

# 2021 - 2022 Renewal Notice and Benefit Confirmation

Group: 62946 - Panola County

Anniversary Date: 12/01/2021

Return to TAC by: 09/03/2021

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 karenb@county org

For any plan or funding changes other than those listed below, please contact Karen Bowers 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: 2 50% Your payroll deductions for medical benefits are Pre Tax

Tier	Current Rates	New Rates Effective 12/1/2021	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$1,121 74	\$1,149 78	\$1,149 78	<b>\$</b> O	<b>\$</b> 0
Employee + Child	\$1,243 54	\$1,274 62	\$1,149 78	\$ 124 84	\$ 124 84
Employee + Child(ren)	\$1,395 02	\$1,429 90	\$1,149 78	\$ 280 12	\$ 280.12
Employee + Spouse	\$1,739 16	\$1,782.64	\$1,149 78	\$ 632 86	\$ 632 86
Entployee + Family	\$1,912 92	\$1,960 74	\$1,149 78	\$ 810 96	\$ 810 96

Initial to accept Medical Plan and New Rates

MOISIVA

Vision:

Plan I

Your % rate increase is: 0 00%

Your payroll deductions for vision benefits are Pre Tax

Tier	Current Rates	New Rates Effective 12/1/2021	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$6 20	\$6 20	<b>\$</b> 0	\$620	<b>\$</b> 0
Employee + Child(ren)	\$12 44	\$12 44	\$0	\$ 12 44	\$0
Employee + Spouse	\$11 80	\$11 80	\$0	\$ 11.80	\$0
Employee + Family	\$18 28	\$18 28	\$0	\$ 18 28	\$0

Initial to accept Vision Plan and New Rates

### LIFE - BASIC

**Basic Life Products:** 

Coverage Volume per Employee

\$10,000

(Rates are per thousand)

Current
Rates

**New Rates Effective** 12/1/2021

**Amount Employer** Pays

**Amount** Employee/ **Retiree Pays** (if applicable)

Basic Term Life

\$0 199

\$0 199

100%

0%

\$0 030

\$0 030

100%

0%

Initial to accept New Basic Life Rates

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

Initial to confirm

**Employees** 

30 days - Day following waiting period

**Elected Officials** 

30 days - Day following waiting period

	COBRA ADMINISTRATION
Please indicate how you	ir group manages COBRA administration
•	p processes COBRA on OASYS subject for fulfilling COBRA notification process and requirements.
*BCBS COBRA Departr	RA Department processes COBRA nent administers via COBRA contract with the County/Group infirm COBRA Administration PLAN INFORMATION
Broker or Consulta	nt Information
Please confirm your brok	ter or consultant's name, if applicable:
Agency Name	Not Applicable
Agency Address	
Number and Street	
City	
State Zin	
Zip Broker	
Representative or Consultant's Name	
Contact Phone Number	
Contact Email Address	
Initial to confirm	Broker or Consultant information
Please update bro	oker or consultant's information
If applicable, brok	er commissions are included in rates listed on page 1
Retirees pay the s	same premium as active employees regardless of age for medical and dental

- Rates based upon current benefits and enrollment. A substantial change in enrollment (10% over 30 days or 30% over 90 days) may result in a change in rates
- Form must be received by 09/03/2021 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 Name/Title Jennifer Stacy/Auditor Address 110 South Sycamore St, Room 213A Carthage, TX 75633 **Phone** 903-693-0320 Fax 903-693-2726

