

Tri-County Behavioral Healthcare Board of Trustees Meeting

February 22, 2018



Notice is hereby given that a regular meeting of the Board of Trustees of Tri-County Behavioral Healthcare will be held on Thursday, February 22, 2018. The Business Committee will convene at 9:30 a.m., the Program Committee will convene at 9:30 a.m. and the Board meeting will convene at 10:00 a.m. at 233 Sgt. Ed Holcomb Blvd. S., Conroe, Texas. The public is invited to attend and offer comments to the Board of Trustees between 10:00 a.m. and 10:05 a.m.

AGENDA

- I. **Organizational Items**
 - A. Chair Calls Meeting to Order
 - B. Public Comment
 - C. Quorum
 - D. Review & Act on Requests for Excused Absence
- II. **Program Presentation - Longevity Recognition Presentations**
- III. **Program Presentation - Crisis Counseling Program Presentation-Hurricane Harvey**
- IV. **Approve Minutes - January 25, 2018**
- V. **Executive Director's Report - Evan Roberson**
 - A. City of Conroe Transportation Meeting
 - B. Property Updates
- VI. **Chief Financial Officer's Report - Millie McDuffey**
 - A. Budget Revision
 - B. Cost Accounting Methodology (CAM)
 - C. FY 2017 HCS, TxHmL, ICF and MEI Cost Reports
 - D. CFO Consortium
 - E. FY 2017 Audit Management Response
- VII. **Program Committee**
 - Information Items
 - A. Community Resources Report.....Pages 9-12
 - B. Consumer Services Report for January 2018.....Pages 13-14
 - C. Program Updates.....Pages 15-19
- VIII. **Executive Committee**
 - Action Items
 - A. Approve Changes to Board PoliciesPages 20-29
 - Information Items
 - B. Personnel Report for January 2018.....Pages 30-32
 - C. Texas Council Risk Management Fund Claims Summary January 2018.....Pages 33-34
- IX. **Business Committee**
 - Action Items
 - A. Approve January 2018 Financial Statements.....Pages 35-48
 - B. Ratify the Immediate Services Program Grant Contract (ISP) - FEMA.....Page 49

Information Items

- C. 401(a) Retirement Plan Account Review *Page 50*
D. Board of Trustees Unit Financial Statements for January 2018 *Pages 51-52*

- X. **Executive Session in compliance with Texas Government Code Section 551.071, Consultation with Attorney**

Posted By:

Ava Green
Executive Assistant

Tri-County Behavioral Healthcare

P.O. Box 3067
Conroe, TX 77305

BOARD OF TRUSTEES MEETING

January 25, 2018

Board Members Present:

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

Board Members Absent:

Janet Qureshi
Jacob Paschal

Tri-County Staff Present:

Evan Roberson, Executive Director
Kathy Foster, Director of IDD Provider Services
Tanya Bryant, Director of Quality Management and Support
Kelly Shropshire, Director of IDD Authority Services
Kenneth Barfield, Director of Management Info Systems
Breanna Robertson, Director of Crisis Services
Tabatha Abbott, Cost Accountant
Catherine Prestigiovanni, Director of Strategic Development
Ava Green, Executive Assistant
Mary Lou Flynn-Dupart, Legal Counsel

Call to Order: Board Chair, Patti Atkins, called the meeting to order at 10:03 a.m. at 233 Sgt. Ed Holcomb Blvd. S., Conroe, TX.

Public Comment: There was no public comment.

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

Resolution #01-18-01

Motion Made By: Morris Johnson

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

Resolved:

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

Program Presentations:

From the Heart Presentation

Special Recognition – Retirement for Lessie Frank

Patti Atkins, Board Chair, suspended the Agenda at 10:17 a.m. to move to Business Committee Action Item IX-C, Approve the FY 2017 Independent Financial Audit. Hannah Nelson with Scott, Singleton, Fincher & Company PC presented the results of the audit.

Resolution #01-18-02

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the FY 2017 Independent Financial Audit.

Resolution #01-18-03

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the minutes of the November 30, 2017 meeting of the Board of Trustees.

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 #01-18-04

Motion Made By: Sharon Walker

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

Resolved:

That the Board approve the appointment of Jae Kim as a new IDD Planning Network Advisory Committee Member, for the remainder of a two year term expiring August 31, 2020.

The Community Resources Report was reviewed for information purposes only.

The Consumer Services Report for November and December 2017 was reviewed for information purposes only.

The Program Updates Report was reviewed for information purposes only.

The 1st quarter FY 2018 Goals and Objectives Progress Report was reviewed for information purposes only.

The 1st quarter FY 2018 Corporate Compliance and Quality Management Report were reviewed for information purposes only.

The 2nd quarter FY 2018 Corporate Compliance Training Report was reviewed for information purposes only.

EXECUTIVE COMMITTEE:

Resolution #01-18-05

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the deletion of Board Policies C.2, C.19, D.14 and D.15, as well as revisions to Board Policies D.7 and D.16. That the Board also approve New Policies C.33 and C.34.

The Personnel Report for November and December 2017 was reviewed for information purposes only.

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

The Texas Council Quarterly Board Meeting update was presented for information purposes only.

BUSINESS COMMITTEE:

Resolution #01-18-06

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the November 2017 Financial Statements.

Resolution #01-18-07

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the December 2017 Financial Statements.

Resolution #01-18-08

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the appointment of Ms. Christine Shippey to serve on the Cleveland Supported Housing, Inc. Board for a term which expires January 1, 2020.

Resolution #01-18-09

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve Ms. Constance Heiland to serve on the Independence Communities, Inc. Board for a term which expires on January 1, 2019 and also appoint Mr. Karl Davidson to serve on the Board for a term which expires January 1, 2020.

Resolution #01-18-10

Motion Made By: Morris Johnson

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

Resolved:

That the Board appoint Mr. Lynn Scott to serve on the Tri-County Consumer Foundation Board for a term which expires on August 31, 2018 and appoint Ms. Stacey Jata to serve on the Board for a term which expires August 31, 2019.

Resolution #01-18-11

Motion Made By: Morris Johnson

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

Resolved:

That the Board approve the Lease Renewal for 300/302 Campbell Street, Cleveland, TX and authorize Executive Director to execute all necessary documents.

The 1st Quarter FY 2018 Investment Report was reviewed for information purposes only.

The Board of Trustees Unit Financial Statements for November and December 2017 were reviewed for information purposes only.

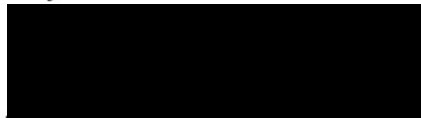
The HUD 811 Updates for Montgomery, Cleveland and Independence Communities were reviewed for information purposes only.

The Foundation Board Update was reviewed for information purposes only.

There was no need for Executive Session.

The regular meeting of the Board of Trustees adjourned at 11:53 a.m.

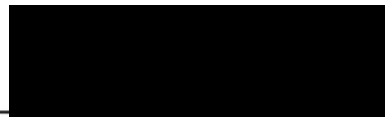
Adjournment:



Patti Atkins
Chair

Date

Attest:



Gail Page
Secretary

Date



Executive Director's Report

February 22, 2018

Announcements

- Our next regularly scheduled Board meeting will be March 22, 2018.
- The IDD Local Authority Audit has been scheduled for March 26-30, 2018. In the audit, HHSC reviews the Local Intellectual and Developmental Disability Authority (LIDDA) oversight activities associated with our performance contract. These LIDDA responsibilities include: Service Coordination for IDD consumers, Continuity of Care for IDD consumers, PreAdmission and Resident Review (PASRR), Waiver enrollment, the Planning Network Advisory Committee, local planning, risk data and quality management activities.
- Our Local Provider Network Development process is currently underway. LPND came out of 'Provider of Last Resort' language which states that the persons we serve should have a choice of providers. Every two years, we create a LPND plan and if no organization expresses interest in our services we are done. However, in this cycle, Baptist Hospital out of Beaumont has expressed interest in providing Full Level of Care (FLOC) services. If Baptist continues to express interest, we will need to go through a full Request for Application for Proposal (RFA/RFP). We have never had an organization submit an application in response to our RFA or RFP.
- If you read my February newsletter article, you will know that I have committed to taking Tri-County through the Trauma Informed Organization Evidence-based practice training. Trauma-Informed Organizations assess, develop and implement trauma-informed practices, policies and procedures in an organization. They learn what they need to stop doing, do more of, and what they need to start doing, both for those they serve and their employees.

According to research at least 90% of persons with Serious Mental Illness have experienced significant trauma in their lives. We know that Trauma is a significant driver of mental health crisis. We will develop a team to lead the Center through implementation of this evidence-based practice.

- Staff and I have learned we received full funding for our Senate Bill 292 application for an East Montgomery Crisis Expansion Center and our House Bill 13 application for

additional Substance Use Disorder treatment. In addition, we received 90% of the funds we requested for Psychiatric Bedday purchases. All total, the new funding will be just over \$850,000. In addition, the Montgomery County Public Health District will match \$156,000 in FY 2018 and \$375,000 in FY 2019 for the East County Crisis Center.

Conroe Transportation Meeting

Amy Foerster and I had a meeting with the City of Conroe Transportation manager and the City of Conroe's Transportation consultants, the Goodman Corporation, earlier this month. In the meeting we provided the City of Conroe with information about the location of our Conroe area consumers by census tract and some other information that they needed to evaluate the need for an additional bus line at our new building. We have almost 1500 current clients (IDD, MH Adult and Child) that are in the Conroe area census tracts. We currently have a survey out for our clients to complete regarding their interest in the bus service.

If you are willing, I would encourage each of you to make contact with the City of Conroe regarding the need for a bus stop at 233 Sgt. Ed Holcomb Blvd., S. in Conroe. The contact information is below:

Mayor Toby Powell, 936.522.3010

City Manager Paul Virgadamo, 936.522.3001

Shawn Johnson-City of Conroe Transportation Manager 936.522.3526

Property Updates

As you know, we have a signed contract on lots 9-13 behind our property for \$40,000. I have visited with all three County judges and none of them had any concerns about the property purchase. The size of the property changed slightly from .85 acres to .87 acres and therefore I will have each of you sign a new conflict of interest disclosure today. We are awaiting the Phase I Environmental Assessment on the property and then we will be able to submit the packet of information to HHSC to notify them of our intent to purchase the lot. We have to wait 30 days after notification to sign the contract on the property.

We are still awaiting signature on the contract for lots 16 & 17 by the heirs of the original property owner. This process has taken a while to complete and we are currently having trouble locating two heirs that would need to sign. Mike indicates that we may have to wait until this goes to tax sale. We will keep you posted.

After completing the purchase for the additional lots, we will submit a request for variance for the tree survey on the 233 Sgt. Ed Holcomb property.

