

CEO REPORT

"Working Together To Help People Help Themselves"



August 27, 2025

CCBHC Recertification Update

On **August 26th** Melinda McCullough, Eddie Wallace & I met with the HHSC team who has been reviewing MHMRCV for recertification as a Certified Community Behavioral Health Clinic (CCBHC). We were notified that our CCBHC recertification was completed with an **overall score of 97%**, which is one of the highest throughout the State. Our recertification will go through **August 2028**.



CCBHC
Certified Community Behavioral Health Clinic

The final component of the review consisted of staff interviews with both frontline staff & mid-level managers. The CCBHC review team expressed how impressed they were with our staff's responses & the strong collaboration between leadership and staff. They noted that MHMRCV is continually moving forward & committed to ongoing improvement across the center.

The reviewers highlighted several strengths, including the many opportunities for staff feedback, our Leadership Development Institute, & how appreciative they were of the upgraded computers/laptops. They also praised MHMRCV's new strategy of utilizing Lyft to help clients access transportation for their appointments. Importantly, they recognized that communication within our organization is two-way & that our overall approach is solution-focused rather than punitive.



As a reminder our CCBHC status allows us to gain access to enhanced funding for comprehensive care (specifically billing for the Directed Payment Program, DPP that makes additional payments for Medicaid services through Medicaid Managed Care Organizations), meet high standards for quality & timely access, expand integrated mental health & substance use services, & reduce reliance on crisis services in jails & emergency rooms.

Crisis Counseling Program Update - July 4th Flooding

HHSC has yet to receive approval from FEMA on implementing the Crisis Counseling & Outreach Program. HHSC continues to be confident we will be funded for the program.



Update of Timeline:

On Friday, **July 11th**, HHSC Disaster Behavioral Health notified MHMRCV of their intent to apply Federal funds to develop a Crisis Counseling Training Program (CCP) in response to flood emergencies affecting several counties within the hill country & Tom Green County. HHSC requested for MHMRCV to participate in the program & needed several documents completed within a short period of time. Working on Friday & Saturday all required documentation was completed & submitted. This includes the request for information application, attestation letter, budget & budget narrative.

There are 2 parts to a CCP, an Immediate Services Program (ISP) & a Regular Services Program (RSP). The ISP is short term whereas the RSP will be for a longer period.

- CCP services objectives – 1. Help survivors understand their reactions & current situations. 2. Mitigate stress, develop coping skills, & offer emotional support. 3. Encourage connections with community resources for long-term recovery.
- CCP services include – 1. Individual & group crisis counseling, 2. Basic supportive or educational contact, 3. Public education & psychoeducation, 4. Community networking & stakeholder engagement, 5. Assessment, referral, & linkage to services, 6. Development of educational materials & media outreach.

On **July 28th** another department within HHSC reached out to MHMRCV along with Hill Country MHMR & Travis County MHMR stating that they have access to unspent ARPA funds for one-time items that could be directed to communities who were impacted by flooding. We completed a needs assessment & submitted it on **July 28th**. Our request was for \$3M for housing assistance, food/household essentials, & housing vouchers. I am certain if we are approved for any funding, we will not receive the amount requested, but hopefully we will receive something. As of this report we have not received any notification of funding.

On **August 8th**, HHSC Disaster Behavioral Health notified MHMRCV that they intended to move forward with applying for the Regular Service Program (RSP). Our application & budget was due & submitted on **August 15th**. Once approved the RSP will occur over a 9-month period.

We are in the process of posting positions based on the contingency of receiving funding. The CCP will consist of 6 positions that includes a program manager, 2 outreach teams with 2 outreach staff per team & an accounting/data position.



July 2025 Monthly Financials

Financial Highlights

The Center experienced a positive margin of \$14,354 for the month of July. The year-to-date margin is a positive \$57,715.



Financial Recap

Month	Revenue	Expenses	Margin-Actual	Margin-Budget
July	\$1,259,868	\$1,245,514	\$14,354	\$10,456

<u>Division Breakdown</u>	<u>July</u>
<u>Mental Health</u>	<u>\$53,930</u>
<u>IDD</u>	<u>(\$22,649)</u>

Variances

Revenues

State & Local: \$15,957 over budget

- **Patient Fees:** Increased by \$32,960 for both Administration and Outpatient. Corrections were made when it was discovered that Marketplace receipts were not being recorded properly. Accounting went back to September to make the correct allocations.
- **Donations for Clubhouse:** Down by \$6,057.
- **Miscellaneous Revenue:**
 - Increased by \$13,282 for Administration fees, anticipated to continue through August. All grant administration fees are now going to Misc. Revenue rather than to programs.
 - Jail Continuity of Care decreased by \$9,699. This was due to reallocation of Admin fees to account as well as decreased billing due to a vacant position & expense categories not utilized.
 - Decreased by \$7,917 for Veteran's TVC. July was not billed due to staff being out on medical leave. We anticipate billing both July & August together.

