NOTICE OF MEETING OF THE COMMISSIONERS' COURT OF HOCKLEY COUNTY, TEXAS

Notice is hereby given that a Regular Meeting of the above named Commissioners' Court will be held on Monday, the 12th day of June, 2023 at 9:00 a.m. in the Commissioners' Courtroom, Hockley County Courthouse, Levelland, Texas, at which time the following subjects will be discussed to-wit:

- 1. Read for approval the minutes of the following Regular Meetings:
 - a. Monday, June 5, 2023 at 9:00 a.m.; and
 - b. Tuesday, June 6, 2023 at 9:00 a.m.
- 2. Consider for approval all monthly bills and claims submitted to the Court dated through June 12, 2023.
- 3. Presentation of the Texas Historical Commission 2022 Distinguished Service Award to the Hockley County Historical Commission.
- 4. Consider and take necessary action to accept a donation of \$200.00 from Eagle Rubber to the Hockley County Memorial Library for use in the Summer Reading Program.
- 5. Consider and take necessary action to approve the American Red Cross Facility Use Agreement.
- 6. Consider and take necessary action to approve the renewal of health and life insurance with Texas Association of Counties.
- 7. Discussion and potential action concerning approval of the Application for Use of Courthouse Lawn as submitted by the Wallace Theater for use during their Theater Camp.
- 8. Review the May 2023 fire runs as submitted by the City of Levelland.
- 9. Consider and take necessary action to approve the contract for Skilled Care/Rehabilitation Services between Hockley County and Lynwood Nursing and Rehab.

COMMISSIONERS' COURT OF HOCKLEY COUNTY, TEXAS.

Filed for Record at ____o'clock __M.

DW.

Sharla Baldridge, Hockley County Judge

JUN 0 8 2023

Oracle Obel Marie De La Company

I, the undersigned County Clerk, do hereby certify that the above Notice of Meeting of the above named Commissioners' Court, is a true and correct copy of said Notice on the bulletin board at the Courthouse, and at the east door of the Courthouse of Hockley County, Texas, as place readily accessible to the general public at all times on the 8th day of June, 2023, and said Notice remained posted continuously for at least 72 hours preceding the scheduled time of said meeting.

Dated this 8th day of June, 2023.

Jennifer Palermo, County Clerk, and Ex-Officio

Clerk of Commissioners' Court, Hockley County, Texas

THE STATE OF TEXAS
COUNTY OF HOCKLEY

Sharla Baldridge

IN THE COMMISSIONER'S COURT
OF HOCKEY COUNTY, TEXAS

REGULAR MEETING

JUNE 12, 2023

Be it remembered that on this the 12th day of JUNE A.D. 2023, there came on to be held a Regular Meeting of the Commissioners Court, and the court having convened in Regular Session at the usual meeting place thereof at the Courthouse in Levelland, Texas, with the following members present to-wit:

Alan Wisdom Commissioner Precinct No. 1

Larry Carter Commissioner Precinct No. 2

County Judge

Seth Graf Commissioner Precinct No. 3

Thomas R "Tommy" Clevenger Commissioner Precinct No. 4

Jennifer Palermo, County Clerk, and Ex-Officio Clerk of Commissioners Court when the following proceedings were had to-wit:

Motion by Commissioner Carter second by Commissioner Wisdom, 4 Votes Yes, 0 Votes No, that the Minutes of a Regular Meeting of the Commissioner's Court, held on Monday June 5, 2023, at 9:00 a.m., and Tuesday June 6, 2023, be approved and stand as read.

Motion by Commissioner Clevenger, second by Commissioner Graf, 4 Votes Yes, 0 Votes No, that all monthly claims and bills submitted to the court and dated through June 12, 2023, A.D. be approved and stand as read.

Presentation of the Texas Historical Commission 2022 Distinguished Service Award to the Hockley County Historical Commission.



P.O. Box 12276 Austin, Texas 78711-2276 512-463-6100 thc.texas.gov

June 01, 2023

The Honorable Sharla Baldridge Hockley County Judge's Office 802 Houston Street, Suite 101 Levelland, TX 79336

Dear Judge Baldridge,

We are pleased to announce the Hockley County Historical Commission (CHC) has earned a Distinguished Service Award (DSA) for the 2022 year of service. While all CHC efforts are valued, DSAs acknowledge above average CHC performance based on a statewide analysis of CHC annual reports. For 2022, our agency received 197 CHC reports and approved 83 awards.

To honor appointee contributions, we ask that you acknowledge the award publicly as soon as possible. We recommend presenting the enclosed DSA certificate to your CHC during a formal meeting of the commissioners court. If an in-person ceremony is not feasible, please consider other ideas listed on the enclosed flyer to recognize your CHC's outstanding service to the county.

Enclosed is a press release your office can use to promote the DSA and your CHC's accomplishments. An electronic copy of this press release is provided at: https://www.thc.texas.gov/information-2022-dsa-winning-chcs. We suggest gathering specifics related to your CHC's efforts and including that information in the press release prior to distributing a copy to media outlets. Promoting your CHC's award locally demonstrates your pride in their hard work and explains their civic contribution. This publicity will also draw attention to the positive impacts of county government.

THC Commissioners and staff congratulate you and your CHC on this well-deserved honor. Thank you for supporting your appointees and their efforts to preserve Texas' historic resources.

Sincerely,

Nano Calderon, CHC Outreach Coordinator

cc: Hockley CHC Chair



2022 DISTINGUISHED SERVICE AWARDS

Recognition of County Historical Commission Performance

Each year, the Texas Historical Commission administers Distinguished Service Awards (DSAs) to recognize County Historical Commissions (CHCs) that demonstrate exceptional service to preserve Texas' diverse history. The following CHCs garnered a DSA for the 2022 year of service.

| Aransas | Dickens | Jeff Davis | Medina | Tarrant |
|----------|-----------|------------|-------------|------------|
| Atascosa | Duval | Jefferson | Menard | Taylor |
| Austin | El Paso | Jim Hogg | Milam | Tom Green |
| Bandera | Ellis | Johnson | Mills | Travis |
| Bell | Fannin | Kaufman | Montague | Tyler |
| Bexar | Fayette | Kendall | Montgomery | Van Zandt |
| Brazos | Fort Bend | Kerr | Motley | Victoria |
| Burleson | Franklin | Kimble | Nacogdoches | Walker |
| Caldwell | Garza | Lamar | Navarro | Waller |
| Cameron | Goliad | Lampasas | Newton | Washington |
| Carson | Harris | Lavaca | Nueces | Wheeler |
| Cass | Harrison | Liberty | Palo Pinto | Wichita |
| Chambers | Hays | Limestone | Parker | Wise |
| Cherokee | Henderson | Live Oak | Pecos | Wood |
| Collin | Hockley | Lubbock | Polk | Young |
| Comal | Houston | Mason | Rusk | |
| DeWitt | Jasper | Matagorda | San Saba | |

CONGRATULATIONS to all appointees for their contributions throughout the past year! An award packet will be mailed to the county judge of each of the CHCs listed above. A copy of the packet, including the DSA certificate and suggestions for promoting the award, is provided at the following: https://www.thc.texas.gov/information-2022-dsa-winning-chcs. We have asked county judges to present the award locally to acknowledge CHC accomplishments and provide public recognition to all appointees.



2022 CHC ANNUAL REPORT SUMMARY

County Historical Commission Performance Highlights

The Texas Historical Commission received reports from 197 County Historical Commissions (CHCs) for the 2022 year of service. Below are primary reporting statistics that demonstrate the breadth and value of CHC services.

- 294,634 volunteer hours represent the work of 166 employees and have a monetary value of \$9,369,361.*
- Return on investment—for every \$1 counties invested in CHCs, \$8.28 worth of service was returned by CHCs.
- CHCs supplemented county money with \$498,346 from grants, donations, and fundraisers.

| Financial data from 2022 CHC annual reports | Average Allocation | Reporting Totals | |
|--|--------------------|------------------|--|
| Annual county allocation—116 CHCs received 2022 allocation | \$6,688 | \$775,825 | |
| County money allotted for museums—19 CHCs provided amounts | \$16,317 | \$310,025 | |
| Any other money issued by the county | | \$105,835 | |
| Total county monies invested: | | \$1,191,685 | |

General information about CHCs based on 2022 CHC reports:

- The average size of reporting CHCs is 16 appointees with an average of 5 meetings per year.
- CHCs provide an average of 1,618 volunteer hours per year.
- CHCs participate in a wide range of preservation activities, some of which are noted below.

| Select preservation activity based on 197 CHC reports for 2022 year of service | # of Participating CHCs | |
|--|----------------------------|--|
| Visit sites to monitor the physical condition of subject markers | 117 | |
| Visit sites to monitor the physical condition of cemeteries | 105 | |
| Visit sites to monitor the physical condition of designated properties (RTHL, NR, SAL) | 75 | |
| Promoted historic and cultural sites to sustain heritage tourism initiatives | 70 | |
| Coordinated or participated in a regional preservation or tourism event | 53 | |
| Provided educational events/presentations to the public and youth | 100 | |
| Cleaned or repaired subject markers | 68 | |
| Operated/maintained an archive or research library for public use | 48 | |
| Provided tours of historic buildings and/or sites within the county | 69 | |

^{*} Current estimated volunteer hourly rate is \$31.80 as per independentsector.org.

