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

Live View: https://theharriscentertx.new.swagit.com/views/834/

Resource Committee Meeting
October 20, 2026
9:00 am

I. **DECLARATION OF A QUORUM**

II. **PUBLIC COMMENTS**

III. **APPROVAL OF MINUTES**

A. Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday, September 15, 2026
(EXHBIT R-1)

IV. **CONSIDER AND RECOMMEND ACTION**

A. FY'26 Year-to-Date Budget Report-September
(EXHIBIT R-2 Roxanne Carr)

B. Board Resolution-Signature Authorization and Delegation Authority for Certain Items-October 2026
(EXHIBIT R-3 Roxanne Carr)

C. October 2026 New Contracts Over 250K
(EXHIBIT R-4 Ernest Savoy)

D. October 2026 Contract Renewals Over 250K
(EXHIBIT R-5 Ernest Savoy)

E. October 2026 Interlocal Agreements
(EXHIBIT R-6 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 2026 Contracts Amendments 100K-250K
(EXHIBIT R-7)

B. October 2026 New Contract Under 100K
(EXHIBIT R-8)

C. October 2026 Contract Amendments Under 100K
(EXHIBIT R-9)

D. October 2026 Contract Renewals Under 100K
(EXHIBIT R-10)

E. October 2026 Affiliation Agreement, Grants, MOU's and Revenues Information Only
(EXHIBIT R-11)

F. Fourth quarter Financial by Clinics & NPC
(EXHIBIT R-12)

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 15, 2026
MINUTES

Mr. Gerald Womack, Chairman, called the meeting to order at 9:04 a.m. in the Room 109, 9401 Southwest Freeway, noting a quorum of the Committee was present.

RECORD OF ATTENDANCE

Committee Members in Attendance: J. Lykes, G. Womack, Dr. R. Gearing, Dr. M. Miller Jr.
Committee Member Absent:
Other Board Member Present: Dr. J. Lankford, Dr. K. Bacon, BG (Ret) E. Grantham -videoconference

1. CALL TO ORDER

Mr. G. Womack called the Resource Committee meeting to order at 9:04 am.

2. DESIGNATION OF BOARD MEMBERS AS VOTING COMMITTEE MEMBERS

Mr. G. Womack designated Dr. J. Lankford, BG (Ret) E. Grantham and Dr. K. Bacon 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 18, 2026.

MOTION: GEARING SECOND: LANKFORD

With unanimous affirmative votes,
BE IT RESOLVED that the Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday, September 15, 2026, as presented under Exhibit R-1, are approved and recommended to the Full Board.

6. CONSIDER AND RECOMMEND ACTION

A. FY'26 Year-To-Date Budget Report-August

MOTION: BACON SECOND: MILLER, JR.

With unanimous affirmative votes,
BE IT RESOLVED FY'26 Year-To-Date Budget Report-August, as presented under R-2, are approved and recommended to the Full Board.

B. September 2026 Interlocal Agreements

MOTION: BACON SECOND: LYKES

Dr. Lankford recused himself from item # 2 Harris County Hospital District d/b/a Harris Health System.

With unanimous affirmative votes,
BE IT RESOLVED September 2026 Interlocal Agreements, as presented under R-3, are approved and recommended to the Full Board.

C. FY27 Open PO to pay Employee Parking at Texas Medical Center

MOTION: BACON SECOND: LYKES

With unanimous affirmative votes,
BE IT RESOLVED FY27 Open PO to pay Employee Parking at Texas Medical Center, as presented under R-4, are approved and recommended to the Full Board.

7. EXECUTIVE SESSION-Mr. Womack announced the Resource Committee entered into Executive Session at 9:34am for the following reasons:

- 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.
- In accordance with Texas Government Code § 551.074 to deliberate the resignation, transition plans and services and recruitment plans for the Chief Financial Officer. Keena Pace, Chief Executive Officer

8. RECOVENE INTO OPEN SESSION-The Resource Committee reconvened into open session at 10:00am

9. CONSIDER AND TAKE ACTION AS A RESULT OF EXECUTIVE SESSION- No action was taken because of Executive Session.

10. ADJOURN

MOTION: GEARING SECOND: BACON

With unanimous affirmative vote and there being no further business, the meeting was adjourned at 10:00 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, 2026

Fiscal Year 2027

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.

Roxanne Carr

Roxanne Carr
Controller

The Harris Center for Mental Health and IDD
Combined - Results of Financial Operations and Comparison to Original Budget
September 30, 2026
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									
State General Revenue	$ 11,155,435	$ 11,066,450	$ (88,985)	-1%	$ 11,155,435	$ 11,066,450	$ (88,985)	-1%	
Harris County and Local	5,388,429	4,723,099	(665,330)	-12%	5,388,429	4,723,099	(665,330)	-12%	A
Federal Contracts and Grants	4,405,015	4,075,523	(329,492)	-7%	4,405,015	4,075,523	(329,492)	-7%	
State Contract and Grants	2,161,450	2,085,878	(75,572)	-3%	2,161,450	2,085,878	(75,572)	-3%	
Third Party Billing	3,667,696	3,346,231	(321,465)	-9%	3,667,696	3,346,231	(321,465)	-9%	
Charity Care Pool	3,757,017	3,757,015	(2)	0%	3,757,017	3,757,015	(2)	0%	
Directed Payment Programs	400,000	393,254	(6,746)	-2%	400,000	393,254	(6,746)	-2%	
Patient Assistance Program (PAP)	1,335,015	1,437,727	102,712	8%	1,335,015	1,437,727	102,712	8%	
Interest Income	237,500	220,345	(17,155)	-7%	237,500	220,345	(17,155)	-7%	
Revenues, total	$ 32,507,557	$ 31,105,522	$ (1,402,035)	-4%	$ 32,507,557	$ 31,105,522	$ (1,402,035)	-4%	
Expenditures									
Salaries and Fringe Benefits	$ 21,133,831	$ 21,529,297	$ (395,466)	-2%	$ 21,133,831	$ 21,529,297	$ (395,466)	-2%	
Contracts and Consultants	1,220,694	459,171	761,523	62%	1,220,694	459,171	761,523	62%	B
Contracts and Consultants-HCPC	4,222,311	4,091,025	131,286	3%	4,222,311	4,091,025	131,286	3%	
Supplies	260,248	128,954	131,294	50%	260,248	128,954	131,294	50%	
Drugs	2,620,600	2,868,770	(248,170)	-9%	2,620,600	2,868,770	(248,170)	-9%	
Purchases, Repairs and Maintenance of:									
Equipment	176,664	59,375	117,289	66%	176,664	59,375	117,289	66%	
Building	260,242	47,664	212,578	82%	260,242	47,664	212,578	82%	
Vehicle	109,977	112,930	(2,953)	-3%	109,977	112,930	(2,953)	-3%	
Software	648,973	347,047	301,926	47%	648,973	347,047	301,926	47%	
Telephone and Utilities	342,645	295,382	47,263	14%	342,645	295,382	47,263	14%	
Insurance, Legal and Audit	208,857	179,112	29,745	14%	208,857	179,112	29,745	14%	
Travel & Training	241,182	27,211	213,971	89%	241,182	27,211	213,971	89%	
Dues & Subscriptions	270,971	269,675	1,296	0%	270,971	269,675	1,296	0%	
Other Expenditures	644,146	574,359	69,787	11%	644,146	574,359	69,787	11%	
Expenditures, total	$ 32,361,341	$ 30,989,972	$ 1,371,369	4%	$ 32,361,341	$ 30,989,972	$ 1,371,369	4%	
Excess (Deficiency) of Operating Revenues over Expenditures	**$ 146,216**	**$ 115,550**	**$ (30,666)**		**$ 146,216**	**$ 115,550**	**$ (30,666)**		
Capital Outlay & Debt Service Activities									
Debt Service	146,216	-	146,216		146,216	-	146,216		
Capital outlay	-	52,491	(52,491)		-	52,491	(52,491)		
Other Financing Sources (Uses)									
Insurance proceeds	-	9,483	9,483		-	9,483	9,483		
Sale of Capital Assets	-	-	-		-	-	-		
Other Financing Sources	-	-	-		-	-	-		
Other Sources (Uses) of Funds, total	$ (146,216)	$ (43,008)	$ 103,208		$ (146,216)	$ (43,008)	$ 103,208		
Change in Fund Balance/Net Position	**$ -**	**$ 72,542**	**$ 72,542**		**$ -**	**$ 72,542**	**$ 72,542**		

The Harris Center for Mental Health and IDD
Notes to Statements Presented
Non-GAAP / Budgetary-Basis reporting
September 30, 2026

Results of Financial Operations and Comparison to Original Budget

A **Harris County and Local**

A few programs had less than expected expenses. Much of this is due to the timing of our fiscal year versus the program. Consequently, we recognized less revenue in September. The most significant examples include Independent Living Main Street ($116K) and Local Harris Country Sheriff ($102K).

B **Contracts and Consultants**

Consistent with previous years, Contracts and Consultants were favorable to budget for September. We expect the significant gap between budgeted and actual to decrease as we finalize purchase orders on our contracts.

The Harris Center for Mental Health and IDD

Balance Sheet

September 30, 2026

Non-GAAP / Budgetary-Basis Reporting

Unaudited - Subject to Change

	August - 2026	September - 2026	Monthly Change	
Assets				
Current Assets				
Cash and Cash Equivalents				
Cash and Petty Cash	$ 9,625,305	$ 21,769,270	$ 12,143,965	
Cash Equivalents	47,625,819	65,866,678	18,240,859	
Cash and Cash Equivalents, total	$ 57,251,124	$ 87,635,948	$ 30,384,824	AA
Inventories, Deposits & Prepaids	4,792,174	4,299,312	(492,862)	
Accounts Receivable:				
Patient A/R, Net of Allowance	1,811,737	1,975,590	163,853	
A/R from Other Governments:		-		
A/R from Other Governments - Local	12,317,975	10,791,276	(1,526,699)	
A/R from Other Governments - Federal	11,439,009	12,017,408	578,399	
A/R from Other Governments - State	4,729,785	9,085,037	4,355,252	BB
Other A/R	881,459	913,789	32,330	
Current Assets, total	$ 93,223,263	$ 126,718,360	$ 33,495,097	
Restricted Cash and Cash Equivalents	19,973,558	20,455,962	482,404	
Capital Assets:				
Land	21,047,347	21,047,347	-	
Building and Improvements	81,630,556	81,630,556	-	
Right-to-use Assets (Leases & SBITA)	5,265,206	5,265,206	-	
Furniture, Equipment and Vehicles	8,202,069	8,202,069	-	
Construction in Progress	11,960,561	11,960,561	-	
Accumulated Depreciation/Amortization	(41,518,930)	(41,518,930)	-	
Capital Assets, net total	$ 86,586,809	$ 86,586,809	$ -	
Total Assets	**$ 199,783,630**	**$ 233,761,131**	**$ 33,977,501**	
Liabilities & Fund Balance/Net Position				
Liabilities				
Accounts Payable	$ 2,552,808	$ 2,050,816	$ (501,992)	
Accrued Liabilities	12,427,100	18,530,110	6,103,010	CC
Unearned Revenues	8,587,101	39,721,398	31,134,297	AA
Noncurrent Liabilities:				
Due within one year	13,711,603	13,711,603	-	
Due in more than one year	30,370,112	30,370,112	-	
Forgivable Long-Term Obligations	13,627,499	13,627,499	-	
Liabilities, total	$ 81,276,223	$ 118,011,538	$ 36,735,315	
Fund Balance/Net Position				
Net Investment in Capital Assets	66,361,029	65,255,781	(1,105,248)	
Restricted for Capital Projects	19,973,558	20,463,278	489,720	
Nonspendable	4,792,174	4,299,312	(492,862)	
Assigned	24,279,262	24,279,262	-	
Unassigned/Unrestricted	3,101,385	1,379,419	(1,721,966)	
Change in Fund Balance/Net Position	-	72,542	72,542	
Fund Balance/Net Position, Total	$ 118,507,407	$ 115,749,593	$ (2,757,814)	
Total Liabilities & Fund Balance/Net Position	**$ 199,783,630**	**$ 233,761,131**	**$ 33,977,501**	

The Harris Center for Mental Health and IDD
Notes to Statements Presented
Non-GAAP / Budgetary-Basis reporting
September 30, 2026

Balance Sheet

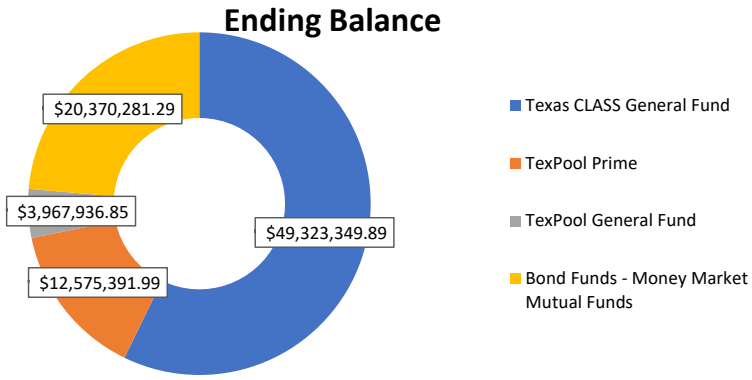
AA **Cash and Cash Equivalents**
Our cash balance increased by 53% from August to September. We received $39.3M for the first payment of our General Revenue State Performance Contract. Since the funds have been received, but not yet earned, we record the amount to **Unearned Revenues.**

BB **A/R from Other Governments - State**
$3.7M of the 92% increase represents Charity Care Pool that we expect to receive in April of 2027.

CC **Accrued Liabilities**
The most significant expense contributing to the 49% increase in Accrued Liabilities is $3M due for psychiatric beds. The next installment will be paid in October.

