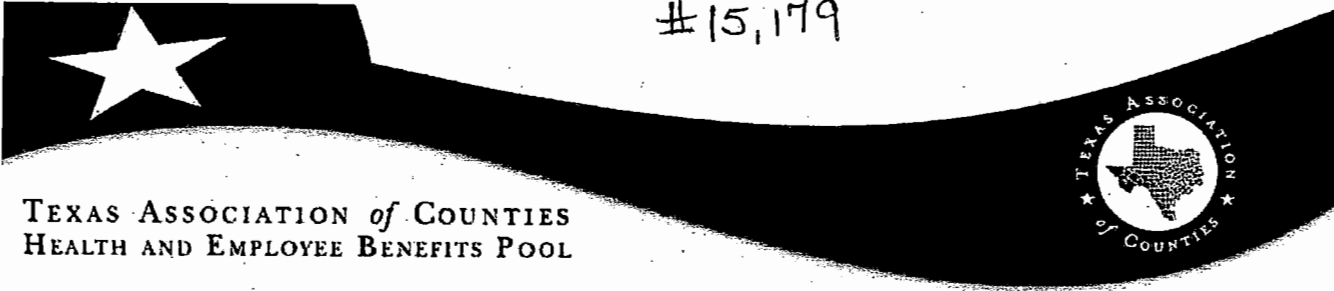


#15,179



2018 - 2019 Alternate Plan Proposal

Group: 39985 - Hunt County

Effective Date: 10/01/2018

FILED FOR RECORD
at 11:45 o'clock a M

JUL 24 2018

JENNIFER LINDENZWEIG
County Clerk, Hunt County, TX
By *[Signature]*

	Current Plan Year	Renewal Rates	Option 1
Plan:	300-G	300-G	300-G2
Option:	RX-2A-G	RX-2A-G	RX-2A-G2
Rates			
Employee Only	\$911.78	\$923.62	\$915.60
Employee + Child	\$1,119.66	\$1,134.22	\$1,124.34
Employee + Child(ren)	\$1,344.58	\$1,362.06	\$1,350.18
Employee + Spouse	\$1,926.70	\$1,951.74	\$1,934.66
Employee + Family	\$1,959.56	\$1,985.02	\$1,967.64
Medical Plan			
Deductible In/Out Network	\$300/600	\$300/600	\$340/680
Co-Insurance % In/Out	90/70	90/70	90/70
Co-Insurance Maximum	\$1800/4200	\$1800/4200	\$2050/4800
Office Visit	\$25	\$25	\$25
Specialist Visit			
Emergency Room Hospital	\$90	\$90	\$100
Prescription Plan			
Prescription Card Co-Pay	10/25/40	10/25/40	10/25/45
Deductible	\$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 07/31/2018 in order to avoid a delay in implementation of benefits and/or late processing fees.

Please indicate the selected plan here Plan: 300-G, Option: RX-2A-G
Fax the signed document to 1-512-481-8481.

Signature *[Signature]* Date July 24, 2018



TEXAS ASSOCIATION of COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL



2018 - 2019 Renewal Notice and Benefit Confirmation

Group: 39985 - Hunt County

Anniversary Date: 10/01/2018

Return to TAC by: 07/31/2018

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 300-G \$25 Copay, \$300 Ded, 90%, \$1800 OOP Max

RX Plan: Option 2A-G \$10/25/40, \$0 Ded

Your % rate increase is: 1.30%

Your payroll deductions for medical benefits are:

Pre Tax

Tier	Current Rates	New Rates Effective 10/1/2018	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$911.78	\$923.62	\$ 923.62	\$ -0-	\$ -0-
Employee + Child	\$1,119.66	\$1,134.22	\$ 923.62	\$ 210.60	\$ 210.60
Employee + Child(ren)	\$1,344.58	\$1,362.06	\$ 923.62	\$ 438.44	\$ 438.44
Employee + Spouse	\$1,926.70	\$1,951.74	\$ 923.62	\$ 1,028.12	\$ 1,028.12
Employee + Family	\$1,959.56	\$1,985.02	\$ 923.62	\$ 1,061.40	\$ 1,061.40

[Signature] Initial to accept Medical Plan and New Rates.

DENTAL

Dental: Plan II w/Ortho - 100% Prevent., \$50 Ded, 80% Basic, 50% Major

Your % rate increase is: -2.50%

Your payroll deductions for dental benefits are: Pre Tax

Tier	Current Rates	New Rates Effective 10/1/2018	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$27.60	\$26.90	\$ 26.90	\$ -0-	\$ 26.90
Employee + Family	\$74.46	\$72.60	\$ 26.90	\$ 45.70	\$ 72.60

[Signature] Initial to accept Dental Plan and New Rates.

RETIREE

Please circle one for each benefit that applies.

Your group allows retiree coverage for:

Medical Pre 65 Post 65
Dental Pre 65 Post 65

JB Initial to confirm.

WAITING PERIOD

Waiting period applies to all benefits.

JB **Employees**
89 days - Day following waiting period
Initial to confirm.

Elected Officials
Date of hire

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*

ALH 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 **07/31/2018** 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 Hunt 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 Honorable Delores K. Shelton, CIO/Treasurer

Address 2507 Lee Street, Room 106
Greenville, TX 75401-1097

Phone 903-408-4171

Fax 903-408-4285

Email hctreasurer@huntcounty.net

BILLING CONTACT

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

Please list changes and/or corrections below.

Name/Title Ms. Cindy Hames/Payroll & Benefits Coord.

