LAKES REGIONAL COMMUNITY CENTER

REGULAR MEETING OF THE BOARD OF TRUSTEES WEDNESDAY, APRIL 28, 2021, 5 PM

PER GOV. ABBOTT'S MARCH 26, 2020 PRESS RELESSE THIS MEETING WILL TAKE PLACE VIA ZOOM AND IS AVAILABLE TO THE PUBLIC:

You are invited to the LRCC Board of Trustees Meeting. LRCC Executive Conference Room, Terrell Wed. April 28, 2021, 5:00 PM

Join LRCC Board of Trustees Meeting by Zoom: https://zoom.us/j/95158124776?pwd=QTNQOTFUc2JjT0RFUU5ISG83Tk5EZz09

Meeting ID: 951 5812 4776

Passcode: 549981

Dial by phone (audio only): Phone #: 346-248-7799

Meeting ID: 951 5812 4776

Passcode: 549981

AGENDA

AGENDA Number	TOPIC
04.01.21	 CALL TO ORDER Roll Call / Introduction of Guest.
04.02.21	 APPROVAL OF MINUTES Regular Board Meeting Minutes of March 24, 2021
04.03.21	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.
04.04.21	COMMITTEE MEETING REPORTS NA
04.05.21	 RECOMMENDATIONS FOR APPROVAL Motion to approve Authorizing the Borrowing of Funds and Designating Authorized Representatives Motion to approve Companywide Good Will Appreciation Payment.
04.06.21	EXECUTIVE DIRECTOR REPORT (John Delaney)
	 Annual Board Training 1115 Transformation Waiver Updates Follow up on cybersecurity risk assessment COVID-19 Response Summary Texas Council Update East Texas Behavioral Health Network (ETBHN

04.07.21 FISCAL REPORT (Erwin Hancock)

 Motion to Accept Center's Financial Statement for Period(s) Ending: March 2021.

04.08.21 MENTAL HEALTH SERVICES REPORT (James Williams)

• Programs Update

04.09.21 INTELLECTUAL & DEVELOPMENTAL DISABILITIES REPORT (Laurie White)

- Day Habs ADA Training Centers
- Employment Services
- Waiver and ICF Group Homes
- Audits/Surveys
- OBI
- EVV
- New Staff
- Vacancies

04.10.21 QUALITY MANAGEMENT/CONTRACTS REPORT (Kellie Walker)

- Contracts/Network Development
- PNAC
- Rights Allegations
- QM MH, NTBHA & Substance Abuse
- IDD

04.11.21 HUMAN RESOURCES REPORT (Keith Matthews)

- Staffing Issues
- Employee Benefits

04.12.21 ADJOURNMENT

Lakes Regional Community Center
Upcoming Board-Related Meetings & Events

Regular Meeting of the Board of Trustees Wednesday, May 26, 2021

AGENDA ITEM NO. 04.02.21

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 March 26, 2021 as presented.

LAKES REGIONAL COMMUNITY CENTER REGULAR MEETING OF THE BOARD OF TRUSTEES WEDNESDAY, MARCH 26, 2021, 5PM

Per Gov. Abbott's March 26, 2020 Press Release this Meeting was held VIA ZOOM BOARD MINUTES

AGENDA
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NUMBER TOPIC

03.01.21 CALL TO ORDER

The March 26, 2021 regular meeting of the Lakes Regional Community Center Board of Trustees called to order by Board Chair, Tom Brown at 5:03 PM with a quorum present by Zoom. Chair asked for Roll Call.

Members Present (Zoom):

Tom Brown, Hunt County, Chair

Margaret Webster, Kaufman County, Board Secretary (in person-Terrell)

Lisa Heine, Ellis County

Jan Brecht-Clark, Ph.D., Delta County

Shae Green, Rockwall County

Marti Shaner, Navarro County

Frances Neal, Titus County

E. P. Pewitt, Morris County

Linda Sharpin, Franklin County

Carrie Hefner, Camp County

Members Absent: Dana Sills, Hopkins County, Steve Earley, Lamar County

Vacant Seat(s): NA Guest(s): NA

Ex Officio Members Present: Sheriff Scott Cass, Lamar County,

Sheriff Jack Martin, Morris County

Ex Officio Members Absent (Zoom): NA

Management Staff Present: John Delaney, Erwin Hancock, and Larry Jonczak

Management Staff Zoom: Keith Mathews, Kellie Walker, James Williams and Laurie White.

Management Staff Absent: NA

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

03.02.21 APPROVAL OF MINUTES

Recommended Board Action:

> Approval of Minutes of February 24, 2021 meeting.

Rational:

Tom Brown asked members if they had reviewed the minutes and if there were any corrections or additions. With no corrections or additions, Chair asked for motion to approve. Motion made by Lisa Heine to approve and seconded by Jan Brecht-Clark. Minutes were approved by a unanimously sign of aye.

CLOSURE

03.03.21 COMMENTS FROM CITIZENS

➤ NA

CLOSURE

03.04.21 COMMITTEE MEETING REPORT

NA

CLOSURE

03.05.21 RECOMMENDATIONS FOR APPROVAL

NA

CLOSURE

03.06.21 EXECUTIVE DIRECTOR REPORT (John Delaney)

Recommended Board Action:

> None: Information only

Rationale:

Discussion on the following:

Handouts

> 1115 Transformation Waiver Update

- O Demonstration Year 10 (DY-10) begins in April.
- Will be submitting achievement on the 16 annual DSRIP measures in April.
- o Payment due in July

> Follow up on cybersecurity risk assessment

- o Exploring options for an external cyber security risk assessment as suggested by Board.
- Contact with Gulf Coast Regional Extension Center (GCREC).
- Offer of an onsite security risk assessment at the flat rate per facility. We have used them in the past to achieve our federal meaningful use certification.

> COVID-19 Response Summary

- Governor lifting of his executive order regarding the wearing of masks has not affected our current operations.
- Following current CDC guidelines for healthcare providers, have kept our same precautions at all sites. Face-to-face services when alternative means are not appropriate or practical.

> Texas Council Update

- Recently passed stimulus bill The American Rescue Plan contains increased funding for several behavioral health related areas.
- Texas Council has provided a quick summary of the relevant provisions of the bill that could be relevant to our services.
- The Council will be tracking further details on how the funding will be distributed and will bring updates to future meetings.

> Update on Provider Relief Funding from the US Dept. of Health Services (HHS)-Attachment

- Attachment to discuss Provider Relief Funding.
 - ✓ Discussion of the 3rd round of this funding we received as part of this program to offset COVID related expenses and losses to revenue.
 - ✓ Part of our proposal for attesting to these costs is to initiate a staff supplemental payment prior to June 1.

East Texas Behavioral Health Network (ETBHN)

Meeting set to be held in April; an update will be provided.

CLOSURE

03.07.21FISCAL REPORT (Erwin Hancock)

Recommended Board Action:

- > Approval of Center's Financial Statement for Period(s) Ending:
 - January 2021 and February 2021.
- ➤ Center's 2nd Quarterly Investment Report

Rationale:

Erwin presented the Center's financial reports for the months of January 2021 and February 2021. He noted there were no extraordinary findings for either months. Mr. Erwin noted that February was a good month even with snow

Chairperson asked if any questions. With no further discussion, Chairperson asked for motion to approve financials for the months of January and February 2021. E. P. Pruitt made motion to approve with second by Linda Sharpin. Financial were approved by a unanimously sign of aye.

> Erwin presented the 2nd Quarterly Investment Report.

- Interest balance is healthy
- o 110 to 115 days of operating cost

Chairperson asked if any questions. With no further discussion, Chairperson asked for motion to approve Center 2nd Quarterly Investment Report. Motion made to approve by Frances Neal and seconded by E. P. Pewitt. Motion carried by and unanimously sign of aye. CLOSURE

03.08.21 MENTAL HEALTH SERVICES REPORT (James Williams)

Recommended by Board Action:

None: Information only

Rationale:

OMHP Vacancies and Funding

- Need to expand services and increase salaries.
- o Bachelor Degree

LPHA Vacancies and Funding

Licensed Professional positions – positions open.

> Medical Services Vacancies and Funding

- o Include Registered Nurse, Psychiatrist, Mobile Crisis Team, Act Team, etc.
- > NTBHA RFP Greenville Coffee House
 - Place, staff not yet to get started.

CLOSURE

03.09.21 INTELLECTUAL & DEVELOPMENTAL DISABILITIES REPORT (Laurie White)

Recommended by Board Action:

None: Information only

Rationale:

> COVID

Most all Group Home individual shave received at least one COVID vaccine.
 Many staff reluctant to receive the vaccine.

Snovid

- Residents amazed us with their resilient adaptive skills with the extreme weather during a pandemic.
- Some staff were in place for several days at a time
- o Sprinkler systems froze causing damage in Waxahachie, Greenville, and Sulphur Springs.

Day Habs

- o Greenville Art Studio building was emptied and cleaned to relinquish the lease.
- Greenville Day Hab is following protocol in place to re-open and hiring staff.

- o Paris has no firm soft reopen date.
- Sulphur Springs soft opening March 15th.
- Waxahachie/Ennis currently screening individuals to see interest.
- Terrell is anxious to reopen and following protocol to screen individual with interest.

Employment Services

- O Success Vignette: Individual is providing janitorial services for an engineering firm and is very excited.
- TWS: Recently approved for a continued contract as a Community Rehab Provider for Texas Workforce Solutions for the next 3 years.
- PASRR: Continue to have an increase in training time with our ILST individuals in NF's.
 Working with Nursing Facilities to get through the virtual issues to provide Day Hab.

