

**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, September 11, 2025

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. Approval of Minutes from June 12, 2025 Montgomery County Public Health District Regular BOD meeting.
8. Report on activities related to Epidemiology and Emergency Preparedness. (Meghna Bhatt, Epidemiology Division Manager– MCPHD)
9. Report on activities related to the Public Health Clinic. (Melissa Miller, COO – MCHD)
10. Review and approve financial report regarding District's operations. (Brett Allen, CFO – MCHD)
11. Consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2025. (Brett Allen, CFO - MCHD)

12. Consider and act on ratification of payment of invoices related to expenditures. (Brett Allen, CFO – MCHD)
13. Consider and act on closing of Public Health District Woodforest Operating Bank Account. (Brett Allen, CFO – MCHD)
14. Update on the merging of MCPHD with MCHD. (Randy Johnson, Executive Director MCPHD)
15. Consider and act on the September 30, 2025 dissolution of the Montgomery County Public Health District as per The Amended and Restated Montgomery County Public Health District Cooperative Agreement. (Randy Johnson, Executive Director MCPHD)
16. Consider and act on tentative Public Health District board meeting scheduled for September 25, 2025 as needed. (Melissa Miller – COO – MCHD)
17. Adjourn.

The Board of Directors of the Montgomery County Public Health District reserves the right to adjourn into closed executive session at any time during the course of this meeting to discuss any of the matters listed above as authorized by Texas Government Code, Sections 551.071 (Consultation with District's Attorney); 551.072 (Deliberations about Real property); 551.073 (Deliberations about gifts and Donations); 551.074 (Personnel Matters); 551.076 (Deliberations about Security Devices); and 551.086 (Economic Development).

**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., June 12, 2025 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

Mrs. Kelly Inman, MCHD
Judge Mark Keough, Montgomery County Judge, Chairman
Dr. Richard Calvin, City of Conroe

Board Members not present

Steven Parker, City of Panorama Village

Non-Voting members not present:

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

3. Invocation

Led by Mr. Bob Bagley

4. Pledge of Allegiance

Led by Mr. Bob Bagley

5. Public Comments

No one from the public made a comment.

6. Approval of Minutes from March 6, 2025 Public Health District Regular Board meeting.

Dr. Calvin made a motion to approve Minutes from March 6, 2025 Public Health District Regular Board meeting. Mrs. Inman offered a second and motion passed unanimously.

7. Report on activities related to Epidemiology and Emergency Preparedness. (Meghna Bhatt, Epidemiology Division Manager– MCPHD)

Mrs. Meghna Bhatt, Epidemiology Division Manager presented a report to the board on activities related to Epidemiology and Emergency Preparedness.

8. Report on activities related to the Public Health Clinic. (Jonathon Hopkins, Nurse Manager – Clinic)

Mrs. Melissa Miller, COO of MCHD presented a report to the board on activities related to the Public Health Clinic.

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

Mr. Brett Allen, CFO presented the financial report to the board.

Mrs. Inman made a motion to approve the financial report presented to the board. Dr. Calvin offered a second and motion passed unanimously.

10. Consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2025. (Brett Allen, CFO - MCPHD)

Dr. Calvin a motion to consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2025. Mrs. Inman offered a second and motion passed unanimously.

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

Mrs. Inman made a motion to consider and act on ratification of payment of invoices related to expenditures. Judge Keough offered a second and motion passed unanimously.

12. Update on the merging of MCPHD with MCHD. (Randy Johnson, Executive Director MCPHD)

Mrs. Melissa Miller, COO of MCHD gave the board an update on the merging on MCPHD with MCHD.

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

- Next board meeting September 11, 2025

14. Adjourn

Meeting adjourned at 4:02 p.m.

Agenda Item # 8

To: MCPHD Board of Directors
From: Meghna Bhatt, Epidemiology Division Manager
Date: September 11, 2025
Re: **Epidemiology and Preparedness Report**



Epidemiology Division

The information provided below highlights notable events but does not represent the full scope of activities. It serves as a summary rather than a comprehensive account of all occurrences.

June 2025

General epidemiological investigation and surveillance of reported notifiable diseases remain ongoing, with MCPHD Epidemiology staff working on investigations of notifiable conditions.

MCPHD investigated five cases of flea-borne typhus cases. All cases were locally acquired on private property around Montgomery County with no travel reported. MCPHD has followed the national trend of an increase in pertussis cases. In June, MCPHD investigated 20 cases of pertussis as opposed to 2 cases this time last year.

MCPHD investigated two cases of *Cyclospora*, both related to travel, with one travelling to Mexico and the second case travelling to New York. Both cases have recovered at home.

On June 5th, the Epidemiology team hosted the Biannual Infection Control Practitioners (ICP) meeting, held virtually for the first time, resulting in higher attendance. The purpose of this meeting is to coordinate all disease surveillance and reporting efforts and requirements with Montgomery County hospital ICP's and congregate setting staff whom participate in disease reporting. The agenda included topics presented by Epidemiology and other hospital staff on infection prevention in healthcare settings, current public health topics of importance and reporting requirements. MCPHD also presented on two rare MCPHD cases in May 2025: (Acute Flaccid Myelitis and Infant Botulism).

On June 16th – 18th, Epidemiologist attended the Annual Association for Professionals in Infection Control (APIC) conference in Phoenix, Arizona. Epidemiologist connected with peers, learned about new and innovative tools in infection prevention, and attended presentations to further MCPHD's ability to provide infection control guidance for utilization at various facility types.

On June 17th MCPHD Preparedness staff met with the Montgomery County Office of Homeland Security and Emergency Management (MCOHSEM) and MCHD to discuss the transition from Annex H to ESF-8. This will be an ongoing process for all parties involved to update their ESF-8 plans.

On June 24th, MCPHD collaborated with SETRAC (Southeast Texas Regional Advisory Council) to host SETRAC's Emergency Preparedness Boot Camp at MCPHD for the Vulnerable Populations groups (long-term care facilities, nursing homes, assisted living facilities, home health agencies, dialysis centers, inpatient mental health, hospice, and others). MCHD and MCOHSEM also participated and provided an overview of their roles as local emergency partners. Organizations had training on how to utilize STEAR and a patient tracking/evacuation toolkit to assist with meeting regulatory requirements. This also provided an opportunity to network with stakeholders and meet local emergency management partners.

On June 25th, MCPHD was notified of an in-state (Texas) *Salmonella* Infantis cluster. The origin of the cluster is unknown. The cluster was highly related by whole genome sequencing (WGS) with 0-3 allele difference. There are six cases reported in this cluster, with one belonging to MCPHD. The MCPHD case recovered at home.

In the late afternoon of June 30th, MCPHD received the PHEP Notice to Proceed, noting a 28% reduction in funds for the PHEP Budget Period 2 (July 1, 2025 – June 30, 2025).

July 2025

On July 10th, due to the 28% reduction in PHEP funding, the Chief Epidemiologist position was eliminated.

On July 22nd, MCPHD was notified of the first case of West Nile for the 2025 season. This was an immunocompromised male in his 60's residing in 77357.

M	60's	77357	Probable	WNV Neuroinvasive
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For this mosquito season, MCPHD is collaborating with the Montgomery County Mosquito Control and The Woodlands Township with data collection and information sharing. The Woodlands Township and Montgomery County Mosquito Control both conduct trapping and surveillance of mosquitoes for disease. Mosquito species collected are identified and tested for mosquito-borne diseases, like West Nile Virus. The Montgomery County Mosquito Control Program surveys areas of where positive samples are found to look for any mosquito breeding sites in the county right-of-way on public property, and conducts treatment activities. MCPHD's goal is to compare location of mosquito traps and where positive mosquitos have been caught to location of human West Nile Virus cases to determine if there is any correlation. MCPHD would like to also explore other potential contributing sources that can be mitigated to prevent human infection. This is a current and ongoing project.

During the month of July, MCPHD investigated seven cases of flea-borne typhus cases. Most cases were locally acquired on private property around Montgomery County. One case reported travel. Additionally, MCPHD investigated eight cases of *Cyclospora*. Three cases traveled to Mexico. Five cases had no history of travel and no relation to each other. Exposure is unknown.

Conferences:

- July 14th- July 18th: Epidemiology Division Manager attended the NACCHO 360 Conference in Anaheim, California. This is the only conference that focuses on the challenges and opportunities for local health. The conference offers an opportunity to share the latest research, ideas, strategies, and innovations. Epidemiology Division Manager also had the opportunity to network with peers from other local health departments who have also had significant funding cuts due to grant terminations.
- July 22nd- July 23rd: Epidemiologist attended the virtual DSHS Healthcare Safety Conference.
- July 24th – July 25th: Epidemiologist attended the 2025 DSHS Flu and Respiratory Conference in Austin, Texas. Epidemiologist also attended a tabletop discussing investigations of Novel Influenza. The tabletop used a practical scenario to exercise how MCPHD can respond to novel Influenza in the future.

August 2025

On August 7th, MCPHD received notification at 1:00 AM reporting a positive blood culture for *Neisseria Meningitidis*, an immediately notifiable condition. *Neisseria meningitidis* is a rare but life-threatening illness that requires prompt antibiotic treatment for patients and antibiotic prophylaxis for their close contacts. The PUI was a 62- year-old female. A lengthy and thorough investigation was conducted. All exposed contacts were contacted by MCPHD and prophylaxis was recommended as needed. The PUI was treated at a local Montgomery County hospital and recovered.

On August 8th, MCPHD Preparedness staff met with the DSHS Preparedness Management Unit from the Center for Health Emergency Preparedness to discuss the Jurisdictional Evaluation Tool (JET) MCPHD had completed in earlier

months. The intended outcome of the JET is to assess the jurisdiction's preparedness and response readiness and identify strengths, areas of improvement, and gaps in preparedness programs within the jurisdiction.

On August 13th, MCPHD was notified of a positive Hantavirus lab in a 54-year-old female who works retail and reported a rat issue at her store. Hantavirus is a rare but potentially fatal viral disease transmitted to humans by infected rodents through their urine, droppings, and saliva. In North and South America, it most often causes Hantavirus Pulmonary Syndrome (HPS), a severe respiratory illness.

Additionally in August, MCPHD investigated:

- Eight cases of *Cyclospora*. Five cases traveled to Mexico, one traveled to Japan. Two cases at this time have unknown travel or exposures.
- One case of Echinocandin resistant *Candida auris* case. This is the rarest type of *Candida auris* that is highly resistant to last defense antifungal treatment. This case previously had *Candida auris* that was not Echinocandin resistant. Laboratory results were sent to DSHS and CDC.
- Two probable cases of West Nile Virus- both are currently under investigation as of 9/3/2025.

M	50's	77318	Probable	WNV Neuroinvasive
M	80's	77354	Probable	WNV Non Neuroinvasive

On August 17th – August 22nd, Epidemiology Division Manager attended the Centers for Domestic Preparedness Introduction to SNS Operations course. This five-day course introduced SNS medical countermeasures, medical materiel, and response operations during a public health incident, and presented planning considerations and capabilities related to requesting, receiving, distributing, dispensing, and administering SNS medical countermeasures (MCM) and medical materiel. This training also provided the opportunity to meet with valuable state and national partners at a critical time as our region is preparing for the FIFA World Cup 2026.

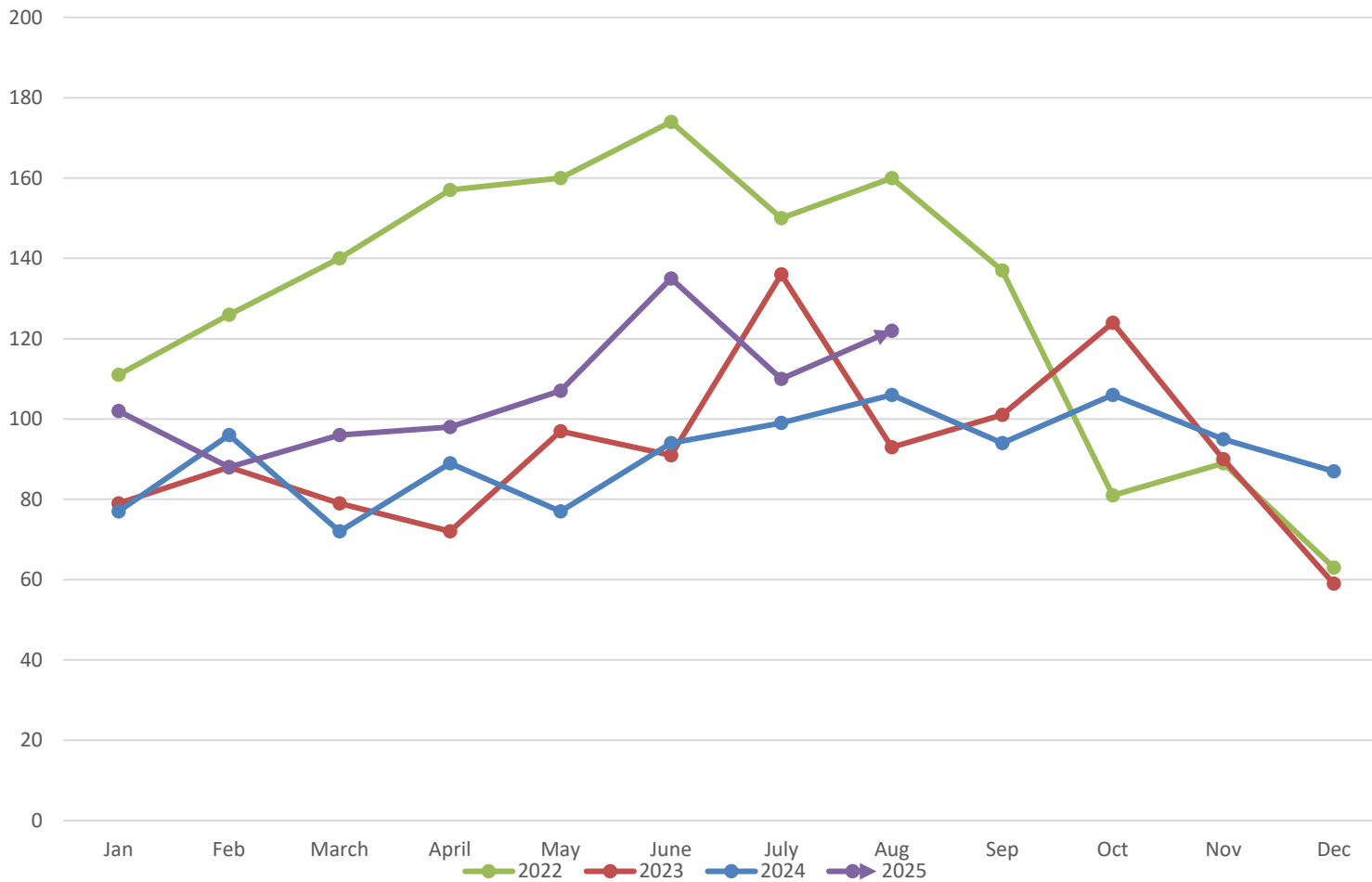
On August 29th, MCPHD received notification of suspect *Neisseria Meningitidis* from a local Montgomery County hospital. The PUI is a 38-year-old male. All impacted facilities were notified by MCPHD of potential high-risk exposures and prophylaxis recommendations were provided. An extensive investigation remains ongoing as of 9/5/2025 given the extent of exposures.

State-mandated epidemiological investigation of COVID-19 deaths and COVID-19 outbreaks continue. Surveillance in Texas National Electronic Disease Surveillance System (NEDSS) and additional data analysis is ongoing, which will allow for risk assessment, case classification, visualization, and allow for longitudinal studies regarding the direct impact of COVID-19 on the residents of Montgomery County.

