

AGENDA

**Port Freeport
Personnel Advisory Committee
Special Meeting
Wednesday, November 17, 2021, 11:00 am - 11:50 am
In Person & Videoconference - Administration Building - 1100 Cherry Street - Freeport**

This meeting may be attended virtually or in person.

The meeting will be conducted pursuant to Section 551.127 of the Texas Government Code titled "Videoconference Call." This statute provides public officials, employees and members of the public may participate remotely in a public meeting by videoconference call. The Port Commission is utilizing this existing statute to ensure the greatest amount of access to the public and ensure the ability of all Commissioners to participate in meetings.

The quorum of the Port Commission will be located at the Commissioner Meeting Room located at 1100 Cherry Street, Freeport, Texas ("Meeting Location"). The Port Commission intends to have a quorum at the Meeting Location. The presiding Commissioner of this meeting will be physically present at the Meeting Location. The public will be permitted to physically attend the meeting at the Meeting Location.

Public comment will be available at the beginning of the meeting during the agenda item devoted to public comment. Public comment may be communicated virtually and in person, but in either event public comment will be limited to 5 minutes per participant and must be communicated verbally. Following public comment, the public will not be permitted to communicate with the Port Commission.

This meeting agenda and agenda packet is posted online at www.portfreeport.com

The videoconference is available online as follows:

Join Zoom Meeting

<https://us02web.zoom.us/j/83198059061?pwd=VW5ZZUZSZjFjUnBnaVF1OW4rWHJ3dz09>

Meeting ID: 831 9805 9061

Passcode: 379193

Dial by your location

1 346 248 7799 US (Houston)

1 669 900 9128 US (San Jose)

1 253 215 8782 US (Tacoma)

1 312 626 6799 US (Chicago)

1 646 558 8656 US (New York)

1 301 715 8592 US (Washington DC)

Meeting ID: 831 9805 9061

Find your local number: <https://us02web.zoom.us/j/kdwtkfo>

1. Committee Members: Singhania (Chairman), Croft, Pirtle
2. CONVENE OPEN SESSION in accordance with Texas Government Code Section 551.001, et. seq., to review and consider the following:
3. Roll Call.
4. Public Comment. (Public comment will be limited to 5 minutes per participant and can be completed in person or virtually)

5. Discussion regarding Port Freeport's annual contribution to the Port Freeport Retirement Plan.
6. Discussion regarding renewal of Port Freeport Health, Dental and Vision Insurance.
7. EXECUTIVE SESSION in accordance with Subchapter D of the Open Meetings Act, Texas Government Code Section 551.001, et. seq., to review and consider the following:
 - A Under authority of Section 551.074 (Deliberation of Personnel Matters) for discussion regarding:
 1. Deliberation regarding the appointment, employment, evaluation, reassignment, duties of a public officer or employee, including but not limited to: Executive Director/CEO.
8. RECONVENE OPEN SESSION:
9. Adjourn.

The Committee does not anticipate going into a closed session under Chapter 551 of the Texas Government Code at this meeting for any other items on the agenda, however, if necessary, the Committee may go into a closed session as permitted by law regarding any item on the agenda.



Phyllis Saathoff, Executive Director/CEO
PORT FREEPORT

In compliance with the Americans with Disabilities Act, the District will provide for reasonable accommodations for persons attending its functions. Requests should be received at least 24 hours in advance.

RESOLUTION AUTHORIZING A CONTRIBUTION TO THE PORT FREEPORT RETIREMENT PLAN

At a regular meeting of the Port Commission of Port Freeport at the office of said District at 1100 Cherry Street, Freeport, Texas, on the 17th day of November 2021, among other business came on to be considered the following resolution, which, upon motion duly made and seconded, was adopted by vote of all Commissioners present:

FINDINGS

1. Due and proper notice of the date, time, place and purpose of this meeting has been duly given in accordance with the provisions of the Texas Open Meetings Act, and such meeting has been conducted in accordance with said Open Meetings Act.
2. Port Freeport ("Port" or "Employer") has heretofore adopted a "Flexible Nonstandardized Safe Harbor Profit Sharing Plan Agreement" establishing the "Port Freeport Retirement Plan" (the "Plan") effective January 1, 2000.
3. Employer has heretofore adopted a Group Annuity Contract with the MassMutual Financial Group, Contract No. GA-7649, effective January 1, 2001.
4. Per agreement with MassMutual Financial Group, Employer serves as Plan Administrator of the Plan.
5. Upon recommendation of Management, it is found to be in the best interest of the Port for Employer to make a contribution of 6.0 percent (0.060) of Plan eligible wages to the "Port Freeport Retirement Plan" for the plan year ending December 31, 2021.

