

BE IT REMEMBERED that the Board of Supervisors of Clay County, Mississippi, met at the Courthouse in West Point, MS, on the 31st day of May, 2018, at 9:00 a.m., and present were: Lynn Horton, President, Luke Lummus, R. B. Davis, Shelton Deanes and Joe Chandler. Also present were Angela Turner-Ford, Board Attorney, Treva Hodge, County Personnel Manager, and Eddie Scott, Sheriff of Clay County; when and where the following proceedings were as determined to wit;

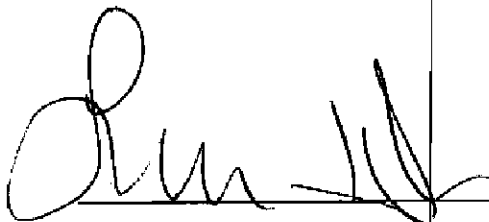
NO. _____

***IN THE MATTER OF ADOPTING AND AMENDING THE AGENDA FOR THE BOARD
OF SUPERVISORS MEETING HELD ON MAY 31, 2018***

There came on this day for consideration the matter of adopting and amending the agenda for the Board of Supervisors meeting held on May 31, 2018.

After motion by Joe Chandler and second by Shelton Deanes this Board doth vote unanimously to adopt the agenda as attached hereto as Exhibit A as presented to this Board.

SO ORDERED this the 31st day of May, 2018.



Lynn D. Horton, President

Clay County Board of Supervisors
Agenda for Board Meeting Held
Wednesday, May ~~30~~³¹, 2018 at 9:00 a.m.

- Call to Order
- Welcome and Prayer
- Adopt and Amend the agenda
- Group Insurance Renewal Quotes
- Authorize and approve Debora Myers to travel to Justice for All youth in Biloxi, MS August 1-3, 2018
- Authorize to spread on the minutes Certificate of Training on Randy Jones
- ~~Adjourn until Monday, June 4, 2018 at 9:00 a.m. at the Clay County Courthouse~~

Amend 7/31 - 8/4/18

Amendments:

IN THE MATTER OF AUTHORIZING AND APPROVING TO AWARD THE GROUP HEALTH INSURANCE RENEWAL QUOTE TO GALLOWAY CHANDLER MCKINNEY INSURANCE COMPANY AND REMAINING WITH BLUE CROSS BLUE SHIELD OF MISSISSIPPI

There came on this day for consideration the matter of authorizing and approving to award the group health insurance renewal quote to Galloway Chandler McKinney Insurance Company and remaining with Blue Cross Blue Shield of Mississippi.

It appears to this Board Ellis and Associates and Galloway Chandler & McKinney Insurance agencies have both presented quotes on providing Blue Cross Blue Shield of Mississippi Insurance to the County for the Group Health Insurance plan, and;

It appears to this Board as attached hereto as Exhibit A are the quotes of Galloway Chandler and McKinney and Ellis and Associates for the Group Health Insurance Plan for year 2018-2019, and;

It appears to this Board that the lowest and best quote of Group Health Insurance is the quote of Galloway Chandler McKinney Insurance.

After motion by Shelton Deanes and second by Luke Lummus this Board doth vote unanimously to authorize and approve to award and accept the quote for the County's Group Health Insurance Plan beginning July 1, 2018 through June 30, 2019 to Galloway Chandler McKinney Insurance and for the said Group Health Insurance Policy to remain with Blue Cross Blue Shield of Mississippi along with a GAP Policy with Gulf Guaranty which will cover 70% of the employees out of pocket expense portion on the Blue Cross/Blue Shield Policy of Mississippi as outlined in the attachment at attached hereto in Exhibit A.

SO ORDERED this 31st day of May, 2018.



Lynn D. Horton, President

Treva Hodge

From: Renee Gibbons <renee.gibbons@gcm-insurance.com>
Sent: Thursday, May 31, 2018 8:54 AM
To: Treva Hodge
Cc: Kyle Chandler IV
Subject: Updated \$500 Quote

Treva,

Here is our revised proposal to show the \$500 deductible.

