

Tri-County Behavioral Healthcare Board of Trustees Meeting

September 24, 2015



Notice is hereby given that a regular meeting of the Board of Trustees of Tri-County Behavioral Healthcare will be held on Thursday, September 24, 2015. 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 10:05 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. Approve Minutes - August 27, 2015

III. Executive Director's Report - Evan Roberson

- A. DSHS
 - 1. Contract Amendment #1
 - 2. NGM Funding
- B. DADS
- C. ICD 10
- D. Patient Assistance Programs

IV. Chief Financial Officer's Report - Tabatha Abbott for Millie McDuffey

- A. FY 2015 Audit
- B. Existing Liberty Property Update
- C. CFO Consortium
- D. 2016 Budget Revision

V. Program Committee

Action Items

- A. Reappoint Mental Health Planning Network Advisory Committee Members.....Page 12
- B. Reappoint Intellectual & Developmental Disabilities Planning Network Advisory Committee Members.....Page 13
- C. Regional Planning Network Advisory Committee's FY 2015 Peer Support Recommendations.....Pages 14-16

Information Items

- D. Community Resources Report.....Pages 17-19
- E. Consumer Services Report for August 2015.....Pages 20-21
- F. Program Updates.....Pages 22-25
- G. Annual Planning Network Advisory Committee Reports.....Pages 26-28
- H. FY 2015 Goals & Objectives Progress Report.....Pages 29-33
- I. 4th Quarter FY 2015 Corporate Compliance & Quality Management Report.....Pages 34-36
- J. Annual Corporate Compliance Report & 1st Quarter FY 2016 Corporate Compliance Training.....Pages 37-39

VI. Executive Committee

Action Items

- A. Appoint Texas Council Representative & Alternate for FY 2016.....Page 40

Information Items

B. Board of Trustees Reappointments & Oaths of Office	Pages 41-45
C. Board of Trustees Committee Appointments	Page 46
D. Analysis of Board Members Attendance for FY 2015 Regular & Special Called Board Meetings	Pages 47-48
E. Personnel Report for August 2015	Pages 49-51
F. Texas Council Risk Management Fund Claims Summary for August 2015	Pages 52-53

VII. Business Committee

Action Items

A. Appoint Building Contractor Interview Subcommittee	Page 54
B. Approve FY 2016 Dues Commitment & Payment Schedule for the Texas Council	Pages 55-57
C. Approve FY 2016-2017 DADS Performance Contract	Page 58
D. Approve DSHS Co-Occurring Mental Health & Substance Abuse Contract #2016-048317-001	Page 59
E. Approve DSHS Youth Treatment Services Contract #2016-048317-002	Page 60
F. Approve DSHS Adult Treatment Services Contract #2016-048497-001	Page 61

Information Items

G. Review Preliminary August 2015 Financial Statements	Pages 62-75
H. 4 th Quarter FY 2015 Investment Report	Pages 76-80
I. Board of Trustees Unit Financial Statement for August 2015	Pages 81-82
J. Montgomery Supported Housing, Inc. Update	Page 83
K. Cleveland Supported Housing, Inc. Monthly Update	Page 84

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

Posted By:

Stephanie Eveland
Executive Assistant

Tri-County Behavioral Healthcare

P.O. Box 3067
Conroe, TX 77305

BOARD OF TRUSTEES MEETING

August 27, 2015

Board Members Present:

Brad Browder
Tracy Sorensen
Patti Atkins
Richard Duren
Morris Johnson
Cecil McKnight
Janet Qureshi

Board Members Absent:

Jacob Paschal
Sharon Walker

Tri-County Staff Present:

Evan Roberson, Executive Director
Millie McDuffey, Chief Financial Officer
Kenneth Barfield, Director of Management Information Systems
Tanya Bryant, Director of Quality Management and Support
Amy Foerster, Director of Human Resources
Kathy Foster, Director of IDD Provider Services
Breanna Robertson, Director of Crisis Services
Stephanie Eveland, Executive Assistant
Tabatha Abbott, Cost Accountant
Melis Papila, Public Information Coordinator
Mary Lou Flynn-DuPart, Legal Counsel

Guests:

None

Call to Order: Chairman, Brad Browder, called the meeting to order at 10:05 a.m. at 1506 FM 2854, Conroe, Texas.

Public Comment: There were no public comments.

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

Resolution #08-15-01

Motion Made By: Patti Atkins

Seconded By: Cecil McKnight, with affirmative votes by Brad Browder, Tracy Sorensen, Richard Duren, Morris Johnson and Janet Qureshi that it be...

Resolved:

That the Board excuse the absences of Jacob Paschal and Sharon Walker.

Resolution #08-15-02

Motion Made By: Tracy Sorensen

Seconded By: Janet Qureshi, with affirmative votes by Brad Browder, Patti Atkins, Richard Duren, Morris Johnson and Cecil McKnight that it be...

Resolved:

That the Board approve the minutes of the July 30, 2015 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 #08-15-03

Motion Made By: Tracy Sorensen

Seconded By: Janet Qureshi, with affirmative votes by Brad Browder, Patti Atkins, Richard Duren, Morris Johnson and Cecil McKnight that it be...

Resolved:

That the Board approve the Goals and Objectives for FY 2016.

Resolution #08-15-04

Motion Made By: Tracy Sorensen

Seconded By: Cecil McKnight, with affirmative votes by Brad Browder, Patti Atkins, Richard Duren, Morris Johnson and Janet Qureshi that it be...

Resolved:

That the Board appoint Ms. Madeline Brogan and Mr. Richard Duren to serve on Tri-County's Consumer Foundation Board of Directors for terms expiring August 31, 2016 and August 31, 2017 respectively.

The Community Resources Report was reviewed for information purposes only.

The Consumer Services Report for July 2015 was reviewed for information purposes only.

The Program Updates were reviewed for information purposes only.

EXECUTIVE COMMITTEE:

Resolution #08-15-05

Motion Made By: Patti Atkins

Seconded By: Morris Johnson, with affirmative votes by Brad Browder, Tracy Sorensen, Richard Duren, Cecil McKnight and Janet Qureshi that it be...

Resolved:

That the Board elect the FY 2016 Board Officers as follows:

- Brad Browder, Chairman
- Sharon Walker, Vice-Chairman
- Tracy Sorensen, Secretary

The Personnel Report for July 2015 was reviewed for information purposes only.

The Texas Council Risk Management Fund Claims Summary for July 2015 was reviewed for information purposes only.

The Texas Council Quarterly Board Meeting Report was provided to the Board members to read at their own leisure.

BUSINESS COMMITTEE:

Resolution #08-15-06

Motion Made By: Morris Johnson

Seconded By: Cecil McKnight, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Janet Qureshi that it be...

Resolved:

That the Board approve the July 2015 Financial Statements.

Resolution #08-15-07

Motion Made By: Morris Johnson

Seconded By: Cecil McKnight, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Janet Qureshi that it be...

Resolved:

That the Board approve the FY 2015 Year End Budget Revision.

Resolution #08-15-08

Motion Made By: Morris Johnson

Seconded By: Tracy Sorensen, with affirmative votes by Brad Browder, Patti Atkins, Richard Duren, Cecil McKnight and Janet Qureshi that it be...

Resolved:

That the Board approve the proposed FY 2016 Operating Budget.

Resolution #08-15-09

Motion Made By: Morris Johnson

Seconded By: Cecil McKnight, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Janet Qureshi that it be...

Resolved:

That the Board approve the purchase of a Dodge Grand Caravan from Liberty-Dayton Chrysler in Liberty, Texas at a price not to exceed \$21,175.40; and, the purchase of a Ford Focus from BJ Ford in Liberty, Texas at a price not to exceed \$15,528.75.

Resolution #08-15-10

Motion Made By: Morris Johnson

Seconded By: Janet Qureshi, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Cecil McKnight that it be...

Resolved:

That the Board approve the transfer of \$500,000 from the Reserved for the 1115 Waiver Programs fund.

Resolution #08-15-11

Motion Made By: Morris Johnson

Seconded By: Patti Atkins, with affirmative votes by Brad Browder, Tracy Sorensen, Richard Duren, Cecil McKnight and Janet Qureshi that it be...

Resolved:

That the Board approve the recommendation to increase the employer contribution toward employee health insurance premiums up to \$400 per employee, per month.

Resolution #08-15-12

Motion Made By: Morris Johnson

Seconded By: Patti Atkins, with affirmative votes by Brad Browder, Tracy Sorensen, Richard Duren, Cecil McKnight and Janet Qureshi that it be...

Resolved:

That the Board approve the DSHS Enterprise Agency Contract #537-16-0124-00035.

Resolution #08-15-13

Motion Made By: Morris Johnson

Seconded By: Cecil McKnight, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Janet Qureshi that it be...

Resolved:

That the Board approve the DSHS Mental Health Projects for Assistance in Transition from Homelessness (PATH) Contract #2016-048162-001.

Resolution #08-15-14

Motion Made By: Morris Johnson

Seconded By: Cecil McKnight, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Janet Qureshi that it be...

Resolved:

That the Board approve the DSHS Youth Prevention-Selective Contract #2016-048029-001.

Resolution #08-15-15

Motion Made By: Morris Johnson

Seconded By: Cecil McKnight, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Janet Qureshi that it be...

Resolved:

That the Board approve the FY 2016-2017 Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) Contract #696-TC-14-15-L037.

Resolution #08-15-16

Motion Made By: Morris Johnson

Seconded By: Patti Atkins, with affirmative votes by Brad Browder, Tracy Sorensen, Richard Duren, Cecil McKnight and Janet Qureshi that it be...

Resolved:

That the Board approve the FY 2016 Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) Services Contract with Educare Community Living Corporation.

Resolution #08-15-17

Motion Made By: Morris Johnson

Seconded By: Patti Atkins, with affirmative votes by Brad Browder, Tracy Sorensen, Richard Duren, Cecil McKnight and Janet Qureshi that it be...

Resolved:

That the Board approve the FY 2016 Avail Solutions, Inc. Contract to provide Crisis Hotline Assessment Services for a maximum allowance of \$66,000.

Resolution #08-15-18

Motion Made By: Morris Johnson

Seconded By: Tracy Sorensen, with affirmative votes by Brad Browder, Patti Atkins, Richard Duren, Cecil McKnight and Janet Qureshi that it be...

Resolved:

That the Board approve the FY 2016 Cypress Creek Hospital Contract to provide Inpatient Psychiatric Services for a maximum allowance of \$650,000.

Resolution #08-15-19

Motion Made By: Morris Johnson

Seconded By: Janet Qureshi, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Cecil McKnight that it be...

Resolved:

That the Board approve the FY 2016 Kingwood Pines Hospital Contract to provide Inpatient Psychiatric Services for a maximum allowance of \$650,000.

Resolution #08-15-20

Motion Made By: Morris Johnson

Seconded By: Patti Atkins, with affirmative votes by Brad Browder, Tracy Sorensen, Richard Duren, Cecil McKnight and Janet Qureshi that it be...

Resolved:

That the Board approve the FY 2016 Physician Contract with Dr. Frank Chen for a maximum allowance of \$65,000.

Resolution #08-15-21

Motion Made By: Morris Johnson

Seconded By: Janet Qureshi, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Cecil McKnight that it be...

Resolved:

That the Board approve the FY 2016 Physician Contract with Dr. Jerri Sethna for a maximum allowance of \$75,000.

Resolution #08-15-22

Motion Made By: Morris Johnson

Seconded By: Janet Qureshi, with affirmative votes by Brad Browder, Tracy Sorensen, Patti Atkins, Richard Duren and Cecil McKnight that it be...

Resolved:

That the Board approve the Hogg Foundation for Mental Health Peer Program Grant.

The Board of Trustees' Unit Financial Statement for July 2015 was reviewed for information purposes only.

The Cleveland Supported Housing, Inc. Monthly Update was reviewed for information purposes only.

The regular meeting of the Board of Trustees recessed at 11:09 a.m. to go into Executive Session in compliance with Texas Government Code Section 551.071, Consultation with Attorney and Section 551.074, Personnel: Executive Director Evaluation.

The meeting of the Board of Trustees reconvened at 11:32 a.m. to go into regular session.

Resolution #08-15-23

Motion Made By: Cecil McKnight

Seconded By: Patti Atkins, with affirmative votes by Brad Browder, Tracy Sorensen, Richard Duren, Morris Johnson and Janet Qureshi that it be...

Resolved:

That the Board extend the Executive Director's contract for five years with a 5% salary increase and all other benefits remain the same.

The regular meeting of the Board of Trustees adjourned at 11:33 a.m.

Adjournment:

Attest:

Brad Browder
Chairman

Date

Browder
Sept. 24, 2015

Tracy Sorensen
Secretary

Date



Executive Director's Report

September 24, 2015

Announcements

- The next Board meeting is scheduled for Thursday, October 22, 2015.
- We are currently waiting for AT&T to install fiber at the 2000 Panther Lane facility in Liberty, Texas. The fiber needs to be installed and the network programmed before we can begin moving folks into the facility. At this time, it appears that it may be November before we can move in. We will provide you with more updates as they become available.
- The cake today is in honor of Mrs. Sharon Walker who celebrated a birthday on September 16th.

Department of State Health Services (DSHS)

- We have seen a draft of **Contract Amendment #1** and expect to receive it any time. This amendment includes \$415,933 in general revenue for adult services and \$126,826 for youth services. Of course, as we discussed last month, it will also include new service targets for both service arrays.

One of the more significant changes to the contract is the movement of categorical **New Generation Medication (NGM) funding** (\$877,750) to general revenue. This change has been requested by Centers for years because Patient Assistance Programs (PAP) has provided free medication to many of our consumers, and Centers wanted to have more flexibility to use this funding for other program needs. Ironically, over the last 2-3 years, we started using more of the NGM money for medications as PAP began to decrease.

The change of NGM funding to regular general revenue means that we must provide local match funding and that this general revenue is subject to DSHS fines. Overall, we are pleased to be free of the administrative requirements which have been associated with the NGM funding.

- In July, Tri-County submitted two Psychiatric Emergency Service Contract (PESC) grants to the State. PESC funds, the same type of funding that funds the PETC, are used to reduce the impact of persons with mental illness in emergency rooms, hospitals, jails and other service systems.

We have received tentative word from the State that we will receive one of the two contracts for the Crisis Intervention Response Team (CIRT) with the City of Conroe. At this time, we do not believe that we will receive funding for the Mental Health Deputy program for Liberty County.

The CIRT pilot partners trained CPD Officers with masters-level licensed professional clinicians during the most active part of the day to be the primary respondent to calls which are believed to involve individuals in behavioral health crises. The goal of the program is to assist officers with behavioral health calls, evaluate persons in behavioral health crises in their natural environment and make appropriate referrals for mental health services thereby reducing the numbers of individuals that inappropriately end up in the Montgomery County jail or local emergency rooms.

DSHS has not yet issued the statement of work for the program, but we have started preliminary work with the City of Conroe on the Memorandum and other administrative steps for the grant. We expect the new PESC contracts to be a part of Contract Amendment #1.

Department of Aging and Disability Services (DADS)

- We have been talking about the number of waiver ‘slots’ that we have been processing in Authority services this year and I thought I would share a couple of statistics from the State on Home and Community-based Services (HCS) and Texas Home Living (TxHmL) enrollments in 2014-2015.

