

# **Tri-County Services Board of Trustees Meeting**

**February 28, 2013**



Notice is hereby given that a regular meeting of the Board of Trustees of Tri-County Services will be held on Thursday, February 28, 2013. 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 1506 FM 2854, Conroe, Texas. The public is invited to attend and offer comments to the Board of Trustees between 10:00 a.m. and 10:15 a.m.

## AGENDA

### I. Organizational Items

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

### II. Longevity Recognition Presentations

### III. Approve Minutes - January 24, 2013

### IV. Executive Director's Report - Evan Roberson

- A. DADS
  - 1. Local Authority Review
  - 2. Contract Amendment
  - 3. TxHmL Slots
- B. DSHS
  - 1. Contract Amendment
  - 2. Progress Note Review
  - 3. COPSD Survey
  - 4. Rusk Diversion Beds
- C. PASSR
- D. Medicaid 1115 Transformation Waiver Updates
- E. Legislative Session Updates
  - 1. Summary of Legislative Event on February 26, 2013
  - 2. Bills the Texas Council is Monitoring

### V. Chief Financial Officer's Report - Millie McDuffey

- A. Cost Accounting Methodology (CAM) Report
- B. CFO Consortium
- C. FY 2013 Budget Revision
- D. FY 2012 Audit Management Letter Response

### VI. Program Committee

#### Action Items

- A. Approve Grant Application to DSHS for the Projects for Assistance in Transition from Homelessness Program ..... Pages 10-11

#### Information Items

- B. Community Resources Report for January 2013 ..... Pages 12-14
- C. Consumer Services Report for January 2013 ..... Pages 15-16
- D. Program Updates for January 2013 ..... Pages 17-20
- E. Program Presentation - Family Partner Services

**VII. Executive Committee**

Information Items

- A. Personnel Report for January 2013 ..... *Pages 21-22*

**VIII. Business Committee**

Action Items

- A. Approve January 2013 Financial Statements ..... *Pages 23-35*  
B. Approve Request to Solicit FY 2013 Auditor ..... *Page 36*  
C. Approve Revisions to the Board Policy on Depositories ..... *Pages 37-55*  
D. Approve Change in Authorized Agent and/or Signer for State of Texas  
Co-Op Purchasing Program ..... *Pages 56-58*  
E. Resolution Authorizing Signer for HOME Agreements ..... *Pages 59-61*  
F. Ratify FY 2012-13 DSHS Contract Amendment ..... *Pages 62-75*  
G. Ratify FY 2012-13 DADS Contract Amendment ..... *Pages 76-81*  
H. 401(a) Retirement Plan Review ..... *Page 82*

Information Items

- I. Board of Trustees' Unit Financial Statements for January 2013 ..... *Pages 83-84*

**IX. Executive Session in Compliance with Texas Government Code Section 551.071, Consultation with Attorney & Section 551.074, Personnel**

Posted By:

Stephanie Eveland  
Executive Assistant

# **Tri-County Services**

**P.O. Box 3067  
Conroe, TX 77305**

## **BOARD OF TRUSTEES MEETING**

**January 24, 2013**

### **Board Members Present:**

David Walker  
Tracy Sorensen  
Patti Atkins  
Morris Johnson  
Cecil McKnight  
Janet Qureshi  
Sharon Walker

### **Board Members Absent:**

Brad Browder

### **Tri-County Staff Present:**

Cindy Sill, Executive Director  
Millie McDuffey, Chief Financial Officer  
Evan Roberson, Director of Organizational Support  
Don Teeler, Director of Operations  
Sandy Kelly, Director of Administrative Support  
Stephanie Eveland, Executive Assistant  
Shane Burks, Coordinator of Community Resources  
Mary Lou Flynn-DuPart, Legal Counsel  
Sheryl Baldwin, Staff  
Terri Newberry, Staff  
Maureen Wright, Staff  
Jacquelyn Yates, Staff  
Derral Bomar, Staff  
Eydie Medvigy, Staff  
Jennifer Graham, Staff

### **Guests:**

Carlos Taboada, Carlos Taboada & Company, P.C.  
Gene Darnell, Dean & Draper  
David Williams, DOCUmentation  
Genelle Edwards, Empowerment Options  
Jesse Brammel, Newfield Explorations  
Kitty Hammons, The Terrace at The Woodlands  
Karen Smith, The Terrace at The Woodlands  
Anthony Olivieri, Tradition Bank  
Weldon Whitt, Tradition Bank  
Jennifer Klein, Women and Wine on Wednesdays

**Call to Order:** Chairman, David Walker, called the meeting to order at 10:03 a.m. at 1506 FM 2854, Conroe, TX.

**Public Comment:** There were no public comments.

**Quorum:** There being seven (7) members present, a quorum was established.

**Resolution #01-13-01**

**Motion Made By:** Morris Johnson

**Seconded By:** Patti Atkins, with affirmative votes by David Walker, Tracy Sorensen, Cecil McKnight, Janet Qureshi and Sharon Walker that it be...

**Resolved:** That the Board excuse the absence of Brad Browder.

Program Presentation – From the Heart Campaign

Longevity Recognitions and Shining Star Awards were presented to Tri-County staff.

**Resolution #01-13-02**

**Motion Made By:** Morris Johnson

**Seconded By:** Tracy Sorensen, with affirmative votes by David Walker, Patti Atkins, Cecil McKnight, Janet Qureshi and Sharon Walker that it be...

**Resolved:** That the Board approve the minutes of the December 13, 2012 meeting of the Board of Trustees.

The Chairman of the Board, David Walker, suspended the agenda to move to Business Committee Item IX-C, Approve FY 2012 Independent Financial Audit. Carlos Taboada presented the report.

**Resolution #01-13-03**

**Motion Made By:** Morris Johnson

**Seconded By:** Cecil McKnight, with affirmative votes by David Walker, Tracy Sorensen, Patti Atkins, Janet Qureshi and Sharon Walker that it be...

**Resolved:** That the Board approve the FY 2012 Independent Financial Audit.

**Executive Director's Report:**

The Executive Director's report is on file.

**Chief Financial Officer's Report:**

The Chief Financial Officer's report is on file.

**PROGRAM COMMITTEE:**

**Resolution #01-13-04**

**Motion Made By:** Sharon Walker

**Seconded By:** Cecil McKnight, with affirmative votes by David Walker, Tracy Sorensen, Patti Atkins, Morris Johnson and Janet Qureshi that it be...

**Resolved:**

That the Board ratify submission of the DSHS 2013 Substance Abuse Prevention Grant Application.

The Community Resources Reports for November and December 2012 were reviewed for information purposes only.

The Consumer Services Reports for November and December 2012 were reviewed for information purposes only.

The Program Updates for November and December 2012 were reviewed for information purposes only.

The Year-to-Date FY 2013 Goals and Objectives Progress Report was reviewed for information purposes only.

The 1<sup>st</sup> Quarter FY 2013 Corporate Compliance & Quality Management Report was reviewed for information purposes only.

The 2<sup>nd</sup> Quarter FY 2013 Corporate Compliance Training was reviewed for information purposes only.

**EXECUTIVE COMMITTEE:**

**Resolution #01-13-05**

**Motion Made By:** Tracy Sorensen

**Seconded By:** Janet Qureshi, with affirmative votes by David Walker, Patti Atkins, Cecil McKnight Morris Johnson and Sharon Walker that it be...

**Resolved:**

That the Board ratify the contract with the new Executive Director, Evan Roberson.

The Personnel Report for December 2012 was reviewed for information purposes only.

The Texas Council quarterly meeting verbal update was presented by Sharon Walker.

**BUSINESS COMMITTEE:**

**Resolution #01-13-06**

**Motion Made By:** Morris Johnson

**Seconded By:** Cecil McKnight, with affirmative votes by David Walker, Tracy Sorensen, Patti Atkins, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the November 2012 financial statements.

**Resolution #01-13-07**

**Motion Made By:** Morris Johnson

**Seconded By:** Cecil McKnight, with affirmative votes by David Walker, Tracy Sorensen, Patti Atkins, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the December 2012 financial statements.

**Resolution #01-13-08**

**Motion Made By:** Morris Johnson

**Seconded By:** Patti Atkins, with affirmative votes by David Walker, Tracy Sorensen, Cecil McKnight, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the change in authorized signers for financial accounts effective February 1, 2013.

**Resolution #01-13-09**

**Motion Made By:** Morris Johnson

**Seconded By:** Cecil McKnight, with affirmative votes by David Walker, Tracy Sorensen, Patti Atkins, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the lease renewal for 300/302 Campbell St, Cleveland, Texas with Texas Facilities Commission and authorize the Executive Director to execute the necessary documents.

**Resolution #01-13-10**

**Motion Made By:** Morris Johnson

**Seconded By:** Cecil McKnight, with affirmative votes by David Walker, Tracy Sorensen, Patti Atkins, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the revised Employee Benefits Policy.

**Resolution #01-13-11**

**Motion Made By:** Morris Johnson

**Seconded By:** Cecil McKnight, with affirmative votes by David Walker, Tracy Sorensen, Patti Atkins, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the revised Retirement Plan Investment Policy Statement.

**Resolution #01-13-12**

**Motion Made By:** Morris Johnson

**Seconded By:** Patti Atkins, with affirmative votes by David Walker, Tracy Sorensen, Cecil McKnight, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the payment of \$5,000 in membership dues to the Health Information Partnership of Southeast Texas contingent upon participation of at least 50% (5) current member organizations.

**Resolution #01-13-13**

**Motion Made By:** Morris Johnson

**Seconded By:** Tracy Sorensen, with affirmative votes by David Walker, Patti Atkins, Cecil McKnight, Janet Qureshi and Sharon Walker that it be...

**Resolved:**

That the Board approve the loan of \$7,063 to Montgomery Supported Housing, Inc. for operating deficits and authorize that this amount be included in the FY 2013 Budget.

The FY 2012 990 Tax Return Statement was reviewed for information purposes only.

The 1<sup>st</sup> Quarter FY 2012 Quarterly Investment Report was reviewed for information purposes only.

The Board of Trustees' Unit Financial Statements for November and December 2012 were reviewed for information purposes only.

There was no need for Executive Session.

The Chairman of the Board, David Walker, acknowledged Cindy Sill's retirement and years of service. He noted the Center was served by the finest Executive Director in the state of Texas.

**Resolution #01-13-14**

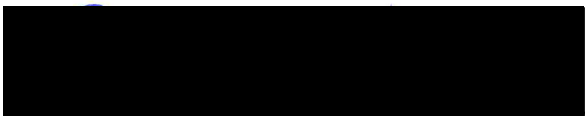
**Motion Made By:** Cecil McKnight

**Seconded By:** Janet Qureshi, with affirmative votes by David Walker, Tracy Sorensen, Patti Atkins, Morris Johnson, Cecil McKnight and Sharon Walker that it be...

**Resolved:**

That the January 24, 2013 meeting of the Board of Trustees be adjourned at 11:56 p.m.

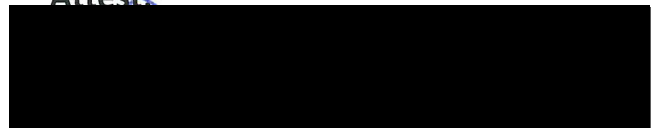
**Adjournment:**



David Walker  
Chairman

Date

**Attest:**



Tracy Sorensen  
Secretary

Date



# Executive Director's Report

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*February 28, 2013*

## **Announcements**

- The next regularly scheduled Board meeting is March 28, 2013.
- Our next Commissioner's Court presentation is scheduled for March 12<sup>th</sup> in Liberty.
- **Reminder – Mark your calendars.** The 28<sup>th</sup> Annual Texas Council Conference is scheduled for June 26-28<sup>th</sup> at the Dallas Sheraton. The Board of Trustees and staff are invited to attend.
- Since we did not have lunch at the last Board meeting due to Cindy's retirement celebration, the birthday cake for this month is in honor of Brad Browder's birthday which was on January 7<sup>th</sup>.

## **Department of Aging and Disability Services (DADS)**

- The annual **Local Authority Review** was completed on January 30<sup>th</sup>. DADS reviews functions related to Intellectual and Developmental Disability (IDD) intake services, eligibility determination, continuity of care, permanency planning and Service Coordination. The review can also include an evaluation of quality management, rights, data reporting and the IDD Planning Network Advisory Committee (PNAC), but Tri-County was exempt from this evaluation since we did not have any significant findings in these areas in the 2012 Local Authority Review.

In this year's review, DADS had three (3) very small findings related to Service Coordination. Two (2) of the findings were associated with Consumer Directed Services (having a back-up plan for services provided) and one (1) was related to a Person Directed Plan which was not updated on time.

Overall, DADS said our staff and program were "exemplary", and it was highly unusual for them to have no repeat findings in the monitoring area. They complimented several

of our service coordinators for being very person-centered in their planning and indicated it was obvious that our staff were truly sensitive to the needs of our clients. It is clear that Kelly Shropshire and his staff, who are supervised by Don Teeler, do an excellent job ensuring quality services for the persons we serve in the IDD Authority Services and Service Coordination.

- DADS has issued a **Contract Amendment** to the 2012-2013 Performance Contract. This amendment reinstates General Revenue (GR) funding and reestablishes our service contract target for non-waiver (GR) persons served with this funding back to 2012 levels. DADS had adjusted our GR down after underestimating the match for Texas Home Living (TxHmL) Service Coordination. The Texas Council worked on behalf the centers to restore this much needed funding.
- On February 8<sup>th</sup>, Tri-County received notice that nineteen (19) additional **Texas Home Living Waiver (TxHmL) slots** would be provided to persons in our service area, so staff is working with these families to inquire about their interest in the program. We anticipate enrolling ten (10) of these individuals into the TxHmL Waiver. Nine (9) individuals have declined enrollment because they are already receiving another waiver service.

As is the case with the Home and Community-based Services (HCS) Waiver, Tri-County has a cap on the number of individuals that we provide TxHmL services to, but each individual that selects the waiver must be served by our Service Coordination program.

### **Department of State Health Services (DSHS)**

- DSHS has issued a **Contract Amendment** to our 2012-2013 Performance Contract. The main changes in this amendment are references to new manuals and practices which will be associated with DSHS' planned roll-out of Texas Resilience and Recovery (TRR). DSHS also increased our service target back to 2011 levels for Adults and Children, 1,488 and 225 respectively. In addition, some minor changes were made to the Outpatient Competency Restoration contract. Overall, these changes seem to be fairly routine and do not appear to adversely affect operations.
- The DSHS **Co-Occurring Psychiatric and Substance Abuse Disorder (COPSD) Survey** was submitted by our Quality Management (QM) Department yesterday. The purpose of the survey was "to learn the existing referral patterns among providers in Texas". DSHS indicated they intend to compare the results with information obtained from earlier studies and use it to improve the quality of services. It should be noted that Texas Center QM staff were concerned that the survey was biased against centers because the questions were not well written. Staff made attempts to have DSHS adjust the survey to more fairly reflect community center referrals, but DSHS did not change the survey. We will not be surprised if the survey is less than positive for centers and our admission protocols.

- DSHS is conducting a **Progress Note Review** for mental health services. For the review, centers are required to send a redacted progress note sample along with treatment plans back to DSHS by March 1<sup>st</sup>. They will then post a sample of thirty (30) from other centers for us to review and return by March 29<sup>th</sup>. This format is new for DSHS and we are interested in learning about the documentation practices used by other centers through this review.
- We continue to utilize our **Rusk Diversion Beds** at two (2) north Houston psychiatric hospitals. We have had fewer transports to Rusk State Hospital by law enforcement as a result of this contract. We feel this is very positive for the individual that is served, their families and our local law enforcement personnel.

### **Pre-admission Screening and Resident Review (PASRR)**

- **PASRR** is a federally mandated screening and evaluation tool that is used to assess people with mental illness or developmental disabilities who are being considered for nursing facility placements to determine if nursing facility placement is appropriate or if these individuals can be better served in a more integrative setting. The evaluation also determines if the individual needs specialized services to address his/her disability. PASRR is also used to re-assess the needs of existing nursing facility patients whose conditions have changed or stabilized.

The State of Texas was determined to be out of compliance last year and they are under mandate to correct their current processes (which has been to allow the nursing facility to complete the assessment). The new process must be in place by May 24, 2013.

Currently, both IDD and MH staff persons are participating in a series of conference calls to learn more about the new PASRR requirements. At this point, we know that an assessment, which is designed to be completed by a bachelor's level staff, will have to be completed within 72 hours of notification by the state. There is planned reimbursement for these services, but we do not have enough information yet to determine if it will be adequate to cover our expenses.

### **Medicaid 1115 Transformation Waiver Updates**

- Activity related to the **Medicaid 1115 Transformation Waiver** continues. Since the last Board meeting, Region 2 (Liberty County) has required a few revisions of our planned project prior to submission to the Centers for Medicare and Medicaid Services (CMS).

On Tuesday, we received notice from Region 17 that CMS would be releasing Demonstration Year 1 planning money to Tri-County on March 28<sup>th</sup> and that Tri-County should be prepared to make an Intergovernmental Transfer (IGT) on March 6<sup>th</sup>. It should be noted that CMS has not yet approved the Region 17 plan in its entirety and

the center could be required to return a prorated share of the planning money if one (1) of our four (4) plans was not approved. We are fairly confident about two (2) of our plans because they were in the DSRIP menu. Our other two (2) plans were in the 'other projects' section of the menu and will be subject to more scrutiny.

I have created a position for a Medicaid 1115 Transformation Coordinator and advertising for this position began yesterday. The Coordinator will be responsible for developing all the detailed planning requirements, procedures, job descriptions, etc. and ensuring that we meet all of our performance targets for the programs.

### **Legislative Session Updates**

- Cindy Sill arranged a **Legislative Event** for Board members, PNAC members, county officials and staff at the Capitol on Tuesday, February 26<sup>th</sup>. There were twenty-two (22) people who participated in the activities which included visiting with the staff from each of our elected officials' offices. We also met with Senator Schwertner, and staff from the offices of Senators Williams, Representative Creighton and Representative Otto in the Supreme Court room to discuss our current concerns regarding the legislative session. Special thanks to Cindy for her leadership in this important activity.
- I have attached a list of **Bills that the Texas Council is Monitoring** to this report. The Senate has added \$200 million in funding to their budget for mental health with the hopes of addressing the need for additional crisis services across the state, reducing the waiting lists, etc. We are grateful to Senator Williams for his support of this funding. This same money has been 'pended' by the house.

The Texas Council has not yet issued an alert on Senate Bill 7; however, it is worth special consideration because it would move all IDD Waiver services (e.g. HCS, Texas Home Living, CLASS, etc.) into a Managed Care model as well as a series of other long-term support services (e.g. hospice). The advocates and families that I communicate with are very concerned about this legislation. Reportedly, many calls and letters have been received in opposition to this legislation. Cindy and/or I may ask you to move to action on this bill soon if it remains on track. Please stay tuned.

