BEXAR COUNTY BOARD OF TRUSTEES FOR
MENTAL HEALTH MENTAL RETARDATION SERVICES d/b/a
THE CENTER FOR HEALTH CARE SERVICES

Regular Board Meeting Minutes
6800 Park Ten Blvd, Suite 200-S
San Antonio, Texas 78213
Tuesday, August 19, 2025
12:00 Noon

TRUSTEES PRESENT:	Daniel T. Barrett, Chairman Polly Jackson Spencer, Ret. Judge, Vice Chair Donnie Windham Whited, Secretary Shari Hromas Sandee Marion, Ret. Judge
TRUSTEES ABSENT:	Graciela Cigarroa, Treasurer Roberta Krueger, M.D. Travis Smith Margaret M. Vera
STAFF PRESENT:	Jelynne LeBlanc Jamison, President/Chief Executive Officer Frank Garza, General Counsel Dr. Amber Pastusek, Chief Medical Officer Robert Guevara, Chief Financial Officer Elizabeth Ackley, Chief Employee Experience Officer Allison Greer, VP of Governmental Relations Edward Benavides, VP of Adult Behavioral Health Venisa Saenz, Chief of Staff/Board Liaison Michelle Stewart Director of Primary Care Adam Velez, Sr. Director of Contracts & Procurement Randa Gipson, Director of Contracts & Procurement Justin Hansen, Sr. Director of IT Jesse Sanaseros, Director of IT Justin Moseley, Director of Financial Analysis Rosario Genuardi, RN Manager Carla Riedl, Legislative Analyst Cynthia Hinton, Executive Assistant
GUEST PRESENT:	Dr. Alexander Testa, University of TX Health Science Center at Houston

The regular meeting of the Bexar County Board of Trustees for Mental Health Mental Retardation Services d/b/a The Center for Health Care Services was held on Tuesday, June 10, 2025, at the Administrative Offices located at 6800 Park Ten Blvd, Suite 200, San Antonio, Texas 78213.

CALL MEETING TO ORDER
CERTIFICATION OF QUORUM

Mr. Barrett called the meeting to order at 12:07 p.m., with the following trustees present: Mses. Hromas, Marion, Spencer, and Whited thereby establishing a quorum.

PLEDGE OF ALLEGIANCE – Led by Mr. Barrett
CITIZENS TO BE HEARD – None to be heard.

I. APPROVAL OF MINUTES – Regular Board Meeting, June 10, 2025

Mr. Barrett asked for a motion to approve the Minutes of June 10, 2025, Regular Board Meeting, which were presented for review and approval. Dr. Whited so moved for approval as presented; Ms. Hromas seconded the motion. Motion carried.

II. BOARD CHAIRMAN REPORT – *Daniel Barrett*

Mr. Barrett deferred his report.

III. PRESIDENT/CEO REPORT

- **Leadership Briefing** – *Jelynne LeBlanc Jamison*

  Ms. Jamison introduced Dr. Alexander Testa. Dr. Testa provided an overview of the JIAA Assessment that he conducted on behalf of Bexar County. Dr. Testa noted that the study was conducted in 2023 and evaluated the procedures for processing detainees at the JIAA facility. He informed the Board that the report addressed six areas, to include: Intake & Processing, Bonding, Dual Magistration, Screening & Diversion, as well as Connecting Persons Processed Through and Released from the JIAA but not incarcerated. Ms. Hromas asked what the Harris Center is doing that is different. Dr. Testa said they have a systematic process, a buy-in from entities, including law enforcement within the District Attorney's office but most importantly they have a dedicated diversion facility. If the consumer is going somewhere, they will go somewhere with a bed and with a dedicated and talented staff, and not back out on the street, which is a huge difference.

  Dr. Pastusek said that when law enforcement encountered someone in the field with a mental health history, an orange sheet from Harris County Jail, and a low misdemeanor, then the person would be taken to jail diversion rather than the County Jail. There would be a psychiatrist, primary care, nursing staff 24/7, and Social Services helping with food stamps, an ID, next housing option, etc. The person would be kept for two weeks, sometimes if they needed a little longer, then there was the Crisis Continuum of Care and could be transferred to a Crisis Residential bed for an additional two weeks. The program was tremendously successful and saved the Harris County Sheriff's office a lot of money. The Harris Center was able to find that collaboration with the Sheriff's office and wrote the program. The program was so successful that a Youth Diversion Center was opened up in May 2023 for the youth with juvenile probation. She considers it the gold standard for the country. People come from all over the country and even from Europe to look at that model. The program really works, and it is voluntary. The first time the patient may not want to stay but there are Peers that help with the engagement factor. No one has to stay if they do not want to, the program is strictly voluntary.

