\$298.74	\$11,501.18
3040610768	Active	\$2,567.32	\$8,906.87	\$11,474.19
3051071306	Active	\$9,698.74	\$490.69	\$10,189.43
Query Totals: 28		\$418,554.18	\$227,920.75	\$646,474.93



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: Leann Monk

Title: Treasurer

Address: PO Box 2070
Woodville, TX 75979-2070

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

Phone Number: (409) 283-3054

Fax Number:

Please list changes and/or corrections:

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: Mrs. Jackie Skinner

Title:

Address: PO BOX 2039
Woodville, TX 75979

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

Phone Number: (409) 283-3652

Fax Number:

Please list changes and/or corrections:

Contracting Authority Signature: _____

Date: _____



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 2022-2023 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

Plan Year 2023 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 16, 2022.**

NOTE: Returning your RNBC past the due date will result in a delay in implementing your Plan Year 2023 renewal, including employee open enrollment changes.

Please make copies of all documents for your records.

PLAN YEAR 2023

**NOVEMBER 1
ANNIVERSARY DATE**

KEY RENEWAL DATES:

JUNE

28

Renewals Sent to Groups*
(via email to HEBP Contracting Authority and Primary Contact)

AUGUST

16

Renewal Response Due to TAC HEBP

AUGUST

22

Open Enrollment Toolkits Sent (via email)

SEPTEMBER

14

OASys Entry Opens

OCTOBER

25

November Pre-Invoice Distributed

OCTOBER

31

OASys Entries Close

NOVEMBER

01

Renewal In Effect / Final Invoice Distributed

INTRODUCING OUR NEWEST VENDOR PARTNER: WEX

WEX offers Section 125 (Cafeteria Plan) Administration services for TAC HEBP member groups

For Plan Year 2023, TAC HEBP will provide, **at no cost to our member groups**, the services of WEX to administer your Premium Only Plan (POP), which allows you to deduct employee's insurance premiums on a pre-tax basis.

Not sure what a "Cafeteria Plan" or "POP" is? Here are the basics:

What is Section 125?

- Often used interchangeably with the term 'Cafeteria Plan', Section 125 is part of the IRS Code that allows employees to convert a taxable cash benefit (salary) into non-taxable benefits. Under a Section 125 program, employers may choose to pay for qualified benefit premiums before taxes are deducted from employee paychecks. Congress created Section 125 in an effort to make benefit programs more affordable for employees.
- In order to deduct employee benefit premiums pre-tax, an employer must set up a Plan Document and create a Summary Plan Description (SPD).

What are the advantages of offering benefits through a Cafeteria Plan?

- Employees receive more money in their paychecks, because their premium contributions are deducted before payroll taxes are calculated.
- Employers save money, because their gross payroll is reduced by the pre-tax deductions, which makes their Social Security tax and Workers Compensation contributions lower.
- Employers can offer additional financial benefits such as Flexible Spending Accounts (FSA), Health Savings Accounts (HSA), and Health Reimbursement Arrangements (HRA) to help employees with their out-of-pocket healthcare expenses, under the umbrella of the Cafeteria Plan.

What is a POP?

The **Premium Only Plan (POP)** is the building block of the Cafeteria Plan. It allows for qualified employee paid group insurance premiums to be paid with **pre-tax dollars**. Examples of qualified premiums (if offered by employer) are:

- Health
- Prescription
- Dental
- Vision
- Group Term Life (up to \$50,000.00)
- Cancer
- Medicare Supplement
- Hospital Indemnity

If your County or District is interested in using WEX services for your Cafeteria Plan Document and SPD, let your Employee Benefits Consultant know. **This service is free to TAC HEBP member groups.**

For Counties or Districts whose benefits currently include FSA, HSA, or HRA plans*:

WEX offers administration of these plans at very competitive rates – contact your Employee Benefits Consultant for pricing information. WEX provides state-of-the-art administration, using:

- A single debit card system with point-of-sale approval capability
- A robust mobile app
- Industry-leading customer service









** Not currently offering FSA/HSA/HRA? Watch for upcoming webinars and education and consider adding one or more of these benefits for Plan Year 2024.*

The Power of One

The administration of your cafeteria plan, including Section 125 Plan Document/ SPD for pre-tax premiums, health savings accounts (HSAs), flexible spending accounts (FSAs), and health reimbursement arrangements (HRAs) is even easier when you choose WEX as your one partner for all of these plans.*



Benefits for you - the employer

-  Money saved through bundled pricing.
-  Time saved by working in one technology platform, LEAP.
-  One partner with flexible support options for all of your service needs.
-  Simplified exchange of data by using one file for all benefits.
-  Easier implementation, renewal and open enrollment by working with one trusted partner.
-  Less risk sending your employees' personal information to one partner.
-  Experienced oversight and guidance to ensure compliance when your benefits are viewed holistically.
-  Reporting and analytics for all your plans in one place.

90%

Of our clients choose us because they're looking for a better service experience for themselves and their employees.

4.65 of 5

The rating our clients gave our single-source employee benefits administration hub.

94%

Of our clients continue to partner with us during renewal because of the experience and support we provide them and their employees.

Benefits for employees



Avoid confusion and easily spend funds with one, smart debit card for all benefits. Or pay on mobile through Apple Pay or Samsung Pay.



Consistent experience whether on mobile or online for all their benefits.



One source for all questions, including options such as phone, email, chat, and a 24/7 knowledgebase.

* FSA/HSA/HRA administration available in Plan Year 2023 to groups currently offering these benefits; available Plan Year 2024 to all groups.

