

**NOTICE OF A REGULAR MEETING
OF THE BOARD OF DIRECTORS
MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT**

Notice is hereby given to all interested members of the public that the Board of Directors of Montgomery County Public Health District will hold a regular meeting as follows:

Date: **Thursday, March 9, 2023**

Time: **3:30 P.M.**

Place: **MONTGOMERY COUNTY HOSPITAL DISTRICT
ADMINISTRATIVE BUILDING
1400 SOUTH LOOP 336 WEST
CONROE, MONTGOMERY COUNTY, TEXAS 77304**

Open to Public: The meeting will be open to the public at all times during which such subjects are discussed, considered, or formally acted upon as required by Texas Open Meetings Act, Chapter 551 of the Government Code.

This Notice in detail was posted at least 72 hours prior to the beginning of said meeting with the County Clerk's Office and is on the Bulletin Board of the Courthouse and in the District's Administrative Office.

Subject: The agenda for such meeting shall include the consideration of, and if deemed advisable, the taking of action upon:

1. Call to Order
2. Roll Call
3. Invocation
4. Pledge of Allegiance
5. Public Comments
6. Special Recognition
7. Discuss and take action on the proposed management of the Montgomery County Public Health District. (Commissioner Noack, Montgomery County Commissioner)
8. Update, discuss and take action on Montgomery County Public Health Management transition. (Jason Millsaps, MCPHD Transition Manager)
9. Consider, discuss and take appropriate action regarding an Interlocal agreement between Montgomery County and Montgomery County Public Health District allowing for the timely billing and payment of all grant approved salary, fringe benefits and expenses related to the MRC-Coordinator through December 31, 2023. Authorize Randy Johnson, Executive Director to execute the ILA on behalf of MCPHD. (Jason Millsaps, MCPHD Transition manager)

10. Consider and act on Amendment Number V to the Interlocal Agreement between Montgomery County Hospital District and the Montgomery County Public Health District for Provision of Public Health Services. (Melissa Miller, COO – MCHD)
11. Acknowledgement of our appointed Schools, Large Cities and MCHD board member representatives to the Public Health District board.
12. Consider and act on election of annual chair positions.
13. Approval of Minutes from November 3, 2022, January 12, 2023 and February 16, 2023 Public Health District Regular Board meeting.

BOARD OF DIRECTORS BRIEFING TO INCLUDE:

14. Report on activities related to Public Health, Epidemiology and Emergency Preparedness. (Alicia Williams, Public Health Director – MCPHD)

FINANCIAL MATTERS

15. Review and approve financial report regarding District's operations. (Brett Allen, CFO – MCHD)
16. Consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2023. (Brett Allen, CFO - MCHD)
17. Consider and act on ratification of payment of invoices related to expenditures. (Brett Allen, CFO – MCHD)
18. Update and discuss action on external auditor, Patillo, Brown and Hill for audit services. (Jason Millsaps, Transition Manager)

EXECUTIVE SESSION

19. Convene into executive session as authorized by Texas Government Code, Chapter 551, Section 551.071 to receive legal advice on the audit by Patillo, Brown and Hill.
20. Reconvene from executive session and take action on item number 19 discussed in executive session, if needed.

ADMINISTRATIVE MATTERS

21. Consider and act on Montgomery County Public Health District future board meeting schedule.
22. Consider and act discussion of items to be placed on agenda of the next meeting of the Montgomery County Public Health District Board of Directors.
23. Adjourn

Agenda Item # 7

To: MCPHD Board of Directors

From: Commissioner James Noack

Date: March 9, 2023

Re: Proposed Management of MCPHD



Discuss and take action on the proposed management of the Montgomery County Public Health District. (Commissioner Noack, Montgomery County Commissioner)

Standing agenda item.

Agenda Item # 8

To: MCPHD Board of Directors
From: Jason Millsaps, Transition Manager
Date: March 9, 2023
Re: MCPHD Transition



Update, discuss and take action on Montgomery County Public Health Management transition.
(Jason Millsaps, MCPHD Transition Manager)

Agenda Item # 9

To: MCPHD Board of Directors

From: Jason Millsaps, Transition Manager

Date: March 9, 2023

Re: MRC-Coordinator Agreement



Consider, discuss and take appropriate action regarding an Interlocal agreement between Montgomery County and Montgomery County Public Health District allowing for the timely billing and payment of all grant approved salary, fringe benefits and expenses related to the MRC-Coordinator through December 31, 2023. Authorize Randy Johnson, Executive Director to execute the ILA on behalf of MCPHD. (Jason Millsaps, MCPHD Transition manager)

**INTERLOCAL COOPERATION AGREEMENT BY AND BETWEEN MONTGOMERY
COUNTY, TEXAS AND MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT**

THE STATE OF TEXAS §
 §
COUNTY OF MONTGOMERY §

This Interlocal Cooperation Agreement (“Agreement”) is made and entered into by and between Montgomery County, Texas (“County”), a political subdivision of the State of Texas, acting by and through its Commissioners Court, with the Office of Homeland Security and Emergency Management (also referred to as “OEM”) as its authorized designee, and Montgomery County Public Health District (“District”), a political subdivision of the State of Texas, acting through its Board of Directors (“Board”). The County and District are hereinafter collectively called the “Parties.”

WITNESSETH

WHEREAS, County is authorized under Chapter 791 of the Texas Government Code to enter into this Agreement, which Chapter authorizes contracts between counties and other local government bodies for the performance of government functions in which the parties are mutually interested, including services for public health and welfare, and Sec. 1063.116, Chapter 1063, Special District Local Laws Code, Subtitle A, further authorizes the Board to contract with governmental entities for services for the welfare needs of district inhabitants; and

WHEREAS, District is a recipient of the Urban Areas Security Initiative (UASI) Community Preparedness Grant (“Grant”) for Grant Year (GY) 2023, as administered by the Texas Office of the Governor, and said Grant, in part, covers costs associated with the Grant eligible services (“Services”) of a Medical Reserve Corps Coordinator (“MRC Coordinator”); and

WHEREAS, District and County desire to have the full-time MRC Coordinator employed by County, at the Office of Homeland Security and Emergency Management, provide said Services on behalf of the District for GY 2023, devoting one hundred percent (100%) of said MRC Coordinator’s Working Time (defined in Article I below) to providing the Services as provided hereinunder; and

WHEREAS, on January 24, 2023, the Commissioners Court of County approved the transfer of UASI funded position of an MRC Coordinator from District to the County’s Office of Homeland Security and Emergency Management and said MRC Coordinator commenced provision of Services at OEM on February 18, 2023; and

WHEREAS, the Grant mechanisms per the Office of the Governor require the Grant to remain with the District as recipient for the duration of calendar year 2023 and an execution of an interlocal agreement between the Parties hereto to effectuate any reimbursement from Grant funding for GY 2023, from District to County, and the Parties accordingly desire to enter into this Agreement; and

WHEREAS, District is willing to utilize Grant funds to reimburse County in an amount equal to one hundred percent (100%) of the total cost to the County for supplying the Services (as defined in Article 1 below), including salary and benefits of the MRC Coordinator that County may incur, in accordance with the Grant terms, and as hereinafter provided.

NOW THEREFORE, in consideration of their mutual covenants and agreements, the Parties agree as follows:

Article I.

The County agrees to appoint said MRC Coordinator as desired by District, effective at the beginning of the term set forth in Article V, Section D of this Agreement, so as to enable said MRC Coordinator to devote one hundred percent (100%) of his Working Time, as hereafter defined, to the Services.

As used herein the phrase “Working Time” means the usual or normal hours that the MRC Coordinator is required to work on Services in any calendar month, including any work required for the County during local, state or federal declared disasters and/or emergencies, and one hundred percent (100%) of the time the MRC Coordinator is on vacation, holiday, on sick or other approved leave. The items listed above are explanatory, and the meaning of “Working Time” is not limited to the description on said list.

As used herein, the phrase “Services” shall include, but not be limited to the activities related to community preparedness following acts of terrorism; recruitment, training and retention of medical reserve corps volunteers; coordination of volunteers participating in practice (or live) events to prepare for call in the event of public health disasters/emergencies; and related duties as may be assigned to the MRC Coordinator from time to time. The Office of Homeland Security and Emergency Management reserves the right to temporarily re-assign the MRC Coordinator to necessary emergency duties at times of declared disasters and emergencies, even if such are considered unrelated to this Agreement, when deemed necessary by County for the preservation of safety and welfare of the residents of County.

The parties shall mutually execute written HIPAA compliant Business Associate Agreement(s) and any other legally required documentation if and to the extent it becomes necessary to fulfill Services envisaged hereunder, in compliance with applicable laws. The parties shall further make reasonable efforts to mutually execute any applicable amendments to this Agreement to formalize any required changes.

Article II.

Payroll and Benefits: Effective February 18, 2023 through December 31, 2023, District shall be responsible for and agrees to pay County a sum of money, to be known as “Salary and Compensation Cost”, which sum will equal one hundred percent (100%) of the salary and benefits of the full-time MRC Coordinator. The Salary and Compensation Cost shall be comprised of a **total salary reimbursement amount of \$53,000.00 from February 18, 2023 through December 31, 2023 plus a total benefits reimbursement amount of \$20,000.00 from February 18, 2023 through December 31, 2023, payable in installments as invoiced.** No pre-approval from District is needed by County to invoice the above. The Parties acknowledge that District’s final source of

funding for this Agreement shall be the approved Grant funds, and all applicable terms of the Grant are deemed incorporated herein by reference as affirmative obligations of the Parties hereto.

Outside of salary and benefits described above, the County further understands and agrees to receive in writing any necessary approval from the District regarding additional items that may be covered by the Grant, prior to the County expending and seeking reimbursement from District. Such additional items include, but are not limited to, travel to and from conferences, recruitment materials, community preparedness materials, planning supplies, communications equipment and charges, medical supplies, and mileage.

The County shall provide notice of any changes in County-approved rates, benefit recalculations, premium recalculations or other costs affecting this Agreement and reimbursement therein, and District shall cooperate with County in executing any resulting amendments. Invoiced amounts will be reimbursed net 30 by District in response to biweekly, monthly, or quarterly invoices from the County (as deemed appropriate by County). Payment may be made via wire or check to "Montgomery County, Texas" and if mailed, then addressed to Montgomery County Auditor, P.O. Box 539, Conroe TX 77305. District certifies that all payments under this Agreement shall be made out of current funds lawfully available for such purpose and no debt shall be incurred by this Agreement. District shall provide County with the former's billing information for County to appropriately invoice amounts due.

The Agreement shall expire naturally on March 31, 2024, allowing time to the Parties to effectuate and complete all reimbursements hereto. Notwithstanding such date of expiration, in the event during the course of the Agreement, and following the expiration or termination of the Agreement, an amount paid to the County is found to be in excess of the aforementioned amounts, such amount(s) shall be reimbursed by County or credited to a future billing, and correspondingly, if any amounts are due remaining but unpaid as of December 31, 2023 from District to County, such shall be paid by District to County promptly and the Agreement shall be deemed extended beyond the natural expiration/termination date until all mutual obligations herein are fulfilled.

The Parties mutually agree that Grant funding applicable to this Agreement will be utilized to supplement rather than supplant funds otherwise available.

Article III.

It is expressly understood and agreed that such MRC Coordinator appointed by the County to provide the Services shall be subject to the control and supervision of the Office of Homeland Security and Emergency Management to the same extent as other departmental employees. OEM shall give prompt consideration to all requests by District regarding Services and shall make every effort to comply with these requests. The Parties shall cooperate and work with each other through their designated liaisons on matters pertaining to the performance of Services under this Agreement and envisaged reimbursements therein. Discretion as to County related work practices and the method of delivering Services hereunder lies solely with OEM.

County agrees to keep accurate records of the Services and expenditures related to all Services provided to the District pursuant to this Agreement. Upon request, County agrees to make available to the District its books and records of such Services and expenditures for its review and

inspection at a mutually agreeable time, to the full extent allowed by law.

Article IV.

It is further understood and agreed that this Agreement is not intended (nor shall it be construed) to obligate County in any manner whatsoever outside of the agreed to Services herein, and that the County shall have no liability whatsoever to District other than to refund the money paid by District to the County pursuant to this Agreement if County does not assign the MRC Coordinator, as desired by District and paid hereunder, to devote substantially one hundred percent (100%) of his Working Time to the Services. If the currently employed MRC Coordinator is removed from such assignment, or if for some other reason the individual employed as MRC Coordinator at any time during the course of this Agreement is replaced, the County shall ensure that the replacement continues the Services as agreed to herein.

No debt shall be incurred by County or District under and pursuant to this Agreement. To the extent either party's performance under this Agreement is, or later becomes, dependent upon appropriation of funding, notwithstanding anything to the contrary herein, if the governing body of the party(ies) hereto, fails to appropriate funding for this Agreement during budget planning and adoption of the budget for any of the following fiscal year(s) from the effective date of this Agreement, Montgomery County may terminate this Agreement upon thirty (30) days written notice to District and/or District may terminate this Agreement upon thirty (30) days written notice to Montgomery County. Said failure to provide funding for this Agreement, and consequent termination of the Agreement, shall not by itself be deemed or construed as a default or breach by either party under this Agreement, but all previously incurred expenditures with District's associated payment obligations, and any refund obligations, under this Agreement shall survive termination.

Article V.

A. It is expressly understood and agreed that the period or term of this Agreement may be terminated at the discretion of either party with a thirty (30) days written notice to the other, with or without cause.

B. Any notice required to be given hereunder may be delivered to the County at the Office of the County Judge, 501 N. Thompson, Suite 401, Conroe, Texas, 77301 with a copy to Montgomery County Attorney, 501 N. Thompson, Suite 300, Conroe, Texas, 77301; and to District at 1300 South Loop 336 West, Conroe, Texas 77304. Required notices hereunder shall be hand-delivered or sent by certified mail return receipt requested.

C. If the period or term of this Agreement is terminated at any time other than at the end of the contract month, the monthly portion or payment for such contract month shall be prorated.

D. This Agreement is to commence on the date of execution stated herein below with Services and reimbursement hereto to commence at the start of the assigned MRC Coordinator's pay period i.e. February 18, 2023, pursuant to Commissioners Court prior action on January 24, 2023, and shall continue in effect until the earlier of March 31, 2024 or date of early termination, if terminated with or without cause by either party, with a thirty (30) days written notice to the

other. In any event, County may terminate this Agreement due to the lapse or unavailability of Grant funding in amounts necessary to carry out County's duties as set forth herein.

E. The terms and provisions of this Agreement constitute the entire agreement between the County and District, and no modification of this Agreement shall be effective unless in writing, signed by both Parties.

F. Both Parties shall comply with all applicable laws in relation to this Agreement. This Agreement shall be governed by the laws of the State of Texas. Venue for any claims arising out of or related to this Agreement shall be in a court of competent jurisdiction in Montgomery County, Texas.

G. If any provision of this Agreement shall be deemed void, illegal, or otherwise unenforceable for any reason, such provision shall be severed from the remainder of the Agreement, which shall remain in full force and effect.

H. This Agreement supersedes all other agreements between the Parties currently in effect specifically related to the subject matters covered by this Agreement. The Parties hereby terminate all other such agreements not yet expired and waive against each other any claims or remedies they may have under such agreements, except that invoices received after this Agreement commences for services performed before this Agreement commences shall be issued, processed, and paid as if the former agreements had not been terminated.

I. The Parties shall each maintain customary insurance coverages, applicable to Services under this Agreement throughout the Agreement's course, and County further reserves and expressly states all available protections under Sec. 421.062 (a) through (c), Texas Gov't. Code as described below:

County, when furnishing Services related to a homeland security activity under an interlocal contract, is immune from civil liability for any act or omission resulting in death, damage, or injury while acting under the interlocal contract if:

"(1) the interlocal contract expressly states that the furnishing state or local agency is not responsible for any civil liability that arises from the furnishing of a service under the contract; and

(2) the state or local agency committed the act or omission while acting in good faith and in the course and scope of its functions to provide a service related to a homeland security activity.

(c) This section may not be interpreted as a waiver of any immunity that might exist in the absence of an interlocal contract or a provision in an interlocal contract as set forth in Subsection (b)." (Sec. 421.062 (b)(1) through (c), Texas Gov't. Code)

IN NO EVENT SHALL EITHER PARTY HEREIN BE DEEMED TO HAVE WAIVED ANY IMMUNITY, DEFENSE OR LIABILITY CAP AVAILABLE TO IT BY LAW.

[Remainder of this page intentionally left blank; signature page to follow.]

Executed and made effective on the _____ day of _____, 2023.

MONTGOMERY COUNTY, TEXAS

By: _____
Mark J. Keough, County Judge

**MONTGOMERY COUNTY PUBLIC HEALTH
DISTRICT**

By: _____
Name: _____
Title: _____

Attest:

L. Brandon Steinmann, County Clerk

Agenda Item # 10

To: MCPHD Board of Directors

From: Melissa Miller, COO

Date: March 9, 2023

Re: Amendment V



Consider and act on Amendment Number V to the Interlocal Agreement between Montgomery County Hospital District and the Montgomery County Public Health District for Provision of Public Health Services. (Melissa Miller, COO – MCHD)

**AMENDMENT NUMBER ~~FOUR-FIVE~~ TO
INTERLOCAL AGREEMENT BETWEEN
MONTGOMERY COUNTY HOSPITAL DISTRICT
AND THE MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT FOR
PROVISION OF PUBLIC HEALTH SERVICES**

This Amendment Number ~~Four-FIVE~~ (IV) to Interlocal Agreement Between Montgomery County Hospital District And The Montgomery County Public Health District For Provision of Public Health Services (hereinafter “Amendment ~~35~~”) amends and supplements the Interlocal Agreement entered into by and between the Montgomery County Public Health District (hereinafter “MCPHD”), and the Montgomery County Hospital District, (hereinafter “MCHD”) entered into on July 30, 2010 in the following respects:

1. Sections 3.1 and 3.2 of the Agreement are hereby superseded and replaced with the following:

3.1 **Employee Positions to be assumed by MCHD.** MCHD will create, assume and manage employee positions in health-related areas subject of this Agreement. These employees are in MCPHD positions that will terminate at the end of grant funding and are identified as follows:

1. Public Health Director – 1 FTE – 0.5 CPS/Hazards Grant and 0.5 1115 Waiver
2. Epidemiologist - 2 FTEs – CPS/Hazards Grant
3. Epidemiologist – 1 FTE- IDCU Grant
4. Public Health Preparedness Coordinator - 1 FTE- CRI Grant
5. ~~Medical Reserve Corps Coordinator – 1 FTE – UASI Grant~~
5. Nurse for Immunizations and STDs – 1 FTE –LPHS Grant, 1115 Waiver funds and Clinic Revenue
- 6.7. Clinic Clerk – 1 FTE - County and Clinic Revenue
- 7.8. Tuberculosis RN Case Manager – 1 FTE – 1115 Waiver
- 8.9. 1115 Waiver and Clinic Coordinator - 1 FTE – 1115 Waiver
9. COVID Response Manager- 1FTE- COVID Workforce Grant
10. COVID-19 Epidemiology Analyst – 1 FTE -COVID Workforce Grant Coag. Grant– terms March 2022
11. COVID-19 Epidemiology Assistant – 1 FTE-COVID Workforce Grant Coag. Grant– terms March 2022
12. COVID-19 Epidemiologist Specialist(s) – 24 FTEs- Expansion IDCU/-COVID-19 Grant-Coag. Grant– terms March 2022
13. ~~COVID-19 Epidemiologist – 2 FTEs – COVID IDCU Grant terms April 2022~~
Community Outreach Specialist(s) – 2 FTEs- COVID-19 Disparities Grant

The following MCPHD positions will be filled by contracted physician(s):

1. Local Health Authority
2. Clinic Medical Director

~~The Texas 1115 Medicaid Waiver Community Paramedicine positions will be provided by MCHD via subcontract with MCPHD are:~~

- ~~1. Community Paramedicine Case Manager(s)~~
- ~~2. Community Paramedic(s)~~

In addition, the following MCHD employees support MCPHD operations:

1. Randy Johnson – Executive Director – MCHD funded
2. Melissa Miller – COO - MCHD funded
3. Brett Allen – CFO – MCHD funded

It is further agreed by the parties that from time to time MCHD shall provide such other personnel as necessary to perform functions related to the services provided by the MCPHD.

3.2 Grant Funded Positions. The Parties acknowledge that MCPHD employee positions are currently funded by one or more of the following sources: grants from the Texas Department of State Health Services (DSHS); Public Health Emergency Preparedness; Cities Readiness Initiative and Local Public Health Services; ~~Urban Area Security Initiative~~; Public Health Crisis Response in support of Coronavirus; revenue from fees for public health clinical services; remaining funding from the MCPHD's participation in the Texas Medicaid 1115 Waiver program; and the COUNTY contribution to local health services.. To the extent possible, MCPHD will apply for grant funding for the continuation of services subject of this Agreement. ~~In addition, MCPHD will continue to participate in the Texas Medicaid 1115 Waiver program. It is anticipated that the Community Paramedicine initiative will be funded from the Texas Medicaid 1115 Waiver program funds received by MCPHD.~~ Both Parties agree to assist, cooperate, and help each other in pursuing grant funding and other sources of federal and state funding to reimburse MCHD for its costs for the positions identified in "Exhibit A" for each year of this Agreement. MCHD agrees that, in accordance with the provisions of any and all grant agreements or grant awards from federal and state agencies or other grant sources, MCHD as subcontractor to MCPHD in performing MCPHD duties and functions, will provide services as required under the applicable grant provisions.

