

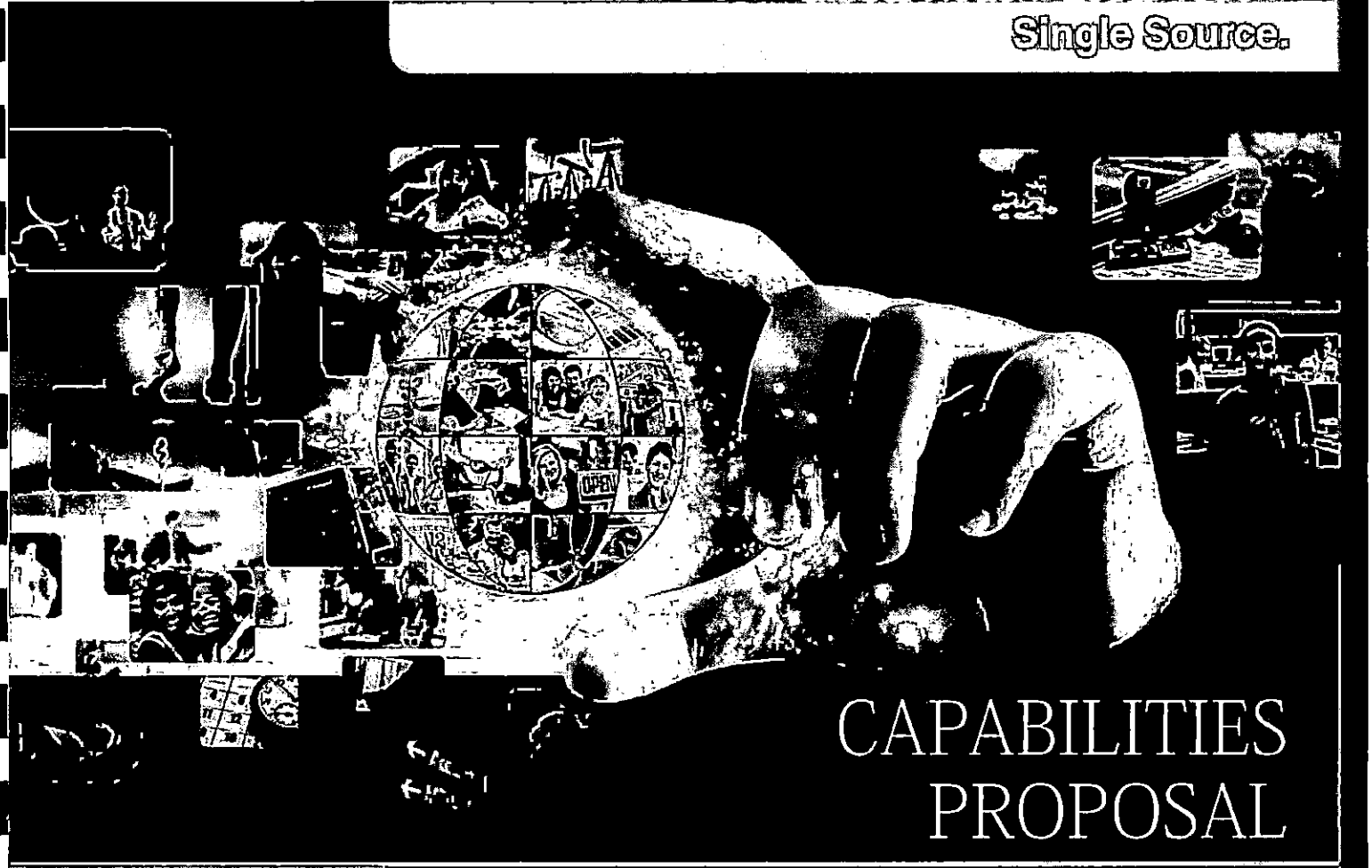
Business Insurance
Employee Benefits
Retirement Plans
Executive Benefits
Life Insurance
Home & Auto
Risk Management
Benefits Administration



HIGGINBOTHAM

1610 Shadywood Ln Mt
Pleasant, TX 75455
903-572-4366
www.higginbotham.net

Global Reach. Local Touch.
Single Source.



CAPABILITIES PROPOSAL

Original

Prepared For: Upshur County

Prepared By: Toni Melton
Executive Vice President
903-434-4783
tmelton@higginbotham.net

FILED
TERRI ROSS
COUNTY CLERK
2010 MAR 29 AM 11:13
UPSHUR COUNTY, TX.
DEPUTY

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Original

Company Information

1. Provide an overview statement of your company, its length in existence, number of employees, summary of annual revenue, its organizational structure, historical background, and philosophy.

Paul C. Higginbotham founded a personal insurance agency in his Fort Worth Riverside neighborhood in 1940. By 1943 with World War II raging, he was called to service and sold the agency. After returning from service, he started anew in 1948, operating the firm as a sole proprietorship from a single office in Fort Worth for four decades. Ownership changed in the early 1960s when Paul's nephew Bill Stroud purchased the firm, which he managed until 1989 when current President/CEO Rusty Reid assumed leadership and implemented a broad-based employee ownership structure that continues today.

At that time, Higginbotham also expanded its product and service offering to include a full array of insurance and financial service products for businesses and individuals. During the past 30 years, the firm's capabilities have been enhanced to meet the evolving service needs of its clients. Higginbotham now has global capabilities for the entire range of risk management and employee benefits consultation and administration.

Higginbotham employs more than 930 insurance and administrative professionals among its 25+ offices in Texas and Oklahoma City. Operations are directed by a group of roughly 70 managing directors representing all of the firm's departments and offices to help unify its best practices. This group, comprised of sales representatives with successful track records, meets monthly to gage progress and annually to strategize for the upcoming year.

Higginbotham is privately held with 542 beneficial stockholders, 414 of which are employees.

Higginbotham has grown every year since 1987, with revenue during the last five years shown below. With more than 34,500 independent insurance firms in the country, Higginbotham ranks among the largest. According to Business Insurance, Higginbotham was the 27th largest independent firm based on revenue from U.S. operations in 2016.

