FINANCIAL MANAGEMENT COMMITTEE
June 1, 2020
8:30 am

PRESENT: Brad Johnson, Austin Jaynes, Mayor Rusty Barnett, Ginger Holdren, Dr. Kevin Ward, Roger Colbaugh, and Travis Hill.

The meeting was called to order by Brad Johnson.

Quorum present.

Adopt Agenda: Motion was made by Ginger Holdren, second by Travis Hill to approve the agenda. Motion Carried.

Approval of Minutes: Motion was made by Ginger Holdren, second by Mayor Rusty Barnett to approve the March 2, 2020 minutes. Motion carried.

Public Comments: Mr. Roy Livingston voiced his concern about money management. Mr. Livingston explained that the County must do a better job managing their money because they were short about one million and half dollars a few years back. He recognized that the money was not missing but that it was allocated to the wrong account. Finance Director, Brad Burke, stated that Mr. Livingston must be discussing the insurance funds that were misallocated at the Schools but no money was ever missing. Mr. Burke also explained that this situation was addressed and corrected.

Old Business:

1. **Review Financial Management Policies & Procedures- Deferred to September Meeting:**

New Business:

1. **Employee insurance and options for fiscal year 2020-21- Kelly Geer (Sequoyah Group):** Carter County's insurance agent, Sequoyah Group, presented alternative funding options for the County's medical plan. Sequoyah Group presented a possible self-funding strategy that the County could implement to aid in potential cost savings. Due to the importance of the conversation and the depth of information, the finance department requested that Sequoyah group give a simple explanation of their recommendation which is below:

Self-Funding Discussion with SGI:

- SGI discussed not making changes to the benefits or funding for this year due to timing, but to consider self-funding based on the estimated reserves using a 3 year history
- Components of Self-Funding:
  - Fixed Costs
    - ASO Fees (BCBS)
    - Stop Loss Quotes and Options (BlueRe)
      - Contract Basis discussed 12/12, 12/15, 12/24 (incurred/paid)
      - No Laser Language discussed
  - Variable Costs
    - Claims (medical and pharmacy)
- 3 year history and averages resulted in a potential reserve for the County of over $300k by SGI numbers
- BCBS projection- self-funding at the same cost as the BCBS fully-insured
- Strong consideration for this year based on 3 year history
- Self-funding does not change the benefits, doctors, or claims for members – BCBS would still be processing and covering members the same

Motion was made by Travis Hill, second by Austin Jaynes to approve moving forward with looking at the proposed self-funding option at the budget workshop with Sequoyah Group presenting the information.

Travis Hill	Aye	Brad Johnson	Aye
Ginger Holdren	Aye	Austin Jaynes	Aye
Rusty Barnett	Aye	Dr. Kevin Ward	Aye
Roger Colbaugh	Aye		

All Ayes. Motion Carried

The Finance Department received the message below from Sequoyah Group on Tuesday, June 2, 2020, regarding the presentation they delivered during the meeting:

We would like to first say thank you very much to each of you for your time yesterday morning in discussing the option of self-funding for the county.

As noted in the meeting, we would like to continue to meet the committee on an ongoing basis to review and develop strategies regarding the health plan for the county and its employees.

After the meeting yesterday, when we returned to the office, Tim requested that we review the previous 3 years data separately.

In doing this, we noted that your current funding level is much lower than the 3 year average due to the reduction in premium last year, and that many employees are enrolled in the 3rd plan.

Current funding is approximately $1.7 million to BCBS.

That said, we would not recommend going to self-funding this year, without an increase, in order to properly build the reserves for your first year.

We still feel like self-funding is something that needs to be looked at, reviewed, and considered for the future, because if the county were self-funded over the last 3 years, there would've been close to $500k in reserves.

Please let us know if you would like us to proceed with presenting self-funding education to the commission.

The presentation material delivered to the Financial Management Committee are attached to the minutes.

2. **Recent Bids:** Deputy Director of Finance Michael Kennedy reviewed a list of recent bids.

3. **Submission of COVID-19 policies and procedures for various offices/departments:** Brad Burke requested that all departments who had a change in policies and procedures due to the COVID-19 pandemic submit a copy of these changes to the Finance Department for review. Mr. Burke informed the Committee that we will only need approval for the Finance Departments COVID-19 policy and procedures. Mr. Burke also informed the Committee that no employee tested positive for the virus.

Motion was made by Roger Colbaugh, second Travis Hill to approve the Finance Departments COVID-19 Policies and Procedures.

Travis Hill	Aye	Brad Johnson	Aye
Ginger Holdren	Aye	Austin Jaynes	Aye
Rusty Barnett	Aye	Dr. Kevin Ward	Aye
Roger Colbaugh	Aye		

All Ayes. Motion Carried

4. **Request for return of employee sick leave used for COVID-19 related absences:** Mr. Burke informed the Committee that there were only four employees to his knowledge that went home or were sent home due to COVID related issues. Mr. Burke stated that there were many offices that had COVID related absences. He requested that the Committee approve returning the sick leave used to the respective employees.

Motion was made by Travis Hill, second by Dr. Kevin Ward to approve returning employee sick leave back on the books for the affected employees.

Travis Hill	Aye	Brad Johnson	Aye
Ginger Holdren	Aye	Austin Jaynes	No
Rusty Barnett	Aye	Dr. Kevin Ward	Aye
Roger Colbaugh	Aye		

6 Ayes, 1 No. Motion Carried

5. **Discussion and status of 2018-19 audit findings:** Mr. Burke handed out a summary audit findings sheet to the Committee for review. Brad Burke stated that only the first three audit finding relate directly to the Finance Department. Mr. Burke explained that the first audit finding was caused by a deficiency in the use of federal Head Start grant funds, which resulted in questionable costs. Mr. Burke informed the Committee that there is an ongoing investigation with the Comptroller's office regarding this finding. The second audit finding on the summary sheet occurred because County officials were not paid in compliance with the state statute.

Motion was made by Austin Jaynes, second by Dr. Kevin Ward to approve paying out the affected elected officials that were not paid in compliance with the state statute per audit finding 2019-002.

Travis Hill	Aye	Brad Johnson	Aye
Ginger Holdren	Aye	Austin Jaynes	Aye
Rusty Barnett	Aye	Dr. Kevin Ward	Aye
Roger Colbaugh	No		

6 Ayes, 1 No. Motion Carried.

The third audit finding discussed dealt with deficiencies in budget operations. Mr. Burke stated that the Finance Department has created new guidelines to correct the audit issue. The first corrective action taken by the department is giving direct account numbers to amendments that come from the floor. Another corrective action taken to mitigate this issue is posting of all budget amendments the day after commission approval with a monthly reconciliation of all budget amendments being completed. The fourth audit finding related to the Solid Waste Department having accounting deficiencies. Mr. Burke explained that the Solid Waste Department has been having issues with depositing funds in the state required three day window.

Motion was made by Austin Jaynes, second by Travis Hill to refer audit finding 2019-004 to the Landfill Committee to be addressed in order to make certain the Department adheres to the state recommendation.

Travis Hill	Aye	Brad Johnson	Aye
Ginger Holdren	Aye	Austin Jaynes	Aye
Rusty Barnett	Aye	Dr. Kevin Ward	Aye
Roger Colbaugh	Aye		

All Ayes. Motion Carried.

Mr. Brad Johnson asked if there were any reoccurring audit findings. Mr. Brad Burke stated that C&D of Audit Finding 2019-003 are reoccurring issues. Mr. Burke also elaborated on the fact that the Finance Department is taking corrective action to mitigate the potential of these reoccurring.

6. **County credit card – Sam's Club membership/credit card limit of $2,500:** Deputy Director of Finance, Michael Kennedy, explained to the Committee that the County does not have an active Sam's Club membership available to office heads.

Motion was made by Austin Jaynes, second by Mayor Rusty Barnett to approve the county applying for a Sam's Club membership/ credit card with a limit of $2,500.

Travis Hill	Aye	Brad Johnson	Aye
Ginger Holdren	Aye	Austin Jaynes	Aye
Rusty Barnett	Aye	Dr. Kevin Ward	Aye
Roger Colbaugh	Aye		

All Ayes. Motion Carried.

7. **Discussion regarding the creation of an Ethics Committee and an Investigative Committee- Deferred to July Meeting:**

8. **Discussion of Compensation Time Policy – Deferred to July Meeting:**

9. **Updates from the Finance Director:** Mr. Burke informed the committee that he will need to set up Fund 264, employee insurance fund, to deal with the self-insurance option presented. He also explained to the committee that this fund will need cash flow of approximately $300,000 that will need to be transferred from General Fund-Fund Balance to help with cash flow until Fund 264 is sufficiently funded. Once fund 264 has enough cash flow it will refund the General fund the initial cash flow deposit. Mr. Austin Jaynes recommended that the County transfer approximately $500,000 to the new self-insurance fund with the contingency that it be paid back to General Fund once cash flow for Fund 264 is sufficient.

Motion was made by Austin Jaynes, second by Roger Colbaugh to approve transferring $500,000 from General Fund-Fund Balance to Fund 264 with the contingency that Commission approves the self-funding strategy presented with the caveat that this money will be refunded back to the General Fund once cash flow is built up sufficiently in the new Fund 264.

Travis Hill	Aye	Brad Johnson	Aye
Ginger Holdren	Aye	Austin Jaynes	Aye
Rusty Barnett	Aye	Dr. Kevin Ward	Aye
Roger Colbaugh	Aye		

All Ayes. Motion Carried.

10. **County General Update:** Mayor Barnett expressed the County's need for updating the boiler system. Mr. Barnett informed the committee that the Workforce Development parking lot pavement project from the Highway Department looks great. Mr. Barnett stated that the bridge set up in the Gap Creek park area looks great as well. Mr. Michael Kennedy discussed the Skyward True Time module. Mr. Kennedy informed the committee that the module does not work with the Sheriff Departments twenty-eight day payroll cycle. After discussion with the Highway Department, they stated that they would prefer using the current paper time keeping method in place. Mr. Kennedy stated that the School fund 141 and Food Service fund 143 will continue using this module.

Motion was made by Ginger Holdren, second by Roger Colbaugh to stop using Skyward True Time for funds 101,116, and 131.

Travis Hill	Aye	Brad Johnson	Aye
Ginger Holdren	Aye	Austin Jaynes	Aye
Rusty Barnett	Aye	Dr. Kevin Ward	Aye
Roger Colbaugh	Aye		

All Ayes. Motion Carried.

11. **County Highway Department Update:** No Update.

12. **County School Department Update:** Mr. Brad Johnson thanked Dr. Kevin Ward for all the work he has done for the County School System and congratulated him on his retirement. Dr. Kevin Ward mentioned the new processes being implemented for 2020 graduating seniors.

13. **Austin Jaynes:** Mr. Austin Jaynes thanked Dr. Ward for his continued service to the County.

14. **Travis Hill:** Mr. Travis Hill congratulated Dr. Ward on his retirement.

15. **Ginger Holdren:** No Update.

16. **Brad Johnson:** No Update.

