

**Tri-County
Behavioral Healthcare
Board of Trustees
Meeting**

April 23, 2020



Notice is hereby given that a regular meeting of the Board of Trustees of Tri-County Behavioral Healthcare will be held on Thursday, April 23, 2020.

The Business Committee will convene at 9:30 a.m., the Program Committee will convene at 9:30 a.m.

In accordance with section 418.016 of the Texas Government Code, Governor Abbott, as part of his Disaster Declaration related to COVID-19, has suspended various provisions of the Open Meetings Act including the requirement that government officials and members of the public be physically present at a specified meeting location for a Board meeting. In compliance with this suspended rule, the Tri-County Board of Trustees meeting will convene via teleconference at 10:00 a.m. at the number listed below. The public is invited to call and offer comments to the Board of Trustees between 10:00 a.m. and 10:05 a.m.

Teleconference Line: **800-719-7514**
Access Code: 349259
[www.tcbhc.org/board-documents-April 2020 Board Packet](http://www.tcbhc.org/board-documents-April-2020-Board-Packet)

In compliance with the Americans with Disabilities Act, Tri-County Behavioral Healthcare will provide for reasonable accommodations for persons attending the Board Meeting. To better serve you, a request should be received with 48 hours prior to the meeting. Please contact Tri-County Behavioral Healthcare at 936-521-6119.

AGENDA

- I. **Organizational Items**
 - A. Chair Calls Meeting to Order
 - B. Public Comment
 - C. Quorum
 - D. Review & Act on Requests for Excused Absence
- II. **Approve Minutes - February 27, 2020**
- III. **Executive Director's Report - Evan Roberson**
 - A. COVID-19 Response
 - o Furloughs
 - B. HR 6201
 - C. Payroll Protection Program
 - D. FEMA Crisis Counseling Program COVID-19
 - E. Goal Timelines
 - o Cleveland Facility
 - F. CCBHC Application

IV. Chief Financial Officer's Report - Millie McDuffey

- A. Cost Report Update
- B. Budgeted Software Update
- C. FY 2021 Budget Process
- D. Fixed Asset Inventory

V. Program Committee

Action Items

- A. Appoint New MH Planning Network Advisory Committee Members..... *Page 8*

Information Items

- B. Community Resources Report..... *Pages 9-11*
- C. Consumer Services Report for February and March 2020..... *Pages 12-14*
- D. Program Updates..... *Pages 15-19*
- E. FY 2020 Goals and Objectives Progress Report..... *Pages 20-24*
- F. 2nd Quarter FY 2020 Corporate Compliance and Quality Management Report..... *Pages 25-27*
- G. 3rd Quarter FY 2020 Corporate Compliance Training..... *Pages 28-29*

VI. Executive Committee

Information Items

- A. Personnel Report for February and March 2020..... *Pages 30-34*
- B. Texas Council Risk Management Fund Claims Summary for March 2020..... *Pages 35-36*

VII. Business Committee

Action Items

- A. Approve February 2020 Financial Statements..... *Pages 37-51*
- B. Approve March 2020 Financial Statements..... *Pages 52-66*
- C. Approve FY 2020 Budget Revision..... *Pages 67-69*
- D. Consider Selection of FY 2020 Auditor..... *Page 70*
- E. Ratify HHSC Contract No. HHS000740900037, Rider 39 Grant Program..... *Page 71*
- F. Ratify FY 2020 Contract for Sun Behavioral..... *Page 72*
- G. Ratify FY 2020 Contract for Dr. Marshall Lucas, MD..... *Page 73*

Information Items

- H. 2nd Quarter FY 2020 Investment Report..... *Pages 74-78*
- I. Board of Trustees Unit Financial Statement for February and March 2020..... *Pages 79-81*
- J. HUD 811 Updates (Cleveland, Montgomery and Huntsville)..... *Pages 82-84*

VIII. Executive Session in compliance with Texas Government Code Section 551.071, Consultation with Attorney and Section 551.072, Real Property.

Posted By:

Ava Green
Executive Assistant

Tri-County Behavioral Healthcare

P.O. Box 3067
Conroe, TX 77305

BOARD OF TRUSTEES MEETING

February 27, 2020

Board Members Present:

Patti Atkins
Tracy Sorensen
Sharon Walker
Gail Page
Richard Duren
Jacob Paschal

Board Members Absent:

Morris Johnson
Janet Qureshi

Tri-County Staff Present:

Evan Roberson, Executive Director
Millie McDuffey, Chief Financial Officer
Kenneth Barfield, Director of Management Info Systems
Catherine Prestigiovanni, Director of Strategic Development
Kathy Foster, Director of IDD Provider Services
Kelly Shropshire, Director of IDD Authority Services
Ava Green, Executive Assistant
Darius Tuminas, Controller
Tabatha Abbott, Cost Accountant
Elizabeth Franklin, Administrative Assistant
Jennifer Bryant, Legal Counsel

Sheriff Representatives Present:

Chief Deputy Don Neyland, Liberty County Sheriff's Office
Captain Tim Cannon, Montgomery County Sheriff's Office

Call to Order: Board Chair, Patti Atkins, called the meeting to order at 10:04 a.m. at 233 Sgt. Ed Holcomb Blvd. S., Conroe, TX.

Public Comment: There was no public comment.

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

Resolution #02-27-01

Motion Made By: Sharon Walker

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

Resolved:

That the Board excuse the absence of Morris Johnson and Janet Qureshi.

Resolution #02-27-02

Motion Made By: Sharon Walker

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

Resolved:

That the Board approve the minutes of the January 30, 2020 meeting of the Board of Trustees.

Program Presentations:

Longevity Recognitions

Certified Community Behavioral Health Clinic (CCBHC)

Executive Director's Report:

The Executive Director's report is on file.

- Walker County Hospital District Meeting
- HHSC Leadership Turnover
- Local Planning Update
- Middle Management Academy
- Child and Youth Improvement Target Update

Chief Financial Officer's Report:

The Chief Financial Officer's report is on file.

- Budget Revision
- CAM Cost Report
- FY 2019 HCS and MEI Cost Reports
- CFO Consortium Meeting
- HHSC – IDD Fiscal Monitoring Review

PROGRAM COMMITTEE:

The Community Resources Report was reviewed for information purposes only.

The Consumer Services Reports for January 2020 was reviewed for information purposes only.

The Program Updates Report was reviewed for information purposes only.

EXECUTIVE COMMITTEE:

The Board of Trustees Reappointment and Oath of Office for Tracy Sorensen for an additional two-year term ending August 31, 2021 was completed for information purposes only. Tracy Sorensen recited the Oath of Office.

The Personnel Report for January 2020 was reviewed for information purposes only.

The Texas Council Risk Management Fund Claims Summary for January 2020 was reviewed for information purposes only.

BUSINESS COMMITTEE:

Resolution #02-27-03

Motion Made By: Richard Duren

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

Resolved:

That the Board approve the January 2020 Financial Statements.

Resolution #02-27-04

Motion Made By: Richard Duren

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

Resolved:

That the Board approve the Allied Universal – Security Professional Service Agreement.

Resolution #02-27-05

Motion Made By: Richard Duren

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

Resolved:

That the Board approve the HHSC Local Mental Health Authority Performance Contract No. HHS000576400001, Amendment No. 1.

Resolution #02-27-06

Motion Made By: Richard Duren

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

Resolved:

That the Board approve the FY 2020 Contract for Dr. Roopa Challapalli, MD in the amount of \$80,000.00.

Resolution #02-27-07

Motion Made By: Richard Duren

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

Resolved:

That the Board approve a motion to table agenda item IX-D, Approve New Cleveland, Texas Service Facility Plans and Next Steps in Construction, for another thirty days or to the next board meeting.

The Board of Trustees Unit Financial Statement for January 2020 was reviewed for information purposes only.

The regular meeting of the Board of Trustees adjourned at 11:32 a.m.

Adjournment:

Patti Atkins
Chair

Date

Attest:

Jacob Paschal
Secretary

Date



Executive Director's Report

April 23, 2020

Announcements

- The next regular Board meeting will be on May 28, 2020. We are only allowed to meet via phone because of the disaster declaration issued by the state of Texas which will expire before the next meeting. Unless the declaration is extended by Governor Abbot, our next meeting will need to occur face to face.
- We received official word yesterday from the Texas Council that the Annual Conference, which was scheduled for late June, will be held December 17-19, 2020 in San Antonio. Depending on what comes up, I may speak with the Board Chair about the idea of holding a June Board meeting if needed to catch up on business related to COVID-19 or other pressing needs.
- If we had birthday cake today, it would have been in honor of Tracy Sorensen who celebrated a birthday on March 5th.

COVID-19 Response

- I have sent a series of updates out to the Board of Trustees via email and will not attempt to recover all of that ground today. As 'essential healthcare providers' we have maintained as much of our operations as we have been able to, and have made our best effort to balance the needs of our clients, our community and our employees. As I have explained to staff from the beginning, we have three problems that have needed to be addressed in our crisis response: 1) management of the virus itself and the potential spread of the virus (As of Wednesday April 22nd, we had 440 confirmed COVID-19 cases in Montgomery County, 51 civilians in Walker County and 66 inmates in Walker County, and 37 in Liberty County) ; 2) management of the anxiety related to the virus; and 3) management of the 'ripple effect' caused by the virus.

At this point, I can report that no staff who works for the Center has tested positive for the virus, although at least one probably had the virus and was unable to get tested. We also have two employees currently awaiting test results and believe that one of them will likely come back positive based on the symptoms we observed. We have had no confirmed case of the virus at any of our service locations, although there have been several persons seen in crisis with symptoms consistent with the virus and who could have infected multiple staff if they had been positive. As has been the case in much of the

country, Personal Protective Equipment (PPE) has been very hard to come by for our front-line staff and many staff were concerned about being exposed to the virus while doing their job. Staff, and their parents, went to work making masks and currently all of our employees who are at the office have, at least, a cloth mask that can be worn at all times. We have also had PPE coming in from a variety of sources and have many of the items we need (from masks to cleaning supplies) to help folks feel safe in their work environment.

Key staff are currently working with me to plan for multiple potential scenarios including a potential resurgence in the near future and a second wave in the fall.

Anxiety about catching the virus has been high for many of our staff and we have leveraged opportunities for flexibility in HHSC's service design to allow many of our staff to work from home. Working from home helps us address concerns about virus exposure and also allows us to manage some of the childcare issues which have impacted many of our staff as schools and daycares closed. Currently, about 70% of Outpatient Services, including nearly all of our prescribers and over 50% of our administrative team are working from home. I announced to staff yesterday that we will continue this model until at least May 31st.

As I have previously informed you via email, the following programs are closed:

- All Day Habilitation Sites (Cleveland, Huntsville and Liberty);
- All PreAdmission And Resident Review (PASRR) nursing facility services (both Authority and Provider);
- Substance Use Prevention Services (provided in the schools);
- School-based Mental Health Services (although we are still working with school caseloads on an outpatient basis);
- Routine intake in all locations (still seeing crisis follow-up);
- The East Montgomery County Crisis Clinic; and
- The Extended Observation Unit (3 bed facility in Conroe).

In addition, we have the Crisis Stabilization Unit census capped at nine so that each client has their own room. This has resulted in additional admissions to contract hospitals.

Although many other services are operating a less than optimal levels (and certainly less efficiently that we would like) all other services at the Center have continued.

Furlough:

- One of the decisions I made was to issue a temporary furlough for staff who were unable to work because of program closures. This list includes the Day Habilitation Staff, Provider PASRR staff and a couple of folks from Substance Use Prevention who were unable to work at the office (the other SUD Prevention staff chose to work in other programs temporarily). We also have three janitorial staff included in the furlough. While on furlough, these persons will be allowed to file for and receive unemployment, and due to

new unemployment rules may receive nearly as much (or more) as they did when working for us.

In addition, we have a few staff whose jobs will not allow them to work from home and who chose to be at home because of health conditions (immune disorders, pregnancy, etc.) who were not furloughed. Most of these staff have exhausted their Paid Time Off and are on Leave Without Pay.

As you will see from our financial statements, if current conditions persist and we are unable to get back to regular operations, we may have more temporary furloughs which need to be provided. At this point, it has been my goal to keep as many people working as possible, and frankly, our current service design is less efficient than our normal design so we really need more staff who are willing to fill in the gaps. However, we still have to manage the bottom line and I do not want to deplete reserves during this crisis. We will reevaluate our ability continue operations as we are currently after we have final financial statements for April (the first full month in the new design), and will decide about whether we can continue this design past June 1st.

For all persons on furlough or PTO/LWOP, Tri-County is covering both our part and the employees' part of the health insurance premiums. I did not feel that this is the appropriate time for anyone to be without health insurance.

Many, many staff have stepped up during this crisis and have worked very hard to keep our services running as smoothly as possible. The list would be too long to review today, but I do want to mention crisis services who are always 'essential' and have to stay in the trenches regardless of the crisis, and our IT Department that has had to come up with solutions for staff that are working at home over and over again.

Finally, I want to mention that we are unsure what the long-term impact of our crisis response will be. In a typical two-week hurricane scenario, we would expect somewhere between \$250,000 and \$400,000 in lost revenue and about six months of 'hangover' impact to targets and program functioning. As you will see, the first couple of weeks of this crisis cost the center almost \$200,000 in lost revenue and we anticipate that our response to the storm will create operational challenges for months, perhaps even a year, to come. As an example of this, we have already missed two new employee orientation classes and we are not currently offering positions until we can schedule a start date.

HR 6201-The Families First Coronavirus Response Act

Tri-County Behavioral Healthcare consulted with a series of attorneys and ultimately determined that we are exempt from the Paid Sick Leave and Expanded Family and Medical Leave portions of the new Family First Coronavirus Response Act (FFCRA), because we are considered a "health care provider" as defined in the FFCRA.

The FFCRA exempts “healthcare providers” from Paid Sick Leave or Expanded Family and Medical Leave and further defines a “health care provider” as:

Anyone employed at any doctor’s office, hospital, health care center, clinic, postsecondary educational institution offering health care instruction, medical school, local health department or agency, nursing facility, retirement facility, nursing home, home health care provider, any facility that performs laboratory or medical testing, pharmacy, or any similar institution, employer, or entity. This includes any permanent or temporary institution, facility, location, or site where medical services are provided that are similar to such institutions.

Health care providers are exempted from the legislation because Congress did not want critical health care providers, or those that support these providers, to be unavailable during this health care crisis.

We have notified our staff that we are exempt from the legislation, but have added required postings and have, as required, provided staff with the information to appeal this decision if they do not agree.

Amy Foerster not only provided support to Tri-County during the review of this legislation, but provided support to much of the state as she, along with Pam Beach from the Texas Council Risk Management Fund, analyzed this lengthy bill and provided simple summaries of the legislation.

Payroll Protection Program

Millie and I looked into the Payroll Protection Program (PPP), which provides up to \$10,000,000 to eligible entities to maintain payroll, to see if we would be eligible. We were unable to get clear direction from the Texas Council, so we sought the feedback of Jackson Walker. After visiting with Jackson Walker, they provided us with the following feedback:

“We conducted additional research on the PPP eligibility requirements. Based upon the results of this research, and taking into account the structure and operations of Tri-County Behavioral Healthcare (TCBHC) and current SBA guidance, we do not believe TCBHC would be eligible for a PPP loan (for primarily technical reasons). Although 501(c)(3) organizations are eligible for Paycheck Protection Program loans and TCBHC is a 501(c)(3) organization, TCBHC is also a government-owned entity and government-owned entities are not eligible for PPP loans pursuant to the SBA 7(a) program rules (which rules apply to the PPP). In the absence of additional guidance from the SBA on this point, and to avoid any adverse impact on TCBHC’s status as a government-owned entity or create a problem down the road, we do not believe TCBHC should pursue a PPP loan.”

FEMA Crisis Counseling Program, COVID-19

As part of the crisis response, the Health and Human Services Disaster Behavioral Health team has applied for a state-wide COVID-19 Federal Emergency Management Agency Crisis Counseling

Program (CCP) grant. Tri-County has applied to participate in this grant and will cover our three counties with the CCP services if the grant is funded. We have been told that we will know for sure tomorrow (Friday). The mission of the CCP is to assist individuals and communities in recovering from the effects of natural and human-caused disasters through the provision of community-based outreach and psycho-educational services. These grants have been very helpful after some of our disasters (like Hurricane Harvey), and we are hopeful that this grant will meet many community needs.

We currently have a Tropical Storm Imelda Crisis Counseling Program grant. These grants may run simultaneously or we may fold the Imelda team into the COVID-19 CCP program at some point in the near future.

Goal Timelines

As will likely be the case with many things as this year goes forward, we may have to extend or cancel some of the Board goals that we have established for FY 2020. While we will plan to accomplish as many of our goals as possible, and in fact have already accomplished several of them, it may be difficult to stay on track with some of our goals if this crisis persists.

Of specific concern currently is the goal to request proposals for benefits managers and the Cleveland Facility project. The Cleveland Facility project would have been ready for Board approval today if we were not in the middle of the COVID-19 crisis, but I spoke with the Board Chair and we decided to delay this item until we felt that the impact of the crisis, both financially and otherwise, was known.

CCBHC Application

Finally, I am thrilled to announce that on March 6, 2020, Tri-County submitted our application to be certified as a Certified Community Behavioral Health Clinic (CCBHC). Prior to submission of our application, a team made up of Tanya Bryant, Diane Van Lier, Sara Bradfield, Millie McDuffey, Melisa Zemencik, Kenneth Barfield, Amy Foerster and I spent six weeks together working in a conference room to create our 'Certification Procedures' which explain how Tri-County will follow CCBHC guidelines. The final product was 1,312 pages and is ready for submission when the state calls to request it. Much thanks as well to Ava Green and Veronica Davidson for their work to help us organize the documents.

The HHSC CCBHC team has indicated that they will call us in mid-June to begin the certification process. Our job now is to change Center practices so that we are in compliance with the new expectations. The creation of these procedures is a significant accomplishment, but much work is still to be done. Of course, changing our procedures with all of the COVID response going on is much more complex than it would have been.

I am so grateful to the team for their tireless work on this. We are hoping for an A+ on our product, but will settle for a passing grade. We will keep you updated on the CCBHC certification process as we move forward.

CHIEF FINANCIAL OFFICER'S REPORT

April 23, 2020

Cost Reports Update – The past two years we have added the additional cost report for the CCBHC analysis of MH services. This report was submitted in early December 2019. In the future, this will probably be the most relevant cost report on the MH side. We still have the requirement to complete the Cost Accounting Methodology Cost Report (CAM), which is normally due at the end of February each year. The due date for CAM has been pushed back a couple of times this year and is now due in July. We should be getting this report completed sometime prior to the end of May in order to beat the summer budget busy season.

On the IDD side, we have the MEI and the HCS Cost reports to submit. These cost reports are normally due on April 15th each year. The due date for these reports was delayed till July. The bulk of the work on these cost reports has been done for quite some time. With this extra time, we will give the reports a final review and submit before the due dates.

Budgeting Software Update – We have finally started working with Questica on the new budgeting software. The program is called "PowerPlan", and it will give Tri-County the ability to involve department managers more actively in budget development. Thereafter, they will be able to track, monitor, and adjust budgets in a timely manner.

We have completed three of the four setup administrative trainings for the implementation of the software. We are currently in the process of completing the payroll spreadsheet to upload all of the current approved positions in the agency. After that is complete, we will be able to do the final administrative training.

Once all the administrative training is complete, the next step will be to provide a training to the department managers to get them oriented to the software. With the current COVID-19 staffing plan, we will have to determine what will be the best next steps in this process. Regardless of what steps are next, we will be using the software, we are excited about the capabilities and reports that we have seen, and we look forward to future budgeting.