Chairty Care & Directed Payment Income: \$10,675 under budget each month. This is due to a monthly amortization that we will have to "true up" at the end of the fiscal year.

HHSC Allocations / General Revenue: (\$93,930) under budget.

- The Clubhouse was \$12,323 under budget with no income, as HHSC funding has been fully expended for the year. The Clubhouse is working off other grant funds through the end of the fiscal year.
- MH Respite was under \$5,311, as expenses were down.
- Crisis Diversion Center was \$27,837 under. Their budget is based on \$100,839 per month; expenses were \$73,000.
- Community MH Grant was \$11,479 under. The CMHG is budgeted at \$50,000 per month & saw expenses of \$38,000. We put a halt on the 3-day inpatient hospitalization billing as local match requirements related to this category were met. Inpatient services continued through the Private Psychiatric Bed funding which have been underutilized this FY.
- JBCR was \$6,575 under due to depletion of contract funds for the end of the FY.

Expenses

Salaries: \$22,817 under budget

- Administration was \$16,668 over budget.
- TCOOMMI was \$6,202 under, reflecting 2 unfilled vacancies.
- Crisis Diversion Center was \$23,232 under due to vacancies with a case manager & direct support staff.

Travel & Training: \$13,580 under budget

Across all programs both travel & training were less than anticipated for July. Travel was

\$4,448 under budget & costs associated with training was \$4,448 under budget.

Equipment/Furniture (<\$5,000): \$8,290 under budget across various reporting units.

Facility Costs: \$18,941 under budget, with savings noted in all units with no significant purchases.

Contracted Services: \$33,002 under budget (these expenses are often associated with HHSC allocations)

- Inpatient Hospitalizations were \$7,369 under budget.
- Other Contract Services – telehealth, medications, counseling: (\$29,379) over, with expenses of \$36,960 against a monthly budget of \$7,580.
- Community MH Grant was \$10,949 under, with discontinuing the 3-day Tier II inpatient hospitalization (associated with COPSD diagnosis) for the remainder of FY25. Inpatient services continued through a different funding source (PPB).
- Children's & Adult MH were \$29,368 under due to the savings associated with the new contract telehealth staff with ETBHN for medical director & Children's Advanced Nurse Practitioner.

Client Support: (\$12,973) over budget. This is primarily associated with an increase in available funds through the Crisis Diversion Center & Office of the Governor's Grant for rental/housing assistance.

Other Expenses: \$8,345 under budget across various reporting units.

MH Quality Management

Note: Although we strive for 100% scores of 80% or greater are typically acceptable by HHSC.

FY2025 Youth Empowerment Services (YES) Waiver Inquiry Line Review

On **7/18/2025**, the QM Department completed a FY2025 YES Waiver Inquiry Line review. According to the YES Waiver P&P Manual, the Local Mental Health Authority (LMHA) must maintain an up-to-date YES Waiver services inquiry list and phone messages received on the YES Waiver inquiry phone line must be returned within 24 hours, or one business day. The results of this review indicated that the YES Waiver line was called a total of 32 times. Of the 32 phone messages left on the inquiry line, 32 calls were returned in the 24-hour timeframe. This represents an accuracy rate of **100%**.



FY2025 YES Waiver Texas Administrative Code (TAC) and Fidelity Review

QM completed a YES Waiver TAC and fidelity review on **7/28/2025**. The review included 18 YES Waiver patients. The review tools evaluated the patient chart contents in accordance with the TAC guidelines and the YES Waiver Program Manual. TAC score = **93%**; Medical Note review = **89%**; Progress Notes = **88%**; Fidelity = **91%**.

FY2025 AVAIL Crisis Hotline Mystery Caller Survey

QM completed a "Mystery Caller" survey of the contractor for the MHMRCV crisis line on **7/27/2025**. The purpose of the assessment was to determine the performance level of Avail Solutions Incorporated workers response to callers in crisis. Six anonymous calls were made to the crisis line.

The calls were scored based on: tone of voice, courtesy, helpfulness, & overall satisfaction. CALL # 1 - **100%**; CALL # 2 - **N/A** (A recorded voice said error & the call was disconnected); CALL # 3 – **98%**; CALL # 4 - **98%**; CALL # 5 - **100%**; CALL # 6 - **75%**.

