



REQUEST FOR AGENDA P	LACEMENT FORM
Submission Deadline - Tuesday, 12:	
SUBMITTED BY: Randy Gillespie TO	DAY'S DATE: July 1, 2016
<u>DEPARTMENT</u> :	X Personnel
SIGNATURE OF DEPARTMENT HEAD:	X
REQUESTED AGENDA DATE:	X July 11, 2016
SPECIFIC AGENDA WORDING: Considerenewal with Texas Association of Counties H	eration to approve 2017 Plan Year lealth and Employee Benefits Pool.
PERSON(S) TO PRESENT ITEM: Randy	Gillespie. Personnel Director
SUPPORT MATERIAL: (Must enclose sup	pporting documentation)
TIME: 15 min.	ACTION ITEM: X WORKSHOP:
(Anticipated number of minutes needed to discuss it	em) CONSENT: EXECUTIVE:
STAFF NOTICE:	
COUNTY ATTORNEY: ISS	DEPARTMENT:
	RCHASING DEPARTMENT:
	BLIC WORKS:
BUDGET COORDINATOR:OT	HER:
*********This Section to be Completed by	y County Judge's Office********
ASSIGNED AGE	NDA DATE:
	UDGE'S OFFICE
COLUMN AD DED ADDDOLLAR	Date

June 24, 2016



Mr. Randy Gillespie Johnson County HR Director 2 N. Main St. Rm 215 Cleburne, TX 76033

Dear Mr. Gillespie:

The Texas Association of Counties Health and Employee Benefits Pool (TAC HEBP) is pleased to enclose the group health renewal packet for your upcoming plan anniversary date. Here are some highlights of your 2017 Plan Year renewal (explanations are listed by item number, below):

- 1) Projected Combined Medical and Prescription Inflation for Plan Year 2017: 7.5%
- 2) Johnson County Renewal Rate change(s):
 - a. Health Plan: 3.00%
 - b. Dental Plan: Not Applicable.
 - c. Life/AD&D, STD/LTD: Not Applicable
- 3) Johnson County Surplus Distribution for 2015 Fiscal Year (paid in 2016): \$55,239
- 4) Deadline for returning signed renewal documents to TAC HEBP: August 1, 2016
- 5) Your Employee Benefits Consultant: Lisa McCaig (lisam@county.org); (800) 456-5974
- 1) Pool Performance. The Pool has stayed below the national average for health plan rate increases (trend) for the past twelve years and has done so again this year.
- 2) Renewal Rates. Rates are set annually using a comprehensive process which determines the actuarial needs of the Pool for the coming year. We then evaluate each individual group based on a combination of the group's size, claims experience, age, and geographic area.
- 3) Surplus Distribution. At the end of the 2015 Fiscal Year (FY), TAC HEBP had a surplus of \$13,533,936 available for distribution. The Board of Directors elected to return this to our Pool groups over the next 3 years. Your surplus distribution check will be mailed out by the end of July. For a description of how the distribution is allocated to groups, see the enclosed "2015 FY Surplus Distributions Frequently Asked Questions" notice.
- 4) Deadline to Return Renewal: Please return signed renewal documents on or before this date.
- 5) Questions and Concerns. If you have questions about your renewal, are interested in the impact of changes to your plan, or are considering changes to your personnel policies that will affect benefits (e.g.; adding/dropping retiree benefits, changing waiting period, etc.), please be sure to discuss this in advance with your Employee Benefits Consultant so we can coordinate the changes with your renewal.

Other important items to note for the upcoming plan year:

Benefit Year Alignment: Your Benefit Year and Plan Year are now aligned. This means that your Deductible and Co-Insurance "start over" at the same time as your plan year.

Prescription Plan Changes: See attached notice regarding important changes affecting all groups.

Benefits Value Advisor: This service will no longer be offered after September 30, 2016. Information will be provided in the Open Enrollment materials regarding how members can locate providers and get cost estimates.

Affordable Care Act Fees: The Board voted to pay 2016 ACA fees on behalf of Pool groups; see attached 'Health Care Reform Updates' document for details.

Dental Plans: There is no Open Enrollment for dental coverage this year.