2013--\$109.0 million
2014--\$122.0 million
2015--\$132.1 million
2016--\$155.2 million
2017--\$170.0 million
2018 - \$186.0 million

Personnel work in teams consisting of brokers, marketers and customer service representatives who are grouped together by practice, industry experience and geographic location. With personnel providing account services for consecutive policy terms, we become familiar with clients' operations, and likewise, clients become familiar with their service representatives. This team approach enables the free flow of ideas and helps guarantee consistency and quality of service.

Higginbotham's corporate vision is to be the leading insurance brokerage firm in Texas, or what we call the "best in Texas." That is, we strive to be the best advocate for clients, the best company for employees, the best partner for carriers and the best value for employee shareholders.

Our efforts toward these ends have been consistently recognized. National Underwriter named Higginbotham "Agency of the Year" in its inaugural presentation. Texas Monthly ranked Higginbotham one of "Best Companies to Work for in Texas." The Central Texas Association of Fundraising named Higginbotham "Outstanding Volunteer Fundraiser." Several carriers have also given Higginbotham preferred designations in response to our high business volume, sound underwriter relationships and ethical practices.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/21/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Higginbotham Insurance Agency, Inc. 500 W. 13th Street Fort Worth TX 76102	CONTACT NAME: Janna Gonzalez, Certificate CSR	
	PHONE (A/C, No, Ext): 817-349-2384	FAX (A/C, No): 817-347-6981
E-MAIL ADDRESS: jgonzalez@higginbotham.net		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Aspen American Insurance Company		43460
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED HIGGI
 Higginbotham Insurance Agency, Inc. et al
 E & O
 500 W. 13th Street
 Fort Worth TX 76102

COVERAGES **CERTIFICATE NUMBER:** 1307467924 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Errors & Omissions Liability			ASP2262580319	3/25/2019	3/25/2020	\$10,000,000 \$10,000,000 \$100,000/\$300,000 Occurrence Aggregate Retention/Aggregat

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

For Information Purposes
 To Whom It May Concern
 Not to be altered

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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4. Describe your company's practice and involvement in each of the following areas:

Health and Welfare

Higginbotham employs health and wellness consultants who develop custom-designed health risk management programs that address five key initiatives:

Analyze culture—We perform an analysis of existing workforce needs and opportunities in order to maximize employee participation, behavioral change and return on investment. Our analysis considers cultural assumptions, demographics, existing benefits structure, communication strategies and programming

Engage management—We involve senior leadership so they demonstrate their support of the health program initiative by serving as role models and making it a part of the organization's overall business strategy.

Create awareness—We promote social, mental and physical health by raising awareness among employees, increasing knowledge of important health care issues and worksite risk factors and inspiring behavioral change. This is accomplished by: developing a program committee; branding the program; conducting a needs assessment; administering a risk assessment survey; offering preventive testing; and developing an incentive strategy.

Provide education—We personalize interactions, like online or telephone health coaching, to help boost program participation and improve the effectiveness of initiatives. Other motivational tools include emails, newsletters, seminars, worksite challenges and campaigns. Through sustained education, monitoring and coaching, employees can begin to make steps toward sustainable lifestyle changes.

Measure success—We set tangible goals and periodically analyze aggregated data to provide a powerful marketing tool and feedback on what is working and what needs attention. Baselines for outcomes measurement include medical claim costs, employee morale, participation rates, productivity and absenteeism.

Legal Counsel and Compliance

Higginbotham's in-house legal and compliance consultant helps clients interpret and comply with new and emerging rules under Health Care Reform legislation, ERISA, HIPAA, COBRA and many other relevant regulations. Not only do we pro actively communicate new legislation, regulations and upcoming deadlines, we respond to clients' compliance concerns and special circumstances.

We provide clients with a custom MyWavePortal® website for communicating compliance issues. MyWave is updated with Legislative Briefs developed by independent attorneys that contain concise summaries of federal legislative activity. The portal is also a hub for every imaginable resource you need to efficiently manage your human resource responsibilities. You have access to a searchable library of benefit plan materials like employee communications, benchmark statistics and consumer health newsletters as well as an interactive community of industry peers from across the country for questions and answers. We also help clients control risk and limit liability by reviewing their compliance in 20 key areas: loss control, human resources, employee benefits, workers' compensation experience modifier, workers' compensation claims review, risk transfer, replacement cost/building ordinance, business income, EEOC, employee manual, FLSA, FMLA, IRCA, records retention, sexual harassment, COBRA, HIPAA, policy provisions, Section 125, ERISA/SPD and OSHA.

Benchmarking

Higginbotham contracts with Zywave for insurance technology. Decision Master Warehouse (DMW) is a Zywave product that analyzes claims by turning detailed data into meaningful information used to aid decision making. A DMW Health Plan Management Report will be prepared for you based on historical claims data to provide benchmark comparisons that illustrate crucial comparative information. Zywave's benchmark data includes more than five million lives and is adjusted by age, gender, region and industry to match your population. The exhibits provide explanations about the data methodology and how to get more detail.

Actuarial and Underwriting

Higginbotham uses actuarial tools supported by Zywave for plan modeling and claims analysis. Decision Master Warehouse (DMW), a Zywave product, provides a sophisticated guide through your claims data. More than 70 graphic exhibits identify problems with medical utilization or plan cost by comparing your health plan information to national norms of similar employers. After problems are isolated, we experiment with plan design alternatives and determine how changes can lead to savings. DMW's plan modeling tool analyzes the impact of plan design changes based on proven actuarial factors for Medical, Rx, HRA and HSA plans. The renewal estimator calculates projected plan costs based on trend, midpoint and large claim information.

We also have retained the services of Merlinos & Associates, an independent actuarial firm in Peachtree Corner, GA, for independent audits when necessary.

Benefits Administration

Higginbotham utilizes technology resources provided by Zywave for back office administration. Standard workflows are built into the system to track tasks through completion. These workflows include every aspect of managing your policies, including reminders, required tasks, project assignment and tracking. The secure system is available 24/7 to your account manager and houses all policy information for immediate access by your entire service team. It not only empowers us to provide services after-hours, it also allows backup personnel to access your account information in the event your dedicated team members are away from the office.