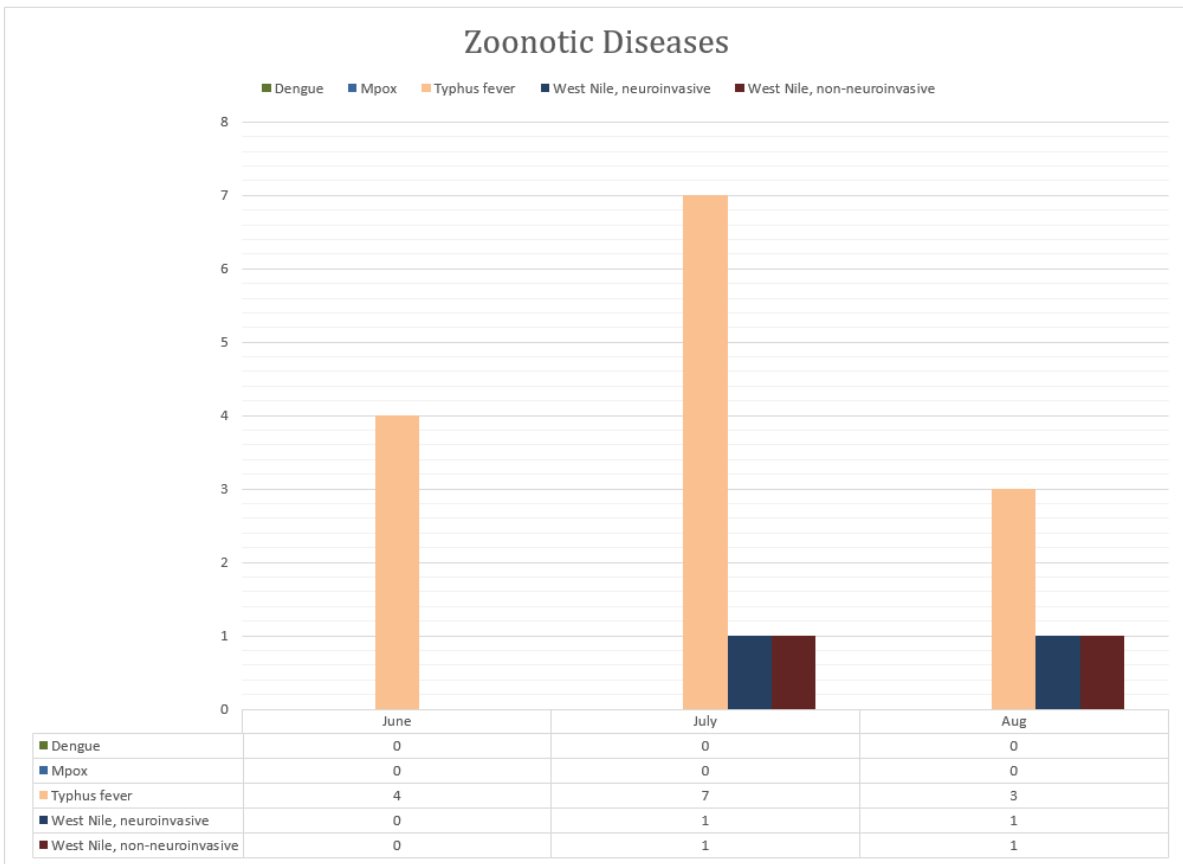
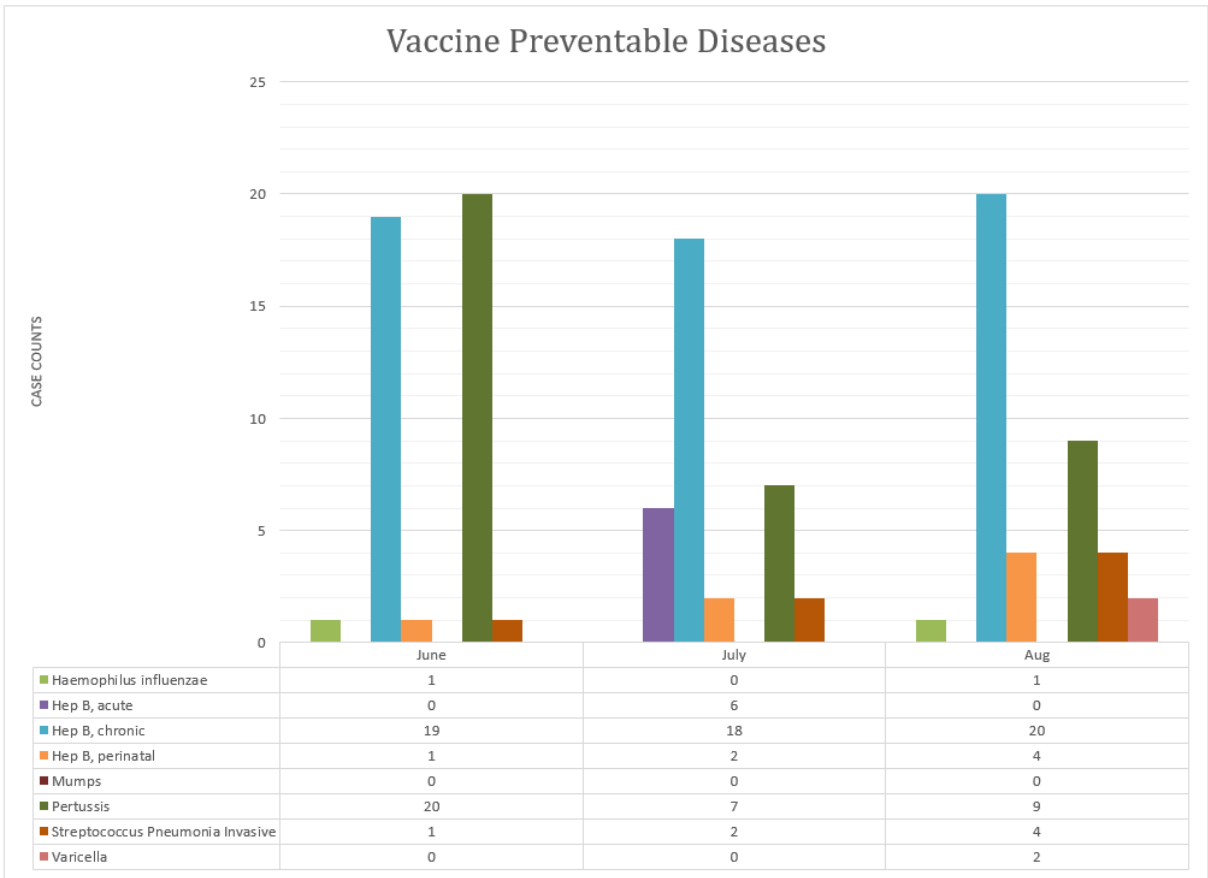
Throughout July and August, MCPHD Epidemiology and Preparedness team presented at the annual ISD School Nurses Meeting, part of MCPHD's annual meetings scheduled with ISD's. The purpose of these annual meetings is to provide education on common infectious diseases and reporting requirements prior to the start of the school year. This is an opportunity to provide awareness of emerging public health threats and guidance, and introduce the Epidemiology and Preparedness team given the reduction in workforce since March 2025. MCPHD routinely works with the ISD school nurses throughout the year conducting epidemiological investigations and providing guidance as needed.

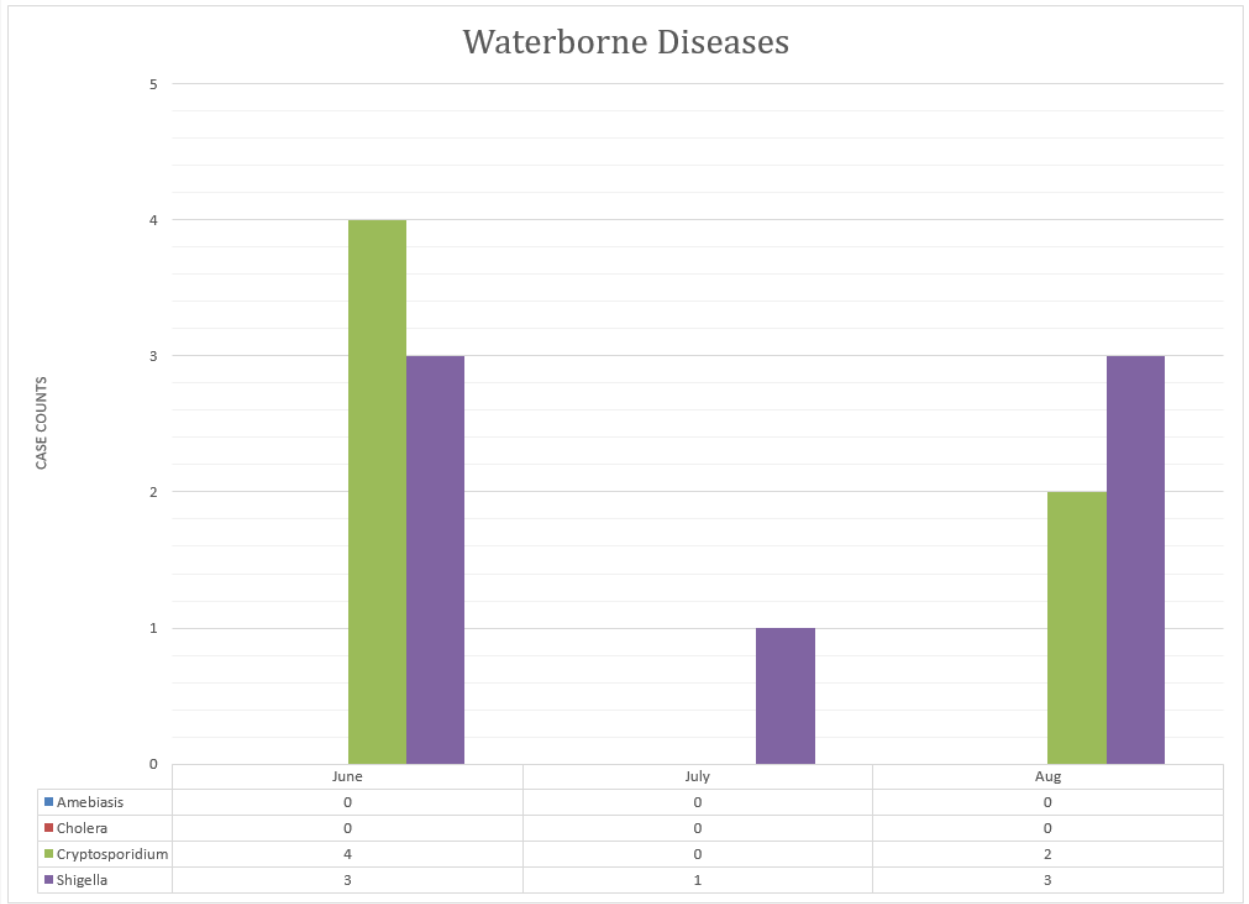
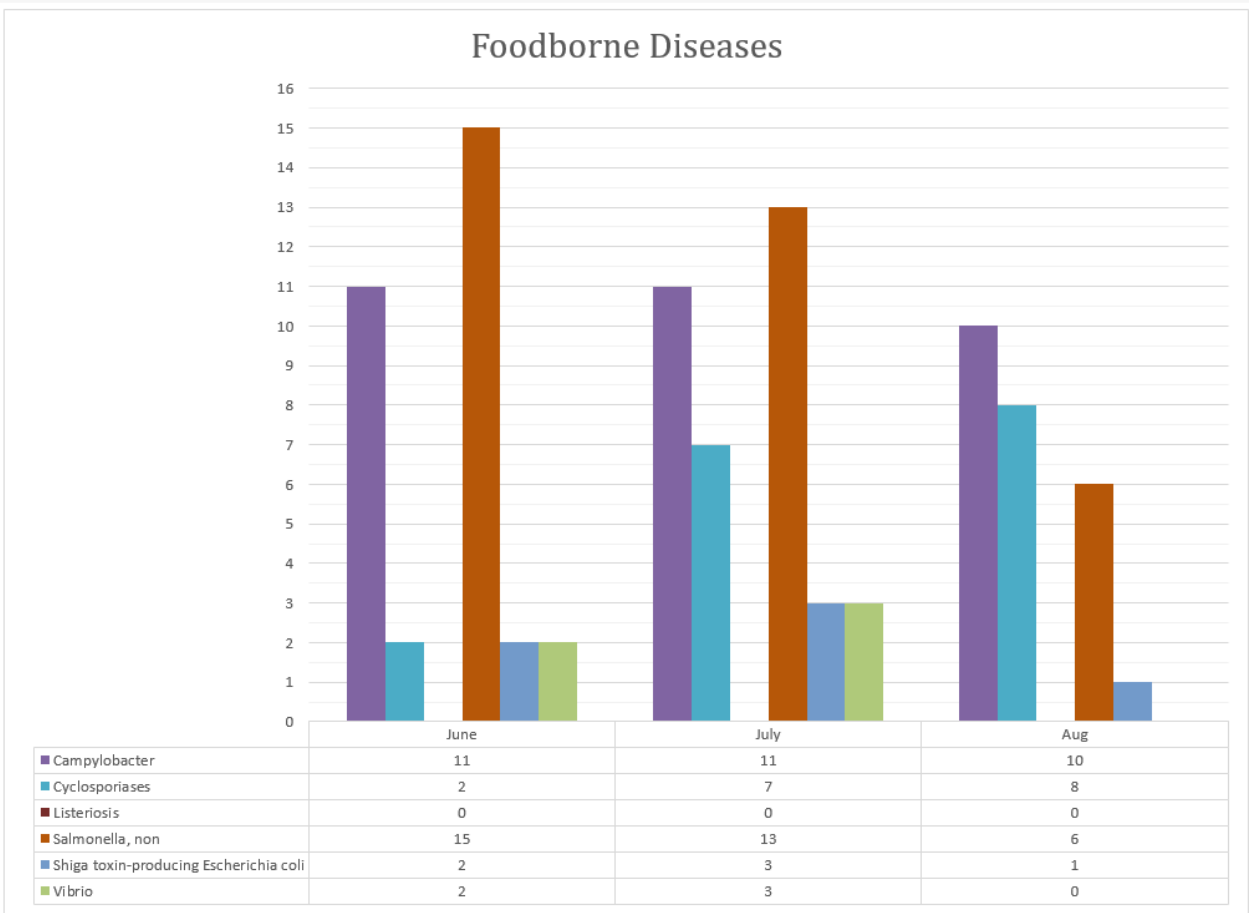
- July 17th: New Caney ISD
- July 29th: Willis ISD
- August 6th: Montgomery ISD
- August 11th: Splendora ISD

Epidemiology Trends Determined by Number of Confirmed Cases



A Confirmed case is defined as: a case that is classified as confirmed for reporting purposes, per the 2025 Department of State Health Services Epi Case Criteria Guide, as a part of the Case Definition/Case Classification. It is important to note the Case Definition/Case Classification for a Confirmed case is specific to each notifiable condition.



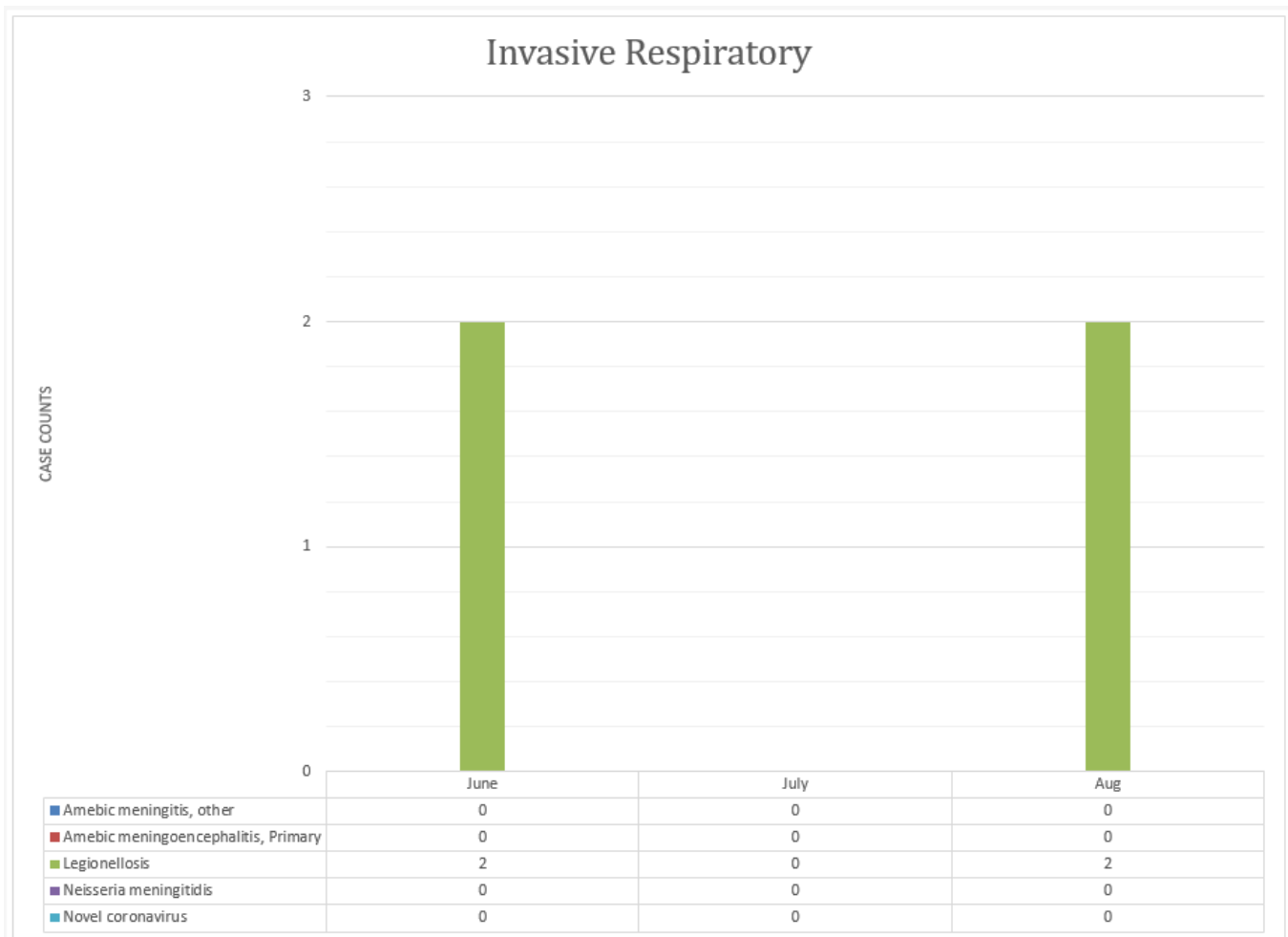


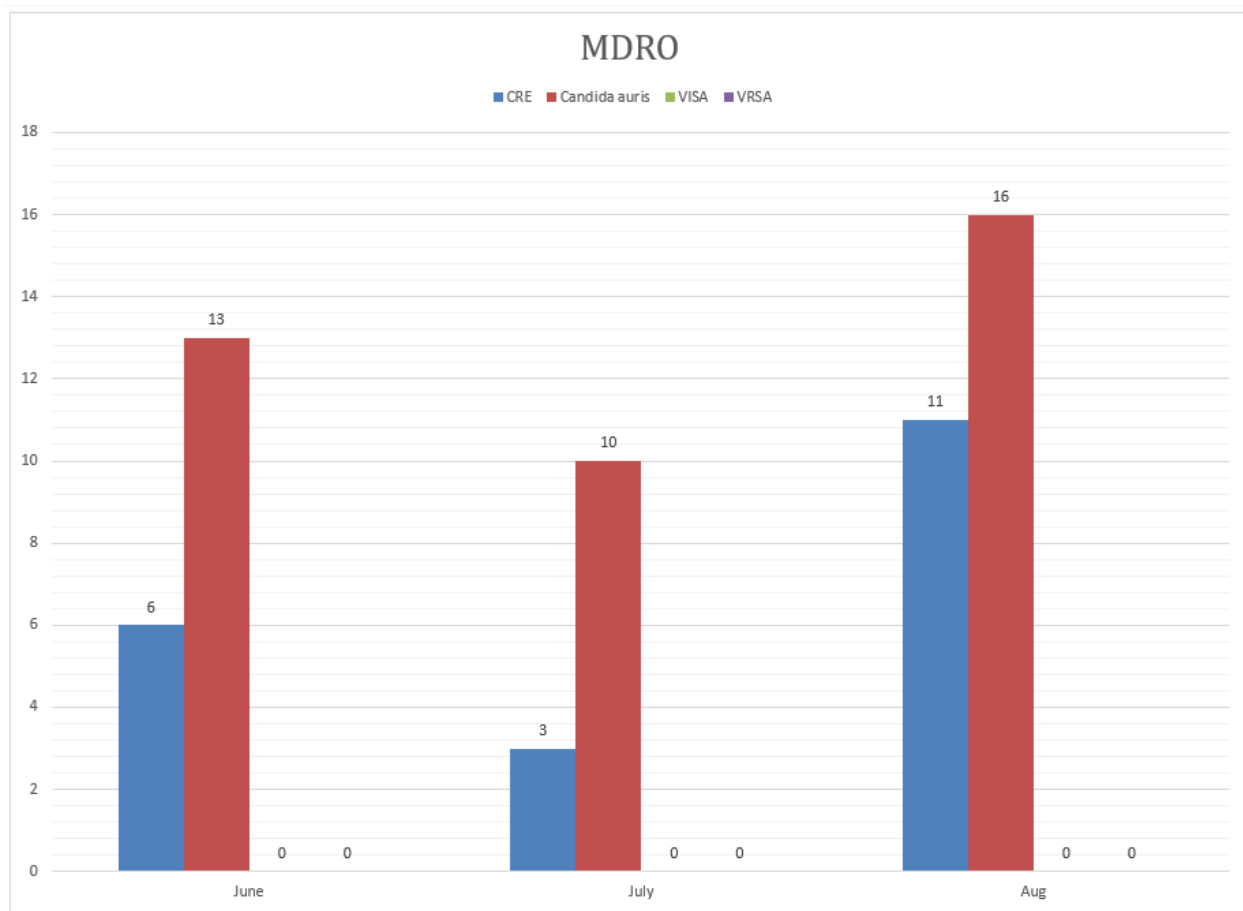
General Foodborne/Waterborne Information

Following national trends, MCPHD sees an increase in foodborne and waterborne cases during the summer months. This is due to environmental and behavioral factors. Summer months include higher temperatures, more outdoor events such as cookouts, parties, barbeques, etc. Each of these factors contribute to an increased risk of foodborne illnesses. The “danger zone” for food is between 40°F and 140 °F . If food is left out for multiple hours, there is risk of remaining in the “danger zone”, which allows bacteria to grow. If temperature is above 90 °F, food should not remain out more than one hour. There is also an increased risk of waterborne and foodborne illness in the water. If an individual has an illness and goes swimming, the water is contaminated, leaving others at risk for developing the same illness.

