HOPE. WELLNESS. COMMUNITY.

Let's find it together.

TRI·CITY Mental Health

Founded in 1960 by the residents of Pomona, Claremont and La Verne.

www.tricitymha.ca.gov

GOVERNING BOARD

Jed Leano, Chair (Claremont)
Wendy Lau, Vice Chair (La Verne)
Lorraine Canales, Member (Pomona)
Sandra Grajeda, Member (Claremont)
Paula Lantz, Member (Pomona)
Elizabeth Ontiveros-Cole, Member (Pomona)
Trent West, Member (La Verne)

TRI-CITY MENTAL HEALTH AUTHORITY

AGENDA

GOVERNING BOARD REGULAR MEETING

WEDNESDAY, NOVEMBER 18, 2026, AT 5:00 P.M.
BHSA ADMINISTRATION BUILDING
2001 NORTH GAREY AVENUE, POMONA, CA 91767

Join the meeting on Zoom:
https://tricitymhs-org.zoom.us/j/89600937480?pwd=ECnqqLU63rymZ07mZf3198XbxolQOK.1
Passcode: awFL+Wy4

Join by phone (audio only):
Dial: +1 213 338 8477
Webinar ID: 896 0093 7480
Passcode: 14645576

Public Participation. *Section 54954.3 of the Brown Act provides an opportunity for members of the public to address the Governing Board on any item of interest to the public, before or during the consideration of the item, which is within the subject matter jurisdiction of the Governing Board. Therefore, members of the public are invited to speak on any matter on or off the agenda. If the matter is an agenda item, you will be given the opportunity to address the legislative body when the matter is considered. If you wish to speak on a matter which is not on the agenda, you will be given the opportunity to do so at the Public Comment section.* ***No action shall be taken on any item not appearing on the agenda. The Chair reserves the right to place limits on duration of comments.***

In-person participation: *raise your hand when the Governing Board Chair invites the public to speak.*

Online participation: *you may provide audio public comment by connecting to the meeting online through the zoom link provided; and use the Raise Hand feature to request to speak.*

Please note that virtual attendance is a courtesy offering and that technical difficulties shall not require that a meeting be postponed.

Written participation: *you may also submit a comment by writing an email to sazzam@tricitymha.ca.gov. All email messages received by 3:00 p.m. will be shared with the Governing Board before the meeting.*

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by Tri-City Mental Health Authority to all or a majority of the Governing Board less than 72 hours prior to this meeting, are available for public inspection at 1717 N. Indian Hill Blvd., Suite B, in Claremont during normal business hours.

In compliance with the American Disabilities Act, any person with a disability who requires an accommodation to participate in a meeting should contact JPA Administrator/Clerk Trainee Sara Azzam at (909) 451-6429 at least 24 hours prior to the meeting.

Administrative Office
1717 North Indian Hill Boulevard, Suite B
Claremont, CA 91711
Phone (909) 623-6131
Fax (909) 623-4073

Clinical Office / Adult
2008 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 865-9281

Clinical Office / Child & Fam
1900 Royalty Drive, Suite 180
Pomona, CA 91767
Phone (909) 766-7340
Fax (909) 865-0730

BHSA Administrative Office
2001 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 326-4690

Wellness Center
1403 North Garey Avenue
Pomona, CA 91767
Phone (909) 242-7600
Fax (909) 242-7691

GOVERNING BOARD CALL TO ORDER

Chair Leano calls the meeting to Order.

ROLL CALL

Board Members Lorraine Canales, Sandra Grajeda, Paula Lantz, Elizabeth Ontiveros-Cole, and Trent West; Vice Chair Wendy Lau; and Chair Jed Leano.

POSTING OF AGENDA

The agenda is posted 72 hours prior to each meeting at the following Tri-City locations: Clinical Facility, 2008 N. Garey Avenue in Pomona; Wellness Center, 1403 N. Garey Avenue in Pomona; Royalty Offices, 1900 Royalty Drive #180/280 in Pomona; MHSA Office, 2001 N. Garey Avenue in Pomona; and on the TCMHA's website: http://www.tricitymha.ca.gov

CONSENT CALENDAR

1. APPROVAL OF MINUTES OF THE OCTOBER 21, 2026, REGULAR MEETING OF THE GOVERNING BOARD

Recommendation: "A motion to approve the Minutes of the Governing Board Regular Meeting of October 21, 2026."

2. ONTSON PLACIDE, EXECUTIVE DIRECTOR MONTHLY REPORT

Recommendation: "A motion to receive and file."

3. DIANA ACOSTA, CHIEF FINANCIAL OFFICER MONTHLY REPORT

Recommendation: "A motion to receive and file."

4. LIZ RENTERIA, CHIEF PROGRAMS OFFICER MONTHLY REPORT

Recommendation: "A motion to receive and file."

5. SHERYLL PRINZ-MCMILLAN, CHIEF ADMINISTRATIVE OFFICER MONTHLY REPORT

Recommendation: "A motion to receive and file."

6. NATALIE MAJORS-STEWART, CHIEF COMPLIANCE OFFICER MONTHLY REPORT

Recommendation: "A motion to receive and file."

7. SERVICE ENCOUNTER CLAIMS RECONCILIATION AND REPORT

Recommendation: "A motion to receive and file."

8. CONSIDERATION OF RESOLUTION NO. 894 AUTHORIZING AN AMENDMENT TO TCMHA AND LCW AGREEMENT FOR LABOR LEGAL SERVICES

Recommendation: "A motion to adopt Resolution No. 894 Approving the First Amendment to the Agreement with Liebert Cassidy Whitmore (LCW) for a Revised Labor Legal Services Fee Schedule; Authorizing the Executive Director to Execute the Amendment; and Maintaining All Other Terms and Conditions, Including the June 30, 2028 Term."

