

October 21, 2025
9:00 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, September 16, 2025
(EXHIBIT R-1)
- IV. CONSIDER AND RECOMMEND ACTION**
 - A. Approve FY'25 Year-to-Date Budget Report- September
(EXHIBIT R-2 Stanley Adams)
 - B. October 2025 New Contracts Over 250K
(EXHIBIT R-3 Ernest Savoy)
 - C. October 2025 Interlocal Agreements
(EXHIBIT R-4 Ernest Savoy)
- 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. October 2025 Contract Amendments 100K-250K
(EXHIBIT R-5)
 - B. October 2025 New Contracts Under 100K
(EXHIBIT R-6)
 - C. October 2025 Contract Amendments Under 100K
(EXHIBIT R-7)
 - D. October 2025 Contract Renewals Under 100K
(EXHIBIT R-8)
 - E. October 2025 Affiliation Agreement, Grants, MOU's and Revenues Information Only
(EXHIBIT R-9)
 - F. Fourth Quarter Financials plus NPC for Resource Committee
(EXHIBIT R-10)
 - G. Supplier Diversity Report FY2025 Q4
(EXHIBIT R-11)

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, SEPTEMBER 16, 2025
MINUTES**

Mr. Gerald Womack, Chairman, called the meeting to order at 9:35 a.m. in the Room 109, 9401 Southwest Freeway, noting a quorum of the Committee was present.

RECORD OF ATTENDANCE

Committee Members in Attendance: Mr. G. Womack, Mr. J. Lykes, Dr. M. Miller Jr.

Committee Member Absent:

Other Board Member Present:, Dr. K. Bacon, Dr. J. Lankford, Dr. R. Gearing

1. CALL TO ORDER

Mr. G. Womack. called the Resource Committee meeting to order at 9:35 am.

2. DESIGNATION OF BOARD MEMBERS AS VOTING COMMITTEE MEMBERS

Mr. G. Womack designated Dr. K. Bacon and Dr. J. Lankford as voting members of the committee.

3. DECLARATION OF QUORUM

Mr. G. Womack declared a quorum was present.

4. PUBLIC COMMENTS

There were no public comments.

5. MINUTES

Approve Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday August 19, 2025.

MOTION: GEARING

SECOND: LYKES

With unanimous affirmative votes,

BE IT RESOLVED that the Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday, August 19, 2025, as presented under Exhibit R-1, are approved and recommended to the Full Board.

6. CONSIDER AND RECOMMEND ACTION

A. FY'25 Year-to-Date Budget Report-August

MOTION: BACON SECOND: LYKES

With unanimous affirmative votes,

BE IT RESOLVED FY'25 Year-to-Date Budget Report-August, as presented under R-2, are approved and recommended to the Full Board.

B. September 2025 Amendments Over 250K

MOTION: GEARING SECOND: BACON

With unanimous affirmative votes,

BE IT RESOLVED September 2025 Amendments Over 250K, as presented under R-3, are approved and recommended to the Full Board.

C. September 2025 Internal Agreements

MOTION: GEARING SECOND: LYKES

Dr. Lankford recused himself from voting on item #11 The University of Texas M. D. Anderson Cancer Center

With unanimous affirmative votes,

BE IT RESOLVED September 2025 Interlocal Agreements Exhibit R-5 items are approved and recommended to the Full Board.

7. EXECUTIVE SESSION-No Executive Session needed.

8. RECOVENE INTO OPEN SESSION

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

10. ADJOURN

MOTION: BACON

SECOND: LYKES

With unanimous affirmative voted and there being no further business, the meeting was adjourned at 9:58 am.

Veronica Franco, Board Liaison

**Gerald W. Womack, Chairman Resource Committee
THE HARRIS CENTER for Mental Health and IDD
Board of Trustees**

EXHIBIT R-2

The Harris Center for Mental Health and IDD

**Results of Financial Operations and Comparison to Original Budget
September 30, 2025**

Fiscal Year 2026

The Harris Center for Mental Health and IDD

Resource Committee

Board of Trustees

The Harris Center for Mental Health and IDD (The Center)

The Report on Results of Financial Operations and Comparison to Original Budget (the Report) submitted herewith was prepared by The Center's Accounting Department.

Responsibility for the accuracy, completeness, and fairness of presentation of the presented data rests with The Center, the Chief Financial Officer and the Accounting department.

We believe the Report, as presented, is materially accurate and is presented in a manner designed to fairly set forth the financial position and results of operations of The Center.

The Center's accounting records for its general fund are maintained on a modified accrual basis of accounting. Under this method, revenues are recognized in the period when they become both measurable and available, and expenditures are recognized when the related fund liability is incurred, if measurable.

The Report submitted herewith was prepared on a budgetary basis which is not in accordance with generally accepted accounting principles nor with financial reporting principles set forth by the Governmental Accounting Standards Board (GASB). The Report has not been audited by an independent auditor.

Stanley Adams

Stanley Adams

Chief Financial Officer

The Harris Center for Mental Health and IDD
Results of Financial Operations and Comparison to Original Budget - Operating Activities
September 30, 2025
Non-GAAP / Budgetary-Basis Reporting
Unaudited - Subject to Change

	For the Month Ended				Fiscal Year to Date				
	Original Budget	Actual	Variance \$	%	Original Budget	Actual	Variance \$	%	
Operating Revenues									
State General Revenue	\$ 11,145,628	\$ 11,015,619	(130,009)	-1%	\$ 11,145,628	\$ 11,015,619	(130,009)	-1%	
Harris County and Local	4,683,587	4,196,272	(487,315)	-10%	4,683,587	4,196,272	(487,315)	-10%	A
Federal Contracts and Grants	4,466,048	3,711,461	(754,587)	-17%	4,466,048	3,711,461	(754,587)	-17%	B
State Contract and Grants	1,993,454	1,675,977	(317,477)	-16%	1,993,454	1,675,977	(317,477)	-16%	C
Third Party Billing	3,465,049	3,589,672	124,623	4%	3,465,049	3,589,672	124,623	4%	
Charity Care Pool	3,590,350	3,590,349	(1)	0%	3,590,350	3,590,349	(1)	0%	
Directed Payment Programs	450,000	437,942	(12,058)	-3%	450,000	437,942	(12,058)	-3%	
Patient Assistance Program (PAP)	1,098,200	1,178,723	80,523	7%	1,098,200	1,178,723	80,523	7%	
Interest Income	277,083	192,788	(84,295)	-30%	277,083	192,788	(84,295)	-30%	
Operating Revenues, total	\$ 31,169,399	\$ 29,588,803	\$ (1,580,596)	-5%	\$ 31,169,399	\$ 29,588,803	\$ (1,580,596)	-5%	
Operating Expenditures									
Salaries and Fringe Benefits	\$ 20,480,600	\$ 21,040,902	(560,302)	-3%	\$ 20,480,600	\$ 21,040,902	(560,302)	-3%	D
Contracts and Consultants	1,260,282	760,079	500,203	40%	1,260,282	760,079	500,203	40%	
Contracts and Consultants-HCPC	3,960,586	3,890,426	70,160	2%	3,960,586	3,890,426	70,160	2%	
Supplies	354,213	43,907	310,306	88%	354,213	43,907	310,306	88%	
Drugs	2,310,715	2,409,030	(98,315)	-4%	2,310,715	2,409,030	(98,315)	-4%	
Purchases, Repairs and Maintenance of:									
Equipment	156,054	43,196	112,858	72%	156,054	43,196	112,858	72%	
Building	281,354	58,687	222,667	79%	281,354	58,687	222,667	79%	
Vehicle	90,602	19,050	71,552	79%	90,602	19,050	71,552	79%	
Software	346,270	58,420	287,850	83%	346,270	58,420	287,850	83%	
Telephone and Utilities	318,602	256,961	61,641	19%	318,602	256,961	61,641	19%	
Insurance, Legal and Audit	209,827	169,185	40,642	19%	209,827	169,185	40,642	19%	
Travel & Training	252,185	19,130	233,055	92%	252,185	19,130	233,055	92%	
Dues & Subscriptions	630,342	332,252	298,090	47%	630,342	332,252	298,090	47%	
Other Expenditures	371,551	812,455	(440,904)	-119%	371,551	812,455	(440,904)	-119%	E
Operating Expenditures, total	\$ 31,023,183	\$ 29,913,680	\$ 1,109,503	4%	\$ 31,023,183	\$ 29,913,680	\$ 1,109,503	4%	
Operating Activities -									
Change in Fund Balance/Net Position	\$ 146,216	\$ (324,877)	\$ (471,093)		\$ 146,216	\$ (324,877)	\$ (471,093)		

The Harris Center for Mental Health and IDD
Results of Financial Operations and Comparison to Original Budget - Capital Outlay & Debt Service Related Activities
September 30, 2025
Non-GAAP / Budgetary-Basis Reporting
Unaudited - Subject to Change

	For the Month Ended				Fiscal Year to Date			
	Original Budget	Actual	Variance \$	%	Original Budget	Actual	Variance \$	%
Revenues								
Harris County and Local (CHC)	\$ -	\$ -	-		\$ -	\$ -	-	
State Contract and Grants (HHSC)	-	-	-		-	-	-	
Revenues, total	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	
Expenditures								
Debt Service	\$ 146,216	\$ -	\$ 146,216	100%	\$ 146,216	\$ -	\$ 146,216	100%
Capital outlay	-	97,425	(97,425)		-	97,425	(97,425)	
Expenditures, total	\$ 146,216	\$ 97,425	\$ 48,791		\$ 146,216	\$ 97,425	\$ 48,791	
Excess (Deficiency) of revenues over expenditures	\$ (146,216)	\$ (97,425)	48,791	-33%	\$ (146,216)	\$ (97,425)	48,791	
Other Financing Sources								
Revenue Bonds Issued	-	-	-		-	-	-	
Insurance proceeds	-	-	-		-	-	-	
Sale of Capital Assets	-	-	-		-	-	-	
Other Financing Sources	-	-	-		-	-	-	
Other Financing Uses	-	-	-		-	-	-	
Other Financing Sources, total	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	
Capital Outlay & Debt Service Activities - Change in Fund Balance/Net Position	\$ (146,216)	\$ (97,425)	\$ 48,791		\$ (146,216)	\$ (97,425)	\$ 48,791	

The Harris Center for Mental Health and IDD
Notes to Statements Presented
Non-GAAP / Budgetary-Basis reporting
September 30, 2025

Results of Financial Operations and Comparison to Original Budget

A Harris County and Local Revenue

Several non-grant revenue streams did not see any activity in the month of September. These accounts include the income received from our HUD811 properties and Value/Incentive Based MCO contracts.

B Federal Contract and grants

Our Early Childhood Intervention (ECI) runs on a federal fiscal year (Oct-Sept). However, the contract exhausted its FY25 budget in June 2025, therefore, no revenue has been recognized since that period. In September, expenditures under this grant totaled \$719K, which we expect to recognize in October and we project expenditures to be congruent with revenue by June 2026.

C State Contract and Grants

There are still some contracts that are historically being underspent in their personnel categorical budgets such as CMH, MST, and SMART. There are also some contracts whose revenue is offset by program income such as TCOOMMI. The more program income that is received, the less grant revenue that can be recognized. There are a few contracts that are off due to timing. Most notable are HCC and MHGJ-II. HCC had a portion of its budget allocated towards construction last year. With that portion of the budget now freed up to cover program costs, the program can start ramping up its efforts in other areas to spend down. Not too dissimilar is MHGJ-II. That program started mid-year FY25. The contract will allow almost \$2M in carryforward dollars into FY26.

D Salaries and Fringe Benefits

The \$560K (3%) variance is due to the number of work days during the month. September was a 22 work day month, which is higher than average (21.75), while our budget is flat throughout the year.

E Other expenditures

Other expenditures for September include \$423K in P-card usage that is partially in connection with the County Inspire grant. We expect to recognize revenue of approximately \$324K in October for County Inspire grant expenditures. Additionally, September included a payment of \$150K for Pitney-Bowes postage credits.

The Harris Center for Mental Health and IDD

Balance Sheet

September 30, 2025

Non-GAAP / Budgetary-Basis Reporting

Unaudited - Subject to Change

	August - 2025	September - 2025	Change
Assets			
Current Assets			
Cash and Cash Equivalents			
Cash and Petty Cash	\$ 18,462,361	\$ 22,540,138	\$ 4,077,777
Cash Equivalents	51,980,410	41,441,846	(10,538,564)
Cash and Cash Equivalents, total	\$ 70,442,771	\$ 63,981,984	\$ (6,460,787) AA
Inventories, Deposits & Prepaids	4,365,530	6,104,750	1,739,220
Accounts Receivable:			
Patient A/R, net of allowance	1,743,665	2,074,402	330,737
A/R from other governments	28,211,760	37,881,623	9,669,863 BB
Other A/R	663,200	729,086	65,886
Current Assets, total	\$ 105,426,926	\$ 110,771,845	\$ 5,344,919
Restricted Cash and Cash Equivalents	19,535,261	19,966,242	430,981 CC
Capital Assets:			
Land	12,709,144	12,709,144	-
Building and Improvements	55,610,903	55,610,903	-
Right-to-use assets (Leases & SBITA)	6,312,466	6,312,466	-
Furniture, Equipment and Vehicles	7,960,059	7,960,059	-
Construction in Progress	11,376,400	11,376,400	-
Accumulated Depreciation/Amortization	(38,908,961)	(38,908,961)	-
Capital Assets, net total	\$ 55,060,011	\$ 55,060,011	\$ -
Total Assets	\$ 180,022,198	\$ 185,798,098	\$ 5,775,900
Liabilities & Fund Balance/Net Position			
Liabilities			
Accounts Payable and Accrued Liabilities	\$ 14,452,023	\$ 16,923,228	\$ 2,471,205
Unearned Revenues	9,678,920	13,387,373	3,708,453 DD
Noncurrent liabilities:			
Due within one year	2,713,041	2,963,041	250,000
Due in more than one year	39,553,205	39,321,749	(231,456)
Liabilities, total	\$ 66,397,189	\$ 72,595,391	\$ 6,198,202
Fund Balance/Net Position			
Net Investment in Capital Assets	41,868,788	42,299,769	430,981
Restricted for Capital Projects	19,535,261	19,966,242	430,981 CC
Nonspendable	4,365,530	6,104,750	1,739,220
Assigned	15,434,386	15,434,386	-
Unassigned/Unrestricted	13,212,779	10,611,596	(2,601,183)
Change in fund balance/net position	19,208,266	18,785,964	(422,302)
Fund Balance/Net Position, Total	\$ 113,625,009	\$ 113,202,707	\$ (422,302)
Total Liabilities & Fund Balance/Net Position	\$ 180,022,198	\$ 185,798,098	\$ 5,775,900

The Harris Center for Mental Health and IDD
Notes to Statements Presented
Non-GAAP / Budgetary-Basis reporting
September 30, 2025

Balance Sheet

AA Cash and Investments

The \$6.5M net decrease in cash is primarily due to cash used in normal operations. Q1 payment for the FY26-FY27 State performance contract is expected in October and will result in an increase of cash and unearned revenues and a decrease of A/R from Other Governments.

BB A/R from Other Governments

The increase of \$10.7M is primarily attributable to the Q1 payment for the FY26-FY27 State performance contract not yet received. Q1 payment for the FY26-FY27 State performance contract is expected in October and will result in an increase of cash and unearned revenues and a decrease of A/R from Other Governments.

CC Restricted Cash & Restricted Net Position for Capital Projects

Increase related to the quarterly intercept obligation owed to BNY for the upcoming principal and interest payment in November. This cash is restricted for use for the financing of the approved capital projects and for the payment of principal and interest when due; as such the corresponding net position is restricted for capital projects.

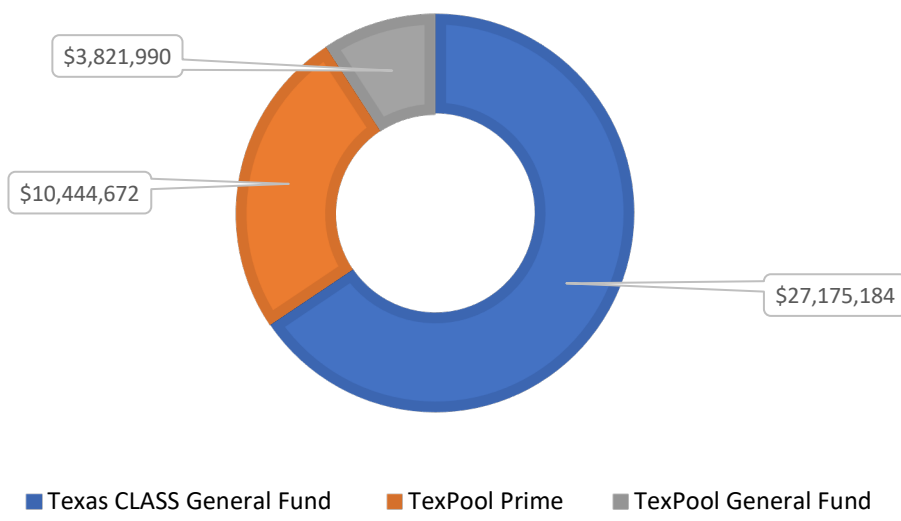
DD Unearned Revenues

Unearned revenues increased by \$3.7M due to receipt of Q1 payment for the LIDDA contract. Q1 payment for the FY26-FY27 State performance contract is expected in October and will result in an increase of cash and unearned revenues and a decrease of A/R from Other Governments.

