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Full Board Meeting
March 24, 2021
9:30 am

I. DECLARATION OF QUORUM

II. PUBLIC COMMENTS

III. APPROVAL OF MINUTES

- A. Approve Minutes of the Board of Trustees Meeting Held on Wednesday, February 24, 2021
(*EXHIBIT F-1*)

IV. CHIEF EXECUTIVE OFFICER'S REPORT

V. COMMITTEE REPORTS AND ACTIONS

- A. Resource Committee Report and/or Action
(*G. Womack, Chair*)
 - 1. FY'21 Year-to-Date Budget Report March
(*EXHIBIT F-2 Sean Kim*)
- B. Quality Committee Report and/or Action
(*G. Santos, Chair*)
- C. Program Committee Report and/or Action
(*B. Hellums, Chair*)

VI. CONSIDER AND RECOMMEND ACTION

- A. Approve FY'21 Year-to-Date Budget Report-March
(*EXHIBIT F-3 Sean Kim*)
- B. COVID-19 Fiscal Impact Report
(*EXHIBIT F-4 Sean Kim*)
- C. FY'21-March New Contracts Over \$50k
(*EXHIBIT F-5 Silvia Tiller*)
- D. FY'21-March Contract Renewals \$50k and more
(*EXHIBIT F-6 Silvia Tiller*)
- E. FY'21- March Contract Amendments \$50k and more
(*EXHIBIT F-7 Silvia Tiller*)
- F. KIOSKS for EPIC
(*EXHIBIT F-8 Mustafa Cochinwala*)
- G. Mid-Year Continuous Care Performance Award Proposal
(*Wayne Young*)

VII. REVIEW AND COMMENT

- A. The Harris Center Foundation
(*Wayne Young Susan Fordice*)
- B. Legislative Update

(Wayne Young Amanda Jones)

C. EPIC Update
(Mustafa Cochinwala)

D. 1115 Waiver Recoupment
(Wayne Young)

VIII. BOARD CHAIR'S REPORT

IX. EXECUTIVE SESSION

• In accordance with §551.072 of the Texas Government Code,
Discussion about the purchase of real property to expand
Southeast Clinic located at 5901 Long Drive, Houston, TX-Silvia
Tiller, Director of Contracts

• In accordance with §551.072 of the Texas Government Code,
Discussion about the purchase of real property for the
replacement of Northeast Clinic located at 7200 North Loop
East, Houston, TX-Silvia Tiller, Director of Contracts

• In accordance with §551.071 of the Texas Government Code,
Discussion with General Counsel regarding Cause No. 2021-
08238 Shadawn McCants v. The Harris Center for Mental Health
& IDD and City of Houston, Kendra Thomas, General Counsel

X. RECONVENE INTO OPEN SESSION

**XI. CONSIDER AND TAKE ACTION AS A RESULT OF THE EXECUTIVE
SESSION**

XII. INFORMATION

- A. FY'21 New Contracts under \$50k
(EXHIBIT F-9)
- B. FY'21 Contract Amendments under \$50k
(EXHIBIT F-10)
- C. Affiliation Agreements, Grants, MOU's And Revenues
(EXHIBIT F-11)
- D. Abbreviation List
(EXHIBIT F-12)

XIII. ADJOURN



Veronica Franco, Board Liaison
Shaukat Zakaria, Chair, Board of Trustees
The Harris Center for Mental Health and IDD



EXHIBIT F-1

**THE HARRIS CENTER *for*
Mental Health and IDD**

MINUTES OF THE BOARD OF TRUSTEES MEETING

This is an official record of the Board of Trustees, The Harris Center for Mental Health and IDD, an Agency of the State, established by the Harris County Commissioners Court under provisions of Chapter 534 of the Health and Safety Code of the State of Texas.

PLACE OF MEETING: Conference Room 104
9401 Southwest Freeway
Houston, Texas 77074

TYPE OF MEETING: Regular

DATE: February 24, 2021

**TRUSTEES
IN ATTENDANCE:** Mr. Shaukat Zakaria, Chairperson
Dr. George Santos, Vice Chairperson
Dr. Lois Moore, Vice Chairperson
Mr. Gerald Womack
Judge Bonnie Hellums
Dr. Robin Gearing
Mr. Jim Lykes

TRUSTEES ABSENT: Mr. Wesley Hunt
Mr. Taseer Badar
Sheriff Ed Gonzalez, Ex Officio

1. Declaration of Quorum

Mr. Shaukat Zakaria, Chair, called the meeting to order at 9:36 a.m. noting that a quorum of the Board was in attendance.

2. Public Comments

Mr. Shaukat Zakaria announced the floor is open for public comments. There were no public comments made.

3. Approval of Minutes

MOTION BY: MOORE

SECOND: WOMACK

With unanimous affirmative votes

BE IT RESOLVED the Minutes of the Regular Board of Trustees meeting held on Wednesday, January 27, 2021 as presented under Exhibit F-1, are approved.

- 4. **Chief Executive Officer’s Report** was provided by CEO Wayne Young
Mr. Young provided a Chief Executive Officer report to the Board.
- 5. **Committee Reports and Action were presented by the respective chairs:**
 - A. Resource Committee Report and/or Action- G. Womack, Chair
 - 1. FY’21 Year-to-Date Budget Report- January (Sean Kim)
 - B. Quality Committee Report and/or Action- G. Santos, Chair
 - C. Program Committee Report and/or Action- B. Hellums, Chair
 - D. Audit Committee Nominations and Member Election- S. Zakaria, Chair

MOTION BY: SANTOS

SECOND: WOMACK

With unanimous affirmative votes

BE IT RESOLVED the Audit Committee Nominations and Member Election as presented under Exhibit F-3, with the addition of Mr. Lykes, approved by the majority.

BE IT FURTHER RESOLVED Dr. Gearing was nominated and approved as a member of the Audit Committee by motion from Mr. Lykes and second by Judge Hellums, approved by unanimous votes.

- 6. **Consider and Recommend Action**
 - A. FY’21 Year-to-Date Budget Report-January

MOTION BY: SANTOS

SECOND: HELLUMS

With unanimous affirmative votes

BE IT RESOLVED the FY’21 Year-to-Date Budget Report-January as presented under Exhibit F-4, approved by the majority.

- B. COVID-19 Fiscal Impact Report

MOTION BY: WOMACK

SECOND: SANTOS

With unanimous affirmative votes

BE IT RESOLVED the COVID-19 Fiscal Impact Report as presented under Exhibit F-5, approved by the majority.

C. Check Signing Authorization

MOTION BY: SANTOS

SECOND: WOMACK

With unanimous affirmative votes

BE IT RESOLVED the SABA Software Invoice, approved by the majority.

D. SABA Software Invoice

MOTION BY: WOMACK

SECOND: SANTOS

With unanimous affirmative votes

BE IT RESOLVED the SABA Software Invoice as presented under Exhibit F-6, approved by the majority.

E. TexPool Resolution Amending Authorized Representatives

MOTION BY: WOMACK

SECOND: MOORE

With unanimous affirmative votes

BE IT RESOLVED the TexPool Resolution Amending Authorized Representatives, approved by the majority.

F. FY'21 February Contract Renewals \$50k and more

MOTION BY: SANTOS

SECOND: MOORE

With unanimous affirmative votes

BE IT RESOLVED the FY'21 February Contract Renewals \$50k and more, as presented under Exhibit F-7 approved by the majority.

G. FY'21 February Contract Amendments \$50k and more

MOTION BY: SANTOS

SECOND: WOMACK

With unanimous affirmative votes

BE IT RESOLVED the FY'21 February Contract Amendments \$50k and more as presented under Exhibit F-8, approved by the majority.

H. FY'21 February Interlocal Agreements

MOTION BY: SANTOS

SECOND: MOORE

With unanimous affirmative votes

BE IT RESOLVED the FY'21 February Interlocal Agreements as presented under Exhibit F-9, approved by the majority.

I. February 2021 Ratifications Contracts over \$50k

MOTION BY: SANTOS

SECOND: WOMACK

With unanimous affirmative votes

BE IT RESOLVED the February 2021 Ratifications Contracts over \$50k as presented under Exhibit F-10, approved by the majority.

J. Change of Recordkeeper and Ratification of the Execution of Recordkeeping Services Agreement between the Harris Center and Lincoln Retirement Services, Company, LLC

MOTION BY: SANTOS

SECOND: WOMACK

With unanimous affirmative votes

BE IT RESOLVED the Change of Recordkeeper and Ratification of the Execution of Recordkeeping Services Agreement between the Harris Center and Lincoln Retirement Services, Company, LLC as presented, approved by the majority.

K. Recordkeeping Services for Harris Center Employee Retirement Plans

- 1. Approval of Trust Agreement and the Custodian Agreement
- 2. Approval of Lincoln Financial Group Trust company as Successor Trustee and Custodian of the Plans
- 3. Approval of Removal of Current Trustees and Custodian of the Plans.
- 4. Approval of Transfer of Certain Assets

MOTION BY: SANTOS

SECOND: MOORE

With unanimous affirmative votes

BE IT RESOLVED Recordkeeping Services for Harris Center Employee Retirement Plans, 1. Approval of Trust Agreement and the Custodian Agreement; 2. Approval of Lincoln Financial Group Trust company as Successor Trustee and Custodian of the Plans; 3. Approval of Removal of Current Trustees and Custodian of the Plans.; 4. Approval of Transfer of Certain Assets as presented, approved by the majority.

7. Review and Comment

A. EPIC Implementation Status Report

Mustafa Cochinwala presented the EPIC Implementation Status Report and stated that The Harris Center is on target for April 10th launch.

B. Partnership with Holmusk & UT Health/HCPC

Nawal Roy, John Rush, Joydeep Sarkar and Sonali Luniya from Holmusk presented a proposal regarding data partnership with The Harris Center.

8. Board Chair's Report

Mr. Zakaria briefly discussed the Ben Taub and The Harris Center collaboration and the renewal lease at NPC has been approved by Harris Health.

9. Executive Session-

At 11:51 a.m. Chair S. Zakaria announced the Board would enter into Executive Session for the following reasons:

- A. In accordance with §551.072 of the Texas Government Code, Discussion about the purchase of real property to expand Southeast Clinic located at 5901 Long Drive, Houston, TX-Silvia Tiller, Director of Contracts**
- B. In accordance with §551.072 of the Texas Government Code, Discussion about the purchase of real property for the replacement of Northeast Clinic located at 7200 North Loop East, Houston, TX-Silvia Tiller, Director of Contracts**

10. Reconvene into Open Session and Take Action

At 12:12 p.m., the Board of Trustees reconvened into open session.

11. Consider and Take Action as a Result of the Executive Session

No action taken

12. Adjournment- 12:12 p.m.

Respectfully submitted,

Veronica Franco, Board Liaison
Shaukat Zakaria, Secretary, Board of Trustees
The HARRIS CENTER for
Mental Health and IDD

EXHIBIT F-2



The Harris Center for Mental Health and IDD

Financial Report
For the Sixth Month and Year to Date Ended February 28, 2021

Fiscal Year 2021

Presented to the Resource Committee of the Board of Trustees on March 16, 2021

The Harris Center for Mental Health & IDD

March 16, 2021

**Resource Committee
Board of Trustees
The Harris Center for Mental Health and IDD**

The monthly financial report for February 28, 2021 of The Harris Center for Mental Health and IDD ("The Center") is submitted herewith. This report was prepared by The Center's Accounting Department. Responsibility for both accuracy of the presented data and the completeness and fairness of the presentation rests with the Authority, the Chief Financial and Administrative Officer and the Accounting Department. We believe the data as presented is accurate in all material respects; that it is presented in a manner designed to fairly set forth the financial position and results of operations of the Center.

The Authority's accounting records for general operations are maintained on a modified accrual basis. Under this method, revenues are recognized in the period when they become measurable and available, and expenditures are recognized when the related fund liability is incurred, if measurable. The financial statement submitted herewith has not been audited by an independent auditor.



**Sean Kim, CPA
Chief Financial and Administrative Officer**

The Harris Center for Mental Health and IDD
 Financial Summary
 For the Sixth Month and Year to Date Ended February 28, 2021

Month (,000)			
	Actual	Budget	Variance
Revenues	\$ 19,815	\$ 21,053	\$ (1,238)
Expenditures	<u>23,552</u>	<u>23,777</u>	<u>225</u>
Excess of Revenues over (under) Expenditures before Other Sources	<u>\$ (3,737)</u>	<u>\$ (2,724)</u>	<u>\$ (1,013)</u>

Year-to-date (,000)			
	Actual	Budget	Variance
Excess of Revenues over (under) Expenditures after Other Sources	<u>\$ 16,369</u>	<u>\$ (938)</u>	<u>\$ 17,306</u>

The Harris Center for Mental Health and IDD
Comparison of Revenue and Expenses - Actual to Budget
For the Sixth Month and Year to Date Ended February 28, 2021

	Month Ended February 28, 2021				Six Months Ended February 28, 2021			
	Actual	Budget	Variance		Actual	Budget	Variance	
			Favorable or (Unfavorable)				Favorable or (Unfavorable)	
			\$	%			\$	%
Total Revenues:								
Harris County and Local	3,708,111	4,315,505	(607,394)	c -14%	28,745,583	25,835,859	\$ 2,909,724	11%
PAP / Samples	1,019,535	1,583,323	(563,788)	d -36%	7,451,444	9,499,938	(2,048,494)	-22%
Interest	8,132	41,666	(33,534)	e -80%	86,611	249,996	(163,385)	-65%
State General	9,515,866	9,642,310	(126,444)	-1%	57,541,437	57,853,851	(312,414)	-1%
State Grants	1,521,837	920,530	601,307	f 65%	5,525,009	5,408,188	116,821	2%
Federal Grants	1,162,179	1,063,105	99,074	9%	11,868,799	6,378,627	5,490,172	86%
3rd party billings	2,879,423	3,486,395	(606,972)	g -17%	18,704,534	20,114,583	(1,410,049)	-7%
Total Revenue	19,815,083	21,052,834	(1,237,751)	h -6%	129,923,417	125,341,042	4,582,375	4%
Total Expenses:								
Salaries and Fringe	15,248,859	15,923,272	674,413	4%	94,193,623	95,559,760	1,366,137	1%
Travel	46,681	189,285	142,604	75%	280,867	916,116	635,249	69%
Contracts and Consultants	1,510,842	1,810,307	299,465	17%	9,507,973	10,835,535	1,327,562	12%
HCPC Contract	2,351,560	2,369,794	18,234	1%	14,212,512	14,218,764	6,252	0%
Supplies and Drugs	1,430,565	1,902,194	471,629	25%	9,364,956	11,424,253	2,059,297	18%
Equipment (Purch, Rent, Maint)	1,740,248	378,189	(1,362,059)	i -360%	6,390,108	2,273,692	(4,116,416)	-181%
Building (Purch, Rent, Maint)	391,055	283,184	(107,871)	j -38%	9,099,789	1,698,031	(7,401,758)	-436%
Vehicle (Purch, Rent, Maint)	9,625	29,324	19,699	67%	67,385	170,569	103,184	60%
Telephone and Utilities	234,955	222,985	(11,970)	-5%	1,193,172	1,337,861	144,689	11%
Insurance, Legal, Audit	143,671	137,845	(5,826)	-4%	955,901	826,818	(129,083)	-16%
Note Payments	0	0	-	0%	552,424	588,597	36,173	6%
Other	369,701	462,922	93,221	20%	2,412,111	2,808,939	396,828	14%
Claims Denials	63,841	67,532	3,691	5%	359,443	405,187	45,744	11%
Reserve for Bad Debt	10,618	0	(10,618)	0%	(108,227)	0	108,227	N/A
Total Expenses	23,552,221	23,776,833	224,612	k 1%	148,482,037	143,064,122	(5,417,915)	-4%
Excess of Revenues over (under)								
Expenditures before Other Sources	(3,737,138)	(2,723,999)	(1,013,139)		(18,558,620)	(17,723,080)	(835,540)	
Funds from other sources:								
Use of fund balance - CapEx	1,599,895	0	1,599,895		4,496,311	0	4,496,311	
Use of fund balance - COVID-19	0	0	-		1,786,540	0	1,786,540	
Fund Balance DSRIP	630,078	630,081	(3)		3,780,468	3,780,477	(9)	
Waiver 1115 Revenues	2,167,484	2,167,486	(2)		13,004,925	13,004,916	9	
DSRIP Transition	1,809,411	0	1,809,411		10,856,469	-	10,856,469	
COVID-19 FMAP Allocation	-	-	-		-	-	-	
Insurance Proceeds	-	-	-		981,430	-	981,430	
Proceeds from Sale of Assets	21,125	-	21,125		21,125	-	21,125	
Unrealized Gain/(Loss) on Securities	-	-	-		-	-	-	
Excess of Revenues over (under)								
Expenditures after Other Sources	\$ 2,490,855	\$ 73,568	\$ 2,417,287		\$ 16,368,648	\$ (937,687)	\$ 17,306,335	

The Harris Center for Mental Health and IDD
Comparison of Revenues and Expenses- Core Business and DSRIP
Management Use Only (Non-GAAP)
For The Month Ended February 28, 2021