Evan Roberson

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**From:** Maria Rios <MRios@txcouncil.com> on behalf of Communications@txcouncil.com  
**Sent:** Friday, February 15, 2013 6:24 PM  
**To:** Maria Rios  
**Cc:** Maria Rios  
**Subject:** Bill Tracker 83rd Legislature Vol. 8: February 15, 2013  
**Attachments:** TEXAS COUNCIL BILL TRACKING REPORT\_2\_15\_2013.pdf



## February 15, 2013

Attached, please find Vol. 8 of the Texas Council Bill Tracking Report for the 83<sup>rd</sup> Legislative Session. **We will release a new Bill Tracking Report every Friday from now until the end of the 83<sup>rd</sup> Legislative Session.** Our goal is to keep you informed about legislation relevant to our system of care.

As of today, the Texas Legislature has filed **2051** bills. The Texas Council is currently tracking **116** of these bills and expects this list to grow until the bill filing deadline, Friday, March 8, 2013.

The Executive Summary below highlights bills specific to Mental Health and Intellectual and Developmental Disability issues.

If you identify a bill not on this list that you think should be tracked, please let us know. We greatly appreciate your feedback.

### Questions?

- For Mental Health legislation contact Joe Lovelace at [jlovelace@txcouncil.com](mailto:jlovelace@txcouncil.com).
- For IDD legislation contact Susanne Elrod at [selrod@txcouncil.com](mailto:selrod@txcouncil.com).

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## Executive Summary

The following bills have been highlighted for your review (click on the bill number for more information via Texas Legislature Online):

### Mental Health Bills

HB 1109      Burkett, Cindy(R)    Relating to peace officer interaction with persons with mental illness.

**BRIEF:** Amends the Code of Criminal Procedure to provide that a peace officer answering an emergency call shall attempt to determine whether the person involved in the emergency has a mental illness. If the peace officer reasonably believes the person has not committed an offense, the officer: shall notify the local mental health authority; provide appropriate assistance and may take the person into custody under emergency detention. If the peace officer believes the person has committed a misdemeanor offense, the officer may issue a citation in lieu of arrest; or take the person into custody under emergency detention. Also, the Commission on Law Enforcement Officer Standards and Education shall require courses and programs it approves for training for officers or county jailers to provide training in (D) mental illness.

**Bill History:** 02-08-13 H Filed

HB 1213      Clardy, Travis(R)    Relating to the authority of a mental health professional or school counselor to disclose certain confidential information.

**BRIEF:**      Currently under Texas law, a professional may disclose confidential information only to medical or law enforcement personnel if the professional determines the probability of imminent physical injury by the patient to the patient or others or a probability of immediate mental or emotional injury to the patient.

Should a mental health care provider warn an intended victim of a threat of harm, they would do so in violation of state law governing patient confidentiality. There is no immunity from liability for good faith reporting by the provider. Thus, the provider could be liable to the patient for breach of confidentiality, invasion of privacy, or defamation.

HB 1213 amends Sec. 611.004 to broaden the authority of a professional to

disclose a communicated threat of physical violence against a reasonably identifiable person or groups of persons or against the patient.

The professional can communicate the information to a patient's family or a person or groups of persons at risk as appropriate so long as they act in GOOD FAITH in arriving at the decision to act.

HB1213 extends the same authority to a school counselor who may disclose confidential information to law enforcement personnel, a student's family, or a person or group of persons at risk under the same conditions as provided above for a professional.

If disclosure is made in accordance with the provisions of the code, immunity from civil or criminal liability is provided.

**Bill History:** 02-12-13 H Filed

SB 460

Deuell, Bob(R)

Relating to inclusion of instruction in the detection and education of students with mental or emotional disorders in the requirements for educator training programs.

**BRIEF:** Amends the Education Code to provide that the State Board for Educator Certification shall require that a person to possess a bachelor's degree must also receive, as a part of the curriculum for that degree, instruction in detection and education of students with mental or emotional disorders.

The instruction must be developed by a panel of experts appointed by the Board and include information on characteristics of the most prevalent mental illness or emotional disorders among children; identification of the illnesses or disorders and effective strategies for teaching and intervening with students with such conditions including de-escalation techniques.

Notice and referral to a parent or guardian of this information may be made so that appropriate action such as seeking mental health services may be taken.

**Bill History:** 02-13-13 S Introduced and referred to committee on Senate Education

## IDD Bills

HB 1005      Gonzales, Larry(R)

Relating to the certification of day habilitation services providers for individuals with intellectual disabilities.

**BRIEF:** The purpose of this bill is to ensure that day habilitation services waiver providers provide high-quality services. Rules and standards are to be adopted regarding:

- 1)health and welfare of clients receiving day habilitation
- 2)quality of day habilitation services provided
- 3)adequate supervision of clients receiving day habilitation services
- 4)qualifications of waiver provider staff providing day habilitation services, and 5)requirements to be a day habilitation services site

DADS certifies a waiver provider who meets the requirements prescribed by this subchapter as a day habilitation services provider. A waiver provider must obtain a separate certification for each day habilitation services site. A certification expires on the second anniversary of the date of issuance.

A day habilitation services provider subject to this Act is not required to be certified by the Department of Aging and Disability Services until July 1, 2015. Act takes effect September 1, 2014.

**NOTE:** DADS has requested exceptional item funding for regulatory staff associated with certification of waiver day habilitation services.

**Bill History:** 2- 6-13 H Filed

SB 7      Nelson, Jane(R)

Relating to improving the delivery and quality of certain health and human services, including the delivery and quality of Medicaid acute care services and long-term care services and supports.

**BRIEF:** [Click here for Summary](#)

**Bill History:** 1-28-13 S Introduced and referred to committee on Senate Health and Human Services

*This message has been transmitted to Texas Council Board Members and Chief Executive Officers/Executive Directors.*



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## **CHIEF FINANCIAL OFFICER'S REPORT**

### **February 28, 2013**

**Cost Accounting Methodology (CAM) Report** – We have spent many hours working on the FY 2012 CAM report. We sent the preliminary report to DSHS on January 28<sup>th</sup> and the variances were within the allowable range and did not receive any comments back for further work to be done. However, we have continued to work on the report over the last month to fine tune our numbers. The final report is due to both DADS and DSHS today by 5:00 pm. After the final submission, we will continue to review our data and compare to our prior year CAM numbers as well as with state average cost for services.

The future of the CAM report continues to in question as the state agencies continue to look for better ways to gather and compare data. As we go into more managed care, cost reports will most likely go away because it will be a set rate that will be paid by managed care companies.

**CFO Consortium** - The quarterly CFO meeting was held in Austin on February 14<sup>th</sup> and 15<sup>th</sup>. During those days, we had an update from Texas Council and both DADS and DSHS, and a report from the Revenue Max Committee which mainly focused on the MAC claims and the difference in centers in FY 2012. The remaining time was spent discussing various aspects of the 1115 Waiver. This ranged from the CMS review process, the IGT transfer, and how to recognize the funds. Texas Council spent a good portion of time talking about Managed Care and Texas Legislation. Both DADS and DSHS talked about CARE III, Contract Amendments, CAM and possible legislative bills. And finally, we received quarterly Public Funds Investment Training.

**FY 2013 Budget Revision** - We have started work on our first budget revision for FY 2013. This revision will be mainly to adjust for any changes in trends that we have seen the first four months of the fiscal year, as well as any new contracts or program changes that have happened since the beginning budget was put in place. We anticipate that the revision will be ready by the March board meeting.

**FY 2012 Audit Management Letter Response** - Last month, Carlos presented the FY 2012 Audited Financial statements. He referred to the Management Letter that listed three items to be considered.

#### **1. General Ledger:**

During fiscal 2012, Tri-County revised its chart of accounts and general ledger to follow the GASB 34 concept. Management should consider preparing in-house GASB 34 financials semi-annually or after a major transaction that results in a significant reconciling item between the statement of activities and the statement of revenues, expenditures and changes in fund balance. This would require the conversion from the financial statements governance reviews each month to statement of activities that is presented at year end. This presentation would provide management with additional information for its decision making.

**Management Response:** Management will prepare in-house financials after major transactions to help with decision making.

**2. Long Term Commitments:**

Tri-County executed a service contract in February 2010 for data protection services that covered a five year period. The total contract amount was not accrued at that time. The annual payment was due on specified date. The expenditure for fiscal year 2012 was recorded when the payment was made. There are two installment payments due and management plans to continue to record the expenditure when the payment is made. In the future, management may want to accrue the entire amount of the obligation with the offsetting entry to prepaid expenditures. The obligation and the prepaid amount would be reduced accordingly.

**Management Response:** This was an oversight on our part and normally would have been booked as an obligation with the offsetting entry to a prepaid expenditure.

**3. Fund Balance Reporting:**

Tri-County has set up certain amounts in its balance sheet for its non-spendable, restricted, committed and assigned fund balances in accordance with GASB 54. However, we noticed some of the amounts had not changed in a few years, such as the inventory reserve. Management may want to ask the individuals that established these amounts to review the valuation to ensure these are in-line with Tri-County's current financial position.

**Management Response:** We will review the amounts that have been established and if appropriate bring to the board recommended changes.

<p><b>Agenda Item:</b> Approve Grant Application to the Department of State Health Services for the Projects for Assistance in Transition from Homelessness Program</p> <p><b>Committee:</b> Program</p>	<p><b>Board Meeting Date</b></p> <p>February 28, 2013</p>
<p><b>Background Information:</b></p> <p>Tri-County Services has been providing the Projects for Assistance in Transition from Homelessness (PATH) services through DSHS since 2005. Tri-County's current contract expires in August 2013.</p> <p>DSHS has released a Request For Proposal (RFP) to provide funding for PATH services for persons with serious mental illness or co-occurring substance abuse disorders who are homeless or at imminent risk of becoming homeless. If awarded, funding will begin September 1, 2013. The application is due March 1, 2013.</p> <p>PATH staff have provided services to 316 persons this year with 223 being enrolled in services using 100% Federal PATH funds. As they expand further into Walker and Liberty Counties and address homeless veterans, additional staff will be needed.</p> <p>To meet the projected needs of the communities within the Tri-County catchment area, staff are requesting funds to cover the costs of adding a third full-time staff and a part-time <b>veterans' peer staff along with the required training, travel, equipment, and materials</b> in the amount of approximately <b>\$244,165</b>.</p> <p>The full PATH Grant will be available at the Board meeting on the February 28<sup>th</sup> for review.</p>	
<p><b>Supporting Documentation:</b></p> <p>Grant Summary</p>	
<p><b>Recommended Action:</b></p> <p><b>Approve the Grant Application to the Department of State Health Services for Projects for Assistance in Transition from Homelessness Program to Begin September 1, 2013</b></p>	

# Projects for Assistance in Transition from Homelessness (PATH)

## Grant Application Summary

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The Department of State Health Services (DSHS) Mental Health and Substance Abuse Division announced the availability of grant funds for the FY 2014. They are soliciting proposals for funding to be awarded for community-based services for persons with serious mental illness who are homeless or at imminent risk of becoming homeless. The grant is renewable through FY 2019 at this time.

In Fiscal Year 2012, Tri-County received \$125,775 federal PATH funds and \$43,369 in matching State and local funds to provide an array of mental health and substance abuse treatment services to eligible persons within the Tri-County service area.

The goals of the PATH program are to provide intensive, personalized outreach and engagement services using evidence-based practices such as motivational interviewing, stages of change, and Trauma Informed Treatment, including principles of Co-Occurring Psychiatric and Substance-abuse Disorders. PATH is intended to provide time-limited services and to be a bridge to traditional community and behavioral health services such as Assertive Community Treatment, Supported Housing, Case Management, or Service Coordination. PATH programs are intended to ensure successful transition into mainstream services and engage in interagency coordination and cooperation.

Tri-County's current full-time staff (2) has maintained required trainings for each of their positions and work to meet the outcome measures expected of the contract. To ensure meeting those numbers and expand services to the broader communities will require additional staff. PATH proposes to add one full-time staff and one part-time peer for veterans.

To continue and grow the PATH program, Tri-County is requesting \$244,165 to cover the costs of additional staff, training, travel, and equipment.

<b>Agenda Item:</b> Community Resources Report for January 2013  <b>Committee:</b> Program	<b>Board Meeting Date</b>  February 28, 2013
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Community Resources Report for January 2013	
<b>Recommended Action:</b>  <b>For Information Only</b>	

# ***Community Resources Report***

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## **Volunteer Hours:**

<b>Location</b>	<b>January</b>
Conroe	173.5
Cleveland	0
Liberty	14
Huntsville	69.5
<b>Total</b>	<b>257</b>

## **COMMUNITY ACTIVITIES:**

1/29/13	Conroe Regional Medical Center-Montgomery County Hospital District Monthly Meeting/1115 Presentation	Conroe
2/5/13	Montgomery County United Way Well Being Counsel Meeting	The Woodlands
2/5/13	Montgomery County Managed Assigned Counsel Board Meeting	Conroe
2/6/13	Leadership Montgomery County Board Meeting	Conroe
2/6/13	Liberty County Community Resource Coordination Group	Liberty
2/6/13	Hispanic Outreach Professional Enrichment Community Network	The Woodlands
2/6/13	Tri-County Services Community Presentation – St. Stephens Catholic Church	Liberty
2/7/13	Walker County Community Resource Coordination Group/1115 Presentation	Huntsville
2/7/13	Cleveland Chamber of Commerce Luncheon	Cleveland
2/12/13	Jail Diversion Working Group	Conroe
2/13/13	Montgomery County United Way Funded Partners Meeting	The Woodlands
2/13/13	Montgomery County United Way – RFR Training	Conroe
2/14/13	Waiver Advisory Committee Meeting/1115 Presentation	Conroe
2/14/13	Huntsville Chamber of Commerce Breakfast	Huntsville
2/18/13	Montgomery County Homeless Coalition Board Meeting	Conroe
2/19/13	Montgomery County United Way Disaster Recovery Taskforce	The Woodlands
2/19/13	Montgomery County Community Resource Coordination Group/1115 Presentation	Conroe
2/20/13	Roots of Change Coalition Meeting	Conroe
2/20/13	Liberty/Dayton Chamber of Commerce Luncheon	Liberty
2/20/13	Montgomery County Homeless Coalition General Meeting	Conroe
2/20/13	Walker County Child Fatality Review Team	Huntsville
2/20/13	Roots of Change Coalition Meeting	Conroe
2/27/13	Liberty County Child Fatality Review Team	Dayton

**UPCOMING ACTIVITIES:**

3/7/13	Walker County Community Resource Coordination Group	Huntsville
3/7/13	Cleveland Chamber of Commerce Luncheon	Cleveland
3/14/13	Huntsville Chamber of Commerce Breakfast	Huntsville
3/19/13	Jail Diversion Executive Task Force Meeting/1115 Presentation	Conroe
3/19/13	Montgomery County Community Resource Coordination Group	Conroe
3/19/13	Montgomery County United Way Disaster Recovery Taskforce	The Woodlands
3/21/13	Adult Protective Services Task Force Meeting	Conroe

<b>Agenda Item:</b> Consumer Services Report for January 2013  <b>Committee:</b> Program	<b>Board Meeting Date</b>  February 28, 2013
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Consumer Services Report for January 2013	
<b>Recommended Action:</b>  <b>For Information Only</b>	

Consumer Services Report – January 2013

Crisis Services, MH Adults/Children	Montgomery County	Cleveland	Liberty	Walker County	Total
Persons Screened, Intakes, Other Crisis Services	566	37	32	51	686
Crisis and Transitional Services (SP 0, SP5)	62	2	4	2	70
Psychiatric Emergency Treatment Center (PETC) Served	48	2	3	2	55
Psychiatric Emergency Treatment Center (PETC) Bed Days	210	14	16	19	259
Contract Hospital Admissions	5	1	0	0	6
Diversion Admits	6	1	2	2	11
Total State Hospital Admissions	9	1	0	0	10
Routine Services, MH Adults/Children					
Adult Service Packages (SP 1-4)	785	101	106	114	1106
Adult Medication Services	626	68	63	95	852
Child Service Packages (SP 1.1-4)	273	18	6	39	336
Child Medication Services	142	10	3	19	174
TCOOMMI (Adult Only)	103	7	4	14	128
Adult Jail Diversion Services	7	0	0	0	7
Juvenile Detention Diversion Services	3	0	0	0	3
Persons Served by Program, IDD					
Number of New Enrollments for IDD Services	2	0	2	0	4
Service Coordination	437	29	45	47	558
Persons Enrolled in Programs, IDD					
Center Waiver Services (HCS, Supervised Living, TxHmL)	53	7	24	25	109
Contractor Provided ICF-MR	18	12	12	6	48
Substance Abuse Services					
Children and Youth Prevention Services	228	0	0	32	260
Youth Substance Abuse Treatment Services/COPSD	14	0	0	0	14
Adult Substance Abuse Treatment Services/COPSD	32	0	0	0	32
Waiting/Interest Lists as of Month End					
Department of State Health Services-Adults	155	20	18	7	200
Department of State Health Services-Children	27	0	0	0	27
Home and Community Based Services Interest List	1234	101	104	108	1547
Persons Served Outside of the State Contracts					
Benefit Package 3 Adult	39	9	5	2	55
January Served by County					
Adult Mental Health Services	1276	135	121	169	1701
Child Mental Health Services	309	19	7	42	377
Intellectual and Developmental Disabilities Services	497	48	62	57	664
Total Served by County	2082	202	190	268	2742
December Served by County					
Adult Mental Health Services	1194	117	102	152	1565
Child Mental Health Services	296	21	7	35	359
Intellectual and Developmental Disabilities Services	485	45	59	64	653
Total Served by County	1975	183	168	251	2577
November Served by County					
Adult Mental Health Services	1240	121	106	160	1627
Child Mental Health Services	293	18	6	42	359
Intellectual and Developmental Disabilities Services	502	48	58	61	669
Total Served by County	2035	187	170	263	2655

<b>Agenda Item:</b> Program Updates for January 2013  <b>Committee:</b> Program	<b>Board Meeting Date</b>  February 28, 2013
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Program Updates for January 2013	
<b>Recommended Action:</b>  <b>For Information Only</b>	

# Program Updates

## January 2013

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### **MH Crisis and Admission Services**

#### **A. Key Statistics:**

1. Number of new admissions during the month: 116
2. PETC average daily census: 9.7

#### **B. Program Comments:**

1. We have had turnover in our licensed intake and therapy positions, and we are now recruiting to fill them.
2. Our PETC Program has had some reduction in average daily census due to some staffing issues associated with our vacant Psychiatry position and our Director of Nurses being on leave.
3. Our Rusk State Hospital Diversion Contract Inpatient Program has been fully utilized in January, pushing us to capacity under our contract.

### **MH Adult Services**

#### **A. Key Statistics:**

1. Number of adults served during the month: 1,701
2. Number of adults served in Medication Services: 852

#### **B. Program Comments:**

1. We have been focusing efforts to increase Supported Housing and Supported Employment services to address increased DSHS Contract targets.
2. We have been increasing counseling services to clients of our ACT Program.
3. We have been unable to fill a vacant Psychiatry position as the last applicant withdrew his application. We are recruiting again.