FY 2021 Budget Process – We are getting ready for the FY 2021 budget process. Starting in May, we normally have budget meetings and trainings with all cost center managers. This is when we give each manager their historical trending data, and this year we plan to give them the orientation to the PowerPlan budgeting software. We hope to have this training in person. If not, we will have it by tele-video. We are excited about the new software, and we even have some program managers that are excited. We will have some challenges with projections based on the COVID-19 closure or phone services provided in some program areas. The first draft from managers will be required to be in the system by the middle of

June. We will review for a couple of weeks and give feedback. Comparisons of current year to projected next year will be completed by the end of July. The final budget will be ready to present to the Board at the August Board meeting.

Fixed Asset Inventory – The fixed asset inventory process is about to get under way. This is a complete count year, so we will get started with the actual count the beginning of May while the buildings are fairly empty.

Agenda Item: Appoint New MH Planning Network Advisory Committees Members

Board Meeting Date

April 23, 2020

Committee: Program

Background Information:

The Health and Human Services Commission contract requires that the Planning Network Advisory Committee (PNAC) "...be composed of at least nine members, fifty percent of whom shall be clients or family members of clients, including family members of children or youth, and at least one person with lived experience with homelessness or housing instability". Additionally, we are currently seeking additional membership of individuals who self-identify as having lived experience with mental illness to increase voice and representation of individuals served and better align with Certified Community Behavioral Health Clinic (CCBHC) Criteria.

Staff are recommending two new members for appointment to MHPNAC:

Megan (Appia) Erwin, Mental Health Specialist Peer Provider

- Special Interests – Advocacy in Mental Health Services
- Other Organizations – Member of the 2020 Peer Voice Project through Via Hope
- Personal Highlights – Actively pursuing education in the field of Peer Support and has lived experience with housing instability

Estrella (Star) Peralta, Mental Health Specialist Peer Provider

- Special Interests – Advocacy in Mental Health Services
- Personal Highlights – Family Member with lived experience

Ms. Erwin and Ms. Peralta have agreed to serve on the MHPNAC for a two-year term which will expire August 31, 2021.

Supporting Documentation:

None

Recommended Action:

Appoint Megan (Appia) Erwin and Estrella (Star) Peralta as Members of the MH Planning Network Advisory Committees to a Two-Year Term Which Expires August 31, 2021

Agenda Item: Community Resources Report

Board Meeting Date:

April 23, 2020

Committee: Program

Background Information:

None

Supporting Documentation:

Community Resources Report

Recommended Action:

For Information Only

Community Resources Report

February 28, 2020 – April 23, 2020

Volunteer Hours:

Location	February	March
Conroe	114.83	79
Cleveland	0	1
Liberty	13	1
Huntsville	9.50	1.50
Total	137.33	82.5

COMMUNITY ACTIVITIES:

2/28/20	Veterans Group Peer Support Training	Conroe
2/28/20	Walker County Juvenile Justice Meeting	Huntsville
2/28/20	Health & Wellness Fair – Family and Community Coalition of Montgomery County	Conroe
2/29/20	Health & Wellness Fair – Willis School Health Advisory Coalition	Willis
3/2/20	Montgomery County Homeless Coalition Board Meeting	Conroe
3/2/20	Lonestar College Veterans Student Center	The Woodlands
3/3/20	MCCARES Disaster Recovery Meeting	The Woodlands
3/3/20	VFW Meeting	Liberty
3/3/20	Community Mobilization Epidemiology Workgroup Meeting – Prevention Resource Center Region 6	Houston
3/3/20	Conroe ISD Special Education Transition Fair	Conroe
3/3/20	Adult Outpatient Services Presentation to Human Studies Class – Lone Star College	The Woodlands
3/4/20	Youth Mental Health First Aid Magnolia ISD	Magnolia
3/4/20	Tarkington Student Advisory Committee Meeting	Tarkington
3/4/20	Basic Certification Training for Veterans	Conroe
3/4/30	Lonestar College Veterans Student Center	The Woodlands
3/4/20	Conroe Noon Lions Club Luncheon	Conroe
3/4/20	Outreach, Screening, Assessment and Referral (OSAR Meeting)	Houston
3/5/20	Willis ISD Mentor Lunch	Willis
3/5/20	Veterans Gardening Class at A&M Extension Office	Conroe
3/5/20	Cleveland Chamber of Commerce Luncheon	Cleveland
3/11/20	Family and Community Coalition of Montgomery County	Conroe
3/12/20	Huntsville Chamber of Commerce Breakfast	Huntsville
3/12/20	Walker County Emergency Tracking Network Planning Meeting	Huntsville
3/13/20	Veterans Mental Health First Aid Training	Conroe
3/17/20	Montgomery County Community Resource Coordination Group	Conroe
3/17/20	Montgomery County Child Mental Health Coalition	Conroe

3/19/20	Homeless Management Information Systems – Quarter 1 Forum	Houston
3/19/20	Homeless Coalition Meeting	Conroe
3/24/20	Inaugural Substance Addiction Services Special Interest Group	Austin
3/25/20	Liberty County Community Resource Coordination Group Meeting via Teleconference	Liberty

UPCOMING ACTIVITIES:

5/7/20	Cleveland Chamber of Commerce Luncheon	Cleveland
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Agenda Item: Consumer Services Report for February and March 2020

Board Meeting Date:

April 23, 2020

Committee: Program

Background Information:

None

Supporting Documentation:

Consumer Services Report for February and March 2020

Recommended Action:

For Information Only

**Consumer Services Report
February 2020**

Consumer Services	Montgomery County	Cleveland	Liberty	Walker County	Total
Crisis Services, MH Adults/Children					
Persons Screened, Intakes, Other Crisis Services	617	44	47	60	768
Crisis and Transitional Services (LOC 0, LOC 5)	36	0	0	0	36
Psychiatric Emergency Treatment Center (PETC) Served	52	6	5	6	69
Psychiatric Emergency Treatment Center (PETC) Bed Days	215	29	18	33	295
East Montgomery County Crisis Service Admits	31	6	4	0	41
Contract Hospital Admissions	0	0	0	0	0
Diversion Admits	6	1	1	3	11
Total State Hospital Admissions	1	0	0	0	1
Routine Services, MH Adults/Children					
Adult Service Packages (LOC 1m,1s,2,3,4)	1236	111	93	113	1553
Adult Medication Services	997	81	71	101	1250
Child Service Packages (LOC 1-4 and YC)	743	64	34	89	930
Child Medication Services	280	19	11	28	338
TCOOMMI (Adult Only)	111	9	14	7	141
Adult Jail Diversions	2	0	0	0	2
Persons Served by Program, IDD					
Number of New Enrollments for IDD Services	7	0	1	1	9
Service Coordination	708	36	45	66	855
Persons Enrolled in Programs, IDD					
Center Waiver Services (HCS, Supervised Living)	23	4	13	17	57
Substance Abuse Services					
Children and Youth Prevention Services	979	11	29	25	1044
Youth Substance Abuse Treatment Services/COPSD	11	0	0	0	11
Adult Substance Abuse Treatment Services/COPSD	52	0	0	2	54
Waiting/Interest Lists as of Month End					
Adult Mental Health Services	67	0	0	0	67
Home and Community Based Services Interest List	1885	145	169	218	2417
February Served by County					
Adult Mental Health Services	1632	143	129	196	2100
Child Mental Health Services	911	75	45	99	1130
Intellectual and Developmental Disabilities Services	780	45	66	80	971
Total Served by County	3323	263	240	375	4201
January Served by County					
Adult Mental Health Services	1817	173	139	210	2339
Child Mental Health Services	872	63	41	107	1083
Intellectual and Developmental Disabilities Services	760	42	68	79	949
Total Served by County	3449	278	248	396	4371
December Served by County					
Adult Mental Health Services	1521	137	112	173	1943
Child Mental Health Services	803	67	37	89	996
Intellectual and Developmental Disabilities Services	875	40	63	81	1059
Total Served by County	3199	244	212	343	3998

Consumer Services Report March 2020

Consumer Services	Montgomery	Cleveland	Liberty	Walker	Total
Crisis Services, MH Adults/Children					
Persons Screened, Intakes, Other Crisis Services	541	55	31	64	691
Crisis and Transitional Services (LOC 0, LOC 5)	48	0	0	0	48
Psychiatric Emergency Treatment Center (PETC) Served	51	3	2	12	68
Psychiatric Emergency Treatment Center (PETC) Bed Days	222	12	6	44	284
East Montgomery County Crisis Service Admits	11	2	2	1	16
Contract Hospital Admissions	0	0	0	0	0
Diversion Admits	17	3	0	1	21
Total State Hospital Admissions	1	0	0	0	1
Routine Services, MH Adults/Children					
Adult Service Packages (LOC 1m,1s,2,3,4)	1134	187	129	118	1568
Adult Medication Services	875	91	82	99	1147
Child Service Packages (LOC 1-4 and YC)	775	66	32	87	960
Child Medication Services	238	12	7	24	281
TCOOMMI (Adult Only)	123	8	15	8	154
Adult Jail Diversions	1	0	0	0	1
Persons Served by Program, IDD					
Number of New Enrollments for IDD Services	13	0	0	0	13
Service Coordination	733	35	43	68	879
Persons Enrolled in Programs, IDD					
Center Waiver Services (HCS, Supervised Living)	23	4	14	17	58
Substance Abuse Services					
Children and Youth Prevention Services	943	11	29	8	991
Youth Substance Abuse Treatment Services/COPSD	11	0	0	0	11
Adult Substance Abuse Treatment Services/COPSD	53	0	0	3	56
Waiting/Interest Lists as of Month End					
Adult Mental Health Services	57	0	0	0	57
Home and Community Based Services Interest List	1916	147	172	221	2456
March Served by County					
Adult Mental Health Services	1545	154	128	204	2031
Child Mental Health Services	868	70	35	97	1070
Intellectual and Developmental Disabilities Services	813	43	64	80	1000
Total Served by County	3227	267	227	380	4101
March Number Served by Phone by County					
Adult Mental Health Number Served	335	34	12	53	434
Child Mental Health Number Served	446	46	20	57	569
Intellectual and Developmental Disabilities Number Served	741	35	51	70	897
Total Served by County	1522	115	83	180	1900
March Number of Services by Phone by County					
Adult Mental Health Services	508	38	15	68	629
Child Mental Health Services	633	62	25	103	823
Intellectual and Developmental Disabilities Services	2051	84	167	250	2552
Total Served by County	3192	184	207	421	4004
February Served by County					
Adult Mental Health Services	1623	143	129	195	2090
Child Mental Health Services	911	75	45	99	1130
Intellectual and Developmental Disabilities Services	780	45	66	80	971
Total Served by County	3314	263	240	374	4191

Agenda Item: Program Updates

Board Meeting Date:

April 23, 2020

Committee: Program

Background Information:

None

Supporting Documentation:

Program Updates

Recommended Action:

For Information Only

Program Updates

February 28, 2020 – April 23, 2020

Crisis Services

1. We continue to advertise and to work with recruiting services to fill our vacant psychiatry position at the Psychiatric Emergency Treatment Center. This search, of course, has been significantly hampered by our COVID-19 response.
2. All of our crisis team is considered 'essential' and has been working hard to keep services running as they normally would over the last few weeks. We did shut down the East Montgomery County Crisis Clinic (Porter) and the Extended Observation Unit (which is also at the PETC) to ensure there was adequate staffing for the Crisis Stabilization Unit and Crisis Walk-in Service. We also capped the Crisis Stabilization Unit census at nine to ensure that each person was able to have their own room.
3. Crisis Walk-in volume has been up and down with some days being extremely busy and others being very slow.

MH Adult Services

1. Our two new Advanced Practice Registered Nurses (APRNs) who were hired in February have been training at the Conroe facility. They have both chosen to work from the office during this time rather than work from home.
2. We continue to have an opening for a psychiatrist at our Conroe Service Location. We are also advertising and working with recruiting services to fill this position. The caseload is currently being covered by one of our new APRNs.
3. All of our existing prescribers have been able to keep working during this COVID-19 event. Most of the existing prescribers are working from home. Our outpatient nurses and front desk staff have all been working from the office and have made it possible for our psychiatrists to stay on schedule.
4. Our no-show rate spiked in the first couple of weeks after the virus became news in our service area, but fell back down to historical averages after those two weeks. While many folks have chosen to get a refill via phone, we have been able to keep the schedules full for the prescribers. Overall the clients that are being served seem to be responding well to the televideo.
5. Most of our Bachelors level Qualified Mental Health Professionals are working with their clients via telephone from their home since mid-March. We were able to allow this as soon as the Health and Human Services Commission (HHSC) relaxed rules for many of our services to allow them to be completed via phone. Many of our staff have been able to be very productive at home, but some are struggling. We continue to provide them support and assistance, and we are also monitoring their productivity.
6. The Routine Assessment and Counseling Team is preparing to make changes associated with CCBHC, including the addition of a screening tool which will allow for more focus on identification and understanding of an individual's trauma history. By making this change, staff are able to more appropriately understand an individual's needs and make recommendations for diagnosis and treatment that impact those needs. Further, by

asking about trauma history, staff are able to normalize symptoms and set expectations for ongoing services as being trauma-aware.

7. The First Episode Psychosis Team has had three additional candidates recommended for treatment in February. The program continues to have a positive impact on participants with an individual preparing to start GED prep classes this month. The program has also assisted one client in finding and maintaining full-time employment with two others working part-time, and three clients returning to high school to finish their education.
8. The Adult Outpatient Services program continues to work on hiring and development of staff. The program has recruited several new staff over the last month, filling vacancies in each of the levels of care, including the Assertive Community Treatment Team (ACT), which is full for the first time in several months. We are excited for the opportunity to have staffing in place to provide quality services to individuals and help support them in achieving their recovery goals.

MH Child and Youth Services

1. Our Child and Youth clinicians are working through the nuances of providing skills training, case management, and therapy telephonically while face-to-face services are being reduced. Some of our clinicians and clients are liking this format a lot, while others are struggling. Over time, we believe this will become more natural for everyone.
2. Our C&Y Supervisors continue to actively recruit new staff during this time via telephone and Skype. We are anticipating that the demand for services will increase significantly once things start going back to normal. If we chose someone, they will be reassured that we are interested will notify them as soon as we are able to move forward with new employee orientation.
3. Child and Youth routine intakes have drastically reduced since the stay-at-home orders have gone out; however current clients and clients being referred from crisis are keeping us busy.

Criminal Justice Services

The Outpatient Competency Restoration program has admitted a new program participant this month, taking the total admitted to three for the fiscal year. Staff have been diligently working to market the program in the community and raise awareness of the benefits of OCR to the judicial and State hospital systems. Criminal Justice Services programs are also working well with the Mental Health Treatment Court to coordinate care, which has resulted in an increase in numbers served in TCOOMMI as well.

Substance Use Disorder Services

1. The Administrator of Substance Use Disorder Treatment program continues to see positive growth and outcomes with several successful discharges occurring in the last two months. The Program Administrator has completed and submitted the annual United Way Year End Report. The program looks forward to continuing this important community partnership.
2. Our prevention education groups in the schools were abruptly halted when schools were forced to shut down for COVID-19. HHSC has announced they are suspending enforcement of performance measures the require face-to-face interaction regarding to

prevention contracts. Our Youth Substance Abuse Prevention social media campaign is the focus at this time while face-to-face connection is being discouraged.

3. The prevention team has stepped up to help out the other departments that are short-handed due to employees that have to stay at home, by taking vital signs for patients, setting up patients for tele-video prescriber appointments, and other duties as assigned.

IDD Services

1. IDD Provider Services' mandatory month long "Random Moment in Time Study (RMST)," which was to have occurred in March, has been delayed at this time due to COVID-19.
2. IDD Provider Services continues preparation for the upcoming annual audit.
3. The Day Habilitation Programs have been closed since March 18th due to COVID-19 at the request of the Department of State Health Services.
4. IDD Provider Services final report for the HCS Medicaid Desk Audit payback was reduced from the initial \$7,004.29 to \$216.98.
5. IDD Authority Services has completed and submitted the FY 2020 Survey Corrective Action Plans to HHSC.
6. IDD Authority was given permission to call individuals in services as opposed to face to face visits. The Service Coordinators are striving to call everyone on their caseload weekly to ensure and ask of health and determine needs outside of other contract expectations. At this time, individuals and families have reported no signs of COVID-19.

Support Services

1. **Quality Management (QM):**
 - a. Staff reviewed and submitted one record request from Amerigroup for one client chart dating back to January of 2018.
 - b. QM staff continue to review a sample of internal monthly chart audits conducted by program supervisors and provide necessary training and feedback as needed.
 - c. Staff reviewed 30 client discharges that took place in the month of February to ensure compliance with Center procedures. Feedback on these discharges were provided to supervisory staff to ensure quality improvement.
 - d. Staff implemented changes in line with the IDD Corrective Action Plan for the recent Annual IDD Authority Audit that took place in February.
2. **Utilization Management (UM):**
 - a. Staff reviewed 32 notes containing the Co-Occurring Psychiatric and Substance Use Disorder (COPSD) modifier for the month of February to ensure that this modifier is being provided and documented correctly for individuals indicating a need for Substance Use Disorder intervention. Feedback in regards to changes that need to be made have been provided to supervisory staff.
3. **Training:**
 - a. The Clinical Trainer and the administrator of QM are finalizing the steps to transition five CBT's into face to face trainings and staff are currently analyzing CCBHC requirements to determine what additional trainings may be needed.

- b. Staff continue to seek opportunities for Train the Trainer certifications in order to increase the local resources available through the Training Department.
4. **Veteran Services and Veterans Counseling/Crisis:**
- a. MVPN re-established our presence in the Texas Department for Criminal Justice Planes Facility.
 - b. In March the Veterans Services program held our first docket for the Liberty Veteran's Treatment Court.
 - c. Staff are currently working on maintaining our community connections through letter writing and video-calling.
 - d. The Veteran's Administration (VA) is referring many of their veterans to our programs due to the VA being closed throughout the COVID-19 crisis. This is creating an increase in daily phone calls from veterans needing help and an increase in veterans needing therapy.
5. **Planning and Network Advisory Committee(s) (MH and IDD PNACs):**
- a. MH PNAC – We continue to actively seek additional members for this committee. Additionally, the MH PNAC is seeking members that have lived experiences with mental health in their lives. On February 19, 2020 Tri-County's two Adult Peers began attending committee meetings.
 - b. IDD PNAC – Following the Annual Local Authority Audit, staff updated the PNAC agenda and minute templates to align with the Corrective Action Plan required as a result of the audit related to activities needed to increase membership from the current eight members to the required nine IDD PNAC members. Additionally, Corrective Actions were provided to the Regional Planning and Network Advisory Committee Liaison so that needed changes could be implemented on a regional level.

Community Activities

- 1. Tri-County's Consumer Foundation helped three families this quarter. The Board of Directors approved rental assistance to a single mother who was going to be evicted from her mobile home and have to live in her car with her teenage son; a widowed grandmother raising her two young grandchildren get running water in her home; and we are in the process of recasting the principle mortgage for another single grandmother raising her grandchildren, all of whom would be homeless without the Foundation's assistance.
- 2. The Imelda Team met with HHSC staff for a site visit in early March. HHSC was very impressed with the Team's accomplishments and noted that they were responsible for over 50% of the services being provided for the entire grant.

Agenda Item: Year to Date FY 2020 Goals and Objectives Progress Report

Board Meeting Date

April 23, 2020

Committee: Program

Background Information:

The Management Team met on August 9, 2019 to update the five-year strategic plan and to develop the goals for FY 2020. The strategic plan and related goals were approved by the Board of Trustees at the August 2019 Board meeting. 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 Health and Human Services Commission or other contractors.

