2026-11-16 Special Meeting of the Truckee Surgery Center Board of Managers

Monday, November 16, 2026 at 9:00am

Tahoe Forest Hospital - Aspen Conference Room

10800 Donner Pass Rd., Suite 200, Truckee, CA 96161

2026-11-16 Special Meeting of the Truckee Surgery Center Board of Managers

Agenda Packet Contents

AGENDA

11.16.2026 Special Meeting Truckee Surgery Center Board_ Agenda FINAL 3

ITEMS 1 - 4 See Agenda

5. ITEMS FOR BOARD DISCUSSION AND ACTION

5.1. Employee Health Benefits Proposal

Employee Health Benefit Proposal 4

6. ADJOURN

TRUCKEE SURGERY CENTER
SPECIAL MEETING OF THE
BOARD OF MANAGERS
AGENDA

Monday, November 16, 2026, at 9:00am
Aspen Conference Room – Tahoe Forest Hospital
10800 Donner Pass Rd., Suite 200, Truckee, CA 96161

1. **CALL TO ORDER**

2. **ROLL CALL**

3. **CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA**

4. **INPUT – AUDIENCE**
   This is an opportunity for members of the public to address the Board on items which are not on the agenda. Please state your name for the record. Comments are limited to three minutes. Written comments should be submitted to the Board Clerk 24 hours prior to the meeting to allow for distribution. Under Government Code Section 54954.2 – Brown Act, the Board cannot take action on any item not on the agenda. The Board may choose to acknowledge the comment or, where appropriate, briefly answer a question, refer the matter to staff, or set the item for discussion at a future meeting.

5. **ITEMS FOR BOARD DISCUSSION AND ACTION**
   - **5.1. Review and Consider Approval of Employee Health Benefits Proposal ◈** ATTACHMENT
     The Truckee Surgery Center Board of Managers will review proposed employee benefits package renewal for plan year 2027 and authorize the Truckee Surgery Center Administrator to execute agreements with benefit providers.

6. **ADJOURNMENT**

◈Denotes an action item.
^Denotes material (or a portion thereof) may be distributed later.

A copy of the board meeting agenda is posted on Tahoe Forest Hospital District's web site (www.tfhd.com) at least 72 hours prior to the meeting or 24 hours prior to a Special Board Meeting. Materials related to an item on this Agenda submitted to the Board of Managers, or a majority of the Board, after distribution of the agenda are available for public inspection in the District's Administration Office, 10800 Donner Pass Rd., Suite 200, Truckee, CA 96161, during normal business hours.
Note: It is the policy of Tahoe Forest Hospital District to not discriminate in admissions, provisions of services, hiring, training and employment practices on the basis of color, national origin, sex, religion, age or disability including AIDS and related conditions.

Equal Opportunity Employer. The meeting location is accessible to people with disabilities. Every reasonable effort will be made to accommodate participation of the disabled in all of the District's public meetings. If particular accommodations for the disabled are needed (i.e., disability-related aids or other services), please contact the Executive Assistant at 582-3481 at least 24 hours in advance of the meeting.

TRUCKEE SURGERY CENTER

Agenda Item Cover Sheet

Item: 2027 Employee Health Benefit Proposal

Background: Our current Blue Shield plan will be increasing by 13.85%, raising the cost from $21,695 to $24,700 per month (an increase of $3,005 per month).

Alternatively, Anthem offers a similar plan for $22,675 per month, which would limit our increase to $980 per month.

Objective/suggested motion: Change the employee benefit plan to Anthem.

Attachment: Group Medical Proposal

Group Medical Proposal

Prepared For	Effective Date	Zip (County)
Truckee Surgery Center 2027 by InterWest Insurance Services on October 20, 2026	January 01, 2027	96161 (Nevada)

Current/Renewal

	Current		Renewal	
Summary Benefits	**In-Network**	**Out-Network**	**In-Network**	**Out-Network**
Carrier	Blue Shield		Blue Shield	
Plan	Platinum Full PPO 0/0 OffEx		Platinum Full PPO 0/0 OffEx	
Deductible	$0	$1,000	$0	$1,000
Co-Insurance	10%	40%	10%	40%
PC/Specialist	$0/$45	40% after ded	$0/$55	40% after ded
Inpatient Hospital	10%	40% after ded; $2,000 benefit max/day	10%	40% after ded; $2,000 benefit max/day
Individual OOP Limit	$5,000	$10,000 (incl ded)	$5,000	$10,000 (incl ded)
Family OOP Limit	$10,000	$20,000 (incl ded)	$10,000	$20,000 (incl ded)
Urgent Care	No charge	40% after ded	No charge	40% after ded
Rx Tier 1	$5/$10	Not covered	$5/$10	Not covered
Rx Tier 2	$35/$50	Not covered	$35/$50	Not covered
Rx Tier 3	$55/$75	Not covered	$55/$75	Not covered