Reporting data as of 5/12/23



PROMOTING DISTINGUISHED SERVICE AWARDS

Celebrating County Historical Commission Performance Locally

The Texas Historical Commission (THC) administers annual Distinguished Service Awards (DSAs) to County Historical Commissions (CHCs) that demonstrate exceptional service to preserve Texas history. The presentation of the DSA certificate takes place locally. The following information is provided to county officials and CHC appointees to assist in recognizing this achievement.

DSA Ceremony

Traditionally, county judges present the DSA certificate to CHC appointees during a formal commissioners court meeting. Work with appointees to provide sufficient notice of the meeting date/time so appointees can attend. If an in-person ceremony is not feasible, work with your CHC on implementing ideas noted below that will bring attention to the extraordinary efforts of your appointees.

DSA Press Release

Publicizing the award is an easy and effective way to promote county government and the services your CHC provides to the public. Enclosed in this mailer is a template for a DSA press release that may be distributed to local and regional media outlets once it is modified with your county/CHC information. An electronic copy of the press release is provided at the following: https://www.thc.texas.gov/information-2022-dsa-winning-ches.

Social Media Promotion

Websites and social media platforms can be used to publicize the award effectively and inexpensively. Most counties have a web presence, and many CHCs host a social media page. Additionally, there are community partners such as museums, chambers of commerce, and Main Street programs who manage social media platforms that would be willing to share news of the award. Work with your CHC and partners to share specific accomplishments with the public.

Expressions of Gratitude

CHC Outreach Program staff have worked with appointees since 2008. In this time, we have found that a sincere statement of appreciation is valued greatly by appointees, especially when comments come from county officials. Consider contacting your appointees in-person, via phone, a note on county letterhead, etc. to say thank you.

Questions

Contact your CHC chair for information about their specific efforts. Questions about the award process can be directed to CHC Outreach Program Coordinator, Nano Calderon, at nano.calderon@thc.texas.gov.

TEXAS HISTORICAL COMMISSION

PRESENTS THIS

2022

DISTINGUISHED SERVICE AWARD

d

HOCKLEY COUNTY HISTORICAL COMMISSION

AND WELL-BALANCED PRESERVATION PROGRAM IN RECOGNITION OF ITS ACTIVE



DATE





Motion by Commissioner Carter, second by Commissioner Wisdom, 4 votes yes, 0 votes No, that Commissioners Court approved the donation of \$200.00 from Eagle Rubber to the Hockley County Memorial Library for use in the Summer Reading Program. As per Order to approve Donation recorded below.

COUNTY OF HOCKLEY

HOCKLEY COUNTY, TEXAS

ORDER TO APPROVE DONATION

It is the order of the Commissioners' Court of Hockley County that the \$200.00 donation given by Eagle Rubber to the Hockley County Memorial Library for support of the Summer Children's Reading Program is hereby approved.

| DONE IN OPEN COURT, | this the 12^{m} day of June, 2023, upon motion by Commissioner, |
|---------------------|---|
| Huny Carter | |
| | |
| ٧ | Sharla Kuldridge |
| | Sharla Baldridge, Hockley County Judge |

ATTEST:

Jennifer Palermo, County Clerk, Ex-Officio Clerk of Commissioners Court of Hockley County, Texas



10779

EAGLE RUBBER AND SUPPLY

P.O. BOX 1253 2043 W STATE ROAD 300 LEVELLAND, TX 79336 (806) 894-6300

88-173/1/13

0000010779

HUNDRED ---

OMI+*****************************

PAY.

TO THE ORDER

APR 14 2023

******200.00

---E .00

VOID AFTER 90 DAYS

CO CO

HOCKLEY COUNTY MEMORIAL LIBRARY 802 HOUSTON ST, STE 108 LEVELLAND TX 79336

THS.OOCUMENT CONTAINS HEAT SENSITVE NIK * TOUCH OR PRESS HERE - RED IMAGE DISAPREARS WITH HEAT.

Motion by Commissioner Wisdom, second by Commissioner Clevenger, 4 votes yes, 0 votes no, that commissioner's court approved the American Red Cross facility Use Agreement. As per the Facility use agreement recorded below.



The American National Red Cross ("Red Cross"), a non-profit corporation chartered by the United States Congress, provides services to individuals, families and communities when disasters strike. The disaster relief activities of the Red Cross are made possible by the American public who support the Red Cross with generous donations. The Red Cross's disaster services are also supported by facility owners who permit the Red Cross to use their buildings as shelters and other service delivery sites for disaster victims. This agreement is between the Red Cross and a facility owner ("Owner") so the Red Cross can use the facility to provide services during a disaster. This agreement only applies when Red Cross requests use of the facility and is managing the activity at the facility.

Parties and Facility

Owner:

| Full Name of Owner | Hockley County | |
|---|--|--|
| Address | 802 Houston St Levelland, TX 79336 | |
| 24-Hour Point of Contact Name and Title Work Phone Cell Phone | Sharla Baldridge, County Judge 806-894-6856 | |
| Address for Official Notices (only if different from above address) | | |

Red Cross:

| Chapter Name | Panhandle Plains | | |
|--|--|--|--|
| Chapter Address | 2201 19th Street Lubbock, TX 79401 | | |
| 24-Hour Point of Contact Name and Title Work Phone Cell Phone | Monika Koenig, DPM 806-549-8574 | | |
| Address for Official Notices | American Red Cross, Disaster Cycle Services Logistics, 8550 Arlington Blvd., Fairfax, VA 22031 | | |

Facility:

-Kitchen

Insert name and complete street address of building or, if multiple buildings, write "See attached facility list," and attach facility list, including complete street address of each building that is part of this agreement. If the Red Cross will use only a portion of a building, then describe the portion of the building that the Red Cross will use.

Mallet Event Center 2320 S Hwy 385 Levelland, TX 79336 806-894-4161 -Banquet Hall -Vendor Hall -Concourse



Terms and Conditions

 Use of Facility: Upon request and if feasible, Owner will permit the Red Cross to use and occupy the Facility on a temporary basis to conduct emergency, disaster-related activities. The Facility may be used for the following purposes (both parties must initial all that apply):

| Facility Purpose | Owner Initials | Red Cross Initials |
|---|----------------|--------------------|
| Service Center (Operations, Client Services, or Volunteer Intake) | 5B | |
| Storage of supplies | 5K | |
| Parking of vehicles | SB | |
| Disaster Shelter | SR | |

- Facility Management: The Red Cross will designate a Red Cross official to manage the activities at the Facility
 ("Red Cross Manager"). The Owner will designate a Facility Coordinator to coordinate with the Red Cross
 Manager regarding the use of the Facility by the Red Cross.
- 3. <u>Condition of Facility</u>: The Facility Coordinator and Red Cross Manager (or designee) will jointly conduct a survey of the Facility before it is turned over to the Red Cross. They will use the first page of the Red Cross's *Facility/Shelter Opening/Closing Form* to record any existing damage or conditions. The Facility Coordinator will identify and secure all equipment in the Facility that the Red Cross should not use. The Red Cross will exercise reasonable care while using the Facility and will not modify the Facility without the Owner's express written approval.
- 4. Food Services (This paragraph applies only when the Facility is used as a shelter or service center.): Upon request by the Red Cross, and if such resources are available, the Owner will make the food service resources of the Facility, including food, supplies, equipment and food service workers, available to feed the shelter occupants. The Facility Coordinator will designate a Food Service Manager to coordinate meals at the direction of and in cooperation with the Red Cross Manager. The Food Service Manager will establish a feeding schedule and supervise meal planning and preparation. The Food Service Manager and Red Cross Manager will jointly conduct a pre-occupancy inventory of the food and food service supplies before the Facility is turned over to the Red Cross. When the Red Cross vacates the Facility, the Red Cross Manager and Facility Coordinator or Food Service Manager will conduct a post-occupancy inventory of the food and supplies used during the Red Cross's activities at the Facility.
- 5. <u>Custodial Services</u> (This paragraph applies only when the Facility is used as a shelter or service center.): Upon request of the Red Cross and if such resources are available, the Owner will make its custodial resources, including supplies and workers, available to provide cleaning and sanitation services at the Facility. The Facility Coordinator will designate a Facility Custodian to coordinate these services at the direction of and in cooperation with the Red Cross Manager.
- Security/Safety: In coordination with the Facility Coordinator, the Red Cross Manager, as he or she deems
 necessary and appropriate, will coordinate with law enforcement regarding any security and safety issues at the
 Facility.
- 7. Signage and Publicity: The Red Cross may post signs identifying the Facility as a site of Red Cross operations in locations approved by the Facility Coordinator. The Red Cross will remove such signs when the Red Cross concludes its activities at the Facility. The Owner will not issue press releases or other publicity concerning the Red Cross's activities at the Facility without the written consent of the Red Cross Manager. The Owner will refer all media questions about the Red Cross activities to the Red Cross Manager.
- 8. Closing the Facility: The Red Cross will notify the Owner or Facility Coordinator of the date when the Red Cross will vacate the Facility. Before the Red Cross vacates the Facility, the Red Cross Manager and Facility Coordinator will jointly conduct a post-occupancy inspection, using the second page of the Shelter/Facility Opening/Closing Form, to record any damage or conditions.



