

FCR 2012- IX

AMENDMENT TO FCR 1997-XI, A PLAN FOR REIMBURSING EMPLOYEES FOR CERTAIN UNINSURED MEDICAL EXPENSES

WHEREAS, the Board of Commissioners of the County of Floyd is desirous of increasing the reimbursement to the insured employee, spouse and dependents of the amount of the incurred deductible in excess of \$100.00; and

WHEREAS, at its regular meeting held on 9th day of December, 1997 the Floyd County Council was advised as to the basic parameters of the medical insurance program, and evidenced its agreement to the limited self-insurance provisions; and

WHEREAS, the Board of Commissioners, by this resolution, intends to establish the conditions under which employees shall be reimbursed for certain incurred medical expenses.

NOW THEREFORE:

BE IT RESOLVED, that commencing with the calendar year, beginning on the 1st day of January, 2013, and ending on the 31st day of December, 2013 those employees (including officials and eligible retired employees), spouses, and dependents who are, from time to time, insured under the Humana Group Insurance Policy, shall be entitled to reimbursement for a portion of the deductible incurred as follows:

(1) REIMBURSEMENT OF DEDUCTIBLE: Financial reimbursement under this plan shall be limited to allowable medical expenses which are adjudicated under the Humana Group Insurance Policy as being creditable toward an insured's deductible, and which exceed \$100.00 for an employee and their spouse and dependents. Incurred costs for procedures, treatment, or expenses not covered by the Humana Group Insurance Policy or which are defined thereby as being "co-payments" shall not be eligible for reimbursement.

(2) MAXIMUM REIMBURSEMENT: The maximum reimbursement for an insured employee shall be \$650.00; employee and spouse or employee with dependents shall be \$1300.00.

(3) RATE OF REIMBURSEMENT: Allowable medical expenses exceeding the applicable amount set forth in (1), above, shall be reimbursed until the maximum reimbursement provided in (2), above has been paid.

(4) REIMBURSEMENT PROCEDURE: A claim for reimbursement shall be submitted on forms provided by the Floyd County Auditor and shall be supported by one or more Explanation of Benefits Statements issued by Humana disclosing the amount of the deductible incurred for which a claim is being made. A claim on behalf of a spouse or insured dependent shall be submitted by and paid to the employee.

BE IT FURTHER RESOLVED, that this resolution and the reimbursement plan established hereby shall remain in full force and effect until modified or terminated by further resolution of the Board of Commissioners of the County of Floyd.

SO RESOLVED, this 11th day of November, 2012

BOARD OF COMMISSIONERS
OF THE COUNTY OF FLOYD


MEMBER


MEMBER


MEMBER

ATTEST:

Floyd County Auditor