# **CEO REPORT**

"Working Together To Help People Help Themselves"



July 23, 2025

# **End of 89th Legislative Session Report**

The final budget bill from the 89<sup>th</sup> Session did not contain the level of funding Community Centers & the TX Council advocated for; however, the session provided an opportunity to highlight the urgent needs within our system. Of note, the legislature invested substantial funding across publicly funded disability programs, but the level of new funding for IDD services, including for direct support professional wages, taken together with the discontinuation of the Attendant Care Rate Enhancement (ACRE) program, means many providers will not realize a true increase in funding.



IDD rates moved from \$10.60/hour for HCS & TxHmL Direct Service Professionals to \$13.00 per hour; 14% benefits & an admin fee increase of \$0.24 per direct service professional hour. MHMRCV participates in the Attendant Compensation Rate Enhancement program, but only for the last few years. We were not at a level of rate enhancements like those providers who have been in the program for 20+ years. We do not anticipate that the rate will put our programs in the "black" but hope to see some improvements.

Furthermore, the Legislature did not include funds in the budget to replace the enhanced federal block grant funding terminated in March 2025.

There were some budgetary bright spots with increased funding to support additional sites for both the Outpatient Biopsychosocial Approach for IDD (OBI) services & Youth Crisis Outreach Teams (YCOTs). However, funding will more than likely go to Community MHMR Centers in larger urban areas. Funding was also made available for inpatient hospitalization services at State facilities as well as several LMHA operated facilities. These too are outside our service area.

The legislature invested \$5.8 million into the Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) for the next biennium. We are uncertain how this will affect our TCOOMMI program. As a reminder, TCOOMMI is a program through the TX Department of Criminal Justice that focuses on providing support & services to individuals involved in the criminal justice system who are on probation or parole or involved with juvenile justice & have medical or mental health needs. MHMRCV's TCOOMMI program provides specialized case management, psychiatric services/medications, & continuity of care.

## The following are bills of interest that passed this session:

**Senate Bill 1580 by Senator Blanco** relates to the composition of the governing body of a local mental health authority. Specifically, it mandates the inclusion of a veteran selected by the existing members, in addition to the sheriffs who already serve as ex-officio nonvoting members. The bill is effective September 1, 2025.

Senate Bill 528 by Senator Schwertner relates to inpatient competency restoration services. Specifically, it aims to improve the oversight, accountability, and coordination of services for individuals found mentally unfit to stand trial. The bill mandates that facilities providing restorative services must enter into memorandums of understanding with local authorities and submit annual reports to the Health and Human Services Commission (HHSC).

Senate Bill 1164 by Senator Zaffirini focuses on revisions to the Texas Health and Safety Code regarding the emergency detention of individuals with mental illness. The bill broadens the criteria for when a person can be taken into emergency detention, allowing it not only when there's a risk of harm but also in cases of severe emotional distress, mental deterioration, or inability to recognize treatment risks. Additionally, it outlines specific documentation and notification procedures for peace officers during these detentions.

**HB 1188 by Representative Manuel** - Directs a school district to refer each student receiving special education services under Chapter 29 Education Code who has or is suspected of having IDD to a Local IDD Authority for services or public benefits, including Medicaid Waiver services.

## The following are bills monitored that did not pass this session:

**Senate Bill 2446 by Senator Sparks** would have revised the structure and composition of governing bodies for local mental health authorities.

**Senate Bill 19 by Senator Middleton** would have restricted the use of public funds by a political subdivision for lobbying and certain other activities. This would have affected the Texas Council & the work they do on behalf of Community Centers.

**House Bill 1656 by Representative Howard** The bill aimed to allow paramedics to detain and transport individuals exhibiting a substantial risk of harm due to mental illness to a mental health facility for evaluation.

House Bill 1716 by Representative Drew Darby – Companion – SB 469 – Senator Sparks. The bill would have allowed the provision of counseling services by certain providers under Medicaid and reimbursement for those services. Specifically, this bill would have allowed Licensed Professional Counselors & Licensed Master Social Worker interns to bill Medicaid for services at a reduced rate.



## **July 4th Flooding**

After the July 4th flooding in parts of San Angelo & Tom Green County HHSC Disaster Behavioral Health staff reached out to MHMRCV on July 7th regarding any impacts or unmet needs in our area. They requested we begin participating at the local Disaster Recovery Center (DRC) to assist anyone with MH resources & support. We quickly coordinated volunteers to be present at the DRC, first at PaulAnn Church & now at the Concho Valley Transit office. Staff are completing daily activity reports



that must be submitted to HHSC each morning to document community outreach & engagement.

On Friday, **July 11**th, 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 and 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.

On **July 14, 2025**, Governor Abbott announced the following counties were added to the Federal major disaster declaration & are now eligible for FEMA Public Assistance: Burnet, Llano, Mason, McCulloch, **Tom Green**. HHSC Disaster Behavioral Health submitted their CCP application to FEMA on this day.