The Harris Center for Mental Health and IDD
Investment Portfolio
September 30, 2025

Local Government Investment Pools (LGIPs)	Beginning Balance	Transfer In	Transfer Out	Interest Income	Ending Balance	Portfolio %	Monthly Yield
<i>Texas CLASS</i>							
Texas CLASS General Fund	27,078,217			96,966	\$ 27,175,184	65.57%	4.39%
<i>TexPool</i>							
TexPool Prime	21,093,513		(10,700,000)	51,160	10,444,672	25.20%	4.42%
TexPool General Fund	3,808,680			13,311	3,821,990	9.22%	4.31%
<i>TexPool Sub-Total</i>	24,902,193	-	(10,700,000)	64,470	14,266,663	34.42%	4.39%
Total Investments	\$ 51,980,410	\$ -	\$ (10,700,000)	161,436	\$ 41,441,846	99.99%	4.39%
Additional Interest on Checking Accounts				31,352			
Total Interest Earned during the current month				<u>192,788</u>			

Investment Portfolio Weight



3 Month Weighted Average Maturity (Days)	1.00
3 Month Weighted Average Yield	4.36%
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 week	4.23%
Interest Rate - JPMorgan Hybrid Checking	2.90%
Earnings credit rate (ECR) - JPMorgan Hybrid Checking	3.00%

This Investment Portfolio Report of The Harris Center for Mental Health and IDD as of September 30, 2025, is in compliance with the provisions of the Public Funds Investment Act (PFIA), Chapter 2256 of the Texas Government Code and the Investment Strategy approved by the Board of Trustees.

Approved:

Michael T. Hooper Jr.
Michael T. Hooper Jr.
Director of Financial Accounting & Reporting

The Harris Center for Mental Health and IDD
Monthly Report of Financial Transactions Related to Payments of Liabilities for Employee Benefits
September 30, 2025

Vendor	Description	Monthly Not-To-Exceed ⁽¹⁾	Sep-25	Fiscal Year to Date Total
Lincoln Financial Group (LFG)	Retirement Funds (401a, 403b, 457)	\$3,650,000	\$2,024,342	\$2,024,342
Blue Cross Blue Shield of TX	Health and Dental Insurance	\$3,300,000	\$2,661,108	\$2,661,108
UNUM	Life Insurance	\$310,000	\$0	\$0

Notes:

⁽¹⁾ *As established by the Board Resolution approved October 22, 2024: Harris Center Board of Trustees Signature Authorization and Delegation Authority for Certain Items effective September 24, 2024.*

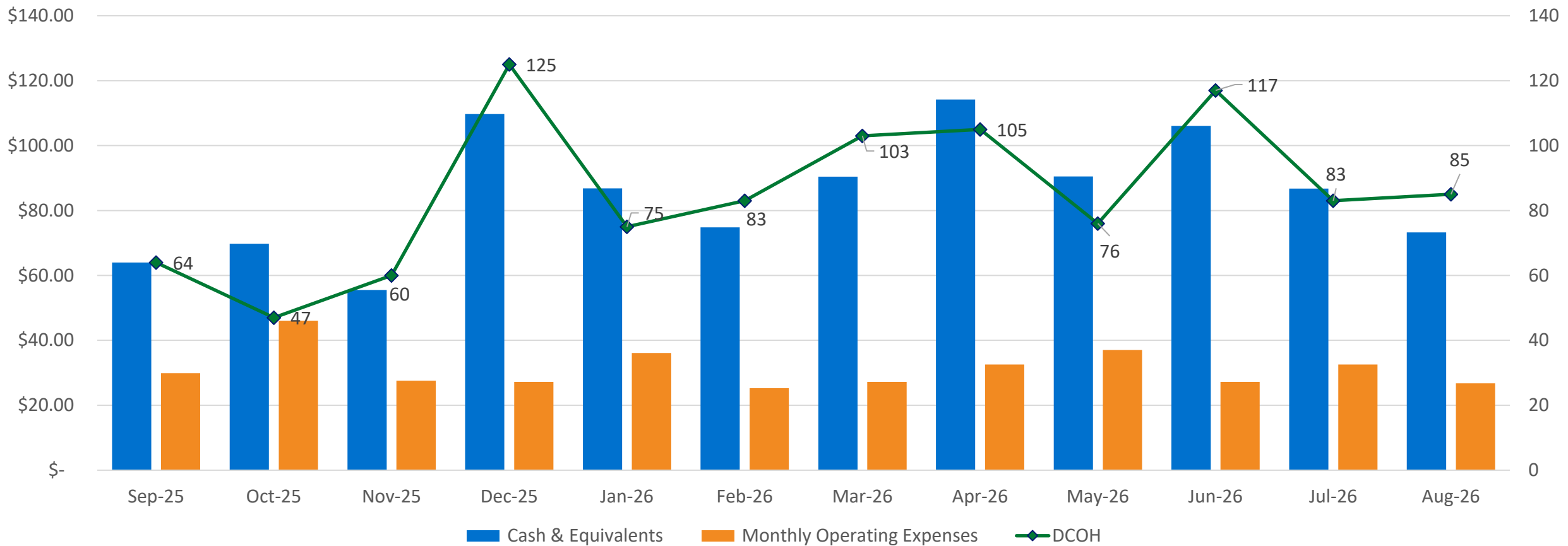


Additional Analysis – September 2025

Days-Cash-On-Hand (DCOH)– as of 09/30/2025

Month-over-month (“MoM”) (\$ amounts in millions)

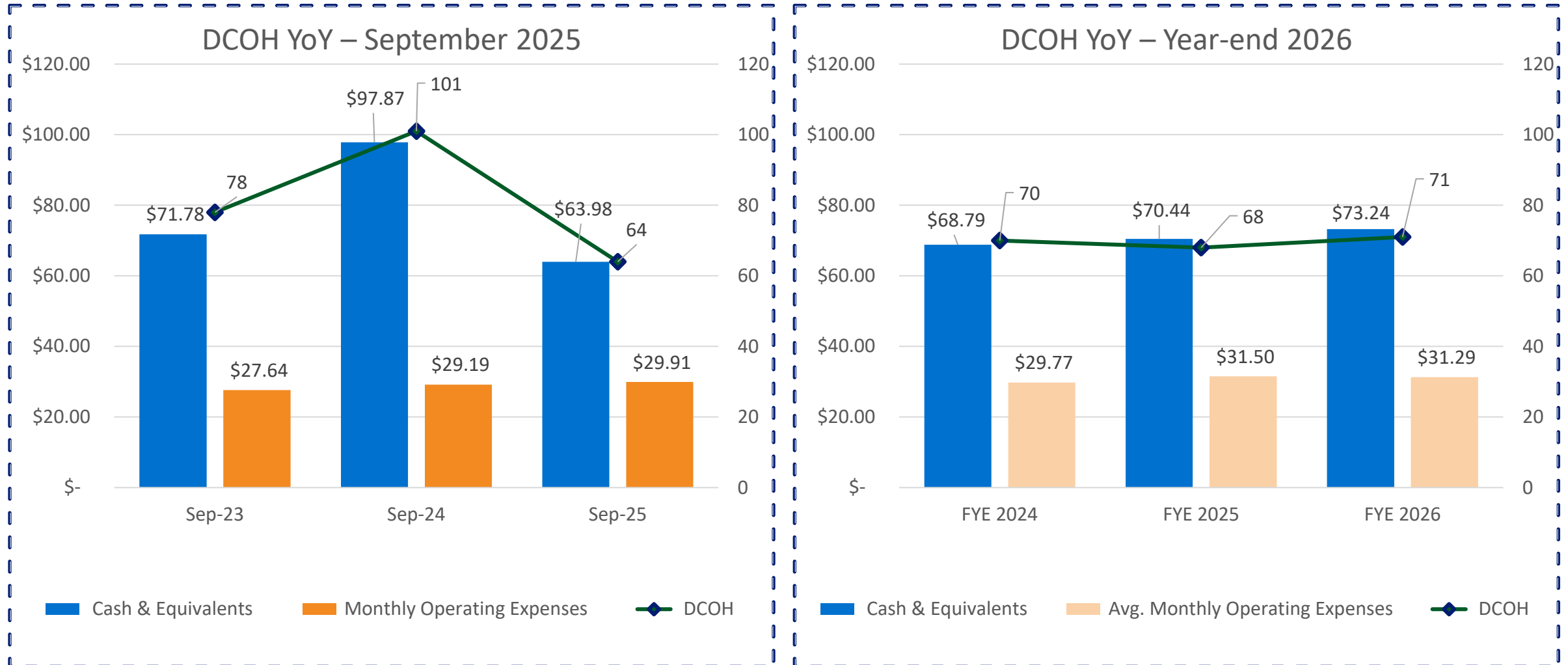
DCOH MoM – September 2025



DCOH = Cash & Equivalents @ Month End divided by Daily Operating Expenses
Months in FY 2026 after current Month are based on projections

Days-Cash-On-Hand (DCOH)– as of 09/30/2025

Year-over-year ("YoY") (\$ amounts in millions)



DCOH = Cash & Equivalents @ Month End divided by Daily Operating Expenses
Months in FY 2026 after current Month are based on projections

Capital Outlay – as of 09/30/2025

Project/Funding Source 	Year-to-date Total
 Facilities Capital Projects	84,000
Fund Balance	84,000
 IT Capital Projects	-
Fund Balance	-
 NPC Renovation	13,425
Bond Series 2024	13,425
Grand Total	97,425

Funding Source/Project 	Year-to-date Total
 Fund Balance	\$ 84,000
Facilities Capital Projects	\$ 84,000
IT Capital Projects	\$ -
 Bond Series 2024	\$ 13,425
NPC Renovation	\$ 13,425
Grand Total	\$ 97,425

EXHIBIT R-3

**OCTOBER 2025
NEW CONTRACTS
OVER 250k**

OCTOBER 2025
FISCAL YEAR 2026

[illegible]



Executive Contract Summary

Contract Section

Contractor*

UKG Kronos Systems, LLC

Contract ID #*

6685

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center and UKG

Agenda Item Submitted For: * (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
☒ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

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

Current Contract Amount*

\$ 400,000.00

Increase Not to Exceed*

\$ 8,022.82

Revised Total Not to Exceed (NTE)*

\$ 408,022.82

Fiscal Year* (?)

2026

Amount* (?)

\$ 408,022.82

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☒ Other Amending FY2026 Renewal Amount

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

Harris Center Time and Payroll System

Updated quote received after original FY2026 ECS Renewal was completed.

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*
☒ Yes ☐ No ☐ Unknown
Please add previous contract dates and what services were provided*

FY2012 - FY2025

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)
☐ Yes ☒ No ☐ Unknown
Please provide an explanation*

N/A

Community Partnership* (?)
☐ Yes ☒ No ☐ Unknown
Supporting Documentation Upload (?)

UKG - Harris Center FY2026.xlsx

54.9KB

Vendor/Contractor Contact Person**Name***

Chris Layne

Address *

Street Address

297 Billerica Road

Address Line 2

City

Chelmsford

Postal / Zip Code

01824-4119

State / Province / Region

MA

Country

US

Phone Number *

303-726-7503

Email *

chris.layne@kronos.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1130	\$ 408,022.82	553002

Budget Manager

Campbell, Ricardo

Secondary Budget Manager

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable * (?)

N/A

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name

Hurst, Richard

Submission Date

8/29/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

9/3/2025

Procurement Approval**File Upload (?)****Approved by**

Sign

Approval Date**Contract Owner Approval**

Approved by

Mustafa Cochinwala

Approval Date

9/3/2025

Contracts Approval

Approve *

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

Approved by *

Belinda Stude

Approval Date *

9/3/2025

EXHIBIT R-4

OCTOBER 2025 INTERLOCAL AGREEMENTS

[illegible]



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2025

Contract ID# *

2023-0737

Contractor Name *

Harris County

Service Provided* (?)

Competency and Sanity Evaluation Services for the Administrative Office of the District Courts

Renewal Term Start Date *

10/1/2025

Renewal Term End Date *

9/30/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
- ☐ No
- ☒ Unknown

Contract NTE* (?)

\$ 3,402,477.00

Rate(s)/Rate(s) Description

N/A

Unit(s) Served*

N/A

G/L Code(s)*

N/A

Current Fiscal Year Purchase Order Number*

N/A

Contract Requestor*

Sheenia Williams-Wesley

Contract Owner*

Sean McElroy

File Upload (?)**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor? * (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities? ***

Provides competency and sanity assessments for inmates in jail and other services for their mental health needs

Renewal Information for Next Fiscal Year**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6205	\$ 3,402,477.00	540000

Budget Manager*

Williams-Wesley, Sheenia

Secondary Budget Manager*

Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Fiscal Year* (?)

2026

Amount* (?)

\$ 3,402,477.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

County

Contract Content Changes

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

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Sean McElroy

Budget Manager Approval(s)

Approved by

Shervina Williams-Wesley

Contract Owner Approval

Approved by

Sean McElroy

Contracts Approval

Approve *

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

Approved by *

Belinda Stude

Approval Date *

9/4/2025

Executive Contract Summary

Contract Section

Contractor*

Harris County Sheriff Office

Contract ID #*

2023-0783

Presented To*

- ☐ Resource Committee
☒ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center for MH and IDD Services and Harris County Sheriff Office

Agenda Item Submitted For: * (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
☒ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?

*

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

10/1/2025

Contract Term End Date* (?)

9/30/2026

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

county fiscal year

Fiscal Year* (?)

2026

Amount* (?)

\$ 1,143,107.00

Fiscal Year* (?)

2027

Amount* (?)

\$ 103,919.00

Funding Source*

County

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

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

To provide enhanced treatment planning and continuity of care services to inmates housed in detention facilities operated by the Department.

Contract Owner*

Sean McElroy

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

10/1/24 - 9/30/25 Discharge planning services

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

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☒ Yes ☐ No ☐ Unknown

Specify Name*

Harris County

Supporting Documentation Upload (?)**Vendor/Contractor Contact Person****Name***

Harris County Sheriff Office

Address*

Street Address

1001 Preston Street

Address Line 2

8th Floor

City

Houston

Postal / Zip Code

77002-1839

State / Province / Region

Texas

Country

United States

Phone Number*

7132748704

Email*

latoya.silverio@sheriff.hctx.net

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6206	\$ 1,247,026.00	540000
Budget Manager	Secondary Budget Manager	
Williams-Wesley, Sheenia	Reyes, Elizabeth	

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Williams-Wesley, Sheenia

Submission Date

9/2/2025

Budget Manager Approval(s)

Approved by

Sheenia Williams-Wesley

Approval Date

9/2/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Sean McElroy

Approval Date

9/3/2025

Contracts Approval

Approve*

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

Approved by *

Belinda Stude

Approval Date *

9/12/2025



Executive Contract Summary

Contract Section



Select Header For This Contract*

Interlocal

Contractor*

Harris County Sheriff Office IDD and MH Clinical Services

Contract ID #*

2023-0661

Presented To*

☒ Resource Committee

☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center for MH and IDD Services and Harris County Sheriff Office

Agenda Item Submitted For: * (?)

☐ Information Only (Total NTE Amount is Less than \$250,000.00)

☒ Board Approval (Total NTE Amount is \$250,000.00 or more)

☐ 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

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

☐ Yes ☒ No

Funding Information*

☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

10/1/2025

Contract Term End Date* (?)

9/30/2026

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

County fiscal year

Current Contract Amount*

\$ 10,423,770.00

Increase Not to Exceed*

\$ 423,770.00

Revised Total Not to Exceed (NTE)*

\$ 10,625,659.00

Fiscal Year* (?)

2026

Amount* (?)

\$ 9,555,122.00

Fiscal Year* (?)

2027

Amount* (?)

\$ 868,648.00

Funding Source*

County

Contract Description / Type* (?)

- ☐ Personal/Professional Services
- ☐ Consumer Driven Contract
- ☐ Memorandum of Understanding
- ☐ Affiliation or Preceptor
- ☐ BAA/DUA
- ☐ Pooled Contract
- ☐ Renewal of Existing Contract

- ☐ Consultant
- ☐ New Contract/Agreement
- ☒ Amendment to Existing Contract
- ☐ Service/Maintenance
- ☐ IT/Software License Agreement
- ☐ Lease
- ☐ Other

Contract Owner*

Sean McElroy

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

10/1/24 - 09/30/25 services for inmates with HCSO

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

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☒ Yes ☐ No ☐ Unknown

Specify Name*

Harris County

Supporting Documentation Upload (?)**How does this contract support Agency/Unit Strategic priorities?***

Serving clients to get the resources they need to transition into the community.

Vendor/Contractor Contact Person**Name***

Michael Lanham

Address*

Street Address

1200 Baker Street

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77002-1206

Country

United States

Phone Number*

3462861620

Email*

micheal.lanham@sheriff.hctx.net

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6201	\$ 2,185,978.00	540000

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Reyes, Elizabeth

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6202	\$ 2,520,015.00	540000

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Jiles, Monalisa

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6203	\$ 1,987,801.00	540000

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Reyes, Elizabeth

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6204	\$ 3,729,976.00	540000

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Williams-Wesley, Sheenia

Submission Date

9/23/2025

Budget Manager Approval(s)

Approved by

Shenita Williams Wesley

Approval Date

9/23/2025

Contract Owner Approval



Approved by

Sean McElroy

Approval Date

9/24/2025

Contracts Approval



Approved by

Belinda Stude

Approval Date

9/24/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2025

Contract ID# *

2025-1043

Contractor Name *

Harris County Sheriff's Office

Service Provided* (?)

