



EMPLOYER APPLICATION (True Group Application)

Group # (BCBSF): 30749 (HMO): 30749J

I. Applicant Information: Name of Group: NASSAU COUNTY BOCC, Nature of Business: Executive offices, Mailing Address: 96161 Nassau Place Yulee, FL 32097

B. Applicant hereby applies for issuance of a Group Policy... C. Prior Health Carrier: Insurance (HMO) D. The Policy excludes expenses for any service or supply to diagnose or treat any Condition...

II. Effective Date / Eligibility Information: A. Effective Date of this Policy shall be 01/01/2000... B. Only active eligible employees who regularly work a minimum of 20 hours each week... G. Employer Contribution Employee 100% Dependents 50%

III. Health Plan Summary Information (select the appropriate box(es)): Mandated Benefit Offerings: (Optional) Applicant has been advised of the following benefit offerings mandated by the Federal and/or State Law

Table with columns: Divisions, Health Benefits, Individual, Family, Hospital Per Admission Deductible, Coinsurance, Participating, Non-Participating. Includes rates for Employee Only, Employee/Spouse, Employee/Child(ren), Family, Other.

Table with columns: Divisions, Health Benefits, Pre-Existing, Pre-Existing Applies. Includes rates for Employee Only, Employee/Spouse, Employee/Child(ren), Family, Other.

IV. Rate Information: A. Premiums/Prepayment fee are payable monthly on or before the due date which will be: 1st B. Regular Billing: Employee applications should be submitted thirty (30) days prior to proposed Effective Date.

V. Applicant Responsibilities: A. The applicant shall: 1) Notify each enrollee to the benefits selected by the applicant, their Effective Date, and the termination date of coverage... B. Applicant hereby establishes an Employee Welfare Benefit Plan...

VI. Final Premiums, Benefits and Effective Dates are Subject to Approval by BCBSF Corporate Headquarters

11-10-04 Date Signature of Applicant: Floyd Vanzant, Chairman J. M. "Chip" Oxley, Jr., Ex-Officio Clerk 12-3-04 Date Signature of Agent: Jim Kelly Agent License ID#

2004 DEC 10 PM 12:22 DEPT OF HUMAN RESOURCES

BLUE CROSS/BLUE SHIELD CONTRACT
EMPLOYEE HEALTH INSURANCE

ATTEST:



J.M. "CHIP" OXLEY, JR.
EX-OFFICIO CLERK

APPROVED AS TO FORM BY THE
NASSAU COUNTY ATTORNEY



MICHAEL S. MULLIN

a tentative match for the interoperability grant due to the fact that the grant was not awarded to Nassau County Fire/Rescue.

Upon the request and recommendation of the Human Resources Director, it was moved by Commissioner Samus, seconded by Commissioner Marshall, and unanimously carried to approve and authorize the Chairman to sign the following:

- Acceptance of the two new Health Coverage Plans, Plan 16 (HMO) and Plan 717 (PPO) for Nassau County employees effective October 1, 2004.
- Approval for the Chairman to sign an amendment to the Fortis contract for employee Group Dental Insurance, changing the anniversary date from January 1 to October 1 of each year.

Upon the request and recommendation of the Library Services Director, it was moved by Commissioner Samus, seconded by Commissioner Deonas, and unanimously carried to approve and authorize the Chairman to sign the State Aid Grant Application and the Nassau County Public Library System Annual Plan of Service for 2004-2005, and to approve the Library Holiday Schedule closing the Fernandina Beach, Callahan, and Bryceville Libraries on Saturday, November 27, 2004 and Saturday, December 25, 2004 due to the Thanksgiving and Christmas holidays.