

Tri-County Behavioral Healthcare Board of Trustees Meeting

April 27, 2017



Notice is hereby given that a regular meeting of the Board of Trustees of Tri-County Behavioral Healthcare will be held on Thursday, April 27, 2017. The Business Committee will convene at 9:00 a.m., the Program Committee will convene at 9:30 a.m. and the Board meeting will convene at 10:00 a.m. at 233 Sgt. Ed Holcomb Blvd S, Conroe, Texas. The public is invited to attend and offer comments to the Board of Trustees between 10:00 a.m. and 10:05 a.m.

AGENDA

I. Organizational Items

- A. Chair Calls Meeting to Order
- B. Public Comment
- C. Quorum
- D. Review & Act on Requests for Excused Absence

II. Approve Minutes - February 23, 2017

III. Executive Director's Report - Evan Roberson

- A. Building Transitions
- B. 1115 Protocol
- C. Legislative Updates

IV. Chief Financial Officer's Report - Millie McDuffey

- A. FY 2016 HCS, ICF, Texas Home Living and MEI Cost Reports
- B. FY 2018 Budget Process
- C. County Annual Funding Request
- D. Fixed Asset Inventory
- E. Texas Council Risk Management Fund Strategic Planning and Board of Trustees Meeting
- F. CFO Consortium

V. Program Committee

Information Items

- A. Community Resources Report..... Pages 8-11
- B. Consumer Services Reports for February and March..... Pages 12-15
- C. Program Updates..... Pages 16-19
- D. FY 2017 Goals and Objectives Progress Report..... Pages 20-24
- E. 2nd Quarter FY 2017 Corporate Compliance and Quality Management Report..... Pages 25-26
- F. 3rd Quarter FY 2017 Corporate Compliance Training..... Pages 27-28
- G. Medicaid 1115 Transformation Waiver Project Status Report..... Pages 29-31
- H. Program Presentation - Annual Board and Management Team Training

VI. Executive Committee

Action Items

- A. Approve Board Policies..... Pages 32-39

Information Items

- B. Personnel Report for February and March 2017..... Pages 40-44
- C. Texas Council Risk Management Fund Claims Summary for February and March 2017..... Pages 45-47

VII. Business Committee

Action Items

- A. Approve February 2017 Financial Statements..... Pages 48-61
- B. Approve March 2017 Financial Statements..... Pages 62-75
- C. Approve FY 2017 Budget Revision..... Pages 76-78
- D. Ratify Sale of Excess Furniture..... Pages 79-83

- E. Approve Vehicle Replacement Cleveland IDD Program..... *Pages 84-93*
- F. Approve Ratification of HHSC/DADS Amendment #3..... *Pages 94-98*
- G. Approve Mental Health First Aid Grant Contract..... *Pages 99*
- H. Approve YES Pre-Engagement Services Contract - YESPE *Pages 100-103*

Information Items

- I. 2nd Quarter FY 2017 Investment Report..... *Pages 104-108*
- J. Board of Trustees Unit Financial Statements for February and March 2017..... *Pages 109-111*
- K. Cleveland Supported Housing, Inc., Quarterly Update..... *Pages 112*
- L. Building Consolidation and Real Estate Sale Update *Pages 113*

VIII. Executive Session in Compliance with Texas Government Code Section 551.071, Consultation with Attorney.

Posted By:

Ava Green
Executive Assistant

Tri-County Behavioral Healthcare

P.O. Box 3067
Conroe, TX 77305

BOARD OF TRUSTEES MEETING

February 23, 2017

Board Members Present:

Patti Atkins
Sharon Walker
Richard Duren
Gail Page
Tracy Sorensen
Morris Johnson

Board Members Absent:

Jacob Paschal
Janet Qureshi

Tri-County Staff Present:

Evan Roberson, Executive Director
Millie McDuffey, Chief Financial Officer
Kathy Foster, Director of IDD Provider Services
Tanya Bryant, Director of Quality Management and Support
Catherine Prestigiovanni, Director of Strategic Development
Breanna Robertson, Director of Crisis Services
Kenneth Barfield, Director of Management Information Systems
Amy Forester, Director of HR and HRD
Kelly Shropshire, Director of IDD Authority Services
Tabatha Abbott, Cost Accountant
Ava Green, Administrative Assistant
Jamila Brinson, Legal Counsel
Joyce Freeman, Public Information Coordinator

Guests:

Scott Hayes and Mannix Smith, ISC Group
Mike Duncum - WhiteStone Realty

Call to Order: Board Chair, Patti Atkins, called the meeting to order at 10:05 a.m. at 1506 FM 2854, Conroe, TX.

Public Comment: There were no public comments.

Quorum: There being six (6) members present, a quorum was established.

Resolution #02-17-01

Motion Made By: Patti Atkins

Seconded By: Tracy Sorensen, with affirmative votes by Sharon Walker, Richard Duren, Gail Page and Morris Johnson that it be...

Resolved:

That the Board excuse the absence of Jacob Paschal and Janet Qureshi.

Resolution #02-17-02

Motion Made By: Morris Johnson

Seconded By: Sharon Walker, with affirmative votes by Patti Atkins, Richard Duren, Gail Page and Tracy Sorensen that it be...

Resolved:

That the Board approve the minutes of the January 26, 2017 meeting of the Board of Trustees.

Program Presentation

Bill Bonito, Montgomery Supported Housing, Inc. Board Member from 2007 to 2016.

Longevity Recognitions were presented to Tri-County staff.

Board Chair, Patti Atkins, suspended the agenda to move to Business Committee Information Item IX-E, 401 (a) Retirement Plan Account Review. Scott Hayes, from ISC Group, presented the report.

Executive Director's Report:

The Executive Director's report is on file.

Board Chair, Patti Atkins, suspended the agenda to move to Business Committee Action Item IX-B, Approval of .85 Acre Purchase behind the New Conroe Facility. Mike Duncum with WhiteStone Realty presented the report along with the Conroe Building Consolidation Update.

BUSINESS COMMITTEE:

Resolution #02-17-03

Motion Made By: Tracy Sorenson

Seconded By: Sharon Walker, with affirmative votes by Patti Atkins, Richard Duren, Gail Page and Morris Johnson that it be...

Resolved:

That the Board approve the purchase of .85 Acre Expansion site adjacent to 233 Sgt. Ed Holcomb Blvd S., in Conroe, Texas, authorize a deposit up to \$5,000 to hold the property and authorize the Executive Director to sign all necessary documents for the deposit and sale, with review by Jackson Walker.

Chief Financial Officer's Report:

The Chief Financial Officer's report is on file.

PROGRAM COMMITTEE:

The Community Resources Report was reviewed for information purposes only.

The Consumer Services Report for January 2017 was reviewed for information purposes only.

The Program Updates were reviewed for information purposes only.

EXECUTIVE COMMITTEE:

Resolution #02-17-04

Motion Made By: Tracy Sorensen

Seconded By: Gail Page, with affirmative votes by Patti Atkins, Morris Johnson, Gail Page and Sharon Walker that it be...

Resolved:

That the Board approve deletion of General Administration Board Policy C.12, revisions to policies D.2 and D.4 and implementation of new Policy G.2.

The Personnel Reports for January 2017 were reviewed for information purposes only.

The Texas Council Risk Management Fund Claims Summary for January 2017 was reviewed for information purposes only.

BUSINESS COMMITTEE:

Resolution #02-17-05

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Patti Atkins, Gail Page, Sharon Walker and Tracy Sorensen that it be...

Resolved:

That the Board approve the January 2017 Financial Statements.

Resolution #02-17-06

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Patti Atkins, Sharon Walker, Gail Page and Tracy Sorenson that it be...

Resolved:

That the Board approve the purchase of a 2017 Dodge Grand Caravan for the amount of \$24,730.00 from Liberty-Dayton Chrysler Dodge in Liberty, Texas.

Resolution #02-17-07

Motion Made By: Morris Johnson

Seconded By: Tracy Sorensen, with affirmative votes by Patti Atkins, Sharon Walker, Gail Page and Richard Duren that it be...

Resolved:

That the Board approve the purchase of a 2017 Ford Transit 350 Wagon XL for the amount of \$28,225.31 from BJ Ford in Liberty, Texas.

The Board of Trustees Unit Financial Statement for January 2017 was reviewed for information purposes only.

There was no need for Executive Session.

The regular meeting of the Board of Trustees adjourned at 12:00 p.m.

Adjournment:

Attest:

Patti Atkins
Chair

Date

Sharon Walker
Secretary

Date / /



Executive Director's Report

April 27, 2017

Announcements

- Welcome to our first Board meeting at Sgt. Ed Holcomb! We are so grateful for your support in getting into this new building.
- I wanted to announce that we had 15 of our managers and leaders finish the first year Leadership Tri-County course and an additional 14 persons finished the second year of leadership training. At the 'graduation' for the class on 4/11/2017, each of the participants stood up and shared what they have learned and many of them thanked us for the investment in their development. We are currently planning for a third class to begin next year which will include leadership in the form of project management.
- I will be discussing our need for a bus stop at the new building with the Conroe City Council at 2 p.m. on Wednesday May 10th. Of course you are welcome to attend. I suspect that this may be one of several presentations that I need to make in order to get the bus stop added.
- I am pleased to announce that Tanya Bryant has been selected to serve on the leadership of the Texas Council's Quality Management Consortium. The QM Consortium rotates leadership roles and Tanya will be in line to run the Consortium in a couple of years.
- I am also pleased to announce that I have been asked to lead the Texas Council's Behavioral Health Consortium and Behavioral Health Committee. This is an important role and I was honored to be asked to serve.

Building Transition

The move into our new building has gone very well so far and both our staff and clients have had so many positive things to say about our new environment. All of our Conroe staff, except for the Psychiatric Emergency Treatment Center staff and Maintenance staff are now located at our new facility. We still have several items, including things like the paging system and furniture for this room that we are working to resolve as well as several items that the contractor needs to resolve, but overall I am very pleased with the transition.

1115 Funding Protocol changes

As the Board is aware, we are currently in Demonstration Year (DY) 6 of the Medicaid 1115 Transformation Waiver (1115). The waiver was designed to redirect Upper Payment Limit (UPL) funds, which were used to reimburse hospitals for losses associated with the treatment of persons with Medicaid. The UPL program was split into Delivery System Reform Incentive Payment programs (DSRIP) and Uncompensated Care programs. Our Center took this opportunity to create five (5) programs that filled gaps in our current service delivery system. The five (5) programs include: two (2) expanded psychiatric treatment programs for persons that don't qualify for HHSC services; one (1) integrated healthcare program; one (1) Intellectual Disability crisis program; and, one (1) rather large expansion of crisis outpatient. In total, Tri-County received approximately 3.5 million new dollars for these programs in DY 5 and for the current DY 6.

Tri-County has had to spend money prospectively on these programs and is only reimbursed if we meet targets and 'metrics'. In addition, we have had a small payment for improvement in outcomes for the people we are treating.

Originally the 1115 program was for 5 years, but the state requested and received a full extension for DY 6 and a reduced commitment for DY 7. DY 6 has different funding rules which could impact our program funding, including a requirement to figure out a sustainability plan for the programs, but we are fairly confident that the majority of this funding will be received for DY 6.

However, as a part of a request to extend the waiver for the next 21 months (Calendar Year 7 and Calendar Year 8), the Texas Health and Human Services Commission has proposed to the Center for Medicare and Medicaid Services (CMS) a new way of measuring success and getting paid for services which focuses almost exclusively on outcome 'bundles'.

These outcome bundles will require us to measure outcome performance for our entire system of care on things like measuring Body Mass Index (which we currently do) and for making referrals and ensuring follow-up care (which we are less successful in doing). The new funding protocol will require continued maintenance of effort on the targets and metrics, but this will apparently only make up about 5-15% of the funding. The remaining 85-90% of the funding will be for the outcomes for the people we are treating and the impact of care on our 'system'.

This would have probably been okay for Tri-County because we have met all metrics and outcome measures. However, CMS has determined that they will change the outcomes to nationally normed quality measures which are complex and bring additional challenges.

We are currently waiting for final indication of the measures that will need to be met for DYs 7 and 8, and will have to evaluate if we will be able to meet these metrics before committing to DY 7. We hope to know metric options in a couple of months.

Because these programs have been so important to our Center, I thought it was important to update you on the changes which are coming.

Legislative Updates

The Senate and the House each passed their respective versions of the Committee Substitute for Senate Bill 1 (CSSB 1). The budgets reflect significant differences between the two chambers, which must be resolved in budget conference committee before a unified FY2018-19 budget can be passed.

House and Senate budget conferees were announced last week, and held an organizational meeting Monday the 24th at 4:00 p.m. A high level Texas Insight summary of the organizational meeting and and LBB overview of differences between the two budgets IDD and MH services, as presented to the committee, are attached.

Conferees are:

House Conferees	Center(s)
Representative Zerwas, Chair	Texana
Representative Ashby	Brazos Valley, Burke
Representative Longoria	Tropical Texas
Representative Sarah Davis	The Harris Center
Representative Larry Gonzales	Bluebonnet

Senate Conferees	Center(s)
Senator Nelson, Chair	Denton County, Tarrant County
Senator Hinojosa	Coastal Plains, Nueces County, Tropical Texas
Senator Huffman	Gulf Coast, Harris Center, Texana
Senator Shwertner	Bluebonnet, Brazos Valley, Central Counties, HOT, Tri-County
Senator Kolkhorst	Bluebonnet, Brazos Valley, Gulf Bend, Texana

State Budget Strategy	Senate New Funds	House New Funds	Difference	Description	Action Needed
D.2.1 Community MH Adults	\$ 62,208,900	\$ 62,208,900	\$ -	Current and Future Waitlist Funding	Distribution to include wait list, all LMHA capacity increase (to avoid wait list), and equity funding.
D.2.1 Community MH Adults	\$ 24,637,133	\$ 24,637,133	\$ -	Correct former NorthSTAR funding error	Maintains Capacity - Hold
D.2.2 Community MH Children	\$ 464,100	\$ 464,100	\$ -	Current and Future Waitlist Funding	Distribution to include wait list, all LMHA capacity increase (to avoid wait list), and equity funding.
D.2.2 Community MH Children	\$ 8,089,328	\$ 8,089,328	\$ -	Correct former NorthSTAR funding error	Maintains Capacity - Hold
D.2.2 Community MH Children	\$ 2,848,862		\$ 2,848,862	RTC Beds for youth at risk of parental relinquishment	Support Senate Funding Level
D.2.2 Community MH Children	\$ 2,500,000		\$ 2,500,000	Senate Rider 199 Increase TCM and Rehab Providers (Foster Care)	Support Senate Funding Level
D.2.3 Community MH Crisis Services	\$ 5,316,806	\$ 5,316,806	\$ -	Correct former NorthSTAR funding error	Maintains Capacity - Hold
D.2.3 Community MH Crisis Services		\$ 50,000,000	\$ 50,000,000	House Rider 189 Contingency Rider for HB 12 Jail Diversion	Support House Funding Level (High Priority)
D.2.3 Community MH Crisis Services		\$ 50,000,000	\$ 50,000,000	House Rider 190 Contingency Rider for HB 13 Local Collaboratives	Support House Funding Level (Priority)
D.2.3 Community MH Crisis Services		\$ 5,000,000	\$ 5,000,000	Rider 191 Contingency Rider for HB 1486 Peer Support	Support House Funding Level (High Priority)
D.2.4 Substance Abuse Prev/Interv/Treat	\$ 6,280,726	\$ 6,280,726	\$ -	Correct former NorthSTAR funding error	Maintains Capacity - Hold
D.2.4 Substance Abuse Prev/Interv/Treat	\$ 803,855		\$ 803,855	Neonatal Abstinence Syndrome	Support Senate Funding Level
G.2.2 MH Community Hospitals	\$ 3,154,123		\$ 3,154,123	Psychiatric Hospital Beds Locally Purchased (Cost Increase)	Support Senate - additional \$11 million needed to address actual cost increases
G.2.2 MH Community Hospitals	\$ 10,000,000		\$ 10,000,000	Psychiatric Hospital Beds Locally Purchased (Maintain Capacity)	Support Senate - additional \$59.6 million needed to address current bed crisis, adds 100 beds in biennium
Article IX Special Provision Sec. 17.10	\$ 780,000,000		\$ 780,000,000	State Hospital New Construction & Other Inpatient MH Facilities	Support Senate - provides long-term plan to increase inpatient capacity
Article IX Special Provision Sec. 17.13		\$ 188,609,263	\$ 188,609,263	SH & SSLC Critical Life & Safety Needs (ESF - Rainy Day)	Support House - provides long-term plan to increase inpatient capacity
Article IX Special Provision Sec. 17.13		\$ 50,000,000	\$ 50,000,000	SH Community Hospital Forensic Bed Capacity (ESF - Rainy Day)	Support House - see G.2.2 MH Community Hospital Above
	\$ 906,303,833	\$ 450,606,256	\$ 455,697,577		

			Change from 2016-17 Appropriation				Difference Between
		SB 1: Senate & House	to Committee Substitute				SCSB1 and HCSB1
		2016-17 Appropriation	Senate CSSB1	House CSSB1	Senate CSSB1	House CSSB1	
A.2.7	Intermediate Care Facilities - IJD	\$ 571,490,738	\$ 474,401,726	\$ 488,161,808	\$ (97,089,012)	\$ (83,328,930)	\$ 13,760,082
A.3.1	Home and Community-Based Services	\$ 2,293,360,014	\$ 2,254,952,801	\$ 2,389,441,053	\$ (38,407,213)	\$ 96,081,039	\$ 134,488,252
A.3.2	CLASS	\$ 511,835,958	\$ 530,201,233	\$ 539,159,555	\$ 18,365,275	\$ 27,323,597	\$ 8,958,322
A.3.3	Deaf-Blind Multiple Disabilities	\$ 28,319,556	\$ 28,927,887	\$ 25,934,413	\$ 608,331	\$ (2,385,143)	\$ 2,993,474
A.3.4	Texas Home Living Waiver	\$ 131,000,089	\$ 195,311,163	\$ 223,010,758	\$ 64,311,074	\$ 92,010,669	\$ 27,699,595
D.1.3	ECI Services	\$ 282,779,804	\$ 282,426,269	\$ 282,426,269	\$ (353,535)	\$ (353,535)	\$ -
D.1.4	ECI Respite & Quality Assurance	\$ 3,880,768	\$ 7,061,930	\$ 7,061,930	\$ 3,181,162	\$ 3,181,162	\$ -
D.1.6	Autism Program	\$ 14,431,108	\$ 14,248,197	\$ 14,239,310	\$ (182,911)	\$ (191,798)	\$ 8,887
D.1.7	Children with Special Needs	\$ 87,642,510	\$ 61,001,633	\$ 61,001,633	\$ (26,640,877)	\$ (26,640,877)	\$ -
F.1.3	Non-Medicaid IDD Community Services	\$ 86,803,841	\$ 86,803,841	\$ 86,803,841	\$ -	\$ -	\$ -
G.1.1	State Supported Living Centers	\$ 1,365,892,635	\$ 1,327,865,640	\$ 1,316,112,345	\$ (38,026,995)	\$ (49,780,290)	\$ 11,753,295
I.1.1	Integrated Eligibility & Enrollment	\$ 1,482,488,097	\$ 1,229,642,305	\$ 1,229,642,305	\$ (252,845,792)	\$ (252,845,792)	\$ -
I.2.1	Long-Term Care Intake & Access	\$ 586,014,373	\$ 557,784,146	\$ 557,784,146	\$ (28,230,227)	\$ (28,230,227)	\$ -
		\$ 7,445,939,491	\$ 7,050,628,771	\$ 7,220,779,366	\$ (395,310,720)	\$ (225,160,125)	\$ 170,150,595

CHIEF FINANCIAL OFFICER'S REPORT

April 27, 2017

FY 2016 HCS, ICF and Texas Home Living and MEI Cost Reports – Tabatha has completed all the listed cost reports for FY 2016. The reports have been submitted for many years into a program called the Fairbanks System; so the process has not changed for this fiscal year. Staff did complete the required cost report training. The cost reports are all due by April 30th.

FY 2018 Budget Process – We are getting ready for the FY 2018 budget process. Starting in May, we will begin budget meetings and trainings with all cost center managers. This will be when we give each manager their budget worksheets and historical trending data to plan for the next fiscal year. The first draft of the manager budgets will be due back to us by the middle of June. We will then consolidate all the cost centers into one master budget worksheet and compare to the current year's trend. Depending on when we receive the new allocations from both DADS and DSHS; we should be close to a final budget by the July Board meeting.

County Annual Funding Request – It is that time of year again. We will submit all of the County funding requests over the next couple of weeks. Montgomery County's budget request is due by May 1st. We should hear back from the County offices in early summer regarding budget hearings.

Fixed Asset Inventory – The fixed asset inventory process is about to be under way. Every two years, we conduct a complete inventory count and this the non-complete year. But since we have consolidated locations in Montgomery County, we will be doing a complete inventory in this county. We will also be spot checking other locations and any programs that may have moved in the outlying areas. Both complete and non-complete inventory counts are very labor-intensive, so we bring in building coordinators to assist with the actual count at each location.

Texas Council Risk Management Fund Board Meeting – The TCRMF Strategic Planning and Board of Trustees meeting will be held in Austin at the Crowne Plaza Hotel on May 4th and 5th. On May 4th, we will be focusing on Strategic Planning for the fund and the actual board meeting will be the morning of May 5th.

CFO Consortium – The CFO meeting is starting today. I have Sheryl and Tabatha attending the complete meeting and I will be heading over this afternoon for the Friday portion.

These are the items that are currently on the Preliminary Agenda:

- Focused Financial Ratios Discussion
- Legislative Update
- Update Contract and Financial Imperatives Committee
- Hot Button topics suggested by Membership – Small Group Participation
- HHSC Waiver Program and MEI Cost Report Discussion
- Business Meeting
- Texas Council Update
- IDD Update
- Planning Facility Purchases and Renovations – Presented by Mike and Myself.

