

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

March 23, 2023



Notice is hereby given that a regular meeting of the Board of Trustees of Tri-County Behavioral Healthcare will be held on Thursday, March 23, 2023. The Business Committee will convene at 9:30 a.m., the Program Committee will convene at 9:30 a.m. and the Board meeting will convene at 10:00 a.m. at 233 Sgt. Ed Holcomb Blvd. S., Conroe, Texas. The public is invited to attend and offer comments to the Board of Trustees between 10:00 a.m. and 10:05 a.m. 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 23, 2023**

- III. **Program Presentation - Longevity Recognitions**

- IV. **Program Presentation - Annual Board and Management Team Training**

- V. **Executive Director’s Report - Evan Roberson**
 - A. Comprehensive Mental Health Quality Management Audit
 - B. Legislative Updates

- VI. **Chief Financial Officer’s Report - Millie McDuffey**
 - A. FY 2022 Cost Accounting Methodology (CAM)
 - B. FY 2022 HCS and MEI Cost Reports
 - C. Days of Operation Ratio

- VII. **Program Committee**
Information Items
 - A. Community Resources Report..... 8-11
 - B. Consumer Services Report for February 2023..... 12-14
 - C. Program Updates..... 15-20
 - D. FY 2023 Goals and Objectives Progress Report 21-26
 - E. 2nd Quarter FY 2023 Corporate Compliance and Quality Management Report..... 27-29
 - F. 3rd Quarter FY 2023 Corporate Compliance Training..... 30-31

- VIII. **Executive Committee**
Information Items
 - A. Personnel Report for February 2023..... 32-34
 - B. Texas Council Risk Management Fund Claims Summary as of February 2023..... 35-36

IX. Business Committee

Action Items

A. Approve February 2023 Financial Statements.....	37-49
B. Approve Request to Solicit FY 2023 Auditor.....	50
C. Approve HHSC Contract No. HHS000994900001, Amend No. 4 Intellectual and Developmental Disability Authority Services.....	51
D. Approve HHSC Youth Empowerment Services (YES) Wavier Contract No. HHS001291000036.....	52
E. Approve FY 2023 Sun Behavioral Contract Addendum.....	53
F. Approve FY 2023 Lifetime Homecare Services Contract Amendment.....	54
G. Appoint New Director for the Montgomery Supported Housing, Inc. (MSHI) Board.....	55

Information Items

H. Cleveland Building Update.....	56
I. 2 nd Quarter FY 2023 Investment Report.....	57-61
J. Board of Trustees Unit Financial Statement for February 2023.....	62-63

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

Posted By:

Ava Green
Executive Assistant

Tri-County Behavioral Healthcare

P.O. Box 3067
Conroe, TX 77305

BOARD OF TRUSTEES MEETING

February 23, 2023

Board Members Present:

Patti Atkins
Jacob Paschal
Gail Page
Morris Johnson
Sharon Walker
Richard Duren
Tracy Sorensen
Carl Williamson

Board Members Absent:

Tim Cannon

Tri-County Staff Present:

Evan Roberson, Executive Director
Millie McDuffey, Chief Financial Officer
Sara Bradfield, Chief Operating Officer
Kenneth Barfield, Director of Information Management Systems
Melissa Zemencsik, Director of Child and Youth Behavioral Health
Tanya Bryant, Director of Quality Management and Support
Kathy Foster, Director of IDD Provider Services
Catherine Prestigiovanni, Director of Strategic Development
Stephanie Ward, Director of Adult Behavioral Health
Yolanda Gude, Director of IDD Authority Services
Beth Dalman, Program Director Crisis Services
Darius Tuminas, Controller
Tabatha Abbott, Cost Accountant
Ashley Bare, HR Manager
Ava Green, Executive Assistant

Legal Counsel Present: None present

Sheriff Representatives Present: None present

Guests: Scott Hayes, James Morris & Mannix Smith with ISC Group Advisors

Call to Order: Board Chair, Patti Atkins, called the meeting to order at 10:05 a.m.

Public Comment: There was no public comment.

Quorum: There being eight (8) Board Members present, a quorum was established.

Resolution #02-23-01

Motion Made By: Tracy Sorensen

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

Resolved:

That the Board approve the absence of Tim Cannon.

Resolution #02-23-02

Motion Made By: Gail Page

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

Resolved:

That the Board approve the minutes of the January 26, 2023 meeting of the Board of Trustees.

Program Presentation: 401(a) Retirement Plan Account Review presented by Scott Hayes, James Morris and Mannix Smith, from ISC Group Advisors.

EXECUTIVE COMMITTEE:

Oath of Office for Carl Williamson was recited for information purposes only.

Executive Director's Report:

The Executive Director's report is on file.

- IDD Audits
- Cleveland Updates
- Legislative Updates

Chief Financial Officer's Report:

The Chief Financial Officer's report is on file.

- Cost Accounting Methodology (CAM)
- Directed Payment Program Update
- Charity Care Pool Update
- Final Workers' Compensation Update for FY 2022
- CFO Consortium Update

PROGRAM COMMITTEE:

The Community Resources Report was reviewed for information purposes only.

The Consumer Services Report for January 2023 was reviewed for information purposes only.

The Program Updates Report was reviewed for information purposes only.

EXECUTIVE COMMITTEE:

The Personnel Report for January 2023 was reviewed for information purposes only.

The Texas Council Risk Management Fund Claims Summary as of January 2023 was reviewed for information purposes only.

BUSINESS COMMITTEE:

Resolution #02-23-03

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Gail Page, Jacob Paschal, Tracy Sorensen, Sharon Walker and Carl Williamson that it be...

Resolved:

That the Board approve the January 2023 Financial Statements.

Resolution #02-23-04

Motion Made By: Morris Johnson

Seconded By: Tracy Sorensen, with affirmative votes by Sharon Walker, Jacob Paschal, Richard Duren, Gail Page and Carl Williamson that it be...

Resolved:

That the Board approve the FY 2023 Budget Revision.

Resolution #02-23-05

Motion Made By: Richard Duren

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

Resolved:

That the Board approve the Executive Director, Evan Roberson and Chief Financial Officer, Millie McDuffey to be designated signers for a bank account at First Financial Bank in Conroe.

Morris Johnson abstained from voting on this agenda item.

Resolution #02-23-06

Motion Made By: Morris Johnson

Seconded By: Richard Duren, with affirmative votes by Sharon Walker, Tracy Sorensen, Gail Page, Carl Williamson and Jacob Paschal that it be...

Resolved:

That the Board ratify HHSC Treatment Services Youth (TRY) Substance Use Disorder Services Contract No. HHS000663700100, Amendment No. 2.

The Board of Trustees Unit Financial Statement for January 2023 was reviewed for information purposes only.

The regular meeting of the Board of Trustees adjourned at 11:07 a.m.

Adjournment:

Attest:

Patti Atkins
Chair

Date

Jacob Paschal
Secretary

Date

Agenda Item: Community Resources Report

Board Meeting Date:

March 23, 2023

Committee: Program

Background Information:

None

Supporting Documentation:

Community Resources Report

Recommended Action:

For Information Only

Community Resources Report

February 24, 2023 – March 23, 2023

Volunteer Hours:

Location	February
Conroe	107.75
Cleveland	0
Liberty	30
Huntsville	20
Total	157.75

COMMUNITY ACTIVITIES:

2/24/23	Walker County Juvenile Services Staffing	Huntsville
2/25/23	Conroe ISD YOUiversity	Shenandoah
2/25/23	Veterans Nature Event at Kelly's Pond	Huntsville
2/28/23	Walker County Community Resource Collaboration Group	Huntsville
2/28/23	Liberty County Mental Health Issues Workgroup	Liberty
3/1/23	Conroe Noon Lions Club Luncheon	Conroe
3/1/23	Montgomery County Office of Homeland Security and Emergency Management Integrated Preparedness Planning Workshop	Conroe
3/2/23	Transition and Resource Fair	Spring
3/2/23	New Waverly ISD Student Health Advisory Committee	New Waverly
3/2/23	Suicide Prevention - ASK+ Training	Conroe
3/3/23	Hope Rising - Out of the Belly of The Whale Conference	The Woodlands
3/3/23	Adult Mental Health First Aid	Tomball
3/3/23	Military Child Appreciation Event Planning Meeting	The Woodlands
3/4/23	Woman Veteran Whole Health Summit	Huntsville
3/6/23	Montgomery County Community Development Public Stakeholder Meeting	Splendora
3/7/23	Montgomery County Community Development Public Stakeholder Meeting	Conroe
3/7/23	Veterans of Foreign Wars Monthly Meeting	Liberty
3/7/23	Rotary Club Meeting	Conroe
3/7, 3/14 & 3/21/23	Third Annual HHS Office of Disability Prevention for Children Statewide Virtual Conference	Conroe
3/8/23	Montgomery County Community Development Public Stakeholder Meeting	Magnolia
3/8/23	Conroe Noon Lions Club Luncheon	Conroe
3/8/23	Lone Star College Safety Fair	Conroe
3/9/23	Math and Science Night at Ben Milam Elementary	Conroe

3/9/23	Montgomery County Community Development Public Stakeholder Meeting	The Woodlands
3/9/23	Behavioral Health Suicide Prevention Task Force - Major Mental Health Workgroup	Conroe
3/9/23	Henry's Home - Veteran Mental Health Collaboration Efforts	Conroe
3/13/23	Conroe's Coalition for the Homeless Meeting	Conroe
3/14/23	Magnolia Chamber of Commerce Networking Event	Magnolia
3/14/23	American Legion Monthly Meeting	Conroe
3/15/23	Behavioral Health Suicide Prevention Task Force Meeting – Neurodiversity/Special Needs Work Group - Virtual	Conroe
3/15/23	Texas Children's Virtual Panel Presentation on the LIDDA Community Based Services	The Woodlands
3/15/23	Conroe Noon Lions Club Luncheon	Conroe
3/16/23	Behavioral Health Suicide Prevention Task Force Meeting	Conroe
3/20/23	Homeless Outreach Workgroup - The Way Home	Houston
3/21/23	Montgomery County Community Resource Collaboration Group	Conroe
3/22/23	Conroe Noon Lion Club Luncheon	Conroe
3/22/23	Child Fatality Review Team	Conroe
3/23/23	Family and Academic Night at Creighton Elementary	Conroe

UPCOMING ACTIVITIES:

3/24/23	Leadership Education in Neurodevelopment & Related Disabilities (LEND) Seminar - Demystifying State Agencies - Dr. Maria Quintero-Conk Annual Lecture	Conroe
3/24/23	Fatherhood Advisory Committee - Motivation, Education and Training	Cleveland
3/24/23	Veteran Couples Workshop	Conroe
3/27-3/30/23	Military Veteran Peer Network and Texas Veterans Commission Annual Conference	Dallas
3/28/23	Dispute Resolution Bookmark Judging	Conroe
3/28/23	Civil Service Commissioners Meeting	Conroe
3/28/23	Walker County Community Resource Collaboration Group	Huntsville
3/29/23	Conroe Noon Lions Club Luncheon	Conroe
3/29/23	Montgomery County Community Crisis Collaborative Team Meeting	Conroe
3/30/23	Magnolia ISD Resource Fair	Magnolia
3/30/23	Conroe Hispanic Chambers of Commerce Networking Event	Conroe
3/30/23	HHSC Employment First Training - IDD	Conroe
3/31/23	Walker County Juvenile Services Staffing	Huntsville
4/13/23	Behavioral Health Suicide Prevention Task Force - Major Mental Health Workgroup	Conroe
4/18/23	Huntsville ISD Student Health Advisory Committee	Huntsville