	Month Ended February 28, 2021					
	Core Business		DSRIP		Capital Expenditures	
	Actual	Budget	Actual	Budget	Actual	Budget
Total Revenues:						
Local	\$ 4,728,878	\$ 5,935,686	6,900	\$ 4,808	\$ -	\$ -
State General Revenue	9,497,913	9,624,357	17,953	17,953	-	-
State Grants	1,521,837	920,530	-	-	-	-
Federal Grants	1,162,179	1,063,105	-	-	-	-
Federal Revenue - DSRIP	-	-	3,976,895	2,167,484	-	-
3rd party billings	2,779,728	3,389,018	99,695	97,377	-	-
Total Revenue	19,690,535	20,932,696	4,101,443	2,287,622	-	-
Total Expenses:						
Salaries and Fringe	14,036,595	14,519,946	1,212,264	1,403,326	-	-
Travel	45,269	177,328	1,412	11,957	-	-
Contracts and Consultant	1,455,440	1,692,769	55,402	117,538	-	-
HCPC Contract	2,351,560	2,369,794	0	0	-	-
Supplies and Drugs	1,410,685	1,878,521	19,880	23,673	-	-
Equipment (Purch, Rent, Maint)	126,417	301,583	67,858	76,606	1,545,973	-
Building (Rent, Maint)	230,079	124,925	107,054	158,259	53,922	-
Vehicle (Purch, Rent, Maint)	7,113	17,614	2,512	11,710	-	-
Telephone and Utilities	224,250	180,756	10,705	42,229	-	-
Insurance, Legal, Audit	117,148	107,720	26,523	30,125	-	-
Note Payments	(18,416)	(23,868)	18,416	23,868	-	-
Other	368,446	462,427	1,255	495	-	-
Claims Denials	63,841	67,532	0	0	-	-
Reserve for Bad Debt	10,618	-	-	-	-	-
Total Expenses	20,429,045	21,877,047	1,523,281	1,899,786	1,599,895	-
Excess of Revenues over (under)						
Expenditures before Other Sources	(738,510)	(944,351)	2,578,162	387,836	(1,599,895)	-
Funds from other sources:						
Use of fund balance - CapEx	-	-	-	-	1,599,895	-
Use of fund balance - COVID-19	-	-	-	-	-	-
Fund Balance DSRIP	630,078	630,081	-	-	-	-
Insurance Proceeds	-	-	-	-	-	-
Proceeds from Sale of Assets	21,125	-	-	-	-	-
Unrealized Gain/(Loss) on Securities	-	-	-	-	-	-
Excess of Revenues over (under)						
Expenditures after Other Sources	\$ (87,307)	\$ (314,270)	\$ 2,578,162	\$ 387,836	\$ -	\$ -

The Harris Center for Mental Health and IDD
Comparison of Revenues and Expenses- Core Business and DSRIP
Management Use Only (Non-GAAP)
For the Year to Date Ended February 28, 2021

	Six Months Ended February 28, 2021					
	Core Business		DSRIP		Capital Expenditures	
	Actual	Budget	Actual	Budget	Actual	Budget
Total Revenues:						
Local	\$ 36,257,278	\$ 35,556,945	26,360	28,848	\$ -	\$ -
State General Revenue	57,433,719	57,746,133	107,718	107,718	-	-
State Grants	5,525,009	5,408,188	-	-	-	-
Federal Grants	11,868,799	6,378,627	-	-	-	-
Federal Revenue - DSRIP	-	-	23,861,394	10,231,559	-	-
3rd party billings	18,093,482	19,532,183	611,052	582,400	-	-
Total Revenue	129,178,287	124,622,076	24,606,524	10,950,525	-	-
Total Expenses:						
Salaries and Fringe	86,668,867	87,114,017	7,524,756	8,445,743	-	-
Travel	274,045	845,374	6,822	70,742	-	-
Contracts and Consultant	9,073,882	10,130,307	434,091	705,228	-	-
HPCP Contract	14,212,512	14,218,764	0	0	-	-
Supplies and Drugs	9,274,504	11,283,598	90,452	140,655	-	-
Equipment (Purch, Rent, Maint)	1,946,508	(1,290,777)	406,808	465,036	4,036,792	3,099,433
Building (Rent, Maint)	7,904,373	670,887	735,897	949,878	459,519	77,266
Vehicle (Purch, Rent, Maint)	49,633	100,309	17,752	70,260	-	-
Telephone and Utilities	1,109,007	1,084,487	84,165	253,374	-	-
Insurance, Legal, Audit	783,814	646,017	172,087	180,801	-	-
Note Payments	-	-	552,424	552,424	-	-
Other	2,318,638	2,666,556	93,473	142,383	-	-
Claims Denials	351,019	402,217	8,424	2,970	-	-
Reserve for Bad Debt	(108,227)	-	0	0	-	-
Total Expenses	133,858,575	127,871,756	10,127,151	11,979,494	4,496,311	3,176,699
Excess of Revenues over (under)						
Expenditures before Other Sources	(4,680,288)	(3,249,680)	14,479,373	(1,028,969)	(4,496,311)	(3,176,699)
Funds from other sources:						
Use of fund balance - CapEx	-	-	-	-	4,496,311	-
Use of fund balance - COVID-19	1,786,540	-	-	-	-	-
Fund Balance DSRIP	3,780,468	3,780,477	-	-	-	-
Insurance Proceeds	981,430	-	-	-	-	-
Proceeds from Sale of Assets	21,125	-	-	-	-	-
Unrealized Gain/(Loss) on Securities	-	-	-	-	-	-
Excess of Revenues over (under)						
Expenditures after Other Sources	\$ 1,889,275	\$ 530,797	\$ 14,479,373	\$ (1,028,969)	\$ -	\$ (3,176,699)

The Harris Center for Mental Health and IDD
Comparative Balance Sheet
As of February 28, 2021

	Ending Balance		Increase/(Decrease) February	
	January 31, 2021	February 28, 2021		
Assets				
Cash and Cash Equivalents	124,390,546	111,687,803	\$ (12,702,743)	a
Inventory - includes RX	255,836	252,795	(3,041)	b
Prepaid Expenses	6,080,537	3,781,193	(2,299,344)	c
Deposits	3,290	3,290	-	
A/R Medicaid, Medicare, 3rd Party	10,174,422	8,921,759	(1,252,663)	
Less Bad Debt Reserve	(3,291,402)	(3,336,006)	(44,604)	
A/R Other	20,218,347	21,634,559	1,416,212	d
A/R DSRIP	18,494,036	22,470,931	3,976,895	e
Total Current Assets	176,325,612	165,416,324	(10,909,288)	
Land	5,028,114	5,028,114	-	
Building	25,773,792	25,773,792	-	
Building Improvements	20,863,609	20,863,609	-	
Furniture and Fixtures	9,878,194	9,893,194	15,000	
Vehicles	1,605,231	1,605,231	-	
Construction in Progress	7,219,785	8,819,680	1,599,895	
Total Property, Plant & Equipment	70,368,725	71,983,620	1,614,895	
TOTAL ASSETS	\$ 246,694,338	237,399,944	\$ (9,294,393)	
Liabilities and Fund Balance				
Unearned Income	35,706,551	24,305,443	\$ (11,401,108)	f
Accrued Payroll and Accounts Payables	22,248,793	22,780,148	531,354	g
Current Portion Long Term Debt	-	-	-	
Total Current Liabilities	57,955,344	47,085,591	(10,869,754)	
State Escheatment Payable	36,396	37,111	715	
Total Non Current Liabilities	36,396	37,111	715	
TOTAL LIABILITIES	57,991,740	47,122,702	(10,869,039)	
General Fund Balance	18,419,191	18,038,982	(380,209)	h
Nonspendable				
Investment in Inventories	255,836	252,795	(3,041)	
Investment in Fixed Assets	70,368,725	71,983,620	1,614,895	
Assigned:				
Current Capital Projects	27,585,472	25,985,577	(1,599,895)	i
Future Purchases of Real Property and IT Infrastructure	1,365,842	1,365,842	-	
Debt Repayment	-	-	-	
Self Insurance	2,000,000	2,000,000	-	
ECI Building Use	354,809	360,293	5,484	
Waiver 1115	45,469,691	44,839,613	(630,078)	
COVID-19 eFMAP Reserve	4,227,518	4,227,518	-	
Compensated Absences	4,854,354	4,854,354	-	
Total	174,901,438	173,908,594	(992,844)	
Year to Date Excess Revenues over (under) Expenditures	13,801,159	16,368,648	2,567,489	
TOTAL FUND BALANCE	188,702,597	190,277,242	1,574,645	
TOTAL LIABILITIES AND FUND BALANCE	\$ 246,694,337	237,399,944	\$ (9,294,394)	

The Harris Center for Mental Health and IDD
Notes to the Preliminary Financial Reports
For Month and Year to Date Ended February 28, 2021

I. Comparison of Revenue and Expenses - Actual to Budget

- a. For the month of February 2021, the sixth month of the fiscal year, The Harris Center is reporting **Excess Expenditures over Revenues** of \$3,737,138.
- b. The year-to-date amount translates to **Excess Revenues over Expenditures** of \$16,368,648 after use of fund balance, fund balance CapEx, fund balance DSRIP, Waiver 1115 revenues, insurance proceeds and DSRIP transition are considered.
- c. **Harris County and Local** is unfavorable to budget by \$607,394 due to Sheriff's Department and Jail Diversion revenues.
- d. **PAP/Samples** is unfavorable to budget by \$563,788 as the bulk PAP inventory stock is depleting.
- e. **Interest** is unfavorable to budget by \$33,534 because of lower interest rates caused by Federal Reserve interest rate reductions in response to the economic downturn from the COVID-19 pandemic.
- f. **State Grants** is favorable to budget by \$601,037 primarily due to timing of ECI revenues.
- g. **Third Party Billings** is unfavorable to budget by \$606,972 primarily due to the winter storm that impacted power and water for many employees.
- h. **Total Revenue**, therefore, is unfavorable to budget by \$1,237,751.
- i. **Equipment** is unfavorable to budget by \$1,362,059 primarily from expenses related to the South Loop East facility and payments for software.
- j. **Building** is unfavorable to budget by \$107,871 due to expenses related to the build out of the South Loop East facility.
- k. **Total Expenses** are favorable to budget by \$224,612.

II. Comparative Balance Sheet

- a. **Cash and Cash Equivalents** The agency considers cash and cash equivalents to be cash on hand, demand deposit accounts and short term investments with maturities of less than ninety days. Cash and cash equivalents decreased from the prior month as a result of operations.

	Ending Balance		Increase/(Decrease)
	January 31, 2021	February 28, 2021	February
Cash - General Fund Bank Of America	\$ 1,331,572	\$ 1,330,643	\$ (929)
Cash - General Fund Chase	17,691,476	14,142,129	(3,549,347)
Cash - BOA ACH Vendor	404,504	265,869	(138,635)
Cash - FSA - Discovery	166,191	144,276	(21,915)
Petty Cash	9,300	9,300	-
Investments - Texpool General Fund	1,001,480	1,001,513	33
Investments - Texpool Self Insurance	2,288,702	2,288,778	76
Investments - Texpool Prime	39,793,708	39,796,677	2,969
Investments - Texas Class	61,703,613	52,708,618	(8,994,995)
Total Cash and Cash Equivalents	\$ 124,390,546	\$ 111,687,803	\$ (12,702,743)

II. Comparative Balance Sheet (continued)

- b. **Inventory** normally does not significantly change from month to month. The balance is normally only updated annually at the time of the year end physical inventory. PAP/Drug Samples are not included in inventory, as this inventory does not belong to the Center. Inventory consists of the following:

	Ending Balance		Increase/(Decrease)
	January 31, 2021	February 28, 2021	February
Inventory - Central Supplies	\$ 11,138	\$ 11,138	\$ -
Supplies Purchased	18,750	18,750	-
Supplies Used	(9,531)	(12,572)	(3,041)
Inventory - Drugs	235,479	235,479	-
Total Inventory	<u>\$ 255,836</u>	<u>\$ 252,795</u>	<u>\$ (3,041)</u>

- c. **Prepaid Expenses** decreased because of HCPC activity.

II. Comparative Balance Sheet (continued)

d. Account Receivable Other increased in February.

	Ending Balance		Increase/(Decrease)
	January 31, 2021	February 28, 2021	February
Villas At Bayou Park	\$ 48,033	\$ 48,033	-
Pear Grove	19,814	\$ 19,814	-
Pasadena Cottages	76,386	\$ 76,796	410
Employee	1,850	\$ 1,850	-
Acres Homes Garden	59,756	\$ 59,756	-
General Accounts Receivable	1,536,212	\$ 1,673,367	137,155
Building Rents	12,500	\$ 12,500	-
Harris County Juvenile Probation	574,078	\$ 636,324	62,246
Harris County Community Supervision & Correct	611,690	\$ 529,233	(82,457)
Harris County Sheriff Dept.	3,096,696	\$ 2,667,854	(428,842)
ICFMR	172,595	\$ 155,295	(17,300)
ECI Administrative Claiming	217,375	\$ 70,621	(146,754)
TCOOMMI -Special Needs	739,840	\$ 915,564	175,724
TDCJ - Parole	82,000	\$ 102,500	20,500
TDCJ - Substance Abuse	71,400	\$ 89,250	17,850
TCOOMMI- Juvenile	213,019	\$ 201,496	(11,523)
Jail Diversion	2,004,295	\$ 2,303,306	299,011
ECI	907,245	\$ 955,012	47,767
ECI Respite	47,871	\$ 37,971	(9,900)
ECI SNAP	(3,334)	\$ (3,334)	-
HUD - Safe Havens	371,737	\$ 371,737	-
PATH - Mental Health Block	224,250	\$ 326,596	102,346
MH Block Grant	4,465,462	\$ 4,722,279	256,817
MH Block Grant - Coordinated Specialty Care	128,346	\$ 111,391	(16,955)

II. Comparative Balance Sheet (continued)

d. Account Receivable Other (continued)

	Ending Balance		Increase/(Decrease)
	January 31, 2021	February 28, 2021	February
Title XX Social Services	\$ 822,257	\$ 870,625	48,368
TANFF to Title XX Block Grant	99,778	79,543	(20,235)
DSHS SAPT Block Grant - SA/OSR	31,788	19,448	(12,340)
Enhanced Community Coordinator	2,395,577	2,536,498	140,921
DSHS Mental Health First Aid	31,181	40,967	9,786
HHSC ZEST - Zero Suicide	48,465	69,914	21,449
HCC Open Door	235,516	677,196	441,680
HCS	22,416	22,416	-
TX Home Living Waiver	(123,180)	(137,685)	(14,505)
Federal DSHS Disaster Assistance	813,887	1,155,049	341,162
Helpline Contracts	79,880	79,088	(792)
City of Houston - CCSI	50,537	75,805	25,268
City of Houston - DMD	10,332	20,663	10,331
City of Houston - 911 CCD Amended	20,797	39,821	19,024
DARS - Autism	-	-	-
	<u>\$ 20,218,347</u>	<u>\$ 21,634,559</u>	<u>\$ 1,416,212</u>

- e. **A/R DSRIP** increased as the Center adjusted for DSRIP funding owed to the Center.
- f. **Unearned Income** decreased due to spending down unearned grant funds.
- g. **Accrued Payroll and Accounts Payable** increased because of payment timing related to accounts payable, payroll, and employee fringe benefit liabilities.
- h. **General Fund Balance** decreased as a result of operations.
- i. **Current Capital Projects** decreased as a result of funding various Board approved capital projects for fiscal year 2021.
- j. **Days of Operation in Reserve for Total Agency** is 162 days and for **Core Business** is 94 days versus 167 and 101 days for the prior month, respectively.

III. Investment Portfolio

- a. Total investments as of February 28, 2021 is \$95,795,588 of which 100% is in government pools (Texas Class 55% and TexPool 45%).
- b. Investments this month yielded interest income of \$8,133.

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD
INVESTMENT PORTFOLIO
February 28, 2021

Issuer	CUSIP/ Security #	Book Value Cost	Transfer In Txpool/ TX Class	Transfer Out Tx pool/ TX Class	Interest Txpool/ TX Class	Allowance Unrealized G/L	Market Value Ending Balance	Market Value Beginning Balance	Portfolio %	Interest Accrual	Coupon Rate	Settlement Date
GOVERNMENT POOLS												
TEXAS CLASS - GF G/L 120700		61,703,613	-	(9,000,000)	5,006		52,708,619		55.02%		0.1209%	
TEXPOOL ISF G/L 120610		2,288,702	-	-	76		2,288,778		2.39%		0.0793%	
TEXPOOL GF G/L 120600		1,001,480	-	-	33		1,001,513		1.05%		0.0793%	
TEXPOOL PRIME G/L 120620		39,793,708	-	-	2,970		39,796,678		41.54%		0.1192%	
Subtotal Texpool		43,083,890	-	-	3,079		43,086,969		44.98%			
Subtotal Government Pools		104,787,503	-	(9,000,000)	8,085		95,795,588		100.00%			
TOTAL INVESTMENTS		\$ 104,787,503	\$ -	\$ (9,000,000)	\$ 8,085	\$ -	\$ 95,795,588		100.00%			

Total Investment Interest G/L 409000 & 409005
Depository Bank Interest G/L 409000
Total Interest

8,085
48
\$ 8,133

3 Month Weighted Average Maturity (Days)
3 Month Weighted Average Yield
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 weeks)

1.00
0.1165%
0.0626%

EXHIBIT F-3



The Harris Center for Mental Health and IDD

Financial Report
For the Sixth Month and Year to Date Ended February 28, 2021

Fiscal Year 2021

Presented to the Resource Committee of the Board of Trustees on March 16, 2021

The Harris Center for Mental Health & IDD

March 16, 2021

**Resource Committee
Board of Trustees
The Harris Center for Mental Health and IDD**

The monthly financial report for February 28, 2021 of The Harris Center for Mental Health and IDD ("The Center") is submitted herewith. This report was prepared by The Center's Accounting Department. Responsibility for both accuracy of the presented data and the completeness and fairness of the presentation rests with the Authority, the Chief Financial and Administrative Officer and the Accounting Department. We believe the data as presented is accurate in all material respects; that it is presented in a manner designed to fairly set forth the financial position and results of operations of the Center.

The Authority's accounting records for general operations are maintained on a modified accrual basis. Under this method, revenues are recognized in the period when they become measurable and available, and expenditures are recognized when the related fund liability is incurred, if measurable. The financial statement submitted herewith has not been audited by an independent auditor.