CHIEF FINANCIAL OFFICER'S REPORT

February 22, 2018

Budget Revision – As we have reported the last couple of months, we are still planning the first budget revision to come to the Board for approval in March or April. The date keeps moving back due to the unknown details about some of the new money we received since the beginning of the fiscal year. This revision will include a contract revision on the mental health services contract, HB 13 and SB 292 funding and additional 1115 Waiver funds. We will also reflect additional programs such as the Hurricane Harvey FEMA contracts.

Cost Accounting Methodology (CAM) – We are in the final stages of completing the CAM report. The preliminary CAM was submitted at the end of January to HHSC. Since that time, we have had review meetings with the CAM team to determine areas of concern. This is a big process and takes many sets of eyes to determine where we see inconsistencies in some of the service and payroll data. We are still fine tuning some of the numbers before the final submittal. The requirements have not changed over the last few years and we are only required to submit the CAM for mental health services. The due date for the final report is due on February 27, 2018.

FY 2017 HCS, TxHmL, ICF and MEI Cost Reports – We are also working on the HCS, Texas Home Living, ICF and MEI cost reports for FY 2017. These are due in the spring of each year. This year will be the last cost report for the ICF program for Tri-County. We are currently on Vendor hold since the contracts were sold. Due to the hold, the month of August 2017 will not be paid to Tri-County until the cost reports are submitted and also until HHSC is able to audit the Client Trust Accounts that were held by Educare.

CFO Consortium – The CFO meeting is going on today and tomorrow. These are the topics that were on the agenda:

- 1115 Waiver Discussion
- Revenue Cycle Management
- Future of the 1115 in relation to CCBHC
- Overview of CCBHC Certification
- HHSC Cost Reports and CAM
- Contracts and Fiscal Imperative Updates
- Municipal Capital Markets Group – Capital Financing
- Public Funds Investment Training

FY 2017 Audit Management Response – Last month, Hannah Nelson from Scott, Singleton, Fincher and Company, P.C. presented the FY 2017 Audited Financial statements to the Board of Trustees. With the audit, she presented a Management Letter that listed the following items to be considered for change. Here is the Management's Response to the items listed:

1. **Allowance for Doubtful Accounts** – During their review of accounts receivable and the related allowance for doubtful accounts, we noted that the allowance for doubtful accounts has remained at \$60,000 for the past three years. Over the last four years, the accounts receivable balances have been increasing. We recommend the Center establish a process for evaluating the adequacy of the allowance for bad debts based on historical collection percentages by payment source. The allowance for doubtful accounts should be adjusted periodically based on this analysis.

Management Response – For many years now, Tri-County has had a process where the Reimbursement Manager and the CFO review the billing data to determine the collectability of all payor sources based on historical payments and outstanding accounts receivable amounts. Since this area continues to be a concern, we will discuss in detail our recommendation with the Executive Director on if this amount should be changed based on current trends.

Agenda Item: Community Resources Report Committee: Program	Board Meeting Date: February 22, 2018
Background Information: None	
Supporting Documentation: Community Resources Report	
Recommended Action: For Information Only	

Community Resources Report

January 26, 2018 – February 22, 2018

Volunteer Hours:

Location	January
Conroe	150
Cleveland	0
Liberty	13.5
Huntsville	18
Total	181.5

COMMUNITY ACTIVITIES:

1/26/18	Special Needs Offender Program Meeting – Conroe District Parole	Conroe
1/26/18	E3 Steering Committee Meeting	Conroe
1/26/18	Employment Workshop Collaborative Planning Meeting	Conroe
1/27/18	Family to Family Annual Conference and Resource Fair	Conroe
1/29/18	City of Conroe Fire Department Promotion Ceremony	Conroe
1/29/18	Practice and Process Meeting for Opioid Use – Montgomery County Hospital District	Conroe
1/30/18	Job Fair Lone Star Convention Center	Conroe
1/30/18	MCCARES Community Meeting	Conroe
1/30/18	Conroe ISD Mentor Luncheon	Conroe
1/30/18	Montgomery County Community Resource Coordination Group	Conroe
1/31/18	Aging Veterans Seminar Planning Meeting	Cleveland
1/31/18	Collaborative meeting with Armatus	Conroe
1/31/18	Conroe Noon Lions Club Luncheon	Conroe
2/1/18	Veterans Affairs Advisory Board Meeting	Huntsville
2/1/18	Montgomery County Mental Health Court	Conroe
2/1/18	Cleveland Chamber of Commerce Luncheon	Cleveland
2/1/18	Leadership Montgomery County – Public Safety Day	Conroe
2/1/18	New Caney DRC Meeting	Cleveland
2/1/18	Homeless Coalition Meeting	Conroe
2/1/18	Special Needs Offender Program Meeting – Conroe District Parole	Conroe
2/2/18	Veteran Quarterly Mentor Meeting and Luncheon	Conroe
2/2/18	The Vet Center Group	Conroe
2/2/18	Career Fair – Rice University	Houston
2/2/18	United Way of Greater Houston Year End Report Meeting	The Woodlands
2/5/18	Montgomery County Homeless Coalition Board Meeting	Conroe
2/6/18	Conroe ISD Mentor Luncheon	Conroe
2/6/18	Candidate Forum Networking Luncheon	Conroe
2/7/18	American Legion Executive Board Meeting	Conroe
2/7/18	Veterans of Foreign Wars Meeting	Conroe
2/7/18	The Woodlands Chamber of Commerce Community Relations Team	The Woodlands

2/7/18	United Way Executive Directors Training	Houston
2/7/18	Conroe Noon Lions Club Luncheon	Conroe
2/8/18	Huntsville Chamber Commerce Breakfast	Huntsville
2/9/18	Substance Abuse Program Presentation – Montgomery County Drug Court	Conroe
2/9/18	Liberty Chamber of Commerce Luncheon	Dayton
2/9/18	Aging Veterans Seminar	Cleveland
2/13/18	Montgomery County Child Fatality Review Team	Conroe
2/13/18	American Legion Meeting	Conroe
2/13/18	Conroe ISD Mentor Luncheon	Conroe
2/13/18	E3 Steering Committee Meeting	The Woodlands
2/14/18	Veterans Treatment Court	Conroe
2/14/18	Conroe Noon Lions Club Luncheon	Conroe
2/14/18	Liberty County Community Resource Coordination Group	Liberty
2/14/18	Liberty County Juvenile Probation Office – CCP Meeting	Liberty
2/15/18	Huntsville Veterans Affairs Advisory Board	Huntsville
2/15/18	Homeless Coalition Meeting	Conroe
2/16/18	Vet Center Group	Conroe
2/16/18	YMHFA Training at Sam Houston State University	Walker
2/17/18	YMHFA Training at Sam Houston State University	Walker
2/17/18	Out of the Darkness Suicide Prevention Community Walk	The Woodlands
2/19/18	MCSO Citizens Academy Presentation	Conroe
2/19/18	Liberty LTR Community Support Meeting for Hurricane Harvey	Liberty
2/19/18	Spiritual Care Network Meeting	The Woodlands
2/20/18	Veterans Taskforce Meeting	Conroe
2/20/18	North Houston Networking Group	The Woodlands
2/20/18	Career Fair University of Houston	Houston
2/20/18	Montgomery County Community Resource Coordination Group	Conroe
2/20/18	University of Houston Job Fair	Houston
2/20/18	Conroe ISD Mentor Luncheon	Conroe
2/21/18	TexVet 3 rd Annual Mental Health Symposium	Austin
2/21/18	College Fair Stephen F. Austin	Nacogdoches
2/21/18	Conroe Noon Lions Club Luncheon	Conroe

UPCOMING ACTIVITIES:

2/23/18	Outpatient Competency Restoration Meeting with Judges	Conroe
2/27/18	E3 Steering Committee Meeting	The Woodlands
2/27/18	Conroe ISD Mentor Luncheon	Conroe
2/28/18	Conroe Noon Lions Luncheon	Conroe
3/1/18	Leadership Montgomery County – Healthcare Training	The Woodlands
3/1/18	CISD Transition Fair – College Park High School	The Woodlands
3/1/18	Cleveland Chamber of Commerce Luncheon	Cleveland
3/3/18	In the Belly of the Whale Conference – The Woodlands First Baptist Church	The Woodlands
3/5/18	Montgomery County Homeless Coalition Board Meeting	Conroe
3/6/18	E3 Steering Committee Meeting	The Woodlands
3/6/18	Conroe ISD Mentor Luncheon	Conroe
3/7/18	Conroe Noon Lions Club Luncheon	Conroe
3/7/18	The Woodlands Chamber of Commerce Community Relations Team	The Woodlands
3/8/18	Huntsville Chamber of Commerce Breakfast	Huntsville
3/13/18	Conroe ISD Mentor Luncheon	Conroe
3/14/18	Conroe Noon Lions Club Luncheon	Conroe
3/14/18	Liberty County Community Resource Coordination Group	Liberty
3/15/18	Homeless Coalition Meeting	Conroe
3/20/18	Montgomery County Community Resource Coordination Group	Conroe
3/20/18	Conroe ISD Mentor Luncheon	Conroe
3/21/18	Liberty Chamber of Commerce Luncheon	Liberty
3/22/18	Homeless Information Management System Training – PATH Program	Houston

Agenda Item: Consumer Services Report for January 2018 Committee: Program	Board Meeting Date: February 22, 2018
Background Information: None	
Supporting Documentation: Consumer Services Report for January 2018	
Recommended Action: For Information Only	

Consumer Services Report

January 2018

Consumer Services	Montgomery County	Cleveland	Liberty	Walker County	Total
Crisis Services, MH Adults/Children					
Persons Screened, Intakes, Other Crisis Services	553	40	33	52	678
Crisis and Transitional Services (LOC 0, LOC 5)	33	0	0	1	34
Psychiatric Emergency Treatment Center (PETC) Served	62	4	2	4	72
Psychiatric Emergency Treatment Center (PETC) Bed Days	201	10	6	10	227
Contract Hospital Admissions	5	0	0	1	6
Diversion Admits	14	0	0	1	15
Total State Hospital Admissions	0	0	0	0	0
Routine Services, MH Adults/Children					
Adult Service Packages (LOC 1m,1s,2,3,4)	1272	149	108	98	1627
Adult Medication Services	888	91	59	98	1136
Child Service Packages (LOC 1-4 and YC)	553	49	21	68	691
Child Medication Services	278	18	6	22	324
TCOOMMI (Adult Only)	127	17	23	5	172
Adult Jail Diversions	3	0	0	0	3
Persons Served by Program, IDD					
Number of New Enrollments for IDD Services	1	0	0	0	1
Service Coordination	629	35	46	65	775
Persons Enrolled in Programs, IDD					
Center Waiver Services (HCS, Supervised Living)	28	5	12	19	64
Substance Abuse Services					
Children and Youth Prevention Services	65	26	20	0	111
Youth Substance Abuse Treatment Services/COPSD	10	0	0	0	10
Adult Substance Abuse Treatment Services/COPSD	23	0	0	0	23
Waiting/Interest Lists as of Month End					
Adult Mental Health Waiting List	6	0	0	0	6
Home and Community Based Services Interest List	1566	127	131	146	1970
January Served by County					
Adult Mental Health Services	1625	175	121	193	2114
Child Mental Health Services	648	56	27	71	802
Intellectual and Developmental Disabilities Services	634	46	53	70	803
Total Served by County	2907	277	201	334	3719
December Served by County					
Adult Mental Health Services	1503	167	117	164	1951
Child Mental Health Services	617	49	30	69	765
Intellectual and Developmental Disabilities Services	631	45	51	69	796
Total Served by County	2751	261	198	302	3512
November Served by County					
Adult Mental Health Services	1651	168	111	171	2101
Child Mental Health Services	665	51	29	63	808
Intellectual and Developmental Disabilities Services	622	46	51	67	786
Total Served by County	2938	265	191	301	3695

Agenda Item: Program Updates Committee: Program	Board Meeting Date: February 22, 2018
Background Information: None	
Supporting Documentation: Program Updates	
Recommended Action: For Information Only	

Program Updates

January 26, 2018 – February 22, 2018

Crisis Services

1. Dr. Chen, the primary contractor that is used for Tri-County funded clients at Cypress Creek Hospital, announced his resignation effective 2/28. As a result, we are working closely with hospital administration to get new Cypress Creek prescribers credentialed with Tri-County.
2. The Director of Crisis Services attended the second Project Assisting Victims Escape and Resist Trafficking (Project AVERT) meeting. Ways to identify, assess, and treat eligible individuals for this program were discussed. All participants were encouraged to attend a Child Sex Exploitation Identification Tool Training (CSE-IT) scheduled for the end of February.