Agenda Item: Community Resources Report Committee: Program	Board Meeting Date: April 27, 2017
Background Information: None	
Supporting Documentation: Community Resources Report	
Recommended Action: For Information Only	

Community Resources Report

February 24, 2017 – April 27, 2017

Volunteer Hours:

Location	February	March
Conroe	236.5	202.75
Cleveland	1.5	1
Liberty	16	21
Huntsville	10.5	11.5
Total	264.5	236.25

COMMUNITY ACTIVITIES:

2/24/17	Southeast Texas Co-Operative for Special Services for Child and Youth Information Meeting	Liberty
2/27/17	Attention Deficit Disorder Association for the Southern Regional Support Group – Child and Youth Presentation	The Woodlands
2/27/17	Conroe ISD – Mentor Lunch	Conroe
2/27/17	Military Veteran Peer Network (MVPN) Basic Training	Conroe
2/28/17	Liberty County Community Resource Coordination Group	Liberty
2/28/17	Montgomery County Business Women’s Association Luncheon	Conroe
2/28/17	Lone Star Behavioral Health Community Collaboration Meeting	Tomball
2/28/17	MVPN Regional Development Meeting	Galveston
3/2/17	Cleveland Chamber of Commerce Luncheon	Cleveland
3/2/17	MCCARES Behavioral Health Subcommittee	Conroe
3/3/17	Planning Meeting with Law Enforcement Management Institute of Texas Staff (LEMIT)	Huntsville
3/4/17	Montgomery County Business Women’s Breakfast	Conroe
3/6/17	Montgomery County Homeless Coalition Board Meeting	Conroe
3/6/17	Conroe ISD Mentor Luncheon	Conroe
3/7/17	Montgomery County Health And Wellness Impact Council	The Woodlands
3/8/17	Veterans Treatment Court	Conroe
3/9/17	Huntsville Chamber of Commerce Breakfast	Huntsville
3/9/17	Liberty/Dayton Area Community Resource Task Force Meeting	Liberty
3/14/17	Conroe American Legion Meeting	Conroe
3/14/17	Conroe Bring Everyone Into the Zone (BEITZ) Group	Conroe
3/14/17	Huntsville Bring Everyone Into the Zone (BEITZ) Group	Huntsville
3/15/17	Liberty/Dayton Chamber of Commerce Luncheon	Liberty
3/15/17	Texas Association of Addiction Professionals Meeting	Houston
3/16/17	Montgomery County Mental Health Court	Conroe
3/17/17	Medical Audit Committee Jail Meeting	Conroe
3/20/17	Conroe ISD Mentor Luncheon	Conroe
3/21/17	Veteran’s Expo	Conroe
3/21/17	North Houston Networking Group	The Woodlands

3/21/17	Montgomery County Community Resource Coordination Group	Conroe
3/22/17	Outreach, Screening, Assessment and Referral (OSAR) Meeting	League City
3/22/17	Veterans Treatment Court	Conroe
3/23/17	Child Fatality Review Team	Conroe
3/25/17	Veterans Advisory Panel with American Legion	Montgomery
3/31/17	Juvenile Services Outreach Meeting	Huntsville
4/3/17	Assistance League of Montgomery County – Tender Loving Care Doll Donation	Conroe
4/5/17	Liberty-Dayton Business Area Expo	Liberty
4/6/17	Cleveland Chamber of Commerce Luncheon	Cleveland
4/6/17	Montgomery County Business Women’s Annual Gala	The Woodlands
4/7/17	Intracare North Hospital – Community Educator Meeting	Houston
4/10/17	Conroe Noon Lions Club Luncheon	Conroe
4/11/17	Conroe American Legion Meeting	Conroe
4/11/17	Huntsville Bring Everyone Into the Zone (BEITZ) Group	Huntsville
4/12/17	Mental Health Court Treatment and Interaction Meeting	Conroe
4/12/17	Liberty County Community Resource Coordination Group	Liberty
4/12/17	Veterans Treatment Court	Conroe
4/13/17	Huntsville Chamber of Commerce Breakfast	Huntsville
4/17/17	Huntsville ISD Special Education Parents Night	Huntsville
4/18/17	Montgomery County Community Resource Coordination Group	Conroe
4/18/17	North Houston Networking Group	The Woodlands
4/18/17	Quarterly Veteran’s Taskforce Meeting	Conroe
4/20/17	Huntsville Veterans Affairs Advisory Board (VAAB) Meeting	Huntsville
4/20/17	Homeless Coalition Meeting	Conroe
4/20/17	PATH Continuity of Care Meeting	The Woodlands
4/21/17	Medical Audit Committee Jail Meeting	Conroe
4/21/17	Veteran Mentor Luncheon	Conroe
4/21/17	Sam Houston State Advisory Council Meeting	Huntsville
4/23/17	Conroe ISD Mentor Luncheon	Conroe
4/24/17	Conroe Noon Lions Club Luncheon	Conroe
4/24/17	Military Veteran Peer Network (MVPN) Basic Training	Conroe
4/26/17	Veterans Treatment Court	Conroe
4/27/17	The Woodlands Chamber Volunteer Appreciation Luncheon	The Woodlands
4/27/17	Montgomery County Mental Health Court	Conroe
4/27/17	Veteran’s Presentation at Lake Conroe Chamber of Commerce	Conroe

UPCOMING ACTIVITIES:

4/28/17	The Council on Recovery Annual Spring Luncheon	Houston
5/3/17	Conroe Noon Lions Club Luncheon	Conroe
5/3/17	Sam Houston State Job Fair	Huntsville
5/4/17	Montgomery County Business Women’s Breakfast	Conroe
5/4/17	Cleveland Chamber of Commerce Luncheon	Cleveland

5/8/17	Conroe ISD Mentor Luncheon	Conroe
5/10/17	Conroe Noon Lions Club Luncheon	Conroe
5/10/17	Liberty County Community Resource Coordination Group	Liberty
5/11/17	Huntsville Chamber of Commerce Breakfast	Huntsville
5/16/17	Montgomery County Community Resource Coordination Group	Conroe

Agenda Item: Consumer Services Report for February 2017 Committee: Program	Board Meeting Date: April 27, 2017
Background Information: None	
Supporting Documentation: Consumer Services Report for February 2017	
Recommended Action: For Information Only	

Consumer Services Report February 2017

Consumer Services	Montgomery County	Cleveland	Liberty	Walker County	Total
Crisis Services, MH Adults/Children					
Persons Screened, Intakes, Other Crisis Services	511	43	29	56	639
Crisis and Transitional Services (LOC 0, LOC 5)	75	1	2	0	78
Psychiatric Emergency Treatment Center (PETC) Served	55	7	0	7	69
Psychiatric Emergency Treatment Center (PETC) Bed Days	238	24	0	26	288
Contract Hospital Admissions	5	0	0	0	5
Diversion Admits	8	1	0	3	12
Total State Hospital Admissions	5	0	0	0	5
Routine Services, MH Adults/Children					
Adult Service Packages (LOC 1m,1s,2,3,4)	1120	155	125	87	1487
Adult Medication Services	915	91	63	94	1163
Child Service Packages (LOC 1-4 and YC)	478	43	26	67	614
Child Medication Services	215	15	6	24	260
TCOOMMI (Adult Only)	112	21	22	8	163
Adult Jail Diversions	2	0	0	0	2
Persons Served by Program, IDD					
Number of New Enrollments for IDD Services	8	0	0	3	11
Service Coordination	642	37	52	64	795
Persons Enrolled in Programs, IDD					
Center Waiver Services (HCS, Supervised Living, TxHmL)	39	5	19	22	85
Contractor Provided ICF-IID	18	12	12	6	48
Substance Abuse Services					
Children and Youth Prevention Services	76	32	0	46	154
Youth Substance Abuse Treatment Services/COPSD	3	0	0	0	3
Adult Substance Abuse Treatment Services/COPSD	27	0	0	0	27
Waiting/Interest Lists as of Month End					
Home and Community Based Services Interest List	1386	121	131	143	1781
February Served by County					
Adult Mental Health Services	1506	172	108	186	1972
Child Mental Health Services	579	44	29	75	727
Intellectual and Developmental Disabilities Services	685	54	58	75	872
Total Served by County	2770	270	195	336	3571
January Served by County					
Adult Mental Health Services	1583	161	132	157	2033
Child Mental Health Services	551	50	27	71	699
Intellectual and Developmental Disabilities Services	666	49	58	75	848
Total Served by County	2800	260	217	303	3580
December Served by County					
Adult Mental Health Services	1452	136	96	187	1871
Child Mental Health Services	515	49	28	63	655
Intellectual and Developmental Disabilities Services	655	50	53	77	835
Total Served by County	2622	235	177	327	3361

Agenda Item: Consumer Services Report for March 2017 Committee: Program	Board Meeting Date: April 27, 2017
Background Information: None	
Supporting Documentation: Consumer Services Report for March 2017	
Recommended Action: For Information Only	

Consumer Services Report

March 2017

Consumer Services	Montgomery County	Cleveland	Liberty	Walker County	Total
Crisis Services, MH Adults/Children					
Persons Screened, Intakes, Other Crisis Services	495	38	28	43	604
Crisis and Transitional Services (LOC 0, LOC 5)	5	0	1	0	6
Psychiatric Emergency Treatment Center (PETC) Served	59	10	1	6	76
Psychiatric Emergency Treatment Center (PETC) Bed Days	290	35	6	39	370
Contract Hospital Admissions	10	0	1	3	14
Diversion Admits	17	0	0	0	17
Total State Hospital Admissions	10	0	0	3	13
Routine Services, MH Adults/Children					
Adult Service Packages (LOC 1m,1s,2,3,4)	977	138	76	93	1284
Adult Medication Services	726	75	56	90	947
Child Service Packages (LOC 1-4 and YC)	476	45	17	62	600
Child Medication Services	155	9	5	27	196
TCOOMMI (Adult Only)	105	19	19	7	150
Adult Jail Diversions	1	0	0	0	1
Persons Served by Program, IDD					
Number of New Enrollments for IDD Services	3	0	0	0	3
Service Coordination	629	39	48	65	781
Persons Enrolled in Programs, IDD					
Center Waiver Services (HCS, Supervised Living, TxHmL)	39	5	19	22	85
Contractor Provided ICF-IID	18	12	12	6	48
Substance Abuse Services					
Children and Youth Prevention Services	46	20	0	72	138
Youth Substance Abuse Treatment Services/COPSD	4	0	0	0	4
Adult Substance Abuse Treatment Services/COPSD	22	0	0	0	22
Waiting/Interest Lists as of Month End					
Home and Community Based Services Interest List	1399	122	131	145	1764
March Served by County					
Adult Mental Health Services	1332	167	100	172	1771
Child Mental Health Services	585	47	24	66	722
Intellectual and Developmental Disabilities Services	652	50	53	73	828
Total Served by County	2569	264	177	311	3321
February Served by County					
Adult Mental Health Services	1506	172	108	186	1972
Child Mental Health Services	579	44	29	75	727
Intellectual and Developmental Disabilities Services	685	54	58	75	872
Total Served by County	2770	270	195	336	3571
January Served by County					
Adult Mental Health Services	1583	161	132	157	2033
Child Mental Health Services	551	50	27	71	699
Intellectual and Developmental Disabilities Services	666	49	58	75	848
Total Served by County	2800	260	217	303	3580

Agenda Item: Program Updates Committee: Program	Board Meeting Date: April 27, 2017
Background Information: None	
Supporting Documentation: Program Updates	
Recommended Action: For Information Only	

Program Updates

February 24, 2017 – April 27, 2017

Crisis Services

1. Tri-County hosted a Local Outreach to Suicide Survivors (LOSS) training on 4/12. Thirteen employees were in attendance. Education was provided on how to establish a local team. Tools on ways to provide comfort at the scene of a suicide were shared. Debriefings with licensed clinicians are required within 48 hours of the response. The LOSS Team will be activated through The Crisis Intervention Response Team (CIRT) as indicated.
2. Crisis staff facilitated training with employees at Texas Children's Hospital, The Woodlands Campus. The definition of imminent risk was relayed. Examples of incidents which merit the use of emergency detention warrants were also articulated.
3. CIRT clinicians and the Director of Crisis Services met with a chaplain from the Montgomery County Sheriff's Office (MCSO). MCSO is interesting in partnering with Tri-County on the development of a local Critical Incident Stress Management (CISM) group. The function of this group is to provide assistance to law enforcement personnel that have been emotionally impacted on the job.

MH Adult Services

1. The Routine Assessment and Counseling Team have made improvements to the scheduling process to allow for the maximum number of walk-ins to be seen for same day evaluations. Over the past two months, the average number of individuals presenting to the walk-in clinic being provided a same day mental health evaluation has increased from 52% to 63%. The team continues to make changes to enhance the provision of services and to expedite the walk-in process to maximize the number of individuals seen each day.
2. Adult Outpatient Nursing positions are filled and are under the supervision of the new Director of Nursing.
3. The new Director of Nursing has taken over supervision of the adult outpatient nurses.

MH Child Services

1. We are making many improvements to our processes related to walk-in Intake Assessments.
2. C&Y continues to experience growth in the number of children served and number of positions.

Criminal Justice Services

1. Jail Liaison assessed 100 individuals and coordinated the treatment of 119 others in the Montgomery County Jail in February and in March.

2. The Jail Diversion clinician assessed 14 and screened 400 for the Jail diversion program in February and March. 1 admitted to Jail Diversion in March.
3. Outpatient Competency Restoration (OCR) has restored to competency, 4 individuals in FY 17.

Substance Abuse Services

1. The Adult Substance Abuse Program has received the approved facility licensure for the Conroe Building effective 3/27. The program staff have been working to increase case load sizes by focusing marketing efforts on residential and detox facilities. This is a good opportunity to request meetings with these facilities to discuss the program offerings, build relationships, and work toward increasing referrals from these sources with Intensive Outpatient as a "step-down".
2. The Youth Substance Abuse Prevention Program is working to serve as many schools as possible and is already booking school groups for the next school year.

IDD Services

1. IDD Provider staff is serving 48 PASRR individuals for Specialized Services.
2. IDD Provider staff is preparing for upcoming HCS and TxHmL annual audits.
3. HCS has 3 vacant slots at this time.
4. There are 11 individuals who have received services through IDD Crisis Respite.

Support Services

1. **Quality Management:**
 - a. Staff conducted training with Medical Staff to address corrective action items identified during the recent Substance Abuse and Mental Health Self Audits.
 - b. Staff participated in the Health and Human Services on-site audit for the PATH program on April 17 – 19.
 - c. Staff prepared documents and participated in the Beacon on-site re-credentialing visit held on March 30, 2017.
 - d. The IDD Local Planning Process is currently underway.
2. **Utilization Management:**
 - a. Staff have been attending a webinar series titled Behavioral Health Clinic Quality Measures presented by the Texas Council. This information will be used to improve data capture and reporting.
3. **Training:**
 - a. The following trainings were offered to staff during the week of March 20-24th: Responding to an Active Shooter Situation, Remote Site-Safety Training for staff providing field based services, Customer Service, Human Resource Manager Hiring Process, and Genoa Pharmacy Introduction.

4. **Veteran Affairs:**

- a. The annual Veteran's Expo was held at the Lone Star Convention and Expo Center.
- b. Inaugural Veteran Services Advisory Panel was held and hosted by the American Legion. Staff moderated the panel of speakers.
- c. Staff hosted an Easter Egg Hunt and Family Fun day in collaboration with the Liberty County Veteran Service Officer in Cleveland.

Community Activities

1. Community Outreach and Development Staff continue to collaborate with and schedule community agencies for YMHFA trainings – Montgomery County Hospital District, Conroe ISD Nursing Dept., and Cleveland ISD Middle School are all scheduled for YMHFA over the next couple of months.
2. Strategic Development Director is collaborating with the North Houston Networking Group on identifying and presenting a Community-wide event to be held this Fall.

Agenda Item: FY 2017 Goals and Objectives Progress Report Committee: Program	Board Meeting Date April 27, 2017
Background Information: <p>The Board of Trustees and Management Team met on August 5, 2016 for the annual strategic planning meeting to develop the goals for FY 2017. Goals were discussed and a consensus was reached. Subsequently, the Management Team developed objectives for each of the goals. These goals are in addition to the contractual requirements of the Center's contracts with the Department of State Health Services and the Department of Aging and Disability Services.</p> <p>The Board also requested that quarterly progress reports be presented as a "year-to-date summary."</p> <p>This report shows progress through the 2nd Quarter of FY 2017.</p>	
Supporting Documentation: FY 2017 Goals and Objectives Progress Report	
Recommended Action: For Information Only	

Year-to-Date Progress Report

September 1, 2016 – February 28, 2017

Goal #1 – Professional Facilities

Objective #1

Tri-County will successfully move into the 233 Sgt. Ed Holcomb Blvd. S. facility in Conroe by March 31, 2017.

- We are on schedule to be completely moved into the 233 Sgt. Ed Holcomb Blvd. S. facility but March 31, 2017.

Objective #2

Staff will develop a timeline for facility improvements in Huntsville and Cleveland by March 31, 2017.

- Huntsville: Physical portions of the remodel are completed as follows: New flooring and paint throughout identified areas is complete, parking lot paving has been repaired, exterior of building and sidewalks have been pressure washed, broken windows have been replaced, old window screens on front of building have been replaced. Some small cosmetic issues remain to be completed in April – along with the delivery of office and lobby furniture from Conroe locations.
- Cleveland: We are still discussing options for adding space to the Cleveland facility on Truman. We will be delivering lobby and office furnishings (as needed) from Conroe to the Cleveland facility in April.

Goal #2 – Community Connectedness

Objective #1

Tri-County's Consumer Foundation will hold at least one (1) fundraising event by May 31, 2017

- We will have a "Come and Learn About the Work We Do" breakfast in late April or early May.

Objective #2

Tri-County will launch the 'I Choose Life' website with the youth and caregiver commitments that can be made online by March 31, 2017.

- No progress made.

Objective #3

Tri-County will begin a Suicide Postvention group in Conroe by May 31, 2017.

- A Local Outreach to Suicide Survivors (LOSS) trainer came to Tri-County on 4/12 to help educate and implement a team in Montgomery County. Volunteers will provide comfort care to individuals that have been impacted by a suicide loss. The hope is that through these interactions a cohesive and viable postvention group will form.

Objective #4

Staff will meet with County Judges and Commissioners quarterly to discuss Tri-County's services and seek feedback about service gaps.

- No progress this quarter.

Goal #3 – Clinical Excellence**Objective #1**

Tri-County will implement Co-Occurring Psychiatric Substance Use Disorder rehabilitation programming by April 15, 2017.

- Staff identified a possible evidence based practice to incorporate into current rehabilitative programming. In an effort to enhance services provided to the COPSD population, Qualified Mental Health Professionals (QMHP) may utilize Screening, Brief Intervention, and Referral to Treatment (SBIRT) strategies.
- Permission was granted to utilize materials formulated by Dr. James Bray, Baylor College of Medicine.
- Anasazi has been updated to provide staff with the ability to indicate when their rehabilitation programming is related to COPSD. This will improve our ability to capture data related to how often these services are being provided. Trainings are currently being scheduled with staff.

Objective #2

A Zero Suicide Clinical Team will be developed and four (4) recommendations from this team will be implemented by the Center by May 31, 2017.

- An evidenced based assessment tool called, The Columbia Suicide Severity Rating Scale Screen will be incorporated into all risk assessments. Training was disseminated to all applicable staff in preparation for this revision.
- An assessment tool in the form of a pre and post-test has been added to the Ask Training to help measure learning and development related to staff competency on the subject of suicide.
- Tri-County participated as Team Outreach on 11/5 for the Greater Houston Area Out of the Darkness Community Walk to raise awareness about suicide.
- Staff has facilitated 17 suicide prevention trainings so far this fiscal year. The goal is to facilitate 25 of these trainings by May 31, 2017.

- Staff have identified an employee who is also a suicide survivor to participate in quarterly updates and discussions with the Planning and Network Advisory Committee.

Goal #4 – Staff Development

Objective #1

Tri-County will develop a list of evidence-based training courses to be offered to Adult, Child and Intellectual Disability staff by March 31, 2017.

- Staff have arranged for the National Center on Trauma-Informed Care and Alternatives to Restraint and Seclusion (NCTIC) to travel to Texas to provide Trauma Informed Care training for select agency staff within the East Texas Behavioral Health Network to gain train the trainer certification. The training is scheduled to take place at Tri-County Behavioral Healthcare on June 8th through the 9th.
- Two staff have been identified and scheduled to attend an upcoming Psychological First Aid Train the Trainer course which will allow us to provide further trainings to our staff on how to respond to individuals mental health during and following a disaster situation.
- Once a Clinical Trainer has been hired, staff will provide intermittent trainings on current Evidence Based Practices (EBPs) utilized at the Center to improve competency and comfort with utilizing required EBPs.
- Staff are currently exploring EBP options for Intellectual and Developmental Disability staff.

Goal #5 – Administrative Competence

Objective #1

A workgroup will meet to determine if IDD Services can be converted to electronic processes in Anasazi. This analysis will be completed by May 31, 2017.

- A workgroup has met to discuss and implement an electronic form within Anasazi to track and update those individuals who want to be on a waiting list for services which are general revenue funded.
- Workgroup is reviewing the feasibility of tracking dates of importance which are currently documented on spreadsheets for Service Coordinators.

Objective #2

The Management Team will develop succession plans for their area which will be approved by the Executive Director by May 31, 2017.

- Conversations are underway between the Executive Director and Management Team about succession planning.

Goal #6 – Fiscal Responsibility

Objective #1

Tri-County fiscal and clinical staff will interview other center staff and will create a plan for revenue diversification opportunities by May 31, 2017.

- IDD Authority is considering the viability of contracting with another state agency for providing alternate services to children.

Objective #2

Tri-County will have 90 days of operating funds by August 31, 2017 without the inclusion of general revenue fund allocations.

- We are in the process of analyzing revenue and expenses with the consolidation of the Conroe facilities.
- The vacated Conroe facilities are in the process of being sold. Based on the closings scheduled in April, we should see an increase of funds.

Agenda Item: 2nd Quarter FY 2017 Corporate Compliance and Quality Management Report Committee: Program	Board Meeting Date April 27, 2017
Background Information: The Health and Human Service Commission's Performance Contract Notebook has a requirement that the Quality Management Department provide "routine" reports to the Board of Trustees about "Quality Management Program activities." Although Quality Management Program activities have been included in the program updates, it was determined that it might be appropriate, in light of this contract requirement, to provide more details regarding these activities. Since the Corporate Compliance Program and Quality Management Program activities are similar in nature, the decision was made to incorporate the Quality Management Program activities into the Quarterly Corporate Compliance Report to the Board and to format this item similar to the program updates. The Corporate Compliance and Quality Management Report for the 2nd Quarter of FY 2017 are included in this Board packet.	
Supporting Documentation: 2nd Quarter FY 2017 Corporate Compliance and Quality Management Report	
Recommended Action: For Information Only	

Corporate Compliance and Quality Management Report

2nd Quarter, FY 2017

Corporate Compliance Activities

A. Key Statistics:

1. There was one (1) Corporate Compliance investigation for the 2nd quarter of FY 2017 which is completed. The case was reported via an anonymous e mail. The case involved concerns related to staff inflating or rounding up service times in order to meet minimum hour requirements. The investigation was unfounded.

B. Committee Activities:

1. The Corporate Compliance Committee met on January 11, 2017. The committee reviewed the following:
 - a. A summary of the 1st quarter investigations;
 - b. Legal updates on compliance issues.

Quality Management Initiatives

A. Key Statistics:

1. Staff reviewed and submitted four (4) MCO record requests, totaling four (4) charts.

B. Reviews/Audits:

1. Staff reviewed and submitted one (1) chart for Blue Cross Blue Shield (Altegra Health) dating back to January 2016.
2. Staff reviewed and submitted one (1) chart to Texas Children's Health Plan dating back to January 2015.
3. Staff reviewed and submitted one (1) chart for United Healthcare dating back to January 2016.
4. Staff reviewed and submitted one (1) chart for United Healthcare for services by a provider.

C. Internal Programs Reviewed by Quality Management:

1. Staff completed the PATH Program Survey and Adult Substance Abuse Program Survey.
2. Supported Housing and Peer Support Program Surveys are currently being reviewed.
3. The Substance Abuse Self-Review tool was completed and submitted to the Health and Human Services Department on December 15, 2016.
4. The Comprehensive Mental Health Self-Review was completed and submitted to the Health and Human Services Department on December 30, 2016.

D. Other Quality Management Activities:

1. Staff conducted satisfaction surveys for individuals receiving doctor services via telemedicine. All survey responses were positive.