Signature of County Judge or Contracting Authority

jennifer stacy@co panola tx us

LEEPAN Jones/ County Judge

Please PRINT Name and Title

**Email** 

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

Date: 8-3-2/



# 2021 - 2022 Alternate Plan Proposal

Group 62946 - Panola County Effective Date 12/01/2021

	Current Plan Year	Renewal Rates	Option 1	Option 2
Plan:	700	700	700-G2	1100-NG
Option:	RX-4A	RX-4A	RX-4A-G2	RX-4A-NG
Rates				
Employee Only	\$1,121 74	\$1,149 78	\$1,114 62	\$1,085 26
Employee + Child	\$1,243 54	\$1,274 62	\$1,235.60	\$1,203 04
Employee + Child(ren)	\$1,395 02	\$1,429 90	\$1,386 08	\$1,349 52
Employee + Spouse	\$1,739 16	\$1,782 64	\$1,727 94	\$1,682 28
Employee + Family	\$1,912 92	\$1,960 74	<b>\$1</b> ,900 <b>54</b>	\$1,850 30
Medical Plan				
Deductible In/Out Network	\$500/750	\$500/750	\$680/1020	\$750/1000
Co-Insurance % In/Out	90/70	90/70	90/70	80/60
Co-Insurance Maximum	\$2000/4000	\$2000/4000	\$2750/5500	\$3000/6000
Office Visit	\$25	\$25	\$30	\$25
Specialist Visit				
Emergency Room Hospital	\$90	\$90	\$100	\$150
Prescription Plan				
Prescription Card Co-Pay	10/25/40	10/25/40	15/30/50	10/25/40
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 09/03/2021 in order to avoid a delay in implementation of benefits and/or late processing fees

Please indicate the selected plan here	700	
Fax the signed document to 1-512-481		<del></del>
Signature All Am	emes	Date 8-3-21
62946 - Panola County, 2022, Alternate		



# 12 Month Medical Report

Post Date Mar 2021

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 (062946 - PANOLA COUNTY/TAC)

Paid Date		Average Members	Total Contribution	Medical Paid	Pharmacy Paid	Paid
Apr 2020	275	413	\$353,342 42	\$99,962 76	\$77,123 64	\$177,086 40
May 2020	272	412	\$350,637 92	\$182,292 79	\$102,725 36	\$285,018 15
Jun 2020	. 276	418	\$351,964 20	\$114,520.12	\$80,059 42	\$194,579 54
Jul 2020	279	419	\$355,636 52	\$143,124 60°	\$113,224 05	\$256,348 65
Aug 2020	281	423	\$358,498 82	\$81,081 85	\$104,066 47	\$185,148 32
Sep 2020	283	426	*\$359,951 98	\$147,516 75	\$105,041 16	\$252,557 91
Oct 2020	284	428	\$362,258 02	\$150,948 70	\$82,794 87	\$233,743 57
Nov 2020	284	428	\$364,196 52	\$318,128 32	\$109,707 11	\$427,835 43
Dec 2020	284	426	\$347,767 14	\$180,842 39	\$114,094 56	\$294,936 95
Jan 2021 1	282	418	\$343,389 42	\$121,583 11	\$110,757 21	\$232,340 32
Feb 2021	283	416	\$343,032 72	\$98,425 56	\$79,384 53	\$177,810 09
Mar 2021	288	421	\$349,763 16	.\$441,209 81	\$82,111 52	\$523,321 33
Total Selected Filter(s	281	421	\$4,240,438.84	\$2,079,636.76	\$1,161,089.90	\$3,240,726.66



Post Date Mar 2021

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

Metrics . (Paid)

Claim Type (MEDICAL, PHARMACY)

Coverage Type . (Medical)

Group: (062946 - PANOLA COUNTY/TAC)

