

Agenda

HELEN FARABEE CENTERS BOARD OF TRUSTEES

July 2, 2026

11:00 AM

Sue Nunn conference Room, 1000 Brook Ave., Wichita Falls, TX

Agenda Topics

MEETING STARTS AT 11:00 A.M.

070226-1 CALL TO ORDER

J. Brian Eby

A. INTRODUCTION OF GUESTS

070226-2 PRESENTATIONS

A. OPEN CITIZEN COMMENT TO THE BOARD *“Texas law in the Open Meetings Act permits a member of the public or a member of the governmental body to raise a subject that has not been included in the notice for the meeting, but any discussion of the subject must be limited to a proposal to place the subject on the agenda for a future meeting.”*

070226-3 APPROVAL OF MINUTES

J. Brian Eby

Recommended Action: That the Board of Trustees approves the minutes of the May 2026 Board of Trustee meetings.

Page 4

Citizen Comment:

070226-4 TRAINING

UM/QM Services.....Cara Mullenix-Artigue

Page 9

Human ResourcesKelly Wooldridge

Page 33

Community and Consumer Support.....Connie Johnston

will be distributed during the meeting

070226-5 RECOMMENDATIONS

A. BOARD OF TRUSTEES

1) Ad-Hoc Committee To Recommend Slate Of Officers

Melissa Collins

Recommended Action: That the ad-hoc committee recommends a slate of officers for fiscal year 2027.

Page 42

Citizen Comment:

2) Veteran on the Board

Melissa Collins

Recommended Action: Welcome Ashley Davin to the Board.

Page 43

Citizen Comment:

B. BUDGET AND FINANCE	
1) <i>Financial Statements April</i>	Linda Poenitzsch
Recommended Action: That the Board of Trustees approves the financial statements for April and May 2026.	Page 48 April Page 57 May
Citizen Comment:	
3) <i>Status of Investments</i>	Linda Poenitzsch
Recommended Action: That the Board of Trustees review and approve the status of investments.	Page 66
Citizen Comment:	
C. CONTRACTS AND PLANS	
<i>No Agenda Items</i>	
D. FACILITIES AND EQUIPMENT	
1) <i>Plumbing Repairs at 516 Denver St.</i>	Bruce Sperry
Recommended Action: That the Board of Trustees approve the expenditure of \$14,000.00 for sewer repairs at 516 Denver St.	Page 69
Citizen Comment:	
E. POLICIES AND PROCEDURES	
1) <i>Policy Statement Summary</i>	Cara Mullenix-Artigue
Recommended Action: That the Board of Trustees review and approve the Policy Statements.	
100.1.2 Board of Trustees Organizational Structure (Procedure), 100.1.11 Board of Trustees Veteran Board Members (Procedure)	
200.1.14 Tobacco Free Policy Statement – No changes	
300.1 Financial Services Policy Statement	
300.5 Lease Policy Statement	
500.1 Clients Rights Policy Statement – No changes	
900.1.11 Jail Based Competency Restoration (JBCR) Policy Statement	
900.12 Veterans Services – Policy Statement – No changes	
Citizen Comment:	Page 77
F. PROGRAM AND PERSONNEL	
<i>No Agenda Items</i>	
070226-6 QUARTERLY REPORTS	
A. ESSENTIAL SERVICES AND CLINICAL ACCOUNTABILITY	
1) <i>Essential Services Report</i>	Cara Mullenix-Artigue
Recommended Action: Information Only Item	Page 119
Citizen Comment:	

B. PLANNING AND NETWORK ADVISORY COMMITTEE	
1) <i>PNAC 3rd Quarter Report</i>	Connie Johnston
Recommended Action: Information Only Item	Page 124
Citizen Comment:	
C. EXTERNAL AUDITS	
1) <i>SUD External Audits</i>	Cara Mullenix-Artigue
Recommended Action: Information Only Item	Page 135
Citizen Comment:	
2) <i>Superior MCO External Audit 2nd Qtr</i>	Cara Mullenix-Artigue
Recommended Action: Information Only Item	Page 136
Citizen Comment:	
D. TEXAS COUNCIL BOARD OF DIRECTORS MEETING	
<i>No Agenda Items</i>	
070226-7 EXECUTIVE DIRECTOR'S REPORT	Gianna Harris
A. ADMINISTRATION AND BOARD OF TRUSTEES	
B. BUDGET	
C. LEGISLATIVE ISSUES	
D. SERVICES	
E. HUMAN RESOURCES	
070226-8 CLOSED SESSION	
In accordance with Chapter 551.074 of the Government Code, the Board of Trustees will now meet in closed session for the purpose of discussion of personnel matters.	
Review and Discussion of Executive Director Evaluation	
070226-9 OPEN SESSION	
Results of Closed Session	
070226-10 ANNOUNCEMENTS	J. Brian Eby
A. NEXT MEETING	
<i>11 a.m., Thursday, September 3, 2026</i> at the Administration Building, Sue Nunn Conference Room, 1000 Brook Ave., Wichita Falls, TX.	
070226-11 OTHER BUSINESS	
070226-12 ADJOURN	J. Brian Eby

Minutes	HELEN FARABEE CENTERS BOARD OF TRUSTEES	
	May 7, 2026 11:00 AM TELEVIDEO & 1000 Brook Ave., Sue Nunn Conference, Wichita Falls, TX	
Board of Trustee Members Present:	J. Brian Eby, Chairman; Cindy Barksdale; David Cook, Cynthia Kessler, Jessica Traw; Kathy Thorp, Jan Driver Ward, Sheriff Darcy White	
Board of Trustee Members Absent:	Tom Johnson, VACANT, Sheriff Babcock	
Staff Present:	Gianna Harris, Executive Director; Andy Martin, Associate Executive Director; Linda Poenitzsch, Financial Operations Director; Connie Johnston, Director of Community, Consumer Support & Client Rights, Bruce Sperry Facilities Manager, Kelly Wooldridge, Director of Human Resources	
Other Staff and Guests Present:	Tom Taylor, City Councilman and Liaison Dana Tilton, Place 5 Candidate Ashley Davin, Veteran candidate Melissa Collins, Board of Trustee Liaison, Recorder	
AGENDA TOPICS		
050726-1 CALL TO ORDER		
J. Brian Eby, Board Chair , called meeting to order at 11:00 A.M. with seven (7) Board Members in attendance.		
050726-2 PRESENTATIONS		
A. Open Citizen Comment to The Board		
No comments were presented to the Board.		
050726-3 APPROVAL OF MINUTES		
Recommended Action: That the Board of Trustees approves the minutes of the March 2026 Board of Trustee meeting.		
The Board of Trustees reviewed and approved the minutes of the March 2026 Board of Trustee meeting.		
Motion: Jan Driver Ward	Affirmative: 7	
Second: Cynthia Kesler	Negative: 0	
Citizen Comment: None		
050726-4 TRAINING		
<i>No Agenda Items this month.</i>		

050726 - 5 RECOMMENDATIONS

A. BOARD OF TRUSTEES

1) Executive Directors Performance Evaluation

Recommended Action: That the Board of Trustees approve the Executive Director’s Evaluation Tool prior to the Fiscal Year 2027 Evaluation, and that the Chairman appoint a coordinator.

The Board of Trustees approved the evaluation tool and appointed David Cook to be the coordinator.

Motion: **Cindy Barksdale** Affirmative: 7

Second: **David Cook** Negative: 0

Citizen Comment: None

2) Appoint Ad-Hoc Committee To Review Slate Of Officers

Recommended Action: That the Chair of the Board of Trustees appoint an ad-hoc committee to review the functions of the officers and recommend a slate of officers for fiscal year 2027.

The chair appointed Jan Driver Ward, Jessica Traw, and Cindy Barksdale to review the functions of the officers and recommend a slate of officers for FY2027.

Motion: **Kathy Thorp** Affirmative: 7

Second: **Cynthia Kesler** Negative: 0

Citizen Comment: None

3) Veteran on the Board

Recommended Action: That the Board of Trustees approve the appointment of candidate Ashley Davin to fill the Veteran on the Board position according to SB 1580.

The Board of Trustees approved the appointment of Ashley Davin to fill the Veteran on the board position according to SB1580.

Motion: **Kathy Thorp** Affirmative: 7

Second: **Cynthia Kesler** Negative: 0

Citizen Comment: None

4) Board of Trustees Meeting Schedule

Recommended Action: That the Board of Trustees approves the Meeting and Training Schedule for fiscal year 2027.

The Board of Trustees approved the Meeting and Training Schedule for fiscal year 2027.

Motion: **Kathy Thorp** Affirmative: 7

Second: **Jessica Traw** Negative: 0

Citizen Comment: None

B. BUDGET AND FINANCE

1) Revised Budget

Recommended Action: That the Board of Trustees approve the FY 2026 Budget Revisions.

The Board of Trustees reviewed and approved the FY 2026 Budget Revisions.

Motion: **Kathy Thorp** Affirmative: 7

Second: **Cindy Barksdale** Negative: 0

Citizen Comment: None

2) *Financial Statements February*

Recommended Action: That the Board of Trustees approves the financial statements for February 2026.

The Board of Trustees approved the financial statements for February 2026.

Motion: **Cynthia Kesler** Affirmative: 7

Second: **Jan Driver Ward** Negative: 0

Citizen Comment: None

3) *Status of Investments*

Recommended Action: That the Board of Trustees review and approve the status of investments.

The Board of Trustees reviewed and approved the status of investments.

Motion: **Kathy Thorp** Affirmative: 7

Second: **Jan Driver Ward** Negative: 0

Citizen Comment: None

4) *Financial Statements March*

Recommended Action: That the Board of Trustees review and approve the financial statements for March 2026.

The Board of Trustees reviewed and approved the financial statements for March 2026.

Motion: **David Cook** Affirmative: 7

Second: **Cindy Barksdale** Negative: 0

Citizen Comment: None

C. CONTRACTS AND PLANS

1) *Approve Lease Extension 1601 9th Street In Wichita Falls*

Recommended Action: That the Board of Trustees approves the lease renewal for 1601 9th Street in Wichita Falls with 1601 9th Venture, LLC.

The Board of Trustees approved the lease renewal for 1601 9th St. in Wichita Falls with 1601 9th Venture, LLC.

Motion: **David Cook** Affirmative: 7

Second: **Jan Driver Ward** Negative: 0

Citizen Comment: None

D. FACILITIES AND EQUIPMENT

1) *ECI Vehicle Purchase*

Recommended Action: That the Board of Trustees approves the purchase of 8 vehicles for the ECI program not to exceed \$190,000.

The Board approved the purchase of 8 vehicles for the ECI program not to exceed \$190,000..

Motion: **Cynthia Kesler** Affirmative: 6 (David Cook recused)

Second: **Cindy Barksdale** Negative: 0

Citizen Comment: None

2) *Maintenance Van Purchase*

Recommended Action: That the Board of Trustees approves the purchase of 2 vehicles for the maintenance department not to exceed \$84,000.

The Board approved the purchase of 2 vehicles for the maintenance department not to exceed \$84,000.

Motion: **Cindy Barksdale** Affirmative: 6 (David Cook recused)

Second: **Jan Driver Ward** Negative: 0

Citizen Comment: None

E. POLICY AND PROCEDURE

1) Policy Statement Summary

Recommended Action: That the Board of Trustees review and approve these Policy Statements:

- 100.2 Administration Policy Statement – No changes
- 200.1.2 Performance-Based Work from Home Policy Stmt – No changes
- 300.2 Contracts and Purchasing Policy Statement – No changes
- 300.3 Property Management Policy Statement – No changes
- 300.4 Reimbursement Policy Statement – No changes
- 500.1.1 Restraint/Seclusion Policy Statement – No changes
- 500.2 Community Relations Policy Statement – No changes
- 700.2 Infection Control Policy Statement – No changes
- 800.3 Utilization Management Policy Statement – No changes
- 800.4 Medical Records Policy Statement – No changes
- 900.5 IDD Authority Policy Statement – No changes

The Board of Trustees reviewed and approved all Policy Statements as presented.

Motion: **David Cook**

Affirmative: 7

Second: **Kathy Thorp**

Negative: 0

Citizen Comment: None

F. PROGRAM AND PERSONNEL

1) Holiday Schedule FY27

Recommended Action: That the Board of Trustees approve the proposed Holiday Schedule for fiscal year 2027 beginning September 1, 2026.

The Board of Trustees approved the proposed Holiday Schedule for fiscal year 2027 beginning September 1, 2026.

Motion: **Jan Driver Ward**

Affirmative: 7

Second: **Cindy Barksdale**

Negative: 0

Citizen Comment: None

050726-6 QUARTERLY REPORTS

A. ESSENTIAL SERVICES AND CLINICAL ACCOUNTABILITY

1) *Essential Services Report*

Recommended Action: Information Only Item

Andy Martin reported.

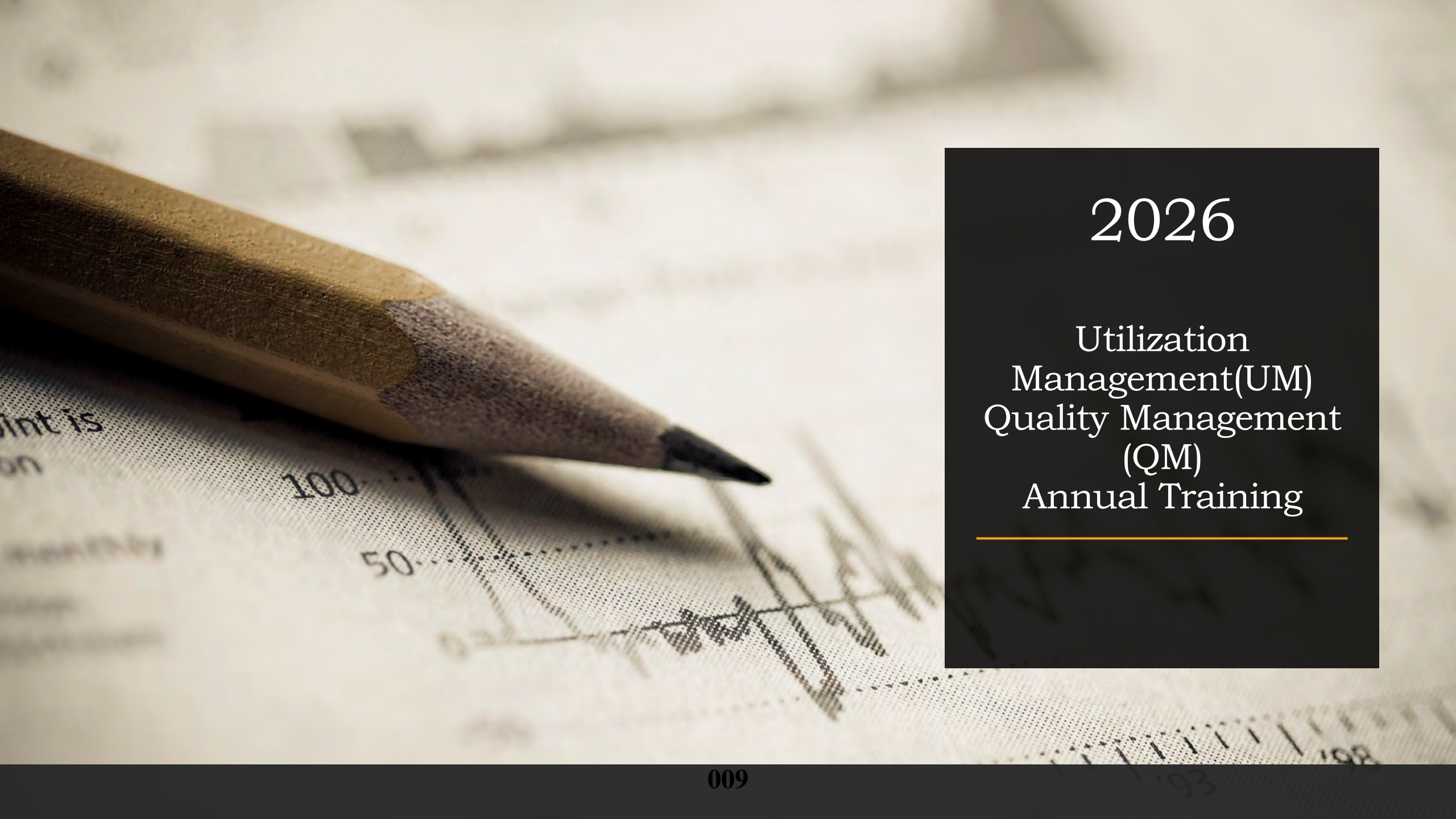
B. PLANNING AND NETWORK ADVISORY COMMITTEE

1) *PNAC 1st Quarter Report*

Recommended Action: Information Only Item

Connie Johnston reported.

2) <i>PNAC 2nd Quarter Report</i>	
Recommended Action: Information Only Item	
Connie Johnston reported.	
C. EXTERNAL AUDITS	
1) <i>Superior MCO External Audit Report</i>	
Recommended Action: Information Only Item	
Andy Martin reported.	
2) <i>ECI Subrecipient Determination External Audit Report</i>	
Recommended Action: Information Only Item	
Andy Martin reported.	
D. TEXAS COUNCIL BOARD OF DIRECTORS MEETING	
1) <i>Report on TX Council Board of Directors Meeting in April</i>	
Recommended Action: Information Only Item	
J. Brian Eby reported.	
E. FACILITIES MANAGEMENT	
<i>No Agenda Items</i>	
050726 - 7 EXECUTIVE DIRECTOR'S REPORT	
<i>Nothing to Report</i>	
050726-8 CLOSED SESSION	
<i>No Agenda Items</i>	
050726-9 OPEN SESSION	
<i>No Agenda Items</i>	
050726-10 ANNOUNCEMENTS	
A. <i>Next Meeting</i> - The next meeting will be held at 11 A.M., Thursday, July 2, 2026 at the Sue Nunn Conference Room, Administration Bldg, 1000 Brook Ave. Wichita Falls, TX.	
050726-11 OTHER BUSINESS	
<i>No other business</i>	
050726-12 ADJOURN	
The Board of Trustees meeting was adjourned by Board Chairman, J. Brian Eby at 11:48 am.	
Approved as presented:	Approved as corrected:
July 2, 2026	July 2, 2026



2026

Utilization
Management(UM)
Quality Management
(QM)
Annual Training

Who are we?

UM/QM MENTAL HEALTH STAFF

Cara Mullenix-Artigue, Director

Sandra Rapson, Quality Assurance Coordinator

Who are we?

UM/QM MENTAL HEALTH STAFF

Courtney Brown, Utilization Management Reviewer

Taryn Miller, Quality Management Reviewer

Who are we?

UM/QM INTELLECTUAL DEVELOPMENTAL DISABILITY (IDD) STAFF

Darla Anderson, Monitoring & Compliance (M&C) Specialist
Supervisor

Edith Sconce, Monitoring & Compliance (M&C) Coordinator

Who are we?

UM/QM MH & INTELLECTUAL DEVELOPMENTAL DISABILITY (IDD) MONITORING & COMPLIANCE STAFF

Kerrie Ribble, Monitoring & Compliance (M&C) Specialist

Kristi Flores, Monitoring & Compliance (M&C) Specialist

What do we do?

INTERNAL AUDITS

Adult & Child Mental Health – 396 – this includes Medical Services & Miscellaneous Audits, i.e., front desk, House Bill (HB) 4, crisis services, peer provider services, TCOOMMI, intakes & counseling

What do we do?

INTERNAL AUDITS

IDD Services – 309 – this includes General Revenue, Community First Choice, PASRR, Home and Community Based Services, TX Home Living

Substance Abuse Services – 101 – this includes admission, counseling, group notes, treatment planning and education

What do we do?

EXTERNAL AUDITS - MH

Quarterly Superior Medicaid Managed Care Organization (MCO)

This MCO is extremely strict in their reviews and most of our training of staff is governed by these quarterly reviews.

What do we do?

EXTERNAL AUDITS - MH

Certified Community Behavioral Health Clinic (CCBHC)

We learned in February 2026 we were re-certified as a CCBHC with an overall score of 98%. We will “do it again” in four (4) years.

What do we do?

EXTERNAL AUDITS - IDD

HHSC typically audits/reviews annually to conduct a thorough review on all IDD programs; however, FY25 HFC IDD department scored a perfect score and will not be reviewed in FY 26.

HFC is NUMBER ONE in the state as of FY 25!!

What do we do?

SPECIAL PROJECTS

Continued Quality Improvement (CQI)

Increase Skills Training Sessions

What do we do?

SPECIAL PROJECTS

Continued Quality Improvement (CQI)

Monitoring “At Risk”

What do we do?

PLANS

Quality Management Plan (updated annually)

Cultural Competency Plan (updated every two (2) years – to be updated again FY 27)

Needs Assessment (updated with CCBHC recertification)

What do we do?

PLANS

Staffing Plan (due November 2026)

What do we do?

TRAIN STAFF

Seeking Safety (curriculum) done quarterly

Trauma Informed Care done quarterly

Concurrent/Collaborative Documentation done quarterly

What do we do?

TRAIN STAFF

Utilization Management (UM) training done with all new employees

ANSA/CANS training required by HHSC and done twice annually

Person Centered Recovery Plan training done with ANSA/CANS training twice annually

What do we do?

THE DAILY GRIND

Cara – TRR authorizations; Policies & Procedures; Contracts; Death Reviews; Internal audits; External audits; Special projects

Sandra – Internal audits; External audits; TRR authorizations; Corrective Action Plan (CAP) monitoring; Special projects

What do we do?

THE DAILY GRIND

Courtney – TRR authorizations; Counseling waitlist; Case assignments; Caseload transfers; Internal reports; Employee training

Taryn – Internal audits; Form F; Employee training; MMPI's, caseload assignments, Credentialing reviews, and Caseload transfers; Special projects

What do we do?

THE DAILY GRIND

Darla – CARE reports; CARE corrections; CMBHS corrections; SmartCare corrections; Data entry in CARE & CMBHS; IDD & MH internal audits; Special projects

Edith – IDD Internal audits; Data entry; Internal reports; Employee training; Special projects

What do we do?

THE DAILY GRIND

Kerrie – IDD Internal audits; Employee training; Special projects

Kristi – CARE data entry; SmartCare data entry; MH internal audits; Special projects

What's new?

THE OFFICE OF INSPECTOR GENERAL (OIG)

In February 2026 Helen Farabee learned the OIG would be reviewing us.

Cara & Sandra are the points of contact and to date have provided the OIG with 123 documents.

What's new?

THE OFFICE OF INSPECTOR GENERAL (OIG)

The 123 documents do not include emails, questions, responses, phone calls, TEAMS meetings, etc.

To date, they have requested 115 client charts for review.

What's new?

THE OFFICE OF INSPECTOR GENERAL (OIG)

Time spent to date with all staff required to help Cara & Sandra is probably 1000 hours. 😊

The end!

QUESTIONS?

Comments?

Feedback?



HUMAN RESOURCES

THE PEOPLE DEPARTMENT





Louisa Howard
Training/Development
Safety Officer



Emilee Brackett
New Employee
Coordinator



Kim Yandell
Employee Benefits &
Workers Comp.

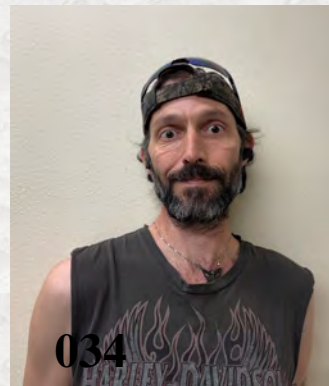
HR TEAM



Jessica Odom
Credentialing
Specialist



**Sharon
Underwood**
Clerk Trainee-
shredder

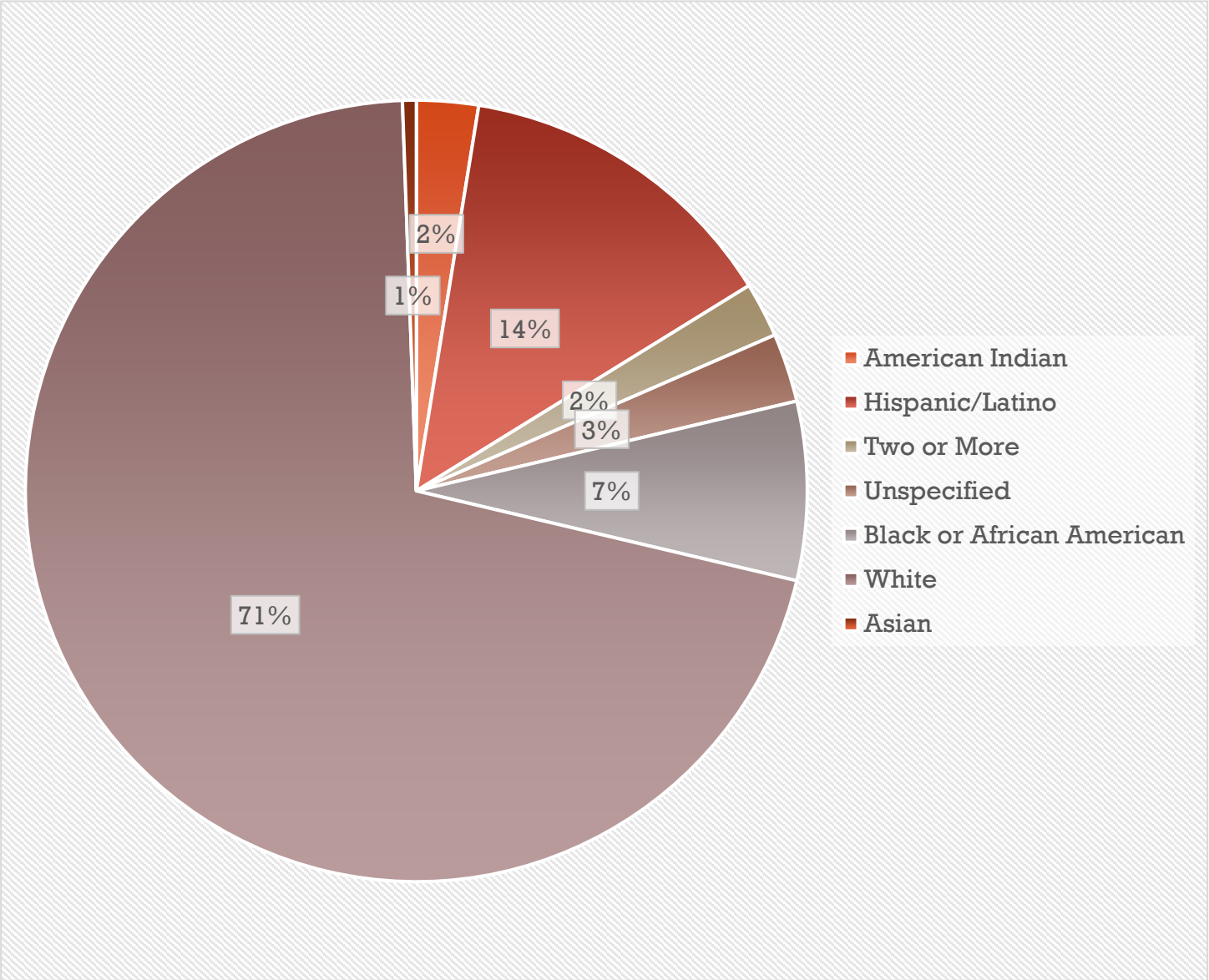


Billy Stevens, JR
Clerk Trainee-
shredder



EEO INFO FY25

- Avg employee age: 44.9
- Sex:
 - F -207
 - M -41
- Ethnicity (chart)



Captive Health Insurance Plan

- Started in 2021
- Includes 9 Centers
 - Betty Hardwick, Central Plains, Gulf Coast, Nueces Center, Spindletop, Texana, Texoma Community, & Tropical Texas
- Positive experience to date
- For current plan year, increased monthly plan cost to employees by \$3 for Base Plan, \$3.32 Co-Pay Plan, and \$7.06 for BuyUp Plan.

Currently 179 employees on the plan and 199 total participants

Center paid portion increased to \$980.42/month

EMPLOYEE
HEALTH
INSURANCE



Location	WF	V,Q,C	Wise	Young	Hardeman/ Foard	Bowie
	12.2%	3.9%	3.5%	2.4%	2%	.78%
Qty	31	10	9	6	5	2

Dept.	AMH	CAS	ECI	IDDA	MH Peer	Admin	Clerk	Med Staff	Med Rec	SAS	Other
	7.8%	0%	1.2%	2.7%	.78%	3%	6.3%	1.2%	0%	1.2%	.4%
Qty	20	0	3	7	2	8	16	3	0	3	1

CENTER TURNOVER FY26' ISH (JULY 1-MAY 31)

- Center wide 25%



WORKERS' COMPENSATION CLAIMS



Total Claims FY26 (thru May)

17 ↑

Claims requiring medical attention

3 ↓

Claim expenses paid out to date

\$70,133 ↑

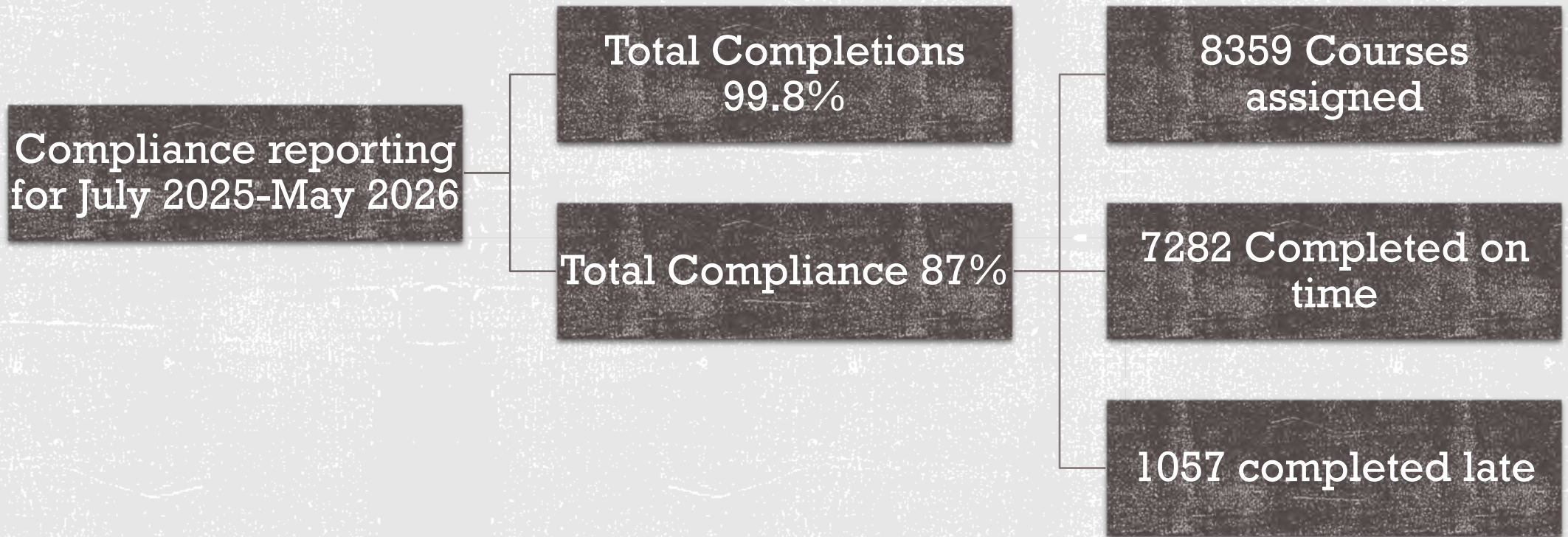
Highest number of incidents occur on Thursdays, Fridays, followed by Wednesdays.

