

**WEBB COUNTY
RETIREE EMPLOYEE BENEFITS POLICY**

Purpose:

To establish an employee benefit policy for Webb County employees who are eligible for retirement as per the guidelines of this policy.

I. Eligibility

Current employees who meet one of the following criteria are eligible to participate in this retirement employee benefit program:

1. Must not have already retired from Webb County, employment nor have already been enrolled or received benefits under this plan; or
2. Must be covered as an active employee under the County's employee benefit plan at the time of retirement; or
3. The employee must meet one of the following additional criteria:
 - a. Age 60 plus 8 years of Webb County employment, or
 - b. Twenty (20) years of employment with Webb County.

II. Coverage Period

1. The retiree employee benefit program will offer coverage to its eligible retirees, as defined above.
2. Coverage will not exceed 5 years pre-Medicare for retirees younger than sixty (60) years of age Retires sixty (60) years of age and older shall be eligible for coverage until they reach the age of sixty-five (65), and shall also be eligible for the Medicare supplement at age Sixty-five (65).

III. Coverage Payments

1. Payment of monthly cost of coverage shall be made through auto debit to the Retiree's bank account.
2. Failure of any retiree to make timely payments to the County of any required contribution shall act as a termination of the participation in this program.

3. All retirees are required to make their contributions monthly, on or before the first day of each month, and no later than the 10th of each month, via auto debit.

IV. County Payments

1. The County shall contribute 57% of expected monthly cost to fund the retiree program. Eligible retirees shall contribute 43% of the expected cost subject to annual adjustments. Webb County's employee benefit plan will be the retiree's primary coverage until the retiree attains the age of sixty-five (65). Once the retiree is Medicare eligible, Medicare will become the primary insurance for the retiree and coverage under the County's health care program will cease.
2. Eligible retiree dependents shall contribute 100% of the maximum cost of the coverage.
3. **Supplemental Health Insurance-** Upon the retiree becoming Medicare eligible, the County will offer the retiree supplemental health care insurance if the retiree has enrolled in Medicare A and B. The County will pay one hundred dollars (\$100.00) toward the cost of the supplemental insurance and the retiree shall pay the balance of the cost of the supplemental insurance.
4. The retiree shall pay one hundred percent (100%) of the cost of the supplemental insurance for each of the retiree's dependent's coverage under the supplemental insurance.

V. Employee Coverage

The type of coverage available to retirees is based on the eligible employee's status at the time of retirement. The retiree will be classified as either:

Medicare eligible- Medicare will be the primary health insurance if the retiree qualifies Medicare Part A and B, County shall offer Supplemental health insurance benefits as set out above.

Pre-Medicare eligible- County shall make no payments under age sixty-five (65), and the County Health Insurance is the primary Health Coverage.

VI. Enrollment

1. A county employee, who is eligible for Retiree Health Benefits, must enroll in the Retiree Health Insurance Program within thirty

(30) days of his/her retirement from County service. Failure of the employee to enroll within the thirty day enrollment period as specified herein, shall be deemed a refusal or waiver by the employee to participate in the program or receive benefits there under.

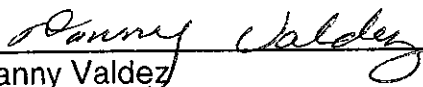
VII. Reservation of Rights

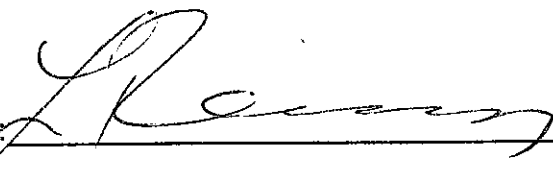
1. Subject to available funding, Webb County reserves the right, at any time, to change, delete, or add any benefits and/or policies which have been adopted previously while at the same time being in compliance with 175 of the local Government Code, State of Texas.
2. This plan shall be in force and effective December 9th, 2013, upon approval by the Webb County Commissioners Court and will be applied to all employees who are employed by Webb County as of December 1st, 2013.


ADOPTED this ____ day of _____, 2014.

AMENDED this 12th day of _____, 2014.

WEBB COUNTY COMMISSIONERS COURT

BY: 
Danny Valdez
Webb County Judge

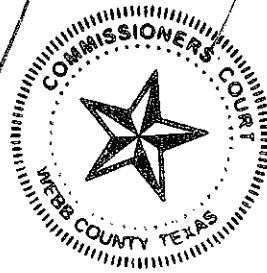
BY: 
Commissioner Precinct I

BY: 
Rosaura "Wawi" Tijerina
Commissioner Precinct II

BY: [Signature]
John C. Galo
Commissioner Precinct III

BY: [Signature]
Jamie A. Canales
Commissioner Precinct IV

[Signature]
Margie Ramirez Ibarra
Webb County Clerk



APPROVED AS TO FORM:

[Signature]
Marco A. Montemayor
Webb County Attorney

*By law, the county attorney's office may only advise or approve contracts or legal documents on behalf of its clients. It may not advise or approve a contract or legal document on behalf of other parties. Our review of this document was conducted solely from the legal perspective of our client. Our approval of this document was offered solely for the benefit of our client. Other parties should not rely on this approval, and should seek review and approval of their own respective attorney(s).

I, Margie Ramirez Ibarra, County Clerk, Webb County, do hereby certify that this is a true and correct copy, as the same appears of record in my office,
Witness my hand and seal of office on

MAY 29 2014

Margie Ramirez Ibarra
Webb County Clerk
[Signature]
County Clerk