

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

## Resource Committee Meeting March 21, 2023 8:30 am

- I. DECLARATION OF A QUORUM
- II. PUBLIC COMMENTS
- III. APPROVAL OF MINUTES
  - A. Approve Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday, February 21, 2023 (EXHBIT R-1)

## IV. CONSIDER AND RECOMMEND ACTION

- A. Approve FY'23 Year-to-Date Budget Report- February (EXHIBT R-2 Vanessa McKeown)
- B. March 2023 New Contracts Over 100K (EXHIBIT R-3 Silvia Tiller)
- C. March 2023 Contract Amendments Over 100K (EXHIBIT R-4 Silvia Tiller)
- D. March 2023 Interlocal Agreements (EXHIBIT R-5 Silvia Tiller)

## V. 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.
- VI. RECONVENE INTO OPEN SESSION
- VII. CONSIDER AND TAKE ACTION AS A RESULT OF THE EXECUTIVE SESSION

## VIII. INFORMATION ONLY

- A. March 2023 New Contracts Under 100K (EXHIBIT R-6)
- B. March 2023 Renewals Under 100K (EXHIBIT R-7)
- C. March 2023 Amendments Under 100K (EXHIBIT R-8)
- D. March 2023 Affiliation, Agreements, Grants, MOU's and Revenues Information Only (EXHIBIT R-9)

## IX. ADJOURN

Veronica Franco

Veronica Franco, Board Liaison Gerald Womack, Chairman

Resource Committee

THE HARRIS CENTER for Mental Health and IDD

**Board of Trustees** 

## EXHIBIT R-1

# BOARD OF TRUSTEES THE HARRIS CENTER for MENTAL HEALTH AND IDD RESOURCE COMMITTEE MEETING TUESDAY, FEBRUARY 21, 2023 MINUTES

Mr. Shaukat Zakaria, Board Chairman, called the meeting to order at 8:33 a.m. in the Room 109, 9401 Southwest Freeway, noting a quorum of the Committee was present.

## RECORD OF ATTENDANCE

Committee Members in Attendance: Dr. G. Santos, Mr. J. Lykes, Dr. R. Gearing

Committee Member Absent: Mr. G. Womack

Other Board Member Present: Mrs. B. Hellums, Dr. L. Moore, S. Zakaria

## 1. CALL TO ORDER

Mr. Shaukat Zakaria called the Resource Committee meeting to order at 8:31am.

## 2. DESIGNATION OF BOARD MEMBERS AS VOTING COMMITTEE MEMBERS

Mr. Shaukat Zakaria designated Mrs. Hellums and Dr. L. Moore as voting members of the committee.

## 2. DECLARATION OF QUORUM

Mr. Zakaria declared a quorum was present.

## 3. PUBLIC COMMENTS

There were no Public Comments.

## 4. MINUTES

Approve Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday January 17, 2023.

MOTION: SANTOS SECOND: MOORE

## With unanimous affirmative votes,

**BE IT RESOLVED** that the Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday, January 17, 2023, as presented under Exhibit R-1, are approved and recommended to the Full Board.

## 5. CONSIDER AND RECOMMEND ACTION

A. FY'23 Year-to-Date Budget Report-January 2023

MOTION: HELLUMS SECOND: LYKES

## With unanimous affirmative votes,

Board of Trustees Resource Committee Meeting (2/21/2023) MINUTES Page 1 of 3 **BE IT RESOLVED** FY'23 Year-to-Date Budget Report-January, is approved under exhibit R-2 and recommended to the Full Board.

B. February 2023 New Contracts Over 100K

MOTION: SANTOS SECOND: MOORE

## With unanimous affirmative votes,

**BE IT RESOLVED** February 2023 New Contracts Over 100K, under Exhibit R-3 are approved and recommended to the Full Board.

C. February 2023 Contract Amendments Over 100K

MOTION: SANTOS SECOND: MOORE

## With unanimous affirmative votes,

**BE IT RESOLVED** February 2023 Contract Amendments Over 100K, under Exhibit R-4 are approved and recommended to the Full Board.

D. February 2023 Renewals Over \$100K

MOTION: SANTOS SECOND: HELLUMS

## With unanimous affirmative votes,

**BE IT RESOLVED** February 2023 Renewals, under Exhibit R-5 are approved and recommended to the Full Board.

E. February 2023 Interlocal Agreements

MOTION: SANTOS SECOND: HELLUMS

Dr. R. Gearing recused himself from the vote because the voting item included a proposed in the Interlocal Agreement between the Harris Center and the University of Houston-School of Social Work, Dr. Gearing's employer.

## With majority affirmative votes,

**BE IT RESOLVED** February 2023 Interlocal Agreements, under Exhibit R-6 are approved and recommended to the Full Board.

F. Mobile Medical Vehicle

MOTION: MOORE SECOND: LYKES

## With unanimous affirmative votes,

**BE IT RESOLVED** Mobile Medical Vehicle, under Exhibit R-7 are approved and recommended to the Full Board.

### 6. REVIEW AND COMMENT

A. **Facilities Capital Project Update**- Anthony Robinson and Todd McCorquodale and presented to the Resource Committee the Facilities Capital Project Update.

## 7. EXECUTIVE SESSION-

Mr. Zakaria announced the Resource Committee would enter into executive session at 9:29 am for the following reason:

- In accordance with §551.072 of the Texas Government Code, discussion about the purchase of real property for the Southeast Clinic replacement and expansion. Wayne Young, CEO
- In accordance with §551.072 of the Texas Government Code, discussion of the proposed lease at 2000 Crawford. Silvia Tiller, Director of Contracts & Real Estate.

## 8. RECOVENE INTO OPEN SESSION-

The Resource Committee reconvened into open session at 9:54 am.

## 9. CONSIDER AND TAKE ACTION AS A RESULT OF EXECUTIVE SESSION

No action was taken as a result of the Executive Session.

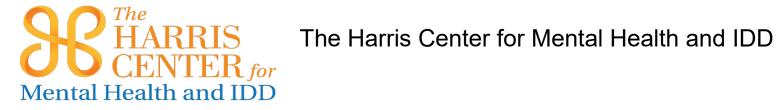
## 10. ADJOURN

MOTION: HELLUMS SECOND: MOORE

There being no further business, the meeting was adjourned at 9:54 am.

Veronica Franco, Board Liaison
Gerald W. Womack, Secretary/Chairman Resource Committee
THE HARRIS CENTER for Mental Health and IDD
Board of Trustees

## EXHIBIT R-2



Financial Report For the Sixth Month and Year to Date Ended February 28, 2023

Fiscal Year 2023

Presented to the Resource Committee of the Board of Trustees on March 21, 2023

## The Harris Center for Mental Health & IDD

March 21, 2023

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

The monthly financial report for February 28, 2023 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.

Steve Evans Controller

## The Harris Center for Mental Health and IDD Financial Summary For the Sixth Month and Year to Date Ended February 28, 2023

Mo	onth (,000)					
		Actual	E	Budget	Va	ariance
Revenues	\$	26,188	\$	26,772	\$	(584)
Expenditures		25,979		27,221		1,242
Excess of Revenues over (under) Expenditures before Other Sources	\$	209	\$	(449)	\$	658

Year-to-date (,000)									
		Actual	В	Budget	Vai	riance			
Excess of Revenues over (under) Expenditures after Other Sources	\$	1,958	\$	1,018	\$	940			

## The Harris Center for Mental Health and IDD Comparison of Revenue and Expenses - Actual to Budget For the Sixth Month and Year to Date Ended February 28, 2023

		Month Ended Feb	oruary 28, 2023			Six Months Ended February 28, 2023				
			Varianc Favorable or (Ur	-	_			Variand Favorable or (Ui	_	
	<u>Actual</u>	<u>Budget</u>	<u>\$</u>	<u>%</u>	<del>-</del>	<u>Actual</u>	<u>Budget</u>	<u>\$</u>	<u>%</u>	
Total Revenues:										
Harris County and Local	\$ 5,040,758	\$ 5,008,702	. ,	1%	\$		\$ 30,101,112		6%	
PAP / Samples	731,977	525,000	/ -	39%		4,994,006	3,500,000		43%	
Interest	137,837	129,940	,	6%		828,639	779,638		6%	
State General	9,514,275	9,507,029	,	0%		57,264,963	57,042,073		0%	
State Grants	1,223,019	1,260,590	. , ,	-3%		7,027,502	7,563,536		-7%	
Federal Grants	2,904,746	3,671,740	(766,994)	-21%		19,659,918	22,069,258		-11%	
Directed Payment Program	817,840	817,840	-	0%		4,907,041	4,907,040	-	0%	
Charity Care Pool	3,366,382	3,366,382	-	0%		20,198,292	20,198,292	-	0%	
3rd party billings	2,451,270	2,484,942	(33,672) <b>d</b>	-1%		13,270,481	14,910,243	(1,639,762)	-11%	
Total Revenue	26,188,104	26,772,165	(584,061) <b>f</b>	-2%		160,057,007	161,071,192	(1,014,185)	-1%	
Total Operating Expenses:										
Salaries and Fringe	18,642,540	19,399,606	757,066 <b>g</b>	4%		116,617,651	116,365,549	(252,102)	0%	
Travel	147,803	183,181	35,378	19%		828,120	936,481	108,361	12%	
Contracts and Consultants	1,691,188	1,961,550	270,362	14%		10,387,694	11,748,763	1,361,069	12%	
HCPC Contract	2,332,657	2,322,734	(9,923)	0%		13,927,657	13,936,404	8,747	0%	
Supplies and Drugs	1,159,961	1,100,431	(59,530)	-5%		7,522,301	6,523,280	(999,021)	-15%	
Equipment (Purch, Rent, Maint)	492,926	532,631	39,705	7%		2,564,083	3,141,961	577,878	18%	
Building (Purch, Rent, Maint)	348,678	495,649	146,971	30%		1,899,768	2,970,263	1,070,495	36%	
Vehicle (Purch, Rent, Maint)	59,638	87,221	27,583	32%		403,044	513,555	110,511	22%	
Telephone and Utilities	263,332	287,175	23,843	8%		1,781,871	1,722,974	(58,897)	-3%	
Insurance, Legal, Audit	199,404	176,447	(22,957)	-13%		1,035,749	1,073,692	37,943	4%	
Other	640,514	674,333		5%		4,072,669	4,019,850		-1%	
Total Operating Expenses	25,978,640	27,220,958	1,242,318 <b>h</b>	5%		161,040,608	162,952,773	1,912,164	1%	
Excess of Revenues over (under)										
Operating Expenditures before Other Sources	209,464	a (448,792)	658,257			(983,601)	(1,881,581)	897,980		
Capital Expenses from fund balance Capex	200,526	-	(200,526)			1,377,997	-	(1,377,997)		
Funds from other sources:			i							
Use of fund balance - CapEx	200,106	-	200,106			1,356,960	-	1,356,960		
Use of fund balance - COVID-19	-	-	-			-	-	-		
Fund Balance DSRIP	483,333	483,276	57			2,899,713	2,899,656	57		
Insurance Proceeds	-	-	-			37,253	-	37,253		
Proceeds from Sale of Assets	15,000	-	15,000			25,285	-	25,285		
Excess of Revenues over (under)										
Total Expenditures after Other Sources	\$ 707,377 =======	\$ 34,484 ========	, , , , , ,		\$	1,957,612 <b>b</b> \$		\$ 939,538 =======		
						<b></b>				

