

## CONFIDENTIALITY AND NONDISCLOSURE AGREEMENT

This Confidentiality and Nondisclosure Agreement (“Agreement”) is made and entered into this 12 day of September, 2017 (“Effective Date”) by and between Boon-Chapman Benefit Administrators, Inc. (“Boon-Chapman”), having its corporate headquarters at 9401 Amberglen, Suite 100, Austin, TX 78729, Fort Bend County (“County”), and Innovative Rx Strategies, LLC (“Innovative Rx Strategies”) having its principal place of business at 520 Lake Cook Road, Suite 130, Deerfield, IL 60015 (each a “Party” and together the “Parties”).

WHEREAS, County and Boon-Chapman desire to review certain information from Innovative Rx Strategies for the purpose of evaluating service offerings by Maxor National Pharmacy Services Company (“Maxor”) to County and evaluating the terms and conditions of the pharmacy benefit management (“PBM”) contract between Maxor and County, as amended, (“PBM Agreement”);

WHEREAS, Innovative Rx Strategies issued a Request for Proposal for Pharmacy Benefit Management Services (“RFP”) on or about March 23, 2017 on behalf of Boon-Chapman to negotiate market competitive PBM pricing for Boon-Chapman’s clients;

WHEREAS, Boon-Chapman and Innovative Rx Strategies consider the information requested to be confidential information (“Confidential Information”) as defined below in Section 1;

WHEREAS, Boon-Chapman and Innovative Rx Strategies requires that County treat such information as confidential as a condition to disclosing the requested Confidential Information

NOW, THEREFORE, in consideration of the mutual promises herein set forth, the Parties agree as follows:

1. **Definition of Confidential Information.** The Confidential Information that Innovative Rx Strategies and Boon-Chapman is supplying to the County under this Agreement means the information listed below:
  - a) an oral pricing analysis of County's 2016 prescription drug spend by comparing County's 2016 claims utilization with Maxor against County's 2016 pricing with Maxor to see if Maxor under-performed based upon the pricing in County's 2016 Renewal Amendment to Agreement Between Fort Bend County and Maxor Plus, LTD For Prescription Drug Management Services Pursuant to RFP 05-004;
  - b) an oral discussion on what Innovative Rx Strategies reasonably believes County can save on its annual prescription drug spend beginning January 1, 2018 if County renegotiates its current Maxor pricing as set forth in County's Addendum to Pharmacy Services Agreement Between MaxorPlus, LTD. and Fort Bend County dated January 1, 2017 compared to pricing negotiated by Innovative Rx Strategies with other PBMs in the market.
  - c) an oral discussion of the results of the Boon-Chapman RFP process including what Boon-Chapman and Innovative Rx Strategies reasonably believe County can save on its annual prescription drug spend beginning January 1, 2018 based upon the pricing terms and conditions Boon-Chapman and Innovative Rx Strategies has negotiated with Express Scripts, Inc. (“ESI”);
  - and d) a written cost analysis entitled, “Boon-Chapman-Fort Bend County-2017 RFP-PBM Cost Comparison” prepared by Innovative Rx Strategies which summarizes the savings Boon-Chapman and Innovative Rx strategies reasonably believes County can save on its prescription drug spend effective January 1, 2018 based upon Boon-Chapman’s pricing with ESI The Confidential Information provided by Innovative Rx Strategies and Boon-Chapman to County is considered by Innovative Rx Strategies and Boon-Chapman to be confidential, non-public, trade secret, proprietary, and valuable commercial information. Any Confidential

Information submitted by Innovative Rx Strategies and Boon-Chapman to County in an electronic or written format will be clearly and conspicuously marked or designated as "confidential" or "proprietary." Furthermore, Innovative Rx Strategies will advise County whether any Confidential Information disclosed orally is "confidential" or "proprietary" prior to disclosure.

