



Transamerica Life Insurance Company & Retiree Rx Care 2026 Renewal Notice and Benefit Confirmation

Group: Waller County
Return to TAC by: October 1, 2025

Below are the new renewal rates for TLIC medical and Retiree RxCare prescription drug coverages. Please initial and complete each section below. An authorized signature on last page is required to confirm and accept your group's renewal. Email renewals to CCS@county.org.

PACKAGE PLANS

Current Plan: Package 1

	Medical Only	Med + Rx	Medicare Advantage
Current Rates:	\$279.08	\$559.39	\$392.96
New Rates: (eff 1/1/2026)	\$298.51	\$592.84	\$427.50

- ☒ Renew and keep current plan. OR
- ☐ Change Package option (select only one from the list below)

PACKAGE OPTIONS (Rates eff. 1/1/26)

- | | |
|---|---|
| ☐ Package 2 <ul style="list-style-type: none">• Medical Only: \$165.61• Med+Rx: \$259.83• MedAdvantage: \$332.17 | ☐ Package 3 <ul style="list-style-type: none">• Medical Only: \$273.09• Med+Rx: \$542.59• MedAdvantage: \$332.17 |
|---|---|

_____ Initial to accept 2026 retiree package options rates.

MANAGE MY HEALTH (OPTIONAL)

- ☐ Add Manage My Health for an additional \$10 per retiree per month.

_____ Initial to accept Manage My Health.



Transamerica Life Insurance Company & Retiree Rx Care 2026 Renewal Notice and Benefit Confirmation

Group: Waller County
Return to TAC by: October 1, 2025

BILLING AND CONTRIBUTION SCHEDULE

Please select your preferred billing option (Current billing option is Split):

- ☐ **Direct Bill:** Invoice for 100% of the cost to each retiree.
- ☐ **List Bill:** Invoice sent to the employer for 100% of the cost for each retiree. Employer will be responsible for collecting any premium due from retirees/spouses.
- ☒ **Split Bill:** Invoice will be sent to the group for employer subsidy and Amwins will send invoice to retiree for their remaining portion.
- **List/Split Billing:** Please indicate monthly contributions levels for Employer and Retirees:

	Medical Premium	Med+ Rx Premium	MedAdvantage
Paid by Employer	\$ 200.00	\$ 400.00	\$ 300.00
Paid by Retiree	\$ 98.51	\$ 192.84	\$ 127.50

_____ Initial to accept Billing Method.

CountyChoice Silver
Member Contact Designations
Waller County

Contracting Authority: As specified in the Interlocal Participation Agreement, each Member hereby designates and appoints 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's Contracting Authority, with respect to service or claims hereunder, shall be binding on the Member. Each Member reserves the right to change its Contracting Authority from time to time by giving written notice to TAC HEBP. Please complete each category below:

Please list changes and/or corrections below

Name/Title: Carbett "Trey" J. Duhon County Judge

Address: 425 FM 1488 Rd #102
Hempstead, Tx 77445

Phone: (979) 826-7700

Fax: (979) 826-2112

Email: t.duhon@wallercounty.us

836 Austin St Ste 4300

Hempstead, TX 77445

Primary Contact: Main contact for daily matters pertaining to retiree benefits.

Please list changes and/or corrections below

Name/Title: Joan Sargent County Treasurer

Address: 425 FM 1488 Road #102
Hempstead, Tx 77445

Phone: 979-472-3909

Fax: (979) 826-7709

Email: j.sargent@wallercounty.us

836 Austin St Ste 2200

Hempstead, TX 77445

Billing Contact: Responsible for receiving all invoices relating to retiree benefits. (Not applicable if Direct Bill).

Please list changes and/or corrections below

Name/Title: Joan Sargent County Treasurer

Address: 425 FM 1488 Rd #102
Hempstead, Tx 77445

Phone: (979) 826-7707

Fax: 979-472-3909

Email: j.sargent@wallercounty.us

836 Austin St Ste 2200

Hempstead, TX 77445

Signature of County Judge or Contracting Authority

10/01/2025

Date

Carbett "Trey" J. Duhon, III

Please PRINT Name and Title



Bring on the Future

2026 Package 1
Program Summary



2026 Package 1 Program Summary

Texas Association of Counties Health and Employee Benefits Pool is pleased to provide the 2026 Post-65 Group Retiree Healthcare Package 1 Program Summary.

Plan Designs & Rates:

Medical Plan

Underwritten by Transamerica Life Insurance Company

Medical Plan	Package 1
Monthly Cost	\$298.51
Calendar Year Deductible*	\$0
Skilled Nursing	0%
Part B Co-Insurance	0%
Out-of-Pocket Maximum**	Unlimited
Office Visit Co-pay	\$0
Emergency Room Co-pay	\$0

*Includes Part B Deductible (2025: \$257).

**Includes Calendar Year Deductible

Prescription Drug Plan

Underwritten by MG Insurance Company through Retiree RxCare

Prescription Drug Plan (30 Day Retail)	Package 1
Monthly Cost:	\$294.33
Annual Deductible:	\$0
Tier 1: Generic	\$5
Tier 2: Preferred Brand	\$25
Tier 3: Non-Preferred Brand	\$60
Tier 4: Specialty	25%
OPX that Triggers Catastrophic	\$2,100
Catastrophic Member Copays:	\$0

2026 Package 1 Program Summary

Plan Designs & Rates (continued):

MAPD Plan

Underwritten by Humana

MAPD Plan	Package 1
Monthly Cost	\$427.50
Calendar Year Deductible*	\$0
Part B Co-Insurance	0%
Out-of-Pocket Maximum**	Unlimited
Office Visit Co-pay	\$0
Emergency Room Co-pay	\$0
Part D Prescription	
Tier 1: Generic	\$5
Tier 2: Preferred Brand	\$25
Tier 3: Non-Preferred Brand	\$60
Tier 4: Specialty	33%
OPX that Triggers Catastrophic	\$2,100
Catastrophic Member Copays:	\$0

2026 Package 1 Program Summary

Please contact Andrea Walker by October 1, 2025 if:

- If you don't already offer the complete Package 1 and are interested in offering the complete Package 1 for 2026.
- If you should need to make any changes to your primary contact or billing method for 2026.
- If your county doesn't already offer Manage My Health and would like to include this benefit for 2025 at an additional \$10 Per Member Per Month.

Included with this summary is the TAC HEBP 2026 Renewal Notice and Benefit Confirmation. Please complete and initial each section and sign to confirm your renewal for 2026. The notice should be returned to Andrea Walker by **October 1, 2025**.

The following contacts at Amwins are available to help you with any questions about your plans.

Amwins Points of Contact

Vanessa Hagen, Team Lead, Relationship Manager

Phone: 401-734-4118 Email: vanessa.hagen@amwins.com

- All Day-to-Day issues, Escalations, Billing, ID cards, General Questions and Client Support.
- The Relationship Management Team will engage internal and external resources as needed.

Heide Sisson, Director, Relationship Management

Phone: 401-734-5939 Email: heide.sisson@amwins.com