

LAKES REGIONAL COMMUNITY CENTER
REGULAR MEETING OF THE BOARD OF TRUSTEES
WEDNESDAY, DECEMBER 6TH, 2023, 5 PM

MEETING TO BE HELD IN PERSON AND VIA ZOOM
AVAILABLE TO THE PUBLIC:

You are invited to the LRCC Board of Trustees Meeting.

Zoom link for Board of Trustees Meeting, December 6, 2023
Location: 1525 Airport Road, Rockwall, Texas
Start Time: 5:00 PM

LRCC Board of Trustee's Meeting - Dec. 6th, 5:00 p.m., Connections Building in Rockwall, and Zoom

Join Zoom Meeting

<https://us06web.zoom.us/j/83078474681?pwd=xiObL5MqINzbwFbS4Y11TXNUefat8C.1>

Meeting ID: 830 7847 4681
Passcode: 750712

Dial by Phone: **346-248-7799**
Meeting ID: 830 7847 4681
Passcode: 750712

AGENDA

AGENDA NUMBER	TOPIC
12.01.23	CALL TO ORDER <ul style="list-style-type: none">Roll Call / Introduction of Guest.
12.02.23	APPROVAL OF MINUTES <ul style="list-style-type: none">Regular Board Meeting Minutes of October 25, 2023
12.03.23	COMMENTS FROM CITIZENS <p><i>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.</i></p>
12.04.23	COMMITTEE MEETING REPORTS NA
12.05.23	RECOMMENDATIONS FOR APPROVAL NA
12.06.23	EXECUTIVE DIRECTOR REPORT <i>(John Delaney)</i> <ul style="list-style-type: none">1115 Transformation Waiver UpdateTexas Council UpdateHHSC Performance Contracts/GrantsEast Texas Behavioral Health Network (ETBHN)

LRCC Board of Trustees Meeting Agenda

- 12.07.23** **FISCAL REPORT** (*Erwin Hancock*)
- Motion to Accept Center's Financial Statement for Period(s) Ending: October, 2023.

- 12.08.23** **MENTAL HEALTH SERVICES REPORT** (*Didi Thurman*)
- FY24 Performance Contract Changes
 - Coordinated Specialty Care – First Episode of Psychosis (CSC-FEP)
 - Collaboration with Titus County

- 12.10.23** **INTELLECTUAL & DEVELOPMENTAL DISABILITIES REPORT** (*Laurie White*)
- Home and Community Services (HCS)
 - Individual Skills and Socialization (ISS)
 - Intermediate Care Facilities (ICF)
 - Employment
 - Vocational Apprenticeship Program (VAP)
 - Outpatient Biopsychosocial Intervention Team (OBI)
 - Telehealth

- 12.10.23** **QUALITY MANAGEMENT/CONTRACTS REPORT** (*Kellie Walker*)
- Contracts
 - Planning
 - Rights/Abuse, Neglect & Exploitation Allegations
 - QM MH, NTBHA & Substance Abuse
 - IDD

- 12.11.23** **HUMAN RESOURCES REPORT** (*Jessica Ruiz*)
- Staffing Issues
 - Compensation & Benefits

- 12.12.23** **ADJOURNMENT**

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

*Regular Meeting of the Board of Trustees
January 24, 2024
655 Airport Road
Sulphur Springs, Texas*

LAKES REGIONAL COMMUNITY CENTER
REGULAR MEETING OF THE BOARD OF TRUSTEES
WEDNESDAY, OCTOBER 25, 2023, 5PM
BOARD MINUTES

AGENDA NUMBER	TOPIC
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10.01.23 CALL TO ORDER

The October 25, 2023 regular meeting of the Lakes Regional Community Center Board of Trustees called to order by Chairperson, Tom Brown at 4:59 PM with a quorum present by Zoom. Chairperson asked for Roll Call.

Members Present (In Person/Zoom):

Tom Brown, Hunt County, Chairperson	Margaret Webster, Kaufman County
Steve Earley, Lamar County	Crystal Richardson, Navarro County (Zoom)
Shae Green, Rockwall County	Jan Brecht-Clark, Ph.D., Delta County (Zoom)
Sheriff Ricky Jones, Franklin County (Zoom)	Nancy Leflett, Titus County
Dana Sills, Hopkins County	E. P. Pewitt, Morris County

Members Absent: Lisa Heine, Ellis County,

Vacant Seat(s): Camp County

Guest(s): Doug Roszhart

Ex Officio Members Present: Angela Price, Hopkin County Representative

Ex Officio Members Absent: Sheriff Singleton, Delta County

Management Staff Present: John Delaney, Erwin Hancock, Didi Thurman, Jessica Ruiz, Kellie Walker, Larry Jonczak, Laurie White

Management Staff Zoom: NA

Management Staff Absent: NA

Board Liaison/Recording Secretary:

Judy Dodd, Board Liaison/Recording Secretary

Tammy Johnson, CFO Administrative Assistant

10.02.23 APPROVAL OF MINUTES

Recommended Board Action:

- Approval of Minutes of September 27, 2023 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 Steve Earley to approve and seconded by Dana Sills. A sign of aye approved minutes unanimously.

CLOSURE

10.03.23 COMMENTS FROM CITIZENS

- Chairperson asked Mr. Roszhart to introduce himself to the members. Mr. Roszhart stated that he was running for State Representative and noted that Behavioral Health is one of his points of interest.