Adjourn: Motion made by Austin Jaynes, second by Mayor Rusty Barnett. **Motion Carried.**

Respectfully submitted,

Michael Kennedy

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Brad Johnson, Approved for File

2020
Renewal Meeting

Carter County

5/15/2020

Agenda

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Current Benefits and Contributions

Current Benefits and Contributions

Medical - BCBS of TN			
Benefits	**Option 1 - PPO In-Network (Network S)**	**Option 2 - PPO In-Network (Network S)**	**Option 3 - QHDHP/HSA In-Network (Network S)**
Deductible (Individual / Family)	$500 / $1,000	$3,000 / $6,000	$3,000 / $6,000
Out-of-Pocket (Individual / Family)	$1,300 / $2,600	$4,000 / $8,000	$4,000 / $8,000
Coinsurance	70%	50%	50%
Preventive Care	100%	100%	100%
PCP Office Visit	$20 Copay	$30 Copay	Deductible/Coinsurance
Specialist Visit	$40 Copay	$50 Copay	Deductible/Coinsurance
Virtual Medicine / Telehealth	$20 Copay	$30 Copay	$40 Cost
Urgent Care Visit	$20 / $40 Copay	$30 / $50 Copay	Deductible/Coinsurance
Emergency Room	$100 Copay	$100 Copay	Deductible/Coinsurance
Hospital or Facility Plan Pays	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
Prescription Drugs (30 Day Retail)			
Generic	$10	$10	$10 Preventive / 50% after Ded
Preferred Brand	$30	$45	$35 Preventive / 50% after Ded
Non-Preferred Brand	$50	$90	$60 Preventive / 50% after Ded
Specialty	$100	$180	50% after Ded
Monthly Rates	**Current**		
Employee	$665.77	$484.01	$339.90
Employee + Spouse	$1,397.47	$1,015.78	$713.15
Employee + Child(ren)	$1,217.84	$885.21	$621.49
Family	$2,019.33	$1,467.69	$1,030.31

Current Medical Contributions

Carter County Government - Non-Grandfathered Employees

				2019-2020 BCBS Option 1 - PPO				
	Enrollment	Total Monthly Premium	EE Monthly	HSA Cotribution	EE Ded (24)	ER Monthly	EE%	ER%
EE	70	$665.77	$66.58	N/A	$33.29	$599.19	10%	90%
ES	0	$1,397.47	$798.28	N/A	$399.14	$599.19	57%	43%
EC	0	$1,217.84	$618.65	N/A	$309.32	$599.19	51%	49%
FAM	0	$2,019.33	$1,420.14	N/A	$710.07	$599.19	70%	30%
	70			**2019-2020 BCBS Option 2 - PPO**				
	Enrollment	Total Monthly Premium	EE Monthly	HSA Cotribution	EE Ded (24)	ER Monthly	EE%	ER%
EE	9	$484.01	$0.00	N/A	$0.00	$484.01	0%	100%
ES	0	$1,015.78	$416.59	N/A	$208.29	$599.19	41%	59%
EC	0	$885.21	$286.02	N/A	$143.01	$599.19	32%	68%
FAM	0	$1,467.69	$868.50	N/A	$434.25	$599.19	59%	41%
	9			**2019-2020 BCBS Option 3 - QHDHP/HSA**				
	Enrollment	Total Monthly Premium	EE Monthly	HSA Cotribution	EE Ded (24)	ER Monthly	EE%	ER%
EE	68	$339.90	$0.00	$259.28	$0.00	$339.90	0%	100%
ES	11	$713.15	$113.96	$259.28	$56.98	$599.19	16%	84%
EC	12	$621.49	$22.30	$259.28	$11.15	$599.19	4%	96%
FAM	1	$1,030.31	$431.12	$259.28	$215.56	$599.19	42%	58%
	92							

Total Non-GF Annual Employer Cost	$1,291,766
Total Non-GF Annual Cost	$1,371,117
Total Annual HSA Cost	$286,245
Employer %	94.2%

Current Medical Contributions

Carter County Government - Grandfathered Employees

				2019-2020 BCBS Option 1 - PPO				
	Enrollment	Total Monthly Premium	EE Monthly	HSA Cotribution	EE Ded (24)	ER Monthly	EE%	ER%
EE	50	$665.77	$0.00	N/A	$0.00	$665.77	0%	100%
ES	0	$1,397.47	$731.70	N/A	$365.85	$665.77	52%	48%
EC	0	$1,217.84	$552.07	N/A	$276.04	$665.77	45%	55%
FAM	0	$2,019.33	$1,353.56	N/A	$676.78	$665.77	67%	33%
	50			**2019-2020 BCBS Option 2 - PPO**				
	Enrollment	Total Monthly Premium	EE Monthly	HSA Cotribution	EE Ded (24)	ER Monthly	EE%	ER%
EE	0	$484.01	$0.00	N/A	$0.00	$484.01	0%	100%
ES	0	$1,015.78	$416.58	N/A	$208.29	$599.20	41%	59%
EC	0	$885.21	$286.01	N/A	$143.01	$599.20	32%	68%
FAM	1	$1,467.69	$868.49	N/A	$434.25	$599.20	59%	41%
	1			**2019-2020 BCBS Option 3 - QHDHP/HSA**				
	Enrollment	Total Monthly Premium	EE Monthly	HSA Cotribution	EE Ded (24)	ER Monthly	EE%	ER%
EE	15	$339.90	$0.00	$259.28	$0.00	$339.90	0%	100%
ES	4	$713.15	$113.95	$259.28	$56.98	$599.20	16%	84%
EC	2	$621.49	$22.29	$259.28	$11.15	$599.20	4%	96%
FAM	0	$1,030.31	$431.11	$259.28	$215.56	$599.20	42%	58%
	21							

Total GF Annual Employer Cost	$576,315
Total GF Annual Cost	$592,742
Total Annual HSA Cost	$65,339
Employer %	97.2%

Total Annual Employer Cost	$2,219,665
Total Annual Cost	$2,315,443
Total Annual HSA Cost	$351,584
Employer %	95.9%

Current Benefits and Contributions

Dental - Delta (100 % Employer Paid on Employee Tier)			
Deductible	PPO Network	Premier Network	Non-Network
Individual	$0	$25	$25
Family Limit	$0	$75	$75
Annual Maximum			
Annual Maximum (per person)	$1,500	$1,500	$1,500
Type I: Diagnostic / Preventative			
Oral Evaluations, X-Rays, Cleanings, Fluoride Sealants, Space Maintainers	100%, no deducitble	100%, no deducitble	100%, no deducitble
Type II: Basic Services			
Filings, Basic Oral Surgery, Emergency Treatment	80% after deductible	80% after deductible	80% after deductible
Type III: Major Services			
Endodontics, Surgical Periodontics, Major Oral Sugery, Crowns, Implants, Dentures and Denture Repairs	50% after deductible	50% after deductible	50% after deductible
Orthodontia			
To age 19	50% up to $1,000 maximum		
Monthly Rates			
Employee	$19.02		
Family	$61.77		

Please note: Out-of-Network benefits are payable at the same % up to the 90th UCR, however members can be balanced billed

Current Benefits and Contributions

Vision - BCBS of TN (Voluntary)		
Benefits	**In-Network**	**Out-of-Network**
Exam	$20 Copay	Up to $35
Exam with Contact Fit & Follow	Up to $55 Copay	Not Covered
Materials	$10 Copay	$10 Copay plus additional charges
Frequency (exam, lenses, frames)	12 / 12 / 24	12 / 12 / 24
Single Lenses	100% after materials copay	Up to $30
Bifocal Lenses	100% after materials copay	Up to $45
Trifocal Lenses	100% after materials copay	Up to $60
Elective Contact Lenses	$120 Allowance, 15% off balance	Up to $96
Medical Necessary Contact Lenses	Paid in Full	Up to $200
Frame Allowance	$120 Allowance, 20% off balance	Up to $60
Monthly Rates	**Current**	
Single	$5.18	
Employee + Spouse	$10.36	
Employee + Child(ren)	$10.88	
Family	$17.10	

Current Benefits and Contributions

- HSA - Pinnacle Bank – No Admin Fees due to being Grandfathered
- Life - OneAmerica – Rate Hold
  - Employer Paid
  - Voluntary Term Life
  - Dependent Life
- Disability – OneAmerica – Rate Hold
  - Short-Term
    - 14-day elimination period
    - 60% earnings up to $1,000 max (weekly)
    - 90-day duration
  - Long-Term
    - 90-day elimination
    - 60% earnings up to $5,000 max (monthly)
    - SSNRA
- Critical Illness with Cancer - Allstate
  - $10,000 or $20,000 option
- Accident (24 hr coverage) - Allstate
  - Option 1 and Option 2
- Universal Life with Long Term Care – Trustmark
  - EZ Value – Anniversary date 8/1

Proprietary and Confidential Information for Sequoyah Group and Sequoyah Group clients only.

2020 - 2021
Medical Renewal and Marketing

Medical Renewal and Alternate Funding

- We were able to secure a **FLAT** renewal from BCBS!
  - Initial renewal received was an increase of 15.93%, $368,850 Annually
  - Additionally, we were able to get BCBS to include Hearing Coverage at no additional increase in premium.
  - Thoughts on HSA funding?
    - Continue Current Funding? ($3,111.36 per employee on option 3)
      - Currently 106 EE on opt 3 - $329,804.16 Annual spend
    - Partial or No County Funding?
- Alternate Funding Strategies
  - Self-Funded
    - Higher risk for County
    - County has more control over plan design and pharmacy
    - Need to set up trust to protect funds
    - More incentive to drive wellness to benefit County cost vs BCBS
  - HRA (Health Reimbursement Account) – Semi Self-Funded
    - Administered by BCBS – no separate card needed
    - 100% streamlined for employees
    - Limited risk for County
    - Unspent funds remain County's at the end of the plan year

Proprietary and Confidential Information for Sequoyah Group and Sequoyah Group clients only.

Self-Funding Components

- Fixed Costs
  - ASO (Administrative Services Only) or TPA (Third Party Administrator)
    - If using TPA – Network Access Fee
    - Flexibility to include or exclude certain services, i.e. telemedicine
  - Stop Loss or Reinsurance

- Variable Costs
  - Claims and Pharmacy
    - Network Discounts (i.e. BCBS Network S)
    - PBM (Pharmacy Benefits Manager) carve-out
      - Requires integration fee for data to ASO or TPA
    - Pharmacy Rebates

Proprietary and Confidential Information for Sequoyah Group and Sequoyah Group clients only.