Confidential Information does not include the terms of this Agreement, the aggregate projected, estimated or actual savings for County, any prescription drug expenses invoices adjudicated under the Fort Bend County Employee Benefit Plan or prescription drug utilization reports specific to the Fort Bend County Employee Benefit Plan. Furthermore, Confidential Information does not include any information as set forth in Section 5 of this Agreement.

2. **Texas Public Information Act.** All Parties acknowledge that County is subject to the Texas Public Information Act, Texas Government Code, Chapter 552 ("PIA") and agree that this Agreement is subject to the PIA. To the extent that compliance with any provision of this Agreement would result in non-compliance with the PIA, that portion of this Agreement has no force or effect. If County is requested under the provisions of the PIA, to disclose any item or data furnished that is subject to this agreement, County will notify the Party whose information has been requested in accordance with Texas Government Code Section Sec. 552.305. County will not release the information unless required to do so by the Texas Attorney General or a court of law. It is acknowledged by all Parties that County, their officers and employees have the right to rely on the Attorney General's decision and that County's officers and employees have no liability or obligation to any Party for disclosure of any item or data furnished to County or to any person in reliance on the Attorney General's decision or a court order.
3. **Use of Confidential Information.** Except as otherwise may be required by the PIA, County may use and disclose Confidential Information only for the purpose described herein. County further agrees not to use Confidential Information for any purpose, except that set forth above. Further, both the County agrees not to either directly or indirectly, disclose, use or reproduce Confidential Information without prior written authorization from Innovative Rx Strategies and Boon-Chapman. In particular, County agrees to not disclose Confidential Information to any third party, including but not limited to a PBM, health insurance carrier, health plan, insurance broker, TPA, group purchasing organization, coalition, a governmental entity, association, another client/customer, and/or consultant who is not a Party to this Agreement without the prior written consent of Innovative Rx Strategies and Boon-Chapman. However, the Parties agree that County may allow representatives of a governmental body, and/or employees of the County to receive Innovative Rx Strategies' and Boon-Chapman's Confidential Information if the representatives of a governmental entity, and/or employees of the County have been made aware of this Agreement and its terms. The Parties acknowledge and agree that the use or disclosure of Confidential Information under this Agreement shall be in accordance with all applicable state and federal laws, including without limitation, the Health Insurance Portability and Accountability Act ("HIPAA") and any regulations promulgated thereunder.
4. **Standard of Care.** County shall protect Innovative Rx Strategies' and Boon-Chapman's Confidential Information with the same degree of care, but no less than a reasonable degree of care, as County normally uses in the protection of its own confidential and proprietary information. County shall use this standard of care to prevent the unauthorized use, disclosure, dissemination, or publication of the Innovative Rx Strategies' and Boon-Chapman Confidential Information.