Summary of Vision Benefits

Texas Association of Counties

Updated Benefits Effective 10/1/2022

12/12/24/\$130		
Frequency		
Examination		Once every 12 months
Lenses or contact lenses		Once every 12 months
Frame		Once every 24 months
Contact lens eval/fitting		N/A
Vision Care Services		
	In-Network Member Cost	Out-of-Network Reimbursement*
Exam with dilation as necessary	\$10 copay	Up to \$30
Contact lens fit and follow-up	Up to \$40 for standard; 10% off retail price for premium	N/A
Frames		
Any available frame at provider location	\$0 copay, \$130 allowance, 20% off balance over \$130	Up to \$65
Standard Lenses		
Single vision	\$15 copay	Up to \$25
Bifocal	\$15 copay	Up to \$40
Trifocal	\$15 copay	Up to \$55
Lenticular	\$15 copay	Up to \$55
Standard progressive lens	\$70 copay	Up to \$40
Premium progressive lens	See table on page 2.	Up to \$40
Lens Options		
Tint (solid and gradient)	\$15	N/A
Scratch resistant coating	\$0	Up to \$5
Polycarbonate lenses	\$0 kids; \$40 adults	Up to \$5 kids
Ultraviolet coating	\$15	N/A
Anti-reflective coating	See table on page 2.	N/A
High index lenses	20% off retail	N/A
Polarized lenses	20% off retail	N/A
Photochromic/transitions plastic	\$75	N/A
Contact Lenses (in lieu of spectacle lenses)		
Conventional	\$0 copay, \$130 allowance, 15% off balance over \$130	Up to \$104
Disposable	\$0 copay, \$130 allowance, plus balance over \$130	Up to \$104
Medically necessary	\$0 copay, paid-in-full	Up to \$210
Other		
Laser vision correction	15% retail price or 5% off promotional price	N/A
Additional pairs benefit	40% off purchase of complete pair of eyeglasses and a 15% off conventional contact lenses once the funded benefit has been used	N/A
Amplifon hearing discount	40% off hearing exams and low price guarantee on discounted hearing aids	N/A
Additional discounts	20% off non-covered items with limitations	N/A
Monthly Premium		
Employee	\$6.20	
Employee + spouse	\$11.80	
Employee + child(ren)	\$12.44	
Employee + family	\$18.28	

Eligibility: All active full-time employees as defined by your employer. Dependent coverage is available to age 26.



Insurance products issued by Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148.



Additional discounts

40% OFF

Complete pair of prescription eyeglasses

20% OFF

Non-prescription sunglasses

20% OFF

Remaining balance beyond plan coverage

These discounts are not insured benefits and are for in-network providers only.

Take a sneak peek before enrolling

- For a complete list of in-network providers near you, visit eyemedvisioncare.com/bcbstxvis or call 855-556-8796.
- For LASIK providers, call 877-5LASER6.



Summary of Benefits Continued

Progressive Price List ¹	Member Cost In-Network
Standard progressive	\$70 copay
Premium progressives ² as follows:	
Tier 1	\$90 copay
Tier 2	\$100 copay
Tier 3	\$115 copay
Tier 4	\$70 copay 80% of charge less \$120 allowance
Anti-Reflective Coating Price List ¹	Member Cost In-Network
Standard anti-reflective coating	\$45
Premium anti-reflective ² coatings as follows:	
Tier 1	\$57
Tier 2	\$68
Tier 3	80% of charge
Other Add-ons Price List	Member Cost In-Network
Photochromic	\$75
Polarized	80% of charge

Plan Exclusions

1. Orthoptic or vision training, subnormal vision aids and any associated supplemental testing; aniseikonic lenses
2. Medical and/or surgical treatment of the eye, eyes or supporting structures
3. Any eye or vision examination, or any corrective eyewear required by a policyholder as a condition of employment; safety eyewear
4. Services provided as a result of any Workers' Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof
5. Plano (non-prescription) lenses and/or contact lenses
6. Non-prescription sunglasses
7. Two pair of glasses in lieu of bifocals
8. Services rendered after the date an insured person ceases to be covered under the policy, except when vision materials ordered before coverage ended are delivered, and the services rendered to the insured person are within 31 days from the date of such order
9. Services or materials provided by any other group benefit plan providing vision care
10. Lost or broken lenses, frames, glasses or contact lenses will not be replaced except in the next benefit frequency when vision materials would next become available



¹Member Reimbursement Out-of-Network will be the lesser of the listed amount or the member's actual cost from the out-of-network provider. In certain states, members may be required to pay the full retail rate. ²Blue Cross Blue Shield of Texas Vision Care reserves the right to make changes to the products on each tier and the member out-of-pocket costs. Fixed pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. ³Premium progressives and premium anti-reflective designations are subject to annual review by EyeMed's Medical Director and are subject to change based on market conditions. Fixed pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. Not available in all states. Some provisions, benefits, exclusions or limitations listed herein may vary.

For employee use. This piece is for illustrative purposes only and is not a contract. It is intended to provide only a brief summary of the type of policy and insurance coverage advertised. The policy provides the actual terms of coverage, including any exclusions, conditions and limitations to coverage.

All plans are based on a 48-month contract term and 48-month rate guarantee. Premium is subject to adjustment even during a rate guarantee period in the event of any of the following events: changes in benefits, employee contributions, the number of eligible employees, or the imposition of any new taxes, fees or assessments by Federal or State regulatory agencies. Benefits may not be combined with any discount, promotional offering or other group benefit plans. Benefit allowance provides no remaining balance for future use with the same benefits year. Fees charged for a non-insured benefit must be paid in full to the Provider. Such fees or materials are not covered. This is a snapshot of your benefits. The Certificate of Insurance is on file with your employer.

Benefits are available from the EyeMed Vision Care, LLC provider network and are administered by First American Administrators, Inc., independent companies that offer benefits on behalf of Blue Cross and Blue Shield of Texas. Blue Cross and Blue Shield of Texas, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association. Insurance products issued by Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148. Dearborn Life Insurance Company is an independent licensee of Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.