### **MH Child Services**

#### **A. Key Statistics:**

1. Number of children served during the month: 377
2. Number of children served in Medication Services: 174

#### **B. Program Comments:**

1. We have been increasing the number of intakes for the program, leading to increases in our caseloads.
2. Our Medicaid Rehabilitation services increased in January as a result of some new staff completing new employee training.
3. We still have some vacancies due to leave issues.

## **Criminal Justice Services**

### **A. Key Statistics:**

1. Number of adults served through Texas Office on Offenders with Medical and Mental Impairments (TCOOMMI): 128 (131 minus 3 early discharges)
2. Number of jail diversions: 5

### **B. Program Comments:**

1. We are having some difficulties getting referrals to our Outpatient Competency Restoration Program.
2. Criminal Justice staff have increased Supported Employment services to their clients in conjunction with DSHS targets.
3. The Executive Jail Diversion Task Force Meeting has been rescheduled from February to March 19<sup>th</sup>.

## **Substance Abuse Services**

### **A. Key Statistics:**

1. Number of children served in Substance Abuse Prevention Services: 260
2. Number of adults served in Substance Abuse/COPSD Treatment Services:
  - a. Substance Abuse Outpatient: 32
  - b. COPSD: 16
  - c. Total unique clients served: 32
3. Number of children served in Substance Abuse Treatment Services: 14

### **B. Program Comments:**

1. We have seen an increase in referrals and treatment in our Youth Substance Abuse Treatment Program.
2. We have submitted a proposal to increase funding and staff for Substance Abuse Prevention Program.
3. We have been focusing on increasing referrals to our Co-Occurring Psychiatric and Substance Abuse Program.

## **IDD Services**

### **A. Key Statistics:**

1. Total number of admissions for the month: 4
2. Total number enrolled in the Home and Community Based Services (HCS) and Texas Home Living (TxHmL) Provider Services for the month: HCS = 68 TxHmL = 41
3. Total number served within the department: HCS = 48 TxHmL = 26
4. Total number served in all IDD Services for the month: 664

### **B. Program Comments:**

1. Our TxHmL and HCS audit was completed by DADS for Authority Services, resulting in only 3 findings needing a corrective action plan.
2. We had 62 clients to receive respite services in January.
3. We continue efforts to fill the 53 TxHmL slots we received.

## **Support Information**

### **A. Information Services:**

1. State service encounter data with new Current Procedural Terminology (CPT) changes was submitted successfully after several adjustments to the encounter codes were made by DSHS.

### **B. Quality Management:**

1. QM is working on several DSHS audits at this time for both mental health services and substance abuse services.
2. QM sent a staff to be certified in Mental Health First Aid training. Tri-County will look to begin some MHFA training classed by the end of FY 2013.

### **C. Grant Services:**

1. We are working on renewal grants for the Montgomery County United Way and Projects to Assist the Transition from Homelessness (PATH).

### **D. Housing:**

1. A Housing Coordinator was offered to a person who will work with the Director of Quality Management & Support on our HUD-811 projects.

## **Community Activities**

- A. We have begun meetings with Community Stakeholders in both Montgomery County and Walker County, regarding the 1115 Waiver Program.

<b>Agenda Item:</b> Personnel Report for January 2013  <b>Committee:</b> Executive	<b>Board Meeting Date</b>  February 28, 2013
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Personnel Report for January 2013	
<b>Recommended Action:</b>  <b>For Information Only</b>	

# **TRI-COUNTY SERVICES** **PERSONNEL BOARD REPORT** **JANUARY 2013**

STAFF CLASSIFICATIONS	NEW HIRES		SEPARATED		VOLUNTARY SEPARATION		INVOLUNTARY SEPARATION		BUDGETED POSITIONS	FILLED POSITIONS	MONTHLY TURNOVER PERCENT	YEARLY TURNOVER PERCENT
	MO.	YTD.	MO.	YTD.	MO.	YTD.	MO.	YTD.				
Bachelor's												
Qualified Mental Health Professionals		7	1	5		2	1	3	80	73	1%	7%
Qualified Developmental Disability Professionals (State Title)		2	1	1	1	1			15	14	7%	7%
Licensed Staff									18	14	0%	0%
Medical												
Physicians	1	2	1	1	1	1			7	5	20%	20%
Advanced Practice Nurses									2	2	0%	0%
RN's									11	10	0%	0%
LVN's		1							10	10	0%	0%
Techs/Aides												
MH		2	1	2	1	2			17	11	9%	18%
IDD		2							35	34	0%	0%
Supervisor/Manager												
MH									13	13	0%	0%
IDD									7	7	0%	0%
Program Support		3	1	2	1	2			41	37	3%	5%
Central Administration			1	2			1	2	19	17	6%	12%
Business Services			1	1			1	1	14	13	8%	8%
Maintenance/Janitorial/Lawn		2		2		2			23	20	0%	10%
GRAND TOTALS	1	21	7	16	4	10	3	6	312	280	3%	6%
Previous YTD											1%	11%

<b>Agenda Item:</b> Approve January 2013 Financial Statements  <b>Committee:</b> Business	<b>Board Meeting Date</b>  February 28, 2013
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  January 2013 Financial Statements	
<b>Recommended Action:</b>  <b>Approve January 2013 Financial Statements</b>	

## January 2013 Financial Summary

Revenues for January 2013 were \$2,257,362 and operating expenses were \$1,940,445 resulting in a gain in operation of \$316,918. Capital Expenditures and Extraordinary Expenses for January were \$36,592 resulting in a gain of \$280,326. Total revenues were 115.62% of the monthly budgeted revenues and total expenses were 101.03% of the monthly budgeted expenses.

Year to date revenues are \$10,243,235 and operating expenses are \$9,354,174 leaving excess operating revenues of \$889,061. YTD Capital Expenditures and Extraordinary Expenses are \$201,180 resulting in a gain YTD of \$687,881. Total revenues are 103.93% of the YTD budgeted revenues and total expenses are 97.11% 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
County of Montg - CDBG	81,685	106,233	76.89%	24,548

County of Montgomery – CDBG – In past years, we received Community Development Block Grant funds to help pay for our crisis stabilization facility. While we budgeted to receive additional funds in FY 2013, we were told we would not be receiving any more CDBG funding for this project.

### **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
Advertising - Recruitment	34,607	17,175	201.49%	17,432
Contract Hospital - Child	45,000	31,250	144.00%	13,750

Advertising – Recruitment – This line item represents the cost of advertising for various positions that have been recruited for this fiscal year. The bulk of the costs were for the Executive Director ads that were placed throughout the State of Texas. An adjustment will be made during the mid-year budget revision process to correct this variance.

Contract Hospital – Child - This line item is over budget due to an increase in the number of children admitted to contract hospitals. We will watch this line item to determine if additional funds are needed during the revision process.

**TRI-COUNTY SERVICES**  
**CONSOLIDATED BALANCE SHEET**  
**As of January 31, 2013**

	<b>TOTALS COMBINED FUNDS January 2013</b>	<b>TOTALS COMBINED FUNDS December 2012</b>	<b>Increase (Decrease)</b>
<b>ASSETS</b>			
<b>CURRENT ASSETS</b>			
Imprest Cash Funds	5,125	5,225	(100)
Cash on Deposit-General Fund	9,942,378	10,639,778	(697,400)
Cash on Deposit-Debt Fund	180,948	180,948	-
Accounts Receivable	1,213,239	1,099,979	113,260
Inventory	4,926	4,956	(31)
<b>TOTAL CURRENT ASSETS</b>	<b>11,346,615</b>	<b>11,930,886</b>	<b>(584,272)</b>
<b>FIXED ASSETS</b>	<b>6,066,064</b>	<b>6,066,064</b>	<b>-</b>
<b>OTHER ASSETS</b>	<b>43,936</b>	<b>54,696</b>	<b>(10,761)</b>
<b>TOTAL ASSETS</b>	<b>17,456,614</b>	<b>18,051,646</b>	<b>(595,032)</b>
<b>LIABILITIES, DEFERRED REVENUE, FUND BALANCES</b>			
<b>CURRENT LIABILITIES</b>	<b>997,944</b>	<b>1,000,095</b>	<b>(2,151)</b>
<b>NOTES PAYABLE</b>	<b>409,597</b>	<b>409,597</b>	<b>-</b>
<b>DEFERRED REVENUE</b>	<b>2,657,244</b>	<b>3,536,617</b>	<b>(879,374)</b>
<b>LONG-TERM LIABILITIES FOR</b>			
Line of Credit - Tradition Bank	1,285,682	1,307,804	(22,122)
Bond Series 2004	410,000	410,000	-
<b>EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR</b>			
General Fund	1,790,320	1,509,994	280,326
Debt Service Fund	-	-	-
<b>FUND EQUITY</b>			
<b>RESTRICTED</b>			
Net Assets Reserved for Debt Service	(2,101,478)	(2,123,600)	22,122
Reserved for Debt Retirement	1,230,000	1,230,000	-
Reserved for Debt Service	-	-	-
<b>COMMITTED</b>			
Net Assets-Property and Equipment	6,066,064	6,066,064	-
Reserved for Board Policy Requirements	879,405	879,405	-
Reserved for Equipment Reserve	354,290	354,290	-
Reserved for Inventory Reserve	32,973	32,973	-
Reserved for Operations and Programs	2,000,000	2,000,000	-
<b>ASSIGNED</b>			
Reserved for Workers' Compensation	274,409	274,409	-
Reserved for Current Year Budgeted Reserve	30,831	24,664	6,167
Reserved for Insurance Deductibles	100,000	100,000	-
<b>UNASSIGNED</b>			
Unrestricted and Undesignated	1,039,334	1,039,334	-
<b>TOTAL LIABILITIES/FUND BALANCE</b>	<b>17,456,614</b>	<b>18,051,646</b>	<b>(595,032)</b>

**TRI-COUNTY SERVICES  
CONSOLIDATED BALANCE SHEET  
As of January 31, 2013**

	<b>General Operating Funds</b>	<b>TOTALS</b>	
		<b>Memorandum Only</b>	
		<b>January 2013</b>	<b>Final August 2012</b>
<b>ASSETS</b>			
<b>CURRENT ASSETS</b>			
Imprest Cash Funds	5,125	5,125	5,125
Cash on Deposit-General Fund	9,942,378	9,942,378	6,181,561
Cash on Deposit-Debt Fund	180,948	180,948	429,586
Accounts Receivable	1,213,239	1,213,239	1,706,732
Inventory	4,926	4,926	3,600
<b>TOTAL CURRENT ASSETS</b>	<b>11,346,615</b>	<b>11,346,615</b>	<b>8,326,604</b>
<b>FIXED ASSETS</b>	<b>6,066,064</b>	<b>6,066,064</b>	<b>6,066,064</b>
<b>OTHER ASSETS</b>	<b>43,936</b>	<b>43,936</b>	<b>42,755</b>
<b>AMOUNT TO BE PROVIDED FOR THE RETIREMENT OF LONG TERM DEBT</b>		-	
<b>TOTAL ASSETS</b>	<b>17,456,614</b>	<b>17,456,614</b>	<b>14,435,423</b>
<b>LIABILITIES, DEFERRED REVENUE, FUND BALANCES</b>			
<b>CURRENT LIABILITIES</b>	<b>997,944</b>	<b>997,944</b>	<b>1,195,517</b>
<b>NOTES PAYABLE</b>	<b>409,597</b>	<b>409,597</b>	<b>409,597</b>
<b>DEFERRED REVENUE</b>	<b>2,657,244</b>	<b>2,657,244</b>	<b>157,192</b>
<b>LONG-TERM LIABILITIES FOR</b>			
Line of Credit - Tradition Bank	1,285,682	1,285,682	1,395,837
Bond Series 2004	410,000	410,000	820,000
<b>EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR</b>			
General Fund	1,790,320	1,790,320	1,102,439
Debt Service Fund	-	-	-
<b>FUND EQUITY</b>			
<b>RESTRICTED</b>			
Net Assets Reserved for Debt service-Restricted	(2,101,478)	(2,101,478)	(2,621,633)
Reserved for Debt Retirement	1,230,000	1,230,000	1,230,000
Reserved for Debt Service	-	-	-
<b>COMMITTED</b>			
Net Assets-Property and Equipment-Committed	6,066,064	6,066,064	6,066,064
Reserved for Board Policy Requirements-Committed	879,405	879,405	879,405
Reserved for Equipment Reserve-Committed	354,290	354,290	354,290
Reserved for Inventory Reserve-Committed	32,973	32,973	32,973
Reserved for Operations and Programs -Committed	2,000,000	2,000,000	2,000,000
<b>ASSIGNED</b>			
Reserved for Workers' Compensation-Assigned	274,409	274,409	274,409
Reserved for Current Year Budgeted Reserve -Assigned	30,831	30,831	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000	100,000
<b>UNASSIGNED</b>			
Unrestricted and Undesignated	1,039,334	1,039,334	1,039,334
<b>TOTAL LIABILITIES/FUND BALANCE</b>	<b>17,456,614</b>	<b>17,456,614</b>	<b>14,435,423</b>

**TRI-COUNTY SERVICES**  
**Revenue and Expense Summary**  
**For the Month Ended January 2013**  
**and YTD as of January 2013**

<b>INCOME:</b>	<b>MONTH OF January 2013</b>	<b>YTD January 2013</b>
Local Revenue Sources	80,504	667,246
Earned Income	1,128,517	4,352,019
General Revenue-Contract	1,048,341	5,223,970
<b>TOTAL INCOME</b>	<b>2,257,362</b>	<b>10,243,235</b>
<b>EXPENSES:</b>		
Salaries	1,005,641	4,893,913
Employee Benefits	215,802	944,408
Medication Expense	25,982	119,648
Travel-Board/Staff	29,572	150,821
Building Rent/Maintenance	11,231	76,754
Consultants/Contracts	458,203	2,230,186
Other Operating Expenses	194,014	938,444
<b>TOTAL EXPENSES</b>	<b>1,940,445</b>	<b>9,354,174</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>316,918</b>	<b>889,061</b>
<b>CAPITAL EXPENDITURES</b>		
Capital Outlay-FF&E, Automobiles, Building	1,110	23,770
Capital Outlay-Debt Service Bonds	35,482	177,410
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>36,592</b>	<b>201,180</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>1,977,037</b>	<b>9,555,354</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>280,326</b>	<b>687,881</b>

**TRI-COUNTY SERVICES**  
**Revenue and Expense Summary**  
**Compared to Budgeted**  
**Year to Date as of January 2013**

	YTD January 2013	APPROVED BUDGET	Increase (Decrease)
<b>INCOME:</b>			
Local Revenue Sources	667,246	671,359	(4,113)
Earned Income	4,352,019	3,971,232	380,787
General Revenue-Contract	5,223,970	5,212,422	11,548
<b>TOTAL INCOME</b>	<b>10,243,235</b>	<b>9,855,013</b>	<b>388,222</b>
<b>EXPENSES:</b>			
Salaries	4,893,913	4,952,688	(58,775)
Employee Benefits	944,408	962,018	(17,610)
Medication Expense	119,648	141,069	(21,421)
Travel-Board/Staff	150,821	172,663	(21,842)
Building Rent/Maintenance	76,754	105,665	(28,911)
Consultants/Contracts	2,230,186	2,261,011	(30,825)
Other Operating Expenses	938,444	1,009,929	(71,485)
<b>TOTAL EXPENSES</b>	<b>9,354,174</b>	<b>9,605,043</b>	<b>(250,869)</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>889,061</b>	<b>249,970</b>	<b>639,091</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	23,770	56,402	(32,632)
Capital Outlay-Debt Service Bonds	177,410	177,358	52
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>201,180</b>	<b>233,760</b>	<b>(32,580)</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>9,555,354</b>	<b>9,838,803</b>	<b>(283,449)</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>687,881</b>	<b>16,210</b>	<b>671,671</b>

**Debt Service and Fixed Asset Fund:**

Bond Payments Receipts	177,410	177,358	52
Bond Payments Disbursements		-	-
Interest Income			
<b>Excess(Deficiency) of revenues over Expense:</b>	<b>177,410</b>	<b>177,358</b>	<b>52</b>

**TRI-COUNTY SERVICES**  
**Revenue and Expense Summary**  
**Compared to Budget**  
**For the Month Ended January 2013**

<b>INCOME:</b>	<b>MONTH OF January 2013</b>	<b>APPROVED BUDGET</b>	<b>Increase (Decrease)</b>
Local Revenue Sources	80,504	107,123	(26,619)
Earned Income	1,128,517	785,940	342,577
General Revenue-Contract	1,048,341	1,059,239	(10,898)
<b>TOTAL INCOME</b>	<b>2,257,362</b>	<b>1,952,302</b>	<b>305,060</b>
<b>EXPENSES:</b>			
Salaries	1,005,641	1,010,505	(4,864)
Employee Benefits	215,802	202,236	13,566
Medication Expense	25,982	28,214	(2,232)
Travel-Board/Staff	29,572	34,532	(4,960)
Building Rent/Maintenance	11,231	13,167	(1,936)
Consultants/Contracts	458,203	445,399	12,804
Other Operating Expenses	194,014	166,966	27,048
<b>TOTAL EXPENSES</b>	<b>1,940,445</b>	<b>1,901,019</b>	<b>39,426</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>316,918</b>	<b>51,283</b>	<b>265,635</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	1,110	20,312	(19,202)
Capital Outlay-Debt Service Bonds	35,482	35,470	12
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>36,592</b>	<b>55,782</b>	<b>(19,190)</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>1,977,037</b>	<b>1,956,801</b>	<b>20,236</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>280,326</b>	<b>(4,499)</b>	<b>284,825</b>

**Debt Service and Fixed Asset Fund:**

Bond Payments Receipts	35,482	35,470	12
Bond Payments Disbursements		-	-
Interest Income			
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>35,482</b>	<b>35,470</b>	<b>12</b>

**TRI-COUNTY SERVICES**  
**Revenue and Expense Summary**  
**With January 2012 Comparative Data**  
**Year to Date as of January 2013**

<b>INCOME:</b>	<b>YTD January 2013</b>	<b>YTD January 2012</b>	<b>Increase (Decrease)</b>
Local Revenue Sources	667,246	751,834	(84,588)
Earned Income	4,352,019	3,786,773	565,246
General Revenue-Contract	5,223,970	4,554,235	669,735
<b>TOTAL INCOME</b>	<b>10,243,235</b>	<b>9,092,842</b>	<b>1,150,393</b>
<b>EXPENSES:</b>			
Salaries	4,893,913	4,627,159	266,754
Employee Benefits	944,408	900,468	43,940
Medication Expense	119,648	115,792	3,856
Travel-Board/Staff	150,821	133,681	17,140
Building Rent/Maintenance	76,754	91,187	(14,433)
Consultants/Contracts	2,230,186	1,906,709	323,477
Other Operating Expenses	938,444	959,273	(20,829)
<b>TOTAL EXPENSES</b>	<b>9,354,174</b>	<b>8,734,269</b>	<b>619,905</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>889,061</b>	<b>358,573</b>	<b>530,488</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	23,770	5,952	17,818
Capital Outlay-Debt Service Bonds	177,410	183,988	(6,578)
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>201,180</b>	<b>189,940</b>	<b>11,240</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>9,555,354</b>	<b>8,924,209</b>	<b>631,145</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>687,881</b>	<b>168,633</b>	<b>519,248</b>