## The Harris Center for Mental Health and IDD Comparative Balance Sheet As of February 28, 2023

		Ending l	Increase/(Decrease)				
	Jar	nuary 31, 2023		ruary 28, 2023		February	
Assets		<u>y                                </u>		· · · · · · · · · · · · · · · · · · ·		·	
Cash and Cash Equivalents	\$	73,281,411	\$	51,852,604	\$	(21,428,807)	а
Inventory - includes RX		380,660		414,510		33,850	b
Prepaid Expenses		7,590,562		7,113,436		(477,127)	С
A/R Medicaid, Medicare, 3rd Party		12,719,424		12,592,788		(126,637)	
Less Bad Debt Reserve		(4,893,516)		(3,988,690)		904,826	
A/R Other		44,677,197		47,629,946		2,952,749	ч
Total Current Assets							u
Total Current Assets		133,755,739		115,614,593		(18,141,145)	
Right of Use Asset (Lease)		1,933,770		1,933,770		_	
• , ,						20 171	
Land		12,654,193		12,683,363		29,171	
Building		25,389,494		25,389,494		-	
Building Improvements		21,175,215		21,175,215		-	
Furniture and Fixtures		6,919,784		6,919,784		-	
Vehicles		1,029,774		1,029,774		-	
Construction in Progress		22,365,302		22,279,232		(86,070)	
Total Property, Plant & Equipment		91,467,532		91,410,633		(56,899)	
TOTAL ASSETS	\$	225,223,270	\$	207,025,226	\$	(18,198,044)	
Liabilities and Fund Balance							
Unearned Income	\$	17,287,114	\$	5,330,535	\$	(11,956,578)	•
Accrued Payroll and Accounts Payables	φ	20,268,079	φ	14,057,239	φ	(6,210,840)	
Lease Liability - Current		511,404		511,404		(0,210,040)	•
Current Portion Long Term Debt		311,404		311,404		_	
Total Current Liabilities		38,066,597		19,899,179		(18,167,418)	
Total Current Liabilities		30,000,331	-	19,099,179		(10,107,410)	
State Escheatment Payable		53,471		55,805		2,334	
Lease Liability - Long Term		853,289		853,289		-	
Lease-Accrued Interest		5,964		5,964		_	
Total Non Current Liabilities		912,723	-	915,058		2,334	
TOTAL LIABILITIES		38,979,320		20,814,236		(18,165,084)	
TOTAL LIABILITIES	-	30,979,320	-	20,014,230	-	(10,100,004)	
General Fund Balance		18,166,431		18,132,524		(33,907)	
Nonspendable							
Investment in Inventories		380,660		414,510		33,850	
Investment In Fixed Assets		91,467,532		91,410,633		(56,899)	
A a si aura di							
Assigned: Current Capital Projects		9,527,128		9,327,023		(200,106)	
Future Purchases of Real Property and IT Infrastructure		1,365,842		1,365,842		(200, 100)	
Self Insurance		2,000,000		2,000,000		-	
ECI Building Use		361,664		361,664		-	
144 1 444		55,966,038		55,482,762		(483,276)	~
Walver 1115 COVID-19 eFMAP Reserve		904,067		904,067		(403,270)	y
Compensated Absences		4,854,354		4,854,354		_	
Total		184,993,715	-	184,253,378		(740,338)	
1041		101,000,710		101,200,010		(1.10,000)	
Year to Date Excess Revenues over							
(under) Expenditures		1,250,235		1,957,612		707,377	
					-	,	
TOTAL FUND BALANCE		186,243,950		186,210,990		(32,961)	
TOTAL LIABILITIES AND FUND BALANCE	\$	225,223,270	\$	207,025,226	\$	(18,198,045)	
TOTAL LIABILITIES AND TOND BALANCE	Ψ	220,220,210	Ψ	201,020,220	Ψ	(10,130,043)	

- I. Comparison of Revenue and Expenses
  - a. For the month of February 2023, the sixth month of the fiscal year, the Harris Center is reporting excess Revenues over Expenditures of \$209,464 before funds from other sources are considered.
  - b. The year-to-date amount translates to Excess Revenues over Expenses of \$1,957,612 after use of fund balance, fund balance CapEx, fund balance DSRIP, and insurance proceeds are considered.
  - c. Federal Grants are unfavorable to budget by \$766,994 primarily due to the timing of billable expenses associated with ARPA grants passed through City of Houston and the execution of a contract for Federal Navigation Services.
  - d. Third Party billings are unfavorable to budget by \$33,672.
  - f. Total Revenue is unfavorable to budget by \$584,061 primarily due to Federal Grants. (see Note C.)
  - g. Salaries and Fringe are favorable to budget by \$757,066 primarily due to unfilled positions.
  - h. Total Operating Expenses are favorable to budget by \$1,242,318 primarily due to salaries and fringe benefits.
  - i. Funds from other sources used to fund current month expenses totaled \$698,429 including DSRIP reserves, insurance proceeds and use of CapEx funds.

## 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 primarily because of the use of State General Revenue dollars received in December.

			Increase
	Ending	Balance	(Decrease)
	1/31/2023	2/28/2023	February
Cash-General Fund Bank of America	7,336,665	7,565,172	\$ 228,507
Cash-General Fund Chase	31,643,953	26,202,462	(5,441,491)
Cash-SSI Chase	29,300	28,021	(1,279)
Cash-BOA ACH Vendor	779,358	482,348	(297,009)
Cash-Pharmacy Chase	26,113	125,847	99,734
Cash-FSA-Discovery	166,093	62,477	(103,616)
Petty Cash/Pharmacy Cash Drawer	6,550	6,550	-
Investments-TexPool General Fund	1,021,276	1,024,801	3,525
Investments-TexPool Self Insurance	2,333,943	2,341,998	8,055
Investments-TexPool Prime	16,868,740	7,903,072	(8,965,668)
Investments-Texas Class	13,069,419	6,109,855	(6,959,564)
	\$ 73,281,411	\$ 51,852,604	\$ (21,428,807)

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:

						Increase
	Ending Balance					(Decrease)
		1/31/2023		2/28/2023		February
Inventory-Central Supplies		2,561		2,561	\$	-
Supplies Purchased				37,500	\$	37,500
Supplies Used		(17,563)		(21,213)		(3,650)
Inventory-Drugs		395,662		395,662		-
Total Inventory	\$	380,660	\$	414,510	\$	33,850

c. Prepaid Expenses decreased due to DPP-BHS activity.

## II. Comparative Balance Sheet (continued)

## d. Accounts Receivable Other increased in February.

			Increase	
	Ending Ba	(Decrease)		
	1/31/2023	2/28/2023	February	
Villas at Bayou Park	98,887	101,510	2,623	
Pear Grove	60,284	63,185	2,901	
Pasadena Cottages	106,211	109,876	3,665	
Employee	(44)	(749)	(705)	
Pecan Village	4,401	4,401	-	
Acres Homes Garden	225,523	230,897	5,374	
Foundation	659	528	(131)	
NAMI of Greater Houston	747	387	(359)	
General Accounts Receivable	843,033	863,035	20,002	
Pharmacy PBM	66,588	97,394	30,806	
Cobra Premiums	13,996	13,996	-	
Harris County Projects	1,858,891	1,644,849	(214,043)	
Harris County Juvenile Probation	717,349	529,280	(188,068)	
Harris County Community Supervision	1,181,901	955,098	(226,804)	
Harris County Sheriff's Department	9,039,793	9,943,697	903,904	
ICFMR	251,244	184,312	(66,932)	
TCOOMMI-Special Needs	878,235	544,643	(333,592)	
TDCJ-Parole	123,000	61,500	(61,500)	
TDCJ-Substance Abuse	83,335	50,001	(33,334)	
TCOOMMI-Juvenile	168,616	72,848	(95,768)	
Jail Diversion	3,584,404	4,352,507	768,103	
ECI	1,404,056	1,125,086	(278,970)	
ECI Respite	-	-	-	
ECI SNAP	36,045	19,805	(16,240)	
Federal CHH Navigation	-	-	-	
Federal Aot	52,889	77,243	24,354	
ARPA-COH-MCOT RR Expansion	1,054,268	846,703	(207,565)	
ARPA-COH-Core HPD Expansion	242,539	211,336	(31,203)	
Fed SAMHSA CCBHC Expansion	209,456	73,120	(136,337)	
AR Fed ARPA TPWD Fam Well Ctr	236,178	358,561	122,383	
AR Fed ARPA ECI	16,944	26,876	9,933	
PATH-Mental Health Block Grant	259,843	209,944	(49,899)	
MH Block Grant-Coordinated Specialty	203,821	167,517	(36,304)	
Subtotal, A/R-Other	\$ 23,023,092	\$ 22,939,387	\$ (83,705)	

				Increase
II.	Accounts Receivable Other (Continued)	Ending	Balance	(Decrease)
		1/31/2023	2/28/2023	February
	DSHS SAPT Block Grant	72,280	62,915	(9,365)
	AR State TCMHCC	-	-	-
	Enhanced Community Coordinator	92,568	72,700	(19,868)
	DSHS Mental Heath First Aid	15,580	8,200	(7,380)
	HHSC ZEST-Zero Suicide	33,226	42,793	9,566
	HCC Open Door	311,775	223,187	(88,588)
	HCS	22,416	22,416	-
	Tx Home Living Waiver	313,516	324,577	11,061
	DPP-BHS	798,140	1,082,403	284,263
	Charity Care Pool	16,831,910	20,198,292	3,366,382
	Fed ARPA COF-CIRT HPD	2,208	19,690	17,482
	Helpline Contracts	99,925	119,556	19,631
	City of Houston-CCSI	25,268	50,537	25,268
	City of Houston-DMD	18,667	37,333	18,667
	City of Houston-911 CCD Amended	58,562	78,790	20,228
	A/R - HHSC Projects	2,958,064	2,347,170	(610,895)
	Local Be Well Be Connected	-	-	-
	Grand Total A/R - Other	\$ 44,677,197	\$ 47,629,946	\$ 2,952,749

- e. Unearned Income decreased due to use of Q1 2023 State GR funds.
- f. Accrued Payroll and Accounts Payable increased because of payment timing related to accounts payable, payroll, and employee fringe benefit liabilities.
- g. Waiver 1115 Reserves decreased due to use of budgeted DSRIP reserves. Total DSRIP Reserves on hand at end of month equals \$55,482,762.
- h. Days of Operations in Reserve for Total Agency is 106 days versus 111 days for the prior month.

## III. Investment Portfolio

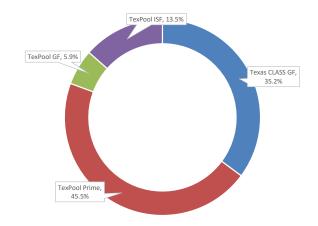
- a. Total investments as of February 28, 2023 are \$17,379,726 of which 100% is in government pools. (Texas Class 35% and TexPool 65%)
- b. Investments this month yielded interest income of \$86,347 with an additional \$51,490 earned in the Chase hybrid checking account.

## The Harris Center for Mental Health and IDD Investment Portfolio February 28, 2023

## **Local Government Investment Pools (LGIPs)**

	Begir	nning Balance	Transfer In	Transfer Out	li	nterest Income	Ending Value	Portfolio %	Yield
Texas CLASS Texas CLASS General Fund	\$	13,069,419	\$ -	\$ (7,000,000)	\$	40,436	\$ 6,109,855	35.2%	4.758%
TexPool									
TexPool Prime		16,868,741	\$ -	\$ (9,000,000)		34,331	7,903,072	45.5%	4.520%
TexPool General Fund		1,021,276				3,525	1,024,801	5.9%	4.244%
TexPool Internal Service Fund		2,333,943				8,055	2,341,998	13.5%	4.244%
TexPool Sub-Total		20,223,960	-	(9,000,000)		45,911	11,269,871	64.8%	4.438%
Total Investments	\$	33,293,379	\$ -	\$ (16,000,000)	\$	86,347	\$ 17,379,726	100%	4.550%

## Investment Portfolio Weight



3 Month Weighted Average Maturity (Days)	1.00
3 Month Weighted Average Yield of The Harris Center Investment Portfolio	4.488%
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 weeks)	4.265%
February Interest Rate - Chase Hybrid Checking	3.15%
February ECR - Chase	3.25%

This Investment Portfolio Report of The Harris Center for Mental Health and IDD as of February 28,2023 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 February 2023

Vendor	Description	Monthly Not-To- Exceed*	Jan-23	YTD Total Through February
Lincoln Financial Group	Retirement Funds (401a, 403b, 457)	\$2,400,000	\$1,817,561	\$10,813,605
Blue Cross Blue Shield of TX	Health and Dental Insurance	\$2,600,000	\$2,419,780	\$14,292,127

<sup>\*</sup> 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 January payments of Liabilities for Employee Benefits = 11% of Expenditures.

## EXHIBIT R-3

# March 2023 NEW CONTRACTS OVER 100k

	CONTRACTORS	PRODUCT/SERVICE DESCRIPTION	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	FY23 NEW CONTRACTS						
	ADMINISTRATION						
1	FreeIT Data Solutions	Varonis All in One Cybersecurity Platform	\$330,789.04	06/24/2023-06/24/2026	GR	Tag-On to DIR- TSO-4229	Information Technology Department currently uses Critical Start for our FY22 contract for Varonis. IT is requesting to change vendors and move from an on-prem solution to a SaaS (Software as a Service) model for their solution. Varonis is an all-in-one cybersecurity platform. It protects Active Directory, network shares, and Microsoft O365. Varonis classifies sensitive data, shows data at-risk, and alerts IT staff to abnormal activity for action. FY23 NTE: \$330,789.04; FY24 NTE: \$330,789.04; and FY25 NTE: \$330,789.04. Total NTE: \$1,107,948.29
	CPEP/CRISIS SERVICES						
	FORENSICS						
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES						
r	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI						
	LEASES						
	MENTAL HEALTH SERVICES						

## Sole Source Request for Proposal Request for Qualification Request for Application ▼ Tag-On Request for Quote Consumer Driven Interlocal Not Applicable (If there are no funds required) Other DIR-TSO-4229 Funding Information\* New Contract Amendment Contract Term Start Date \* (?) Contract Term End Date \* (?) 6/23/2026 If contract is off-cycle, specify the contract term (?) 3 Years

Fiscal Year\* (?)