| 9, | Fee (This paragraph does not apply when the Facility is used as a shelter. The Red Cross does not pay fees to |
|----|---|
| | use facilities as shelters.): Both parties must initial one of the two statements below: |

| a, | Owner initials: SK Red Ci | ross initials: | — |
|----|---------------------------|----------------|-------------------------------------|
| b. | The Red Cross will pay \$ | per Select | for the right to use and occupy the |
| | Facility. Owner initials: | Red Cross in | nitials: |

- 10. Reimbursement: Subject to the conditions in paragraph 10(e) below, the Red Cross will reimburse the Owner for the following:
 - a. Damage to the Facility or other property of Owner, reasonable wear and tear excepted, resulting from the operations of the Red Cross. Reimbursement for facility damage will be based on replacement at actual cash value. The Red Cross, in consultation with the Owner, will select from bids from at least three reputable contractors. The Red Cross is not responsible for storm damage or other damage caused by the disaster.
 - b. Reasonable costs associated with custodial and food service personnel and supplies which would not have been incurred but for the Red Cross's use of the Facility. The Red Cross will reimburse at per-hour, straight-time rate for wages actually incurred but will not reimburse for (i) overtime or (ii) costs of salaried staff.
 - c. Reasonable, actual, out-of-pocket costs for the utilities indicated below, to the extent that such costs would not have been incurred but for the Red Cross's use of the Facility. (Both parties must initial all utilities that may be reimbursed by the Red Cross):

| | Owner Initials | Red Cross Initials |
|----------------|----------------|--------------------|
| Water | 5K | |
| Gas | 158 | |
| Electricity | 5B | |
| Waste Disposal | 13B | |

- d. The Owner will submit any request for reimbursement to the Red Cross within 60 days after the occupancy of the Red Cross ends. Any request for reimbursement must be accompanied by supporting invoices. Any request for reimbursement for personnel costs must be accompanied by a list of the personnel with the dates and hours worked.
- e. If the disaster is a Federally-declared disaster and Owner is a municipal or state government entity, then the Owner will work with appropriate emergency management agencies to seek cost reimbursement through the Federal Emergency Management Agency's program for administering Public Assistance Category B under the Robert T. Stafford Act. The Red Cross is not obligated to reimburse the Owner for costs covered by Public Assistance Category B.
- 11. <u>Insurance</u>: The Red Cross shall carry insurance coverage in the amounts of at least \$1,000,000 per occurrence for Commercial General Liability and Automobile Liability. The Red Cross shall also carry Workers' Compensation coverage with statutory limits for the jurisdiction within which the facility is located and \$1,000,000 in Employers' Liability.
- 12. <u>Indemnification</u>: The Red Cross shall defend, hold harmless, and indemnify Owner against any legal liability, including reasonable attorney fees, in respect to claims for bodily injury, death, and property damage arising from the negligence of the Red Cross during the use of the Facility.
- 13. <u>Term</u>: The term of this agreement begins on the date of the last signature below and ends 30 days after written notice by either party.

Facility Use Agreement



<u>Digital Signature</u>: Each party agrees that either party's execution of this agreement by DIGITAL signature (whether ELECTRONIC or encrypted) is expressly intended to authenticate this AGREEMENT and to have the same force and effect as manual signatures. The term DIGITAL signature means any electronic sound, symbol, or process attached to or logically associated with a record and executed and adopted by a party with the intent to sign such record, including facsimile or email electronic signatures. The use of digital signatures is intended to facilitate more efficient execution and delivery of signed documents.

| Hockley County | The American National Red Cross |
|--------------------|---------------------------------|
| Owner (Legal Name) | (Legal Name) |
| Sharla Baldride | Rebuca |
| By (Signature) | By (Signature) |
| Sharla Baldridge | Rebecca Currington |
| Name (Printed) | Name (Printed) |
| County Judge | Shelter Coordinator |
| Title | Title |
| 6/12/2023 | 06-15-23 |
| Date | Date |

Motion by Commissioner Carter, second by Commissioner Graf, 4 votes yes, 0 votes no, that Commissioners Court approved the renewal of health and life insurance with Texas Association of Counties. As per 2023-2024 Renewal Notice and Benefits Confirmation recorded below.



2023 - 2024 Renewal Notice and Benefit Confirmation

Group: 94527 - Hockley County

Anniversary Date: 10/01/2023

Return to TAC by: 6/30/2023

Please initial and complete each section confirming your group's benefits and fill out the contribution schedule according to your group's funding levels. Fax to 1-512-481-8481 or email to melissal@county.org.

For any plan or funding changes other than those listed below, please contact Melissa Lopez at 1-800-456-5974.

MEDICAL

Medical: Plan 700-G \$30 Copay, \$600 Ded, 90%, \$2400 OOP Max

RX Plan: Option 3A-G \$10/25/40, \$0 Ded

Your % rate increase is: 4.20%

Your payroll deductions for medical benefits are:

Pre Tax

| Tier | Current Rates | New Rates Effective 10/1/2023 | New Amount Employer Pays | New Amount Employee Pays | New Amount Retiree Pays (if applicable) |
|-----------------------|-------------------|-------------------------------------|--------------------------------|--------------------------------|---|
| Employee Only | \$988,28 | \$1,029.78 | \$ 1,029.78 | \$ 0.00 | \$ 175.00 |
| Employee + Child(ren) | \$1,469.04 | \$1,530.74 | \$ 1,355.74 | \$ 175.00 | \$ 1,530.74 |
| Employee + Spouse | \$2,087.82 | \$2,175.50 | \$ 1,950.50 | \$ 225.00 | \$ 400.00 |
| Employee + Family | \$2,568.54 | \$2,676.42 | \$ 2,401.42 | \$ 275.00 | \$ 2,676.42 |
| SB Initial to accept | l Medical Plan an | d New Rates. | • | | |

DENTAL

Dental: Plan II 100% Prevent., \$50 Ded, 80% Basic, 50% Major

Your % rate increase is: -10.50%

Your payroll deductions for dental benefits are: Pre Tax

| Tier | Current Rates | New Rates Effective 10/1/2023 | New Amount Employer Pays | New Amount Employee Pays | New Amount Retiree Pays (if applicable) |
|-----------------------|------------------|-------------------------------------|--------------------------------|--------------------------------|---|
| Employee Only | \$26.12 | \$23.38 | \$ | \$ | \$ |
| Employee + Child(ren) | \$65.32 | \$58.46 | \$ | \$ | \$ |
| Employee + Spouse | \$52.26 | \$46.76 | \$ | \$ | \$ |
| Employee + Family | \$93.34 | \$83.54 | \$ | \$ | \$ |

Initial to accept Dental Plan and New Rates.



