



BOARD OF TRUSTEES MEETING

Integral Care's mission is to improve the lives of people affected by behavioral health and developmental and/or intellectual challenges.

Thursday, August 26, 2021 – 5:00 PM

VIA TEAMS

833-720-0754

Conference ID: 751 627 406#

Join on your computer or mobile app

[Click here to join the meeting](#)

AGENDA:

- I. CITIZENS' COMMENTS** (Presentations are limited to 3 minutes.)
- II. CHAIR'S WELCOME & ANNOUNCEMENTS**
- III. CONSENT AGENDA – Recommendation to Approve**
 - a. July 29, 2021 Board of Trustees Meeting Minutes**
 - b. August 11, 2021 Board of Trustees Meeting Minutes**
 - c. Cash & Investment Reports for July 31, 2021** (Finance Item III, Weden)
 - d. Contract for Banking Services** (Finance Item, VI, Weden)
 - e. Contract Travis County Juvenile Probation Department Electronic Health Record**
(Finance Item, VII, Weden)
 - f. Contract with Austin Public Health for Permanent Supported Housing North (Goal 2)**
(P&O Item III, Ahearn, pgs. 5-10)
 - g. Contract with APH and Front Steps for Behavioral Health Support at Bridge Shelters (Goal 2)** (P&O Item IV, Buchanan, pgs. 10-15)
 - h. Contract for Clinical Audit Services to Moss Adams, LLP (Goal 2)** (P&O Item V, Lynch, pgs. 16-20)
- IV. ACTION ITEMS**
 - a. Discuss and Take Appropriate Action on Financial Statements and Budget Amendments (if applicable) for the Period Ending July 31, 2021 (Subject to Audit)** (Finance Item IV, Della Thompson, David Weden)
 - b. Discuss and Take Appropriate Action to Approve FY2022 Budget** (Finance Item V, David Weden)
 - c. Recommendation to Approve Updates to Board Policies 01.01, 01.02 & 01.03** (Lisa Laky)
- V. INFORMATION ITEMS**
 - a. Board Staff Ad Hoc Committee on Racial Equity Update (Goal 3)** (Emmitt Hayes, Louise Lynch)
 - b. Housing and Homelessness Discussion** (Luanne Southern, Ellen Richards)

VI. CEO REPORT

a. Looking Ahead

VII. CITIZENS' COMMENTS (Presentations are limited to 3 minutes.)

VIII. ADJOURNMENT

*Integral Care is committed to compliance with the Americans with Disabilities Act. To request a reasonable accommodation, please call the Executive Office at 440-4031 for information or write to:
 P.O. Box 3548, Austin, Texas 78764-3548.*

September 2021 Integral Care Calendar			
Date	Time	Event/Meeting/Location	Contact Person
September 9	12:00 PM	Planning Network Advisory Committee Meeting	Louise Lynch
September 10	1:00 PM	C.A.N. Board Meeting	David Evans
September 21	5:30 PM	Planning & Operations Meeting	Louise Lynch
September 23	5:00 PM	Finance Committee Meeting	David Weden
September 30	5:00 PM	Board of Trustees Meeting	David Evans



BOARD OF TRUSTEES MINUTES

DATE: July 29, 2021
TIME: 5:00 p.m.
PLACE: Via TEAMS

MEMBERS PRESENT: Hal Katz, Dr. Guadalupe Zamora, Ed Calahan, Emmitt Hayes, Luanne Southern, Cynthia Ramos, Sheriff Sally Hernandez and Trish Young Brown

MEMBERS ABSENT: David Springer and Sarah Churchill Llamas

Other Center Staff and Guests were in attendance.

With a quorum of Trustees present, Chair Hal Katz, called the Board meeting to order at 5:02 p.m.

CITIZENS' COMMENTS

None.

CHAIR'S WELCOME & ANNOUNCEMENTS

Chair Katz acknowledged the increase in COVID cases in Travis County and the impact on the organization. We will put returning to in-person meetings on hold for now.

CONSENT AGENDA

The following Consent Agenda items were approved by consensus:

- a. **June 24, 2021 Board of Trustees Meeting Minutes**
- b. **Contract with Lone Star Circle of Care for Primary Care Services (Goal 2)** (P&O Item III, Buchanan, pgs. 5-10)
- c. **The Community Diversion Coordinator Grant Application: Texas Judicial Commission on Mental Health (Goals 2 & 3)** (P&O Item IV, Blyth, pgs. 11-14)
- d. **Cash & Investment Reports for June 30, 2021** (Finance Item III, Weden)
- e. **Lease Agreement with Travis County for 502 E. Highland Mall** (Finance Item V, Weden)
- f. **Lease Agreement with Collier Properties, LLC for Suites at 1700 South Lamar Blvd.** (Finance Item VI, Weden)
- g. **Lease Agreement with Boyd Austin GSA, LLC for 5015 S IH-35** (Finance Item VII, Weden)

ACTION ITEMS

Acceptance of Financial Statements for Period Ending June 30, 2021 (Subject to Audit). David Weden gave an extensive overview of the financial statements and reviewed the Budget Amendments, Balance Sheet for the June financials, and the Statement of Revenues & Expenditures. Hal Katz called for a motion to recommend to the Board the approval of proposed recommendation. (Subject to Audit). All were in favor. Motion carried.

Acceptance to Authorize the Chief Executive Officer and/or Chief Administrative Officer/Chief Financial Officer to Proceed with the Establishment of 4 Business Entities, including Establishing any Associated Bank Accounts, for the Potential Receipt of Transfer of HUD811 Properties. Hal Katz called for a motion to recommend to the Board the approval of proposed recommendation. All were in favor. Motion carried.

INFORMATION ITEMS

Emmitt Hayes & Louise Lynch provided an update on the Board Staff Ad Hoc Committee on Racial Equity.

Luanne Southern & Ellen Richards presented the Board with a Housing and Homelessness update.

David Weden provided an update on the Dashboard.

Muna Javaid provided the Board with a Legislative update.

Kim Macakiage & Marc Olivares provided the Board with an update on Value-Based Care.

CEO REPORT

The CEO report was briefly highlighted with emphasis on Organizational Culture.

CITIZENS' COMMENTS

Sonja Burns expressed her concern about Refusal to Engage.

There being no further business, the meeting was adjourned at 6:57 p.m.

BOARD APPROVED:

Hal Katz
Board Chair
August 26, 2021

Kendra Green
Recording Secretary



FY 2022 BUDGET

**Budget Work Session
Updated August 19, 2021**

**PEOPLE – INTEGRITY – EXCELLENCE – LEADERSHIP -
TRANSPARENCY**

**P.O. Box 3548 · Austin, Texas 78764 · 512.447.4141, f 512.440.4081
IntegralCare.org**

FINANCE COMMITTEE MEETING

Integral Care's mission is to improve the lives of people affected by behavioral health and developmental and/or intellectual challenges.

DATE: Thursday, August 12, 2021

TIME: 5:00 p.m.

Place: Via Teams

(833) 720-0754

Conference ID: 857 908 512#

AGENDA

- I. Citizens' Comments** (Presentations are limited to 3 minutes)
- II. Discussion and Information on FY2022 Budget** (Weden, Thompson)
- III. Citizens' Comments** (Presentations are limited to 3 minutes)

Integral Care is committed to compliance with the Americans with Disabilities Act. For reasonable accommodations, please call 512-440-4032 for information.

Note: The full packet is available on Integral Care's webpage at:

<http://integralcare.org/agendas-minutes/> (Under the heading "Finance Committee")

TABLE OF CONTENTS

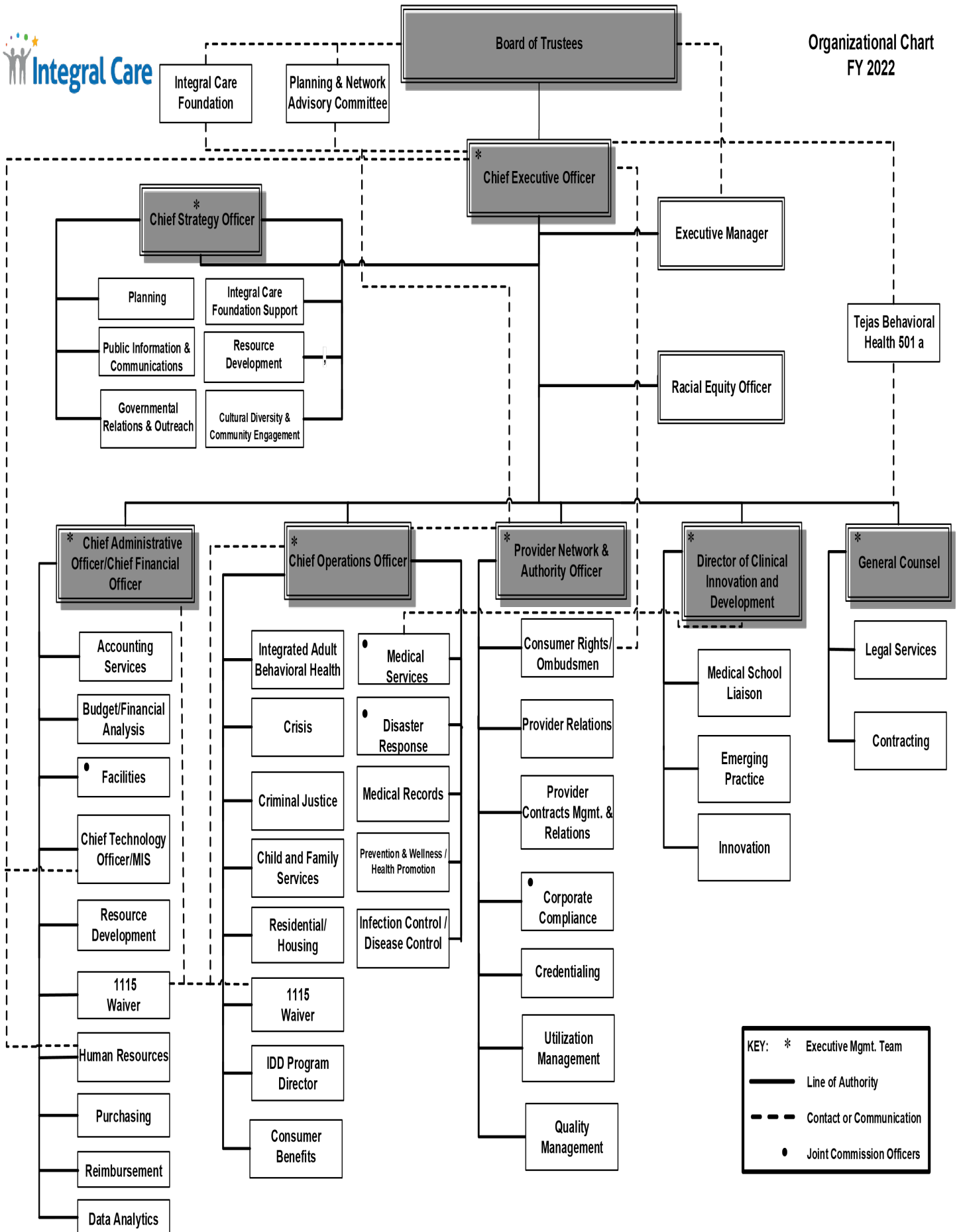
Note of Appreciation	Page 3
FY2022 Organizational Chart	Page 4
Strategic Plan 2021-22 Goals & Strategies.....	Page 5
Excerpts from Board Approved Racial Equity Plan	Pages 6-9
Racial Equity Addition to FY2022 Budget Instructions.....	Page 10
Addition of Office of Racial Equity.....	Page 10
Guiding Principles for FY22 Budget.....	Page 11
Primary Challenges/Opportunities of Implementing FY22 Budget...	Page 11
Integral Care Fiscal Year 2022 Proposed Annual Budget.....	Page 12
FY 2022 Proposed Budget by Major Financing Strategy.....	Page 13
Fiscal Year 2022 Revenue Summary Budget Changes.....	Page 14
Fiscal Year 2022 Expense Summary Budget Changes.....	Page 15
Charts.....	Pages 17-21
➤ FY 2022 Projected Consumers	
➤ FY 2022 Proposed Full Time Equivalent (FTE) Position Budget	
➤ FY 2022 Proposed Service Budget Summary	
➤ FY 2022 Proposed Revenue Budget by Funder Summary	
➤ FY 2022 Proposed Expense Budget Summary	
Financials	Pages 22-24
➤ FY 2022 Proposed Budget Center Total	
➤ FY 2022 Proposed Budget Operations	
➤ FY 2022 Proposed Budget Capital Projects & Facility Consultant	
Acronyms	Page 25

The Fiscal Year 2022 budget, as presented in this document, represents a picture in time of funding for the organization. It will have ongoing amendments as additional projects and programs are authorized by the City of Austin, Travis County, Central Health and other funding sources. The budget, as presented, represents a conglomeration of work from across the agency during shifting times in funding of services. As such, I wish to express my appreciation for the work of the Budget Office, the Revenue Management and Fiscal Staff, the Executive Management Team, the Program Directors, the Administrative Directors, and all staff whose input has gone into acquiring funding, tracking and blending finances, and creating a budget to help guide us through the challenges ahead in Fiscal Year 2022. It takes all of us working together to bring alive our mission: *“to improve the lives of adults and children living with mental illness, substance use disorder and intellectual and/or developmental disabilities in Travis County”* as part of our vision of *“Healthy Living for Everyone”*.