Now, therefore, BE IT RESOLVED, that the Port, as Employer, hereby authorizes a contribution a contribution of 6.0 percent (0.060) of Plan eligible wages to the Port Freeport Retirement Plan for the plan year ending December 31, 2021.

M E M O R A N D U M

TO: Commissioners
Chief Executive Officer

FROM: Rob Lowe
Mary Campus

DATE: November 1, 2021

SUBJECT: Group Health and Dental/Vision Insurance

The current medical plan is through Blue Cross Blue Shield (BCBS) and expires December 31, 2021. BCBS has offered renewal with a premium increase of 6.2%. The budget was calculated using a 12% increase for nine months, so therefore the medical will be below budgeted levels for the fiscal year. Alternate plans with BCBS, United Healthcare and Humana were also considered, all having subtle differences such as co-pays, deductibles and maximum out of pocket. Management recommendation is to renew the BCBS plan as proposed while maintaining the existing cost share, as budgeted.

The current dental/vision plan is through Principal and will also expire December 31, 2021. We requested research in offering two plans, one being the renewal plan with a \$1,500 annual maximum and another with a \$2,000 annual maximum. By offering two plans, Principal has restructured the rates and the renewal plan has a 1% reduction in rates. The budget was calculated using a 10% increase for nine months, so therefore the dental/vision will be below budgeted levels for the fiscal year. The Principal alternate offering will be treated as a buy up plan, the Port's cost will remain the same. All other alternate proposals are at a higher premium. Management recommendation is to renew the existing dental/vision plan with Principal while maintaining the existing cost share, as budgeted.

PORT COMMISSION

Port Freeport Health Insurance Renewal 1-1-2022



	BCBS Texas Expiring	BCBS Renewal		BCBS Alternate		BCBS Alternate		BCBS Alternate	
Plan Name	G652CHC	G652CHC		G653CHC		G654CHC		G9L1CHC	
Benefits	In-Network	In-Network		In-Network Single/Family		In-Network		In-Network	
Office Co-pay	PCP \$40, SPC \$80	PCP \$40, SPC \$80		PCP \$30, SPC \$60		PCP \$40, SPC \$80		PCP \$30, SPC \$60	
ER	\$500 co-pay + ded &/or 20%	\$500 co-pay + ded &/or 20%		\$500 co-pay + ded &/or 20%		\$600 co-pay + ded &/or 20%		\$300 co-pay + ded &/or 20%	
Urgent Care	\$100 co-pay	\$100 co-pay		\$75 co-pay		\$75 co-pay		\$75 co-pay	
Deductible	\$1,500/\$4,500 Single/Family	\$1,500/\$4,500 Single/Family		\$1,500/\$4,500 Single/Family		\$1,250/\$3,750 Single/Family		\$2,000/\$6,000 Single/Family	
Coinsurance	80%/20%	80%/20%		80%/20%		80%/20%		80%/20%	
Out-of-Pocket	\$5,000/\$10,000 Single/Family	\$5,000/\$10,000 Single/Family		\$6,000/\$12,000 Single/Family		\$5,000/\$10,000 Single/Family		6,000/\$17,100 Single/Family	
Pharmacy	\$0/10/50/100/150/250	\$0/10/50/100/150/250		\$0/\$20/\$70/\$120/\$150/\$250		\$0/10/50/100/150/250		\$0/10/50/100/150/250	
In-Patient Co-pay	N/A	N/A		N/A		\$300		\$150	
Out-Patient Co-pay	N/A	N/A		N/A		\$250		\$100	
	Out Network	Out Network		Out Network		Out Network		Out Network	
Deductible	\$3,000/\$9,000 Single/Family	\$3,000/\$9,000 Single/Family		\$3,000/\$9,000 Single/Family		\$2,500/\$7,500 Single/Family		\$4,000/\$8,100 Single/Family	
Coinsurance	60%/40%	60%/40%		60%/40%		60%/40%		70%/30%	
Out of Pocket	Unlimited	Unlimited		Unlimited		Unlimited		Unlimited	
Blue Cross Census Quote Total Monthly Premium (Including Dependents)									
	\$70,121.25	\$74,457.75	6.2%	\$73,751.25	5.2%	\$74,190.75	5.8%	\$72,144.00	2.9%
Monthly Rate:									
Employee	\$ 934.95	\$ 992.77	6.2%	\$ 983.35	5.2%	\$ 989.21	5.8%	\$ 968.55	3.6%
Employee & Spouse	\$ 1,869.90	\$ 1,985.54	6.2%	\$ 1,966.70	5.2%	\$ 1,978.42	5.8%	\$ 1,937.10	3.6%
Employee & Child	\$ 1,869.90	\$ 1,985.54	6.2%	\$ 1,966.70	5.2%	\$ 1,978.42	5.8%	\$ 1,937.10	3.6%
Employee & Family	\$ 2,804.85	\$ 2,978.31	6.2%	\$ 2,950.05	5.2%	\$ 2,967.63	5.8%	\$ 2,905.65	3.6%