4/18/23	Montgomery County Community Resource Collaboration Group	Conroe
4/19/23	Behavioral Health Suicide Prevention Task Force Meeting - Neurodiversity/Special Needs Work Group - Virtual	Conroe
4/20/23	Behavioral Health Suicide Prevention Task Force Meeting	Conroe
4/20-4/22/23	Texas Crisis Intervention Team Conference	Sugar Land
4/26/23	Montgomery County Community Crisis Collaborative Team Meeting	Conroe
4/28/23	Creighton Elementary School Carnival Night	Conroe
4/28/23	Walker County Juvenile Services Staffing	Huntsville
4/29/23	KidzFest Booth	Conroe

Agenda Item: Consumer Services Report for February 2023

Board Meeting Date:

March 23, 2023

Committee: Program

Background Information:

None

Supporting Documentation:

Consumer Services Report for February 2023

Recommended Action:

For Information Only

CONSUMER SERVICES REPORT
February 2023

Crisis Services, MH Adults/Children	MONTGOMERY COUNTY	PORTER	CLEVELAND	LIBERTY	WALKER COUNTY	TOTAL
Persons Screened, Intakes, Other Crisis Services	619	29	58	36	80	822
Transitional Services (LOC 5)	0	0	0	0	0	0
Psychiatric Emergency Treatment Center (PETC) Served	0	0	0	0	0	0
Psychiatric Emergency Treatment Center (PETC) bed days	0	0	0	0	0	0
Adult Contract Hospital Admissions	53	0	5	3	5	66
Child and Youth Contract Hospital Admissions	2	0	0	0	1	3
Total State Hospital Admissions (Civil only)	0	0	0	0	0	0
Routine Services, MH Adults/Children						
Adult Levels of Care (LOC 1-4, FEP)	1185	0	151	124	128	1588
Adult Medication Services	960	0	121	92	126	1299
Child Levels of Care (LOC 1-4, YC, YES, TAY, RTC, FEP)	439	294	70	28	84	915
Child Medication Services	219	106	24	8	20	377
TCOOMMI (Adult Only)	100	0	14	13	12	139
Adult Jail Diversions	1	0	0	0	0	1
Persons Served by Program, IDD						
Number of New Enrollments for IDD Services	5	0	1	1	0	7
Service Coordination	554	0	17	40	45	656
Persons Enrolled in Programs, IDD						
Center Waiver Services (HCS, Supervised Living)	24	0	4	13	16	57
Substance Use Services						
Children and Youth Prevention Services	12	430	0	0	15	457
Youth Substance Use Disorder Treatment Services/COPSD	20	0	0	0	0	20
Adult Substance Use Disorder Treatment Services/COPSD	39	0	1	0	6	46

Waiting/Interest Lists as of Month End						
Home and Community Based Services Interest List	1722	0	155	132	199	2208
SAMHSA Grant Served by County						
SAMHSA CCBHC Served	106	21	49	5	18	199
SAMHSA CMHC Served	395	0	9	19	13	436
February Served by Service Area						
Adult Mental Health Services	1610	0	177	134	231	2152
Child Mental Health Services	652	357	73	39	101	1222
Intellectual and Developmental Disabilities Services	658	0	33	59	61	811
Total Served by Service Area	2920	357	283	232	393	4185
January Served by Service Area						
Adult Mental Health Services	1627	0	168	121	244	2160
Child Mental Health Services	628	315	92	36	94	1165
Intellectual and Developmental Disabilities Services	658	0	32	55	66	811
Total Served by Service Area	2913	315	292	212	404	4136

Agenda Item: Program Updates

Board Meeting Date:

March 23, 2023

Committee: Program

Background Information:

None

Supporting Documentation:

Program Updates

Recommended Action:

For Information Only

Program Updates

February 24, 2023 – March 23, 2023

Crisis Services

1. We have filled two of the Crisis Intervention Team (CIT) positions with internal staff from Crisis Services. We still have one CIT position open with the Sheriff's Department, for which we are actively recruiting and interviewing potential candidates. We also have a MCOT/night staff and a Crisis Coordinator vacant after staff transfer to their new CIT positions.
2. Both the Montgomery County Sheriff's Office and the Precinct 1 Constable's Office sent out media releases regarding the start of their CIT teams that include Tri-County staff in partnership with their law enforcement agencies.
3. On March 3rd, we joined with the Montgomery County Adult Probation office, Precinct 1 Constable's office, and Conroe PD CIRT for presentations at the Hope Rising Conference in The Woodlands. Our topic was based on the GAP Analysis Goal #1 of "*Improved Communication between Law Enforcement and Behavioral Health Providers.*" This collaboration was initiated through the Behavioral Health & Suicide Prevention Task Force.
4. In February, we provided a total of 377 crisis assessments; 39% of these were for involuntary clients and 28.9% were for youth. Of the total number of crisis assessments, 42.4% were with individuals who were new to the Tri-County system during the month of February.
5. In the month of February, 81 individuals were provided with Tri-County funded hospital admissions; 66.7% were for Montgomery County residents, 7.4% of these were for residents of Walker County, and 9.8% were residents of Liberty County. However, 16.1% were for individuals who live in five other counties that are outside of the Tri-County service area.

MH Adult Services

1. We are continuing to search for a candidate to fill our last outpatient psychiatry role. This position has been covered by our Medical Director and CSU physician, but they will be returning to their primary roles in crisis services soon. We do have a lead on a candidate and hope to make an offer soon.
2. The PATH homeless outreach team is now providing mental health groups for those at the Women's Shelter, Conroe House of Prayer, and the Salvation Army. These groups are psychoeducational in nature, and teach individuals basic mental health skills such as Self Care, Communication, and Healthy Boundaries.
3. Two clients are preparing to graduate from the FEP program successfully. Both have stabilized following their first episodes of psychosis, and one has stable employment. Both individuals will transfer into our basic Level of Care 1 for ongoing support and continued recovery.
4. Adult Behavioral Health managers toured the new Miracle City which provides supports to homeless individuals in the Conroe area. Our PATH team currently provides groups in this space and collaborates with other local resources to assist the homeless population and connect them to mental health and substance use services.

5. The ACT (Assertive Community Treatment) Team graduated an individual successfully to Level of Care 3. This individual came to the ACT team with recent trauma, experiencing homelessness, and acute medical needs. The ACT team was able to link her to Medicaid, get her needed surgery completed, and connected to housing supports.

MH Child and Youth Services

1. We are partnering with UT Health Houston for the Community Psychiatry Workforce Expansion (CPWE) project. The purpose of this initiative is to expand mental healthcare by developing training opportunities for residents at community mental health facilities. We are planning for the first residents to start rotations in the fall. They will be seeing children and youth and supervised by Dr. Oyelakin, a professor from UT Health Houston McGovern Medical School.
2. We are also coordinating with the Baylor College of Medicine to accept referrals from their TCHATT program. Texas Child Health Access Through Telemedicine (TCHATT) is a state-funded program for free, short-term behavioral health services to children in Texas public schools through televideo. Many ISDs in our area have already formed relationships with TCHATT. After a student completes TCHATT services, they are referred to another provider. We received our first referral from TCHATT last week and the student was quickly assessed and admitted for C&Y services.
3. C&Y supervisors are diligently recruiting. They have been so successful that we have run out of cubicles for new C&Y MH Specialists on the second floor. We are working to problem solve space issues in C&Y Conroe.
4. Our caseload in our Conroe school-based clinics has reached full capacity. We are planning to serve any additional clients from these schools with our field-based teams.

Criminal Justice Services

1. TCOOMMI Program has seen an increase in referrals over the last two months for adults currently on probation/parole needing mental health supports and services.
2. The Outpatient Competency Restoration program is working with the District Attorney, Defense Attorney, and Court to get an individual with mild IDD into the program.

Substance Use Disorder Services

1. Our Substance Use programs are busy at this time with a high census overall. There are currently 37 adult clients in our intensive outpatient programming. Twelve of those adults have co-occurring Mental Health services. We have 20 youth participating in outpatient programming and continue to see walk-ins regularly. In Huntsville, we have 11 individuals participating in COPSD services.
2. The Youth SUD Counselor completed training in Cannabis Youth Treatment, an evidence-based practice for intensive outpatient treatment.
3. Our Prevention Team has been very busy attending school and community health fairs in the evenings and weekends. These events are giving us opportunities to disseminate prevention information to parents.
4. Due to significant staff shortages early in the year, we have fallen behind in our contracted measures for Prevention, so the team is planning to increase programming

during summer to catch up. This is challenging as many children are not consistently accessible for services during the summer.

5. We are excited about new relationships our Prevention Team have formed with schools that have not previously had prevention services. One example is that our team is now serving schools on the west side of Magnolia for the first time in years.

IDD Services

1. The HCS Provider Audit is finalized and we ended up with zero citations as initially reported.
2. IDD Provider Services obtained licenses the week of February 20th for each of our rural clinic sites. We learned other agencies were still working through the license process on March 1st.
 - a. Tri-County Behavioral Healthcare Cleveland ISS – 3 year license
 - b. Tri-County Behavioral Healthcare Huntsville ISS – 2 year license
 - c. Tri-County Behavioral Healthcare Liberty ISS – 2 year license

We received temporary licenses that are only valid for 180 days. We may receive a visit at any time to complete the inspection and validate our license.

3. The Individualized Skills and Socialization method of reimbursement and rule changes required us to develop ten contracts with local IDD providers.
4. Staff shortage is a significant issue within the Montgomery County area. The \$12.60 per hour we pay is not competitive with the \$15.00 or more they can make elsewhere. Applicants we are searching for need to be willing to work in the nursing homes, provide transportation and community support type services to HCS consumers. We currently have only two part time students as of March 3rd. We will struggle to provide the direct services required if the positions remain vacant.
5. IDD Authority's Quality Assurance Authority Review Corrective Action Plan (CAP) is due by March 20, 2023. The CAP describes in detail, to the Contract Accountability & Oversight (CAO) team, how we will specifically correct the findings in our FY23 Audit. As a reminder, IDD Authority scored over 90% in all program areas – HCS, TxHmL, PASRR, GR, CFC & QM.
 - a. IDD Authority opted to not submit any reconsiderations, which would have been due to the CAO team by March 6, 2023.
 - b. IDD Authority is working with HHSC's Training Department on guidance for the team regarding Respite outcomes. Respite outcomes that "do not justify the service" was a central finding in both the Waiver (HCS, TxHmL) and Non-Waiver (GR, CFC) programs, at Tri-County and at most all LIDDAs around the state.

Support Services

1. **Quality Management (QM):**
 - a. Staff prepared and submitted two record requests to two insurance companies totaling six charts, for records dating back to January 1, 2022.
 - b. In addition to routine and ongoing quality assurance of documentation, staff reviewed 20 progress notes, prior to billing, to ensure compliance. Additional training and follow up was provided with staff and supervisors when needed.

- c. Staff are currently conducting a review of the Veterans Counseling Program and began participating in an Audit on March 8th by University of Texas Health Science Center San Antonio's Be Well Texas program.
- d. Staff participated in the initial Comprehensive Quality Management Audit call with HHSC in preparation for the upcoming review scheduled to begin on May 15th.
- e. The Continuous Quality Improvement Committee met on March 10, 2023 to review progress on goals related to No Show reduction, Time to Initial Evaluation, Suicide Reduction and Reduction of 30-Day Re-Hospitalization. The Committee is continuing to identify and discuss future incremental changes that we hope will positively impact our measures (i.e. text reminders, seeking flexibilities in allowed curriculum to address trauma, engagement efforts, reviewing and improving scheduling processes and ensuring processes with smooth transfers between levels of care).

2. Utilization Management (UM):

- a. Staff reviewed 10% of all Center discharges for February to ensure appropriateness and that proper notification and appeal forms were provided. Follow up with staff was provided as needed to ensure quality improvement.
- b. Staff reviewed 51 notes that utilized the COPSD Modifier for quality assurance purposes.
- c. QM/UM and Program staff are meeting weekly to review performance measures in preparation of COVID-19 flexibilities coming to an end.

