

LAKES REGIONAL COMMUNITY CENTER

REGULAR MEETING OF THE BOARD OF TRUSTEES

WEDNESDAY, JANUARY 26, 2022, 5 PM

THE MEETING WILL TAKE PLACE IN PERSON AND
VIA ZOOM AND IS AVAILABLE TO THE PUBLIC:

You are invited to the LRCC Board of Trustees Meeting – January 26, 2022.

LRCC Board of Trustee's Meeting - January 26th, 2022

Time: 5:00 PM

Location for in-person attendance: Sulphur Springs MH Clinic

Join Meeting by Zoom:

<https://us06web.zoom.us/j/87330425370?pwd=aGI1a045QUNkNW1iRVYvT1Y5TUhYUT09>

Meeting ID: 873 3042 5370

Passcode: 759924

Join Meeting by Phone (Audio Only):

Dial: 346-248-7799

Meeting ID: 873 3042 5370

Passcode: 759924

AGENDA

AGENDA NUMBER	TOPIC
---------------	-------

01.01.22

CALL TO ORDER

- Roll Call / Introduction of Guest.

01.02.22

APPROVAL OF MINUTES

- Regular Board Meeting Minutes of December 08, 2021

01.03.22

COMMENTS FROM CITIZENS

Presentations are limited to three minutes per person and must pertain to an agenda item. The Board reserves the right to limit the number of speakers and/or the length of comments on any topic. Citizens wishing to address the Board must register prior to the start of the meeting.

01.04.22

COMMITTEE MEETING REPORTS

NA

01.05.22

RECOMMENDATIONS FOR APPROVAL

Motion to approve Audit Report for FY-2021 as presented by Todd Pruitt of Petillo, Brown and Hill.

01.06.22

EXECUTIVE DIRECTOR REPORT (John Delaney)

- 1115 Transformation Waiver Status Update
- COVID-19 Response
- Kronos UKG Status
- Texas Council Update
- Provider Relief Funding for Rural Providers (ARP Phase-4)
- East Texas Behavioral Health Network (ETBHN)

LRCC Board of Trustees Meeting Agenda

- 01.07.22 FISCAL REPORT** (*Erwin Hancock*)
- Motion to Accept Center’s Financial Statement for Period(s) Ending: November 202.
 - Motion to Accept Center’s Quarterly Investment Report 1st Quarter.
- 01.08.22 MENTAL HEALTH SERVICES REPORT** (*James Williams*)
- COVID Still Impacting
 - New Expansion CCBC Grant Not Posted
 - Focus on Peers
 - Substance Use Disorder Coordinator – Mat Cook, LCDC, LPC
- 01.09.22 INTELLECTUAL & DEVELOPMENTAL DISABILITIES REPORT** (*Laurie White*)
- Training Centers
 - Employment Services
 - PASRR
 - HCS/ICF Group Homes
 - Audits/Surveys
 - Telehealth
 - Outpatient Biopsychosocial Intervention Team (OBI)
 - CMHC Grant
 - Staff Vacancies
 - Concerns
 - Announcements
- 01.10.22 QUALITY MANAGEMENT/CONTRACTS REPORT** (*Kellie Walker*)
- **Motion to approve FY22-23 Combined QM Plan for IDD, MH, & SUD Programs.**
 - Contracts/Network Development
 - Planning
 - Rights/Abuse, Neglect, and Exploitation Allegations
 - QM MH, NTBHA & Substance Abuse
 - IDD
- 01.11.22 HUMAN RESOURCES REPORT** (*Jessica Ruiz*)
- Staffing Issues
 - Compensation & Benefits
- 01.12.22 ADJOURNMENT**

**Lakes Regional Community Center
Upcoming Board-Related Meetings & Events**

Regular Meeting of the Board of Trustees
February 23, 2022
4804 Wesley Street
Greenville, Texas

AGENDA ITEM NO. 01.02.22

Approval of Minutes

RECOMMENDATIONS FOR APPROVAL:

- Motion to approve prior Board of Trustees meeting minutes.

Rationale:

Discussion and Approval of Regular Board Meeting Minutes of December 2021 as presented.

LAKES REGIONAL COMMUNITY CENTER
REGULAR MEETING OF THE BOARD OF TRUSTEES
WEDNESDAY, DECEMBER 8, 2021, 5PM
BOARD MINUTES

AGENDA
NUMBER

TOPIC

12.01.21

CALL TO ORDER

The December 08, 2021 regular meeting of the Lakes Regional Community Center Board of Trustees called to order by Board Chairperson, Tom Brown at 5:01 PM with a quorum present by Zoom. Chairperson asked for Roll Call.

Members Present (In Person/Zoom):

In Person:

Tom Brown, Hunt County, Chairperson
Steve Earley, Lamar County
E. P. Pewitt, Morris County

Margaret Webster, Kaufman County
Dana Sills, Hopkins County

Zoom/Phone:

Lisa Heine, Ellis County
Shae Green, Rockwall County
Frances Neal, Titus County

Jan Brecht-Clark, Ph.D., Delta County
Marti Shaner, Navarro County
Sheriff Ricky Jones, Franklin County

Members Absent: Carrie Hefner, Camp County

Vacant Seat(s): NA

Guest(s): NA

Ex Officio Members Present: NA

Ex Officio Members Absent: NA

Management Staff Present: John Delaney, Larry Jonczak, James Williams, Erwin Hancock, Kellie Walker, Jessica Ruiz,

Management Staff Zoom: Laurie White

Management Staff Absent: NA

Board Liaison/Recording Secretary: Judy Dodd, Board Liaison/Recording Secretary

12.02.21

APPROVAL OF MINUTES

Recommended Board Action:

- **Approval of Minutes of October 27, 2021 meeting.**

Rational:

Chairperson asked members if they had reviewed the minutes and if there were any corrections or additions. With no corrections or additions, Chairperson asked for motion to approve. Motion made by E. P. Pewitt to approve and seconded by Steve Earley. A sign of aye approved minutes unanimously.

CLOSURE

12.03.21

COMMENTS FROM CITIZENS

- NA

CLOSURE

12.04.21

COMMITTEE MEETING REPORT

- NA
- CLOSURE**

12.05.21

RECOMMENDATIONS FOR APPROVAL

- Review and take possible action on Resolution to Change Authorized Bank Accounts Signer.