<b>Debt Service and Fixed Asset Fund:</b>			
Bond Payments Receipts	177,410	183,988	(6,578)
Bond Payments Disbursements			-
Interest Income			-
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>177,410</b>	<b>183,988</b>	<b>(6,578)</b>

**TRI-COUNTY SERVICES**  
**Revenue and Expense Summary**  
**With January 2012 Comparative Data**  
**For the Month January 2013**

<b>INCOME:</b>	<b>MONTH OF January 2013</b>	<b>MONTH OF January 2012</b>	<b>Increase (Decrease)</b>
Local Revenue Sources	80,504	135,002	(54,498)
Earned Income	1,128,517	794,902	333,615
General Revenue-Contract	1,048,341	955,080	93,261
<b>TOTAL INCOME</b>	<b>2,257,362</b>	<b>1,884,984</b>	<b>372,378</b>
<b>EXPENSES:</b>			
Salaries	1,005,641	904,130	101,511
Employee Benefits	215,802	180,205	35,597
Medication Expense	25,982	24,093	1,889
Travel-Board/Staff	29,572	24,779	4,793
Building Rent/Maintenance	11,231	17,956	(6,725)
Consultants/Contracts	458,203	404,288	53,915
Other Operating Expenses	194,014	179,882	14,132
<b>TOTAL EXPENSES</b>	<b>1,940,445</b>	<b>1,735,333</b>	<b>205,112</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>316,918</b>	<b>149,651</b>	<b>167,267</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	1,110	3,383	(2,273)
Capital Outlay-Debt Service Bonds	35,482	36,798	(1,316)
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>36,592</b>	<b>40,181</b>	<b>(3,589)</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>1,977,037</b>	<b>1,775,514</b>	<b>201,523</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>280,326</b>	<b>109,470</b>	<b>170,856</b>

<b>Debt Service and Fixed Asset Fund:</b>			
Bond Payments Receipts	35,482	36,798	(1,316)
Bond Payments Disbursements			-
Interest Income			-
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>35,482</b>	<b>36,798</b>	<b>(1,316)</b>

**TRI-COUNTY SERVICES**  
**Revenue and Expense Summary**  
**With December 2012 Comparative Data**  
**As of January 2013**

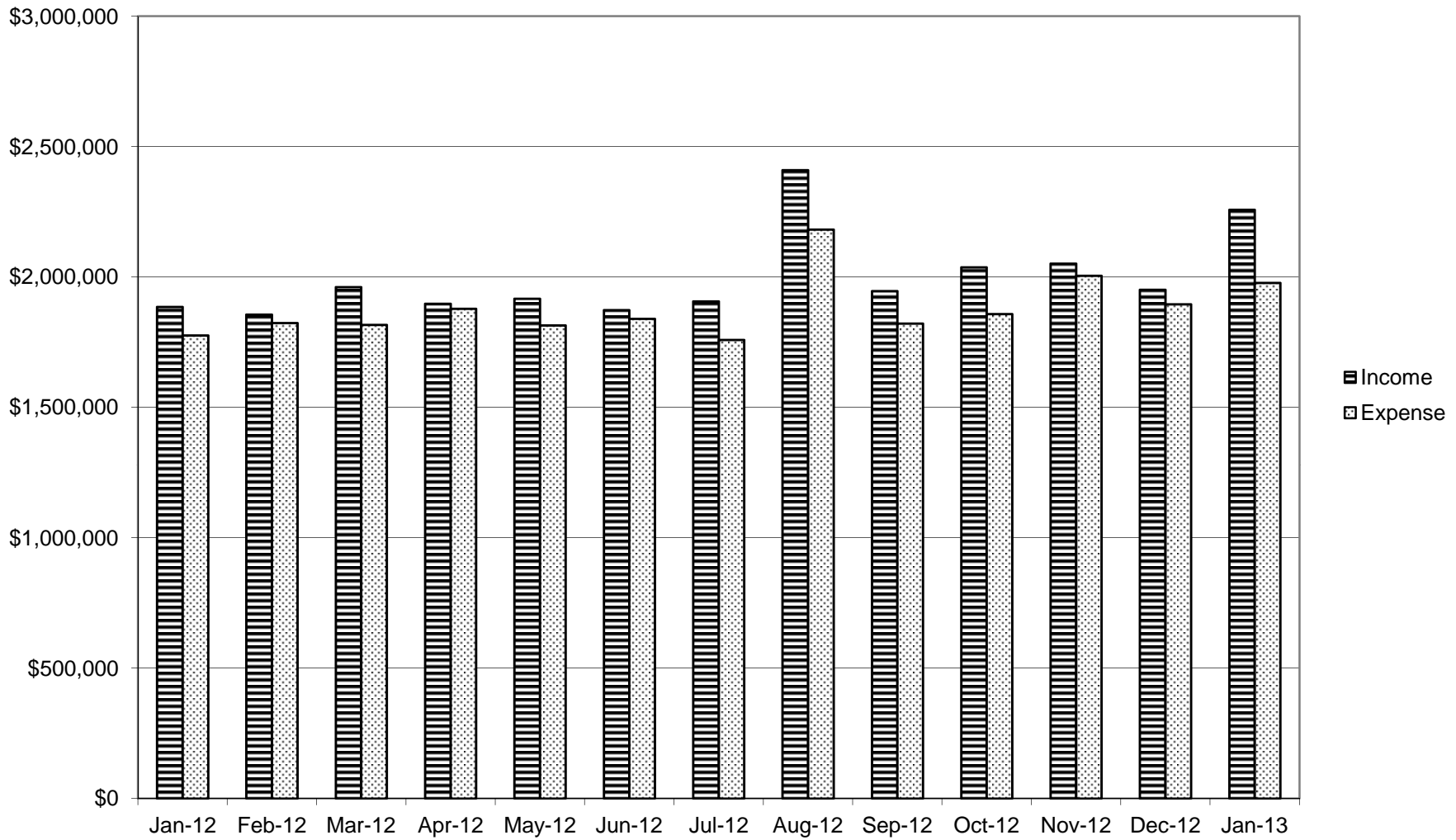
<b>INCOME:</b>	<b>MONTH OF January 2013</b>	<b>MONTH OF December 2012</b>	<b>Increase (Decrease)</b>
Local Revenue Sources	80,504	140,354	(59,850)
Earned Income	1,128,517	765,553	362,965
General Revenue-Contract	1,048,341	1,045,234	3,107
<b>TOTAL INCOME</b>	<b>2,257,362</b>	<b>1,951,140</b>	<b>306,222</b>
<b>EXPENSES:</b>			
Salaries	1,005,641	970,669	34,972
Employee Benefits	215,802	182,065	33,737
Medication Expense	25,982	14,856	11,126
Travel-Board/Staff	29,572	27,836	1,737
Building Rent/Maintenance	11,231	(8,987)	20,218
Consultants/Contracts	458,203	463,511	(5,308)
Other Operating Expenses	194,014	186,675	7,339
<b>TOTAL EXPENSES</b>	<b>1,940,445</b>	<b>1,836,625</b>	<b>103,820</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>316,918</b>	<b>114,515</b>	<b>202,402</b>
<b>CAPITAL EXPENDITURES</b>			
Capital Outlay-FF&E, Automobiles	1,110	22,660	(21,550)
Capital Outlay-Debt Service Bonds	35,482	35,482	-
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>36,592</b>	<b>58,142</b>	<b>(21,550)</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>1,977,037</b>	<b>1,894,767</b>	<b>82,270</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>280,326</b>	<b>56,373</b>	<b>223,952</b>

<b>Debt Service and Fixed Asset Fund:</b>			
Bond Payments Receipts	35,482	35,482	-
Bond Payments Disbursements			-
Interest Income			
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>35,482</b>	<b>35,482</b>	<b>-</b>

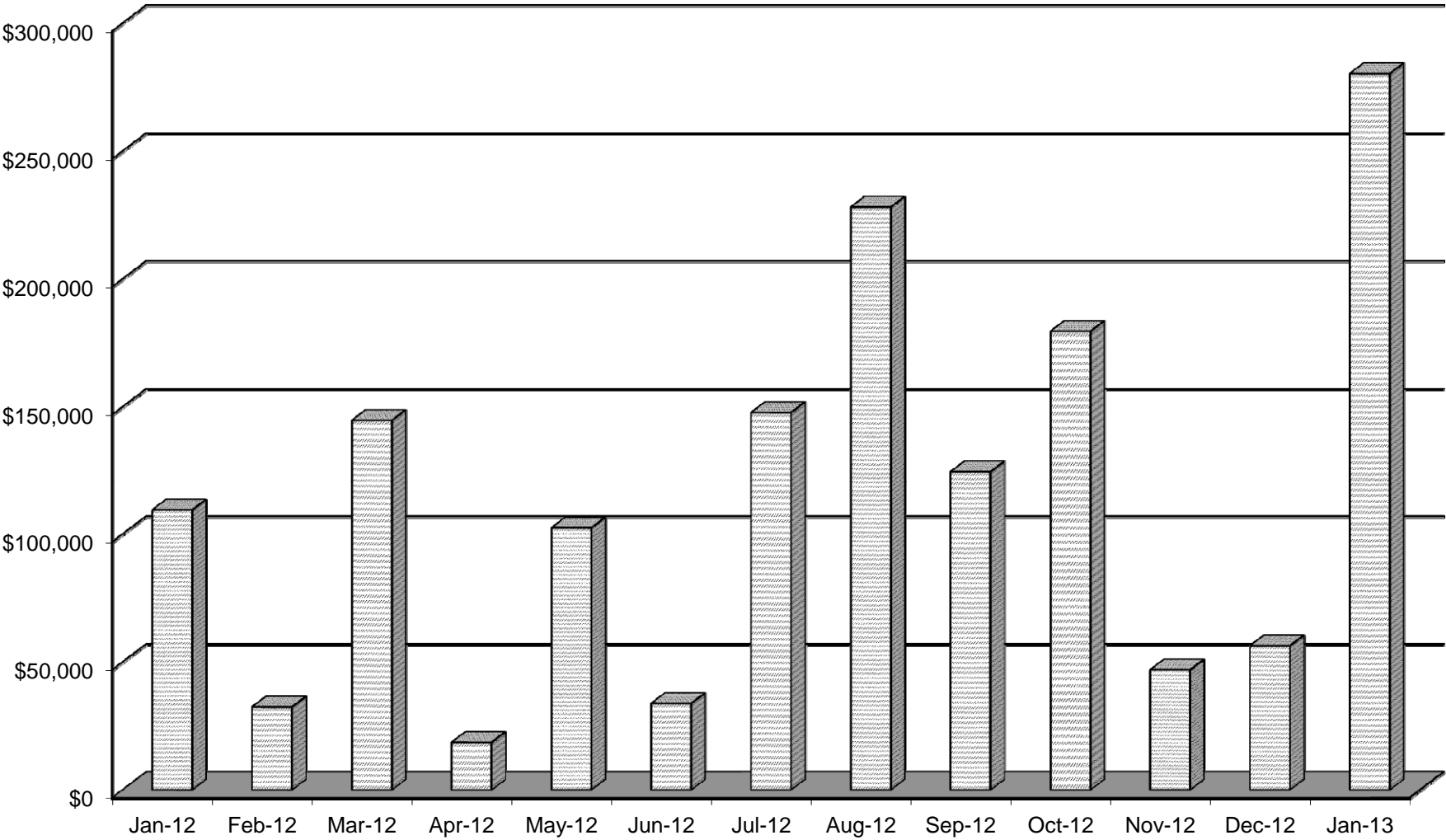
**TRI-COUNTY SERVICES**  
**Revenue and Expense Summary by Service Type**  
**Compared to Budget**  
**As of YTD Ended January 2013**

	YTD Mental Health January 2013	YTD IDD January 2013	YTD Other Services January 2013	YTD Agency Total January 2013	YTD Approved Budget January 2013	Increase (Decrease)
<b>INCOME:</b>						
Local Revenue Sources	424,087	108,527	134,632	667,246	671,359	(4,113)
Earned Income	1,266,762	2,587,510	497,747	4,352,019	3,971,232	380,787
General Revenue-Contract	4,658,508	565,462	-	5,223,970	5,212,422	11,548
<b>TOTAL INCOME</b>	<b>6,349,357</b>	<b>3,261,499</b>	<b>632,379</b>	<b>10,243,235</b>	<b>9,855,013</b>	<b>388,222</b>
<b>EXPENSES:</b>						
Salaries	3,477,266	1,013,455	403,192	4,893,913	4,952,688	(58,775)
Employee Benefits	657,475	203,686	83,245	944,408	962,018	(17,610)
Medication Expense	115,134	-	4,514	119,648	141,069	(21,421)
Travel-Board/Staff	99,263	37,779	13,779	150,821	172,663	(21,842)
Building Rent/Maintenance	45,149	25,874	5,730	76,754	105,665	(28,911)
Consultants/Contracts	662,827	1,541,210	26,149	2,230,186	2,261,011	(30,825)
Other Operating Expenses	622,409	229,355	86,681	938,444	1,009,929	(71,485)
<b>TOTAL EXPENSES</b>	<b>5,679,523</b>	<b>3,051,359</b>	<b>623,290</b>	<b>9,354,174</b>	<b>9,605,043</b>	<b>(250,869)</b>
<b>Excess(Deficiency) of Revenues over Expenses before Capital Expenditures</b>	<b>669,834</b>	<b>210,140</b>	<b>9,089</b>	<b>889,061</b>	<b>249,970</b>	<b>639,091</b>
<b>CAPITAL EXPENDITURES</b>						
Capital Outlay-FF&E, Automobiles	14,747	7,156	1,868	23,770	56,402	(32,632)
Capital Outlay-Debt Service Bonds	108,982	49,511	18,918	177,410	177,358	52
<b>TOTAL CAPITAL EXPENDITURES</b>	<b>123,729</b>	<b>56,667</b>	<b>20,786</b>	<b>201,179</b>	<b>233,760</b>	<b>(32,580)</b>
<b>GRAND TOTAL EXPENDITURES</b>	<b>5,803,252</b>	<b>3,108,026</b>	<b>644,076</b>	<b>9,555,353</b>	<b>9,838,803</b>	<b>(283,449)</b>
<b>Excess (Deficiency) of Revenues and Expenses</b>	<b>546,105</b>	<b>153,473</b>	<b>(11,697)</b>	<b>687,881</b>	<b>16,210</b>	<b>671,671</b>
<b>Debt Service and Fixed Asset Fund:</b>						
Bond Payments Receipts	108,982	49,511	18,918	177,410	177,358	(68,376)
Bond Payments Disbursements	-	-	-	-	-	-
Interest Income	-	-	-	-	-	-
<b>Excess(Deficiency) of revenues over Expenses</b>	<b>108,982</b>	<b>49,511</b>	<b>18,918</b>	<b>177,410</b>	<b>177,358</b>	<b>(68,376)</b>

# TRI-COUNTY SERVICES Income and Expense



**TRI-COUNTY SERVICES**  
**Income after Expense**



**Agenda Item:** Approve Request to Solicit FY 2013 Auditor

**Board Meeting Date**

February 28, 2013

**Committee:** Business

**Background Information:**

Each year, Tri-County MHMR Services is required to select an outside auditor for our financial audit. We have previously used the following auditors:

FY 1992	Pircher and Co.
FY 1988 - 1993	Kenneth Davis
FY 1999	Vetter & Taboada, P.C.
FY 2000 - 2003	David N. Miller, LLP
FY 2004 - 2006	McConnell & Jones, LLP
FY 2007 - 2010	David N. Miller, LLP
FY 2011 - 2012	Carlos Taboada & Company, P.C.

The FY 2013 DSHS and DADS Performance Contracts state that the Center shall "engage the same audit firm no more than six (6) consecutive years from the initial date of engagement".

**Supporting Documentation:**

None

**Recommended Action:**

**Direct Staff to Solicit Proposals for FY 2013 Independent Financial Audit**

<p><b>Agenda Item:</b> Approve Revisions to the Board Policy on Depositories</p> <p><b>Committee:</b> Business</p>	<p><b>Board Meeting Date</b></p> <p>February 28, 2013</p>
<p><b>Background Information:</b></p> <p>Due to the retirement of Cindy Sill, it is necessary to replace Cindy Sill with Evan Roberson as Executive Director and therefore authorized to conduct investment transactions and wire transfer funds on behalf of The Center.</p>	
<p><b>Supporting Documentation:</b></p> <p>Board Policy E.5 – Depositories, Showing Revisions</p> <p>Board Policy E.5 – Depositories, Final</p>	
<p><b>Recommended Action:</b></p> <p><b>Approve Revisions to the Board Policy on Depositories</b></p>	

## TRI-COUNTY SERVICES

### STATEMENT OF POLICY

Chairman

~~Len~~ ~~George~~ David Walker,

Date

REVISION DATES:    October 31, 1996  
                              December 11, 1997  
                              March 25, 2010  
                              December 8, 2011  
                              February 28, 2013

SUBJECT: Depositories

Tri-County Services is a public non-profit agency, a unit of local government, established by the local units of government which sponsor its operation and appoint its Board of Trustees. The nine (9) member Board of Trustees is responsible for the administration of Tri-County (Texas Health and Safety Code, Chapter 534, Section 534.008). Entrusted with authority over public funds, it is the intent of the Board of Trustees to handle said funds frugally, responsibly, and in a reasonable fashion to ensure that services are continually provided to citizens of Tri-County. Therefore, the Board adopts the following policies:

- I. Tri-County shall share the deposit of its revenues amongst the available financial institutions in the Tri-County region based upon the following criteria:
  - A. Convenience and efficiency for the operation and transaction of Tri-County's business.
  - B. Quality, accurate and timely service with the lowest possible cost to Tri-County.
- II. Funds not needed for immediate use shall be handled as follows:

This policy is hereby enacted pursuant to Chapter 2256 (as amended) of the Texas Government Code, the Public Funds Investment Act. The Executive Director is hereby charged with the responsibility of investing any and all funds under the control of Tri-County, and managing prudently and properly the investments. Because these funds may be called upon, it is essential that absolute maturity horizons are identifiable for the purpose of liquidity. Moreover, these funds must be invested only in investments which are appropriately authorized under Chapter 2256, and more specifically within this Investment

Policy. This Investment Policy addresses eligible investments, as well as the methods, procedures, and practices which must be exercised to ensure effective and sound fiscal management.

## **SCOPE**

This policy shall apply to the investment of financial assets of specified funds over which the Center exercises financial control. The specified funds to which this policy shall apply are listed in Appendix I.

## **OBJECTIVES**

The Center's principal investment objectives in order of importance are:

1. Preservation of capital and the protection of investment principal.
2. Maintenance of sufficient liquidity to meet anticipated disbursements and cash flows.
3. Attainment of a rate of return consistent with market condition at the time.

In addition, the Center intends to conform with all Federal, State and other legal requirements, and to avoid incurring unreasonable risks regarding securities owned.