**Sean Kim, CPA
Chief Financial and Administrative Officer**

The Harris Center for Mental Health and IDD
 Financial Summary
 For the Sixth Month and Year to Date Ended February 28, 2021

Month (,000)			
	Actual	Budget	Variance
Revenues	\$ 19,815	\$ 21,053	\$ (1,238)
Expenditures	<u>23,552</u>	<u>23,777</u>	<u>225</u>
Excess of Revenues over (under) Expenditures before Other Sources	<u>\$ (3,737)</u>	<u>\$ (2,724)</u>	<u>\$ (1,013)</u>

Year-to-date (,000)			
	Actual	Budget	Variance
Excess of Revenues over (under) Expenditures after Other Sources	<u>\$ 16,369</u>	<u>\$ (938)</u>	<u>\$ 17,306</u>

The Harris Center for Mental Health and IDD
Comparison of Revenue and Expenses - Actual to Budget
For the Sixth Month and Year to Date Ended February 28, 2021

	Month Ended February 28, 2021				Six Months Ended February 28, 2021				
	Actual	Budget	Variance		Actual	Budget	Variance		
			Favorable or (Unfavorable)				Favorable or (Unfavorable)		
			\$	%			\$	%	
Total Revenues:									
Harris County and Local	3,708,111	4,315,505	(607,394)	c -14%	28,745,583	25,835,859	\$ 2,909,724	11%	
PAP / Samples	1,019,535	1,583,323	(563,788)	d -36%	7,451,444	9,499,938	(2,048,494)	-22%	
Interest	8,132	41,666	(33,534)	e -80%	86,611	249,996	(163,385)	-65%	
State General	9,515,866	9,642,310	(126,444)	-1%	57,541,437	57,853,851	(312,414)	-1%	
State Grants	1,521,837	920,530	601,307	f 65%	5,525,009	5,408,188	116,821	2%	
Federal Grants	1,162,179	1,063,105	99,074	9%	11,868,799	6,378,627	5,490,172	86%	
3rd party billings	2,879,423	3,486,395	(606,972)	g -17%	18,704,534	20,114,583	(1,410,049)	-7%	
Total Revenue	19,815,083	21,052,834	(1,237,751)	h -6%	129,923,417	125,341,042	4,582,375	4%	
Total Expenses:									
Salaries and Fringe	15,248,859	15,923,272	674,413	4%	94,193,623	95,559,760	1,366,137	1%	
Travel	46,681	189,285	142,604	75%	280,867	916,116	635,249	69%	
Contracts and Consultants	1,510,842	1,810,307	299,465	17%	9,507,973	10,835,535	1,327,562	12%	
HCPC Contract	2,351,560	2,369,794	18,234	1%	14,212,512	14,218,764	6,252	0%	
Supplies and Drugs	1,430,565	1,902,194	471,629	25%	9,364,956	11,424,253	2,059,297	18%	
Equipment (Purch, Rent, Maint)	1,740,248	378,189	(1,362,059)	i -360%	6,390,108	2,273,692	(4,116,416)	-181%	
Building (Purch, Rent, Maint)	391,055	283,184	(107,871)	j -38%	9,099,789	1,698,031	(7,401,758)	-436%	
Vehicle (Purch, Rent, Maint)	9,625	29,324	19,699	67%	67,385	170,569	103,184	60%	
Telephone and Utilities	234,955	222,985	(11,970)	-5%	1,193,172	1,337,861	144,689	11%	
Insurance, Legal, Audit	143,671	137,845	(5,826)	-4%	955,901	826,818	(129,083)	-16%	
Note Payments	0	0	-	0%	552,424	588,597	36,173	6%	
Other	369,701	462,922	93,221	20%	2,412,111	2,808,939	396,828	14%	
Claims Denials	63,841	67,532	3,691	5%	359,443	405,187	45,744	11%	
Reserve for Bad Debt	10,618	0	(10,618)	0%	(108,227)	0	108,227	N/A	
Total Expenses	23,552,221	23,776,833	224,612	k 1%	148,482,037	143,064,122	(5,417,915)	-4%	
Excess of Revenues over (under)									
Expenditures before Other Sources	(3,737,138)	(2,723,999)	(1,013,139)		(18,558,620)	(17,723,080)	(835,540)		
Funds from other sources:									
Use of fund balance - CapEx	1,599,895	0	1,599,895		4,496,311	0	4,496,311		
Use of fund balance - COVID-19	0	0	-		1,786,540	0	1,786,540		
Fund Balance DSRIP	630,078	630,081	(3)		3,780,468	3,780,477	(9)		
Waiver 1115 Revenues	2,167,484	2,167,486	(2)		13,004,925	13,004,916	9		
DSRIP Transition	1,809,411	0	1,809,411		10,856,469	-	10,856,469		
COVID-19 FMAP Allocation	-	-	-		-	-	-		
Insurance Proceeds	-	-	-		981,430	-	981,430		
Proceeds from Sale of Assets	21,125	-	21,125		21,125	-	21,125		
Unrealized Gain/(Loss) on Securities	-	-	-		-	-	-		
Excess of Revenues over (under)									
Expenditures after Other Sources	\$ 2,490,855	\$ 73,568	\$ 2,417,287		\$ 16,368,648	\$ (937,687)	\$ 17,306,335		

The Harris Center for Mental Health and IDD
Comparison of Revenues and Expenses- Core Business and DSRIP
Management Use Only (Non-GAAP)
For The Month Ended February 28, 2021

	Month Ended February 28, 2021					
	Core Business		DSRIP		Capital Expenditures	
	Actual	Budget	Actual	Budget	Actual	Budget
Total Revenues:						
Local	\$ 4,728,878	\$ 5,935,686	6,900	\$ 4,808	\$ -	\$ -
State General Revenue	9,497,913	9,624,357	17,953	17,953	-	-
State Grants	1,521,837	920,530	-	-	-	-
Federal Grants	1,162,179	1,063,105	-	-	-	-
Federal Revenue - DSRIP	-	-	3,976,895	2,167,484	-	-
3rd party billings	2,779,728	3,389,018	99,695	97,377	-	-
Total Revenue	19,690,535	20,932,696	4,101,443	2,287,622	-	-
Total Expenses:						
Salaries and Fringe	14,036,595	14,519,946	1,212,264	1,403,326	-	-
Travel	45,269	177,328	1,412	11,957	-	-
Contracts and Consultant	1,455,440	1,692,769	55,402	117,538	-	-
HCPC Contract	2,351,560	2,369,794	0	0	-	-
Supplies and Drugs	1,410,685	1,878,521	19,880	23,673	-	-
Equipment (Purch, Rent, Maint)	126,417	301,583	67,858	76,606	1,545,973	-
Building (Rent, Maint)	230,079	124,925	107,054	158,259	53,922	-
Vehicle (Purch, Rent, Maint)	7,113	17,614	2,512	11,710	-	-
Telephone and Utilities	224,250	180,756	10,705	42,229	-	-
Insurance, Legal, Audit	117,148	107,720	26,523	30,125	-	-
Note Payments	(18,416)	(23,868)	18,416	23,868	-	-
Other	368,446	462,427	1,255	495	-	-
Claims Denials	63,841	67,532	0	0	-	-
Reserve for Bad Debt	10,618	-	-	-	-	-
Total Expenses	20,429,045	21,877,047	1,523,281	1,899,786	1,599,895	-
Excess of Revenues over (under)						
Expenditures before Other Sources	(738,510)	(944,351)	2,578,162	387,836	(1,599,895)	-
Funds from other sources:						
Use of fund balance - CapEx	-	-	-	-	1,599,895	-
Use of fund balance - COVID-19	-	-	-	-	-	-
Fund Balance DSRIP	630,078	630,081	-	-	-	-
Insurance Proceeds	-	-	-	-	-	-
Proceeds from Sale of Assets	21,125	-	-	-	-	-
Unrealized Gain/(Loss) on Securities	-	-	-	-	-	-
Excess of Revenues over (under)						
Expenditures after Other Sources	\$ (87,307)	\$ (314,270)	\$ 2,578,162	\$ 387,836	\$ -	\$ -

The Harris Center for Mental Health and IDD
Comparison of Revenues and Expenses- Core Business and DSRIP
Management Use Only (Non-GAAP)
For the Year to Date Ended February 28, 2021

	Six Months Ended February 28, 2021					
	Core Business		DSRIP		Capital Expenditures	
	Actual	Budget	Actual	Budget	Actual	Budget
Total Revenues:						
Local	\$ 36,257,278	\$ 35,556,945	26,360	28,848	\$ -	\$ -
State General Revenue	57,433,719	57,746,133	107,718	107,718	-	-
State Grants	5,525,009	5,408,188	-	-	-	-
Federal Grants	11,868,799	6,378,627	-	-	-	-
Federal Revenue - DSRIP	-	-	23,861,394	10,231,559	-	-
3rd party billings	18,093,482	19,532,183	611,052	582,400	-	-
Total Revenue	129,178,287	124,622,076	24,606,524	10,950,525	-	-
Total Expenses:						
Salaries and Fringe	86,668,867	87,114,017	7,524,756	8,445,743	-	-
Travel	274,045	845,374	6,822	70,742	-	-
Contracts and Consultant	9,073,882	10,130,307	434,091	705,228	-	-
HPCP Contract	14,212,512	14,218,764	0	0	-	-
Supplies and Drugs	9,274,504	11,283,598	90,452	140,655	-	-
Equipment (Purch, Rent, Maint)	1,946,508	(1,290,777)	406,808	465,036	4,036,792	3,099,433
Building (Rent, Maint)	7,904,373	670,887	735,897	949,878	459,519	77,266
Vehicle (Purch, Rent, Maint)	49,633	100,309	17,752	70,260	-	-
Telephone and Utilities	1,109,007	1,084,487	84,165	253,374	-	-
Insurance, Legal, Audit	783,814	646,017	172,087	180,801	-	-
Note Payments	-	-	552,424	552,424	-	-
Other	2,318,638	2,666,556	93,473	142,383	-	-
Claims Denials	351,019	402,217	8,424	2,970	-	-
Reserve for Bad Debt	(108,227)	-	0	0	-	-
Total Expenses	133,858,575	127,871,756	10,127,151	11,979,494	4,496,311	3,176,699
Excess of Revenues over (under)						
Expenditures before Other Sources	(4,680,288)	(3,249,680)	14,479,373	(1,028,969)	(4,496,311)	(3,176,699)
Funds from other sources:						
Use of fund balance - CapEx	-	-	-	-	4,496,311	-
Use of fund balance - COVID-19	1,786,540	-	-	-	-	-
Fund Balance DSRIP	3,780,468	3,780,477	-	-	-	-
Insurance Proceeds	981,430	-	-	-	-	-
Proceeds from Sale of Assets	21,125	-	-	-	-	-
Unrealized Gain/(Loss) on Securities	-	-	-	-	-	-
Excess of Revenues over (under)						
Expenditures after Other Sources	\$ 1,889,275	\$ 530,797	\$ 14,479,373	\$ (1,028,969)	\$ -	\$ (3,176,699)

The Harris Center for Mental Health and IDD
Comparative Balance Sheet
As of February 28, 2021

	Ending Balance		Increase/(Decrease) February	
	January 31, 2021	February 28, 2021		
Assets				
Cash and Cash Equivalents	124,390,546	111,687,803	\$ (12,702,743)	a
Inventory - includes RX	255,836	252,795	(3,041)	b
Prepaid Expenses	6,080,537	3,781,193	(2,299,344)	c
Deposits	3,290	3,290	-	
A/R Medicaid, Medicare, 3rd Party	10,174,422	8,921,759	(1,252,663)	
Less Bad Debt Reserve	(3,291,402)	(3,336,006)	(44,604)	
A/R Other	20,218,347	21,634,559	1,416,212	d
A/R DSRIP	18,494,036	22,470,931	3,976,895	e
Total Current Assets	176,325,612	165,416,324	(10,909,288)	
Land	5,028,114	5,028,114	-	
Building	25,773,792	25,773,792	-	
Building Improvements	20,863,609	20,863,609	-	
Furniture and Fixtures	9,878,194	9,893,194	15,000	
Vehicles	1,605,231	1,605,231	-	
Construction in Progress	7,219,785	8,819,680	1,599,895	
Total Property, Plant & Equipment	70,368,725	71,983,620	1,614,895	
TOTAL ASSETS	\$ 246,694,338	237,399,944	\$ (9,294,393)	
Liabilities and Fund Balance				
Unearned Income	35,706,551	24,305,443	\$ (11,401,108)	f
Accrued Payroll and Accounts Payables	22,248,793	22,780,148	531,354	g
Current Portion Long Term Debt	-	-	-	
Total Current Liabilities	57,955,344	47,085,591	(10,869,754)	
State Escheatment Payable	36,396	37,111	715	
Total Non Current Liabilities	36,396	37,111	715	
TOTAL LIABILITIES	57,991,740	47,122,702	(10,869,039)	
General Fund Balance	18,419,191	18,038,982	(380,209)	h
Nonspendable				
Investment in Inventories	255,836	252,795	(3,041)	
Investment in Fixed Assets	70,368,725	71,983,620	1,614,895	
Assigned:				
Current Capital Projects	27,585,472	25,985,577	(1,599,895)	i
Future Purchases of Real Property and IT Infrastructure	1,365,842	1,365,842	-	
Debt Repayment	-	-	-	
Self Insurance	2,000,000	2,000,000	-	
ECI Building Use	354,809	360,293	5,484	
Waiver 1115	45,469,691	44,839,613	(630,078)	
COVID-19 eFMAP Reserve	4,227,518	4,227,518	-	
Compensated Absences	4,854,354	4,854,354	-	
Total	174,901,438	173,908,594	(992,844)	
Year to Date Excess Revenues over (under) Expenditures	13,801,159	16,368,648	2,567,489	
TOTAL FUND BALANCE	188,702,597	190,277,242	1,574,645	
TOTAL LIABILITIES AND FUND BALANCE	\$ 246,694,337	237,399,944	\$ (9,294,394)	

The Harris Center for Mental Health and IDD
Notes to the Preliminary Financial Reports
For Month and Year to Date Ended February 28, 2021

I. Comparison of Revenue and Expenses - Actual to Budget

- a. For the month of February 2021, the sixth month of the fiscal year, The Harris Center is reporting **Excess Expenditures over Revenues** of \$3,737,138.
- b. The year-to-date amount translates to **Excess Revenues over Expenditures** of \$16,368,648 after use of fund balance, fund balance CapEx, fund balance DSRIP, Waiver 1115 revenues, insurance proceeds and DSRIP transition are considered.
- c. **Harris County and Local** is unfavorable to budget by \$607,394 due to Sheriff's Department and Jail Diversion revenues.
- d. **PAP/Samples** is unfavorable to budget by \$563,788 as the bulk PAP inventory stock is depleting.
- e. **Interest** is unfavorable to budget by \$33,534 because of lower interest rates caused by Federal Reserve interest rate reductions in response to the economic downturn from the COVID-19 pandemic.
- f. **State Grants** is favorable to budget by \$601,037 primarily due to timing of ECI revenues.
- g. **Third Party Billings** is unfavorable to budget by \$606,972 primarily due to the winter storm that impacted power and water for many employees.
- h. **Total Revenue**, therefore, is unfavorable to budget by \$1,237,751.
- i. **Equipment** is unfavorable to budget by \$1,362,059 primarily from expenses related to the South Loop East facility and payments for software.
- j. **Building** is unfavorable to budget by \$107,871 due to expenses related to the build out of the South Loop East facility.
- k. **Total Expenses** are favorable to budget by \$224,612.

II. Comparative Balance Sheet

- a. **Cash and Cash Equivalents** The agency considers cash and cash equivalents to be cash on hand, demand deposit accounts and short term investments with maturities of less than ninety days. Cash and cash equivalents decreased from the prior month as a result of operations.

	Ending Balance		Increase/(Decrease)
	January 31, 2021	February 28, 2021	February
Cash - General Fund Bank Of America	\$ 1,331,572	\$ 1,330,643	\$ (929)
Cash - General Fund Chase	17,691,476	14,142,129	(3,549,347)
Cash - BOA ACH Vendor	404,504	265,869	(138,635)
Cash - FSA - Discovery	166,191	144,276	(21,915)
Petty Cash	9,300	9,300	-
Investments - Texpool General Fund	1,001,480	1,001,513	33
Investments - Texpool Self Insurance	2,288,702	2,288,778	76
Investments - Texpool Prime	39,793,708	39,796,677	2,969
Investments - Texas Class	61,703,613	52,708,618	(8,994,995)
Total Cash and Cash Equivalents	\$ 124,390,546	\$ 111,687,803	\$ (12,702,743)

II. Comparative Balance Sheet (continued)

- b. **Inventory** normally does not significantly change from month to month. The balance is normally only updated annually at the time of the year end physical inventory. PAP/Drug Samples are not included in inventory, as this inventory does not belong to the Center. Inventory consists of the following:

	Ending Balance		Increase/(Decrease)
	January 31, 2021	February 28, 2021	February
Inventory - Central Supplies	\$ 11,138	\$ 11,138	\$ -
Supplies Purchased	18,750	18,750	-
Supplies Used	(9,531)	(12,572)	(3,041)
Inventory - Drugs	235,479	235,479	-
Total Inventory	<u>\$ 255,836</u>	<u>\$ 252,795</u>	<u>\$ (3,041)</u>

- c. **Prepaid Expenses** decreased because of HCPC activity.

II. Comparative Balance Sheet (continued)

d. Account Receivable Other increased in February.

	Ending Balance		Increase/(Decrease)
	January 31, 2021	February 28, 2021	February
Villas At Bayou Park	\$ 48,033	\$ 48,033	-
Pear Grove	19,814	\$ 19,814	-
Pasadena Cottages	76,386	\$ 76,796	410
Employee	1,850	\$ 1,850	-
Acres Homes Garden	59,756	\$ 59,756	-
General Accounts Receivable	1,536,212	\$ 1,673,367	137,155
Building Rents	12,500	\$ 12,500	-
Harris County Juvenile Probation	574,078	\$ 636,324	62,246
Harris County Community Supervision & Correct	611,690	\$ 529,233	(82,457)
Harris County Sheriff Dept.	3,096,696	\$ 2,667,854	(428,842)
ICFMR	172,595	\$ 155,295	(17,300)
ECI Administrative Claiming	217,375	\$ 70,621	(146,754)
TCOOMMI -Special Needs	739,840	\$ 915,564	175,724
TDCJ - Parole	82,000	\$ 102,500	20,500
TDCJ - Substance Abuse	71,400	\$ 89,250	17,850
TCOOMMI- Juvenile	213,019	\$ 201,496	(11,523)
Jail Diversion	2,004,295	\$ 2,303,306	299,011
ECI	907,245	\$ 955,012	47,767
ECI Respite	47,871	\$ 37,971	(9,900)
ECI SNAP	(3,334)	\$ (3,334)	-
HUD - Safe Havens	371,737	\$ 371,737	-
PATH - Mental Health Block	224,250	\$ 326,596	102,346
MH Block Grant	4,465,462	\$ 4,722,279	256,817
MH Block Grant - Coordinated Specialty Care	128,346	\$ 111,391	(16,955)

II. Comparative Balance Sheet (continued)

d. Account Receivable Other (continued)

	Ending Balance		Increase/(Decrease)
	January 31, 2021	February 28, 2021	February
Title XX Social Services	\$ 822,257	\$ 870,625	48,368
TANFF to Title XX Block Grant	99,778	79,543	(20,235)
DSHS SAPT Block Grant - SA/OSR	31,788	19,448	(12,340)
Enhanced Community Coordinator	2,395,577	2,536,498	140,921
DSHS Mental Health First Aid	31,181	40,967	9,786
HHSC ZEST - Zero Suicide	48,465	69,914	21,449
HCC Open Door	235,516	677,196	441,680
HCS	22,416	22,416	-
TX Home Living Waiver	(123,180)	(137,685)	(14,505)
Federal DSHS Disaster Assistance	813,887	1,155,049	341,162
Helpline Contracts	79,880	79,088	(792)
City of Houston - CCSI	50,537	75,805	25,268
City of Houston - DMD	10,332	20,663	10,331
City of Houston - 911 CCD Amended	20,797	39,821	19,024
DARS - Autism	-	-	-
	<u>\$ 20,218,347</u>	<u>\$ 21,634,559</u>	<u>\$ 1,416,212</u>

- e. **A/R DSRIP** increased as the Center adjusted for DSRIP funding owed to the Center.
- f. **Unearned Income** decreased due to spending down unearned grant funds.
- g. **Accrued Payroll and Accounts Payable** increased because of payment timing related to accounts payable, payroll, and employee fringe benefit liabilities.
- h. **General Fund Balance** decreased as a result of operations.
- i. **Current Capital Projects** decreased as a result of funding various Board approved capital projects for fiscal year 2021.
- j. **Days of Operation in Reserve for Total Agency** is 162 days and for **Core Business** is 94 days versus 167 and 101 days for the prior month, respectively.