HCS/TxHmL Enrollments as of August 31, 2015

Program	Slots Released (Since 9/1/13)	Enrolled (Since 9/1/13)	Pre-Enrolled / Pending (Since 9/1/13)	Enrolled (8/31/15)	Net Total Enrolled	Target
HCS	8,191	4,645	1,320	375	24,575	24,006
TxHmL	17,373	3,196	1,687	156	7,365	10,373

International Classification of Diseases-Version 10 (ICD-10)

- Effective October 1, 2015, the Federal government will require all providers that bill medical providers to begin using ICD-10 disease codes for billing and reporting. Centers for Medicare and Medicaid Services (CMS) believes ICD-10 will provide benefits such as increased specificity in clinical information that can lead to more accurate and timely reimbursements, better quality of patient care, and improved disease and care management. ICD-9 has approximately 13,000 codes while ICD-10 has 68,000 codes. ICD-10 has been used in Europe since 1994.

On September 30th, we must use ICD-9 codes and on October 1st, we must use ICD-10 codes. Anytime the system has to make a knife's edge change like this one, we anticipate challenges. Staff have been preparing for this transition for several months and we believe that we are prepared for this system change which will impact all of our insurance billing. I will provide an update at the next meeting on this transition.

Patient Assistance Programs (PAP)

- In FY 2015, Tri-County received \$6.2 million worth of PAP medications for our consumers. Staff have been concerned, since the Affordable Care Act, that these free medications would not be available for our consumers and that this would drive up our costs for services. We were recently notified by Novartis that the NGM, Abilify, would no longer be available via PAP application. Last year, we prescribed just over \$1.5 million worth of PAP Abilify to our consumers. Our prescribers will switch a portion of these consumers to other medications, but some consumers will need to stay on Abilify at the Center's cost.

We have concerns that this PAP trend may accelerate in the near future and we are monitoring it closely. In addition to the obvious problem it causes to cover the cost of these medications with general revenue, we are also concerned because the PAP funding is one of our key sources of local match dollars. We will continue to update the Board as significant changes in PAP programs occur.

CHIEF FINANCIAL OFFICER'S REPORT

September 24, 2015

FY 2015 Audit – We had our auditors on site the first week of September. This visit focused on contract compliance and review of our processes and procedures. The next visit will be more focused on the financial statements and our fixed assets and depreciation. They will be returning for their final visit on November 2nd through November 6th. In the meantime we have a listing of about 50 items to prepare before they return.

Existing Liberty Property Update – Word is getting around about Tri-County's future move to a new facility. We have had 3 calls from people that are interested in the current Liberty Life Skills building. One is the neighbor of this facility, Tomoe Engineering. As soon as we vacate the existing buildings we will get inside and clean them up and put them on the market for sale. Hopefully we will see at least one building sell very fast.

CFO Consortium – Millie and Sheryl are at the CFO meeting in Austin. They will return on Friday. This is the first meeting for this fiscal year and that is usually when we talk about changes in our contracts and such items that relate to all centers. As was reported at the last Board meeting this is the items to be discussed on the agenda.

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

- Update from Lee Johnson – Texas Council
- Single Audit Rule Changes – Presented from Diane Terrell
- Billed Charges - Presentation from Matt Tinsley
- Update from Managed Care Steering Committee Presented by April Johnson-Calvert
- Certified Community Behavioral Health Care Clinics and PPS – presented Jolene Rasmussen, Texas Council
- Committee Updates
- Investment Training – Linda Patterson

FY 2016 Budget Revision – Probably at the December Board meeting we will have the first budget revision for FY 2016. We did receive preliminary numbers from DSHS for additional funding. The amount for adults will be an increase of \$415,933 and the additional amount for children's is \$126,826. These numbers still could change slightly when we receive the final Amendment #1 packet. We still have to plan how to spend these funds to get the most benefit for our consumers so we will be working on that between now and December.

<p>Agenda Item: Reappoint Mental Health Planning Network Advisory Committee Members</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>According to the bylaws for the Mental Health Planning Network Advisory Committee (MHPNAC), one-half of the members are to be reappointed by the Board of Trustees every year, for two-year terms. There is no limit on the number of terms that a committee member can serve.</p> <p>Each of the following members has an expiring term and has been contacted about their participation in the MHPNAC. They have agreed to continue serving on the MHPNAC for an additional two-year term which will expire August 31, 2017.</p> <ul style="list-style-type: none"> • Richard Duren - <i>Family Member</i> • Judie Hunter - <i>Special Education Parent Resource Center Coordinator for Conroe Independent School District and Parent</i> • Barbara Grogan - <i>Special Education Parent Resource Center Coordinator for Conroe Independent School District and Parent</i> <p>We currently have six MHPNAC members, but we are in need of nine members to be in compliance with the contract requirements. If you know of anyone that may be interested in PNAC membership, please contact Tanya Bryant.</p>	
<p>Supporting Documentation:</p> <p>None</p>	
<p>Recommended Action:</p> <p>Reappoint Mental Health Planning Network Advisory Committee Members to a Two-Year Term Which Expires August 31, 2017</p>	

<p>Agenda Item: Reappoint Intellectual and Developmental Disabilities Planning Network Advisory Committee Memebers</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>According to the bylaws for the Intellectual and Developmental Disabilities Planning Network Advisory Committee (IDDPNAC), one-half of the members are to be reappointed by the Board of Trustees every year, for two-year terms. There is no limit on the number of terms that a member can serve.</p> <p>Each of the following members has an expiring term and has been contacted about their participation in the IDDPNAC. They have agreed to continue serving on the IDDPNAC for an additional two-year term which will expire August 31, 2017.</p> <ul style="list-style-type: none"> • Mary Byrne - <i>Special Education Teacher at Conroe Independent School District and Parent</i> • Judie Hunter - <i>Special Education Parent Resource Center Coordinator for Conroe Independent School District and Parent</i> • Madeline Brogan - <i>Professor of Accounting at Lone Star College and Parent</i> • Barbara Grogan - <i>Special Education Parent Resource Center Coordinator for Conroe Independent School District and Parent</i> <p>We currently have eight IDDPNAC members, but we are in need of nine members to be in compliance with the contract and would gladly accept additional members beyond contract requirements. If you know of anyone that may be interested in PNAC membership, please contact Tanya Bryant.</p>	
<p>Supporting Documentation:</p> <p>None</p>	
<p>Recommended Action:</p> <p>Reappoint Intellectual and Developmental Disabilities Planning Network Advisory Committee Members to a Two-Year Term Which Expires August 31, 2017</p>	

<p>Agenda Item: Regional Planning Network Advisory Committee's FY 2015 Peer Support Recommendations</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>Tri-County, as a member of the East Texas Behavioral Healthcare Network (ETBHN), collaborates with member Centers for the provision of certain administrative support. ETBHN formed a Regional Planning Network Advisory Committee (RPNAC) made up of at least one PNAC member from each ETBHN member Center (although it can be as many as two from each Center). At least one of Tri-County's PNAC members and the Administrator of Quality Management attend the quarterly RPNAC meetings. RPNAC members, Leadership staff and Quality Management staff work with other ETBHN Centers to meet the following goals:</p> <ul style="list-style-type: none"> • To assure that the ETBHN network of providers will continuously improve the quality of services provided to all clients through prudent mediation by network leadership. • To continuously evaluate efforts to improve clinical outcomes and practices. • To maintain a process by which unacceptable outcomes, processes, and practices can be identified. • Evaluations shall take place one Center program at a time as determined by the Regional Oversight Committee (ROC). ETBHN will collect and compile data and distribute it to member Centers. <p>The RPNAC reviewed Peer Support Survey results for each Center. This evaluation represents part of an ongoing effort to gather information to assure the Local Authority Management Team and Board of Trustees that any problems identified are properly understood and addressed.</p> <p>Based on the findings from the RPNAC Peer Support Comprehensive Study, which included evaluation of peer services at Tri-County Behavioral Healthcare as well as the other ETBHN Centers, several recommendations were made in the attached report.</p>	
<p>Supporting Documentation:</p> <p>ETBHN RPNAC Peer Support Comprehensive Study</p>	
<p>Recommended Action:</p> <p>Take Action as Appropriate</p>	

REGIONAL PLANNING AND NETWORK ADVISORY COMMITTEE

Peer Support Survey

RECOMMENDATIONS

LOCAL AUTHORITY: TRI-COUNTY BEHAVIORAL HEALTHCARE

EXECUTIVE SUMMARY:

It is the policy of TRI-COUNTY BEHAVIORAL HEALTHCARE to have a procedure in place for the systematic and objective evaluation of services on a routine basis and that best use of public money is considered in Network Development. To ensure this, TRI-COUNTY BEHAVIORAL HEALTHCARE will assure that each of its decisions involving Network Development and Provider Procurement considers the results of service evaluations. In general, a service evaluation determination is an evaluation of the overall worth of a service. Many subjective elements are involved in such an assessment, but it is the role of the Center Board, the Center staff, and the Regional Planning and Network Advisory Committee (RPNAC) to attempt to quantify and qualify various aspects of services into objective measures that can be applied to all services and providers.

The RPNAC will make reports to each East Texas Behavioral Health Network (ETBHN) members' board/governing body regarding planning, development, design, management, and evaluation of the local provider network, including but not limited to:

- Client care issues in Network development;
- Consumer choice issues in Network development;
- Ultimate cost-benefit issues in Network development; and
- Best use of public money in Network development.

The FY 2015 Department of State Health Services and Department of Aging and Disability Services Performance Contracts requires that each Local Authority have a process to establish outcome and reporting requirements. For the Member Centers of ETBHN, the Regional Planning and Network Advisory Committee is charged with this required evaluation. The ETBHN Regional Oversight Committee selects the services for evaluation. The final recommendations from the RPNAC are compiled for distribution to the respective Centers' Board of Trustees.

This evaluation represents part of an ongoing effort to gather information to assure the Local Authority Management Team and Board of Trustees that any problems identified are properly understood and addressed. While the purpose of these evaluations is to examine the Local Authority's needs and capabilities of the current system, it is also important to note that, in time, this process will also allow Local Authorities to utilize trends in provider services and consumer utilization. In turn, a Local Authority can use this data to ensure the proper capacity of its provider network to ensure the best interests of the consumers are met.

The Regional Planning and Network Advisory Committee is comprised of members representing each of the eight Centers of the East Texas Behavioral Healthcare Network, appointed by the Local Authority Board/Governing Body of each respective Member Center.

Peer Support Survey:

Each Center's Peer Support staff were surveyed in the last quarter of FY15. The results were compiled and reviewed by the RPNAC. The survey is attached to these recommendations. As a result of the review by the RPNAC the following recommendations were made:

RECOMMENDATIONS:

- 1. Due to the belief that many staff may not understand the role of Peer Support Staff, it was recommended that the RPNAC have a workgroup to design a training through Relias Staff Development software to address this.*
- 2. ETBHN had two grants from the Hogg Foundation that provided WRAP training. The first grant expired at the end of July 2015 and the second grant is due to expire at the end of March, 2016. The RPNAC recommends that ETBHN continue to assist with WRAP training for Peers past the point of the grant.*
- 3. The RPNAC would like to see a salary comparison of what Peer Support Specialists are making at each ETBHN Center. Of course, cost of living differences in the geographic location need to be taken into account. Also, a duty comparison between Centers of Peer Support staff would need to be a part of this.*

These recommendations are made to all of the ETBHN member centers.

Agenda Item: Community Resources Report Committee: Program	Board Meeting Date September 24, 2015
Background Information: None	
Supporting Documentation: Community Resources Report	
Recommended Action: For Information Only	

Community Resources Report

August 28, 2015 – September 24, 2015

Volunteer Hours:

Location	August
Conroe	398.75
Cleveland	6
Liberty	20
Huntsville	21.5
Total	446.25

COMMUNITY ACTIVITIES:

8/28/15	Regional Managed Assigned Counsel Meeting	Sugarland
8/29/15	Supportive Event for Operation Military Embrace	Conroe
9/1/15	Montgomery County United Way Health & Wellness Impact Council Meeting	The Woodlands
9/2/15	American Legion Executive Board Meeting	Conroe
9/2/15	VFW Monthly Meeting	Conroe
9/3/15	Walker County Community Resource Coordination Group	Huntsville
9/3/15	Cleveland Chamber of Commerce Luncheon	Cleveland
9/3/15	United Way Campaign Breakfast	The Woodlands
9/8/15	Walker County Community Planning Meeting	Huntsville
9/8/15	Montgomery County Community Assistance Recovery Efforts & Services (MC-CARES) Meeting	Conroe
9/8/15	American Legion Monthly Meeting	Conroe
9/9/15	Veteran's Treatment Court	Conroe
9/9/15	Montgomery County Homeless Coalition Board Meeting	Conroe
9/9/15	Walker County Child Fatality Review Team Meeting	Huntsville
9/10/15	Huntsville Chamber of Commerce Breakfast	Huntsville
9/10/15	Quality Management/Utilization Management Consortium	Austin
9/10/15	Liberty County Community Resource Coordination Group	Cleveland
9/10/15	Gulf Coast Veterans Family Fun Day	Hitchcock
9/11/15	Liberty County Probation Meeting-Program Guidelines	Liberty
9/12/15	Launch of National Night Out	The Woodlands
9/15/15	Montgomery County Community Resource Coordination Group	Conroe
9/16/15	Liberty/Dayton Chamber of Commerce Luncheon	Liberty
9/16/15	Fusion Network Luncheon	The Woodlands
9/16/15	RHP 17 Biannual Learning Collaborative Event	College Station
9/17/15	ASK About Suicide Training	Fort Worth
9/17/15	Volunteers of America (VOA) Community Meeting	Conroe
9/17/15	Montgomery County Homeless Coalition Community Meeting	Conroe

9/22/15	Lone Star College Benefits Fair	CyFair
9/23/15	Veterans Treatment Court	Conroe
9/23/15	Willis Hour Radio	Conroe

UPCOMING ACTIVITIES:

9/29/15	Chamber of Commerce Awards Luncheon	The Woodlands
10/1/15	Cleveland Chamber of Commerce Luncheon	Cleveland
10/1/15	Walker County Community Resource Coordination Group	Huntsville
10/5/15	Montgomery County Homeless Coalition Board Meeting	Conroe
10/6/15	Montgomery County United Way Health & Wellness Impact Council Meeting	The Woodlands
10/7/15	Leadership Montgomery County Alumni Session	The Woodlands
10/8/15	Huntsville Chamber of Commerce Breakfast	Huntsville
10/20/15	Montgomery County Community Resource Coordination Group	Conroe
10/21/15	Liberty/Dayton Chamber of Commerce Luncheon	Liberty

Agenda Item: Consumer Services Report for August 2015 Committee: Program	Board Meeting Date September 24, 2015
Background Information: None	
Supporting Documentation: Consumer Services Report for August 2015	
Recommended Action: For Information Only	