BlueCross BlueShield of Texas





TEXAS ASSOCIATION *of* COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

TAC HEBP Voluntary Dental*

Voluntary Dental Plan Options

Plan Benefits	Plan I	Plan II	Plan III	Plan IV
Maximum Annual Benefit	\$2,000.00	\$1,500.00	\$1,000.00	\$750.00
Preventive Care	100%	100%	80%	80%
Basic Care	80%	80%	80%	80%
Major Services	50%	50%	50%	0%
Annual Deductible <i>(waived for preventive care)</i>	\$50.00	\$50.00	\$75.00	\$75.00
If selected, Orthodontic Lifetime Maximum <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.

*** Voluntary Dental plans do not require any employer contribution
(100% employee-paid)**

To request a price quote, contact your Employee Benefits Specialist



TEXAS ASSOCIATION *of* COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

Affordable Care Act (ACA) Update for 2022 – 23 Plan Year

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 9.61% of employee's W-2 Box 1 income for self-only coverage).

Measurement Periods

Employers 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 2021, the fee was \$2.79 per member per year, payable in July, 2022.

For the 2022-23 plan year, the HEBP Board of Directors has elected to pay these fees on behalf of all Pool members.

ACA Reporting

2022 is the 8th year of reporting requirements under the ACA. In January 2023*, 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 2022. (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 February.*

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 be issued 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. Forms for calendar year 2022 will be available **upon request only** in February 2023. The forms will 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 2022-2023, out-of-pocket expenses may not exceed \$8,700 for self-only coverage and \$17,400 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 2022

OPEN ENROLLMENT MADE EASIER!

MYBENEFITS.COUNTY.ORG

With the TAC HEBP Employee Self-Service (ESS) Portal...

Employees can make their Open Enrollment elections online during the annual open enrollment period.

Changes are posted to OASys in real time.

OASys will produce a weekly report for admin users with all changes that have been entered by employees.

Customize the ESS Portal for your county/district!

TAC HEBP can add links to your other benefit providers on the portal, so employees can use the ESS to access information about all the benefits available to them.

TAC HEBP can help you promote MyBenefits.County.Org to employees with promotional materials, email blasts, and how-to instructions.

Employees can make address and phone number changes online throughout the year.

Employees who do not have election changes for the new plan year can let their elections automatically roll over.

Employees can also access:

- Resource Guides
- Benefit Booklets
- Confirmation Statements
- Medical, Prescription, Dental*, Vision*, & Life* Benefits
- TCDRS
- Healthy County
- Employee Assistance Program*
- And so much more!

The ESS Portal has enhanced sign-on security with multi-factor authentication. This requires members to register with an email address or cell phone number. Once registered, this information will be saved to their OASys record.



EMPLOYEE SELF-SERVICE (ESS) PORTAL FAQs

MYBENEFITS.COUNTY.ORG

- Employees are not required to use the ESS Portal to enter their open enrollment elections. It is up to the county to decide how they would like to track employee's benefit elections at open enrollment.

If your county/district does not want to allow employees to make open enrollment elections on the ESS Portal, please contact your TAC Employee Benefits Specialist to request that the feature is turned off.

- The ESS Portal is the same portal located at mybenefits.county.org that we've used for several years. Employees can directly access BCBSTX and Navitus with additional links to Healthy County, TCDRS, etc.
- TAC values every member, and respects their privacy. Personal contact information is important to us and our claims administrators (BCBSTX and Navitus) so members can be reached about their benefits. TAC will not sell or share email addresses with any other entity.
- Employees who do not have (or do not want to provide) an email address are encouraged to set up a free email account (Gmail, Yahoo, etc.) just for this purpose. They never have to access the account again if they do not want to.



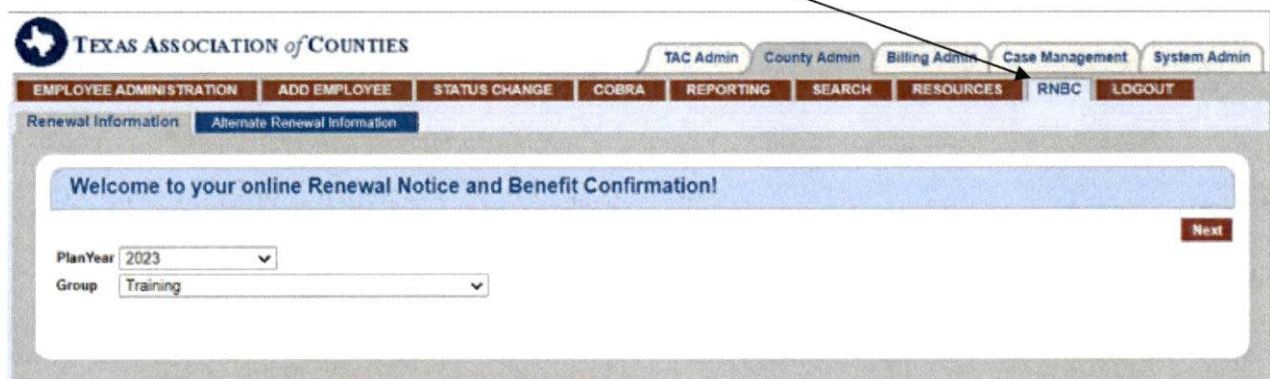
RENEWAL NOTICE AND BENEFIT CONFIRMATION (RNBC) ALTERNATE PLAN SELECTION and ONLINE COMPLETION INSTRUCTIONS