Open Enrollment Toolkit: This will be sent via email and contains the forms and notices your group will need to process employee benefit renewals.

ACTION REQUIRED: Please present the renewal to the Commissioners Court for approval, complete and sign the enclosed Renewal Notice and Benefit Confirmation forms, and <u>return</u> to TAC no later than August 1, 2016.

TAC HEBP understands how valuable medical coverage is for your employees and their families. We appreciate your partnership with the Pool, and want to continue helping your county or district offer this important benefit. Again, we thank you for your membership in the Pool and look forward to working with you for the upcoming plan year.

Sincerely,

Quincy Quinlan, Director

Health and Benefits Services Department

Texas Association of Counties

Enclosures:

Renewal Checklist

Renewal Calendar

Renewal Notice and Benefit Confirmation (RNBC)

2015-16 Plan Year Claims Reports

Prescription Plan Changes

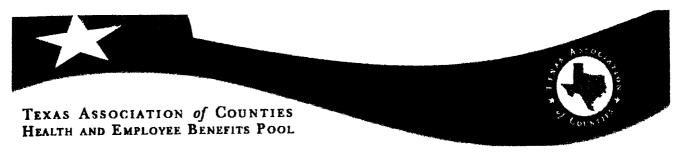
Surplus Distribution FAQs

Health Care Reform Updates for 2016-17 Plan Year

Grandfathered Plan FAQs

TAC HEBP Private Exchange Product Grid and FAQs

HEBP Territory Map and Contact Info



2016 - 2017 Renewal Notice and Benefit Confirmation

Group: 161134 - Johnson County

Anniversary Date: 10/01/2016

Return to TAC by: 08/01/2016

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 1-512-615-8954 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

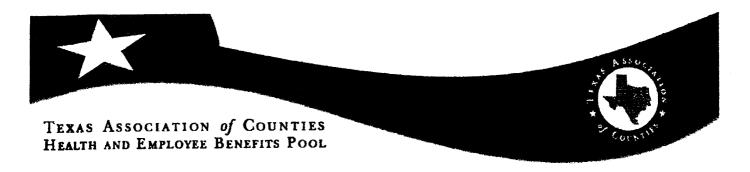
Medical: Custom Medical Plan RX Plan: Option Custom \$15/40/75 Your % rate increase is: -3.00%

Your payroll deductions for medical benefits are:

Pre Tax

Tier	Current Rates	New Rates Effective 10/1/2016	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$733.02	\$709.02	\$ 709.02	\$ 0	s 709. 02
Employee + Child	\$913.02	\$883.62	\$ 709. 02	\$ 174.60	\$ 883. 62
Employee + Child(ren)	\$1,129.02	\$1,093.14	\$ 709.02	\$ 384. 12	\$ 1,093.14
Employee + Spouse	\$1,539.34	\$1,491.16	\$ 709.02	\$ 782.14	\$ 1,491.16
Employee + Family	\$1,719.34	\$1,665.76	\$ 709.02	\$ 956. 74	\$ 1,665.76

Initial to accept Medical Plan and New Rates.



2016-2017 Alternate Plan Proposal

Group: 161134 – Johnson County Effective Date: 10/1/2016

	Current Plan Year Custom Medical/RX	Renewal Rates Custom Medical/RX	Option 1 Plan 1200-NGS Rx Option 5A-NG
Rates			
Employee Only	\$733.02	\$709.02	\$748.70
Employee + Child	\$913.02	\$883.62	\$933.28
Employee + Child(ren)	\$1,129.02	\$1,093.14	\$1,154.78
Employee + Spouse	\$1,539.34	\$1,491.16	\$1,575.54
Employee + Family	\$1,719.34	\$1,665.76	\$1,760.12
M edical Plan			
Deductible In/Out Network	\$1,000/\$5,000	\$1,000 <i>/</i> \$5,000	\$1,000/\$3,000
Co-Insurance % In/Out	80/50	80/50	80/60
Co-Insurance Maximum	\$5,000/\$10,000	\$5,000/\$10,000	\$3,000/\$6,000
Office Visit – Primary Care	\$30	\$30	\$30
Office Visit - Specialist	\$4 5	\$4 5	\$ 40
Emergency Room Hospital	\$300	\$300	\$150
Prescription Plan			
Prescription Card Co-Pay	\$15/40/75	\$15/40/75	\$10/30/50
Mail Order	2.5 Copay	2 x Copay	2 x Copay