FY2025 Quarters 1-2 Mobile Crisis Outreach Team (MCOT) Review

QM completed a review of MCOT charts on **8/11/2025**. The sample for this review included 140 MCOT crisis encounters. The purpose of the review was to determine whether each of the 140 crisis encounters contained current required documentation. The encounter contents were verified in accordance with the TAC Chapter 306 – Subchapter F, HHSC Performance Contract Information Item-V, & Texas Resilience & Recovery Guidelines. There were up to 120 review elements for each of the 140 crisis encounters. Score = **95%**.

FY2025 Semi-annual Crisis Respite Site Assessment

On **8/15/2025**, QM conducted an onsite assessment survey of the MH Crisis Respite Facility. The HHSC Crisis Respite review tool was used to complete this assessment. The total number of Crisis Respite Facility standards reviewed was 96. The overall compliance score is **92%**.

FY2025 Semi-annual Crisis Respite Environmental Safety Checklist

QM completed a semi-annual Crisis Respite Environmental Safety Checklist on **8/15/2025**. This checklist is used to identify & eliminate any environmental risk factors that could contribute to attempted suicide, or suicide of an individual, or harm to a staff member. Environmental factors in the following categories were reviewed: construction, fixtures, clothing, furniture, & “other.” Two recommendations were made regarding construction (pull handles, bedroom doors). Two recommendations for improvement were made regarding fixtures (grab rails/bars & lighting fixtures). One recommendation was made for improvement regarding furniture (verifying flame resistant mattress foundation). One recommendation was made regarding proper storage of cleaning supplies.

IDD Fiscal Year 2026 Quality Assurance Authority Review

HHSC Contract Accountability & Oversight (CAO) notified the Center on **8/11/2025** that our Quality Assurance Authority Review is scheduled for **September 15-18, 2025**. The audit will be in the form of a remote desk. The purpose is to assure our compliance with the Local Intellectual & Developmental Disability (LIDDA) Performance Contract & that we adhere to the following Texas Administrative Codes:

- TAC 330: LIDDA Role and Responsibilities
- TAC Chapter 331: LIDDA Service Coordination
- TAC Chapter 334: Rights of Individuals with Intellectual Disabilities
- 26 TAC Chapters 262, 263, & 566: TxHmL and HCS Programs
- 26 TAC Chapter 303: PASRR
- CFR Title 42, Chapter 441: Community First Choice (CFC)

HHSC audit staff will coordinate with **Gana Brazeal-Huff**, Chief of IDD Services.



**Local intellectual
and developmental
disability authorities
(LIDDAs)**

IDD Fiscal Monitoring Review

HHSC contacted the Center on **8/22/2025** notifying us that they intend to conduct an on-site IDD Services Fiscal Monitoring Review on **September 22, 2025**. The review is to determine financial & administrative compliance with federal & state regulations for **Fiscal Years 2024 & 2025**.

Required Documents (Due September 3, 2025)

- Internal Control Questionnaire (ICQ) Supplement
- FY 2024 chart of accounts
- Reporting units list for FY 2024 & 2025 (IDD and administration)
- FY 2024 organizational chart (IDD and administration)
- Board of Trustees roster, Board minutes & by-laws (past 12 months)
- IDD/administrative contracts & leases from FY 2024 Single Audit
- June 2025 employee list (title, salary, reporting unit, split allocations)
- Current fixed asset list (IDD/administrative, with tags, locations, vehicles, laptops, tablets, etc.)

Materials to be Available at Time of Review

- Board packets (past 12 months)
- Detailed fixed asset & inventory records
- Trial balances (8/31/24 & 6/30/25)
- Aged A/R & A/P records (6/30/25)
- Bank statements & reconciliations (Apr–Jun 2025)
- Fiscal & administrative P&Ps
- Records supporting FY 2024 required match
- Indirect/unallowable/depreciation cost documentation (FY 2024 Single Audit)
- Report III (FY 2024 Q4 final & FY 2025 Q3) with reconciliations & supporting docs
- Corrective Action Plan documentation (FY 2024 audit & prior fiscal review)
- Form 941 & EFTPS proof of payment (last 4 quarters)
- Strategic Plan & Quality Management Plan
- FY 2025 insurance declaration
- Cost Allocation Methodology (FY 2024 & 2025)
- Workspace & internet access for 2 reviewers



Youth Empowerment Services (YES) Program Review

HHSC notified the Center on **8/25/2025** that they will conduct a Youth Empowerment Services (YES) Waiver program review on **9/22/2025**. The review will be conducted remotely in compliance with the Center for Medicare and Medicaid Services requirements for quality and financial oversight of waiver administration and operations. An entrance conference is scheduled for **9/15/2025** via a video conference.