Highest number of claims come from employees 56+ years, then evenly distributed through all other age bands.

MVA followed by falls are now the top incurred claims cost.



EMPLOYEE ONLINE TRAINING





- BLOOD DRIVES 8/26, 12/17, 5/14, & UPCOMING 10/22
- TEXAS COUNCIL RISK MGMT FUND TRAININGS
- EMPLOYEE APPRECIATION DAY 9/23

- JOB FAIRS
- MONTHLY NEWSLETTER
- RETIREMENT/SAVINGS TRAINING



**Leadership is not about being in charge. Leadership
is about taking care of those in your charge.**

-Simon Sinek



5 RECOMMENDATIONS

A. BOARD OF TRUSTEES

1) AD-HOC COMMITTEE TO RECOMMEND SLATE OF OFFICERS FOR FY 2027

RECOMMENDED ACTION: That the ad-hoc committee recommend a slate of officers for fiscal year 2027.

BACKGROUND INFORMATION:

- A. Board of Trustee Officer appointments are for one-year terms.
- B. Current Board of Trustee officers:

Chair:

J. Brian Eby

Current Office Term Began: April 6, 2023
Current Board Term Expires: August 31, 2026

Vice-Chair:

Kathy Thorp

Current Office Term Began: April 6, 2023
Current Board Term Expires: August 31, 2027

Secretary:

Jessica Traw

Current Office Term Began: September 1, 2025
Current Board Term Expires: August 31, 2027

SPECIFIC REASONS WHY THESE ACTIONS ARE NECESSARY FOR THE CENTER:

To allow the Board of Trustees to vote for officers prior to the new fiscal year in September 2026.

- 5 RECOMMENDATIONS**
 - A. BOARD OF TRUSTEES**
 - 2) VETERAN ON THE BOARD**
-

RECOMMENDED ACTION: Welcome Ashley Davin to the Board.

BACKGROUND INFORMATION:

- A. Senate Bill (SB) 1580 passed the 89th Legislature and was signed into law by Governor Abbott. This law requires the governing body of the Centers to include a veteran selected by a majority of the governing body members.
- B. This addition aims to ensure that veterans have representation in local mental health authority governance, potentially bringing a unique perspective to community health decision making bodies.
- C. Local Mental Health Authorities will have until September 1, 2026 to implement this change, and the bill takes effect on September 1, 2025.
- D. SB 1580 mandates a structural change to the governing body of the center. This legislation alters board composition, quorum calculations, and bylaw requirements for every LMHA in Texas. Please refer to the Policy Statement Summary for details on the new procedure.

SUPPORTING INFORMATION:

- A. Senate Bill (SB) 1580 of the 89th Texas Legislature.
- B. The new policy statement defines the role of the Veteran.

SPECIFIC REASONS WHY THESE ACTIONS ARE NECESSARY FOR THE CENTER:

This allows Helen Farabee Centers to ensure compliance with a new Governing Body requirement by the State of Texas, to ensure veteran representation in local mental health governance and to enhance the relevance and responsiveness of LMHAs to populations that often experience distinct mental health challenges.

From: [Poenitzsch, Linda S.](#)
To: [Collins, Melissa A.](#)
Subject: sb1580
Date: Thursday, May 7, 2026 2:34:21 PM
Attachments: [image002.png](#)
[image003.png](#)

Like
Dislike

Voting Status of the Veteran Seat in SB1580

SB1580 does **not** explicitly state whether the veteran member added to a local mental health authority (LMHA) governing body is a voting member. The bill's language requires that the veteran be **selected by a majority of the governing body members** and includes them as part of the board's composition www.texaspolicyresearch.com+1. However, it does not define the member's voting rights.

In Texas, the **sheriff** currently serves as a nonvoting ex officio member on LMHA boards www.texaspolicyresearch.com. SB1580 retains that structure and adds the veteran seat, but it does not change the sheriff's nonvoting status. The veteran seat is created as a **new member** of the governing body, and while the bill does not specify voting rights, the default in Texas board governance is that all members are voting unless otherwise stated.

The **Legislative Budget Board** and other analyses note that the bill's purpose is to ensure veteran representation in decision-making, implying the member should have a role in policy and service decisions www.texaspolicyresearch.com. However, the **exact voting authority** would depend on the LMHA's bylaws, which must be amended to create the seat jdkey.com. If the bylaws do not explicitly state "voting," the member may be treated as nonvoting, similar to the sheriff.

Bottom line:

- SB1580 does not mandate that the veteran seat be voting by default.
- The member's voting status will be determined by the LMHA's bylaws, which must be updated to comply with the bill.
- Until those bylaws are amended, the veteran's role could be advisory or voting depending on the board's rules.
- The bill's intent is to give veterans a voice in governance, but the legal default without explicit bylaw language is that the seat is created as a voting member unless otherwise specified.

Linda Poenitzsch
Chief Financial Officer
Helen Farabee Centers
PO Box 8266
Wichita Falls, TX 76307
940-397-3117
Poenitzschl@helenfarabee.org

From: [Poenitzsch, Linda S.](#)
To: [Collins, Melissa A.](#)
Subject: sb1580
Date: Thursday, May 7, 2026 2:27:30 PM
Attachments: [image001.png](#)

SB1580: Government Affairs Overview

SB1580 mandates a compulsory structural change to the governing bodies of all Local Mental Health Authorities (LMHAs), requiring the addition of a veteran member selected by the board. This legislation alters board composition, quorum calculations, and bylaw requirements for every LMHA in Texas, regardless of service area size.

Sen. Cesar Blanco-Senate Bill-Regular Session

ModeratePlan for compliance

Low Cost

Effective:2025-09-01

Enforcing Agencies

[Health and Human Services Commission \(HHSC\)](#)

Business Impact

Who SB1580 Affects

This legislation has regulatory implications for the following Texas businesses and organizations:

Regulatory Priority: moderate

Notable regulatory updates (effective 2025-09-01). Consider how these changes may affect your operations.

Healthcare

Affected business types:

- Hospitals
- Healthcare systems
- Medical practices
- Health insurance providers

[View all healthcare legislation](#)

Key Operational Considerations

- **1**Bylaws (Governance Contract): You must amend corporate bylaws to create this specific seat. If your bylaws currently cap board membership, that cap must be raised.
- **2**Recruitment: The Nominating Committee must establish vetting protocols to verify veteran status (e.g., DD-214 review).
- **3**Mandatory Training: The new appointee must complete the Texas Open Meetings Act, Public Information Act, and specific HHSC board training required for voting members.

Estimated Cost Impact

lowMinimal cost impact anticipated.

[SB1580: The composition of the governing body of a local mental health | JD Key Consulting](#)

Linda Poenitzsch

AN ACT

relating to the composition of the governing body of a local mental health authority.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 533.0351 (a), Health and Safety Code, is amended to read as follows:

(a) If a local mental health authority has a governing body, the governing body must include:

(1) for a local authority that serves only one county, the sheriff of the county as an ex officio nonvoting member; ~~and~~

(2) for a local authority that serves two or more counties, two sheriffs chosen in accordance with Subsection (b) as ex officio nonvoting members; and

(3) a veteran selected by a majority of the governing body members.

SECTION 2. A local mental health authority that has a governing body must be in compliance with Section 533.0351 (a), Health and Safety Code, as amended by this Act, not later than September 1, 2026.

SECTION 3. This Act takes effect September 1, 2025.

President of the Senate

Speaker of the House

I hereby certify that S.B. No. 1580 passed the Senate on April 24, 2025, by the following vote: Yeas 31, Nays 0; and that the Senate concurred in House amendment on May 30, 2025, by the following vote: Yeas 31, Nays 0.

Secretary of the Senate

I hereby certify that S.B. No. 1580 passed the House, with amendment, on May 28, 2025, by the following vote: Yeas 128, Nays 2, one present not voting.

Chief Clerk of the House

Approved:

Date

Governor

5 RECOMMENDATIONS

B. BUDGET AND FINANCE

1) FINANCIAL STATEMENTS-APRIL 2026

RECOMMENDED ACTION: That the Board of Trustees approves the financial statements for April 2026.

BACKGROUND INFORMATION: Board of Trustee policy requires the periodic presentation of financial and statistical information. Our Performance Contracts with the Texas Health and Human Service Commission require the Board of Trustee Chair, Executive Director, and Financial Officer to certify the accuracy of the financial statements on a quarterly basis. Although this certification does not require Board of Trustee approval, we will continue to present these to the Board of Trustees.

SUPPORTING INFORMATION:

- ❖ Number of Days of Operation in Fund Balance is *164*.
- ❖ Accounts Receivable *increased* by \$255,422, going from \$1,434,649 to \$1,690,071.
- ❖ Accounts Payable *decreased* by \$1,038,395, going from \$1,899,558 to \$861,163. Most of this amount is due to the state giving us PPB money late last fiscal year of FY2024, and the Center was unable to use it. We received word in early March of 2025 that the money will have to be returned. The amount is \$937,600. The Center received and paid an invoice sent by the state for recoupment in April of 2026.
- ❖ **FINANCIAL STATUS:** The Center had a loss of \$167,105 for April and a cumulative gain of \$1,194,868 for the year.
- ❖ **REVENUE:** Overall Revenue received in April 2026 was \$338,492 less than budgeted.
 - **Patient Fees** were \$13,800 more than budgeted.
 - This is based on actual cash received in April for services.
 - **Miscellaneous** was \$76,256 less than budgeted.
 - In-kind match is \$92,125 less than budgeted due to the actual usage of the psychiatric bed days at Red River and our other contracted hospitals. This is based on the PESC in-kind match for psychiatric bed days and is provided by Red River. It is also based on the Justice Involved Grant, known as SB 292 contract, that has increased the Center's Mental Health and Substance Abuse bed usage at Red River. We also have Private Psychiatric Bed (PPB) revenue through the MH general revenue fund, that uses bed days from various contracted hospitals where we are receiving in-kind.

5 RECOMMENDATIONS

B. BUDGET AND FINANCE

1) FINANCIAL STATEMENTS-APRIL 2026

- Opioid Grant revenue is \$3,268 more than budgeted. Helen Farabee Centers received money from Bowie in January to continue Opioid activities. The Center has dedicated 2 staff members to working on these activities in the Bowie and Decatur areas.
- Interest Income was \$8,075 more than budgeted.
- **Other State Funding** was \$211,454 less than budgeted.
 - OSAR revenue was \$15,565 less than budgeted. This program is subcontracted to Abilene Recovery Council, which expends money when needed.
 - Justice Involved Grant Program (SB292) Revenue was \$203,143 less than budgeted. We were given notice from the state that we had money from FY2025 to expend in FY2026 and so the budget was increased accordingly. This is all based on need for psychiatric beds which will vary greatly from month to month.
- **Other Federal Funding** was \$6,483 less than budgeted.
 - The Medicaid-Habilitation Coordination revenue is \$6,892 less than budgeted. We are looking into this as to why we are not getting paid for some of the clients.
- **General Revenue** was \$58,098 less than budgeted.
 - PESC revenue was \$40,952 less than budgeted. PESC revenue fluctuates based on client need for psychiatric beds.
 - Private Psychiatric Beds MH/PPB Revenue was \$17,146 less than budget. This revenue also fluctuates based on client need for psychiatric beds.
- **Allocated Federal Funds** were right on budget.
- ❖ **EXPENSES:** Overall expense for April 2026 was \$304,444 less than budgeted.
 - **Personnel** cost was \$4,474 less than budgeted.
 - Salaries were \$3,108 less than budgeted.
 - Benefits were \$1,366 less than budgeted.
 - **Contract** cost was \$222,782 less than budgeted.
 - PESC Bed Day Expense was \$30,063 less than budgeted, PPB Bed Day expense was \$14,602 less than budgeted, and SB292 Bed Day expense was \$186,463 less than budgeted. All these expenses fluctuate based on client need for the psychiatric beds.

5 RECOMMENDATIONS

B. BUDGET AND FINANCE

1) FINANCIAL STATEMENTS-APRIL 2026

- **Travel and Training** expenses were \$1,960 more than budgeted.
- **Capital Outlay** expense was \$520 less than budgeted.
- **Non-Capitalized Equipment** expense was \$1,435 more than budgeted.
- **Pharmaceutical** expense was \$139 more than budgeted. This is based upon actual expenses and will fluctuate with patient care. As of January 2021, Community Benefit and Uncompensated Care expired. This means the Center now pays for all medical invoices from Clinical Pathology Laboratories and Integrated Prescription Management that were being paid by SONT, Service Organization of North Texas. The Wood Group invoices will still be paid for by SONT up to the time they no longer can or will pay for them.
- **Other Operating** expense was \$80,202 less than budgeted.
 - Sanction expense was \$3,000 more than budgeted. The Center was sanctioned for not meeting the 95% requirement for timely reports into HHSC in the first two quarters of FY2026.
 - Utility expense was \$2,569 more than budgeted.
 - In-Kind Expense was \$92,125 less than budgeted. This is attributed to the contract with Red River for the PESC contract, the Justice Involved Bed Days contract (SB292), and the Private Psychiatric Bed Days contract. It is based on bed day usage and will fluctuate based on client need. No actual dollars are exchanged and there is a corresponding revenue, so the net difference is zero.

Helen Farabee Centers
Balance Sheet - As Of April 2026

Assets	Actual
CASH GENERAL OPERATING FUND	\$ 7,002,494.28
CASH INTERNAL SERVICE FUND	\$ 2,397,039.35
CASH SELF FUNDED INSURANCE	\$ 424,081.51
SAVINGS	\$ 20,524.85
PETTY CASH FUNDS-CENTERWIDE	\$ 798.17
INVESTMENTS GENERAL OPERATING FUND	\$ 8,832,633.49
INVESTMENTS INTERNAL SERVICE FUND	\$ 715,753.66
ACCOUNTS RECEIVABLE	\$ 1,690,070.99
PREPAID	\$ 479,801.13
PREPAID MISCELLANEOUS-SELF INSURED FUNDS	\$ 916.64
DEPOSITS	\$ 176,060.02
DEPOSITS-SELF INSURED FUNDS	\$ 25,000.00
AMTS PROVIDED-PERSONAL LEAVE	\$ 947,522.78
LAND	\$ 1,057,659.65
BUILDINGS & IMPROVEMENTS	\$ 2,476,885.44
LEASEHOLD IMPROVEMENTS	\$ 132,631.17
EQUIP/FURN/FIX	\$ 416,222.36
COMPUTERS & PERIPHERALS	\$ 755,025.62
VEHICLES & CONTRACTORS EQ	\$ 1,924,081.79
COMPUTER SOFTWARE	\$ 368,100.66
ACCUMULATED DEPRECIATION	\$ (5,165,070.85)
CLINICAL SOFTWARE PROJECT	\$ -
WICHITA FALLS BUILDING PROJECT	\$ 386,012.69
ISF-MAJOR PROJECTS WORK-IN-PROGRESS	\$ (1,228.23)
Total Assets	\$ 25,063,017.17
Liabilities and Net Assets	
Liabilities	
ACCOUNTS PAYABLE GENERAL OPERATING FUND	\$ 726,381.17
ACCOUNTS PAYABLE INTERNAL SERVICE FUND	\$ 1,339.38
ACCOUNTS PAYABLE-SELF INSURED FUND	\$ 10,722.83
ACCOUNTS PAYABLE-PAYABLE TO STATE	\$ 122,719.80
PAYROLL PAYABLE	\$ 509,787.26
UMR PAYABLE	\$ 87,235.86
EMPLOYEE DEDUCTION PAYBLE	\$ 10,136.28
DEFERRED REVENUE	\$ 2,023,794.71
ACCUM PERSONAL LEAVE-CURRENT	\$ 19,117.92
ACCUM PERSONAL LEAVE-LONGTERM	\$ 947,522.78
UMR CLAIMS PAYABLE - IBNR	\$ 140,000.00
Total Liabilities	\$ 4,598,757.99
Net Assets	
UNRESERVED-FUND BALANCE	\$ 14,186,446.49
UNRESERVED-ACCUM PERSONNEL LEAVE	\$ 947,522.78
INCOME SUMMARY-OPERATING FUND	\$ (124,008.40)
INCOME SUMMARY-INTERNAL SERVICE FUND	\$ 5,553,925.68
CONTRIBUTED CAPITAL	\$ (250,928.43)
RETAINED EARNINGS	\$ 151,301.06
Total Net Assets	\$ 20,464,259.18
Total Liabilities and Net Assets	\$ 25,063,017.17

Helen Farabee Centers APRIL 2026 Income Statement

		APRIL 2026					YEAR TO DATE				
		APR FY26 Actual	APR FY26 Budget	APR FY25 Actual	Variance Budget	Variance FY 2025	FY2026 Y-T-D Actual	FY2025 Y-T-D Budget	FY2025 Y-T-D Actual	Variance Y-T-D Budget	Variance Y-T-D FY 2025
Revenue											
City Revenue - Deferred Revenue											
2-7000	CITY OF WICHITA FALLS	\$8,333.33	\$8,333.33	\$8,333.33	\$0.00	\$0.00	\$66,666.66	\$66,666.66	\$66,666.66	\$0.00	\$0.00
2-7001	CITY OF CHILLICOTHE	\$27.50	\$27.50	\$27.50	\$0.00	\$0.00	\$220.00	\$220.00	\$220.00	\$0.00	\$0.00
2-7002	CITY OF QUANAH	\$55.00	\$55.00	\$55.00	\$0.00	\$0.00	\$440.00	\$440.00	\$440.00	\$0.00	\$0.00
2-7004	CITY OF BURKBURNETT	\$417.67	\$417.67	\$417.67	\$0.00	\$0.00	\$3,341.33	\$3,341.33	\$3,341.34	\$0.00	(\$0.01)
2-7005	CITY OF GRAHAM	\$1,250.00	\$1,250.00	\$1,250.00	\$0.00	\$0.00	\$10,000.00	\$10,000.00	\$10,000.00	\$0.00	\$0.00
2-7006	CITY OF NOCONA	\$125.00	\$125.00	\$125.00	\$0.00	\$0.00	\$1,000.00	\$1,000.00	\$1,000.00	\$0.00	\$0.00
2-7007	CITY OF BOWIE	\$666.67	\$666.67	\$666.67	\$0.00	\$0.00	\$5,333.33	\$5,333.33	\$5,333.34	\$0.00	(\$0.01)
Total City Revenue		\$10,875.17	\$10,875.17	\$10,875.17	\$0.00	\$0.00	\$87,001.32	\$87,001.32	\$87,001.34	\$0.00	(\$0.02)
County Revenue - Deferred Revenue											
2-7020	WICHITA COUNTY	\$18,333.33	\$18,333.33	\$13,333.33	\$0.00	\$5,000.00	\$126,666.67	\$126,666.67	\$93,333.32	\$0.00	\$33,333.35
2-7021	HASKEL COUNTY	\$1,387.67	\$1,387.67	\$1,387.67	\$0.00	\$0.00	\$11,101.34	\$11,101.34	\$10,722.86	\$0.00	\$378.48
2-7022	STONEWALL COUNTY	\$211.89	\$211.89	\$176.83	\$0.00	\$35.06	\$1,695.12	\$1,695.12	\$1,414.66	\$0.00	\$280.46
2-7023	KNOX COUNTY	\$554.17	\$554.17	\$551.40	\$0.00	\$2.77	\$4,433.33	\$4,433.33	\$4,411.20	\$0.00	\$22.13
2-7024	DICKENS COUNTY	\$0.00	\$0.00	\$149.81	\$0.00	(\$149.81)	\$0.00	\$0.00	\$1,198.48	\$0.00	(\$1,198.48)
2-7025	YOUNG COUNTY	\$3,958.33	\$3,958.33	\$2,862.00	\$0.00	\$1,096.33	\$31,666.66	\$31,666.66	\$22,896.00	\$0.00	\$8,770.66
2-7026	THROCKMORTON COUNTY	\$273.27	\$273.27	\$156.05	\$0.00	\$117.22	\$2,186.13	\$2,186.13	\$1,248.42	\$0.00	\$937.71
2-7027	HARDEMAN COUNTY	\$353.45	\$353.45	\$0.00	\$0.00	\$353.45	\$2,827.53	\$2,827.53	\$0.00	\$0.00	\$2,827.53
2-7028	WISE COUNTY	\$4,616.67	\$4,616.67	\$4,616.67	\$0.00	\$0.00	\$36,933.32	\$36,933.32	\$36,933.34	\$0.00	(\$0.02)
2-7029	BAYLOR COUNTY	\$433.33	\$433.33	\$433.33	\$0.00	\$0.00	\$3,466.64	\$3,466.64	\$3,466.66	\$0.00	(\$0.02)
2-7030	FOARD COUNTY	\$110.00	\$110.00	\$205.99	\$0.00	(\$95.99)	\$880.00	\$880.00	\$1,647.92	\$0.00	(\$767.92)
2-7031	MONTAGUE COUNTY	\$8,388.04	\$8,388.04	\$8,107.84	\$0.00	\$280.20	\$67,104.31	\$67,104.31	\$64,862.72	\$0.00	\$2,241.59
2-7032	JACK COUNTY	\$2,956.19	\$2,956.19	\$1,250.00	\$0.00	\$1,706.19	\$23,649.49	\$23,649.49	\$10,000.00	\$0.00	\$13,649.49
2-7033	CLAY COUNTY	\$333.33	\$333.33	\$241.67	\$0.00	\$91.66	\$2,666.64	\$2,666.64	\$1,933.34	\$0.00	\$733.30
2-7034	COTTLE COUNTY	\$199.75	\$199.75	\$199.75	\$0.00	\$0.00	\$1,598.00	\$1,598.00	\$1,598.00	\$0.00	\$0.00
2-7035	CHILDRESS COUNTY	\$347.92	\$347.92	\$347.92	\$0.00	\$0.00	\$2,783.33	\$2,783.33	\$2,783.34	\$0.00	(\$0.01)
2-7036	ARCHER COUNTY SUPPORT	\$964.58	\$964.58	\$208.33	\$0.00	\$756.25	\$7,716.64	\$7,716.64	\$1,666.66	\$0.00	\$6,049.98
Total County Revenue		\$43,421.92	\$43,421.92	\$34,228.59	\$0.00	\$9,193.33	\$327,375.15	\$327,375.15	\$260,116.92	\$0.00	\$67,258.23
Other Taxing Authority Funds - Deferred Revenue											
2-7038	INDEPENDENT SCHOOL DISTRICT	\$265.00	\$265.00	\$265.00	\$0.00	\$0.00	\$2,120.00	\$2,120.00	\$2,120.00	\$0.00	\$0.00
Total Other Taxing Authority Funds		\$265.00	\$265.00	\$265.00	\$0.00	\$0.00	\$2,120.00	\$2,120.00	\$2,120.00	\$0.00	\$0.00
Patient Fees - Cash Basis Only											
2-7050	CONSUMER FEES	\$27,788.69	\$22,002.92	\$22,002.92	\$5,785.77	\$5,785.77	\$171,953.65	\$139,615.54	\$129,376.11	\$32,338.11	\$42,577.54
2-7060	PRIVATE INSURANCE MCO CARD SERVICES	\$43,408.39	\$39,054.44	\$37,054.44	\$4,353.95	\$6,353.95	\$243,297.95	\$237,043.90	\$232,157.62	\$6,254.05	\$11,140.33
2-7070	PRIVATE INSURANCE MCO CASE MANAGEMENT	\$19,901.56	\$17,497.96	\$18,638.80	\$2,403.60	\$1,262.76	\$119,808.54	\$98,516.85	\$98,656.53	\$21,291.69	\$21,152.01
2-7080	PRIVATE INSURANCE MCO REHAB	\$16,779.92	\$15,523.64	\$15,523.64	\$1,256.28	\$1,256.28	\$97,368.61	\$93,237.74	\$92,295.10	\$4,130.87	\$5,073.51
Total Patient Fees		\$107,878.56	\$94,078.96	\$93,219.80	\$13,799.60	\$14,658.76	\$632,428.75	\$568,414.03	\$552,485.36	\$64,014.72	\$79,943.39
Miscellaneous - Cash Basis											
2-7037	IN-KIND MATCH	\$635,063.33	\$727,188.41	\$792,615.39	(\$92,125.08)	(\$157,552.06)	\$5,228,356.44	\$5,389,063.32	\$5,891,663.12	(\$160,706.88)	(\$663,306.68)
2-7100	MEDICARE - TITLE XVII	\$4,230.15	\$2,694.44	\$2,694.44	\$1,535.71	\$1,535.71	\$29,779.68	\$24,680.50	\$24,680.50	\$5,099.18	\$5,099.18
2-7260	RENT	\$1,137.50	\$1,137.50	\$8,155.75	\$0.00	(\$7,018.25)	\$9,100.00	\$9,100.00	\$40,483.50	\$0.00	(\$31,383.50)
2-7270	DONATIONS/CONTRIBUTIONS	\$200.01	\$200.00	\$433.33	\$0.01	(\$233.32)	\$10,440.46	\$7,630.89	\$8,864.22	\$2,809.57	\$1,576.24
2-7272	CART EARNED REVENUE	\$36,504.88	\$36,504.89	\$16,400.86	(\$0.01)	\$20,104.02	\$134,183.96	\$136,857.86	\$243,366.89	(\$2,673.90)	(\$109,182.93)
2-7273	WF OPIOID GRANT	\$16,494.24	\$13,226.33	\$1,996.00	\$3,267.91	\$14,498.24	\$48,033.46	\$42,199.20	\$1,996.00	\$5,834.26	\$46,037.46
2-7275	INTEREST INCOME	\$56,028.04	\$47,952.93	\$71,952.93	\$8,075.11	(\$15,924.89)	\$201,037.19	\$174,457.41	\$210,159.06	\$26,579.78	(\$9,121.87)
2-7280	MISCELLANEOUS	\$4,629.10	\$1,639.00	\$639.00	\$2,990.10	\$3,990.10	\$31,147.95	\$28,196.95	\$109,402.01	\$2,951.00	(\$78,254.06)
Total Miscellaneous		\$754,287.25	\$830,543.50	\$894,887.70	(\$76,256.25)	(\$140,600.45)	\$5,692,079.14	\$5,812,186.13	\$6,530,615.30	(\$120,106.99)	(\$838,536.16)