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.**

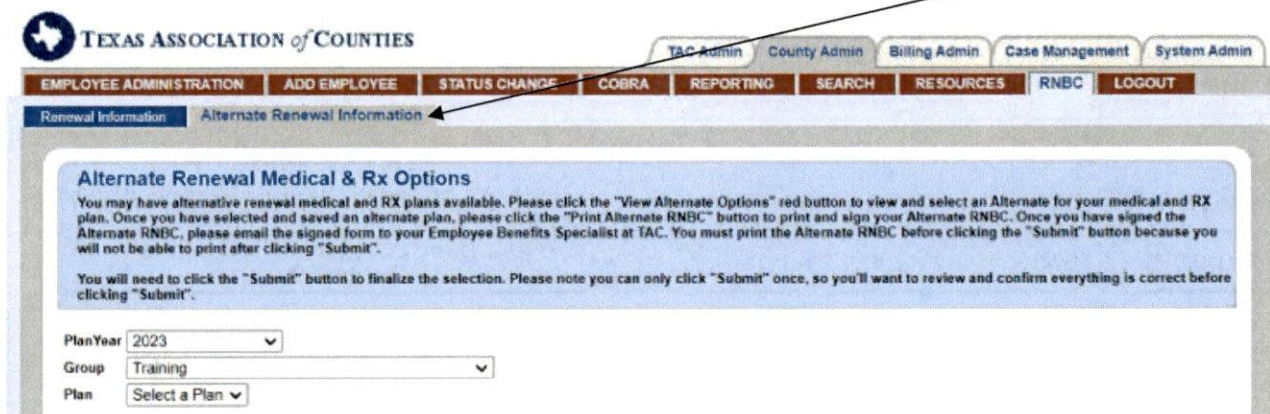
I. To view alternate renewal Medical and Rx Options (Alternate RNBC)

Log onto OASys and click on the RNBC tab.



The screenshot shows the OASys interface with the 'RNBC' tab selected. The page title is 'TEXAS ASSOCIATION of COUNTIES'. The navigation menu includes 'EMPLOYEE ADMINISTRATION', 'ADD EMPLOYEE', 'STATUS CHANGE', 'COBRA', 'REPORTING', 'SEARCH', 'RESOURCES', 'RNBC', and 'LOGOUT'. The 'RNBC' tab is highlighted. Below the navigation, there are two tabs: 'Renewal Information' and 'Alternate Renewal Information'. The 'Alternate Renewal Information' tab is active. The main content area displays a welcome message: 'Welcome to your online Renewal Notice and Benefit Confirmation!'. Below this, there are two dropdown menus: 'PlanYear' set to '2023' and 'Group' set to 'Training'. A 'Next' button is located on the right side of the form.

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




The screenshot shows the OASys interface with the 'Alternate Renewal Medical & Rx Options' tab selected. The page title is 'TEXAS ASSOCIATION of COUNTIES'. The navigation menu is the same as in the previous screenshot. The 'RNBC' tab is highlighted. Below the navigation, there are two tabs: 'Renewal Information' and 'Alternate Renewal Information'. The 'Alternate Renewal Information' tab is active. The main content area displays the title 'Alternate Renewal Medical & Rx Options' and a detailed instruction: '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 this, there are three dropdown menus: 'PlanYear' set to '2023', 'Group' set to 'Training', and 'Plan' set to 'Select a Plan'. A 'View Alternate Options' button is located on the right side of the form.

Plan Year will default to 2023 (PY2023), 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.


TEXAS ASSOCIATION of COUNTIES

TAC Admin
County Admin
Billing Admin
Case Management
System Admin

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

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".

Print Alternate RNBC
Submit

PlanYear: 2023

Group: Training

Plan: Plan 700

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	\$537.76	\$523.72	
Employee + Child(ren)	\$862.80	\$862.80	\$836.44	\$814.44	
Employee + Spouse	\$1,162.50	\$1,162.50	\$1,126.88	\$1,097.14	
Employee + Family	\$1,471.74	\$1,471.74	\$1,426.36	\$1,388.84	

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	90/70	90/70	90/70	90/60	
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.

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------

Proposal rates are based on the following information:

- o 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.
- o Rates are based on a minimum employer contribution of 100% of the employee only rate or current funding level
- o 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 PY2023, 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.

Beneath the Prescription Plan information, you will select an alternate option. (You may need to scroll to the bottom of the screen to see this.)

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.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Click on the box beneath the Alternate your group has chosen, to place a checkmark in the box. Then click on the green checkmark on the far left.

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

The screen will refresh, and you will see the Alternate that you have chosen has a faded/greyed out checkmark. Verify this is the correct choice.

<input type="checkbox"/>	Please select an alternate plan and choose which plan to replace with the alternate.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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After you confirm that the correct box is checked, 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.

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.

Print Alternate RNBC
Submit

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 2023 (PY2023) RNBC online

Log onto OASys and click on the red RNBC tab.

TEXAS ASSOCIATION of COUNTIES

TAC Admin County Admin Billing Admin Case Management System Admin

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

Renewal Information Alternate Renewal Information

Welcome to your online Renewal Notice and Benefit Confirmation!

Plan Year 2023

Group Training

Next

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

Plan Year will default to 2023, and you should see your group's name in the Group box.

Click the red "Next" button on the right to begin completing your PY2023 RNBC.