Agenda Item: 3rd Quarter FY 2017 Corporate Compliance Training Committee: Program	Board Meeting Date April 27, 2017
Background Information: As part of the Center’s Corporate Compliance Program, training is developed each quarter for distribution to staff by their supervisors. This training is included in the packet for ongoing education of the Tri-County Board of Trustees on Corporate Compliance issues.	
Supporting Documentation: 3rd Quarter FY 2017 Corporate Compliance Training	
Recommended Action: For Information Only	

Compliance Reporting False Claims Review 3rd Quarter, FY 2017

The False Claims Act

- Forbids knowingly presenting, or causing the presentation of, a false claim for reimbursement by a federal health care program, including Medicare and Medicaid. Some common examples of fraud include:
 - Knowingly billing for services not furnished;
 - Knowingly billing for services rendered by a provider which are outside the scope of that provider's license; and,
 - Falsifying certificates of medical necessity plans of treatment, and medical records to justify payment.

What this means for someone who violates The False Claims Act

- Payback for the service provided;
- Heavy fines if claims are found by the Department of Justice;
 - In 2016 false claims penalties cost \$21,563 per claim.
- Disciplinary action up to termination; and/or
- Imprisonment

If you have concerns please report to your Compliance Team:

Amy Foerster – Chief Compliance Officer

Heather Hensley

Michelle Foster

How to report compliance concerns to the Compliance Department

- Phone: 936-521-6152 or toll free at 1-866-243-9252
 - You may dial *69 to block your number if you prefer to remain anonymous
 - Messages can be left confidentially. Please leave a detailed message with helpful information.
- Email: corporatecompliance@tcbhc.org; or
- By appointment, your Corporate Compliance team is located at 233 Sgt. Ed Holcomb Blvd. South, Conroe, TX 77304

Helpful information the Compliance Department will need:

- First and last name of the staff in violation of agency compliance rules (please do not use initials)
- Program in which the staff works
- Specific compliance violation(s) if possible (ie... billing for services never rendered)
- Date range for the violation(s)
- Any other helpful information you can provide

Staff Signature

Print Name

Date

Agenda Item: Medicaid 1115 Transformation Waiver Project Status Report Committee: Program	Board Meeting Date April 27, 2017
Background Information: <p>Round 1 reporting in Demonstration Year 6 (DY6) is due by April 30, 2017. Tri-County will report full achievement of the Quantifiable Patient Impact (QPI) goals for four (4) of the five (5) projects. The same projects will report for payment for Medicaid/Low Income/Uninsured QPI (MLIU), also. Each of these metrics represents 25% of the total budget. Progress on Core Components and Sustainability metrics are locked until Round 2 reporting in October. HHSC is still developing a template for DY6 reporting of sustainability. Numeric goals for service and funding remain the same as DY5.</p> <p>In the first half of DY6, with a goal of 500, the Intensive Evaluation and Diversion (IED) program has thus far serviced 501 persons in crisis of which there were 170 admissions to the Extended Observation Unit (EOU). The Category 3 performance outcome measure, Patient Health Questionnaire (PHQ-9), is a depression study which needs to show a 12.5% decrease from its baseline score to be reported in October 2017.</p> <p>The IDD ACT program has had 35 admissions since October of 2016. With a target of 50, the program will report QPI achievement in October. The Aberrant Behavior Checklist (ABC) is the Category 3 tool which will be continued, however, the successful results of a center-wide PHQ-9 will determine payment in DY6.</p> <p>The Expanded Psychiatry Delivery (EPD) program serving Montgomery and Walker Counties will report increased access to care with a visit count of 617. The Expanded program covering Liberty County will also achieve with a visit count of 334. The PHQ-Somatic, Anxiety, and Depression (SADS) survey is the Category 3 tool for the EPD programs and requires a 12.5% decrease from baseline established in DY4.</p> <p>Integrated Primary and Behavioral Health Care achieved its DY6 goal of serving 225 unique persons with a total of 226 by March 31, 2017. Category 3 continues to be the HTN-<i>Controlling High Blood Pressure</i> study with a goal of 20% Improvement Over Self (IOS) over its DY 4 baseline. There are currently 94 patients in the study.</p> <p>Reporting in April will include project summaries and updates to all performance outcomes.</p>	
Supporting Documentation: Medicaid 1115 Transformation Waiver Project Status Report	
Recommended Action: For Information Only	

Tri-County Behavioral Healthcare Medicaid 1115 Transformation Waiver Projects

DY 6 - 10/1/2016 - 09/30/2017

Status Update: 10/1/2016 -03/31/2017 - Round 1

Source: Internal Reporting / HHSC Reports



On Target to Meet DY6 Outcomes



Not Started / To be completed in DY 6



Pending HHSC Approval

Project	County	DY 6 Target	As of 3/31/17	Progress Towards Goals	Status	Barriers / Comments
1.1.1 Intensive Evaluation & Diversion	Montgomery Walker	1. DY 6 - 500 Persons seen in crisis	1. 500	Of the 500 persons seen in crisis, 170 were diverted to the EOU as of 3/31/17		On track to report in April.
Required Milestones		2. 400 MLIU 3. Core Components 4. Sustainability	2. 500 3 & 4 Oct Report	2. In progress; will achieve 3. 4 Stakeholder meetings held to be reported in October 4. HHS requirements still in process		DY6 Estimated Incentive Bundle Amount: \$2,189,622. Each milestone is worth \$1,094,811
Category 3 Performance Outcomes		PHQ-9 - Dep Survey Baseline: 10.43	Oct Report	Will need to show 12.5% improvement in Oct 2017		Will report in October. DY6 Incentive Payment: \$280,558.50
1.1.2 IDD ACT	Montgomery Walker	1. 50 Individuals	33	Will report for payment in 10/2017		DY 6 Incentive per milestone: \$174,675
Required Milestones		2. MLIU 3: Core Components 4. Sustainability	1. 38% 2. 40	3. 0 Stakeholder meeting held 4. HHS requirements still in process		DY 6 Estimated Incentive Bundle Amount: \$349,351
Category 3 Performance Outcomes		1. ABC-30Pre / 30 Posttests 2. PHQ-9	Oct Report	1. Must be completed and reported 2. 100% payment w/ achievement		DY 6 Incentive Payment: \$280,558.50
1.1.3 Expanded Psychiatry Delivery	Montgomery Walker	1. 375 Visits 2. 300 MLIU 80%	1. 617 2. 617	1. Will report achievement in April 2. Will report MLIU achievement in April		DY 6 Incentive per milestone: \$344,979.00
Required Milestones		3. Core Components 4. Sustainability	Oct Report	3. Update accomplishments/ Challenges/ Lessons Learned 4. HHS requirements still in process		DY 6 Estimated Incentive Bundle Amount: \$689,958

Tri-County Behavioral Healthcare

Medicaid Transformation Waiver Projects

DY 6 - 10/1/2016 - 09/30/2017

Status Update: 10/1/2016 -03/31/2017 - Round 1

Source: Internal Reporting / HHSC Reports



On Target to Meet DY6 Outcomes



Not Started / To be completed in DY 6



Pending HHSC Approval

Project	County	DY 6 Target	As of 3/31/17	Update	Status	Barriers / Comments
Category 3 Performance Outcomes		PHQ-SADS - Depression/Anxiety Establish baseline	Baseline: 36.8 Goal: ↓12.5%	Will report a ≥ 12.5% decrease in behavioral health symptoms due to treatment		DY 6 Incentive Payment: \$280,558.50
1.2.1 Integrated Primary & Behavioral Healthcare	Montgomery Walker	1. 225 persons 2. 180 MLIU	1.226	1. Will report in April 2. MLIU % will be reported on in April		DY 6 Incentive per milestone: \$627,391
Required Milestones/Metrics		3. Core Components 4. Sustainability	2. 226	3. Ongoing data is collected showing strengths & weaknesses for continuous quality improvement (CQI) 4. HHS requirements still in process		DY 5 Estimated Incentive Bundle Amount: \$1,254,782
Category 3 Performance Outcomes		Report controlled BPs in last 6 months of DY5	Baseline: 55.56%	94 persons with HTN were being followed as of 01/10/2017		Improve BP scheduling DY 5 Incentive Payment: \$ 280,558.50
1.1.1 Expanded Psychiatry Delivery	Liberty	1. 125 Visits 2. 100 MLIU	1. 334 2. 334	Achievement to be reported in April 2017 2. MLIU % to be reported on in April		DY 6 Incentive per milestone: \$153,970
Required Milestones/Metrics		3. Core Components 4. Sustainability	October Report	3. Ongoing data is collected showing strengths & weaknesses for continuous quality improvement (CQI) 4. HHS requirements still in process		DY 5 Estimated Incentive Bundle Amount: \$307,940
Category 3 Performance Outcomes		PHQ-SADS - Depression/Anxiety Establish baseline	47.2: Baseline	Will report 10% ↓ over baseline in Oct 2016 reporting period		DY 5 Incentive Payment: \$77,000.00

<p>Agenda Item: Approve Revisions to Board Policies C.30, D.1 and D.5</p> <p>Committee: Executive</p>	<p>Board Meeting Date</p> <p>April 27, 2017</p>
<p>Background Information:</p> <p>As staff continue to update Board Policy statements, three (3) Policy changes are recommended for approval by the Board. In addition to formatting changes, the following modifications are recommended:</p> <p>C.30-Compliance with the Health Insurance Portability and Accountability Act—Last Revised March 1, 2003—Reference to Health Information Technology for Economic and Clinical Health Act ('HITECH') was added to the Policy.</p> <p>D.1-Confidentiality, Consent and Disclosure-Formerly Client Records and Confidentiality—Last revised November 16, 1993—This Policy was completely revised to include references to current confidentiality laws, general information about disclosing Protected Health Information (PHI) and handling subpoenas. Additional procedure work is underway to flesh out staff responsibilities for subpoenas.</p> <p>D.5-Continuity of Care-Formerly Continuity of Services—Last revised October 17, 1985—Minor changes were made to language and updates to Administrative Code references. The title of the Policy was changed to reflect what the state calls this activity.</p>	
<p>Supporting Documentation:</p> <p>Revised Board Policies (Markup Versions)</p>	
<p>Recommended Action:</p> <p>Approve Revisions to Board Policies C.30, D.1 and D.5.</p>	

TRI-COUNTY MENTAL HEALTH MENTAL RETARDATION SERVICES

STATEMENT OF POLICY

William E. Hall, Jr., Chairman

Date

Subject: Compliance with the Health Insurance Portability and Accountability Act

Effective Date: March 1, 2003

Revision Date: April 27, 2017

It is the policy of the Tri-County ~~Behavioral Healthcare MHMR Services~~ ('Tri-County' or 'Center') to conduct its business in compliance with the Health Insurance Portability and Accountability Act (HIPAA) of 1996, and as described in the Health Information Technology for Economic and Clinical Health Act ("**HITECH**") provisions of the American Recovery and Reinvestment Act of 2009 ("**ARRA**").

In furtherance of this objective, the Board adopts this policy to ensure an effective HIPAA Compliance Program for the Center;

1. The Board directs management of the Center to dedicate the necessary resources toward the development of an effective HIPAA Compliance Program.
2. The HIPAA Compliance Program shall address the two key provisions of HIPAA:
 - a. Standardization of the electronic exchange of administrative and financial information to improve the efficiency and effectiveness of the healthcare system; and
 - b. Protections for the security and privacy of individually identifiable health care information, to include **both physical and electronic** behavioral health information.
3. Management will implement the necessary procedures to provide instructions to employees regarding compliance activities. On an annual basis, management shall review all procedures that are implemented and update them as necessary to ensure continued effectiveness.
4. Management shall form the necessary committees and select employees to be compliance officers in leading compliance activities.
5. Employees shall be trained to understand HIPAA and required compliance activities.
6. Information regarding HIPAA shall be developed for distribution to consumers, employees, contractors, business associates, and the public. This shall include, but not be limited to, Notice of Privacy Practices for

consumers, brochures and written materials for employees and the public, language in contracts and business associate agreements to explain and require HIPAA compliance, information on our website regarding HIPAA, and other related information.

7. Compliance audits, **at minimum as part of the Program Survey process**, shall be conducted no less than annually to evaluate compliance with HIPAA. Findings of noncompliance shall be addressed with corrective action plans to achieve compliance. Management shall take appropriate personnel actions where noncompliance is discovered and is necessary to prevent future noncompliance.
8. The HIPAA Compliance Program is intended to be flexible and readily adaptable to changes in regulatory requirements and in the healthcare system as a whole. Management shall assess the need for changes and implement appropriate measures as part of a regular review of the HIPAA Compliance Program. The HIPAA Compliance Program will be revised as experience demonstrates that changes will produce a more effective and better alternative.

TRI-COUNTY ~~BEHAVIORAL HEALTHCARE~~ ~~MENTAL HEALTH~~ ~~MENTAL RETARDATION SERVICES~~

STATEMENT OF POLICY

Jim Putman, Chairman

SUBJECT: ~~Confidentiality, Consent and Disclosure~~ ~~Client Records and Confidentiality~~

November 16, 1993
Date

It is the Policy of the Board of Trustees of Tri-County Behavioral Healthcare ('Tri-County' or 'Center') that the Center comply with all applicable privacy laws, rules and regulations.

- I. The following regulations govern confidentiality or Protected Health Information (PHI):
 - a. Federal
 - i. Code of Federal Regulations Title 45, Parts 160 and 164, Privacy of Individually Identifiable Health Information;
 - ii. Code of Federal Regulations, Title 42, Part 2, Confidentiality of Alcohol and Drug Abuse Patient Records;
 - iii. Code of Federal Regulations, Title 34, Part 99, governing the disclosure of educational records of school-age children;
 - iv. Code of Federal Regulations, Title 42, Part 51, Subpart D, and Code of Federal Regulations, title 45, Section 1386.2, governing access to PHI;
 - v. The Health Insurance and Portability and Accountability Act (HIPAA);
 - vi. 42 USC, Section 10805 (a)(4), Protection and Advocacy for Mentally Ill Individuals;
 - vii. 42 USC, Section 290dd-2, Confidentiality of Alcohol and Drug Abuse Patient Records;
 - b. State
 - i. Texas Health and Safety Code, Chapter 181;
 - ii. Texas Open Records Act, Texas Government Code, Chapter 552, Exception for PHI disclosure;
 - iii. Texas Health and Safety Code, Sections 576.005 and 576.0055, and Chapter 611, PHI for Community Centers;
 - iv. Texas Health and Safety Code Chapter 81, Subchapter F, related to HIV/AIDS;
 - v. Persons with Mental Retardation Act, Texas Health and Safety Code, Chapter 595;
 - vi. Texas Health and Resources Code, Chapter 48, DPRS access to necessary information for investigations;
 - vii. Texas Medical Practice Act, Texas Occupations Code, Chapter 159, Physician-Patient information;
 - viii. Texas Health and Safety Code, Section 533.009, PHI between Community Centers and their contracted providers.

- ix. Texas Health and Safety Code 595.005(c) governing the release of educational records of individuals receiving Intellectual and Developmental Disability services;
- x. Texas Government Cod, Chapter 559, regarding notice of collected information;
- xi. Texas Family Code, Chapter 32, consent to treatment of a child by a non-parent or the child;
- xii. Texas Health and Safety Code, Section 614.017, regarding sharing information of special needs offenders;
- xiii. Texas Health and Safety Code, Chapter 241, Subchapter G, disclosure of PHI in hospitals;
- xiv. Texas Government Code, Section 531.042, care information provided to one family member or client, if possible;
- xv. Texas Health and Safety Code, Section 572.004, notification of a minor's parents;
- xvi. Texas Health and Safety Code, Section 576.007(a), notification to family of patient release from a state hospital, with consent of the patient.

II. Disclosing PHI

- a. Except in emergency situations, Center staff must verify the identity of a person requesting PHI and the authority of the person to have access to PHI, if the identity or authority of the person is not known to the Center. The Center must obtain consent, documentation, statements, or representations from the person requesting the PHI when such documentation, statement or representation is a condition of disclosure.
- b. PHI that is related to Community Center mental health or intellectual disability services may not be used or disclosed for any purpose without a prior valid authorization, except for the following reasons:
 - i. When necessary for treatment, payment and health care operations.
 - ii. When required or authorized by law.
 - iii. When required by judicial and administrative proceedings.
- c. PHI that relates to alcohol or drug abuse treatment may not be disclosed for any purpose without a prior valid authorization, unless the information is disclosed in accordance with the following:
 - i. When required by a specific court order that meets the requirements of federal regulations as described in 42 CFR Part 2, Subpart E.
 - ii. When required or authorized by law.
 - iii. When informing a minor individual's Legally Authorized Representative.
- d. All disclosures of information must be accounted for in the clinical record.
- e. An individual has the right to request that a Center restrict uses or disclosures of PHI about the individual for treatment, payment, or health care operations. However, the Center is not required to agree to the restriction.

III. Subpoenas requesting confidential information

- a. Every subpoenas must be issued in the name of "The State of Texas and must meet certain requirements.
- b. A subpoena must command the person to whom it is directed to either attend and give testimony or produces documents.
- c. A subpoena cannot generally require someone to travel more than 150 miles;
- d. And, may not be used for discovery.

- e. A subpoena may be issued by a court clerk, attorney authorized to practice in the state of Texas or authorized to take depositions in the state.
 - i. A subpoena may be served at any place within the State of Texas by any person who is not a party and is 18 years of age or older.
- f. A person must comply with the subpoena unless discharged by the court; and, failure by any persons without adequate excuse to obey a subpoena served may be deemed contempt.

~~Due to the intimate and personal nature of communication which must take place between the professional staff of Tri-County Mental Health Mental Retardation Services and the people whom we serve, the utmost respect and attention shall be given to the use and protection of this information. The trusting relationship between the professional and the person whom he serves is the essential ingredient necessary to properly provide assistance. The policies and procedures of Tri-County therefore shall address the proper conduct of professional staff with respect to the information in their possession, and the adequate security for the records which document the transactions between the staff and the agency and the persons whom we serve. Records of the agency, at a minimum, will conform to the standards of care for persons in add disability groups outlined in the Rules of the Commissioner 302.03.001.004 (e) and .18.~~

~~It is the policy of the Board that:~~

- ~~1. Clinical records shall be confidential, current and accurate.~~
- ~~2. The clinical record is the property of Tri-County and is maintained for the benefit of the patient, the staff and the facility.~~
- ~~3. Tri-County is responsible for safeguarding the information in the clinical record against loss, defacement, tampering or use by unauthorized persons.~~
- ~~4. Tri-County shall protect the confidentiality of clinical information and communications among staff members and patients by limiting access to clinical records to those persons directly involved in client care.~~
- ~~5. No information as to the identity, diagnosis, treatment or prognosis of any Tri-County client will be disclosed without the clients consent in writing of legally designed others.~~
- ~~6. Only the minimum of identifiable information necessary for the intended purpose shall be released.~~
- ~~7. Records may be removed from Tri-County jurisdiction and safekeeping only according to the policies or as required by law.~~
- ~~8. Exceptions to these policies will be permitted only for:~~
 - ~~a. Disclosures required by law~~
 - ~~b. Bona Fide medical and psychological emergencies~~
 - ~~c. Fiscal auditing~~
 - ~~d. Program analysis~~

~~D.1.2~~

- ~~9. Exceptions to these policies will be permitted only for:~~

a. ~~Tri County authorized research~~

~~In the case of fiscal audits, program analysis and authorized research, identifiable data may be disclosed without the client's consent to these outside parties only if they assure in writing to Tri County that:~~

~~1. Such information is essential to the performance of their work, which work cannot be accomplished by any other means;~~

~~2. Their work will not disclose, intentionally or otherwise, the identity of any Tri County client and the care rendered him;~~

~~3. They will not transfer any client identifying information to other auditors, program analysis and researchers without first:~~

~~a. Receiving in writing Tri County's permission to do so;~~

~~b. Receiving from the potential recipient of the information to be transferred, a copy of his non disclosure assurance that he had filed with Tri County and which addresses the requirements 8.3 (1), (2), (3) above.~~

10. The Executive Director shall prepare, or cause to be prepared and maintained, as set of procedures for the implementation and execution of this policy.

11. All staff shall receive training, as a part of new staff orientation and with periodic update, regarding the effective maintenance of confidentiality of the clinical record.

TRI-COUNTY ~~BEHAVIORAL HEALTHCARE~~ ~~MENTAL HEALTH~~ ~~MENTAL RETARDATION SERVICES~~

STATEMENT OF POLICY

Richard Herpin, Chairman

SUBJECT: Continuity of ~~Care~~ Services

October 17, 1985
Date

It is the policy of the Board of Trustees of Tri-County Behavioral Healthcare ('Tri-County' or 'Center') ~~Mental Health Mental Retardation Services~~ to maintain working relationships with all state ~~mental health hospitals and facilities~~ hospital and state ~~supported living centers~~ schools serving the Tri-County catchment area. Tri-County shall be in compliance with Titles 25 and 40 of Texas Administrative Code related to Continuity of Care with these facilities with TDMHMR Commissioner's Rule on Continuity of Care #302.04.30.001-.013 and shall provide follow-up services for persons discharged or furloughed from state facilities.

Further, it is the policy of the Board that appropriate procedures are developed to ensure compliance with Administrative Code and Contract requirements related to Continuity of Care. which ensure continuity of services between programs and with service agencies in the community.