The Crisis Counseling Assistance & Training Program (CCP) is a federally funded program administered by FEMA to support MH outreach & training in areas declared major disaster zones. Its goal is to help individuals & communities recover from natural or human-caused disasters through short-term, community-based interventions, such as outreach, emotional support, psychoeducation, and referrals.

#### **Program Objectives:**

- Help survivors understand their reactions & current situations.
- Mitigate stress, develop coping skills, & offer emotional support.
- Encourage connections with community resources for long-term recovery.

#### **CCP Services Include:**

- Individual & group crisis counseling
- Basic supportive or educational contact
- Public education & psychoeducation
- Community networking & stakeholder engagement
- Assessment, referral, & linkage to services
- Development of educational materials & media outreach

#### **Types of Interventions:**

- Individual Crisis Counseling: 15+ minute sessions to provide practical & emotional support, coping strategies, & referrals.
- Brief Supportive Contact: Less than 15 minutes; general support & information sharing without in-depth discussion.

## May & June 2025 Monthly Financials

#### Financial Highlights

The Center experienced a positive margin of \$95,413 for the month of May, however, saw a negative margin of \$17,769 for the month of June. The year-to-date margin is a positive \$43,361.



#### Financial Recap

Month	Revenue	Expenses	Margin-Actual	Margin-Budget
May	\$1,284,034	\$1,188,621	\$95,413	\$10,456
June	\$1,209,688	\$1,227,457	(\$17,769)	\$10,456



Division Breakdown	May	June
Mental Health	\$125,542	\$52,328
IDD	\$16,940	(\$14,713)

<u>Variances</u> The Center did not receive as much revenue as anticipated, however, did not spend as much in May & June.

#### **Revenues**

State & Local – May - \$16,663 less than budget; June - \$9,589 less than budget.

Accounting has submitted invoices for May – July for the Office of the Governor Grant and working on back billing to October 2024. This entails several staff positions where the staff have moved around within internal positions. The Zero Suicide program was under budget due to a vacancy & staff moving to new positions as well. The Jail Continuity of Care Program was also under due to a vacancy.

<u>Chairty Care & Directed Payment Income</u> – \$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 — May - \$44,880 less than budget; June \$118,564 less than budget. 1) The Clubhouse has expended all HHSC funding for the fiscal year. 2) Each month contained \$10,629 under for Outpatient Crisis Expansion. This funding has ended. Debbie is working to zero it out. 3) The Crisis Diversion Center continues to be under budget with revenue as well as expenses. In May, under \$26,948 & June \$32,742 under. 4. Inpatient hospitalizations remain well under budget. 5 Jail Based Competency Restoration was slightly under budget in June by \$4,242.

#### **Expenses**

<u>Salaries</u> – \$45,272 under budget in May; \$41,880 under budget in June. We have had several vacant positions in TCOOMMI, Jail CoC, Crisis Diversion, Crisis Respite, & positions funded through the Office of the Governor grant.

<u>Facility Costs</u> – May – \$9,715 over budget primarily due to costs associated with EnerTel for fire protection & security. June - \$11,205 under budget due to various savings in many areas of the Center including building repairs, utilities, & phones.

<u>Client Support</u> - \$9,837 over budget. We have used all HHSC Supported Housing & Rental Assistance funds for the year & are now utilizing the Office of the Governor's Grant & the Crisis Diversion Center funds for housing supports. Fortunately these programs have designated housing and utility supports as well as rapid housing supports. There continues to be a great demand for housing support.

<u>Contracted Services</u> – May - \$106,685 under budget; June - \$63,597 under budget. 1) Inpatient hospitalizations continue to be less than budget. 2) We are seeing a great saving with the tele-psych bill due to the recent changes with providers.

## **MH Quality Management**

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

# FY2025, Quarter 3 Rural Assertive Community Treatment (RACT) Team Chart Review

QM completed a chart review of the MH RACT Team on **July 8, 2025**. The review spanned 32 RACT Team patients. The QM MH chart review tool evaluated the patient chart contents in accordance with the Texas



Administrative Code (TAC) guidelines, Center P&Ps, & the HHSC required progress note & recovery plan elements. Scores: TAC = 97%; Medical Progress Notes = 94%; Progress Notes = 88%; Recovery Plans = 82%; Overall = 90%. We have seen great improvement with the RACT Team scores; no corrective action plan was required.

#### **FY2025 RACT Fidelity Review**

On **July 2, 2025**, QM completed a Rural ACT Fidelity Review. The purpose of the review was to evaluate the level of implementation of the principles defined in the SAMHSA Evidence-Based Practices Kit for ACT services. The process for this review included the following four activities:

- 1. Face-to-face interview with the RACT supervisor on 6/25/25;
- 2. Observation of a weekly staffing meeting involving RACT staff and prescribing providers on 6/25/25;
- 3. Observation of daily staffing involving RACT team on 6/25/25;
- 4. Scoring of the RACT Fidelity Scale review tool for the time period of 5/1/2024 5/30/2025.