MH Adult Services

1. The Rural Clinic Administrator reports that all clinics are fully staffed. We have also hired a new nurse starting in February, who is expected to assume nursing responsibilities in Cleveland and Liberty clinics.
2. We have consistently been able to offer intake evaluations either in the same day or within the same week for all clients who present through the walk-in clinic in Conroe.
3. The Assertive Community Treatment Team (ACT), our highest level of outpatient care services, is fully staffed again. In addition, several other positions in Conroe Adult Outpatient, such as LOC1 Case Coordinator, and Project for Assistance in the Transition from Homelessness (PATH) caseworker have been hired and are being trained. The goal is to have all programs fully staffed by the end of February.
4. Program Manuals for each level of care are being developed. We anticipate that the use of these manuals will improve overall staff competency and will also be utilized as an ongoing tool for training and reference.
5. We will be experimenting with a walk-in clinic in Conroe on Friday afternoon for clients that have missed their appointment and need refills.
6. Referrals to our newly hired Integrated Healthcare physician are increasing as we rebuild the caseload.

MH Child Services

1. Child and Youth continues to meet contracted targets despite increasing population and recent challenges in recruiting quality staff.
2. We are in the planning stages for holding rehab groups during Spring Break to keep kids busy and engaged during the break.
3. Our wrap-around caseloads in Montgomery County are full due to more children presenting with complex issues and needs.

Criminal Justice Services

1. The Jail Services Liaison assessed 45 individuals and coordinated the treatment of 107 others in the Montgomery County Jail in January.
2. The Jail Diversion program diverted 1 individual in January making a total of 5 diversions for FY 18.

Substance Abuse Services

1. The Adult Substance Abuse program is working to establish new processes to encourage both programmatic growth and adherence to United Way performance measures. In addition, with the approval for the House Bill 13 grant, the program is working on developing a treatment model that promotes greater clinical outcomes.
2. The need for Youth Substance Abuse Treatment in our area continues to be high as evidenced by a steady flow of referrals, especially from Montgomery County Juvenile Probation.
3. We are diligently implementing our new assessment tool for collecting outcome data for the United Way Grant Funding.
4. Our search continues for a Youth Substance Abuse Program Manager that possesses at least an Associate Prevention Specialist Certification, but despite having this vacant position, our prevention specialists are well on target to meet all measures within the 10% range as required by this contract.
5. The requests for prevention presentations and groups are high in our catchment area.

IDD Services

1. Authority and Provider staff met to address problems that are anticipated as a result of implementing the new PASRR Specialized Services form and directive to provide each service the consumer chooses. This presents a challenge in the following areas:
 - a. We do not have a Day Habilitation site in the Conroe area or provider willing to accept the complex needs of individuals who currently reside in nursing facilities.
 - b. The majority of these individuals require wheelchair vehicles to transport them and these vehicles are not readily available.
 - c. Those with high medical needs require delegation of medications and needs delegation by the nursing facility Registered Nurse to the Day Habilitation staff. We have found the RN's are frequently unwilling to delegate to staff at another organization.
2. Authority staff attended the Mental Health First Aid training. This training will provide information and tools to work with our more complex individuals who have a co-occurring mental illness.
3. Authority staff has not received the HHSC contract for the Autism program. Due to the HHSC transformation, contracting processes are often protracted.

Support Services

1. Quality Management:

- a. Staff organized, reviewed and submitted 19 charts to the Office of the Inspector General (OIG), per their request, on January 29, 2017. The request included patient records, prior authorizations, original claims submitted to the Managed Care Organization for adjudication, and remittance report with explanation of benefits documenting amount paid. Additionally they requested a copy of the executed Health and Human Services Commission Provider Agreement and Amendments, and Provider enrollment and Re-Enrollment packets for the past 5 years. At this time we do not have any additional information surrounding the request but will keep the Board informed if additional information is received.
- b. Quality Management Staff, in coordination with Medical Records Staff, are now offering face to face refresher training for staff on general considerations and guidelines related to releasing information and assisting individuals with completing records requests.
- c. The Quarter 2 FY 18 Health Insurance Portability and Accountability Act (HIPAA) Training was sent out to all Tri-County employees.
- d. Regular Telemedicine surveys conducted continue to result in positive feedback related to services provided by our contracted Doctor.

2. Utilization Management:

Staff continue to work on revising procedures surrounding Utilization Management processes.

3. Training:

- a. The training department has hired a new Training Coordinator who is scheduled to begin on February 26th.
- b. The Clinical Trainer continues to train selected employees in Psychological First Aid and has trained roughly half of our Tri-County employees in Trauma Informed Care. As you will recall, it is our goal to train all Center employees in Trauma Informed Care by August 31, 2018.

4. Veteran Affairs:

- a. In collaboration with the Liberty County Veteran Service Office, Staff hosted an Aging Veterans Seminar aimed at providing resources for this population from multiple agencies around the area.
- b. Staff are currently processing mentors for the Jail Mentor Program that will begin providing support to those individuals who are accepted to the Veteran Jail Dorm in Montgomery County.

Community Activities

1. Staff are preparing for Tri-County's Consumer Foundation fundraising breakfast to be held on March 8, 2018.
2. Staff will be participating in the Out of Darkness Walk for Suicide Prevention – both as walkers and as licensed clinicians who will be able to assist anyone in the crowd who is having difficulty coping at the event.
3. Staff are making strides in getting into the area Universities to train in Youth Mental Health First Aid – two trainings were held at Sam Houston State University this month, with an additional scheduled for next month.
4. Part 2 of the Hurricane Harvey Crisis Counseling Program has begun. The Substance Abuse and Mental Health Services Administration (SAMHSA) will be using the Tri-County facility in Conroe to train Tri-County program staff and other area agencies on the movement from the Immediate Services Program to the Regular Services Program. The program is expected to last another 9 months.

Agenda Item: Approve Board Policy Changes Committee: Executive	Board Meeting Date February 22, 2018
<p>Background Information: As staff continues to update Board Policy statements, four (4) Policies have been revised and one (1) new Policy is recommended for approval by the Board. In addition to formatting changes, the following modifications are recommended:</p> <p>Revisions: C.28-Safety Program—<i>April 30, 1998—Renamed C.28-Workplace Safety</i>. Added safety responsibilities by staff type and requirement for a safety plan to be developed annually. D.9-Board of Trustees Policy on Transportation of Clients—<i>December 12, 1984—Renamed D.9-Transportation of Individuals Served</i>. This policy was completely revised to reflect current Center practices. In 1984 the Center had a fleet of vehicles and all transportation occurred using the fleet. This has not been the practice at Tri-County for a long time. The revised Policy sets guidelines for our current transportation practices. D.10-Fee Charges and Payments—<i>August 29, 1991—Renamed D.10-Fees, Charges, Payments and Insurance</i>. This Policy was revised substantially to be in compliance with Texas Administrative Code. In addition, please note Section IV related to Executive Director authority to opt of any insurance product which does not routinely and consistently pay for services rendered. We will spend a few minutes discussing the background on this new section at the meeting. E.20-Facilities Maintenance—<i>September 29, 1988</i>—This Policy has been modified slightly to reflect current practices and responsible staff.</p> <p>New: C.35-Vehicle Disposal—This new Policy reflects Board direction regarding the process for disposal of vehicles that have in excess of 300,000 miles on the odometer.</p>	
<p>Supporting Documentation: Revised Board Policies (Markup Versions) C.28-Workplace Safety D.9-Transportation of Individuals Served D.10-Fees, Charges, Payments and Insurance E.20-Facilities Maintenance New Policies C.35-Vehicle Disposal</p>	
<p>Recommended Action: Approve Revisions to Board Policies C.28, D.9, D.10 and E.20, and New Policy C.35.</p>	

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

STATEMENT OF POLICY

SUBJECT: Workplace Safety Program

 William E. Hall, Jr., Chairman _____ Date

Original Effective Date: April 30, 1998

It is ~~a~~ **the** policy of the Board of Trustees that Tri-County ~~MHMR Services~~ **Behavioral Healthcare** (“Tri-County” or “Center”) ~~to Tri-County MHMR Services achieve the~~ greatest practical degree of freedom from accidents and hazardous conditions, and to ensure each employee is provided a safe and healthful environment, free from recognized hazards.

~~The Safety Program will be developed through the guidance of the Leadership Team.~~

To achieve workplace safety, everyone must be involved.

- I. The Management Team at Tri-County will provide support of safety program initiatives. Management Team will consider all employee suggestions for achieving a safer and healthier workplace. The Management Team will also keep informed about workplace safety and health hazards, and will report these to the Executive Director and Safety Committee.
- II. Supervisors are responsible for supervising and training workers in safe workplace practices. Supervisors must enforce Center safety rules, report safety concerns to their Management Team member and/or Safety Committee, and work to eliminate hazardous conditions which have been identified.
- III. The Safety Committee will establish, review, and revise the Safety Program **to address areas of safety concern** ~~it is related to Tri-County MHMR Services at least annually as needed.~~
- IV. Every employee plays an important role in preventing accidents, and is expected **and encouraged** to cooperate fully in the measures taken for safety. Employees in the performance of their duties and responsibilities shall be expected to observe safety practices, rules and operating procedures, as well as, **supporting Safety Committee activities.** ~~instructions relating to the efficient performance of their duties and responsibilities.~~

TRI-COUNTY BEHAVIORAL HEALTHCARESTATEMENT OF POLICY

Patti Atkins, Chair

Date

Subject: Vehicle Disposal

It is the policy of the Board of Trustees of Tri-County Behavioral Healthcare ('Tri-County' or 'Center') that any Center owned vehicle that has an excess of 300,000 miles has reached its useful life and may be disposed of by staff without express Board action. These vehicles shall be sold to the highest bidder via public auction or other like process. The proceeds of the sale will be reported to the Board as part of the Chief Financial Officer's report at a regular Board meeting following the sale.