Consumer Services Report

August 2015

Consumer Services	Montgomery County	Cleveland	Liberty	Walker County	Total
Crisis Services, MH Adults/Children					
Persons Screened, Intakes, Other Crisis Services	438	31	32	51	552
Crisis and Transitional Services (LOC 0, LOC 5)	42	1	0	1	44
Psychiatric Emergency Treatment Center (PETC) Served	66	3	3	7	79
Psychiatric Emergency Treatment Center (PETC) Bed Days	299	21	9	31	360
Contract Hospital Admissions	23	0	1	4	28
Diversion Admits	13	0	0	1	14
Total State Hospital Admissions	21	0	0	4	25
Routine Services, MH Adults/Children					
Adult Service Packages (LOC 1m,1s,2,3,4)	913	120	94	122	1249
Adult Medication Services	714	74	74	80	942
Child Service Packages (LOC 1-4 and YC)	387	43	15	47	492
Child Medication Services	218	21	5	18	262
TCOOMMI (Adult Only)	105	13	6	6	130
Adult Jail Diversions	5	0	0	0	5
Persons Served by Program, IDD					
Number of New Enrollments for IDD Services	28	2	0	5	35
Service Coordination	566	40	53	67	726
Persons Enrolled in Programs, IDD					
Center Waiver Services (HCS, Supervised Living, TxHmL)	44	6	22	27	99
Contractor Provided ICF-MR	18	11	11	6	46
Substance Abuse Services					
Children and Youth Prevention Services	0	0	34	23	57
Youth Substance Abuse Treatment Services/COPSD	17	0	0	1	18
Adult Substance Abuse Treatment Services/COPSD	23	0	0	1	24
Waiting/Interest Lists as of Month End					
Home and Community Based Services Interest List	1573	130	136	136	1954
August Served by County					
Adult Mental Health Services	1256	132	113	170	1671
Child Mental Health Services	432	49	17	52	550
Intellectual and Developmental Disabilities Services	646	51	57	72	826
Total Served by County	2334	232	187	294	3047
July Served by County					
Adult Mental Health Services	1282	141	112	193	1728
Child Mental Health Services	427	49	17	55	548
Intellectual and Developmental Disabilities Services	641	55	58	71	825
Total Served by County	2350	245	187	319	3101
June Served by County					
Adult Mental Health Services	1303	156	121	166	1746
Child Mental Health Services	441	49	21	60	571
Intellectual and Developmental Disabilities Services	642	59	55	74	830
Total Served by County	2386	264	197	300	3147

Agenda Item: Program Updates Committee: Program	Board Meeting Date September 24, 2015
Background Information: None	
Supporting Documentation: Program Updates	
Recommended Action: For Information Only	

Program Updates

August 28, 2015 – September 24, 2015

MH Crisis Services

1. The Director of Nursing (DON) position at the PETC continues to remain vacant and few applications have been received. An RN at the Crisis Stabilization Unit (CSU) is currently standing in as a Nursing Liaison during this interim until a DON is hired.
2. The FY 2015 target for number of individuals served at the CSU was exceeded. More individuals were served at the PETC than previous years.
3. All required building modifications identified from the June state survey have been completed. Anti-ligature door hinges were installed in September.
4. Ongoing building modification needs will be determined and addressed through the interventions listed below:
 - a. Monthly PETC Safety Committee meetings.
 - b. Identification of an outside consultant that specializes in behavioral health facility design that can assist in ensuring the PETC is compliant with current trends.

MH Adult Services

1. Two (2) of our Routine Assessment and Counseling Clinicians attended CBT training at the Behavioral Health Institute Conference in Austin from August 10-12th. One (1) clinician has submitted a tape for review through the Academy of Cognitive Therapy (ACT) and we anticipate the results in the coming weeks.
2. We have been notified that training will be offered for Cognitive Processing Therapy (CPT), which is used to treat Post Traumatic Stress Disorder (PTSD), in November. There are two (2) therapists interested in attending this training. Once trained, we will begin offering counseling for PTSD, which has been identified as a need in our community.
3. The supervisors at William E. Hall (WEH) have been meeting each morning to discuss objectives for the day for each supervisor. This has been beneficial in prioritizing tasks and new and on-going projects.
4. All FY 2015 performance targets were met for PATH, Rider 65 and Supported Housing.
5. Turnover at WEH has stopped and five (5) new QMHPs were hired in August. There are three (3) additional vacancies remaining and the WEH Hiring Committee has been working hard on finding qualified staff that are a good organizational fit.

MH Child Services

1. We have implemented the Youth Empowerment Services (YES) Waiver. The goal of YES services is to reduce re-hospitalization and institutionalization of youth and children with intensive mental health needs by providing more comprehensive community and home-based services.
2. We are working closely with various school systems who are concerned about students missing school to participate in mental health treatment. We want to honor the school

systems' mission of education by coordinating ways to provide necessary services to keep the students emotionally well so they can participate better in school.

Criminal Justice Services

1. TCOOMMI approved a new Intensive Case Manager position to serve Liberty County Parole and Probation.
2. Outpatient Competency Restoration served fifteen (15) people in FY 2015 to meet the DSHS target.
3. Fifteen (15) individuals were diverted from the jail for treatment in FY 2015.
4. Jail Diversion admitted one (1) in the first week of FY 2016.
5. The Jail Services Clinician triaged 46 individuals in August.

Substance Abuse Services

1. A candidate was hired to fill the Youth Prevention Program Manager position.
2. We have also received the contract for the Youth Substance Abuse Prevention Program for FY 2016. Although several targets are higher than last fiscal year, these targets are comparable to the mid-year revision numbers. The prevention team is aware of the new targets and are actively preparing to meet these numbers by communicating with schools and community agencies about program offerings and scheduling opportunities to begin delivering services.

IDD Services

1. Through the Pre-Admission, Screening and Review (PASRR) process, seven (7) individuals were moved from nursing facilities to the community, and seven (7) individuals were diverted from admission into a nursing facility for this fiscal year.
2. The IDD Authority Psychologist has been a great asset in ensuring psychological testing meets state compliance and assuring quality testing for those seeking services.
3. We have received an increase in number of individuals requesting Day Habilitation services. We anticipate the number to significantly increase when Liberty LifeSkills is moved to a larger location as we have been capped there due to space.

Support Services

1. **Utilization Management:**
 - a. Beginning on September 1, 2015, Managed Care Organizations are no longer required to follow the Texas Resiliency and Recovery Utilization Guidelines and may deny service authorizations and override requests within the context of their own guidelines. Utilization Management staff have continued to work closely with Managed Care representatives to ensure that quality continuity of care continues for the individuals we serve. We will continue to monitor this process and work with the Texas Council as issues arise with the authorization process.

2. **Veteran Affairs:**
 - a. The hiring process has started for a part-time Veteran Services Assistant.
 - b. A formal Memorandum of Understanding (MOU) with Montgomery County Attorney's Office has been initiated to provide the mentor program for Veterans Treatment Court.
 - c. A training class with a focus on military culture and Veteran services was created for the Montgomery County Sheriff's Office.
3. **Intellectual/Developmental Disabilities Planning Network Advisory Committee (IDDPNAC):**
 - a. The IDDPNAC met on August 19th to discuss plans for the next fiscal year, committee membership renewals and Center updates. Tri-County staff provided the group with an overview of the IDD ACT program.

<p>Agenda Item: Planning Network Advisory Committee Annual Reports</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>According to their bylaws, both the Mental Health and Intellectual and Developmental Disabilities Planning Network Advisory Committees (PNACs) are required to make a written report to the Board that outlines the committees' activities for the year and reports on committee attendance. The attached reports on the two committees' activities are provided for your information.</p>	
<p>Supporting Documentation:</p> <p>Mental Health PNAC Annual Report</p> <p>Intellectual and Developmental Disabilities PNAC Annual Report</p>	
<p>Recommended Action:</p> <p>For Information Only</p>	

Mental Health Planning Network Advisory Committee

Annual Report

FY 2015

In FY 2015, the Mental Health Planning Network Advisory Committee (MHPNAC) discussed many changes that have been taking place in the Mental Health Service System across the State including the new Health and Human Services (HHSC) Design, Pre-Admission, Screening and Resident Review (PASRR), and the implementation of various programs such as the Youth Empowerment Services (YES) Waiver, and the addition of the 1115 Extended Observation Unit (EOU).

The committee also spent time reviewing and learning about other areas of interest to Tri-County through a series of discussions and presentations on different program areas, including the ACT program, Veterans Services, Community Outreach, and the three HUD housing projects. They were very complimentary of these programs and were especially excited for the housing opportunity coming available to Cleveland through Independence Oaks Apartments. The MHPNAC also expressed interest in the new Montgomery County building consolidation plans, and the future plans for enhancing Tri-County. The committee was pleased to learn about the new public transportation made available in Conroe.

Recommendations from the MHPNAC to the Management Team and Board of Tri-County Behavioral Healthcare include continuing to improve community relationships specifically through involvement within the school system, continuing to seek opportunities for low income housing that could help to address the high homeless population in our service area, and continuing to focus on expanding transportation options.

In FY 2015, the MHPNAC met five times for regularly scheduled meetings. The overall attendance of this committee was 70% during the last year.

The MHPNAC has six members and is currently seeking three additional members to be in compliance with contract requirements.

Intellectual and Developmental Disabilities Planning Network Advisory Committee

Annual Report

FY 2015

In FY 2015, the Intellectual and Developmental Disabilities Planning Network Advisory Committee (IDDPNAC) provided feedback on the rebranding of Tri-County Services to Tri-County Behavioral Healthcare and has expressed great interest in the building consolidation process for Montgomery County including the benefits it will provide to the individuals served as well as for community awareness.

The committee reviewed and discussed several topics and programs over the past year including the IDD ACT program, changes to the Pre-Admission, Screening and Resident Review (PASRR) process, the Community First Choice (CFC) Waiver program, and the release of TxHmL and HCS slots for our service area.

Recommendations from the IDDPNAC to the Management Team and Board of Tri-County Behavioral Healthcare included the importance of continuing to ensure community members are aware of the rebranding, specifically as it relates to IDD services and that the agency continues to discuss ideas to help individuals in the community gain awareness of interest lists, available resources, and renewal processes (navigating the system to avoid loss of benefits).

In FY 2015, the IDDPNAC met four times and had an overall attendance of 66%.

The IDDPNAC has retained membership and gained one new member in FY 2015. There are eight members and we are currently seeking one additional member to be in compliance with contract requirements.

Agenda Item: FY 2015 Goals and Objectives Progress Report Committee: Program	Board Meeting Date September 24, 2015
Background Information: <p>The Board of Trustees and Management Team met on July 19, 2014 for the annual strategic planning retreat to develop the goals for FY 2015. Goals were discussed and a consensus was reached. Subsequently, the Management Team developed objectives for each of the goals. These goals are in addition to the contractual requirements of the Center's contracts with the Department of State Health Services and the Department of Aging and Disability Services.</p> <p>The Board also requested that quarterly progress reports be presented as a "year-to-date summary."</p> <p>This report shows progress through the 4th Quarter of FY 2015.</p>	
Supporting Documentation: FY 2015 Goals and Objectives Progress Report	
Recommended Action: For Information Only	

Year-to-Date Progress Report

September 1, 2014 – August 31, 2015

Goal #1 – Community Awareness

Objective #1

Develop new name/logo branding materials and market them to our stakeholders by February 28, 2015.

- The name, Tri-County Behavioral Healthcare, was approved by all three (3) Commissioners' Courts and staff filed the necessary documents to make this final.
- The new logo and tagline were approved by the Board in April and rebranding efforts have begun.

Objective #2

Develop or renew four (4) collaborative relationships/partnerships by May 31, 2015.

- A series of training and outreach events have been held with the Montgomery County Hospital District EMTs.
- We developed a memorandum of understanding with MHMRA Brazos Valley so they can begin utilizing the Crisis Stabilization Unit in the third quarter.
- The Veterans Task Force was created and a Veteran's Expo was planned for March 17th.
- An informal workgroup was established to collaborate with Conroe ISD on a type of pilot program that works with children with complex needs.

Objective #3

Develop four (4) educational/outreach/marketing events by May 31, 2015.

- Eleven (11) Mental Health First Aid trainings have been held year-to-date with one (1) additional staff member, eight (8) educators and 92 non-educators trained.

Goal #2 – Funding

Objective #1

Develop sponsors/underwriters for educational/outreach/marketing events in our community.

- Our Veteran's Liaison secured sponsors for the Veteran's Expo in March.

Objective #2

Develop a Board Policy about establishing a trust fund to benefit Tri-County consumers by December 31, 2014.

- In December, the Board agreed to form a Tri-County Consumer Foundation.
- A Board Policy on the creation of the foundation was approved.

Objective #3**Develop a trust fund to benefit Tri-County consumers by August 31, 2015.**

- Staff are working with legal staff from Jackson Walker to officially form the new organization. The Board will need to approve the formation documents once they are completed.
- Two (2) informational Foundation Board meetings were held in the fourth quarter, and three (3) Board Directors were identified.
- The Tri-County Board approved Patti Atkins, Richard Duren and Madeline Brogan as founding members of Tri-County's Consumer Foundation.

Goal #3 – Staff Development**Objective #1****Schedule four (4) leadership development courses for managers in FY 2015.**

- A leadership development course on Employment Law was held in the first quarter. A second leadership development course was scheduled for the fourth quarter.
- Dr. Watson presented parts 1 and 2 of his Leadership Development Series in February.
- Three (3) Middle Managers were scheduled to attend the National Council's Middle Management Academy in San Antonio in the third quarter.
- Leadership Tri-County, a monthly management series with Jon Stigliano, began in the third quarter and will continue for ten (10) months. Managers were selected by the Management Team to attend this training, and feedback from these managers is very positive.

Objective #2**Implement quarterly supervisor training in FY 2015.**

- The first quarter supervisor training was held in November and focused on FMLA, ADA accommodations and leave.
- Financial training for supervisors was scheduled in the third quarter.
- Fourth quarter supervisor training was held in June and focused on new Human Resources procedures.

Objective #3**Hold at least four (4) Texas Council Risk Management Fund training events in FY 2015.**

- September 23, 2014
 - Communicating Effectively
 - Situational Leadership
- November 5, 2014
 - Dealing Effectively with Supervisors
 - Are You Thriving or Surviving
- November 6, 2014
 - Dealing with Difficult People
 - Dealing Effectively with Supervisors

- February 10 & 11, 2015
 - Interviewing & Selection
 - Time Management
- April 21 & 22, 2015
 - Ethics for Managers
 - Effective Delegation
 - Ethics for Staff

Goal #4 – Facilities

Objective #1

Develop a facility consolidation plan with the assistance of consultants that can be presented to DSHS/DADS/County Judges/stakeholders by February 28, 2015.

- The Board approved the purchase of 2000 Panther Lane in Liberty, Texas which will serve persons with mental illnesses and intellectual disabilities.
 - Staff finalized and sent paperwork to DSHS/DADS for approval of this site.
 - Construction is underway to remodel the facility with an anticipated grand opening date of October 5, 2015.
- Architects were hired to develop a site plan for the consolidated Montgomery County facility. Staff met with the architects regularly to develop a building design that is now being finalized.
- Staff worked with our building consultant to find and secure a suitable location for the consolidated facility in Montgomery County.
 - The potential building site is currently under option.
 - Construction is anticipated to begin by January 1, 2016.

Objective #2

Provide quarterly progress updates to the Board regarding building consolidation.

- Board updates were provided in October, January, February, April and July.

Objective #3

Attain approval from DSHS/DADS/commissioners for the facility consolidation plan by May 31, 2015.

- Approval was received from DSHS and DADS to purchase the facility in Liberty.
- Documents are being prepared to seek approval from DSHS and DADS for the facility in Montgomery County.

Goal #5 – Technology

Objective #1

Develop a technology plan for the consolidated facility including cost projections.

- The Board approved a set of information technology equipment and related upgrades which will serve as the platform for the server room at a consolidated facility.

- The kickoff meeting for the install for the server room changes was held in late February and the installation was completed in August.
- Phone system upgrades were also approved and this system will be implemented in early FY 2016.

Objective #2

Develop a new staffing plan for Information Technology and hire at least one (1) of these staff by February 28, 2015.