Self-Funded – BCBS ASO Quotes

- Each service component can be removed
- Below are the services currently included in the fully-insured rates:

BCBS Self-Funded ASO Breakdown			
Fee and Service Schedule	**100% RX Rebate**	**50% RX Rebate**	**0% RX Rebate**
Medical Admin Service Fee	$ 33.88	$ 21.51	$ 9.14
Add-ons (Adjustable)			
Cobra - STD w/INL	$ 1.01	$ 1.01	$ 1.01
Musculoskeletal Program	$ 0.47	$ 0.47	$ 0.47
Advanced Radiological Imaging	$ 0.51	$ 0.51	$ 0.51
PhysicianNow	$ 0.46	$ 0.46	$ 0.46
LifeStyle Coaching	$ 2.89	$ 2.89	$ 2.89
Chronic Care Mgmt - Incl Nurseline	$ 1.20	$ 1.20	$ 1.20
Healthy Maternity Mgmt	$ 0.23	$ 0.23	$ 0.23
Medical Total Admin Service Fee	$ 40.65	$ 28.28	$ 15.91

- RX Rebates (BCBS Projected Rebate $160,000, based on two year average from BCBS)
  - 0% - BCBS retains ALL RX Rebates, Carter does not receive any RX Rebates
  - 50% - BCBS and Carter split the RX Rebates 50%
  - 100% - BCBS does not retain any RX Rebates, Carter retains ALL RX Rebates

Self-Funded – BCBS ASO Services

- ASO Services:
  - Cobra – STD w/INL - Cobra notification services pre/post enrollment
    - Would not recommend carving out
  - Musculoskeletal Program – Rehab designed for people with impairments or disabilities to muscles, ligaments, or bone
    - <1% utilization
  - Advan. Radiological Program – Access to MRI, CT, & PET scans
    - No Utilization
  - PhysicianNow – Doctor on call, access to care via Phone
    - Low Utilization but I suspect that to increase with education
  - LifeStyle Coaching – Preventative measure taken by BCBS to prevent a future more serious claims that might arise in the future, through changes.
    - ZERO Utilization, most costly add-on
  - Chronic Care Mgmt – For individuals that have chronic or terminal medical conditions coupled with Nurseline, serving the purpose of a call center.
    - No Utilization
  - Healthy Maternity Mgmt – Program aimed at helping reduce the risk of complications with pregnacies.
    - Would not recommend carving out

Self-Funded – BCBS Stop Loss Breakdown

- Stop Loss
  - Claims Reimbursement is Immediate
  - Cap at which point a large claim would be subject to re-insurer (Blu RE)
  - Specific Stop Loss (Spec) – Individual Stop Loss
    - Spec Options: $75,000, $90,000, & $100,000
  - Aggregate Stop Loss – Total Aggregate Stop Loss
    - Max reimbursement - $1,000,000

- Contract Basis (Incurred claims/Paid Claims)
  - 12/12 – Would not recommend, VERY risky, no coverage for claims run-out
  - 12/15 – Claim has until the end of September to be paid by BCBS in order to be covered under Stop Loss
  - 12/24 – Least risky, claim has full year to be paid

- Laser Language
  - Recommend "No Laser" contract language
    - Prohibits carrier from excluding a potential high claimant at renewal, i.e. Renal Failure
    - Include rate cap

Self-Funded Analysis – 0% Rebate

Self Funded Quoting						
	BlueRe	BlueRe	BlueRe	BlueRe	BlueRe	BlueRe
Contract Basis	12/15	12/15	12/15	12/24	12/24	12/24
Maximum Reimbursement	Unlimited					
Specific Ded	$75,000	$90,000	$100,000	$75,000	$90,000	$100,000
Spec Premium	$421,799	$350,171	$317,925	$454,566	$377,223	$342,381
Aggregate Maximum Reimbursement	$1,000,000					
Annual Aggregate Attachment Point	$2,248,260	$2,300,575	$2,333,029	$2,366,571	$2,421,625	$2,455,810
Agg Premium	$22,991	$22,991	$22,991	$22,991	$22,991	$22,991
Total Annual Stop Loss Premium	$444,790	$373,162	$340,916	$477,557	$400,214	$365,372
BCBS ASO Fees ($15.91 PSPM / 246 Lives)	$46,966					
Claims net of SL reimbursement	$1,414,738	$1,443,173	$1,459,840	$1,414,738	$1,443,173	$1,459,840
Claims with 6.5% trend	$1,506,696	$1,536,979	$1,554,729	$1,506,696	$1,536,979	$1,554,729
Estimated Pharmacy Rebates	$160,000					
Projected Funding	$1,998,452	$1,957,108	$1,942,612	$2,031,219	$1,984,160	$1,967,068
Projected Funding with Reserves	**$2,098,375**	**$2,054,963**	**$2,039,742**	**$2,132,780**	**$2,083,368**	**$2,065,421**
Fully Insured Renewal	$2,315,443					
Funding Difference	**($217,068)**	**($260,480)**	**($275,701)**	**($182,663)**	**($232,075)**	**($250,022)**
BCBS Projected Funding	$2,290,364	$2,260,588	$2,254,306	$2,417,780	$2,384,480	$2,376,986
BCBS Projected RX Rebate	$0					
BCBS Projected Renewal	$2,290,364	$2,260,588	$2,254,306	$2,417,780	$2,384,480	$2,376,986
Funding Difference	($25,079)	($54,855)	($61,137)	$102,337	$69,037	$61,543

Claims net of SL reimbursement determined using three-year average of Total claims and claims in excess.

Self-Funded Analysis – 50% Rebate

Self Funded Quoting						
	BlueRe	BlueRe	BlueRe	BlueRe	BlueRe	BlueRe
Contract Basis	12/15	12/15	12/15	12/24	12/24	12/24
Maximum Reimbursement	Unlimited					
Specific Ded	$75,000	$90,000	$100,000	$75,000	$90,000	$100,000
Spec Premium	$421,799	$350,171	$317,925	$454,566	$377,223	$342,381
Aggregate Maximum Reimbursement	$1,000,000					
Annual Aggregate Attachment Point	$2,248,260	$2,300,575	$2,333,029	$2,366,571	$2,421,625	$2,455,810
Agg Premium	$22,991	$22,991	$22,991	$22,991	$22,991	$22,991
Total Annual Stop Loss Premium	$444,790	$373,162	$340,916	$477,557	$400,214	$365,372
BCBS ASO Fees ($28.28 PSPM / 246 Lives)	$83,483					
Claims net of SL reimbursement	$1,414,738	$1,443,173	$1,459,840	$1,414,738	$1,443,173	$1,459,840
Claims with 6.5% trend	$1,506,696	$1,536,979	$1,554,729	$1,506,696	$1,536,979	$1,554,729
Estimated Pharmacy Rebates	$80,000					
Projected Funding	$1,954,969	$1,913,624	$1,899,128	$1,987,736	$1,940,676	$1,923,584
Projected Funding with Reserves	**$2,052,717**	**$2,009,305**	**$1,994,084**	**$2,087,122**	**$2,037,710**	**$2,019,763**
Fully Insured Renewal	$2,315,443					
Funding Difference	**($262,726)**	**($306,138)**	**($321,359)**	**($228,321)**	**($277,733)**	**($295,680)**
BCBS Projected Funding	$2,326,881	$2,297,105	$2,290,822	$2,454,296	$2,420,997	$2,413,503
BCBS Projected RX Rebate	$80,000					
BCBS Projected Renewal	$2,246,881	$2,217,105	$2,210,822	$2,374,296	$2,340,997	$2,333,503
Funding Difference	($68,562)	($98,338)	($104,621)	$58,853	$25,554	$18,060

Claims net of SL reimbursement determined using three-year average of Total claims and claims in excess.

Self-Funded Analysis – 100% Rebate

Self Funded Quoting						
	BlueRe	BlueRe	BlueRe	BlueRe	BlueRe	BlueRe
Contract Basis	12/15	12/15	12/15	12/24	12/24	12/24
Maximum Reimbursement	Unlimited					
Specific Ded	$75,000	$90,000	$100,000	$75,000	$90,000	$100,000
Spec Premium	$421,799	$350,171	$317,925	$454,566	$377,223	$342,381
Aggregate Maximum Reimbursement	$1,000,000					
Annual Aggregate Attachment Point	$2,248,260	$2,300,575	$2,333,029	$2,366,571	$2,421,625	$2,455,810
Agg Premium	$22,991	$22,991	$22,991	$22,991	$22,991	$22,991
Total Annual Stop Loss Premium	$444,790	$373,162	$340,916	$477,557	$400,214	$365,372
BCBS ASO Fees ($40.65 PSPM / 246 Lives)	$119,999					
Claims net of SL reimbursement	$1,414,738	$1,443,173	$1,459,840	$1,414,738	$1,443,173	$1,459,840
Claims with 6.5% trend	$1,506,696	$1,536,979	$1,554,729	$1,506,696	$1,536,979	$1,554,729
Estimated Pharmacy Rebates	$160,000					
Projected Funding	$1,911,485	$1,870,140	$1,855,644	$1,944,252	$1,897,192	$1,880,100
Projected Funding with Reserves	**$2,007,059**	**$1,963,647**	**$1,948,426**	**$2,041,464**	**$1,992,052**	**$1,974,105**
Fully Insured Renewal	$2,315,443					
Funding Difference	**($308,384)**	**($351,796)**	**($367,017)**	**($273,979)**	**($323,391)**	**($341,338)**
BCBS Projected Funding	$2,363,397	$2,333,621	$2,327,338	$2,490,813	$2,457,513	$2,450,019
BCBS Projected RX Rebate	$160,000					
BCBS Projected Renewal	$2,203,397	$2,173,621	$2,167,338	$2,330,813	$2,297,513	$2,290,019
Funding Difference	($112,046)	($141,822)	($148,105)	$15,370	($17,930)	($25,424)

Claims net of SL reimbursement determined using three-year average of Total claims and claims in excess.

Proprietary and Confidential Information for Sequoyah Group and Sequoyah Group clients only.

HSA vs HRA

- HSA (Health Savings Account)
  - Tax sheltered, employer and/or employee funded
  - Members receive a card that can be used for medical, dental, or vision expenses
  - Employee owned account, goes with them for life
  - Employee responsible for tax and compliance of account
  - Subject to IRS guidelines and limits
  - Must be covered by a Qualified HDHP to receive or make contributions
- HRA (Health Reimbursement Account)
  - Embedded in medical plan and only used for medical
  - Employer owned and funded account, monies not spent remain the employers
  - Employer can choose from a variety of plan designs and medical options
    - I.e. include copays, deductibles, etc.
  - Semi Self-funded option
  - BCBS can administer the HRA seamless to members

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2020 Medical Marketing – HRA Scenario 1

Medical Benefits	Current		HRA ALTERNATES				
	BCBS		BCBS Alt 1	BCBS Alt 2	BCBS Alt 3	BCBS Alt 4	BCBS Alt 5
In-Network	In-Network		In-Network	In-Network	In-Network	In-Network	In-Network
Deductible (Individual / Family)	$500 / $1,000		$1,000 / $2,000	$1,300 / $2,600	$1,500 / $3,000	$2,000 / $4,000	$2,500 / $5,000
Health Reimbursement Account (HRA)	N/A		$500 / $1,000	$800 / $1,600	$1,000 / $2,000	$1,500 / $3,000	$2,000 / $4,000
Out-of-Pocket (Individual / Family)	$1,300 / $2,600		$1,800 / $2,600	$2,100 / $4,200	$2,300 / $4,600	$2,800 / $5,600	$3,300 / $6,600
Coinsurance	70%		70%	70%	70%	70%	70%
ER Co-Pay	$100 Copay		$100 Copay	$100 Copay	$100 Copay	$100 Copay	$100 Copay
Urgent Care Co-Pay	$40 Copay		$40 Copay	$40 Copay	$40 Copay	$40 Copay	$40 Copay
Office Visit	$20 Copay		$20 Copay	$20 Copay	$20 Copay	$20 Copay	$20 Copay
Specialist Visit	$40 Copay		$40 Copay	$40 Copay	$40 Copay	$40 Copay	$40 Copay
Hospital or Facility Plan Pays	Ded / Coin		Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin
Prescription Drugs							
Generic	$10		$10	$10	$10	$10	$10
Preferred Brand	$30		$30	$30	$30	$30	$30
Non-Preferred	$50		$50	$50	$50	$50	$50
Specialty	$100		$100	$100	$100	$100	$100
Monthly Rates	**Current**	**Renewal**	**BCBS**	**BCBS**	**BCBS**	**BCBS**	**BCBS**
126 Employee Only	$665.77	$665.77	$596.74	$590.62	$584.28	$575.25	$562.13
Estimated Monthly Premium	$83,887	$83,887	$75,189	$74,418	$73,619	$72,482	$70,828
Estimated Yearly Premium	$1,006,644	$1,006,644	$902,271	$893,017	$883,431	$869,778	$849,941
Percentage Change	0.00%		-10.37%	-11.29%	-12.24%	-13.60%	-15.57%
Annual Premium Difference	$0		-$104,373	-$113,627	-$123,213	-$136,866	-$156,704