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 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 08/01/2016 in order to avoid a delay in implementation of benefits and/or late processing fees.

processing rees.	0 1		/ م	
Please indicate the selected plan here:	Custom	Medica /	KX	
Fax the signed document to (512) 481-84	481.			
Signature Respublic	ned	Date: _	7-11-16	

161134 - Johnson County, 2017, Alternate Plan Proposal

RETIREE

Please circle one for each benefit that applies.

Your group allows retiree coverage for:

Medical

Pre 65

Post 65

Both

Initial to confirm.

WAITING PERIOD

Waiting period applies to all benefits.

Initial to confirm.

Employees

60 days - 1st of the month following date of hire but first of the month

Elected Officials

60 days - 1st of the month following date of hire but first of the month

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.

Broker or Consultant Information

PLAN INFORMATION

Please confirm your broker or consultant's name, if applicable:
Agency Name: Holmes Murphy
Agency Address: 127/2 Park Central Dr., Ste. 100
Number and Street
$\frac{Dallas}{City} \frac{TX}{State} \frac{75251}{Zip}$
Broker Representative or Consultant's Name:
Contact Phone Number: 214 532 - 10 43
Contact Email Address: jw: 11s @ holmes murphy. Com

Initial to confirm Broker or Consultant information

- Please update broker or consultant's information.
- 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 **08/01/2016** in order to avoid additional administrative fees.
- Signature on the following page is required to confirm and accept your group's renewal.

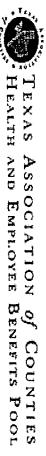
TAC HEBP Member Contact Designation Johnson County

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	Randy Gillespie/HR Director		
Address	2 Main St., Rm 215 Cleburne, TX 76033		
Phone	817-556-6194		
Fax	817-556-6899		
Email	randyg@johnsoncountytx.org		<u>.</u>
		CONTACT	
Responsib	le for receiving all invoices relating to HEBP prod		
		Please list changes and/or corrections below.	
Name/Title	Laura Baxter/Payroll Administrator		
Address	2 Main St., Rm 215 Cleburne, TX 76033		
Phone	817-556-6162		
Fax	817-556-6899		
Email	laurab@johnsoncountytx.org		
HIPAA Secu	ured Fax		
		CONTACT	
HEBP's ma	in contact for daily matters pertaining to the heal	th benefits.	
		Please list changes and/or corrections below.	
Name/Title	Brenda Slauson/Personnel Assistant		
Address	2 Main St., Rm 215 Cleburne, TX 76033		
Phone	817-556-6349		
Fax	817-556-6899		
Email	brendas@johnsoncountytx.org		
Ry	constance.	Date: 7 11 16	
Signature of	County Judge or Contracting Authority	•	
Roge	er Harmon, County Ju	<u>lge</u>	
Please PRIN	T 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.



12 Month Report - Medical

Group Number: JOHNSON COUNTY - 161134

Claims Paid Through: 4/30/2016

\$3,773,674.70	\$937,505.05	\$2,836,169.65 \$937,505.05 \$ 3,773,674.70	\$4,751,362.30			Total for 12 months
\$213,767.94	\$70,460.23	\$143,307.71	\$386,988.00	582	504	May-2015
\$285,151.22	\$59,707.40	\$225,443.82	\$389,344.08	579	507	Jun-2015
\$325,160.49	\$77,157.96	\$248,002.53	\$390,810.12	584	510	Jul-2015
\$324,437.60	\$82,153.84	\$242,283.76	\$390,810.12	584	510	Aug-2015
\$245,007.66	\$65,787.44	\$179,220.22	\$395,208.24	590	516	Sep-2015
\$278,194.67	\$80,360.09	\$197,834.58	\$398,140.32	594	520	Oct-2015
\$436,681.57	\$89,213.22	\$347,468.35	\$400,735.38	721	630	Nov-2015
\$423,472.66	\$81,688.87	\$341,783.79	\$399,822.36	598	522	Dec-2015
\$397,757.87	\$84,266.03	\$313,491.84	\$399,929.06	600	524	Jan-2016
\$324,751.96	\$79,517.12	\$245,234.84	\$399,376.04	599	523	Feb-2016
\$276,486.77	\$81,025.93	\$195,460.84	\$398,308.60	599	518	Mar-2016
\$242,804.29	\$86,166.92	\$156,637.37	\$401,889.98	608	519	Apr-2016
Paid	RX X	Medical	Contribution	Members	EEs	Month / Year
Total	Paid	Paid		Total	Total	



