



The Harris Center for Mental Health and IDD
9401 Southwest Freeway Houston, TX 77074
Board Room# 109

Full Board Meeting
November 15, 2022
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 Tuesday, October 25, 2022
(*EXHIBIT F-1*)

IV. BOARD CHAIR'S REPORT

V. CHIEF EXECUTIVE OFFICER'S REPORT

VI. COMMITTEE REPORTS AND ACTIONS

- A. Resource Committee Report and/or Action
(*G. Womack, Chair*)
- B. Quality Committee Report and/or Action
(*G. Santos, Chair*)
- C. Governance Committee Report and/or Action
(*J. Lykes, Chair*)
- D. Foundation Committee Report and/or Action
(*J. Lykes, Chair*)

VII. CONSENT AGENDA

- A. FY'22 Year-to-Date Budget Report-October
(*EXHIBIT F-2 Vanessa McKeown*)
- B. November 2022 New Contracts Over 100K
(*EXHIBIT F-3 Silvia Tiller*)
- C. November 2022 Contract Amendments Over 100K
(*EXHIBIT F-4 Silvia Tiller*)
- D. ZScaler Zero Trust Remote Access Cyber Defense
(*EXHIBIT F-5 Mustafa Cochinwala/Vanessa McKeown*)
- E. Furniture for the Neuro Psychiatric Center RFP
(*EXHIBIT F-6 Steve Evans/Nina Cook*)
- F. **New/Unchanged**
 - 1. Assurance Of Individual Rights
(*EXHIBIT F-7*)
 - 2. Business Associate and Subcontractor
(*EXHIBIT F-8*)
 - 3. Compliance Plan FY23
(*EXHIBIT F-9*)

4. Harris Center Advisory Committee
(EXHIBIT F-10)
5. Mailing Services
(EXHIBIT F-11)
6. Moonlighting
(EXHIBIT F-12)
7. Nurse Staffing Advisory Committee
(EXHIBIT F-13)
8. Personal Relationships in the Workplace
(EXHIBIT F-14)
9. Plan of Care
(EXHIBIT F-15)
10. Risk Management Plan
(EXHIBIT F-16)
11. Subpoenas
(EXHIBIT F-17)
12. Time and Attendance
(EXHIBIT F-18)
13. Volunteer Program
(EXHIBIT F-19)

G. Revised/Minor Changes

1. Agency Abbreviations
(EXHIBIT F-20)
2. Communication with the Media and other Entities
(EXHIBIT F-21)
3. Declaration of Mental Health Treatment
(EXHIBIT F-22)
4. Emergency Codes, Alerts and Response
(EXHIBIT F-23)
5. Financial Assessment
(EXHIBIT F-24)
6. Licensure, Certification and Registration
(EXHIBIT F-25)
7. Off Premises, Equipment Usage
(EXHIBIT F-26)
8. Medication Storage, preparation and Administration Areas
(EXHIBIT F-27)
9. Pharmaceutical Representatives
(EXHIBIT F-28)
10. Pharmacy and Unit Medication/Drug Inventory
(EXHIBIT F-29)

11. Supervision of Peer Specialist
(EXHIBIT F-30)
12. Travel Policy
(EXHIBIT F-31)

VIII. REVIEW AND TAKE ACTION

- A. Board of Trustees Calendar 2023
(EXHIBIT F-32 Wayne Young)
- B. Tejas Health Management-Contracts Amendments over 100K (Stand Alone)
(EXHIBIT F-33 Mustafa Cochinwala)

IX. REVIEW AND COMMENT

- A. IT Update
(EXHIBIT F-34 Mustafa Cochinwala)
- B. Legislative Update
(Amanda Jones)

X. EXECUTIVE SESSION

- **As authorized by §551.071 of the Texas Government Code, the Board of Trustees reserves the right to adjourn into Executive Session at anytime during the course of this meeting to seek legal advice from its attorney about any matters listed on the agenda.**

- **As authorized by §551.071 of the Texas Government Code, consultation with attorney on a matter related to financing of property and lines of credit in which the duty of the attorney to the governmental body under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with the Open Meetings Act. Kendra Thomas, General Counsel, Vanessa McKeown, Chief Financial Officer, and Kendal Hauck & Fred Cornwall, Texas Municipal Capital Markets Group, Inc.**

- **In accordance with §551.074 of the Texas Government Code, Discussion of Personnel Matters related to the Nomination of Individual Board members for various offices and the preparation of the 2023 Slate of Officers to be recommended to the Full Board for its consideration at the Regular Meeting of The HARRIS CENTER for MENTAL HEALTH AND IDD Board of Trustees in January 2023. J. Lykes, Chair of Governance Committee**

- **Pursuant to Tex. Government Code §551.074, Discussion regarding the Performance Evaluation of the Chief Executive Officer. S. Zakaria, Board Chair**

- XI. **RECONVENE INTO OPEN SESSION**
- XII. **CONSIDER AND TAKE ACTION AS A RESULT OF THE EXECUTIVE SESSION**
- XIII. **CONSIDERATIONS FOR A SMALL BUSINESS PROGRAM**
- XIV. **INFORMATION ONLY**
 - A. November 2022 New Contracts Under 100K
(EXHIBIT F-35)
 - B. November 2022 Contract Renewals Under 100K
(EXHIBIT F-36)
 - C. November 2022 Contract Amendments Under 100K
(EXHIBIT F-37)
 - D. November 2022 Affiliation Agreements, Grants, MOU's and Revenues Information Only
(EXHIBIT F-38)
 - E. Abbreviations List
(EXHIBIT F-39)
- XV. **ADJOURN**

Veronica Franco

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 of 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 109
9401 North West Freeway
Houston, Texas 77074

TYPE OF MEETING: Regular

DATE: October 25, 2022

**TRUSTEES
IN ATTENDANCE:**

- Mr. Chaikat Pakaria, Chair
- Dr. George Santos, Vice Chairperson
- Dr. Lois Moore, Vice Chairperson
- Mr. Gerald Tomack, Secretary
- Mr. Jim Wykes
- Dr. Robin bearing PhD
- Judge Bonnie Hellms
- Mrs. Natali Hrtado
- Dr. Ma Miller

TRUSTEES ABSENT: Sheriff Ed Donale

I. Declaration of Quorum

Mr. Chaikat Pakaria, Chairperson called the meeting to order at 9:30 a.m. noting that a quorum of the Board was in attendance.

II. Public Comments

Mr. Chaikat Pakaria, Chairperson announced the floor is open for public comments. There were no public comments made. Mr. Pakaria reported Dr. Miller will be assigned to the Governance Committee and the Program Committee.

III. Approval of Minutes

MOTION BY: MOORE SECOND: SANTOS

With unanimous affirmative votes

BE IT RESOLVED the Minutes of the Regular Board of Trustees meeting held on Tuesday, October 25, 2022 as presented under exhibit are approved.

IV. Board Chair's Report

Mr. Zakaria provided a Board Chair’s Report. Mr. Zakaria appointed Dr. MaMiller to the Governance and Program Committees.

V. Chief Executive Officer’s Report was provided by CEO Wayne Young

Mr. Young provided a Chief Executive Officer report to the Board.

VI. Committee Reports and Action were presented by the respective chairs:

B. Resource Committee Report and/or Action. Tomack Chair

Mr. Tomack provided an overview of the topics discussed and the decisions made at the Resource Committee meeting on October 18, 2022.

C. Quality Committee Report and/or Action. Santos Chair

Dr. Santos provided an overview of the topics discussed and the decisions made at the Quality Committee meeting on October 18, 2022.

D. Governance Committee Report and/or Action. Sykes Chair

The Governance Committee was cancelled.

E. Audit Committee Report and/or Action. Moore Chair

Dr. Moore provided an overview of the topics discussed and the decisions made at the Audit Committee meeting on October 18, 2022

F. Foundation Committee Report and/or Action. Sykes Chair

Mr. Sykes provided the Board of Trustees an update about the Foundation.

VII. Consent Agenda

A. Approve FY’22 Year-to-Date Budget Report September

B. October 2022 New Contracts Over 100k

C. October 2022 Contract Amendments Over 100k

D. October 2022 Interlocal Agreements

E. Northeast Clinic Project

F. 2023 Audit Charter

G. 2023 Audit Projects

H. Quality Assurance review of Internal Audit Dept.

MOTION: Mrs. Hurtado moved to approve Consent Agenda items A through H

SECOND: D. Santos seconded the motion

BE IT RESOLVED, with unanimous affirmative vote, Consent Agenda items A through H were approved agenda items.

VOTE: By unanimous affirmative vote, the Harris Center Board of Trustees approved the proposed resolution.

XII. ADJOURN

MOTION: SANTOS SECOND: HURTADO

Motion passed with unanimous affirmative votes.

The meeting was adjourned at **12:56 PM.**

Respectfully submitted

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

DRAFT

EXHIBIT F-2



The Harris Center for Mental Health and IDD

Financial Report
For the Second Month and Year to Date Ended October 31, 2022
Fiscal Year 2023

Presented to the Resource Committee of the Board of Trustees on November 08, 2022

The Harris Center for Mental Health & IDD

November 08, 2022

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

The monthly financial report for October 31, 2022 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 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.

Vanessa McKeown
Chief Financial Officer

**The Harris Center for Mental Health and IDD
Financial Summary
For the Second Month and Year to Date Ended October 31, 2022**

Month (,000)			
	Actual	Budget	Variance
Revenues	\$ 21,150	\$ 22,686	\$ (1,535)
Expenditures	27,159	27,142	(17)
Excess of Revenues over (under) Expenditures before Other Sources	<u>\$ (6,009)</u>	<u>\$ (4,456)</u>	<u>\$ (1,553)</u>

Year-to-date (,000)			
	Actual	Budget	Variance
Excess of Revenues over (under) Expenditures after Other Sources	<u>\$ 370</u>	<u>\$ 454</u>	<u>\$ (84)</u>

The Harris Center for Mental Health and IDD
Comparison of Revenue and Expenses - Actual to Budget
For the Second Month and Year to Date Ended October 31, 2022

	Month Ended October 31, 2022				Two Months Ended October 31, 2022			
	Actual	Budget	Variance		Actual	Budget	Variance	
			Favorable	or (Unfavorable)			Favorable	or (Unfavorable)
		\$	%			\$	%	
Total Revenues:								
Harris County and Local	\$ 4,697,074	\$ 5,017,894	\$ (320,820)	c -6%	\$ 9,888,325	\$ 10,035,757	\$ (147,432)	-1%
PAP / Samples	825,614	600,000	225,614	38%	1,694,244	1,250,000	444,244	36%
Interest	176,938	129,939	46,999	36%	287,539	259,878	27,661	11%
State General	9,657,719	9,507,002	150,717	2%	19,155,756	19,013,996	141,760	1%
State Grants	1,035,347	1,260,589	(225,242)	d -18%	2,228,034	2,521,178	(293,144)	-12%
Federal Grants	2,896,976	3,671,727	(774,751)	e -21%	5,929,538	7,382,322	(1,452,784)	-20%
3rd party billings	1,860,461	2,498,393	(637,932)	f -26%	4,416,742	4,996,835	(580,093)	-12%
Total Revenue	21,150,129	22,685,544	(1,535,415)	g -7%	43,600,178	45,459,966	(1,859,788)	-4%
Total Expenses:								
Salaries and Fringe	19,173,201	19,391,849	218,648	h 1%	37,778,059	38,790,396	1,012,337	3%
Travel	127,946	136,963	9,017	7%	266,173	297,196	31,023	10%
Contracts and Consultants	1,771,368	1,957,129	185,761	9%	3,446,936	3,914,258	467,322	12%
HCPC Contract	2,317,441	2,322,734	5,293	0%	4,634,882	4,645,468	10,586	0%
Supplies and Drugs	1,160,510	1,084,391	(76,119)	-7%	2,328,487	2,168,786	(159,701)	-7%
Equipment (Purch, Rent, Maint)	413,711	521,123	107,412	i 21%	630,318	1,042,245	411,927	40%
Building (Purch, Rent, Maint)	322,138	494,737	172,599	j 35%	557,367	989,470	432,103	44%
Vehicle (Purch, Rent, Maint)	84,076	85,228	1,152	1%	124,580	170,451	45,871	27%
Telephone and Utilities	269,364	287,156	17,792	6%	611,369	574,310	(37,059)	-6%
Insurance, Legal, Audit	135,646	176,437	40,791	23%	271,873	368,001	96,128	26%
Other	1,379,015	670,759	(708,256)	k -106%	2,005,471	1,354,002	(651,469)	-48%
Claims Denials	4,638	13,345	8,707	65%	8,602	26,692	18,090	68%
Total Expenses	27,159,054	27,141,851	(17,203)	l 0%	52,664,117	54,341,275	1,677,158	3%
Excess of Revenues over (under)								
Expenditures before Other Sources	(6,008,925) a	(4,456,307)	(1,552,618)		(9,063,939)	(8,881,309)	(182,630)	
Funds from other sources:				m				
Use of fund balance - CapEx	75,523	-	75,523		95,375	-	95,375	
Use of fund balance - COVID-19	-	-	-		-	-	-	
Fund Balance DSRIP	483,276	483,276	-		966,552	966,552	-	
Directed Payment Program	817,840	817,840	-		1,635,680	1,635,680	-	
Charity Care Pool	3,366,382	3,366,382	-		6,732,764	6,732,764	-	
COVID-19 FMAP Allocation	-	-	-		-	-	-	
Insurance Proceeds	3,142	-	3,142		3,195	-	3,195	
Proceeds from Sale of Assets	-	-	-		-	-	-	
Excess of Revenues over (under)								
Expenditures after Other Sources	\$ (1,262,762)	\$ 211,191	\$ (1,473,953)		\$ 369,627	\$ 453,687	\$ (84,060)	

The Harris Center for Mental Health and IDD
Comparative Balance Sheet
As of October 31, 2022

	Ending Balance		Increase/(Decrease)	
	September 30, 2022	October 31, 2022	October	
Assets				
Cash and Cash Equivalents	\$ 112,242,886	\$ 94,602,063	\$ (17,640,823)	a
Inventory - includes RX	395,848	390,498	(5,350)	b
Prepaid Expenses	5,427,763	7,124,072	1,696,309	c
A/R Medicaid, Medicare, 3rd Party	16,464,441	16,228,590	(235,851)	
Less Bad Debt Reserve	(6,905,823)	(6,355,632)	550,191	
A/R Other	26,188,913	28,678,556	2,489,643	d
A/R DSRIP	-	-	-	
Total Current Assets	<u>153,814,028</u>	<u>140,668,147</u>	<u>(13,145,881)</u>	
Land	6,434,748	6,434,748	-	
Building	25,389,494	25,389,494	-	
Building Improvements	21,175,215	21,175,215	-	
Furniture and Fixtures	6,897,646	6,897,646	-	
Vehicles	1,050,140	1,050,140	-	
Construction in Progress	27,044,911	27,121,784	76,873	
Total Property, Plant & Equipment	<u>87,992,154</u>	<u>88,069,027</u>	<u>76,873</u>	
TOTAL ASSETS	<u><u>\$ 241,806,182</u></u>	<u><u>\$ 228,737,174</u></u>	<u><u>\$ (13,069,008)</u></u>	
Liabilities and Fund Balance				
Unearned Income	\$ 26,555,436	\$ 19,498,063	\$ (7,057,373)	e
Accrued Payroll and Accounts Payables	22,518,101	18,250,175	(4,267,926)	f
Current Portion Long Term Debt	-	-	-	
Total Current Liabilities	<u>49,073,537</u>	<u>37,748,238</u>	<u>(11,325,299)</u>	
State Escheatment Payable	45,314	46,293	979	
Total Non Current Liabilities	<u>45,314</u>	<u>46,293</u>	<u>979</u>	
TOTAL LIABILITIES	<u>49,118,851</u>	<u>37,794,531</u>	<u>(11,324,320)</u>	
General Fund Balance	24,205,638	24,255,822	50,184	g
Nonspendable				
Investment in Inventories	440,682	390,498	(50,184)	
Investment In Fixed Assets	87,992,154	88,069,027	76,873	
Assigned:				
Current Capital Projects	11,031,399	10,955,876	(75,523)	
Future Purchases of Real Property and IT Infrastructure	1,365,842	1,365,842	-	
Self Insurance	2,000,000	2,000,000	-	
ECI Building Use	361,664	361,664	-	
Waiver 1115	57,899,142	57,415,866	(483,276)	h
COVID-19 eFMAP Reserve	904,067	904,067	-	
Compensated Absences	4,854,354	4,854,354	-	
Total	<u>191,054,942</u>	<u>190,573,016</u>	<u>(481,926)</u>	
Year to Date Excess Revenues over (under) Expenditures	1,632,389	369,627	(1,262,762)	
TOTAL FUND BALANCE	<u>192,687,331</u>	<u>190,942,643</u>	<u>(1,744,688)</u>	
TOTAL LIABILITIES AND FUND BALANCE	<u><u>\$ 241,806,182</u></u>	<u><u>\$ 228,737,174</u></u>	<u><u>\$ (13,069,008)</u></u>	

The Harris Center for Mental Health and IDD
Notes to the Preliminary Financial Reports
For Month and Year to Date Ended October 31, 2022

- I. Comparison of Revenue and Expenses
- a. For the month of October 2022, the second month of the fiscal year, the Harris Center is reporting excess Expenditures over Revenues of \$6,008,925.
 - b. The year-to-date amount translates to Excess Revenues over Expenses of \$369,627 after use of fund balance, fund balance CapEx, fund balance DSRIP, Charity Care Pool and Directed Payment Program revenues and insurance proceeds are considered.
 - c. Harris County and Local is unfavorable to budget by \$320,820 due to open positions and timing of expenses.
 - d. State Grants are unfavorable to budget by \$225,242 due to open positions and timing of construction expenses associated with the 6168 apartment project.
 - e. Federal grants are unfavorable to budget by \$744,751 primarily due to open positions, non-renewal of the Federal CH Navigation Services grant, and timing of expenses associated with evaluation and outreach in the Community Initiated Care grant.
 - f. Third Party billings are unfavorable to budget by \$637,932.
 - g. Total Revenue is unfavorable to budget by \$1,535,415.
 - h. Salaries and Fringe are favorable to budget by \$218,648 due to open positions.
 - i. Equipment is favorable to budget by \$107,412 due to timing of expenses in relation to budget.
 - j. Building is favorable to budget by \$172,599 due to timing of building repairs in relation to budget.
 - k. Other is unfavorable to budget by \$708,256 primarily due to recognition of cost associated with the Epic software maintenance agreement invoice received in October.
 - l. Total Expenses are unfavorable to budget by \$17,203.
 - m. Funds from other sources used to fund current month expenses totaled \$4,746,163 including DSRIP reserves, Directed Payment Program, insurance proceeds and use of CapEx funds. Projected Charity Care Pool funding is also included.

The Harris Center for Mental Health and IDD
Notes to the Preliminary Financial Statements
For Month and Year to Date Ended October 31, 2022

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 because of operations.

	Ending Balance		Increase (Decrease)
	9/30/2022	10/31/2022	October
Cash-General Fund Bank of America	7,024,043	7,024,043	\$ -
Cash-General Fund Chase	56,746,903	28,845,268	(27,901,635)
Cash-BOA ACH Vendor	401,748	251,675	(150,073)
Cash-Pharmacy Chase	16,532	29,116	12,584
Cash-FSA-Discovery	234,532	255,895	21,363
Petty Cash	5,950	5,950	-
Investments-TexPool General Fund	1,008,666	1,011,179	2,513
Investments-TexPool Self Insurance	2,305,124	2,310,867	5,743
Investments-TexPool Prime	20,995,178	31,579,251	10,584,073
Investments-Texas Class	23,504,210	23,288,819	(215,391)
	<u>\$ 112,242,886</u>	<u>\$ 94,602,063</u>	<u>\$ (17,640,823)</u>

- b. Inventory book balances are updated monthly utilizing calculations for inventory purchased and used during the month. Inventory balances are accurately updated annually after 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)
	09/30/2022	10/31/2022	October
Inventory-Central Supplies	2,561	2,561	\$ -
Supplies Purchased	-		\$ -
Supplies Used	(2,375)	(7,725)	(5,350)
Inventory-Drugs	395,662	395,662	-
Total Inventory	<u>\$ 395,848</u>	<u>\$ 390,498</u>	<u>\$ (5,350)</u>

- c. Prepaid Expenses increased due to HCPC activity.

The Harris Center for Mental Health and IDD
Notes to the Preliminary Financial Statements
For Month and Year to Date Ended October 31, 2022

II. Comparative Balance Sheet (continued)

d. Accounts Receivable Other increased in October.

	Ending Balance		Increase
	9/30/2022	10/31/2022	(Decrease) October
Villas at Bayou Park	95,312	95,312	-
Pear Grove	56,987	56,987	-
Pasadena Cottages	81,212	93,050	11,838
Employee	-	-	-
Pecan Village	4,401	4,401	-
Acres Homes Garden	210,452	215,746	5,294
Foundation	250	1,225	975
NAMI of Greater Houston	958	427	(531)
General Accounts Receivable	855,650	859,081	3,431
Pharmacy PBM	16,859	28,248	11,389
Harris County Projects	1,147,372	1,116,188	(31,184)
Harris County Juvenile Probation	126,661	371,807	245,146
Harris County Community Supervision	807,044	981,711	174,667
Harris County Sheriff's Department	5,955,432	6,583,549	628,117
ICFMR	209,203	208,702	(501)
TCOOMMI-Special Needs	944,847	1,156,024	211,177
TDCJ-Parole	82,000	102,500	20,500
TDCJ-Substance Abuse	66,664	83,331	16,667
TCOOMMI-Juvenile	111,401	142,242	30,841
Jail Diversion	1,431,038	1,292,565	(138,473)
ECI	680,837	1,105,948	425,111
ECI Respite	-	132	132
ECI SNAP	32,637	29,025	(3,612)
Federal CHH Navigation	287,674	14,373	(273,301)
Federal Aot	248,015	351,915	103,900
ARPA-COH-MCOT RR Expansion	1,051,469	991,323	(60,146)
ARPA-COH-Core HPD Expansion	112,727	122,180	9,453
Fed SAMHSA CCBHC Expansion	187,822	374,785	186,963
AR Fed ARPA TPWD Fam Well Ctr	-	4,920	4,920
AR Fed ARPA ECI	-	1,216	1,216
Fed ARPA COH-CIRT HPD Expansion	5,493	5,751	258
PATH-Mental Health Block Grant	101,876	213,446	111,570
MH Block Grant-Coordinated Specialty Care	130,578	187,077	56,499
TANF PFAF	2,418,038	-	(2,418,038)
Subtotal, A/R-Other	\$ 17,460,909	\$ 16,795,187	\$ (665,722)

The Harris Center for Mental Health and IDD
Notes to the Preliminary Financial Statements
For Month and Year to Date Ended October 31, 2022

II. Comparative Balance Sheet (continued)

d. Accounts Receivable Other (Continued)

	Ending Balance		Increase (Decrease)
	9/30/2022	10/31/2022	October
DSHS SAPT Block Grant	\$ 313,806	\$ 165,321	\$ (148,485)
AR State TCMHCC	24,813	-	(24,813)
Enhanced Community Coordinator	59,498	58,892	(606)
DSHS Mental Health First Aid	11,000	11,300	300
HHSC ZEST-Zero Suicide	23,765	47,927	24,162
HCC Open Door	370,887	497,909	127,022
HCS	22,416	22,416	-
Tx Home Living Waiver	293,639	280,655	(12,984)
DPP-BHS	1,792,384	1,146,328	(646,056)
Charity Care Pool	3,366,382	6,732,764	3,366,382
Fed ARPA COF-CIRT HPD	-	-	-
Helpline Contracts	67,913	63,256	(4,657)
City of Houston-CCSI	101,073	101,073	-
City of Houston-DMD	20,663	20,663	-
City of Houston-911 CCD Amended	22,933	(33,650)	(56,583)
A/R - HHSC Projects	2,187,332	2,714,515	527,183
Local Be Well Be Connected	49,500	54,000	4,500
Grand Total A/R - Other	\$ 26,188,913	\$ 28,678,556	\$ 2,489,643

- e. Unearned Income decreased due to use of State GR funds on hand.
- f. Accrued Payroll and Accounts Payable decreased because of payment timing related to accounts payable, payroll, and employee fringe benefit liabilities.
- g. General Fund Balance increased due to operations.
- h. Waiver 1115 Reserves decreased due to use of budgeted DSRIP reserves for operations.
Total DSRIP Reserves on hand at end of October equals \$57,415,866.
- i. Days of Operations in Reserve for Total Agency is 133 days versus 131 days for the prior month.

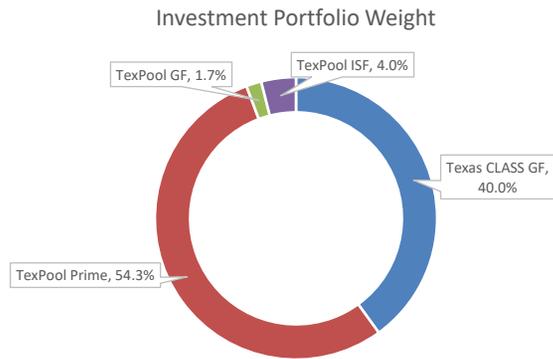
III. Investment Portfolio

- a. Total investments as of October 31, 2022 are \$58,190,116 of which 100% is in government pools.(Texas Class 40% and TexPool 60%)
- b. Investments this month yielded interest income of \$176,938.

The Harris Center for Mental Health and IDD
Investment Portfolio
October 31, 2022

Local Government Investment Pools (LGIPs)

	Beginning Balance	Transfer In	Transfer Out	Interest Income	Ending Value	Portfolio %	Yield
Texas CLASS							
Texas CLASS General Fund	\$ 23,504,210	\$ 8,100,000	\$ (8,400,000)	\$ 84,609	\$ 23,288,819	40.0%	3.229%
TexPool							
TexPool Prime	20,995,178	\$ 10,500,000	\$ -	84,073	31,579,251	54.3%	3.210%
TexPool General Fund	1,008,666			2,513	1,011,179	1.7%	2.934%
TexPool Internal Service Fund	2,305,124			5,743	2,310,867	4.0%	2.934%
TexPool Sub-Total	24,308,968	10,500,000	-	92,329	34,901,297	60.0%	3.184%
Total Investments	\$ 47,813,178	\$ 18,600,000	\$ (8,400,000)	\$ 176,938	\$ 58,190,116	100%	3.202%



3 Month Weighted Average Maturity (Days) **1.00**
3 Month Weighted Average Yield of The Harris Center Investment Portfolio **2.707%**
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 weeks) **2.629%**

This Investment Portfolio Report of The Harris Center for Mental Health and IDD as of October 31, 2022 is in compliance with the Public Funds Investment Act (PFIA), Chapter 2256 of the Texas Government Code and the Investment Strategy approved by the Board of Trustees.

Approved 

Hayden Hernandez, Accounting and Treasury Manager

The Harris Center for Mental Health and IDD
 Monthly Report of Financial Transactions Related to Payments of Liabilities for Employee Benefits

Report for October 2022

Vendor	Description	Monthly Not-To-Exceed*	Oct-22	YTD Total Through October
Lincoln Financial Group	Retirement Funds (401a, 403b, 457)	\$2,400,000	\$1,637,410	\$3,259,043
Blue Cross Blue Shield of TX	Health and Dental Insurance	\$2,600,000	\$2,281,518	\$4,597,538

* As established by the Board Resolution: Harris Center Board of Trustees Signature Authorization and Delegation Authority for Certain Items effective February 22, 2022.

Note: Non-employee portion of October payments of Liabilities for Employee Benefits = 11% of Expenditures.

EXHIBIT F-3

November 2022
NEW CONTRACTS OVER 100k



Executive Contract Summary

Contract Section ^

Contractor*

Critical Start

Contract ID #*

2022-0572

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

Critical Start and The Harris Center

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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* (?)

12/1/2022

Contract Term End Date* (?)

11/30/2025

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

3 years

Fiscal Year* (?)

2023

Amount* (?)

\$ 238,015.82

Fiscal Year* (?)

2024

Amount* (?)

\$ 215,784.71

Fiscal Year* (?)

2025

Amount* (?)

\$ 215,784.71

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- | | |
|---|--|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input checked="" type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input checked="" type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other <input type="text"/> |

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

Zscaler is part of The Harris Center's Zero Trust IT Architecture, providing computer network traffic protections and streamlined private network access for remote workforce members. The Zscaler technology suite empowers the IT department to reduce our cyber-attack surface, secure remote computers, and improve the remote workforce member computing experience.

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

FY20 - Vectra Software sales
 FY21 - OKTA and Vectra software sales
 FY22 - OKTA and Vectra software sales

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

Yes No Unknown

Please provide an explanation*

n/a

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Carahsoft_Zscaler, Inc. - 10.10.2022 - Quote 36180804.pdf	191.88KB
NuHarbor_Zscaler Quote - 10.10.2022.pdf	143.46KB
Zscaler Direct_Quote Document - _Q-170909_2022-10-10.pdf	997.84KB
Critical Start - Q-26730-The Harris Center for Mental Health and IDD - ZScaler ZIA Business Edition - 3 Yrs Paid.pdf	74.7KB

Vendor/Contractor Contact Person



Name*

Critical Start

Address *

Street Address

6100 Tennyson Parkway

Address Line 2

#200

City

Plano

Postal / Zip Code

75024-6101

State / Province / Region

TX

Country

US

Phone Number *

832-596-5023

Email *

jay.mckinzie@cyberonsecurity.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1147	\$ 238,015.82	900020
Budget Manager	Secondary Budget Manager	
Brown, Erica	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

Users - 1500 - \$125.17ea - \$187,755.00

Support - 1 - \$28,097.71

Deployment Advanced - 1 - \$22,231.11

Project WBS (Work Breakdown Structure)* (?)

IT23_1147_04 - \$200,000 - Year 1

IT23_1147_05 - \$38,015.82 - Year 1

Unit 1130 (CUF) - \$215,784.71 - Year 2

Unit 1130 (CUF) - \$215,784.71 - Year 3

Requester Name

Hurst, Richard

Submission Date

10/11/2022

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

10/11/2022

Procurement Approval

File Upload (?)

Approved by

Sharon Brauner

Approval Date

10/18/2022

Contract Owner Approval



Approved by

Mustafa Cechinnala

Approval Date

10/19/2022

Contracts Approval

Approve*

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

Approved by*

Shashyia Behu

Approval Date*

10/19/2022

EXHIBIT F-4

November 2022 AMENDMENTS OVER 100k

	CONTRACTORS	PRODUCT/SERVICE DESCRIPTION	PREVIOUS NTE AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	FY23 AMENDMENTS								
	ADMINISTRATION								
1	Metropolitan Landscape Management, Inc.	Agency-Wide Landscaping Services	\$200,000.00	\$38,880.00	\$238,880.00	09/01/22- 08/31/23	GR	RFP	This Amendment is to add various Facility Services at various Agency's locations as indicated below: 3902 West Little York location- \$14,500 TOTAL - 950 per cut plus 5% for fuel difference at \$11,970.00 plus \$2530 contingency in case additional cuts are needed during busy season. Add to 1805 / 569003 5959 Long Drive- \$2580.00 total - \$60.00 per cut x 43 Add to 1858 / 569003 Grade and seed area at back of 6160 S. Loop East- quote is \$21,800.00. Add to 1869/569003 TOTAL INCREASE AMOUNT- \$38,880.00
2	Safeway, Inc.	Pharmacy Drug Dispensing Services	\$100,000.00	\$40,000.00	\$140,000.00	09/01/22- 08/31/23	GR	RFP	This Amendment is to increase funds to add vaccine services for our patients.
3	Diamond Drugs, Inc. dba Diamond Pharmacy Services	Drug Dispensing Services	\$324,300.00	\$77,246.31	\$401,546.31	10/01/22- 09/30/23	County	Tag-On	This Amendment is for additional funding to existing contract to continue pharmacy services on-going for clients in the residential treatment facility.
4	Master Pool-MKTG-HMHC (Healthy Minds Healthy Communities)	Marketing Firms	\$750,000.00	\$122,000.00	\$872,000.00	09/01/22- 11/30/24	Federal Grant	RFP	Marketing firms (2) being contracted to work with digital impact team on the Healthy Minds, Healthy Communities Initiative for the duration of the ARPA grant. Requesting contract language and NTE to be updated to include additional funds and to add branding and design services to the SOW.
5	Universal Protection Service, LP dba Allied Universal Security Services	Agency Wide Security Guard Services	\$895,884.60	\$1,249.20	\$897,133.80	09/01/22- 08/31/23	GR	RFP	This Amendment is to increase NTE amount to add units in the contract for coverage needed at the Wichita Cottages A & B, after a routine fire alarm inspection was performed by Johnson Controls 10-12-2022 and recommended fire panel be replaced and put red tag on the fire system. Mr. Chacon from City of Pasadena Fire Marshal office is requesting fire watch to be conducted around the clock until the red tag is removed. No changes to the other units on this contract.
6	McKesson Corporation	Agency-Wide Medical Supplies	\$295,377.00	\$200.00	\$295,577.00	09/01/22- 08/31/23	GR	Tag-On	This Amendment is to add Unit #3692 with a line budget of \$200.00 to provide agency-wide medical supplies.
	CPEP/CRISIS SERVICES								
7	Harris County Community Services Department	Comprehensive Residential Rehabilitation Services	\$1,716,012.00	\$0.00	\$1,716,012.00	03/08/22- 09/30/23	County	Consumer Driven	This Amendment is to extend the end date from September 30, 2022 to September 30, 2023 to provide comprehensive residential rehabilitation services to eligible homeless persons being assisted through CCHP in order to secure transition to accessible permanent housing options.
	FORENSICS								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								



Executive Contract Summary

Contract Section ^

Contractor*

Metropolitan Landscape Management, Inc.

Contract ID #*

2021-0116

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/15/2022

Parties* (?)

