



**COMMISSIONER'S COURT MINUTES**

**JULY 19<sup>th</sup> SPECIAL TERM, A.D. 2017**

1. **CALL TO ORDER.**
2. **DETERMINATION THAT A QUORUM IS PRESENT:**

**BE IT REMEMBERED** that on this the 19<sup>th</sup> day of July A.D. 2017 at 9:00 o'clock A.M., after due notice was given by posting of the attached Agenda; the Honorable Val Verde County Commissioners' Court convened in **SPECIAL SESSION**. The meeting was called to order, the following members being present and constituted a quorum: Efrain V. Valdez, County Judge, Presiding; Martin Wardlaw, Commissioner of Precinct No. 1; Lewis Owens, Commissioner of Precinct No. 2; Robert "LeBeau" Nettleton; Commissioner of Precinct No. 3; Gustavo Flores, Commissioner of Precinct No. 4; and Generosa Gracia-Ramon, County Clerk; when the following proceeding was had to wit:

3. Pledge of Allegiance.

**NOTICE IS HEREBY GIVEN TO THE PUBLIC THAT THE FOLLOWING ITEMS WILL BE DISCUSSED AND POSSIBLE ACTION MAY BE TAKEN BY THE VAL VERDE COUNTY COMMISSIONERS COURT:**

**MOTION KEY:**  
 EFRAIN V VALDEZ= EVV  
 COMM WARDLAW=W  
 COMM OWENS=O  
 COMM NETTLETON=N  
 COMM FLORES= F

**QUORUM**

- COUNTY JUDGE
- Judge's Staff
- Judge's Staff
- COMM. PRCT# 1
- COMM. PRCT# 2
- COMM. PRCT# 3
- COMM. PRCT# 4

**ATTENDING**

**COUNTY STAFF/DEPTS:**

- COUNTY ATTY
- COUNTY ATTY STAFF
- COUNTY ATTY STAFF
- DISTRICT CLERK
- IT
- SHERIFF
- SHERIFF'S STAFF
- AUDITOR
- TREASURER
- PURCHASING
- HR
- TAX COLLECTOR
- RISK MGMT
- FIRE DEPT
- EMERGENCY
- MGMT**
- JP #1
- JP #2
- JP #3
- JP #4
- OTHER \_\_\_\_\_

Constable  
 GerardoHernandez

MOTION KEY: EFRAIN V VALDEZ= EVV; COMM WARDLAW=W; COMM OWENS=O; COMM NETTLETON=N; COMM FLORES=F

**Judge Efrain Valdez, County Judge**

4. Discussion and possible action on the proposed TAC Health & Employee Benefits Pool renewal packet for Plan Year 2018.

ORDER	Motion	2 <sup>nd</sup>	Amend	Amendment/Notes	Accept	Ayes	Noes	Abst
N/A				Presentation only.				

**Matthew Weingardt, County Auditor**

5. Presentation, discussion and possible action on 2016 County Audit.

ORDER	Motion	2 <sup>nd</sup>	Amend	Amendment/Notes	Accept	Ayes	Noes	Abst
# 17-306	N	O		Motion to approve and accept 2016 County Audit.		W, N, F, EVV		

Commissioners Court reserves the right to hear any of the above agenda items that qualify for an executive session in an executive session by publicly announcing the applicable section number of the Meetings Act (Chapter 551 of the Texas Government Code that justifies executive session treatment.

6. Adjourn. 9:27 a.m.

The foregoing, recorded in Volume 49, pages 242-258, inclusive, was on this the 21<sup>st</sup> day of August A.D. 2016, read and is hereby **APPROVED**.

Respectfully submitted,

*Efrain Valdez*  
 Efrain V. Valdez, County Judge  
 Val Verde County, Texas



ATTEST:

*Generosa Gracia-Ramon*  
 GENEROSA GRACIA-RAMON,  
 COUNTY CLERK

MOTION KEY: EFRAIN V VALDEZ= EVV; COMM WARDLAW=W; COMM OWENS=O; COMM NETTLETON=N; COMM FLORES=F

County of Val Verde



**Efrain V. Valdez**

County Judge

P.O. Box 4250  
Del Rio, TX 78841  
Email: [evaldez@valverdecountry.org](mailto:evaldez@valverdecountry.org)