Thank you. Your efforts are greatly appreciated.

David A. Weden

David A. Weden
Chief Administrative Officer/Chief Financial Officer





Integral Care

Strategic Plan 2021-22 Goals & Strategies



CREATE VALUE

Ensure Operational Excellence, Sustainability, Value and Equity

- Provide culturally competent and trauma informed care that fits the unique needs of people from different backgrounds and cultures
- Recruit and retain a workforce that reflects the communities that we serve
- Strengthen organizational culture and training to support an inclusive and welcoming workplace
- Use data to support/drive decision making, equity, research, planning and communications
- Implement new payment opportunities based on innovation, value and improved outcomes
- Leverage existing resources and secure new funding from diverse sources



INNOVATE

Embrace effective models of care to ensure Equity, Access, Value, and Quality

- Implement new models of care and scale most effective methods
- Adapt and remain flexible to respond to emerging populations, emergent needs, crises and disasters
- Sustain services that demonstrate improvement in health and well-being for everyone we serve
- Incorporate innovative technologies to enhance care and create greater access for hard to reach communities
- Address the physical, social, environmental and economic factors that impact health



COMMUNICATE, COLLABORATE & CONNECT

Enhance public trust and collaborations to address the needs of all communities

- Listen to, learn from and value the input of staff, clients, providers and other stakeholders
- Diversify alliances and utilize the unique strengths of all collaborators
- Expand knowledge of the needs of all communities, and the best practices and solutions to meet diverse needs
- Share our expertise with all communities through training, publications and other methods
- Communicate our role, accountability and impact



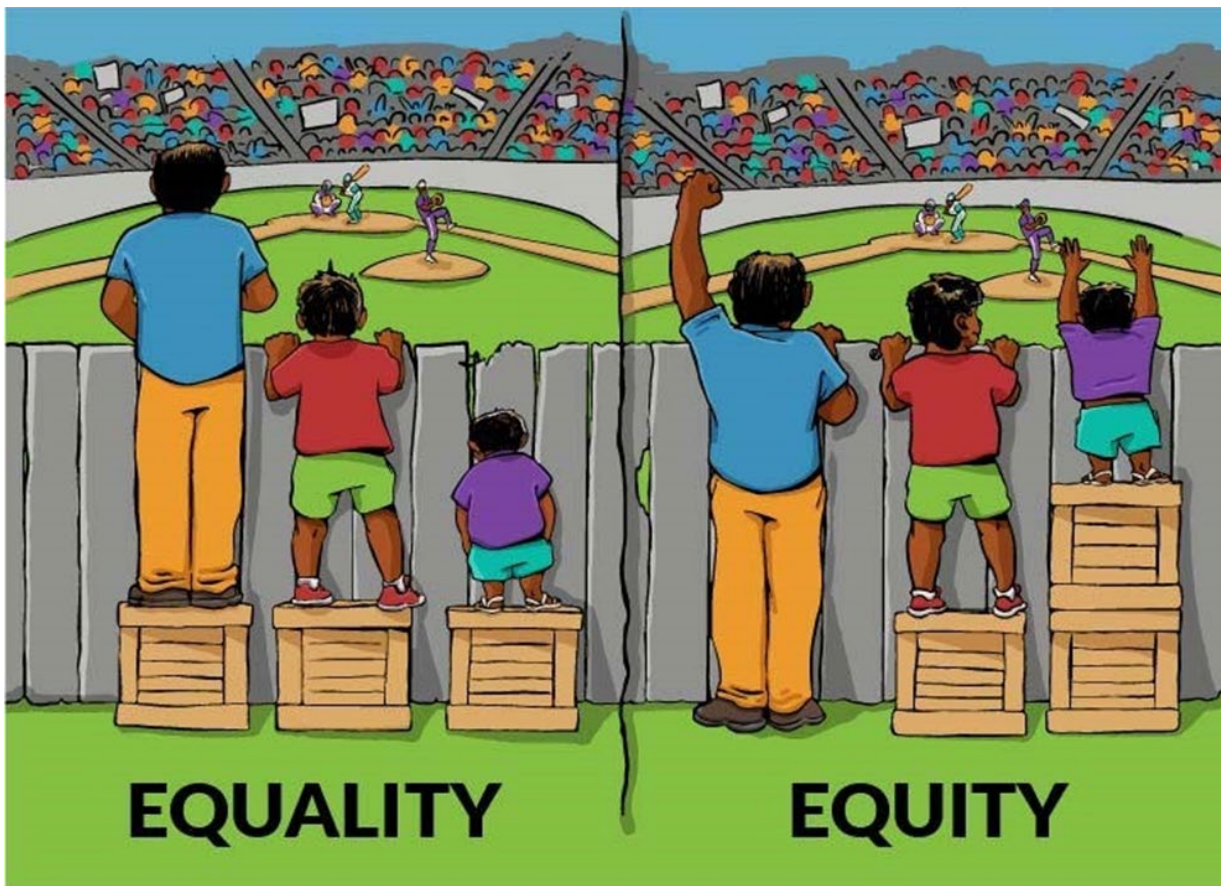
Excerpts from Board Approved Racial Equity Plan (approved May 27, 2021)

Board/Staff Committee on Racial Equity

Charge:

The Integral Care Board/Staff Committee on Racial Equity is charged to focus attention, questioning and policy review on all aspects of the organization to identify racial inequalities and opportunities to employ equity practices to overcome and eradicate racism.

The charge of this committee and the importance of this work as it relates to Integral Care and our vision of Healthy Living for Everyone, is further emphasized by the media statement from the Center for Disease Control Director Rochelle P. Walensky, MD, MPH, noting that “racism is a serious public health threat that directly affects the well-being of millions of Americans” and The Hogg Foundation for Mental Health Declaration of Racism as a Mental Health Crisis.



Where We Are Going

After reviewing baseline information, current efforts, education and participating in the ground water analysis, the workgroup identified that the following strategies must be incorporated in all efforts for Integral Care to be successful in advancing racial equity.

- Utilize data to identify, monitor, and respond to racial disparities, including identifying and addressing gaps in data and ensuring racial equity data is tracked and monitored for all programs, workforce and services.
- Review and update all policies and procedures through a racial equity lens.
- Improve outreach, engagement, and quality of care for Black, Indigenous, and People of Color (BIPOC) and underserved populations through a quality practice and workforce development strategy.
- Promote communication strategies to promote racial equity throughout the organization.
- Engage community in meaningful ways to identify gaps in perception, services and access.
- Budget for equity outcomes

The Board and Integral Care leadership are committed to:

- Identify racial inequities that exists within Integral Care’s structure, culture, policies, programs, and practices and developing a culture of inclusion.
- Implement the necessary change in organizational culture that require increased transparency, vulnerability, and accountability to create an inclusive, authentic environment for the community and staff.
- Provide equitable access to prevention, treatment, and recovery services.

To change the culture of the organization, the strategies and commitments above must come to life throughout the following areas:

- Establish a Racial Equity Baseline for Organizational Development, Structure & Accountability
- Clients and Services
- Employees, Contractors, and non-direct Contractors(vendors)
- Community Engagement and Collaboration

Following are the steps to move forward on Integral Care's Racial Equity Plan. While not all-inclusive of every effort to address racial equity within Integral Care, we believe the plan provides a high-level viewpoint of the efforts to promote racial equity within Integral Care's culture and plans to incorporate this effort within the development of the upcoming FY2022- 2025 Strategic Plan.

Establish a Racial Equity Baseline for Organizational Development, Structure and Accountability:

Goal: Embed racial equity as part of Integral Care's culture **Potential**

Objective for Business Plan:

- Engage a consultant to provide an independent view and assist with completion of an equity assessment and equity action plan.
- Utilize resources from GARE to identify and implement appropriate steps toward racial equity.
- Ground Water Analysis workshop, debrief and strategy session.
- Utilize PBS Series: Illusion of Race to provide an exploration of race in society, science and history as a means to open discussions and create a common understanding regarding racial equity.

Clients and Services:

Goal: Address identified barriers to racial equity and inclusion in client services and program practices **Potential**

Objectives for Business Plan:

- Identify diagnostic racial disparities and take appropriate steps to mediate and reduce diagnostic disparities in African American, Hispanic/Latin X, Indigenous, and Asian American/Pacific Islander clients.
- Identify racial disparities in groups receiving services (such as Level of Care assignment, frequency and duration of contact) and implement appropriate strategies to address and reduce the disparities.
- Review language access plan to ensure appropriate availability and ease of access to needed services.
- Apply a racial equity lens to clinical care practices, policies and procedures and update accordingly.

Employees and Contractors and Non-direct Contractors (Vendors):

Goal: Create an inclusive and culturally competent staff and contracted provider base that reflects the community and clients receiving services from Integral Care

Potential Objectives for Business Plan:

- Allocate appropriate funding in the FY22 budget to support the inclusion of an Equity Office for Integral Care to serve as a central point for coordination and monitoring of progress on racial equity as part of the culture of the organization.
- Implement strategies to address racial inequities, including developing a racial equity recruitment, hiring

and retention plan.

- Inclusive and supportive environment recognizing and celebrating the value staff and contractors bring when they are their authentic selves.
- Identify and examine employee reasons for separation to identify and address disparate practices.
- Identify and implement needed training for supervisors to ensure racial bias is not included in reviewing of applications or in interview process.
- Empower leaders, managers and supervisors to create safe environments for courageous conversation (Appendix C) to discuss racism and racial inequities.
- Develop a strategy to invest in increasing the percentage of Historically Underutilized Businesses (HUB qualified or eligible vendors/contractors) Integral Care uses year over year.
- Provide supervisors with appropriate training for evaluating racial equity throughout work and incorporate a racial equity standard in all performance evaluations.
- Identify and implement appropriate required employee and contractor training regarding using a racial equity lens to recognize institutional and structural racism and self-identified biases.

Community Collaboration:

Goal: Align efforts on diversity, racial equity and inclusion with groups and organizations within the community to help create shared values, consistent language, policy, and equitable practices throughout the community

Potential Objectives for Business Plan:

- Centering decision-making using a racial equity lens through an active, inclusive, community engagement processes, including listening and storytelling
- Work with other organizations within the community to collaborate on development and sharing of appropriate resources.
- Align efforts on racial equity with appropriate organizations within the community to identify and address racial disparities in availability of services.
- Hold summits to share key insights and learning with other community collaborators.
- Revise communication plan to increase outreach and engagement of BIPOC based upon consultant recommendations.

RACIAL EQUITY

Addition to FY2022 Budget Instructions

The Integral Care Board created a Board/Staff Committee on Racial Equity charged to focus attention, questioning, and policy review on all aspects of the organization so as to identify racial inequalities and opportunities to employ equity practices to overcome and eradicate racism. During the May Board meeting, the Board adopted an initial set of Goals, Objectives and Action Steps regarding addressing racial equity. A copy of the plan may be found [here](#). Advancing these efforts will take all of us working together.

As Integral Care continues efforts to have racial equity become part of the ongoing culture of the organization, we need to include considerations through the budget process. During your review of the FY22 budget, please utilize an Equity Lens by in considering any potential changes. Following is a guideline of some considerations.

Equity Lens

An **equity lens** is a process for analyzing or diagnosing the impact of the design and implementation of policies, programs, projects, plans and investments on under-served and marginalized individuals and groups, and to identify and potentially eliminate barriers. This includes: race/ethnicity, religious expression, veteran status, people of color, including underrepresented groups and new immigrant populations, people who identify as women, age, socio-economic people with both apparent and non-apparent disabilities, people of various gender and sexual identities and expressions, American Indians and other indigenous populations.

Please always consider the following:

1. Who is expected to benefit from this action/policy?
2. What methods have been used to engage community?
3. What might be the unintended consequences, drawbacks, opportunities, or domino effect from this action/policy? Will this action/policy burden: Black, Indigenous and People of Color (BIPoC)? Low Income? Certain geographic regions of Travis County? Communities with disabilities? Communities who communicate in languages other than English? Communities who face social stigma, trauma, and/or safety concerns? Communities with fewer technological resources and/or expertise?
4. If yes to any, what adjustments or accommodations could be made to mitigate the burden?