This report shows progress year to date for Fiscal Year 2020.

Supporting Documentation:

FY 2020, Year to Date Goals and Objectives Progress Report

Recommended Action:

For Information Only

Year-to-Date Progress Report

September 1, 2019 – April 23, 2020

Goal #1 – Administrative Competence

Objective 1: Name(s)

Staff will implement electronic workflows for timesheets and budgeting by May 31, 2020.

- The move to electronic timesheets (along with a new payroll cycle) was completed during the first quarter of FY20. As well, our job postings and applications are now processed through our new HR software. Our personnel files are moving toward a paperless process with most contents routed electronically through the Center for approvals and processing. We anticipate continued rollouts of additional functions of the HR software throughout this FY.
- In the second quarter of FY20, we built electronic workflows for disciplinary documentation and annual performance reviews. Utilization of and training on these additional workflows has been delayed due to COVID-19.
- We have completed the first 3 of 4 administrative trainings for the implementation of the new budgeting software. We are in the process of completing a spreadsheet to upload all the position data into the master payroll budgeting portion of the program. After that is complete we will be able to do the final administrative training. Then we will be in a position to train the department managers when things settle down for the center.

Objective 2: Name(s)

All computers that are in use by staff for services will be converted to the Microsoft Windows 10 operating system and Microsoft Office 2019 software suites by March 31, 2020.

- Completed as of February 7, 2020.

Goal #2 – Clinical Excellence

Objective 1: Name(s)

Tri-County will submit documents to HHSC to be certified as a Certified Community Behavioral Health Clinic by June 20, 2020. Regular reports on progress will be made to the Board of Trustees.

- The CCBHC Leadership Team made up of Amy Foerster, Diane Van Lier, Evan Roberson, Kenneth Barfield, Sara Bradfield, Melissa Zemencsik, Millie McDuffey and Tanya Bryant spent the entire month of February working on CCBHC Certification procedures. The finished manual is 1312 pages.
- The CCBHC Certification application was submitted to HHSC on March 6, 2020. HHSC has acknowledged receipt of our application and provided the following information about their process from here:

“We are currently working through other centers, with Tri-County being the 13th center to apply for certification. We are planning to start your certification process in mid-June, so will be reaching out again sometime in May to set up a call. This allows us time to review and provide each individual center with appropriate feedback. When we start working with a center, we schedule a call with executive leadership in order to go over the CCBHC process, some of the key requirements of the model, and timelines for submitting documents and for our review. Currently, we are not planning to visit folks that have a direct contract with HHSC, as we also get information from QM to help inform some elements of our review.”

Goal #3 – Community Connectedness

Objective 1: Name(s)

The Tri-County Consumer Foundation will hold at least two fundraisers in FY 2020.

- The board continues to gather information on types of fundraisers to host. The directors have been discussing a Bike Race, Fun Run, Clay Shoot, and Casino Night (the Foundation would be a recipient only – not the organizer of the event). February’s board meeting was postponed to March due to not having a quorum. March’s board meeting was to be via phone due to COVID-19, but again no quorum. In lieu of a Spring fundraiser the board is applying for a Wells Fargo grant.

Objective 2: Name(s)

Tri-County will leverage social media to “tell our story” in FY 2020 as evidenced by weekly social media posts about Tri-County and the services we offer.

- During the first quarter of FY20, we worked to build the TCBHC brand to gain recognition and awareness in the community. As well, we added to our social media platform through the creation of both Tri-County Instagram and Twitter accounts (@TCBHC). In just the first quarter of having these accounts, we are proud to say we rank #10 on Twitter and #6 on Instagram among the thirty-nine community centers in number of followers and we hope to see that number (and outreach) grow.
- In the second quarter of FY20, we explored building our LinkedIn profile as well as ways to utilize our social media accounts to assist with recruiting efforts.

Goal #4 – Fiscal Responsibility

Objective 1: Name(s)

Staff will issue a Request for Proposals for Benefits Managers by February 29, 2020.

- A draft Request for Proposal (RFP) has been prepared and was set to release in February of 2020, seeking written proposals for Third Party Benefits Administrators to provide Employee Benefit Insurance Brokerage and Consulting services.

- Our deadline on this objective was pushed back, as CCBHC certification work was our top priority. We planned on picking this back up for completion in the third quarter of FY20, but our COVID-19 response has prevented us from doing so.

Goal #5 – Professional Facilities

Objective 1: Name(s)

Staff will present a plan for a new facility in Cleveland, Texas for approval by the Board by February 29, 2020.

- The Cleveland Facility team has worked with our Building Consultant, Mike Duncum, and ARCHTEX architects to develop a site plan and feasibility study for the new Cleveland Facility.
- A 4.45-acre site for the Cleveland facility is under contract pending Board approval.
- We planned to make a full report to the Board at the April meeting and hoped to receive Board authorization to begin the steps necessary to construct the facility. However, after consultation with the Board Chair, Evan Roberson pulled this item from the April agenda.
- The Center’s focus needs to be on the COVID response at this time and we hope to pick up this item after the COVID response is completed, and after we understand the impact of the COVID response on our financial reserves.

Goal #6 – Staff Development

Objective 1: Name(s)

At least five current computer-based training courses will be converted to face-to-face training by May 31, 2020.

- Five current computer-based training courses have been identified to be converted over to face to face trainings and include: Severe Weather and Bioterrorism, Clients Rights, Disabilities Overview, People with Serious Mental Illness, and Principles of Positive Behavior Support. Training Outlines have been created for all five and PowerPoint presentations have been created for two of the five trainings.
- The Five computer-based trainings listed above have been converted to PowerPoint trainings and are in the process of being reviewed by various managers around the Center to ensure that they are complete and accurate prior to roll out. Once field testing is complete they will be implemented into NEO, which is scheduled to occur at the end of May 2020 pending any delays related to current events. Additional trainings are currently being reviewed, as a part of our CCBHC Certification Process, and we anticipate additional face-to-face trainings may be added in the near future.

Objective 2: Name(s)

All staff will be trained in part two of the Trauma Informed Care training by August 31, 2020.

- The Clinical Trainer implemented part two of the Trauma Informed Care training on September 23, 2019 and has trained 49 staff to date. Additional trainings are scheduled over the next few months to ensure that all staff are trained by August 31, 2020.
- As of April 13, 2020, 189 staff have been trained on part two of the Trauma Informed Care training. More staff will be trained in upcoming trainings that are scheduled to occur over the next five months.

Agenda Item: 2nd Quarter FY 2020 Corporate Compliance and Quality Management Report

Board Meeting Date

April 23, 2020

Committee: Program

Background Information:

The Health and Human Service Commission's Performance Contract Notebook has a requirement that the Quality Management Department provide "routine" reports to the Board of Trustees about "Quality Management Program activities."

Although Quality Management Program activities have been included in the program updates, it was determined that it might be appropriate, in light of this contract requirement, to provide more details regarding these activities.

Since the Corporate Compliance Program and Quality Management Program activities are similar in nature, the decision was made to incorporate the Quality Management Program activities into the Quarterly Corporate Compliance Report to the Board and to format this item similar to the program updates. The Corporate Compliance and Quality Management Report for the 2nd Quarter of FY 2020 are included in this Board packet.

Supporting Documentation:

2nd Quarter FY 2020 Corporate Compliance and Quality Management Report

Recommended Action:

For Information Only

Corporate Compliance and Quality Management Report 2nd Quarter, FY 2020

Corporate Compliance Activities

A. Key Statistics:

Two investigations were completed in the 2nd Quarter.

1. The first investigation had no service payback. The staff was paid \$358.49 in overtime worked that was not reported on their timesheet and received a verbal warning.
2. The second investigation resulted in \$329.52 in service payback. The staff received a written warning, and Compliance will continue to monitor the staff's services.

B. Committee Activities:

The Corporate Compliance Committee was unable to meet in January due to CCBHC meetings. The next meeting date will be scheduled soon.

Quality Management Initiatives

A. Key Statistics:

1. Staff prepared for and participated in the Annual IDD Authority Audit that occurred in February 2020.
2. Staff participated in the Quarterly Superior HealthPlan on-site audit on February 12, 2019. All charts reviewed scored above 94% for overall chart compliance and 100% for overall claims compliance in total. There were only minor findings.
3. Staff reviewed and submitted five record requests, totaling 14 charts.
4. Staff conducted several internal audits including telemedicine surveys, progress note reviews, discharge documentation, authorization override requests for clinically complex individuals, and use of the co-occurring psychiatric and substance use modifier.

B. Reviews/Audits:

1. Staff prepared and submitted three charts going back three months for the quarterly Superior HealthPlan on-site audit.
2. Staff reviewed and submitted three charts to private insurance companies for services they were billed dating back to January 2019.

3. Staff reviewed and submitted 10 charts to Optum/United Healthcare for services they were billed dating back to June 2019.
4. Staff reviewed and submitted one chart to Amerigroup for services that were billed dating back to January 2018.
5. Staff conducted quarterly chart audits in compliance with the IDD Authority Audit Corrective Action Plan which resulted from the annual audit that took place in January 2019.
6. 39 progress notes were reviewed in detail by staff (28 Child and Youth and 11 Adult Outpatient). Areas needing improvement were communicated to the supervisor and the Clinical Trainer provided re-training as needed.

C. Other Quality Management Activities:

1. Staff reviewed 82 notes that used the Co-Occurring Psychiatric and Substance Use Disorder (COPSD) modifier to ensure that the intervention was used appropriately. This review indicated that the majority of staff utilizing this code are using it correctly with 84% of charts reviewed meeting the criteria. Follow up was made with supervisors as appropriate to initiate additional education as needed.
2. Staff reviewed 33 surveys from individuals who were hospitalized in our State Hospital Diversion beds via contract facilities. The majority of the feedback was generally positive. Quality Management staff continue to monitor these surveys to ensure quality of care.
3. Staff reviewed 37 Televideo Satisfaction Surveys with overall feedback received for Q2 being positive. Some individuals continued to note that they prefer face to face services although they had no other complaints and were pleased that they were able to be seen.
4. There were no appeals received in Q2.

<p>Agenda Item: 3rd Quarter FY 2020 Corporate Compliance Training</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>April 23, 2020</p>
<p>Background Information:</p> <p>As part of the Center’s Corporate Compliance Program, training is developed each quarter for distribution to staff by their supervisors.</p> <p>This training is included in the packet for ongoing education of the Tri-County Board of Trustees on Corporate Compliance issues.</p>	
<p>Supporting Documentation:</p> <p>3rd Quarter FY 2020 Corporate Compliance Training</p>	
<p>Recommended Action:</p> <p>For Information Only</p>	

What is the False Claims Act?

The False Claims Act is one of many federal laws that helps prevent fraud, waste, and abuse in the healthcare industry.

What is a violation of the False Claims Act? Submission of false information, records or claims regarding federal healthcare programs may violate the False Claims Act. Examples of false claims can include: billing for services not provided, billing for a service more than once, or making false statements to receive payment for services. As False Claims Act penalties can be severe, Tri-County seeks to ensure that all staff understand the False Claims Act.

Understanding the False Claims Act helps employees and contractors learn how to remain compliant with the law and also helps to prevent possible violations of fraud, waste, and abuse in the workplace. Examples of action taken by Tri-County to ensure compliance with and understanding of the False Claims Act include:

- ◇ Tri-County abides by all federal and state laws and implements/enforces policies and procedures to detect and prevent fraud, waste, and abuse.
- ◇ Tri-County educates and trains its employees and contractors about fraud and abuse through regular compliance trainings, such as this one.
- ◇ Ensuring that all Tri-County employees and contractors are knowledgeable and aware of laws regarding false or fraudulent claims.

Your Corporate Compliance Team

Amy Foerster
Chief Compliance Officer
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Heather Hensley
Administrator of Compliance
heatherh@tcbhc.org

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It takes less time to do things right than to explain why you did it wrong.
- Henry Wadsworth Longfellow

REPORT Compliance Concerns

Corporate Hotline: 866-243-9252

- ◆ Reports are kept confidential and may be made anonymously.
- ◆ Reports may be made without fear of reprisal or penalties.
- ◆ Report to your supervisor, or any Compliance team member any concerns of fraud, abuse, or other wrong doing.



Agenda Item: Personnel Report for February and March 2020

Board Meeting Date:

April 23, 2020

Committee: Executive

Background Information:

None

Supporting Documentation:

Personnel Report for February and March 2020

Recommended Action:

For Information Only

Personnel Report February 2020

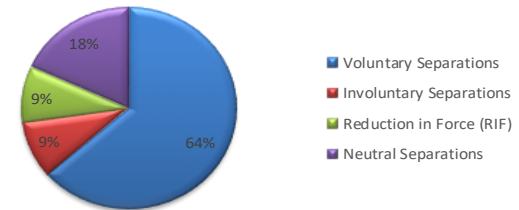
Total Applications received in February= 163

Total New Hires for the month of February= 12

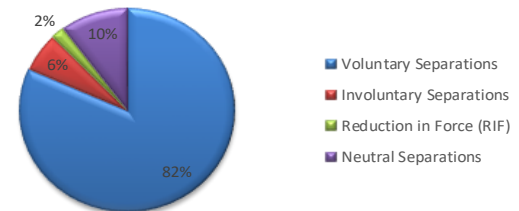
Total New Hires Year to Date = 76

February Turnover - FY20 compared to FY19	FY20	FY19
Number of Active Employees	378	357
Number of Monthly Separations	11	11
Number of Separations YTD	49	51
Year to Date Turnover Rate	13%	14%
February Turnover Rate	3%	3%

February Voluntary, Involuntary, RIF and Neutral Separations



Year to Date Voluntary, Involuntary, RIF and Neutral Separations

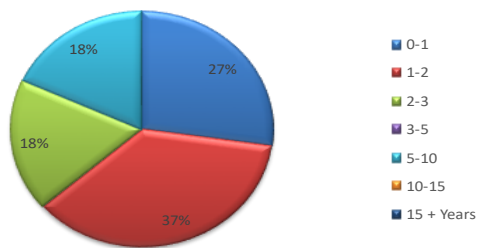


Separations by Reason	February Separations	FY20 YTD
Better Pay	1	7
Commute	1	3
Death	0	0
Dissatisfaction with Supervisor/Job	0	3
Family	2	6
Another job	2	7
Lack of Opportunity for Advancement	0	0
Relocating	0	1
Retirement	0	2
Return to School	1	3
Schedule	0	1
Uncomfortable with Job Duties	0	3
Health	0	2
RIF	1	1
Neutral Termination	2	7
Involuntarily Terminated	1	3
Total Separations	11	49

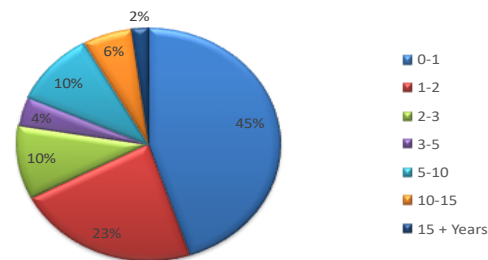
Management Team	# of Employees	Monthly Separations	Year to Date Separations	% February	% Year to Date
Evan Roberson	22	0	0	0%	0%
Millie McDuffey	36	2	8	6%	22%
Amy Foerster	5	0	1	0%	20%
Tanya Bryant	10	0	2	0%	20%
MH Adult	91	3	12	3%	13%
MH Child & Youth	74	3	11	4%	15%
Catherine Prestigiovanni	10	0	4	0%	40%
PETC	55	2	4	4%	7%
Kelly Shropshire	37	1	1	3%	3%
Kathy Foster	30	0	5	0%	17%
Kenneth Barfield	8	0	1	0%	13%
Total	378	11	49		

Separation by EEO Category	# of Employees	Monthly Separations	Year to Date Separations	% February	% Year to Date
Supervisors & Managers	28	0	1	0%	4%
Medical (MD,DO, LVN, RN, APN, PA, Psychologist)	46	4	6	9%	13%
Professionals (QMHP)	115	4	19	3%	17%
Professionals (QIDP)	30	1	1	3%	3%
Licensed Staff (LCDC, LPC...)	22	0	1	0%	5%
Business Services (Accounting)	12	1	2	8%	17%
Central Administration (HR, IT, Executive Director)	18	0	5	0%	28%
Program Support(Financial Counselors, QA, Training, Med. Records)	58	1	8	2%	14%
Nurse Technicians/Aides	17	0	1	0%	6%
Service/Maintenance	8	0	0	0%	0%
Direct Care (HCS, Respite, Life Skills)	24	0	5	0%	21%
Total	378	11	49		

February Separations by Tenure



Year to Date Separations by Tenure

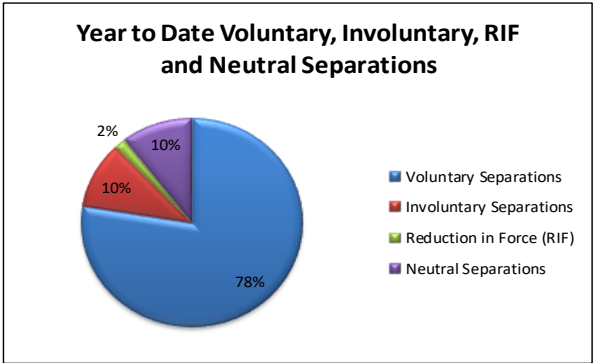
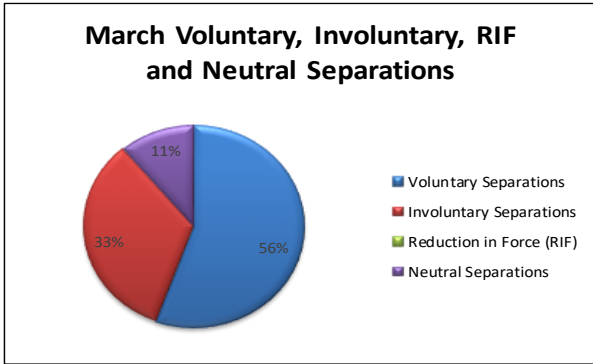


Personnel Report March 2020

Total Applications received in March= 126
Total New Hires for the month of March= 11
Total New Hires Year to Date = 87

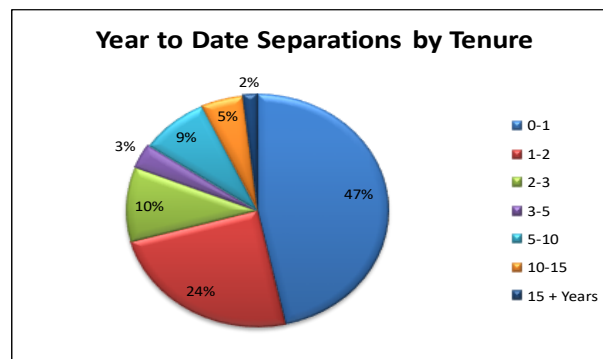
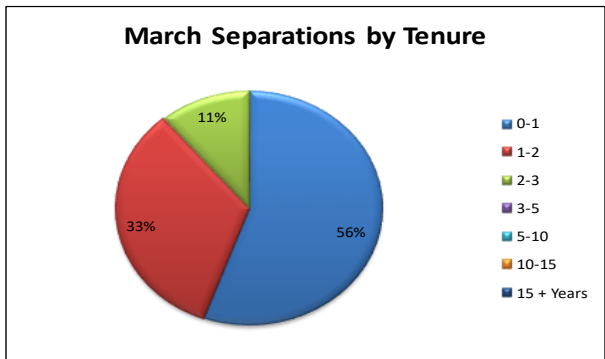
March Turnover - FY20 compared to FY19	FY20	FY19
Number of Active Employees	378	356
Number of Monthly Separations	9	9
Number of Separations YTD	58	60
Year to Date Turnover Rate	15%	17%
March Turnover Rate	2%	3%