		APRIL 2026					YEAR TO DATE				
		APR FY26	APR FY26	APR FY25	Variance	Variance	FY2026 Y-T-D	FY2025 Y-T-D	FY2025 Y-T-D	Variance	Variance
		Actual	Budget	Actual	Budget	FY 2025	Actual	Budget	Actual	Y-T-D Budget	Y-T-D FY 2025
Other State Funding - Accrued Basis Only											
2-7120	MH FIRST AID	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$55,000.00	\$55,000.00	\$47,000.00	\$0.00	\$8,000.00
2-7122	TCOOMMI EARNED INCOME	\$36,010.00	\$30,989.11	\$30,612.11	\$5,020.89	\$5,397.89	\$247,483.74	\$242,084.16	\$240,136.77	\$5,399.58	\$7,346.97
2-7124	SUBSTANCE ABUSE SERVICES	\$41,725.70	\$41,530.10	\$22,311.69	\$195.60	\$19,414.01	\$262,499.80	\$262,304.20	\$175,545.01	\$195.60	\$86,954.79
2-7125	SUD COMMUNITY MH GRANT PROGRAM	\$4,796.45	\$3,521.67	\$1,810.93	\$1,274.78	\$2,985.52	\$29,983.76	\$28,173.32	\$15,520.13	\$1,810.44	\$14,463.63
2-7127	OSAR - OUTREACH, SCREENING ASSESSMENT, REFERRAL	\$28,498.68	\$44,063.40	\$37,766.00	(\$15,564.72)	(\$9,267.32)	\$203,677.94	\$235,971.08	\$301,084.78	(\$32,293.14)	(\$97,406.84)
2-7128	RSS - RECOVERY SUPPORT SERVICES	\$10,193.07	\$13,398.78	\$4,548.37	(\$3,205.71)	\$5,644.70	\$72,039.07	\$75,660.21	\$47,795.67	(\$3,621.14)	\$24,243.40
2-7150	MFP/ECC REVENUE	\$5,749.77	\$2,707.50	\$2,010.35	\$3,042.27	\$3,739.42	\$30,030.43	\$21,659.98	\$22,174.21	\$8,370.45	\$7,856.22
2-7152	PASSR IDD SPECIALIZED SERVICES	\$616.27	\$909.96	\$759.96	(\$293.69)	(\$143.69)	\$7,897.00	\$8,725.53	\$5,070.06	(\$828.53)	\$2,826.94
2-7153	PASRR IDD SPECIALIZED SERVICES - OBRA - LIDDA	\$0.00	\$0.00	\$700.00	\$0.00	(\$700.00)	\$700.00	\$700.00	\$3,850.00	\$0.00	(\$3,150.00)
2-7132	CMHG LPHA EXPANSION	\$5,478.70	\$6,250.66	\$4,873.77	(\$771.96)	\$604.93	\$40,972.00	\$41,743.94	\$31,679.52	(\$771.94)	\$9,292.48
2-7216	MHGJII NCA - JBCR	\$22,040.80	\$20,209.43	\$0.00	\$1,831.37	\$22,040.80	\$149,814.37	\$150,984.17	\$0.00	(\$1,169.80)	\$149,814.37
2-7218	JUSTICE INVOLVED GRANT PROGRAM	\$295,319.52	\$498,462.50	\$164,459.20	(\$203,142.98)	\$130,860.32	\$1,436,701.69	\$1,639,842.41	\$1,435,189.50	(\$203,140.72)	\$1,512.19
2-7245	DARS-ECI REVENUE	\$115,779.32	\$115,619.65	\$102,631.49	\$159.67	\$13,147.83	\$959,344.16	\$951,357.39	\$807,197.29	\$7,986.77	\$152,146.87
Total Other State Funding		\$566,208.28	\$777,662.76	\$372,483.87	(\$211,454.48)	\$193,724.41	\$3,496,143.96	\$3,714,206.39	\$3,132,242.94	(\$218,062.43)	\$363,901.02
Other Federal Funding											
2-7102	MEDICAID-CARD SERVICES	\$1,406.33	\$1,837.93	\$2,063.00	(\$431.60)	(\$656.67)	\$14,488.71	\$4,718.55	\$5,311.49	\$9,770.16	\$9,177.22
2-7104	MEDICAID-CASE MANAGEMENT	\$3,203.12	\$3,233.12	\$6,233.12	(\$300.00)	(\$3,030.00)	\$23,724.70	\$31,126.46	\$36,321.89	(\$7,401.76)	(\$12,597.19)
2-7106	MEDICAID-IDD SERV COORDINATION	\$56,949.90	\$54,172.40	\$52,172.40	\$2,777.50	\$4,777.50	\$446,332.90	\$447,599.63	\$475,318.18	(\$1,266.73)	(\$28,985.28)
2-7108	MEDICAID REHAB	\$15,682.78	\$18,476.46	\$22,476.46	(\$2,793.68)	(\$6,793.68)	\$135,207.95	\$135,980.57	\$134,497.03	(\$772.62)	\$710.92
2-7110	MEDICAID PASRR	\$2,049.53	\$509.00	\$0.00	\$1,540.53	\$2,049.53	\$3,475.29	\$2,991.35	\$4,086.33	\$483.94	(\$611.04)
2-7112	MEDICAID-ADMIN CLAIMING	\$39,536.73	\$40,000.00	\$40,000.00	(\$463.27)	(\$463.27)	\$362,706.08	\$332,444.46	\$349,452.30	\$30,261.62	\$13,253.78
2-7114	MEDICAID-HABILITATION COORDINATION	\$3,873.08	\$10,765.49	\$10,765.49	(\$6,892.41)	(\$6,892.41)	\$63,843.32	\$59,120.66	\$59,120.66	\$4,722.66	\$4,722.66
2-7120	MH FIRST AID	\$12,222.46	\$9,895.22	\$9,092.04	\$2,327.24	\$3,130.42	\$56,903.43	\$55,675.90	\$50,814.90	\$1,227.53	\$6,088.53
2-7126	STATE HOSPITAL STEP-DOWN PROGRAM	\$48,927.73	\$48,816.41	\$53,216.41	\$111.32	(\$4,288.68)	\$426,149.51	\$432,963.20	\$437,363.20	(\$6,813.69)	(\$11,213.69)
2-7130	MH OUTPATIENT CAPACITY EXPANSION	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$117,260.83	\$0.00	(\$117,260.83)
2-7252	DIRECTED PAYMENT PROGRAM - BEHAVIORAL HEALTH SERVICES	\$33,403.15	\$36,315.40	\$91,383.08	(\$2,912.25)	(\$57,979.93)	\$294,336.47	\$282,652.02	\$273,318.30	\$11,684.45	\$21,018.17
2-7254	PUBLIC HEALTH PROVIDER - CHARITY CARE PROGRAM	\$0.00	\$0.00	\$2,197,789.03	\$0.00	(\$2,197,789.03)	\$2,569,055.57	\$2,569,055.57	\$2,197,789.03	\$0.00	\$371,266.54
2-7258	TRANSITION SUPPORT LIAISON	\$5,543.61	\$5,260.33	\$0.00	\$283.28	\$5,543.61	\$42,612.68	\$42,082.64	\$1,579.60	\$530.04	\$41,033.08
Total Other Federal Funding		\$222,798.42	\$229,281.76	\$2,485,191.03	(\$6,483.34)	(\$2,262,392.61)	\$4,438,836.61	\$4,396,411.01	\$4,142,233.74	\$42,425.60	\$296,602.87
General Revenue - Deferred Revenue											
2-7215	PESC	\$127,384.70	\$168,336.73	\$309,370.75	(\$40,952.03)	(\$181,986.05)	\$1,461,894.88	\$1,504,481.06	\$1,329,926.23	(\$42,586.18)	\$131,968.65
2-7217	Private Psychiatric Beds MH/PPB	\$43,144.32	\$60,290.31	\$11,235.30	(\$17,145.99)	\$31,909.02	\$679,292.97	\$696,438.76	\$903,167.89	(\$17,145.79)	(\$223,874.92)
2-7220	GENERAL REVENUE - MH	\$600,876.25	\$600,876.25	\$600,876.25	\$0.00	\$0.00	\$4,807,009.99	\$4,807,009.99	\$4,807,010.00	\$0.00	(\$0.01)
2-7222	GENERAL REVENUE - VETERANS SERVICES	\$5,833.33	\$5,833.33	\$5,833.33	\$0.00	\$0.00	\$46,666.66	\$46,666.66	\$46,666.66	\$0.00	\$0.00
2-7224	GENERAL REVENUE - BH SVCS IN EDUC SVC CTR	\$9,583.33	\$9,583.33	\$9,583.33	\$0.00	\$0.00	\$76,666.66	\$76,666.66	\$76,666.66	\$0.00	\$0.00
2-7230	GENERAL REVENUE - IDD	\$93,036.53	\$93,036.53	\$93,036.53	\$0.00	\$0.00	\$744,292.25	\$744,292.25	\$744,292.24	\$0.00	\$0.01
2-7232	GENERAL REVENUE-CRISIS REDESIG	\$39,884.50	\$39,884.50	\$39,884.50	\$0.00	\$0.00	\$319,076.00	\$319,076.00	\$319,076.00	\$0.00	\$0.00
2-7235	GENERAL REVENUE - IDD ARPA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,795.39	\$2,795.39	\$17,061.96	\$0.00	(\$14,266.57)
2-7236	IDD GR-CRISIS RESPITE-CIS	\$17,980.67	\$17,980.67	\$17,980.67	\$0.00	\$0.00	\$143,845.34	\$143,845.34	\$143,845.34	\$0.00	\$0.00
2-7238	PERMANENCY PLANNING	\$1,854.75	\$1,854.75	\$1,854.75	\$0.00	\$0.00	\$14,838.00	\$14,838.00	\$14,838.00	\$0.00	\$0.00
Total General Revenue		\$939,578.38	\$997,676.40	\$1,089,655.41	(\$58,098.02)	(\$150,077.03)	\$8,296,378.14	\$8,356,110.11	\$8,402,550.98	(\$59,731.97)	(\$106,172.84)
Medicaid Waiver											
2-7137	ICF-QAF	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$105.20)	\$0.00	\$105.20
Total Medicaid Waiver		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$105.20)	\$0.00	\$105.20
Allocated Federal Funds - Accrued Basis Only											
2-7200	TANF-CAS	\$14,565.75	\$14,565.75	\$14,565.75	\$0.00	\$0.00	\$116,526.00	\$116,526.00	\$116,526.00	\$0.00	\$0.00
2-7201	TANF-ADULT	\$3,207.58	\$3,207.58	\$3,207.58	\$0.00	\$0.00	\$25,660.66	\$25,660.66	\$25,660.66	\$0.00	\$0.00
2-7202	TANF-TITLE XX-ADULT	\$3,663.67	\$3,663.67	\$3,663.67	\$0.00	\$0.00	\$29,309.34	\$29,309.34	\$29,309.34	\$0.00	\$0.00
2-7203	TRANSITION-TITLE XX-CRISIS	\$5,992.25	\$5,992.25	\$5,992.25	\$0.00	\$0.00	\$47,938.00	\$47,938.00	\$47,938.00	\$0.00	\$0.00
2-7210	MENTAL HEALTH BLOCK GRANT	\$36,511.91	\$36,511.91	\$36,511.92	\$0.00	(\$0.01)	\$292,095.33	\$292,095.33	\$292,095.38	\$0.00	(\$0.05)
Total Allocated Federal Funds		\$63,941.16	\$63,941.16	\$63,941.17	\$0.00	(\$0.01)	\$511,529.33	\$511,529.33	\$511,529.38	\$0.00	(\$0.05)
Total Revenue		\$2,709,254.14	\$3,047,746.63	\$5,044,747.74	(\$338,492.49)	(\$2,335,493.60)	\$23,483,892.40	\$23,775,353.47	\$23,620,790.76	(\$291,461.07)	(\$136,898.36)

	APRIL 2026					YEAR TO DATE					
	APR FY26	APR FY26	APR FY25	Variance	Variance	FY2026 Y-T-D	FY2025 Y-T-D	FY2025 Y-T-D	Variance	Variance	
	Actual	Budget	Actual	Budget	FY 2025	Actual	Budget	Actual	Y-T-D Budget	Y-T-D FY 2025	
Expense											
Salaries											
2-8000	SALARIES	\$1,007,286.63	\$1,011,956.38	\$964,128.83	(\$4,669.75)	\$43,157.80	\$7,781,982.27	\$7,804,058.24	\$7,625,335.75	(\$22,075.97)	\$156,646.52
2-8001	OVERTIME	\$9,871.40	\$8,309.24	\$9,595.27	\$1,562.16	\$276.13	\$65,779.70	\$57,267.42	\$75,791.72	\$8,512.28	(\$10,012.02)
Total Salaries		\$1,009,310.77	\$1,012,295.37	\$954,461.49	(\$3,107.59)	\$43,433.93	\$1,974,172.10	\$1,966,350.34	\$1,891,678.48	(\$13,563.69)	\$146,634.50
Benefits											
2-8002	EMPLOYER'S FICA/MEDICARE	\$75,191.88	\$75,928.92	\$72,097.33	(\$737.04)	\$3,094.55	\$572,743.33	\$586,117.26	\$561,908.60	(\$13,373.93)	\$10,834.73
2-8003	TEC UNEMPLOYMENT TAX	\$3,394.95	\$3,232.34	\$1,160.34	\$162.61	\$2,234.61	\$42,449.28	\$42,862.92	\$18,915.48	(\$413.64)	\$23,533.80
2-8004	WORKER'S COMPENSATION	\$2,027.00	\$2,099.34	\$1,895.00	(\$72.34)	\$132.00	\$24,677.00	\$26,394.13	\$14,875.00	(\$1,717.13)	\$9,802.00
2-8005	RETIREMENT EMPLOYER CONTRIBUTION 401A	\$54,216.39	\$54,934.09	\$27,465.95	(\$717.70)	\$26,750.44	\$417,781.87	\$419,299.70	\$380,220.64	(\$1,517.83)	\$37,561.23
2-8006	HEALTH INSURANCE	\$169,612.66	\$169,612.72	\$153,133.36	(\$0.06)	\$16,479.30	\$1,312,553.46	\$1,313,611.25	\$1,155,753.50	(\$1,057.79)	\$156,799.96
2-8008	EMPLOYER FUNDED BASIC LIFE	\$961.20	\$962.66	\$1,062.72	(\$1.46)	(\$101.52)	\$7,695.57	\$7,617.00	\$3,835.86	\$78.57	\$3,859.71
Total Benefits		\$284,233.15	\$285,526.89	\$256,608.09	(\$1,365.99)	\$48,589.38	\$564,672.54	\$565,309.08	\$509,788.70	(\$18,001.75)	\$242,391.43
Contracts											
2-8300	PSYCHIATRIST	\$24,675.00	\$24,400.00	\$25,200.00	\$275.00	(\$525.00)	\$188,475.00	\$187,600.00	\$186,375.00	\$875.00	\$2,100.00
2-8302	MEDICAL DIRECTOR	\$0.00	\$0.00	\$7,300.00	\$0.00	(\$7,300.00)	\$0.00	\$0.00	\$7,300.00	\$0.00	(\$7,300.00)
2-8304	PSYCHOLOGIST	\$350.00	\$500.00	\$400.00	(\$150.00)	(\$50.00)	\$2,000.00	\$3,500.00	\$3,600.00	(\$1,500.00)	(\$1,600.00)
2-8306	RN NURSES	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$195.00	\$0.00	\$65.00	\$195.00	\$130.00
2-8318	CRISIS-CONTRACTED	\$12,462.00	\$12,516.42	\$12,462.00	(\$54.42)	\$0.00	\$99,696.00	\$100,085.60	\$99,696.00	(\$389.60)	\$0.00
2-8320	PESC BED DAYS	\$99,345.00	\$129,408.00	\$270,095.00	(\$30,063.00)	(\$170,750.00)	\$1,180,305.00	\$1,210,368.00	\$1,092,720.00	(\$30,063.00)	\$87,585.00
2-8321	PPB BED DAYS	\$37,055.00	\$51,657.00	\$10,220.00	(\$14,602.00)	\$26,835.00	\$589,365.00	\$603,967.00	\$819,780.00	(\$14,602.00)	(\$230,415.00)
2-8322	OSAR-SUBSTANCE ABUSE	\$28,113.83	\$28,784.81	\$33,784.81	(\$670.98)	(\$5,670.98)	\$215,618.77	\$254,604.25	\$269,604.25	(\$38,985.48)	(\$53,985.48)
2-8326	LABORATORY CONTRACTS	\$2,401.00	\$3,395.28	\$5,203.38	(\$994.28)	(\$2,802.38)	\$17,945.31	\$19,548.82	\$14,129.52	(\$1,603.51)	\$3,815.79
2-8336	RESPIRE-CONTRACTED	\$5,330.00	\$3,620.00	\$4,620.00	\$1,710.00	\$710.00	\$34,727.25	\$31,388.00	\$30,388.00	\$3,339.25	\$4,339.25
2-8338	SOFTWARE WEB-BASED	\$22,253.08	\$21,441.33	\$25,784.55	\$811.75	(\$3,531.47)	\$182,940.41	\$183,014.28	\$181,949.53	(\$73.87)	\$990.88
2-8344	JUSTICE INVOLVED BED DAYS (SB292)	\$266,685.00	\$453,147.53	\$148,285.00	(\$186,462.53)	\$118,400.00	\$1,297,425.00	\$1,483,887.53	\$1,296,110.00	(\$186,462.53)	\$1,315.00
2-8346	STATE HOSPITAL STEP-DOWN PROGRAM CONTRACTED	\$45,500.00	\$45,500.00	\$45,500.00	\$0.00	\$0.00	\$364,000.00	\$364,000.00	\$364,000.00	\$0.00	\$0.00
2-8348	BH SVCS IN ESC-REGION 9	\$477.25	\$703.10	\$703.10	(\$225.85)	(\$225.85)	\$4,032.54	\$5,204.42	\$5,204.42	(\$1,171.88)	(\$1,171.88)
2-8350	OTHER CONTRACTED CONSULTANTS	\$3,949.51	\$4,070.43	\$4,070.43	(\$120.92)	(\$120.92)	\$31,603.85	\$34,604.97	\$36,126.64	(\$3,001.12)	(\$4,522.79)
2-8352	WFPD - CART	\$14,934.26	\$8,320.30	\$8,260.00	\$6,613.96	\$6,674.26	\$38,319.09	\$35,625.44	\$76,644.67	\$2,693.65	(\$38,325.58)
2-8353	TECHNICAL ASSISTANCE - CART	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,490.00	\$13,000.00	\$7,875.00	(\$510.00)	\$4,615.00
2-8354	WFFD - CART	\$6,183.04	\$5,166.57	\$20,000.00	\$1,016.47	(\$13,816.96)	\$41,516.18	\$40,666.28	\$80,000.00	\$849.90	(\$38,483.82)
2-8355	Other Contracted/Non-Contracted Consultants-G & A Services	\$9,729.91	\$9,595.58	\$8,716.95	\$134.33	\$1,012.96	\$74,145.58	\$67,783.08	\$78,907.91	\$6,362.50	(\$4,762.33)
Total Contracts		\$579,443.88	\$802,226.35	\$630,605.22	(\$222,782.47)	(\$51,161.34)	\$4,374,799.98	\$4,638,847.67	\$4,650,475.94	(\$264,047.69)	(\$275,675.96)
Travel and Training											
2-8021	EMPLOYEE MILEAGE	\$1,892.02	\$1,830.36	\$1,830.36	\$61.66	\$61.66	\$11,357.52	\$13,947.79	\$14,599.94	(\$2,590.27)	(\$3,242.42)
2-8022	EMPLOYEE PER DIEM (MEALS AND HOTEL)	\$5,105.07	\$2,707.57	\$6,916.79	\$2,397.50	(\$1,811.72)	\$24,645.15	\$19,254.37	\$20,184.26	\$5,390.78	\$4,460.89
2-8023	EMPLOYEE TRAVEL-AIRFARE & CAR RENTAL	\$2,420.21	\$1,237.50	\$1,237.50	\$1,182.71	\$1,182.71	\$7,934.67	\$4,665.20	\$5,126.56	\$3,269.47	\$2,808.11
2-8024	EMPLOYEE TRAVEL OVER STATE RATE	\$0.00	\$100.12	\$100.12	(\$100.12)	(\$100.12)	\$929.59	\$212.87	\$212.87	\$716.72	\$716.72
2-8025	EMPLOYEE DEVELOPMENT & TRAINING	\$2,729.00	\$4,310.62	\$3,023.95	(\$1,581.62)	(\$294.95)	\$21,022.04	\$21,719.61	\$18,817.95	(\$697.57)	\$2,204.09
Total Travel and Training		\$12,146.30	\$10,186.17	\$13,108.72	\$1,960.13	(\$962.42)	\$65,888.97	\$59,799.84	\$58,941.58	\$6,089.13	\$6,947.39
Capital Outlay											
2-8106	BUILDING USE FEE	\$6,202.22	\$6,232.24	\$7,853.95	(\$30.02)	(\$1,651.73)	\$61,768.41	\$60,202.03	\$63,454.55	\$1,566.38	(\$1,686.14)
2-8126	EQUIP/FURN/FIX USE FEE	\$1,979.88	\$2,278.06	\$2,322.98	(\$298.18)	(\$343.10)	\$16,389.54	\$18,567.31	\$18,657.29	(\$2,177.77)	(\$2,267.75)
2-8146	VEHICLE USE FEE	\$9,581.78	\$9,581.83	\$5,434.72	(\$0.05)	\$4,147.06	\$56,466.93	\$54,558.71	\$46,264.53	\$1,908.22	\$10,202.40
2-8156	SOFTWARE USE FEE	\$0.00	\$0.00	\$208.33	\$0.00	(\$208.33)	\$208.33	\$208.33	\$1,666.66	\$0.00	(\$1,458.33)
2-8166	COMPUTER & PRINTER USE FEE	\$3,264.66	\$3,456.48	\$4,745.92	(\$191.82)	(\$1,481.26)	\$32,699.75	\$36,804.97	\$39,966.77	(\$4,105.22)	(\$7,267.02)
2-8170	CAPITAL OUTLAY	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,506.04	\$5,506.04	\$22,258.05	\$0.00	(\$16,752.01)
Total Capital Outlay		\$21,028.54	\$21,548.61	\$20,565.90	(\$520.07)	\$462.64	\$173,039.00	\$175,847.39	\$192,267.85	(\$2,808.39)	(\$19,228.85)
Non-Capitalized Equipment											
2-8190	MINOR EQUIPMENT PURCHASES	\$5,962.52	\$4,527.68	\$6,423.68	\$1,434.84	(\$461.16)	\$24,031.91	\$23,182.90	\$29,697.92	\$849.01	(\$5,666.01)
Total Non-Capitalized Equipment		\$5,962.52	\$4,527.68	\$6,423.68	\$1,434.84	(\$461.16)	\$24,031.91	\$23,182.90	\$29,697.92	\$849.01	(\$5,666.01)

		APRIL 2026					YEAR TO DATE				
		APR FY26	APR FY26	APR FY25	Variance	Variance	FY2026 Y-T-D	FY2025 Y-T-D	FY2025 Y-T-D	Variance	Variance
		Actual	Budget	Actual	Budget	FY 2025	Actual	Budget	Actual	Y-T-D Budget	Y-T-D FY 2025
Pharmaceutical											
2-8316	PHARMACIST	\$63,039.54	\$62,900.75	\$59,572.68	\$138.79	\$3,466.86	\$465,733.30	\$456,751.24	\$438,212.77	\$8,982.06	\$27,520.53
Total Pharmaceutical		\$63,039.54	\$62,900.75	\$59,572.68	\$138.79	\$3,466.86	\$465,733.30	\$456,751.24	\$438,212.77	\$8,982.06	\$27,520.53
Other Operating											
2-8007	EAP EXPENSE	\$396.80	\$406.40	\$406.40	(\$9.60)	(\$9.60)	\$3,249.60	\$3,251.20	\$3,130.38	(\$1.60)	\$119.22
2-8020	HIRING RELATED EXPENSES	\$4,298.11	\$4,951.36	\$3,171.11	(\$653.25)	\$1,127.00	\$30,263.79	\$27,153.36	\$26,292.45	\$3,110.43	\$3,971.34
2-8026	EMPLOYEE AWARDS & BANQUETS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14,827.58	\$17,000.00	\$14,757.15	(\$2,172.42)	\$70.43
2-8027	EMPLOYEE FLU SHOTS AND TB	\$0.00	\$424.30	\$424.30	(\$424.30)	(\$424.30)	\$556.56	\$1,567.89	\$1,567.89	(\$1,011.33)	(\$1,011.33)
2-8040	PROFESSIONAL/ERROR&OMMISSIONS	\$2,174.49	\$2,174.49	\$2,410.61	\$0.00	(\$236.12)	\$17,395.92	\$17,395.92	\$19,284.88	\$0.00	(\$1,888.96)
2-8041	LIABILITY COVERAGE	\$103.67	\$103.67	\$107.25	\$0.00	(\$3.58)	\$929.36	\$829.36	\$1,045.97	\$100.00	(\$116.61)
2-8042	OTHER INSURANCE COVERAGE	\$1,777.85	\$1,777.85	\$1,713.36	\$0.00	\$64.49	\$14,222.80	\$14,222.80	\$13,706.88	\$0.00	\$515.92
2-8050	ADVERTISING EXPENSE	\$249.00	\$376.52	\$3,971.44	(\$127.52)	(\$3,722.44)	\$14,303.19	\$16,392.78	\$9,593.06	(\$2,089.59)	\$4,710.13
2-8055	DUES AND MEMBERSHIPS	\$5,436.42	\$5,720.53	\$4,273.09	(\$284.11)	\$1,163.33	\$45,094.74	\$42,355.06	\$33,773.85	\$2,739.68	\$11,320.89
2-8057	LICENSES	\$1,834.39	\$2,428.10	\$1,440.40	(\$593.71)	\$393.99	\$15,454.44	\$9,252.46	\$6,625.59	\$6,201.98	\$8,828.85
2-8060	BOARD ACTIVITY EXPENSE	\$836.88	\$731.46	\$0.00	\$105.42	\$836.88	\$2,080.30	\$1,763.68	\$1,763.68	\$316.62	\$316.62
2-8065	DPP-BHS RISK AND ADMIN EXPENSE	\$2,044.17	\$2,044.17	\$2,044.17	\$0.00	\$0.00	\$16,353.36	\$16,353.36	\$16,353.29	\$0.00	\$0.07
2-8070	UTILITIES	\$16,853.85	\$14,284.96	\$11,500.35	\$2,568.89	\$5,353.50	\$147,900.12	\$146,511.84	\$144,894.53	\$1,388.28	\$3,005.59
2-8072	TELECOMMUNICATIONS	\$36,916.63	\$36,885.81	\$25,212.84	\$30.82	\$11,703.79	\$218,525.39	\$218,051.38	\$215,269.31	\$474.01	\$3,256.08
2-8076	TELEPHONE-BASIC SERVICE EXPENSE	\$2,023.50	\$2,428.88	\$2,426.21	(\$405.38)	(\$402.71)	\$16,214.65	\$19,355.83	\$19,366.88	(\$3,141.18)	(\$3,152.23)
2-8078	CELL PHONE SERVICE EXPENSE	\$1,955.95	\$2,061.39	\$2,086.47	(\$105.44)	(\$130.52)	\$15,794.22	\$17,049.73	\$17,150.02	(\$1,255.51)	(\$1,355.80)
2-8080	LONG DISTANCE TELEPHONE SERVICE EXPENSE	\$374.84	\$231.20	\$231.20	\$143.64	\$143.64	\$3,204.89	\$2,026.69	\$2,026.70	\$1,178.20	\$1,178.19
2-8100	BUILDING RENT	\$57,099.53	\$57,099.53	\$56,826.57	\$0.00	\$272.96	\$455,929.43	\$453,535.43	\$520,826.47	\$2,394.00	(\$64,897.04)
2-8101	P.O. BOX/STORAGE RENTAL/LEASE	\$83.98	\$81.25	\$81.47	\$2.73	\$2.51	\$662.03	\$641.05	\$641.30	\$20.98	\$20.73
2-8102	PROPERTY DAMAGE COVERAGE	\$10,935.10	\$11,732.53	\$10,163.60	(\$797.43)	\$771.50	\$92,356.09	\$93,860.24	\$81,169.80	(\$1,504.15)	\$11,186.29
2-8104	BUILDING REPAIR & MAINTENANCE	\$19,083.99	\$16,828.59	\$16,538.64	\$2,255.40	\$2,545.35	\$118,142.75	\$126,054.32	\$128,272.62	(\$7,911.57)	(\$10,129.87)
2-8120	EQUIPMENT RENTAL/LEASE	\$7,053.45	\$7,167.40	\$7,194.35	(\$113.95)	(\$140.90)	\$57,286.31	\$57,014.16	\$57,252.86	\$272.15	\$33.45
2-8124	EQUIPMENT REPAIR & MAINTENANCE	\$2,161.53	\$1,777.56	\$1,777.56	\$383.97	\$383.97	\$17,011.23	\$18,184.58	\$22,353.59	(\$1,173.35)	(\$5,342.36)
2-8140	VEHICLE LEASE	\$2,278.46	\$2,611.11	\$2,611.11	(\$332.65)	(\$332.65)	\$19,225.63	\$20,888.88	\$20,888.88	(\$1,663.25)	(\$1,663.25)
2-8142	AUTO LIABILITY/PHYS DAMAGE INS	\$9,331.45	\$9,331.45	\$7,886.17	\$0.00	\$1,445.28	\$69,986.00	\$69,052.88	\$65,744.60	\$933.12	\$4,241.40
2-8143	INSURANCE EXP-DEDUCTIBLES PAID	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$400.00	\$0.00	(\$400.00)
2-8144	VEHICLE REPAIR & MAINTENANCE	\$2,914.71	\$2,425.34	\$2,425.34	\$489.37	\$489.37	\$27,360.88	\$23,410.56	\$23,552.76	\$3,950.32	\$3,808.12
2-8145	GAS-VEHICLE & EQUIPMENT	\$10,043.27	\$8,664.50	\$6,247.75	\$1,378.77	\$3,795.52	\$55,327.93	\$53,164.23	\$48,582.62	\$2,163.70	\$6,745.31
2-8200	OFFICE SUPPLIES	\$12,779.43	\$11,629.00	\$4,110.71	\$1,150.43	\$8,668.72	\$90,486.14	\$91,973.05	\$58,001.80	(\$1,486.91)	\$32,484.34
2-8202	BOOKS & SUBSCRIPTIONS	\$1,969.22	\$1,969.22	\$3,540.37	\$0.00	(\$1,571.15)	\$33,100.45	\$32,959.42	\$24,002.59	\$141.03	\$9,097.86
2-8204	JANITORIAL/CLEANING SUPPLIES	\$970.01	\$912.99	\$991.25	\$57.02	(\$21.24)	\$6,313.35	\$5,264.98	\$5,382.74	\$1,048.37	\$930.61
2-8206	OTHER CONSUMABLE SUPPLIES	\$1,033.83	\$1,751.56	\$1,760.09	(\$717.73)	(\$726.26)	\$10,298.06	\$10,100.24	\$10,119.23	\$197.82	\$178.83
2-8208	MEDICAL SUPPLIES	\$4,214.93	\$3,924.31	\$279.60	\$290.62	\$3,935.33	\$10,424.40	\$10,068.10	\$6,534.35	\$356.30	\$3,890.05
2-8210	FOOD	\$465.48	\$103.96	\$111.00	\$361.52	\$354.48	\$2,587.56	\$1,836.02	\$2,960.67	\$751.54	(\$373.11)
2-8214	PERSONAL CARE/HYGENE SUPPLIES	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2-8216	TRAINING/BEHAVIOR MODIFICATION	\$406.87	\$0.00	\$0.00	\$406.87	\$406.87	\$935.56	\$0.00	\$0.00	\$935.56	\$935.56
2-8218	CONSUMER ASSISTANCE	\$314.69	\$693.24	\$1,000.21	(\$378.55)	(\$685.52)	\$5,165.38	\$6,480.00	\$17,854.24	(\$1,314.62)	(\$12,688.86)
2-8220	PRINTING SERVICES	\$3,475.51	\$2,627.89	\$2,635.23	\$847.62	\$840.28	\$22,205.61	\$21,103.76	\$18,605.82	\$1,101.85	\$3,599.79
2-8221	COURIER DELIVERY SERVICES	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$370.64	\$336.66	\$336.66	\$33.98	\$33.98
2-8222	POSTAGE & DELIVERY CHARGES	\$939.41	\$1,426.67	\$1,428.05	(\$487.26)	(\$488.64)	\$12,885.48	\$13,140.00	\$13,144.83	(\$254.52)	(\$259.35)
2-8226	SANCTIONS	\$3,000.00	\$0.00	\$0.00	\$3,000.00	\$3,000.00	\$3,000.00	\$0.00	\$3,138.70	\$3,000.00	(\$138.70)
2-8228	BNK CHRGS & CREDIT CRD FEES	\$1,694.04	\$1,284.54	\$1,284.54	\$409.50	\$409.50	\$7,118.84	\$8,187.06	\$8,190.49	(\$1,068.22)	(\$1,071.65)
2-8232	MISCELLANEOUS CHARGE & EXPENSE	\$816.51	\$430.94	\$458.89	\$385.57	\$357.62	\$1,778.62	\$3,012.32	\$9,750.64	(\$1,233.70)	(\$7,972.02)
2-8237	IN-KIND EXPENSES	\$635,063.33	\$727,188.41	\$792,615.39	(\$92,125.08)	(\$157,552.06)	\$5,228,356.44	\$5,389,063.32	\$5,891,663.12	(\$160,706.88)	(\$663,306.68)
2-8340	CPA FIRM	\$2,208.20	\$0.00	\$8,500.00	\$2,208.20	(\$6,291.80)	\$25,708.20	\$25,000.00	\$32,500.00	\$708.20	(\$6,791.80)
2-8342	ATTORNEY-CONTRACTED/NON-CONTR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$756.25	\$756.25	\$0.00	\$0.00	\$756.25
2-8359	NON-CONTRACTED RESPITE	\$0.00	\$168.00	\$168.00	(\$168.00)	(\$168.00)	\$0.00	\$529.00	\$168.00	(\$529.00)	(\$168.00)
2-8360	NON-CONTRACTED CONSULTANTS	\$4,562.94	\$3,516.95	\$0.00	\$1,045.99	\$4,562.94	\$8,718.24	\$7,321.09	\$1,287.19	\$1,397.15	\$7,431.05
Total Other Operating		\$872,176.42	\$952,378.03	\$992,055.09	(\$80,201.61)	(\$119,878.67)	\$6,959,868.41	\$7,113,470.94	\$7,619,929.08	(\$153,602.53)	(\$660,060.67)
Total Expense		\$2,876,359.31	\$3,180,803.28	\$2,952,870.09	(\$304,443.97)	(\$76,510.78)	\$22,289,024.05	\$22,725,127.90	\$22,826,161.69	(\$436,103.85)	(\$537,137.64)

	APRIL 2026					YEAR TO DATE				
	APR FY26	APR FY26	APR FY25	Variance	Variance	FY2026 Y-T-D	FY2025 Y-T-D	FY2025 Y-T-D	Variance	Variance
	Actual	Budget	Actual	Budget	FY 2025	Actual	Budget	Actual	Y-T-D Budget	Y-T-D FY 2025
BEGINNING NET ASSETS	\$14,877,790.72	\$14,877,790.72	\$12,054,246.75	\$0.00	\$2,823,543.97	\$13,515,817.20	\$13,515,817.20	\$13,351,495.33	\$0.00	\$164,321.87
NET SURPLUS/(DEFICIT)	(\$167,105.17)	(\$133,056.65)	\$2,091,877.65	(\$34,048.52)	(\$2,258,982.82)	\$1,194,868.35	\$1,050,225.57	\$794,629.07	\$144,642.78	\$400,239.28

5 RECOMMENDATIONS

B. BUDGET AND FINANCE

1) FINANCIAL STATEMENTS-MAY 2026

RECOMMENDED ACTION: That the Board of Trustees approves the financial statements for May 2026.