Annual Savings	$104,373	$113,627	$123,213	$136,866	$156,704
HRA Maximum Spend	$63,000	$100,800	$126,000	$189,000	$252,000
Estimated HRA Utilization (20%)	$12,600	$20,160	$25,200	$37,800	$50,400
Total Est Annual Savings	**$91,773**	**$93,467**	**$98,013**	**$99,066**	**$106,304**

2020 Medical Marketing – HRA Scenario 2

Medical Benefits	Current		HRA ALTERNATES				
	BCBS		BCBS Alt 1	BCBS Alt 2	BCBS Alt 3	BCBS Alt 4	BCBS Alt 5
In-Network	In-Network		In-Network	In-Network	In-Network	In-Network	In-Network
Deductible (Individual / Family)	$500 / $1,000		$1,000 / $2,000	$1,300 / $2,600	$1,500 / $3,000	$2,000 / $4,000	$2,500 / $5,000
Health Reimbursement Account (HRA)	N/A		$500 / $1,000	$800 / $1,600	$1,000 / $2,000	$1,500 / $3,000	$2,000 / $4,000
Out-of-Pocket (Individual / Family)	$1,300 / $2,600		$1,800 / $2,600	$2,100 / $4,200	$2,300 / $4,600	$2,800 / $5,600	$3,300 / $6,600
Coinsurance	70%		70%	70%	70%	70%	70%
ER Co-Pay	$100 Copay		$250 Copay	$250 Copay	$250 Copay	$250 Copay	$250 Copay
Urgent Care Co-Pay	$40 Copay		Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin
Office Visit	$20 Copay		Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin
Specialist Visit	$40 Copay		Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin
Hospital or Facility Plan Pays	Ded / Coin		Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin	Ded / Coin
Prescription Drugs							
Generic	$10		$10	$10	$10	$10	$10
Preferred Brand	$30		$30	$30	$30	$30	$30
Non-Preferred	$50		$50	$50	$50	$50	$50
Specialty	$100		$100	$100	$100	$100	$100
Monthly Rates	**Current**	**Renewal**	**BCBS**	**BCBS**	**BCBS**	**BCBS**	**BCBS**
126 Employee Only	$665.77	$665.77	$560.63	$546.47	$539.16	$521.43	$510.98
Estimated Monthly Premium	$83,887	$83,887	$70,639	$68,855	$67,934	$65,700	$64,383
Estimated Yearly Premium	$1,006,644	$1,006,644	$847,673	$826,263	$815,210	$788,402	$772,602
Percentage Change	0.00%		**-15.79%**	**-17.92%**	**-19.02%**	**-21.68%**	**-23.25%**
Annual Premium Difference	$0		**-$158,972**	**-$180,382**	**-$191,434**	**-$218,242**	**-$234,042**

Annual Savings	$158,972	$180,382	$191,434	$218,242	$234,042
HRA Maximum Spend	$63,000	$100,800	$126,000	$189,000	$252,000
Estimated HRA Utilization (20%)	$12,600	$20,160	$25,200	$37,800	$50,400
Total Est Annual Savings	**$146,372**	**$160,222**	**$166,234**	**$180,442**	**$183,642**

Medical Plan Utilization Data

- Office Visit Utilization (04/01/2019 – 03/31/2020)
  - 293 members – 1,104 PCP Visits - $88,153
    - Avg 3.8 visits
  - 325 members – 1,003 Specialist Visits - $91,209
    - Avg 3.1 visits
  - Total Claims Paid - $157,362
    - Average PCP Cost per visit - $79.85
    - Average Specialist Cost per visit - $90.94

- 2019 Preventive Care Summary
  - Mammography (age 40+) – 40 (56%)
  - Pap Smear (age 18+) – 30 (30%)
  - Prostate Screening (age 50+) – 0 (0%)
  - Immunizations – 43 (17%)
  - Office Visit Routine Exam – 93 (38%)
  - Hearing – 5 (2%)
  - OB/GYN – 34 (33%)

- 2020 (YTD) Preventive Care Summary
  - Mammography (age 40+) – 15 (19%)
  - Pap Smear (age 18+) – 13 (11%)
  - Prostate Screening (age 50+) – 0 (0%)
  - Immunizations – 16 (5.6%)
  - Office Visit Routine Exam – 50 (19%)
  - Hearing – 3 (1.1%)
  - OB/GYN – 9 (8%)

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Medical Plan Utilization Data

- Deductible
  - 2020 YTD – 295 Total Members
    - Option 1 – 84 members out of 128 with $0 towards deductible (66%)
    - Option 1 - 17 members out of 128 with $500 towards deductible (13%)
    - Option 2 & 3 - 96 members out of 167 with $0 towards deductible (57%)
    - Option 2 & 3 - 2 members out of 167 with $3,000 towards deductible (1%)
  - 2019 – 348 Total Members
    - Option 1 - 75 members out of 169 with $0 towards deductible (44%)
    - Option 1 - 51 members out of 169 with $500 towards deductible (30%)
    - Option 2 & 3 - 102 members out of 179 with $0 towards deductible (57%)
    - Option 2 & 3 - 7 members out of 179 with $3,000 towards deductible (4%)
  - 2018 – 452 Total Members
    - 152 members out of 452 with $0 towards deductible (33%)
    - 51 members out of 452 met $500 deductible (11%)
- Out-of-Pocket Met
  - 2018 – 49 (11%), 2019 – 52 (15%), 2020 YTD – 12 (4%)

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Ancillary & Voluntary

2020 Ancillary Marketing Summary

- Dental
  - Current Carrier: Delta Dental
    - Current County Spend 254 (members) x $19.02 = $4,831.08 monthly ($57,972.96 Annually)
    - Renewal Rate: (16.1% Increase) – 254 x $22.63 = $5,748.02 monthly ($68,976.24 Annually)
    - Negotiated Rate (6.4% Increase) – 254 x $20.33 = $5,163.83 monthly ($61,965.84 Annually)
  - Carrier's Quoted:
    - BCBS – Employee - $21.02 Family - $68.26 - $5,339.08 Monthly / $64,068.96 Annual (9.5%)
    - MetLife – Employee - $20.33 Family - $66.03 - $5,163.82 Monthly / $61,965.84 Annual (6.4%)
    - Guardian – Employee - $23.87 Family - $77.51 - $6,062.98 Monthly / 72,755.76 Annual (20.3%)
    - Humana – Quote Pending

2020 Ancillary Marketing Considerations

- If no changes are made, Dental will cost the county $61,965.84 annual, up $3,992.88 from last year
  - Pros: Great, FREE Benefit for the employee
    Minimal increase given enrollment stays as is
  - Cons: Increase to the county's bottom line
    Under utilized, for preventative services because it's free to employees
- Consider shifting a portion of the cost to the employees:
  - Pros: Promotes consumerism
    Savings to the County
    Examples below: 0% Employer paid – Annual SAVINGS $61,965.84 – EE $10.17
    50% Employer paid – Annual SAVINGS $26,990.04 – EE $5.09
  - Cons: Eliminates a free benefit to the employee
- **EMPLOYER PAID LTD:**
  - During the pre-renewal meeting we discussed the possibility of transitioning funds from dental savings to help fund an LTD Plan details are as follows.
    - OneAmerica provided a quote for ER Paid LTD:
      - Monthly - $4,049.16/Annualized - $48,589.92
      - More enticing benefits package for the employees
    - Potential savings for the County:
      - If Dental moved 100% voluntary, **savings** would be as follows: (with Renewal Rates)
        - **Monthly - $1,114.66 / Annualized - $13,375.92**

2020 Ancillary Marketing Considerations

Renewal									Employer Cost	
Current	Enrolled	Monthly Rate	EE Paid	ER Paid	ER Paid %	EE Spend	ER Spend	Total	Monthly	Annual
EE Only	201	$20.33	$0.00	$20.33	100%	$0.00	$4,086.33	$4,086.33	**$5,163.82**	**$61,965.84**
Family	53	$66.03	$45.70	$20.33	30.8%	$2,422.10	$1,077.49	$3,499.59		
								$7,585.92		
								$91,031.04		

Renewal (0% Employer Paid)									Employer Cost	
Current	Enrolled	Monthly Rate	EE Paid	ER Paid	ER Paid %	EE Spend	ER Spend	Total	Monthly	Annual
EE Only	201	$20.33	$20.33	$0.00	0%	$4,086.33	$0.00	$4,086.33	**$0.00**	**$0.00**
Family	53	$66.03	$66.03	$0.00	0.0%	$3,499.59	$0.00	$3,499.59		
								$7,585.92		
								$91,031.04		

Renewal (50% Employer Paid)									Employer Cost	
Current	Enrolled	Monthly Rate	EE Paid	ER Paid	ER Paid %	EE Spend	ER Spend	Total	Monthly	Annual
EE Only	201	$20.33	$10.17	$10.17	50%	$2,043.17	$2,043.17	$4,086.33	**$2,581.91**	**$30,982.92**
Family	53	$66.03	$55.87	$10.17	15.4%	$2,960.85	$538.75	$3,499.59		
								$7,585.92		
								$91,031.04		

Alternate Considerations	% Increase/Decrease	Increase/Savings
Renewal	6.9%	**$3,992.88**
Renewal (0% Employer Paid)	-100.0%	-$61,965.84
Renewal (50% Employer Paid)	-46.6%	-$26,990.04

SGI Recommendations

- Medical
  - Consider Fully-Insured Renewal - Flat
  - Consider moving to a Self-Funding:
    - Least risk recommendation:
      - 12/24 Contract, Spec $100K, and 100% Rebate
      - Recommending funding at same rates resulting in approx. $341K in reserves – (BCBS - $25K)
    - Moderate risk recommendation:
      - 12/15 Contract, Spec $100K, and 100% Rebate
      - Recommending funding at same rates resulting in approx. $367K in reserves – (BCBS – 148K)
  - Consider HRA Scenario 1 – Alternate 1

- Dental
  - Consider continuing with Delta, another year of utilization will paint a better picture for next years enrollment
  - Recommendation:
    - 0% -50% Employer Paid option
      - Nudges the employee into consumerism
      - Only those that want the benefit will enroll
      - Savings to the County
        - 0% - $26,990.04
        - 50% - $42,489.12

Proprietary and Confidential Information for Sequoyah Group and Sequoyah Group clients only.

Financial Dashboard

Carter Co. Government

Medical Renewal Projection through March 31st, 2020

Prepared by - Colton Birdwell

Memo:

-MLR for April tracked at 87.4%, which was to be expected that it would be higher due to the previous months abnormal reporting, Current YTD Medical Loss Ratio (MLR) to 78.1%.

-By the numbers:

-Option 1 (Buy-up): represent 51.5% of employees, 84.8% of claims, and 61.3% of total premium

-Option 2 (PPO): represent 4.9% of employees, 4.4% of claims, and 5.2% of total premium

-Option 3 (HDHP): represent 43.6% of employees, 10.8% of claims, and 33.5% of total premium

Note:

-Premium rate increase:

-Plan Year '16 – '17 to '17 – '18 was 8.65%

-Plan Year '17 – '18 to '18 – '19 was 7.51%

-You will notice we have added the historical data on pages 4-6.