2. A new section 3.2.1 is added to the Agreement as follows:

3.2.1 MCPHD and MCHD agree that MCPHD will reimburse MCHD for the personnel costs for those persons listed in section 3.1 above for the services they provide for and on MCPHD's behalf. The anticipated costs for such services are set forth in "Exhibit B" appended hereto and are mutually agreed upon by the Parties as being fair and reasonable. During the term of this Agreement, including any renewal terms, MCHD

shall be entitled to periodically reimburse itself for the personnel costs of those persons listed in section 3.1 above from funds of the MCPHD, but shall provide the MCPHD Founding Members an accounting of such reimbursements at each meeting of the MCPHD for review and ratification. "Exhibit A" and "Exhibit B" may be amended from time to time by written amendments approved by the Parties governing boards.

3. Except as amended by this Amendment IV, the terms and conditions of the Agreement shall remain in force and effect.

Effective Date. This Amendment IV shall be effective on the 1st day of , 20234 regardless of when approved or executed by the Parties and their representatives whose names appear below.

MONTGOMERY COUNTY
HOSPITAL DISTRICT

MONTGOMERY COUNTY
PUBLIC HEALTH DISTRICT
BOARD CHAIRMAN

Randy Johnson,
Chief Executive Officer

Judge Mark Keough
Chairman

Attest:

**AMENDMENT NUMBER FIVE TO
INTERLOCAL AGREEMENT BETWEEN
MONTGOMERY COUNTY HOSPITAL DISTRICT
AND THE MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT FOR
PROVISION OF PUBLIC HEALTH SERVICES**

This Amendment Number FIVE (V) to Interlocal Agreement Between Montgomery County Hospital District And The Montgomery County Public Health District For Provision of Public Health Services (hereinafter "Amendment 5") amends and supplements the Interlocal Agreement entered into by and between the Montgomery County Public Health District (hereinafter "MCPHD"), and the Montgomery County Hospital District, (hereinafter "MCHD") entered into on July 30, 2010 in the following respects:

1. Sections 3.1 and 3.2 of the Agreement are hereby superseded and replaced with the following:

3.1 **Employee Positions to be assumed by MCHD.** MCHD will create, assume and manage employee positions in health-related areas subject of this Agreement. These employees are in MCPHD positions that will terminate at the end of grant funding and are identified as follows:

1. Public Health Director – 1 FTE – 0.5 CPS/Hazards Grant and 0.5 1115 Waiver
2. Epidemiologist - 2 FTEs – CPS/Hazards Grant
3. Epidemiologist – 1 FTE- IDCU Grant
4. Public Health Preparedness Coordinator - 1 FTE- CRI Grant
5. Nurse for Immunizations and STDs – 1 FTE –LPHS Grant, 1115 Waiver funds and Clinic Revenue
- 6.. Clinic Clerk – 1 FTE - County and Clinic Revenue
- 7.. Tuberculosis RN Case Manager – 1 FTE – 1115 Waiver
8. 1115 Waiver and Clinic Coordinator - 1 FTE – 1115 Waiver
9. COVID Response Manager- 1FTE- COVID Workforce Grant
10. COVID-19 Epidemiology Analyst – 1 FTE -COVID Workforce Grant
11. COVID-19 Epidemiology Assistant – 1 FTE-COVID Workforce Grant
12. COVID-19 Epidemiologist Specialist(s) – 2 FTEs- Expansion IDCU/COVID-19 Grant
13. Community Outreach Specialist(s) – 2 FTEs- COVID-19 Disparities Grant

The following MCPHD positions will be filled by contracted physician(s):

1. Local Health Authority
2. Clinic Medical Director

In addition, the following MCHD employees support MCPHD operations:

1. Randy Johnson – Executive Director – MCHD funded

2. Melissa Miller – COO - MCHD funded
3. Brett Allen – CFO – MCHD funded

It is further agreed by the parties that from time to time MCHD shall provide such other personnel as necessary to perform functions related to the services provided by the MCPHD.

3.2 Grant Funded Positions. The Parties acknowledge that MCPHD employee positions are currently funded by one or more of the following sources: grants from the Texas Department of State Health Services (DSHS); Public Health Emergency Preparedness; Cities Readiness Initiative and Local Public Health Services;; Public Health Crisis Response in support of Coronavirus; revenue from fees for public health clinical services; remaining funds from the MCPHD's participation in the Texas Medicaid 1115 Waiver program; and the COUNTY contribution to local health services.. To the extent possible, MCPHD will apply for grant funding for the continuation of services subject of this Agreement. Both Parties agree to assist, cooperate, and help each other in pursuing grant funding and other sources of federal and state funding to reimburse MCHD for its costs for the positions identified in "Exhibit A" for each year of this Agreement. MCHD agrees that, in accordance with the provisions of any and all grant agreements or grant awards from federal and state agencies or other grant sources, MCHD as subcontractor to MCPHD in performing MCPHD duties and functions, will provide services as required under the applicable grant provisions.

2. A new section 3.2.1 is added to the Agreement as follows:

3.2.1 MCPHD and MCHD agree that MCPHD will reimburse MCHD for the personnel costs for those persons listed in section 3.1 above for the services they provide for and on MCPHD's behalf. The anticipated costs for such services are set forth in "Exhibit B" appended hereto and are mutually agreed upon by the Parties as being fair and reasonable. During the term of this Agreement, including any renewal terms, MCHD shall be entitled to periodically reimburse itself for the personnel costs of those persons listed in section 3.1 above from funds of the MCPHD, but shall provide the MCPHD Founding Members an accounting of such reimbursements at each meeting of the MCPHD for review and ratification. "Exhibit A" and "Exhibit B" may be amended from time to time by written amendments approved by the Parties governing boards.

3. Except as amended by this Amendment V, the terms and conditions of the Agreement shall remain in force and effect.

Effective Date. This Amendment V shall be effective on the ____ day of, ____ 2023 regardless of when approved or executed by the Parties and their representatives whose names appear below.

MONTGOMERY COUNTY

MONTGOMERY COUNTY

HOSPITAL DISTRICT

Randy Johnson,
Chief Executive Officer

PUBLIC HEALTH DISTRICT
BOARD CHAIRMAN

Judge Mark Keough
Chairman

Attest:

DRAFT

Agenda Item # 11

To: MCPHD Board of Directors

From: Randy Johnson, Executive Director

Date: March 9, 2023

Re: Acknowledgement of board positions



Acknowledgement of our appointed Schools, Large Cities and MCHD board member representatives to the Public Health District board.

Agenda Item # 12

To: MCPHD Board of Directors
From: Randy Johnson, Executive Director
Date: March 9, 2023
Re: **Annual Chair Positions**



Consider and act on election of annual chair positions.

- Chairman
- Vice-Chairman
- Secretary/Treasurer

**MINUTES OF A REGULAR MEETING
OF THE BOARD OF DIRECTORS
MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT**

The regular meeting of the Board of Directors of Montgomery County Public Health District was duly convened at 3:30 p.m., November 3, 2022 in the Administrative offices of the Montgomery County Hospital District, 1400 South Loop 336 West, Conroe, Montgomery County, Texas.

1. Call to Order

Meeting called to order at 3:30 p.m.

2. Roll Call

Board Members present

Dr. Curtis Null, Conroe Independent School District, Vice Chairman
Justin Chance, MCHD Board of Directors, Secretary/Treasurer
Judge Mark Keough, Montgomery County Judge, Chairman
Mayor Lynn Scott, City of Panorama Village
Dr. Richard Calvin, City of Conroe, *arrived at 3:34 p.m.*

Non-Voting members present:

Randy Johnson, Montgomery County Public Health District, Executive Director
Dr. Charles Sims, MD, Local Health Director for Public Health District

3. Invocation

Mr. Larry Forester

4. Pledge of Allegiance

Mr. Larry Forester

5. Public Comments

No one made a comment from the public.

6. Special Recognition

Mr. Justin Chance, MCHD board representative was recognized for his service on the Montgomery County Public Health District board from March, 2021 to December, 2022.

7. Approval of Minutes from September 8, 2022 Public Health District Regular Board meeting.

Dr. Null made a motion to approve the minutes from the September 8, Public Health District Regular Board meeting. Mayor Scott offered a second and motion passed unanimously.

8. Report on activities related to Public Health, Epidemiology and Emergency Preparedness. (Melissa Miller, COO – MCHD)

Mrs. Melissa Miller, COO MCHD presented a report to the board on activities related to Public health Epidemiology and Emergency Preparedness.

9. Consider and act on ratification to approve submission of the PH Workforce COVID-19 grant extension for the Montgomery County Public Health District. (Melissa Miller, COO – MCHD)

Judge Keough has requested we table agenda item no. 9 for a future meeting.

10. Consider and act on ratification to approve submission of the IDCU/COVID-19 grant extension for the Montgomery County Public Health District. (Melissa Miller, COO – MCHD)

Mr. Chance made a motion to consider and act on ratification to approve submission of the IDCU/COVID-19 grant extension for the Montgomery County Public Health District. Mayor Scott offered a second and motion passed unanimously.

11. Consider and act on resolution to approve submission of the UASI grant application for the Montgomery County Public Health District Community Preparedness Project. (Melissa Miller, COO – MCHD)

Mr. Chance made a motion to consider and act on resolution to approve submission of the UASI grant application for the Montgomery County Public Health District Community Preparedness Project. Dr. Calvin offered a second and motion passed unanimously.

12. Consider and act on resolution to approve submission of the UASI grant application for the Montgomery County Public Health District Travel and Conference. (Melissa Miller, COO – MCHD)

Dr. Calvin made a motion to consider and act on resolution to approve submission of the UASI grant application for the Montgomery County Public Health District Travel and Conference. Mr. Chance offered a second and motion passed unanimously.

13. Consider and act on resolution to approve submission of the UASI grant application for the Montgomery County Public Health District M&A. (Melissa Miller, COO – MCHD)

Mr. Chance made a motion to consider and act on resolution to approve submission of the UASI grant application for the Montgomery County Public Health District M&A. Dr. Calvin offered a second and motion passed unanimously.

14. Review and approve financial report regarding District's operations. (Brett Allen, CFO – MCHD)

Mr. Brett Allen, CFO presented the financials to the board.

Dr. Calvin made a motion to accept the financial report regarding District's operations. Dr. Null offered a second and motion passed unanimously.

15. Consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2022. (Brett Allen, CFO – MCHD) (attached)

Mr. Chance made a motion to consider and act upon recommendation for amendment(s) to the budget fiscal year ending September 30, 2022. Dr. Calvin offered a second and motion passed unanimously.

16. Consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2023. (Brett Allen, CFO - MCHD)

Mr. Chance made a motion to consider and act upon recommendation for amendment(s) to the budget fiscal year ending September 30, 2023. Dr. Calvin offered a second and motion passed unanimously.

17. Consider and act on ratification of payment of invoices related to expenditures. (Brett Allen, CFO – MCHD)

Mr. Chance made a motion to approve ratification of payment of invoices related to expenditures. Dr. Calvin offered a second. After board discussion the motion passed unanimously.

18. Consider and approve a job description of the Transition Manager, relating to operations of Public Health. (Jason Millsaps – Montgomery County)

Judge Keough addressed the board on a Transition position for Jason Millsaps and a job description as follows:

1. In this role, the TM will work with the current management team to oversee day-to-day operations.
2. The TM will have the responsibility to act as the BOD's agent for the matter related to or concerning, employees and financial matters to include revenue and expenses.
3. The TM will collaborate and work with any necessary entity/employee internal and external to ensure a seamless transition.
4. The TM will act as point person for the development and direction of a transition, with the assistance of any PHD, MCHD/management and county entities.
5. The TM will have a broad range of responsibility as acting agent with the authority of the board of directors until modified or rescinded.
6. TM will give reports to the Chairman frequently and prepare updated reports for the entire board for each called session.
7. The TM will serve without compensation from the Public Health District.

Mr. Chance approved the Transition Manager Job description for Jason Millsaps presented by Judge Keough. Dr. Null offered a second. After board discussion motion passed unanimously.

Mr. Leonard Schneider advised the board of potential concerns as part of the transition. Judge Keough advised that Jason's job is to get the district the best deal for the least amount of money, within a timeframe that we can either stand alone or go with the county.

19. Discussion of possible relocation and rent of new office space for the health district. (Jason Millsaps – Montgomery County)

Jason advised the board he would get options on new office space together and present to the board at the meeting hopefully in January, 2023. This would give plenty of time next year to transition office space during the process.

20. Discussion of steps and procedures to relocate and change management oversight of MRC Coordinator and Community Preparedness Coordinator to Montgomery County HSEM, including all PHD owned and inventoried items in storage to Montgomery County HSEM. (Jason Millsaps – Montgomery County)

Jason Millsaps advised the board that OEM could absorb in their emergency management office space the MRC Coordinator and Community Preparedness Coordinator positions along with storage. The County would give them an office and key. Melissa Miller advised the concern is the management oversight and her suggestions would be a management agreement with the Public Health district removing these positions from the MCHD management agreement.

21. Consider and act on future meeting dates for 2023. (Randy Johnson, CEO – MCHD)

The recommendation and agreement was for the board to meet on the 2nd Thursday of every month.

22. Discussion of items to be placed on agenda of the next meeting of the Montgomery County Public Health District Board of Directors.

- Next board meeting is scheduled for January 12, 2023
- Mr. Chance recommended the MCHD Representative be changed to any citizen of Montgomery County.
- Management agreement with Jason Millsaps.

23. Adjourn

Meeting adjourned at 4:24 p.m.

**MINUTES OF A REGULAR MEETING
OF THE BOARD OF DIRECTORS
MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT**

The regular meeting of the Board of Directors of Montgomery County Public Health District was duly convened at 3:30 p.m., January 12, 2023 in the Administrative offices of the Montgomery County Hospital District, 1400 South Loop 336 West, Conroe, Montgomery County, Texas.

1. Call to Order

Meeting called to order at 3:30 p.m.

2. Roll Call

Board Members present

Mayor Lynn Scott, City of Panorama Village
Judge Mark Keough, Montgomery County Judge, Chairman
Dr. Richard Calvin, City of Conroe
Dr. Curtis Null, Conroe Independent School District, Vice Chairman

Board Members not present

Dr. Richard Calvin, City of Conroe

Non-Voting members present:

Randy Johnson, Montgomery County Public Health District, Executive Director

Non-Voting members not present:

Dr. Charles Sims, MD, Local Health Director for Public Health District

3. Invocation

Mr. Larry Foerster

4. Pledge of Allegiance

Mr. Larry Foerster

5. Public Comments

No one made a comment from the public.

6. Acknowledgement of appointed MCHD member representative to the Public Health District board.

Judge Keough and Mr. Randy Johnson acknowledged the appointment of:

- Mr. Chris Grice, MCHD board representative (*Interim*)

7. Discuss and take action on the proposed management of the Montgomery County Public Health District. (Pct. 3 Commissioner James Noack, County Representative)

Judge Keough deferred agenda item to a future Public Health District board meeting at the request of Commissioner Noack.

8. Update, discuss and take action on the management transition. (Jason Millsaps, Transition Manager)

Mr. Jason Millsaps, Transition Manager gave an update to the board.

9. Suspend billing for Patient Clinical encounters, Care/Resource Coordination and Addiction Care Navigation under the Community Paramedicine Services Interlocal Agreement. (Melissa Miller)

Mrs. Melisa Miller, COO of MCHD advised the board that the agenda item to suspend billing for Patient Clinical encounters, Care/Resource Coordination and Addiction Care Navigation under the Community Paramedicine Services Interlocal Agreement would be taken to the MCHD board in January, 2023.

10. Consider, discuss and take appropriate action on the contracting of an external auditor for audit services. (Jason Millsaps, Transition Manager)

Mr. Jason Millsaps requested the board allow him to contract an external auditor for audit services not to exceed \$50,000.00.

Judge Keough made a motion to consider and act on Jason Millsaps contracting an external auditor for audit services not to exceed \$50,000.00. Mayor Scott offered a second. After board discussion motion passed unanimously.

11. Consider and act on the next Public Health District meeting date.

Next Public Health District board meeting is scheduled for February 16, 2023

12. Discussion of items to be placed on agenda of the next meeting of the Montgomery County Public Health District Board of Directors.

- Public Health Transition updates
- External Auditor update.
- *Appoint Schools and Large Cities – March board meeting.*

13. Adjourn

Meeting adjourned at 3:59 p.m.

**MINUTES OF A REGULAR MEETING
OF THE BOARD OF DIRECTORS
MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT**

The regular meeting of the Board of Directors of Montgomery County Public Health District was duly convened at 3:30 p.m., February 16, 2023 in the Administrative offices of the Montgomery County Hospital District, 1400 South Loop 336 West, Conroe, Montgomery County, Texas.

1. Call to Order

Meeting called to order at 3:30 p.m.

2. Roll Call

Board Members present

Steven U. Parker, City of Panorama Village – *Acknowledged as Interim board member on agenda item 6.*
Judge Mark Keough, Montgomery County Judge, Chairman
Chris Grice, MCHD
Dr. Curtis Null, Conroe Independent School District, Vice Chairman
Dr. Richard Calvin, City of Conroe

Board Members not present

Mayor Lynn Scott, City of Panorama Village

Non-Voting members present:

Randy Johnson, Montgomery County Public Health District, Executive Director

Non-Voting members not present:

Dr. Charles Sims, MD, Local Health Director for Public Health District

3. Invocation

Mr. Randy Johnson

4. Pledge of Allegiance

Mr. Randy Johnson

5. Public Comments

No one made a comment from the public.

6. Acknowledgement of appointed Small Cities member representative to the Public Health District board.

Judge Keough acknowledged the interim appointment of Mr. Steven Parker, Small Cities – City of Panorama Village.

7. Discuss and take action on the proposed management of the Montgomery County Public Health District. (Pct. 3 Commissioner James Noack, County Representative)

Judge Keough deferred agenda item 7 to a future Public Health District board meeting.

8. Update, discuss and take action on the management transition. (Jason Millsaps, Transition Manager)

Mr. Jason Millsaps, Transition Manager advised no update on the management transition at this time.

9. Consider, discuss and take appropriate action on the contracting of an external auditor for audit services. (Jason Millsaps, Transition Manager)

Mr. Jason Millsaps advised the board that an engagement letter had been signed by him with Pattillo, Brown & Hill, L.L.P. on February 11, 2023. The engagement letter is for \$125.00 an hour for the audit of Public Health. The board was also advised the firm would need approximately 40 hours to interview Staff and Executives just to develop a strategy to begin the Public Health audit. Jason Millsaps confirmed to the Board that this amount on the development of a strategy is part of the planned amount for the auditor. Jason requested the board memorialize and approve the engagement letter.

Dr. Calvin made a motion to approve the engagement letter. Mr. Grice Offered a second. After board discussion motion passed unanimously.

10. Consider and act on approval to move the UASI MRC grant from Montgomery County Public Health to the Office of Homeland Security/Emergency Management. (Jason Millsaps, Transition Manager)

Jason Millsaps advised the board the UASI MRC grant had been approved by Commissioners Court to be moved from Montgomery County Public Health to the Office of Homeland Security/Emergency Management.

Mr. Grice made a motion to approve the UASI MRC grant to move from Montgomery County Public Health to the Office of Homeland Security/Emergency Management. Dr. Calvin offered a second. After board discussion motion passed unanimously.

11. Discussion of items to be placed on agenda of the next meeting of the Montgomery County Public Health District Board of Directors.

Mr. Grice asked about what discussions were made with Commissioner Noack on Public Health and that the Hospital District was wanting to get moving on this. Judge Keough advised the Public Health District felt the same way. Leonard Schneider as legal counsel for the Public Health District as a point of order advised that agenda items 7 and 9 cover discussion which could continue. Judge Keough advised he did not want to continue discussion until such time a Commissioner Noack was in attendance.

- Public Health staff would like the board members to take a tour of the Public Health offices. This would be listed as an item on the March agenda.
- Public Health Transition updates.
- External Auditor update.

- Appoint Schools and Large Cities – March 9, 2023 board meeting.

12. Adjourn

Meeting adjourned at 3:49 p.m.