CLOSURE

10.04.23 COMMITTEE MEETING REPORT

- NA
- CLOSURE**

10.05.23 RECOMMENDATIONS FOR APPROVAL

- NA
- CLOSURE**

10.06.23 EXECUTIVE DIRECTOR REPORT (*John Delaney*)

Recommended Board Action:

None: Information only

Rationale:

Discussion on the following:

➤ **1115 Transformation Waiver Update:**

- ❖ Direct Payment Plan Update: First 6 months measure-reporting period for DPP BHS State Fiscal Year (SFY) 2024 Round 1 is due October 31, 2023.
- ❖ The Public Health Provider – Charity Care Pool (PHP-CCP): HHSC opened the reporting portal for Centers to file their cost reports for Year 2 of this program. The report for Federal Fiscal Year 23 is due in November 14. A lot of work with adjustments.

➤ **Texas Council Update:**

- ❖ The Texas Council Health Opportunities Committee (HOW) is finalizing its FY 24 workplan to present to the ED Consortium at their November meeting
- ❖ Council has put out a legislative alert to Centers and Council Board members with briefing documents to engage legislators during the Third Special Session.

➤ **HHSC Performance Contracts/Grants:**

- ❖ ECI HHSC Contract Expansion – Contract became effective October 20. We have received the first transfer of files from the previous provider and are currently working on 74 new referrals.

➤ **East Texas Behavioral Health Network (ETBHN)**

- ❖ ETBHN oversight group met on 10/17 and reviewed the financials for August and the end of the last year.

CLOSURE

10.07.23 FISCAL REPORT (Erwin Hancock)

Recommended Board Action:

- Motion to Accept Center’s Financial Statement for Period(s) Ending: September, 2023.

Rationale:

Discussion on the following:

- **Erwin presented the Center’s financial reports for the month(s) of September, 2023.**
 - ❖ Revenue and Expenditure
 - September payroll processing is consistent with the FY24 Budget plan; however, the actual payroll period processed ended September 16, 2023.
 - September revenue over expenditures

Chairperson asked if any questions. With no further discussion, Chairperson asked for motion to approve financials for the month(s) of September, 2023. E. P. Pewitt made motion to approve with second by Steve Earley. Financial(s) were approved unanimously sign of aye.

CLOSURE

10.08.23 MENTAL HEALTH SERVICES REPORT (Didi Thurman)

Recommended by Board Action:

None: Information only

Rationale:

Discussion on the following:

- **FY 24 Performance Contract Measures**
 - ❖ Working with staff to make sure all measures are covered.
- **Texas CCBHC Recertification**
 - ❖ Interviews are scheduled for October 30th- November 3rd.
 - ❖ Two rounds of interviews will be held.
 - ❖ Second submission of required documents are due 10/27/2023.
- **DPP SFY24 Round 1 Reporting**
 - ❖ Reporting due 10/31/2023
 - ❖ 4 Process Measures
 - ❖ 6 Quality Outcome Measures
- **6th Annual Judicial Summit**
 - ❖ Very informing – representatives of community partners.
 - ❖ Goal is to have representation from all counties of Texas

CLOSURE

10.09.23 INTELLECTUAL & DEVELOPMENTAL DISABILITIES REPORT (Laurie White)

Recommended by Board Action:

None: Information only

Rationale:

Discussion on the following:

- **Home and Community-based Service (HCS)**
 - ❖ Prep 10 counties north for Survey
- **Individual Skills and Socialization (ISS)**
 - ❖ 2 of 6 licenses awarded
 - ❖ 3 HCBS audits completed
- **ICF**
 - ❖ 3 deficiencies at Sayle Street.
 - ❖ Life Safety Code requiring facility corrections
- **Employment**
 - ❖ 3 TWS successful closures
 - ❖ Seeking apprentice and employment referrals.
- **Vocational Apprenticeship Program (VAP)**
 - ❖ Lamar County VAP graduation is 11/14/2023 @ 10:30am at Paris Junior College
 - ❖ Kaufman County VAP graduation is 11/13/2023 @10:30am at Terrell State Hospital.
- **Outpatient Biopsychosocial Intervention Team (OBI)**
 - ❖ Served 27 individuals
 - ❖ HHSC quarterly report submitted
 - ❖ Audit success with no findings
- **Telehealth**
 - ❖ Follow-ups 116

CLOSURE

10.10.23 QUALITY MANAGEMENT/CONTRACTS REPORT (Kellie Walker)

Recommended by Board Action:

None: Information only

Rationale:

Discussion on the following:

- **Contracts**
 - ❖ Received notice of extension for FY 24 to the Federal Probation contract.
 - ❖ Received ECI amendment that expanded our service area.
 - ❖ Received notification from HHSC that we can increase our bed day amount for PPB.
- **PNAC/RPNAC**
 - ❖ PNAC – Meeting reset for November 8, 2023 due to participant conflicts.
 - ❖ RPNAC – Reviewed Annual Training and schedule for FY 24
- **QM MH, NTBHA & Substance Abuse**
 - ❖ Performance Measures: Missing our AMH Improvement Service target for the month of September.
 - ❖ Optum Audit: Requested documentation submitted on October 3, 2023.

