

**Transamerica Premier Life Insurance & Retiree RxCare  
2021 Renewal Notice and Benefit Confirmation**

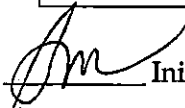
**Group:** Polk County

**Anniversary Date:** 1/1/2021

Below are the new renewal rates for TPLIC medical and Retiree RxCare prescription drug coverages. Please initial and complete each section below. Authorized signature on the following page is required to confirm and accept your group's renewal.

**RETIREE MEDICAL**

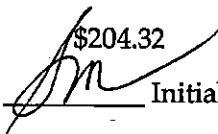
Attained Age	Current Rates	New Rates Effective 1/1/2021
65 – 69	\$167.41	\$167.41
70 – 74	\$201.04	\$201.04
75 – 79	\$237.52	\$237.52
80 - 84	\$271.19	\$271.19
85 – 89	\$299.85	\$299.85
90+	\$313.54	313.54

 Initial to accept 2021 retiree medical rates

**RETIREE RXCARE - PRESCRIPTION PART D**

**Current Rate**

**New Rate Effective 1/1/2021**

 \$204.32

\$204.32

Initial to accept 2021 retiree prescription rate.

**BILLING AND CONTRIBUTION SCHEDULE**

**List Bill** – A monthly invoice will be sent directly to the designated billing contact.

- Group is responsible for collecting premiums from the retirees/spouses.
- Group is responsible for submitting payment in full directly to TPLIC.
- Please indicate contribution amount paid per month below.

	Amount Group Pays	Amount Retiree Pays
Medical Premium	\$ 167.41-313.54	\$ -0-
RX Premium	\$ 204.32	\$ -0-

**CountyChoice Silver**  
**Member Contact Designations**  
**Polk 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:

**Name:** Adrena Gilbert  
**Title:** Human Resources Manager  
**Address:** 602 E. Church Street, Suite 105  
Livingston, TX 77351  
**Phone:** 936-327-6802  
**Fax:** 936-327-6879  
**Email:** agilbert@co.polk.tx.us

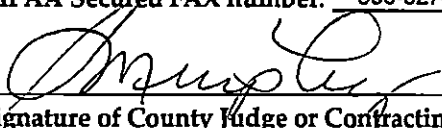
**Primary Contact:** Main contact for daily matters pertaining to the retiree benefits.

**Name:** Adrena Gilbert  
**Title:** Human Resources Manager  
**Address:** 602 E. Church Street, Suite 105  
Livingston, TX 77351  
**Phone:** 936-327-6802  
**Fax:** 936-327-6879  
**Email:** agilbert@co.polk.tx.us

**Billing Contact:** Responsible for receiving all invoices relating to retiree benefits.

**Name:** Adrena Gilbert  
**Title:** Human Resources Manager  
**Address:** 602 E. Church Street, Suite 105  
Livingston, TX 77351  
**Phone:** 936-327-6802  
**Fax:** 936-327-6879  
**Email:** agilbert@co.polk.tx.us

**HIPAA Secured FAX number:** 936-327-6879

  
\_\_\_\_\_  
**Signature of County Judge or Contracting Authority**

October 13, 2020  
**Date**

Sydney Murphy/County Judge  
\_\_\_\_\_  
**Please PRINT Name and Title**