The Harris Center for Mental Health and IDD
Investment Portfolio
September 30, 2026

Investment	S&P Rating	Beginning Balance	Transfer In	Transfer Out	Interest Income	Ending Balance	Portfolio %	NAV	Monthly Yield
Local Government Investment Pools (LGIPs)									
Texas CLASS General Fund	AAAm	24,935,573	$ 30,500,000	$ (6,200,000)	$ 87,776	$ 49,323,350	57.20%	$ 1.000	3.91%
TexPool Prime	AAAm	18,734,531		(6,200,000)	40,861	12,575,392	14.58%	$ 1.000	3.90%
TexPool General Fund	AAAm	3,955,715	-	-	12,221	3,967,937	4.60%	$ 1.000	3.76%
Subtotal - Local Government Investment Pools (LGIPs)		47,625,819	30,500,000	(12,400,000)	140,859	65,866,679	76.38%		3.90%
Bond Funds - Money Market Mutual Funds	AAAm								
HARRIS CENTER MH IDD 2024 ACQ FD	AAAm	$ 18,018,348	$ -	$ -	$ 52,794	$ 18,071,142	20.96%	$ 1.000	3.66%
HARRIS CENTER MH IDD 2024 BOND FD	AAAm	18,432		(18,274)	54	$ 212	0.00%	$ 1.000	3.66%
HARRIS CENTER MH IDD 2024 DCOST RED	AAAm	-	-	-	-	$ -	0.00%	$ 1.000	3.66%
HARRIS CENTER MH IDD 2024 FIN PAYMT	AAAm	1,466,999	177,119	(255,272)	4,298	$ 1,393,145	1.62%	$ 1.000	3.66%
HARRIS CENTER MH IDD 2024 RES FD	AAAm	903,136	-	-	2,646	$ 905,782	1.05%	$ 1.000	3.66%
Subtotal - Bond Funds		$ 20,406,916	$ 177,119	$ (273,546)	$ 59,792	$ 20,370,281	*23.63%*		3.66%
Total Investments		**$ 68,032,736**	**$ 30,677,119**	**$ (12,673,546)**	**$ 200,652**	**$ 86,236,960**	**100.00%**		**3.84%**
		Additional Interest on Checking Accounts			19,693				
		Total Interest Earned during the current month			$ 220,345				



Net Asset Value (NAV)	$ 1.000
3 Month Weighted Average Yield	3.81%
3 Month Rolling Weighted Average Daily Treasury Bill Rate (4 weeks)	3.72%
Interest Rate - JPMorgan Hybrid Checking	2.25%
Earnings credit rate (ECR) - JPMorgan Hybrid Checking	2.15%

This Investment Portfolio Report of The Harris Center for Mental Health and IDD as of September 30, 2026, 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:

Roxanne Carr
Roxanne Carr
Controller

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
September 30, 2026

Payment of Liabilities for Employee Benefits				
Vendor	**Description**	**Monthly Not-To-Exceed [(1)]**	**Sep-26**	**Fiscal Year to Date Total**
Lincoln Financial Group (LFG)	Retirement Funds (401a, 403b, 457)	$3,650,000	$2,116,610	$2,116,610
Cigna	Medical, Dental, and Vision Insurance	$3,300,000	$2,742,384	$2,742,384
UNUM	Life Insurance	$310,000	$260,972	$260,972

Local Government Investment Pool Transfers				
From	**To**	**Date**	**Amount**	**Approval**
TexPool Prime	JP Morgan Chase	9/2/2026	$ 6,200,000	CFO
Texas Class	JP Morgan Chase	9/8/2026	$ 2,800,000	CFO
Texas Class	JP Morgan Chase	9/16/2026	$ 3,400,000	CFO
JP Morgan Chase	Texas Class	9/25/2026	$ 30,500,000	Controller

Notes:

[(1)] *As established by the Board Resolution approved October 28, 2025: Harris Center Board of Trustees Signature Authorization and Delegation Authority for Certain Items effective September 1, 2025.*

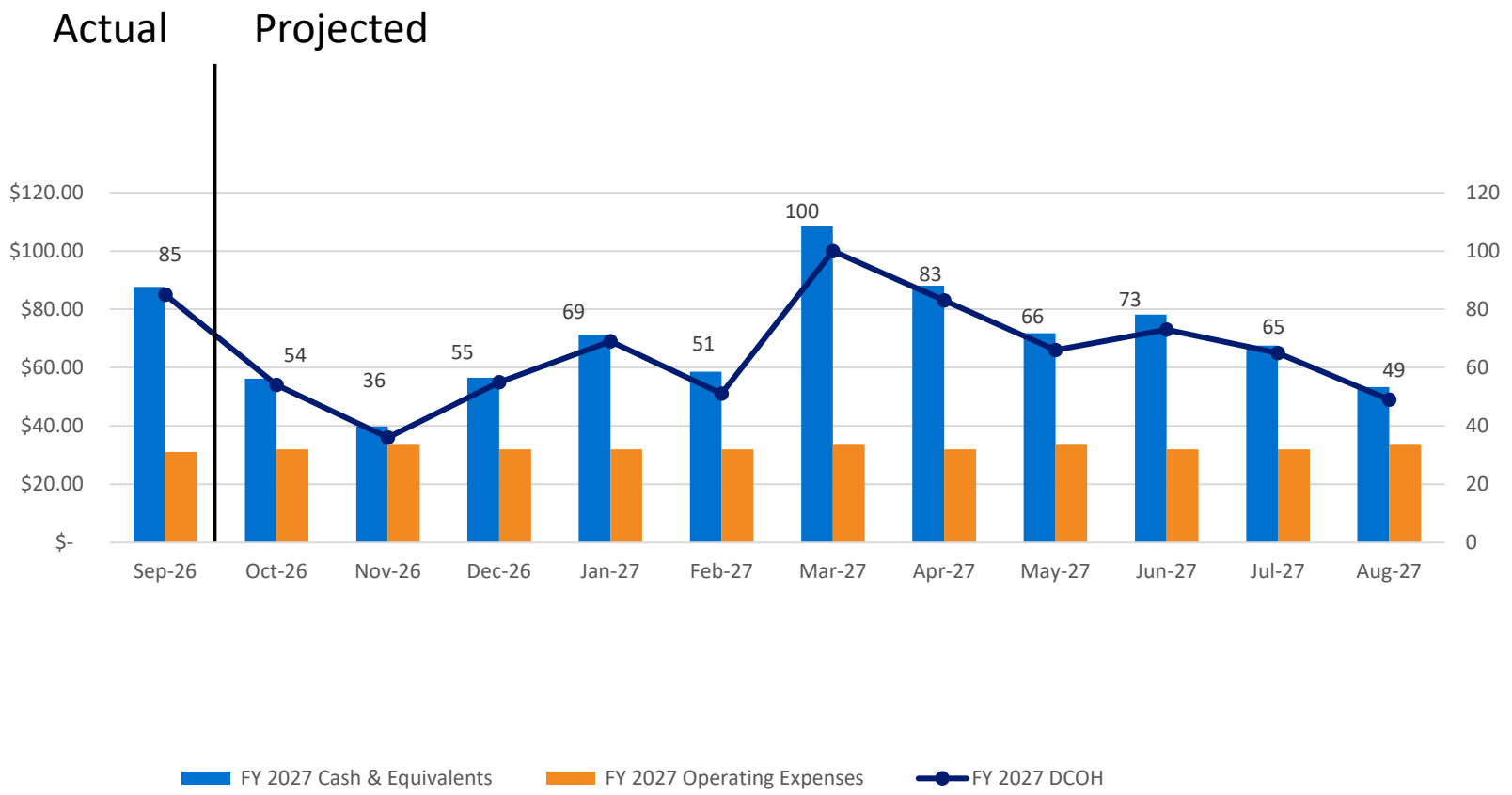


Additional Analysis – SEPTEMBER 2026

Days-Cash-On-Hand (DCOH)– as of 09/30/2026

Month-over-month ("MoM") ($ amounts in millions)

The HARRIS CENTER for Mental Health and IDD



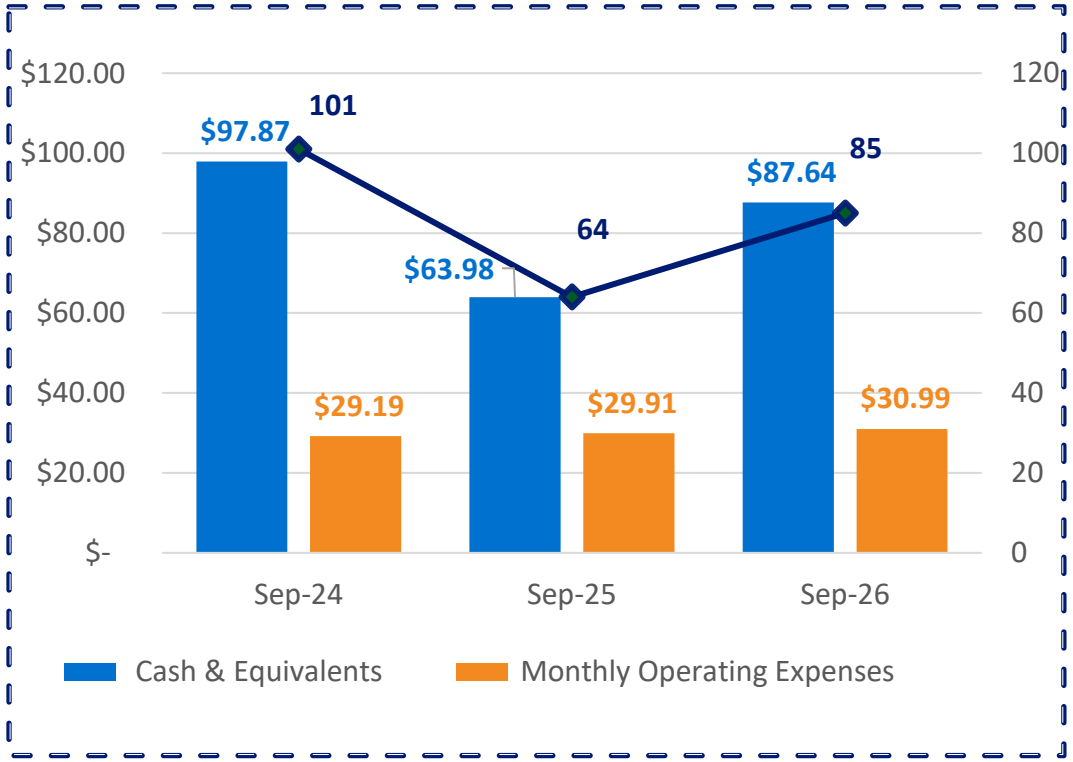
DCOH = Cash & Equivalents @ Month End divided by Daily Operating Expenses
Months in FY 2027 after current Month are based on projections

Days-Cash-On-Hand (DCOH)

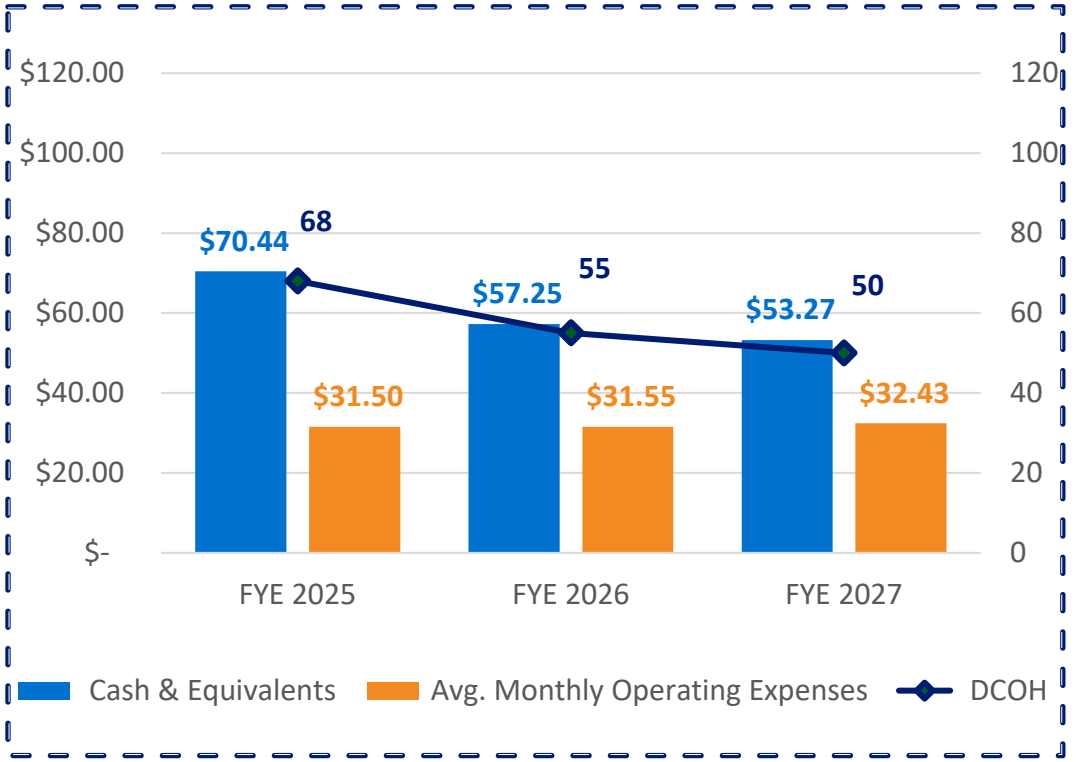
Year-over-year ("YoY") ($ amounts in millions)

The HARRIS CENTER for Mental Health and IDD

For the Month Ending 9/30/2026



For the Fiscal Year Ending 8/31/2027



DCOH = Cash & Equivalents @ Month End divided by Daily Operating Expenses
Months in FY 2027 after current Month are based on projections

Capital Outlay – as of 09/30/2026

Project/Funding Source	Year-to-date Total	
IT Capital Projects	**$**	**44,000**
Fund Balance	$	44,000
SB30 NPC/Ben Taub (NPC) (1504)	**$**	**5,591**
SB30 (150x)	$	5,591
SB30 Dennis Street (1505)	**$**	**2,900**
SB30 (150x)	$	2,900
Grand Total	**$**	**52,491**

Funding Source/Project	Year-to-date Total	
Fund Balance	**$**	**44,000**
IT Capital Projects	$	44,000
SB30 (150x)	**$**	**8,491**
SB30 NPC/Ben Taub (NPC) (1504)	$	5,591
SB30 Dennis Street (1505)	$	2,900
Grand Total	**$**	**52,491**

EXHIBIT R-3

The HARRIS CENTER *for* Mental Health and IDD

BOARD RESOLUTION

Harris Center Board of Trustees Signature Authorization and Delegation Authority for Certain Items

WHEREAS, The Harris Center Board of Trustees (the "Board") has determined that in order for the business operations of the Harris Center to function in a proper and efficient manner, it is necessary and prudent for this Board to delegate certain powers and control over the Harris Center's affairs to designated officers at The Harris Center.