Agenda Item # 14

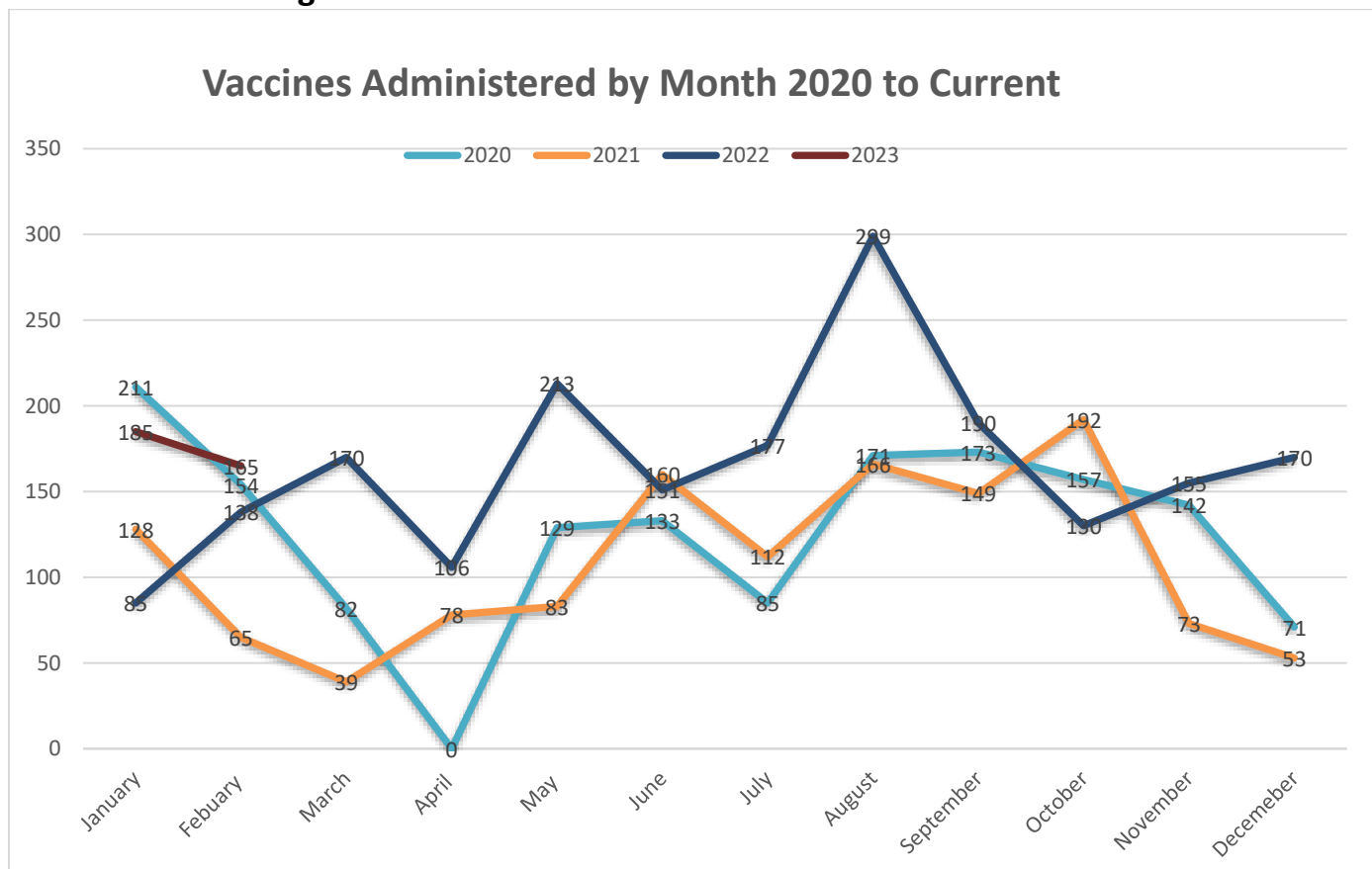
To: MCPHD Board of Directors
From: Alicia Williams
Date: March 9, 2023
Re: Public Health Clinic, Epidemiology, Medical Reserve Corp, and Emergency Preparedness

Note: Data for this board report was pulled prior to the end of February 2023.

Public Health Clinic:

In January 2023, MCPHD had a site visit from DSHS Immunizations. No out of compliance issues noted. A copy of the finding will follow this board report.

Immunizations Program:



*** Includes mpox vaccinations***

Sexually Transmitted Infection/Disease Program:

MCPHD provides screenings for Chlamydia, Gonorrhea, Syphilis, and HIV. Treatment follows our signed standing delegation orders based on CDC treatment guidelines. The following chart has the number of cases by condition treated per month. Treatment medications are provided by the DSHS pharmacy program at no cost to MCPHD. (HIV cases are referred out for treatment.)



TB Program:

	November 2022	December 2022	January 2023	February 2023
TB				
Number of active cases	12	15	16	12
Number of LTBI's	13	16	14	16
Number of EDNs	5	14	7	6
Number of Pending Referrals	2	0	1	2

TB patients generally require active treatment for TB for 9-12 months. They will have a directly observed therapy (DOT) worker go to their homes for the duration of their treatment 5 days a week to watch them take their medication. They come in to the public health department at least once a month for evaluation including labs and x-rays. The RN Case Manager orders all their medications from the state and prepares it for the DOT workers. These medicines can be very toxic and require close monitoring. Most all of our active TB cases also

have other complex issues including cancer, autoimmune disease, uninsured, no transportation and lack of social support network.

LTBI is a state of persistent immune response to stimulation by Mycobacterium tuberculosis antigens without evidence of clinically manifested active TB. These patients have been infected with the Tuberculosis germ but do not have active TB. They generally require 3-4 months of medications; some which are required to be given by DOT. They also require monthly assessments. It is much more cost effective to treat people who have been exposed vs. treating active TB.

Electronic Disease Notifications (EDN) are referrals from immigration. MCPHD is notified, by immigration, that someone from another country has arrived in our county, and there are concerns about TB symptoms or TB exposure. It is our responsibility to locate and assess these immigrants. Some are cleared and released. Others are treated. When the process is completed, we fill out a form that goes back to immigration and the state public health department describing what was done and status of immigrant related to TB.

For referrals, reports are received from various local providers and hospitals. These are in various stages of being ruled out or being processed for treatment.

As a reminder, all TB srvcies are provided at no costs to the patient. DSHS has contracted medical review by Dr. Brawner. Radiological services are covered by an outside provider which is contracted by DSHS.

Epidemiology Program

November 2022

General epidemiological investigation and surveillance of reported notifiable diseases and continued to attend weekly DSHS epidemiologist calls and share info sessions to remain informed regarding circulating infectious diseases both locally and nationally. The first week of November saw the highest number of Influenza A in Montgomery County since 2010, with 499 reported cases. Influenza-like Illnesses also saw highest reported since 2018. As a part of the national response to the Uganda Ebola outbreak, MCPHD had seven (7) Persons Under Monitoring (PUM), all travelers from Uganda, bringing the total to twelve (12) since the first notifications in October- all with no identifiable risk or low-risk individuals. No MPX cases. An outbreak of Salmonella in a family (4 family members and 1 nanny (out of jurisdiction)). One (1) Salmonella case with recent travels to Egypt and one (1) Cryptosporidium case with recent travel to Guadalajara. Varicella outbreak at Joe Corley Processing Center, with the first reported case on 11/21/2022.

MCPHD continued to see a plateaued number of COVID-19 cases, hospitalizations and deaths in Montgomery County until the end of November where cases and hospitalizations began to increase, as expected for this time of year. Omicron variant and its sub-lineages remain dominant and continue to circulate. The two Epidemiology Specialists, Epidemiology Assistant and Epidemiology Analyst actively monitor and complete investigations of high priority cases as required by DSHS (Department of State Health Services) which include COVID-19 hospitalizations, MIS-C cases (Multisystem Inflammatory Syndrome in Children), deaths, vaccine breakthroughs, variants and re-infection cases.

Community Outreach Specialist (COS) continued to attend and participate in events with partner organizations in Montgomery County providing educational material, including the developed MCPHD Community Resource Guidance document. COS co-hosted two focus groups on health disparities with Lone Star Family Health Center in West Magnolia and New Caney.

December 2022

MCPHD continued to see an increase in COVID-19 cases, hospitalizations and outbreaks throughout the month. Numerous outbreaks require ongoing mitigation and response. The epidemiology staff continued case investigations and epidemiological surveillance for high priority cases. Epidemiology specialists continued to monitor and report variants, vaccine breakthroughs, reinfections and deaths and work with the epidemiology analyst to de-duplicate and clean up data in order to submit for the 2021 CDC data close out. Additional data analysis is ongoing, with most recent viewing rates of cases, hospitalizations and deaths in zip codes of Montgomery County. Ongoing analysis will allow for risk assessment, case classification, visualization, and reporting locally and statewide.

General epidemiological investigation and surveillance of reported notifiable diseases remain ongoing. The Varicella outbreak at Joe Corley Processing Center ended, with the last case was reported on 12/28/2022. This outbreak involved a total of seven (7) cases with an age range of 20 to 41 years of age. Sick patients were isolated and those who were exposed were quarantined. Due to isolation and quarantine procedures in place the outbreak was controlled successfully and no additional cases were reported. One (1) outbreak of Shigella reported (1 in jurisdiction, 2 out of jurisdiction). Four (4) Salmonella cases acquired from out of jurisdiction – one (1) from Victoria, TX; one (1) from Canyon Lake, TX; two (2) from Mexico. Influenza B cases were reported at highest in the first two (2) weeks of December since 2010. Both Influenza A and Influenza-like Illnesses saw another wave, with reported cases decreasing by the end of the month. MCPHD had six (6) Persons Under Monitoring (PUM), all travelers from Uganda, bringing the total to eighteen (18) since the first notifications in October.

January 2023

General epidemiology did not have any reported outbreaks. The Uganda Ebola monitoring ended on 1/11/2023. A total of eighteen (18) individuals were monitored during this outbreak, all of which were no identifiable risk or low-risk individuals with an age range from 9 to 62 years old. One (1) Shigella from a cruise, with location not disclosed. One (1) reported Salmonella case from Indonesia, and two (2) deceased individuals tested positive for Salmonella. One (1) cryptosporidium likely acquired out of country. All influenza reports significantly decreased.

MCPHD began to see a plateaued number of COVID-19 cases and hospitalizations, however outbreaks throughout the county still prevalent in high-risk populations such as long term care facilities and nursing homes. Omicron variant and its sub-lineages remain dominant and continue to circulate, with BQ.1.1 remaining the most frequently detected SARS-COV-2 lineage in the county. Death reviews are ongoing, however primary death data shows significant decreased number of COVID-related deaths compared to previous years. The two Epidemiology Specialists, Epidemiology Assistant and Epidemiology Analyst actively monitor and complete investigations of high priority cases as required by DSHS (Department of State Health Services).

Community Outreach Specialist (COS) continued to attend and participate in outreach events with partner organizations in Montgomery County.

Health Disparities Report of Activities

November 2022

November 2: Attended the Behavioral Health and Suicide Prevention Gap Analysis Committee meeting.

November 5: Co-hosted a focus group in English and Spanish on health disparities in West Magnolia. COS facilitated the English session. Focus group was set up by Lone Star Family Health Center. Surveys were provided at the listening sessions and completed by participants.

November 8: Attended quarterly Infection Control Practitioner meeting at Memorial Hermann The Woodlands, hosted by MCPHD.

November 9: Attended the monthly DSHS Public Health Region 6/55 COVID-19 Health Disparities Grant Sharing Session with other LHD on the Health Disparities grant.

November 10: Attended and participated in the Behavioral Health and Suicide Prevention monthly taskforce meeting.

November 12: Co-hosted a focus group in English and Spanish on health disparities in East Montgomery County (New Caney). COS facilitated the English session. Focus group was set up by Lone Star Family Health Center. Surveys were provided at the listening sessions and completed by participants.

November 15: Attended and participated in the monthly Family and Community Coalition meeting. Shared resources and services MCPHD is providing the community in Montgomery County. Networked with twenty other community partners.

November 17: Attended the monthly Behavioral Health and Suicide Prevention meeting

December 2022

December 15: Participated in Opioid Overdose Training

December 19: Attended Mosaics of Mercy Resource Provider Hub Launch

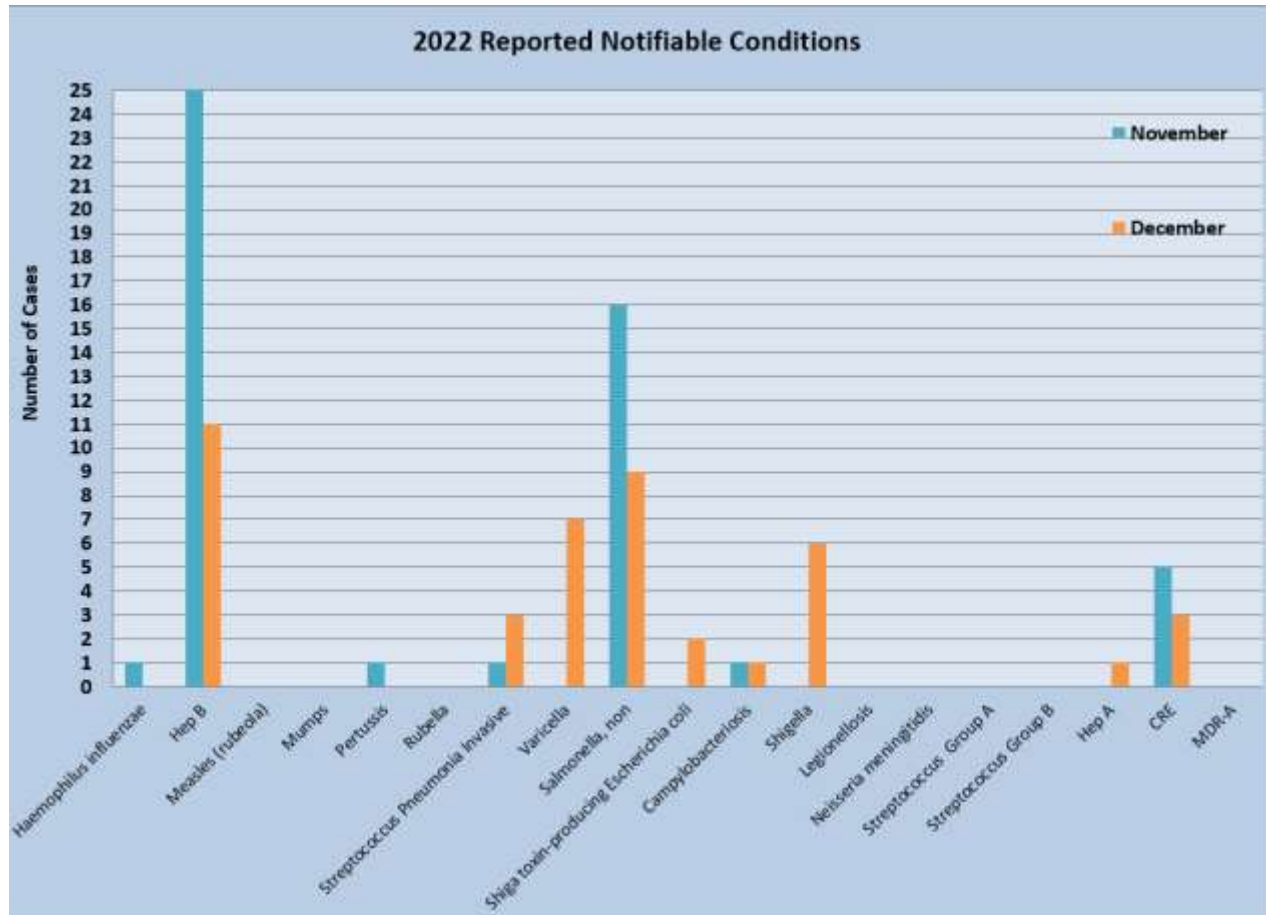
January 2022:

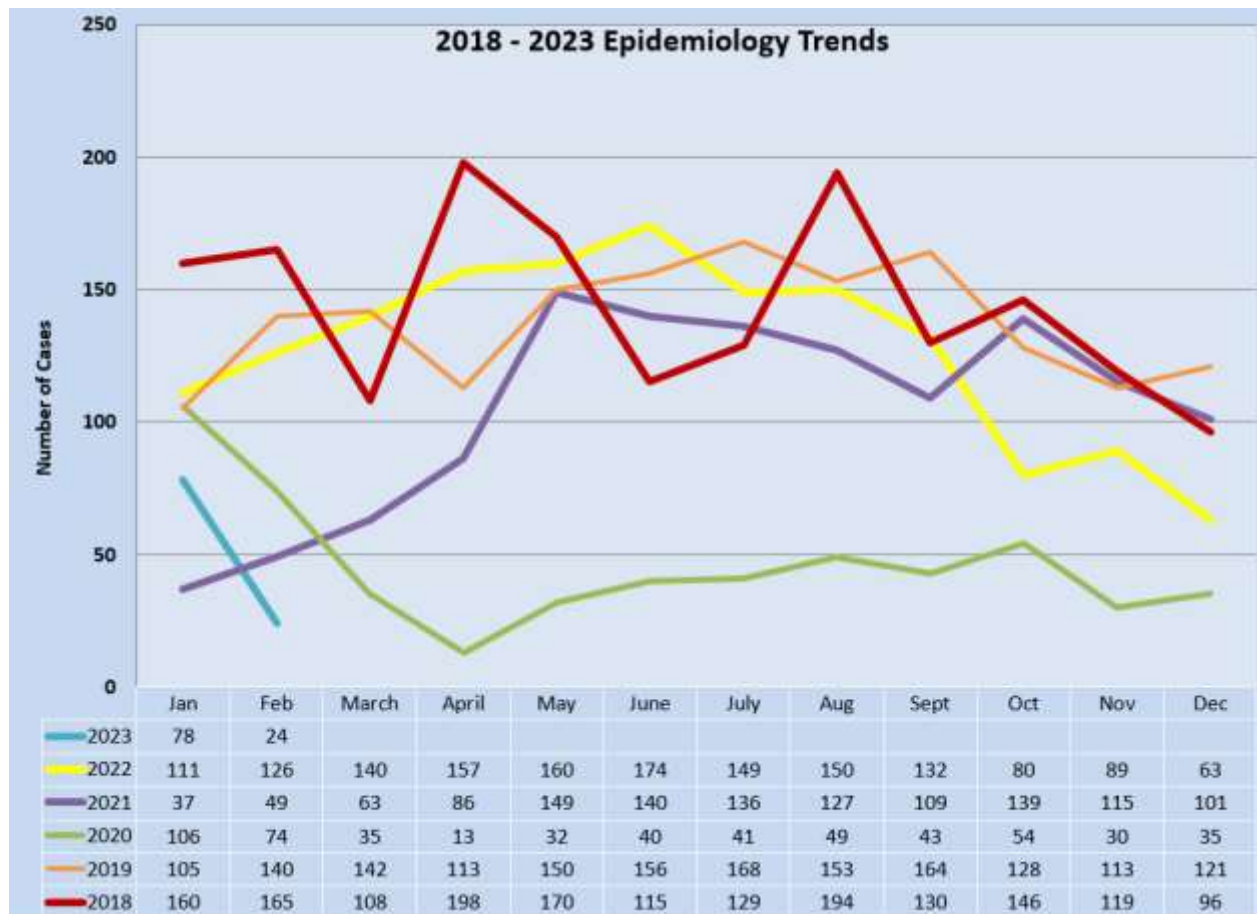
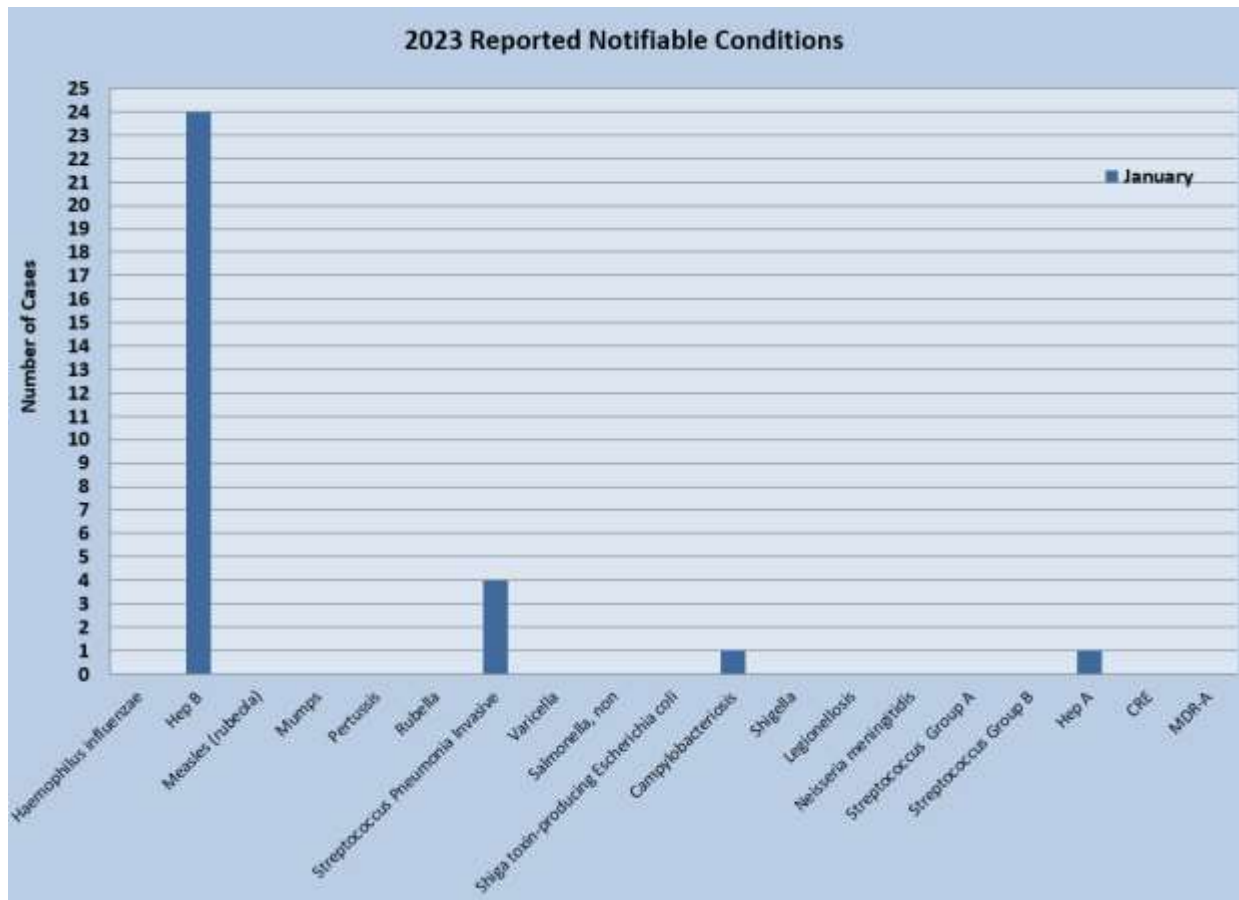
January 10: Attended and participated in the monthly Family and Community Coalition meeting. Shared resources and services MCPHD is providing the community in Montgomery County. Networked with 40 other community partners. In an effort to increase awareness in our local healthcare providers, Montgomery County Public Health District, in conjunction with local existing partnerships who work directly with trafficking survivors, hosted a free awareness session at MCPHD. The awareness session covered key red flags, local statistics, forensics, who to contact and resources available in the area. This session had participants from partner organizations