3. Training:

- a. The Training Department has seen a recent increase in nursing students with 30 students from Sam Houston and LoneStar College making up the last orientation class.
- b. The Clinical Trainer attended a SAMA recertification course in San Antonio on March 8 – 10th. This recertification occurs every two years.
- c. The Clinical Trainer has completed training with 40% of our staff who utilize the state assessment (ANSA/CANS) as required per HHSC performance contract by April 15, 2023.

4. Veteran Services and Veterans Counseling/Case Management

- a. The department attended the Women Veterans Summit, and the Director presented on "Mental Health and Mental Wellbeing."
- b. We are very excited to report we hired two case managers. We are still down one therapist but we hope to fill the position soon. We continue to see a rise in therapy needs for both veterans and their family members.
- c. The Military Veteran Peer Network (MVPN) staff will attend the Spring Conference in San Antonio at the end of the month.

5. Planning and Network Advisory Committee(s) (MH and IDD PNACs):

- a. The IDD PNAC met on March 22nd where they participated in and provided feedback for the Center's Local Planning process.

- b. The MH PNAC is continuing to seek additional members that are representative of the population we serve and are actively seeking referrals for membership at this time.

6. Community Activities

- a. Our Wellness Coordinator has become increasingly involved in the Hispanic community; attending area networking events, presentations, and resource events. In addition, staff have trained our first completely Hispanic group in Mental Health First Aid.
- b. The Strategic Development Director participated as part of the Civil Service Board which approved 17 civilians to enter into the Police Academy.
- c. The Mental Health First Aid staff trained the Nursing Students at Lone Star College and will train Sam Houston State University College of Osteopathic Medicine's Medical Students at the end of the month.

<p>Agenda Item: Year to Date FY 2023 Goals and Objectives Progress Report</p> <p>Committee: Program</p>	<p>Board Meeting Date</p> <p>March 23, 2023</p>
<p>Background Information:</p> <p>The Management Team met on August 12, 2022 to update the five-year strategic plan and to develop the goals for FY 2023. The strategic plan and related goals were approved by the Board of Trustees at the September 2022 Board meeting. Subsequently, the Management Team developed objectives for each of the goals.</p> <p>These goals are in addition to the contractual requirements of the Center’s contracts with the Health and Human Services Commission or other contractors.</p> <p>This report shows progress year to date for Fiscal Year 2023.</p>	
<p>Supporting Documentation:</p> <p>FY 2023, Year to Date Goals and Objectives Progress Report</p>	
<p>Recommended Action:</p> <p>For Information Only</p>	

Year-to-Date Progress Report

September 1, 2022 – March 23, 2023

Goal #1 – Clinical Excellence

Objective 1:

Develop a two-year implementation plan for appropriate clinical use of telehealth, including a plan for accelerating the plan if needed, which incorporates state regulations and clinical best practices by June 1, 2023.

- Staff are working on a draft ‘Whitepaper’ that will explore the benefits and challenges of telehealth, use and effectiveness of this model related to the application of evidence-based practices, and client preference and need.
- Staff are also reviewing applicable rules and regulations to understand the limits and requirements for services provided using a telehealth platform.
- The Quality Assurance Department conducted a phone survey of a random sample of clients designed to gather feedback surrounding interest in participating in services provided using telehealth. It was learned that while face to face services are preferred as the primary method of service provision, 75% of respondents indicated they would like to have the option to use telehealth if available. Respondents further indicated that a telehealth option would increase attendance as it would address barriers, including transportation, child or elder care, or cancellations due to illness, as well as allow for greater flexibility in scheduling for those who are working.
 - While information obtained from this survey is valuable, it is unknown how many respondents were from our rural communities. The team plans to complete a second survey, pulling a random sample from the rural counties to ensure that the voices and needs of our client population are represented.

Objective 2:

If appropriate operational funding can be secured, reopen the Crisis Stabilization Unit by May 1, 2023 – or – If additional funds are not available for CSU operations, design an alternative Crisis program for Board approval by April 1, 2023.

- With the assistance of Justice of the Peace Wayne Mack, Tri-County has secured continued American Rescue Plan Act funding from Montgomery County that will allow us to reopen the Crisis Stabilization Unit, among other things.
- We have a team of staff working on multiple aspects of reopening.
 - Facility modifications, updates and relicensing:
 - The Board approved a not-to-exceed budget for \$400,000 for CSU modifications at the January 26, 2023 Board meeting. Construction is expected to be complete in early April.

- The Department of State Health Services (DSHS) will have to reinspect and relicense the facility after the construction is complete. Communication with DSHS staff has been challenging thus far.
 - Staff hiring and development:
 - All positions for the Crisis Stabilization Unit have been posted except of pro re nata (PRN) nurse and tech positions.
 - Application volume is increasing.
 - We held our first job fair on March 9th and identified several potential candidates for positions.
 - Licensing and operational procedure development:
 - Facility licensing procedures are in final draft format and are being reviewed by the Medical Director and Executive Director. In total, the procedures were around 140 pages.
 - 97 forms have been updated for use at the PETC.
 - Work on operating (desk) procedures has begun.
 - Operations, including reestablishing relationships with contractors:
 - We have had a series of conversations with potential PETC contractors. We have selected the janitorial vendor and the linens vendor. We are working with a variety of other contractors including dieticians, medical screening and assessment, food, etc. Thus far, all of the contract costs have increased by 20-30%.
 - Genoa will handle our PETC pharmacy contract.
 - We have had a technical conversation with a Pyxis vendor (automated medication distribution machine) and will plan to purchase that as a part of our CSU restart. The Pyxis machine would not be on site for several more months.
 - We are reviewing software needs. Anasazi will be used initially so many of the assessments, etc., will remain unchanged until SmartCare is implemented on September 1, 2023.
- Our Chief Nursing Officer, Andrea Scott, APRN, will be managing the Crisis Stabilization Unit.

Goal #2 – Professional Facilities

Objective 1:

Break ground on the new Cleveland Service Facility by August 31, 2023.

- The design team has been holding regular meetings with Identity Architects to design the Cleveland Service Facility. After the facility is designed, it will be sent to a Mechanical, Electrical and Plumbing firm to prepare the design for construction bids.
- Building contractor Mike Duncum and Architect David Kastendieck have met with the City of Cleveland Planning and Zoning Department to discuss the project and report that no significant challenges with the site design are expected.

- Regular updates on the project will be provided by the Executive Director or designee to the Board of Trustees.
- At this time, we are still on track to break ground by August 31, 2023.

Objective 2:

Complete a refresh of the Sgt. Ed Building in Conroe to include inside paint, carpet where needed and other general cleanup, the waiting rooms and children’s playroom by June 1, 2023.

- A complete walk-through of the Conroe facility has been completed, identifying several areas that need to be addressed to correct general deterioration associated with daily use, including paint throughout the building, replacement of carpet and ceiling tiles, and parking lot maintenance. While some areas, such as carpet may be replaced using stock available at the warehouse, other areas require going out for bid.
- The Parking Lot has been pressure washed and restriped.
- Two estimates have been requested, with one received to have small exterior stucco repairs completed.
- A contractor has also been contacted to refinish the interior and exterior shipping and receiving door. Other identified areas that are in process include wall-paper, bathroom stalls, and sheet-rock repairs, as well as adding corner guards. Further, a ‘calm room’ for children and adolescents who are experiencing behavioral emergencies is being created to provide a safe space to deescalate, as well as new furniture being purchased to replace pieces that show general deterioration associated with daily use.
- The team is collaborating with the Diversity Workgroup to identify artwork for the building that is representative of the various cultures of the community that will replace or supplement existing pieces.

Goal #3 – Information Technology

Objective 1:

Prepare the Streamline SmartCare Behavioral Health Software System for ‘Go-Live’ by August 31, 2023.

- Staff have begun a series of weekly implementation meetings emphasizing on Clinical, Billing, and Data migration with the Streamline implementation team. This team consists of the members of the TCBHC Software Management Team (SMT), special TCBHC guest relating to meeting subject matter, and Streamline staff. As of the end of the month of February 2023, we have completed 107 meetings resulting in 148.5 hours of interactive meetings so far.
- On March 6th we submitted our round 1 pass 2 of our system setup data to begin the first step of customizing Streamline’s SmartCare solution to match that TCBHC clinical practices. We have received compliments from the Streamline team about our detail orientation of our staff and our system set-up in general.

- ‘Superuser’ training will be held in June or July and remaining staff will be trained on the product in August prior to the September 1st go-live date. September 1st is the Friday before the Labor Day weekend and many staff will likely be out. The week of Tuesday September 4th – 7th will be scheduled at half or less of regular client volume to allow for staff learning to occur. SmartCare staff will be on site on the 4th through the 6th.

Goal #4 – Employee Retention

Objective 1:

Create an employee leadership development program for Center managers by May 1, 2023.

- Staff continue to identify strategies for development of a Tri-County leadership program designed to train and support supervisors and encourage growth and readiness for future opportunities. The team has identified a series of topics and speakers that would lay the groundwork for building our leaders, offering learning that would enhance knowledge of how to manage difficult situations, understand how Center decisions are made, and allow for development of support networks across the agency among peers.
- Staff have also explored opportunities for providing supervisors with access to online leadership certificate programs available through several highly respected colleges and universities that target development of higher-level leadership skills, identifying several affordable, yet meaningful programs.

Goal #5 – Financial

Objective 1:

Implement required business office processes to ensure compliance with the Public Health Provider – Charity Care Pool guidance by February 28, 2023.

- A Center procedure has been developed, establishing guidelines for completing the application for the Charity Care Pool program, including methods for evaluating eligibility, determining fee for service, and payment collection, while ensuring appropriate data collection practices to allow for accurate and timely completion of the annual cost report.
- Financial staff and others involved in the implementation and ongoing maintenance of the CCP program have received training on the program requirements and have started assisting the clients with the application process to determine eligibility, including documentation of completion and Charity Care eligibility in the electronic health record. Notices of the Charity Care Pool program have also been posted in each clinic site and publicized on the website in compliance with charity care requirements. Finally, Business Office procedures, including desk procedures, have been developed and implemented to ensure ongoing compliance with all requirements and standards necessary for cost reporting submission and reimbursement.
- Since implementation of the Charity Care program, staff have aided clients with the application process to determine eligibility, including documentation of completion and Charity Care eligibility in the electronic health record. Notices of the Charity Care Pool

program have been posted and publicized in all clinic sites and on the website, in compliance with requirements.

- The business office is providing monitoring and oversight of this program to ensure compliance with all requirements and standards necessary for cost reporting submission and reimbursement.
- A process for tracking and monitoring payment collection efforts has been implemented in alignment with Charity Care regulations.
 - There has been some inconsistent information about the level of tracking that will be required for collection efforts and Financial staff are working to clarify this information further.

Agenda Item: 2nd Quarter FY 2023 Corporate Compliance and Quality Management Report

Board Meeting Date

March 23, 2023

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 2023 are included in this Board packet.

Supporting Documentation:

2nd Quarter FY 2023 Corporate Compliance and Quality Management Report

Recommended Action:

For Information Only

Corporate Compliance and Quality Management Report 2nd Quarter, FY 2023

Corporate Compliance Activities

A. Key Statistics:

There was one compliance concern reported in the 2nd Quarter, as detailed below:

An employee's supervisor reported the initial allegation, expressing concerns about the employee's overall work product. A review of the employee's work was conducted, resulting in some minor compliance findings. Due to these findings, the staff received a verbal warning and retraining. Payback was made in the amount of \$487.42.

B. Committee Activities:

The Corporate Compliance Committee meeting was held on March 22, 2023. The Committee reviewed the following:

1. A final summary 2nd Quarter investigations;
2. FY23 3rd Quarter updates; and
3. Trending concerns.

Quality Management Initiatives

A. Key Statistics:

1. Staff reviewed and submitted 10 record requests, totaling 19 charts.
2. Staff conducted several ongoing internal audits including documentation reviews, 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 two record requests totaling three charts to Ambetter for Superior Health Plan dating back to January 2022.
2. Staff prepared and submitted three record requests totaling six charts to Amerigroup dating back to January 2022.
3. Staff prepared and submitted one record request totaling four charts to Cigna Medicare dating back to January 2022.
4. Staff prepared and submitted one record request totaling one chart to Memorial Hermann Health Plan dating back to January 2022.
5. Staff prepared and submitted two record requests totaling two charts to Molina Healthcare dating back to January 2022.
6. Staff prepared and submitted one record request totaling two charts to Superior Health Plan dating back to January 2022.