We encourage you to keep an equity lens in mind through all areas of work within the organization. Together we can make a difference.

Addition of Office of Racial Equity included in FY2022 Proposed Budget:

Racial Equity - Included in FY 2022 Proposed Budget:	
Staffing: Racial Equity Officer & Administrative Assistant 2.0 FTE (Salary/Fringe & allocated FTE cost)	\$ 275,632
Staff Development - Designing Programs with Staff for Advancing Racial Equity	200,000
Total Racial Equity - Added Program	\$ 475,632

Guiding Principles for FY22 Budget

1. Ensure availability for stakeholder participation in the budget process.
2. Budget operationalizes Strategic Plan which will be monitored and review through a Business Plan.
3. Review of budget in relation to advancing racial equity within the culture of the organization.
4. Budget for consumer-driven services reflecting quality, access, best practices, and best value, both provided internally and through an external network.
5. Commitment to maintenance of high quality, effective core services and critical infrastructure from which we can grow into our desired future.
6. Maintain organizational alignment with funding and finance requirements.
7. Budget compensation package continues aligning salaries at the State Auditor's Classification Schedule for all employees.
8. The budget will continue to focus on and strengthen collaboration with other community entities.
9. Fund Balance expenditures are intended for one-time costs and unallowable costs that are needed for ongoing operations.
10. The budget is a picture at a point and time and will be flexible and agile throughout the year while ensuring adjustments meet sound business practice and are in accordance with the various funding stream requirements.
11. All the above principles may be impacted by Legislative decisions, evolving state and federal rules, and other financial impacts

Primary Challenges/Opportunities of Implementing FY2022 Budget

- Incorporating targeted new programs through HR133 and other funding
- 1115 Waiver Transition
- Reviewing budget through Racial Equity Lens
- Identifying appropriate workforce
- Time-limited funding streams
- Value-based and alternate based payment models that are built on measures that rely on face-to-face visits
- Managed Care procurements by the state
- Electronic Visit Verification
- Health Insurance increase
- Transition of facilities

INTEGRAL CARE FISCAL YEAR 2022 PROPOSED ANNUAL BUDGET

- The proposed fiscal year FY2022 budget of \$124,973,829 is an increase of \$6,382,199 or 5.38% from the FY2021 current budget as of June 2021 and a 11.8% increase over the original FY2021 budget.

Budget Category:	FY2022 Proposed Budget		FY2021 Budget (June 2021)		Change	
Operations	\$ 119,184,318	95.37%	\$ 113,333,132	95.57%	\$ 5,851,186	5.16%
Capital Projects	5,789,511	4.63%	5,258,498	4.43%	531,013	10.10%
Total Budget	\$ 124,973,829	100.00%	\$ 118,591,630	100.00%	\$ 6,382,199	5.38%

- Full Time Equivalent (FTE) Proposed FY 2022 Budget:**

Full Time Equivalent Positions (FTE) Changes:	FTE	% Change of Total Change
FY2021 FTE Budget at 6/30/2021	1016.43	
Added FTE new contracts	47.35	4.66%
Reduced FTE contracts ending	(11.55)	-1.14%
Changes to Existing Contracts	(3.38)	-0.33%
Total FY2022 Proposed FTE Changes	32.42	3.19%
FY2022 Proposed FTE Budget	1048.85	

- Pending Grant Applications, Not Included in Proposed FY 2022 Budget:**

Pending Grant Applications, Not Included in Proposed FY2022 Budget:	Amount:	FTE:
SAMHSA CMHC	\$ 2,500,000	30.60
City of Austin Permanent Supportive Housing (PSH) North	1,558,200	7.70
Travis County - Jail Intake	715,300	7.50
Travis County - Child and Family Mobile Crisis Outreach	503,681	6.00
Travis County - Intellectual & Developmental Disabilities (IDD) Crisis Respite	484,406	8.00
Travis County - Expanded Mobile Crisis Outreach TEAM (EMCOT)	350,281	4.00
Travis County - IDD Respite	256,174	4.00
Travis County - IDD Intake	126,073	2.00
Travis County - Safelanding	104,758	1.00
Travis County Subtotal	2,540,673	32.50
Del Valle ISD	282,284	4.00
Total Pending Grant Applications, Potential 5.42% Increase	\$ 6,881,157	74.80
Total Proposed FY2022 Budget	124,973,829	1048.85
Total Potential FY2022 Budget if All Awarded	\$ 131,854,986	1123.65

- Revenue FY 2022 Budget Changes:**

FY2022 Proposed Revenue Budget Changes	Operations	Capital Outlay	Total	FTE
New Contracts	\$ 7,403,874	\$ -	\$ 7,403,874	47.35
Contracts Ending	(2,023,773)	-	(2,023,773)	(11.55)
Revenue Changes to Existing Contracts	471,085	531,013	1,002,098	(3.38)
Total Revenue Changes	\$ 5,851,186	\$ 531,013	\$ 6,382,199	32.42

- Fund Balance Included in FY2022 Budget:**

FY2022 Proposed Unrestricted Fund Balance Budget	
1115 Waiver Demonstration FY2020 Enhanced FMAP assigned in FY2020 Fund Balance for FY2022 Budget	\$ 2,059,558
1115 Waiver Demonstration DY10 Category D received in FY2021 to be assigned fund balance for use in FY2022	\$ 2,460,486
Replacement of Budgeted Directed Payment Program Funds	411,601
Total Unrestricted Fund Balance Budget	\$ 4,931,645
<i>The \$4.9M will be presented in monthly financials as planned operational use of fund balance (FY22 operating loss).</i>	

- Reserve Included in FY2022 Budget:**

FY 2022 Proposed Reserve Budget - 1115 Transformation Waiver	\$ -
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FY2022 Proposed Budget by Major Financing Strategy

Division	# Of Budget Units**	Allocated	1115 Waiver	MAC	Cost Reimbursement	FFS, Direct Payment Plan (DPP) & TxHLvg	FFS Contract Max	Other	Total
Adult Behavioral Health	65	\$ 6,860,329	\$ 7,262,321	\$ 361,251	\$19,293,665	\$ 4,365,384	\$ 2,680,899	\$ 1,115,506	\$ 41,939,355
Adult Outpatient MH	31	6,716,583	7,200,851	-	5,621,606	3,167,636	624,432	461,744	23,792,852
Homeless Outreach/Housing	23	143,746	61,470	-	11,187,313	740,585	-	592,765	12,725,879
Substance Use Disorders	11	-	-	361,251	2,484,746	457,163	2,056,467	60,997	5,420,624
Child & Family Services	23	\$ 2,920,434	\$ 1,087,878	\$ -	\$ 4,219,644	\$ 2,842,913	\$ 13,854	\$ 430,798	\$ 11,515,521
Children's Outpatient MH	19	2,920,434	517,004	-	2,787,629	2,217,061	13,854	134,793	8,590,775
School Based-Services	4	-	570,874	-	1,432,015	625,852	-	296,005	2,924,746
Crisis Services	29	\$ 5,948,237	\$ 3,200,305	\$ 231,725	\$15,929,574	\$ 982,820	\$ 9,233,373	\$ 10,211	\$ 35,536,245
Clinic/Community	7	3,252,009	700,059	-	3,773,395	211,803	-	3,970	7,941,236
Residential	9	2,696,228	2,500,246	119,621	3,964,614	372,838	1,728,983	2,963	11,385,493
Inpatient Beds	3	-	-	-	3,723,802	-	6,300,000	-	10,023,802
Criminal Justice	7	-	-	112,104	4,425,058	398,179	1,134,390	3,278	6,073,009
Disaster	3	-	-	-	42,705	-	70,000	-	112,705
Intellectual & Dev. Disabilities	31	\$ 2,434,420	\$ 38,038	\$ 640,328	\$ 1,656,715	\$ 3,325,541	\$ 29,925	\$ 67,679	\$ 8,192,646
Hotline/Call Center	4	\$ 1,638,478	\$ 329,703	\$ 1,766,696	\$ 1,657,558	\$ -	\$ 21,600	\$ -	\$ 5,414,035
Administration / Authority	23	\$ 4,158,421	\$ 4,999,528	\$ -	\$ 3,193,498	\$ 216,141	\$ 406,567	\$ -	\$ 12,974,155
Community Collaboratives	16	\$ 713,702	\$ 2,710,437	\$ -	\$ -	\$ -	\$ -	\$ 188,222	\$ 3,612,361
Capital Projects	1	\$ -	\$ 1,195,155	\$ -	\$ -	\$ -	\$ -	\$ 4,594,356	\$ 5,789,511
Total	192	\$24,674,021	\$ 20,823,365	\$ 3,000,000	\$45,950,654	\$11,732,799	\$ 12,386,218	\$ 6,406,772	\$124,973,829
% of Total		19.74%	16.66%	2.40%	36.77%	9.39%	9.91%	5.13%	100.00%
# of Contracts		4	1	1	79	29	7	1	122
# of Revenue Line Items		12	2	1	88	43	25	9	180

1

<u>Allocated Category:</u>	<u>Cost Reimbursement</u>	<u>FFS Contract Max</u>
City Interlocal \$ 1,868,591	HHSC MH - 24 contracts \$21,356,871	CCC, CH, Sendero - 3 contracts \$ 8,514,231
County Interlocal 1,411,054	City Contracts - 17 contracts 9,985,629	HHSC SA - 6 contracts, 12 program: 2,666,037
HHSC MH Performance Contract 18,693,037	Travis County - 12 contracts 4,750,754	Travis County - 4 contracts 1,230,566
HHSC IDD Performance Contract 2,701,339	SAMHSA - 4 contracts 3,524,999	VA - Safe Haven 892,425
Total Allocated \$24,674,021	TCOOMMI - 1 Contract, 2 Program 2,051,532	TxMOUD 504,295
	HHSC IDD - 1 Contract, 6 Program 1,764,336	Peoples/SAFE Clinics-2 contracts 121,672
	St. David's - 2 contracts 1,061,930	HHSC MH First Aid 70,000
	Del Valle ISD - 2 Contracts 712,203	TWC Fees Billed 29,925
	UT Dell Med Sch - 7 contracts 662,346	**Reserve Unearned FFS CM (1,642,933)
	HUD 482,964	Total FFS Contract Max \$12,386,218
	Episcopal Health Fnd 303,432	**Note: Reserve Unearned include 7 programs in addition to admin reserve
	CPRIT - 2 contracts 249,581	
	Foundation Communities 172,755	Other Category:
	Lifeworks 60,000	Frost Bank - Loan Proceeds \$ 4,594,356
	Meadows Foundation 44,000	Rental Income 710,836
	University of Houston (CDC) 30,127	Fund Balance 411,601
	Pflugerville ISD QMHP 30,000	Client Revenue 349,527
	Via Hope 18,000	Client Private Insurance 177,080
	**Reserve Unearned CR (1,310,805)	Fund Raising, Other Donations 90,705
	Total Cost Reimbursement \$45,950,654	Medical Record Fees 33,000
	**Note: Reserve Unearned includes 11 programs in addition to admin reserve	Interest Income 10,000
		All Other Miscellaneous 29,667
		Total Other \$ 6,406,772

FISCAL YEAR 2022 REVENUE SUMMARY BUDGET CHANGES

- New Contracts in Proposed FY2022 Budget:**

New Contracts:	Operations	Capital Outlay	Total	FTE
HHSC Block Grant Supportive Housing	3,250,000		3,250,000	17.20
SAMHSA CCBHC	1,999,999		1,999,999	21.00
HHSC Capacity Expansion	1,199,384		1,199,384	0.00
HHSC RA1SE Supplemental	429,180		429,180	4.95
City of Austin Bridge to Recovery	229,925		229,925	1.20
HHSC Bridge to Star Plus +	195,386		195,386	2.00
HHSC MFP (Support Foundation Communities)	100,000		100,000	1.00
Total Added Contracts	\$ 7,403,874	\$ -	\$ 7,403,874	47.35

- Contracts Ending in Proposed FY 2022 Budget:**

Contracts Ending:	Operations	Capital Outlay	Total	FTE
City of Austin COVID Prolodges & ISOFAC	\$ (803,233)	\$ -	\$ (803,233)	(4.00)
Del Valle VOCA	(400,000)		(400,000)	(4.00)
TC CDBG-CV COVID (continuation of prolodge support)	(324,046)		(324,046)	0.00
COVID One-time funds (United Way, St. David's Foundation, Other funds)	(165,860)		(165,860)	0.00
Integral Care Foundation (Client Supports)	(140,533)		(140,533)	0.00
HHSC SA OBOT	(81,388)		(81,388)	(0.55)
Front Steps	(59,814)		(59,814)	(2.00)
East Austin College Prep	(48,899)		(48,899)	(1.00)
Total Major Contracts Ending	\$ (2,023,773)	\$ -	\$ (2,023,773)	(11.55)