PY2024 (2023-24) Alternate Plan Option - Dental

Group: #94527 - Hockley County Effective Date: 10/01/2023

| | Current Plan Year | Renewal Rates | Option 1 | |
|-------------------|-------------------|---------------|--------------------|--|
| RATES: | Plan II | Plan II | Plan II with Ortho | |
| Employee Only | \$26.12 | \$23.38 | \$25.08 | |
| Employee + Child/ | ren \$65.32 | \$58.46 | \$62.72 | |
| Employee + Spous | e \$52.26 | \$46.76 | \$50.16 | |
| Employee + Family | | \$83.54 | \$89.62 | |

| Plan Benefits | Plan II | Plan II w/ ortho |
|--|------------|---------------------|
| Plan Year Maximum per Participant | \$1,500.00 | \$1,500.00 |
| Plan Year Deductible (Waived for preventive care) | \$50.00 | \$50.00 |
| Preventive Care (Benefits do not apply to Plan Year Maximum) | 100% | 100% |
| Basic Care | 80% | 80% |
| Major Services | 50% | 50% |
| Orthodontic Treatment for Adults (no age limitation) and Dependent children (under age 26) | | 50% |
| Lifetime Maximum per Participant | \$1,500.00 | \$1,500.00 |

Proposal rates are based on the following information:

- Rates based upon current benefits and enrollment. A substantial change in enrollment (10% over 30 days or 30% over 90 days) may result in a change in rates.
- Orthodontic coverage is optional per group, not per individual family.
- Rates based on a minimum employer contribution of 100% of the employee only rate or current funding level.
- Form must be received by 06/28/2023 in order to avoid a delay in implementation of benefits and/or late processing fees.

| Please indicate the selected plan here: | Plan II with O | rtho |
|---|----------------|-----------|
| Signature: Sharla Baldridge | Date: _ | 6/12/2023 |

Dental Benefit Plan Election

| Group Name: | Hockley County | Group Number: 94527 AD: 10/1 | |
|-------------|---|------------------------------|---|
| | *************************************** | | • |

Please select or confirm the dental plan your Commissioners' Court or Board of Directors has chosen for the upcoming plan year and complete the contribution schedule according to your group's funding levels. Email completed election form to your Employee Benefits Specialist or fax to (512) 481-8481, no later than 30 days prior to the effective date. Email or call your Employee Benefit Specialist at 1-800-456-5974 with any questions.

| | DENTAL PLAN | (Select One) | | |
|---|-----------------------------|--------------------|----------|-----------------------------|
| □Plan I (\$2,000 Annual Max) | ☑ Plan II (\$1,500 A | nnual Max) | □Pla | an III (\$1,000 Annual Max) |
| Does the selected dental plan include Orthodontia coverage? | | ☑Yes ☐No | | |
| Your payroll deductions for dental benefits are: | | ☑Pre-Tax ☐Post-Tax | | |
| Are retirees allowed on the dental plan? | | ☑Yes ☐No /j | f yes, 🔽 | Pre-65 Post-65 |
| Does your group have a broker or consultant? | | Broker: ☐Yes 🗸 | No | Consultant: ☐Yes ☑No |
| Broker/consultant's name, if applicable: | N/A | | | Commission: N/A |

| Tier | New Monthly Rates* | New Amount Employer Pays | New Amount Employee Pays | New Amount Retiree Pays |
|-----------------------|-----------------------|-----------------------------|-----------------------------|----------------------------|
| Employee Only | \$25.08 | \$ 0.00 | \$ 25.08 | \$ 25.08 |
| Employee + Child(ren) | \$62.72 | \$ 0.00 | \$ 62.72 | \$ 62.72 |
| Employee + Spouse | \$50.16 | \$ 0.00 | \$ 50.16 | \$ 50.16 |
| Employee + Family | \$89.62 | \$ 0.00 | \$ 89.62 | \$ 89.62 |

^{*}Note: Rates shown do not include a broker commission unless specified above.

Signature (County Judge or Contracting Authority)

Hon. Sharla Baldridge County Judge

Print Name and Title

DENTAL PLAN II WITH ORTHODONTIA

| | 10 | BlueCross BlueShield |
|---|----|-------------------------------|
| W | W. | BlueCross BlueShield of Texas |

| DENTAL PLAN II WITH ORTHODONTIA | of Texas |
|---|--------------------------------|
| Type of Service | Benefit** |
| General Provisions | |
| Plan Year Deductible | \$50 Individual / \$150 Family |
| Plan Year Maximum per Participant | \$1,500 |
| Diagnostic and Preventive Care Benefits (deductible waived) | Ψ1,000 |
| (Benefits do not apply to Plan Year Maximum) | |
| Oral Examinations (twice per Plan Year) | |
| Problem-Focused and non-routine exams limited to 1 per plan year | |
| Consultations Prophylaxis (two cleanings per Plan Year) | |
| Dental X-rays -Full Mouth/Panoramic X-rays (once every 60 months) | 100% |
| Bitewing X-ray Series (once per Plan Year) | 70070 |
| Fluoride Treatment (to age 19; twice per Plan Year) | |
| Sealants up to age 19, permanent molars, one per tooth every 36 months | |
| Space Maintainers up to age 19; 1 per arch per lifetime on posterior teeth only Labs and Tests | |
| Periodontal Maintenance 2 per plan year; not combined with Preventive Prophylaxis | |
| Full Mouth Debridement once per lifetime | |
| Miscellaneous Services | 80% |
| Palliative Care Restorative Services | |
| Amalgams and Composite (once per surface on the indicated tooth per 24 months) | |
| Simple Extractions | 80% |
| Pin Retention | |
| General Services | |
| Diagnostic Casts (once per Plan Year) | 80% |
| Prefabricated Stainless Steel Crowns | |
| Endodontic Services | |
| Root canal therapy Direct pulp cap | |
| Apicoectomy/Apexification | 80% |
| Retrograde filling | |
| Root amputation/hemisection | |
| Therapeutic pulpotomy | |
| Periodontal Services Periodontal scaling and root planing | 80% |
| | |
| Oral Surgery Services Surgical tooth extractions | |
| Full Bony impacted tooth extractions | |
| General Anesthesia/IV Sedation | 50% |
| Alveoloplasty, Vestibuloplasty | |
| Glngivectomy/gingivoplasty | |
| Gingival flap procedure / Osseous surgery and grafts / Soft tissue grafts | |
| Crowns, Inlays/Onlays Services Crowns, Inlays, Onlays, Labial Veneers | 50% |
| Prosthodontic Services | |
| Bridges and dentures | |
| Denture reline/rebase, Denture adjustments, | |
| Re-cementation and repair of bridges/dentures, | 50% |
| Re-cementation and repair of crowns, inlays/onlays, | 50 /6 |
| Occlusal Guard | |
| Implants Orthodontia Benefits | V |
| Orthodontic Diagnostic Procedures and Treatment for Adults (no age limitation) and | 50% |
| Dependent children (under age 26) | 2079 |
| Lifetime Maximum per Participant | \$1,500 |
| | |

SEE A CONTRACTING DENTIST

- SEE A NON-CONTRACTING DENTIST
- Your out-of-pocket cost will generally be the least amount because BlueCare Dentists have contracted to accept a lower Allowable Amount as payment in full for Eligible Dental Expenses
- · You are not required to file claim forms
- You are not balance billed for costs exceeding the BCBSTX Allowable Amount for BlueCare Dentists
- Your out-of-pocket cost may be greater because Non-Contracting Dentists have not entered into a contract with BCBSTX to accept any Allowable Amount determination as payment in full for Eligible Dental Expenses
- You are required to file claim forms
- You are balance billed for costs exceeding the BCBSTX Allowable Amount

EMPLOYEE INFORMATION

This is a general summary of your benefit design. Please refer to your benefit booklet for other details and for limitations and exclusions. The following eligibility provisions apply:

- > Dependent children are covered to age 26. Disabled dependent children can be covered beyond age 26.
- > Retirees may be eligible, depending on employer contract.
- > Employees may enroll dependent children up to age 5, on the first of the month following application with no late enrollment penalty.

When the course of treatment will be in excess of \$300, a predetermination request should be submitted to BCBSTX in advance of treatment.

Initials B Date Collaboration

VISION

Vision:

Vision Value Plan

Your % rate increase is: -26.00%

Your payroll deductions for vision benefits are: Pre Tax

| Tier | Current Rates | New Rates Effective 10/1/2023 | New Amount Employer Pays | New Amount Employee Pays | New Amount Retiree Pays (if applicable) |
|-----------------------|------------------|-------------------------------------|--------------------------------|--------------------------------|---|
| Employee Only | \$6.20 | \$4.58 | \$ 4.58 | \$ 0.00 | \$ 4.58 |
| Employee + Child(ren) | \$12,44 | \$9.18 | \$ 4.58 | \$ 4.60 | \$ 9.18 |
| Employee + Spouse | \$11.80 | \$8.72 | \$ 4.58 | \$ 4.14 | \$ 8.72 |
| Employee + Family | \$18.28 | \$13.52 | \$ 4.58 | \$ 8.94 | \$ 13.52 |

Initial to accept Vision Plan and New Rates.