- Technical certification trainings were provided for an existing employee to gain the skills necessary to fill IT staffing gaps.
- A programmer was hired in the fourth quarter.

Agenda Item: 4 th Quarter FY 2015 Corporate Compliance and Quality Management Report Committee: Program	Board Meeting Date September 24, 2015
Background Information: The Department of State Health Services' Performance Contract has a requirement that the Quality Management Department provide "routine" reports to the Board of Trustees about "Quality Management Program activities." Although Quality Management Program activities have been included in the program updates, it was determined to be appropriate, in light of this contract requirement, to provide more details regarding these activities. Since the Corporate Compliance Program and Quality Management Program activities are similar in nature, the decision was made to incorporate the Quality Management Program activities into the Quarterly Corporate Compliance Report to the Board and to format this item similar to the program updates. The Corporate Compliance and Quality Management Report for the 4 th quarter of FY 2015 are included in this Board packet.	
Supporting Documentation: 4 th Quarter FY 2015 Corporate Compliance and Quality Management Report	
Recommended Action: For Information Only	

Corporate Compliance and Quality Management Report

4th Quarter, FY 2015

Corporate Compliance Activities

A. Key Statistics:

1. There were four (4) Corporate Compliance reviews in the 4th quarter of FY 2015.
 - a. Two of the reviews resulted from Quality Management auditing activities. Both cases resulted in additional staff training and did not have any associated payback.
 - b. One case was reported by a program manager and involved a Service Coordinator whose daytime work activities were in question. Following initial review it was unconfirmed without payback. The case was forwarded back to the staff's supervisor.
 - c. The fourth case was reported by a staff at the PETC who felt like he was being asked to enter documentation that violated compliance laws. Following review and interviews with other staff in the department it was unconfirmed without payback. Additional training was provided to the staff.
2. Quality Assurance of staff documentation continues to be a focus across the Center. The Quality Management Department continues to perform daily reviews of documentation in order to identify any compliance or billing concerns and correct them immediately. Compliance training continues to be provided to new employees, quarterly to all staff, and in specific areas identified as having a need.

B. Committee Activities:

1. The Corporate Compliance Committee met on August 12, 2015. The committee reviewed the following:
 - a. A summary of the 3rd quarter investigations;
 - b. Audits that were requested by different funding sources;
 - c. Findings of daily Quality Assurance reviews; and
 - d. Legal updates on compliance issues

Quality Management Initiatives

A. Key Statistics:

1. Staff responded to one (1) Managed Care on-site audit request.
2. Staff responded to eight (8) Managed Care chart requests.

B. Reviews/Audits:

1. United Behavioral Healthcare (UBH) performed an on-site review on August, four (4) of six (6) client records provided were reviewed. The review resulted in a score of 100%.
2. Staff reviewed and submitted nine (9) charts going back one year for Medicaid/CHIP. The request focused on medication services.

3. Staff reviewed and submitted twenty-six (26) charts going back one year for Amerigroup. This included two separate record requests and focused on medication services.
4. Staff reviewed and submitted one (1) chart for a claims dispute involving two services provided in April 2015.
5. Staff reviewed and submitted one (1) chart going back one year for Aetna. The request focused on medication services.
6. Staff reviewed and submitted four (4) charts going back one year for Optum. The request involved the full medical records and were for children's services.
7. Staff reviewed and submitted two (2) charts for Optum involving crisis service episodes which occurred in April and May of 2015.
8. Staff reviewed and prepared three (3) full charts for an upcoming on-site review.

C. Internal Programs Reviewed by Quality Management:

1. The Quality Management Department is currently reviewing the Internal Program Review Process to ensure best value for the Center.

D. Other Quality Management Activities:

1. Following the implementation of our revised Recovery Plan, we received a request to utilize our revisions from another LMHA. Since this time, we have received feedback that they were highly praised by DSHS during their recent on-site Quality Management review for this recovery plan.
2. Staff are finalizing training checklists and auditing Human Resources training files to ensure that all required trainings are quickly accessible by administrative staff during future audits.

Agenda Item: Annual Corporate Compliance Report and 1 st Quarter FY 2016 Corporate Compliance Training Committee: Program	Board Meeting Date September 24, 2015
Background Information: The Corporate Compliance Officer is required by Board Policy to submit quarterly reports on Corporate Compliance activities to the Board of Trustees as well as an Annual Report at the end of each fiscal year. The Annual Corporate Compliance Report for FY 2015 is attached along with the educational information that has been provided to Center staff. The education portion is included in this packet for on-going education of the Tri-County Board of Trustees on Corporate Compliance issues.	
Supporting Documentation: Annual Corporate Compliance Report 1 st Quarter FY 2016 Corporate Compliance Training	
Recommended Action: For Information Only	

Corporate Compliance Program

FY 2015 Annual Report

General Overview:

The Board Policy on Corporate Compliance requires that the Corporate Compliance Officer present an annual report on program activities and investigations from the previous year.

In FY 2015, face-to-face training continued for all new employees and quarterly trainings were provided to all Tri-County staff and eligible contractors.

As the Board is likely aware, compliance regulations and auditing have remained a high priority at the state and federal level. Staff remain diligent in our pursuit of legal compliance with all regulations.

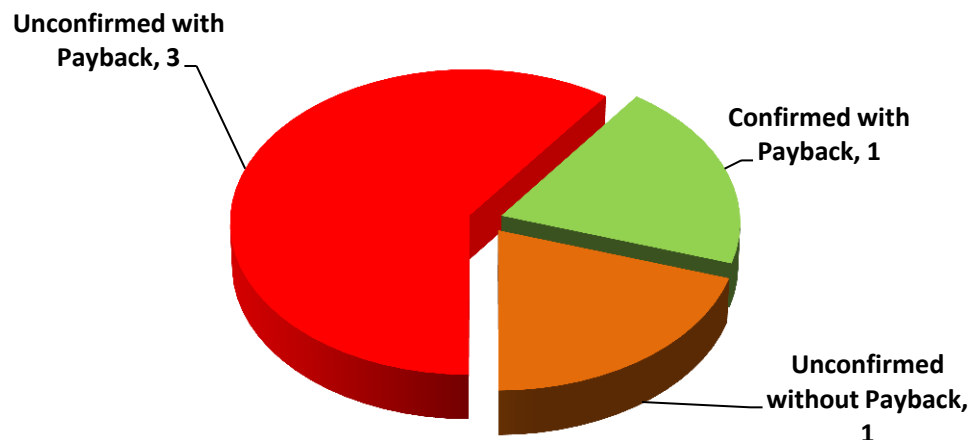
The Corporate Compliance Committee has reviewed and has made revisions to the Corporate Compliance Action Plan. The Committee also continues to review legal updates on a consistent basis.

Corporate Compliance Investigation Results:

In FY 2015, eleven (11) corporate compliance allegations were reviewed, five (5) of which ended up being investigated by the Corporate Compliance Officer; six (6) did not require an investigation following initial review. Of the five (5) cases investigated in FY 2015, three (3) were unconfirmed with payback, one (1) was unconfirmed without payback, and one (1) was confirmed with payback.

Intermittent daily reviews have continued throughout the year, to improve identification of potential issues so that they may be addressed as quickly as possible.

Total Corporate Compliance Investigations



1st Quarter Corporate Compliance Training FY 2016

The False Claims Act: What you need to know and how to avoid a violation

What is the False Claims Act?

The False Claims Act (also called the "Lincoln Law") is an American federal law that imposes liability on persons and companies who defraud governmental programs. It is the federal Government's primary litigation tool in combating fraud against the Government. Claims under the law have typically involved health care, military, or other government spending programs, and dominate the list of largest pharmaceutical settlements. The government recovered \$38.9 billion under the False Claims Act between 1987 and 2013 and of this amount, \$27.2 billion or 70% was from whistleblower reports.

What are the most frequent prosecutions involving violations of the False Claims Act?

- Providing Medically Unnecessary Services
- Upcoding of a service to get paid at a higher rate
- Billing for services which were not provided
- Filing false cost reports
- Billing for poor quality services

What are the penalties of violating the False Claims Act?

- Payment back of \$5,000 to \$10,000 for every false claim filed
- Payment of triple the damages done to the government for every false claim filed
- Punishment of the staff person, supervisor, or Board of Trustees for not having proper training and monitoring devices in place
- Exclusion from participation in federally funded programs

How can I avoid violating the False Claims Act?

- Understand your job duties and ask questions when you don't understand.
- Learn the procedures related to billing and coding and follow them.
- Make sure you understand the definitions of the codes you are using to bill and learn what needs to be documented in order to bill for the service you are providing, remember when you sign a progress note, you are invoicing the payer.
- NEVER falsify documentation and don't use templates that have not been provided for you in Anasazi or approved by the Quality Management Department.
- Document exact times. NEVER round or document times to fit your schedule or guidelines.
- Be thorough in your documentation. Document the interventions you are providing and the individual's response to those interventions.
- Make sure the service you are providing is medically necessary:
 - Assessment and Recovery Plan/Individual Plan of Care/Person Directed Plan is up to date and includes the interventions you are billing for.
 - Document progress and/or lack of progress and why a service continues to be necessary.
- Take advantage of training activities and don't be afraid to ask questions.

Tri-County Behavioral Healthcare strives to provide quality services to our community while ensuring that we remain compliant with compliance laws and regulations. We recognize that this is a team effort and want to create a culture where staff and contractors feel comfortable talking about corporate compliance. Please feel free to contact the corporate compliance officer (information listed below) if you have any questions or concerns about the information provided above and remember that it is the policy of Tri-County that no one be retaliated against for making a good faith report of corporate compliance.

Tri-County Behavioral Healthcare Corporate Compliance Officer
Tanya Bryant
1020 Riverwood Court Building 4
(936) 521-6115 or toll free at 1-866-243-9252 (messages can be left confidentially)
tanyab@tcbhc.org or corporatecompliance@tcbhc.org

Agenda Item: Appoint Texas Council Representative and Alternate for FY 2016	Board Meeting Date
Committee: Executive	September 24, 2015
Background Information:	
<p>The representative attends the Texas Council of Community Centers, Inc. Board meetings on a quarterly basis and gives a verbal update to the Tri-County Board at their subsequent Board meetings. The alternate will attend the meeting and provide a report if the representative is unable to do so.</p>	
Supporting Documentation:	
None	
Recommended Action:	
Appoint Texas Council Representative and Alternate for FY 2016	

Agenda Item: Board of Trustees Reappointments and Oaths of Office Committee: Executive	Board Meeting Date September 24, 2015
Background Information: Listed below are the Board members who were reappointed by the Commissioner's Court of their respective counties for an additional two-year term expiring August 31, 2017. Reappointments: <ul style="list-style-type: none"> • Sharon Walker, Montgomery County • Morris Johnson, Walker County • Tracy Sorensen, Walker County • Brad Browder, Liberty County Oaths of Office will be recited at the Board meeting.	
Supporting Documentation: Oath of Office Recitation Montgomery County Trustees – Copy of Minutes from Montgomery County Commissioner's Court Meeting Walker County Trustees – Copy of Minutes from Walker County Commissioner's Court Meeting Liberty County Trustees – Letter from Liberty County Judge Jay Knight	
Recommended Action: Recite Oaths of Office	

OATH OF OFFICE

I, _____,
do solemnly swear,
that I will faithfully execute
the duties of the office of Trustee
of Tri-County Behavioral Healthcare,
and will, to the best of my ability
preserve, protect, and defend the Constitution
and laws of the United States and of this State;
and I furthermore solemnly swear
that I have not directly nor indirectly,
paid, offered, or promised to pay,
contributed, nor promised to contribute
any money, or valuable thing,
or promised any public office or employment,
as a reward for the giving or withholding a vote
to secure my appointment,
and further affirm that I,
nor any company, association, or corporation
of which I am an officer or principal
will act as supplier of services or goods,
nor bid or negotiate to supply
such goods or services, for this Center,
so help me God.

7. REAPPOINTMENT APPROVED – TRI-COUNTY BEHAVIORAL HEALTHCARE – COUNTY JUDGE

Motion by Commissioner Meador, seconded by Commissioner Noack, to approve the reappointment of Sharon Walker to the Board of Trustees for Tri-County Behavioral Healthcare for another two year term expiring August 31, 2017. Motion carried.

8. REQUEST APPROVED – PARKING FACILITIES – CONROE CATFISH FESTIVAL – COUNTY JUDGE

Motion by Commissioner Noack, seconded by Commissioner Clark, to approve and authorize Montgomery County Employees Committee to use and manage the parking facilities on Simonton Street in Conroe during the 2015 Conroe Catfish Festival and to collect a fee for public parking of no more than \$10.00 per vehicle during the Conroe Catfish Festival 2015 Event. Motion carried.

9. COMMITTEE APPROVED – ANIMAL SHELTER – COUNTY JUDGE

Motion by Commissioner Clark, seconded by Commissioner Noack, to appoint a special committee of experienced Veterinarians or other appropriate professionals to review Montgomery County Animal Shelter Operations and Contract and provide recommendations. Commissioner Clark stated that he would like it to consist of unbiased Shelter Management Experts and Veterinarians. Commissioner Clark also stated that there is not a specific timeline, but he would like for it to come together in the next couple of weeks. Motion carried.

10. DE-OBLIGATION APPROVED – STATE DRUG COURT TRAINING GRANT – DWI AND DRUG COURT

Motion by Commissioner Meador, seconded by Commissioner Noack, to approve the de-obligation of \$50,410.13 from the State Drug Court Training Grant. Motion carried.

11. FUNDING APPROVED – VEHICLE PURCHASE – CONSTABLE PRECINCT 5

Motion by Commissioner Riley, seconded by Commissioner Noack, to approve the funding for the purchase of one newly equipped patrol vehicle to be assigned to a recently vacated position which had a vehicle stipend. This will be funded with funding swept from the position and contingency for the balance not to exceed \$43,000.00. Motion carried.

12. FUNDING ACCEPTED – TEXAS DEPARTMENT OF TRANSPORTATION – NO REFUSAL GRANT – DISTRICT ATTORNEY

Motion by Commissioner Noack, seconded by Commissioner Clark, to accept the funding from Texas Department of Transportation for the FY 16 No Refusal Grant in the amount of \$231,218.15, which includes a match of \$93,762.65 from the District Attorney's budget. This application was approved 12/8/2014. Motion carried.

13. ORDER APPROVED – CHANGE OF LOCATION – ELECTIONS

Motion by Commissioner Riley, seconded by Commissioner Meador, to approve an Order to change the Magnolia Early Voting Polling Location and the Election Day Polling Location in Voting Precinct 18 due to the Magnolia Volunteer Fire Department Station 181 being unavailable. The new location will be the Malcolm Purvis Library. Motion carried.

