CITY OF PORT LAVACA

COUNCIL MEETING: JUNE 9, 2025

DATE: 06.05.2025

TO: HONORABLE MAYOR AND CITY COUNCIL MEMBERS

FROM: JODY WEAVER, INTERIM CITY MANAGER

SUBJECT: HEALTH INSURANCE PLAN RECOMMENDATIONS FOR FYE 2026

Background:

We have received and reviewed the medical insurance plan options available to the City for the fiscal year beginning Oct 1, 2025, as offered by BCBS through TX Health Benefits Pool. (*see Attachment*). (There are no changes in the vision or dental policies offered).

As you recall last year, we made one change to the benefits package to keep the premium cost increase below 10%, which was to increase the Out of Pocket (OOP) from \$6,000/year to \$9,000/year.

This year we have great news that we can maintain the exact same benefits package without any change in premiums at all! TML is able to maintain our coverage at the same rate primarily for 2 reasons: 1) our continued high participation in our annual wellness program and 2) getting utilization ratio back down below 85%.

There are two options offered which would reduce the deductible, but at an increased cost.

Recall also last year, because of the 9.34% increase in premiums, we did make adjustments to the % of the premiums that the employees pay.

RECOMMENDATION:

Staff's recommendation this year is to stay with our CURRENT PLAN at NO CHANGE in cost and NO CHANGE in the % participation from the employees.

Attachment: Medical Cost Project Member Options for 2025-2026

TX Health

MEDICAL COST PROJECTION

Port Lavaca - PPORTLA1 06/05/25 MEMBER OPTION

| | 0% Increase | | | |
|-----------------------------------|--|--|--|--|
| Current Plan | 2024-2025 | 2025-2026 | | |
| | Current Rates | New Rates | | |
| | Copay-2500-9K ER | Copay-2500-9K ER | | |
| | 80% / 50% | 80% / 50% | | |
| | PPO (copay) | PPO (copay) | | |
| | \$2,500 In Ded | \$2,500 In Ded | | |
| | \$5,000 Out Ded | \$5,000 Out Ded | | |
| | \$9,000 In OOP | \$9,000 In OOP | | |
| | \$0 Tela Health Copay | \$0 Tela Health Copay | | |
| | \$30 OV/\$60 SP/\$75 UC/\$500 ER Copay | \$30 OV/\$60 SP/\$75 UC/\$500 ER Copay | | |
| | DAW1&2 Rx Plan | DAW1&2 Rx Plan | | |
| EE | \$728.60 | \$728.60 | | |
| EE + Spouse | \$1,479.12 | \$1,479.12 | | |
| EE + Child(ren) | \$1,282.40 | \$1,282.40 | | |
| EE + Family | \$2,149.42 | \$2,149.42 | | |
| | | | | |
| New Plan Options | | | Option 1 | Option 2 |
| 2025-2026 | | | 2.09% Increase | 7.52% Increase |
| | | | Copay-2K-9K ER | Copay-1500-5K ER |
| | | | 80% / 50% | 80% / 50% |
| | | | PPO (copay) | PPO (copay) |
| | | | \$2,000 In Ded | \$1,500 In Ded |
| | | | \$4,000 Out Ded | \$3,000 Out Ded |
| | | | \$9,000 In OOP | \$5,000 In OOP |
| | | | \$0 Tela Health Copay | \$0 Tela Health Copay |
| | | | \$30 OV/\$60 SP/\$75 UC/\$500 ER Copay | \$30 OV/\$60 SP/\$75 UC/\$500 ER Copay |
| | | | DAW1&2 Rx Plan | DAW1&2 Rx Plan |
| EE | | | \$743.80 | \$783.36 |
| EE + Spouse | | | \$1,509.98 | \$1,590.28 |
| EE + Child(ren) | | | \$1,309.16 | \$1,378.78 |
| EE + Family | | | \$2,194.26 | \$2,310.96 |
| | | | Option 1 | Option 2 |
| | | | Option 1 | Option 2 |
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Signature / Date

Signature / Date

THIS DOES NOT COMPLETE THE RERATE PROCESS. YOU WILL NEED TO SIGN THE MEMBER OPTION AND RETURN TO YOUR MARKETING CONTACT BY 06/18/2025.

THEN A NEW RERATE NOTICE WILL BE GENERATED AND MAILED TO YOU. THE RERATE SHEET MUST BE SIGNED AND RECEIVED IN AUSTIN BY 07/01/2025 FOR THE NEW BENEFITS AND RATES TO BE EFFECTIVE FOR 10/01/2025.

The information contained in this option includes proprietary information that should not be shared with other competitors or used to circumvent the requirements of Texas Competitive Bidding laws.