HCS/TxHmL Waivers

- Group homes at capacity in HCS program.
- o CDC guidelines continue as staff continue to screen the individuals.
- HHSC Residential Inspectors have resumed in most areas, generally a sign that Surveys will occur soon.

Staffing

- Various hiring and in need of employees for other positions.
- Due to shortage of staff, sharing staff between HCS/ICF group homes from Paris, Greenville, and Terrell.

Outpatient Biopsychosocial

- Reporting submitted March 15th.
- O Standardizing the Biopsychosocial Assessment across the 5 centers involved in pilot.

CLOSURE

03.10.21 QUALITY MANAGEMENT/CONTRACTS REPORT (Kellie Walker)

Recommended by Board Action:

None: Information only

Rationale:

Report given by John Delaney

> Contracts/Network Development

- Submitted request to HHS for additional funding for our SUD Regions 3&4 contract.
- SUD Facility Licenses: Pending amendment from TDCJ regarding addition.

PNAC

- Local PNAC meeting set for April 19, 2021.
- Regional PNAC meeting was held 03/10/21:
 - ✓ Membership: Need of Board approved members. A flyer and client nominations forms were distributed to the Centers.
 - ✓ Training: RPNAC received annual training over PNAC requirements and Local Planning.
 - ✓ Project: RPNAC will revisit the Hospitalization survey that Centers completed in 2017. Survey to be updated and distributed again for Centers to complete.
 - ✓ Intent of the survey is to compare ETBHN Centers to identify best practices for reducing hospitalization rates.

Rights / Abuse, Neglect, & Exploitation Allegations

- GR: 2 Unconfirmed (Mt. Pleasant MH & Sulphur Springs MH)
- o IDD: 1 Unconfirmed (IDD Authority)

> QM MH, NTBHA & Substance Abuse

- Lakes Regional will be held harmless for performance measures and outcomes until further notice due to COVID-19.
- HHSC exited on March 12th and we are awaiting the results of the audit.

- HHSC SUD Audit: Correction action plan is due to HHSC by April 4, 2021.
 - ✓ Action Plan for the following sections: Quality Management, Policies and Procedures, Treatment Program Requirements, and Client records.
- o HHSC Yes Waive r Audit: Received 100% and a corrective action plan is not required.
- o Billing Audit: Audit revealed Case management services are billed correctly.
- QM Walk Behinds of Peer Reviews: Medication training and support 0 charts scored below 70%. Difference between peer scoring and QM is 1%.

▶ IDD

- Lakes Regional will be held harmless for performance measures and outcomes until further notice due to COVID-19.
- O LIDDA CAP Audit:
 - ✓ PASRR Audit score 95 %;) charts scored below 70%.
 - ✓ HCS Audit score 84%; one chart scored below 70%.

➤ NCQA

- NCQA Team Leads continue to meet with Core Team monthly to report progress on their assigned standard.
- The Look Back Period for the NCQA Accreditation starts on May 1, 2021.

CLOSURE

03.11.21 HUMAN RESOURCES REPORT (Keith Matthews)

Recommended by Board Action:

None: Information only

Rationale:

> Staffing issues

- Finished February with a total of 455.75 authorized FTEs and 398 employees.
- o Filled 11 positions (5 new hires)
- Two separations.

Employee Compensation and Benefits:

- Sixteen tested and six tested positive
- No request for emergency paid sick leave
- No hospitalization
- Seven direct care staff were granted 220 hours of paid sick leave from the emergency COVID 19 Sick Leave Pool.
- Health claims higher in the month, but this is primarily due to the erroneous filing of a worker's comp claim by the individual's provider. We should see a reverse of payment.
- Four large claims, but only one has exceeded the individual stop-loss limit.
- CLOSURE

Judy Dodd, Board Liaison/Transcriptionist Page | 3 4/15/21

03.12.21 ADJOURMENT

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

ATTEST:	ther discussion motion carried with a unanimously
Margaret Webster, Board Secretary	DATE:

AGENDA ITEM NO. 04.03.21

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. 04.04.21

Committee Meeting Reports

RECOMMENDATIONS FOR APPROVAL:

NA

Rationale:

Report of the following committees of the Board of Trustees, if applicable:

- Budget & Finance, Lisa Heine, Chair
 - > No Meeting Posted
- Human Resources, Tom Brown, Chair
 - > No Meeting Posted
- Programs, Vacant, Chair
 - > No Meeting Posted

Recommendations for Approval:

- Review and take possible action to approve Authorizing the Borrowing of Funds and Designating Authorized Representatives
- Review and take possible action to approve a \$748 per full-time employee payment inclusive of benefits costs as a gesture of goodwill and appreciation for continued loyal service to our organization and our clientele.

Rationale:

Erwin Hancock to give overall review for the following item(s):

- Motion to approve Authorizing the Borrowing of Funds and Designating Authorized Representatives
- > Motion to approve companywide good will appreciation payment.

Resolution Authorizing the Borrowing of Funds And

Designating Authorized Representatives

Whereas, Lakes Regional Mental Health and Intellectual Developmental Disability Center, DBA Lakes Regional Community Center (Lakes Regional) is an agency of the State of Texas, a governmental unit and a unit of local government as defined by Chapter 101. And 102. Civil Practice and Remedy Code and a local government as defined by Section 3, the Inter-local Cooperation Act-Article 4413(32c), Vernon's Texas Civil Statutes and is empowered to borrow funds for business purposes.

NOW THEREFORE, be it resolved as follows:

- A. That Lakes Regional confirms its line of credit of \$3,000,000 for the purpose of providing needed working capital. Said funds will be used to cover the Centers operating cost. Lakes Regional accordingly authorizes Erwin L. Hancock, to consummate said line of credit. The preceding individual will have the authority to negotiate the interest rate and terms of said line of credit, and any other action to facilitate said loan.
- B. That the individual whose signature appears below is authorized representative of Lakes Regional and is hereby authorized to borrow the aforementioned funds, by signing said loan documents and any other documents that may be required to facilitate the consummation of the loan.

The Authorized representative of Lakes Regional is:

Name	Title: Chief Financial Officer
This resolution is hereby adopted by Community Center at its regular mee	the Board of Trustees of Lakes Regional eting held on thisday of, 2021.
Lakes Regional Community Center	
By: Thomas Brown	Title: Chairman of the Board
By: John Delaney	Title: Executive Director

Provider Relief Funding

Summary

Lakes Regional has applied for and received three installments of Provider Relief Funding from the US Department of Health and Human Services (HHS). These funds were appropriated in the Public Health and Social Services Emergency Fund for provider relief. Each payment was based on an application related to Gross Patient Revenue including Medicare and Medicaid pay-sources. The final payment received on December 17, 2020 required attestation or reimbursement within ninety days. As part of the acceptance, the recipient is required to certify that the funds will only be used to "prevent, prepare for and respond to the coronavirus", and that the funding will only be used for "health related expenses or lost revenues" that are attributable to the coronavirus. In addition, the recipient must certify that the costs have not been paid by any other pay-source including Paycheck Protection Plan funds. Since the onset of the pandemic, Lakes Regional has maintained an accounting of all costs unique to the crisis and associated. As of March 31, 2021, Lakes has documented \$190,569 in COVID related costs (item 2).

Per guidance provided by an independent audit firm during a recent CFO consortium meeting, "lost revenue" may be calculated by one of three methods. One method calculates lost revenue as the difference in results from a prior year revenue stream to the same revenue stream for the current year. A comparison of revenues for Lakes Day Habilitation revenue derived from services to consumers outside Lakes residential programs results in a variance (lost revenue) of \$362,873 during the pandemic (item 1). It was also indicated during the consortium that certain payroll payments would be allowed as qualified expenditures in the name of loyalty or employee goodwill payments in light of the pandemic. Essentially, additional pay identified with staff retention is allowable.

The negative effect to date to LRCC currently amounts to \$553,442. Per the table below, the three deposits amount to \$683,939, leaving an unspent balance of \$130,497.

Proposed

To adequately utilize this funding, we propose a \$748 per full-time employee payment inclusive of benefits costs as a gesture of goodwill and appreciation for continued loyal service to our

organization and our clientele. The total amount of this expenditure amounts to \$297,114 (item 3). The table below summarizes the utilization of the provider relief funding under that scenario.

PROVIDER RELIEF FUNDING

Deposit Date				
4/17/2020	MEDICARE STIMULUS	\$ 12,601.		
6/15/2020	MEDICAID STIMULUS	\$ 40,561.		
12/17/2020	HHS STIMULUS	\$ 630,777.		
	TOTAL STIMULUS PAYMENTS REC'D		\$_	683,939.
	ESTIMATED DAYHAB REVENUE LOSS(item 1)	\$ 362,873.		. *
	COVID 19 EXPENSES(item 2)	\$ 190,569		
	LAKES APPRECIATION CHECK(item 3)	\$ 297,114.		
	BALANCE		\$\$	(166,617)

AGENDA Item No: 04.06.21 Executive Director's Report:

Recommended Board Action:

None: For Information Only

Rational:

Executive Director Report:

1. Annual Board Training:

All Board members should have received their copy of the Texas Council of Community Centers presentation summary used for initial Board of Trustees training at previous TX. Council annual conferences. Please review the information in the packet and we can discuss any questions during the meeting.