Metropolitan Landscape Management, Inc and The Harris Center

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input checked="" 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* (?)

9/1/2022

Contract Term End Date* (?)

8/31/2023

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

Current Contract Amount*

\$ 200,000.00

Increase Not to Exceed*

\$ 38,880.00

Revised Total Not to Exceed (NTE)*

\$ 238,880.00

Fiscal Year* (?)	Amount* (?)
2023	\$ 238,880.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

- | | |
|---|--|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input checked="" type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input checked="" type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other |

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

add services for the 3902 West Little York location - \$14,500 TOTAL - 950 per cut plus 5% for fuel difference at \$11,970.00 plus \$2530 contingency in case we need extra cuts during busy season add to 1805 / 569003

add services for 5959 Long Drive location - \$2580.00 total - \$60.00 per cut x 43 add to 1858 / 569003 as its for the grassy area between the two buildings

quote to grade and seed area at back of 6160 S Loop East that was torn up during roofing work and fence replacement - quote is \$21,800.00 and will be for 1869/569003

TOTAL Amount of increase is \$38,880.00 on 1899/569003

Contract Owner*
Todd McCorquodale

Previous History of Contracting with Vendor/Contractor*
 Yes No Unknown

Please add previous contract dates and what services were provided*
2016 to present - landscaping/mowing

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)
 Yes No Unknown

Community Partnership* (?)
 Yes No Unknown

Supporting Documentation Upload (?)

Metropolitan add 5959 Long Drive.msg	136KB
Metropolitan NW new property.msg	168.5KB
Metropolitan Proposal- Seeding and grading East side- 6160 S Loop 9-22-22.docx	50.31KB

Vendor/Contractor Contact Person 

Name*
Metropolitan Landscape Management, Inc. / Gerald (Jerry) Thompson

Address *

Street Address

3439 West Benders Landing Boulevard

Address Line 2

City

Spring

Postal / Zip Code

77386-1765

State / Province / Region

TX

Country

US

Phone Number *

2817886926

Email *

jerrythomp@gmail.com

Budget Section



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1899	\$ 38,800.00	569003

Budget Manager

Brown, Erica

Secondary Budget Manager

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

see attached quotes for individual buildings/units but
TOTAL Amount of increase is \$38,880.00 on 1899/569003

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Harper, Sarah

Submission Date

9/28/2022

Budget Manager Approval(s)



Approved by

Erica Brown

Approval Date

9/28/2022

Procurement Approval



File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval



Approved by

Todd McCorquodale

Approval Date

9/29/2022

Contracts Approval

Approve *

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

Approved by *

Shashya Behn

Approval Date *

9/29/2022



Executive Contract Summary

Contract Section



Contractor*

Safeway Inc.

Contract ID #*

7757

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

The Harris Center and Safeway Inc.

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input checked="" 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* (?)

9/1/2022

Contract Term End Date* (?)

8/31/2023

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

Current Contract Amount*

\$ 100,000.00

Increase Not to Exceed*

\$ 40,000.00

Revised Total Not to Exceed (NTE)*

\$ 140,000.00

Fiscal Year* (?)	Amount* (?)
2023	\$ 140,000.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- | | |
|---|--|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input checked="" type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other |

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

Amendment to our existing contract (ID #7757, PO CT142402) to add vaccine services for our patients.

Contract Owner*

Angela Babin

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

9.1.2021 - 8.31.2022

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

The Harris Center for Mental Health and IDD DBA 2022.pdf	279.67KB
--	----------

Vendor/Contractor Contact Person

Name*

Julie Spier

Address*

Street Address

14610 Memorial Drive

Address Line 2

City

Houston

Postal / Zip Code

77079

State / Province / Region

TX

Country

US

Phone Number*

713.268.3861

Email *

julie.spier@safeway.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1135	\$ 40,000.00	547003
Budget Manager Campbell, Ricardo		Secondary Budget Manager Brown, Erica

Provide Rate and Rate Descriptions if applicable* (?)

N/A

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Babin, Angela

Submission Date

10/5/2022

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

10/6/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Angela Babin

Approval Date

10/7/2022

Contracts Approval

Approve*

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

Approved by *

Shasthya Bahu

Approval Date *

10/7/2022



Executive Contract Summary

Contract Section



Contractor*

Diamond Pharmacy Services

Contract ID #*

7247

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

Diamond Pharmacy Services and The Harris Center for MH and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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* (?)

10/1/2022

Contract Term End Date* (?)

9/30/2023

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

county fiscal year

Current Contract Amount*

\$ 324,300.00

Increase Not to Exceed*

\$ 77,246.31

Revised Total Not to Exceed (NTE)*

\$ 401,546.31

Fiscal Year* (?)

2023

Amount* (?)

\$ 77,246.31

Funding Source*

County

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* (?)

Additional funding is being added to existing contract to keep pharmacy services on-going for clients in the residential treatment facility.

Contract Owner*

Monalisa Jiles

Previous History of Contracting with Vendor/Contractor*

- Yes
- No
- Unknown

Please add previous contract dates and what services were provided*

2/1/22 - 9/30/22 Pharmacy Services

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

- Yes
- No
- Unknown

Community Partnership* (?)

- Yes
- No
- Unknown

Specify Name*

Harris County

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person



Name*

Jennifer A. Pittore

Address*

Street Address

645 Kolter Drive

Address Line 2

City

Indiana

Postal / Zip Code

15701

State / Province / Region

PA

Country

US

Phone Number*

724-349-1111 ext 1038

Email*

japittore@diamondpharmacy.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6401	\$ 39,999.66	547001

Budget Manager	Secondary Budget Manager
Williams-Wesley, Sheenia	Jiles, Monalisa

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6303	\$ 37,246.65	547001

Budget Manager	Secondary Budget Manager
Williams-Wesley, Sheenia	Jiles, Monalisa

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name	Submission Date
Williams-Wesley, Sheenia	10/13/2022

Budget Manager Approval(s)

Approved by

Sheenia Williams-Wesley

Approval Date

10/13/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Monalisa Jiles

Approval Date

10/13/2022

Contracts Approval

Approve *

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

Approved by *

Shaskya Belu

Approval Date *

10/18/2022



Executive Contract Summary

Contract Section



Contractor*

P-MKTG-HMHC (Healthy Minds Healthy Communities)

Contract ID #*

2022-0399

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

The Harris Center for Mental Health and IDD & ATime 4Marketing
The Harris Center for Mental Health and IDD & Langrand
(pooled contract with 2 vendors)

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input checked="" 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* (?)

9/1/2022

Contract Term End Date* (?)

11/30/2024

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

Dec. 1 - Nov. 30

Current Contract Amount*

\$ 750,000.00

Increase Not to Exceed*

\$ 122,000.00

Revised Total Not to Exceed (NTE) *

\$ 872,000.00

Fiscal Year* (?)	Amount* (?)
2023	\$ 379,812.50

Fiscal Year* (?)	Amount* (?)
2024	\$ 432,187.50

Fiscal Year* (?)	Amount* (?)
2025	\$ 60,000.00

Funding Source *

Federal Grant

Contract Description / Type* (?)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input checked="" type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input checked="" type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other |

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

Marketing firms (2) being contracted to work with digital impact team on the Healthy Minds, Healthy Communities Initiative for the duration of the ARPA grant. Requesting contract language and NTE to be updated to include additional funds and services to add branding and design aspects to SOW.

Funding breakdown:

- FY23: September 1, 2022 - December 31, 2022 - \$131,312.50
- FY23: January 1, 2023 - August 31, 2023 - \$248,500.00
- FY24: September 1, 2023 - December 31, 2023 - \$187,500.00
- FY24: January 1, 2024 - August 31, 2024 - \$244,687.50
- FY25: September 1, 2024 - November 30, 2024 - \$60,000.00

Contract Owner*

Jennifer Battle

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 *

ATIME-4Marketing

Address *

Street Address

3409 Charleston Street

Address Line 2

City

Houston

Postal / Zip Code

77021

State / Province / Region

Texas

Country

USA

Phone Number *

713-369-4358

Email *

kathy@atime4marketing.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
7008	\$ 379,812.50	542000
Budget Manager	Secondary Budget Manager	
Ilejay, Kevin	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

NA (provided in proposals submitted by vendors)

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Smith, Janai

Submission Date

10/14/2022

Budget Manager Approval(s)

Approved by

Kevin Ilejay

Approval Date

10/14/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by



Approval Date

10/14/2022

Contracts Approval

Approve*

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

Approved by*

Shaskeyia Behm

Approval Date*

10/21/2022



Executive Contract Summary

Contract Section



Contractor*

Universal Protection Service, LP DBA Allied Universal Security Services

Contract ID #*

7798

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

The Harris Center and Universal Protection Service, LP DBA Allied Universal Security Services

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|---|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input checked="" 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 <input type="text"/> |

Funding Information*

- New Contract
- Amendment

Contract Term Start Date* (?)

9/1/2022

Contract Term End Date* (?)

8/31/2023

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

Current Contract Amount*

\$ 895,884.60

Increase Not to Exceed*

\$ 1,249.20

Revised Total Not to Exceed (NTE)*

\$ 897,133.80

Fiscal Year* (?)

2023

Amount* (?)

\$ 897,133.80

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* (?)

Need to add units to contract for coverage needed at the Wichita Cottages A & B after a routine fire alarm inspection was performed by Johnson Controls 10-12-2022 and recommended fire panel be replaced and put red tag on the fire system. Mr. Chacon from City of Pasadena Fire Marshal office is requesting fire watch to be conducted around the clock until the red tag is removed.

No changes to the other units on this contract.

Contract Owner*

Anthony Robinson

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

The past two years Allied has provided security coverage.

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person



Name*

Fernando Janos Arcia

Address *

Street Address

11811 North Freeway suite 810

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77060

Country

US

Phone Number*

346.831.8149

Email*

janos.arcia@aus.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1874	\$ 624.60	583000

Budget Manager	Secondary Budget Manager
Brown, Erica	Campbell, Ricardo

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1875	\$ 624.60	583000

Budget Manager	Secondary Budget Manager
Brown, Erica	Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

FY23's rate is \$17.35 p/h for security services. No overtime can be charged

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Mackinney, Eggl

Submission Date

10/14/2022

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

10/18/2022

Procurement Approval

File Upload (?)

Approved by

Approval Date

Sign

Contract Owner Approval



Approved by

Approval Date

D. Anthony Robinson

10/18/2022

Contracts Approval

Approve *

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

Approved by *

Approval Date *

Shasteyia Belm

10/18/2022



Executive Contract Summary

Contract Section



Contractor*

MCKESSON CORPORATION

Contract ID #*

7137

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

McKesson Medical Surgical, Inc. and The Harris Center

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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* (?)

9/1/2022

Contract Term End Date* (?)

8/31/2023

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

Current Contract Amount*

\$ 295,377.00

Increase Not to Exceed*

\$ 200.00

Revised Total Not to Exceed (NTE)*

\$ 295,577.00

Fiscal Year* (?)

2023

Amount* (?)

\$ 295,577.00

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* (?)

Adding Unit #3692 (Pasadena Cottage A) with a line budget of \$200.00

Contract Owner*

Kia Walker

Previous History of Contracting with Vendor/Contractor*

- Yes
- No
- Unknown

Please add previous contract dates and what services were provided*

Previous 10+ years. Agency-wide medical supplies.

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

- Yes
- No
- Unknown

Community Partnership* (?)

- Yes
- No
- Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person



Name*

SARAH ZUJIC

Address*

Street Address

MCKESSON MEDICAL SURGICAL, INC

Address Line 2

P.O. BOX 933027

City

ATLANTA

State / Province / Region

GA

Postal / Zip Code

31193-3027

Country

USA

Phone Number*

713-377-4677

Email*

sarah.zujic@mckesson.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3692	\$ 200.00	547002
Budget Manager Adams-Austin, Mamie	Secondary Budget Manager Kerlegon, Charles	

Provide Rate and Rate Descriptions if applicable* (?)

Various rates for medical supplies

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name

Arceneaux, Linda

Submission Date

10/12/2022

Budget Manager Approval(s)

Approved by

Mamie Adams

Approval Date

10/12/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Kia Walker

Approval Date

10/20/2022

Contracts Approval

Approve*

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

Approved by*

Shadeyia Belm

Approval Date*

10/20/2022



Executive Contract Summary

Contract Section


Contractor*

Harris County Community Services Department

Contract ID #*

NA

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

Harris County Community Services Department and The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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 checked="" 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* (?)

3/8/2022

Contract Term End Date* (?)

9/30/2023

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

Current Contract Amount*

\$ 1,716,012.00

Increase Not to Exceed*

\$ 0.00

Revised Total Not to Exceed (NTE)*

\$ 1,716,012.00

Fiscal Year* (?)	Amount* (?)
2022	\$ 942,425.00

Fiscal Year* (?)	Amount* (?)
2023	\$ 773,587.00

Funding Source*

County

Contract Description / Type* (?)

- | | |
|---|--|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input checked="" type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other |

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

Amendment is to extend the end date from September 30, 2022 to September 30, 2023 to provide comprehensive residential rehabilitation services to eligible homeless persons being assisted through CCHP in order to secure transition to accessible permanent housing options

Program Director: LaDarryl Campbell

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

Yes, currently

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Harris County Community Services Dept. attachment.pdf 343.77KB

Vendor/Contractor Contact Person



Name*

Natalie.Garcia

Address *

Street Address

8401 Lantern st.

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77054

Country

US

Phone Number *

8329274774

Email *

Natalie.Garcia@csd.hctx.net

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
9243	\$ 0.00	435045

Budget Manager

Ramirez, Priscilla

Secondary Budget Manager

Puente, Giovanni

Provide Rate and Rate Descriptions if applicable * (?)

na

Project WBS (Work Breakdown Structure) * (?)

na

Requester Name

Singh, Patricia

Submission Date

10/13/2022

Budget Manager Approval(s)

Approved by

Priscilla M. Ramirez

Approval Date

10/14/2022

Contract Owner Approval

Approved by

KIM KORNMEYER

Approval Date

10/14/2022

Contracts Approval

Approve *

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

Approved by *

Shadeyia Behm

Approval Date *

10/21/2022

EXHIBIT F-5



**DUE DILIGENCE
QUOTES / TAG ON
PROJECT NUMBER FY23-0254
ZSCALER ZERO TRUST REMOTE ACCESS CYBER DEFENSE**

Purchasing received a request from the IT Department for Zscaler Zero Trust Remote Access Cyber Defense in October 2022. The request is for a three (3) year subscription of Zscaler Business Edition. Zscaler is part of The Harris Centers Zero Trust IT Architecture, providing computer network traffic protections and streamlined private network access for remote workforce members. The Zscaler technology suite empowers the IT department to reduce our cyber-attack surface, secure remote computers, and improve the remote workforce member computing experience. The IT department has performed an extensive proof of concept on this solution.

Quotes were obtained from four (4) vendors, Carahsoft Technology Corp, Critical Start, NuHarbor Security and (direct from) Zscaler.

Carahsoft Technology Corp - \$951,878.24
 Critical Start - \$669,585.24
 NuHarbor Security - \$1,139,750.00
 Zscaler - \$894,772.75

IT's recommendation is to move forward with Critical Start. The selection is based on lower cost. There is a tag on contract, DIR-CPO-4444, with Critical Start through State of Texas Department of Information Resources (DIR) tag on contract opportunity. As a member of the State of Texas Cooperative, The Harris Center can tag on to DIR contracts.

Year One Total NTE: \$238,015.82
 Year Two Total NTE: \$215,784.71
 Year Three Total NTE: \$215,784.71
 Three Year Total NTE: \$669,585.24

The Funding Source is Unit 1147 (IT Infrastructure Project) and GL Account 900020 (Software Purchases) and Project Accounting Codes IT23-1147-04 and IT23-1147-05 (\$200,000.00 will be allocated to IT23-1147-04 and \$469,585.24 will be allocated to IT23-1147-05).

Frances Otto

Digitally signed by
 Frances Otto
 Date: 2022.10.24
 08:25:22 -05'00'

Frances Otto, CTCD
 Buyer II

**Sharon
 Brauner**

Digitally signed by Sharon
 Brauner
 Date: 2022.10.24
 08:37:56 -05'00'

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

Steve Evans

Digitally signed by Steve
 Evans
 Date: 2022.10.24
 08:50:41 -05'00'

Steve Evans
 Controller

EXHIBIT F-6



Award Recommendation
Furniture for the Neuro Psychiatric Center (NPC) RFP
Project# FY23-0251

The Request for Proposal opened for Furniture for the Neuro Psychiatric Center (NPC) on Monday, October 3, 2022, at 11:00 A.M.

The Project Team consisted of the following members: James Blunt, Buyer II, Sharon Brauner, Purchasing Manager, Todd McCorquodale, Director Facilities Services, Anthony Robinson, Vice President Risk Management, Evelyn Locklin, Director, Emergency Services, Edgar Barron and Steven Cheatham with MStrategic.

Forty-five (45) vendors were contacted. The specifications were posted on three (3) local newspapers, The Harris Center's web site, the State of Texas Electronic State Business Daily website, Women's Business Enterprise Alliance (WBEA), Houston Minority Supplier Development Council (HMSDC) and Houston Business Journal.

Received three (3) responses. Three (3) responses were deemed responsive and evaluated by the project team.

Recommended Vendor:

J. Tyler Services, Inc.

The team members rated each response using a qualitative approach. Based on the project team's evaluation of responses received, it is recommended J. Tyler Services, Inc. be selected based on best value to the Agency.

The contract shall commence with a tentative award date, and shall remain in effect unless terminated, cancelled or extended.

The total NTE (Not to Exceed) for the contract is \$317,647.89 with a contingency of \$32,352.11 for a total NTE amount of \$350,000.00. Funding source is 1126-900040, Project Accounting Code is FM21.1126.02 for services and contingency.

Submitted By:

James Blunt
Digitally signed by James Blunt
 Date: 2022.10.21 14:06:47 -05'00'

James Blunt, C.P.M.
 Buyer II

Recommended By:

Sharon Brauner
Digitally signed by Sharon Brauner
 Date: 2022.10.21 14:11:30 -05'00'

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

Steve Evans
Digitally signed by Steve Evans
 Date: 2022.10.21 14:38:22 -05'00'

Steve Evans,
 Controller

EXHIBIT F-7

Status **Pending** PolicyStat ID **12434434**

Origination	10/2020
Last Approved	N/A
Effective	Upon Approval
Last Revised	10/2020
Next Review	1 year after approval

Owner	Kendra Thomas: Counsel
Area	Leadership
Document Type	Agency Policy

LD1A Business Associate and Subcontractor Policy

1. PURPOSE:

The purpose of this policy is to ensure The Harris Center executes Business Associate agreements in compliance with the relevant provisions of Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended, to establish the permitted and required uses and disclosures of Protected Health Information).

2. POLICY:

It is the policy of The Harris Center to enter into business associate agreements in compliance with the relevant provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended. The Business Associate agreements shall comply with the federal requirements.

The contracts shall establish the permitted and required uses and disclosures of Protected Health Information by the business associate. The contract may not authorize the business associate to use or further disclose the information in a manner that would violate the requirements of HIPAA, if done by the Harris Center, except that:

- The contract may permit the business associate to use and disclose protected health information for the proper management and administration of the business associate as provided by HIPAA
- To carry out the legal responsibilities of the business associate; and
- The contract may permit the business associate to provide data aggregation services related to the Harris Center's operations.

A covered entity may disclose Protected Health Information to a business associate and may allow a

business associate to create, receive, maintain, or transmit Protected Health Information on its behalf, if the covered entity obtains satisfactory assurances that the business associate will appropriately safeguard the information. A covered entity is not required to obtain such satisfactory assurances from a business associate that is a subcontractor. A business associate may disclose Protected Health Information to a business associate that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Health Information on its behalf, if the business associate obtains satisfactory assurances, that the subcontractor will appropriately safeguard the information.

The Business Associate must sign a Business Associate Agreement prior to the disclosure of protected health information on behalf of The Harris Center and must document the satisfactory assurances.

A covered entity is not in compliance, if the covered entity knew of a pattern of activity or practice of the Business Associate that constituted a material breach or violation of the business associate's obligation under the contract or other arrangement, unless the covered entity took reasonable steps to cure the breach or end the violation, as applicable, and, if such steps were unsuccessful, terminated the contract or arrangement, if feasible. A covered entity is not in compliance, if the covered entity knew of a pattern of activity or practice of a subcontractor that constituted a material breach or violation of the subcontractor's obligation under the contract or other arrangement, unless the covered entity took reasonable steps to cure the breach or end the violation, as applicable, and, if such steps were unsuccessful, terminated the contract or arrangement, if feasible.

If a Business Associate discovers a breach, the breaching party will have the opportunity to cure the breach or end the violation. If the breaching party does not cure the breach or end the violation within a reasonable time frame, or if a material term of the agreement has been breached and a cure is not possible, the non-breaching party may terminate the agreement, upon written notice to the breaching party. A business associate is not in compliance with the federal standards, if the business associate knew of a pattern of activity or practice of a subcontractor that constituted a material breach or violation of the subcontractor's obligation under the contract or other arrangement, unless the business associate took reasonable steps to cure the breach or end the violation, as applicable, and if such steps were unsuccessful, terminated the contract or arrangement, if feasible.

3. APPLICABILITY/SCOPE

All Harris Center programs, employees, volunteers, interns, contractors, subcontractors and business associates.

4. RELATED POLICIES/FORMS (for reference only):

Business Associate Agreement

5. REFERENCES: RULES/REGULATIONS/ STANDARDS:

Health Insurance Portability and Accountability Act of 1996,45 C.F.R. Parts 160 and 164

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	11/2022
Compliance Review	Anthony Robinson: VP	11/2022
Initial Assignment	Shannon Fleming: Counsel	11/2022
Initial Assignment	Kendra Thomas: Counsel	10/2022

EXHIBIT F-8

Status **Pending** PolicyStat ID **12622257**

Origination 01/2022
 Last Approved N/A
 Effective Upon Approval
 Last Revised 01/2022
 Next Review 1 year after approval

Owner Michael Dangerfield: Dir
 Area Rights & Responsibilities
 Document Type Agency Policy

RR3A Assurance of Individual Rights

1. PURPOSE:

The purpose of this policy is to assure the protection of civil and human rights for all individuals receiving services through The Harris Center for Mental Health and IDD (The Harris Center) and to assure that the rights of individuals are not violated.

2. POLICY:

It is the policy of The Harris Center that an individual receiving services from The Harris Center shall have the same rights, benefits and privileges guaranteed by state and federal laws. The Harris Center will ensure the protection of these rights through its policies and procedures. All services shall be provided in a manner consistent with recognized professional and ethical standards. The Harris Center shall promote the rights of the consumers to be free from humiliation and the right to informed consent or refusal or expression of choice regarding composition of the service delivery team.

3. APPLICABILITY/SCOPE:

All Harris Center employees, contract providers, contract personnel, volunteers, students, clients and family/legally authorized representative as applicable.

4. PROCEDURES:

[RR3B Assurance of Individual Rights](#)

Administrative Hearings, Individual Complaints, Appeals, and Fair Hearing Procedures

5. RELATED POLICIES/FORMS (for reference only):

The Harris Center Individual Rights handbook

6. REFERENCES: RULES/REGULATIONS/STANDARDS:

Individual Rights Handbooks- The Harris Center

Texas Health & Safety Code, Chapter, 592-Rights of Persons with an Intellectual Disability

Texas Health & Safety Code, Chapter, 593- Admission & Commitment to Intellectual Disability Services

Texas Health & Safety Code, Chapter 576- Rights of Patients

Title 25 Texas Administrative Code Chapter 401, Subchapter G- Local Mental Health Authority Notification and Appeal

Title 25 Texas Administrative Code Chapter 404, Subchapter E-Rights of Persons Receiving Mental Health Services

Title 25 Texas Administrative Code Chapter 414, Subchapter L-Abuse, Neglect, and Exploitation in Local Authorities and Community Center

Title 40 Texas Administrative Code Chapter 2, Subchapter A- Local Authority Notification and Appeal

Title 40 Texas Administrative Code Chapter 4, Subchapter D-Administrative Hearings under Texas Health & Safety Code, Title 7, Subtitle D

CARF: Section 1. Subsection K., Rights of Person Served

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	11/2022
Department Review	Anthony Robinson: VP	11/2022

Initial Assignment

Michael Dangerfield: Dir

11/2022

EXHIBIT F-9

Status **Pending** PolicyStat ID **12167871**



Origination	N/A
Last Approved	N/A
Effective	Upon Approval
Last Revised	N/A
Next Review	1 year after approval

Owner	Michael Dangerfield: Dir
Area	Rights & Responsibilities

Compliance Plan FY23

1. TABLE OF CONTENTS

I. INTRODUCTION

1. Overview
2. Application of Compliance Plan Guidance
3. THE HARRIS CENTER'S Purpose, Mission, Vision, and Core Values

II. COMPLIANCE DEPARTMENT REPORTING STRUCTURE

III. STATUTES, LAWS, REGULATIONS/ REGULATORY BODIES

IV. COMPLIANCE PLAN ELEMENTS 1 – 7

Element 1. Written Policies and Procedures

- A. Standards of Behavior
- B. Common Risk Areas
- C. Claim Development and Submission Process
- D. Integrity of Data Systems

- E. Retention of Records
- F. Compliance as an Element of a Performance Plan

Element 2. Designation of a Compliance Director and a Compliance Committee

- A. Compliance Director
- B. Compliance Committee

Element 3. Conducting Effective Training and Education

Element 4. Developing Effective Lines of Communication

Element 5. Enforcing Standards through Well-Publicized Disciplinary Guidelines

Element 6. Auditing and Monitoring

Element 7. Responding to Detected Offenses and Developing Corrective Action Initiatives

- A. Violations
- B. Investigations/Reporting Procedure
- C. Corrective Actions

V. THE HARRIS CENTER COMPLIANCE PROGRAM EFFECTIVENESS

1. Code of Conduct
2. Regular Review of Compliance Program Effectiveness

VI. SELF-REPORTING

VII. CONCLUSION

I. INTRODUCTION

1. Overview.

THE HARRIS CENTER for Mental Health and IDD (THE HARRIS CENTER) is proud of the standards that drive our success. These standards help create an environment and culture that places great value on business ethics and personal integrity, which are demonstrated through the services we provide. THE HARRIS CENTER is committed to conducting its business in an ethical and law-abiding fashion. We are intolerant of violations of any applicable federal, state, or local laws, and regulations. THE HARRIS CENTER will maintain a business culture that builds and promotes compliance consciousness and encourages employees to conduct all business with honesty and integrity. THE HARRIS CENTER's commitment to compliance includes communicating to all employees and contractors clear business ethical guidelines to follow; providing general and specific education regarding applicable laws, regulations, and policies; and providing monitoring and oversight to help ensure that THE HARRIS

CENTER meets our compliance commitment. THE HARRIS CENTER promotes open and free communication regarding our ethical and compliance standards and provide a work environment free of retaliation.

As we strive to become the most innovative behavioral health system in the country, it is imperative we understand and adhere to the standards and principles set forth in this document and protect the integrity of THE HARRIS CENTER. The goal of the Compliance Department (Compliance) is to continually improve the agency's awareness and accountability, while increasing the agency's responsiveness to those we serve using a corporate compliance model. The compliance model is developed in accordance with guidance provided by the Office of Inspector General (OIG) of the Department of Health and Human Services concerning the elements of an effective compliance plan.

2. Application of Compliance Plan Guidance

The purpose of THE HARRIS CENTER Compliance Plan is to provide uniform guidance for the provision of services by THE HARRIS CENTER, including billing and accounting activities. THE HARRIS CENTER's Clinical Transformation and Quality Department (formerly Program Improvement Department) maintains THE HARRIS CENTER's quality management and performance improvement plans, protocols, and processes that support the overarching agency Compliance Plan; please refer to the Performance Improvement Plan for further details. THE HARRIS CENTER's Compliance Plan is a comprehensive strategy to ensure:

- a. Services are provided and documented according to applicable regulations.
- b. Claims submitted to all payers, including private entities, government agencies and consumers are consistently accurate.
- c. Accounting of collections is consistently accurate.
- d. THE HARRIS CENTER employees comply with the applicable laws, policies/procedures and regulations, and payer requirements relating to its participation in these programs.\

3. THE HARRIS CENTER'S Purpose, Mission, Vision, and Core Values

Our Purpose

THE HARRIS CENTER is committed to providing professional, comprehensive, and quality care to individuals with mental health and intellectual and developmental disabilities (IDD). The obligation to implement this plan is shared by all employed by THE HARRIS CENTER, including direct care staff, administrative staff, support staff, contracted providers, and other agency affiliates.

Healthcare is one of the most highly regulated industries in the country and there are many laws and regulations, which may not be directly addressed herein. Although an exhaustive list of all applicable regulations is not presented here, all regulations are important to THE HARRIS CENTER and may be addressed elsewhere within the agency's governing documentation.

The Compliance Plan serves to outline the agency's ethical commitment, standards of conduct, and legal and regulatory requirements. This plan also communicates the organization's pledge to operate by established guidelines, statutes, rules, regulations and policies set by government, executive leadership of THE HARRIS CENTER, and negotiated agreements.

Our Mission

Transform the lives of people with behavioral health and IDD needs.

Our Vision

Empower people with behavioral health and IDD needs to improve their lives through an accessible, integrated and comprehensive recovery-oriented system of care.

Our Core Values

- Collaboration
- Compassion
- Excellence
- Integrity
- Leadership
- Quality
- Responsiveness
- Safety

II. COMPLIANCE DEPARTMENT REPORTING STRUCTURE:

Framework:

THE HARRIS CENTER's Compliance Plan has the following primary components:

The Audit/Compliance Committee: *Refer to Element 2 of this document*

Chief Executive Officer:

Serves as the Executive Director for all operations at THE HARRIS CENTER. Reports to the Board of Trustees.

Vice President – Enterprise Risk Management:

Oversees the Department of Compliance and Right's Office. Works closely with the Executive Team and actively engages in critical operations and top emerging issues to provide guidance in developing effective compliance strategies. Researches, recommends, and implements best practice tools and methodologies for THE HARRIS CENTER.

Compliance Director: *Refer to Element 2 of this document*

Compliance Auditor:

The compliance auditor is tasked with helping to ensure that THE HARRIS CENTER is adhering to federal,

state, and local laws and regulations relevant to its business practices and services rendered. The compliance auditor will have specialized training and appropriate credentials and is responsible for coordinating and/or assisting with the management of both internal agency audits and external audits or reviews as necessary. Compliance auditors, during or at the close of a review, will make recommendations based on audit findings to assist the agency in adopting changes to procedures or practices that are out of compliance with stated regulations. Compliance auditors will also analyze potential risks and gaps within operational areas of THE HARRIS CENTER in order to avoid non-compliance.

THE HARRIS CENTER's compliance auditors will conduct audits in accordance with an approved audit schedule, which allows for review of agency programs at least annually, but more frequently for programs or areas requiring more intensive review. All audits and reviews will be executed in accordance with appropriate standards, policies, procedures and within the scope of the authority that is granted. THE HARRIS CENTER shall ensure that audits are adequately developed, initiated by persons with appropriate knowledge and experience, and utilize audit tools and protocols that are periodically updated to reflect changes in applicable laws and regulations.

Compliance auditors will also monitor any violations reported against THE HARRIS CENTER and actively assist in the development of responses and plans, including education and training, to address the violations.

Operational Vice Presidents:

The Vice Presidents are responsible for divisional oversight and assuring that the compliance plan is implemented and adhered to throughout the divisions they supervise. They are responsible for being aware of divisional monitoring activities and will be required to sign audit and review reports, acknowledging awareness of findings for programs within their divisions.

Program Directors/Practice Managers:

Program Directors/Practice Managers have day-to-day oversight of program activities and are responsible for assuring that program operations align with agency standards and the compliance plan.

Personnel:

All agency personnel have the responsibility to ensure that all services provided, and the documentation thereof is in accordance with the standards set forth in the compliance plan.

III. Statutes, Laws, Regulations/Regulatory Bodies:

1. **Code of Conduct** – A *code of conduct* is a collection of rules and regulations that include what is and is not acceptable or expected behavior.
2. **Health and Human Service Commission (HHSC)** - The federal agency that oversees CMS, which administers programs for protecting the health of all Americans, including Medicare, the Marketplace, Medicaid, and the Children's Health Insurance Program (CHIP).
3. **Office of Inspector General (OIG)** - The Office of Inspector General for the United States Department of Health and Human Services (HHS) is charged with identifying and combating

waste, fraud, and abuse in the HHS's more than 300 programs, including Medicare and programs conducted by agencies within HHS.