- ❖ Superior Audit: Requested information submitted on September 22, 2023.
- ❖ TDCJ site visit conducted at Paris and Bonham – both sites received no findings.
- ❖ HHSC Hospitality House Audit: Hybrid audit conducted based on the community standards. Now requesting we audit only what is in our contract.
- ❖ Peer Review: LPHA chart scored below 70%, difference between peer and QM scores was 9%.
 - **QM Plan Approval: Plan Attached**
Kellie stated to the Board members that the QM Plan has to be approved every two years. She then informed the members of the changes.
 - ✓ Main Changes:
 - Added MH UM Plan as part of the QM Plan
 - MH Project: Implement Cerner Millennium by March 1, 2024.
 - Key Performance Indicators: Updated KPI to match FY24-25 contracts

Chairperson asked if there were questions. With no further discussion, Chairperson asked for motion. E. P. Pewitt made motion to approve with a second by Steve Earley. Motion carried by unanimously sign of aye.

➤ **IDD**

- ❖ Service Target: Target is 169 and we are at 233.
- ❖ HHSC IDDA CAP: Revision to the Corrective Action Plans were submitted in response to the audit findings. Revised Correction Action Plans were accepted

CLOSURE

10.11.23 HUMAN RESOURCES REPORT (Jessica Ruiz)

Recommended by Board Action:

None: Information only

Rationale:

Discussion on the following:

➤ **Staffing issues**

- ❖ Headcount: 407 employees and 444 approved FTE's.
 - Vacancies: 41
- ❖ Separations: 7 separations
- ❖ Recruitment: Posting our licensed vacancies on the HRSA-Health Resources and Services Administration portal, and on the Healthcare, Job Posting website. Student loan forgiveness program.

➤ **Compensation and Benefits:**

- ❖ September benefits report reflects the changes from value to enhance plan and an increase in employee's retirement contributions.
- ❖ Covid: Exposures slowing down.
- ❖ YTD: One large claim; which exceeds the stop loss limit.

CLOSURE

10.12.23

ADJOURNMENT

Chairperson ask for any other matter to discuss if not for motion to adjourn. Mr. Delaney informed the board that the December meeting would be December 6, 2023 in Rockwall. With no further discussion, Chairperson asked for motion to adjourn. E. P. Pewitt made motion and seconded by Steve Earley. Motion carried unanimously by a sign of aye.

ATTEST:



Margaret Webster, Board Secretary



DATE:



Judy Dodd, Board Liaison/Transcriptionist Page | 3 11/13/23



AGENDA ITEM NO. 12.03.23

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. 12.04.23

Committee Meeting Reports

RECOMMENDATIONS FOR APPROVAL:

NA

Rationale:

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

- Budget & Finance, Margaret Webster, Chair
 - **No Meeting Posted**
- Human Resources, Shae Green, Chair
 - **No Meeting Posted**
- Programs, Dana Sills, Chair
 - **No Meeting Posted**

AGENDA ITEM NO. 12.05.23

Recommendations for Approval:

➤ NA

Rationale:

No recommendations presented.

AGENDA Item No: 12.06.23
Executive Director's Report:

Recommended Board Action:
None: For Information Only

Rational:

Executive Director Report:

1. 1115 Transformation Waiver Update:

Directed Payment Program – Behavioral Health Services (DPP-BHS)

This program operates on the state fiscal year but the quality measures we report follow the calendar year. The DPP-BHS program includes two components:

- Component 1 (B1-Dollar Increase) is a uniform dollar increase issued in monthly payments to entities participating in the program. As a condition of participation, providers will report on progress made toward certification or maintenance of CCBHC status. Enrolled providers are also required to report on the implementation status of activities foundational to quality improvement, such as telehealth services, collaborative care, integration of physical and behavioral health, and improved data exchange.
- Component 2 (B2-Rate Enhancement) is a uniform percent increase on certain CCBHC services. As a condition of participation, providers are required to report on metrics that align with CCBHC measures and goals. Providers that have CCBHC certification are eligible for a higher rate enhancement.

Payments are from services provided only to Medicaid Managed Care clients that we serve in the STAR, STAR+PLUS or STAR Kids programs.

DPP Update for December Board Meeting:

The next important stage in this program is finalizing last year's reconciliation settlement amount. We are currently working with TX. Council staff to validate HHSC's next draft reconciliation report.

The Public Health Provider – Charity Care Pool (PHP-CCP)

This program provides uncompensated care reimbursement to help cover our costs for services to uninsured and indigent clients. It follows the federal fiscal year calendar of October 1 through September 30.

Update for December Board Meeting:

HHSC received year 2 cost reports from all 39 Community Centers. Our cost report that we submitted, is less than our original budgeted estimate. We will review the final negotiated amount when HHSC finalizes their review in the next few months and make accrual adjustments to our monthly financial reports as needed.

2. Texas Council Update:

The Texas Council recently repeated the IDD presentation that occurred last August at the Council ED Consortium and Board meeting. This presentation included a wider audience of Council members and nonmembers. They also facilitated an effort by Chairman Drew Darby to send a letter (attached) to HHSC Executive Commissioner Young urging support for additional funding for certain IDD direct care worker (DCW) wages. The letter includes 51 House member signatures supporting a \$15/hr. average wage for DCWs serving individuals with IDD in group homes to stabilize community-based services and improve recruitment and retention of these key staff.