RESOLVED, for purposes of this resolution, the Chief Executive Officer, the Chief Financial Officer, and Controller shall each be considered an "Authorized Officer," individually, and collectively, the "Authorized Officers".

RESOLVED, that the following actions authorizing payment or transfer in the name and on behalf of the Harris Center, without Board signature approval, for certain items was approved by the Board of Trustees on this date:

1. The Board resolves that effective September 1, 2026 the Authorized Officers, collectively, are empowered, authorized and directed to authorize payment in the name and on behalf of the Harris Center, without Board signature approval, the below liabilities for employee benefits with stated monthly not-to-exceed amounts. Approval and authorization by each Authorized Officer is required to initiate and complete the payment or transfer of liabilities for employee benefits. Each Authorized Officer must affix his or her own signature (physical or electronic, as permitted) to any foregoing payment or transfer to conclusively establish authority and approval to carry out this resolution;

Vendor	Description	Monthly Not-to-Exceed
Lincoln Financial Group	Retirement Funds (401a, 403b, 457)	$3,650,000
Cigna	Health and Dental Insurance	$3,300,000
UNUM	Life Insurance	$310,000

The HARRIS CENTER for Mental Health and IDD

Transforming Lives

II. The Chief Financial Officer or Controller shall prepare a monthly report of all financial transactions related to the payment of the liabilities for employee benefits and submit the report to the Harris Center Board of Trustees Resource Committee. The Chief Financial Officer or Controller shall ensure all supporting documentation sufficient to demonstrate the business purpose of the transaction(s), its occurrence and the accuracy of the amount are retained and available upon request by the Harris Center Board of Trustees.

ALL OF THE FOREGOING SHALL BE EFFECTIVE
October 20, 2026

_____

Robin E. Gearing, PH.D., Chair
The Harris Center for Mental Health and IDD
Board of Trustees

_____

Gerald Womack, Secretary
The Harris Center for Mental Health and IDD
Board of Trustees

STATE OF TEXAS
COUNTY OF HARRIS

Subscribed and sworn to before me this _____ day of _____, 2026.

_____

Notary Public in and for the State of Texas

My Commission Expires: _____

Notary ID: _____

EXHIBIT R-4

OCTOBER 2026

NEW CONTRACTS

OVER 250k

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD

SNAPSHOT SUMMARY
NEW CONTRACTS
GREATER THAN $250,000

OCTOBER 2026
FISCAL YEAR 2027

	CONTRACTOR	PRODUCT/SERVICE DESCRIPTION	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	ACCESS						
	ADMINISTRATION						
1	NLUC, PLLC	Healthcare Navigation and Care Delivery Services for Employees	$1,079,880.00	1/1/2027 - 12/31/2029	General Revenue (GR)	Selected as part of the FY2027 medical benefits renewal with CIGNA. Selected as part of the FY2027 medical benefits renewal with CIGNA.	Next Level Prime will provide healthcare navigation and care delivery services for Employees enrolled in The Harris Center's medical plans beginning January 1, 2027. The program is designed to improve access to care, enhance the Employee healthcare experience, and support management of overall medical plan costs. This agreement is part of the Agency's FY2027 medical benefits strategy. The cost is paid by Employee's through their health plan.
	CPEP/CRISIS SERVICES						
	FORENSICS						
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES						
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI						
	MENTAL HEALTH						
	LEASES						

Executive Contract Summary

Contract Section

Select Header For This Contract *

Administration

Contractor *

NLUC, PLLC

Contract ID # *

NA

Presented To *

- (•) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

("Next Level"), by the entity {The Harris Center for Mental Health and IDD}

Agenda Item Submitted For: * (?)

- [ ] Information Only (Total NTE Amount is Less than $250,000.00)
- [x] Board Approval (Total NTE Amount is $250,000.00 or more)
- [ ] Grant Proposal
- [ ] Revenue
- [ ] SOW-Change Order-Amendment#
- [x] Other Board approved on Tuesday, August 25.

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
- [x] Other Selected as part of the FY2027 medical benefits renewal with CIGNA.

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 * (?)

1/1/2027

Contract Term End Date * (?)

12/31/2029

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

Fiscal Year* (?)
2027

Amount* (?)
$ 1,079,880.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

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

Contract Owner*
Suja Abraham

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 (?)
NL PRIME Terms and Conditions (The Harris Center).docx 52.62KB

How does this contract support Agency/Unit Strategic priorities?*
This contract supports the Agency's strategic priority of providing competitive, accessible, and cost-effective employee benefits. Next Level Prime is designed to improve access to high-quality care, enhance the employee healthcare experience, and help manage overall medical plan costs while supporting employee well-being and retention.

Vendor/Contractor Contact Person

Name*
Allyson Waybright

Address*
Street Address
5718 Westheimer Road, Suite 1800
Address Line 2
City
Houston
State / Province / Region
Texas
Postal / Zip Code
77057
Country
USA

Phone Number*
936-661-2061

Email*
awaybright@nlucc.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number* 1108

Amount Charged to Unit* $ 0.00

Expense/GL Code No.* *******

Budget Manager Moynihan, Kelly

Secondary Budget Manager Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?) 0

Project WBS (Work Breakdown Structure)* (?) 0

Requester Name Abraham, Suja

Submission Date 8/31/2026

Budget Manager Approval(s)

Approved by Kelly E. Moynihan

Approval Date 9/1/2026

Procurement Approval

File Upload (?)

Approved by Sign

Approval Date

Contract Owner Approval

Approved by Suja Abraham

Approval Date 9/2/2026

Contracts Approval

Approved by Belinda Stude

Approval Date 9/10/2026

EXHIBIT R-5

OCTOBER 2026

RENEWALS OVER 250k

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD

SNAPSHOT SUMMARY
CONTRACT RENEWALS
MORE THAN $250,000

OCTOBER 2026
FISCAL YEAR 2027

	CONTRACTOR	PRODUCT/SERVICE DESCRIPTION	FY 2026 NTE AMOUNT	FY 2027 NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	ACCESS							
	ADMINISTRATION							
1	Comcast	Agency Wide Internet & Data Circuit Services	$276,000.00	$276,000.00	9/1/2026 - 8/31/2027	General Revenue (GR)	. .	Annual renewal of Internet and Data Circuit Services Agency Wide including data circuits for EPIC EHR.
2	McKesson Medical Surgical Inc.	Agency Wide Medical Surgical Supplies	$225,419.00	$324,552.75	9/1/2026 - 8/31/2027	General Revenue (GR)	Tag-On GPO Vizient	Annual renewal of Agency Wide Medical Surgical Supplies.
	CPEP/CRISIS SERVICES							
	FORENSICS							
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES							
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI							
	MENTAL HEALTH							
	LEASES							

The HARRIS CENTER for Mental Health and IDD

Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2027

Contract ID#*

2022-0549

Contractor Name*

Comcast

Service Provided* (?)

Master PO for 4 Comcast Contract ID's
7696- Data Circuits for EPIC EHR
6529-Agency Wide Internet Service: Multiple Sales Order
7612-New Data Circuits; Primary &Redundant Circuits at all Agency Clinics
7486-Network Connectivity for 911 Crisis Diversion Center

Renewal Term Start Date*

9/1/2026

Renewal Term End Date*

8/31/2027

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

- [ ] Information Only (Total NTE Amount is Less than $250,000.00)
- [x] 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
- [x] Other N/A

Contract Description / Type

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

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

- ○ Yes
- ○ No
- ◉ Unknown

Contract NTE* (?)

$ 276,000.00

Rate(s)/Rate(s) Description

Unit(s) Served*

1130

G/L Code(s)*

564004

Current Fiscal Year Purchase Order Number*

CT145158

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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

○ Yes ◉ No

** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO*

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	$ 276,000.00	564004

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

Provide Rate and Rate Descriptions if applicable* (?)

Varies

Project WBS (Work Breakdown Structure)* (?)

N/A

Fiscal Year* (?)	Amount* (?)
2027	$ 276,000.00

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

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 *

9/29/2026

Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year
2027

Contract ID# *
7137

Contractor Name *
McKesson Medical Surgical Inc.

Service Provided * (?)
Agency Wide Medical Surgical Supplies

Renewal Term Start Date *
9/1/2026

Renewal Term End Date *
8/31/2027

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

- [x] 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
- [x] Tag-On
- [ ] Consumer Driven
- [x] Other Through GPO Vizient

Contract Description / Type

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

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

- ( ) Yes
- (•) No
- ( ) Unknown

Contract NTE* (?)

$ 225,419.00

Rate(s)/Rate(s) Description

N/A

Unit(s) Served*

2212,
2213,2214,2215,2250,2301,2801,4323,4325,4736,6500,920
6,9208,9209,9210,9261,9264,9403,9404,9407,9502,9810,99
01

G/L Code(s)*

547002

Current Fiscal Year Purchase Order Number*

CT145347

Contract Requestor*

Taia Smith

Contract Owner*

Kia Walker

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?*

AGENCY WIDE MEDICAL SUPPLIES

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

○ Yes ◉ No

** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO*

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9206	$ 83,000.00	547002
Budget Manager*	**Secondary Budget Manager***	
Oshman, Jodel	Ramirez, Priscilla	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2212	$ 10,000.00	547002
Budget Manager*	**Secondary Budget Manager***	
Shelby, Debbie	Smith, Janai	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2213	$ 2,000.00	547002
Budget Manager*	**Secondary Budget Manager***	
Shelby, Debbie	Smith, Janai	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2215	$ 6,000.00	547002
Budget Manager*	**Secondary Budget Manager***	
Shelby, Debbie	Smith, Janai	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2250	$ 4,000.00	547002
Budget Manager*	**Secondary Budget Manager***	
Oshman, Jodel	Ramirez, Priscilla	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2301	$ 4,500.00	547002
Budget Manager*	**Secondary Budget Manager***	
Shelby, Debbie	Smith, Janai	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2801	$ 8,000.00	547002
Budget Manager*	**Secondary Budget Manager***	
Smith, Janai	Shelby, Debbie	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3611	$ 50.00	547002
Budget Manager*	**Secondary Budget Manager***	
Degracia, Ericka	Collins, Evanthe	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
4323	$ 2,956.00	547002
Budget Manager*	**Secondary Budget Manager***	
Shelby, Debbie	Smith, Janai	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
4325	$ 1,200.00	547002
Budget Manager*	**Secondary Budget Manager***	
Shelby, Debbie	Smith, Janai	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
4736	$ 2,000.00	547002
Budget Manager*	**Secondary Budget Manager***	
Shelby, Debbie	Smith, Janai	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6302	$ 3,000.00	547002
Budget Manager*	**Secondary Budget Manager***	
Williams-Wesley, Sheenia	Reyes, Elizabeth	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6500	$ 2,250.00	547002
Budget Manager*	**Secondary Budget Manager***	
Williams-Wesley, Sheenia	Reyes, Elizabeth	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9274	$ 3,683.00	547002
Budget Manager*	**Secondary Budget Manager***	
Ramirez, Priscilla	Puente, Giovanni	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9208	$ 1,600.00	547002
Budget Manager*	**Secondary Budget Manager***	
Oshman, Jodel	Ramirez, Priscilla	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9209	$ 61,000.00	547002
Budget Manager*	**Secondary Budget Manager***	
Oshman, Jodel	Ramirez, Priscilla	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9210	$ 13,000.00	547002

Budget Manager*	Secondary Budget Manager*
Oshman, Jodel	Ramirez, Priscilla

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9240	$ 1,000.00	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9243	$ 50.00	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9261	$ 337.00	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9263	$ 5,000.00	547002

Budget Manager*	Secondary Budget Manager*
Oshman, Jodel	Ramirez, Priscilla

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9264	$ 1,177.00	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9274	$ 3,683.00	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9403	$ 2,183.00	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9404	$ 1,455.00	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9407	$ 300.00	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9502	$ 1,782.00	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9901	$ 60,216.75	547002

Budget Manager*	Secondary Budget Manager*
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9810	$ 5,950.00	547002