General *Cyclospora* Information

Cyclospora is a parasitic infection that causes Cyclosporiasis. The Centers for Disease Control and Prevention (CDC) has an annual season for Cyclosporiasis from May 1st-August 31st. This can change year to year depending on the case counts directly before or after the typical season. Common symptoms of Cyclosporiasis: watery diarrhea that can last from a few days to a few months, unintentional weight loss, fatigue, loss of appetite, nausea and vomiting. One can become ill after eating food or drinking water that is contaminated. It takes 1-2 weeks in the environment (outside of the body) before it is infectious, so person-person transmission is unlikely. Additionally, it is more common to see Cyclosporiasis cases related to travel to sub-tropical and tropical regions of the world, where it is endemic.





** Preliminary data subject to change as data is closed out.*

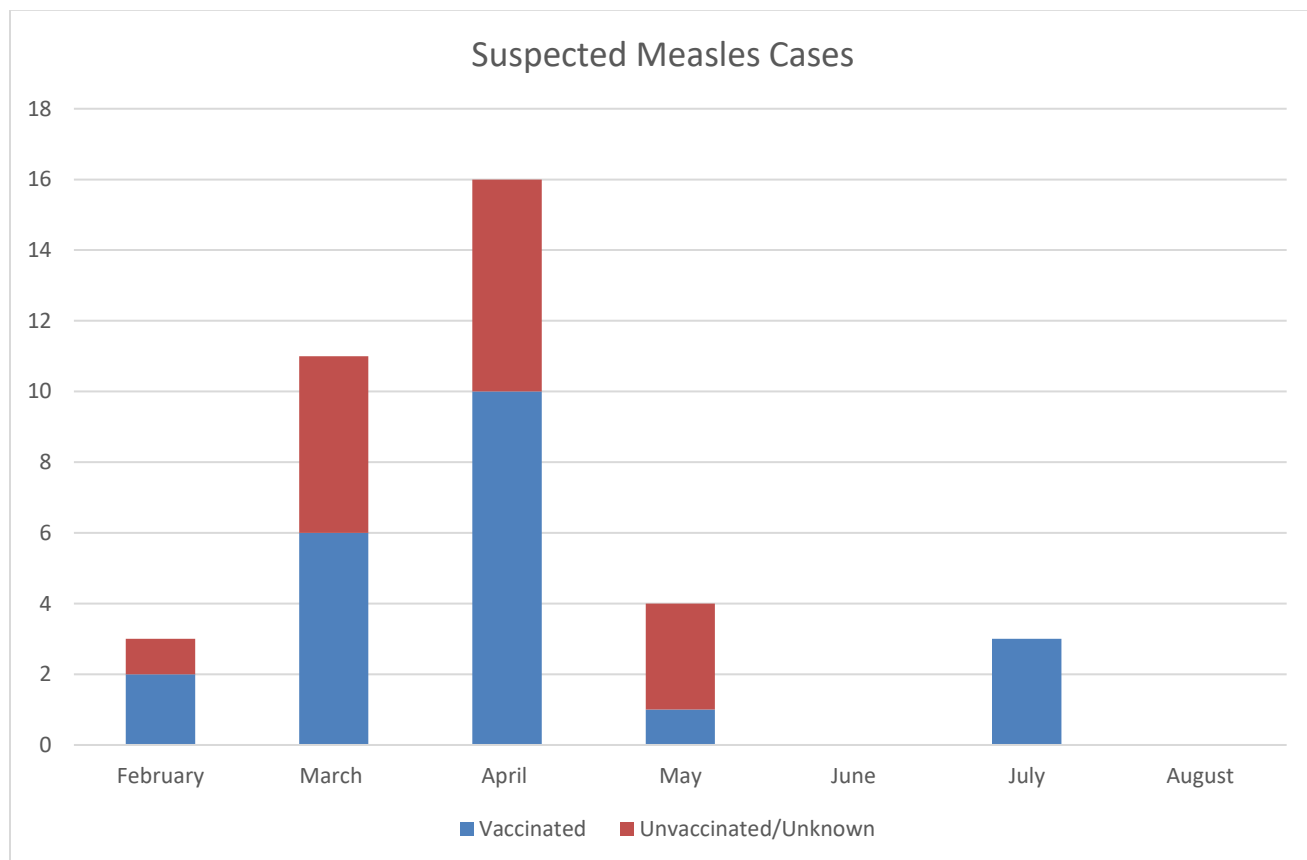


Figure 1. Suspected measles cases vaccination status

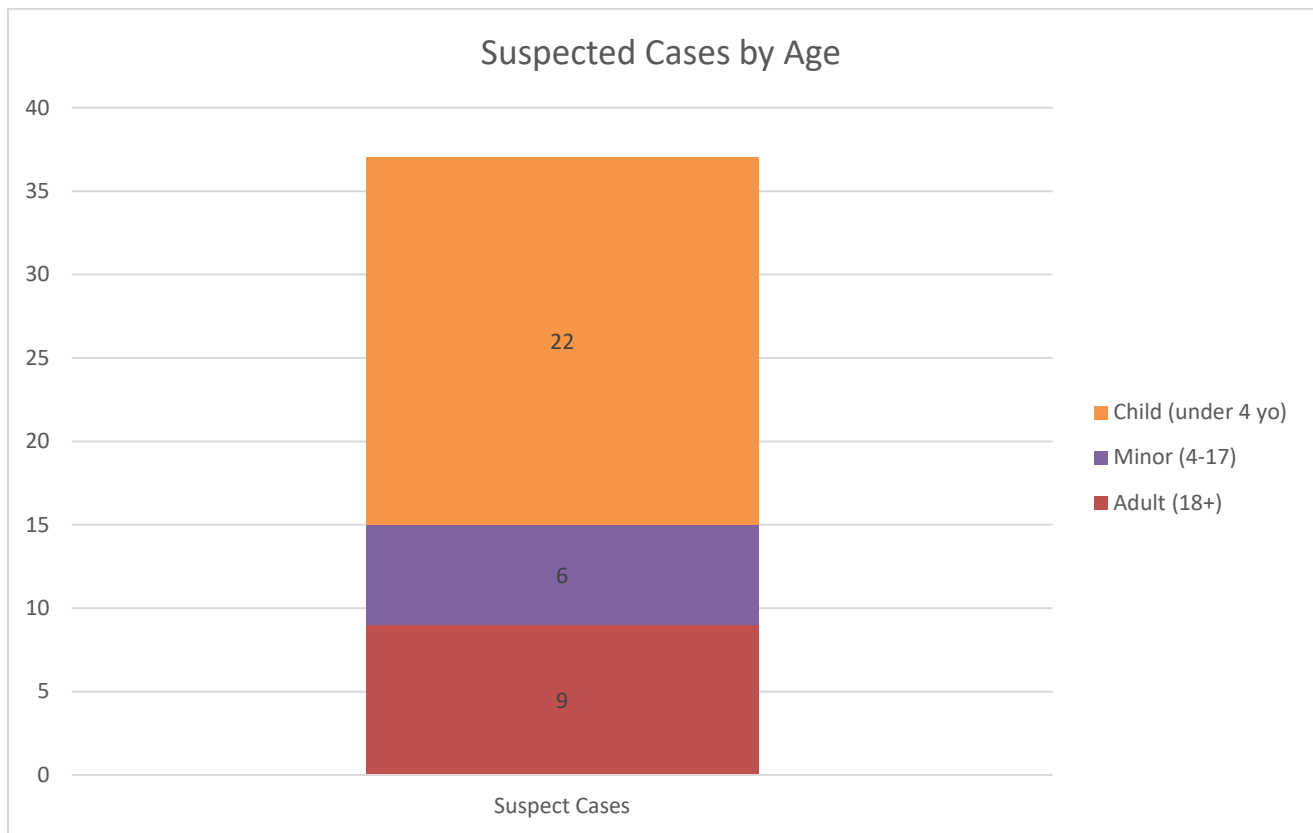


Figure 2. Suspect measles cases in age groups

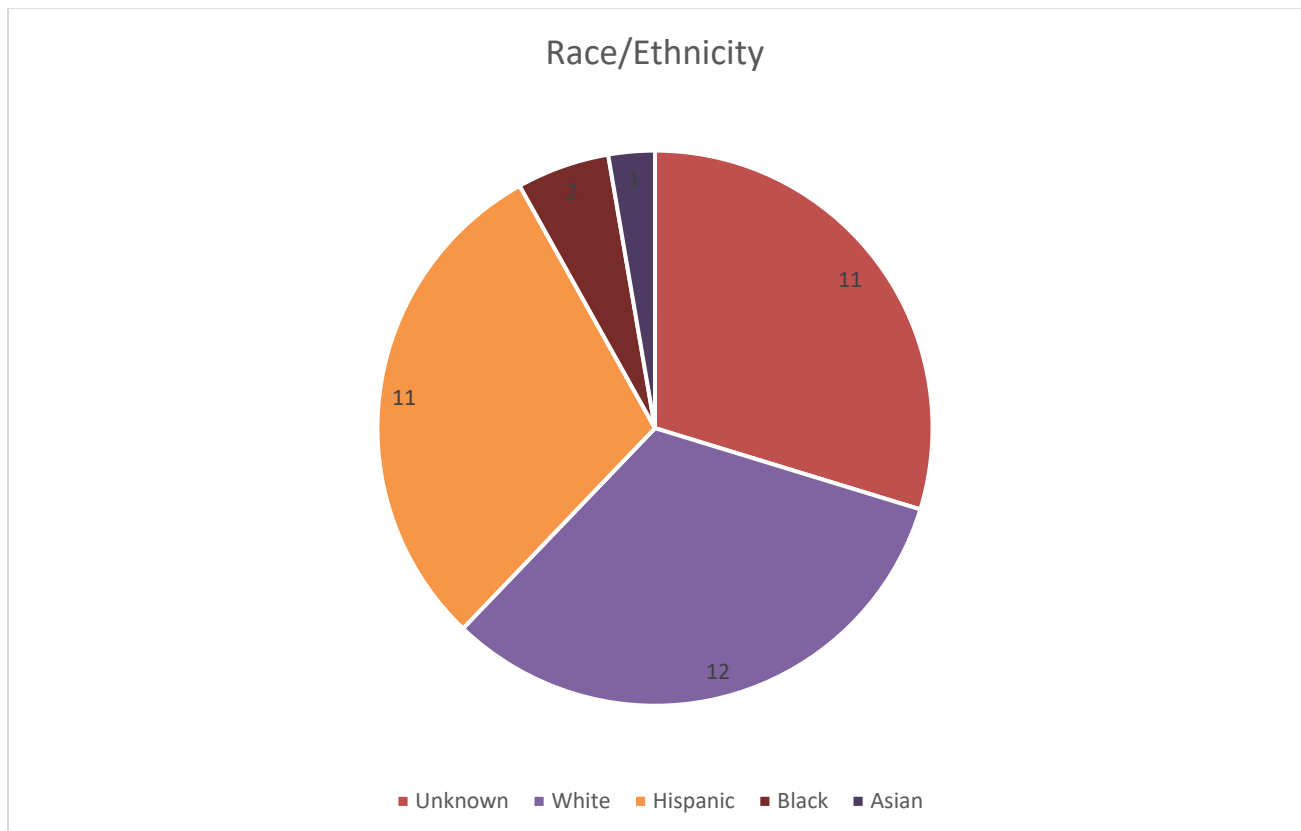


Figure 3. Race/Ethnicity of suspected measles cases.

Zero confirmed cases of measles in Montgomery County for 2025. Measles is an immediately notifiable condition in Texas and providers must notify public health immediately if measles is *suspected* in a patient. Upon report of a suspected case of measles, the measles response begins and a full investigation is required by an epidemiologist to determine the risk, if post-exposure prophylaxis will be needed for any contacts, and whether a measles PCR must be collected and sent to DSHS. The provider is interviewed over the phone and a request is made to send full medical records. Guidance on appropriate specimen collection, shipment, and infection control precautions for the safety of other patients (preventing further exposure, cleaning protocols, providing notification letters, etc.) is also provided. The epidemiologist maintains contact with the provider until test results are obtained. When appropriate, the patient is also contacted if additional information is necessary or to provide guidance. Each suspect case of measles produces a significant workload and lengthy response, often resulting in consecutive days of work focused mainly on this public health threat. With the current decrease in workforce since March 2025 due to funding cuts, the MCPHD epidemiology workforce is significantly strained.

On August 18th, DSHS reported the end of this year’s measles outbreak centered in West Texas. Public health professionals consider a measles outbreak over after 42 days with no new cases because that is double the disease’s maximum incubation period, the longest time it can take between when a person is exposed to the virus and when they get sick. Although this outbreak has been declared over, the threat of measles is not over. With ongoing outbreaks of measles in North America and around the world, it is likely that there will be additional cases of measles this year in Texas. It is important to note the United States has had 1,431 confirmed cases as of September 3rd, 2025, the highest number of cases since 2000, when measles was declared eliminated in the United States. Eliminated means the absence of the continuous spread of disease was greater than 12 months.

Pertussis

Reports of pertussis cases were lower than usual during and immediately following the COVID-19 pandemic. However, the United States has returned to pre-pandemic patterns.

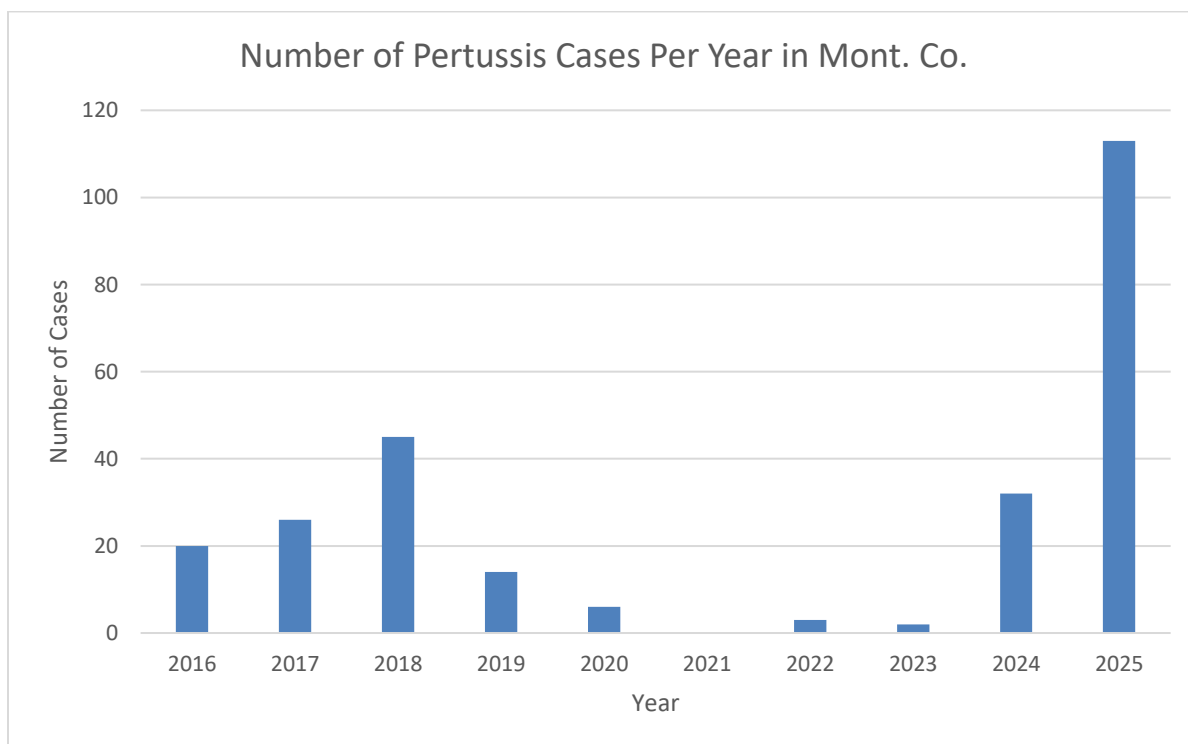


Figure 4: Number of Pertussis cases per year in Montgomery County.

Figure 1 shows pertussis case totals by year for Montgomery County from 2016 to 2025. Note that for 2025 the data is only through August. While there is no distinct seasonal pattern to pertussis, past trends suggest that cases may increase in summer and fall.