Step 1: Rate Information

TEXAS ASSOCIATION of COUNTIES

TAC Admin County Admin Billing Admin Case Management System Admin

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

Renewal Information Alternate Renewal Information

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) 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

Plan Year 2023

Group Training

Status Active and Elected

Benefit 1 - Medical

Plan Plan 700

View Data

Benefit	Plan	% Rate Increase
Medical	Plan 700 \$25 Copay, \$500 Ded, 90%, \$2000 OOP Max	0.00 %
Prescription Drug	3A \$10/20/35, \$0 Ded	

- 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, COBRA or Continuation of Coverage).
- Select a Benefit from the drop down below the Status type. You only need to complete contribution amounts for the Medical and Dental 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.
- 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) 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: 2023

Group: Training

Status: Active and Elected

Benefit: 1 - Medical

Plan: Plan 700

[View Data](#)

Benefit	Plan	% Rate Increase
Medical	Plan 700 \$25 Copay, \$500 Ded, 90%, \$2000 OOP Max	0.00 %
Prescription Drug	3A \$10/20/35, \$0 Ded	

Your payroll deductions for medical benefits are: Pre Tax

	Tier	Current Rates	New Rates Effective 5/1/2023	New Amount Employer Pays	New Amount Employee Pays
	Employee Only	\$554.58	\$554.58	\$0.00	\$0.00
	Employee + Child(ren)	\$862.80	\$862.80	\$0.00	\$0.00
	Employee + Spouse	\$1,162.50	\$1,162.50	\$0.00	\$0.00
	Employee + Family	\$1,471.74	\$1,471.74	\$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 PY2023.

Benefit	Plan	% Rate Increase
Medical	Plan 700 \$25 Copay, \$500 Ded, 90%, \$2000 OOP Max	0.00 %
Prescription Drug	3A \$10/20/35, \$0 Ded	

Your payroll deductions for medical benefits are: Pre Tax

	Tier	Current Rates	New Rates Effective 10/1/2021	New Amount Employer Pays	New Amount Employee Pays
	Employee Only	\$554.58	\$554.58	\$500.00	\$500.00
	Employee + Child(ren)	\$862.80	\$862.80	\$0.00	\$0.00
	Employee + Spouse	\$1,162.50	\$1,162.50	\$0.00	\$0.00
	Employee + Family	\$1,471.74	\$1,471.74	\$0.00	\$0.00

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

- f. Enter the Employer and Employee contribution amounts, then click the green checkmark on the left to save them. 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.
- g. Continue to the next tier, and **repeat steps e and f** until you have entered the PY2023 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 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.)

Step 2: Contact Information

The screenshot shows the Texas Association of Counties OASys interface. At the top, there is a navigation bar with the TAC logo and the text "TEXAS ASSOCIATION of COUNTIES". Below this is a menu bar with options: "EMPLOYEE ADMINISTRATION", "ADD EMPLOYEE", "STATUS CHANGE", "COBRA", "REPORTING", "SEARCH", "RESOURCES", "RNBC", and "LOGOUT". A secondary menu bar includes "TAC Admin", "County Admin", "Billing Admin", "Case Management", and "System Admin". The main content area is titled "Renewal Information" and "Alternate Renewal Information". The current step is "Step 2: Contact Information". A blue instruction box reads: "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." Below this are navigation buttons "Previous" and "Next". The form fields are: "Plan Year" (2023), "Group" (Training), and "Contact Type" (Contracting Authority). A "View Data" button is located below the "Contact Type" field.

- 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.
- 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.
- 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.
- 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

The screenshot shows the Texas Association of Counties OASys interface for Step 3: Waiting Periods. The navigation and menu bars are identical to Step 2. The main content area is titled "Renewal Information" and "Alternate Renewal Information". The current step is "Step 3: Waiting Periods". A blue instruction box reads: "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." Below this are navigation buttons "Previous" and "Next". The form fields are: "Plan Year" (2023) and "Group" (Training). A "View Data" button is located below the "Group" field.

- To view your current waiting periods for active Employees and Elected Officials, click on the red "View Data" button.

- b. 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.
- c. Click on the red "Next" button on the right to proceed to Step 4.

Step 4: Retiree Information

- a. 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.
- b. 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.
- c. 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: 2023

Group: Training

View Data

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

Step 5: COBRA Information

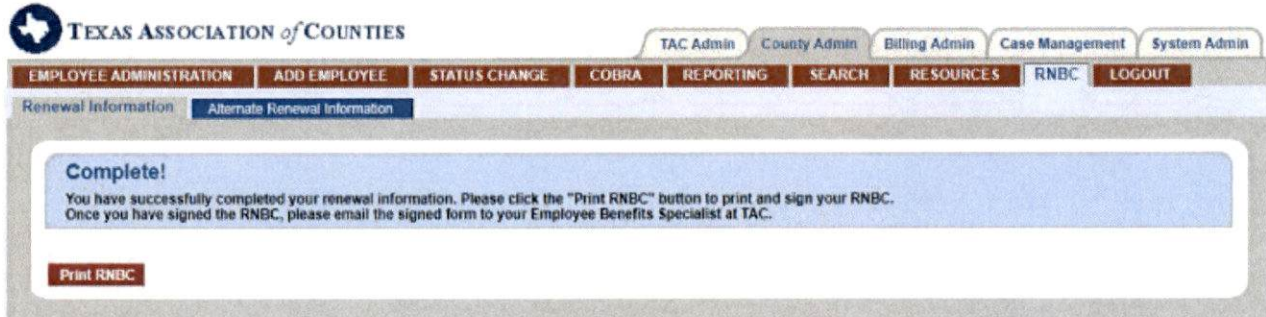
- Click on the red View Data button and the system will display the option you currently use for COBRA administration.
- If your group processes your own or uses a third party to administer COBRA, the OASys button (left side of screen) should be checked.
- If your group contracts with the BCBS COBRA 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.