III. Investment Portfolio

- a. Total investments as of February 28, 2021 is \$95,795,588 of which 100% is in government pools (Texas Class 55% and TexPool 45%).
- b. Investments this month yielded interest income of \$8,133.

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD
INVESTMENT PORTFOLIO
February 28, 2021

Issuer	CUSIP/ Security #	Book Value Cost	Transfer In Txpool/ TX Class	Transfer Out Tx pool/ TX Class	Interest Txpool/ TX Class	Allowance Unrealized G/L	Market Value Ending Balance	Market Value Beginning Balance	Portfolio %	Interest Accrual	Coupon Rate	Settlement Date
GOVERNMENT POOLS												
TEXAS CLASS - GF G/L 120700		61,703,613	-	(9,000,000)	5,006		52,708,619		55.02%		0.1209%	
TEXPOOL ISF G/L 120610		2,288,702	-	-	76		2,288,778		2.39%		0.0793%	
TEXPOOL GF G/L 120600		1,001,480	-	-	33		1,001,513		1.05%		0.0793%	
TEXPOOL PRIME G/L 120620		39,793,708	-	-	2,970		39,796,678		41.54%		0.1192%	
Subtotal Texpool		43,083,890	-	-	3,079		43,086,969		44.98%			
Subtotal Government Pools		104,787,503	-	(9,000,000)	8,085		95,795,588		100.00%			
TOTAL INVESTMENTS		\$ 104,787,503	\$ -	\$ (9,000,000)	\$ 8,085	\$ -	\$ 95,795,588		100.00%			

Total Investment Interest G/L 409000 & 409005
Depository Bank Interest G/L 409000
Total Interest

8,085
48
\$ 8,133

3 Month Weighted Average Maturity (Days)
3 Month Weighted Average Yield
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 weeks)

1.00
0.1165%
0.0626%

EXHIBIT F-4



Highlights from HHSC COVID-19 Fiscal Impact Report

Update for the Resource Committee

March 16, 2021

Sean Kim

Chief Financial & Administrative Officer

February 2021 vs. FY2019 Monthly Average



Transforming Lives

Overview

- HHSC developed the COVID-19 Fiscal Impact Report to assess statewide financial impact of the pandemic
- Reports are due monthly for the duration of the pandemic
- Compares recent month Revenues/Expenses to FY2019 monthly average Revenues/Expenses
- Reports will inform decisions on the allocation of potential funding to offset costs/revenue losses

Revenue/Expense Categories with Material Variances

Revenue/Expense Category	FY2019 Ave Monthly	February 2021	Feb 2021 Variance	March to Feb Variance	Details
Employer Paid Time Off (EPTO)	\$ 0	\$ 7,163	(\$ 7,163)	(\$ 301,504)	• COVID-19 positive employees in High-Risk Units
Equipment	\$ 463,795	\$ 709,463	(\$ 245,668)	(\$ 1,369,128)	• Increased IT expenses in FY2021
Supplies	\$ 2,108,104	\$ 1,416,467	\$ 691,637	\$ 3,373,423	• Lower PPE prices, reduction in office supplies
3 rd Party Billing Revenue	\$ 3,226,189	\$ 2,879,423	(\$ 346,766)	(\$ 1,966,481)	• Winter storms caused power and water issues
			SUB-TOTAL	(\$ 263,690)	
			Continuous Care Performance Awards – Sep 2020	(\$ 1,786,540)	
			TOTAL	(\$ 2,050,231)	

Looking Forward

- EPTO has generally trended downward from peak in July 2020
- Equipment/software expenses are expected to stabilize throughout FY2021 other than Epic equipment upgrade (FY2021 Capital)
- PPE purchases will continue in order to maintain adequate reserve of masks, gloves, etc.

EXHIBIT F-5

March 2021
NEW CONTRACTS OVER 50k



Executive Contract Summary

Contract Section

Contractor*

IRIS Telehealth

Contract ID #*

2021-0079

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

IRIS Telehealth and The Harris Center for Mental Health and IDD Services

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other Grant

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

4/1/2021

Contract Term End Date* (?)

3/31/2023

If contract is off-cycle, specify the contract term (?)

Two-year agreement from Date of Execution

Fiscal Year* (?)

2021

Amount* (?)

\$ 300,000.00

Funding Source*

Federal Grant

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

SAMSHA Grant:

Physician Recruitment Service will provide two psychiatrists at a rate of \$185 per hour; 40 hours per week to assess Harris Center clients in the Adult Outpatient Telepsychiatry Program. The agreement is 2 years from the date of execution.

Contract Owner*

Lesleigh Robertson

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Grant, CCBHC Final.pdf

4.97MB

Vendor/Contractor Contact Person

Name*

Eric Prickett, Clinical Partnership Director

Address*

Street Address

7400 West 130th Street

Address Line 2

City

Overland Park

State / Province / Region

KS

Postal / Zip Code

66213-2715

Country

US

Phone Number*

913 905 3844

Email*

eric.prickett@iristelehealth.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

1a

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1108	\$ 300,000.00	543011
Budget Manager	Secondary Budget Manager	
BROWN, ERICA S.	CAMPBELL, RICARDO	

Provide Rate and Rate Descriptions if applicable* (?)

\$185/hr - 40 hours/week

Project WBS (Work Breakdown Structure* (?)

Same rate for both psychiatrists

Requester Name	Submission Date
SHELBY, DEBBIE C	2/23/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date
2/23/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Lesleigh Robertson

Approval Date
2/24/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shasthya Behu

Approval Date*
2/24/2021

EXHIBIT F-6

March 2021
RENEWALS OVER 50k

			CONTRACT RENEWALS *CROSS FISCAL YEAR CONTRACT RENEWALS *MULTI-YEAR CONTRACT RENEWALS						
	CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	FY2020 NTE AMOUNT	FY2021 NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	ADMINISTRATION								
	CRISIS SERVICES								
	FORENSICS								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI								
	INTERLOCALS								
	LEASES								
	MENTAL HEALTH SERVICES								
	PROGRAM MANAGEMENT								
	<i>CROSS FISCAL YEAR CONTRACT RENEWALS</i>								
	ADMINISTRATION								
1	Centre Technologies, Inc.	No	Dell Compellent Support Services	\$74,555.17	\$74,100.68	05/01/21- 05/31/22	GR		Dell Compellent Support Renewal for Data Center Equipment

**EVALUATION AND RENEWAL FORM
FY 2021/2022 CONTRACTS PROCESS**

The current FY20/21 information is provided below. Please evaluate the contractor’s performance, and advise whether or not the contract is being renewed for the ensuing year. Please respond to the questions contained herein if applicable for FY2021/FY2022. In the event of non-renewal, please provide the reason.

A. FY 2020/2021 CONTRACT INFORMATION – NO CHANGES ARE ALLOWED IN THIS SECTION

Contract ID#:	6527
New Database ID#:	N/A
Contractor Name:	Centre Technologies, Inc.
Service (brief description):	Dell Compellent Support Renewal for Data Center Equipment
Contract NTE (your current budget):	\$74,555.17
Responsible Staff Person:	Mustafa Cochinwala
Rate(s)/Rate(s) Description:	Quote Required
Unit(s) Served:	1130
G/L Code(s):	553001, 553002
FY20 Purchase Order Number:	CT140130

B. EVALUATION OF FY20/21 PERFORMANCE:

1. Have there been any significant performance deficiencies within FY20/FY21? (Y)___ (N) X__.
2. Were Services delivered as specified in the contract? (Y)X__ (N) ___.
3. Did Contractor perform duties in a manner consistent with standards of the profession? (Y)X__ (N) ___.
4. Did Contractor adhere to the contracted schedule (if applicable)? (Y) X__ (N) ___.
5. Were reports, billing and/or invoices submitted in a timely manner? (Y) X__ (N) ___.
6. Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? (Y) X__ (N) ___.
7. Did Contractor render services consistent with Agency policy and procedures? (Y) X__ (N) ___.
8. Maintained legally required standards for certification, licensure, and/or training? (Y) X__ (N) ___.

IF ANY RESPONSE IS NO, PLEASE PROVIDE THE REASON. ATTACH AN ADDITIONAL PAGE IF NECESSARY.

C. RENEWAL DETERMINATION:

1. Is the contract being renewed for FY2021/FY2022 with this Contractor? (Y) X__ (N) ___.
2. REASON:

Please give a reason for any non-renewal, sign and return this form via email to the Contracts Services Department. [DO NOT ANSWER QUESTIONS IN SECTIONS D, E, and F.]

**EVALUATION AND RENEWAL FORM
FY 2021/2022 CONTRACTS PROCESS**

The current FY20/21 information is provided below. Please evaluate the contractor's performance, and advise whether or not the contract is being renewed for the ensuing year. Please respond to the questions contained herein if applicable for FY2021/FY2022. In the event of non-renewal, please provide the reason.

A. FY 2020/2021 CONTRACT INFORMATION – NO CHANGES ARE ALLOWED IN THIS SECTION

Contract ID#:	7167
New Database ID#:	N/A
Contractor Name:	Critical Start LLC
Service (brief description):	Varonis Software Subscription
Contract NTE (your current budget):	\$188,903.41
Responsible Staff Person:	Wes Farris
Rate(s)/Rate(s) Description:	Quote #Q-01313 - (3) year term (4/30/2020 – 4/29/2023). Total cost - \$747,672.79. Year 1 Total (2020) = \$188,903.41 Year 2 Total (2021) = \$279,384.69 Year 3 Total (2022) = \$279,384.69
Unit(s) Served:	1130
G/L Code(s):	553002
FY20 Purchase Order Number:	CT140226

B. EVALUATION OF FY20/21 PERFORMANCE:

1. Have there been any significant performance deficiencies within FY20/FY21? (Y) ___ (N) X .
2. Were Services delivered as specified in the contract? (Y) X (N) ___ .
3. Did Contractor perform duties in a manner consistent with standards of the profession? (Y) X (N) ___ .
4. Did Contractor adhere to the contracted schedule (if applicable)? (Y) X (N) ___ .
5. Were reports, billing and/or invoices submitted in a timely manner? (Y) X (N) ___ .
6. Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? (Y) X (N) ___ .
7. Did Contractor render services consistent with Agency policy and procedures? (Y) X (N) ___ .
8. Maintained legally required standards for certification, licensure, and/or training? (Y) X (N) ___ .

IF ANY RESPONSE IS NO, PLEASE PROVIDE THE REASON. ATTACH AN ADDITIONAL PAGE IF NECESSARY.

C. RENEWAL DETERMINATION:

1. Is the contract being renewed for FY2021/FY2022 with this Contractor? (Y) X (N) ___ .
2. REASON:

Please give a reason for any non-renewal, sign and return this form via email to the Contracts Services Department. [DO NOT ANSWER QUESTIONS IN SECTIONS D, E, and F.]

D. RENEWAL INFORMATION FOR FY2020/FY2021:

Please provide the NTE for FY21/FY22: \$279,384.69. FY21/FY22 Rate(s) _____
UNIT 1130 GL CODE 553002.

Off-Cycle Breakdown Funding Period if Applicable	Contract Amount
FY21	

List all applicable Units/GL codes. Attach additional pages if necessary. [Please verify with Budget Manager].

FY 2021/FY 2022 Not to Exceed Amount for Master Pooled Contracts: N/A.

E. CONTRACT FUNDING SOURCE: GR [GR/STATE/FEDERAL/GRANT/PRIVATE/COUNTY]

F. CONTRACT CONTENT CHANGES:

1. Are there any required changes to the contract language? [i.e. Changes in law or updates to the Service standards] (Y) _____ or (N) X
2. Will the scope of the Services change? (Y) _____ or (N) X
3. Is the payment deadline different than net (30)? If so, please provide the due date _____ [i.e. net 45, net 10].
4. Are there any changes in the Performance Targets change? (Y) _____ or (N) X
5. Are there any changes to the Submission deadlines for notes or supporting documentation? (Y) _____ or (N) X

IF YES, PLEASE ATTACH ADDITIONAL PAGES IF NECESSARY.

G. RESPONSIBLE PARTY:

Please state the name of the Contract Owner and/or Department Chief/VP/Director for this contract M. COCHINWALA.

Please state the name of the Responsible Party or Staff that will review and approve monthly invoices for this contract HURST/BOSWELL/FARRIS.

APPROVALS:

Budget Manager: Ricardo Campbell 03/03/21 (Printed Name)

Ricardo Campbell (Signature). REQUIRED

Contract Owner/Department Head: RICK HURST (Printed Name)

[Signature] (Signature). REQUIRED

PLEASE RETURN COMPLETED FORM AND ATTACHMENTS TO shaskyia.behn@theharriscenter.org and contactservices@theharriscenter.org. Call Extension 7230 with any questions.

EXHIBIT F-7

March 2021
AMENDMENTS OVER 50k

Contract Section **Contractor***

Kronos Inc,

Contract ID #*

6685

Presented To*

- Resource Committee
 Full Board

Date Presented*

3/16/2021

Parties* (?)

Kronos Inc, and The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
 Board Approval (Total NTE Amount is \$50,000.00+)
 Grant Proposal
 Revenue
 Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|---|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input type="checkbox"/> Request for Proposal | <input type="checkbox"/> Sole Source |
| <input type="checkbox"/> Request for Application | <input type="checkbox"/> Request for Qualification |
| <input type="checkbox"/> Request for Quote | <input checked="" type="checkbox"/> Tag-On |
| <input type="checkbox"/> Interlocal | <input type="checkbox"/> Consumer Driven |
| <input type="checkbox"/> Not Applicable (If there are no funds required) | <input type="checkbox"/> Other <input type="text"/> |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

9/1/2020

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

N/A

Current Contract Amount*

\$ 373,396.95

Increase Not to Exceed*

\$ 6,986.70

Revised Total Not to Exceed (NTE)*

\$ 380,383.65

Fiscal Year* (?)

Amount* (?)

2021

\$ 380,383.65

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other Hardware

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Additional Kronos Clock are required at the Southmore Jackson Street locations

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

9/1/2020 - 8/31/2021

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

HARRIS CENTER 2 H4 SMART CARD, CORD Q679478-SO pre-signed.pdf 143.55KB

Vendor/Contractor Contact Person

Name*

Gerry Connors

Address*

Street Address

900 Chelmsford St

Address Line 2

City

Lowell

Postal / Zip Code

01851

State / Province / Region

MA

Country

Middlesex

Phone Number*

727-512-1904

1a

Email*

gerald.connors@ukg.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9810	\$ 3,208.35	551001

Budget Manager OSHMAN, JODEL	Secondary Budget Manager KORNMEYER, KIMBERLY A
--	--

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9810	\$ 285.00	553001

Budget Manager OSHMAN, JODEL	Secondary Budget Manager KORNMEYER, KIMBERLY A
--	--

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9247	\$ 3,208.35	551001

Budget Manager OSHMAN, JODEL	Secondary Budget Manager KORNMEYER, KIMBERLY A
--	--

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9247	\$ 285.00	551001

Budget Manager OSHMAN, JODEL	Secondary Budget Manager KORNMEYER, KIMBERLY A
--	--

Provide Rate and Rate Descriptions if applicable* (?)

2 Kronos clocks @ \$3,208.35 each = \$6,416.70
2 Maintenance & Support @ \$285.00 each = \$570.00

Project WBS (Work Breakdown Structure* (?)

N/A

Requester Name JONES, ANTHONY	Submission Date 2/10/2021
---	-------------------------------------

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date
2/10/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

1b

Approved by

Mustafa Cochunwala

Approval Date

2/11/2021

Contracts Approval

Approve *

- Yes
- No, reject entire submission
- Return for correction

Approved by *

Shashya Behn

Approval Date *

2/11/2021

1c

EXHIBIT F-8



**BOARD AUTHORIZATION TO PURCHASE and DUE DILIGENCE
KIOSKS for EPIC**

A request from Information Technology (IT) to purchase Kiosks for the EPIC Welcome patient-centered registration process was received in January 2021. This is an FY21 budgeted project that will accommodate higher volumes of patients without longer lines or changes in the front desk staffing. Individuals can start registration at home with MyChart and finish up at the Welcome self-service Kiosk after arriving to the clinic.

Quotes were requested of five vendors. The vendors are DynaTouch Interactive Technologies, CTS Connected Technology Services, Pioneer Solution Incorporated, Olea Kiosks Incorporated and value added reseller SHI Government Solutions. One of the vendors, SHI Government Solutions, is HUB certified. Three vendors, CTS Connected Technology Solutions, Olea Kiosks Incorporated and SHI Government Solutions provided quotes. The different brands submitted from these three vendors are CTS, Howard and Olea. IT decided to move forward with purchasing CTS branded Kiosks, because of their functionality, scalability and design. In addition, the CTS branded Kiosks best represent the vision and mission of The Harris Center.