Rationale:

- Erwin explained the necessary change of Signer for the Bank Accounts. Chair asked for motion to approve Resolution. Dana Sills made motion and seconded by E. P. Pewitt. Motion approved unanimously by a sign of aye.

CLOSURE

12.06.21

EXECUTIVE DIRECTOR REPORT (*John Delaney*)

Recommended Board Action:

- None: Information only

Rationale:

Discussion on the following:

- **1115 Transformation Waiver Update:**
 - November 15, 2021, the Centers for Medicare and Medicaid Services (CMS) approved the Directed Payment Program for Behavioral Health Services (DPP BHS).
 - Program to help in easing the transition from the current DSRIP funding we currently receive.
 - Program was retrospective to last September.
- **COVID Response:**
 - Continuing to follow current CDC guidelines.
 - Cases of COVID exposure seem to have gone down
 - CMS' vaccine requirements for health care settings has mainly affected our IDD ICF residential program. Staff are required to either be vaccinated or claim an exception by January 6th.
- **Rotation of Ex-officio County Sheriff Representation:**
 - Sheriffs from Delta County and Hopkin County have been contacted and have agreed to serve as Ex-Officio Board members for the next term.
- **Texas Council Update:**
 - Major focus is to understand how the Public Healthcare Provider – Charity Care Pool will be implemented.
- **Provider Relief Funding for Rural Providers (ARP Phase-4)**
 - November 23rd, HRSA began distributing funds to health care providers who serve rural Medicaid, Children's Health Insurance Program, and Medicare Patients.
 - Health care organizations can use these payments to make up for the lost revenues and increased expenses caused by the pandemic.
- **East Texas Behavioral Health Network (ETBHN)**
 - No update at this time.

CLOSURE

12.07.21 FISCAL REPORT (Erwin Hancock)

Recommended Board Action:

- Motion to Accept Center's Financial Statement for Period(s) Ending:
 - October, 2021

Rationale:

- **Erwin presented the Center's financial reports for the month(s) of October 2021.**
 - Noted: Positive for month.
 - Noted: 2% over revenue of prior year

Chairperson asked if any questions. With no further discussion, Chairperson asked for motion to approve financials for the month(s) of October 2021. Jan Brecht-Clark made motion to approve with second by Marti Shaner. Financial were approved unanimously sign of aye.

CLOSURE

12.08.21 MENTAL HEALTH SERVICES REPORT (James Williams)

Recommended by Board Action:

None: Information only

Rationale:

- **Via Hope Grant**
 - Focus is on the Via Hope Grant and the upcoming release of the CCBHC Expansion Grants at the end of December.
- **Private Psychiatric Beds (PPB)**
 - Still waiting for contract for Private Psychiatric Beds in Tyler but discussion moving forward with draft contract in their legal department.
- **COVID-19**
 - COVID19 and the new Omicron Variant having an impact.
- **Behavioral Health Admin Clinic Support Staff**
 - Mental Health Clinic Administrative Staff pleased with salary increase and Career Ladder.

CLOSURE

12.09.21 INTELLECTUAL & DEVELOPMENTAL DISABILITIES REPORT (Laurie White)

Recommended by Board Action:

None: Information only

Rationale:

- **Training Centers:**
 - All Training Centers, with the exception of Waxahachie, are now open 5 days a week
- **Employment Services:**
 - TWS has referred 2 new individuals
- **EVV:**
 - EVV Provider workgroup will be December 9, 2021.

- **PASRR:**
 - Procedures varying in relation to COVID-19 vaccinations
- **Waiver and ICF group homes:**
 - ICF has one (1) resident in pre-placement status.
 - Most Group Home individuals have received their COVID 19 Booster and Flu Vaccines for the year.
- **Audits/Surveys:**
 - Zero citations were noted for both waivers for a two-year period.
- **Telehealth:**
 - Coordinator will be covering the IFFP Clinics for Mt Pleasant, Paris and Sulphur Springs until newly vacated position is filled in Paris.
- **Outpatient Biopsychosocial Intervention (OBI): (Serves Dual Diagnosed IDD/MH):**
 - OBI project is scheduled to submit a deliverable report to HHSC, December 15, 2021.
 - 27 individuals are receiving OBI Services.
- **CMHC Grant:**
 - IDDP Telehealth has 2 positions as part of the grant.
- **Vaccines:**
 - Group Home staff vacancies are still in high demand in the South and East Regions.
 - OBI Collaborative Care Coordinator vacant, caseload may be distributed.

CLOSURE

12.10.21

QUALITY MANAGEMENT/CONTRACTS REPORT (Kellie Walker)

Recommended by Board Action:

None: Information only

Rationale:

- **Contracts/Network Development**
 - Received a notice to proceed on November 2021 for the COVID-19 Supplement Grant Program contract.
- **Planning**
 - Needs Assessment Surveys were distributed to Community Stakeholders and Individual/Family Members to identify needs in the community, gaps and/or barriers to services.
 - PNAC – Meeting was held October 19, 2021.
 - RPNAC meeting was held November 17, 2021.
 - a. Looking for a board approved member for IDD representation to keep equal representation of IDD & MH
 - b. Hospitalization Survey – need for more state hospital beds.
- **Rights / Abuse, Neglect, & Exploitation Allegations**
 - Rights Violation Allegations
 - a. SUD: 1 Unconfirmed (Bonham)
 - b. IDDA: 1 Unconfirmed (IDD Authority)
 - c. MH GR 1 Unconfirmed (Sulphur Springs MH)
 - d. MH NTBHA: 4 Unconfirmed (3 Greenville MH, 1 Rockwall MH)
 - APS Investigation: 2- Terrell Group Home Results: Pending (1 from April)
- **QM MH, NTBHA & Substance Abuse**

- Lakes Regional is held harmless for performance measures and outcomes until further notice due to COVID 19.
- Optum Audit: Optum will conduct a focused audit over the performance improvement plan in 90 days.
- Yes Waiver Corrective Action Plan: Lakes submitted a corrective action plan to HHSC to address service providers and the absence of youth enrolled in Yes Waiver on November 1, 2021.
- NTBHA Mystery Caller: Five findings – a corrective action plan due to NTBHA December 17, 2021.
- PEER Review: 1 chart scored below 70% of all areas/
- **IDD**
 - IDD Service Target: Held harmless for performance measures and outcomes until further notice due to COVID-19
 - HHSC Waiver and Certification Survey: Lakes Regional received zero findings for both HCS and TxHmL.