TRI-COUNTY BEHAVIORAL HEALTHCARE

STATEMENT OF POLICY

Patti Atkins, Chair

Date

Subject: Transportation of Individuals Served

Transportation to appointments is one of the most common barriers cited by individuals receiving services from Tri-County Behavioral Healthcare. While public transportation, on-demand transportation (e.g. Medicaid transportation) and other options are sometimes available to individuals we serve, in many cases transportation is not available.

Recognizing that rules for transportation of individuals served vary by program, it is the policy of the Board of Trustees of Tri-County Behavioral Healthcare ('Tri-County' or 'Center') that the following guidelines be utilized when making decisions about transporting the persons served by the Center:

- I. Individuals served will be encouraged to use other transportation services whenever possible.
- II. Decisions about the ability to transport individuals served will be made by the appropriate Management Team member over a service area, and will be in compliance with applicable contract guidelines and/or Texas Administrative Code.
- III. Center vehicles shall be used for transportation of individuals served whenever possible.
- IV. All staff that transport individuals served will be required to be insurable by the Center's insurer.
- V. All staff that transport individuals will be required to complete appropriate Center driving training.
- VI. Staff may have to be certified by management to drive certain Center vehicle types (e.g. Vans, RV).
- VII. Staff should ensure that all safety procedures are followed (e.g. seat belts, child car seats) by both them and the individual they are transporting.
- VIII. Staff who transport in their own vehicle must take reasonable steps to ensure that the vehicle is in appropriate mechanical condition.
- IX. Staff who transport in their own vehicle must have appropriate insurance which will be considered primary coverage in the case of an accident.
- X. Staff may not use cell phones to call or text while transporting individuals served.
- XI. Staff may not use tobacco in a Tri-County vehicle or while transporting individuals served.

~~It is the purpose of this policy to describe the parameters within which the employees of the Services must function in transporting clients. Such policy is intended to insure that clients are transported by means which adequately address Board of Trustees' concerns as regards to safety, client care and potential liability.~~

~~H. TRANSPORTATION IN EMPLOYEE OWNED VEHICLES~~

~~A. No employee of the Center is authorized or allowed to transport Services clients in employee owned vehicles except:~~

- ~~1. Where expressly authorized by the Executive Director or designee,
or~~
- ~~2. Where expressly authorized in the employee's job description, or~~
- ~~3. Where an extreme life threatening emergency exists and there is not sufficient opportunity to receive proper authorization and where there is no other means of transportation available.~~

~~B. When any of the above exceptions are utilized, it is the employee's responsibility to have secured sufficient vehicle insurance coverage. However, the Executive Director is hereby directed to seek methods of insurance coverage to be paid for by the Services when either exception A.1 or A.2 is to be authorized.~~

~~III. TRANSPORTATION IN SERVICES OWNED OR LEASED VEHICLES~~

~~A. Whenever and wherever possible the clients of the Services shall be transported only when necessary and only by use of Services owned vehicles, services leased vehicles, or personal vehicles which have been properly and adequately insured to cover staff, vehicles and passengers.~~

~~B. Only duly licensed employees who have a safe and responsible driving record shall be allowed to operate any vehicle.~~

~~C. When a Services owned or leased vehicle (or other vehicle which has by necessity been substituted for a Services vehicle) is being used by Services employees to transport clients, the following requirements must be met.:~~

- ~~1. For clients being transported to a mental health facility pursuant to the Texas Mental Health Code (Art. 5547 V.T.C.S.), the provisions of Section 64 shall be followed.~~

~~(a) Friends and relatives of the patient at their own expense may accompany him/her to the mental health facility.~~

- ~~(b) Every female patient shall be accompanied by a female attendant unless accompanied by her father, husband, or adult brother or son during conveyance to the mental health facility.~~
- ~~(c) The patient shall not be transported in a marked police or sheriff's car or accompanied by officers in uniform if other means are available.~~

- ~~2. For other clients, every effort should be made to have an employee or another person of the same sex as the client present in the vehicle. When this is not possible, every precaution should be taken to eliminate the possibility of dangerous situations or allegations of unprofessional or unseemly conduct.~~

~~IV. ENFORCEMENT~~

~~The Executive Director is responsible for promulgating administrative procedures to implement this policy. Such procedures shall include:~~

- ~~A. Safeguards in screening, training and supervising potential and present employees.~~
- ~~B. Disciplinary actions (including possible termination) for any employee who violates this policy or the procedures or who fails to demonstrate safe and responsible driving habits.~~

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

STATEMENT OF POLICY

William E. Hall, Jr., Chairman

Date

Subject: **Fees Charges, and Payments, and Insurance**

It is the policy of the Tri-County Behavioral Healthcare ("Tri-County" or "Center") ~~Mental Health Mental Retardation Services~~ Board of Trustees that a system for assessing and recording of charges, payments, and maintaining balances ~~by consumers~~ of persons served should be implemented.

- I. This system should be in compliance with the following principles:
 - A. Persons are charged for services based on their ability to pay;
 - B. Procedures for determining ability to pay are fair, equitable, and consistently implemented;
 - C. Charges for services will be established based on market rates for services in the community;
 - D. Paying for services in accordance with his/her ability to pay reinforces the role of the person as a customer;
 - E. Earned revenues are optimized; and,
 - F. General Revenue from the Health and Human Services Commission (HHSC) is the payer of last resort.
- II. Collections for Services Rendered
 - A. Individuals served (and parents where applicable) are responsible for promptly paying all charges owed to the Center.
 - B. The Center is responsible for making reasonable efforts to collect payments from all available funding sources before accessing HHSC's funds to pay for individual's services.
 - C. Although the individual served (and parents where applicable) may pay a lesser amount each month because a portion of the charges were deferred, the individual served (and parents where applicable) is still responsible for paying all charges owed.
 - D. The Center will establish a process to ensure that individuals served that do not pay due to their symptoms are evaluated by the clinical team before being discharged for non-payment.

- E. Individuals may be discharged for continued non-payment.

III. Records

- A. The Center will maintain a monthly account for each individual served that lists all services provided to the person during the month and the standard charges for the services.
- B. The Center will send to persons (and parents) who have been determined as having the ability to pay monthly or quarterly statements.

IV. Insurance Company Non-Payment/Slow Payment

- A. The Executive Director, in consultation with the Chief Financial Officer, is authorized to opt out of any insurance product which does not routinely and consistently pay for services rendered.
 - 1. Individuals served will be notified 90 days in advance of ending insurance coverage of the need to find a new provider.
 - 2. Individuals with these insurance companies who have substantial need may be allowed to stay in services at Tri-County on a case by case basis as approved by the Executive Director.
- B. Once an insurance company is no longer accepted at the Center, persons will remain eligible for screening and crisis services, but will not be eligible for ongoing services.
- C. Insurance which is not accepted by the Center will be posted on the website, will be communicated to persons when they attempt to schedule an appointment and will be posted in the lobby of all service facilities.

~~The system shall be approved by the Executive Director and the Director of Fiscal Services.~~

~~A summary of monthly and year to date activities shall be available to the Board of Trustees.~~

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

STATEMENT OF POLICY

Richard Herpin, Chairman

Date

Original Effective Date: 9/29/88

Subject: Facilities Maintenance

Tri-County ~~Behavioral Healthcare~~ ~~MHMR Services~~ shall provide services in facilities that do not present unnecessary danger to client or staff. An active preventive maintenance program shall be conducted. All efforts will be made to comply with governmental requirements regarding health and safety regulations.

1. The primary responsibility for facility maintenance rests with **Chief Compliance Officer or designee**. ~~the unit supervisor.~~
2. **The Chief Compliance Officer** ~~unit supervisor~~ shall request sufficient funds in the unit budget to provide for cost of routine maintenance and, if appropriate, additional funds for non-routine anticipated maintenance costs.
3. At least annually, ~~the unit supervisor~~ **Chief Compliance Officer or designee** shall, **as a part of the budgeting process**, prepare a report in include the following:
 - a. Overall condition of **facilities** ~~facility~~ addressing such issues as interior and exterior of building, walls, roof, air conditioning/heating units, plumbing, flooring, electrical system, and any other relevant issue pertaining to the conditions of the buildings.
 - b. Utilization of facility including hours of operations, number of clients served in an average week, and number of persons working in facility.
 - c. Recommendations regarding maintenance needs of the facility.
4. ~~Whenever possible in leased facilities, responsibility for janitorial services shall lie with the lessor. When the responsibility for janitorial services lies with Tri County, the unit supervisor will coordinate negotiation of a~~

~~contract for such services in conjunction with the Director of Fiscal Services or his/her designee at the beginning of each fiscal year.~~

5. When repairs or other responsibilities are provided for in a lease for the facility, requests for these services to be performed shall be requested by the unit supervisor **Chief Compliance Officer or designee**.
6. When repairs, maintenance or other such services are needed in facilities for which Tri-County is responsible, these services shall be coordinated by the ~~unit supervisor with the Maintenance Supervisor~~ **Chief Compliance Officer or designee** following approved purchasing procedures.
7. ~~The unit supervisor is responsible for all Tri-County property located at his/her facility. Annual inventories of all properties will be conducted as stated in the Policy and Procedures for Property Inventory.~~

Agenda Item: Personnel Report for January 2018 Committee: Executive	Board Meeting Date: February 22, 2018
Background Information: None	
Supporting Documentation: Personnel Report for January 2018	
Recommended Action: For Information Only	

Personnel Report January 2017

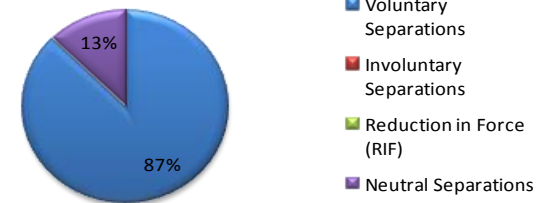
Total Applications received in January = 340

Total New Hires for the month of January = 13

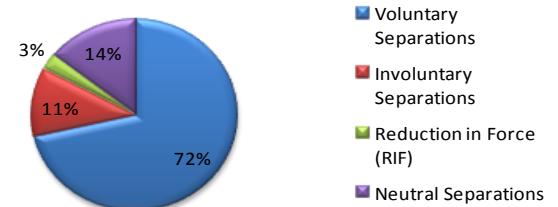
Total New Hires Year to Date = 47

January Turnover - FY18 compared to FY17	FY18	FY17
Number of Active Employees	344	341
Number of Monthly Separations	8	5
Number of Separations YTD	35	42
Year to Date Turnover Rate	10%	12%
January Turnover Rate	2%	1%