Fiscal Year\* (?)

2023

2024

Amount\* (?)

\$ 330,789.04

Amount\* (?)

\$ 330,789.04

Fiscal Year* (?)	Amount* (?)				
2025	\$ 330,789.04				
Funding Source*					
General Revenue (GR)					
Contract Description / Type * (?)					
Personal/Professional Services	Consultant				
Consumer Driven Contract	✓ New Contract/Agreement				
Memorandum of Understanding	Amendment to Existing Contract				
Affiliation or Preceptor	Service/Maintenance				
BAA/DUA	□ IT/Software License Agreement				
Pooled Contract	Lease				
Renewal of Existing Contract	Other State of the Control of the Co				
Justification/Purpose of Contract/Description of Service	ces Being Provided* (?)				
Information Technology Department currently uses Critical					
Varonis. IT is requesting to change vendors and move from					
(Software as a Service) model for their solution. Varonis is					
platform. It protects Active Directory, network shares, and I					
sensitive data, shows data at-risk, and alerts IT staff to abr	normal activity for action.				
Contract Owner*					
Mustafa Cochinwala					
Previous History of Contracting with Vendor/Contractor	or*				
Yes No Unknown					
Vendor/Contractor a Historically Underutilized Busines	ss (HUB)* (?)				
Yes       No       Unknown					
Please provide an explanation*					
N/A					
Community Partnership* (?)					
Supporting Documentation Upload (?)					
CyberOne Q-29754_Varonis 3YR UPG_DIR-TSO-4851.pd	lf 21.24KB				
ATG_HarrisCenter_Varonis_2023 Renewal_3YR.pdf	97.79KB				
300130-4 Harris Center - Varonis 1yr - 20230220.pdf	35.76KB				
300130-4 Harris Genter - Varonis Tyr - 20230220.pur	33.70KB				
Vendor/Contractor Contact Person	<u> </u>				
Name*					
Andrew Neuenschwander					

Address\* Street Address P.O. Box 1572 Address Line 2 State / Province / Region City Austin Tx Postal / Zip Code Country US 78767 Phone Number\* 1-800-478-5161 Email\* andrew@freeitdata.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* **Budget Unit Number\*** 553002 \$ 330,789.04 1130 Secondary Budget Manager **Budget Manager** Campbell, Ricardo Brown, Erica Provide Rate and Rate Descriptions if applicable \* (?) See attached Project WBS (Work Breakdown Structure)\* (?) N/A **Submission Date** Requester Name 2/7/2023 Hurst, Richard Budget Manager Approval(s) Approved by **Approval Date** Ricardo Campbell 2/7/2023 Procurement Approval File Upload (?) Approved by Approval Date Sharon Brauner 2/9/2023 Contract Owner Approval

Approved by  Mustafa Cochinnala	Approval Date 2/9/2023	
Contracts Approval		
Approve*		
Yes		
No, reject entire submission		
Return for correction		
Approved by *		
	Approval Date *	
Belinda Stude	2/24/2023	

## EXHIBIT R-4

# MARCH 2023 AMENDMENTS OVER 100k

CONTRACTORS	PRODUCT/SERVICE DESCRIPTION	PREVIOUS NTE AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
FY23 AMENDMENTS								
ADMINISTRATION								Amendment to increase the NTE due to increase for Microsoft
1 Centre Technologies	Microsoft Office 365 Subscription	\$576,000.00	\$117,00.00	\$693,000.00	09/01/2022-08/31/2023	GR	Tag-On to DIR-CPO- 4857	Enterprise Mobility + Security license. The per user price increased from \$3.70 to \$6.60 per month. This license is used restrict Harris Center employees/contractors from downloading/printing Harris Center PHI from non-agency devices.
		60.40.000.00	#450,000,00	\$390,000.00	09/01/2022-08/31/2023	GR	Sole Source	Amendment to increase the NTE to add additional services to build out electronic forms development within EPIC EHR. Contract staff will build our current paper forms within EPIC so that The Harris Center may move away from paper forms. Additional the contract staff build any new forms on an as needed basis. Anticipated rate is up to \$150.00/hour.
2 Pivot Point Consulting, A Vaco Company	Consulting & IT Services	\$240,000.00	\$150,000.00	\$390,000.00	09/01/2022-08/31/2023	GR	Sole Source	needed basis. Anticipated rate is up to \$150.00/nour.
CPEP/CRISIS SERVICES								
FORENSICS								
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								
3 CC Assessment Services, Inc.	Psychological Testing and Evaluation Services	\$52,810.00	\$118,000.00	\$170,810.00	09/01/22- 08/31/23	State Grant	Consumer Driven	Amendment to increase the NTE for increase in services neede for Eligibility/Intake to assist with decreasing the DID backlog. HHSC has provided additional funding to The Harris Center to allocate toward GR services.
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI								
LEASES								
MENTAL HEALTH SERVICES								
	-						1	
							3	

## SCHOOLS Executive Contract Summary

Contract Section	
Contractor*	
Centre Technologies	
Contract ID #*	
7710	
Presented To*	
Resource Committee	
Full Board	
Date Presented*	
3/21/2023	
Parties* (?)	
The Harris Center and Centre Technologies	
Agenda Item Submitted For: * (?)	
Information Only (Total NTE Amount is Less than \$1	00,000.00)
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	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	✓ Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
Funding Information*	
New Contract  Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
9/1/2022	8/31/2023
If contract is off-cycle, specify the contract term (?)	
*	
Current Contract Amount*	
\$ 576,000.00	
Increase Not to Exceed*	
\$ 117,000.00	
Revised Total Not to Exceed (NTE)*	
\$ 693,000.00	

Fiscal Year* (?)	Amount*(?)
2023	\$ 693,000.00
Funding Source*	
General Revenue (GR)	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	✓ Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Descript	ion of Services Being Provided* (?)
The increase in contract is due to increase in	
Security license. The per user price increased	
is used to restrict Harris Center employees/co	
Center PHI from non Harris Center devices.	
Contract Owner*	
Mustafa Cochinwala	
Previous History of Contracting with Vend	or/Contractor*
Please add previous contract dates and wi	hat services were provided*
FY11 - FY23	
Consulting, software/hardware implementatio	ns,
Managed Service Provider for O365 and Azur	
Vendor/Contractor a Historically Underutil	ized Business (HUB) * (?)
Please provide an explanation*	
N/A	
Community Partnership* (?)	
Yes No Unknown	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Pers	son
Name*	
Jamie Schanbachler	

## Address\* Street Address 16801 Greenspoint Park Dr Address Line 2 Suite 200 State / Province / Region City Tx Houston Country Postal / Zip Code US 77060 Phone Number\* 281-506-2480 Email\* jschanbachler@centretechnologies.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* Budget Unit Number\* 574000 \$ 693,000.00 1130 Secondary Budget Manager **Budget Manager** Brown, Erica Campbell, Ricardo Provide Rate and Rate Descriptions if applicable \* (?) \$6.60 per user per month for Microsoft Enterprise Mobility + Security license Project WBS (Work Breakdown Structure) \* (?) Requester Name **Submission Date** 2/15/2023 Hurst, Richard Budget Manager Approval(s) Approved by **Approval Date** 2/15/2023 Procurement Approval File Upload (?) Approved by **Approval Date** Sign Contract Owner Approval

Approved by	Approval Date				
Mustafa Cochinwala	2/15/2023				
Contracts Approval		CAN SERVICE AND A SERVICE A			
Approve*					
<ul><li>Yes</li></ul>					
<ul> <li>No, reject entire submission</li> </ul>					
Return for correction					
Approved by *					
Approved by					
Apploted by	Approval Date*				

Contract Term End Date \* (?)

8/31/2023

## Funding Information\*

New Contract Amendment

Contract Term Start Date \* (?)

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

**Current Contract Amount\*** 

\$ 240,000.00

9/1/2022

Increase Not to Exceed\*

\$ 150,000.00

Revised Total Not to Exceed (NTE)*	
\$ 390,000.00	
Fiscal Year* (?)	Amount* (?)
2023	\$ 390,000.00
Funding Source*	
General Revenue (GR)	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
■ BAA/DUA	■ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	☐ Other
Justification/Purpose of Contract/Descriptio	n of Services Being Provided* (?)
Backfill for Harris Center IT for electronic forms staff will build our current paper forms within EP away from paper forms. They will also build new	development within EPIC EHR. Contract IC so that The Harris Center may move v forms that are required as needed. This is
a tag on to Harris Health's contract with Pivot Po	oint.
Contract Owner*	
Mustafa Cochinwala	
Previous History of Contracting with Vendor	/Contractor*
Please add previous contract dates and wha	at services were provided*
FY21, FY22	
EPIC Reporting Analyst	
EPIC Compass Rose Analysts	
Vendor/Contractor a Historically Underutilize	ed Business (HUB) * (?)
Yes No Unknown	
Please provide an explanation*	
N/A	
Community Partnership* (?)	
○ Yes ● No ○ Unknown	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	on .
Name*	
Paul Meyer	

## Address\* Street Address 5501 Virginia Way Address Line 2 State / Province / Region City TN Brentwood Postal / Zip Code Country 37027 **United States** Phone Number\* 2817052368 Email\* pmeyer@pivotpointconsulting.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* **Budget Unit Number\*** 900060 \$ 150,000.00 1158 Secondary Budget Manager **Budget Manager** Campbell, Ricardo Brown, Erica Provide Rate and Rate Descriptions if applicable \* (?) Up to \$150 per hour Project WBS (Work Breakdown Structure)\* (?) EHR21.1158.02 **Submission Date** Requester Name Hurst, Richard 2/15/2023 Budget Manager Approval(s) Approved by **Approval Date** Exica Brown 2/15/2023 Procurement Approval File Upload (?) Approved by Approval Date Sign Contract Owner Approval

Approval Date
2/15/2023
Approval Date*
2/16/2023



HARRIS Executive Contract Sum	nmary
Contract Section	
Contractor*	
CC Assessment Services, Inc.	
Contract ID #*	
7871	
Presented To*	
Resource Committee	
Full Board	
Date Presented*	
3/21/2023	
Parties* (?)	
CC Assessment Services, Inc. and The Harris Center for	or Mental Health and IDD
Agenda Item Submitted For: * (?)	
☐ Information Only (Total NTE Amount is Less than \$1	00,000.00)
✓ 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	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	☐ Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other Other
Funding Information*	
New Contract  Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
	8/31/2023
9/1/2022	0/3/1/2023
If contract is off-cycle, specify the contract term (?)	
N/A	
Current Contract Amount*	
\$ 52,810.00	
Increase Not to Exceed*	
\$ 118,000.00	
Revised Total Not to Exceed (NTE)*	
\$ 170,810.00	

Fiscal Year* (?)	Amount* (?)	
2023	\$ 170,810.00	
Funding Source*		
State		
Contract Description / Type * (?)		
Personal/Professional Services	Consultant	
Consumer Driven Contract	New Contract/Agreement	
Memorandum of Understanding	Amendment to Existing Contract	
Affiliation or Preceptor	Service/Maintenance	
BAA/DUA	IT/Software License Agreement	
Pooled Contract	Lease	
Renewal of Existing Contract	☐ Other	
Justification/Purpose of Contract/Description of	of Services Being Provided* (?)	
The Harris Center has received funding from HHS0		
backlog.		
The request is to increase PO/CT 142648 by \$118 to assist with the DID backlog. The current NTE an		
amount will be \$170,810.00 for PO/CT 142628, 33		
Service Description: Contractor shall provide assistance by completing	neverbological testing/evaluations and will	
be responsible for providing supervision for all psy- Agency's Consumers for determination of IDD eligi	chological/evaluations completed on the	
Contract Owner*		
Dr. Evanthe Collins		
Previous History of Contracting with Vendor/Co	ontractor*	
Please add previous contract dates and what s	ervices were provided*	
09/01/21 to present. Psychological testing/evaluati	ons.	
Vendor/Contractor a Historically Underutilized	Business (HUB) * (?)	
Community Partnership* (?)		
Specify Name *		
CC Assessment Services, Inc.		
Supporting Documentation Upload (?)		
Vendor/Contractor Contact Person		
Name*		

Catherine Lewis

Address\* Street Address 13030 Terrance Run Lane Address Line 2 State / Province / Region City Texas Houston Country Postal / Zip Code United States 77044 Phone Number\* 8503228673 Email\* catherine.lewis@ccassessments.org **Budget Section** Budget Units and Amounts Charged to each Budget Unit Expense/GL Code No.\* Amount Charged to Unit\* Budget Unit Number\* \$ 118,000.00 540503 3355 Secondary Budget Manager **Budget Manager** Kerlegon, Charles Adams-Austin, Mamie Provide Rate and Rate Descriptions if applicable \* (?) \$350.00 per evaluation Supervision for psychological testing/evaluations completed. Project WBS (Work Breakdown Structure) \* (?) N/A Requester Name **Submission Date** 2/27/2023 Childs, Margo Budget Manager Approval(s) Approved by Approval Date Mamie CAdams 2/27/2023 Contract Owner Approval Approved by **Approval Date** Evanthe Collins 2/27/2023 Contracts Approval