4. **Texas Administrative Code (TAC)** - The Texas Administrative Code is a compilation of all state agency rules in Texas.
5. **Health Insurance Portability and Accountability Act (HIPAA)** – The Health Insurance Portability and Accountability is a federal law enacted in 1996 that protects continuity of health coverage when a person changes or loses a job, that limits health-plan exclusions for preexisting medical conditions, that requires that patient medical information be kept private and secure, that standardizes electronic transactions involving health information, and that permits tax deduction of health insurance premiums by the self-employed. HIPAA established a Social Security Act Section that created the Health Care Fraud and Abuse Control Program to coordinate federal, state and local law enforcement efforts relating to health care fraud and abuse with respect to health plans; conduct investigations, audits, and inspections and evaluations relating to the delivery of and payment for health care in the United States; facilitate enforcement of all applicable remedies for fraud; and provide education and guidance regarding complying with current health care law.
6. **Health Information Technology for Economic and Clinical Health Act (HITECH)** - The Health Information Technology for Economic and Clinical Health Act (HITECH Act) is part of the American Recovery and Reinvestment Act of 2009 (ARRA). The HITECH Act was created to motivate the implementation of electronic health records (EHR) and supporting technology in the United States.
7. **Stark Law**- Stark Law is a healthcare fraud and abuse law that prohibits physicians from referring patients for certain designated health services paid for by Medicare or Medicaid programs to any entity in which they have a "financial relationship." The federal government interprets the term "financial relationship" broadly to include any direct or indirect ownership or investment interest by the referring physician, any financial interests held by any of the physician's immediate family members or a compensation arrangement between the physician (or immediate family member) and the entity. Unlike the federal Anti-Kickback Statute, the Stark Law is not a criminal statute. The Stark Law may be violated even if the parties do not intend to violate the law. The Office of the Inspector General (OIG) for the Department of Health and Human Services ("HHS") can pursue a civil action against Stark Law violators under the civil monetary penalties law. Stark Law violations can result in penalties of up to \$15,000 for each billed service that is based on a prohibited referral, plus three times the amount of the government overpayment. Violations of the Stark Law may result in the exclusion of any party from Medicaid and Medicare programs.
8. **Civil False Claims Act (FCA)** - The False Claim Act is a federal law that makes it a crime for any person or organization to knowingly make a false record or file a false claim regarding any federal health care program, which includes any plan or program that provides health benefits, whether directly, through insurance or otherwise, which is funded.
9. **Sarbanes-Oxley Act (SOX)** - The Sarbanes-Oxley Act of 2002 is a federal law that established sweeping auditing and financial regulations for public companies. Lawmakers created the legislation to help protect shareholders, employees and the public from accounting errors and fraudulent financial practices.
10. **Anti-Kickback Statute**- The federal Anti-Kickback Statute is a healthcare fraud and abuse statute that prohibits the exchange of remuneration—which the statute defines broadly as

anything of value—for referrals for services or purchasing, leasing, ordering, or arranging for or recommending the purchase, lease or ordering of any good, facility, service or item that are payable by a federal health care program. The Anti-Kickback Law requires the person to act willfully and knowingly. Violation of the Anti-Kickback law may result in criminal and civil penalties and exclusion from federal health care programs.

11. **Federal Trade Commission Act of 1914** – The Federal Trade Commission Act outlaws unfair methods of competition and outlaws unfair acts or practices that affect commerce.
12. **Tax Exempt Standards** – The Tax Exempt Standards state all 501(c)(3) non-profit organizations may not pay more than "reasonable" compensation to a private individual or entity from which it purchases service or items.
13. **Other - Applicable Law**" means any law, rule, regulation, condition, requirement, guideline, ruling, ordinance or order of or any legal entitlement issued by any Governmental Body and applicable from time to time to the performance of the obligations of the parties to an Agreement.

IV. COMPLIANCE PLAN ELEMENTS 1 - 7

Element 1: Written Policies and Procedures

Policies establish formal guidance needed to coordinate and execute activity throughout the agency. When effectively deployed, policy statements help to focus attention and resources on high priority issues, thereby aligning and merging efforts to achieve the institutional vision. Procedures serve as the operational processes required to implement organizational policy. If policy is "what" the agency does operationally, then its procedures are "how" it intends to carry out those operating policy expressions.

All policies and procedures shall adhere to state, federal, and any other applicable regulatory guidelines. THE HARRIS CENTER will continue to develop and maintain policies and procedures, which defines internal management and operations. Maintenance of the agency's policies and procedures will be coordinated by The Compliance Department (Compliance) via an electronic management system and will include, but not be limited to periodic review, creation, and archiving of policies and procedures. Policies require approval by the Board of Trustees, while procedures are routed and reviewed internally, with approval by the Chief Executive Officer or his/her designee.

A. Standards of Behavior for THE HARRIS CENTER Personnel

Based on each of the eight core values of THE HARRIS CENTER, these guidelines establish clear expectations for how we interact with the people we serve and our fellow team members. As team leaders, we commit to follow these guidelines to help improve the way we carry out THE HARRIS CENTER's mission of transforming the lives of people with behavioral health and IDD needs.

1. Collaboration:

We trust that teamwork and working together toward shared goals are essential to our success. I will:

- i. Offer my assistance to those who may need help, or find someone who can, to create the best outcome

- ii. Use respect and courtesy as I share messages and information
- iii. Recognize and celebrate the achievements and successes of others
- iv. Make new staff and people served feel welcomed and supported using positive verbal and non-verbal communication
- v. Acknowledge and value workplace diversity to strengthen our organizational culture
- vi. Share my expertise and work with community partners and outside entities to improve the lives of people served

2. Compassion:

We strive to make every encounter an opportunity to show care and kindness. I will:

- i. Show others that I want to listen and understand by giving my full attention (e.g., face the person when speaking and listening)
- ii. Contribute towards building a positive work environment by having positive and solution-oriented interactions with colleagues and people served
- iii. Smile, make eye contact, and greet everyone with enthusiasm
- iv. Treat everyone with respect and dignity
- v. Have an open mind and make time to listen and guide those in need

3. Excellence:

We exhibit professionalism and exceed expectations by continuously improving our performance. I will:

- i. Strive to exceed expectations, not just meet them
- ii. Provide exceptional customer service to people served and contribute to build a supportive work environment with my colleagues
- iii. Be innovative, seeking new solutions to achieve organizational goals and to improve the lives of those whom I serve
- iv. Perform my duties to the best of my ability every day
- v. Present myself professionally by dressing in a neat and respectable manner with appropriate fit

4. Integrity:

We demonstrate honesty, trust, and sound moral and ethical principles. I will:

- i. Be fair, truthful, and honest at all times
- ii. Maintain a high level of composure in communication with co-workers, employees, and management
- iii. Maintain appropriate social boundaries because I am representing myself and THE HARRIS CENTER
- iv. Take responsibility for my mistakes and offer solutions
- v. Behave professionally on a daily basis and assume full responsibility for my behavior

- vi. Welcome feedback and not respond defensively if I do not agree with what is being said

5. Leadership:

We inspire, take responsibility, and lead by example. I will:

- i. Strive to do my best every day to carry out the mission of THE HARRIS CENTER and provide ideas to improve our organization's capability to positively impact the community
- ii. Be open-minded, supportive, respectful, and encouraging
- iii. Ask others for their opinions and acknowledge their contributions
- iv. Demonstrate the characteristics of a positive role model
- v. Deliberately seek learning opportunities to develop as a leader and to understand one's personal strengths and weaknesses
- vi. Strive to learn something every day by looking at myself and people around me

6. Quality:

We create an environment for high quality care and continuous enhancement of our performance standards. I will:

- i. Strive to provide the highest quality services to people served and staff every day
- ii. Continue to expand my knowledge in my area of responsibility so I am able to provide high quality services
- iii. Be proactive rather than reactive
- iv. Strive for accuracy in my work and actions

7. Responsiveness:

We communicate clearly, effectively, professionally, and in a timely manner. I will:

- i. Welcome feedback and address concerns in a timely manner
- ii. Respond to incoming communication in a timely manner (within 24-48 hours)
- iii. Respond clearly and directly to all forms of communication that I receive from people served and co-workers, providing an opportunity for others to seek clarification if needed
- iv. Thank my colleagues and people served for waiting and apologize for any delays or barriers
- v. Handle complaints and advice with care and without taking personal offense

8. Safety:

We think safe, act safe, and stay safe.

- i. Be alert and aware of my surroundings
- ii. Actively participate in keeping all work areas, meeting rooms, and public places clean, safe, and organized
- iii. Seek ways to reduce risks and report all errors and near-misses
- iv. Dispose of litter, clean up spills, and/or report them immediately to the appropriate department

- v. Hold myself, my colleagues, and leaders accountable for the safety of people served
- vi. Make the safety, health, privacy and welfare of people served my top priority

B. Common Risk Areas.

THE HARRIS CENTER is committed to identifying, addressing and/or mitigating risks. Listed below are common risk areas that have been identified across behavioral healthcare agencies as a whole:

1. Medical Billing/Coding;
2. Clinical Documentation Integrity (CDI);
3. Contract compliance;
4. Comprehensive Psychiatric Emergency Programs services;
5. Credentialing;
6. Agency security protocols;
7. Rights Protection and Advocacy;
8. Incident reporting;
9. Jail Diversion Programs and Services;
10. Investigations;
11. HIPAA and HITECH Compliance; and
12. Fraud, Waste, and Abuse.

C. Claim Development and Submission Process (This process may be supplemented with a Billing Compliance Plan, Policy, and/or procedure(s)).

THE HARRIS CENTER will:

1. Provide a mechanism for the billing or reimbursement of services provided;
2. Provide for proper and timely documentation of all physician and other professional services prior to billing to ensure that only accurate and properly documented services are billed;
3. Emphasize that claims will be submitted only when appropriate documentation supports the claims and only when such documentation is maintained, appropriately organized in legible form, and available for audit and review. The documentation, which may include patient records, should record the date and time the activity was conducted, the appropriate coding for the service, the identity of the individual providing the service including signature and credentials, the client to whom the service was provided, and the location of the service;
4. Ensure service records and documentation used as a basis for a claim submission are appropriately organized in a fashion that allows for accessibility for review and auditing purposes;
5. Ensure that the diagnosis and procedures reported on the reimbursement claim are based on

- the medical record and other authorized documentation;
- 6. Establish a process for pre- and post-submission review of claims to ensure claims submitted for reimbursement accurately represent services provided, are supported by sufficient documentation and are in conformity with any applicable coverage criteria for reimbursement;
- 7. Ensure all billing reflects true and accurate information and conform to all pertinent Federal and state laws and regulations.

D. Integrity of Data Systems Procedures

To ensure and maintain the accuracy and integrity of electronic data systems used for charting client data, claims submission, collections, credit balances and other relevant reports, THE HARRIS CENTER will:

1. Ensure data is backed up on a regular basis;
2. Ensure regularly scheduled integrity checks are performed;
3. Ensure electronic data is protected against unauthorized access or disclosure by limiting access to data systems to only authorized personnel (password protected)

E. Retention of Records

THE HARRIS CENTER will:

1. Hold employees accountable for the integrity and accuracy of THE HARRIS CENTER's documents and records, not only to comply with regulatory and legal requirements, but also to ensure that records are available to defend business practices and actions.
2. Prohibit the tampering with, altering of, or falsification of information on any record or document.
3. Ensure medical documents, business documents and records are retained in accordance with the law and service specific records retention policy.
 - i. Medical and business documents include but are not limited to paper documents, computer-based or electronic information, and any other medium that contains information about THE HARRIS CENTER or its business activities.

F. Compliance as an Element of a Performance Plan

The promotion of and adherence to the elements of this compliance program will be a factor in evaluating the performance of all employees. All agency managers and supervisors will:

1. Discuss with all supervised employees and relevant contractors the compliance policies and legal requirements applicable to their function;
2. Ensure employees are periodically trained in new compliance policies and procedures;
3. Inform all supervised personnel that strict compliance with these guidelines, and policies of THE HARRIS CENTER is a condition of employment;
4. Disclose to all supervised personnel that THE HARRIS CENTER will take disciplinary action up

- to and including termination for violation of these guidelines, policies or requirements;
5. Be reprimanded for failure to instruct their subordinates adequately or for failure to detect noncompliance with applicable policies and legal requirements, where reasonable diligence on the part of the manager or supervisor would have led to the discovery of any problems or violations.

Element 2: Designation of a Compliance Director and a Compliance Committee

Compliance strives to protect THE HARRIS CENTER as an organization by detecting and preventing improper conduct while promoting adherence to the organization's legal and ethical obligations. As regulatory guidance and applicable laws change, the compliance plan will be reviewed and forwarded to the Chief Executive Officer (CEO) and the board of trustees. Review and updating of the compliance plan will occur as needed, but in any event shall be reviewed annually.

Regulations, standards and/or regulatory bodies with which the agency must remain in compliance with include, but are not limited to the following:

1. Anti-Kickback Statute
2. Centers for Medicare and Medicaid Services (CMS)
3. False Claims Act
4. Federal Trade Commission Act of 1914
5. Health and Human Service Commission (HHSC)
6. Health Information Technology for Economic and Clinical Health Act (HITECH)
7. Health Insurance Portability and Accountability Act (HIPAA)
8. Occupational Safety and Health Administration (OSHA)
9. Office of Inspector General (OIG)
10. Sarbanes-Oxley Act (SOX)
11. Stark Law
12. Texas Administrative Code (TAC)
13. THE HARRIS CENTER's Code of Conduct

To ensure the effective operation of a compliance program, THE HARRIS CENTER will designate a compliance director who is not assigned directly to any of THE HARRIS CENTER's programs, who is responsible for the compliance department and compliance activities of THE HARRIS CENTER. The compliance director will report to the Vice President of Enterprise Risk Management, who also has a duty to report to the Board of Trustees.

A. Compliance Director

THE HARRIS CENTER's Compliance Director will:

1. Oversee and monitor implementation of the Compliance Program.
2. Review the program to ensure relevance and compliance with current local, state, and Federal

laws and regulations.

3. Ensure the components of the Compliance Program are implemented to reduce fraud, waste, abuse, and mismanagement agency wide.
4. Ensure that contractors, vendors, and agents who furnish services to the facility are aware of the facility's compliance program and its respective coding and billing policies and procedures.
5. Have the authority to access and review all documentation and other information relevant to agency compliance activities.
6. Assist the business office, agency divisions/programs, and internal audit concerning compliance review activities related to service provision and/or revenue cycle within the agency.
7. Investigate issues related to compliance.
8. Assist in identifying processes for improvement and document compliance issues as necessary.
9. Encourage the reporting of suspected fraud, waste, abuse, or mismanagement across agency staff without fear of retaliation through training and other means of communication.
10. Notify employees of applicable regulations, procedures, and guidelines.
11. Report to THE HARRIS CENTER's Vice President of Enterprise Risk Management and THE HARRIS CENTER's Board of Trustees on a regular basis regarding the results of any audits/reviews, Compliance activities, trainings, reports of fraud, waste, abuse, reportable investigations, and any resulting employee discipline.

B. Compliance Committee

The Audit/Compliance Committee is established to assist the Compliance Director in the development, implementation and monitoring of compliance activities.

THE HARRIS CENTER Compliance Committee will:

1. Advise the Compliance Director and assist in the implementation of the compliance program.
2. Assess compliance violation investigations to determine whether a violation of the compliance plan actually exists.
3. Continually assess current policies and procedures to ensure compliance, relevance, and practicability.
4. Work with appropriate personnel to develop standards of conduct and policies and procedures, to promote adherence to THE HARRIS CENTER compliance program.
5. Monitor internal controls to implement the program and recommend changes as needed.
6. Ensure periodic audits of claims development and claims processing procedures are performed and that internal fiscal and administrative controls are implemented and maintained.

Element 3: Conducting Effective Training and Education

Education and training are critical elements of the compliance plan. Every employee is expected to be

familiar with and knowledgeable concerning the regulations governing THE HARRIS CENTER's activities and have a solid working knowledge of his or her responsibilities under the plan. Compliance related policies and procedures will be communicated to all employees through required training programs and electronic communications.

1. Compliance shall collaborate with all agency departments, including the Education and Development (E&D) department, and agency committees to ensure staff training and development align with state and federal regulations.
2. Compliance trainings will be appropriate to specific position responsibilities. All employees of THE HARRIS CENTER will receive annual compliance training to ensure commitment to the agency's high ethical standards of professional and business conduct.
3. Compliance will collaborate with THE HARRIS CENTER's training department to relay the objectives of Compliance in New Employee Orientation (NEO) classes. Compliance will also collaborate with THE HARRIS CENTER's training department to ensure that annual compliance training is provided to the agency. The trainings will include but not be limited to:
 - i. An overview of the Compliance Plan.
 - ii. The role of Compliance within the agency.
 - iii. Code of conduct.
 - iv. Reporting of suspected fraud, waste and abuse, and violations of laws and regulations
4. All employees will have access to in class or on-line compliance training through the agency's training system and receive notifications of expired and upcoming trainings. Management is responsible for ensuring their employees are familiar with regulations, are aware of issues affecting their units, and are updated with information provided by Compliance. Compliance will provide periodic trainings on compliance with regulations, the compliance plan and the compliance department's activities. Such training shall occur as often as appropriate, but at least once annually.

Element 4: Developing Effective Lines of Communication.

Staff members will have the ability to communicate compliance issues without the fear of retaliation. Staff members shall be able to ask for clarification when they're unsure about a policy, procedure or potential compliance violation.

1. If an employee has a compliance related question or has any reason to believe that anyone (including the employee himself or herself) is engaging in false billing practices, that employee shall immediately report the practice to his or her immediate supervisor and the Compliance Director at 713.970.7322. Reports to the Compliance Director remain confidential.

Element 5: Enforcing Standards through Well-Publicized Disciplinary Guidelines.

Disciplinary action will be applicable to all individuals within THE HARRIS CENTER who fail to comply with their obligations in accordance with THE HARRIS CENTER's policies and procedures. When there is information of potential violations or misconduct, the Compliance Director has the responsibility of conducting an internal investigation. An internal investigation would include interviews and a review of

individual records, billings, and other relevant documents.

1. New employees to THE HARRIS CENTER or employees new to a position will be trained to ensure that their work is consistent with standards to prevent fraud, waste, abuse, or mismanagement. THE HARRIS CENTER is responsible for providing the same training to employees providing services for THE HARRIS CENTER as contractors or affiliates of THE HARRIS CENTER.
2. Employees shall be informed of disciplinary action and the nature of the offense that was violated, noting the specific incident(s), the date(s) of the incident(s), actions necessary to correct the problem, period in which improvements must be made, and the consequences for not correcting or repeating the offense.

An agency-approved form should be used to document the type of disciplinary action being issued the employee dated and signed by both the supervisor and employee, then forwarded to the Department of Human Resources Record Unit.

Corrective Discipline:

The Agency's own best interest lies in ensuring fair treatment of all employees and in making certain that disciplinary actions are prompt, uniform, and impartial. The major purpose of any disciplinary action is to correct the problem, prevent recurrence, and prepare the employee for satisfactory service in the future.

Although employment with the Agency is based on mutual consent and both the employee and the Agency have the right to terminate employment at will, with or without cause or advance notice, the Agency may use corrective discipline at its discretion.

Corrective action should take into account the seriousness of the problem, past performance, previous warnings and the result of prior corrective steps. Depending on circumstances of individual cases, corrective actions ranging from verbal warning to involuntary termination may be appropriate as an initial or repeated step; the order of disciplinary steps listed below need not be followed in all cases. Corrective action may also involve demotion, or reassignment. All salary adjustments are suspended while on corrective discipline. Only upon successful completion of the corrective discipline, will the salary adjustment become effective, depending on supervisory discretion.

Salary increases are not granted during any corrective discipline probationary period.

In general, if an employee has received a first warning regarding job problems or offenses and has failed to correct these problems, the employee may be issued a final warning. However, final warnings may be initiated without a first warning for serious policy violations and offenses. Final warnings may be initiated by an employee's direct supervisor but require signature authorization of the next level of management. Final warnings are authorized for an effective period of twelve (12) months, and upon expiration of the effective time period, the employee's compliance or non-compliance with the warning will be documented as follow-up action. An employee may request the removal of a final warning from the Agency personnel file after twenty-four (24) months from the date of the expiration of the final warning and following the employee's annual performance evaluation.

Verbal Warning:

A Verbal Warning is provided to assist an employee to understand and resolve a significant job-performance or work-related conduct problem which should not continue, worsen or recur. A Verbal Warning also provides an explicit "warning" that more serious corrective action will follow. Continued unacceptable conduct will lead to further disciplinary conduct up to and including termination.

Written Warning:

A Written Warning serves to notify the employee of a serious job performance or work-related conduct problem which cannot be permitted to continue, worsen or recur. Continued unacceptable conduct will lead to further disciplinary conduct up to and including termination.

Suspension:

Suspension with or without pay may be appropriate during an investigation, as an initial or follow-up action when the continued presence of the employee may threaten safety, property, operations, or Agency reputation, or when a serious job performance or conduct problem occurs.

Disciplinary Probation:

An employee may be placed on disciplinary probation for a designated period of time for significant performance deficiencies which are determined to be within the employee's ability and intent to correct. A supervisor may also put an employee on probation until they resolve a problem with credentials that are required for their position.

Involuntary Termination:

Involuntary Termination may be appropriate when the employee fails to demonstrate sustained improvement, sufficient ability or intent to meet job expectations or has engaged in conduct which violates Agency policies and procedures.

Prosecution may be pursued as determined by the Agency management.

Element 6: Auditing and Monitoring

Conducting a risk assessment is a key component of the Compliance Department's functions; Compliance will conduct an agency wide risk assessment annually. Risk assessment involves the application of a methodical process for identifying key risks that the organization faces. Corporate compliance audits address corporate level risk, governance and control. Internal controls are broadly defined as a process, effected by THE HARRIS CENTER's management and other personnel, designed to provide reasonable assurance regarding the achievement of objectives in the following categories:

1. Effectiveness and efficiency of operations
2. Reliability of financial reporting
3. Compliance with applicable laws and regulations

Ongoing auditing and monitoring efforts should include:

1. Monitoring the agency's compliance with specific rules and policies that have been the focus of particular attention by The Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS), Managed Care Organizations (MCO), The Office of the Inspector

- General (OIG), OIG audits and evaluations, Special Fraud Alerts, internal or external reporting, law enforcement initiatives, etc.
2. On-site visits, interviews with management responsible for the operations (e.g., coding, claims development and submission, patient care, and other related activities).
 3. Reviews of medical and financial records and/or other source documents that support claims for reimbursement in order to ensure accuracy of claims.
 4. Questionnaires or surveys developed to solicit impressions of a broad cross-section of the employees and staff about compliance issues.
 5. Results of ongoing auditing and monitoring must specifically identify areas where corrective action plans (CAP) are needed to prevent problems from recurring. When monitoring discloses program deficiencies, appropriate immediate corrective action measures must be implemented.
 6. When a CAP is required, Compliance will review and validate the corrective measures and will reassess the program at a designated time to ensure that the corrective actions have been implemented and are effective. If it is determined that a program is out of compliance after a CAP has been implemented, Compliance will close the review and recommend the program to collaborate with Performance Improvement (PI) to establish a plan of improvement (POI). Within one hundred eighty (180) days of the implementation of the POI, Compliance will reassess the program.
 7. Compliance will maintain records of reviews conducted.
 8. Review of relationships with third-party contractors, specifically those with substantive exposure to government enforcement actions.
 9. Any correspondence from any regulatory agency charged with administering a federally or state-funded program received by any department of the agency shall be immediately copied and forwarded to the CO for review and discussion by the Compliance Committee (CC).
 10. Immediate notification of the CO of any visits, audits, investigations or surveys by any federal, state or county agency or authority.

Individual Program Divisions may have specific monitoring requirements outlined in performance contracts with Health and Human Services, other regulatory bodies, or as established internally through other agency programs. In regard to IDD services, the IDD Division will develop measurements, monitoring plans and improvement actions as needed for:

- LIDDA authority functions (Intake and Eligibility, Service Coordination)
- Access to, capacity of and the improvement of LIDDA services;
- Timeliness and accuracy of LIDDA data submission;
- Actions related to responses to circumstances surrounding critical incident reports;
- Actions related to the reduction of instances of abuse, neglect or exploitation of individuals served;
- Assessing and improving rights restriction review process.

The IDD Division will share the Compliance Plan and associated measures with the IDD PAC and IDD Needs Council and will evidence such in their meeting minutes. The Compliance Plan is also reviewed by

THE HARRIS CENTER Board of Trustees and posted on THE HARRIS CENTER website:
www.TheHarrisCenter.org.

Element 7: Responding to Detected Offenses and Developing Corrective Action Initiatives

A. Violations:

1. Common compliance violations that can result in disciplinary action.
2. Involvement in non-compliant conduct and/or activity;
3. Failure to report known non-compliant conduct and/or activity.
4. Supervisors who were aware or should have been aware of non-compliant conduct or activity and failed to correct deficiencies.

B. Investigations and Reporting Procedures:

All violations will be assessed by THE HARRIS CENTER's Compliance Department to determine whether a violation of the compliance plan actually exists. When a violation has been confirmed, Compliance will then have to determine if the conduct was due to negligence and was inadvertent or if it was willful and done knowingly.

1. **Negligence and/or Inadvertent Conduct:** If it is determined after investigation that non-compliant conduct occurred because of negligence or inadvertence, the matter shall be handled by the appropriate supervisor, who shall inform THE HARRIS CENTER Compliance Director of the offense and corrective action taken to address the problem. Any individual dissatisfied with the corrective action imposed by his/her supervisor may appeal the decision to THE HARRIS CENTER Compliance Director within ten (10) business days from the date of imposition of the corrective action. Such appeal shall be by written letter or email to THE HARRIS CENTER Compliance Director stating the reasons why the corrective action is not appropriate. THE HARRIS CENTER Compliance Director shall schedule a meeting within a reasonable time to review the request and either affirm or modify the corrective action. The Compliance Director may collaborate with the appropriate entities (e.g., HR Dept., General Counsel, etc.) for fact gathering and objectivity in the final decision.
2. **Willful, Knowing Conduct and/or Gross Negligence:** If it is determined, after investigation, that non-compliant conduct occurred as a result of willful action, knowingly or as a result of gross negligence, then the matter shall be referred to THE HARRIS CENTER's Compliance Director for corrective action. The Compliance Director shall determine the response and appropriate corrective action, in light of all available information. An individual dissatisfied with the corrective action imposed by The Compliance Director may utilize standard appeal procedures.

C. Corrective Actions:

Appropriate corrective action measures shall be determined on a case-by-case basis. Disciplinary action, if required, and in the support of THE HARRIS CENTER Compliance Program will be managed in accordance with the disciplinary policies outlined in Element 5 of this plan.

V. THE HARRIS CENTER's Compliance Program Effectiveness.

1. Code of Conduct

This Code of Conduct has been adopted by the Board of Directors of THE HARRIS CENTER to provide guidance to THE HARRIS CENTER's employees as it relates to documentation, billing and other claims related issues. This code adheres to and takes the stance that adherence with THE HARRIS CENTER's mission, vision and core values is required of all staff at all times.

The principles set forth in this Code of Conduct shall be distributed to all employees upon hire and periodically thereafter. All employees are responsible to ensure that their behavior and activities are consistent with this code and understand that failure to maintain this code may result in termination of employment.

As used in this Code of Conduct, the terms "officer," "director," "employee," and "volunteer" include any persons who fill such roles or provide services on behalf of THE HARRIS CENTER or any of its divisions, subsidiaries, or operating or business units.

Principle 1 – Legal Compliance

THE HARRIS CENTER will strive to ensure all activity by or on behalf of the agency complies with all applicable laws.

Principle 2 – Business Ethics

In furtherance of THE HARRIS CENTER's commitment to the highest standards of business ethics and integrity, employees will accurately and honestly represent THE HARRIS CENTER and will not engage in any activity or scheme intended to defraud anyone of money, property or honest services.

Principle 3 – Confidentiality

THE HARRIS CENTER employees shall strive to maintain the confidentiality of patients and other confidential information in accordance with applicable legal and ethical standards.

Principle 4 – Conflicts of interest

Directors, officers, committee members and key employees owe a duty of loyalty to the organization. Persons holding such positions may not use their positions to profit personally or to assist others in profiting in any way at the expense of the organization.

Principle 5 – Business Relationships

Business transactions with vendors, contractors and other third parties shall be transacted free from offers or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction.

Principle 6 – Protection of Assets

All employees will strive to preserve and protect THE HARRIS CENTER's assets by making prudent and

effective use of THE HARRIS CENTER's resources and properly and accurately reporting its financial condition.

Employee Code of Conduct

Quality of Care & Service

We are committed to providing high quality, caring, ethical and professionally competent services to our clients and their families, our community partners/stakeholders and our community service areas.

We:

- Apply sound behavioral health principles in our daily work and activities with an emphasis on evidence-based treatment.
- Participate in activities that promote quality improvement and bring deficiencies to the attention of those who can assess and resolve the problems.
- Treat clients and constituents in a manner appropriate to their background, culture, religion and heritage and are mindful of individual differences.
- Do not deny care based on race, gender, gender identity, religion, creed, color, economic status, sexual orientation, disability, marital status, age, national origin, or any other discriminatory characteristic.
- Will promote the rights of the consumers to be free from humiliation and the right to informed consent or refusal or expression of choice regarding composition of the service delivery team.
- Ensure that the source or amount of payment for client services shall not affect the quality of care or service.
- Provide clients with the information needed to make fully informed decisions. Clients have the right to receive information about THE HARRIS CENTER services, policies, procedures, fees, network provider list, and confidentiality requirements. Clients are informed of their treatment options, goals, and expected length of care.
- Strive to enhance clients' capacity and opportunity to change and address their own needs by including them in developing treatment goals and plans to every extent possible.
- Provide competent services within the boundaries of our education, training, license, certification, consultation received, experience or other relevant professional experience.
- Document all client service encounters in THE HARRIS CENTER record accurately, completely and following established documentation guidelines.

Workplace Conduct

We ensure our work environment supports high standards of professional behavior and promotes dignity, integrity, fairness, respect, teamwork and safety.

We:

- Respect the basic rights, dignity and values of clients and staff including, but not limited to race, gender, gender identity, religion, creed, color, economic status, sexual orientation, disability, marital status, age, national origin or any other discriminatory characteristic.

- Use work hours to accomplish THE HARRIS CENTER duties and assignments in a productive and professional manner.
- Promote a positive image for THE HARRIS CENTER, its employees and services.
- Take personal responsibility for performing duties in good faith and exercise sound judgment.
- Strive for positive and cooperative relationships within THE HARRIS CENTER by treating our colleagues with respect, dignity, fairness and courtesy.
- Maintain a working environment free from all forms of harassment or intimidation – verbal, sexual, or otherwise. THE HARRIS CENTER has zero tolerance for discriminatory treatment, abuse, violence or intimidation.
- Comply with work and safety policies in accordance with THE HARRIS CENTER policies including, but not limited to, the mandated non-smoking/tobacco free policy in and near THE HARRIS CENTER buildings and vehicles as well as the drug and alcohol policy prohibiting the use of alcohol or illicit drugs in the workplace. Over-the-counter medications and prescriptions ordered by a physician are used in dosage and frequency described on the medication or package insert unless specified otherwise by the prescribing physician. Follow THE HARRIS CENTER, weapons policy and our zero-tolerance policy for violence or harassment in the workplace.
- Cooperate in achieving THE HARRIS CENTER commitment to maintain a work environment that promotes the prevention, to detection, reporting and resolution of conduct that may not conform to codes of ethics and standards of THE HARRIS CENTER and our respective professions.
- Require staff who oversee or supervise the work of others to 1) provide clear direction about what is expected of staff regarding both job responsibilities and workplace conduct and 2) ensure no employee is required to compromise their professional integrity, standards, judgment or objectivity in the performance of their duties.

Staff-Client Relationships

We are committed to providing services by qualified staff that is compassionate, courteous, culturally competent, fiscally responsible, ethical and effective.

We:

- Conduct ourselves in a manner that shows concern and respect for the dignity of clients treating them in a manner appropriate to their background, culture, religion and heritage. The welfare of clients and their families is placed above all other concerns unless one's safety is threatened.
- Do not take unfair advantage of the professional relationship with current or former clients or exploit them to further our personal, religious, political, social or business interests. Dual or multiple relationships include when the client is also a student, friend, family member, employee or business associate of the therapist/service provider. Because of the risk of exploitation or potential harm to the client, such relationships are prohibited for two (2) years after a client is discharged from services or the date of the last professional contact or per licensing standards.
- Understand that in the course of events there is the possibility a dual relationship may be discovered and/or is unavoidable. In such instances, the details of the relationship and any

potential conflicts will be immediately disclosed to the supervisor for guidance regarding the conflict. We are responsible to set clear, appropriate, and culturally sensitive boundaries.

- Respect clients' right to privacy and protect clients' confidentiality by adhering to all rules, regulations, professional practices and standards of privacy and confidentiality. We avoid discussing confidential information in public or semipublic areas such as hallways, front/reception desk, waiting rooms, rest rooms, elevators and restaurants. Confidential information is never used for personal benefit or the benefit of any other person, including other employees, as the confidential information requires a need to know.
- Do not knowingly disclose confidential client information with others without express written consent of the client or pursuant to court order and in accordance with the applicable law. Information should only be shared on a need-to-know basis and under certain circumstances as allowable by Federal and State regulations.
- Provide clients with reasonable access to their medical records following policy based on regulations. Where there is concern a client's access to his/her record could cause misunderstanding or harm, clinical staff assist the client in interpreting the records as explained in agency policies, procedures, and rights handbooks
- Do not involve clients, families or other service providers in your/other staff criticism or controversy related to THE HARRIS CENTER internal policies, practices, staff actions or personalities. In no case is this information ever part of the medical record.

Adhering to Laws and Regulations

We follow the letter and the spirit of applicable laws and regulations and conduct business ethically and honestly.

We:

- Comply with all applicable laws, rules, regulations, standards and other requirements of the federal, state and local governments. We comply with all federal mental health care and alcohol and drug program statutes, regulations, and guidelines.
- Do not engage in any practice that involves unethical or illegal activity. If unsure of the meaning or application of a statute, regulation, policy or legality, we seek guidance from our supervisor or the Compliance Officer.
- Strive to ensure no false, fraudulent, inaccurate or fictitious claims for payment or reimbursement of any kind are submitted. These claims include, but are not limited to timecards/reports, travel claims, Progress Notes, claims and cost reports.
- Take reasonable precaution to ensure billing and coding of claims are prepared and submitted accurately, timely and are consistent with federal, state and local laws and regulations as well as THE HARRIS CENTER policies and procedures and/or agreements with third party payers. This includes federal health care program regulations and procedures, or instructions otherwise communicated by regulatory agencies such as the Centers for Medicare and Medicaid Services or their agents.
- Bill only for eligible services actually rendered, reported to the minute and fully documented. When services must be coded, we use only billing codes that accurately describe the services provided.
- Act promptly to investigate and correct problems if errors in claims or billings are discovered.

Alert your Supervisor and the Compliance Officer to these issues/problems.