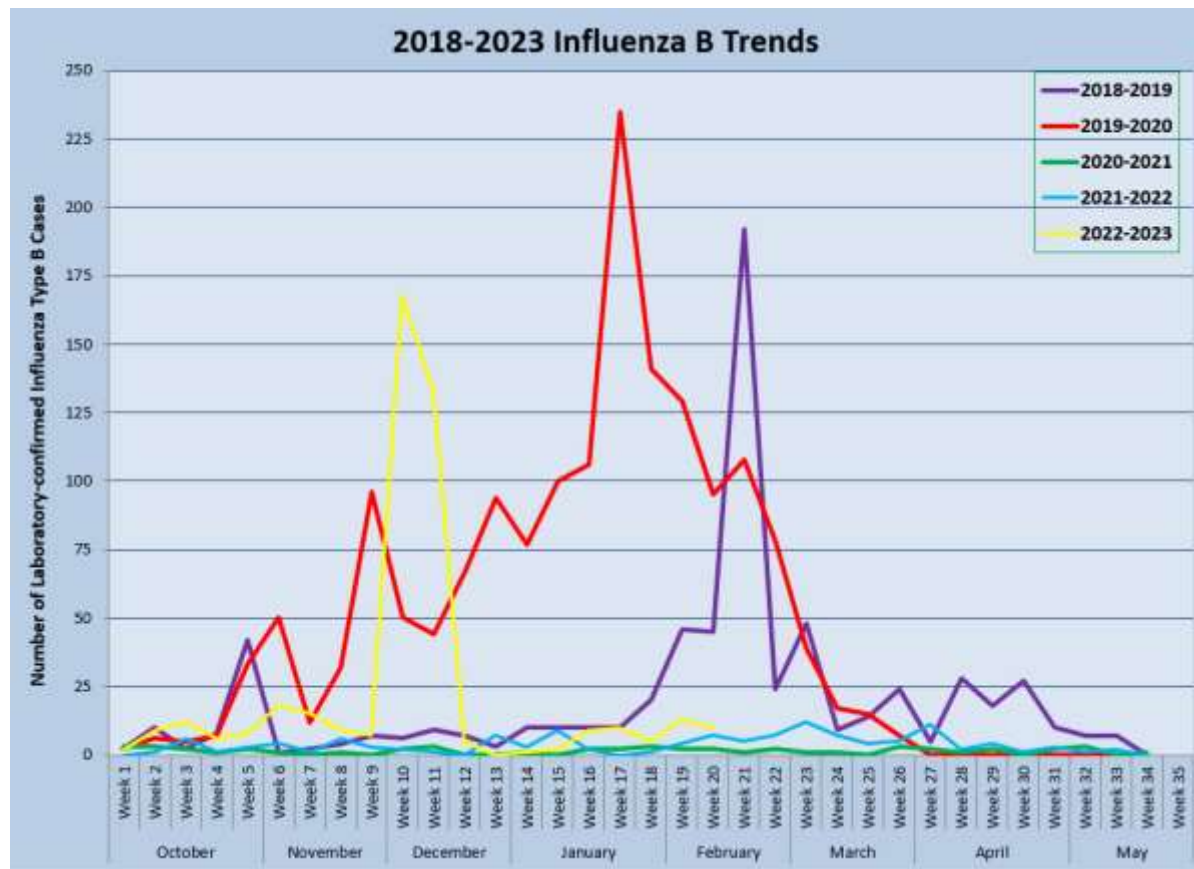
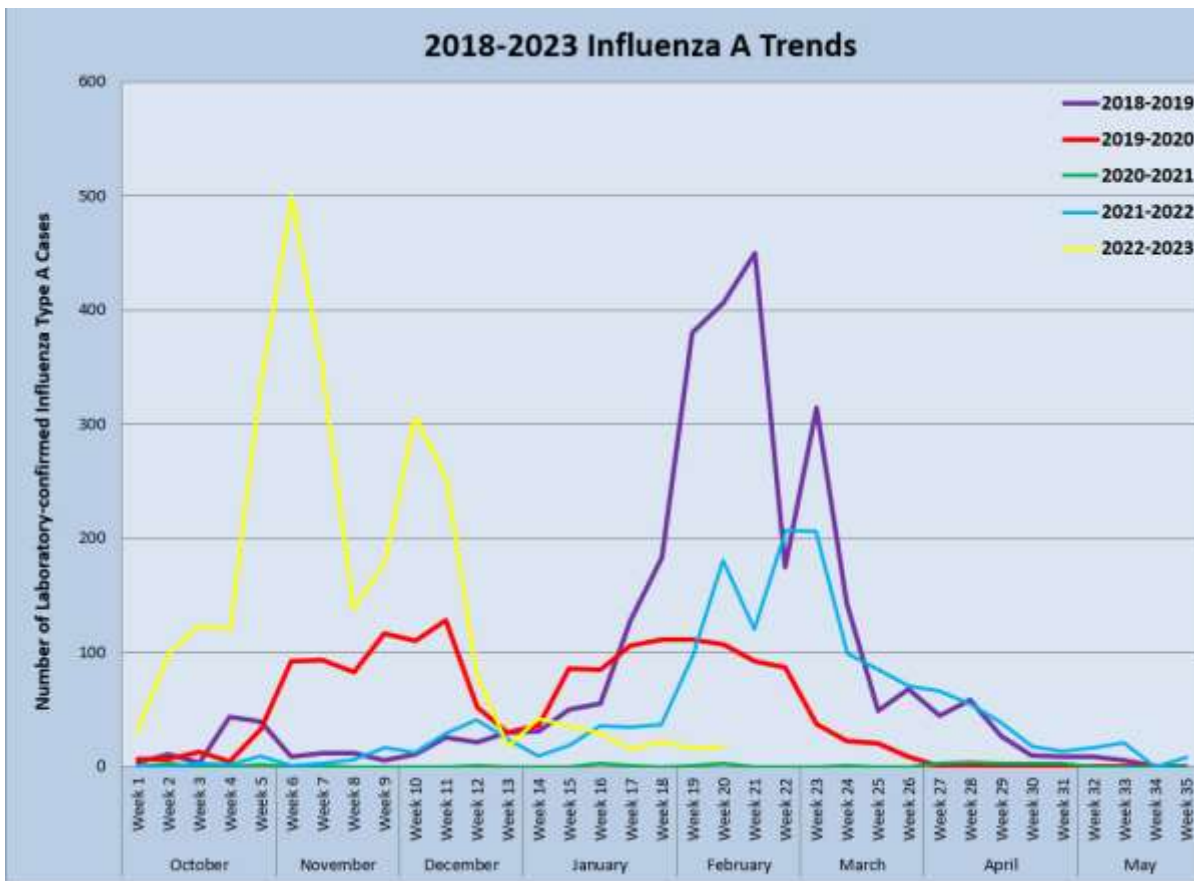
January 12: Participated and attended the monthly Behavioral Health and Suicide Prevention Workgroup: Resources and Implementation.

January 17: Attended the monthly DSHS Public Health Region 6/55 COVID-19 Health Disparities Grant Sharing Session with other LHD on the Health Disparities grant.

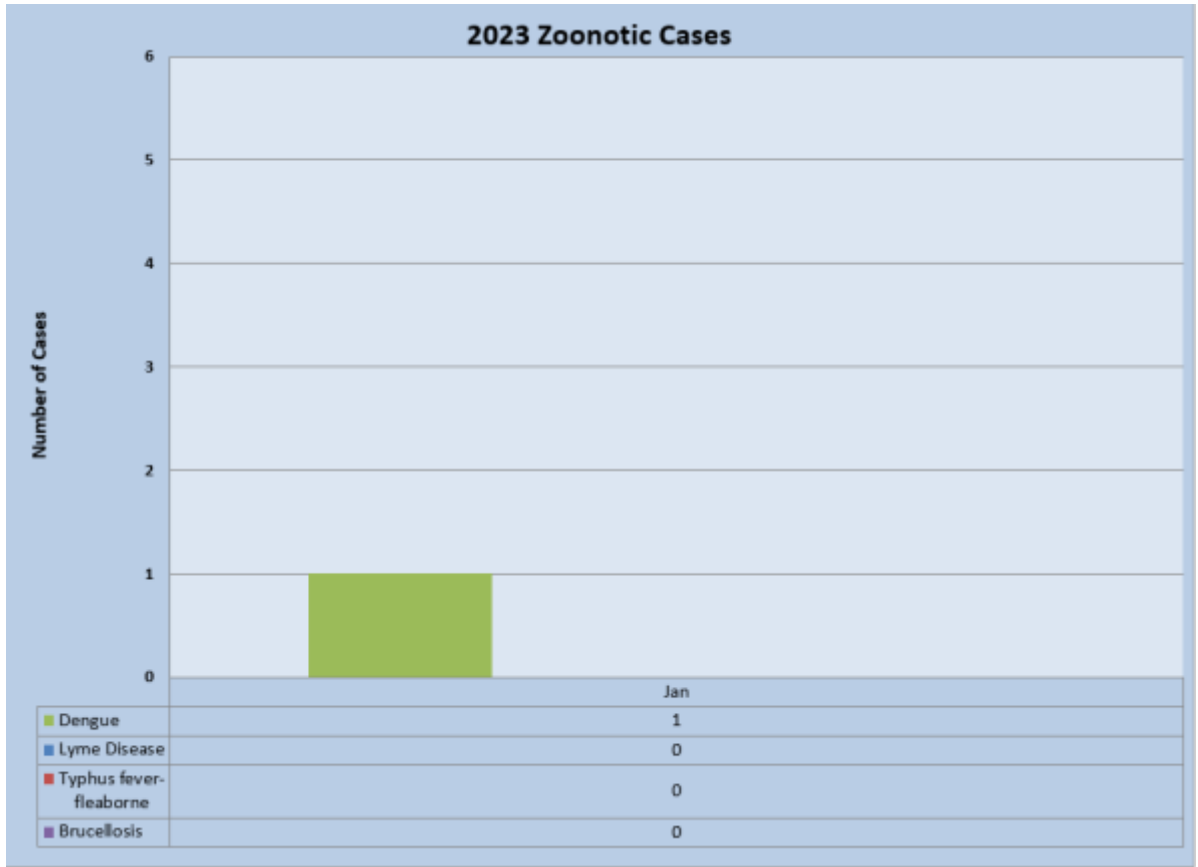
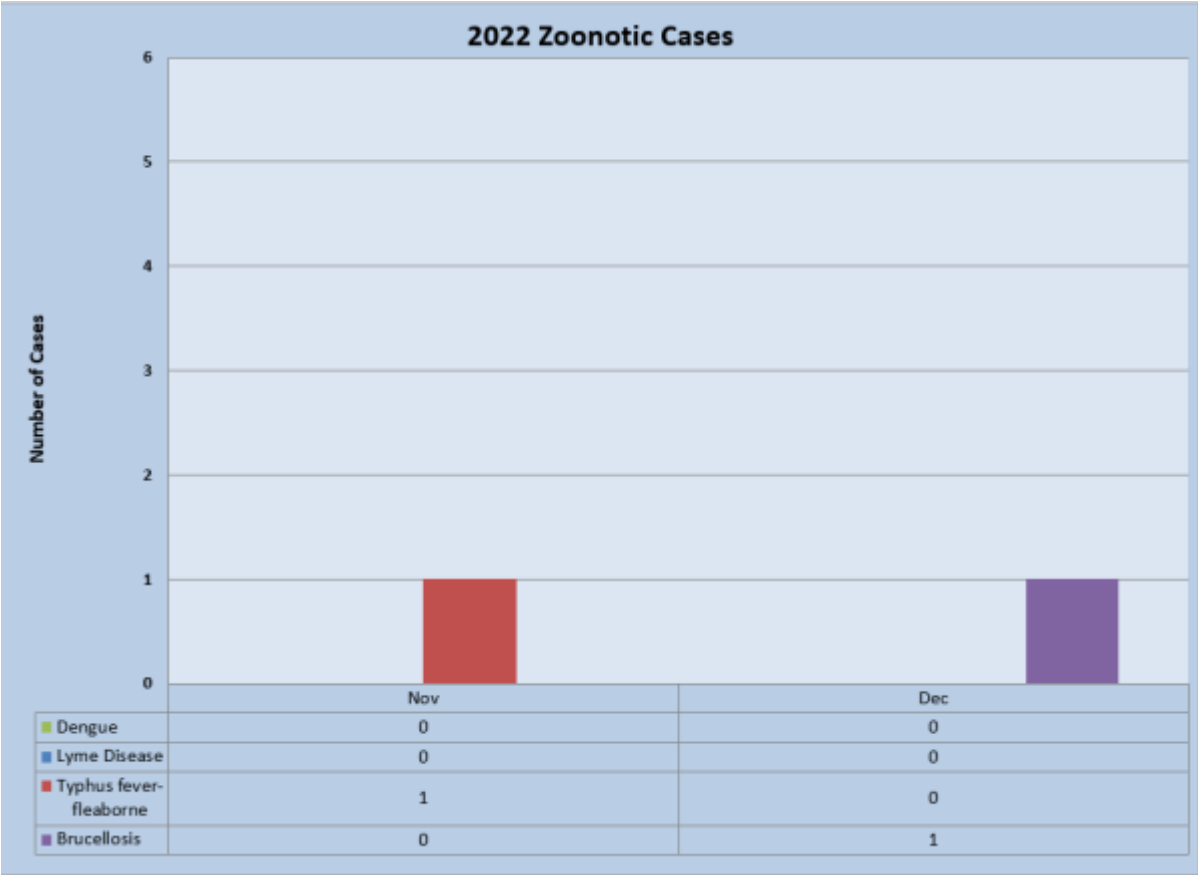
January 19: Attended and participated in the Behavioral Health and Suicide Prevention monthly taskforce meeting.

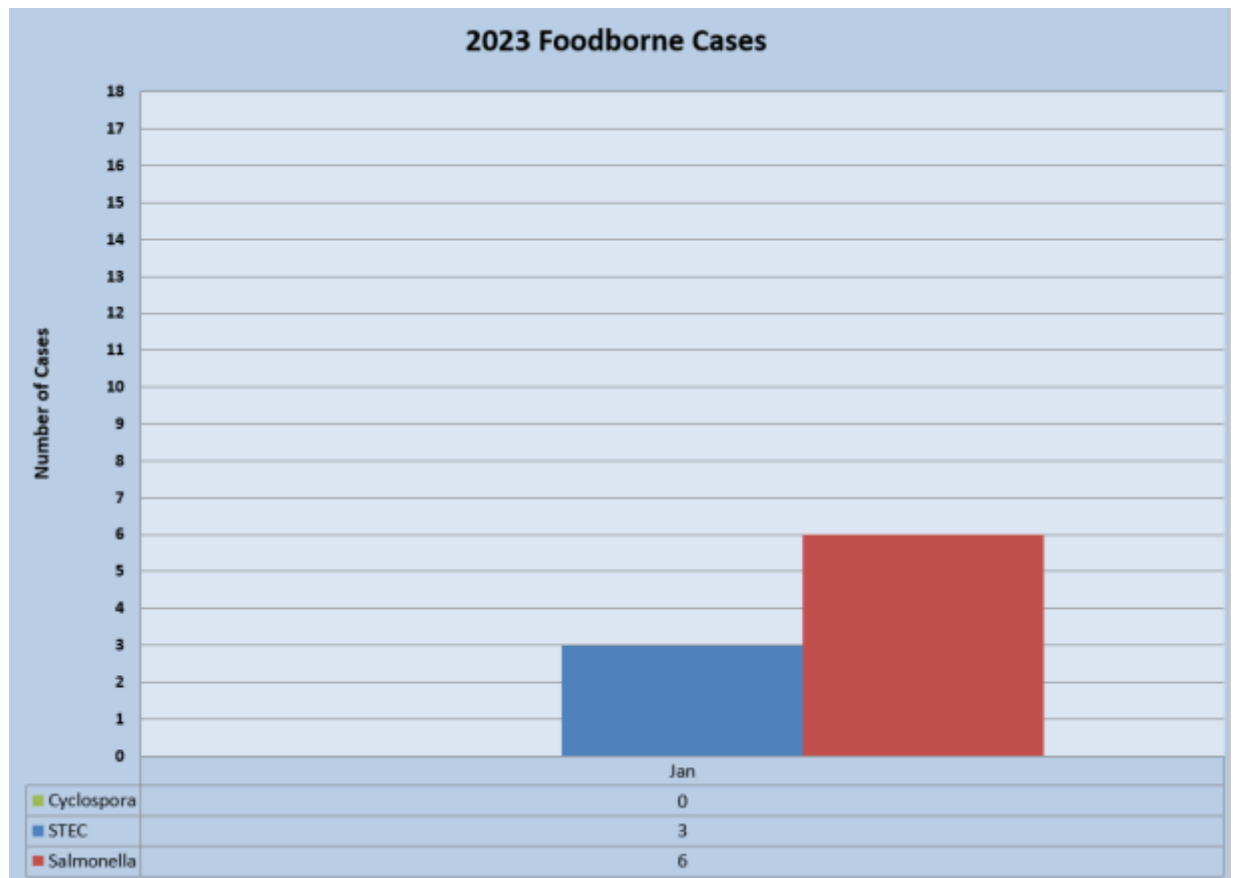
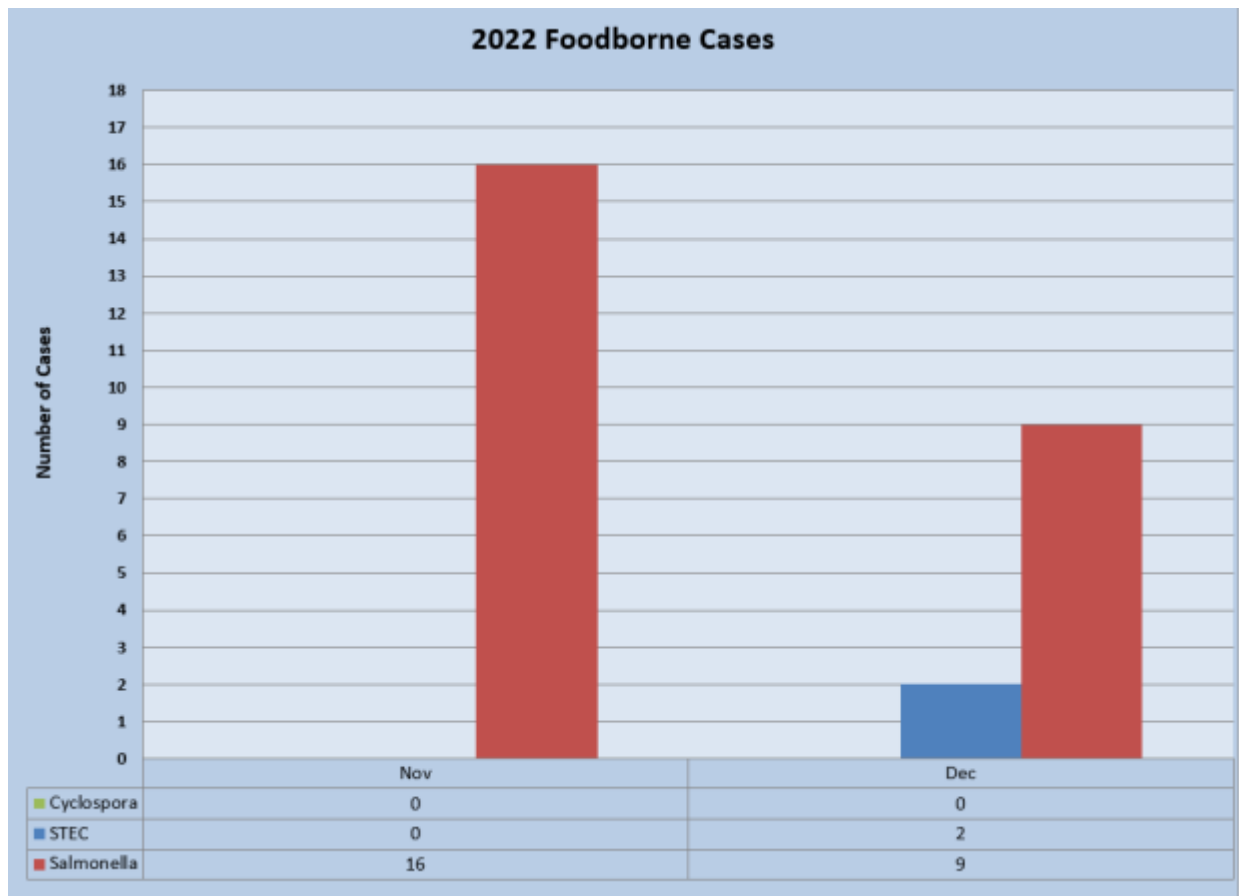


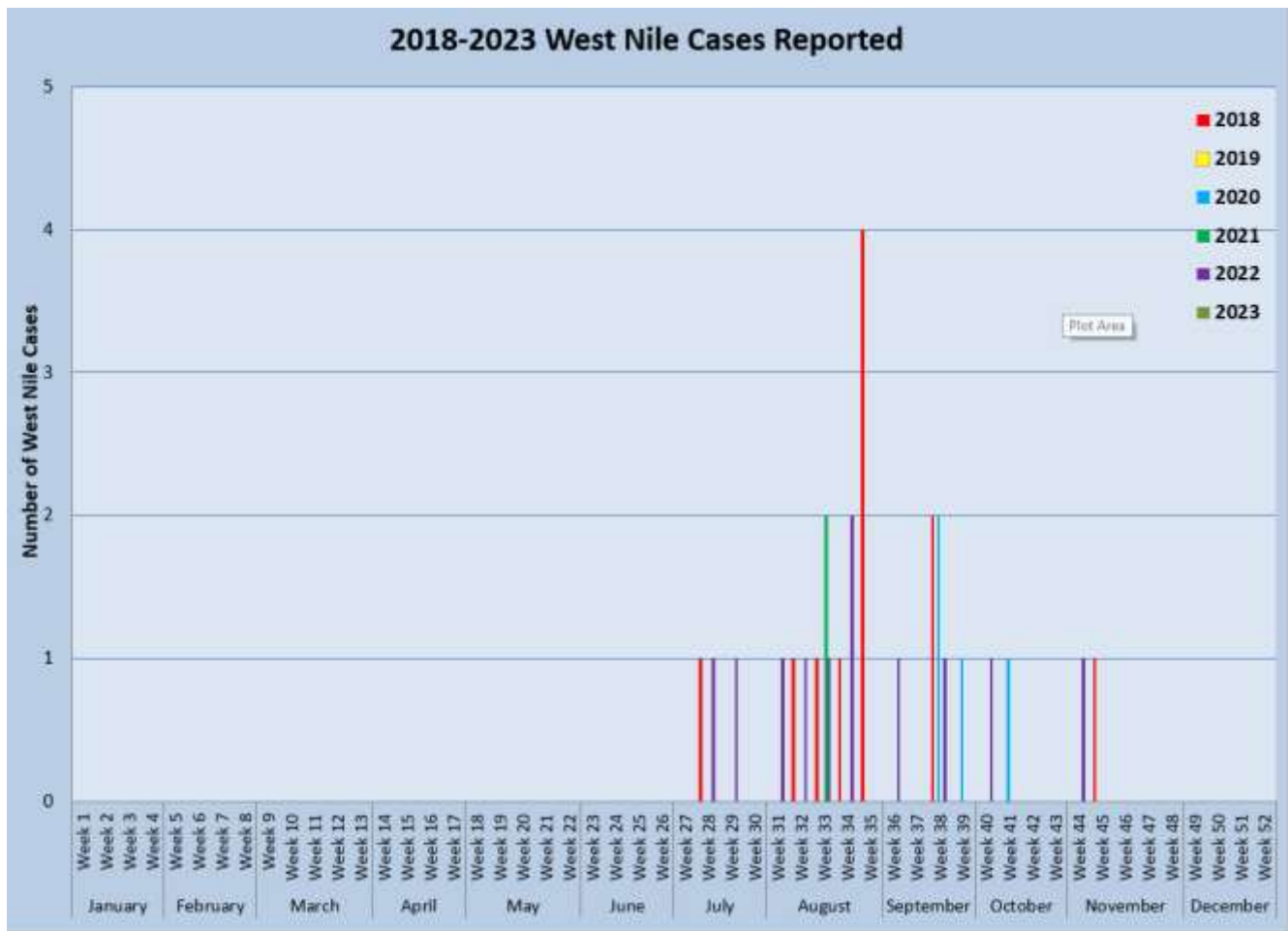




** The Influenza season is October-May. No influenza cases reported during the off-season.







Zero cases in 2023- not WNV season
In 2022, there were 11 cases with 1 death

COVID-19 Board Report for October 2022 – February 2023

The information provided includes data from October 2022 – February 2023. The case counts below are as of February 13, 2023.