Paid Month: Last 12 Months

Paid greater or equal 10000 00

### Paid descending

				0.14
Encrypted Member ID	Member Status	Medical Paid	Pharmacy Paid	Paid
3040643175	Active	\$261,930 55	\$19,847 88	\$281,778 43
12360303731	Active	\$177,474 51	\$27,186 95	\$204,661 46
16100319302	Under 65 Retiree	\$4,476 95	\$153;783 36	\$158,260 31
3040643196	Active	\$148,829 66	\$1,652 15	\$150,481 81
3280143625	Under 65 Retiree	\$66,798 12	\$3,632 85	\$70,430 97
18830049975	Active	\$68,971 27	\$46 14	\$69,017 41
3040643140	65+ Retiree	\$1,386 92	\$63,990 27	\$65,377 19
3040643213	Under 65 Retiree	\$4,251 51	\$59,496 59	\$63,748 10
3040643265	65+ Retiree	\$6,285 14	\$55,968 24	\$62,253 38
7910080229	Active	\$57,103 46	\$0 00	\$57,103 46
3040643026	Under 65 Retiree	\$21,741 83	\$31,830 41	\$53,572 24
13420321301	Active	\$45,057 57	\$5,408 44	\$50,466 01
12540252056	Under 65 Retiree	\$48,991 58	\$5 86	\$48,997 44
3040643028	65+ Retiree	\$3,998 58	\$44,452 28	\$48,450 86
3040643250	65+ Retiree	\$24,715 14	\$22,674 44	\$47,389 58
3040643085	65+ Retiree	\$15,351 42	\$28,440 19	\$43,791 61
13870362770	65+ Retiree	\$6,894 87	\$35,642 06	\$42,536 93
3040643264	Under 65 Retiree	\$40,631 64	\$136 57	\$40,768 21
17600422882	Active	\$31,444 04	\$851 28	\$32,295 32
3040643121	65+ Retiree	\$2,047 19	\$29,530 95	\$31,578 14
16710308324	Active	\$31,518 98	\$0 00	\$31,518 98
3040643050	Active	\$6,707 87	\$23,054 31	\$29,762 18
18730281050	Active	\$28,031 85	\$44 07	\$28,075 92

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# TEXAS ASSOCIATION of COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

01 24				
16030424789	Active	\$3,645 60	\$23,929 23	\$27,574 83
18370651445	Active	\$26,108 33	\$1,344 20	\$27,452 53
16400119225	Cobra	\$21,918 59 <sub>.</sub>	\$5,149 03	\$27,067 62
19270052141	Active	\$26,620 25	\$21 05	\$26,641 30
3040643280	Under 65 Retiree	\$22,509 34	\$3,037 16	\$25,546 50
3040643192	Active	\$1,405 20	\$22,630 48	\$24,035 68
19720394969	Active	\$22,638 49	\$4 60	\$22,643 09
10720039569	Active	\$21,520 06	\$1,104 53	\$22,624 59
16400119221	Active	\$16,840 40	\$5,609 24	\$22,449 64
17461153633	Active	\$3,091 34	\$18,192 58	\$21,283 92
3630792082	65+ Retiree	\$5,993 10	\$15,152 63	\$21,145 73
12360078206	Active	\$15,047 41	\$5,714 56	\$20,761 97
11840354163	Under 65 Retiree	\$1,262 80	\$19,138 93	\$20,401 73
3071208379	65+ Retiree	\$9,391 95	\$10,877 03	\$20,268 98
10150600051	65+ Retiree	\$15,330 76	\$4,852 88	\$20,183 64
3040645578	Active	\$17,512 39	\$2,029 16	\$19,541 55
3040643123	Under 65 Retiree	\$10,435 99	\$8,735 02	\$19,171 01
3040643102	Active	\$12,027 41	\$6,360 74	\$18,388 15
3046255616	Under 65 Retiree	\$1,470 32	\$16,893 88	\$18,364 20
3450011607	65+ Retiree	\$13,963 86	\$2,396 75	\$16,360 61
3043383753	65+ Retiree	\$3,274 93	\$12,726 61	\$16,001 54
3380153380	Active	\$4,348 13	\$11,548 37	\$15,896 50
3040643055	65+ Retiree	\$10,497 35	\$5,153 40	\$15,650 75
3040643116	Active	\$14,874 83	\$41 10	\$14,915 93
18000179856	Active	\$14,118 46	\$402 28	\$14,520 74
19150085324	Active	\$14,408 81	\$0 57	\$14,409 38
19770628281	Active	\$12,244 81	\$1,807 69	\$14,052 50
3040643228	65+ Retiree	\$811 51	\$13,212 23	\$14,023 74
3040643065	65+ Retiree	\$1,183 13	\$12,734 85	\$13,917 98
3430164310	Active	\$13,413 44	\$331 77	\$13,745 21
3040643177	Active	\$1,368 32	\$11,942 82	\$13,311 14
3040643275	Under 65 Retiree	\$12,977 81	\$47 75	\$13,025 56
17130412612	Active `	\$12,275 93	\$69 50	\$12,345 43
3040643056	65+ Retiree	\$8,057 77	\$4,132 05	\$12,189 82
7490078117	Active	\$1,880 91	<b>\$10,211 15</b>	\$12,092 06
18670156511	Active	\$11,688 39	\$334 16	\$12,022 55
3040643244	65+ Retiree	\$1,167 92	\$10,430 25	\$11,598 17
3040643107	65+ Retiree	\$3,037 00	\$8,537 84	\$11,574 84
3040643211	Under 65 Retiree	\$11,428 71	\$141 20	\$11,569 91
17030352358	Active	\$2,114 38	\$9,402 24	\$11,516 62
3130197668	Active	\$5,910 53	\$5,602 17	\$11,512 70