- Voluntarily disclose to third party law enforcement or regulatory agencies violations of law, regulations or standards during investigations, and audits where appropriate and legally required.
- Do not intimidate, threaten, coerce, discriminate against, nor take other retaliatory action against any client, constituent, contractor or employee who exercises the right to file a complaint or who participates in an investigation or proceeding relative to a complaint.

Conflicts of Interest

We avoid conflicts of interest or the appearance of conflicts between our own personal interests and the best interests of THE HARRIS CENTER.

We:

- Avoid commitments that interfere with our ability to properly perform our duties for THE HARRIS CENTER or any activity that conflicts with the known interests of THE HARRIS CENTER, its clients or constituents. Examples include but are not limited to: 1) the use of THE HARRIS CENTER time, facilities or equipment for private gain or advantage for oneself or another; and 2) the solicitation of future employment with a company doing business with THE HARRIS CENTER over which the employee has some control or influence in his/her official capacity.
- Report any potential conflicts of interest for ourselves or others to the appropriate supervisor, manager or Compliance Officer.
- Prohibit individual staff in private practice from referring clients to themselves or actively engaging in any relationship with other staff to promote referrals to their private practices.
- Do not accept or provide any gift of more than nominal value or any hospitality or entertainment, which, because of its source or value, might influence independent judgment in transactions involving THE HARRIS CENTER, including lunches.
- You may not engage in outside employment or activities that conflict with your duties and responsibilities to THE HARRIS CENTER. The Outside Employment Policy requires each employee to notify, provide relevant information, and receive approval from the proper authority before accepting employment with another employer.
- Voluntarily disclose to your immediate supervisor or the Compliance Officer any financial interest, official position, ownership interest or any other relationship an employee or member of his/her immediate family has with THE HARRIS CENTER vendors, contractors or referral sources.

External Relationships

We continually strive to honor, uphold and promote the public trust in all our activities.

We:

- Carry out our duties in a way that encourages participation and access to THE HARRIS CENTER programs and resources and that enhances THE HARRIS CENTER standing in the community.
- Are honest and forthright in providing information to clients, vendors, payers, other agencies

and the community within the constraints of privacy and confidentiality requirements and as allowed by law.

- Seek helpful and cooperative relationships with external agencies and community groups to enhance services and resources available to the public.
- Ensure all legally required reports or other information provided to any external entity including federal, state and local government agencies are accurate and submitted timely. Only authorized staff or their official designee sign reports requiring certifying signatures.

Records Maintenance

We are conscientious in maintaining accurate and appropriate records in accordance with all federal, state and local laws and regulations and THE HARRIS CENTER policies and procedures.

We:

- Maintain complete, accurate, timely and thorough client and administrative records.
- Follow all privacy and security policies and procedures to the letter to guard against internal and external privacy breaches.
- Abide by professional, legal and ethical codes governing confidentiality to ensure all records in any medium and at all service locations are maintained in a manner to protect employee and client privacy rights and to provide factual information.
- Maintain, train and monitor adherence to documentation and record keeping guidelines following legal requirements. Records are maintained for at least the minimum period required by laws and regulations.

CODE OF CONDUCT FOR CONTRACTORS

THE HARRIS CENTER for Mental Health & IDD (THE HARRIS CENTER) is firmly committed to full compliance with all federal, state, and local laws, regulations, rules and guidelines that apply to the provision and payment of behavioral health services. THE HARRIS CENTER contractors and the manner in which they conduct themselves are a vital part of this commitment.

To ensure contractors share in THE HARRIS CENTER dedication to honesty, fairness and integrity, THE HARRIS CENTER contractors and their employees are required to abide by THE HARRIS CENTER *Code of Ethical Conduct for Contractors* as a condition of contractual arrangement.

This code is not intended to be an exhaustive list of all standards by which THE HARRIS CENTER contractors are to be governed. Rather, its intent is to convey THE HARRIS CENTER commitment to the high standards set for its contractors. All contractors are expected to perform their duties in good faith and in a manner reasonably believed to be in the best interest of THE HARRIS CENTER and the public it serves. Contractor and its employees will:

- Comply with all applicable laws, rules, regulations, standards, and other requirements of federal, state and local government.
- Conduct themselves with honesty, integrity, courtesy and fairness in their professional dealings related to their contract with THE HARRIS CENTER and avoid any conduct that could reasonably be expected to reflect adversely upon the integrity of THE HARRIS CENTER.

- Treat all THE HARRIS CENTER employees, consumers, and other contractors fairly and with respect.
- Not engage in any activity in violation of THE HARRIS CENTER Compliance Program, nor engage in any other conduct which violates any federal, state, or local law, regulation, rule or guideline.
- Take precautions to ensure claims are prepared and submitted accurately, timely and are consistent with federal, state and local law, regulation, rule or guideline.
- Ensure no false, fraudulent, inaccurate or fictitious claims for payment or reimbursement of any kind are submitted.
- Bill only for eligible services actually rendered and fully documented. Use billing codes that accurately describe the services provided.
- Act promptly to investigate when errors in claims or billing are discovered, make needed corrections and notify THE HARRIS CENTER of these incidents.
- Promptly report to THE HARRIS CENTER Compliance Officer any activity involving financial improprieties as it relates to THE HARRIS CENTER contract, past or present.
- Promptly report to THE HARRIS CENTER Compliance Officer any suspected violation of this *Code of Ethical Conduct for Contractors* by THE HARRIS CENTER employees or other THE HARRIS CENTER contractors.
- Consult with THE HARRIS CENTER Compliance Officer if uncertain about any requirements of the *Code of Ethical Conduct for Contractors* or other applicable law, regulation, rule or guideline, privacy, confidentiality and access.

2. Regular Review of Compliance Program Effectiveness

THE HARRIS CENTER's Compliance Plan is intended to be flexible and readily adaptable to changes in regulatory requirements and in the healthcare system as a whole. This plan shall be reviewed as often as necessary and modified/updated at least annually. This THE HARRIS CENTER Compliance Plan shall be certified by THE HARRIS CENTER's CEO upon implementation and when major revisions are required.

VI. SELF-REPORTING.

Regulations require that THE HARRIS CENTER self-disclose certain errors we discover, and refund identified overpayments, or THE HARRIS CENTER can be held accountable for intentional fraud. The regulations limit response time to sixty (60) days after the issue is identified, so timely reporting of errors is critical. Any errors or overpayments discovered as a result of the ongoing auditing and monitoring will result in the prompt return of any overpayment, with appropriate documentation and a thorough explanation of the reason for the refund, of which will be reported the CEO.

If credible evidence of misconduct is discovered and, after reasonable inquiry, it is determined that this misconduct may have violated criminal, civil, or administrative law, THE HARRIS CENTER's legal office/ counsel should be contacted promptly to determine self-reporting requirements.

VII. CONCLUSION.

Compliance is everyone's responsibility. Ignorance of the rules is not a defense for non-compliance in the

eyes of the government. The rules are widely published and available, and we have a responsibility to understand and follow them to the best of our ability. Only with the commitment of all THE HARRIS CENTER's personnel and affiliates can we ensure our compliance with the various laws, standards and regulations that govern us. Please share your commitment to compliance with those around you and do not hesitate to contact your supervisor or the compliance department with questions – they are there to assist you with understanding the rules and providing guidance on their implementation.

The compliance plan, as presented in this document, establishes a framework for effective billing and legal compliance by THE HARRIS CENTER. It does not identify all of THE HARRIS CENTER's substantive programs and policies that are designed to achieve compliance. THE HARRIS CENTER works diligently to ensure the presence of and adherence to policies and procedures. Policies and procedures also help to shape the agency's overall commitment to compliance and the enforcement thereof.

ATTESTATION

Where applicable to my role, I will:

- Respect the basic rights and values of all staff, clients and volunteers treating everyone with consideration, patience, dignity, courtesy and integrity.
- Support THE HARRIS CENTER efforts to provide culturally competent services.
- Promote a positive image for THE HARRIS CENTER.
- Be honest and fair following the letter and spirit of applicable laws.
- Appreciate that staff have a responsibility to care for their clients. This duty cannot be delegated or transferred to others.
- Acknowledge that the CEO/Executive Director is the only OFFICIAL spokesperson for THE HARRIS CENTER.
- Not bind THE HARRIS CENTER to any legal or contractual obligations by offering assurances either verbally or in writing.
- Observe strict confidentiality with respect to all client information and any other information that is confidential to THE HARRIS CENTER gained through participation at THE HARRIS CENTER.
- Accept and follow directions from the Director and job supervisor seeking guidance through clarification as needed.
- I will familiarize myself with THE HARRIS CENTER policies and procedures as required to carry out my assignments.
- Take personal responsibility for performing duties in good faith, strive for cooperation and teamwork, and exercise sound judgment.
- Comply with work and safety practices avoiding unnecessary risks, apply reasonable instructions given by supervisors and report any hazard or hazardous practice in the workplace.
- Not smoke or use tobacco products (except on breaks) or be under the influence of alcohol or illegal drugs when on the job/assignment.
- Report any problems as they arise to the job supervisor including incidents, injury, suspected

or known unethical or illegal conduct.

- Avoid waste or extravagance and make proper use of THE HARRIS CENTER resources. This includes the fax machines, the computer, the copier, office supplies, etc.
- Respect clients' right to privacy and protect clients' confidentiality by adhering to all rules, regulations, and professional practices and standards of privacy and confidentiality. Avoid discussing confidential information in public or semi-public areas such as hallways, front/reception desk, waiting rooms, rest rooms, elevators and restaurants. Confidential information is never used for personal benefit or the benefit of any other person, including other employees. The Consumer's record/chart and treatment is confidential information is on a need to know.

Attachments

[image1.png](#)

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	11/2022
Department Review	Anthony Robinson: VP	11/2022
Initial Assignment	Michael Dangerfield: Dir	08/2022

EXHIBIT F-10

Status **Pending** PolicyStat ID **12024816**

Origination	N/A
Last Approved	N/A
Effective	Upon Approval
Last Revised	N/A
Next Review	09/2022

Owner	Keena Pace: Exec
Area	Leadership
Document Type	Agency Policy

LD17A Harris Center Advisory Committee

1. PURPOSE:

The purpose of the Advisory Committee shall be to advise The Harris Center of Mental Health and IDD Trustees and/or Executive staff on matters, including planning, policy development, coordination, including coordination with criminal justice entities, resource allocation, and resource development, relative to the provision of services and supports to residents of Harris County.

2. POLICY:

The BH & IDD Advisory Committee gathers information related to existing and/or needed services, identify problem areas regarding consumer services and supports and/or systematic issues, receive input from the community and ensure the viewpoint(s) of the primary (consumer) and secondary (family member) stakeholders are communicated to the Board of Trustees and the Executive Director.

3. APPLICABILITY/SCOPE:

This policy applies to the Board of Trustees and executive staff of the Harris Center.

4. PROCEDURES:

LD17B Harris Center Advisory Committee

5. RELATED POLICIES/FORMS :

N/A

6. REFERENCES: RULES/REGULATIONS/ STANDARDS:

CARF 1. A. Leadership

Certified Community Behavioral Health Clinics (CCBHC). Criteria 6.B: Governance. Standard 6.b.1.

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Initial Assignment	Shannon Fleming: Counsel	09/2022
Initial Assignment	Keena Pace: Exec	08/2022

EXHIBIT F-11

Status **Pending** PolicyStat ID **12354105**

Origination	09/2020
Last Approved	N/A
Effective	Upon Approval
Last Revised	09/2020
Next Review	1 year after approval

Owner	Kendra Thomas: Counsel
Area	General Administration
Document Type	Agency Policy

FM11A - Mailing Services

1. PURPOSE:

The purpose of this policy is to establish clear expectations on utilization of the mailing services provided by The Harris Center for Mental Health and IDD.

2. POLICY:

The Harris Center will maintain a mailing permit by paying an annual fee to a third party vendor for the use of a mail metering service. The funding of said service is for the benefit of all recognized units of The Harris Center that have an assigned Unit Number issued by the Accounting Department. All business-related mail must be routed through the Mail Room for appropriate postage and shipping. Rates for shipping mail will be charged back to the Unit number that appears on the mailing medium e.g. envelope, box, etc.

Timely delivery, quality service and a worry free experience are what we value for our internal customers. We expect Units to assist in meeting these goals by ensuring outgoing mail items bear the approved Agency logo along with the Unit Number of the mailing department and a return address that includes an office number.

3. APPLICABILITY/SCOPE

All recognized Agency departments with a unit number assigned by the Accounting Department.

4. RELATED POLICIES/FORMS (for reference only):

None

5. REFERENCES: RULES/REGULATIONS/STANDARDS:

None

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Initial Assignment	Anthony Robinson: VP	10/2022
Initial Assignment	Kendra Thomas: Counsel	09/2022

EXHIBIT F-12

Status **Pending** PolicyStat ID **12415871**

Origination	N/A
Last Approved	N/A
Effective	Upon Approval
Last Revised	N/A
Next Review	1 year after approval

Owner	Terence Freeman: Dir
Area	Human Resources
Document Type	Agency Policy

HR33A Moonlighting

1. PURPOSE:

The purpose of The Harris Center for Mental Health and IDD (The Harris Center) Moonlighting policy is to (1) provide staff the ability to work and earn additional wages while contributing their knowledge, skills, and abilities in other areas within the agency outside of their original position or department of hire. (2) Ensure the additional work performed is billed to the correct area within the agency for labor cost purposes.

2. POLICY:

The Harris Center supports staff members providing coverage in an area of the Agency outside of their normal home work-area; however, in certain cases, the work may be in the same work area covering additional shifts separate from the staff member's typical work shift.

Local area management is responsible for (1) ensuring moonlighting staff are qualified for the position based on requirements as documented on the job description on file including any training, certifications or licensures, etc., (2) documenting and confirming the Moonlighting work required for the business is being performed, (3) ensuring the appropriate department is billed for the Moonlighting labor costs, and (4) submitting required documentation to Payroll. (5) Moonlighting would generate overtime for all non-exempt employees as all hours worked under the Moonlighting code are considered as hours worked. Exempt employees would be paid as straight time as the Overtime provisions would not apply. (6) All full-time employees must first meet their full-time shift commitment before being eligible for moonlighting pay. (7) Moonlighting pay will be affected if the employee calls in prior to their scheduled shift. In this event, moonlight pay will start after the

employee meets their required full-time or part-time shift(s). (8) Any scheduled PTO time does not exclude an employee from obtaining moonlighting pay. (9) Relief employees must first meet their Relief commitment before being eligible for moonlighting pay.

3. APPLICABILITY/SCOPE:

All Harris Center employees and staff who meet the criteria are eligible to work in the role designated as a Moonlighting role. Example: Employees interested in moonlighting as a direct care provider, must meet all documented criteria to work in a direct care provider role.

4. PROCEDURES:

Moonlighting Procedure

5. RELATED POLICIES/FORMS (for reference only)::

Employee Handbook

6. REFERENCES: RULES/REGULATIONS/STANDARDS:

Code of Ethics

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	09/2022
Department Review	David Wykes	09/2022
Initial Assignment	Terence Freeman: Dir	09/2022

EXHIBIT F-13

Status **Pending** PolicyStat ID **12127277**



Origination	N/A
Last Approved	N/A
Effective	Upon Approval
Last Revised	N/A
Next Review	1 year after approval

Owner	Kia Walker: Chief Nursing Officer
Area	Infection Control
Document Type	Agency Policy

MED23A Nurse Staffing Advisory Committee

Nurse Staffing Advisory Committee

1. PURPOSE:

To support The Harris Center's commitment to quality nursing services as a standard of clinical care in addressing the behavior health and IDD needs of persons served.

2. POLICY:

It is the policy of The Harris Center to provide a mechanism to promote nursing excellence and improve patient safety initiatives that create a healthy environment for nurses and appropriate care for patients. The Harris Center Nurse Staffing Advisory Committee (NSAC) was created to ensure that an adequate number and skill mix of nurses are available to meet the level of patient care needed. The NSAC will identify nurse-sensitive outcome measures the committee will use to evaluate the effectiveness of the official nurse service staffing plan.

3. APPLICABILITY/SCOPE:

This policy applies to all nursing staff employed by the Harris Center including, direct and contracted employees, and working at a Harris Center hospital licensed under Texas state law.

4. PROCEDURES:

Nurse Staffing Advisory Committee Procedure

5. RELATED POLICIES/FORMS:

MED7A- Nursing Peer Review and Safe Harbor

MED 14A- Delegation and Supervisor of Certain Nursing Acts

6. REFERENCES: RULES/REGULATIONS/STANDARDS:

Nurse Staffing, Texas Health and Safety Code Chapter 257

Mandatory Overtime for Nurses Prohibited, Texas Health and Safety Code Chapter 258

Standards of Nursing Practice, 25 Tex. Admin. Code, Part 11, Rule 217.11

The American Nurses Association Code of Ethics and Standards

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	09/2022
Final Legal Review	Kendra Thomas: Counsel	09/2022
Initial Legal Review	Shannon Fleming: Counsel	09/2022
Compliance Review	Anthony Robinson: VP	09/2022
Department Review	Kia Walker: Chief Nursing Officer	09/2022
Initial Assignment	Kia Walker: Chief Nursing Officer	09/2022
Initial Assignment	Vanessa Miller: Mgr	09/2022

EXHIBIT F-14

Status **Pending** PolicyStat ID **12392761**

Origination	N/A
Last Approved	N/A
Effective	Upon Approval
Last Revised	N/A
Next Review	1 year after approval

Owner	Terence Freeman: Dir
Area	Human Resources
Document Type	Agency Policy

HR32A Personal Relationships in the Workplace

1. PURPOSE:

The purpose of this policy is to communicate standards of acceptable behavior concerning personal relationships in the workplace, convey the Harris Center's response to romantic or dating relationships and manage risks presented by romantic or dating relationships between employees, contractors, volunteers, and interns.

2. POLICY:

In order to minimize the risk of conflicts of interest and promote fairness, the Harris Center maintains the following policy in respect to romance and dating in the workplace:

No person in a management or supervisory position shall have a romantic or dating relationship with an employee whom he or she directly supervises or whose terms or conditions of employment he or she may influence (examples of terms or conditions of employment include promotion, termination, discipline, and compensation). In addition, no employees working in the same department (or unit) shall have such a relationship. A department (or unit) is defined as a group of employees who report directly to the same supervisor.

3. APPLICABILITY/SCOPE:

This policy applies to all Harris Center employees, interns, volunteers and contractors.

4. PROCEDURES:

Personal Relationships in the Workplace Procedure

5. RELATED POLICIES/FORMS (for reference only)::

Sexual Harassment Policy

Employee Handbook

6. REFERENCES: RULES/REGULATIONS/STANDARDS:

Employment Discrimination, Tex. Labor Code Ch. 21, Subchapter C-1

Title VII of the Civil Rights Act of 1964, 42 U.S.C. §§2000e-2 et seq.

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	10/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	09/2022
Department Review	David Wykes	09/2022
Initial Assignment	Terence Freeman: Dir	09/2022

EXHIBIT F-15

Status **Pending** PolicyStat ID **12434426**



Origination 09/2018
 Last Approved N/A
 Effective Upon Approval
 Last Revised 09/2018
 Next Review 1 year after approval

Owner Keena Pace: Exec
 Area Assessment, Care & Continuity
 Document Type Agency Policy

ACC3A Plan of Care

1. PURPOSE

To ensure the development of a comprehensive person-centered plan based on client, family/legal guardian input, assessments and narrative summaries

2. POLICY

It is the policy of The Harris Center for Mental Health and IDD (The Harris Center) to ensure every client served will be an active participant in the development of his or her Person-Centered Plan in conjunction with his/her assigned interdisciplinary treatment team.

3. APPLICABILITY/SCOPE

This applies to all of The Harris Center Programs/Units that provide services.

4. Related policies/Forms:

- Person and Family Centered Recovery Plan
- Individual Plan of Care
- Safety Plan
- Person Directed Plan
- Progress Notes

5. References: Rules/Regulations/Standards

- IDD-BH Contractor Administrative Functions, Mental Health Community Services Standards- Standards of Care, 26 Tex. Admin. Code Ch. 301, Subchapter G
- Behavioral Health Delivery System, Standards for Services to Individuals with Co-Occurring Psychiatric and Substance Use Disorders-Screening, Assessment, & Treatment Planning, 26 Tex. Admin. Code, Chapter 306, Subchapter A
- Behavioral Health Delivery System, Mental Health Rehabilitative Services, 26 Tex. Admin. Code Ch. 306, Subchapter F
- Roles and Responsibilities of a Local Authority, 40 Tex. Admin. Code Ch. 2, Subchapter G
- Home Community-Based Services (HCS) and Community First Choice (CFC), 40 Tex. Admin. Code, Part 1, Chapter 9, Subchapter D
- Texas Home Living Program and Community First Choice Program (CFC), 40 Tex. Admin. Code, Part I Chapter 9, Subchapter N.

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Departmental Review	Keena Pace: Exec	09/2022
Initial Assignment	Shiela Oquin: ExecAsst	09/2022
Initial Assignment	Keena Pace: Exec	09/2022

EXHIBIT F-16

Status **Pending** PolicyStat ID **12594376**



Origination	N/A
Last Approved	N/A
Effective	Upon Approval
Last Revised	N/A
Next Review	1 year after approval

Owner	Eunice Davis: Dir
Area	Environmental Management
Document Type	Agency Plan

Risk Management Plan

1. Purpose

The purpose of the Risk Management Program is to strengthen The Harris Center for Mental Health and IDD's mission and vision related to consumer safety and clinical risk, as well as the safety of visitors, employees, third parties, property, operational and business risks.

2. Guiding Principles

The Risk Management Program supports The Harris Center's philosophy that safety and risk management is everyone's responsibility. Employees shall observe safe work practices, rules, and operating policies and procedures to help assure a safe environment for everyone at The Harris Center facilities or in The Harris Center vehicles. Employees should also assist individuals served at The Harris Center and our visitors in complying with these procedures and activities.

Incidents are preventable and not welcomed by anyone. They have the unfortunate capacity to change the future of the person injured and adversely affect their families as well. Incidents have a direct monetary impact upon the family and The Harris Center, negatively impact morale and productivity, and cause possible suffering to organizational reputation. It is the firm and continuing belief that accidents shall be significantly reduced or eliminated with the use of reasonable safety precautions and continual improvement of both the risk management and safety cultures.

3. Program Goals and Objectives

The Harris Center's goal is to achieve the greatest practical degree of freedom from accidental losses and hazardous conditions, and to ensure every employee, individual served, and visitor is provided a safe and healthful environment, free from uncontrolled hazards. The Harris Center is committed to protecting its patients, personnel, property, and budget, against accidental losses that could negatively impact the

organization's mission.

Through effective loss prevention efforts, The Harris Center is committed to:

1. Continuous improvement of safety and minimizing or preventing errors and events that result in harm, through proactive risk management activities;
2. Mitigating the negative effects of errors and events when they do occur; and
3. Minimizing losses by proactively identifying, analyzing, and preventing risks.

The Harris Center has a Safety and Loss Control Program that supports established policies and procedures to help provide a safe environment. It is vital that all employees participate to help achieve the goals of the program. Proper risk management will help reduce injuries and losses. It will also help ensure that The Harris Center will be able to provide quality care to our patients.

Continuously evaluating methods of reducing loss frequency and severity of accidental losses inherent in the existence of The Harris Center, lends itself towards implementing the most appropriate methods for correcting, reducing, managing, and/or eliminating risks. Risk retention allows the organization to retain financial responsibility for the risk associated with accidental loss, while risk transfer extends financial responsibility through contractual relationships and the Commercial Insurance Program. Implementing precise risk avoidance measures involves the coordination of multiple organizational functions, as well as loss control resources that are available through The Harris Center's Commercial Insurance Program and Property/Casualty Agent of Record.

The Harris Center's Board of Trustees require the expertise of a competitively selected Agent of Record to analyze the insurance market on an annual basis and make recommendations for appropriate coverage of exposures to its programs, human capital, individuals served, and assets.

All reports, audits, inspections and reviews will be communicated or forwarded to the Risk Management Director. Where reports or audits cannot be forwarded due to work-product privilege or privacy concerns, the Risk Management Director should serve on these committees. After review by the Risk Management Director, submitted resources will be forwarded to the Vice President of Enterprise Risk Management, then to the appropriate department heads, Vice President, Chief, and/or Chief Executive Officer.

4. Leadership

Following the lead of the Board of Trustees, employees of The Harris Center are committed to promoting the safety of all consumers, visitors, employees, volunteers and other individuals participating in organizational operations. The responsibilities of the Board of Trustees, Executive Leadership, Directors and Managers, Supervisors and Employees are established in the Safety Program. The Harris Center's executive leadership is committed to the effectiveness of The Harris Center's risk management plan and its role in serving the Houston and Harris County community of need.

5. Role of the Risk Management Director

The Risk Management Director is empowered by The Harris Center to implement the functions and activities of the Risk Management Program. The role of the Risk Management Director is to maintain a proactive Risk Management Program under the guidance of the VP of Enterprise Risk Management that complies with the provisions of federal, state and local laws and regulations. The Risk Management Director is responsible for creating, implementing, and evaluating the outcome of the Risk Management

Plan.

6. Components of the Risk Management Program

The Harris Center Risk Management Program will include the following components:

- A. **Designated Risk Management Director and Safety and Risk Management Committee** with demonstrated training and expertise in conducting investigations, evaluating incidents, root cause analysis, and data analysis. Reviews, identifies, monitors, and minimizes risks and potential risks associated with injury, infectious disease, property damage or loss, harm to individuals being served, and other sources of potential liability. Documentation of all aspects of the reviews, including employee training, serious injuries, annual review of data, safety inspections, ongoing monitoring and actions taken to reduce risk. Actively collaborates with loss prevention experts.
- B. **Incident Reporting System ("IRS")** is utilized for reporting non-routine incidents involving consumers, employees, or property which are not consistent with the usual operation of the agency. Non-routine incidents involving staff, consumers or others in programs operated by The Harris Center Contract affiliates are also documented. An "Incident" is defined as an event which is not consistent with the operation of any The Harris Center /contracted program or which is not consistent with the routine care of an individual. Clinical Risk Management reviews are required for incidents that indicate follow up is necessary. Clinical reviews are conducted by the Professional Review Committee and its subcommittee, the Pharmacy and Therapeutics Committees. All employees are required to report all events in The Harris Center Incident Reporting system. All new employees are required to complete an incident report training during orientation. This training includes when to complete an incident report, how to complete an incident report and failure to report a serious injury or incident.
- C. **Annual Risk Assessment** is conducted annually to help identify and bring attention to the likelihood of the risk event occurring and how severe the outcomes could be if the risk event occurs. Classifications of the likelihood of risk ranging from rare to almost certain, with consequences of likely risks ranging from insignificant to severe. This type of risk assessment directs the organization's responsiveness to certain practices, situations, and policies that could help eliminate the risk of harm to The Harris Center consumers, employees, visitors, assets, and systems involved in operations before problems occur.
- D. **Additional Risk Assessments** are conducted by individual departments. These assessments vary by department and the results and mitigation plan shall be documented and made available to the Risk Management Director upon request.
- E. **Ongoing Monitoring and Data Analysis** of harm and potential harm to identify and promptly respond to risk of harm to individuals receiving services is an activity that is carried out at operational, administrative, financial, and medical levels of The Harris Center, including the General Counsel, Chief Executive Officer and Board of Trustees.
- F. **Root Cause Analyses:** The Harris Center is committed to the utilization of robust improvement models, tools, and techniques such as Lean, root cause analysis (RCA), failure mode event analysis (FMEA), and other appropriate tools. Sources of data will include prospective, concurrent, and retrospective reviews of records and events, reports from regulatory and contracting agencies relating to care deficiencies, complaints and grievances, clinical reviews of sentinel events (through RCA, FMEA, etc.).

- G. **Life Safety Inspections** are performed at least annually at each service location owned, rented or leased by The Harris Center. The Facility Services department assures that applicable permits required by local government are maintained for fire safety surveys, alarms, fire box keys; intrusion alarms, and sprinkler systems.
- H. **Mortality Reviews** of the deaths of all consumers being served in The Harris Center programs, including consumers served in The Harris Center contracted placements are conducted by way of an administrative review. [See MED16A & MED16B Policy and Procedures for Closed Records Committee.] Closed Record reviews are conducted to identify clinically related problems requiring correction and opportunities to improve the quality of care pursuant to the statutes that authorize peer review activities in the State of Texas. [See Community Centers: Clinical Death Review 25 TAC §405.274.] Mortality reviews are performed by the Professional Review Committee and its subcommittee, the Closed Record Committee to identify opportunities to reduce risk and improve upon The Harris Center's service delivery system of care.
- I. **Commercial Insurance Program:** The Texas Council Risk Management Fund ("Fund") is a self-insurance trust composed of 36 of the 39 community centers in Texas. The Harris Center is a member. The Fund provides the following coverages:
- **Workers' Compensation** coverage responds to injuries to center employees who are injured on the job while in the course of their employment. Workers' compensation covers medical bills, rehabilitative and lost income benefits for center employees. Claims adjusters work with the employer to return the employee to meaningful work as soon as possible. To insure the most efficient use of members' contributions, claims adjusters employ significant cost savings strategies by directing medical care to pre-approved providers who are members of the Political Subdivision Workers Compensation Alliance. Cost and claim management measures include a drug formulary, pre-authorization of treatment, medical bill review and assignment of nurse case managers to serious and complex claims.
 - **Liability coverage** includes automobile liability (AL), general liability (GL), medical malpractice for both mental health and primary health care (PL) that is available for selection, public official's errors & omissions (E&O) coverage, and Excess Liability (EL) to provide additional limits of insurance of the underlying liability policies. The liability coverage has been customized to meet the exposures commonly faced by community centers in Texas. Some examples of this include the addition of options for primary care facilities that were established as a result of the 1115 Waiver program, increased coverage for non-owned automobiles, defense cost coverage for professional licensees in disciplinary actions by their licensing boards and employment practices liability including employee benefits program coverage.
 - **Property** coverage includes buildings, office contents, computers, contractor's equipment and vehicles owned by the center. The insuring agreement in the coverage document grants the coverage based on an all risk of direct physical loss subject to deductibles and exclusions. Coverage is on a blanket basis at replacement cost valuation re-determined annually. Basic crime coverage is included.
 - **Cyber Liability** coverage will guide the response to an incident with forensics, attorneys, notification and public relations strategies. Coverage is also provided for damage caused by a breach, penalties or fines and injury to the public from a breach.

- The Fund also provides effective safety consulting, assistance with auditing processes for determining premiums, leadership training, risk management consulting, excellent claim service and the ability of The Harris Center to have input in the claim management and settlement practices.

7. Risk Management Responsibilities in other Operational Units of The Harris Center

The Harris Center has a fully developed risk management philosophy that assigns responsibilities for risk management in areas outside the actual provision of services to its clients. The following risk management elements are in place and support the Risk Management Plan and its reach and mission.

A. Compliance and Financial Risk Management

The Harris Center's compliance to HIPAA is paramount. In addition, The Harris Center maintains an emphasis on legal and fiscal requirements of funders and regulatory agencies. In every area devoted to client intake, medical services, medical records and medication administration, client privacy is strictly enforced. Medical Records areas maintain very good procedures and oversight to prevent any breach of confidentiality. The annual financial statement and audit underlie the financial stability of The Harris Center and address the monetary risks The Harris Center faces.

B. Health and Safety

The Harris Center has a written safety program and the training that goes along with it includes the following elements:

- Statement of Safety Policy by CEO
- Premises safety
- Safety Rules
- Accident Reporting
- SAMA and/or PMAB standards
- Vehicle and Driver Safety
- Blood Borne Pathogens
- Infection Control
- Emergency Response and Disaster Preparedness
- Electrical Safe Practices and Lock-out/Tag-out
- Hazardous Materials
- Back Safety
- Ergonomics
- Security
- Confined Spaces
- Remote Site Safety
- Accident Investigation
- Safety Committee
- Visitor Safety
- Contractor Safety

C. Risk Management in Clinical Setting

- Physicians and nurses at The Harris Center provide leadership and oversight for medical and nursing practices. Clinic spaces are well equipped and fully staffed for the number of clients on site. Medical supplies and pharmaceuticals are secured behind locked doors. Clinic spaces are very clean and disinfectant protocols are in place. Risk Management in the clinic setting includes Infection Control, Wellness and Disease Prevention.

D. Contracting Practices

- Contracts with providers, vendors and maintenance contractors are readily available to the Risk Management Director. Contracts contain "hold harmless" agreement language in the indemnification section, requirements for insurance coverage that the contractor should carry and provisions for the contractor's adherence to safety standards. All contracts are reviewed by legal and purchasing/risk management functions.

E. Security of Information including Client Confidentiality

- Strict adherence to HIPAA and other privacy regulations are in effect. The Medical Records departments are secure to outside entry with the use of badge readers to restrict the area from unauthorized persons and employ an effective sign-out procedure for release of files. Hard copy records are scanned into the EHR system in the Medical Records department. The EHR system is username and password protected to restrict unauthorized access.

F. Conflict of Interest

- Policies and procedures to protect against the risks inherent in conflict of interest are in place for medical staff that interface with the pharmacy contractor and other medical vendors. All contractors or vendors should be surveyed for conflict of interest per our employee handbook.

G. Employment Practices

- Leadership training offered by the Fund addresses many of the employment practices or mistakes that can lead to allegations of discrimination or retaliation in employment actions. Documentation regarding performance or disciplinary issues is the key to effective risk management in employment liability.

H. Inter-agency Collaborations or Joint Ventures

The primary inter-agency collaborations at The Harris Center are with city, county, and state agencies, including local law enforcement agencies.

