



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

May 23, 2024

Hon. Kevin Lee Benton  
Montague County Judge  
PO Box 475  
Montague, TX 76251-0475

Dear Judge Benton:

The Texas Association of Counties Health and Employee Benefits Pool (TAC HEBP) is pleased to enclose Montague County's employee benefit renewal for your upcoming plan anniversary date.

For over a decade, the Pool renewal has been below the state average for health plan rate increases. While high-cost claimants (individuals whose claims exceed \$50,000) and high-cost specialty medications continue to have a significant impact, the **Pool renewal average of 4.6%** is once again below the projected 2025 medical and prescription drug trend (healthcare cost inflation) for Texas, which is 7–13%.

Renewal rates are set annually using a comprehensive actuarial process that determines the amount needed by the Pool to fund claims and operating costs for the coming year. We then evaluate each individual county or district based on a combination of the group's size, claims experience, high-cost claimants, age and gender statistics, and geographic area (healthcare claims vary significantly by geographic region of the state). **Based on this analysis, Montague County's renewal rate may be above or below the Pool average.** Your renewal rates for Plan Year 2025 are enclosed, along with your TAC Employee Benefits and Wellness Consultants' contact information. Your renewal information may include alternate benefit plans (if not, alternates are available upon request).

As you may be aware, we are in the transition phase of a major update to OASys, our eligibility and enrollment platform. The functionality for entering your renewal response online through OASys is still being tested. Instructions for you to complete your renewal selections online will be provided within the next few weeks, with adequate time for you to meet the renewal response deadline.

TAC HEBP understands how valuable healthcare benefits are for your employees and their families. We appreciate your partnership with the Pool and are pleased to help Montague County offer this important employee benefit. Again, we thank you for your membership in the Pool and look forward to working with you during the upcoming plan year.

Sincerely,

Quincy Quinlan, Director  
Health and Benefits Services Department  
Texas Association of Counties

cc: Jennifer Essary

cc: Jennifer Fenoglio



# TEXAS ASSOCIATION of COUNTIES HEALTH AND EMPLOYEE BENEFITS POOL

Montague County's Renewal Rate change(s) for Plan Year 2025:

- Health Plan: 3.5%**
- Dental Plan: 3.5%**
- Life Plan(s):** No change to current Life rates.
- Vision Plan:** Employee or Employer-paid options available.

**NOTE: Deadline for returning signed renewal documents to TAC-HEBP:  
June 28, 2024**

Contact your TAC Employee Benefits Consultant right away if you:

- ✓ Want to discuss alternates (which may lower rates), and/or to learn about the impact of changes to your plan
- ✓ Want information about other TAC HEBP employee benefit plans (Dental, Life, or Vision)
- ✓ Are considering changes to your personnel policies that will affect benefits (such as adding/dropping retiree benefits, changing waiting period, etc.)

**Employee Benefits Consultant:** *Jonathan Collander (jonathanc@county.org) (800) 456-5974*

- **HEALTHY COUNTY FORMS:** Your renewal packet includes Healthy County Contacts and CSI (County Specific Incentive) documents. Please review and make changes as needed to your Wellness contact information. Please complete both forms and return them with your renewal. Contact your TAC Wellness Consultant if you have any questions.

**Wellness Consultant:** *Tasha Brent (tashab@county.org) (800) 456-5974.*

- **EMPLOYEE OPEN ENROLLMENT:** You have the option to allow employees to make their open enrollment changes online through the Employee Self-Service portal by logging on to <https://mybenefits.county.org>.
- **AFFORDABLE CARE ACT FEES:** The HEBP Board voted to pay 2024 ACA fees on behalf of Pooled groups; see attached 'Health Care Reform Updates' document for details.
- **OPEN ENROLLMENT TOOLKIT:** This will be sent via email by July 18 and contains the forms and notices your group will need to process employee benefit renewals.
- **WHEN IT'S DUE:** Once your renewal benefit decision has been approved, complete:
  1. Montague County's Renewal Notice and Benefits Confirmation (RNBC) **AND**
  2. Healthy County Wellness Contacts and CSI forms, print and initial/sign where indicated, and return to TAC HEBP via email, or fax to (512) 481-8481 on or before the date shown below.



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

**ACTION REQUIRED:** Please present the renewal to the Commissioners Court for a decision. Once the renewal plan has been selected, complete the RNBC form online\*, and return the initialed and signed RNBC to TAC no later than:  
**June 28, 2024.**

**NOTE:** Submitting your RNBC after the due date will result in a delay in implementing your benefit plan renewal, including employee enrollment changes.

\* The functionality for entering your renewal response online through OASys is in testing. Instructions for you to complete your renewal selections online will be provided within the next few weeks, with adequate time for you to meet the renewal response deadline.