## **DELEGATION OF AUTHORITY**

The ultimate responsibility and authority of investment transactions involving the Center resides with the Executive Director. The Executive Director may appoint other members of the Center's staff to assist him/her in the cash management and investment function. Other persons who are authorized to transact business and wire funds on behalf of the Center are listed in Appendix II to this policy. An outside Investment Advisor may be appointed to assist the Executive Director in the management of Center funds, and may be granted limited investment discretion within the guidelines of this Investment Policy.

The Executive Director shall be responsible for all investment decisions and activities, and shall establish written administrative procedures for the operation of the Center's investment program consistent with this Investment Policy. The investment officer acting within these procedures shall not be held personally liable for specific investment transactions conducted consistent with this Investment Policy.

## **PRUDENCE**

The standard of prudence to be used for managing the Center's assets is the "prudent investor" rule which states, "Investments shall be made with judgment and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their

own affairs, not for speculation, but for investment considering the probable safety of their capital as well as the probable income to be derived.”

## **ELIGIBLE INVESTMENTS**

The Center will limit its investments to the following types of investments:

### **Securities:**

The following direct obligations of the United States Government are authorized investments under this Policy:

1. United States Treasury Obligations (T-Bills, T-Notes, T-Bonds).
2. Treasury Strips (book-entry U.S. Treasury securities whose coupon has been removed) with maturities not exceeding two years.
3. Federal Agencies and Instrumentalities (Restricted to Bonds And Debentures) – the following only:
  - Federal National Mortgage Association (FNMA),
  - Federal Home Loan Bank (FHLB),
  - Federal Home Loan Mortgage Corporation (FHLMC).

Repurchase Agreements secured by direct obligations of the U.S. Government, collateralized at a minimum of 102 percent of the purchase price of the Repurchase Agreement, with the accrued interest accumulated on the collateral included in the calculation.

### **Certificate of Deposit:**

A certificate of deposit is an authorized investment under this Policy if the certificate is issued by a state or national bank domiciled in the State of Texas, a savings and loan association domiciled in the State of Texas, or a state or federal credit union domiciled in the State of Texas, and is:

1. fully guaranteed or insured by the Federal Deposit Insurance Corporation or its successor; or
2. fully guaranteed or insured by the National Credit Union Share Insurance Fund or its successor; or
3. fully secured by Securities described above as eligible investments within this Policy.

### **Commercial Paper:**

Commercial paper is an authorized investment under this Policy if the commercial paper:

1. has a stated maturity of 270 days or less; and

2. is issued on U.S. corporations which are rated A-1 by Moody's or P-1 by Standard & Poor's, or an equivalent rating by at least two nationally recognized credit rating agencies.

### **Mutual Funds:**

No-load money market mutual funds are authorized investments under this policy if the fund is:

1. regulated by the Securities and Exchange Commission; and
2. a fund that includes in its investment objective the maintenance of a stable net asset value of \$1 for each share; and
3. invested exclusively in the obligations approved within this Policy; and
4. rated in the highest rating category by Moody's of AAAm or AAAm-G by Standard & Poor's.

In addition to no-load money market mutual funds, a no-load mutual fund is an authorized investment under this Policy if the mutual fund is:

1. registered by the Securities and Exchange Commission; and
2. has an average weighted maturity of less than two years; and
3. invested exclusively in obligations approved within this Policy; and
4. rated in the highest rating category by Moody's of AAA or AAA by Standard & Poor's.

The Investment Officer shall monitor, on no less than a monthly basis, the credit rating on all authorized investments in the portfolio based upon independent information from a nationally recognized rating agency. If any security falls below the minimum rating required by Policy, the Investment Officer shall immediately sell the security, if possible, regardless of a loss of principal.

### **OTHER INVESTMENTS**

It is the intent of the Board that the foregoing list of authorized securities be strictly interpreted and that any deviation from this list must be pre-approved by the Executive Director in writing.

The Board acknowledges that securities other than those listed above may be owned by the Center at the time this policy is adopted. Existing investments may be liquidated in the normal course of business; however, any new investment transactions shall be made in accordance with the guidelines of this policy.

### **INVESTMENT DIVERSIFICATION**

The Center's objective is to diversify the investment instruments within the portfolio to avoid incurring unreasonable risks inherent in overinvesting in specific instruments, individual financial institutions, or

maturities. The asset allocation in the portfolio should, however, be flexible depending upon the outlook for the economy and the securities markets.

The Center may invest to the following maximum limits:

75%	in qualified Money Market Mutual Funds
100%	in U.S. Treasury Obligations
100%	in Repurchase Agreements collateralized by U.S. Treasury Obligations
50%	in Federal Agencies or Instrumentalities
50%	in qualified Certificates of Deposit
25%	in qualified Commercial Paper

## **INVESTMENT MATURITY AND LIQUIDITY**

The Center shall at all times maintain a minimum of 30% of its total investment portfolio in instruments maturing in 90 days or less. The investment maturity schedule shall correspond with the Center's cash flow needs.

Investments, except for Debt Service Reserves used as security for debt service payments on the Center's bonds, shall be limited to maturities not exceeding four years. Investments of Debt Service Reserves shall have a defined maturity not in excess of the final maturity of the bonds for which the reserves serve as security.

## **OTHER INVESTMENT GUIDELINES**

Each investment transaction, other than qualified mutual funds or certificates of deposits used for collateralizing of loan transactions, must be competitively transacted. For the acquisition of a repurchase agreement, a Master Repurchase Agreement must be executed between the Center and a Primary Dealer or financial institution before a repurchase agreement shall be transacted with that institution.

**The purchase and sale of all securities, including repurchase agreements, shall be on a delivery versus payment basis (i.e. moneys will not be released by the Center until securities are received at the Federal Reserve Bank).**

## **SELECTION OF FINANCIAL INSTITUTIONS AND BROKER/DEALERS**

The Executive Director shall maintain a list of authorized broker/dealers and financial institutions which are approved for investment purposes, and it shall be the policy of the Center to purchase securities only from those authorized institutions and firms. To be eligible for authorization, a broker/dealer must:

1. have been given a copy of this Investment Policy; and

2. have received and thoroughly reviewed the Investment Policy of the Center's; and
3. acknowledged in writing that the organization has implemented reasonable procedures and controls in an effort to preclude imprudent investment activities arising out of investment transactions conducted between the Center and the organization; and
4. for the acquisition of repurchase agreements, the dealer must be recognized as a Primary Dealer by the Federal Reserve Bank of New York.

An investment officer of the Center who has a business relationship with an entity seeking to sell an investment to the Center shall file a written statement to the Center's Board of Trustees disclosing that personal business interest prior to conducting business with that entity. An investment officer of the Center who is related, either directly, or indirectly through marriage, to an individual seeking to sell an investment to the investment officer's center shall be required to file with the Texas Ethics Commission as well as providing the above described disclosure to the Center's Board of Trustees prior to conducting business with that individual.

## **SELECTION OF MUTUAL FUNDS**

Mutual Funds shall be selected by reviewing the Prospectus of the fund to determine qualifications as compared to the requirements of this Policy.

## **SAFEKEEPING**

Investment securities purchased by the Center will be delivered by either book entry or physical delivery and held in third-party safekeeping by a Federal Reserve member financial institution designated as the Center's depository. The Center may designate more than one depository.

A Safekeeping Agreement shall be executed with each depository prior to the Center utilizing the depository's services.

It is the intent of the Board that all securities be perfected in the name of the Center. All book entry securities owned by the Center shall be evidenced by:

1. a safekeeping receipt issued to the Center by its custodial bank. This document will be signed by the appropriate officer at the custodian bank and shall state that the securities are held in the Federal Reserve system in a trust department account; and
2. the custodian bank will also furnish to the Center a copy of the delivery advice received by the custodian bank from the Federal Reserve. This document shall state that the name of the customer for whom the securities are held is the Center.

## **REPORTING**

An investment report shall be prepared, at least quarterly, listing all of the investments held by the Center, the current market valuation of the investments, transaction summaries and performance

results. The quarterly investment report shall be submitted in a timely manner to the Board of Trustees. A record shall be maintained of all bids and offerings for securities transactions in order to insure that the Center receives competitive pricing.

## **PERFORMANCE REVIEW**

The Executive Director shall annually review the portfolio's adherence to appropriate risk levels and shall compare the portfolio's total return to the established investment objectives and goals.

The Executive Director shall periodically establish a benchmark yield for the Center's investments which shall be equal to the average yield on the U.S. Treasury security which most closely corresponds to the portfolio's actual weighted average maturity. When comparing the performance of the Center's portfolio, all fees and expenses involved with managing the portfolio should be included in the computation of the portfolio's rate of return.

## **PROFESSIONAL SUPPORT SERVICES**

The Executive Director may engage the services of outside professionals to enhance the Center's cash management and investment function. Such professional services may include independent rating services, credit analysis reports, investment advisory services provided by SEC registered firms, third party custodian services, and safekeeping arrangements.

## **ETHICS AND CONFLICTS OF INTEREST**

Officers and employees involved in the investment of the Center's funds shall refrain from personal business activity that could conflict with proper execution of the investment program, or which could impair their ability to make impartial investment decisions. Employees and investment officials shall disclose to the Executive Director any material financial interests in financial institutions that conduct business with the Center, and they shall further disclose any personal financial/investment positions that could be related to the performance of the Center's portfolio. Employees and officers shall subordinate their personal investment transactions to those of the Center, particularly with regard to the timing of purchases and sales.

## **POLICY REVISION**

This Investment Policy will be reviewed annually by the Board of Trustees and may be amended as conditions warrant. The data contained in the Appendices to this document may be updated by the Executive Director as necessary, provided the changes in no way affect the substance or intent of this Investment Policy.

## **APPENDIX I**

### **Funds Covered by the Investment Policy**

This Investment Policy shall apply to all contract and other revenues of the Center, including proceeds from the issuance of bonds (including Debt Service Reserves relating to the bond issues) that may be from time to time authorized by the Board of Trustees.

APPENDIX II

Authorized Personnel

The following persons are authorized to conduct investment transactions and wire transfer funds on behalf of The Center:

<u><del>Cindy Sil</del> Evan Roberson</u>	Executive Director
<u>Millie McDuffey</u>	Chief Financial Officer
<u>Sheryl Baldwin</u>	Business Manager

## TRI-COUNTY SERVICES

### STATEMENT OF POLICY

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David Walker, Chairman

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Date

REVISION DATES:   October 31, 1996  
                              December 11, 1997  
                              March 25, 2010  
                              December 8, 2011  
                              February 28, 2013

### SUBJECT: Depositories

Tri-County Services is a public non-profit agency, a unit of local government, established by the local units of government which sponsor its operation and appoint its Board of Trustees. The nine (9) member Board of Trustees is responsible for the administration of Tri-County (Texas Health and Safety Code, Chapter 534, Section 534.008). Entrusted with authority over public funds, it is the intent of the Board of Trustees to handle said funds frugally, responsibly, and in a reasonable fashion to ensure that services are continually provided to citizens of Tri-County. Therefore, the Board adopts the following policies:

- I.     Tri-County shall share the deposit of its revenues amongst the available financial institutions in the Tri-County region based upon the following criteria:
  - A.     Convenience and efficiency for the operation and transaction of Tri-County's business.
  - B.     Quality, accurate and timely service with the lowest possible cost to Tri-County.
- II.    Funds not needed for immediate use shall be handled as follows:

This policy is hereby enacted pursuant to Chapter 2256 (as amended) of the Texas Government Code, the Public Funds Investment Act. The Executive Director is hereby charged with the responsibility of investing any and all funds under the control of Tri-County, and managing prudently and properly the investments. Because these funds may be called upon, it is essential that absolute maturity horizons are identifiable for the purpose of liquidity. Moreover, these funds must be invested only in investments which are appropriately authorized under Chapter 2256, and more specifically within this Investment Policy. This Investment Policy addresses eligible investments, as well as the methods,

procedures, and practices which must be exercised to ensure effective and sound fiscal management.

## **SCOPE**

This policy shall apply to the investment of financial assets of specified funds over which the Center exercises financial control. The specified funds to which this policy shall apply are listed in Appendix I.

## **OBJECTIVES**

The Center's principal investment objectives in order of importance are:

1. Preservation of capital and the protection of investment principal.
2. Maintenance of sufficient liquidity to meet anticipated disbursements and cash flows.
3. Attainment of a rate of return consistent with market condition at the time.

In addition, the Center intends to conform with all Federal, State and other legal requirements, and to avoid incurring unreasonable risks regarding securities owned.

## **DELEGATION OF AUTHORITY**

The ultimate responsibility and authority of investment transactions involving the Center resides with the Executive Director. The Executive Director may appoint other members of the Center's staff to assist him/her in the cash management and investment function. Other persons who are authorized to transact business and wire funds on behalf of the Center are listed in Appendix II to this policy. An outside Investment Advisor may be appointed to assist the Executive Director in the management of Center funds, and may be granted limited investment discretion within the guidelines of this Investment Policy.

The Executive Director shall be responsible for all investment decisions and activities, and shall establish written administrative procedures for the operation of the Center's investment program consistent with this Investment Policy. The investment officer acting within these procedures shall not be held personally liable for specific investment transactions conducted consistent with this Investment Policy.

## **PRUDENCE**

The standard of prudence to be used for managing the Center's assets is the "prudent investor" rule which states, "Investments shall be made with judgment and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment considering the probable safety of their capital as well as the probable income to be derived."

## **ELIGIBLE INVESTMENTS**

The Center will limit its investments to the following types of investments:

### **Securities:**

The following direct obligations of the United States Government are authorized investments under this Policy:

1. United States Treasury Obligations (T-Bills, T-Notes, T-Bonds).
2. Treasury Strips (book-entry U.S. Treasury securities whose coupon has been removed) with maturities not exceeding two years.
3. Federal Agencies and Instrumentalities (Restricted to Bonds And Debentures) – the following only:
  - Federal National Mortgage Association (FNMA),
  - Federal Home Loan Bank (FHLB),
  - Federal Home Loan Mortgage Corporation (FHLMC).

Repurchase Agreements secured by direct obligations of the U.S. Government, collateralized at a minimum of 102 percent of the purchase price of the Repurchase Agreement, with the accrued interest accumulated on the collateral included in the calculation.

### **Certificate of Deposit:**

A certificate of deposit is an authorized investment under this Policy if the certificate is issued by a state or national bank domiciled in the State of Texas, a savings and loan association domiciled in the State of Texas, or a state or federal credit union domiciled in the State of Texas, and is:

1. fully guaranteed or insured by the Federal Deposit Insurance Corporation or its successor; or
2. fully guaranteed or insured by the National Credit Union Share Insurance Fund or its successor; or
3. fully secured by Securities described above as eligible investments within this Policy.

### **Commercial Paper:**

Commercial paper is an authorized investment under this Policy if the commercial paper:

1. has a stated maturity of 270 days or less; and
2. is issued on U.S. corporations which are rated A-1 by Moody's or P-1 by Standard & Poor's, or an equivalent rating by at least two nationally recognized credit rating agencies.

### **Mutual Funds:**

No-load money market mutual funds are authorized investments under this policy if the fund is:

1. regulated by the Securities and Exchange Commission; and
2. a fund that includes in its investment objective the maintenance of a stable net asset value of \$1 for each share; and
3. invested exclusively in the obligations approved within this Policy; and
4. rated in the highest rating category by Moody's of AAAM or AAAM-G by Standard & Poor's.

In addition to no-load money market mutual funds, a no-load mutual fund is an authorized investment under this Policy if the mutual fund is:

1. registered by the Securities and Exchange Commission; and
2. has an average weighted maturity of less than two years; and
3. invested exclusively in obligations approved within this Policy; and
4. rated in the highest rating category by Moody's of AAA or AAA by Standard & Poor's.

The Investment Officer shall monitor, on no less than a monthly basis, the credit rating on all authorized investments in the portfolio based upon independent information from a nationally recognized rating agency. If any security falls below the minimum rating required by Policy, the Investment Officer shall immediately sell the security, if possible, regardless of a loss of principal.

### **OTHER INVESTMENTS**

It is the intent of the Board that the foregoing list of authorized securities be strictly interpreted and that any deviation from this list must be pre-approved by the Executive Director in writing.

The Board acknowledges that securities other than those listed above may be owned by the Center at the time this policy is adopted. Existing investments may be liquidated in the normal course of business; however, any new investment transactions shall be made in accordance with the guidelines of this policy.

### **INVESTMENT DIVERSIFICATION**

The Center's objective is to diversify the investment instruments within the portfolio to avoid incurring unreasonable risks inherent in overinvesting in specific instruments, individual financial institutions, or maturities. The asset allocation in the portfolio should, however, be flexible depending upon the outlook for the economy and the securities markets.

The Center may invest to the following maximum limits:

75%	in qualified Money Market Mutual Funds
100%	in U.S. Treasury Obligations
100%	in Repurchase Agreements collateralized by U.S. Treasury Obligations
50%	in Federal Agencies or Instrumentalities
50%	in qualified Certificates of Deposit
25%	in qualified Commercial Paper

## **INVESTMENT MATURITY AND LIQUIDITY**

The Center shall at all times maintain a minimum of 30% of its total investment portfolio in instruments maturing in 90 days or less. The investment maturity schedule shall correspond with the Center's cash flow needs.

Investments, except for Debt Service Reserves used as security for debt service payments on the Center's bonds, shall be limited to maturities not exceeding four years. Investments of Debt Service Reserves shall have a defined maturity not in excess of the final maturity of the bonds for which the reserves serve as security.

## **OTHER INVESTMENT GUIDELINES**

Each investment transaction, other than qualified mutual funds or certificates of deposits used for collateralizing of loan transactions, must be competitively transacted. For the acquisition of a repurchase agreement, a Master Repurchase Agreement must be executed between the Center and a Primary Dealer or financial institution before a repurchase agreement shall be transacted with that institution.

**The purchase and sale of all securities, including repurchase agreements, shall be on a delivery versus payment basis (i.e. moneys will not be released by the Center until securities are received at the Federal Reserve Bank).**

## **SELECTION OF FINANCIAL INSTITUTIONS AND BROKER/DEALERS**

The Executive Director shall maintain a list of authorized broker/dealers and financial institutions which are approved for investment purposes, and it shall be the policy of the Center to purchase securities only from those authorized institutions and firms. To be eligible for authorization, a broker/dealer must:

1. have been given a copy of this Investment Policy; and
2. have received and thoroughly reviewed the Investment Policy of the Center's; and
3. acknowledged in writing that the organization has implemented reasonable procedures and controls in an effort to preclude imprudent investment activities arising out of investment transactions conducted between the Center and the organization; and

4. for the acquisition of repurchase agreements, the dealer must be recognized as a Primary Dealer by the Federal Reserve Bank of New York.

An investment officer of the Center who has a business relationship with an entity seeking to sell an investment to the Center shall file a written statement to the Center's Board of Trustees disclosing that personal business interest prior to conducting business with that entity. An investment officer of the Center who is related, either directly, or indirectly through marriage, to an individual seeking to sell an investment to the investment officer's center shall be required to file with the Texas Ethics Commission as well as providing the above described disclosure to the Center's Board of Trustees prior to conducting business with that individual.

## **SELECTION OF MUTUAL FUNDS**

Mutual Funds shall be selected by reviewing the Prospectus of the fund to determine qualifications as compared to the requirements of this Policy.