2. 1115 Transformation Waiver and Other Board Updates:

- Demonstration Year 10 (DY-10) first reporting period was finished and submitted. We await approval of our metrics from HHSC. Payment for this round will come in July.
- Texas received notification last week that the Center for Medicaid and Medicare Services (CMS)
 has rescinded its previous approval on the state's 1115 Waiver renewal. At this time, we have
 little information about their decision other than it appeared to be on a technicality associated
 with the fast-track process used under the previous administration. HHSC can resubmit the
 extension request and will do so. The current Waiver expires in September of 2022.
- 3. Follow up on cybersecurity risk assessment:

We are awaiting the UT Group in Galveston to give us a schedule for their on premise site visit to review our three main network site facilities.

4. COVID Response:

We are continuing to follow current CDC guidelines for healthcare providers, and continue our same precautions at all sites. Our volume of providing face-to-face services is increasing for our provider programs when alternative means are not appropriate or practical. All of the state's waivers to allow for increased use of telephone and telehealth services have remained in effect.

5. Texas Council Update:

The ED Consortium met last week and discussed a new federal grant from the federal Substance Abuse and Mental Health Services Administration (SAMSHA). It is a grant directed towards Community Mental Health Centers like ours, and focusing on delivery of services that impacted by the COVID-19 pandemic. It is targeting individuals with severe mental illness (SMI) and co-occurring substance use disorders. We have decided to submit an application and are working to put together a plan. The application is due on May 21.

6. East Texas Behavioral Health Network (ETBHN):

No update at this time.

2019 Texas Council Conference

Board Training: Trustee Roles and Responsibilities

June 19, 2019

Presented by:

Carvan E. Adkins
Taylor, Olson, Adkins, Sralla, & Elam LLP
6000 Western Place, Suite 200
Fort Worth, Texas 76107

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Continuing Legal Education

This session qualifies for 1.5 hours of CLE credit, including 1.5 hours of ethics.

Course Title: 34th Annual Conference

Course Number: 174051119

Date: June 19-21, 2019

Visit the CEU Desk across from the Registration Desk to pick up a CLE packet with instructions on how to report credit.

Texas Mental Health and Mental Retardation Act of 1965

- Authorized local agencies to assume a administration of MHMR services
- → Created Texas Department of MHMR
- Established partnerships between local agencies, the State, the Federal Government
- ➤ Vague in terms of legal definition and authority of local entity

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Section 534.001 Texas Health & Safety Code

- → Authorizes county, municipality, hospital district, school district [or organizational combination] to establish and operate a Community Center.
- → Community Center plan requires state approval.
- → There are now 39 Community Centers across the state serving all 254 Texas counties.

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Frequently Asked Question

What is a Community Center?

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Section 534.001(c) Texas Health & Safety Code

A Community Center is

- An agency of the state, a governmental unit and a unit of local government as defined and specified by Chapters 101 and 102, Civil Practice and Remedies Code (tort claims protection);
- A local government as defined by Section 791.003, Government Code (Interlocal Cooperation Act);
- 3. A local government for the purposes of Chapter 2259, Government Code (allows for self insurance by governmental entities); and
- A political subdivision for the purposes of Chapter 172, Local Government Code (allows for group benefits programs).

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Section 534.0015

Purpose and Policy

- (a) A Community Center created under this subchapter is intended to be a vital component in a continuum of services for persons in this state with mental illness or an intellectual disability.
- (b) It is the policy of this state that Community Centers strive to develop services for persons with mental illness or an intellectual disability, and may provide requested services to persons with developmental disabilities or with chemical dependencies, that are effective alternatives to treatment in a large residential facility.

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Unit of Local Government

- Why does it matter to a Board member?
- Because it makes the Board member a public official subject to various criminal penalties for misbehavior in office.
- And it forces the Community Center to conduct its business much differently than if it were a private entity.

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OFFENSES BY PUBLIC OFFICIALS

- Bribery (Sec. 36.02)
- Certain Gifts are Prohibited (Sec. 36.07)
- Abuse of Official Capacity (Sec. 39.02)
- Misuse of Official information (Sec. 39.06)
- Conflict of Interest Rules (Local Gov't Code Ch. 171)
- Nepotism Rules (Sec. 534.0115)

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Conflict of Interest: Local Gov't Code Ch. 171

- A person who knowingly violates Chapter 171 commits a criminal offense
 - Class A misdemeanor
 - Maximum fine of \$4,000 or up to one year in jail, or both

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Conflict of Interest Other State Statutes

- Local Government Code, Section 131.903
 - A Board of Trustees member who is an officer or director of a bank or has a beneficial interest in more than 10% of the outstanding capital stock of the bank must not vote or participate in proceedings by the Board to select the Community Center's depository bank.

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Section 534.0115 Nepotism

- (a) The Board of Trustees or executive director may not hire as a paid officer or employee of the Community Center a person who is related to a member of the Board of Trustees by affinity within the second degree or by consanguinity within the third degree.
- (b) An officer or employee who is related to a member of the Board of Trustees in a prohibited manner may continue to be employed if the person began the employment not later than the 31st day before the date on which the member was appointed.

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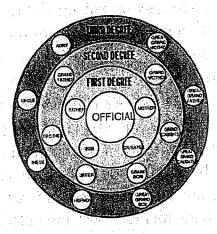
Section 534.0115 Nepotism

(continued)

- (c) The officer or employee or the member of the Board of Trustees shall resign if the officer or employee began the employment later than the 31st day before the date on which the member was appointed.
- (d) If an officer or employee is permitted to remain in employment under Subsection (b), the related member of the Board of Trustees may not participate in the deliberation of or voting on an issue that is specifically applicable to the officer or employee unless the issue affects an entire class or category of employees.

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Community Center Governance

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Section 534.006 (b) Training

Before a member of the Board of Trustees may assume office, the member shall attend at least one training session administered by that Community Center's professional staff to receive information relating to:

- (1) the enabling legislation that created the Community Center;
- (2) the programs the Community Center operates;
- (3) the Community Center's budget for that program year;

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Section 534.006 (b) Training

(continued)

- (4) The results of the most recent formal audit of the Community Center;
- (5) The requirements of Chapter 551 of the Texas Government Code (Open Meetings Act), and Chapter 552 of the Texas Government Code (Public Information Act);
- (6) The requirements of conflict of interest laws and other laws relating to public officials; and
- (7) Any ethics policies adopted by the Community Center.

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Standards of Administration for Board of Trustees

Department of State Health Services:
25 TAC Rule §411.310

Department of Aging and Disability Services: 40 TAC Rule §1.310

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Section 534.008 Administration by Board of Trustees

- (a) The Board of Trustees is responsible for the effective administration of the Community Center.
- (b) The Board of Trustees shall make policies that are consistent with the applicable rules and standards of each appropriate department.

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Section 534,009 Meetings

- (a) The Board of Trustees shall adopt rules for the holding of regular and special meetings.
- (b) The Board meetings are open to the public to extent required by and in accordance with Chapter 551, Government Code.
- (c) The Board of Trustees shall keep a record of its proceedings in accordance with Chapter 551, Government Code. The record is open for public inspection in accordance with that law.

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Section 534.009 (d) Meetings

(continued)

- (d) The Board of Trustees shall send to each appropriate department and each local agency that appoints the members a copy of the approved minutes of the Board of Trustees' meetings by:
 - (1) mailing a copy appropriately addressed with the necessary postage paid using the United States Postal Services; or
 - (2) Another method agreed to by the Board of Trustees and the local agency.

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BOARD ACTION

- The Board of Trustees acts only by majority vote at a meeting posted in accordance with the Texas Open Meetings Act in which a quorum of the Board of Trustees is present.
- Individual Board of Trustees members, including the Chair, have no express authority.
- Actions, or votes, may only be taken on properly posted items, which usually means listed on the Agenda.

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Fiduciary Responsibility

Basic Obligations

- Attend all meetings
- Prepare for meetings
- Be attentive and actively participate
- Ensure information is available for informed decisions
- · Examine the information thoroughly
- Request more information if materials raise issues or highlight problems
- Do not passively await signs of problems or "red flags"

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Fiduciary Responsibility

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- In retrospect, decisions made by a Board of Trustees may be objectively judged right or wrong. However, the fiduciary obligation requires that decisions are arrived at in an appropriate way—not that decisions are always "right".
- How a decision is arrived at does matter. In other words: Was an appraisal required? Was notice given? Were the requirements of the Open Meetings Act met? Was expert advice sought?

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Section 534.012 Advisory Committees

- (a) The Board of Trustees may appoint committees, including medical committees, to advise the Board of Trustees on matters relating to mental health and intellectual disability services.
- (b) Each committee must be composed of at least three members.
- (c) The appointment of a committee does not relieve the Board of Trustees of the final responsibility and accountability as provided by this subtitle.

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Section 534.014 Budget; Request for Funds

- (a) Each Community Center shall annually provide to each local agency that appoints members to the Board of Trustees a copy of the center's:
 - (1) approved fiscal year operating budget;
 - (2) most recent annual financial audit; and
 - (3) staff salaries by position.
- (b) The Board of Trustees shall annually submit to each local agency that appoints the members a request for funds or inkind assistance to support the center.

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Section 534.020 Acquisition and Construction of Property and Facilities by Community Center

- (a) A Community Center may purchase or lease-purchase real and personal property and may construct buildings and facilities.
- (b) The Board of Trustees shall require that an appraiser certified by the Texas Appraiser Licensing and Certification Board conduct an independent appraisal of real estate the Community Center intends to purchase. The Board of Trustees may waive this requirement if the purchase price is less than the value listed for the property by the local appraisal district and the property has been appraised by the local appraisal district within the preceding two years. A Community Center may not purchase or lease-purchase property for an amount that is greater than the property's appraised value unless:

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Section 534.020 Acquisition and Construction of Property and Facilities by Community Center

(continued)

- (1) the purchase or lease-purchase of that property at that price is necessary;
- (2) the Board of Trustees documents in the official minutes the reasons why the purchase or lease-purchase is necessary at that price; and
- (3) a majority of the Board approves the transaction.
- (c) The Board of Trustees shall establish in accordance with relevant rules of each department competitive bidding procedures and practices for capital purchases and for purchases involving department funds or required local matching funds.

