TYLER COUNTY COMMISSIONERS COURT SPECIAL MEETING October 20, 2006 ---- 9:00 a.m.

THE STATE OF TEXAS ON THIS THE 20th day of October, 2006 the Commissioners' Court in and for Tyler County, Texas convened in a Special Meeting at the Commissioners' Courtroom in Woodville, Texas, the following members of the Court present, to wit:

JEROME OWENS	COUNTY JUDGE, Presiding
MARTIN NASH	COMMISSIONER, PCT. #1
JOE MARSHALL	COMMISSIONER, PCT. #3
JACK WALSTON	COMMISSIONER, PCT. #4
DONECE GREGORY	COUNTY CLERK, EX OFFICIO

The following were absent: COMMISSIONER HUGHES thereby constituting a quorum. In addition to the above were:

JERRY DEAN SHARON FULLER JOE SMITH ASSISTANT COUNTY AUDITOR COUNTY TREASURER CRIMINAL DISTRICT ATTORNEY

Joe Smith requested the court approve a resolution for grant funds for the Criminal District Attorney's office. **Commissioner Marshall** motioned to adopt the resolution supporting the Indigent Defense Grant. **Commissioner Nash** seconded the motion. All voted yes and none no. SEE ATTACHED

A motion was made by **Commissioner Walston** and seconded by **Commissioner Nash** to appoint Commissioner Rusty Hughes as Judge Pro-Tem. All voted none no.

Sharon Fuller presented a change to the retirees' benefits plan offered by the Texas Association of Counties, at no cost to the county. This would be a supplement to medicare which would cost the retiree \$8.50 per month. A motion was made **Commissioner Walston** to approve the "County Choice Silver" plan approving the change as presented. **Commissioner Nash** seconded the motion. All voted yes and none no.

A motion was made by Commissioner Walston that the meeting adjourn.

THERE BEING NO FURTHER BUSINESS, THE MEETING ADJOURNED.......9:13 a.m.

1, Donece Gregory, County Clerk and ex officio member of the Tyler County Commissioners Court, do hereby certify to the fact that the above is a true and correct record of the Tyler County Commissioners Court session held on October 20, 2006.

Witness my hand and seal of office on this the 20th day of October, 2006.

Donece Gregory, County Tvler County. Texas

2007 Tyler County Resolution Indigent Defense Grant Program

WHEREAS, under the provisions of the Fair Defense Act, 77th Regular Session, counties are eligible to receive grants from the Task Force on Indigent Defense to provide improvements in indigent defense services in the county; and

WHEREAS, this grant program will assist the county in the implementation of the provisions of the Fair Defense Act and the improvement of the indigent criminal defense services in this county; and

WHEREAS, Tyler County Commissioners Court has agreed that in the event of loss or misuse of the funds, Tyler County Commissioners assures that the funds will be returned in full to the Task Force on Indigent Defense.

NOW THEREFORE, BE IT RESOLVED and ordered that the County Judge of this county is designated as the Authorized Official to apply for, accept, decline, modify, or cancel the grant application for the Indigent Defense Formula Grant Program and all other necessary documents to accept said grant; and

BE IT FURTHER RESOLVED that the County Judge is designated as the Program Director and contact person for this grant and the County Auditor is designated as the Financial Officer for this grant.

Adopted this 20th day of October, 2006.

County Cler

Jerome Owens County Judge

Internet Submission Form

After submitting the formula grant application on-line, the following Internet submission confirmation number was received #200722920061019. This grant application submission was in accordance with the Commissioners Court Resolution above.

Jerome Owens County Judge

- 20.0		Silver	CountyChoice Silver Authorization Form	
	R	Association of Counties Retiree Medical Program		
Ŷ	Emplo	over Tyles Count	Date Oct ther 20, 2006 CLER Phone <u>1-409-283-3054</u> <u>Va Hoo. COM</u> Fax <u>1-409-283-3054</u>	
	Conta	ct name <u>JAARON</u> FC	<u>iller</u> Phone <u>1-409-283-305</u>	•
	Email	tctreasurera	Vation. Com Fax 1-409-283-3054	
	ITY of its Me	I DN TV/ER COUNTY	(entity name) wishes to offer health coverage for C HEBP's CountyChoice Silver Plan. (If yes,	
	1)	Select a Billing Option and indica	te here:	
	 LIST (if the Employer pays 100% of premiums) the bill will be sent to the Employer. DIRECT (if the Employer pays \$0) the bill will be sent to the retiree. SPLIT (if the Employer pays a portion) the bill will be divided between Employer and Retiree as designated. 			
•	2) Select which Plan will be offered to your Retirees (details in CCS Presentation): NOTE: If you choose only the medical plan, retirees may elect Rx coverage at their own expense.			
		HIGH PLAN, RX optional	BASIC PLAN, RX optional	
		HIGH PLAN WITH RX	BASIC PLAN WITH RX	
	3)	Indicate amount employer will pa	y toward the coverage.	
		Per retiree per month		
	4) Are you interested in the Retirement Reimbursement Account (RRA)?			
		V or N (If yes, TAC will follow	ow up with you.)	. .
	 Pround un Ag for Ag 	der 65 years of age in Excel format. ree to regularly update TAC with y ms.	ee's names, addresses and dates of birth; over and your list of retirees so that we can send enrollment nformation to future retirees (as employees retire)	

Entity code: _____1

10/2006

interlocal rec'd:



CountyChoice Silver Authorization Form

Prior to enrollment of retirees on CountyChoice Silver, the court must approve the following and sign below:

- Allow eligible retirees to continue participation in CountyChoice Silver.
- Approve the amount the Employer will contribute toward coverage.
- CountyChoice Silver will be the only program offered to the Medicare eligible retirees. No other Medicare supplement or Medicare Advantage program will be offered to these retirees.
- Agree that this coverage will not be offered to any ACTIVE employee, regardless of age.

V/**CR** (entity name) elects to offer CountyChoice Silver and authorizes its retirees to participate in the CountyChoice Silver Retiree Program and agrees to the aforementioned.

Please send completed document to: TAC Health and Employee Benefits Program FAX: 512-481-8481

P.O. Box 2131 or Austin, TX 78768

Billing Option Descriptions

DIRECT BILLED: Retiree is billed monthly. LIST BILLED: Employer agrees to pay monthly billing.

Employer must indicate the contribution levels for Employer and for Retirees. Bills will be created and sent to the Employer for the Employer portion and to the Retiree for any remaining balance.

To ensure that each eligible retiree has the opportunity to enroll, the Employer must provide a list, in Excel format if possible, of all current retirees. The list should include name, mailing address, and date of birth. If the Employer does not maintain this list, a copy may be requested from TCDRS. The Employer must also provide TAC regular updates of new retirees so that we may provide the enrollment materials to those individuals as well. TAC and Aetna will work together to mail Enrollment Kits to each retiree at the addresses provided.

CountyChoice Silver

SPLIT BILLED:

2

10/2006