



# Together. Apart.

2020 | Annual Report

Adapting to Care for Our Community



**THE CENTER**  
**FOR HEALTH CARE SERVICES**  
*Mental Health & Substance Abuse Solutions*

# Our Mission

The Center for Health Care Services provides integrated care to improve the lives of children and adults with mental health conditions, substance use challenges and intellectual or developmental disabilities (IDD).

## SPONSORING AGENCIES

The Center for Health Care Services collaborates with and receives local funding from:



**University  
Health System**

University Health System



Bexar County

## THE CENTER FOR HEALTH CARE SERVICES BOARD OF TRUSTEES



**Daniel T. Barrett**  
*Chair*



**Mary Rose Brown**  
*Vice Chair*



**Donnie Whited**  
*Secretary*



**Graciela A. Cigarroa**  
*Treasurer*



**Margaret M. Vera**



**The Hon.  
Polly Jackson Spencer**  
*Retired Judge*



**Richard Usatine, M.D.**



**The Hon.  
Laura Parker**



**Roberta Lynn Krueger, M.D.**



**Sheriff Javier Salazar**  
*Ex-Officio Board Member*

## EXECUTIVE LEADERSHIP TEAM

**Jelynne LeBlanc Jamison**  
*President and Chief Executive Officer*

**Robert Guevara**  
*Chief Financial Officer*

**James Chapman**  
*Chief Compliance Officer*

**Dr. Rene Olvera**  
*Chief Medical Officer*

**Allison Greer-Francis**  
*Vice President, Governmental Relations*

**Adrienne Alcazar**  
*Vice President, People and Culture*

**Lauro Garza**  
*Vice President, Operational Safety Risk Management*

**Omar Qassom**  
*Vice President, External Provider Network Development*

**Frank Garza**  
*General Counsel*

**Leonard Rodriguez**  
*Development Director*

**Ashley George**  
*Director of Marketing & Integrated Communications*





**2020 marked the start of a new decade.** What should have been a time of forward motion instead came to a standstill as we were confronted by compounding crises resulting in the loss of lives, a deep recession, persistent issues of systemic racial injustice, and a devastating uptick in mental illness and substance abuse.

**Together,** we experienced a shared suffering that was punctuated by being **Apart** — isolation, purposeful distancing and loss. Amid this landscape, our mission and core values have never been more important.

Fiscal Year 2020 will go down as one of the most challenging years in The Center's 55-year history. In times like these, providing integrated care to improve the lives of people with mental health conditions, substance use challenges and intellectual or developmental disabilities (IDD), is of the utmost importance. Despite the COVID-19 pandemic, CHCS continued to make great strides toward Reimagining Healthcare in FY 2020 by **Adapting to Care for Our Community** of employees, consumers and Bexar County residents.

**REDESIGN:** In January 2020, outpatient scheduling transitioned to Just in Time Scheduling, allowing consumers to be seen by a prescriber within 5-7 days of their call instead of waiting weeks to months. The positive effects of this new approach are seen by a drastic decrease in the average no-show rate — 14.1%, a 26% reduction at the close of FY 2020.

FY 2020 marked a time for embracing new technology including the implementation of a new electronic health record. This \$11 million investment is aimed at improving service to consumers, and positioning CHCS for future growth and effective care coordination as a Certified Community Behavioral Health Clinic (CCBHC). Additionally, The Center consolidated our financial, human resources and payroll systems into one system of record. By modernizing our systems and processes, The Center is ensuring that our technology is inclusive, trusted, and will empower us to drive efficiencies that transform the way we do business.