CLOSURE

12.11.21 HUMAN RESOURCES REPORT (Jessica Ruiz)

Recommended by Board Action:

None: Information only

Rationale:

- **Staffing issues**
 - 455 authorized FTEs and 394 employees in September
 - Filled sixteen positions
 - Three separations
 - Recruitment – participated in Job Fair
 - 16 classes with a total of 63 participants.
- **Employee Compensation and Benefits:**
 - COVID exposures during the month of October were lower.
 - COVID-19: 2 staff tested positive – back at work
 - Started the year with one large claims from which one exceeded the stop loss.

CLOSURE

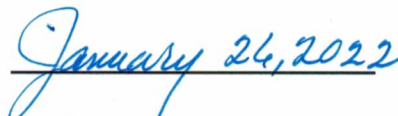
12.12.21 ADJOURNMENT

Chairperson ask for any other matter to discuss if not for motion to adjourn. E. P. Pewitt made motion to adjourn and seconded by Steve Earley. With no further discussion motion carried unanimously by a sign of aye.

ATTEST:



Margaret Webster, Board Secretary



DATE:





AGENDA ITEM NO. 01.03.22

Citizens' Comments

RECOMMENDATIONS FOR APPROVAL:

Public comment(s) may be addressed to the Board of Trustees by community members and/or any interested parties.

Rationale:

Presentations are limited to three (3) minutes per person. The Board reserves the right to limit the number of speakers and/or the length of comment on any topic. Citizens wishing to address the Board must register prior to the start of the meeting and any comments should pertain to an agenda item.

AGENDA Item No: 01.06.21
Executive Director's Report:

Recommended Board Action:
None: For Information Only

Rational:

Executive Director Report:

1. 1115 Transformation Waiver Update:

As noted at our last meeting on November 15, 2021, the Centers for Medicare and Medicaid Services (CMS) approved the Directed Payment Program for Behavioral Health Services (DPP BHS). This is one of the two 1115 Waiver programs that was supposed to start in September and help in easing the transition from the current DSRIP funding we currently receive. With this approval, we started receiving our first payments in January and are familiarizing ourselves with how to reconcile them against our projected estimates. The DSRIP extension for next year is currently on hold as the state and federal Medicaid offices have reached an impasse on issues connected to the hospital system method of financing their local match requirements. HHSC is holding its application for the extension until a solution can be determined.

2. COVID Response:

As with other Centers, we have seen an upsurge of new infections among both staff and clients. Most staff are experiencing mild symptoms but still having to be out for the recommended 5-day period. The rate of infections has again caused closures of some day-habilitation facilities and coverage shortages in residential programs. Another development occurred when the Supreme Court upheld CMS' vaccine requirements for health care workers, which has affected our IDD ICF residential program. Those staff have all now been vaccinated.

3. Kronos Related Issue

Our center was one of many business and municipalities that were affected by the Kronos – UKG workforce scheduling and payroll software ransomware attack. In our case, the impact was limited since we were in the process of transitioning to their upgraded platform, UKG-Pro which was unaffected by the attack. However, it did delay our closing of the December financials. Those will be reviewed at the next Board meeting.

4. Texas Council Update:

The Executive Directors Consortium and the Health Opportunities Workgroup are met last week and continue to work on the 1115 Waiver transition. A major focus is to understand how the Public Health care Provider – Charity Care Pool will be implemented and to review the managed care payments made through the directed payment program.

5. Provider Relief Funding Awards for Rural Providers (ARP Phase-4)

On November 23rd, The Federal Office of Rural Resources Services Administration (HRSA) began distributing \$7.5 billion in American Rescue Plan (ARP) Rural payments to health care providers who serve rural Medicaid, Children's Health Insurance Program, and Medicare patients. Health care organizations can use these payments to make up for the lost revenues and increased expenses caused by the pandemic. Lakes Regional was awarded 518,000 and has 90 days to attest our agreement in the terms and conditions for the payment. Since our last meeting we also received an additional 78,000 in Phase IV funding that requires the same attestation agreement.

6. East Texas Behavioral Health Network (ETBHN):

No update at this time.

AGENDA ITEM NO. 01.07.22
Fiscal Reports

RECOMMENDATIONS FOR APPROVAL:

- Center's financial statement for the month(s) of November 2021
- Center's 1st Quarterly Investment Report

Rationale:

- Review and take action to approve Center's financial statement for the month(s) of November 2021.
- Review and take action to approve Center's 1st Quarterly Investment Report.

Lakes Regional Community Center
Financial Report
For the Month of November 2021

Erwin Hancock
Chief Financial Officer

January 26, 2021

**Lakes Regional Community Center
Financial Report Outline**

- | | | |
|------|--------------------------------------|-----------|
| I. | Financial Summary | Page 1 |
| II. | Balance Sheet | Page 2 |
| III. | Income Recap by Division | Page 3 |
| | Comparative Income Statement | Pages 4-5 |
| | Statement of Revenues & Expenditures | Page 6 |
| IV. | Related Data | Page 7 |

Lakes Regional Community Center
 Financial Summary for the Month Ending November 30, 2021

Profit and Loss Summary

	Current Month	Year to Date
Revenues	\$3,292,271	\$9,655,130
Expenses	\$3,155,252	\$9,276,110
Net Income	\$137,019	\$379,020

Balance Sheet Summary

	Current YTD as of November 30, 2021	Last YTD as of November 30, 2020	Year to Year Change
Total Assets	\$32,903,120	\$34,250,880	\$ (1,347,760)
Total Liabilities	\$7,759,152	\$12,166,182	\$ (4,407,030)
Fund Balance	\$25,143,968	\$22,084,698	\$ 3,059,270