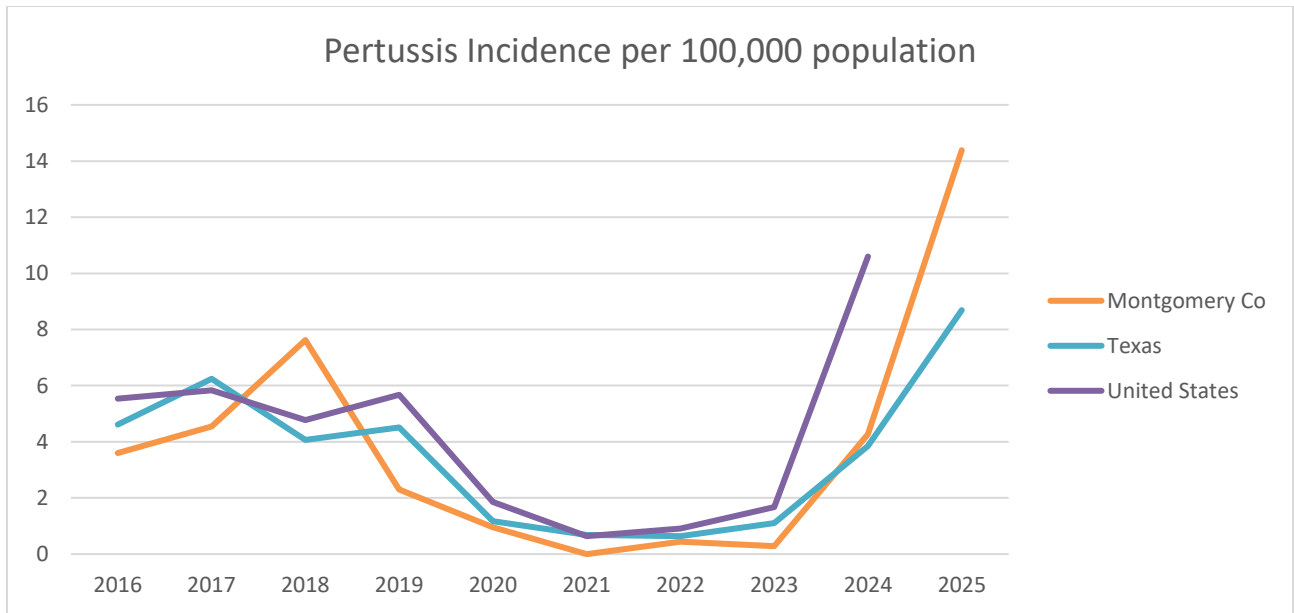


Figure 5: Pertussis incidence per 100,000 population from 2016-2025. Data Source: CDC Stacks.

The increasing trend of pertussis cases has been observed in Montgomery County, the state of Texas, and the United States.

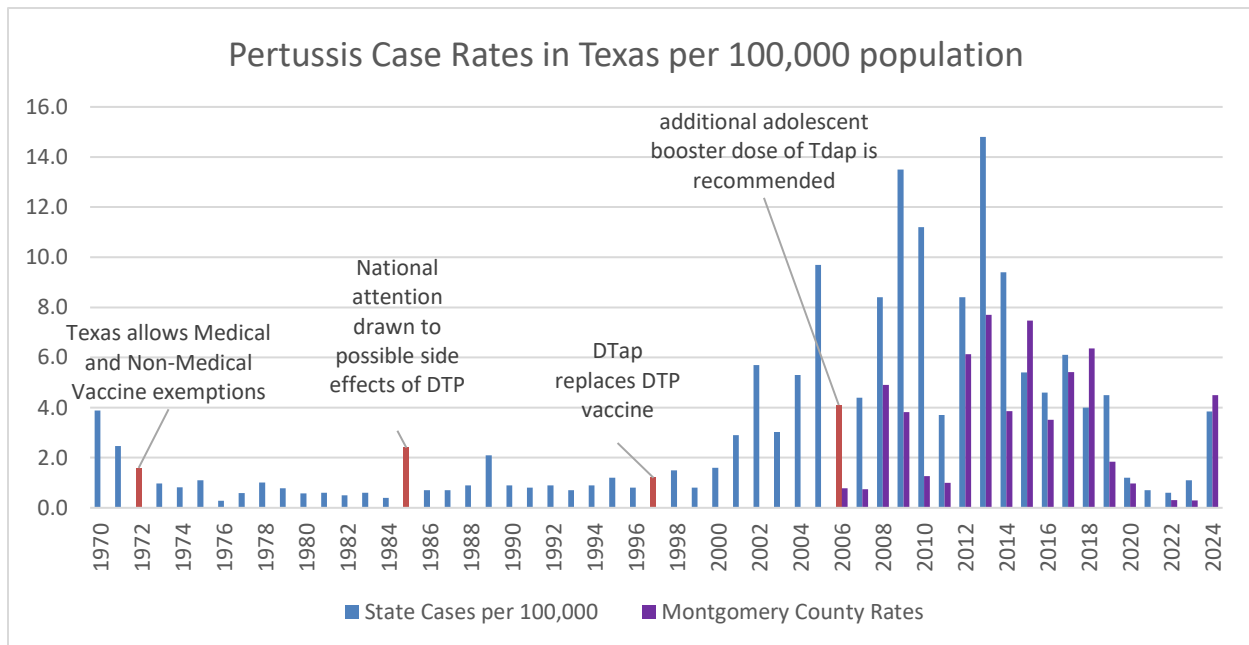


Figure 6: Pertussis Case Rates in Texas per 100,000 population.

In Figure 3, additional research was conducted on the history of pertussis vaccines. In the 1940's, the combination DTP (diphtheria, tetanus, and pertussis) vaccine was the widely adopted vaccine of choice. In 1985, attention was drawn worldwide to rare, but serious side effects that may have been caused by the vaccine (such as seizures). An alternate vaccine, DTaP, was created and went into effect in 1996. In general, there are a number of factors contributing to the increase in disease transmission. During and immediately following the COVID-19 pandemic, pertussis cases were lower than usual. It is likely that mitigation measures used during the pandemic lowered transmission of pertussis. While the current case numbers appear high relative to the levels seen during the pandemic, the rates are slightly lower than prior to the pandemic. However, as we continue to see the number of cases increase, this highlights more than ever the importance roles epidemiology and public health.

School Vaccination Rates

Vaccination rates reported to DSHS represent vaccination levels among children attending public and private schools in Texas. Children attending home schools are not included, therefore the levels do not represent vaccination rates for the state of Texas or its public health regions. Online data is maintained for five years. The most recent year data is available for is the 2023-2024 school year.

Currently in Texas about 12.3% of households with school aged children homeschool. Montgomery County ranks 7th in student withdrawals to homeschool, with 1,577 children withdrawn in 2022-2023 alone and 12,694 withdrawn total between 2013-2023.

Vaccination rates are reported at Kindergarten and 7th Grade levels. 95% vaccination rates are needed to achieve herd immunity. Texas has one of the broadest exemptions, allowing religious exemptions and exemptions of conscience. All rates below are for the MMR vaccine. School years are abbreviated to the fall year. All comments are made based on data available from 2019-2024.

Public Schools in Montgomery County

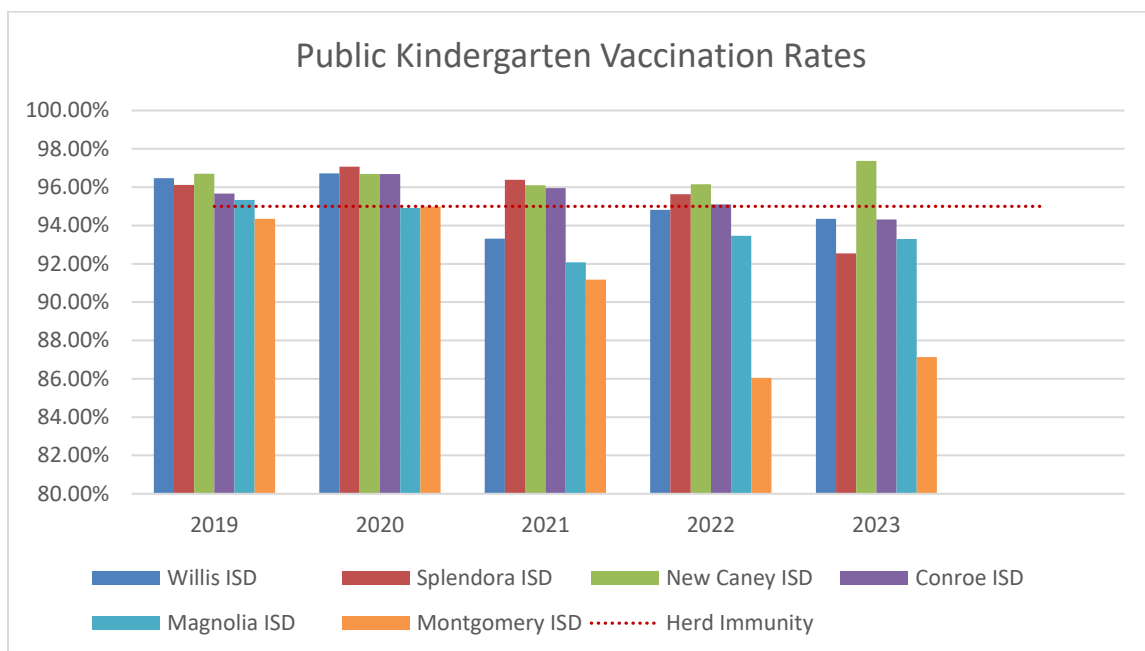


Figure 7. Historical vaccination rates for public kindergarten.

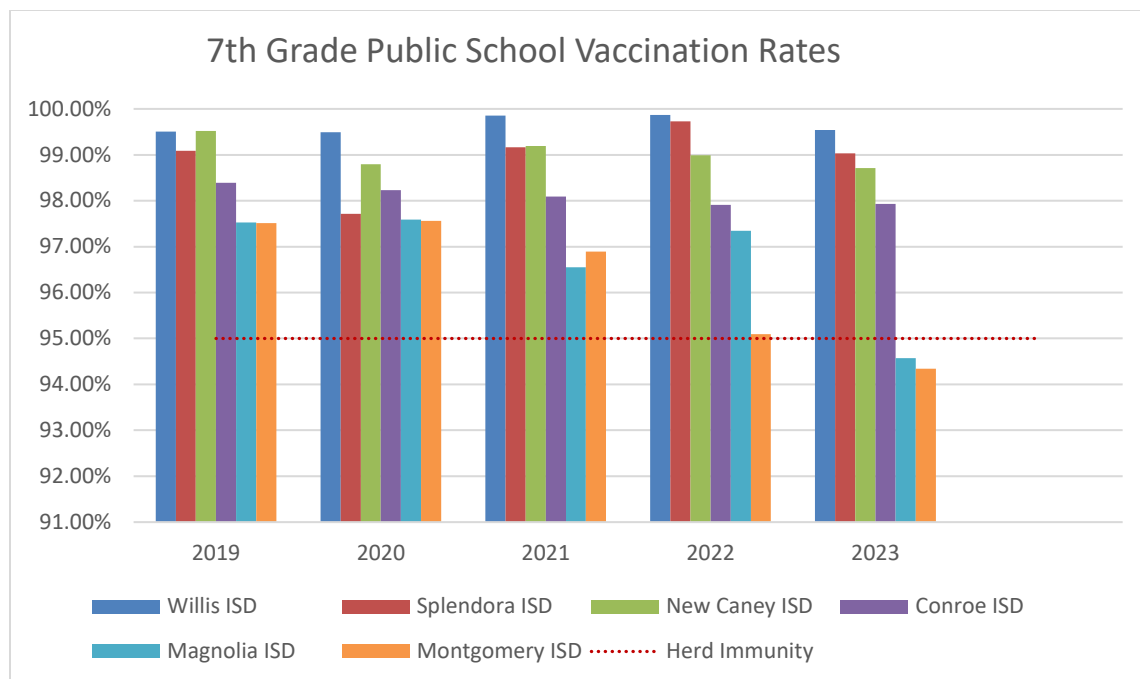


Figure 8. Historical vaccination rates for 7th Grade public schools.

Based on *Figures 7 and 8*, most public schools appear to be either at or close to our goal of herd immunity at the seventh grade level. Magnolia ISD and Montgomery ISD have a trending decrease in vaccination rates over the last 3 years.

Vaccination Rates of Counties Bordering Montgomery County

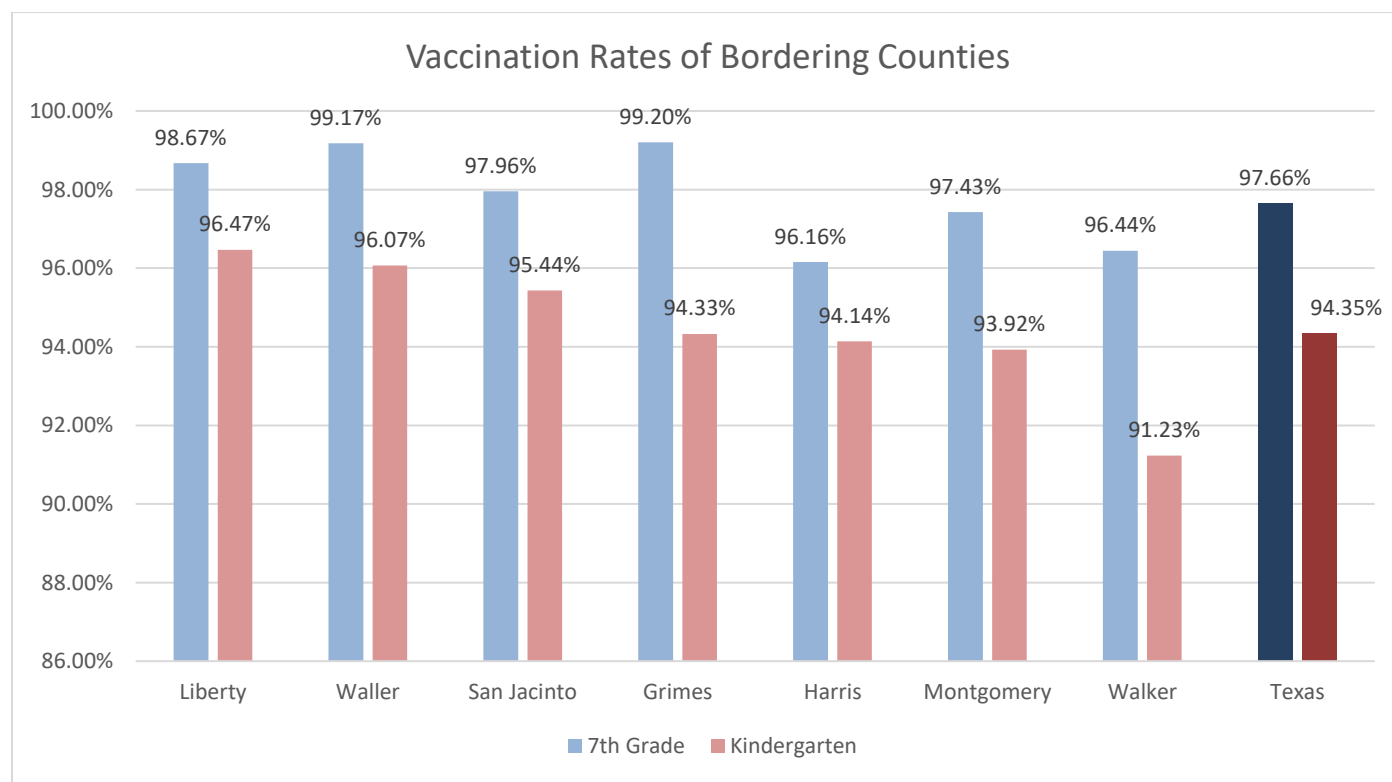


Figure 9. Vaccination rates of bordering counties.

Figure 9 is a comparison chart of Montgomery County Schools' vaccination rates to bordering counties and Texas rates.

Emergency Preparedness: June 2025 – August 2025

Preparedness Coordinator and PHEP Administrative Coordinator participated:

- **Monthly Public Health Emergency Preparedness Collaborative (PHEP-C)**
 - Monthly Regional PHEP-C meetings
 - Public Health Emergency Preparedness Connects Webinar
 - DSHS PHEP Monthly Office Hour
 - DSHS PHEP Programmatic Meeting
- **Monthly Strategic National Stockpile (SNS): CRI**
 - Medical Countermeasures (MCM) Planning Workgroup Meetings
 - Medical Countermeasure Dispensing
 - Update POD model
 - POD concepts operations and management
 - SNS Stockpile Monthly Office Hours Session
 - CHEMPACK sharing in preparation for the World Cup
 - Jurisdictional Stockpile Program Listening Session 1 & 2
- **Regional Training, Exercises, Meetings and Conferences**
 - Pediatric Disaster Response and Emergency Preparedness MGT 439
 - Whole Community Emergency Management Planning AWR 330
 - Mass Fatalities Planning and Response for Rural Communities AWR 232
 - Vulnerable Populations Work Group Regional Meetings
 - SETRAC West Corridor Coalition & RHPC Board Meetings
 - SETRAC Boot-Camp Emergency Preparedness Nursing Homes and Assisted Living Facilities
 - Aligning Behavioral Threat Assessment and Management (U.S Secret Service)
 - Regional Public Health Stakeholder Advisory Group (RPHSAG) Framework
 - Nation at Risk Symposium Preparedness and Response to Unconventional Health Threats Symposium (NCDMPHS)
 - epiENGAGE Tech Talks
 - Montgomery ISD Nurses Presentation
 - Willis ISD Nurses Presentation
 - Splendora ISD Nurses Presentation
 - Integrating Applied Epidemiologists into World Cup Planning
 - Enhancing Public Health Preparedness for Chemical and Radiation Emergencies
- **Texas Division of Emergency Management / MC Office of Emergency Management**
 - Participated in Situational Awareness Weather Call/Webinar for Potential Severe Weather Affecting the State of Texas
 - Annex H Health & Medical Plan to ESF 8 Review and Planning meeting
- **Grant Deliverables**
 - Monthly Regional CMOC Radio Checks and Regional Public Health Radio Checks
 - Jurisdictional Evaluation Tool (JET) Review with DSHS
 - Public Health Emergency Preparedness Initial Work Plan BP2
 - Public Health Emergency Preparedness End of Year Report
 - Capacity Indicator Survey

MCPHD Epidemiology Division Notifiable Conditions Workload

The population of Montgomery County has seen significant growth in the past few years, with a population of 127,000 in 2006 to 678,490 residents in 2022. Current population estimate is 774,954. According to the Montgomery County Economic Resilience Profile released by the Houston-Galveston Area Council, the population is expected to grow to 1,183,000 by 2040.