LIFE - BASIC **Basic Life Products:** Coverage Volume per Employee: \$15,000 (Rates are per thousand) **Amount** Amount **New Rates Employer** Employee/ **Effective** Current Retiree Pays Pays Rates (if applicable) 10/1/2023 Basic Term Life \$0.199 \$0.199 100% 0% Basic AD&D \$0.030 100% 0% \$0.030 Initial to accept New Basic Life Rates.

| | | RETIREE | |
|----------------------|-------------------------------|----------|--|
| Please circle one fo | or each benefit that applies. | | |
| Your group allows | retiree coverage for: | | |
| Medical | ☑Pre 65 | □Post 65 | |
| Dental | ☑Pre 65 | □Post 65 | |
| Vision | ✓ Pre 65 | ☐Post 65 | |
| SI Initial to | confirm. | | |

WAITING PERIOD

Waiting period applies to all benefits.

Employees

0 days - 1st of the month following date of hire but first of the month

Elected Officials

0 days - 1st of the month following date of hire but first of the month

| COBRA ADMINISTRATION |
|---|
| Please indicate how your group manages COBRA administration: |
| County/Group processes COBRA on OASYS *County/Group is responsible for fulfilling COBRA notification process and requirements. |
| BCBS COBRA Department processes COBRA *BCBS COBRA Department administers via COBRA contract with the County/Group |
| County/Group processes TAC HEBP Continuation of Coverage on OASys (< 20 employees) |
| *County/Group is responsible for fulfilling notification process and requirements |
| Initial to confirm COBRA Administration. PLAN INFORMATION |
| Broker or Consultant Information |
| Please confirm your broker or consultant's name, if applicable: |
| Agency Name Agency Address Number and Street City State Zip Broker Representative or Consultant's Name Contact Phone Number Contact Email |
| Address Initial to confirm Broker or Consultant information |

- Please update broker or consultant's information.
- If applicable, broker commissions are included in rates listed on page 1.
- Retirees pay the same premium as active employees regardless of age for medical and dental.
- Rates based upon current benefits and enrollment. A substantial change in enrollment (10% over 30 days or 30% over 90 days) may result in a change in rates.

- Form must be received by 6/30/2023 in order to avoid additional administrative fees.
- Signature on the following page is required to confirm and accept your group's renewal.

TAC HEBP Member Contact Designation Hockley County

CONTRACTING AUTHORITY

As specified in the Interlocal Participation Agreement, each Member Group hereby designates and appoints, as indicated in the space provided below, a Contracting Authority of department head rank or above and agrees that TAC HEBP shall NOT be required to contact or provide notices to ANY OTHER person. Further, any notice to, or agreement by, a Member Group's Contracting Authority, with respect to service or claims hereunder, shall be binding on the Member. Each Member Group reserves the right to change its Contracting Authority from time to time by giving written notice to TAC HEBP.

| | | Please list changes and/or corrections below. |
|-------------|---|---|
| Name/Title | Shirley Penner/Auditor | |
| Address | 802 Houston Street, Suite 103 Levelland, TX 79336-3706 | |
| Phone | 806-894-6070 | |
| Fax | 806-894-6917 | |
| Email | spenner@hockleycounty.org | |
| Responsible | e for receiving all invoices relating to HEBP proc | CONTACT |
| rzeshousini | e for receiving all invoices relating to rieder proc | Please list changes and/or corrections below. |
| Name/Title | Monica Grado/Assistant County Auditor | |
| Address | 802 Houston Street, Suite 103 Levelland, TX 79336 | |
| Phone | 806-894-6070 | _ |
| Fax | 806-894-6917 | |
| Email | mgrado@hockleycounty.org | |
| HIPAA Secu | | |
| LIEDOL | | PRESENTATIVE |
| HEBP's Ma | in contact for daily matters pertaining to the hea | in benefits. Please list changes and/or corrections below, |
| Name/Title | Monica Grado/Assistant County Auditor | |
| Address | 802 Houston Street, Suite 103 Levelland, TX 79336 | |
| Phone | 806-894-6070 | |
| Fax | 806-894-6917 | |
| Email | mgrado@hockleycounty.org Ua Baldrudox | Date: 6/12/2023 |
| Signature o | f County Judge or Contracting Authority | |
| Hon. Sha | ırla Baldridge County Judge | |
| Please PRIN | IT Name and Title | |

The Texas Association of Counties would like to thank you for your membership in the only all county-owned and county directed Health and Employee Benefits Pool in Texas.



Please list changes and/or corrections:

HEALTHY COUNTY WELLNESS CONTACT DESIGNATION Hockley County

Title: Indigent Health Care and Public Assistance Administrator

WELLNESS COORDINATOR

Current Wellness Coordinator

Name: Ms. Cara Phelan

The Wellness Coordinator is the primary contact regarding the Healthy County wellness program. The wellness coordinator is responsible for administrating Healthy County components and informing employees of all wellness resources available.

| Address: 811 Austin St, Basement of Hockley County Library Levelland, TX 79336-3705 | | | |
|---|---|--|--|
| Email: cphelan@hockleycounty.org | | | |
| Phone Number: (806) 894-4264 | | | |
| Fax Number: | | | |
| WELLNESS SPONSOR | | | |
| The Wellness Sponsor is responsible for supporting the coorcomponents and encouraging county employees to access a available. An elected official in this role is preferred to illust | all Healthy County wellness resources | | |
| Current Wellness Sponsor | Please list changes and/or corrections: | | |
| Name: | Ms. Kelli Martin | | |
| Title: | Treasurer | | |
| Address: | 802 Houston Street, Suite #104 | | |
| | Levelland, TX 79336 | | |
| Email: | kmartin@hockleycounty.org | | |
| Phone Number: | (806) 894-3718 | | |
| Fax Number: | (806) 894-6917 | | |
| Contracting Authority Signature: Sharla Bold Date: 6/12/2023 | bridge | | |



HEALTHY COUNTY: COUNTY SPECIFIC INCENTIVE PROGRAM

A County Specific Incentive (CSI) is a wellness program that rewards employees and/or spouses for healthy behaviors such as completing an annual exam, tobacco affidavit, or participating in a physical activity program in exchange for avoiding a premium contribution, a lower monthly premium, earn additional days of PTO, or other rewards decided on by the County or District. Penalties and Rewards are administered at the county or district level.

Healthy County is available to assist in the process of designing, communicating, and tracking a CSI. Employees will be able to view their progress and completion of the incentive online or on the mobile app.

YOUR COUNTY OR DISTRICT'S CSI

Our records indicate that your County or District does not currently have a CSI. Please make a selection below to let us know if you would like to implement a CSI or learn more about implementing a CSI. Your county or district's Wellness Consultant will reach out to you to discuss design options. Also, please feel free to contact your county or district's Wellness Consultant at any time to begin this process. If your County or District decides to implement a CSI, there is a six week waiting period before employees can view the program online.

| We would like to implement a CSI Program for the 2023-2024 plan year. | | | |
|--|--|--|--|
| \square We are interested in learning more about the CSI Program. | | | |
| \square We are not interested in learning more about the CSI Program at this time. | | | |
| | | | |
| | | | |
| | | | |
| County or District Name: Hockley | | | |
| Printed Name and Title: Hon Sharla Baldridge County Judge | | | |
| Contracting Authority Signature: Starla Baldridge | | | |
| Date: 1/2/2023 | | | |

Motion by Commissioner Clevenger, second by Commissioner Graf, 4 votes yes, 0 votes no, that Commissioners Court approved the application for use of courthouse lawn as submitted by the Wallace Theater for use during their Theater Camp. As per Order to approve use of courthouse lawn Wallace Theather-Theather Camp recorded below.