- See page 7 for a breakdown between Option 1, 2, & 3.

Sequoyah Group

we listen...you benefit

Carter County

Executive Summary

-During the past 12 months, total enrollment had an increase from 2648 (average enrolled: 221) to 2853 (average enrolled: 238), or 7.7%.

-Over the past 12 months, the medical/rx plan is running at a paid loss ratio of 72.8% (Paid Claims / Billed Premium)

-During this 12 month period, there were 12 individuals with total paid claims exceeding $25k, which represents 41.2% of total claims, 2 of which are termed.

-A look at the 2020:

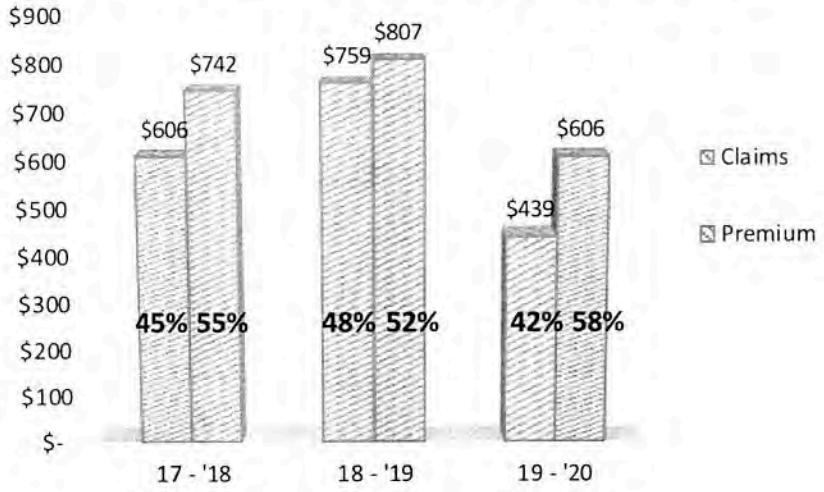
-Renewal Projection is estimated to be around 2.1%

-Renewal Projection - Removing the (termed(high cost claimants shows a projection of -5.1%

3-Year Policy Period Trends

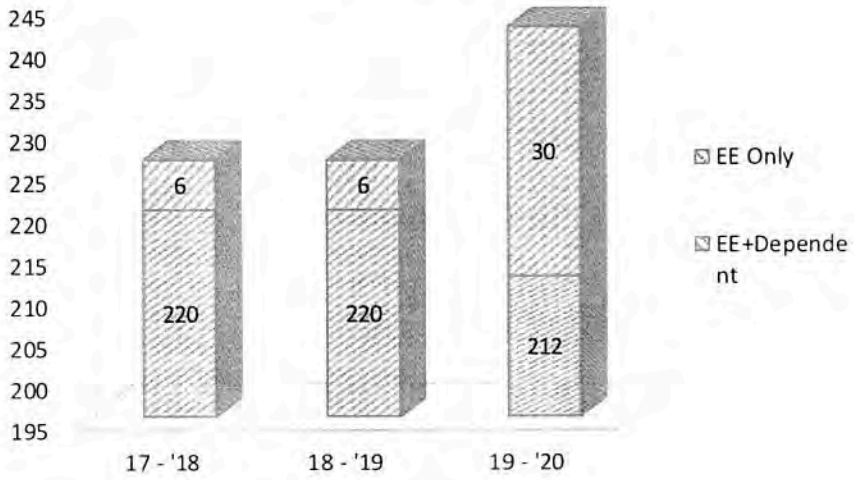
Fully Insured Medical Through March 2020

PEPM PREMIUM VS CLAIMS

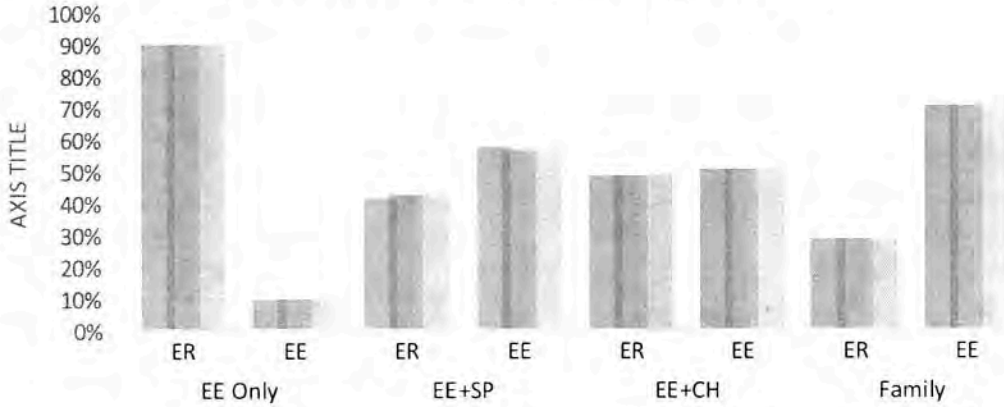


PEPM CLAIMS BY CATEGORY

AVERAGE EMPLOYEES BY TIER

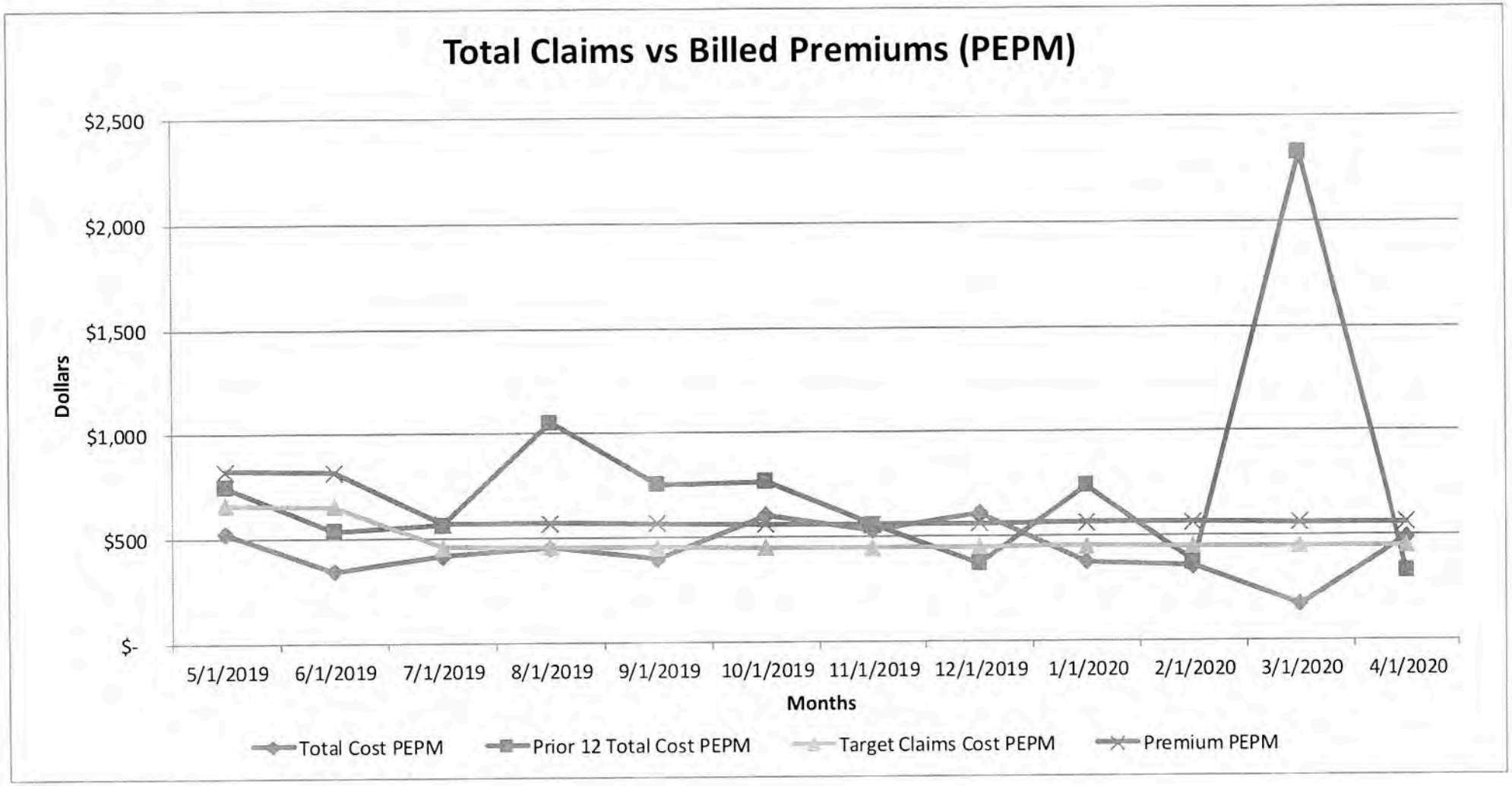


EMPLOYER COST SHARE BREAKDOWN



	EE Only ER	EE Only EE	EE+SP ER	EE+SP EE	EE+CH ER	EE+CH EE	Family ER	Family EE
17 - '18	90%	10%	42%	58%	49%	51%	29%	71%
18 - '19	90%	10%	43%	57%	49%	51%	29%	71%
19 - '20	90%	10%	43%	57%	49%	51%	29%	71%

Rolling 12-Month Medical Cost Summary



Medical Plan Summary - 2019 - 2020

Rolling 12	No. of Employees	Medical Claims	Prescription Drug Claims	Total Claims	Total Claims PEPM	Billed Premium	Premium PEPM	**Loss Ratio**	EE Cost	EE Cost PEPM	ER Cost	ER Cost PEPM
4/1/2020	243	$68,614	$50,521	$119,135	$490	$136,366	$561	**87%**	$7,975	$33	$128,391	$528
3/1/2020	246	-$348	$42,385	$42,037	$171	$137,711	$560	**31%**	$8,041	$33	$129,670	$527
2/1/2020	244	$54,889	$31,270	$86,159	$353	$137,169	$562	**63%**	$8,066	$33	$129,103	$529
1/1/2020	247	$39,319	$53,088	$92,406	$374	$139,079	$563	**66%**	$8,294	$34	$130,785	$529
12/1/2019	243	$122,431	$26,041	$148,472	$611	$136,274	$561	**109%**	$7,885	$32	$128,388	$528
11/1/2019	242	$95,038	$33,430	$128,467	$531	$135,223	$559	**95%**	$7,951	$33	$127,272	$526
10/1/2019	242	$106,145	$39,717	$145,863	$603	$135,809	$561	**107%**	$8,390	$35	$127,419	$527
9/1/2019	237	$45,780	$48,292	$94,071	$397	$134,291	$567	**70%**	$8,390	$35	$125,901	$531
8/1/2019	239	$67,275	$40,738	$108,012	$452	$135,933	$569	**79%**	$9,206	$39	$126,727	$530
7/1/2019	236	$59,836	$38,267	$98,103	$416	$134,745	$571	**73%**	$8,923	$38	$125,822	$533
6/1/2019	216	$29,664	$44,329	$73,994	$343	$176,701	$818	**42%**	$22,465	$104	$154,236	$714
5/1/2019	218	$62,623	$51,385	$114,007	$523	$179,671	$824	**63%**	$23,344	$107	$156,327	$717