Forensic Single Portal Authority ("FSPA") Program

Renewal Term Start Date *

10/1/2025

Renewal Term End Date *

9/30/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 998,239.87

Rate(s)/Rate(s) Description

N/A

Unit(s) Served*

N/A

G/L Code(s)*

N/A

Current Fiscal Year Purchase Order Number*

N/A

Contract Requestor*

Sheenia Williams-Wesley

Contract Owner*

Monalisa Jiles

File Upload (?)**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor?* (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities? ***

Providing services necessary to reduce or ameliorate the stress of incarceration in efforts to reduce lengthy wait times associated with access to competency restoration services

Renewal Information for Next Fiscal Year**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6207	\$ 998,239.87	540000

Budget Manager*

Williams-Wesley, Sheenia

Secondary Budget Manager*

Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Fiscal Year* (?)

2026

Amount* (?)

\$ 915,053.21

Fiscal Year* (?)

2027

Amount* (?)

\$ 83,186.66

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source *

County

Contract Content Changes

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

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Sean McElroy

Budget Manager Approval(s)

Approved by

Shernia Williams-Wesley

Contract Owner Approval

Approved by

Sean McElroy

Contracts Approval

Approve *

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

Approved by*

Belinda Stude

Approval Date*

9/9/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Select Header For This Contract *

Interlocal

Current Fiscal Year

2026

Contract ID# *

2023-0661

Contractor Name *

Harris County Sheriff's Office

Renewal Term Start Date

10/1/2025

Renewal Term End Date

9/30/2026

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☒ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 10,000,000.00

Rate(s)/Rate(s) Description

N/A

Unit(s) Served*

N/A

G/L Code(s)*

N/A

Current Fiscal Year Purchase Order Number*

N/A

Contract Requestor*

Sheenia Williams-Wesley

Contract Owner*

Sean McElroy

File Upload (?)**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor?* (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities?***

Providing mental health services to inmates and help with transitioning into community

Renewal Information for Next Fiscal Year**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6201	\$ 1,762,208.00	540000

Budget Manager*	Secondary Budget Manager*
Williams-Wesley, Sheenia	Reyes, Elizabeth

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6202	\$ 2,520,015.00	540000

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

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6203	\$ 1,987,801.00	540000

Budget Manager*	Secondary Budget Manager*
Williams-Wesley, Sheenia	Reyes, Elizabeth

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6204	\$ 3,729,976.00	540000
Budget Manager*	Secondary Budget Manager*	
Williams-Wesley, Sheenia	Reyes, Elizabeth	

Provide Rate and Rate Descriptions if applicable (?)

n/a

Project WBS (Work Breakdown Structure) (?)

n/a

Fiscal Year* (?)	Amount* (?)
2026	\$ 9,166,667.00

Fiscal Year* (?)	Amount* (?)
2027	\$ 833,333.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

County

Contract Content Changes

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

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Sean McElroy

Budget Manager Approval(s)

Approved by

Shemia Williams Wesley

Approved by

Sign

Contract Owner Approval



Approved by

Sean McElroy

Contracts Approval



Approved by

Belinda Stude

Approval Date

9/23/2025



Executive Contract Summary

Contract Section


Contractor*

Spring Branch Independent School District

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

Spring Branch Independent School District and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?
 *

☐ Yes ☒ No

Funding Information*

☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/11/2025

Contract Term End Date* (?)

8/31/2026

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

Fiscal Year* (?)

2026

Amount* (?)

\$ 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* (?)

To perform screenings and clinical assessments, psychosocial services as needed, and follow-up services to students within the Spring Branch Independent School District.

Contract Owner*

Tiffanie Williams-Brooks

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

2019-Present

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

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☒ Yes ☐ No ☐ Unknown

Specify Name*

Spring Branch Independent School District

Supporting Documentation Upload (?)**Vendor/Contractor Contact Person****Name***

Lance Stallworth

Address*

Street Address

955 Campbell Road

Address Line 2

City

Houston

Postal / Zip Code

77024-2803

State / Province / Region

TX

Country

US

Phone Number*

713-251-2237

Email*

Lance.stallworth@springbranchisd.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
4323	\$ 0.00	000000

Budget Manager

Smith, Janai

Secondary Budget Manager

Shelby, Debbie

Provide Rate and Rate Descriptions if applicable* (?)

0.00

Project WBS (Work Breakdown Structure)* (?)

0.00

Requester Name

Bowser, Mohagony

Submission Date

9/12/2025

Budget Manager Approval(s)

Approved by

Janai Lynnette Smith

Approval Date

9/12/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Sharon Williams Brooks, M.A., CPA

Approval Date

9/12/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/16/2025





Executive Contract Summary

Contract Section

Contractor*

UT Health San Antonio (Be Well Texas MAT-AUD)

Contract ID #*

2025-0999

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center and Be Well Texas

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?
 *

☐ Yes ☒ No

Funding Information*

☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

5/16/2025

Contract Term End Date* (?)

8/31/2025

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

Current Contract Amount*

\$ 25,307.00

Increase Not to Exceed*

\$ 25,307.00

Revised Total Not to Exceed (NTE)*

\$ 50,614.00

Fiscal Year* (?)

2025

Amount* (?)

\$ 25,307.00

Funding Source*

Federal Grant

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

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

Contract for MAT-AUD ended on May 15, 2025 and it was amended with the change of the name to (MSUD) extending it from May 16 to June 30, 2025.

This new MSUD contract is to cover the extended ramp-down of the program from May 16-June 30th. Please have Wayne Young or appointee to sign and return back to to Be Well.

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

FY24

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

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☒ Yes ☐ No ☐ Unknown

Specify Name*

Be Well Texas

Supporting Documentation Upload (?)

175499_14189_MSUD-08-HARRISCENTER-MSUD-Amendment.pdf

116.59KB

Vendor/Contractor Contact Person**Name***

Nicholas Sheffield

Address*

Street Address

UT Health San Antonio

Address Line 2

City

San Antonio

State / Province / Region

TX

Postal / Zip Code

78229

Country

US

Phone Number*

210-567-4533

Email*

sheffieldn@uthscsa.edu

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9363	\$ 25,307.00	437085
Budget Manager	Secondary Budget Manager	
Oshman, Jodel	Ramirez, Priscilla	

Provide Rate and Rate Descriptions if applicable* (?)

25,307.00

Project WBS (Work Breakdown Structure)* (?)

25,307.00

Requester Name

Sesay, Omar

Submission Date

9/9/2025

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

9/9/2025

Contract Owner Approval

Approved by

Kim Kornmayer

Approval Date

9/9/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/10/2025

EXHIBIT R-5

OCTOBER 2025

AMENDMENTS 100k - 250k



Executive Contract Summary

Contract Section

Contractor*

Absorb Software North America, LLC

Contract ID #*

2023-0741

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

Absorb Software US Holdings Inc and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☒ Yes ☐ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

9/1/2024

Contract Term End Date* (?)

8/31/2025

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

Current Contract Amount*

\$ 117,750.00

Increase Not to Exceed *

\$ 5,887.50

Revised Total Not to Exceed (NTE) *

\$ 123,637.50

Fiscal Year* (?)

2026

Amount* (?)

\$ 123,637.50

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

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

This is our Learning Managment System, which ensures we have a platform to provide and track compliance trainings.

Contract Owner*

Ninfa Escobar

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided *

09/01/2024

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

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☐ Yes ☐ No ☒ Unknown

Supporting Documentation Upload (?)

Absorb LMS - The Harris Center for Mental Health and IDD - Q050238.pdf

125.55KB

Vendor/Contractor Contact Person**Name***

Emma Scott

Address *

Street Address

19046 BRUCE B, DOWNS BLVD, STE B6 #720

Address Line 2

City

Tampa

State / Province / Region

Florida

Postal / Zip Code

33647

Country

US

Phone Number *

NA

Email *

emma.scott@absorblms.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1975	\$ 123,637.50	553002
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

NA

Project WBS (Work Breakdown Structure) * (?)

NA

Requester Name

Escobar, Ninfa

Submission Date

9/22/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

9/22/2025

IT Director Approval**Approved by***Anthony Jones***Approval Date**

9/23/2025

IT Approval Comments

Approved - AJones

Procurement Approval

File Upload (?)

Approved by

Approval Date

Sign

Contract Owner Approval



Approved by

Approval Date

Ninfa Escobar

9/23/2025

Contracts Approval

Approve *

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

Approved by *

Approval Date *

Belinda Stude

9/23/2025



Executive Contract Summary

Contract Section


Contractor*

RingCentral, Inc/

Contract ID #*

2025-1079

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

RingCentral and The Harris Center

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 TIPS CONTRACT: 180304 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

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

Current Contract Amount*

\$ 1.00

Increase Not to Exceed *

\$ 216,325.64

Revised Total Not to Exceed (NTE) *

\$ 216,326.64

Fiscal Year* (?)

2026

Amount* (?)

\$ 216,326.64

Funding Source *

Federal Grant

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

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

SOW and Implementation of new Contact Center solution to assist with increase in call volume due to various Crisis Line contracts.

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided *

FY2020 - FY2025

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

☐ Yes ☒ No ☐ Unknown

Please provide an explanation *

N/A

Community Partnership* (?)

☐ Yes ☐ No ☒ Unknown

Supporting Documentation Upload (?)

C2025-03914772 SOW RingCentral Contact Center.pdf	485.07KB
HARRIS_723Change_Order_following_Updated_MSA_Signed.pdf	537.07KB
Harris_714Complete_with_Docusign_ID_2025-1079_Signed.pdf	722.07KB
The Harris Center_MSA for TIPS 180304_USA_ENT PSA BAA.docx	107.59KB

Vendor/Contractor Contact Person**Name ***

Chris Donan

Address *

Street Address

20 Davis Drive

Address Line 2

City

Belmont

State / Province / Region

CA

Postal / Zip Code

94002-3002

Country

US

Phone Number *

980-326-0475

Email *

Chris.donan@ringcentral.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
7001	\$ 216,326.64	574000
Budget Manager	Secondary Budget Manager	
Ilejay, Kevin	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

SOW for implementation - \$42,918.40

8 months of usage (Jan2026 - Aug 2026) @ \$21,676.03 a month = \$173,408.24

Project WBS (Work Breakdown Structure)* (?)

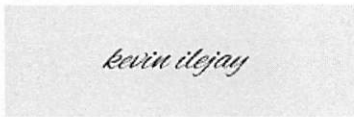
N/A

Requester Name

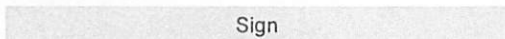
Hurst, Richard

Submission Date

9/15/2025

Budget Manager Approval(s)**Approved by**

Approval Date

9/15/2025

Procurement Approval**File Upload (?)****Approved by**

Approval Date**Contract Owner Approval**

Approved by

Mustafa Cechinnala

Approval Date

9/15/2025

Contracts Approval

Approve *

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

Approved by *

Belinda Stude

Approval Date *

9/16/2025

EXHIBIT R-6

OCTOBER 2025
NEW CONTRACTS
UNDER 100k

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD

SNAPSHOT SUMMARY
NEW CONTRACTS
LESS THAN \$100,000OCTOBER 2025
FISCAL YEAR 2026

	CONTRACTOR	PRODUCT/SERVICE DESCRIPTION	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	ACCESS						
	ADMINISTRATION						
1	3 Form LLC	Acoustic Panels in the Conference room	\$9,642.74	9/22/2025 - 12/31/2025	General Revenue (GR)	Tag-On TIPS Vendor ID 8445, Contract 220802	New agreement to provide acoustic panels needed for sound attenuation in the conference room.
2	Avalon Event Rentals	Tent Equipment Rental Services	\$5,501.38	10/1/2025 - 10/15/2025	General Revenue (GR)	Request for Quote	New Tent Rental Agreement for the for groundbreaking ceremony for 6168 Apartments on October 13th, 2025.
3	Bud Griffin Customer Support, Inc.	Support and Preventative Maintenance on Data Center A/C units	\$4,500.00	9/1/2025 - 8/31/2030	General Revenue (GR)	Sole Source	New Agreement (replacement) to provide support and preventative maintenance on data center A/C units.
4	Houston Methodist Hospital	Services for the Employee Wellness Picnic on Friday, October 10, 2025.	\$2,500.00	10/1/2025 - 10/1/2027	General Revenue (GR)	Sole Source	New Agreement to provide services at the at the Employee Wellness Picnic on Friday, October 10, 2025.
5	MasterWord Services, Inc.	Language Assessment Competency Services	\$35,000.00	9/1/2025 - 8/31/2026	General Revenue (GR)	Request for Quote	New Agreement (replacement) to provide language competency and assessment services to ensure Staff that are translating on behalf of the Agency have the necessary competency to do so.
6	Otten Consulting Group Inc	Consultant Services for ADA Accessibility Assessments	\$13,970.00	9/15/2025 - 8/31/2026	General Revenue (GR)	Request for Quote	New Agreement to perform for ADA Accessibility Assessments by conducting on-site inspection of the Agency's fourteen (14) site locations. Consultant will provide on-site inspection services and analysis reports pursuant to compliance with the American with Disabilities Act (ADA).
7	Professional Service Industries, Inc.	Materials Testing Services for the NE Wellness Center Construction Project	\$46,000.00	9/15/2025 - 8/31/2027	General Revenue (GR)	Request for Quote	New Agreement to provide materials testing services requested for NE Wellness Center construction project.
	CPEP/CRISIS SERVICES						
8	Angelica Padilla d/b/a Lice Care Solutions, LLC	Lice Removal Services for Consumers at the Neuropsychiatric Center, Respite Rehabilitation and Re-Entry Center locations.	\$3,300.00	9/1/2025 - 8/31/2026	County	Request for Quote	New Agreement (replacement) to provide lice removal services for consumers at the Neuropsychiatric Center, Respite Rehabilitation and Re-Entry Center locations.
	FORENSICS						
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES						
	MENTAL HEALTH						
	MENTAL HEALTH SERVICES-ECI						
	LEASES						

Executive Contract Summary

Contract Section

Contractor*

3 Form LLC

Contract ID #*

new

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

3 Form LLC and The Harris Center

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 TIPS Vendor ID 8445, Contract 220802 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

☐ Yes ☒ No

Funding Information*

☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/22/2025

Contract Term End Date* (?)

12/31/2025

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

Fiscal Year* (?)

2026

Amount* (?)

\$ 9,642.74

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 Tag-On TIPS ID8445/220802 |

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

acoustic panels needed for sound attenuation in the conference room

Contract Owner*

Karen Hurst

Previous History of Contracting with Vendor/Contractor*☐ Yes ☒ No ☐ Unknown**Vendor/Contractor a Historically Underutilized Business (HUB)* (?)**☐ Yes ☒ No ☐ Unknown**Please provide an explanation***

does not meet criteria

Community Partnership* (?)☐ Yes ☒ No ☐ Unknown**Supporting Documentation Upload (?)**

3Form LLC W9 2025.pdf	129.13KB
COI for The Harris Center for Mental Health and IDD.pdf	5.46MB
WQ-1166099-Hush_Clad_Cut_Sheets__Rev_4.pdf	116.53KB
TIPS VENDOR ID 8445 CONTRACT 220802.pdf	433.17KB

Vendor/Contractor Contact Person**Name***

3Form LLC / Kylee Suliafu

Address*

Street Address

PO Box 736524

Address Line 2

City

Chicago

Postal / Zip Code

60673-6524

State / Province / Region

IL

Country

USA

Phone Number*

8016492571

Email*

kylee.suliafu@3-form.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9206	\$ 9,642.74	557001
Budget Manager		Secondary Budget Manager
Oshman, Jodel		Ramirez, Priscilla

Provide Rate and Rate Descriptions if applicable* (?)

see attached proposal

Project WBS (Work Breakdown Structure)* (?)

FM21.1126.02 NPC Renovations but not charging to project

Requester Name

Harper, Sarah

Submission Date

9/15/2025

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

9/19/2025

Procurement Approval

File Upload (?)

Approved by

Sharon Brauner

Approval Date

9/24/2025

Contract Owner Approval

Approved by

Karen E. Hurst

Approval Date

9/24/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Sunde

Approval Date*

9/24/2025



Executive Contract Summary

Contract Section

Contractor*

Avalon Event Rentals

Contract ID #*

na

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

Avalon Event Rentals and The Harris Center

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

☐ Yes ☒ No

Funding Information*

☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

10/1/2025

Contract Term End Date* (?)

10/15/2025

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

Fiscal Year* (?)

2026

Amount* (?)

\$ 5,501.38

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* (?)

tent rental for groundbreaking ceremony for 6168 Apartments on October 13th, 2025, NTE \$5501.38 charged to unit 1124 gl code 595000, Avalon Event Rental plus three other companies were contacted for pricing and are included below.