Address PO Box 1097
Greenville, TX 75403-1097

Phone 903-408-4179

Fax 903-408-4285

Email hcpayroll@huntcounty.net

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 Ms. Cindy Hames/Payroll & Benefits Coord.

Address PO Box 1097
Greenville, TX 75403-1097

Phone 903-408-4179

Fax 903-408-4285

Email hcpayroll@huntcounty.net

Signature of County Judge or Contracting Authority

John L. Horn, Hunt County Judge

Date: July 24, 2018

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.



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

2018 - 2019 Vision Plan Election

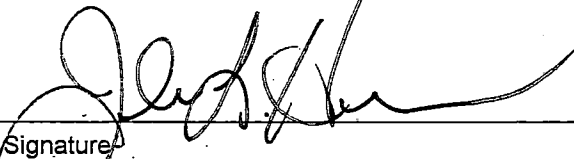
Please complete each section confirming your county or district is offering the Voluntary Vision benefit plan, and complete the contribution schedule according to your group's funding levels. This is a voluntary benefit so there is no requirement for the employer to fund any amount toward the coverage. Fax to 1-512-481-8481 or email to your TAC HEBP Employee Benefits Specialist.

Tier	Monthly Rates*	Amount Employer Pays	Amount Employee Pays
Employee Only	\$ 6.20	\$ 0.00	\$ 6.20
Employee + Child(ren)	\$ 12.44	\$ 0.00	\$ 12.44
Employee + Spouse	\$ 11.80	\$ 0.00	\$ 11.80
Employee + Family	\$ 18.28	\$ 0.00	\$ 18.28

Your payroll deductions for vision benefits are: (check one) Pre Tax Post Tax

* Note: Rates shown do not include a broker commission.

Please have your county or district's authorized Contracting Authority as listed on your TAC HEBP Renewal Notice and Benefit Confirmation (RNBC) sign below to indicate that the TAC HEBP Voluntary Vision benefit plan will be offered to your employees beginning on your upcoming health plan anniversary date.



Signature

John L. Horn, Hunt County Judge

Name/Title

July 24, 2018

Date

Connective tissue



TEXAS ASSOCIATION OF COUNTIES
HEALTHY AND EMPLOYEE BENEFITS PAID

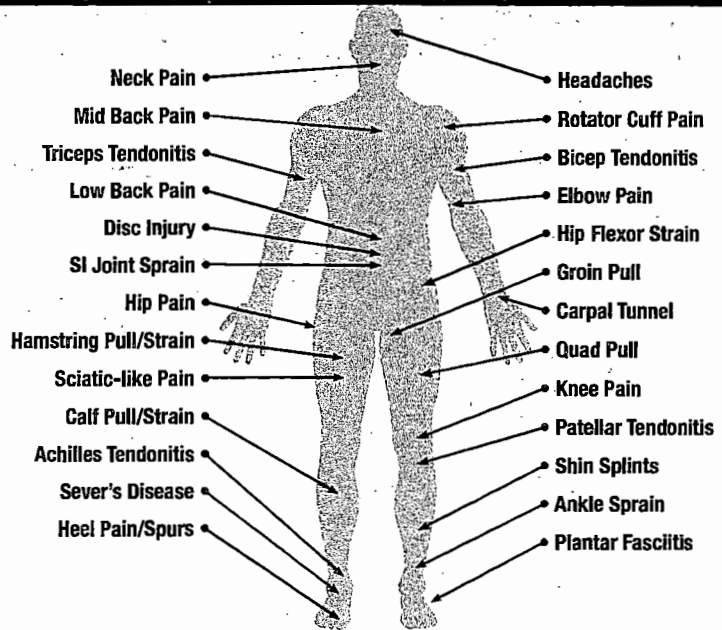
FIX PAIN FAST! NEW HEALTH PLAN BENEFIT

For all employees and dependents on the health plans offered by
Texas Association of Counties

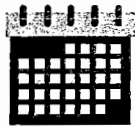
Effective 10/1/2018: Your copay for an Airrosti visit is the same cost as your primary care office visit copay (no deductible*).

Airrosti providers are experts at diagnosing and rapidly resolving the source of your injury.

Each patient receives one full hour of assessment, diagnosis, treatment, and education designed to eliminate the pain associated with many common conditions, allowing you to quickly and safely return to activity - usually within 3 visits (based on patient-reported outcomes).



Schedule Your Appointment Today!



3.2
visits average to complete injury resolution*

*Based on patient reported outcomes



10,000+

SURGERIES AVOIDED



40%
THE AVERAGE COST OF OTHER CARE

* "no deductible" does not apply to HRA/HSA plans

(800) 404-6050 | AIRROSTI.COM



BlueCross BlueShield



Powered by
MDLIVE

Care When and
Where You Need It
Just Got Easier

Virtual Visits

Convenient health care
at your fingertips



Getting sick is never convenient, and finding time to get to the doctor can be hard. Blue Cross and Blue Shield of Texas (BCBSTX) provides you and your covered dependents access to care for non-emergency medical issues and behavioral health needs through MDLIVE.

Whether you're at home or traveling, access to an independently contracted board-certified doctor is available 24 hours a day, seven days a week. You can speak to a doctor immediately or schedule an appointment based on your availability. Virtual visits can also be a better alternative than going to the emergency room or urgent care center.

MDLIVE doctors or therapists can help treat the following conditions and more:

General Health

- Allergies
- Asthma
- Nausea
- Sinus infections

Pediatric Care

- Cold
- Flu
- Ear problems
- Pinkeye

Behavioral Health

- Anxiety/depression
- Child behavior/learning issues
- Marriage problems