- Major Budget Changes to Existing Contracts**

Major Revenue Changes to Existing Contracts:	Operations	Capital Outlay	Total	FTE
1115 Waiver Fund Balance Reserve	\$ 915,501	\$ 731,013	\$ 1,646,514	0.00
HHSC Lifeline State Expansion	874,196		874,196	1.50
COA HOST	401,667		401,667	3.30
Medicaid Admin Claiming	400,000		400,000	0.00
COA Rapid ReHousing	324,000		324,000	1.00
TXMOUD	100,583		100,583	(0.55)
1115 Transformation Waiver	(41,245)		(41,245)	0.00
HHSC Suicide Regional Expansion	(610,397)		(610,397)	0.00
Fund Balance Reserve	80,303	(200,000)	(119,697)	0.00
Reserve - Unearned Cost Reimb (Contra Budget)	(478,019)		(478,019)	0.00
DADS OPMH Learning Collaborative Pilot	(300,000)		(300,000)	1.63
Episcopal Health Foundation	(258,447)		(258,447)	(0.10)
Client Revenue & Client Insurance	(254,336)		(254,336)	0.00
DSHS Healthy Community Collaborative	(235,050)		(235,050)	(9.75)
Travis County - SAMSO	(144,572)		(144,572)	0.00
St. David's Herman Center	(119,167)		(119,167)	0.00
Reserve - Unearned FFS Contract Max (Contra Budget)	(115,856)		(115,856)	0.00
Meadows Foundation	(100,000)		(100,000)	(0.50)
All Other	31,924		31,924	0.09
Total Major Revenue Changes to Existing Contracts	\$ 471,085	\$ 531,013	\$ 1,002,098	(3.38)

- Total Budget Changes**

Total Revenue & FTE Changes	Operations	Capital Outlay	Total	FTE
Total Revenue Changes	\$ 5,851,186	\$ 531,013	\$ 6,382,199	32.42

FISCAL YEAR 2022 EXPENSE SUMMARY BUDGET CHANGES

- Salary & Fringe Benefits FY 2022 Major Budget Changes:**

Salary & Fringe Benefits FY 2022 Major Budget Changes:	Change	% of Total Change
New Contracts	\$ 3,136,396	55.52%
Health Insurance (excludes new and ending contracts)	2,183,076	38.64%
Salary Stipend Increase: Crisis Programs, Nurse Positions, Shift Differential & On Call	1,438,971	25.47%
Contracts Ending	(1,248,358)	-22.10%
All Other Program Salary & Benefit Budget Changes	139,518	2.47%
Total Salary & Fringe Benefit FY 2022 Budget Changes	\$ 5,649,603	100.00%

- Travel / Workshop FY 2022 Major Budget Changes:**

Travel / Workshop FY 2022 Major Budget Changes	Change	% of Total Change
In Region Mileage Reimbursement	\$ 167,234	82.44%
Workshop (fees, transportation, per diem)	35,612	17.56%
Total Travel / Workshop FY 2022 Budget Changes	\$ 202,846	100.00%

- Prescriptions / Drugs FY 2022 Major Budget Changes:**

Prescriptions / Drugs	Change	% of Total Change
Retail Class A Pharmacy	\$ (102,500)	74.56%
Pharmacy	(53,062)	38.60%
All Other Programs	18,083	-13.15%
Total Prescription / Drugs FY 2022 Budget Changes	\$ (137,479)	100.00%

- Capital Outlay FY 2022 Budget Changes:**

Capital Outlay	Change	% of Total Change
William Cannon FY 2021 renovation budget reduction	\$ (200,000)	80.82%
Computer / Software Purchases	(47,455)	19.18%
Total Capital Outlay FY 2022 Budget Changes	\$ (247,455)	100.00%

- Contracts & Consultants FY 2022 Budget Changes:**

Contracts & Consultants	Change	% of Total Change
Consultant Contract (mainly due to reduction IDD OPMHP (\$540K)	\$ (439,431)	59.96%
Contract Program Services (mainly due to reduction in contract prescribers)	(185,964)	25.38%
Interpreter Services (based on FY2021 trend, may need future adjustment)	(126,527)	17.27%
Hospital Bedday (reduction HHSC Inpatient COVID)	(40,000)	5.46%
Contract Administrative Services (mainly due to increase Datis payroll processing)	47,360	-6.46%
Translation Services	11,716	-1.60%
Total Contracts & Consultants FY2022 Budget Changes	\$ (732,846)	100.00%

FISCAL YEAR 2022 EXPENSE SUMMARY BUDGET CHANGES

- Other (Facilities, Equipment, Supplies, etc.) FY 2022 Budget Changes:**

Other (Facility, Equipment, Supplies, etc.)	Change	% of Total Change
Founders Building Purchase, principal debt payments	\$ 470,242	37.96%
Network, Telephone, and Internet Connection (allocated to programs % of FTE)	379,249	30.61%
Small Equip - Computers (some aged computer replacements)	296,820	23.96%
Corporate Phone (mainly due to City EMCOT 911 iPad connection fee)	288,064	23.25%
Building Security (Founders bldg. \$171K, Woodrow apartments \$101K & all other (\$90K)	182,045	14.69%
Building Rental (increases among 11 leased properties)	169,006	13.64%
Building Repair Maint Contractor (general repairs maintenance owned buildings)	121,833	9.83%
Property Insurance	118,927	9.60%
MFI Service (mainly reductions Regional Suicide Prevention (\$67K) & COVID (\$84K)	(158,298)	-12.78%
Computer Software Licenses (moved Carasoft & Genesys Software to FTE allocation)	(174,261)	-14.07%
Staff Development (reduced HHSC Regional Suicide Prevention (\$469K), increase \$280K)	(189,275)	-15.28%
Small Furn Equip Purchase (City EMCOT iPad FY 2021 purchases (\$322K)	(314,341)	-25.37%
All Other (63 line items)	48,813	3.94%
Total Other (Facility, Equipment, Supplies, etc.) FY 2022 Budget Changes	\$ 1,238,824	100.00%

- Client Support Cost FY 2022 Budget Changes:**

Client Support Costs	Change	% of Total Change
HHSC Block Grant Supportive Housing	\$ 1,425,112	73.20%
City of Austin Rapid Rehousing	211,049	10.84%
SAMHSA CCBHC	69,100	3.55%
DACC-DAA Homeless Health and Wellness	65,409	3.36%
HHSC Forensic ACT (FACT)	56,211	2.89%
HUD Housing Support	52,473	2.70%
All Other Programs	67,556	3.47%
Total Client Support Costs FY 2022 Budget Changes	\$ 1,946,910	100.00%

- Reserve FY 2022 Budget Changes:**

Reserve	Change	% of Total Change
Total Decrease Reserve Fund (1115 Transformation Waiver)	\$ (1,538,204)	100%

Total Expense FY 2022 Expense Budget Change	\$ 6,382,199
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FY2022 PROJECTED CONSUMERS

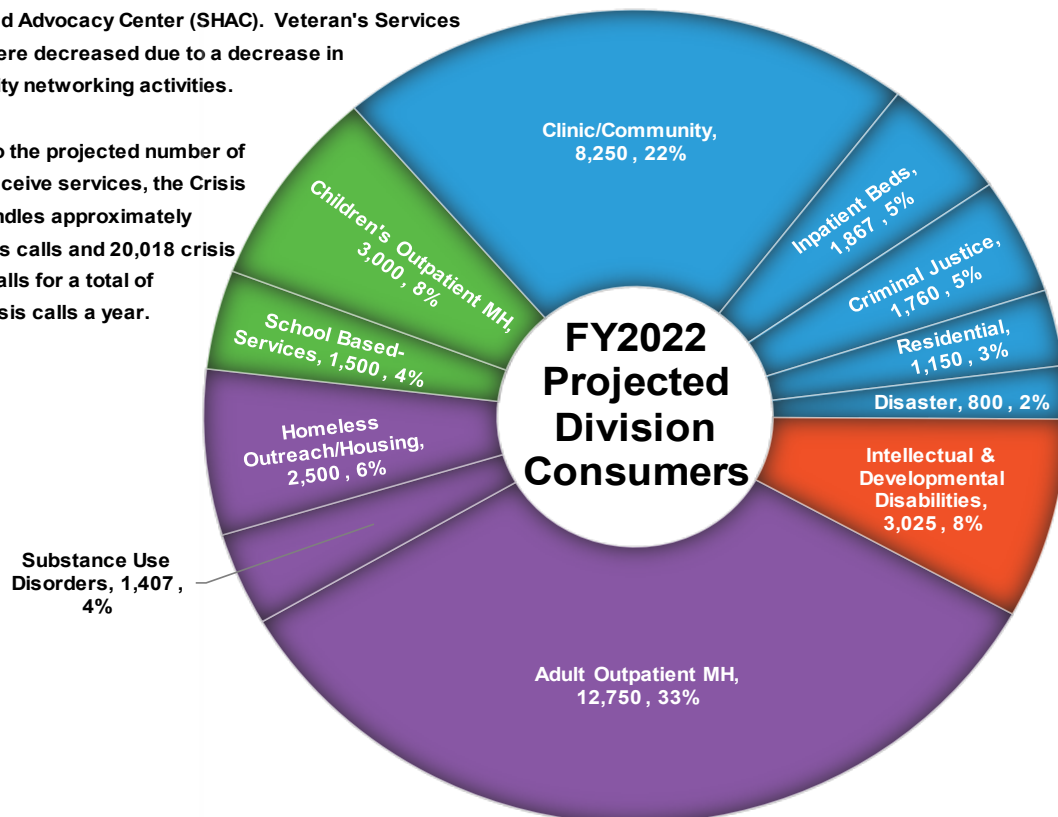
Division	FY2022 Projection		FY22 Change from FY21 Revised Projection		FY2021 Projection	
	Consumers	% of Total	Incr / (Decr)	Incr / -Decr	Revised	% of Total
Adult Behavioral Health	16,657	100.00%	1,977	13.47%	14,680	100.00%
Adult Outpatient MH	12,750	76.54%	1,750	15.91%	11,000	74.93%
Homeless Outreach/Housing	2,500	15.01%	150	6.38%	2,350	16.01%
Substance Use Disorders	1,407	8.45%	77	5.79%	1,330	9.06%
Child & Family Services	4,500	100.00%	750	20.00%	3,750	100.00%
Children's Outpatient MH	3,000	66.67%	500	20.00%	2,500	66.67%
School Based-Services	1,500	33.33%	250	20.00%	1,250	33.33%
Crisis Services	13,827	100.00%	1,745	14.44%	12,082	100.00%
Clinic/Community	8,250	59.67%	1,050	14.58%	7,200	59.59%
Inpatient Beds	1,867	13.50%	427	29.65%	1,440	11.92%
Criminal Justice	1,760	12.73%	8	0.46%	1,752	14.50%
Residential	1,150	8.32%	284	32.79%	866	7.17%
Disaster	800	5.79%	(24)	-2.91%	824	6.82%
Intellectual & Developmental Disabilities	3,025	100.00%	50	1.68%	2,975	100.00%
External Data Sources (2)	3,979	100.00%	955	31.58%	3,024	100.00%

Notes:

(1) The FY2022 projection of consumers served includes duplication of consumers within and across the divisions.