**INSPIRE, INNOVATE AND REBUILD:** The resiliency of our workforce and their steadfast commitment to delivering exceptional care – even during a global pandemic, will forever be held in the highest regard. It is important that we honor our healthcare heroes by giving them the training, tools and resources necessary to succeed. In FY 2020, we launched The CHCS Leadership Academy, a managerial training program aimed at leadership succession planning. Additionally, we invested hundreds of thousands of dollars in new acquisitions, existing facility upgrades and COVID-19 enhancements to ensure our workforce and consumers alike are able to thrive in a healthy, safe and nurturing environment. Furthermore, CHCS is now a best-in-class safety organization with our Injury/Illness Rate at 1.86, and Preventable Motor Vehicle Accidents at 9 for FY 2020.

**RESTORE:** Although COVID-19 forced The Center to cancel or shift outreach events in FY 2020 including the 20th Annual Bexar County Behavioral Health and Wellness Conference, several new programs came online to promote better access to quality care for those living with mental illness and/or addiction as well as new opportunities to inform the community on mental health.

At the direction of Texas Health and Human Services (HHS), CHCS launched a COVID-response program in May 2020 providing emotional support, effective coping strategies and linkage to community resources for Bexar County residents. To-date, the COVID-19 Crisis Counseling Program (CCP) has reached over 500,000 people via social media, and continues to be a resource for people struggling with COVID-related feelings of unrest. Additionally, The CHCS Foundation is proposing to train 400 congregants from places of worship using the Bridges to Care model, a comprehensive approach to treatment through Mental Health First Aid (and Youth MHFA), companionship (one-to-one community support), trauma-informed care and suicide prevention training.

Through our continued partnership in the Southwest Texas Crisis Collaborative (STCC) with the Southwest Texas Regional Advisory Council (STRAC), CHCS has been connecting people in crisis with a higher level of care to appropriate services since 2017:

- **Law Enforcement Navigation** connects stable, emergency detention patients in police custody to the most appropriate psychiatric facility.
- **Psychiatric Emergency Services (PES)** provide a safe environment for people presenting to acute care emergency departments who require timely inpatient treatment, and decompress overcrowding of mental health patients in emergency departments.
- **The Program for Intensive Care Coordination (PICC)** is a collaborative effort between CHCS, the San Antonio Police Department and the San Antonio Fire Department to address complex crisis in our community and reduce reliance on emergency services.
- Through the **Special Multidisciplinary Alternative Response Team (SMART)**, members from the Bexar County Sheriff's Office, Acadian Ambulance, STRAC and CHCS, provide de-escalation and triage, and reduce incarceration or emergency and inpatient services by providing ongoing engagement.

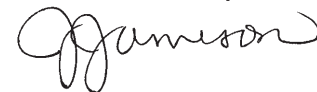
**COMMITMENT TO SUSTAINABILITY:** Despite COVID-related disruptions in FY2020, CHCS continued to make great strides toward future sustainability by successfully achieving 100% of state performance metrics. Additionally, CHCS and its partners are committed to identifying new funding opportunities for financial sustainability supporting the state's transition to the CCBHC model of care that promotes access to behavioral health services and care coordination for vulnerable populations. Furthermore, CHCS was awarded a new, 2-year, CCBHC grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to help maintain CCBHC certification status and expand the CCBHC delivery model.

In the 87th Legislative Session, CHCS asked lawmakers to maintain base appropriations and current service capacity for outpatient treatment, locally purchased inpatient psychiatric beds, substance use disorder services, and Early Childhood Intervention (ECI) programs. CHCS also advocated for the permanent expansion of telemedicine services, funding to complete the San Antonio State Hospital, and sustained access to Medicaid long-term services and supports for consumers living with IDD.

We are living in a time of rapid change. People are struggling. There is still a huge lift ahead of us to become more agile and accountable to our community. The COVID-19 pandemic has impacted, and may continue to impact, our organization moving forward — to what extent will depend on evolving factors as well as state mandates.

2020 may have been the year that came to a standstill, but one thing holds true: our mission is enduring and our optimism unwavering. We look forward to collaborating and seeing you in-person soon.