3. HHSC Performance Contracts/Grants

- HHSC

Lakes Regional recently a grant to develop a Coordinated Specialty Care treatment team for youth and young adults.

4. East Texas Behavioral Health Network (ETBHN)

- The ETBHN Executive Director is retiring in the next few months and the ROC is planning to meet next month to discuss recruitment efforts to fill the position and interim measures to oversee continued ETBHN operations during this transition.

AGENDA ITEM NO. 12.07.23
Fiscal Reports

RECOMMENDATIONS FOR APPROVAL:

- Center's financial statement for the month(s) of October, 2023.

Rationale:

- Review and take action to approve Center's financial statement for the month(s) of October, 2023.

Lakes Regional Community Center
Financial Report
For the Month of October 2023

Erwin Hancock
Chief Financial Officer

November 22, 2023

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	Pages 7-8

Lakes Regional Community Center
 Financial Summary for the Month Ending October 31, 2023

Profit and Loss Summary

	Current Month	Year to Date
Revenues	\$3,655,394	\$7,176,510
Expenses	\$3,344,734	\$5,811,462
Net Income	\$310,660	\$1,365,048

Balance Sheet Summary

	Current YTD as of October 31, 2023	Last YTD as of October 31, 2022	Year to Year Change
Total Assets	\$37,974,480	\$37,127,836	\$ 846,644
Total Liabilities	\$5,115,949	\$9,023,281	\$ (3,907,332)
Fund Balance	\$32,858,531	\$28,104,555	\$ 4,753,976

Lakes Regional Community Center
Balance Sheet

	As of		As of		Net Change
	10/31/2023		10/31/2022		
Current Assets					
Cash	\$	20,518,568	\$	20,038,373	\$ 480,195
Accounts Receivable		4,099,814		4,460,511	(360,697)
Other Current Assets		854,655		1,220,185	(365,530)
Total Current Assets	\$	25,473,037	\$	25,719,069	\$ (246,032)
Long-Term Assets					
Fixed Assets (net of depreciation)	\$	8,625,080	\$	8,275,155	\$ 349,925
Other Long-Term Assets		3,876,363		3,133,612	742,751
Total Long-Term Assets	\$	12,501,443	\$	11,408,767	\$ 1,092,676
Total Assets	\$	37,974,480	\$	37,127,836	\$ 846,644
Current Liabilities					
Accounts Payable	\$	968,290	\$	1,359,926	\$ (391,636)
Accrued Expenses		656,137		1,250,545	(\$594,408)
Short-term Debt	note1	(384,841)		3,279,198	(3,664,039)
Total Current Liabilities	\$	1,239,586	\$	5,889,669	\$ (4,650,083)
Long-term Debt	\$	3,876,363	\$	3,133,612	\$ 742,751
Total Long-Term Debt	\$	3,876,363	\$	3,133,612	\$ 742,751
Total Liabilities	\$	5,115,949	\$	9,023,281	\$ (3,907,332)
Investment In General Fund Assets	\$	8,625,080	\$	8,275,155	\$ 349,925
Fund Balance		24,233,451		19,829,400	4,404,051
Total Equities and other Credits	\$	32,858,531	\$	28,104,555	\$ 4,753,976
Total Liabilities, Equities and other Credits	\$	37,974,480	\$	37,127,836	\$ 846,644

note1 MH General Revenue not received October. Sept/Oct revenue allocation not reclassified to Accounts Receivable. MH General Revenue was received in November.

**Lakes Regional Community Center
Income Statement Recap by Division
As of October 31, 2023**

Division	Current Month	Year to Date
Mental Health Adult	\$ 262,966	\$ 889,261
Mental Health C&A	(2,412)	9,940
Substance Abuse	15,870	42,042
IDDP	65,354	272,147
IDDA	23,977	193,594
ECI	(2,870)	(2,527)
Other	\$ (52,225)	\$ (39,410)
Total Lakes	\$ 310,660	\$ 1,365,048

Other		
Hospitality House	\$ 279	\$ 3,508
Mental Health First Aid	\$ 200	\$ 2,175
CCBHC/CMHC SAMSHA Grants	\$ (55,253)	\$ (55,253)
Expending Fund Raising	\$ (300)	\$ (600)
Administration	\$ 2,849	\$ 10,760
	\$ (52,225)	\$ (39,410)

Lakes Regional Community Center
Comparative Income Statement for the Month ended October 31, 2023