  Ms. Jamison stated there are dedicated DAs, pre-trial staff, LMHAs, staff at the desk processing,

who are all working towards the same criteria and the same goals for diversion. A group of staff had been taken to Harris County to visit and tour the Harris Center Diversion program. Dr. Pastusek said this was one of her areas and she helped stand up those programs and would like to create that here. Ms. Jamison thinks it is a solid recommendation, and it would take willing partners to come to the table to agree on the diversion goals, dedicated staff, a facility, and system. Questions ensued.

Dr. Testa and Ms. Jamison then discussed the findings of the assessment and Ms. Jamison provided responses to those findings.

Upon conclusion of the discussion, Ms. Jamison presented staff recommendations in response to the findings of the study which includes discontinuing CHCS contracted services at the JIAA and to negotiate an agreement for court services if the District Court Judges and Bexar County are interested. The Board agreed with staff recommendations.

Ms. Jamison thanked Dr. Testa for being available to speak at our Board Meeting.

- **Chief Medical Officer Report** – *Dr. Pastusek*
  Dr. Pastusek stated a Medical Director has been selected for Adult Behavioral Health who will start Employee Orientation on September 15. This is good news since the position has been vacant since April. His name is Josh Atkinson and has been at San Antonio State Hospital (SASH) for five years and has some Medical Director experience.

- **Contracts executed by the President/CEO over $50,000 and under $100,000 for the months of June 2025 and July 2025** – *Jelynne LeBlanc Jamison*
  Ms. Jamison reported there were none.

IV. CONSENT AGENDA

1. Review/Approve the Authority for the President/CEO to Negotiate & Execute a Contract with Dr. Eric Cardwell for the provision of Forensic Competency Assessment Services – *Adam Velez*
2. Review/Approve the Authority for the President/CEO to Negotiate & Execute a Contract with Dr. John Delatorre dba Resolution Forensic and Consultation Services, PLLC, for the provision of Forensic Competency Assessment Services – *Adam Velez*
3. Review/Approve the Authority for the President/CEO to Negotiate & Execute a Contract with Jami Netter for the provision of Youth Empowerment Services (YES) Waiver Services – *Adam Velez*
4. Review/Approve the authority for the President/CEO to Negotiate & Execute a Contract with Michele Galan for the provision of Youth Empowerment Services (YES) Waiver Services – *Adam Velez*
5. Review/Approve the Authority for the President/CEO to Negotiate & Execute a Contract with Jonette Lucio, LPC dba Stellar Counseling, PLLC for the provision of Youth Empowerment Services (YES) Waiver Services – *Adam Velez*
6. Review/Approve the Authority for the President/CEO to Negotiate & Execute a Contract with Crystal Trahan for the Provision of Mental Health First Aid Instructor Services – *Adam Velez*
7. Review/Approve the Authority for the President/CEO to Negotiate & Execute a Contract with Exydoc, LLC for the provision of Credentialing Enrollment Services – *Adam Velez*
8. Review Report from the Board Policy Committee regarding the Status of the Annual Board Policy

Review – *James Chapman*

9. Review and Approve the Proposed Board and Committee Meeting Schedule for FY 2026 – *Jelynne LeBlanc Jamison*

Mr. Barrett asked for a motion to approve the items under Consent. Judge Marion so moved; Dr. Whited seconded. Motion carried.

V. INDIVIDUAL ITEMS FOR REPORT, DISCUSSION & APPROPRIATE ACTION

1. The Board Members received their annual training on the following:

   a. Consumer Rights – *Elizabeth Ackley*
   b. Cultural Competency – *Elizabeth Ackley*
   c. Corporate Compliance & Ethics 101 – *James Chapman, Frank Garza*
   d. Open Meetings – *Frank Garza*

2. Review/Approve the Center's Financial Statements for the period ending April 30, 2025, and May 31, 2025 – *Robert Guevara*

   Mr. Guevara gave some highlights of the Financial Statements and stated a detailed report had been presented to the Finance Committee.

   a) April 2025 Financials
      - Operating loss of ($424,718) bringing the year-to-date loss to ($2,300,891)
      - Daily Billable Service Revenue is averaging $57,585 through the month of April. Last fiscal year the average was s$43,000. Increase in daily billable activity by $12,100 per day this fiscal year which is a big improvement.
      - Cash Flow – Beginning Balance $14.4 million, In Flows $32.9 million, Out Flows $11.8 million, Ending Balance $35.5 million.

   b) May 2025 Financials
      - Operating gain of $38,306, year to date loss of ($2,213,446)
      - Daily Billable Service Revenue is averaging $56,000 through the month of May. Last fiscal year the average was $51,000 which is a $6400 improvement per billable activity per day.
      - Cash Flow – Beginning Balance $35.5 million, In Flows $5.1 million, Out Flows $16.6 million, Ending Balance $24 million.