7. Staff prepared and submitted one record request totaling one chart to United Healthcare dating back to January 2022.
8. Staff reviewed 104 notes that used the Co-Occurring Psychiatric and Substance Use Disorder modifier to ensure that the intervention was used appropriately. This review indicated that the staff utilizing this code are using it correctly.
9. Staff reviewed 102 discharges that occurred in Q2 and communicated areas that were needing improvement to supervisory staff.
10. Staff reviewed 52 MH Adult and Child and Youth progress notes for quality assurance purposes. Additionally, staff reviewed eight IDD progress notes. Follow up was provided to supervisors as needed for any re-training purposes.

C. Other Quality Management Activities

1. IDD Authority and Quality Management Staff participated in the HHSC IDD Audit on February 6-9, 2023. Scores were as follows:
 - i. Quality Assurance Authority Review – 99.73%
 - ii. Texas Home Living Authority Review – 95.54%
 - iii. Home and Community Based Services Authority Review – 91.62%
 - iv. Pre-Admission Screening and Resident Review (PASSR) Authority Review – 92.77%
 - v. General Revenue – Community First Choice Review – 92.82%
2. Annual Training was completed to the Mental Health Quality and Utilization Management Committee on February 14, 2023.
3. The Administrator of Quality Management began a Program Survey of the Veterans Counseling Program.

Agenda Item: 3rd Quarter FY 2023 Corporate Compliance Training

Board Meeting Date

March 23, 2023

Committee: Program

Background Information:

As part of the Center’s Corporate Compliance Program, training is developed each quarter for distribution to staff by their supervisors.

This training is included in the packet for ongoing education of the Tri-County Board of Trustees on Corporate Compliance issues.

Supporting Documentation:

3rd Quarter FY 2023 Corporate Compliance Training

Recommended Action:

For Information Only

COMPLIANCE NEWSLETTER

FY23, Quarter 3



NEWSLETTER HIGHLIGHTS

Compliance is Everyone's Responsibility

Your Compliance Team

Report Compliance Concerns



Compliance is Everyone's Responsibility

This is the foundational premise underlying an organization's commitment to abiding by the law.

Responsibilities of Employees

- Understand how the Corporate Compliance Program applies to your job and ask questions when necessary
- Report any suspected violations!
- Participate actively in compliance activities

Responsibilities of Supervisors

- Maintain a culture of compliance
- Detect compliance problems and alert the Compliance Department

YOUR CORPORATE COMPLIANCE TEAM

Amy Foerster
Chief Compliance Officer
amyf@tcbhc.org

Heather Hensley
Administrator of Compliance
heatherh@tcbhc.org

Ashley Bare
HR Manager
ashleyba@tcbhc.org

WARREN BUFFET ONCE SAID, "EVERYONE MUST BE [THEIR] OWN COMPLIANCE OFFICER." HE FURTHER SAID IF YOU LIVE LIKE EVERYTHING YOU DO COULD WIND UP ON THE FRONT PAGE OF THE NEWSPAPER, THERE WILL BE NOTHING THAT CAN'T STAND UP TO SCRUTINY.

Compliance
Concerns
Hotline:
866-243-9252

REPORT

**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 doing³¹**

Agenda Item: Personnel Report for February 2023

Board Meeting Date:

March 23, 2023

Committee: Executive

Background Information:

None

Supporting Documentation:

Personnel Report for February 2023

Recommended Action:

For Information Only

Personnel Report

FY23 | February 2023



OVERVIEW

NEW HIRES February 15 POSITIONS YTD 82 POSITIONS	SEPARATIONS February 11 POSITIONS YTD 58 POSITIONS	Vacant Positions 115 Frozen Positions 0	Newly Created Positions 26 Total Budgeted Positions 491
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RECRUITING



APPLICANTS

February Total Applicants	305
YTD Applicants	1,619

CURRENT OPENINGS

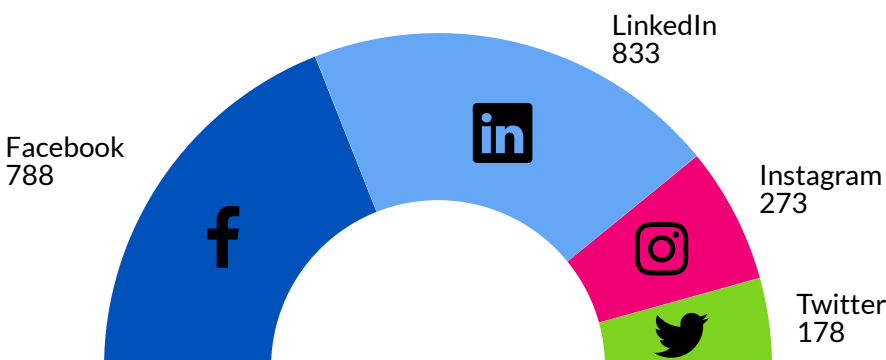
VACANCIES BY LOCATION

CONROE	66
PETC	28
CLEVELAND	9
LIBERTY	5
HUNTSVILLE	6
PORTER	1

JOB FAIRS

Rice University	2/3/2023
Houston Baptist University - Nursing	2/9/2023
Prairie View A&M	2/15/2023 & 2/16/2023
Stephen F. Austin University	2/22/2023
Texas Southern University	2/24/2023

SOCIAL MEDIA FOLLOWERS



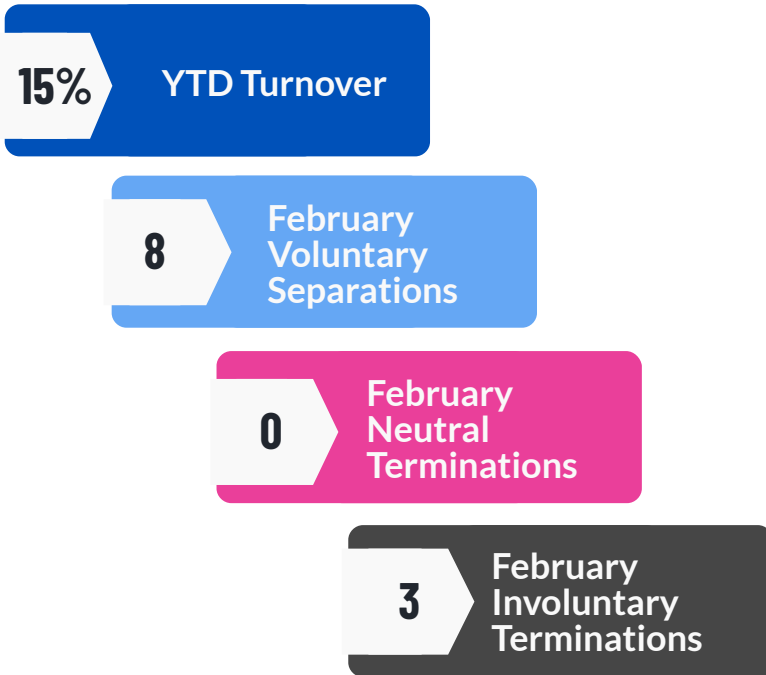
TOP 5 VACANCIES

Mental Health Specialist/Case Manager (Adult, Crisis and C&Y)	46
Psychiatric Nursing Assistant	10
Direct Care Provider	9
Registered Nurse	8
Licensed Vocational Nurse	5

Exit Data

FY23 | February 2023

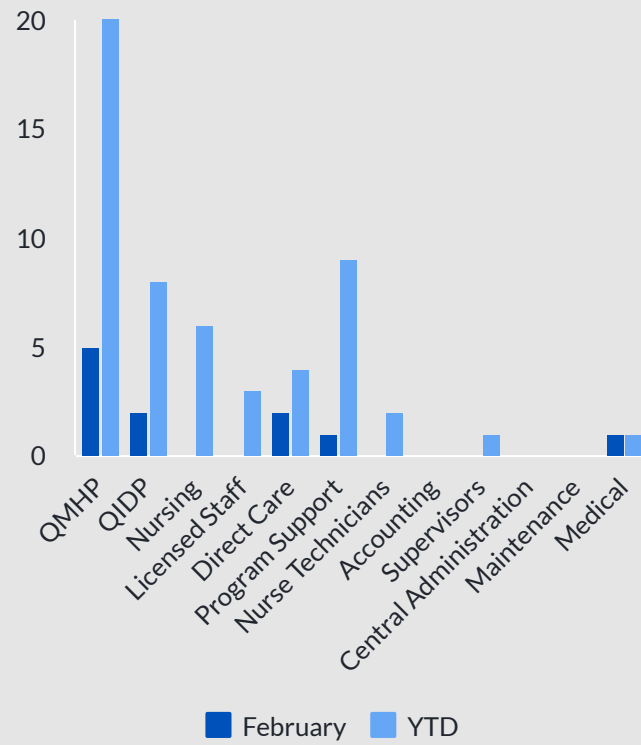
Exit Stats at a Glance



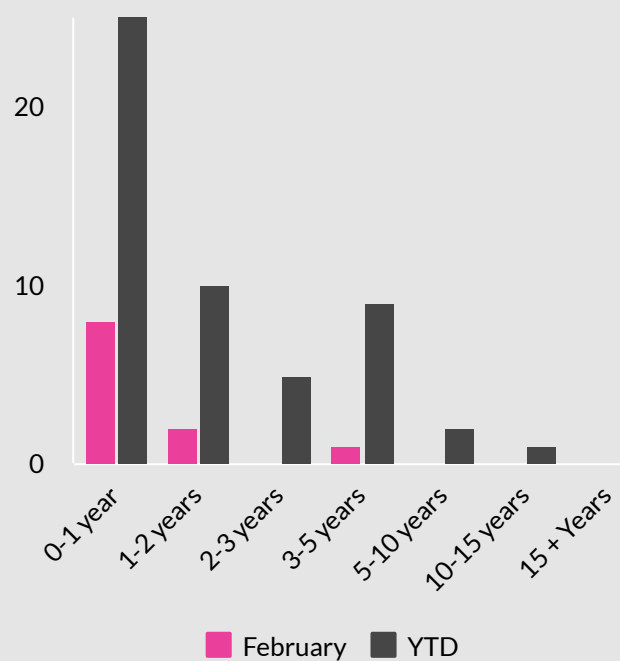
YTD Top Reasons for Separations

- 1 Another Job
- 2 Better Pay
- 3 Personal/Family, includes Relocating
- 4 Health
- 5 Neutral Termination

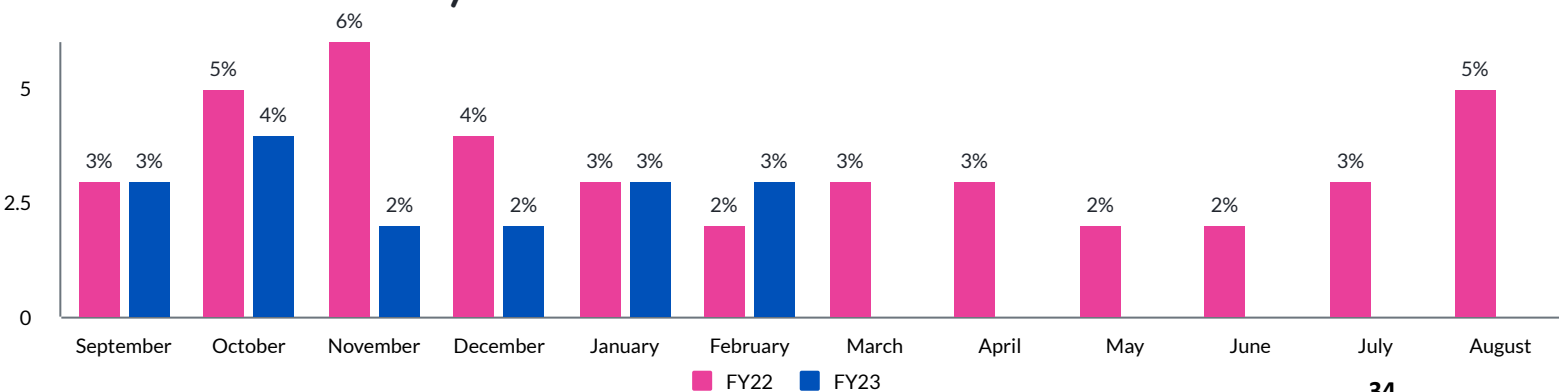
Separations by Category



Separations by Tenure



Turnover Rate by Month



Agenda Item: Texas Council Risk Management Fund Claims Summary as of February 2023