INFORMATIONAL/DISCUSSION ITEM

9. EDUCATIONAL PRESENTATION AND DISCUSSION ON BHSA HOUSING INTERVENTIONS AND HOUSING FIRST

Recommendation: "Receive the report and discuss BHSA Housing Interventions and Housing First. No formal action will be taken on this item."

GOVERNING BOARD COMMENTS

Members of the Governing Board may make brief comments or request information about mental health needs, services, facilities, or special problems that may need to be placed on a future Governing Board Agenda.

PUBLIC COMMENT

The Public may at this time speak regarding any Tri-City Mental Health Authority related issue, provided that no action shall be taken on any item not appearing on the agenda. The Chair reserves the right to place limits on duration of comments.

ADJOURNMENT

The Governing Board and Behavioral Health Commission will meet next for its Regular Joint Meeting to be held on **Wednesday, December 16, 2026, at 5:00 p.m.** in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.

ONTSON PLACIDE, MA, LMFT
EXECUTIVE DIRECTOR

MINUTES

GOVERNING BOARD
REGULAR MEETING OF THE GOVERNING BOARD
OCTOBER 21, 2026 – 5:00 P.M.

The Governing Board Regular Meeting was held on Wednesday, October 21, 2026, at 5:00 p.m. in the BHSA Administrative Office located at 2001 North Garey Avenue, Pomona, California.

CALL TO ORDER Chair Leano called the meeting to order at 5:00 p.m.

ROLL CALL Roll call was taken by JPA Administrator/Clerk Trainee Azzam.

GOVERNING BOARD

PRESENT: Jed Leano, City of Claremont, Chair
Wendy Lau, City of La Verne, Vice-Chair
Lorraine Canales, City of Pomona, Board Member
Sandra Grajeda, City of Claremont, Board Member
Paula Lantz, City of Pomona, Board Member
Elizabeth Ontiveros-Cole, City of Pomona, Board Member (arrived at 5:11 p.m.)
Trent West, City of La Verne, Board Member (arrived at 5:04 p.m.)

STAFF

PRESENT: Ontson Placide, Executive Director
Steven Flower, General Counsel
Diana Acosta, Chief Financial Officer
Sheryll Prinz-McMillan, Chief Administrative Officer
Liz Renteria, Chief Programs Officer
Natalie Majors-Stewart, Chief Compliance Officer
Sara Azzam, Administrative Assistant

PRESENTATION

REPORT ON THE CALIFORNIA BEHAVIORAL HEALTH PLANNING COUNCIL (CBHPC) 2025 DATA NOTEBOOK: FOSTER YOUTH AND THEIR NEEDS FOR BEHAVIORAL HEALTH, SOCIAL SERVICES, AND SUPPORT FOR COMPLEX MEDICAL NEEDS

Behavioral Health Commission (BHC) Commissioner Sandra Christensen presented an overview of the 2026 Data Notebook, including its purpose, the Ad Hoc Committee process, and the selected topic of foster youth. Commissioner Christensen provided background regarding the Data Notebook and the Ad Hoc Committee's review of information related to youth involved in the foster care system.

DRAFT

MHSA Projects Manager Sara Rodriguez provided additional information regarding changes and developments within the foster care system and discussed broader efforts associated with the foster care system overhaul.

At 5:04 p.m., Board Member West arrived at the meeting.

MHSA Projects Manager Rodriguez reviewed the survey component of the Data Notebook, including how the survey was used to identify and respond to community needs. She also discussed anticipated next steps in the process.

Chair Leano thanked Commissioner Christensen for her presentation and participation in the Data Notebook process and expressed appreciation to staff for providing the information. Chair Leano commented on the importance of ensuring an appropriate level of wraparound services for youth and referenced legislative efforts addressing youth homelessness and housing. He noted that separate efforts had been established through AB 1899 to provide additional support.

At 5:11 p.m., Board Member Ontiveros-Cole arrived at the meeting.

Chair Leano expressed hope that continued planning and service coordination would help identify ways to prevent homelessness among youth. MHSA Projects Manager Rodriguez stated that this objective aligns with the goals being discussed.

Board Member Canales asked why California reflected the highest number within the data presented. MHSA Projects Manager Rodriguez stated that the data did not specifically address the reason for California's higher number. Board Member Canales asked whether California's cost of living could be a contributing factor. MHSA Projects Manager Rodriguez stated that the issue may be addressed as the final report is developed and expressed hope that the data will be rerun to provide additional information and clarification.

CONSENT CALENDAR

Board Member West requested to pull Item Nos. 3, 4, 6, and 8 and to discuss Item No. 6 before Item No. 4.

Board Member Lantz requested to pull Item No. 9.

Chair Leano opened the meeting for public comment; and there was no public comment.

There being no further comment, Vice-Chair Lau moved, and Board Member Ontiveros-Cole seconded, to approve the Consent Calendar Item Nos.1, 2, 5, and 7. The motion was carried by the following vote: Board Members Canales, Grajeda, Lantz, Ontiveros-Cole, and West; and Vice Chair Lau; and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

1. APPROVAL OF MINUTES OF THE SEPTEMBER 16, 2026, REGULAR MEETING OF THE GOVERNING BOARD

Recommendation: "A motion to approve the Minutes of the Governing Board Regular Meeting of September 16, 2026."

2. APPROVAL OF MINUTES OF THE SEPTEMBER 16, 2026, SPECIAL MEETING OF THE GOVERNING BOARD

Recommendation: "A motion to approve the Minutes of the Governing Board Special Meeting of September 16, 2026."

5. LIZ RENTERIA, CHIEF PROGRAMS OFFICER MONTHLY REPORT

Recommendation: "A motion to receive and file."

7. NATALIE MAJORS-STEWART, CHIEF COMPLIANCE OFFICER MONTHLY REPORT

Recommendation: "A motion to receive and file."