BACKGROUND INFORMATION: Board of Trustee policy requires the periodic presentation of financial and statistical information. Our Performance Contracts with the Texas Health and Human Service Commission require the Board of Trustee Chair, Executive Director, and Financial Officer to certify the accuracy of the financial statements on a quarterly basis. Although this certification does not require Board of Trustee approval, we will continue to present these to the Board of Trustees.

SUPPORTING INFORMATION:

- ❖ Number of Days of Operation in Fund Balance is 162.
- ❖ Accounts Receivable *increased* by \$309,824, going from \$1,690,071 to \$1,999,895. This was due to not receiving the SB292 amount for April of \$295,320 until June.
- ❖ Accounts Payable *increased* by \$177,135, going from \$861,163 to \$1,038,298.
- ❖ **FINANCIAL STATUS:** The Center had a loss of \$125,237 for May and a cumulative gain of \$1,069,631 for the year.
- ❖ **REVENUE:** Overall Revenue received in May 2026 was \$199,665 less than budgeted.
 - **Patient Fees** were \$2,089 less than budgeted.
 - This is based on actual cash received in May for services.
 - **Miscellaneous** was \$39,727 less than budgeted.
 - In-kind Match was \$27,950 less than budgeted due to the actual usage of the psychiatric bed days at Red River and our other contracted hospitals. This is based on the PESC in-kind match for psychiatric bed days and is provided by Red River. It is also based on the Justice Involved Grant, also known as SB 292 contract, that has increased the Center's Mental Health and Substance Abuse bed usage at Red River. We also have the Private Psychiatric Bed (PPB) revenue through the MH General revenue fund, that uses bed days from various contracted hospitals where we are receiving in-kind.
 - Interest Income was \$10,795 less than budgeted.

5 RECOMMENDATIONS

B. BUDGET AND FINANCE

1) FINANCIAL STATEMENTS-MAY 2026

- **Other State Funding** was \$96,175 less than budgeted.
 - Justice Involved Grant Program (SB292) Revenue was \$108,335 less than budgeted. We were given notice from the state that we had money from FY2025 to expend in FY2026 and so the budget was increased accordingly. This is all based on need for psychiatric beds which will vary greatly from month to month.
 - **Other Federal Funding** was \$35,054 more than budgeted.
 - The Medicaid Admin Claiming revenue is \$36,556 more than budgeted. The new HHSC Steps system is still calculating the MAC amount incorrectly. Due to the Care Report 3 due June 15th, we entered in the MAC amount as is. A corrected Medicaid Admin Claiming amount will be entered in June given that HHSC can fix the problem by that time.
 - **General Revenue** was \$96,727 less than budgeted.
 - PESC revenue was \$56,927 less than budgeted. PESC revenue fluctuates based on client need for psychiatric beds.
 - Private Psychiatric Beds MH/PPB Revenue was \$40,431 less than budgeted. This revenue also fluctuates based on client need for psychiatric beds.
 - **Allocated Federal Funds** were right on budget.
- ❖ **EXPENSES:** Overall expense for May 2026 was \$184,406 less than budgeted.
- **Personnel** cost was \$9,042 more than budgeted.
 - Salaries were \$7,136 more than budgeted. The Center's overtime was \$8,116 more than budgeted. We have had to cover 3 clerk positions outside of Wichita Falls, Crisis is down 1 position, and IDD has been down 3 positions. This should level out within the next two months.
 - Benefits were \$1,906 more than budgeted.
 - **Contract** cost was \$179,329 less than budgeted.
 - PESC Bed Day Expense was \$43,908 less than budgeted, PPB Bed Day expense was \$34,497 less than budgeted, and SB292 Bed Day expense was \$99,858 less than budgeted. All these expenses fluctuate based on client need for the psychiatric beds.
 - **Travel and Training** expenses were \$19 less than budgeted.

5 RECOMMENDATIONS

B. BUDGET AND FINANCE

1) FINANCIAL STATEMENTS-MAY 2026

- **Capital Outlay** expense was \$5,000 more than budgeted. When the adjusted budget was completed, it was without knowing that we would receive the new cars for ECI almost immediately. Our last endeavor to acquire cars took 8 months.
- **Non-Capitalized Equipment** expense was \$71 less than budgeted.
- **Pharmaceutical** expense was \$285 less than budgeted. This is based upon actual expenses and will fluctuate with patient care. As of January 2021, Community Benefit and Uncompensated Care expired. This means the Center now pays for all medical invoices from Clinical Pathology Laboratories and Integrated Prescription Management that were being paid by SONT, Service Organization of North Texas. The Wood Group invoices will still be paid by SONT up to the time they no longer can or will pay for them.
- **Other Operating** expense was \$18,743 less than budgeted.
 - In-Kind Expense was \$27,950 less than budgeted. This is attributed to the contract with Red River for the PESC contract, the Justice Involved Bed Days contract (SB292), and the Private Psychiatric Bed Days contract. It is based on bed day usage and will fluctuate based on client need. No actual dollars are exchanged and there is a corresponding revenue, so the net difference is zero.
 - Building Repair & Maintenance was \$6,390 more than budgeted. The Center had the floors restored in the Broad building as it has not been done for a long time and needed to be done.

Helen Farabee Centers
Balance Sheet - As Of May 2026

Assets	Actual
CASH GENERAL OPERATING FUND	\$ 5,724,785.56
CASH INTERNAL SERVICE FUND	\$ 2,171,281.56
CASH SELF FUNDED INSURANCE	\$ 487,297.42
SAVINGS	\$ 20,931.00
PETTY CASH FUNDS-CENTERWIDE	\$ 798.17
INVESTMENTS GENERAL OPERATING FUND	\$ 8,836,965.04
INVESTMENTS INTERNAL SERVICE FUND	\$ 716,079.71
ACCOUNTS RECEIVABLE	\$ 1,999,894.70
PREPAID	\$ 484,268.15
PREPAID MISCELLANEOUS-SELF INSURED FUNDS	\$ 687.47
DEPOSITS	\$ 174,740.64
DEPOSITS-SELF INSURED FUNDS	\$ 25,000.00
AMTS PROVIDED-PERSONAL LEAVE	\$ 947,522.78
LAND	\$ 1,057,659.65
BUILDINGS & IMPROVEMENTS	\$ 2,476,885.44
LEASEHOLD IMPROVEMENTS	\$ 132,631.17
EQUIP/FURN/FIX	\$ 422,095.46
COMPUTERS & PERIPHERALS	\$ 757,459.77
VEHICLES & CONTRACTORS EQ	\$ 1,924,780.72
COMPUTER SOFTWARE	\$ 368,100.66
ACCUMULATED DEPRECIATION	\$ (4,934,357.40)
CLINICAL SOFTWARE PROJECT	\$ -
WICHITA FALLS BUILDING PROJECT	\$ 386,012.69
ISF-MAJOR PROJECTS WORK-IN-PROGRESS	\$ (1,228.23)
Total Assets	\$ 24,180,292.13
Liabilities and Net Assets	
Liabilities	
ACCOUNTS PAYABLE GENERAL OPERATING FUND	\$ 888,445.42
ACCOUNTS PAYABLE INTERNAL SERVICE FUND	\$ 4,209.44
ACCOUNTS PAYABLE-SELF INSURED FUND	\$ 19,349.84
ACCOUNTS PAYABLE-PAYABLE TO STATE	\$ 126,293.70
PAYROLL PAYABLE	\$ 509,787.26
UMR PAYABLE	\$ 87,235.86
EMPLOYEE DEDUCTION PAYBLE	\$ 10,060.40
DEFERRED REVENUE	\$ 1,023,470.15
ACCUM PERSONAL LEAVE-CURRENT	\$ 19,117.92
ACCUM PERSONAL LEAVE-LONGTERM	\$ 947,522.78
UMR CLAIMS PAYABLE - IBNR	\$ 140,000.00
Total Liabilities	\$ 3,775,492.77
Net Assets	
UNRESERVED-FUND BALANCE	\$ 14,115,568.84
UNRESERVED-ACCUM PERSONNEL LEAVE	\$ 947,522.78
INCOME SUMMARY-OPERATING FUND	\$ (124,008.40)
INCOME SUMMARY-INTERNAL SERVICE FUND	\$ 5,553,925.68
CONTRIBUTED CAPITAL	\$ (239,510.60)
RETAINED EARNINGS	\$ 151,301.06
Total Net Assets	\$ 20,404,799.36
Total Liabilities and Net Assets	\$ 24,180,292.13

Helen Farabee Centers MAY 2026 Income Statement

		MAY 2026					YEAR TO DATE				
		MAY FY26	MAY FY26	MAY FY25	Variance	Variance	FY2026 Y-T-D	FY2025 Y-T-D	FY2025 Y-T-D	Variance	Variance
		Actual	Budget	Actual	Budget	FY 2025	Actual	Budget	Actual	Y-T-D Budget	Y-T-D FY 2025
Revenue											
City Revenue - Deferred Revenue											
2-7000	CITY OF WICHITA FALLS	\$8,333.34	\$8,333.34	\$8,333.34	\$0.00	\$0.00	\$75,000.00	\$75,000.00	\$75,000.00	\$0.00	\$0.00
2-7001	CITY OF CHILLICOTHE	\$27.50	\$27.50	\$27.50	\$0.00	\$0.00	\$247.50	\$247.50	\$247.50	\$0.00	\$0.00
2-7002	CITY OF QUANAH	\$55.00	\$55.00	\$55.00	\$0.00	\$0.00	\$495.00	\$495.00	\$495.00	\$0.00	\$0.00
2-7004	CITY OF BURKBURNETT	\$417.67	\$417.67	\$417.66	\$0.00	\$0.01	\$3,759.00	\$3,759.00	\$3,759.00	\$0.00	\$0.00
2-7005	CITY OF GRAHAM	\$1,250.00	\$1,250.00	\$1,250.00	\$0.00	\$0.00	\$11,250.00	\$11,250.00	\$11,250.00	\$0.00	\$0.00
2-7006	CITY OF NOCONA	\$125.00	\$125.00	\$125.00	\$0.00	\$0.00	\$1,125.00	\$1,125.00	\$1,125.00	\$0.00	\$0.00
2-7007	CITY OF BOWIE	\$666.67	\$666.67	\$666.66	\$0.00	\$0.01	\$6,000.00	\$6,000.00	\$6,000.00	\$0.00	\$0.00
Total City Revenue		\$10,875.18	\$10,875.18	\$10,875.16	\$0.00	\$0.02	\$97,876.50	\$97,876.50	\$97,876.50	\$0.00	\$0.00
County Revenue - Deferred Revenue											
2-7020	WICHITA COUNTY	\$18,333.33	\$18,333.33	\$13,333.33	\$0.00	\$5,000.00	\$145,000.00	\$145,000.00	\$106,666.65	\$0.00	\$38,333.35
2-7021	HASKEL COUNTY	\$1,387.67	\$1,387.67	\$1,387.67	\$0.00	\$0.00	\$12,489.01	\$12,489.01	\$12,110.53	\$0.00	\$378.48
2-7022	STONEWALL COUNTY	\$211.89	\$211.89	\$176.84	\$0.00	\$35.05	\$1,907.01	\$1,907.01	\$1,591.50	\$0.00	\$315.51
2-7023	KNOX COUNTY	\$554.17	\$554.17	\$551.40	\$0.00	\$2.77	\$4,987.50	\$4,987.50	\$4,962.60	\$0.00	\$24.90
2-7024	DICKENS COUNTY	\$0.00	\$0.00	\$149.81	\$0.00	(\$149.81)	\$0.00	\$0.00	\$1,348.29	\$0.00	(\$1,348.29)
2-7025	YOUNG COUNTY	\$3,958.34	\$3,958.34	\$2,862.00	\$0.00	\$1,096.34	\$35,625.00	\$35,625.00	\$25,758.00	\$0.00	\$9,867.00
2-7026	THROCKMORTON COUNTY	\$273.27	\$273.27	\$156.06	\$0.00	\$117.21	\$2,459.40	\$2,459.40	\$1,404.48	\$0.00	\$1,054.92
2-7027	HARDEMAN COUNTY	\$353.45	\$353.45	\$0.00	\$0.00	\$353.45	\$3,180.98	\$3,180.98	\$0.00	\$0.00	\$3,180.98
2-7028	WISE COUNTY	\$4,616.67	\$4,616.67	\$4,616.66	\$0.00	\$0.01	\$41,549.99	\$41,549.99	\$41,550.00	\$0.00	(\$0.01)
2-7029	BAYLOR COUNTY	\$433.34	\$433.34	\$433.34	\$0.00	\$0.00	\$3,899.98	\$3,899.98	\$3,900.00	\$0.00	(\$0.02)
2-7030	FOARD COUNTY	\$110.00	\$110.00	\$205.99	\$0.00	(\$95.99)	\$990.00	\$990.00	\$1,853.91	\$0.00	(\$863.91)
2-7031	MONTAGUE COUNTY	\$8,388.03	\$8,388.03	\$8,107.84	\$0.00	\$280.19	\$75,492.34	\$75,492.34	\$72,970.56	\$0.00	\$2,521.78
2-7032	JACK COUNTY	\$2,956.19	\$2,956.19	\$1,250.00	\$0.00	\$1,706.19	\$26,605.68	\$26,605.68	\$11,250.00	\$0.00	\$15,355.68
2-7033	CLAY COUNTY	\$333.34	\$333.34	\$241.67	\$0.00	\$91.67	\$2,999.98	\$2,999.98	\$2,175.01	\$0.00	\$824.97
2-7034	COTTLE COUNTY	\$199.75	\$199.75	\$199.75	\$0.00	\$0.00	\$1,797.75	\$1,797.75	\$1,797.75	\$0.00	\$0.00
2-7035	CHILDRESS COUNTY	\$347.92	\$347.92	\$347.92	\$0.00	\$0.00	\$3,131.25	\$3,131.25	\$3,131.26	\$0.00	(\$0.01)
2-7036	ARCHER COUNTY SUPPORT	\$964.59	\$964.59	\$208.34	\$0.00	\$756.25	\$8,681.23	\$8,681.23	\$1,875.00	\$0.00	\$6,806.23
Total County Revenue		\$43,421.95	\$43,421.95	\$34,228.62	\$0.00	\$9,193.33	\$370,797.10	\$370,797.10	\$294,345.54	\$0.00	\$76,451.56
Other Taxing Authority Funds - Deferred Revenue											
2-7038	INDEPENDENT SCHOOL DISTRICT	\$265.00	\$265.00	\$265.00	\$0.00	\$0.00	\$2,385.00	\$2,385.00	\$2,385.00	\$0.00	\$0.00
Total Other Taxing Authority Funds		\$265.00	\$265.00	\$265.00	\$0.00	\$0.00	\$2,385.00	\$2,385.00	\$2,385.00	\$0.00	\$0.00
Patient Fees - Cash Basis Only											
2-7050	CONSUMER FEES	\$22,887.27	\$24,289.73	\$25,999.73	(\$1,402.46)	(\$3,112.46)	\$194,840.92	\$163,905.27	\$155,375.84	\$30,935.65	\$39,465.08
2-7060	PRIVATE INSURANCE MCO CARD SERVICES	\$40,624.20	\$40,399.08	\$34,435.13	\$225.12	\$6,189.07	\$283,922.15	\$277,442.98	\$266,592.75	\$6,479.17	\$17,329.40
2-7070	PRIVATE INSURANCE MCO CASE MANAGEMENT	\$14,752.52	\$14,170.96	\$14,234.34	\$581.56	\$518.18	\$134,561.06	\$112,687.81	\$112,890.87	\$21,873.25	\$21,670.19
2-7080	PRIVATE INSURANCE MCO REHAB	\$12,983.74	\$14,476.88	\$14,476.88	(\$1,493.14)	(\$1,493.14)	\$110,352.35	\$107,714.62	\$106,771.98	\$2,637.73	\$3,580.37
Total Patient Fees		\$91,247.73	\$93,336.65	\$89,146.08	(\$2,088.92)	\$2,101.65	\$723,676.48	\$661,750.68	\$641,631.44	\$61,925.80	\$82,045.04
Miscellaneous - Cash Basis											
2-7037	IN-KIND MATCH	\$768,213.30	\$796,163.41	\$968,535.39	(\$27,950.11)	(\$200,322.09)	\$5,996,569.74	\$6,185,226.73	\$6,860,198.51	(\$188,656.99)	(\$863,628.77)
2-7100	MEDICARE - TITLE XVII	\$2,131.45	\$2,033.62	\$2,033.62	\$97.83	\$97.83	\$31,911.13	\$26,714.12	\$26,714.12	\$5,197.01	\$5,197.01
2-7260	RENT	\$1,137.50	\$1,137.50	\$3,830.75	\$0.00	(\$2,693.25)	\$10,237.50	\$10,237.50	\$44,314.25	\$0.00	(\$34,076.75)
2-7270	DONATIONS/CONTRIBUTIONS	\$543.00	\$50.00	\$283.33	\$493.00	\$259.67	\$10,983.46	\$7,680.89	\$9,147.55	\$3,302.57	\$1,835.91
2-7272	CART EARNED REVENUE	\$20,101.39	\$20,864.77	\$57,514.00	(\$763.38)	(\$37,412.61)	\$154,285.35	\$157,722.63	\$300,880.89	(\$3,437.28)	(\$146,595.54)
2-7273	WF OPIOID GRANT	\$16,151.59	\$13,226.33	\$1,000.00	\$2,925.26	\$15,151.59	\$64,185.05	\$55,425.53	\$2,996.00	\$8,759.52	\$61,189.05
2-7275	INTEREST INCOME	\$4,361.18	\$15,155.72	\$5,155.72	(\$10,794.54)	(\$794.54)	\$205,398.37	\$189,613.13	\$215,314.78	\$15,785.24	(\$9,916.41)
2-7280	MISCELLANEOUS	\$2,452.75	\$6,188.00	\$2,188.00	(\$3,735.25)	\$264.75	\$33,600.70	\$34,384.95	\$111,590.01	(\$784.25)	(\$77,989.31)
Total Miscellaneous		\$815,092.16	\$854,819.35	\$1,040,540.81	(\$39,727.19)	(\$225,448.65)	\$6,507,171.30	\$6,667,005.48	\$7,571,156.11	(\$159,834.18)	(\$1,063,984.81)

	MAY 2026					YEAR TO DATE					
	MAY FY26	MAY FY26	MAY FY25	Variance	Variance	FY2026 Y-T-D	FY2025 Y-T-D	FY2025 Y-T-D	Variance	Variance	
	Actual	Budget	Actual	Budget	FY 2025	Actual	Budget	Actual	Y-T-D Budget	Y-T-D FY 2025	
Other State Funding - Accrued Basis Only											
2-7120	MH FIRST AID	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$55,000.00	\$55,000.00	\$47,000.00	\$0.00	\$8,000.00
2-7122	TCCOOMMI EARNED INCOME	\$31,575.94	\$30,930.58	\$29,926.65	\$645.36	\$1,649.29	\$279,059.68	\$273,014.74	\$270,063.42	\$6,044.94	\$8,996.26
2-7124	SUBSTANCE ABUSE SERVICES	\$26,643.81	\$27,530.10	\$22,147.45	(\$886.29)	\$4,496.36	\$289,143.61	\$289,834.30	\$197,692.46	(\$690.69)	\$91,451.15
2-7125	SUD COMMUNITY MH GRANT PROGRAM	\$4,267.20	\$3,521.67	\$1,076.65	\$745.53	\$3,190.55	\$34,250.96	\$31,694.99	\$16,596.78	\$2,555.97	\$17,654.18
2-7127	OSAR - OUTREACH, SCREENING ASSESSMENT, REFERRAL	\$42,287.85	\$44,063.40	\$22,568.41	(\$1,775.55)	\$19,719.44	\$245,965.79	\$280,034.48	\$323,653.19	(\$34,068.69)	(\$77,687.40)
2-7128	RSS - RECOVERY SUPPORT SERVICES	\$11,974.97	\$13,398.78	\$6,933.36	(\$1,423.81)	\$5,041.61	\$84,014.04	\$89,058.99	\$54,729.03	(\$5,044.95)	\$29,285.01
2-7150	MFP/ECC REVENUE	\$6,031.48	\$2,707.50	\$1,775.16	\$3,323.98	\$4,256.32	\$36,061.91	\$24,367.48	\$23,949.37	\$11,694.43	\$12,112.54
2-7152	PASSR IDD SPECIALIZED SERVICES	\$302.54	\$791.76	\$641.76	(\$489.22)	(\$339.22)	\$8,199.54	\$9,517.29	\$5,711.82	(\$1,317.75)	\$2,487.72
2-7153	PASRR IDD SPECIALIZED SERVICES - OBRA - LIDDA	\$350.00	\$0.00	\$350.00	\$350.00	\$0.00	\$1,050.00	\$700.00	\$4,200.00	\$350.00	(\$3,150.00)
2-7132	CMHG LPHA EXPANSION	\$5,999.71	\$6,250.66	\$4,873.77	(\$250.95)	\$1,125.94	\$46,971.71	\$47,994.60	\$36,553.29	(\$1,022.89)	\$10,418.42
2-7216	MHGJII NCA - JBCR	\$22,465.42	\$18,098.12	\$0.00	\$4,367.30	\$22,465.42	\$172,279.79	\$169,082.29	\$0.00	\$3,197.50	\$172,279.79
2-7218	JUSTICE INVOLVED GRANT PROGRAM	\$390,127.73	\$498,462.50	\$344,772.19	(\$108,334.77)	\$45,355.54	\$1,826,829.42	\$2,138,304.91	\$1,779,961.69	(\$311,475.49)	\$46,867.73
2-7245	DARS-ECI REVENUE	\$110,673.29	\$103,119.65	\$103,462.43	\$7,553.64	\$7,210.86	\$1,070,017.45	\$1,054,477.04	\$910,659.72	\$15,540.41	\$159,357.73
Total Other State Funding		\$652,699.94	\$748,874.72	\$538,527.83	(\$96,174.78)	\$114,172.11	\$4,148,843.90	\$4,463,081.11	\$3,670,770.77	(\$314,237.21)	\$478,073.13
Other Federal Funding											
2-7102	MEDICAID-CARD SERVICES	\$2,656.48	\$2,200.17	\$2,200.17	\$456.31	\$456.31	\$17,145.19	\$6,918.72	\$7,511.66	\$10,226.47	\$9,633.53
2-7104	MEDICAID-CASE MANAGEMENT	\$6,012.01	\$6,617.80	\$5,617.80	(\$605.79)	\$394.21	\$29,736.71	\$37,744.26	\$41,939.69	(\$8,007.55)	(\$12,202.98)
2-7106	MEDICAID-IDD SERV COORDINATION	\$52,299.90	\$57,348.60	\$53,348.60	(\$5,048.70)	(\$1,048.70)	\$498,632.80	\$504,948.23	\$528,666.78	(\$6,315.43)	(\$30,033.98)
2-7108	MEDICAID REHAB	\$22,390.34	\$24,017.43	\$24,143.14	(\$1,627.09)	(\$1,752.80)	\$157,598.29	\$159,998.00	\$158,640.17	(\$2,399.71)	(\$1,041.88)
2-7110	MEDICAID PASRR	\$1,206.71	\$1,998.61	\$1,998.61	(\$791.90)	(\$791.90)	\$4,682.00	\$4,989.96	\$6,084.94	(\$307.96)	(\$1,402.94)
2-7112	MEDICAID-ADMIN CLAIMING	\$115,667.59	\$79,112.00	\$40,000.00	\$36,555.59	\$75,667.59	\$478,373.67	\$411,556.46	\$389,452.30	\$66,817.21	\$88,921.37
2-7114	MEDICAID-HABILITATION COORDINATION	\$14,080.62	\$9,182.95	\$9,182.95	\$4,897.67	\$4,897.67	\$77,923.94	\$68,303.61	\$68,303.61	\$9,620.33	\$9,620.33
2-7120	MH FIRST AID	\$9,138.67	\$10,670.70	\$10,924.60	(\$1,532.03)	(\$1,785.93)	\$66,042.10	\$66,346.60	\$61,739.50	(\$304.50)	\$4,302.60
2-7126	STATE HOSPITAL STEP-DOWN PROGRAM	\$49,921.48	\$55,016.51	\$53,916.51	(\$5,095.03)	(\$3,995.03)	\$476,070.99	\$487,979.71	\$491,279.71	(\$11,908.72)	(\$15,208.72)
2-7130	MH OUTPATIENT CAPACITY EXPANSION	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$117,260.83	\$0.00	(\$117,260.83)
2-7252	DIRECTED PAYMENT PROGRAM - BEHAVIORAL HEALTH SERVICES	\$43,894.22	\$36,315.40	\$41,907.03	\$7,578.82	\$1,987.19	\$338,230.69	\$318,967.42	\$315,225.33	\$19,263.27	\$23,005.36
2-7254	PUBLIC HEALTH PROVIDER - CHARITY CARE PROGRAM	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,569,055.57	\$2,569,055.57	\$2,197,789.03	\$0.00	\$371,266.54
2-7258	TRANSITION SUPPORT LIAISON	\$5,526.06	\$5,260.34	\$5,673.83	\$265.72	(\$147.77)	\$48,138.74	\$47,342.98	\$7,253.43	\$795.76	\$40,885.31
Total Other Federal Funding		\$322,794.08	\$287,740.51	\$248,913.24	\$35,053.57	\$73,880.84	\$4,761,630.69	\$4,684,151.52	\$4,391,146.98	\$77,479.17	\$370,483.71
General Revenue - Deferred Revenue											
2-7215	PESC	\$112,039.88	\$168,336.73	\$246,480.30	(\$56,296.85)	(\$134,440.42)	\$1,573,934.76	\$1,672,817.79	\$1,576,406.53	(\$98,883.03)	(\$2,471.77)
2-7217	Private Psychiatric Beds MH/PPB	\$19,859.79	\$60,290.31	\$36.14	(\$40,430.52)	\$19,823.65	\$699,152.76	\$756,729.07	\$903,204.03	(\$57,576.31)	(\$204,051.27)
2-7220	GENERAL REVENUE - MH	\$600,876.26	\$600,876.26	\$600,876.25	\$0.00	\$0.01	\$5,407,886.25	\$5,407,886.25	\$5,407,886.25	\$0.00	\$0.00
2-7222	GENERAL REVENUE - VETERANS SERVICES	\$5,833.34	\$5,833.34	\$5,833.34	\$0.00	\$0.00	\$52,500.00	\$52,500.00	\$52,500.00	\$0.00	\$0.00
2-7224	GENERAL REVENUE - BH SVCS IN EDUC SVC CTR	\$9,583.34	\$9,583.34	\$9,583.34	\$0.00	\$0.00	\$86,250.00	\$86,250.00	\$86,250.00	\$0.00	\$0.00
2-7230	GENERAL REVENUE - IDD	\$93,036.53	\$93,036.53	\$93,036.53	\$0.00	\$0.00	\$837,328.78	\$837,328.78	\$837,328.77	\$0.00	\$0.01
2-7232	GENERAL REVENUE-CRISIS REDESIG	\$39,884.50	\$39,884.50	\$39,884.50	\$0.00	\$0.00	\$358,960.50	\$358,960.50	\$358,960.50	\$0.00	\$0.00
2-7235	GENERAL REVENUE - IDD ARPA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,795.39	\$2,795.39	\$17,061.96	\$0.00	(\$14,266.57)
2-7236	IDD GR-CRISIS RESPITE-CIS	\$17,980.66	\$17,980.66	\$17,980.66	\$0.00	\$0.00	\$161,826.00	\$161,826.00	\$161,826.00	\$0.00	\$0.00
2-7238	PERMANENCY PLANNING	\$1,854.75	\$1,854.75	\$1,854.75	\$0.00	\$0.00	\$16,692.75	\$16,692.75	\$16,692.75	\$0.00	\$0.00
Total General Revenue		\$900,949.05	\$997,676.42	\$1,015,565.81	(\$96,727.37)	(\$114,616.76)	\$9,197,327.19	\$9,353,786.53	\$9,418,116.79	(\$156,459.34)	(\$220,789.60)
Medicaid Waiver											
2-7137	ICF-QAF	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$105.20)	\$0.00	\$105.20
Total Medicaid Waiver		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$105.20)	\$0.00	\$105.20
Allocated Federal Funds - Accrued Basis Only											
2-7200	TANF-CAS	\$14,565.75	\$14,565.75	\$14,565.75	\$0.00	\$0.00	\$131,091.75	\$131,091.75	\$131,091.75	\$0.00	\$0.00
2-7201	TANF-ADULT	\$3,207.59	\$3,207.59	\$3,207.59	\$0.00	\$0.00	\$28,868.25	\$28,868.25	\$28,868.25	\$0.00	\$0.00
2-7202	TANF-TITLE XX-ADULT	\$3,663.66	\$3,663.66	\$3,663.66	\$0.00	\$0.00	\$32,973.00	\$32,973.00	\$32,973.00	\$0.00	\$0.00
2-7203	TRANSITION-TITLE XX-CRISIS	\$5,992.25	\$5,992.25	\$5,992.25	\$0.00	\$0.00	\$53,930.25	\$53,930.25	\$53,930.25	\$0.00	\$0.00
2-7210	MENTAL HEALTH BLOCK GRANT	\$36,511.91	\$36,511.91	\$36,511.87	\$0.00	\$0.04	\$328,607.24	\$328,607.24	\$328,607.25	\$0.00	(\$0.01)
Total Allocated Federal Funds		\$63,941.16	\$63,941.16	\$63,941.12	\$0.00	\$0.04	\$575,470.49	\$575,470.49	\$575,470.50	\$0.00	(\$0.01)
Total Revenue		\$2,709,254.14	\$3,047,746.63	\$5,044,747.74	(\$338,492.49)	(\$2,335,493.60)	\$23,483,892.40	\$23,775,353.47	\$23,620,790.76	(\$291,461.07)	(\$136,898.36)