Board Meeting Date:

March 23, 2023

Committee: Executive

Background Information:

None

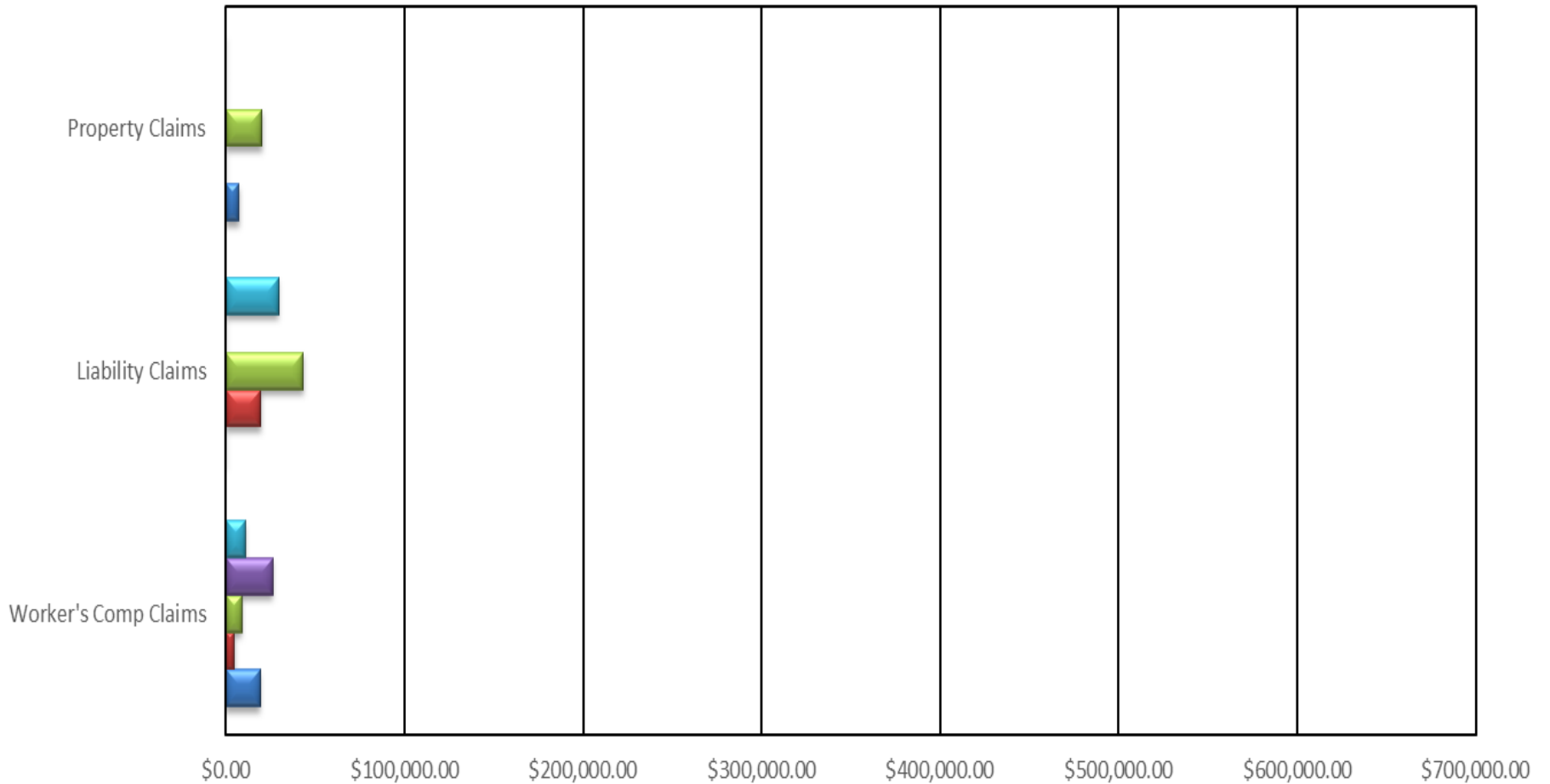
Supporting Documentation:

Texas Council Risk Management Fund Claims Summary as of February 2023

Recommended Action:

For Information Only

TCRMF Claims Summary February 2023



	Worker's Comp Claims	Liability Claims	Property Claims
2019	\$10,826.00	\$29,330.00	\$0.00
2020	\$26,111.00	\$0.00	\$0.00
2021	\$8,860.00	\$43,252.00	\$20,074.00
2022	\$4,619.00	\$19,417.00	\$0.00
2023	\$19,300.00	\$0.00	\$7,381.00

Agenda Item: Approve February 2023 Financial Statements

Board Meeting Date

March 23, 2023

Committee: Business

Background Information:

None

Supporting Documentation:

February 2023 Financial Statements

Recommended Action:

Approve February 2023 Financial Statements

February 2023 Financial Summary

Revenues for February 2023 were \$3,216,705 and operating expenses were \$3,074,574 resulting in a gain in operation of \$142,131. Capital Expenditures and Extraordinary Expenses for February were \$165,415 resulting in a loss of \$23,285. Total revenues were 93.25% of the monthly budgeted revenues and total expenses were 95.79% of the monthly budgeted expenses (difference of 2.54%).

Year to date revenues are \$20,755,297 and operating expenses are \$19,460,788 leaving excess operating revenues of \$1,294,509. YTD Capital Expenditures and Extraordinary Expenses are \$1,018,443 resulting in a gain YTD of \$276,066. Total revenues are 100.60% of the YTD budgeted revenues and total expenses are 99.40% of the YTD budgeted expenses (difference of 1.19%)

REVENUES

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

Revenue Source	YTD Revenue	YTD Budget	% of Budget	\$ Variance
No items to report				

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
No items to report				

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended February 2023**

ASSETS	TOTALS COMBINED FUNDS February 2023	TOTALS COMBINED FUNDS January 2023	Increase (Decrease)
CURRENT ASSETS			
Imprest Cash Funds	2,050	2,050	-
Cash on Deposit - General Fund	6,982,494	8,063,553	(1,081,059)
Cash on Deposit - Debt Fund			-
Accounts Receivable	7,835,996	6,902,569	933,427
Inventory	656	845	(189)
TOTAL CURRENT ASSETS	14,821,196	14,969,017	(147,821)
FIXED ASSETS	21,488,095	21,041,617	446,478
OTHER ASSETS	278,969	203,623	75,346
TOTAL ASSETS	\$ 36,588,260	\$ 36,214,257	\$ 374,004
LIABILITIES, DEFERRED REVENUE, FUND BALANCES			
CURRENT LIABILITIES	1,848,408	1,728,849	119,559
NOTES PAYABLE	694,011	694,011	-
DEFERRED REVENUE	3,568,003	3,627,918	(59,915)
LONG-TERM LIABILITIES FOR			
First Financial Conroe Building Loan	9,939,157	9,984,208	(45,051)
Guaranty Bank & Trust Loan	1,766,510	1,772,568	(6,058)
Lease Liability	448,112	448,112	-
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR			
General Fund	276,067	299,352	(23,285)
FUND EQUITY			
RESTRICTED			
Net Assets Reserved for Debt Service	(12,153,779)	(12,204,888)	51,109
Reserved for Debt Retirement			-
COMMITTED			
Net Assets - Property and Equipment	21,488,095	21,041,618	446,477
Reserved for Vehicles & Equipment Replacement	613,711	613,711	-
Reserved for Facility Improvement & Acquisitions	1,715,052	1,830,052	(115,000)
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	37,000	30,833	6,167
Reserved for Insurance Deductibles	100,000	100,000	-
Reserved for Accrued Paid Time Off	(694,010)	(694,010)	-
UNASSIGNED			
Unrestricted and Undesignated	4,664,837	4,664,837	-
TOTAL LIABILITIES/FUND BALANCE	\$ 36,588,259	\$ 36,214,256	\$ 374,004

**TRI-COUNTY BEHAVIORAL HEALTHCARE
CONSOLIDATED BALANCE SHEET
For the Month Ended February 2023**

ASSETS	General Operating Funds	Memorandum Only Final August 2022
CURRENT ASSETS		
Imprest Cash Funds	2,050	1,750
Cash on Deposit - General Fund	6,982,494	5,629,875
Cash on Deposit - Debt Fund	-	-
Accounts Receivable	7,835,996	6,824,724
Inventory	656	1,649
TOTAL CURRENT ASSETS	14,821,196	12,457,998
FIXED ASSETS	21,488,095	21,488,094
OTHER ASSETS	278,969	247,899
	-	-
Total Assets	\$ 36,588,261	\$ 34,193,991
LIABILITIES, DEFERRED REVENUE, FUND BALANCES		
CURRENT LIABILITIES	1,848,408	2,029,164
NOTES PAYABLE	694,011	694,011
DEFERRED REVENUE	3,568,003	521,097
LONG-TERM LIABILITIES FOR		
First Financial Conroe Building Loan	9,939,157	10,202,342
Guaranty Bank & Trust Loan	1,766,510	1,800,620
Lease Liability	448,112	448,112
EXCESS(DEFICIENCY) OF REVENUES OVER EXPENSES FOR		
General Fund	276,067	354,155
FUND EQUITY		
RESTRICTED		
Net Assets Reserved for Debt Service - Restricted	(12,153,779)	(12,451,074)
Reserved for Debt Retirement	-	-
COMMITTED		
Net Assets - Property and Equipment - Committed	21,488,095	21,488,094
Reserved for Vehicles & Equipment Replacement	613,711	613,712
Reserved for Facility Improvement & Acquisitions	1,715,052	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	37,000	-
Reserved for Insurance Deductibles - Assigned	100,000	100,000
Reserved for Accrued Paid Time Off	(694,010)	(694,010)
UNASSIGNED		
Unrestricted and Undesignated	4,664,837	4,310,682
TOTAL LIABILITIES/FUND BALANCE	\$ 36,588,260	\$ 34,193,991

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
For the Month Ended January 2023
and Year To Date as of February 2023

INCOME:	MONTH OF February 2023	YTD February 2023
	<u> </u>	<u> </u>
Local Revenue Sources	1,312	2,431,170
Earned Income	1,901,845	10,014,442
General Revenue - Contract	1,313,548	8,309,685
TOTAL INCOME	<u>\$ 3,216,705</u>	<u>\$ 20,755,297</u>
EXPENSES:		
Salaries	1,733,186	10,928,307
Employee Benefits	333,527	2,041,497
Medication Expense	41,365	245,467
Travel - Board/Staff	29,859	173,896
Building Rent/Maintenance	43,052	171,408
Consultants/Contracts	676,739	4,228,830
Other Operating Expenses	216,846	1,671,383
TOTAL EXPENSES	<u>\$ 3,074,574</u>	<u>\$ 19,460,788</u>
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	<u>\$ 142,131</u>	<u>\$ 1,294,509</u>
CAPITAL EXPENDITURES		
Capital Outlay - FF&E, Automobiles, Building	78,384	524,169
Capital Outlay - Debt Service	87,031	494,274
TOTAL CAPITAL EXPENDITURES	<u>\$ 165,415</u>	<u>\$ 1,018,443</u>
GRAND TOTAL EXPENDITURES	<u>\$ 3,239,989</u>	<u>\$ 20,479,231</u>
Excess (Deficiency) of Revenues and Expenses	<u>\$ (23,285)</u>	<u>\$ 276,066</u>