Budget Manager*	Secondary Budget Manager*
Oshman, Jodel	Ramirez, Priscilla

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2214	$ 5,000.00	547002

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* (?)
2027	$ 324,552.75

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

Kia Walker

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approved by

Debbie Chambers Shelby

Approved by

Janai Lynnette Smith

Approved by

Ericka Degracia

Approved by

Sheenia Williams-Wesley

Approved by

Priscilla M. Ramirez

Approved by

Sign

Contract Owner Approval

Approved by

Kia Denae Walker

Contracts Approval

Approve *

◉ Yes

○ No, reject entire submission

○ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/5/2026



EXHIBIT R-6

OCTOBER 2026

INTERLOCAL AGREEMENTS

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD

SNAPSHOT SUMMARY
INTERLOCALS

OCTOBER 2026
FISCAL YEAR 2027

	CONTRACTOR	PRODUCT/SERVICE DESCRIPTION	Action Type	CONTRACT PERIOD	FUNDING	COMMENTS
1	Harris County (Pretrial Services)	Community Assistance Referral Program (CARP) for felony defendants to increase court appearance rates.	Amendment	4/1/2026 - 9/30/2027	County	Amendment for renewal through September 30, 2027. [FY27 Revenue NTE: $400,000.00].
2	Harris County Juvenile Probation Department	To provide comprehensive psychiatric services to youth assigned to HC JPD pre-adjudication and post-adjudication facilities to prevent youth from further penetrating the juvenile justice and child welfare systems.	Amendment	9/1/2026 - 8/31/2027	County	Amendment to increase the NTE to cover budget increases for FY27. [FY27 Revenue Increase by $33,750.00; Total revised FY27 Revenue NTE: $650,000.00].
3	Harris County Resources for Children and Adults	To identify and provide comprehensive mental health services for youth between 13 and under 18 year(s) of age who are engaged with law enforcement due to low-level, non-violent crimes but are in need of temporary respite care due to a mental health crisis	Amendment	6/11/2026 - 12/31/2026	County	Amendment and renewal to extend the term through December 21, 2026, and to increase County funds for additional services. [FY27 Revenue NTE: $350,000.00; Revised Total Revenue NTE: $8,519,767.80].
4	Harris County Sheriff's Office	Harris County CORE Program	Amendment	9/1/2026 - 8/31/2027	County	Amendment to add Pasadena ISD to the revenue contract which is funded by Harris County for the CORE program to cover expenditures for the 26/27 fiscal year (County FY) for 3 iPads as requested. [FY27 Revenue NTE: $853,600.00].
5	Texas Department of Family Protective Services	Texas Family First Program	Amendment	9/1/2026 - 8/31/2027	State	Amendment to modify the total contract budget amount and statement of work through August 31, 2027. [FY26 Revenue NTE: $1,665,114.13; FY27 Revenue NTE: $946,116.67: Revised FY26/27 NTE: $2,611,230.80].

Executive Contract Summary

Contract Section

Select Header For This Contract *

Interlocal

Contractor *

Harris County (Pretrial Services)

Contract ID # *

2025-1007

Presented To *

- (•) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Harris County Pretrial Services and The Harris Center for MH and IDD Services

Agenda Item Submitted For: * (?)

- [ ] Information Only (Total NTE Amount is Less than $250,000.00)
- [x] Board Approval (Total NTE Amount is $250,000.00 or more)
- [ ] Grant Proposal
- [x] Revenue
- [ ] SOW-Change Order-Amendment#
- [ ] Other

Procurement Method(s) *

Check all that Apply

- [ ] Competitive Bid
- [ ] Request for Proposal
- [ ] Request for Application
- [ ] Request for Quote
- [x] 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 * (?)

4/1/2026

Contract Term End Date * (?)

9/30/2027

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

county fiscal amendment

Fiscal Year* (?)

2027

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
- [x] Amendment to Existing Contract
- [ ] Service/Maintenance
- [ ] IT/Software License Agreement
- [ ] Lease
- [ ] Other

Contract Owner*

Krystin Holmes

Previous History of Contracting with Vendor/Contractor*

(•) Yes ( ) No ( ) Unknown

Please add previous contract dates and what services were provided*

April 2025 - March 2026 CARP Pretrial Services

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?*

Expand program availability, services and reduce readmission rates

Vendor/Contractor Contact Person

Name*

Natalie Michailides

Address*

Street Address

600 North San Jacinto Street

Address Line 2

City

Houston

State / Province / Region

Texas

Postal / Zip Code

77002

Country

United States

Phone Number*

8329273501

Email *
natalie.michailides@pts.hctx.net

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
6004	$ 400,000.00	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	Submission Date
Williams-Wesley, Sheenia	9/11/2026

Budget Manager Approval(s)

Approved by
Sheenia Williams Wesley

Approval Date
9/11/2026

Contract Owner Approval

Approved by
Krystin Holmes

Approval Date
9/11/2026

Contracts Approval

Approved by
Belinda Stude

Approval Date
9/14/2026

Executive Contract Summary

Contract Section

Contractor *

Harris County Juvenile Probation Department

Contract ID # *

2025 1064

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Harris County Juvenile Probation Department and The Harris Center for MH and IDD Services

Agenda Item Submitted For: * (?)

- [ ] Information Only (Total NTE Amount is Less than $250,000.00)
- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

- ( ) Yes (●) No

** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO*

Funding Information *

- ( ) New Contract (●) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2027

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

Current Contract Amount*
$ 616,250.00

Increase Not to Exceed*
$ 33,750.00

Revised Total Not to Exceed (NTE)*
$ 650,000.00

Fiscal Year* (?)
2027

Amount* (?)
$ 650,000.00

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 comprehensive psychiatric services to youth assigned to HC JPD pre-adjudication and post-adjudication facilities to prevent youth from further penetrating the juvenile justice and child welfare systems.

Contract Owner*
Samuel Means

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

Please add previous contract dates and what services were provided*
Psychiatric services to at risk youth
9/1/25 - 8/31/26

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 *
Scott Elliott

Address *
Street Address
1001 Preston St
Address Line 2
Suite 670
City
Houston
State / Province / Region
TX
Postal / Zip Code
77002-1839
Country
United States

Phone Number *
7132744898

Email *
scott.elliott@pur.hctx.net

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
6901	$ 650,000.00	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
9/18/2026

Budget Manager Approval(s)

Approved by
Sheenia Williams Wesley

Approval Date
9/18/2026

Contract Owner Approval

Approved by
Samuel Means

Approval Date
9/21/2026

Contracts Approval

Approve *

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *

Belinda Stude

Approval Date *

9/22/2026

Executive Contract Summary

Contract Section

Contractor *

Harris County Resources for Children and Adults

Contract ID # *

2023-0614

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Harris County Resources for Children and Adults and The Harris Center for MH and IDD Services

Agenda Item Submitted For: * (?)

- [ ] Information Only (Total NTE Amount is Less than $250,000.00)
- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

- ( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *

- ( ) New Contract (●) Amendment

Contract Term Start Date* (?)
6/11/2026

Contract Term End Date* (?)
12/31/2026

If contract is off-cycle, specify the contract term (?)
6 month extension of county contract term

Current Contract Amount*
$ 8,169,767.80

Increase Not to Exceed*
$ 500,000.00

Revised Total Not to Exceed (NTE)*
$ 8,669,767.80

Fiscal Year* (?)	**Amount*** (?)
2026	$ 166,667.00
Fiscal Year* (?)	**Amount*** (?)
2027	$ 333,333.00

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
- [x] Amendment to Existing Contract
- [ ] Service/Maintenance
- [ ] IT/Software License Agreement
- [ ] Lease
- [ ] Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)
To identify and provide comprehensive mental health services for youth between 13 and under 18 year(s) of age who are engaged with law enforcement due to low-level, non-violent crimes but are in need of temporary respite care due to a mental health crisis

Contract Owner*
Samuel Means

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

Please add previous contract dates and what services were provided*
FY23 - FY26 crisis respite for at risk youth

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

Community Partnership* (?)
(•) Yes ( ) No ( ) Unknown

Specify Name*
Harris County Juvenile Probation

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name *

Harris County Resources for Children and Adults

Address *

Street Address

2525 Murworth Drive

Address Line 2

City

Houston

State / Province / Region

Texas

Postal / Zip Code

77054-1623

Country

United States

Phone Number *

7133944073

Email *

brian.baxendale@harriscountytx.gov

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
6500	$ 500,000.00	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

9/15/2026

Budget Manager Approval(s)

Approved by

Sheenia Williams Wesley

Approval Date

9/16/2026

Contract Owner Approval

Approved by

Samuel Means

Approval Date

9/16/2026

Contracts Approval

Approve*

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by*

Belinda Stude

Approval Date*

9/16/2026

Executive Contract Summary

Contract Section

Contractor *

Harris County Sheriff's Office

Contract ID # *

na

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Harris County Sheriff's Office and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- [x] Information Only (Total NTE Amount is Less than $250,000.00)
- [ ] Board Approval (Total NTE Amount is $250,000.00 or more)
- [ ] Grant Proposal
- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

(●) Yes ( ) No

** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO*

Funding Information *

( ) New Contract (●) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2027

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

Fiscal Year* (?)
2027

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
- [x] Amendment to Existing Contract
- [ ] Service/Maintenance
- [ ] IT/Software License Agreement
- [ ] Lease
- [ ] Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)
Amendment to add Pasadena ISD to this revenue contract funded by Harris County for the CORE program to cover expenditures for the 26/27 fiscal year (County FY)
3 iPads requested
Director: Kisha Lorio

Contract Owner*
Kim Kornmayer

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

Please add previous contract dates and what services were provided*
contract in place

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*
Capt. Lonnie Smith

Address *

Street Address

3920 Mickey Gilley Blvd.

Address Line 2

City

Pasadena

State / Province / Region

TX

Postal / Zip Code

77505-2281

Country

US

Phone Number *

713-740-0040

Email *

Lgsmith@pasadenaisd.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

9259

Amount Charged to Unit *

$ 0.00

Expense/GL Code No. *

0

Budget Manager

Oshman, Jodel

Secondary Budget Manager

Ramirez, Priscilla

Provide Rate and Rate Descriptions if applicable * (?)

Revenue contract for $853,600
detailed report and invoice is submitted to the county monthly

Project WBS (Work Breakdown Structure) * (?)

NA

Requester Name

Singh, Patricia

Submission Date

8/31/2026

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

8/31/2026

IT Director Approval

Approved by

Anthony Jones

Approval Date

8/31/2026

IT Approval Comments

Approved - AJones

Contract Owner Approval

Approved by

Kimberly Kornmayer

Approval Date

9/2/2026

Contracts Approval

Approve *

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *

Belinda Studo

Approval Date *

9/4/2026

Executive Contract Summary

Contract Section

Select Header For This Contract *

Interlocal

Contractor *

Texas Department of Family Protective Services

Contract ID # *

2025-1108

Presented To *

- (•) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

The Harris Center for Mental Health and IDD and Texas Department of Family Protective 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
- [x] Revenue
- [ ] SOW-Change Order-Amendment#
- [ ] Other

Procurement Method(s) *

Check all that Apply

- [ ] Competitive Bid
- [ ] Request for Proposal
- [ ] Request for Application
- [ ] Request for Quote
- [x] 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 * (?)

9/1/2026

Contract Term End Date * (?)

8/31/2027

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

Fiscal Year* (?)

2027

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
- [x] Amendment to Existing Contract
- [ ] Service/Maintenance
- [ ] IT/Software License Agreement
- [ ] Lease
- [ ] Other

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*

2025

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

( ) Yes ( ) No (•) Unknown

Community Partnership* (?)

( ) Yes ( ) No (•) Unknown

Supporting Documentation Upload (?)

Attachment C-1 PWP.pdf	319.11KB
Attachment A-1- Harris SOW .pdf	117.91KB
HHS001663900001 Amend #2 .pdf	89.81KB

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

Supports partnership with DFPS and The Harris Center to provide mental health services to client and their families.

Vendor/Contractor Contact Person

Name*

Begonia Almudi

Address*

Street Address

701 West 51st Street

Address Line 2

City

Austin

State / Province / Region

TX

Postal / Zip Code

78751-2312

Country

United States

Phone Number *
512-460-7397

Email *
Begonia.Almudi@dfps.texas.gov

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
4161	$ 946,116.67	437003

Budget Manager	Secondary Budget Manager
Smith, Janai	Shelby, Debbie

Provide Rate and Rate Descriptions if applicable * (?)
0.00

Project WBS (Work Breakdown Structure) * (?)
0.00

Requester Name	Submission Date
Bowser, Mohagony	8/25/2026

Budget Manager Approval(s)

Approved by
Janai Lynnette Smith

Approval Date
8/31/2026

Contract Owner Approval

Approved by
Dr. Tiffanie Williams-Brooks

Approval Date
9/3/2026

Contracts Approval

Approved by
Belinda Stude

Approval Date
9/8/2026

EXHIBIT R-7

OCTOBER 2026

AMENDMENTS 100k - 250k

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD

SNAPSHOT SUMMARY
CONTRACT AMENDMENTS
BETWEEN $100,000 AND $250,000

OCTOBER 2026
FISCAL YEAR 2027

	CONTRACTOR	PRODUCT/SERVICE DESCRIPTION	PREVIOUS AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	ACCESS								
	ADMINISTRATION								
	CPEP/CRISIS SERVICES								
1	Texas Textiles Services, LTC	Linens and Laundry Services	$149,164.00	$11,843.38	$161,007.38	9/1/2026 - 8/31/2027	County	Request for Quote	Amendment to increase the NTE for another unit (6500) to be added to the FY27 contract.
	FORENSICS								
2	Amber Burks, MD dba Texas Telepsychiatry Solutions	Telepsychiatry services are provided to juveniles housed in the Juvenile Detention Center and placement facilities (Katy Leadership and Youth Village).	$208,000.00	$15,000.00	$223,000.00	9/1/2026 - 8/31/2027	County	Professional Services Professional Services	Amendment to increase the NTE for a rate change to the agreement.
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI								
	MENTAL HEALTH								
	LEASES								

Executive Contract Summary

Contract Section

Contractor *

Texas Textiles Services, LTC

Contract ID # *

2023-0730

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Texas Textiles Services, LTC and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

- ( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *

- ( ) New Contract (●) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2027

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

Current Contract Amount*
$ 149,164.00

Increase Not to Exceed*
$ 11,843.38

Revised Total Not to Exceed (NTE)*
$ 161,007.38

Fiscal Year* (?)
2027

Amount* (?)
$ 161,007.38

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
- [x] Amendment to Existing Contract
- [ ] Service/Maintenance
- [ ] IT/Software License Agreement
- [ ] Lease
- [ ] Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)
Maintaining clean linens and laundry is an integral part of hygiene within the residential programs.