Phone (830) 774-7501  
Fax (830) 775-9406

**AGENDA/NOTICE**  
**VAL VERDE COUNTY COMMISSIONERS COURT**

**SPECIAL MEETING**

**Old County Court At-Law Building  
207B E. Losoya St.  
Del Rio, TX**

**July 19, 2017 –9:00 A.M.**

1. Call to order.
2. Determination that a quorum is present.
3. Pledge of allegiance.

**NOTICE IS HEREBY GIVEN TO THE PUBLIC THAT THE FOLLOWING ITEMS WILL BE DISCUSSED AND POSSIBLE ACTION MAY BE TAKEN BY THE VAL VERDE COUNTY COMMISSIONERS COURT:**

**Efrain Valdez, County Judge**

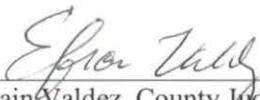
4. Discussion and possible action on the proposed TAC Health & Employee Benefits Pool renewal packet for Plan Year 2018.

**Matthew Weingardt, County Auditor**

5. Presentation, discussion and possible action on 2016 County Audit.

Commissioners Court reserves the right to hear any of the above agenda items that qualify for an executive session in an executive session by publicly announcing the applicable section number of the Open Meetings Act (Chapter 551 of the Texas Government Code) that justifies executive session treatment.

6. Adjourn.

  
Efrain Valdez, County Judge  
Val Verde County, Texas

THIS NOTICE OF THE AGENDA WAS POSTED ON THE BULLETIN BOARD ON: JULY 14, 2017 at 3:48 AM/PM

2011 JUL 14 P 3:48  
GENEROSA, GRACIA-RANDI  
VAL VERDE COUNTY CLERK  
BY mf DEPUTY

FILED

P.O. Box 4250 • Del Rio, TX 78841

**CERTIFICATE**

I, the undersigned County Clerk, do hereby certify that the above **AGENDA/NOTICE/ADDENDUM** of the Val Verde County Commissioner's Court is a true and correct copy of the **AGENDA/NOTICE/ADDENDUM** as posted on the courthouse door of Val Verde County, at a place readily accessible to the general public at all times on the 14<sup>th</sup> day of JULY, 2017, at 3:48 o'clock P. m. and said **AGENDA/NOTICE/ADDENDUM** remained so posted continuously for at least 72 hours preceding the scheduled time of said meeting.



**Generosa Gracia-Ramon**  
**Val Verde County Clerk**



County Clerk

#4

June 23, 2017

Honorable Efrain Valdez  
Val Verde County Judge  
PO Box 4250  
Del Rio, TX 78841

Dear Judge Valdez:

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 2017-18 Plan Year renewal (explanations below):

- 1) **Projected Pool needed amount for claims and operational expenses for Plan Year 2018: +7%**
- 2) **Val Verde County Renewal Rate change(s):**
  - a. Health Plan: + 7%
  - b. Dental Plan: + 0%
  - c. Life/AD&D, STD/LTD: No change to rates
- 3) **Your County's Reserved Surplus Distribution from 2015 Fiscal Year: \$42,174**
- 4) **Deadline for returning signed renewal documents to TAC HEBP: July 31, 2017**
- 5) **Your Employee Benefits Consultant: Ernesto Martinez (ErnestoM@county.org);(800) 456-5974**

1) **Pool Performance.** The Pool has stayed below the national average for health plan rate increases for the past twelve years. This year, the needed amount for Plan Year 2018 pool-wide is increasing by 7%, which is consistent with projected medical and pharmacy cost trends at the state and national levels.

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 over the past 12-36 months, average member age, and geographic area.

3) **Surplus Distribution.** At the end of 2016, due to a significant spike in high claims, the Pool did not recognize a surplus. Your Board of Directors voted, however, to reserve a portion of the surplus from 2015 operations, with half of the reserved amount to be distributed with the 2017 renewal and half with the 2018 renewal. The 2017 distribution includes 2% interest.

4) **Deadline to Return Renewal:** Please sign and return renewal signature page by this date.

5) **Questions and Concerns.** Because you are currently using a grandfathered plan, we have included 2 alternate plan options for you, the 'G' and 'G2' plans. Both of these are grandfathered plans, so adopting one of them would not change your ACA grandfathered status. 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 with your Employee Benefits Consultant so we can coordinate the changes with your renewal.

**Other important items to note for the upcoming plan year:**

**Electronic Renewal:** You will be completing your Renewal Notice and Benefits Confirmation (RNBC) online through the OASys system. After completing the form online, save and print it, sign the signature page (the last page of the form: "TAC HEBP Member Contact Designation"), and send it to TAC HEPB via email, or fax to (512) 481-8481.