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Section 534.021 Approval and Notification Requirements

- (a) A Community Center must receive from each appropriate department prior written approval to acquire real property, including a building, if the acquisition involves the use of funds of that department or local funds required to match funds of that department. In addition, for acquisition of nonresidential property, the Community Center must notify each local agency that appoints members to the Board of Trustees not later than the 31st day before it enters into a binding obligation to acquire the property.
- (b) A Community Center must notify each appropriate department and each local agency that appoints members to the Board of Trustees not later than the 31st day before it enters into a binding obligation to acquire real property, including a building, if the acquisition does not involve the use of funds of that department or local funds required to match funds of that department. Each appropriate commissioner, on request, may waive the 30-day requirement on a case-by-case basis.

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Section 534.021 Approval and Notification Requirements

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(c) The executive commissioner shall adopt rules relating to the approval and notification process.

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Governmental Immunity

- Three types of immunity apply to public officials:
 - Legislative
 - Judicial
 - Official

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Legislative Acts Absolute Immunity

- To be entitled to absolute immunity, the Board of Trustees member must be performing legislative acts such as Board Resolutions
- An individual is shielded by absolute immunity, which applies even when the individual is acting in bad faith
- However, the Board of Trustees may incur liability for the individual's bad acts

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Discretionary Acts Qualified Immunity

- Also known as official immunity
- To be entitled to official immunity, the Board of Trustees member must be:
 - performing discretionary (not ministerial) duties
 - in good faith
 - within the scope of his authority

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Discretionary v. Ministerial

- A discretionary act involves personal deliberation, decision and judgment
- A ministerial act is one that is prescribed and defined by the law with such precision and certainty as to leave nothing to the exercise of discretion or judgment

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- "Good faith" is determined by the following test:
 - -Would a reasonably prudent person in the same or similar circumstances have taken the same actions?

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Unauthorized Acts - No Immunity

• No type of immunity protects a Board of Trustees member from, and a member may be personally liable for, acts that exceed the authority conferred by law, such as false, defamatory statements.

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Government Code: Chapter 551 Texas Open Meetings Act

- Every meeting of a governmental body is open to the public
- Board of Trustees must keep minutes or tape recordings of its meetings
- A quorum must be present for a meeting to begin
- If officials gather in numbers of less than a quorum with the intent of circumventing the Act, **criminal penalties** may be imposed

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4.

Texas Open Meetings Act What is a meeting?

- A "meeting" occurs when a quorum of a governmental body is present and discusses public business, including a gathering:
 - · conducted by the governmental body; and
 - at which members receive or give information about public business or public policy over which the body has control
- · Formal action is not required

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Texas Open Meetings Act What is a quorum?

Defined as a simple majority under the Act, but may be dictated by Board bylaws or other similar local governance document, such as your interlocal agreement.

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4.

<u>Texas Open Meetings Act</u> What constitutes deliberation?

Defined as a verbal or written exchange ("giving and receiving of spoken words") between a quorum of a governmental body and another person, concerning an issue within the jurisdiction of the governmental body.

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<u>Texas Open Meetings Act</u> [Exceptions to this Definition]

Where <u>no formal actions</u> are taken and the <u>discussion</u> <u>of public business is incidental</u> to the events, the following are exceptions:

- purely social gatherings;
- attendance of public officials at conferences or training; and
- closed meetings/executive sessions; where permissible by law.

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Texas Open Meetings Act Common Misconceptions

The Act does apply to:

- "workshop" meetings
- "town hall" meetings
- informal gatherings before or after meeting in a quorum to discuss center business
- Board "retreats"

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Texas Open Meetings Act

Does not apply to purely advisory committees, unless:

- Board of Trustees generally rubber stamps action
- Inter-local or similar governing agreement renders committees subject to Act
- Other state law or regulation requires compliance with the Act
- · Committee has tradition of complying with Act

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Texas Open Meetings Act Items Not Posted

- · Cannot deliberate or decide items not posted
- If public brings up item not posted, Board may only:
 - >request to place item or subject matter on next agenda

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- > make statement of factual information
- >recite existing policy

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Texas Open Meetings Act Public Participation

- · No right to speak under the Act
- Local governmental bodies, but not state agencies, are required to provide the public an opportunity to address the body on an item on the agenda of an open meeting
- Courts recognize constitutional right to address and petition governing body
- If permitted to speak, limitations may be established and all speakers should be treated equally

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Texas Open Meetings Act Disruption of Meeting

- Texas Penal Code provides:
 - Class B misdemeanor if a person with intent to disrupt, obstructs or interferes with a lawful meeting by physical action or verbal utterance (subject to First Amendment)
 - Class A misdemeanor if the person has been warned

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Texas Open Meetings Act Emergency Meetings

- Action is necessary because of an "imminent threat to public health and safety" or because of a "reasonably unforeseeable situation"
- Notice must be posted at least one hour in advance of the meeting, and the notice must clearly identify with specificity the nature of the emergency

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Texas Open Meetings Act Closed Meetings Exception

(Executive Session)

- A "closed meeting" is "a meeting to which the public does not have access"
- No action may be taken in a closed meeting
- Members may indicate how they intend to vote, but the courts and the Attorney General have ruled no "straw votes"
- Certified Agenda must be kept showing time of session and general subject matter discussed

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Procedures for Meeting in Closed Session

- First convene in a properly posted open meeting
- Chair announces the closed session and identifies the section or sections of the Act that authorize the session
- In the session, the Chair must announce the date and time the session starts
- End of the session, the Chair must again announce the date and time

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<u>Texas Open Meetings Act</u> Closed Meetings: Who may attend?

- The Board decides who it needs in a closed meeting
- It should be limited to trustees and staff necessary for the discussion
- An officer or employee being discussed may attend only with permission of the Board, unless matter is posted as a personnel matter in which case unique rules discussed below apply

• Third parties are not allowed in a closed meeting, meaning non-employees, vendors or contractors

 Attorney is necessary for legal consultation exception, such consultation may be done by telephone, video or internet conference in accordance with Section 551.129 of the Act

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Record of Closed Meetings

- Must maintain a record of closed meetings except for consultation with an attorney
- certified agendas
- tape recordings
- Must be preserved for two years from the date of the meeting
- May not be disclosed except upon the order of a court

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Disclosure of Executive Session Discussion

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- Except disclosure of tape or certified agenda, no criminal penalty
- All Board members have fiduciary duty to the Center and should not disclose substance of discussion
- May be civilly liable if cause harm to government entity because of disclosure

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Disclosure of Executive Session Discussion

(continued)

- May waive attorney/client privilege
- Malfeasance in office removal by appointing authority

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Stifles questions and information

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Texas Open Meetings Act Criminal Enforcement

- Some violations are criminal offenses (With a penalty of a fine of \$100 to \$500, up to 6 months in jail, or both)
 - a member participates in any way in an unauthorized closed meeting
 - a member engage in a "prohibited series of communications" as defined by SB1640.
- Ignorance is no defense

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Criminal Enforcement

- Other violations
 - participating in a closed meeting knowing that a certified agenda or tape recording is not being made: Class C misdemeanor, with a fine up to \$500
 - releasing a copy of the certified agenda or tape recording of a closed meeting. Class B misdemeanor, with a fine up to \$2,000, up to 6 months in jail, or both

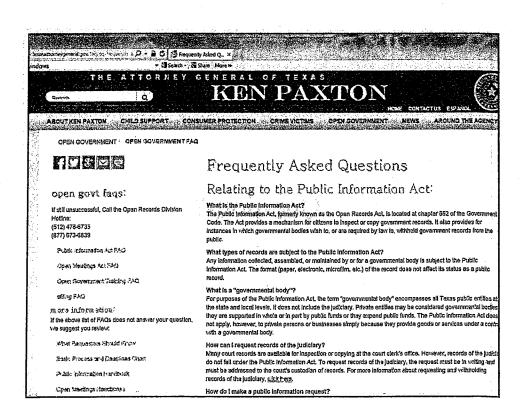
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Affirmative Defense

• It is an affirmative defense to criminal liability if you attended an "illegal" executive session upon the reasonable reliance of a court order, written opinion of court of record, Attorney General opinion, or Center's general counsel.

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Links Related to the PIA

English PIA Poster:

https://www.texasattorneygeneral.gov/sites/default/files/files/divi sions/open-government/OpenRecordsPIAPoster.pdf

Spanish PIA Poster:

https://www.texasattorneygeneral.gov/sites/default/files/files/divi sions/open-government/OpenRecordsPIAPosterES.pdf

AG's PIA Handbook (2018):

https://www.texasattorneygeneral.gov/sites/default/files/2018-06/PIA handbook 2018 0.pdf

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Continuing Legal Education

This session qualifies for 1.5 hours of CLE credit, including 1.5 hours of ethics.

Course Title: 34th Annual Conference

Course Number: 174051119

Date: June 19-21, 2019

Visit the CEU Desk across from the Registration Desk to pick up a CLE packet with instructions on how to report credit.

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AGENDA ITEM NO. 04.07.21 Fiscal Reports

RECOMMENDATIONS FOR APPROVAL:

> Center's financial statement for the month(s) of March 2021.

Rationale:

> Review and discussion of the Center's financial statement for the month(s) of March 2021 for approval.