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*
Lucy Heredia

Address *

Street Address

9201 Center Point Drive

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77054

Country

US

Phone Number *

713-799-9272

Email *

lheredia@TexasTextile.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

6500

Amount Charged to Unit *

$ 11,843.38

Expense/GL Code No. *

543032

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable * (?)

na

Project WBS (Work Breakdown Structure) * (?)

na

Requester Name

Singh, Patricia

Submission Date

9/15/2026

Budget Manager Approval(s)

Approved by

Sheenia Williams Wesley

Approval Date

9/15/2026

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Kimberly Kornmayer

Approval Date

9/15/2026

Contracts Approval

Approve*

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by*

Belinda Stude

Approval Date*

9/15/2026

Executive Contract Summary

Contract Section

Contractor *

Amber Burks, MD dba Texas Telepsychiatry Solutions

Contract ID # *

2023-0749

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Amber Burks, MD dba Texas Telepsychiatry Solutions and The Harris Center for MH and IDD

Agenda Item Submitted For: * (?)

- [x] 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
- [x] Other Professional Services

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

( ) Yes (●) No

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO*

Funding Information *

( ) New Contract (●) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2027

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

Current Contract Amount*
$ 208,000.00

Increase Not to Exceed*
$ 15,000.00

Revised Total Not to Exceed (NTE)*
$ 223,000.00

Fiscal Year* (?)
2027

Amount* (?)
$ 223,000.00

Funding Source*
County

Contract Description / Type* (?)

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

Justification/Purpose of Contract/Description of Services Being Provided* (?)
Telepsychiatry services are provided to juveniles housed in the Juvenile Detention Center and placement facilities (Katy Leadership and Youth Village).

Contract Owner*
Sean McElroy

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

Please add previous contract dates and what services were provided*
9/1/2025 - 8/31/2026

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

Community Partnership* (?)
( ) Yes ( ) No (•) Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*
Amber Burks, M.D. dba Texas Telepsychiatry Solutions

Address *

Street Address

9401 Southwest Freeway

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77074

Country

US

Phone Number *

281-221-4643

Email *

amberburksmd@gmail.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

6901

Amount Charged to Unit *

$ 223,000.00

Expense/GL Code No. *

540503

Budget Manager

Williams-Wesley, Sheenia

Secondary Budget Manager

Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable * (?)

$214.42 per hour up to 20 hours per week.

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name

Reyes, Elizabeth

Submission Date

9/21/2026

Budget Manager Approval(s)

Approved by

Sheenia Williams-Wesley

Approval Date

9/21/2026

Contract Owner Approval

Approved by

Sean McElroy

Approval Date

9/21/2026

Contracts Approval

Approve *

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *



Approval Date *

9/22/2026

EXHIBIT R-8

OCTOBER 2026

NEW CONTRACTS

UNDER 100k

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD

SNAPSHOT SUMMARY
NEW CONTRACTS
LESS THAN $100,000

OCTOBER 2026
FISCAL YEAR 2027

	CONTRACTOR	PRODUCT/SERVICE DESCRIPTION	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	ACCESS						
	ADMINISTRATION						
1	Family Education and Development Services, LLC	Consultant to Provide Training and Education to Staff	$6,550.00	9/1/2026 - 8/31/2027	General Revenue (GR)	Request for Quote	New consultant agreement to provide training and education to Staff in preparation of providing Nurturing Parenting services to the individuals and families served by the Agency.
2	The Council on Recovery	Facility Space Agreement for Quarterly Leadership Meetings	$6,000.00	11/1/2026 - 11/30/2027	General Revenue (GR)	Request for Quote	New lease of space agreement for quarterly FY27 leadership meetings involving the CEO and executive leadership team.
3	The Museum of Fine Arts, Houston	Lease of Space	$550.00	10/21/2026 - 10/21/2026	General Revenue (GR)		Lease of space for the Change and Transformation Institute graduation of the Harris Center on October 21, 2026.
4	WEX Health, Inc. d/b/a WEX	Health Savings Account Agreement	$0.00	1/1/2027 - 12/31/2027	General Revenue (GR)		New agreement for Health Savings Account (HSA), administered by WEX, for eligible employees enrolled in the high-deductible health plan effective January 1, 2027. The HSA will be funded through voluntary employee contributions only, with no employer contribution.
	CPEP/CRISIS SERVICES						
	FORENSICS						
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES						
5	Slosson Educational Publications, Inc.	License Agreement to utilize the Aberrant Behavior Checklist ("ABC") electronically in EPIC.	$371.00	9/1/2026 - 8/31/2027	State	Consumer Driven	New License Agreement (replacement) to utilize the Aberrant Behavior Checklist ("ABC") electronically in EPIC.
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI						
	MENTAL HEALTH						
	LEASES						

Executive Contract Summary

Contract Section

Contractor *

Family Education and Development Services, LLC

Contract ID # *

n/a

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Family Education and Development Services, LLC and The Harris Center for Mental Health & IDD

Agenda Item Submitted For: * (?)

- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *

(●) New Contract ( ) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2027

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

Fiscal Year* (?)
2027

Amount* (?)
$ 6,550.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

- [ ] Personal/Professional Services
- [ ] Consumer Driven Contract
- [ ] Memorandum of Understanding
- [ ] Affiliation or Preceptor
- [ ] BAA/DUA
- [ ] Pooled Contract
- [ ] Renewal of Existing Contract
- [ ] Consultant
- [x] 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 training is required for staff before they are able to provide Nurturing Parenting services to the individuals and families we serve. Nurturing Parenting is generally offered every other month, and following this upcoming session our next training is scheduled November 2026. Our goal is to have our new instructor fully certified and prepared to facilitate the November training.3 quotes/vendors were obtained, and feedback is enclosed. Selected vendor due to date availability needed/required.

Contract Owner*
Danyette Hemanes

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 (?)

2 Additional Vendor Quotes Documented HERE.pdf	378.88KB
Family Education and Dev. Serv. Vendor Profile Form.pdf	403.85KB
FAMILY EDUCATION AND DEVELOPMENT SERVICE_Bank Confirmation Letter.pdf	151.25KB
FEDS W9 2026.pdf	111.18KB
RE_ Inquiry Policy FM.B.8 re_ Vendor Professional Services _ Contract.pdf	1.32MB
THEHAR~1.PDF	277.32KB
The Harris Center Invoice.pdf	58.07KB

Vendor/Contractor Contact Person

Name *

Brenda McGowan

Address *

Street Address

4106 Tanbark Drive

Address Line 2

City

Marietta

State / Province / Region

TX

Postal / Zip Code

30066

Country

US

Phone Number *

404-481-8208

Email *

brendam@fedsedservices.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

1975

Amount Charged to Unit *

$ 6,550.00

Expense/GL Code No. *

549005

Budget Manager

Campbell, Ricardo

Secondary Budget Manager

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable * (?)

$450.00 Onsite Training per Instructor, + additional travel cost

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name

Hemanes, Danyette

Submission Date

9/4/2026

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

9/4/2026

Procurement Approval

File Upload (?)

Approved by

Nina Cook

Approval Date

9/10/2026

Contract Owner Approval

Approved by

Danyette Homanes

Approval Date

9/10/2026

Contracts Approval

Approve *

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *

Belinda Stude

Approval Date *

9/15/2026

Executive Contract Summary

Contract Section

Contractor *
The Council on Recovery

Contract ID # *
N/A

Presented To *
- (●) Resource Committee
- ( ) Full Board

Date Presented *
10/20/2026

Parties * (?)
The Council on Recovery & The Harris Center for Mental Health & IDD

Agenda Item Submitted For: * (?)
- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *
(●) New Contract ( ) Amendment

Contract Term Start Date* (?)
11/1/2026

Contract Term End Date* (?)
11/30/2027

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

Fiscal Year* (?)
2027

Amount* (?)
$ 6,000.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

- [ ] Personal/Professional Services
- [ ] Consumer Driven Contract
- [ ] Memorandum of Understanding
- [ ] Affiliation or Preceptor
- [ ] BAA/DUA
- [ ] Pooled Contract
- [ ] Renewal of Existing Contract
- [ ] Consultant
- [x] 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 venue is required to support quarterly FY27 leadership meetings involving the CEO and executive leadership team. The venue was selected after consideration of location, date availability, and adequate meeting space to accommodate participants and meeting activities. To reserve the space and dates, the contract signature is required within 7 days of the quote date.

Contract Owner*
Danyette Hemanes

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 (?)

RE_ Contract for The Harris Center 2027 Leadership The Council on Recovery.pdf	883.36KB
The Harris Center Quote- 2027 Leadership Summit.pdf	133KB
The Harris Center.pdf	507.63KB
W9 form_CoR.pdf	356.13KB

Vendor/Contractor Contact Person

Name*
Leah Dozier

Address *

Street Address

303 Jackson Hill Street

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77007-7407

Country

US

Phone Number *

281-507-8222

Email *

ldozier_contractor@councilonrecovery.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

1975

Amount Charged to Unit *

$ 6,000.00

Expense/GL Code No. *

549005

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

Hemanes, Danyette

Submission Date

9/23/2026

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

9/23/2026

Procurement Approval

File Upload (?)

Approved by

Brauner, Sharon

Approval Date

9/23/2026

Contract Owner Approval

Approved by

Danyette Hemanes

Approval Date

9/23/2026

Contracts Approval

Approve *

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *

Belinda Stude

Approval Date *

9/24/2026

Executive Contract Summary

Contract Section

Contractor *

The Museum of Fine Arts, Houston

Contract ID # *

NA

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

The Museum of Fine Arts, Houston

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#
- [x] Other Rental Space

Procurement Method(s) *

Check all that Apply

- [ ] Competitive Bid
- [ ] Request for Proposal
- [ ] Request for Application
- [ ] Request for Quote
- [ ] Interlocal
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *

(●) New Contract ( ) Amendment

Contract Term Start Date* (?)
10/21/2026

Contract Term End Date* (?)
10/21/2026

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

Fiscal Year* (?)
2027

Amount* (?)
$ 550.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

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

Justification/Purpose of Contract/Description of Services Being Provided* (?)
Change and Transformation Institute graduation:
Event Name: The Harris Center for Mental Health and IDD
Date of Event: Wednesday, October 21, 2026
Start and End Times: 8:00 am to 1:00 pm
Type of Event: Meeting
Approximate Number of Guests: 25
Location of Event: The Lora Jean Kilroy Visitor and Education Center, Bailey Room

Contract Owner*
Trudy Leidich

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

Please add previous contract dates and what services were provided*
June 26 leasing space

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

Community Partnership* (?)
( ) Yes ( ) No (•) Unknown

Supporting Documentation Upload (?)
The Harris Center, KVEC agreement, 10-21-2026.pdf 140.89KB

Vendor/Contractor Contact Person

Name*
Cyrus Kohanloo

Address *

Street Address

6003 Memorial Drive

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77007

Country

US

Phone Number *

9174053641

Email *

luc.josaphat@gmail.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

1173

Amount Charged to Unit *

$ 550.00

Expense/GL Code No. *

549005

Budget Manager

Moynihan, Kelly

Secondary Budget Manager

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable * (?)

N/A

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name

Josaphat, Yves

Submission Date

9/29/2026

Budget Manager Approval(s)

Approved by

Kelly E. Moynihan

Approval Date

9/29/2026

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Gertrude A Leidich

Approval Date

10/1/2026

Contracts Approval

Approve *

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *

Belinda Stude

Approval Date *

10/2/2026

Executive Contract Summary

Contract Section

Contractor *
WEX Health, Inc. D/BA WEX

Contract ID # *
5748

Presented To *
- (●) Resource Committee
- ( ) Full Board

Date Presented *
5/19/2026

Parties * (?)
WEX HEALTH, INC and The Harris Center

Agenda Item Submitted For: * (?)
- [x] 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#
- [x] Other In

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)
- [x] 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 * (?)
9/1/2025

Contract Term End Date * (?)
8/31/2026

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

Current Contract Amount *
$ 28,000.00

Increase Not to Exceed *

$ 10,000.00

Revised Total Not to Exceed (NTE) *

$ 38,000.00

Fiscal Year * (?)	**Amount** * (?)
2026	$ 38,000.00

Funding Source *

General Revenue (GR)

Contract Description / Type * (?)

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

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

ContractID# 5748 does not have enough funds to pay WEX invoices FY2026

Contract Owner *

Kip Baughman

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 *

Amy Diedrich-Gouws

Address *

Street Address

700 26th Ave E

Address Line 2

City	State / Province / Region
West Fargo	ND
Postal / Zip Code	**Country**
58078	United States

Phone Number *
6056901571

Email *
amy.diedrich@wexhealthinc.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
1108	$ 10,000.00	543039

Budget Manager
Moynihan, Kelly

Secondary Budget Manager
Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable * (?)
n/a

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

Requester Name
Abraham, Suja

Submission Date
4/24/2026

Budget Manager Approval(s)

Approved by
Ricardo Campbell

Approval Date
4/27/2026

Procurement Approval

File Upload (?)

Approved by
Sign

Approval Date

Contract Owner Approval

Approved by
Kip Baughman

Approval Date
4/28/2026

Contracts Approval

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

Approved by *

Belinda Strude

Approval Date *

4/28/2026

Executive Contract Summary

Contract Section

Contractor *

Slosson Educational Publications, Inc.

Contract ID # *

N/A

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Slosson Educational Publications, Inc. and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- [x] 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
- [x] Consumer Driven
- [ ] Other

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

( ) Yes (●) No

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

Note: This will only apply to IT contracts related to cybersecurity, all others can select NO

Funding Information *

(●) New Contract ( ) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2027

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

Fiscal Year* (?)
2027

Amount* (?)
$ 371.00

Funding Source*
State

Contract Description / Type* (?)