Debt Service and Fixed Asset Fund:		
Debt Service	87,031	494,274
Excess (Deficiency) of Revenues over Expenses	<u>87,031</u>	<u>494,274</u>

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
Year to Date as of February 2023

	YTD February 2023	APPROVED BUDGET	Increase (Decrease)
INCOME:			
Local Revenue Sources	2,431,170	2,371,970	59,200
Earned Income	10,014,442	10,086,665	(72,223)
General Revenue	8,309,685	8,173,348	136,337
TOTAL INCOME	\$ 20,755,297	\$ 20,631,983	\$ 123,314
EXPENSES:			
Salaries	10,928,307	11,102,558	(174,251)
Employee Benefits	2,041,497	2,069,279	(27,782)
Medication Expense	245,467	245,513	(46)
Travel - Board/Staff	173,896	171,438	2,458
Building Rent/Maintenance	171,408	176,500	(5,092)
Consultants/Contracts	4,228,830	4,222,765	6,065
Other Operating Expenses	1,671,383	1,612,180	59,203
TOTAL EXPENSES	\$ 19,460,788	\$ 19,600,233	\$ (139,444)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,294,509	\$ 1,031,750	\$ 262,758
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	524,169	507,345	16,824
Capital Outlay - Debt Service	494,274	494,272	2
TOTAL CAPITAL EXPENDITURES	\$ 1,018,443	\$ 1,001,617	\$ 16,826
GRAND TOTAL EXPENDITURES	\$ 20,479,231	\$ 20,601,850	\$ (122,618)
Excess (Deficiency) of Revenues and Expenses	\$ 276,066	\$ 30,132	\$ 245,933

Debt Service and Fixed Asset Fund:			
Debt Service	494,274	494,272	2
Excess(Deficiency) of Revenues over Expenses	494,274	494,272	2

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
Compared to Budget
For the Month Ended February 2023

INCOME:	MONTH OF February 2023	APPROVED BUDGET	Increase (Decrease)
Local Revenue Sources	1,312	380,020	(378,708)
Earned Income	1,901,845	1,731,747	170,098
General Revenue-Contract	1,313,548	1,337,844	(24,296)
TOTAL INCOME	\$ 3,216,705	\$ 3,449,611	\$ (232,906)
EXPENSES:			
Salaries	1,733,186	1,652,175	81,011
Employee Benefits	333,527	306,174	27,353
Medication Expense	41,365	38,419	2,946
Travel - Board/Staff	29,859	28,573	1,286
Building Rent/Maintenance	43,052	66,500	(23,448)
Consultants/Contracts	676,739	512,266	164,473
Other Operating Expenses	216,846	271,363	(54,517)
TOTAL EXPENSES	\$ 3,074,574	\$ 2,875,471	\$ 199,105
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 142,131	\$ 574,140	\$ (432,011)
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	78,384	419,914	(341,530)
Capital Outlay - Debt Service	87,031	87,031	-
TOTAL CAPITAL EXPENDITURES	\$ 165,415	\$ 506,945	\$ (341,530)
GRAND TOTAL EXPENDITURES	\$ 3,239,989	\$ 3,382,416	\$ (142,427)
Excess (Deficiency) of Revenues and Expenses	\$ (23,285)	\$ 67,195	\$ (90,481)

Debt Service and Fixed Asset Fund:			
Debt Service	87,031	87,031	-
Excess (Deficiency) of Revenues over Expenses	87,031	87,031	-

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With YTD February 2022 Comparative Data
Year to Date as of February 2023

INCOME:	YTD February 2023	YTD February 2022	Increase (Decrease)
Local Revenue Sources	2,431,170	1,264,379	1,166,791
Earned Income	10,014,442	7,198,088	2,816,354
General Revenue-Contract	8,309,685	10,385,114	(2,075,429)
TOTAL INCOME	\$ 20,755,297	\$ 18,847,581	\$ 1,907,716
EXPENSES:			
Salaries	10,928,307	9,763,863	1,164,444
Employee Benefits	2,041,497	1,935,592	105,905
Medication Expense	245,467	286,130	(40,663)
Travel - Board/Staff	173,896	107,716	66,180
Building Rent/Maintenance	171,408	128,903	42,505
Consultants/Contracts	4,228,830	3,696,478	532,352
Other Operating Expenses	1,671,383	1,194,103	477,280
TOTAL EXPENSES	\$ 19,460,788	\$ 17,112,783	\$ 2,348,005
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 1,294,509	\$ 1,734,798	\$ (440,289)
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	524,169	706,432	(182,263)
Capital Outlay - Debt Service	494,274	428,390	65,884
TOTAL CAPITAL EXPENDITURES	\$ 1,018,443	\$ 1,134,821	\$ (116,378)
GRAND TOTAL EXPENDITURES	\$ 20,479,231	\$ 18,247,604	\$ 2,231,627
Excess (Deficiency) of Revenues and Expenses	\$ 276,066	\$ 599,976	\$ (323,910)

Debt Service and Fixed Asset Fund:			
Debt Service	494,274	428,390	65,884
Excess (Deficiency) of Revenues over Expenses	494,274	428,390	65,884

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With February 2022 Comparative Data
For the Month ending February 2023

INCOME:	MONTH OF February 2023	MONTH OF February 2022	Increase (Decrease)
Local Revenue Sources	1,312	242,059	(240,747)
Earned Income	1,901,845	1,089,080	812,765
General Revenue-Contract	1,313,548	1,488,169	(174,621)
TOTAL INCOME	\$ 3,216,705	\$ 2,819,308	\$ 397,397
Salaries	1,733,186	1,345,617	387,569
Employee Benefits	333,527	303,593	29,934
Medication Expense	41,365	46,392	(5,027)
Travel - Board/Staff	29,859	18,106	11,753
Building Rent/Maintenance	43,052	38,345	4,707
Consultants/Contracts	676,739	715,602	(38,863)
Other Operating Expenses	216,846	153,841	63,005
TOTAL EXPENSES	\$ 3,074,574	\$ 2,621,497	\$ 453,077
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 142,131	\$ 197,811	\$ (55,680)
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	78,384	4,589	73,795
Capital Outlay - Debt Service	87,031	80,053	6,978
TOTAL CAPITAL EXPENDITURES	\$ 165,415	\$ 84,642	\$ 80,773
GRAND TOTAL EXPENDITURES	\$ 3,239,989	\$ 2,706,139	\$ 533,850
Excess (Deficiency) of Revenues and Expenses	\$ (23,285)	\$ 113,169	\$ (136,453)

Debt Service and Fixed Asset Fund:			
Debt Service	87,031	80,053	6,978
			-
Excess (Deficiency) of Revenues over Expenses	87,031	80,053	6,978

TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary
With January 2023 Comparative Data
For the Month Ended February 2023

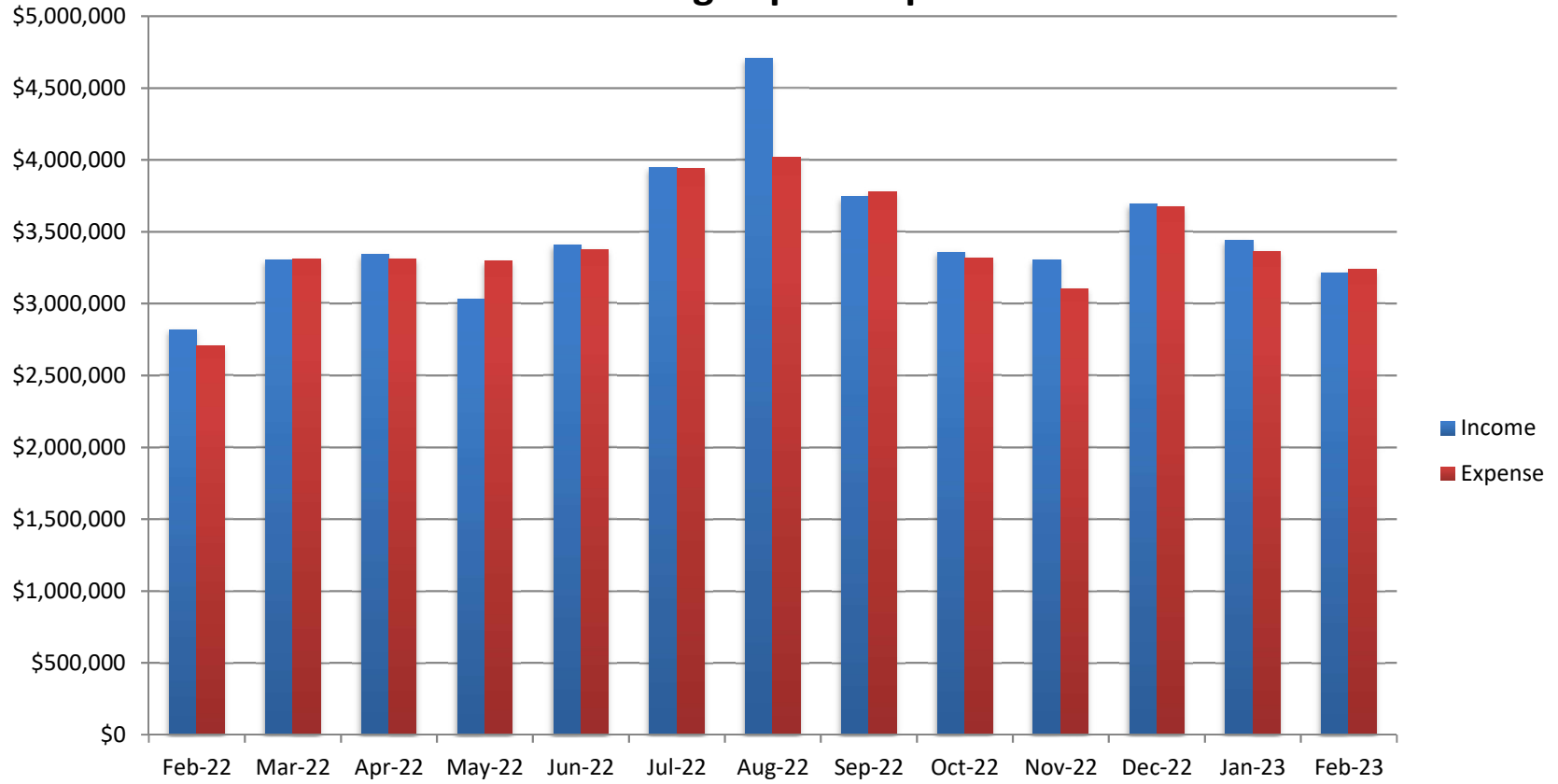
INCOME:	MONTH OF February 2023	MONTH OF January 2023	Increase (Decrease)
Local Revenue Sources	1,312	424,732	(423,420)
Earned Income	1,901,845	1,792,025	109,820
General Revenue-Contract	1,313,548	1,222,866	90,682
TOTAL INCOME	\$ 3,216,705	\$ 3,439,623	\$ (222,918)
EXPENSES:			
Salaries	1,733,186	1,666,625	66,561
Employee Benefits	333,527	329,462	4,065
Medication Expense	41,365	43,307	(1,942)
Travel - Board/Staff	29,859	24,575	5,284
Building Rent/Maintenance	43,052	26,569	16,483
Consultants/Contracts	676,739	796,003	(119,264)
Other Operating Expenses	216,846	329,912	(113,066)
TOTAL EXPENSES	\$ 3,074,574	\$ 3,216,453	\$ (141,879)
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	\$ 142,131	\$ 223,170	\$ (81,039)
CAPITAL EXPENDITURES			
Capital Outlay - FF&E, Automobiles, Building	78,384	60,514	17,870
Capital Outlay - Debt Service	87,031	87,031	-
TOTAL CAPITAL EXPENDITURES	\$ 165,415	\$ 147,545	\$ 17,870
GRAND TOTAL EXPENDITURES	\$ 3,239,989	\$ 3,363,998	\$ (124,009)
Excess (Deficiency) of Revenues and Expenses	\$ (23,285)	\$ 75,624	\$ (98,909)