NEW BUSINESS

3. ONTSON PLACIDE, EXECUTIVE DIRECTOR MONTHLY REPORT

Board Member West requested clarification regarding coordination between Tri-City Mental Health Authority and the Los Angeles County Department of Mental Health (LACDMH), including efforts to prevent duplication of services and costs.
Executive Director Ontson Placide explained that Tri-City coordinates with LACDMH regarding jurisdictional oversight and Medi-Cal services, with the goal of allowing Tri-City to provide services within its jurisdiction whenever possible. He noted that Mobile Crisis Care (MCC) operates under a separate funding structure and requires additional coordination.
In response to questions regarding crisis response, Chief Programs Officer Renteria confirmed that designated Tri-City personnel are authorized to initiate 5150 holds in accordance with State protocols. She further reported that Tri-City is developing Memoranda of Understanding with its three member cities to clarify coordination with local law enforcement. Tri-City and LACDMH currently coordinate responses to ensure services are provided, with Tri-City frequently serving as the initial responder.
Executive Director Placide acknowledged that coordination procedures are still being developed and reported that staff is working with the three member cities to further clarify roles, reduce duplication, and establish Tri-City as the primary point of contact for behavioral health services within its jurisdiction.

Chair Leano opened the meeting for public comment; and there was no public comment.

There being no further comment, Board Member Canales moved, and Vice-Chair Lau seconded, to received and file the Executive Director's Monthly Report. The motion was carried by the following vote: Board Members Canales, Grajeda, Lantz, Ontiveros-Cole, and West; and Vice Chair Lau; and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

6. SHERYLL PRINZ-MCMILLAN, CHIEF ADMINISTRATIVE OFFICER MONTHLY REPORT

Board Member West expressed concern regarding fluctuations in the agency's vacancy rate and asked whether time-bound recruitment targets and strategies had been established.

DRAFT

Chief Administrative Officer Sheryll Prinz-McMillan and Human Resources Director Kitha Torregano summarized ongoing recruitment efforts, including rapid hiring processes, expanded online advertising, targeted recruitment through Indeed, and consolidation of recruitments for similar clinical classifications. HR Director Torregano reported that approximately 15 recruitments are currently underway.

Executive Director Ontson Placide noted that workforce shortages are affecting behavioral health providers broadly and that BHSA implementation also requires program certifications before certain services can begin. Staff indicated that recruitment and implementation timelines continue to be developed and will be brought back to the Governing Board.

Board Member West expressed appreciation for the update and requested future reporting on recruitment timelines and progress.

Chair Leano opened the meeting for public comment; and there was no public comment.

There being no further comment, Board Member Canales moved, and Board Member Grajeda seconded, to received and file the Chief Administrative Officer's Monthly Report. The motion was carried by the following vote: Board Members Canales, Grajeda, Lantz, Ontiveros-Cole, and West; and Vice Chair Lau; and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

4. DIANA ACOSTA, CHIEF FINANCIAL OFFICER MONTHLY REPORT

Board Member West asked why salary, wage, and benefit expenses had increased despite the agency's continued vacancies.

Chief Financial Officer Diana Acosta explained that the annual merit increase cycle occurs July 1 and reflects an overall increase of approximately 5%, although the increase does not apply uniformly to all employees. She further noted that projected revenues assume full staffing; therefore, due to the agency's current vacancy levels, not all budgeted revenue is expected to be realized.

Chair Leano opened the meeting for public comment; and there was no public comment.

There being no further comment, Board Member Canales moved, and Board Member Grajeda seconded, to received and file the Chief Financial Officer's Monthly Report. The motion was carried by the following vote: Board Members Canales, Grajeda, Lantz, Ontiveros-Cole, and West; and Vice Chair Lau; and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

8. CONSIDERATION OF RESOLUTION NO. 891 APPROVING THREE NEW AGENCY POLICIES AND PROCEDURES – 1) MEDICATION FOR ADDICTION TREATMENT (MAT) FOR SUBSTANCE ABUSE USE DISORDERS (SUD), 2) COMMUNITY PRESENTATIONS PRACTICE AND APPROVAL, AND 3) GRANTS OPPORTUNITY PROCESS

Board Member West referred to the Medication-Assisted Treatment (MAT) sub-item and raised concerns regarding continuity of medication information when a client is unconscious or otherwise

unable to communicate with hospital personnel. He suggested exploring an identification method, such as a medical alert bracelet, that could direct healthcare providers to contact Tri-City for relevant treatment information.

Chief Programs Officer Renteria explained that the requirements presented reflect language from the Substance Abuse Prevention and Control (SAPC) contract and stated that staff coordinates care to the extent reasonably possible. Chief Compliance Officer Majors supported exploring innovative approaches while noting the legal, privacy, and patient-identification considerations involved. She reported that Tri-City is already pursuing participation in a Health Information Exchange.

Executive Director Placide identified Psychiatric Advance Directives (PADs) as another potential tool for facilitating access to important client information. Chief Compliance Officer Majors emphasized that PADs are patient-directed and cannot be mandated. Staff agreed that additional options could be explored.

Board Member West then referred to the Grants Opportunity Process sub-item and asked whether the agency's process includes both identifying grant opportunities and applying for appropriate funding.

Strategic Initiative Director Sapinoso confirmed that the process includes grant solicitation and explained that identified opportunities are evaluated for alignment with the agency's mission before being brought to the Executive Team for further consideration. She noted that eligibility requirements vary by funding source and are reviewed prior to pursuing an application.

Board Member West also asked whether establishing a Tri-City-affiliated nonprofit foundation could provide access to funding opportunities available to nonprofit organizations but not directly to governmental agencies.

Executive Director Placide acknowledged that a foundation or similar structure may provide additional funding opportunities and could potentially be explored given Tri-City's structure as a Joint Powers Authority. He stated that the concept would require legal review and could be considered after the agency progresses further through the BHSA transition. He noted that current organizational capacity does not make exploration of the concept realistic in the immediate future.

Chair Leano opened the meeting for public comment; and there was no public comment.