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

Justification/Purpose of Contract/Description of Services Being Provided* (?)
Renewal of License Agreement (replacement) to utilize the Aberrant Behavior Checklist ("ABC") electronically in EPIC.

Contract Owner*
Dr. Evanthe Collins

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

Please add previous contract dates and what services were provided*
This is a 5-year contract renewal for License Agreement to utilize the Aberrant Behavior Checklist ("ABC") electronically in EPIC.

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

Community Partnership* (?)
(•) Yes ( ) No ( ) Unknown

Specify Name*
Slosson Educational Publications, Inc.

Supporting Documentation Upload (?)

HARRISCENTERA.docx	23.67KB
HARRISCENTERS2.docx	16.67KB
Scan_20260821.pdf	187.7KB
Scan_20260824.pdf	120.23KB

Vendor/Contractor Contact Person

Name*
Debbie Powell

Address *

Street Address

PO BOX 280

Address Line 2

City

East Aurora

State / Province / Region

NY

Postal / Zip Code

14052

Country

United States

Phone Number *

888-756-7766

Email *

slossonprep@gmail.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

3623

Amount Charged to Unit *

$ 371.00

Expense/GL Code No. *

551003

Budget Manager

Degracia, Ericka

Secondary Budget Manager

Collins, Evanthe

Provide Rate and Rate Descriptions if applicable * (?)

See attachment for rate and rate description.

Project WBS (Work Breakdown Structure) * (?)

NA

Requester Name

Degracia, Ericka

Submission Date

8/28/2026

Budget Manager Approval(s)

Approved by

Ericka Degracia

Approval Date

8/28/2026

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Evanthe Collins

Approval Date

9/1/2026

Contracts Approval

Approve*

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by*

Belinda Studo

Approval Date*

9/4/2026

EXHIBIT R-9

OCTOBER 2026

AMENDMENTS UNDER 100k

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD

SNAPSHOT SUMMARY
CONTRACT AMENDMENTS
LESS THAN $100,000

OCTOBER 2026
FISCAL YEAR 2027

	CONTRACTOR	PRODUCT/SERVICE DESCRIPTION	PREVIOUS AMOUNT	INCREASE AMOUNT	NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	ACCESS								
1	Charity Logic Corporation	Software Subscription Services (iCarol) for the Crisis Line.	$12,000.00	$90.00	$12,090.00	9/1/2026 - 8/31/2027	State Grant	Sole Source	Amendment to increase the FY27 NTE for revised quote.
	ADMINISTRATION								
2	Salary.com	License and Support for Compensation Analysis Software	$20,000.00	$5,000.00	$25,000.00	9/1/2026 - 8/31/2027	General Revenue (GR)	Request for Quote	Amendment to increase the FY27 NTE which should have been $25,000 instead of $20,000.
	CPEP/CRISIS SERVICES								
3	Principle HS, LLC	Mobile X-Ray Services for Clients in Crisis at a Harris Center Facility	$1,250.00	$18,950.00	$20,200.00	9/1/2026 - 8/31/2027	General Revenue (GR)	Request for Quote	Amendment to increase the NTE to correct the FY27 funding amount only. Previous FY27 NTE was incorrect.
	FORENSICS								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES								
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI								
	MENTAL HEALTH								
	LEASES								

Executive Contract Summary

Contract Section

Contractor *

Charity Logic Corporation

Contract ID # *

2022-0516

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/22/2026

Parties * (?)

Charity Logic Corporation and The Harris Center for Mental Health and IDD - Crisis Line

Agenda Item Submitted For: * (?)

- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *

( ) New Contract (●) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2027

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

Current Contract Amount*
$ 12,000.00

Increase Not to Exceed*
$ 90.00

Revised Total Not to Exceed (NTE)*
$ 12,090.00

Fiscal Year* (?)
2027

Amount* (?)
$ 12,090.00

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
- [x] Amendment to Existing Contract
- [ ] Service/Maintenance
- [ ] IT/Software License Agreement
- [ ] Lease
- [ ] Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)
Annual renewal of software subscription services (iCarol) for the Crisis Line.

Contract Owner*
Jennifer Battle

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

Please add previous contract dates and what services were provided*
2022-present, online subscription services

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

Community Partnership* (?)
( ) Yes ( ) No (•) Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name*
Charity Logic Corporation

Address *

Street Address

2429 Military Road

Address Line 2

City

Niagara Falls

State / Province / Region

NY

Postal / Zip Code

14304-1551

Country

US

Phone Number *

613226-5511

Email *

support@icarol.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

7001

Amount Charged to Unit *

$ 12,090.00

Expense/GL Code No. *

574000

Budget Manager

Ilejay, Kevin

Secondary Budget Manager

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable * (?)

n/a

Project WBS (Work Breakdown Structure) * (?)

na/

Requester Name

Wong, Millie

Submission Date

8/31/2026

Budget Manager Approval(s)

Approved by

kevin ilejay

Approval Date

8/31/2026

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Jennifer Battle

Approval Date

8/31/2026

Contracts Approval

Approve *

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *

Ernest Savoy

Approval Date *

9/3/2026

Executive Contract Summary

Contract Section

Contractor *

Salary.com

Contract ID # *

5653

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Salary.com and The Harris Center for Mental Health & IDD

Agenda Item Submitted For: * (?)

- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *

( ) New Contract (●) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2027

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

Current Contract Amount*
$ 20,000.00

Increase Not to Exceed*
$ 5,000.00

Revised Total Not to Exceed (NTE)*
$ 25,000.00

Fiscal Year* (?)
2027

Amount* (?)
$ 25,000.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

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

Justification/Purpose of Contract/Description of Services Being Provided* (?)
FY27 Renewal budgeted amount is $25,000. This amendment is to correct the renewal amount that should have been $25,000, not $20,000. All documents are attached.

Contract Owner*
Danyette Hemanes

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 (?)

Annual Renewal Evaluation.pdf	468.13KB
ID 5653 Salary.com - Harris Ce] (2).pdf	396.25KB
July 2026 Board Report - 7-7 Final.pdf	158.01KB
RE_ CompAnalyst _ JobArchitect _ Q2 Compensation Review .pdf	329.59KB

Vendor/Contractor Contact Person

Name *

Andrew Estrada

Address *

Street Address

610 Lincoln Street, Suite 200

Address Line 2

City

Waltham

State / Province / Region

MA

Postal / Zip Code

02451

Country

US

Phone Number *

(781) 365-8591

Email *

andrew.estrada@salary.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

1108

Amount Charged to Unit *

$ 25,000.00

Expense/GL Code No. *

553002

Budget Manager

Moynihan, Kelly

Secondary Budget Manager

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable * (?)

N/A

Project WBS (Work Breakdown Structure) * (?)

N/A

Requester Name

Hemanes, Danyette

Submission Date

9/23/2026

Budget Manager Approval(s)

Approved by

Kelly E. Moynihan

Approval Date

9/23/2026

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Danyette Hemanes

Approval Date

9/24/2026

Contracts Approval

Approve*

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by*

Belinda Stude

Approval Date*

9/29/2026

Executive Contract Summary

Contract Section

Contractor *

Principle HS, LLC

Contract ID # *

2025-1154

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

Principle HS, LLC and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *

( ) New Contract (●) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2027

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

Current Contract Amount*
$ 1,250.00

Increase Not to Exceed*
$ 18,950.00

Revised Total Not to Exceed (NTE)*
$ 20,200.00

Fiscal Year* (?)
2027

Amount* (?)
$ 20,200.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

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

Justification/Purpose of Contract/Description of Services Being Provided* (?)
The June 2026 Board Report included only the FY26 funding increase of $1,250 and did not include the FY27 renewal amount of $20,200. This ECS is being submitted to correct the funding amount and obtain Board approval for the FY27 renewal funding.

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 *

Chris Light

Address *

Street Address

16840 Buccaneer Lane

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77058-2562

Country

United States

Phone Number *

8329325968

Email *

clight@principlehs.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
9205	$ 8,200.00	543031
Budget Manager	**Secondary Budget Manager**	
Oshman, Jodel	Ramirez, Priscilla	
Budget Unit Number *	**Amount Charged to Unit** *	**Expense/GL Code No.** *
9209	$ 1,100.00	543031
Budget Manager	**Secondary Budget Manager**	
Oshman, Jodel	Ramirez, Priscilla	
Budget Unit Number *	**Amount Charged to Unit** *	**Expense/GL Code No.** *
9405	$ 1,747.00	543031
Budget Manager	**Secondary Budget Manager**	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number *	**Amount Charged to Unit** *	**Expense/GL Code No.** *
9261	$ 1,164.00	543031
Budget Manager	**Secondary Budget Manager**	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number *	**Amount Charged to Unit** *	**Expense/GL Code No.** *
9264	$ 1,359.00	543031
Budget Manager	**Secondary Budget Manager**	
Ramirez, Priscilla	Puente, Giovanni	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9502	$ 970.00	543031

Budget Manager	Secondary Budget Manager
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9274	$ 210.00	543031

Budget Manager	Secondary Budget Manager
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9407	$ 450.00	543031

Budget Manager	Secondary Budget Manager
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9901	$ 5,000.00	543031

Budget Manager	Secondary Budget Manager
Ramirez, Priscilla	Puente, Giovanni

Provide Rate and Rate Descriptions if applicable* (?)

na

Project WBS (Work Breakdown Structure)* (?)

na

Requester Name	Submission Date
Singh, Patricia	9/30/2026

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

9/30/2026

Approved by

Priscilla M. Ramirez

Approval Date

9/30/2026

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

KIMBERLY KORNMAYER

Approval Date

9/30/2026

Contracts Approval

Approve*

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by*

Belinda Stude

Approval Date*

9/30/2026

EXHIBIT R-10

OCTOBER 2026

RENEWALS UNDER 100k

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD

SNAPSHOT SUMMARY
CONTRACT RENEWALS
LESS THAN $100,000

OCTOBER 2026
FISCAL YEAR 2027

	CONTRACTOR	PRODUCT/SERVICE DESCRIPTION	FY 2026 NTE AMOUNT	FY 2027 NTE AMOUNT	CONTRACT PERIOD	FUNDING	BID/TAG-ON	COMMENTS
	ACCESS							
	ADMINISTRATION							
1	American Business Forms, Inc. d/b/a American Solutions for Business	Agency-Wide Printing Services (business cards, letterhead/envelopes)	$25,000.00	$25,000.00	9/1/2026 - 8/31/2027	State	Request for Quote	Annual renewal of Agreement to provide Agency-wide printing services (business cards, letterhead/envelopes). First year renewal option.
	CPEP/CRISIS SERVICES							
2	Angelica Padilla d/b/a Lice Care Solutions, LLC	Lice Removal Services for Consumers at the Neuropsychiatric Center, Respite Rehabilitation, Re-Entry Center and Emancipation Center	$14,190.00	$14,190.00	9/23/2026 - 8/31/2027	County	Request for Quote	Annual renewal of agreement for lice removal services for consumers at the Neuropsychiatric Center, Respite Rehabilitation, Re-Entry Center and Emancipation Center located at 419Emancipation Ave.
3	Phoenix Houses of Texas Inc.	Staff Development, Training and Support Services.	$2,000.00	$2,000.00	9/1/2026 - 8/31/2027	Federal Grant	Request for Quote	Annual renewal of agreement to provide Staff development, training and support services for substance abuse treatment, recovery and resources.
	FORENSICS							
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES							
	INTELLECTUAL DEVELOPMENTAL DISABILITY SERVICES-ECI							
	MENTAL HEALTH							
	LEASES							

The HARRIS CENTER for Mental Health and IDD

Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2027

Contract ID#*

2025-1105

Contractor Name*

American Business Forms, Inc. d/b/a American Solutions for Business

Service Provided* (?)

Agency-wide printing services (business cards, letterhead/envelopes)

Renewal Term Start Date*

9/1/2026

Renewal Term End Date*

8/31/2027

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

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

Contract Description / Type

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

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

- ( ) Yes
- ( ) No
- (•) Unknown

Contract NTE* (?)

$ 25,000.00

Rate(s)/Rate(s) Description

$25,000.00, annual NTE for FY27, FY28, FY29 and FY30

Unit(s) Served*

1107

G/L Code(s)*

596001

Current Fiscal Year Purchase Order Number*

CT145405

Contract Requestor*

Nicole Lievsay

Contract Owner*

Nicole Lievsay

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?*

This is a required function that keeps costs lower.

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

○ Yes ○ No

** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO*

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1109	$ 25,000.00	596001

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* (?)	Amount* (?)
2027	$ 25,000.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

State

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

Nicole Lievsay

Budget Manager Approval(s)

Approved by

Kelly E. Moynihan

Contract Owner Approval

Approved by

NICOLE LIEVSAY

Contracts Approval

Approve*

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by*

Belinda Stude

Approval Date*

9/29/2026

Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2027

Contract ID# *

2025-1123

Contractor Name *

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

Service Provided * (?)

Contractor will provide lice removal services for consumers at the Neuropsychiatric Center, Respite Rehabilitation, Re-Entry Center and Emancipation Center located at 419Emancipation Ave. Services also include education and training for Agency staff working with consumers.

Renewal Term Start Date *

9/23/2026

Renewal Term End Date *

8/31/2027

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

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

Contract Description / Type

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

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

- ○ Yes
- ○ No
- ◉ Unknown

Contract NTE* (?)

$ 14,190.00

Rate(s)/Rate(s) Description

Unit(s) Served*

varies

G/L Code(s)*

543053

Current Fiscal Year Purchase Order Number*

PO CT145437

Contract Requestor*

Patricia Singh

Contract Owner*

Kim Kornmayer

File Upload (?)