CTS branded Kiosks can be procured directly from the manufacturer, CTS Connected Technology Solutions or through SHI Government Solutions, a vendor that is a part of the Texas Association of School Boards BuyBoard Purchasing Cooperative. Purchasing attempted to utilize the tagon contract with SHI Government Solutions but after numerous requests/attempts SHI could not lower their quote to be competitive with CTS Connected Technology Solutions. The quote from SHI is \$127,195.70, which is roughly 14% higher than the CTS quote of \$111,440.00. Therefore, since CTS Technology Solutions' quote is lower than the tag on quote option, it is recommended to move forward with procurement of product from CTS Technology Solutions

Purchase:

- **Vendor – CTS Connected Technology Solutions**
- Amount - \$111,440.00
- Funding Source – 1147 IT Infrastructure
- NTE -\$111,440.00

Due to time constraints of eleven (11) weeks lead-time and to avoid delay of the EPIC Welcome Module Rollout, Board approval is requested to proceed with the purchase without further procurement for Kiosks for the EPIC Welcome patient-centered registration process for agency staff from CTS Connected Technology Solutions. Board approval is also requested to authorize the Chief Executive Officer and or his designee signature authority for IT purchases in the event the Chief Executive Officer is absent. The funding source is IT Infrastructure (1147).

A handwritten signature in black ink, appearing to be "Frances Otto", written over a horizontal line.

Frances Otto, CTCD
Buyer II

 A handwritten signature in blue ink, appearing to be "Nina Cook", written over a horizontal line.

Nina Cook, MBA, CTPM
Director of Purchasing

 A handwritten signature in blue ink, appearing to be "Sean Kim", written over a horizontal line.

Sean Kim, MBA, CPA
Chief Financial and Administrative Officer

EXHIBIT F-9

March 2021
NEW CONTRACTS UNDER 50k

FY21 NEW CONTRACTS		*CROSS FISCAL YEAR CONTRACTS		*MULTI-YEAR CONTRACTS					
CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS	
ADMINISTRATION									
1	ABC Affordable Housing Service, LLC	No	811 HUD Properties		\$5,000.00	03/22/21- 05/22/21	GR	RFQ	The Harris Center is the sponsor of four 811 HUD properties. The majority of the properties are in financial deficits due to aging properties, operational costs, and lack of rent increases. In order for The Harris Center to budget funds to subsidize the properties, The Harris Center needs consultation regarding its role and responsibilities as the sponsor, specifically around subsidizing losses, capital expenditures, and potential options.
2	Geaux 2 Group, LLC	No	Consulting Service		\$2,500.00	03/01/21- 08/31/21	FM21.1126.21	Sole Source	A request from Facilities Services to contract for a Consulting Service for RFP Response in February 2021. The Consultant will assist the Facilities Services Department with reviewing all proposals submitted in response to the Multi-Facility Building Automation System RFP.
3	Houston Community College	No	Certified Medical Assistant Program		\$45,000.00	02/12/21- 08/31/21	State Grant	Grant	Tuition for twelve (12) psych technicians to receive their Certified Medical Assistant (CMA) certification.
4	LandTech, Inc.	Yes	Survey of Facility		\$5,800.00	03/01/21- 08/31/21	GR	Sole Source	Purchasing received a request from Facilities on February 3, 2021, to survey area of concern for the interior and exterior at 9401 SW Freeway loading dock and mailroom to determine if there are foundation issues. The justification for a single source vendor is based on the vendor performing the initial survey in 2017 and having all the information needed for a comparison.
5	PHActory Consulting	No	Consulting Service		\$39,000.00	03/01/21- 08/31/21	GR	RFQ	Mr. Gunsolley primary role initially will be to help us navigate the City Housing process to secure funding for the gap between the cost and our HHSC funding to build the 24 unit apartment complex at 6160 site.
6	Superior Health Plan	No	Temperature Scanning Kiosks		\$2,000.00	02/01/21- 08/31/21	State Grant	N/A	For the general support of purchasing two (2) temperature scanning kiosks.
CRISIS SERVICES									
7	Emergency Temporary Housing (Master Pool)	No	Emergency Housing Services		\$6,000.00	02/03/21- 08/31/21	Reallocated from CT140616 P-Housing	N/A	The CCAP program will contract with vendors who provide Temporary emergency Housing for up to 21 days. The vendor will provide emergency services pursuant to National and Local Emergency Declarations for "COVID-19" and the "Winter Storm". Persona may transition into longer term housing programs under the CCAP program. A new PO will be created after reallocating from the existing CCAP Pooled NTE P-Housing and Transition Pool in the amount of \$6,000.00.
8	Angelica Padilla dba Lice Care Solutions, LLC	No	Lice Removal Services		\$5,000.00	02/09/21- 08/31/21	State Grant	RFQ	To provide lice removal services for Consumers at NPC and the Respite, Rehabilitation and Re-Entry Center Sites.
FORENSICS									



Executive Contract Summary

Contract Section



Contractor*

ABC Affordable Housing Services, LLC

Contract ID #*

2021-0080

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

The Harris Center and ABC Affordable Housing

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

3/22/2021

Contract Term End Date* (?)

5/22/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 5,000.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

The Harris Center is the sponsor of four 811 HUD properties. The majority of the properties are in financial deficits due to aging properties, operational costs, and lack of rent increases. In order for The Harris Center to budget funds to subsidize the properties, The Harris Center needs consultation regarding it's role and responsibilities as the sponsor, specifically around subsidizing losses, capital expenditures, and potential options.

Contract Owner*

Scott Rule

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Please provide an explanation*

ABC Affordable Housing Services, LLC., is not certified at this time.

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

HUD Section 811 Consultant Search20210129.docx 1.96MB

Vendor/Contractor Contact Person

Name*

Charina Allen-Beasley

Address*

Street Address

P.O. Box 662

Address Line 2

City

League City

Postal / Zip Code

77574-0662

State / Province / Region

Texas

Country

Galveston

Phone Number*

409-457-9907

Email*

cbeasley@abcaffordablehousing.com

Budget Section

1a

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1101	\$ 5,000.00	542000

Budget Manager	Secondary Budget Manager
BROWN, ERICA S.	CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)

\$135 hr; NTE 25 hrs (\$3,375.00)
Contingency \$1,625

Project WBS (Work Breakdown Structure* (?)

Comprehensive Analysis of the four (4) 811 HUD properties that includes the scope items below. The analysis must include or provide the regulatory authority(s) and code(s) to substantiate all statements regarding scope items 1 - 4.

1. The Harris Center's role and responsibilities as the Sponsor, specifically around subsidizing operating losses and capital expenditures; include options for improving operational efficiencies
2. Audit the properties' financial management and provide advice on potential efficiencies and on ability to increase rents for the units; include options for reducing financial deficits
3. Provide alternatives for disposition of the properties to another non-profit or entity as the Sponsor.
4. Financial consequence of divesting the properties, should The Harris Center determines that the properties are not sustainable operationally or financially.

Requester Name	Submission Date
RICHARDSON, MARIA	2/3/2021

Budget Manager Approval(s) ^

Approved by	Approval Date
<i>Erica Brown</i>	2/3/2021

Procurement Approval ^

Approved by	Approval Date
<i>Nina Cook</i>	2/3/2021

Contract Owner Approval ^

Approved by	Approval Date
<i>Scott D Rule</i>	2/9/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shaskyia Behm

Approval Date*

2/9/2021

lc



Executive Contract Summary

Contract Section



Contractor*

Geaux 2 Group

Contract ID #*

2021-0081

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Geaux 2 Group and The Harris Center

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

3/1/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 2,500.00

Funding Source*

General Revenue (GR)

2

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Assist Facility Services staff with review of Building Automation System RFP responses and provide input on vendor recommendation

Contract Owner*

Todd McCorquodale

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

FY2021 - asset collection services

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Please provide an explanation*

does not meet requirements

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Geaux2Group Proposal for BAS eval.pdf

59.74KB

Vendor/Contractor Contact Person

Name*

Geaux 2 Group / Brandon Firor

Address*

Street Address

31803 Tree Farm Lane

Address Line 2

City

Fulshear

Postal / Zip Code

77441-4384

State / Province / Region

TX

Country

US

Phone Number*

8325158538

Email*

brandon@geaux2group.com

Budget Section

2a

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1126	\$ 2,500.00	900040
Budget Manager BROWN, ERICA S.		Secondary Budget Manager CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)
see attached proposal

Project WBS (Work Breakdown Structure* (?)
FM21.1126.21

Requester Name HARPER, SARAH A	Submission Date 2/10/2021
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Budget Manager Approval(s)

Approved by <i>Erica Brown</i>	Approval Date 2/10/2021
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Procurement Approval

Approved by <i>Sharon Brauner</i>	Approval Date 2/10/2021
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Contract Owner Approval

Approved by <i>Todd McCorquodale</i>	Approval Date 2/10/2021
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Contracts Approval

- Approve*
- Yes
 - No, reject entire submission
 - Return for correction

Approved by* <i>Shaskyia Behm</i>	Approval Date* 2/11/2021
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**BOARD AUTHORIZATION TO PURCHASE and DUE DILIGENCE
CONSULTING SERVICE FOR RFP RESPONSE**

A request from Facilities Services to contract for a Consulting Service for RFP Response in February 2021. The Consultant will assist the Facilities Services Department with reviewing all proposals submitted in response to the Multi-Facility Building Automation System RFP.

The vendor, Geaux 2 Group, LLC submitted a quote for \$2,500.00.

Contract:

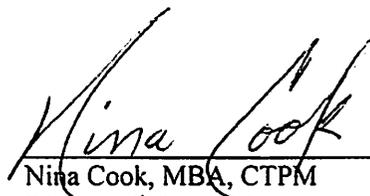
- **Vendor – Geaux 2 Group**
- **Amount - \$ 2,500.00**
- **Funding Source – 1126 – Facilities Services Infrastructure Project**
- **NTE - \$ 2,500.00**

The will be an off cycle contract anticipated to begin upon award of contract until August 31, 2021. The contract shall commence with a tentative commencement date, and shall remain in effect unless terminated, canceled or extended.

The Fiscal Year 2021 budget is \$2,500.00, subject to the appropriation and availability of funds. The funding source is Facilities Services Infrastructure Project (1126).



Frances Otto, CTCD
Buyer II



Nina Cook, MBA, CTPM
Director of Purchasing



Sean Kim, MBA, CPA
Chief Financial and Administrative Office



Executive Contract Summary

Contract Section



Contractor*

HOUSTON COMMUNITY COLLEGE CMA PROGRAM

Contract ID #*

NA

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

THE HARRIS CENTER AND HOUSTON COMMUNITY COLLEGE CMA PROGRAM

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other GRANT

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/12/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 45,000.00

Funding Source*

State Grant

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Tuition for twelve (12) psych technicians to receive their Certified Medical Assistant (CMA) certification.

Contract Owner*

Deborah Sweat

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Please provide an explanation*

N/A

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

RAMON VILLEGAS

Address*

Street Address

1900 Pressler, Suite #224

Address Line 2

City

HOUSTON

State / Province / Region

TX

Postal / Zip Code

77030

Country

UNITED STATES

Phone Number*

713-718-6518

Email*

ramon.villegas1@hccs.edu

Budget Section

Budget Units and Amounts Charged to each Budget Unit

3a

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1153	\$ 45,000.00	541013
Budget Manager	Secondary Budget Manager	
BROWN, ERICA S.	CAMPBELL, RICARDO	

Provide Rate and Rate Descriptions if applicable* (?)

\$45,000

Project WBS (Work Breakdown Structure* (?)

N/A

Requester Name

ARCENEUX, LINDA M.

Submission Date

2/12/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

2/12/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

D. Sweet

Approval Date

2/12/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Belinda Stude

Approval Date*

2/16/2021



Executive Contract Summary

Contract Section



Contractor*

Landtech, Inc

Contract ID #*

2021-0090

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Landtech Inc and The Harris Center

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other vendor completed survey of facility in 2017

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

3/1/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 5,800.00

Funding Source*

General Revenue (GR)

H

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Landtech, Inc. will perform a survey of the exterior and interior area at 9401 SW Freeway loading dock and mailroom to determine if there are foundation issues. Follow up to the survey they conducted in 2017

Contract Owner*

Todd McCorquodale

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

08/2013 to 217 - civil engineering survey

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Please provide an explanation*

does not meet requirements

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Landtech quote_20210125_113749.pdf 457.59KB

Vendor/Contractor Contact Person

Name*

Landtech, Inc. / Paul Kwan

Address*

Street Address

2525 North Loop West, Ste 300

Address Line 2

City

Houston

Postal / Zip Code

77008

State / Province / Region

TX

Country

US

Phone Number*

7138617068

Email*

pkwan@landtech-inc.com

Budget Section

Ha

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1817	\$ 5,800.00	557001

Budget Manager	Secondary Budget Manager
BROWN, ERICA S.	CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)
see attached proposal

Project WBS (Work Breakdown Structure* (?)
n/a

Requester Name	Submission Date
HARPER, SARAH A	2/24/2021

Budget Manager Approval(s)

Approved by	Approval Date
<i>Erica Brown</i>	2/24/2021

Procurement Approval

Approved by	Approval Date
<i>Sharon Brauner</i>	2/25/2021

Contract Owner Approval

Approved by	Approval Date
<i>Todd McCorquodale</i>	3/1/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*	Approval Date*
<i>Shaskyia Behn</i>	3/1/2021



**Due Diligence for 9401 Southwest Freeway Survey of Facility
Project# PUR-FY21-0155**

Purchasing received a request from Facilities on February 3, 2021, to survey areas of concern for the interior and exterior at 9401 SW Freeway.

The justification for a single source vendor is based on the vendor performing the initial survey in 2017 and have all the information needed for a comparison. The vendor is Landtech and they are a Historically Underutilized Business (HUB).

One (1) vendor quotes was received:

- 1. LandTech - \$5,800.00
Total NTE \$5,800.00

Facility Services recommendation is to move forward with the vendor.

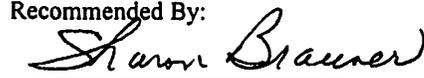
NTE: (Not to Exceed) \$5,800.00
Total NTE: \$5,800.00

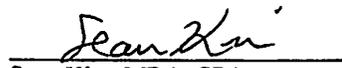
The Funding Source is Unit# 1817, GL Account# 557001

Submitted By:


James Blunt, C.P.M.
Buyer II

Recommended By:


Sharon Brauner, C.P.M., A.P.P.
Purchasing Manager


Sean Kim, MBA, CPA
Chief Financial and Administrative Officer

HC



Executive Contract Summary

Contract Section

Contractor*

PHActory Consulting-Tory Gunsolley

Contract ID #*

2021-0082

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

The Harris Center for Mental Health and IDD
PhActory Consulting

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

3/1/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 39,000.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Mr. Gunsolley primary role initially will be to help us navigate the City Housing process to secure funding for the gap between the cost and our HCC funding.

Contract Owner*

Wayne Young

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

PHActory Consulting

Address*

Street Address

14511 Broadgreen Drive

Address Line 2

City

Houston

Postal / Zip Code

77079-6505

State / Province / Region

TX

Country

US

Phone Number*

713-998-3577

Email*

tgunsolley@PHActoryConsulting.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

5a

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1101	\$ 39,000.00	542000
Budget Manager	Secondary Budget Manager	
BROWN, ERICA S.	CAMPBELL, RICARDO	

Provide Rate and Rate Descriptions if applicable* (?)

Straight rate of \$195 per hour/ NTE \$39,000.00

Project WBS (Work Breakdown Structure* (?)

n/a

Requester Name	Submission Date
FRANCO, VERONICA A	2/22/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date
2/22/2021

Procurement Approval

Approved by

Sharon Brauner

Approval Date
2/25/2021

Contract Owner Approval

Approved by

[Signature]

Approval Date
2/25/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shasthya Behn

Approval Date*
2/25/2021



Executive Contract Summary

Contract Section



Contractor*

Superior Health Plan

Contract ID #*

2021-0086

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Superior Health Plan and The Harris Center

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/1/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 2,000.00

Funding Source*

State Grant

60

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other **Grant Agreement**

Justification/Purpose of Contract/Description of Services Being Provided* (?)

For the general support of purchasing two (2) temperature scanning kiosks.

Contract Owner*

Anthony Robinson

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

On going for managed care

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Timothy Do

Address*

Street Address

11700 Katy Fwy

Address Line 2

Ste. 700

City

Katy

Postal / Zip Code

77494

State / Province / Region

TX

Country

US

Phone Number*

1 (800)656-4817

Email*

Timothy.Do@superiorhealthplan.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

6a

Budget Unit Number*

2379

Amount Charged to Unit*

\$ 2,000.00

Expense/GL Code No.*

549001

Budget Manager

CAMPBELL, RICARDO

Secondary Budget Manager

BROWN, ERICA S.

Provide Rate and Rate Descriptions if applicable* (?)

N/A

Project WBS (Work Breakdown Structure* (?)

N/A

Requester Name

MACKINNEY, EGGLA

Submission Date

2/4/2021

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

2/4/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

D. Anthony Robinson

Approval Date

2/10/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shaskeyia Behu

Approval Date*

2/11/2021

6b



Executive Contract Summary

Contract Section



Contractor*

Emergency Temporary Housing (ETH) Master Pool

Contract ID #*

2021-0071

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Emergency Temporary Housing (ETH) Master Pool & The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/3/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 6,000.00

Funding Source*

Private Pay Source

7

Contract Description / Type * (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided * (?)

The CCAP program will contract with vendors who provide emergency housing services to individuals served on the program for up to 21 days. Individuals will be placed in ETH when a vendor under contract is unable to accommodate the individual immediately due to factors related to the pandemic and/or level of care needed/available. A new PO will be created for the ESH pool in the amount of NTE \$6000.00. The funding will be pulled from PO CT140616 P-Housing and Transition Master Pool.

Contract Owner *

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor *

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB) * (?)

Yes No Unknown

Community Partnership * (?)

Yes No Unknown

Specify Name *

Emergency Temporary Housing

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name *

Amber Honsinger

Address *

Street Address

9401 Southwest Freeway

Address Line 2

City

Houston

Postal / Zip Code

77074

State / Province / Region

TX

Country

United States

Phone Number *

7139707514

Email *

amber.honsinger@theharriscenter.org

Budget Section

7a

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
9238	\$ 6,000.00	595031

Budget Manager	Secondary Budget Manager
OSHMAN, JODEL	KORNMEYER, KIMBERLY A

Provide Rate and Rate Descriptions if applicable * (?)

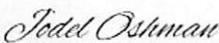
\$22.00 Per day or \$462.00 for full 21 days

Project WBS (Work Breakdown Structure * (?)