There being no further comment, Board Member Canales moved, and Board Member Ontiveros-Cole seconded, approving Resolution No. 891 Approving Three New Agency Policies and Procedures – 1) Medication for Addiction Treatment (Mat) For Substance Abuse Use Disorders (Sud), 2) Community Presentations Practice and Approval, And 3) Grants Opportunity Process. The motion was carried by the following vote: Board Members Canales, Grajeda, Lantz, Ontiveros-Cole, and West; and Vice Chair Lau; and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

9. CONSIDERATION OF RESOLUTION NO. 892 APPROVAL OF REVISED PERSONNEL RULES AND REGULATIONS AND DELEGATION OF ADMINISTRATIVE AUTHORITY

Board Member Lantz requested clarification regarding Sections 1 and 6 through 8, which delegate authority to the Executive Director to make changes that are not considered material, and expressed concern that the definition of "material" appeared broad. Executive Director Ontson Placide explained that material changes would include matters affecting administrative policies, employee rights, compensation or benefit structures, Governing Board authority, and fiscal commitments.

Board Member Lantz questioned whether changes to job descriptions could occur without notification to the Governing Board and expressed concern regarding transparency and the Board's ability to maintain appropriate oversight and accountability. Vice-Chair Lau noted that material changes would remain within the Governing Board's purview and stated that the delegation is intended to provide the Executive Director appropriate administrative authority without requiring Board action on every minor operational matter.

General Counsel Flower provided additional clarification regarding the distinction between administrative changes, such as certain title or wording revisions, and substantive changes requiring Governing Board consideration. Executive Director Placide stated that employment counsel had reviewed the provisions and that the delegated authority was structured similarly to the authority exercised by city managers in Tri-City's member cities.

Chair Leano acknowledged the importance of accountability and transparency. Executive Director Placide emphasized that the provisions are intended to streamline minor administrative matters rather than diminish Governing Board oversight, and that material financial or fiscal matters would continue to receive the appropriate level of review.

Chair Leano opened the meeting for public comment; and there was no public comment.

There being no further comment, Board Member Canales moved, and Board Member Ontiveros-Cole seconded, approving Resolution No. 892 Approving the Revised Personnel Rules and Regulations and Delegation of Administrative Authority. The motion was carried by the following vote: Board Members Canales, Grajeda, Lantz, Ontiveros-Cole, and West; and Vice Chair Lau; and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

10. CONSIDERATION OF RESOLUTION NO. 893 AWARDING A CONTRACT TO GUARANTEED JANITORIAL SERVICE, INC. FOR JANITORIAL SERVICES IN THE AMOUNT OF $833,398 FOR THREE YEARS (FISCAL YEARS 2027 THROUGH 2029) WITH AN OPTION TO EXTEND THE TERM FOR AN ADDITIONAL TWO YEARS (FISCAL YEARS 2030 AND 2031) IN THE AMOUNT OF $567,734 FOR A TOTAL AMOUNT OF $1,401,132 AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE CONTRACT AND AUTHORIZE AN AMENDMENT TO THE 2026-27 OPERATING BUDGET IN THE AMOUNT OF $45,000 INCREASING JANITORIAL SERVICES EXPENSE

Chief Administrative Officer Prinz-McMillan reported that 12 applications were received through the procurement process, of which three met all required qualifications. She stated that staff recommended the vendor that received the highest evaluation rating while offering the most reasonable cost.

Board Member West asked whether the contract would include disposal of sharps generated through the agency's new programs. Chief Financial Officer Acosta clarified that sharps disposal is covered under a separate contract.

Chair Leano opened the meeting for public comment; and there was no public comment.

There being no further comment, Board Member Grajeda moved, and Vice-Chair Lau seconded, to approve Resolution No. 893 Awarding a Contract to Guaranteed Janitorial Service, Inc. for Janitorial Services in the amount of $833,398 for three years (Fiscal Years 2027 through 2029) with an Option to Extend the Term for an additional two years (Fiscal Years 2030 and 2031) in the amount of $567,734 for a total Amount of $1,401,132 and Authorizing the Executive Director to Execute the Contract and Authorize an Amendment to the 2026-27 Operating Budget in the amount of $45,000 Increasing Janitorial Services Expense.. The motion was carried by the following vote: Board Members Canales, Grajeda, Lantz, Ontiveros-Cole, and West; and Vice Chair Lau; and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

11. COONSIDERATION OF PROPOSED NAME CHANGE FROM TRI-CITY MENTAL HEALTH AUTHORITY TO TRI-CITY BEHAVIORAL HEALTH AUTHORITY AND DIRECTION TO STAFF TO PROCEED WITH FURTHER REVIEW

Executive Director Ontson Placide clarified that the item was for consideration of a motion to support exploration of a potential agency name change, rather than approval of a name change. He reported that 43 of 60 counties have transitioned to using "Behavioral Health" in their agency names and stated that the terminology may more accurately reflect Tri-City's current scope of services. He acknowledged that a name change would require significant legal, regulatory, administrative, and operational work and stated that staff would return to the Governing Board with the advantages, disadvantages, costs, and other considerations before any change was proposed.

Chair Leano clarified that the purpose of the discussion was to provide direction to staff. Board Member Lantz expressed support for the concept but questioned whether the timing was appropriate given the agency's current workload and BHSA transition. Board Member Canales commented that "Behavioral Health" may be more welcoming to individuals and families who may perceive the term "mental health" negatively. Board Member West requested information regarding anticipated costs, staff time, and whether the effort would divert resources from recruitment and other priorities.

Vice-Chair Lau expressed interest in understanding why other agencies have made similar changes and requested additional information regarding the legal, administrative, communications, and rebranding implications. Board Member Grajeda supported further exploration and requested additional information regarding what the process would entail.

Chair Leano expressed conceptual support for further consideration but emphasized the need to determine how the effort would fit within the agency's existing work plan and available staff capacity. The Governing Board expressed interest in receiving additional information at a future meeting before considering further action.