Sincerely,



Jelynn LeBlanc Jamison  
President & Chief Executive Officer  
The Center for Health Care Services



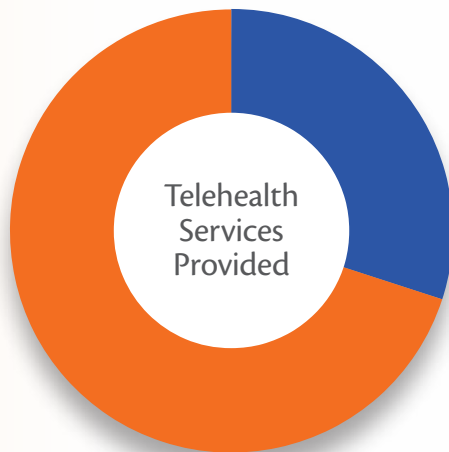
Daniel T. Barrett  
Chair, Board of Trustees  
The Center for Health Care Services



# By The Numbers

In FY 2020, The Center served **28,559** adults and **7,632** children with a total of **1,096,040** services.

## PIVOTING TO TELEHEALTH



2019  
**148,230**

2020  
**336,216**



2019  
**29,719**

2020  
**36,191**

**86**  
Programs

The Center provides programs for mental health, substance use and intellectual and developmental disabilities (IDD) within 4 divisions.

**1,153**  
CHCS Employees

The Center employs top talent including therapists, social workers, physicians, caseworkers, nurses and administrators.

**\$115.1M**  
Annual Budget

The Center receives funding from 87 sources including federal, state and county funds as well as private philanthropy and grants.



# Adapting to Care for Our Community:

A SPECIAL REPORT

On March 13, 2020, the President issued an Emergency Declaration for all states warranted by the sufficient severity and magnitude of the ongoing Coronavirus Disease 2019 (COVID-19) pandemic. By Monday, March 16, 2020, The Center for Health Care Services (CHCS) had set the wheels in motion to expand treatment options through remote technology — an undertaking that was marked by a historic shift in service delivery: 10% remote and 90% face-to-face pre-COVID, to an 85% remote and 15% face-to-face inversion at the height of the pandemic.

## GETTING THERE WAS NO SMALL FEAT

In a matter of days, The Center had to update policies and procedures to mirror CDC guidelines; construct and staff outdoor screening tents at multiple locations; procure thermometers and personal protective equipment (PPE); create new workflows and schedules to include work-from-home status; and, most importantly, establish an internal method of contact tracing, testing and quarantine — all while caring for over 36,000 consumers, 1,153 employees, and the Bexar County community at-large.

An undertaking of this magnitude does not happen without an exceptional level of staff and community coordination. For Bexar County, this began by creating protocols regarding medical clearance for COVID-positive people, and constant communication between community partners to ensure proper notification was given prior to transferring an infectious person for care.

“CHCS, University Health System (UHS), Southwest General Hospital and our partners at STRAC were all on the same page,” said Dr. Rene Olvera, Chief Medical Officer for The Center for Health Care Services. “Doing this from scratch would have been impossible, so having these relationships already established was key. We never had to quit serving our consumers. We just adapted.”

## Adapting to Care for Our Consumers

When the Centers for Medicare and Medicaid Services (CMS) and Texas Health and Human Services (HHS) granted CHCS the ability to expand remote treatment options to include telehealth, telemedicine and/or audio-only services, there was initial concern about leveraging video as only 60% of consumers had the resources to support this technology. As a result, phone contact became the major source of service delivery for those without digital means. This proved invaluable as it not only engaged consumers in an efficient manner, but helped to support social distancing within the clinics. Additionally, because consumers with transportation and time-management challenges were more agreeable to answering the phone, CHCS experienced a reduction in no-show and canceled appointments, and an increase in service time all while maintaining a normal client count.