NA

Requester Name	Submission Date
SINGH, PATRICIA R.	2/3/2021

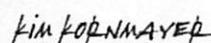
Budget Manager Approval(s)

Approved by	Approval Date
	2/3/2021

Procurement Approval

Approved by	Approval Date
 Sign	

Contract Owner Approval

Approved by	Approval Date
	2/3/2021

Contracts Approval

- Approve ***
- Yes
 - No, reject entire submission
 - Return for correction

Approved by *	Approval Date *
	2/3/2021

7b



Executive Contract Summary

Contract Section

**Contractor***

Lice Care Solutions

Contract ID #*

2021-0078

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Lice Care Solutions & The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/9/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 5,000.00

Funding Source*

State Grant

8

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

To provide lice removal services for consumers at the NPC and the Respite, Rehabilitation and Re-Entry Center. Lice removal is a time-consuming process and the two locations noted do to have the manpower to dedicate to this service. There are professionals in the area who perform this task and it would be well worth the cost to help rid a person served of lice.

Contract Owner*

Evelyn Locklin

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Lice Care Service Proposal (Jan 27-2021) (1).pdf	8.65MB
Lice Care Service Proposal (Jan 27-2021) (1).pdf	8.65MB

Vendor/Contractor Contact Person

Name*

Angelica Padilla

Address*

Street Address

3262 Westheimer Road

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77098

Country

US

Phone Number*

713-732-7407

Email*

lea@licecaresolutions.com

Budget Section

Ja

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9403	\$ 5,000.00	543053
Budget Manager RAMIREZ, PRISCILLA M		Secondary Budget Manager OSHMANN, JODEL

Provide Rate and Rate Descriptions if applicable* (?)

\$180 First hour (Includes the \$55 Dollars travel fee, the metal comb, and education services) \$125 for each additional hour

Project WBS (Work Breakdown Structure* (?)

NA

Requester Name SINGH, PATRICIA R.	Submission Date 2/9/2021
---	------------------------------------

Budget Manager Approval(s)

Approved by

<i>Priscilla M. Ramirez</i>	Approval Date 2/9/2021
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Procurement Approval

Approved by

<i>Sharon Brauner</i>	Approval Date 2/9/2021
-----------------------	----------------------------------

Contract Owner Approval

Approved by

<i>Evelyn U. Locklin</i>	Approval Date 2/9/2021
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Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

<i>Shaskyia Behn</i>	Approval Date* 2/9/2021
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Executive Contract Summary

Contract Section

Contractor*

Inmar

Contract ID #*

2021-0087

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Inmar and The Harris Center

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

4/1/2021

Contract Term End Date* (?)

3/31/2022

If contract is off-cycle, specify the contract term (?)

1 year

Fiscal Year* (?)

2021

Amount* (?)

\$ 7,166.00

Fiscal Year* (?)

2022

Amount* (?)

\$ 8,618.00

Funding Source *

State

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

To very pharmacy/The Harris Center is getting paid properly for RX's dispensed to patient with third party RX coverage/ Medicaid/Medicare Part D. To go live June 2021 post Epic conversion.

Contract Owner*

Angela Babin

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Jennie Richardson

Address*

Street Address

635 Vine Street

Address Line 2

City

Winston-Salem

Postal / Zip Code

27101

State / Province / Region

NC

Country

United States

Phone Number*

336.618.0014

Email*

jennie.richardson@inmar.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

9a

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1135	\$ 15,784.00	542000

Budget Manager	Secondary Budget Manager
CAMPBELL, RICARDO	BROWN, ERICA S.

Provide Rate and Rate Descriptions if applicable* (?)

Onboarding \$796 one time, \$224 per pharmacy per month for RX Recon and \$57 per pharmacy per month for data analytics. Contingency \$1500 (\$750 in each FY).

Project WBS (Work Breakdown Structure* (?)

Onboarding \$796 one time, \$224 per pharmacy per month for RX Recon and \$57 per pharmacy per month for data analytics. Contingency \$1500 (\$750 in each FY)

Requester Name	Submission Date
BABIN, ANGELA W	2/10/2021

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

2/10/2021

Procurement Approval

Approved by

Sharon Brauner

Approval Date

2/10/2021

Contract Owner Approval

Approved by

ANGELA BABIN

Approval Date

2/10/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shaskyia Behn

Approval Date*

2/12/2021



**Due Diligence Project PUR-FY20-0153
Third Party Reconciliation Services for Pharmacy RX Billing**

A request from Angie Babin, Pharmacy Director was received for Third Party Reconciliation Services for Pharmacy RX Billing on February 2, 2021.

This service is to verify The Harris Center pharmacy is getting paid properly for RX's dispensed to patients with third party RX coverage/Medicaid/Medicare Part D. This service is to go live in June 2021, post Epic conversion. The Epic team needs the Agency to select a vendor now to build any interfaces, communications, special considerations during the Epic Build Phase, even if we do not go live until April 2021.

Three (3) vendor quotes were provided:

INMAR –Onboarding \$224/per month/per pharmacy and a one-time fee: \$796.00 /RX Recon and RX Returns for a total of \$10,752.00+\$796.00=\$11,548.00, for interface and set up/support with Relay Health/Epic to ensure less problems with payers and 835 files. Analytics On Demand: \$57.00 per pharmacy/per month \$2,736.00

Freedom Data Services (FDS, Inc.) –\$234.00/per month/per pharmacy +.02 Claim Data fee from Relay + chase charges (\$5.00 per claim), and a .25 cent charge (\$5.00 min) for any EOB not sent electronically for an estimated total of \$11,232.00 + additional transaction fees

RECONRX – \$8,400.00 -\$175.00/per month/per pharmacy

All quotes and documentation were reviewed by the Pharmacy Director. Epic recommends Inmar as they provide services that the other companies does not. (Ex: Express Scripts, Medicare part D, Traditional state Medicaid) Based on the recommendation the vendor selected is:

INMAR

The contract period is for an initial period of performance at the sole discretion of The HARRIS CENTER. The contract shall commence with a tentative award date, and shall remain in effect unless terminated, canceled or extended, as otherwise provided herein, based upon satisfactory performance and service, with an initial period through 8/31/21, for a one (1) year term as follows:

NTE: \$14,284.00
Contingency: \$1,500.00
Grand Total: \$15,784.00

Funding Source: Unit 1135-542000

Submitted By:

Sharon Brauner, C.P.M., A.P.P.
Purchasing Manager

Recommended By:

Nina M. Cook, MBA, CTPM
Director of Purchasing

Sean Kim, MBA, CPA
Chief Financial and Administrative Officer

qc



Executive Contract Summary

Contract Section

**Contractor***

Behavioral Health Industry News, Inc. dba OPEN MINDS

Contract ID #*

2021-0074

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

The Harris Center for Mental Health and IDD
Behavioral Health Industry, News, Inc. dba OPEN MINDS

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/12/2021

Contract Term End Date* (?)

2/12/2022

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 28,160.00

Funding Source*

General Revenue (GR)

10

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Consulting Services shall be provided for the participation and facilitation of the Agency's Board of Directors Strategic Planning Process.

Contract Owner*

Wayne Young

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Behavioral Health Industry News, Inc. dba OPEN MINDS

Address*

Street Address

15 Lincoln Square

Address Line 2

City

Gettysburg

State / Province / Region

PA

Postal / Zip Code

17325

Country

US

Phone Number*

717-334-0538

Email*

info@openminds.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

10a

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1101	\$ 28,160.00	542000
Budget Manager		Secondary Budget Manager
BROWN, ERICA S.		CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)

Total Project Fee is \$28,160.00 for 110 Service hours.

- \$9,387.00 is due upon full execution of Agreement.
- \$9,387.00 is due on March 14, 2021 and upon receipt of invoice.
- Final payment of \$9,386.00 is due on April 14, 2021 and upon receipt of invoice.

Project WBS (Work Breakdown Structure* (?)

n/a

Requester Name	Submission Date
FRANCO, VERONICA A	2/22/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

2/22/2021

Procurement Approval

Approved by

Sharon Brauner

Approval Date

2/25/2021

Contract Owner Approval

Approved by

[Signature]

Approval Date

2/25/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

10b

Approved by*

Shaskyia Behn

Approval Date*

2/25/2021

10c

EXHIBIT F-10

March 2021

AMENDMENTS UNDER 50k

FY20 AMENDMENTS		*CROSS FISCAL YEAR AMENDMENTS		*MULTI-YEAR AMENDMENTS						
CONTRACTORS	HUB/MWBE	PRODUCT/SERVICE DESCRIPTION	PREVIOUS AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS	
ADMINISTRATION										
1	Dura Pier Facilities Sources, Ltd.	Yes	Asphalt Repairs/Striping	\$17,000.00	\$11,524.04	\$28,524.04	12/07/20- 08/31/21	GR	Tag-On	Damaged siding at the Humble location was replaced, and the exterior of the facility needs to be painted. The parking lot needs to be cleaned and striped for the new program. Additionally, the Amendment will extend the contract to the end of the fiscal year.
2	Legal Files Software, Inc.	No	Legal Management Software	\$25,907.98	\$4,100.00	\$30,007.98	09/01/20- 08/31/21	IT21.1147.05	Competitive Bid	To complete the conversion of Cobblestone historical data to integrate with Docusign and Legal Files.
3	Pixel Studio Productions	No	Videography Services	\$4,350.00	\$1,200.00	\$5,550.00	01/11/21- 08/31/21	State Grant	N/A	Agency's COO (Keena Pace) would like to include two additional interviews with Chief Bainbridge and the Sheriff for the jail diversion video. The \$1,200 cost is to cover the videographers time and resources to travel, shoot and edit of the video.
4	Salary.com	No	Software Agreement	\$9,500.00	\$5,753.00	\$15,253.00	02/03/21- 08/31/21	GR	N/A	The \$10,000 CompAnalyst Plus and Job Architect contract is a separate add on to the current \$9,500 CompAnalyst Market Data contract in place (CT140461). The total annual value is now \$19,500 (\$9,500.00 + \$10,000.00) – however only \$5,753 is due now which is the prorated amount for 2/3/2021- 8/31/2021.
CRISIS SERVICES										
FORENSICS										
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES										
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI										
INTERLOCALS										
LEASES										
MENTAL HEALTH SERVICES										
PROGRAM MANAGEMENT										
CROSS FISCAL YEAR CONTRACT RENEWALS										
ADMINISTRATION										



Executive Contract Summary

Contract Section



Contractor*

Dura Pier Facilities Sourced, Ltd.

Contract ID #*

2020-0018

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

DuraPier Facilities Sources, Ltd and The Harris Center

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input type="checkbox"/> Request for Proposal | <input type="checkbox"/> Sole Source |
| <input type="checkbox"/> Request for Application | <input type="checkbox"/> Request for Qualification |
| <input type="checkbox"/> Request for Quote | <input checked="" type="checkbox"/> Tag-On |
| <input type="checkbox"/> Interlocal | <input type="checkbox"/> Consumer Driven |
| <input type="checkbox"/> Not Applicable (If there are no funds required) | <input type="checkbox"/> Other |

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

12/7/2020

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 17,000.00

Increase Not to Exceed*

\$ 11,524.04

Revised Total Not to Exceed (NTE)*

\$ 28,524.04

Fiscal Year* (?)

Amount* (?)

2021

\$ 28,524.04

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Damaged siding at Humble location was replaced, and the exterior of the facility needs to be painted. The parking lot needs to be cleaned and striped for the new program. We are extending the date of the contract out to the end of the fiscal year.

Contract Owner*

Todd McCorquodale

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

2020 to present - various projects (painting, striping, etc)

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Please provide the HUB status*

WBE - Women owned business.

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

DuraPier RFP 87-23424 - Harris Center - 6805 Oak Village - Exterior Painting.pdf 154.54KB

Vendor/Contractor Contact Person

Name*

Dura Pier Facilities Sources, Ltd. / Wayne Bryant

Address*

Street Address

13124 Player Street

Address Line 2

City

Houston

Postal / Zip Code

77045-3106

State / Province / Region

TX

Country

United States

1a

Phone Number*

7133375721

Email*

wayne@facilitiesources.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1888	\$ 11,524.04	557001

Budget Manager
BROWN, ERICA S.

Secondary Budget Manager
CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)

see attached proposal

Project WBS (Work Breakdown Structure* (?)

n/a

Requester Name
HARPER, SARAH A

Submission Date
2/5/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date
2/5/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Todd McCorquodale

Approval Date
2/8/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

1b

Approved by*

Shaskeyia Belm

Approval Date*

2/8/2021

lc



Executive Contract Summary

Contract Section



Contractor*

Legal Files Software Inc.

Contract ID #*

6298

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/23/2021

Parties* (?)

Legal Files Software Inc. and The Harris Center for Mental Health and IDD.

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s) *

Check all that Apply

- | | |
|--|--|
| <input checked="" type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input type="checkbox"/> Request for Proposal | <input type="checkbox"/> Sole Source |
| <input type="checkbox"/> Request for Application | <input type="checkbox"/> Request for Qualification |
| <input type="checkbox"/> Request for Quote | <input type="checkbox"/> Tag-On |
| <input type="checkbox"/> Interlocal | <input type="checkbox"/> Consumer Driven |
| <input type="checkbox"/> Not Applicable (If there are no funds required) | <input type="checkbox"/> Other |

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

9/1/2020

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

N/A

Current Contract Amount*

\$ 25,907.98

Increase Not to Exceed*

\$ 4,100.00

Revised Total Not to Exceed (NTE)*

\$ 30,007.98

Fiscal Year* (?)

Amount* (?)

2021

\$ 30,007.98

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

The Conversion of CobbleStone historical data to integrate with DocuSign and LegalFiles.

Contract Owner*

Kendra Thomas

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

9/1/2020 - 8/31/2021

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Invoice #12627.pdf

25KB

Vendor/Contractor Contact Person

Name*

Shannon Hermes

Address*

Street Address

801 South Durkin Drive

Address Line 2

City

Springfield

State / Province / Region

IL

Postal / Zip Code

62704-6027

Country

US

Phone Number*

217-726-6000 ext. 253

Email*

Shannon@legalfiles.com

2a

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1147	\$ 4,100.00	900060
Budget Manager BROWN, ERICA S.		Secondary Budget Manager CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)

\$82.00 per hour for 50 hours to total \$4,100.00

Project WBS (Work Breakdown Structure* (?)

IT21.1147.05
DocuSign Implementation

Requester Name	Submission Date
JONES, ANTHONY	2/2/2021

Budget Manager Approval(s)

Approved by	Approval Date
<i>Erica Brown</i>	2/2/2021

Procurement Approval

Approved by	Approval Date
Sign	

Contract Owner Approval

Approved by	Approval Date
<i>Kendra Thomas</i>	2/2/2021

Contracts Approval

- Approve*
- Yes
 - No, reject entire submission
 - Return for correction

Approved by*	Approval Date*
<i>Shasthya Behu</i>	2/2/2021



Executive Contract Summary

Contract Section

Contractor*

Pixel Studios and The Harris Center

Contract ID #*

2021-0051

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Pixel Studios Productions

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- | | |
|---|--|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input type="checkbox"/> Request for Proposal | <input type="checkbox"/> Sole Source |
| <input type="checkbox"/> Request for Application | <input type="checkbox"/> Request for Qualification |
| <input type="checkbox"/> Request for Quote | <input type="checkbox"/> Tag-On |
| <input type="checkbox"/> Interlocal | <input type="checkbox"/> Consumer Driven |
| <input checked="" type="checkbox"/> Not Applicable (If there are no funds required) | <input type="checkbox"/> Other |

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

1/11/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 4,350.00

Increase Not to Exceed*

\$ 1,200.00

Revised Total Not to Exceed (NTE)*

\$ 5,550.00

Fiscal Year* (?)

Amount* (?)

2021

\$ 5,550.00

Funding Source*

State Grant

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Keena would like to include two additional interviews with Chief Bainbridge and the Sheriff for the jail diversion video. The \$1,200 cost is to cover the videographers time and resources to travel, shoot and edit the video.

Contract Owner*

Scott Rule

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

9/1/2019-8/31/2020

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Pixel Invoice - 2.pdf

96.93KB

Vendor/Contractor Contact Person

Name*

Andrea Castillo

Address*

Street Address

2403 Sunset Boulevard

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77005-1431

Country

US

Phone Number*

832-767-1543

3a

Email *

info@pixelstudioproductions.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
9403	\$ 1,200.00	542000
Budget Manager	Secondary Budget Manager	
RAMIREZ, PRISCILLA M	OSHMANN, JODEL	

Provide Rate and Rate Descriptions if applicable * (?)

Quote was developed by their executive director. Video will include additional footage of Chief Bainbridge and the Sheriff.

Project WBS (Work Breakdown Structure * (?)

1. Schedule a date/time for the interviews with Chief Bainbridge and the Sheriff
2. Videographers will visit both persons to shoot the footage
3. Pixel studio personnel will edit and submit the footage for our reviewal
4. Our internal communications team will review the final product, recommend for approval/revisions. Once final approval is received, we will then distribute the final video to our internal and external stakeholders via social media, website, email, etc.

Requester Name	Submission Date
BOREN, KAREN	2/9/2021

Budget Manager Approval(s)

Approved by	Approval Date
<i>Priscilla M. Ramirez</i>	2/9/2021

Contract Owner Approval

Approved by	Approval Date
<i>Scott D Rule</i>	2/9/2021

Contracts Approval

Approve *

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shaskeyia Belm

Approval Date*

2/9/2021

3c



Executive Contract Summary

Contract Section



Contractor*

Salary.com

Contract ID #*

5653

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Salary.com and The Harris Center

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input type="checkbox"/> Request for Proposal | <input type="checkbox"/> Sole Source |
| <input type="checkbox"/> Request for Application | <input type="checkbox"/> Request for Qualification |
| <input type="checkbox"/> Request for Quote | <input type="checkbox"/> Tag-On |
| <input type="checkbox"/> Interlocal | <input type="checkbox"/> Consumer Driven |
| <input type="checkbox"/> Not Applicable (If there are no funds required) | <input checked="" type="checkbox"/> Other No |

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/3/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 9,500.00

Increase Not to Exceed*

\$ 5,753.00

Revised Total Not to Exceed (NTE)*

\$ 15,253.00

4

Fiscal Year* (?)

Amount* (?)