Contract Owner*

Karen Hurst

Previous History of Contracting with Vendor/Contractor*☐ Yes ☒ No ☐ Unknown**Vendor/Contractor a Historically Underutilized Business (HUB)* (?)**☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)**

Avalon Event Rentals-230846972 tent.pdf	158.05KB
Acme Reservation-18536 tent.pdf	270.1KB
Any Occasion-230813404 tent.pdf	175.07KB
Bright Quote-2804559 tent.pdf	185.9KB

Vendor/Contractor Contact Person**Name ***

Avalon Event Rentals

Address *

Street Address

6747 Signat Drive

Address Line 2

City

Houston

Postal / Zip Code

77041-2714

State / Province / Region

TX

Country

US

Phone Number *

7139743646

Email *

yvonne@avaloneventrentals.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1124	\$ 5,501.38	595000
Budget Manager		Secondary Budget Manager
Campbell, Ricardo		Moynihan, Kelly

Provide Rate and Rate Descriptions if applicable* (?)

see attached quote for Avalon Event Rentals

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Harper, Sarah

Submission Date

9/29/2025

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

9/29/2025

Procurement Approval

File Upload (?)

Approved by

Sharon Brauner

Approval Date

9/29/2025

Contract Owner Approval

Approved by

Karen E. Hurst

Approval Date

9/30/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

10/1/2025



Executive Contract Summary

Contract Section

Contractor*

Bud Griffin Customer Support, Inc.

Contract ID #*

7780

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

Bud Griffin and The Harris Center

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?

*

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2030

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

Fiscal Year* (?)

2025

Amount* (?)

\$ 4,500.00

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* (?)

Provides support and preventative maintenance on data center A/C units

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*☒ Yes ☐ No ☐ Unknown**Please add previous contract dates and what services were provided***

FY2011 - FY2025

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)☐ Yes ☒ No ☐ Unknown**Please provide an explanation***

N/A

Community Partnership* (?)☐ Yes ☒ No ☐ Unknown**Supporting Documentation Upload (?)**

FY2026 BGAAC Renewal.pdf	82.75KB
Griffin - ID 7780 - FY21 Standard Professional Contract.pdf	1.66MB

Vendor/Contractor Contact Person**Name***

Diana Harrell

Address*

Street Address

5010 Terminal Street

Address Line 2

Ste 203

City

Bellaire

Postal / Zip Code

77401-6007

State / Province / Region

TX

Country

US

Phone Number*

713-666-2828

Email*

dianaharrell@bgasales.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 4,500.00	553003
Budget Manager		Secondary Budget Manager
Campbell, Ricardo		Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

\$4500 per year for year 1

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Hurst, Richard

Submission Date

8/25/2025

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

8/25/2025

Procurement Approval

File Upload (?)

Approved by

Sharon Brauner

Approval Date

9/2/2025

Contract Owner Approval

Approved by

Mustafa Cochinnala

Approval Date

9/2/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/3/2025



Executive Contract Summary

Contract Section

Contractor*

The Methodist Hospital d/b/a Houston Methodist Hospital

Contract ID #*

2025-1116

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

9/16/2025

Parties* (?)

The Methodist Hospital d/b/a Houston Methodist Hospital ("Methodist") and The Harris Center ("Client")

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?

*

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

10/1/2025

Contract Term End Date* (?)

10/1/2027

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

Fiscal Year* (?)

2026

Amount* (?)

\$ 2,500.00

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* (?)

Providing a one-time service at the Employee Wellness Picnic on Friday, October 10, 2025.

Contract Owner*

Ninfa Escobar

Previous History of Contracting with Vendor/Contractor*☐ Yes ☐ No ☒ Unknown**Vendor/Contractor a Historically Underutilized Business (HUB)* (?)**☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)**

The Harris Center- WELLNESS SERVICES-07.23.25 LOA Draft.doc	89KB
W9-HMH-Inst Billing 2025.pdf	1.01MB

Vendor/Contractor Contact Person**Name***

Ashley Sandoval-Garza

Address*

Street Address

6445 Main, Suite P16-058

Address Line 2

City

Houston

Postal / Zip Code

77030

State / Province / Region

TX

Country

United States

Phone Number*

7134413384

Email*

aasandoval-garza@houstonmethodist.org

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1111	\$ 2,500.00	549009
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Abraham, Suja

Submission Date

8/19/2025

Budget Manager Approval(s)

Approved by

Kelly E. Moynihan

Approval Date

8/20/2025

Procurement Approval

File Upload (?)

Approved by

Nina Cook

Approval Date

8/27/2025

Contract Owner Approval

Approved by

Ninfa Escobar

Approval Date

9/3/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/5/2025



Executive Contract Summary

Contract Section

Contractor*

MasterWord Services, Inc.

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

9/16/2025

Parties* (?)

MasterWord Services, Inc

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?

*

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

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

Fiscal Year* (?)

2026

Amount* (?)

\$ 35,000.00

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 <input type="text"/> |

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

This vendor provides language competency services to ensure staff that are translating on behalf of the agency have the necessary competency to do so.

Contract Owner*

Ninfa Escobar

Previous History of Contracting with Vendor/Contractor*☒ Yes ☐ No ☐ Unknown**Please add previous contract dates and what services were provided***

09/01/2024-08/31/2025

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)****Vendor/Contractor Contact Person****Name***

Dawn Harris

Address*

Street Address

303 Stafford Street

Address Line 2

City

Houston

Postal / Zip Code

77079

State / Province / Region

Texas

Country

US

Phone Number*

281-589-0810, ext 8954

Email*

dharris@masterword.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1108	\$ 35,000.00	543018

Budget Manager

Moynihan, Kelly

Secondary Budget Manager

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

\$85 per Language Proficiency Assessment, \$125 per
Interpreter Skills Assessment

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name

Escobar, Ninfa

Submission Date

8/20/2025

Budget Manager Approval(s)

Approved by

Kelly E. Moynihan

Approval Date

8/20/2025

Procurement Approval

File Upload (?)

Approved by

Sharon Brauner

Approval Date

8/20/2025

Contract Owner Approval

Approved by

Ninfa Escobar

Approval Date

9/3/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/5/2025



**Due Diligence Project PUR-FY25-0351
Request for Quotes
ADA Accessibility Assessments**

Purchasing received a request from Eunice Davis, Director of Risk Management on Thursday July 17, 2025, for ADA Accessibility Assessments.

The Harris Center received quotes from three vendors for Professional Services to perform an on-site inspection for 14 sites. Vendor to provide on-site inspection services and analysis reports pursuant to compliance with the Americans with Disabilities Act (ADA).

Otten Consulting Group, Inc.:
\$13,970.00.

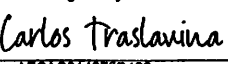
BMCUE Company:
\$8,000.00

Construction Code Consultants, L.L.C.
\$29,275.00.

Risk Management selected to move forward with Otten Consulting Group, Inc. They provided a thorough comprehensive proposal.

NTE: \$13,970.00
Total NTE:\$13,970.00
Funding Source is Unit 1117 – 595000
Term: One year (1) from Initial Start Date.

Submitted By:

DocuSigned by:

AECAC0148758482
Carlos Traslavina
Purchasing, Buyer I

Recommended By:

DocuSigned by:

258C3C3A8EF9418
Sharon Brauner, C.P.M., A.P.P
Purchasing Manager
DocuSigned by:

E758EDD68CF04D3
Stanley Adams, MBA
Chief Financial Officer



Executive Contract Summary

Contract Section

Contractor*

Otten Consulting Group Inc

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

8/19/2025

Parties* (?)

Otten Consulting Group Inc and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☒ Yes ☐ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

8/1/2025

Contract Term End Date* (?)

8/31/2026

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

4 years

Fiscal Year* (?)

2025

Amount* (?)

\$ 13,970.00

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* (?)

Professional Services to perform an on-site inspection for 14 sites. Vendor to provide on-site inspection services and analysis reports pursuant to compliance with the ADA.

Contract Owner*

Eunice Davis

Previous History of Contracting with Vendor/Contractor*

☐ Yes ☒ No ☐ Unknown

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

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☐ Yes ☒ No ☐ Unknown

Supporting Documentation Upload (?)

ADA ACCESSIBILITY ASSESSMENTS - PRICE LIST.xlsx	9.21KB
COI CERTIFICATE OF LIABILITY INSURANCE.pdf	134.37KB
DEBARRED VENDOR LIST.pdf	26.06KB
Due_Diligence_ADA_Accessibility_Assessments Signed.pdf	301.01KB
FRANCHISE TAX.pdf	37.21KB
Project Request - ADA Accessibility Assessments.pdf	57.11KB
SAM.GOV.pdf	186.4KB
W-9 OTTEN CONSULTING GROUP INC..pdf	136.93KB

Vendor/Contractor Contact Person**Name***

Kenneth Otten

Address*

Street Address

7171 Highway 6 North ste 285

Address Line 2

City

Houston

Postal / Zip Code

77095-2563

State / Province / Region

TX

Country

US

Phone Number*

7134803994

Email *

kenotten@statereview.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1117	\$ 13,970.00	542000
Budget Manager		Secondary Budget Manager
Moynihan, Kelly		Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

14 Locations ADA Accessibility Assessments: 1151 Bob White Dr; 1502 Taub Loop; 2122 Wichita; 2505 Southmore; 2627 Caroline; 3737 Dacoma; 526 Applewhite; 5707 Warm Springs; 5901 Long Dr; 6032 Airline Dr; 7200 N. Loop E.; 9401 SW Frwy; 3809 Main; 1104 Alabama.

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name

Bailey, Christan

Submission Date

7/30/2025

Budget Manager Approval(s)

Approved by

Kelly E. Moynihan

Approval Date

7/30/2025

IT Director Approval

Approved by

Anthony Jones

Approval Date

7/30/2025

IT Approval Comments

This agreement does not contain any services or software regarding Information Technology.

Procurement Approval

File Upload (?)

Approved by

Sharon Brauner

Approval Date

7/31/2025

Contract Owner Approval



Approved by

Eunice F Davis

Approval Date

8/1/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

8/1/2025



**Due Diligence Project PUR-FY25-0349
Request for Quotes (RFQ)
Northeast Community Wellness Center -Material Testing**

Purchasing received a request from Jonathan Pertuit, Senior Project Manager of Construction, on Tuesday, July 8, 2025, for Northeast Community Wellness Center -Material Testing.

Three (3) vendor quotes were provided by mStrategic Partners:

- 1) Omega Associate & Engineers LLC:
Proposal \$25,097.00
- 2) Terracon:
Proposal \$88,275.00
- 3) Professional Service Industries, Inc. (PSI) is a subsidiary of Intertek Group, PLC. (Intertek)
Proposal \$30,957.50

Facility Services and mStrategic Partners' recommendation is to move forward with Professional Service Industries, Inc. (PSI), a subsidiary of Intertek Group, PLC (Intertek).

NTE: \$30,957.50
Contingency \$15,000.00
Total NTE:\$45,957.50
Funding Source is Unit 1126 – 900040
Term: Initial Star Date to 8/31/2026.

Submitted By:

DocuSigned by:

258C3C5A8EF941B
Sharon Brauner, C.P.M., A.P.P.
Purchasing Manager

Recommended By:

DocuSigned by:

5163F408131274C8
Nina Cook, MBA, CTCM, CTCD.
Director of Purchasing
DocuSigned by:

2758E0D68CFC4D3...
Stam Adams, MBA
Chief Financial Officer



Executive Contract Summary

Contract Section


Contractor*

Professional Service Industries, Inc.

Contract ID #*

new

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

Intertek PSI and The Harris Center

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

☐ Yes ☒ No

Funding Information*

☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/15/2025

Contract Term End Date* (?)

8/31/2027

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

Fiscal Year* (?)

2026

Amount* (?)

\$ 46,000.00

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/Description of Services Being Provided* (?)

materials testing services requested for NE Wellness Center construction project

Contract Owner*

Karen Hurst

Previous History of Contracting with Vendor/Contractor*☒ Yes ☐ No ☐ Unknown**Please add previous contract dates and what services were provided***

Feb 2024 to present - materials testing

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)☐ Yes ☒ No ☐ Unknown**Please provide an explanation***

does not meet criteria

Community Partnership* (?)☐ Yes ☒ No ☐ Unknown**Supporting Documentation Upload (?)**

debarred-vendor-list (13).pdf	67.8KB
Intertek PSI (006) quote.pdf	887.73KB
Intertek PSI COI 2024 -2025.pdf	123.64KB
Northeast Community Wellness Center Material Testing-Docusign_Due_Diligence final-7-29-25sb.pdf	332.46KB
RE Project Request Received 244 - Northeast Community Wellness Center-Material Testing -Need W9 Question (DBA not listed).msg	376.5KB
Tab-THC_NE Clinic_Mat Testing Bid Tab_2025.06.05 (003).pdf	209.77KB
Tax Documents- 20250710_PROFESSIONAL SERVICE INDUSTRIES, INC.pdf	899.44KB
W9 PSI 2025.pdf	64.67KB

Vendor/Contractor Contact Person**Name***

Intertek PSI / Kolitha Karunaratne

Address*

Street Address

3730 Dacoma Street

Address Line 2

City

Houston

Postal / Zip Code

77092-8906

State / Province / Region

TX

Country

US

Phone Number*

7132242047 / 8326876739

Email*

kolitha.karunaratne@intertek.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No. *
8001	\$ 46,000.00	900040
Budget Manager		Secondary Budget Manager
Campbell, Ricardo		Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

see attached documentation - \$46,000.00 NTE in
8001/900040

Project WBS (Work Breakdown Structure)* (?)

BP24.8001.01 Northwest Clinic Design and Construction

Requester Name

Harper, Sarah

Submission Date

8/21/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

8/22/2025

Procurement Approval**File Upload (?)****Approved by***Sharon Brauner***Approval Date**

9/2/2025

Contract Owner Approval

Approved by

Karen E. Hurst

Approval Date

9/3/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/10/2025

Executive Contract Summary

Contract Section

Contractor*

Angelica Padilla d/b/a Lice Care Solutions, LLC

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

9/16/2025

Parties* (?)

Angelica Padilla d/b/a Lice Care Solutions, LLC and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

☐ Yes ☒ No

Funding Information*

☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

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

Fiscal Year* (?)

2026

Amount* (?)

\$ 3,300.00

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 <input type="text"/> |

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

Contractor will provide lice removal services for consumers at the Neuropsychiatric Center, Respite Rehabilitation and Re-Entry Center locations. Services also include education and training for Agency staff working with consumers.

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

Currently under contract.

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

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☐ Yes ☐ No ☒ Unknown

Supporting Documentation Upload (?)**Vendor/Contractor Contact Person****Name ***

Angelica Padilla

Address *

Street Address

3262 Westheimer Road

Address Line 2

City

Houston

Postal / Zip Code

77098

State / Province / Region

TX

Country

US

Phone Number*

800 - 492- 5423

Email *

billing@licecaresolutions.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9403	\$ 1,200.00	543053

Budget Manager	Secondary Budget Manager
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9261	\$ 1,200.00	543053

Budget Manager	Secondary Budget Manager
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9502	\$ 300.00	543053

Budget Manager	Secondary Budget Manager
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9405	\$ 600.00	543053

Budget Manager	Secondary Budget Manager
Ramirez, Priscilla	Puente, Giovanni

Provide Rate and Rate Descriptions if applicable* (?)

Based on the current contract.

Project WBS (Work Breakdown Structure)* (?)

na

Requester Name	Submission Date
Singh, Patricia	8/14/2025

Budget Manager Approval(s)

Approved by

Priscilla M. Ramirez

Approval Date

8/27/2025

Procurement Approval

File Upload (?)

Approved by

Sharon Brauner

Approval Date

9/2/2025

Contract Owner Approval

Approved by

Kim Kornmayer

Approval Date

9/8/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/9/2025

EXHIBIT R-7

OCTOBER 2025 AMENDMENTS UNDER 100k



Executive Contract Summary

Contract Section

Contractor*

CU Solutions Group, Inc. d/b/a HR Performance Solutions

Contract ID #*

7160

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center and HR Performance Solutions

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

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

Current Contract Amount*

\$ 24,000.00

Increase Not to Exceed*

\$ 2,286.19

Revised Total Not to Exceed (NTE)*

\$ 26,286.19

Fiscal Year* (?)

2026

Amount* (?)

\$ 26,286.19

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☐ Amendment to Existing Contract
☐ Service/Maintenance
☒ IT/Software License Agreement
☐ Lease
☐ Other

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

This software provides employee appraisals and performance metric tracking

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*
☒ Yes
 ☐ No
 ☐ Unknown
Please add previous contract dates and what services were provided*

FY2020-FY2025

Performance Appraisals

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)
☐ Yes
 ☐ No
 ☒ Unknown
Community Partnership* (?)
☐ Yes
 ☒ No
 ☐ Unknown
Supporting Documentation Upload (?)

7160 - SI-HRPS_non cu_RNW-INV-152193.pdf

210.72KB

Annual Renewal Evaluation.pdf

366.85KB

June Board.pdf

72.45KB

Vendor/Contractor Contact Person**Name***

HR Performance Solutions

Address *

Street Address

P.O. Box 190

Address Line 2

City

Royal Oak

Postal / Zip Code

48068-6800

State / Province / Region

MI

Country

USA

Phone Number *

1-800-940-7522

Email *

billing@hrperformancesolutions.net

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1130	\$ 26,286.19	553002
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

See attached

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name

Hurst, Richard

Submission Date

9/5/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

9/5/2025

Contract Owner Approval**Approved by***Mustafa Cochinvala***Approval Date**

9/8/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/11/2025



Executive Contract Summary

Contract Section

Contractor*

Texas Suicide Prevention Collaborative

Contract ID #*

2023-0610

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

The Harris Center for Mental Health and IDD and Texas Suicide Prevention Collaborative

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 Grant Required |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

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

Current Contract Amount*

\$ 25,000.00

Increase Not to Exceed*

\$ 30,000.00

Revised Total Not to Exceed (NTE)*

\$ 55,000.00

Fiscal Year* (?)