January Voluntary, Involuntary, RIF and Neutral Separations



Year to Date Voluntary, Involuntary, RIF and Neutral Separations

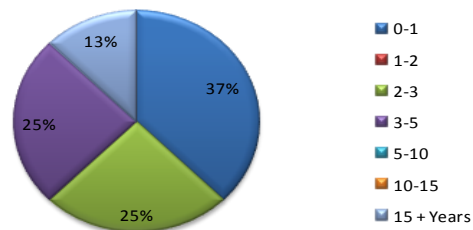


Separations by Reason	January Separations	FY18 YTD
Retired	1	1
Involuntarily Terminated	0	4
Neutral Termination	1	4
Dissatisfied	0	0
Lack of Support from Administration	0	0
Micro-managing supervisor	0	0
Lack of growth opportunities/recognition	0	0
Difficulty learning new job	0	0
Co-workers	0	0
Work Related Stress/Environment	0	0
RIF	0	1
Deceased	0	0
Pay	0	1
Health	2	4
Family	1	3
Relocation	0	1
School	0	0
Personal	0	0
Unknown	0	3
New Job	3	13
Total Separations	8	35

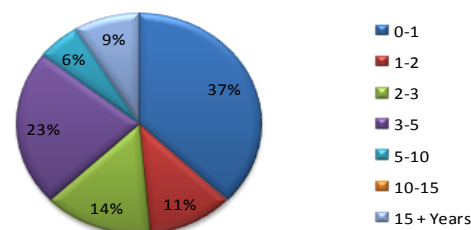
Management Team	# of Employees	Monthly Separations	Year to Date Separations	% January	% YTD
Evan Roberson	18	0	2	0%	11%
Millie McDuffey	30	0	3	0%	10%
Amy Foerster	11	0	1	0%	9%
Tanya Bryant	11	0	0	0%	0%
MH Adult	81	4	7	5%	9%
MH Child & Youth	53	1	7	2%	13%
Catherine Prestigiovanni	8	1	1	13%	13%
Breanna Robertson	57	1	7	2%	12%
Kelly Shropshire	34	0	6	0%	18%
Kathy Foster	32	1	1	3%	3%
Kenneth Barfield	9	0	0	0%	0%
Total	344	8	35		

Separation by EEO Category	# of Employees	Monthly Separations	Year to Date	% January	% Year to Date
Supervisors & Managers	24	0	0	0%	0%
Medical (MD,DO, LVN, RN, APN, PA, Psychologist)	42	2	6	5%	14%
Professionals (QMHP)	99	5	15	5%	15%
Professionals (QIDP)	29	0	5	0%	17%
Licensed Staff (LCDIC, LPC...)	16	0	1	0%	6%
Business Services (Accounting)	14	0	1	0%	7%
Central Administration (HR, IT, Executive Director)	23	0	1	0%	4%
Program Support(Financial Counselors, QA, Training, Med. Records)	45	0	2	0%	4%
Nurse Technicians/Aides	17	0	2	0%	12%
Service/Maintenance	9	0	1	0%	11%
Direct Care (HCS, Respite, Life Skills)	26	1	1	4%	4%
Total	344	8	35		

January Separations by Tenure

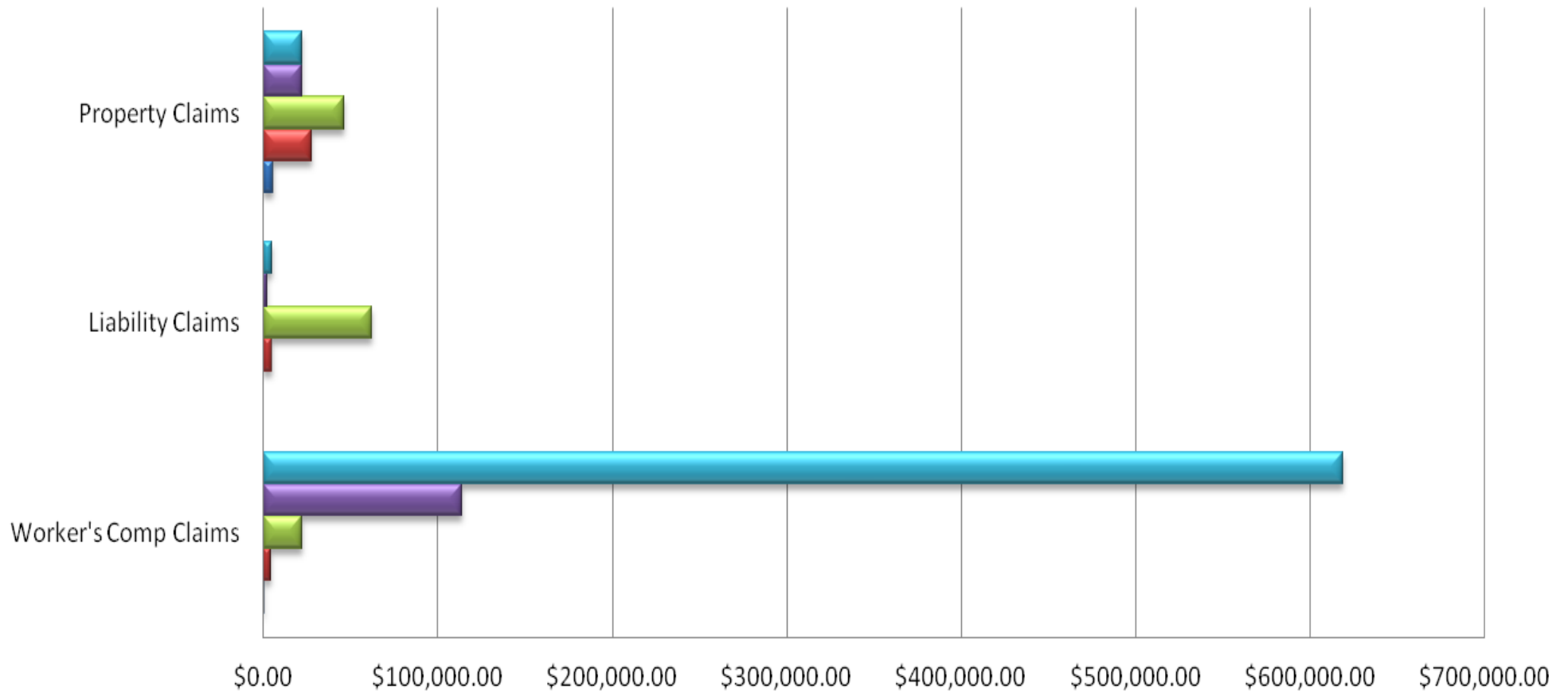


Year to Date Separations by Tenure



Agenda Item: Texas Council Risk Management Fund Claims Summary as of January 2018 Committee: Executive	Board Meeting Date: February 22, 2018
Background Information: None	
Supporting Documentation: Texas Council Risk Management Fund Claims Summary as of January 2018	
Recommended Action: For Information Only	

TCRMF Claims Summary January 2018



	Worker's Comp Claims	Liability Claims	Property Claims
2014	\$618,722.00	\$5,295.00	\$21,931.00
2015	\$113,917.00	\$2,556.00	\$22,505.00
2016	\$21,879.00	\$61,917.00	\$46,114.00
2017	\$4,397.00	\$4,893.00	\$27,455.00
2018	\$186.00	\$0.00	\$5,626.00

Agenda Item: Approve January 2018 Financial Statements Committee: Business	Board Meeting Date February 22, 2018
Background Information: None	
Supporting Documentation: January 2018 Financial Statements	
Recommended Action: Approve January 2018 Financial Statements	

January 2018 Financial Summary

Revenues for January 2018 were \$2,499,652 and operating expenses were \$2,343,102; resulting in a gain in operations of \$156,550. Capital Expenditures and Extraordinary Expenses for January were \$59,468; resulting in a gain of \$97,082. Total revenues were 106.93% of the monthly budgeted revenues and total expenses were 103.86% of the monthly budgeted expenses.

Year to date revenues are \$12,035,011 and operating expenses are \$11,511,742; leaving excess operating revenues of \$326,395. YTD Capital Expenditures and Extraordinary Expenses are \$326,395; resulting in a gain YTD of \$196,875. Total revenues are 100.65% of the YTD budgeted revenues and total expenses are 98.44% of the YTD budgeted expenses

REVENUES

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

Revenue Source	YTD Revenue	YTD Budget	% of Budget	\$ Variance
Rehab – Title XIX	734,034	912,297	80.46%	178,263
DSHS – Veteran's Services	22,163	41,368	53.58%	19,206
DSHS – SA Treatment Adult	22,491	40,721	55.23%	18,230

Rehab – Title XIX – We continue to see this line item under budget due to a decrease in the number of clients with Medicaid being served in the adult clinic. We also still have numerous vacancies in both the adult and the children's clinics. As discussed last month, we have implemented an incentive program to help generate applicant flow for the vacant positions, so hopefully we will see a change very soon. We will continue to monitor this line and make revisions to the budget as needed.

DSHS – Veteran's Services – This line item will be on the narrative until the budget revision is completed. As reported in prior months, the Veteran's Services manager was out on maternity leave and budget variance primarily reflects salary and fringe dollars which were not expended during her leave. There is a corresponding reduction in expenses for the program.

DSHS – SA Treatment Adult – As the Board is aware, we have struggled to generate revenue in this program for several years. We are monitoring this program closely and may need to reconsider continued participation if performance doesn't improve.

EXPENSES

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

Expense Source	YTD Expenses	YTD Budget	% of Budget	\$ Variance
Building Repairs & Maintenance	144,772	77,691	1.86%	67,081
Medication	297,756	283,849	1.05%	13,907

Building Repairs & Maintenance – This line item reflects major repairs that hit during the first quarter of FY2018 for air conditioning and roof repairs. This month also included the remodeling expenses at 302 Campbell St. in Cleveland that was approved by the board for the renewal of the leases at this location.

Medication Expense – This line item is trending up due to a reduced amount of PAP being received by the agency. We will continue to watch this line to determine if an adjustment is needed in the budget revision.

TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended January 31, 2018

	TOTALS COMBINED FUNDS January 2018	TOTALS COMBINED FUNDS December 2017	Increase (Decrease)
ASSETS			
CURRENT ASSETS			
Imprest Cash Funds	3,904	3,904	-
Cash on Deposit-General Fund	11,917,261	11,093,006	824,255
Cash on Deposit-Debt Fund			-
Accounts Receivable	1,684,360	1,706,175	(21,815)
Inventory	4,986	4,986	-
TOTAL CURRENT ASSETS	13,610,511	12,808,070	802,440
FIXED ASSETS	20,760,463	20,760,463	-
OTHER ASSETS	100,246	29,190	71,056
TOTAL ASSETS	\$ 34,471,221	\$ 33,597,724	\$ 873,497
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
CURRENT LIABILITIES	1,389,411	1,136,551	252,860
NOTES PAYABLE	642,552	642,552	-
DEFERRED REVENUE	3,107,281	2,589,893	517,388
LONG-TERM LIABILITIES FOR			
Line of Credit - Tradition Bank	-	-	-
Note Payable Prosperity Bank	-	-	-
First Financial loan tied to CD	870,833	893,750	(22,917)
First Financial Construction Loan	12,399,793	12,399,793	-
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	196,875	3,592,174	(3,395,299)
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(13,270,626)	(13,293,542)	22,917
Reserved for Debt Retirement	-	-	-
COMMITTED			
Net Assets-Property and Equipment	20,760,463	20,760,463	-
Reserved for Vehicles & Equipment Replacement	678,112	678,112	-
Reserved for Facility Improvement & Acquisitions	-	-	-
Reserved for Board Initiatives	1,500,000	1,500,000	-
Reserved for 1115 Waiver Programs	516,833	516,833	-
ASSIGNED			
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	-
Reserved for Accrued Paid Time Off	(642,552)	(642,552)	-
UNASSIGNED			
Unrestricted and Undesignated	5,917,006	2,424,625	3,492,381
TOTAL LIABILITIES/FUND BALANCE	\$ 34,471,221	\$ 33,597,724	\$ 873,497

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended January 31, 2018**

	General Operating Funds	Memorandum Only Final August 2017
ASSETS		
CURRENT ASSETS		
Imprest Cash Funds	3,904	3,854
Cash on Deposit-General Fund	11,917,261	5,383,227
Cash on Deposit-Debt Fund	-	-
Accounts Receivable	1,684,360	4,136,003
Inventory	4,986	4,986
TOTAL CURRENT ASSETS	13,610,511	9,528,070
FIXED ASSETS	20,760,463	20,760,463
OTHER ASSETS	100,246	205,342
	\$ 34,471,221	\$ 30,493,875
LIABILITIES, DEFERRED REVENUE, FUND BALANCES		
CURRENT LIABILITIES	1,389,411	1,169,877
NOTES PAYABLE	642,552	642,552
DEFERRED REVENUE	3,107,281	(422,827)
LONG-TERM LIABILITIES FOR		
Line of Credit - Tradition Bank	-	-
Note Payable Prosperity Bank	-	-
First Financial loan tied to CD	870,833	985,417
First Financial Construction Loan	12,399,793	12,399,793
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR		
General Fund	196,875	3,492,382
FUND EQUITY		
RESTRICTED		
Net Assets Reserved for Debt service-Restricted	(13,270,626)	(13,385,209)
Reserved for Debt Retirement	-	-
COMMITTED		
Net Assets-Property and Equipment-Committed	20,760,463	20,760,463
Reserved for Vehicles & Equipment Replacement	678,112	678,112
Reserved for Facility Improvement & Acquisitions	-	-
Reserved for Board Initiatives	1,500,000	1,500,000
Reserved for 1115 Waiver Programs	516,833	516,833
ASSIGNED		
Reserved for Workers' Compensation-Assigned	274,409	274,409
Reserved for Current Year Budgeted Reserve -Assigned	30,831	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(642,552)	(642,552)
UNASSIGNED		
Unrestricted and Undesignated	5,917,006	2,424,625
TOTAL LIABILITIES/FUND BALANCE	\$ 34,471,221	\$ 30,493,875

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended January 2018
and Year To Date as of January 2018

INCOME:	MONTH OF January 2018	YTD January 2018
Local Revenue Sources	125,308	517,111
Earned Income	1,065,812	4,937,207
General Revenue-Contract	1,308,532	6,580,693
TOTAL INCOME	\$ 2,499,652	\$ 12,035,011
EXPENSES:		
Salaries	1,375,727	6,951,872
Employee Benefits	272,924	1,356,050
Medication Expense	65,958	297,786
Travel-Board/Staff	29,457	174,571
Building Rent/Maintenance	35,802	150,968
Consultants/Contracts	401,412	1,616,738
Other Operating Expenses	161,822	963,758
TOTAL EXPENSES	\$ 2,343,102	\$ 11,511,742
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 156,550	\$ 523,269
CAPITAL EXPENDITURES		
Capital Outlay-FF&E, Automobiles, Building	1,726	39,852
Capital Outlay-Debt Service	57,742	286,542
TOTAL CAPITAL EXPENDITURES	\$ 59,468	\$ 326,395
GRAND TOTAL EXPENDITURES	\$ 2,402,570	\$ 11,838,137
Excess (Deficiency) of Revenues and Expenses	\$ 97,082	\$ 196,875

Debt Service and Fixed Asset Fund:

Debt Service	57,742	286,542
Excess(Deficiency) of revenues over Expenses	57,742	286,542

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of January 2018

	YTD January 2018	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	517,111	462,205	54,906
Earned Income	4,937,207	5,050,258	(113,051)
General Revenue-Contract	6,580,693	6,444,661	136,032
TOTAL INCOME	\$ 12,035,011	\$ 11,957,124	\$ 77,887
EXPENSES:			
Salaries	6,951,872	7,052,997	(101,125)
Employee Benefits	1,356,050	1,357,951	(1,901)
Medication Expense	297,786	284,680	13,106
Travel-Board/Staff	174,571	182,425	(7,854)
Building Rent/Maintenance	150,968	82,353	68,615
Consultants/Contracts	1,616,738	1,640,486	(23,748)
Other Operating Expenses	963,758	1,037,479	(73,721)
TOTAL EXPENSES	\$ 11,511,742	\$ 11,638,371	\$ (126,629)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 523,269	\$ 318,753	\$ 204,516
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	39,852	77,625	(37,773)
Capital Outlay-Debt Service	286,542	309,335	(22,793)
TOTAL CAPITAL EXPENDITURES	\$ 326,395	\$ 386,960	\$ (60,565)
GRAND TOTAL EXPENDITURES	\$ 11,838,137	\$ 12,025,331	\$ (187,194)
Excess (Deficiency) of Revenues and Expenses	\$ 196,875	\$ (68,207)	\$ 265,082

Debt Service and Fixed Asset Fund:

Debt Service	286,542	309,335	(22,793)
Excess(Deficiency) of revenues over Expenses	286,542	309,335	(22,793)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended January 2018

INCOME:	MONTH OF January 2018	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	125,308	89,834	35,474
Earned Income	1,065,812	1,008,308	57,504
General Revenue-Contract	1,308,532	1,239,578	68,954
TOTAL INCOME	\$ 2,499,652	\$ 2,337,720	\$ 161,932
EXPENSES:			
Salaries	1,375,727	1,399,079	(23,352)
Employee Benefits	272,924	274,506	(1,582)
Medication Expense	65,958	54,141	11,817
Travel-Board/Staff	29,457	36,493	(7,036)
Building Rent/Maintenance	35,802	11,791	24,011
Consultants/Contracts	401,412	317,309	84,103
Other Operating Expenses	161,822	201,511	(39,689)
TOTAL EXPENSES	\$ 2,343,102	\$ 2,294,830	\$ 48,272
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 156,550	\$ 42,890	\$ 113,660
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	1,726	(43,375)	45,101
Capital Outlay-Debt Service	57,742	61,867	(4,125)
TOTAL CAPITAL EXPENDITURES	\$ 59,468	\$ 18,492	\$ 40,976
GRAND TOTAL EXPENDITURES	\$ 2,402,570	\$ 2,313,322	\$ 89,248
Excess (Deficiency) of Revenues and Expenses	\$ 97,082	\$ 24,398	\$ 72,684

Debt Service and Fixed Asset Fund:

Debt Service	57,742	61,867	(4,125)
Excess(Deficiency) of revenues over Expenses	57,742	61,867	(4,125)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With January 2017 Comparative Data
Year to Date as of January 2018

INCOME:	YTD January 2018	YTD January 2017	Increase (Decrease)
Local Revenue Sources	517,111	795,876	(278,765)
Earned Income	4,937,207	5,954,926	(1,017,719)
General Revenue-Contract	6,580,693	6,434,217	146,476
TOTAL INCOME	\$ 12,035,011	\$ 13,185,019	\$ (1,150,008)
EXPENSES:			
Salaries	6,951,872	6,765,702	186,170
Employee Benefits	1,356,050	1,358,198	(2,148)
Medication Expense	297,786	283,409	14,377
Travel-Board/Staff	174,571	200,236	(25,665)
Building Rent/Maintenance	150,968	222,406	(71,438)
Consultants/Contracts	1,616,738	2,458,624	(841,886)
Other Operating Expenses	963,758	1,045,014	(81,256)
TOTAL EXPENSES	\$ 11,511,742	\$ 12,333,589	\$ (821,847)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 523,269	\$ 851,430	\$ (328,161)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	39,852	748,185	(708,333)
Capital Outlay-Debt Service	286,542	264,922	21,620
TOTAL CAPITAL EXPENDITURES	\$ 326,395	\$ 1,013,107	\$ (686,712)
GRAND TOTAL EXPENDITURES	\$ 11,838,137	\$ 13,346,696	\$ (1,508,559)
Excess (Deficiency) of Revenues and Expenses	\$ 196,875	\$ (161,677)	\$ 358,552

Debt Service and Fixed Asset Fund:

Debt Service	286,542	264,922	21,620
Excess(Deficiency) of revenues over Expenses	286,542	264,922	21,620

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With January 2017 Comparative Data
For the Month Ended January 2018

INCOME:	MONTH OF January 2018	MONTH OF January 2017	Increase (Decrease)
Local Revenue Sources	125,308	89,463	35,845
Earned Income	1,065,812	1,182,909	(117,097)
General Revenue-Contract	1,308,532	1,212,889	95,643
TOTAL INCOME	\$ 2,499,652	\$ 2,485,261	\$ 14,391
Salaries	1,375,727	1,359,817	15,910
Employee Benefits	272,924	298,404	(25,480)
Medication Expense	65,958	48,416	17,542
Travel-Board/Staff	29,457	40,632	(11,175)
Building Rent/Maintenance	35,802	32,484	3,318
Consultants/Contracts	401,412	381,204	20,208
Other Operating Expenses	161,822	177,767	(15,945)
TOTAL EXPENSES	\$ 2,343,102	\$ 2,338,724	\$ 4,378
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 156,550	\$ 146,537	\$ 10,013
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	1,726	562,647	(560,921)
Capital Outlay-Debt Service	57,742	63,642	(5,900)
TOTAL CAPITAL EXPENDITURES	\$ 59,468	\$ 626,289	\$ (566,821)
GRAND TOTAL EXPENDITURES	\$ 2,402,570	\$ 2,965,013	\$ (562,443)
Excess (Deficiency) of Revenues and Expenses	\$ 97,082	\$ (479,752)	\$ 576,834

Debt Service and Fixed Asset Fund:

Debt Service	57,742	63,642	(5,900)
Excess(Deficiency) of revenues over Expenses	57,742	63,642	(5,900)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With December 2017 Comparative Data
For the Month Ended January 2018