Here are a couple of points to consider:

- 2 Year Rate guarantee
- \$500 Deductible
- Discount card to cover tier 1 and 2, and 3 only – they would still be able to use it at any BCBS participating pharmacy.
- The category 4 drugs would be filed with BCBS, then the Gulf Guaranty gap will cover them at 70% up to the maximum member out of pocket. (so, for example a member on Humira – assuming it costs \$4,500, the member would pay \$1,350. Under this scenario though, at least your member would be getting credit on the BCBS plan. Also, their maximum out of pocket would be \$2,150. This out of pocket includes medical and pharmacy. You may want to check if Leslie's plan does that as well.
- Our plan with GG will also honor any deductible credit from January 2018 through June 30, 2018. (may want to confirm that is the case with Leslie as well)
- We still have the Telemedicine.

- Under this plan – our major drugs will still be crediting to the member's out of pocket.

Our quote is \$702.42 for employee only (Les Smith - \$714.01); \$920.03 family (Les Smith - \$934.06).

Using 92 employees to compare – our quote is annually: \$775,471.68 (County portion)

Their quote is annually: \$788,267.04 (County portion)

Please call us if you have any additional questions.

Thank you.
Renee

Renee Gibbons, RHU

Galloway-Chandler-McKinney Insurance, LLC

Columbus, West Point, Starkville, Amory, Aberdeen

Office – (662) 328-0492

Fax – (662) 328-6578

Email – renee.gibbons@gcm-insurance.com



www.gcminsurance.com

**Clay County
Group Health Insurance Renewal Quotes
July 1, 2018 thru June 30, 2019**

| Calendar Year Deductible | GCM | Total Cost For 92 Employees | Ellis | Total Cost For 92 Employees | Variance |
|---------------------------------|------------------------|--|-------------------------------|--|-----------------|
| | Prem Per/EE | | Mnthly Prem Per EE | | |
| \$500 plan | \$702.42 | \$775,471.68 | \$714.01 | \$788,267.04 | (\$12,795.36) |
| \$1000 plan | \$732.70 | \$808,900.80 | \$744.01 | \$821,387.04 | (\$12,486.24) |

These are the quotes as presented, adopted, and approved by the Board of Superisors and made part of their minutes at the meeting dated May 31, 2018