2026

Amount* (?)

\$ 55,000.00

Funding Source*

State Grant

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

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

Required training for Zero Suicide grant

Contract Owner*

Trudy Leidich

Previous History of Contracting with Vendor/Contractor*
☒ Yes ☐ No ☐ Unknown
Please add previous contract dates and what services were provided*

2023-current

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)
☐ Yes ☐ No ☒ Unknown
Community Partnership* (?)
☐ Yes ☒ No ☐ Unknown
Supporting Documentation Upload (?)**Vendor/Contractor Contact Person****Name***

Lisa Sullivan

Address *

Street Address

on file

Address Line 2

City

on file

Postal / Zip Code

on file

State / Province / Region

Texas

Country

USA

Phone Number *

on file

Email *

lisa.sullivan@texassuicideprevention.org

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1182	\$ 55,000.00	542000
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable * (?)

The cost of each class at \$24,500

Two classes totaling \$49,000

Plus a \$3,000 change fee per class

Bringing the total to \$55,000

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name

Bittner, Tiffany

Submission Date

9/8/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

9/8/2025

Contract Owner Approval**Approved by***Trudy Leidich***Approval Date**

9/11/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/12/2025



Executive Contract Summary

Contract Section

Contractor*

New Parking Topco LLC/DBA Lanier Parking Meter Services LLC

Contract ID #*

7717

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

New Parking Topco LLC DBA Lanier Parking Meter Services LLC and The Harris Center for MH and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

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

Current Contract Amount*

\$ 83,680.00

Increase Not to Exceed*

\$ 12,050.00

Revised Total Not to Exceed (NTE)*

\$ 95,730.00

Fiscal Year* (?)

2026

Amount* (?)

\$ 95,730.00

Funding Source*

County

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

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

Parking spaces are being provided for the Jail staff who provide services at 1200 Baker St - Harris County Sheriff's Office.

Contract Owner*

Sean McElroy

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

September 1, 2024 - August 31, 2025, parking spaces utilized by the 105 Harris Center staff who are housed at the Harris County Sheriff's Office (1200 Baker St.).

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

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☐ Yes ☐ No ☒ Unknown

Supporting Documentation Upload (?)

2025 Form W9 - NEW PARKING TOPCO LLC for LANIER PARKING METER SERVICES LLC (Atlanta New).pdf 2.78MB

ID 7717 - Lanier Reef Parking - FY24-FY25 Parking Lease Agreement - Fully Executed (2).pdf 464.63KB

Vendor/Contractor Contact Person**Name***

Natalie Talerico

Address *

Street Address

1401 Congress Street

Address Line 2

City

Houston

State / Province / Region

Texas

Postal / Zip Code

77002

Country

United States

Phone Number *

346-833-5646

Email *

natalie.talerico@reimaginedparking.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
6202	\$ 91,180.00	544005

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Jiles, Monalisa

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1131	\$ 4,550.00	544005

Budget Manager

Smith, Janai

Secondary Budget Manager

Shelby, Debbie

Provide Rate and Rate Descriptions if applicable* (?)

Parking space is \$70 per month, per staff member. An extra month (13 months) was calculated into the amount charged to each unit to ensure as appropriate funding is available as there is currently a late invoice that has not been paid for FY25 due to limited funds available. Therefore, this invoice will be paid in FY26, so extra funds were allocated in each unit including late fee charges.

Project WBS (Work Breakdown Structure) * (?)

Not Applicable.

Requester Name

Williams-Wesley, Sheenia

Submission Date

9/3/2025

Budget Manager Approval(s)

Approved by

Shenica Williams-Wesley

Approval Date

9/3/2025

Approved by

Debbie Chambers-Shelby

Approval Date

9/4/2025

Procurement Approval



File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval



Approved by

Sean McElroy

Approval Date

9/8/2025

Contracts Approval

Approve *

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

Approved by *

Belinda Stude

Approval Date *

9/9/2025

EXHIBIT R-8

OCTOBER 2025 RENEWALS UNDER 100k

OCTOBER 2025
FISCAL YEAR 2026

[illegible]



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID# *

2021-0047

Contractor Name *

BoardBookIt, Inc. d/b/a Govenda

Service Provided* (?)

Board Portal to make Board Process easier and materials easily accessible

Renewal Term Start Date *

1/16/2026

Renewal Term End Date *

1/15/2027

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 15,000.00

Rate(s)/Rate(s) Description

Unit(s) Served*

1101

G/L Code(s)*

542000

Current Fiscal Year Purchase Order Number*

CT144544

Contract Requestor*

Veronica Franco

Contract Owner*

Wayne Young

File Upload (?)

Evaluation of Current Fiscal Year Performance

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

☐ Yes ☒ No

Were Services delivered as specified in the contract? *

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

Renewal Determination

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

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities? *

Board of Trustees Platform for Board Packets

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1101	\$ 3,000.00	551003

Budget Manager*	Secondary Budget Manager*
Campbell, Ricardo	Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Fiscal Year* (?)	Amount* (?)
2026	\$ 3,000.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes

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

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner

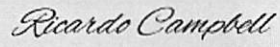
Contract Owner* (?)

Please Select Contract Owner

Wayne Young

Budget Manager Approval(s)

Approved by



Contract Owner Approval



Approved by

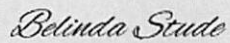


Contracts Approval

Approve*

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

Approved by*



Approval Date*

9/18/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID# *

7844

Contractor Name *

Carahsoft Technology Corporation

Service Provided* (?)

DocuSign Enterprise Pro Software. Tag-on to DIR-TSO-4288. Please check for renewal of tag-on.

Renewal Term Start Date *

10/2/2025

Renewal Term End Date *

10/1/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 DIR-TSO-4288 |

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 Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 36,844.00

Rate(s)/Rate(s) Description

N/A

Unit(s) Served*

1130

G/L Code(s)*

553002

Current Fiscal Year Purchase Order Number*

CT144118

Contract Requestor*

Rick Hurst

Contract Owner*

Mustafa Cochinwala

File Upload (?)

Evaluation of Current Fiscal Year Performance

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

☐ Yes ☒ No

Were Services delivered as specified in the contract? *

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

Renewal Determination

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

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities? *

N/A

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 41,503.36	553002

Budget Manager*

Campbell, Ricardo

Secondary Budget Manager*

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

See attached quote

Project WBS (Work Breakdown Structure)* (?)

N/A

Fiscal Year* (?)

2026

Amount* (?)

\$ 41,503.36

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



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

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

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

☒ Yes ☐ No

Please Explain*

The new tag-on is DIR-CPO-5687. It is attached for reference.

File Upload (?)

Carasoft-DocuSign_FY26.pdf

235.58KB

DIR-CPO-5687_Carasoft.pdf

206.33KB

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Mustafa Cochinwala

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Contract Owner Approval

Approved by

Mustafa Cochinwala

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/26/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID#*

2024-0840

Contractor Name*

Council for Affordable Quality Healthcare, Inc.

Service Provided* (?)

CAQH will provide Credentialing Software via a Provider Data Portal that eliminates duplicative paperwork for organizations that may require provider profile information for claims administration, credentialing, directory services, and more.

Renewal Term Start Date*

9/1/2025

Renewal Term End Date*

8/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
☐ No
☒ Unknown

Contract NTE* (?)

\$ 7,640.00

Rate(s)/Rate(s) Description

PROVIEW \$3000 annual fee. \$5.28 (500) per provider billed annually. 1147 / 553002: \$5,640.00. 1147 / 553003: \$2,000.00.

Unit(s) Served*

1147

G/L Code(s)*

553002, 553003

Current Fiscal Year Purchase Order Number*

CT144830

Contract Requestor*

Rick Hurst

Contract Owner*

Mustafa Cochinwala

File Upload (?)**Evaluation of Current Fiscal Year Performance**

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

- ☐ Yes ☒ No

Were Services delivered as specified in the contract? *

- ☒ Yes ☐ No

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

- ☒ Yes ☐ No

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

- ☒ Yes ☐ No

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

- ☒ Yes ☐ No

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

- ☒ Yes ☐ No

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

- ☒ Yes ☐ No

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

- ☒ Yes ☐ No

Renewal Determination

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

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities? *

CAQH enables providers and group administrators to enter information once, and share it with all plans they authorize. This reduces administrative burden and errors, and allows practices to focus on patient care

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1130	\$ 5,553.00	553002

Budget Manager *

Campbell, Ricardo

Secondary Budget Manager *

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable * (?)

See Attached

Project WBS (Work Breakdown Structure) * (?)

N/A

Fiscal Year * (?)

2026

Amount * (?)

\$ 5,553.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source *

General Revenue (GR)

Contract Content Changes

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

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

FY2026 CAQH 09012025 - 08312026.pdf

523.31KB

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Mustafa Cochinwala

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Contract Owner Approval

Approved by

Mustafa Cochinwala

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

10/2/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2025

Contract ID# *

2021-0289

Contractor Name *

Headspace, Inc.

Service Provided* (?)

Sole Source Request- Headspace for Work Platform

Renewal Term Start Date *

9/1/2025

Renewal Term End Date *

8/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 28,980.00

Rate(s)/Rate(s) Description

Unit(s) Served*

2213

G/L Code(s)*

549005

Current Fiscal Year Purchase Order Number*

CT143556

Contract Requestor*

Chekesha Govan

Contract Owner*

Lance Britt

File Upload (?)

Evaluation of Current Fiscal Year Performance

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

☐ Yes ☒ No

Were Services delivered as specified in the contract? *

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

Renewal Determination

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

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities? *

Sole Source Request-Headspace for Work Platform

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1111	\$ 28,980.00	549009
Budget Manager*		Secondary Budget Manager*
Moynihan, Kelly		Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

0.00

Project WBS (Work Breakdown Structure)* (?)

0.00

Fiscal Year* (?)

2025

Amount* (?)

\$ 28,980.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

State Grant

Contract Content Changes



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

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Lance Britt

Budget Manager Approval(s)



Approved by

Kelly E. Meynihan

Contract Owner Approval



Approved by

Lance Britt

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/9/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2025

Contract ID#*

2023-0756

Contractor Name*

Health Care for Special Population d/b/a PCIC

Service Provided* (?)

Unified Care Continuum Platform Community Data Exchange (CDX) Services

Renewal Term Start Date*

9/1/2025

Renewal Term End Date*

8/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 none |

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 Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 21,794.00

Rate(s)/Rate(s) Description**Unit(s) Served***

1148

G/L Code(s)*

574000

Current Fiscal Year Purchase Order Number*

CT144075

Contract Requestor*

Dr. Scott Hickey

Contract Owner*

Dr. Scott Hickey

File Upload (?)**Evaluation of Current Fiscal Year Performance****Have there been any significant performance deficiencies within the current fiscal year? ***☐ Yes ☒ No**Were Services delivered as specified in the contract? ***☒ Yes ☐ No**Did Contractor perform duties in a manner consistent with standards of the profession? ***☒ Yes ☐ No**Did Contractor adhere to the contracted schedule? * (?)**☒ Yes ☐ No**Were reports, billing and/or invoices submitted in a timely manner? * (?)**☒ Yes ☐ No**Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? * (?)**☒ Yes ☐ No**Did Contractor render services consistent with Agency policy and procedures? * (?)**☒ Yes ☐ No**Maintained legally required standards for certification, licensure, and/or training? * (?)**☒ Yes ☐ No**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor? * (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities? ***

Community needs assessment data and outcomes management support.

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1148	\$ 21,794.00	574000

Budget Manager*	Secondary Budget Manager*
Moynihan, Kelly	Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

NA

Project WBS (Work Breakdown Structure)* (?)

NA

Fiscal Year* (?)

2026

Amount* (?)

\$ 21,794.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



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

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Dr. Scott Hickey

Budget Manager Approval(s)



Approved by

Kelly E. Moynihan

Contract Owner Approval



Approved by

Scott Hickey

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/18/2025

Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID#*

2021-0288

Contractor Name*

Pinnacle Business Solutions, LLC

Service Provided* (?)

Pharmacy Patient Medication Delivery Services

Renewal Term Start Date*

9/1/2025

Renewal Term End Date*

8/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 10,000.00

Rate(s)/Rate(s) Description

N/A

Unit(s) Served*

2200

G/L Code(s)*

542000

Current Fiscal Year Purchase Order Number*

CT144059

Contract Requestor*

Teri Garland

Contract Owner*

Holly Cumbie

File Upload (?)

Evaluation of Current Fiscal Year Performance

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

☐ Yes ☒ No

Were Services delivered as specified in the contract? *

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

Renewal Determination

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

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities? *

Patient access to care

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2200	\$ 10,000.00	577000

Budget Manager*	Secondary Budget Manager*
Shelby, Debbie	Smith, Janai

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Fiscal Year* (?)	Amount* (?)
2026	\$ 10,000.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



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

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Holly Cumbie

Budget Manager Approval(s)



Approved by

Debbie Chambers Shelby

Contract Owner Approval



Approved by

Holly Cumbie

Contracts Approval

Approve *

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

Approved by *

Belinda Stude

Approval Date *

10/6/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2025

Contract ID# *

2022-0520

Contractor Name *

Annie Vu

Service Provided* (?)

Respite & Community First Choice (CFC) - Personal Assistance Services/Habilitation (PAS/HAB)

Renewal Term Start Date *

9/1/2025

Renewal Term End Date *

8/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
- ☐ No
- ☒ Unknown

Contract NTE* (?)

\$ 22,580.00

Rate(s)/Rate(s) Description

543005 \$7,500.00; 543009 \$15,080.00

Unit(s) Served*

3585

G/L Code(s)*

543005; 543009

Current Fiscal Year Purchase Order Number*

CT144164

Contract Requestor*

Rosa Wells

Contract Owner*

Dr. Evanthe Collins

File Upload (?)

Evaluation of Current Fiscal Year Performance

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

☐ Yes ☒ No

Were Services delivered as specified in the contract? *

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

Renewal Determination

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

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities?*

the contract will provide Respite and Community First Choice Service (CFC)-pAS/HAB to a TxHmL Waiver Individual.

Renewal Information for Next Fiscal Year**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3585	\$ 15,080.00	543009

Budget Manager*	Secondary Budget Manager*
Degracia, Ericka	Collins, Evanthe

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3585	\$ 7,500.00	54305

Budget Manager*	Secondary Budget Manager*
Degracia, Ericka	Collins, Evanthe

Provide Rate and Rate Descriptions if applicable* (?)

Rate \$11.50 per hour. Community First Choice (CFC) is personalized support or training provided to the Individual serviced,

Project WBS (Work Breakdown Structure)* (?)

\$11.50 Per hour. Respite service offers temporary relief to the main caregiver

Fiscal Year* (?)	Amount* (?)
2026	\$ 22,580.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

N/A

Contract Funding Source*

Federal

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

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Dr. Evanthe Collins

Budget Manager Approval(s)

Approved by

Erica Degracia

Contract Owner Approval

Approved by

Evanthe Collins

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

8/29/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID# *

2024-0938

Contractor Name *

Empower Parent, Inc. d/b/a MST Services LLC

Service Provided* (?)

MST Services and Training services which is under the TDFPS grant.

Renewal Term Start Date *

9/1/2025

Renewal Term End Date *

8/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
- ☐ No
- ☒ Unknown

Contract NTE* (?)

\$ 73,550.00

Rate(s)/Rate(s) Description

Annual Licensing Fees: Master License: \$4,750 per year per agency - \$0 (Waived since Harris Center already pays agency fee for other teams) Team License: \$2,950 per team per agency Program Development and Start-up fees: \$14,500 plus travel* Annual Program Support and Training fees: Single team programs: \$37,200 per year Additional required third-party services: TAM data collection services provided by the MST Institute is a required part of program implementation at a cost of \$6,000 per team per year. Other Services (provided by MST Services): Supervisor Orientation and other Supervisor \$450 per person x 2=\$900 Workshops (exc. travel expenses) Reimbursed travel for Site Assessment (1 trip), Orientation Training (1 trip), Booster Trainings (4 trips) Total of 6 trips @ \$2,000/trip (estimate-billed at cost) \$12,0000 Total estimated Year 1 fees: \$73,550

Unit(s) Served*

4161

G/L Code(s)*

542000

Current Fiscal Year Purchase Order Number*

PO CT144470

Contract Requestor*

Mohagany Bowser

Contract Owner*

Tiffanie Williams-Brooks

File Upload (?)**Evaluation of Current Fiscal Year Performance**

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

☐ Yes ☒ No

Were Services delivered as specified in the contract?*

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

Renewal Determination

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

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities? *

To provide training and supervision to The Harris Center for MST Team, and to increase continuity of services for juveniles leaving the Juvenile Detention Center and MST Services by aligning resources with our mission to transform lives, advancing our vision of accessible and integrated care, and upholding our core values. It enables us to strengthen collaboration, ensure service quality, and meets the evolving needs of our community.