Lakes Regional Community Center
Balance Sheet

	As of 11/30/2021	As of 11/30/2020	Net Change
Current Assets			
Cash	\$ 16,502,048	\$ 12,997,954	\$ 3,504,094
Accounts Receivable	4,575,017	4,486,080	88,937
Other Current Assets	1,037,964	400,505	637,459
Total Current Assets	\$ 22,115,029	\$ 17,884,539	\$ 4,230,490
Long-Term Assets			
Fixed Assets (net of depreciation)	\$ 7,843,054	\$ 7,985,910	\$ (142,856)
Other Long-Term Assets	2,945,037	8,380,431	(5,435,394)
Total Long-Term Assets	\$ 10,788,091	\$ 16,366,341	\$ (5,578,250)
Total Assets	\$ 32,903,120	\$ 34,250,880	\$ (1,347,760)
Current Liabilities			
Accounts Payable	\$ 912,142	\$ 739,962	\$ 172,180
Accrued Expenses	763,388	895,031	(\$131,643)
Short-term Debt	3,138,585	2,150,758	987,827
Total Current Liabilities	\$ 4,814,115	\$ 3,785,751	\$ 1,028,364
Long-term Debt	\$ 2,945,037	\$ 8,380,431	\$ (5,435,394)
Total Long-Term Debt	\$ 2,945,037	\$ 8,380,431	\$ (5,435,394)
Total Liabilities	\$ 7,759,152	\$ 12,166,182	\$ (4,407,030)
Investment In General Fund Assets	\$ 7,843,054	\$ 8,173,410	\$ (330,356)
Fund Balance at Beginning of Year	17,300,914	13,911,289	3,389,625
Total Equities and other Credits	\$ 25,143,968	\$ 22,084,699	\$ 3,059,269
Total Liabilities, Equities and other Credits	\$ 32,903,120	\$ 34,250,881	\$ (1,347,761)

Income Statement Recap by Division
as of November 30, 2021

Division	Current Month	Year to Date
MH	\$ 13,081	\$ 219
Mental Health First Aid & Outreach	\$ 5,000	\$ 5,000
Hospitality House	\$ 25,785	\$ 123,203
IDD	\$ 24,910	\$ 24,910
ECT	\$ 18,890	\$ 18,890
Administration	\$ 0	\$ 1,169
Expanding Fundraising	\$ 116,175	\$ 338,477
Telemedicine Services (9 locations)	\$ 2,120	\$ 2,120
Medical Prescriber Services	\$ 2,120	\$ 2,120
CCBHC/MHC/AMS/HA Grants	\$ 210	\$ 210

Lakes Regional Community Center
Comparative Income Statement for the Month ended November 30, 2021

	<u>11/30/2021</u>	<u>11/30/2020</u>	Variance	Var %
Revenues				
General Revenue IDD	\$242,933	\$211,488	\$31,445	15%
General Revenue MH	\$696,484	\$672,802	\$23,682	4%
Early Childhood Intervention Revenue	\$71,288	\$63,774	\$7,514	12%
1115b Waiver Revenue	\$568,585	\$561,188	\$7,397	1%
NTBHA Revenue	\$209,199	\$199,390	\$9,809	5%
Medicaid Revenue	\$266,770	\$303,949	(\$37,179)	-12%
Medicare Revenue	\$2,296	\$2,784	(\$488)	-18%
HCS Revenue	\$412,346	\$369,437	\$42,909	12%
Managed Care Revenue	\$106,083	\$92,710	\$13,373	14%
Private Insurance	\$26,610	\$9,348	\$17,262	185%
Client Fees	\$3,981	\$2,589	\$1,392	54%
Other Revenue	\$685,696	\$557,572	\$128,124	23%
Total Revenues	\$3,292,271	\$3,047,031	\$245,240	8%
Expenses				
Salaries and Wages	\$1,613,459	\$1,415,633	\$197,826	14%
Employee Benefits	\$542,129	\$492,536	\$49,593	65%
Staff Training	\$4,251	\$2,572	\$1,679	65%
Furniture and Equipment	\$1,344	\$3,755	(\$2,411)	-64%
Maintenance and Repairs	\$34,415	\$18,886	\$15,529	82%
Utilities	\$28,133	\$47,906	(\$19,773)	-41%
Client Support	\$5,292	\$5,550	(\$258)	-5%
Supplies	\$26,234	\$23,665	\$2,569	11%
Vehicle Maintenance	\$3,275	\$1,910	\$1,365	71%
Insurance Costs	\$29,213	\$29,677	(\$464)	-2%
Debt Service	\$27,801	\$49,628	(\$21,827)	-44%
Other Expenses	\$839,705	\$767,780	\$71,925	9%
Total Expenses	\$3,155,252	\$2,859,498	\$295,754	10%
Net Surplus/(Deficit)	\$137,019	\$187,533	(\$50,514)	-27%

Lakes Regional Community Center
Comparative Income Statement for the period ended November 30, 2021

	<u>YTD ended</u> 11/30/2021	<u>YTD ended</u> 11/30/2020	Variance	Var %
Revenues				
General Revenue IDD	\$727,448	\$642,388	\$85,060	13%
General Revenue MH	\$2,072,441	\$1,995,868	\$76,573	4%
Early Childhood Intervention Revenue	\$225,013	\$271,027	(\$46,014)	-17%
1115b Waiver Revenue	\$1,705,755	\$1,683,564	\$22,191	1%
NTBHA Revenue	\$627,927	\$678,533	(\$50,606)	-7%
Medicaid Revenue	\$799,173	\$915,930	(\$116,757)	-13%
Medicare Revenue	\$8,668	\$8,897	(\$229)	-3%
HCS Revenue	\$1,233,708	\$1,149,323	\$84,385	7%
Managed Care Revenue	\$316,896	\$303,900	\$12,996	4%
Private Insurance	\$49,647	\$22,650	\$26,997	119%
Client Fees	\$9,416	\$7,070	\$2,346	33%
Other Revenue	\$1,879,040	\$1,577,332	\$301,708	19%
Total Revenues	\$9,655,130	\$9,256,482	\$398,648	4%
Expenses				
Salaries and Wages	\$4,782,123	\$4,356,506	\$425,617	10%
Employee Benefits	\$1,639,799	\$1,497,785	\$142,014	9%
Staff Training	\$13,466	\$7,898	\$5,568	70%
Furniture and Equipment	\$9,893	\$10,215	(\$322)	-3%
Maintenance and Repairs	\$92,596	\$37,157	\$55,439	149%
Utilities	\$91,705	\$98,082	(\$6,377)	-7%
Client Support	\$15,929	\$8,737	\$7,192	82%
Supplies	\$74,170	\$75,439	(\$1,269)	-2%
Vehicle Maintenance	\$13,108	\$7,927	\$5,181	65%
Insurance Costs	\$82,472	\$89,030	(\$6,558)	-7%
Debt Service	\$83,404	\$162,244	(\$78,840)	-49%
Other Expenses	\$2,377,446	\$2,294,775	\$82,671	4%
Total Expenses	\$9,276,110	\$8,645,795	\$630,315	7%
Net Surplus/(Deficit)	\$379,020	\$610,687	(\$231,667)	38%