- Case count to date: 164,160
- Total confirmed* deaths due to COVID-19: 1,178

**Confirmed deaths based on thorough review process and remains ongoing.*

Detention Center (Federal Facilities)	Case Count
Joe Corley Processing Center	187
Montgomery Processing Center	937
Total	1,124

Incarcerated	Case Count
Montgomery County Jail	780

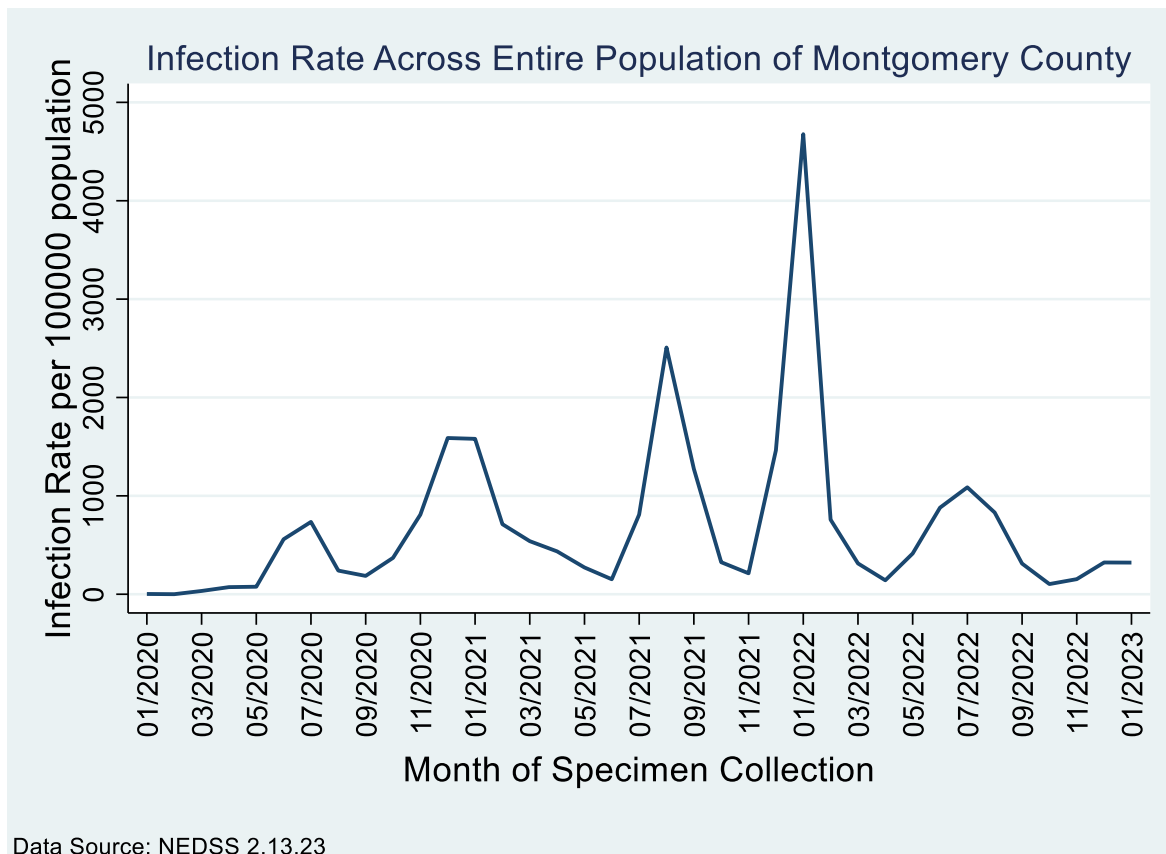


Figure 1. COVID-19 infection rate per 100,000 people in Montgomery County. For cases where exact date of specimen collection is not available, next closest estimate was used. These rates reflect lab confirmed cases (PCR and antigen) and do not include self-test/at home tests as they are not reportable. As expected, we observed an upward trend in infections over the holiday season, however we are still at a low compared to previous seasonal spikes. This is in line with what is being observed in the state of Texas and in the entire United States.

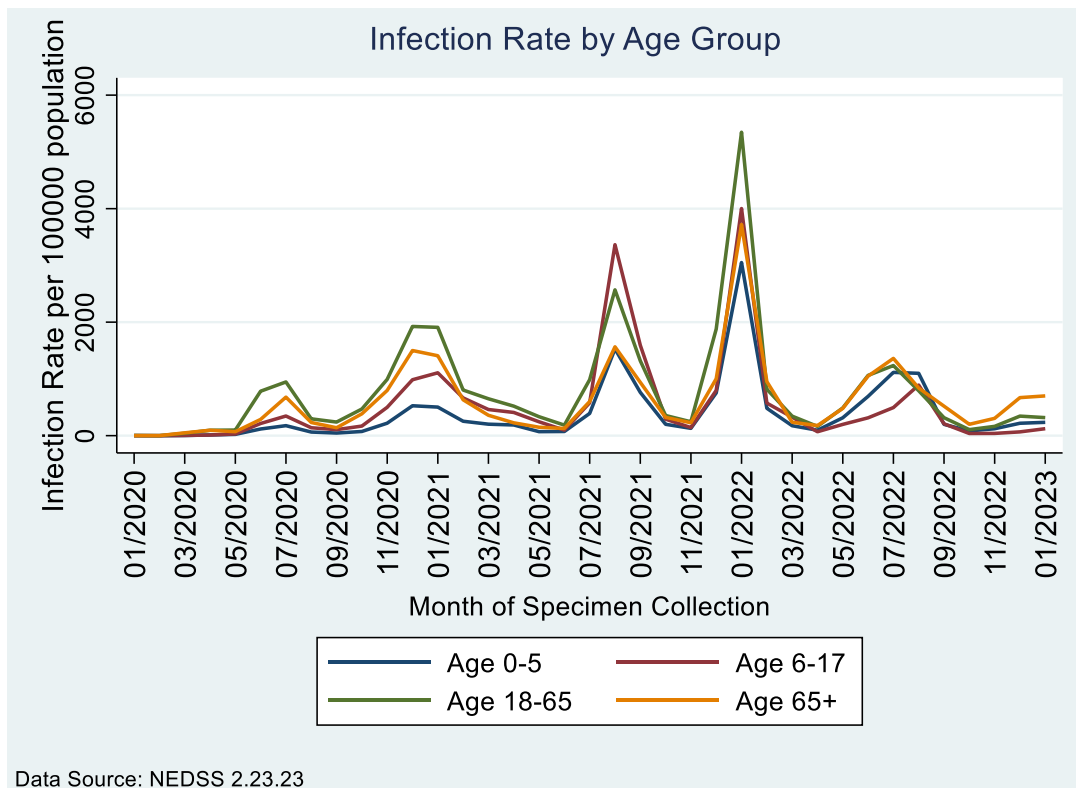


Figure 2. COVID-19 infection rate per 100,000 people separated by age groups. The current increase in infection rates appears to be affecting the 65 and over age group the most, which is consistent with the reports of outbreaks we are seeing in retirement homes in Montgomery County.

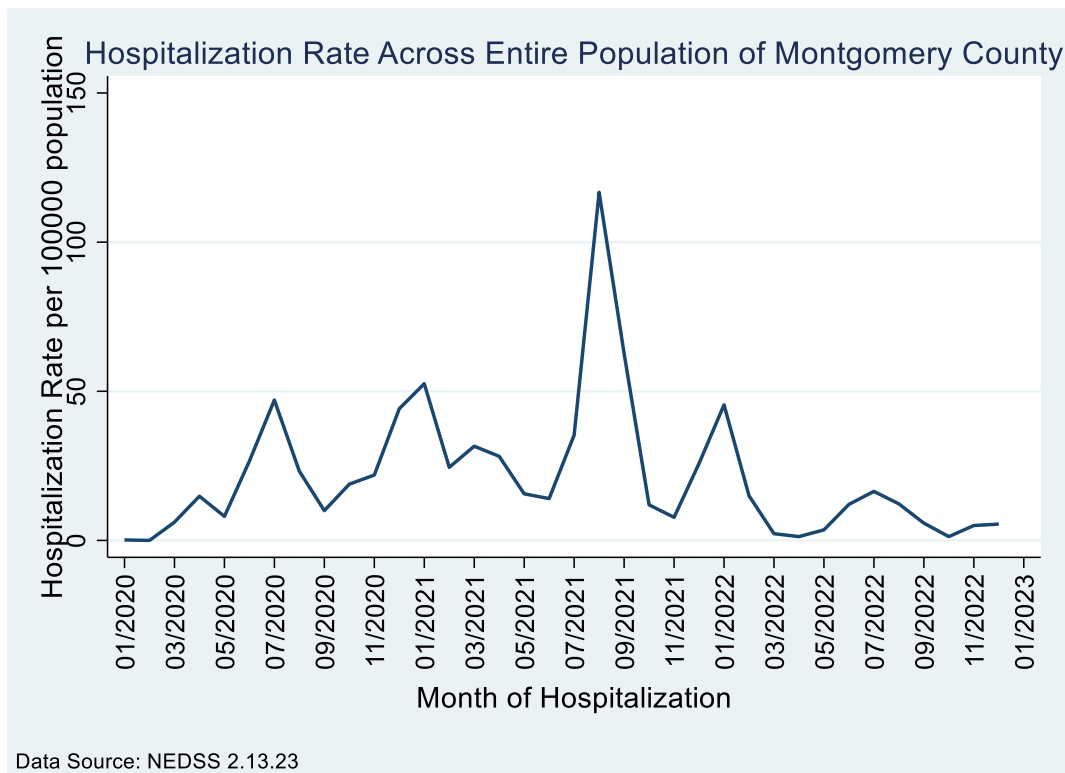


Figure 3. Hospitalization rate per 100,000 people. Hospitalizations for January 2023 are still being reviewed.

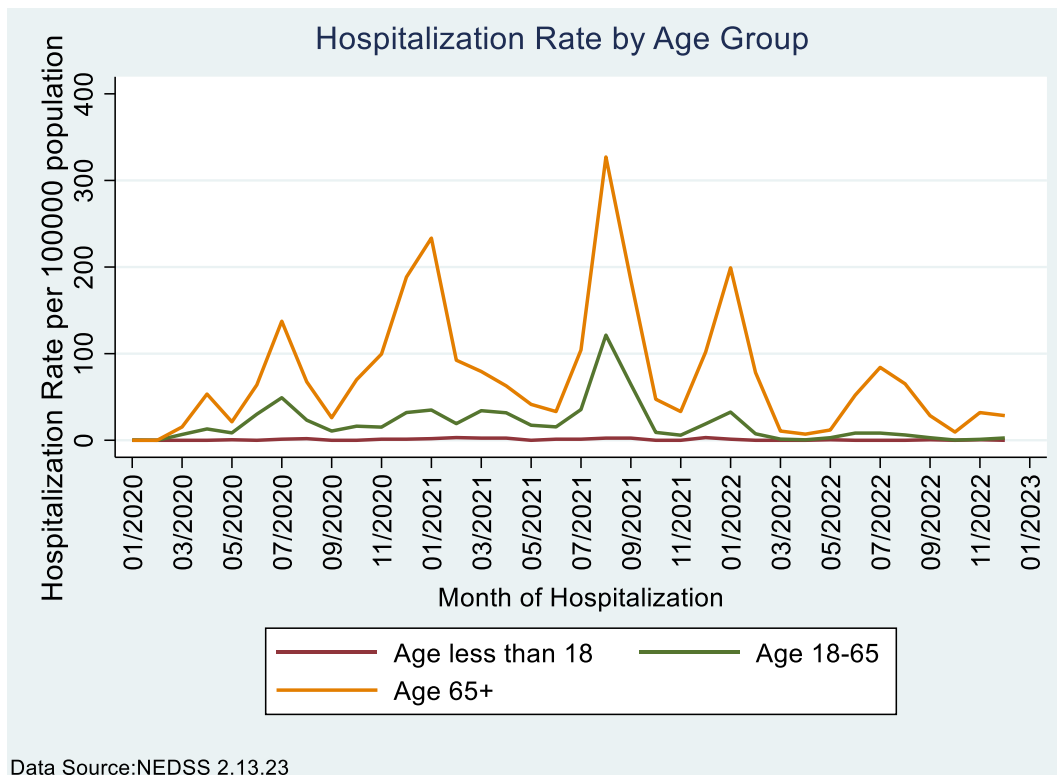


Figure 4. Hospitalization rate per 100,000 people separated by age. Hospitalizations are still being reviewed for January 2023. Given the minimal number of hospitalizations in the 0-5 Age range, we would not gain any additional information by separating out that age group.

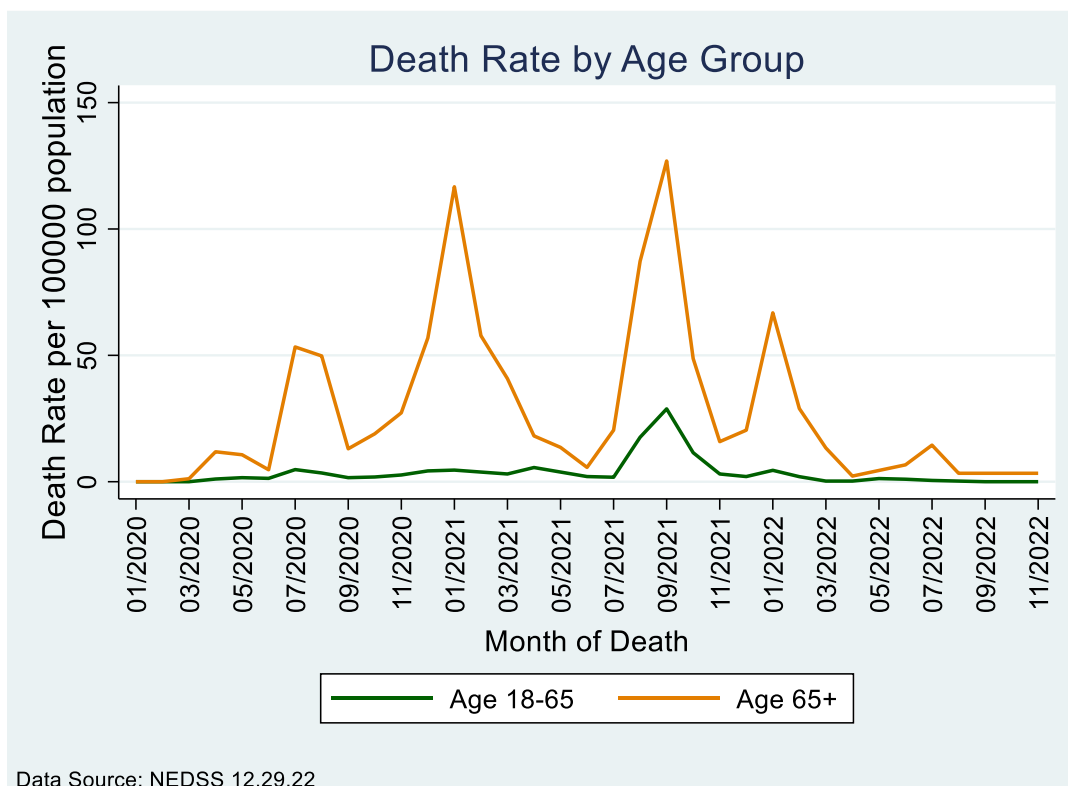


Figure 5. Death Rates per 100,000 population separated by age. Deaths are still being reviewed for 2022, therefore death rates represented in this graph are not up to date for end of 2022 and will continue to increase as this information is updated.

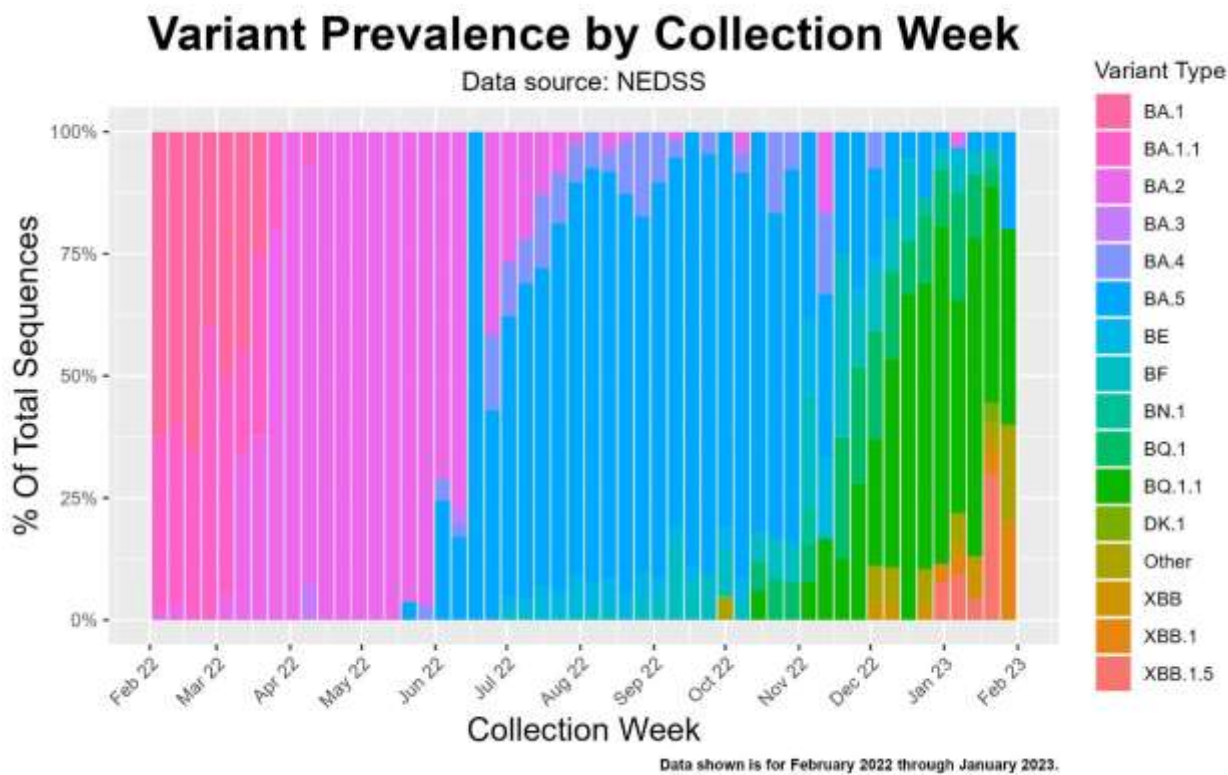
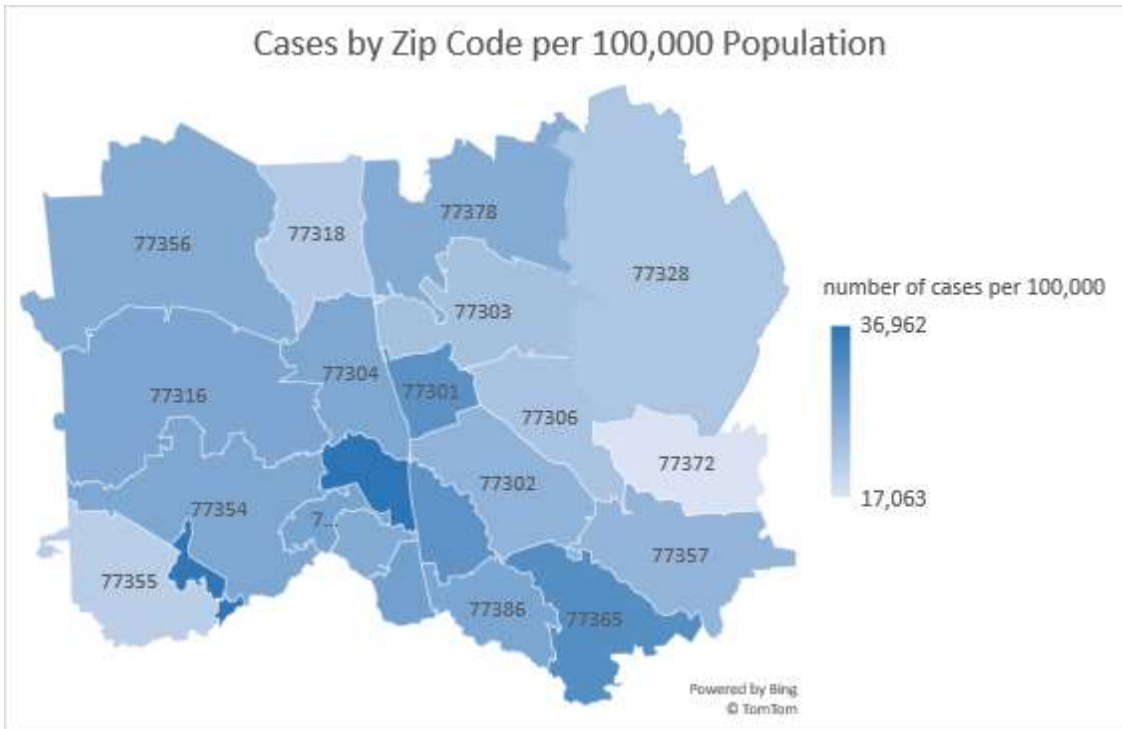


Figure 6: Types of COVID-19 variants by collection week. BQ.1.1 remains the most frequently detected SARS-COV-2 lineage in Texas and this appears to be true at the county level as well. XBB is the newly emerging Omicron sub variant.