**Affordable Care Act Fees:** The HEBP Board voted to pay 2017 ACA fees on behalf of Pooled groups; see attached 'Health Care Reform Updates' document for details.

**Dental Plans:** There will not be Open Enrollment for dental coverage this year.

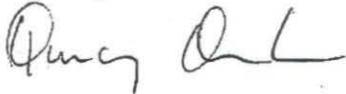
**Open Enrollment Toolkit:** This will be sent via email and contains the forms and notices your group will need to process employee benefit renewals.

**ACTION REQUIRED:** Please present the renewal to the Commissioners Court for approval, have your authorized OASys user complete the Renewal Notice and Benefit Confirmation forms online, and

scan and email or fax the signed document to TAC no later than July 31, 2017.

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 Val Verde County 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)
- 2016-17 Plan Year Claims Reports
- Health Care Reform Updates for 2017-18 Plan Year
- Grandfathered Plan FAQs
- HEBP Territory Map and Contact Info



TEXAS ASSOCIATION of COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL

Large Claimant Report Renewal PY 2018

**Paid Band :** Total (\$10,001 - \$30,000, \$30,001 - \$50,000, \$50,001 - \$75,000, \$75,001 - \$100,000, \$100,001 - \$150,000, \$150,001 - \$200,000, \$200,001 - \$250,000, \$250,001 - \$300,000, \$300,001 - \$400,000, \$400,001 - \$500,000, \$500,000+)

**Metrics :** (Paid)

**Group :** (025511 - VAL VERDE COUNTY EMPLOYEES/TAC)

**Paid Month :** May 2016 - Apr 2017

**Service Category :** Exclude (Dental)

**Paid :** descending

Encrypted Member ID	Member	Status	Medical Paid	Pharmacy Paid	Paid
3085963349	Under 65	Retiree	\$139,001.30	\$541.78	\$139,543.08
11220000942	65+	Retiree	\$68,671.30	\$1,716.37	\$70,387.67
3065591757	Active	Active	\$169.16	\$61,754.09	\$61,923.25
3040612358	Active	Active	\$3,562.28	\$55,133.80	\$58,696.08
3071029788	Active	Active	\$50,060.40	\$43.11	\$50,103.51
16370544656	Active	Active	\$37,474.45	\$2,407.65	\$39,882.10
16790093748	Active	Active	\$34,911.20	\$4,462.51	\$39,273.71
3040612374	Active	Active	\$34,287.52	\$0.00	\$34,287.52
13720091703	Active	Active	\$29,016.15	\$0.00	\$29,016.15
3040612393	Active	Active	\$22,620.73	\$5,263.20	\$27,883.93
3040612433	Under 65	Retiree	\$4,779.44	\$22,813.77	\$27,593.21
3040612403	Active	Active	\$23,063.94	\$2,458.88	\$25,522.82
3062673154	Active	Active	\$22,351.76	\$549.80	\$22,901.56
16990353573	Active	Active	\$18,841.50	\$3,899.08	\$22,730.58
12190233159	Active	Active	\$19,954.60	\$1,234.22	\$21,188.82
16620234842	Active	Active	\$86.42	\$21,060.77	\$21,147.19
17300287636	Active	Active	\$20,155.39	\$0.00	\$20,155.39
3061141779	Active	Active	\$252.07	\$19,001.45	\$19,253.52
3052118289	Active	Active	\$16,062.13	\$909.42	\$16,971.55
3040612409	Active	Active	\$10,009.71	\$4,230.17	\$14,239.88
3630229891	Active	Active	\$13,899.89	\$41.30	\$13,941.19
3064571601	Active	Active	\$4,820.59	\$8,564.22	\$13,384.81
12540252066	Active	Active	\$6,054.63	\$7,312.86	\$13,367.49
17461293371	Active	Active	\$8,427.41	\$4,081.24	\$12,508.65

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

17960074489	Active	\$12,098.73	\$213.14	\$12,311.87
3041014982	Active	\$11,829.54	\$440.82	\$12,270.36
16030349626	Active	\$11,976.63	\$2.04	\$11,978.67
11690128644	Active	\$10,374.42	\$729.32	\$11,103.74
17850393372	Active	\$10,893.51	\$0.00	\$10,893.51
3062586925	Active	\$10,386.37	\$0.00	\$10,386.37
17210162431	Active	\$10,309.46	\$0.00	\$10,309.46
3040612366	Active	\$5,695.32	\$4,596.30	\$10,291.62
3040612402	Active	\$9,232.52	\$919.12	\$10,151.64
3060536773	Active	\$2,063.41	\$8,001.94	\$10,065.35
<b>Query Total</b>	<b>34</b>	<b>\$683,293.88</b>	<b>\$242,372.37</b>	<b>\$925,666.25</b>
<b>Report Total</b>	<b>34</b>	<b>\$683,293.88</b>	<b>\$242,372.37</b>	<b>\$925,666.25</b>