### Approve\*

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

Approved by \*

Belinda Stude

Approval Date\* 2/28/2023

## EXHIBIT R-5

## March 2023 INTERLOCAL AGREEMENTS

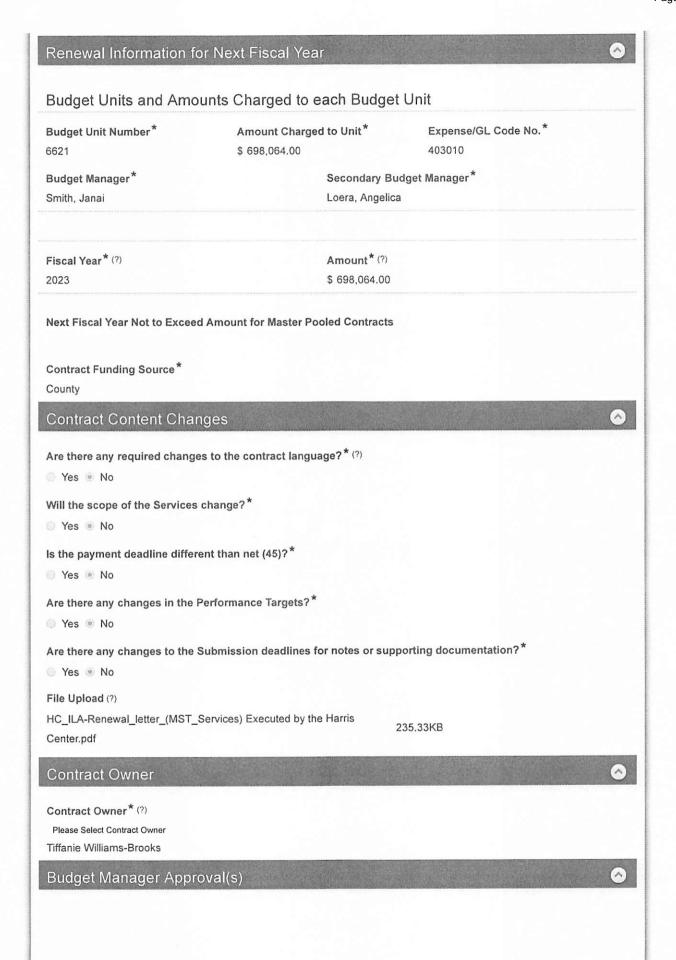
rovided by the Harris
rovided by the Harris
rovided by the Harris
ılti Service Center
am to provide crisis the ages of 13-17 years venile detention center to provide a venue for I interventions targeted a pommunity and family
and the States' current tunit. The program will inmates housed in the and trial and reduce wait on the program will nanagement, nursing and



### **Annual Renewal Evaluation**

Current Fiscal Year Contract Information	
Current Fiscal Year	
2023	
Contract ID#*	
7663	
Control to News *	
Contractor Name*  Harris County Juvenile Board on behalf of the Harris County	nty Juvenile Prohation Department
	nty develine i robation department
Service Provided * (?)	
Multi-Systemic Therapy Services ("MST")	
Renewal Term Start Date*	Renewal Term End Date*
3/1/2023	2/29/2024
Term for Off-Cycle Only (For Reference Only)	
Agenda Item Submitted For: (?)	
☐ Information Only (Total NTE Amount is Less than \$100	0,000.00)
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	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
✓ Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
Contract Description / Type	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	■ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Busin	ess (HUB) (?)
Yes	
No	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 698,064.00
Rate(s)/Rate(s) Description
Unit(s) Served* N/A
G/L Code(s)* N/A
Current Fiscal Year Purchase Order Number*
N/A
Contract Requestor*
Mohagany Bowser
Contract Owner*
Tiffanie Williams-Brooks
File Upload (?)
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



Approved by		
Janai Lynnette Smith		
Contract Owner Approval		•
Approved by		
Viffanic Williams-Brooks		
Contracts Approval		
Contracts Approval		
Approve*      Yes   No, reject entire submission		
Approve*  Yes		
Approve*  Yes  No, reject entire submission  Return for correction		
Approve*      Yes   No, reject entire submission	Approval Date*	
Approve*  Yes  No, reject entire submission  Return for correction	Approval Date* 2/27/2023	
Approve*  Yes  No, reject entire submission  Return for correction  Approved by *		

### **Annual Renewal Evaluation Current Fiscal Year Contract Information Current Fiscal Year** 2023 Contract ID#\* 6186 Contractor Name\* City of Houston Service Provided\* (?) City of Houston Acres Home Multi Service Center located at 6719 W. Montgomery, Houston, TX. Renewal Term End Date\* Renewal Term Start Date\* 2/1/2023 1/31/2024 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 Proposal Competitive Bid Request for Proposal Sole Source Request for Qualification Request for Application Request for Quote Tag-On Interlocal Consumer Driven Other Not Applicable (If there are no funds required) Contract Description / Type Personal/Professional Services Consultant Consumer Driven Contract New Contract/Agreement Memorandum of Understanding Amendment to Existing Contract Affiliation or Preceptor Service/Maintenance IT/Software License Agreement BAA/DUA

Lease

Other

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

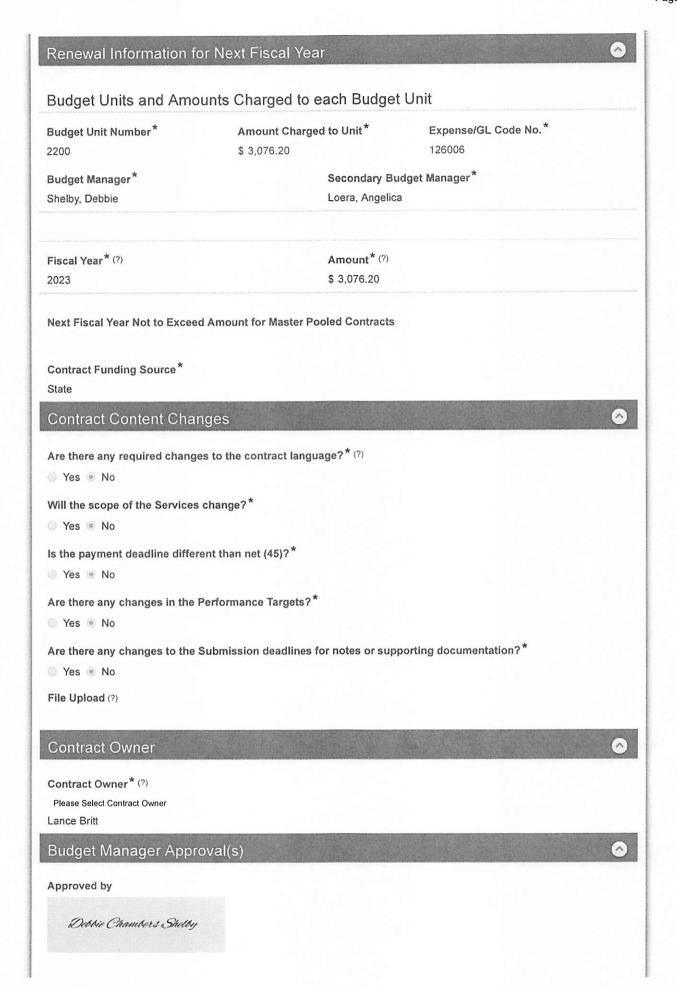
- Yes
- No
- Unknown

Pooled Contract

Renewal of Existing Contract

Contract NTE (Old Text Field	For Reference) (?)
Contract NTE* (?) \$ 3,076.20	
Rate(s)/Rate(s) Description FY23/24 Total NTE \$3,076.20	
Unit(s) Served*	
G/L Code(s) * 126006	
Current Fiscal Year Purchase	Order Number*
CT142517	
Contract Requestor*	
Contract Owner*	
Lance Britt	
File Upload (?)	
	Fiscal Year Performance
	ant performance deficiencies within the current fiscal year?*
Were Services delivered as s	pecified in the contract?*
Yes No	
Did Contractor perform dutie	s 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 in	nvoices submitted in a timely manner?* (?)
● Yes ○ No	
Did Contractor provide adequates Agency?* (?)	uate or proper supporting documentation of time spent rendering services for the
Yes      No	
Did Contractor render service	es consistent with Agency policy and procedures?* (?)
Yes  No	
Maintained legally required s	tandards for certification, licensure, and/or training?* (?)
Yes No	
Renewal Determination	on 📀
Is the contract being renewed	d for next fiscal year with this Contractor?* (?)

Yes
No



and the second has		
Approved by		
Lance Britt		
Contracts Approval		
		and the state of t
Approve*		
Yes		
No, reject entire submission		
Return for correction		
Approved by *		
	Approval Date*	
Belinda Stude	2/24/2023	
Document Comme		

### HINRE

### **Executive Contract Summary**

OO GENTER (v.) dental Health and 1100	
Contract Section	
Contractor*	
Harris County Resources for Children and Adults	
Contract ID #*	
2023-0614	
Presented To*	
Resource Committee	
Full Board	
Date Presented*	
3/21/2023	
Parties* (?)	
Parties (1) Harris County Resources for Children and Adults and <sup>1</sup>	The Harris Center for MH and IDD
	The Harle Collection to the Called
Agenda Item Submitted For: * (?)	
Information Only (Total NTE Amount is Less than \$	
Board Approval (Total NTE Amount is \$100,000.00	+)
Grant Proposal Revenue	
SOW-Change Order-Amendment#	
Other	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
<ul> <li>Interlocal</li> <li>Not Applicable (If there are no funds required)</li> </ul>	☐ Consumer Driven  ☑ Other Revenue
Trot Opphicable (ii there are no fullus required)	Gardi Makeline
Funding Information *	
New Contract  Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
1/31/2023	6/30/2024
If contract is off-cycle, specify the contract term (?)	1
county contract	
Fiscal Year* (?)	Amount* (?)
2023	\$ 1,339,065.00
Fiscal Year* (?)	Amount* (?)
2024	\$ 1,673,832.00

Funding Source*	
Federal Grant	
* (0)	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description	on of Services Being Provided * (?)
Provide crisis respite services to youth betwee	
diverted from juvenile detention center to creat	e a normalized environment, provide a venue
for biological, psychological and social interver	
fostering community and family reintegration.	
<b>+</b>	
Contract Owner*	
Monalisa Jiles	
Previous History of Contracting with Vendo	or/Contractor*
Yes  No  Unknown	
Tes No Olikilowii	
Please add previous contract dates and wh	at services were provided*
MHF Childrens' Prevention services 3/2022 - 9	
	***************************************
Vendor/Contractor a Historically Underutilize	zed Business (HUB) " (*)
Yes No Unknown	
Community Partnership* (?)	
Yes   No  Unknown	
Specify Name*	
Harris County	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Pers	on 🔿
venden contractor contact i ord	
Name*	
Harris County Resources for Children and Adu	ults
Trains obtains resources for officient and rec	
Address*	
Street Address	
2525 Murworth Drive	
Address Line 2	
City	State / Province / Region
Houston	TX
Postal / Zip Code	Country
77054-1623	US
Phone Number*	
713-394-4000	

Email\* joel.levine@cps.chtx.net **Budget Section** Budget Units and Amounts Charged to each Budget Unit Expense/GL Code No.\* Amount Charged to Unit\* Budget Unit Number\* 540000 6500 \$ 3,012,897.00 Secondary Budget Manager **Budget Manager** Williams-Wesley, Sheenia Adams, Betty Provide Rate and Rate Descriptions if applicable \* (?) Project WBS (Work Breakdown Structure)\* (?) **Submission Date** Requester Name 2/27/2023 Williams-Wesley, Sheenia Budget Manager Approval(s) Approved by **Approval Date** Sheenia Williams-Westey 2/27/2023 Procurement Approval File Upload (?) Approved by Approval Date Sign Contract Owner Approval Approved by Approval Date Monalisa Tiles 3/1/2023 Contracts Approval Approve\* Yes No, reject entire submission Return for correction