Benefits Communication

Higginbotham's Employee Communications Department offers concept to completion management. From start to finish, we work with you to develop an employee communications strategy that helps your employees understand their benefit options. Higginbotham provides assistance with writing and designing any communication materials, which may include a combination of benefit booklets, overviews, newsletters, posters, payroll stuffers, enrollment forms, envelopes and more. For each client, we also develop a benefit booklet for enrollment at no additional charge (printing, fulfillment or art charges are billed at cost).



5. Describe your company's management ability in negotiating bids, policy terms and plan design to select the most appropriate insurance and benefits plan for your client.

We realize that every client has unique employee demographics and benefit plan objectives. As such, we take the time necessary to understand your goals through strategic planning meetings and data gathering before approaching the carrier marketplace. This due diligence helps ensure that we design the best plan for you and your employees and that plan documents deliver on your goals. Once we have a clear understanding of your objectives, we develop a strategic action plan that shows our initiatives for the next 3-5 years. This action plan serves as the framework that guides our tasks.

Higginbotham uses the PlanAdvisor automated tool by Zywave to perform predictive cost modeling to show you the impact of a plan design change before making any decisions. PlanAdvisor models potential plan designs and estimates renewal costs. Plus, we can use the data from PlanAdvisor to determine if your carrier is offering you a fair renewal quote.

6. Explain your company's value added approaches and services you feel distinguish this company from other companies.

Higginbotham's "Single Source" service model provides a significant value proposition that differentiates our firm. We offer nearly every insurance product available in the market. The firm represents more than 200 financially sound national and regional insurance carriers, giving our clients competitive options for all coverage lines. We also offer comprehensive insurance and financial services. So, there is no need for clients to engage multiple brokers and third-party administrators, thereby eliminating extraneous costs and maximizing efficiencies. Each service is performed in-house by professionals experienced in their respective practice area

Higginbotham calls this service model "DAY 2". "Day 2" is what happens after we are awarded your business! Some of these costs are included at no charge; others are based on the group revenue or fee for service. These services include:

Compliance/Legal Assistance - included

Communications - included

COBRA administration – set-up included/monthly PEPM

Flexible Spending Account Administration – Set-up included/ monthly PEPM

Health Reimbursement Administration – Set-up included

HR Services (fee based per task)

Health Risk Management (Wellness) - included

5500 Administration -included

Online Enrollment – Benefits In Hand - included

Employee Response Center – included if group has online enrollment tool –Benefits In Hand

ACA administration – Set-up included and available if group has Benefits in Hand online enrollment tool; PEPM fee for filing with IRS



7. Identify a minimum of three(3) other accounts similar in size and scope for which the company presently serves, and agrees to serve as reference to your company; provide contact information.

Titus County

Judge Brian Lee
100 W. First St
Mount Pleasant, TX 75455

Franklin County

Betty Sue Allen - Treasurer
200 N Kaufman St
Mount Vernon, TX 75457
903-537-8334

Custom Commodities Transportation

David Stevenson
408 N Trinity
Gilmer, TX 75644
903-843-2648

First Gilmer Bankshares

Danny Weems
206 US Hwy 271 N
Gilmer, TX 75644
903-843-4100

Staff Experience & Expertise

1. Name of Consultant/Broker submitting proposal, include contact information

Toni Melton

Executive Vice President

1610 Shadywood Lane

Mount Pleasant, TX 75455

903-434-4783

tmelton@higginbotham.net

2. Describe your view as the role of Consultant/Broker, and what differentiates you from other consultants/brokers.

The proposed service team is led by Toni Melton, Exec VP, who is responsible for plan design, funding analysis, annual renewal, carrier negotiation, claim analysis and regulatory compliance. Jessica Marvray, Account Manager, will be the day-to-day contact for service requests, including billing, eligibility and claims. These team members have experience working on accounts of similar size and scope.

Higginbotham hasThis core service team will be supplemented by subject matter experts in the areas of employee benefit communications, health risk management, HR technology, employee call response, Section 125 administration, worksite benefits, retirement plans, executive benefits and compliance. The involvement of these experts is predicated upon the services you request.

3. Provide a summary of your qualifications, anticipated time dedicated to the County, travel availability to County's location; and identify key staff members to assist with the County's benefit services. Please include copies of licenses and certifications obtained relevant to insurance and benefit services.

Toni is a group health insurance broker for middle to large market employers. In addition to health plan design, renewal analysis, carrier negotiation, claim analysis and regulatory compliance, Toni is experienced in managing key account services including employee communications, wellness programs and enrollment strategies.

Toni has more than 25 years of experience in employee benefits, with the last 19 years at Higginbotham's Mount Pleasant office. Before that, she was marketing director for a national structured settlement broker. Toni began her career in claims for a life insurance company.

She serves as legislative chairman of the East Texas Association of Health Underwriters and is a member of the Texas Association of Health Underwriters, National Association of Health Underwriters, Stephen F. Austin Alumni Association and First Baptist Church-Linden, Texas.

Toni received a Bachelor of Business Administration in marketing from Stephen F. Austin State University and has completed a number of professional insurance courses.

Toni Melton will be available in person to attend all Commissioners Court meetings that will address issues related to the employee benefits plan. She will also perform a myriad of tasks before, during and after open enrollment to maximize employees' plan participation and minimize your workload.

- Develop a comprehensive employee benefits communications program including an enrollment guide to aid employees' understanding of the plans being offered
- Develop enrollment kits and communication campaign including an announcement letter, benefit logo/graphic, benefit statements, enrollment envelope, enrollment forms, enrollment instructions, enrollment video, newsletters, payroll stuffers, posters and promotional material
- Conduct meeting with management to preview enrollment schedule and process
- Coordinate and execute enrollment meetings for your staff with participation from carrier representatives
- Supply enrollers knowledgeable in all benefits being offered
- Supply enrollers knowledgeable in all underwriting guidelines for voluntary products.