Agenda Item: Personnel Reports for February and March 2017 Committee: Executive	Board Meeting Date: April 27, 2017
Background Information: None	
Supporting Documentation: Personnel Reports for February and March 2017	
Recommended Action: For Information Only	

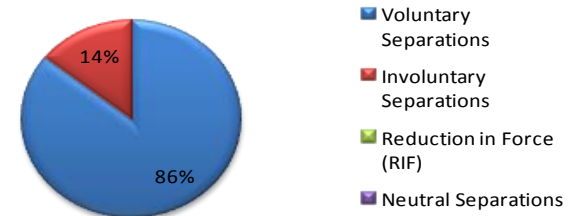
Personnel Report February 2017

Total Applications received in February = 255
 Total New Hires for the month of February = 10
 Total New Hires Year to Date = 64

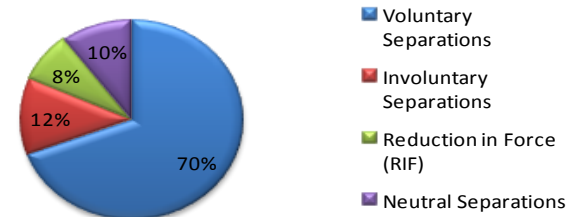
February Turnover	FY17	FY16
Number of Active Employees	345	331
Number of Monthly Separations	7	10
Number of Separations YTD	49	43
Year to Date Turnover Rate	14%	13%
February Turnover	2%	3%

Separations by Reason	February Separations	Year to Date
Retired	0	2
Involuntarily Terminated	1	5
Neutral Termination	0	6
Dissatisfied	0	0
Lack of Support from Administration	0	0
Micro-managing supervisor	0	0
Lack of growth opportunities/recognition	0	0
Difficulty learning new job	0	0
Co-workers	0	0
Work Related Stress/Environment	0	0
RIF	0	4
Deceased	0	0
Pay	0	0
Health	0	0
Family	0	2
Relocation	1	3
School	0	0
Personal	1	2
Unknown	0	3
New Job	4	22
Total Separations	7	49

February Voluntary, Involuntary, RIF and Neutral Separations



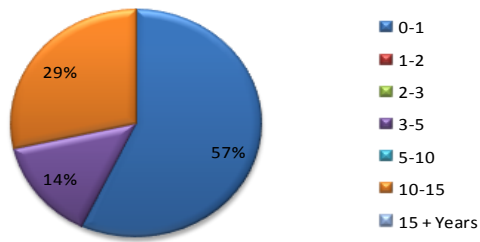
Year to Date Voluntary, Involuntary, RIF and Neutral Separations



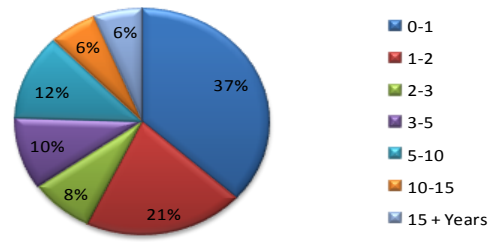
Management Team	# of Employees	Monthly Separations	Year to Date Separations	% February	% YTD
Evan Roberson	19	0	2	0%	11%
Millie McDuffey	29	1	10	3%	34%
Amy Foerster	17	2	3	12%	18%
Tanya Bryant	7	0	0	0%	0%
Behavioral Health Director	131	3	21	2%	16%
Breanna Robertson	60	1	6	2%	10%
Kelly Shropshire	32	0	2	0%	6%
Kathy Foster	41	0	4	0%	10%
Kenneth Barfield	9	0	1	0%	11%
Total	345	7	49		

Separation by EEO Category	# of Employees	Monthly Separations	Year to Date	% February	% Year to Date
Supervisors & Managers	22	0	3	0%	14%
Medical (MD,DO, LVN, RN, APN, PA, Psychologist)	41	0	5	0%	12%
Professionals (QMHP)	93	3	18	3%	19%
Professionals (QIDP)	27	0	2	0%	7%
Licensed Staff (LCDC, LPC...)	21	0	0	0%	0%
Business Services (Accounting)	11	0	0	0%	0%
Central Administration (HR, IT, Executive Director)	30	0	0	0%	0%
Program Support(Financial Counselors, QA, Training, Med. Records)	35	1	13	3%	37%
Nurse Technicians/Aides	21	1	1	5%	5%
Service/Maintenance	17	2	4	12%	24%
Direct Care (HCS, Respite, Life Skills)	27	0	3	0%	11%
Total	345	7	49		

February Separations by Tenure



Year to Date Separations by Tenure



Personnel Report March 2017

Total Applications received in March = 180

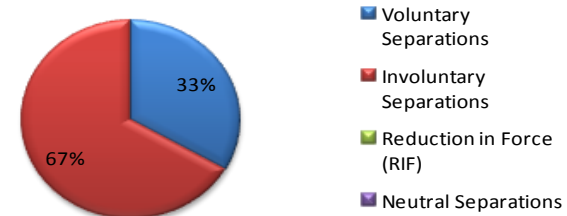
Total New Hires for the month of March = 2

Total New Hires Year to Date = 66

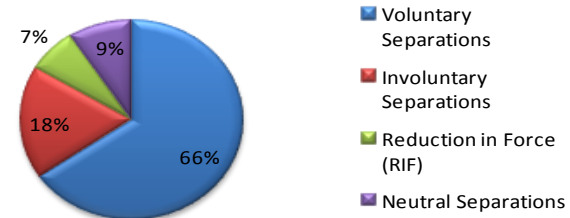
March Turnover	FY17	FY16
Number of Active Employees	341	332
Number of Monthly Separations	6	6
Number of Separations YTD	55	49
Year to Date Turnover Rate	16%	15%
March Turnover	2%	2%

Separations by Reason	March Separations	Year to Date
Retired	0	2
Involuntarily Terminated	4	9
Neutral Termination	0	6
Dissatisfied	0	0
Lack of Support from Administration	0	0
Micro-managing supervisor	0	0
Lack of growth opportunities/recognition	0	0
Difficulty learning new job	0	0
Co-workers	0	0
Work Related Stress/Environment	0	0
RIF	0	4
Deceased	0	0
Pay	0	0
Health	0	0
Family	0	2
Relocation	0	3
School	1	1
Personal	0	2
Unknown	0	3
New Job	1	23
Total Separations	6	55

March Voluntary, Involuntary, RIF and Neutral Separations



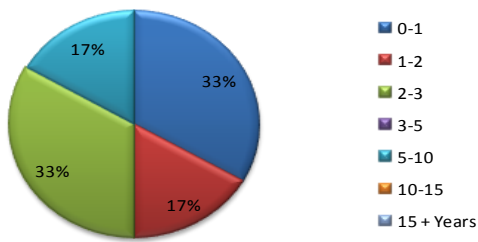
Year to Date Voluntary, Involuntary, RIF and Neutral Separations



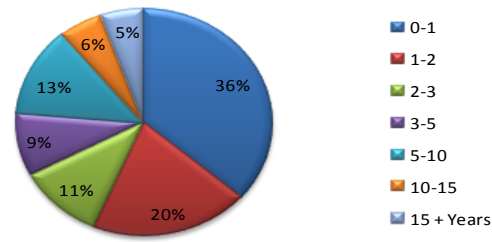
Management Team	# of Employees	Monthly Separations	Year to Date Separations	% March	% YTD
Evan Roberson	21	0	2	0%	10%
Millie McDuffey	28	0	10	0%	36%
Amy Foerster	17	0	3	0%	18%
Tanya Bryant	7	0	0	0%	0%
Behavioral Health Director	127	4	25	3%	20%
Breanna Robertson	60	1	7	2%	12%
Kelly Shropshire	32	0	2	0%	6%
Kathy Foster	40	1	5	3%	13%
Kenneth Barfield	9	0	1	0%	11%
Total	341	6	55		

Separation by EEO Category	# of Employees	Monthly Separations	Year to Date	% March	% Year to Date
Supervisors & Managers	21	1	4	5%	19%
Medical (MD,DO, LVN, RN, APN, PA, Psychologist)	40	1	6	3%	15%
Professionals (QMHP)	92	3	21	3%	23%
Professionals (QIDP)	27	0	2	0%	7%
Licensed Staff (LCDC, LPC...)	21	0	0	0%	0%
Business Services (Accounting)	11	0	0	0%	0%
Central Administration (HR, IT, Executive Director)	32	0	0	0%	0%
Program Support(Financial Counselors, QA, Training, Med. Records)	33	0	13	0%	39%
Nurse Technicians/Aides	21	0	1	0%	5%
Service/Maintenance	17	0	4	0%	24%
Direct Care (HCS, Respite, Life Skills)	26	1	4	4%	15%
Total	341	6	55		

March Separations by Tenure

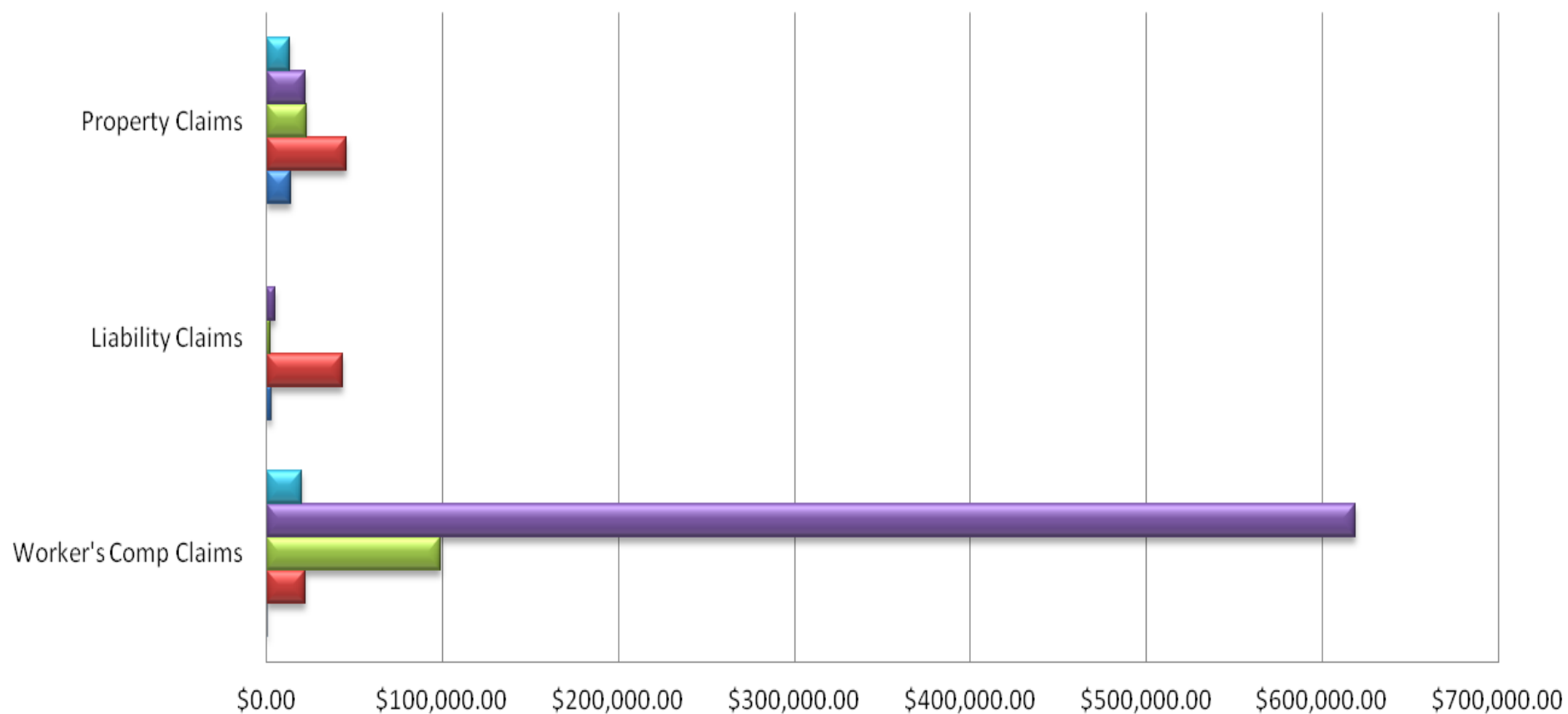


Year to Date Separations by Tenure



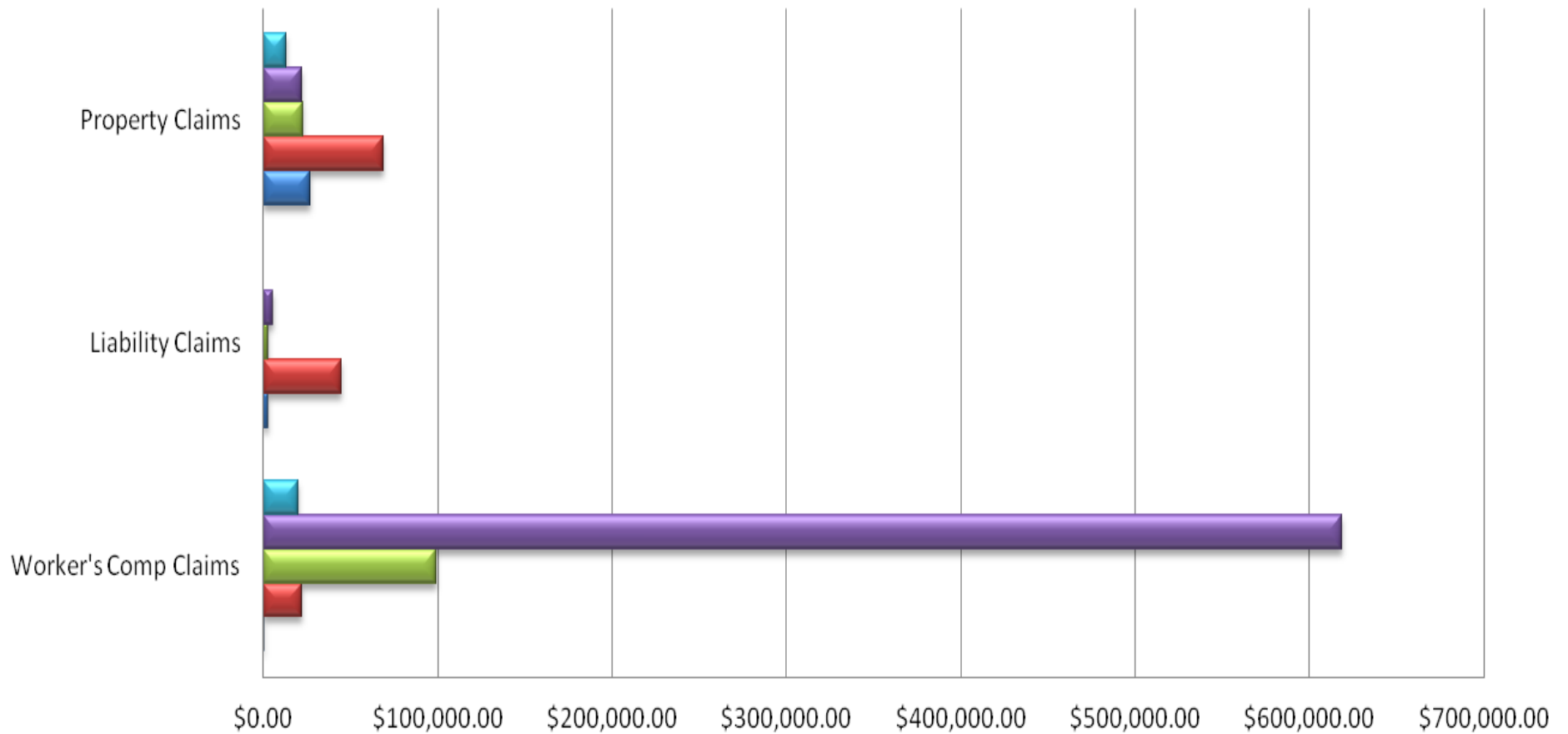
<p>Agenda Item: Texas Council Risk Management Fund Claims Summary as of February and March 2017</p> <p>Committee: Executive</p>	<p>Board Meeting Date:</p> <p>April 27, 2017</p>
<p>Background Information:</p> <p>None</p>	
<p>Supporting Documentation:</p> <p>Texas Council Risk Management Fund Claims Summary as of February and March 2017</p>	
<p>Recommended Action:</p> <p>For Information Only</p>	

TCRMF Claims Summary February 2017



	Worker's Comp Claims	Liability Claims	Property Claims
2013	\$20,263.00	\$0.00	\$12,869.00
2014	\$618,699.00	\$5,295.00	\$21,931.00
2015	\$99,015.00	\$2,556.00	\$22,505.00
2016	\$21,868.00	\$43,184.00	\$45,614.00
2017	\$193.00	\$2,912.00	\$13,707.00

TCRMF Claims Summary March 2017



	Worker's Comp Claims	Liability Claims	Property Claims
2013	\$20,263.00	\$0.00	\$12,869.00
2014	\$618,699.00	\$5,295.00	\$21,931.00
2015	\$99,121.00	\$2,556.00	\$22,505.00
2016	\$21,868.00	\$45,120.00	\$68,619.00
2017	\$193.00	\$2,912.00	\$26,625.00

Agenda Item: Approve February 2017 Financial Statements Committee: Business	Board Meeting Date April 27, 2017
Background Information: None	
Supporting Documentation: February 2017 Financial Statements	
Recommended Action: Approve February 2017 Financial Statements	

February 2017 Financial Summary

Revenues for February 2017 were \$2,746,348 and operating expenses were \$2,645,316 resulting in a gain in operations of \$101,032. Capital Expenditures and Extraordinary Expenses for February were \$95,107 resulting in a gain of \$5,925. Total revenues were 107.58% of the monthly budgeted revenues and total expenses were 107.91% of the monthly budgeted expenses.

Year to date revenues are \$15,931,367 and operating expenses are \$14,978,905 leaving excess operating revenues of \$952,462. YTD Capital Expenditures and Extraordinary Expenses are \$1,108,214 resulting in a loss YTD of \$155,752. Total revenues are 103.37% of the YTD budgeted revenues and total expenses are 104.18% of the YTD budgeted expenses

REVENUES

YTD Revenue items that are below the budget by more than \$10,000:

Revenue Source	YTD Revenue	YTD Budget	% of Budget	\$ Variance
Rehab – Title XIX	934,769	957,099	97.67%	22,330
DSHS – SA Treatment Adult	39,934	57,618	69.31%	17,684
DSHS – SA Treatment Youth	0	20,250	0	20,250
Vocational Contract - NISH	56,148	87,502	64.17%	31,354

Rehab – Title XIX – This line item remains on the narrative mainly due to a decrease in the number of adult Medicaid clients being seen for Rehab services. We have seen this percentage continue to decrease over the past 3+ years. We will continue to monitor our data to ensure our revenue expectations are realistic.

DSHS – SA Treatment Adult – This program struggles to keep clients enrolled in their treatment. We are currently increasing marketing efforts to get our name out and have started a walk-in clinic to increase service hours.

DSHS – SA Treatment Youth – We had this funding source for many years. As of this time, we have not billed any services in FY 2017. This line item will continue to be monitored and adjustments will be made during the mid-year revision if necessary.

Vocational Contract – NISH – As presented last month, the NISH contracts have decreased significantly. The Board approved the termination of these contracts at the December board meeting, but it will not be finalized until April 15th.

EXPENSES

YTD Individual line expense items that exceed the YTD budget by more than \$10,000:

Expense Source	YTD Expenses	YTD Budget	% of Budget	\$ Variance
Building Repairs & Maintenance	233,954	92,548	2.53%	141,406
Contract EduCare	1,152,285	1,054,220	1.09%	98,065
Contract - Clinical	454,829	434,587	1.05%	20,242
Fixed Asset – F&E	703,385	0.00	0%	703,385
Fixed Asset - Vehicle	24,730	0	0%	24,730
Insurance	47,074	19,280	2.44%	27,794

Building Repairs & Maintenance – This line item represents the Board approved Huntsville repairs. We will adjust this line in the mid-year budget revisions.

Contract EduCare – This line item represents the expense side of the ICF program. This is a cost reimbursement program; so therefore when the expense is high, it is offset with an increase on the revenue side as well.

Contract – Clinical – This line item represents contract doctor fees that were paid for coverage while Dr. Sneed was out on medical leave.

Fixed Asset – Furniture & Equipment – As approved by the Board at the September Board meeting, Tri-County purchased new furniture for our new building. A mid-year revision will be completed to reflect the total approved cost of the furniture.

Fixed Asset – Vehicle – The purchase of this vehicle is a board approved item.

Insurance – The Texas Council sent invoices from prior year's claims and deductibles in December. These amounts were deductibles for Errors and Omissions and General Liability claims. These claims were from prior years and should have been billed sooner but fell through the cracks at the Texas Council Risk Management Fund. TCRMF has put in new procedures to prevent this from happening in the future.

TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended February 28, 2017

	TOTALS COMBINED FUNDS February 2017	TOTALS COMBINED FUNDS January 2017	Increase (Decrease)
ASSETS			
CURRENT ASSETS			
Imprest Cash Funds	3,760	3,760	-
Cash on Deposit-General Fund	6,765,962	9,398,712	(2,632,750)
Cash on Deposit-Debt Fund			-
Accounts Receivable	1,881,005	2,195,624	(314,619)
Inventory	5,574	5,574	-
TOTAL CURRENT ASSETS	8,656,301	11,603,670	(2,947,369)
FIXED ASSETS	15,648,025	15,648,025	-
OTHER ASSETS	52,951	33,813	19,137
TOTAL ASSETS	\$ 24,357,276	\$ 27,285,508	\$ (2,928,231)
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
CURRENT LIABILITIES	1,011,823	874,705	137,118
NOTES PAYABLE	607,292	607,292	-
DEFERRED REVENUE	2,357,661	5,435,102	(3,077,441)
LONG-TERM LIABILITIES FOR			
Line of Credit - Tradition Bank	307,549	328,038	(20,490)
Note Payable Prosperity Bank	528,751	541,721	(12,971)
First Financial loan tied to CD	1,100,000	1,100,000	-
First Financial Construction Loan	3,113,876	3,113,876	-
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	(155,752)	(161,677)	5,925
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(5,050,175)	(5,083,636)	33,461
Reserved for Debt Retirement	963,631	963,631	-
COMMITTED			
Net Assets-Property and Equipment	15,648,025	15,648,025	-
Reserved for Vehicles & Equipment Replacement	678,112	678,112	-
Reserved for Facility Improvement & Acquisitions	-	-	-
Reserved for Board Initiatives	1,464,542	1,464,542	-
Reserved for 1115 Waiver Programs	516,833	516,833	-
ASSIGNED			
Reserved for Workers' Compensation	274,409	274,409	-
Reserved for Current Year Budgeted Reserve	36,998	30,831	6,167
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(607,292)	(607,292)	-
UNASSIGNED			
Unrestricted and Undesignated	1,460,994	1,460,994	-
TOTAL LIABILITIES/FUND BALANCE	\$ 24,357,276	\$ 27,285,508	\$ (2,928,232)

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended February 28, 2017**

	General Operating Funds	Memorandum Only Final August 2016
ASSETS		
CURRENT ASSETS		
Imprest Cash Funds	3,760	2,985
Cash on Deposit-General Fund	6,765,962	4,841,244
Cash on Deposit-Debt Fund	-	-
Accounts Receivable	1,881,005	1,703,269
Inventory	5,574	6,455
TOTAL CURRENT ASSETS	8,656,301	6,553,953
FIXED ASSETS	15,648,025	15,648,025
OTHER ASSETS	52,951	68,231
	\$ 24,357,276	\$ 22,270,209
LIABILITIES, DEFERRED REVENUE, FUND BALANCES		
CURRENT LIABILITIES	1,011,823	1,235,254
NOTES PAYABLE	607,292	607,292
DEFERRED REVENUE	2,357,661	(107,050)
LONG-TERM LIABILITIES FOR		
Line of Credit - Tradition Bank	307,549	429,919
Note Payable Prosperity Bank	528,751	606,132
First Financial loan tied to CD	1,100,000	1,100,000
First Financial Construction Loan	3,113,876	3,113,876
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR		
General Fund	(155,752)	(1,941,141)
FUND EQUITY		
RESTRICTED		
Net Assets Reserved for Debt service-Restricted	(5,050,175)	(5,249,927)
Reserved for Debt Retirement	963,631	963,631
COMMITTED		
Net Assets-Property and Equipment-Committed	15,648,025	15,648,025
Reserved for Vehicles & Equipment Replacement	678,112	678,112
Reserved for Facility Improvement & Acquisitions	-	2,136,013
Reserved for Board Initiatives	1,464,542	1,500,000
Reserved for 1115 Waiver Programs	516,833	516,833
ASSIGNED		
Reserved for Workers' Compensation-Assigned	274,409	274,409
Reserved for Current Year Budgeted Reserve -Assigned	36,998	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(607,292)	(607,292)
UNASSIGNED		
Unrestricted and Undesignated	1,460,994	1,266,122
TOTAL LIABILITIES/FUND BALANCE	\$ 24,357,276	\$ 22,270,209

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended February 2017
and Year To Date as of February 2017