	MAY 2026					YEAR TO DATE					
	MAY FY26	MAY FY26	MAY FY25	Variance	Variance	FY2026 Y-T-D	FY2025 Y-T-D	FY2025 Y-T-D	Variance	Variance	
	Actual	Budget	Actual	Budget	FY 2025	Actual	Budget	Actual	Y-T-D Budget	Y-T-D FY 2025	
Expense											
Salaries											
2-8000	SALARIES	\$989,589.39	\$990,569.05	\$983,460.32	(\$979.66)	\$6,129.07	\$8,771,571.66	\$8,794,627.29	\$8,608,796.07	(\$23,055.63)	\$162,775.59
2-8001	OVERTIME	\$16,063.67	\$7,948.02	\$8,751.07	\$8,115.65	\$7,312.60	\$81,843.37	\$65,215.44	\$84,542.79	\$16,627.93	(\$2,699.42)
Total Salaries		\$1,009,310.77	\$1,012,295.37	\$954,461.49	\$7,135.99	\$13,441.67	\$1,974,172.10	\$1,966,350.34	\$1,891,678.48	(\$6,427.70)	\$160,076.17
Benefits											
2-8002	EMPLOYER'S FICA/MEDICARE	\$74,308.82	\$73,397.41	\$73,532.65	\$911.41	\$776.17	\$647,052.15	\$659,514.67	\$635,441.25	(\$12,462.52)	\$11,610.90
2-8003	TEC UNEMPLOYMENT TAX	\$1,589.31	\$1,733.11	\$612.96	(\$143.80)	\$976.35	\$44,038.59	\$44,596.03	\$19,528.44	(\$557.44)	\$24,510.15
2-8004	WORKER'S COMPENSATION	\$1,986.00	\$2,041.46	\$1,956.00	(\$55.46)	\$30.00	\$26,663.00	\$28,435.59	\$16,831.00	(\$1,772.59)	\$9,832.00
2-8005	RETIREMENT EMPLOYER CONTRIBUTION 401A	\$53,261.41	\$53,036.55	\$52,338.45	\$224.86	\$922.96	\$471,043.28	\$472,336.25	\$432,559.09	(\$1,292.97)	\$38,484.19
2-8006	HEALTH INSURANCE	\$170,593.08	\$169,612.72	\$155,000.84	\$980.36	\$15,592.24	\$1,483,146.54	\$1,483,223.97	\$1,310,754.34	(\$77.43)	\$172,392.20
2-8008	EMPLOYER FUNDED BASIC LIFE	\$951.52	\$962.66	\$964.38	(\$11.14)	(\$12.86)	\$8,647.09	\$8,579.66	\$4,800.24	\$67.43	\$3,846.85
Total Benefits		\$284,233.15	\$285,526.89	\$256,608.09	\$1,906.23	\$18,284.86	\$564,672.54	\$565,309.08	\$509,788.70	(\$16,095.52)	\$260,676.29
Contracts											
2-8300	PSYCHIATRIST	\$24,000.00	\$24,000.00	\$24,300.00	\$0.00	(\$300.00)	\$212,475.00	\$211,600.00	\$210,675.00	\$875.00	\$1,800.00
2-8302	MEDICAL DIRECTOR	\$0.00	\$0.00	\$7,300.00	\$0.00	(\$7,300.00)	\$0.00	\$0.00	\$14,600.00	\$0.00	(\$14,600.00)
2-8304	PSYCHOLOGIST	\$0.00	\$500.00	\$400.00	(\$500.00)	(\$400.00)	\$2,000.00	\$4,000.00	\$4,000.00	(\$2,000.00)	(\$2,000.00)
2-8306	RN NURSES	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$195.00	\$0.00	\$65.00	\$195.00	\$130.00
2-8318	CRISIS-CONTRACTED	\$12,462.00	\$12,516.42	\$12,462.00	(\$54.42)	\$0.00	\$112,158.00	\$112,602.02	\$112,158.00	(\$444.02)	\$0.00
2-8320	PESC BED DAYS	\$85,500.00	\$129,408.00	\$212,620.00	(\$43,908.00)	(\$127,120.00)	\$1,265,805.00	\$1,339,776.00	\$1,305,340.00	(\$73,971.00)	(\$39,535.00)
2-8321	PPB BED DAYS	\$17,160.00	\$51,657.00	\$0.00	(\$34,497.00)	\$17,160.00	\$606,525.00	\$655,624.00	\$819,780.00	(\$49,099.00)	(\$213,255.00)
2-8322	OSAR-SUBSTANCE ABUSE	\$41,945.63	\$38,033.92	\$22,033.92	\$3,911.71	\$19,911.71	\$257,564.40	\$292,638.17	\$291,638.17	(\$35,073.77)	(\$34,073.77)
2-8326	LABORATORY CONTRACTS	\$1,554.12	\$2,932.06	\$3,770.25	(\$1,377.94)	(\$2,216.13)	\$19,499.43	\$22,480.88	\$17,899.77	(\$2,981.45)	\$1,599.66
2-8336	RESPIRE-CONTRACTED	\$5,195.00	\$5,530.00	\$5,530.00	(\$335.00)	(\$335.00)	\$39,922.25	\$36,918.00	\$35,918.00	\$3,004.25	\$4,004.25
2-8338	SOFTWARE WEB-BASED	\$22,259.54	\$21,451.33	\$21,436.20	\$808.21	\$823.34	\$205,199.95	\$204,465.61	\$203,385.73	\$734.34	\$1,814.22
2-8344	JUSTICE INVOLVED BED DAYS (SB292)	\$353,290.00	\$453,147.53	\$311,815.00	(\$99,857.53)	\$41,475.00	\$1,650,715.00	\$1,937,035.06	\$1,607,925.00	(\$286,320.06)	\$42,790.00
2-8346	STATE HOSPITAL STEP-DOWN PROGRAM CONTRACTED	\$45,500.00	\$45,500.00	\$45,500.00	\$0.00	\$0.00	\$409,500.00	\$409,500.00	\$409,500.00	\$0.00	\$0.00
2-8348	BH SVCS IN ESC-REGION 9	\$477.50	\$703.10	\$703.10	(\$225.60)	(\$225.60)	\$4,510.04	\$5,907.52	\$5,907.52	(\$1,397.48)	(\$1,397.48)
2-8350	OTHER CONTRACTED CONSULTANTS	\$2,989.44	\$7,612.35	\$7,686.15	(\$4,622.91)	(\$4,696.71)	\$34,593.29	\$42,217.32	\$43,812.79	(\$7,624.03)	(\$9,219.50)
2-8352	WFPD - CART	\$10,000.00	\$8,320.30	\$8,496.43	\$1,679.70	\$1,503.57	\$48,319.09	\$43,945.74	\$85,141.10	\$4,373.35	(\$36,822.01)
2-8353	TECHNICAL ASSISTANCE - CART	\$0.00	\$0.00	\$38,615.00	\$0.00	(\$38,615.00)	\$12,490.00	\$32,895.00	\$46,490.00	(\$20,405.00)	(\$34,000.00)
2-8354	WFFD - CART	\$5,000.00	\$5,166.57	\$5,000.00	(\$166.57)	\$0.00	\$46,516.18	\$45,832.85	\$85,000.00	\$683.33	(\$38,483.82)
2-8355	Other Contracted/Non-Contracted Consultants-G & A Services	\$9,411.51	\$9,595.58	\$8,820.70	(\$184.07)	\$590.81	\$83,557.09	\$77,378.66	\$87,728.61	\$6,178.43	(\$4,171.52)
Total Contracts		\$636,744.74	\$816,074.16	\$736,488.75	(\$179,329.42)	(\$99,744.01)	\$5,011,544.72	\$5,474,816.83	\$5,386,964.69	(\$463,272.11)	(\$375,419.97)
Travel and Training											
2-8021	EMPLOYEE MILEAGE	\$762.00	\$1,415.45	\$1,415.45	(\$653.45)	(\$653.45)	\$12,119.52	\$15,363.24	\$16,015.39	(\$3,243.72)	(\$3,895.87)
2-8022	EMPLOYEE PER DIEM (MEALS AND HOTEL)	\$5,548.91	\$2,941.81	\$2,429.30	\$2,607.10	\$3,119.61	\$30,194.06	\$22,196.18	\$22,613.56	\$7,997.88	\$7,580.50
2-8023	EMPLOYEE TRAVEL-AIRFARE & CAR RENTAL	\$765.31	\$2,434.28	\$2,610.91	(\$1,668.97)	(\$1,845.60)	\$8,699.98	\$7,099.48	\$7,737.47	\$1,600.50	\$962.51
2-8024	EMPLOYEE TRAVEL OVER STATE RATE	\$810.28	\$0.00	\$0.00	\$810.28	\$810.28	\$1,739.87	\$212.87	\$1,527.00	\$1,527.00	\$1,527.00
2-8025	EMPLOYEE DEVELOPMENT & TRAINING	\$2,002.75	\$3,116.70	\$5,361.50	(\$1,113.95)	(\$3,358.75)	\$23,024.79	\$24,836.31	\$24,179.45	(\$1,811.52)	(\$1,154.66)
Total Travel and Training		\$9,889.25	\$9,908.24	\$11,817.16	(\$18.99)	(\$1,927.91)	\$75,778.22	\$69,708.08	\$70,758.74	\$6,070.14	\$5,019.48
Capital Outlay											
2-8106	BUILDING USE FEE	\$6,185.68	\$6,232.24	\$7,548.51	(\$46.56)	(\$1,362.83)	\$67,954.09	\$66,434.27	\$71,003.06	\$1,519.82	(\$3,048.97)
2-8126	EQUIP/FURN/FIX USE FEE	\$2,166.98	\$2,278.06	\$2,323.13	(\$111.08)	(\$156.15)	\$18,556.52	\$20,845.37	\$20,980.42	(\$2,288.85)	(\$2,423.90)
2-8146	VEHICLE USE FEE	\$14,962.37	\$9,581.84	\$5,434.79	\$5,380.53	\$9,527.58	\$71,429.30	\$64,140.55	\$51,699.32	\$7,288.75	\$19,729.98
2-8156	SOFTWARE USE FEE	\$0.00	\$0.00	\$208.34	\$0.00	(\$208.34)	\$208.33	\$208.33	\$1,875.00	\$0.00	(\$1,666.67)
2-8166	COMPUTER & PRINTER USE FEE	\$3,080.49	\$3,303.73	\$4,581.85	(\$223.24)	(\$1,501.36)	\$35,780.24	\$40,108.70	\$44,548.62	(\$4,328.46)	(\$8,768.38)
2-8170	CAPITAL OUTLAY	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,506.04	\$5,506.04	\$22,258.05	\$0.00	(\$16,752.01)
Total Capital Outlay		\$26,395.52	\$21,395.87	\$20,096.62	\$4,999.65	\$6,298.90	\$199,434.52	\$197,243.26	\$212,364.47	\$2,191.26	(\$12,929.95)
Non-Capitalized Equipment											
2-8190	MINOR EQUIPMENT PURCHASES	\$627.34	\$698.50	\$423.74	(\$71.16)	\$203.60	\$24,659.25	\$23,881.40	\$30,121.66	\$777.85	(\$5,462.41)
Total Non-Capitalized Equipment		\$627.34	\$698.50	\$423.74	(\$71.16)	\$203.60	\$24,659.25	\$23,881.40	\$30,121.66	\$777.85	(\$5,462.41)

		MAY 2026					YEAR TO DATE				
		MAY FY26	MAY FY26	MAY FY25	Variance	Variance	FY2026 Y-T-D	FY2025 Y-T-D	FY2025 Y-T-D	Variance	Variance
		Actual	Budget	Actual	Budget	FY 2025	Actual	Budget	Actual	Y-T-D Budget	Y-T-D FY 2025
Pharmaceutical											
2-8316	PHARMACIST	\$56,058.92	\$56,344.04	\$55,997.76	(\$285.12)	\$61.16	\$521,792.22	\$513,095.28	\$494,210.53	\$8,696.94	\$27,581.69
Total Pharmaceutical		\$56,058.92	\$56,344.04	\$55,997.76	(\$285.12)	\$61.16	\$521,792.22	\$513,095.28	\$494,210.53	\$8,696.94	\$27,581.69
Other Operating											
2-8007	EAP EXPENSE	\$400.00	\$406.40	\$406.40	(\$6.40)	(\$6.40)	\$3,649.60	\$3,657.60	\$3,536.78	(\$8.00)	\$112.82
2-8020	HIRING RELATED EXPENSES	\$5,588.36	\$4,439.09	\$3,333.07	\$1,149.27	\$2,255.29	\$35,852.15	\$31,592.45	\$29,625.52	\$4,259.70	\$6,226.63
2-8026	EMPLOYEE AWARDS & BANQUETS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14,827.58	\$17,000.00	\$14,757.15	(\$2,172.42)	\$70.43
2-8027	EMPLOYEE FLU SHOTS AND TB	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$556.56	\$1,567.89	\$1,567.89	(\$1,011.33)	(\$1,011.33)
2-8040	PROFESSIONAL/ERROR&OMMISSIONS	\$2,174.49	\$2,174.49	\$2,410.61	\$0.00	(\$236.12)	\$19,570.41	\$19,570.41	\$21,695.49	\$0.00	(\$2,125.08)
2-8041	LIABILITY COVERAGE	\$103.67	\$103.67	\$107.25	\$0.00	(\$3.58)	\$1,033.03	\$933.03	\$1,153.22	\$100.00	(\$120.19)
2-8042	OTHER INSURANCE COVERAGE	\$1,777.85	\$1,777.85	\$1,713.36	\$0.00	\$64.49	\$16,000.65	\$16,000.65	\$15,420.24	\$0.00	\$580.41
2-8050	ADVERTISING EXPENSE	\$625.30	\$1,748.55	\$1,548.55	(\$1,123.25)	(\$923.25)	\$14,928.49	\$18,141.33	\$11,141.61	(\$3,212.84)	\$3,786.88
2-8055	DUES AND MEMBERSHIPS	\$5,401.42	\$5,720.53	\$4,138.09	(\$319.11)	\$1,263.33	\$50,496.16	\$48,075.59	\$37,911.94	\$2,420.57	\$12,584.22
2-8057	LICENSES	\$2,853.94	\$2,548.26	\$1,344.81	\$305.68	\$1,509.13	\$18,308.38	\$11,800.72	\$7,970.40	\$6,507.66	\$10,337.98
2-8060	BOARD ACTIVITY EXPENSE	\$215.41	\$0.00	\$1,055.26	\$215.41	(\$839.85)	\$2,295.71	\$1,763.68	\$2,818.94	\$532.03	(\$523.23)
2-8065	DPP-BHS RISK AND ADMIN EXPENSE	\$2,044.17	\$2,044.17	\$2,044.17	\$0.00	\$0.00	\$18,397.53	\$18,397.53	\$18,397.46	\$0.00	\$0.07
2-8070	UTILITIES	\$16,045.71	\$14,299.21	\$15,187.25	\$1,746.50	\$858.46	\$163,945.83	\$160,811.05	\$160,081.78	\$3,134.78	\$3,864.05
2-8072	TELECOMMUNICATIONS	\$24,372.94	\$24,181.45	\$25,482.38	\$191.49	(\$1,109.44)	\$242,898.33	\$242,232.83	\$240,751.69	\$665.50	\$2,146.64
2-8076	TELEPHONE-BASIC SERVICE EXPENSE	\$2,030.79	\$2,426.92	\$2,426.65	(\$396.13)	(\$395.86)	\$18,245.44	\$21,782.75	\$21,793.53	(\$3,537.31)	(\$3,548.09)
2-8078	CELL PHONE SERVICE EXPENSE	\$1,705.51	\$1,950.47	\$1,975.55	(\$244.96)	(\$270.04)	\$17,499.73	\$19,000.20	\$19,125.57	(\$1,500.47)	(\$1,625.84)
2-8080	LONG DISTANCE TELEPHONE SERVICE EXPENSE	\$377.71	\$270.00	\$270.00	\$107.71	\$107.71	\$3,582.60	\$2,296.69	\$2,296.70	\$1,285.91	\$1,285.90
2-8100	BUILDING RENT	\$57,099.53	\$57,099.53	\$56,826.17	\$0.00	\$273.36	\$513,028.96	\$510,634.96	\$577,652.64	\$2,394.00	(\$64,623.68)
2-8101	P.O. BOX/STORAGE RENTAL/LEASE	\$86.16	\$82.19	\$82.20	\$3.97	\$3.96	\$748.19	\$723.24	\$723.50	\$24.95	\$24.69
2-8102	PROPERTY DAMAGE COVERAGE	\$10,935.10	\$11,732.53	\$10,163.60	(\$797.43)	\$771.50	\$103,291.19	\$105,592.77	\$91,333.40	(\$2,301.58)	\$11,957.79
2-8104	BUILDING REPAIR & MAINTENANCE	\$21,590.65	\$15,201.02	\$14,866.29	\$6,389.63	\$6,724.36	\$139,733.40	\$141,255.34	\$143,138.91	(\$1,521.94)	(\$3,405.51)
2-8120	EQUIPMENT RENTAL/LEASE	\$7,243.59	\$7,160.87	\$7,190.10	\$82.72	\$53.49	\$64,529.90	\$64,175.03	\$64,442.96	\$354.87	\$86.94
2-8124	EQUIPMENT REPAIR & MAINTENANCE	\$2,301.42	\$1,808.19	\$1,808.19	\$493.23	\$493.23	\$19,312.65	\$19,992.77	\$24,161.78	(\$680.12)	(\$4,849.13)
2-8140	VEHICLE LEASE	\$2,161.52	\$2,611.11	\$2,611.11	(\$449.59)	(\$449.59)	\$21,387.15	\$23,499.99	\$23,499.99	(\$2,112.84)	(\$2,112.84)
2-8142	AUTO LIABILITY/PHYS DAMAGE INS	\$7,988.65	\$9,331.45	\$7,886.17	(\$1,342.80)	\$102.48	\$77,974.65	\$78,384.33	\$73,630.77	(\$409.68)	\$4,343.88
2-8143	INSURANCE EXP-DEDUCTIBLES PAID	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$400.00)
2-8144	VEHICLE REPAIR & MAINTENANCE	\$2,334.41	\$3,541.77	\$3,541.77	(\$1,207.36)	(\$1,207.36)	\$29,695.29	\$26,952.33	\$27,094.53	\$2,742.96	\$2,600.76
2-8145	GAS-VEHICLE & EQUIPMENT	\$9,568.50	\$8,664.50	\$6,142.73	\$904.00	\$3,425.77	\$64,896.43	\$61,828.73	\$54,725.35	\$3,067.70	\$10,171.08
2-8200	OFFICE SUPPLIES	\$16,934.09	\$16,412.85	\$21,666.46	\$521.24	(\$4,732.37)	\$107,420.23	\$108,385.90	\$79,668.26	(\$965.67)	\$27,751.97
2-8202	BOOKS & SUBSCRIPTIONS	\$2,017.15	\$1,969.22	\$10,350.55	\$47.93	(\$8,333.40)	\$35,117.60	\$34,928.64	\$34,353.14	\$188.96	\$764.46
2-8204	JANITORIAL/CLEANING SUPPLIES	\$1,121.76	\$782.53	\$787.88	\$339.23	\$333.88	\$7,435.11	\$6,047.51	\$6,170.62	\$1,387.60	\$1,264.49
2-8206	OTHER CONSUMABLE SUPPLIES	\$1,755.44	\$1,327.40	\$938.76	\$428.04	\$816.68	\$12,053.50	\$11,427.64	\$11,057.99	\$625.86	\$995.51
2-8208	MEDICAL SUPPLIES	\$365.58	\$401.80	\$405.29	(\$36.22)	(\$39.71)	\$10,789.98	\$10,469.90	\$6,939.64	\$320.08	\$3,850.34
2-8210	FOOD	\$538.40	\$449.54	\$451.70	\$88.86	\$86.70	\$3,125.96	\$2,285.56	\$3,412.37	\$840.40	(\$286.41)
2-8214	PERSONAL CARE/HYGENE SUPPLIES	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2-8216	TRAINING/BEHAVIOR MODIFICATION	(\$69.90)	\$0.00	\$0.00	(\$69.90)	(\$69.90)	\$865.66	\$0.00	\$0.00	\$865.66	\$865.66
2-8218	CONSUMER ASSISTANCE	\$2,071.40	\$720.86	\$1,324.82	\$1,350.54	\$746.58	\$7,236.78	\$7,200.86	\$19,179.06	\$35.92	(\$11,942.28)
2-8220	PRINTING SERVICES	\$3,561.62	\$2,345.39	\$2,354.01	\$1,216.23	\$1,207.61	\$25,767.23	\$23,449.15	\$20,959.83	\$2,318.08	\$4,807.40
2-8221	COURIER DELIVERY SERVICES	\$0.00	\$49.71	\$49.71	(\$49.71)	(\$49.71)	\$370.64	\$386.37	\$386.37	(\$15.73)	(\$15.73)
2-8222	POSTAGE & DELIVERY CHARGES	\$1,357.88	\$1,556.74	\$1,556.74	(\$198.86)	(\$198.86)	\$14,243.36	\$14,696.74	\$14,701.57	(\$453.38)	(\$458.21)
2-8226	SANCTIONS	\$273.06	\$0.00	\$0.00	\$273.06	\$273.06	\$3,273.06	\$0.00	\$3,138.70	\$3,273.06	\$134.36
2-8228	BNK CHRGS & CREDIT CRD FEES	\$892.08	\$1,128.15	\$1,133.15	(\$236.07)	(\$241.07)	\$8,010.92	\$9,315.21	\$9,323.64	(\$1,304.29)	(\$1,312.72)
2-8232	MISCELLANEOUS CHARGE & EXPENSE	\$99.04	\$210.17	\$182.22	(\$111.13)	(\$83.18)	\$1,877.66	\$3,222.49	\$9,932.86	(\$1,344.83)	(\$8,055.20)
2-8237	IN-KIND EXPENSES	\$768,213.30	\$796,163.42	\$968,535.39	(\$27,950.12)	(\$200,322.09)	\$5,996,569.74	\$6,185,226.74	\$6,860,198.51	(\$188,657.00)	(\$863,628.77)
2-8340	CPA FIRM	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$25,708.20	\$25,000.00	\$32,500.00	\$708.20	(\$6,791.80)
2-8342	ATTORNEY-CONTRACTED/NON-CONTR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$756.25	\$756.25	\$0.00	\$0.00	\$756.25
2-8359	NON-CONTRACTED RESPITE	\$0.00	\$168.00	\$0.00	(\$168.00)	\$0.00	\$0.00	\$529.00	\$168.00	(\$529.00)	(\$168.00)
2-8360	NON-CONTRACTED CONSULTANTS	\$2,306.96	\$2,197.42	\$232.42	\$109.54	\$2,074.54	\$11,025.20	\$9,518.51	\$1,519.61	\$1,506.69	\$9,505.59
Total Other Operating		\$988,464.66	\$1,007,207.42	\$1,184,530.83	(\$18,742.76)	(\$196,066.17)	\$7,948,333.07	\$8,120,510.36	\$8,804,459.91	(\$172,177.29)	(\$856,126.84)
Total Expense		\$3,026,523.63	\$3,210,929.21	\$3,285,971.53	(\$184,405.58)	(\$259,447.90)	\$25,315,547.68	\$25,955,784.11	\$26,112,133.22	(\$640,236.43)	(\$796,585.54)

	MAY 2026				YEAR TO DATE					
	MAY FY26	MAY FY26	MAY FY25	Variance	Variance	FY2026 Y-T-D	FY2025 Y-T-D	FY2025 Y-T-D	Variance	Variance
	Actual	Budget	Actual	Budget	FY 2025	Actual	Budget	Actual	Y-T-D Budget	Y-T-D FY 2025
BEGINNING NET ASSETS	\$14,710,685.55	\$14,710,685.55	\$14,146,124.40	\$0.00	\$564,561.15	\$13,515,817.20	\$13,515,817.20	\$13,351,495.33	\$0.00	\$164,321.87
NET SURPLUS/(DEFICIT)	(\$125,237.38)	(\$109,978.27)	(\$243,967.86)	(\$15,259.11)	\$118,730.48	\$1,069,630.97	\$920,520.30	\$550,661.21	\$149,110.67	\$518,969.76
ENDING NET ASSETS	\$14,585,448.17	\$14,600,707.28	\$13,902,156.54	(\$15,259.11)	\$683,291.63	\$14,585,448.17	\$14,436,337.50	\$13,902,156.54	\$149,110.67	\$683,291.63

5 RECOMMENDATIONS
B. BUDGET AND FINANCE
2) STATUS OF INVESTMENTS

RECOMMENDED ACTION: That the Board of Trustees review and approve the status of investments.

BACKGROUND INFORMATION: Board of Trustee policy and State Law require the quarterly presentation and approval of the status of Helen Farabee Center's investments.

SUPPORTING INFORMATION:

- A. The main purpose of this quarterly management report is to give the Board both detail and summary information on the portfolio in accordance with the Act. Any investments in a new instrument or institution that did not have prior Board of Trustees approval are presented to the Board of Trustees at its next meeting in accordance with the Investment Policy and Procedure. The portfolio must maintain a maximum Weighted Average Maturity no longer than one (1) year as established by the Board Policy, and no investment may exceed two (2) years. The report gives the Board the detail on each position and shows the diversification in the portfolio.
- B. The Center's overall yield had a decrease from 2.7587% in February to 2.6773 % in May.
- C. The Center had 7 Certificate of Deposits (CD) matured and purchased 8 others:
- **Merrill Lynch:**
In March, a Wells Fargo Bank CD matured on March 5, 2026, earning 4.25% on \$239,000; a Bank of American CD matured on March 6, 2026, earning 4.25 on \$239,000 and a City National Bank CD matured on March 6, 2026, earning 4.25% on \$13,000. In March, a Wells Fargo Bank CD was purchased on March 6, 2026, for \$27,000 earning 3.75%; another Wells Fargo Bank CD was purchased on March 11, 2026, for \$32,000 earning 3.75%; a Bank of America CD was purchased on March 10, 2026, for \$240,000 earning 3.75%; and a Huntington National Bank CD was purchased on March 11, 2026, for \$240,000 earning 3.75%. In April, a PNC Bank CD matured on April 2, 2026, earning 4.00% on \$168,000; a Popular Bank CD matured on April 16, 2026, earning 3.75% on \$165,000, and an Ally Bank CD matured on April 17, 2026, earning 3.75% on \$240,000. In April, an Ally Bank CD was purchased on April 23, 2026, for \$240,000 earning 3.85%, a BMO Bank CD was purchased on April 24, 2026, for \$80,000 earning 3.85%, a Morgan Stanley PVT Bank CD was purchased on April 7, 2026 for \$180,000 earning 4.00% and a Morgan Stanley BK CD was purchased on April 17, 2026 for \$110,000 earning 3.95%. In May, a Stearns Bank CD matured on May 21, 2026, earning 3.75% on \$245,000. This was put into Deposits for a June Purchase.

- 5 RECOMMENDATIONS
- B. BUDGET AND FINANCE
- 2) STATUS OF INVESTMENTS

- First National Bank

In March, a Certificate of Deposit #0932 matured on March 12, 2026, earning 4.18% for \$323,980.60. The Center automatically renewed this CD for a 12-month term earning 3.50%.

D. The weighted average maturity (WAM) is the dollar weight of the portfolio which is a measure of risk. The WAM is 365 days. This is intended to prevent investment officers from making investments for a longer term than specified by the Policy.

- As of February 2026, the Center is within 365 days.
- The Center had \$10,009,665 invested with a 0 to 180-day maturity and \$2,923,270 invested with a 6 month to 2-year maturity.

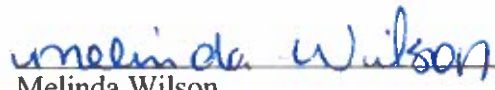
E. The Investment Value chart shows our total portfolio's book value over time rather than just a snapshot of each quarter. The Center's total investment at the end of August 2025 was \$12,672,930, at the end of November was \$12,766,366, and at the end of February was \$12,852,761. The Center's total investment as of May 2026 is \$12,932,935.

Certificate:

We certify the attached reports accurately reflect the status of all Helen Farabee Centers' investments as of May 2026. This report was prepared in compliance with the Public Funds Investment Act and our policy.



 Linda S Poenitzsch
 Investment Officer/Business Manager
 June 15, 2026



 Melinda Wilson
 Assistant Investment Officer/Budget Analyst I
 June 15, 2026

5 RECOMMENDATIONS

D. FACILITIES AND EQUIPMENT

1) PLUMBING REPAIRS AT 516 DENVER ST.

RECOMMENDED ACTION: That the Board of Trustees approve the expenditure of \$14,000.00 for sewer repairs at 516 Denver St.

BACKGROUND INFORMATION:

- A. The sewer line has clogged numerous times in the past 3 months.

- B. A camera was put through the line, revealing a break in the cast iron pipes that will require replacement.

- C. The following companies were contacted for bids.
 - 1. James Lane Plumbing - \$19,167.85
 - 2. TP Plumbing \$14,000.00
 - 3. Ferguson-Veresh \$ 5,488.28

- D. The center has chosen - TP Plumbing for multiple reasons.
 - 1. The lowest bid does not include the concrete, floor restoration or wall restoration which would bring it closer to the TP Plumbing bid.
 - 2. TP plumbing proposal is to tunnel from outside, thus not destroying the floors, and more importantly, not disrupting services.

SUPPORTING INFORMATION:

- A. Center policy requires Board of Trustee approval for any expenditure over \$10,000.

- B. There have been no major plumbing repairs needed at this location in at least the past 10 years.