2021

\$ 15,253.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

The \$10,000 CompAnalyst Plus and Job Architect contract is a separate add on to the current \$9,500 CompAnalyst Market Data contract in place (CT140461). The total annual value is now \$19,500 (\$9,500.00 + \$10,000.00) – however only \$5,753 is due now which is the prorated amount for 2/3/2021- 8/31/2021. The FY22 9/1/2021 - 8/31/2022 billing amount is \$19,500 and FY23 9/1/2022 - 8/31/2023 billing amount is \$19,500

Contract Owner*

Lesleigh Robertson

Previous History of Contracting with Vendor/Contractor*

- Yes
- No
- Unknown

Please add previous contract dates and what services were provided*

Previous contract dates are 9/1/2018 to date. The current subscription allow us to market price jobs to establish salary pay.

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

- Yes
- No
- Unknown

Community Partnership* (?)

- Yes
- No
- Unknown

Supporting Documentation Upload (?)

TheHarrisCenter_2021Plus.JA - 2.3.21.pdf

130.84KB

Vendor/Contractor Contact Person

Name*

Julia lawson

Ha

Address *

Street Address

610 Lincoln Street

Address Line 2

Suite #200

City

Waltham

Postal / Zip Code

02451-2188

State / Province / Region

MA

Country

US

Phone Number *

781-552-4592

Email *

julia.lawson@salary.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1108	\$ 5,753.00	551002
Budget Manager	Secondary Budget Manager	
BROWN, ERICA S.	CAMPBELL, RICARDO	

Provide Rate and Rate Descriptions if applicable * (?)

N/A

Project WBS (Work Breakdown Structure * (?)

N/A

Requester Name

FREEMAN, TERENCE P

Submission Date

2/3/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

2/4/2021

Contract Owner Approval

Approved by

Lesleigh Robertson

Approval Date

2/10/2021

Contracts Approval

4b

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shaslyia Belin

Approval Date*

2/11/2021

HC

EXHIBIT F-11

March 2021

**Affiliation Agreements, Grants,
MOU's and Revenues
Information Only**

CONTRACTORS	HUBs/MWBE	PRODUCT/SERVICE DESCRIPTION	ACTION TYPE	CONTRACT PERIOD	FUNDING	COMMENTS	
FY21 CONTRACTS							
AFFILIATION AGREEMENTS							
1	Baylor University	No	Clinical Placements	New	03/01/21- 03/31/26	N/A	This agreement will allow students enrolled in the Louise Herrington School of Nursing at Baylor University to complete clinical placements at The Harris Center for Mental Health and IDD.
2	Texas Southern University	Yes	Internships for Students enrolled in the School of Communication	New	03/01/21- 03/31/26	N/A	This agreement will allow students who are enrolled in the School of Communication at Texas Southern University to complete internships with The Harris Center for Mental Health and IDD. These students will work to apply the knowledge and skills that they have been taught in the classroom to assist in communications projects and tasks with The Harris Center.
3	University of Houston	No	Internships for Students enrolled in the Valenti School of Communication	New	03/01/21- 03/31/26	N/A	This agreement will allow students who are enrolled in the Valenti School of Communication at University of Houston to complete internships with The Harris Center for Mental Health and IDD. These students will work to apply the knowledge and skills that they have been taught in the classroom to assist in communications projects and tasks with The Harris Center.
4	University of Phoenix	No	Clinical Placements for Students in the Clinical Mental Health Counseling Program	New	03/01/21- 03/31/26	N/A	This agreement will allow students enrolled in the Clinical Mental Health Counseling program through University of Phoenix's College of Social Sciences to complete clinical placements with The Harris Center for Mental Health and IDD.
DAY LEASES							
MOA							
MOU							
5	Easter Seals of Greater Houston	No	Care Coordination	New	02/12/21- 08/31/24	GR	The purpose of this Agreement is to set forth the Parties (The Agency and the referral partner, Easter Seals of Greater Houston, Inc.) understanding regarding their collaborative treatment planning and care coordination activities. Also enables the Agency to exchange information regarding mutual clients.

CONTRACTORS		HUBs/MWBE	PRODUCT/SERVICE DESCRIPTION	ACTION TYPE	CONTRACT PERIOD	FUNDING	COMMENTS
6	Main Street Ministries Houston	No (Community Partnership)	"Operation ID"	New MOU	02/03/21- 08/31/21	GR	The purpose of this Agreement is to set forth the Parties (The Agency and the referral partner, Main Street Ministries Houston) understanding regarding their collaborative treatment planning and care coordination activities. Also enables the Agency to exchange information regarding mutual clients.
7	Memorial Hermann Community Benefit Corporation	No	Care Coordination	New	02/12/21- 08/31/24	GR	The purpose of this Agreement is to set forth the Parties (The Agency and the referral partner, Memorial Hermann Community Benefit Corporation) understanding regarding their collaborative treatment planning and care coordination activities.
8	Star of Hope	No	Care Coordination	New	02/12/21- 08/31/24	GR	The purpose of this Agreement is to set forth the Parties (The Agency and the referral partner, Star of Hope) understanding regarding their collaborative treatment planning and care coordination activities. Also enables the Agency to exchange information regarding mutual clients.
9	Turning Point Center	No	Care Coordination	New	02/04/21- 02/01/22	GR	The purpose of this Agreement is to set forth the Parties (The Agency and the referral partner, Turning Point Center) understanding regarding their collaborative treatment planning and care coordination activities. Also enables the Agency to exchange information regarding mutual clients.
REVENUE							
10	Baylor College of Medicine	No	Child Fellow Rotation Services	New Revenue	07/01/20- 08/31/21	State Grant Sole Source	SB-11 funded. Site Director to coordinate child fellow rotation services. Site Director will also train, supervise, and evaluate residents performance.
11	Gulf Coast Center	No	Crisis Intervention Helpline/Access	Revenue Renewal \$5,500.00	FY21/22		For call volume between 301 to 500 calls per month.
12	Spindletop Center	No	Crisis Intervention Helpline/Access	Revenue Renewal \$7,161.00	FY21/22		For call volume between 501 to 750 calls per month.



Executive Contract Summary

Contract Section

Contractor*

Baylor University

Contract ID #*

2021-0091

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

The Harris Center for Mental Health and IDD and Baylor University's School of Nursing

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

3/1/2021

Contract Term End Date* (?)

3/31/2026

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 0.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

This agreement will allow students enrolled in the Louise Herrington School of Nursing at Baylor University to complete clinical placements at The Harris Center for Mental Health and IDD. These students will use their clinical training to apply their skills while also adhering to the policies and procedures of the agency.

Contract Owner*

Lesleigh Robertson

Previous History of Contracting with Vendor/Contractor*

- Yes
- No
- Unknown

Please add previous contract dates and what services were provided*

We have an existing agreement with Baylor University for several programs including Human Development and Family Sciences and Social Work.

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

- Yes
- No
- Unknown

Please provide an explanation*

The school is not a HBCU

Community Partnership* (?)

- Yes
- No
- Unknown

Specify Name*

Baylor University

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Terri Sheridan

Address*

Street Address

333 North Washington Avenue

Address Line 2

City

Dallas

Postal / Zip Code

75246-1754

State / Province / Region

TX

Country

US

la

Phone Number*

469.893.4758

Email*

terri.sheridan@onlinenursing.baylor.edu

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1108	\$ 0.00	N/A
Budget Manager BROWN, ERICA S.		Secondary Budget Manager CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)

N/A

Project WBS (Work Breakdown Structure* (?)

N/A

Requester Name

MCGILL, VALERIE R

Submission Date

2/5/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

2/5/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Lesleigh Robertson

Approval Date

2/10/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shaskeyia Belin

Approval Date*

2/11/2021



Executive Contract Summary

Contract Section



Contractor*

Texas Southern University

Contract ID #*

2021-0088

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

The Harris Center for Mental Health and IDD and Texas Southern University's School of Communications

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

3/1/2021

Contract Term End Date* (?)

3/31/2026

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 0.00

Funding Source*

General Revenue (GR)

2

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

This agreement will allow students who are enrolled in the School of Communication at Texas Southern University to complete internships with The Harris Center for Mental Health and IDD. These students will work to apply the knowledge and skills that they have been taught in the classroom to assist in communications projects and tasks with The Harris Center. The students will be expected to abide by the policies and procedures of the agency.

Contract Owner*

Lesleigh Robertson

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Please provide the HUB status*

HUB - State.

Community Partnership* (?)

Yes No Unknown

Specify Name*

Texas Southern University

Supporting Documentation Upload (?)

COMM 430 Guidelines.pdf

675.13KB

Vendor/Contractor Contact Person

Name*

Clyde E. Duncan, Jr.

Address*

Street Address

3100 Cleburne Street

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77004-4501

Country

US

Phone Number*

(713) 313-7740

Ja

Email*

clyde.duncanj@tsu.edu

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1108	\$ 0.00	N/A
Budget Manager BROWN, ERICA S.		Secondary Budget Manager CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)

N/A

Project WBS (Work Breakdown Structure* (?)

N/A

Requester Name

MCGILL, VALERIE R

Submission Date

2/5/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

2/5/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Lesleigh Robertson

Approval Date

2/10/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shastjia Behm

Approval Date*

2/11/2021

2c



2d



Executive Contract Summary

Contract Section ▲

Contractor*

University of Houston

Contract ID #*

2021-0089

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

The Harris Center for Mental Health and IDD and University of Houston's Valenti School of Communication

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s) *

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

3/1/2021

Contract Term End Date* (?)

3/31/2026

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 0.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

This agreement will allow students who are enrolled in the Valenti School of Communication at University of Houston to complete internships with The Harris Center for Mental Health and IDD. These students will work to apply the knowledge and skills that they have been taught in the classroom to assist in communications projects and tasks with The Harris Center. The students will be expected to abide by the policies and procedures of the agency.

Contract Owner*

Lesleigh Robertson

Previous History of Contracting with Vendor/Contractor*

- Yes No Unknown

Please add previous contract dates and what services were provided*

We have an active agreement with UH and their Graduate College of Social Work

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

- Yes No Unknown

Please provide an explanation*

The school is not a HBCU

Community Partnership* (?)

- Yes No Unknown

Specify Name*

University of Houston

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Deborah Reyes

Address*

Street Address

3347 Cullen Boulevard

Address Line 2

City

Houston

Postal / Zip Code

77004

State / Province / Region

TX

Country

US

3a

Phone Number*

(713) 743-2873

Email*

dreyes20@central.uh.edu

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1108	\$ 0.00	N/A

Budget Manager
BROWN, ERICA S.

Secondary Budget Manager
CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)

N/A

Project WBS (Work Breakdown Structure* (?)

N/A

Requester Name

MCGILL, VALERIE R

Submission Date

2/5/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

2/5/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Lisleigh Robertson

Approval Date

2/10/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by *

Shasthya Bahu

Approval Date *

2/11/2021



Executive Contract Summary

Contract Section



Contractor*

University of Phoenix

Contract ID #*

2021-0092

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

The Harris Center for Mental Health and IDD and the University of Phoenix's College of Social Sciences

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s) *

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

3/1/2021

Contract Term End Date* (?)

3/31/2026

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 0.00

Funding Source*

General Revenue (GR)

4

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

This agreement will allow students enrolled in the Clinical Mental Health Counseling program through University of Phoenix's College of Social Sciences to complete clinical placements with The Harris Center for Mental Health and IDD. These students will use this opportunity to implement the skills that they have learned in real life practice while also abiding by the agency's policies and procedures.

Contract Owner*

Lesleigh Robertson

Previous History of Contracting with Vendor/Contractor*

- Yes
- No
- Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

- Yes
- No
- Unknown

Please provide an explanation*

The school is not a HBCU

Community Partnership* (?)

- Yes
- No
- Unknown

Specify Name*

University of Phoenix

Supporting Documentation Upload (?)

University of Phoenix MSC_Clinical Placement form 09.29.17.doc	108.5KB
University of Phoenix Responsibilities of the Agency Supervisor(MFCT-CCMH) (2).doc	46KB

Vendor/Contractor Contact Person

Name*

Karina Sanchez

Address*

Street Address

4025 South Riverpoint Parkway

Address Line 2

City

Phoenix

State / Province / Region

AZ

Postal / Zip Code

85040-0723

Country

US

Phone Number*

602-387-8254

Ma

Email *

karina.sanchez@phoenix.edu

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1108	\$ 0.00	N/A
Budget Manager BROWN, ERICA S.		Secondary Budget Manager CAMPBELL, RICARDO

Provide Rate and Rate Descriptions if applicable* (?)

N/A

Project WBS (Work Breakdown Structure* (?)

N/A

Requester Name

MCGILL, VALERIE R

Submission Date

2/10/2021

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

2/10/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Lesleigh Robertson

Approval Date

2/11/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shaskyia Behn

Approval Date*

2/11/2021

HB



HC



Executive Contract Summary

Contract Section

Contractor*

Easter Seals Of Greater Houston

Contract ID #*

NA

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Easter Seals of Greater Houston & The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/12/2021

Contract Term End Date* (?)

8/31/2024

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 0.00

Fiscal Year* (?)

2022

Amount* (?)

\$ 0.00

Fiscal Year* (?) Amount* (?)
2023 \$ 0.00

Fiscal Year* (?) Amount* (?)
2024 \$ 0.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

The care coordination agreement serves to confirm that mutual understanding of The Harris Center for Mental Health and IDD and the following referral partner: Easter Seals of Greater Houston.

Program Director - Sarah Strang

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Specify Name*

Easter Seals of Greater Houston

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Elise Hough

5a

Address*

Street Address

4888 Loop Central Drive, Suite 200

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77027

Country

US

Phone Number*

7138389050

Email*

ehough@eastersealshouston.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9208	\$ 0.00	0

Budget Manager

OSHMAN, JODEL

Secondary Budget Manager

KORNMEYER, KIMBERLY A

Provide Rate and Rate Descriptions if applicable* (?)

NA

Project WBS (Work Breakdown Structure* (?)

NA

Requester Name

SINGH, PATRICIA R.

Submission Date

2/12/2021

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

2/12/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Kim Kornmeyer

Approval Date

2/12/2021

Contracts Approval

Approve *

- Yes
- No, reject entire submission
- Return for correction

Approved by *

Belinda Stude

Approval Date *

2/16/2021



Executive Contract Summary

Contract Section



Contractor*

Main Street Ministries Houston

Contract ID #*

2021-0070

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Main Street Ministries Houston and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/3/2021

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 0.00

Funding Source*

General Revenue (GR)

6

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

The purpose of the MOU is to outline the responsibilities of both The Harris Center CPEP Programs and Main Streets Ministries Houston "Operation ID" in relation to the collaboration of services to ensure consumers receive assistance in obtaining legal identification documents and supporting documents required to obtain the legal documents or the to obtain them.

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Specify Name*

Main Street Ministries Houston

Supporting Documentation Upload (?)

Operation ID Service Agreement 11_3_2020.pdf 670.39KB

Vendor/Contractor Contact Person

Name*

Barbara Allen

Address*

Street Address

5100 Travis Street

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77002

Country

United States

Phone Number*

281-833-3513

Email*

ballen@msmhouston.org

Budget Section

loa

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2250	\$ 0.00	0

Budget Manager	Secondary Budget Manager
OSHMAN, JODEL	KORNMEYER, KIMBERLY A

Provide Rate and Rate Descriptions if applicable* (?)

NA

Project WBS (Work Breakdown Structure* (?)

NA

Requester Name	Submission Date
SINGH, PATRICIA R.	2/3/2021

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

2/3/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Kim Kornmeyer

Approval Date

2/3/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

Approved by*

Shasthya Behu

Approval Date*

2/3/2021

leb



Executive Contract Summary

Contract Section

Contractor*

Memorial Hermann Community Benefit Corporation

Contract ID #*

NA

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Memorial Hermann Community Benefit Corporation & The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/12/2021

Contract Term End Date* (?)

8/31/2024

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 0.00

Fiscal Year* (?)

2022

Amount* (?)

\$ 0.00

Fiscal Year* (?) Amount* (?)
2023 \$ 0.00

Fiscal Year* (?) Amount* (?)
2024 \$ 0.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

The care coordination agreement serves to confirm that mutual understanding of The Harris Center for Mental Health and IDD and the following referral partner: Memorial Hermann Community Benefit Corporation

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Specify Name*

Memorial Hermann Community Benefit Corporation

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Sylvia Teeple

Address*

Street Address

909 Frostwood, Suite 2.205

Address Line 2

City

Houston

Postal / Zip Code

77024-2307

State / Province / Region

TX

Country

US

7a

Phone Number*

713-456-6814

Email*

sylvia.teeple@memorialhermann.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9208	\$ 0.00	0
Budget Manager OSHMAN, JODEL		Secondary Budget Manager KORNMEYER, KIMBERLY A

Provide Rate and Rate Descriptions if applicable* (?)

NA

Project WBS (Work Breakdown Structure* (?)

NA

Requester Name

SINGH, PATRICIA R.

Submission Date

2/12/2021

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

2/12/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

KIM KORNMEYER

Approval Date

2/12/2021

Contracts Approval

Approve*

- Yes
- No, reject entire submission
- Return for correction

7b

Approved by*

Belinda Stude

Approval Date*

2/16/2021

7c



Executive Contract Summary

Contract Section

Contractor*

Star of Hope

Contract ID #*

NA

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Star of Hope & The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

2/12/2021

Contract Term End Date* (?)

8/31/2024

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 0.00

Fiscal Year* (?)

2022

Amount* (?)

\$ 0.00

Fiscal Year* (?) Amount* (?)
2023 \$ 0.00

Fiscal Year* (?) Amount* (?)
2024 \$ 0.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

The care coordination agreement serves to confirm that mutual understanding of The Harris Center for Mental Health and IDD and the following referral partner: Star of Hope.

Program Director - Sarah Strang

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Specify Name*

Easter Seals

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person



Name*

Betty Nannally

8a

Address *

Street Address

4848 Loop Central Drive, Suite 500

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77081-2356

Country

US

Phone Number *

713-748-0700

Email *

no.email@noemail.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
9208	\$ 0.00	0

Budget Manager

OSHMAN, JODEL

Secondary Budget Manager

KORNMEYER, KIMBERLY A

Provide Rate and Rate Descriptions if applicable * (?)

NA

Project WBS (Work Breakdown Structure * (?)

NA

Requester Name

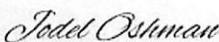
SINGH, PATRICIA R.