Separations by Reason	March Separations	FY20 YTD
Better Pay	0	7
Commute	1	4
Death	0	0
Dissatisfaction with Supervisor/Job	0	3
Family	1	7
Another job	2	9
Lack of Opportunity for Advancement	0	0
Relocating	0	1
Retirement	0	2
Return to School	0	3
Schedule	0	1
Uncomfortable with Job Duties	0	3
Health	1	3
RIF	0	1
Neutral Termination	1	8
Involuntarily Terminated	3	6
Total Separations	9	58



Management Team	# of Employees	Monthly Separations	Year to Date Separations	% March	% Year to Date
Evan Roberson	21	0	0	0%	0%
Millie McDuffey	35	1	9	3%	26%
Amy Foerster	5	0	1	0%	20%
Tanya Bryant	10	0	2	0%	20%
MH Adult	94	3	15	3%	16%
MH Child & Youth	73	2	13	3%	18%
Catherine Prestigiovanni	12	1	5	8%	42%
PETC	53	1	5	2%	9%
Kelly Shropshire	36	1	2	3%	6%
Kathy Foster	31	0	5	0%	16%
Kenneth Barfield	8	0	1	0%	13%
Total	378	9	58		

Separation by EEO Category	# of Employees	Monthly Separations	Year to Date Separations	% March	% Year to Date
Supervisors & Managers	27	1	2	4%	7%
Medical (MD,DO, LVN, RN, APN, PA, Psychologist)	45	1	7	2%	16%
Professionals (QMHP)	119	3	22	3%	18%
Professionals (QIDP)	29	1	2	3%	7%
Licensed Staff (LCDC, LPC...)	22	0	1	0%	5%
Business Services (Accounting)	12	0	2	0%	17%
Central Administration (HR, IT, Executive Director)	18	0	5	0%	28%
Program Support(Financial Counselors, QA, Training, Med. Records)	57	2	10	4%	18%
Nurse Technicians/Aides	16	1	2	6%	13%
Service/Maintenance	8	0	0	0%	0%
Direct Care (HCS, Respite, Life Skills)	25	0	5	0%	20%
Total	378	9	58		



Agenda Item: Texas Council Risk Management Fund Claims Summary as of March 2020

Board Meeting Date:

April 23, 2020

Committee: Executive

Background Information:

None

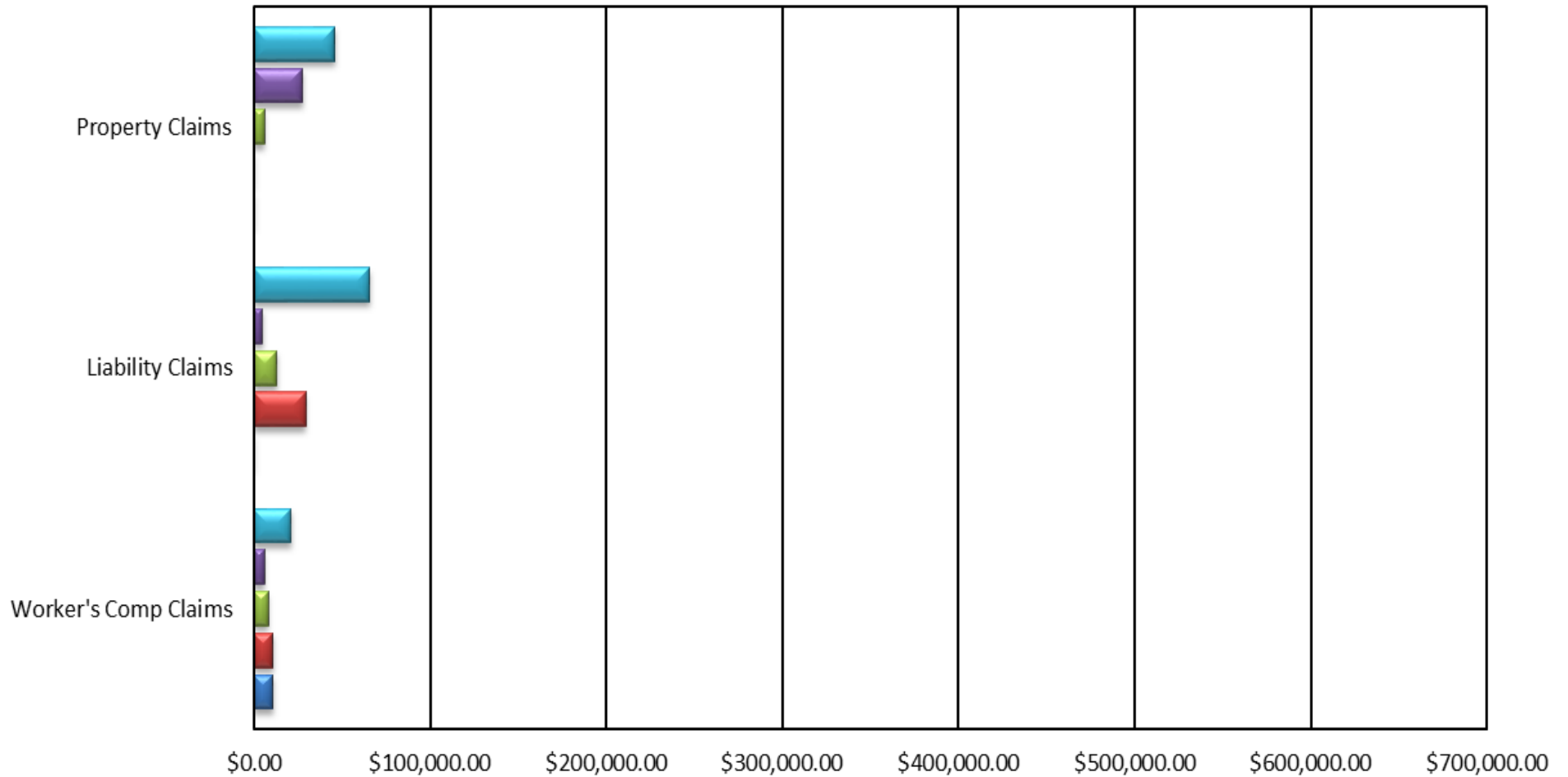
Supporting Documentation:

Texas Council Risk Management Fund Claims Summary as of March 2020

Recommended Action:

For Information Only

TCRMF Claims Summary March 2020



	Worker's Comp Claims	Liability Claims	Property Claims
2016	\$21,176.00	\$65,795.00	\$46,114.00
2017	\$6,011.00	\$4,893.00	\$27,455.00
2018	\$8,191.00	\$13,108.00	\$6,126.00
2019	\$10,638.00	\$29,330.00	\$0.00
2020	\$10,638.00	\$0.00	\$0.00

Agenda Item: Approve February 2020 Financial Statements Committee: Business	Board Meeting Date April 23, 2020
Background Information: None	
Supporting Documentation: February 2020 Financial Statements	
Recommended Action: Approve February 2020 Financial Statements	

February 2020 Financial Summary

Revenues for February 2020 were \$2,494,496 and operating expenses were \$2,378,990 resulting in a gain in operation of 115,506. Capital Expenditures and Extraordinary Expenses for February were \$94,106 resulting in a gain of \$21,400. Total revenues were 101.02% of the monthly budgeted revenues and total expenses were 99.43% of the monthly budgeted expenses (difference of 1.59%).

Year to date revenues are \$16,161,772 and operating expenses are \$15,253,191 leaving excess operating revenues of \$908,581. YTD Capital Expenditures and Extraordinary Expenses are \$789,441 resulting in a gain YTD of \$119,140. Total revenues are 98.61% of the YTD budgeted revenues and total expenses are 98.25% of the YTD budgeted expenses (difference of 0.36%).

REVENUES

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

Revenue Source	YTD Revenue	YTD Budget	% of Budget	\$ Variance
Client Fees	78,521	165,523	47.442%	87,002
Case Management MH	296,107	331,967	89.20%	35,860
HCS – Title XIX	897,530	929,212	96.59%	31,682
Rehab – Title XIX	910,380	1,157,772	78.63%	247,392

Client Fees – We are continuing to review our outstanding client balances. Based on a criterion that we have established such as client discharged from services for 90 days, or no payments received for a year. We will be doing periodic client write offs to ensure we have accurate accounts receivable balances. We have also started to review clients who have high deductible insurance plans and we are adjusting off amounts that are not realistically collectible based on our clients’ individual abilities to pay.

Case Management MH – This line item is under budget due to staff vacant positions in both MH child and adult programs. We continue to recruit for the vacancies and really do not have much hope of seeing a change in this revenue trend for quite some time based on the added COVID-19 effect on staffing.

HCS - This line item continues to be under budget based on several factors as described at the February board meeting. We have one individual that we are holding

billing until the client is transferred into the State CARE system. We currently have one empty bed at one of the supervised living homes. And we have three host home clients that have been hospitalized which means we are unable to bill for the time that they are in the hospital. We expect these situations to be cleared up, but now we have the added COVID-19 issues which has also reduced our revenue with the Day programs being shut down during this period of time.

Rehab – Title XIX – This line item continues to be affected by the number of vacant positions that are currently open in both the adult and children’s programs as well as the COVID-19 staffing related issues.

EXPENSES

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

Expense Source	YTD Expenses	YTD Budget	% of Budget	\$ Variance
Building Repair & Maintenance	125,032	95,752	130.58%	29,280
Contract – Clinical	466,670	333,814	139.80%	132,856
Fixed Assets - Vehicles	64,478	0	0	64,478
Medication Expense	384,265	352,506	109.01%	31,759

Building Repair & Maintenance – This line item went over budget in October with the completion of the tree removal and replanting of trees at the Conroe location. This will get adjusted in the first budget revision.

Contract – Clinical – This line item is over budget due to the use of contract doctors for coverage in our clinical programs. This overage is offset by a lapse in the salary line for these programs.

Fixed Assets – Vehicles – This line item is showing the purchase of the Board approved vehicles. This line item will be adjusted during our next budget revision.

Medication Expense – This line item is our medication expense and showed up as a variance on the December financials. The variance is in part due to the increasing number of individuals that we are serving and also the cost of medication is increasing. January’s variance was very small and this month we saw a large increase in the variance. We will do some further analysis before we adjust in the midyear revision to determine the trending for the remaining months of this fiscal year.

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended February 29, 2020**

	TOTALS COMBINED FUNDS February 2020	TOTALS COMBINED FUNDS January 2020	Increase (Decrease)
ASSETS			
CURRENT ASSETS			
Imprest Cash Funds	3,500	3,250	250
Cash on Deposit-General Fund	7,467,545	9,005,739	(1,538,193)
Cash on Deposit-Debt Fund			-
Accounts Receivable	2,985,789	2,885,501	100,289
Inventory	4,750	4,530	220
TOTAL CURRENT ASSETS	10,461,584	11,899,019	(1,437,435)
FIXED ASSETS	19,435,971	19,435,971	-
OTHER ASSETS	111,304	133,132	(21,828)
TOTAL ASSETS	\$ 30,008,859	\$ 31,468,122	\$ (1,459,262)
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
CURRENT LIABILITIES	1,043,777	1,091,102	(47,326)
NOTES PAYABLE	630,692	630,692	-
DEFERRED REVENUE	296,766	1,738,910	(1,442,144)
LONG-TERM LIABILITIES FOR			
Line of Credit - Tradition Bank	-	-	-
Note Payable Prosperity Bank	-	-	-
First Financial loan tied to CD	297,917	320,833	(22,917)
First Financial Construction Loan	11,440,502	11,479,538	(39,036)
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	119,140	97,740	21,400
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(11,738,419)	(11,800,371)	61,953
Reserved for Debt Retirement			-
COMMITTED			
Net Assets-Property and Equipment	19,435,971	19,435,971	-
Reserved for Vehicles & Equipment Replacement	613,712	678,112	(64,400)
Reserved for Facility Improvement & Acquisitions	2,500,000	2,500,000	-
Reserved for Board Initiatives	1,500,000	1,500,000	-
Reserved for 1115 Waiver Programs	502,677	502,677	-
ASSIGNED			
Reserved for Workers' Compensation	274,409	274,409	-
Reserved for Current Year Budgeted Reserve	36,998	(33,569)	70,567
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(630,692)	(630,692)	-
UNASSIGNED			
Unrestricted and Undesignated	3,585,410	3,582,770	2,640
TOTAL LIABILITIES/FUND BALANCE	\$ 30,008,859	\$ 31,468,122	\$ (1,459,263)

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended February 29, 2020**

	General Operating Funds	Memorandum Only Final August 2019
ASSETS		
CURRENT ASSETS		
Imprest Cash Funds	3,500	3,500
Cash on Deposit-General Fund	7,467,545	8,204,549
Cash on Deposit-Debt Fund	-	-
Accounts Receivable	2,985,789	2,127,671
Inventory	4,750	4,695
TOTAL CURRENT ASSETS	10,461,584	10,340,415
FIXED ASSETS	19,435,971	19,435,971
OTHER ASSETS	111,304	136,153
	\$ 30,008,859	\$ 29,912,539
LIABILITIES, DEFERRED REVENUE, FUND BALANCES		
CURRENT LIABILITIES	1,043,777	1,152,521
NOTES PAYABLE	630,692	630,692
DEFERRED REVENUE	296,766	183,283
LONG-TERM LIABILITIES FOR		
Line of Credit - Tradition Bank	-	-
Note Payable Prosperity Bank	-	-
First Financial loan tied to CD	297,917	435,417
First Financial Construction Loan	11,440,502	11,675,110
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR		
General Fund	119,140	633,843
FUND EQUITY		
RESTRICTED		
Net Assets Reserved for Debt service-Restricted	(11,738,419)	(12,110,527)
Reserved for Debt Retirement	-	-
COMMITTED		
Net Assets-Property and Equipment-Committed	19,435,971	19,435,971
Reserved for Vehicles & Equipment Replacement	613,712	678,112
Reserved for Facility Improvement & Acquisitions	2,500,000	2,500,000
Reserved for Board Initiatives	1,500,000	1,500,000
Reserved for 1115 Waiver Programs	502,677	502,677
ASSIGNED		
Reserved for Workers' Compensation-Assigned	274,409	274,409
Reserved for Current Year Budgeted Reserve -Assigned	36,998	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(630,692)	(630,692)
UNASSIGNED		
Unrestricted and Undesignated	3,585,410	2,951,724
TOTAL LIABILITIES/FUND BALANCE	\$ 30,008,859	\$ 29,912,539

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended February 2020
and Year To Date as of February 2020

INCOME:	MONTH OF February 2020	YTD February 2020
Local Revenue Sources	138,934	867,745
Earned Income	1,124,229	6,680,279
General Revenue-Contract	1,231,332	8,613,748
TOTAL INCOME	\$ 2,494,496	\$ 16,161,772
EXPENSES:		
Salaries	1,463,894	9,271,556
Employee Benefits	290,633	1,846,140
Medication Expense	70,923	384,265
Travel-Board/Staff	39,450	214,330
Building Rent/Maintenance	23,323	164,388
Consultants/Contracts	316,293	2,158,504
Other Operating Expenses	174,475	1,214,007
TOTAL EXPENSES	\$ 2,378,990	\$ 15,253,191
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 115,506	\$ 908,581
CAPITAL EXPENDITURES		
Capital Outlay-FF&E, Automobiles, Building	902	229,584
Capital Outlay-Debt Service	93,204	559,857
TOTAL CAPITAL EXPENDITURES	\$ 94,106	\$ 789,441
GRAND TOTAL EXPENDITURES	\$ 2,473,096	\$ 16,042,632
Excess (Deficiency) of Revenues and Expenses	\$ 21,400	\$ 119,140

Debt Service and Fixed Asset Fund:		
Debt Service	93,204	559,857
Excess(Deficiency) of revenues over Expenses	93,204	559,857

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of February 2020

	YTD February 2020	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	867,745	880,503	(12,758)
Earned Income	6,680,279	6,963,397	(283,118)
General Revenue-Contract	8,613,748	8,545,815	67,933
TOTAL INCOME	\$ 16,161,772	\$ 16,389,715	\$ (227,943)
EXPENSES:			
Salaries	9,271,556	9,502,756	(231,200)
Employee Benefits	1,846,140	1,935,274	(89,134)
Medication Expense	384,265	352,506	31,759
Travel-Board/Staff	214,330	243,745	(29,415)
Building Rent/Maintenance	164,388	133,430	30,958
Consultants/Contracts	2,158,504	2,149,974	8,530
Other Operating Expenses	1,214,007	1,272,988	(58,981)
TOTAL EXPENSES	\$ 15,253,191	\$ 15,590,673	\$ (337,482)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 908,581	\$ 799,042	\$ 109,539
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	229,584	175,636	53,948
Capital Outlay-Debt Service	559,857	561,432	(1,575)
TOTAL CAPITAL EXPENDITURES	\$ 789,441	\$ 737,068	\$ 52,373
GRAND TOTAL EXPENDITURES	\$ 16,042,632	\$ 16,327,741	\$ (285,109)
Excess (Deficiency) of Revenues and Expenses	\$ 119,140	\$ 61,974	\$ 57,166
Debt Service and Fixed Asset Fund:			
Debt Service	559,857	561,432	(1,575)
Excess(Deficiency) of revenues over Expenses	559,857	561,432	(1,575)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended February 2020

INCOME:	MONTH OF February 2020	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	138,934	128,586	10,348
Earned Income	1,124,229	1,138,605	(14,376)
General Revenue-Contract	1,231,332	1,202,120	29,212
TOTAL INCOME	\$ 2,494,496	\$ 2,469,311	\$ 25,185
EXPENSES:			
Salaries	1,463,894	1,434,960	28,934
Employee Benefits	290,633	295,939	(5,306)
Medication Expense	70,923	56,249	14,674
Travel-Board/Staff	39,450	40,738	(1,288)
Building Rent/Maintenance	23,323	19,237	4,086
Consultants/Contracts	316,293	341,492	(25,199)
Other Operating Expenses	174,475	201,049	(26,574)
TOTAL EXPENSES	\$ 2,378,990	\$ 2,389,664	\$ (10,674)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 115,506	\$ 79,647	\$ 35,859
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	902	4,087	(3,185)
Capital Outlay-Debt Service	93,204	93,572	(368)
TOTAL CAPITAL EXPENDITURES	\$ 94,106	\$ 97,659	\$ (3,553)
GRAND TOTAL EXPENDITURES	\$ 2,473,096	\$ 2,487,323	\$ (14,227)
Excess (Deficiency) of Revenues and Expenses	\$ 21,400	\$ (18,012)	\$ 39,412

Debt Service and Fixed Asset Fund:			
Debt Service	93,204	93,572	(368)
Excess(Deficiency) of revenues over Expenses	93,204	93,572	(368)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With YTD February 2019 Comparative Data
Year to Date as of February 2020

INCOME:	YTD February 2020	YTD February 2019	Increase (Decrease)
Local Revenue Sources	867,745	722,694	145,051
Earned Income	6,680,279	6,430,454	249,825
General Revenue-Contract	8,613,748	8,357,392	256,356
TOTAL INCOME	\$ 16,161,772	\$ 15,510,540	\$ 651,232
EXPENSES:			
Salaries	9,271,556	8,813,329	458,227
Employee Benefits	1,846,140	1,729,696	116,444
Medication Expense	384,265	316,494	67,771
Travel-Board/Staff	214,330	221,458	(7,128)
Building Rent/Maintenance	164,388	147,004	17,384
Consultants/Contracts	2,158,504	2,157,360	1,144
Other Operating Expenses	1,214,007	1,224,484	(10,477)
TOTAL EXPENSES	\$ 15,253,191	\$ 14,609,823	\$ 643,366
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 908,581	\$ 900,717	\$ 7,866
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	229,584	92,207	137,377
Capital Outlay-Debt Service	559,857	563,014	(3,157)
TOTAL CAPITAL EXPENDITURES	\$ 789,441	\$ 655,221	\$ 134,220
GRAND TOTAL EXPENDITURES	\$ 16,042,632	\$ 15,265,044	\$ 777,588
Excess (Deficiency) of Revenues and Expenses	\$ 119,140	\$ 245,496	\$ (126,354)