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## Renewal Attachments:

Renewal Letter

Renewal Documents

- Renewal Notice and Benefit Confirmation (RNBC) \*
- 12-month Claims Report
- High-Cost Claimant (HCC) Report
- Healthy County Wellness Contacts designation form \*
- Healthy County County-Specific Incentive (CSI) election form \*

Renewal Packet

\* return initialed/signed copies to TAC HEBP by due date

## Renewal Packet contents:

Renewal Checklist

Renewal Calendar

Affordable Care Act update memo for 2024-25

TAC HEBP Territory Map and Contacts

Grandfathered Plan FAQ



Texas Association of Counties  
1700 Ross Street, Suite 1000, Austin, TX 78701

## 2024 - 2025 Renewal Notice and Benefit Confirmation

Group: 94581 – Montague County

Anniversary Date: 10/1/2024

Return to TAC by: 06/28/2024

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 lacyj@county.org.

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

### MEDICAL


Medical: Plan 1200 \$30 Copay; \$1000 Ded; 80%; \$3000 OOP Max

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

Your % rate increase is: 3.5%

Your payroll deductions for medical benefits are: Pre Tax

Tier	Current Rates	New Rates Effective 10/1/2024	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$1,049.70	\$1,086.44	\$ 1086.44	\$ 0	\$ 1086.44
Employee + Spouse	\$2,240.42	\$2,318.82	\$ 1086.44	\$ 1232.38	\$ 2318.82
Employee + Child(ren)	\$1,650.46	\$1,708.22	\$ 1086.44	\$ 621.78	\$ 1708.22
Employee + Family	\$2,841.16	\$2,940.60	\$ 1086.44	\$ 1854.16	\$ 2940.60

 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: 3.5%

Your payroll deductions for dental benefits are: Pre Tax

Tier	Current Rates	New Rates Effective 10/1/2024	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$31.34	\$32.44	\$ 32.44	\$ 0	\$ 32.44
Employee + Spouse	\$69.00	\$71.42	\$ 32.44	\$ 38.98	\$ 71.42
Employee + Child(ren)	\$64.80	\$67.06	\$ 32.44	\$ 34.62	\$ 67.06
Employee + Family	\$102.40	\$105.98	\$ 32.44	\$ 73.54	\$ 105.98

KTB Initial to accept Dental Plan and New Rates.

**VISION**

Vision: VALUE-12/12/24, \$10 Exam Copay, \$15 Lenses Copay, \$130 Frame Allowance

Your % rate increase is: 0.0%

Your payroll deductions for vision benefits are: Pre Tax

Tier	Current Rates	New Rates Effective 10/1/2024	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$4.58	\$4.58	\$ 4.58	\$ 0	\$ 4.58
Employee + Spouse	\$8.72	\$8.72	\$ 4.58	\$ 4.14	\$ 8.72
Employee + Child(ren)	\$9.18	\$9.18	\$ 4.58	\$ 4.60	\$ 9.18
Employee + Family	\$13.52	\$13.52	\$ 4.58	\$ 8.94	\$ 13.52

KTB Initial to accept Vision Plan and New Rates.

**LIFE - BASIC**

**Basic Life Products:**

Coverage Volume: \$20,000

	<b>Current Rates</b>	<b>New Rates Effective 10/1/2024</b>	<b>Amount Employer Pays</b>	<b>Amount Employee/Retiree Pays (if applicable)</b>
Basic Term Life	\$0.202	\$0.202	100%	0%
Basic AD&D	\$0.027	\$0.027	100%	0%

 Initial to accept New Basic Life Rates.

**RETIREES**

Please check one for each benefit that applies.

Your group allows retiree coverage for:

- |         |  |   |
|---------|--|---|
| Medical | <input checked="" type="checkbox"/> Pre 65 | <input type="checkbox"/> Post 65            |
| Dental  | <input checked="" type="checkbox"/> Pre 65 | <input checked="" type="checkbox"/> Post 65 |
| Vision  | <input checked="" type="checkbox"/> Pre 65 | <input checked="" type="checkbox"/> Post 65 |

\_\_\_\_\_  
Initial to confirm.

**WAITING PERIOD**

Waiting period applies to all benefits.

**Employees**

89 days - Day following waiting period

**Elected Officials**

Date of hire

\_\_\_\_\_  
Initial to confirm.

**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*
- County/Group processes TAC HEBP Continuation of Coverage on OASys (< 20 employees)  
*\*County/Group is responsible for fulfilling notification process and requirements*

    *KCB*     Initial to confirm COBRA Administration.