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

Erwin Hancock Chief Financial Officer

April 28, 2021

Lakes Regional Community Center Financial Report Outline

I.	Financial Summary	Page 1
II.	Balance Sheet	Page 2
III.	Income Recap by Division Comparative Income Statement Statement of Revenues & Expenditures	Page 3 Pages 4 -5 Page 6
IV.	Related Data	Page 7
V.	Financial Ratios	Page 8

Lakes Regional Community Center Financial Summary for the Month Ending March 31, 2021

Profit and Loss Summary

	Current Month	Year to Date
Revenues Expenses	\$3,322,697 \$3,003,392	\$22,139,365 \$20,766,454
Net Income	\$319,306	\$1,372,912

Balance Sheet Summary

	Current YTD as of	Last YTD as of	Year to Year
	March 31, 2021	March 31, 2020	Change
Total Assets Total Liabilities	\$36,773,651	\$22,976,736	\$ 13,796,915
	\$13,926,726	\$8,715,295	\$ 5,211,431
Fund Balance	\$22,846,925	\$14,261,441	\$ 8,585,484

Lakes Regional Community Center Balance Sheet

		As of		As of	Net	Change
	3	/31/2021		<u>3/31/2020</u>		
urrent Assets Cash	\$	16,000,071 4,191,245	\$	6,831,575 3,866,748	\$	9,168,496 324,497
Accounts Receivable		388,616		208,729		179,887
Other Current Assets Total Current Assets	<u> </u>	20,579,932	Ś	10,907,052	\$	9,672,880
Total current Assets						
ong-Term Assets						
Fixed Assets (net of depreciation	\$	7,985,910	\$	8,187,682	\$	(201,772)
Other Long-Term Assets		8,207,809		3,882,002		4,325,807
Total Long-Term Assets	\$	16,193,719	\$	12,069,684	\$	4,124,035
Total Assets	\$	36,773,651	\$	22,976,736	\$	13,796,915
Current Liabilities Accounts Payable Accrued Expenses Short-term Debt Total Current Liabilities	\$ \$	779,626 944,139 3,995,152 5,718,917		615,357 586,135 3,631,801 4,833,293	\$ \$	164,269 \$358,004 363,351 885,62
Long-term Debt	\$	8,207,809	\$	3,882,002	\$	4,325,807
Total Long-Term Debt	\$	8,207,809	\$	3,882,002	\$	4,325,807
Total Liabilities	\$	13,926,726	\$	8,715,295	\$	5,211,43
Investment In General Fund Assets	\$	8,173,410	\$	8,187,682	\$	(14,27)
Fund Balance at Beginning of Year		14,673,515		6,073,759	<u> </u>	8,599,75
Total Equities and other Credits	\$	22,846,925	\$	14,261,441	\$	8,585,484

Lakes Regional Community Center Income Statement Recap by Division As of March 31, 2021

Division	Current Month	Year to Date
	\$ 36,412	(138,281)
MIU	(28)	1,469
Mental Health First Aid & Outreach	(4,835)	(79,536)
Hospitality House	130,336	721,895
IDD		(4,085)
ECI	(2,252)	
Administration	20,930	5,010
Bonham Property	74	(13,260)
	134	(2,381)
Expending Fundraising	111,398	844,642
1115 Waiver	30,541	20,460
Medical Prescriber Services	0.541	(2,750)
Fema Grant	(0.000)	10,505
CCBHC Expansion Grant	(9,008)	
Collaborative Grant	1,059	10,095
Education Services Pittsburgh	4,546_	(871)
Total Lakes	\$ 319,306	\$ 1,372,912

Lakes Regional Community Center Comparative Income Statement for the Month ended March 31, 2021

		3/31/2021	3/31/2020	Variance Va	r %
Revenues					
General Revenue IDD		\$243,658	\$187,922	\$55,736	30%
General Revenue MH		\$708,810	\$765,175	(\$56,366)	-7%
Early Childhood Intervention Revenue		\$85,014	\$117,018	(\$32,004)	-27%
1115b Waiver Revenue		\$561,188	\$523,077	\$38,111	7%
NTBHA Revenue		\$204,116	\$236,321	(\$32,205)	-14%
Medicaid Revenue		\$290,255	\$269,127	\$21,128	8%
Medicare Revenue		\$882	\$4,155	(\$3,273)	-79%
HCS Revenue		\$401,909	\$361,859	\$40,050	11%
Managed Care Revenue		\$138,345	\$89,456	\$48,889	55%
Private Insurance		\$109	\$3,881	(\$3,773)	-97%
Client Fees		\$5,848	\$7,003	(\$1,154)	-16%
Other Revenue	note 1	\$682,562	\$451,003	\$231,560	51%
Total Revenues		\$3,322,697	\$3,015,998	\$306,699	10%
Expenses					
Salaries and Wages	note 2	\$1,398,515	\$1,411,385	(\$12,870)	-1%
Employee Benefits		\$529,969	\$549,881	(\$19,912)	-4%
Staff Training		\$3,782	\$2,597	\$1,186	46%
Furniture and Equipment		\$7,822	\$1,908	\$5,914	310%
Maintenance and Repairs	en e	\$19,079	\$18,935	\$145	1%
Utilities		\$43,795	\$38,311	\$5,483	14%
Client Support	en e	\$6,924	\$4,253	\$2,671	63%
Supplies		\$21,695	\$27,689	(\$5,994)	-22%
Vehicle Maintenance		\$3,986	\$5,593	(\$1,606)	-29%
Insurance Costs		\$29,335	\$26,369	\$2,966	11%
Debt Service		\$53,639	\$54,992	(\$1,354)	-2%
Other Expenses		\$884,850	\$793,377	\$91,473	12%
Total Expenses		\$3,003,392	\$2,935,290	\$68,102	2%
Net Surplus/(Deficit)	,1 21	\$319,306	\$80,709	\$238,597	-296%

note 1 - Includes \$107,603 additional MAC revenue - adjust 3Qtr 2020 accrual to actual billed

note 2 - Reduction in March salaries are due to the reduction of one physician FTE by 20%, and two Nurse Practitioner FTEs by 10%. This also slightly reduces benefit costs.

Lakes Regional Community Center Comparative Income Statement for the period ended March 31, 2021

	YTD ended	YTD ended	Variance	Var %
Revenues	03/31/2021	03/31/2020	variance	Var %
General Revenue IDD	\$1,662,038	\$1,291,814	6070 224	2004
General Revenue MH	\$4,716,814	\$4,423,878	\$370,224	29%
			\$292,937	7%
Early Childhood Intervention Revenue	\$643,099	\$556,802	\$86,297	15%
1115b Waiver Revenue	\$3,928,316	\$3,661,539	\$266,777	7%
NTBHA Revenue	\$1,493,076	\$1,640,491	(\$147,415)	-9%
Medicaid Revenue	\$2,090,744	\$2,131,892	(\$41,147)	-2%
Medicare Revenue	\$17,048	\$52,743	(\$35,695)	-68%
HCS Revenue	\$2,738,025	\$2,584,937	\$153,088	6%
Managed Care Revenue	\$718,633	\$722,010	(\$3,377)	0%
Private Insurance	\$38,487	\$70,397	(\$31,910)	-45%
Client Fees	\$21,679	\$50,042	(\$28,363)	-57%
Other Revenue	\$4,071,406	\$3,835,485	\$235,921	6%
Total Revenues	\$22,139,365	\$21,022,029	\$1,117,336	5%
Expenses				
Salaries and Wages	\$10,254,559	\$10,122,762	\$131,797	1%
Employee Benefits	\$3,618,686	\$3,442,224	\$176,462	5%
Staff Training	\$24,093	\$20,253	\$3,840	19%
Furniture and Equipment	\$27,148	\$18,644	\$8,503	46%
Maintenance and Repairs	\$85,595	\$133,570	(\$47,975)	-36%
Utilities Programme Technology	\$276,745	\$272,680	\$4,065	1%
Client Support	\$29,823	\$21,329	\$8,494	40%
Supplies	\$167,403	\$188,050	(\$20,647)	-11%
Vehicle Maintenance	\$19,921	\$35,585	(\$15,664)	-44%
Insurance Costs	\$206,712	\$184,583	\$22,129	12%
Debt Service	\$378,467	\$391,695	(\$13,228)	-3%
Other Expenses	\$5,677,302	\$5,731,765	(\$54,463)	-1%
Total Expenses	\$20,766,454	\$20,563,140	\$203,314	1%
	\$1,372,912	\$458,889	6014 022	1000
Net Surplus/(Deficit)	\$1,372,912	3430,089 	\$914,022	-199%

Lakes Regional Community Center Statement of Revenues and Expenditures For the Period Ending March 31, 2021