7/1/2019 through 4/30/2020												
Cur Period YTD	2,419	$ 658,978	$ 403,748	$ 1,062,725	$ 440	$ 1,362,599	$ 563	**78%**	$ 83,122	$ 34	$ 1,279,476	$ 529

7/1/2018 through 4/30/2019												
Prior Period YTD	2,203	$ 1,250,621	$ 476,612	$ 1,727,233	$ 782	$ 1,801,441	$ 818	**96%**	$ 238,839	$ 122	$ 1,582,800	$ 676

5/1/2019 through 4/30/2020												
Rolling 12 Months	2,853	$ 751,265	$ 499,461	$ 1,250,726	$ 439	$ 1,718,970	$ 606	**74%**	$ 128,931	$ 46	$ 1,590,039	$ 560

5/1/2018 through 4/30/2019												
Prior Rolling 12 Months	2,648	$ 1,443,161	$ 569,704	$ 2,012,865	$ 759	$ 2,136,195	$ 807	**94%**	$ 281,451	$ 130	$ 1,871,692	$ 646

CP YTD vs. PP YTD	9.8%	-47.3%	-15.3%	-38.5%	-43.8%	-24.4%	-31.1%	**-18%**	-65.2%	-71.8%	-19.2%	-21.7%
Rolling 12 vs. P Rolling 12	7.7%	-47.9%	-12.3%	-37.9%	-42.2%	-19.5%	-24.9%	**-21%**	-54.2%	-64.4%	-15.0%	-13.3%

Medical Plan Summary - 2018 - 2019

Rolling 12	No. of Employees	Medical Claims	Prescription Drug Claims	Total Claims	Total Claims PEPM	Billed Premium	Premium PEPM	**Loss Ratio**	EE Cost	EE Cost PEPM	ER Cost	ER Cost PEPM
4/1/2019	218	$31,828	$39,095	$70,923	$325	$179,671	$824	**39%**	$23,344	$107	$156,327	$717
3/1/2019	220	$470,444	$41,587	$512,031	$2,327	$182,641	$830	**280%**	$24,222	$110	$158,418	$720
2/1/2019	218	$39,239	$41,680	$80,919	$371	$182,508	$837	**44%**	$24,791	$114	$157,717	$723
1/1/2019	220	$121,726	$41,318	$163,044	$741	$182,641	$830	**89%**	$24,222	$110	$158,418	$720
12/1/2018	218	$37,762	$42,428	$80,190	$368	$181,089	$831	**44%**	$24,067	$110	$157,022	$720
11/1/2018	219	$72,903	$49,148	$122,050	$557	$180,446	$824	**68%**	$23,421	$107	$157,025	$717
10/1/2018	219	$132,258	$35,060	$167,318	$764	$180,446	$824	**93%**	$23,421	$107	$157,025	$717
9/1/2018	221	$99,416	$66,723	$166,139	$752	$181,997	$824	**91%**	$23,576	$107	$158,421	$717
8/1/2018	226	$160,477	$77,788	$238,265	$1,054	$174,349	$771	**137%**	$23,964	$174	$161,911	$504
7/1/2018	224	$84,569	$41,785	$126,353	$564	$175,652	$784	**72%**	$23,809	$175	$160,515	$503
6/1/2018	221	$64,551	$53,747	$118,297	$535	$167,738	$759	**71%**	$20,897	$170	$143,473	$497
5/1/2018	224	$127,989	$39,345	$167,334	$747	$167,016	$746	**100%**	$21,714	$169	$145,418	$496

7/1/2018 through 4/30/2019												
Cur Period YTD	2,203	$ 1,250,621	$ 476,612	$ 1,727,233	$ 782	$ 1,801,441	$ 818	**96%**	$ 238,839	$ 122	$ 1,582,800	$ 676

7/1/2017 through 4/30/2018												
Prior Period YTD	2,268	$ 1,129,781	$ 340,260	$ 1,470,041	$ 649	$ 1,707,291	$ 753	**86%**	$ 222,169	$ 155	$ 1,472,352	$ 506

5/1/2018 through 4/30/2019												
Rolling 12 Months	2,648	$ 1,443,161	$ 569,704	$ 2,012,865	$ 759	$ 2,136,195	$ 807	**94%**	$ 281,451	$ 130	$ 1,871,692	$ 646

5/1/2017 through 4/30/2018												
Prior Rolling 12 Months	2,727	$ 1,234,736	$ 414,100	$ 1,648,836	$ 606	$ 2,023,370	$ 742	**82%**	$ 264,529	$ 158	$ 1,746,601	$ 505

CP YTD vs. PP YTD	-2.9%	10.7%	40.1%	17.5%	20.5%	5.5%	8.7%	**11%**	7.5%	-21.1%	7.5%	33.5%
Rolling 12 vs. P Rolling 12	-2.9%	16.9%	37.6%	22.1%	25.2%	5.6%	8.7%	**15%**	6.4%	-17.9%	7.2%	27.9%

Medical Plan Summary - 2017 - 2018

Rolling 12	No. of Employees	Medical Claims	Prescription Drug Claims	Total Claims	Total Claims PEPM	Billed Premium	Premium PEPM	**Loss Ratio**	EE Cost	EE Cost PEPM	ER Cost	ER Cost PEPM
4/1/2018	224	$81,251	$50,019	$131,270	$586	$170,394	$761	**77%**	$21,714	$169	$145,418	$496
3/1/2018	227	$124,029	$35,093	$159,123	$701	$172,206	$759	**92%**	$22,532	$167	$147,364	$494
2/1/2018	226	$86,367	$35,990	$122,357	$541	$167,610	$742	**73%**	$23,061	$160	$146,712	$484
1/1/2018	227	$94,489	$32,094	$126,583	$558	$171,970	$758	**74%**	$22,532	$161	$147,364	$483
12/1/2017	225	$93,610	$39,124	$132,733	$590	$168,337	$748	**79%**	$22,387	$99	$146,065	$649
11/1/2017	225	$294,713	$28,615	$323,328	$1,437	$166,157	$738	**195%**	$21,787	$97	$146,068	$487
10/1/2017	225	$86,521	$21,219	$107,740	$479	$173,423	$771	**62%**	$21,787	$167	$146,068	$480
9/1/2017	227	$123,940	$43,920	$167,860	$739	$171,970	$758	**98%**	$21,931	$172	$147,366	$492
8/1/2017	232	$80,054	$29,074	$109,128	$470	$169,913	$732	**64%**	$22,292	$176	$150,613	$496
7/1/2017	230	$64,806	$25,113	$89,919	$391	$175,310	$762	**51%**	$22,147	$177	$149,314	$499
6/1/2017	230	$55,832	$41,908	$97,740	$425	$152,351	$662	**64%**	$21,490	$177	$137,422	$499
5/1/2017	229	$49,123	$31,932	$81,054	$354	$163,728	$715	**50%**	$20,871	$177	$136,827	$498

7/1/2017 through 4/30/2018												
Cur Period YTD	2,268	$ 1,129,781	$ 340,260	$ 1,470,041	$ 649	$ 1,707,291	$ 753	**86%**	$ 222,169	$ 155	$ 1,472,352	$ 506

5/1/2017 through 4/30/2018												
Rolling 12 Months	2,727	$ 1,234,736	$ 414,100	$ 1,648,836	$ 606	$ 2,023,370	$ 742	**82%**	$ 264,529	$ 158	$ 1,746,601	$ 505

Medical Plan Summary - Option 1 (Buy-up) - 2019

Rolling 12	No. of EE	Medical Claims	Drug Claims	Total Claims	Tot Claims PEPM	Billed Premium	Premium PEPM	Loss Ratio	EE Cost	EE Cost PEPM	ER Cost	ER Cost PEPM
4/1/2020	125	$49,719	$42,901	$92,620	$741	$83,221	$666	111.3%	$4,527	$36	$78,694	$630
3/1/2020	126	$42,844	$28,164	$71,008	$564	$83,887	$666	84.6%	$4,594	$36	$79,293	$629
2/1/2020	126	$44,769	$22,842	$67,611	$537	$83,887	$666	80.6%	$4,594	$36	$79,293	$629
1/1/2020	126	$26,969	$45,227	$72,196	$573	$83,887	$666	86.1%	$4,594	$36	$79,293	$629
12/1/2019	125	$51,152	$22,509	$73,661	$589	$83,221	$666	88.5%	$4,527	$36	$78,694	$630
11/1/2019	125	$89,206	$26,744	$115,950	$928	$83,221	$666	139.3%	$4,527	$36	$78,694	$630
10/1/2019	124	$99,523	$35,581	$135,103	$1,090	$82,555	$666	163.7%	$4,461	$36	$78,095	$630
9/1/2019	125	$37,786	$41,431	$79,218	$634	$83,221	$666	95.2%	$4,461	$36	$78,761	$630
8/1/2019	125	$61,217	$37,169	$98,387	$787	$83,221	$666	118.2%	$4,461	$36	$78,761	$630
7/1/2019	127	$57,777	$37,752	$95,529	$752	$84,553	$666	113.0%	$4,594	$36	$79,959	$630
	1254	**$ 560,961**	**$ 340,321**	**$ 901,283**	**$ 719**	**$ 834,876**	**$ 666**	**108%**	**$ 45,339**	**$ 36**	**$ 789,537**	**$ 630**