Jessica is an account manager for Higginbotham's Employee Benefits Department, primarily assisting Vice President Toni Melton in the administration of large and small employer groups' plans. She is the first point of contact for customers with service requests and coverage inquiries, including billing eligibility and enrollment. She coordinates account activities with Higginbotham's Employee Communications, Health Risk Management, Section 125 and other administrative service departments. Jessica also maintains relationships with carrier representatives and vendors to facilitate communication of new products and changes to existing plans to customers. Jessica has 6 years of experience in the insurance industry. Her work has included customer service, sales and account management in Personal Lines and Employee Benefits.

Travel to Upshur County will not be an issue, since our office is only 30 minutes from Gilmer!



General Lines Agent

Life, Accident, Health and HMO, Property and Casualty

TONI CATES MELTON

1610 SHADYWOOD LN
MT PLEASANT, TX 75455-5637

is authorized to transact business as described above

License No: 840835 Issue Date: 08-21-1996 Expiration Date: 09-30-2020

Generated by Sircon 174850657

<p>TEXAS DEPARTMENT OF INSURANCE THIS IS TO CERTIFY THAT</p> <p>TONI CATES MELTON 1610 SHADYWOOD LN, MT PLEASANT, TX 75455-5637</p> <p>LICENSE NUMBER: 840835</p>		<p>IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN BELOW:</p> <p>General Lines Agent Life, Accident, Health and HMO, Property and Casualty</p> <p>Issue Date: 08-21-1996 Expiration Date: 09-30-2020</p> <p>Generated by Sircon 174850657</p>
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General Lines Agent

Life, Accident, Health and HMO, Property and Casualty


JESSICA ERIN MARVRAY

1610 SHADYWOOD LN
MOUNT PLEASANT, TX 75455-5637

is authorized to transact business as described above

License No: 1956983 Issue Date: 11-06-2014 Expiration Date: 11-30-2020

Generated by Sircon 178225043

<p>TEXAS DEPARTMENT OF INSURANCE THIS IS TO CERTIFY THAT</p> <p>JESSICA ERIN MARVRAY 1610 SHADYWOOD LN, MOUNT PLEASANT, TX 75455-5637</p> <p>LICENSE NUMBER: 1956983</p>	<p></p> <p>IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN BELOW:</p> <p>General Lines Agent Life, Accident, Health and HMO, Property and Casualty</p> <p>Issue Date: 11-06-2014 Expiration Date: 11-30-2020</p> <p>Generated by Sircon 178225043</p>
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4. Describe any strategies, methods or tools you utilize to manage and forecast insurance and benefits plans for the succeeding year(s).

Higginbotham uses the PlanAdvisor automated tool by Zywave to perform predictive cost modeling to show you the impact of a plan design change before making any decisions. PlanAdvisor models potential plan designs and estimates renewal costs. Plus, we can use the data from PlanAdvisor to determine if your carrier is offering you a fair renewal quote.

We also have the option to utilize the outside firms Merlinos & Associates or Analystar Consulting for cost modeling.

5. Describe any strategies, methods or tools you or your company utilize to offer assistance with investigating and settling claims, or to respond to coverage questions.

Upshur County employees will be able to contact Higginbotham to help with not only understanding their claims Explanation of Benefits, but we will be your claim advocate to dispute resolution, as well.

Higginbotham offers patient advocacy for claims through Compass Professional Health Services, a firm that helps reduce employers' health care costs while increasing employees' benefits satisfaction. Compass allows employees to take advantage of lower prices within their existing network by providing price transparency based on tens of millions of medical claims, giving employees information to make cost and quality comparisons. Compass advocates use this database to help employees find the best value for their health care services.

Compensation

Provide a description of the compensation structure proposed by firm/company; to include all bases for remuneration such as commission, fees, or other charges that may affect the County.

\$30 per employee per month

1. Disclose any known or prior business relationships (within the last five years) with the County, its officials, or its employees.

None

CERTIFICATION

The undersigned proposer, by signing and executing this proposal, certifies and represents to the County that proposer has not offered, conferred or agreed to confer any pecuniary benefit, as defined by 36.02 of the Texas Penal Code, or any other thing of value as consideration for the receipt of information or any special treatment of advantage relating to this proposal; the proposer also certifies and represents that the proposer has not offered, conferred or agreed to confer any pecuniary benefit or other thing of value as consideration for the recipient's decision, opinion, recommendation, vote or other exercise of discretion concerning this proposal, the proposer certifies and represents that proposer has neither coerced nor attempted to influence the exercise of discretion by any officer, trustee, agent or employee of the County concerning this proposal on the basis of any consideration not authorized by law; the proposer also certifies and represents that proposer has not received any information not available to other proposers so as to give the undersigned a preferential advantage with respect to this proposal; the proposer further certifies and represents that proposer has not violated any state, federal, or local law, regulation or ordinance relating to bribery, improper influence, collusion or the like and that proposer will not in the future offer, confer, or agree to confer any pecuniary benefit or other thing of value of any officer, trustee, agent or employee of the County in return for the person having exercised their person's official discretion, power or duty with respect to this proposal; the proposer certifies and represents that it has not now and will not in the future offer, confer, or agree to confer a pecuniary benefit or other thing of value to any officer, trustee, agent, or employee of the County in connection with information regarding this proposal, the submission of this proposal, the award of this proposal or the performance, delivery or sale pursuant to this proposal.

THE PROPOSER SHALL DEFEND, INDEMNIFY, AND HOLD HARMLESS UPSHUR COUNTY, ALL OF ITS OFFICERS, AGENTS AND EMPLOYEES FROM AND AGAINST ALL CLAIMS, ACTIONS, SUITS, DEMANDS, PROCEEDING, COSTS, DAMAGES, AND LIABILITIES, ARISING OUT OF, CONNECTED WITH, OR RESULTING FROM ANY ACTS OR OMISSIONS OF CONTRACTOR OR ANY AGENT, EMPLOYEE, SUBCONTRACTOR, OR SUPPLIER OF CONTRACTOR IN THE EXECUTION OR PERFORMANCE OF THIS RFP.