   Mr. Barrett asked for a motion to accept the April 2025 and May 2025 Financial Statements. Judge Spencer so moved for acceptance of the Financial Statements; Judge Marion seconded. Motion carried.

3. Review/Approve the Center's Fiscal Year 2026 Budget and Staffing – *Robert Guevara*

   Ms. Jamison stated she would present the proposed FY 2026 budget.
   Mission and Key Focus Areas – She stated the budget is created around the Key Focus areas which are: 1) Patient Experience; 2) Patient & Community Outcomes; 3) Community Perception; 4) Employee Experience; 5) Patient and Employee Safety; and 6) Financial and Sustainable Growth. Regarding the FY 2026 Budget Assumptions, the Board will see investments in IT Optimization, AI

Investments, Outsourced Provider Enrollment, Continue investment in Peer Support, and Intake enhancements.

FY 26 CEO Scorecard & Center Wide Metrics – She is recommending a different Scorecard for the CEO. In the past years the Board has used a very different instrument and last year she received feedback that she wanted to reevaluate the CEO goals because they didn't think she had any. The Board approve the Center Wide Metrics every year that have been used as the CEO goals so she is proposing a different scorecard which would highlight the Center Wide Metrics and those would be accountable for 75% of the overall scorecard. She will work with the Board to define Key Initiatives. Some suggestions for Key Initiatives could be: 1) Foundation Fundraising – There should be a target # for this; 2) Succession Planning – There needs to be a Succession Plan for her role as CEO; 3) Smart Deployment for Crisis Response – There is some work that needs to be done to promote this for the Multi-Disciplinary Teams, and there may be some emergent technology that might be beneficial to propose to give City of San Antonio and Bexar County options for 911; and 4) Clinical Improvement – Performance Contract Clinical improvements – Clinical Improvements will continue to be made, and she will focus on the Performance Contract metrics. The Board can discuss this to determine which key initiatives are important to them, and she is proposing that the key initiatives be 15% overall of scorecard. Lastly, giving the Board the opportunity to rate her on Leadership qualities at 10% overall of the scorecard. This will require working with a new instrument, and she is proposing this for the CEO going forward.

Ms. Jamison explained the structure of the Performance Goals for Employees & Percentages and is not recommending any changes. She went over all the Metrics with the Goals & Targets for each of the following: Center Wide Goals Gating, Safety, Fiscal, Scheduling & Appointments, Productivity, and Services Completed. She is proposing they remain the same for FY 2026.

Program Changes

1. Enrollment & Screening – CHCS will schedule some walk-in consumers for the actual intake process is a minor change.
2. Clinical Services – Consultant services to recommend practice and service provision improvements for Child Behavioral Health (CBH) should be completed in October; and establish a Chief Clinical Officer responsible for developing and executing overall clinical practice and improvements in six months.
3. Substance Use Services – Added four new Peer Support positions for better outcomes in SUD JRC and CBH/SUD; Solicitation submitted & reduced funding potential for MOUD (OATS); Comprehensive Continuum of Care was eliminated.
4. Crisis Response – Maintaining SB 292 funding and Justice Programs, looking for an alternative for local match. An alternative source for local match has been found since Bexar County funding is not required for this local match.
5. Primary Care – TX Council Initiative to ask HHSC to promote and develop collaborative care models for LMHAs for payment. The Center is responding to a survey conducted by the Texas Council and plans to make a recommendation that HHSC begin to recognize collaborative care models and pay for primary care services since HHSC requires all the LMHAs to become CCBHCs and are promoting integrated care. She hopes to make that case and that Texas Council will accept the recommendation and will work on the Center's behalf with HHSC to recognize these models of care in the future.