14. EARLY VOTING LOCATIONS AND TIMES APPROVED – NOVEMBER 3, 2015 ELECTION – ELECTIONS

Motion by Commissioner Meador, seconded by Commissioner Riley, to approve the Early Voting Locations and times for the November 3, 2015 Election as follows:

I. COMMISSIONERS' COURT

- Presentation by Texas Association of Counties - overview of services provided - Robert Ruiz
*Robert Ruiz stated this is a meet and greet between the TAC service team and the county; there are new members on the court and new staff; he is the Risk Management Consultant; they are a pool; TAC Risk Management pool is county owned and managed; they are an association of an association; they are a direct voice for what type of services and coverage they want; you don't just get coverage we also have the ability for training at no additional cost; you have access to consultants throughout the year; human resources, law enforcement and safety consultants; for Walker County over the last 5 years have had on site HR training, 6 classes, loss control training 18 on site classes, it is specific training for Walker County; they are responsive to our needs; Isaac Garcia is the safety guy, Thomas Kurse is law enforcement, he is the former Sheriff of Nacogdoches County, he has worked with Sheriff McRae and his office to identify trends in the county and on the TAC level; they are the largest exposure area; we try to stay ahead of the trends; the law enforcement climate is changing around the country; there are heightened issues we are seeing; prevention or minimization, we do training; Mary Ann Saenz-Thompson stated she is the Human Resources consultant; she has been with TAC for 17 years; her role is to work with counties supervisors and HR in the area of HR; she does a lot of training; she is on the phone taking calls; the HR world is from hiring to termination, disciplining and ADA; they are seeing a lot of questions that deal with ADA; prevention and some in response; she likes to see counties without problems; they are compliance driven; they answer questions about best practices; they do a lot of harassment training; she introduced from the Health Employees benefits team Charlotte Collins; Charlotte stated it is a risk pool for employees benefits; health and dental; the county has been with the pool for 14 years; in the last 10 years they have never offered a double digit increase; it is far from the standard; they are governed by a board made up of county officials; they are paying all of the affordable care act fees; they offer the service for new reporting coming next year; they offer a set of plans for your employees; the wellness consultant can do training to employees; they have nutrition programs and physical challenge programs; it helps control claims; she stated the increase this year is 7.85%; the pool average is 5.8%; they look at projected claims, what they need to cover; they look at each entity and rate them on their experience; last year we had quit a few large claims; they paid out more than was paid in; they have a surplus distribution each year which is redistributed to the members; the last 4 years the county got back a little over \$200,000; this year we are going to get back just over \$16,000.00; she sent alternate plans; there are 3 options, G plan is a grandfathered plan under the affordable care act; the current plan is grandfathered; the deductible will be raise, the coinsurance deductible will be raised, emergency room and er raised; the non-grandfathered plan has annual physicals that are free; well child is free; birth control is free; screenings are free; for the employees perspective it is a better plan; there are a lot of free services; there is a third level of appeals if you are declined a service; a \$250.00 deductible is almost unheard of; the TAC average is \$750.00. Glen Reader asked why do they require everyone to get on the plan if they already have insurance. Charlotte Collins stated it is not TAC policy it is county policy; 52% of the users didn't pay towards their deductible; 17% paid less than the current deductible; 30% of the entire member group paid the \$250.00 or more in deductibles; the co-insurance max is \$2,000.00.
No action needed.*

At 10:45 a.m. Judge Pierce called for a break.

At 11:01 a.m. Judge Pierce reconvened the meeting and took up item 24.

G. AUDITOR

- Discuss and/or approve Order 2015-32 amending the budget for the fiscal year October 1, 2014 to September 30, 2015 - Patricia Allen #24
A motion was made by B.J. Gaines, Jr. to approve Order 2015-32 amending the budget for the fiscal year October 1, 2014 to September 30, 2015, seconded by Jimmy Henry, unanimous vote.
- Discuss and/or approve claims / invoices submitted for payment - Patricia Allen #25
*Patricia Allen presented claims/invoices in the amount of \$126,781.92.
A motion was made by Glen Reader to approve claims/invoices submitted for payment, seconded by Jimmy Henry, unanimous vote.*
- Receive financial information as of July 21, 2015 for the fiscal year ending September 30, 2015 - Patricia Allen #26
*Patricia Allen stated this is a weekly report showing fund balance cash on hand and a recap of sales tax and weigh station revenues as of that date.
Jimmy Henry asked about the DA forfeiture fund that has \$115,264.00.
Patricia Allen stated when there are seizures in a case, the court can forfeit it to the DA or Sheriff; the criteria is it is for law enforcement purposes.
No action needed.*

H. PURCHASING

- Discuss and/or approve the 2015 audit fee in the amount of \$25,000 to be paid from budgeted funds - Mike Williford #27
*Mike Williford stated we have a professional services contract; this is the engagement letter with an estimated cost of \$25,000.00.
Patricia Allen stated it went up about \$1,000.00 a year.
Mike Williford stated they anticipate \$25,000 but it will be billed on actual.
A motion was made by Glen Reader to approve the 2015 audit fee in the amount of \$25,000 to be paid from budgeted funds, seconded by Jimmy Henry, unanimous vote.*
- Discuss and/or approve selling approximately thirty-eight (38) surplus computers to New Waverly School District for \$1.00 - Mike Williford #28
*Mike Williford stated these are old computers out of warranty; they are missing parts and hard drives; Ms. Dusky Hall can use them in the New Waverly school district; they will re-build them and use them for students; we have done it before; IT has already gone through them and don't want them as spares; they sanitized the hard drives,
A motion was made by Jimmy Henry to approve selling approximately thirty-eight (38) surplus computers to New Waverly School District for \$1.00, seconded by Ronnie White, unanimous vote.*

I. COMMISSIONERS' COURT

- Discuss and/or approve change to personnel allocation from part-time to full-time Deputy Constable Precinct 4 with costs to be paid from available budgeted funds - Danny Pierce #30
*Patricia Allen stated during budget the comment was made to do this in the current fiscal year.
A motion was made by Jimmy Henry to approve the change to personnel allocation from part-time to full-time Deputy Constable Precinct 4 with costs to be paid from available budgeted funds, seconded by B.J. Gaines, Jr., unanimous vote.*
- Discuss and/or approve authorizing the use of building at 344 SH 75 N, Suite 200 as a dedicated Emergency Operations Center and authorize a cost of \$10,000 from contingency for start-up costs - Danny Pierce #31
A motion was made by Judge Pierce to approve authorizing the use of building at 344 SH 75 N, Suite 200 as a dedicated Emergency Operations Center and authorize a cost of \$10,000 from contingency for start-up costs, seconded by Ronnie White, unanimous vote.
- Discuss and/or approve Resolution 2015-33 Home Delivered Meals Program - Danny Pierce #33
A motion was made by B.J. Gaines, Jr. to approve Resolution 2015-33 Home Delivered Meals Program, seconded by Ronnie White, unanimous vote.
- Discuss and/or approve reappointments to the Tri-County Behavioral Healthcare Board of Trustees - Danny Pierce #34
A motion was made by Glen Reader to approve the reappointments of Morris Johnson and Tracy Sorensen to the Tri-County Behavioral Healthcare Board of Trustees, seconded by Jimmy Henry, unanimous vote.
- Discuss and/or approve 1st and 2nd quarter volunteer fire department reports - B.J. Gaines, Jr. #35
A motion was made by Ronnie White to approve the 1st and 2nd quarter volunteer fire department reports, seconded by Glen Reader, unanimous vote.

JAY KNIGHT
COUNTY JUDGE



1923 SAM HOUSTON
LIBERTY, TEXAS 77575

THE COUNTY OF LIBERTY
Est. 1836

July 28, 2015


Tri-County Behavior Healthcare
Attn: Evan Roberson
P.O. Box 3067
Conroe, TX 77305

Re: Reappointment to Board of Trustees

Dear Ms. Sill:

Liberty County Commissioners Court reappointed Brad Browder to the Tri-County Behavioral Healthcare Board of Trustees on July 28, 2015.

If you have any questions, please contact my office. Thank you.


Jay Knight
County Judge

JK/dh



Agenda Item: Board of Trustees Committee Appointments Committee: Executive	Board Meeting Date September 24, 2015
Background Information: Brad Browder, Chairman of the Board, will appoint committee members and their respective chairs at the meeting.	
Supporting Documentation: None	
Recommended Action: For Information Only	

Agenda Item: Board of Trustees Attendance Analysis for FY 2015 Regular and Special Called Board Meetings	Board Meeting Date
Committee: Executive	September 24, 2015
Background Information:	
None	
Supporting Documentation:	
Board of Trustees Attendance Analysis for FY 2015	
Recommended Action:	
For Information Only	

Board of Trustees Attendance Analysis | FY 2015

Board Member	Regular Meetings	Attendance Percentage for Regular Meetings	Special Called Meetings	Attendance Percentage for Special Called Meetings	Total Attendance
David Walker* Chair	2/2	100%	-	-	100%
Brad Browder Chair	10/10	100%	0/1	0%	91%
Sharon Walker Vice-Chair	9/10	90%	1/1	100%	91%
Tracy Sorensen Secretary	4/10	40%	1/1	100%	45%
Patti Atkins	8/10	80%	0/1	0%	73%
Morris Johnson	8/10	80%	0/1	0%	73%
Cecil McKnight	10/10	100%	1/1	100%	100%
Jacob Paschal	7/10	70%	0/1	0%	64%
Janet Qureshi	8/10	80%	0/1	0%	73%
Richard Duren*	3/3	100%	1/1	100%	100%

Summary of Attendance

	<u>2013</u>	<u>2014</u>	<u>2015</u>
Total Regular Meetings Held:	10	10	10
Average Attendance:	83%	80%	81%
Total Special Called Meetings Held:	1	1	1
Average Attendance:	88%	75%	44%
Total Number of Meetings Held:	11	11	11
Average Attendance:	83%	80%	78%
Average Number of Members Present:	6.64	6.45	6.64

NOTE: ALL ABSENCES LISTED ABOVE WERE EXCUSED.

THERE WAS ONE BOARD SEAT VACANT DURING FY 2014-15 DUE TO RESIGNATION.

Agenda Item: Personnel Report for August 2015 Committee: Executive	Board Meeting Date September 24, 2015
Background Information: None	
Supporting Documentation: Personnel Report for August 2015	
Recommended Action: For Information Only	

Personnel Report August 2015

Total Applications received in August=94

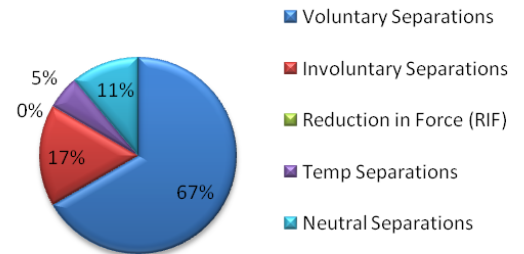
Total New Hires for the month of August=17

Total New Hires Year to date =112

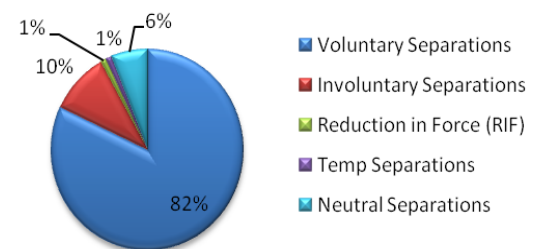
August 2015	FY15	FY14
Number of Active Employees	330	312
Number of Monthly Separations	18	9
Number of Separations YTD	100	62
Year to Date Turnover Rate	30%	18%
August Turnover	5%	3%

Separations by Reason	August Separations	Year to Date
Retired	0	4
Involuntarily Terminated	3	11
Neutral Termination	2	6
Dissatisfied	1	11
Lack of Support from Administration	0	1
Micro-managing supervisor	0	1
Lack of growth opportunities/recognition	0	1
Difficulty learning new job	0	2
Co-workers	0	1
Work Related Stress/Environment	0	3
RIF	0	1
Deceased	0	0
Pay	1	5
Health	1	10
Family	2	7
Relocation	1	8
School	1	8
Personal	0	2
Unknown	0	1
New Job	5	16
Temp	1	2
Total Separations	18	101

August 2015 Voluntary, Involuntary, RIF, Temp, and Neutral Separations



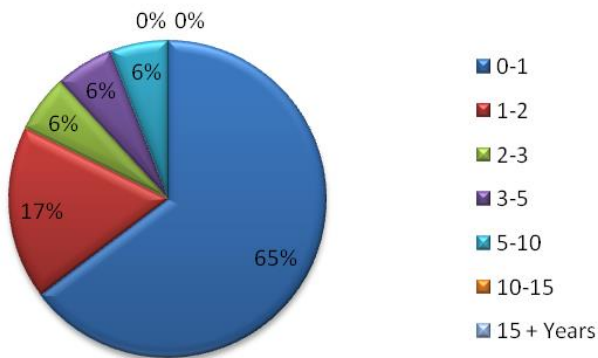
Year to Date Voluntary, Involuntary, RIF, Temp, and Neutral Separations



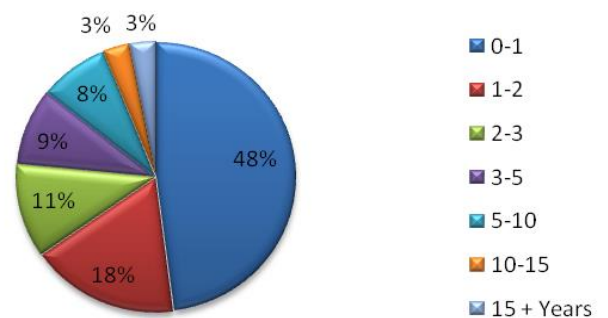
Management Team	# of Employees	Monthly Separations	Year to Date Separations	% August	% YTD
Evan Roberson	16	0	1	0%	6%
Millie McDuffy	45	0	4	2%	9%
Amy Foerster	7	0	2	0%	29%
Tanya Bryant	8	0	0	0%	0%
MH Director	142	8	49	6%	35%
Breanna Robertson	69	5	22	7%	31%
Kelly Shropshire	36	1	5	3%	14%
Kathy Foster	35	4	12	11%	34%
Kenneth Barfield	9	0	1	0%	11%
Total	367	18	96		

Separation by EEO Category	# of Employees	Monthly	Year to Date	% August	% Year to Date
Supervisors & Managers	21	1	6	5%	29%
Medical (MD,DO, LVN, RN, APN, PA, Psychologist)	35	3	13	9%	37%
Professionals (QMHP)	81	6	42	7%	52%
Professionals (QIDP)	26	2	7	8%	27%
Licensed Staff (LCDC, LPC...)	18	0	2	0%	11%
Business Services (Accounting)	11	0	0	0%	0%
Central Administration (HR, IT, Executive Director)	21	0	3	0%	14%
Program Support(Financial Counselors, QA, Training, Med. Records)	42	0	6	0%	14%
Nurse Technicians/Aides	16	2	5	12%	31%
Service/Maintenance	20	1	5	5%	25%
Direct Care (HCS, Respite, Life Skill)	28	3	11	11%	39%
Total	319	18	100		

August Separations by Tenure



Year to Date Separations by Tenure



Agenda Item: Texas Council Risk Management Fund Claims Summary for August 2015 Committee: Executive	Board Meeting Date September 24, 2015
Background Information: None	
Supporting Documentation: Texas Council Risk Management Fund Claims Summary for August 2015	
Recommended Action: For Information Only	

TCRMF Claims Summary August 2015



<p>Agenda Item: Appoint Building Contractor Interview Subcommittee</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>The request for bids for our consolidated Montgomery County facility will be published the week of September 21, 2015 and sealed bids will be due back to Tri-County by Friday, October 16, 2015. According to governmental code, the Board must announce the winner of the bid within seven days of the close of the request for bids.</p> <p>After receiving the bids, Mike Duncum and our building team will evaluate the bids and a subcommittee of the Board will need to interview some or all of the contractors who submit a complete bid, depending on the number of complete bids received. The subcommittee will provide information to the full Board at the October 22nd Board of Trustees meeting and a contractor will need to be selected at that time. The winning bid will be awarded after the Board meeting, no later than Friday, October 23rd.</p> <p>The subcommittee will need to meet between Saturday, October 17th and Wednesday, October 21st to interview potential contractors.</p> <p>The subcommittee cannot exceed four members (or the meeting is subject to Open Meetings Act requirements). Ideally, these will be the same four members at each meeting. The Board can participate via conference call, go-to-meeting or video link, if needed. In addition to the Board, Mike Duncum, Millie McDuffey and Evan Roberson will participate in assisting the committee with the interview process.</p> <p>Mike Duncum will be at the Board meeting to provide further updates and to answer any questions you have about the request for bid process and our next steps.</p>	
<p>Supporting Documentation:</p> <p>None</p>	
<p>Recommended Action:</p> <p>Appoint Building Contractor Interview Subcommittee</p>	

<p>Agenda Item: Approve FY 2016 Dues Commitment and Payment Schedule for the Texas Council</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>The Texas Council Operating Budget for FY 2016 was approved at the Texas Council Board meeting on August 15, 2015. This budget includes an increase for the Texas Council to cover additional expenses related to a Children's Services position as well as a provision for the replacement of the Chief Financial Officer position.</p> <p>The total budget for FY 2016 went up \$80,957. As a result, Tri-County's total annual payment was increased by \$1,036 from \$34,491 to \$35,527. The Center pays this fee in quarterly installments.</p>	
<p>Supporting Documentation:</p> <p>Cover Memorandum from Danette Castle, CEO</p> <p>FY 2016 Dues Commitment and Payment Schedule</p>	
<p>Recommended Action:</p> <p>Approve FY 2016 Dues Commitment and Payment Schedule for the Texas Council</p>	



MEMO
August 28, 2015

TO: Evan Roberson
Executive Director, Tri-County Behavioral Healthcare

FROM: Danette Castl [REDACTED]
Chief Executive Officer

SUBJECT: FY 2016 Commitment of Dues for
Texas Council of Community Centers

Please find attached the FY 2016 (September 1, 2015 – August 31, 2016) Commitment of Dues Payment Form. This form establishes the basis for payment of your dues. Please note on the form that you can choose a payment schedule that meets your needs.