INCOME:	MONTH OF January 2018	MONTH OF December 2017	Increase (Decrease)
Local Revenue Sources	125,308	78,189	47,119
Earned Income	1,065,812	909,914	155,897
General Revenue-Contract	1,308,532	1,303,242	5,290
TOTAL INCOME	\$ 2,499,652	\$ 2,291,345	\$ 208,306
EXPENSES:			
Salaries	1,375,727	1,378,339	(2,612)
Employee Benefits	272,924	269,709	3,215
Medication Expense	65,958	55,896	10,062
Travel-Board/Staff	29,457	31,831	(2,374)
Building Rent/Maintenance	35,802	20,579	15,223
Consultants/Contracts	401,412	314,358	87,054
Other Operating Expenses	161,822	201,741	(39,919)
TOTAL EXPENSES	\$ 2,343,102	\$ 2,272,454	\$ 70,648
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 156,550	\$ 18,891	\$ 137,658
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	1,726	1,061	665
Capital Outlay-Debt Service	57,742	56,661	1,081
TOTAL CAPITAL EXPENDITURES	\$ 59,468	\$ 57,722	\$ 1,745
GRAND TOTAL EXPENDITURES	\$ 2,402,570	\$ 2,330,176	\$ 72,394
Excess (Deficiency) of Revenues and Expenses	\$ 97,082	\$ (38,831)	\$ 135,913

Debt Service and Fixed Asset Fund:

Debt Service	57,742	56,661	1,081
Excess(Deficiency) of revenues over Expenses	57,742	56,661	1,081

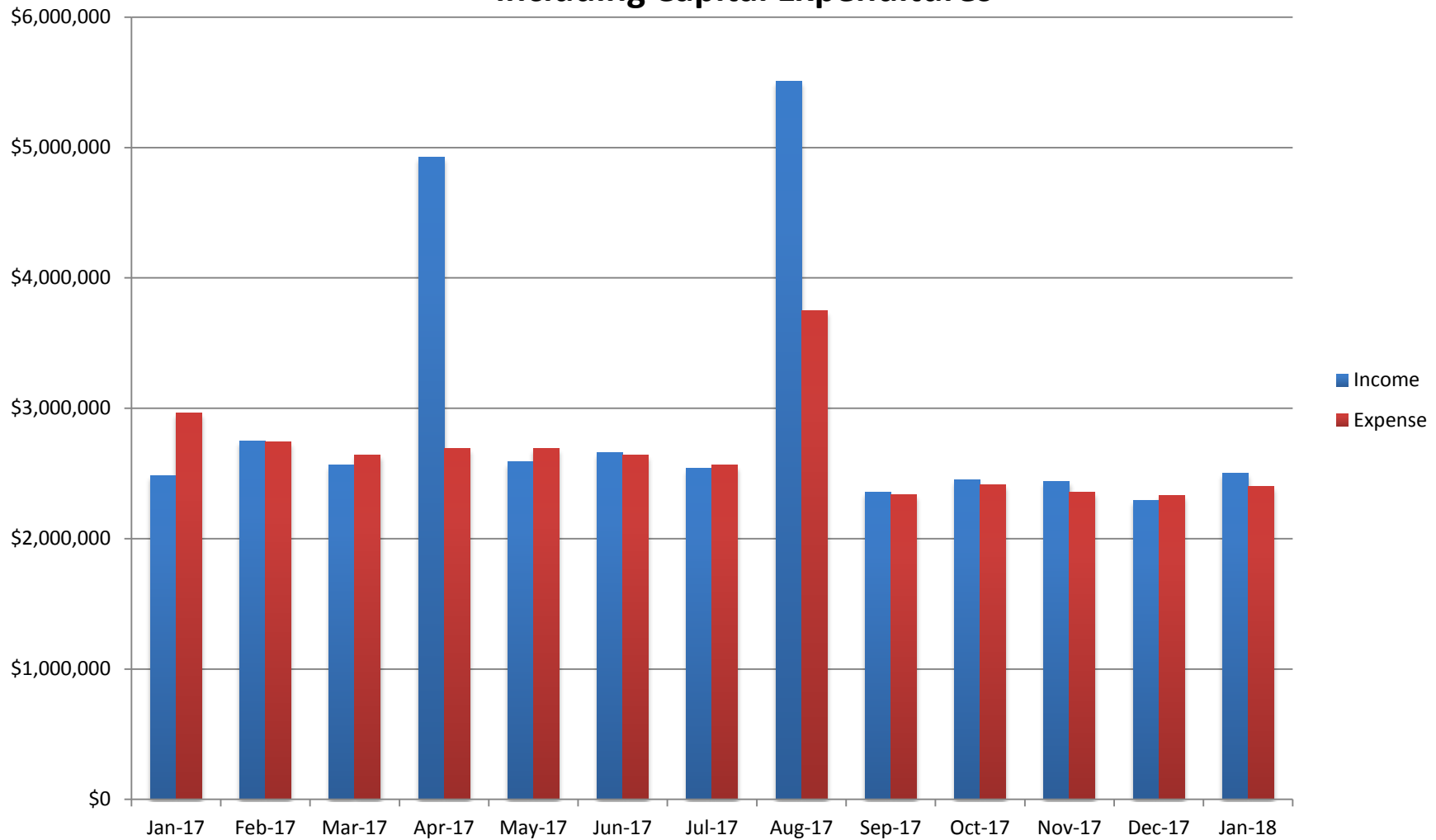
TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of January 2018

	YTD Mental Health January 2018	YTD IDD January 2018	YTD Other Services January 2018	YTD Agency Total January 2018	YTD Approved Budget January 2018	Increase (Decrease)
INCOME:						
Local Revenue Sources	858,340	52,976	(394,206)	517,111	462,205	54,906
Earned Income	1,683,179	1,579,867	1,674,161	4,937,207	5,050,258	(113,051)
General Revenue-Contract	5,865,187	715,506		6,580,693	6,444,661	136,032
TOTAL INCOME	\$ 8,406,706	\$ 2,348,349	\$ 1,279,955	\$ 12,035,011	\$ 11,957,124	\$ 77,887
EXPENSES:						
Salaries	4,656,419	1,218,535	1,076,918	6,951,872	7,052,997	(101,125)
Employee Benefits	893,897	265,558	196,596	1,356,050	1,357,951	(1,901)
Medication Expense	248,638		49,147	297,786	284,680	13,106
Travel-Board/Staff	94,812	52,928	26,830	174,571	182,425	(7,854)
Building Rent/Maintenance	105,469	24,023	21,475	150,968	82,353	68,615
Consultants/Contracts	1,009,425	495,643	111,670	1,616,738	1,640,486	(23,748)
Other Operating Expenses	624,881	210,052	128,825	963,758	1,037,479	(73,721)
TOTAL EXPENSES	\$ 7,633,541	\$ 2,266,739	\$ 1,611,461	\$ 11,511,743	\$ 11,638,371	\$ (126,628)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 773,165	\$ 81,610	\$ (331,506)	\$ 523,268	\$ 318,753	\$ 204,515
CAPITAL EXPENDITURES						
Capital Outlay-FF&E, Automobiles	23,336	8,032	8,484	39,852	77,625	(37,773)
Capital Outlay-Debt Service	199,743	38,586	48,214	286,542	309,335	(22,793)
TOTAL CAPITAL EXPENDITURES	\$ 223,079	\$ 46,618	\$ 56,698	\$ 326,394	\$ 386,960	\$ (60,566)
GRAND TOTAL EXPENDITURES	\$ 7,856,620	\$ 2,313,357	\$ 1,668,159	\$ 11,838,137	\$ 12,025,331	\$ (187,194)
Excess (Deficiency) of Revenues and Expenses	\$ 550,086	\$ 34,992	\$ (388,204)	\$ 196,875	\$ (68,207)	\$ 265,081
Debt Service and Fixed Asset Fund:						
Debt Service	199,743	38,586	48,214	286,542	309,335	(109,592)
		-	-	-	-	-
Excess(Deficiency) of revenues over Expenses	199,743	38,586	48,214	286,542	309,335	(109,592)