COUNTY OF HOCKLEY

HOCKLEY COUNTY, TEXAS

ORDER TO APPROVE USE OF COURTHOUSE LAWN WALLACE THEATER – THEATER CAMP

The Commissioners' Court of Hockley County has hereby approved AND IT IS SO ORDERED that the Courthouse lawn shall be used by the Wallace Theater during their Theater Camp. This will be subject to the Application requirements and the Hold Harmless Agreement.

| DONE IN OPEN COURT , this the 12 th day of | |
|--|--|
| Jommy Cleveryer, seconded by Co | Sharla Baldridge, Hockley County Judge |
| Alan Wisdom, Commissioner, Pct 1 | Larry Carter, Commissioner, Pct 2 |
| Seth Graf, Commissioner, Pct 3 | Tommy Clevenger, Commissioner, Pct 4 |
| ATTEST: And Palermo, County Clerk, Ex-Officio Clerk of Commissioner Court of Hockley County, Texas | S COUNTY TEXT |



HOCKLEY COUNTY

APPLICATION TO REQUEST USE OF HOCKLEY COUNTY COURTHOUSE LAWN

The Hockley County Courthouse lawn is available for use of approved community events. There is no charge for using the lawn for approved activities open to the public. The lawn is not for use for weddings or private events. This application must be submitted and approved prior to use. This application only applies to the Courthouse lawn. For information regarding use of the Gazebo, please contact the Levelland Mainstreet Program at (806) 894-9079 or (806) 598-2098 or by email at tmoodycollevellandiexas.org. They will provide information regarding their policy and requirements for use of the Gazebo.

| | COURTHOUSE LAWN RULES | | |
|---------------|--|--|--|
| ML | This application <u>ONLY</u> allows approved use of the Courthouse lawn. Use of the Gazebo requires separate application and reservation through the Levelland Mainstreet. Please contact their office at (806) 598-2098. | | |
| RK | Applicant is responsible for all clean up. | | |
| XV | Damages are the responsibility of the applicant shown on the form. | | |
| AL | NO nails or spikes can used on trees and all tape, string, rope, etc. must be removed at end of event | | |
| RV | NO alcohol allowed on the Courthouse grounds | | |
| ML | Courthouse lawn must be cleaned up and cleared of people by 10 p.m. unless an exception is granted. | | |
| >>>>>> | ·››››››››››››››››››››››››››››››››››››› | | |
| Dates of Use: | Cant: May Kerling Levelland Mallage Theater City: Levelland State: Jx zip: Cell: 306-781-9097 Cell: 306-781-9097 Hours of Use: 12-1221 Sponsoring Activity/Event: Mallage The grave Courts Ty: Kids young games in law minde Expected Attendance: 30 Students ature: May May May Date: 6/8/23 | | |
| Judg | e Sharla Baldridge Hand Police Donortment Dispetcher 806-894-6164 | | |

Hockley County Sheriff's Office



HOCKLEY COUNTY

Hold Harmless/Indemnity Agreement

| "The undersigned, How Courty Courty, its Commissioners Court capacity, from any and all claims on the Hockley County Lawn or a group's use of the Hockley County | , elected officials,\umployees as made by them or on their behal any portion of the Courthouse S | nd volunteers who are acting f for any losses, injuries, or o Square, which may be made | g in their officia damages reported |
|--|--|---|--|
| "The undersigned, Alacha County, its Commissioners Court, for any and all claims, demands, cany losses incurred on the Hockley by reason of the group's use of the | lamages, actions, causes of actic y County Lawn or any portion o | on, suit, judgments or execut f the Courthouse Square, wh | ions by reason or ich may be made |
| "It is further stipulated and agreed instrument." | d that the laws of the State of T | Texas shall control in the co | nstruction of this |
| "In Witness whereof we have herei | unto set our hands this the | _day of | ,20 <u>Z\$</u> , |
| Printed Name | > | <u> 6/8/2 3</u> Date | |
| Signature Signature | Keeling | SO6-52 Contact Phone No. | 3-8773 |
| 923 Housten | Levelland, City, State | 1× 1793 | 36 |

Review the May 2023 fire runs as submitted by the City of Levelland.



LEVELLAND FIRE DEPARTMENT

603 5TH ST LEVELLAND, TEXAS 79336

County Monthly By Date

District: 2

Inc #: Exp #: Alarm Date: Incident Type:

2023164 0 5/31/2023 01:46 746 - Carbon monoxide detector activation, no CO

Address: 701 CARSON ST, ROPESVILLE, TX 79358

of Personnel: 4 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 2 Total Call Duration: 00:59:00

We received a call reporting a carbon monoxide alarm going off. Upon arrival and after investigation we found it to be an out of date unit needing replacement. The resident had two more carbon monoxide alarms and she disposed of that one. We then returned to the station.

2023163 0 5/28/2023 19:57 444 - Power line down

Address: 800 S FM 168, SMYER, TX 79367

of Personnel: 4 Hours Paid per Person:

of Apparatus: 3 Total Call Duration: 00:13:00

Total Man Hours:

.00

LEVELLAND FIRE DEPARTMENT RECEIVED CALL IN REFERENCE TO A POWER POLE AND POWER LINE DOWN NEAR THE INTERSECTION OF FM 168 & BEAR ROAD (800 BLK FM 168). PD DISPATCH ADVISED THAT SMYER VOLUNTEER FIRE DEPARTMENT WAS PAGED X 2 WITH NO RESPONSE. DISPATCH REQUESTED LEVELLAND FIRE TO RESPOND. UNITS C1 AND B14 RESPONDED. WHILE EN ROUTE, DISPATCH ADVISED THAT SMYER VOLUNTEER FIRE DEPARTMENT WAS ABLE TO RESPOND AND THAT LEVELLAND FIRE COULD CANCEL RESPONSE. LEVELLAND UNITS RETURNED TO STATION. NO FURTHER AT THIS TIME. *****EOR*****

2023161 0 5/26/2023 21:40 445 - Arcing, shorted electrical equipment

Address: Intersection of SUNRISE LN & N ALAMO RD, HOCKLEY CO, TX

of Personnel: 3 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 2 Total Call Duration: 01:06:00

Responded to reports of lines arcing at a substation. Upon arrival equipment was still arcing. Made contact with lamb county electric. Upon arrival scene was released to lamb county electric and all units returned to the station.

2023158 0 5/23/2023 16:12 322 - Motor vehicle accident with injuries

Address: Intersection of KELLY RD & W HOUSTON ST, HOCKLEY CO, TX

of Personnel: 8 Hours Paid per Person: Total Man Hours:

of Apparatus: 5 Total Call Duration: 02:10:00

Dispatched to multi vehicle accident at the intersection of houston and kelly road. Upon arrival found 2 vehicles on their sides. Occupant of one vehicle was out upon arrival. Responders worked together to extricate the 2 patients out of the other vehicle. Upon extrication both patients were transported to medical facilities. Once patients were transported scene was turned over to dps. All fire units cleared and returned to the station and back into service.

2023155 0 5/18/2023 08:00 611 - Dispatched & canceled en route

Address: 3680 QUAIL RD, HOCKLEY CO, TX 79358

of Personnel: 8 Hours Paid per Person:

of Apparatus: 2 Total Call Duration: 01:00:00

We received a call from PD stating that there was a fire alarm going off at said location. Dispatch stated that they had attempted to contact Smyer Fire twice with no response. We were dispatched and while enroute canceled just

past 1585 and 168. We then returned to get fuel and returned to the station.

2023153 0 5/16/2023 18:51 143 - Grass fire

Address: Intersection of AMERICA RD & CHEYENNE RD, HOCKLEY CO, TX

of Personnel: 9 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 4 Total Call Duration: 01:24:00

RECEIVED CALL OF GRASS FIRE UNITS RESPONDED FIRE WAS EXTINGUISHED FIRE UNITS WENT 10-8

2023152 0 5/16/2023 14:08 151 - Outside rubbish, trash or waste fire

Address: 3000 N FM 303, HOCKLEY CO, TX 79336

of Personnel: 10 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 5 Total Call Duration: 00:52:00

Dispatched to 3000 block of N 303 in regards to a structure fire at old school in

.00

Total Man Hours: .00

petit. B14 & T9 responded two men. Upon arrival trash piles were burning along with partial wall. Fire personnel extinguished fire and returned to service.

2023148 0 5/14/2023 15:40 131 - Passenger vehicle fire

Address: Intersection of N BARTON LN & E STATE HIGHWAY 114, OPDYKE, TX

of Personnel: 8 Hours Paid per Person: Total Man Hours; .00

of Apparatus: 4 Total Call Duration: 00:47:00

Dispatched to a vehicle fire on hwy 114. Citizen stopped and used a fire extinguisher before fire dept arrival. Once on scene fire dept personnel sprayed down hot and smoldering parts on vehicle and then cleared the scene and returned to the station.

2023147 0 5/13/2023 14:18 131 - Passenger vehicle fire

Address: 2473 E STATE HIGHWAY 114, HOCKLEY CO, TX 79336

of Personnel: 7 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 4 Total Call Duration: 00:50:00

Dispatched to wright collision on hwy 114 for vehicle fire. B14 responded two men. Upon arrival engine compartment was fully involved. Fire personnel extinguished fire and returned to service.

2023142 0 5/9/2023 08:30 143 - Grass fire

Address: 2483 E STATE HIGHWAY 114, HOCKLEY CO, TX 79336

of Personnel: 3 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 3 Total Call Duration: 00;30;00

We received a call reporting a grass fire at said location. Upon arrival we extinguished a bar ditch fire. We then returned to the station and put the truck back in service.