Debt Service and Fixed Asset Fund:			
Debt Service	559,857	563,014	(3,157)
Excess(Deficiency) of revenues over Expenses	559,857	563,014	(3,157)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With February 2019 Comparative Data
For the Month Ended February 2020

INCOME:	<u>MONTH OF February 2020</u>	<u>MONTH OF February 2019</u>	<u>Increase (Decrease)</u>
Local Revenue Sources	138,934	137,413	1,521
Earned Income	1,124,229	1,130,940	(6,711)
General Revenue-Contract	1,231,332	1,337,739	(106,407)
TOTAL INCOME	<u>\$ 2,494,496</u>	<u>\$ 2,606,091</u>	<u>\$ (111,596)</u>
Salaries	1,463,894	1,510,042	(46,148)
Employee Benefits	290,633	308,605	(17,972)
Medication Expense	70,923	53,905	17,018
Travel-Board/Staff	39,450	42,348	(2,898)
Building Rent/Maintenance	23,323	20,887	2,436
Consultants/Contracts	316,293	309,862	6,431
Other Operating Expenses	174,475	179,574	(5,099)
TOTAL EXPENSES	<u>\$ 2,378,990</u>	<u>\$ 2,425,223</u>	<u>\$ (46,233)</u>
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	<u>\$ 115,506</u>	<u>\$ 180,868</u>	<u>\$ (65,363)</u>
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	902	21	881
Capital Outlay-Debt Service	93,204	93,738	(534)
TOTAL CAPITAL EXPENDITURES	<u>\$ 94,106</u>	<u>\$ 93,759</u>	<u>\$ 347</u>
GRAND TOTAL EXPENDITURES	<u>\$ 2,473,096</u>	<u>\$ 2,518,982</u>	<u>\$ (45,886)</u>
Excess (Deficiency) of Revenues and Expenses	<u>\$ 21,400</u>	<u>\$ 87,109</u>	<u>\$ (65,710)</u>

Debt Service and Fixed Asset Fund:			
Debt Service	93,204	93,738	(534)
Excess(Deficiency) of revenues over Expenses	<u>93,204</u>	<u>93,738</u>	<u>(534)</u>

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With January 2020 Comparative Data
For the Month Ended February 2020

INCOME:	MONTH OF February 2020	MONTH OF January 2020	Increase (Decrease)
Local Revenue Sources	138,934	194,072	(55,138)
Earned Income	1,124,229	1,186,210	(61,981)
General Revenue-Contract	1,231,332	1,555,392	(324,059)
TOTAL INCOME	\$ 2,494,496	\$ 2,935,674	\$ (441,178)
EXPENSES:			
Salaries	1,463,894	1,793,825	(329,931)
Employee Benefits	290,633	336,276	(45,643)
Medication Expense	70,923	56,837	14,086
Travel-Board/Staff	39,450	37,729	1,720
Building Rent/Maintenance	23,323	20,449	2,873
Consultants/Contracts	316,293	345,215	(28,922)
Other Operating Expenses	174,475	207,028	(32,554)
TOTAL EXPENSES	\$ 2,378,990	\$ 2,797,360	\$ (418,370)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 115,506	\$ 138,314	\$ (22,807)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	902	86,901	(85,998)
Capital Outlay-Debt Service	93,204	93,250	(46)
TOTAL CAPITAL EXPENDITURES	\$ 94,106	\$ 180,150	\$ (86,044)
GRAND TOTAL EXPENDITURES	\$ 2,473,096	\$ 2,977,511	\$ (504,415)
Excess (Deficiency) of Revenues and Expenses	\$ 21,400	\$ (41,837)	\$ 63,237

Debt Service and Fixed Asset Fund:			
Debt Service	93,204	93,250	(46)
Excess(Deficiency) of revenues over Expenses	93,204	93,250	(46)

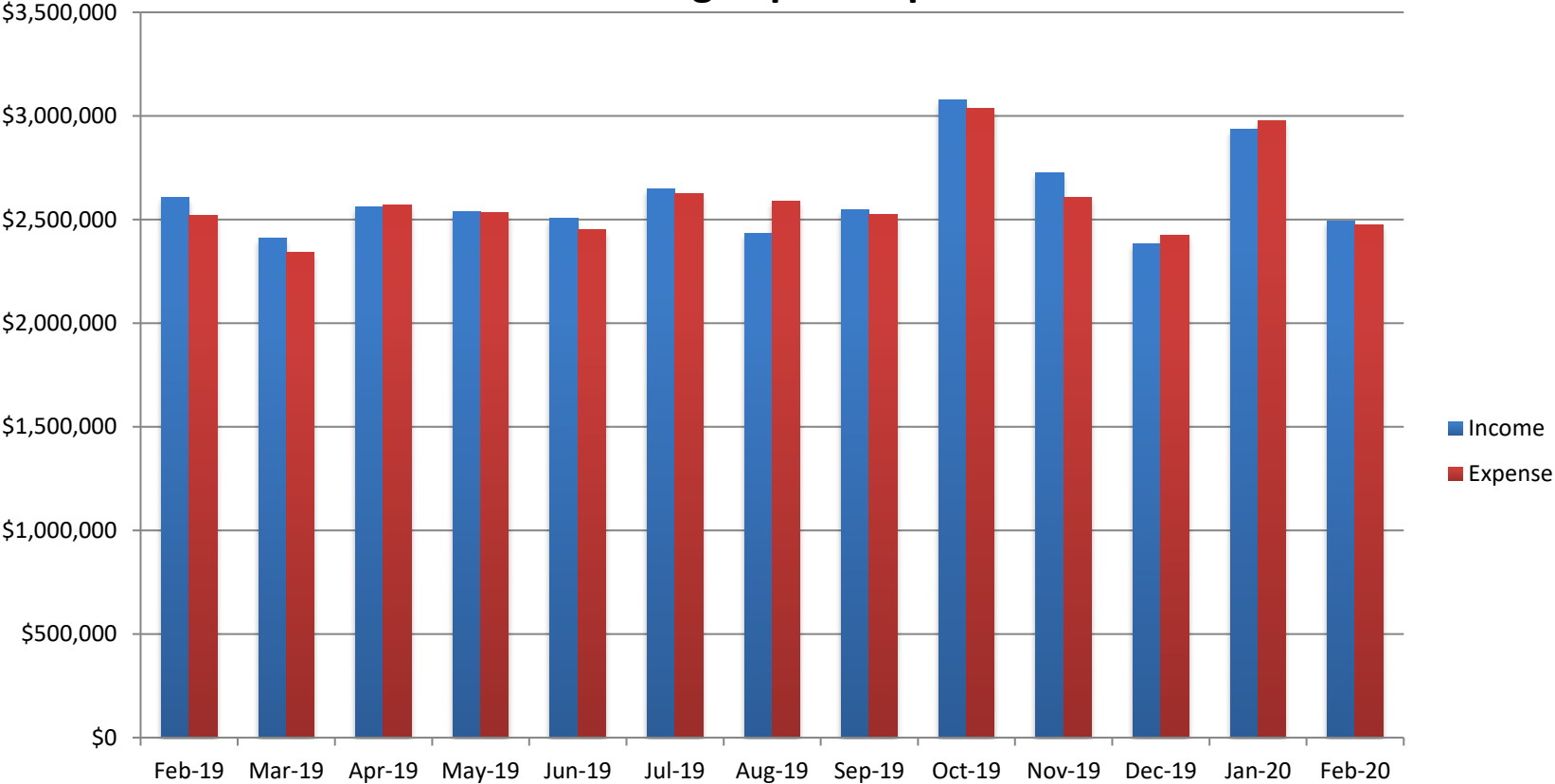
TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of February 2020

	YTD Mental Health February 2020	YTD IDD February 2020	YTD Other Services February 2020	YTD Agency Total February 2020	YTD Approved Budget February 2020	Increase (Decrease)
INCOME:						
Local Revenue Sources	590,067	164,872	112,807	867,745	880,503	(12,758)
Earned Income	4,542,590	1,269,253	868,436	6,680,279	6,963,397	(283,118)
General Revenue-Contract	5,857,348	1,636,612	1,119,787	8,613,748	8,545,815	67,933
TOTAL INCOME	\$ 10,990,005	\$ 3,070,737	\$ 2,101,030	\$ 16,161,772	\$ 16,389,715	\$ (227,943)
EXPENSES:						
Salaries	6,304,658	1,761,596	1,205,302	9,271,556	9,502,756	(231,200)
Employee Benefits	1,255,375	350,767	239,998	1,846,140	1,935,274	(89,134)
Medication Expense	261,300	73,010	49,954	384,265	352,506	31,759
Travel-Board/Staff	145,745	40,723	27,863	214,330	243,745	(29,415)
Building Rent/Maintenance	111,784	31,234	21,370	164,388	133,430	30,958
Consultants/Contracts	1,467,783	410,116	280,606	2,158,504	2,149,974	8,530
Other Operating Expenses	825,525	230,661	157,821	1,214,007	1,272,988	(58,981)
TOTAL EXPENSES	\$ 10,372,170	\$ 2,898,107	\$ 1,982,914	\$ 15,253,191	\$ 15,590,673	\$ (337,483)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 617,835	\$ 172,630	\$ 118,116	\$ 908,581	\$ 799,042	\$ 109,540
CAPITAL EXPENDITURES						
Capital Outlay-FF&E, Automobiles	156,117	43,621	29,846	229,584	175,636	53,948
Capital Outlay-Debt Service	380,703	106,373	72,781	559,857	561,432	(1,575)
TOTAL CAPITAL EXPENDITURES	\$ 536,820	\$ 149,994	\$ 102,627	\$ 789,441	\$ 737,068	\$ 52,373
GRAND TOTAL EXPENDITURES	\$ 10,908,990	\$ 3,048,101	\$ 2,085,541	\$ 16,042,632	\$ 16,327,741	\$ (285,110)
Excess (Deficiency) of Revenues and Expenses	\$ 81,015	\$ 22,636	\$ 15,489	\$ 119,140	\$ 61,974	\$ 57,167
Debt Service and Fixed Asset Fund:						
Debt Service	380,703	106,373	72,781	559,857	561,432	(180,729)
Excess(Deficiency) of revenues over Expenses	380,703	106,373	72,781	559,857	561,432	(180,729)

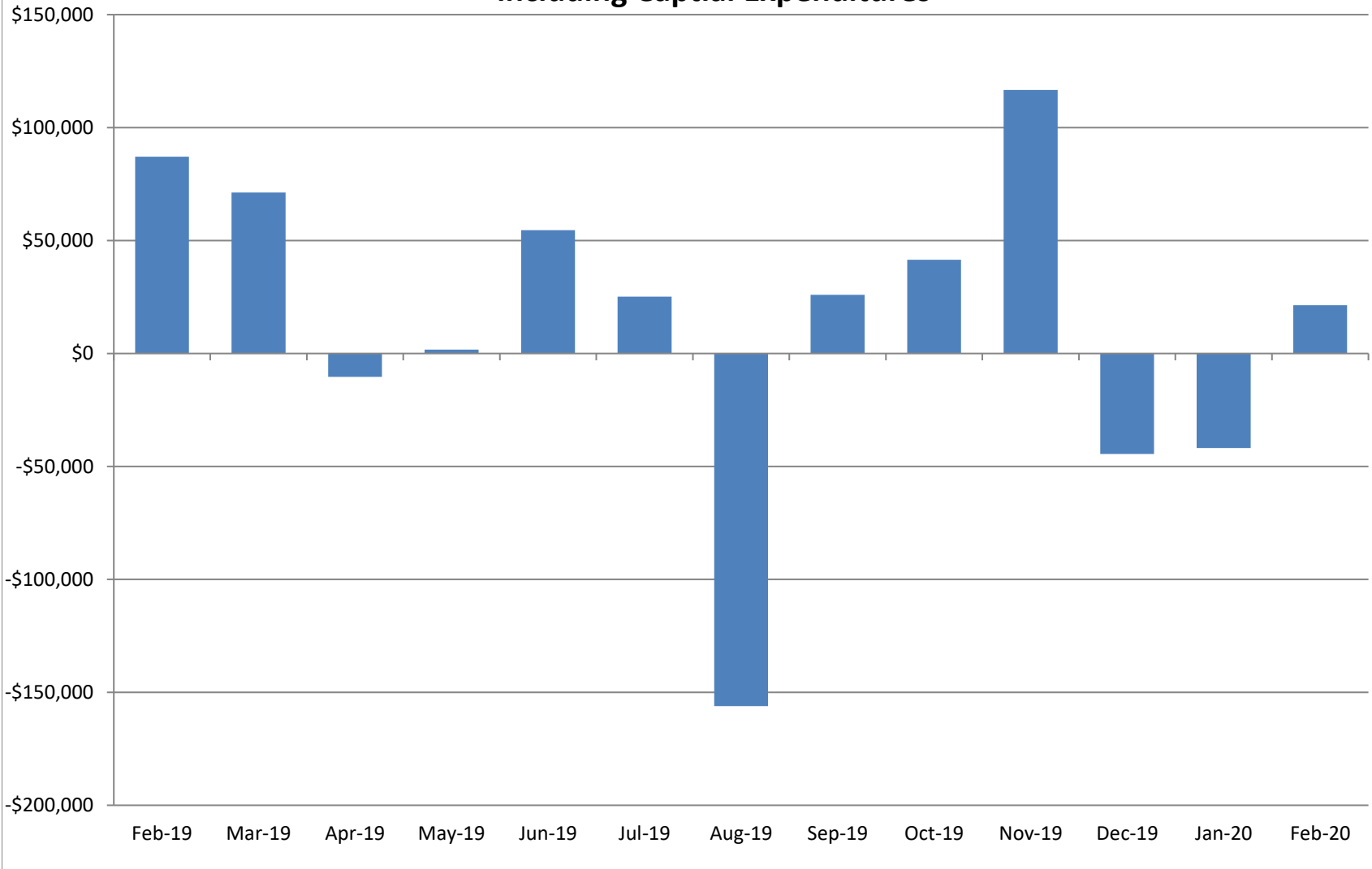
**Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of January 2020**

	YTD Mental Health January 2020	YTD IDD January 2020	YTD Other Services January 2020	YTD Agency Total January 2020	YTD Approved Budget January 2020	Increase (Decrease)
INCOME:						
Local Revenue Sources	451,799	126,238	150,773	728,811	751,917	(23,106)
Earned Income	3,778,114	1,055,650	722,287	5,556,050	5,824,792	(268,742)
General Revenue-Contract	5,020,042	1,402,659	959,714	7,382,415	7,331,695	50,720
TOTAL INCOME	\$ 9,249,955	\$ 2,584,547	\$ 1,832,774	\$ 13,667,276	\$ 13,908,404	\$ (241,128)
EXPENSES:						
Salaries	5,309,209	1,483,456	1,014,996	7,807,661	8,067,796	(260,135)
Employee Benefits	1,057,745	295,546	202,216	1,555,507	1,639,335	(83,828)
Medication Expense	213,073	59,535	40,735	313,343	296,257	17,086
Travel-Board/Staff	118,919	33,227	22,735	174,881	203,007	(28,126)
Building Rent/Maintenance	95,925	26,803	18,339	141,066	114,193	26,873
Consultants/Contracts	1,252,704	350,020	239,488	1,842,212	1,808,482	33,730
Other Operating Expenses	706,882	197,511	135,139	1,039,533	1,071,939	(32,406)
TOTAL EXPENSES	\$ 8,754,457	\$ 2,446,098	\$ 1,673,648	\$ 12,874,204	\$ 13,201,009	\$ (326,806)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 495,498	\$ 138,449	\$ 159,126	\$ 793,072	\$ 707,395	\$ 85,678
CAPITAL EXPENDITURES						
Capital Outlay-FF&E, Automobiles	155,504	43,450	29,729	228,682	171,549	57,133
Capital Outlay-Debt Service	317,324	88,664	60,665	466,653	467,860	(1,207)
TOTAL CAPITAL EXPENDITURES	\$ 472,828	\$ 132,114	\$ 90,394	\$ 695,335	\$ 639,409	\$ 55,926
GRAND TOTAL EXPENDITURES	\$ 9,227,285	\$ 2,578,212	\$ 1,764,042	\$ 13,569,539	\$ 13,840,418	\$ (270,880)
Excess (Deficiency) of Revenues and Expenses	\$ 22,670	\$ 6,335	\$ 68,732	\$ 97,740	\$ 67,986	\$ 29,752
Debt Service and Fixed Asset Fund:						
Debt Service	317,324	88,664	60,665	466,653	467,860	(150,536)
Excess(Deficiency) of revenues over Expenses	317,324	88,664	60,665	466,653	467,860	(150,536)

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



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



Agenda Item: Approve March 2020 Financial Statements Committee: Business	Board Meeting Date April 23, 2020
Background Information: None	
Supporting Documentation: March 2020 Financial Statements	
Recommended Action: Approve March 2020 Financial Statements	

March 2020 Financial Summary

Revenues for March 2020 were \$2,438,517 and operating expenses were \$2,532,980 resulting in a loss in operation of \$94,464. Capital Expenditures and Extraordinary Expenses for March were \$99,317 resulting in a loss of 193,781. Total revenues were 94.29% of the monthly budgeted revenues and total expenses were 101.94% of the monthly budgeted expenses (difference of -7.65%).

Year to date revenues are \$18,600,289 and operating expenses are \$17,786,171 leaving excess operating revenues of \$814,117. YTD Capital Expenditures and Extraordinary Expenses are \$888,759 resulting in a loss YTD of \$74,641. Total revenues are 98.02% of the YTD budgeted revenues and total expenses are 98.75% of the YTD budgeted expenses (difference of -0.73%).

REVENUES

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

Revenue Source	YTD Revenue	YTD Budget	% of Budget	\$ Variance
Client Fees	119,070	197,981	60.14%	78,911
Case Management MH	344,688	389,294	88.54%	44,606
HCS – Title XIX	1,040,716	1,082,656	96.13%	41,940
Medicaid - PASRR	92,938	111,782	83.14%	18,844
Medicaid – Regular – Title XIX	363,194	379,373	95.74%	16,179
Rehab – Title XIX	1,040,937	1,350,739	77.06%	309,802

Client Fees – We continue to see client fees with a variance over \$10,000 based on the review and subsequent write off of outstanding client balances that were determined to be uncollectable based on the established criteria per procedures. This line item is adjusted in the midyear budget revision presented to the Board this month.

Case Management MH – This line item continues to be under budget due to staff vacant positions in both MH child and adult programs. This month we also have the added factor of closing mid-month and transitioning clinicians to working from home and providing phone services. We continue to recruit for the vacant positions and hope to be able to hire qualified applicants in the near future. For the next few months

we anticipate it being challenging to meet revenue projections and not sure what the new normal will be when the closures are lifted.

HCS Title XIX - This line item also continues to be under budget based on several factors in prior months. The closure of the Day programs mid-March for the COVID-19 will cause this revenue line to continue to be well under normal annual projections until we reopen the program.

Medicaid - PASRR – This line item is new to the variance list this month. This refers to the PASRR services that are provided in Nursing homes. With the COVID-19 closures, access to the nursing homes has been suspended until further notice.