Submission Date

2/12/2021

Budget Manager Approval(s)

Approved by



Approval Date

2/12/2021

Procurement Approval

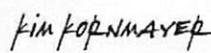
Approved by

Sign

Approval Date

Contract Owner Approval

Approved by



Approval Date

2/12/2021

8b

Contracts Approval

Approve *

- Yes
- No, reject entire submission
- Return for correction

Approved by *

Belinda Stude

Approval Date *

2/16/2021

8c



Executive Contract Summary

Contract Section

**Contractor***

Turning Point Center

Contract ID #*

2021-0075

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Turning Point Center & The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s)*

Check all that Apply

- Competitive Bid
- Request for Proposal
- Request for Application
- Request for Quote
- Interlocal
- Not Applicable (If there are no funds required)
- Competitive Proposal
- Sole Source
- Request for Qualification
- Tag-On
- Consumer Driven
- Other

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

2/4/2021

Contract Term End Date* (?)

2/1/2022

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Amount* (?)

\$ 0.00

Funding Source*

General Revenue (GR)

9

Contract Description / Type * (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided * (?)

The care coordination agreement serves to confirm that mutual understanding of The Harris Center for Mental Health and IDD and the following referral partner: Turning Point Center

Contract Owner *

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor *

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB) * (?)

Yes No Unknown

Community Partnership * (?)

Yes No Unknown

Specify Name *

Turning Point Center

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name *

George Gomez or John Hearn

Address *

Street Address

1701 Jacquelyn Drive

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77055-3643

Country

US

Phone Number *

713-957-0099 cell: 713-894-9466/John Hearn cell: 832-818-0308

Email *

clientsvcs@turningpointcenter.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

9a

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
9808	\$ 0.00	0

Budget Manager	Secondary Budget Manager
OSHMAN, JODEL	KORNMEYER, KIMBERLY A

Provide Rate and Rate Descriptions if applicable * (?)
NA

Project WBS (Work Breakdown Structure * (?)
NA

Requester Name	Submission Date
SINGH, PATRICIA R.	2/4/2021

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date
2/4/2021

Procurement Approval

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Kim Kornmeyer

Approval Date
2/5/2021

Contracts Approval

Approve *

- Yes
- No, reject entire submission
- Return for correction

Approved by *

Shasthya Behn

Approval Date *
2/5/2021

9b



Executive Contract Summary

Contract Section

Contractor*

Baylor College of Medicine

Contract ID #*

2021-0066

Presented To*

- Resource Committee
- Full Board

Date Presented*

3/16/2021

Parties* (?)

Baylor College of Medicine and The Harris Center for Mental Health and IDD Services

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$50,000.00)
- Board Approval (Total NTE Amount is \$50,000.00+)
- Grant Proposal
- Revenue
- Other

Procurement Method(s) *

Check all that Apply

- | | |
|--|--|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input type="checkbox"/> Request for Proposal | <input checked="" type="checkbox"/> Sole Source |
| <input type="checkbox"/> Request for Application | <input type="checkbox"/> Request for Qualification |
| <input type="checkbox"/> Request for Quote | <input type="checkbox"/> Tag-On |
| <input type="checkbox"/> Interlocal | <input type="checkbox"/> Consumer Driven |
| <input type="checkbox"/> Not Applicable (If there are no funds required) | <input type="checkbox"/> Other |

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

7/1/2020

Contract Term End Date* (?)

8/31/2021

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2021

Funding Source*

State Grant

Contract Description / Type* (?)

- Personal/Professional Services
- Consumer Driven Contract
- Memorandum of Understanding
- Affiliation or Preceptor
- BAA/DUA
- Pooled Contract
- Renewal of Existing Contract
- Consultant
- New Contract/Agreement
- Amendment to Existing Contract
- Service/Maintenance
- IT/Software License Agreement
- Lease
- Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

SB-11 funded: Sylvia Muzquiz-Drummond, MD identified as Site Director to coordinate child fellow rotation services. Site Director will also train, supervise, and evaluate residents performance.

Contract Owner*

Dr. Sylvia Muzquiz

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Specify Name*

Baylor College of Medicine

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Wayne Goodman, MD

Address*

Street Address

One Baylor Plaza

Address Line 2

City

Houston

Postal / Zip Code

77030-3411

State / Province / Region

TX

Country

USA

Phone Number*

713-798-4945

Email*

wayne.goodman@bcm.edu

Budget Section

Budget Units and Amounts Charged to each Budget Unit

10a

Budget Unit Number *

2208

Amount Charged to Unit *

\$ 173,687.00

Expense/GL Code No. *

420000

Budget Manager

SHELBY, DEBBIE C

Secondary Budget Manager

LOERA, ANGELICA D

Provide Rate and Rate Descriptions if applicable * (?)

0.0

Project WBS (Work Breakdown Structure * (?)

0.0

Requester Name

SHELBY, DEBBIE C

Submission Date

1/29/2021

Budget Manager Approval(s)



Approved by

Debbie Chambers Shelby

Approval Date

1/29/2021

Procurement Approval



Approved by

Sharon Brauner

Approval Date

2/1/2021

Contract Owner Approval



Approved by

Sylvia Muzquiz

Approval Date

2/1/2021

Contracts Approval

Approve *

- Yes
- No, reject entire submission
- Return for correction

Approved by *

Shaskyia Behn

Approval Date *

2/1/2021

106

**CONTRACTOR OFF-CYCLE REVENUE EVALUATION AND RENEWAL FORM
FY 2021/2022 CONTRACTS**

The current FY20/21 information is provided below. Please evaluate the contractor's performance, and advise whether the contract should be renewed or not. If the contract is recommended for renewal, please provide the FY21/FY22 information where requested.

A. FY 2020/2021 CONTRACT INFORMATION - NO CHANGES ARE ALLOWED IN THIS SECTION

Contract ID#:	
New Database ID#:	7409
Contractor Name:	Gulf Coast Center
Service Description:	Crisis Intervention helpline/ Access
Responsible Staff Person:	Jennifer Battle
Rate(s)/Rate(s) Description:	\$6,720.00 for call volume between 501 to 701 calls per month. 702+ calls \$12.00

B. EVALUATION OF FY20/21 PERFORMANCE:

1. Payment to The HARRIS CENTER according to the terms of the Contract?
(Y) (N) .
2. If not, please provide an explanation in the comments section below.

Comments/Other Concerns

C. RENEWAL DETERMINATION:

1. Is the contract being renewed for FY2021/2022 with this Contractor? (Y) (N) .
2. REASON:

Please give a reason for any non-renewal, sign and return this form via email to the Contracts Services Department. [DO NOT ANSWER QUESTIONS IN SECTIONS D, E, and F.]

D. RENEWAL INFORMATION FOR FY2021/2022:

Please provide the FY21/22 Rate(s) __ \$5,500.00 for call volume between 301 to 500 calls per month.

501+ calls \$12.00 _____

List all applicable rates. Attach additional pages if necessary. [Please verify with Budget Manager].

E. RESPONSIBLE PARTY:

Please state the name of the Contract Owner and/or Department Chief/VP/Director for this contract Jennifer Battle.

Please state the name of the Responsible Party or Staff that will review and approve monthly invoices for this contract Jennifer Battle.

APPROVALS:

Budget Manager: Ricardo Campbell (Printed Name)

Ricardo Campbell Digitally signed by Ricardo Campbell
Date: 2021.02.05 16:14:46 -06'00' (Signature). REQUIRED

Contract Owner/Department Head: Jennifer Battle (Printed Name)

Jennifer Battle Digitally signed by Jennifer Battle
Date: 2021.02.05 16:22:12 -06'00' (Signature). REQUIRED

NOTE 1: INCOMPLETE OR INCORRECT EVALUATION FORMS

Please contact Shakyia Behn (x7230) or Sonja Pickney (x7390) if you have any questions. Incomplete or incorrect evaluations will be returned and may cause delay in contract start date.

NOTE 2: RETURNING FORMS

PLEASE RETURN COMPLETED FORM AND ATTACHMENTS TO shaskyia.behn@theharriscenter.org and contactservices@theharriscenter.org. Call Extension 7230 with any questions.

lla

**CONTRACTOR OFF-CYCLE REVENUE EVALUATION AND RENEWAL FORM
FY 2021/2022 CONTRACTS**

The current FY20/21 information is provided below. Please evaluate the contractor’s performance, and advise whether the contract should be renewed or not. If the contract is recommended for renewal, please provide the FY21/FY22 information where requested.

A. FY 2020/2021 CONTRACT INFORMATION - NO CHANGES ARE ALLOWED IN THIS SECTION

Contract ID#:	
New Database ID#:	7424
Contractor Name:	Crisis Intervention helpline/ Access Spindletop Center
Service Description:	Telephonic Crisis Line Services to provide MH and IDD resources and support.
Responsible Staff Person:	Jennifer Battle
Rate(s)/Rate(s) Description:	(\$7,161.00) for call volume between 501 to 750 calls per month. If, volume of call(s) exceeds 10% of the current contracted range then said volume will be billed at Eleven Dollars (\$11.00) for only calls beyond the range of 501 to 750 calls per month.

B. EVALUATION OF FY20/21 PERFORMANCE:

1. Payment to The HARRIS CENTER according to the terms of the Contract?
(Y) (N) .
2. If not, please provide an explanation in the comments section below.

Comments/Other Concerns

C. RENEWAL DETERMINATION:

1. Is the contract being renewed for FY2021/2022 with this Contractor? (Y) (N) .
2. REASON:

Please give a reason for any non-renewal, sign and return this form via email to the Contracts Services Department. [DO NOT ANSWER QUESTIONS IN SECTIONS D, E, and F.]

D. RENEWAL INFORMATION FOR FY2021/2022:

Please provide the FY21/22 Rate(s) same as above

List all applicable rates. Attach additional pages if necessary. [Please verify with Budget Manager].

E. RESPONSIBLE PARTY:

Please state the name of the Contract Owner and/or Department Chief/VP/Director for this contract Jennifer Battle

Please state the name of the Responsible Party or Staff that will review and approve monthly invoices for this contract Jennifer Battle

APPROVALS:

Budget Manager: Ricardo Campbell (Printed Name)

Ricardo Campbell Digitally signed by Ricardo Campbell
Date: 2021.02.05 16:13:52 -06'00' (Signature). REQUIRED

Contract Owner/Department Head: Jennifer Battle (Printed Name)

Jennifer Battle Digitally signed by Jennifer Battle
Date: 2021.02.05 16:24:49 -06'00' (Signature). REQUIRED

NOTE 1: INCOMPLETE OR INCORRECT EVALUATION FORMS

Please contact Shakya Behn (x7230) or Sonja Pickney (x7390) if you have any questions. Incomplete or incorrect evaluations will be returned and may cause delay in contract start date.

NOTE 2: RETURNING FORMS

PLEASE RETURN COMPLETED FORM AND ATTACHMENTS TO shaskya.behn@theharriscenter.org and contactservices@theharriscenter.org. Call Extension 7230 with any questions.

12a

EXHIBIT F-12

ABBREVIATION LIST

46B Not Competent to stand trial HCJ

A

ACT Assertive Community Treatment
 ADL Activities of Daily Living
 AFDC Aid to Families with Dependent Children
 ALF Assisted Living facility
 ANSA Adult Needs and Strengths Assessment
 AOT Assisted out-patient treatment

APS Adult Protective Services
 ARC Association for Retarded Citizens
 AUDIT-C Alcohol Use Disorders Identification Test

B

BABY CANS Baby Child Assessment needs (3-5 years)
 BHO Behavioral Health Organization
 BDSS Brief Bipolar Disorder Symptom Scale
 BNSA Brief Negative Symptom Assessment

C

CANS Child and Adolescent Needs and Strengths
 CAPES Child and Adolescent Psychiatric Emergency Services
 CAPS Child and Adolescent Psychiatric Services
 CARE Client Assessment and Registration
 CARF Commission on Accreditation of Rehabilitation Facilities
 CAS Child and Adolescent Services
 CBCL Children's Behavioral Checklist
 CBHN Community Behavioral Health Network
 CBT Cognitive behavior therapy
 CCBHC Certified Community Behavioral Health Clinic
 CCR Clinical case review
 CCSI Chronic Consumer Stabilization Initiative
 CCU Crisis Counseling Unit
 CHIP Children's Health Insurance Plan
 CIDC Chronically Ill and Disabled Children
 CIRT Crisis Intervention Response Team
 CIWA Clinical Institute Withdrawal Assessment for Alcohol
 CMAP Children's Medication Algorithm Project
 CMBHS Clinical Management for Behavioral Health Services
 CMS Centers for Medicare and Medicaid
 COC Continuity of Care

COD	Co-Occurring Disorders Unit
COPSD	Co-occurring Psychiatric and Substance Abuse Disorders
COR	Council on Recovery
CPEP	Comprehensive Psychiatric Emergency Programs
CPOSS	Charleston Psychiatric Outpatient Satisfaction Scale
CPS	Children's Protective Services
CRCG	Community Resource Coordination Group
CRU	Crisis Residential Unit
CSC	Community Service Center
CSCD	Community Supervision and corrections department
CSP	Community Support plan
CSU	Crisis Stabilization Unit
CYS	Community Youth Services

D

DFPS	Department of Family and Protective Services
DHHS	Department of Health and Human Services
DID	Determination of Intellectual Disability
DLA-20	Daily Living Activities-20 Item Version
DRB	Dangerousness review board
DSM-5	Diagnostic and Statistical Manual of Mental Disorders, 5th Edition
DSRIP	Delivery System Reform Incentive Payment Program

E

ECI	Early Childhood Intervention
EO	Early Onset
EPSDT	Early Periodic Screening Diagnosis and Treatment

F

FACT	Forensic Assertive Community Team
FF	Flex Funds
FSIQ	Full Scale Intelligence Quotient
FSPA	Jail -Forensic Single Portal
FTND	Fagerstrom Test for Nicotine Dependence
FY	Fiscal Year

G

GAF	Global Assessment of Functioning
GR.	General Revenue

H

HAM-A	Hamilton Rating Scale for Anxiety
HCJPD	Harris County Juvenile Probation Department
HCPC	Harris County Psychiatric Center
HCPI	Harris County Psychiatric Intervention
HCPS	Harris County Protective Services for Children and Adults
HCS	Home and Community Services
HCS-O	Home and Community Services – OBRA
HCSO	Harris County Sheriff's Office
HH	Harris Health System
HHS	Health Human Services
HHSC	Health and Human Services Commission
HMO	Health Maintenance Organization
HOT	Homeless Outreach Team
HPD	Houston Police Department
HRC	Houston Recovery Center

I

ICAP	Inventory for Client and Agency Planning
ICC	Interim Care Clinic
ICF-ID	Intermediate Care Facility for Intellectual Disability
IEP	Individual Education Plan
IFSP	Individual Family Support Plan
IHR	In Home Respite
IRG	Innovative Resource Group
IRP	Individualized recovery plan

J

JDC	Juvenile Detention Center
JJAEP	Juvenile Justice Alternative Education Program
JSS	Job Satisfaction Scale

K**L**

LAR	Legislative Appropriations Request
LIDDA	Local IDD Authority
LMHA	Local Mental Health Authority
LOC	Level of Care – LOC A= Authorized and LOC R= Calculated
LOS	Length of Stay
LPHA	Licensed Professional of the Healing Arts
LSA	Local Service Area

M

MACRA	Medicare Access and CHIP Reauthorization Act
MAPS	Mental Retardation Adult Psychiatric Services
MBOW	Medicaid Managed Care Report (Business Objects)
MCO	Managed Care Organization
MCOT	Mobil Crisis Outreach Team
MCAS	Multnomah Community Assessment Scale
MDU	Multiple Disabilities Unit
MHW	Mental Health Warrant
MMPI-2	Minnesota Multiphasic Personality Inventory 2nd Edition
MoCA	Montreal Cognitive Assessment
MSU	Maximum security unit

N**N**

NAMI	National Alliance for the Mentally Ill
NEO	New Employee Orientation
NGRI	Not Guilty for Reason of Insanity (46C)
NPC	Neuro-Psychiatric Center
NWCSC	Northwest Community Service Center

O

OSAR	Outreach Screening Assessment and Referral
OASS	Overt Agitation Severity Scale
OHR	Out of Home Respite
OVSOM	Office of Violent Sexual Offenders Management

P

PAP	Patient Assistance Program (for Prescriptions)
PASARR	Preadmission Screening and Annual Residential Review
PATH	Project to Assist in the Transition from Homelessness
PCH	Personal Care Home
PCM	Patient care monitoring
PDP	Person Directed Plan
PDSA	Plan-Do-Study-Act
PES	Psychiatric Emergency Services
PHCRU	Post Hospitalization Crisis Residential Unit
PHQ-9	Patient Health Questionnaire-9 Item Version
PHQ-A	Patient Health Questionnaire-9 Modified for Adolescents
PI	Performance Improvement
PIP	Performance Improvement Plan
PMAB	Prevention and Management of Aggressive Behavior
POC	Plan of Care

PoC-IP Perceptions of Care-Inpatient
 ProQOL Professional Quality of Life Scale
 PSRS Positive Symptom Rating Scale
 PSS Parent Satisfaction Scale

Q

QAIS Quality Assurance and Improvement System
 QMHP Qualified Mental Health Professional
 QI Quality Improvement
 QIDS-C Quick Inventory of Depressive Symptomology-Clinician Rated

R

RC Rehab Coordination
 ROI Release of Information
 RM Recovery Manager
 RTC Residential Treatment Center

S

SAM Service Authorization and Monitoring
 SAMHSA Substance Abuse and Mental Health Services Administration
 SC Service Coordination
 SECSC Southeast Community Service Center
 SEFRC Southeast Family Resource Center
 SMAC Sequential Multiple Analysis tests
 SMHF State mental health facility
 SNF Skilled Nursing Facility
 SP Service Package (SP1, etc)
 SPA Single portal authority
 SSLC State living facility
 SWCSC Southwest Community Service Center
 SWFRC Southwest Family Resource Center
 SUD Substance Use Disorder

T

TAC Texas Administrative code
 TANF Temporary Assistance for Needy Families
 TCOOMI Texas Correctional Office on Offenders with Medical or Mental Impairments
 TDCJ Texas Department of Criminal Justice
 THKC Texas Health Kids
 THSteps Texas Health Steps
 TIC Trauma informed Care
 TMAP Texas Medication Algorithm Project

TMHP Texas Medicaid & Healthcare partnership
TJJD Texas Juvenile Justice Department
TRR Texas Resiliency and Recovery
TWC Texas Workforce Commission

U
UR Utilization Review

V
V-SSS Visit-Specific Satisfaction Scale

W

X

Y