6. Center of Excellence – The functions of the Center of Excellence will continue due to the budget and will be assigned to other areas; this eliminates the two leadership positions.
7. IDD ISS/DAHS – These two programs are to close. Ms. Jamison stated we have the capacity to transition these consumers to other providers. A timeline has been developed to work, and notice has been given to HHSC and CHCS consumers. The Center will work with consumers during the transition period for both programs. This affects eleven consumers.
8. Risk Management: HHSC Contract Termination Clause-Termination Costs – As of FY 26 standard language has changed across all HHSC contracts. CHCS is financially responsible for replacement costs if HHSC terminates the contract for a cause. This means that CHCS must reimburse HHSC for the replacement costs of the program that is subject to these findings. This is a different risk profile for the Center. The Center has never been held responsible to reimburse the agency for the costs of replacement of the program. CHCS will need to do additional work to ensure that internally that risk profile is understood more and that mitigation plans are implemented across the Center to ensure we don't find CHCS in this situation. Initial measures are being proposed. CHCS Risk Management measures will include Monitoring and reporting, Internal controls, Escalation protocols, and enhance our Regular and proactive communication with HHSC, that there is remedy time available, so the Center is not found in this position. They will be back to update the Board on that risk profile and to give them a better understanding of what this could mean for the Center. Texas Council is aware, and she thinks they will be in conversation with HHSC as well.
9. Potential Budget Amendments – the three BeWell Texas Grants for Peer Recovery Support Services were not included in the budget. The Center was awarded $1.5 million from HHSC to implement the YCOT Program.

<u>Budget Highlights</u>

Local Funding

- Community Alternatives to Incarceration funding is secure at $1.2 million.
- As mentioned in her Leadership Briefing, Ms. Jamison is recommending Bexar County at $3.4 million, the difference between our current contract that is not signed. This proposal is for GS Services, which includes the eleven clinicians and the three supervisors until it can be negotiated with Bexar County to determine what it is they want to do. She just learned this morning that the Center was in their Counties' proposed budget at $4.8 million so there was no way of knowing that when the CHCS budget was presented at this meeting.
- The City of San Antonio did include the Center in their budget for $1.9 million, which is for the Integrated Treatment Program at Haven for Hope, and the Sobering & Minor Medical Clinic located at Frio. This funding is local funding.
- The proposed budget from STRAC is $10.9 million.
- The University Health Board of Managers approved the local match at $2.7 million.
- UH continues to fund a 3-year contract for the UH Eastside Clinic at $1.5 million.

Ms. Jamison continued to go over the Expenses Highlights and Employee Initiatives and then turned it over to Mr. Guevara to share the budget and staffing comparisons, and then she will come back with the recommendation and basis for the budget.

Mr. Guevara went over the Funding Sources; 14% is made up of local sources, Federal is 23%, State is 48% and another 14% from local sources, which is a total of 98% from those three funding

sources. He went over the Expense by Category and stated Salary & Fringe was the largest expense of $89.9 million or 56%. He stated the budget for FY 25 was $164 million and is requesting $160 million for FY 26. The majority of that is comprised of three areas due to the loss of HR 133 or some type of ARPA dollars of $2.8 million, SAMHSA funding of $1.7 million and SUD funding of $2 million which makes up the loss of the majority of the programs.

Mr. Guevara stated the following:

- Proposed Budget of $160,270,402
- Proposed Authorized Headcount of 1,116.72
- No Fund Balance Designation requested this FY
- Authorize CHCS staff to align final staffing to meet agreed upon budgets

Mr. Barrett asked what is the total amount of FTEs not 57coming back. Ms. Jamison said that today the projection is 50 – 77 with the Board approving the budget today. Staff are working to ensure they identify those positions and beginning to look at their individual credentials. They have already been ranked and evaluated in accordance with our Administrative Directive on the restructuring process. Right now, their individual qualifications and credentials are being looked at to see if there are other opportunities within the Center to transition to. It is targeted at 76 but the goal is that they can all be transitioned into another role at CHCS. If that is not possible, then to have a process for them to want to come back if an opportunity presents itself. That process will be taken on if approved by the Board. A plan has already been developed to sit down with those impacted business units, the impacted employees, and prepared to provide transition assistance to those employees such as career counseling, and any other assistance they may need. She stated that if CHCS is given the opportunity to negotiate with Bexar County, to reinstate GS services. She would like to negotiate for improved coordination, to be assured thee is a new assessment tool, access to more data so informed decisions can be made with the consumers, and work with them on a defined diversion goal understanding that CHCS does not have a facility to transfer to, but at least to come together and have a consensus on a diversion goal with the entities we have been working with. If those things can be achieved, she will readily come back and recommend CHCS continues those services with Bexar County. If not, the Center might be better off with UH providing those services.