I have read all of the specifications and general proposal requirements and do hereby certify that all items submitted meet specifications. Furthermore, I certify that I am authorized by the Company proposed to offer this proposal:

Higginbotham
Company Submitting Proposal

Imi C. Melton Executive Vice President
Authorized Signature and Title

EXHIBIT A

QUESTIONNAIRE

GENERAL INFORMATION	Please respond briefly in the spaces provided
<p>Provide the history of your firm, particularly your employee benefits division.</p>	<p>Paul C. Higginbotham founded a personal insurance agency in his Fort Worth Riverside neighborhood in 1940. By 1943 with World War II raging, he was called to service and sold the agency. After returning from service, he started anew in 1948, operating the firm as a sole proprietorship from a single office in Fort Worth for four decades. Ownership changed in the early 1960s when Paul’s nephew Bill Stroud purchased the firm, which he managed until 1989 when current President/CEO Rusty Reid assumed leadership and implemented a broad-based employee ownership structure that continues today.</p> <p>Also in 1989, Higginbotham expanded its product and service offering to include a full array of insurance and employee benefit products for businesses and individuals. During the past 30 years, the firm’s capabilities have been enhanced to meet the evolving service needs of its clients. Higginbotham now has global capabilities for the entire range of risk management and employee benefits consultation and administration.</p>
<p>Who would be working directly with our company on administrative issues, questions, or problem solving? Please provide the roles and qualifications of each person. Also, include the number of clients each person is expected to handle and categorize these clients by large (500 or more), medium (100-500), or small (less than 100) group.</p>	<p>The proposed service team is led by Toni Melton, Executive Vice President, who is responsible for plan design, funding analysis, annual renewal, carrier negotiation, claim analysis and regulatory compliance. Jessica Marvray will be the day-to-day contact for service requests, including billing, eligibility and claims. These team members have experience working on accounts of similar size and scope.</p> <p>This core service team will be supplemented by subject matter experts in the areas of employee benefit communications, health risk management, HR technology, employee call response, Section 125 administration, worksite benefits, retirement plans, executive benefits and compliance. The involvement of these experts is predicated upon the services you request.</p> <p>Toni is the Broker for 71 clients Large: 0 Medium: 11 Small: 60 Jessica is the Account Manager for 34 clients. Large: 0 Medium: 11 Small: 23</p>

REQUEST FOR PROPOSALS - Insurance Consulting/Brokerage Services

How many of your clients do you currently work with on a broker basis? How many of your clients do you currently work with on a consultant basis?

Broker: 71
Consultant: 1

ACCOUNT MANAGEMENT	Please respond briefly in the spaces provided
Describe your account management department.	Our goal is to reduce the amount of time and money that clients spend on administering their group benefits and answering their employees' questions by offering our "Single Source" solution. In addition to traditional health insurance brokerage and benefit plan design services, we have specialists on staff offering benefit communications, health risk management, HR technology, employee call response, Section 125 administration, COBRA administration, Form 5500 completion, voluntary worksite benefits, retirement plans and compliance. Every account is assigned an account manager to coordinate services for a seamless delivery, and they are available 24/7 for emergency service requests.
What is your process for ensuring customer satisfaction?	We have a dedicated customer service representative that will have regular communication with your group and will handle any service concerns.
What is the turnover rate of the employees that perform the bulk of the problem-solving administration within your organization?	Toni has been a broker with Higginbotham (previously Capps Insurance) for 21 years. Jessica has been Toni's Account Manager for 4 years.
What kind of training (industry, internal, computer, other) does your firm expect or require your staff receive?	<p>To facilitate our continued stewardship in the employee benefits field, Higginbotham provides a number of educational opportunities to our employees.</p> <p>Internal meetings—Monthly meetings for all benefits staff focus on issues such as HIPAA, COBRA, HSA, FMLA and legislative updates to ensure awareness and development.</p> <p>Product launches—Internal lunch-and-learn sessions conducted by carriers and vendors introduce new products and resources.</p> <p>Continuing education—Higginbotham facilitates required continuing education credit hours for licensed employees. Those holding a Group I License are required to obtain 30 hours every two years unless they have held their license for 20 years, at such time the Texas Board of Insurance grandfatheres the individual. Those holding SEC/NASD registrations for retirement plans are required to complete continuing education every year as well as participate in annual face-to-face compliance meetings. SEC/NASD representatives are never grandfathered.</p>

REQUEST FOR PROPOSALS—Insurance Consulting/Brokerage Services

	<p>HIPAA training—Periodic HIPAA compliance training is conducted by Jackson Walker LLP or The Whitney Smith Company.</p> <p>COBRA seminars—Our staff attends COBRA and FMLA seminars conducted by vendors such as CONEXISIS, Infinisource and UNUM.</p> <p>In-house legal—Our compliance officer works with our brokers to provide compliance solutions to clients as well as keeps the entire employee benefits staff informed of legislative changes, impending deadlines and their impact.</p> <p>Carrier advocates—Select individuals are assigned 2-3 carriers to liaise with and to report to staff members on new products and services.</p>
<p>Do you provide employee communication services for your client's employees? If so, please provide a general description of your capabilities.</p>	<p>Higginbotham's Employee Communications Department offers concept to completion management. From start to finish, we work with you to develop an employee communications strategy that helps your employees understand their benefit options. Higginbotham provides assistance with writing and designing any communication materials, which may include a combination of benefit booklets, overviews, newsletters, posters, payroll stuffers, enrollment forms, envelopes and more. For each client, we also develop a benefit booklet for enrollment at no additional charge (printing, fulfillment or art charges are billed at cost).</p>
<p>How can you assist in facilitating employee meetings?</p>	<p>We facilitate employee meetings in whatever format best fits our client. We are available to host group meetings as needed to review benefits available and assist with any employee needs.</p>
<p>How do you help facilitate annual open enrollments? Include technology-based approaches and identify any additional costs.</p>	<p>We perform a myriad of tasks before, during and after open enrollment to maximize employees' plan participation and minimize your workload.</p> <p>Pre-Enrollment</p> <ul style="list-style-type: none"> • Develop a comprehensive employee benefits communications program including an enrollment guide to aid employees' understanding of the plans being offered • Develop enrollment kits and communication campaign including an announcement letter, benefit logo/graphic, benefit statements, enrollment envelope, enrollment forms, enrollment instructions, enrollment video, newsletters, payroll stuffers, posters and promotional material • Conduct meeting with management to preview enrollment schedule and process