INCOME:	MONTH OF February 2017	YTD February 2017
Local Revenue Sources	122,999	918,875
Earned Income	1,277,810	7,232,736
General Revenue-Contract	1,345,539	7,779,756
TOTAL INCOME	\$ 2,746,348	\$ 15,931,367
EXPENSES:		
Salaries	1,410,423	8,176,125
Employee Benefits	297,951	1,656,149
Medication Expense	58,808	342,216
Travel-Board/Staff	40,629	240,866
Building Rent/Maintenance	23,088	245,493
Consultants/Contracts	554,872	3,013,496
Other Operating Expenses	259,545	1,304,559
TOTAL EXPENSES	\$ 2,645,316	\$ 14,978,905
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 101,032	\$ 952,462
CAPITAL EXPENDITURES		
Capital Outlay-FF&E, Automobiles, Building	30,083	778,268
Capital Outlay-Debt Service	65,025	329,947
TOTAL CAPITAL EXPENDITURES	\$ 95,107	\$ 1,108,214
GRAND TOTAL EXPENDITURES	\$ 2,740,423	\$ 16,087,119
Excess (Deficiency) of Revenues and Expenses	\$ 5,925	\$ (155,752)

Debt Service and Fixed Asset Fund:		
Debt Service	65,025	329,947
Excess(Deficiency) of revenues over Expenses	65,025	329,947

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of February 2017

	YTD February 2017	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	918,875	677,317	241,558
Earned Income	7,232,736	7,006,854	225,882
General Revenue-Contract	7,779,756	7,727,857	51,899
TOTAL INCOME	\$ 15,931,367	\$ 15,412,028	\$ 519,339
EXPENSES:			
Salaries	8,176,125	8,369,648	(193,523)
Employee Benefits	1,656,149	1,719,622	(63,473)
Medication Expense	342,216	351,000	(8,784)
Travel-Board/Staff	240,866	227,751	13,115
Building Rent/Maintenance	245,493	103,798	141,695
Consultants/Contracts	3,013,496	3,035,811	(22,315)
Other Operating Expenses	1,304,559	1,311,988	(7,429)
TOTAL EXPENSES	\$ 14,978,905	\$ 15,119,618	\$ (140,713)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 952,462	\$ 292,410	\$ 660,052
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	778,268	109,910	668,358
Capital Outlay-Debt Service	329,947	212,220	117,727
TOTAL CAPITAL EXPENDITURES	\$ 1,108,214	\$ 322,130	\$ 786,084
GRAND TOTAL EXPENDITURES	\$ 16,087,119	\$ 15,441,748	\$ 645,371
Excess (Deficiency) of Revenues and Expenses	\$ (155,752)	\$ (29,720)	\$ (126,032)

Debt Service and Fixed Asset Fund:

Debt Service	329,947	212,220	117,727
Excess(Deficiency) of revenues over Expenses	329,947	212,220	117,727

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended February 2017

INCOME:	MONTH OF February 2017	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	122,999	100,234	22,765
Earned Income	1,277,810	1,155,713	122,097
General Revenue-Contract	1,345,539	1,296,917	48,622
TOTAL INCOME	\$ 2,746,348	\$ 2,552,864	\$ 193,484
EXPENSES:			
Salaries	1,410,423	1,389,273	21,150
Employee Benefits	297,951	286,601	11,350
Medication Expense	58,808	58,499	309
Travel-Board/Staff	40,629	37,719	2,910
Building Rent/Maintenance	23,088	15,617	7,471
Consultants/Contracts	554,872	484,218	70,654
Other Operating Expenses	259,545	219,801	39,744
TOTAL EXPENSES	\$ 2,645,316	\$ 2,491,728	\$ 153,588
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 101,032	\$ 61,136	\$ 39,896
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	30,083	12,358	17,725
Capital Outlay-Debt Service	65,025	35,370	29,655
TOTAL CAPITAL EXPENDITURES	\$ 95,107	\$ 47,728	\$ 47,379
GRAND TOTAL EXPENDITURES	\$ 2,740,423	\$ 2,539,456	\$ 200,967
Excess (Deficiency) of Revenues and Expenses	\$ 5,925	\$ 13,408	\$ (7,483)

Debt Service and Fixed Asset Fund:

Debt Service	65,025	35,370	29,655
Excess(Deficiency) of revenues over Expenses	65,025	35,370	29,655

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With February 2016 Comparative Data
Year to Date as of February 2017

INCOME:	YTD February 2017	YTD February 2016	Increase (Decrease)
Local Revenue Sources	918,875	1,309,340	(390,465)
Earned Income	7,232,736	6,887,172	345,564
General Revenue-Contract	7,779,756	7,253,007	526,749
TOTAL INCOME	\$ 15,931,367	\$ 15,449,519	\$ 481,848
EXPENSES:			
Salaries	8,176,125	7,928,644	247,481
Employee Benefits	1,656,149	1,509,330	146,819
Medication Expense	342,216	339,462	2,754
Travel-Board/Staff	240,866	241,600	(734)
Building Rent/Maintenance	245,493	170,408	75,085
Consultants/Contracts	3,013,496	2,709,149	304,347
Other Operating Expenses	1,304,559	1,296,957	7,602
TOTAL EXPENSES	\$ 14,978,905	\$ 14,195,550	\$ 783,355
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 952,462	\$ 1,253,969	\$ (301,507)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	778,268	768,621	9,647
Capital Outlay-Debt Service	329,947	212,152	117,795
TOTAL CAPITAL EXPENDITURES	\$ 1,108,214	\$ 980,773	\$ 127,441
GRAND TOTAL EXPENDITURES	\$ 16,087,119	\$ 15,176,323	\$ 910,796
Excess (Deficiency) of Revenues and Expenses	\$ (155,752)	\$ 273,196	\$ (428,948)

Debt Service and Fixed Asset Fund:

Debt Service	329,947	212,152	117,795
Excess(Deficiency) of revenues over Expenses	329,947	212,152	117,795

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With February 2016 Comparative Data
For the Month Ended February 2017

INCOME:	MONTH OF February 2017	MONTH OF February 2016	Increase (Decrease)
Local Revenue Sources	122,999	106,027	16,972
Earned Income	1,277,810	1,113,972	163,838
General Revenue-Contract	1,345,539	1,308,878	36,661
TOTAL INCOME	\$ 2,746,348	\$ 2,528,877	\$ 217,471
Salaries	1,410,423	1,312,967	97,456
Employee Benefits	297,951	254,509	43,442
Medication Expense	58,808	59,361	(553)
Travel-Board/Staff	40,629	45,215	(4,586)
Building Rent/Maintenance	23,088	29,053	(5,965)
Consultants/Contracts	554,872	457,151	97,721
Other Operating Expenses	259,545	160,598	98,947
TOTAL EXPENSES	\$ 2,645,316	\$ 2,318,854	\$ 326,462
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 101,032	\$ 210,023	\$ (108,991)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	30,083	206	29,877
Capital Outlay-Debt Service	65,025	35,541	29,484
TOTAL CAPITAL EXPENDITURES	\$ 95,107	\$ 35,747	\$ 59,360
GRAND TOTAL EXPENDITURES	\$ 2,740,423	\$ 2,354,601	\$ 385,822
Excess (Deficiency) of Revenues and Expenses	\$ 5,925	\$ 174,276	\$ (168,351)

Debt Service and Fixed Asset Fund:

Debt Service	65,025	35,541	29,484
Excess(Deficiency) of revenues over Expenses	65,025	35,541	29,484

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With January 2017 Comparative Data
For the Month Ended February 2017

INCOME:	MONTH OF February 2017	MONTH OF January 2017	Increase (Decrease)
Local Revenue Sources	122,999	89,463	33,535
Earned Income	1,277,810	1,182,909	94,901
General Revenue-Contract	1,345,539	1,212,889	132,650
TOTAL INCOME	\$ 2,746,348	\$ 2,485,261	\$ 261,087
EXPENSES:			
Salaries	1,410,423	1,359,817	50,606
Employee Benefits	297,951	298,404	(454)
Medication Expense	58,808	48,416	10,392
Travel-Board/Staff	40,629	40,632	(3)
Building Rent/Maintenance	23,088	32,484	(9,397)
Consultants/Contracts	554,872	381,204	173,668
Other Operating Expenses	259,545	177,767	81,778
TOTAL EXPENSES	\$ 2,645,316	\$ 2,338,725	\$ 306,591
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 101,032	\$ 146,536	\$ (45,504)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	30,083	562,647	(532,565)
Capital Outlay-Debt Service	65,025	63,642	1,383
TOTAL CAPITAL EXPENDITURES	\$ 95,107	\$ 626,289	\$ (531,181)
GRAND TOTAL EXPENDITURES	\$ 2,740,423	\$ 2,965,014	\$ (224,591)
Excess (Deficiency) of Revenues and Expenses	\$ 5,925	\$ (479,753)	\$ 485,677

Debt Service and Fixed Asset Fund:

Debt Service	65,025	63,642	1,383
Excess(Deficiency) of revenues over Expenses	65,025	63,642	1,383

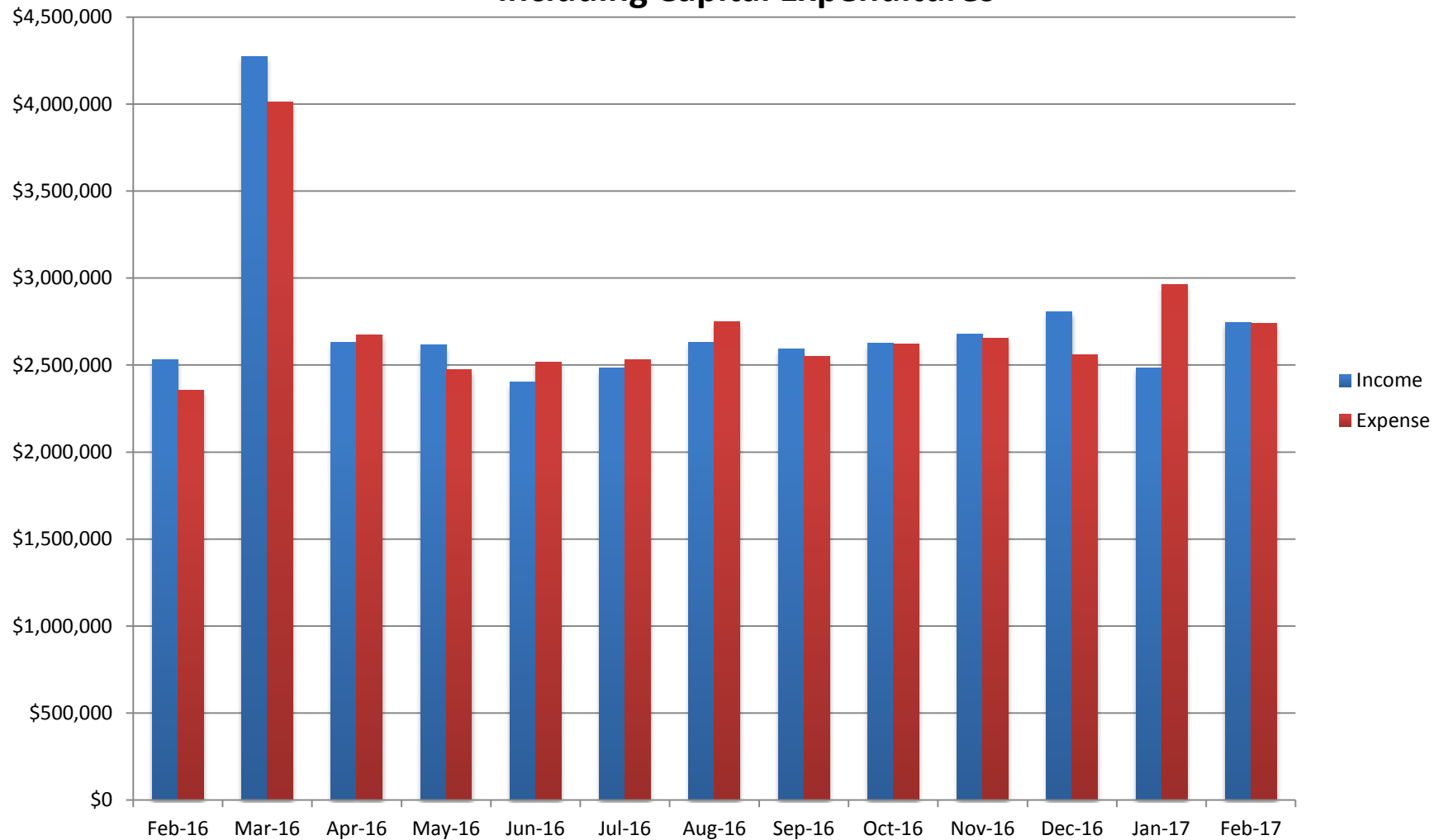
TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of February 2017

	YTD Mental Health February 2017	YTD IDD February 2017	YTD Other Services February 2017	YTD Agency Total February 2017	YTD Approved Budget February 2017	Increase (Decrease)
INCOME:						
Local Revenue Sources	1,076,808	159,998	(317,932)	918,875	677,317	241,558
Earned Income	2,003,724	3,160,241	2,068,771	7,232,736	7,006,854	225,882
General Revenue-Contract	6,744,692	1,035,064		7,779,756	7,727,857	51,899
TOTAL INCOME	\$ 9,825,224	\$ 4,355,303	\$ 1,750,839	\$ 15,931,367	\$ 15,412,028	\$ 519,339
EXPENSES:						
Salaries	5,209,990	1,638,736	1,327,400	8,176,125	8,369,648	(193,523)
Employee Benefits	1,042,173	362,692	251,285	1,656,149	1,719,622	(63,473)
Medication Expense	263,085		79,132	342,216	351,000	(8,784)
Travel-Board/Staff	138,404	71,458	31,003	240,866	227,751	13,115
Building Rent/Maintenance	150,619	62,947	31,928	245,493	103,798	141,695
Consultants/Contracts	1,178,160	1,755,067	80,269	3,013,496	3,035,811	(22,315)
Other Operating Expenses	759,181	324,369	221,009	1,304,559	1,311,988	(7,429)
TOTAL EXPENSES	\$ 8,741,612	\$ 4,215,269	\$ 2,022,026	\$ 14,978,904	\$ 15,119,618	\$ (140,714)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,083,612	\$ 140,034	\$ (271,187)	\$ 952,463	\$ 292,410	\$ 660,053
CAPITAL EXPENDITURES						
Capital Outlay-FF&E, Automobiles	450,829	198,627	128,812	778,268	109,910	668,358
Capital Outlay-Debt Service	152,840	57,083	120,025	329,947	212,220	117,727
TOTAL CAPITAL EXPENDITURES	\$ 603,669	\$ 255,710	\$ 248,837	\$ 1,108,215	\$ 322,130	\$ 786,085
GRAND TOTAL EXPENDITURES	\$ 9,345,281	\$ 4,470,979	\$ 2,270,863	\$ 16,087,119	\$ 15,441,748	\$ 645,371
Excess (Deficiency) of Revenues and Expenses	\$ 479,943	\$ (115,676)	\$ (520,024)	\$ (155,752)	\$ (29,720)	\$ (126,032)
Debt Service and Fixed Asset Fund:						
Debt Service	152,840	57,083	120,025	329,947	212,220	(59,380)
		-	-	-	-	-
Excess(Deficiency) of revenues over Expenses	152,840	57,083	120,025	329,947	212,220	(59,380)

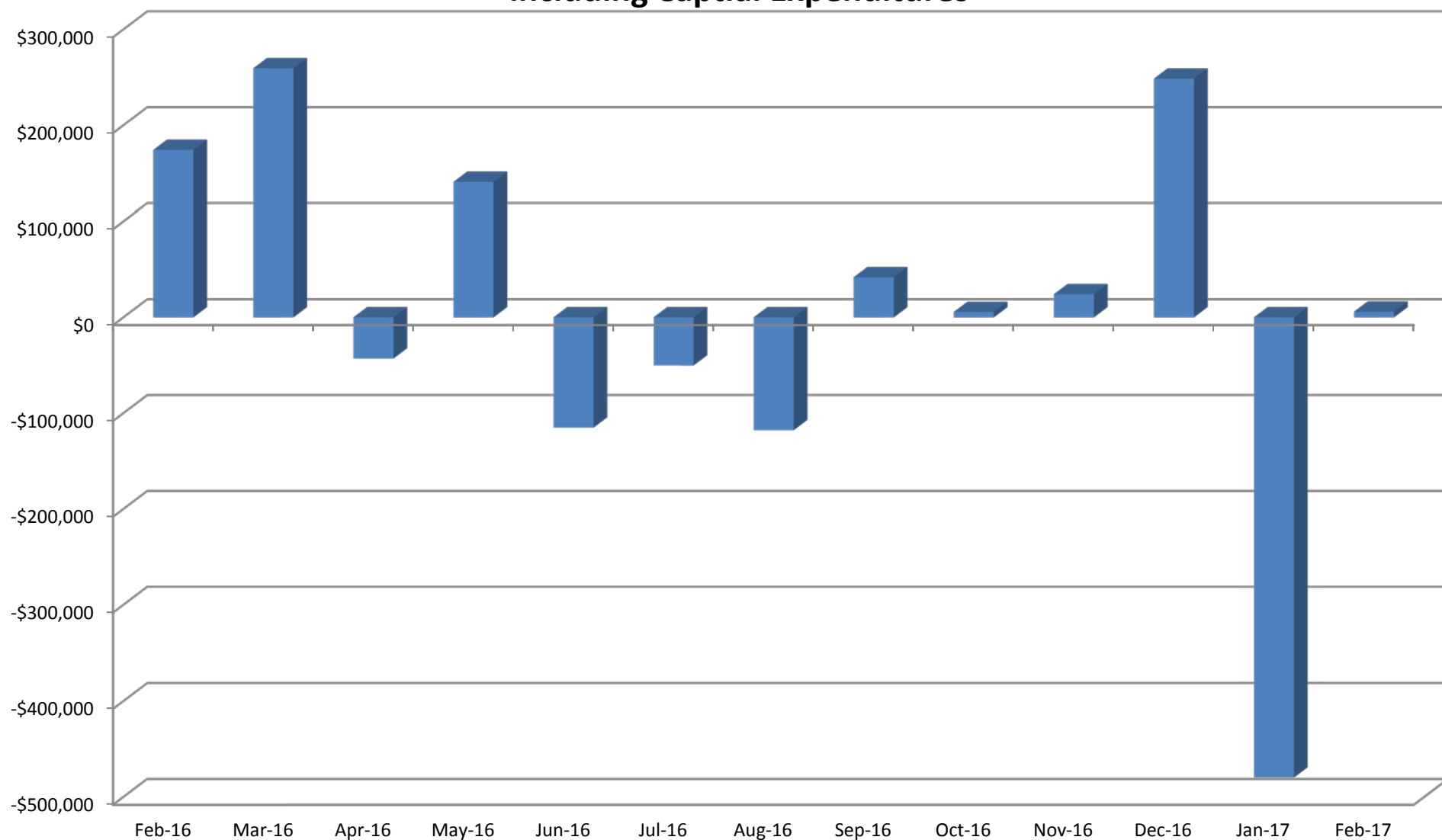
TRI-COUNTY BEHAVIORAL HEALTHCARE

Income and Expense

including Capital Expenditures



TRI-COUNTY BEHAVIORAL HEALTHCARE
Income after Expense
including Capital Expenditures



Agenda Item: Approve March 2017 Financial Statements Committee: Business	Board Meeting Date April 27, 2017
Background Information: None	
Supporting Documentation: March 2017 Financial Statements	
Recommended Action: Approve March 2017 Financial Statements	

March 2017 Financial Summary

Revenues for March 2017 were \$2,567,768 and operating expenses were \$2,541,617 resulting in a gain in operations of \$26,151. Capital Expenditures and Extraordinary Expenses for March were \$102,359 resulting in a loss of \$76,209. Total revenues were 99.50% of the monthly budgeted revenues and total expenses were 101.97% of the monthly budgeted expenses.

Year to date revenues are \$18,499,135 and operating expenses are \$17,520,522 leaving excess operating revenues of \$978,613. YTD Capital Expenditures and Extraordinary Expenses are \$1,210,574 resulting in a loss YTD of \$231,961. Total revenues are 102.80% of the YTD budgeted revenues and total expenses are 103.86% of the YTD budgeted expenses.

REVENUES

YTD Revenue items that are below the budget by more than \$10,000:

Revenue Source	YTD Revenue	YTD Budget	% of Budget	\$ Variance
Rehab – Title XIX	1,071,012	1,117,314	95.86%	46,302
DSHS – SA Treatment Adult	43,448	68,721	63.22%	25,273
DSHS – SA Treatment Youth	0	24,524	0	24,524
Vocational Contract - NISH	64,679	102,085	63.36%	37,406

Rehab – Title XIX – This line item remains on the narrative mainly due to a decrease in the number of adult Medicaid clients being seen for Rehab services. We have seen this percentage continue to decrease over the past 3+ years. We will continue to monitor our data to ensure our revenue expectations are realistic.

DSHS – SA Treatment Adult – This program struggles to keep clients enrolled in their treatment. We are currently increasing marketing efforts to get our name out and have started a walk-in clinic to increase service hours.

DSHS – SA Treatment Youth – We had this funding source for many years. As of this time, we have not billed any services in FY 2017. This line item will continue to be monitored and adjustments will be made during the mid-year revision if necessary.

Vocational Contract – NISH – As presented earlier in the fiscal year, the NISH contracts have decreased significantly. The Board approved the termination of these contracts at the December board meeting, but it will not be finalized until April 15th.

EXPENSES

YTD Individual line expense items that exceed the YTD budget by more than \$10,000:

Expense Source	YTD Expenses	YTD Budget	% of Budget	\$ Variance
Building Repairs & Maintenance	247,056	106,290	2.32%	140,766
Contract EduCare	1,322,160	1,209,924	1.09%	112,236
Contract - Clinical	553,169	506,431	1.09%	46,738
Fixed Asset – Furniture & Equipment	729,981	0.00	0%	729,981
Fixed Asset - Vehicle	24,730	0.00	0%	24,730
Insurance	54,804	27,010	2.44%	27,794
Moving Expense	22,287	3,210	6.94%	19,077

Building Repairs & Maintenance – This line item represents the Board approved Huntsville repairs. We will adjust this line in the mid-year budget revisions.

Contract EduCare – This line item represents the expense side of the ICF program. This is a cost reimbursement program so therefore when the expense is high; it is offset with an increase on the revenue side as well.

Contract – Clinical – This line item represents contract doctor fees that were paid for coverage while Dr. Sneed was out on medical leave.

Fixed Asset – Furniture & Equipment – As approved by the Board at the September Board meeting, Tri-County purchased new furniture for our new building. A mid-year revision will be done to reflect the total approved cost of the furniture.

Fixed Asset – Vehicle – This line represents the purchase of a mini-van for the ACT program that was approved in a previous board meeting.

Insurance – The Texas Council sent invoices from prior year's claims and deductibles in December. These amounts were deductibles for Errors and Omissions and General Liability claims. These claims were from prior years and should have been billed sooner but fell through the cracks at the Texas Council Risk Management Fund. TCRMF has put in new procedures to prevent this from happening in the future. This line will be adjusted in the budget revision.

Moving Expense – This line represents the actual cost to hire movers for the Conroe facilities to be consolidated into the new building. This will be adjusted in the mid-year budget revision.

TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended March 31, 2017

	TOTALS COMBINED FUNDS March 2017	TOTALS COMBINED FUNDS February 2017	Increase (Decrease)
ASSETS			
CURRENT ASSETS			
Imprest Cash Funds	3,840	3,760	80
Cash on Deposit-General Fund	7,561,524	6,765,962	795,562
Cash on Deposit-Debt Fund			-
Accounts Receivable	1,753,758	1,881,005	(127,247)
Inventory	5,480	5,574	(94)
TOTAL CURRENT ASSETS	9,324,602	8,656,301	668,301
FIXED ASSETS	15,648,025	15,648,025	-
OTHER ASSETS	103,675	52,951	50,724
TOTAL ASSETS	\$ 25,076,302	\$ 24,357,276	\$ 719,026
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
CURRENT LIABILITIES	1,114,671	1,011,823	102,848
NOTES PAYABLE	607,292	607,292	-
DEFERRED REVENUE	3,043,881	2,357,661	686,220
LONG-TERM LIABILITIES FOR			
Line of Credit - Tradition Bank	286,967	307,549	(20,582)
Note Payable Prosperity Bank	515,750	528,751	(13,001)
First Financial loan tied to CD	1,100,000	1,100,000	-
First Financial Construction Loan	3,113,876	3,113,876	-
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	(231,961)	(155,752)	(76,209)
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(5,016,593)	(5,050,175)	33,582
Reserved for Debt Retirement	963,631	963,631	-
COMMITTED			
Net Assets-Property and Equipment	15,648,025	15,648,025	-
Reserved for Vehicles & Equipment Replacement	678,112	678,112	-
Reserved for Facility Improvement & Acquisitions	-	-	-
Reserved for Board Initiatives	1,464,542	1,464,542	-
Reserved for 1115 Waiver Programs	516,833	516,833	-
ASSIGNED			
Reserved for Workers' Compensation	274,409	274,409	-
Reserved for Current Year Budgeted Reserve	43,165	36,998	6,167
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(607,292)	(607,292)	-
UNASSIGNED			
Unrestricted and Undesignated	1,460,994	1,460,994	-
TOTAL LIABILITIES/FUND BALANCE	\$ 25,076,302	\$ 24,357,276	\$ 719,026

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended March 31, 2017**

	General Operating Funds	Memorandum Only Final August 2016
ASSETS		
CURRENT ASSETS		
Imprest Cash Funds	3,840	2,985
Cash on Deposit-General Fund	7,561,524	4,841,244
Cash on Deposit-Debt Fund	-	-
Accounts Receivable	1,753,758	1,703,269
Inventory	5,480	6,455
TOTAL CURRENT ASSETS	9,324,602	6,553,953
FIXED ASSETS	15,648,025	15,648,025
OTHER ASSETS	103,675	68,231
	\$ 25,076,302	\$ 22,270,209
LIABILITIES, DEFERRED REVENUE, FUND BALANCES		
CURRENT LIABILITIES	1,114,671	1,235,254
NOTES PAYABLE	607,292	607,292
DEFERRED REVENUE	3,043,881	(107,050)
LONG-TERM LIABILITIES FOR		
Line of Credit - Tradition Bank	286,967	429,919
Note Payable Prosperity Bank	515,750	606,132
First Financial loan tied to CD	1,100,000	1,100,000
First Financial Construction Loan	3,113,876	3,113,876
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR		
General Fund	(231,961)	(1,941,141)
FUND EQUITY		
RESTRICTED		
Net Assets Reserved for Debt service-Restricted	(5,016,593)	(5,249,927)
Reserved for Debt Retirement	963,631	963,631
COMMITTED		
Net Assets-Property and Equipment-Committed	15,648,025	15,648,025
Reserved for Vehicles & Equipment Replacement	678,112	678,112
Reserved for Facility Improvement & Acquisitions	-	2,136,013
Reserved for Board Initiatives	1,464,542	1,500,000
Reserved for 1115 Waiver Programs	516,833	516,833
ASSIGNED		
Reserved for Workers' Compensation-Assigned	274,409	274,409
Reserved for Current Year Budgeted Reserve -Assigned	43,165	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(607,292)	(607,292)
UNASSIGNED		
Unrestricted and Undesignated	1,460,994	1,266,122
TOTAL LIABILITIES/FUND BALANCE	\$ 25,076,302	\$ 22,270,209

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended March 2017
and Year To Date as of March 2017

INCOME:	MONTH OF March 2017	YTD March 2017
Local Revenue Sources	96,023	1,014,898
Earned Income	1,201,350	8,434,086
General Revenue-Contract	1,270,395	9,050,151
TOTAL INCOME	\$ 2,567,768	\$ 18,499,135
EXPENSES:		
Salaries	1,328,512	9,504,637
Employee Benefits	282,663	1,938,812
Medication Expense	75,309	417,525
Travel-Board/Staff	28,901	269,767
Building Rent/Maintenance	17,576	263,069
Consultants/Contracts	539,969	3,553,465
Other Operating Expenses	268,687	1,573,246
TOTAL EXPENSES	\$ 2,541,617	\$ 17,520,522
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 26,151	\$ 978,613
CAPITAL EXPENDITURES		
Capital Outlay-FF&E, Automobiles, Building	38,347	816,615
Capital Outlay-Debt Service	64,012	393,958
TOTAL CAPITAL EXPENDITURES	\$ 102,359	\$ 1,210,574
GRAND TOTAL EXPENDITURES	\$ 2,643,977	\$ 18,731,096
Excess (Deficiency) of Revenues and Expenses	\$ (76,209)	\$ (231,961)

Debt Service and Fixed Asset Fund:		
Debt Service	64,012	393,958
Excess(Deficiency) of revenues over Expenses	64,012	393,958

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of March 2017

	YTD March 2017	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	1,014,898	778,155	236,743
Earned Income	8,434,086	8,208,297	225,789
General Revenue-Contract	9,050,151	9,009,315	40,836
TOTAL INCOME	\$ 18,499,135	\$ 17,995,767	\$ 503,368
EXPENSES:			
Salaries	9,504,637	9,758,939	(254,302)
Employee Benefits	1,938,812	2,006,285	(67,473)
Medication Expense	417,525	409,500	8,025
Travel-Board/Staff	269,767	262,483	7,284
Building Rent/Maintenance	263,069	119,415	143,654
Consultants/Contracts	3,553,465	3,558,616	(5,151)
Other Operating Expenses	1,573,246	1,579,980	(6,734)
TOTAL EXPENSES	\$ 17,520,522	\$ 17,695,218	\$ (174,696)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 978,613	\$ 300,549	\$ 678,064
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	816,615	91,732	724,883
Capital Outlay-Debt Service	393,958	247,593	146,365
TOTAL CAPITAL EXPENDITURES	\$ 1,210,574	\$ 339,325	\$ 871,249
GRAND TOTAL EXPENDITURES	\$ 18,731,096	\$ 18,034,543	\$ 696,553
Excess (Deficiency) of Revenues and Expenses	\$ (231,961)	\$ (38,776)	\$ (193,185)

Debt Service and Fixed Asset Fund:

Debt Service	393,958	247,593	146,365
Excess(Deficiency) of revenues over Expenses	393,958	247,593	146,365

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended March 2017

INCOME:	MONTH OF March 2017	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	96,023	100,838	(4,815)
Earned Income	1,201,350	1,198,371	2,979
General Revenue-Contract	1,270,395	1,281,458	(11,063)
TOTAL INCOME	\$ 2,567,768	\$ 2,580,667	\$ (12,899)
EXPENSES:			
Salaries	1,328,512	1,389,291	(60,779)
Employee Benefits	282,663	286,663	(4,000)
Medication Expense	75,309	58,500	16,809
Travel-Board/Staff	28,901	34,732	(5,831)
Building Rent/Maintenance	17,576	15,617	1,959
Consultants/Contracts	539,969	522,805	17,164
Other Operating Expenses	268,687	267,992	695
TOTAL EXPENSES	\$ 2,541,617	\$ 2,575,600	\$ (33,983)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 26,151	\$ 5,067	\$ 21,084
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	38,347	(18,178)	56,525
Capital Outlay-Debt Service	64,012	35,373	28,639
TOTAL CAPITAL EXPENDITURES	\$ 102,359	\$ 17,195	\$ 85,164
GRAND TOTAL EXPENDITURES	\$ 2,643,977	\$ 2,592,795	\$ 51,182
Excess (Deficiency) of Revenues and Expenses	\$ (76,209)	\$ (12,128)	\$ (64,081)

Debt Service and Fixed Asset Fund:

Debt Service	64,012	35,373	28,639
Excess(Deficiency) of revenues over Expenses	64,012	35,373	28,639

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With March 2016 Comparative Data
Year to Date as of March 2017

INCOME:	YTD March 2017	YTD March 2016	Increase (Decrease)
Local Revenue Sources	1,014,898	2,887,592	(1,872,694)
Earned Income	8,434,086	8,165,891	268,195
General Revenue-Contract	9,050,151	8,667,771	382,380
TOTAL INCOME	\$ 18,499,135	\$ 19,721,254	\$ (1,222,119)
EXPENSES:			
Salaries	9,504,637	9,226,651	277,986
Employee Benefits	1,938,812	1,814,411	124,401
Medication Expense	417,525	388,710	28,815
Travel-Board/Staff	269,767	278,369	(8,602)
Building Rent/Maintenance	263,069	173,954	89,115
Consultants/Contracts	3,553,465	3,186,758	366,707
Other Operating Expenses	1,573,246	1,520,964	52,282
TOTAL EXPENSES	\$ 17,520,522	\$ 16,589,817	\$ 930,705
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 978,613	\$ 3,131,437	\$ (2,152,824)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	816,615	2,349,462	(1,532,847)
Capital Outlay-Debt Service	393,958	249,302	144,656
TOTAL CAPITAL EXPENDITURES	\$ 1,210,574	\$ 2,598,764	\$ (1,388,190)
GRAND TOTAL EXPENDITURES	\$ 18,731,096	\$ 19,188,581	\$ (457,485)
Excess (Deficiency) of Revenues and Expenses	\$ (231,961)	\$ 532,673	\$ (764,634)

Debt Service and Fixed Asset Fund:

Debt Service	393,958	249,302	144,656
Excess(Deficiency) of revenues over Expenses	393,958	249,302	144,656

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With March 2016 Comparative Data
For the Month Ended March 2017

INCOME:	MONTH OF March 2017	MONTH OF March 2016	Increase (Decrease)
Local Revenue Sources	96,023	1,578,252	(1,482,229)
Earned Income	1,201,350	1,278,719	(77,369)
General Revenue-Contract	1,270,395	1,414,764	(144,369)
TOTAL INCOME	\$ 2,567,768	\$ 4,271,735	\$ (1,703,967)
Salaries	1,328,512	1,298,007	30,505
Employee Benefits	282,663	305,081	(22,418)
Medication Expense	75,309	49,248	26,061
Travel-Board/Staff	28,901	36,769	(7,868)
Building Rent/Maintenance	17,576	10,028	7,548
Consultants/Contracts	539,969	477,609	62,360
Other Operating Expenses	268,687	217,525	51,162
TOTAL EXPENSES	\$ 2,541,617	\$ 2,394,267	\$ 147,350
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 26,151	\$ 1,877,468	\$ (1,851,317)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	38,347	1,580,841	(1,542,494)
Capital Outlay-Debt Service	64,012	37,150	26,862
TOTAL CAPITAL EXPENDITURES	\$ 102,359	\$ 1,617,991	\$ (1,515,632)
GRAND TOTAL EXPENDITURES	\$ 2,643,977	\$ 4,012,258	\$ (1,368,281)
Excess (Deficiency) of Revenues and Expenses	\$ (76,209)	\$ 259,477	\$ (335,686)

Debt Service and Fixed Asset Fund:

Debt Service	64,012	37,150	26,862
Excess(Deficiency) of revenues over Expenses	64,012	37,150	26,862

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With February 2017 Comparative Data
For the Month Ended March 2017

INCOME:	MONTH OF March 2017	MONTH OF February 2017	Increase (Decrease)
Local Revenue Sources	96,023	122,999	(26,976)
Earned Income	1,201,350	1,277,810	(76,461)
General Revenue-Contract	1,270,395	1,345,539	(75,143)
TOTAL INCOME	\$ 2,567,768	\$ 2,746,348	\$ (178,580)
EXPENSES:			
Salaries	1,328,512	1,410,423	(81,911)
Employee Benefits	282,663	297,951	(15,288)
Medication Expense	75,309	58,808	16,501
Travel-Board/Staff	28,901	40,629	(11,728)
Building Rent/Maintenance	17,576	23,088	(5,512)
Consultants/Contracts	539,969	554,872	(14,903)
Other Operating Expenses	268,687	259,545	9,142
TOTAL EXPENSES	\$ 2,541,617	\$ 2,645,316	\$ (103,698)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 26,151	\$ 101,032	\$ (74,882)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	38,347	30,083	8,265
Capital Outlay-Debt Service	64,012	65,025	(1,013)
TOTAL CAPITAL EXPENDITURES	\$ 102,359	\$ 95,107	\$ 7,252
GRAND TOTAL EXPENDITURES	\$ 2,643,977	\$ 2,740,423	\$ (96,447)
Excess (Deficiency) of Revenues and Expenses	\$ (76,209)	\$ 5,925	\$ (82,133)

Debt Service and Fixed Asset Fund:

Debt Service	64,012	65,025	(1,013)
Excess(Deficiency) of revenues over Expenses	64,012	65,025	(1,013)

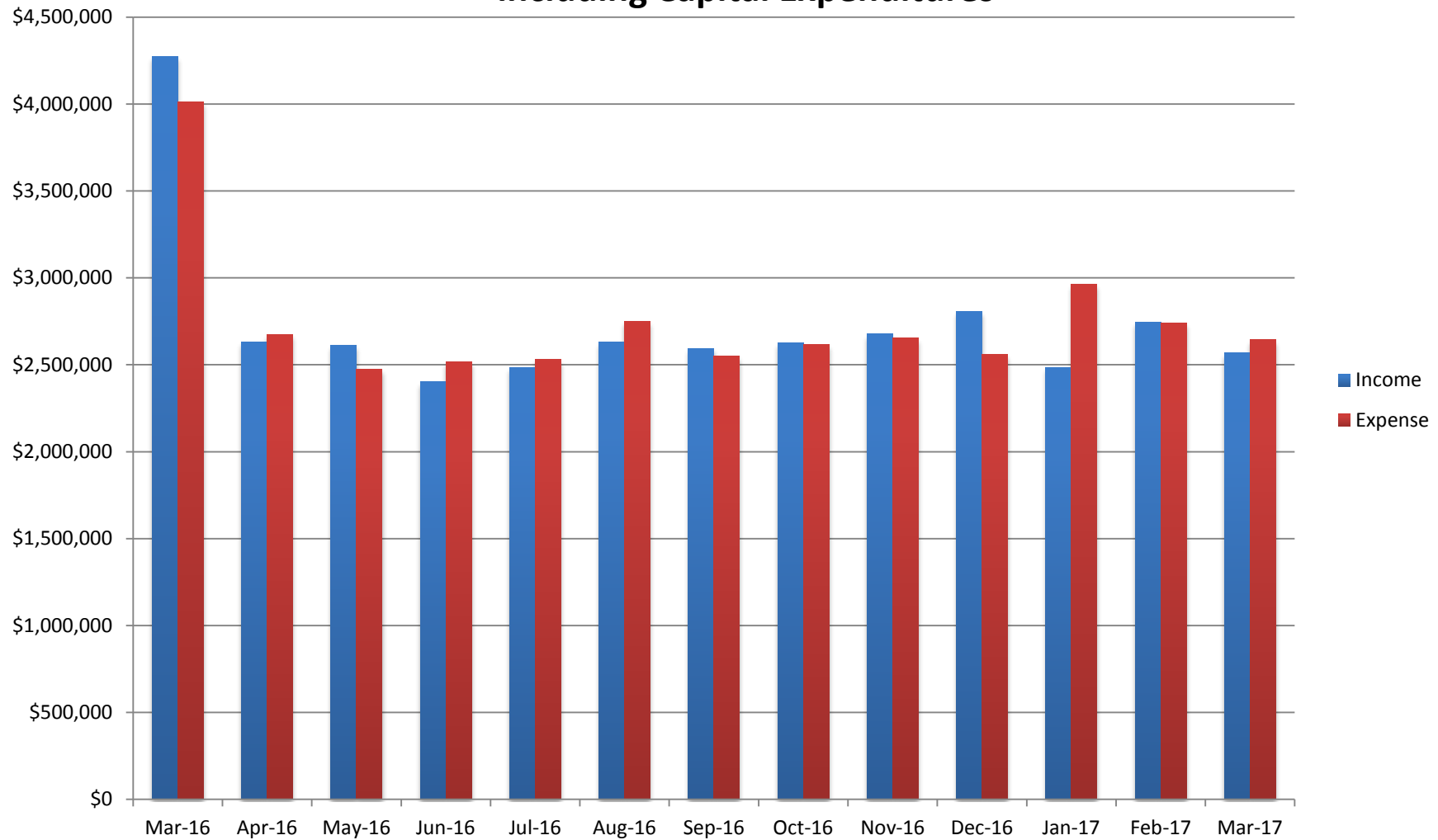
TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of March 2017

	YTD Mental Health March 2017	YTD IDD March 2017	YTD Other Services March 2017	YTD Agency Total March 2017	YTD Approved Budget March 2017	Increase (Decrease)
INCOME:						
Local Revenue Sources	1,224,704	167,298	(377,103)	1,014,898	778,155	236,743
Earned Income	2,278,527	3,719,364	2,436,195	8,434,086	8,208,297	225,789
General Revenue-Contract	7,855,790	1,194,361		9,050,151	9,009,315	40,836
TOTAL INCOME	\$ 11,359,021	\$ 5,081,023	\$ 2,059,092	\$ 18,499,135	\$ 17,995,767	\$ 503,368
EXPENSES:						
Salaries	6,056,135	1,907,844	1,540,658	9,504,637	9,758,939	(254,302)
Employee Benefits	1,219,034	426,342	293,436	1,938,812	2,006,285	(67,473)
Medication Expense	322,688		94,838	417,525	409,500	8,025
Travel-Board/Staff	155,248	80,158	34,360	269,767	262,483	7,284
Building Rent/Maintenance	160,979	67,591	34,499	263,069	119,415	143,654
Consultants/Contracts	1,404,052	2,034,482	114,932	3,553,465	3,558,616	(5,151)
Other Operating Expenses	897,436	388,491	287,319	1,573,246	1,579,980	(6,734)
TOTAL EXPENSES	\$ 10,215,572	\$ 4,904,908	\$ 2,400,042	\$ 17,520,521	\$ 17,695,218	\$ (174,697)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,143,449	\$ 176,115	\$ (340,950)	\$ 978,614	\$ 300,549	\$ 678,065
CAPITAL EXPENDITURES						
Capital Outlay-FF&E, Automobiles	472,341	209,012	135,263	816,615	91,732	724,883
Capital Outlay-Debt Service	178,318	66,591	149,049	393,958	247,593	146,365
TOTAL CAPITAL EXPENDITURES	\$ 650,659	\$ 275,603	\$ 284,312	\$ 1,210,573	\$ 339,325	\$ 871,248
GRAND TOTAL EXPENDITURES	\$ 10,866,231	\$ 5,180,511	\$ 2,684,354	\$ 18,731,094	\$ 18,034,543	\$ 696,551
Excess (Deficiency) of Revenues and Expenses	\$ 492,790	\$ (99,488)	\$ (625,262)	\$ (231,961)	\$ (38,776)	\$ (193,183)
Debt Service and Fixed Asset Fund:						
Debt Service	178,318	66,591	149,049	393,958	247,593	(69,275)
		-	-	-	-	-
Excess(Deficiency) of revenues over Expenses	178,318	66,591	149,049	393,958	247,593	(69,275)

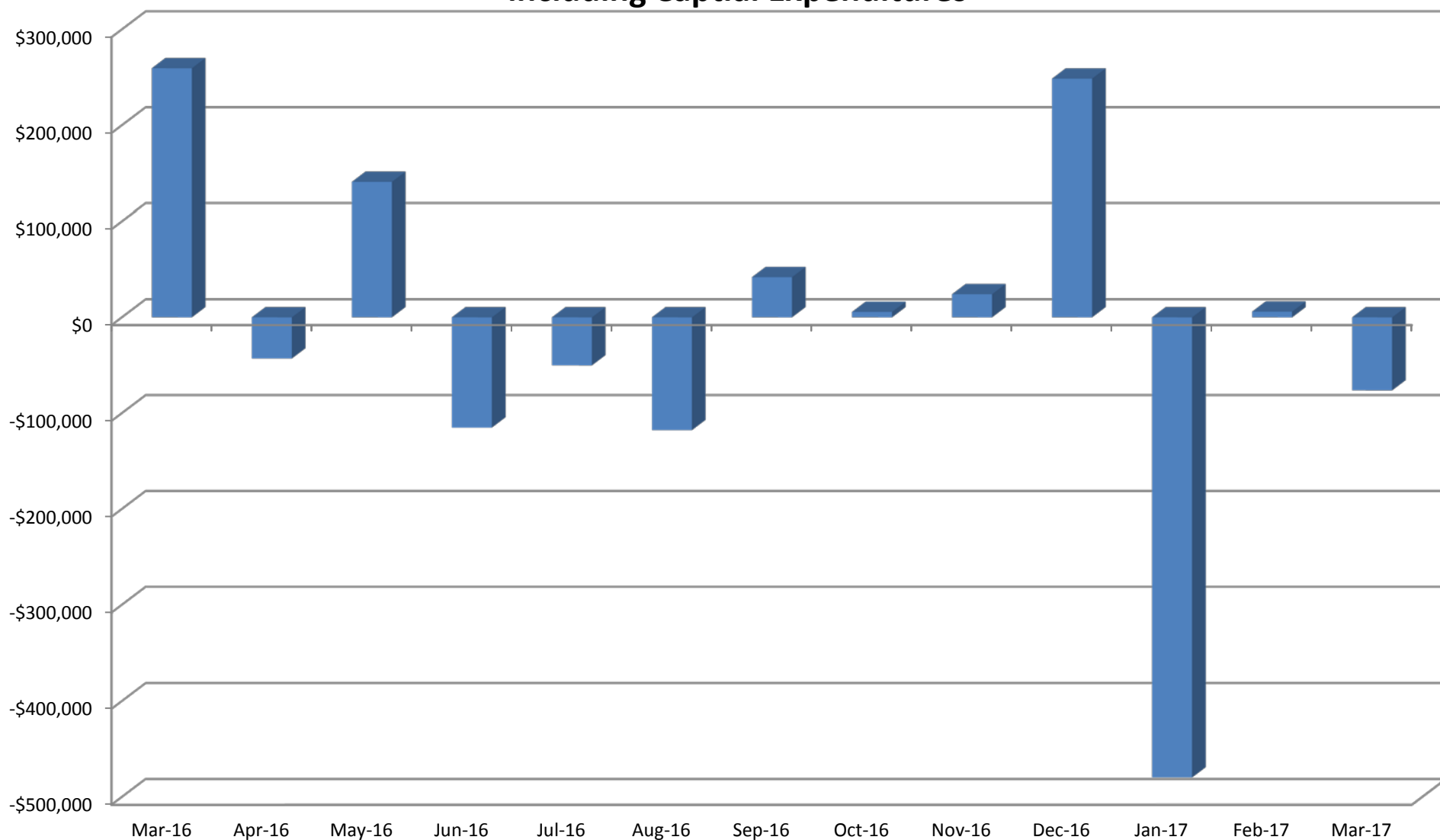
TRI-COUNTY BEHAVIORAL HEALTHCARE

Income and Expense

including Capital Expenditures



TRI-COUNTY BEHAVIORAL HEALTHCARE
Income after Expense
including Capital Expenditures



Agenda Item: Approve FY 2017 Budget Revision Committee: Business	Board Meeting Date April 27, 2017
Background Information: Periodically, throughout the budget year, we adjust the budget for changes to funding or other scenarios that may have changed from the initial budget process. This budget revision reflects new programs awarded after the beginning of fiscal year. This revision also shows adjustments made to revenue and expenses based on YTD trends and projections through the end of the fiscal year.	
Supporting Documentation: Summary FY 2017 Budget Revision	
Recommended Action: Approve FY 2017 Budget Revision	

**Tri-County Behavioral Healthcare
Proposed FY 2017 Mid-Year Budget Revision
Compared to FY 2017 Beginning Approved Budget**

Explanation of line items that have material changes from Proposed FY 2017 Mid-Year Budget Revision compared to the FY 2017 Beginning Approved Budget.