INFORMATIONAL/DISCUSSION ITEM

12. GOVERNING BOARD TRAINING REQUIREMENTS AND SCHEDULING

Executive Director Ontson Placide reminded Governing Board members of mandatory fiscal and ethics training requirements and stated that Tri-City must maintain certificates documenting completion. He noted that member cities may have already provided the required training to their representatives and that community representatives had been provided information for completing the training online.

Executive Director Placide also discussed scheduling a training session at the request of Chair Leano and Vice-Chair Lau. Vice-Chair Lau emphasized that participation on the Governing Board is part of each member's responsibilities and requires members to make time for required training. Chair Leano acknowledged scheduling challenges but agreed that the training needed to be scheduled.

Board Member Ontiveros-Cole and Board Member Canales noted scheduling conflicts. Executive Director Placide recommended January 9 from 8:00 a.m. to 11:30 a.m. for the training and stated that additional details would be distributed to the Governing Board.

GOVERNING BOARD COMMENTS

Board Member West discussed requirements associated with Permanent Supportive Housing (PSH) and the Housing First model, noting limitations on requiring individuals to participate in treatment as a condition of maintaining housing. He requested that the Governing Board receive additional information regarding the requirements and other housing models available to the agency.

Chief Programs Officer Renteria noted that the Department of Health Care Services (DHCS) housing guidance addresses the applicable philosophy and requirements and stated that the information would be provided to JPA Administrator/Clerk Trainee Azzam for distribution to the Governing Board.

Chair Leano noted that many of the requirements are established by statute and the Legislature and requested that the relevant information be provided to the Governing Board. Board Member Lantz agreed that additional information would be helpful, particularly given changes in housing requirements, potential conflicts with State law, service-participation limitations, and Harm Reduction principles. She expressed interest in a broader discussion regarding requirements applicable to housing programs owned by or involving Tri-City Mental Health Authority.

Board Member Lantz also inquired about the groundbreaking for the St. Ambrose housing project. Board Member Grajeda reported that the groundbreaking was scheduled for November 16.

PUBLIC COMMENT

None.

ADJOURNMENT

DRAFT

At 6:30 p.m., on consensus of the Governing Board, its Regular Meeting of October 21, 2026, was adjourned. The next Regular Meeting of the Governing Board will be held on Wednesday, November 18, 2026, at 5:00 p.m., in the BHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.

_____

Ontson Placide, MA, LMFT
Executive Director

DRAFT

TRI·CITY Mental Health

Tri-City Mental Health Authority
MONTHLY STAFF REPORT

DATE: November 18, 2026

TO: Governing Board of Tri-City Mental Health Authority

FROM: Ontson Placide, Executive Director

SUBJECT: Monthly Executive Director Report

I. EXECUTIVE SUMMARY

Behavioral Health Services Act (BHSA) Implementation Update
BHSA implementation efforts remain focused on organizational readiness, workforce development, program planning, and infrastructure development. Staff continue working with consultants to coordinate implementation activities, advance Evidence-Based Practice training and certification, and establish the necessary clinical and administrative systems.

Substance Use Prevention and Treatment (SUPT)
Staff continue addressing the remaining Los Angeles County SAPC certification requirements following receipt of Tri-City's DHCS Substance Use Disorder Program License. No significant changes occurred during this reporting period.

LACDMH Collaboration
Discussions with LACDMH continue to progress, with an increased focus on program-specific implementation, service delivery, and operational requirements associated with the proposed contractual framework.

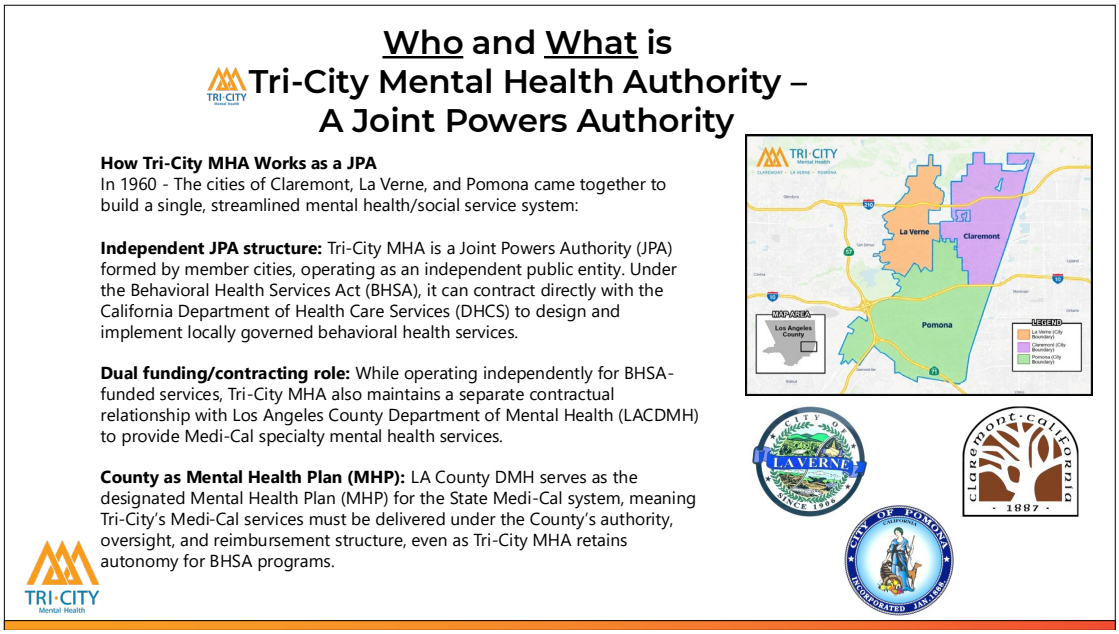
City Collaboration and Service Coordination
Tri-City is working with Claremont, La Verne, and Pomona to establish a greater presence on each city's website. These efforts are intended to increase community awareness of available behavioral health services, improve access to resources, and strengthen coordination across the three cities.