The ACT Fidelity Scale tool was utilized to score the review. The tool contained 28 program-specific items that measured the degree to which the treatment team is implementing ACT services within the community. The criterion on the review tool is rated on a scale of 1-5, with 1 = not implemented (lowest rating) & 5 = fully implemented (highest rating). The tool is divided into 3 categories, scores follow:

- 1. Human Resources (Structure and Composition) 11 items; Score = 3.3
- 2. Organizational Boundaries 7 items; and Score = 3.1
- 3. Nature of Services 10 items. Score = 2.3

The **RACT or ACT Team** provides intensive, community-based support for adults with severe & persistent mental illness. The team works to help individuals manage their symptoms, improve their quality of life, & avoid psychiatric hospitalization. Intensive case management, psychosocial rehabilitation, medication management/assistance, & peer support are several of the services provided.



#### FY2025 Quarters 1-2 TCOOMMI Review

QM completed a review of the Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) on **June 3, 2025**. The review focused on patients with an open TCOOMMI assignment from **September 1, 2024, through February 28, 2025**. The review tool evaluates chart contents in accordance with the TAC guidelines & MHMRCV P&Ps. TAC score = **96%**; Medical Note score = **84%**; Progress Note score = **81%**; Recovery Plan score = **76%**; Overall score = **83%**. The QM Department requested a Corrective Action Plan regarding recovery plans only.

#### FY2025 Access to Routine MH Services Mystery Caller Review

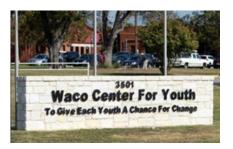
QM completed a "Mystery Caller" style survey on **June 9, 2025**. The purpose of the assessment was to determine whether callers could access routine MH services from MHMRCV within 14 calendar days. Five anonymous calls were made to telephone number 325-658-7750 during the time period of **June 5, 2025**, **to June 9, 2025**. One call was made to the routine/non-crisis toll-free telephone number 833-406-0857. These calls were made during business hours between 8 a.m. & 5 p.m. Call #1 score = **N/A** (call not answered); Call #2 score = **90%**; Call #3 score = **87%**; Call #4 score = **N/A** (toll free # not in service); Call #5 = **87%**; Call #6 = **92%**. We believe the new phone system is the cause of the toll-free number not working as it should and are working with our phone system reps to remedy the problem.

#### FY 2025 Quarters 1-2 CMH RTC Review

On **June 26, 2025**, QM completed a Residential Treatment Center (RTC) Integration Review of Children's Mental Health (CMH) services. The review was conducted based on the standards set by the HHSC Performance Contract. The sample included all individuals involved in the RTC program during FY2025 Q1- Q2. Intake score = **56%**; Service Provision score = **83%**; Placement Packet score = **92%**; Identification of RTC Placement score = **100%**; Coordination w/ RTC score = **88%**; Participation in Discharge score = **100%**; Additional Performance Measures = **42%**. QM requested a Corrective Action Plan be submitted.

RTCs supports families with a child at risk of entering the Department of Family and Protective Services (DFPS) conservatorship due to the child's MH care needs. The youth's behaviors and/or mood symptoms may have resulted in, or could potentially result in, psychiatric hospitalization, juvenile justice involvement, expulsion from school, serious injury to self or others, as well as displacement from home to DFPS custody. Receiving needed RTC services prevents more restrictive psychiatric hospital care, in addition to preventing parental relinquishment of custody. Before being referred to the RTC Project, HHSC recommends families connect with the Local Mental Health Authority (LMHA).

The intent of an RTC is to build strengths & resiliency in the parents/guardians, to participate in treatment planning with the RTC, & prepare the family for successful reunification with the youth upon discharge. LMHAs provide routine case management that includes weekly communication with the RTC about the youth's progress in treatment & planning outpatient services once discharged.



## **IDD Quality Improvement**

# FY2025 PASRR, HCS, TxHmL & GR Local Authority Chart Review

IDD Quality Improvement (QI) staff completed a monthly General Revenue (GR), Home & Community-Based Services (HCS), TX Home Living Quality Improvement

(TxHmL), & Pre-Admission Screening Resident Review (PASRR) chart review on **March 27, 2025**. The purpose of the review was to ensure the charts are up to date with accurate paperwork. QA staff utilized the survey audit tool provided by the Contract Accountability & Oversight (CAO) Unit within HHSC. The CAO unit utilizes this tool for each program to ensure compliance with specific elements of a LIDDA's Performance Contract as well as specific State & program rule requirements.