Lakes Regional Community Center
Statement of Revenues and Expenditures
For the Period Ending November 30, 2021

<u>Revenues</u>	<u>Sep-21</u>	<u>Oct-21</u>	<u>Nov-21</u>	<u>Total</u>
Local	\$ 56,420	\$ 86,621	\$ 85,336	\$ 228,377
State Programs	1,626,547	1,642,336	1,608,680	4,877,562
Federal Programs	1,217,075	1,310,044	1,386,628	3,913,746
Interest Income	2,403	2,686	2,429	7,518
North Texas BH Assoc	209,353	209,375	209,199	627,927
	0			0
TOTAL REVENUES	\$ 3,111,798	\$ 3,251,062	\$ 3,292,271	\$ 9,655,130
<u>Expenditures</u>				
Current:				
Salaries & Wages	\$ 1,622,659	\$ 1,546,004	\$ 1,613,459	\$ 4,782,123
Employee Benefits	556,115	\$541,556	542,129	1,639,799
Other Operating Expenses:				0
Client Respite	4,474	\$12,043	5,291	21,807
HCS Contract	112,196	\$114,830	111,472	338,498
Consult/Pro Svcs - Internal	12,433	\$13,810	13,193	39,436
Nursing Contract - RK				0
Consult/Pro Svcs - External	355,731	\$349,584	370,709	1,076,024
Contracts with Other Orgs-Ext				0
ICF/MR Quality Assurance Fees	6,614	\$6,927	6,721	20,261
TXHML Contracts	9,646	\$10,941	10,007	30,595
Contracted Lab Services	676	\$1,620	1,503	3,800
Staff Development/Training	4,743	\$4,472	4,251	13,466
1115 Projects Certif./Training Fees				0
Non-Clinical Contracts with Others	4,464	\$6,450	4,111	15,025
Pharmaceuticals/Supplies	25,699	\$20,812	24,781	71,292
Atypical Meds	2,354	\$5,272	3,015	10,641
Patient Asst Program/Filling Fees	1,500	\$1,500	1,500	4,500
Training and Travel	2,029	\$23,599	23,884	49,512
Consumable Supplies	23,139	\$24,796	26,234	74,170
1115 Residential Equip/Supplies				0
Building Capital Outlay		\$21,664	9,000	30,664
Capital Outlay Projects				0
Furniture/Equipment over \$5,000				0
Computer Capital Outlay	4,292	\$4,292	4,292	12,876
Furniture/Equipment under \$5,000	7,667	\$882	1,344	9,893
Copier Equipment Rental	12,980	\$9,435	6,679	29,093
Computer Equipment Under \$5,000	18,145	\$8,824	15,980	42,949
Other Monthly Expenses	8,513	\$9,170	12,378	30,061
Computer Software Support Fees	14,418	\$4,171	10,872	29,461
Computer Software Fees for HR System	1,000	\$6,528	0	7,528
Bad Debts	0			0
Building Rent, Repair, Maintenance	112,042	\$141,302	162,038	415,381
Building Rent to Other Programs	0			0
Vehicle Operating Expense	4,175	\$5,659	3,275	13,108
Vehicle Fuel Costs	7,676	\$6,991	7,593	22,260
Non-Client Utilities	19,572	\$44,000	28,133	91,705
Telecommunications	25,122	\$19,219	26,975	71,317
Data Connect/Internet Access	0	\$14,910	7,429	22,339
Crisis Hotline Answering Svc	2,500	\$2,500	2,500	7,500
Insurance	26,629	\$26,629	29,213	82,472
Client Support Costs	5,958	\$4,679	5,292	15,929
Peer Training and Support	0			0
Client Reimbursable Services	5,315	\$12,274	4,202	21,791
NTBHA Supported Housing	4,650	\$3,448	4,151	12,249
Debt Service	27,801	\$27,801	27,801	83,404
Interest on PPP Loan	0			0
COVID-19 Expenses	704	\$328	933	1,965
ECI Client Support Costs		\$140		140
DSRIP Audit Costs				0
Expending Fund Raising Funds	(169)			(169)
Program Indirect				0
LRMHMRC Board Expenses	280	\$14	80	375
Expending Red River Funds				0
Expending Empowerment Funds				0
ECI In-Kind Volunteers				0
Service Costs Unallowable	2,978	\$5,064	22,830	30,872
Total Other Operating Expenses	877,944	\$976,580	999,664	2,854,188
TOTAL EXPENDITURES	3,056,718	\$3,064,140	3,155,252	9,276,110
Excess (deficiency) of revenues over expenditures	\$ 55,080	\$ 186,922	\$ 137,019	\$ 379,021