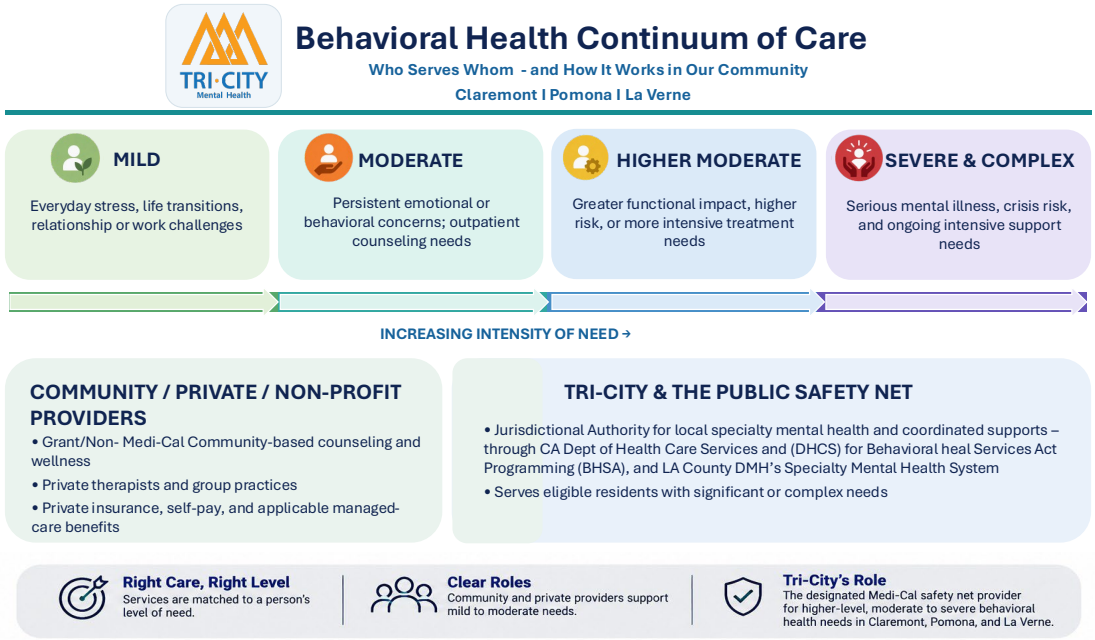
MHSA to BHSA Reversion Projects Update
All three approved reversion projects remain in progress, with no significant changes during this reporting period.

1. Modular Homes Project – Pomona: Implementation activities continue following the initial transfer of funds.
2. Honey Crest Housing Development (aka St. Ambrose) – Claremont: The groundbreaking ceremony is scheduled for November 16, 2026, marking an important milestone in expanding supportive housing within Tri-City's jurisdiction.
3. Baseline Senior Housing Project: The project remains underway, with ongoing monitoring and monthly expenditure reporting.

Tri-City's Evolving Behavioral Health System
As Tri-City undergoes its transformation under the Behavioral Health Services Act (BHSA), increasing awareness of the agency's evolving role and expanded service offerings remains

a priority. The accompanying illustrations provide a concise overview of Tri-City's organizational structure, funding partnerships, continuum of care, and current and planned programs. These materials are intended to serve as an educational and communication resource for public officials, community partners, service providers, and residents to promote a shared understanding of how Tri-City operates, the populations it serves, and the expanding behavioral health resources available within Claremont, La Verne, and Pomona. They will also serve as a foundation for ongoing discussions regarding service coordination, community needs, and opportunities for collaboration.







II. DEPT. OPERATIONAL ITEMS / PROGRAMS & SERVICES

A. Dept/Program Priorities / Projects – See Individual Executive Team Reports

B. Strategic Initiative Director:

Future Planning Update
Staff continue to work on aligning the Wellness Center with California's new requirements and responsibilities of behavioral health transformation. Activities include:

- Refining the timeline of tasks, activities, and meetings with corresponding roles, responsibilities, and deliverables through June 30, 2029 (one year after the date by which residual time-limited MHSA funds expire);
- Evaluating the Wellness Center's role in behavioral health disorder prevention, early intervention, outreach and engagement, recovery, social connection, and step-down support;
- Examining the feasibility of different funding sources: Medi-Cal, Drug Medi-Cal, BHSA, managed care, public health, grants (local, state, federal, philanthropic), corporate sponsorship; and,
- Designing services and programs (including personnel structure) that support TCMHA's mission.

Grant solicitation
As part of TCMHA's efforts to reach its selected statewide population behavioral health goal of improved care experience, the Strategic Initiatives Director submitted an Intent to Apply form for the Innovation Partnership Fund (IPF) grant opportunity created by

Proposition 1 and administered by the California Commission for Behavioral Health. TCMHA plans to solicit an IPF grant to implement an innovation (feedback-informed treatment) that operationalizes client-centered care, anchors client voice to treatment, and respects and empowers clients while they receive services. An invitation to submit a full proposal is anticipated for January 2027.