Service Estimate

Company

James Lane
5024 Jacksboro Hwy
Wichita Falls, TX 76302
Ph: Fax:

Proposal Date: 5/11/2026

Proposal Number: P47434

Agreement Number:

Contractor License: Regulated by: Texas State Board of
Plumbing Examiners 929 E. St. Austin TX. 78765
800.845.6584 & Texas Dept. of Licensing and Registration
P.O. Box 12157, Austin TX 78711, 800.803.9202, Bradford
Cooper RMP TACLA 123813C | M 16324 | SCRG 3413473
| ACR 2851962 | ECR 2876161 | OK 211125/151952 | AC
1785

Bill To Identity

HELEN FARABEE
516 Denver Street
Wichita Falls, TX 76301

Agreement Location

HELEN FARABEE
516 Denver Street
Wichita Falls, TX 76301

James Lane, a Fidelity Building Services Group Company, is pleased to submit our proposal to replace sewer line

OUR PROPOSED SCOPE OF WORK INCLUDES:

Set up dust containment in hall way and office to north of hallway south side of building
Tommy Duke- saw cut, bust up, haul off concrete.
Dig up and expose sewer from hall way to outside wall of office.
Cut and remove old pipe.
Dig ditch down and place screenings in ditch for bedding.
Core drill footing for sewer line exit.
Use incline vac to dig ditch in between outside wall and condenser units.
Extend ditch beyond fence and install 2 way clean out.
Connect pipe to existing pipe with code approved adapters.
City inspection.
Backfill outside ditch with new fill dirt.
Backfill inside ditch using dirt that was pulled out from excavation.
Tommy Duke. Pour back concrete.

EXCLUSIONS:

- Any repairs outside the above scope of work
- Overtime/night work
- Expedited shipping unless noted in the above scope of work
- Wall and dry wall repair
- Landscaping
- Deep Cleaning of office and hallway
- Deteriorated existing pipe at connection with new sewer

070



- Replacement of flooring.

YOUR INVESTMENT FOR THIS SCOPE OF WORK\$19,167.85

This proposal is valid for a period of fifteen (15) days, and if not accepted within that time frame, it shall be automatically rescinded, and any replacement proposal may be subject to increased costs. Upon execution as provided below, this agreement shall become a binding and enforceable agreement against both parties hereto. Customer, by execution of this Agreement, acknowledges that they have authority to enter into this Agreement.

Service Contractor

Customer

 Signature (Authorized Representative)
 Kim Wiseman

 Name (Print/ Type)

 Phone
 5/11/2026 P47434

 Date Proposal #

 Signature (Authorized Representative)

 Name (Print/ Type)

 Title

 Date PO#



Terms and Conditions

Throughout this Agreement:

HELEN FARABEE shall be known as the Customer.

James Lane shall be known as the Service Contractor.

These terms and conditions of the Agreement (the "Agreement") and all of the sections included, are integral parts of and form the Agreement between the Service Contractor and the Customer. In the event the Customer seeks to have the Service Contractor enter into a separate written contract for the scope of work of this Agreement, then: (1) the separate written contract must be acceptable to the Contractor; (2) the entire Agreement shall be attached to and incorporated by reference in such separate written contract; (3) to the extent that there is a conflict between the terms and conditions of the Agreement and the terms and conditions of the separate written contract, the terms and conditions of this Agreement shall control; and (4) if the Contractor and the Customer are unable to agree upon a mutually acceptable separate written contract, the Contractor shall have the right to rescind the quote included with this Agreement without liability to the Contractor.

The Service Contractor will perform the work enumerated in the Agreement (the "Work") in accordance with the terms and conditions of the Agreement.

This Agreement shall not include maintenance, repairs, service or replacements necessitated by any loss or damage resulting from any cause beyond the control of the Service Contractor, including but not limited to damage or loss due to lack of water, freezing, loss or insufficient electric power or fuel source, hail, flood, windstorm, excessive rain, snow, freezing weather, lightning, earthquake, theft, fire, riots of any origin, strikes, wars, misuse, negligence by person(s) other than those representing the Service Contractor, vandalism, acts of government, building code requirements, insurance company requirements, unauthorized adjustments or repairs, or any other peril or act of God. The cost of all repairs, modifications, or alterations necessitated by the above shall be the responsibility of the Customer and payable to the Service Contractor at Service Contractor's current service rates in addition to vehicle and other related service charges.

All reasonable efforts shall be extended in performing the Work as requested by the Customer, but the Service Contractor shall not be liable for any losses or consequential damage that arise out of delays, misuse by the Customer, or the Customer's agents or employees. The Customer agrees to pay the Service Contractor as set forth in the Agreement. The terms of payment for all other invoices submitted by the Service Contractor are net thirty (30) days from the Customer's receipt of such invoice. The Customer's obligation to pay the Contractor shall not be contingent upon or delayed by prior payment of a third-party, including but not limited to any insurance companies or the Customer's client. In the event that the Customer objects to the charges in any invoice, the Customer shall notify the Contractor in writing the basis for such objection within fifteen (15) days of its receipt of such invoice, and if the Customer fails to provide written notice within such timeframe, the Customer's objection shall be deemed waived, and the invoice shall be deemed due and payable for the amount of such invoice. Unless the Agreement specifically states otherwise, the prices in this Agreement do not include sales tax, and to the extent sales tax is applicable to any services, materials and/or equipment, such sales tax will be listed separately on the Service Contractor's invoices, and the Customer agrees to pay for all applicable sales taxes. The prices in this Agreement do not include any costs associated with using any invoicing software, portals or services required by the Customer or of any requirement by the Customer for the Service Contractor to procure additional insurance or higher limits of insurance than are typically carried by the Service Contractor, and to the extent there are any costs incurred by the Service Contractor to comply with such requirements, the Customer agrees to reimburse the Service Contractor for such costs. The Customer will be responsible for any price increases that the Service Contractor incurs as a result of any tariffs imposed on the equipment and materials reflected in its scope of work, including any tariffs on any component parts of the equipment and materials. In the event the Service Contractor incurs any such tariff-related price increase, the Customer will issue a change order to the Service Contractor to adjust the contract price to reflect the tariff-related price increase. The Service Contractor, as a convenience to the Customer, accepts payments via most major credit cards. In the event the Customer wishes to pay Service Contractor by credit card, Customer agrees to reimburse the Service Contractor a surcharge of 4% of the amount of the invoice being charged (or to the extent permissible by law) if the Customer uses any major credit card, and the Customer authorizes Service Contractor to add the applicable surcharge to the credit card transaction.



The Customer further agrees to pay finance charges of 1½ % per month for invoices not paid within 30 days of the invoice date. In the event that the Customer fails to pay the Service Contractor in accordance with the agreed payment terms: (1) the Service Contractor may, at its sole discretion, stop all work under this Agreement and any other Agreement between the Service Contractor and the Customer until such time as the Customer's account is brought current; and (2) the Customer agrees to reimburse the Service Contractor for any and all costs of collection of the outstanding balance, including but not limited to the Service Contractor's attorneys' fees, expert fees, court costs and any other legal expenses that the Service Contractor incurs, even if the costs of collection exceed the outstanding balance. The Service Contractor and the Customer agree that in the event a dispute arises with respect to this Agreement, such dispute shall be resolved in a court of competent jurisdiction in the county in which Service Contractor's home office is located and this Agreement shall be governed and interpreted by the laws of the state in which Service Contractor's home office is located, exclusive of its conflict of laws principles. THE SERVICE CONTRACTOR AND THE CUSTOMER EXPRESSLY CONSENT TO THE PERSONAL JURISDICTION OF THE AFORMENTIONED STATE, AGREE TO THE AFOREMENTIONED COUNTY AS THE APPROPRIATE VENUE FOR DISPUTES, AND IRREVOCABLY WAIVE TRIAL BY JURY IN ANY ACTION, PROCEEDING, OR COUNTERCLAIM, WHETHER AT LAW OR IN EQUITY, BROUGHT BY EITHER PARTY IN CONNECTION WITH THIS AGREEMENT.

The Service Contractor's liability hereunder shall not exceed the price of the Work as set forth in this Agreement. In no event shall the Service Contractor be liable for consequential damages or losses, including but not limited to loss of profits, loss of the use of any associated or supported equipment, high or unusual utility cost, investment cost of substitute facilities, or rental of equipment. Unless a different warranty period is referenced elsewhere in the Agreement, the Service Contractor agrees to either repair or replace any defects in the Work that arises within thirty (30) days of Service Contractor's substantial completion of the Work. The determination as to whether such work is to be repaired or replaced is within the sole discretion of the Service Contractor. Any warranty of the materials, parts and equipment installed by Service Contractor shall be subject to the manufacturers' standard warranty terms, if any, and Customer's exclusive remedy with respect to any claims of defects in such materials, parts or equipment shall be governed by the manufacturers' standard warranty. To the fullest extent permitted by law, the Customer shall defend, indemnify and hold harmless the Service Contractor, its agent and employees from and against all claims, damages, losses and expenses (including but not limited to attorneys' fees) arising out of or resulting from the performance of Work hereunder, provided that such claim, damage, loss or expense is caused in whole or in part by an active or passive act or omission of the Customer, anyone directly or indirectly employed by the Customer, or anyone for whose acts the Customer may be liable, regardless of whether it is caused in part by the negligence of the Service Contractor. Further and notwithstanding the preceding sentence, the Service Contractor shall be held harmless by the Customer and shall not be liable to the Customer for any claims, liabilities, damages, losses and expenses related to mold or the creation of mold at the Customer's location(s) and shall have no obligation to treat, identify or remove such mold.

The Customer agrees to not solicit or hire employees of Service Contractor and/or the Service Contractor's subcontractors for itself and/or for any corporation, which Customer now represents or with which Customer now or may later be affiliated during the term of this Agreement and for a period of one year after the termination of the Agreement.

PANDEMIC AND EPIDEMIC PRECAUTIONS

The Customer and the Service Contractor acknowledge that pandemics and/or epidemics may severely impact the location where the services will be performed. As a result, in the event of a pandemic and/or epidemic, Federal, State and Local guidelines and requirements may be imposed and modified, which may impact the timing and cost of the services under the Agreement.

The Customer and the Service Contractor agree that: (1) the Customer and the Service Contractor will both use commercially reasonable efforts with respect to the services under the Agreement; (2) the Customer and the Service Contractor and their respective employees, agents and representatives will comply with applicable Federal, State and Local government quarantines, shelter-in-place orders, regulations, executive orders and/or directives, including but not limited to any recommendations or requirements of the Centers for Disease Control, U.S. Department of Labor, U.S. Department of Health and Human Services, and/or any comparable State or Local agencies (collectively, "Pandemic/Epidemic Requirements"); (3) the Customer and the Service Contractor will both use commercially reasonable efforts to keep each other informed of pertinent updates or developments regarding their obligations to comply with Pandemic/Epidemic Requirements; and (4) if the Service Contractor's performance of the services under the Agreement is delayed, suspended and/or effected by Pandemic/Epidemic Requirements and/or by their direct or indirect impacts, the Service



Contractor shall be entitled to adjustments to the schedule and/or the prices under the Agreement, provided the Service Contractor notifies the Customer within a reasonable period of time after the Service Contractor learns of the delay, suspension and/or effect.

Proposal and Acceptance
 703 E. Scott Wichita Falls, TX 76301
 Ph. 940-692-4600 Fax 940-692-1774



HVAC # TACLA116953C
 PLUMBING # M-42923
 TEXAS SCR-G 2856281
 TEXAS ENGINEERING FIRM F-12872

Proposal Submitted to:	Date
Helen Farabee	5/26/26
Street	Job Name
516 Denver St	
City, State, and Zip Code	Job Location
Wichita Falls, TX, 76301	
Attention	Phone

We hereby submit specifications and estimates for:

- Bust floor in hallway area to gain access to broken pipe.
- Repair broken pipe
- Install accessible cleanout for future drain cleaning and or camera use.

Exclusions:

- If cast iron can not be tied back onto due to condition of pipe a new quote will be made for replacement.
- Dry wall/concrete repair.

Price installed is \$5,488.28

We Propose hereby to furnish material and labor - complete in accordance with above specifications, for the sum of: (see above)dollars

Payment to be made as follows: **Net 30**

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alterations or deviations from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays beyond our control. Owner to carry fire, tornado, and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance. Public Liability Insurance on above work to be taken out by Higginbotham.

Authorized Signature _____

Note: This proposal may be withdrawn by us if not accepted with in 30 days.

Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Signature _____

Date of Acceptance _____

Signature _____

Regulated by the Texas State Board of Plumbing Examiners, PO Box 4200, Austin, TX 78765 (800)-845-6584

Regulated by the Texas Department of Licensing and Regulation, PO Box 12157 Austin, TX 78711, (800)-803-9202, (512)-463-6599 www.tdlr.texas.gov

ESTIMATE

TP Plumbing
PO Box 546
Holliday, TX 76366-0546

tpplumbing25@gmail.com
+1 (940) 851-9905



Bill to

Estimate details

Estimate no.: 1068
Estimate date: 05/14/2026

#	Product or service	Description	Qty	Rate	Amount
1.	Re-pipe by means of tunnel	<p>We will excavate and/or tunnel as necessary to access the existing sewer line serving the residence. All existing damaged, deteriorated, or non-code-compliant sewer piping (including but not limited to cast iron, clay, Orangeburg, or other obsolete materials) will be removed and replaced with new Schedule 40 PVC sewer piping and approved DWV fittings.</p> <p>The new sewer line will be properly graded to ensure correct flow and will be connected to the existing city sewer main or approved tie-in location. New cleanouts will be installed as required by current plumbing code to allow for proper access and maintenance.</p> <p>All sewer piping installed will be glued, bedded, and supported in accordance with current plumbing code and manufacturer specifications. Upon completion, the new sewer line will be tested to verify proper drainage and operation.</p> <p>Excavated or tunneled areas will be backfilled and compacted once work is completed. This scope does not include concrete replacement, flooring, landscaping, asphalt, or other cosmetic repairs unless specifically stated in writing.</p> <p>All work will be performed in accordance with applicable plumbing codes and local regulations. This scope includes labor and materials. Permit fees are included unless otherwise noted.</p>	1	\$14,000.00	\$14,000.00

5 RECOMMENDATIONS

E. POLICIES AND PROCEDURES

1) POLICY STATEMENT SUMMARY

RECOMMENDED ACTION: The Board of Trustees approves the attached Procedures and/or Policy Statements.

- 100.1.2 Board of Trustees Organizational Structure (Procedure), includes updated Organization Chart
6 and # 6.10 include the Veteran Board Member
8.32 now reads “Any Board of Trustee member who attends less than four of the six regularly scheduled Board of Trustee meetings shall be reported to the appropriate appointing agency for appropriate review and possible removal.”
9.3 now reads “At the May meeting the Board of Trustee Chair will appoint an ad hoc committee to recommend a slate of officers.”
9.4 indicates the last scheduled meeting of the fiscal year is in July
- 100.1.11 Board of Trustees Veteran Board Members (Procedure) – NEW
- 200.1.14 Tobacco Free Policy Statement – No changes
- 300.1 Financial Services Policy Statement – # 5 – Budget Analyst I
- 300.5 Lease Policy Statement – # 1.6 and # 2.4 indicate we are now contracted with Condley and Company LLP
- 500.1 Clients Rights Policy Statement – No changes
- 900.1.11 Jail Based Competency Restoration (JBCR) Policy Statement – Updated TAC code
- 900.12 Veterans Services – Policy Statement – No changes

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EFFECTIVE: 7/2/2026	ORIGINAL: 02/01/87
REVIEWED BY: Cara Mullenix	APPROVED BY: Gianna Harris
Cara Mullenix-Artigue Director of Utilization & Quality Management	Gianna Harris Executive Director
	CONCURRED: J. Brian Eby Chair, Board of Trustees

PROCEDURE:

1. According to the Texas Health and Safety Code, Title 7, Chapter 534, Subchapter A, Section 534.008 and Texas Administrative Code Title 25, Part 1, Chapter 411, Subchapter G, Rule §411.310 Helen Farabee Centers will have a governing body, Board of Trustees, that is legally responsible for the integrity of the fiscal and programmatic management of the organization.
 - 1.1 The Board of Trustees will be a distinct business entity with legal authority to operate in the state of Texas.
 - 1.2 Staff members, including the Executive Director, will not serve on the Board of Trustees.
2. The Board of Trustees will:
 - 2.1 Appoint an Executive Director to manage the day-to-day operations of the organization and ensure that the organization has the programmatic, managerial, and financial capability to ensure proper planning, management, and delivery of funded services.
 - 2.2 Establish codes of conduct for the governing body.
 - 2.3 Approve program descriptions and policies.

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- 2.4 Set up and maintain effective systems from planning, budgeting, and managing all resources.
- 2.5 Review and approve an annual budget.
- 2.6 Ensure compliance with all applicable laws, rules, and Texas Health and Human Services Commission (HHCS) requirements.
- 2.7 Ensure professional and ethical operations.
- 2.8 Ensure timely correction of identified organizational, fiscal, and program deficiencies.
- 2.9 Have meetings scheduled every other month, but under no circumstances will they meet less than once per quarter.
- 2.10 Maintain minutes that include:
 - 2.10.1 Date, time, place of the meeting,
 - 2.10.2 Names of members present and absent, and
 - 2.10.3 A summary of the discussion and action taken.
- 2.11 Allow the Chair the right to make motions and to speak in debate; but refrain from voting except when the vote is by ballot or whenever the vote will affect the results such as in the case of a tie; or to create a tie to cause the motion to fail.
- 2.12 Provide all members with information and training on the responsibilities and liabilities of the Board of Trustees and its individual members.
 - 2.12.1. Training includes incorporating the Planning and Network Advisory Committee (PNAC) input by addressing any/all concerns addressed by PNAC, which, at a minimum will include:
 - 2.12.1.1. Did PNAC see any unmet community needs?

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2.12.1.2. Did PNAC see any services that need to be developed?

2.12.1.3. Did PNAC determine any quality improvement issues need to be addressed?

2.12.1.4. Did PNAC determine any budget recommendations to be discussed by the Board of Trustees?

2.12.1.5. Did PNAC determine any leadership ideas need to be shared with the Board of Trustees (human resources activity, leadership recruitment, etc.)?

2.13 Ensure that all members are familiar with Helen Farabee Centers' target population and sensitive to the needs of the different cultures represented.

3. The Board of Trustees functions in a policy making accessing role.

3.1 Authority to establish policy rests with the full Board of Trustees unless otherwise delegated to the Executive Director.

3.1.1 Such delegations will be in writing and included in the Policy Manual.

3.2 All policy action taken by the full Board of Trustees will be in response to written proposals.

4. The Board of Trustees will function as a committee of the whole.

5. Per Interlocal Agreement, available in Public Folder/All Public Folders/Board of Trustees/Forms/Interlocal Agreement (Attachment A) the composition of the Board of Trustees shall consist of nine members appointed to their assigned places by the Commissioners' Courts and the City of Wichita Falls. The members shall serve two-year terms commencing September 1 and terminating August 31 or until a successor is appointed.

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6. Senate Bill (SB) 1580 mandates a compulsory structural change to the governing body of Helen Farabee Centers, requiring the addition of a veteran member selected by the Board of Trustees, changing the composition of the board to consist of ten members.
 - 6.1 Place 1 appointed by Archer, Clay, and Montague Counties.
 - 6.2 Place 2 appointed by Jack and Wise Counties.
 - 6.3 Place 3 appointed by Throckmorton and Young Counties.
 - 6.4 Place 4 appointed by Baylor, Haskell, and Knox Counties.
 - 6.5 Place 5 appointed by Cottle, Dickens, King, and Stonewall Counties.
 - 6.6 Place 6 appointed by Childress, Foard, Hardeman, and Wilbarger Counties.
 - 6.7 Place 7 appointed by Wichita County.
 - 6.8 Place 8 appointed by the City of Wichita Falls.
 - 6.9 Place 9 appointed by the City of Wichita Falls.
 - 6.10 Place 10 Veteran Board Member appointed by Helen Farabee Centers Board of Trustees.

6. According to the Health and Safety Code Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.004, appointments to the Board of Trustees shall:
 - 6.1 Attempt to reflect the ethnic and geographic diversity of the region served.
 - 6.2 Include one or more person otherwise qualified under this chapter who are consumers, or family members of consumers, of the types of services the center provides; and
 - 6.3 Be made in accordance with the eligibility criteria and membership procedures set forth in Attachment A To Interlocal Agreement Helen Farabee Regional MHMR Centers Eligibility Criteria and

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Membership Procedures, available in Public Folder/All Public Folders/Board of Trustees/Forms/Attachment A to Interlocal Agreement (Attachment B).

7. According to the Health and Safety Code Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.003, and Section 534.0065, to be considered to qualify and to remain as a member of the Board of Trustees the following eligibility criteria must be met:
 - 7.1 To be considered as a potential appointee, each individual must:
 - 7.1.1 Be a qualified voter whose primary residence is in the region served by that Place; and
 - 7.1.2 Meet eligibility qualifications prohibiting appointment if the individual or individual's spouse:
 - 7.1.2.1 Owns or controls, directly or indirectly, more than ten percent interest in a business entity or organization receiving funds from the Helen Farabee Centers by contract or other method; or
 - 7.1.2.2 Uses or receives a substantial amount of tangible goods or funds from the Helen Farabee Centers, other than compensation or reimbursement authorized by law for Board of Trustees membership, attendance, or expenses; or as a consumer or family member of a consumer receiving services from Helen Farabee Centers.
 - 7.2 To be qualified as a Trustee, each appointee shall:
 - 7.2.1 Complete an Application for Appointment, available in Public Folder/All Public Folders/Board of Trustees/Forms/Application for Appointment (Attachment C).
 - 7.2.2 Complete a Conflict-of-Interest Questionnaire, available in Public Folder/All Public Folders/Board of Trustees/Forms/Conflict of Interest Questionnaire (Attachment D).

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7.2.3 According to Health and Safety Code Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.006, attend appropriate pre-assumption of office training documented on the Required Pre-Service Board of Trustee Training, available in Public Folder/All Public Folders/Board of Trustees/Forms/Required Pre-Service Board of Trustee Training (Attachment E) that includes:

- 7.2.3.1 The roles and functions of the Board of Trustees.
- 7.2.3.2 Enabling legislation that created the community center.
- 7.2.3.3 Applicable state and federal laws, rules, standards, and regulations.
- 7.2.3.4 The importance of local planning and the role of the Board of Trustees, Planning and Network Advisory Committee, staff, and other local service organizations in developing the Local Plan.
- 7.2.3.5 Current philosophies and program principles upon which service delivery systems are founded.
- 7.2.3.6 Information about the service and support needs of people with mental illness and intellectual or developmental disability, and the condition or surroundings in which those services and supports may be delivered.
- 7.2.3.7 An overview of mental illness, intellectual and developmental disability, and related conditions.
- 7.2.3.8 An overview of the current state Mental Health and Intellectual and Developmental Disability service delivery system.

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- 7.2.3.9 Any Ethics Policies adopted.
 - 7.2.3.10 Budget for the current fiscal year.
 - 7.2.3.11 Results of the most recent formal audit.
 - 7.2.3.12 Our relationship with other human service organizations.
 - 7.2.3.13 Types of services we provide and the range of environment in which services are provided, to include services we operate and services we contract from other organizations.
 - 7.2.3.14 Persons eligible for our services.
 - 7.2.3.15 Overview of the local Mental Health and Intellectual and Developmental Disability service delivery system.
 - 7.2.3.16 Orientation to the perspectives and issues of persons receiving services.
 - 7.2.3.17 The requirements of Government Code, Title 5 Open Government, Ethics, Subtitle an Open Government, Chapter 551 Open Meetings, and Chapter 552 Public Information: and
 - 7.2.3.18 The requirements of conflict-of-interest laws and other laws relating to public officials.
- 7.2.4 Execute Form A Affidavit of Board Member for the Texas Health and Human Services (Attachment F), available on-line at <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/behavioral-health-provider/community-mh-contracts/form-a.docx> acknowledging the reading according to the Health and Safety Code Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.0065 of the requirements for qualification, conflict of interest and removal.

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- 7.2.5 Complete a Statement of Appointed Officer, available in Public Folder/All Public Folders/Board of Trustees/Forms/Statement of Appointed Officer (Attachment H) and the Oath of Office, available in Public Folder/All Public Folders/Board of Trustees/Forms/Oath of Office (Attachment I) pursuant to the requirements of the Texas Secretary of State per The Texas Constitution, Article 16 – General Provisions, Section 1 – Official Oath; and
- 7.2.6 Complete the Confidentiality Statement, available in Public Folder/All Public Folders/Board of Trustees/Forms/Confidentiality Statement (Attachment J).
- 7.2.7 All completed documentation is filed in the Board of Trustees' folder in Administrative File Cabinet # 1 Board of Trustee in the Board of Trustee Liaison's office.
- 7.3 To remain in office, each Trustee must:
 - 7.3.1 Comply with the Health and Safety Code Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.006 concerning an annual training program for members of the Board of Trustees administered by the professional staff, including the legal counsel.
 - 7.3.2 Annually execute Form A Affidavit of Board Member for the Texas Health and Human Services at <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/behavioral-health-provider/community-mh-contracts/form-a.docx> acknowledging the reading according to the Health and Safety Code Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.0065 of the requirements for qualification, conflict of interest and removal.
 - 7.3.3 Complete an Annual Conflict of Interest Questionnaire, available in Public Folder/All Public Folders/Board of Trustees/Forms/Annual Conflict of Interest Questionnaire (Attachment K) in accordance with the Health and Safety Code Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.0065.

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7.3.4 Complete annually the Confidentiality Statement, available in Public Folder/All Public Folders/Board of Trustees/Forms/Confidentiality Statement (Attachment J).

7.3.5 To remain in office, each Trustee must not:

7.3.5.1 Refer for services a consumer to a business entity owned or controlled by a Board of Trustee, unless the entity is the only entity that provides the needed services within the jurisdiction of Helen Farabee Centers.

7.3.5.2 Use a Helen Farabee Centers' facility in the conduct of a business entity owned or controlled by that Board of Trustee.

7.3.5.3 Solicit, accept, or agree to accept a benefit in exchange for the Board of Trustee's decision, opinion, recommendation, vote, or other exercise of discretion as a local public official or for a violation of a duty imposed by law.

7.3.5.4 Receive any benefit for the referral of a consumer to Helen Farabee Centers or other business entity.

7.3.5.5 Appoint, vote for, or confirm the appointment to a paid office or a position with Helen Farabee Centers if the person is related to the Board of Trustee by affinity within the second degree or by consanguinity within the third degree; or violate other nepotism prohibitions in accordance with the Health and Safety Code, Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.0115; or

7.3.5.6 Solicit or receive a political contribution from a supplier to or contractor with Helen Farabee Centers.

8. Health and Safety Code Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.004 requires that certain procedures relating to Board of

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Trustee membership be prescribed by an organizational combination of local agencies that establish a community center, these are:

8.1 Appointment

8.1.1 At least 60 days prior to the termination of a place's two-year term, the Executive Director shall assist the appropriate appointing agency by notifying it of such termination.

8.1.2 The appointing agency may then choose to either reappoint the member currently serving in that place if they are still meeting criteria in 7.1, by acting in accordance with the Texas Open Meetings Act; or

8.1.3 Consider the place to be becoming vacant.

8.1.4 The appointing agency will also notify the other appointing agencies for that place and Helen Farabee Centers of such reappointment.

8.1.5 When a place on the Board of Trustees becomes vacant, through resignation, inability to serve or removal and/or non-reappointment, the Executive Director shall assist the appropriate appointing agency by:

8.1.5.1 Initiating a posting of the vacancy at the Helen Farabee Centers' offices in the applicable county(ies).

8.1.5.2 Initiating a posting of the vacancy at the county courthouse(s); and

8.1.5.3 Through placement for a minimum of five days in a publication of daily county wide circulation and a minimum, of two days in a publication of weekly county wide circulation.

8.1.6 All applicants responding to the posting will be given a "Board Member Packet" for review which includes:

8.1.6.1 Vision, Mission, and Values Statements, available in Public Folder/All Public

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- Folders/Board of Trustees/Forms/ Vision (Attachment L).
- 8.1.6.2 Center Facts and Board Facts, available in Public Folder/All Public Folders/Board of Trustees/Forms/ Center Facts (Attachment M).
- 8.1.6.3 Center Overview, available in Public Folder/All Public Folders/Board of Trustees/Forms/ Center Overview (Attachment N).
- 8.1.6.4 Map of Service Region, available in Public Folder/All Public Folders/Board of Trustees/Forms/ Service Region (Attachment O).
- 8.1.6.5 Table of Organization, available in Public Folder/All Public Folders/Organizational Structure/ (Attachment P); and
- 8.1.6.6 Will be asked to complete an Application for Appointment, available in Public Folder/All Public Folders/Board of Trustees/Forms/ Application for Appointment (Attachment C); and
- 8.1.6.7 Complete a Conflict-of-Interest Questionnaire, available in Public Folder/All Public Folders/Board of Trustees/Forms/ Conflict of Interest (Attachment D).
- 8.1.7 The Board of Trustee Chairperson will appoint a team of three Trustees who shall be responsible for screening for qualifications, interviewing applicants and making recommendations(s) to the appropriate appointing agency.
 - 8.1.7.1 All Applications will be forwarded to the appointing agency along with the Screening Team's recommendation(s).

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8.1.8 The appointing agency shall review the information and recommendations as part of its deliberations in making an appointment to fill the vacant place.

8.1.8.1 Such appointment shall be in accordance with the Government Code, Title 5 Open Government, Ethics, Subtitle an Open Government, Chapter 551 Open Meetings, and the requirements of Section 7.1 above.

8.1.8.2 The appointing agency will also notify the other appointing agencies for that place and Helen Farabee Centers of such appointment.

8.1.8.3 In cases where the appointing agencies do not agree on the appointment or are non-responsive to the appointment request, majority rules.

8.2 Resignation

8.2.1 A member may resign by submitting their written resignation to the Chairperson of the Board of Trustees and to the appropriate appointing agency.

8.2.2 A resignation shall be effective as of the date of submission.

8.3 Removal

8.3.1 All Board of Trustee members serve at the pleasure of the appointing agency and may be removed without cause by majority vote of that appointing agency.

8.3.2 Any Board of Trustee member who attends less than four of the six regularly scheduled Board of Trustee meetings shall be reported to the appropriate appointing agency for appropriate review and possible removal.

8.3.3 According to Attachment A To Interlocal Agreement Helen Farabee Centers Eligibility Criteria and Membership Procedures, available in Public Folder/All Public Folders/Board of Trustees/Forms/Attachment A to Interlocal

HELEN FARABEE CENTERS	
ADMINISTRATION PROCEDURE 100.1.2	
SECTION: BOARD OF TRUSTEES	
SUBJECT: ORGANIZATIONAL STRUCTURE	Page 13 of 14

Agreement (Attachment B) any Board of Trustee member who is absent from three consecutive regularly scheduled Board of Trustee meeting shall be reported by Helen Farabee Centers to the appropriate appointing agency for appropriate review and possible removal.

8.3.4 In accordance with the Health and Safety Code Title 7, Subtitle A, Chapter 534, Subchapter A, Section 534.0065, it shall be grounds for removal if a Board of Trustee member:

8.3.4.1 Did not meet eligibility criteria of 7.1 above, at appointment; or

8.3.4.2 Does not maintain during service on the Board of Trustees the eligibility criteria of 7.1 above.

9. Officers

9.1 The Officers of the Board of Trustee shall consist of a:

9.1.1 Chair – The Chair shall preside at all meetings and perform other duties as designated or delegated by the Board of Trustees.