Debt Service and Fixed Asset Fund:			
Debt Service	87,031	87,031	-
Excess (Deficiency) of Revenues over Expenses	87,031	87,031	-

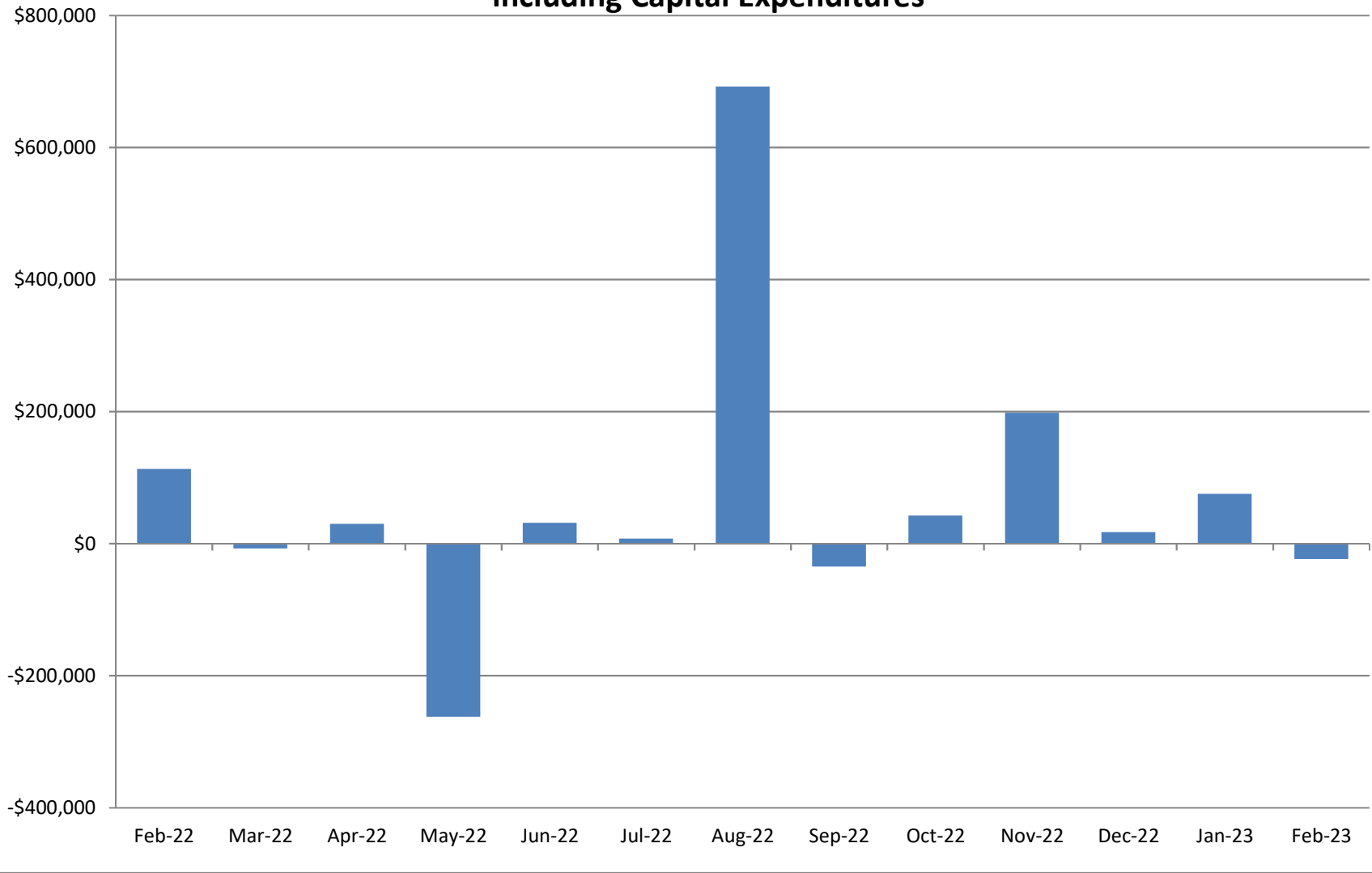
TRI-COUNTY BEHAVIORAL HEALTHCARE
Revenue and Expense Summary by Service Type
Compared to Budget
Year To Date as of February 2023

	YTD Mental Health February 2023	YTD IDD February 2023	YTD Other Services February 2023	YTD Agency Total February 2023	YTD Approved Budget February 2023	Increase (Decrease)
INCOME:						
Local Revenue Sources	1,855,884	161,229	291,698	2,308,811	1,967,321	341,490
Earned Income	2,702,092	1,811,782	5,476,740	9,990,614	8,243,034	1,747,580
General Revenue-Contract	6,377,405	862,680	1,053,178	8,293,263	7,005,524	1,287,739
TOTAL INCOME	10,935,381	2,835,691	6,821,616	\$ 20,592,688	\$ 17,215,879	\$ 3,376,810
EXPENSES:						
Salaries	6,430,642	1,674,680	2,822,985	10,928,307	9,421,172	1,507,135
Employee Benefits	1,240,292	323,817	477,388	2,041,497	1,763,105	278,392
Medication Expense	208,508	-	36,959	245,467	207,094	38,373
Travel - Board/Staff	80,372	54,347	39,178	173,897	142,865	31,032
Building Rent/Maintenance	159,348	3,692	8,368	171,408	110,000	61,408
Consultants/Contracts	858,556	547,610	2,823,323	4,229,489	3,548,371	681,118
Other Operating Expenses	895,323	376,486	430,262	1,702,071	1,404,817	297,254
TOTAL EXPENSES	9,873,041	2,980,632	6,638,463	\$ 19,492,138	\$ 16,597,425	\$ 2,894,714
Excess(Deficiency) of Revenues over Expenses before Capital Expenditures	1,062,340	(144,940)	183,152	\$ 1,100,550	\$ 618,454	\$ 482,096
CAPITAL EXPENDITURES						
Capital Outlay - FF&E, Automobiles, Building	367,994	49,173	107,002	524,169	87,431	436,738
Capital Outlay - Debt Service	252,080	74,141	168,053	494,274	400,261	94,013
TOTAL CAPITAL EXPENDITURES	620,074	123,314	275,055	\$ 1,018,443	\$ 487,693	\$ 530,751
GRAND TOTAL EXPENDITURES	10,493,115 ##	3,103,947 ##	6,913,518	\$ 20,510,581	\$ 17,085,118	\$ 3,425,465
Excess (Deficiency) of Revenues and Expenses	442,265	(268,255)	(91,903)	\$ 82,108 #	\$ 130,761	\$ (48,656)
Debt Service and Fixed Asset Fund:						
Debt Service	620,074	123,314	275,055	1,018,443	487,693	530,752
Excess (Deficiency) of Revenues over Expenses	620,074	123,314	275,055	1,018,443	487,693	530,752

TRI-COUNTY BEHAVIORAL HEALTHCARE Income and Expense including Capital Expenditures



TRI-COUNTY BEHAVIORAL HEALTHCARE
Income after Expense
including Capital Expenditures



Agenda Item: Approve Request to Solicit FY 2023 Auditor

Board Meeting Date

Committee: Business

March 23, 2023

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 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 – 2022	Eide Bailly LLP

The FY 2023 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.”

Supporting Documentation:

None

Recommended Action:

Direct Staff to Solicit Proposals for the FY 2023 Independent Financial Audit

Agenda Item: Approve Health and Human Services Commission Contract No. HHS000994900001, Amendment No. 4 Intellectual and Developmental Disability Authority Services

Board Meeting Date

March 23, 2023

Committee: Business

Background Information:

The Health and Human Services Local Intellectual and Developmental Disability Performance Contract is the contract for all IDD Authority services, including:

- Eligibility Determination;
- State Supported Living Center Admission and Continuity of Care services;
- Service Coordination;
- Maintenance of the TxHmL and HCS Interest lists;
- Permanency Planning;
- IDD Crisis Intervention and Crisis Respite;
- Enhanced Community Coordination;
- PreAdmission and Resident Review (PASRR); and
- Habilitation Coordination.

The IDD Authority Contract was revised to add in two new contract requirements: Section I, American Rescue Plan Act of 2021 – Workforce Challenges in the amount of \$299,507.35; and Section J, American Rescue Plan Act of 2021 – Electronic Interface Project in the amount of \$55,000. The Center system did not have a chance to review either of these ideas prior to the release of the Amendment.

The addition of \$299,507.35 would be great for our IDD Authority system that is very underfunded and has not had any funding increases of note in a decade, but Section I currently only allows this funding to be used for Determinations of Intellectual Disability (DIDs) which is not a significant issue for our Center, or for one-time incentive payments to admissions staff (which is only a handful of people at our Center).

The addition of \$55,000 to create batchable IDD forms to HHSC from SmartCare could be helpful but with 19 Streamline Centers who all received this funding, there is almost 1 million dollars that would need to be spent by Streamline prior to August 31, 2023.

The Executive Directors' Contracts Committee is working on understanding HHSC's intent for these funds and working to come up with solutions that may be viable for our IDD Authority System.

Supporting Documentation:

Contract will be available for review at the Board meeting.

Recommended Action:

Approve Health and Human Services Commission Contract No. HHS000994900001, Amendment No. 4, Intellectual and Developmental Disability Authority Services

Agenda Item: Approve HHSC Youth Empowerment Services (YES) Waiver Contract No. HHS001291000036

Board Meeting Date

March 23, 2023

Committee: Business

Background Information:

The Youth Empowerment Services waiver is a 1915(c) Medicaid program that helps children and youth with serious mental, emotional and behavioral difficulties. The YES Waiver provides intensive services delivered within a strengths-based team planning process called wraparound. Wraparound builds on family and community support and utilizes YES Waiver services to help build the family's natural support network and connection with the community. YES Wavier services are family-centered, coordinated and effective at preventing out-of-home placement and promoting lifelong independence and self-defined success.

HHSC has issued this new contract for YES Waiver services effective April 1, 2023 until March 31, 2025. YES Waiver services are billed using a fee-for service payment method and "HHSC makes no guarantee of total compensation to be paid under the contract."

The contract includes changes to program requirements including, but not limited to, new requirements for Procedures to be developed, requirements that our email system complies with HIPAA including end-to-end encryption, a higher standard for "key personnel" background screenings and a series of contract measures.

Tri-County is contracted to serve a maximum of 33 youth and we currently have 17 consumers receiving YES Waiver services.

Supporting Documentation:

Contract Available for Review.

Recommended Action:

Approve HHSC Youth Empowerment Services (YES) Waiver Contract No. HHS001291000036

Agenda Item: Approve FY 2023 Sun Behavioral Hospital Contract Addendum

Board Meeting Date

March 23, 2023

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 2022 inpatient hospital beds was initially set up at \$40,000, but due to increased utilization in August there is a need to increase the contract maximum to \$150,000.

This change in hospital utilization does not require a change in the Center budget for contracted psychiatric beddays.

Supporting Documentation:

Contract Addendum Available for Review at the Board Meeting.

Recommended Action:

Approve FY 2023 Sun Behavioral Contract Inpatient Psychiatric Services Contract Addendum in the amount of \$150,000 for FY 2023.