Current Allocation: **Texas Association of Counties declined to quote; Port Freeport is not eligble for Aetna's plan offerings

Employee:									
Port 95%	\$	888.20	\$	943.13	\$	934.18	\$	939.75	\$ 920.12
Employee 5%	\$	46.75	\$	49.64	\$	49.17	\$	49.46	\$ 48.43
Dependent:									
Employee & Spouse or Children									
Port 82.5%	\$	1,659.54	\$	1,762.17	\$	1,745.44	\$	1,755.85	\$ 1,719.17
Employee 17.5%	\$	210.36	\$	223.37	\$	221.26	\$	222.57	\$ 217.93
Employee & Family									
Port 82.5%	\$	2,430.87	\$	2,581.20	\$	2,556.71	\$	2,571.95	\$ 2,518.23
Employee 17.5%	\$	373.98	\$	397.11	\$	393.34	\$	395.68	\$ 387.42

Port Freeport Health Insurance Renewal 1-1-2022



	BCBS Texas Expiring	BCBS Renewal	United Healthcare		Humana	
Plan Name	G652CHC	G652CHC	CEFP		Option 5	
Benefits	In-Network	In-Network	In-Network		In-Network	
Office Co-pay	PCP \$40, SPC \$80	PCP \$40, SPC \$80	PCP \$15, SPC \$100		PCP \$40, SPC \$80	
ER	\$500 co-pay + ded &/or 20%	\$500 co-pay + ded &/or 20%	\$300 co-pay + ded &/or 20%		\$500 co-pay + ded &/or 20%	
Urgent Care	\$100 co-pay	\$100 co-pay	\$25 co-pay		\$100 co-pay	
Deductible	\$1,500/\$4,500 Single/Family	\$1,500/\$4,500 Single/Family	\$1,500/\$3,000 Single/Family		\$1,500/\$3,000 Single/Family	
Coinsurance	80%/20%	80%/20%	80%/20%		80%/20%	
Out-of-Pocket	\$5,000/\$10,000 Single/Family	\$5,000/\$10,000 Single/Family	\$8,500/\$17,000 Single/Family		\$5,000/\$10,000 Single/Family	
Pharmacy	\$0/10/50/100/150/250	\$0/10/50/100/150/250	\$10/40/125/300		\$5/15/75/150/1200	
In-Patient Co-pay	N/A	N/A	N/A		N/A	
Out-Patient Co-pay	N/A	N/A	N/A		N/A	
	Out Network	Out Network	Out Network		Out Network	
Deductible	\$3,000/\$9,000 Single/Family	\$3,000/\$9,000 Single/Family	\$5,000/\$15,000 Single/Family		\$6,000/\$12,000 Single/Family	
Coinsurance	60%/40%	60%/40%	50%/50%		50%/50%	
Out of Pocket	Unlimited	Unlimited	\$10,000/\$30,000 Single/Family		\$20,000/\$40,000 Single/Family	
Blue Cross Census Quote Total Monthly Premium (Including Dependents)						
	\$70,121.25	\$74,457.75	\$75,653.90	7.9%	\$85,466.41	21.9%
Monthly Rate:						
Employee	\$ 934.95	\$ 992.77	\$ 1,022.35	9.3%	\$ 1,325.91	41.8%
Employee & Spouse	\$ 1,869.90	\$ 1,985.54	\$ 2,044.70	9.3%	\$ 2,651.82	41.8%
Employee & Child	\$ 1,869.90	\$ 1,985.54	\$ 2,044.70	9.3%	\$ 2,651.82	41.8%
Employee & Family	\$ 2,804.85	\$ 2,978.31	\$ 3,067.05	9.3%	\$ 3,977.72	41.8%

Current Allocation: **Texas Association of Counties

Employee:

Port 95%	\$	888.20	\$	943.13	\$	971.23	\$	1,259.61
Employee 5%	\$	46.75	\$	49.64	\$	51.12	\$	66.30