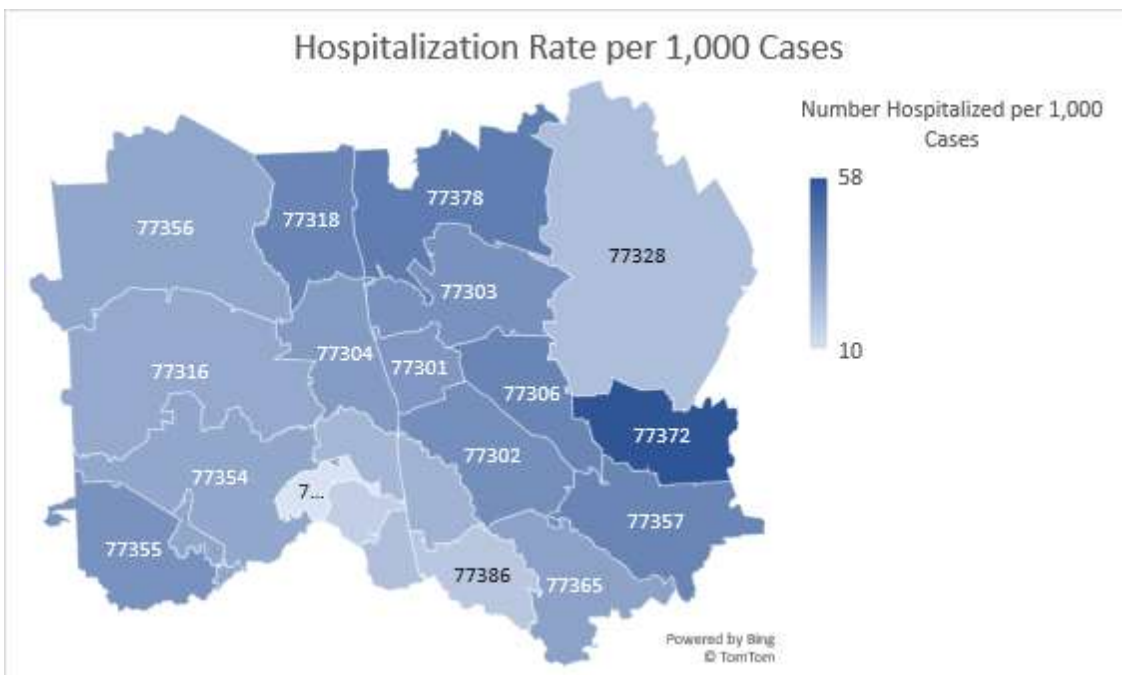
People Vaccinated	At Least One Dose	Completed Primary Series	Bivalent Booster
Total Population	66.8%	57%	9%
Population ≥ 5 Years of Age	71.1%	61%	9.6%
Population ≥ 12 Years of Age	76.7%	66%	10.5%
Population ≥ 18 Years of Age	79%	68%	11.4%
Population ≥ 65 Years of Age	95%	85.8%	29.9%

Figure 7. Vaccination rates for Montgomery County according to CDC website.

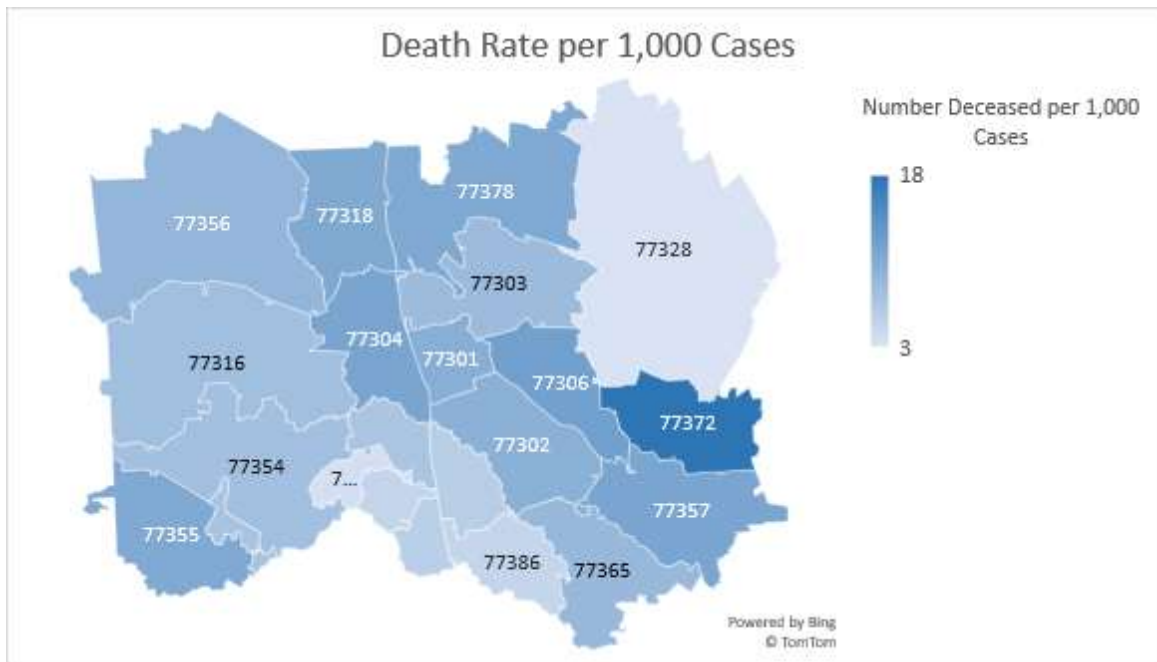
COVID -19 by Zip Code in Montgomery County



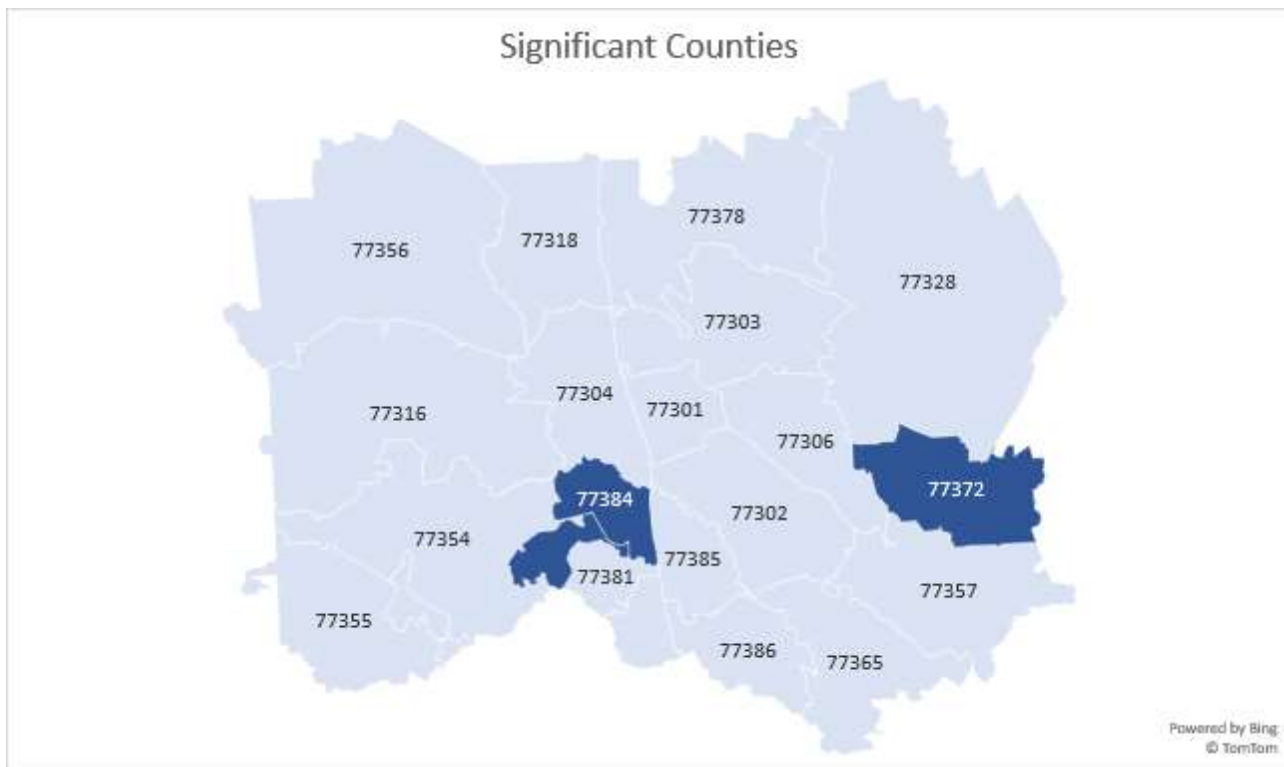
Map 1: Only a small part of 77328 belongs to Montgomery County and only that population and cases are being considered. Picture wise it was not possible to display only the zip code available in Montgomery County. For our purposes this is not an issue.



Map 2: Number of Hospitalizations per 1000 Cases.



Map 3: Number of deaths per 1000 cases.



Map 4: Results of Marascuillo procedure. When comparing proportions of cases hospitalized, zip code 77372 is statistically significant with a higher hospitalization rate per number of cases relative to surrounding areas. Zip codes 77384 and 77382 are also noteworthy based on the statistical test. These zip codes had an unexpectedly low hospitalization rate given their number of cases.

Zip code 77372 has a median income of \$64,180, which ranks it 16th out of 22 zip codes considered. 77382 and 77384 have the highest and 5th highest median income of the zip codes considered. 77328 has the lowest median income.

Public Health Emergency Preparedness Program:

November 2022 – January 2023

- Monthly Public Health Emergency Preparedness Collaborative (PHEP-C) monthly meeting
 - Monthly PHEP-C virtual meeting
 - Public Health Emergency Preparedness Connects Webinar
 - ICP, EPI meeting
- Monthly Strategic National Stockpile (SNS) Group meetings
 - Virtual Medical Countermeasures (MCM) Planning Workgroup Meeting
 - Some Sustained Operations Workshop activities have been suspended due to COVID-19 response
 - Some SNS meetings have been suspended due to COVID-19 response
 - Some CRI drills have been suspended due to COVID-19 response
 - Medical Countermeasure Dispensing (Vaccine Distribution)
- Regional Training, Exercises and Conferences
 - HCAP Mental Health Training
 - SETRAC West Corridor Meeting
 - SETRAC 13th Annual Healthcare Preparedness Symposium
 - MCHD Compliance Fair
 - Active Shooter Training
 - Compliance Presentation
 - HIPAA Training
 - Regional Public Health Strategic Advisory Group (RPHSAG) Table Top Exercise (TTX)
 - Montgomery County Hazard Mitigation Plan Stakeholder Kickoff Meeting
- Texas Division of Emergency Management
 - Participated in daily Situational Awareness Weather Call/Webinar for Potential Severe Weather Affecting the State of Texas
- Grant Deliverables
 - Monthly Regional Radio Check
 - FY22 Hazard Workplan and vulnerable population Submitted
 - Catastrophic Medical Operations Center (CMOC)
 - FY 22 CRI B-13 & GC-11 Support Documentation

Medical Reserve Corps Program:

Resignation July 2022- Position filled by OEM Feb 2023- No activities to report

661495

VACCINES FOR CHILDREN PROGRAM (VFC)
VFC Compliance Site Visit - Acknowledgement of Receipt

Provider Name: Montgomery Co. PHD Site Visit Reviewer: Sabrina Stanley
 Email: Sabrina.Stanley@dshs.texas.gov

Thank you for participating in this VFC compliance site visit. Please take a few minutes to review your follow-up plan. The goal of this plan is to support you and your staff with successfully implementing the program and improving access to vaccines for VFC-eligible children within your practice.

To close out today's visit, please complete the Provider Acknowledgement section of the form below and keep this document for your records. Thank you for your continued dedication to the VFC Program.

TO BE COMPLETED BY SITE VISIT REVIEWER	
I, <u>Sabrina Stanley</u> (Site Visit Reviewer), acknowledge that a VFC Compliance Site Visit was performed on <u>1/12/23</u> (Visit Date) and that I have provided a follow-up plan that includes any follow-up actions required (as applicable) and a list of all current VFC program requirements & recommendations assessed during the visit.	
TO BE COMPLETED BY PROVIDER	
If the Medical Director (or equivalent) who signed the Provider Agreement is present:	
I, _____ (Medical Director), acknowledge that my practice took part in the VFC site visit noted above. I understand the findings of the visit and agree to take all required actions necessary in order to meet VFC program requirements (as applicable).	
If the Medical Director (or equivalent) who signed the Provider Agreement is NOT present:	
I, _____ (Responsible Individual designated by MD), acknowledge that my practice took part in the VFC site visit noted above. I understand and will communicate to the Medical Director the findings of the visit and any required actions that must be taken by our office in order to meet VFC program requirements (as applicable).	
Reviewer Signature: <u>[Signature]</u>	Date: <u>1/12/23</u>
Provider Signature: <u>[Signature]</u>	Date: <u>1/12/23</u>

VACCINES FOR CHILDREN PROGRAM (VFC)

VFC Site Visit Follow-Up Plan

Site Visit #:01122023TXA061495

Provider PIN:TXA061495

Doses Distributed in 2021: 1,552

Cost of Doses Distributed in 2021: \$100,903.49

CHARLES SIMS MD
MONTGOMERY CO PUBLIC HEATH DISTRICT
1300 S Loop 336 West
Conroe, TX 77304

1/12/2023

Dear CHARLES SIMS MD,

Thank you for participating in a VFC Site Visit on 01/12/2023. We hope you found the visit to be informative and educational.

Congratulations: no compliance issues were identified during this visit! We appreciate your efforts to upholding the standards of the VFC Program. Below, you will find the following:

1. Notes from your site visit reviewer (if applicable)
2. A full listing of all VFC Program Requirements and Recommendations assessed during the visit

On behalf of the Texas Immunization Program, I thank you for your participation in the VFC Program and your continued efforts to ensure that all children are fully immunized. Please do not hesitate to contact me if you have any questions.

Sincerely,

Sabrina Stanley
Texas
1110 West 49th Street
Austin, Texas 78756
(512) 776-6244
Sabrina.Stanley@dshs.state.tx.us

REVIEWER'S SITE VISIT NOTES

There are no notes for this visit.

2022-2023 CDC VFC Compliance Visit Requirements & Recommendations

ELIGIBILITY & DOCUMENTATION

CHANGES TO KEY STAFF

All changes in key staff must be communicated to the immunization program in the manner and timeframe defined by the immunization program. Key staff include: the medical director or equivalent who signed the provider agreement, the vaccine coordinator, and the backup coordinator. VFC providers are required to ensure that all key staff are fully trained on VFC program requirements at all times. All training must be documented.

VFC ELIGIBILITY CATEGORIES

VFC providers must possess a working knowledge of ALL VFC eligibility criteria and use those criteria to screen children prior to administering VFC vaccines. To receive VFC vaccine, a patient must be under the age of 19 and must be at least one of the following: (1) **Medicaid-eligible**; (2) **uninsured** (i.e., child has no health insurance); (3) **underinsured** (i.e., child has health insurance, but does not have cover for any or certain vaccines— underinsured children may only receive VFC vaccines in any FQHC/RHC or deputized VFC provider offices and may only receive vaccines not covered by insurance; and (4) **American Indian OR Alaska Native (AI/AN)**.

BILLING PRACTICES

VFC providers must adhere to proper billing practices for vaccine administration fees and clearly understand that VFC vaccine is provided at no cost to either the VFC provider or eligible children. At no time should billing occur for the cost of VFC vaccine. When administering VFC vaccine, providers should **never** bill two different “payers” (i.e., patient, Medicaid, insurance) for the same vaccine administration fee amount. For Medicaid-eligible children, Medicaid should be billed for the vaccine administration fee. For all other VFC-eligible populations, the patient may be billed for an amount within the state/territory cap established by the Centers for Medicare and Medicaid Services (CMS); however, patients cannot be turned away or reported to collections for inability to pay the administration fee. Effective January 1, 2020, providers who choose to bill for the vaccine administration fee of a non-Medicaid, VFC-eligible child after the date of service may issue only a single bill to the patient within 90 days of vaccine administration.

VACCINE ADMINISTRATION FEE

The VFC provider's vaccine administration fee for non-Medicaid, VFC-eligible children must not exceed the state/territory vaccine administration fee cap established by the Centers for Medicare & Medicaid Services (CMS). For current fee caps, refer to www.gpo.gov/fdsys/pkg/FR-2012-11-06/pdf/2012-26507.pdf.

ELIGIBILITY SCREENING & DOCUMENTATION

VFC providers must screen for and document VFC eligibility at EACH immunization visit. Documentation must include the date of the visit and the child's specific eligibility category. VFC providers must use screening results to ensure that only VFC-eligible children receive VFC vaccine and that administration fees are billed for as appropriate. Eligibility status must be readily available to staff administering vaccine prior to selecting which vaccine stock to use. Comprehensive certificates are no longer allowed in the VFC program.

VACCINE DOSE DOCUMENTATION

In accordance with federal law, VFC providers must maintain immunization records that include ALL of the following elements: (1) name of vaccine administered; (2) date vaccine was administered; (3) date VIS was given; (4) publication date of VIS; (5) name of vaccine manufacturer; (6) vaccine lot number; (7) name and title of person who administers the vaccine; (8) address of clinic where vaccine was administered.

RECORD RETENTION

VFC providers are required to maintain all records related to the VFC program for a minimum of three years (or longer if required by state law) and upon request make these records available for review. VFC records include, but are not limited to, VFC screening and eligibility documentation, billing records, medical records that verify receipt of vaccine, vaccine ordering records, and vaccine purchase and accountability records.

VACCINE MANAGEMENT PLAN

VFC providers must maintain and implement a Vaccine Management Plan for routine and emergency vaccine management. The plan should consist of clearly written, detailed, and up-to-date storage and handling standard operating procedures (SOPs). The plan must contain the name and contact information for the current vaccine coordinator and backup coordinator; proper storage and handling practices; shipping and receiving procedures; emergency procedures for equipment malfunctions, power failures, or natural disasters; vaccine ordering procedures; inventory control (e.g., stock rotation); procedures for handling vaccine loss and waste; and staff training/documentation on vaccine management, storage, and handling. The plan must be reviewed/updated

annually or more frequently if changes occur. A review date and signature are required on all plans in order to validate they are current.

VIS & VAERS

VFC providers are required to distribute the current VIS each time a vaccine dose is administered and to maintain records in accordance with the National Childhood Vaccine Injury Act (NCVIA), which includes reporting clinically significant adverse events to the Vaccine Adverse Event Reporting System (VAERS). For a list of current VISs, visit: <http://www.cdc.gov/vaccines/hcp/vis/>.

Borrowing Documentation / Reasons

VFC Providers are expected to maintain an adequate inventory of vaccine for all patients served - it is the responsibility of the Provider to appropriately schedule and place vaccine orders and ensure vaccine stock is properly rotated to ensure timely use of short-dated vaccine. Borrowing of vaccine between private and public inventories must be a rare, unplanned occurrence and CANNOT serve as a replacement system for a Provider's privately purchased vaccine inventory. All instances of borrowing must be properly documented, reported and replaced.