Three records were selected at random in each program for each month. Scores: PASRR = **100**%; HCS = **97.04**%; TxHmL = **100**%; GR/CFC = **100**%

#### **HCS & TxHmL Provider Chart Review**

IDD QI completed an HCS & TxHmL Provider services full audit review in March/April & May/June 2025. The purpose of the review was to ensure the charts are up to date with accurate paperwork. Two charts were reviewed each month per program.

<u>HCS Scores</u>: March = **91%**; April = **99%**; May = **100%**; June = **100%** 

<u>TxHmL Scores</u>: March = **92**%; April **95**%, May = **96**%; June = **99**%

#### **CLASS Chart Review**

IDD QI completed a Community Living Assistance and Support Services (CLASS) full audit review on **March 24, 2025**. The purpose of the review was to ensure the charts are up to date with accurate paperwork. One chart was reviewed (The CLASS program has 12 individuals enrolled). Score: = **100**%

## **CCBHC Recertification Update**

Since March 2025, Melinda, Eddie, & I have worked closely with HHSC to complete the required steps for MHMRCV's recertification as a Certified Community Behavioral Health Clinic (CCBHC). We are approaching the final stages of this process & are optimistic about a successful outcome. We received feedback on our second submission June 24<sup>th</sup>.

Second Submission Review Scores.

Program Requirement	Score
1. Needs Assessment & Staffing	96%
2. Availability & Accessibility of Services	97%
3. Care Coordination	95%
4. Scope of Services	95%
5. Quality & Reporting	78%
6. Organizational Authority & Governance	100%
Overall Score	94%



While our overall score is passing, Program Requirement 5 received a "not operational" rating due to a component score of a 3 or 4, which disqualifies recertification until corrected. Scores of 1 or 2 are only acceptable for passing.

#### **Reviewer Feedback from the Second Submission**

Strengths Noted:

- Strong narrative linking community needs assessment to MHMRCV's strategies for rural service delivery.
- Clear documentation of signed, updated, and new agreements with external partners.

#### **Areas for Improvement**

- Clarification needed regarding recovery plan completion for individuals outside the mental health priority population.
- Additional details are requested on how substantive updates to the Continuous Quality Improvement plan are shared with staff and stakeholders.

#### **Upcoming: Staff Group Interviews**

Six "frontline staff" and six "supervisor/mid-level managers" will participate in group interviews with the HHSC CCBHC Review Team. This is scheduled for **Friday, July 25**, 2025, at 9:00–10:00 a.m. and 2:00–3:00 p.m. via Microsoft Teams. Melinda, Eddie and I will not be permitted to attend per HHSC guidelines. The goal of the interview is to learn more about staff roles at MHMRCV and how the CCBHC model is integrated into our work. Melinda is coordinating a CCBHC refresher training course for these 12 staff the week of **July 21**.

#### **Next Steps**

- HHSC is accepting supplemental information through August 1, 2025.
- Melinda McCullough is currently preparing our updated submission addressing the identified concerns.



We are extremely close to achieving CCBHC recertification.

# Texas Council Risk Management Fund Award for Excellence in Liability Loss Prevention

MHMRCV was honored to once again receive the Texas Council Risk Management Fund Award for Excellence in Liability Loss Prevention at the Annual Texas Council Conference **June 25**<sup>th</sup>.



# **Koalafied Outreach Worker Star Award Winner - May 2025**

The Koalafied Outreach Worker Star Award is an award through the Texas Council of Community Centers to celebrate the important work of Mental Health First Aid (MHFA) Outreach Workers. In May, out of 10 nominations from across all Community MHMR Centers, our very own Jason Vaquera received this award.

# Mental Health First Aid Highlight







Jason Vaquera has been honored with the Koalafied Outreach Worker Star Award (KOWSA) by the Texas Council for the month of May! This prestigious award, launched in March 2021, recognizes the outstanding contributions of Mental Health First Aid (MHFA) Outreach Workers who go above and beyond to support their communities. Nomination Highlight: "Jason doesn't always speak in meetings but when he does it's with either a relevant question or comment. He seems to always be positive, which is super important as a Mental Health Educator! Jason has been so helpful and has gone above and beyond to get answers. When I had a class participant have a question about 988, he took the time to contact 988 to get an answer. He is not afraid to ask questions or to help others out when he is able."

468 people trained since May 2024

mental health awareness and support.

#### **Mental Health Awareness Walk**

The San Angelo Clubhouse Annual .5K MH Awareness Walk drew many participants on **May 31**st.

This year's theme was "Rise Above".





# **Crisis Diversion Center Grand Opening**

The Open House & Ribbon Cutting for our new Crisis Diversion Center drew a great crowd & publicity on **May 28**<sup>th</sup>.

We have officially named the program "Pathways Crisis Diversion Center".