**PLAN INFORMATION**

**Broker or Consultant Information**

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

Please list changes and/or corrections below

Agency Name

Agency Address

Broker Representative or  
Consultant's Name

Contact Phone Number

Contact Email Address

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           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 **6/28/2024** 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

## Montague 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** Jennifer Essary  
**Title** Auditor  
**Address** PO Box 56  
 Montague, TX 76251  
**Phone** 940-894-6090  
**Fax** 940-894-3110  
**Email** jessarymca@gmail.com

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### BILLING CONTACT

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

Please list changes and/or corrections below.

**Name** Jennifer Fenoglio  
**Title** Treasurer  
**Address** PO BOX 186  
 Montague, TX 76251  
**Phone** 940-894-2161  
**Fax** 940-894-3110  
**Email** j.fenoglio@co.montague.tx.us

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### COUNTY REPRESENTATIVE

TAC HEBP's main contact for daily matters pertaining to health benefits.

Please list changes and/or corrections below.

**Name** Jennifer Fenoglio  
**Title** Treasurer  
**Address** PO Box 186  
 Montague, TX 76251  
**Phone** 940-894-2161  
**Fax** 940-894-3110  
**Email** j.fenoglio@co.montague.tx.us

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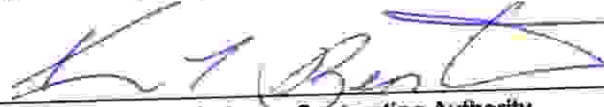
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 \_\_\_\_\_  
 Signature of County Judge or Contracting Authority

  
 \_\_\_\_\_  
 Date

  
 \_\_\_\_\_  
 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.*

# 12-Month Medical Report

Post Date : Mar 2024

Metrics : (Average Members, Average Subscribers, Total Contribution, Medical Paid, Pharmacy Paid, Paid)

Rows : (Paid Date)

Columns : (Metrics)

Paid Date : Last 12 Months [Apr 2023 - Mar 2024]

Account : (000094500 - POOLED)

Coverage Type : (Medical)

Group : (094581 - MONTAGUE COUNTY)

Paid Date	Average Subscribers	Average Members	Total Contribution	Medical Paid	Pharmacy Paid	Paid
Apr 2023	97	128	\$103,336.08	\$49,330.64	\$35,513.00	\$84,843.64
May 2023	97	130	\$102,341.10	\$207,352.73	\$36,470.74	\$243,823.47
Jun 2023	96	129	\$102,910.54	\$36,222.73	\$47,986.42	\$84,209.15
Jul 2023	94	127	\$100,920.58	\$42,764.98	\$14,076.84	\$56,841.82
Aug 2023	96	131	\$103,479.98	\$121,781.84	\$42,991.55	\$164,773.39
Sep 2023	98	136	\$105,044.40	\$94,318.54	\$34,185.06	\$128,503.60
Oct 2023	96	134	\$109,771.78	\$238,545.14	\$5,693.15	\$244,238.29
Nov 2023	97	131	\$107,520.56	\$74,007.42	\$14,600.50	\$88,607.92
Dec 2023	97	131	\$109,619.96	-\$80,100.99	\$27,180.65	-\$52,920.34
Jan 2024	97	131	\$108,619.96	\$42,296.12	\$7,534.36	\$49,830.48
Feb 2024	97	133	\$110,220.72	\$3,216.27	\$27,478.95	\$30,695.22
Mar 2024	99	135	\$110,220.72	\$92,880.64	\$58,957.54	\$151,838.18
<b>Total Selected Filter(s)</b>	<b>97</b>	<b>131</b>	<b>\$1,275,006.98</b>	<b>\$922,616.06</b>	<b>\$352,668.76</b>	<b>\$1,275,284.82</b>

**HCC - No PHI**

Post Date : Mar 2024

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

Metrics : (Paid)

Claim Type : (MEDICAL, PHARMACY)

Coverage Type : (Medical)

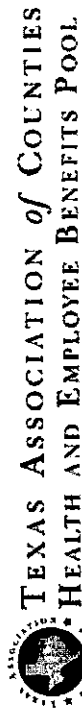
Group : (094581 - MONTAGUE COUNTY)

Paid Month : Last 12 Months [Apr 2023 - Mar 2024]