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
4161	\$ 73,550.00	542000
Budget Manager *	Secondary Budget Manager *	
Smith, Janai	Shelby, Debbie	

Provide Rate and Rate Descriptions if applicable * (?)

Annual Licensing Fees: Master License: \$4,750 per year per agency - \$0 (Waived since Harris Center already pays agency fee for other teams) Team License: \$2,950 per team per agency Program Development and Start-up fees: \$14,500 plus travel* Annual Program Support and Training fees: Single team programs: \$37,200 per year Additional required third-party services: TAM data collection services provided by the MST Institute is a required part of program implementation at a cost of \$6,000 per team per year. Other Services (provided by MST Services): Supervisor Orientation and other Supervisor \$450 per person x 2=\$900 Workshops (exc. travel expenses) Reimbursed travel for Site Assessment (1 trip), Orientation Training (1 trip), Booster Trainings (4 trips) Total of 6 trips @ \$2,000/trip (estimate-billed at cost) \$12,0000 Total estimated Year 1 fees: \$73,550

Project WBS (Work Breakdown Structure) * (?)

N/A

Fiscal Year * (?)	Amount * (?)
2026	\$ 73,550.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

State Grant

Contract Content Changes

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

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Tiffanie Williams-Brooks

Budget Manager Approval(s)

Approved by

*Tanai Lynnette Smith***Contract Owner Approval**

Approved by

*Tiffanie Williams-Brooks, M.A., L.P.C.***Contracts Approval**

Approve*

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

Approved by *

Belinda Stude

Approval Date *

9/23/2025

EXHIBIT R-9

OCTOBER 2025

**AFFILIATION AGREEMENTS,
GRANTS, MOU'S AND
REVENUES
INFORMATION ONLY**



Executive Contract Summary

Contract Section



Contractor*

Lines for Life YouthLine Program

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

Lines for Life and The Harris Center for Mental Health and IDD

Agenda Item Submitted For:* (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?

*

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/3/2025

Contract Term End Date* (?)

9/3/2026

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

Fiscal Year* (?)

2026

Amount* (?)

\$ 0.00

Funding Source*

Private Pay 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 <input type="text"/> |

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

This is solely and MOU with Lines for Life Youthline for them to offer trainings to The Harris Center Crisis Line Team so The Harris Center Crisis Line Team can make referrals to the Youthline as warranted.

Contract Owner*

Jennifer Battle

Previous History of Contracting with Vendor/Contractor*

☐ Yes ☒ No ☐ Unknown

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

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☐ Yes ☐ No ☒ Unknown

Supporting Documentation Upload (?)

YL 988 MOU_rev 6-26-25.docx

33.17KB

Vendor/Contractor Contact Person**Name***

Emily Moser

Address*

Street Address

5100 S Macadam Ave.

Address Line 2

City

Portland

Postal / Zip Code

97239

State / Province / Region

Oregon

Country

USA

Phone Number*

(877) 968-8491

Email*

emilym@linesforlife.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
7001	\$ 0.00	0

Budget Manager

Ilejay, Kevin

Secondary Budget Manager

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

0

Project WBS (Work Breakdown Structure)* (?)

0

Requester Name

Battle, Jennifer

Submission Date

9/3/2025

Budget Manager Approval(s)

Approved by

Kevin Ilejay

Approval Date

9/3/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Jennifer Battle

Approval Date

9/3/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/5/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2025

Contract ID#*

2024-0843

Contractor Name*

The Party Sober Partnership

Service Provided* (?)

Organization and Partner enter into this MOU to form a partnership that will host and promote sober, social events in the Houston area.

Renewal Term Start Date*

1/1/2026

Renewal Term End Date*

12/31/2026

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ 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 Business (HUB) (?)

- ☐ Yes
- ☐ No
- ☒ Unknown

Contract NTE* (?)

\$ 500.00

Rate(s)/Rate(s) Description

Unit(s) Served*

1101

G/L Code(s)*

542000

Current Fiscal Year Purchase Order Number*

CT143583

Contract Requestor*

Shiela Oquin

Contract Owner*

Keena Pace

File Upload (?)

Evaluation of Current Fiscal Year Performance

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

☐ Yes ☒ No

Were Services delivered as specified in the contract?*

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

☒ Yes ☐ No

Renewal Determination

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

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities?*

Community Partnerships

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1101	\$ 500.00	542000
Budget Manager*	Secondary Budget Manager*	
Campbell, Ricardo	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

Na

Project WBS (Work Breakdown Structure)* (?)

NA

Fiscal Year* (?)

2026

Amount* (?)

\$ 500.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



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

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

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

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

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

☐ Yes ☒ No

File Upload (?)

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Keena Pace

Budget Manager Approval(s)



Approved by

Ricardo Campbell

Contract Owner Approval



Approved by

Keena Pace

Contracts Approval

Approve *

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

Approved by *

Belinda Stude

Approval Date *

9/29/2025



Executive Contract Summary

Contract Section


Contractor*

UNITED HEALTHCARE SERVICES, INC.

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

UNITED HEALTHCARE SERVICES, INC. and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?

*

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

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

Fiscal Year* (?)

2026

Amount* (?)

\$ 0.00

Funding Source*

Federal

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* (?)

To coordinate on CFC assessments, reassessments, service planning, and service authorization for members. United and LIDDA agree that no compensation will be owed to either party for the services described in MOU.

See attached supporting documentation for detailed description.

Contract Owner*

Dr. Evanthe Collins

Previous History of Contracting with Vendor/Contractor*

☐ Yes ☐ No ☒ Unknown

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

☐ Yes ☒ No ☐ Unknown

Please provide an explanation*

They do not meet the criteria

Community Partnership* (?)

☒ Yes ☐ No ☐ Unknown

Specify Name*

UNITED HEALTHCARE SERVICES, INC.

Supporting Documentation Upload (?)

STAR+PLUS - LIDDA - MOU The Harris Center for Mental Health and IDD
09082025.pdf

156.9KB

Vendor/Contractor Contact Person**Name***

Maria Moreland

Address*

Street Address

2950 North Loop West, Suite 200

Address Line 2

City

HOUSTON

Postal / Zip Code

77092-8843

State / Province / Region

Texas

Country

United States

Phone Number*

832-550-6504

Email*

maria_d_moreland@uhc.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3418	\$ 0.00	0

Budget Manager

Degracia, Ericka

Secondary Budget Manager

Collins, Evanthe

Provide Rate and Rate Descriptions if applicable* (?)

No compensation will be owed to either party for the services described in MOU.

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Degracia, Ericka

Submission Date

10/1/2025

Budget Manager Approval(s)

Approved by

Ericka Degracia

Approval Date

10/1/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Evanthe Collins

Approval Date

10/3/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

10/6/2025

Executive Contract Summary

Contract Section

Contractor*

Bello Amanecer

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

Bello Amanecer HCS Provider would like to contract with The Harris Center for Mental Health & IDD for both on-site and off-site ISS Services

Agenda Item Submitted For:* (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ 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 |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?*

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

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

NA

Fiscal Year* (?)

2026

Funding Source*

State

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☒ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☐ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

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

This contract will generate revenue for the department.

Contract Owner*

Dr. Evanthe Collins

Previous History of Contracting with Vendor/Contractor*☐ Yes ☒ No ☐ Unknown**Vendor/Contractor a Historically Underutilized Business (HUB)*** (?)☐ Yes ☐ No ☒ Unknown**Community Partnership*** (?)☐ Yes ☒ No ☐ Unknown**Supporting Documentation Upload** (?)**Vendor/Contractor Contact Person****Name***

Shaneka Swayzer

Address*

Street Address

12080 East Freeway

Address Line 2

City

Houston

Postal / Zip Code

77029

State / Province / Region

TX

Country

US

Phone Number*

281.501.1836 ext. 1

Email*

Bellohcs@gmail.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3585	\$ 0.00	543008

Budget Manager

Degracia, Ericka

Secondary Budget Manager

Collins, Evanthe

Provide Rate and Rate Descriptions if applicable* (?)

Rates for ISS Services are based on the consumers served
LON

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name

Wills, Thomas

Submission Date

8/27/2025

Budget Manager Approval(s)

Approved by

Ericka Degracia

Approval Date

8/28/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Evanthe Collins

Approval Date

9/4/2025

Contracts Approval

Approve*

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

Approved by*

Belinda Stude

Approval Date*

9/9/2025

EXHIBIT R-10

Transforming Lives



Financials by Clinic + NPC

Q4FYTD FY2024



October 15, 2024

Presented By: Stanley Adams, Chief Financial Officer

Northwest Community Service Center

FY2024 Q4 Financial Performance

Revenues	\$17,196,933
Expenses	<u>(\$21,816,919)</u>
Gross Margin	(\$4,619,919)

Clinic Information

Address	3737 Dacoma St
Facility Size	40,000 Sq Ft
Clinic FTE's	148

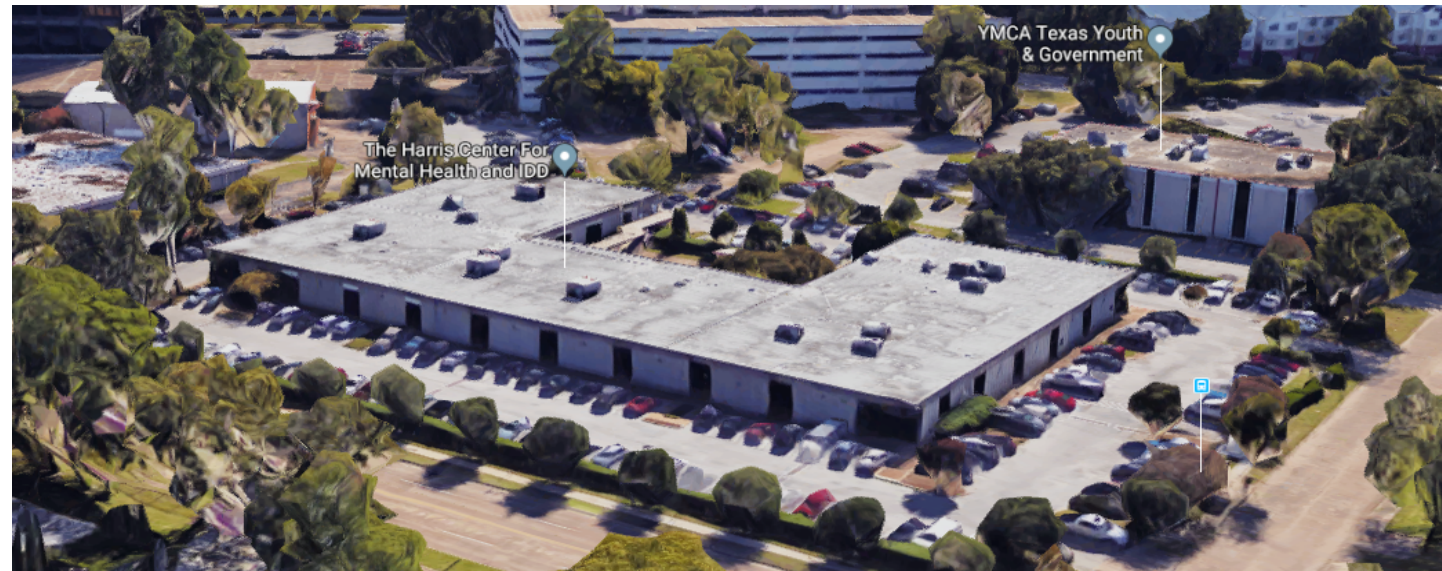
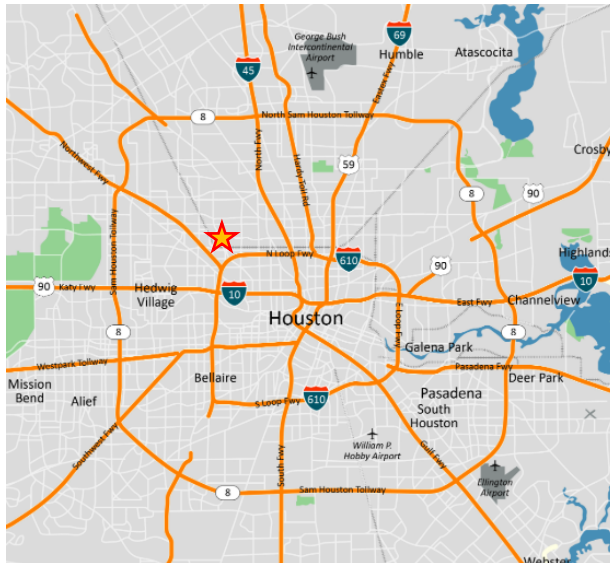
FY2024 Clinical Performance

Annual Patient Visits	26549
Average Monthly Patient V	2212
Average No Show	38.00%
Average Patient Wait Time	32 Minutes
Average Third Next Available	1.20 Day
Average Patient Satisfaction	91%

Northwest Community Service Center

- **Service Description** Adult Mental Health
- **Address** 3737 Dacoma St
- **Patients Served** 7,848
- **FTEs** 148
- **Facility Size** 40,000 sq ft

Q4FYTD 2024 Financial Performance			
+	Revenues	\$	17,196,933
-	Expenses		21,816,919
=	Gross Margin	(\$	4,619,986)



Northeast Community Service Center

FY2024 Q4 Financial Performance

Revenues	\$12,591,820
Expenses	<u>(\$20,713,450)</u>
Gross Margin	(\$8,121,630)

FY2024 Clinical Performance

Annual Patient Visits	17159
Average Monthly Patient V	1430
Average No Show	40.00%
Average Patient Wait Time	30 Minutes
Average Third Next Available	1.1Day
Average Patient Satisfaction	93%

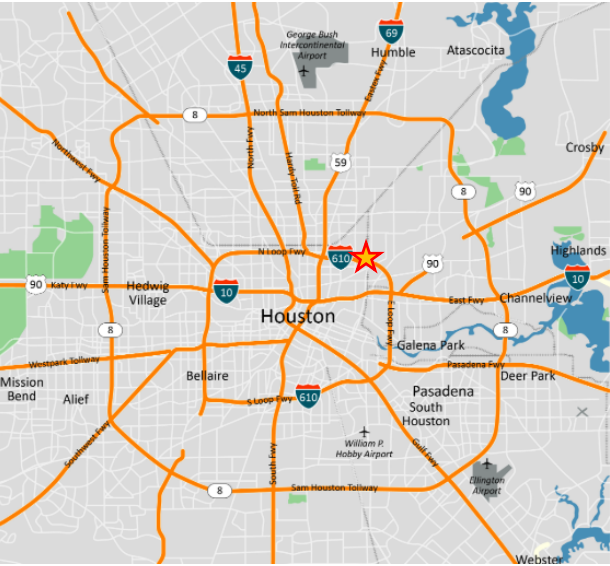
Clinic Information

Address	7200 N Loop East Fwy
Facility Size	18,000 Sq Ft
Clinic FTE's	107

Northeast Community Service Center

- **Service Description** Adult Mental Health
- **Address** 7200 N Loop East Fwy
- **Patients Served** 4,434
- **FTEs** 107
- **Facility Size** 18,000 sq ft

Q4FYTD 2024 Financial Performance		
+ Revenues		12,591,820
- Expenses		20,713,450
= Gross Margin	(\$	8,121,630)



Southeast Community Service Center

FY2024 Q4 Financial Performance

Revenues	\$24,838,372
Expenses	<u>(\$31,432,970)</u>
Gross Margin	(\$6,594,599)

FY2024 Clinical Performance

Annual Patient Visits	35907
Average Monthly Patient V	2992
Average No Show	40.00 %
Average Patient Wait Time	22 Minutes
Average Third Next Available	1.03 Day
Average Patient Satisfaction	96%

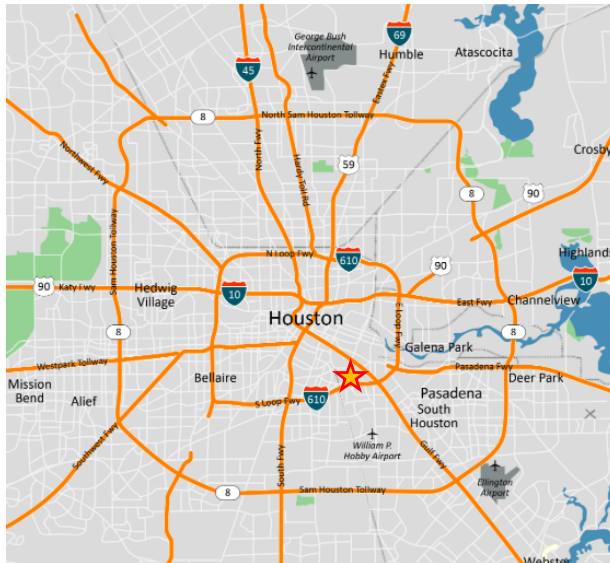
Clinic Information

Address	5901 Long Drive
Facility Size	45,000 Sq Ft
Clinic FTE's	164

Southeast Community Service Center

- **Service Description** AMH & CAS
- **Address** 5901 Long Dr.
- **Patients Served** 8,796
- **FTEs** 164
- **Facility Size** 45,000 sq ft

Q4FYTD 2024 Financial Performance		
+ Revenues	\$	24,838,372
- Expenses		31,432,970
= Gross Margin	(\$	6,594,599)