To understand the current relevant Local Health Department (LHD) climate, ten LHD's were contacted and eight responded. Data of county population size was downloaded from World Population View and sorted by county population size. Five counties larger than Montgomery County and five counties smaller than Montgomery County were contacted on April 22, 2025. El Paso and Williamson County did not respond.

Comparable Size		
Jurisdiction	Documented Cases	Population Size
Collin County	660	1,268,087
Denton County	496	1,067,589
Fort Bend	703	972,496
Hidalgo	1,439	918,841
El Paso	424	875,162
Montgomery	407	774,954
Williamson	524	747,027
Cameron	490	430,308
Brazoria	82	420,346
Bell	303	404,671
Galveston	255	370,458

Table 1: Size of health departments that have similar population size to Montgomery County. LHD is inclusive of the entire health department.

Council of State and Territorial Epidemiologists (CSTE)

The Council of State and Territorial Epidemiologists (CSTE) consistently publishes epidemiology capacity assessments. Based on their 2024 Epidemiology Capacity Assessment Report, the overall number of epidemiologists per 100,000 population was 1.7. The recommended ideal level of staffing is 2.4 per 100,000 population to meet essential public health service demands. Based on this recommendation, MCPHD should staff, at a minimum 13 Epidemiologists, and optimally 18 given our population of 774,954 to meet the essential public health service demands. Currently, MCPHD has three Epidemiologists whom manage almost 10,000 infectious disease reports per year, which include 1,000 investigations. This does not include STD/STI investigations, which are completed by DSHS due to limited workforce capacity.

In the past few years, there has been a significant increase in healthcare-associated infections nationwide. Compounding this issue is the decline in vaccination rates, leading to an increase in vaccine preventable diseases, as shown by the recently declared over multistate measles outbreak and by the increasing number of pertussis cases. We have witnessed substantial global increase in Arboviral activity, with Dengue cases surpassing 32 million across multiple countries in 2024, which is a 400% increase from 2023. Outbreaks require immediate response and action, given public health provides updates and recommendations to healthcare providers, school districts, municipalities, and non-profits within our jurisdiction, while also conducting the investigations to mitigate the spread. MCPHD is also simultaneously one of the fastest growing counties in the United States. Overwhelming our current capacity with these cases and our responsiveness to other infectious diseases could potentially lead to further public health repercussions. We are just one new and emerging disease away from facing severe impacts.

The National Electronic Disease Surveillance System (NEDSS) is the primary statewide-integrated infectious disease surveillance system utilized by public health epidemiologists and surveillance staff across Texas to monitor and respond to most notifiable infectious disease conditions, with the exception of a few LHD's. Since 2004, NEDSS has played a critical role in preventing the further transmission of infectious diseases in Texas. It serves as the primary system for processing and distributing electronic laboratory reports (ELRs) which trigger public health investigations of notifiable disease conditions.

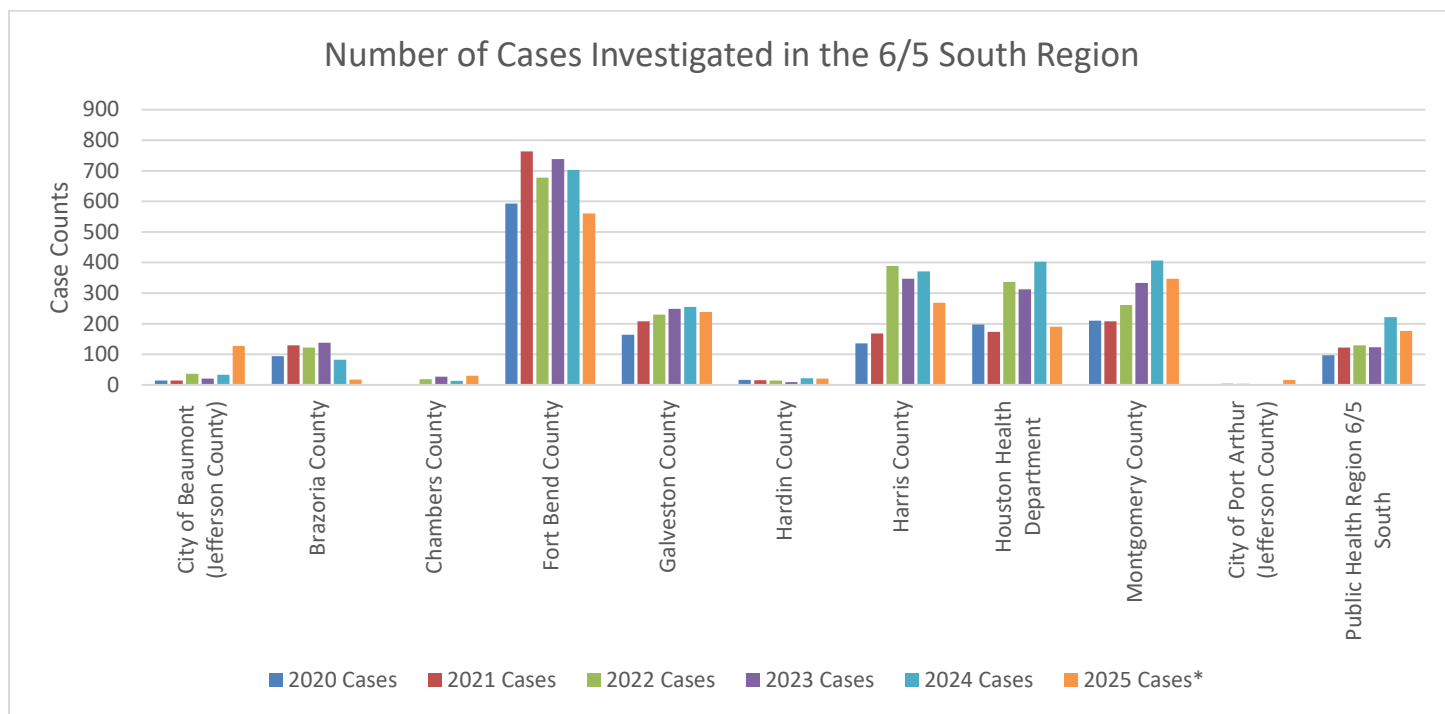


Figure 7. Cases reported in NEDSS.

The data shown in *Figure 4* above is sourced from the NEDSS database. This figure shows the final number of cases documented (confirmed, probable, and suspect) for reporting purposes for each local health department (LHD) in the Region 6/5 South (Montgomery County is a part of this region) from 2020 through August 2025. All notifiable conditions reported, investigated, and determined to be a case are included except for STD's/STI's and TB. Investigations of notifiable conditions for counties, cities, and rural areas without an LHD are completed by Region 6/5 South epidemiologists, as indicated by the last column of the graph. This includes counties surrounding Montgomery County, such as Walker, Liberty, and Waller. San Jacinto and Grimes report to a different public health region.

Figure 4 shows Montgomery County is documenting a similar number of cases to Harris County and the Houston Health Department and growing rapidly every year. We anticipate as Montgomery County continues to grow in population size there will be an increase in notifiable conditions reported. It is also important to note we share jurisdictional boundaries with Harris County, a diverse county in terms of residents, as well as an international hub for travel and visitors. With Harris County as a neighbor increases the likelihood of transmission and risk between counties, thus resulting in a higher volume of epidemiological investigations for Montgomery County via the spillover effect. The daily risk of a spillover results in an increased in day-to-day workload for MCPHD Epidemiology staff. Compounded with the loss of essential grant funding since March 2025 leading to elimination of essential public health positions, there is a cause for concern for the workforce capacity during any public health emergency, especially the FIFA World Cup, as it comes to Houston in 2026. The current Epidemiology and Preparedness workforce is not sustainable as we move forward.

Figures 5 and 6 below demonstrate the Epidemiology workflow, including counts. In 2024, of the 10,027 notifiable conditions reported to Montgomery County Health Department, 1,308 required an investigation. Of these investigations, 428 met the case definition criteria and were documented in the NEDSS database. The documented cases included 215 confirmed cases, 189 probable, and 3 suspect. STD/STI are not included in these counts because MCPHD does not have the workforce capacity to complete these investigations.

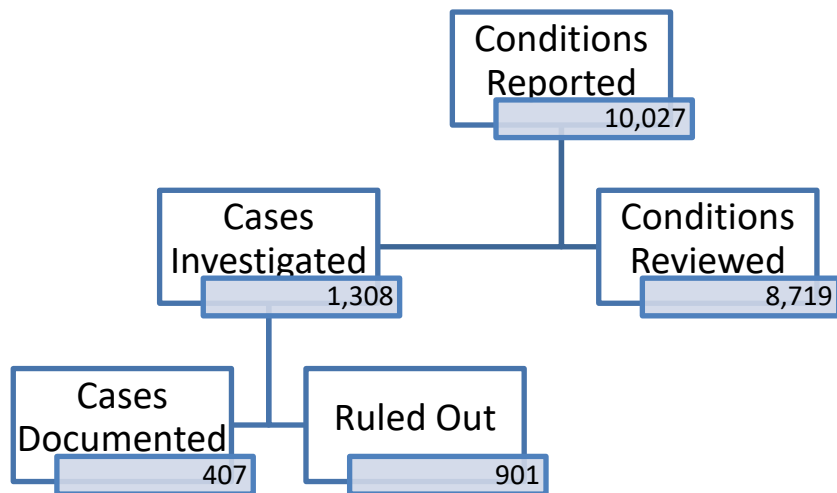


Figure 8: Epidemiology workflow of 2024 cases.

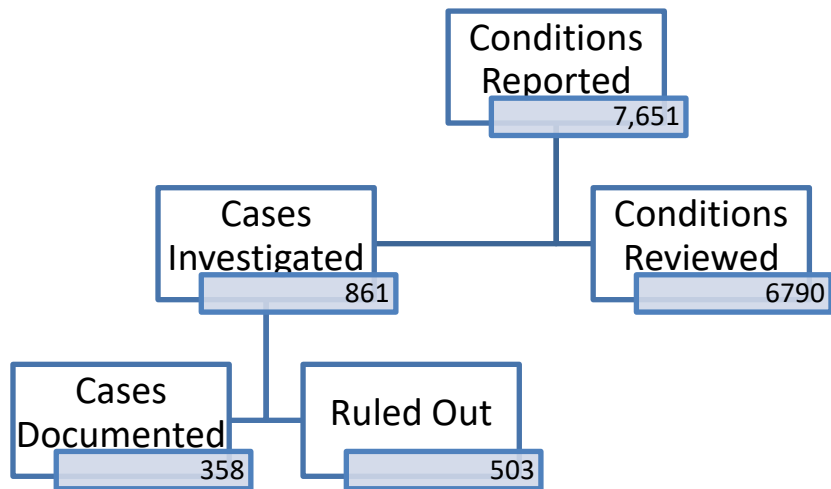


Figure 9: Epidemiology workflow of 2025 cases as of August.

STD Data

Given MCPHD does not complete STD/STI investigations, a request was made to DSHS to provide the case counts for 2018-present. 2024 cases are still being finalized, thus only the data for 2018-2023 is available.

Disease	Case Counts					
	2018	2019	2020	2021	2022	2023
Chlamydia	1596	1398	1341	1454	1500	1884
Gonorrhea	359	419	382	510	445	504
HIV	50	53	33	46	68	71
Syphilis	81	103	128	163	235	271

Table 2: STD cases in Montgomery County for 2018-2023.

Table 3 below shows a count of 2025 cases reported to MCPHD Epidemiology Division as of August 2025 via epidemiology fax and email. The numbers below represent Montgomery County cases (within our jurisdiction) reported directly to MCPHD. These are then sent to DSHS for case investigation. It is important to note there may be cases reported directly to DSHS, which are not included in the numbers below. The finalized case counts will not be available until 2026 after DSHS data close out.

Disease	Case Counts
Chlamydia	137
Gonorrhea	36
HIV	82
Syphilis	88

Table 3.

AGENDA ITEM # 10

Montgomery County Public Health District
Financial Dashboard for July 2025
(dollars expressed in 000's)

	Jul 2025	Jul 2024	Var	Var %	
Cash and Investments	2,483	2,977	(493)	-16.6%	<div><div>Green</div>Favorable Variance</div> <div><div>Red</div>Unfavorable Variance</div>

Income Statement	July 2025				Year to Date			
	Act	Bud	Var	Var %	Act	Bud	Var	Var %
Revenue								
Grant Revenue	78	92	(14)	-14.8%	916	997	(82)	-8.2%
Other Revenue	8	57	(49)	-86.2%	66	562	(496)	-88.2%
Total Revenue	86	148	(62)	-42.1%	982	1,559	(578)	-37.0%
Expenses								
Payroll	164	114	50	44.3%	1,146	1,230	(84)	-6.8%
Operating	27	34	(8)	-21.9%	264	305	(41)	-13.3%
Total Operating Expenses	191	148	43	29.0%	1,410	1,535	(125)	-8.1%
Capital	0	0	0	0.0%	0	0	0	0.0%
Total Expenditures	191	148	43	29.0%	1,410	1,535	(125)	-8.1%
Revenue Over / (Under) Expenses	(105)	0	(105)	-26325.0%	(429)	24	(453)	-1871.5%

Cash and Investments as of July 2025 are \$493k or 16.6% less than one year ago. The decrease is primarily due to County funding not being budgeted and expenses exceeding revenues after the termination of the 1115 Waiver.

Revenue: Year-to-date, Grant revenue is less than expected mainly due to grant expenses being less than budgeted.

Payroll: Year-to-date, overall payroll expenses are \$84k less than budgeted. This is primarily due to open positions.

Operating Expense: Year-to-date, Operating Expenses are \$41k less than budget. In some cases, expenses have been less than expected, while in other cases, there have been timing differences between the actual expenses and when they were budgeted.

Montgomery County Public Health District Balance Sheet

As of 07/31/2025

			<u>Fund 22 07/31/2025</u>
ASSETS			
Cash and Equivalents			
22-000-11510	MCPHD Operating Account-WF-BS		\$2,483,388.50
Total Cash and Equivalents			<u>\$2,483,388.50</u>
Receivables			
22-000-14300	A/R-Other-BS		\$40,534.90
22-000-14400	A/R-Grant Revenue-BS		\$104,551.94
22-000-14550	Receivable from Primary Government-BS		(\$212,384.21)
Total Receivables			<u>(\$67,297.37)</u>
Other Assets			
22-000-14900	Prepaid Expenses-BS		\$3,569.96
Total Other Assets			<u>\$3,569.96</u>
TOTAL ASSETS			<u>\$2,419,661.09</u>
LIABILITIES			
Current Liabilities			
22-000-20500	Accounts Payable-BS		\$472.02
22-000-21000	Accrued Expenditures-BS		\$8,000.00
22-000-21400	Accrued Payroll-BS		\$11,841.72
Total Current Liabilities			<u>\$20,313.74</u>
TOTAL LIABILITIES			<u>\$20,313.74</u>
CAPITAL			
22-000-30225	Assigned - Open Purchase Orders-BS		\$1,668.33
22-000-30700	Nonspendable - Prepaids-BS		\$3,569.96
22-000-39050	Unassigned Fund Balance-MCPHD-BS		\$2,394,109.06
TOTAL CAPITAL			<u>\$2,399,347.35</u>
TOTAL LIABILITIES AND CAPITAL			<u>\$2,419,661.09</u>

Montgomery County Public Health District - Income Statement

For the Period Ended 07/31/2025

	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	\$18.00	\$50,018.00	(\$50,000.00)	\$36.00	\$500,180.00	(\$500,144.00)	\$600,216.00	0.01%	\$600,180.00
Proceeds from Grant Funding	\$78,155.58	\$91,773.00	(\$13,617.42)	\$915,536.24	\$997,125.58	(\$81,589.34)	\$1,152,678.58	79.43%	\$237,142.34
Immunization Fees	\$2,400.00	\$2,120.00	\$280.00	\$22,479.18	\$21,200.00	\$1,279.18	\$25,440.00	88.36%	\$2,960.82
Employee Medical Premiums	\$5,358.70	\$4,559.00	\$799.70	\$43,413.19	\$41,009.28	\$2,403.91	\$47,187.28	92.00%	\$3,774.09
Total Other Revenue	\$85,932.28	\$148,470.00	(\$62,537.72)	\$981,464.61	\$1,559,514.86	(\$578,050.25)	\$1,825,521.86	53.76%	\$844,057.25
Total Revenues	\$85,932.28	\$148,470.00	(\$62,537.72)	\$981,464.61	\$1,559,514.86	(\$578,050.25)	\$1,825,521.86	53.76%	\$844,057.25
Expenses									
Payroll Expenses									
Regular Pay	\$104,397.01	\$70,548.00	\$33,849.01	\$664,737.45	\$737,447.63	(\$72,710.18)	\$857,015.63	77.56%	\$192,278.18
Overtime Pay	\$109.32	\$120.00	(\$10.68)	\$1,493.92	\$901.29	\$592.63	\$1,137.29	131.36%	(\$356.63)
Paid Time Off	\$19,138.93	\$8,466.00	\$10,672.93	\$105,414.64	\$95,409.82	\$10,004.82	\$114,542.82	92.03%	\$9,128.18
Stipend Pay	\$516.00	\$0.00	\$516.00	\$2,248.00	\$14,000.00	(\$11,752.00)	\$14,000.00	16.06%	\$11,752.00
Payroll Taxes	\$9,127.61	\$5,858.00	\$3,269.61	\$55,247.41	\$59,064.32	(\$3,816.91)	\$69,352.32	79.66%	\$14,104.91
TCDRS Plan	\$11,795.39	\$7,521.00	\$4,274.39	\$72,797.27	\$75,118.45	(\$2,321.18)	\$88,324.45	82.42%	\$15,527.18
Health & Dental	\$1,642.89	\$1,817.00	(\$174.11)	\$16,796.05	\$24,268.43	(\$7,472.38)	\$27,618.43	60.81%	\$10,822.38
Health Insurance Claims	\$15,232.73	\$17,288.00	(\$2,055.27)	\$204,687.40	\$200,037.20	\$4,650.20	\$231,917.20	88.26%	\$27,229.80
Health Insurance Admin Fees	\$2,169.36	\$2,089.00	\$80.36	\$22,508.13	\$23,783.27	(\$1,275.14)	\$27,635.27	81.45%	\$5,127.14
Total Payroll Expenses	\$164,129.24	\$113,707.00	\$50,422.24	\$1,145,930.27	\$1,230,030.41	(\$84,100.14)	\$1,431,543.41	80.05%	\$285,613.14
Operating Expenses									
Accounting/Auditing Fees	\$0.00	\$0.00	\$0.00	\$3,000.00	\$4,500.00	(\$1,500.00)	\$4,500.00	66.67%	\$1,500.00
Credit Card Processing Fee	\$165.16	\$69.00	\$96.16	\$1,358.43	\$690.00	\$668.43	\$828.00	164.06%	(\$530.43)
Books/Materials	\$0.00	\$0.00	\$0.00	\$43.20	\$1,200.00	(\$1,156.80)	\$1,450.00	2.98%	\$1,406.80
Computer Software	\$1,441.70	\$800.00	\$641.70	\$7,435.05	\$9,600.00	(\$2,164.95)	\$11,235.00	66.18%	\$3,799.95
Computer Supplies/Non-Capital	\$0.00	\$0.00	\$0.00	\$7,226.62	\$10,196.50	(\$2,969.88)	\$13,021.50	55.50%	\$5,794.88
Conferences - Fees, Travel, & Meals	\$2,962.74	\$0.00	\$2,962.74	\$10,420.32	\$16,965.00	(\$6,544.68)	\$19,265.00	54.09%	\$8,844.68
Contractual Obligations-Other	\$2,000.00	\$2,000.00	\$0.00	\$20,000.00	\$20,000.00	\$0.00	\$24,000.00	83.33%	\$4,000.00