	<u>10/31/2023</u>	<u>10/31/2022</u>	Variance	Var %
Revenues				
General Revenue IDD	\$222,828	\$246,657	(\$23,829)	-10%
General Revenue MH	\$718,877	\$690,951	\$27,926	4%
Early Childhood Intervention Revenue	\$162,175	\$74,151	\$88,024	119%
Charity Care Pool / DPP	\$643,573	\$568,585	\$74,988	13%
NTBHA Revenue	\$218,987	\$209,375	\$9,612	5%
Medicaid Revenue	\$274,444	\$272,083	\$2,361	1%
Medicare Revenue	\$6,754	\$5,046	\$1,708	34%
HCS Revenue	\$447,168	\$431,729	\$15,439	4%
Managed Care Revenue	\$132,164	\$103,257	\$28,907	28%
Private Insurance	\$17,244	\$14,466	\$2,778	19%
Client Fees	\$4,917	\$1,853	\$3,064	165%
Other Revenue	\$806,263	\$632,909	\$173,354	27%
Total Revenues	\$3,655,394	\$3,251,062	\$404,332	12%
Expenses				
Salaries and Wages	\$1,666,334	\$1,546,004	\$120,330	8%
Employee Benefits	\$603,550	\$541,556	\$61,994	11%
Staff Training	note1 (\$1,593)	\$4,472	(\$6,065)	-136%
Furniture and Equipment	\$112,306	\$882	\$111,424	12633%
Maintenance and Repairs	\$0	\$45,200	(\$45,200)	-100%
Utilities	\$11,875	\$44,000	(\$32,125)	-73%
Client Support	\$7,763	\$4,679	\$3,084	66%
Supplies	\$33,255	\$24,796	\$8,459	34%
Vehicle Maintenance	\$10,620	\$5,659	\$4,961	88%
Insurance Costs	\$30,634	\$26,629	\$4,005	15%
Debt Service	\$36,973	\$27,801	\$9,172	33%
Other Expenses	\$833,017	\$792,463	\$40,554	5%
Total Expenses	\$3,344,734	\$3,064,141	\$280,593	9%
Net Surplus/(Deficit)	\$310,660	\$186,921	\$123,739	66%
note1 September 2023 correction				

Lakes Regional Community Center
Comparative Income Statement for the Period ended October 31, 2023

	YTD ended 10/31/2023	YTD ended 10/31/2023	Variance	Var %
Revenues				
General Revenue IDD	\$433,109	\$484,515	(\$51,406)	-11%
General Revenue MH	\$1,434,230	\$1,375,957	\$58,273	4%
Early Childhood Intervention Revenue	\$230,563	\$153,725	\$76,838	50%
Charity Care Pool / DPP	\$1,331,833	\$1,137,170	\$194,663	17%
NTBHA Revenue	\$436,883	\$418,728	\$18,155	4%
Medicaid Revenue	\$547,033	\$532,403	\$14,630	3%
Medicare Revenue	\$9,266	\$6,373	\$2,893	45%
HCS Revenue	\$821,090	\$821,362	(\$272)	0%
Managed Care Revenue	\$261,371	\$210,813	\$50,558	24%
Private Insurance	\$35,654	\$23,037	\$12,617	55%
Client Fees	\$7,586	\$5,434	\$2,152	40%
Other Revenue	\$1,627,892	\$1,193,342	\$434,550	36%
Total Revenues	\$7,176,510	\$6,362,859	\$813,651	13%
Expenses				
Salaries and Wages	\$2,700,296	\$3,168,663	(\$468,367)	-15%
Employee Benefits	\$991,348	\$1,097,671	(\$106,323)	-10%
Staff Training	\$11,509	\$9,215	\$2,294	25%
Furniture and Equipment	\$121,879	\$8,549	\$113,330	1326%
Maintenance and Repairs	\$34,673	\$58,181	(\$23,508)	-40%
Utilities	\$56,507	\$63,571	(\$7,064)	-11%
Client Support	\$18,936	\$10,636	\$8,300	78%
Supplies	\$58,110	\$47,936	\$10,174	21%
Vehicle Maintenance	\$19,166	\$9,833	\$9,333	95%
Insurance Costs	\$57,981	\$53,259	\$4,722	9%
Debt Service	\$73,946	\$55,603	\$18,343	33%
Other Expenses	\$1,667,112	\$1,537,741	\$129,371	8%
Total Expenses	\$5,811,462	\$6,120,858	(\$309,396)	-5%
Net Surplus/(Deficit)	\$1,365,048	\$242,001	\$1,123,047	464%

Lakes Regional Community Center
Statement of Revenues and Expenditures
For the Period Ending October 31, 2023