5. **Exclusions.** The restrictions set forth shall not apply with respect to any of the Confidential Information that:
- (a) is already available to the public; (b) becomes available to the public through no fault or breach of County its elected officials, representatives, and employees; (c) is independently developed by the County without breach of this Agreement; (d) is rightfully received by the County from a third party without a duty of confidentiality or other restriction on disclosure; (e) is disclosed by the County with the Innovative Rx Strategies' and Boon-Chapman's prior written approval; (f) is required to be disclosed pursuant to an order of a court, administrative agency, or governmental body, or any law, rule, regulation, subpoena, judicial or administrative process, or in accordance with applicable professional standards; (g) is the subject of this Agreement upon execution of an agreement for Prescription Management Services between County and Boon Chapman (or Boon Chapman's selected vendor) or (h) is necessary for County to deliberate or execute the aforementioned agreement to comply with the Texas Open Meeting Act, Texas Government Code, Chapter 551; If County is required by a government body or court of law to disclose Confidential Information, County (as applicable) agrees to give the Innovative Rx Strategies and Boon-Chapman reasonable advance notice (when possible) so that the Innovative Rx Strategies and Boon-Chapman may contest the disclosure or seek a protective order or modification of any disclosure, subject to applicable confidentiality constraints imposed by such government body or court of law or applicable law. County shall thereafter be entitled to disclose Confidential Information to the extent required by law.
6. **Proprietary Interest.** County does not acquire any rights in Innovative Rx Strategies' or Boon-Chapman Confidential Information under this Agreement except the limited rights necessary to carry out the purposes set forth in this Agreement. This Agreement grants no license by a Party to any other Party to this Agreement, either directly or by implication, estoppel or otherwise. This Agreement is not intended, nor shall it be construed, to confer any right upon any person or entity not a Party to this Agreement.
7. **Warranty.** Innovative Rx Strategies and Boon-Chapman warrants that it has the right to make the disclosures under this Agreement. **NO OTHER WARRANTIES ARE MADE BY ANY PARTY UNDER THIS AGREEMENT. ANY INFORMATION EXCHANGED UNDER THIS AGREEMENT IS PROVIDED "AS IS."**
8. **Term and Termination.** This Agreement shall become effective as of the Effective Date and terminate upon the earliest of: (a) January 1, 2018 (b) upon ten (10) days written notice from one Party to the other, with or without cause; or (c) automatically at the conclusion of the Parties' relationship. Termination of this Agreement shall not relieve County or Boon-Chapman of any of the obligations set forth in this Agreement with respect to Innovative Rx Strategies' Confidential Information and both County and Boon-Chapman shall continue to maintain information as confidential as is required by this Agreement.
9. **Miscellaneous.**
- a. The Parties mutually acknowledge and agree that this Agreement shall be construed and enforced in accordance with the laws of the State of Texas, without regard to the internal law of Texas regarding conflict of laws. **The Parties acknowledge that they have read and understand this clause and agree willingly to its terms.**
  - b. No Party has an obligation under this Agreement to purchase any service or item from any other Party to this Agreement. No Party has an obligation under this Agreement to commercially offer any products using or incorporating Confidential Information.

c. Each Party acknowledges that damages for improper use or disclosure of Confidential Information shall be irreparable; therefore, the injured Party is entitled to seek equitable relief, including injunction and preliminary injunction, in addition to all other remedies.

d. All additions or modifications to this Agreement must be made in writing and signed by all the Parties. This Agreement does not create any agency or partnership relationship. This Agreement is not assignable or transferable without the prior written consent of the other Parties. This Agreement applies to all successors in interest.

e. This document contains the entire agreement between the Parties as to the Confidential Information and supersedes any previous or contemporaneous understandings, commitments, or agreements, whether written or oral, as to such Confidential Information, including the Confidentiality Agreement entered into by and between County, Boon-Chapman, and Innovative Rx Strategies on or about February 4, 2017.

f. All duties and obligations set forth in this Agreement apply equally to all officers, directors, principals, and employees of the Parties. County and Boon-Chapman agree that all Confidential Information will only be made known to employees of the County and Boon-Chapman who have a need to know such Confidential Information.

g. If any provision of this Agreement is or becomes invalid, illegal or unenforceable in any respect, shall be invalid, illegal or unenforceable in any respect, it shall be ineffective to the extent of such invalidity, illegality or unenforceability, and the validity, legality and enforceability of the remaining provisions contained in this Agreement shall remain in effect.

h. Any notice given under this Agreement shall be deemed received if in writing, and if sent by hand delivery, electronic mail, overnight courier which provides confirmation of delivery, or certified mail, return receipt requested, sent to the applicable party at its address set forth with its signature to this Agreement, or to such other address or to the attention of such other person as either party may designate in writing pursuant to this provision. Notices sent by certified mail shall be deemed received three (3) business days following mailing.

i. This Agreement may be executed in counterparts and transmitted by electronic mail.

*Remainder left blank*


*Execution page follows*

IN WITNESS WHEREOF, the Parties have executed this Agreement as of the Effective

Date.