TEXAS ASSOCIATION of COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL

**2017 - 2018 Renewal Notice and Benefit Confirmation**

Group: 25511 - Val Verde County

Anniversary Date: 10/01/2017

Return to TAC by: 7/31/2017

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 JenniferR@County.org.

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

**MEDICAL**

Medical: Plan 600 \$25 Copay, \$250 Ded, 80%, \$2000 OOP Max

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

Your % rate increase is: 7.00%

Your payroll deductions for medical benefits are:

Pre Tax

Tier	Current Rates	New Rates Effective 10/1/2017	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$455.96	\$487.88	\$	\$	\$
Employee + Child	\$643.52	\$688.56	\$	\$	\$
Employee + Child(ren)	\$732.70	\$783.98	\$	\$	\$
Employee + Spouse	\$987.06	\$1,056.14	\$	\$	\$
Employee + Family	\$1,138.54	\$1,218.24	\$	\$	\$

\_\_\_\_\_ Initial to accept Medical Plan and New Rates.

**DENTAL**

Dental: Plan III w/Ortho- 80% Prevent., \$75 Ded, 80% Bas. 50% Major

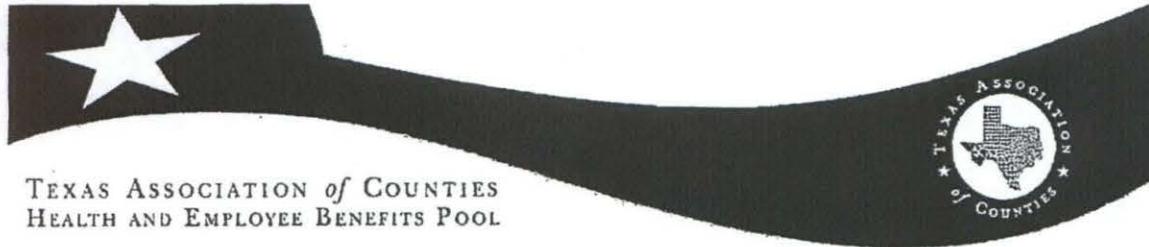
Your % rate increase is: 0.00%

Your payroll deductions for dental benefits are:

Pre Tax

Tier	Current Rates	New Rates Effective 10/1/2017	New Amount Employer Pays	New Amount Employee Pays	New Amount Retiree Pays (if applicable)
Employee Only	\$14.42	\$14.42	\$	\$	\$
Employee + Child(ren)	\$28.84	\$28.84	\$	\$	\$
Employee + Spouse	\$38.72	\$38.72	\$	\$	\$
Employee + Family	\$53.16	\$53.16	\$	\$	\$

\_\_\_\_\_ Initial to accept Dental Plan and New Rates.



TEXAS ASSOCIATION of COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL

### 2017 - 2018 Alternate Plan Proposal

Group: 25511 - Val Verde County

Effective Date: 10/01/2017

	Current Plan Year	Renewal Rates	Option 1	Option 2
Plan:	600	600	600-G	600-G2
Option:	RX-4A	RX-4A	RX-4A-G	RX-4A-G2
<b>Rates</b>				
Employee Only	\$455.96	\$487.88	\$474.62	\$465.22
Employee + Child	\$643.52	\$688.56	\$669.70	\$656.36
Employee + Child(ren)	\$732.70	\$783.98	\$762.46	\$747.24
Employee + Spouse	\$987.06	\$1,056.14	\$1,027.04	\$1,006.44
Employee + Family	\$1,138.54	\$1,218.24	\$1,184.64	\$1,160.84
<b>Medical Plan</b>				
Deductible In/Out Network	\$250/500	\$250/500	\$300/600	\$340/680
Co-Insurance % In/Out	80/60	80/60	80/60	80/60
Co-Insurance Maximum	\$2000/4000	\$2000/4000	\$2400/4800	\$2750/5500
Office Visit	\$25	\$25	\$30	\$30
Specialist Visit				
Emergency Room Hospital	\$90	\$90	\$90	\$100
<b>Prescription Plan</b>				
Prescription Card Co-Pay	10/25/40	10/25/40	10/30/45	15/30/50
Deductible	\$0	\$0	\$0	\$0