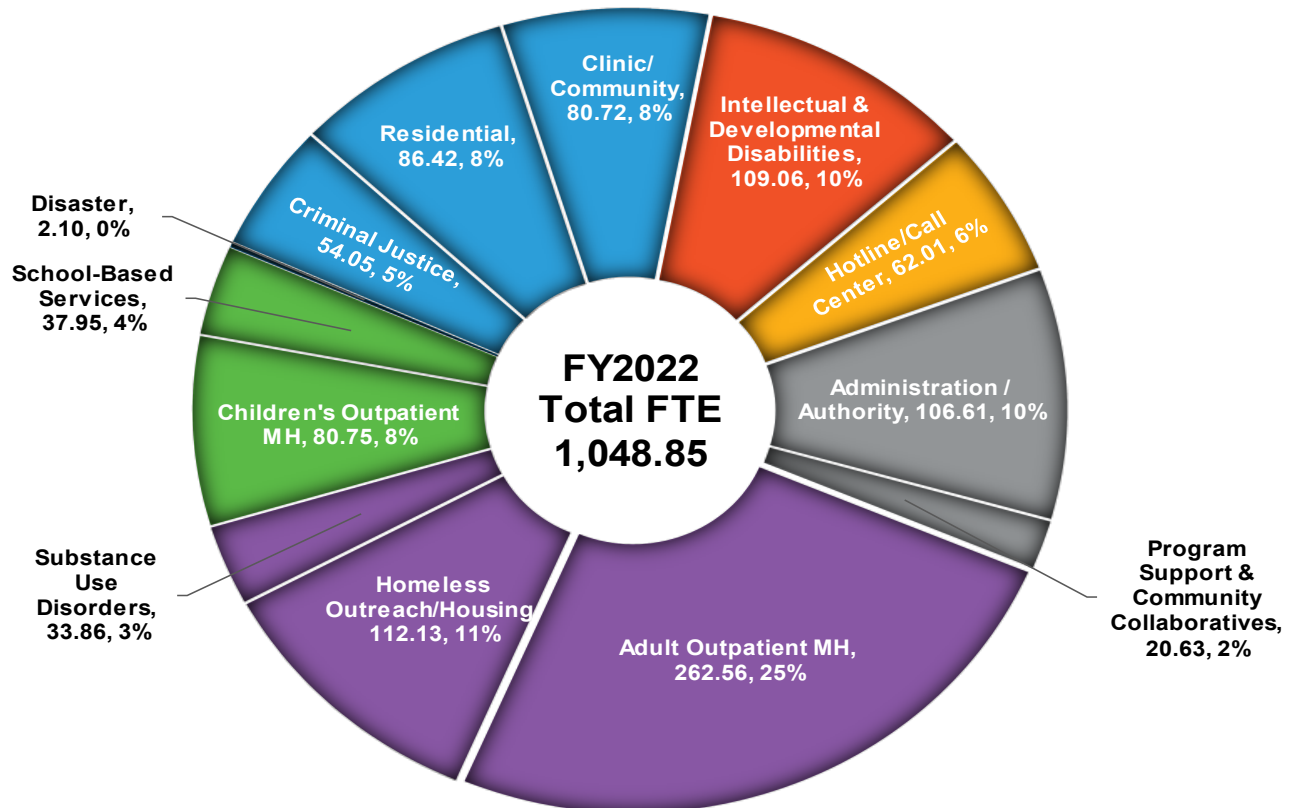
(2) Data Reported from External Sources: Veteran's Services, Substance Use Managed, Services Organization (County Only), Self Help and Advocacy Center (SHAC). Veteran's Services numbers were decreased due to a decrease in in-community networking activities.

(3) In addition to the projected number of clients to receive services, the Crisis Helpline handles approximately 78,415 crisis calls and 20,018 crisis Follow-up calls for a total of 117,175 crisis calls a year.



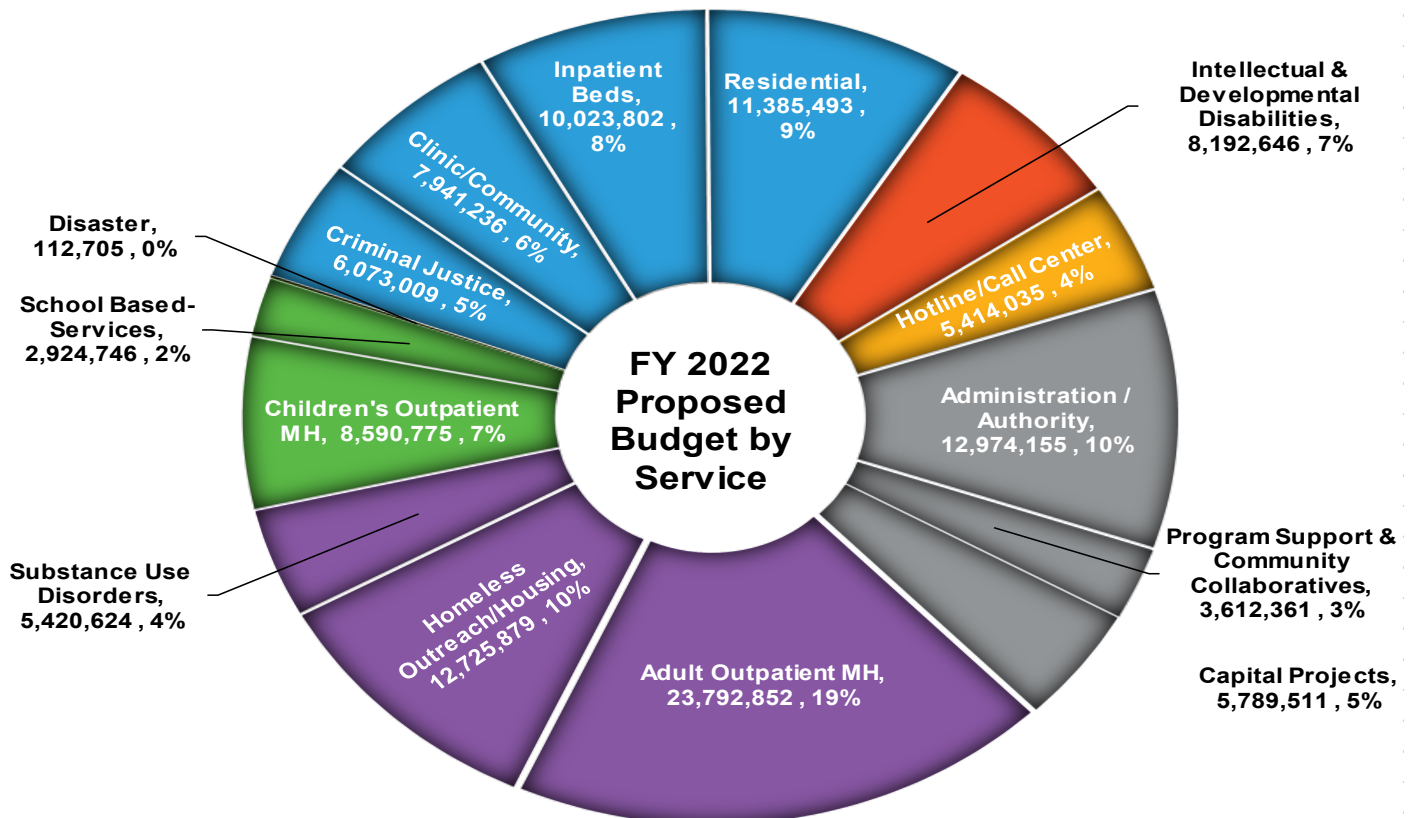
FY2022 PROPOSED FULL TIME EQUIVALENT (FTE) POSITION BUDGET

Division	FY2022 Proposed Budget		Change 2021 Current		FY2021 Budget (as of June 2021)	
	FTE	% of Total	Incr / (Decr)	Incr / -Decr	Current	% of Total
Adult Behavioral Health Total	408.55	38.95%	35.71	9.58%	372.84	35.55%
Adult Outpatient MH	262.56	25.03%	25.43	10.72%	237.14	23.33%
Homeless Outreach/Housing	112.13	10.69%	10.40	10.22%	101.74	10.01%
Substance Use Disorders	33.86	3.23%	(0.11)	-0.32%	33.97	3.34%
Child & Family Services Total	118.70	11.32%	-7.96	-6.28%	126.65	12.08%
Children's Outpatient MH	80.75	7.70%	(2.01)	-2.42%	82.75	8.14%
School-Based Services	37.95	3.62%	(5.95)	-13.55%	43.90	4.32%
Crisis Services Total	223.29	21.29%	-4.09	-1.80%	227.38	21.68%
Clinic/Community	80.72	7.70%	0.03	0.04%	80.69	7.94%
Residential	86.42	8.24%	0.55	0.63%	85.87	8.45%
Inpatient Beds	0.00	0.00%	0.00		0.00	0.00%
Criminal Justice	54.05	5.15%	(3.60)	-6.24%	57.65	5.67%
Disaster	2.10	0.20%	(1.07)	-33.75%	3.17	0.31%
Intellectual & Developmental Disabilities	109.06	10.40%	1.85	1.73%	107.21	10.55%
Hotline/Call Center	62.01	5.91%	-0.50	-0.80%	62.51	6.15%
Administration / Authority	106.61	10.16%	7.25	7.30%	99.36	9.78%
Program Support & Community Collaboratives	20.63	1.97%	0.15	0.73%	20.48	2.02%
Total	1,048.85	100.00%	32.42	3.19%	1016.43	100.00%



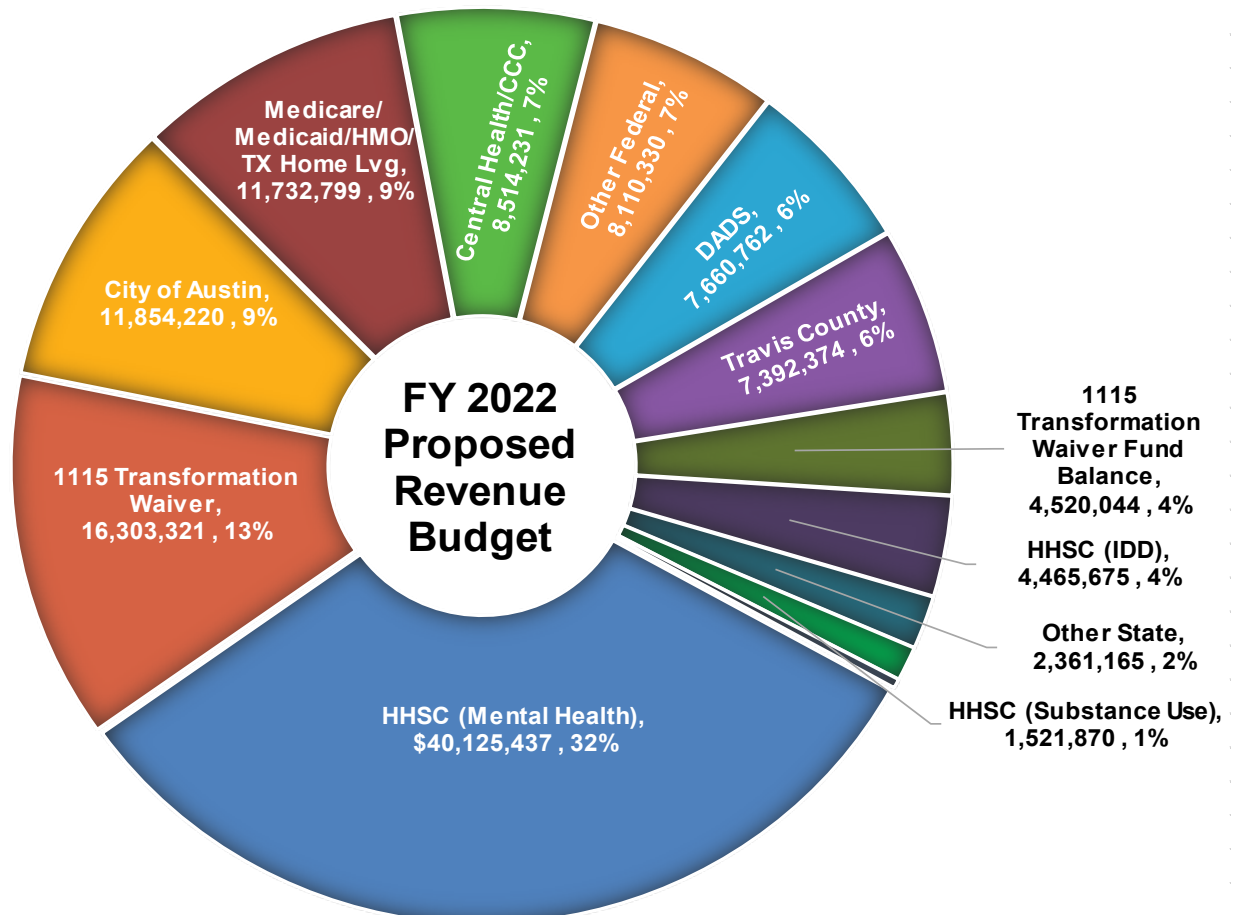
FY2022 PROPOSED SERVICE BUDGET SUMMARY

Division	FY2022 Proposed Budget		Change 2021 Current Budget		FY2021 Budget (as of June 2021)	
	Total	% of Total	Incr/(Decr)	Incr/-Decr	Current	% of Total
Adult Behavioral Health	\$ 41,939,355	33.56%	\$ 5,685,095	15.68%	\$ 36,254,260	30.57%
Adult Outpatient MH	23,792,852	19.04%	2,519,181	11.84%	21,273,671	17.94%
Homeless Outreach/Housing	12,725,879	10.18%	3,128,855	32.60%	9,597,024	8.09%
Substance Use Disorders	5,420,624	4.34%	37,059	0.69%	5,383,565	4.54%
Child & Family Services	11,515,521	9.21%	(267,122)	-2.27%	11,782,643	9.94%
Children's Outpatient MH	8,590,775	6.87%	245,271	2.94%	8,345,504	7.04%
School Based-Services	2,924,746	2.34%	(512,393)	-14.91%	3,437,139	2.90%
Crisis Services	35,536,245	28.43%	120,024	0.34%	35,416,221	29.86%
Residential	11,385,493	9.11%	666,436	6.22%	10,719,057	9.04%
Inpatient Beds	10,023,802	8.02%	(40,000)	-0.40%	10,063,802	8.49%
Clinic/Community	7,941,236	6.35%	575,522	7.81%	7,365,714	6.21%
Criminal Justice	6,073,009	4.86%	(35,453)	-0.58%	6,108,462	5.15%
Disaster	112,705	0.09%	(1,046,481)	-90.28%	1,159,186	0.98%
Intellectual & Developmental Disabilities	8,192,646	6.56%	(16,904)	-0.21%	8,209,550	6.92%
Hotline/Call Center	5,414,035	4.33%	523,983	10.72%	4,890,052	4.12%
Administration / Authority	12,974,155	10.38%	1,065,455	8.95%	11,908,700	10.04%
Program Support & Community Collaboratives	3,612,361	2.89%	(1,259,345)	-25.85%	4,871,706	4.11%
Capital Projects	5,789,511	4.63%	531,013	10.10%	5,258,498	4.43%
Total	\$124,973,829	100.00%	\$ 6,382,199	5.38%	\$ 118,591,630	100.00%