The height of the pandemic saw a dramatic increase in the number of consumers choosing to go remote — an 85% to 15% inversion that allowed CHCS to safely merge into an as-needed, in-person model for specialty populations and primary care consumers. By offering a video platform, consumers felt less isolated seeing their provider face-to-face, and those without digital technology were able to come to the clinic to be seen via telehealth or in-person.

Safety was at the forefront of the COVID-19 pandemic, and moving forward, The Center will continue to be vigilant for the health and safety of consumers adhering to CDC guidelines and following local, state and federal recommendations for social distancing, mask wearing, PPE and temperature screenings.

## Adapting to Care for Our Employees

CHCS is made up of a diverse service-oriented workforce that understands the times we're living in, and shares an emphasis on the safety of consumers, employees and their families. It is through this mentality that CHCS was able to remain strong and unwavering throughout the challenges of the global pandemic.

Ensuring the safety of these critical team members was top-of-mind for CHCS leadership and required an inordinate amount of staff coordination that included the creation of an internal method for contact tracing, testing and quarantine. Over the course of the pandemic, over 400 CHCS employees were quarantined, tracked, tested and cleared to return to work. Additionally, it was important that frontline staff felt supported, and that their safety and welfare were at the forefront of leadership's priorities. To achieve this, protocols were established to mitigate the impact of stress including check-ins with supervisors, and improvements were made to the employee wellness platform.

Perhaps the single most important safety measure CHCS leadership put into place was securing COVID-19 vaccines for employees through UHS. To-date, 60% of the workforce has been fully vaccinated with a goal of 100% in the coming months.

## Adapting to Care for Our Community

In addition to causing severe, debilitating illness and the loss of countless lives, COVID-19 was also responsible for an uptick in mental health and substance use disorders. As the mental health authority for Bexar County, CHCS was called upon to support a new generation of people experiencing mental, emotional or physical unrest due to the COVID-19 pandemic.

In May 2020, at the direction of HHS, CHCS launched the COVID-19 Crisis Counseling Program (CCP), a free and anonymous, remote-based counseling program that provides emotional support, effective coping strategies and linkage to community resources for people dealing with feelings of anxiety, depression, grief and/or isolation due to COVID-19. In addition to offering individual counseling services, the CCP team consisting of 7 staff members, regularly presents to a host of organizations including local school districts, faith-based organizations, small businesses, newly trained law enforcement officers, community health workers and chambers of commerce.

In addition to standing up a COVID-response program, CHCS established critical communication protocols within the community provider network regarding the transfer of infectious people. Community collaboration was key to keeping COVID-19 contained, and programs operational for an already vulnerable population.

### KEEPING THE DOORS OPEN

With COVID-related mental health and substance use challenges on the rise, and an estimated 21,800 calls to the 24-Hour Crisis & Substance Use Helpline in FY 2020, it was clear that consumers needed access to treatment more now than ever. To keep services operational in a way that safeguarded employees, consumers and the community at large, CHCS leadership enacted testing and quarantine protocols for COVID-positive, asymptomatic people who were in transition from hospitals, homeless and/or undergoing detox at The Restoration Center. By being resourceful and finding creative ways to keep the doors open throughout the pandemic, CHCS was able to care for the people who needed it most.

## Moving Forward

If COVID-19 has taught us anything, it's that CHCS will continue adapting to the ever-changing environment and doing what's necessary to provide access to care through means that are safe and effective. As we progress through this new fiscal year, The Center's emphasis will be on vaccinating employees and consumers alike. The vaccination rate will determine what the future of blended services looks like for CHCS, and will get us to a place of normalcy quicker, safer and more effectively.

As consumers and employees have acclimated to virtual services, CHCS has experienced an increase in workforce productivity, consumer engagement and a reduction in canceled appointments. Although The Center is optimistic that a blend of remote and in-person services will become the new normal, much will depend on evolving COVID-19 factors and what is allowed by the state.