The dues assessment reflects the budget as approved at the August 15, 2015 meeting of the Texas Council Board of Directors. To assist with local discussions with your Board of Trustees, we include the following information:

- Budget Overview
- FY 2016 Budget (with side-by-side comparison to FY 2015)
- FY 2016 Dues Comparison to FY 2015 Dues
- FY 2016 Commitment of Dues Payment Form

If you have any questions or need further information, please contact Paul Hagen at phagen@txcouncil.com or call the Texas Council office at 512.794.9268.

Enclosure

cc: Sharon Walker, Texas Council Board Delegate

FY 2016 Commitment of Dues Payment for Texas Council of Community Centers

CENTER: Tri-County Behavioral Healthcare

The dues for FY 2016 have been calculated as follows:

Total Dues\$37,870.00
**LESS: Credit for Texas Council Risk
Management Fund Members...(2,343.00)**

Net Dues**\$35,527.00**

The dues payment may be paid in one payment or in monthly or quarterly installments. Please identify the dues payment methodology you plan to use:

	<u>Monthly</u>	<u>Quarterly</u>	<u>Lump Sum</u>
September 2015	_____	8,882	\$_____
October	_____		
November	_____		
December	_____	8,882	
January 2016	_____		
February	_____		
March	_____	8,882	
April	_____		
May	_____		
June	_____	8,881	
July	_____		
August	_____		
TOTALS	\$_____	\$35,527	\$_____

Invoice for each payment required? ☒ Yes ☐ No

We appreciate your prompt and timely payment!

APPROVED:

Brad Browder, Chair, Board of Trustees

Evan Roberson, Executive Director

Date: _____

<p>Agenda Item: Approve the FY 2016-2017 DADS Performance Contract</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>Changes to the Department of Aging and Disability Services (DADS) contract include the addition of responsibilities for the new Community First Choice (CFC) Waiver, and additional requirements for Enhanced Service Coordination, Long Term Services and Supports, and Pre-Admission, Screening and Resident Review (PASRR) programs. It should be noted that all four of these programs have been added since 2013 and program designs continue to be in a state of flux.</p> <p>Program staff reviewed the contract and have some concerns about the additional administrative requirements and the reporting systems that will need to be in place; however, many of these requirements are based on Federal guidelines and cannot be modified.</p> <p>In addition to these program changes, DADS stopped calling us the Local Authority (LA) and began referring to us as the Local Intellectual and Developmental Disability Authority (LIDDA).</p> <p>Core funding for LIDDA services remains unchanged; however, there is an overall decrease of \$1,730 because of small changes to funding for the four programs mentioned above.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Approve FY 2016-2017 DADS Performance Contract</p>	

<p>Agenda Item: Approve DSHS Co-Occurring Mental Health and Substance Abuse Services Contract #2016-048317-001</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>Tri-County contracts with the Department of State Health Services (DSHS) to provide Co-Occurring Mental Health and Substance Abuse Services at our Riverpoint facility. Substance abuse is often a concurrent diagnosis for persons with mental illness.</p> <p>The terms of the contract for FY 2016 are unchanged from FY 2015. There continues to be a need for these services in the community and staff recommends approval of this contract.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Approve DSHS Co-Occurring Mental Health and Substance Abuse Services Contract #2016-048317-001</p>	

<p>Agenda Item: Approve DSHS Youth Treatment Services Contract #2016-048317-002</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>Tri-County contracts with the Department of State Health Services (DSHS) to provide Youth Outpatient Substance Abuse Services at our Riverpoint facility.</p> <p>The contract renewal for Youth Treatment Services was increased by \$6,000 to \$45,902 for FY 2016. All other contract terms are unchanged.</p> <p>There continues to be a need for these services in the community and staff recommends approval of this contract.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Approve DSHS Youth Treatment Services Contract #2016-048317-002</p>	

<p>Agenda Item: Approve DSHS Adult Treatment Services Contract #2016-048497-001</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>September 24, 2015</p>
<p>Background Information:</p> <p>Tri-County contracts with the Department of State Health Services (DSHS) to provide Adult Outpatient Substance Abuse Services at our Riverpoint facility.</p> <p>The terms of the contract for FY 2016 are essentially unchanged from FY 2015. There continues to be a need for these services in the community and staff recommends approval of this contract.</p>	
<p>Supporting Documentation:</p> <p>Contract Available for Review at the Board Meeting</p>	
<p>Recommended Action:</p> <p>Approve DSHS Adult Treatment Services Contract #2016-048497-001</p>	

Agenda Item: Review August 2015 Preliminary Financial Statements Committee: Business	Board Meeting Date September 24, 2015
Background Information: None	
Supporting Documentation: August 2015 Preliminary Financial Statements	
Recommended Action: Review of August 2015 Preliminary Financial Statements – For Information Only	

August 2015 Financial Summary Preliminary

Revenues for August 2015 were \$2,825,026 and operating expenses were \$2,348,605 resulting in a gain in operations of \$476,420. Capital Expenditures and Extraordinary Expenses for August were \$474,692 resulting in a loss of \$1,729. Total revenues were 101.13% of the monthly budgeted revenues and total expenses were 129.40% of the monthly budgeted expenses.

Year to date revenues are \$29,028,490 and operating expenses are \$27,069,852 leaving excess operating revenues of \$1,958,638. YTD Capital Expenditures and Extraordinary Expenses are \$1,447,918 resulting in a gain YTD of 510,720. Total revenues are 100.50% of the YTD budgeted revenues and total expenses are 100.47% 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
ICF Program – Title XIX	2,103,199	2,139,188	98.31%	35,989
Medicaid - Regular	571,180	582,749	98.01%	11,569
DSHS – SA Prevention	157,243	179,847	87.43%	22,604

ICF Program – Title XIX – This line item is back on the variance listing mainly due to clients that we were unable to bill for services due to problems with Medicaid coverage. When these problems are resolved, we should be able to back bill for their services. Since this is a cost reimbursement program, there will also be an offset in the expense side of the program.

Medicaid Regular – This line item reflects a slightly lower than anticipated amount based on the year end budget. We will analyze the new year's budget to ensure the amounts projected are reasonable.

DSHS – SA Prevention – This line item reflects a cost reimbursement program and due to vacancies came in under the contract amount. This will also have offsetting expenses for this program.

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
Contract - Clinical	653,241	622,610	104.91%	30,631
Fixed Assets - Building	392,525	357,488	109.80%	35,037
Medication	577,547	561,449	102.86%	16,098
Supplies - Program	76,002	65,367	116.26%	10,635
Training	66,947	55,659	120.28%	11,288

Contract Clinical – This line item is over budget due to the use of a contract doctor while we have doctor vacancies in the clinic. There will be an offset in payroll expense.

Fixed Assets - Building – This line item reflects all the approved items from the Liberty building as well as the Montgomery building planning. The invoices on the Montgomery building will cross fiscal years because we received one that hit this fiscal year instead of FY 2016.

Medication – This line item continues to be an area that we will review. We have noticed an increase in the medication for our Integrated program and have been problem solving to try and reduce the costs that we have been paying for these prescriptions.

Supplies – Program – This line item is over slightly from year end expected expenditures. These supplies are typically in the PATH homeless program where we try to expend available amounts left on the contract.

Training – We had various training opportunities this year including training with the Texas Council, supervisory trainings and events with other centers.

TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended August 31, 2015
Preliminary

	TOTALS COMBINED FUNDS August 2015	TOTALS COMBINED FUNDS July 2015	Increase (Decrease)
ASSETS			
CURRENT ASSETS			
Imprest Cash Funds	3,165	5,365	(2,200)
Cash on Deposit-General Fund		7,768,413	(7,768,413)
Cash on Deposit-Debt Fund	5,696,280	-	5,696,280
Accounts Receivable	1,689,938	1,457,224	232,714
Inventory	9,877	8,839	1,038
TOTAL CURRENT ASSETS	7,399,260	9,239,841	(1,840,582)
FIXED ASSETS	5,487,590	5,487,590	-
OTHER ASSETS	38,891	34,165	4,726
TOTAL ASSETS	<u>\$ 12,925,741</u>	<u>\$ 14,761,598</u>	<u>\$ (1,835,856)</u>
LIABILITIES, DEFERRED REVENUE, FUND BALANCE:			
CURRENT LIABILITIES	803,430	778,164	25,266
NOTES PAYABLE	536,765	536,765	-
DEFERRED REVENUE	(1,617,237)	(108,952)	(1,508,285)
LONG-TERM LIABILITIES FOR			
Line of Credit - Tradition Bank	670,521	690,302	(19,781)
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	510,720	508,991	1,729
Debt Service Fund	-	-	-
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(670,521)	(690,302)	19,781
Reserved for Debt Retirement	963,631	963,631	-
COMMITTED			
Net Assets-Property and Equipment	5,487,590	5,487,590	-
Reserved for Vehicles & Equipment Replacement	292,803	327,871	
Reserved for Facility Improvement & Acquisitions	1,779,094	2,104,759	
Reserved for Board Initiatives	1,500,000	1,500,000	
Reserved for 1115 Waiver Programs	516,833	516,833	
ASSIGNED			
Reserved for Workers' Compensation	183,620	183,620	-
Reserved for Current Year Budgeted Reserve	74,000	67,833	6,167
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(536,765)	(536,765)	
UNASSIGNED			
Unrestricted and Undesignated	2,331,257	2,331,257	-
TOTAL LIABILITIES/FUND BALANCE	<u>\$ 12,925,741</u>	<u>\$ 14,761,597</u>	<u>\$ (1,475,123)</u>

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended August 31, 2015
Preliminary**

		TOTALS	
		Memorandum Only	
	General Operating Funds	August 2015	Final August 2014
<hr/>			
ASSETS			
<hr/>			
CURRENT ASSETS			
<hr/>			
Imprest Cash Funds	3,165	3,165	4,350
Cash on Deposit-General Fund	-	-	7,523,501
Cash on Deposit-Debt Fund	5,696,280	5,696,280	-
Accounts Receivable	1,689,938	1,689,938	1,634,194
Inventory	9,877	9,877	8,787
TOTAL CURRENT ASSETS	7,399,260	7,399,260	9,170,832
<hr/>			
FIXED ASSETS	5,487,590	5,487,590	5,487,590
<hr/>			
OTHER ASSETS	38,891	38,891	42,111
<hr/>			
		-	-
	\$ 12,925,741	\$ 12,925,741	\$ 14,700,532
<hr/>			
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
<hr/>			
CURRENT LIABILITIES	803,430	803,430	908,243
<hr/>			
NOTES PAYABLE	536,765	536,765	536,765
<hr/>			
DEFERRED REVENUE	(1,617,237)	(1,617,237)	(195,556)
<hr/>			
LONG-TERM LIABILITIES FOR			
Line of Credit - Tradition Bank	670,521	670,521	905,707
<hr/>			
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
<hr/>			
General Fund	510,720	510,720	391,867
Debt Service Fund	-	-	-
<hr/>			
FUND EQUITY			
<hr/>			
RESTRICTED			
Net Assets Reserved for Debt service-Restricted	(670,521)	(670,521)	(905,708)
Reserved for Debt Retirement	963,631	963,631	963,631
<hr/>			
COMMITTED			
Net Assets-Property and Equipment-Committed	5,487,590	5,487,590	5,487,590
Reserved for Vehicles & Equipment Replacement	292,803	292,803	387,871
Reserved for Facility Improvement & Acquisitions	1,779,094	1,779,094	2,426,254
Reserved for Board Initiatives	1,500,000	1,500,000	1,500,000
Reserved for 1115 Waiver Programs	516,833	516,833	516,833
<hr/>			
ASSIGNED			
Reserved for Workers' Compensation-Assigned	183,620	183,620	274,409
Reserved for Current Year Budgeted Reserve -Assigned	74,000	74,000	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000	100,000
Reserved for Accrued Paid Time Off	(536,765)	(536,765)	(536,765)
<hr/>			
UNASSIGNED			
Unrestricted and Undesignated	2,331,257	2,331,257	1,939,391
TOTAL LIABILITIES/FUND BALANCE	\$ 12,925,741	\$ 12,925,741	\$ 14,700,532

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended August 2015
and Year To Date as of August 2015
Preliminary

INCOME:	MONTH OF August 2015	YTD August 2015
Local Revenue Sources	462,390	2,127,120
Earned Income	1,184,323	12,609,573
General Revenue-Contract	1,178,313	14,291,798
TOTAL INCOME	\$ 2,825,026	\$ 29,028,490
EXPENSES:		
Salaries	1,288,685	14,862,848
Employee Benefits	155,993	2,905,937
Medication Expense	54,622	578,189
Travel-Board/Staff	37,949	442,904
Building Rent/Maintenance	38,844	359,545
Consultants/Contracts	537,331	5,490,280
Other Operating Expenses	235,182	2,430,150
TOTAL EXPENSES	\$ 2,348,605	\$ 27,069,852
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 476,420	\$ 1,958,638
CAPITAL EXPENDITURES		
Capital Outlay-FF&E, Automobiles, Building	439,369	1,152,316
Capital Outlay-Debt Service Bonds	35,322	295,602
TOTAL CAPITAL EXPENDITURES	\$ 474,692	\$ 1,447,918
GRAND TOTAL EXPENDITURES	\$ 2,823,297	\$ 28,517,770
Excess (Deficiency) of Revenues and Expenses	\$ 1,729	\$ 510,720

Debt Service and Fixed Asset Fund:		
Bond Payments Receipts	35,322	295,602
Bond Payments Disbursements		
Interest Income		
Excess(Deficiency) of revenues over Expenses	35,322	295,602