Medicaid – Regular – Title XIX – This line item is earned Medicaid revenue which has been reduced based on the center closure mid-month. Clinicians are able to bill Medicaid for phone services through the end of the month, but the number of services provided are less than normal projections.

Rehab – Title XIX – This line item continues to be affected by the number of vacant positions that are currently open in both the adult and children’s programs, as well as the COVID-19 staffing related issues, as noted above in Case Management MH.

****NOTE – Grant Funded Cost Reimbursement Programs Under Budget by more than \$10,000 –**

- DSHS – MH First Aid
- DSHS – First Episode Psychosis
- DADS – Autism Program
- HHSC – Youth Prevention Universal
- DSHS – SA Prevention
- Texas Veteran’s Commission Grant

EXPENSES

YTD Expense items that exceed the YTD budget by more than \$10,000:

Expense Source	YTD Expenses	YTD Budget	% of Budget	\$ Variance
Building Repair & Maintenance	141,308	108,710	129.99%	32,598
Contract – Clinical	541,256	387,035	139.85%	154,221
Fixed Assets - Vehicles	64,478	0	0	64,478

License Fees-Software	161,141	146,030	110.35%	15,111
Medication Expense	447,111	408,755	109.38%	38,356

Building Repair & Maintenance – This line item went over budget in October with the completion of the tree removal and replanting of trees at the Conroe location. This will get adjusted in the first budget revision.

Contract – Clinical – This line item is over budget due to the use of contract doctors for coverage in our clinical programs. This overage is offset by a lapse in the salary line for these programs.

Fixed Assets – Vehicles – This line item is showing the purchase of the Board approved vehicles. This line item will be adjusted during our next budget revision.

License Fees – Software Expense – This line item is for software licenses. To be able to adapt to our current circumstances, we purchased additional Citrix licenses for clinician access to Anasazi while working from home. We also purchased a video conference software called Lifesize, which has been used pretty much daily since purchased, in order to have staff meetings numerous times per week.

Medication Expense – This line item is our medication expense and showed up as a variance on the December financials. The variance is in part due to the increasing number of individuals that we are serving and also due to the increasing cost of medication. This line item will continue to trend high based on medication costs and will be adjusted in the revision.

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended March 31, 2020**

	TOTALS COMBINED FUNDS March 2020	TOTALS COMBINED FUNDS February 2020	Increase (Decrease)
ASSETS			
CURRENT ASSETS			
Imprest Cash Funds	3,550	3,500	50
Cash on Deposit-General Fund	10,278,273	7,467,545	2,810,727
Cash on Deposit-Debt Fund			-
Accounts Receivable	2,742,678	2,985,789	(243,111)
Inventory	4,420	4,750	(330)
TOTAL CURRENT ASSETS	13,028,921	10,461,584	2,567,337
FIXED ASSETS	19,435,971	19,435,971	-
OTHER ASSETS	93,109	111,304	(18,195)
TOTAL ASSETS	\$ 32,558,000	\$ 30,008,859	\$ 2,549,143
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
CURRENT LIABILITIES	1,136,705	1,043,777	92,929
NOTES PAYABLE	630,692	630,692	-
DEFERRED REVENUE	2,940,633	296,766	2,643,867
LONG-TERM LIABILITIES FOR			
Line of Credit - Tradition Bank	-	-	-
Note Payable Prosperity Bank	-	-	-
First Financial loan tied to CD	275,000	297,917	(22,917)
First Financial Construction Loan	11,399,398	11,440,502	(41,104)
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	(74,641)	119,140	(193,781)
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(11,674,398)	(11,738,419)	64,021
Reserved for Debt Retirement			-
COMMITTED			
Net Assets-Property and Equipment	19,435,971	19,435,971	-
Reserved for Vehicles & Equipment Replacement	613,712	613,712	-
Reserved for Facility Improvement & Acquisitions	2,500,000	2,500,000	-
Reserved for Board Initiatives	1,500,000	1,500,000	-
Reserved for 1115 Waiver Programs	502,677	502,677	-
ASSIGNED			
Reserved for Workers' Compensation	274,409	274,409	-
Reserved for Current Year Budgeted Reserve	43,165	36,998	6,167
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(630,692)	(630,692)	-
UNASSIGNED			
Unrestricted and Undesignated	3,585,370	3,585,410	(40)
TOTAL LIABILITIES/FUND BALANCE	\$ 32,558,000	\$ 30,008,859	\$ 2,549,141

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended March 31, 2020**

ASSETS	General Operating Funds	Memorandum Only Final August 2019
CURRENT ASSETS		
Imprest Cash Funds	3,550	3,500
Cash on Deposit-General Fund	10,278,273	8,204,549
Cash on Deposit-Debt Fund	-	-
Accounts Receivable	2,742,678	2,127,671
Inventory	4,420	4,695
TOTAL CURRENT ASSETS	13,028,921	10,340,415
FIXED ASSETS	19,435,971	19,435,971
OTHER ASSETS	93,109	136,153
	\$ 32,558,000	\$ 29,912,539
LIABILITIES, DEFERRED REVENUE, FUND BALANCES		
CURRENT LIABILITIES	1,136,705	1,152,521
NOTES PAYABLE	630,692	630,692
DEFERRED REVENUE	2,940,633	183,283
LONG-TERM LIABILITIES FOR		
Line of Credit - Tradition Bank	-	-
Note Payable Prosperity Bank	-	-
First Financial loan tied to CD	275,000	435,417
First Financial Construction Loan	11,399,398	11,675,110
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR		
General Fund	(74,641)	633,843
FUND EQUITY		
RESTRICTED		
Net Assets Reserved for Debt service-Restricted	(11,674,398)	(12,110,527)
Reserved for Debt Retirement	-	-
COMMITTED		
Net Assets-Property and Equipment-Committed	19,435,971	19,435,971
Reserved for Vehicles & Equipment Replacement	613,712	678,112
Reserved for Facility Improvement & Acquisitions	2,500,000	2,500,000
Reserved for Board Initiatives	1,500,000	1,500,000
Reserved for 1115 Waiver Programs	502,677	502,677
ASSIGNED		
Reserved for Workers' Compensation-Assigned	274,409	274,409
Reserved for Current Year Budgeted Reserve -Assigned	43,165	-
Reserved for Insurance Deductibles-Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(630,692)	(630,692)
UNASSIGNED		
Unrestricted and Undesignated	3,585,370	2,951,724
TOTAL LIABILITIES/FUND BALANCE	\$ 32,558,000	\$ 29,912,539

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended March 2020
and Year To Date as of March 2020

INCOME:	MONTH OF March 2020	YTD March 2020
Local Revenue Sources	130,687	998,432
Earned Income	963,714	7,643,993
General Revenue-Contract	1,344,115	9,957,863
TOTAL INCOME	\$ 2,438,517	\$ 18,600,289
EXPENSES:		
Salaries	1,433,111	10,704,666
Employee Benefits	334,131	2,180,271
Medication Expense	62,846	447,111
Travel-Board/Staff	27,686	242,016
Building Rent/Maintenance	22,615	187,003
Consultants/Contracts	416,149	2,574,654
Other Operating Expenses	236,442	1,450,450
TOTAL EXPENSES	\$ 2,532,980	\$ 17,786,171
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ (94,464)	\$ 814,117
CAPITAL EXPENDITURES		
Capital Outlay-FF&E, Automobiles, Building	6,192	235,777
Capital Outlay-Debt Service	93,125	652,982
TOTAL CAPITAL EXPENDITURES	\$ 99,317	\$ 888,759
GRAND TOTAL EXPENDITURES	\$ 2,632,298	\$ 18,674,930
Excess (Deficiency) of Revenues and Expenses	\$ (193,781)	\$ (74,641)
Debt Service and Fixed Asset Fund:		
Debt Service	93,125	652,982
Excess(Deficiency) of revenues over Expenses	93,125	652,982

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of March 2020

	YTD March 2020	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	998,432	1,020,416	(21,984)
Earned Income	7,643,993	8,087,784	(443,791)
General Revenue-Contract	9,957,863	9,867,697	90,166
TOTAL INCOME	\$ 18,600,289	\$ 18,975,897	\$ (375,608)
EXPENSES:			
Salaries	10,704,666	10,943,480	(238,814)
Employee Benefits	2,180,271	2,251,058	(70,787)
Medication Expense	447,111	408,755	38,356
Travel-Board/Staff	242,016	284,494	(42,478)
Building Rent/Maintenance	187,003	152,667	34,336
Consultants/Contracts	2,574,654	2,559,346	15,308
Other Operating Expenses	1,450,450	1,476,393	(25,943)
TOTAL EXPENSES	\$ 17,786,171	\$ 18,076,193	\$ (290,022)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 814,117	\$ 899,704	\$ (85,587)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	235,777	179,723	56,054
Capital Outlay-Debt Service	652,982	655,004	(2,022)
TOTAL CAPITAL EXPENDITURES	\$ 888,759	\$ 834,727	\$ 54,032
GRAND TOTAL EXPENDITURES	\$ 18,674,930	\$ 18,910,920	\$ (235,990)
Excess (Deficiency) of Revenues and Expenses	\$ (74,641)	\$ 64,977	\$ (139,618)
Debt Service and Fixed Asset Fund:			
Debt Service	652,982	655,004	(2,022)
Excess(Deficiency) of revenues over Expenses	652,982	655,004	(2,022)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended March 2020

INCOME:	MONTH OF March 2020	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	130,687	139,913	(9,226)
Earned Income	963,714	1,124,387	(160,673)
General Revenue-Contract	1,344,115	1,321,882	22,233
TOTAL INCOME	\$ 2,438,517	\$ 2,586,182	\$ (147,665)
EXPENSES:			
Salaries	1,433,111	1,440,724	(7,613)
Employee Benefits	334,131	315,784	18,347
Medication Expense	62,846	56,249	6,597
Travel-Board/Staff	27,686	40,749	(13,063)
Building Rent/Maintenance	22,615	19,237	3,378
Consultants/Contracts	416,149	408,372	7,777
Other Operating Expenses	236,442	203,405	33,037
TOTAL EXPENSES	\$ 2,532,980	\$ 2,484,520	\$ 48,460
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ (94,464)	\$ 101,662	\$ (196,126)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	6,192	4,087	2,105
Capital Outlay-Debt Service	93,125	93,572	(447)
TOTAL CAPITAL EXPENDITURES	\$ 99,317	\$ 97,659	\$ 1,658
GRAND TOTAL EXPENDITURES	\$ 2,632,298	\$ 2,582,179	\$ 50,119
Excess (Deficiency) of Revenues and Expenses	\$ (193,781)	\$ 4,003	\$ (197,784)

Debt Service and Fixed Asset Fund:			
Debt Service	93,125	93,572	(447)
Excess(Deficiency) of revenues over Expenses	93,125	93,572	(447)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With YTD March 2019 Comparative Data
Year to Date as of March 2020

INCOME:	<u>YTD March 2020</u>	<u>YTD March 2019</u>	<u>Increase (Decrease)</u>
Local Revenue Sources	998,432	817,261	181,171
Earned Income	7,643,993	7,564,520	79,473
General Revenue-Contract	9,957,863	9,540,159	417,704
TOTAL INCOME	<u>\$ 18,600,289</u>	<u>\$ 17,921,940</u>	<u>\$ 678,349</u>
EXPENSES:			
Salaries	10,704,666	10,227,860	476,806
Employee Benefits	2,180,271	1,965,428	214,843
Medication Expense	447,111	371,897	75,214
Travel-Board/Staff	242,016	264,442	(22,426)
Building Rent/Maintenance	187,003	159,310	27,693
Consultants/Contracts	2,574,654	2,417,469	157,185
Other Operating Expenses	1,450,450	1,449,610	840
TOTAL EXPENSES	<u>\$ 17,786,171</u>	<u>\$ 16,856,014</u>	<u>\$ 930,155</u>
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	<u>\$ 814,117</u>	<u>\$ 1,065,926</u>	<u>\$ (251,807)</u>
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	235,777	92,548	143,229
Capital Outlay-Debt Service	652,982	656,603	(3,621)
TOTAL CAPITAL EXPENDITURES	<u>\$ 888,759</u>	<u>\$ 749,151</u>	<u>\$ 139,608</u>
GRAND TOTAL EXPENDITURES	<u>\$ 18,674,930</u>	<u>\$ 17,605,165</u>	<u>\$ 1,069,765</u>
Excess (Deficiency) of Revenues and Expenses	<u>\$ (74,641)</u>	<u>\$ 316,775</u>	<u>\$ (391,414)</u>

Debt Service and Fixed Asset Fund:			
Debt Service	652,982	656,603	(3,621)
Excess(Deficiency) of revenues over Expenses	<u>652,982</u>	<u>656,603</u>	<u>(3,621)</u>

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With March 2019 Comparative Data
For the Month Ended March 2020

INCOME:	MONTH OF March 2020	MONTH OF March 2019	Increase (Decrease)
Local Revenue Sources	130,687	94,567	36,120
Earned Income	963,714	1,134,066	(170,352)
General Revenue-Contract	1,344,115	1,182,768	161,347
TOTAL INCOME	\$ 2,438,517	\$ 2,411,400	\$ 27,116
Salaries	1,433,111	1,414,531	18,580
Employee Benefits	334,131	235,732	98,399
Medication Expense	62,846	55,402	7,444
Travel-Board/Staff	27,686	42,985	(15,299)
Building Rent/Maintenance	22,615	12,306	10,309
Consultants/Contracts	416,149	260,109	156,040
Other Operating Expenses	236,442	225,126	11,316
TOTAL EXPENSES	\$ 2,532,980	\$ 2,246,191	\$ 286,789
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ (94,464)	\$ 165,209	\$ (259,674)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	6,192	342	5,850
Capital Outlay-Debt Service	93,125	93,589	(464)
TOTAL CAPITAL EXPENDITURES	\$ 99,317	\$ 93,931	\$ 5,386
GRAND TOTAL EXPENDITURES	\$ 2,632,298	\$ 2,340,122	\$ 292,176
Excess (Deficiency) of Revenues and Expenses	\$ (193,781)	\$ 71,278	\$ (265,060)

Debt Service and Fixed Asset Fund:			
Debt Service	93,125	93,589	(464)
Excess(Deficiency) of revenues over Expenses	93,125	93,589	(464)

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With February 2020 Comparative Data
For the Month Ended March 2020

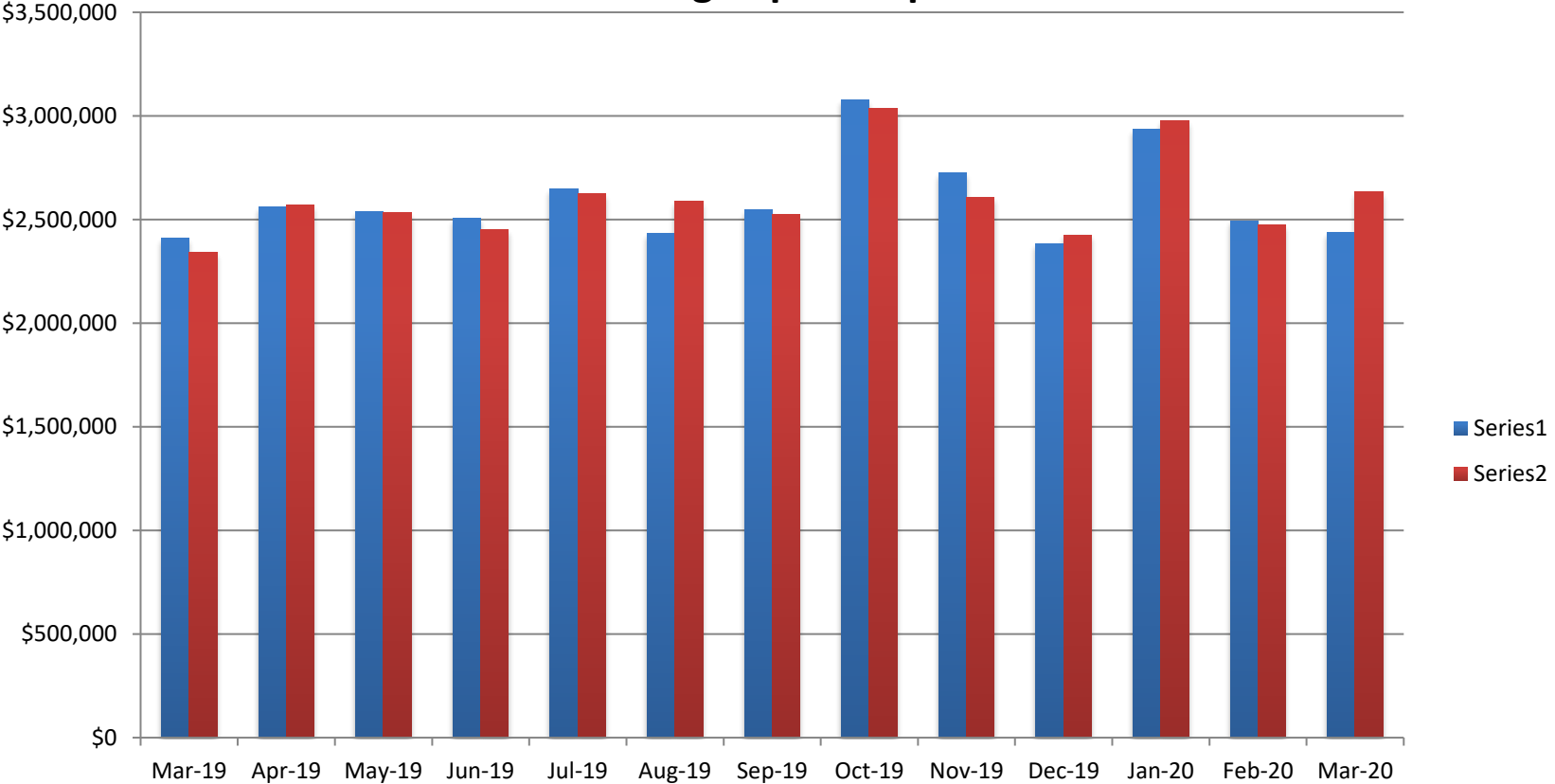
INCOME:	MONTH OF March 2020	MONTH OF February 2020	Increase (Decrease)
Local Revenue Sources	130,687	138,934	(8,247)
Earned Income	963,714	1,124,229	(160,515)
General Revenue-Contract	1,344,115	1,231,332	112,783
TOTAL INCOME	\$ 2,438,517	\$ 2,494,496	\$ (55,979)
EXPENSES:			
Salaries	1,433,111	1,463,894	(30,784)
Employee Benefits	334,131	290,633	43,498
Medication Expense	62,846	70,923	(8,077)
Travel-Board/Staff	27,686	39,450	(11,763)
Building Rent/Maintenance	22,615	23,323	(708)
Consultants/Contracts	416,149	316,293	99,857
Other Operating Expenses	236,442	174,475	61,967
TOTAL EXPENSES	\$ 2,532,980	\$ 2,378,990	\$ 153,991
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ (94,464)	\$ 115,506	\$ (209,970)
CAPITAL EXPENDITURES			
Capital Outlay-FF&E, Automobiles	6,192	902	5,290
Capital Outlay-Debt Service	93,125	93,204	(79)
TOTAL CAPITAL EXPENDITURES	\$ 99,317	\$ 94,106	\$ 5,211
GRAND TOTAL EXPENDITURES	\$ 2,632,298	\$ 2,473,096	\$ 159,202
Excess (Deficiency) of Revenues and Expenses	\$ (193,781)	\$ 21,400	\$ (215,181)

Debt Service and Fixed Asset Fund:			
Debt Service	93,125	93,204	(79)
Excess(Deficiency) of revenues over Expenses	93,125	93,204	(79)