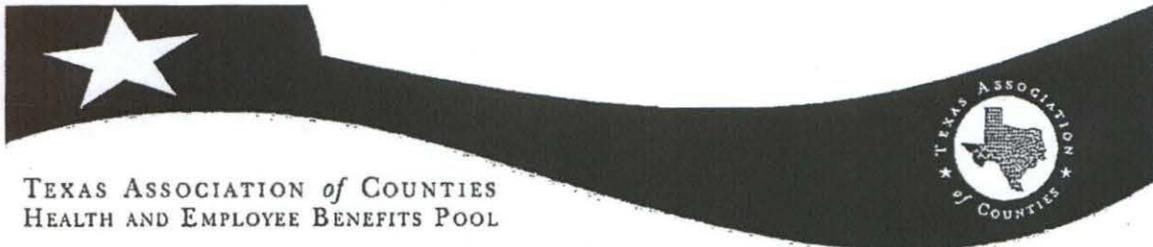
Proposal rates are based on the following information:

- 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 7/31/2017 in order to avoid a delay in implementation of benefits and/or late processing fees.

Please indicate the selected plan here \_\_\_\_\_  
Fax the signed document to 1-512-481-8481.

Signature \_\_\_\_\_ Date \_\_\_\_\_

25511 - Val Verde County, 2018, Alternate Plan Proposal



TEXAS ASSOCIATION of COUNTIES  
HEALTH AND EMPLOYEE BENEFITS POOL

2017 - 2018 Alternate Plan Proposal

Group: 25511 - Val Verde County

Effective Date: 10/01/2017

	Current Plan Year	Renewal Rates	Option 1	Option 2
Plan:	600	600	1100-NG	HSA 100
Option:	RX-4A	RX-4A	RX-4A-NG	RX-1A
<b>Rates</b>				
Employee Only	\$455.96	\$487.88	\$463.56	\$376.78
Employee + Child	\$643.52	\$688.56	\$654.00	\$530.68
Employee + Child(ren)	\$732.70	\$783.98	\$744.54	\$603.84
Employee + Spouse	\$987.06	\$1,056.14	\$1,002.82	\$812.54
Employee + Family	\$1,138.54	\$1,218.24	\$1,156.64	\$936.84
<b>Medical Plan</b>				
Deductible In/Out Network	\$250/500	\$250/500	\$750/1000	\$2500/5000
Co-Insurance % In/Out	80/60	80/60	80/60	\$5000/10000
Co-Insurance Maximum	\$2000/4000	\$2000/4000	\$3000/6000	100/70
Office Visit	\$25	\$25	\$25	\$2500/5000
Specialist Visit				
Emergency Room Hospital	\$90	\$90	\$150	
<b>Prescription Plan</b>				
Prescription Card Co-Pay	10/25/40	10/25/40	10/25/40	5/15/30
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 NULL in order to avoid a delay in implementation of benefits and/or late processing fees.

Please indicate the selected plan here \_\_\_\_\_.

Fax the signed document to 1-512-481-8481.

Signature \_\_\_\_\_ Date \_\_\_\_\_

25511 - Val Verde County, 2018, Alternate Plan Proposal

**LIFE - BASIC**

**Basic Life Products:**  
(Rates are per thousand)

Coverage Volume per Employee: \$10,000

	<b>Current Rates</b>	<b>New Rates Effective 10/1/2017</b>	<b>Amount Employer Pays</b>	<b>Amount Employee/ Retiree Pays (if applicable)</b>
Basic Term Life	\$0.144	\$0.144	100%	0%
Basic AD&D	\$0.030	\$0.030	100%	0%

Coverage Volume per Retiree: \$2,500

Basic Retiree Life	\$0.144	\$0.144	100%	0%
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\_\_\_\_\_ Initial to accept New Basic Life Rates.

**RETIREE**

Please circle one for each benefit that applies.

Your group allows retiree coverage for:

Medical	<b>Pre 65</b>	<b>Post 65</b>	<b>Both</b>
Dental	<b>Pre 65</b>	<b>Post 65</b>	<b>Both</b>

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

**WAITING PERIOD**

Waiting period applies to all benefits.