Moving forward, CHCS will continue monitoring HHS mandates and directives, and coordinating and collaborating with managed care organizations (MCOs) to support the ongoing health of the organization. Additionally, The Center will continue to monitor the utilization of technology for service delivery, and improve wellness platforms to protect the health and wellness of our most important asset — The CHCS workforce.



## Adult Behavioral Health Services

In FY 2020, ABH provided 355,573 services to 13,788 consumers.

Adult Behavioral Health (ABH) offers comprehensive, integrated primary and behavioral health care to support each person’s goals for recovery, including: psychiatric evaluation and treatment, primary care, medication management, wellness counseling and education, individual and group therapy, psychosocial rehabilitation, case management, and crisis services.

### Adapting to Care for People Living with Mental Health Conditions

The exceptional needs of consumers with mental health and primary care conditions did not stop in the face of a pandemic; on the contrary, needs were heightened. By expanding treatment options and shifting to a remote model of care, staff was able to serve ABH consumers remotely, while creating enough capacity to treat unwell or primary care consumers in a safe, physically distanced, in-person setting. This proved essential for services where risk factors are evaluated including labs, injections, pap smears, mammograms and prostate exams.

### ADULT BEHAVIORAL HEALTH PROGRAMS

|   |   |
|---|---|
| Outpatient Mental Health Services for Adults & Enrollment   | Assisted Outpatient Treatment (AOT)                                 |
| Primary Care Services for Adults  | Community Reintegration Program (CRP)                               |
| Complex Care – ACT/FACT Program   | Community Alternatives to Incarceration Program (CAIP)              |
| The Military Veteran Peer Network Project (MVPN Connection)   | Justice Intake and Assessment Annex (JIAA)                          |
| POWER (Providing Opportunities for Wellness, Empowerment & Resilience) Program                          | San Antonio Housing Authority (SAHA) Mainstream Voucher Program     |
| ACCESS Program  | Tenant Based Rental Assistance (TBRA)                               |
| TCOOMMI GENESIS – Diversion (Texas Correctional Office on Offenders with Medical or Mental Impairments) | Homeless Set Aside Voucher Program                                  |
| TCOOMMI DDRF – Residential  | Housing Authority of Bexar County (HABC) Mainstream Voucher Program |
| Court Ordered Treatment (COT)   | HHSC Rent and Utility Bridge Program                                |
| Mental Health Court — CC12  | Supported Employment Program  |
| Outpatient Competency Restoration (OCR)   | COVID-19 Crisis Counseling Program (CCP)                            |

## Children’s Behavioral Health Services

In FY 2020, The Center served 7,632 children with 151,720 services.

Being mentally healthy in childhood means reaching developmental and emotional milestones, learning healthy social skills, and how to cope when problems arise. When there is a concern that a child might not be meeting these milestones, The Center offers an array of services that can help. With a multitude of programs designed to promote mental and behavioral health, Children’s Behavioral Health (CBH) cares for youth ages 3-17 through skills training, counseling, medication training and support, psychiatric evaluation and medication monitoring, and family partner support.

### Adapting to Care for Children with Behavioral Health Conditions

During COVID-19, maintaining the ability to provide in-person care for children and families with greater needs was critical. To answer the call, The Center leveraged community partnerships to increase staffing, thus allowing additional capacity to expand treatment options. By serving more families remotely, CBH was able to create enough in-person space to treat consumers with more acute needs in a safe, patient-centered environment.

### CHILDREN’S BEHAVIORAL HEALTH PROGRAMS

|   |  |
|---|--|
| Outpatient Mental Health Services for Children and Adolescents & Enrollment         | LOC-4 Intensive Family Services  |
| TCOOMMI (Texas Correctional Office on Offenders with Medical or Mental Impairments) | POWER (Providing Opportunities for Wellness, Empowerment & Resilience) Program |
| Bexar County Juvenile Justice   | Transition Age Youth (TAY)   |
| Children’s Crisis Services  | Early Childhood Intervention Services (CHCS-ECI)                               |
| Children’s Mobile Outreach Team (CMOT)  | Healthy Outcomes through Early Prevention and Early Support (HOPES) Program    |
| Youth Empowerment Services (YES) Waiver Program                                     |  |



# Restoration & Transformational Services

CHCS served 13,063 people with 386,740 services in FY 2020.