Southwest Community Service Center

FY2024 Q4 Financial Performance

Revenues	\$33,156,876
Expenses	<u>(\$42,780,235)</u>
Gross Margin	(\$9,623,359)

Clinic Information

Address	9401 Southwest Fwy
Facility Size	37,770 Sq Ft
Clinic FTE's	175

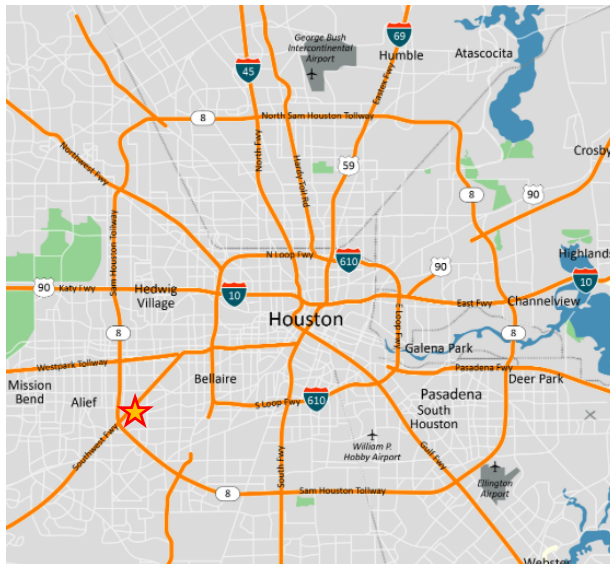
FY2024 Clinical Performance

Annual Patient Visits	32536
Average Monthly Patient V	2711
Average No Show	35.00 %
Average Patient Wait Time	23 Minutes
Average Third Next Available	1.1 Day
Average Patient Satisfaction	90%

Southwest Community Service Center

- **Service Description** AMH & CAS
- **Address** 9401 Southwest Fwy
- **Patients Served** 10,059
- **FTEs** 175
- **Facility Size** 37,770 sq ft (clinic space)

Q4FYTD 2024 Financial Performance			
+	Revenues	\$	33,156,876
-	Expenses		42,780,235
=	Gross Margin	(\$	<u>9,623,359)</u>



Neuro Psychiatric Center

FY2024 Q4 Financial Performance

Revenues	\$15,61,170
Expenses	<u>(\$22,160,631)</u>
Gross Margin	(\$6,549,461)

FY2024 Clinical Performance

Annual Patient Visits	13468
Average Monthly Patient V	1122
Average No Show	N/A
Average Patient Wait Time	N/A
Average Third Next Available	N/A
Average Patient Satisfaction	85%

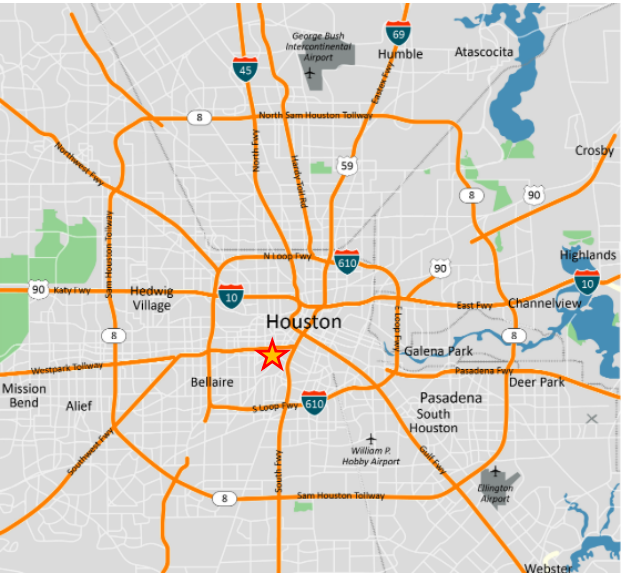
Clinic Information

Address	1502 Taub Loop
Facility Size	37,308 Sq Ft
Clinic FTE's	153

Neuro-Psychiatric Center (NPC)

- **Service Description** Psychiatric Emergency
- **Address** 1502 Taub Loop
- **Patients Served** 6,669
- **FTEs** 153
- **Facility Size** 37,308 sq ft

Q4FYTD 2024 Financial Performance		
+ Revenues	\$	15,611,170
- Expenses		22,160,631
= Gross Margin	(\$	6,549,461)



Q4FYTD 2024 Detailed Financials

	Northwest CSC	Northeast CSC	Southeast CSC	Southwest CSC	Neuro Psychiatric Center
Revenues					
Harris County and Local	200,251	249,193	472,052	955,793	5,907,393
PAP / Samples	2,833,573	2,588,277	2,808,864	2,458,596	2,479
State General	8,548,506	3,054,106	14,779,287	24,459,584	8,405,349
State Grants	2,760,128	-	-	643,343	-
Federal Grants	1,216,312	6,063,092	3,673,894	2,883,212	-
3rd Party Billings	1,638,163	637,153	3,104,275	1,756,347	1,295,949
Total Revenues	17,196,933	12,591,820	24,838,372	33,156,876	15,611,170
Expenses					
Salaries	12,013,526	11,408,274	17,937,369	17,618,420	15,868,353
Fringe	3,432,635	3,471,006	5,355,802	5,195,243	3,868,478
Contract Labor	-	-	-	415,202	-
Contracted Pharmacy	-	-	1,877	-	-
Travel	132,161	60,817	433,608	114,921	21,922
Staff Development	10,999	36,119	6,360	9,758	5,787
Contracts and Consultant	55,308	85,161	471,037	935,816	826,890
Contracts and Consultants-HCPC	-	-	-	11,125,100	-
Drugs	3,344,661	2,797,782	3,207,996	2,753,542	58,262
Pharmacy Supplies	3,162	2,839	15,220	8,130	86,210
Pharmacy use fee	1,002,992	685,853	1,234,682	688,314	51,573
Supplies	120,879	30,722	82,989	80,775	84,084
Food-Other	7,788	4,119	4,782	12,362	5,106
Equipment(Purch, Rent, Maint	742,906	1,555,666	1,352,640	1,459,703	425,007
Building(Purch, Rent, Maint	756,726	340,200	897,267	816,746	449,895
Telephone and Utilities	134,691	145,475	250,309	222,464	43,007
Insurance, Legal, Audit	20,580	19,395	49,496	27,734	34,360
Dues & Subscriptions	621	706	1,057	1,726	8,490
Vehicle Purch, Rent, Maint	-	1,652	91,081	-	29,698
Other	37,284	67,665	39,400	1,294,281	293,510
Total Expenses	16,446,083	15,749,949	23,170,955	30,366,755	16,474,681
Gross Margin	\$ (4,619,986)	\$ (8,121,630)	\$ (6,594,599)	\$ (9,623,359)	\$ (6,549,461)

EXHIBIT R-11

Supplier Diversity Report

Q4 FY2025

Presented by: Stanley Adams, CFO, MBA
October 21, 2025



Overview

- RFP Advertisement – Examples
- Q4 FY2025 HUB Spent Report

RFP Advertisements – Example (LA Informacion)

Del 19 al 25 de Junio 2025 **CLASIFICADOS** 13



¡CAMBIANDO VIDAS A TRAVÉS DE LA MÚSICA!

¡Un programa musical para niños y jóvenes de 4 a 20 años!

ÚNETE A NUESTRO PROGRAMA Y DESCUBRE EL PODER DE LA MÚSICA

Sábados de 2:00 PM a 7:00 PM

PROGRAMAS DISPONIBLES:
ORQUESTAL / CORAL

BENEFICIOS DEL PROGRAMA:

- Presentaciones especiales.
- Becas disponibles.
- Práctica colectiva de la Música.
- Certificaciones y Reconocimientos.
- Desarrollo de habilidades de liderazgo y trabajo en equipo.

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M/WBE SUPPLIER OPPORTUNITY

Rasch Graphic Services Corporation is bidding on Project Number 25-01-11 titled "Overflow Printing and Related Services" for the Houston Independent School District. We are looking for possible M/WBE suppliers to provide the following services: offset printing, digital printing, large format printing, and print finishing. If you are interested in this opportunity, please contact Mark Rasch by phone at 713-785-5750

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llama a Beto al 832-741-0315

trabajos 100% garantizados y años de experiencia

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Llama al (832) 526-7945

¿Necesitas polarizar los vidrios de tu carro y no sabes con quién? ¡Llámanos y te ayudamos!

Porcentajes del 5%, 10%, 20%, 25%, 35%, 50%. Lláme al 346-779-3111.

REALIZAMOS SERVICIOS DE NOTARÍA E INCOME TAX EN HOUSTON, PARA TODO TIPO DE ASEGURANZAS, PREPARACIÓN DE IMPUESTOS, RENOVACIÓN DE RESIDENCIA, DIVORCIOS, CAMBIO DE TÍTULO Y MUCHO MÁS...

Precio accesible, estamos ubicados en la 7004 W 43rd St, Houston, Tx 77092, interesados llamar al 713-902-1592.

The Harris Center for Mental Health and IDD

The Harris Center for Mental Health and IDD will be accepting proposals for the following:

PHARMACY REMOTE AFTER HOUR SERVICES

Specifications may be secured from The Harris Center website www.theharriscenter.org beginning Monday, June 23, 2025. The Harris Center utilizes Bonfire for their solicitations <https://theharriscenter.bonfirehub.com/portal/?tab=openOpportunities>. Deadline for prospective vendors to submit questions to this RFP is Monday, July 7, 2025. Proposals must be submitted by 10:00 a.m., Tuesday, July 15, 2025. Historically Underutilized Businesses, including Minority-Owned Businesses and Women-Owned Businesses are encouraged to participate. The Harris Center reserves all rights to reject any and/or all proposals, to waive formalities and reasonable irregularities in submitted documents as it deems to be in its best interests and is not obligated to accept the lowest proposal.

The Harris Center for Mental Health and IDD

The Harris Center for Mental Health and IDD will be accepting proposals for the following:

Community Psychiatric Hospital Beds for Individuals with IDD and Co-Occurring Mental Illness

Specifications may be secured from The Harris Center website www.theharriscenter.org beginning Tuesday, June 24, 2025. The Harris Center utilizes Bonfire for their solicitations <https://theharriscenter.bonfirehub.com/portal/?tab=openOpportunities>. Deadline for prospective vendors to submit questions to this RFP is Tuesday, July 1, 2025. Proposals must be submitted by 10:00 a.m., Wednesday, July 16, 2025. Historically Underutilized Businesses, including Minority-Owned Businesses and Women-Owned Businesses are encouraged to participate. The Harris Center reserves all rights to reject any and/or all proposals, to waive formalities and reasonable irregularities in submitted documents as it deems to be in its best interests and is not obligated to accept the lowest proposal.

EL EMPLEO QUE NECESITAS ESTÁ AQUÍ

Empresa en crecimiento está en búsqueda de personas proactivas con deseos de superación, ofrecemos entrenamientos para los puestos vacantes en áreas de telemercadeo, telemarketing, cobranzas, atención al cliente, ventas.

LLAMA HOY MISMO al 713-553-7116

Envía tu curriculum a Caminoalxito42@gmail.com

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832-788-1140

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Contactamos al 281 716-5155

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Comunicate al 713-497-5113 más de 35 años confeccionando para hombres y mujeres

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The Harris Center for Mental Health and IDD will be accepting proposals for the following:

PHARMACY REMOTE AFTER HOUR SERVICES

Specifications may be secured from The Harris Center website www.theharriscenter.org beginning Monday, June 23, 2025. The Harris Center utilizes Bonfire for their solicitations <https://theharriscenter.bonfirehub.com/portal/?tab=openOpportunities>. Deadline for prospective vendors to submit questions to this RFP is Monday, July 7, 2025. Proposals must be submitted by 10:00 a.m., Tuesday, July 15, 2025. Historically Underutilized Businesses, including Minority-Owned Businesses and Women-Owned Businesses are encouraged to participate. The Harris Center reserves all rights to reject any and/or all proposals, to waive formalities and reasonable irregularities in submitted documents as it deems to be in its best interests and is not obligated to accept the lowest proposal.

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RFP Advertisements – Example (Houston Business Journal)

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INVITATION TO BIDDERS

Sealed bids, in duplicate, addressed to Board of Directors, Harris County Improvement District No. 14, will be received at the office of BGE, Inc., 10777 Westheimer, Suite 500, Houston, Texas, 77042 (Phone: 281-558-8700) OR electronically through www.electronicbidding.com, until 2:00 PM Local Time, Tuesday, July 8, 2025, at which time all bids will be opened and publicly read at the office of BGE, Inc. and through Microsoft Teams. The Call-In number is (832) 680-2579 and the Conference ID is 684 451 6434 for the furnishing of all material, equipment, labor and supervision necessary or incidental to "Construction of Danham Pointe, Section 22, Water, Sanitary Sewer, and Storm Sewer Facilities for Harris County ID No. 14, Harris County, Texas."

Scope of Project:

1. Approx. 3,400 LF of 8-inch water line and all appurtenances
2. Approx. 2,900 LF of 8-inch sanitary sewer pipe and all appurtenances
3. Approx. 2,300 LF of 24-inch through 42-inch storm pipe and all appurtenances
4. Approx. 300 LF of 4' X 4' storm sewer box and all appurtenances

Bids received after the closing time will be returned unopened.

A non-mandatory pre-bid conference will be held on Tuesday, July 1, 2025, at 2:00 PM Local Time, remotely through Microsoft Teams. To join via Microsoft Teams the Call-In number is (832) 680-2579 and the Conference ID is 640 770 9924.

Plans, specifications and bid documents are available at www.electronicbidding.com, search: 144467-00.

A bidder submitting Electronic Bids must submit its Bid and bid securities in compliance with Owner's Order Adopting Section 49.2731 Electronic Bidding Rules and all Bids and bid securities must be submitted through www.electronicbidding.com. By submitting a bid, Bidder acknowledges and agrees that the Contract Documents may be accepted, executed or agreed to through the use of an Electronic Signature in accordance with Owner's Electronic Signature Rules for Construction Contracts.

A cashier's check or bid bond in the amount of 2% of the total bid amount must accompany each bid. The successful bidder will be required to provide performance, payment and maintenance bonds for the full amount of the contract. The Owner reserves the right to reject any or all bids.

Decker No. 57776

NOTICE FOR PUBLICATION

NOTICE OF APPLICATION FOR ITS CERTIFICATE OF CONVENIENCE AND NECESSITY TO PROVIDE SEWER UTILITY SERVICE IN LIBERTY COUNTY, TEXAS

Texas Water Utilities, LP has filed an application with the Public Utility Commission of Texas to amend its sewer Certificate of Convenience and Necessity (CCN) No. 20899 for the provision of retail sewer utility service in Liberty County, Texas.

The requested area is located approximately 2 miles northwest of downtown Humble, Texas, and is generally bounded on the north by County Road 1228 on the east by County Road 3706 on the south by Cow Branch and on the west by County Road 3234.

The requested area includes all customer connections and approximately 82.6 acres of unincorporated area to amend (add) to CCN No. 20899. The application proposes the addition of approximately 82.6 acres to CCN No. 20899.

A copy of the maps showing the requested area are available at: 1812 Centre Circle, De. Austin, TX 78714.

Persons who wish to intervene in the proceeding or comment upon action sought should contact the Public Utility Commission, P.O. Box 13326, Austin, Texas 78711-3326, or call the Public Utility Commission at (512) 936-7120 or (888) 782-8477. Hearing- and speech-impaired individuals may contact the commission through Relay Texas at 1-800-735-2889. The deadline for intervention in the proceeding is 30 days from the mailing or publication of notice, whichever occurs later, unless otherwise provided by the presiding officer. You must send a letter requesting intervention to the commission which is received by this date.

The letter must include the person's name, address, email address, and fax number, if applicable.

Hearing- and speech-impaired individuals with no telephone (TTY) may contact the commission directly at (512) 936-7136.

If a valid public hearing is requested, the Commission will forward the application to be reached and an evidentiary hearing is held, SOA#1 will submit a recommendation to the Commission for a final decision. An evidentiary hearing is a legal proceeding similar to a civil trial in state district court.

A landowner with a tract of land at least 25 acres or more, that is partially or wholly located within the requested area, may file a written request with the Commission to be excluded from the requested area ("opt out") within (30) days from the date this notice was provided by the Utility. All opt out requests must include a large-scale map of the lands and bounds description of the landowner's tract of land, landowner's name, address, email address and fax number, if applicable.

A landowner that opts out from the requested area releases the applicant's obligation to provide retail water or sewer utility service to the removed land for any reason.

Persons who wish to request this option should file the required documents with the Public Utility Commission of Texas Central Records Division, 1701 N. Congress, P.O. Box 13326, Austin, TX 78711-3326.

In addition, the landowner must also send a copy of the opt out request to the Utility. Staff may request additional information regarding your request.

Si desea información en español, puede llamar al 1-888-782-8477.

INVITATION TO BIDDERS

Sealed Bids in duplicate will be received by Fort Bend County M.U.D. No. 222 in the office of KGA/DeForest Design, LLC (LA License No. 2602), 24275 Katy Freeway, Suite 300, Katy, Texas, 77494 until 2:00 PM on July 14, 2025, for Tamaron Crossing Phases 1A & 2 Landscape Improvements.

All bids will be publicly opened and read aloud for construction of improvements including sidewalks, irrigation, planting, fine grading, and hydromulch.