Evaluation of Current Fiscal Year Performance

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

○ Yes ◉ No

Were Services delivered as specified in the contract?*

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

Renewal Determination

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

◉ Yes ○ No

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

Quality - Enhance workplace safety for both employees and residents.

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

○ Yes ◉ No

** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO*

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9261	$ 834.00	543053
Budget Manager*	**Secondary Budget Manager***	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	**Amount Charged to Unit***	**Expense/GL Code No.***
9264	$ 451.00	543053
Budget Manager*	**Secondary Budget Manager***	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	**Amount Charged to Unit***	**Expense/GL Code No.***
9403	$ 1,320.00	543053
Budget Manager*	**Secondary Budget Manager***	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	**Amount Charged to Unit***	**Expense/GL Code No.***
9502	$ 695.00	543053
Budget Manager*	**Secondary Budget Manager***	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	**Amount Charged to Unit***	**Expense/GL Code No.***
9901	$ 10,890.00	543081
Budget Manager*	**Secondary Budget Manager***	
Ramirez, Priscilla	Puente, Giovanni	

Provide Rate and Rate Descriptions if applicable* (?)

$135 per hour
$75 trip charge

Project WBS (Work Breakdown Structure)* (?)

na

Fiscal Year* (?)	Amount* (?)
2027	$ 14,190.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

0

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

Kim Kornmayer

Budget Manager Approval(s)

Approved by

Priscilla M. Ramirez

Contract Owner Approval

Approved by

Kim Kornmayer

Contracts Approval

Approve *

- (◉) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *

Belinda Stude

Approval Date *

9/30/2026

The HARRIS CENTER for Mental Health and IDD

Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2027

Contract ID# *

2025-1148

Contractor Name *

Phoenix Houses of Texas Inc.

Service Provided * (?)

Staff development, training and support services.

Renewal Term Start Date *

9/1/2026

Renewal Term End Date *

8/31/2027

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

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

Contract Description / Type

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

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

- ( ) Yes
- (•) No
- ( ) Unknown

Contract NTE* (?)

$ 2,000.00

Rate(s)/Rate(s) Description

$2,000.00

Unit(s) Served*

9263

G/L Code(s)*

549005

Current Fiscal Year Purchase Order Number*

CT145467

Contract Requestor*

Patricia Singh

Contract Owner*

Kim Kornmayer

File Upload (?)

Evaluation of Current Fiscal Year Performance

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

○ Yes ◉ No

Were Services delivered as specified in the contract?*

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

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

◉ Yes ○ No

Renewal Determination

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

◉ Yes ○ No

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

Innovation: Expand training programs.

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

○ Yes ◉ No

** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO*

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9263	$ 2,000.00	549005

Budget Manager*	Secondary Budget Manager*
Oshman, Jodel	Ramirez, Priscilla

Provide Rate and Rate Descriptions if applicable* (?)

$1000.00 Bi-Annual Training ($2000. yearly)

Project WBS (Work Breakdown Structure)* (?)

na

Fiscal Year* (?)	Amount* (?)
2027	$ 2,000.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

Federal 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

Kim Kornmayer

Budget Manager Approval(s)

Approved by

Jodel Oshman

Contract Owner Approval

Approved by

Kim Kornmayer

Contracts Approval

Approve*

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by*

Belinda Stude

Approval Date*

9/11/2026

EXHIBIT R-11

OCTOBER 2026

AFFILIATION AGREEMENTS, GRANTS, MOU'S AND REVENUES

INFORMATION ONLY

THE HARRIS CENTER FOR MENTAL HEALTH AND IDD

SNAPSHOT SUMMARY
AFFILIATIONS, REVENUE, AND MOUs

OCTOBER 2026
FISCAL YEAR 2027

	CONTRACTOR	PRODUCT/SERVICE DESCRIPTION	Action Type	CONTRACT PERIOD	FUNDING	COMMENTS
	AFFILIATION					
	MOU					
1	Cheyenne Center, Inc.	Memorandum of Understanding (MOU) for collaboration of services to ensure that eligible persons with substance related disorders receive addiction treatment services.	New Contract	9/1/2026 - 8/31/2029	General Revenue (GR)	New MOU for collaboration of services to ensure that eligible persons with substance related disorders receive addiction treatment services.
2	Healthcare for the Homeless	SMART Team (Street Multi-Access Response and Treatment) Initiative Program	Amendment	11/1/2026 - 10/31/2027	Federal	Amendment to extend the term of the MOU from November 1, 2026 through February 28, 2027.
3	Houston Area Women's Center	New Memorandum of Understanding	New Contract	9/1/2026 - 8/31/2031	General Revenue (GR)	New MOU for Care Coordination to establish a mutual understanding and collaborative partnership with the Houston Area Women's Center.
4	PNC Bank	PNC Bank will provide financial literacy education to Residents at the 419 Emancipation Center.	Amendment	5/8/2026 - 5/8/2027	General Revenue (GR)	MOU to provide financial literacy education services to the residents at no charge at the 419 Emancipation Center.
	REVENUE					

Executive Contract Summary

Contract Section

Contractor *
Cheyenne Center, Inc.

Contract ID # *
na

Presented To *
- (●) Resource Committee
- ( ) Full Board

Date Presented *
10/20/2026

Parties * (?)
Cheyenne Center, Inc. and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)
- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.
- ( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *
- (●) New Contract ( ) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2029

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

Fiscal Year* (?)	**Amount*** (?)
2027	$ 0.00
Fiscal Year* (?)	**Amount*** (?)
2028	$ 0.00
Fiscal Year* (?)	**Amount*** (?)
2029	$ 0.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

- [ ] Personal/Professional Services
- [ ] Consumer Driven Contract
- [x] 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* (?)

Memorandum of Understanding (MOU) between Cheyenne Center, Inc. and The Harris Center for Mental Health and IDD is to outline the responsibilities of both Parties in relation to a collaboration of services to ensure that eligible persons with substance related disorders receive addiction treatment services.

Director: Evelyn Locklin

Contract Owner*
Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*

- (•) Yes ( ) No ( ) Unknown

Please add previous contract dates and what services were provided*
MOU ID 7876

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

- ( ) Yes ( ) No (•) Unknown

Community Partnership* (?)

- ( ) Yes ( ) No (•) Unknown

Supporting Documentation Upload (?)

Cheyenne Center Harris Center MOU.docx	87KB
Cheyenne Center- BAQSOA (Exhibit A).docx	95KB

Vendor/Contractor Contact Person

Name *

Latacha Newton

Address *

Street Address

10525 Eastex Freeway

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77093

Country

US

Phone Number *

(713) 691-4898

Email *

lnewton@cheyennecenter.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *

9901

Amount Charged to Unit *

$ 0.00

Expense/GL Code No. *

0

Budget Manager

Ramirez, Priscilla

Secondary Budget Manager

Puente, Giovanni

Provide Rate and Rate Descriptions if applicable * (?)

na

Project WBS (Work Breakdown Structure) * (?)

na

Requester Name

Singh, Patricia

Submission Date

8/31/2026

Budget Manager Approval(s)

Approved by

Priscilla M. Ramirez

Approval Date

8/31/2026

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

KIMBERLY KORNMAYER

Approval Date

9/2/2026

Contracts Approval

Approve*

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by*

Belinda Studo

Approval Date*

9/15/2026

Executive Contract Summary

Contract Section

Contractor *

Healthcare for the Homeless

Contract ID # *

2026-1185

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

9/15/2026

Parties * (?)

Healthcare for the Homeless and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- [ ] Information Only (Total NTE Amount is Less than $250,000.00)
- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO*

Funding Information *

( ) New Contract (●) Amendment

Contract Term Start Date* (?)
11/1/2025

Contract Term End Date* (?)
10/31/2026

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

Current Contract Amount*
$ 333,794.50

Increase Not to Exceed*
$ 0.00

Revised Total Not to Exceed (NTE)*
$ 333,794.50

Fiscal Year* (?)
2026

Amount* (?)
$ 0.00

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
- [x] Amendment to Existing Contract
- [ ] Service/Maintenance
- [ ] IT/Software License Agreement
- [ ] Lease
- [ ] Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)
Amendment to reduce monthly psychiatric service hours from 64 to 48, allowing the inclusion of a 15% Indirect Cost (IDC) rate within the amended contract.

Contract Owner*
Kim Kornmayer

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

Please add previous contract dates and what services were provided*
Currently under contract.

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

Community Partnership* (?)
(●) Yes ( ) No ( ) Unknown

Specify Name*
Healthcare for the Homeless

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name *
Kathryn Rogers

Address *
Street Address
1934 Caroline Street
Address Line 2

City
Houston

State / Province / Region
TX

Postal / Zip Code
77002-8210

Country
United States

Phone Number *
8323417433

Email *
kathryn.rogers@hhh-tx.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *
9287

Amount Charged to Unit *
$ 0.00

Expense/GL Code No. *
135187

Budget Manager
Oshman, Jodel

Secondary Budget Manager
Ramirez, Priscilla

Provide Rate and Rate Descriptions if applicable * (?)
$200 per hour for relief psychiatrist

Project WBS (Work Breakdown Structure) * (?)
na

Requester Name
Singh, Patricia

Submission Date
8/11/2026

Budget Manager Approval(s)

Approved by
Jodel Oshman

Approval Date
8/11/2026

Contract Owner Approval

Approved by
KIMBERLY KORNMAYER

Approval Date
8/11/2026

Contracts Approval

Approve *

- (◉) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *

Belinda Stude

Approval Date *

8/12/2026

Executive Contract Summary

Contract Section

Contractor *

Houston Area Women's Center

Contract ID # *

na

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

9/15/2026

Parties * (?)

Houston Area Women's Center and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *

(●) New Contract ( ) Amendment

Contract Term Start Date* (?)
9/1/2026

Contract Term End Date* (?)
8/31/2031

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

Fiscal Year* (?)	**Amount*** (?)
2027	$ 0.00
Fiscal Year* (?)	**Amount*** (?)
2028	$ 0.00
Fiscal Year* (?)	**Amount*** (?)
2029	$ 0.00
Fiscal Year* (?)	**Amount*** (?)
2030	$ 0.00
Fiscal Year* (?)	**Amount*** (?)
2031	$ 0.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

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

Justification/Purpose of Contract/Description of Services Being Provided* (?)
This Memorandum of Understanding (MOU) for Care Coordination establishes a mutual understanding and collaborative partnership between The Harris Center for Mental Health and IDD and the following referral partner: Houston Area Women's Center.

Director: Sarah Strang

Contract Owner*
Kim Kornmayer

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

Please add previous contract dates and what services were provided*
FY 2022

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

Community Partnership* (?)
( ) Yes ( ) No (•) Unknown

Supporting Documentation Upload (?)

Vendor/Contractor Contact Person

Name *

Chanica M. Brown, M. Ed.

Address *

Street Address

3077 El Camino Street

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77054-4122

Country

US

Phone Number *

281-572-0182

Email *

cbrown@hawc.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

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

Budget Manager	Secondary Budget Manager
Oshman, Jodel	Ramirez, Priscilla

Provide Rate and Rate Descriptions if applicable * (?)

na

Project WBS (Work Breakdown Structure) * (?)

na

Requester Name	Submission Date
Singh, Patricia	8/31/2026

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

8/31/2026

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

KIMBERLY KORNMAYER

Approval Date

9/2/2026

Contracts Approval

Approve*

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by*

Ernest Savoy

Approval Date*

9/17/2026

Executive Contract Summary

Contract Section

Contractor *

PNC Bank

Contract ID # *

na

Presented To *

- (●) Resource Committee
- ( ) Full Board

Date Presented *

10/20/2026

Parties * (?)

PNC Bank and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- [x] 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
- [x] 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

Does the following apply to the contract?

Exception: Confidentiality of Cybersecurity Measures according to Texas Government Code Public Information §552.1391.

- ( ) Yes (●) No

**** Note: This will only apply to IT contracts related to cybersecurity, all others can select NO***

Funding Information *

- ( ) New Contract (●) Amendment

Contract Term Start Date* (?)
5/8/2026

Contract Term End Date* (?)
5/8/2027

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

Current Contract Amount*
$ 0.00

Increase Not to Exceed*
$ 0.00

Revised Total Not to Exceed (NTE)*
$ 0.00

Fiscal Year* (?)	**Amount*** (?)
2026	$ 0.00
Fiscal Year* (?)	**Amount*** (?)
2027	$ 0.00

Funding Source*
General Revenue (GR)

Contract Description / Type* (?)

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

Justification/Purpose of Contract/Description of Services Being Provided* (?)
Amendment to add a new location to the MOU, 419 Emancipation Ave.

PNC Bank will provide financial literacy education to the residents at no charge for their services as specified in the contract.