Rates			Current Premiums			Renewal Premiums		
Employee	**Age**	**Coverage**	**EE**	**Dep**	**Total**	**EE**	**Dep**	**Total**
[redacted]	59	Employee	$1,947.42	$0.00	$1,947.42	$2,231.69	$0.00	$2,231.69
[redacted]	35	Employee/Spouse	$927.85	$946.20	$1,874.05	$1,047.68	$1,068.26	$2,115.94
[redacted]	38	Family	$946.20	$2,858.45	$3,804.65	$1,068.26	$3,257.93	$4,326.19
[redacted]	35	Employee/Spouse	$927.85	$867.47	$1,795.32	$1,047.68	$993.67	$2,041.35
[redacted]	41	Family	$976.77	$2,234.03	$3,210.80	$1,116.27	$2,555.76	$3,672.03
[redacted]	40	Family	$964.54	$1,579.79	$2,544.33	$1,095.70	$1,791.86	$2,887.56
[redacted]	41	Family	$976.77	$1,530.88	$2,507.65	$1,116.27	$1,724.13	$2,840.40
[redacted]	26	Employee	$767.35	$0.00	$767.35	$877.93	$0.00	$877.93
[redacted]	44	Family	$1,037.15	$2,206.51	$3,243.66	$1,197.72	$2,509.46	$3,707.18
Total Monthly Premium			$9,471.90	$12,223.33	$21,695.23	$10,799.20	$13,901.07	$24,700.27
Monthly Change ($)						$1,327.30	$1,677.74	$3,005.04
Monthly Change (%)						14.01%	13.73%	13.85%

Use of this site constitutes acceptance of HealthConnect's Terms of service and Privacy Policy. The rates and benefits displayed within are for discussion and estimation purposes only and is not a substitute for an insurance quote prepared by an insurance carrier. Final benefits and rates must be based on insurance carrier confirmation and final enrollment.

Group Medical Proposal

Prepared For	Effective Date	Zip (County)
Truckee Surgery Center 2027 by InterWest Insurance Services on October 20, 2026	January 01, 2027	96161 (Nevada)

Employee Rate Side by Side

	Anthem Blue Cross PPO Platinum PPO 5/200/15% 1GKJ Broad Network	Blue Shield PPO Platinum Full PPO 0/0 OffEx Broad Network		
Deductible In Net Out Net	$200 $2,000	$0 $1,000		
PC/Specialist In Net Out Net	$5/$45 ded waived 50% after ded	$0/$55 40% after ded		
Co-Insurance In Net Out Net	15% 50%	10% 40%		
OOP Limit In Net Out Net	$4,000 (incl ded) $8,000 (incl ded)	$5,000 $10,000 (incl ded)		
Inpatient Hospital In Net Out Net	15% after ded 50% after ded; $650 benefit max/day	10% 40% after ded; $2,000 benefit max/day		
Urgent Care In Net Out Net	$5 ded waived 50% after ded	No charge 40% after ded		
Rx Tier 1 In Net Out Net	$5/$15 ded waived Not covered	$5/$10 Not covered		
Rx Tier 2 In Net Out Net	$30/$40 ded waived Not covered	$35/$50 Not covered		
Rx Tier 3 In Net Out Net	$50/$60 ded waived Not covered	$55/$75 Not covered		
Lab/X-Ray In Net Out Net	Lab-No charge (FS)/$10 ded waived (Office)/15% after ded (OP Hosp); X-ray-15% after ded (FS & OP Hosp)/$10 ded waived (Office) 50% after ded	L-$20/15%; X-$30/$100 (FS/Hospital) 40% after ded; $350 benefit max/day Hospital		

	EE/Dep/Total	EE/Dep/Total		
[redacted] EE 59	$2,048.74 / $0.00 / $2,048.74	$2,231.69 / $0.00 / $2,231.69		
[redacted] EE/SP 35	$961.80 / $980.69 / $1,942.49	$1,047.68/$1,068.26/$2,115.94		
[redacted] FAM 38	$980.69 / $2,990.86 / $3,971.55	$1,068.26/$3,257.93/$4,326.19		
[redacted] EE/SP 35	$961.80 / $912.21 / $1,874.01	$1,047.68 / $993.67 / $2,041.35		
[redacted] FAM 41	$1,024.77/$2,346.25/$3,371.02	$1,116.27/$2,555.76/$3,672.03		
[redacted] FAM 40	$1,005.88/$1,644.98/$2,650.86	$1,095.70/$1,791.86/$2,887.56		
[redacted] FAM 41	$1,024.77/$1,582.80/$2,607.57	$1,116.27/$1,724.13/$2,840.40		
[redacted] EE 26	$805.96 / $0.00 / $805.96	$877.93 / $0.00 / $877.93		
[redacted] FAM 44	$1,099.54/$2,303.76/$3,403.30	$1,197.72/$2,509.46/$3,707.18		
EE's Included	**9/9**	**9/9**		
EE Cost	**$9,913.95**	**$10,799.20**		
Dep Cost	**$12,761.55**	**$13,901.07**		
Total	**$22,675.50**	**$24,700.27**		

Use of this site constitutes acceptance of HealthConnect's Terms of service and Privacy Policy. The rates and benefits displayed within are for discussion and estimation purposes only and is not a substitute for an insurance quote prepared by an insurance carrier. Final benefits and rates must be based on insurance carrier confirmation and final enrollment.