Approved by \*

Belinda Studo

Approval Date\*
3/1/2023

### **Executive Contract Summary**

Mental Health and IDD	Emiliar Committee of the Committee of th
Contract Section	<u> </u>
Contractor*	
Harris County by and through Harris County Sheriff's C	Office
Contract ID #*	
2023-0613	
Presented To*	
Resource Committee Full Board	
- Full Board	
Date Presented*	
3/21/2023	
Parties* (?)	
Harris County Sheriff Office and The Harris Center for	Mental Health and IDD
Agenda Item Submitted For: * (?)	100 000 00)
<ul><li>☐ Information Only (Total NTE Amount is Less than \$</li><li>☑ Board Approval (Total NTE Amount is \$100,000.00</li></ul>	
Grant Proposal	,
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source  Request for Qualification
Request for Application Request for Quote	Tag-On
✓ Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
Funding Information *	
New Contract  Amendment	
Contract Term Start Date * (?)	Contract Term End Date * (?)
1/31/2023	6/30/2024
If contract is off-cycle, specify the contract term (?)	
county contract	
Fiscal Year* (?)	Amount* (?)
2023	\$ 286,937.00
Fiscal Year* (?)	Amount* (?)
2024	\$ 358,672.00

Funding Source*	
Federal Grant	
* (2)	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	<ul> <li>Amendment to Existing Contract</li> <li>Service/Maintenance</li> </ul>
Affiliation or Preceptor	☐ IT/Software License Agreement
BAA/DUA	Lease
Pooled Contract	Other
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description	on of Services Being Provided * (?)
New contract funded by HC to expand the Stat post unit. The program will provide mental heal	es' current capacity by 10 beds and a pre-
Jail who are incompetent to stand trial and redu	uce wait time to receive treatment. In addition
the program will provide 24/7 therapy, medicati	
education.	
Contract Owner*	
Monalisa Jiles	
Previous History of Contracting with Vendo	r/Contractor*
Yes      No      Unknown	
Please add previous contract dates and wh	at services were provided*
Original Jail based competency restoration pro	gram provided
the following services: space, detention officer, and physical health needs (9/2021 - 8/2022)	medications
Vendor/Contractor a Historically Underutiliz	and Business (UHD)* (2)
	ted business (nob)
Community Partnership* (?)	
Yes  No Unknown	
Specify Name *	
Harris County	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	on •
Name*	
Harris County Sheriff Office	
Address*	
Street Address	
1001 Preston St	
Address Line 2	
City	State / Province / Region
Houston	TX
Postal / Zip Code	Country
77002-1890	US

Phone Number* 713-274-8704				
Email*				
matthew.mcgarrity@pur.hctx.net				
Budget Section			•	9
Budget Units and Amount	s Charged to e	ach Budget Un	it	
Budget Unit Number*	Amount Charged	I to Unit*	Expense/GL Code No.*	
6207	\$ 645,609.00		540000	
Budget Manager Williams-Wesley, Sheenia		Secondary Budget Jiles, Monalisa	Manager	
autum su et autum ter blen en mente versut is de sid i de de la mente de la composition de la mente della mente della mente de la mente della mente de				
Provide Rate and Rate Description n/a	ns if applicable * (?)			
Project WBS (Work Breakdown St	ructure)* (?)			
n/a				
Requester Name		Submission Date		
Williams-Wesley, Sheenia		3/1/2023		
Budget Manager Approva	ıl(s)	a despite a trade de la companya de		<b>a</b>
Approved by				
0 01 01 01		Approval Date		
Sheenia Williams-Westey		3/1/2023		
Procurement Approval				2
File Upload (?)				
Approved by		Approval Date		
Sign				
Contract Owner Approval				٥
Approved by				
Monalisa Tiles		Approval Date 3/1/2023		
munua (mo				
Contracts Approval				
Approve*				
Yes				
No, reject entire submission				
<ul> <li>Return for correction</li> </ul>				

Approved by\*

Belinda Stude

Approval Date\* 3/1/2023

## EXHIBIT R-6

# March 2023 NEW CONTRACTS UNDER 100k

### SNAPSHOT SUMMARY NEW CONTRACTS LESS THAN \$100,000.00

	CONTRACTORS	PRODUCT/SERVICE DESCRIPTION	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	FY23 NEW CONTRACTS						
	ADMINISTRATION						
1	Norris Conference Centers	Meeting Space	\$1,000.00	3/31/2023	GR	RF Quote	This new agreement will provide meeting space for the Harris Center's Executive Retreat to be held on March 31, 2023.
2		Meeting Space	\$5,000.00	12/9/2023	GR	RF Quote	This new agreement for meeting space for the Harris Center's Executive Retreat held on December 9, 2023.
	CPEP/CRISIS SERVICES						
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES						
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI						
	LEASES						
	MENTAL HEALTH SERVICES			,			

### **Executive Contract Summary**

Contract Section	
Contractor*	
Norris Conference Centers	
Contract ID #*	
New	
Presented To*	
Resource Committee	
Full Board	
Date Presented*	
3/21/2023	
Parties* (?)	
Norris Conference Center and The Harris Center	
Agenda Item Submitted For:* (?)	
✓ Information Only (Total NTE Amount is Less that	an \$100,000.00)
Board Approval (Total NTE Amount is \$100,000	
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
■ Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
12/9/2022	8/31/2023
If contract is off-cycle, specify the contract terr	m (?)
Fiscal Year* (?)	Amount* (?)

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Serv The Harris Center for Mental Health and IDD Executive F	
Contract Owner*	
Carrie Rys	100 miles
Carrie Rys	
Previous History of Contracting with Vendor/Contracting	tor*
Vendor/Contractor a Historically Underutilized Busin	ess (HUB)* (?)
Yes No Unknown	
Community Partnership* (?)	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	A SANCE AND A SANCE OF A SANCE AND A PROPERTY OF A SANCE AND A SAN
Name*	
Norris Conference Centers	
Address*	
Street Address	
816 Town and Country Boulevard	
Address Line 2	
City	State / Province / Region
Houston	TX
Postal / Zip Code	Country
77024	US
Phone Number*	
7135900950	
Email*	
s.cousins@NorrisCenters.com	
Budget Section	<u> </u>
Budget Units and Amounts Charged to	each Budget Unit

**Budget Unit Number\*** Amount Charged to Unit\* Expense/GL Code No.\* 1101 \$ 5,000.00 549005 **Budget Manager** Secondary Budget Manager Brown, Erica Campbell, Ricardo Provide Rate and Rate Descriptions if applicable \* (?) n/a Project WBS (Work Breakdown Structure)\* (?) **Submission Date** Requester Name 11/4/2022 Franco, Veronica Budget Manager Approval(s) Approved by Approval Date Exica Brown 11/4/2022 Procurement Approval File Upload (?) Approved by Approval Date Sign Contract Owner Approval Approved by **Approval Date** Carrie Rys 2/28/2023 Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Belinda Stude 2/28/2023

### **Executive Contract Summary**

Mental Health and IDD				
Contract Section	•			
Contractor*				
Norris Conference Center				
Contract ID #*				
New				
Presented To *				
Resource Committee				
Full Board				
Date Presented*				
3/21/2023				
Parties* (?)				
Norris Conference Center and The Harris Center for Me	ental Health and IDD			
Agenda Item Submitted For:* (?)				
	(00,000,00)			
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 Proposal			
Competitive Bid Request for Proposal	Sole Source			
Request for Application	Request for Qualification			
Request for Quote	Tag-On			
<ul> <li>Interlocal</li> <li>Not Applicable (If there are no funds required)</li> </ul>	<ul><li>☐ Consumer Driven</li><li>✓ Other Other</li></ul>			
Not Applicable (if there are no funds required)	Sale.			
Funding Information*				
New Contract				
Contract Term Start Date * (?)	Contract Term End Date * (?)			
3/31/2023	8/31/2023			
If contract is off-cycle, specify the contract term (?)				
Fiscal Year* (?)	Amount* (?)			
2023	\$ 1,000.00			
Funding Source*				

General Revenue (GR)

Contract Description / Type* (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other State of the
Justification/Purpose of Contract/Description	of Services Being Provided* (?)
The Harris Center for Mental Health and IDD Exe	
+	
Contract Owner*	
Carrie Rys	
Previous History of Contracting with Vendor/9	Contractor*
Yes       No       Unknown	
Diagraphic and annuity and substantial dates and substantial	continue ware provided*
Please add previous contract dates and what	services were provided
12/9/22	
Vendor/Contractor a Historically Underutilize	d Business (HUB)* (?)
Yes       No       Unknown	
Community Partnership* (?)	
Yes No Unknown	
Supporting Documentation Upload (?)	
Norris Center -Executive Retreat March 31 2023	.pdf 1.22MB
Vendor/Contractor Contact Persor	
Name*	
Norris Conference Center	
North Contention Center	
Address*	
Street Address	
816 Town and Country Boulevard	
Address Line 2	
City	State / Province / Region
Houston	TX
Postal / Zip Code	Country
77024	US
Dhana Numban*	
Phone Number*	
Phone Number* 7135900950	
7135900950	
7135900950  Email* S.cousins@NorrisCenter.com	
7135900950 Email*	0
7135900950  Email* S.cousins@NorrisCenter.com	
7135900950  Email* S.cousins@NorrisCenter.com	ed to each Budget Unit

Expense/GL Code No.\* Amount Charged to Unit\* **Budget Unit Number\*** 549005 \$ 1,000.00 1101 Secondary Budget Manager **Budget Manager** Campbell, Ricardo Brown, Erica Provide Rate and Rate Descriptions if applicable \* (?) Project WBS (Work Breakdown Structure)\* (?) **Submission Date** Requester Name 1/27/2023 Franco, Veronica Budget Manager Approval(s) Approved by **Approval Date** Exica Brown 1/31/2023 Procurement Approval File Upload (?) Approved by Approval Date Sign Contract Owner Approval Approved by Approval Date Carrie Reps 2/28/2023 Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Belinda Stude 2/28/2023

### EXHIBIT R-7

## March 2023 RENEWALS UNDER 100k

SNAPSHOT SUMMARY CONTRACT RENEWALS LESS THAN \$100,000.00

	PRODUCT/SERVICE	FY2022	FY2023				
CONTRACTORS	DESCRIPTION	NTE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
FY23 CONTRACT RENEWALS							
ADMINISTRATION							
1 Set Solutions, Inc.	Training and Support Services	\$79,001.10	\$79,001.10	05/23/2023-05/24/2024	GR	Competitive Bid Tag-On	Annual renewal of Illumio Core Visibility and Segmentation SaaS. Year 2 of a 3 year quote = \$79,001.10 for FY23.
CPEP/CRISIS SERVICES							
The University of Texas Health Science Center at Houston on behalf of its Department of Psychiatry and Behavioral Sciences	Medication-Assisted Treatment ("MAT") Services For the Detox Services Program	\$49,800.00	\$49,800.00	01/01/2023-12/31/2023	State Grant	N/A	Annual renewal of MAT services provided for the Detox Services Program.
Colonicos	CCIVIOCS 1 TOGICITI	<b>\$10,000.00</b>	0.10,000.100				
FORENSICS							
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES	laging a						
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI							
2.07.01.01.01.01.01.01.01.01.01.01.01.01.01.							
LEASES							
MENTAL HEALTH SERVICES							

### Annual Renewal Evaluation

Memal Health and 1111	
Current Fiscal Year Contract Information	on The second
Current Fiscal Year	
2023	
Contract ID#*	
2022-0376	
Contractor Name*	
Set Solutions, Inc. (Illumio)	
Service Provided* (?)	
Illumio Core Visibility and Segmentation SaaS	
Renewal Term Start Date*	Renewal Term End Date*
5/23/2023	5/22/2024
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	
7 - W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-	
Procurement Method(s)*	
Check all that Apply	Compatitive Proposal
Competitive Bid	<ul><li>Competitive Proposal</li><li>Sole Source</li></ul>
Request for Proposal	Request for Qualification
Request for Application Request for Quote	✓ Tag-On
Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
Contract Description / Type	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
■ BAA/DUA	
Pooled Contract	Lease
Renewal of Existing Contract	Other
Vendor/Contractor a Historically Underutilized Bus	siness (HUB) (?)
yes	
No     Unknown	
Unknown	

Contract NTE (Old Text Field For Reference) (?)
Contract NTE* (?) \$ 79,001.10
Rate(s)/Rate(s) Description  Year 2 of a 3 year quote = \$79,001.10
Unit(s) Served* IT21_1147_13
G/L Code(s)* 900022
Current Fiscal Year Purchase Order Number* FY22 PO CT142021
Contract Requestor* Shawnti Boswell
Contract Owner*  Mustafa Cochinwala
File Upload (?) [http][S9C60XNC0D18W2][][v][Set Solutions - ID 2022-0376 -] (5).pdf 1.41MB
Evaluation of Current Fiscal Year Performance
Have there been any significant performance deficiencies within the current fiscal year?*  See No.
Were Services delivered as specified in the contract?*
Did Contractor perform duties in a manner consistent with standards of the profession?*   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 Maintained legally required standards for certification, licensure, and/or training?* (?)
● Yes ○ No
Renewal Determination