Primary:

- Houston Police Department
- Harris County Sheriff's Department
- Harris County Office of Homeland Security and Emergency Management
- [Regional] Joint Information Center

- Harris County Public Health and Environmental Services
- Community Services Department
- City of Houston Office of Emergency Management – Houston Department of Health and Human Services
- Health and Human Services Commission – According to performance contract
- SETRAC - SouthEast Texas Regional Advisory Council

The Crisis Counseling Programs collaborate extensively with:

- VOADs - Volunteer Organizations Active in Disaster
 - Red Cross
 - United Way
 - Medical Reserve Corp.
 - Network of Behavioral Health Providers
- Local Independent School Districts
- Long Term Recovery Meetings
- Faith-based organizations
- Community Centers
- Neighborhood and Property Owner Associations
- Food Banks
- First Responders
- Shelters
- Apartment Communities

I. Public Relations Risk Management

The effectiveness of The Harris Center is built on hard-won relationships with community organizations and law enforcement. Some of the clients served are unstable and prone to criminal activity that could reflect on these partners and The Harris Center. Any contacts from the press are forwarded to the Communications Director for a coordinated response. Any requests for information or interviews from the press must be referred to the Communication Director.

Social media is an important part of the communication process for The Harris Center. The Harris Center has a Social Media policy that every staff member must comply with. This is to protect clients, the center and individual staff members from the abuses of social media. Failure to comply with this policy can result in disciplinary action up to and including termination.

J. Risk Management Monitoring and Metrics

The reporting process in place at The Harris Center has three main purposes. Its first is quality control related to the services and people affected by risk events. The Harris Center must make every effort to protect people and processes and recover from any damage or injury. The second function is to use data about risk events to revise or modify processes, premises or services to

prevent future accidents or injuries from the same cause whether it is related to human action or physical conditions. The third function is to provide measures of the effectiveness of risk control efforts over time. This data informs the review of the risk management function by the Safety Committee and The Harris Center executives. With information, changes can be made to control, eliminate or mitigate risk to the center and its clients. Internal reporting of incidents and the external claims record provided by the Texas Council Risk Management Fund feed data into the system. The Harris Center will conduct an annual Risk Analysis, identifying risk areas of improvement, progress and action taken, and department responsibility for operational leaders that will be incorporated into this plan by reference.

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	11/2022
Department Review	Anthony Robinson: VP	10/2022
Initial Assignment	Eunice Davis: Dir	10/2022

EXHIBIT F-17

Status **Pending** PolicyStat ID **12434425**

Origination	08/2019
Last Approved	N/A
Effective	Upon Approval
Last Revised	08/2019
Next Review	1 year after approval

Owner	Kendra Thomas: Counsel
Area	Leadership
Document Type	Agency Policy

LD7A Subpoenas

1. PURPOSE

To ensure all staff of The Harris Center for Mental Health and Intellectual and Developmental Disability (The Harris Center) properly respond and meet deadlines to comply with legal obligations with respect to subpoenas.

2. POLICY

It is the policy of The Harris Center to comply and timely respond to subpoenas to avoid any delay in the legal proceedings while protecting the legal rights of The Harris Center, its staff and persons served.

The Harris Center's Legal Services Department/General Counsel Office is administratively responsible for all legal matters related to The Harris Center, including management of litigation. A person who is served with a subpoena related to behavioral healthcare services provided to persons served or any business conducted by The Harris Center must immediately notify the Legal Services Department. The subpoena and any accompanying documents shall be immediately forwarded to The Legal Services Department to review and ensure the subpoena is proper and meets legal requirements, to avoid delay and to protect the interests of The Harris Center, staff/volunteers/interns/contractors and persons served.

3. APPLICABILITY/SCOPE

All Harris Center Staff, contractors, volunteers and interns.

4. Related policies/Forms

N/A

5. References: Regulations/Standards/Statutes

- Subpoenas, TEX. R. av. P. 176
- Subpoena & Attachment, Tex. Code Crim. Proc. Ann. Art 24
- Subpoena, FED. R. CRIM. P. 17.
- Subpoena, FED. R. av. P. 45.
- Confidentiality of Substance Use Disorder Patient Records, 42 C.F.R. §§ 2.13; 2.61 – 2.67
- Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. §§ 160.314; 160.520; 164.512 CARF: Section 1. Subsection E.2., Legal Requirements

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Initial Assignment	Shannon Fleming: Counsel	10/2022
Initial Assignment	Kendra Thomas: Counsel	10/2022

EXHIBIT F-18

Status **Pending** PolicyStat ID **12415851**



Origination	N/A
Last Approved	N/A
Effective	Upon Approval
Last Revised	N/A
Next Review	1 year after approval

Owner	Terence Freeman: Dir
Area	Human Resources
Document Type	Agency Policy

HR31A Time and Attendance

1. PURPOSE:

The purpose of this policy is to communicate expectations of maintaining good attendance, punctuality, and accurate and timely punches for non-exempt employees.

2. POLICY:

It is the policy of The Harris Center for Mental Health and IDD that employees report to work on time for each scheduled workday or shift unless for approved Paid Time Off (PTO), call off following company protocol, approved leave, or other qualifying reason. Also, non-exempt employees who use time clocks are expected to clock in and out (make punches) timely and complete and approve their time-sheets consistent with unit procedures.

3. APPLICABILITY/SCOPE:

This policy applies to all Harris Center non-exempt employees

4. PROCEDURES:

Time and Attendance Procedure

5. RELATED POLICIES/FORMS (for reference only)::

Employee Handbook

Employee Counseling, Supervision, Progressive Discipline, and Termination Policy

6. REFERENCES: RULES/REGULATIONS/ STANDARDS:

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	10/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Department Review	David Wykes	09/2022
Initial Assignment	Terence Freeman: Dir	09/2022

EXHIBIT F-19

Status **Pending** PolicyStat ID **12403624**

Origination	N/A
Last Approved	N/A
Effective	Upon Approval
Last Revised	N/A
Next Review	1 year after approval

Owner	Ninfa Escobar: Dir
Area	Human Resources
Document Type	Agency Policy

HR27A Volunteer Program Policy

1. PURPOSE:

To establish guidelines for recruitment, selection, assignment, evaluation and separation of The Harris Center for Mental Health and IDD's volunteers. The Harris Center volunteers are individuals offering their time to assist in the provision of behavioral health and IDD services and do not receive compensation.

2. POLICY:

The Harris Center for Mental Health and IDD shall have a comprehensive volunteer program to provide individuals who have expressed an interest in associating with The Harris Center as a volunteer the opportunity to assist in the provision of services without pay. These opportunities should be beneficial to the volunteers, people we serve, and the Harris Center. Volunteers will be selected without regard to race, color, age, sex, gender, gender identity, disability, religion, or national origin.

3. APPLICABILITY/SCOPE:

All programs within The Harris Center for Mental Health and IDD.

4. RELATED POLICIES/FORMS:

5. REFERENCES: RULES/REGULATIONS/ STANDARDS:

- Volunteers, Tex. Government Code Ch. 2109
- Tex. Civ. Prac. & Rem. Code Ann. 84.003
- The Harris Center's Policy and Procedure Handbook

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	10/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Department Review	David Wykes	09/2022
Initial Assignment	Terence Freeman: Dir	09/2022
Initial Assignment	Ninfa Escobar: Dir	09/2022

EXHIBIT F-20

Status **Pending** PolicyStat ID **11466634**

Origination	01/1998
Last Approved	N/A
Effective	Upon Approval
Last Revised	09/2022
Next Review	03/2022

Owner	Rita Alford: Dir
Area	Information Management
Document Type	Agency Policy

HIM1A Agency Abbreviations

1. PURPOSE

To maintain the standardized approved list of abbreviations.

2. POLICY

It is the policy of the Harris Center that in order to reduce error and foster clarity of written communication, only approved abbreviations and symbols shall be used when making entries in the Patient/Individual's record. An abbreviation list has been developed to establish the continuity of medical terminology and abbreviations for use in the medical records maintained by The Harris Center for Mental Health and IDD.

3. APPLICABILITY/SCOPE

Applies to [all staff, contractors, volunteers and interns at](#) The HARRIS CENTER for Mental Health and IDD.

4. PROCEDURES

See Procedures HIM:[-002b1B](#)

5. Related policies/Forms:

6. References: Rules/Regulations/Standards

- The Charles Press Handbook of Current Medical Abbreviations, 5th Edition

- Institute for Safe Medication Practices (ISMP) List of Error-Prone Abbreviations, Symbols and Dose Designations

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	10/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Department Review	Mustafa Cochinwala: Dir	10/2022
Initial Assignment	Rita Alford: Dir	09/2022

EXHIBIT F-21

Status **Pending** PolicyStat ID **12354107**

Origination	07/1992
Last Approved	N/A
Effective	Upon Approval
Last Revised	10/2022
Next Review	1 year after approval

Owner	Kendra Thomas: Counsel
Area	Leadership
Document Type	Agency Policy

LD2A - Communication with the Media and Other Entities

1. PURPOSE

To ensure all staff within The Harris Center for Mental Health and IDD communicates accurately, effectively, and consistently to all media sources to support the organization's mission and strategic plan.

2. POLICY

The Communications Department is the primary and official liaison to the media and shall be responsible for approving and/or coordinating the communication of The Harris Center information to the media and other entities. All staff should contact the Communications department for matters related to media contacts, crisis incidents and for general procedures regarding relations with the media.

Any information regarding an individual's identity and treatment is confidential and shall only be released in accordance with The Harris Center policies and procedures, along with state and federal laws and regulations. It is the policy of The Harris Center to comply with the Texas Public Information Act.

3. APPLICABILITY/SCOPE

All Harris Center staff must adhere to this policy when acting on behalf of The Harris Center. No employee is authorized to speak "off the record" on behalf of The Harris Center.

4. RELATED POLICIES/FORMS ~~(for reference only)~~:

- Media consent form
- Consent for release of confidential information

5. REFERENCES: RULES/REGULATIONS/STANDARDS:

- CARF Standard: Risk Management 1.G.3. Written procedures regarding communications, including media relations and social media.

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	10/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Initial Assignment	Kendra Thomas: Counsel	10/2022
Initial Assignment	Shannon Fleming: Counsel	09/2022

EXHIBIT F-22

Status **Pending** PolicyStat ID **12434436**



Origination	06/2006	Owner	Keena Pace: Exec
Last Approved	N/A	Area	Assessment, Care & Continuity
Effective	Upon Approval	Document Type	Agency Policy
Last Revised	09/2022		
Next Review	1 year after approval		

ACC16A Declaration of Mental Health Treatment

1. PURPOSE:

The purpose of this policy is to ensure that The Harris Center staff are informed, trained, and demonstrate competence accordingly with regards to Declarations of Mental Health Treatment. All Harris Center patients have the right to execute a Declaration of Mental Health Treatment.

2. POLICY:

It is the policy of The Harris Center for Mental Health and IDD (The Harris Center) to offer persons served an opportunity to make a Declaration for Mental Health Treatment. This opportunity is offered to each person upon entry into THE HARRIS CENTER services and when services are sought through the Psychiatric Emergency Services programs, including the Crisis Stabilization Unit of The Harris Center. All Harris Center staff have a duty to act in accordance with Declarations for Mental Health Treatment to the fullest extent possible.

3. APPLICABILITY/SCOPE:

This policy applies to all Harris Center staff, employees, contractors, volunteers and the clients and family/legally authorized representatives accessing services with The Harris Center as applicable.

4. PROCEDURES:

[ACC16B Declaration of Mental Health Treatment](#)

5. RELATED POLICIES/FORMS ~~(for reference)~~

only):

Assurance of Individual Rights	RR3A
Declaration for Mental Health Treatment	Attachment A

6. REFERENCES: RULES/REGULATIONS/ STANDARDS:

Texas Civil Practices and Remedies Code, Chapter 137-Declaration for Mental Health Treatment Interventions in Mental Health Services; Staff Member Training, Title 25 Texas Administrative Code §415.257

CCBHC 2.C.3 Availability and Accessibility of Services

~~Declaration for Mental Health Treatment~~

Please see the attached "A: Declaration for Mental Health Treatment".

Attachments

[A: Declaration for Mental Health Treatment](#)

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	10/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	09/2022
Departmental Review	Keena Pace: Exec	09/2022
Initial Assignment	Shiela Oquin: ExecAsst	09/2022
Initial Assignment	Keena Pace: Exec	09/2022

EXHIBIT F-23

Status **Pending** PolicyStat ID **12434435**

Origination	10/2020
Last Approved	N/A
Effective	Upon Approval
Last Revised	09/2022
Next Review	1 year after approval

Owner	Anthony Robinson: VP
Area	Environmental Management
Document Type	Agency Policy

EM2A Emergency Codes, Alerts, and Response

1. PURPOSE:

To provide plain language emergency alert and procedures to be used in response to emergency situations.

2. SCOPE:

[This policy is applicable to all employees, staff, interns, volunteers, and contractors of The Harris Center.](#)

3. POLICY STATEMENT:

The Harris Center Emergency Management Services is responsible for using plain language emergency notification to alert staff and prompt appropriate, predetermined actions and responses, in the event of an emergency situation.

~~Plain Language Emergency Alerts:~~

~~Alert Categories: Medical, Facility, Security, and Weather~~

4. PROCEDURES:

[EM15B Medical Alert - Code Blue](#)

[EM16B Medical Alert - Crisis Intervention](#)

[EM12B Security Alert - Armed Intruder](#)

[EM13B Facility Alert - Hazardous Spill](#)

[EM14B Facility Alert - Utility Systems Failures](#)

[EM18B Facility Alert - Bomb Threat/ Suspicious Package](#)

[EM19B Facility Alert - Hostage Situation](#)

[EM20B Facility Alert - Missing Child/ Abduction](#)

[EM21B - Facility Alert - Fire Evacuation Plan](#)

[EM25B - Weather Alert](#)

5. RELATED POLICIES:

[EM22A: Safety and Risk Management in Center Facilities](#)

6. REGULATORY/ REFERENCE:

[CARF: Risk Management 1.G.1; Health and Safety1.H.2](#)

7. Alert Categories: Medical, Facility, Security, and Weather

A. Medical Alert:

- i. **Code Blue:** Indicates a suspected or imminent cardiopulmonary arrest
 - "Medical Alert + Code Blue + Location"
- ii. **Medical Emergency:** Indicates an acute injury or illness which poses an immediate risk to an individual's life or health.
 - "Medical Emergency + Location"
- iii. **Crisis Intervention:** Indicates patient is harmful to self or others in a Harris Center facility.
 - "Medical Alert + Crisis Intervention + Location"

B. Security Alert:

- i. **Active Shooter/ Armed Intruder:** Indicates there is an active shooter or an armed intruder (knife, bat, etc.) incident in a Harris Center Facility.
 - "Security Alert + Active Shooter/ Armed Intruder + Location"
- ii. **Hostage Situation:** Indicates there is a hostage situation at a Harris Center facility.
 - "Security Alert + Hostage Situation"
- iii. **Missing Child:** Indicates a missing or abducted child who is a visitor or child/ adolescent patient in a Harris Center facility.
 - "Security Alert + Missing Child & Adult + Location"

- iv. **Suspicious Package:** Indicates a bomb threat or the discovery of a suspicious device in a Harris Center facility.

- "Security Alert + Suspicious Package + Location"

C. Facility Alert:

- i. **System Failure:** Indicates a utility or system failure in a Harris Center facility.

- "Facility Alert + Utility Failure + Location"

- ii. **Hazardous Spill:** Indicates an unintentional release of one or more hazardous substances which could harm human health or the environment in and around a Harris Center facility.

- "Facility Alert + Hazardous Spill + Location"

- iii. **Code Red:** Indicates an actual or suspected fire in a Harris Center facility.

- "Facility Alert + Code Red + Location"

D. Weather Alert:

- i. Indicates a severe weather condition (e.g., tornado, flooding, ice storm, etc.) at or near a Harris Center facility.

- "Weather Alert + Description + Location"

PLAIN LANGUAGE ALERT CODES DESK TOOL

Emergency	Alerts & Communication	Notification Mode
Code Blue/Medical Emergency	Medical Alert+ Code Blue+ Location	Overhead page
Crisis Intervention	Medical Alert + Crisis Intervention + Location	Overhead page
Active Shooter/ Armed Intruder	Security Alert + Active Shooter/Armed Intruder + Location	Alert System Overhead page
Hostage Situation	Security Alert + Hostage Situation + Location	Alert System
Missing Child	Security Alert + Missing Child + Location	Alert System & Overhead page
Bomb Threat/ Suspicious Package	Security Alert + Suspicious Package + Location	Alert System If bomb threat, use bomb threat checklist
Utility or System Failure	Facility Alert + Utility Failure + Location	Alert System
Hazardous Spill	Facility Alert + Hazardous Spill + Location	Alert System
Code Red/Fire	Facility Alert + Code Red + Location	Overhead page
Tornado, flooding, hurricane	Weather Alert + Description + Location	Alert System & Overhead page

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	10/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Department Review	Anthony Robinson: VP	09/2022
Initial Assignment	Anthony Robinson: VP	09/2022

EXHIBIT F-24

Status **Pending** PolicyStat ID **12434430**

Origination 09/2020

Last Approved N/A

Effective Upon Approval

Last Revised 10/2022

Next Review 1 year after approval

Owner Keena Pace: Exec

Area Assessment, Care & Continuity

Document Type Agency Policy

ACC13A Financial Assessment

1. PURPOSE

The purpose of this policy is to complete a financial assessment at intake and yearly thereafter to ensure compliance to the state rules and laws by establishing a uniform evaluation of patient's financial status and residency that determines the patient's ability to pay by using a sliding fee scale.

2. POLICY

It is the policy of the Harris Center to conduct and document a financial assessment for each patient within the first thirty (30) days of services. The Harris Center shall update the financial assessment for patients at least on a yearly basis and whenever the consumer reports any significant change in income, insurance, family size, or extraordinary expenses in which case the financial will be update before the yearly anniversary of the previous financial.

3. APPLICABILITY/SCOPE

This policy applies to all Harris Center staff, contractors, visitors, and people served.

4. PROCEDURES

Financial Assessment Procedure

5. RELATED POLICIES/FORMS ~~(for reference only)~~:

- [Fee Schedule/Standard Charge](#)
- [FM25A Charity Care Policy](#)

6. REFERENCES: RULES/REGULATIONS/STANDARDS:

- Community Centers-Fees for Services, Tex. Health & Safety Code §534.017
- Local Mental Health Authorities Responsibilities, Charges for Community Services, 25 Tex. Admin. Code, Chapter 412, Subchapter C

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Departmental Review	Keena Pace: Exec	10/2022
Initial Assignment	Keena Pace: Exec	10/2022
Initial Assignment	Shiela Oquin: ExecAsst	09/2022

EXHIBIT F-25

Status **Pending** PolicyStat ID **12030273**

Origination	02/2001
Last Approved	N/A
Effective	Upon Approval
Last Revised	09/2022
Next Review	1 year after approval

Owner	Terence Freeman: Dir
Area	Human Resources
Document Type	Agency Policy

HR15A - Licensure, Certification, and Registration

1. PURPOSE

The purpose of this policy is to ensure The Harris Center for Mental Health and IDD (The Harris Center) verifies the professional licensure, registration and certification of employees, volunteers and contractors who are in identified positions or job classifications that require an occupational license, certification or registration.

2. POLICY

The Harris Center requires employees in identified positions and/or job classifications to hold and maintain in good standing applicable professional licenses, registrations, certifications, and educational credentials. Employees must provide The Harris Center proof of the existence and current status of such professional licenses, registration, certifications and educational records by submitting official copies that bear authenticity. Upon receipt of proof, it is the policy of The Harris Center to validate such licenses, registrations and certifications electronically, as appropriate, when available.

3. APPLICABILITY/SCOPE

All The Harris Center employees, volunteers and contractors whose position requires a license, certification, and/or registration.

4. PROCEDURES

- ~~Central Records-Human Resources Service Responsibilities~~
- ~~Supervisory Responsibilities~~

- [Employee Responsibilities](#)
- [Positions](#)
- [HR15B - Licensure, Certification, and Registration](#)

5. Related Policies and Forms

N/A

~~6. Reference:~~

- [HR2A - Credentialing and Privileging](#)
- [HR10A - Employment Eligibility Verification](#)

7. References/ Rules/ Regulations/ Standards:

Rules/Regulations/Standards

~~Competency and Credentialing, 36 Tex. Admin. Code §301.331~~ [Competency and Credentialing, 36 Tex. Admin. Code §301.331](#)

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	09/2022
Legal Review	Kendra Thomas: Counsel	09/2022
Compliance Review	Anthony Robinson: VP	09/2022
Department Review	David Wykes	08/2022
Initial Assignment	Terence Freeman: Dir	08/2022

EXHIBIT F-26

Status **Pending** PolicyStat ID **12226009**

Origination	11/2012
Last Approved	N/A
Effective	Upon Approval
Last Revised	10/2022
Next Review	1 year after approval

Owner	Mustafa Cochinwala: Dir
Area	Information Management
Document Type	Agency Policy

HIM11A - Off-Premises Equipment Usage

1. PURPOSE

This purpose of this policy is to ensure proper assignment and return of all property and equipment owned, leased, or in possession of The Harris Center for Mental Health and Intellectual and Developmental Disability (The Harris Center) employee for both temporary and permanent use.

2. POLICY

All property and equipment owned, leased or in the possession of The Harris Center are assigned to a unit, a location and an employee. Most property will not leave the assigned unit. In the event that it is essential for property or equipment to be used off premises, written approval must be obtained from the Unit Director. Property and/or Equipment may either be signed out to an employee on a temporary basis to complete a specific assignment or on a longer-term basis if the location of the property or equipment is essential for day to day performance of the job. Property and/or equipment signed out to an employee becomes the financial responsibility of that employee. All property and equipment shall be returned to the Harris Center upon termination of employment or completion of a special assignment, internship or volunteer experience.

3. APPLICABILITY/SCOPE

This policy applies to all interns, volunteers, and staff employed by The Harris Center including, both direct and contracted employees. Property and equipment covered by this policy includes 1) all property and equipment with The Harris Center numbered inventory tags on it, including laptop computers, and 2) leased equipment or other equipment which represent a financial obligation of The Harris Center.

4. PROCEDURES

FM3B Property Inventory

- A. TEMPORARY OFF-PREMISES USE OF EQUIPMENT
- B. PERMANENT ASSIGNMENT OF EQUIPMENT FOR OFF-PREMISES USE

5. RELATED POLICIES/FORMS:

Request to Transfer Property	BUS-R/I:3.001 Laptop
Computer Equipment Procedure	BUS-R/I:1.10
HIM4A Information Security Policy Request to Transfer Property Form	

6. REFERENCES: RULES/REGULATIONS/STANDARDS

- A. CARF: Section 1., Subsection J., Technology

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	10/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Department Review	Mustafa Cochinwala: Dir	10/2022
Initial Assignment	Mustafa Cochinwala: Dir	09/2022

EXHIBIT F-27

Status **Pending** PolicyStat ID **11650547**

Origination	05/1993
Last Approved	N/A
Effective	Upon Approval
Last Revised	08/2022
Next Review	1 year after approval

Owner	Maria Richardson: Dir
Area	Medical Services
Document Type	Agency Policy

MED6A - Medication Storage, Preparation, and Administration Areas

1. PURPOSE

To establish a uniform policy for the storage, security, preparation and administration areas for medications.

2. POLICY

It is the policy of The Harris Center for a Pharmacist, or other appropriately trained individuals under the supervision of the Director of Pharmacy (DOP), to ensure that all medications maintained by the Agency are stored safely, securely, and properly following manufacturer/supplier recommendations (e.g. proper sanitation, temperature, light, moisture, ventilation, and segregation conditions) and state laws and rules. The Pharmacy Department will conduct regular inspections of all drug storage areas within the Harris Center Pharmacies and each service site responsible for the containment of drugs.

3. APPLICABILITY/SCOPE

All Harris Center mental health and IDD service sites, clinics, treatment programs, residential care programs and pharmacies.

4. PROCEDURES

- A. Medication Storage
- B. Access to Medication

~~C. Inspection of Medication Storage Areas~~

~~D. Medication Disposal~~

~~E. Medication Preparation and Administration Areas~~

A. Medication Storage

1. The storage of medications at all Harris Center locations shall occur as follows:

- : All medications shall be properly labeled, e.g., specific directions for use, name and strength of medication, consumer's name, etc.
- : Medications shall be stored under lock and key.
- : Medications shall be stored separately for each consumer.
- : Disinfectants and medications for external use (topical medication) shall be stored separately from internal and injectable medications.
- : Storage areas shall be kept clean, well-lit, and free of clutter.
- : Drugs requiring special conditions for storage (e.g., refrigeration) to ensure stability shall be stored in a separate compartment or refrigerator that is capable of maintaining the conditions indicated in the storage directions. Medications shall not be stored in refrigerators where blood, urine or food are kept.
- : Drugs requiring special conditions for storage (e.g., protect from light) to ensure stability; shall be stored in the appropriate containers and packaging material that can protect the products from light. This might include original packaging, foil or amber colored containers.

B. Access to Medication

1. Congregate medication storage areas shall only be accessible to staff authorized to administer medication or supervise self-administration of medication. A list of the authorized personnel shall be posted in the medication storage/administration area.
2. Stock supplies of medications shall be accessible only to pharmacists and licensed nursing and medical staff. In addition, stock supplies of over-the-counter medications shall also be accessible to certified medication aides and/or trained staff who supervise self-administration of medication.
3. Stock supplies of legend medications shall only be dispensed by a pharmacist.

C. Inspection of Medication Storage Areas

1. Medications shall be inspected monthly to remove expired, deteriorated, and returned medications.
2. On a monthly basis the pharmacy shall inspect all medication storage areas within the Agency to verify proper storage conditions.
3. A record of such inspections shall be maintained by the Pharmacy Department.
4. A plan of corrective action shall be completed by the site supervisor, or designee, for all noted deficiencies. Documentation of completion of the plan to correct cited deficiencies shall be maintained.

D. Medication Disposal

1. All outdated, expired, discontinued, or illegibly labeled medications shall be removed from storage for disposal, and when necessary, replaced.
2. Any medications not delivered to the consumer shall be removed from storage for disposal.
3. Documentation of all medication disposals shall be maintained by the Pharmacist in charge (PIC) of the pharmacy that disposed of that medication.
4. All medications removed from storage for disposal shall be sent to the Pharmacist in charge at the Clinic Pharmacies for proper disposition.

E. Medication Preparation and Administration Areas

1. Medication preparation and administration areas shall have available the following:
 - : An up-to-date list of authorized prescribers (if more than one prescriber at the site).
 - : An up-to-date list of personnel authorized to administer medication (if more than one person at the site).
 - : An up-to-date list of personnel authorized to supervise self-administration of medication (if more than one person at the site).
 - : Proximity to a sink with running water or topical disinfectant which allows sanitary practices.
 - : Pharmaceutical reference material available, current within the last two years.
 - : The telephone number of the regional Poison Control Information Center is posted.

5. RELATED POLICIES/FORMS:

Medical Services MED1A

Medication Storage, Preparation, and Administration Areas MED6B

~~Medical Services~~

Pharmacy and Unit Medication / Drug Inventory

~~Nursing Unit Inspection Form MED11A~~

Nursing Unit Inspection Form

6. REFERENCES:

RULES/REGULATIONS/STANDARDS:

- ~~Texas Pharmacy Act, Texas Occupations Code Chapter 551-552~~
- ~~All Classes of Pharmacies, Title 22 Tex. Administrative Code Chapter 291, Subchapter A~~
- ~~Prescribing of Psychoactive Medication, Title 25 Texas Administrative Code Chapter 415,~~

Subchapter A

- [Health, Safety and Rights, Title 40 Texas Administrative Code Rule 2.313](#)
- [CARF Section 2E](#)
- [Texas Occupations Code. Title 3. Subtitle J. Pharmacy and Pharmacists. Chapters 551 and 552.](#)
- [Texas Administrative Code. Title 22. Chapter 291. Subchapter A. All Classes of Pharmacies.](#)
- [Texas Administrative Code. Title 22. Chapter 291.15 Subchapter A. Storage of Drugs](#)
- [Texas Administrative Code . Title 25. Chapter 415. Subchapter A. Prescribing of Psychoactive Medication](#)
- [Texas Administrative Code. Title 40. Chapter 2. Health, Safety and Rights. Rule 2.313\(c\)\(d\)](#)
- [National Institute of Standards and Technology Reports \(NISTIR\) 7656 and 7753](#)
- [CARF. Accreditation Standards. Section 2. E. Medication Use](#)
- [CDC Storage and Handling Tool Kit](#)

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Final Legal Review	Kendra Thomas: Counsel	10/2022
Initial Legal Review	Shannon Fleming: Counsel	09/2022
Compliance Review	Anthony Robinson: VP	09/2022
Department Review	Luming Li: Chief Medical Ofcr (1101 1817)	08/2022
Initial Assignment	Maria Richardson: Dir	08/2022

EXHIBIT F-28

Status **Pending** PolicyStat ID **11936829**

Origination	02/2016
Last Approved	N/A
Effective	Upon Approval
Last Revised	11/2022
Next Review	1 year after approval

Owner	Gertrude Leidich: Vice President Clinical Transformation and Quality
Area	Medical Services
Document Type	Agency Policy

MED10A - Pharmaceutical Representatives Policy

1. PURPOSE:

To provide guidelines for the activities of pharmaceutical representatives as they related to The Harris Center associated matters.

2. POLICY

It is the policy of The Harris Center to ensure positive, constructive, and objective relationship activities between The Harris Center (~~Center~~) and Pharmaceutical Company representatives. Pharmaceutical Representatives access to clinical sites and Harris Center personnel shall occur on a scheduled basis as approved by the Harris Center Chief Medical ~~Director~~ Officer or Divisional VPs of Medical ~~Director~~ Services. These activities include, but are not limited to, the review of product information, sponsorship of medical education, coordination of studies for new and existing drugs and products, and responses to requests for procurement or recall of specific products.

The Harris Center personnel are strictly prohibited from accepting any form of gifts, courtesies, meals, or remuneration in any amount from pharmaceutical company representatives. The Harris Center personnel are required to immediately report any form of employment with pharmaceutical companies, including payments for speaking fees, travel, or food, on behalf of pharmaceutical companies, to their immediate supervisor and complete the Outside Practice Questionnaire for Licensed or Non-Licensed Staff.

3. APPLICABILITY/SCOPE

All Harris Center employees, contractors, interns, volunteers and programs.

4. PROCEDURES

[MED10B-Pharmaceutical Representatives Procedure](#)

5. RELATED ~~POLICIES~~POLICIES/FORMS:

Outside Practice for Employees of the Harris Center [form](#)

Outside Practice for Non-licensed Personnel of the Harris Center [form](#)

6. REFERENCES: RULES/REGULATIONS/ STANDARDS:

[The Harris Center's Policy and Procedure Handbook](#)

CARF Section 2E

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
CEO Approval	Shannon Fleming: Counsel	11/2022
Final Legal Review	Kendra Thomas: Counsel	11/2022
Initial Legal Review	Shannon Fleming: Counsel	11/2022
Compliance Review	Anthony Robinson: VP	10/2022
Department Review	Luming Li: Chief Medical Ofcr (1101 1817)	09/2022
Initial Assignment	Luming Li: Chief Medical Ofcr (1101 1817)	09/2022

EXHIBIT F-29

Status **Pending** PolicyStat ID **11936828**

Origination 07/2008

Last Approved N/A

Effective Upon Approval

Last Revised 08/2022

Next Review 1 year after approval

Owner Angela Babin: Dir

Area Medical Services

Document Type Agency Policy

MED11A - Pharmacy and Unit Medication/Drug Inventory

1. PURPOSE:

To establish a uniform policy to control and account for all medications received, dispensed, and destroyed by the pharmacy.

2. POLICY

It is the policy of The Harris Center to account for stock supplies of prescription drugs and at a minimum, conduct inventory twice per year. The Harris Center pharmacies shall maintain records of all pharmacy transactions in accordance with legal requirements. In order to control and account for all medication, these records shall include documentation of the receipt and delivery of prescription drugs as well as those dispensed.

The Harris Center units may maintain stock supplies of medications for consumer use as deemed appropriate by The Pharmacy and Therapeutics Committee. Any medication stocked by a unit will be the responsibility of the Unit's Lead Psychiatrist.

3. APPLICABILITY/SCOPE

All Harris Center mental health and IDD service sites, clinics, treatment programs, residential care programs and pharmacies.

4. PROCEDURES

- A. Clinic Pharmacies Inventory (AMH)
- B. Clinic Nurses' Station Inventory (AMH) C. IDD Residential Units' Inventory

5. RELATED POLICIES/FORMS:

[MED6A](#) Medication Storage, Preparation, and Administration Areas [PHAR:3](#)

6. REFERENCES/RULES/REGULATIONS/STANDARDS:

- Controlled Substances Act, 21 U.S.C. §§827, 842, 958(d)
- Tex. Controlled Substances Act, Tex. Health & Safety Code §481.067
- Pharmacies-All Classes of Pharmacies-Inventory Requirements, 22 Tex. Admin. Code §291.14
- The Harris Center's Policy and Procedure Handbook CARF Section 2E

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Final Legal Review	Kendra Thomas: Counsel	11/2022
Initial Legal Review	Shannon Fleming: Counsel	11/2022
Compliance Review	Anthony Robinson: VP	10/2022
Department Review	Luming Li: Chief Medical Ofcr (1101 1817)	09/2022
Initial Assignment	Angela Babin: Dir	08/2022

EXHIBIT F-30

Status **Pending** PolicyStat ID **12321701**

Origination 05/2020

Last Approved N/A

Effective Upon Approval

Last Revised 10/2022

Next Review 1 year after approval

Owner Shiela Oquin:
ExecAsstArea Assessment,
Care & ContinuityDocument Agency Policy
Type

ACC18A - Supervision of Peer Specialists

1. PURPOSE

To ensure effective supervision of Peer Specialists across all divisions and programs at The Harris Center.

2. POLICY

It is the policy of The Harris Center to provide supervision to all Peer Specialists consistent with state rules and laws. Peer Specialist supervision must focus on peer specialists' provision of services, including review of cases and activities, skill building, problem resolution, and professional growth. Supervision may also include aspects specific to the Harris Center, such as following organizational policy or other administrative matters.