Paid greater or equal 10000.00

Paid : descending

Encrypted Member ID	Member Status	Medical Paid	Pharmacy Paid	Paid
19600285605	Active	\$225,930.97	\$1.96	\$225,932.93
7490023280	Active	\$107,688.93	\$24,375.20	\$132,064.13
16520159844	Active	\$87,374.19	\$12,985.00	\$100,359.19
19100287830	Active	\$2,094.18	\$95,691.45	\$97,785.63
18240711543	Active	\$50,476.77	\$26,540.37	\$77,017.14
20150366966	Active	\$5,487.27	\$59,605.03	\$65,102.30
14230231061	Active	\$61,917.86	\$19.97	\$61,937.83
3060332373	Active	\$41,756.94	\$6,935.05	\$48,691.99
17850127797	Active	\$40,156.57	\$675.74	\$40,732.31
7490023304	Under 65 Retiree	\$4,387.48	\$28,351.43	\$32,738.91
8390237023	Under 65 Retiree	\$20,648.67	\$9,518.08	\$30,166.75
19190140271	Active	\$24,453.98	\$388.55	\$24,842.53
9060335828	Active	\$12,865.96	\$11,571.80	\$24,437.76
20600518438	Active	\$18,752.88	\$0.00	\$18,752.88
17460579400	Active	\$5,909.02	\$12,142.13	\$18,051.15
15560423891	Active	\$17,697.67	\$21.03	\$17,718.70
17850054024	Active	\$4,108.55	\$12,900.26	\$17,008.81
7490023369	Active	\$10,603.59	\$5,573.31	\$16,176.90
16370544661	Active	\$15,151.48	\$1,014.58	\$16,166.06
7490023326	Active	\$10,793.63	\$706.56	\$11,500.19
19400382571	Active	\$10,973.78	\$3.15	\$10,976.93
20390124545	Active	\$10,228.58	\$0.00	\$10,228.58
<b>Grand Total</b>		<b>\$769,168.95</b>	<b>\$308,920.65</b>	<b>\$1,078,089.60</b>



# 12-Month Dental Report

Post Date : Mar 2024

Metrics : (Average Subscribers, Average Members, Total Contribution, Dental Paid)

Rows : (Paid Date)

Columns : (Metrics)

Paid Date : Last 12 Months [Apr 2023 - Mar 2024]

Account : (000094500 - POOLED)

Coverage Type : (Dental)

Group : (094581 - MONTAGUE COUNTY)

Paid Date	Average Subscribers	Average Members	Total Contribution	Dental Paid
Apr 2023	99	159	\$4,449.66	\$5,153.00
May 2023	99	162	\$4,417.84	\$3,893.25
Jun 2023	98	159	\$4,451.74	\$4,162.31
Jul 2023	96	156	\$4,354.12	\$2,205.80
Aug 2023	98	160	\$4,451.74	\$3,963.10
Sep 2023	100	165	\$4,517.54	\$3,667.33
Oct 2023	99	167	\$4,520.44	\$6,676.70
Nov 2023	100	168	\$4,489.10	\$4,949.71
Dec 2023	100	168	\$4,551.78	\$9,975.14
Jan 2024	100	168	\$4,551.78	\$3,856.40
Feb 2024	100	170	\$4,585.24	\$3,326.00
Mar 2024	102	172	\$4,585.24	\$2,347.40
<b>Total Selected Filter(s)</b>	<b>99</b>	<b>165</b>	<b>\$53,926.22</b>	<b>\$54,176.14</b>



TEXAS ASSOCIATION OF COUNTIES  
HEALTH AND WELLNESS BUILDERS TOGETHER

# HEALTHY COUNTY WELLNESS CONTACT DESIGNATION

## Montague 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.

**Current Wellness Coordinator**  
**Name:** Miss Angelia Richardson

**Title:** Admin Assistant

**Address:** PO Box 475  
Montague, TX 76251-0475

**Email:** arichardson@co.montague.tx.us

**Phone Number:** (940) 894-2401

Please list changes and/or corrections:

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### WELLNESS SPONSOR

The Wellness Sponsor is responsible for supporting the coordinator in administrating Healthy County components and encouraging county employees to access all Healthy County wellness resources available. An elected official in this role is preferred to illustrate management support for wellness.

**Current Wellness Sponsor**  
**Name:** Hon. Kim Jones

**Title:** County Clerk

**Address:** 11339 State Hwy 59 North  
Montague, TX 76251

**Email:** mcoclerk@windstream.net

**Phone Number:** (940) 894-2461

Please list changes and/or corrections:

Additional Wellness Sponsor  
Laurie Ritchie

11339 State Hwy 59 N.  
Montague, TX 76251

electionclerk@Co.Montague.tx.us

940-894-2540

Contracting Authority Signature: 

Date: June 24, 2024



TEXAS ASSOCIATION OF COUNTIES  
HEALTH AND WELLNESS RESOURCE PROGRAM

## 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 online or on the mobile app.

### 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.

- We would like to implement a CSI Program for the 2024-2025 plan year.
- We are interested in learning more about the CSI Program.
- We are not interested in learning more about the CSI Program at this time.

County or District Name: Montague County

Printed Name and Title: Kevin Benton, County Judge

Contracting Authority Signature: [Signature]

Date: June 24, 2024