Renewal Information f	or Next Fiscal Year	
Dudget Units and Amer	ounts Charged to each Budget	Unit
	ounts Charged to each Budget	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1147	\$ 5,156.10	900022
Budget Manager*		dget Manager*
Brown, Erica	Campbell, Rica	rdo
Fiscal Year* (?)	Amount* (?)	
2023	\$ 79,001.10	
General Revenue (GR) Contract Content Cha		
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes  No	es to the contract language?* (?)	
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes No  Will the scope of the Services	es to the contract language?* (?)	
Contract Funding Source* General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes No  Will the scope of the Services  Yes No  Is the payment deadline differ	es to the contract language?* (?) s change?*	
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes No  Will the scope of the Services  Yes No	es to the contract language?* (?) s change?*	
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes  No  Will the scope of the Services  Yes  No  Is the payment deadline diffe	res to the contract language?* (?) s change?* rent than net (45)?*	
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes No  Will the scope of the Services  Yes No  Is the payment deadline difference of the Services  Yes No  Are there any changes in the	res to the contract language?* (?) s change?* rent than net (45)?*	
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes  No  Will the scope of the Services  Yes  No  Is the payment deadline differ  Yes  No  Are there any changes in the	res to the contract language?* (?) s change?* rent than net (45)?*	porting documentation?*
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes No  Will the scope of the Services  Yes No  Is the payment deadline difference of the services o	es to the contract language?* (?) s change?* rent than net (45)?* Performance Targets?*	porting documentation?*
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes No  Will the scope of the Services  Yes No  Is the payment deadline diffe  Yes No  Are there any changes in the  Yes No  Are there any changes to the	es to the contract language?* (?) s change?* rent than net (45)?* Performance Targets?*	porting documentation?*
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes No  Will the scope of the Services  Yes No  Is the payment deadline diffe  Yes No  Are there any changes in the  Yes No  Are there any changes to the  Yes No	es to the contract language?* (?) s change?* rent than net (45)?* Performance Targets?*	porting documentation?*
General Revenue (GR)  Contract Content Cha  Are there any required chang  Yes No  Will the scope of the Services  Yes No  Is the payment deadline differ  Yes No  Are there any changes in the  Yes No  Are there any changes to the  Yes No  File Upload (?)	es to the contract language?* (?) s change?* rent than net (45)?* Performance Targets?*	porting documentation?*
General Revenue (GR)  Contract Content Cha  Are there any required chang Yes No  Will the scope of the Services Yes No  Is the payment deadline diffe Yes No  Are there any changes in the Yes No  Are there any changes to the Yes No  File Upload (?)	es to the contract language?* (?) s change?* rent than net (45)?* Performance Targets?*	porting documentation?*

Approved by		
Ekica Brown		
Contract Owner Approval		٥
Approved by		
Mustafa Cochinwala		
Contracts Approval		
Contracts Approval		
Approve*  Yes No, reject entire submission		
Approve*  Yes		
Approve*  Yes  No, reject entire submission  Return for correction		
Approve*  Yes No, reject entire submission	Approval Date*	
Approve*  Yes  No, reject entire submission  Return for correction	Approval Date* 2/16/2023	
Approve*  Yes  No, reject entire submission Return for correction  Approved by *		

### Annual Renewal Evaluation

Current Fiscal Year Contract Informati	ion	•
Current Fiscal Year		
2023		
Contract ID#*		
2021-0292		
Contractor Name*		
The University of Texas Health Science Center at Hou	eston on behalf of its Department of	
Psychiatry and Behavioral Sciences	Stoff on benan of its bepartment of	
Service Provided* (?)		
Medication-Assisted Treatment ("MAT") Services for the	ne Detox Services Program	
Renewal Term Start Date*	Renewal Term End Date*	
1/1/2023	12/31/2023	
Term for Off-Cycle Only (For Reference Only)		
Agenda Item Submitted For: (?)		
✓ Information Only (Total NTE Amount is Less than \$	3100 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	Competitive Proposal	
Request for Proposal	Sole Source	
Request for Application	Request for Qualification	
Request for Quote	Tag-On	
Interlocal	Consumer Driven	
Not Applicable (If there are no funds required)	Other	
Contract Description / Type		
Personal/Professional Services	Consultant	
Consumer Driven Contract	New Contract/Agreement	
Memorandum of Understanding	Amendment to Existing Contract	
Affiliation or Preceptor	Service/Maintenance	
BAA/DUA	IT/Software License Agreement	
Pooled Contract	Lease	
Renewal of Existing Contract	Other Other	
Vendor/Contractor a Historically Underutilized Bus	siness (HUB) (?)	
Yes		
No		
Unknown		

Contract NTE (Old Text Field For Reference) (?)	
Contract NTE* (?)	
\$ 49,800.00	
Rate(s)/Rate(s) Description	
Fee Per Service: \$412.00 - New Patient Appointment \$266.00 -Follow Up Appointment	
Unit(s) Served* 9267	
G/L Code(s)* 542001	
Current Fiscal Year Purchase Order Number*	
CT141951	
Contract Requestor*	
Priscilla Ramirez	
Contract Owner*	
Kim Kornmayer	
File Upload (?)	
Evaluation of Current Fiscal Year Performance	<u> </u>
Have there been any significant performance deficiencies within the current fiscal year?*	A comment
⊚ 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 rend Agency?* (?)	lering services for the
⊚ 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	<u>(A)</u>

Renewal Information fo	or Next Fiscal Year	
Budget Units and Amo	unts Charged to each Budge	t Unit
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9267	\$ 24,900.00	542001
Budget Manager*		dget Manager*
Ramirez, Priscilla	Puente, Giova	nni
Fiscal Year* (?)	Amount* (?)	
2023	\$ 24,900.00	
Fiscal Year* (?)	Amount* (?)	
2024	\$ 24,900.00	*
State  Contract Content Char  Are there any required change	nges es to the contract language?* (?)	
State  Contract Content Char  Are there any required change  Yes No  Will the scope of the Services	es to the contract language?* (?)	
State  Contract Content Char  Are there any required change  Yes No  Will the scope of the Services	es to the contract language?* (?)	
State  Contract Content Char  Are there any required change  Yes No  Will the scope of the Services  Yes No  Is the payment deadline difference	es to the contract language?* (?) change?*	
State  Contract Content Char  Are there any required change  Yes No  Will the scope of the Services  Yes No  Is the payment deadline difference  Yes No	es to the contract language?* (?) change?* ent than net (45)?*	
Contract Content Char Are there any required change Yes No Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F	es to the contract language?* (?) change?* ent than net (45)?*	
Contract Content Char Are there any required change Yes No Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the Form Yes No Are there any changes to the Services	es to the contract language?* (?) change?* ent than net (45)?*	porting documentation?*
Contract Content Char Are there any required change Yes No Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F Yes No Are there any changes to the S Yes No	es to the contract language?* (?) change?* ent than net (45)?* Performance Targets?*	porting documentation?*
Yes No Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F	es to the contract language?* (?) change?* ent than net (45)?* Performance Targets?*	porting documentation?*
Contract Content Char Are there any required change Yes No Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F Yes No Are there any changes to the S Yes No File Upload (?)	es to the contract language?* (?) change?* ent than net (45)?* Performance Targets?*	porting documentation?*
Contract Content Char Are there any required change Yes No Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F Yes No Are there any changes to the S Yes No	es to the contract language?* (?) change?* ent than net (45)?* Performance Targets?*	porting documentation?*
Contract Content Char Are there any required change Yes No Will the scope of the Services Yes No Is the payment deadline differed Yes No Are there any changes in the F Yes No Are there any changes to the S Yes No File Upload (?)	es to the contract language?* (?) change?* ent than net (45)?* Performance Targets?*	porting documentation?*

Approved by		
Priscilla M. Ramirez		
Contract Owner Approval		•
Approved by		
Kim Kop NMAYER		
Contracts Approval		
Approve*		
Yes		
<ul> <li>No, reject entire submission</li> </ul>		
<ul> <li>Return for correction</li> </ul>		
Approved by *		
Approved by	Approval Date*	
Belinda Stude	3/2/2023	
wanne Jame		

## EXHIBIT R-8

## MARCH 2023 AMENDMENTS UNDER 100k

### SNAPSHOT SUMMARY CONTRACT AMENDMENTS LESS THAN \$100,000.00

CONTRACTORS	PRODUCT/SERVICE DESCRIPTION	PREVIOUS AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
FY23 AMENDMENTS								
ADMINISTRATION								
CPEP/CRISIS SERVICES								
P-Temporary Housing for Jail  Diversion	Master Pool: Nine (9) Vendors Provide Temporary Housing Services for Jail Diversion	\$19,728.00	\$25,548.00	\$48,276.00	09/01/2022-08/31/2023	County	Request for Application	This Amendment is to increase the not to exceed amount to cover projected expenses through the end of FY23 due to an uptick in the Jail Diversion program and an increased need for residential support.
FORENSICS								
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								
Modern Psychological & Allied Services, PLLC	Psychological Testing and Evaluation Services	\$16,100.00	\$25,200.00	\$41,300.00	09/01/2022-08/31/2023	State	Consumer Driven	Amendment to increase the NTE for increase i services needed for Eligibility/Intake to assist with decreasing the DID backlog. HHSC has provided additional funding to The Harris Center to allocate toward GR services.
INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI								
INTERLOCALS								
LEASES								
MENTAL HEALTH SERVICES								

### SNAPSHOT SUMMARY CONTRACT AMENDMENTS LESS THAN \$100,000.00

	CONTRACTORS	PRODUCT/SERVICE DESCRIPTION	PREVIOUS AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
3	The Beck Institute for Cognitive Behavior Therapy	Training Services	\$14,175.00	\$5,175.00	\$19,350.00	04/27/22-08/31/2023		SCI Grant Requirement	Amendment needed to extend the term and increase the NTE to provide CBT-SP training to The Harris Center and our partners within Region 1 in line with the Zero Suicide/Suicide Care Initiatives grant. They will provide a three (3) day virtual course that will certify providers in CBT therapy.
				Y					
									L 144 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
					SUCHES OF A SHARPINE		30.00		

### Minnes Executive Contract Summary

Contract Section		
Contractor*		
P-Residential Only (Jail Diversion)		
Contract ID #*		
7256		
7256		
Presented To*		
Resource Committee		
Full Board		
Date Presented*		
3/21/2023		
Parties* (?)		
	vendors	
The Harris Center for Mental Health & IDD and pooled	venuora	
Agenda Item Submitted For: * (?)		
Information Only (Total NTE Amount is Less than \$1		
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	Competitive Proposal	
Request for Proposal	Sole Source	
Request for Application	Request for Qualification	
Request for Quote	Tag-On	
Interlocal  Not Applicable (If there are no funds required)	<ul><li>✓ Consumer Driven</li><li>Other</li></ul>	
Not Applicable (If there are no funds required)	El Citici	
Funding Information*		
New Contract  Amendment		
Contract Term Start Date * (?)	Contract Term End Date * (?)	
9/1/2022	8/31/2023	
If contract is off-cycle, specify the contract term (?)		
Current Contract Amount*		
\$ 19,728.00		
Increase Not to Exceed*		
moreage net to Execut		
\$ 28,548.00		

Fiscal Year* (?)	Amount* (?)
2023	\$ 48,276.00
Funding Source*	
County	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description	n of Services Being Provided* (?)
Program is requesting to increase the NTE close	
year end (08/31/23). At the end of January, the	
funds on the purchase order. There has been a	
Jail Diversion program leading to a higher case	load within the Aftercare department. More
than 80% of the consumers served need ongoin	g residential supports, thus program is
requesting to add \$28,548 to the master pool co	intract.
Contract Owner*	
Kim Kornmayer	
Previous History of Contracting with Vendor	/Contractor*
Yes No Unknown	
Please add previous contract dates and wha	t services were provided*
Current FY23 CT142294	
Vendor/Contractor a Historically Underutilize	ed Business (HUB)* (?)
Yes No Dunknown	
Community Partnership* (?)	
Yes No  Unknown	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Perso	n
Name*	
NA	
Address*	
Street Address	
NA	
Address Line 2	
City	State / Province / Region
NA	NA
Postal / Zip Code	Country
The second secon	

Phone Number*			
NA			
Email*			
na@notanemailaddress.com			
Budget Section		December of AMAL CONTRACTOR	0
Budget Units and Amounts	Charged to eac	ch Budget Uni	it
Budget Unit Number*	Amount Charged to	Unit*	Expense/GL Code No.*
9405	\$ 28,548.00		543004
Budget Manager	S	econdary Budget	Manager
Ramirez, Priscilla	P	uente, Giovanni	
Provide Rate and Rate Descriptions As outlined per RFA  Project WBS (Work Breakdown Strun/a			
Requester Name	s	ubmission Date	
Ramirez, Priscilla	2,	/17/2023	
Budget Manager Approval	(s)		<u> </u>
Approved by			
Priscitta M. Ramirez		pproval Date /20/2023	
Contract Owner Approval		distantant salama di anticono di anticono	<b>⊘</b>
Approved by			
hi haka a ak		pproval Date	
Kin KOD NMAYED	2	/20/2023	
Contracts Approval	nanonia mana ana ana ana ana ana ana ana ana a		
Approve*  Yes  No, reject entire submission  Return for correction			
Approved by *			
Belinda Stude		pproval Date* /20/2023	