Grant(s) research

Opportunity	Funder	Comments/Notes
1. Flexible Housing Subsidy Pools ("Flex Pools") Investment Grant Request for Applications (RFA)	CA Department of Health Care Services (DHCS)	In review
2. Innovation Partnership Fund	CA Commission for Behavioral Health (CBH)	11/6 Emailed Intent to Apply form
3. Youth Community Access Grant Program	CA Natural Resources Agency	Not in alignment with TCMHA's mission--requires field trips to natural/cultural resources, scientific educational programming, or workforce development/career pathway training in a natural/cultural resource field
4. Healthy Soils Program Block Grant	CA Department of Food and Agriculture	Not applicable--supports producers, farmers, and ranchers
5. Community-Driven Behavioral Health Initiative (CDBHI) Grant Program	CA Department of Public Health	TCMHA=ineligible applicant; open to 501(c)(3) Community-Based Organizations and tribal entities

III. NATIONAL & STATEWIDE UPDATES IN BEHAVIORAL HEALTH

NATIONAL & CA GOVERNMENT

As California's Governor touts the positive impact of CARE Court, others are begging for reforms to strengthen it- *Michelle Cabrera is executive director of the County Behavioral Health Directors Association of California. She says involuntary treatment is necessary at times but leaders should focus on other solutions first. "Guaranteeing that every low-income Californian who has Medi-Cal can get substance use disorder residential or inpatient treatment, that's not something we can offer today, and it's something that would work, along with, of course, expanding housing subsidies and access to permanent supportive housing for people who need a little extra help," she said.* *ABC Sacramento*

MENTAL HEALTH

Over 1 in 4 adults with frequent mental distress can't afford care: Report- *The share of U.S. adolescents with depression fell by about a quarter in three years, to 15.4% in 2024 from 20.8% in 2021, according to Mental Health America's "State of Mental Health in America 2026" report, released Nov. 9. Adults have not seen the same progress. The share of adults with mental illness has held steady since 2021, and cost is keeping more*

of them from care. The report's coverage data was collected before recent drops in ACA marketplace enrollment, which MHA said won't show up until federal survey data for 2025 and 2026 is released. Here are 10 things to know: Becker's Behavioral Health

Mental health ranked by state- *Maryland ranks No. 1 overall for mental health, a measure that combines rates of mental illness and access to care, while Nevada ranks last, according to Mental Health America's "State of Mental Health in America 2026" report. The nonprofit ranked all 50 states and the District of Columbia on 17 measures. Seven measure prevalence, including adult and youth rates of mental illness, substance use disorder and serious thoughts of suicide. The other 10 measure access to care, including insurance coverage, treatment rates and mental health workforce availability. Becker's Behavioral Health*

SUD

Mindfulness Therapy Assisted by Ketamine May Strengthen Body Awareness to Reduce Opioid Cravings- *Researchers from University of California San Diego School of Medicine have found that adding ketamine to a mindfulness-based treatment for opioid use disorder may strengthen people's ability to recognize and respond to signals from their bodies — changes that may help reduce opioid cravings. The study, published on Nov. 5, 2026 in the Journal of Psychopharmacology, provides new insight into how ketamine-assisted psychotherapy may enhance addiction treatment. UC San Diego Today*

HOMELESSNESS

Christopher Carlisle and Anne Marie Carlisle: A Sacramento father asks Gov. Newsom to help get his homeless daughter off the streets- *You see them wandering our streets. They are dirty, possibly talking loudly and sometimes seeking a handout. They are mentally ill and homeless people in California, the fourth-largest economy in the world and one of America's most liberal states. So, you wonder, "Why doesn't someone do something to help them?" As matters now stand, unless they seek treatment themselves, they will likely not receive help. Unless they hit a legal "tripwire," they will elude treatment. Sacramento Bee*

Assemblyman Ramos Raises $5M for Family Assistance Program to Build Housing, Youth Center for Unhoused Youth- *In an effort to help the region's unhoused youth and prevent adult homelessness, California Assemblymember James C. Ramos presented a $5 million state funding commitment for Family Assistance Program, a local nonprofit, to build housing and provide support services for the region on Tuesday, Oct. 20. The investment comes as 28,164 San Bernardino County K-12 students — 7% of total enrollment — were identified as homeless or lacking secure housing during the 2024-25 school year, according to the county's Community Indicators Report. Among those students, 88% share housing with other families because of economic hardship. Inland Empire Community News*

Pregnant former foster youth fights to avoid homelessness again- *Leslie Olivarez experienced homelessness as a foster youth. Now, eight months pregnant, she's fighting*

to keep from experiencing it again. "I've spent most of my life on my own, I just want to be stable and happy," Olivarez said. "As a mom, you want the best for your baby, and you want somewhere to call home." With a December due date approaching, the 31-year-old says she is running out of time and running out of options. Olivarez has faced homelessness before, and after aging out of foster youth benefits at 21, she says she has struggled to find resources to help. ABC Bakersfield

END>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>

AGENDA ITEM NO. 3

Tri-City Mental Health Authority
MONTHLY STAFF REPORT

DATE: November 18, 2026

TO: Governing Board of Tri-City Mental Health Authority
Ontson Placide, LMFT, Executive Director

FROM: Diana Acosta, CPA, Chief Financial Officer

SUBJECT: Monthly Report of Finance and Facilities

I. EXECUTIVE SUMMARY

UNAUDITED FINANCIAL STATEMENTS FOR THE THREE MONTHS ENDED SEPTEMBER 30, 2026 (2027 FISCAL YEAR-TO-DATE):

Board Indicator	Status	Summary Comments
Liquidity / Cash	🟢 Strong	Approximately $58.2M cash balance
Overall Financial Position	🟢 Stable	Approximately $62.1M total net position
Revenue vs. Budget	🟡 Monitor	Operating revenue below budget; BHSA timing contributes to variance
Outpatient Operations	🟡 Monitor	Approximately $3.0M YTD decrease in net position

The financials presented herein are the PRELIMINARY and unaudited financial statements for the three months ended September 30, 2026. These financial statements include the activities from the clinical outpatient operations as well as activities from the implemented BHSA programs.

The increase in net position (income) is approximately $13.9 million. BHSA operations accounted for approximately $17.0 million of the increase, which is primarily the result of recognizing BHSA revenues on hand at the beginning of the fiscal year. BHSA non-operating revenues are reflected when BHSA funds have been received and are eligible to be spent.