2023138 0 5/6/2023 16:48 322 - Motor vehicle accident with injuries

Address: Intersection of E FM 1585 & QUAIL RD, HOCKLEY CO, TX

of Personnel: 8 Hours Paid per Person: Total Man Hours; .00

of Apparatus: 3 Total Call Duration: 00:58:00

We received a call reporting a wreck at said location. Upon arrival and after investigation everyone was out of the vehicle. We stoodby until released by HCSO. We then returned to the fire station.

2023137 0 5/6/2023 15:24 611 - Dispatched & canceled en route

Address: 921 ROBIN RD, HOCKLEY CO, TX 79336

of Personnel: 4 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 3 Total Call Duration: 00:02:30

We received a call reporting an unknown type fire at said location. We were immediately called back and cancelled by dispatch.

2023136 0 5/5/2023 17:13 413 - Oil or other combustible liquid spill

Address: Intersection of N FM 303 & W FM 597, HOCKLEY CO, TX

of Personnel: 6 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 3 Total Call Duration: 01:17:00

LEVELLAND FIRE DEPARTMENT RECEIVED CALL IN REFERENCE TO A HYDRAULIC OIL / FLUID SPILL NEAR THE INTERSECTION OF WEST FM 597 & NORTH FM 303. ONLY INFORMATION AT TIME OF DISPATCH WAS THAT "SOMETHING" HAD BEEN STRUCK AND WAS LEAKING HYDRAULIC OIL / FLUID ON ROADWAY. UNITS C1 AND B14 RESPONDED TO LOCATION. HOCKLEY COUNTY SHERIFF DEPUTIES ARRIVED ON SCENE PRIOR TO FIRE PERSONNEL AND ADVISED DISPATCH VIA TWO-WAY RADIO THAT A HYDRAULIC LINE ON A TRACTOR WAS LEAKING FLUID / OIL ON HIGHWAY ON ROADWAY. DEPUTY REQUESTED TEXAS DEPARTMENT OF TRANSPORTATION TO RESPOND TO LOCATION. FIRE UNITS ARRIVED ON SCENE AND ASSISTED IN KEEPING VEHICLE TRAFFIC AWAY FROM INCIDENT AND MONITORED SITUATION TO MAKE SURE NO FIRE THREAT WAS PRESENT. FIRE UNITS REMAINED ON LOCATION UNTIL SCENE WAS NO LONGER A HAZARD. NO FURTHER AT THIS TIME. *****EOR*****

2023131 0 5/2/2023 21:55 631 - Authorized controlled burning

Address: 270 CRESTVIEW ST, HOCKLEY CO, TX 79336

of Personnel: 3 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 2 Total Call Duration: 00:25:00

LEVELLAND FIRE DEPARTMENT RECEIVED CALL FROM A PASSERBY ON HIGHWAY 114, JUST EAST OF CITY LIMITS OF LEVELLAND, IN REFERENCE TO AN UNKNOWN TYPE OF FIRE. CALLER ADVISED THAT THEY COULD SEE FLAMES IN THE AREA NEAR A RESIDENCE, JUST EAST OF OPYDKE WEST ON SOUTH SIDE OF HIGHWAY. LEVELLAND FIRE DEPARTMENT HAD RECEIVED A CALL OF A CONTROLLED BURN ON CRESTVIEW ROAD, APPROXIMATELY 1-2 HOURS PRIOR TO THIS CALL. SQUAD 11 RESPONDED TO LOCATION TO CONFIRM THAT THE

June 01, 2023 19:18 Page 4 of 6

PASSERBY CALL-IN WAS THE CONTROLLED BURN ON CRESTVIEW. UPON ARRIVAL, FIRE CREW DID MAKE CONTACT WITH LANDOWNER AT 270 CRESTVIEW, WHOM HAD A CONTROLLED BURN IN PROGRESS. LANDOWNER ADVISED THAT THE BURN WAS CONTROLLED AND FIRE DEPARTMENT WAS NOT NEEDED AT LOCATION. FIRE CREW CLEARED SCENE. NO FURTHER AT THIS TIME. *****EOR****

2023130 0 5/1/2023 18:42 150 - Outside rubbish fire, other

Address: 2785 BELVEDERE RD, HOCKLEY CO, TX 79336

of Personnel: 12 Hours Paid per Person: Total Man Hours: .00

of Apparatus: 7 Total Call Duration: 00:54:00

Total Number of Incidents in this District: 15 Grand Total Call Duration: 0 Days, 13:2

June 01, 2023 19:18 Page 5 of 6

Report Filter Settings

Report Name:

County Monthly by Date - with Narrative

Filter Name:

Date Range, District, and Incident Type Code

Filter Expression: (Not Is Null [IncidentNumber]) And ([AlarmDateTime] is between '5/1/2023 00:00' and '5/31/2023 23:59') And ([DistrictID] equals '2 - 2')

Motion by Commissioner Carter, second by Commissioner Clevenger, 4 votes yes, 0 votes no, that Commissioners Court approved the contract for skilled care/rehabilitation services between Hockley County and Lynwood Nursing rehab. As per Order Authorizing Contract with Lynwood Manor recorded below.

COUNTY OF HOCKLEY

HOCKLEY COUNTY, TEXAS

ORDER AUTHORIZING CONTRACT WITH LYNWOOD MANOR

The Commissioners' Court of Hockley County has hereby approved AND IT IS SO ORDERED that the contract for Skilled Care/Rehab services between Hockley County and Lynwood Nursing and Rehab is hereby approved.

DONE IN OPEN COURT, this the 12th day of June, 2023, upon motion by Commissioner, and Court , seconded by Commissioner, I of the Court of the court

Sharla Baldridge, Hockley County Judge

ATTEST

Jennifer Palermo, County Clerk, Ex-Officio Clerk of Commissioners Court of Hockley County, Texas

HOCKLEY COUNTY

INDIGENT HEALTH CARE

VETERANS SERVICE OFFICE

PUBLIC ASSISTANCE

Cara Phelan-Administrator Mailing Address: 802 Houston St., Ste. 109 Physical Address: 811 Austin St. Lower Level Levelland, Texas 79336



Phone: 806-894-4264 Fax: 806-894-2494 Email: cphelan@hockleycounty.org

CONTRACT FOR SKILLED CARE/REHABILITATION SERVICES

Facility:

Lynwood Nursing and Rehab

Patient:

Valerie Taylor

Program:

Hockley County Indigent Health Care

Lynwood Nursing and Rehab and Hockley County Indigent Health Care hereby agree to the terms of this Contract for Skilled Nursing Services for the above-mentioned Patient.

1. RELATIONSHIP TO PARTIES.

Patient will be transferred to and will be considered a patient of the Lynwood Nursing and Rehab and Hockley County Indigent Health Care shall be the payor for the Patient's room and board under the following circumstances:

- a. Hockley County Indigent Health Care pays for thirty (30) days in patient in a hospital or skilled nursing facility, or a maximum of \$30,000.00 whichever comes first.
- b. The patient listed above applied for Indigent Health Care and became eligible as of 6-1-2023.
- c. The base rate has been established according to the Resource Utilization Grouping (RUG)-III System. (See Attached Chart)
- d. Based on a patient assessment from Lynwood Nursing and Rehab, the abovementioned patient is designated a group **SE3** on the **RUG-III**.
- e. The daily rate does not include physician services or prescription drugs. These additional services must be billed separately.

2. PRESCRIPTION MEDICATION:

Indigent Health Care uses Integrated Prescription Management as our prescription management provider. If an outside pharmacy is used, Indigent Health Care prescriptions can be purchased at United Pharmacy, Levelland or Walmart Pharmacy, Levelland. A Prescription Eligibility Card will be provided for the client upon admittance.

- a. Indigent Health Care will cover three (3) prescription medications per month.
- b. Indigent Health Care does not pay for narcotics and other types of pain medication.

- c. Over the Counter medication is not covered by Indigent Health Care/
- d. If the patient requires more than three (3) prescriptions a month, the patient is responsible for paying for the prescriptions that are not covered by Indigent Health Care. The patient is responsible for paying for any narcotic medication or other pain medication that is not covered by Indigent Health Care.