Revenues	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Total
Local	\$ 64,976	\$ 133,243	\$ 64,381 \$	\$ 152,050	\$ 63,238 s	91,540	\$ 59,312	\$ 628,739
State Programs	1,468,465	1,558,503	1,515,762	1,695,370	1,675,357	1,606,098	1,715,798	11,235,352
Federal Programs	1,222,680	1,275,553	1,264,510	1,286,279	1,180,382	1,189,023 note2	1,339,781	8,758,207
Interest Income	3,257	3,630	2,989	3,666	3,251	3,507	3,691	23,991
North Texas BH Assoc	238,835	240,308	199,390	205,371	199,657	205,399	204,116	1,493,076
TOTAL REVENUES	\$ 2,998,212	\$ 3,211,236	\$ 3,047,032		\$ 3,121,885 \$	3,095,568	\$ 3,322,697	\$ 22,139,365
TOTAL REVENUES	<u> 2,390,212</u>	<u> </u>	0.047,002	0,042,100	· <u></u> •			
Expenditures								
Current:								
Salaries & Wages	\$ 1,484,631	\$ 1,456,243	\$ 1,415,633	\$ 1,500,349	s 1,492,924 \$	1,506,266 note3		\$ 10,254,559
Employee Benefits	506,938	498,310	492,536	504,863	540,744	545,325	529,969	3,618,686
Other Operating Expenses:								. 0
Client Respite	3,108	7,011	3,880	4,753	7,167	2,495	7,739	36,153
HCS Contract	115,580	121,954	104,711	115,524	108,310	110,498	112,415	788,992
Consult/Pro Svcs - Internal			*					0
Nursing Contract - RK								0
Consult/Pro Svcs - External	2,487	3,325	12,360	13,937	10,228	7,450	14,738	64,525
Contracts with Other Orgs-Ext	320,753	359,293	363,891	386,667	330,291	353,426	390,306	2,504,628
ICF/MR Quality Assurance Fees	7,037	7,313	7,077	6,955	7,253	6,140	7,283	49,058
TXHML Contracts	14,692	11,912	15,858	11,605	13,114	12,964	20,022	100,167
Contracted Lab Services	1,436	993	698	738	746	958	1,522	7,091
Staff Development/Training	2,599	2,727	2,572	4,353	2,808	5,251	3,782	24,093
1115 Projects Certif./Training Fees								0
Non-Clinical Contracts with Others	5,495	. 4,146	4,099	3,935	3,714	5,737	5,666	32,793
Pharmaceuticals/Supplies	26,525	25,289	28,842	21,194	. 22,893	20,930	23,329	169,001
Atypical Meds	· 7,440	7,488	2,144	11,654	6,371	6,227	7,394	48,718
Patient Asst Program/Filling Fees	3,000	. 0	1,500	1,500	1,500	1,500	1,500	10,500
Training and Travel	3,739	15,051	18,016	18,138	16,986	13,594	13,265	98,788
Consumable Supplies	22,958	28,816	23,665	28,172	22,208	19,888	21,695	167,403
1115 Residential Equip/Supplies							1.00	0
Building Capital Outlay	6,350	9,480	(2,050)	96,549	14,399	27,927	39,440	192,095
Capital Outlay Projects				. 0.	. 0	0		0
Furniture/Equipment over \$5,000								0
Computer Capital Outlay	3,543	4,564	4,489	4,489	4,489	4,489	4,489	30,553
Furniture/Equipment under \$5,000	4,287	2,173	3,755	2,704	6,038	368	7,822	27,148
Copier Equipment Rental	11,677	9,906	11,091	11,939	7,934	11,021	13,256	76,824
Computer Equipment Under \$5,000		4,128	6,375	31,353	16,050	23,227	5,442	95,712 81,752
Other Monthly Expenses	15,443	3,828	10,716	13,738	14,075	6,586	17,367	60,615
Computer Software Support Fees	12,499	9,573	896	11,213	8,923	5,362	12,149	60,187
Computer Software Fees for HR Sys	sten 7,098	9,098	8,098	8,098	8,098	8,098	11,598	00,107
Bad Debts Building Rent, Repair, Maintenance	105,974	122,208	120,497	111,558	113,150	97,254	127,502	798,143
Building Rent to Other Programs	100,574	122,200	120,401	,				0
Vehicle Operating Expense	3,140	2,876	1,910	3,491	2,041	2,476	3,986	19,921
Vehicle Fuel Costs	2,618	2,970	2,558	2,558	2,853	2,867	4,088	20,512
Non-Client Utilities	30,461	19,715	47,906	35,460	54,274	45,134	43,795	276,745
Telecommunications	18,188	27,582	27,553	27,713	28,016	27,709	29,071	185,832
Data Connect/Internet Access	7,455	7,455	7,455	7,455	7,489	7,455	7,455	52,219
Crisis Hotline Answering Svc	3,000	3,000	2,500	2,500	2,500	2,500	2,500	18,500
Insurance	29,677	29,677	29,677	29,677	29,677	28,993	29,335	206,712
Client Support Costs	1,595	1,592	5,550	2,326	6,398	5,438	6,924	29,823
Peer Training and Support	•							0
Client Reimbursable Services	9,463	9,300	3,615	6,070	9,488	3,878	8,390	50,204
NTBHA Supported Housing	3,836	5,450	7,144	8,333	4,430	4,658	5,598	39,448
Debt Service	54,410	58,207	49,628	53,907	53,928	54,750	53,639	378,467
Interest on PPP Loan								0
COVID-19 Expenses	7,824	7,375	7,514	7,783	6,530	8,854	4,612	50,493
ECI Client Support Costs	0	0	0	450	345	0	240	1,035
DSRIP Audit Costs								0
Expending Fund Raising Funds	0	90	677	1,164	0	583	866	3,381 0
Program Indirect		400	•	0	145	106	20	497
LRMHMRC Board Expenses	125	100	0	0	35	. 0	0	322
Expending Red River Funds	0	287	0		. 33	. 0	•	(200)
Expending Empowermet Funds				note1 (200)				(200)
ECI In-Kind Volunteers				0.00*	4.040	4.046	4,669	34,360
Service Costs Unallowable	4,913	4,663	4,461	6,695	4,918 959,815	4,042 950,835	1,074,907	6,893,209
Total Other Operating Expenses	889,563	950,614	951,328	1,116,148	909,610	a00,000	1,06,410,1	0,000,200
		· -						
TOTAL EXPENDITURES	2,881,132	2,905,167	2,859,497	3,121,359	2,993,482	3,002,425	3,003,392	20,766,454
TO THE EXPLINATIONES	2,001,102	2,000,107						
Excess (deficiency) of					<u> </u>	·		
revenues over expenditures	\$ 117,080	\$ 306,069	\$ 187,535	\$ 221,376	\$ 128,402	\$ 93,142	\$ 319,306	\$ <u>1,372,912</u>
***			E-0.1					

note1 - Void Check from Prior Fiscal Year
note 2 - Includes \$107,603 additional MAC Revenue recorded to adjust 3Qtr2020 accrual to actual billed
note 3 - Reduction in March salaries are due to the reduction of one physician FTE by 20%, and two nurse practitioner FTEs by 10%. This also slightly reduces benefit costs.

Lakes Regional Community Center FY21 Aged Accounts Receivable MARCH, 2021

Accounts Reivable Description	Amount	MAR	FEB 30 Days	JAN 60 Days	DEC 90 Days	prior 120 +
Accounts Relvable Description MAC Adm Claim	686,546.90	74,507	74,507	74,507	74,507	388,519
MAC Adm Claim						
NTBHA:	1,701.01	1,701			1	_
Substance Abuse	2,200.00	2,200	_ [1 - 1	_
ACT - addt'l billed svcs	2,200.00	2,200			1	
wa ataala	364,265.08	305,851	9,137	7,914	7,055	34,308
Medicaid Medicare **	1,756.64	1,598	` -	159	1 - 1	-
wedicare Private Insurance **	3,965.16	3,023	550	154	103	135
Chip **	588.83	526	63	-	-	-
MANAGED CARE:					1 . 1	
Amerigroup	28,495.96	28,438	·	58	1 - 1	
Superior (Cenpatico)	40,372.64	35,074	4,239	1,059	- 1	-
Optum	21,410.73	19,647	693	1,071		-
Cigna	12,418.49	11,489	200	67	662	-
Texas Childrens Plan	1,592.26	1,555	38		1	· •
Beacon	21,911.22	13,765	8,147	1700	-	3,435
Molina	33,676.68	25,611	1,750	1,709	1,171	2,165
Aetna Better Health	5,816.07	1,657	508	628	858	2,100
war and the same that the same	23,521.20	22,944	577]	-	- .
Texas Home Living - North	13,617.56	13,618		1 - 1		-
Texas Home Living - South HCS - North	283,944.75	283,945	1 . 1	- 1	- 1	-
HCS - North	99,934.69	99,935		1 - 1	-	-
					404	
Reimbursable Svcs-TxHmL North & South	2,876.24	2,624	128		124 4,076	184
Reimbursable Svcs-HCS North	11,799.21	6,091	1,390	59	4,076	673
Reimbursable Svcs-HCS South	2,230.06	1,427	130	- 1	1 - 1	0/3
HCS Rm/Brd	1,191.00			743	305	143
ICF Residential Homes	139,030.17	132,410	6,620	- 1	- 1	-
ICF Residential Florites			1			1
Block Grant/TANF-Title XX Gen Revenue	19,971.50	19,972	- 1	- 1	- 1	
Block Grant Supp Housing		-	- 1	-	. 1	
ISP Crisis Counseling FEMA Grant					-	-
CCBHC Expansion Grant	80,374.65	80,375	-	1 - 1		-
			1	1	1	
Supported Employment	1,500.00	1,500		1		-
Day Hab Billings (Private Providers)	1,069.22	726	162	182		1 -
1048 IDD Billed Svcs	1,180.36	469	712	_	-	1 -
	84,774.13	84,774	-	- 1	- 1	
ECI Grant Revenue	240.00	240	1 - 1	-	- 1	-
ECI Respite	5,012.88	3,214	1,053	672		7:
ECI Priv Ins	28,528.30	28,528	- 1	-	-	-
ECI Managed Care	37,845.41	33,736	996	1,116	186	1,81
ECI Chip	341.02	222	30	30	59	-
Ect offib			1 1			
A/R Other Employees			- 1			
A/R Employee Insurance (Cobra)		40.000	28,096	26,516		_
TCOOMMI GRANT	71,411.68	16,800	5,069	6,927	5,528	_
TDCJ Contract-Greenville	19,854.80	2,331 13,772	10,969	17,116	10,196	5,57
TDCJ - Sherman/Bonham/Paris	57,631.89	2,000	10,909	2,000		
Fannin County Drug Court	4,000.00	2,000		2,000	<u> </u>	-
Grayson County Drug Court	4 700 00	1,700		1 .	11 -	
Titus County Drug Court	1,700.00 13,675.50	13,676		-	11 -	_
DSHS Region 3	19,453.77	19,454			1 1	.
DSHS Region 4	10,740.41	5,478	5,263		-	-
DSHS MHFA Outreach	73,188.00	24,396	24,396	24,396	 	[] -
ICF Upper Payment Limit	1,580.00	1,580		-	-	-
SAC Prog -Hunt County ECC - (Enhanced Comm Coord)	16,263.25	8,350	7,913	-	-	-
Pharmacy Rental Income			_	-	11 -	-
Comm Education (Curt Pitton)	12,769.50	6,300	6,470	-	-	H -
1115 Waiver Fed Share **accrual	1,780,435.58	561,188	561,188	658,060	-	- 1
Misc Revenue - 1370-1200 - \$42,326.01					11	11
Final Draw 209 N Rockwall Project	42,326.01	- 1	42,326	-	-	-
Misc Revenue - 1320-1200 - \$514.52				. 	11	
MAR NTBHA Coffee House	514.52	515	-	- 1	11 -	-