HHSC personnel will:

- Review clinical & administrative records.
- Provide technical assistance & consultation to program staff.
- Evaluate compliance in the following areas:

- o Inquiry list management
- o Eligibility
- o Freedom of choice
- o Qualifications of service providers
- o Administrative procedures
- o Health, safety, & welfare
- o Billing & reimbursement
- o Service planning using the Wraparound process



TEXAS
Health and Human
Services

Youth Empowerment Services Waiver

The HHSC review team will coordinate with [Divetrea Whitaker](#), YES Program Manager, [Cara Barker](#), CMH Program Director, & [Melinda McCullough](#).

Annual End of the Fiscal Year / Staff Appreciation Luncheon

We're excited to celebrate the end of the fiscal year with our annual Staff Appreciation Luncheon! This year's event will be at **Howard College Rapid Response Room, West Texas Training Center** & is once again coordinated by [Melinda McCullough](#) & a 17-member volunteer committee. The luncheon will feature:

- A tailgate party theme – “Kickback Before FY 2026 Kickoff”
 - Food will be from Lillie's Pizza that includes wings, pizza sliders, and Rojos
 - There will be desserts & plenty of door prizes
 - Entertainment is by “DJ Todd Baird” from our IT Department
- All staff are encouraged to show team spirit by wearing their favorite NFL or college football T-shirt/jersey.



The even will be this **Friday, August 29th, 11:00 – 1:00.**

🎉 As an added bonus, all MHMRCV 8:00-5:00 offices will close that afternoon so everyone can get an early start to the Labor Day weekend!

San Angelo Community's Choice Awards Nomination

MHMRCV's Jail-Based Competency Restoration Program (JBCR) at the Tom Green County Jail has been nominated for this year's San Angelo Community's Choice Awards in the category of ✨ Best Counseling Center ✨. This recognition reflects the incredible collaboration between MHMRCV and the TGC jail medical staff. Both [Victoria Garcia, JBCR Program Manager](#) & [Ariana Acosta, Case Manager](#) are super committed & energized, along with the medical team to ensure participants receive the education, skills training, & psychiatric supports they need to regain their competency.

JBCR is a grant program funded by HHSC and administered by MHMRCV. JBCR program provides essential support for mental health, substance use treatment, and legal education to individuals deemed incompetent to stand trial.



SOME OF THE STAFF FROM FAMILY AND YOUTH GUIDANCE CENTER (FYGC) ATTENDED A RESOURCE FAIR FOR FAMILIES. OVER 50 KIDS AND PARENTS ATTENDED!

Summer Kids World Program

Every Tuesday in June and July from 2:00 p.m. to 3:00 p.m. Sunset Mall had local organizations come out and host a fun activity! The MHMR Children's Mental Health services hosted the event **on July 1st**. The Summer Kids World had fun activities, prizes, and discounts for mall vendors for kids and families who participated.



Americans with Disabilities Act Event

MHMRCV staff participated in an agency resource fair on **July 15th** for the 35th ADA Celebration at the McNease Convention Center. The theme of the event was the 1990's.



Leadership Development Institute

Our quarterly Leadership Development Institute, or LDI, (Center Supervisor Training) was held on Friday, **August 22nd**. This time we were in a new location at the Concho Valley Council of Governments Testing & Training Center.

LDI Topics

- [Ty Matlock](#) led our group of 30 supervisors and staff in a "Kahoots" **Ice Breaker** Activity
- TX Council Risk Management staff provided a **Workers' Compensation 101 Training**
- [Debbie Penaluna](#) presented training on **how to read a budget** with a focus on FY2026
- [Heather Routh](#) from our accounting/payroll department presented on **Payroll & Time Sheets**
- [Monica Tello](#) lead a training on **Practical HR Topics**: - posting, selection & on boarding new staff, staff discipline, having difficult conversations. This allowed for a lot of staff participation through small group roll playing and presentations to the full group.



[Monica](#), [Brandi Sablan](#), and [Ty Matlock](#) all but in a great effort with coordination of the LDI.



Our theme for the training was “**Back to School**”. We often dress up for the theme, but this one proved difficult. However, [Eddie Wallace](#) got an “A” for effort...