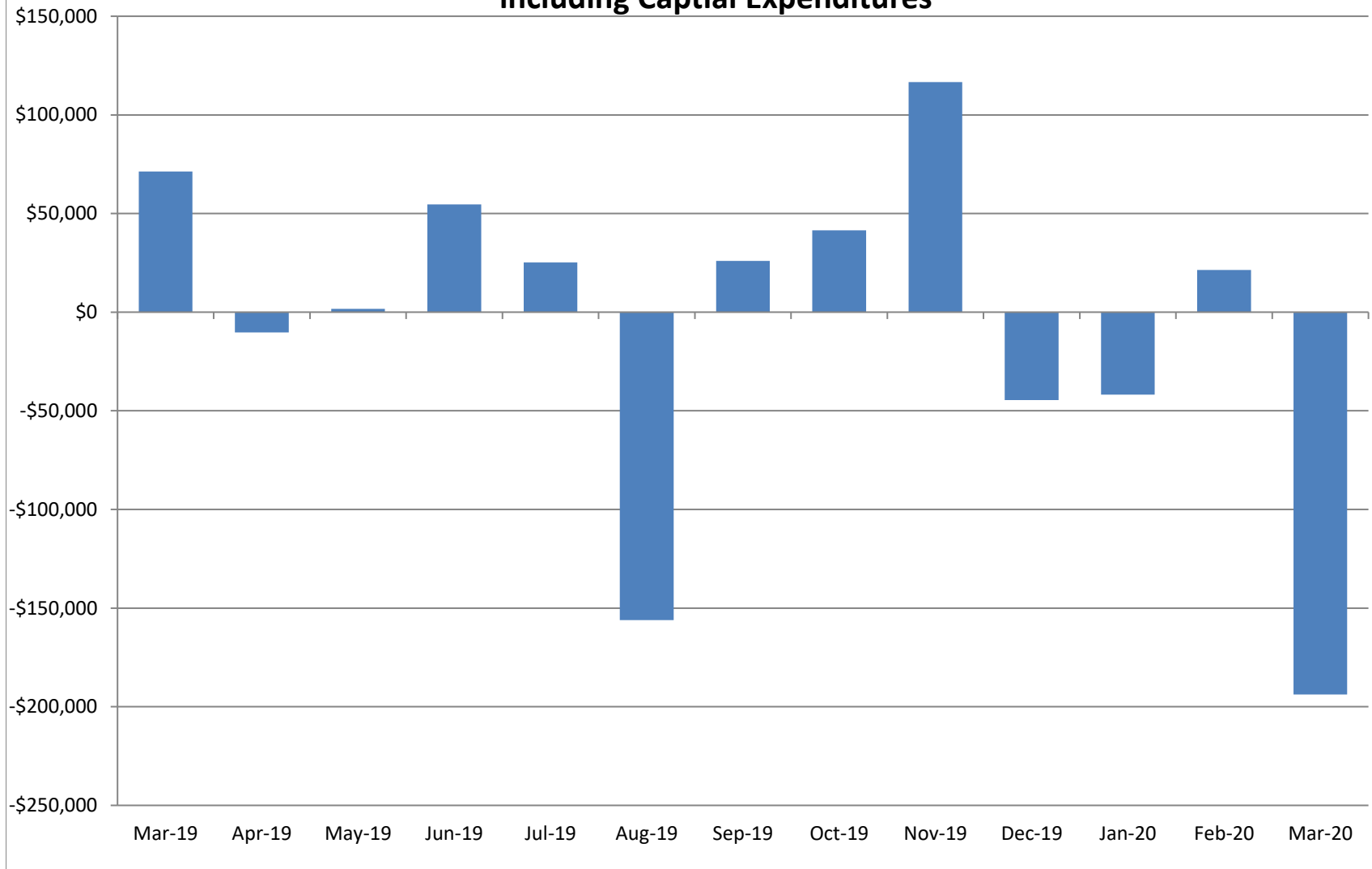
TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of March 2020

	YTD Mental Health March 2020	YTD IDD March 2020	YTD Other Services March 2020	YTD Agency Total March 2020	YTD Approved Budget March 2020	Increase (Decrease)
INCOME:						
Local Revenue Sources	678,934	189,702	129,796	998,432	1,020,416	(21,984)
Earned Income	5,197,915	1,452,359	993,719	7,643,993	8,087,784	(443,791)
General Revenue-Contract	6,771,347	1,891,994	1,294,522	9,957,863	9,867,697	90,166
TOTAL INCOME	\$ 12,648,196	\$ 3,534,055	\$ 2,418,037	\$ 18,600,288	\$ 18,975,897	\$ (375,609)
EXPENSES:						
Salaries	7,279,173	2,033,887	1,391,607	10,704,666	10,943,480	(238,814)
Employee Benefits	1,482,584	414,251	283,435	2,180,271	2,251,058	(70,787)
Medication Expense	304,035	84,951	58,124	447,111	408,755	38,356
Travel-Board/Staff	164,571	45,983	31,462	242,016	284,494	(42,478)
Building Rent/Maintenance	127,162	35,531	24,310	187,003	152,667	34,336
Consultants/Contracts	1,750,765	489,184	334,705	2,574,654	2,559,346	15,308
Other Operating Expenses	986,306	275,586	188,559	1,450,450	1,476,393	(25,943)
TOTAL EXPENSES	\$ 12,094,596	\$ 3,379,373	\$ 2,312,202	\$ 17,786,172	\$ 18,076,193	\$ (290,022)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 553,600	\$ 154,682	\$ 105,835	\$ 814,116	\$ 899,704	\$ (85,587)
CAPITAL EXPENDITURES						
Capital Outlay-FF&E, Automobiles	160,328	44,798	30,651	235,777	179,723	56,054
Capital Outlay-Debt Service	444,028	124,067	84,888	652,982	655,004	(2,022)
TOTAL CAPITAL EXPENDITURES	\$ 604,356	\$ 168,865	\$ 115,539	\$ 888,759	\$ 834,727	\$ 54,032
GRAND TOTAL EXPENDITURES	\$ 12,698,952	\$ 3,548,238	\$ 2,427,741	\$ 18,674,931	\$ 18,910,920	\$ (235,990)
Excess (Deficiency) of Revenues and Expenses	\$ (50,756)	\$ (14,183)	\$ (9,704)	\$ (74,641)	\$ 64,977	\$ (139,619)
Debt Service and Fixed Asset Fund:						
Debt Service	444,028	124,067	84,888	652,982	655,004	(210,976)
Excess(Deficiency) of revenues over Expenses	444,028	124,067	84,888	652,982	655,004	(210,976)

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



**TRI-COUNTY BEHAVIORAL HEALTHCARE
Preliminary Income after Expense
including Capital Expenditures**



Agenda Item: Approve FY 2020 Budget Revision

Board Meeting Date

April 23, 2020

Committee: Business

Background Information:

Periodically, throughout the budget year, we adjust the budget for changes to funding or other scenarios that may have changed from the initial budget process.

This budget revision reflects new programs awarded after the beginning of fiscal year. This revision also shows adjustments made to revenue and expenses based on YTD trends and projections through the end of the fiscal year.

Supporting Documentation:

Summary

FY 2020 Budget Revision

Recommended Action:

Approve FY 2020 Budget Revision

**Tri-County Behavioral Healthcare
Proposed FY 2020 Revised Budget Compared to
Current Approved FY 2020 Beginning Budget**

Explanation of line items that have material changes over \$10,000 from Proposed FY 2020 Revised Budget compared to the Current Approved FY 2020 Budget.

REVENUES:

Local Revenue – This line item reflects an overall decrease based mainly on the write off of client fees. We are also projecting a decrease in interest income and CHIP Income. This line also reflects an increase in revenue for private insurance and a transfer from reserves for vehicle purchases in January. On this line we have recognized miscellaneous income received for a rebate from the patient assistant program that was a positive.

Earned Income – This line item reflects an overall decrease. There are two revenue lines that are trending lower due to staff vacancies such as Case Management MH and Rehab services. We also have HCS, Youth Prevention, PATH, Texas Veterans Commission and SB 292 that are under revenue projections. This line also has some positive lines, TCOOMMI is trending higher for the year and a budget amendment will be requested. We have additional 1115 Waiver revenue and a new contract with HHSC for Tropical Storm Imelda in this category.

General Revenue – This line item reflects an increase in GR from an amendment received from HHSC for the Mental Health Contract. This amendment had additional funds for the adult and child and youth programs, additional contract hospital funds, and money for Education Service Center based Non-Physician Mental Health Professional.

EXPENSES:

Salaries – This line item reflects an increase based on pay adjustments to QMHP positions and also staffing changes to meet contract amendment targets with new GR funds.

Employee Benefits – This line item reflects an overall increase based on the above staffing changes and in our State of Texas Unemployment rate that is retroactive back to January 1st.

Travel – Board/Staff – This line item reflects a decrease based on the second half of the fiscal year travel restrictions, and also projected decrease in local travel due to center closure.

Medication Expense – This line item is projected higher based on current trends in medication costs.

Building Rent/Maintenance – This line item reflects an increase based on the expenses related to the Conroe building at the beginning of the fiscal year.

Consultants/Contracts – This line item is higher based on the use of a contracted prescriber from ETBHN to cover the vacancies of a staff Psychiatrists and also the Integrated Doctor.

Other Operating Expenses – This line item is lower based on year to date trends for all other operating expense categories. This includes utilities, equipment rental, and supplies.

Capital Outlay-FF&E, Automobiles – This line item reflects an increase based on the purchase of two vehicles in January and also the proposed purchase of a new vehicle for the Education Service Center position.

Capital Outlay - Debt Service Bonds – Variance under \$10,000.

**TRI-COUNTY BEHAVIORAL HEALTHCARE
PROPOSED FY 2020 REVISED BUDGET COMPARED TO
CURRENT APPROVED FY 2020 BEGINNING BUDGET**

	PROPOSED FY 2020 REVISED BUDGET	APPROVED FY 2020 BEGINNING BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	\$ 1,630,179	\$ 1,772,096	\$ (141,917)
Earned Income	\$ 13,886,212	\$ 13,909,084	\$ (22,872)
General Revenue	\$ 17,764,121	\$ 16,247,721	\$ 1,516,400
TOTAL INCOME	\$ 33,280,512	\$ 31,928,901	\$ 1,351,611
EXPENSES:			
Salaries	\$ 19,653,364	\$ 18,979,585	\$ 673,779
Employee Benefits	\$ 3,752,686	\$ 3,540,482	\$ 212,204
Travel-Board/Staff	\$ 377,512	\$ 488,979	\$ (111,467)
Medication Expense	\$ 750,253	\$ 690,000	\$ 60,253
Building Rent/Maintenance	\$ 293,042	\$ 248,852	\$ 44,190
Consultants/Contracts	\$ 4,617,031	\$ 4,199,155	\$ 417,876
Other Operating Expenses	\$ 2,399,432	\$ 2,458,824	\$ (59,392)
TOTAL EXPENSES	\$ 31,843,320	\$ 30,605,877	\$ 1,237,443
Excess (Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,437,192	\$ 1,323,024	\$ 114,168
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles	\$ 314,328	\$ 200,160	\$ 114,168
Capital Outlay - Debt Services Bonds	\$ 1,122,864	\$ 1,122,864	\$ -
TOTAL CAPITAL EXPENDITURES	\$ 1,437,192	\$ 1,323,024	\$ 114,168
GRAND TOTAL EXPENDITURES	\$ 33,280,512	\$ 31,928,901	\$ 1,351,611
Excess (Deficiency) of Revenues and Expenses	\$ -	\$ -	\$ -

Agenda Item: Consider Selection of FY 2020 Auditor

Board Meeting Date

April 23, 2020

Committee: Business

Background Information:

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

FY 1992	Pircher and Co.
FY 1988 - 1993	Kenneth Davis
FY 1999	Vetter & Taboada, P.C.
FY 2000 - 2003	David N. Miller, LLP
FY 2004 - 2006	McConnell & Jones, LLP
FY 2007 - 2010	David N. Miller, LLP
FY 2011 - 2012	Carlos Taboada & Company, P.C.
FY 2013 - 2018	Scott, Singleton, Fincher & Co, P.C.
FY 2019	Eide Bailly, LLC.

The FY 2020 HHSC Performance Contracts state that the center shall “engage the same audit firm for no more than any six (6) consecutive years from the initial date of engagement.”

This will possibly be our 2nd year with Eide Bailly, LLC., The first year is always a bit difficult when a new audit firm comes on board so this year should go smoother now that they have a general understanding of our accounting structure.

Supporting Documentation:

None

Recommended Action:

Direct Staff to Solicit an Audit Engagement Letter from Eide Bailly, LLP or Solicit Proposals for FY 2020 Independent Financial Audit Services

Agenda Item: Ratify HHSC Contract No. HHS000740900037, Rider 39 Grant Program

Board Meeting Date

April 23, 2020

Committee: Business

Background Information:

Texas Department of Criminal Justice Rider 39, Senate Bill 1, General Appropriations Act, 85th Legislative Session (2017), ("TDCJ Rider 39"), provides up to a 90-day supply of medication for inmates who, after having been committed to a state mental health facility for restoration of competency under Chapter 46B, Code of Criminal Procedure, are being returned to the committing court for trial.

The contract makes available \$500,000 in reimbursement for medication per year for all Texas counties. The funding will be available each fiscal year until it is exhausted. Previously, the cost of these medications was reimbursed via the TCOOMMI contract, but in 2017 this line item was removed from their budget.

This HHSC Contract will be in effect until August 31, 2023. This is a \$0.00 contract amendment because no funding will be received by the Center.

Funding will be requested by TCOOMMI staff from HHSC as needed. Funding requests must be accompanied by Medication Administration Records (MAR) to establish that the inmate received the medication as prescribed.

Supporting Documentation:

Contract Available for Review at the Board Meeting and via email.

Recommended Action:

Ratify HHSC Contract No. HHS000740900037, Rider 39 Grant Program

Agenda Item: Ratify FY 2020 Sun Behavioral Hospital Contract

Board Meeting Date

April 23, 2020

Committee: Business

Background Information:

Tri-County Behavioral Healthcare established a contract with Sun Behavioral Hospital in Houston for inpatient psychiatric services, primarily for children (specifically children 11 and under), when our only current contractor for this age group was on an administrative hold from the Centers for Medicare and Medicaid Services (CMS). This hospital also serves youth (12-17) and adults.

The Sun Behavioral contract for FY 2020 inpatient hospital beds was initially set up at \$900,000 because we were not sure if our other contractor would reopen. At this time, we do not expect to utilize Sun Behavioral Hospital at this level unless our local option becomes unavailable again.

This contract does not authorize additional budgeted expenditures, but allows us to shift funding to this institution if needed.

Supporting Documentation:

Contract Available for Review at the Board Meeting and via email.

Recommended Action:

Approve the FY 2020 Sun Behavioral Contract for Inpatient Psychiatric Services

Agenda Item: Ratify FY 2020 Contract for Dr. Marshall Lucas

Board Meeting Date

April 23, 2020

Committee: Business

Background Information:

Tri-County Behavioral Healthcare utilizes Dr. Marshall Lucas, a psychiatrist affiliated with Woodlands Spring Hospital, to provide inpatient psychiatric care to youth and adult populations.

Dr. Lucas' contract has been increased from a maximum allowance of \$30,000 to \$60,000 for FY 2020 physician services, and therefore meets the threshold for board approval.

Supporting Documentation:

Contract Available for Review at the Board Meeting and via email.

Recommended Action:

Ratify FY 2020 Contract for Dr. Marshall Lucas

Agenda Item: 2nd Quarter FY 2020 Quarterly Investment Report

Board Meeting Date

April 23, 2020

Committee: Business

Background Information:

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

Supporting Documentation:

Quarterly TexPool Investment Report

Quarterly Interest Report

Recommended Action:

For Information Only

QUARTERLY INVESTMENT REPORT TEXPOOL FUNDS

For the Period Ending February 29, 2020

GENERAL INFORMATION

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

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

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

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

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

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

TexPool is governed by the following specific portfolio diversification limitations;

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

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

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

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

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

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

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

STATISTICAL INFORMATION

Market Value for the Period

Portfolio Summary	December	January	February
Uninvested Balance	\$180.73	\$2,259,868.32	(\$484.87)
Accrual of Interest Income	\$25,152,615.77	\$23,040,661.60	\$30,328,474.24
Interest and Management Fees Payable	(\$30,366,104.99)	(\$34,394,627.18)	(\$35,752,812.46)
Payable for Investments Purchased	\$0.00	(\$241,187,524.99)	(\$200,000,000.00)
Accrued Expense & Taxes	(\$27,024.55)	(\$28,960.19)	(\$65,128.12)
Repurchase Agreements	\$6,491,418,000.00	\$10,171,539,000.00	\$8,849,110,000.00
Mutual Fund Investments	\$2,944,074,000.00	\$2,731,074,000.00	\$842,074,000.00
Government Securities	\$8,975,276,753.18	\$10,272,767,550.28	\$11,997,817,288.08
U.S. Treasury Inflation Protected Securities	\$1,065,228,121.10	\$1,300,930,151.05	\$1,301,119,075.32
U.S. Treasury Bills	\$2,458,392,524.90	\$1,721,138,279.81	\$3,479,342,676.24
U.S. Treasury Notes	\$1,560,227,943.12	\$1,646,284,764.43	\$1,845,545,832.30
TOTAL	\$23,489,377,009.26	\$27,593,423,163.14	\$28,109,518,920.74

Book Value for the Period

Type of Asset	Beginning Balance	Ending Balance
Uninvested Balance	(\$268,244.51)	(\$484.87)
Accrual of Interest Income	\$22,986,164.78	\$30,328,474.24
Interest and Management Fees Payable	(\$29,057,068.86)	(\$35,752,812.46)
Payable for Investments Purchased	(\$40,426,010.92)	(\$200,000,000.00)
Accrued Expenses & Taxes	(\$46,892.09)	(\$65,128.12)
Repurchase Agreements	\$8,431,616,000.00	\$8,849,110,000.00
Mutual Fund Investments	\$1,124,074,000.00	\$842,074,000.00
Government Securities	\$7,247,264,036.78	\$11,996,370,386.22
U.S. Treasury Inflation Protected Securities	\$1,030,124,005.96	\$1,300,265,564.48
U.S. Treasury Bills	\$1,617,215,729.38	\$3,477,803,849.71
U.S. Treasury Notes	\$1,527,361,499.76	\$1,842,584,720.51
TOTAL	\$20,930,843,220.28	\$28,102,718,569.71

Portfolio by Maturity as of February 29, 2020

1 to 7 days	8 to 90 day	91 to 180 days	181 + days
54.8%	37.9%	3.1%	4.2%

Portfolio by Type of Investments as of February 29, 2020

Agencies	Repurchase Agreements	Treasuries	Money Market Funds
42.4%	31.2%	23.4%	3.0%

SUMMARY INFORMATION

On a simple daily basis, the monthly average yield was 1.62% for December, 1.59% for January, and 1.59% for February.

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

The weighted average maturity of the fund as of February 29, 2020 was 30 days.

The net asset value as of February 29, 2020 was 1.00024.

The total amount of interest distributed to participants during the period was \$100,414,998.44.

TexPool interest rates exceeded 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 increased to 2,602.