Lakes Regional Community Center
 FY22 Aged Accounts Receivable
 NOVEMBER, 2021

Accounts Receivable Description	Amount	NOV	OCT 30 Days	SEP 60 Days	AUG 90 Days	Jul & prior 120 +
MAC Adm Claim	773,302.31	77,169	77,169	77,169	74,507	467,288
FY21 3rd Qtr (Apr-Jun) - \$392,781 (invoiced)						
FY21 4th Qtr (Jul-Aug) - \$226,183 (accrual)						
FY22 1st Qtr (Oct-Dec) - \$154,338 (accrual)						
NTBHA:						
Substance Abuse	3,449.04	3,449	-	-	-	-
ACT - add'l billed svcs	2,200.00	-	2,200	-	-	-
	291,058.21	240,373	8,052	3,541	10,062	29,030
Medicaid	3,237.78	2,917	321	-	-	-
Medicare **	8,264.32	6,855	1,385	25	-	-
Private Insurance **	951.19	951	-	-	-	-
Chip **						
MANAGED CARE:						
Amerigroup	28,266.45	28,218	48	-	-	-
Superior (Cenpatico)	27,232.66	26,593	268	93	-	279
Optum	17,655.46	16,841	326	489	-	-
Cigna	11,554.31	11,515	40	-	-	-
Texas Childrens Plan	1,275.56	1,276	-	-	-	-
Beacon	8,381.33	8,157	50	20	20	135
Molina	18,106.30	17,980	127	-	-	-
Driscoll Health	19.83	20	-	-	-	-
Aetna Better Health	6,508.91	1,769	300	-	-	4,440
Texas Home Living - North	13,651.06	13,651	-	-	-	-
Texas Home Living - South	7,997.79	7,998	-	-	-	-
HCS - North	270,590.97	270,591	-	-	-	-
HCS - South	89,288.66	89,289	-	-	-	-
Reimbursable Svcs-TxHml North & South	6,827.33	1,627	2,549	1,097	527	1,027
Reimbursable Svcs-HCS North	22,660.41	3,938	6,415	2,905	5,979	3,424
Reimbursable Svcs-HCS South	3,597.90	1,170	374	291	334	1,429
HCS Rm/Brd	723.00	-	-	723	-	-
ICF Residential Homes	131,499.37	122,198	9,301	-	-	-
Block Grant/TANF-Title XX Gen Revenue	71,105.73	23,702	23,702	23,702	-	-
Block Grant Supp Housing						
CCBHC Samsha Grant	142,966.68	142,967	-	-	-	-
CMHC Samsha Grant	42,057.64	42,058	-	-	-	-
Supported Employment						
Day Hab Billings (Private Providers)	21,665.04	10,955	5,272	1,461	3,970	8
1048 IDD Billed Svcs	9,111.36	5,189	3,922	-	-	-
ECI Grant Revenue	210,936.83	71,148	75,040	-	64,749	-
ECI Respite	700.00	140	-	-	560	-
ECI Priv Ins	16,812.88	9,645	4,028	1,640	1,225	275
ECI Medicaid	33,156.42	32,807	349	-	-	-
ECI Managed Care	66,342.34	43,429	12,494	3,840	1,635	4,945
ECI Chip	204.15	-	-	-	-	204
A/R Other Employees						
A/R Employee Insurance (Cobra)	806.10	175	130	502	-	-
TCOOMMI GRANT - \$135,390.27	95,220.47	16,800	25,582	28,236	24,602	-
TCOOMMI GRANT - purchase 3 Vehicles	40,169.80	-	-	-	-	40,170
TDCJ Contract-Greenville	26,207.05	9,012	6,670	6,809	3,716	-
TDCJ - Sherman/Bonham/Paris	72,202.45	23,395	15,508	16,978	16,321	-
Fannin County Drug Court	2,500.00	2,500	-	-	-	-
Grayson County Drug Court						
Titus County Drug Court	450.00	450	-	-	-	-
DSHS Region 3	14,830.06	14,830	-	-	-	-
DSHS Region 4	16,787.42	16,787	-	-	-	-
DSHS MHFA Outreach	10,381.62	5,325	5,056	-	-	-
ICF Upper Payment Limit	141,477.01	30,895	30,895	30,895	24,396	24,396
SAC Prog -Hunt County	1,917.86	1,918	-	-	-	-
ECC - (Enhanced Comm Coord)	33,229.45	15,668	17,481	-	80	-
Pharmacy Rental Income						
Comm Education (Curt Pitton)	9,489.75	4,946	4,544	-	-	-
1115 Waiver Fed Share **accrual	1,705,755.00	568,585	568,585	568,585	-	-
Misc Revenue - 1370-1200 - \$40,233.46						
**Phly.com ins overpymt	115.46	115	-	-	-	-
** Retirement Forfeiture Balance (08/31)	28,696.75	-	-	28,697	-	-
**Spectrum/TW Book Credits - Grnvl	1,310.08	-	1,310	-	-	-
**FY21 WC Settleup	9,023.75	-	-	-	9,024	-
** AT&T Grnvl Phone	1,087.42	-	-	-	1,087	-

FY22

Balance Due

4,575,016.72

GL bal
4,575,016.72

bal ck

Center's Quarterly
Investment Report 1st Quarter
Ending November, 2021

**Lakes Regional Community Center Quarterly Investment Report
For the 3 Months Ending November 30, 2021**

Particulars		Amount
Beginning Balance September 1, 2021:		
	TexPool	\$ 3,920,582
	Certificate of Deposit	\$ 1,034,738
	Business Star A/C	\$ 8,292,622
	Omaha Res. Savings	\$ 8,261
	Total Sept. 1, 2021	\$13,562,203
Ending Balance November 30, 2021:		
	TexPool	\$ 3,920,912
	Certificates of Deposit	\$ 1,034,974
	Business Star A/C	\$ 10,416,695
	Omaha Res. Savings	\$ 8,261
	Total August 31, 2021	\$15,380,842
Net Change		\$ 1,818,639

The market value and the book value of our fund in TexPool are the same. The aforementioned funds are available upon demand and thus do not have a maturity date. Lakes investments include 2 certificates of deposit that pay interest at the rate of 0.40%. Lakes, additionally earns 0.40% interest on its business investment account at the American National Bank.

Lakes Regional Community Center's investment portfolio is in compliance with the Lakes Regional Community Center Investment and Cash Management Policy 4.07 and is in compliance with the Public Funds Investment Act.

Respectfully submitted,

Erwin Hancock
Chief Financial Officer
Investment Officer

Recommended Board Action:
None. Informational purposes only.

Rationale:

1. COVID Still Impacting

2. New Expansion ^{HB 1231} CCBHC Grant Not Posted *Capacity Expansion*

3. Focus on Peers

4. Substance Use Disorder Coordinator – Matt Cook, LCDC, LPC

AGENDA Item No.: 01.09.22

Intellectual and Developmental Disabilities Director's Report

Recommended Board Action: None Information Only

1. Training Centers:

- We have had to close Paris, Sulphur Springs, Terrell and Ennis Training Centers, intermittently due to an increase of positive Covid cases.

2. Employment Services:

- Lakes, HHSC representative and GM at Mathew's Auto Group in Paris met to discuss potential employment opportunities. GM would like a "10 point check off list" that would be completed at end of service completion. He would like to employ several IDD individuals for different part time shifts between 2 Paris locations.

3. PASRR

- Several Nursing Facilities (NF) have positive Covid cases. We continue providing individualized services at (NF) with negative individuals. IDD provides Independent Living Skills and Behavior Support Services.

4. HCS/ICF Group Homes:

- HCS/ICF beds are all occupied.
- ICF has suspended all group outings.
- Within the last 3 weeks, several staff and individuals have tested positive for Covid across the 12 counties.

5. Audits/Surveys:

- Central Region has 3 Utilization Reviews open at this time, 2 for HCS, and 1 for TxHmL.