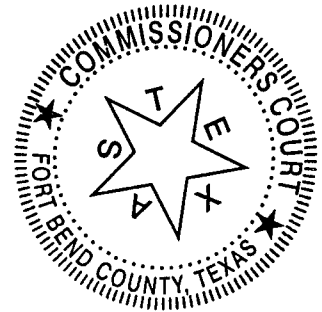
**FORT BEND COUNTY**

Attest:

By:   
Title: County Judge  
Clerk

  
Fort Bend County

Notice Address: Fort Bend County  
Attn: County Judge  
401 Jackson Street  
Richmond, Texas 77469




w/copy to  
Fort Bend County Attn: Risk Manager 301 Jackson Street  
Richmond, Texas 77469  
Via email: [Scott.Wyatt.Scott@fortbendcountytexas.gov](mailto:Scott.Wyatt.Scott@fortbendcountytexas.gov)

**BOON-CHAPMAN**

By:   
Title: President

Notice Address: Boon-Chapman  
9401 Amberglen, Suite 100  
Austin, TX 78729 Attn: Kevin Chapman  
[kevinc@boonchapman.com](mailto:kevinc@boonchapman.com)

**INNOVATIVE RX STRATEGIES, LLC**

By:   
Title: Co-CEO

Notice Address:  
Innovative Rx Strategies, LLC 520 Lake Cook Road, Suite 130  
Deerfield, IL 60015  
Attn: Michael Staab, J.D., LL.M.- Co-CEO [michael.staab@innovativrxstrategies.com](mailto:michael.staab@innovativrxstrategies.com)

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**CERTIFICATE OF INTERESTED PARTIES**

**FORM 1295**

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.  
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY  
CERTIFICATION OF FILING**

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**

Boon-Chapman Benefit Administrators Inc  
Austin, TX United States

Certificate Number:  
2017-250756

Date Filed:  
08/16/2017

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**

Fort Bend County

Date Acknowledged:

**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**

NDA - PBM  
Non-Disclosure for PBM RFP Results Discussion

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Chapman, Kevin	AUSTIN, TX United States	X	
	Leftwich, Nyle	Austin, TX United States	X	
	Mabrito, Carri	Austin, TX United States	X	

**5 Check only if there is NO Interested Party.**

**6 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



*Kevin Chapman, Pres.*  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kevin Chapman, this the 16<sup>th</sup> day of August, 2017, to certify which, witness my hand and seal of office.

*Jenna Johnson* Signature of officer administering oath  
 Jenna Johnson Printed name of officer administering oath  
 HR + Support + Manager Title of officer administering oath

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			Controlling	Intermediary
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	Leftwich, Nyle	Austin, TX United States	X	
	Mabrito, Carri	Austin, TX United States	X	

**5 Check only if there is NO Interested Party.**

**6 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

\_\_\_\_\_  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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## OFFICE USE ONLY CERTIFICATION OF FILING

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
Innovative Rx Strategies, LLC  
Deerfield, IL United States

Certificate Number:  
2017-250844

Date Filed:  
08/16/2017

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**  
Fort Bend County

Date Acknowledged:

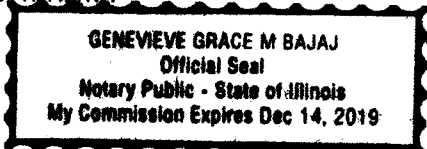
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NDA-PBM  
Non-Disclosure for PBM RFP Results Discussion

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Staab, Michael	Deerfield, IL United States	X	
	Madsen, Greg	Deerfield, IL United States	X	

5 Check only if there is NO Interested Party.

**6 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



*[Handwritten Signature]*  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael Staab, this the 17<sup>th</sup> day of August, 2017, to certify which, witness my hand and seal of office.

*[Handwritten Signature]* Genevieve Grace M BAJAJ, Officer  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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Fort Bend County

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