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:

Sheryl Baldwin
Manager of Accounting / Investment Officer

Date

Millie McDuffey
Chief Financial Officer / Investment Officer

Date

Evan Roberson
Executive Director / Investment Officer

Date

**TRI-COUNTY BEHAVIORAL HEALTHCARE
 QUARTERLY INTEREST EARNED REPORT
 FISCAL YEAR 2020
 As Of February 29, 2020**

BANK NAME	INTEREST EARNED				
	1st QTR.	2nd QTR.	3rd QTR.	4th QTR.	YTD TOTAL
Alliance Bank - Central Texas CD	\$ 467.47	\$ 472.60			\$ 940.07
First Financial Bank CD	\$ 3,558.87	\$ 3,552.00			\$ 7,110.87
First Liberty National Bank	\$ 3.13	\$ 2.11			\$ 5.24
JP Morgan Chase (HBS)	\$ 9,428.53	\$ 7,752.69			\$ 17,181.22
Prosperity Bank (1060)	\$ 177.34	\$ 102.39			\$ 279.73
Prosperity Bank (1050)	\$ 9.94	\$ 6.55			\$ 16.49
TexPool Participants	\$ 305.18	\$ 180.60			\$ 485.78
Total Earned	\$ 13,950.45	\$ 12,068.94			\$ 26,019.39

<p>Agenda Item: Board of Trustees Unit Financial Statement as of February and March 2020</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>April 23, 2020</p>
<p>Background Information:</p> <p>None</p>	
<p>Supporting Documentation:</p> <p>February and March 2020 Board of Trustees Unit Financial Statement</p>	
<p>Recommended Action:</p> <p>For Information Only</p>	

Unit Financial Statement
FY 2020

	February 2020 Actuals	February 2020 Budgeted	Variance	YTD Actual	YTD Budget	Variance	Percent	Budget
Revenues								
Allocated Revenue	\$ 2,160.00	\$ 2,160.00	\$ -	\$ 12,965.00	\$ 12,965.00	\$ -	100.00%	\$ 25,925.00
Total Revenue	\$ 2,160.00	\$ 2,160.00	\$ -	\$ 12,965.00	\$ 12,965.00	\$ -	100.00%	\$ 25,925.00
Expenses								
Insurance-Worker Compensation	\$ 9.60	\$ 12.00	\$ (2.40)	\$ 62.67	\$ 72.00	\$ (9.33)	87.04%	\$ 150.00
Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 9,000.00	\$ 9,000.00	\$ -	100.00%	\$ 18,000.00
Supplies-Office	\$ 57.50	\$ 15.00	\$ 42.50	\$ 57.50	\$ 85.00	\$ (27.50)	0.00%	\$ 175.00
Training	\$ -	\$ 300.00	\$ (300.00)	\$ 2,375.00	\$ 1,800.00	\$ 575.00	131.94%	\$ 3,600.00
Travel - Local	\$ -	\$ 21.00	\$ (21.00)	\$ -	\$ 123.53	\$ (123.53)	0.00%	\$ 250.00
Travel - Non-local Mileage/Air	\$ -	\$ 125.00	\$ (125.00)	\$ 536.76	\$ 750.00	\$ (213.24)	71.57%	\$ 1,500.00
Travel - Non-local Hotel	\$ -	\$ 125.00	\$ (125.00)	\$ 228.58	\$ 750.00	\$ (521.42)	30.48%	\$ 1,500.00
Travel - Meals	\$ -	\$ 62.00	\$ (62.00)	\$ -	\$ 372.00	\$ (372.00)	0.00%	\$ 750.00
Total Expenses	\$ 1,567.10	\$ 2,160.00	\$ (592.90)	\$ 12,260.51	\$ 12,952.53	\$ (692.02)	94.66%	\$ 25,925.00
Total Revenue minus Expenses	\$ 592.90	\$ -	\$ 592.90	\$ 704.49	\$ 12.47	\$ 692.02	5.34%	\$ -

Unit Financial Statement
FY 2020

	March 2020 Actuals	March 2020 Budgeted	Variance	YTD Actual	YTD Budget	Variance	Percent	Budget
Revenues								
Allocated Revenue	\$ 2,160.00	\$ 2,160.00	\$ -	\$ 15,125.00	\$ 15,125.00	\$ -	100.00%	\$ 25,925.00
Total Revenue	\$ 2,160.00	\$ 2,160.00	\$ -	\$ 15,125.00	\$ 15,125.00	\$ -	100.00%	\$ 25,925.00
Expenses								
Insurance-Worker Compensation	\$ 8.80	\$ 13.00	\$ (4.20)	\$ 71.17	\$ 85.00	\$ (13.83)	83.73%	\$ 150.00
Legal Fees	\$ 1,500.00	\$ 1,500.00	\$ -	\$ 10,500.00	\$ 10,500.00	\$ -	100.00%	\$ 18,000.00
Supplies-Office	\$ 20.99	\$ 15.00	\$ 5.99	\$ 78.49	\$ 100.00	\$ (21.51)	0.00%	\$ 175.00
Training	\$ -	\$ 300.00	\$ (300.00)	\$ 2,375.00	\$ 2,100.00	\$ 275.00	113.10%	\$ 3,600.00
Travel - Local	\$ -	\$ 21.00	\$ (21.00)	\$ -	\$ 144.53	\$ (144.53)	0.00%	\$ 250.00
Travel - Non-local Mileage/Air	\$ -	\$ 125.00	\$ (125.00)	\$ 536.76	\$ 875.00	\$ (338.24)	61.34%	\$ 1,500.00
Travel - Non-local Hotel	\$ -	\$ 125.00	\$ (125.00)	\$ 228.58	\$ 875.00	\$ (646.42)	26.12%	\$ 1,500.00
Travel - Meals	\$ -	\$ 63.00	\$ (63.00)	\$ -	\$ 435.00	\$ (435.00)	0.00%	\$ 750.00
Total Expenses	\$ 1,529.79	\$ 2,162.00	\$ (632.21)	\$ 13,790.00	\$ 15,114.53	\$ (1,324.53)	91.24%	\$ 25,925.00
Total Revenue minus Expenses	\$ 630.21	\$ (2.00)	\$ 632.21	\$ 1,335.00	\$ 10.47	\$ 1,324.53	8.76%	\$ -

Agenda Item: HUD 811 Update Committee: Business	Board Meeting Date April 23, 2020
Background Information: As you are aware our HUD 811 housing projects are funded with the expectation that they remain viable for the next forty (40) years. Once this time period is met, HUD considers the program obligation met (i.e. loan paid in full). Each of the Housing Boards is appointed by the Board of Trustees and each organization is a component unit of Tri-County Behavioral Healthcare. As a Liaison to these projects, Tri-County has established a quarterly reporting mechanism to keep the Board of Trustees updated on the status of these projects.	
Supporting Documentation: Second Quarter FY 2020 HUD 811 Report	
Recommended Action: For Information Only	

2nd Quarter FY 2020 HUD 811 Report

The Cleveland Supported Housing, Inc. Board (CSHI) As you may recall, the CSHI Board held their Quarter 2 meeting on December 6, 2019 and scheduled their annual meeting for the end of March. At the time of this report, the property was at 100% capacity.

After receiving notification of upcoming HUD Real Estate Assessment Center (REAC) inspections for each of the three properties, McDougal Property management, in coordination with Tri-County staff, worked to address pending repairs on site. Property management continues to address additional issues as they arise. Following some recent issues with the windows, the property manager had a contractor out to assess the situation and the information they provided was that several of the windows were screwed in too tight upon initial installation and would need to be replaced as it is causing condensation on the windows. Additional repairs needed onsite included a water leak in the riser room of building 1 and all buildings were pressure washed and the parking lot was restriped as a part of the ongoing maintenance.

On February 13, 2020 HUD performed a REAC inspection which resulted in a score of 99 out of a possible 100. As a result, there will not be another REAC inspection for 3 years.

Following an extensive interview process, property management hired a maintenance technician with the plan of splitting his time between the three properties. Unfortunately, he resigned after only two days on the job and the search has started again.

The CSHI Board currently has three members and the Board continues to seek recommendations for additional membership as they become available. The By-Laws state that three members is the minimum and we encourage anyone with interest or referrals to contact Tanya Bryant.

The Montgomery Supported Housing, Inc. Board (MSHI) held their Quarter 2 meeting on December 3, 2019. The property is currently at 100% capacity.

Following notification of an upcoming HUD review, property management completed several maintenance items including having the parking lot restriped, replacement of two exhaust fans, replacement of some blinds, repair of some light ballasts and touch up paint.

On February 13, 2020, HUD Real Estate Assessment Center (REAC) conducted an inspection of the property which resulted in a score of 98 out of a possible 100. There will not be another REAC inspection for three years because of this high score.

Following a review by HUD last year related to a budget-based rent increase, the Property Management Agent was notified that they are no longer allowed to budget for community activities. Previously, McDougal would budget approximately \$2700 for community

activities aimed at improving quality of life for the residents through socialization and development of positive activities that assisted the residents so they can cope with their mental illness. Staff have been exploring other assistance options which may be available, but no community funding has been secured at this time.

The MSHI Board currently has four members and the Board continues to seek recommendations for additional membership as they become available.

The Independence Communities, Inc. Board (ICI) held their Quarter 2 meeting on December 3, 2019 and scheduled their annual meeting for late March where they will renew Directors and Officers Insurance. There was one move out at the end of Quarter 2 however, by the time of this report, the property was back at 100% capacity.

Following notification from HUD that they will be conducting a Real Estate Assessment Center (REAC) Inspection sometime in the next few months, property management has begun making final preparations for the review. Earlier in Quarter 2, the irrigation system was repaired which was the most costly item in several months. This was due to a shortage in the electrical lines that prevented the water sprinklers from working on one half of the property. In addition, there are several windows that need repair as a result of the seal breaking between the double panes which has caused some of them to 'fog'. Other items needing minor repair are forthcoming.

The ICI Board currently has five members.

UPCOMING MEETINGS

May 28, 2020 – Board Meeting

- Approve Minutes from April 23, 2020 Board Meeting
- Community Resources Report
- Consumer Services Report for April 2020
- Program Updates
- Medicaid 1115 Transformation Waiver Project Status Report
- Program Presentation – Longevity Recognitions, ISC Group 401(a), Board & MT Training
- Personnel Report for April 2020
- Texas Council Risk Management Fund Claims Summary as of April 2020
- Approve Financial Statements for April 2020
- Approve FY 2020 Auditor Engagement Letter
- Board of Trustees Unit Financial Statement as of April 2020

June 2020 – No Board Meeting

July 23, 2020 – Board Meeting

- Approve Minutes from May 28, 2020 Board Meeting
- Program Presentations – Longevity Recognitions & Essay Contest Winners
- Community Resources Report
- Consumer Services Report for May and June 2020
- Program Updates
- FY 2020 Goals & Objectives Progress Report Year to Date
- 3rd Quarter FY 2020 Corporate Compliance & Quality Management Report
- 4th Quarter FY 2020 Corporate Compliance Training
- Medicaid 1115 Transformation Waiver Project Status Report
- Appoint Nominating Committee for FY 2021 Board Officers
- Appoint Executive Director Evaluation Committee
- Personnel Report for May and June 2020
- Texas Council Risk Management Fund Claims Summary for May and June 2020
- Approve Financial Statements for May and June 2020
- Approve Recommendation for Tri-County Employee Health Insurance & Ancillary Plans
- Approve Participation in TCRMF Minimum Contribution Plan for Worker’s Compensation Coverage
- Review Tri-County’s FY 2018 990 Tax Return Prepared by Scott, Singleton, Fincher & Co., P.C.
- 3rd Quarter FY 2020 Investment Report
- Board of Trustees Unit Financial Statement as of May and June 2020
- Tri-County Consumer Foundation Board Update
- HUD 811 – Cleveland, Montgomery & Huntsville Updates

Tri-County Behavioral Healthcare Acronyms

Acronym	Name
1115	Medicaid 1115 Transformation Waiver
AAIDD	American Association on Intellectual and Developmental Disabilities
AAS	American Association of Suicidology
ABA	Applied Behavioral Analysis
ACT	Assertive Community Treatment
ADA	Americans with Disabilities Act
ADD	Attention Deficit Disorder
ADHD	Attention Deficit Hyperactivity Disorder
ADL	Activities of Daily Living
ADRC	Aging and Disability Resource Center
AMH	Adult Mental Health
ANSA	Adult Needs and Strengths Assessment
AOP	Adult Outpatient
APM	Alternative Payment Model
APRN	Advanced Practice Registered Nurse
APS	Adult Protective Services
ARDS	Assignment Registration and Dismissal Services
ASH	Austin State Hospital
BAD	Bipolar Affective Disorder
BCBA	Board Certified Behavior Analyst
BJA	Bureau of Justice Administration
BMI	Body Mass Index
BPD	Borderline Personality Disorder
C&Y	Child & Youth Services
CAM	Cost Accounting Methodology
CANS	Child and Adolescent Needs and Strengths Assessment
CARE	Client Assignment Registration & Enrollment
CBT	Computer Based Training & Cognitive Based Therapy
CC	Corporate Compliance
CCBHC	Certified Community Behavioral Health Clinic
CCP	Crisis Counseling Program
CDBG	Community Development Block Grant
CFC	Community First Choice
CFRT	Child Fidelity Review Team
CHIP	Children's Health Insurance Program
CIRT	Crisis Intervention Response Team
CISM	Critical Incident Stress Management
CMH	Child Mental Health
COC	Continuity of Care
COPSD	Co-Occurring Psychiatric and Substance Abuse Disorders
CPS	Child Protective Services
CPT	Cognitive Processing Therapy
CRCG	Community Resource Coordination Group
CSHI	Cleveland Supported Housing, Inc.
DADS	Department of Aging and Disability Services
DARS	Department of Assistive & Rehabilitation Services
DEA	Drug Enforcement Agency
DFPS	Department of Family and Protective Services
DO	Doctor of Osteopathic Medicine
DOB	Date of Birth
DRC	Disaster Recovery Center
DRPS	Department of Protective and Regulatory Services
DSHS	Department of State Health Services
DSM	Diagnostic and Statistical Manual of Mental Disorders
DSRIP	Delivery System Reform Incentive Payments

DUA	Data Use Agreement
Dx	Diagnosis
EBP	Evidence Based Practice
ECI	Early Childhood Intervention
EHR	Electronic Health Record
EOU	Extended Observation Unit
ETBHN	East Texas Behavioral Healthcare Network
EVV	Electronic Visit Verification
FDA	Federal Drug Enforcement Agency
FEMA	Federal Emergency Management Assistance
FEP	First Episode Psychosis
FLSA	Fair Labor Standards Act
FMLA	Family Medical Leave Act
FTH	From the Heart
FY	Fiscal Year
HCBS-AMH	Home and Community Based Services - Adult Mental Health
HCS	Home and Community-based Services
HHSC	Health & Human Services Commission
HIPAA	Health Insurance Portability & Accountability Act
HR	Human Resources
HUD	Housing and Urban Development
ICAP	Inventory for Client and Agency Planning
ICF-IID	Intermediate Care Facility - for Individuals w/Intellectual Disabilities
ICI	Independence Communities, Inc.
ICM	Intensive Case Management
IDD	Intellectual and Developmental Disabilities
IDD PNAC	Intellectual and Developmental Disabilities Planning Network Advisory Committee
IHP	Individual Habilitation Plan
IMR	Illness Management and Recovery
IPE	Initial Psychiatric Evaluation
IPP	Individual Program Plan
ITP	Individual Transition Planning (schools)
JDC	Juvenile Detention Center
JUM	Junior Utilization Management Committee
LAR	Legally Authorized Representative
LBHA	Local Behavioral Health Authority
LCDC	Licensed Chemical Dependency Counselor
LCSW	Licensed Clinical Social Worker
LIDDA	Local Intellectual & Developmental Disabilities Authority
LMC	Leadership Montgomery County
LMHA	Local Mental Health Authority
LMSW	Licensed Master Social Worker
LMFT	Licensed Marriage and Family Therapist
LOC	Level of Care (MH)
LOC-TAY	Level of Care - Transition Age Youth
LON	Level Of Need (IDD)
LOSS	Local Outreach for Suicide Survivors
LPHA	Licensed Practitioner of the Healing Arts
LPC	Licensed Professional Counselor
LPC-S	Licensed Professional Counselor-Supervisor
LPND	Local Planning and Network Development
LSFHC	Lone Star Family Health Center
LTD	Long Term Disability
LVN	Licensed Vocational Nurse
MAC	Medicaid Administrative Claiming
MCHC	Montgomery County Homeless Coalition
MCHD	Montgomery County Hospital District
MCO	Managed Care Organizations

MCOT	Mobile Crisis Outreach Team
MD	Medical Director/Doctor
MDCD	Medicaid
MDD	Major Depressive Disorder
MHFA	Mental Health First Aid
MIS	Management Information Services
MOU	Memorandum of Understanding
MSHI	Montgomery Supported Housing, Inc.
MTP	Master Treatment Plan
MVPN	Military Veteran Peer Network
NAMI	National Alliance for the Mentally Ill
NASW	National Association of Social Workers
NEO	New Employee Orientation
NGM	New Generation Medication
NGRI	Not Guilty by Reason of Insanity
NP	Nurse Practitioner
OCR	Outpatient Competency Restoration
OIG	Office of the Inspector General
OSAR	Outreach, Screening, Assessment and Referral (Substance Use Disorders)
PA	Physician's Assistant
PAP	Patient Assistance Program
PASRR	Pre-Admission Screening and Resident Review
PATH	Projects for Assistance in Transition from Homelessness (PATH)
PCIT	Parent Child Interaction Therapy
PCP	Primary Care Physician
PCRP	Person Centered Recovery Plan
PDP	Person Directed Plan
PETC	Psychiatric Emergency Treatment Center
PFA	Psychological First Aid
PHI	Protected Health Information
PNAC	Planning Network Advisory Committee
PRS	Psychosocial Rehab Specialist
QIDP	Qualified Intellectual Disabilities Professional
QM	Quality Management
QMHP	Qualified Mental Health Professional
RAC	Routine Assessment and Counseling
RCF	Residential Care Facility
RCM	Routine Case Management
RFP	Request for Proposal
RN	Registered Nurse
ROC	Regional Oversight Committee - ETBHN Board
RPNAC	Regional Planning & Network Advisory Committee
RSH	Rusk State Hospital
RTC	Residential Treatment Center
SAMA	Satori Alternatives to Managing Aggression
SAMHSA	Substance Abuse and Mental Health Services Administration
SASH	San Antonio State Hospital
SCZ	Schizophrenia
SH	Supported Housing
SHAC	School Health Advisory Committee
SOAR	SSI Outreach, Access and Recovery
SSA	Social Security Administration
SSDI	Social Security Disability Income
SSI	Supplemental Security Income
SSLC	State Supported Living Center
STAR	Services to At Risk Youth
SUD	Substance Use Disorder
SUMP	Substance Use and Misuse Prevention

SZA	Schizoaffective Disorder
TAC	Texas Administrative Code
TANF	Temporary Assistance for Needy Families
TAY	Transition Aged Youth
TCBHC	Tri-County Behavioral Healthcare
TF-CBT	Trauma Focused CBT - Cognitive Behavioral Therapy
TCCF	Tri-County Consumer Foundation
TCO	Treatment Co-Occurring Mental Health and Substance Abuse Services
TCOOMMI	Texas Correction Office on Offenders with Medical & Mental Impairments
TCRMF	Texas Council Risk Management Fund
TDCJ	Texas Department of Criminal Justice
TEA	Texas Education Agency
TIC/TOC	Trauma Informed Care-Time for Organizational Change
TP	Treatment Plan
TRA	Treatment Adult Services (Substance Abuse)
TRR	Texas Resilience and Recovery
TxHmL	Texas Home Living
TRY	Treatment Youth Services (Substance Abuse)
TVC	Texas Veterans Commission
TWC	Texas Workforce Commission
UM	Utilization Management
UW	United Way of Greater Houston
WCHD	Walker County Hospital District
YES	Youth Empowerment Services
YMHFA	Youth Mental Health First Aid
YPS	Youth Prevention Services
YPU	Youth Prevention Universal

Updated 10/18/19