9.1.2 Vice-Chair – The Vice-Chair shall preside at meetings in the absence of the Chair and perform other duties as designated or delegated by the Chair.

9.1.3 Secretary – The Secretary shall preside at meetings in the absence of the Chair and Vice-Chair and perform other duties as designated or delegated by the Chair.

9.2 Officers shall serve for a period of one year and may be re-elected for consecutive terms.

9.3 At the May meeting the Board of Trustee Chair will appoint an ad hoc committee to recommend a slate of officers.

9.3.1 In the event an ad hoc committee is not appointed, slate of officer recommendations can come from the floor at the last meeting of the fiscal year.

HELEN FARABEE CENTERS	
ADMINISTRATION PROCEDURE 100.1.2	
SECTION: BOARD OF TRUSTEES	
SUBJECT: ORGANIZATIONAL STRUCTURE	Page 14 of 14

- 9.4 The officers shall be elected by a majority of the votes cast at an election to be held at the last regular meeting of the fiscal year, usually in July, to allow the Board of Trustees to vote for the next fiscal year's officers prior to the September meeting.
- 9.5 Should an office become vacant during the year due to the resignation or removal of a member, an election will be held at the next scheduled meeting with nominations coming from the floor.
10. Ad hoc committees may be formed, as permitted, in response to specific problems or issues.

ATTACHMENT LETTER	FORM NAME	FORM NUMBER
A	Interlocal Agreement	Public Folder
B	Attachment A to Interlocal Agreement Helen Farabee Regional MHMR Centers Eligibility Criteria and Membership Procedures	Public Folder
C	Application for Appointment	Public Folder
D	Conflict of Interest Questionnaire	Public Folder
E	Required Pre-Service Board of Trustee Training	Public Folder
G	Form an Affidavit of Board Member	HHSC Website
H	Statement of Appointed Officer	Public Folder
I	Oath of Office	Public Folder
J	Confidentiality Statement	Public Folder
K	Annual Conflict of Interest Questionnaire	Public Folder
L	Vision, Mission, Values Statement	Public Folder
M	Center Facts and Board Facts	Public Folder
N	Center Overview	Public Folder
O	Service Region	Public Folder
P	Table of Organization	Public Folder

Signature: Cara Mullenix
Cara Mullenix (Jun 14, 2026 16:41:10 CDT)
 Email: mullenixc@helenfarabee.org

Signature: Gianna Harris
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 Email: harrisg@helenfarabee.org



100.1.2 Board of Trustees Organizational Structure

Final Audit Report

2026-06-15

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HELEN FARABEE CENTERS	
ADMINISTRATIVE SERVICES POLICY 100.1.11	
SECTION: BOARD OF TRUSTEES	
SUBJECT: VETERAN BOARD MEMBERS	Page 1 of 2
EFFECTIVE: 7/2/2026	ORIGINAL: 7/2/2026
REVIEWED BY: Cara Mullenix _____ Cara Mullenix-Artigue Director of Utilization & Quality Management	APPROVED BY: Gianna Harris _____ Gianna Harris Executive Director
	CONCURRED: _____ J. Brian Eby Chair, Board of Trustees

PROCEDURE:

1. APPOINTMENT CHARGE:

- 1.1 Senate Bill (SB) 1580 mandates a compulsory structural change to the governing bodies of all Local Mental Health Authorities (LMHAs), requiring the addition of a veteran member selected by the board. This legislation alters board composition, quorum calculations, and bylaw requirements for every LMHA in Texas, regardless of service area size.
- 1.2 The bill's purpose is to ensure veteran representation in decision-making and a vote in governance of activities.
- 1.3 Veteran Board Members are to advise, recommend, be involved in board deliberations and participate in other activities with the Board of Trustees and have dedicated voting rights.
- 1.4 Operate in accordance with procedures approved by the Board of Trustees.

2. APPOINTMENT PROCESS:

- 2.1 The Board of Trustees will appoint, charge, and support a veteran selected by a majority of the governing board members.

HELEN FARABEE CENTERS	
ADMINISTRATIVE SERVICES POLICY 100.1.11	
SECTION: BOARD OF TRUSTEES	
SUBJECT: VETERAN BOARD MEMBERS	Page 2 of 2

- 2.2 Individuals who have any current or potential fiduciary interest: or their contractors, which could create a conflict of interest or unfair advantage to providers bidding on services, will disclose the interest fully prior to the appointment to the board.
- 2.3 Appointments are for two-year terms. Appointees are eligible for reappointment if recommended by the Board of Trustees as defined above in 2.1.

3. TRAINING:

- 3.1 The veteran board member will receive initial and ongoing training and information at each scheduled board meeting.
- 3.2 The veteran board member will receive training and information as described in the Health and Safety Code, Title 7, Mental Health and Intellectual Disability, Subtitle A, Services for Persons with Mental Illness or an Intellectual Disability, Chapter 534, Community Services, Subchapter A, Community Centers.
- 3.3 Orientation to Board of Trustee policies and procedures relevant to the committee will be initially provided in a training session with the Executive Director.
- 3.4 Orientation to legal, legislative, and professional issues.

4. MISCELLANEOUS:

- 4.1 No expenses are expected to be associated with the veteran board membership. If Helen Farabee Centers requests a member travel, the expenses fall under Helen Farabee Centers' policy.
- 4.2 Helen Farabee Centers staff will provide secretarial, clerical, and technical support as needed.
- 4.3 Minutes of each meeting will be kept and presented to members for review.

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100.1.11 Board of Trustees Veteran Board Members

Final Audit Report

2026-06-08

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HELEN FARABEE CENTERS	
HUMAN RESOURCE MANAGEMENT 200.1.14	
SECTION: HUMAN RESOURCES	
SUBJECT: POLICY STATEMENT-TOBACCO FREE FACILITY	Page 1 of 2

EFFECTIVE: 7/2/2026	ORIGINAL: 10/01/15
APPROVED BY: Kelly Wooldridge <hr/> Kelly Wooldridge Human Resources Director/Risk Management	REVIEWED BY: Cara Mullenix <hr/> Cara Mullenix-Artigue Director of Utilization and Quality Management
CONCURRED: Gianna Harris <hr/> Gianna Harris Executive Director	APPROVED BY: <hr/> J. Brian Eby Chair, Board of Trustees

POLICY:

1. Helen Farabee Centers strives to offer a treatment environment, which promotes a clean and healthy working and living environment for the benefit of individuals served and our employees.
2. It is the policy of the Board of Trustees that within the mental health (MH) and intellectually and developmentally disabled (IDD) facilities of Helen Farabee Centers, Early Childhood Intervention, and Crisis Respite Units (CRU), the use of tobacco products will not be allowed on the property, grounds, parking lots or vehicles.
3. The Hospital Transition Step-down homes and the Crisis Respite Unit Assisted Living are allowed the use of tobacco products in designated, outside areas as these facilities are the homes of these residents and their right to smoke and/or use tobacco products will not be removed, but staff will educate and provide support to stop the use of tobacco products and promote wellness.
4. Helen Farabee Centers employees are held to the no tobacco use procedure when on Helen Farabee Centers property and/or work time.

HELEN FARABEE CENTERS	
HUMAN RESOURCE MANAGEMENT 200.1.14	
SECTION: HUMAN RESOURCES	
SUBJECT: POLICY STATEMENT-TOBACCO FREE FACILITY	Page 2 of 2

5. Contracted providers of the transition homes and the Crisis Respite Unit Assisted Living unit will be informed of the Tobacco Free Policy and encouraged to consider smoking and/or tobacco use cessation.

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200.1.14 Tobacco Free Policy Statement

Final Audit Report

2026-06-09

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HELEN FARABEE CENTERS	
FISCAL MANAGEMENT POLICY 300.1	
SECTION: Fiscal Management	
SUBJECT: POLICY STATEMENT	Page 1 of 5

EFFECTIVE: 7/2/2026	ORIGINAL: 03/01/87
APPROVED BY: Linda Poenitzsch <hr/> Linda Poenitzsch Chief Financial Officer	REVIEWED BY: Cara Mullenix <hr/> Cara Mullenix-Artigue Director of Utilization and Quality Management
CONCURRED: Gianna Harris <hr/> Gianna Harris Executive Director	APPROVED BY: <hr/> J. Brian Eby Chair, Board of Trustees

POLICY:

1. It is the policy of the Board Trustees to establish guidelines for developing financial goals and objectives, making financial decisions, budget, reporting the financial status of the Center, and managing the Center's funds.
2. The Board of Trustees shares this responsibility through delegation with the Center's Executive Director (ED) and Chief Financial Officer (CFO).
 - 2.1 The Center's CFO acts as the primary fiscal agent, implementing all financial policies and procedures.
3. The CFO, with oversight of the ED and Board of Trustees, is responsible for the coordination of the following: Annual budget presentation, management of investments, selection of the outside auditors, and approving revenue and expenditure objectives in accordance with the Board of Trustees approved long-term plans.
4. The CFO has the day-to-day operations responsibility for managing Center funds, ensuring the accuracy of the accounting records, internal controls, financial objectives and procedures, financial statement preparation, preparation of the Chart of Accounts, Cash Receipts input and bank reconciliation review and approval.

HELEN FARABEE CENTERS	
FISCAL MANAGEMENT POLICY 300.1	
SECTION: Fiscal Management	
SUBJECT: POLICY STATEMENT	Page 2 of 5

5. The Accountant I, Budget Analyst I, and Clerk III are directly supervised by the CFO and are responsible for the Reporting Formats, Accounts Payable Processing, Payroll input and Payroll processing, Cash Receipts input reconciliation, Journal Entries for General Ledger, Form 1099 reporting as well as Bank Reconciliations.

6. The CFO will be responsible for presenting to the Board of Trustees and other Board Committees an annual operating budget. The Board of Trustees shall review and approve the recommended fiscal year budget revenues, expenditures, and cash flow.
 - 6.1 The Center's budget will be prepared in accordance with guidelines furnished by Texas Health and Human Services Commission (HHSC).
 - 6.2 The budget will be developed based on the goals of the Center and approved by the Board of Trustees.
 - 6.3 Budget adjustments made during the year that do not impact total income nor expenses do not need further Board of Trustees approval.

7. The CFO shall prepare and present Monthly Financial Statements in a format approved by the Center's ED and Board of Trustees.
 - 7.1 The Center's financial statements shall be prepared on a modified accrual basis in accordance with the Government Accounting Standards Board (GASB).
 - 7.2 The presentation of the Financial Statements shall follow the recommendation of the Financial Accounting Standards (SFAS) No. 117, "Financial Statements of Not-For-Profit Organizations".

8. The Center will have an audit of its financial statements annually, within 2 months of the end of each the fiscal year.
 - 8.1 The audit shall be completed by a firm of Independent Certified Public Accountants.
 - 8.1.1 Per HHSC guidelines, the Center must RFP for audit firms every six years.
 - 8.1.2 The CFO will form an audit committee comprising of at least one Board of Trustees, one Planning and Network Advisory Committee Member, CFO, Accountant I, and Contracts Manager for the review and selection of the audit firm.

HELEN FARABEE CENTERS	
FISCAL MANAGEMENT POLICY 300.1	
SECTION: Fiscal Management	
SUBJECT: POLICY STATEMENT	Page 3 of 5

- 8.1.3 The Audit Committee shall recommend and submit approval of the audit firm selected to the Board of Trustees.
- 8.2 The CFO and Accountant I shall have direct responsibility in overseeing the implementation of the Annual Financial Audit but delegating as needed to various departments.
- 8.3 A representative of the audit firm shall be invited to attend the annual presentation to the Board of Trustees.
- 8.4 The Center is exempt from filing the Form 990 per IRS letter dated 01/15/2011.
- 8.5 The Agency is exempt from federal income taxes under Section 501 (c) (3) of the Internal Revenue Service's Code (IRS) as amended. Accordingly, no provisions for income taxes shall be reflected in the financial statements.
9. All checks will be signed by the Board of Trustees Chair via electronic signature.
10. Payroll is executed periodically.
- 10.1 Paychecks or direct deposits will be provided to each employee by the Payroll Accountant.
- 10.2 Monthly payroll expenses shall be verified by the accountant against payroll reports and direct deposit reports and reconciled with checking account reports.
- 10.3 The compensation of the ED shall be determined by the Board of Trustees.
- 10.4 The salaries of all other employees shall be determined by the ED.
- 10.4.1 Compensation ranges for all staff positions shall be approved by the ED.
- 10.4.2 No employee of the Center may be compensated outside of the approved range, without the approval of the ED.
11. Employees must abide by the Center's Travel and Expense procedure.

HELEN FARABEE CENTERS	
FISCAL MANAGEMENT POLICY 300.1	
SECTION: Fiscal Management	
SUBJECT: POLICY STATEMENT	Page 4 of 5

- 11.1 Travel and expense reports for mileage, meals, hotel, supplies, etc., will be maintained by each employee and then submitted to the supervisor for approval and payment by Accounts Payable as defined in Center procedures.
- 11.2 Reimbursements will be based on the travel rate established by the ED and CFO and approved by the Board of Trustees. Travel reimbursement shall not be above IRS or HHSC Guidelines.
 - 11.2.1 When costs exceed the amounts allowed but are paid due to market prices, expenses will be coded to unallowable expense.
- 12. The CFO shall maintain and oversee Bank and Investment accounts, ensuring adequate cash flow for the Center's day-to-day financial operations. Accounts may be changed as the Center's financial conditions and requirements change.
 - 12.1 The Center has three staff designated, as approved, by the Board of Trustees as signer on the bank accounts which does not include the ED.
 - 12.2 The ED can sign documents as needed to establish bank accounts and designated signers.
 - 12.3 Daily balances will be checked and reviewed by two staff members which does not include the CFO or Accountant I.
- 13. All checks, cash, money orders, and credit card deposits, are reviewed by the Clerk III and deposited in the appropriate Accounts. Monies shall be transferred from the checking account into the Money Market/High Yield Account and into investment accounts when necessary, per the Investment Policy. Checks are written weekly to meet obligations, or ongoing operational expenditures.
 - 13.1 Bank reconciliations shall be completed monthly by the Accountant I and approved by the CFO prior to closing the monthly books, exception is only made when closing early for the quarter and bank statement is not available. Only those bank statements received quarterly are reconciled quarterly.
 - 13.2 The Financial Statements shall be compiled by the Accountant I. The Statements shall then be reviewed by the CFO. All Accounts Receivable, Accounts Payable, Prepaid, Deferred accounts, Bank Statements, Credit Card Statements, and Investment Reports with

HELEN FARABEE CENTERS	
FISCAL MANAGEMENT POLICY 300.1	
SECTION: Fiscal Management	
SUBJECT: POLICY STATEMENT	Page 5 of 5

coordinating revenue and expense accounts will be reconciled every month by the Accountant I, and records will be kept in the accounting office.

- 14. A petty cash fund provides a systematic method for paying and recording out-of-pocket cash payments too small to be made by check or credit card.
 - 14.1 The Agency shall maintain a Two Hundred and fifty (\$250.00) petty cash fund that is replenished as needed.
 - 14.2 The Accountant I shall maintain control of, and responsibility for, payments disbursed from the Petty Cash fund; however, amounts should not exceed an amount determined by policy for each transaction.
- 15. Financial documents are retained for a period of time in keeping with State law and the recommendations of the IRS.
- 16. Accounting Software Systems should provide adequate internal controls and safeguards of the financial operations and resources of the Center. The system should adequately meet the needs of normal business operations, as well as, state and federal guidelines and requirements.

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300.1 Fiscal Management Policy Statement

Final Audit Report

2026-06-09

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HELEN FARABEE CENTERS	
FISCAL MANAGEMENT POLICY 300.5	
SECTION: LEASES	
SUBJECT: POLICY STATEMENT	Page 1 of 2

EFFECTIVE: 7/2/2026	ORIGINAL: 08/04/2022
APPROVED BY: Linda Poenitzsch <hr/> Linda Poenitzsch Chief Financial Officer	REVIEWED BY: Cara Mullenix <hr/> Cara Mullenix-Artigue Director of Utilization and Quality Management
CONCURRED: Gianna Harris <hr/> Gianna Harris Executive Director	APPROVED BY: <hr/> J. Brian Eby Chair, Board of Trustees

POLICY:

1. All leases over twelve (12) months must be reported on the balance sheet.
 - 1.1. Definition of a Lease: A lease is defined as a contract that conveys control of the right to use another entity's non-financial asset (the underlying asset) as specified in the contract for a time period in an exchange or exchange-like transaction.
 - 1.2. Per the new lease accounting standard issued by the Financial Accounting Standards Board (FASB), Accounting Standards Codification (ASC) 842 requires companies that report under US GAAP to record most of their leases on their balance sheet.
 - 1.3. Leases included would be:
 - 1.3.1. Property Leases
 - 1.3.2. Equipment Leases
 - 1.3.3. Vehicle Leases
 - 1.3.4. Reverse Property Leases
 - 1.4. Helen Farabee Centers has elected to not separate lease components from non-lease components. Therefore, it is required to account for the non-lease components together with the related lease components as a single lease component.

HELEN FARABEE CENTERS	
FISCAL MANAGEMENT POLICY 300.5	
SECTION: LEASES	
SUBJECT: POLICY STATEMENT	Page 2 of 2

- 1.5. Helen Farabee Centers will use the borrowing rate, which is defined on our line of credit contract with First National Bank.
- 1.6. Helen Farabee Centers has contracted with Condley and Company, LLP to track and monitor our leases. Condley and Company LLP will also provide needed reports and amortization schedules that will be needed for the balance sheet.
- 2. All Subscription-Based Information Technology Arrangements (SBITAs) over 12 months must be reported on the balance sheet.
 - 2.1. A SBITA is defined as contract that conveys control of the right of use of IT software (belonging to SBITA vendors) for a term and consideration as specified in the contract.
 - 2.2. GASB 96, covering Subscription-Based Information Technology Arrangements (SBITAs), was released by the Governmental Accounting Standards Board (GASB) in May 2020. It requires government entities to recognize a right-to-use subscription asset and corresponding subscription liability for such contracts with a specified term.
 - 2.3. Helen Farabee Centers will use the borrowing rate, which is defined on our line of credit contract with First National Bank.
 - 2.4. Helen Farabee Centers has contracted with Condley and Company, LLP to track and monitor our leases. Condley and Company LLP will also provide needed reports and amortization schedules that will be needed for the balance sheet.

Signature: Cara Mullenix
Cara Mullenix (Jun 15, 2026 11:35:45 CDT)
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Leases Policy Statement

Final Audit Report

2026-06-16

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HELEN FARABEE CENTERS	
COMMUNITY AND CONSUMER SUPPORT 500.1	
SECTION: CLIENT RIGHTS	
SUBJECT: POLICY STATEMENT	Page 1 of 2

EFFECTIVE: 7/2/2026	ORIGINAL: 08/06/15
REVIEWED BY: Connie Johnston	REVIEWED BY: Cara Mullenix
Connie Johnston Director of Community and Consumer Support	Cara Mullenix-Artigue Director of Utilization and Quality Management
CONCURRED: Gianna Harris	APPROVED BY:
Gianna Harris Executive Director	J. Brian Eby Chair, Board of Trustees

POLICY:

1. It is the policy of the Board of Trustees that:
 - 1.1 To ensure the development and implementation of organizational procedures that address the elements of patient's rights, also known as a client, person served, or individual served, in accordance with:
 - 1.1.1 Texas Administrative Code, Title 25, Part 1, Chapter 404-E Changed effective 6-4-2025 to Texas Administrative Code, Title 26 Chapter 320, Subchapter A (Rights of Individuals receiving mental health services from department facilities, community centers, and psychiatric hospitals)
 - 1.1.2 Texas Administrative Code, Title 25, Part 1, Chapter 414
 - 1.1.3 Texas Administrative Code, Title 40, Part 1, Chapter 4-C
 - 1.2 To ensure the development and implementation of organizational procedures that address the elements of abuse, neglect, and exploitation allegations, in accordance with:
 - 1.2.1 Texas Administrative Code, Title 25, Part 1, Chapter 414-L
 - 1.2.2 Texas Administrative Code, Title 40, Part 1, Chapter 4-L
 - 1.3 To ensure the development and implementation of complaint processes.

HELEN FARABEE CENTERS	
COMMUNITY AND CONSUMER SUPPORT 500.1	
SECTION: CLIENT RIGHTS	
SUBJECT: POLICY STATEMENT	Page 2 of 2

- 1.4 To ensure development and implementation of service and emotional support animal procedure.
- 1.5 To ensure that employees, in accordance with Section 504 of the Rehabilitation Act of 1973, will not discriminate based on disability and will afford an individual appropriate due process.
 - 1.5.1 Individuals will not be discriminated against based on race, Color, national origin, sex, age, religion, sexual orientation, gender identity, or disability in its programs, services, or activities.
 - 1.5.2 Individuals will be provided with appropriate auxiliary aids and service, including qualified interpreters for individuals with disabilities and information in alternate formats, free of charge and in a timely manner when such aids are necessary to ensure an equal opportunity to participate.
 - 1.5.3 Individuals will be provided with language assistance services, including translated documents and oral interpretation, free of charge and in a timely manner.
 - 1.5.4 Individuals will be provided with the contact's name and number of the individual responsible to ensure such rights are afforded to them as well as how to file a grievance if needed.

Signature: Cara Mullenix
Cara Mullenix (Jun 10, 2026 10:28:21 CDT)
Email: mullenixc@helenfarabee.org

Signature: Connie Johnston
Connie Johnston (Jun 15, 2026 09:42:44 CDT)
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Signature: Gianna Harris
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500.1 Clients Rights Policy Statement

Final Audit Report

2026-06-15

Created:	2026-06-10
By:	Cara Mullenix (mullenixc@helenfarabee.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAMTOMhZ-wVhdIJh0jrWgwVIQsD7vsb6

"500.1 Clients Rights Policy Statement" History

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HELEN FARABEE CENTERS	
PROGRAMS AND SERVICES POLICY 900.1.11	
SECTION: Jail Based Competency Restoration	
SUBJECT: POLICY STATEMENT	Page 1 of 2

EFFECTIVE: 7/2/26	ORIGINAL: 08/07/25
APPROVED BY: Kyle Gullette	REVIEWED BY: Cara Mullenix
Kyle Gullette Director of Crisis and Continuity of Care	Cara Mullenix Director of Utilization and Quality Management
APPROVED BY: Andrew Martin	APPROVED BY: Carol Nati MD, MS
Andrew Martin Associate Executive Director of Operations	Carol Nati, M.D. Chief Medical Officer
CONCURRED: Gianna Harris	APPROVED BY: J. Brian Eby
Gianna Harris Executive Director	Chair, Board of Trustees

POLICY:

1. It is the policy of the Board of Trustees:
 - 1.1. Helen Farabee Centers (HFC) will provide Jail Based Competency Restoration (JBCR) services within the Wichita County Jail to inmates who:
 - 1.1.1. Are found Incompetent to Stand Trial (IST) pursuant to the Texas Code of Criminal Procedure (CCP) Chapter 46B, and
 - 1.1.2. Are determined to be appropriate for participation in the JBCR program.
 - 1.2. Goals of this program are:
 - 1.2.1. To reduce the demand for forensic state hospital beds within the local area and to maximize access to HFC services,

HELEN FARABEE CENTERS	
PROGRAMS AND SERVICES POLICY 900.1.11	
SECTION: Jail Based Competency Restoration	
SUBJECT: POLICY STATEMENT	Page 2 of 2

1.2.2. Provide participants with prompt access to appropriate treatment and competency restoration services, and

1.2.3 Avoid the stress associated with lengthy wait times for state hospital admission.

1.3. HFC staff will follow Texas Administrative Code (TAC, Chapter 307, Subchapter C) guidelines and the Code of Criminal Procedure (CCP, Chapter 46B) with court ordered medications for inmates, as indicated.

1.4. The JBCR program will also complete continuity of care activities to ensure access to appropriate care for inmates transferring to or from state mental health facilities, returning to treatment with the jail mental health provider (CorrHealth), or returning to the community.

Signature: *Cara Mullenix*
Cara Mullenix (Jun 10, 2026 10 29 00 CDT)
Email: mullenixc@helenfarabee.org

Signature: *Kyle Gullette*
Kyle Gullette (Jun 10, 2026 12 12 30 CDT)
Email: gullettek@helenfarabee.org

Signature: *Carol Nati MD, MS*
Carol Nati MD, MS (Jun 10, 2026 14 22 23 CDT)
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Signature: *Andrew Martin*
Andrew Martin (Jun 11, 2026 06 46 54 CDT)
Email: martina@helenfarabee.org

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Email: harrisg@helenfarabee.org

900.1.11 Jail Based Competency Restoration - Policy Statement


Final Audit Report


2026-06-11

Created:	2026-06-10
By:	Cara Mullenix (mullenixc@helenfarabee.org)
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-  Signer Carol Nati (natic@helenfarabee.org) entered name at signing as Carol Nati MD, MS
2026-06-10 - 7:22:21 PM GMT


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HELEN FARABEE CENTERS	
SERVICES AND PROGRAMS PROCEDURE 900.12	
SECTION: VETERAN SERVICES	
SUBJECT: POLICY STATEMENT	Page 1 of 2

EFFECTIVE: 7/2/2026	ORIGINAL: 09/01/16
APPROVED BY: Elliot Bonner <hr/> Elliot Bonner Certified Veterans Peer Coordinator	APPROVED BY: Andrew Martin <hr/> Andrew Martin Associate Executive Director of Operations
REVIEWED BY: Cara Mullenix <hr/> Cara Mullenix-Artigue Director of Utilization and Quality Management	CONCURRED: Gianna Harris <hr/> Gianna Harris Executive Director
	CONCURRED: <hr/> J. Bryan Eby Chairman, Board of Trustees

POLICY:

1. It is the policy of Board of Trustees that Helen Farabee Centers (HFC) participates actively in treatment and services to assist Service Members, Veterans, and Families (SMVF) to re-engage or engage with the community by fostering an integrated approach to well-being and establishing mutually supportive group activities to include peer groups for each diverse group of SMVF.
2. Services will be provided throughout HFC's nineteen (19) county catchment areas, including Archer, Baylor, Childress, Clay, Cottle, Dickens, Foard, Hardeman, Hasell, Jack, King, Knox, Montague, Stonewall, Throckmorton, Wichita, Wilbarger, Wise, and Young.
3. HFC offers an available Military Veteran Peer Network (MVPN) as a single

HELEN FARABEE CENTERS	
SERVICES AND PROGRAMS PROCEDURE 900.12	
SECTION: VETERAN SERVICES	
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point of contact for all mental health services and support for SMVF. The MVPN is a network of trained volunteers and staff who the SMVF can turn to for nonjudgmental peer support.

4. The coordination of care, as needed, is facilitated across our mental health services, substance abuse services, and or needed primary care screenings.