### **Executive Contract Summary**

Contract Section	•
Contractor*  Modern Psychological & Allied Services, PLLC	
Contract ID #* 7865	
Presented To *  Resource Committee  Full Board	
Date Presented* 3/21/2023	
Parties* (?) Modern Psychological & Allied Services, PLLC and The	Harris Center for Mental Health and IDD
Agenda Item Submitted For: * (?)  Information Only (Total NTE Amount is Less than \$1  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 * (?) 9/21/2022	Contract Term End Date* (?) 8/31/2023
If contract is off-cycle, specify the contract term (?) N/A	
Current Contract Amount* \$ 16,100.00	
Increase Not to Exceed* \$ 25,200.00	
Revised Total Not to Exceed (NTE)* \$ 41,300.00	

Fiscal Year* (?)	Amount* (?)
2023	\$ 41,300.00
Funding Source*	
State	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description	on of Services Being Provided* (?)
The Harris Center has received funding from H	
backlog.	
The request is to increase PO/CT 142525 by \$	525,200.00 for FY23 (09/01/23 - 08/31/23) to
assist with the DID backlog. The current NTE a	
amount will be \$41,300.00 for PO/CT 142252	, 3355-540503.
Service description:	
Contractor shall provide assistance by complet	ting psychological
testing/evaluations on the Agency's Consumer	rs for determination
of IDD eligibility/ intake.	
Contract Owner*	
Dr. Evanthe Collins	
Previous History of Contracting with Vendo	or/Contractor*
Yes No Unknown	
Please add previous contract dates and wh	at services were provided*
09/01/21 to present. Psychological testing/eval	luations
Vendor/Contractor a Historically Underutilia	zed Business (HUB)* (?)
Yes No Unknown	
Community Partnership* (?)	
Yes  No  Unknown	
Specify Name*	
Modern Psychological and Allied Services, PLI	LC
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Person	on
*	
Name*	
Devon Superville, PhD	

Address\* Street Address 6201 Bonhomme Road, Suite 178 N Address Line 2 State / Province / Region City Texas Houston Country Postal / Zip Code **United States** 77036 Phone Number\* 9406326844 Email\* dr.superville@modpsych.com **Budget Section** Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* **Budget Unit Number\*** 540503 3355 \$ 25,200.00 Secondary Budget Manager **Budget Manager** Adams-Austin, Mamie Kerlegon, Charles Provide Rate and Rate Descriptions if applicable \* (?) \$350.00 per evaluation Project WBS (Work Breakdown Structure)\* (?) N/A Requester Name **Submission Date** 2/23/2023 Childs, Margo Budget Manager Approval(s) Approved by **Approval Date** Mamie Adams 2/24/2023 Contract Owner Approval Approved by **Approval Date** Evanthe Collins 2/24/2023 Contracts Approval

### Approve\*

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

Approved by \*

Belinda Stude

Approval Date\* 2/24/2023

### **Executive Contract Summary**

Contract Section	
Contractor*	
Beck Institute for Cognitive Behavior Therapy	
Contract ID #*	
2022-0345	
Presented To*	
Resource Committee	
Full Board	
Date Presented*	
3/1/2023	
Parties* (?)	
The Harris Center for Mental Health and IDD and The	Beck Institute for Cognitive Behavior Therapy
Agenda Item Submitted For:* (?)	
Information Only (Total NTE Amount is Less than \$*	100,000.00)
Board Approval (Total NTE Amount is \$100,000.00-	<b>+</b> )
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
Interlocal Not Applicable (If there are no funds required)	<ul> <li>Consumer Driven</li> <li>Other SCI Grant Requirement</li> </ul>
Funding Information *	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
4/1/2023	8/31/2023
If contract is off-cycle, specify the contract term (?)	
Current Contract Amount*	
\$ 14,175.00	
Increase Not to Exceed *	
\$ 5,175.00	
Revised Total Not to Exceed (NTE)*	
\$ 19,350.00	

Fiscal Year* (?)	Amount*(?)
2023	\$ 19,350.00
Funding Source*	
State Grant	
Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other State of the
	****
Justification/Purpose of Contract/Description	
The Beck Institute will provide CBT-SP training t Region 1 in line with the Zero Suicide/Suicide Ca	
day virtual course that will certify providers in CE	
	or therapy.
Contract Owner*	
Trudy Leidich	
Previous History of Contracting with Vendor	/Contractor*
Yes       No       Unknown	
Please add previous contract dates and wha	t corridge were provided*
	t services were provided
July 2022-August 2022: CBT-SP Therapy	
Vendor/Contractor a Historically Underutilize	ed Business (HUB)* (?)
Yes No Unknown	
Community Partnership* (?)	
Yes No Unknown	
Supporting Decumentation Unload (2)	
Supporting Documentation Upload (?)	
Vendor/Contractor Contact Perso	n
Name*	
Eve Mathieu	
Address*	
Street Address	
One Belmont Avenue	
Address Line 2	
City	State / Province / Region
Bala Cynwyd	PA
Destal / Zin Code	Country
	Country
	Country USA
Postal / Zip Code 19004 Phone Number*	

Email\* emathieu@beckinstitute.org **Budget Section** Budget Units and Amounts Charged to each Budget Unit Amount Charged to Unit\* Expense/GL Code No.\* Budget Unit Number\* \$ 19,350.00 542000 1182 Secondary Budget Manager **Budget Manager** Brown, Erica Campbell, Ricardo Provide Rate and Rate Descriptions if applicable \* (?) 3 day virtual CBT-SP course: \$6000/day plus 7.5% admin Costs cover up to 50 participants Project WBS (Work Breakdown Structure)\* (?) N/A **Submission Date** Requester Name 2/24/2023 Bittner, Tiffany Budget Manager Approval(s) Approved by **Approval Date** Ricardo Campbell 2/24/2023 Contract Owner Approval Approved by Approval Date Gertrude Leidich 2/24/2023 Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Belinda Stude 2/24/2023

## EXHIBIT R-9

# MARCH 2023 Affiliation Agreements, Grants, MOU's and Revenues Information Only

### SNAPSHOT SUMMARY AFFILIATION, GRANTS, MOU and REVENUE AGREEMENTS

	CONTRACTORS	PRODUCT/SERVICE DESCRIPTION	ACTION TYPE	CONTRACT PERIOD	FUNDING	COMMENTS
	FY23 CONTRACTS					
	AFFILIATION AGREEMENTS					
1	Florida State University College of Social Work GRANTS	Clinical Field Placements	New	03/01/2023-08/31/2026	GR	This new Affiliation Agreement will allow students enrolled at Florida State University College of Social Work to complete clinical field placements as part of their degree requirements.
	MOU					
2	Association for the Advancement of Mexican Americans (AAMA)	Collaboration to Continuum of Care for (SUDOP) and Mental Health Services	MOU	03/01/2023-08/31/2027	GR	This Agreement will allow a continuum of care for Harris Center's Substance Use Disorder Outreach Program (SUDOP) Consumer in collaborations with the AAMA to provide OSAR services. The collaboration supports opportunities for increase retention through linkage to treatment for Substance Use Disorder (SUD) as well.
3	The Cenikor Foundation	Collaboration to Continuum of Care for (SUDOP) and Mental Health Services	MOU	03/01/2023-08/31/2027	GR	This Agreement will support a continuum of care for Harris Center's Substance Use Disorder Outreach Program (SUDOP) Consumers through a collaboration with the Cenikor Foundation. The collaboration will further support opportunities for retention through linkage to treatment for Substance Use Disorders (SUD).
4	Center for Recovery & Wellness Resources	Collaboration to Continuum of Care for (SUDOP) and Mental Health Services	MOU	03/01/2023-08/31/2027	GR	This Agreement will support a continuum of care for Harris Center's Substance Use Disorder Outreach Program (SUDOP) in providing outreach, engagement, referral, and the opportunity for retention through linkage to treatment for Substance Use Disorder (SUD).
	REVENUE					
5	Waymaker	Individualized Skills and Socialization Services (ISS)	New Revenue	03/01/2023-08/31/2024	State	This new Revenue Agreement for the purpose of providing Individualized Skills and Socialization (ISS) to consumers. ISS is a new service which replaces current Day Habilitation services as required by HHSC.
					,	
-						

### **Executive Contract Summary**

Mental Ficality and 1010	
Contract Section	
Contractor*	
Florida State University College of Social Work	
Contract ID #*	
2023-0638	
Presented To*	
Resource Committee	
Full Board	
Date Presented*	
2/13/2023	
Parties* (?)	
The Harris Center for Mental Health And IDD & Florida	a State University College of Social Work
Agenda Item Submitted For: * (?)	100 000 00)
Grant Proposal	
Revenue	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
<ul> <li>☐ Interlocal</li> <li>☑ Not Applicable (If there are no funds required)</li> </ul>	Consumer Driven  Other
Not Applicable (if there are no famous requires)	
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date* (?)
3/1/2023	2/28/2029
If contract is off-cycle, specify the contract term (?	
Fiscal Year* (?)	Amount* (?)
2023	\$ 0.00
Funding Source*	

General Revenue (GR)

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
Consumer Driven Contract	✓ New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
This agreement will allow students enroll Work to complete field placements as pa	gh education while adhering to agency policy and
Yes No Winknown	
Supporting Documentation Upload (?)	
Field2PersonalStatement_2.docx	13.45KB
Vendor/Contractor Contact F  Name*  Rosalyn B. Deckerhoff	Person
Name* Rosalyn B. Deckerhoff	Person
Name* Rosalyn B. Deckerhoff Address*	Person
Name* Rosalyn B. Deckerhoff  Address* Street Address	Person
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570	Person
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570 Address Line 2	
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570 Address Line 2 City	State / Province / Region
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570 Address Line 2 City Tallahassee	State / Province / Region FL
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570 Address Line 2 City	State / Province / Region FL Country
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570 Address Line 2 City Tallahassee	State / Province / Region FL
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570 Address Line 2 City Tallahassee Postal / Zip Code	State / Province / Region FL Country
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570 Address Line 2 City Tallahassee Postal / Zip Code 32306  Phone Number*	State / Province / Region FL Country
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570 Address Line 2 City Tallahassee Postal / Zip Code 32306  Phone Number* 850-644-9585  Email*	State / Province / Region FL Country
Name* Rosalyn B. Deckerhoff  Address* Street Address 296 Champions Way P.O. Box 3062570 Address Line 2 City Tallahassee Postal / Zip Code 32306  Phone Number* 850-644-9585	State / Province / Region FL Country

Expense/GL Code No.\* **Budget Unit Number\*** Amount Charged to Unit\* \$ 0.00 N/A 1108 Secondary Budget Manager **Budget Manager** Campbell, Ricardo Brown, Erica Provide Rate and Rate Descriptions if applicable \* (?) N/A Project WBS (Work Breakdown Structure) \* (?) **Submission Date** Requester Name 2/13/2023 Williams, JeDonne Budget Manager Approval(s) Approved by **Approval Date** Exica Brown 2/13/2023 Procurement Approval File Upload (?) Approval Date Approved by Sign **Contract Owner Approval** Approved by Approval Date Minfa Escobar 2/15/2023 Contracts Approval Approve\* Yes No, reject entire submission Return for correction Approved by \* Approval Date\* Belinda Stude 2/16/2023

General Revenue (GR)

### **Executive Contract Summary**

Mental Fealth and IDD	
Contract Section	
Contractor*	
Association for the Advancement of Mexican Americans	s (AAMA)
Contract ID #*	
2023-0626	
Presented To *	
Resource Committee	
Full Board	
Date Presented*	
3/21/2023	
Parties* (?)	
Association for the Advancement of Mexican Americans IDD	s (AAMA) and The Harris Center for Mental Health and
Agenda Item Submitted For: * (?)	
☑ Information Only (Total NTE Amount is Less than \$1	00,000.00)
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	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
■ Interlocal	Consumer Driven
Not Applicable (If there are no funds required)	Other
Funding Information *	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
3/1/2023	2/29/2024
If contract is off-cycle, specify the contract term (?)	
a solidate to one syste, speedy the contract term (.)	
Fiscal Year* (?)	Amount*(?)
2023	\$ 0.00
Funding Source*	