The screenshot shows the 'Step 5: COBRA Information' screen. At the top, there is a navigation bar with 'EMPLOYEE ADMINISTRATION', 'ADD EMPLOYEE', 'STATUS CHANGE', 'COBRA', 'REPORTING', 'SEARCH', 'RESOURCES', 'RNBC', and 'LOGOUT'. Below this, there are tabs for 'Renewal Information' and 'Alternate Renewal Information'. The main content area has a blue header with the title 'Step 5: COBRA Information' and instructions: '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.' Below the header, there are 'Previous' and 'Submit' buttons. The 'Previous' button is a red button with a white arrow. The 'Submit' button is a red button with white text. There are two dropdown menus: 'PlanYear' with '2023' selected and 'Group' with 'Training' selected. Below the dropdowns is a 'View Data' button. The 'View Data' button is a red button with white text. Below the 'View Data' button is a table with three columns and one row. The first column contains a green checkmark, a red X, and a blue radio button. The second column contains the text: 'County/Group processes COBRA on OASYS "County/Group is responsible for fulfilling COBRA notification process and requirements'. The third column contains a white radio button and the text: 'BCBS COBRA Department processes Cobra "BCBS COBRA Department administers via COBRA contract with the County/Group'. The fourth column contains a white radio button and the text: 'County/Group processes TAC HEBB Continuation of Coverage on OASys (< 20 employees) "County/Group is responsible for fulfilling notification process and requirements'. A red arrow points from the 'Submit' button to the right.

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
✓ X ●	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	○ County/Group processes TAC HEBB Continuation of Coverage on OASys (< 20 employees) "County/Group is responsible for fulfilling notification process and requirements

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

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



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 PY2023 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 Employee Benefits Specialist at TAC HEBP:

Erin Crafton: erinc@county.org
Hailey Gajewski: haileyg@county.org
Heather Hanson: heatherh@county.org
Karen Bowers: karenb@county.org
Melissa Lopez: melissal@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.

TEXAS ASSOCIATION of COUNTIES

HEBP Territory Map

Employee Benefits and Wellness Consultants

NORTHWEST

EMPLOYEE BENEFITS CONSULTANT
Kathy Davenport

WELLNESS CONSULTANT
Stacey Bruington

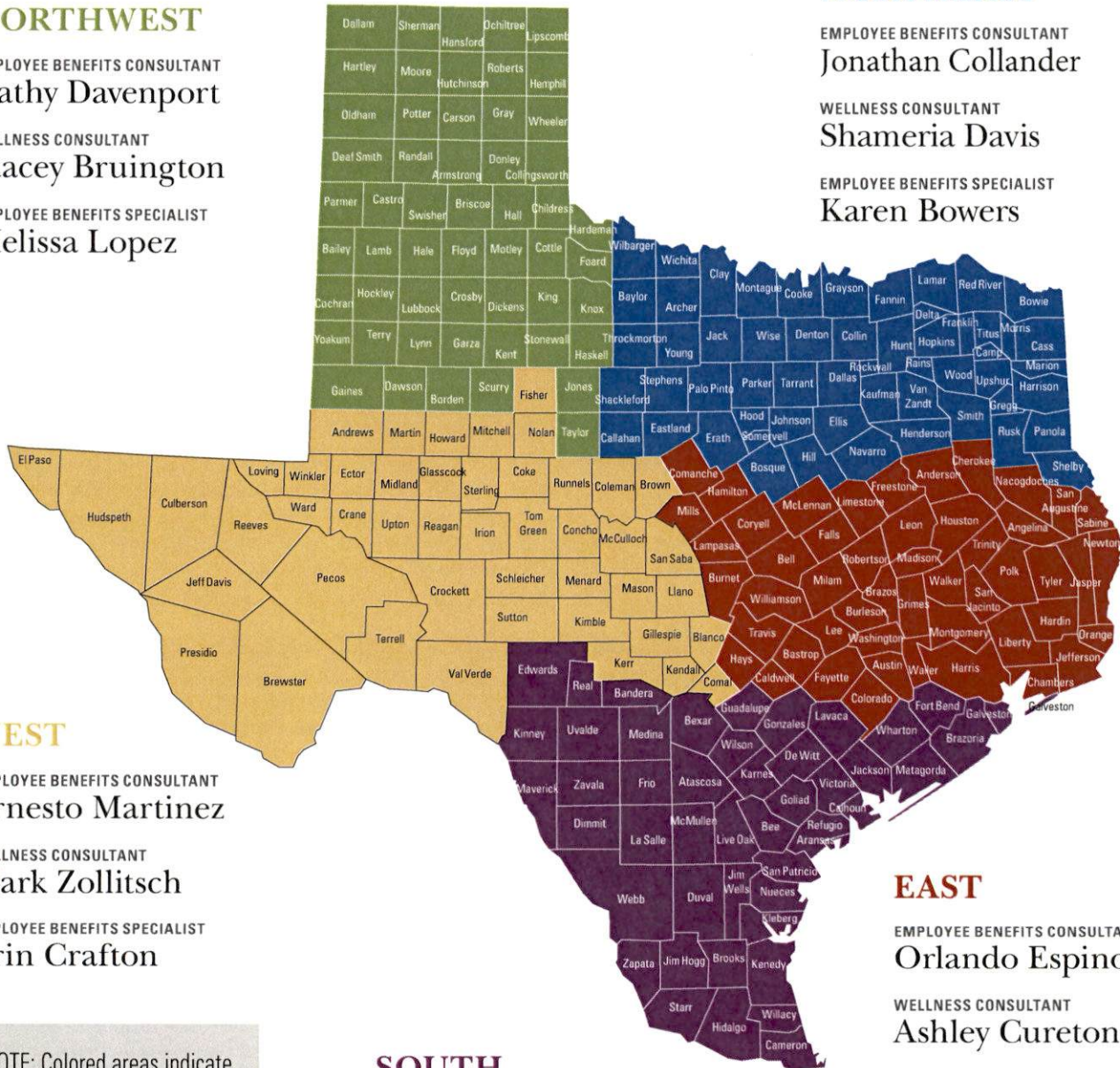
EMPLOYEE BENEFITS SPECIALIST
Melissa Lopez

NORTHEAST

EMPLOYEE BENEFITS CONSULTANT
Jonathan Collander

WELLNESS CONSULTANT
Shameria Davis

EMPLOYEE BENEFITS SPECIALIST
Karen Bowers



WEST

EMPLOYEE BENEFITS CONSULTANT
Ernesto Martinez

WELLNESS CONSULTANT
Mark Zollitsch

EMPLOYEE BENEFITS SPECIALIST
Erin Crafton

EAST

EMPLOYEE BENEFITS CONSULTANT
Orlando Espinoza

WELLNESS CONSULTANT
Ashley Cureton

EMPLOYEE BENEFITS SPECIALIST
Hailey Gajewski

SOUTH

EMPLOYEE BENEFITS CONSULTANT
Clarissa Martinez

WELLNESS CONSULTANT
Biral Patel

EMPLOYEE BENEFITS SPECIALIST
Heather Hanson

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

- East
- Northeast
- Northwest
- West
- South

(800) 456-5974
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.