Employee Call Center – (Dedicated only to customers who use Benefits In Hand online enrollment tool)

- Supply trained benefits administrators to answer your employees' phone calls
- Engage for high-volume short assignments like open enrollment and for extended projects like claims consultation throughout the plan year
- Answer calls Monday through Friday, 8 a.m. to 5 p.m. CST
- Provide voicemail after business hours with return service within 24 hours or the next business day
- Provide access to interpreters for more than 140 languages

Post Enrollment

- Provide electronic post-enrollment report of annual elections with list of employees pending underwriting approval for voluntary products
- Provide claims advocacy for dispute resolution
- Support new hire enrollment
- Provide "hidden paycheck" illustrations to all employees
- Coordinate and execute enrollment meetings for your staff with participation from carrier representatives
- Supply enrollers knowledgeable in all benefits being offered
- Supply enrollers knowledgeable in all underwriting guidelines for voluntary products

Online Enrollment (this is an additional cost to the client)

- Facilitate online enrollment through one of our licensed products or an outside vendor
- Provide a design that combines enrollment, communication, selection, confirmation and data transfer
- Provide access during open enrollment and ongoing
- Provide secure 24/7 access to employees
- Offer step-by-step instructions designed for the first-time user
- Provide automated workflows that reduce data entry errors
- Provide data management with real-time updates and reporting
- Integrate with payroll, HRIS system and insurance carriers

DATA ANALYSIS	Please respond briefly in the spaces provided
<p>What resources do you use to analyze medical and pharmacy claims?</p>	<p>Higginbotham has staff in our home office that analyzes and trends claims activity and makes professional recommendations to benefit structures and or procedures that help control claims costs without adversely affecting your employees.</p>
<p>Will your organization provide a wellness and preventive health analysis of our employees and claims experience?</p>	<p>Higginbotham employs health and wellness consultants who develop custom-designed health risk management programs that address five key initiatives:</p> <p>Analyze culture—We perform an analysis of existing workforce needs and opportunities in order to maximize employee participation, behavioral change and return on investment. Our analysis considers cultural assumptions, demographics, existing benefits structure, communication strategies and programming</p> <p>Engage management—We involve senior leadership so they demonstrate their support of the health program initiative by serving as role models and making it a part of the organization’s overall business strategy.</p> <p>Create awareness—We promote social, mental and physical health by raising awareness among employees, increasing knowledge of important health care issues and worksite risk factors and inspiring behavioral change. This is accomplished by: developing a program committee; branding the program; conducting a needs assessment; administering a risk assessment survey; offering preventive testing; and developing an incentive strategy.</p> <p>Provide education—We personalize interactions, like online or telephone health coaching, to help boost program participation and improve the effectiveness of initiatives. Other motivational tools include emails, newsletters, seminars, worksite challenges and campaigns. Through sustained education, monitoring and coaching, employees can begin to make steps toward sustainable lifestyle changes.</p> <p>Measure success—We set tangible goals and periodically analyze aggregated data to provide a powerful marketing tool and feedback on what is working and what needs attention. Baselines for outcomes measurement include medical claim costs, employee morale, participation rates, productivity and absenteeism.</p>

REQUEST FOR PROPOSALS—Insurance Consulting/Brokerage Services

<p>For any of the above questions that you answered yes, please provide us a sample report that you have prepared for another client.</p>	<p>See Attachment - on following page.</p>
<p>What is the average cost of customization of ad hoc reports?</p>	<p>Every TPA or carrier has different fee structure for ad hoc reporting, so this will vary.</p>



Better Care. Better Benefit. Lower Costs.

WELLNESS & HEALTH RISK MANAGEMENT
SAMPLE 3 YEAR STRATEGY

YEAR	2016 (CURRENT PLAN YEAR)	2017	2018	2019
Target Population	Insured Employees, Retirees, Spouses	Insured Employees, Retirees, Spouses	Insured Employees, Retirees, Spouses	Insured Employees, Retirees, Spouses
Program Components	Points-Based Program (Viverae) <ul style="list-style-type: none"> • Health Assessment (required) • Annual Physical (required) • Tobacco Affidavit/Program (required) • Employer Challenges • Online Courses • Webinars • Questionnaires • Targeted Programs • Healthy Events 	Points-Based Program <ul style="list-style-type: none"> • Health Assessment (required) • Annual Physical (required) • Tobacco Affidavit/Program (required) • Compass Utilization (required) • Employer Challenges • Online Programs • Onsite Events • Community Events • Health Score Bonus 	Points-Based Program <ul style="list-style-type: none"> • Health Assessment (required) • Annual Physical (required) • Age/Gender Rec'd Screening (required) • Compass Utilization (required) • Employer Challenges • Online Programs • Onsite Events • Community Events • Health Score Bonus Tobacco User/Non-User Rates	Points-Based Program <ul style="list-style-type: none"> • Health Assessment (required) • Annual Physical (required) • Age/Gender Rec'd Screening (required) • Compass Utilization (required) • Employer Challenges • Online Programs • Onsite Events • Community Events • Biometric Outcomes Tobacco User/Non-User Rates
Incentives	Medical Premium Discount, Cash Payout	Medical Premium Discount, Cash Payout	Medical Premium Discount, Cash Payout, Tobacco User/Non-User Rate Differentials	Medical Premium Discount, Cash Payout, Tobacco User/Non-User Rate Differentials
Measurable Goal(s)	1. Establish baseline participation data 2. Decrease tobacco use 3. Establish baseline aggregate risk*	1. Increase participation in activities 2. Decrease tobacco use 3. Measure risk reduction*	1. Increase participation in activities 2. Decrease tobacco use 3. Measure risk reduction*	1. Increase participation in activities 2. Decrease tobacco use 3. Measure risk reduction*
Ideas for Consideration	<ul style="list-style-type: none"> - Add "Compass Utilization" as a required activity - Begin transitioning towards outcomes-based program by adding bonus points for "Health Score" 	<ul style="list-style-type: none"> - Consider implementing tobacco user/non-user rate differentials - Add "Age/Gender Rec'd Screening" as a required activity 	<ul style="list-style-type: none"> - Replace "Health Score Bonus" with points for "Biometric Outcomes" (with reasonable alternative standard) 	<ul style="list-style-type: none"> - Consider making "Biometric Outcomes" a required component (with reasonable alternative standard)