4,191,244.93 Balance Due

4,191,244.93

Financial Ratios Lakes Regional Community Center

For period ended February 28, 2021 Unaudited

Current Ratio:	
Current Assets \$	19,906,116
Current Liabilities (note 1) \$	5,364,406
Ratio	3.71
Greater than 1.5?	yes

Tangible Net Worth
Equity \$ 22,527,620
Subordinated debt
Intangible Assets
Adjusted \$ 22,527,620
Debt/Worth Ratio:
Total Liabilities \$ 13,616,215
Tangible Net Worth \$ 22,527,620
Ratio 0.60
Less than 2.0? yes

Cash Flow Coverage	
Net Income	\$ 1,053,606
Add Depreciation	\$ -
Add Interest Expense	\$ 67,297
Cash FlowAvailable	\$ 1,120,903
Debt Service	\$ 257,531
Cashflow Surplus	\$ 863,371
Ratio	4.35
Greater than 1.0?	yes

ſ	Days Cash on Hand
	Cash and Equivalents \$ 16,032,351
ľ	Annual Expenditures \$ 40,909,141
	Daily Expenditure \$ 112,080
	Days Cash on hand 143

Note: Reduced by items classified as other Long-Term Assets (included previously).

AGENDA ITEM NO. 04.08.21 Mental Health Services Report

RECOMMENDATIONS FOR APPROVAL:

None: Information purposes only.

Rationale:

Update on Mental Health Programs

AGENDA Item No.: 04.09.20

Intellectual and Developmental Disabilities Director's Report

Recommended Board Action: None Information Only

1. Day Habs AKA Training Centers:

- Several soft re-openings of the Training Centers in process. Rockwall and Greenville are adding more individuals
 each month utilizing our screening tool. Delays in other areas are due to vacant positions including
 Waxahachie/Ennis, Terrell and Paris. Sulphur Springs Training Center will reopen as soon as weather damaged
 building is repaired.
- We will not be participating in large group community outings at this time.
- A heightened Infection Control protocol to promote individual/staff safety and health is practiced at each site.
- DSHS Checklist for Day Habilitation sites is in place across all program sites.
- ZOOM-Day Hab soon eliminated as staff are needed for in-person Day Habilitation and Group Home coverage.

2. Employment Services:

- Individuals finding their hours at work are being increased and they are being sought after. All of our individuals with jobs must follow the CDC/HHSC guidelines when returning to group homes.
- Staff are in the community doing Employment Assistance and Job Coaching. We celebrated a new Kroger employee this past month!

3. Waiver and ICF group homes:

- The Terrell team lost a very special individual from our HCS Program. The family of the individual has stated how
 pleased they have been the past 20+ years of working with Lakes Regional staff. In her honor April 25th Grease
 Monkey celebration, all invited.
- One individual and HH family member recently diagnosed with COVID.
- As Payee, we have received many Stimulus check for individuals and overseeing spend downs.

4. Audits/Surveys:

- HHSC Audit Team arrived at ICF Bonnie Hill, 4 months behind schedule and the TEAM achieved ZERO deficiencies. These audits are always unannounced.
- Social Security Review Audit for Representative Payees, waiting for official report.
- OIG audit for ICF individuals just started this week.
- HHSC Residential Inspectors active in most regions, general indication of large Audits/Surveys soon.

5. OBI:

- We turned in 2nd reporting March 15th and received no need for more information at this point.
- We are overserving 7 additional individuals with over half of the 32 individuals being children.
- The individuals being served in this specialized program are from all over our 12 counties.
- Dr. Lloyd works very closely with OBI Team.
- Appears funding may continue for FY22.

6. EVV:

All staff (including contract staff) are doing well reporting into Data logic system with accuracy and timeliness.

7. New Staff:

- Care Coordinator for Rockwall/Hunt County area for Waivers.
- Care Coordinator in Waxahachie for TxHmL/OBI Services/Telemed.

8. <u>Vacancies:</u>

- Two vacancies for Registered Nurses (RN) in the Central and Northern areas, and searching for a Director of Nursing for IDD with management experience.
- 17 frontline vacancies continue to be an issue that results in overtime, injuries and burnout.
- Applicants are practically nonexistent for frontline positions.
- Administrative staff are also working all shifts for coverage.
- A plan to increase IDDP base rate of pay for hourly staff has been proposed.

AGENDA ITEM No. 04.10.21 Contracts & Quality Management Report

Recommended Board Action:

None. Information only

Rationale:

1. CONTRACTS/NETWORK DEVELOPMENT

• HHSC SUD Contracts: We requested an additional \$16,000 for Region 3, and an additional \$50,000 for Region 4.

2. PNAC

 The last PNAC meeting was held April 19, 2021. A potential new member application was presented to the committee. Once the application process has been completed, PNAC members will vote to recommend board approval.

3. RIGHTS/ ABUSE, NEGLECT, & EXPLOITATION ALLEGATIONS Rights

- GR: 1 Unconfirmed (Sulphur Springs MH)
- NTBHA: 1 Unconfirmed (Greenville MH)

4. QM MH, NTBHA & SUBSTANCE ABUSE

- MH Performance Measures: Lakes Regional will be held harmless for performance measures and outcomes until further notice due to COVID-19.
- HHSC Hospitality House Audit: HHSC conducted an audit the week of March 8, 2021. Hospitality
 House had findings in the following areas:
 - Medical
 - o Quality Management
 - o Clinical Record
- Hospitality House is required to submit a Corrective Action Plan (CAP) to HHSC by April 26, 2021.
- HHSC SUD Audit: CAP was submitted 3/30/21 and was approved 4/1/21.
- Contracts Audit: Zero contracts scored below 70%. No CAP required.
- Walk Behinds of Peer Reviews
 - Nurse Medication Training and Support Walk Behind Zero charts scored below 70%. The difference between the nurse auditor scoring and QM's scoring was 1%
 - o Prescriber Chart Review Walk Behind Zero charts scored below 70%. The difference between the chart auditor scoring and QM's scoring was 3%
 - SUD Peer Review Walk Behind 1 chart scored below 70%. The difference between the auditor scoring and QM's scoring was 41% due to no client name/number or paperwork provided on one of the two peer reviews
 - TDCJ Probation Outpatient Services Walk Behind Zero charts scored below 70%. The difference between the auditor scoring and QM's scoring was 2%.

5. IDD

- IDD Service Target: Lakes Regional will be held harmless for performance measures and outcomes until further notice due to COVID-19.
- LIDDA CAP Audit: QM conducted a focused audit for HCS and PASRR in March 2021.
 - o PASRR Audit score 88%; 1 chart scored below 70%
 - HCS Audit score 93%; 0 charts scored below 70%

AGENDA ITEM NO. 04.11.21

Human Resources Report

Recommended Board Action:

None; information only.

Headcount

In March, we had a total of 467.1 authorized FTEs and 395 employees. We filled four positions, three of which were new hires. We had 12 separations, all of which were voluntary. Reasons cited for separation include, low pay, returning to graduate school, relocating to Arizona to be near grandchildren, didn't like the work, didn't like supervisor's management style, and Gladys Stokes retired after 13 years as a Residential Trainer with the IDDP Services in Waxahachie.

Compensation & Benefits

There were even fewer staff reporting COVID exposures during March than there were in February. Five people were tested and two had positive results. No one required hospitalization. There were no requests for emergency paid sick leave from the FFCRA program by administrative staff. Two direct care staff requested leave from the emergency COVID-19 Sick Leave Pool; they were granted a total of 160 hours.

Our health claims are still artificially inflated by the worker's comp claim we discussed last month. The reversal of this \$106,000 will be reflected in the April reports. We have seven large claims, and two have exceeded the individual stop-loss limit.