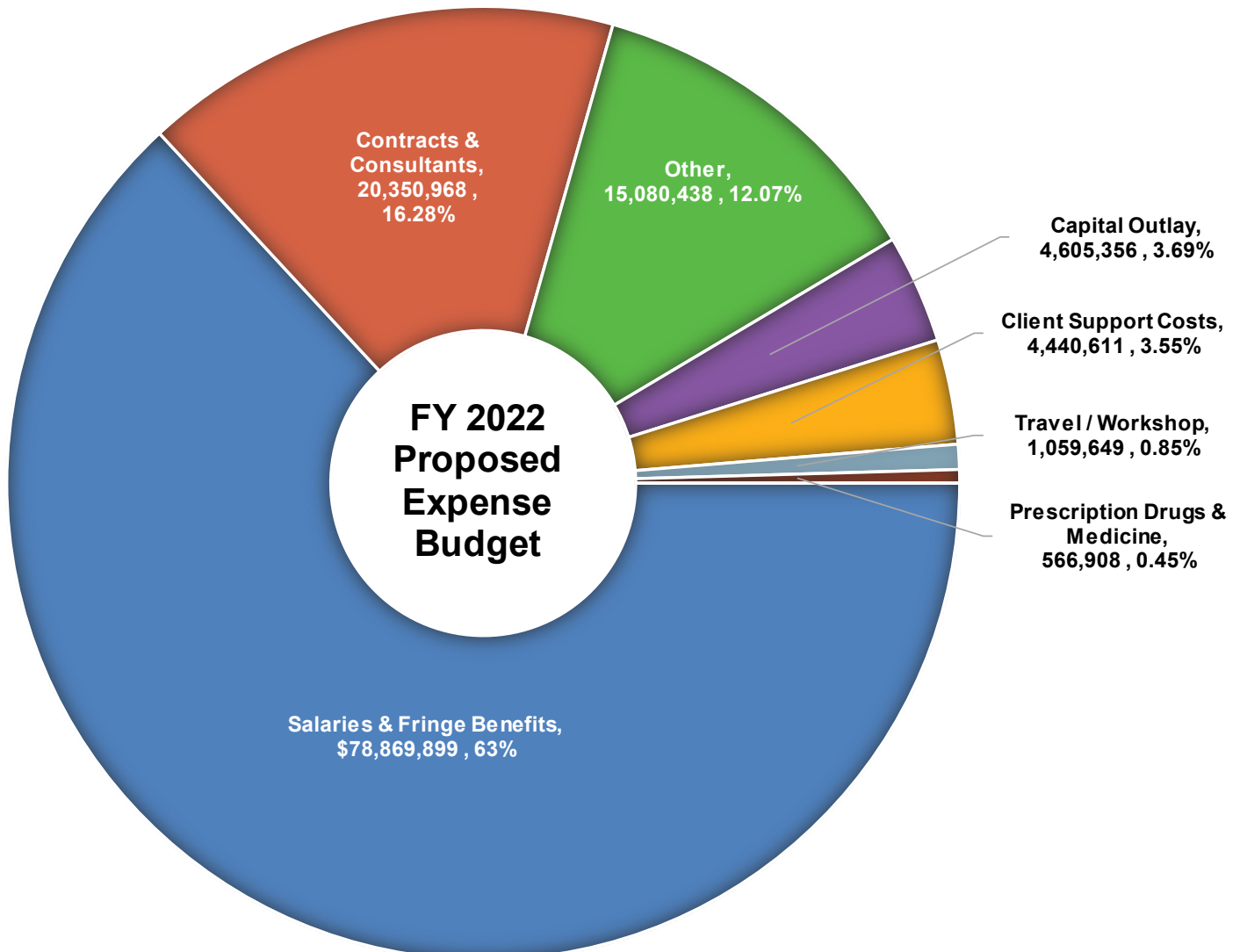
FY2022 PROPOSED REVENUE BUDGET BY FUNDER SUMMARY

Funder	FY2022 Proposed Budget		Change 2021 Current Budget		FY2021 Budget (as of June 2021)	
	Total	% of Total	Incr/(Decr)	Incr/-Decr	Current	% of Total
HHSC (Mental Health)	\$ 40,125,437	32.11%	\$ 5,327,234	15.31%	\$ 34,798,203	29.34%
1115 Transformation Waiver	16,303,321	13.05%	(41,245)	-0.25%	16,344,566	13.78%
City of Austin	11,854,220	9.49%	153,183	1.31%	11,701,037	9.87%
Medicare/ Medicaid/ HMO/ Tx Home Living	11,732,799	9.39%	25,835	0.22%	11,706,964	9.87%
Central Health/CCC	8,514,231	6.81%	(7,169)	-0.08%	8,521,400	7.19%
Other Federal	8,110,330	6.49%	1,944,358	31.53%	6,165,972	5.20%
Other Local	7,660,762	6.13%	(1,431,197)	-15.74%	9,091,959	7.67%
Travis County	7,392,374	5.92%	(548,139)	-6.90%	7,940,513	6.70%
1115 Transformation Waiver Fund Balance	4,520,044	3.62%	1,678,640	59.08%	2,841,404	2.40%
HHSC (Intellectual Development Disabilities)	4,465,675	3.57%	(333,852)	-6.96%	4,799,527	4.05%
Other State	2,361,165	1.89%	(181,091)	-7.12%	2,542,256	2.14%
HHSC (Substance Use)	1,521,870	1.22%	(84,661)	-5.27%	1,606,531	1.35%
Fund Balance	411,601	0.33%	(119,697)	-22.53%	531,298	0.45%
Total	\$ 124,973,829	100.00%	\$ 6,382,199	5.38%	\$ 118,591,630	100.00%



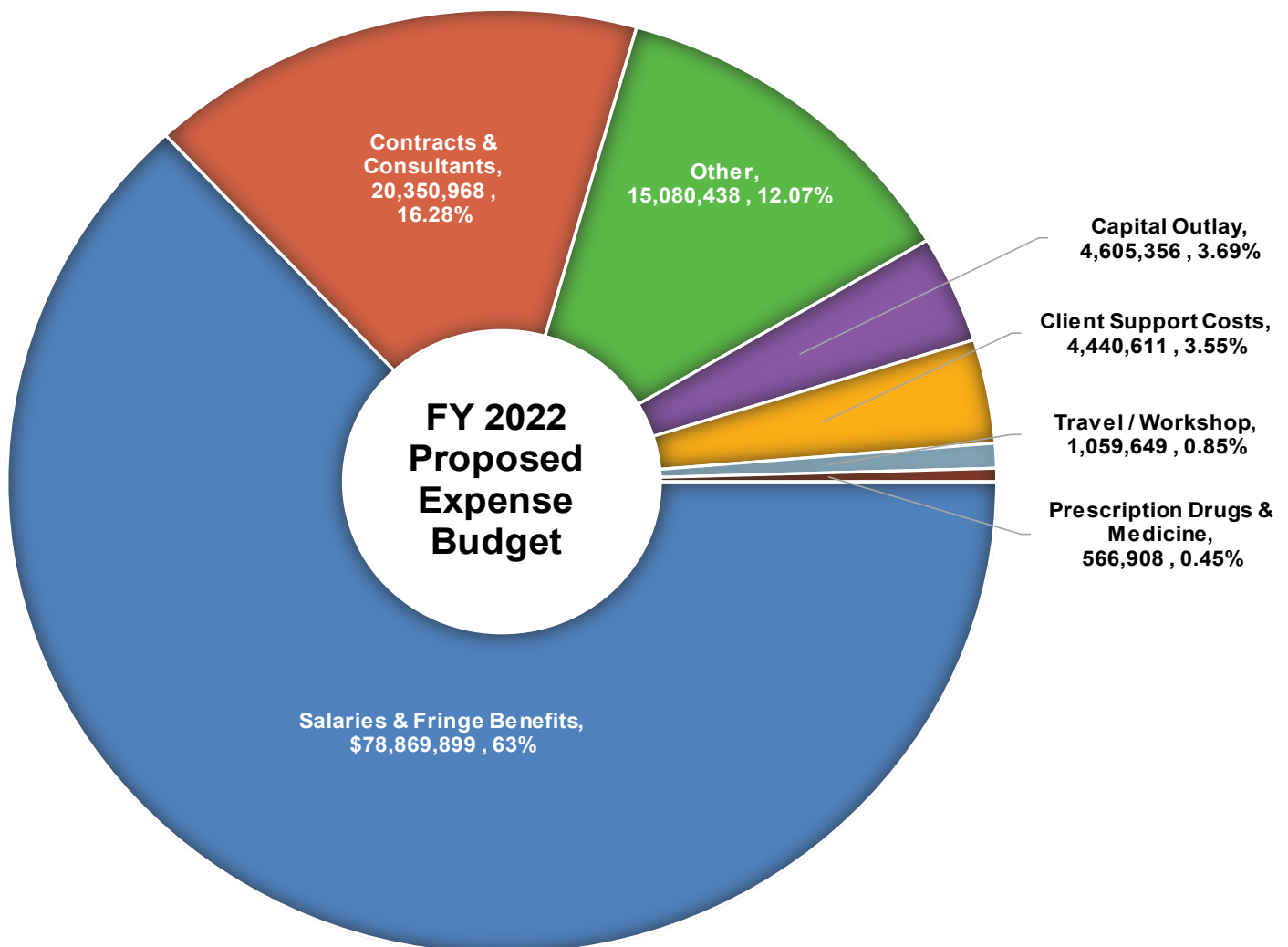
FY2022 PROPOSED EXPENSE BUDGET SUMMARY

Division	FY2022 Proposed Budget		Change 2021 Current Budget		FY2021 Budget (as of June 2021)	
	Total	% of Total	Incr/(Decr)	Incr/-Decr	Current	% of Total
Salaries & Fringe Benefits	\$ 78,869,899	63.11%	\$ 5,649,603	7.72%	\$ 73,220,296	61.74%
Contracts & Consultants	20,350,968	16.28%	(732,846)	-3.48%	21,083,814	17.78%
Other (Facility, Equipment, Supplies, etc.)	15,080,438	12.07%	1,238,824	8.95%	13,841,614	11.67%
Capital Outlay	4,605,356	3.69%	(247,455)	-5.10%	4,852,811	4.09%
Client Support Costs	4,440,611	3.55%	1,946,910	78.07%	2,493,701	2.10%
Travel / Workshop	1,059,649	0.85%	202,846	23.67%	856,803	0.72%
Prescription Drugs & Medicine	566,908	0.45%	(137,479)	-19.52%	704,387	0.59%
Reserve	-	0.00%	(1,538,204)	-100.00%	1,538,204	1.30%
Total	\$ 124,973,829	100.00%	\$ 6,382,199	5.38%	\$ 118,591,630	100.00%