3. APPLICABILITY/SCOPE

This policy will apply to all Peer Specialists across all divisions and programs at The Harris Center.

4. RELATED POLICIES/FORMS:

- Supervision Verification Form
- Direct Hours Tracking/Supervised Work Experience Form
- [ACC18B](#) Supervision of Peer Specialists Procedure

5. REFERENCES: RULES/REGULATIONS/

STANDARDS:

Peer Specialists, Texas Government Code §531.0999

Medical Assistance Program, Texas Human Resources Code §32.024(kk)

Texas Administrative Code, Title 1, Part 15, Chapter 354, Subchapter N

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Departmental Review	Keena Pace: Exec	09/2022
Initial Assignment	Shiela Oquin: ExecAsst	09/2022

EXHIBIT F-31

Status **Pending** PolicyStat ID **12354109**

Origination	11/2015
Last Approved	N/A
Effective	Upon Approval
Last Revised	09/2022
Next Review	1 year after approval

Owner	Steve Evans: Controller
Area	Fiscal Management
Document Type	Agency Policy

FM18A - Travel Policy

1. PURPOSE:

The purpose of this policy is to reimburse employees for reasonable expenses incurred during the period they are employed with the Harris Center in connection with travel and other business on behalf of the Harris Center, subject to the guidelines outlined in this policy.

2. POLICY:

It is the policy of The Harris Center to reimburse staff for reasonable and necessary expenses incurred during approved work-related travel.

Employees seeking reimbursement should incur the lowest reasonable travel expenses and exercise care to avoid impropriety or the appearance of impropriety. Reimbursement is allowed only when reimbursement has not been, and will not be, received from other sources. If a circumstance arises that is not specifically covered in this travel policy, then the most conservative course of action should be taken.

All business-related travel paid with The Harris Center funds must comply with company expenditure procedures. As a tax-exempt center, The Harris Center does not pay sales taxes and employees will not be reimbursed.

Authorization and responsibility

Staff travel must be authorized. Travelers should verify that planned travel is eligible for reimbursement before making travel arrangements. The traveler must submit a travel reimbursement form and supporting documentation to obtain reimbursement of expenses.

An individual may not approve his or her own travel or reimbursement. The travel reimbursement form must be signed by the Chief Executive Officer for travel over \$1,000.

Designated approval authorities are required to review expenditures and withhold reimbursement if there is reason to believe that the expenditures are inappropriate or extravagant.

Personal funds

Travelers should review reimbursement guidelines before spending personal funds for business travel to determine if such expenses are reimbursable. The Harris Center reserves the right to deny reimbursement of travel-related expenses for failure to comply with policies.

Travelers who use personal funds to facilitate travel arrangements will not be reimbursed until after the trip occurs and proper documentation is submitted.

Mileage

Employees are reimbursed at the current standard mileage reimbursement rate determined by the IRS.

Mileage will be calculated based on distance from main place of employment to travel destination or client site.

Per Diem

Employee meals while traveling will be reimbursed at the per diem rates as published by the Chief Financial ~~and Administrative~~ Officer.

Exceptions

Occasionally it may be necessary for travelers to request exceptions to this travel policy. Requests for exceptions to the policy must be made in writing and approved by the Chief Executive Officer or by the Chief Financial ~~and Administrative~~ Officer. Exceptions related to the Chief Executive Officer's or the Chief Financial ~~and Administrative~~ Officer's expenses must be submitted to the opposite person or to a member of the Board of Trustees for approval. In most instances, the expected turnaround time for review and approval is five business days.

Non-reimbursable Travel Expenses

The Harris Center will not reimburse the following items that may be associated with business travel:

- Airline club memberships
- Airline upgrades
- Baggage fees
- Business class for domestic flights or first class for all flights
- Childcare, babysitting, housesitting, or pet-sitting/kennel charges
- Commuting between home and the primary work location

- Costs incurred by traveler's failure to cancel travel or hotel reservations in a timely fashion
- Evening or formal wear expenses
- Haircuts and personal grooming
- Laundry and dry cleaning
- Passports, vaccinations and visas when not required as a specific and necessary condition of the travel assignment
- Personal entertainment expenses, including in-flight movies, headsets, health club facilities, hotel pay-per-view movies, in-theater movies, social activities and related incidental costs
- Travel accident insurance premiums or purchase of additional travel insurance
- Other expenses not directly related to the business travel

3. APPLICABILITY/SCOPE

This policy applies to all Harris Center employees, contractors, interns and volunteers.

4. RELATED POLICIES/FORMS (for reference only):

[Travel Reimbursement Procedure](#)

5. REFERENCES: RULES/REGULATIONS/STANDARDS:

Approval Signatures

Step Description	Approver	Date
Management of Board Approval	Christopher Webb: Audit	Pending
CEO Approval	Wayne Young: Exec	11/2022
Legal Review	Kendra Thomas: Counsel	10/2022
Compliance Review	Anthony Robinson: VP	10/2022
Department Review	Steve Evans: Controller	09/2022
Initial Assignment	Steve Evans: Controller	09/2022
Initial Assignment	Daniel Paick: Dir	09/2022

EXHIBIT F-32

*The HARRIS CENTER for
Mental Health and IDD*
Updated Board of Trustees Meetings
2023-Proposed

<u>JANUARY 2023</u>	<u>FEBRUARY 2023</u>	<u>MARCH 2023</u>	<u>APRIL 2023</u>	<u>MAY 2023</u>	<u>JUNE 2023</u>
17 – Resource Committee 17 – Program Committee 17– Quality Committee 17 – Audit Committee 24 – Governance 24 – Board Meeting	21 – Resource Committee 21 – Program Committee 21 – Quality Committee 28 – Governance 28 – Board Meeting	21 – Resource Committee 21 – Program Committee 21 – Quality Committee 28 – Governance 28 – Board Meeting	18 – Resource Committee 18 – Program Committee 18– Quality Committee 18 – Audit Committee 25 – Governance 25 – Board Meeting	16 – Resource Committee 16 – Program Committee 16 – Quality Committee 23 – Governance 23 – Board Meeting	20 – Resource Committee 20 – Program Committee 20 – Quality Committee 27 – Governance 27 – Board Meeting
<u>JULY 2023</u>	<u>AUGUST 2023</u>	<u>SEPTEMBER 2023</u>	<u>OCTOBER 2023</u>	<u>NOVEMBER 2023</u>	<u>DECEMBER 2023</u>
18 – Resource Committee 18 – Program Committee 18 – Quality Committee 18 – Audit Committee 25 – Governance 25 – Board Meeting	07 – Board Budget Meeting 15 – Resource Committee 15 – Program Committee 15 – Quality Committee 22 – Governance 22 – Board Meeting	18 – Resource Committee 18 – Program Committee 18 – Quality Committee 26 – Governance 26 – Board Meeting	17 – Resource Committee 17 – Program Committee 17 – Quality Committee 17 – Audit Committee 24 – Governance 24 – Board Meeting 24 – Annual Board Training	7 – Resource Committee 7 – Program Committee 7 – Quality Committee 14 – Governance 14 – Board Meeting**	19- Full Board ** (as needed)

The Resource Committee Meetings are normally held at, **8:30** a.m., Quality Committee Meetings are normally held at **10:00** a.m. and the Program Committee Meetings are normally held at **11:30** a.m. on the 3rd Tuesday

The Audit Committee Meetings are normally held at **12:30** p.m. on the 3rd Tuesday in January, April, July, and October.

The Governance Committee Meetings are normally held the 4th Tuesday as needed at **8:30** a.m.

Full Board Meetings are normally held the 4th Tuesday of each month at **9:30** a.m.

** The November Committees and Board and the December Board Meeting are usually moved up 1 week early due to the Holidays.
Meetings held in the Board Room (#109) at 9401 Southwest Freeway

EXHIBIT F-33

Stand-Alone Board Agenda Item

November 2022

AMENDMENTS OVER 100K



Executive Contract Summary

Contract Section


Contractor*

Tejas Health Management

Contract ID #*

7739

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/15/2022

Parties* (?)

Tejas Health Management and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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* (?)

12/1/2022

Contract Term End Date* (?)

8/31/2023

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

Current Contract Amount*

\$ 7,200.00

Increase Not to Exceed*

\$ 105,900.00

Revised Total Not to Exceed (NTE)*

\$ 113,100.00

Fiscal Year* (?)

2023

Amount* (?)

\$ 113,100.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input checked="" type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other |

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

The purchase of the Cactus system will replace an old manual process. The HR team emails the provider the credentialing application to complete. Upon completion, the HR team collects the application and supporting documents. The completed packet is sent to Revenue management department for processing.

Revenue Management is currently use excel spreadsheets received from HR, to inform what tracking needs to be completed. We load a portion of the data into Anasazi and other pieces in a homegrown web page. (this is to allow for reporting to the various payers) which is a manual and outdated process.

The software will make the process for efficient and reduce errors. Symplr will digitally gather and store credentialing data and documents using people-friendly technology that automates all aspects of the complex provider data management lifecycle.

Contract Owner*

Mustafa Cochinwala

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 (?)

Harris Quote for Cactus 500 Providers 2022-11-03.pdf

113.43KB

Vendor/Contractor Contact Person



Name*

Scott Trap

Address *

Street Address

893 North Interstate Highway 35

Address Line 2

Suite 130

City

Round Rock

State / Province / Region

TX

Postal / Zip Code

78664-4310

Country

US

Phone Number *

512.279.9371

Email *

scott.trapp@tejashma.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1147	\$ 44,460.00	900060
Budget Manager	Secondary Budget Manager	
Brown, Erica	Campbell, Ricardo	

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1147	\$ 61,440.00	900020
Budget Manager	Secondary Budget Manager	
Brown, Erica	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

\$195.00 Per hour x 228 = \$44,460.00

Software, Licenses and Hosting = \$61,440.00

Project WBS (Work Breakdown Structure)* (?)

IT23.1147.03 Credentialing Software Cactus

Requester Name

Jones, Anthony

Submission Date

11/7/2022

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

11/8/2022

Procurement Approval

File Upload (?)

Approved by

Approval Date

Sign

Contract Owner Approval



Approved by

Approval Date

11/8/2022

Contracts Approval

Approve*

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

Approved by*

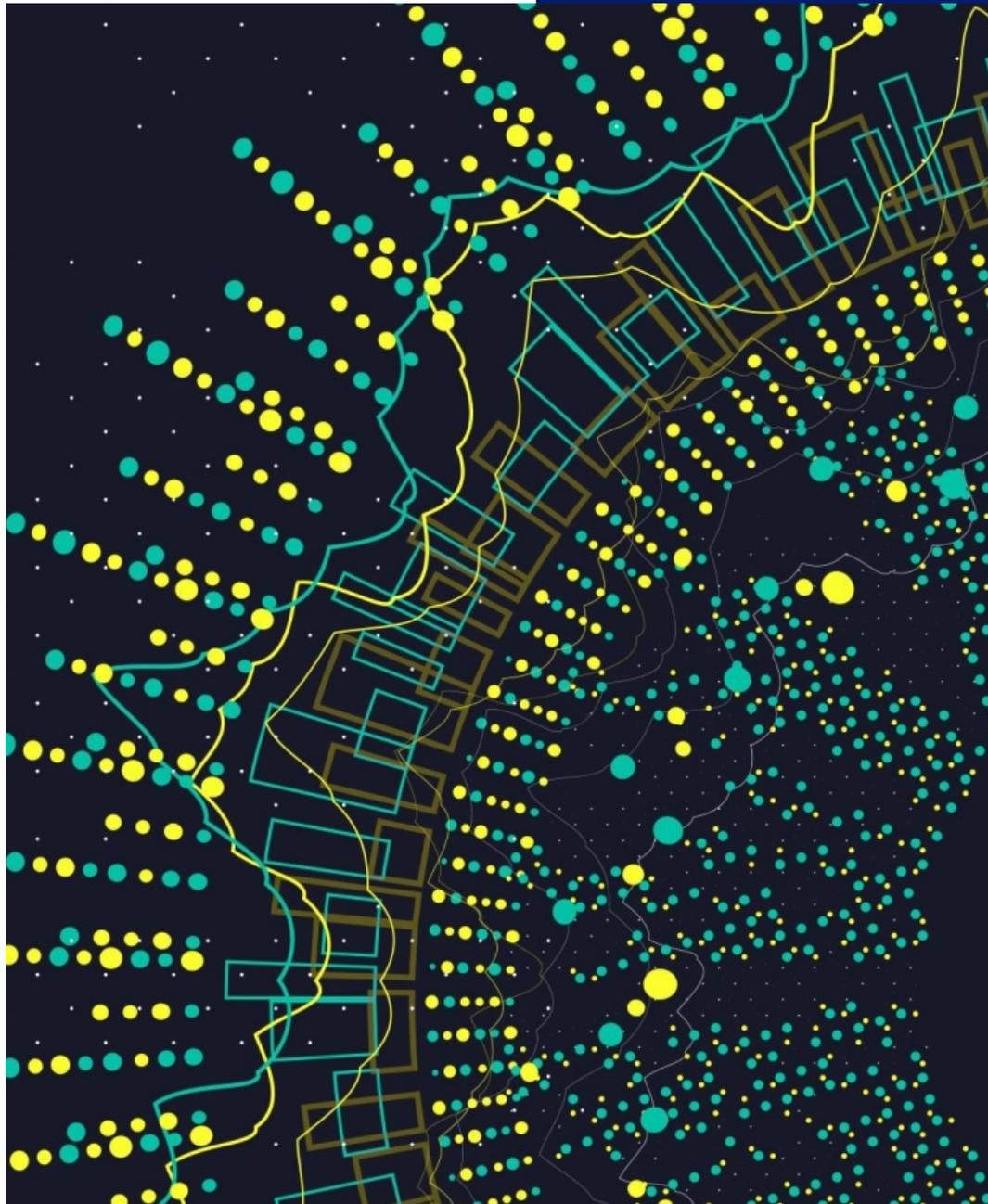
Approval Date*

11/8/2022

EXHIBIT F-34

Information Technology Update

Presented by: Mustafa Cochinwala, Chief Information Officer



Technology Areas

1. EHR - Epic
2. Infrastructure
3. Applications
4. Security
5. Telehealth
6. Data Services
7. Support Services

Epic – Accomplishments and Milestones

Statistics for period 1/1/2022 to 8/31/2022:

- Number of visits/encounters completed in Epic: 498,704
- Total prescriptions filled in the pharmacy: 112,161
- Total charges dropped: \$113,767,698
- Barcode medication administration 95.9%
- MyChart Active Patients: 7,005
- Outpatient lab results released in MyChart within 1 day: 99%
- Epic Welcome Kiosk implementation April/May 2022-10 kiosks across 5 sites
 - Patient Check-in
 - Verification of Insurance
 - MyChart sign up
- Epic Video Client Service (Telehealth)-pilot started 8/31
- 71 optimization requests were either complete or removed- includes flowsheet, assessment and progress note updates.
- Sharing of information with UT-HCPC through Care Everywhere



Epic – Staff Feedback

- Epic is user friendly and easily accessible. – MD
- Epic's interface with pharmacy has helped reduced medication errors and improve patient safety. –APRN
- Epic has streamlined the documentation process to enhance the quality of care being delivered. – MD
- Excellent tool in auditing the quality of care provided, with the help of different reports available in Epic – Nurse Supervisor
- Epic can be informative if you can find the information you need on a patient
- Epic is able to quickly provide us with a lot of detailed information about our patients. The check in/appointment process is also easy to follow.
- I love being able to access outside medical records. This is really important for continuity of care and often saves significant time and duplication of labs.
- Epic has been good change overall in my opinion, It's definitely a big change from Anasazi. The side checklist is very helpful when updating and/or adding clients information. Also, being able to change the settings to your own liking is a plus. – Business Office Staff
- Epic is easier to use and maneuver through. The reports are also helpful. – Clinical Team Leader
- In the beginning Epic was a bit much to understand and learn. The more I have worked in Epic it has become easier. There are a lot more steps when completing wrap plans, referrals, & consents, which can be tedious. – Direct Care Staff

Epic – Looking Ahead

OPTIMIZATION

- 60 active requests: Includes Medical Device Integration, Real Time Eligibility, and build of remaining paper forms in Epic
- Compass Rose for Primary Care Services-project kicked off 8/25/22
- MIPS reporting and dashboards-currently building and
- Expansion of Haiku (Epic mobile app) to non-physician staff
- Canto (epic on an iPad)
- On-Demand Video Visits-patients join a virtual queue for access
- Create and use Express Lanes to speed up documentation
- Cosmos-combines billions of clinical data points in a way that forms a high quality, representative, and integrated data set

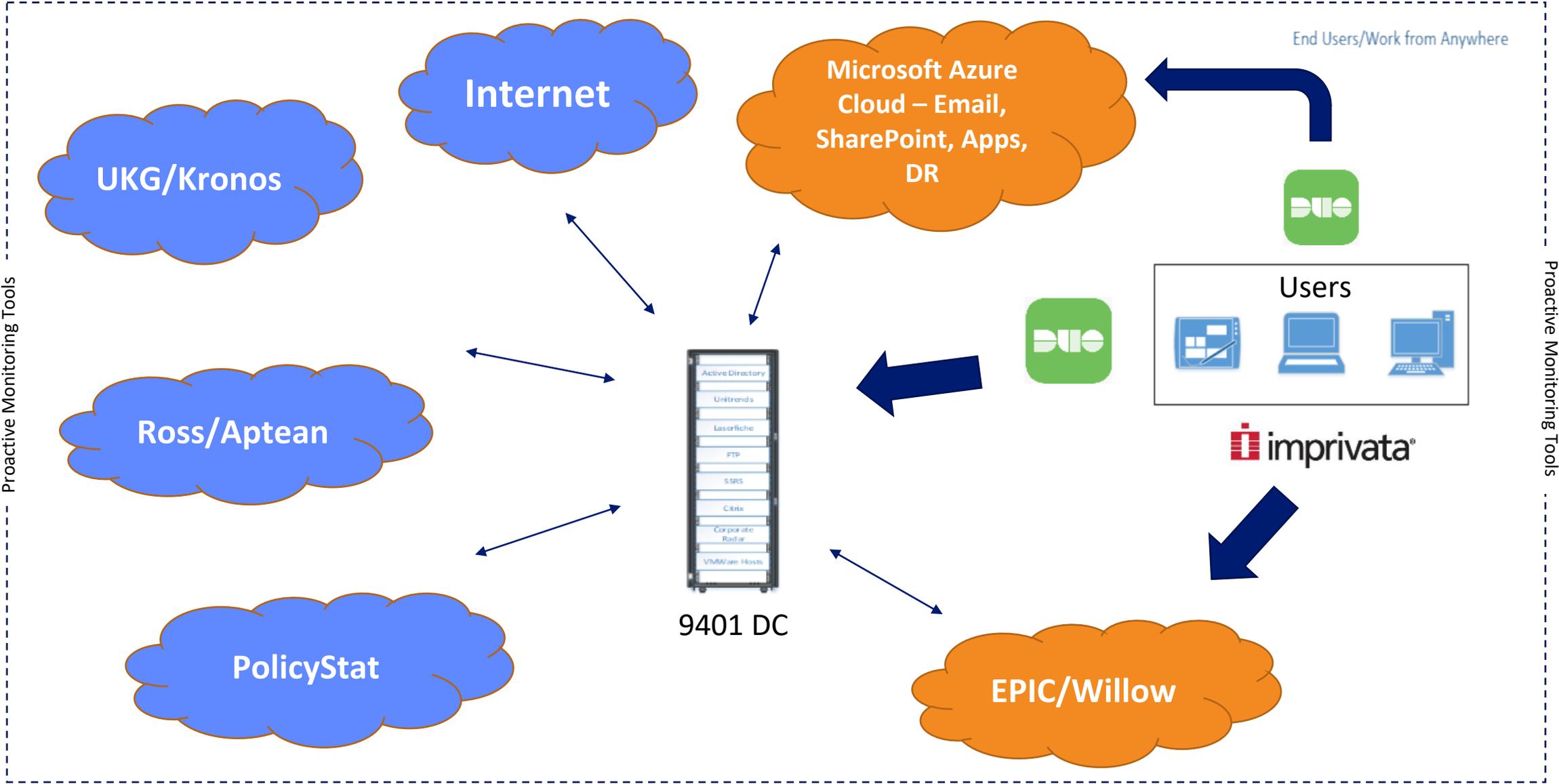
EPIC ROADMAP-*Epic application enhancements that optimize behavioral health care delivery*

- Behavioral Health Registries
- Treatment Plans in MyChart
- Interactive Safety Plans in MyChart
- Enhance Group Scheduling

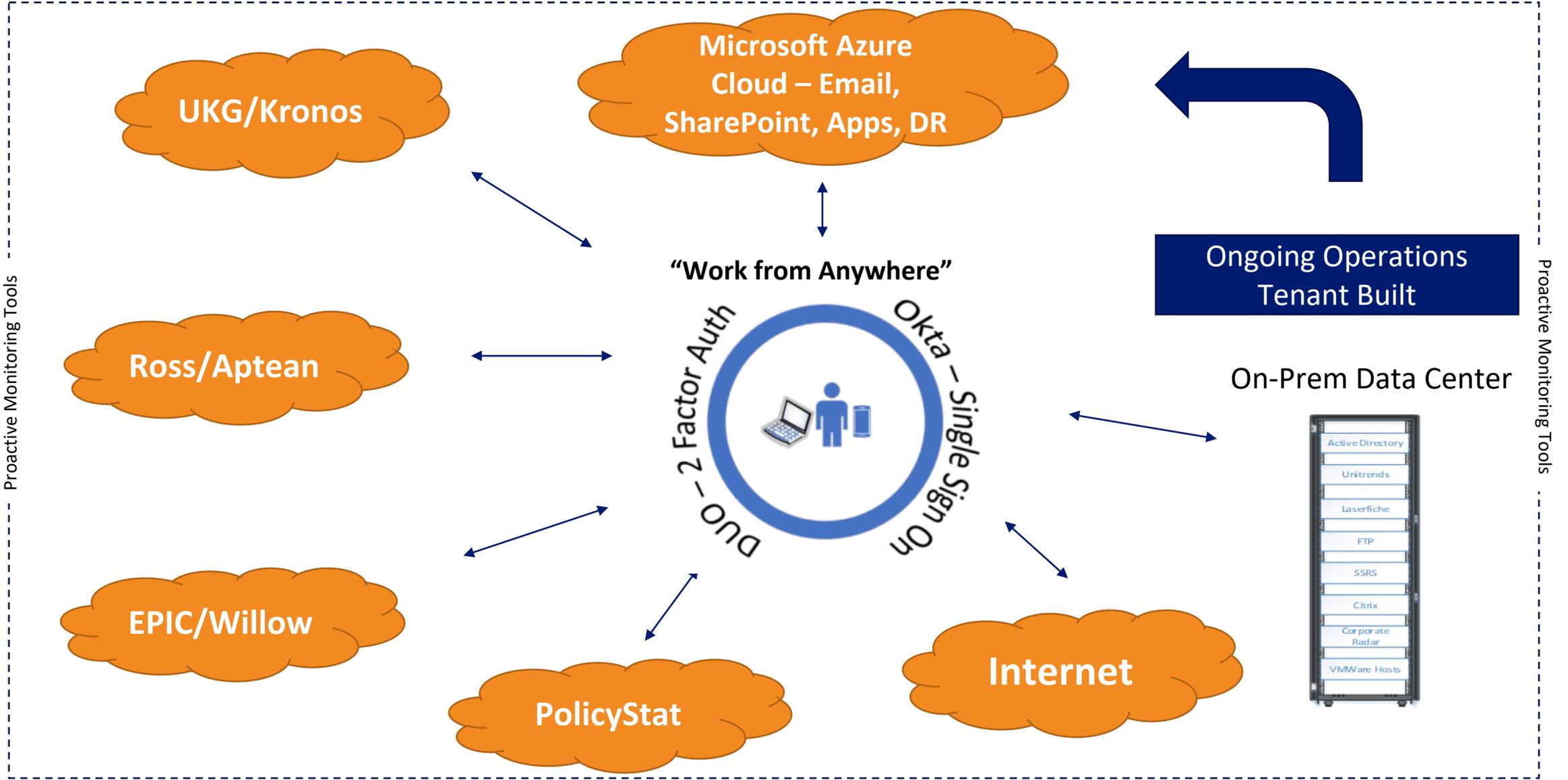
IT Infrastructure Accomplishments and Benefits

- Upgraded all Site/Core/Edge Hardware to improve security and reliability
- Email and SharePoint Anywhere – Work, Home, Mobile
- Multiple internet/network connections to each location
 - No LAN/WAN single point of failure for any location
 - 3 Internet connections (2 – 9401, 1 – NPC)
 - Multiple private circuits to Harris Health (EPIC) Houston/Bryan locations
- Implemented cloud base security camera system – Verkada – Employee and Client Safety
- Moving servers and applications to Harris Center Azure Cloud Tenant – High availability/resiliency

Enterprise Cloud Strategy – Previous - *limited access from anywhere and added MFA (DUO) – users working anywhere had to connect to 9401 DC then internet-based Apps*

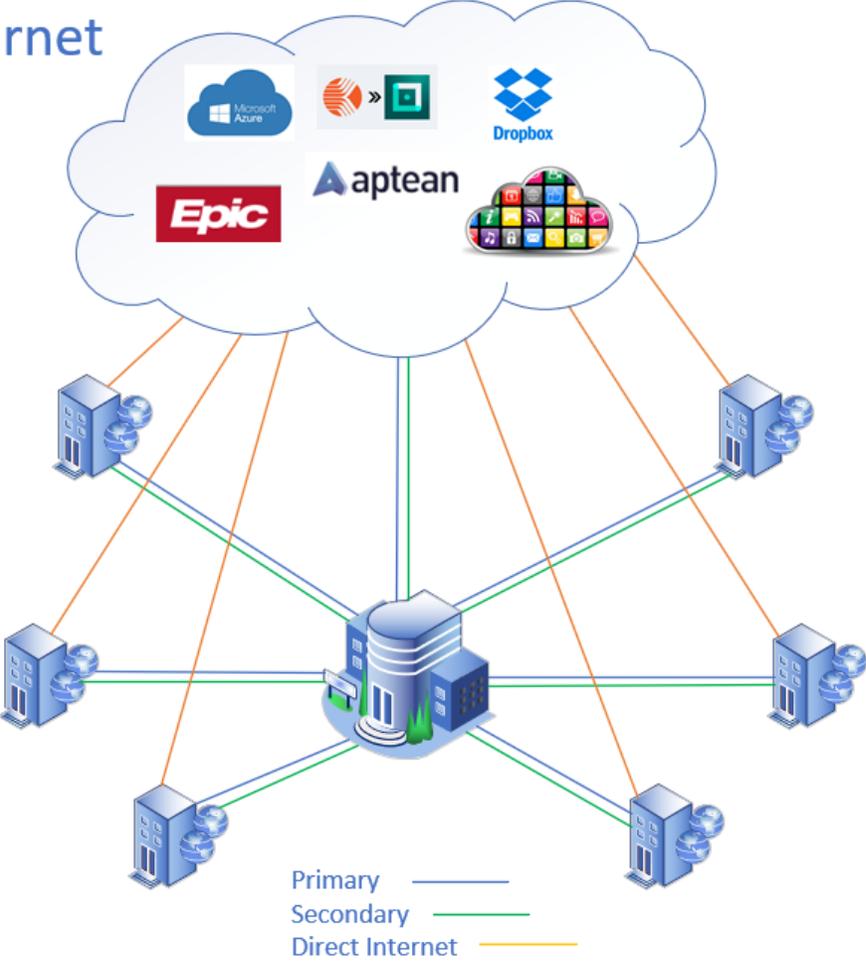


Enterprise Cloud Strategy – Current – Single Sign On and 2 Factor Authentication “Work From Anywhere”

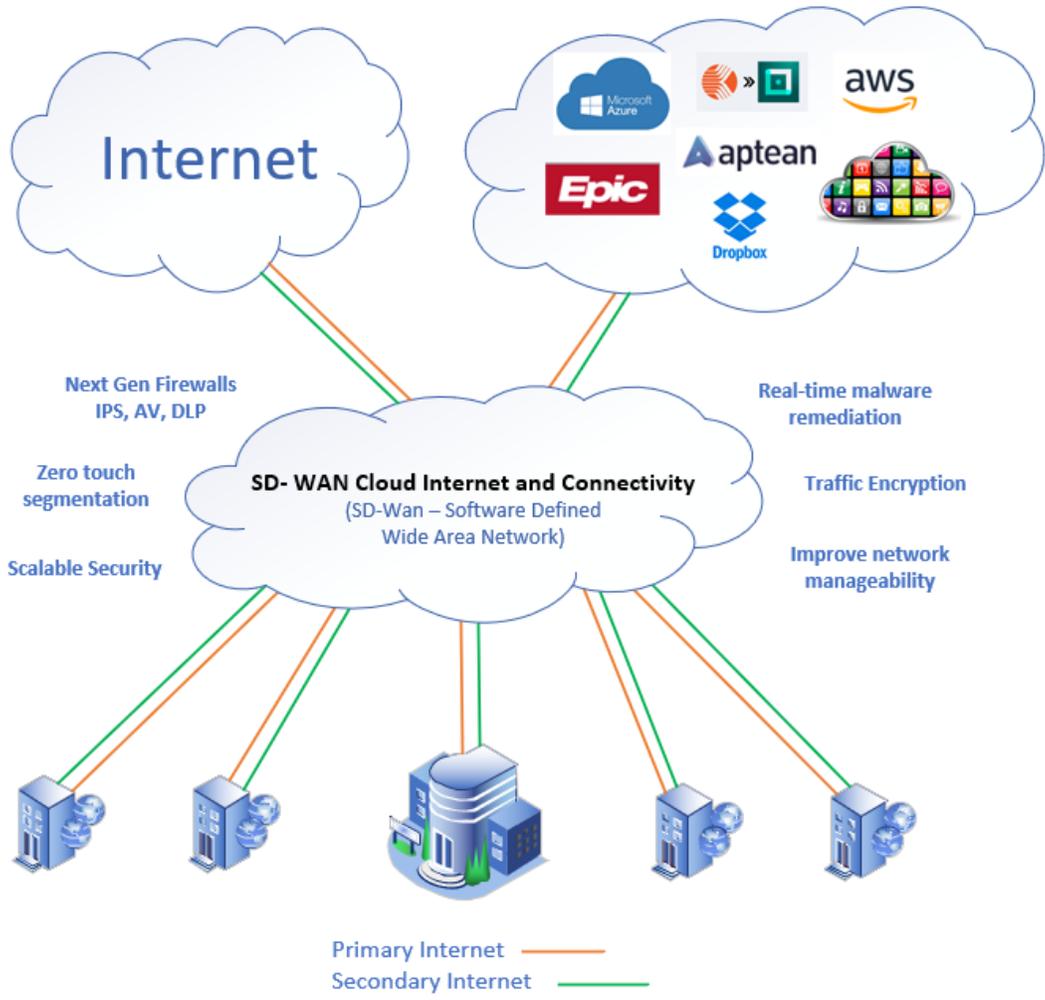


Enterprise Cloud Strategy – Future

Internet



Phase I



Phase II

Applications- Innovation

Ross upgrade to SaaS

Automate processes, improve visibility and remove departmental silos to drive efficiency and productivity with the ERP solutions.

Kronos upgrade to WFD

Provide employees and managers with leadership tools that see the whole employee — at any stage in their lifecycle — to deliver personalized support, foster belonging, and enable high performance.

PolicyStat (Cloud)

A policy management software that gets your staff the information they need when they need it, making policies easy to update, manage and access.

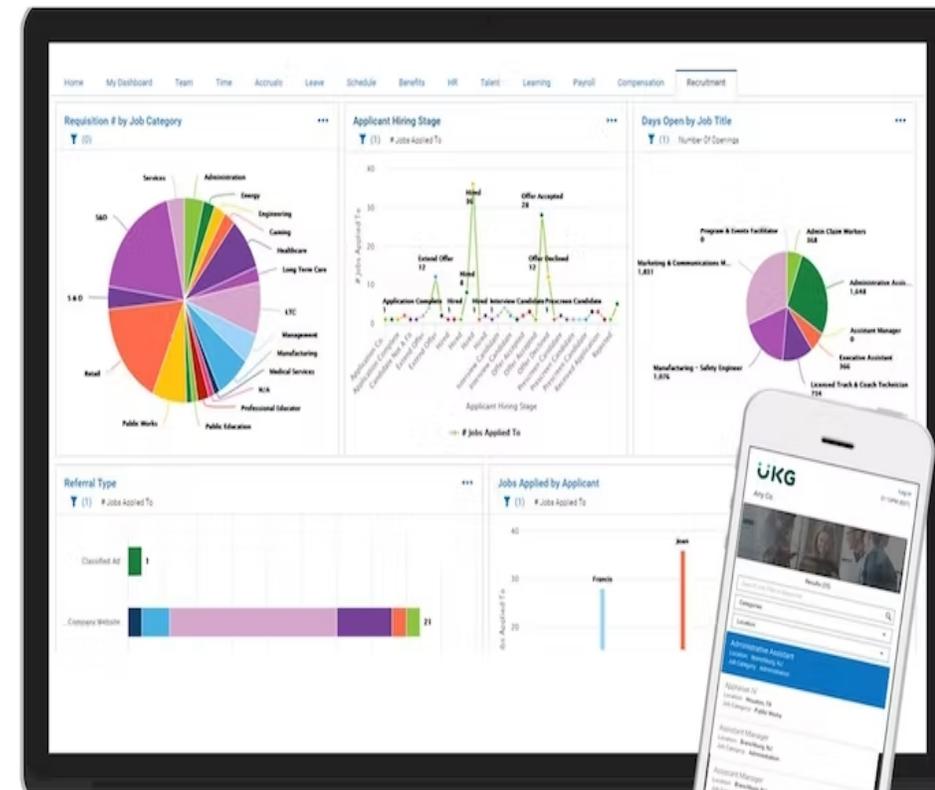
RL Safe System (Incident Management)

Provide timely access to consistent and reliable data with our built-in reports and dashboards so the management teams can monitor and assess critical issues.