Signature: *Cara Mullenix*
Cara Mullenix (Jun 8, 2026 15:44:43 CDT)
Email: mullenixc@helenfarabee.org

Signature: *Elliot Bonner*
Elliot Bonner (Jun 8, 2026 15:46:08 CDT)
Email: bonnere@helenfarabee.org

Signature: *Andrew Martin*
Andrew Martin (Jun 8, 2026 09:01:37 CDT)
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Signature: *Gianna Harris*
Gianna Harris (Jun 8, 2026 16:06:39 CDT)
Email: harrisg@helenfarabee.org












900.12 Veterans Services Policy Statement

Final Audit Report

2026-06-09

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"900.12 Veterans Services Policy Statement" History

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Helen Farabee Centers

Essential Services and Clinical Accountability, Quarter 3 FY2026

Intellectual and Developmental Disability Services				
Item	Criteria	Definition	Target	Achieved
1.1	Service Targets (NEW) 88% to 77%	Quarterly IDD Community Service Target. <i>Note: HFC decided to limit services to required respite services only with the General Revenue (GR) program. This has reduced the number served. Similar issue statewide.</i>	≥77% per Q	107%
1.2	HCS Enrollments	Percent of all enrollments into HCS (Home and Community Services) that meet timelines in the LIDDA Handbook.	≥ 95% per Q	100%
1.3	TxHmL Enrollments	Percent of all enrollments into TxHmL (Texas Home Living Services) that meet timelines in the LIDDA Handbook.	≥ 95% per Q	100%
1.4	Permanency Plans	Percent of Permanency Plans completed within twenty (20) calendar days after the first business day a person's name first appears as never been done on a report HC021395. W Reviews Needed. See A-10: Permanency Planning Requirements LIDDA	≥ 95% per Q	100%
1.5	Permanency Plans	Percent of Permanency Plan reviews completed within six (6) months after the initial plan or previous review was completed. See A-10: Permanency Planning Requirements LIDDA	≥ 95% per Q	100%
1.6	PASRR Evaluations	PASSR Evaluations (PEs) or resident reviews completed and entered into the Long-Term Care Online portal (LTCOP) within seven (7) calendar days after receiving a copy of the PASRR Level 1 (PL1) screening from the referring entity or notification on the LTCOP portal.	≥ 95% per Q	100%
1.7	PASRR Habilitation Coordination (HC)	Percent of compliance with assigning a habilitation coordinator to an eligible individual within two (2) business days after the PE is entered in the LTCOP as described in section 4200 Assignment of Habilitation Coordinator of the IDD PASRR Handbook.	≥ 95% per Q	100%

Helen Farabee Centers

1.8	PASRR CLO	Percent of compliance with conducting Community Living Option (CLO) during the PE and at least every six (6) months thereafter as required by 26 Texas Administrative Code (TAC) §303.601(c)(1)(B)(i).	≥ 95% per Q	100%
1.9	SSLC Transitions	Percent compliance of SSLC Transition Reporting that meet timeline requirements specified for an individual who is on community placement status from an SSLC.	≥ 95% per Q	100%
1.10	SSLC Transition Monitoring - NEW ** to begin monitoring 1/1/2026	Percent compliance with conducting in-person SSLC transition monitoring visits at least once every thirty (30) days for the first year after transition as described in Section 9000 of the LIDDA Handbook	≥ 95% per Q	N/A - no cases Q3
1.11	Transition Support Team (TST) - NEW ** to begin monitoring 1/1/2026	Percent compliance with requesting a TST case consult prior to consideration for SSLC admission or readmission to an institution.	≥ 95% per Q	N/A
1.12	Transition Support Team (TST) - NEW ** to begin monitoring 1/1/2026	Percent compliance with requesting a TST case consult prior to seeking and HCS crisis diversion	≥ 95% per Q	N/A
1.13	Transition Support Team (TST) - NEW ** to begin monitoring 1/1/2026	Percent compliance with requesting a TST case consult prior to HCS enrollment for all individuals transitioning out of an SSLC.	≥ 95% per Q	N/A
1.14	Deliverables Upload SFTP Globalscape	Percent of compliance adhering to the deliverable dates described in section A-7, IDD Submission Calendar	≥ 95% per Q	100%
1.15	Statewide Interest Lists	Percent of HCS and TxHmL interest list population contacted for biennial review as described in Section 7500 of the LIDDA Handbook (Biennial Contact).	At least 50% by end of FY2026 100% by end of FY2027	45.22% *ahead on current goal
1.16	Community First Choice (CFC) assessments*	Percent of all CFC Intellectual Disability/Related Condition (ID/RC) assessments completed and submitted to the appropriate HHSC system within 90 calendar days of receiving a referral, or as otherwise agreed.	≥ 95% per Q	92%

Helen Farabee Centers

10% Risk Measures				
Item	Criteria	Definition	Target	Achieved
2.1	Adult Mental Health Improvement - Modified from 20% to 32.5%	At least 32.5% of adults authorized in a FLOC shall show improvement in at least one of the following ANSA domains/modules: Risk Behaviors, Behavioral Health Needs, Life Domain Functioning, Strengths, Adjustment to Trauma, Substance Use.	≥ 32.5% per FY 1/2	41%
2.2	Child and Youth Improvement - Modified from 25% to 42.8%	At least 42.8% of all children and youth authorized in a FLOC shall show improvement in at least one of the following CANS domains/modules: Child Risk Behaviors, Behavioral and Emotional Needs, Life Domain Functioning, Child Strengths, Adjustment to Trauma, Substance Use.	≥ 42.8% per FY 1/2	49.4%
2.3	School Performance - Modified from 60% to 65.2%	At least 65.2% of children authorized in a FLOC shall have acceptable or improved school performance.	≥ 65.2% per FY 1/2	70.5%
2.4	Community Tenure - Modified from 96.8% to 98.2%	At least 98.2% of individuals (adults and children) authorized in a FLOC shall avoid hospitalization in an HHSC Inpatient Bed throughout the measurement period.	≥ 98.2% per FY 1/2	99%
2.5	Effective Crisis Response - Modified from 75.1% to 78.6%	At least 78.6% of crisis episodes during the measurement period shall not be followed by admission to an HHSC Inpatient Bed within 30 days of the first day of the crisis episode.	≥ 78.6% per FY 1/2	84.39%
2.6	Hospital Follow-up within 7 Days - Modified from 62.3% to 57.4%	At least 57.4% of individuals discharged from a state hospital, an HHSC Contracted Bed, a CMHH, or a PPB shall receive contact within 0 - 7 days of discharge.	≥ 57.4% per FY 1/2	82.6%

Adult MH Services				
Item	Criteria	Definition	Target	Achieved
3.1	Adult Service Target	The average monthly number of adults authorized in a FLOC. (1st half of year 1.4% penalty)	100% of 2750 per FY 1/2	93%

Helen Farabee Centers

3.2	Adult Monthly Service Provision	An average of at least 49.6% of adults authorized in a FLOC shall receive at least one encounter each month. FLOCs included in this measure are LOC1S, LOC2, LOC3, LOC4, LOCTAY. LOC1M is excluded from this measure. Additionally, individuals who are both recommended and authorized for LOC1S are excluded from this measure. Encounters may be for any service and for any length of time.	≥ 49.6% Per FY 1/2	61.6%
3.3	Employment Functioning - Modified from 39.8% to 51.7%	At least 51.7% of adults authorized in a FLOC shall have acceptable or improved employment.	≥ 51.7% Per FY 1/2	91.3%
3.4	Education/ Volunteer Strengths - Modified from 26.5% to 28.4%	At least 28.4% of adults authorized in a FLOC shall have acceptable or improved employment–preparatory skills as evidenced by either the Educational or Volunteering Strengths item on the ANSA.	≥ 28.4% Per FY 1/2	26%
3.5	Residential Stability - Modified from 84% to 82.4%	At least 82.4% of adults authorized in a FLOC shall have acceptable or improved functioning on the ANSA residential stability item.	≥ 82.4% Per FY 1/2	91.5%
3.6	Depression Response at 6 months - Modified from 10.4% to 15.1%	At least 15.1% of adults authorized in a FLOC with a diagnosis of major depression and an initial QIDS score greater than or equal to 11 shall have a follow-up QIDS score at six months that is reduced by 50% or greater from the initial QIDS score and/or is less than or equal to 7.	≥ 15.1% Per FY 1/2	37.7%
3.7	High Need Adults Functioning NEW	At least 17.6% of adults authorized in a FLOC and recommended for LOC3 or LOC4 shall have acceptable or improved functioning in the Life Domain Functioning OR the Strengths domain of the ANSA. HHSC will not employ remedies or sanctions for failure to achieve this measure during FY2026.	≥ 17.6% Per FY 1/2	41%

Child and Youth Services

Item	Criteria	Definition	Target	Achieved
4.1	Child/Youth Service Target	The average monthly number of children/adolescents authorized in a FLOC. (1st half of year 1.4% penalty)	100% of 425 per FY 1/2	92%

Helen Farabee Centers

4.2	Child Monthly Service Provision	An average of at least 64.5% of children authorized in a FLOC or LOCYES shall receive at least one encounter each month. Encounters may be for any service and for any length of time.	≥ 64.5% per FY 1/2	82.7%
4.3	Family Partner Response	At least 56.2% of children authorized in a FLOC who receive any Family Partner Support Service, as defined in information Item C, shall have acceptable or improved functioning in one or more of the following CANS Caregivers Strengths & Needs domain items: Family Stress, Involvement, or Knowledge. HHSC will not employ remedies or sanctions for failure to achieve this measure during fiscal year 2026.	≥ 56.2%	50%
4.4	Family and Living Situation	At least 72.6% of children authorized in a FLOC shall have acceptable or improved functioning on the CANS Family and Living Situation.	≥ 72.6% Per FY 1/2	82.8%

Crisis Services

Item	Criteria	Definition	Target	Achieved
5.1	Access to Crisis Response Services	At least 69.9% of crisis hotline calls shall result in an encounter on the same day or within one day of a hotline call.	≥ 69.9% per FY 1/2	78.4%
5.4	Hospital 30-day Readmission	No more than 11.3% of those discharged from a state hospital, an HHSC Contracted Bed, a CMHH, or a PPB and reassigned to the LMHA/LBHA shall be readmitted to an HHSC Inpatient Bed within 30 days of discharge.	≤ 11.3%	4.35%

6. QUARTERLY REPORTS

B. PLANNING AND NETWORK ADVISORY COMMITTEE

1) 3RD QUARTER REPORT

RECOMMENDED ACTION: For information only.

BACKGROUND INFORMATION: Board policy requires the quarterly presentation on the activities of the Planning and Network Advisory Committee (PNAC)
3rd Quarter FY26 PNAC Meeting, May 18, 2026

LIDDA Report – Erin Perkins, Director of IDD Services

Billing:

This week I have been working with the business office to look into why so much of our PASRR billing is getting denied. I hope to continue to work with the business office more closely on billing to ensure billing is going on and also looking at any other opportunities there are to bill for Targeted Case Management that we are not already utilizing.

Refresher Trainings:

Despite us frequently having open positions we have had several staff stick it through with us for a while, which I am grateful for. So, while doing training for the newer staff we are opening these training opportunities to the more vetted employees as well so they can have some refresher training.

HHS Audit:

We will not have a state audit this year. Our next state audit will be sometime in or around May of 2027, they will look at a full year, while our previous audits due to the CAP period typically only looked at about a 6-month period. Our QM team has been a huge help in making sure we stay on top of things by completing routine chart reviews.

Currently Serving:

Program Label	Count
CFC	20
CFC/GR	27
ECC	7
GR	20
HCS	291
HCS-ECC	7
PASRR-ECC	8
PASRR-HC	60
PASRR-Refusal	22
Refusal-ECC	0
TxHmL	25
Total:	487

Open Positions & Coverage:

We currently have 2 Service Coordinator positions open, one in the WF area and one in the Graham area. We have hired 3 new Service Coordinators since January and they are all at different stages of training, which still leaves the trainers with some coverage. We recently had our Full-time WF PASRR Community support trainer leave and are looking to hire for that role as well.

- **IDD Service Coordinator-Graham & WF:** We have had a couple applicants so far, one for the WF position that we like and have put in a Wish to Hire for.
- **PASRR Community Support Trainer:** No applications yet.

2nd Quarter Financial Report Presented by Linda Poenitzsch for 3rd Quarter PNAC Meeting SUPPORTING INFORMATION:

Balance Sheet is based on February 2026

- ❖ Number of Days of Operation in Fund Balance 142 – two less days from last quarter.
- ❖ Account Receivables *increased* by \$114,437 going from \$1,588,886 to \$1,703,323.
- ❖ Account Payables *decreased* by \$281,952 going from \$1,997,252 to \$1,715,300. Most of this amount is due to the state giving us PPB money late last fiscal year, and the Center was unable to use it. We received word in early March 2025 that the money will have to be returned. The amount is \$937,600. The Center will receive an invoice by the state for recoupment. Until then, it will stay in our Accounts Payable amount. If not for that, Accounts Payable would have been \$777,700.
- ❖ **FINANCIAL STATUS:** The Center had a loss of \$369,515 for the second quarter and a cumulative loss of \$1,096,014 for the year.
- ❖ **REVENUE:** FY26 second quarter revenue (\$7,632,906) was \$82,237 less than budgeted (\$7,715,143).
 - **Patient fees** for the second quarter were \$46,055 more than budgeted. This is based on actual cash received and no accrual. Money reported would have been money received directly from a client, private insurance, and Managed Care Organizations.
 - **Miscellaneous** revenue for the second quarter was \$103,147 less than budgeted.
 - In-Kind Match was \$109,681 less than budgeted due to the actual usage of the psychiatric bed days at Red River and Wise. This is based on the PESC in-kind match for psychiatric bed days and is provided by Red River and Wise Health System. This is also based on the Justice Involved Grant, also known as Senate Bill 292 contract, that has increased the Center's Mental Health and Substance Abuse bed usage at Red River. And it is also based on the new program Private Psychiatric Beds match. This will eventually take over PESC as a revenue stream.
 - Opioid Grant revenue was \$8,994 more than budgeted. The Center received Opioid grant money from the City of Bowie in January.
 - **Other State Funding** for the second quarter was \$40,322 less than budgeted. This is all service driven so the expectation is that this will fluctuate.
 - SUD revenue was \$26,749 more than budgeted. This is based on actual fee-for-service billing in the last three months.
 - OSAR-SUD Revenue was \$16,701 less than budgeted. This program is run by a subcontractor, and we do not know how their expenses fall from month to month, so our revenue from the state contract will fluctuate based on their expenses.

- MJGJII NCA – JBCR revenue was \$151,732 less than budgeted. We are short 2 positions that we budgeted for in the JBCR budget. Plus there was less demand for the SB292 psychiatric beds.
 - ECI DARS revenue was \$95,078 more than budgeted. We had budgeted more locally collected funds that we have actually been able to obtain, thus forcing the Center to ask more from the state contract.
 - MHFA First Aid revenue was \$11,300 less than budgeted. This revenue is based off the classes that are taught, and this will fluctuate from year to year. Classes are taught when the institutions can do the training.
 - **Other Federal Funding** for the second quarter was \$28,392 more than budgeted.
 - This is all based on Medicaid received cash for services rendered along with some state contracts. No amount stands out from another.
 - **General Revenue** for the second quarter was \$70,566 less than budgeted.
 - PPB revenue was \$2,443 less than budgeted. PPB fluctuates based on client need for the psychiatric beds.
 - PESB revenue was \$68,123 less than budgeted. This fluctuates based on client need for the psychiatric beds.
 - **Allocated Federal Funds** for the second quarter were right on budget.
- ❖ **EXPENSES:** FY26 second quarter expense (\$8,002,420) was \$231,253 less than budgeted (\$8,233,673).
 - **Personnel** cost for the second quarter was \$26,689 more than budgeted.
 - Salaries were \$11,216 more than budgeted.
 - Benefits were \$15,473 more than budgeted.
 - **Contract** cost for the second quarter was \$167,113 less than budgeted.
 - PESB Bed Day Expense is \$42,528 less than budgeted. This fluctuates based on client need for the psychiatric beds.
 - Justice Involved Bed Days expense was \$92,778 less than budgeted. This also fluctuates based on client need for the psychiatric beds.
 - Software Web-Based was \$16,441 less than budgeted. We had to reclassify some expenses back to Telecommunications.
 - OSAR-Substance Abuse expense was \$13,816 less than budgeted. This program is run by a subcontractor. The Center does not know how their expenses fall from month to month, though we do try to be consistent with past years.
 - **Travel** costs for the second quarter were \$1,067 less than budgeted.
 - ❖ **Capital Outlay** for the second quarter was \$51 less than budgeted.
 - ❖ **Non-Capitalized Equipment** cost for the second quarter was \$2,010 more than budgeted.
 - ❖ **Pharmaceutical** costs for the second quarter were \$4,511 more than budgeted.
 - As of January 2021, Community Benefit and Uncompensated Care, part of the 1115 Waiver, expired. This means the Center now pays for all medical invoices from Clinical Pathology Laboratories and Integrated Prescription Management that were being paid by SONT, Service Organization of North Texas.

The Wood Group invoices will still be paid by SONT up to the time they no longer c:

or are willing to pay for them. Pharmaceutical costs will fluctuate with the need for medication by our clients.

- ❖ **Other Operating** cost for the second quarter was \$96,231 less than budgeted.
 - In-kind Expense was \$109,681 less than budgeted. This, again, is attributed to the contract with Red River and Wise Health System for the PESC contract, the PPB Beds general revenue contract, and the Justice Involved Bed Days contract (SB292). This is based on bed day usage and will fluctuate based on client need. No actual dollars are exchanged for this; and there is a corresponding revenue, so the net difference is zero.
 - Telecommunications expense was \$15,389 more than budgeted. We made a reclassifying journal entry from Software Web-Based expenses.

Intellectual and Developmental Disability Services				
Item	Criteria	Definition	Target	Achieved
1.1	Service Targets <i>(NEW) 88% to 77%</i>	Quarterly IDD Community Service Target. <i>Note: HFC decided to limit services to required respite services only with the General Revenue (GR) program. This has reduced the number served. Similar issue statewide.</i>	≥77% per Q	94%
1.2	HCS Enrollments	Percent of all enrollments into HCS (Home and Community Services) that meet timelines in the LIDDA Handbook.	≥ 95% per Q	100%
1.3	TxHmL Enrollments	Percent of all enrollments into TxHmL (Texas Home Living Services) that meet timelines in the LIDDA Handbook.	≥ 95% per Q	89%
1.4	Permanency Plans	Percent of Permanency Plans completed within twenty (20) calendar days after the first business day a person's name first appears as never been done on a report HC021395. W Reviews Needed. See A-10: Permanency Planning Requirements LIDDA	≥ 95% per Q	100%
1.5	Permanency Plans	Percent of Permanency Plan reviews completed within six (6) months after the initial plan or previous review was completed. See A-10: Permanency Planning Requirements LIDDA	≥ 95% per Q	86%

1.6	PASRR Evaluations	PASRR Evaluations (PEs) or resident reviews completed and entered into the Long-Term Care Online portal (LTCOP) within seven (7) calendar days after receiving a copy of the PASRR Level 1 (PL1) screening from the referring entity or notification on the LTCOP portal.	≥ 95% per Q	100%
1.7	PASRR Habilitation Coordination (HC)	Percent of compliance with assigning a habilitation coordinator to an eligible individual within two (2) business days after the PE is entered in the LTCOP as described in section 4200 Assignment of Habilitation Coordinator of the IDD PASRR Handbook.	≥ 95% per Q	100%

1.8	PASRR CLO	Percent of compliance with conducting Community Living Option (CLO) during the PE and at least every six (6) months thereafter as required by 26 Texas Administrative Code (TAC) §303.601(c)(1)(B)(i).	≥ 95% per Q	100%
1.9	SSLC Transitions	Percent compliance of SSLC Transition Reporting that meet timeline requirements specified for an individual who is on community placement status from an SSLC.	≥ 95% per Q	100%
1.10	SSLC Transition Monitoring - NEW ** to begin monitoring 1/1/2026	Percent compliance with conducting in-person SSLC transition monitoring visits at least once every thirty (30) days for the first year after transition as described in Section 9000 of the LIDDA Handbook	≥ 95% per Q	N/A - no cases Q2
1.11	Transition Support Team (TST) - New ** to begin monitoring 1/1/2026	Percent compliance with requesting a TST case consult prior to consideration for SSLC admission or readmission to an institution.	≥ 95% per Q	N/A
1.12	Transition Support Team (TST) - New ** to begin monitoring 1/1/2026	Percent compliance with requesting a TST case consult prior to seeking and HCS crisis diversion	≥ 95% per Q	N/A

1.13	Transition Support Team (TST) - New ** to begin monitoring 1/1/2026	Percent compliance with requesting a TST case consult prior to HCS enrollment for all individuals transitioning out of an SSLC.	≥ 95% per Q	N/A
1.14	Deliverables Upload SFTP Globalscape	Percent of compliance adhering to the deliverable dates described in section A-7, IDD Submission Calendar	≥ 95% per Q	100%
1.15	Statewide Interest Lists	Percent of HCS and TxHmL interest list population contacted for biennial review as described in Section 7500 of the LIDDA Handbook (Biennial Contact).	At least 50% by end of FY2026 100% by end of FY2027	29.57% *ahead on current goal
1.16	Community First Choice (CFC) assessments*	Percent of all CFC Intellectual Disability/Related Condition (ID/RC) assessments completed and submitted to the appropriate HHSC system within 90 calendar days of receiving a referral, or as otherwise agreed.	≥ 95% per Q	100%

10% Risk Measures

	Criteria	Definition	Target	Achieved
2.1	Adult Mental Health Improvement - Modified from 20% to 32.5%	At least 32.5% of adults authorized in a FLOC shall show improvement in at least one of the following ANSA domains/modules: Risk Behaviors, Behavioral Health Needs, Life Domain Functioning, Strengths, Adjustment to Trauma, Substance Use.	≥ 32.5% per FY 1/2	39%
2.2	Child and Youth Improvement - Modified from 25% to 42.8%	At least 42.8% of all children and youth authorized in a FLOC shall show improvement in at least one of the following CANS domains/modules: Child Risk Behaviors, Behavioral and Emotional Needs, Life Domain Functioning, Child Strengths, Adjustment to Trauma, Substance Use.	≥ 42.8% per FY 1/2	45.6%
2.3	School Performance - Modified from 60% to 65.2%	At least 65.2% of children authorized in a FLOC shall have acceptable or improved school performance.	≥ 65.2% per FY 1/2	68.1%

2.4	Community Tenure - Modified from 96.8% to 98.2%	At least 98.2% of individuals (adults and children) authorized in a FLOC shall avoid hospitalization in an HHSC Inpatient Bed throughout the measurement period.	≥ 98.2% per FY 1/2	98.3%
2.5	Effective Crisis Response - Modified from 75.1% to 78.6%	At least 78.6% of crisis episodes during the measurement period shall not be followed by admission to an HHSC Inpatient Bed within 30 days of the first day of the crisis episode.	≥ 78.6% per FY 1/2	86.2%
2.6	Hospital Follow-up within 7 Days - Modified from 62.3% to 57.4%	At least 57.4% of individuals discharged from a state hospital, an HHSC Contracted Bed, a CMHH, or a PPB shall receive contact within 0 - 7 days of discharge.	≥ 57.4% per FY 1/2	77.2%

Adult MH Services

Item	Criteria	Definition	Target	Achieved
3.1	Adult Service Target	The average monthly number of adults authorized in a FLOC. (1st half of year 1.4% penalty)	100% of 2750 per FY 1/2	97%
3.2	Adult Monthly Service Provision	An average of at least 49.6% of adults authorized in a FLOC shall receive at least one encounter each month. FLOCs included in this measure are LOC1S, LOC2, LOC3, LOC4, LOCTAY. LOC1M is excluded from this measure. Additionally, individuals who are both recommended and authorized for LOC1S are excluded from this measure. Encounters may be for any service and for any length of time.	≥ 49.6% Per FY 1/2	60.5%
3.3	Employment Functioning - Modified from 39.8% to 51.7%	At least 51.7% of adults authorized in a FLOC shall have acceptable or improved employment.	≥ 51.7% Per FY 1/2	93.5%
3.4	Education/ Volunteer Strengths - Modified from 26.5% to 28.4%	At least 28.4% of adults authorized in a FLOC shall have acceptable or improved employment–preparatory skills as evidenced by either the Educational or Volunteering Strengths item on the ANSA.	≥ 28.4% Per FY 1/2	32.8%
3.5	Residential Stability - Modified from 84% to 82.4%	At least 82.4% of adults authorized in a FLOC shall have acceptable or improved functioning on the ANSA residential stability item.	≥ 82.4% Per FY 1/2	87%

3.6	Depression Response at 6 months - Modified from 10.4% to 15.1%	At least 15.1% of adults authorized in a FLOC with a diagnosis of major depression and an initial QIDS score greater than or equal to 11 shall have a follow-up QIDS score at six months that is reduced by 50% or greater from the initial QIDS score and/or is less than or equal to 7.	≥ 15.1% Per FY 1/2	37.7%
3.7	High Need Adults Functioning NEW	At least 17.6% of adults authorized in a FLOC and recommended for LOC3 or LOC4 shall have acceptable or improved functioning in the Life Domain Functioning OR the Strengths domain of the ANSA. HHSC will not employ remedies or sanctions for failure to achieve this measure during FY2026.	≥ 17.6% Per FY 1/2	43%

Child and Youth Services

Item	Criteria	Definition	Target	Achieved
4.1	Child/Youth Service Target	The average monthly number of children/adolescents authorized in a FLOC. (1st half of year 1.4% penalty)	100% of 425 per FY 1/2	91%
4.2	Child Monthly Service Provision	An average of at least 64.5% of children authorized in a FLOC or LOCYES shall receive at least one encounter each month. Encounters may be for any service and for any length of time.	≥ 64.5% per FY 1/2	82.2%
4.3	Family Partner Response	At least 56.2% of children authorized in a FLOC who receive any Family Partner Support Service, as defined in information Item C, shall have acceptable or improved functioning in one or more of the following CANS Caregivers Strengths & Needs domain items: Family Stress, Involvement, or Knowledge. HHSC will not employ remedies or sanctions for failure to achieve this measure during fiscal year 2026.	≥ 56.2%	No data for all of Q2
4.4	Family and Living Situation	At least 72.6% of children authorized in a FLOC shall have acceptable or improved functioning on the CANS Family and Living Situation.	≥ 72.6% Per FY 1/2	86.3%

Crisis Services				
Item	Criteria	Definition	Target	Achieved
5.1	Access to Crisis Response Services	At least 69.9% of crisis hotline calls shall result in an encounter on the same day or within one day of a hotline call.	≥ 69.9% per FY 1/2	80.4%
5.4	Hospital 30-day Readmission	No more than 11.3% of those discharged from a state hospital, an HHSC Contracted Bed, a CMHH, or a PPB and reassigned to the LMHA/LBHA shall be readmitted to an HHSC Inpatient Bed within 30 days of discharge.	≤ 11.3%	6.82%

Superior MCO External Audits: Presented by Cara Mullenix-Artigue

BACKGROUND INFORMATION: On a quarterly basis, Superior, a Medicaid Managed Care Organization (MCO), reviews selected charts for purposes of compliance. This review was held February 26, 2026, and the review period was 10/1/2025 – 12/31/2025.

SUPPORTING INFORMATION: For this review, four (4) Child & Adolescent Services (CAS) charts were reviewed. Our chart compliance averaged **86.97%** and our claims compliance averaged **83.64%**.

SPECIFIC REASONS WHY THESE ACTIONS ARE NECESSARY FOR THE CENTER:

As an organization who contracts with MCO’s Program Provider, we must be in continuous compliance with Superior as it is our largest MCO. They schedule quarterly reviews with Helen Farabee Centers and have for the past ten (10) + years. Our next scheduled review is May 20, 2026, and the review period is 1/1/2026 – 3/31/2026.

ECI Subrecipient Determination FY25 External Audit: Presented by Cara Mullenix-Artigue

BACKGROUND INFORMATION: The Texas Health and Human Services Commission (HHSC) Early Childhood Intervention (ECI) program is required under Section 616 of the Individuals with Disabilities Education Act to make annual determinations on the performance of local ECI programs.

States must assign one of the following three (3) determinations:

- Meets requirements of Part C
- Needs assistance to meet the requirements of Part C
- Needs intervention to meet the requirements of Part C

DETERMINATION: HHSC ECI has determined Helen Farabee Centers meets the requirements of Part C, which means our ECI performance is at or above statewide average, consider all compliance indicators across the network of Texas ECI providers.

SUPPORTING DOCUMENTATION: The following are the factors used in making FY 2025 determinations:

1. Timely Services
2. Natural Environments
3. Family Outcomes (helped their child develop and learn)
4. Percentage of the population 0 – 3 years served
5. 45 days referral to enrollment
6. Transition conference
7. Average delivered hours of service per child per month (not parent choice)
8. Timely submission of TKIDS data
9. Timely submission of required financial reports
10. Accurate financial data
11. Results from monitoring visits, if applicable

SPECIFIC REASON/S WHY THIS REVIEW IS IMPORTANT: Annual review results of Texas ECI Programs impact statewide performance in compliance with federal IDEA requirements. It also serves as a continual quality improvement process in the program, serving to identify specific areas requiring targeted improvement. Many of the performance indicators are included in the Helen Farabee Centers Quality Management review to ensure monthly oversight and monitoring.

Henrietta Satellite Clinic: Presented by Gianna Harris for Andy Martin

- Henrietta has offered Helen Farabee Centers building space by their hospital for a satellite office. Bruce Sperry and Andy Martin have been to Henrietta to talk about the possible satellite office space.
- Helen Farabee Centers has had space at the Hospital in the past.

Marketing Report: Presented by Kiersten Mastalsz

- 48 Events since January 2026 with 23 more scheduled between now and July 31st.
- In April, Memorial High School's National Honor Society hosted a 5k walk, March for the Mind. During the walk, donations were accepted on behalf of Helen Farabee Centers, and they presented Andy Martin with a check for \$543.00.
- Since February, we have gone from 3.2k followers on Facebook to 3.3k.

New Business:

- Needs Assessment Feedback every three years for recertification as a Certified Community Behavioral Health Clinic. Sandra Rapson will be gathering information from Planning Network Advisory Committee (PNAC) on what they are hearing about in the community/organization for Helen Farabee Centers' needs. Informal interviews with the PNAC members would be very vital. This will be discussed in more detail at our next PNAC meeting in August.
- OIG Office of Inspector General – Helen Farabee Centers received a letter in February for our Audit of Community Centers. Cara Mullinex department has been working directly with the OIG Auditors.
 1. Lots of policies and procedures have been given to the auditors.
 - The audit was going to be for six months, but it will be longer and extended to December. Some Centers are at 18 months being audited.
 2. 150 charts have been pulled for review.
 - Quality Management Team is making sure they are giving a quick turn around for information that is being requested.

3. Focused on Crisis Services and Hotline Services

- Helen Farabee Centers contracts with Avail to provide hotline services. The individuals answering the hotline are Qualified Mental Health Professionals.
- Avail has been talking to the OIG and explaining the process of the hotline. Calls are answered within 30 seconds of the call. We treat all calls as emergent.
- Helen Farabee Centers responds within an hour of receiving the call from Avail. We have on-call staff to cover crisis. When an individual needs to be placed in our Crisis Respite Unit or hospital that we contract with needs to get approval from an LPHA (Licensed Professional Counselor).

Schedule next PNAC meeting/membership – Connie Johnston

- Will send out an email for dates of next meeting in August.
- Asked the PNAC members to please send me names of people that might be interested in becoming a member.

PNAC Discussion Questions

1. Do we see any unmet community needs based on this discussion? This is not seen as unmet, but the Boys and Girls Club have a new director and would like to partner with agencies out in the community. Diann Taylor (PNAC Member) has asked us to reconnect. Kiersten Mastalsz (Marketing/Social Media Staff) reported that she met her at the Chamber Event and will reach out.
2. Do we see any services that need to be developed? Any quality improvement issues to address? CART (Crisis Aid Response Team)
Police are trained in how to use the CART. It was suggested that we reach out to the City Manager and Mayor since they are new or have been on the job for less than a year. Leaders in charge should have knowledge or a refresher.
3. Does the PNAC need to make any budget recommendations to the Board? None
4. Are there any leadership ideas to convey to the board (HR Activity, leadership recruitment, etc.)? None

6 QUARTERLY REPORTS

C. EXTERNAL AUDITS

1) Substance Use Disorder (SUD) – Third Qtr Report

RECOMMENDED ACTION: Information Item Only

BACKGROUND INFORMATION: In May, Substance Use Disorder (SUD) services had two audits. 1) Health & Human Services Commission (HHSC) Retrospective Fee for Service Claims Review and, 2) HHSC Quality Management (QM) Follow-Up Review.

SUPPORTING INFORMATION: 1) HHSC Retrospective Fee for Service Claims Review – one finding in which a progress note was completed outside the 72-hour time frame. A Corrective Action Plan (CAP) was submitted and received. Audit considered complete.

2) HHSC QM – All documentation requested was received and approved. No findings. Audit considered complete.

SPECIFIC REASONS WHY THESE ACTIONS ARE NECESSARY FOR THE CENTER: HHSC monitors the substance use disorder (SUD) Services to make sure we are in compliance with contracts statement of works and Texas Administrative Codes. These were routine audits and a follow-up audit to make sure we were following past corrective action plans. There were no findings on the follow-up QM audit and only one minor finding on the Fee-for-Service audit. Corrective action plan has been approved and both audits are now resolved.

AGENDA ITEM: 070226-6C2

MEETING DATE:

JULY 2, 2026

6 QUARTERLY REPORTS

C. EXTERNAL AUDITS

2) THIRD QUARTER REPORT

Page 1 of 1

RECOMMENDED ACTION: Information Item Only

BACKGROUND INFORMATION: On a quarterly basis, Superior, a Medicaid Managed Care Organization (MCO), reviews selected charts for purposes of compliance. This review was held May 20, 2026, and the review period was 1/1/2026 – 3/31/2026.

SUPPORTING INFORMATION: For this review, two (2) Adult Mental Health (AMH) and two (2) Child & Adolescent Services (CAS) charts were reviewed. Our overall chart compliance average was **86.45%** and our claims compliance averaged **92.11%**.

SPECIFIC REASONS WHY THESE ACTIONS ARE NECESSARY FOR THE CENTER:

As an organization who contracts with MCO's Program Provider, we must be in continuous compliance with Superior as it is our largest MCO. They schedule quarterly reviews with August 27, 2026 and the review period will be 4/1/2026 – 6/30/2026.