Dependent:

Employee & Spouse or Children								
Port 82.5%	\$	1,659.54	\$	1,762.17	\$	1,814.67	\$	2,353.49
Employee 17.5%	\$	210.36	\$	223.37	\$	230.03	\$	298.33
Employee & Family								
Port 82.5%	\$	2,430.87	\$	2,581.20	\$	2,658.11	\$	3,447.35
Employee 17.5%	\$	373.98	\$	397.11	\$	408.94	\$	530.37

Port Freeport Dental and Vision Renewal for 2022

[illegible]

Current Allocation:

Employee:

Port 100%	\$ 32.31	\$ 32.03	\$ 34.44	\$ 39.39	\$ 39.40	\$ 43.28
Employee 0%	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Dependent:

Employee & Spouse										
Port 70%	\$	54.54	\$	54.07	\$	58.14	\$	66.75	\$	65.17
Employee 30%	\$	9.53	\$	9.44	\$	10.15	\$	11.73	\$	11.05
Employee & Children										
Port 70%	\$	66.49	\$	65.64	\$	71.06	\$	71.83	\$	78.65
Employee 30%	\$	14.65	\$	14.41	\$	15.69	\$	13.90	\$	16.82
Employee & Family										
Port 70%	\$	93.19	\$	92.08	\$	99.49	\$	105.00	\$	110.89
Employee 30%	\$	26.09	\$	25.74	\$	27.88	\$	28.12	\$	30.64

Buy-Up Option with \$2000 Calendar Year Maximum

Monthly Rate:		
Employee	\$	36.32
Employee & Spouse	\$	72.01
Employee & Child	\$	94.83
Employee & Family	\$	138.04
Total Monthly Premium (Including Dependents)	\$	3,439.63 15%

PORT FREEPORT
Employee Benefits Enrollment
2022

Employee: _____

Effective Date: 01/01/22

MEDICAL PLAN

		95%/5% Emp	82.5% Port/17.5% Dep.				
		Employee	Dependent	Total	Port	Employee	Employee
		Monthly	Monthly	Monthly	Monthly	Monthly	Bi-weekly
		Premium	Premium	Premium	Premium	Premium	Premium
Coverage Options:							
1	Employee	\$ 992.77	\$ -	\$ 992.77	\$ 943.13	\$ 49.64	\$ 22.91
2	Employee + Spouse	992.77	992.77	1,985.54	1,762.17	223.37	103.09
3	Employee + Children	992.77	992.77	1,985.54	1,762.17	223.37	103.09
4	Employee + Family	992.77	1,985.54	2,978.31	2,581.20	397.11	183.28

Election:

Medical _____ (Write Coverage Option No.)

DENTAL AND VISION PLAN \$1,500 annual maximum per person

		100%	70% Port/30% Dep.				
		Employee	Dependent	Total	Port	Employee	Employee
		Monthly	Monthly	Monthly	Monthly	Monthly	Bi-weekly
		Premium	Premium	Premium	Premium	Premium	Premium
Coverage Options:							
1	Employee	\$ 32.03	\$ -	\$ 32.03	\$ 32.03	\$ -	\$ -
2	Employee + Spouse	32.03	31.48	63.51	54.07	9.44	4.36
3	Employee + Children	32.03	48.02	80.05	65.64	14.41	6.65
4	Employee + Family	32.03	85.79	117.82	92.08	25.74	11.88

Election:

Dental _____ (Write Coverage Option No.)

DENTAL AND VISION PLAN \$2,000 annual maximum per person- BUY UP OPTION

		Employee	Dependent	Total	Port	Employee	Employee
		Monthly	Monthly	Monthly	Monthly	Monthly	Bi-weekly
		Premium	Premium	Premium	Premium	Premium	Premium
Coverage Options:							
1	Employee	\$ 36.32	\$ -	\$ 36.32	\$ 32.03	\$ 4.29	\$ 1.98
2	Employee + Spouse	36.32	35.69	72.01	54.07	17.94	8.28
3	Employee + Children	36.32	58.51	94.83	65.64	29.19	13.47
4	Employee + Family	36.32	101.72	138.04	92.08	45.96	21.21

Election:

Dental _____ (Write Coverage Option No.)

I hereby authorize Port Freeport to withhold from my payroll check bi-weekly for the Employee Benefits.

If for some reason, my payroll check does not cover these premiums, I understand that I will owe Port Freeport these premiums and will make payment arrangements.

Employee Signature