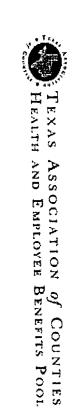
Large Claimant Summary

Claimants Over: \$10,000 Group Number: JOHNSON COUNTY - 161134

Claims Paid: 5/1/2015 - 4/30/2016

Product Type: PPO

\$24,969.79	\$13,073.95	\$11,895.84	Active	1622688G
\$25,263.98	\$24,884.01	\$379.97	Active	1654754G
\$26,023,65	\$312.83	\$25,710.82	Active	1648030G
\$26,042.24	\$468.17	\$25,574.07	Active	1649715G
\$26,062.64	\$248.68	\$25,813.96	Active	1632669G
\$26,251.53	\$92.46	\$26,159.07	Active	1642476G
\$26,486.33	\$53.76	\$26,432.57	Active	1631359G
\$26,644.63	\$25,237.33	\$1,407.30	Active	1626321G
\$26,754.36	\$15,965.04	\$10,789.32	Active	1625601G
\$30,489.26	\$6,028.12	\$24,461.14	Active	1614115G
\$33,032.13	\$337,22	\$32,694.91	Active	1631485G
523.0	\$3,825.99	\$32,697.03	Active	1606456G
\$38,328.13	\$37,752.32	\$575.81	Active	1649185G
\$39,141.86	\$38,523.19	\$618.67	Retired	1613179G
\$41,801.05	\$40,655.18	\$1,145.87	Active	1616969G
718	\$1,721.75	\$41,996.91	Active	1647006G
507	\$2,661.65	\$42,846.18	Active	1508400G
	\$8,191.58	\$39,834.16	Active	1676990G
\$56,613.49	\$24,273.62	\$32,339.87	Active	1613470G
\$61,963.20	\$14,781.48	\$47,181.72	Active	1629345G
052.	\$9,430.95	\$53,621.07	Active	1619062G
	\$2,246.02	\$63,559.80	Active	1608076G
900	\$68,038.22	\$1,862.39	Active	1615139G
	\$19,447.17	\$51,925.88	Retired	1629474G
\$/3,542.24	\$1,018.07	\$72,524.17	Active	1685631G
8,410.0	\$7,284.86	\$71,125.15	Active	1606903G
\$131,737.20	\$1,356.64	\$130,582.64	Active	1608651G
200	\$1,098.93	\$149,659.24	Active	1616760G
164,130	\$25,037.63	\$139,118.66	Active	1611194G
\$327,480.17	\$8,577.63	\$318,902.54	Active	1631279G
Total Palo Ciamis	Kx claims	Medical Claims	Status	Claimant Number
Total Daid Claims				