CLAY COUNTY

| PRIMARY BENEFIT SUMMARY | Carrier | BCBS | | BCBS + MediHOP | | BCBS + MediHOP | | | |
|--|---|--|---|---|---|---|------------------------|----------------|----------------|
| | | In-Network | Non-Network | In-Network | Non-Network | In-Network | Non-Network | | |
| Calendar Year Deductible | Individual Family | \$1,000 \$3,000 | \$1,000 \$3,000 | \$5,000 \$10,000 | \$5,000 \$10,000 | \$5,000 \$10,000 | \$5,000 \$10,000 | | |
| Co-Insurance Percentage | Carrier Insured | 80% 20% | 60% 40% | 70% 30% | 50% 50% | 70% 30% | 50% 50% | | |
| Individual Calendar Year Co-Insurance Limit | | \$2,000 | Unlimited | \$1,650 | Unlimited | \$1,650 | Unlimited | | |
| Calendar Year Maximum Out-Of-Pocket Limit | Individual Family | \$3,000 \$9,000 | Unlimited Unlimited | \$6,650 \$13,300 | Unlimited Unlimited | \$6,650 \$13,300 | Unlimited Unlimited | | |
| Physicians Office Visit Copay (PCP/Specialist) | | \$20/\$20 | Ded/Co-Ins | Ded then \$20/\$20 | Ded/Co-Ins | Ded then \$20/\$20 | Ded/Co-Ins | | |
| Emergency Room | | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | | |
| Urgent Care Facility | | \$20 Copay | Ded/Co-Ins | Ded then \$20 | Ded/Co-Ins | Ded then \$20 | Ded/Co-Ins | | |
| Advanced Radiology & Imaging (MRI's, CT's, PET's & etc) | | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | | |
| Outpatient Surgery | | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | Ded/Co-Ins | | |
| Preventive Wellness | | 100% | Ded/Co-Ins | 100% (Enhanced Wellness) | Ded/Co-Ins | 100% (Enhanced Wellness) | Ded/Co-Ins | | |
| Prescription Drugs | Deductible Category 1, 2, 3, 4 | \$50 \$10/\$25/\$50/\$100 | | Medical Deductible \$10/\$25/\$50/\$100 | | Medical Deductible \$10/\$25/\$50/\$100 | | | |
| SECONDARY BENEFIT SUMMARY | | No Benefit | | MediHOP Benefit | | MediHOP Benefit | | | |
| Calendar Year Benefit Period | | | | Per Person | Per Family | Per Person | Per Family | | |
| Calendar Year Deductible | | | | \$500 | \$1,000 | \$1,000 | \$2,000 | | |
| MediHOP Benefit | | | | \$4,500 | \$9,000 | \$5,650 | \$11,300 | | |
| Physicians Office Visit Copay (Primary/Specialist/UC) | | | | \$20/\$20/\$20 | | \$20/\$20/\$20 | | | |
| Prescription Drugs Category 1, 2, 3, 4 (Retail Pharmacy) Groden Triangle Pharmacy (90) Day Maintenance Meds | | | | \$50 Deductible (Category 2, 3, 4 only) \$0/\$10/\$25/\$50/\$100 \$10/\$25/\$75/\$150 | | \$50 Deductible (Category 2, 3, 4 only) \$0/\$10/\$25/\$50/\$100 \$10/\$25/\$75/\$150 | | | |
| PRIMARY + SECONDARY CLAIMS PROCESS | | PRIMARY + SECONDARY CLAIMS PAYMENT EXAMPLES | | | | | | | |
| 1st Step: Provider files claim with "Primary" Major Medical plan. Procedure is PPO replicated & applied to deductible & coinsurance. EOB is sent to the provider & insured showing how benefits have been applied. | Inpatient Hospital Stay Totaling \$50,000 | Outpatient Procedure Totaling \$15,000 | Inpatient Hospital Stay Totaling \$50,000 | Outpatient Procedure Totaling \$15,000 | Inpatient Hospital Stay Totaling \$50,000 | Outpatient Procedure Totaling \$15,000 | | | |
| Primary Major Medical Deductible | \$ 1,000 | \$ 1,000 | \$ 5,000 | \$ 5,000 | \$ 5,000 | \$ 5,000 | | | |
| Primary Major Medical Coinsurance Limit | \$ 2,000 | \$ 2,000 | \$ 1,650 | \$ 1,650 | \$ 1,650 | \$ 1,650 | | | |
| Calendar Year Out-Of-Pocket Maximum | \$ 3,000 | \$ 3,000 | \$ 6,650 | \$ 6,650 | \$ 6,650 | \$ 6,650 | | | |
| 2nd Step: Provider files EOB with "Secondary". MediHOP pays allowable benefits. EOB is sent to the provider & insured showing how benefits have been applied. | "No" MediHOP Benefit | "No" MediHOP Benefit | MediHOP Benefit | MediHOP Benefit | MediHOP Benefit | MediHOP Benefit | | | |
| MediHOP Deductible (Replaces "Primary" Deductible) | \$ - | \$ - | \$ 500 | \$ 500 | \$ 1,000 | \$ 1,000 | | | |
| MediHOP Benefit | \$ - | \$ - | \$ 4,500 | \$ 4,500 | \$ 5,650 | \$ 5,650 | | | |
| Insureds Net Out-Of-Pocket Responsibility (1000 + 2000) | \$ 3,000 | \$ 3,000 | \$ (500 + 1650) 2,150 | \$ 2,150 | \$ 1,000 | \$ 1,000 | | | |
| Family Net Out-Of-Pocket Responsibility X3 | \$ 9,000 | \$ 9,000 | \$ X2 4,300 | \$ 4,300 | \$ 2,000 | \$ 2,000 | | | |
| ELECTION & RATES | | Current | Renewal | BCBS | MediHOP | Total | BCBS | MediHOP | Total |
| Employee Only | 48 | \$ 664.57 | \$ 764.26 | \$ 484.01 | \$ 230.00 | \$ 714.01 | \$ 484.01 | \$ 260.00 | \$ 744.01 |
| Employee + Spouse | 0 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| Employee + Children | 0 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| Employee + Family | 44 | \$ 871.60 | \$ 1,001.19 | \$ 634.06 | \$ 300.00 | \$ 934.06 | \$ 634.06 | \$ 330.00 | \$ 964.06 |
| Monthly Totals | 92 | \$ 70,205.76 | \$ 80,736.44 | \$ 51,131.12 | \$ 24,240.00 | \$ 75,371.12 | \$ 51,131.12 | \$ 27,000.00 | \$ 78,131.12 |
| Annual Totals | | \$ 842,469.12 | \$ 968,842.08 | \$ 613,573.44 | \$ 290,880.00 | \$ 904,453.44 | \$ 613,573.44 | \$ 324,000.00 | \$ 937,573.44 |
| Monthly Difference From (Current) | | | \$ (10,531.08) | | | \$ (5,165.36) | | | \$ (7,925.36) |
| Annual Difference From (Current) | | | \$ (126,372.96) | | | \$ (61,984.32) | | | \$ (95,104.32) |