Medical Plan Summary - Option 2 (PPO) - 2019

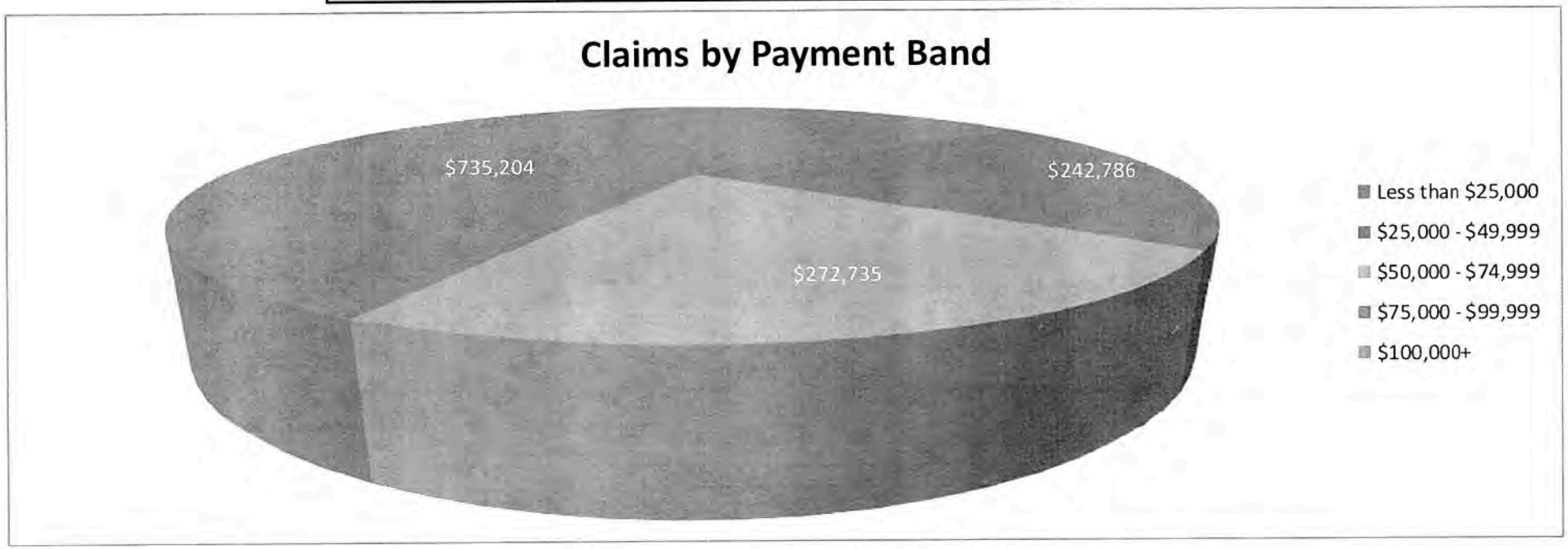
Rolling 12	No. of EE	Medical Claims	Drug Claims	Total Claims	Tot Claims PEPM	Billed Premium	Premium PEPM	Loss Ratio	EE Cost	EE Cost PEPM	ER Cost	ER Cost PEPM
4/1/2020	12	$14,523	$1,362	$15,886	$1,324	$6,792	$566	233.9%	$866	$72	$5,926	$494
3/1/2020	12	-$47,860	$122	-$47,738	-$3,978	$6,792	$566	-702.9%	$866	$72	$5,926	$494
2/1/2020	11	$2,173	$122	$2,295	$209	$6,308	$573	36.4%	$866	$79	$5,442	$495
1/1/2020	12	$3,446	$5,020	$8,466	$706	$6,792	$566	124.7%	$866	$72	$5,926	$494
12/1/2019	12	$50,059	$575	$50,634	$4,219	$6,792	$566	745.5%	$866	$72	$5,926	$494
11/1/2019	12	$3,351	$456	$3,807	$317	$6,792	$566	56.1%	$866	$72	$5,926	$494
10/1/2019	14	$1,941	$202	$2,143	$153	$8,292	$592	25.8%	$1,282	$92	$7,009	$501
9/1/2019	13	$6,291	$3,634	$9,925	$763	$7,808	$601	127.1%	$1,282	$99	$6,525	$502
8/1/2019	14	$633	$204	$837	$60	$8,292	$592	10.1%	$1,282	$92	$7,009	$501
7/1/2019	12	$312	$26	$337	$28	$6,792	$566	5.0%	$866	$72	$5,926	$494
	124	**$ 34,870**	**$ 11,723**	**$ 46,592**	**$ 380**	**$ 71,449**	**$ 575**	**66%**	**$ 9,909**	**$ 79**	**$ 61,541**	**$ 496**

Medical Plan Summary - Option 3 (HDHP) - 2019

Rolling 12	No. of EE	Medical Claims	Drug Claims	Total Claims	Tot Claims PEPM	Billed Premium	Premium PEPM	Loss Ratio	EE Cost	EE Cost PEPM	ER Cost	ER Cost PEPM
4/1/2020	106	$4,371	$6,257	$10,629	$100	$46,352	$437	22.9%	$2,582	$24	$43,771	$413
3/1/2020	108	$4,668	$14,099	$18,767	$174	$47,032	$435	39.9%	$2,582	$24	$44,451	$412
2/1/2020	107	$7,946	$8,306	$16,253	$152	$46,974	$439	34.6%	$2,606	$24	$44,368	$415
1/1/2020	109	$8,904	$2,841	$11,745	$108	$48,400	$444	24.3%	$2,835	$26	$45,566	$418
12/1/2019	106	$21,220	$2,957	$24,177	$228	$46,261	$436	52.3%	$2,492	$24	$43,768	$413
11/1/2019	105	$2,481	$6,229	$8,710	$83	$45,210	$431	19.3%	$2,558	$24	$42,652	$406
10/1/2019	104	$4,681	$3,935	$8,616	$83	$44,962	$432	19.2%	$2,647	$25	$42,315	$407
9/1/2019	99	$1,702	$3,227	$4,929	$50	$43,262	$437	11.4%	$2,647	$27	$40,615	$410
8/1/2019	100	$5,424	$3,364	$8,788	$88	$44,420	$444	19.8%	$3,463	$35	$40,957	$410
7/1/2019	97	$1,748	$489	$2,236	$23	$43,400	$447	5.2%	$3,463	$36	$39,937	$412
	1041	**$ 63,146**	**$ 51,704**	**$ 114,850**	**$ 109**	**$ 456,274**	**$ 438**	**25%**	**$ 27,874**	**$ 27**	**$ 428,399**	**$ 411**

Large Claims Summary by Payment Band (Rolling 12 through April 2020): $25k+

Payment Category	# of Claimants	Payments	% of Claims *
Less than $25,000		$735,204	58.8%
$25,000 - $49,999	7	$242,786	19.4%
$50,000 - $74,999	5	$272,735	21.8%
$75,000 - $99,999	0	$0	0.0%
$100,000+	0	$0	0.0%
Amount above Pooling Point ^ ($100,000)		$0	
Total	**12**	$1,250,726	100.0%



Notes: ^ % of claims determined using the Rolling 12 Months paid claims

Excess Claims over $25,000 Breakdown

$25,000 - $49,999

Diagnosis	Claim Amount	% of paid claims	Status
FRACTURE OF ONE RIB, RIGHT SIDE	$ 28,851.89	2.31%	Active
DRUG CLAIM/NO DIAGNOSIS AVAILABLE	$ 30,748.50	2.46%	Active
TP 2 DM W SEVR NPRLFRT DR W MACULAR	$ 32,170.15	2.57%	Active
CDD C6-C7 LEVEL W/ RADICULOPATHY	$ 34,244.45	2.74%	Active
CDD C6-C7 LEVEL W/ RADICULOPATHY	$ 37,800.87	3.02%	Termed
UNILATERAL PRIMARY OA, LEFT KNEE	$ 39,241.76	3.14%	Active
ENDOCRINE DISORDERS	$ 39,728.68	3.18%	Active
	$ 39,728.68	**3.18%**	

$50,000 - $74,999

Diagnosis	Claim Amount	% of paid claims	Status
INFLAMMATORY CONDITIONS	$ 52,118.83	4.17%	Active
VENTRICULAR TACHYCARDIA	$ 53,763.40	4.30%	Active
SEPSIS, UNSPECIFIED ORGANISM	$ 54,598.49	4.37%	Active
INFLAMMATORY CONDITIONS	$ 55,127.93	4.41%	Termed
INFLAMMATORY CONDITIONS	$ 57,126.71	4.57%	Active
	$ 272,735.36	**21.81%**	

RX Utilization Top 10 Drugs

May 2019 - April 2020

Brand Drugs	Specialty Drug Indicator	Number of Scripts	Paid Claims	Paid Claims PMPM	Percent of Total Brand Claims	Percent of Total Drug Claims
HUMIRA PEN (RA)	Y	10	$ 49,873.98	$ 4,987.40	11.3%	10.0%
STELARA (Crohn's)	Y	4	$ 42,066.42	$ 10,516.61	9.6%	8.4%
NATPARA (Treat Low Calcium Levels)	Y	3	$ 28,551.38	$ 9,517.13	6.5%	5.7%
SKYRIZI (2 SYRINGES) K (Plaque Psoriasis)	Y	2	$ 28,320.00	$ 14,160.00	6.4%	5.7%
TRULICITY (Diabetes)	N	25	$ 27,701.83	$ 1,108.07	6.3%	5.5%
HUMALOG KWIKPENU-100 (Insulin)	N	15	$ 17,240.21	$ 1,149.35	3.9%	3.5%
JARDIANCE (Diabetes)	N	18	$ 17,170.49	$ 953.92	3.9%	3.4%
ENBREL SURECLICK (Arthritis)	Y	3	$ 15,436.42	$ 5,145.47	3.5%	3.1%
HUMULIN R U-500 KWIKPE (Diabetes)	N	9	$ 15,054.86	$ 1,672.76	3.4%	3.0%
HUMIRA(CF) (Crohn's)	Y	3	$ 14,601.39	$ 4,867.13	3.3%	2.9%
Total Top 10 Brand		**92**	**$ 256,016.98**	**$ 54,077.83**	**58.2%**	**51.2%**

Generic Drugs	Specialty Drug Indicator	Number of Scripts	Paid Claims	Paid Claims PMPM	Percent of Total Generic Claims	Percent of Total Drug Claims
TESTOSTERONE (Low-T)	N	17	$ 5,540.27	$ 325.90	9.2%	1.1%
SOLIFENACIN SUCCINATE (Overactive Bladder)	N	7	$ 5,377.91	$ 768.27	9.0%	1.1%
RANOLAZINE ER (Heart)	N	9	$ 2,718.11	$ 302.01	4.5%	0.5%
WIXELA INHUB (ASTHMA)	N	4	$ 1,921.02	$ 480.26	3.2%	0.4%
ESTRADIOL (Estrogen)	N	44	$ 1,898.78	$ 43.15	3.2%	0.4%
FLUTICASONE-SALMETEROL (COPD)	N	4	$ 1,882.68	$ 470.67	3.1%	0.4%
FENOFIBRATE (Cholesterol)	N	19	$ 1,528.50	$ 80.45	2.5%	0.3%
TACROLIMUS (Eczema)	N	18	$ 1,201.01	$ 66.72	2.0%	0.2%
TOLTERODINE TARTRATE E (Overactive Bladder)	N	4	$ 1,142.60	$ 285.65	1.9%	0.2%
BUPRENORPHINE-NALOXONE (Opioid Blocker)	N	4	$ 1,080.90	$ 270.23	1.8%	0.2%
Total Top 10 Generic		**130**	**$ 24,291.78**	**$ 3,093.31**	**40.5%**	**4.8%**

Carter County

Fully Insured Medical Renewal Projection

Factors	PEPM Cost	Annual Cost
Lagged Rolling 12 Average Lives	238	
Assumed Monthly Lives	243	
Experience Period Claims	$428.92	$1,250,726
Less: Claims over ISL	$0.00	$0
Net Experience Period Claims	$428.92	$1,250,726
Adjustments (None Selected)		
Adjusted Experience	$428.92	
Expected Trend	8.0%	
Trend Months (Forecasted Months)	14.0	
Effective Trend	9.3%	
Trended Claims Cost	$468.95	$1,367,460
Expected Pooling Charge (Estimate)	$28.11	
Expected Claims Cost w/ Pooling	$497.06	$1,449,429
Admin	10.2%	$147,842
Taxes (Includes ACA)	2.5%	$36,236
Total Retention	8.3%	$120,303
ACA Fees	$0.22	$634
Calculated Premium Cost	$601.66	$1,754,443
Current Premium Cost	$589.50	$1,718,970
Difference H/(L)	($12.16)	($35,473)
% Change vs Current Premium Cost	2.1%	

Notes:

1) Annual Cost is based on the assumed lives vs. the experience period PEPM Cost.

2) Projection based on claims experience through April 2020. Any additional experience or changes in plan design may alter the forecasted results.

3) Taxes include 1.8% insurance provider taxes, plus 2.5% Health Insurance ACA Industry Fee

4) ACA Fee - $2.45 PMPY PCORI Fee adjusted for inflation by 6%. This is subject to change.