Restoration and Transformational Services offers safe, meaningful programs designed to reduce harms associated with substance use, promote recovery for people with co-occurring mental health and substance use disorders, and provide better care coordination for the most acute people in Bexar County.

## Adapting to Care for People Living with Substance Use Disorders

During the pandemic, a growing number of people turned to substances to deal with feelings of loss, isolation and anxiety. For some who already had a substance use disorder, COVID-19 only exacerbated an already challenging condition, making it even more imperative for substance use treatment to remain operational during the pandemic. In an effort to decompress the wait and allow for physical distancing at Opioid Addiction Treatment Services (OATS), prescribing was altered for more take-home medication, and awnings were constructed for physically distanced, all-weather access. At the Residential Detoxification program, COVID-19 testing and quarantine protocols were enacted to ensure the doors could stay open safely for people wanting to detox and the CHCS staff caring for them. At the Josephine Recovery Center (JRC), staff was able to successfully transition people from the hospital into crisis residential care by creating quarantine protocols for COVID-positive, asymptomatic consumers.

## RESTORATION & TRANSFORMATIONAL PROGRAMS

|   |   |
|---|---|
| Residential Detoxification/Detox                                    | Co-Occurring Psychiatric and Substance Use Disorders (COPSD)    |
| Crisis Care Center  | Mommies Program: Specialized Female IOP Substance Use Treatment |
| Mobile Crisis Outreach Team (MCOT)                                  | Recovery Support Services                                       |
| MEDCOM MCOT   | Dianna M. Burns-Banks Primary Care Clinic                       |
| Josephine Recovery Center   | The Integrated Care Clinic                                      |
| State Contract Beds   | NAS Residential Treatment Program                               |
| Program for Intensive Care Coordination (PICC)                      | Integrated Treatment Program (ITP)                              |
| Chronic Crisis Stabilization Initiative (CCSI)                      | Outreach, Screening, Assessment, and Referral (OSAR)            |
| Crisis Transitional Services (CTS)                                  | SA Job Development  |
| SMART — Special Multidisciplinary Alternative Response Team (SMART) | 210 StreetReach   |
| Substance Use Public Sobering Unit                                  | Comprehensive Continuum of Care for Females (CCC)               |
| Minor Medical Clinic  | Pregnancy, Parenting Intervention (PPI)                         |
| Intensive Outpatient Substance Use Treatment (IOP)                  | PATH — Project for Assistance in Transition from Homelessness   |
| Opioid Addiction Treatment Services (OATS)                          |   |

# Long-Term Care Services

Long-Term Care (LTC) provided 50,755 services to 376 people in FY 2020.

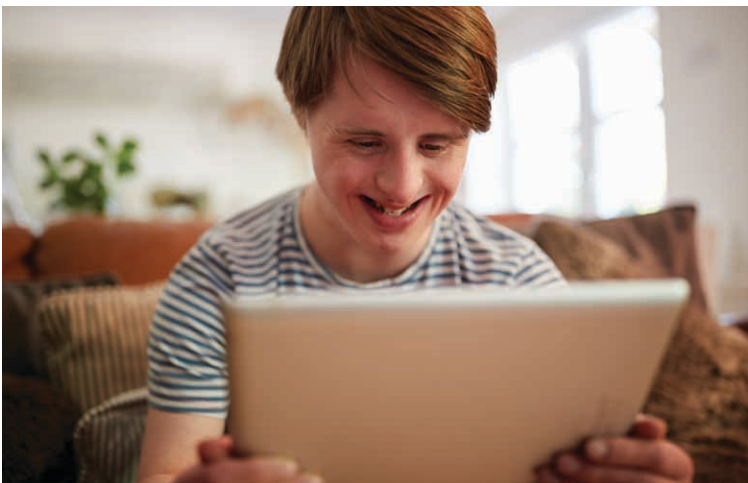
By promoting dignity and choice for adults with intellectual and developmental disabilities (IDD), LTC helps improve the quality of life for consumers and their loved ones through programs designed for inclusivity, accessibility, and independence. Staff provides care in a warm, nurturing and playful environment that offers consumers an opportunity to have fun with peers, learn how to better care for themselves, establish and maintain employment, and overall, experience a new zest for life!