Disclaimer: Every effort has been made to fairly and equitably present the material terms and provisions of each plan and any errors and/or omissions are unintentional. Refer to each company's actual individual policy/certificate which will prevail.

455

206.03

236.93

220.05

220.05

NO. _____

***IN THE MATTER OF APPROVING THE COUNTY'S GROUP LIFE INSURANCE
POLICY AND VOLUNTARY VISION AND DENTAL QUOTES FOR YEAR 2018***

There came on this day for approving the County's Group Life Insurance policy and voluntary vision and dental quotes for year 2018.

It appears to this Board Treva Hodge, Personnel Manager, is recommending to this Board the quote from Principal Life for the Group Term Life Policy as attached hereto as Exhibit A, and;

It appears to this Board Treva Hodge is recommending to this Board the quote of Principal for the Vision and Dental plans, both of which are voluntary deductions elected by the employee with the rates for both as outlined in Exhibit B as attached hereto.

After motion by R. B. Davis and second by Joe Chandler this Board doth vote unanimously to authorize and approve of the group term life insurance rates and voluntary vision and dental rates as outlined in Exhibits A and B as attached hereto.

SO ORDERED this the 31st day of May, 2018.



Lynn D. Horton, President

Amy Berry

From: Treva Hodge <thodge@claycounty.ms.gov>
Sent: Monday, July 09, 2018 9:15 AM
To: 'Amy Berry'
Subject: RE: Vision, Dental, and Life
Attachments: 13 - BENEFIT COSTS for 2018-2019.pdf

Carrier is still Principal. They did not change carrier.

See attached rates.
Life rates are:
6.03 for regular employees
7.71 for elected officials

Treva Hodge
Clay County, MS
P O Box 815 | 365 Court Street
West Point, MS 39773
662-494-3124 (courthouse office)
662-494-5152 (911 office)
662-295-0909 (cell)
662-492-4059 (fax)
thodge@claycounty.ms.gov

From: Amy Berry [<mailto:aberry@claycounty.ms.gov>]
Sent: Sunday, July 08, 2018 2:06 PM
To: Treva Hodge
Subject: Vision, Dental, and Life

Treva
I need premium information and plan names or plan information for the minutes on the Vision dental and life.
I need to know who the name of the company the board voted to stay with for vision, Dental, and life. And what those rates are. I know the carrier or agent is GCM. But, I need company names and that sort of thing.

If you can get for me tomorrow that would be great. Thanks !!!

Amy Berry
Chancery Clerk
Clay County, MS
P O Box 815
West Point, MS 39773
(662) 494-3124
(662) 492-4059 FAX
aberry@claycounty.ms.gov

BENEFIT COSTS July 2018 – June 2019

| <u>BENEFIT</u> | <u>MONTHLY COST</u> | |
|------------------|---------------------|---------------|
| BCBS | \$217.61 | Family |
| Principal Vision | \$9.47 | Employee only |
| | \$14.39 | Employee + 1 |
| | \$25.25 | Family |
| Principal Dental | \$30.44 | Employee only |
| | \$63.99 | Employee + 1 |
| | \$103.13 | Family |

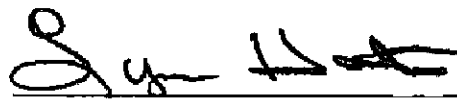
NO. _____

IN THE MATTER OF RECESSING

[There came on this day for consideration the matter of recessing.

After motion by Luke Lummus and second by R. B. Davis this board doth vote unanimously to recess until Monday, June 4, 2018, at 9:00 a.m. at the Clay County Courthouse.

SO ORDERED this the 31st day of May, 2018.



Lynn D. Horton, President