June 28, 2022

Hon. Jacques L. Blanchette
Tyler County Judge
201 Veterans Way Ste 9
Woodville, TX 75979-5662

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 for your upcoming plan anniversary date.

For over a decade, the Pool renewal has been below the state average for health plan rate increases. We continue to see an uptick in high-cost claimants (individuals whose claims exceed \$50,000). Claims related to the COVID-19 pandemic surged between late 2020 and early 2022 (so far, the Pool has paid nearly \$37 million in COVID-19-related claims). Still, the Pool renewal average of 5.9% is once again well below the projected 2022 medical and prescription drug trend (healthcare cost inflation) for Texas, which is 9.8–13.8%.

Renewal rates are set annually using a comprehensive actuarial process that determines the amount needed by the Pool to fund claims and operating costs 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 gender statistics, and geographic area (healthcare claims vary significantly by geographic region of the state). Based on this analysis, your group's renewal rate may be above or below the Pool average. Your renewal rates for Plan Year 2023 are enclosed, along with your TAC Employee Benefits and Wellness Consultants' contact information. Your renewal information may include alternate benefit plans with pricing (if not, alternates are available upon request).

We are pleased to announce that TAC HEBP is offering a new service to our members: Cafeteria Plan (aka Section 125) Administration. The base service, free to Pool members, will provide you with compliance education and a plan document. Additional services are coming – please see the material included with your renewal packet for more information.

TAC HEBP understands how valuable healthcare benefits are 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 during the upcoming plan year.

Sincerely,

A handwritten signature in black ink, appearing to read "Quincy Quinlan".

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

cc: Leann Monk
Jackie Skinner



TEXAS ASSOCIATION of COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL

Tyler County's Renewal Rate change(s) for Plan Year 2023:

Health Plan: 3.5%

Dental Plan: Employee or Employer-paid options available

Life Plan(s): No change to current Basic Life rates.

Vision Plan: Plan update: lower copays for PY 2023 with no change to Vision rates

NOTE: Deadline for returning signed renewal documents to TAC HEBP: August 16, 2022

Contact your TAC Employee Benefits Consultant right away if you:

- Want to discuss alternates (which may lower rates), 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

- ***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 complete both forms and return them with your renewal. Contact your TAC Wellness Consultant if you have any questions.

Your Wellness Consultant: Ashley Cureton (ashleyc@county.org) (800) 456-5974.

- ***Employee Open Enrollment:*** You have the option to allow employees to make their open enrollment changes online through the Employee Self-Service portal by logging on to <https://mybenefits.county.org>.
- ***Affordable Care Act Fees:*** The HEBP Board voted to pay 2022 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 22 and contains the forms and notices your group will need to process employee benefit renewals.
- ***When It's Due:*** Once your renewal benefit decision has been approved, complete Tyler County's Renewal Notice and Benefits Confirmation (RNBC), 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 16, 2022.**

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

Renewal Attachments:

Renewal Letter

Renewal Documents

- Renewal Notice and Benefit Confirmation (RNBC)
- Alternate Health Plan Proposal (available by request for HRA, HSA or BEN 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

New: Introduction to Cafeteria Plan Administration services

Voluntary Dental plans - quote available upon request

Improved for PY2023: Vision Plan Benefit Highlights

Health Care Reform update memo for 2022-23

Employee Self-Service for Open Enrollment instructions

Alternate Plan Selection and Online RNBC completion instructions

TAC HEBP Territory Map and Contacts

Grandfathered Plan FAQ



2022 - 2023 Renewal Notice and Benefit Confirmation

Group: 22946 - Tyler County

Anniversary Date: 11/01/2022

Return to TAC by: 08/17/2022

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 haileyg@county.org.

For any plan or funding changes other than those listed below, please contact Hailey Gajewski 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: 3.50%

Your payroll deductions for medical benefits are:

Pre Tax

Tier	Current Rates	New Rates Effective 11/1/2022	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$793.42	\$821.18	\$	\$	\$
Employee + Child	\$1,045.28	\$1,081.86	\$	\$	\$
Employee + Child(ren)	\$1,229.28	\$1,272.30	\$	\$	\$
Employee + Spouse	\$1,509.14	\$1,561.96	\$	\$	\$
Employee + Family	\$1,887.90	\$1,953.98	\$	\$	\$

_____ 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 11/1/2022	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

	Current Rates	New Rates Effective 11/1/2022	Amount Employer Pays	Amount Employee/ Retiree Pays (if applicable)
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*
- County/Group processes TAC HEBP Continuation of Coverage on OASys (< 20 employees)
**County/Group is responsible for fulfilling notification process and requirements*

_____ 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 **08/17/2022** 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

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

COUNTY REPRESENTATIVE

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

Please list changes and/or corrections below.

Name/Title Leann Monk/County Treasurer

Address 100 West Bluff Street, Room 103
Woodville, TX 75979-5245

Phone 409-283-3054

Fax 409-283-6305

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

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.



