



BELLVILLE INDEPENDENT SCHOOL DISTRICT

Meeting of the BISD Board of Trustees

August 25, 2025

Subject:	Consider Approval of Workers Compensation 5 Year Interlocal Addendum
Presenter:	Dennis Jurek
Board Policy:	
BISD Goal:	<ol style="list-style-type: none">1. Develop and attain local standards for high levels of integrated learning and performance. [LEARNING]2. Foster a connected, collaborative, and strategic approach to continuous improvement for the district. [LEADERSHIP]3. Create a culture that attracts, develops, and retains exceptional individuals to be part of our district and community. [HUMAN CAPITAL]4. Cultivate connections in our schools and community to ensure all feel safe, valued, and engaged in meaningful ways. [COMMUNITY]
Summary:	<p>Workers Compensation Insurance is being provided by Workers Compensation Solutions (WCS) through an Interlocal Agreement, fulfilling our purchasing requirements under Texas Education Code, Chapter 44, Subchapter B, Section 44.031.</p> <p>WCS is a partially self-funded program. BISD pays for fixed cost up front for administrative, district services, excess insurance, and student/staff programs. The remaining Maximum Loss Fund is Bellville ISD's potential maximum loss if claims are incurred during the program year before the WCS pool takes over the claim(s) cost. The self-funded portion of the insurance allows BISD to retain those funds if no claims are filed as opposed to a fully funded insurance where the costs are all up front.</p> <p>WCS's 5 Year Renewal offers Bellville ISD with the best savings and rate lock guarantee. The estimated 1st year renewal savings are \$14,007.05, and a rate lock guarantee for the next five years.</p>
Attachments:	<ul style="list-style-type: none">▪ Workers Compensation Proposal
Recommendation:	Motion to approve the Workers Compensation Solutions 5 year proposal.

BELLVILLE BRAHMAS
LEARNERS TODAY. LEADERS TOMORROW.

Bellville ISD

Current Rate Guarantee: 5 Years (2025 - 2030)*


Effective Date: 9.1.2025

Current Payrolls

7380 – Bus Drivers	\$	552,828.43
8810 – Clerical	\$	409,056.60
8868 – Professional	\$	15,497,755.91
9101 – Other	\$	1,566,217.75
Total:	\$	18,025,858.69

Member Benefits

A+ Rated Specific Excess Insurance	Medical Bill Reviews
Texas-Based Claims Administrator	Bi-Lingual Claims Adjusters
On-Site Loss Prevention Services	Personal Protective Equipment
Safety Incentives	Wellness Program

Coverage Provider	Funding Summary	Current Program	New 5 Year*
	Fixed Benefits Cost	\$ 59,257.72	\$ 54,113.04
	Claims Deposit (10% of MLF)	\$ 8,817.31	\$ 7,931.07
	9.1.2025 Initial Contribution	\$ 68,075.03	\$ 62,044.11
	Year 1 Savings		\$ 14,007.05
	Total Savings		\$ 70,035.25
	<i>Maximum Loss Fund (MLF)</i>	\$ 88,173.08	\$ 79,310.71

* Subject to acceptance of the attached 5 year Addendum



5 Year Interlocal Addendum

Normal Premium Fixed Cost Rate: 14.41%

Normal Premium Maximum Loss Fund Rate: 21.12%

1. The Workers' Compensation Solutions Program (WCS) hereby agrees to provide Bellville ISD the Fixed Cost and Maximum Loss Fund rates for 2025-26, 2026-27, 2027-28, 2028-29 and 2029-30.
2. If the District provides notice of cancellation prior to the end of this five-year agreement, a short-term cancellation contribution of 20% of Fixed Cost for each year will be charged and payable within 30 days after notice is received.
3. The initial contribution payment is due by the effective date of this coverage, September 1, 2025, and will include the Fixed Cost for 2025-26, plus 10% of the District's estimated Maximum Loss Fund for 2025-26.
4. The District agrees to abide by the WCS Definitions and Guidelines as approved by the WCS Board of Directors.
5. This Addendum is subject to annual appropriations by the District. This Addendum may be terminated by the District on any successive renewal date by giving written notice no later than sixty (60) days prior to the renewal date. If the District terminates for any reason prior to the end of this Addendum, a short-term cancellation contribution as stated in #2 will apply.
6. This Addendum and the Original Interlocal Agreement, signed on June 12, 2006, shall represent the entire agreement and may not be amended or altered without the written consent of both parties.

IN WITNESS WHEREOF, the undersigned agrees to the Addendum to the Interlocal Agreement.
EXECUTED, _____, 2025 and effective as of September 1, 2025.

Bellville ISD

By: _____

Title: _____

WORKERS' COMPENSATION SOLUTIONS

By: _____
Chairperson, Workers' Compensation Solutions

Date: _____