SAMPLE

Confidential and proprietary



HIGGINBOTHAM

STRATEGIC PLANNING	Please respond briefly in the spaces provided
<p>What resources do you have available to help us manage our benefits and outline a benefits strategy consistent with current and future business plans?</p>	<p>We realize that every client has unique employee demographics and benefit plan objectives. As such, we take the time necessary to understand your goals through strategic planning meetings and data gathering before approaching the carrier marketplace. This due diligence helps ensure that we design the best plan for you and your employees and that plan documents deliver on your goals. Once we have a clear understanding of your objectives, we develop a strategic action plan that shows our initiatives for the next 3-5 years. This action plan serves as the framework that guides our tasks.</p>
<p>How will you assist us with the competitive marketing and placement of our plans, including development of marketing specifications, identification of market conditions, evaluation of proposals, negotiations, and placement of insurance contracts for annual renewal?</p>	<p>Higginbotham represents more than 100 national and regional group benefit carriers to give our clients buying options. Underwriters welcome the opportunity to work with us due to our firm’s high business volume, sound relationships and ethical practices. We have preferred designations with many reputable insurance carriers, including CIGNA, UnitedHealthcare, Blue Cross Blue Shield of Texas, Aetna, Lincoln Financial Group, The Principal and UNUM. When appropriate, we draw on these special relationships for favorable terms, pricing and customer service.</p> <p>Our marketing preparations start several months prior to renewal. Before approaching the carrier marketplace, we analyze your current contracts, review your plan’s utilization and consult with you to formulate bid specifications that are in sync with your goals. Based on this analysis, we consider both fully-insured and self-funded options. Then we send the submission to the carriers we have selected to bid, manage their inquiries and provide a summary of their response for comparison purposes. Select carriers are then invited for finalist presentations. Once we have identified appropriate placements, we prepare proposals, negotiate with carriers and implement your insurance contracts. Communication materials are developed to reflect the finalized benefit plans several months before the scheduled open enrollment.</p>
<p>How are plan design changes proposed and handled?</p>	<p>Each year prior to renewal claims data and trends are analyzed to facilitate possible plan design changes that can save the county money in claims costs.</p>
<p>How will you save our county money?</p>	<p>Higginbotham has an excellent record of accomplishment managing costs for our clients. We will evaluate the scope of services requested and clearly define the goals and objectives of the county. The first step in determining how we can save the County money is to analyze your current plan offerings, cost structure, claims data, processes, compliance, and culture to identify the risk factors in</p>

REQUEST FOR PROPOSALS – Insurance Consulting/Brokerage Services	
	<p>your current platform. Our cross functional team of experts will collaborate with the county and our vendor partners to develop risk mitigation strategies providing long term sustainability and cost savings from your current structure</p>
<p>How will you demonstrate the savings?</p>	<p>We will review your Medical and Pharmacy contracts separately and together to see if a bundled approach or carved out approach is on your best interest. We will negotiate the terms of the pharmacy plan and ensure we have the appropriate language in the plan document providing plan protections from the shell games that pharmacy benefit managers include. Our analysis will include alternate funding options ensuring we have the correct funding arrangement for the county. We will aggressively negotiate on your behalf and leverage all resources to obtain the most cost effective solutions for all of your benefit plans, offering creative approaches to solve for difficult problems.</p> <p>Once deployed, we will monitor the plan performance using our Data Analytics resources. Our tool will take in historical claim data allowing us to track changes and the success of those changes in a quantifiable manner. Our services continue through implementation, ongoing administration and risk analysis of your plans. Throughout the year, we will be your partner to measure results by monitoring plan performance. We will be actively engaged in educating your members on health and wellness topics and using the plan in the most cost effective manner.</p>

PROJECTIONS/REVIEWS	Please respond briefly in the spaces provided
<p>How can you help us develop cost projections tied to our fiscal year goals?</p>	<p>Once the County has clearly outlined your fiscal goals, Higginbotham begins and finishes the process with those goals at the forefront. We will collaboratively develop our strategy and deploy the resources necessary to meet those goals. Once we have secured the appropriate plans and vendor partners, we will develop the final cost projections in house. We can use outside actuaries at the counties request.</p>
<p>How will you help with the management of insurance, including supervision and/or preparation of claims activity reports from carriers, executive summary reports, underwriting analysis for annual renewals, financial projections for budgeting, and alternative funding analyses?</p>	<p>Provided the current carrier will send data to our data warehouse, we will provide the County with monthly claims analysis, monthly budget vs expense reconciliation, quarterly utilization analysis and a semiannual opportunity assessment. Our Data analytics tool identifies risk at the individual level based on diagnosed medical conditions, care gap compliance, medication adherence and medical plan utilization. With that detailed information, we are able to have those difficult conversations with the carriers regarding predictive costs for the next 24 months based on the current population, the current risk factors, the risk mitigation strategies we are deploying and member engagement. Our analytics provides an IBNR report monthly based on last month's lag, last quarters lag and last year's lag providing the County with a monthly comprehensive report outlining claims that have been incurred and not reported.</p>