Contract Description / Type * (?)	
Personal/Professional Services	■ Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
■ BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Serv This agreement will allow Substance Use Disorder Outres (SUDOP) to collaborate with AAMA for substance use dis	ach Program order (SUD) and Mental Health
with the Harris Center. The SUD clients are acquired from and given the opportunity for retention through linkage to and Medical Services to Texas residents living with Co-O all Mexican American clients with SUD priority access to that is tailored to their level of care.	treatment for SUD, Mental Health, ccurring Disorders. Also it allows
Program Director: Geoffrey Ball	
Contract Owner*	
Kim Kornmayer	
Previous History of Contracting with Vendor/Contract	tor*
Yes       No       Unknown	
VandariO antoni da a Historia de Hadamailia d Busina	AND (ALID)* (2)
Vendor/Contractor a Historically Underutilized Busine	ass (nub) (i)
Community Partnership * (?)	
Yes  No Unknown	
Specify Name*	
Association for the Advancement of Mexican Americans (AAMA)	
Supporting Documentation Upload (?)	
Supporting Documentation Opioact (1)	
Vendor/Contractor Contact Person	
Name*	
Patrick Rocha, Director of Prevention & Counseling	
Address*	
Street Address	
204 Clifton St.	
Address Line 2	
City	State / Province / Region
Houston	TX
	Country
Postal / Zip Code	US
77011	
Phone Number*	
713-926-9491	

Email* procha@aama.org					
Budget Section					٥
Budget Units and Amount	s Charged to e	ach Budget Un	it		
Budget Unit Number* 9263	Amount Charged \$ 0.00	I to Unit*	Expense/GL 0	Code No.*	
Budget Manager Oshman, Jodel		Secondary Budget Macleod, Ann	Manager		
Provide Rate and Rate Description	ns if applicable * (?)				
Project WBS (Work Breakdown Str	ructure)* (?)				
Requester Name Singh, Patricia		Submission Date 2/6/2023			
Budget Manager Approva	ıl(s)				•
Approved by		Approval Date			
Todel Oshman		2/6/2023			
Procurement Approval					•
File Upload (?)					
Approved by		Approval Date			
Contract Owner Approval		application of the state of the	an and security and an area.	maning a more named and	6
Approved by  Fin FOR NMAYER		Approval Date 2/8/2023			
Contracts Approval					
Approve*  Yes  No, reject entire submission  Return for correction					

Approved by \*

Belinda Stude

**Approval Date\*** 2/10/2023

### Contract Term End Date \* (?) Contract Term Start Date \* (?) 2/29/2024 3/1/2023 If contract is off-cycle, specify the contract term (?) Amount\* (?) Fiscal Year\* (?) \$ 0.00 2023 Funding Source\* General Revenue (GR)

Contract Description / Type (7)	
Personal/Professional Services	Consultant
Consumer Driven Contract	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
BAA/DUA	☐ IT/Software License Agreement
Pooled Contract	Other
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Se	rvices Being Provided* (?)
This agreement will allow SUDOP to collaborate with Ti	
Mental Health with the Harris Center. The SUD clients a	
engagement, referral, and given the opportunity for rete	
for SUD, Mental Health, Residential Care to Texas residential	
Disorders. Also it allows all MAT clients with OUD priori for treatment that is tailored to their level of care.	ty access to treatment with Centrol
Website: https://www.cenikor.org/	
To some management of	
Program Director: Geoffrey Ball	
Contract Owner*	
Kim Kornmayer	
Previous History of Contracting with Vendor/Contra	peter*
	actor
Vendor/Contractor a Historically Underutilized Busi	iness (HUB)* (?)
Yes No Unknown	
Community Partnership* (?)	
Yes  No Unknown	
Specify Name*	
The Cenikor Foundation	
Supporting Documentation Upload (?)	
ouppointing position and opinion (	
Vendor/Contractor Contact Person	<u> </u>
Name*	
Bill Bailey, President, CEO	
Bill Balley, Fresident, OLO	
Address*	
Street Address	
11931 Wickchester Lane	
Address Line 2	
City	State / Province / Region
Houston	TX
Postal / Zip Code	Country
77043-4574	US
Phone Number*	
817-812-6624	
017-012-0024	

Email*					
Kreaves@cenikor.org					
Budget Section				eranostania canti estentiniministe cui	0
Budget Units and Amou	nts Charged to e	ach Budget Ur	nit		
Budget Unit Number* 9263	Amount Charge	d to Unit*	Expense/GL	Code No.*	
Budget Manager Oshman, Jodel		Secondary Budget Macleod, Ann	t Manager		
Provide Rate and Rate Descripti	ons if applicable * (?)				
Project WBS (Work Breakdown s	Structure)* (?)				
Requester Name		Submission Date			
Singh, Patricia		2/13/2023			
Budget Manager Approv	/al(s)				•
Approved by					
Todel Oshman		Approval Date 2/13/2023			
Procurement Approval					•
File Upload (?)					
Approved by		Approval Date			
Contract Owner Approve	al		allanda san Albania ada an	As a resident de transferior y possedom a de transf	۵
Approved by					
Kim Kop NMAYER		Approval Date 2/13/2023			
Contracts Approval					
Approve*  Yes  No, reject entire submission Return for correction					

Approved by \*

Belinda Stude

Approval Date\* 2/17/2023

New Contract Amendment

Contract Term Start Date \* (?)

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

Fiscal Year\* (?)

2023

3/1/2023

Amount\* (?)

2/29/2024

Contract Term End Date \* (?)

\$ 0.00

Funding Source\*

General Revenue (GR)

Contract Description / Type * (?)		
Personal/Professional Services	Consultant	
Consumer Driven Contract	New Contract/Agreement	
Memorandum of Understanding	Amendment to Existing Contract	
Affiliation or Preceptor	Service/Maintenance	
■ BAA/DUA	IT/Software License Agreement	
Pooled Contract	Lease	
Renewal of Existing Contract	Other	
Justification/Purpose of Contract/Description	of Services Being Provided* (?)	
This agreement will allow SUDOP to collaborate v		
with the Harris Center. CRWR will also provide Pe		
Services. The SUD clients are acquired from outre		
opportunity for retention through linkage to treatm		
Residential Care to Texas residents living with Co		
SUDOP MAT clients with access to housing and/o	or Peer Services treatment that is tailored	
to their level of care.  Website: www.wellnessandrecovery.org		
vebsite. www.weiiiiessandrecovery.org		
Program Director: Geoffrey Ball		
Contract Owner*		
Kim Kornmayer		
Previous History of Contracting with Vendor/C	Contractor*	
○ Yes ○ No ○ Unknown		
Vendor/Contractor a Historically Underutilized	Business (HUB)* (?)	
Yes No Unknown		
Community Partnership* (?)		
Yes  No Unknown		
Specify Name*		
Center for Recovery & Wellness Resources		
Supporting Documentation Upload (?)		
Vendor/Contractor Contact Person		•
Name*		
Dorothy West, Executive Director		
Address*		
Street Address		
2905 Elgin St		
Address Line 2		
City	State / Province / Region	
Houston	TX	
Postal / Zip Code	Country	
77004-3206	US	
DI*		
Phone Number*		
(832) 373-3050		

Budget Units and Amounts Charged to each Budget Unit  Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.*  9263 \$ 0.00 0  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 2/13/2023  Budget Manager Approval(s)					Email* crwrwest@yahoo.com
Budget Unit Number* Amount Charged to Unit* Expense/GL Code No.*  9263 \$ 0.00 0  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	•			editoria sono sono del constanto del constanto del constanto del constanto del constanto del constanto del con	
9263 \$ 0.00 0  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 2/13/2023		nit	to each Budget Ur	Amounts Charged	Budget Units and A
Oshman, Jodel Macleod, Ann  Provide Rate and Rate Descriptions if applicable * (?)  na  Project WBS (Work Breakdown Structure) * (?)  na  Requester Name Submission Date  Singh, Patricia 2/13/2023		The control of the co	narged to Unit*		
Project WBS (Work Breakdown Structure)* (?) na  Requester Name Singh, Patricia  2/13/2023		t Manager			
Requester Name Singh, Patricia Submission Date 2/13/2023			* (?)	escriptions if applicable	
Singh, Patricia 2/13/2023				kdown Structure)* (?)	
Budget Manager Approval(s)					
	•			pproval(s)	Budget Manager Ap
Approved by  Approval Date  2/13/2023				en	
Procurement Approval	6			oval	Procurement Appro
File Upload (?)					File Upload (?)
Approved by Approval Date Sign			Approval Date	gn	
Contract Owner Approval	<b>6</b>			oproval	Contract Owner Ap
Approved by  Approval Date  2/13/2023				<del>p</del>	
Contracts Approval					Contracts Approval
Approve*  Yes  No, reject entire submission  Return for correction				ssion	<ul><li>Yes</li><li>No, reject entire submiss</li></ul>

Approved by \*

Belinda Stude

Approval Date\* 2/22/2023

(0)		The			
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Mar	ara il	dipadi	lo of	THE	1

HARRIS Executive Contract Sur	mmary
Contract Section	
Contractor*	
Waymaker	
Contract ID #*	
2023-0574	
Presented To*	
Resource Committee	
<ul><li>Full Board</li></ul>	
Date Presented*	
3/1/2023	
Parties* (?)	
Consumer of this provider have chosen to receive ISS	Services from the Harris Center's Day Programs.
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	
SOW-Change Order-Amendment#	
Other	
Procurement Method(s)*	
Check all that Apply	
Competitive Bid	Competitive Proposal
Request for Proposal	Sole Source
Request for Application	Request for Qualification
Request for Quote	Tag-On
<ul><li>Interlocal</li><li>Not Applicable (If there are no funds required)</li></ul>	✓ Consumer Driven     ✓ Other
Not Applicable (if there are no funds required)	e other
Funding Information*	
New Contract	
Contract Term Start Date * (?)	Contract Term End Date * (?)
3/1/2023	8/31/2023
If contract is off-cycle, specify the contract term (?) N/A	
IN/A	
Fiscal Year* (?)	
2023	
Funding Course*	
Funding Source*	
State	

Contract Description / Type * (?)	
Personal/Professional Services	Consultant
	New Contract/Agreement
Memorandum of Understanding	Amendment to Existing Contract
Affiliation or Preceptor	Service/Maintenance
■ BAA/DUA	IT/Software License Agreement
Pooled Contract	Lease
Renewal of Existing Contract	Other
Justification/Purpose of Contract/Description of Service	ces Being Provided* (?)
Revenue Contract	
Individualized Skills and Socialization Services (ISS) Contr	actual Agreement
Justification: In pursuant of following the guidelines and ch for waiver programs. The program will provide on-site (cen (community-based) activities for eligible individuals. The O person -centered, based on the Level of Need (LON) of the development and gaining independence, socialization, con volunteer or employment goals. The Off-site ISS activities to promote the development of skills and behavior that sup choice or life choices to achieve outcomes as identified on (PDP).  The ISS programs will operate at the following three (3) loc Hillcroft Empowerment Center 6125 Hillcroft, Houston, TX 77081  Pasadena Enrichment Center 817 Southmore Blvd, #150, Houston, TX 77502  Humble Service Center 6805 Oak Village, Humble, TX 77396	ter-based) and off-site n-site ISS activities will be participant and focus on skill nmunity participation, or are integrated into the community port independence and personal their Person Directed Plan
6005 Oak Village, Humble, 1X 77590	
See attachment for additional information and website link	
New Regulatory Rules for Long-term Care Regulation (LTC Socialization Services (1.gov)	CR) Individualized Skills and
Contract Owner*	
Dr. Evanthe Collins	
Previous History of Contracting with Vendor/Contractor	×*
CONTRACTOR	
Yes    No    Unknown	
Please add previous contract dates and what services	were provided*
09-01-2022 to the present	
Vendor/Contractor a Historically Underutilized Busines	ss (HUB)* (?)
Yes No Unknown	
Community Partnership * (?)	
Yes No • Unknown	
Supporting Documentation Upload (?)	
Copy of ISS rates FY 23.xlsx	10.22KB
Vendor/Contractor Contact Person	
Name*	

Judy Bratton

Address\* Street Address P.O. Box 743 Address Line 2 City State / Province / Region Manvel Tx Country Postal / Zip Code US 77598 Phone Number\* 281.692.2179 or 832.816.0395 Email\* jbratton@waymakeronline.org **Budget Section** Budget Units and Amounts Charged to each Budget Unit Expense/GL Code No.\* Amount Charged to Unit\* **Budget Unit Number\*** 000 \$ 0.00 3585 Secondary Budget Manager **Budget Manager** Kerlegon, Charles Adams-Austin, Mamie Provide Rate and Rate Descriptions if applicable \* (?) See uploaded document Project WBS (Work Breakdown Structure)\* (?) NA **Submission Date** Requester Name 3/1/2023 Wills, Thomas Budget Manager Approval(s) Approved by **Approval Date** Mamie Adams 3/1/2023 Procurement Approval File Upload (?) Approved by Approval Date Sign **Contract Owner Approval** 

Evanthe Collins	3/1/2023
October 1 Accounts	
Contracts Approval	
Approve*	
Yes	
<ul> <li>No, reject entire submission</li> </ul>	
Return for correction	
Approved by *	
	Approval Date*
Belinda Stude	3/1/2023