FY2022 PROPOSED EXPENSE BUDGET SUMMARY

Division	FY2022 Proposed Budget		Change 2021 Current Budget		FY2021 Budget (as of June 2021)	
	Total	% of Total	Incr/(Decr)	Incr-/Decr	Current	% of Total
Salaries & Fringe Benefits	\$ 78,869,899	63.11%	\$ 5,649,603	7.72%	\$ 73,220,296	61.74%
Contracts & Consultants	20,350,968	16.28%	(732,846)	-3.48%	21,083,814	17.78%
Other (Facility, Equipment, Supplies, etc.)	15,080,438	12.07%	1,238,824	8.95%	13,841,614	11.67%
Capital Outlay	4,605,356	3.69%	(247,455)	-5.10%	4,852,811	4.09%
Client Support Costs	4,440,611	3.55%	1,946,910	78.07%	2,493,701	2.10%
Travel / Workshop	1,059,649	0.85%	202,846	23.67%	856,803	0.72%
Prescription Drugs & Medicine	566,908	0.45%	(137,479)	-19.52%	704,387	0.59%
Reserve	-	0.00%	(1,538,204)	-100.00%	1,538,204	1.30%
Total	\$ 124,973,829	100.00%	\$ 6,382,199	5.38%	\$ 118,591,630	100.00%



FISCAL YEAR 2022 PROPOSED BUDGET CENTER TOTAL

REVENUES	FY 2022 ANNUAL BUDGET	PERCENT OF TOTAL	CHANGE FY 2021 CURRENT	PERCENT BUDGET CHANGE	FY 2021 BUDGET (as of June 2021)	PERCENT OF TOTAL
Local Funds:						
City of Austin	\$ 11,854,220	9.49%	\$ 153,183	1.31%	\$ 11,701,037	9.87%
Travis County	7,392,374	5.92%	(548,139)	-6.90%	7,940,513	6.70%
Central Health/Community Care Collaborative	8,514,231	6.81%	(7,169)	-0.08%	8,521,400	7.19%
Other Local	7,660,762	6.13%	(1,431,197)	-15.74%	9,091,959	7.67%
Fund Balance	411,601	0.33%	(119,697)	-22.53%	531,298	0.45%
Total Local Funds	\$ 35,833,188	28.67%	\$ (1,953,019)	-5.17%	\$ 37,786,207	31.86%
State Funds:						
HHSC (Mental Health)	\$ 40,125,437	32.11%	\$ 5,327,234	15.31%	\$ 34,798,203	29.34%
HHSC (Substance Use)	1,521,870	1.22%	(84,661)	-5.27%	1,606,531	1.35%
HHSC (Intellectual Development Disabilities)	4,465,675	3.57%	(333,852)	-6.96%	4,799,527	4.05%
TDCJ (TCOOMMI)	2,051,532	1.64%	(17,329)	-0.84%	2,068,861	1.74%
Other State	309,633	0.25%	(163,762)	-34.59%	473,395	0.40%
Total State Funds	\$ 48,474,147	38.79%	\$ 4,727,630	10.81%	\$ 43,746,517	36.89%
Federal Funds:						
Medicare/Medicaid/HMO	\$ 11,594,266	9.28%	\$ 95,095	0.83%	\$ 11,499,171	9.70%
Texas Home Living Waiver	138,533	0.11%	(69,260)	-33.33%	207,793	0.18%
Other Federal	8,110,330	6.49%	1,944,358	31.53%	6,165,972	5.20%
Total Federal Funds	\$ 19,843,129	15.88%	\$ 1,970,193	11.02%	\$ 17,872,936	15.07%
Waiver Funds:						
1115 Transformation Waiver	\$ 16,303,321	13.05%	\$ (41,245)	-0.25%	\$ 16,344,566	13.78%
1115 Transformation Waiver Fund Balance	4,520,044	3.62%	1,678,640	59.08%	2,841,404	2.40%
Total 1115 Waiver Funds	20,823,365	16.66%	1,637,395	8.53%	19,185,970	16.18%
TOTAL REVENUES	\$ 124,973,829	100.00%	\$ 6,382,199	5.38%	\$ 118,591,630	100.00%
EXPENDITURES						
Salaries & Fringe Benefits	\$ 78,869,899	63.11%	\$ 5,649,603	7.72%	\$ 73,220,296	61.74%
Travel / Workshop	1,059,649	0.85%	202,846	23.67%	856,803	0.72%
Prescription Drugs & Medicine	566,908	0.45%	(137,479)	-19.52%	704,387	0.59%
Capital Outlay	4,605,356	3.69%	(247,455)	-5.10%	4,852,811	4.09%
Contracts & Consultants	20,350,968	16.28%	(732,846)	-3.48%	21,083,814	17.78%
Other (Facility, Equipment, Supplies, etc.)	15,080,438	12.07%	1,238,824	8.95%	13,841,614	11.67%
Client Support Costs	4,440,611	3.55%	1,946,910	78.07%	2,493,701	2.10%
Reserve	-	0.00%	(1,538,204)	-100.00%	1,538,204	1.30%
TOTAL EXPENDITURES	\$ 124,973,829	100.00%	\$ 6,382,199	5.38%	\$ 118,591,630	100.00%
TOTAL FTE'S	1048.85		32.42	3.19%	1016.43	
Summary:						
Operations	\$ 119,184,318	95.37%				
Capital Projects	5,789,511	4.63%				
Total Budget	\$ 124,973,829	100.00%				

FISCAL YEAR 2022 PROPOSED BUDGET OPERATIONS

REVENUES	FY 2022 ANNUAL BUDGET	PERCENT OF TOTAL	CHANGE FY 2021 CURRENT	PERCENT BUDGET CHANGE	FY 2021 BUDGET (as of June 2021)	PERCENT OF TOTAL
Local Funds:						
City of Austin	\$ 11,854,220	9.95%	\$ 153,183	1.31%	\$ 11,701,037	10.32%
Travis County	7,392,374	6.20%	(548,139)	-6.90%	7,940,513	7.01%
Central Health/Community Care Collaborative	8,514,231	7.14%	(7,169)	-0.08%	8,521,400	7.52%
Other Local	3,066,406	2.57%	(1,431,197)	-31.82%	4,497,603	3.97%
Fund Balance	411,601	0.35%	80,303	24.24%	331,298	0.29%
Total Local Funds	\$ 31,238,832	26.21%	\$ (1,753,019)	-5.31%	\$ 32,991,851	29.11%
State Funds:						
HHSC (Mental Health)	\$ 40,125,437	33.67%	\$ 5,327,234	15.31%	\$ 34,798,203	30.70%
HHSC (Substance Use)	1,521,870	1.28%	(84,661)	-5.27%	1,606,531	1.42%
HHSC (Intellectual Development Disabilities)	4,465,675	3.75%	(333,852)	-6.96%	4,799,527	4.23%
TDCJ (TCOOMMI)	2,051,532	1.72%	(17,329)	-0.84%	2,068,861	1.83%
Other State	309,633	0.26%	(163,762)	-34.59%	473,395	0.42%
Total State Funds	\$ 48,474,147	40.67%	\$ 4,727,630	10.81%	\$ 43,746,517	38.60%
Federal Funds:						
Medicare/Medicaid/HMO	\$ 11,594,266	9.73%	\$ 95,095	0.83%	\$ 11,499,171	10.15%
Direct Payment Program (DPP) BHS	-	0.00%	-	-	-	0.00%
Texas Home Living Waiver	138,533	0.12%	(69,260)	-33.33%	207,793	0.18%
Other Federal	8,110,330	6.80%	1,944,358	31.53%	6,165,972	5.44%
Total Federal Funds	\$ 19,843,129	16.65%	\$ 1,970,193	11.02%	\$ 17,872,936	15.77%
Waiver Funds:						
1115 Transformation Waiver	\$ 16,303,321	13.68%	\$ (41,245)	-0.25%	\$ 16,344,566	14.42%
1115 Transformation Waiver Fund Balance	3,324,889	2.79%	947,627	39.86%	2,377,262	2.10%
Total Federal Funds	\$ 19,628,210	16.47%	\$ 906,382	4.84%	\$ 18,721,828	16.52%
TOTAL REVENUES	\$119,184,318	100.00%	\$ 5,851,186	5.16%	\$ 113,333,132	100.00%
EXPENDITURES						
Salaries & Fringe Benefits	\$ 78,869,899	66.17%	\$ 5,649,603	7.72%	\$ 73,220,296	64.61%
Travel / Workshop	1,059,649	0.89%	202,846	23.67%	856,803	0.76%
Prescription Drugs & Medicine	566,908	0.48%	(137,479)	-19.52%	704,387	0.62%
Capital Outlay	11,000	0.01%	(47,455)	-81.18%	58,455	0.05%
Contracts & Consultants	20,350,968	17.08%	(732,846)	-3.48%	21,083,814	18.60%
Other (Facility, Equipment, Supplies, etc.)	13,885,283	11.65%	507,811	3.80%	13,377,472	11.80%
Client Support Costs	4,440,611	3.73%	1,946,910	78.07%	2,493,701	2.20%
Reserve	-	0.00%	(1,538,204)	-100.00%	1,538,204	1.36%
TOTAL EXPENDITURES	\$119,184,318	100.00%	\$ 5,851,186	5.16%	\$ 113,333,132	100.00%
TOTAL FTE'S	1048.85		32.42	3.19%	1016.43	

FISCAL YEAR 2022 PROPOSED BUDGET CAPITAL PROJECTS

	FY 2022 ANNUAL BUDGET	PERCENT OF TOTAL	CHANGE FY 2021 CURRENT	PERCENT BUDGET CHANGE	FY 2021 BUDGET (as of June 2021)	PERCENT OF TOTAL
REVENUES						
Local Funds:						
City of Austin	\$ -	0.00%	\$ -	-	\$ -	0.00%
Other Local	4,594,356	79.36%	-	0.00%	4,594,356	87.37%
Fund Balance	-	0.00%	(200,000)	-100.00%	200,000	3.80%
Total Local Funds	\$ 4,594,356	79.36%	\$ (200,000)	-4.17%	\$ 4,794,356	91.17%
State Funds:						
HHSC (Mental Health)	\$ -	0.00%	\$ -	-	\$ -	0.00%
Total State Funds	\$ -	0.00%	\$ -	-	\$ -	0.00%
Federal Funds:						
Medicare/Medicaid/HMO	\$ -	0.00%	\$ -	-	\$ -	0.00%
Texas Home Living Waiver	-	0.00%	-	-	-	0.00%
Other Federal	-	0.00%	-	-	-	0.00%
Total Federal Funds	\$ -	0.00%	\$ -	-	\$ -	0.00%
Waiver Funds:						
1115 Transformation Waiver	\$ -	0.00%	\$ -	-	\$ -	0.00%
1115 Transformation Waiver Fund Balance	1,195,155	20.64%	731,013	157.50%	464,142	8.83%
Total 1115 Waiver Funds	\$ 1,195,155	20.64%	\$ 731,013	157.50%	\$ 464,142	8.83%
TOTAL REVENUES	\$ 5,789,511	100.00%	\$ 531,013	10.10%	\$ 5,258,498	100.00%
EXPENDITURES						
Capital Outlay	\$ 4,594,356	79.36%	\$ (200,000)	-4.17%	\$ 4,794,356	91.17%
Contracts & Consultants	-	0.00%	-	-	-	0.00%
Other (Facility, Equipment, Supplies, etc.)	1,195,155	20.64%	731,013	157.50%	464,142	8.83%
TOTAL EXPENDITURES	\$ 5,789,511	100.00%	\$ 531,013	10.10%	\$ 5,258,498	100.00%