6. Telehealth:

- Follow Ups - (136) = Corsicana- 16, Greenville-25, Mt Pleasant – 8, Paris-9, Sulphur Springs-9, Terrell-32, Waxahachie- 37
- New Evals- (7) = Corsicana- 1, Greenville-2, Mt Pleasant – 3, Sulphur Springs-1,
- Hospital Discharges – (3) = Corsicana- 2, Waxahachie- 1

7. Outpatient Biopsychosocial Intervention Team (OBI):

- Serving 27 individuals with IDD and Behavioral Health needs.
- February 9th and 17th, OBI will be hosting "Thrive and Survive," a workshop for families and caregivers of individuals with IDD and Behavioral Health needs. See Attached

8. CMHC Grant:

- Tele-Med Case Manager *(TCM) - 50 case management contacts in December 2021.
- CM contacts include hospital discharges, no shows and routine follow-ups that require additional assistance.

9. Staff Vacancies:

- 8 Residential Trainers
- 1 Provider Care Coordinator North
- 1 Rockwall Training Center Staff
- 1 OBI Collaborative Case Manager
- 1 Supported Employment Specialist

10. Concerns:

- DFPS took 8 months to complete an APS investigation, throughout this time the staff are unable to work face to face with individuals.

11. Announcements:

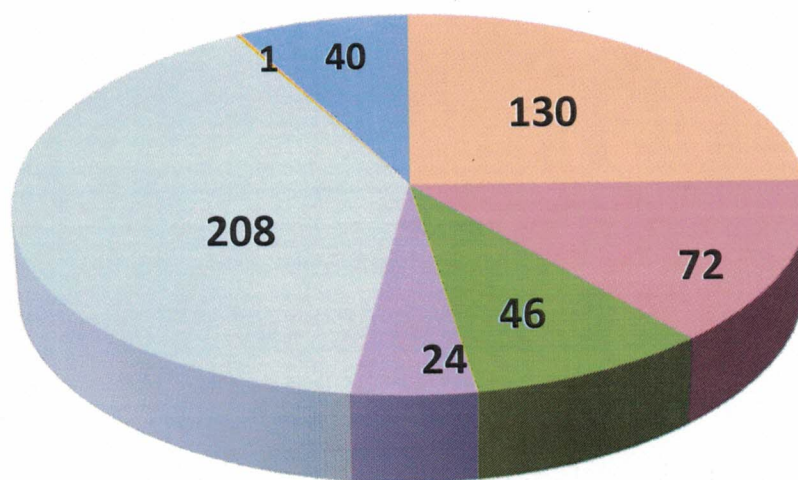
- Dr. Lloyd announced his retirement for April 14, 2022.
- Marie Aughtry, Hunt County Regional Director plans to move closer to family in West Virginia, sometime between April & June of 2022.
- Both of these losses will be a significant loss to our IDDP system of care.

AGENDA Item No.: 01.09.22

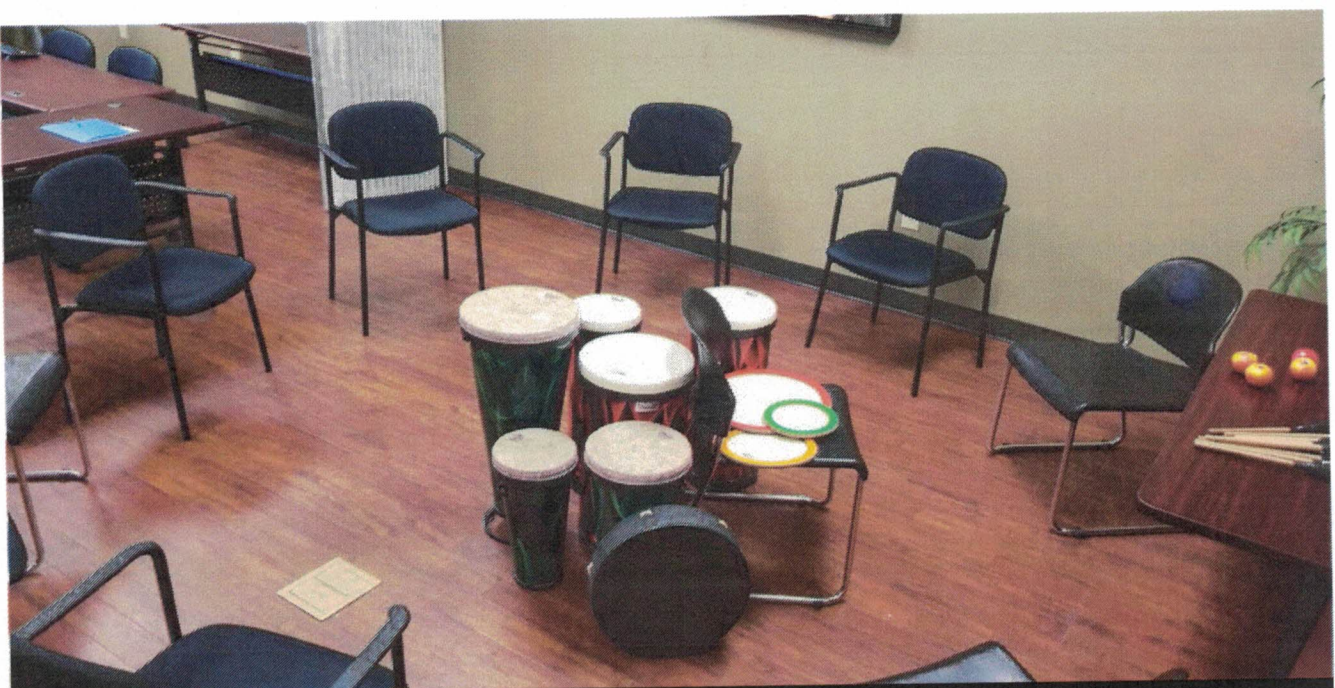
Intellectual and Developmental Disabilities Director's Report