2022 - 2023 Alternate Plan Proposal

Group: 22946 - Tyler County

Effective Date: 11/01/2022

	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
Rates				
Employee Only	\$793.42	\$821.18	\$796.22	\$798.56
Employee + Child	\$1,045.28	\$1,081.86	\$1,048.84	\$1,051.96
Employee + Child(ren)	\$1,229.28	\$1,272.30	\$1,233.40	\$1,237.06
Employee + Spouse	\$1,509.14	\$1,561.96	\$1,514.10	\$1,518.62
Employee + Family	\$1,887.90	\$1,953.98	\$1,894.02	\$1,899.68
Medical Plan				
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
Prescription Plan				
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 08/17/2022 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 _____



TEXAS ASSOCIATION of COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL

12 Month Medical Report

Post Date : Mar 2022

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

Paid Date	Average Subscribers	Average Members	Total Contribution	Medical Paid	Pharmacy Paid	Paid
Apr 2021	110	151	\$97,086.32	\$159,991.30	\$23,969.44	\$183,960.74
May 2021	109	148	\$95,291.74	\$49,716.72	\$12,137.98	\$61,854.70
Jun 2021	105	140	\$91,621.20	\$55,127.35	\$20,184.34	\$75,311.69
Jul 2021	104	140	\$90,240.94	\$28,892.36	\$32,283.67	\$61,176.03
Aug 2021	107	148	\$92,577.98	\$87,417.93	\$26,260.86	\$113,678.79
Sep 2021	107	147	\$92,513.46	\$27,681.90	\$19,381.86	\$47,063.76
Oct 2021	106	145	\$92,274.04	\$37,091.19	\$26,519.57	\$63,610.76
Nov 2021	108	146	\$96,356.66	\$45,143.15	\$21,980.43	\$67,123.58
Dec 2021	107	143	\$96,714.22	\$37,097.74	\$32,382.27	\$69,480.01
Jan 2022	108	144	\$96,250.36	\$42,717.10	\$21,363.60	\$64,080.70
Feb 2022	109	145	\$97,043.78	\$46,908.61	\$24,648.98	\$71,557.59
Mar 2022	108	144	\$97,043.78	\$42,702.23	\$25,226.66	\$67,928.89
Total: Selected Filter(s)	107	145	\$1,135,014.48	\$660,487.58	\$286,339.66	\$946,827.24



TEXAS ASSOCIATION of COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL

HCC - No PHI

Post Date: Mar 2022

Service Category: Total (Inpatient Facility, Outpatient Facility, Pharmacy, Professional)

Metrics: (Paid)

Claim Type: (MEDICAL, PHARMACY)

Coverage Type: (Medical)

Group: (022946 - TYLER COUNTY/TAC)

Paid Month: Last 12 Months

Paid: greater or equal 10000.00

Paid: (descending)

Encrypted Member ID	Member Status	Medical Paid	Pharmacy Paid	Paid
6380269581	Active	\$73,836.20	\$17.77	\$73,853.97
17080240642	Active	\$4,152.23	\$69,125.40	\$73,277.63
18411048605	Active	\$22,530.71	\$26,428.85	\$48,959.56
8610115857	Active	\$40,633.35	\$315.61	\$40,948.96
3060360652	Active	\$36,643.96	\$5.87	\$36,649.83
7040089285	Active	\$16,240.41	\$11,569.02	\$27,809.43
3430164460	Active	\$25,666.88	\$60.92	\$25,727.80
19770605457	Active	\$21,216.34	\$3,641.84	\$24,858.18
3040610741	Active	\$4,156.40	\$17,192.85	\$21,349.25
19770605442	Active	\$7,527.45	\$12,029.37	\$19,556.82
19320110657	Active	\$18,804.21	\$0.00	\$18,804.21
3040610727	Active	\$2,109.27	\$16,058.47	\$18,167.74
3061767140	Active	\$9,330.22	\$8,629.10	\$17,959.32
19770707860	Active	\$16,106.74	\$495.96	\$16,602.70
18870681741	Active	\$5,461.27	\$10,364.72	\$15,825.99
17740312333	Active	\$15,236.11	\$0.00	\$15,236.11
17560626902	Active	\$14,708.71	\$40.81	\$14,749.52
18270543764	Active	\$2,342.94	\$12,257.91	\$14,600.85
19270418257	Active	\$6,214.51	\$8,203.53	\$14,418.04
5910374100	Active	\$5,222.80	\$8,585.36	\$13,808.16
19670098461	Active	\$9,750.55	\$2,946.56	\$12,697.11
5950015259	Active	\$12,218.70	\$14.39	\$12,233.09
16790501337	Active	\$5,754.57	\$6,239.09	\$11,993.66

Proprietary and Confidential



TEXAS ASSOCIATION *of* COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL

Encrypted Member ID	Member Status	Medical Paid	Pharmacy Paid	Paid
4000862035	Active	\$8,621.83	\$3,064.50	\$11,686.33
19490201819	Active	\$10,599.32	\$936.55	\$11,535.87
3055500443	Active	\$11,202.44	\$298.74	\$11,501.18
3040610768	Active	\$2,567.32	\$8,906.87	\$11,474.19
3051071306	Active	\$9,698.74	\$490.69	\$10,189.43
Query Totals: 28		\$418,554.18	\$227,920.75	\$646,474.93



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

Please list changes and/or corrections:

Name: Leann Monk

Title: Treasurer

Address: PO Box 2070
Woodville, TX 75979-2070

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

Phone Number: (409) 283-3054

Fax Number:

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

Please list changes and/or corrections:

Name: Mrs. Jackie Skinner

Title:

Address: PO BOX 2039
Woodville, TX 75979

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

Phone Number: (409) 283-3652

Fax Number:

Contracting Authority Signature: _____

Date: _____



Together.
Better.
Stronger.

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 2022-2023 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: _____