REVENUES:

Local Revenue – This line item shows an overall increase based on the sale of the Liberty Life Skills building and the Administration building. It also reflects money received for totaled vehicles and an increase in client fees from ICF. Items that were adjusted down are the HOGG Foundation and CHIP income.

Earned Income – This line item shows an overall increase based on trends for ICF, MAC, and Case Management MH in the kids area. We have decreases in the following programs: NISH, Texas Home Living, Medicaid Regular and Rehabilitative services for adults. The Rehabilitative Services are trending up for the kids and TCOOMMI programs.

General Revenue – This line item reflects a decrease based on projections for Substance Abuse programs.

EXPENSES:

Salaries – This line shows an overall decrease based on a year to date payroll lapse. There is also an increase in overtime for the center's 24 hour programs.

Employee Benefits – This line reflects an overall decrease due to a rate reduction for the State Unemployment taxes and also recognizing the Minimum contribution program for Workers Compensation.

Travel – Board/Staff – This line has a slight decrease based on trends.

Medication Expense – This line shows an increase based on current trends in medication expenses.

Building Rent/Maintenance – This line item shows an increase based on the Board approved remodel project for the Huntsville location.

Consultants/Contracts – This line item shows an increase based mainly on ICF trends and collection of back billing.

Other Operating Expenses – This line item has an overall increase based on trend adjustments to various lines such as insurance deductibles from prior year, moving expenses, legal fees for building sales, small equipment purchases for the new building and an increase in some utilities based on move dates.

Capital Outlay-FF&E, Automobiles – This item reflects an increase based on the Board approved furniture purchase for the new Conroe facility and the purchase of three new vehicles.

Capital Outlay - Debt Service Bonds – This line reflects the interest only payment on the Conroe facility that started in January.

**TRI-COUNTY BEHAVIORAL HEALTHCARE
PROPOSED FY 2017 MID-YEAR BUDGET REVISION COMPARED TO
FY 2017 BEGINNING APPROVED BUDGET**

	PROPOSED FY 2017 MID-YEAR BUDGET REVISION	FY 2017 BEGINNING APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	\$ 1,830,222	\$ 1,282,041	\$ 548,181
Earned Income	\$ 14,581,726	\$ 13,971,610	\$ 610,116
General Revenue	\$ 15,151,943	\$ 15,193,895	\$ (41,952)
TOTAL INCOME	\$ 31,563,891	\$ 30,447,546	\$ 1,116,345
EXPENSES:			
Salaries	\$ 16,461,856	\$ 16,763,564	\$ (301,708)
Employee Benefits	\$ 3,269,600	\$ 3,439,600	\$ (170,000)
Travel-Board/Staff	\$ 483,107	\$ 483,953	\$ (846)
Medication Expense	\$ 718,200	\$ 702,000	\$ 16,200
Building Rent/Maintenance	\$ 288,000	\$ 197,500	\$ 90,500
Consultants/Contracts	\$ 6,022,658	\$ 5,738,101	\$ 284,557
Other Operating Expenses	\$ 2,658,293	\$ 2,550,070	\$ 108,223
TOTAL EXPENSES	\$ 29,901,714	\$ 29,874,788	\$ 26,926
Excess (Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,662,177	\$ 572,758	\$ 1,089,419
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles	\$ 941,487	\$ 148,300	\$ 793,187
Capital Outlay - Debt Services Bonds	\$ 720,690	\$ 424,458	\$ 296,232
TOTAL CAPITAL EXPENDITURES	\$ 1,662,177	\$ 572,758	\$ 1,089,419
GRAND TOTAL EXPENDITURES	\$ 31,563,891	\$ 30,447,546	\$ 1,116,345
Excess (Deficiency) of Revenues and Expenses	\$ -	\$ -	\$ -

Agenda Item: Ratify Sale of Excess Furniture Committee: Business	Board Meeting Date: April 27, 2017
Background Information: <p>Furniture at the former Conroe service locations was assessed prior to the move and much of it was determined to be in poor condition and/or unusable at the new location. After moving out, staff sorted through the furniture that was left behind and sent several items which were in good shape to Cleveland, PETC and Huntsville.</p> <p>It was the plan of staff to seek permission from the Board to sell the remaining furniture at the April Board meeting, but the Administration, Riverpoint and Loop buildings in Conroe were anticipated to close prior to April meeting and the furniture needed to be removed.</p> <p>Staff spoke with Chair Patti Atkins who authorized the sale of excess furniture from Conroe facilities. Furniture that did not receive interest at the sale was either sold with the building (if allowed), scrapped (metal) or thrown out.</p>	
Supporting Documentation: Pictures	
Recommended Action: Ratify the Sale of Excess Furniture	



Huntsville Conference Room



Huntsville Conference Room



Child and Youth Office Cleveland



Child and Youth Office Cleveland



Child and Youth Office Cleveland



Child and Youth Office Cleveland

<p>Agenda Item: Approve Purchase of a Van for the Cleveland Lifeskills program</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>April 27, 2017</p>
<p>Background Information:</p> <p>Due to the total loss of a 2011 12-passenger Ford van used by our Cleveland Lifeskills program, staff recommends the purchase of a 12 passenger Ford van to be purchased at the dealership chosen by the Board. We received \$10,995 from Texas Council Risk Management Fund for totaled van. All bids are available for review.</p> <p>Listed below are the bids received:</p> <ul style="list-style-type: none"> • BJ Ford – Liberty, Texas – \$28,240.81 • Anderson Ford – Cleveland, Texas – \$28,957.00 • Gullo Ford – Conroe, Texas - \$32,372.75 	
<p>Supporting Documentation:</p> <p>Bids from Dealerships</p>	
<p>Recommended Action:</p> <p>Approve the Purchase of a 12 passenger Ford Van.</p>	

BJ FORD

3560 Hwy 90 - P.O. Box 2080 - Liberty, Texas 77575
(936) 36-2215 - (800) 374-7646 - Fax: (936) 336-2503 - bjford.com

Buyer:		Co Buyer:		Deal #: 39171
TRI-COUNTY MHMR SERVICES				Deal Date: 04/14/2017
1506 FM 2854 RD				Print Time: 12:10pm
CONROE, TX 77304				
Home #:		Home #:		
Work #: (936) 756-8331		Work #:		Salesperson: ROY W POINDEXTER
Vehicle				
New <input checked="" type="checkbox"/>		Stock #:	Description:	VIN:
Used <input type="checkbox"/>			2017 FORD TRANSIT WAGON	Mileage:
Demo <input type="checkbox"/>				
Trade				
Aftermarkets:		Sale Price: \$ 28,196.56		
		Total Financed Aftermarkets: \$ 0.00		
		Total Trade Allowance: \$ 0.00		
		Trade Difference: \$ 28,196.56		
		Documentary Fee: \$ 0.00		
		State & Local Taxes: \$ 0.00		
		Total License and Fees: \$ 44.25		
		Total Cash Price: \$ 28,240.81		
		Total Trade Payoff: \$ 0.00		
		Delivered Price: \$ 28,240.81		
Total Aftermarkets:		\$ 0.00		
Rate:				
Amount Financed:		\$ 28,240.81		
		Cash Down Payment + Deposit: \$ 0.00		
		Unpaid Balance: \$ 28,240.81		
		Service Agreement: \$ 0.00		
		Maintenance Agreement: \$ 0.00		
		GAP Insurance: \$ 0.00		
		Credit Life, Accident & Health: \$ 0.00		
		Other: \$ 0.00		
		Amount Financed: \$ 28,240.81		

CUSTOMER: _____

SALESPERSON: _____

SALES MGR: _____



Qty	Description
1	<p>2017 Ford Transit 350 Wagon XL Trim (New)</p> <ul style="list-style-type: none">***3.7L V-6 Engine***6 Speed Automatic Transmission***Power Steering***Power Brakes W/ABS***Power Windows***Power Locks***Power Mirrors***Tilt***Cruise***Air Condition***AM/FM Stereo***Rear View Camera***Full Size Spare Tire And Wheel***Tinted Glass***Front License Plate Bracket***Pewter Vinyl 12 Passenger Seating***Oxford White Paint

This Vehicle Must Be Ordered. Apx 8 to 10 Weeks.

2017 TRANSIT NA TRAN 350 LR WAG

~~\$40,125~~ MSRP

VIN: 1FBZX2YM3 HKA7 1607

Stock ID: KA71607

\$28,957.00 delivered, no other charges AUTOMATIC 6 SPEED TRANSMISSION

In stock as of 04/13/2017



Exterior Color

MAGNETIC



Interior Color

PEWTER
CLOTH

Mike Weisinger

Digitally signed by Mike
Weisinger
Date: 2017.04.13 10:41:31 -05'00'

281-433-4762

mikeweisinger@aol.com

Anderson Ford

13872 US 56 S

Cleveland Texas 77328



Window Sticker

Invoice

EPA Estimated MPG

0
city0
hwy

Packages

301A

Power & Handling

3.7L TIVCT V6 ENGINE

6-SPD AUTO SELECT SHIFT TR

Standard Features

Exterior

- BLACK GRILLE/BUMPERS
- INTERVAL WIPERS
- SINGLE SLIDING SIDE DOOR
- SPARE TIRE AND WHEEL

Interior

- CENTER CONSOLE
- CLOTH HEADLINER
- POWERPOINTS - 12V (2)

Functional

- 25.0 GALLON FUEL TANK
- AIR CONDITIONING
- POWER LOCKS AND WINDOWS
- POWER STEERING
- REAR VIEW CAMERA

Safety/Security

- 3 POINT SAFETY BELTS
- 4-WHEEL DISC BRAKES W/ABS
- ADVANCETRAC W/RSC
- AIRBAGS - SAFETY CANOPY
- DRIVER/PASSENGER AIR BAGS
- SIDE AIRBAGS
- TIRE PRESSURE MONITOR SYS

Warranty

- 3YR/36000 BUMPER TO BUMPER
- 5YR/100,000 DIESEL ENGINE
- 5YR/60,000 POWERTRAIN
- 5YR/60,000 ROADSIDE ASSIST

Optional Features

- 148" WHEELBASE
- 2017 MODEL YEAR
- MAGNETIC
- PEWTER CLOTH
- PREFERRED EQUIPMENT PKG.301A
- XL TRIM
- MANUAL AIR CONDITIONER

- 6-SPD AUTO SELECT SHIFT TR
- 235/65R16 BSW ALL-SEASON
- 3.73 LIMITED SLIP AXLE X7L
- JOB #1 ORDER
- FRONT LICENSE PLATE BRACKET
- 9000# GVWR PACKAGE
- PEWTER CLOTH 2WAY SD AIRBAGS

- 50 STATE EMISSIONS
- MIRRORS, LONG POWER
- HEAVY DUTY ALTERNATOR

Disclaimer

1. At the time of this mailing, this vehicle, or vehicles, is/are currently in our inventory.

We cannot ensure future availability

If this vehicle, or vehicles, is not currently in our inventory (Not in Stock) then it can be made available to you at our location, within three (3) weeks from the time of your request

2. Manufacturer's Suggested Retail Price (MSRP) does not include the following fees and charges: tax, title, registration, dealer documentation or service charges, finance charges, electronic filing charges, and emissions testing charges where applicable. For Washington consumers a document fee of \$150 will be added to the price. For Texas consumers destination and dealer preparation charges may also apply. Vehicle sale price is determined by the Dealer.

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Gullo Ford of Conroe
925 I-45 South, Conroe, Texas, 77301
Office: 936-756-5500 Fax: 936-788-2683

Customer Proposal

Prepared for:

Ms. Maegan Richards
Tri-County

Prepared by:

JON RICHARDSON
Office: 936-756-5500
Email: jrichardson@gulloford.com

Date: 04/03/2017

Vehicle: 2017 Transit-350 XL
Medium Roof Wagon 148" WB





Gullo Ford of Conroe
925 I-45 South, Conroe, Texas, 77301
Office: 936-756-5500

Ms. Maegan Richards
Tri-County

Re: Vehicle Proposal

Dear MS Richards,

Thank you for your quote request. The attached price includes only the the state inspection fee and assumes you will title the vehicle.

Please allow 8-10 weeks to build and deliver.

Sincerely,

JON RICHARDSON

jrichardson@gulloford.com



Gullo Ford of Conroe
925 I-45 South, Conroe, Texas, 77301
Office: 936-756-5500

2017 Transit-350, Medium Roof Wagon
Medium Roof Wagon 148" WB XL(X2C)
Price Level: 745

Selected Options

Code	Description	MSRP
Base Vehicle		
X2C	Base Vehicle Price (X2C)	\$39,475.00
Packages		
301A	Order Code 301A	N/C
Powertrain		
99M	Engine: 3.7L Ti-VCT V6	Included
446	Transmission: 6-Speed Automatic w/OD & SelectShift	Included
X73	3.73 Axle Ratio	Included
STDGV	GVWR: 9,000 lbs	Included
Wheels & Tires		
STDTR	Tires: 235/65R16C AS BSW	Included
STDWL	Wheels: 16" Steel w/Black Hubcaps	Included
Seats & Seat Trim		
21G	Dual Bucket Seats	Included
V	Vinyl Front Bucket Seats	Included
Other Options		
PAINT	Monotone Paint Application	STD
148WB	148" Wheelbase	STD
60C	Cruise Control w/Message Center	\$325.00
58U	Radio: AM/FM Stereo	Included
Emissions		
425	50-State Emissions System	STD
Interior Colors		
VK_01	Pewter	N/C
Primary Colors		

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.

Prepared for: Ms. Maegan Richards, Tri-County
By: JON RICHARDSON Date: 04/03/2017



Gullo Ford of Conroe
925 I-45 South, Conroe, Texas, 77301
Office: 936-756-5500

2017 Transit-350, Medium Roof Wagon
Medium Roof Wagon 148" WB XL(X2C)
Price Level: 745

Selected Options (cont'd)

Code	Description	MSRP
YZ_01	Oxford White	N/C
SUBTOTAL		\$39,800.00
Destination Charge		\$1,195.00
TOTAL		\$40,995.00

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.

Prepared for: Ms. Maegan Richards, Tri-County
By: JON RICHARDSON Date: 04/03/2017



Gullo Ford of Conroe
925 I-45 South, Conroe, Texas, 77301
Office: 936-756-5500

2017 Transit-350, Medium Roof Wagon
Medium Roof Wagon 148" WB XL(X2C)
Price Level: 745

Pricing - Single Vehicle

MSRP

Vehicle Pricing

Base Vehicle Price	\$39,475.00
Options & Colors	\$325.00
Upfitting	\$0.00
Destination Charge	\$1,195.00

Subtotal \$40,995.00

Pre-Tax Adjustments

Code	Description	
GPC	GOVERNMENT PRICE CONCESSION	-\$6,500.00
GFD	GULLO FLEET DISCOUNT	-\$2,144.00

Subtotal \$32,351.00

Post-Tax Adjustments

Code	Description	
STATE	STATE INSPECTION	\$21.75

Total \$32,372.75

Customer Signature

Acceptance Date

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.

Prepared for: Ms. Maegan Richards, Tri-County
By: JON RICHARDSON Date: 04/03/2017

<p>Agenda Item: Approve Ratification of Health and Human Services Commission Contract No. 539-16-0073-00001, Amendment No. 3 (DADS)</p> <p>Committee: Business</p>	<p>Board Meeting Date:</p> <p>April 27, 2017</p>
<p>Background Information:</p> <p>The contract for Intellectual and Disability Services from the Department of Aging and Disability Services (DADS) was transferred to the Health and Human Services Commission on September 1, 2016. This is the third amendment to the original contract that was signed in FY 2016.</p> <p>This contract amendment includes the following changes:</p> <ul style="list-style-type: none"> • Provides Money Follows the Person funding for the Enhanced Community Coordination (ECC) Service that we previously billed to Targeted Case Management. • Adds reporting codes for Pre-Admission Screening and Resident Review (PASRR) and Daily Crisis respite services. • New requirements for PASRR and ECC. • Requirement to report Nursing Facilities which are not participating in PASRR. • Several other small reporting and administrative changes. <p>The contract was received on March 9th, so Evan Roberson spoke with Chair Patti Atkins who approved signature on the amendment.</p>	
<p>Supporting Documentation:</p> <p>HHSC Contract Summary</p>	
<p>Recommended Action:</p> <p>Approve Ratification of Health and Human Services Commission Contract No. 539-16-0073-00001, Amendment No. 3 (DADS)</p>	

**HEALTH AND HUMAN SERVICES COMMISSION
CONTRACT NO. 539-16-0073-00001
AMENDMENT NO. 3**

The Health and Human Services Commission ("HHSC") and **TRI-COUNTY BEHAVIORAL HEALTHCARE** ("LIDDA"), who are collectively referred to herein as the "Parties," to that certain Performance Contract effective September 1, 2015 and denominated DADS Contract No. 539-16-0073-00001 "Contract", as amended, now desire to further amend the Contract.

WHEREAS, this is an amendment to DADS Contract No. 539-16-0073-00001. Pursuant to Senate Bill 200, Texas Legislature, 84th Regular Session, this contract transferred from the Department of Aging and Disability Services (DADS) to HHSC.

WHEREAS, the Parties desire to clarify or revise, as appropriate, certain: (1) Contract funding allocations; and (2) performance requirements of the LIDDA as identified and summarized below in this Signature Document, and described in greater detail in the corresponding Contract Attachments; and

WHEREAS, this amendment will result in an addition of \$42,207.

NOW, THEREFORE, the Parties hereby amend and modify the Contract as follows:

1. **ATTACHMENT C** of the Contract, relating to Allocation Schedule, is hereby revised and replaced with new Attachment C.

SUMMARY OF REVISION. This amendment provides for the Money Follows the Person FY 2017 allocation of funds for Enhanced Community Coordination and Transition Support Teams for the period January 2017 through August 2017.

2. **ATTACHMENT F** of the Contract, relating to Description of IDD Services, is hereby revised and replaced with new Attachment F.

SUMMARY OF REVISION. This amendment adds grid codes for Preadmission Screening and Resident Review (PASRR) Specialized Services and Daily Crisis Respite.

3. **ATTACHMENT G** of the Contract, relating to PASRR Requirements and Enhanced Community Coordination, is hereby revised and replaced with new Attachment G.

SUMMARY OF REVISION. This amendment directs the LIDDA to provide the individual served and the Legally Authorized Representative with a description of recommended specialized services (PE Evaluation report); adds section I.(D)(2)(f) directing the LIDDA to ensure the assigned service coordinator for an individual in a nursing facility (NF) documents the coordination and initiation of specialized services within 30 days of the inter-disciplinary team (IDT) meeting; adds section I.(D)(2)(h) to clarify escalation of

non-compliance for initiating specialized services to Consumer Rights and Services; adds section I.(D)(2)(i) to clarify the submission of a monthly report regarding non-compliance for initiating specialized services; adds section I.(C)(2)(d) directing the Diversion Coordinator to coordinate educational activities for referring entities; and deletes “food or” from section II.(B)(1)(b) as food is not an allowable use of designated funds for Enhanced Community Coordination.

4. **ATTACHMENT G-1** of the Contract, relating to reporting of non-compliance to Consumer Rights and Services.

SUMMARY OF REVISION. This revision provides the revised format for submission of reports of non-compliance to initiate specialized services to the PASRR unit. The revised form “PASRR Reporting of Non-Compliance” was formerly entitled “PASRR LIDDA\LMHA Report of NF Non-Compliance to Consumer Rights and Services.” This revised form accommodates self-reporting by LIDDAs and continues to be due by the 15th of every month for the previous month’s data.

5. **ATTACHMENT H** of the Contract, relating to Authority Functions, is hereby revised and replaced with new Attachment H.

SUMMARY OF REVISION. This amendment adds as LIDDA functions: (1) maintaining interest lists regarding Texas Home Living; and (2) the provision of crisis respite and the assignment of a lead crisis intervention specialist.

6. **ATTACHMENT K** of the Contract, relating to Medicaid Provider Enrollment Requirements, is hereby revised and replaced with new Attachment K.

SUMMARY OF REVISION. This amendment will: (1) delete the phrase “foster care” and replace it with “host home;” (2) replace the typo “CARE 370” with “CARE C70;” and (3) add new requirements to section N of Attachment K, relating to form 1052 (Public Provider Choice Request).

7. **ATTACHMENT M** of the Contract, relating to Options for IDD Services and Supports, is hereby revised and replaced with new Attachment M.

SUMMARY OF REVISION. This amendment adds to section II.B of Attachment M, the requirement that the primary correspondent sign form 8648 (Identification of Preferences) if the primary correspondent is physically present when such form is completed.

8. **ATTACHMENT N** of the Contract, relating to the IDD Submission Calendar, is hereby revised and replaced with new Attachment N.

SUMMARY OF REVISION. This amendment adds an annual deadline for PASRR Service Coordination caseload methodologies and monthly submission deadlines for:

- (i) PASRR Specialized Services invoices;
 - (ii) Money Follows the Person-related travel logs; and
 - (iii) Report of Non-Compliance to Consumer Rights and Services
9. **ATTACHMENT P** of the Contract, related to Guidelines for Determining Less Restrictive Setting, is hereby revised and replaced with new Attachment P.

SUMMARY OF REVISION. This amendment clarifies references to Attachment M relating to Options for IDD Services and Supports.

10. **FORM S** of the Contract, related to Contact List, is hereby revised and replaced with new Form S.

SUMMARY OF REVISION. This amendment adds the Lead Crisis Intervention Specialist and Enhanced Community Coordination contact to the contact list.

11. This Amendment No. 3 shall be effective upon execution by HHSC.
12. Except as amended and modified by this Amendment No. 3, all terms and conditions of the Contract, as amended, shall remain in full force and effect.
13. Any further revisions to the Contract shall be by written agreement of the Parties.