Recommended Board Action: None Information Only

Total Number of Individuals Served in December - 521



■ HCS 130 ■ PASRR: 72 ■ TxHMI 46 ■ ICF 24 ■ GR:208 ■ TWS: 1 ■ Private 40

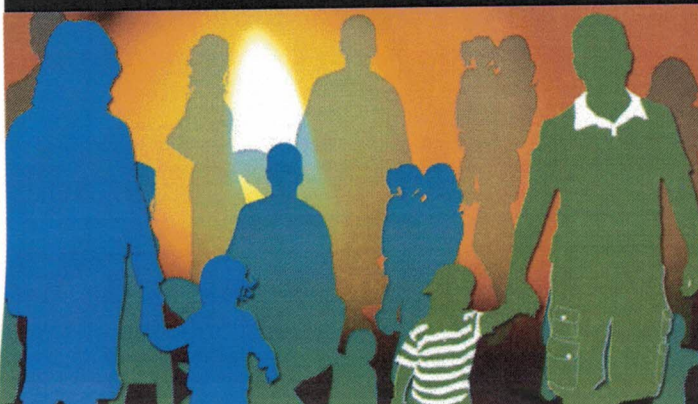


**AN ENCOURAGING EDUCATIONAL
EXPERIENCE FOR FAMILIES AND CAREGIVERS**

THRIVE AND SURVIVE

Mental Health Disorders, IDD
and other important things to
KNOW and DO

Speaker: Joey Garner, MA, LPC-S



- Thrive & Survive as family members or caregivers of person(s) with IDD and Mental Health needs.
- How mental health needs are alike and different for persons with IDD.
- Leave with tools that can be used immediately to Thrive and Survive.
- Take home tools include: MH/happiness plan and good behavioral concepts that can be used right away.
- Experience 2 events that will expand your concepts and ability to care for yourself and the person(s) in your life with IDD and mental health needs .
- Leave with a list of available resources.

Location:

1525 Airport Road,
Rockwall, Texas 75087

Date: February 9, 2022

Time: Noon - 2pm

Date: February 17, 2022

Time: 3:00pm - 5:00pm

RSVP Preferred and questions can be
submitted to tammyl@lakesregional.org or
call 972-441-4800 ext. 3110

AGENDA ITEM No. 01.10.22

Contracts & Quality Management Report

Recommended Board Action:

None. Information only

Rationale:

1. CONTRACTS/NETWORK DEVELOPMENT

- HHSC IDDA Contract: We received an amendment adding an additional \$69,087.67 for ECC.

2. PLANNING

PNAC

- The next PNAC meeting will be held January 20, 2022.
- We are compiling results of the Individual/Family and Stakeholder Needs Assessment. PNAC will review the results and make any recommendations at the Q3 meeting.

3. RIGHTS/ ABUSE, NEGLECT, & EXPLOITATION ALLEGATIONS

Rights Violation Allegations

- IDDA: 2-Unconfirmed (IDD Authority)
- MH GR: 1-Unconfirmed (Paris MH)

A, N, & E Allegations

- APS Investigation: 1-Terrell Group Home Results: Neglect Allegations: Unconfirmed; Physical Abuse Allegation: Inconclusive
- APS Investigations: 1-Terrell Group Home Results (pending since October)

4. QM MH, NTBHA & SUBSTANCE ABUSE

- MH & SUD Performance Measures: Lakes Regional is held harmless for performance measures and outcomes until further notice due to COVID-19.
- HHSC SUD CAP Follow-up: HHSC conducted a CAP follow up in December to ensure that Lakes implemented the corrective action plan. We did not receive repeat findings.
- NTBHA Mystery Caller CAP: Lakes submitted a corrective action plan on December 6, 2021 addressing the five findings received through NTBHA's mystery caller.
- Peer Review:
 - SUD Person-Centered Treatment/Discharge Plan Peer Review – 1 chart scored below 70%. Difference between peer scoring and QM is 1%.
 - MCOT Crisis Screening Peer Review – 0 charts scored below 70%. Difference between peer scoring and QM is 1%.
- The FY22-23 MH, SUD, and IDD Quality Management Plan was distributed for board approval.

5. IDD

- IDD Service Target: Lakes Regional will be held harmless for performance measures and outcomes until further notice due to COVID-19.
- HHSC CAP
 - HCS – Overall chart score 100%, 0 charts scored below 70%
 - PASRR – Overall chart score 86%, 2 charts scored below 70%
 - GR CFC – Overall chart score 78%, 4 charts scored below 70%

AGENDA ITEM NO. 01.10.22

Recommendation for Approval

- Review and take possible action to approve the TY 2022-2023 Quality Management Plan The major changes from the previous plan are described below:

Rationale:

- Motion to approve 2022-2023 Quality Management Plan

Description:

The QM plan describes what processes are in place to ensure individuals are receiving quality care. The FY22-23 QM Plan represents IDD, MH, & SUD instead of having separate QM plans. The Texas Administrative Code (TAC) mandates that the MH & SUD QM Plan is approved by the board at least once each biennium.

Information that applies to all three programs are in the main body of the QM Plan. Program specific information are in the attachments. MH & SUD will continue the peer review process with QM completing a walk behind to ensure that staff are auditing the same way as QM. IDD will continue to conduct quarterly chart audits.

Main Changes

- Combined the MH & SUD QM Plan with the IDD QM Plan
- MH Project – review and update procedures and develop a procedure manual
- Added SUD goals: 1. reviewing the procedures at least annually and 2. conducting at least one audit per year
- Instead of program specific information being in the body of the QM plan, it is now in attachments
 - Attachment A – MH
 - Attachment B – SUD
 - Attachment C – IDD
 - Attachment D - KPI

AGENDA ITEM NO. 01.11.22

Human Resources Report

Recommended Board Action:

None; information only.

1. Staffing Issues

➤ **Headcount**

We had a total of 457 authorized FTEs and 393 employees in the month of November and 441 FTEs with 395 employees during the month of December. We filled five positions in November and four in December, one of the positions filled in December was an internal transfer while the rest were new hires. During the month of November, we had 64 vacancies, which were including the ones that we were not hiring for, during the month of December, the vacancies were aligned with the budget and we had 46 vacancies.

➤ **Separations**

We had eight separations in November and four in December, all of them were voluntary. Some of the reasons mentioned during exit interviews were the following; moving to different city, commute was not feasible at the moment, pursuing Master's Degree, seeking new opportunity and dealing with personal issues.

➤ **Recruitment**

Some of the sources used to advertise our openings were Indeed, Newspapers, Colleges and Universities website, Facebook, Texas Workforce Commission website and Chambers of Commerce.

➤ **Training and Development**

During November and December, we had 24 classes with a total of 72 participants. Trainings for this month were CPR (*Cardio Pulmonary Resuscitation*), and SAMA (*Satori Alternatives for Managing Aggression*).

2. Compensation & Benefits

- COVID exposures during the month of November were low; we had two people who reported exposure and only one test positive. During the month of December we had a dramatic increase in cases, we had 17 employees who reported exposure and all of them tested positive. We received 10 request for time from the COVID Sick Leave Pool and a total of 386 hours were granted.
- We had one large claim, which also exceeded the stop loss on November.