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun) Inc	Aug	YTD
I. Head Count (end of mo)										-		i i i i i i i i i i i i i i i i i i i	
Overall Total								300					Ì
# Positions	470	480	470	462	462	464	471						471
# FTE	446.35	456.35	462.35	455.75	455.75	457.75	467.1						467.1
# Employees	381	386	388	394	396	398	395				į		395
# Vacant Positions	91	96	66	84	82	82	92				hodern		92
# Full-Time Vacancies	74	9/	6/	99	49	64	77						77
# Part-Time Vacancies	17	20	20	18	18	18	15					-	15
General Administration													0
# Positions	37	37	38	38	38	38	38						88
#FTE	37.0	37.0	38.0	38.0	38.0	38.0	38.0						38.0
# Employees	35	36	36	37	36	36	36						36
# Vacant Positions	2	-	2	-	2	2	2						2
# Full-Time Vacancies	2		2	-	2	2	2						2
# Part-Time Vacancies	0	0	0	0	0	0	0						0
ECI Services													
# Positions	25	25	23	23	23	23	23						23
# FTE	22.9	22.9	22.9	22.9	22.9	22.9	22.9						22.9
# Employees	22	22	22	22	22	22	21						21
# Vacant Positions	က	6	က	က	3	3	4						4
# Full-Time Vacancies	_	_	1	-	1	1	2				-		2
# Part-Time Vacancies	2	2	2	2	2	2	2						2
					and the second								
1115 Waiver Projects													(
# Positions	48	49	48	47	47	47	48			+		- Compa	48
# FTE	44.75	45.75	46.75	45.35	45.35	45.35	46.35						46.35
# Employees	42	42	41	40	41	42	41					+	41
# Vacant Positions	8	6	10	8	7	9	8				+		∞
# Full-Time Vacancies	9	7	8	7	9	5	7			_			7
# Part-Time Vacancies	2	2	2		-		-						
			-										
# Decisions Services	Co	Ç	69	S	6	63	63			-			63
# Positions	70 00	700	200	70	20.02	20 02	000			+			63.0
11 L	0.20	07.0	0.50	02.0	02.0	02.0	0.00						250
# Employees	2 2	AC .	RC	AC .	SC C	S.	000						8 4
# Vacant Positions	9	က	4	m (n (4	Ω ၊				•		O 4
# Full-Time Vacancies	9	ဂ	4	3	က	4	2						O G
# Part-Time Vacancies	0	0	0	0	0	0	0						0
IDD Provider Services	707	007	400	777	777	147	117						117
# Positions	131	130	147 66	111 25	111 05	111 25	116 35			- -			116.35
# -	00.711	00.711	60.71	26.4	- 	- 	20.01						92
# Employees	35	30	95	32 24	32	33	20 25						34
# vacant Positions	SS	30	97	3	36	36	10						

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	YTD
# Full-Time Vacancies	27	25	24	20	19	19	24						24
# Part-Time Vacancies	12	13	13	13	13	13	10						10
					i.								1
Medical Prescriber Services													77
# Positions	13	14	11	11	1	11	14						4 0
# FTE	9.55	9.55	9.55	9.55	9.55	9.55	12.9						12.9
# Employees	13	12	12	12	12	12	12						12
# Vacant Positions	0	2	2	2	7	2	9						9
# Full-Time Vacancies	0	0	0	0	0	0	4						4
# Part-Time Vacancies	0	2	2	2	2	2	2						2
	-												
Mental Health Adult Services											-		146
# Positions	132	141	143	142	142	144	146						041
# FTE	130.8	139.8	142.8	141.8	141.8	143.8	145.8						145.8
# Employees	105	107	109	115	115	116	118						118
# Vacant Positions	27	8	35	27	27	28	28						28
# Full-Time Vacancies	26	33	34	27	27	28	28						28
# Part-Time Vacancies	_	1	1	0	0	0	0						0
100000000000000000000000000000000000000													
Mental Health C&A Services													
# Positions	10	10	10	10		10	10						10
# FTE	10.0	10.0	10.0	10.0	10.0	10.0	10.0			-			10.0
# Employees	4	4	4	ဂ		5	5						5
# Vacant Positions	9	9	9	7		5	5						5
# Full-Time Vacancies	9	9	9	7	9	5	5						2
# Part-Time Vacancies	0	0	0	0		0	0						0
Substance Abuse Services													C
# Positions	12	12	12		12	12	12				+		7 7
# FTE	11.8	11.8	11.8	-	11.8	11.8	11.8				+		0. 6
# Employees	12	12	12		12	12	12						Z
# Vacant Positions	0	0	0	-									P
# Full-Time Vacancies	0	0	0	5 0	0 0	5 0	0 0						0
	D												
II. Recruitment			307		700		7.4			,			782
# Applications Received	102	126	126	1/4	971	70	4/						201
# Positions Filled	7	12	16	5	10	11	4						00
# New Hires	2	6	12	4	တ	5	က						44
# Internal Promotions/Transfers	5	က	4	-	~	9							17
III. Separations		0		*		C	12						36
# Separations "	4	D	4	r	r	7	7						

	Sept	oct O	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	3	Aug	AID.
YTD Avg # Employees	381	386	388	394	396	398	395						391.14
YTD Turnover Rate	1.05%	1.55%	1.03%	1.02%	1.01%	0.50%	3.04%						9.20%
* excludes temporary, PRN, & RIF													
Avg LOS (Yrs)	1.24	3.01	3.23	2.88	2.08	0.88	2.48						2.43
# Involuntary Separations	0		0	~	-	1	0						9
# Voluntary Separations	4	3	4	3	3	_	12						30
# Vol Separations < 90 Days Empl	0	_	0	0	7	0	1		-,,				4
# Vol Separations > 90 Days < 1 Yr	2	1	0	1	0	-	4						6
													Carrie
IV. Training													
# NEO Classes		2	2	-	2	2	-					-	11
# NEO Participants	2	0	12	4	9	5	3						41
# CPR Classess	9	5	4	2	5	4	7						36
# CPR Participants	19	17	10	12	14	6	22						103
# SAMA Initial Classes	2	2	-	2	2		0						10
# SAMA Initial Participants	7	8	4	10	9	9	0						41
# SAMA Refresher Classes	2	4	9	2	5	5	2						35
# SAMA Refresher Participants	15	16	16	7	6	41	12						89
# ASIST Initial Classes	0	_	0	-	0	0	-			,			3
# ASIST Initial Participants	0	9	0	15	0	0	12						33
# SOSAM Classes	0	0	0	0	1	0	_						2
# SOSAM Participants	0	0	0	0	2	0	_						3
# YMHFA Classes	0	-	0	~	0	0	0						2
# ISD Participants	0	7	0	7	0	0	0						14
	-	0	0	0	0	0	0						_
# Community Participants	5	0	0	0	0	0	0						5
					,		,	1		(•	(
Total # Events	15	15	13	15	15	12	15	0	0	0	0	0	100
Total # Participants	48	63	42	55	37	怒	20	0	0	0	0	0	329
									- manuscriptor (project)				
V. Benefits													
Retirement													
# Eligible Employees	358	357	356	358	363	373	375						375
# 457(b) Participants	265	264	265	265	269	277	280						280
# Participating at 5% or More	160	159	163	162	163	168	169						169
\$ Avg Contribution Amount	212	201	191	194	207	207	195						195
\$ Total 457(b) Contribution	56,194	53,102	50,736	51,406	55,639	57,344	54,493						378,914
\$ Total Center's Match to 401(a)	45,846	43,613	42,259	43,088	44,968	46,408	43,888						310,070
Health Insurance													
# Eligible Employees	358	357	356	358	363	373	375						375
# With Coverage	326	325	323	326	334	341	342						342
\$ Total Premium per Month	402.643	402.404	400.192	402.919	414.037	420.075	420.869						2,863,139

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun Jul	l Aug	YTD
Value Plan Enrollment												
# Employee Only	166	165	164	167	171	179	180					180
# Employee & Child	29	30	31	32	35	35	35					35
# Employee & Spouse	18	18	18	16	16	16	16					16
# Employee & Family	24	24	24	25	26	26	25	\				25
\$ Paid by Employee	44.123	44,481	44,839	44,946	46,974	47,174	46,420					318,957
\$ Paid by Center	249,245	249,690	250,135	252,755	261,845	268,725	267,850					1,800,245
Enhanced Plan Furoliment					-		A Control of the Cont					
# Employee Only	22	9/	75	75	75	74	74					74
# Employee & Child	9	9	5	5	5	2	9					5
# Employee & Spouse	-	-	-	_	1	1	2				-	2
# Employee & Family	ည	5	5	5	5	2	S					2
\$ Paid by Employee	22,185	22,038	21,228	21,228	21,228	21,081	21,989					150,977
\$ Paid by Center	87,090	86,195	83,990	83,990	83,990	83,095	84,610					592,960
				-								
Total Expenses				0.00								
\$ Total Admin Fee Paid	65,011	64,317	64,613	75,501	66,595	68,056	68,192					472,285
\$ Total Premium Paid	402,643	402,404	400,192	402,919	414,037	420,075	420,869					2,863,139
\$ Total Claims Paid (Med & Rx)	226,736	494,587	277,109	218,271	327,406	427,974	392,093					2,364,176
Loss Ratio	56.3%	122.9%	69.2%	54.2%	79.1%	101.9%	93.2%	#####	#DIV/0i #D	1V/0i #DIV	93.2% ##### #DIV/0! #DIV/0! #DIV/0! #DIV/0!	82.6%
# srco Cloims &EO 000		ď	ď	c.	4	4	7					7
# Claims Exceeding Ind Stop Loss	-	-	-		-	-	2					2
												No. of the latest and
VI. COVID Tracking		district the second sec										
# Employees with Exposure/Tested	19	35	35	29	30	15	5					198
# with Postive Results	3	9	8	15	13	5	2					52
# Hospitalized	_	_	1	0	0	0	0					3