STORAGE & HANDLING

STORAGE UNIT GRADE [Recommendation]

CDC recommends the following vaccine storage unit types (in order of preference): pharmaceutical-grade stand-alone or combination units (preferred); household/commercial stand-alone units; household/commercial combination units using the refrigerator section only. Use of the freezer compartment of a household combination unit is discouraged.

TEMPERATURE MONITORING DEVICE IN THE UNIT

VFC providers MUST have a working calibrated temperature monitoring device with a current and valid certificate of calibration testing. All certificates of calibration testing must contain the model number, serial number, date of calibration, and measurement results indicating that the unit passed testing. Documentation that uncertainty is within suitable limits (recommended uncertainty = +/-1 degree Fahrenheit or 0.5 degree Celsius) and the name of the device are recommended but not required.

TEMPERATURE MONITORING DEVICE TYPE

All VFC providers must use continuous temperature monitoring devices (i.e., digital data loggers) to monitor vaccines administered to VFC-eligible children. Routine review and accessibility of temperature data are critical for determining whether vaccine has been properly stored and for assessing usability of vaccine involved in a temperature excursion. To meet VFC program requirements, the

device must also be equipped with:

- A temperature probe
- An active temperature display that can be easily read from outside of the unit
- The capacity for continuous monitoring and recording the data to be routinely downloaded

Additional recommended features for these devices that may be required by your Immunization Program:

- Alarm for out-of-range temperatures
- Current, minimum, and maximum temperatures display
- Low battery indicator
- Accuracy of +/- 1°F (0.5°C)
- Memory storage of at least 4,000 readings
- User programmable logging interval (or reading rate) recommended at a maximum time interval of every 30 minutes
- Use of a probe that best reflects the temperature of the vaccine (such as a buffered probe)

CERTIFICATE OF CALIBRATION TESTING

Certificates of calibration testing provide confidence that the temperature monitoring device is measuring temperatures accurately. All units storing VFC vaccines **MUST** have a calibrated temperature monitoring device with a current and valid certificate of calibration testing. All certificates of calibration testing must contain the model number, serial number, date of calibration, and measurement results indicating the unit passed testing. Documentation that uncertainty is within suitable limits (recommended uncertainty = +/-1 degree Fahrenheit or 0.5 degree Celsius) and the name of the device are recommended but not required.

TEMPERATURE MONITORING DEVICE PLACEMENT

The temperature monitoring device (or probe) must be placed in a central area of the storage unit directly with the vaccines to properly measure vaccine temperature. Devices should not be placed in the doors, near or against the walls, close to vents, or on the floor of the unit. For pharmaceutical-grade units with a built-in temperature monitoring device or a dedicated port for a probe that is not in the center of the storage unit, consult your immunization program for guidance on placement.

TEMPERATURE DOCUMENTATION

Vaccines must be stored at appropriate temperatures as described in the manufacturer package inserts at all times. The acceptable temperature ranges

vary by vaccine type, and the range is 36° F and 46° F (2° C and 8° C), for refrigerated vaccines and -58° F and +5° F (-50° C and -15° C) for frozen vaccines. Exposure to temperatures outside of the ranges detailed in the package inserts could affect vaccine viability and, ultimately, leave children unprotected against vaccine-preventable diseases. To maintain awareness of storage unit temperatures and ensure that vaccines are being stored at appropriate temperatures at all times, VFC Providers are required to monitor and document temperatures for all vaccine storage units AT LEAST once per day. Temperature documentation must contain: (1) at least one minimum/maximum temperature readings per day, (2) the date and time of each reading and (3) the name (or initials) of the person who assessed and recorded the readings.

TEMPERATURE EXCURSIONS

The provider must document all excursions and actions taken including the following: (1) Quarantine and label vaccines as "DO NOT USE"; (2) Place vaccines in a unit where they can be stored under proper conditions (3) Contact the Immunization Program to report an excursion; and (4) Contact the vaccine manufacturer to obtain documentation supporting the usability of the vaccine

VACCINE PLACEMENT [Recommendation]

Vaccines should be stored in their original manufacturer (or CDC centralized distributor) packaging. They should be placed in the middle of the pharmaceutical-grade unit with space between the vaccines and the side/back of the unit to allow cold air to circulate. Vaccines SHOULD NOT be stored in the doors, vegetable bins, or on the floor of the unit, or under or near cooling vents, and there should not be any food in the unit. Unless otherwise specified by the manufacturer of a pharmaceutical-grade unit, water bottles (for refrigerators) or frozen water bottles (for freezers) should be placed throughout each storage unit to: (1) stabilize or extend temperatures during a power outage and (2) serve as physical blocks preventing the placement of vaccines in areas of the unit at higher risk for temperature excursions (such as in doors, vegetable bins, floor, or near/under cooling vents).

DISCONNECTION FROM POWER SOURCE

VFC providers must take steps to protect the power source for all vaccine storage equipment by having clear warning labels on both the plug and the circuit breaker associated with all vaccine storage units. Large hospitals and healthcare systems can meet this requirement by demonstrating they have comprehensive policies and standard operating procedures to prevent vaccine storage units from being disconnected from the power supply

DORM-STYLE UNITS

Dorm- and bar-style units are prohibited for vaccine storage. Vaccines stored in dorm-style units are considered nonviable and must be returned to the

centralized distributor. CDC recommends the following vaccine storage unit types (in order of preference): pharmaceutical-grade stand-alone or combination units (preferred), household/commercial stand-alone units, or household/commercial combination units using the refrigerator section only. Use of the freezer compartment of a household combination unit is discouraged.

STORAGE UNIT SPACE AVAILABILITY

VFC Providers must have sufficient storage space to accommodate vaccine stock at the busiest time of year without overcrowding.

EXPIRED VACCINES

Vaccines should be rotated weekly and whenever a new shipment arrives so that longer-dated vaccines are stored behind shorter-dated vaccines. If vaccines expire, they can no longer be stored in the same storage unit with viable vaccines. They must be placed in a container or bag clearly labeled "Do not use" and separated from viable vaccines to prevent inadvertent use. Expired vaccine must be returned to the centralized distributor within six months of expiration.

BACK-UP TEMPERATURE MONITORING DEVICE

VFC Providers must have a readily available continuous temperature monitoring backup device (e.g. digital data logger) with a current and valid certificate of calibration testing. To prevent the certificates of calibration testing of the primary and backup devices from expiring at the same time, the date of calibration testing (or issue date) of the backup device should be different from the date of calibration testing (or issue date) of the primary device.

PREPARATION OF VACCINE [Recommendation]

"CDC recommends preparing vaccines immediately prior to administration to assure viability of vaccine and prevent vaccine wastage. Vaccines that are not administered immediately are at risk of exposure to temperatures outside of the required range, which can affect vaccine viability and, ultimately, can leave children unprotected against vaccine-preventable diseases.

EMERGENCY TRANSPORT OF VACCINE [Recommendation]

CDC recommends providers keep on hand or have ready access to the supplies needed for emergency transport. Appropriate materials include:

- Portable vaccine refrigerator/freezer units (preferred option)
- Qualified containers and packouts
- Hard-sided insulated containers or Styrofoam™ (Use in conjunction with the Packing Vaccines for Transport during Emergencies† tool. This system is only to be used in an emergency.)
- Coolant materials such as phase change materials (PCMs) or frozen water

- bottles that can be conditioned to 4° C to 5° C
- Insulating materials such as bubble wrap and corrugated cardboard—
enough to form two layers per container
- TMDs for each container

INVENTORY

INVENTORY COMPARISON

VFC Providers must order and stock routine vaccines in accordance with their most recent provider profile in order to prevent missed vaccination opportunities. Having sufficient amounts of all stocks prevents the inadvertent use of VFC vaccines for non-VFC-eligible patients and vice versa.

ACIP-RECOMMENDED VACCINES

VFC providers agree to comply with immunization schedules, dosages, and contraindications that are established by the ACIP for the vaccines identified and agreed upon in the provider agreement and provider profile UNLESS:

1. In the VFC provider's medical judgment, and in accordance with accepted medical practice, the VFC provider deems such compliance to be medically inappropriate for the individual child
2. The particular requirements contradict state law, including laws pertaining to religious and/or other exemptions.

The VFC program entitles children to the following vaccines: DTaP, hepatitis A, hepatitis B, Hib, HPV, influenza, meningococcal, MMR, pneumococcal, polio, rotavirus, Tdap/TD and varicella. VFC providers are also required to ensure that VFC-eligible children have access to nonroutine vaccines as needed.

SEPARATION OF STOCK

To ensure that VFC vaccines are administered only to VFC-eligible children, VFC providers serving both VFC and non-VFC-eligible children must maintain vaccine inventories in such a way that they can clearly differentiate public stock from private stock.

AGENDA ITEM # 15

Board Mtg.: March 9, 2023

Montgomery County Public Health District Financial Dashboard for Jan 2023 (dollars expressed in 000's)

	Jan 2023	Jan 2022	Var	Var %
Cash and Investments	3,506	2,788	717	25.7%

Legend	
Green	Favorable Variance
Red	Unfavorable Variance

Income Statement	Jan 2023				Year to Date			
	Act	Bud	Var	Var %	Act	Bud	Var	Var %
Revenue								
Grant Revenue	79	168	(89)	-53.1%	353	731	(378)	-51.8%
1115 Waiver Revenue	0	0	0		0	0	0	
Other Revenue	14	13	1	3.8%	57	54	3	5.2%
Total Revenue	93	181	(89)	-48.9%	410	785	(375)	-47.8%
Expenses								
Payroll	104	129	(26)	-19.8%	442	551	(109)	-19.7%
Operating	26	53	(27)	-51.3%	108	249	(141)	-56.6%
Total Operating Expenses	130	183	(53)	-29.0%	551	800	(250)	-31.2%
Capital	0	0	0	0.0%	0	0	0	0.0%
Total Expenditures	130	183	(53)	-29.0%	551	800	(250)	-31.2%
Revenue Over / (Under) Expenses	(37)	(1)	(36)	-2550.0%	(141)	(16)	(126)	-810.3%

Cash and Investments as of January 2023 are \$717k or 25.7% more than one year ago.

Revenue: Grant revenue is less than expected year-to-date due to grant expenses being less than budgeted, primarily in the COVID grants.

Payroll: Year-to-date, overall payroll expenses are \$109k less than budgeted. This is primarily due to open positions.

Operating Expense: Year-to-date, Operating Expenses are \$141k less than budget. Generally, Operating Expenses are less than expected across the board

Montgomery County Public Health District Balance Sheet

As of 01/31/2023

		<u>Fund 22 01/31/2023</u>
ASSETS		
Cash and Equivalents		
22-000-10400	Petty Cash-PHP-BS	\$200.00
22-000-11510	MCPHD Operating Account - WF-BS	\$3,505,772.03
Total Cash and Equivalents		<u>\$3,505,972.03</u>
Receivables		
22-000-14400	A/R-Grant Revenue-BS	\$181,656.52
22-000-14550	Receivable from Primary Government-BS	(\$108,959.61)
Total Receivables		<u>\$72,696.91</u>
TOTAL ASSETS		<u>\$3,578,668.94</u>
LIABILITIES		
Current Liabilities		
22-000-20500	Accounts Payable-BS	\$1,861.53
22-000-21400	Accrued Payroll-BS	\$42,801.21
Total Current Liabilities		<u>\$44,662.74</u>
Deferred Liabilities		
22-000-23200	Deferred Revenue-BS	\$1,504.42
Total Deferred Liabilities		<u>\$1,504.42</u>
TOTAL LIABILITIES		<u>\$46,167.16</u>
CAPITAL		
22-000-30225	Assigned - Open Purchase Orders-BS	\$2,399.94
22-000-30802	Restricted - NACCHO Grant Funds Remaining-BS	\$1,504.42
22-000-39050	Unassigned Fund Balance-MCPHD-BS	\$3,528,597.42
TOTAL CAPITAL		<u>\$3,532,501.78</u>
TOTAL LIABILITIES AND CAPITAL		<u>\$3,578,668.94</u>

Montgomery County Public Health District - Income Statement

For the Period Ended 01/31/2023

	Current Month Actual	Current Month Budget	Current Month Variance	YTD Actual	YTD Budget	YTD Variance	Total Annual Budget	%YTD Annual Budget	Annual Budget Remaining
Revenue									
Other Revenue									
Miscellaneous Income	\$7,536.00	\$7,518.00	\$18.00	\$30,090.00	\$30,072.00	\$18.00	\$90,216.00	33.35%	\$60,126.00
Proceeds from Grant Funding	\$78,781.09	\$167,851.51	(\$89,070.42)	\$352,552.37	\$730,695.50	(\$378,143.13)	\$1,884,850.21	18.70%	\$1,532,297.84
Immunization Fees	\$2,015.40	\$1,600.00	\$415.40	\$9,627.52	\$6,400.00	\$3,227.52	\$19,200.00	50.14%	\$9,572.48
Employee Medical Premiums	\$4,393.93	\$4,278.00	\$115.93	\$17,404.66	\$17,883.00	(\$478.34)	\$46,057.00	37.79%	\$28,652.34
Total Other Revenue	\$92,726.42	\$181,247.51	(\$88,521.09)	\$409,674.55	\$785,050.50	(\$375,375.95)	\$2,040,323.21	20.08%	\$1,630,648.66
Total Revenues	\$92,726.42	\$181,247.51	(\$88,521.09)	\$409,674.55	\$785,050.50	(\$375,375.95)	\$2,040,323.21	20.08%	\$1,630,648.66
Expenses									
Payroll Expenses									
Regular Pay	\$63,688.28	\$72,470.00	(\$8,781.72)	\$239,210.16	\$321,370.14	(\$82,159.98)	\$822,783.14	29.07%	\$583,572.98
Overtime Pay	\$37.30	\$259.00	(\$221.70)	\$324.74	\$1,033.00	(\$708.26)	\$2,559.00	12.69%	\$2,234.26
Paid Time Off	\$9,110.69	\$12,164.00	(\$3,053.31)	\$55,786.36	\$54,868.00	\$918.36	\$117,535.00	47.46%	\$61,748.64
Stipend Pay	\$0.00	\$0.00	\$0.00	\$0.00	\$5,000.00	(\$5,000.00)	\$15,000.00	0.00%	\$15,000.00
Payroll Taxes	\$5,176.93	\$6,262.00	(\$1,085.07)	\$20,813.22	\$27,903.63	(\$7,090.41)	\$69,644.63	29.88%	\$48,831.41
TCDRS Plan	\$6,919.55	\$8,041.00	(\$1,121.45)	\$27,290.04	\$35,363.00	(\$8,072.96)	\$88,950.00	30.68%	\$61,659.96
Health & Dental	\$1,679.49	\$8,569.00	(\$6,889.51)	\$6,865.10	\$16,078.00	(\$9,212.90)	\$29,958.00	22.92%	\$23,092.90
Health Insurance Claims	\$14,799.84	\$17,869.00	(\$3,069.16)	\$80,698.00	\$74,935.00	\$5,763.00	\$180,418.00	44.73%	\$99,720.00
Health Insurance Admin Fees	\$2,195.38	\$3,498.00	(\$1,302.62)	\$11,496.47	\$14,670.00	(\$3,173.53)	\$35,321.00	32.55%	\$23,824.53
Total Payroll Expenses	\$103,607.46	\$129,132.00	(\$25,524.54)	\$442,484.09	\$551,220.77	(\$108,736.68)	\$1,362,168.77	32.48%	\$919,684.68
Operating Expenses									
Unemployment Expense	\$0.00	\$180.00	(\$180.00)	\$0.00	\$720.00	(\$720.00)	\$2,160.00	0.00%	\$2,160.00
Accounting/Auditing Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,000.00	0.00%	\$7,000.00
Credit Card Processing Fee	\$73.71	\$65.00	\$8.71	\$295.97	\$260.00	\$35.97	\$780.00	37.94%	\$484.03
Capital Lease Interest Expense	\$3,821.70	\$3,849.65	(\$27.95)	\$15,368.61	\$15,939.60	(\$570.99)	\$38,990.83	39.42%	\$23,622.22
Community Education	\$0.00	\$0.00	\$0.00	\$12.99	\$2,100.00	(\$2,087.01)	\$2,100.00	0.62%	\$2,087.01
Community Preparedness Supplies	\$0.00	\$2,520.00	(\$2,520.00)	\$0.00	\$30,221.00	(\$30,221.00)	\$181,059.53	0.00%	\$181,059.53
Computer Software	(\$975.30)	\$2,708.65	(\$3,683.95)	\$3,528.66	\$10,834.60	(\$7,305.94)	\$43,912.83	8.04%	\$40,384.17

Montgomery County Public Health District - Income Statement

For the Period Ended 01/31/2023

	Current Month Actual	Current Month Budget	Current Month Variance	YTD Actual	YTD Budget	YTD Variance	Total Annual Budget	%YTD Annual Budget	Annual Budget Remaining
Computer Supplies/Non-Cap.	\$0.00	\$0.00	\$0.00	\$1,603.74	\$3,702.01	(\$2,098.27)	\$19,464.13	8.24%	\$17,860.39
Conferences - Fees, Travel, & Meals	\$0.00	\$0.00	\$0.00	\$3,057.36	\$11,339.00	(\$8,281.64)	\$21,345.84	14.32%	\$18,288.48
Contractual Obligations- Other	\$2,000.00	\$2,003.00	(\$3.00)	\$8,000.00	\$8,012.00	(\$12.00)	\$18,525.00	43.18%	\$10,525.00
Disposable Medical Supplies	\$2,503.92	\$850.00	\$1,653.92	\$2,503.92	\$4,034.00	(\$1,530.08)	\$9,469.00	26.44%	\$6,965.08
Durable Medical Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$170.00	0.00%	\$170.00
Employee Recognition	\$0.00	\$0.00	\$0.00	\$0.00	\$100.00	(\$100.00)	\$1,675.00	0.00%	\$1,675.00
Fuel - Auto	\$0.00	\$50.00	(\$50.00)	\$78.42	\$200.00	(\$121.58)	\$600.00	13.07%	\$521.58
Insurance	\$0.00	\$0.00	\$0.00	\$0.00	\$1,500.00	(\$1,500.00)	\$12,000.00	0.00%	\$12,000.00
Legal Fees	\$1,660.50	\$0.00	\$1,660.50	\$5,148.00	\$500.00	\$4,648.00	\$1,500.00	343.20%	(\$3,648.00)
Management Fees	\$8,333.33	\$12,885.63	(\$4,552.30)	\$33,333.32	\$52,996.52	(\$19,663.20)	\$137,234.06	24.29%	\$103,900.74
Meeting Expenses	\$0.00	\$0.00	\$0.00	\$0.00	\$75.00	(\$75.00)	\$300.00	0.00%	\$300.00
Mileage Reimbursements	\$0.00	\$29.00	(\$29.00)	\$853.76	\$732.95	\$120.81	\$3,849.45	22.18%	\$2,995.69
Office Supplies	\$497.56	\$3,201.72	(\$2,704.16)	\$1,373.70	\$14,618.88	(\$13,245.18)	\$33,427.48	4.11%	\$32,053.78
Other Services - Community Paramedicine	\$2,000.00	\$3,000.00	(\$1,000.00)	\$6,500.00	\$12,000.00	(\$5,500.00)	\$36,000.00	18.06%	\$29,500.00
Postage	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$540.00	0.00%	\$540.00
Printing Services	\$0.00	\$1,000.00	(\$1,000.00)	\$75.00	\$4,750.00	(\$4,675.00)	\$12,006.02	0.62%	\$11,931.02
Professional Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$25,200.00	0.00%	\$25,200.00
Rent	\$5,476.72	\$15,828.84	(\$10,352.12)	\$21,825.07	\$63,808.36	(\$41,983.29)	\$150,697.85	14.48%	\$128,872.78
Small Equipment & Furniture	\$0.00	\$2,200.00	(\$2,200.00)	\$1,339.66	\$2,200.00	(\$860.34)	\$18,750.00	7.14%	\$17,410.34
Telephones-Cellular	\$554.42	\$1,404.30	(\$849.88)	\$2,793.08	\$6,044.34	(\$3,251.26)	\$15,598.78	17.91%	\$12,805.70
Training/Related Expenses-CE	\$0.00	\$1,500.00	(\$1,500.00)	\$242.27	\$1,500.00	(\$1,257.73)	\$12,379.00	1.96%	\$12,136.73
Travel Expenses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$84,450.00	0.00%	\$84,450.00
Worker's Compensation Insurance	\$88.59	\$161.00	(\$72.41)	\$333.31	\$926.29	(\$592.98)	\$1,896.29	17.58%	\$1,562.98
Total Operating Expenses	\$26,035.15	\$53,436.79	(\$27,401.64)	\$108,266.84	\$249,114.55	(\$140,847.71)	\$893,081.09	12.12%	\$784,814.25
Total Expenses	\$129,642.61	\$182,568.79	(\$52,926.18)	\$550,750.93	\$800,335.32	(\$249,584.39)	\$2,255,249.86	24.42%	\$1,704,498.93
Revenue over Expenditures	(\$36,916.19)	(\$1,321.28)	(\$35,594.91)	(\$141,076.38)	(\$15,284.82)	(\$125,791.56)	(\$214,926.65)	65.64%	(\$73,850.27)

Agenda Item # 16

Montgomery County Public Health District
Budget Amendment - Fiscal Year Ending September 30, 2023
Supplement to the Amendment Presented to the Board on March 9, 2023