Employees can view reports in real time and drill down for details to better understand the underlying issues.

Laserfiche Forms

68 of Forms created to replace manual processes and streamlining processes. Laserfiche is an enterprise content management (ECM) or digital content management software that takes all your manual processes and streamlines them into an elegant digital workflow. Replacing manual processes by using the electronic forms.

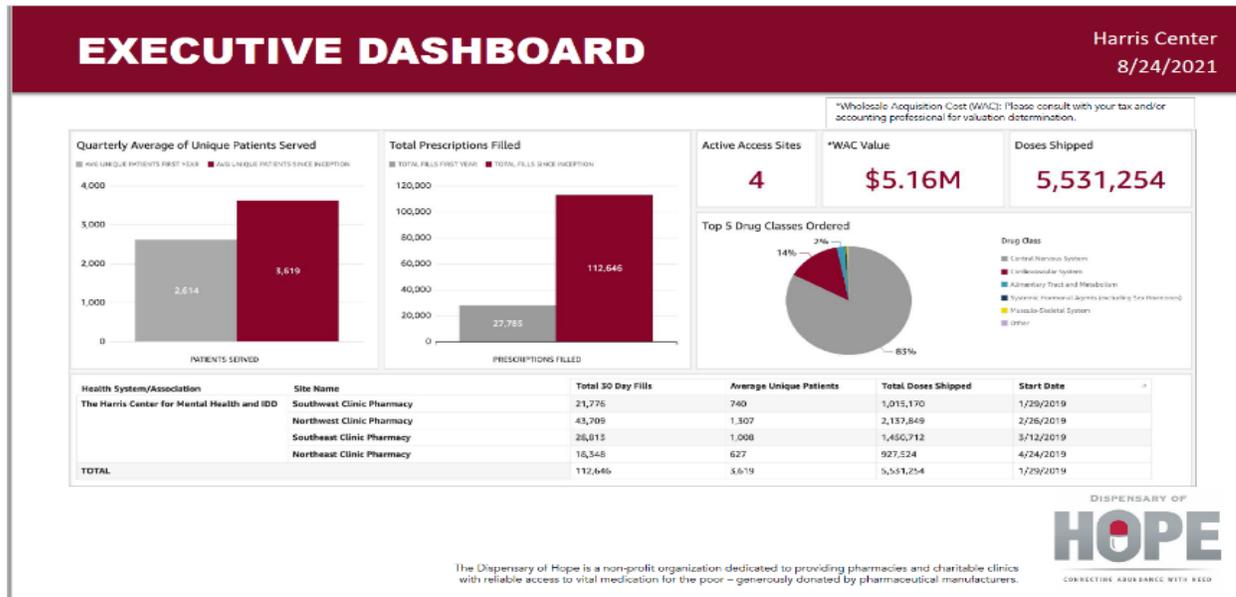


Applications- Innovation

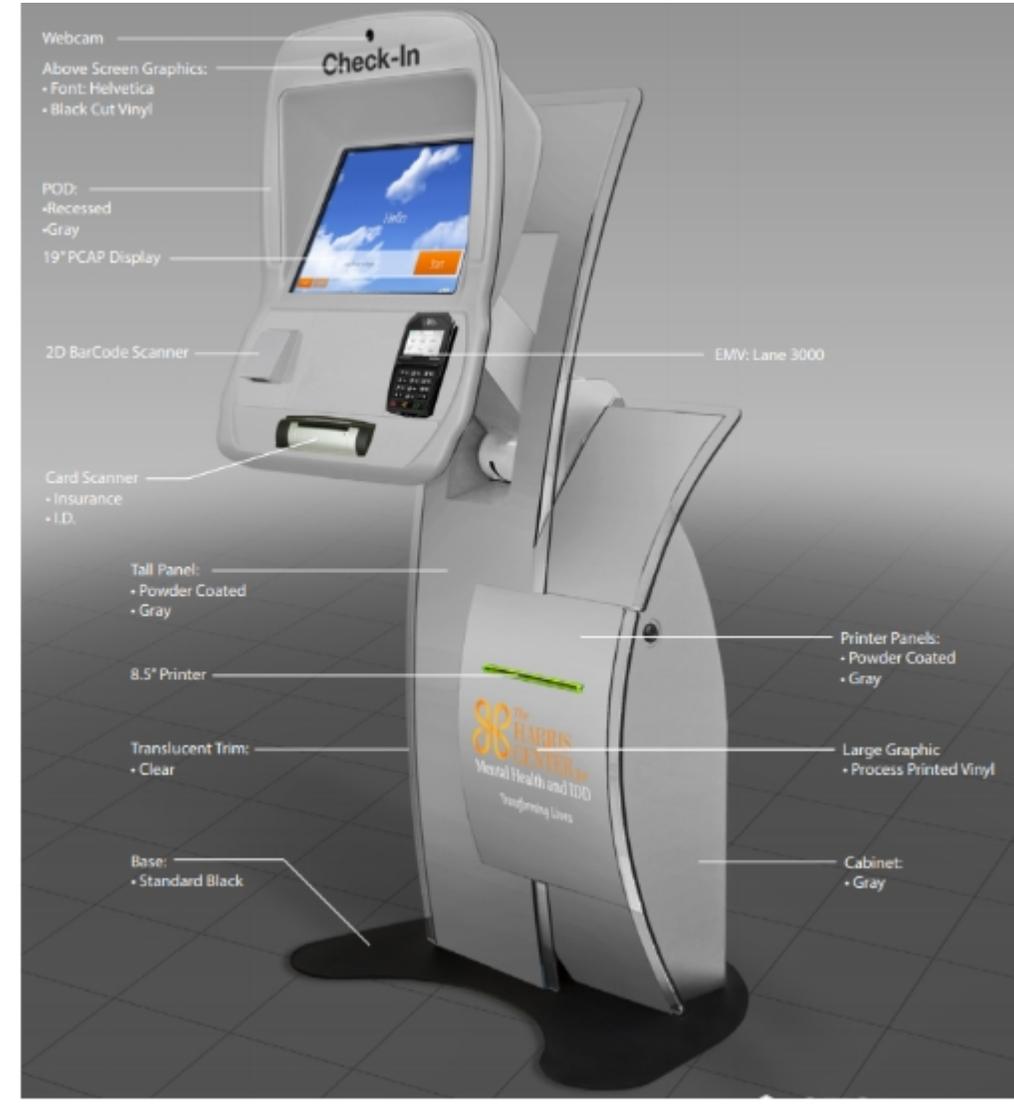
Kiosk

Individuals can easily check-in and out, confirm insurance information, electronically sign documents and get help with wayfinding through medical facilities.

Pharmacy 3rd Party Billing Dashboard



The Dispensary of Hope is a non-profit organization dedicated to providing pharmacies and charitable clinics with reliable access to vital medication for the poor – generously donated by pharmaceutical manufacturers.



Applications - Innovation

Upcoming Projects

Credentialing system

The replacement of the current antiquated manual process. One system that everyone (HR, IT, and Revenue Mgmt) can initiate, review, and track status of credentialing, license, sanctions, applications for enrollment into various payers network. Notifications to providers of missing data elements required to complete credentialing. Providers can log in to Cactus and complete the required data elements, the system send reminders if not completed.

Mobile App

The Harris Center is in the process of upgrading its public-facing website from Dot NET Nuke to Drupal and wants to present the web content and other information directly to users via a mobile application. Mobile development services requested are for Windows phone, iOS and Android. The Harris Center will work with LAB USA to design and develop the mobile application in a way that provides a similar theme yet device-specific experience for users depending on what type of device they are on. The two types supported shall be smartphones and tablets.



Strategic Plan - Innovation

Upcoming Projects

New External Website

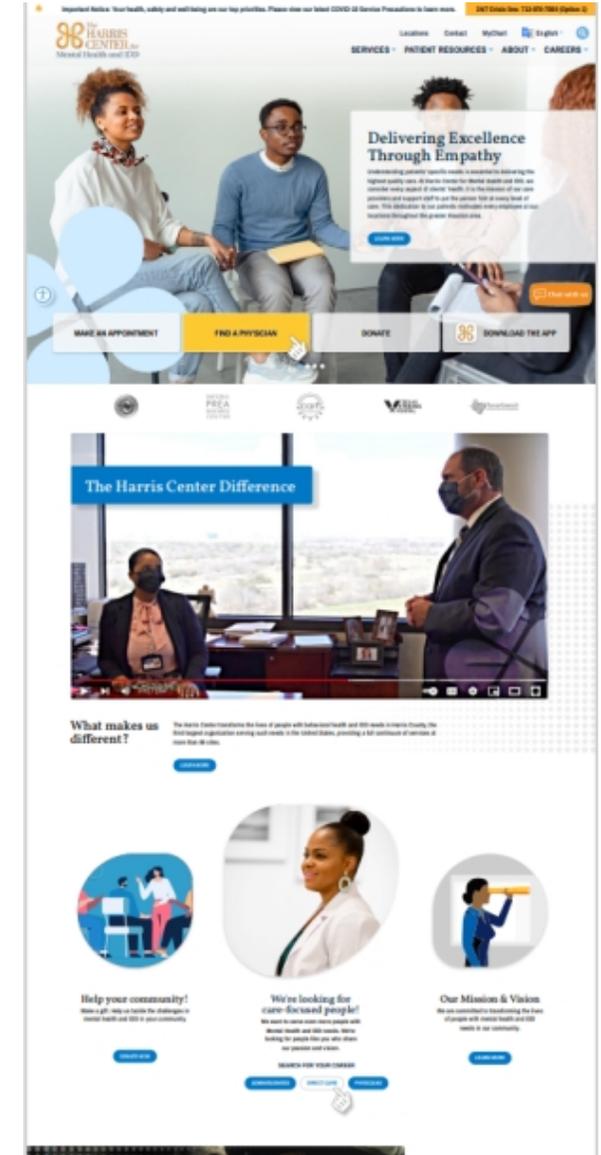
The current Harris Center's current public-facing website lacks the necessary capabilities needed in order to expand the site to thoroughly showcase all the services, programming, and health information our organization has to offer.

Website needs to be state-of-the art representation of our brand and values with Ingle Sign-On, Hosted Branding, User Friendliness, Language options (i.e. English, Spanish, Vietnamese, Chinese, Arabic, French, etc.)

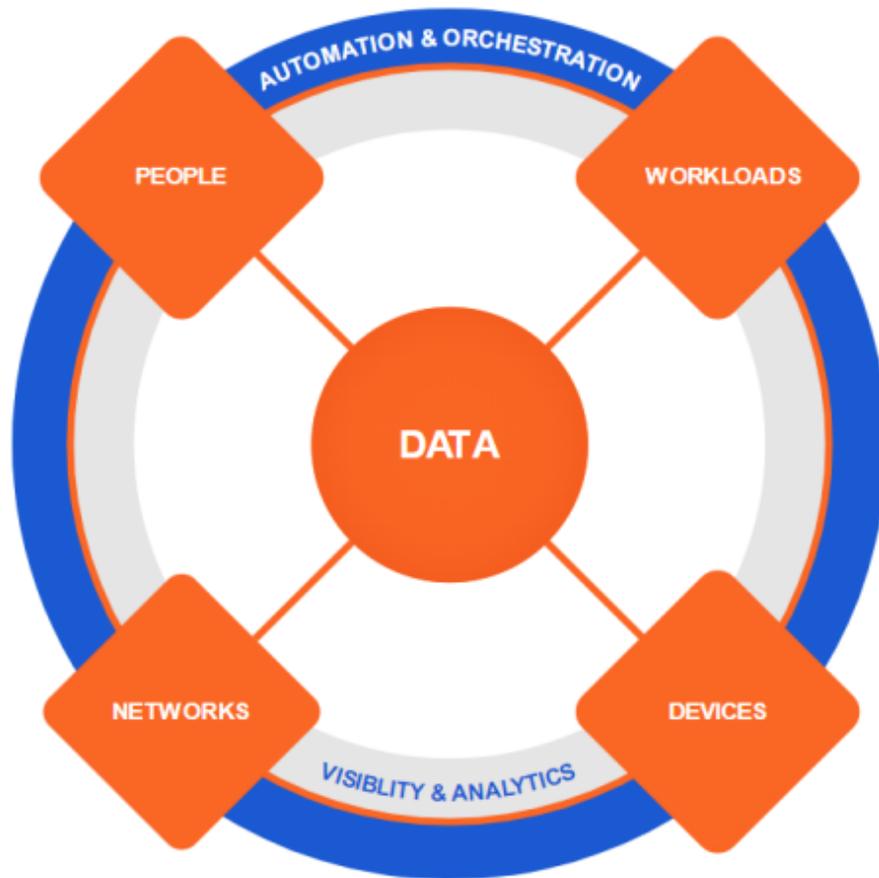
Search engine optimization, Able to use API to integrate with Olark, Physician profiles

MCOT Dispatching system

Community-based crisis response alleviates the Houston Police Department, Houston Fire Department, and Emergency Medical Services from responding to calls that have been screened and determined to be mental health related freeing them to provide emergency medical, fire and police response to Houston area residents.



Information Security Strategic Plan – Zero Trust



Shifting from Trust, then Verify to Never Trust - Always Verify.



Empowering Workforce Members Securely. Easier Access More Security

The Zero Trust security framework secures all workforce members, whether in or outside the organization's network, by authenticating, authorizing, and continuously validating security postures before and while accessing applications and data. Zero Trust protects local, cloud, and hybrid networks and data resources. The Zero Trust framework increases workforce efficiency by allowing secure work-from-anywhere processes and workflows

FY 2022 Information Security Projects

People

- Identity and Access Management (OKTA) – Phase 2
- Privileged Access Management

Visibility & Analytics, Automation & Orchestration

- Cyber Security Services (Deepwatch)

Data, Workloads, Networks

- Microsoft Azure Security
- Microsegmentation

FY 2023 Information Security Projects

People

- Identity and Access Management – Phase 3
- Privileged Access Management – Phase 2

Devices

- Remote Access and Endpoint Security

Data, Workloads, & Networks

- Microsegmentation – Phase 2

Telehealth Hub Accomplishments

Completed design and build of 4 out of five Telehealth Hub modalities in Epic.

- **E-visits**

- Patient communicates with providers using questionnaires and secure messages via MyChart without an office visit and providers review responses from In Basket

- **MyChart Video Visits (patient at home, provider in clinic or home)**

- Patient connects through MyChart website/mobile app and provider connects through Hyperspace/Haiku/Canto

- **Clinic-to-Clinic Video Visits (patient in clinic, provider in another clinic or home)**

- Patient connects in a clinic through Hyperspace and provider connects through Hyperspace/Haiku/Canto from a different clinic or home

Telehealth Hub Current Activities

Completed design and build of 4 out of five telehub modalities in Epic.

- **Therapist Pilot Project**

- Test Business Office and Therapist pilot processes with MyChart enrolled clients

- **Concurrent Business Office Pilot Project**

- Develop and test process needed for different modalities of tele-hub for Therapists and Physicians

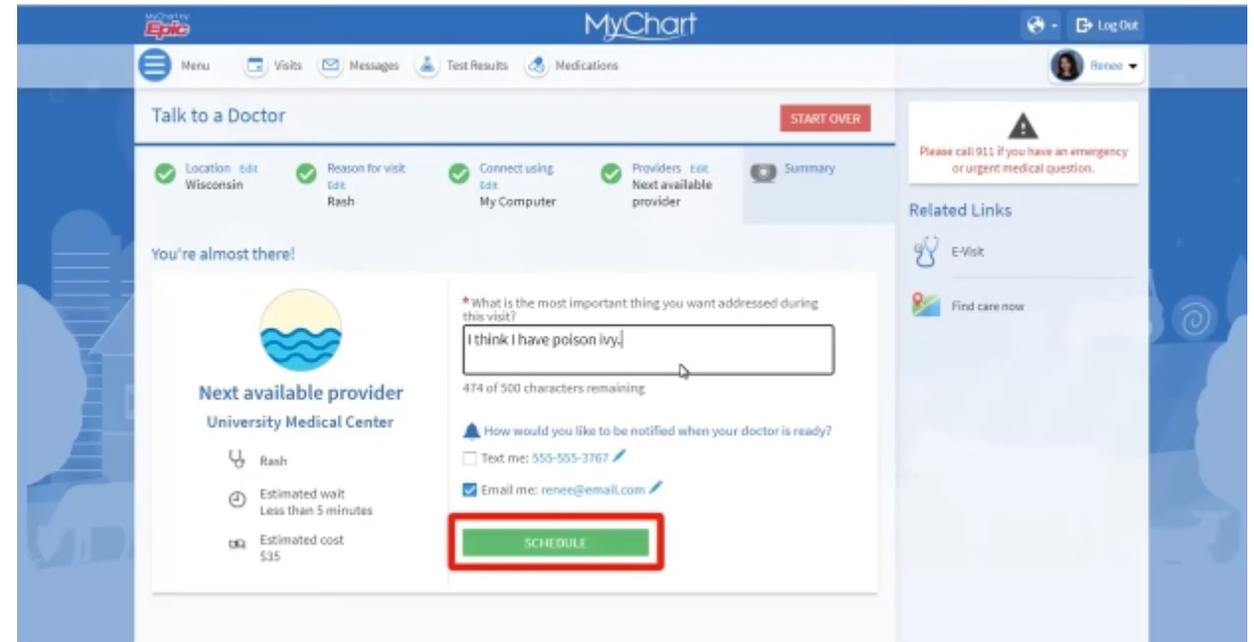
- **Continued enrollment in MyChart for full implementation**

- To see the full benefits of telehealth and tele-hub, operating the tele-service within Epic is recommended.

Telehealth Hub Future Activities

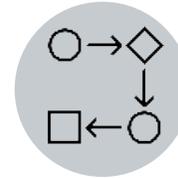
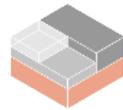
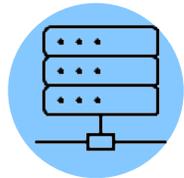
Complete design and build of last telehub modality in Epic.

- Conduct Physician Pilot Project on initial modalities
- Fully implement On-Demand Video Visits
- Conduct Pilot Project with MyChart enrolled clients
- Define staffing needs and structure
- Implement large scale educational campaign to improve MyChart enrollment



Data & Business Intelligence Services

GOALS & ACCOMPLISHMENTS



• FY 21'

Implement efficient architecture layer for agile data workflows and transparent development.

• FY 22'

Optimize development-to-production timelines. Use new architecture to support complex agency reporting needs. Increase collaboration between IT data staff and analysts across the agency.

• FY 23'

Implement reporting environments in Power BI Cloud to optimize delivery of data-related solutions across the organization. Reduce number of siloed data extractions.

• FY 24'

- Refine data models for division-specific reporting needs. Introduce governed access to data for self-service-reporting.

Data On-Demand

DEMOCRATIZATION AND
AVAILABILITY

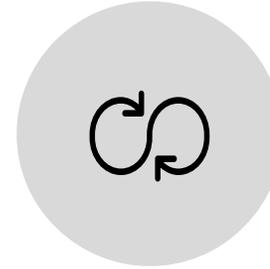
Data Governance:

*Standardize
extracted data
from complex
sources*



Agile Development:

*Streamline
development of
datasets for more
scenarios*

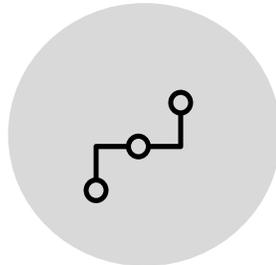


DATA & BUSINESS INTELLIGENCE

LONG-TERM OBJECTIVES

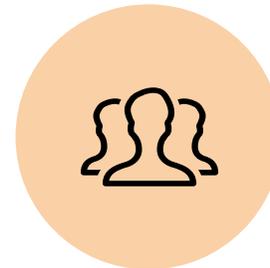
Data Lineage:

*Transparency of
data-to-delivery
processes*



Data Advocacy:

*Reduce technical
barriers of data
consumption*



Help Desk and Desktop Support Team Productivity FY2022

HELP DESK

- **24,611** Calls Handled.
- **3,405** Hours Total Call Time
- **73.80%** First Call Resolution Rate.
- **12** Minutes Average Call Time.
- **5,001** Tickets Completed.

DESKTOP SUPPORT

- **3,226** Tickets Completed.
- **400** Desktops/Laptops Combined Deployed.
- **60** Hardware Peripherals Deployed.

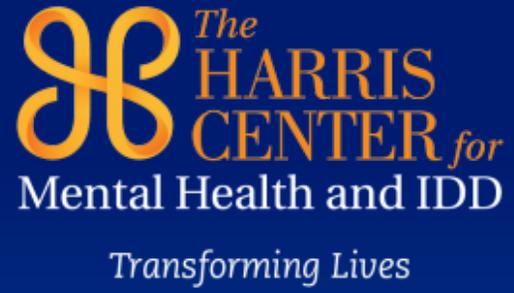
Intune

Impact on Desktop Support operations:

- IT Techs can now enroll devices in Intune and deploy them in a completely automated way.
- With our previous solution, SmartDeploy, multiple images had to be created. Now, no one needs to create images.
- Enrolling a computer to Intune and preparing for deployment can be as fast as 45 minutes and requires no intervention by the IT Tech.*
- Certain special use machines no longer require manual setup by a in IT Tech
- We're now able to provide support for end users without needing to exchange codes or asking for an IP Address.

Up next...

- **PrinterLogic: A more efficient way to manage printers without a print server**
 - We're looking to provide a better end-user experience around printers and printing.
- **Windows 11: Microsoft's newest Operating System**
 - We are currently in the early stages of testing.



Thank You

EXHIBIT F-35

November 2022

NEW CONTRACTS UNDER 100k

	CONTRACTORS	PRODUCT/SERVICE DESCRIPTION	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
FY23 NEW CONTRACTS							
ADMINISTRATION							
1	Karen Itzel Black	Translation and Localization Services	\$10,000.00	10/03/22- 11/30/24	Federal Grant	HMHC External Evaluation Team Recommendation	This new agreement is to provide translation and localization services for the External Evaluation Team. The documents will be given to the public in the form of surveys, flyers, instructions among other forms.
2	Texas RxSolutions & Compounding Pharmacy	Immunization Clinics	\$0.00	10/10/22- 10/10/23	Private Pay Source	N/A	This new agreement does not require any funding, to provide immunization clinics for Agency employees.
3	Blue Cross Blue Shield	Healthy Worksite Consultation Services	\$0.00	01/01/23- 12/31/25	Private Pay Source	N/A	This new three year contract for wellness consultation services, assisting in improving health outcomes and increasing engagement across a continuum of health. The three year costs will be paid in full in year 1 from the Wellness credit provided by Blue Cross Blue Shield to The Harris Center, net \$0.00.
CPEP/CRISIS SERVICES							
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES							
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI							
LEASES							
4	Down Syndrome Association of Houston	Office Space	\$0.00	09/01/22- 08/31/23	Private Pay Source	Lease	This new Agreement is to provide office space to Down Syndrome Association of Houston in exchange for Special Education, Advocacy, Support Services for individuals, families and professionals in the community.
5	United Way of Greater Houston	Leasing of Space	\$800.00	11/14/22- 08/31/23	State Grant	Lease	This new Agreement allows The Harris Center for Mental Health and IDD - ECI Services to utilize United Way of Greater Houston facilities for meetings and events.
MENTAL HEALTH SERVICES							



Executive Contract Summary

Contract Section



Contractor*

Karen Itzel Black

Contract ID #*

2022-0560

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

The Harris Center for Mental Health and IDD & Karen Itzel Black

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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 HMHC External Evaluation Team Recommendation |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

10/3/2022

Contract Term End Date* (?)

11/30/2024

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

Contract term is based on grant cycle of Dec. 1 - Nov. 30, grant ends Nov. 30, 2024

Fiscal Year* (?)

2023

Amount* (?)

\$ 10,000.00

Fiscal Year* (?)

2024

Amount* (?)

\$ 10,000.00

Fiscal Year* (?)	Amount* (?)
2025	\$ 10,000.00

Funding Source*

Federal Grant

Contract Description / Type* (?)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input checked="" type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other |

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

Vendor will provide translation and localization services for the external evaluation team documents that will be given to the public in the form of surveys, flyers, instructions, etc.

Translation is the process of changing text from one language to another in order to achieve an equivalent meaning; not a word-for-word conversion, but with a goal to maintain the original meaning through both vocabulary choices and idiomatic choices. For translating services, vendor will convert content into the target language while respecting syntax and grammar rules.

This type of service would be turned in via a Word document with two side by side columns (source text/target text) of each source paragraph with description brackets if necessary (i.e. [seal on top left of page]). It would be up to a media team to take the translated text column and input into original source.

Localization, on the other hand, blends linguistic equivalence with cultural accommodations. The process of localization acknowledges that translation is not enough to connect with a specific target audience. Vendor would take the translation a step further by accounting for cultural differences, expressions, idioms, vocabulary, measuring formats, currency units, image editing, and date formats to help meet cultural expectations.

This type of service would be turned in via Word or PDF document (depending on the source) without description brackets. The target document will look exactly as the source document, but in the target language.

Contract Owner*

Jennifer Battle

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 (?)

KBlack- Service Quote.pdf	55.83KB
KBlack w9.pdf	181.09KB

Vendor/Contractor Contact Person



Name*

Karen Itzel Black

Address*

Street Address

5022 Willowhaven Circle

Address Line 2

City

Garland

Postal / Zip Code

75043-3112

State / Province / Region

TX

Country

US

Phone Number*

214-606-1433

Email*

kib4126@mavs.uta.edu

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
7008	\$ 10,000.00	542000
Budget Manager Ilejay, Kevin		Secondary Budget Manager Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

Rate information provided in quote

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name

Smith, Janai

Submission Date

9/27/2022

Budget Manager Approval(s)

Approved by

kevin ilejay

Approval Date

9/27/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Jennifer Battle

Approval Date

9/28/2022

Contracts Approval

Approve *

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

Approved by *

Shaskeyia Belu

Approval Date *

9/29/2022



Executive Contract Summary

Contract Section


Contractor*

Texas RxSolutions & Compounding Pharmacy

Contract ID #*

2022-0564

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

Texas RxSolutions & Compounding Pharmacy and The Harris Center

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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* (?)

10/10/2022

Contract Term End Date* (?)

10/10/2023

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

1 year

Fiscal Year* (?)

2023

Amount* (?)

\$ 0.00

Funding Source*

Private Pay Source

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 immunization clinics for Agency employees. No funding

Contract Owner*

Kia Walker

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*

Gabriel Balonwu

Address*

Street Address

Texas RxSolutions & Compounding Pharmacy

Address Line 2

7505 Fannin Street, Suite #120

City

Houston

Postal / Zip Code

77054

State / Province / Region

TX

Country

USA

Phone Number*

713-970-1222

Email*

txrxsolutions@gmail.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number* 1153	Amount Charged to Unit* \$ 0.00	Expense/GL Code No.* 547000
Budget Manager Brown, Erica	Secondary Budget Manager Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

\$0

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name Arceneaux, Linda	Submission Date 10/5/2022
---	-------------------------------------

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date
10/5/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Kia Walker

Approval Date
10/6/2022

Contracts Approval

Approve*

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

Approved by*

Shasteyia Behm

Approval Date*
10/6/2022



Executive Contract Summary

Contract Section



Contractor*

Blue Cross Blue Shield (Healthy Worksite Consultation Services)

Contract ID #*

2022-0577

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

The Harris Center and Blue Cross Blue Shield

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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 BCBS Zero Cost Offering

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

1/1/2023

Contract Term End Date* (?)

12/31/2025

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

Operating on the benefits standard CY basis

Fiscal Year* (?)

2023

Amount* (?)

\$ 0.00

Funding Source*

Private Pay Source

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* (?)

Three year contract for wellness consultation services, assisting in improving health outcomes and increasing engagement across a continuum of health. The three year costs will be fully paid in year 1 from the Wellness credit provide by BCBS to THC, net \$0 to THC.

Contract Owner*

Kip Baughman

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

BCBS has medical, dental, and vision plans

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

The Harris Center_Wellness Consulting_SOW_3yr_091922.pdf	114.91KB
2022 Healthy Worksite Consulation Proposal_Harris Center.pdf	248.74KB
The Harris Center_Wellness Consulting_Invoice_091922.pdf	79.94KB

Vendor/Contractor Contact Person

Name*

Raz Lavalais

Address*

Street Address

1800 W Loop South, Suite 600

Address Line 2

City

Houston

Postal / Zip Code

77027

State / Province / Region

TX

Country

US

Phone Number*

307.286.9302

Email*

raziel_lavalais@bcbstx.com

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	543039

Budget Manager	Secondary Budget Manager
Brown, Erica	Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

The three year costs will be fully paid in year 1 from the Wellness credit provide by BCBS to THC, net \$0 to THC.

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name	Submission Date
Baughman, Kip	10/20/2022

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

10/20/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Kip Baughman

Approval Date

10/20/2022

Contracts Approval

Approve*

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

Approved by*

Shasteyia Behn

Approval Date*

10/21/2022



Executive Contract Summary

Contract Section ^

Contractor*

Down Syndrome Association of Houston

Contract ID #*

2022-0555

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/15/2022

Parties* (?)

Down Syndrome Association of Houston & The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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* (?)

9/1/2022

Contract Term End Date* (?)

8/31/2023

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

Fiscal Year* (?)

2023

Amount* (?)

\$ 0.00

Funding Source*

Private Pay Source

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 agency will provide office space to the Tenant in exchange for Special Education, Advocacy, Support Services for individuals, families and professionals in the community.

The DSAH Resource Center is dedicated to providing needed information, resources, and referrals to family members, friends, caregivers, and the larger Greater Houston community. DSAH is the only organization in the area that provides this kind of invaluable resource specifically for the Down syndrome community.

Club 21 is a social group for individuals with Down syndrome, ages 13 and older. Held bi-monthly, DSAH sponsors social events, such as dances, movie nights, bowling, and more. Club 21 is a wonderful opportunity to meet new friends and reacquaint with old friends in an inclusive and understanding environment.

"Congratulations!" is a unique program for parents of newborns in which to "congratulate" the parents of a newborn baby with Down syndrome. The Congratulations program provides parents with much-needed diapers, wipes, baby shampoo, a book on how to help raise a child with Down syndrome, and area community resources, among other items.

Coffee & Conversations/PG-13-are programs that offer an opportunity for parents of Down syndrome children to get together, in-person or online, and connect with similar families, share information and resources, and listen to guest lecturers speak on a wide variety of topics related to Down syndrome. Coffee & Conversations are for parents with Down syndrome children, ages 0-5, while PG-13 is for parents of children ages 6-13.

Community Groups are DSAH's online and in-person community groups offering information, resources, guest speakers, support, and family activities to loved ones living with Down syndrome.

Empowerment through Education are workshops that provide individuals with Down syndrome, families, and the communities that serve them access to high-quality, relevant information in the form of in-person and online presentations. Topics vary widely and include education sessions focused on issues such as in-school education services and supports, toilet training, long-term estate planning, and technology resources.

Skill Builders & Socials are activities designed to empower individuals with Down syndrome by building self-confidence, socialization, and self-determination skills. DSAH offers Adapted Ballet classes in partnership with the Houston Ballet, collaborates with the Special Olympics, and teaches pantomime classes, to name a few of the activities. New activities are announced throughout the year. DSAH also sponsors monthly socials to bring children, adults, and families together in Down syndrome-friendly environments.

Contract Owner*

Dr. Evanthe Collins

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*

Down Syndrome Association of Houston

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Glenn D. Urbach

Address*

Street Address

7115 West Tidwell Road

Address Line 2

Building K, Suite 106

City

Houston

State / Province / Region

TX

Postal / Zip Code

77092

Country

US

Phone Number*

713-682-7237, ext. 0001

Email*

glenn.urbach@dsah.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3350	\$ 0.00	408000

Budget Manager

Adams-Austin, Mamie

Secondary Budget Manager

Kerlegon, Charles

Provide Rate and Rate Descriptions if applicable* (?)

Office 1231

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Collins, Evanthe

Submission Date

9/26/2022

Budget Manager Approval(s)

Approved by

Mamie Adams

Approval Date

9/26/2022

Procurement Approval



File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval



Approved by

Evanthe Collins

Approval Date

9/26/2022

Contracts Approval

Approve*

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

Approved by*

Shaskyia Behn

Approval Date*

9/26/2022



Executive Contract Summary

Contract Section

Contractor*

United Way of Greater Houston

Contract ID #*

2022-0569

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

United Way of Greater Houston and The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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 Lease - Event Booking |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

11/14/2022

Contract Term End Date* (?)

8/31/2023

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

N/A

Fiscal Year* (?)

2023

Amount* (?)

\$ 800.00

Funding Source*

State Grant

Contract Description / Type* (?)

- | | |
|---|--|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input checked="" type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input checked="" type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other <input type="text"/> |

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

For the purpose of The Harris Center for Mental Health and IDD - ECI Services to utilize the facilities of United Way of Greater Houston for meetings and/or events. See attachments for detailed service description.

Contract Owner*

Tiffanie Williams-Brooks

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

Lease/event booking - 09/01/21 - 08/31/22

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Specify Name*

United Way of Greater Houston

Supporting Documentation Upload (?)

United Way Lease Agreement ID#7299 (Conf.Rm for ECI Staff Meeting Training Session).pdf 2.48MB

Vendor/Contractor Contact Person**Name***

Antoinette Fernandez, Manager, CRC

Address*

Street Address

50 Waugh Drive

Address Line 2

City

Houston

Postal / Zip Code

77007-5813

State / Province / Region

TX

Country

US

Phone Number*

713-685-2316

Email*

afernandez@unitedwayhouston.org

Budget Section



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3360	\$ 800.00	555000
Budget Manager	Secondary Budget Manager	
Adams-Austin, Mamie	Kerlegon, Charles	

Provide Rate and Rate Descriptions if applicable* (?)