	Sept-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Total
Revenues													
Local	\$ 83,442	\$ 214,597	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$ 298,038
State Programs	1,559,768	1,662,454											3,242,222
Federal Programs	1,581,153	1,480,211											3,061,364
Interest Income	76,857	59,146											138,002
North Texas BH Assoc	217,896	218,987											436,883
TOTAL REVENUES	\$ 3,521,116	\$ 3,655,394	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$ 7,176,510
Expenditures													
Current:													
Salaries & Wages	\$ 1,033,961	\$ 1,666,334	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$ 2,700,296
Employee Benefits	387,799	603,550											991,348
Other Operating Expenses:													
Client Respite	3,430	\$10,565											13,995
HCS Contract	120,033	\$120,429											240,462
Consult/Pro Svcs - External	8,011	\$2,804											10,815
Contracts with Other Orgs-Ext	363,377	\$360,598											723,975
ICFMR Quality Assurance Fees	6,969	\$7,146											14,115
TXHML Contracts	7,550	\$9,766											17,315
Contracted Lab Services	133	\$1,968											2,101
Staff Development/Training	13,102	(\$1,593)											11,509
Non-Clinical Contracts with Others	10,393	\$17,667											28,081
Pharmaceuticals/Supplies	6,333	\$14,273											20,606
Atypical Meds	1,390	\$3,597											4,987
Patient Asst Program/Filling Fees	1,500	\$1,500											3,000
Training and Travel	15,170	\$53,285											68,454
Consumable Supplies	24,855	\$33,255											58,110
Building Capital Outlay	52,500	(\$32,570)											19,930
Furniture/Equipment over \$5,000	9,000	\$109,502											118,502
Computer Capital Outlay	13,100	\$22,079											35,180
Furniture/Equipment under \$5,000	573	\$2,804											3,376
Copier Equipment Rental	9,829	\$11,350											21,179
Computer Equipment Under \$5,000	9,381	\$6,542											15,923
Other Monthly Expenses	9,337	\$9,572											18,909
Computer Software Support Fees	13,015	\$18,220											31,235
Building Rent, Repair, Maintenance	152,923	\$104,076											256,999
Vehicle Operating Expense	8,545	\$10,620											19,166
Vehicle Fuel Costs	11,696	\$11,598											23,294
Non-Client Utilities	44,632	\$11,875											56,507
Telecommunications	16,175	\$28,518											44,692
Data Connect/Internet Access	7,929	\$7,855											15,784
Crisis Hotline Answering Svc	2,500	\$2,500											5,000
Insurance	27,347	\$30,634											57,981
Client Support Costs	11,173	\$7,763											18,936
Client Reimbursable Services	3,936	\$20,834											24,770
NTBHA Supported Housing	5,009	\$3,875											8,884
Debt Service	36,973	\$36,973											73,946
DPP BHS Prem Tax Risk Admin	4,945	\$4,945											9,890
COVID-19 Expenses	428	\$362											789
Expanding Fund Raising Funds	520	\$300											820
LRMHMRC Board Expenses	624	\$453											1,077
Service Costs Unallowable	10,633	\$8,890											19,523
Total Other Operating Expenses	1,044,968	\$1,074,850											2,119,818
TOTAL EXPENDITURES	2,466,728	\$3,344,734	0	0	0	0	0	0	0	0	0	0	5,811,462
Excess (deficiency) of revenues over expenditures	\$ 1,054,388	\$ 310,660	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$ 1,365,048

note1 September Correction
note2 Reclass Building Capital Outlay Expense to Work in Progress

Lakes Regional Community Center

FY24 Aged Accounts Receivable

OCTOBER

Accounts Receivable Description	GL A/R Balance	Oct Current	Sep 30 Days	Aug 60 Days	Jul 90 Days	Jun & prior 120 +
MAC Adm Claim	679,643.27	143,825	143,825	109,149	109,149	173,695
<u>NTBHA: \$2,739.57</u>						
Substance Abuse - GVL	2,739.57	2,740	-	-	-	-
VAP Class GVL	-	-	-	-	-	-
Medicaid	332,765.98	254,051	13,941	11,538	8,863	44,374
Medicare	3,072.87	3,060	13	-	-	-
Private Insurance	14,958.93	10,793	2,394	1,194	416	162
Chip	422.13	302	83	9	28	-
<u>MANAGED CARE:</u>						
Amerigroup	40,413.46	35,696	2,037	2,680	-	-
Superior (Cenpatico)	33,342.15	33,342	-	-	-	-
Optum	22,028.26	21,428	-	-	-	600
Cigna	313.37	31	62	72	148	-
Texas Childrens Plan	1,224.36	807	345	72	-	-
Beacon	17,325.39	13,179	4,146	-	-	-
Molina	31,377.24	30,548	829	-	-	-
Aetna Better Health	5,100.60	4,351	750	-	-	-
Texas Home Living - North **	32,041.40	25,918	6,123	-	-	-
Texas Home Living - South **	9,007.97	4,343	4,665	-	-	-
HCS - North **	247,358.64	247,359	-	-	-	-
HCS - South **	203,865.80	110,674	93,192	-	-	-
VAP (Vocational Apprenticeship)	22,652.20	10,945	11,707	-	-	-
Reimbursable Svcs-TxHmL North & South	1,162.14	1,162	-	-	-	-
Reimbursable Svcs-HCS North	19,813.17	17,883	1,406	524	-	-
Reimbursable Svcs-HCS South	134.60	-	32	103	-	-
HCS Rm/Brd	4,903.70	1,708	1,708	1,488	-	-
ICF Residential Homes	134,951.33	133,601	1,351	-	-	-
ARPA - HCS & TxHmL	-	-	-	-	-	-
Block Grant/TANF-Title XX Gen Revenue	47,396.26	23,702	23,694	-	-	-
CCBHC Samsha Grant (799) 1370-6500	87,718.14	87,718	-	-	-	-
MCOT-Hotline ARPA	13,886.01	4,641	9,245	-	-	-
HR133-Outpatient Cap Activity **	61,964.89	14,711	19,066	28,189	-	-
Supported Employment	11,025.00	-	11,025	-	-	-
Day Hab Billings (Private Providers)	38,972.62	19,461	12,963	4,399	907	1,243
1048 IDD Billed Svcs	11,435.74	5,858	5,578	-	-	-
ECI Grant Revenue	258,906.31	117,782	-	141,125	-	-
ECI Respite	-	-	-	-	-	-
ECI TWC Grant	725.49	363	-	362	-	-
ECI Priv Ins	13,385.99	9,522	2,100	563	300	901
ECI Medicaid	32,542.30	32,073	311	-	158	-
ECI Managed Care	47,361.50	43,252	1,244	1,760	1,106	-
ECI Chip	186.79	-	-	187	-	-
A/R Other Employees	1,068.29	-	1,068	-	-	-
A/R Employee Insurance (Cobra)	-	-	-	-	-	-
TCOOMMI GRANT \$124,705.77 **	93,536.99	33,028	30,772	29,737	-	-
TCOOMMI Vehicle allotment (\$31,168.78)	31,168.78	-	-	-	-	31,169