## **SAFEKEEPING**

Investment securities purchased by the Center will be delivered by either book entry or physical delivery and held in third-party safekeeping by a Federal Reserve member financial institution designated as the Center's depository. The Center may designate more than one depository.

A Safekeeping Agreement shall be executed with each depository prior to the Center utilizing the depository's services.

It is the intent of the Board that all securities be perfected in the name of the Center. All book entry securities owned by the Center shall be evidenced by:

1. a safekeeping receipt issued to the Center by its custodial bank. This document will be signed by the appropriate officer at the custodian bank and shall state that the securities are held in the Federal Reserve system in a trust department account; and
2. the custodian bank will also furnish to the Center a copy of the delivery advice received by the custodian bank from the Federal Reserve. This document shall state that the name of the customer for whom the securities are held is the Center.

## **REPORTING**

An investment report shall be prepared, at least quarterly, listing all of the investments held by the Center, the current market valuation of the investments, transaction summaries and performance results. The quarterly investment report shall be submitted in a timely manner to the Board of Trustees. A record shall be maintained of all bids and offerings for securities transactions in order to insure that the Center receives competitive pricing.

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The Executive Director shall annually review the portfolio's adherence to appropriate risk levels and shall compare the portfolio's total return to the established investment objectives and goals.

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## **APPENDIX I**

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## **APPENDIX II**

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The following persons are authorized to conduct investment transactions and wire transfer funds on behalf of The Center:

<u>Evan Roberson</u>	Executive Director
<u>Millie McDuffey</u>	Chief Financial Officer
<u>Sheryl Baldwin</u>	Business Manager

<p><b>Agenda Item:</b> Approve Change in Authorized Agent and/or Signer for State of Texas Co-Op Purchasing Program</p> <p><b>Committee:</b> Business</p>	<p><b>Board Meeting Date</b></p> <p>February 28, 2013</p>
<p><b>Background Information:</b></p> <p>Due to the retirement of Cindy Sill, it is necessary to replace Cindy Sill with Evan Roberson as Executive Director and therefore an authorized agent and/or signer to the State of Texas Co-Op Purchasing Program.</p>	
<p><b>Supporting Documentation:</b></p> <p>State of Texas Co-Op Agent of Record Name Change Form</p>	
<p><b>Recommended Action:</b></p> <p><b>Approve Evan Roberson as Authorized Agent and Signer for State of Texas Co-Op Purchasing Program</b></p>	

# State of Texas CO-OP Agent of Record Name Change Form

\*If you need to remove an agent of record from your account please print the person's name and write the word "remove" in parentheses next to it.

Account number: R1700

Entity name: Tri-County MHMR Services

E-mail: MillieM@TriCountyServices.org StellaM@TriCountyServices.org

The Agent(s) of Record for the above mentioned entity are:

1) **Primary Agent's Name and Title:** Evan Roberson (Add) Cindy Sill (Remove)  
Executive Director  
(This person will receive all correspondence from CPA)

Signature: \_\_\_\_\_

2) **Agent's Name and Title:** Millie McDuffey, CFO

Signature: \_\_\_\_\_

☐ Check here if additional Agents of Record are enclosed

Approval Signature is **REQUIRED** and must be one of the following:

- ◆ Previously approved Agent of Record
- ◆ Chairman of the governing board

Name and Title: David Walker, Board Chair

Signature: \_\_\_\_\_

Date: February 28, 2013

If you have questions about this form, please call 512-463-3368.  
Please submit the completed form by fax: 512-936-2667 or by email: [coop@cpa.state.tx.us](mailto:coop@cpa.state.tx.us).

**State of Texas CO-OP Agent of Record Name Change Form**  
**(Continued)**

**3) Agent's Name and Title:** \_\_\_\_\_

Signature: \_\_\_\_\_

**4) Agent's Name and Title:** \_\_\_\_\_

Signature: \_\_\_\_\_

**5) Agent's Name and Title:** \_\_\_\_\_

Signature: \_\_\_\_\_

**6) Agent's Name and Title:** \_\_\_\_\_

Signature: \_\_\_\_\_

**7) Agent's Name and Title:** \_\_\_\_\_

Signature: \_\_\_\_\_

**8) Agent's Name and Title:** \_\_\_\_\_

Signature: \_\_\_\_\_

<p><b>Agenda Item:</b> Resolution Authorizing Signer for HOME Agreements</p> <p><b>Committee:</b> Business</p>	<p><b>Board Meeting Date</b></p> <p>February 28, 2013</p>
<p><b>Background Information:</b></p> <p>In May 2012, the Board passed a motion that gave approval to the Texas Department of Housing and Community Affairs for Tri-County Services to become a Reservation System Participant (RSP) in order to access HOME funds from the Tenant Based Rental Assistance for Person With Disabilities (TBRA PWD) Reservation Project. At that time, the Executive Director, Cindy Sill, was authorized to execute the HOME agreements upon award.</p> <p>Due to the retirement of Cindy Sill, a resolution must be approved by the Board of Trustees and signed by the Board Chairman stating that the current Executive Director, Evan Roberson, is authorized to execute the HOME agreements.</p>	
<p><b>Supporting Documentation:</b></p> <p>Revised TBRA PWD Board Resolution</p> <p>Original TBRA PWD Board Resolution</p>	
<p><b>Recommended Action:</b></p> <p><b>Approve Resolution Authorizing the Current Executive Director, Evan Roberson, to Execute the HOME Agreements</b></p>	

### **TBRA PWD BOARD RESOLUTION**

On the 28th of February 2013, the Board of Trustees of Tri-County Mental Health Mental Retardation Services dba Tri-County Services passed the following Motion:

NOW BE IT RESOLVED, by the Board of Trustees, that

- Evan Roberson, Executive Director of Tri-County Services, be authorized to execute the HOME agreements.

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David Walker, Chair

### **TBRA PWD BOARD RESOLUTION**

On the 24<sup>nd</sup> of May 2012, the Board of Trustees of Tri-County Mental Health Mental Retardation Services dba Tri-County Services passed the following Motion:

NOW BE IT RESOLVED, by the Board of Trustees, that

- Approval be given to the Texas Department of Housing and Community Affairs for Tri-County Services to become a Reservation System Participant (RSP) in order to access HOME funds from the Tenant Based Rental Assistance for Person With Disabilities (TBRA PWD) Reservation Project.
- An amount of \$15,000 be made available in cash reserves from existing undesignated reserves to operate the program for one month pending reimbursement from the Texas Department of Housing and Community Affairs; and
- Cindy Sill, Executive Director of Tri-County Services, be authorized to execute the HOME agreements upon award.



Len George, Chair

<p><b>Agenda Item:</b> Ratify the FY 2012-13 Department of State Health Services Contract Amendments for Mental Health Services and Outpatient Competency Restoration</p> <p><b>Committee:</b> Business</p>	<p><b>Board Meeting Date</b></p> <p>February 28, 2013</p>
<p><b>Background Information:</b></p> <p>On January 29<sup>th</sup>, the Department of State Health Services (DSHS) issued a Performance Contract Amendment that changed language in the Program Attachment and the Outpatient Competency Restoration (OCR) program attachment effective December 1, 2012.</p> <p>The following changes were made to the Program Attachment:</p> <ul style="list-style-type: none"> <li>• An increase in Service Targets for Adults from 1,429 to 1,488 and for children from 223 to 225. Targets had been reduced after General Revenue was removed from the budget in the 82<sup>nd</sup> Legislative Session. These targets were increased to reflect the additional Temporary Assistance for Needy Families (TANF) funds which were provided to all centers to replace this General Revenue in FY 2012. Tri-County is serving significantly more children and adults than required by the contract and there will be no problem serving these additional consumers.</li> <li>• Several clauses were added related to Local Planning and Network Development (LPND) requirements for contracting services, when applicable.</li> <li>• There are multiple references to new Texas Resilience and Recovery (TRR) Utilization Management Guideline and Evidence Based Practice adherence. The UM Guidelines for TRR have not yet been developed and these contract changes are made in advance of TRR implementation in the summer of 2013.</li> <li>• There was some clarification around the service of individuals nearing their 18<sup>th</sup> birthday.</li> </ul> <p>The following changes were made to the OCR Contract:</p> <ul style="list-style-type: none"> <li>• A requirement was added for weekly contacts with Rusk and the Montgomery County Treatment Facility to look for inpatient consumers who might be appropriate for the OCR program.</li> <li>• A requirement for more detailed discharge planning by all OCR providers.</li> <li>• Clarification on state CARE (state data system) reporting screen entry.</li> </ul> <p>DSHS requested that these Performance Contract amendments be signed and returned to them as soon as possible. Evan Roberson spoke with Board Chair, David Walker, who authorized signature on the amended contract. The contract amendment was signed and mailed to DSHS on February 6, 2013.</p>	
<p><b>Supporting Documentation:</b></p> <p>DSHS Program Attachment #001D</p>	
<p><b>Recommended Action:</b></p> <p><b>Ratify the FY 2012-13 Department of State Health Services Contract Amendments for Mental Health Services and Outpatient Competency Restoration</b></p>	

DEPARTMENT OF STATE HEALTH SERVICES



Amendment  
To

The Department of State Health Services (DSHS) and TRI-COUNTY MHMR SERVICES (Contractor) agree to amend Program Attachment # 001D (Program Attachment) to Contract # 2012-039597 (Contract) in accordance with this Amendment No. 001E: Mental Health Performance Contract Notebook, effective 12/01/2012.

This Amendment is necessary to: Revise the PCN, Information Items C, D, G, S, and service targets.

Therefore, DSHS and Contractor agree as follows:

1 change at paragraph (2)

PROGRAM ATTACHMENT ~~NO.001D~~ NO.001E

1 change at paragraph (124)

i) Provide the core services available within Texas Resilience and Recovery (TRR)–to individuals through face-to-face encounters or via tele-medicine. This shall be accomplished by the following, listed in order of precedence:

1 change at paragraph (127)

(3) Notifying DSHS ~~within one business day~~ immediately ~~if both~~ neither ~~employing and or~~ contracting with a qualified physician or designee authorized by law to prescribe needed medications is ~~not~~ possible for ~~any period of time fifteen consecutive days~~ during the contract term. ~~Planned efforts~~ This notification ~~shall be documented and submitted include the contractor's plan to DSHS by contractor who shall seek technical assistance from DSHS if this situation persists for 5 consecutive business days within resolve the contract period. unavailability of services.~~ -All efforts shall be continued and documented and the contractor shall provide choice to individuals as outlined in (4) and (5) below until the situation has been remedied:

1 change at paragraph (129)

(5) If the contractor lacks the capacity to meet any of the above requirements, contractor shall identify the nearest available non-local (more than 75 miles from the individual's residence) qualified provider. If the individual indicates the distance to the provider is not a barrier to the individual accessing services, then Contractor shall refer the individual to the available service provider. Contractor shall document the discussion with the individual and the individual's decision regarding traveling to the non-local provider. If the individual identifies that the distance to the non-local qualified provider is a barrier to accessing ~~services~~ services, Contractor shall document a strategy to establish access to the core service.

1 change at paragraph (173)

~~d) — Award subcontracts) Submit required information via a post-procurement report to DSHS within 30 days of completing a procurement described in accordance with applicable laws and 25 TAC Chapter 412, Subchapter B (Contracts Management for the LMHA's approved Local Authorities) and Subchapter P (Provider Network Development). Development Plan. DSHS will disseminate the post-procurement report template through a broadcast message.~~

1 change at paragraph (175)

~~e) — Ensure providers are informed of and in compliance with the applicable terms and conditions of this Program Attachment) Submit an FY 2012 Contract Expenditure Table by developing provider contracts which include the date specified in Information Item S. DSHS will disseminate the Program Attachment requirements. Contract Expenditure Table template through a broadcast message.~~

Deletion of 1 line at paragraph (177)

~~f) — Implement network management practices to promote the effectiveness and stability of the provider network, including a credentialing and re-credentialing process that requires external providers to meet the same professional qualifications as internal providers.~~

10 changes at paragraph (179)

~~g) — Implement f) Award subcontracts in accordance with applicable laws and 25 TAC Chapter 412, Subchapter B (Contracts Management for Local Authorities) and Subchapter P (Provider Network Development).~~

~~(1) Pay external providers the current Medicaid rate for all clients, including clients who are medically indigent. If the LMHA performs provider functions on behalf of the provider, the LMHA may separately charge the provider a cost-based fee of up to 5% of the payment amount. An LMHA may not pay the provider a reduced rate in lieu of charging a separate fee. The LMHA must maintain documentation fully supporting its costs. An LMHA that charges a provider a cost-based fee must maintain documentation of the agreement, including the specific provider functions performed by the LMHA. The documentation must demonstrate that the activities performed by the LMHA are not authority functions supported by another funding source (e.g., Medicaid Administrative Claiming or DSHS funding). Remedies and sanctions as described in Section 19.02 of the General Provisions may be imposed for failure to comply with this term of the Program Attachment.~~

~~(2) Refrain from applying more rigorous standards and requirements to external providers than to the LMHA's own programs and staff. This does not prohibit the LMHA from requiring documentation and reporting necessary to verify compliance with the terms of the contract.~~

~~g) Ensure providers are informed of and in compliance with the applicable terms and conditions of this Program Attachment by developing provider contracts which include the Program Attachment requirements.~~

~~h) Implement network management practices to promote the effectiveness and stability of the provider network, including a credentialing and re-credentialing process that requires external providers to meet the same professional qualifications as internal providers.~~

~~i) Implement -a provider relations process to provide the support and resources necessary for maintaining~~

an available and appropriate provider network that meets DSHS standards, including:

1 change at paragraph (211)

(3) Has a minimum of five ~~years~~ years' -experience in direct care of individuals with a serious mental illness and/or children and youth with serious emotional disturbances, which may include experience in an acute care or crisis setting;

1 change at paragraph (225)

(b) Have a minimum of three ~~years~~ years' -experience in the treatment of individuals with mental illness or chemical dependency; or

1 change at paragraph (227)

(2) A Utilization Reviewer or Utilization Care Manager, who is a Qualified Mental Health Professional Community Services (QMHP-CS), shall have at least three ~~years~~ years' -experience in direct care for adults with serious mental illness or children and youth with serious emotional disturbances, and directly supervised by a qualified utilization manager.

1 change at paragraph (234)

~~(3) — Over(3) — Over- and under-utilization; under-utilization:~~

1 change at paragraph (239)

g) Implement a UM Program using DSHS's approved ~~UM~~ Texas Resilience and Recovery Utilization Management -Guidelines that includes documented and approved processes and procedures for:

1 change at paragraph (261)

(b) Mental Health Rehabilitative and Mental Health Targeted Case Management Services (both Intensive and Routine) - Medicaid recipients who are eligible for full Medicaid benefits shall not be placed on a waiting list for medically necessary Targeted Case Management or Mental Health Rehabilitative Services. Contractor shall make these services available to the individual whenever such services are indicated by the uniform assessment and in accordance with the Texas Resilience and Recovery Utilization Management ~~guidelines.~~ Guidelines. - If the Uniform Assessment process recommends that an individual receive a LOC that includes one or both of these services and a Licensed Practitioner of the Healing Arts (LPHA) determines that the service or services are not medically necessary, the LPHA shall document the reasons that the service is not indicated.

1 change at paragraph (349)

(2) Criteria used to make these determinations are the recommended LOC (LOC-R) of the individual as derived from the UA, the needs of the individual, Texas Resilience and Recovery Utilization Management- ~~(UM)~~ -Guidelines, and the availability of resources. Clients authorized for care by Contractor through a clinical override are eligible for the duration of the authorization.

1 change at paragraph (352)

(1) Reassessment by the provider and reauthorization of services by Contractor determines continued need for services. This activity is completed according to the UA protocols and ~~UM~~ Texas Resilience and Recovery Utilization Management -Guidelines.

1 change at paragraph (378)

(1) Develop a service delivery system in accordance with the most current version of DSHS's UM Texas Resilience and Recovery Utilization Management -Guidelines, Adult TRAG and Fidelity Instruments;

1 change at paragraph (388)

(a) Assertive Community Treatment: Dartmouth Substance Abuse and Mental Health Services Administration (SAMHSA) -Assertive Community Treatment;

3 changes at paragraph (399)

(11) Use the flexible funds that shall be made available by Contractor, in accordance with the UM Texas Resilience and Recovery Utilization Management -Guidelines;

(12) Assertive Community Treatment (ACT) includes Urban ACT and Rural ACT programs serving clients with an LOC-R = 4. The baseline of numbers of individuals who need ACT services for Urban ACT and Rural ACT shall be determined by data reports based on the combined average number of clients with an LOC-R = 4 over the last two quarters of FY2010 and the first two quarters of FY2011. The Urban ACT team serves a client base of 60 or more within a local service area or has a population density of 300 or more persons per square mile in the local service area. The Rural ACT team serves a client base of less than 60 within a local service area. ACT services provided by Contractor shall meet the minimum UM Texas Resilience and Recovery Utilization Management -Guidelines for LOC 4, and shall follow the most current Urban ACT or Rural ACT services Fidelity Instrument, as well as, the rules and guidelines for Urban ACT or Rural ACT;

(13) Contractor shall serve individuals with monies allocated through Crisis Redesign, for engagement, transition, and intensive ongoing services in accordance with UM Texas Resilience and Recovery Utilization Management -Guidelines. CARE Report III shall be completed in accordance with Information Item D and submission timelines as outlined in Information Item S. Performance measures are outlined in Section II. G.; and

3 changes at paragraph (468)

(2) Youth 17 years old and younger must be screened for CMH services. Youth 18 years or older must be screened for Adult Children's -Mental Health-services; and

(3) Youth (CMH) services. Youth -receiving Children's MH Services CMH services -who are approaching their 18<sup>th</sup> birthday and continue to be in need of mental health -services shall either be transferred to Adult MH Mental Health (AMH) -Services on his/her their -18<sup>th</sup> birthday or referred to another community provider, dependent upon the individual's needs. Youth Individuals -reaching 18 years of age who continue to need mental health services may be transferred to Adult MH Services AMH services -without meeting the adult priority population criteria and served for up to one additional year. year. Individuals who are 18 years of age or older and have previously received CMH services must be screened for AMH services using DSHS-approved UA.