See attachment for rate and rate description.

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Childs, Margo

Submission Date

10/13/2022

Budget Manager Approval(s)



Approved by

Mamie Adams

Approval Date

10/13/2022

Procurement Approval



File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval



Approved by

Tiffanie Williams-Breeds

Approval Date

10/15/2022

Contracts Approval

Approve*

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

Approved by*

Shasteyia Behn

Approval Date*

10/17/2022



EXHIBIT F-36

November 2022

RENEWALS UNDER 100k

	CONTRACTORS	PRODUCT/SERVICE DESCRIPTION	FY2022 NTE AMOUNT	FY2023 NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	FY23 CONTRACT RENEWALS							
	ADMINISTRATION							
1	CTEK Security, Inc.	Security Management Services	\$14,500.00	\$14,500.00	03/01/20- 03/01/23	GR	RFP	Annual renewal and funding of vendor security management services Agreement to access and manages third-party privacy and security risk associated with Agency's Business Associates pursuant to HIPAA.
2	Articulate Global, Inc.	360 Training Services	\$2,598.00	\$2,598.00	12/12/22- 12/12/23	GR	Software Subscription License Agreement	Annual Renewal of the agreement providing 360 E-Learning Software online course creation and development applications.
	CPEP/CRISIS SERVICES							
3	Crothall Facilities Management, Inc.	Preventative Maintenance Services for Medical Equipment at NPC.	\$4,885.58	\$4,885.58	01/01/23- 12/31/23	GR	Service Agreement	Renewal of Preventative Maintenance Services for Medical Equipment at NPC.
	FORENSICS							
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES							
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI							
	LEASES							
	MENTAL HEALTH SERVICES							



Annual Renewal Evaluation

Current Fiscal Year Contract Information



Current Fiscal Year

2023

Contract ID#*

7671

Contractor Name*

CTEK Security, Inc.

Service Provided* (?)

Vendor Security Management Services. This program assess and manages third-party privacy and security risk of the Agency's Business Associates under HIPAA.

Renewal Term Start Date*

3/1/2020

Renewal Term End Date*

3/1/2023

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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

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

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

- Yes
- No
- Unknown

Contract NTE (Old Text Field For Reference) (?)

Contract NTE* (?)

\$ 14,500.00

Rate(s)/Rate(s) Description

\$3,625.00 quarterly for three (3) years

Unit(s) Served*

1130

G/L Code(s)*

553003

Current Fiscal Year Purchase Order Number*

FY22 PO CT141383

Contract Requestor*

Wes Farris

Contract Owner*

Mustafa Cochinwala

File Upload (?)

Evaluation of Current Fiscal Year Performance



Have there been any significant performance deficiencies within the current fiscal year? *

Yes No

Were Services delivered as specified in the contract? *

Yes No

Did Contractor perform duties in a manner consistent with standards of the profession? *

Yes No

Did Contractor adhere to the contracted schedule? * (?)

Yes No

Were reports, billing and/or invoices submitted in a timely manner? * (?)

Yes No

Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? * (?)

Yes No

Did Contractor render services consistent with Agency policy and procedures? * (?)

Yes No

Maintained legally required standards for certification, licensure, and/or training? * (?)

Yes No

Renewal Determination



Is the contract being renewed for next fiscal year with this Contractor? * (?)

Yes No

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 14,500.00	553003
Budget Manager*		Secondary Budget Manager*
Campbell, Ricardo		Brown, Erica

Fiscal Year* (?)	Amount* (?)
2023	\$ 14,500.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



Are there any required changes to the contract language?* (?)

 Yes No

Will the scope of the Services change?*

 Yes No

Is the payment deadline different than net (45)?*

 Yes No

Are there any changes in the Performance Targets?*

 Yes No

Are there any changes to the Submission deadlines for notes or supporting documentation?*

 Yes No

File Upload (?)

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Mustafa Cochinwala

Budget Manager Approval(s)



Approved by

Ricardo Campbell

Contract Owner Approval



Approved by

[Handwritten signature]

Contracts Approval

Approve *

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

Approved by *

Shasteyia Behu

Approval Date *

10/7/2022



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2023

Contract ID#*

7618

Contractor Name*

Articulate Global, Inc.

Service Provided* (?)

Articulate 360 E-Learning Software online course creation and development applications.

Renewal Term Start Date*

12/12/2022

Renewal Term End Date*

12/12/2023

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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 Software Subscription License Agreement/Contract |

Contract Description / Type

- | | |
|--|---|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input checked="" type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other |

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

- Yes
- No
- Unknown

Contract NTE (Old Text Field For Reference) (?)

Contract NTE* (?)

\$ 2,598.00

Rate(s)/Rate(s) Description

ARTICULATE 360 TEAM ONE-YEAR SUBSCRIPTION:
\$1,299.00, QUANTITY: 2, TOTAL: \$2,598.00

Unit(s) Served*

1975

G/L Code(s)*

551003

Current Fiscal Year Purchase Order Number*

CT141684

Contract Requestor*

Ninfa Escobar

Contract Owner*

Ninfa Escobar

File Upload (?)

Evaluation of Current Fiscal Year Performance



Have there been any significant performance deficiencies within the current fiscal year? *

Yes No

Were Services delivered as specified in the contract? *

Yes No

Did Contractor perform duties in a manner consistent with standards of the profession? *

Yes No

Did Contractor adhere to the contracted schedule? * (?)

Yes No

Were reports, billing and/or invoices submitted in a timely manner? * (?)

Yes No

Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? * (?)

Yes No

Did Contractor render services consistent with Agency policy and procedures? * (?)

Yes No

Maintained legally required standards for certification, licensure, and/or training? * (?)

Yes No

Renewal Determination



Is the contract being renewed for next fiscal year with this Contractor?* (?)

Yes No

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1975	\$ 2,598.00	551003
Budget Manager*	Secondary Budget Manager*	
Campbell, Ricardo	Brown, Erica	

Fiscal Year* (?)	Amount* (?)
2023	\$ 2,598.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes

Are there any required changes to the contract language?* (?)

Yes No

Will the scope of the Services change?*

Yes No

Is the payment deadline different than net (45)?*

Yes No

Are there any changes in the Performance Targets?*

Yes No

Are there any changes to the Submission deadlines for notes or supporting documentation?*

Yes No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Ninfa Escobar

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Contract Owner Approval



Approved by

Ninfa Escobar

Contracts Approval

Approve*

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

Approved by*

Shaskyia Belu

Approval Date*

10/14/2022



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2023

Contract ID#*

6678

Contractor Name*

Crothall Facilities Management, Inc.

Service Provided* (?)

medical equipment maintenance and support services for NPC.

Renewal Term Start Date*

1/1/2023

Renewal Term End Date*

12/31/2023

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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 Service Agreement |

Contract Description / Type

- | | |
|--|---|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input checked="" type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input checked="" type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other |

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

- Yes
- No
- Unknown

Contract NTE (Old Text Field For Reference) (?)

Contract NTE* (?)

\$ 4,885.58

Rate(s)/Rate(s) Description

\$4,885.58 Annual contract fee(s)

Unit(s) Served*

9206,9209

G/L Code(s)*

553000

Current Fiscal Year Purchase Order Number*

CT142476

Contract Requestor*

Patricia Singh

Contract Owner*

Kim Kornmayer

File Upload (?)

Evaluation of Current Fiscal Year Performance

Have there been any significant performance deficiencies within the current fiscal year?*

Yes No

Were Services delivered as specified in the contract?*

Yes No

Did Contractor perform duties in a manner consistent with standards of the profession?*

Yes No

Did Contractor adhere to the contracted schedule?* (?)

Yes No

Were reports, billing and/or invoices submitted in a timely manner?* (?)

Yes No

Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)

Yes No

Did Contractor render services consistent with Agency policy and procedures?* (?)

Yes No

Maintained legally required standards for certification, licensure, and/or training?* (?)

Yes No

Renewal Determination

Is the contract being renewed for next fiscal year with this Contractor?* (?)

Yes No

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9206	\$ 2,442.78	553000

Budget Manager*	Secondary Budget Manager*
Oshman, Jodel	Kornmayer, Kimberly

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9209	\$ 2,442.80	553000

Budget Manager*	Secondary Budget Manager*
Oshman, Jodel	Kornmayer, Kimberly

Fiscal Year* (?)	Amount* (?)
2023	\$ 4,885.58

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



Are there any required changes to the contract language?* (?)

 Yes No

Will the scope of the Services change?*

 Yes No

Is the payment deadline different than net (45)?*

 Yes No

Are there any changes in the Performance Targets?*

 Yes No

Are there any changes to the Submission deadlines for notes or supporting documentation?*

 Yes No

File Upload (?)

Crothall Facilities Management, Inc. ATTACHMENT.xlsx

14.48KB

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Kim Kornmayer

Budget Manager Approval(s)



Approved by

Jodel Ostman

Contract Owner Approval



Approved by

KIM KORNWAYER

Contracts Approval

Approve*

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

Approved by*

Shaskeyia Behm

Approval Date*

10/18/2022

EXHIBIT F-37

November 2022

AMENDMENTS UNDER 100k

Contract Section **Contractor***

Citrix

Contract ID #*

6766

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

Citrix and Harris Center

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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* (?)

11/1/2022

Contract Term End Date* (?)

10/31/2023

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

Current Contract Amount*

\$ 84,000.00

Increase Not to Exceed*

\$ 392.70

Revised Total Not to Exceed (NTE)*

\$ 84,392.70

Fiscal Year* (?)

2023

Amount* (?)

\$ 84,392.70

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* (?)

Quote was higher than anticipated FY23 Renewal

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

FY18 - FY22

Software and Hardware Maintenance

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

Yes No Unknown

Please provide an explanation*

N/A

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Citrix_FY23.pdf

590.08KB

Vendor/Contractor Contact Person

Name*

Citrix

Address*

Street Address

851 W Cypress Creek Rd

Address Line 2

City

Fort Lauderdale

Postal / Zip Code

33309-2009

State / Province / Region

FL

Country

US

Phone Number*

954-258-0504

Email*

larry.smith11@citrix.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 392.70	553001
Budget Manager Campbell, Ricardo	Secondary Budget Manager Brown, Erica	

Provide Rate and Rate Descriptions if applicable* (?)

Increase in Hardware support

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Hurst, Richard

Submission Date

10/3/2022

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

10/4/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Mustafa Cechinnala

Approval Date

10/4/2022

Contracts Approval

Approve*

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

Approved by *

Shaskeyia Belin

Approval Date *

10/4/2022



Executive Contract Summary

Contract Section


Contractor*

FROST INSURANCE

Contract ID #*

7031

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

FROST INSURANCE & THE HARRIS CENTER

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input checked="" 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* (?)

1/1/2023

Contract Term End Date* (?)

3/1/2023

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

THIS IS AN EXTENSION ONLY TO ALLOW RFP PROCESS TO BE COMPLETED

Current Contract Amount*

\$ 75,000.00

Increase Not to Exceed*

\$ 18,750.00

Revised Total Not to Exceed (NTE) *

\$ 93,750.00

Fiscal Year* (?)

2023

Amount* (?)

\$ 93,750.00

Funding Source *

General Revenue (GR)

Contract Description / Type* (?)

- | | |
|---|--|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input checked="" type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other <input type="text"/> |

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

Current contract ends 12/31/22. Requesting a 3-month extension to allow RFP to be completed. Need \$18,750 for the 3-month extension

Contract Owner*

Anthony Robinson

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

Contracted for the past 5 years. Agent of record

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person



Name*

Debbie Davis-Morales

Address*

Street Address

6750 West Loop South

Address Line 2

Suite# 250

City

Bellaire

Postal / Zip Code

77401-4103

State / Province / Region

TX

Country

US

Phone Number*

713-388-1202

Email*

Debbie.Morales@frostinsurance.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1117	\$ 18,750.00	579000
Budget Manager Campbell, Ricardo	Secondary Budget Manager Brown, Erica	

Provide Rate and Rate Descriptions if applicable* (?)

Agent of Record Yearly Fee is \$75,000. Only Need \$18,750 for a 3-month extension

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

MacKinney, Egla

Submission Date

10/13/2022

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

10/14/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

D. Anthony Robinson

Approval Date

10/14/2022

Contracts Approval

Approve*

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

Approved by*

Shasthya Bahu

Approval Date*

10/14/2022



Executive Contract Summary

Contract Section ^

Contractor*

NFS Hospitality Corporation

Contract ID #*

6665

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

NFS Technology and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| <input type="checkbox"/> Competitive Bid | <input type="checkbox"/> Competitive Proposal |
| <input checked="" 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* (?)

9/1/2022

Contract Term End Date* (?)

8/31/2023

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

Current Contract Amount*

\$ 4,000.00

Increase Not to Exceed*

\$ 625.00

Revised Total Not to Exceed (NTE)*

\$ 4,625.00

Fiscal Year* (?) 2023 **Amount*** (?) \$ 4,437.50

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* (?)

Server Migration from older system to current 2019 version.

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

9/1/2022 - 8/31/2023

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

NFS Sales Agreement.pdf 216.72KB

Vendor/Contractor Contact Person

Name*

Izzy Moys

Address*

Street Address

3200 N Hayden Rd

Address Line 2

Suite 323

City

Scottsdale

Postal / Zip Code

85251-6652

State / Province / Region

AZ

Country

US

Phone Number*

602-412-3602

Email*

lizzyM@nfstechgroup.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 625.00	553002
Budget Manager Campbell, Ricardo		Secondary Budget Manager Brown, Erica

Provide Rate and Rate Descriptions if applicable* (?)

Server Migration - \$156.25 per hour x 4 hours \$625.00

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Jones, Anthony

Submission Date

10/6/2022

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

10/6/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Mustafa Cochinnala

Approval Date

10/6/2022

Contracts Approval

Approve*

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

Approved by*

Shakeya Behm

Approval Date*

10/17/2022



Executive Contract Summary

Contract Section ^

Contractor*

Don'Angelo Bivens

Contract ID #*

2021-0128

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

The Harris Center
 Don'Angelo Bivens

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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 <input type="text"/> |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

7/1/2022

Contract Term End Date* (?)

6/30/2023

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

Current Contract Amount*

\$ 17,000.00

Increase Not to Exceed*

\$ 17,000.00

Revised Total Not to Exceed (NTE) *

\$ 34,000.00

Fiscal Year* (?)

2023

Amount* (?)

\$ 34,000.00

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 Contract: Executive Coaching

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

To extend contract term dates by a six month period and to increase NTE funds by \$17,000.00, to continue one-on-one executive and leadership coaching.

Contract Owner*

Kendra Thomas

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

06/01/21-12/01/21
01/01/22- 06/30/22
07/01/22-12/31/22

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*

Don'Angelo Bivens

Address *

Street Address

5642 N 79th St

Address Line 2

City

Milwaukee

Postal / Zip Code

53218

State / Province / Region

WI

Country

United States

Phone Number*

312-502-4230

Email *

dangelo.bivens@gmail.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1110	\$ 17,000.00	542000
Budget Manager	Secondary Budget Manager	
Brown, Erica	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

N/A

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Behn, Shaskyia

Submission Date

10/19/2022

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

10/20/2022

Contract Owner Approval

Approved by

Kendra Thomas

Approval Date

10/20/2022

Contracts Approval

Approve *

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

Approved by *

Shashya Behn

Approval Date *

10/20/2022

Contract Section **Contractor***

Qualtrics LLC

Contract ID #*

6845

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

Qualtrics LLC and The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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 <input type="text"/> |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

8/5/2022

Contract Term End Date* (?)

8/4/2023

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

one year

Current Contract Amount*

\$ 26,001.15

Increase Not to Exceed*

\$ 1,300.06

Revised Total Not to Exceed (NTE)*

\$ 27,301.21

Fiscal Year* (?)

2023

Amount* (?)

\$ 27,301.21

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* (?)

To amend funds for the shortage of the total renewal quote for Employment Engagement Technology software for surveys

Contract Owner*

Lance Britt

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

8/5/2021 to 8/4/2022: Employment Engagement Technology software for surveys

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*

Matthew Donofrio

Address*

Street Address

333 West River Park Drive

Address Line 2

City

Provo

State / Province / Region

UT

Postal / Zip Code

84604-5787

Country

US

Phone Number*

801-709-2160

Email*

ar@qualtrics.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2301	\$ 1,300.06	553002
Budget Manager	Secondary Budget Manager	
Shelby, Debbie	Loera, Angelica	

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name	Submission Date
Britt, Lance	10/11/2022

Budget Manager Approval(s)

Approved by

Debbie Chambers Shelby

Approval Date

10/11/2022

Contract Owner Approval

Approved by

Lance Britt

Approval Date

10/11/2022

Contracts Approval

Approve*

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

Approved by*

Shasthya Behn

Approval Date*

10/18/2022

EXHIBIT F-38

November 2022
Affiliation Agreements, Grants,
MOU's and Revenues
Information Only

CONTRACTORS		PRODUCT/SERVICE DESCRIPTION	ACTION TYPE	CONTRACT PERIOD	FUNDING	COMMENTS
FY23 CONTRACTS						
AFFILIATION AGREEMENTS						
1	Texas Women's University	Clinical Field Placements	New	10/10/22- 10/31/27	GR	This agreement will allow students enrolled at Texas Women's University to complete clinical field placements as part of their degree requirements.
GRANTS						
REVENUE						
2	Be Well Texas	Medication Assisted Treatment for Alcohol and other Substance Use Disorders (MAT AUD)	New Revenue (\$150,000.00)	09/01/22- 08/31/23	State	This new revenue agreement for Be Well Texas was awarded to The Harris Center to fund Medication Assisted Treatment for Alcohol and other Substance Use Disorders (MAT AUD) for Consumers acquired through outreach engagement and referral for the purpose of assisting The Harris Center with linkage and retention in substance use, mental health, and medical services to Texas residents living with a Substance Use Disorder.
3	America's Choice Provider Network (ACPN)	Provider Network	New Revenue	11/15/22- 11/14/23	Private Pay Source	This new Revenue Agreement with America's Choice Provider Network will allow The Harris Center to be in network with multiple insurance carries and health plans.
4	Baylor College of Medicine	Cognitive-Behavioral Therapy Program for Youth with Autism	New Revenue (\$32,418.00)	01/01/22- 12/31/24	Federal Grant	This Federal funded grant awarded by the National Institute of Mental Health for the purpose of supporting the Baylor College of Medicine and The Harris Center collaboration to illustrate the feasibility, preliminary effectiveness and sustainability of a Cognitive Behavioral Therapy (CBT) programs for youths with Autism and Anxiety through providing CBT interventions and the Community-Based Anxiety Program Tailored for Autism (CAPTA) clinician training protocols in community mental health clinics.
5	Waymaker	Day Habilitation Services	New Revenue	10/20/22- 08/31/23	State	This new revenue agreement is to provide Day Habilitation services through The Harris Center's Day Program for the benefit of Consumer. [Consumer driven].
6	Community Health Choice, Inc.	Provider Network	Revenue Amendment	08/30/19- 08/31/23	Private Pay Source	This is an Amendment to a Revenue Agreement to include the reimbursement for new ancillary services delivered by The Harris Center.
7	United Healthcare	Provider Network	Revenue Amendment	06/15/13- 08/31/23	Private Pay Source	This is an Amendment to a Revenue Agreement to add new Benefit Plans so that the Harris Center may receive reimbursement for services delivered.
RIFTON CHAIR LOANERS						



Executive Contract Summary

Contract Section



Contractor*

Texas Women's University

Contract ID #*

2022-0565

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

The Harris Center for Mental Health And IDD & Texas Women's University

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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* (?)

10/10/2022

Contract Term End Date* (?)

10/31/2027

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

Fiscal Year* (?)

2023

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 at Texas Women's University to complete clinical field placements as part of their degree requirements. The students will utilize the skills gained through education while adhering to agency policy and procedures.

Contract Owner*

Ninfa Escobar

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*

Texas Women's University

Supporting Documentation Upload (?)

TWU_Standard Form Academic Agreement_Non-Clinical Affiliation	102.92KB
Agreement_Template.docx	

Vendor/Contractor Contact Person

Name*

Sandra Tyson

Address*

Street Address

6700 Fannin Street Suite 7013

Address Line 2

City

Houston

Postal / Zip Code

77030

State / Province / Region

TX

Country

United States

Phone Number*

713-794-2363

Email*

STyson@twu.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	0.00

Budget Manager Brown, Erica	Secondary Budget Manager Campbell, Ricardo
---------------------------------------	--

Provide Rate and Rate Descriptions if applicable * (?)

N/A

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name Williams, JeDonne	Submission Date 10/4/2022
--	-------------------------------------

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

10/4/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Ninfa Escobar

Approval Date

10/6/2022

Contracts Approval

Approve *

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

Approved by *

Shasthya Bohn

Approval Date *

10/7/2022



Executive Contract Summary

Contract Section

Contractor*

Be Well Texas

Contract ID #*

2022-0568

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

Be Well Texas and The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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 <input type="text"/> |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

9/1/2022

Contract Term End Date* (?)

8/31/2023

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

Fiscal Year* (?)

2023

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* (?)

Be Well Texas awarded The Harris Center funding for Medication Assisted Treatment for Alcohol and other Substance Use Disorders (MAT AUD) to be used for The Harris Center clients acquired through outreach engagement, and referral, to assist The Harris Center with linkage and retention in substance use, mental health, and medical services to Texas residents living with a Substance Use Disorder.

Director: Geoffrey Ball

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

- Yes No Unknown

Please add previous contract dates and what services were provided*

Currently under contract

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

- Yes No Unknown

Community Partnership* (?)

- Yes No Unknown

Specify Name*

Be Well Texas

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person



Name*

Briseida Courtois

Address*

Street Address

7703 Floyd Curl Drive

Address Line 2

City

San Antonio

Postal / Zip Code

78229

State / Province / Region

TX

Country

US

Phone Number*

(210) 567-2788

Email*

courtois@uthscsa.edu

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9263	\$ 150,000.00	543075
Budget Manager	Secondary Budget Manager	
Oshman, Jodel	Macleod, Ann	

Provide Rate and Rate Descriptions if applicable* (?)

na

Project WBS (Work Breakdown Structure)* (?)

na

Requester Name	Submission Date
Singh, Patricia	10/14/2022

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

10/14/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Kim Kopnmayer

Approval Date

10/14/2022

Contracts Approval

Approve*

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

Approved by*

Shaslyia Belm

Approval Date*

10/17/2022



Executive Contract Summary

Contract Section



Contractor*

America's Choice Provider Network (ACPN)

Contract ID #*

2022-0571

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

America's Choice Provider Network and The Harris Center

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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 <input type="text" value="Provider network"/> |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

11/15/2022

Contract Term End Date* (?)

11/14/2023

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

1 year term, with auto renewal

Fiscal Year* (?)

2023

Fiscal Year* (?)

2024

Funding Source *

Private Pay Source

Contract Description / Type * (?)

- | | |
|---|---|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input checked="" type="checkbox"/> Other revenue contract with health care network |

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

ACPN is a provider network, which allows The Harris Center to be in network with multiple insurance carries and health plans

Contract Owner *

Eva Honeycutt

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 (?)

ACPN-Enrollment-Participation-Agreement.pdf 631.54KB

Vendor/Contractor Contact Person

Name *

Seth Breedon, COO, ACPN

Address *

Street Address

2831 St Rose Parkway, Suite 200-309

Address Line 2

City

Henderson

State / Province / Region

Nevada

Postal / Zip Code

89052

Country

United States

Phone Number *

855-300-8664

Email *

contact@acpnusa.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1134	\$ 0.00	000000
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Brown, Erica	

Provide Rate and Rate Descriptions if applicable* (?)

Currently it is offering 30% off provider bill chargers and 10% below federal or state fee schedule.

We would like to push back on this structure.

In addition, need to know with clarity which agreement would hold precedent a direct contract with a payer or ACPN's terms.

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name	Submission Date
Paick, Daniel	10/13/2022

Budget Manager Approval(s) 

Approved by

Ricardo Campbell

Approval Date
10/14/2022

Procurement Approval 

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval 

Approved by

Eva Honeycutt

Approval Date
10/18/2022

Contracts Approval

Approve*

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

Approved by*

Shaskeyia Belu

Approval Date*

10/19/2022



Executive Contract Summary

Contract Section

Contractor*

Baylor College of Medicine

Contract ID #*

2022-0573

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

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

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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 Federal Funded Grant |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

1/1/2022

Contract Term End Date* (?)

12/31/2024

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

N/A

Fiscal Year* (?)

2023

Funding Source*

Federal Grant

Contract Description / Type* (?)

- | | |
|---|--|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Consumer Driven Contract | <input checked="" type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input checked="" type="checkbox"/> Other Federal Funded Grant Subaward |

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

Federal funded grant awarded by the National Institute of Mental Health for the purpose of Baylor College of Medicine and The Harris Center for Mental Health and IDD to illustrate the feasibility, preliminary effectiveness and sustainability of a Cognitive Behavioral Therapy (CBT) programs for youths with Autism and Anxiety through providing CBT interventions and the Community-Based Anxiety Program Tailored for Autism (CAPTA) clinician training protocols in community mental health clinics.

Contract Owner*

Dr. Evanthe Collins

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

The Harris Center has various contractual agreements with Baylor College of Medicine for revenue, affiliations, and professional agreements

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Specify Name*

Baylor College of Medicine

Supporting Documentation Upload (?)

Signed- Baylor_College_of_Medicine-
FDP_Cost_Reimbursement_Subaward.pdf 3.57MB

Vendor/Contractor Contact Person**Name***

Eric Storch, Ph.D., Principal Investigator

Address*

Street Address

One Baylor Plaza, MS BCM 320

Address Line 2

City

Houston

Postal / Zip Code

77030-3411

State / Province / Region

Texas

Country

USA

Phone Number*

713-798-3579

Email*

storch@bcm.edu

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3646	\$ 0.00	N/A

Budget Manager Adams-Austin, Mamie	Secondary Budget Manager Kerlegon, Charles
--	--

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
4323	\$ 0.00	N/A

Budget Manager Shelby, Debbie	Secondary Budget Manager Loera, Angelica
---	--

Provide Rate and Rate Descriptions if applicable* (?)

See attachment for rate and rate description

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name Childs, Margo	Submission Date 10/19/2022
--	--------------------------------------

Budget Manager Approval(s)

Approved by

Mamie Adams

Approval Date
10/19/2022

Approved by

Debbie Chambers Shelby

Approval Date
10/19/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Evanthe Collins

Approval Date

10/19/2022

Contracts Approval

Approve *

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

Approved by *

Shaskeyia Belm

Approval Date *

10/19/2022



Executive Contract Summary

Contract Section



Contractor*

Waymaker

Contract ID #*

2022-0574

Presented To*

- Resource Committee
- Full Board

Date Presented*

11/8/2022

Parties* (?)

The Harris Center for Mental Health and IDD and Waymaker

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
- Board Approval (Total NTE Amount is \$100,000.00+)
- Grant Proposal
- Revenue
- SOW-Change Order-Amendment#
- 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 checked="" 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* (?)

10/20/2022

Contract Term End Date* (?)

8/31/2023

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

NA

Fiscal Year* (?)

2023

Funding Source*

State

Contract Description / Type* (?)

- | | |
|--|---|
| <input type="checkbox"/> Personal/Professional Services | <input type="checkbox"/> Consultant |
| <input checked="" type="checkbox"/> Consumer Driven Contract | <input type="checkbox"/> New Contract/Agreement |
| <input type="checkbox"/> Memorandum of Understanding | <input type="checkbox"/> Amendment to Existing Contract |
| <input type="checkbox"/> Affiliation or Preceptor | <input type="checkbox"/> Service/Maintenance |
| <input type="checkbox"/> BAA/DUA | <input type="checkbox"/> IT/Software License Agreement |
| <input type="checkbox"/> Pooled Contract | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Renewal of Existing Contract | <input type="checkbox"/> Other <input type="text"/> |

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

The consumers from this provider has requested to receive Day Habilitation Services from The Harris Center's Day Program.

Contract Owner*

Lily Pan

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

FY 2022

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

Rate Charges HCS and TxHmL Providers Fiscal Year 2023.docx 12.94KB

Vendor/Contractor Contact Person

Name*

Judy Bratton

Address*

Street Address

P. O. Box 743 Manvel, Texas 77598

Address Line 2

Apt 208

City

P.O. Box 743 Manvel

Postal / Zip Code

77598

State / Province / Region

Texas

Country

United States

Phone Number*

281.692.2179 or 832.816.0395 (Cell)

Email*

jbratton@waymakeronline.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3585	\$ 0.00	000

Budget Manager	Secondary Budget Manager
Adams-Austin, Mamie	Kerlegon, Charles

Provide Rate and Rate Descriptions if applicable* (?)

See uploaded documents

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name	Submission Date
Wills, Thomas	10/20/2022

Budget Manager Approval(s)

Approved by

Mamie Adams

Approval Date

10/20/2022

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Lily Pan

Approval Date

10/20/2022

Contracts Approval

Approve*

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

Approved by*

Shaskyia Behn

Approval Date*

10/20/2022



Executive Contract Summary

Contract Section

Contractor*

Community Health Choice, Inc.

Contract ID #*

6834

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

Community Health Choice, Inc. and The Harris Center

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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 On-going business |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

8/30/2019

Contract Term End Date* (?)

8/31/2023

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

Fiscal Year* (?)

2023

Funding Source*

Private Pay Source

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 revenue contract with health care network

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

Inclusion of reimbursement for new services that were not included in the original contract

Contract Owner*

Eva Honeycutt

Previous History of Contracting with Vendor/Contractor*

Yes No Unknown

Please add previous contract dates and what services were provided*

8/30/20219

Insurance payer agreement

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

Yes No Unknown

Community Partnership* (?)

Yes No Unknown

Supporting Documentation Upload (?)

CHC Primary Care Services Amendment.pdf

268.39KB

Vendor/Contractor Contact Person

Name*

Karen Arizaga

Address*

Street Address

2636 South Drive suite 125

Address Line 2

City

Houston

Postal / Zip Code

77054

State / Province / Region

TX

Country

US

Phone Number*

713-295-2224

Email*

karen.arizaga@communityHealthChoice.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

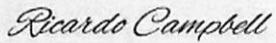
Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1134	\$ 0.00	0
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Brown, Erica	

Provide Rate and Rate Descriptions if applicable* (?)
Procedure Code 93005 - age 0-20 - Rate per service 5.86
Procedure Code 93005 - age 21 and over - Rate per service 5.58

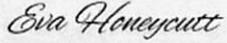
Project WBS (Work Breakdown Structure)* (?)
n/a

Requester Name	Submission Date
Paick, Daniel	10/19/2022

Budget Manager Approval(s) 

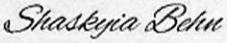
Approved by	Approval Date
	10/19/2022

Contract Owner Approval 

Approved by	Approval Date
	10/20/2022

Contracts Approval

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

Approved by*	Approval Date*
	10/20/2022



Executive Contract Summary

Contract Section

Contractor*

United Healthcare

Contract ID #*

N/A

Presented To*

- Resource Committee
 Full Board

Date Presented*

11/8/2022

Parties* (?)

The Harris Center & United Healthcare of Texas Inc

Agenda Item Submitted For:* (?)

- Information Only (Total NTE Amount is Less than \$100,000.00)
 Board Approval (Total NTE Amount is \$100,000.00+)
 Grant Proposal
 Revenue
 SOW-Change Order-Amendment#
 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 On-going business |

Funding Information*

- New Contract Amendment

Contract Term Start Date* (?)

6/15/2013

Contract Term End Date* (?)

8/31/2023

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

no, this is an evergreen agreement

Fiscal Year* (?)

2023

Funding Source*

Private Pay Source

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 revenue contract with health care network

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

This is an amendment to cover additional services not covered under the current contract agreement.

Contract Owner*

Eva Honeycutt

Previous History of Contracting with Vendor/Contractor*

- Yes No Unknown

Please add previous contract dates and what services were provided*

Insurance Payer contract agreement

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

- Yes No Unknown

Community Partnership* (?)

- Yes No Unknown

Supporting Documentation Upload (?)

UHC 63432290 MHMRA Amend StarKids MME DSNP COMBINED.pdf 589.38KB

Vendor/Contractor Contact Person

Name*

Elaine DeMien

Address*

Street Address

2000 West Loop South, Ste 900

Address Line 2

City

HOUSTON

State / Province / Region

tx

Postal / Zip Code

77027

Country

United States

Phone Number*

763-283-3231

Email*

elaine.demien@uhc.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1134	\$ 0.00	0
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Brown, Erica	

Provide Rate and Rate Descriptions if applicable* (?)

100% of the Texas Medicaid fee schedule published by the applicable state agency;

b) For injectables and other drugs, if the state agency uses National Drug Code ("NDC") pricing or if the state agency does not publish a fee amount, 100% of CMS or, in the absence of a CMS rate, its equivalent.

c) For any other Covered Service, 60% of the current year CMS fee amounts for Medical Groups Carrier Locality;

d) In the event a fee source listed above in clauses (a), (b) or (c) does not publish a specific fee amount, 35% of Medical Group's Customary Charges for Covered Services.

e) For certain CPT/HCPCS codes, we may pay an amount higher than the amount listed in this section 1.1, and in the future, United may reduce that higher amount paid for those CPT/HCPCS codes, but not less than the amount payable in the applicable subsections above.

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name	Submission Date
Paick, Daniel	10/18/2022

Budget Manager Approval(s)

Approved by

Erica Brown

Approval Date

10/19/2022

Contract Owner Approval

Approved by

Shaskyia Behn

Approval Date

10/20/2022

Contracts Approval

Approve*

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

Approved by *

Shasthya Bahu

Approval Date*

10/21/2022

EXHIBIT F-39

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

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
TCOOMMI 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

EXHIBIT F-40