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of August 2015
Preliminary

	YTD August 2015	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	2,127,120	2,547,193	(420,073)
Earned Income	12,609,573	12,041,499	568,074
General Revenue-Contract	14,291,798	14,296,273	(4,475)
TOTAL INCOME	\$ 29,028,490	\$ 28,884,964	\$ 143,525
EXPENSES:			
Salaries	14,862,848	14,820,423	42,425
Employee Benefits	2,905,937	2,903,297	2,640
Medication Expense	578,189	561,564	16,625
Travel-Board/Staff	442,904	440,276	2,628
Building Rent/Maintenance	359,545	353,001	6,544
Consultants/Contracts	5,490,280	5,467,370	22,910
Other Operating Expenses	2,430,150	2,414,208	15,942
TOTAL EXPENSES	\$ 27,069,852	\$ 26,960,139	\$ 109,713
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,958,638	\$ 1,924,820	\$ 33,812
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	1,152,316	1,128,425	23,891
Capital Outlay-Debt Service Bonds	295,602	295,602	0
TOTAL CAPITAL EXPENDITURES	\$ 1,447,918	\$ 1,424,027	\$ 23,891
GRAND TOTAL EXPENDITURES	\$ 28,517,770	\$ 28,384,166	\$ 133,604
Excess (Deficiency) of Revenues and Expense:	\$ 510,720	\$ 500,793	\$ 9,921

Debt Service and Fixed Asset Fund:			
Bond Payments Receipts	295,602	295,602	0
Bond Payments Disbursements		-	-
Interest Income			
Excess(Deficiency) of revenues over Expense:	295,602	295,602	0

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended August 2015
Preliminary

INCOME:	MONTH OF August 2015	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	462,390	878,324	(415,934)
Earned Income	1,184,323	740,689	443,634
General Revenue-Contract	1,178,313	1,174,581	3,732
TOTAL INCOME	\$ 2,825,026	\$ 2,793,594	\$ 31,432
EXPENSES:			
Salaries	1,288,685	1,191,366	97,319
Employee Benefits	155,993	140,092	15,901
Medication Expense	54,622	31,443	23,179
Travel-Board/Staff	37,949	34,416	3,533
Building Rent/Maintenance	38,844	50,712	(11,868)
Consultants/Contracts	537,331	259,921	277,410
Other Operating Expenses	235,182	65,282	169,900
TOTAL EXPENSES	\$ 2,348,605	\$ 1,773,232	\$ 575,373
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 476,420	\$ 1,020,362	\$ (543,942)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	439,369	345,675	93,694
Capital Outlay-Debt Service Bonds	35,322	62,847	(27,525)
TOTAL CAPITAL EXPENDITURES	\$ 474,692	\$ 408,522	\$ 66,170
GRAND TOTAL EXPENDITURES	\$ 2,823,297	\$ 2,181,754	\$ 641,543
Excess (Deficiency) of Revenues and Expenses:	\$ 1,729	\$ 611,840	\$ (610,111)

Debt Service and Fixed Asset Fund:

Bond Payments Receipts	35,322	62,847	(27,525)
Bond Payments Disbursements		-	-
Interest Income			
Excess(Deficiency) of revenues over Expense:	35,322	62,847	(27,525)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With August 2014 Comparative Data
Year to Date as of August 2015
Preliminary

	YTD August 2015	Final YTD August 2014	Increase (Decrease)
INCOME:			
Local Revenue Sources	2,127,120	1,406,838	720,282
Earned Income	12,609,573	10,422,913	2,186,660
General Revenue-Contract	14,291,798	14,527,901	(236,104)
TOTAL INCOME	\$ 29,028,490	\$ 26,357,653	\$ 2,670,838
EXPENSES:			
Salaries	14,862,848	13,348,075	1,514,773
Employee Benefits	2,905,937	2,474,520	431,417
Medication Expense	578,189	428,946	149,243
Travel-Board/Staff	442,904	416,745	26,159
Building Rent/Maintenance	359,545	350,087	9,458
Consultants/Contracts	5,490,280	5,787,091	(296,811)
Other Operating Expenses	2,430,150	2,705,225	(275,075)
TOTAL EXPENSES	\$ 27,069,852	\$ 25,510,688	\$ 1,559,164
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,958,638	\$ 846,965	\$ 1,111,673
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	1,152,316	201,779	950,536
Capital Outlay-Debt Service Bonds	295,602	253,318	42,284
TOTAL CAPITAL EXPENDITURES	\$ 1,447,918	\$ 455,098	\$ 992,820
GRAND TOTAL EXPENDITURES	\$ 28,517,770	\$ 25,965,786	\$ 2,551,985
Excess (Deficiency) of Revenues and Expense:	\$ 510,720	\$ 391,867	\$ 118,853

Debt Service and Fixed Asset Fund:

Bond Payments Receipts	295,602	253,318	42,284
Bond Payments Disbursements			-
Interest Income			-
Excess(Deficiency) of revenues over Expense:	295,602	253,318	42,284

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With August 2014 Comparative Data
For the Month Ended August 2015
Preliminary

INCOME:	MONTH OF August 2015	Final MONTH OF August 2014	Increase (Decrease)
Local Revenue Sources	462,390	118,111	344,279
Earned Income	1,184,323	1,195,448	(11,126)
General Revenue-Contract	1,178,313	1,175,955	2,358
TOTAL INCOME	\$ 2,825,026	\$ 2,489,514	\$ 335,512
Salaries	1,288,685	1,460,467	(171,782)
Employee Benefits	155,993	155,871	122
Medication Expense	54,622	51,171	3,451
Travel-Board/Staff	37,949	34,409	3,540
Building Rent/Maintenance	38,844	(8,535)	47,378
Consultants/Contracts	537,331	670,152	(132,821)
Other Operating Expenses	235,182	541,226	(306,044)
TOTAL EXPENSES	\$ 2,348,605	\$ 2,904,761	\$ (556,155)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 476,420	\$ (415,246)	\$ 891,667
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	439,369	44,339	395,030
Capital Outlay-Debt Service Bonds	35,322	21,110	14,212
TOTAL CAPITAL EXPENDITURES	\$ 474,692	\$ 65,449	\$ 409,242
GRAND TOTAL EXPENDITURES	\$ 2,823,297	\$ 2,970,210	\$ (146,913)
Excess (Deficiency) of Revenues and Expense:	\$ 1,729	\$ (480,696)	\$ 482,425

Debt Service and Fixed Asset Fund:

Bond Payments Receipts	35,322	21,110	14,212
Bond Payments Disbursements			-
Interest Income			-
Excess(Deficiency) of revenues over Expense:	35,322	21,110	14,212

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With July 2015 Comparative Data
For the Month Ended August 2015
Preliminary

INCOME:	MONTH OF August 2015	MONTH OF July 2015	Increase (Decrease)
Local Revenue Sources	462,390	240,505	221,885
Earned Income	1,184,323	838,065	346,257
General Revenue-Contract	1,178,313	1,356,303	(177,991)
TOTAL INCOME	\$ 2,825,026	\$ 2,434,874	\$ 390,152
EXPENSES:			
Salaries	1,288,685	1,265,168	23,517
Employee Benefits	155,993	244,896	(88,902)
Medication Expense	54,622	57,770	(3,148)
Travel-Board/Staff	37,949	35,323	2,626
Building Rent/Maintenance	38,844	60,884	(22,040)
Consultants/Contracts	537,331	405,641	131,690
Other Operating Expenses	235,182	221,480	13,702
TOTAL EXPENSES	\$ 2,348,605	\$ 2,291,161	\$ 57,445
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 476,420	\$ 143,713	\$ 332,707
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	439,369	137,945	301,425
Capital Outlay-Debt Service Bonds	35,322	35,322	-
TOTAL CAPITAL EXPENDITURES	\$ 474,692	\$ 173,267	\$ 301,425
GRAND TOTAL EXPENDITURES	\$ 2,823,297	\$ 2,464,428	\$ 358,869
Excess (Deficiency) of Revenues and Expenses:	\$ 1,729	\$ (29,554)	\$ 31,282

Debt Service and Fixed Asset Fund:

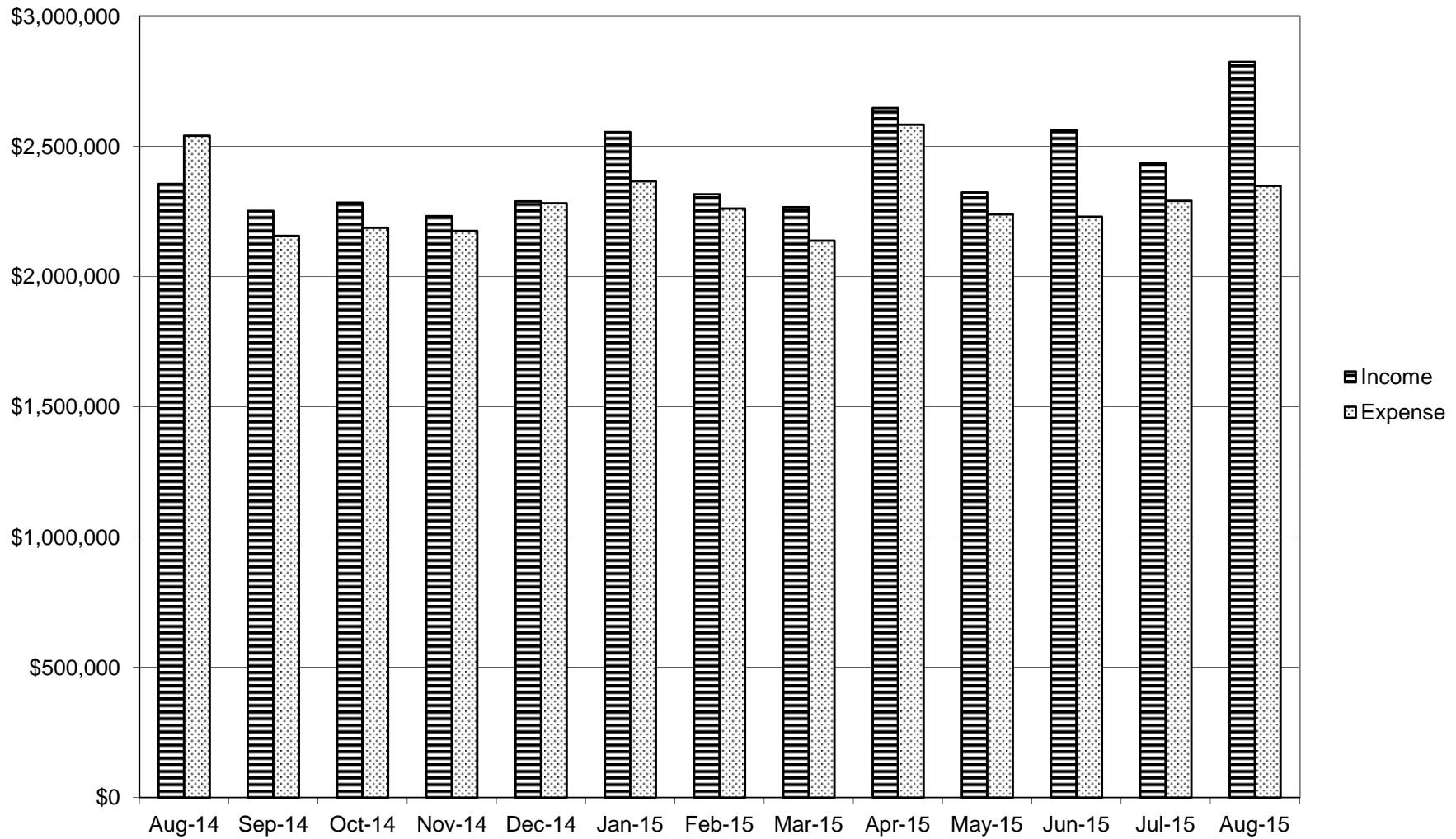
Bond Payments Receipts	35,322	35,322	-
Bond Payments Disbursements			-
Interest Income			
Excess(Deficiency) of revenues over Expense:	35,322	35,322	-

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of August 2015
Preliminary

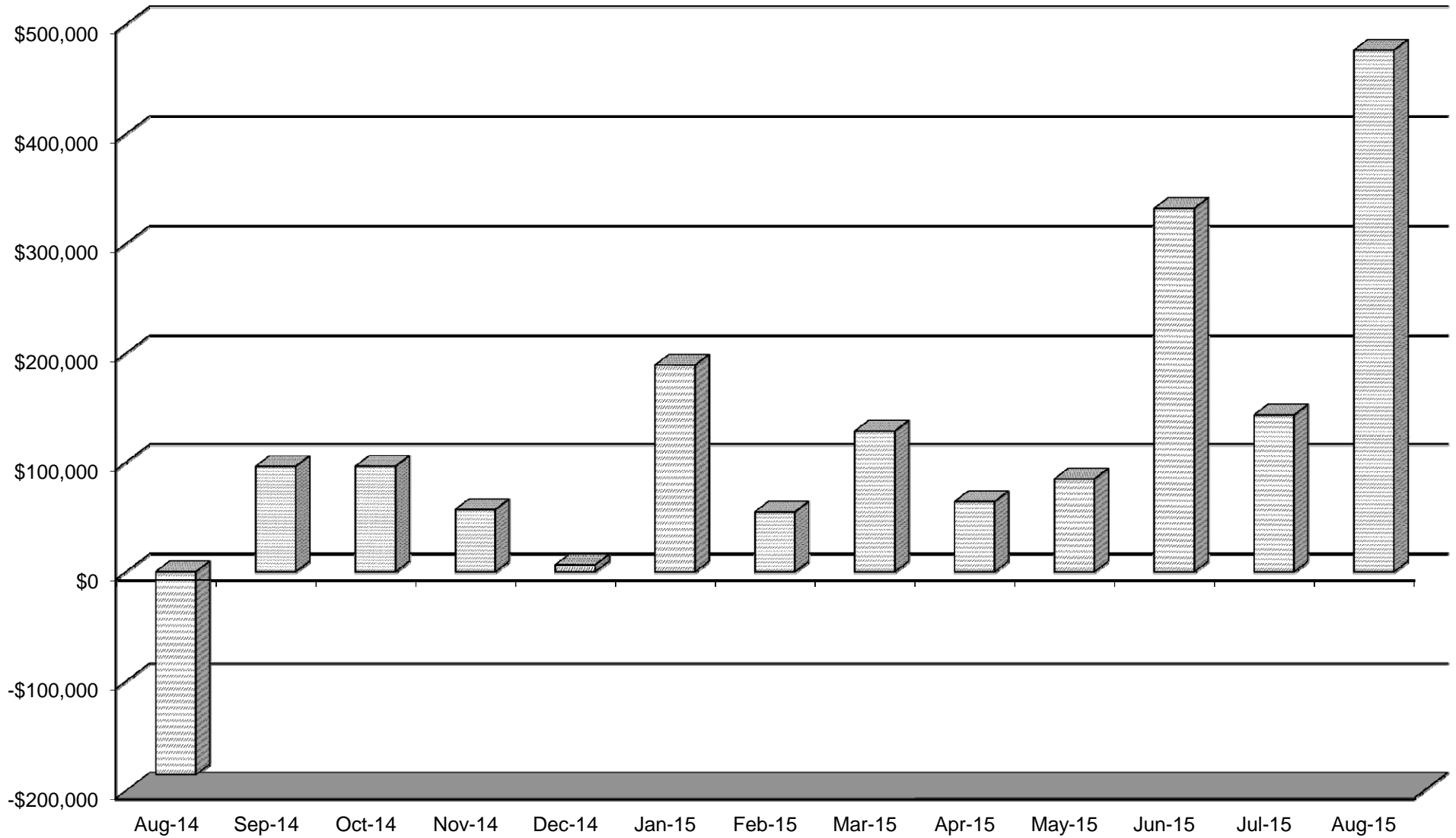
	YTD Mental Health August 2015	YTD IDD August 2015	YTD Other Services August 2015	YTD Agency Total August 2015	YTD Approved Budget August 2015	Increase (Decrease)
INCOME:						
Local Revenue Sources	1,691,153	505,929	(69,961)	2,127,120	2,547,237	(420,117)
Earned Income	3,327,791	5,635,688	3,646,095	12,609,573	12,249,686	359,887
General Revenue-Contract	12,148,505	1,950,469	192,824	14,291,798	14,296,273	(4,475)
TOTAL INCOME	\$ 17,167,449	\$ 8,092,086	\$ 3,768,958	\$ 29,028,491	\$ 29,093,196	\$ (64,705)
EXPENSES:						
Salaries	9,656,380	2,810,182	2,396,285	14,862,848	14,820,423	42,425
Employee Benefits	1,902,453	573,576	429,909	2,905,937	2,903,297	2,640
Medication Expense	439,222		138,967	578,189	561,564	16,625
Travel-Board/Staff	276,007	113,641	53,255	442,904	440,276	2,628
Building Rent/Maintenance	214,139	113,021	32,384	359,545	353,001	6,544
Consultants/Contracts	1,975,544	3,304,924	209,812	5,490,280	5,467,370	22,910
Other Operating Expenses	1,483,803	589,754	356,592	2,430,149	2,414,208	15,941
TOTAL EXPENSES	\$ 15,947,548	\$ 7,505,098	\$ 3,617,204	\$ 27,069,852	\$ 26,960,139	\$ 109,713
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,219,901	\$ 586,988	\$ 151,754	\$ 1,958,639	\$ 2,133,057	\$ (174,418)
CAPITAL EXPENDITURES						
Capital Outlay-FF&E, Automobiles	597,544	273,848	280,924	1,152,316	1,131,880	20,436
Capital Outlay-Debt Service Bonds	278,688	11,839	5,074	295,602	295,602	-
TOTAL CAPITAL EXPENDITURES	\$ 876,232	\$ 285,687	\$ 285,998	\$ 1,447,918	\$ 1,427,482	\$ 20,436
GRAND TOTAL EXPENDITURES	\$ 16,823,780	\$ 7,790,785	\$ 3,903,202	\$ 28,517,770	\$ 28,387,621	\$ 130,149
Excess (Deficiency) of Revenues and Expenses	\$ 343,669	\$ 301,301	\$ (134,244)	\$ 510,720	\$ 705,575	\$ (194,854)