She wants to share with the Board what the Center is experiencing in terms of the community impact with this funding, and what will be communicated to CHCS Stakeholders today after this board meeting. We are going to see more visits in the hospital emergency departments and potentially unwarranted interactions with law enforcement. CHCS will need to work with all their partners to understand that landscape. She attended last evening's Town Hall meeting of the City of San Antonio and had an opportunity to brief the City Manager so that he is aware and that once our board meeting is over, she will give him more details. She will plan to notify Bexar County as well as the City on CHCS' proposed budget and the impact to the community. CHCS targets for HHSC have not changed, still have an expectation through the Performance Contract to have the target with Adult at 6790, still have a target for Children at 1598. Currently CHCS is at 109% for Adult, not yet at 100% for Children. Those targets have not changed but other sources of revenue for expanding our access to services have changed through SAMHSA, ARPA, and for substance use, so that impact will be felt.

She told the Board that there is a folder with the Staffing Plan for each of them for their information. HHSC requires the Board to approve all the titles and all the salaries. She stated the recommendation is that the Board approve the FY 2026 Budget and Staffing Plan that reflects the Budget Reductions, Consumer Reductions, FTE impacts, and Community Impact as outlined in the proposed budget and the staff salaries by position listing provided. Mr. Barrett stated this is very thorough and in lieu of the funding differences, shortcomings, and unknown, a lot of it is very good and he can see there was a lot of work done. Ms. Jamison said whatever transition occurs, for the rest of this week and month that those staff affected are treated with dignity and respect for their dedication and service they have given the Center.

Mr. Barrett asked for a motion to approve the Center's FY 2026 Budget and Staffing. Judge Spencer so moved; Dr. Whited seconded. Motion carried.

VI. EXECUTIVE SESSION (DISCUSSION ONLY: CLOSED TO THE PUBLIC) PURSUANT TO CHAPTER 551, TEXAS GOVERNMENT CODE: 551.071 (Consultation with General Counsel)

Mr. Barrett called the meeting into closed session at 2:34 p.m.

A. Discussion regarding outstanding legal issues with Bexar County.
B. Discussion regarding amending CEO Employment Agreement.

VII. RECONVENE OPEN SESSION

The meeting was reconvened into Open Session at 2:50 p.m. No action was taken. The Board agreed to move forward with a motion to execute a separate Severance Agreement from the CEO Employment Agreement. Judge Spencer so moved; Ms. Hromas seconded. Motion carried.

VIII. REPORTS

1. TEXAS COUNCIL OF COMMUNITY MHMR CENTERS INC. BOARD – *Daniel T. Barrett*

Mr. Barrett reported that the Texas Council Board wants to form a Political Action Committee (PAC).

2. TEXAS COUNCIL RISK MANAGEMENT FUND BOARD (TCRMF) – *Robert Guevara*

Mr. Guevara stated the TCRMF Board passed a 2026 Budget of $23.4 million. There was some discussion at the Retreat on May 15th related to the treatment of Member Surplus. Since he was unable to attend due to a conflict with the Center's Finance Committee, he will ask TCRMF to give him more information about that. Mr. Guevara reported that the TCRMF net position is at $44 million and informed the Board that the fees related to the Sedwick Agreement increased by 6.4% or $276,000.

3. TEJAS HEALTH MANAGEMENT BOARD – *Robert Guevara*

Mr. Guevara reported that Tejas has $3.8 million in cash or eighteen months of reserves, and he has been reappointed the Secretary/Treasurer of the Board. There is a lot of interaction between Tejas and the Texas Council with the RSIG and the IMC Committees as there is a lot of synergy related to Cyber Security and MCO Initiatives for LMHAs. Tejas is still trying to replace

the Superior Healthy at Home Program with another Managed Care Organization but have been unsuccessful. Mr. Barrett asked now that there is $3.8 million in surplus, is there any discussion about returning funds to the Centers? Mr. Guevara stated there was some initial discussion, however, when the Superior Contract was lost those discussions ceased.

IX. ADJOURNMENT

Mr. Barrett asked for a motion to adjourn the meeting. Judge Marion so moved; Dr. Whited seconded. Mr. Barrett adjourned the meeting at 2:55 p.m.

Passed and approved this 14th day of October 2025.

Daniel T. Barrett
Board Chairman

Cynthia Hinton
Executive Assistant