Proprietary and Confidential Page 2

Post Date Mar 2021 Created On 04/23/2021 Created By Adrienne Bethke

HCC - No PHI

# TEXAS ASSOCIATION of COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL 8640227295 Active \$7,723 12 \$3,753 70 \$11,476 82

Query Total	71	\$1,583,244.24	\$928,181.47	\$2,511,425.71
3040643173	65+ Retiree	\$4,150 61	\$6,131 63	\$10,282 24
3080046597	65+ Retiree	\$3,511 32	\$7,051 99	\$10,563 31
3051076489	65+ Retiree	\$5,494 16	\$5,557 20	\$11,051 36
19100103682	Active	\$11,262 26	\$0 00	\$11,262 26
3040643166	Under 65 Retiree	\$5,258 63	\$6,027 98	\$11,286 61
17461441240	Active	\$11,386 83	\$0 00	\$11,386 83
18640227295	Active	\$7,723 12	\$3,753 70	\$11,476 82



# HEALTHY COUNTY WELLNESS CONTACT DESIGNATION Panola 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.

Name: Hon. Joni Reed	Please list changes and/or corrections:
Title: Treasurer	<del></del>
Address: 110 S Sycamore Rm 312 Carthage, TX 75633	
Email: joni.reed@co.panola.tx.us	
Phone Number: (903) 693-0385	
Fax Number:	
WELLNESS SPONSOR	
The Wellness Sponsor is responsible for supporting the coor components and encouraging county employees to access a available. An elected official in this role is preferred to illust	Ill Healthy County wellness resources
Current Wellness Sponsor Name: Ms. Jennifer Stacy	Please list changes and/or corrections:
Name. 1915. Jennier Stacy	riease list changes and/or corrections.
Title: Auditor	
·	riease list changes and/or corrections.
Title: Auditor Address: 110 S Sycamore Rm 213-A	riease list changes and/or corrections.
Title: Auditor  Address: 110 S Sycamore Rm 213-A  Carthage, TX 75633	riease list changes and/or corrections.
Title: Auditor  Address: 110 S Sycamore Rm 213-A  Carthage, TX 75633  Email: jennifer.stacy@co.panola.tx.us	riease list changes and/or corrections.



# **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.

$\square$ We are interested in learning more about the CSI Program.
$\ensuremath{\square}$ We are not interested in learning more about the CSI Program at this time.
County or District Name: <u>Panola</u>
Printed Name and Title: LeeAnn Junes / County Judge
Contracting Authority Signature: Allam Ames
Date: 8-3-21

☐ We would like to implement a CSI Program for the 2021-2022 plan year.