(4) For

(3) For purposes of this contract definitions of "child" and "youth" are as follows:

1 change at paragraph (476)

(2) Criteria used to make these determinations are from the recommended LOC (LOC-R) of the individual as derived from the Uniform Assessment (UA), UA, -the needs of the individual, utilization management guidelines Texas Resilience and Recovery Utilization Management Guidelines -and the availability of resources;

1 change at paragraph (481)

(1) Reassessment by the provider and reauthorization of services by Contractor determines continued need for services. This activity is completed according to the UA protocols and Texas Resilience and Recovery Utilization Management-~~UM~~ Guidelines;

1 change at paragraph (506)

(1) Provide services in accordance with the most current version of DSHS' ~~Resiliency~~ Texas Resilience - and-Disease Recovery Utilization -Management-~~UM~~ Guidelines, CA-TRAG, Fidelity Instruments, and Information Item V (for Crisis Services);

1 change at paragraph (516)

i. Aggression Replacement Techniques utilizing the Aggression Replacement Training® curriculum: Beginning September 1<sup>st</sup>, 2012, Aggression Replacement Techniques will be allowable for the delivery of skills training and development in all CMH Levels of Care where skills training and development services are available. Aggression Replacement Techniques shall be used as outlined in the Texas Resilience and Recovery Utilization Management Guidelines. To deliver skills training and development services utilizing Aggression Replacement Techniques the following training requirements must be met:

4 changes at paragraph (520)

- ii. Barkley's Defiant Child and Barkley's Defiant Teen: This protocol shall be used as outlined in the Texas Resilience and Recovery Utilization Management Guidelines.
- iii. Skills Training for Children With Behavior Problems (Bloomquist, 2006): This protocol shall be used as outlined in the Texas Resilience and Recovery Utilization Management Guidelines.
- iv. Nurturing Parenting: Nurturing Parenting is an allowable protocol and shall be used as outlined in the Texas Resilience and Recovery Utilization Management Guidelines. To deliver this protocol, attendance at a 3-day training on Nurturing Parenting by a trainer who has been certified as an Organizational Trainer or National Trainer by Nurturing Parenting Programs® is required.

v. Seeking Safety: Seeking Safety is an allowable protocol and shall be used as outlined in the Texas Resilience and Recovery Utilization Management Guidelines. To deliver this protocol the following training requirements must be met:

1 change at paragraph (527)

vi. Preparing Adolescents for Young Adulthood (PAYA): PAYA is an allowable protocol and shall be used as outlined in the Texas Resilience and Recovery Utilization Management Guidelines. There are no training requirements for the current contracting period.

1 change at paragraph (530)

i. Cognitive Behavioral Therapy (CBT): Providers of CBT must deliver the approved protocols as outlined in the Texas Resilience and Recovery Utilization Management Guidelines;

1 change at paragraph (544)

(9) Set aside for Flexible Funds totaling \$1,500 per child for 10% of those children eligible to receive LOCs-~~2.1~~, 2.2, 2.3, and 2.4. Use of Flexible Funds should occur in accordance with the ~~UM~~ Texas Resilience and

Recovery Utilization Management -Guidelines;

2 changes at paragraph (547)

(b) Ability to perform the duties of a Family Partner as outlined in the Texas Resilience and Recovery Utilization Management Guidelines.

(11) Family Partner services are available in all LOCs, but Contractor shall service a minimum of 15% of children and youth receiving services in LOCs ~~2.1~~, 2.2, 2.3 and 2.4;

1 change at paragraph (551)

(14) Contractor shall serve individuals with monies allocated through Crisis Redesign for engagement, transition, and intensive ongoing services in accordance with ~~UM~~ Texas Resilience and Recovery Utilization Management -Guidelines. CARE Report III shall be completed in accordance with Information Item D and submission timelines as outlined in Information Item S. Performance measures are outlined in Section II. G.; and

2 changes at paragraph (572)

(1) Case management services, which are services or activities for the arrangement, coordination, and monitoring of services to meet the needs of individuals and families. Component services and activities may include individual service plan development, counseling, monitoring, developing, securing, and coordinating services; monitoring and evaluating client progress; and assuring that clients' rights are ~~protected~~; protected. -This service includes Routine Case Management, Intensive Case Management and Family Case Management as defined in Information item G of the Performance Contract.

(2) Education and Training Services, which are those services provided to improve knowledge or daily living skills and to enhance cultural opportunities. Services may ~~include instruction or training in~~, include, -but are not limited to, ~~such instruction or training in~~ such -issues as consumer education, health education, community protection and safety education, literacy education, English as a second language, and General Educational Development (G.E.D.). Component services or activities may ~~include~~ include, but are not limited to, -screening, assessment and testing; individual or group instruction; tutoring; provision of books, supplies and instructional material; counseling; transportation; and referral to community resources. This service includes Skills Training and Development Services as defined in Information Item G of the Performance Contract.

4 changes at paragraph (582)

~~This(5)~~ This -service includes Pharmacological Management as defined in Information Item G of the Performance ~~Contract~~.

~~(5) Services for clients in foster care, which are those services or activities associated with the provision of an alternative family life experience for abused, neglected or dependent children, between birth and the age of majority, or the basis of a court commitment or voluntary placement agreement signed by the parent or guardian. Services may be provided to clients in foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, child care institutions, pre-adoptive homes or supervised independent living situations. Component services or activities may include assessment of the client's needs, case planning and case management to assure that the client receives proper care in the placement, counseling of the client, the client's parents and the foster parents, and referral and assistance in obtaining other necessary support services;~~

~~(6) Prevention and Intervention Services are those services and activities designed to provide~~

~~early identification and timely intervention to support families and prevent or ameliorate the consequences of abuse, neglect, or family violence, or to assist in making arrangements for alternate placements or living arrangements where necessary. Such services may also be provided to prevent the removal of the client from the home. Component services may include assessment and evaluation of the extent of the problem, counseling, developmental and parenting skills training, respite, and service coordination.~~

~~(7)~~ Special Contract Special -services for clients involved or at risk of involvement with criminal activity, which are those services or activities for clients who are, or who may become, involved with the juvenile justice system. Component services or activities are designed to enhance family functioning and modify the client's behavior with the goal of developing socially appropriate behavior and may include counseling, intervention therapy, and residential and medical services if included as an integral but subordinate part of the service. Services may include the following:

1 change at paragraph (588)

~~(8)~~ Other(6) Other -services meeting the requirement of TANF transfer to Title XX as approved by the Department.

1 change at paragraph (608)

a) Target: 1488 (First and second quarter aggregate and a third and fourth quarter aggregate)

1 change at paragraph (702)

a) Target: 225 (first and second quarter aggregate, and third and fourth quarter aggregate)

1 change at paragraph (733)

a) Minimum Target - Children and youth receiving at least the minimum number of hours based on service encounters for those authorized in LOCs 1.1, 1.2, ~~2.1~~, 2.2, 2.3, 2.4 and 4 must meet the following service capacity thresholds:

5 changes at paragraph (736)

(3) LOC ~~2.1~~ 5 hours minimum per month;

~~(4) LOC~~ 2.2 - 3.5 hours minimum per month;

~~(5) LOC~~

~~(4) LOC~~ 2.3 - 3.5 hours minimum per month;

~~(6) LOC~~

~~(5) LOC~~ 2.4 - 3.5 hours minimum per month; and

~~(7) LOC~~

~~(6)~~ LOC 4 - 0.5 hours minimum per month with an LOC-R of 1.1, 1.2, ~~2.1~~, 2.2, 2.3, 2.4 and underserved due to consumer choice.

1 change at paragraph (755)

a) Service Target - 15% of children and youth authorized to receive LOCs ~~2.1~~, 2.2, 2.3, or 2.4 receive Family Partner Services each client month as evidenced by Procedure Code H0038HA.

1 change at paragraph (765)

a) Minimum Target - 10 % of children and youth authorized in LOCs ~~2.1~~, 2.2, 2.3, or 2.4 receive a minimum of 60 minutes of Family Partner services each client month as evidenced by Procedure Code

H0038HA.

2 changes at paragraph (791)

8. TANF transfer to Title ~~XX: Children XX:~~  
Children -served with TANF transfer to Title XX funds.

2 changes at paragraph (879)

Source of Funds: 93.558.667; 93.667; 93.667.000; 93.958; ~~State~~  
93.958.000; State

**Department of State Health Services**

\_\_\_\_\_  
Signature of Authorized Official

Date: \_\_\_\_\_

David L. Lakey, M.D.

Commissioner

1100 WEST 49TH STREET  
AUSTIN, TEXAS 78756

512.458.7375

david.lakey@dshs.state.tx.us

**Contract**

\_\_\_\_\_  
Signature of Authorized Official

Date: \_\_\_\_\_

Name: Evan Roberson

Title: Executive Director

Address: P.O. Box 3067  
Conroe, TX 77305

Phone: 936-521-6119

Email: EvanR@tricityservices.org

DEPARTMENT OF STATE HEALTH SERVICES



Amendment  
To

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The Department of State Health Services (DSHS) and TRI-COUNTY MHMR SERVICES (Contractor) agree to amend Program Attachment # 004A (Program Attachment) to Contract #2012-039597 (Contract) in accordance with this Amendment No. 004B: Mental Health/Outpatient Competency Restoration, effective 12/01/2012.

The purpose of this Amendment is for the: Revision of statement of work.

Therefore, DSHS and Contractor agree as follows:

1 change at paragraph (2)

PROGRAM ATTACHMENT ~~NO.004A~~ NO.004B

1 change at paragraph (26)

Contractor shall ~~implement~~ deliver -an OCR program (Program) in accordance with the following requirements:

1 change at paragraph (28)

1. Meet all of the statutory requirements of Chapter 46B of the Texas Code of Criminal Procedure (TCCP).

1 change at paragraph (30)

2. Comply with all of the specifications of Proposal for Contract Amendment (PCA) 0485.1 issued September 27th, 2011.

1 change at paragraph (32)

3. Provide all of the services specified in Contractor's proposal submitted in response to PCA 0485.1 related to OCR.

1 change at paragraph (34)

4. Serve# 17 in Fiscal year 2013(all admitted within the fiscal year) with mental illness or co-occurring psychiatric and substance use disorders by providing OCR services as measured and documented through the-~~encounter data~~ Encounter Data -and-~~monthly~~ Webcare -reports as defined in Section II of this Program Attachment.

2 changes at paragraph (36)

~~5. By~~ By the end of the second full year of operation, achieve a combined total rate of 55% of all completed clients either ~~restore~~ restored to competency to stand trial and/or sufficiently improved to have their charges ~~dropped~~ dropped as determined by the court

~~5. Maintain an average length of stay per person of no longer than 180 days for all clients admitted during the fiscal year.~~

1 change at paragraph (38)

~~6. Maintain an average length of stay per person of no longer than 180 days for all clients admitted during the Healing Arts, as defined in the Texas Health and Safety Code. The Program Coordinator shall work as a liaison with the local criminal justice system in the fiscal year Contractor's area.~~

1 change at paragraph (40)

~~7. Recruit, train, and maintain qualified staff, including a Program Coordinator, who must be a Licensed Practitioner of eligibility and intake assessment, psychosocial assessment, DSHS Substance Abuse Screening Tool, and Outreach, Screening, Assessment and Referral assessment, if indicated, to individuals referred to the Healing Arts. The Program Coordinator shall work as a liaison with Program. Monitor the local criminal justice system. time it takes for these assessments and screenings to be completed.~~

1 change at paragraph (42)

~~8. For individuals referred to the Program, provide and monitor prompt access to Program eligibility and intake assessments, psychosocial assessment, DSHS Substance Abuse Screening Tool, and Outreach, Screening, Assessment and Referral assessment if indicated. Provide~~ 8. Provide access to substance abuse treatment within 10 days, if the referred individual would otherwise be placed on a waiting list for treatment.

1 change at paragraph (44)

~~9. A9. Conduct a~~ 9. Conduct a risk assessment such as the Historical, Clinical, Risk Management, Violence Risk Assessment Scheme (HCR-20) ~~shall be conducted~~ to determine an individual's appropriateness for outpatient treatment.

1 change at paragraph (46)

10. Complete the Level of Care section of the Texas Recommended Authorization Guideline Assessment while individuals who are determined IST are still incarcerated. ~~The Complete the~~ remainder of the Uniform Assessment ~~shall be completed~~ upon admission to the Program. The Individual Treatment Plan shall address:

1 change at paragraph (55)

11. Provide a documented service for the individual with a member of the OCR staff on the day the individual will be released from jail. Contractor's Program staff shall work with courts and law enforcement personnel to secure daytime release to Contractor and to avoid nighttime releases of incarcerated individuals. Program staff shall coordinate the timely release of the individual to the OCR facility or residence and ~~will~~ shall meet with the individual immediately upon jail or court release regardless of time of release.

1 change at paragraph (57)

12. Maintain written policies and procedures that describe the eligibility for the Program, intake assessment, and treatment planning processes. The policies and procedures shall also address admission of clients referred by other LMHAs. Such policies shall include, without limitation, that Clients who are in close proximity to the ~~Program, Program~~ and who are without a Program in their services area are potentially appropriate for ~~admission. Any admission and any~~ admission requires the consent of the courts with jurisdiction over the client as well as cooperation with the committing LMHA.

1 change at paragraph (59)

13. Update the individualized treatment plan within five working days of an individual's enrollment in the Program to include all ~~issues assessments and screenings~~ listed above in Item 8.

1 change at paragraph (61)

14. Provide individuals in the Program access to clinically appropriate Resiliency and Disease Management Service Package (SP)–3, or SP 4 ~~services with services, complete the~~ authorization completed and provide the first service ~~provided~~ within 24 hours of release from jail or court. Contractor shall also provide individuals in the Program access to a physician, preferably a psychiatrist, no later than seven working days after release from jail or court.

1 change at paragraph (65)

~~16. Provide~~ 16. Provide, -or make provisions engage other educators to provide, -for legal didactic education for all clients following DSHS-approved Competency Restoration curricula based on the individual needs of the client.

1 change at paragraph (67)

17. Provide supported housing, including rental subsidies, for individuals ~~served~~ in the Program who lack adequate housing. Supported housing does not include support for ~~individuals to live in assisted living facilities that are not licensed under Health & Safety Code Chapter 247, as per TAC §412.202(c).~~

1 change at paragraph (71)

19. Maintain and follow written procedures to monitor an individual's restoration to competency and readiness for return to court. Comply with reporting procedures specified in TCCP Article 46.B.079. Coordinate with the court to ~~encourage timely determination of determine~~ an individual's competency unless all parties agree to accept Contractor's report. Written procedures shall also address requests for a court order extending the initial restoration period from the court and forensic re-evaluation in the event that an extension is granted.

1 change at paragraph (73)

~~20. Collaborate with~~ 20. Contact the state hospital and the LMHA Utilization Manager(s) a minimum of once a week to identify IST individuals currently in the hospital on an inpatient commitment and who may be appropriate for transition to the OCR Program. ~~Coordinate with~~ Petition local courts to revise commitment status for those identified individuals and work jointly with all parties to develop a discharge and continuity plan.

1 change at paragraph (75)

21. Provide continuity of care for individuals completing the Program. ~~Discharge planning Contractor -~~

shall create discharge plans for individuals in the Program that ensure, at a minimum, that the following are provided or have been addressed:

1 change at paragraph (82)

22. Notify the Texas Correctional Office on Offenders with Medical or Mental Impairments within 24 hours after discharge of an individual in the Program regardless of reason for discharge.

1 change at paragraph (84)

23. Provide continuity of care for persons who do not complete the Program or who are determined to be incapable of restoration to competency. Contractor shall notify the DSHS Contract Manager, using ~~the~~ Monthly Tracking Report, Outpatient Competency Restoration Admission (screen 358) and Discharge (screen 359) screens in WebCare, to document the reason for non-completion of the Program (e.g., failed to restore, absconded, re-offended or otherwise terminated before completing Program).

1 change at paragraph (90)

Contractor's performance will be measured ~~in part on~~ completion of the ~~achievement~~ activities set forth in this Statement ~~of Work, including without limitation,~~ the following ~~activities and~~ performance measures. Contractor shall perform the following activities and provide documentation to DSHS in the manner and timeframes specified below.

1 change at paragraph (94)

1. In accordance with the timetable and frequency specified in TCCP Article 46B.079 of Chapter 46B and as determined by the court(s) and ~~judge(s), judge(s) who have jurisdiction over individuals in the Program,~~ Contractor shall provide the ~~notice required notices~~ and reports to the court as appropriate.

1 change at paragraph (98)

3. Contractor shall submit ~~attached OCR Monthly Tracking Reports (Form H) electronically to performance.contracts@dshs.state.tx.us <mailto:performance.contracts@mhmr.state.tx.us>, the~~ Outpatient Competency Restoration Admission (screen 358) and Discharge (screen 359) screens in WebCare within 72 hours of any program admission or discharge,

1 change at paragraph (100)

4. Contractor shall submit the attached Quarterly Expenditure Report (Form I) electronically to performance.contracts@dshs.state.tx.us <mailto:performance.contracts@mhmr.state.tx.us>, <mailto:performance.contracts@mhmr.state.tx.us> in accordance with Information Item S.,

1 change at paragraph (102)

~~6- Contractor~~ 5. Contractor shall submit reports in accordance with Information Item S as posted at: <http://www.dshs.state.tx.us/mhcontracts/ContractDocuments.shtm>.

1 change at paragraph (104)

~~7- Contractor~~ 6. Contractor shall submit to DSHS a copy of all written policies and procedures required by this Program Attachment no later than ~~March January -1, 2012, 2013,~~

1 change at paragraph (106)

~~8. Service~~7. Service -Area/county(ies): Liberty, Montgomery, Walker

Deletion of 1 line at paragraph (122)

~~DSHS may adjust funds based on utilization and statewide need.~~

Addition of 4 lines at paragraph (123)

1. DSHS may adjust funds based on utilization and statewide need.

2. Contractor is permitted, without prior DSHS approval, to make budget line item transfers of less than or equal to 25% of the total contract amount among direct cost categories, other than the equipment category, provided that the total budget amount is unchanged.

Addition of 4 lines at paragraph (127)

SECTION VIII. NO CONFLICTS:

This Statement of Work is an attachment to Contract No.2012-039597 -001by and between DSHS and Contractor and is subject to the terms of such Contract. The terms of the Contract shall take precedence over any conflicting terms in this Statement of Work.

