

## ITEM 13



# Travis County Commissioners Court Agenda Request

**Meeting Date:** Tuesday, January 15, 2013

**Prepared By/Phone Number:** C.W. Bruner (854-9760)

**Elected/Appointed Official/Dept. Head:** Cyd Grimes

**Commissioners Court Sponsor:** Judge Biscoe

**Agenda Language:** Approve Modification No. 17 to Contract No. 4400001215 (HTE Contract No. 02T00005OJ), United HealthCare Services, Inc., to extend the grace period for the Travis County Employee Benefit Plan for Group Health Benefits to allow for current employee premium deductions.

- **Purchasing Recommendation and Comments:** Purchasing concurs with department and recommends approval of requested action. This procurement action meets compliance requirements as outlined by the statutes.

This contract provides the group health benefit plans to Travis County employees, retirees and their dependents. The Commissioners Court approved the contract for Group Health Benefits on September 25, 2001.

This modification No. 17 will amend the contract to extend the grace period to sixty (60) days as opposed to the current thirty-one (31) day grace period. With the County change to current employee premium deductions, the UnitedHealth Care - Vision contract needs to be modified to ensure premium payments are made according to the policy provisions. An extension to the policy grace period is necessary to accommodate this change.

- **Contract Modification Information:**

Modification Amount: Not Applicable

Modification Type: Bilateral

Modification Period: October 1, 2011 – September 30, 2013

- **Funding Information:**

- Shopping Cart/Funds Reservation in SAP: Not Applicable

AGENDA REQUEST DEADLINE: All agenda requests and supporting materials must be submitted as a pdf to Cheryl Aker in the County Judge's office, [Cheryl.Aker@co.travis.tx.us](mailto:Cheryl.Aker@co.travis.tx.us) by Tuesdays at 5:00 p.m. for the next week's meeting.



# HRMD

## Human Resources Management

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700 Lavaca Street, Suite 420 • P.O. Box 1748 • Austin, Texas 78767 • (512) 854-9165 / FAX(512) 854-6677

**DATE:** December 4, 2012

**TO:** C.W. Bruner, Purchasing Agent Assistant

**FROM:** John Rabb, Benefits Manager  
Shannon Steele, Benefits Administrator  
Cindy Purinton, Benefits Administrator (transition)

**Subject: Contract Modification Request  
H.T.E. Contract # 02T00005OJ (SAP # 4400000006)  
UnitedHealth Care - Vision**

### **Proposed Motion**

Consider and take appropriate action to modify contract for UnitedHealth Care - Vision for the Travis County Employee Benefit Plan to extend grace period to sixty (60) days.

### **Summary**

With the County change to current employee premium deductions, the UnitedHealth Care - Vision contract needs to be modified to ensure premium payments are made according to the policy provisions. An extension to the policy grace period is necessary to accommodate this change.

### **Staff Recommendation:**

HRMD is in agreement with needed contract modification to extend contract grace period to sixty (60) days as opposed to current thirty-one (31) day grace period.

If you have any questions, please contact John Rabb at 854-2742 or Shannon Steele at 854-6046.

**MODIFICATION OF CONTRACT NUMBER: 02T000050J, Administrative Services** PAGE 1 OF 2 PAGES  
**(SAP # 4400001215)**

ISSUED BY:  PURCHASING OFFICE 700 LAVACA STREET, 8 <sup>TH</sup> FLOOR AUSTIN, TX 78701	PURCHASING AGENT ASST:  CW Bruner TEL. NO: (512) 854-9760 FAX NO: (512) 854-4211	DATE PREPARED:  <b>January 7, 2013</b>
ISSUED TO: <b>United HealthCare Services, Inc.</b> <b>Attn: Frank Sievel</b> <b>185 Asylum Street</b> <b>Hartford, Connecticut 06103-3408</b>	MODIFICATION NO.:  <b>17</b>	EXECUTED DATE OF ORIGINAL CONTRACT:  <b>September 18, 2001</b>

ORIGINAL CONTRACT TERM DATES: October 1, 2001-October 1-2002 CURRENT CONTRACT TERM DATES: October 1, 2012-September 30, 2013

**FOR TRAVIS COUNTY INTERNAL USE ONLY:** Original Contract Amount: \$ N/A Current Modified Amount \$ N/A

**DESCRIPTION OF CHANGES:** Except as provided herein, all terms, conditions, and provisions of the document referenced above as heretofore modified, remain unchanged and in full force and effect.

This modification number seventeen to the Administrative Services Agreement is made by the following parties:

United HealthCare Services, Inc., formerly known as United HealthCare Insurance Company, a Texas corporation (“Our”, “Us”, and “We” in this Amendment) and Travis County, Texas (“You” or “Your” in this Amendment”).

**RECITALS**

You and We entered into a contract for administrative services for group employee benefits, such as self-funded health coverage for county employees, retirees, and their dependents that began October 1, 2001. As part of the Administrative Services Agreement, effective October 1, 2004 We offered vision care benefits through a group policy which We issued as Policy Number 701254.

**AGREEMENT TO ADD RIDER TO POLICY**

We agree to have UnitedHealthcare Insurance Company provide a rider to the Group Vision Care Insurance Policy effective January 1, 2013 that provides for the following changes to the policy:

**Note to Vendor:**  
 Complete and execute (sign) your portion of the signature block section below for all copies and return all signed copies to Travis County.  
 DO NOT execute and return to Travis County. Retain for your records.

LEGAL BUSINESS NAME: <b>United HealthCare Services, Inc.</b>	<input type="checkbox"/> DBA
BY: _____ SIGNATURE	<input type="checkbox"/> CORPORATION
BY: _____ PRINT NAME	<input type="checkbox"/> OTHER
TITLE: _____ ITS DULY AUTHORIZED AGENT	DATE: _____

TRAVIS COUNTY, TEXAS	DATE: _____
BY: _____ CYD V. GRIMES, C.P.M., TRAVIS COUNTY PURCHASING AGENT	

TRAVIS COUNTY, TEXAS	DATE: _____
BY: _____ SAMUEL T. BISCOE, TRAVIS COUNTY JUDGE	

- 1.0 Delete the following paragraph:

**Grace Period**

We will allow the Enrolling Group a Grace Period of 31 days for any Premium due after the first Premium.

During the Grace Period, the coverage will remain in effect provided the full premium is paid before the end of the Grace Period. Should a premium otherwise due, not be paid during the Grace Period, the Policy will terminate without further notice as of 12:00 midnight on the last day for which premiums were paid.

- 2.0 Insert the following paragraph in its place:

**Grace Period**

We will allow the Enrolling Group a Grace Period of 60 days for any Premium due after the first Premium.

During the Grace Period, the coverage will remain in effect provided the full premium is paid before the end of the Grace Period. Should a premium otherwise due, not be paid during the Grace Period, the Policy will terminate without further notice as of 12:00 midnight on the last day for which premiums were paid.

- 3.0 EFFECTIVE DATE

3.1 The changes stated in this amendment are effective January 1, 2013.