ACRONYMS	NAME
ACT	Assertive Community Treatment
AOT	Asserted Outpatient Treatment
BIPoC	Black, Indigenous and People of Color
CCBHC	Certified Community Behavioral Health Clinic
CCC	Community Care Collaborations
CDC	Center for Disease Control & Prevention
CDBG	Community Development Block Grant
CH	Central Health
CLAS	Culturally and Linguistically Appropriate Services
COA	City of Austin
COPSD	Co-Occuring Psychiatric Substance Abuse Disorder
COVID	Coronavirus Disease
CMHC	Community Mental Health Centers
CPRIT	Cancer Prevention and Research Institute of Texas
CR	Cost Reimbursement
DAA	Downtown Austin Alliance
DACC	Downtown Alliance Community Court
DADS	Texas Department of Aging and Disability Services
DPP - BHS	Direct Payment Plan - Behavioral Health Service
ECHO	Ending Community Homelessness Coalition
ECI	Early Childhood Intervention
EFMAP	Enhanced Federal Medical Assistance Percentage
EMCOT	Expanded Mobile Crisis Outreach Team
FACT or Forensic ACT	Forensic Assertive Community Treatment
FFS	Fee for Service
FMAP	Federal Medical Assistance Percentage
FTE	Full Time Equivalent
FY	Fiscal Year
GARE	Government Alliance on Race Equity
HCC	Healthy Community Collaborative
HHSC	Texas Health and Human Services Commission
HIV	Human Immunodeficiency Virus
HMO	Health Maintenance Organization
HOST	Homeless Outreach Street Team
HUD	Housing and Urban Development
IDD	Intellectual and Development Disabilities
ISD	Independent School District
ISOFAC	Isolation Facility
IT	Information Technology
ISP	Immediate Service Program
MAC	Medicaid Administrative Claiming
MAT	Medication Assisted Treatment
MFP	Money Follows the Person
MH	Mental Health
MIS	Management Information System
MOU	Memorandum of Understanding
NAS-MAT	Neonatal Abstinence Syndrome-Medication Assisted Treatment
OBOT	Opioid Office Based Treatment
OPMH	Outpatient Mental Health
PATH	Projects for Assistance in Transition from Homelessness
PNAC	Planning Network Advisory Committee
PSH	Permanent Supported Housing
QMHP	Qualified Mental Health Professional
RA1SE	Recovery After an 1st Schizophrenia Episode
RRH	Rapid ReHousing
SA	Substance Abuse
SAFE	Stop Abuse For Everyone
SAMHSA	Substance Abuse and Mental Health Services Administration
SAMSO	Substance Abuse Managed Service Organization+C18
SHAC	Self Help and Advocacy Center
TBD	To Be Determined
TCOOMMI	Texas Correctional Office of Offenders with Medical or Mental Impairments
TDCJ	Texas Department of Criminal Justice
TRA	Treatment for Adults
TRF	Treatment for Females
TTTF	Taking Texas Tobacco Free Program
TWC	Texas Workforce Commission
TxHLvg	Texas Home Living Waiver
TXMOUD	Texas Medication for Opioid Use Disorder
VA	Veteran's Affairs
VOCA	Victims of Crime Act

BOARD OF TRUSTEES POLICY

~~Title: 1.01 BOARD OF TRUSTEES POLICY~~

~~Title: Policy on Establishment and Implementation of Board Policy~~

~~Section: Introductory Material Governance~~

~~Cross References: BP 02.02; OP 01.01; OP 01.03; Texas Health and Safety Code, Chapter 534, Subchapter A, Sections 534.008, 534.010, and 534.011~~

Purpose:

To establish the method and procedure to be followed by the Board of Trustees ~~(the “Board”)~~ and staff of ~~Austin Travis~~ Integral Care (ATCIC) in the formulation and establishment of Board ~~of Trustees~~ policies (“Board Policies”).

References:

- ~~• Texas Health and Safety Code, Chapter 534, Subchapter A, Sections 534.008, 534.010, and 534.011.~~

Policy:

- I. The Board will adopt and oversee ~~Board pPolicies~~ that will assist the Board in fulfilling its responsibility ~~tofor the~~ effectively ~~administer~~ ~~ratation of~~ ATCIC ~~Integral Care~~.
- II. A Board Policy shall have one or more of the following characteristics:
 - It is a broad, general statement which establishes guidelines and requirements for the administration of ~~Integral Care~~ ~~the~~ ATCIC.
 - It either requires or prohibits certain actions, ~~and/~~or requires that certain functions be performed in a specific fashion.
 - It represents decisions on issues which are highly visible in the community.
 - It represents decisions which are value-oriented.
- III. Board Policies shall be formally documented in a consistent format approved by the Board, maintained on ~~SharePoint~~ ~~the~~ ~~Intranet~~, and implemented through operating procedures.
- IV. The Board delegates ~~the authority to implement Board policies~~ to the Chief Executive Officer ~~the authority to implement Board Policies~~ and to develop and implement operating procedures to carry out the direction and intent of Board ~~of Trustees pPolicies~~, ~~with the further provision that the Board shall be furnished a copy of said Operating Procedures within thirty (30) days of their implementation~~. The Chief Executive Officer is responsible for:
 - developing and approving operating procedures;

1.01 Policy on Establishment and Implementation of Board Policy

- maintaining ~~an current~~ Operating Procedures Manual ~~that are~~ available to all staff ~~on the Intranet~~;
 - insuring that all staff are oriented to operating procedures relevant to their positions; and,
 - reviewing and updating all operating procedures on an as needed basis to keep them current.
- V. The responsibility for initiating action concerning potential or existing policy matters shall be with the Board ~~of Trustees~~. However, the Chief Executive Officer shall be charged with the responsibility of bringing to the attention of the Board any policy issues that affect the operation of Integral Care ATCIC.
- VI. At any time the Chief Executive Officer may refer, through the appropriate Board Committee, recommended new or amended Board ~~p~~Policies for approval by the Board ~~of Trustees~~. ~~The appropriate Board Committee shall be responsible for review of policies and recommendation of new or amended policy approval to the Board of Trustees.~~
- ~~• The Executive Committee shall review Governance and Community Relations policies.~~
 - ~~• The Board Finance Committee shall review Facilities, Management Information System and Records, Fiscal and Human Resources policies.~~
 - ~~• The Board Planning and Operations Committee shall review Services and Quality Management policies.~~
- VII. Board Policies shall be reviewed by the Board ~~of Trustees~~ on an as needed basis, but no less than every five years ~~to ensure that they are up to date~~. Integral Care operating procedures that reference the Board ~~p~~Policies shall be reviewed at the same time and amended as necessary. The Chief Executive Officer shall be responsible for developing a process to routinely review Board ~~p~~Policies and bring them to the Board within the ~~five~~-year timeframe.

Effective Date: July 26, 1990

Revised Date: January 2016; _____, 2021

Approved: Matt Snapp, PhD, Board Chair Hal Katz

1.01 Policy on Establishment and Implementation of Board Policy

Signature _____

01.02 BOARD OF TRUSTEES POLICY

Title: **01.02 Policy Development and Establishment**

Section: **Introductory Material**

Cross References: **BP 01.01N/A**

Purpose:

To establish the method and procedure to be followed by the Board of Trustees (the "Board") and staff of Integral Care in the development and establishment of Board policies.

Policy:

It is the policy of the Board to require the Chief Executive Director-Officer (the "CEO") to present all matters requiring Board policy ("Board Policy") development to the Board in written form and/or electronic form. The primary responsibility for initiating Board pPolicy recommendations rests with the CEO-Executive Director. However, any Board member, Board advisory committee member or citizen may present an issue for a possible Board pPolicy development.

These steps will be followed in the development or establishment of Board pPolicy:

1. All potential issues, problems, concerns (whatever the source) likely to require Board pPolicy determination will be referred to the CEO-Executive Director.
2. The Executive Director-CEO will consider whether the issue, problem, or concern warrants Board pPolicy determination at the present time.
3. The CEO-Executive Director will make an initial determination of whether applicable Board pPolicy now exists, and whether current Board pPolicy is ambiguous, or whether current policy is incomplete or absent.
4. If an issue has been brought to the Board's attention by an interested citizen and if the Executive Director-CEO determines that no Board pPolicy is presently needed, the Board may stand by the decision and instruct the Executive Director-CEO to notify the citizen of the actions taken and the reasons for the action taken, or the Board may instruct that Board pPolicy be written.
5. If the Executive Director-CEO or the Board determines that a new Board pPolicy guidance is necessary the Executive Director-CEO will develop a recommended Board pPolicy.
6. All of the Executive Director-CEO's recommended Board pPolicies will be referred to the Board Chairperson and the chair of the appropriate Board Committee for consideration and a final recommendation to the Board.

Title: Policy Development and Establishment

Effective Date: October 26, 1989

Revised Date: April 26, 2007; _____, 2021

Approved: ~~Martha A. Martinez~~ Hal Katz

Signature _____

01.03 BOARD OF TRUSTEES POLICY

Title: Operating Procedures

Section: Introductory Materials

Cross Reference: [OP 01.01](#); [OP 01.03](#)N/A

PURPOSE

It is the purpose of this ~~Board~~ Policy to establish policy guidelines for [Integral Care](#) operating procedures. ~~Integral Care~~ ~~The Center~~ will have clearly stated policy guidelines and appropriate ~~operating~~ ~~administrative~~ procedures for all aspects of ~~Integral Care~~ ~~program~~ operations.

POLICY

~~Integral Care~~ ~~The agency~~ will have clearly stated operating procedures which will provide for:

1. the implementation of the Board's ~~p~~ Policies ~~and of Board, of Trustees~~ goals ~~and~~ objectives;
2. the administration of the agency in accordance with sound principles of management; and
3. the provision of services in accordance with accepted clinical standards.

IMPLEMENTATION

The ~~Chief~~ Executive ~~Officer~~ ~~Director~~ is responsible for:

1. developing and approving operating procedures;
2. maintaining ~~all current~~ operating procedures ~~in an electronic format that is available to all staff;~~ ~~on the Intranet;~~
3. ~~making Operating Procedures Manuals available to all staff via the Intranet.~~

TEXAS COUNCIL BOARD LIAISON REPORT

H. Ed Calahan

Thank you for the opportunity to serve as your representative to our Trade organization.

1. **The quarterly meeting** of the Texas Council Board of Directors was held via Zoom on **Friday, August 20, 2021**.
2. Let me encourage you to read the **August Texas Council Report** sent to you. It contains updated information about the **87th Legislative Session** concerning all of the issues affecting Community Centers.
3. Newly Elected Officers are:
Chair, [Rick Crawford](#), LifePath Systems;
1st Vice Chair, [Gerald Yezak](#), MHMR Authority of Brazos Valley;
2nd Vice Chair, [Drue Farmer](#), StarCare Specialty Health System;
Secretary, [Rhonda Dicks](#), Denton County MHMR Center;
Treasurer, [John Jackson](#), Nueces Center for MHID
Immediate Past Chair, [Margaret Jones](#), Permiacare
4. **1115 Waiver – as 8/20/21 Judges stay for the state of Texas against CMS**
Texas achieved a major victory in its suit against the federal government with regard to the **withdrawal** of the **1115 Waiver** extension.

In an Opinion and Order, the Court granted Texas' motion for a preliminary injunction. As of August 20, 2021, the Centers for Medicare & Medicaid Services (**CMS**) is **prohibited** from implementing the **April 16, 2021** withdrawal letter.

CMS must treat Texas' 1115 Waiver extension as remaining in effect as it existed on April 15, 2021. At this time, the federal government's response to the Order is pending.

UPDATE

Texas Council states, even though recent court rulings have been favorable for Texas in terms of the Centers for Medicare & Medicaid Services (CMS) being expected to implement the **1115 Waiver Extension** as approved in January 2021, we strongly urge you, your local officials and stakeholders to submit comments to **CMS** by **August 30, 2021**. **CMS** needs to hear **passionate support** from **Texas communities** for the **1115 Waiver Extension**.

5. The **Risk Management Fund** reported that **Cyber Risk Control** is the Fund newest service offering. The service focuses around an assessment done to identify a center's cyber vulnerabilities with recommendations to mitigate those vulnerabilities. At this point, the Fund has done cyber risk assessments for seven centers.

6. The **35th Annual Conference** will convene on **November 17-19, 2021** at the **Renaissance Hotel** in Austin. As the result of Texas Council interactions with Center staff during this time of immense change, we realized that focusing the conference on leading through uncertainty could set the stage for us to celebrate seeing each other again, share successes, and hear about opportunities for the future.

Texas Council has since proceeded to plan a conference around the general theme of **leading during uncertain times**. Conference content will be focused accordingly on topics curated by Texas Council and geared toward Center operations, management, and topics of interest to board and trustees.

Format changes are underway to accommodate the theme while bearing in mind the continuing uncertainty brought about by **the pandemic**. Attendees may expect to see fewer breakout sessions and the addition of a plenary session on **Friday** that will close the conference by **Noon** on **November 19, 2021**.

The **following sessions** are confirmed so far:

- **State and National Perspectives Panel** (Plenary), featuring Chuck Ingoglia, president and CEO of National Council for Mental Wellbeing, and Sonja Gaines, deputy executive commissioner of Behavioral Health and IDD Services at HHSC.
- **Insight Into the Texas Political Landscape** (Breakout Session), moderated by Lee Johnson and featuring Ross Ramsey, executive editor and co-founder of the Texas Tribune, Harvey Kronberg, editor of the Quorum Report, and former State Representative, Carl Isett.
- **Mental Health First Aid, pre-conference workshop**
- **Peer Specialist post-conference**. An exciting roster of featured speakers and breakout sessions are under consideration. Additional details will be released in the coming weeks.

Frank M. Adams Awards Winners of the Frank M. Adams awards, including the new **Gladdie Fowler** Outstanding Board Service Award, have been selected and will be announced during the **FMA Awards** Ceremony at 8:30 a.m. on **Thursday, November 18, 2021**.

The Texas Council appreciates the outstanding nominations for this important award and the work of the selection committee in determining the 2021 award recipients.

Texas Council is grateful to the **Integral Care Host Center Team** for working closely with us to make this a memorable and festive event for participants!