TDCJ Contract-Greenville **	16,684.41	6,677	5,302	4,706	-	-
TDCJ - Sherman/Bonham/Paris **	45,400.17	16,967	15,030	13,404	-	-
Fannin County Drug Court	6,000.00	3,000	3,000	-	-	-
Hopkins County Drug Court	3,500.00	3,500	-	-	-	-
Titus County Drug Court	1,000.00	1,000	-	-	-	-
DSHS Region 3	12,967.09	12,967	-	-	-	-
DSHS Region 4	12,324.55	12,325	-	-	-	-
DSHS MHFA Outreach	9,537.39	4,952	4,585	-	-	-
ICF Upper Payment Limit	130,050.00	32,489	32,536	32,536	32,489	-
SAC Prog -Hunt County	1,345.90	1,346	-	-	-	-
ECC - (Enhanced Comm Coord)	21,335.39	10,712	10,624	-	-	-
Comm Education (Curt Pitton)	5,260.80	5,261	-	-	-	-
1115 Waiver Fed Share	-	-	-	-	-	-
CCP (Charity Care Pool)	1,068,837.00	531,390	537,447	-	-	-
Misc Revenue - 1370-1200 - \$154,110.97						
**FY23 Forfeiture Bal Due	22,819.09	-	22,819	-	-	-
**FY22 Amerigroup DPP(1) settle-up	91,487.78	-	91,488	-	-	-
**FY22 Parkland DPP(1) settle-up	39,365.21	-	39,365	-	-	-
**FY22 BCBS DPP(1) settle-up	67.52	-	68	-	-	-
FY22 Cook DPP(1) settle-up \$371.37	371.37	-	371	-	-	-
FY24						
Oct Bal Due	4,100,253.30	GL bal	4,100,253.30	bal ck	\$	-

AGENDA ITEM NO. 12.08.23
Behavioral Health Director

Recommended Board Action:

None. Informational purposes only.

Rationale:

1. FY24 Performance Contract Measures

- General Revenue-Adult Improvement Target-20%
 - i. Not met for November-19%
- General Revenue-CMH Improvement Target-25%
 - i. Not met for November-21.2%
- Utilization Management Department and Director of Learning & Development will provide targeted training to staff that administer the assessment used to determine improvement

2. Coordinated Specialty Care – First Episode of Psychosis (CSC-FEP)

- Awarded stated funding for FY24 and FY25 - \$374,500.00/year
- Serves individuals ages 15-30 that are experiencing their first episode of psychosis (within two years of their initial diagnosis)
- Focuses on empowering the individual to lead a self-directed life within the community
- Will provide services in the seven General Revenue Counties

3. Collaboration with Titus County

- Meetings with Titus County Judge, Kent Cooper and Titus Regional Medical Center Administrator, Terry Scoggin
- Interest in a county collaboration to address Mental Health Crisis in the county
- Two funding opportunities:
 - i. Mental Health Grant Justice-Involved Individuals
 - ii. Construction Grant Program for Mental Health Facilities

AGENDA Item No.: 12.09.23

Intellectual and Developmental Disabilities Director's Report

Recommended Board Action: None- Information Only

1. Home and Community Services (HCS):

- HCS Terrell has 1 bed available.
- Re-organization of Central Waiver programs

2. Individual Skills and Socialization (ISS):

- Greenville, Ennis & Rockwall received ISS licenses.
- Terrell ISS is entering a float in the Christmas Parade.
- Holiday parties and lots of community service.

3. ICF:

- Ermine Group Home has 1 bed available
- Sayle Street & Ermine group home Annual Surveys.
 - Life Safety Code issues noted.

4. Employment:

- Serving 5 TWS individuals- 3 Supported Employment and 2 Job Placement contracts

5. Vocational Apprenticeship Program (VAP):

- 4 apprentices in Kaufman County and 6 apprentices in Lamar County received apprenticeship certificate detailing their chosen work field they mastered in the Vocational Apprenticeship Program. Staff were recognized for their contributions.
- 7 new applicants for the VAP for 2024
- Awaiting another PO to begin January 2024, VAP contract.

6. Outpatient Biopsychosocial Intervention Team (OBI):

- Serving 25 individuals with 1 new enrollment.
- Currently 5 individuals are on the waitlist, intake will be based on clinical priority of need.