Montgomery County Public Health District - Income Statement

For the Period Ended 07/31/2025

	Current Month Actual	Current Month Budget	Current Month Variance	YTD Actual	YTD Budget	YTD Variance	Total Annual Budget	%YTD Annual Budget	Annual Budget Remaining
Disposable Medical Supplies	\$373.18	\$375.00	(\$1.82)	\$1,831.20	\$3,899.00	(\$2,067.80)	\$4,649.00	39.39%	\$2,817.80
Dues/Subscriptions	\$419.00	\$599.00	(\$180.00)	\$1,011.00	\$3,524.00	(\$2,513.00)	\$3,524.00	28.69%	\$2,513.00
Durable Medical Equipment	\$0.00	\$0.00	\$0.00	\$1,495.05	\$400.00	\$1,095.05	\$970.00	154.13%	(\$525.05)
Employee Recognition	\$0.00	\$0.00	\$0.00	\$0.00	\$2,869.00	(\$2,869.00)	\$2,869.00	0.00%	\$2,869.00
Fuel-Auto	\$0.00	\$25.00	(\$25.00)	\$42.56	\$250.00	(\$207.44)	\$300.00	14.19%	\$257.44
Insurance	\$0.00	\$0.00	\$0.00	\$3,614.00	\$8,836.00	(\$5,222.00)	\$8,836.00	40.90%	\$5,222.00
Legal Fees	\$0.00	\$1,250.00	(\$1,250.00)	\$1,875.00	\$12,500.00	(\$10,625.00)	\$15,000.00	12.50%	\$13,125.00
Management Fees	\$8,333.33	\$6,900.00	\$1,433.33	\$83,333.30	\$73,969.45	\$9,363.85	\$86,727.45	96.09%	\$3,394.15
Meeting Expenses	\$0.00	\$0.00	\$0.00	\$422.13	\$100.00	\$322.13	\$200.00	211.07%	(\$222.13)
Mileage Reimbursements	\$248.67	\$144.00	\$104.67	\$1,334.34	\$1,765.32	(\$430.98)	\$2,109.32	63.26%	\$774.98
Office Supplies	\$684.19	\$480.00	\$204.19	\$3,354.48	\$6,091.33	(\$2,736.85)	\$7,944.33	42.22%	\$4,589.85
Postage	\$0.00	\$0.00	\$0.00	\$154.92	\$0.00	\$154.92	\$0.00	0.00%	(\$154.92)
Printing Services	\$0.00	\$100.00	(\$100.00)	\$280.00	\$2,600.00	(\$2,320.00)	\$2,850.00	9.82%	\$2,570.00
Radios	\$0.00	\$7,500.00	(\$7,500.00)	\$0.00	\$7,500.00	(\$7,500.00)	\$7,500.00	0.00%	\$7,500.00
Rent	\$9,263.33	\$8,279.00	\$984.33	\$92,738.57	\$85,752.13	\$6,986.44	\$101,066.13	91.76%	\$8,327.56
Small Equipment & Furniture	\$0.00	\$1,319.00	(\$1,319.00)	\$10,011.46	\$6,869.00	\$3,142.46	\$8,668.00	115.50%	(\$1,343.46)
Telephones-Cellular	\$620.20	\$769.00	(\$148.80)	\$7,590.91	\$9,094.64	(\$1,503.73)	\$10,552.64	71.93%	\$2,961.73
Training & Continuing Education	\$0.00	\$3,500.00	(\$3,500.00)	\$57.82	\$10,385.00	(\$10,327.18)	\$11,665.00	0.50%	\$11,607.18
Travel Expenses	\$0.00	\$0.00	\$0.00	\$4,335.00	\$2,800.00	\$1,535.00	\$9,725.00	44.58%	\$5,390.00
Uniforms	\$0.00	\$0.00	\$0.00	\$445.00	\$1,309.00	(\$864.00)	\$1,809.00	24.60%	\$1,364.00
Worker's Compensation Insurance	\$207.82	\$144.00	\$63.82	\$1,060.15	\$1,455.08	(\$394.93)	\$1,719.08	61.67%	\$658.93
Total Operating Expenses	\$26,719.32	\$34,253.00	(\$7,533.68)	\$264,470.51	\$305,120.45	(\$40,649.94)	\$362,983.45	72.86%	\$98,512.94
Total Expenses	\$190,848.56	\$147,960.00	\$42,888.56	\$1,410,400.78	\$1,535,150.86	(\$124,750.08)	\$1,794,526.86	78.59%	\$384,126.08
Revenue over Expenditures	(\$104,916.28)	\$510.00	(\$105,426.28)	(\$428,936.17)	\$24,364.00	(\$453,300.17)	\$30,995.00	(1,383.89%)	\$459,931.17

Agenda Item # 11

Montgomery County Public Health District

Budget Amendment - Fiscal Year Ending September 30, 2025

Supplement to the Amendment Presented to the Board on September 11, 2025

Account	Description	Total	Notes	Impact
Department 135 CPS/PHEP 2026				
22-135-41550	Proceeds from Grant Funding - CPS/PHEP 2026	(21,998.00)	Grant Reduced by DSHS on 07/01/25	Decrease Revenue
22-135-44100	Employee Medical Premiums - CPS/PHEP 2026	495.00	Grant Reduced by DSHS on 07/01/25	Increase Revenue
	Total Revenue - CPS/PHEP 2026	<u>(21,503.00)</u>		
22-135-51100	Regular Pay - CPS/PHEP 2026	(8,651.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-51200	Overtime Pay - CPS/PHEP 2026	(48.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-51300	Paid Time Off - CPS/PHEP 2026	2,026.00	Grant Reduced by DSHS on 07/01/25	Increase Expense
22-135-51500	Payroll Taxes - CPS/PHEP 2026	150.00	Grant Reduced by DSHS on 07/01/25	Increase Expense
22-135-51650	TCDRS Plan - CPS/PHEP 2026	215.00	Grant Reduced by DSHS on 07/01/25	Increase Expense
22-135-51700	Health & Dental - CPS/PHEP 2026	138.00	Grant Reduced by DSHS on 07/01/25	Increase Expense
22-135-51710	Health Insurance Claims - CPS/PHEP 2026	(198.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-51720	Health Insurance Admin Fees - CPS/PHEP 2026	156.00	Grant Reduced by DSHS on 07/01/25	Increase Expense
22-135-52600	Books/Materials - CPS/PHEP 2026	(250.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-53100	Computer Supplies/Non-Capital - CPS/PHEP 2026	(125.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-54100	Dues/Subscriptions - CPS/PHEP 2026	(599.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-56200	Mileage Reimbursements - CPS/PHEP 2026	(153.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-56300	Office Supplies - CPS/PHEP 2026	(681.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-57000	Printing Services - CPS/PHEP 2026	(300.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-57250	Radios - CPS/PHEP 2026	(4,000.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-57750	Small Equipment & Furniture - CPS/PHEP 2026	(1,743.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-58200	Telephones-Cellular - CPS/PHEP 2026	(132.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-58600	Travel Expenses - CPS/PHEP 2026	(6,925.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-58700	Uniforms - CPS/PHEP 2026	(300.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
22-135-59350	Worker's Compensation Insurance - CPS/PHEP 2026	(30.00)	Grant Reduced by DSHS on 07/01/25	Decrease Expense
	Total Expenses - CPS/PHEP 2026	<u>(21,450.00)</u>		
Department 136 EAIDU/SUR				
22-136-41550	Proceeds from Grant Funding - EAIDU/SUR	8,937.00	Grant Award begins 09/01/2025	Increase Revenue
22-136-44100	Employee Medical Premiums - EAIDU/SUR	246.00	Grant Award begins 09/01/2025	Increase Revenue
	Total Revenue - EAIDU/SUR	<u>9,183.00</u>		
22-136-51100	Regular Pay - EAIDU/SUR	5,063.00	Grant Award begins 09/01/2025	Increase Expense
22-136-51300	Paid Time Off - EAIDU/SUR	227.00	Grant Award begins 09/01/2025	Increase Expense
22-136-51500	Payroll Taxes - EAIDU/SUR	394.00	Grant Award begins 09/01/2025	Increase Expense
22-136-51650	TCDRS Plan - EAIDU/SUR	506.00	Grant Award begins 09/01/2025	Increase Expense
22-136-51700	Health & Dental - EAIDU/SUR	144.00	Grant Award begins 09/01/2025	Increase Expense
22-136-51710	Health Insurance Claims - EAIDU/SUR	1,354.00	Grant Award begins 09/01/2025	Increase Expense
22-136-51720	Health Insurance Admin Fees - EAIDU/SUR	182.00	Grant Award begins 09/01/2025	Increase Expense
22-136-55700	Management Fees - EAIDU/SUR	700.00	Grant Award begins 09/01/2025	Increase Expense
22-136-57500	Rent - EAIDU/SUR	530.00	Grant Award begins 09/01/2025	Increase Expense
22-136-58200	Telephones-Cellular - EAIDU/SUR	78.00	Grant Award begins 09/01/2025	Increase Expense
22-136-59350	Worker's Compensation Insurance - EAIDU/SUR	5.00	Grant Award begins 09/01/2025	Increase Expense
	Total Expenses - EAIDU/SUR	<u>9,183.00</u>		
Department 417 RLSS/LPHS				
22-417-41550	Proceeds from Grant Funding - RLSS/LPHS	7,471.00	Grant Award begins 09/01/2025	Increase Revenue
22-417-44100	Employee Medical Premiums - RLSS/LPHS	246.00	Grant Award begins 09/01/2025	Increase Revenue
	Total Revenue - RLSS/LPHS	<u>7,717.00</u>		
22-417-51100	Regular Pay - RLSS/LPHS	7,150.00	Grant Award begins 09/01/2025	Increase Expense
22-417-51200	Overtime Pay - RLSS/LPHS	44.00	Grant Award begins 09/01/2025	Increase Expense
22-417-51300	Paid Time Off - RLSS/LPHS	321.00	Grant Award begins 09/01/2025	Increase Expense
22-417-51500	Payroll Taxes - RLSS/LPHS	556.00	Grant Award begins 09/01/2025	Increase Expense
22-417-51650	TCDRS Plan - RLSS/LPHS	714.00	Grant Award begins 09/01/2025	Increase Expense
22-417-51700	Health & Dental - RLSS/LPHS	144.00	Grant Award begins 09/01/2025	Increase Expense
22-417-51710	Health Insurance Claims - RLSS/LPHS	1,354.00	Grant Award begins 09/01/2025	Increase Expense
22-417-51720	Health Insurance Admin Fees - RLSS/LPHS	182.00	Grant Award begins 09/01/2025	Increase Expense
22-417-55700	Management Fees - RLSS/LPHS	700.00	Grant Award begins 09/01/2025	Increase Expense
22-417-57500	Rent - RLSS/LPHS	990.00	Grant Award begins 09/01/2025	Increase Expense
22-417-59350	Worker's Compensation Insurance - RLSS/LPHS	16.00	Grant Award begins 09/01/2025	Increase Expense
	Total Expenses - RLSS/LPHS	<u>12,171.00</u>		

Montgomery County Public Health District
Budget Amendment - Fiscal Year Ending September 30, 2025
Supplement to the Amendment Presented to the Board on September 11, 2025

Account	Description	Total	Notes	Impact
	Total Revenue	(4,603.00)	Decrease in Revenue	
	Total Expense	(96.00)	Decrease in Expense	
	Increase / (Decrease) Net Revenue over Expenses	(4,507.00)		
	FY 2025 Budgeted Net Revenue over Expenses	30,995.00		
	FY 2025 Amended Budgeted Net Revenue over Expenses	26,488.00		

AGENDA ITEM # 12

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

TOTAL FOR
PUBLIC HEALTH INVOICES
\$25,654.92

Montgomery County Hospital District

Invoice Expense Allocation Report

Board Meeting 09/11/2025 Public Health Paid Invoices

Vendor Name	Transaction Date Transaction Number	Description Transaction Type	Account Number	Account Description	Amount
AT&T MOBILITY-ROC (6463)	06/19/2025	ACCT# 287283884314 05/20/25-06/19/25			
	287283884314X062725	Invoice	22-401-58200	Telephones-Cellular-Publi	\$30.00
				Totals for AT&T MOBILITY-ROC (6463):	\$30.00
BHATT, MEGHNA	06/13/2025	PER DIEM - NACCHO360 (07/13/2025-07/18/2025)			
	BHA*06132025	Invoice	22-132-53150	Conferences-Fees, Travel, & Meal	\$427.00
	07/07/2025	MILEAGE - (04/25/2025 - 04/25/2025)			
	BHA*07072025	Invoice	22-132-56200	Mileage Reimbursements-CPS/P	\$58.80
				Totals for BHATT, MEGHNA:	\$485.80
CDW GOVERNMENT, INC.	07/01/2025	COMPUTER SUPPLIES			
	AE49H9X	Invoice	22-134-53100	Computer Supplies/Non-Capital-	\$152.12
				Totals for CDW GOVERNMENT, INC.:	\$152.12
COLORTECH DIRECT & IMPACT PRINTING	06/01/2025	BUSINESS CARDS			
	41525	Invoice	22-134-57000	Printing Services-CPS/H	\$55.00
				Totals for COLORTECH DIRECT & IMPACT PRINTING:	\$55.00
DEARBORN NATIONAL LIFE INS CO KNOWN AS BCBS	06/01/2025	LIFE/DISABILITY 05/01/25-05/31/25			
	F021753 5.01.25 (22)	Invoice	22-132-51700	Health & Dental-CPS/P	\$167.18
			22-133-51700	Health & Dental-IDCU/	\$107.28
			22-134-51700	Health & Dental-CPS/H	\$279.44
			22-216-51700	Health & Dental-CPS/C	\$124.42
			22-401-51700	Health & Dental-Publi	\$249.38
			22-416-51700	Health & Dental-RLSS/	\$88.54
	06/01/2025	LIFE/DISABILITY 06/01/25-06/30/25			
	F021753 6.1.25 (22)	Invoice	22-132-51700	Health & Dental-CPS/P	\$333.49
			22-133-51700	Health & Dental-IDCU/	\$107.28
			22-134-51700	Health & Dental-CPS/H	\$279.44
			22-216-51700	Health & Dental-CPS/C	\$124.42
			22-401-51700	Health & Dental-Publi	\$208.51
			22-416-51700	Health & Dental-RLSS/	\$88.54
	07/01/2025	LIFE/DISABILITY 07/01/25-07/31/25			
	F021753 07.01.25(22)	Invoice	22-132-51700	Health & Dental-CPS/P	\$362.33
			22-133-51700	Health & Dental-IDCU/	\$107.28
			22-135-51700	Health & Dental-CPS/P	\$279.44
			22-217-51700	Health & Dental-CPS/C	\$124.42
			22-401-51700	Health & Dental-Publi	\$133.91
			22-416-51700	Health & Dental-RLSS/	\$88.54
				Totals for DEARBORN NATIONAL LIFE INS CO KNOWN AS BCBS:	\$3,253.84
DEPARTMENT OF STATE HEALTH SERVICE	06/25/2025	Overpayment Reference DSHS Contract# HHS00812700027			
	HHS000812700027	Invoice	22-000-21000	Accrued Expenditures-BS	\$220.00
				Totals for DEPARTMENT OF STATE HEALTH SERVICE (149347) dshs:	\$220.00
IMPAC FLEET	06/03/2025	FUEL PURCHASES FOR MAY 2025			
	SQLCD-1086752 (22)	Invoice	22-900-54700	Fuel-Auto-MCPHD	\$42.56
				Totals for IMPAC FLEET:	\$42.56
JP MORGAN CHASE BANK	06/05/2025	JPM CREDIT CARD TRANSACTION JUNE 2025			
	00036741 6.5.25(22)	Invoice	22-401-52600	Books/Materials-Publi	\$13.26
			22-401-57750	Small Equipment & Furniture-Put	\$7,505.69
	07/01/2025	JPM CREDIT CARD TRANSACTION JULY 2025			
	00036741 7.05.25(22)	Invoice	22-132-53150	Conferences-Fees, Travel, & Meal	\$1,811.96
			22-124-53150	Conferences - Fees, Travel, & Meal	\$878.08
				Conferences-Fees, Travel, & Meal	(\$154.30)
			22-132-54100	Dues/Subscriptions-CPS/P	\$419.00