Bidders shall submit two (2) copies of the bid on exact copies of the Bid Form provided. A Certificate of Interested Parties (HIB Form 1295) must be returned with bid.

Bid Documents may be examined without charge in the offices of KGA/DeForest Design, LLC, 24275 Katy Freeway, Suite 300, Katy, Texas, 77494, or may be obtained upon request, by contacting Corey Laughner.

A Cashier's Check or Bidder's Bond Payable to Fort Bend County M.U.D. No. 222 in the amount of not less than five percent (5%) of the bid submitted, outlined in the Contract Documents, must accompany the bid.

A Mandatory Pre-Bid Meeting is scheduled for July 01, 2025, at 2:00 PM at the office of KGA/DeForest Design, LLC.

Bidders must have at least five years of confirmed experience on comparable size projects of a similar scope in the Houston Area.

The successful bidder receiving contract award must furnish Performance and Payment Bonds in the amount of one hundred percent (100%) each of the total Contract price. Each such bond shall be executed by a corporate surety duly authorized to do business in the State of Texas.

The winning bid is decided not by low price but by this standard:

"The responsible person or persons that, in the Board's judgment, will be most advantageous to the District and result in the best and most economical completion of the District's proposed improvements."

The Owner reserves the right to reject any and all bids and to waive bidding informalities.

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INVITATION TO BIDDERS

Sealed Bids, in duplicate, addressed to Montgomery County Municipal Utility District No. 219, Attention: Ms. Kimberly Whitaker, President, Board of Directors, will be received at the office of LJA Engineering, Inc., 3600 W. Sam Houston Parkway S., Suite 150, Houston, Texas 77042, until 10:00 a.m. Local Time, Thursday, July 10, 2025, and then publicly opened and read for "Construction of the Water, Sanitary Sewer and Drainage Facilities & Paving and Appurtenances to Serve The Branches Section 1 for Montgomery County Municipal Utility District No. 219, Montgomery County, Texas".

Bidders may elect to submit bids electronically via <https://bids.lja.com>. Bidders must register and obtain bidding documents on this website for the required payment amount (if any) to submit an electronic bid. In addition to the opening of sealed bids at the address above, you may attend the Bid Opening by telephone by dialing +1 346-202-6170, Phone Conference ID: 170 986 8096.

Scope of Work of the Contract includes the water, sanitary sewer, drainage facilities, and paving.

Bids received after the closing time will be returned unopened. A non-mandatory pre-bid conference will be held remotely on Thursday, July 3, 2025, at 10:00 a.m. Local Time. To attend the audio format non-mandatory pre-bid conference, dial +1 346-202-6170, Phone Conference ID: 780 831 964.

Each Bid must be accompanied by a bid bond or a cashier's check, acceptable to the Owner, in an amount not less than 5 percent of the total amount bid, as a guarantee that the successful bidder will enter into the Contract and execute the Bonds on the forms provided and provide the required insurance certificates within 7 days after the date Contract Documents are received by the Contractor.

Bidding documents may be examined at LJA Engineering, Inc., AGC of Texas, Contractor Connect, and Amtek or may be obtained by prospective bidder or supplier upon payment of \$100.00 non-refundable plus cost of delivery (\$50.00 electronic copy) for each set of documents at LJA Engineering, Inc., 3600 West Sam Houston Parkway South, Suite 150, Houston, Texas 77042 or at <https://bids.lja.com>. Bidders must register on this website to download bidding documents. Checks should be made payable to LJA Engineering, Inc. No cash will be accepted.

Irregularities in bidding or bidding process except time of submitting a Bid. The successful Bidders, if any, will be the responsible Bidder which in the Board's judgment will be most advantageous to the District and result in the best and most economical completion of the Project.

Legals

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The Owner reserves the right to reject any or all Bids and to waive all defects and irregularities in bidding or bidding process except time of submitting a Bid. The successful Bidders, if any, will be the responsible Bidder which in the Board's judgment will be most advantageous to the District and result in the best and most economical completion of the Project.

INVITATION TO BIDDERS

Sealed Bids, in duplicate, addressed to Board of Directors, Harris County Municipal Utility District No. 109, will be received at the office of BGE, Inc., 10777 Westheimer, Suite 500, Houston, Texas, 77042 (Phone: 281-558-8700) OR electronically through www.electronicbidding.com, until 10:00 AM Local Time, Wednesday, July 9, 2025, at which time all bids will be opened and publicly read at the office of BGE, Inc. and through Microsoft Teams. The Call-In number is (832) 680-2579 and the Conference ID is 888 881 3466 for the furnishing of all material, equipment, labor and supervision necessary or incidental to "Construction of Lift Station No. 3 Rehabilitation for Harris County MUD No. 109, Harris County, Texas."

Scope of Project:

Contractor to furnish necessary materials, labor, tools and equipment for the rehabilitation of Lift Station No. 3 including but not limited to: dewatering, abrasive blasting, and resurfacing the wet well interior walls; removal, disposal, and replacement of wet well piping; and removal, disposal, and replacement of the existing concrete frame with wooden frame. Rehabilitation of the existing lift station to include pump washing and cleaning of wet well walls; grouting the bottom of valve walls towards the drain; abrasive blasting and resurfacing the wet well walls; and valve installation of safety net at the top of the wet well and rain shield overhanging an existing control panel. All work shall be Complete-in-Place, in Accordance with the Plans and Specifications.

Bids received after the closing time will be returned unopened.

There will be no pre-bid meeting associated with this project.

Plans, specifications and bid documents are available at www.electronicbidding.com, search: 13510-00.

A bidder submitting Electronic Bids must submit its Bid and bid securities in compliance with Owner's Order Adopting Section 49.2731 Electronic Bidding Rules and all Bids and bid securities must be submitted through www.electronicbidding.com. By submitting a bid, Bidder acknowledges and agrees that the Contract Documents may be accepted, executed or agreed to through the use of an Electronic Signature in accordance with Owner's Electronic Signature Rules for Construction Contracts.

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RFP Advertisements – Example (Forward Times)

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RESPONSE DEADLINE: JULY 14, 2025 @ 1:00 PM CST

HELP WANTED

Cost Analyst @Houston, TX Req'd: Bach's Deg. in Mathematics, Statistics, or Economics. Mail Resume to HD Hyundai Marine Solutions Americas Co., Ltd. 16610 Barker Springs Rd. Houston, TX 77064

LEGAL NOTICE

Choice Partners (CP), a division of the Harris County Department of Education (HCDE), is accepting proposals in response to the following Requests for Proposals (RFP). Interested proposers may go to www.choicepartners.org to register to download the solicitation or call 877-686-2122.

• RFP #250404K Hydroponic Farms, due by Thursday, July 3rd, 2025 @ 2:00 PM CT

All proposals must be submitted via the HCDE online eBid System at the following link: <https://ecdsbid.hcdeva.net>. Proposals will be opened via Zoom; information regarding dates, times, and a link to join the meeting is located within the eBid System under the "Activities" tab specific to the solicitation.

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a deeper conversation. What does it mean to care for ourselves while honoring where we come from?

Their new campaign, "Nourishing Our Roots," aims to build space for both. The campaign invites Black women to reflect on their heritage and prioritize their well-being—not as separate acts, but as two parts of the same journey. From health disparities to the erasure of history, the dual fight for bodily and cultural preservation continues. BGV is simply offering tools to support that fight.

Wellness as Preservation

In a time when Black women face ongoing systemic challenges to their health, "wellness" has often become a buzzword. But BGV's approach is personal. The brand was created in response to real health gaps—like widespread vitamin D deficiency, anemia, and PCOS—and its products were formulated with Black women's needs at the center.

For Juneteenth, BGV is highlighting two of its most popular supplements: a once-daily multivitamin and a collagen powder that easily blends into traditional meals. While the campaign includes limited-edition packaging and online promotions, the larger message is clear: health shouldn't feel like a luxury. It should feel like a birthright.

A Celebration Rooted in Community

"Nourishing Our Roots" also goes beyond the digital shelf. BGV has organized a nationwide tour to be physically present at Juneteenth events across the country—from Houston and Atlanta to New York and Chicago. At these events, they're not just handing out samples. They're showing up to listen, celebrate, and connect.



In Chicago, the brand is supporting the 5th Annual Juneteenth Freedom Market, expected to draw thousands for a day of music, food, and community. On the corporate side, BGV will also appear at Amazon HQ's Juneteenth celebration in Virginia, one of the few small businesses represented at the event.

Reclaiming Joy, One Image at a Time

One of the standout moments of the campaign is a throwback-inspired photo shoot meant to capture the spirit of Black family gatherings. Think '90s cocktail energy—laughter, music, full plates, and fuller hearts. It's a visual love letter to the spaces where we're always been free.

Centering Black Women's Health, Year-Round

While this campaign may be timed with Juneteenth, BGV's mission is year-round. Their work includes partnering with Black physicians, offering scholarships for women entering healthcare, and making space for joy and health to coexist.

"Nourishing Our Roots" is less about product and more about practice—a reminder that caring for ourselves is one way to honor the people who came before us.

To learn more or find an event stop near you, visit blackgirlvitamins.com or follow @blackgirlvitamins.

4A | June 18 - 24, 2025

JUNETEENTH MYTHS Continued from Front Page

Emancipation Proclamation Freed All Enslaved Black People: FALSE

Many people believe that the Emancipation Proclamation freed the enslaved Black people in the Southern states.

The Emancipation Proclamation did not apply to all states in this country when it was issued as an executive order by President Abraham Lincoln on January 1, 1863. Specifically, the Emancipation Proclamation only applied to Confederate states that were in rebellion against the Union. It did not apply to the border states that remained loyal to the Union. In addition, it did not apply to areas of the Confederacy already under Union control, and did not apply to every state in the country.

The Emancipation Proclamation was not actual legislation. It was only a war time executive order that President Lincoln issued to solidify the Union states in the North, and to appease the border states, who through the executive order, were still allowed to keep their slaves if they agreed not to secede from the Union.

The Southern states seceded from the Union, which led to the Civil War and the eventual issuance of the Emancipation Proclamation. Those Southern states seceded and no longer claimed to be a part of the United States of America, forming the Confederate States of America, which was under the leadership of their president, Jefferson Davis.

The 13th Amendment to the U.S. Constitution, which was ratified on December 6, 1865, officially abolished slavery in the country, becoming a part of national public policy versus an executive order that could be overturned.

This is why the passage of the 13th Amendment was critical in 1865, because there were no assurances that the Emancipation Proclamation would be able to maintain authority, even if the Union army would have won the Civil War.

Blacks Did Not Fight for Their Freedom: FALSE

This is one of the biggest myths ever told.

Over 300,000 Black soldiers enlisted in the Union Army and fought to liberate themselves out of enslavement and into freedom. Prior to that, the country paid no attention to them.

When the Civil War began, Black people had no pathway to citizenship and were defined in U.S. Constitution as property—chattel slaves.

On top of that, every single court decision that was made leading up to the Civil War kept Black people relegated to an inferior status until President Lincoln issued the Emancipation Proclamation and gave Black people the opportunity to fight for their liberation.

These Black Union Army soldiers were instrumental in taking over and occupying Confederate territories to enforce the Emancipation Proclamation, and helped assert federal authority in Texas.

CLASSIFIEDS

PUBLIC NOTICE

CellCo Partnership and its Controlled Affiliates Doing Business as Verizon Wireless (Verizon Wireless) proposes to build a 43.9-foot Telecommunications Tower at the approx. vicinity of 9929 233 Westgreen Boulevard, Cypress, Montgomery Co., TX 77433 (Lat: 29-56-58 3730 N, Long: 95-43-58 8670 W). Public comments regarding potential effects from this site on historic properties may be submitted within 30 days from the date of this publication to: ThreatCorp_Arjun_Pai@paiglobal.com, 7700 West Highway 71, Suite 200, Austin, TX 78735 - 512.810.0388

PUBLIC NOTICE

CellCo Partnership and its Controlled Affiliates Doing Business as Verizon Wireless (Verizon Wireless) proposes to build a 47.2-foot Telecommunications Tower at the approx. vicinity of 11639 233 Saddle Springs Ln, Cypress, Harris County, TX 77433 (Lat: 29-56-43 8320, Long: 95-41-11 014). Public comments regarding potential effects from this site on historic properties may be submitted within 30 days from the date of this publication to: ThreatCorp_Mike_Rabinovitch@paiglobal.com, 7700 W. Hwy 71, Suite 200, Austin, Texas 78735 512.810.0388

PUBLIC NOTICE

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REQUEST FOR PROPOSAL

Request for Proposal - Houston-Galveston Area Council - Public Services - Public Works Equipment - PW10-25

H-GAC is soliciting responses for selected qualified manufacturers, distributors, installers and service providers of Public Works Equipment to make these types of products and services available to Customers of the H-GAC Cooperative Purchasing Program under blanket type contracts.

To view the solicitation documents, visit <https://www.hgacbus.org/bids/corbid-cs080> (login:cs080)

Response Deadline: July 17, 2025 @ 12:00 P.M. CST

HELP WANTED

Cost Analyst @Houston, TX Req'd: Bach's Deg. in Mathematics, Statistics, or Economics. Mail Resume to HD Hyundai Marine Solutions Americas Co., Ltd. 16610 Barker Springs Rd. Houston, TX 77064



By: Forward Times Staff

Juneteenth has always been about more than freedom—it's about legacy, preservation, and healing. This year, Black Girl Vitamins (BGV), a health and wellness brand founded by and for Black women, is using the holiday to start a deeper conversation. What does it mean to care for ourselves while honoring where we come from?

Their new campaign, "Nourishing Our Roots," aims to build space for both. The campaign invites Black women to reflect on their heritage and prioritize their well-being—not as separate acts, but as two parts of the same journey. From health disparities to the erasure of history, the dual fight for bodily and cultural preservation continues. BGV is simply offering tools to support that fight.

Wellness as Preservation

Q4 FY2025 HUB Report (1 of 2)

Vendor Name	FY2025 Q4 Spend (\$)	Description	Local Vendor		
			Greater Houston	State of Texas	HUB
Ultra Medical Cleaning	803,462	Janitorial services	X	X	X
Rey De La Reza Architects	242,461	Architecture services	X	X	X
Webhead	233,044	Technology Company	X	X	X
Metropolitan Landscape*	186,194	Landscape	X	X	X
Ultra Staff	183,036	Temporary Staffing	X	X	X
SHI Government Solutions, INC	173,069	Computer Software &, Hardware	X	X	X
M Strategic Partners, INC	148,613	Design and Construction	X	X	X
Right Now Pest	136,914	Pest Control and Exterminator	X	X	X
Universe Technical Translation	118,397	Translation and interpretation services	X	X	X
The Warring Group	104,000	PR/Media Relations	X	X	X
The Burnett Companies Consolidated	90,617	Specialist Staffing	X	X	X
Rekruters	69,625	IT staffing	X	X	X
Nightingale Interpreting	56,241	Translation and interpretation services	X	X	X
LABUSA	46,575	Technology Company	X	X	X
MasterWord Services INC	43,134	Translation and interpretation services	X	X	X
DAAS Inc	42,916	Flooring Contractors	X	X	X
LandTech	36,480	Surveying	X	X	X
Innovation Network	35,237	Networks, storage & cloud migration	X	X	X
A-Rocket Moving & Storage	32,111	Moving services	X	X	X
Dura Pier Facilities Services, LTD	30,159	Facility services - construction	X	X	X
THR3EDSIGN	23,073	Architecture services	X	X	X
Globo Language Solutions	18,348	Translation and interpretation services			X
Virtue Construction	15,246	Interior and exterior renovations and repairs	X	X	X
Ascend HR Corp	13,800	Recruitment	X	X	X
City Fire Protection	11,995	Full-service fire protection company	X	X	X
Crystal Communications Ltd	9,520	Data, IP, and video communications systems integration	X	X	X
Melody's Place LLC	6,591	A home-like residential facility providing habilitation and support	X	X	X
Blind Sensations	5,710	Window Treatment	X	X	X
Modern Psychological & Allied	4,500	Psychological services	X	X	X
Forward Times	4,475	African-American Newspaper	X	X	X
Next Level Urgent Care	4,255	Urgent care/workers' comp	X	X	X
Houston Defender	3,480	African-American Newspaper	X	X	X
Restoration RESQ LLC	2,790	Water Damage Restoration	X	X	X
Soni Appliance Inc	2,686	Specializing in major brand appliance parts and repair services	X	X	X
Interpreters Unlimited Inc	1,600	Foreign Language			X
Total HUB Spend	\$ 2,940,352				

* Did not renew HUB certification during FY2023

Vast majority of the Agency's Historically Underutilized Business vendors are located in the Greater Houston area

Q4 FY2025 HUB Report (2 of 2)

- Q4 FY2025 HUB spend = **\$2,940,352**
- Q4 FY2025 discretionary spend = **\$27,723,726**
- HUB spend % = **11%**
- Exclusion categories from discretionary spend
 - *Intergovernmental contracts*
 - *Key service contracts with non-profits (Easter Seals)*
 - *University systems (BCM for residency program)*
 - *Enterprise software (EHR, ERP)*
 - *Leases*
 - *Supported housing*
 - *Pharmaceuticals*
 - *Utilities*
 - *Physician services*
 - *Trade organizations (National Council, Texas Council)*
 - *Employee reimbursements*

Thank you.