3. OPTIONAL SERVICES:

- a. Physical Therapy:
 - i. Must have a prescription from a physician.
 - ii. Maximum of Twelve (12) treatments.
- b. Dental: Indigent Health Care will pay for basic dental treatment, which includes:
 - i. One exam per year, with one set of x-rays per year.
 - ii. Basic tooth extraction
 - iii. Fillings
 - iv. All dental services must be pre-authorized.
 - v. Abbeville Dental Levelland is the only dental provider covered by Indigent Health Care.

c. Vision:

- i. Levelland Eye and Vision is the only eligible provider.
- ii. Indigent Health Care covers one (1) eye examination every year.
- iii. One pair of Medicaid eligible glasses every two years.
- 4. Indigent Health Care does not cover Durable Medical Equipment (DME).
- 5. All additional services, including but not limited to diagnostic testing, changes in treatment plan, etc. must receive prior approval from Hockley County Indigent Health Care.
- 6. To be considered for payment, all bills must be received within 95 days of the date of service.
- 7. Bills should be sent to: Hockley County Indigent Health Care. 802 Houston Street, Suite 109, Levelland, Texas.
- 8. Indigent Health Care pays based on the Texas Medicaid rates, rules and procedures. Lynwood Nursing and Rehab, as a Texas Medicaid Provider, shall accept the payment from Indigent Health Care as payment in full and shall not bill the patient or patient's family.
- 9. Lynwood Nursing and Rehab shall work with the patient and the patient's family regarding plans for the patient after the maximum of thirty (30) days of in-patient, skilled nursing care or \$30,000 whichever comes first.

10.LIMITATION OF LIABILITY:

To the extent permitted by law, Lynwood Nursing and Rehab shall indemnify, defend, and hold harmless Hockley County from all liability, claim, lawsuit, injury, loss, expense, or damage resulting from or relating to the acts or omissions of Lynwood Nursing and Rehab in connection with the representations, duties and obligations of Lynwood Nursing and Rehab under this Contract.

11. COMPLY WITH ALL LAWS, REGULATIONS AND STANDARDS:

In performing their obligations under this Contract, each party shall comply with all applicable statutes, rules, regulations, and accreditation requirements.

12. TERM:

The term of this Contract shall begin on the day of admission and shall end when the patient has been an inpatient for a maximum of Thirty Days (30) or when the patient has reached the maximum annual benefit of \$30,000, whichever occurs first. Indigent Health Care cannot extend the Contract beyond the Thirty Days (30).

The parties agree to the terms of this Contract and have caused this Contract to be executed by their duly authorized representatives as of the dates set forth below.

| Hockley County Name: Sharela Foldricky | Lynwood Nursing and Rehab Name: JUSSICA Whitesidus |
|--|--|
| Title: Hackbay County Judge | Title: Administrator |
| Phone: 806-994-128-60 | Phone: 804-894-2804 |
| Emall: shaldridge Whokkey county org | Email: admin. lynwood @ 810005. Com |
| Date: 4/2/2023 | Date: (6/8/3-3 |

TEXAS NURSING FACILITY (NF) MEDICAID RATE SETS EFFECTIVE 9/1/14

 $x_{k} = \{x_{k} = x_{k} \mid x_{k} \in \mathcal{X}_{k}^{k} = x_{k} \in \mathcal{X}_{k}^{k} \}$

House Bill (HB) 154 requires the Health and Human Services Commission (HHSC) to ensure that the rate component derived from reported liability insurance costs is paid only to those facilities that purchase liability insurance acceptable to the commission. To comply with HB 154, the portion of the general and administrative rate component derived from reported liability insurance costs has been excluded from the rates listed below. An add-on payment of \$1.67 per diem will be paid to facilities that verify both professional and general liability insurance coverage acceptable to HHSC. The add-on payment for professional liability insurance only is \$1.53 per diem and the add-on payment for general liability insurance only is \$0.14 per diem.

| Base Rate - No liability insurance | | | | | | |
|------------------------------------|----------|----------|-----------|---------------|---------|----------|
| | Direct | Other | | General | | |
| | Care | Resident | | and | Fixed | |
| RUG | Staff | Care | . Dietary | Admin. | Capital | Total |
| RAD | \$109.87 | \$36.79 | \$12.62 | \$27.25 | \$6.83 | \$193.36 |
| RAC | \$92.97 | \$31.12 | \$12.62 | \$27.25 | \$6.83 | \$170.79 |
| RAB | \$85.18 | \$28.52 | \$12.62 | \$27.25 | \$6.83 | \$160.40 |
| RAA | \$70.70 | \$23.67 | \$12.62 | \$27.25 | \$6.83 | \$141.07 |
| SE3 | \$138.02 | \$46.21 | \$12.62 | \$27.25 | \$6.83 | \$230.93 |
| SE2 | \$111.90 | \$37.47 | \$12.62 | \$27.25 | \$6.83 | \$196.07 |
| SE1 | \$92,56 | \$30.99 | \$12,62 | \$27.25 | \$6.83 | \$170.25 |
| SSC | \$89.58 | \$29.99 | \$12.62 | \$27.25 | \$6.83 | \$166.27 |
| SSB | \$82.78 | \$27.71 | \$12.62 | \$27.25 | \$6.83 | \$157.19 |
| SSA | \$82.51 | \$27.62 | \$12.62 | \$27.25 | \$6.83 | \$156.83 |
| CC2 | \$66.76 | \$22.36 | \$12.62 | \$27.25 | \$6.83 | \$135.82 |
| CC1 | \$61.40 | \$20.55 | \$12.62 | \$27.25 | \$6.83 | \$128.65 |
| CB2 | \$58.35 | \$19.54 | \$12.62 | \$27.25 | \$6.83 | \$124.59 |
| CB1 | \$54.13 | \$18.13 | \$12.62 | \$27.25 | \$6.83 | \$118.96 |
| CA2 | \$49.62 | \$16.62 | \$12.62 | \$27.25 | \$6.83 | \$112.94 |
| CA1 | \$44.55 | \$14.91 | \$12.62 | \$27,25 | \$6.83 | \$106.16 |
| IB2 | \$49.76 | \$16.65 | \$12.62 | \$27.25 | \$6.83 | \$113.11 |
| IB1 | \$44.02 | \$14.73 | \$12.62 | \$27.25 | \$6.83 | \$105.45 |
| IA2 | \$37.16 | \$12.44 | \$12.62 | \$27.25 | \$6.83 | \$96.30 |
| IA1 | \$33.43 | \$11.19 | \$12.62 | \$27.25 | \$6.83 | \$91.32 |
| BB2 | \$48.22 | \$16.14 | \$12.62 | \$27.25 | \$6.83 | \$111.06 |
| BB1 | \$40.31 | \$13.50 | \$12.62 | \$27.25 | \$6,83 | \$100.51 |
| BA2 | \$35.81 | \$11.99 | \$12.62 | \$27.25 | \$6.83 | \$94.50 |
| BA1 | \$29.07 | \$9.74 | \$12.62 | \$27.25 | \$6.83 | \$85.51 |
| PE2 | \$54.62 | \$18,29 | \$12,62 | \$27.25 | \$6.83 | \$119.61 |
| PE1 | \$49.72 | \$16.64 | \$12,62 | \$27.25 | \$6.83 | \$113.06 |
| PD2 | \$50.91 | \$17.04 | \$12.62 | \$27.25 | \$6.83 | \$114.65 |
| PD1 | \$45.85 | \$15.35 | \$12.62 | \$27.25 | \$6.83 | \$107.90 |
| PC2 | \$43.70 | \$14.63 | \$12.62 | \$27.25 | \$6.83 | \$105.03 |
| PC1 | \$40.47 | \$13,55 | \$12.62 | \$27.25 | \$6.83 | \$100.72 |
| PB2 | \$38.48 | \$12.88 | \$12.62 | \$27.25 | \$6.83 | \$98.06 |
| PB1 | \$34.92 | \$11.69 | \$12.62 | \$27.25 | \$6.83 | \$93.31 |
| PA2 | \$30.57 | \$10.23 | \$12.62 | \$27.25 | \$6.83 | \$87.50 |
| PA1 | \$26.86 | \$9.00 | \$12.62 | \$27,25 | \$6.83 | \$82.56 |
| BC1 | \$26.86 | \$9.00 | \$12.62 | \$27.25 | \$6.83 | \$82.56 |
| PCE | \$26.86 | \$9.00 | \$12.62 | \$27.25 | \$6,83 | \$82,56 |
| Vent Cont. | \$96.81 | \$31.81 | | America di Pe | | \$128.62 |
| Vent < Cont. | \$38.72 | \$12.73 | yranaka, | | | \$51.45 |
| Pediatric Trach. | \$58.09 | \$19.08 | | | | \$77.17 |

There being no further business to come before the Court, the Judge declared Court adjourned, subject to call.

The foregoing Minutes of a Commissioner's Court meeting held on the day of A. D. 2023, was examined by me and approved.

Commissioner, Precinct No. 1

Commissioner, Precinct No.3

Commissioner, Precinct No. 2

Commissioner, Precinct No.

County Judge

JENNIFER PALERMO, County Clerk, and Ex-Officio Clerk of Commissioners' Court Hockley County, Texas