Montgomery County Hospital District

Invoice Expense Allocation Report

Board Meeting 09/11/2025 Public Health Paid Invoices

Vendor Name	Transaction Date Transaction Number	Description Transaction Type	Account Number	Account Description	Amount
			22-134-53150	Conferences-Fees, Travel, & Meal	\$3,569.96
			22-134-56300	Office Supplies-CPS/H	\$26.61
			22-401-56300	Office Supplies-Publi	<u>\$684.19</u>
			<i>Totals for JP MORGAN CHASE BANK:</i>		<u>\$14,754.45</u>
LANGUAGE LINE SERVICES, LTD dba L	07/01/2025	OVER THE PHONE INTERPRETATION APRIL/MAY/JUNE 2025			
	11640903	Invoice	22-132-53050	Computer Software-CPS/P	<u>\$1,041.70</u>
			<i>Totals for LANGUAGE LINE SERVICES, LTD dba LANGUAGELINE SOLUTIONS:</i>		<u>\$1,041.70</u>
MCKESSON MEDICAL-SURGICAL GOV	07/30/2025	MEDICAL SUPPLIES			
	24115511	Invoice	22-401-53900	Disposable Medical Supplies-Pub	<u>\$373.18</u>
			<i>Totals for MCKESSON MEDICAL-SURGICAL GOVERNMENT SOLUTIONS LLC:</i>		<u>\$373.18</u>
METROPOLITAN LIFE INSURANCE CO	06/05/2025	DENTAL AND VISION PREMIUMS FOR JUNE 2025			
	MET06052025 (22)	Invoice	22-128-51700	Health & Dental-Expan	\$24.18
			22-134-51700	Health & Dental-CPS/H	\$327.70
			22-132-51700	Health & Dental-CPS/P	\$112.45
			22-133-51700	Health & Dental-IDCU/	\$68.79
			22-216-51700	Health & Dental-CPS/C	\$163.85
			22-401-51700	Health & Dental-Publi	\$79.79
			22-416-51700	Health & Dental-RLSS/	\$43.66
	07/07/2025	DENTAL AND VISION PREMIUMS FOR JULY 2025			
	MET07072025 (22)	Invoice	22-128-51700	Health & Dental-Expan	\$24.18
			22-134-51700	Health & Dental-CPS/H	\$327.70
			22-132-51700	Health & Dental-CPS/P	\$112.45
			22-133-51700	Health & Dental-IDCU/	\$68.79
			22-216-51700	Health & Dental-CPS/C	\$163.85
			22-401-51700	Health & Dental-Publi	\$79.79
			22-416-51700	Health & Dental-RLSS/	<u>\$43.66</u>
			<i>Totals for METROPOLITAN LIFE INSURANCE COMPANY (METLIFE):</i>		<u>\$1,640.84</u>
MILLER, MELISSA	06/10/2025	EXPENSE - POSTAGE			
	MIL*06102025	Invoice	22-401-56900	Postage-Publi	<u>\$154.92</u>
			<i>Totals for MILLER, MELISSA:</i>		<u>\$154.92</u>
NIEMAND, ZANE	06/13/2025	MILEAGE - (06/12/2025 - 06/12/2025)			
	NIE*06132025	Invoice	22-134-58500	Training & Continuing Education-	\$57.82
	06/13/2025	MILEAGE - (04/28/2025 - 05/02/2025)			
	NIE*06132025B	Invoice	22-134-53150	Conferences-Fees, Travel, & Meal	\$292.60
	07/21/2025	MILEAGE - (07/17/2025 - 07/18/2025)			
	NIE*07212025	Invoice	22-135-56200	Mileage Reimbursements-CPS/P	<u>\$98.84</u>
			<i>Totals for NIEMAND, ZANE:</i>		<u>\$449.26</u>
OPTIQUEST INTERNET SERVICES, INC.	06/01/2025	NEXTGEN HOSTING			
	87246	Invoice	22-401-53050	Computer Software-Publi	\$400.00
	07/01/2025	NEXTGEN HOSTING			
	87493	Invoice	22-401-53050	Computer Software-Publi	<u>\$400.00</u>
			<i>Totals for OPTIQUEST INTERNET SERVICES, INC.:</i>		<u>\$800.00</u>
PIRON, ELIZABETH	07/05/2025	EXPENSE - TRAVEL EXPENSES			
	PIR*06252025	Invoice	22-132-58600	Travel Expenses-CPS/P	\$48.29
	07/05/2025	EXPENSE - TRAVEL EXPENSES			
	PIR*06252025B	Invoice	22-132-58600	Travel Expenses-CPS/P	\$22.83
	07/05/2025	EXPENSE - TRAVEL EXPENSES			
	PIR*06252025C	Invoice	22-132-58600	Travel Expenses-CPS/P	<u>\$19.91</u>
			<i>Totals for PIRON, ELIZABETH:</i>		<u>\$97.03</u>
STAPLES ADVANTAGE	06/30/2025	OFFICE SUPPLIES			

Montgomery County Hospital District
Invoice Expense Allocation Report
Board Meeting 09/11/2025 Public Health Paid Invoices

Vendor Name	Transaction Date Transaction Number	Description Transaction Type	Account Number	Account Description	Amount
	6035837947	Invoice	22-133-56300	Office Supplies-IDCU/	\$49.99
	06/30/2025	OFFICE SUPPLIES			
	6035837946	Invoice	22-134-56300	Office Supplies-CPS/H	\$127.88
				<i>Totals for STAPLES ADVANTAGE:</i>	<u>\$177.87</u>
VERIZON WIRELESS (POB 660108)	06/01/2025	ACCT# 92016135-001 APRIL 10 MAY 09			
	6113118017 (22)	Invoice	22-132-58200	Telephones-Cellular-CPS/P	\$197.40
			22-133-58200	Telephones-Cellular-IDCU/	\$78.22
			22-134-58200	Telephones-Cellular-CPS/H	\$234.64
			22-216-58200	Telephones-Cellular-CPS/C	\$78.22
			22-401-58200	Telephones-Cellular-Publi	\$60.33
	06/01/2025	ACCT# 92016135-001 MAY 10 0 JUN 09			
	6115627259 (22)	Invoice	22-132-58200	Telephones-Cellular-CPS/P	\$277.76
			22-133-58200	Telephones-Cellular-IDCU/	\$73.93
			22-134-58200	Telephones-Cellular-CPS/H	\$183.81
			22-216-58200	Telephones-Cellular-CPS/C	\$73.93
			22-401-58200	Telephones-Cellular-Publi	\$53.91
	07/09/2025	ACCT# 92016135-001 JUN 10 - JULY 09			
	6118138612 (22)	Invoice	22-132-58200	Telephones-Cellular-CPS/P	\$225.60
			22-133-58200	Telephones-Cellular-IDCU/	\$75.20
			22-134-58200	Telephones-Cellular-CPS/H	\$225.60
			22-216-58200	Telephones-Cellular-CPS/C	\$75.20
			22-401-58200	Telephones-Cellular-Publi	<u>\$18.60</u>
				<i>Totals for VERIZON WIRELESS (POB 660108):</i>	<u>\$1,932.35</u>

Account Summary

<u>Account Number</u>	<u>Description</u>	<u>Net Amount</u>
22-000-21000	Accrued Expenditures-BS	\$220.00
22-124-53150	Conferences - Fees, Travel, & Meals-IDCU/	\$878.08
22-128-51700	Health & Dental-Expan	\$48.36
22-132-51700	Health & Dental-CPS/P	\$1,087.90
22-132-53050	Computer Software-CPS/P	\$1,041.70
22-132-53150	Conferences-Fees, Travel, & Meals-CPS/P	\$2,084.66
22-132-54100	Dues/Subscriptions-CPS/P	\$419.00
22-132-56200	Mileage Reimbursements-CPS/P	\$58.80
22-132-58200	Telephones-Cellular-CPS/P	\$700.76
22-132-58600	Travel Expenses-CPS/P	\$91.03
22-133-51700	Health & Dental-IDCU/	\$459.42
22-133-56300	Office Supplies-IDCU/	\$49.99
22-133-58200	Telephones-Cellular-IDCU/	\$227.35
22-134-51700	Health & Dental-CPS/H	\$1,214.28
22-134-53100	Computer Supplies/Non-Capital-CPS/P	\$152.12
22-134-53150	Conferences-Fees, Travel, & Meals-CPS/H	\$3,862.56
22-134-56300	Office Supplies-CPS/H	\$154.49
22-134-57000	Printing Services-CPS/H	\$55.00
22-134-58200	Telephones-Cellular-CPS/H	\$644.05
22-134-58500	Training & Continuing Education-CPS/H	\$57.82
22-135-51700	Health & Dental-CPS/P	\$279.44
22-135-56200	Mileage Reimbursements-CPS/P	\$98.84
22-216-51700	Health & Dental-CPS/C	\$576.54
22-216-58200	Telephones-Cellular-CPS/C	\$227.35
22-217-51700	Health & Dental-CPS/C	\$124.42
22-401-51700	Health & Dental-Publi	\$751.38
22-401-52600	Books/Materials-Publi	\$13.26
22-401-53050	Computer Software-Publi	\$800.00
22-401-53900	Disposable Medical Supplies-Publi	\$373.18
22-401-56300	Office Supplies-Publi	\$684.19
22-401-56900	Postage-Publi	\$154.92
22-401-57750	Small Equipment & Furniture-Publi	\$7,505.69
22-401-58200	Telephones-Cellular-Publi	\$162.84
22-416-51700	Health & Dental-RLSS/	\$352.94
22-900-54700	Fuel-Auto-MCPHD	\$42.56
GRAND TOTAL:		<u>\$25,654.92</u>

Agenda Item # 13

To: MCPHD Board of Directors
From: Randy Johnson, Executive Director
Date: September 11, 2025
Re: **PH Woodforest Operating Bank**



Consider and act on closing of Public Health District Woodforest Operating Bank Account. (Brett Allen, CFO – MCHD)

Agenda Item # 14

To: MCPHD Board of Directors
From: Randy Johnson, Executive Director
Date: September 11, 2025
Re: Merging of MCPHD with MCHD



Update on the merging of MCPHD with MCHD. (Randy Johnson, Executive Director MCPHD)

Agenda Item # 15

To: MCPHD Board of Directors
From: Randy Johnson, Executive Director
Date: September 11, 2025
Re: Dissolution of MCPHD Cooperative Agreement



Public Health
Prevent. Promote. Protect.

Montgomery County, Texas

Consider and act on the September 30, 2025 dissolution of the Montgomery County Public Health District as per The Amended and Restated Montgomery County Public Health District Cooperative Agreement. (Randy Johnson, Executive Director MCPHD)

**AMENDED AND RESTATED
MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT
COOPERATIVE AGREEMENT**

This Amended and Restated Cooperative Agreement (this "**Agreement**") is made by and among MONTGOMERY COUNTY, TEXAS, ("**County**"), the CITY OF PANORAMA VILLAGE, TEXAS, and the CITY OF CONROE, TEXAS (jointly referred to as "**Cities**"), under Chapter 121, Subchapter E of the Texas Health and Safety Code laws of the State of Texas, acting by and through their respective authorized officers and representatives.

To the extent that the Montgomery County Hospital District has responsibilities and obligations described in this Agreement, its Board of Directors has approved this Agreement.

RECITALS

WHEREAS, the Local Public Health Reorganization Act, now codified in Chapter 121 of the Texas Health and Safety Code (the "**Act**"), authorizes the establishment of public health districts by a majority vote of the governing bodies of a county and one or more municipalities in a county for the purpose of providing and furnishing essential public health programs, and

WHEREAS, the County and Cities previously entered into that certain *Montgomery County Public Health District Cooperative Agreement* on or about July 30, 2010, as amended and formed the Montgomery County Public Health District ("**MCPHD**"). The *Montgomery County Public Health District Cooperative Agreement* and any amendments are hereinafter jointly referred to as the "**Prior Agreement**". The Prior Agreement was entered into to acquire state and federal grants and other funding to provide those certain essential public health services that had been funded by the County. This Amended and Restated Cooperative Agreement supersedes the Prior Agreement in its entirety; and

WHEREAS, Montgomery County, the City of Panorama Village, and the City of Conroe (hereinafter "**the Members**") desire to continue the operation of a Public Health District in Montgomery County, Texas; and

WHEREAS, the MCPHD shall serve all of Montgomery County, Texas.

WHEREAS, the Montgomery County Hospital District ("**MCHD**") is a political subdivision of the State of Texas, operating under the provisions of chapter 1063 of the Texas Special District Local Laws Code; and

WHEREAS, MCHD is authorized to furnish public health programs and services to the residents of Montgomery County, Texas; and

WHEREAS, previous funding received by MCPHD through the Texas Medicare 1115 Waiver DSRIP Program terminated in 2022; and

WHEREAS, the Members desire that MCHD continue serving as the managing entity of the Montgomery County Public Health District (“**MCPHD**”), subject to the terms and conditions set out in this Agreement and the Interlocal Cooperative Agreement between MCHD and the County executed concurrently with this Agreement (“**Interlocal Cooperative Agreement**”), as that Interlocal Cooperative Agreement may be amended from time to time; and

WHEREAS, in the interest of essential public health, to avoid the unnecessary duplication of services, and to provide operational efficiency for the taxpayers of Montgomery County, the County and Cities desire that the Montgomery County Public Health District be dissolved and terminated on September 30, 2025 and its essential public health services and programs be merged into a new department of the MCHD, subject to applicable laws, the Interlocal Cooperative Agreement, and the approval of the governing boards of the County, the Cities and MCHD; and

WHEREAS, the Parties desire that the County continue to provide funding to MCPHD for the purpose of providing essential public health services and programs to the residents of Montgomery County; and

Whereas, the Parties have memorialized their agreement and understandings into this Agreement.

NOW THEREFORE, Montgomery County, the City of Panorama Village, and the City of Conroe by and through their respective governing bodies, do hereby agree to the continued operation of the MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT for two years in accordance with and subject to the following Agreement:

GENERAL PROVISIONS

1.1 Definitions

1.1.1 “Act” means the Local Public Health Reorganization Act.

1.1.2 “Board” means the Administrative Board of the MCPHD.

1.1.3 “District” means the Montgomery County Public Health District.

1.1.4 “Effective Date” of this Agreement means October 1, 2023.

1.1.5 “Essential public health services” means those services defined in the Act at Section 121.002(1) of the Texas Health and Safety Code.

1.1.6 “Executive Director” means the chief administrative officer of the MCPHD.

1.1.7. “Governing bodies” means the Commissioners Court, city councils, or governing boards of the Members of the Public Health District.

1.1.8. “Health Authority” means the physician who is to administer the state and local laws relating to public health.

1.1.9 “MCHD” means the Montgomery County Hospital District.

1.1.10 “MCPHD” means the Montgomery County Public Health District.

1.1.11 “Member” means Montgomery County, the City of Conroe and the City of Panorama Village, each of which is a participant in the MCPHD.

1.2 MCHD Responsibilities and Obligations. Following the Effective Date, MCHD shall continue performing the services set out in the prior Interlocal Agreement for the Provision of Public Health Services under the terms and conditions therein stated, and MCPHD hereby accepts and agrees to the following terms and conditions for the services assumed by MCHD:

1.2.1 Employee Positions. Designated MCHD employees are hired and assigned to perform essential public health services for MCPHD. MCHD will continue managing the current MCPHD employee positions in MCPHD health-related areas, which positions may be changed from time to time by MCHD. These positions shall include contracted physicians as Local Health Authority and Clinic Medical Director.

1.2.2 Grant Funded Positions. The Parties acknowledge that MCPHD employee positions, excluding the MRC Coordinator, are currently funded or partially funded by one or more state and federal grants and the County’s contribution to the local essential public health services.

1.2.3 Public Health Service Grants. From the Effective Date forward, as grants expire MCHD will continue to apply for the following grants to continue essential public health services for Clinic (TB, STD, Immunizations); Epidemiology; and Health Preparedness.

1.2.4 MCPHD Lease Space. The MCHD leased space currently provided to MCPHD since 2012 will remain at \$21.00 per square foot during the term of this Agreement while MCPHD is operational.

1.2.5 Montgomery County Health Authority. MCHD shall cooperate and work with the appointed Montgomery County Health Authority when necessary on matters pertaining to the performance of services under this Agreement. MCHD shall pay the Montgomery County Health Authority out of the funds made available through grants and/or the COUNTY contribution to health services.

1.2.6 Accounting. MCHD agrees that it will keep accurate records of the services and expenditures related to all services provided to the MCPHD pursuant to this Agreement. Upon request, MCHD shall make available to the Members its books and records of such services and expenditures for its review and inspection at a mutually agreeable time.

1.2.7 Consideration of Unanticipated Health Emergencies. The Parties acknowledge that the grant funds acquired for the services provided under this Agreement may not be sufficient in the event of an unexpected widespread occurrence such as an outbreak, epidemic (e.g. COVID-19, Ebola, Hantavirus, rabies, influenza, SARS, cholera), or intervention of emerging or new diseases constituting public health threats (chemical or biological). MCHD shall name a liaison to discuss any emergency issues which may arise during the term of this Agreement with the Board of the MCPHD. Contact information shall be shared by the Parties on or prior to the Effective Date of this Agreement.

1.2.8 Continuing Legal Compliance. To the extent that the MCPHD may have a continuing legal duty to serve the citizens of the MCPHD service area for public health issues, MCPHD agrees to cooperate and coordinate with MCHD for services contemplated under this Agreement.

1.3 No Encumbrance of Existing MCHD Funds. Other than funds received from grants as described in the preceding section, MCHD is not responsible to provide any funding from its budget to pay salaries or expenses related to the employee positions that are the subject of this Agreement. The Parties agree that the full cost to MCHD of the new positions will be paid from grant funding, County contributions for local health services, MCPHD reserve funds, or obtained directly by MCHD from state, federal or other sources. If the total of all funding is not sufficient to pay the full cost for the aforementioned employee positions, MCHD shall have the right to contribute funding from its own reserves in its sole discretion. If MCHD chooses not to provide funding; MCHD shall notify the MCPHD and the Members in writing and all parties agree to meet and confer in good faith to resolve any funding shortfall. To the extent the Parties find that funding is not available to cover the full cost of the aforementioned employee positions, then MCHD may suspend or terminate one or more of the employees at its sole discretion.

II. COOPERATIVE AGREEMENT

2.1 This Agreement shall commence on the Effective Date and shall continue in effect for two years until September 30, 2025 as agreed upon by all Members of this Agreement. This Agreement must be approved by the governing body of each Member and signed by the authorized officer of each governing body.

2.2 This Agreement may be modified at the request of a Member, subject to the unanimous approval of all existing Members and MCHD. Modification of the Agreement shall be in writing.

2.3 A copy of this Agreement and any subsequent modifications shall be included in the minutes of the governing body of each Member and shall be filed with the county clerk, the city clerk of affected municipalities, and the Texas Department of Health Services.

2.4 A school district or other governmental entity may apply to become a member of the MCPHD. The governing body of each existing Member shall review the application from the school district or other governmental entity seeking membership in the MCPHD. Upon written approval by each existing Member's governing body, the school district or other governmental entity may be admitted to membership upon such terms as are acceptable to the applicant and Members. Procedures for the admission, withdrawal and expulsion of Members shall be initiated by and implemented through the Executive Director. Any determination as to admission, withdrawal and expulsion shall occur after due diligence and consideration of all facts, and such consideration shall include, but not be limited to, all rules of the Act.