7. Telehealth:

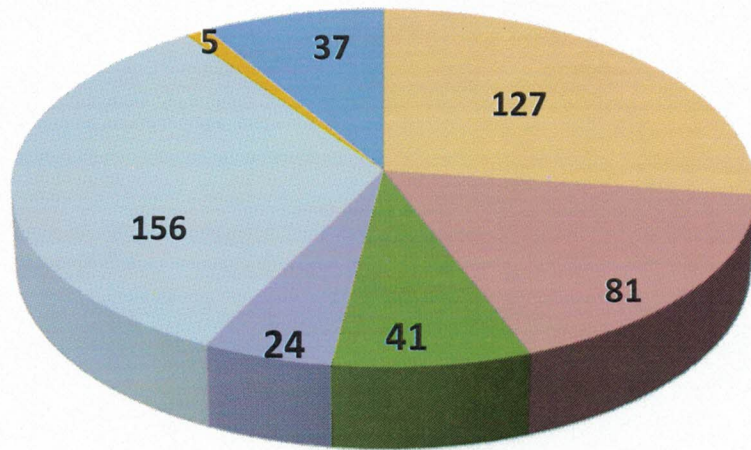
- Follow-ups (116) = Corsicana -14, Greenville -24, Mt. Pleasant -21, Paris - 8, Sulphur Springs-8, Terrell-19, Waxahachie-22, No Shows-23, New Evals-3, and Hospital Discharges-2

AGENDA Item No.: 12.09.23

Intellectual and Developmental Disabilities Director's Report

Recommended Board Action: None Information Only

Total Number of Individuals Served in October 2023-471



■ HCS 127 ■ PASRR: 81 ■ TxHML 37 ■ ICF: 24 ■ GR: 156 ■ TWS: 5 ■ Private 41

AGENDA ITEM NO. 12.10.23

Contracts & Quality Management Report

1. CONTRACTS

- We received amendments extending the NTBHA MH and SUD contracts as well as an extension for the NTBHA PASRR Interlocal Agreement.

2. PLANNING

- PNAC
 - Met on November 11, 2023, and the next meeting is scheduled for January 30, 2024.
 - Reviewed results from the Coffee House and NCQA satisfaction surveys. Members liked the results of the surveys but recommended trying a different method of data collection for the NCQA survey since only 25% of the individuals/families called could be reached.

3. RIGHTS/ABUSE, NEGLECT & EXPLOITATION ALLEGATIONS

GR MH

- 1 unconfirmed – Mt. Pleasant

IDDA

- 1 unconfirmed

4. QM MH, NTBHA & SUBSTANCE ABUSE

- Performance Measures: We missed Adult Improvement with 19% and the target is 20%. Adult Improvement is adults authorized in a full level of care that show improvement in at least one of the ANSA domains/modules. We also missed Child Improvement with 21.2%, and the target is 25%. Child Improvement is children in a full level of care that show improvement in at least one CANS domain/module.
- BHS Multi-Program Needs & Capacity Assessment: We applied for the Rider 52 BHS Multi-Program Needs and Capacity Assessment (NCA) and received notification on November 1, 2023, that we were approved for additional funding. A revised budget was submitted to HHSC on November 9, 2023.
- HHSC Yes Waiver Audit: We received notification on November 10, 2023, that HHSC will be auditing our Yes Waiver program. All documents will be submitted to HHSC before their requested due date.
- Superior Audit: Superior will be conducting a chart audit between December 11 – 20, 2023. All requested documents will be submitted before December 20, 2023.
- NTBHA Mystery Caller: NTBHA conducted mystery calls in October. We received a request for a CAP for messages not being returned and staff not asking callers if they were experiencing suicidal/homicidal ideation or if they were in crisis. A corrective action plan will be submitted to NTBHA by December 15, 2023.
- TDCJ Site Visit: TDCJ visited the Sherman location on October 17, 2023. The visit resulted in zero findings.
- Peer Review:
 - Prescriber: 0 charts scored below 70%, difference between peer and QM scores is 0%.
 - MCOT: 0 charts scored below 70%, difference between peer and QM scores is 1%.
 - SUD: 0 charts scored below 70%, difference between peer and QM scores is 0%.
 - C/A: 0 charts scored below 70%, difference between peer and QM scores is 6%.
 - ACT: 0 charts scored below 70%, difference between peer and QM scores is 13%.
 - QMHP: 1 chart scored below 70%, difference between peer and QM scores is 6%.
- RN: 0 charts scored below 70%, difference between peer and QM scores is 4%.

5. IDDA

- Service Target: We missed our service target for the month of October with 156, our target is 169.
Corporate Compliance: QM conducted a corporate compliance investigation regarding progress notes being voided in the EHR after we had received payment for the services. During the investigation, the staff resigned.

AGENDA ITEM NO. 12.11.23

Human Resources Report

Recommended Board Action:

None; information only.

1. Staffing Issues

➤ **Headcount**

We had a total of 444 authorized FTEs and 408 employees in the month of October. We filled 11 positions, nine of which were new hires and two internal transfers. We ended the month with 40 vacancies.

➤ **Separations**

We had eight separations seven of them were voluntary and one involuntary; the involuntary separation was due to performance issues. Voluntary separations were due to; stress, better job opportunity, and one left to take care of her son.

➤ **Recruitment**

Some of the sources used to advertise our openings were Indeed, Newspapers, Colleges and Universities website, Facebook, Texas Workforce Commission website, Chambers of Commerce, HRSA-Health Resources and Services Administration portal, and on the Healthcare Job Posting website.

➤ **Training and Development**

We had 18 classes with a total of 57 participants. Trainings for this month were CPR (*Cardio Pulmonary Resuscitation*), SAMA (*Satori Alternatives for Managing Aggression*), ASIST (*Applied Suicide Intervention Skills Training*), and SOSAM (*Supervision of Self-Administration of Medication*).

2. Compensation & Benefits

➤ We did not have any COVID reports during October, however, last week we had over ten employees reporting exposure and positive test results.

➤ So far, there is one large claim, which also exceeds the stop loss limit.