Based off remaining months in year plus 12

Update with Member total in calculation

Medical Renewal Projection - Removing High Cost Claimants

Factors	PEPM Cost	Annual Cost
Lagged Rolling 12 Average Lives	238	
Assumed Monthly Lives	243	
Experience Period Claims	$397.05	$1,157,797
Less: Claims over pooling level	$0.00	$0
Net Experience Period Claims	$397.05	$1,157,797
Adjustments		
Adjusted Experience	$397.05	
Expected Trend	8.0%	
Trend Months (Forecasted Months)*	14.0	
Effective Trend	9.3%	
Trended Claims Cost	$434.11	$1,265,858
Expected Pooling Charge (Estimate)	$28.11	
Expected Claims Cost w/ Pooling	$462.22	$1,347,827
Admin	10.2%	$137,478
Taxes (Includes ACA)	2.5%	$33,696
Total Retention	8.3%	$111,870
ACA Fees**	$0.22	$634
Calculated Premium Cost	$559.50	$1,631,504
Current Premium Cost	$589.50	$1,718,970
Difference H/(L)	$30.00	$87,466
% Change vs Current Premium Cost	**-5.1%**	

Notes:

1) Annual Cost is based on the assumed lives vs. the experience period PEPM Cost.
2) Projection based on claims experience through April 2020. Any additional experience or changes in plan design may alter the forecasted results.
3) Taxes include 1.8% insurance provider taxes, plus 2.5% Health Insurance ACA Industry Fee
4) ACA Fee - $2.45 PMPY PCORI Fee adjusted for inflation by 6%. This is subject to change.

Based off remaining months in year plus 12
Update with Member total in calculation

Client Services Summary

SGI Recommendations

Task	Completion Date
Carrier Claim Resolution	Ongoing
Compliance Support and Tools	Ongoing
Legislative Updates and Correspondence	Ongoing
Process All Adds, Terms, and Changes with Carriers	Ongoing
Audit Carrier Invoices	Ongoing
Pre-Renewal Meeting • Current Benefits and Contribution Strategy • Medical Review • 2020/2021 Marketing and Renewal Discussion • Open Enrollment Planning	Complete
2020/2021 Marketing	Complete
2020/2021 Renewal Meeting • Review 2020/2021 Marketing • Discuss Plan Designs and Strategies	May 2020
Finalize 2020/2021 Decisions	May 2020

Proprietary and Confidential Information for Sequoyah Group and Sequoyah Group clients only.

SGI Recommendations

Task	Completion Date
Open Enrollment Services • Review current plan documents, contracts, contributions, and communications • Set up benefits administration system • Assess areas of immediate need • Provide Rx Credible Coverage Review and Annual Notices	May/June 2020
Review SPDs and Certificates	Complete
ACA Reporting	Complete
HIPPA, FMLA Training, and Medicare Seminar	TBD
Quarterly Meeting • Benchmarking • Carrier Analysis • Service Update	October 2020
Medical Educational Meetings • Regarding other carriers	TBD

Questions?

Carter County, Tennessee
Department of Finance
Brad Burke, Director of Finance
burkeb@cartercountytn.gov

Courthouse: Suit
801 East Elk Av
Elizabethton, TN 3
Phone: 423-547-
Fax: 423-542-

Date: April 1, 2020

To: All Finance Department employees

Re: Policy and Procedures for performing job duties during the Coronavirus pandemic

On April 1, 2020, the Carter County Finance Department began operating on an alternative basis in an effort to protect county employees and the public from the Corona Virus (COVID-19). Only a limited number of employees shall be physically present in the office each day through periodic rotations and/or directing certain employees to perform office duties remotely. Employees will telework on a rotating basis.

Unless an employee qualifies for paid leave under provisions of the Emergency Paid Leave Act or the Emergency Family and Medical Leave Expansion Act of 2020, leave (sick, annual, comp) must be used by any employee who chooses to neither work in the office or telework. Required forms for emergency leave must be submitted by the employee and approved by the Finance Director. Employee timesheets must clearly indicate those days and number of hours claimed for regularly scheduled workdays on which an employee is not present in the office or teleworking.

I thank all of you for your dedication and diligence during this difficult time!

These policies and procedures shall remain in effect until further notice.

Brad Burke — 4/1/2020

Brad Burke — Date

Carter County Sheriff's Office

900 East Elk Avenue
Elizabethton, Tennessee 37643
Phone: 423.542.1846 Fax: 423.542.3156

Dexter Lunceford
Sheriff

James Parrish
Chief Deputy

April 1, 2020

Amendment To Personnel Policy

Any employee who is required to be quarantined upon testing positive for any infectious disease will be placed on Administrative Leave with Pay for the entire required quarantine period.

Dexter Lunceford
Carter County Sherriff

Register of Deeds
Jarrod Ellis
4/17/20

Employee Acknowledgement
Carter County Register of Deeds Covid-19 Modified Work Schedule Policy

Beginning Monday April 20, 2020, in response to the COVID-19 pandemic, the Registers office of Carter County will begin a temporary modified work schedule for employees. This modified work schedule is being adopted in order to further implement health safety practices for the welfare of its employees and the general public and to ensure the continuity of governmental operations and public services during the COVID-19 pandemic. This policy may modify and terminate at any time.

The modified work schedule will consist of limiting the number of employees working on location by placing employees on work rotation for a period of time. The Register will determine whether and how much a modified work schedule can be implemented in his department, and will select which employees will be placed on which rotation period. All employees placed on a modified work schedule will be categorized as being on reserve/on-call status during their off-work rotation period and will be expected to return to work if called to do so. Employees are strongly urged to remain at home during their off-work rotation and should comply with all emergency orders issued by federal, state and local authorities.

During any work at home rotation period, employees will continue to receive pay as follows:

1. Usual pay and benefits for their normal, regularly scheduled work hours without using any Personal leave time, unless an employee notifies the department that he or she is unable to work.
2. If directed to come back into work during normal, regularly scheduled work hours, no additional pay shall be given.
3. If directed to come back into work outside of normal, regularly scheduled work hours, pay will be calculated in accordance with regular personnel on-call, call back, or overtime pay policies.

During any work rotation period, employees shall do the following during their normal, regularly scheduled work hours:

1. Remain immediately accessible by telephone at all times.
2. Remain able to report to the Register's work location to return to work within one hour of receiving notice from their supervisor or department head, including making advance arrangements for regular dependent care if necessary.
3. Notify the Register immediately they become unavailable to work due to illness or other reason, at which time the employee will take the appropriate personal leave for that day(s).

4. Comply with all Carter County rules, policies, practices, and procedures that would apply if the employee were working at their usual department work location.
5. Work on individual and assigned office duties in the home as applicable.

Employees who do not follow these policy directives are subject to potential disciplinary action. And employee who fails to provide notice of their unavailability to work or fails to report back to work as instructed by the Register will forfeit and pay during the remainder of the off-work rotation period and be subject to using accumulated personal leave for the work at home rotation period.

I, undersigned Employee, have read the above policy and understand its provisions.

Brenda Johnson 4/17/2020 **Employee Signature and date**

Jarrod Elks 4/17/2020 **Register of Deeds/Elected Official and date**

Brenda Johnson

RANDAL LEWIS
TRUSTEE
trustee@cartercountytn.gov

801 ELK AVENUE
ELIZABETHTON, TN 37643
PHONE: 423-542-1811
FAX: 423-547-1505

EMPLOYEE ACKNOWLEDGEMENT
CARTER COUNTY TRUSTEE COVID-19 MODIFIED WORK SCHEDULE POLICY

Beginning Monday, April 6, 2020, in response to the COVID-19 pandemic, the Trustee's office of Carter County will begin a temporary modified work schedule for employees. This modified work schedule is being adopted in order to further implement health safety practices for the welfare of its employees and the general public and to ensure the continuity of governmental operations and public services during the COVID-19 pandemic. This policy may modify or terminate at any time.

The modified work schedule will consist of limiting the number of employees working on location by placing employees on work rotation for a period of time. The Trustee will determine whether and how much a modified work schedule can be implemented in his department, and will select which employees will be placed on which rotation period. All employees placed on a modified work schedule will be categorized as being on a reserve status during their work at home rotation period, and will be expected to return to work on location if called to do so. Employees are strongly urged to remain at home during their work at home rotation and should comply with all emergency orders issued by federal, state and local authorities.

During any work at home rotation period, employees will continue to receive pay as follows:

1. Usual pay and benefits for their normal, regularly scheduled work hours without using any Personal leave time, unless an employee notifies the department that he or she is unable to work.
2. If directed to come back into work during normal, regularly scheduled work hours, no additional pay shall be given.
3. If directed to come back into work outside of normal, regularly scheduled work hours, pay will be calculated in accordance with regular personnel on-call, call back, or overtime pay policies.

During any work at home rotation period, employees shall do the following during their normal, regularly scheduled work hours:

1. Remain immediately accessible by telephone at all times.
2. Remain able to report to the Trustee's work location to return to work there within one hour of receiving notice from their supervisor or department head, including making advance arrangements for regular dependent care if necessary.
3. Notify the Trustee immediately if they become unavailable to work due to illness or other reason, at which time the employee will take the appropriate personal leave for that day(s).
4. Comply with all Carter County rules, policies, practices, and procedures that would apply if the employee were working at their usual department work location.
5. Work on individual and assigned office duties in the home as applicable.

Employees who do not follow these policy directives are subject to potential disciplinary action. Any employee who fails to provide notice of their unavailability to work or fails to report back to work as instructed by the Trustee will forfeit any pay during the remainder of the work at home rotation period and be subject to using accumulated personal leave for the work at home rotation period.

I, the undersigned Employee, have read the above policy and understand its provisions.

_____ Employee Signature

_____ Trustee/Elected Official

JOHNNY BLANKENSHIP
CARTER COUNTY CIRCUIT COURT CLERK

900 E. ELK AVE. SUITE 906 * ELIZABETHTON, TN 37643 * (423) 542-1835 * FAX: (423) 542-3742

Circuit Court Clerk Teleworking Policy

The Circuit Court Clerk's office has adopted a policy that during extreme events such as natural disasters, communicable disease exposure, or other events deemed an emergency by the office holder, employees may be given the opportunity to telework or use alternative means of communication to perform their assigned job duties at home and/or remotely to keep the Circuit Court Clerk's office functioning. This policy shall be subordinate to any applicable Federal or State laws, or lawful governmental orders.

Circuit Court Clerk
Johnny Blankenship

RANDAL LEWIS
TRUSTEE
trustee@cartercountytn.gov

CARTER COUNTY
STATE OF TENNESSEE

801 ELK AVENUE
ELIZABETHTON, TN 37643
PHONE: 423-542-1811
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April 6, 2020

To: Joshua Hardin, County Attorney

Re: Employee policy during the Corona Virus (CODIV-19) pandemic

On April 6, 2020, my office began operating on a Modified Work Schedule as an effort to protect the Carter County Trustee's employees, the public from the Corona Virus (COVID-19), and to ensure the continuity of governmental operations and public services during this pandemic.

I have decided to limit the number of employees physically present in my office each day through periodic rotations and/or directing certain employees to perform office duties remotely.

I have chosen to continue paying regular wages to all employees until further notice. Employee timesheets will clearly indicate those days and number of hours claimed for regularly scheduled workdays on which employees are not present in the office or working in their home.

Randal Lewis, Trustee

Attachment

Dr. Kevin Ward, Director of Schools
Peggy Campbell, Assistant Director
Amanda Scalf, Executive Secretary

March 17, 2020

Finance Director Brad Burke,

Please note that ALL Carter County School System employees will continue to be paid at the regular rates while school is closed. This is to include everyone except substitutes. Hourly workers will continue to be paid at the current rates.

Please let me know if you have further questions.

Respectfully,

Dr. Kevin Ward

Director of Schools

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Elizabethton, TN 37643
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carterk12.net