2.5 The County and Cities agree that on or before September 30, 2025 the essential public health services currently provided by MCPHD will be assumed by and merged into a new department(s) of MCHD. In contemplation of this merger of public health services and the concurrent dissolution of MCPHD, MCHD will apply for public health service grants as they expire and other available sources to fund those Montgomery County's essential public health services currently provided by MCPHD.

2.6 MCPHD will be dissolved on September 30, 2025. Procedures for the dissolution of the Public Health District shall be initiated by and through the Executive Director. Any Member may withdraw from MCPHD prior to that date upon request of its governing body with the consent of a majority of the remaining Members, or by the giving written notice to the remaining Members and the MCPHD Executive Director of its intention to withdraw with at least six months' notice prior to the end of MCPHD's fiscal year. If the City of Conroe or City of Panorama Village withdraws, no dissolution shall occur as long as one remaining Member is a municipality. If Montgomery County withdraws, the MCPHD shall be dissolved.

2.7 All actions to dissolve MCPHD shall be exercised in accordance with existing local, state, and federal laws and rules as they pertain to the termination of personnel, property and the responsibility to provide services.

III. FINANCIAL ADMINISTRATION

3.1 Financial administration of the MCPHD shall be contracted to the Montgomery County Hospital District.

3.2 From the Effective Date forward, MCHD shall seek funding from the Texas Department of Health Services or its successor (or any other state or federal agency), and from public or private grants for provision of elected Public Health Services grants to continue essential public health services, specifically for Clinic (TB, STD and Immunizations); Epidemiology; and Health Preparedness. Any Member may, at its sole discretion, provide funding to the MCPHD for any funding shortfalls to the MCPHD.

3.2.1 As of the Effective Date of this Agreement, MCPHD has over Three Million Dollars (\$3,000,000.00) in its operating account. The Members agree that there should always be emergency contingency funds available to the MCPHD in the event of a pandemic or other unforeseen major public health crisis. Therefore, the Members agree that funds in the MCPHD combined balance in its operating and investment accounts should never fall below Two Million Five Hundred Thousand Dollars (\$2,500,000.00), herein **“the Emergency Contingency Threshold.”**

3.2.2 Subject to the Nonappropriation of Funds provision found in Section 9.5 of this Agreement, Montgomery County shall provide funding in the amount of Ninety Thousand Dollars (\$90,000.00), paid at \$7,500.00 per month, to the MCPHD for fiscal year 2024 beginning October 1, 2023.

3.2.3 Subject to the Nonappropriation of Funds provision in Section 9.5 of this Agreement, Montgomery County shall provide funding to MCPHD in the amount of \$600,000.00 per year (paid \$50,000.00 per month) for fiscal year 2025 beginning October 1, 2024.

3.2.4 In the event that MCHD is notified that the County or other Members will not pay to maintain the Emergency Contingency Threshold amount described in Subsections 3.1.1 above, the Parties understand that MCHD may terminate its management of MCPHD with 120 days' written notice and the management thereby assumed by the County or other third-party manager as determined by the Administrative Board.

3.2.5 The current annual MCPHD Management Fee of \$100,00.00 as referenced in the Prior Agreement, as amended, shall be paid to the MCHD by MCPHD during the two-year term of this Agreement for managing MCPHD support services, including but not limited to accounting, I.T. services, H. R. services, etc.

3.3 Funding is designed to cover shortfall of costs necessary for implementation of the programs, services, and administrative needs of the MCPHD, which may include, but are not limited to the costs for:

3.3.1. MCPHD staff salaries and fringe benefits

3.3.2. supplies

3.3.3. suitable office quarters

3.3.4. health and clinic centers

3.3.5. health services and facilities

3.3.6 transportation

3.3.7 maintenance

3.4 The MCPHD or its designee shall be allowed to access and collect fees for its services (such as immunizations) as may be lawful under any existing laws, regulations, or existing business practices.

3.5 The Executive Director will provide to the Members no later than Ninety (90) days after the close of the fiscal year a financial report containing the assets and liabilities of the MCPHD, a balance sheet income and expense report, and a general report of the activities of the MCPHD. The Executive Director shall also provide financial reports to Members as needed upon request by a Member or for grant applications and requirements.

IV. EXECUTIVE DIRECTOR

4.1. The founding County and Cities shall appoint the Chief Executive Officer of the Montgomery County Hospital District as the Executive Director of the MCPHD. The Executive Director shall be the chief administrative officer of the MCPHD and shall manage the MCPHD director who shall be responsible for the day-to-day operations of the MCPHD. The Executive Director of the MCPHD shall serve without compensation by the MCPHD, and no Member will be required to fund his or her position.

4.2. If the Executive Director is a physician licensed and in good standing in the State of Texas, the Executive Director will also serve as Health Authority in the jurisdiction of the MCPHD. If the Executive Director is not a physician licensed and in good standing in the State of Texas, a Health Authority shall be appointed as provided in Section 8.1.

4.3. The Executive Director shall be an ex-officio non-voting Member of the Administrative Board.

4.4. At any time, if two-thirds or more of the Members, through a vote of the Administrative Board, determine the Executive Director has engaged in neglect of duty, malfeasance, or unbecoming behavior, or has otherwise violated provisions of the MCPHD'S policies, the Executive Director may be terminated immediately. In that event of the Executive Director's death, resignation, or removal from office, the Board shall select a new Executive Director from the MCHD staff.

4.5. The Executive Director may employ such full or part-time employees as are needed to carry out the programs of the MCPHD. These employees shall be employees of the MCHD, or other government entity as contemplated by this Agreement, and perform those duties as are assigned to them. The compensation of such personnel shall be determined by the Executive Director as contemplated by Section 6.1, subject to the laws of the State of Texas. The Executive Director shall have the authority, subject to provisions of the policies and procedures of the MCPHD, to hire, terminate, direct, and control the work, as functionally appropriate, of such employees. The Executive Director may contract for services as needed to carry out the programs of the MCPHD.

4.6. Only the Executive Director or his/her designee acting in compliance with any business practices or policies and procedures established and approved by the Members, may, in the name of and on behalf of the MCPHD, enter into contracts or execute and deliver instruments. Any contracts or legal instruments shall be subject to policies and limits that the Members may choose to impose on the authority of the Executive Director.

V. PURPOSE OF THE DISTRICT

5.1. The MCPHD may perform public health functions that any of its Members may perform unless otherwise restricted by law. The Executive Director, with approval from the Administrative Board, shall determine which public health programs and services will be provided by the MCPHD based on needs assessment and the availability of resources. No Member may force the MCPHD to undertake a particular program or service, and each Member shall be responsible to maintain services required by law which are not undertaken and performed by the MCPHD.

5.2. The MCPHD may provide specific essential public health services requested by a Member even if such services are not needed or desired by other Members, subject to the following conditions:

5.2.1. funding is provided by the specific Member requesting the services or a grant funds the specific services requested;

5.2.2. the Administrative Board approves the services to be provided, and

5.2.3. acceptance or approval of the project by the Montgomery County Hospital District or other third-party provider.

5.3. The MCPHD shall be affiliated with the Texas Department of State Health Services or its successor to facilitate the exchange of information and the coordination of public health services.

5.4. The MCPHD may provide “essential public health services” as defined in Section 121.002 of the Act.

5.4.1. monitor the health status of individuals in the community to identify community health problems;

5.4.2. diagnose and investigate community health problems and community health hazards;

5.4.3. inform, educate, and empower the community with respect to health issues;

5.4.4. mobilize community partnerships in identifying and solving community health problems;

5.4.5. develop policies and plans that support individual and community efforts to improve health;

5.4.6. enforce laws and rules that protect the public health and ensure safety in accordance with those laws and rules;

5.4.7. link individuals who have a need for community and personal health services to appropriate community and private providers;

5.4.8. ensure a competent workforce for the provision of essential public health services;

5.4.9. research new insights and innovative solutions to community health problems;
and

5.4.10. evaluate the effectiveness, accessibility, and quality of personal and population-based services in a community.

5.5. By way of illustration but not by way of requirement or limitation, the MCPHD may also provide public health services such as the following: communicable disease control and prevention services; tuberculosis and sexually transmitted disease control services; public health education, information and referral services; health emergency preparedness and response; and collaborating with others to address public health issues.

5.6. Members and other government entities, as well as private institutions both within and outside of Montgomery County, Texas, may contract with MCPHD to provide additional public health services upon approval of the Administrative Board and providing there is adequate funding.

VI. ASSIGNMENT OF DUTIES TO MONTGOMERY COUNTY HOSPITAL DISTRICT

6.1. MCPHD shall contract with the Montgomery County Hospital District to administer all programs, services, and administrative needs of the MCPHD. Any and all funding given to, acquired by or earned in the name of the MCPHD shall be assigned to the Montgomery County Hospital District for the sole purpose of administering MCPHD programs during the term of this Agreement.

VII ADMINISTRATIVE BOARD

7.1. The MCPHD shall have an Administrative Board which shall consist of one person, who is an employee, designee, or elected official from each of the following:

1. Montgomery County;
2. City of Conroe;
3. One representative from School Districts or Special Districts who are Members;
4. One representative from Member Cities other than the City of Conroe;
5. One representative from the Montgomery County Hospital District;
6. the Executive Director who is a non-voting Member, and
7. the Public Health Authority who is a non-voting Member.

Each person serving on the Board may serve as long as the Member governing body desires such person to serve. Each Member is responsible to appoint a person to serve on the Board promptly in case of resignation and vacancy. The person must have resided in Montgomery

County for at least three years prior to serving on the Board for a two-year term beginning in January. No person shall receive compensation for serving on the Board. No Board representative may be removed except by affirmative vote of all Members other than the Member whose Board representative is subject to potential removal.

7.2. The Executive Director and the individual serving as the appointed Health Authority shall serve as non-voting Members of the Board. The Board, by majority vote, shall elect a Chairman and a Vice Chairman, who may not be the Executive Director, to conduct meetings in accord with rules of order as approved by the Board. The Board shall have no direct control over the operations of the MCPHD, other than those matters expressly provided for under the terms of this Agreement.

7.3 The Administrative Board is designed to advise the MCPHD on matters of public health and maintain communications with Members of the MCPHD'S activities. The Board shall meet at least twice a year or more frequently as needed for special issues. The Executive Director may call a meeting as needed for special issues.

7.4 All meetings of the Administrative Board shall be conducted in accordance with the Texas Open Meetings Act. The Executive Director or his/her designee shall be responsible for posting meeting notices and keeping minutes of the meeting.

VIII. HEALTH AUTHORITY AND EMPLOYEE MATTERS

8.1. If the Executive Director is not a physician, the Executive Director, subject to approval by the majority of Members through the Board, shall appoint a physician licensed and in good standing in the state of Texas as a Board Member of the MCPHD to serve as the Health Authority. If no local physician can be found who is willing to serve, then the designated Medical Director of the Texas Department of State Health Services or its successor or his/her designee shall serve as the Health Authority. A Health Authority appointed under the provisions of Section 121.021 of the Act has certain duties prescribed by State Law that are necessary to implement and enforce to protect public health. The Health Authority shall aid the MCPHD in all matters of local quarantine, disease prevention and suppression, control of contagious infections, and epidemic diseases withing the MCPHD's jurisdiction. The Health Authority is a state officer when performing duties prescribed by state law. (Section 121.024 of the Texas Health and Safety Code).

IX. MISCELLANEOUS PROVISIONS

9.1. **Controlling Law.** The provisions of Chapter 121 of the Texas Health and Safety Code shall be applicable to the MCPHD. In the event of a conflict between Chapter 121 and this Agreement, Chapter 121 shall control.

9.2. **No Waiver of Immunities.** As provided in the Act, the MCPHD is, for the purposes of the Texas Tort Claims Act (Subchapter A, Chapter 101, Texas Civil Practices and Remedies Code), a governmental unit and its actions are governmental functions. As provided in Section 101.063 of the Texas Civil Practices and Remedies Code, a governmental unit that is a Member of a public health district is not liable under Chapter 101 for any conduct of the MCPHD's personnel or for any condition of use of the MCPHD's property. Nothing in this Agreement shall be construed or interpreted to waive this immunity or other immunities available under the law.

9.3. **Transfer of Remaining MCPHD Funds.** When the MCPHD is terminated and dissolves on September 30, 2025, after payment of all liabilities, the MCPHD's unencumbered assets will be transferred to a MCHD designated special account for the continued essential public health services it will provide to the residents of Montgomery County under the terms of its Interlocal Agreement with the County. However, if a particular grant requires distribution under a certain method or manner, such requirement shall be followed.

9.4 **Nonappropriation of Funds.** If any Member's governing body fails to appropriate sufficient funds necessary to adequately comply with the terms of this Agreement, an Event of Nonappropriation shall be deemed to have occurred and the Member shall give written notice of same to the other Members within thirty (30) days. Any Member and MCHD shall have the right to terminate this Agreement at any time after an Event of Nonappropriation has occurred.

9.5 **Amendment and Counterparts.** This Agreement may be amended at any time by a written amendment approved, signed and dated among all the Parties. This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original but all of which shall together constitute one and the same instrument.


9.6 **Non-Assignability.** No Party shall assign, sublet or transfer its interest in this Agreement without the written consent of the other Party.


9.7 **Entire Agreement.** This Agreement constitutes the entire Agreement between the Parties in regard to the provision of public health services contemplated under this Agreement, and supersedes the Prior Agreement and all prior such Agreements between the Parties.

9.8 The MCPHD shall abide by all applicable laws such as the Texas Open Meetings Act, the Texas Public Information Act, applicable bill laws, and applicable privacy laws such as the Health Insurance and Portability and Accountability Act (HIPPA).

9.9 This Agreement shall become effective on the Effective Date as defined above.

ATTEST


County Clerk




MONTGOMERY COUNTY


Montgomery County Judge

ATTEST


Conroe City Secretary

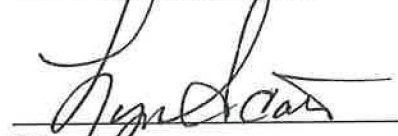
CITY OF CONROE


Mayor

ATTEST

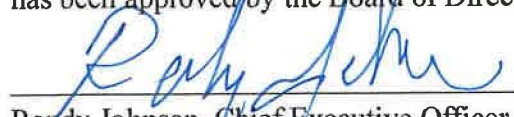

Panorama Village City Secretary

CITY OF PANORAMA VILLAGE


Mayor

MONTGOMERY COUNTY HOSPITAL DISTRICT

This Amended and Restated Montgomery County Public Health District Cooperative Agreement has been approved by the Board of Directors of the Montgomery County Hospital District.


Randy Johnson, Chief Executive Officer

**FIRST AMENDMENT TO AMENDED AND RESTATED
MONTGOMERY COUNTY PUBLIC HEALTH DISTRICT
COOPERATIVE AGREEMENT**

This First Amendment to the Amended and Restated Cooperative Montgomery County Public Health District Agreement (this "First Amendment") is made by and among MONTGOMERY COUNTY, TEXAS, ("**County**"), the CITY OF PANORAMA VILLAGE, TEXAS, and the CITY OF CONROE, TEXAS (jointly referred to as "**Cities**"), under Chapter 121, Subchapter E of the Texas Health and Safety Code laws of the State of Texas, acting by and through their respective authorized officers and representatives.

To the extent that the Montgomery County Hospital District has responsibilities and obligations described in this Agreement, its Board of Directors has approved this First Amendment.

RECITALS

WHEREAS, the County and Cities previously entered into that certain *Amended Restated Montgomery County Public Health District Cooperative Agreement* (the "Agreement") on or about October 1, 2023; and

WHEREAS, the County and Cities have determined that the Agreement should be amended by this First Amendment.

NOW THEREFORE, in consideration of the premises, mutual promises, covenants, obligations and benefits herein contained, the County and Cities agree as follows:

FIRST AMENDMENT

1. The recitals set forth above are declared true and correct and are hereby incorporated as part of this Amendment.

2. Section 3.2.1 is Amended as shown below and incorporated herein for all purposes:

3.2.1 As of the Effective Date of this Agreement, MCPHD has over Three Million Dollars (\$3,000,000.00) in its operating account. The Members agree that there should always be emergency contingency funds available to the MCPHD in the event of a pandemic or other unforeseen major public health crisis. Therefore, the Members agree that funds in the MCPHD combined balance in its operating and investment accounts should never fall below One Million Nine Hundred Thousand Dollars (\$1,900,000.00), herein "**the Emergency Contingency Threshold.**"

3. Section 3.2.3 is deleted in its entirety.

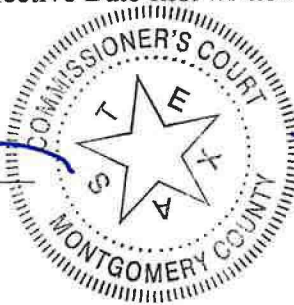
~~3.2.3 Subject to the Nonappropriation of Funds provision in Section 9.5 of this Agreement, Montgomery County shall provide funding to MCPHD in the amount of \$600,000.00 per year (paid \$50,000.00 per month) for fiscal year 2025 beginning October 1, 2024.~~

4. Except as specifically amended in this First Amendment, the Agreement shall remain in full force and effect in accordance with its original terms and conditions.
5. The Effective Date of this First Amendment is March 31, 2025.

IN WITNESS WHEREOF, the undersigned parties have executed this First Amendment to be effective as of the Effective Date first written above.

ATTEST


County Clerk



MONTGOMERY COUNTY


Montgomery County Judge

ATTEST


Conroe City Secretary
Int.

CITY OF CONROE


Mayor

ATTEST


Panorama Village City Secretary

CITY OF PANORAMA VILLAGE


Mayor

MONTGOMERY COUNTY HOSPITAL DISTRICT

This Amended and Restated Montgomery County Public Health District Cooperative Agreement has been approved by the Board of Directors of the Montgomery County Hospital District.


Randy Johnson, Chief Executive Officer

Agenda Item # 16

To: MCPHD Board of Directors
From: Randy Johnson, Executive Director
Date: September 11, 2025
Re: **Tentative meeting**



Public Health
Prevent. Promote. Protect.

Montgomery County, Texas

Consider and act on tentative Public Health District board meeting scheduled for September 25, 2025 as needed. (Melissa Miller – COO – MCHD)