SIGNATURE PAGE FOLLOWS

**SIGNATURE PAGE FOR AMENDMENT NO. 3
HHSC CONTRACT NO. 539-16-0073-00001**

HEALTH AND HUMAN SERVICES
COMMISSION

TRI-COUNTY BEHAVIORAL HEALTHCARE

By: _____

Sonja Gaines
Medical and Social Services
Associate Commissioner
Community Services
IDD & BH Services

Name: _____

Title: _____

Date of Execution: _____

Date of Execution: _____

THE FOLLOWING ATTACHMENTS ARE ATTACHED AND INCORPORATED AS PART OF THE CONTRACT:

Attachment C – Allocation Schedule

Attachment F – Description of IDD Services

Attachment G – PASRR Requirements and Enhanced Community Coordination

Attachment G-1: PASRR Reporting of Non-Compliance form

Attachment H – Authority Functions

Attachment K – Medicaid Program Enrollment Requirements

Attachment M – Options for IDD Services and Supports

Attachment N – IDD Submission Calendar

Attachment P – Guidelines for Determining Less Restrictive Setting

Form S – Contact List

<p>Agenda Item: Approve HHSC Mental Health First Aid Grant contract #2017-049421-001, Amendment #1</p> <p>Committee: Business</p>	<p>Board Meeting Date:</p> <p>April 27, 2017</p>
<p>Background Information:</p> <p>Mental Health First Aid (MHFA) is an evidence-based program that was developed in Australia. The goal of MHFA training is to provide persons with skills necessary to help an individual experiencing a mental health crisis until the individual is able to obtain appropriate professional care.</p> <p>Tri-County currently has 6 staff trained in Youth Mental Health First Aid which is focused on interventions for adolescents. Last year, these staff provided training to 224 individuals.</p> <p>Amendment #1 extends the MHFA contract into FY 2018. There are no other changes to the contract.</p>	
<p>Supporting Documentation:</p> <p>Available for review at the Board meeting.</p>	
<p>Recommended Action:</p> <p>Approve HHSC Mental Health First Aid Grant contract #2017-049421-001, Amendment #1</p>	

<p>Agenda Item: Approve HHSC YES Pre-Engagement Services Contract #2017-049547-001, Amendment #1</p> <p>Committee: Business</p>	<p>Board Meeting Date:</p> <p>April 27, 2017</p>
<p>Background Information:</p> <p>Youth Empowerment Services (YES) waiver provides comprehensive home and community-based mental health services to youth between the ages of 3 and 18, who have serious emotional disturbances. The goal of the YES waiver program is to reduce the number of children who are placed in an institution.</p> <p>Health and Human Services Commission issued the YES Pre-Engagement Services (YESPE) contract last year which theoretically reimburses Centers for enrollment services of children and youth that do not have Medicaid.</p> <p>Amendment #1 extends the YESPE contract into FY 2018. There is a requirement that Centers allow HHSC YES program staff to intercept the Center's YES electronic remittance statements from the Texas Medicaid Healthcare Partnership (TMHP) so YES program staff can monitor expenditures. Tri-County has completed this process already.</p> <p>No other changes were made.</p>	
<p>Supporting Documentation:</p> <p>YESPE Amendment #1</p>	
<p>Recommended Action:</p> <p>Approve HHSC YES Pre-Engagement Services Contract #2017-049547-001, Amendment #1</p>	

**HEALTH AND HUMAN SERVICES COMMISSION CONTRACT NO. 2017-049547-001
AMENDMENT NO. 1**

The HEALTH AND HUMAN SERVICES COMMISSION ("HHSC" or "System Agency") and TRI-COUNTY BEHAVIORAL HEALTHCARE ("Contractor") parties to Youth Empowerment Services Waiver Pre-Engagement Services interlocal contract effective September 1, 2016 and denominated HHSC Contract No. 2017-049547-001 ("Contract"), now desire to amend the Contract.

WHEREAS, the parties desire to extend the term of the Contract to allow for successful completion of the Project; and

WHEREAS, this revision will result in an estimated increase of \$2,000.

NOW, THEREFORE, the Parties hereby amend and modify the Contract as follows:

1. This Amendment will be denominated as HHSC Contract No. 2017-049547-001A
2. Section III of this Contract Signature Page, Duration, is hereby amended to reflect a termination date of August 31, 2018.
3. Section IV of this Contract Signature Page, Budget, is amended to increase the total amount of this Contract to an estimated \$4,000, which is comprised of \$2,000 in state fiscal year 2017 funding and an estimated \$2,000 in state fiscal year 2018 funding.

The estimated state fiscal year 2018 funding amount may either be ratified or amended at the sole discretion of the System Agency, based on changes in appropriations, budget cuts, transfer of funds between programs or agencies, amendment of the Texas General Appropriations Act, agency consolidation, or any other disruption of current funding for this Contract. No state fiscal year 2018 work may begin, and no state fiscal year 2018 expenditures may be incurred until the System Agency issues a written Notice to Proceed. This Notice to Proceed will either include a ratified state fiscal year 2018 funding amount, or an amended state fiscal year 2018 funding amount, which will be incorporated into this Contract by a subsequent Amendment.

4. Section I. N. of the Contract Statement of Work, Contractor Responsibilities, is amended to replace in its entirety as follows:

N. If Contractor has not submitted an updated Electronic Remittance Advice (ERA) Agreement Form authorizing HHSC to download Contractor's 835 file from the Texas Medicaid and Healthcare Partnership (TMHP), then Contractor shall contact the System Agency assigned contract manager for instructions on submitting an updated ERA Agreement Form. Once the ERA Agreement form is submitted to TMHP, and TMHP processes the form authorizing HHSC to download Contractor's 835 file, Contractor shall send a copy of the completed and processed ERA Agreement Form to CMBHS.DataExchange@dshs.state.tx.us.

5. Attachment A-1, Electronic Remittance and Status (ER&S) Agreement is deleted in its entirety.

6. Contract references to Department of State Health Services (DSHS) will include HHSC or any other successor agency to DSHS.
7. This Amendment No. 1 shall be effective as of the date last signed below.
8. Except as amended and modified by this Amendment No. 1, all terms and conditions of the Contract, as amended, shall remain in full force and effect.
9. Any further revisions to the Contract shall be by written agreement of the Parties.

SIGNATURE PAGE FOLLOWS

**SIGNATURE PAGE FOR AMENDMENT NO. 1
HHSC CONTRACT NO. 2017-049547-001**

**HEALTH AND HUMAN SERVICES
COMMISSION**

**TRI-COUNTY BEHAVIORAL
HEALTHCARE**

By: _____

By: _____
Evan Roberson Executive Director, Tri-County Behavioral

Date of Execution: _____

Date of Execution: _____

Agenda Item: 2nd Quarter FY 2017 Quarterly Investment Report Committee: Business	Board Meeting Date April 27, 2017
Background Information: This report is provided to the Board of Trustees of Tri-County Services in accordance with Board Policy on fiscal management and in compliance with Chapter 2256: Subchapter A of the Public Funds Investment Act.	
Supporting Documentation: Quarterly TexPool Investment Report Quarterly Interest Report	
Recommended Action: For Information Only	

QUARTERLY INVESTMENT REPORT TEXPOOL FUNDS

For the Period Ending February 28, 2017

GENERAL INFORMATION

This report is provided to the Board of Trustees of Tri-County Behavioral Healthcare in accordance with Board Policy on fiscal management and in compliance with Chapter 2256; Subchapter A of the Public Funds Investment Act.

Center funds for the period have been partially invested in the Texas Local Government Investment Pool (TexPool), organized in conformity with the Interlocal Cooperation Act, Chapter 791 of the Texas Government Code, and the Public Funds Investment Act, Chapter 2256 of the Texas Government Code. The Comptroller of Public Accounts is the sole officer, director, and shareholder of the Texas Treasury Safekeeping Trust Company which is authorized to operate TexPool. Pursuant to the TexPool Participation Agreement, administrative and investment services to TexPool are provided by Federated Investors, Inc. ("Federated"). The Comptroller maintains oversight of the services provided. In addition, the TexPool Advisory Board, composed equally of participants in TexPool and other persons who do not have a business relationship with TexPool, advise on investment policy and approves fee increases.

TexPool investment policy restricts investment of the portfolio to the following types of investments:

- Obligations of the United States Government or its agencies and instrumentalities with a maximum final maturity of 397 days for fixed rate securities and 24 months for variable rate notes;

- Fully collateralized repurchase agreements and reverse repurchase agreements with defined termination dates may not exceed 90 days unless the repurchase agreements have a provision that enables TexPool to liquidate the position at par with no more than seven days notice to the counterparty. The maximum maturity on repurchase agreements may not exceed 181 days. These agreements may be placed only with primary government securities dealers or a financial institution doing business in the State of Texas.

- No-load money market mutual funds are registered and regulated by the Securities and Exchange Commission and rated AAA or equivalent by at least one nationally recognized rating service. The money market mutual fund must maintain a dollar weighted average stated maturity of 90 days or less and include in its investment objectives the maintenance of a stable net asset value of \$1.00.

TexPool is governed by the following specific portfolio diversification limitations;

- 100% of the portfolio may be invested in obligations of the United States.

- 100% of the portfolio may be invested in direct repurchase agreements for liquidity purposes.

- Reverse repurchase agreements will be used primarily to enhance portfolio return within a limitation of up to one-third (1/3) of total portfolio assets.

- No more than 15% of the portfolio may be invested in approved money market mutual funds.

The weighted average maturity of TexPool cannot exceed 60 days calculated using the reset date for variable rate notes and 90 days calculated using the final maturity date for variable rate notes.

The maximum maturity for any individual security in the portfolio is limited to 397 days for fixed rate securities and 24 months for variable rate notes.

TexPool seeks to maintain a net asset value of \$1.00 and is designed to be used for investment of funds which may be needed at any time.

STATISTICAL INFORMATION

Market Value for the Period

Portfolio Summary	December	January	February
Uninvested Balance	(188,185.17)	110,507.63	95,420.63
Accrual of Interest Income	20,111,806.92	12,667,710.10	8,305,968.95
Interest and Management Fees Payable	(5,608,147.74)	(7,976,707.35)	(8,799,499.04)
Payable for Investments Purchased	(299,653,500.00)	(101,838,694.49)	0.00
Accrued Expense & Taxes	(36,518.42)	(23,242.77)	(24,106.64)
Repurchase Agreements	1,621,673,000.00	6,113,051,515.50	3,286,185,281.00
Mutual Fund Investments	1,615,022,103.88	1,015,022,103.88	1,015,022,103.88
Government Securities	9,300,323,053.14	9,900,627,993.24	13,470,630,586.03
U.S. Treasury Bills	459,687,497.06	1,079,205,068.66	999,837,000.00
U.S. Treasury Notes	2,925,774,236.00	1,227,054,172.00	1,114,240,524.82
TOTAL	15,969,161,267.71	19,237,900,426.39	19,885,493,279.62

Book Value for the Period

Type of Asset	Beginning Balance	Ending Balance
Uninvested Balance	(\$5,201,513.47)	95,420.63
Accrual of Interest Income	11,736,505.20	8,305,968.95
Interest and Management Fees Payable	(4,390,979.80)	(8,799,499.04)
Payable for Investments Purchased	(499,241,805.50)	0.00
Accrued Expenses & Taxes	(16,876.88)	(24,106.64)
Repurchase Agreements	3,349,648,000.00	3,286,214,000.00
Mutual Fund Investments	570,022,103.88	1,015,022,103.88
Government Securities	7,404,829,096.89	13,466,055,475.94
U.S. Treasury Bills	459,530,087.37	999,793,540.40
U.S. Treasury Notes	2,466,792,963.56	1,114,219,589.24
TOTAL	\$13,753,707,581.25	19,880,882,493.36

Portfolio by Maturity as of February 28, 2017

1 to 7 days	8 to 90 day	91 to 180 days	181 + days
31.7%	57.1%	4.5%	6.7%

Portfolio by Type of Investments as of November 30, 2016

Agencies	Repurchase Agreements	Treasuries	Money Market Funds
67.8%	16.5%	10.6%	5.1%

SUMMARY INFORMATION

On a simple daily basis, the monthly average yield was 0.46% for December, 0.54% for January and 0.56% for February.

As of the end of the reporting period, market value of collateral supporting the Repurchase Agreements was at least 102% of the Book Value.

The weighted average maturity of the fund as of February 28, 2017 was 48 days.

The net asset value as of February 28, 2017 was 1.00023.

The total amount of interest distributed to participants during the period was \$22,383,666.28.

This quarter TexPool rates did not exceeded the 90 Day T-Bill rates during the entire reporting period.

TexPool has a current money market fund rating of AAAm by Standard and Poor's.

During the reporting period, the total number of participants has increased to 2,389.

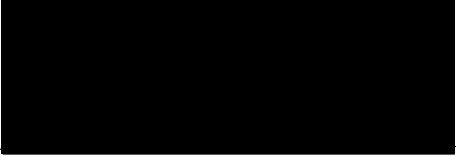
Funds assets are safe kept at the State Street Bank in the name of TexPool in a custodial account.

During the reporting period, the investment portfolio was in full compliance with Tri-County Behavioral Healthcare's Investment Policy and with the Public Funds Investment Act.

Submitted by:


Millie McDuffey
Chief Financial Officer / Investment Officer


Date


Evan Roberson
Executive Director / Investment Officer


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**TRI-COUNTY BEHAVIORAL HEALTHCARE
QUARTERLY INTEREST EARNED REPORT
FISCAL YEAR 2017
As Of February 28, 2017**

BANK NAME	INTEREST EARNED				
	1st QTR.	2nd QTR.	3rd QTR.	4th QTR.	YTD TOTAL
Alliance Bank - Central Texas CD	\$ 472.35	\$ 473.25			\$ 945.60
First Financial Bank CD	\$ 3,438.88	\$ 3,401.10			\$ 6,839.98
First Liberty National Bank	\$ 0.43	\$ 0.44			\$ 0.87
JP Morgan Chase (HBS)	\$ 1,349.11	\$ 1,843.28			\$ 3,192.39
Prosperity Bank	\$ 42.47	\$ 37.75			\$ 80.22
Prosperity Bank CD (formerly Tradition)	\$ 3,807.62	\$ 3,820.51			\$ 7,628.13
TexPool Participants	\$ 58.92	\$ 77.79			\$ 136.71
Total Earned	\$ 9,169.78	\$ 9,654.12			\$ 18,823.90

Agenda Item: Board of Trustees Unit Financial Statement as of February and March 2017 Committee: Business	Board Meeting Date April 27, 2017
Background Information: None	
Supporting Documentation: February 2017 Board of Trustees Unit Financial Statements	
Recommended Action: For Information Only	

Unit Financial Statement
FY 2017

	February 2017 Actuals	February 2017 Budgeted	Variance	YTD Actual	YTD Budget	Variance	Percent	Budget
Revenues								
80103998 Allocated Revenue	\$ 2,600.00	\$ 2,600.00	\$ -	\$ 15,595.00	\$ 15,595.00	\$ -	100.00%	\$ 31,195.00
Total Revenue	\$ 2,600.00	\$ 2,600.00	\$ -	\$ 15,595.00	\$ 15,595.00	\$ -	100.00%	\$ 31,195.00
Expenses								
80105275 Food Items	\$ -	\$ 200.00	\$ (200.00)	\$ 905.09	\$ 1,200.00	\$ (294.91)	75.42%	\$ 2,400.00
80105320 Insurance-Worker Compensation	\$ 5.27	\$ 17.00	\$ (11.73)	\$ 32.51	\$ 98.00	\$ (65.49)	33.17%	\$ 200.00
80105388 Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 9,000.00	\$ 9,000.00	\$ -	100.00%	\$ 18,000.00
80155605 Postage-Express Mail	\$ -	\$ 4.00	\$ (4.00)	\$ -	\$ 26.00	\$ (26.00)	0.00%	\$ 50.00
80105715 Supplies-Office	\$ -	\$ 20.00	\$ (20.00)	\$ 12.00	\$ 125.00	\$ (113.00)	0.00%	\$ 245.00
80105750 Training	\$ (1,550.00)	\$ 300.00	\$ (1,850.00)	\$ 1,075.00	\$ 1,800.00	\$ (725.00)	59.72%	\$ 3,600.00
80105755 Travel - Local	\$ -	\$ 75.00	\$ (75.00)	\$ 199.00	\$ 450.00	\$ (251.00)	44.22%	\$ 900.00
80105757 Travel - Non-local Mileage/Air	\$ 1,185.80	\$ 150.00	\$ 1,035.80	\$ 1,596.00	\$ 900.00	\$ 696.00	177.33%	\$ 1,800.00
80105758 Travel - Non-local Hotel	\$ -	\$ 250.00	\$ (250.00)	\$ 716.90	\$ 1,500.00	\$ (783.10)	47.79%	\$ 3,000.00
80105759 Travel - Meals	\$ -	\$ 83.00	\$ (83.00)	\$ 70.68	\$ 502.00	\$ (431.32)	14.08%	\$ 1,000.00
Total Expenses	\$ 1,141.07	\$ 2,599.00	\$ (1,457.93)	\$ 13,607.18	\$ 15,601.00	\$ (1,993.82)	87.22%	\$ 31,195.00
Total Revenue minus Expenses	\$ 1,458.93	\$ 1.00	\$ 1,457.93	\$ 1,987.82	\$ (6.00)	\$ 1,993.82	12.78%	\$ -

Unit Financial Statement
FY 2017

	March 2017 Actuals	March 2017 Budgeted	Variance	YTD Actual	YTD Budget	Variance	Percent	Budget
Revenues								
80103998 Allocated Revenue	\$ 2,600.00	\$ 2,600.00	\$ -	\$ 18,195.00	\$ 18,195.00	\$ -	100.00%	\$ 31,195.00
Total Revenue	\$ 2,600.00	\$ 2,600.00	\$ -	\$ 18,195.00	\$ 18,195.00	\$ -	100.00%	\$ 31,195.00
Expenses								
80105275 Food Items	\$ -	\$ 200.00	\$ (200.00)	\$ 905.09	\$ 1,400.00	\$ (494.91)	64.65%	\$ 2,400.00
80105320 Insurance-Worker Compensation	\$ 7.03	\$ 17.00	\$ (9.97)	\$ 39.54	\$ 115.00	\$ (75.46)	34.38%	\$ 200.00
80105388 Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 10,500.00	\$ 10,500.00	\$ -	100.00%	\$ 18,000.00
80155605 Postage-Express Mail	\$ -	\$ 4.00	\$ (4.00)	\$ -	\$ 30.00	\$ (30.00)	0.00%	\$ 50.00
80105715 Supplies-Office	\$ -	\$ 20.00	\$ (20.00)	\$ 12.00	\$ 145.00	\$ (133.00)	0.00%	\$ 245.00
80105750 Training	\$ -	\$ 300.00	\$ (300.00)	\$ 1,075.00	\$ 2,100.00	\$ (1,025.00)	51.19%	\$ 3,600.00
80105755 Travel - Local	\$ -	\$ 75.00	\$ (75.00)	\$ 199.00	\$ 525.00	\$ (326.00)	37.90%	\$ 900.00
80105757 Travel - Non-local Mileage/Air	\$ -	\$ 150.00	\$ (150.00)	\$ 1,596.00	\$ 1,050.00	\$ 546.00	152.00%	\$ 1,800.00
80105758 Travel - Non-local Hotel	\$ -	\$ 250.00	\$ (250.00)	\$ 716.90	\$ 1,750.00	\$ (1,033.10)	40.97%	\$ 3,000.00
80105759 Travel - Meals	\$ -	\$ 83.00	\$ (83.00)	\$ 70.68	\$ 585.00	\$ (514.32)	12.08%	\$ 1,000.00
Total Expenses	\$ 1,507.03	\$ 2,599.00	\$ (1,091.97)	\$ 15,114.21	\$ 18,200.00	\$ (3,085.79)	83.05%	\$ 31,195.00
Total Revenue minus Expenses	\$ 1,092.97	\$ 1.00	\$ 1,091.97	\$ 3,080.79	\$ (5.00)	\$ 3,085.79	16.95%	\$ -

Agenda Item: Cleveland Supported Housing, Inc. Update Committee: Business	Board Meeting Date: April 27, 2017
Background Information: <p>The Cleveland Supported Housing, Inc. Board (CSHI) held their annual face-to-face meeting at the property on March 27, 2017 where the committee reviewed project status updates, financial status, the Internal Revenue Service 990 Form and elected officers for the upcoming year. Reports from the property manager indicate that the current residents have had a high rate of participation in resident social activities which include bingo, pizza night and bible study.</p> <p>The property remains at full capacity and continues to process incoming applications that are received. There are currently fifteen (15) approved applications and a few more still pending at the time of this report.</p> <p>The property is currently in a healthy financial position given the age of the project. The current payable to Tri-County is \$29,895.00 and as of December 31, 2016, the year to date excess revenue over expenditure is \$8,122.20.</p> <p>There are a few warranty items still being worked through at this time, the largest of which is the flooring. As you may recall, we have had difficulty with the tile prematurely peeling up in several areas around the property. After several failed attempts to remedy the issue, Cook Construction has filed a claim with the flooring contractor who came out to conduct an inspection on March 21st. There is no further update regarding the status of the claim at the time of this report but we will keep the Board updated as we learn more.</p> <p>The Cleveland Supported Housing, Inc. Board continues to seek additional Board members. Potential interest may be forwarded to Tanya Bryant.</p>	
Supporting Documentation: None	
Recommended Action: For Information Only	

Agenda Item: Building Consolidation Update Committee: Business	Board Meeting Date: April 27, 2017
Background Information: Our consultant, Mike Duncum, will provide an update on our consolidation in Conroe and on our progress in selling our former buildings.	
Supporting Documentation: April Project Summary	
Recommended Action: For Information Only	

UPCOMING MEETINGS

May 25th, 2017 – Board Meeting

- Approve Minutes from April 27, 2017 Board Meeting
- Longevity Recognition Presentations – February through April 2017
- Community Resources Report
- Consumer Services Report for April 2017
- Program Updates
- Program Presentation
- Personnel Report for April 2017
- Texas Council Risk Management Fund Claim Summary for April 2017
- Texas Council Quarterly Board Meeting Verbal Update
- Approve April 2017 Financial Statements
- Board of Trustees Unit Financial Statement for April 2017
- Building Consolidation Update
- Other Business Committee Issues

June 2017 – No Board Meeting

July 27th, 2017 – Board Meeting

- Approve Minutes from May 25, 2017 Board Meeting
- Longevity Recognition Presentations – May through July 2017
- Community Resources Report
- Consumer Services Reports for May & June 2017
- Program Updates
- FY 2017 Goals & Objectives Progress Report
- 3rd Quarter FY 2017 Corporate Compliance & Quality Management Report
- 4th Quarter FY 2017 Corporate Compliance Training
- Medicaid 1115 Transformation Waiver Project Status Report
- Appoint Nominating Committee for FY 2018 Board Officers
- Appoint Executive Director Evaluation Committee
- Personnel Reports for May & June 2017
- Texas Council Risk Management Fund Claim Summaries for May & June 2017
- Approve May 2017 Financial Statements
- Approve June 2017 Financial Statements
- Approve FY 2017 Audit Engagement Letter
- Approve Recommendation for Tri-County Employee Health Insurance & Ancillary Plans
- 3rd Quarter FY 2017 Investment Report
- Board of Trustees Unit Financial Statements for May & June 2017
- Building Consolidation Update
- Other Business Committee Issues