LEGISLATIVE COMPLIANCE	Please respond briefly in the spaces provided
<p>Do you have an in-house benefits attorney? Do you use an external benefits attorney and which firm do you use?</p>	<p>Yes, Ross Carmichael provides Higginbotham’s employee benefit clients assistance with interpreting and complying with health care legislation, including HIPAA, COBRA, PPACA, MHPA/MHPAEA and other state regulations. He also assists with employee education, reporting and disclosure, compliance reviews, voluntary corrections and DOL audits. In his operations role, he coordinates management of the firm’s employee benefits practice for its 23 offices.</p> <p>After attending law school and being admitted to practice in 2008, Ross became an investigator with the U.S. Department of Labor, Employee Benefits Security Administration, where he led the Dallas Regional Office’s Oil & Gas Project and was named the head of its HIPAA and Affordable Care Act Compliance Project. He has worked with the Department of Labor’s Office of the Solicitor, the U.S. Securities and Exchange Commission, the U.S. Attorneys’ Office and both the Texas and Arkansas State Securities Boards. He has successfully investigated numerous cases involving fiduciary imprudence, including both civil and criminal violations of ERISA. Ross received the Secretary of Labor’s Exceptional Achievement Award for his work on the Health Disclosure and Claims Issues Project.</p> <p>Ross is a member of the State Bar of Texas, American Bar Association, Tarrant County Bar Association and Tarrant County Young Lawyers Association.</p> <p>Ross attended Texas Tech University before transferring to the University of California, Santa Barbara, where he graduated with a B.A. in history. He briefly played professional basketball in Europe before returning to Texas and attending Texas Wesleyan University School of Law, where he was President of the Student Bar Association.</p>
<p>How does your firm stay current with state regulations that impact governmental employers?</p>	<p>Our compliance officer works with our brokers to provide compliance solutions to clients as well as keeps the entire employee benefits staff informed of legislative changes, impending deadlines and their impact</p>
<p>How will your firm notify us of changes in federal and/or local laws that would affect us?</p>	<p>Yes, the compliance director ensures that bulletins are emailed to our clients as soon as any laws are changed.</p>

REQUEST FOR PROPOSALS – Insurance Consulting/Brokerage Services

<p>What specific services, resources, and healthcare legislation?</p>	<p>Higginbotham’s in-house legal and compliance consultant helps clients interpret and comply with new and emerging rules under Health Care Reform legislation, ERISA, HIPAA, COBRA and many other relevant regulations. Not only do we proactively communicate new legislation, regulations and upcoming deadlines, we respond to clients’ compliance concerns and special circumstances.</p> <p>We provide clients with a custom MyWavePortal® website for communicating compliance issues. MyWave is updated with Legislative Briefs developed by independent attorneys that contain concise summaries of federal legislative activity. The portal is also a hub for every imaginable resource you need to efficiently manage your human resource responsibilities. You have access to a searchable library of benefit plan materials like employee communications, benchmark statistics and consumer health newsletters as well as an interactive community of industry peers from across the country for questions and answers.</p> <p>We also help clients control risk and limit liability by reviewing their compliance in 20 key areas: loss control, human resources, employee benefits, workers’ compensation experience modifier, workers’ compensation claims review, risk transfer, replacement cost/building ordinance, business income, EEOC, employee manual, FLSA, FMLA, IRCA, records retention, sexual harassment, COBRA, HIPAA, policy provisions, Section 125, ERISA/SPD and OSHA.</p>
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<p>FEES</p>	<p>Please respond briefly in the spaces provided</p>
<p>Describe your proposed form of compensation (e.g., commission, annual retainer, or fee-for-service). If you are proposing a fee service, please include your fee schedule and/or hourly rates. Please disclose your client policy on carrier bonus payments.</p>	<p>\$30.00 Per Employee Per Month (PEPM)—In this model, Higginbotham is paid solely based on the number of enrolled employees. This arrangement aligns our compensation to the number of employees we service, not to your medical premiums.</p> <p>Higginbotham does accept contingencies and overrides from carriers. However, our brokers are not paid on contingencies or overrides received so they remain objective in their recommendations and provide the best-in-class option for our clients.</p>

REQUEST FOR PROPOSALS – Insurance Consulting/Brokerage Services

<p>If you charge fees for consulting and employee communication, please indicate the basis of your charges (hourly, by project, etc.) and what typical charges might be.</p>	<p>N/A</p>
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REFERENCES / OTHER	Please respond briefly in the spaces provided
<p>How many clients of similar size have you lost in the last three (3) years? Explain why. Provide at least one as a reference including: name, address, phone number, and length of time associated with your organization.</p>	<p>Toni Melton has not lost any clients of similar size in the last 3 years.</p> <p>Reference: Titus County Judge Brian Lee 100 W First St Suite 202 Mount Pleasant, TX 75455 903-577-6791</p> <p>Length of time with our organization: 9 years</p>
<p>Describe any other facets of your organization and your firm's experience that are relevant to this proposal that have not been previously described and that you feel warrant consideration.</p>	<p>Higginbotham's corporate vision is to be the leading insurance brokerage firm in Texas, or what we call the "best in Texas." That is, we strive to be the best advocate for clients, the best company for employees, the best partner for carriers and the best value for employee shareholders. Our efforts toward these ends have been consistently recognized. National Underwriter named Higginbotham "Agency of the Year" in its inaugural presentation. Texas Monthly ranked Higginbotham one of "Best Companies to Work for in Texas." The Central Texas Association of Fundraising named Higginbotham "Outstanding Volunteer Fundraiser." Several carriers have also given Higginbotham preferred designations in response to our high business volume, sound underwriter relationships and ethical practices.</p>

EXHIBIT B

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS

Name of Entity: Higginbotham

The prospective participant certifies to the best of its knowledge and belief that it and its principals:

- a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
b) Have not within a three year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing (Federal, State, or local) a transaction or contract; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, Local) with commission of any of the offenses identified in section (b) of this certification; and
d) Have not within a three year period preceding this application/proposal had one or more illegal transactions (Federal, State, or Local) terminated for cause or default.

I understand that a false statement on this certification may be grounds for rejection of this proposal or termination of the award. In addition, under 18 USC Section 1001, a false statement may result in a fine or imprisonment for up to five (5) years, or both.

Toni C. Melton Executive Vice President
Printed Name Title of Authorized Representative

Toni C. Melton March 27, 2019
Signature of Authorized Representative Date

I am unable to certify to the above statements. My explanation is attached.

FILED
TERRI ROSS
COUNTY CLERK
2019 MAR 29 AM 11:13
BY [Signature] DEPUTY
UPSHUR COUNTY, TX.