



2019 - 2020 Renewal Notice and Benefit Confirmation

Group: 62946 - Panola County

Anniversary Date: 12/01/2019

Return to TAC by: 10/11/2019

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 MariaC@County.org.

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

MEDICAL

Medical: Plan 700 \$25 Copay, \$500 Ded, 90%, \$2000 OOP Max

RX Plan: Option 4A \$10/25/40, \$0 Ded

Your % rate increase is: 1.00%

Your payroll deductions for medical benefits are: Pre Tax

Tier	Current Rates	New Rates Effective 12/1/2019	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$1,156.92	\$1,168.48	\$ 1168.48	\$ -0-	\$ -0-
Employee + Child	\$1,282.54	\$1,295.36	\$ 1168.48	\$ 126.88	\$ 126.88
Employee + Child(ren)	\$1,438.78	\$1,453.16	\$ 1168.48	\$ 284.68	\$ 284.68
Employee + Spouse	\$1,793.68	\$1,811.62	\$ 1168.48	\$ 643.14	\$ 643.14
Employee + Family	\$1,972.90	\$1,992.62	\$ 1168.48	\$ 824.14	\$ 824.14

 Initial to accept Medical Plan and New Rates.

VOLUNTARY VISION

Voluntary Vision: Plan I

Your % rate increase is: 0.00%

Your payroll deductions for voluntary vision benefits are: Pre Tax

Tier	Current Rates	New Rates Effective 12/1/2019	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	\$	\$12.44	
Employee + Spouse	\$11.80	\$11.80	\$	\$11.80	
Employee + Family	\$18.28	\$18.28	\$	\$18.28	

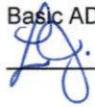
 Initial to accept Voluntary Vision Plan and New Rates.

LIFE - BASIC

Basic Life Products:
(Rates are per thousand)

Coverage Volume per Employee: \$10,000

	Current Rates	New Rates Effective 12/1/2019	Amount Employer Pays	Amount Employee/ Retiree Pays (if applicable)
Basic Term Life	\$0.199	\$0.199	100%	0%
Basic AD&D	\$0.030	\$0.030	100%	0%


 Initial to accept New Basic 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
30 days - Day following waiting period
 Initial to confirm.

Elected Officials
30 days - Day following waiting period

COBRA ADMINISTRATION


Please indicate how your group manages COBRA administration:

County/Group processes COBRA on OASYS

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

BCBS COBRA Department processes COBRA

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



- Initial to confirm COBRA Administration.

PLAN INFORMATION

Broker or Consultant Information

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

Agency Name _____

Agency Address _____

Number and Street _____

City _____

State _____

Zip _____

Broker _____

Representative or
Consultant's Name _____

Contact Phone
Number _____

Contact Email
Address _____

_____ Initial to confirm Broker or Consultant information

- Please update broker or consultant's information.
- If applicable, broker commissions are included in rates listed on page 1.
- Retirees pay the same premium as active employees regardless of age for medical and dental.
- Rates based upon current benefits and enrollment. A substantial change in enrollment (10% over 30 days or 30% over 90 days) may result in a change in rates.
- Form must be received by **10/11/2019** 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 Panola 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 Jennifer Stacy/Auditor

Address 110 South Sycamore St, Room 213A
Carthage, TX 75633-2543

Phone 903-693-0320

Fax 903-693-2726

Email jennifer.stacy@co.panola.tx.us

BILLING CONTACT

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

Please list changes and/or corrections below.

Name/Title Jennifer Stacy/ Auditor

Address 110 South Sycamore St, Room 213A
Carthage, TX 75633

Phone 903-693-0320

Fax 903-693-2726

Email jennifer.stacy@co.panola.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.

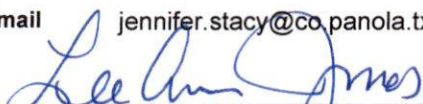
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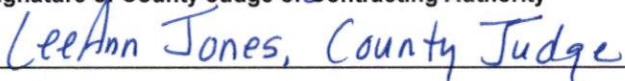
Fax 903-693-2726

Email jennifer.stacy@co.panola.tx.us



Date: 8-6-19

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.

County Specific Incentive Program (CSI)

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, 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.

YOUR COUNTY'S CSI FOR PLAN YEAR 2020

Our records indicate that your County or District does not currently have a County Specific Incentive. Make a selection below if you would like to learn more about implementing a County Specific Incentive. Also, please 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.

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

We are interested in learning more about a County Specific Incentive Program.

We are not interested in learning more about a County Specific Incentive Design at this time.

County/District: *Parola County*
Printed Name and Title: *LeeAnn Jones, County Judge*
Signature: *LeeAnn Jones* Date: *8-6-19*