Large Claimant Summary

Claimants Over: \$10,000

Group Number: JOHNSON COUNTY - 161134

Claims Paid: 5/1/2015 - 4/30/2016

Ŀ	#0.00	\$14,964,251	Active	1671718G
\$14 984 79	11:3/0/3#	\$14,004,00 \$14,004,00	Active	1611094G
\$15,007.60	¢2 872 11	412 125 40	A - + :	100000
\$15,213.25	\$4,391.05	\$10,822,20	Active	16095356
\$15,418.19	\$40.70	\$15,377.49	Active	1631641G
	\$1,850.46	\$13,661.47	Active	1608101G
\$16,101.2	\$5,941.96	\$10,159.26	Active	1621265G
\$15,483.5	\$1,206.43	\$15,277.22	Active	1633058G
\$16,653	\$10,903.64	\$5,749.80	Active	1652064G
\$15,512,21	\$13,538.63	\$3,379.65	Active	1611159G
\$17,027,4U	\$648.1/	\$16,379.23	Active	1624219G
2/3	\$23.06	\$17,250.29	Active	1632696G
329	\$1,142.05	\$16,187.47	Active	3825G
\$17,527.19	\$164.59	\$17,362.60	Active	1628555G
\$1/,522.28	\$2,807.22	\$14,815.06	Active	1650094G
\$18,410,00	\$15,274.10	\$3,135.90	Active	1626015G
\$18,459.33	\$8,826.50	\$9,632.83	Active	1634312G
\$18,4/3.58	\$101,70	\$18,371.88	Active	1635221G
\$18,529,19	\$4,625.53	\$13,903.66	Active	1611009G
\$19,226.83	\$2,163.94	\$17,062.89	Active	1614469G
\$19,858,25	\$8,564.90	\$11,293.36	Active	1616647G
\$20,493.49	\$12,591,94	\$7,901.55	Active	1652309G
\$20,6//.14	\$3,777.48	\$16,899.66	Active	1610151G
۱.		\$20,749.71	Active	1742674G
\$20,778.50	\$847.99	\$19,930.61	Active	1635361G
	\$8,910.2/	\$11,946.36	Active	1610525G
7.7.7.	\$5,973.80	\$14,977.41	Active	1616791G
	\$5,427.30	\$16,014.14	Active	1621504G
4 0	10.67178	\$19,753.91	Active	1608613G
272	\$20,739.10	\$1,198.08	Active	1633870G
	10.10C,C\$	\$19,089.36	Retired	1626190G
220	#3 E61 31	\$23,919.29	Active	1327617G
\$73,972.54	\$0,000,0¢	\$17,435.02	Active	1631783G
\$24,104,32	00.04 00.04	\$24,534,00	Active	1651576G
\$24,634,00	00 O\$	+54 754 00		



Large Claimant Summary

Claimants Over: \$10,000

Group Number: JOHNSON COUNTY - 161134

Claims Paid: 5/1/2015 - 4/30/2016

BREWSHIELEN THE	1/65" (348" 35883	<u> </u>	ில் பகம்	કાર્યાસન તાગુ વિજ્ઞાન હામભાસ ઉપાધી
10775C0	The state of the s	\$3,830.06	Active	1654956G
\$10,242,J/	\$421.87	\$9,820.50	Active	1625995G
\$10,335.97	\$8,966.87	\$1,370,10	Active	1664044G
\$10,543./1		\$10,457.33	Active	1624941G
\$10,821,44	6	\$9,926.45	Active	1611015G
\$11,089.03		\$10,838.98	Active	1612531G
\$11,301.04	\$104.13	\$11,196.91	Retired	1618304G
\$11,3/2,2/	\$360,96	\$11,011.31	Active	1736901G
\$11,775.50	\$1,4/4.03	\$10,301.47	Active	1609869G
\$12,302.62	\$0.00	\$12,302.62	Active	1618272G
\$12,446,32	\$1,717.06	\$10,729.26	Active	1621127G
\$12,789.96	\$2,731.36	\$10,058.60	Active	1607196G
04.106/21¢	\$454.09	\$12,507.31	Active	1669972G
\$13,061,40	\$11,296.27	\$1,770.42	Active	1609636G
\$13,00 ,1 00	\$10,8//.44	\$2,507.22	Active	1629344G
73 706 C 14 10:086,014	\$4,553./4	\$9,032.27	Active	1639771G
\$13 585 01	\$44.22	\$14,216.41	Active	1627361G
63 03C 714	\$11,785.20	\$2,506.00	Active	1647516G
\$1.7.71.00 \$1.7.71.00 \$1.7.71.00	44.500.94 44.500.54	\$11,809,09	Active	1609579G
#14 413 03	\$12,373.02	\$2,094.65	Active	1608610G
¢14 467 67	+0.07 CZ C C + +	\$13,399.74	Active	1695116G
\$14.805.35	١	Clarity : cre. 0, 2, 4		
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