## Adapting to Care for People Living with Intellectual and Developmental Disabilities

Keeping LTC consumers safe amid the pandemic was top-of-mind for CHCS leadership. When COVID-positive cases spiked in Bexar County, the decision was made to postpone day programming to safeguard consumers and employees alike. In doing so, LTC was able to stay operational by consolidating programs and creating safety protocols that kept host homes fully functional throughout the pandemic.

## LONG-TERM CARE PROGRAMS

|  |   |
|--|---|
| Home & Community Based Services (HCS)    | Dual Diagnosis                                |
| Intermediate Care Facility IDD (ICF-IDD) | Employment Connections                        |
| (CALIDAD) Day Habilitation               | Day Activity and Habilitation Services (DAHS) |
|  | Texas Home Living (TxHmL)                     |








# The Center for Health Care Services Foundation



This past year presented many challenges and obstacles that tested our strength and resiliency. The global pandemic forced us to cope with situations we never even imagined, and a lot of us struggled with our mental health as a result. The good news is that there are tools and resources available to support the well-being of people and communities.

Now, more than ever, we need to combat the stigma surrounding mental health concerns. That's why The Center for Health Care Services Foundation is highlighting Mental Health First Aid Training. Mental Health First Aid, similar to CPR, is a course that teaches you how to identify, understand and respond to signs of mental illness and substance use disorders. This training also teaches strategies for what people can do in their daily lives to prioritize mental health, build resiliency, and continue to cope with the obstacles of COVID-19.

Throughout the pandemic, many people who had never experienced mental health challenges found themselves struggling for the first time. We are focusing on training community members throughout Bexar County while also building up resources and support systems that extend beyond COVID-19.

| SCHOOL DISTRICTS*  | HIGHER EDUCATION*  | LOCAL NONPROFITS*  | FAITHBASED*   | CORPORATE & GOVERNMENT*   |
|--|--|--|---|---|
| San Antonio Independent School District<br>Northside Independent School District<br>Northeast Independent School District<br>Southwest Independent School District | University of Texas at San Antonio<br>St. Philip's College<br>Palo Alto College<br>Northwest Vista College | Any Baby Can<br>The Ecumenical Center<br>United Way of San Antonio and Bexar County<br>Project Quest, Inc. | Catholic Charities Archdiocese of San Antonio, Inc.<br>St. Mark's Episcopal Church<br>Trinity Baptist Church<br>First Presbyterian Church | Southwest Texas Regional Advisory Council (STRAC)<br>Meadows Mental Health Policy Institute<br>Bexar County<br>Watsonville PD |
|   |                           |                         |    |    |
| JUNE 2020  | JULY 2020  | AUGUST 2020  | 2020-2021   | DECEMBER 2020   |
| Certified as Virtual MHFA Instructors  | CHCS became teen Mental Health First Aid (tMHFA) Implementing Site   | Started Teaching MHFA Virtually  | Certified 1,069 Mental Health First Aiders  | Created Independent Instructor Coalition  |

\* All organizations are not listed.