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 *
Nicole Motil

Address *
Street Address
12335 FM 1960
Address Line 2

City
Houston

State / Province / Region
TX

Postal / Zip Code
77065-4808

Country
US

Phone Number *
(713) 966-2270

Email *
nicole.motil@pnc.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number *	Amount Charged to Unit *	Expense/GL Code No. *
9901	$ 0.00	0

Budget Manager
Ramirez, Priscilla

Secondary Budget Manager
Puente, Giovanni

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

Project WBS (Work Breakdown Structure) * (?)
na

Requester Name
Singh, Patricia

Submission Date
8/27/2026

Budget Manager Approval(s)

Approved by
Priscilla M. Ramirez

Approval Date
8/27/2026

Contract Owner Approval

Approved by
KIMBERLY KORNMAYER

Approval Date
9/2/2026

Contracts Approval

Approve *

- (•) Yes
- ( ) No, reject entire submission
- ( ) Return for correction

Approved by *

Belinda Stude

Approval Date *

9/4/2026

EXHIBIT R-12

Financials by Clinic + NPC

Q4FYTD FY2026



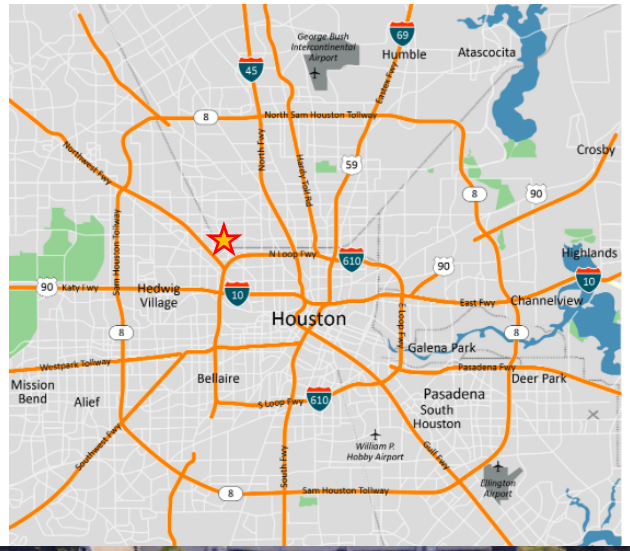
Presented by: Roxanne Carr, Controller
October 20, 2026

Northwest Community Service Center

Clinic Information	
Service Description	Adult Mental Health
Address	3737 Dacoma St
Patients Served	7,713
Facility Size	40,000 sq ft
Clinic FTEs	142

FY2026 Clinical Performance	
Annual Patient Visits	103,500
Average Monthly Patient V	8,625
Average No Show	20%
Average Patient Wait Time	4 Minutes
Average Third Next Available	1.00 Days
Average Patient Satisfaction	84%

FY2026 Q4 Financial Performance	
Revenues	$19,466,104
Expenses	$26,002,059
Gross Margin	($6,535,955)



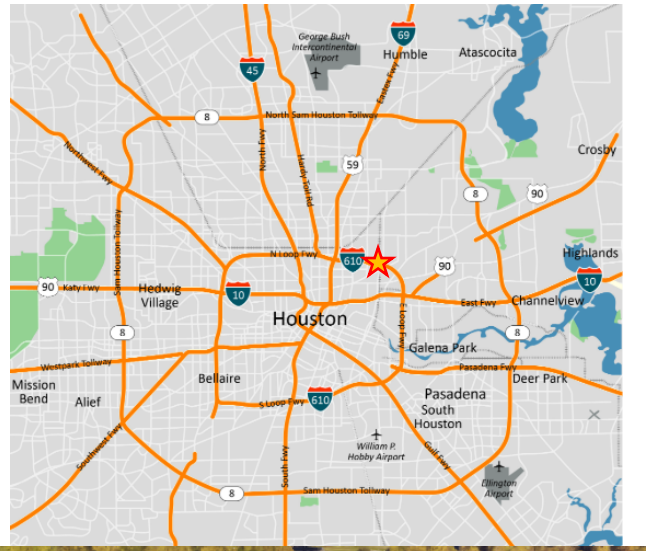


Northeast Community Service Center

Clinic Information	
Service Description	Adult Mental Health
Address	7200 N Loop East Fwy
Patients Served	6,334
Facility Size	18,000 sq ft
Clinic FTEs	77

FY2026 Clinical Performance	
Annual Patient Visits	44,361
Average Monthly Patient V	3,697
Average No Show	25%
Average Patient Wait Time	2 Minutes
Average Third Next Available	1.50 Day
Average Patient Satisfaction	88%

FY2026 Q4 Financial Performance	
Revenues	$7,788,450
Expenses	$14,369,239
Gross Margin	($6,580,789)



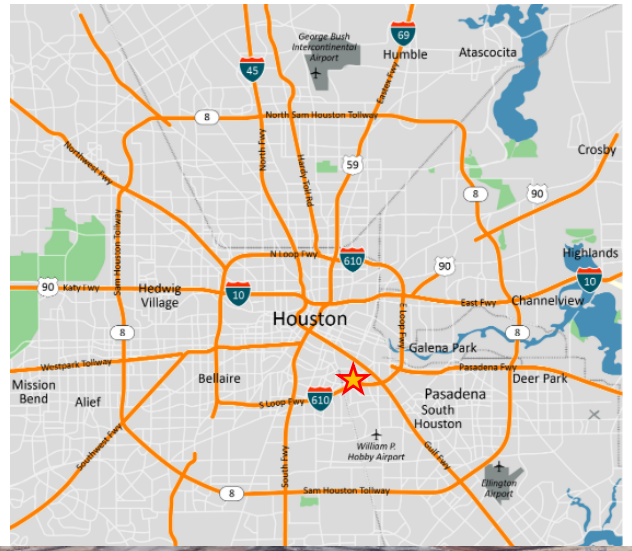


Southeast Community Service Center

Clinic Information	
Service Description	AMH & CAS
Address	5901 Long Dr
Patients Served	8,250
Facility Size	45,000 sq ft
Clinic FTEs	161

FY2026 Clinical Performance	
Annual Patient Visits	81,777
Average Monthly Patient V	6,815
Average No Show	26%
Average Patient Wait Time	2 Minutes
Average Third Next Available	2.75 Days
Average Patient Satisfaction	85%

FY2026 Q4 Financial Performance	
Revenues	$ 24,784,025
Expenses	$ 33,071,706
Gross Margin	$(8,287,681)



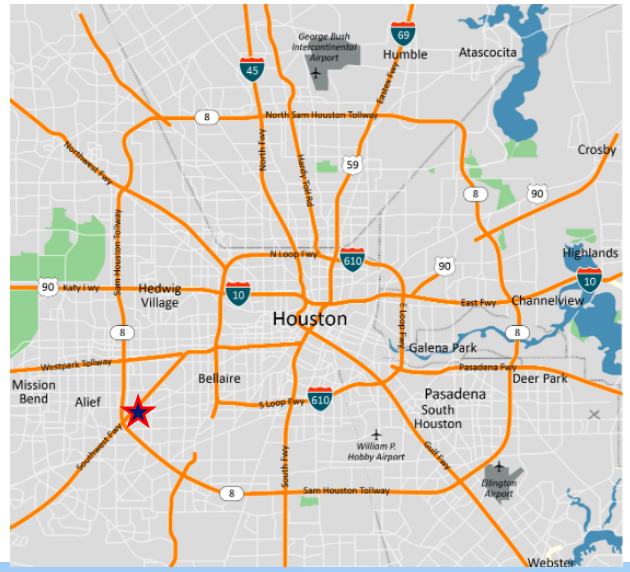


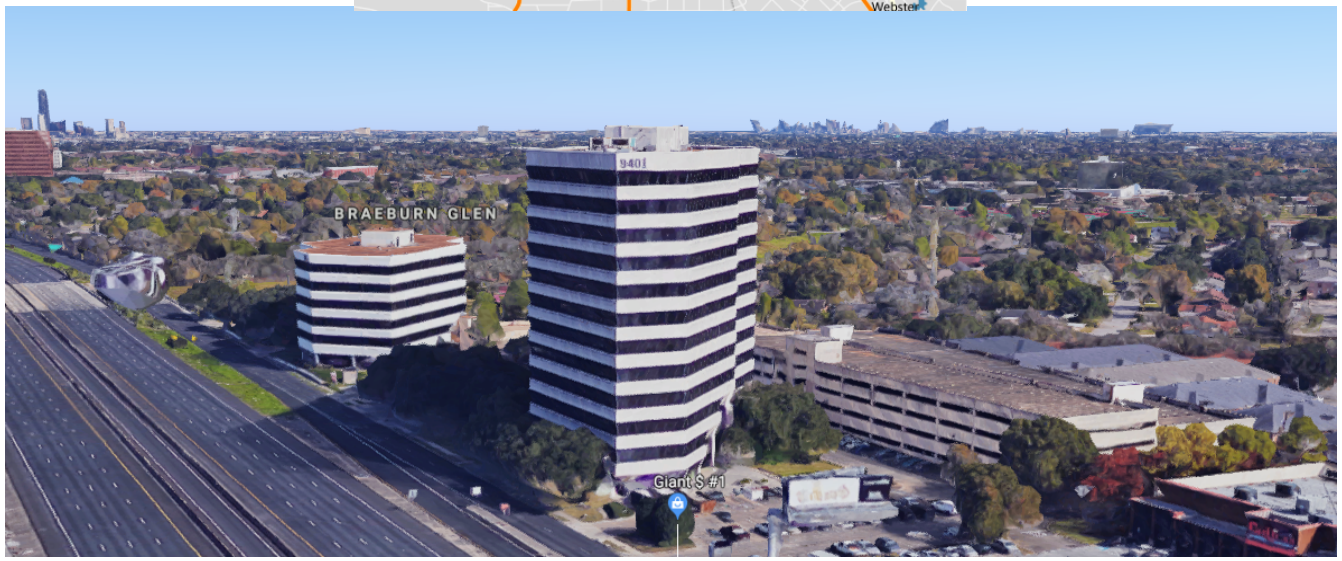
Southwest Community Service Center

Clinic Information	
Service Description	AMH & CAS
Address	9401 Southwest Fwy
Patients Served	7,671
Facility Size	37,770 sq ft (clinic space)
Clinic FTEs	185

FY2026 Clinical Performance	
Annual Patient Visits	67,006
Average Monthly Patient V	5,584
Average No Show	28%
Average Patient Wait Time	16 Minutes
Average Third Next Available	1.30 Day
Average Patient Satisfaction	91%

FY2026 Q4 Financial Performance	
Revenues	$ 22,287,378
Expenses	$ 32,143,331
Gross Margin	$(9,855,953)





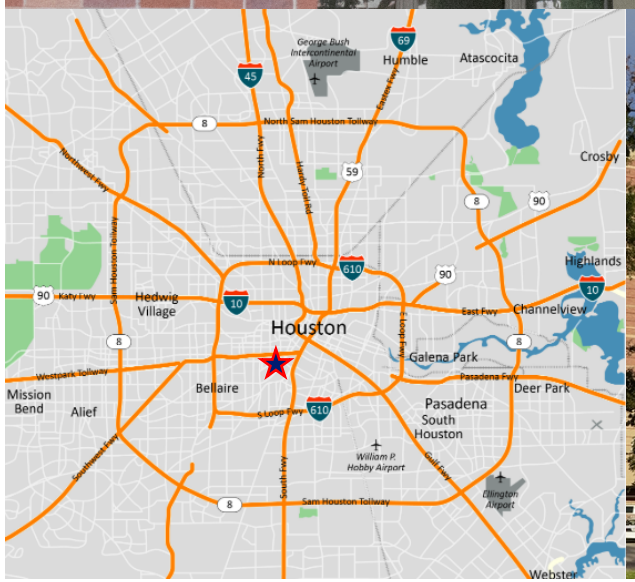
Neuro Psychiatric Center

Clinic Information	
Service Description	Psychiatric Emergency
Address	1502 Taub Loop
Patients Served	6,867
Facility Size	37,308 Sq Ft
Clinic FTEs	151

FY2026 Clinical Performance	
Annual Patient Visits	N/A
Average Monthly Patient V	N/A
Average No Show	N/A
Average Patient Wait Time	N/A
Average Third Next Available	N/A
Average Patient Satisfaction	N/A

FY2026 Q4 Financial Performance	
Revenues	$16,017,673
Expenses	$22,914,929
Gross Margin	($6,897,257)







Q4FYTD 2026 Detailed Financials

	Northwest CSC	Northeast CSC	Southeast CSC	Southwest CSC	Neuro Psychiatric Center
Revenues					
Harris County and Local	183,795	49,860	472,052	1,461,052	5,937,393
PAP / Samples	5,431,019	3,313,984	3,825,530	3,367,964	24,681
State General Revenue	8,827,133	3,107,127	14,313,803	12,959,685	8,420,639
State Contract and Grants	2,796,927	-	-	-	-
Federal Grants	621,756	554,713	3,614,601	2,548,836	-
3rd Party Billings	252,746	145,128	250,208	268,426	491,794
Net Patient Revenue	1,352,729	617,638	2,307,831	1,681,415	1,141,184
Insurance Proceeds	-	-	-	-	1,982
Revenue Total	**19,466,104**	**7,788,450**	**24,784,025**	**22,287,378**	**16,017,673**
Expenses					
Salaries	12,782,529	6,597,328	18,380,571	17,343,507	16,120,176
Fringe	3,748,611	2,132,640	5,700,880	5,408,026	4,017,707
Contract Labor	-	-	-	-	34,068
Travel & Training	130,314	41,397	511,783	126,697	190,123
Contracts and Consultant	39,699	16,444	99,822	968,982	859,366
Employee Recognition	630	-	90	221	119
Supplies	50,985	19,379	113,049	80,862	103,090
Foods	7,343	2,957	7,075	15,050	269
Drugs	342,743	147,936	294,788	252,456	51,279
PAP Drugs	5,431,019	3,313,984	3,825,530	3,367,964	24,681
Pharmacy Use Fee	1,384,253	867,074	1,267,562	936,626	83,954
Pharmacy Supplies	3,599	3,246	10,927	4,078	169,101
Equipment (Purch, Rent, Maint)	1,099,701	752,473	1,490,873	1,613,419	565,194
Software (Purch, Rent, Maint)	-	-	100	11,000	-
Building (Purch, Rent, Maint)	757,570	340,560	898,595	634,617	303,300
Vehicle (Purch, Rent, Maint)	-	-	133,080	-	26,146
Telephone and Utilities	148,134	87,348	243,370	211,983	45,051
Insurance, Legal, Audit	24,685	12,435	50,717	23,047	17,565
Dues & Subscriptions	231	1,119	228	1,018	8,400
Other	50,014	32,919	42,665	1,143,776	295,339
Expense Total	**26,002,059**	**14,369,239**	**33,071,706**	**32,143,331**	**22,914,929**
Gross Margin	**$ (6,535,955)**	**$ (6,580,789)**	**$ (8,287,681)**	**$ (9,855,953)**	**$ (6,897,257)**

Thank you.