Debt Service and Fixed Asset Fund:						
Bond Payments Receipts	278,688	11,839	5,074	295,602	295,602	(16,914)
Bond Payments Disbursements		-	-	-	-	-
Interest Income		-	-	-	-	-
Excess(Deficiency) of revenues over Expenses	278,688	11,839	5,074	295,602	295,602	(16,914)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Income and Expense
excluding Capital Expenditures
Preliminary



TRI-COUNTY BEHAVIORAL HEALTHCARE
Income after Expense
excluding Capital Expenditures
Preliminary



Agenda Item: 4 th Quarter FY 2015 Quarterly Investment Report Committee: Business	Board Meeting Date September 24, 2015
Background Information: This report is provided to the Board of Trustees of Tri-County Services in accordance with Board Policy on fiscal management and in compliance with Chapter 2256: Subchapter A of the Public Funds Investment Act.	
Supporting Documentation: Quarterly TexPool Investment Report Quarterly Interest Report	
Recommended Action: For Information Only	

QUARTERLY INVESTMENT REPORT TEXPOOL FUNDS

For the Period Ending August 31, 2015

GENERAL INFORMATION

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

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

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

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

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

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

TexPool is governed by the following specific portfolio diversification limitations;

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

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

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

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

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

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

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

STATISTICAL INFORMATION

Market Value for the Period

Portfolio Summary	June	July	August
Uninvested Balance	\$519,586.25	(\$14,904.00)	\$152,210.60
Accrual of Interest Income	18,432,212.26	8,184,116.15	9,429,485.71
Interest and Management Fees Payable	(654,125.50)	(732,764.54)	(786,759.77)
Payable for Investments Purchased	0.00	(125,000,000.00)	0.00
Accrued Expense & Taxes	0.00	0.00	0.00
Repurchase Agreements	2,133,264,483.50	2,281,282,963.50	2,284,290,950.00
Mutual Fund Investments	475,020,952.90	575,020,952.90	275,020,952.90
Government Securities	9,291,665,739.56	9,267,814,430.00	8,049,924,452.61
U.S. Treasury Bills	0.00	0.00	0.00
U.S. Treasury Notes	2,076,420,460.53	1,447,446,335.00	1,908,372,411.50
TOTAL	\$13,994,669,309.51	\$13,454,001,129.01	\$12,526,403,703.55

Book Value for the Period

Type of Asset	Beginning Balance	Ending Balance
Uninvested Balance	\$1,440,019.11	\$152,210.60
Accrual of Interest Income	5,291,726.99	9,429,485.71
Interest and Management Fees Payable	(664,450.50)	(786,759.77)
Payable for Investments Purchased	0.00	0.00
Repurchase Agreements	2,007,872,000.00	2,284,319,000.00
Mutual Fund Investments	201,020,952.90	275,020,952.90
Government Securities	10,289,457,314.30	8,049,559,428.46
U.S. Treasury Bills	0.00	0.00
U.S. Treasury Notes	1,363,683,012.10	1,908,377,492.68
TOTAL	\$13,868,100,574.90	\$12,526,071,810.58

Portfolio by Maturity as of August 31, 2015

1 to 7 days	8 to 90 day	91 to 180 days	181 + days
23.5%	66.3%	6.3%	3.9%

Portfolio by Type of Investments as of August 31, 2015

Agencies	Repurchase Agreements	Treasuries	Money Market Funds
74.6%	18.3%	4.9%	2.2%

SUMMARY INFORMATION

On a simple daily basis, the monthly average yield was 0.06% for June, 0.06% for July and 0.07% for August.

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

The weighted average maturity of the fund as of August 31, 2015 was 47 days.

The net asset value as of August 31, 2015 was 1.00003.

The total amount of interest distributed to participants during the period was \$2,183,787.73.

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

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

During the reporting period, the total number of participants has increased to 2,337.

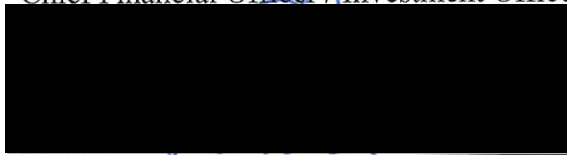
Funds assets are safe kept at the State Street Bank in the name of TexPool in a custodial account.

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

Submitted by:


Minnie McDunley
Chief Financial Officer / Investment Officer


Date


Evan Roberson
Executive Director / Investment Officer


Date

**TRI-COUNTY SERVICES
QUARTERLY INTEREST EARNED REPORT
FISCAL YEAR 2015
As Of August 31, 2015**

BANK NAME	INTEREST EARNED				
	1st QTR.	2nd QTR.	3rd QTR.	4th QTR.	YTD TOTAL
Alliance Bank - Central Texas CD	\$ 423.87	\$ 419.21	\$ 428.53	\$ 428.53	\$ 1,700.14
Citizens 1st Bank CD	\$ 277.28	\$ 274.23	\$ 280.32	\$ 280.32	\$ 1,112.15
First Liberty National Bank	\$ 1.82	\$ 0.16	\$ 0.08	\$ 0.16	\$ 2.22
First Liberty National Bank CD	\$ 409.58	\$ 414.03	\$ 441.43	\$ 409.59	\$ 1,674.63
JP Morgan Chase (HBS)	\$ 492.44	\$ 594.48	\$ 539.26	\$ 376.52	\$ 2,002.70
Prosperity Bank	\$ 12.62	\$ 12.58	\$ 36.06	\$ 80.51	\$ 141.77
TexPool Participants	\$ 48.59	\$ 71.89	\$ 86.42	\$ 107.14	\$ 314.04
Tradition Bank	\$ 3,693.11	\$ 3,652.76	\$ 3,733.48	\$ 3,726.72	\$ 14,806.07
Total Earned	\$ 5,359.31	\$ 5,439.35	\$ 5,545.58	\$ 5,409.49	\$ 21,753.73

Agenda Item: Board of Trustees' Unit Financial Statement for August 2015 Committee: Business	Board Meeting Date September 24, 2015
Background Information: None	
Supporting Documentation: August 2015 Board of Trustees' Unit Financial Statement	
Recommended Action: For Information Only	

Unit Financial Statement

FY 2015

	August 2015 Actuals	August 2015 Budgeted	Variance	YTD Actual	YTD Budget	Variance	Percent	Budget
Revenues								
Allocated Revenue	\$ 2,440.00	\$ 2,440.00	\$ -	\$ 31,680.00	\$ 31,680.00	\$ -	100.00%	\$ 31,680.00
Total Revenue	\$ 2,440.00	\$ 2,440.00	\$ -	\$ 31,680.00	\$ 31,680.00	\$ -	100.00%	\$ 31,680.00
Expenses								
Food Items	\$ 565.57	\$ 167.00	\$ 398.57	\$ 2,839.38	\$ 2,000.00	\$ 839.38	141.97%	\$ 2,000.00
Insurance-Worker Compensation	\$ 9.57	\$ (111.00)	\$ 120.57	\$ 97.44	\$ 100.00	\$ (2.56)	97.44%	\$ 230.00
Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 18,000.00	\$ 18,000.00	\$ -	100.00%	\$ 18,000.00
Postage-Express Mail	\$ -	\$ 4.00	\$ (4.00)	\$ -	\$ 50.00	\$ (50.00)	0.00%	\$ 50.00
Supplies-Office	\$ 12.00	\$ 4.00	\$ 8.00	\$ 24.00	\$ 50.00	\$ (26.00)	0.00%	\$ 50.00
Training	\$ -	\$ -	\$ -	\$ 2,285.00	\$ 3,600.00	\$ (1,315.00)	63.47%	\$ 3,600.00
Travel - Local	\$ 80.78	\$ 63.00	\$ 17.78	\$ 928.29	\$ 750.00	\$ 178.29	123.77%	\$ 750.00
Travel - Non-local Mileage/Air	\$ 160.50	\$ 167.00	\$ (6.50)	\$ 1,334.06	\$ 2,000.00	\$ (665.94)	66.70%	\$ 2,000.00
Travel - Non-local Hotel	\$ -	\$ 317.00	\$ (317.00)	\$ 2,040.87	\$ 3,800.00	\$ (1,759.13)	53.71%	\$ 3,800.00
Travel - Meals	\$ -	\$ 100.00	\$ (100.00)	\$ 710.04	\$ 1,200.00	\$ (489.96)	59.17%	\$ 1,200.00
Total Expenses	\$ 2,328.42	\$ 2,211.00	\$ 117.42	\$ 28,259.08	\$ 31,550.00	\$ (3,290.92)	89.57%	\$ 31,680.00
Total Revenue minus Expenses	\$ 111.58	\$ 229.00	\$ (117.42)	\$ 3,420.92	\$ 130.00	\$ 3,290.92	10.43%	\$ -

Agenda Item: Montgomery Supported Housing, Inc. Update Committee: Business	Board Meeting Date September 24, 2015
Background Information: <p>The Montgomery Supported Housing, Inc. Board (MSHI) met on August 7, 2015 to review the financial status of the project and membership needs for the year. Due to some unexpected expenses related to this project, the Board has requested additional information for monitoring purposes.</p> <p>Following the Board meeting, McDougal Property Management prepared the following information for review:</p> <ul style="list-style-type: none"> • The financial projection through the end of the year with respect to determining the property's liquidity. • There was a budget based rent increase submitted to HUD on June 12, 2015 and approved on August 11, 2015. • The July 31, 2015 balance sheet, profit and losses, and aged payable report. <p>The clients are doing well and there is currently one (1) opening with a move-in already scheduled. Tri-County staff continue to monitor the property and expenditures and provide support to the Board, as needed.</p>	
Supporting Documentation: None	
Recommended Action: For Information Only	

Agenda Item: Cleveland Supported Housing, Inc. Update Committee: Business	Board Meeting Date September 24, 2015
Background Information: <p>The Cleveland Supported Housing, Inc. Board (CSHI) held a telephone meeting on August 28, 2015 to review and discuss project status updates, upcoming items, and the FY 2014 990 for informational purposes.</p> <p>Following the approval of the substantial completion package by HUD on July 29th, McDougal Property Management has been working on contacting the approved applicants to schedule move-ins. Resident occupancy began on September 1, 2015 and there are currently eight (8) residents on site. Three (3) are scheduled to move in and there are currently three (3) vacancies. The Community Director is continuing to process applications and there are seven (7) pending at this time. They plan to have all units occupied by the end of September. We have continued to receive and refer individuals inquiring about the apartments to the Community Director at Independence Oaks Apartments.</p> <p>On August 13th, Tri-County housing staff provided a guided tour to Cleveland direct care employees following a request from case managers in the area interested in learning more about the new housing opportunity that may benefit some of the individuals we serve.</p> <p>We are still in the process of working toward final closing which can be expected to take place roughly six (6) to nine (9) months following the submission of the substantial completion package. Currently, Tri-County staff are working with the Housing Consultant on the cost certification audit. This was historically completed by a CPA; however, HUD's rules have changed and now the consultants are able to complete this process.</p>	
Supporting Documentation: None	
Recommended Action: For Information Only	

UPCOMING MEETINGS

October 22nd, 2015 – Board Meeting

- Longevity Recognition Presentations
- Approve Minutes from September 24, 2015 Board Meeting
- Community Resources Report
- Consumer Services Report for September 2015
- Program Updates
- Regional Planning Network Advisory Committee's FY 2016 Budget Review
- Medicaid 1115 Waiver Project Status Report
- Personnel Report for September 2015
- Texas Council Risk Management Fund Claims Summary for September 2015
- Program Presentation - Projects for Assistance in Transition from Homelessness (PATH) Program
- Approve September 2015 Financial Statements
- 401(a) Account Review
- Cast Election Ballot for the Texas Council Risk Management Fund Board of Trustees
- 4th Quarter FY 2015 Investment Report
- Board of Trustees Unit Financial Statement for September 2015
- Other Business Committee Issues

November – No Board Meeting

December 10th, 2015 – Board Meeting

- Program Presentation – Life Skills Christmas Carolers
- Approve Minutes from October 22, 2015 Board Meeting
- Community Resources Report
- Consumer Services Report for October 2015
- Program Updates
- Personnel Reports for October & November 2015
- Texas Council Risk Management Fund Claims Summaries for October & November 2015
- Texas Council Quarterly Board Meeting Update
- Approve October 2015 Financial Statements
- Reappoint Independence Communities, Inc. Board of Directors
- Reappoint Montgomery Supported Housing, Inc. Board of Directors
- Reappoint Cleveland Supported Housing, Inc. Board of Directors
- Board of Trustees Unit Financial Statement for October 2015
- Cleveland Supported Housing, Inc. Update
- Other Business Committee Issues