## GOVERNMENT FUNDERS



[www.chcsf.org](http://www.chcsf.org) | [iGive@chcsbc.org](mailto:iGive@chcsbc.org) | (210) 261-1114



## FINANCIAL HIGHLIGHTS

AS OF AUGUST 31, 2020

## Assets

|  | Primary Government<br>Governmental Activities | Component Unit<br>CHCS Foundation |
|--|---|-----------------------------------|
| <b>Current assets</b>                                  |   |                                   |
| Cash and cash equivalents                              | \$ 14,254,635                                 | \$ 363,302                        |
| <b>Receivables:</b>                                    |   |                                   |
| From other governments                                 | 7,176,415                                     | —                                 |
| Other  | 2,143,571                                     | 380,031                           |
| Prepaid expenses and other assets                      | 481,964                                       | —                                 |
| Inventory  | 153,081                                       | —                                 |
| <b>Total current assets</b>                            | <b>24,209,666</b>                             | <b>743,333</b>                    |
| <b>Capital assets, net of accumulated depreciation</b> | <b>36,679,552</b>                             | <b>—</b>                          |
| <b>Total Assets</b>                                    | <b><u>\$ 60,889,218</u></b>                   | <b><u>\$ 743,333</u></b>          |

## Liabilities

|   |                             |                         |
|---|-----------------------------|-------------------------|
| <b>Current liabilities</b>                    |                             |                         |
| Accounts payable                              | \$ 3,465,080                | \$ —                    |
| Accrued salaries and wages                    | 1,862,275                   | —                       |
| Due to funding source                         | 146,585                     | —                       |
| Unearned revenue                              | 252,500                     | —                       |
| Accrued expenses                              | 700,000                     | 56,224                  |
| <b>Portion due or payable within one year</b> |                             |                         |
| Due to State                                  | 2,299,499                   | —                       |
| Compensated absences                          | 1,889,662                   | —                       |
| <b>Total current liabilities</b>              | <b>10,615,601</b>           | <b>56,224</b>           |
| <b>Noncurrent liabilities</b>                 |                             |                         |
| Due to State                                  | 2,299,499                   | —                       |
| Compensated absences                          | 1,921,008                   | —                       |
| <b>Total long-term liabilities</b>            | <b>4,220,507</b>            | <b>—</b>                |
| <b>Total Liabilities</b>                      | <b><u>\$ 14,836,108</u></b> | <b><u>\$ 56,224</u></b> |

## Net Position

|   |                             |                          |
|---|-----------------------------|--------------------------|
| <b>Net Investment in capital assets</b> | <b>36,679,552</b>           | <b>—</b>                 |
| <b>Restricted</b>                       | <b>—</b>                    | <b>220,580</b>           |
| <b>Unrestricted</b>                     | <b>9,373,558</b>            | <b>466,529</b>           |
| <b>Total Net Position</b>               | <b><u>\$ 46,053,110</u></b> | <b><u>\$ 687,109</u></b> |

## TRAUMA-INFORMED, PERSON-CENTERED CARE

CHCS is committed to clinic excellence and proud to be a Certified Community Behavioral Health Clinic (CCBHC) delivering integrated care to children, adults and families emphasizing recovery, trauma-informed care, and person/family centered treatment. CHCS firmly believes that this new model of improved and expanded access to care will have a positive impact on the lives of the consumers we serve and their loved ones.

### CONSUMER RIGHTS

Dora M. Snedeker, RN (210) 261-FAIR (3247)  
or RightsProtection@chcsbc.org

### HIPAA PRIVACY

Cynthia Cannon (210) 261-1078 or privacy@chcsbc.org

### 24-Hour Crisis & Substance Use Helpline:

(800) 316-9241 or (210) 223-SAFE (7233)

### To Enroll in Services:

**Adults** (210) 261-1250

**Children** (210) 261-3350

**Central Office** (210) 261-1000



**THE CENTER**  
**FOR HEALTH CARE SERVICES**  
*Mental Health & Substance Abuse Solutions*

**Where hope and healing begin.**

[www.chcsbc.org](http://www.chcsbc.org)