<p><b>Agenda Item:</b> Ratify the FY 2012-13 Department of Aging and Disability Services Contract Amendment #3</p> <p><b>Committee:</b> Business</p>	<p><b>Board Meeting Date</b></p> <p>February 28, 2013</p>
<p><b>Background Information:</b></p> <p>The Department of Aging and Disability Services (DADS) has provided a contract amendment to increase General Revenue (GR) and raise our Non-Waiver Served target back to FY 2012 levels. They had previously decreased the GR and target after underestimating the amount of GR that would be required for Service Coordination in FY 2012. The Texas Council successfully negotiated the return of these funds from DADS.</p> <p>DADS requested the contract amendment be submitted back to them by February 22<sup>nd</sup>, so Evan Roberson contacted the Board of Trustees Chair, David Walker, who authorized him to sign the amendment.</p>	
<p><b>Supporting Documentation:</b></p> <p>DADS Amendment Packet #3</p>	
<p><b>Recommended Action:</b></p> <p><b>Ratify the FY 2012-13 Department of Aging and Disability Services Contract Amendment #3</b></p>	

RECEIVED

FEB 22 2013

FORM C  
Contract Amendment Request  
FYs 2012 and 2013 Performance Contract

DADS - LA  
Performance Contracts

LA NAME: Tri-County Services

COMPONENT CODE: 380

DATE: February 19, 2013

Indicate contract elements proposed for amendment: (check all that apply)

☒ Other (please specify)

☐ Report III (submit online in CARE)

Amendment Packet #3

The LA agrees to add the following amended documents dated February 19, 2013, to the FYs 2012 and 2013 Performance Contract:

- Attachment A: *FY 13 LA Adjusted Service Targets*
- Attachment C: *FY 13 LA Allocation Summary*
- Attachment C: *FY 13 LA Payment Schedule*
- Attachment D: *FY 13 LA Required Local Match*

Signature of Authorized  
Representative of LA  
Evan Roberson, Executive Director

Date

Approved by:  
Assistant Commissioner Access & Intake  
Department of Aging and Disability Services

Date

Mail two (2) original signed Amendment Request forms to:

DADS  
Access and Intake, Local Authorities  
Attn: Performance Contract Manager  
Mail Code W354  
P.O. Box 149030  
Austin, TX 78714-9030

Overnight Delivery:  
Mail Code W354  
701 W. 51<sup>st</sup> Street  
Austin, TX 78751

AmdID: 2013-003

**Attachment A**  
**Local Authorities Adjusted Targets**  
**FY 2013**

Comp Code	Community Center	FY 2013 Original Targets	Targets Adjustments	Total FY 2013 Q3 and Q4 Targets
440	Anderson-Cherokee Community Enrichment Services	81	6	87
190	Andrews Center	90	7	97
030	Austin Travis County Integral Center	222	17	239
010	Betty Hardwick Center	58	4	62
051	Alamo Local Authority for IDD	256	20	276
460	Bluebonnet Trails Community Services	214	16	230
485	Border Region Behavioral Health Center	80	6	86
250	MHMR Authority of Brazos Valley	65	5	70
260	Burke Center	57	4	61
490	Camino Real Community Services	65	5	70
060	Center for Life Resources	41	3	44
040	Central Counties Services	98	7	105
070	Central Plains Center	40	3	43
475	Coastal Plains Community Center	97	7	104
160	MHMR Services for the Concho Valley	45	3	48
300	Metrocare SERVICES	616	47	663
400	Denton County MHMR Center	125	10	135
090	Emergence Health Network	122	9	131
110	Gulf Bend Center	27	2	29
100	Gulf Coast Center	135	10	145
280	MHMR Authority of Harris County	793	61	854
220	Heart of Texas Region MHMR Center	106	8	114
230	Helen Farabee Centers	82	6	88
470	Hill Country MHDD Center	140	11	151
480	Lakes Regional MHMR Center	157	12	169
410	LifePath Systems	88	7	95
150	Starcare Speciality Health System	86	7	93
180	Behavioral Health Center of Nueces County	47	4	51
350	Pecan Valley Centers	50	4	54
170	Permian Basin Community Centers	74	6	80
240	Community Healthcore	98	7	105
140	Spindeltop Center	208	16	224
200	MHMR of Tarrant County	508	39	547
430	Texana Center	168	13	181
020	Texas Panhandle Centers	177	13	190
290	Texoma Community Center	56	4	60
380	Tri-County Services	111	9	120
130	Tropical Texas Behavioral Health	145	11	156
450	West Texas Centers	74	6	80
<b>Total</b>		<b>5,702</b>	<b>435</b>	<b>6,137</b>

**Attachment C**  
**Local Authorities Funding**  
**FY 2013 Summary Original Allocation**

Comp #	Community Center	General Revenue	Permanency Planning	CLOIP	Total FY 2013 Original Allocation	Addback Reductions	Total Adjusted FY 2013
440	Anderson-Cherokee Community Enrichment Services	925,830	7,869	-	933,699	70,715	1,004,414
190	Andrews Center	1,135,868	19,371	-	1,155,239	86,757	1,241,996
30	Austin Travis County Integral Care	2,466,694	33,726	322,348	2,822,768	188,406	3,011,174
10	Betty Hardwick Center	587,679	25,165	382,042	994,886	44,887	1,039,773
051	Alamo Local Authority for IDD	3,169,846	74,716	208,531	3,453,093	242,113	3,695,206
460	Bluebonnet Trails Community Services	2,369,258	21,533	-	2,390,791	180,984	2,571,755
485	Border Region Behavioral Health Center	1,352,032	3,632	-	1,355,664	103,268	1,458,932
250	MHMR Authority of Brazos Valley	759,205	11,501	279,368	1,050,074	57,988	1,108,062
260	Burke Center	733,920	23,695	308,817	1,066,432	56,057	1,122,489
490	Camino Real Community Services	1,315,819	-	-	1,315,819	100,502	1,416,321
60	Center for Life Resources	447,573	10,810	-	458,383	34,186	492,569
40	Central Counties Services	1,143,111	18,679	-	1,161,790	87,311	1,249,101
70	Central Plains Center	447,879	2,162	-	450,041	34,209	484,250
475	Coastal Plains Community Center	1,170,475	2,162	-	1,172,637	89,401	1,262,038
240	Community Healthcare	1,142,816	30,181	-	1,172,997	87,288	1,260,285
160	MHMR Services for the Concho Valley	480,259	24,387	211,715	716,361	36,682	753,043
300	Metrocare SERVICES	6,562,157	25,857	-	6,588,014	501,217	7,089,231
400	Denton County MHMR Center	1,199,843	25,857	492,674	1,718,374	91,644	1,810,018
90	Emergence Health Network	1,563,416	10,031	103,470	1,676,917	119,414	1,796,331
110	Gulf Bend Center	312,102	7,869	-	319,971	23,838	343,809
100	Gulf Coast Center	1,666,007	30,872	-	1,696,879	127,249	1,824,128
280	MHMR Authority of Harris County	8,065,631	117,784	-	8,183,415	616,163	8,799,578
220	Heart of Texas Region MHMR Center	1,167,680	20,149	327,123	1,514,952	89,187	1,604,139
230	Helen Farabee Centers	1,012,207	15,825	-	1,028,032	77,312	1,105,344
470	Hill Country MHDD Centers	1,660,553	18,679	-	1,679,232	126,833	1,806,065
480	Lakes Regional MHMR Center	1,826,334	32,343	-	1,858,677	139,495	1,998,172
410	LifePath Systems	1,084,621	11,501	-	1,096,122	82,843	1,178,965
150	Starcare Speciality Health System	912,549	23,003	206,939	1,142,491	69,700	1,212,191
180	Behavioral Health Center of Nueces County	466,087	15,047	269,817	750,951	35,600	786,551
350	Pecan Valley Centers	585,558	20,841	-	606,399	44,725	651,124
170	Permian Basin Community Centers	837,883	11,501	-	849,384	63,997	913,381
140	Spindletop Center	3,008,712	19,371	-	3,028,083	229,805	3,257,888
200	MHMR of Tarrant County	5,689,571	56,729	-	5,746,300	434,569	6,180,869
430	Texana Center	2,255,710	32,343	382,042	2,670,095	172,291	2,842,386
20	Texas Panhandle Centers	2,983,533	17,987	-	3,001,520	227,882	3,229,402
290	Texoma Community Services	676,243	4,324	-	680,567	51,651	732,218
380	Tri-County Services	1,520,847	15,047	-	1,535,894	116,182	1,652,056
130	Tropical Texas Behavioral Health	2,124,577	14,355	59,694	2,198,626	182,275	2,360,901
450	West Texas Centers	901,953	7,869	-	909,822	68,891	978,713
	<b>TOTAL</b>	<b>67,732,038</b>	<b>864,773</b>	<b>3,554,580</b>	<b>72,151,391</b>	<b>5,173,477</b>	<b>77,324,868</b>

**Attachment C**  
**Local Authorities Funding**  
**Quarterly Payments**

#	Community Center	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Local Authorities Allocation
440	Anderson-Cherokee Community Enrichment Services	402,423	280,110	160,941	160,940	1,004,414
190	Andrews Center	497,352	346,572	199,036	199,036	1,241,996
30	Austin Travis County Integral Care	1,204,469	846,830	479,938	479,937	3,011,174
10	Betty Hardwick Center	415,874	298,466	162,717	162,716	1,039,773
051	Alamo Local Authority for IDD	1,476,560	1,035,928	591,359	591,359	3,695,206
460	Bluebonnet Trails Community Services	1,026,315	717,237	414,102	414,101	2,571,755
485	Border Region Behavioral Health Center	583,504	406,699	234,365	234,364	1,458,932
250	Brazos Valley	444,159	315,022	174,441	174,440	1,108,062
260	Burke Center	450,241	319,930	176,159	176,159	1,122,489
490	Camino Real Community Services	567,220	394,746	227,178	227,177	1,418,321
60	Center for Life Resources	196,163	137,515	79,446	79,445	492,569
40	Central Counties Services	501,162	348,537	199,701	199,701	1,249,101
70	Central Plains Center	193,527	135,012	77,856	77,855	484,250
475	Coastal Plains Community Center	504,642	351,791	202,803	202,802	1,262,038
240	Community HealthCore	506,916	351,899	200,735	200,735	1,260,285
160	MHMR Services for the Concho Valley	299,072	214,908	119,532	119,531	763,043
300	Metrocare SERVICES	2,845,066	1,976,404	1,133,881	1,133,880	7,089,231
400	Denton County MHMR Center	722,313	515,512	286,097	286,096	1,810,018
90	Emergency Health Network	719,709	503,075	286,774	286,773	1,796,331
110	Gulf Bend Center	136,106	95,981	55,856	55,856	343,809
100	Gulf Coast Center	728,718	509,064	293,173	293,173	1,824,128
280	MHMR Authority of Harris County	3,521,491	2,455,025	1,411,531	1,411,531	8,799,578
220	Heart of Texas Region MHMR Center	640,860	454,486	254,397	254,396	1,604,139
230	Helen Farabee Centers	441,688	308,410	177,623	177,623	1,105,344
470	Hill Country MHDD Centers	720,143	503,770	291,076	291,076	1,806,065
480	Lakes Regional MHMR Center	797,747	557,603	321,411	321,411	1,998,172
410	LifePath Systems	471,828	328,837	189,150	189,150	1,178,965
150	Starcare Specialty Health System	484,323	342,747	192,561	192,560	1,212,191
180	Behavioral Health Center of Nueces County	314,828	225,285	123,219	123,219	786,551
350	Pecan Valley Centers	260,761	181,920	104,222	104,221	651,124
170	Permian Basin Community Centers	365,249	254,815	146,659	146,658	913,381
140	Spindletop Center	1,303,363	908,425	523,050	523,050	3,257,888
200	MHMR of Tarrant County	2,471,448	1,723,890	992,766	992,765	6,180,869
430	Texana Center	1,133,357	801,029	454,000	454,000	2,842,386
20	Texas Panhandle Centers	1,291,138	900,456	518,904	518,904	3,229,402
290	Texoma Community Center	293,579	204,170	117,235	117,234	732,218
380	Tri-County Services	660,338	460,768	265,475	265,475	1,652,066
130	Tropical Texas Behavioral Health	944,499	659,588	378,407	378,407	2,360,901
450	West Texas Centers	391,797	272,947	156,985	156,984	978,713
	<b>TOTAL</b>	<b>30,929,948</b>	<b>21,645,419</b>	<b>12,374,761</b>	<b>12,374,740</b>	<b>77,324,868</b>
		40.0%	28.0%	16.0%	16.0%	

**Attachment D**  
**FY 2013 Local Authorities Required Local Match**

Comp #	Community Center	Addback Reductions	Required Match %	Additional required Local match
440	Anderson-Cherokee Community Enrichment Services	70,715	7.3%	5,182
190	Andrews Center	86,757	9.0%	7,808
30	Austin Travis County Integral Care	188,406	11.0%	20,725
10	Betty Hardwick Center	44,887	9.0%	4,040
051	Alamo Local Authority for IDD	242,113	9.1%	22,032
460	Bluebonnet Trails Community Services	180,964	9.5%	17,192
485	Border Region Behavioral Health Center	103,268	6.0%	6,196
250	MHMR Authority of Brazos Valley	57,988	8.0%	4,639
260	Burke Center	56,057	8.3%	4,653
490	Camino Real Community Services	100,502	6.9%	6,935
60	Center for Life Resources	34,186	8.9%	3,043
40	Central Counties Services	87,311	9.8%	8,556
70	Central Plains Center	34,209	8.3%	2,839
475	Coastal Plains Community Center	89,401	8.8%	7,867
240	Community Healthcare	87,288	9.4%	8,205
160	MHMR Services for the Concho Valley	36,682	9.3%	3,411
300	Metrocare SERVICES	501,217	11.4%	57,139
400	Denton County MHMR Center	91,644	10.7%	9,806
90	Emergence Health Network	119,414	7.6%	9,075
110	Gulf Bend Center	23,838	9.8%	2,336
100	Gulf Coast Center	127,249	10.6%	13,488
280	MHMR Authority of Harris County	616,163	11.9%	73,323
220	Heart of Texas Region MHMR Center	89,187	8.4%	7,492
230	Helen Farabee Centers	77,312	9.1%	7,035
470	Hill Country MHDD Centers	126,833	9.7%	12,303
480	Lakes Regional MHMR Center	139,495	9.2%	12,834
410	LifePath Systems	82,843	12.8%	10,604
150	Starcare Speciality Health System	69,700	9.0%	6,273
180	Behavioral Health Center of Nueces County	35,600	9.5%	3,382
350	Pecan Valley Centers	44,725	9.2%	4,115
170	Permian Basin Community Centers	63,997	11.1%	7,104
140	Splindletop Center	229,805	9.8%	22,521
200	MHMR of Tarrant County	434,569	10.2%	44,326
430	Texana Center	172,291	11.3%	19,469
20	Texas Panhandle Centers	227,882	9.5%	21,649
290	Texoma Community Services	51,651	8.8%	4,545
380	Tri-County Services	116,162	11.1%	12,894
130	Tropical Texas Behavioral Health	162,275	5.7%	9,250
450	West Texas Centers	68,891	8.4%	5,787
	<b>TOTAL</b>	<b>5,173,477</b>		<b>510,053</b>

<b>Agenda Item:</b> 401(a) Retirement Plan Review  <b>Committee:</b> Business	<b>Board Meeting Date</b>  February 28, 2013
<b>Background Information:</b>  A representative from ISC Group will present an update of the 401(a) Retirement Plan account activity for FY 2012 and will provide a forecast for the future.	
<b>Supporting Documentation:</b>  Information to be Distributed by an ISC Representative at the Board Meeting	
<b>Recommended Action:</b>  <b>Action as Appropriate or Needed</b>	

<b>Agenda Item:</b> Board of Trustees' Unit Financial Statements for January 2013  <b>Committee:</b> Business	<b>Board Meeting Date</b>  February 28, 2013
<b>Background Information:</b>  None	
<b>Supporting Documentation:</b>  Board of Trustees' Unit Financial Statements for January 2013	
<b>Recommended Action:</b>  <b>For Information Only</b>	

# Unit Financial Statement

FY 2013

	January 13 Actuals	January 13 Budgeted	Variance	YTD Actual	YTD Budget	Variance	Percent	Budget
<b>Revenues</b>								
80103998 Allocated Revenue	\$ 2,699.00	\$ 2,699.00	\$ -	\$ 13,495.00	\$ 13,495.00	\$ -	100.00%	\$ 32,395.00
<b>Total Revenue</b>	\$ 2,699.00	\$ 2,699.00	\$ -	\$ 13,495.00	\$ 13,495.00	\$ -	100.00%	\$ 32,395.00
<b>Expenses</b>								
80105030 Application Fees	\$ -	\$ 1.00	\$ (1.00)	\$ -	\$ 8.00	\$ (8.00)	0.00%	\$ 15.00
80105199 Consultant - Other	\$ -	\$ -	\$ -	\$ 7.11	\$ -	\$ 7.11	0.00%	\$ -
80105210 Dues & Memberships	\$ -	\$ -	\$ -	\$ 10.00	\$ -	\$ 10.00	0.00%	\$ -
80105275 Food Items	\$ 263.63	\$ 183.00	\$ 80.63	\$ 766.69	\$ 919.00	\$ (152.31)	83.43%	\$ 2,200.00
80105320 Insurance-Worker Compensation	\$ 10.42	\$ 19.00	\$ (8.58)	\$ 45.47	\$ 97.00	\$ (51.53)	46.88%	\$ 230.00
80105388 Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 7,500.00	\$ 7,500.00	\$ -	100.00%	\$ 18,000.00
80105394 License Fees	\$ -	\$ 12.00	\$ (12.00)	\$ -	\$ 60.00	\$ (60.00)	0.00%	\$ 150.00
80105715 Supplies-Office	\$ -	\$ -	\$ -	\$ 12.00	\$ -	\$ 12.00	0.00%	\$ -
80105750 Training	\$ -	\$ 250.00	\$ (250.00)	\$ -	\$ 1,250.00	\$ (1,250.00)	0.00%	\$ 3,000.00
80105755 Travel - Local	\$ 77.77	\$ 100.00	\$ (22.23)	\$ 388.85	\$ 500.00	\$ (111.15)	77.77%	\$ 1,200.00
80105757 Travel - Non-local Mileage/Air	\$ 321.88	\$ 167.00	\$ 154.88	\$ 470.20	\$ 831.00	\$ (360.80)	56.58%	\$ 2,000.00
80105758 Travel - Non-local Hotel	\$ 544.80	\$ 383.00	\$ 161.80	\$ 643.80	\$ 1,919.00	\$ (1,275.20)	33.55%	\$ 4,600.00
80105759 Travel - Meals	\$ 41.00	\$ 83.00	\$ (42.00)	\$ 70.62	\$ 419.00	\$ (348.38)	16.85%	\$ 1,000.00
<b>Total Expenses</b>	\$ 2,759.50	\$ 2,698.00	\$ 61.50	\$ 9,914.74	\$ 13,503.00	\$ (3,588.26)	73.43%	\$ 32,395.00
<b>Total Revenue minus Expenses</b>	\$ (60.50)	\$ 1.00	\$ (61.50)	\$ 3,580.26	\$ (8.00)	\$ 3,588.26	26.57%	\$ -

# UPCOMING MEETINGS

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## **March 28<sup>th</sup>, 2013 – Board Meeting**

- Approve Minutes from February 28, 2013 Board Meeting
- Community Resources Report for February 2013
- Consumer Services Report for February 2013
- Program Updates for February 2013
- Year-to-Date FY 2013 Goals & Objectives Progress Report
- 2<sup>nd</sup> Quarter FY 2013 Corporate Compliance & Quality Management Report
- 3<sup>rd</sup> Quarter FY 2013 Corporate Compliance Training
- Program Presentation – Rusk State Hospital Diversion Contract
- Personnel Report for February 2013
- Approve February 2013 Financial Statements
- Approve FY 2013 Budget Revision
- 2<sup>nd</sup> Quarter FY 2013 Investment Report
- Board of Trustees' Unit Financial Statement for February 2013
- Montgomery Supported Housing, Inc. Update
- Cleveland Supported Housing, Inc. Update
- Other Business Committee Issues

## **April 25<sup>th</sup>, 2013 – Board Meeting**

- Approve Minutes from March 28, 2013 Board Meeting
- Community Resources Report for March 2013
- Consumer Services Report for March 2013
- Program Updates for March 2013
- Annual Board & Management Team Training
- Personnel Report for March 2013
- Texas Council Quarterly Meeting Update
- Approve March 2013 Financial Statements
- Board of Trustees' Unit Financial Statement for March 2013
- Other Business Committee Issues