



PY 2024-2025 Dependent Pilot Program Alternates
Group: 66504 – Navarro County
Effective Date: 10/01/2024

Current Funding		Plan 1100 NGS Rx-4A NG		Renewal: 4.6%	
Current Enrollment	Tier	Current	Renewal	County Contribution	Employee Cost
257	Employee Only	\$1,060.04	\$1,108.80	\$1,108.80	\$0.00
28	Employee + Child	\$1,440.98	\$1,507.26	\$1,108.80	\$398.46
6	Employee + Children	\$1,898.22	\$1,985.54	\$1,108.80	\$876.74
4	Employee + Spouse	\$2,225.44	\$2,327.80	\$1,108.80	\$1,219.00
1	Employee + Family	\$2,882.52	\$3,015.12	\$1,108.80	\$1,906.32

★ 15% of Dependent Rate Funding Increase

Current Enrollment	Tier	Current	Renewal	County Contribution	Employee Cost
257	Employee Only	\$1,060.04	\$1,108.80	\$1,108.80	\$0.00
28	Employee + Child	\$1,440.98	\$1,308.02	\$1,308.02	\$0.00
6	Employee + Children	\$1,898.22	\$1,687.70	\$1,406.64	\$281.06
4	Employee + Spouse	\$2,225.44	\$2,327.80	\$1,108.80	\$1,219.00
1	Employee + Family	\$2,882.52	\$2,562.84	\$1,561.06	\$1,001.78

12.5% of Dependent Rate Funding Increase

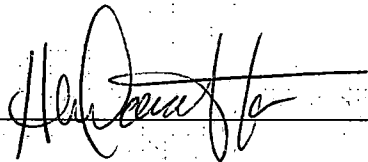
Current Enrollment	Tier	Current	Renewal	County Contribution	Employee Cost
257	Employee Only	\$1,060.04	\$1,108.80	\$1,108.80	\$0.00
28	Employee + Child	\$1,440.98	\$1,318.86	\$1,297.20	\$21.66
6	Employee + Children	\$1,898.22	\$1,737.36	\$1,357.00	\$380.36
4	Employee + Spouse	\$2,225.44	\$2,327.80	\$1,108.80	\$1,219.00
1	Employee + Family	\$2,882.52	\$2,638.22	\$1,485.70	\$1,152.54

10% of Dependent Rate Funding Increase					
Current Enrollment	Tier	Current	Renewal	County Contribution	Employee Cost
257	Employee Only	\$1,060.04	\$1,108.80	\$1,108.80	\$0.00
28	Employee + Child	\$1,440.98	\$1,356.52	\$1,259.52	\$97.00
6	Employee + Children	\$1,898.22	\$1,787.00	\$1,307.34	\$479.66
4	Employee + Spouse	\$2,225.44	\$2,327.80	\$1,108.80	\$1,219.00
1	Employee + Family	\$2,882.52	\$2,713.60	\$1,410.30	\$1,303.30

Alternate rates are based on the following information:

1. If a county increases their dependent tier contributions (as a percentage of the dependent rate), TAC HEBP will match dollar-for-dollar in a dependent rate reduction, not to exceed 15% of the dependent rate.
2. The minimum increase in county funding to qualify for dependent program is 5% of dependent rate.
3. Program only applies to dependent tiers (Employee + Child, Employee + Children, Employee + Family).
4. Should the county decide to reduce funding later, TAC HEBP will increase the dependent rate dollar-for-dollar to match the decrease in county funding.
5. Group must have at least 100 employees enrolled to be eligible for the program.
6. TAC HEBP may decide to modify or discontinue the program at renewal, contingent on the pilot program's success.
7. County must keep current plan at the time of program agreement for at least 1 plan year.

Signature _____



Date: _____

6-24-24