TRI-COUNTY BEHAVIORAL HEALTHCARE

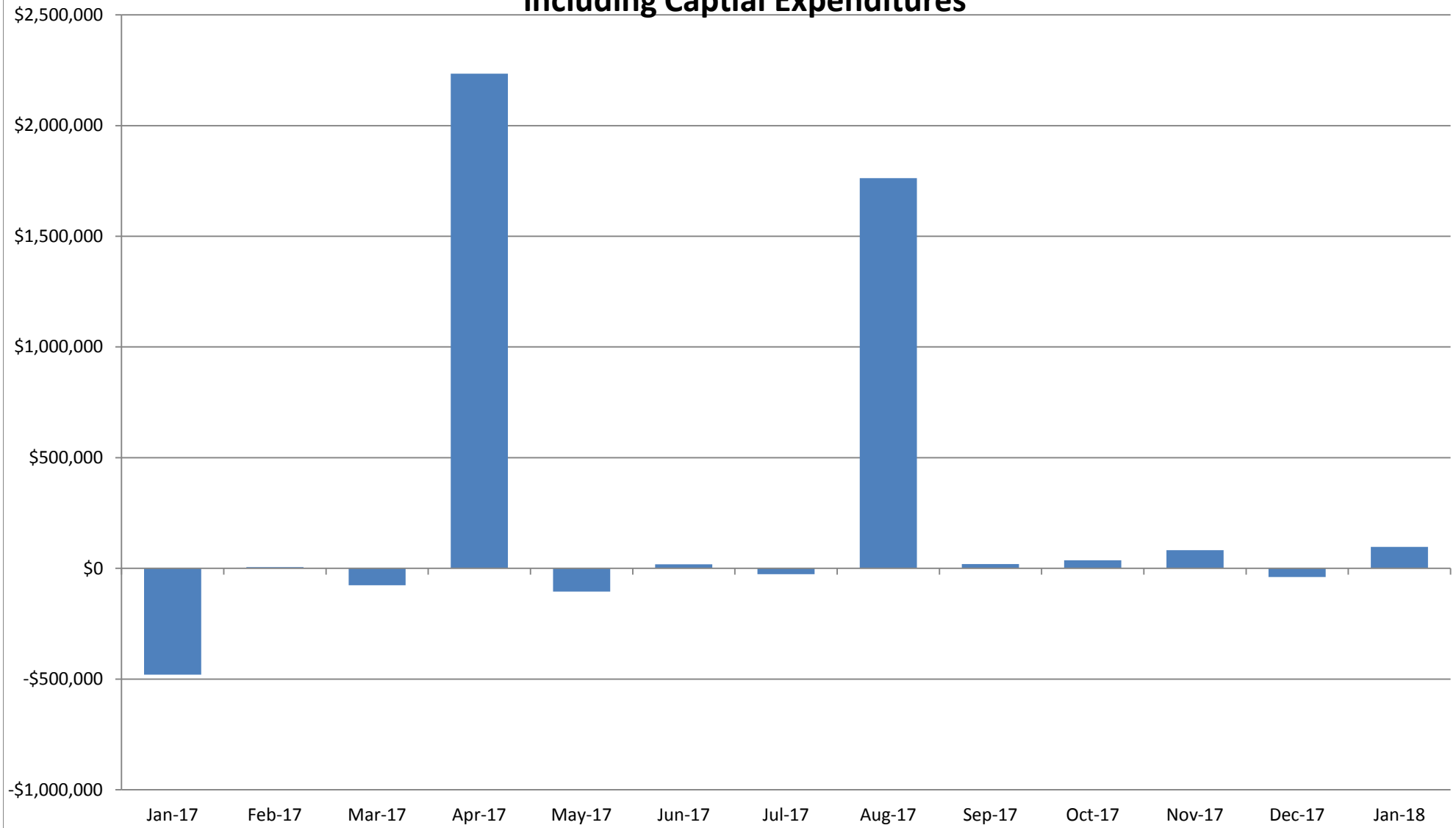
Income and Expense

including Capital Expenditures



TRI-COUNTY BEHAVIORAL HEALTHCARE

Income after Expense including Capital Expenditures



Agenda Item: Ratify the Health and Human Services Commission Immediate Services Program (ISP) Contract #HHS 000072800001	Board Meeting Date:
Committee: Business	February 22, 2018
Background Information:	
On August 25, 2017, our three counties were federally declared as major disaster areas subsequent to flooding caused by Hurricane Harvey.	
The Federal Emergency Management Administration, through HHSC, contracted with Community Centers in affected areas to provide the Crisis Counseling and Training Program (CCP) to “individuals and groups, including but not limited to: emergency first responders, disaster workers, disaster survivors, children, veterans, seniors and other persons present and/or residing in the Texas counties that were included in the federal disaster area.”	
The program began August 25, 2017 and ended January 31, 2018. The Regular Services Program (RSP) began on February 1, 2018 and will continue for an additional nine (9) months.	
Tri-County has hired 6 CCP staff, a supervisor and a support staff that are making contacts in the community. Thus far, Tri-County’s CCP Team has contacted over 14,683 individuals. This program is overseen by Catherine Prestigiovanni.	
This contract was received after the last Board meeting and needed to be returned immediately to HHSC. Evan Roberson sought permission from the Board Chair to sign the contract and have it ratified at the February meeting.	
Supporting Documentation:	
Contract will be available for review	
Recommended Action:	
Ratify the Health and Human Services Commission Immediate Services Program (ISP) Contract #HHS 000072800001	

Agenda Item: 401(a) Retirement Plan Account Review Committee: Business	Board Meeting Date: February 22, 2018
Background Information: A representative from ISC Group will present an update of the 401(a) Retirement Plan account activity and will provide a forecast for the future.	
Supporting Documentation: Information to be Distributed for Review at the Board Meeting	
Recommended Action: For Information Only	

Agenda Item: Board of Trustees Unit Financial Statement as of January 2018 Committee: Business	Board Meeting Date February 22, 2018
Background Information: None	
Supporting Documentation: January 2018 Board of Trustees Unit Financial Statement	
Recommended Action: For Information Only	

Unit Financial Statement

FY 2018

	January 2018 Actuals	January 2018 Budgeted	Variance	YTD Actual	YTD Budget	Variance	Percent	Budget
Revenues								
Allocated Revenue	\$ 2,554.00	\$ 2,554.00	\$ -	\$ 12,767.00	\$ 12,767.00	\$ -	100.00%	\$ 30,645.00
Total Revenue	\$ 2,554.00	\$ 2,554.00	\$ -	\$ 12,767.00	\$ 12,767.00	\$ -	100.00%	\$ 30,645.00
Expenses								
Food Items	\$ -	\$ 167.00	\$ (167.00)	\$ -	\$ 831.00	\$ (831.00)	0.00%	\$ 2,000.00
Insurance-Worker Compensation	\$ 9.67	\$ 17.00	\$ (7.33)	\$ 41.30	\$ 81.00	\$ (39.70)	50.99%	\$ 200.00
Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 7,500.00	\$ 7,500.00	\$ -	100.00%	\$ 18,000.00
Supplies-Office	\$ -	\$ 21.00	\$ (21.00)	\$ -	\$ 105.00	\$ (105.00)	0.00%	\$ 245.00
Training	\$ -	\$ 300.00	\$ (300.00)	\$ -	\$ 1,500.00	\$ (1,500.00)	0.00%	\$ 3,600.00
Travel - Local	\$ -	\$ 50.00	\$ (50.00)	\$ -	\$ 250.00	\$ (250.00)	0.00%	\$ 600.00
Travel - Non-local Mileage/Air	\$ -	\$ 150.00	\$ (150.00)	\$ 259.00	\$ 750.00	\$ (491.00)	34.53%	\$ 1,800.00
Travel - Non-local Hotel	\$ -	\$ 250.00	\$ (250.00)	\$ 588.95	\$ 1,250.00	\$ (661.05)	47.12%	\$ 3,000.00
Travel - Meals	\$ -	\$ 100.00	\$ (100.00)	\$ 153.43	\$ 500.00	\$ (346.57)	30.69%	\$ 1,200.00
Total Expenses	\$ 1,509.67	\$ 2,555.00	\$ (1,045.33)	\$ 8,542.68	\$ 12,767.00	\$ (4,224.32)	66.91%	\$ 30,645.00
Total Revenue minus Expenses	\$ 1,044.33	\$ (1.00)	\$ 1,045.33	\$ 4,224.32	\$ -	\$ 4,224.32	33.09%	\$ -

UPCOMING MEETINGS

March 22, 2018 – Board Meeting

- Approve Minutes from February 22, 2018 Board Meeting
- Community Resources Report
- Consumer Services Report for February 2018
- Program Updates
- Program Presentation
- MH Local Plan
- MH QM Plan
- Approve Revisions to General Administration Board Policies
- FY 2018 Goals and Objectives Progress Report
- Approve FY 2018 Budget Revision
- 2nd Quarter FY 2018 Investment Report
- 2nd Quarter FY 2018 Corporate Compliance and Quality Management Report
- 3rd Quarter FY 2018 Corporate Compliance Training
- Personnel Report for February 2018
- Texas Council Risk Management Fund Claims Summary as of February 2018
- Approve Financial Statements for February 2018
- Board of Trustees Unit Financial Statement as of February 2018
- HUD 811 Updates (Cleveland, Montgomery and Independence Communities)
- Foundation Board Update

April 26, 2018 – Board Meeting

- Approve Minutes from March 22, 2018 Board Meeting
- Community Resources Report
- Consumer Services Report for March 2018
- Program Updates
- Program Presentation – Annual Board and Management Team Training
- Medicaid 1115 Transformation Waiver Project Status Report
- Approve Revisions to General Administration Board Policies
- Personnel Report for March 2018
- Texas Council Risk Management Fund Claims Summary as of March 2018
- Texas Council Quarterly Board Meeting Update
- Approve Financial Statements for March 2018
- Board of Trustees Unit Financial Statement as of March 2018

Tri-County Acronyms	
1115	Medicaid 1115 Transformation Waiver
ACT	Assertive Community Treatment
APS	Adult Protective Services
ADRC	Aging and Disability Resource Center
ANSA	Adult Needs and Strengths Assessment
APRN	Advanced Practice Registered Nurse
ARDS	Assignment Registration and Dismissal Services
BJA	Bureau of Justice Administration
BMI	Body Mass Index
C&Y	Child & Youth Services
CAM	Cost Accounting Method
CANS	Child and Adolescent Needs and Strengths
CARE	Client Assignment Registration & Enrollment
CBT	Computer Based Training & Cognitive Based Therapy
CC	Corporate Compliance
CFRT	Child Fidelity Review Team
CHIP	Children's Health Insurance Program
CPS	Child Protective Service
CRCG	Community Resource Coordination Group
CSHI	Cleveland Supported Housing, Inc.
DADS	Department of Aging and Disability Service
DOB	Date of Birth
DRPS	Department of Protective and Regulatory Services
DSHS	Department of State Health Services
Dx	Diagnosis
ETBHN	East Texas Behavioral Healthcare Network
FLSA	Fair Labor Standards Act
FY	Fiscal Year
HCBS-AMH	Home and Community based Services - Adult Mental Health
HCS	Home and Community based Services
HHSC	Health & Human Services Commission
HIPAA	Health Insurance Portability & Accountability Act
HR	Human Resources
ICAP	Inventory for Client and Agency Planning
ICF-IID	Intermediate Care Facility - for Individuals w/Intellectual Disabilities
ICI	Independence Communities, Inc.
IHP	Individual Habilitative Plan
IPP	Individual Program Plan
ITP	Individual Transition Planning (schools)
JUM	Junior Utilization Management Committee
LAR	Legally Authorized Representative
LCDC	Licensed Chemical Dependency Counselor
LCSW	Licensed Clinical Social Worker
LIDDA	Local Intellectual & Developmental Disabilities Authority
LMC	Leadership Montgomery County
LOC	Level of Care (MH)
LOC-TAY	Level of Care - Transition Age Youth
LON	Level Of Need (IDD)

LOSS	Local Outreach for Suicide Survivors
LPHA	Licensed Practitioner of the Healing Arts
LPC	Licensed Professional Counselor
LMSW	Licensed Masters Social Worker
LSFHC	Lone Star Family Health Center
LTD	Long Term Disability
MAC	Medicaid Administrative Claiming
MCHC	Montgomery County Homeless Coalition
MCHD	Montgomery County Hospital District
MCOT	Mobile Crisis Outreach Team
MD	Medical Director/Doctor
MHFA	Mental Health First Aid
MIS	Management Information Services
MOU	Memorandum of Understanding
MSHI	Montgomery Supported Housing, Inc.
MTP	Master Treatment Plan
MVPN	Military Veteran Peer Network
NAMI	National Alliance for the Mentally Ill
NEO	New Employee Orientation
NGM	New Generation Medication
NGRI	Not guilty for Reason of Insanity
PA	Physician's Assistant
PAP	Patient Assistance Program
PASRR	Pre-Admission Screening and Resident Review
PATH	Projects for Assistance in Transition from Homelessness (PATH)
PNAC	Planning Network Advisory Committee
PRS	Psychosocial Rehab Specialist
PQI	Partnership for Quality Improvement
QIDP	Qualified Intellectual Disabilities Professional
QM	Quality Management
QMHP	Qualified Mental Health Professional
RN	Registered Nurse
RPNAC	Regional Planning & Network Advisory Committee
SAMA	Satori Alternatives to Managing Aggression
TAC	Texas Administrative Code
TCBHC	Tri-County Behavioral Healthcare
TCOOMMI	Texas Correction Office on Offenders with Medical & Mental Impairments
TCO	Treatment Co-Occurring Mental Health and Substance Abuse Services
TCRMF	Texas Council Risk Management Fund
TRA	Treatment Adult Services (Substance Abuse)
TRR	Texas Resilience and Recovery
TxHML	Texas Home Living
TRY	Treatment Youth Services (Substance Abuse)
UM	Utilization Management
UW	United Way
YES	Youth Empowerment Services
YMHFA	Youth Mental Health First Aid
YPS	Youth Prevention Services

Updated 4/17/17