Account	Description	Total	Notes	Impact
Department 321 UASI				
22-321-41550	Proceeds from Grant Funding - UASI	58,044.00	Grant Activation 01/01/2023	Increase Revenue
22-321-44100	Employee Medical Premiums - UASI	3,414.00	Grant Activation 01/01/2023	Increase Revenue
	Total Revenue - UASI	61,458.00		
22-321-51100	Regular Pay - UASI	28,758.00	Grant Activation 01/01/2023	Increase Expense
22-321-51300	Paid Time Off - UASI	6,267.00	Grant Activation 01/01/2023	Increase Expense
22-321-51500	Payroll Taxes - UASI	2,665.00	Grant Activation 01/01/2023	Increase Expense
22-321-51650	TCDRS Plan - UASI	3,387.00	Grant Activation 01/01/2023	Increase Expense
22-321-51700	Health & Dental - UASI	2,118.00	Grant Activation 01/01/2023	Increase Expense
22-321-51710	Health Insurance Claims - UASI	12,566.00	Grant Activation 01/01/2023	Increase Expense
22-321-51720	Health Insurance Admin Fees - UASI	2,367.00	Grant Activation 01/01/2023	Increase Expense
22-321-52975	Community Preparedness Supplies - UASI	2,400.00	Grant Activation 01/01/2023	Increase Expense
22-321-56200	Mileage Reimbursements - UASI	261.00	Grant Activation 01/01/2023	Increase Expense
22-321-58200	Telephones-Cellular - UASI	630.00	Grant Activation 01/01/2023	Increase Expense
22-321-59350	Worker's Compensation Insurance - UASI	39.00	Grant Activation 01/01/2023	Increase Expense
	Total Expenses - UASI	61,458.00		
Department 322 UASI Travel				
22-322-41550	Proceeds from Grant Funding - UASI Travel	4,350.00	Grant Activation 01/01/2023	Increase Revenue
	Total Revenue - UASI Travel	4,350.00		
22-322-53150	Conferences - Fees, Travel, & Meals - UASI Travel	4,000.00	Grant Activation 01/01/2023	Increase Expense
22-322-56300	Office Supplies - UASI Travel	350.00	Grant Activation 01/01/2023	Increase Expense
	Total Expenses - UASI Travel	4,350.00		
Department 323 UASI M&A				
22-323-41550	Proceeds from Grant Funding - UASI M&A	3,978.00	Grant Activation 01/01/2023	Increase Revenue
	Total Revenue - UASI M&A	3,978.00		
22-323-51100	Regular Pay - UASI M&A	3,045.00	Grant Activation 01/01/2023	Increase Expense
22-323-51500	Payroll Taxes - UASI M&A	930.00	Grant Activation 01/01/2023	Increase Expense
22-323-59350	Worker's Compensation Insurance - UASI M&A	3.00	Grant Activation 01/01/2023	Increase Expense
	Total Expenses - UASI M&A	3,978.00		
	Total Revenue	69,786.00	Increase in Revenue	
	Total Expense	69,786.00	Increase in Expense	
Increase / (Decrease) Net Revenue over Expenses		0.00		
FY 2023 Budgeted Net Revenue over Expenses		(214,926.65)		
FY 2023 Amended Budgeted Net Revenue over Expenses		(214,926.65)		

AGENDA ITEM # 17

Consider and act on payment of invoices (Judge Mark Keough, Chairman-Public Health Board)

TOTAL FOR
PUBLIC HEALTH INVOICES
\$122,293.22

Montgomery County Hospital District
Invoice Expense Allocation Report
Board Meeting 11/03/2022- Public Health Paid Invoices

Vendor Name	Invoice Date	Invoice No.	Payment Date	Payment No.	Invoice Description	Account No.	Account Description	Amount
AMAZON.COM LLC	8/1/2022	487535683895	8/17/2022	8809	OFFICE SUPPLIES	22-401-56300	Office Supplies-Publi	\$93.35
	9/1/2022	975764739589	9/14/2022	9033	OFFICE SUPPLIES	22-401-56300	Office Supplies-Publi	\$320.80
	9/1/2022	839698675556	9/14/2022	9034	OFFICE SUPPLIES	22-401-56300	Office Supplies-Publi	\$58.33
	9/1/2022	449694934737	9/14/2022	9035	OFFICE SUPPLIES	22-401-56300	Office Supplies-Publi	\$22.64
	Totals for AMAZON.COM LLC:							\$495.12
AMERITAS LIFE INSURANCE CO	8/1/2022	010-048743 8.1.22	8/1/2022	7156	ACCT 010-048743-00002 VISION PREMIUMS JULY 22	22-126-51700	Health & Dental-IDCU/	\$13.56
						22-127-51700	Health & Dental-Workf	\$34.10
						22-128-51700	Health & Dental-Expan	\$7.35
						22-129-51700	Health & Dental-Dispa	\$7.35
						22-130-51700	Health & Dental-CPS/H	\$38.80
						22-214-51700	Health & Dental-CPS/C	\$19.40
						22-319-51700	Health & Dental-MRC U	\$38.80
						22-401-51700	Health & Dental-Publi	\$26.75
						22-415-51700	Health & Dental-RLSS/	\$7.35
						22-900-51700	Health & Dental-MCPHD	\$19.40
	9/1/2022	010-48743 9.1.22(22)	9/1/2022	7251	ACCT 010-048743-00002 VISION PREMIUMS AUG 22	22-126-51700	Health & Dental-IDCU/	\$13.56
						22-127-51700	Health & Dental-Workf	\$34.10
						22-128-51700	Health & Dental-Expan	\$7.35
						22-129-51700	Health & Dental-Dispa	\$7.35
						22-130-51700	Health & Dental-CPS/H	\$38.80
						22-214-51700	Health & Dental-CPS/C	\$19.40
						22-319-51700	Health & Dental-MRC U	\$19.40
						22-401-51700	Health & Dental-Publi	\$26.75
						22-415-51700	Health & Dental-RLSS/	\$7.35
						22-900-51700	Health & Dental-MCPHD	\$19.40
						Totals for AMERITAS LIFE INSURANCE CORP:		\$406.32
BCBS OF TEXAS (DENTAL)	8/1/2022	123611 8.1.22 (22)	8/1/2022	7158	BILL PERIOD: 08-01-2022 TO 09-01-2022	22-126-51700	Health & Dental-IDCU/	\$89.00
						22-127-51700	Health & Dental-Workf	\$98.76
						22-128-51700	Health & Dental-Expan	\$34.32
						22-129-51700	Health & Dental-Dispa	\$32.88
						22-130-51700	Health & Dental-CPS/H	\$224.20
						22-214-51700	Health & Dental-CPS/C	\$135.20
						22-319-51700	Health & Dental-MRC U	\$135.20
						22-401-51700	Health & Dental-Publi	\$82.32
						22-415-51700	Health & Dental-RLSS/	\$34.32
						22-900-51700	Health & Dental-MCPHD	\$135.20
	9/1/2022	123611 9.1.22(22)	9/1/2022	7252	BILL PERIOD: 09-01-2022 TO 10-01-2022	22-126-51700	Health & Dental-IDCU/	\$89.00
						22-127-51700	Health & Dental-Workf	\$98.76
						22-128-51700	Health & Dental-Expan	\$34.32
						22-129-51700	Health & Dental-Dispa	\$16.44
						22-130-51700	Health & Dental-CPS/H	\$224.20
						22-214-51700	Health & Dental-CPS/C	\$135.20
						22-319-51700	Health & Dental-MRC U	\$135.20
						22-401-51700	Health & Dental-Publi	\$82.32
						22-415-51700	Health & Dental-RLSS/	\$34.32

Montgomery County Hospital District
Invoice Expense Allocation Report
Board Meeting 11/03/2022- Public Health Paid Invoices

Vendor Name	Invoice Date	Invoice No.	Payment Date	Payment No.	Invoice Description	Account No.	Account Description	Amount
						22-900-51700	Health & Dental-MCPHD	\$135.20
						Totals for BCBS OF TEXAS (DENTAL):		\$1,986.36
CDW GOVERNMENT, INC.	8/1/2022	BT44767	8/17/2022	8816	LVO UNIVERSAL USB C DOCK	22-125-53100	Computer Supplies/Non-Cap	\$197.99
	8/19/2022	CG01795	9/7/2022	8988	COMPUTER SUPPLIES	22-129-53100	Computer Supplies/Non-Cap	\$392.02
						Totals for CDW GOVERNMENT, INC.:		\$590.01
CRESTLINE SPECIALTIES, INC.	8/25/2022	4855536	9/7/2022	113426	TICK & MOSQUITO KIT	22-125-52975	Community Preparedness Supp	\$1,898.47
	9/1/2022	4835729	9/14/2022	113479	PRINTING SERVICES	22-129-57000	Printing Services-Dispa	\$788.40
						Totals for CRESTLINE SPECIALTIES, INC.:		\$2,686.87
DARDEN FOWLER & CREIGHTON	8/1/2022	21661	8/17/2022	8821	PROFESSIONAL FEES	22-900-55500	Legal Fees-MCPHD	\$450.00
						Totals for DARDEN FOWLER & CREIGHTON:		\$450.00
DEARBORN NATIONAL LIFE INS	8/1/2022	F021753 8.1.22	8/1/2022	7160	LIFE/DISABILITY 08/01/22-08/31/22	22-126-51700	Health & Dental-IDCU/	\$42.82
						22-127-51700	Health & Dental-Workf	\$163.23
						22-128-51700	Health & Dental-Expan	\$39.93
						22-129-51700	Health & Dental-Dispa	\$86.28
						22-130-51700	Health & Dental-CPS/H	\$175.96
						22-214-51700	Health & Dental-CPS/C	\$111.25
						22-319-51700	Health & Dental-MRC U	\$135.71
						22-401-51700	Health & Dental-Publi	\$92.51
						22-415-51700	Health & Dental-RLSS/	\$68.65
						22-900-51700	Health & Dental-MCPHD	\$113.80
	9/1/2022	F021753 9.1.22(22)	9/7/2022	7258	LIFE/DISABILITY 09/01/22-09/30/22	22-126-51700	Health & Dental-IDCU/	\$42.82
						22-127-51700	Health & Dental-Workf	\$163.23
						22-128-51700	Health & Dental-Expan	\$39.93
						22-129-51700	Health & Dental-Dispa	\$43.14
						22-130-51700	Health & Dental-CPS/H	\$175.96
						22-214-51700	Health & Dental-CPS/C	\$111.25
						22-319-51700	Health & Dental-MRC U	(\$2.62)
						22-401-51700	Health & Dental-Publi	\$92.51
						22-415-51700	Health & Dental-RLSS/	\$68.65
						22-900-51700	Health & Dental-MCPHD	\$113.80
						Totals for DEARBORN NATIONAL LIFE INS CO KNOWN AS BCBS:		\$1,878.81
HAWKINS WILLIAMS, ALICIA	9/16/2022	WIL*09162022	9/21/2022	9235	MILEAGE - (09/27/2022 - 09/27/2022)	22-130-56200	Mileage Reimbursements-C	\$207.50
	9/19/2022	WIL*09192022	9/21/2022	9235	PER DIEM - PHEP MEETING (09/27/2022-09/28/2022)	22-130-53150	Conferences - Fees, Travel,	\$96.00
						Totals for HAWKINS WILLIAMS, ALICIA:		\$303.50
IMPAC FLEET	8/1/2022	3QLCD-779273 (22	8/11/2022	7162	FUEL PURCHASE FOR JULY 2022	22-900-54700	Fuel - Auto-MCPHD	\$64.53
						Totals for IMPAC FLEET:		\$64.53
JP MORGAN CHASE BANK	8/5/2022	0036741 8.5.22 (22	8/19/2022	7223	JPM CREDIT CARD TRANSACTIONS FOR AUG 2022	22-351-57000	Printing Services-MRC N	\$3,495.58
						22-900-54450	Employee Recognition-MC	\$975.00
	9/1/2022	0036741 9.5.22(22	9/19/2022	7320	JPM CREDIT CARD TRANSACTIONS FOR SEPT 2022	22-401-53900	Disposable Medical Supplie	\$119.85
						Totals for JP MORGAN CHASE BANK:		\$4,590.43

Montgomery County Hospital District
Invoice Expense Allocation Report
Board Meeting 11/03/2022- Public Health Paid Invoices

Vendor Name	Invoice Date	Invoice No.	Payment Date	Payment No.	Invoice Description	Account No.	Account Description	Amount
LANGUAGE LINE SERVICES, LTI	9/1/2022	10621078	9/14/2022	113490	OVER THE PHONE INTERPRETATION	22-127-53050	Computer Software-Workf	\$29.37
	9/30/2022	10643206	10/12/2022	113719	OVER-THE-PHONE INTERPRETATION	22-127-53050	Computer Software-Workf	\$185.92
	Totals for LANGUAGE LINE SERVICES, LTD dba LANGUAGELINE SOLUTIONS:							\$215.29
LILES PARKER ATTORNEYS & C	8/1/2022	2283	8/24/2022	113328	PROFESSIONAL SERVICES JULY 2022	22-900-55500	Legal Fees-MCPHD	\$1,035.00
	Totals for LILES PARKER ATTORNEYS & COUNSELORS AT LAW:							\$1,035.00
MCKESSON GENERAL MEDICAL	8/10/2022	19690405	8/24/2022	8890	MEDICAL SUPPLIES	22-401-53900	Disposable Medical Supplie	\$242.58
	8/22/2022	19731359	9/7/2022	8999	MEDICAL SUPPLIES	22-401-53900	Disposable Medical Supplie	\$233.30
	9/15/2022	19825441	9/28/2022	9397	TRANSPORT BARIATRIC CHAIR	22-401-57750	Small Equipment & Furnitu	\$334.23
	Totals for MCKESSON GENERAL MEDICAL CORP.:							\$810.11
MEDLINE INDUSTRIES, INC	8/12/2022	2224252121	8/31/2022	8948	MEDICAL SUPPLIES	22-401-53900	Disposable Medical Supplie	\$152.72
	9/15/2022	2228868982	9/28/2022	9400	MEDICAL SUPPLIES	22-401-53900	Disposable Medical Supplie	\$1,886.50
	Totals for MEDLINE INDUSTRIES, INC:							\$2,039.22
OPTIQUEST INTERNET SERVICE	8/4/2022	78846	8/24/2022	8896	NEXTGEN HOSTING	22-401-53050	Computer Software-Publi	\$400.00
	9/8/2022	79068	9/14/2022	9073	NEXTGEN HOSTING	22-401-53050	Computer Software-Publi	\$400.00
	Totals for OPTIQUEST INTERNET SERVICES, INC.:							\$800.00
SIMS, CHARLES R M.D.	8/1/2022	AUG 051116-076	8/17/2022	8848	MONTHLY RETAINER FOR AUGUST 2022	22-130-53330	Contractual Obligations- Ot	\$1,833.00
						22-401-53330	Contractual Obligations- Ot	\$167.00
	9/1/2022	SEP 051116-077	9/14/2022	9077	MONTHLY RETAINER FOR SEPTEMBER 2022	22-130-53330	Contractual Obligations- Ot	\$1,833.00
						22-401-53330	Contractual Obligations- Ot	\$167.00
Totals for SIMS, CHARLES R M.D.:							\$4,000.00	
TEXAS HHSC	8/18/2022	FS CLM NO 18718	8/18/2022	113303	OVERPAYMENT 1115	22-501-43750	1115 Waiver - Paramedicin	\$25,448.05
	Totals for TEXAS HHSC:							\$25,448.05
VERIZON WIRELESS (POB 66010)	8/9/2022	9913077144 (22)	8/17/2022	113275	ACCOUNT # 920161350-00001 JUL 10 - AUG 09	22-126-58200	Telephones-Cellular-IDCU/	\$80.50
						22-127-58200	Telephones-Cellular-Workf	\$156.66
						22-128-58200	Telephones-Cellular-Expan	\$40.25
						22-129-58200	Telephones-Cellular-Dispa	\$78.24
						22-130-58200	Telephones-Cellular-CPS/H	\$195.62
						22-214-58200	Telephones-Cellular-CPS/C	\$78.24
						22-319-58200	Telephones-Cellular-MRC I	\$78.24
						22-900-58200	Telephones-Cellular-MCPH	\$39.12
	9/9/2022	9915417273 (22)	9/14/2022	113506	ACCOUNT # 920161350-00001 AUG 10 - SEP 09	22-214-58200	Telephones-Cellular-CPS/C	\$37.99
						22-126-58200	Telephones-Cellular-IDCU/	\$40.25
						22-126-58200	Telephones-Cellular-IDCU/	\$80.50
						22-127-58200	Telephones-Cellular-Workf	\$156.54
						22-129-58200	Telephones-Cellular-Dispa	\$78.24
						22-130-58200	Telephones-Cellular-CPS/H	\$195.60
						22-214-58200	Telephones-Cellular-CPS/C	\$40.25
						22-319-58200	Telephones-Cellular-MRC I	\$78.24
						22-900-58200	Telephones-Cellular-MCPH	\$39.12

Vendor Name	Invoice Date	Invoice No.	Payment Date	Payment No.	Invoice Description	Account No.	Account Description	Amount
Totals for VERIZON WIRELESS (POB 660108):								\$1,493.60

Account Summary

Account Number	Description	Net Amount
22-501-56525	Other Services-Community Paramedicine-1115-BS	\$73,000.00
22-125-52975	Community Preparedness Supplies-CPS/H	\$1,898.47
22-125-53100	Computer Supplies/Non-Cap.-CPS/H	\$197.99
22-126-51700	Health & Dental-IDCU/	\$290.76
22-126-58200	Telephones-Cellular-IDCU/	\$201.25
22-127-51700	Health & Dental-Workf	\$592.18
22-127-53050	Computer Software-Workf	\$215.29
22-127-58200	Telephones-Cellular-Workf	\$313.20
22-128-51700	Health & Dental-Expan	\$163.20
22-128-58200	Telephones-Cellular-Expan	\$40.25
22-129-51700	Health & Dental-Dispa	\$193.44
22-129-53100	Computer Supplies/Non-Cap.-Dispa	\$392.02
22-129-57000	Printing Services-Dispa	\$788.40
22-129-58200	Telephones-Cellular-Dispa	\$156.48
22-130-51700	Health & Dental-CPS/H	\$877.92
22-130-53150	Conferences - Fees, Travel, & Meals-CPS/H	\$96.00
22-130-53330	Contractual Obligations- Other-CPS/H	\$3,666.00
22-130-56200	Mileage Reimbursements-CPS/H	\$207.50
22-130-58200	Telephones-Cellular-CPS/H	\$391.22
22-214-51700	Health & Dental-CPS/C	\$531.70
22-214-58200	Telephones-Cellular-CPS/C	\$156.48
22-319-51700	Health & Dental-MRC U	\$461.69
22-319-58200	Telephones-Cellular-MRC U	\$156.48
22-351-57000	Printing Services-MRC N	\$3,495.58
22-401-51700	Health & Dental-Publi	\$403.16
22-401-53050	Computer Software-Publi	\$800.00
22-401-53330	Contractual Obligations- Other-Publi	\$334.00
22-401-53900	Disposable Medical Supplies-Publi	\$2,634.95
22-401-56300	Office Supplies-Publi	\$495.12
22-401-57750	Small Equipment & Furniture-Publi	\$334.23
22-415-51700	Health & Dental-RLSS/	\$220.64
22-501-43750	1115 Waiver - Paramedicine-1115	\$25,448.05
22-900-51700	Health & Dental-MCPHD	\$536.80
22-900-54450	Employee Recognition-MCPHD	\$975.00
22-900-54700	Fuel - Auto-MCPHD	\$64.53
22-900-55500	Legal Fees-MCPHD	\$1,485.00
22-900-58200	Telephones-Cellular-MCPHD	\$78.24
TOTAL		<u>\$122,293.22</u>

Vendor Name	Invoice Date	Invoice No.	Payment D	Account Description	Account No.	Account Description	Amount
MCHD Comm Paramedicine	8/31/2022	25935-1	8/31/2022	August 2022 Billable Encounters	22-501-56525	Receiving from Component Unit-BS	\$26,200.00
						Totals for MCHD Comm Paramedicine:	\$26,200.00
MCHD Comm Paramedicine	8/31/2022	25939-	8/31/2022	August 2022 Community Outreach Events	22-501-56525	Receiving from Component Unit-BS	\$2,500.00
						Totals for MCHD Comm Paramedicine:	\$2,500.00
MCHD Comm Paramedicine	9/30/2022	26042-1	9/30/2022	September 2022 Community Outreach Events	22-501-56525	Receiving from Component Unit-BS	\$3,000.00
						Totals for MCHD Comm Paramedicine:	\$3,000.00
MCHD Comm Paramedicine	9/30/2022	26090-1	9/30/2022	September 2022 Billable Encounters	22-501-56525	Receiving from Component Unit-BS	\$41,300.00
						Totals for MCHD Comm Paramedicine:	\$41,300.00
						Grand Total	\$73,000.00

Agenda Item # 18

To: MCPHD Board of Directors
From: Jason Millsaps, Transition Manager
Date: March 9, 2023
Re: **Audit of MCPHD**



Update and discuss action on external auditor, Patillo, Brown and Hill for audit services. (Jason Millsaps, Transition Manager)

Agenda Item # 19

To: MCPHD Board of Directors

From: Randy Johnson, Executive Director

Date: March 9, 2023

Re: Executive Session – Patillo, Brown and Hill



Convene into executive session as authorized by Texas Government Code, Chapter 551, Section 551.071 to receive legal advice on the audit by Patillo, Brown and Hill.

Agenda Item # 20

To: MCPHD Board of Directors

From: Randy Johnson, Executive Director

Date: March 9, 2023

Re: Reconvene from Executive Session



Reconvene from executive session and take action on item number 19 discussed in executive session, if needed.

Agenda Item # 21

To: MCPHD Board of Directors
From: Randy Johnson, Executive Director
Date: March 9, 2023
Re: Board meeting schedule



Consider and act on Montgomery County Public Health District future board meeting schedule.

Agenda Item # 22

To: MCPHD Board of Directors
From: Randy Johnson, Executive Director
Date: March 9, 2023
Re: Future Meetings



Consider and act discussion of items to be placed on agenda of the next meeting of the Montgomery County Public Health District Board of Directors.