	<b>Employees</b>	<b>Elected Officials</b>
	<b>Date of hire</b>	<b>Date of hire</b>
_____		

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

**TAC HEBP Member Contact Designation  
Val Verde 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** Juanita Barrera /Human Resource Director

**Address** 400 Pecan 3rd Floor  
Del Rio, TX 78840-1491

**Phone** 830-774-7543

**Fax** 830-774-7659

**Email** jbarrera@valverdecountry.org

**BILLING CONTACT**

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

Please list changes and/or corrections below.

**Name/Title** Mr. Matthew Weingardt/County Auditor

**Address** 901 Bedell Avenue Suite A  
Del Rio, TX 78840

**Phone** 830-774-7584

**Fax** 830-774-7508

**Email** mweingardt@valverdecountry.org

**HIPAA Secured Fax**

**PRIMARY CONTACT**

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

Please list changes and/or corrections below.

**Name/Title** Juanita Barrera/Human Resources Director

**Address** 400 Pecan 3rd Floor  
Del Rio, TX 78840

**Phone** 830-774-7543

**Fax** 830-774-7659

**Email** jbarrera@valverdecountry.org

Date: \_\_\_\_\_

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

**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.
- 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 **7/31/2017** in order to avoid additional administrative fees.
- Signature on the following page is required to confirm and accept your group's renewal.

## 12 Month Dental Report

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

Rows : (Paid Date)

Columns : (Metrics)

Paid Date : Last 12 TimeMonths

Coverage Type : (Dental)

Group : (025511 - VAL VERDE COUNTY EMPLOYEES/ITAC)

Paid Date	Unique Subscribers	Unique Members	Total Contribution	Dental Paid
May 2016	243	355	\$5,407.18	\$3,827.60
Jun 2016	244	350	\$5,455.00	\$3,396.80
Jul 2016	243	349	\$5,455.00	\$5,283.40
Aug 2016	245	351	\$5,470.94	\$2,849.40
Sep 2016	247	353	\$5,502.82	\$1,127.00
Oct 2016	247	355	\$5,017.44	\$2,528.30
Nov 2016	250	360	\$5,060.70	\$2,408.00
Dec 2016	252	362	\$5,118.38	\$2,884.30
Jan 2017	252	363	\$5,050.80	\$3,406.80
Feb 2017	250	359	\$5,123.76	\$2,314.90
Mar 2017	251	358	\$5,075.16	\$3,959.30
Apr 2017	251	358	\$5,003.06	\$2,604.90
<b>Total: Selected Filter(s)</b>	<b>285</b>	<b>410</b>	<b>\$62,740.24</b>	<b>\$36,590.70</b>

## 12 Month Medical Report

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

Rows : (Paid Date)

Columns : (Metrics)

Paid Date : Last 12 TimeMonths

Coverage Type : (Medical)

Group : (025511 - VAL VERDE COUNTY EMPLOYEES/TAC)

Paid Date	Unique Subscribers	Unique Members	Total Contribution	Medical Paid	Pharmacy Paid	Paid
May 2016	242	311	\$131,483.00	\$75,169.63	\$41,402.06	\$116,571.69
Jun 2016	243	309	\$132,777.14	\$86,286.41	\$19,005.96	\$105,292.37
Jul 2016	242	308	\$132,777.14	\$89,083.58	\$37,906.47	\$126,990.05
Aug 2016	244	312	\$133,766.68	\$131,492.84	\$32,039.71	\$163,532.55
Sep 2016	245	315	\$134,458.64	\$177,589.29	\$28,397.97	\$205,987.26
Oct 2016	246	322	\$126,550.70	\$109,846.37	\$26,724.91	\$136,571.28
Nov 2016	249	327	\$127,650.18	\$64,900.35	\$31,679.77	\$96,580.12
Dec 2016	251	329	\$129,294.80	\$81,024.43	\$33,584.55	\$114,608.98
Jan 2017	251	328	\$128,120.18	\$107,680.40	\$42,031.43	\$149,711.83
Feb 2017	250	325	\$129,200.26	\$50,451.26	\$23,659.19	\$74,110.45
Mar 2017	251	326	\$129,200.26	\$65,236.47	\$28,541.66	\$93,778.13
Apr 2017	251	325	\$127,188.86	\$42,425.98	\$27,682.62	\$70,108.60
<b>Total: Selected Filter(s)</b>	<b>283</b>	<b>370</b>	<b>\$1,562,467.84</b>	<b>\$1,081,187.01</b>	<b>\$372,656.30</b>	<b>\$1,453,843.31</b>