Agenda Item: Approve FY 2023 Lifetime Homecare Services Contract Amendment

Board Meeting Date:

March 23, 2023

Committee: Business

Background Information:

Health and Human Services Commission (HHSC) requires each Center to provide or contract for out-of-home crisis respite services for persons with Intellectual and Developmental Disabilities. Crisis respite is a short-term service provided in a 24-hour supervised environment for individuals demonstrating a crisis that cannot be stabilized in their home. This service is designed to assist someone in maintaining community living in the least restrictive environment possible. HHSC provides funding for this service.

The out-of-home crisis respite is required to be provided in a setting which is licensed by HHSC. Lifetime Homecare Services is a Home and Community-based Services (HCS) provider that is willing to utilize space in their licensed homes for IDD crises.

Lifetime Homecare Services receives \$2,000 per month to ensure space is available in their homes along with trained staff. When an individual is admitted to crisis respite, they receive an additional \$300 per day which includes day habilitation services.

Tri-County has had a couple of high need clients that have been in respite at Lifetime this year and the utilization of this service is higher than recent years. Staff are recommending that the contract with Lifetime Homecare Services for FY 2023 be increased from \$95,000 to \$160,000.

This increase in contract amount does not impact the approved budget for IDD crisis services.

Supporting Documentation:

Contract Amendment Available for Review at the Board Meeting

Recommended Action:

Approve the FY 2023 Lifetime Homecare Services Contract Amendment for IDD Crisis Respite Services for up to \$160,000

Agenda Item: Appoint New Director for the Montgomery Supported Housing, Inc. (MSHI) Board

Board Meeting Date

March 23, 2023

Committee: Business

Background Information:

Ms. Mildred Galbreath has expressed interest in serving as a Director on the Montgomery Supported Housing, Inc. (MSHI) Board for a term that would expire January 2025.

The current Board has four (4) members, which exceeds the minimum requirement, but has expressed interest in having additional members. Ms. Galbreath was recommended by current Board member Sharon Walker.

Supporting Documentation:

None

Recommended Action:

Appoint Ms. Mildred Galbreath to Serve on the Montgomery Supported Housing, Inc. Board for a Term Which Expires January 2025

<p>Agenda Item: Cleveland Building Update</p> <p>Committee: Business</p>	<p>Board Meeting Date</p> <p>March 23, 2023</p>
<p>Background Information:</p> <p>Mike Duncum, Building Consultant for Tri-County, will provide a progress report on the Cleveland Services Facility scheduled for groundbreaking during the summer of 2023.</p>	
<p>Supporting Documentation:</p> <p>Will be provided at the Board meeting.</p>	
<p>Recommended Action:</p> <p>For Information Only</p>	

Agenda Item: 2nd Quarter FY 2023 Quarterly Investment Report

Board Meeting Date

March 23, 2023

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 28, 2023

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	\$1,036.73	\$555,955.44	(\$581.10)
Accrual of Interest Income	\$69,879,816.93	\$79,541,669.04	\$80,818,371.65
Interest and Management Fees Payable	(\$87,542,996.68)	(\$108,601,903.31)	(\$115,913,814.71)
Payable for Investments Purchased	(\$640,000,000.00)	\$0.00	(\$100,000,000.00)
Accrued Expense & Taxes	(\$50,640.24)	(\$31,535.00)	(\$33,415.29)
Repurchase Agreements	\$9,670,213,000.00	\$10,389,891,000.00	\$11,004,321,000.00
Mutual Fund Investments	\$3,609,085,200.00	\$2,765,085,200.00	\$2,425,085,200.00
Government Securities	\$11,424,520,129.78	\$13,274,282,462.74	\$14,155,254,964.14
U.S. Treasury Bills	\$2,116,404,005.57	\$4,604,300,427.15	\$5,093,780,723.10
U.S. Treasury Notes	\$1,688,696,445.24	\$1,243,242,620.63	\$1,068,709,985.03
TOTAL	\$27,851,205,997.33	\$32,248,265,896.69	\$33,612,022,432.82

Book Value for the Period

Type of Asset	Beginning Balance	Ending Balance
Uninvested Balance	\$476.61	(\$581.10)
Accrual of Interest Income	\$56,624,448.52	\$80,818,371.65
Interest and Management Fees Payable	(\$72,462,365.49)	(\$115,913,814.71)
Payable for Investments Purchased	\$0.00	(\$100,000,000.00)
Accrued Expenses & Taxes	(\$24,433.91)	(\$33,415.29)
Repurchase Agreements	\$9,064,748,000.00	\$11,004,321,000.00
Mutual Fund Investments	\$1,794,074,000.00	\$14,162,566,756.20
Government Securities	\$9,809,919,272.64	\$4,055,096,073.87
U.S. Treasury Bills	\$2,291,978,859.55	\$5,094,292,314.06
U.S. Treasury Notes	\$1,688,888,529.99	\$1,068,746,015.81
TOTAL	\$24,633,746,787.91	\$ 33,619,870,646.62

Portfolio by Maturity as of February 28, 2022

1 to 7 days	8 to 90 day	91 to 180 days	181 + days
73.5%	22.6%	1.9%	2.0%

Portfolio by Type of Investments as of February 28, 2022

Treasuries	Repurchase Agreements	Agencies	Money Market Funds
18.2%	32.6%	42.0%	7.2%

SUMMARY INFORMATION

On a simple daily basis, the monthly average yield was 3.98% for December, 4.23% for January, and 4.50% for February.

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

The weighted average maturity of the fund as of February 28, 2023 was 15 days.

The net asset value as of February 28, 2023 was 0.99976.

The total amount of interest distributed to participants during the period was \$115,913,793.32.

TexPool interest rates did not exceed 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 2,762.

Fund 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 2023
 As Of February 28, 2023**

BANK NAME	INTEREST EARNED				
	1st QTR.	2nd QTR.	3rd QTR.	4th QTR.	YTD TOTAL
Alliance Bank - Central Texas CD	\$ -	\$ 315.07			\$ 315.07
First Liberty National Bank	\$ 0.46	\$ 1.19			\$ 1.65
JP Morgan Chase (HBS)	\$ 11,474.99	\$ 18,463.12			\$ 29,938.11
Prosperity Bank	\$ 165.64	\$ 251.90			\$ 417.54
Prosperity Bank CD (formerly Traditon)	\$ 12.51	\$ 13.14			\$ 25.65
TexPool Participants	\$ 290.16	\$ 649.74			\$ 939.90
Total Earned	\$ 11,943.76	\$ 19,694.16			\$ 31,637.92

Agenda Item: Board of Trustees Unit Financial Statements as of February 2023

Board Meeting Date

March 23, 2023

Committee: Business

Background Information:

None

Supporting Documentation:

February 2023 Board of Trustees Unit Financial Statements

Recommended Action:

For Information Only

Unit Financial Statement

FY 2023

February 28, 2023

	February 2023 Budget	February 2023 Actual	Variance	YTD Budget	YTD Actual	Variance	Percent	Budget
Revenues								
Allocated Revenue	\$ 1,927	\$ 1,927	\$ -	\$ 9,635	\$ 9,635	\$ -	\$ 1	\$ 23,125
Total Revenue	\$ 1,927	\$ 1,927	\$ -	\$ 9,635	\$ 9,635	\$ -	\$ 1	\$ 23,125
Expenses								
Insurance-Worker Compensation	\$ 13	\$ 6	\$ 6	\$ 75	\$ 27	\$ 48	\$ 3	\$ 150
Legal Fees	\$ 1,500	\$ -	\$ 1,500	\$ 9,000	\$ 6,000	\$ 3,000	\$ 2	\$ 18,000
Training	\$ 75	\$ -	\$ 75	\$ 450	\$ -	\$ 450	\$ -	\$ 900
Travel - Local	\$ 42	\$ -	\$ 42	\$ 250	\$ -	\$ 250	\$ -	\$ 500
Travel - Non-local mileage	\$ 35	\$ -	\$ 35	\$ 213	\$ 424	\$ (211)	\$ 1	\$ 425
Travel - Non-local Hotel	\$ 217	\$ -	\$ 217	\$ 1,300	\$ 604	\$ 696	\$ 2	\$ 2,600
Travel - Meals	\$ 46	\$ -	\$ 46	\$ 275	\$ -	\$ 275	\$ -	\$ 550
Total Expenses	\$ 1,927	\$ 6	\$ 1,921	\$ 11,563	\$ 7,055	\$ 4,508	\$ 2	\$ 23,125
Total Revenue minus Expenses	\$ (0)	\$ 1,921	\$ (1,921)	\$ (1,928)	\$ 2,580	\$ (4,508)	\$ (1)	\$ -

UPCOMING MEETINGS

April 27, 2023 – Board Meeting

- Approve Minutes from March 23, 2023 Board Meeting
- Community Resources Report
- Consumer Services Report for March 2023
- Program Updates
- Personnel Report for March 2023
- Texas Council Risk Management Fund Claims Summary as of March 2023
- Texas Council Quarterly Board Meeting Update
- Approve Financial Statements for March 2023
- HUD 811 Updates (Cleveland, Montgomery and Huntsville)
- Consumer Foundation Board Meeting Update
- Board of Trustees Unit Financial Statement as of March 2023

May 25, 2023 – Board Meeting

- Longevity Recognitions
- Approve Minutes from April 27, 2023 Board Meeting
- Community Resources Report
- Consumer Services Report for April 2023
- Program Updates
- Personnel Report for April 2023
- Texas Council Risk Management Fund Claims Summary as of April 2023
- Texas Council Quarterly Board Meeting Update
- Approve Financial Statements for April 2023
- Approve FY 2023 Auditor & Solicit Auditor Engagement Letter
- Board of Trustees Unit Financial Statement as of April 2023

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
BCBA	Board Certified Behavior Analyst
BJA	Bureau of Justice Administration
BMI	Body Mass Index
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 Fatality Review Team
CHIP	Children's Health Insurance Program
CIRT	Crisis Intervention Response Team
CISM	Critical Incident Stress Management
CMH	Child Mental Health
CNA	Comprehensive Nursing Assessment
COC	Continuity of Care
COPSD	Co-Occurring Psychiatric and Substance Use Disorders
COVID-19	Novel Corona Virus Disease - 2019
CPS	Child Protective Services
CPT	Cognitive Processing Therapy
CRCG	Community Resource Coordination Group
CSC	Coordinated Specialty Care
CSHI	Cleveland Supported Housing, Inc.
CSU	Crisis Stabilization Unit
DADS	Department of Aging and Disability Services
DAHS	Day Activity and Health Services Requirements
DARS	Department of Assistive & Rehabilitation Services
DCP	Direct Care Provider
DEA	Drug Enforcement Agency
DFPS	Department of Family and Protective Services
DO	Doctor of Osteopathic Medicine
DOB	Date of Birth
DPP-BHS	Directed Payment Program - Behavioral Health Services

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
IP	Implementation Plan
IPC	Individual Plan of Care
IPE	Initial Psychiatric Evaluation
IPP	Individual Program Plan
ISS	Individualized Skills and Socialization
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
MAT	Medication Assisted Treatment
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 on Mental Illness
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
PHP-CCP	Public Health Providers - Charity Care Pool
PNAC	Planning Network Advisory Committee
PPB	Private Psychiatric Bed
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

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 Kids	State of Texas Reform-Kids (Managed Medicaid)
SUD	Substance Use Disorder
SUMP	Substance Use and Misuse Prevention
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
TCOOMMI	Texas Correctional 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
TMHP	Texas Medicaid & Healthcare Partnership
TP	Treatment Plan
TRA	Treatment Adult Services (Substance Use Disorder)
TRR	Texas Resilience and Recovery
TxHmL	Texas Home Living
TRY	Treatment Youth Services (Substance Use Disorder)
TVC	Texas Veterans Commission
TWC	Texas Workforce Commission
UM	Utilization Management
UW	United Way of Greater Houston
WCHD	Walker County Hospital District
WSC	Waiver Survey & Certification
YES	Youth Empowerment Services
YMHFA	Youth Mental Health First Aid
YPS	Youth Prevention Services
YPU	Youth Prevention Selective

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