During fiscal 2026, Tri-City received BHSA funding of approximately $16.1 million, of which $11.8 million were for approved programs for fiscal 2026-27 BHSA operations and was reflected as BHSA Revenue Restricted for Future Period on the Statement of Net Position (balance sheet) at June 30, 2026. These restricted BHSA revenues have now been recorded as non-operating revenues in fiscal 2026-27. In addition, during this current fiscal year 2026-27 approximately $7.1 million in BHSA funding has been received

of which $6.6 million was identified and approved for use in the current fiscal year 2026-27 and recorded as non-operating revenues, bringing the total BHSA non-operating revenues recognized to date up to approximately $19.6 million. Unlike the requirement to reflect all available and **approved** BHSA funding when received as non-operating revenues, MHSA operating costs are reflected when incurred. Therefore, the matching of revenue to expense is not consistent as the timing of expenditures will lag behind the timing of revenue recognition.

The decrease in net position of approximately $3.0 million is from Clinic outpatient operations, which is the result of operations for the three months ended September 30, 2026 which includes one-time payments made at the beginning of the year.

The total cash balance at September 30, 2026 was approximately $58.2 million, which represents a decrease of approximately $2.9 million from the June 30, 2026 balance of approximately $61.1 million. Outpatient Clinic operations, after excluding any intercompany receipts or costs resulting from BHSA operations, had an decrease in cash of approximately $2.8 million primarily as a result timing of cash receipts from LACDMH. BHSA operations reflected an decrease in cash of approximately $95 thousand, after excluding intercompany receipts or costs resulting from clinic operations. Total increase in BHSA cash reflects the receipt of approximately $7.1 million in BHSA funds offset by the use of cash for BHSA operating activities.

Approximately $1.04 million in Medi-Cal cash receipts have been collected for both Outpatient Clinic Operations and BHSA Operations within the three months ended September 30, 2026. An additional $6.3 million in Medi-Cal receipts have been received through November 4, 2026.

Overall Financial Status: Based on the preliminary unaudited results through September 30, 2026, Tri-City's overall financial position remains stable, with sufficient cash and a strong net position. Although certain revenues are currently below budget, a substantial portion of the variance is associated with the timing and accounting recognition of BHSA funding, while expenditures are also below budget overall. Outpatient clinic operations reflect a year-to-date decrease in net position and will continue to be closely monitored. At this time, management will continue monitoring revenue collections, expenditures, and BHSA funding projections and will report material changes to the Governing Board.

II. DEPT OPERATIONAL ITEMS / PROGRAMS & SERVICES

We continue to closely monitor for any new developments, changes to legislation and updated revenue projections from CBHDA, specifically with regard to BHSA as these revenues continually fluctuate and as evidenced in the past, significantly differ from original projections as well as revised projections. As such, planning appropriately to ensure we meet the needs of our community, and having the ability to make changes as we go will be necessary in the upcoming years, especially if projections wind up being significantly different than currently projected.

III. ADMINISTRATIVE UPDATES

External

- PERS has started an audit of the reporting of longevity pay (20 different municipalities are included in the audit).
    - The final report has been received and management is working with PERS to make the necessary corrections with the PERS reporting system
    - Required corrections to the reporting system have been made and we are awaiting final confirmation that all corrective action has been made.

Internal

- The annual audit of our financial statements has begun with interim field work having commenced the week of July 6, 2026. Final field work is scheduled for October 2026 with final issuance of opinions and statements due to be brought to the Board in December of 2026.

IV. ATTACHMENTS

Attachment 3-A: September 30, 2026 Unaudited Monthly Financial Statements

END >>

TRI-CITY MENTAL HEALTH AUTHORITY
STATEMENTS OF NET POSITION

	TCMH Unaudited	BHSA Unaudited	AT SEPTEMBER 30, 2026 Unaudited	AT JUNE 30, 2026 Unaudited
Current Assets				
Cash	$ 18,450,363	$ 39,718,465	$ 58,168,828	$ 61,059,102
Accounts receivable, net of reserve for uncollectible accounts $950,625 at September 30, 2026 and $704,857 at June 30, 2026	5,635,714	7,026,625	12,662,339	11,728,488
	24,086,077	46,745,090	70,831,168	72,787,590
Property and Equipment				
Land, building, furniture and equipment	4,095,629	13,423,820	17,519,449	17,519,449
Accumulated depreciation	(2,942,931)	(5,451,298)	(8,394,230)	(8,257,749)
Rights of use assets-building lease	2,195,359	-	2,195,359	2,195,359
Accumulated amortization-building lease	(505,873)	-	(505,873)	(401,074)
Rights of use assets-SBITA	2,813,332	-	2,813,332	2,813,332
Accumulated amortization-SBITA	(617,942)	-	(617,942)	(617,942)
Total Property and Equipment	5,037,574	7,972,522	13,010,095	13,251,375
Other Assets				
Deposits and prepaid assets	761,935	62,745	824,680	159,960
Note receivable-Housing Development Projects	-	6,585,589	6,585,589	3,852,335
Total Noncurrent Assets	5,799,509	14,620,856	20,420,364	17,263,671
Total Assests	29,885,586	61,365,946	91,251,532	90,051,261
Deferred Outflows of Resources				
Deferred outflows related to the net pension liability	4,600,989	-	4,600,989	4,600,989
Total Deferred Outflows of Resources	4,600,989	-	4,600,989	4,600,989
Total Assets and Deferred Outflows of Resouces	**$ 34,486,575**	**$ 61,365,946**	**$ 95,852,521**	**$ 94,652,250**
LIABILITIES				
Current Liabilities				
Accounts payable	640,471	10,398	650,869	698,724
Accrued payroll liabilities	368,538	215,841	584,379	751,231
Accrued vacation and sick leave	805,647	1,396,998	2,202,645	2,150,477
Deferred revenue	158,547	-	158,547	162,261
Reserve for Medi-Cal settlements	4,513,200	4,711,625	9,224,825	9,138,591
Current portion of lease liability	314,398	-	314,398	419,197
Current portion of SBITA liability	413,392	-	413,392	413,392
Total Current Liabilities	7,214,194	6,334,863	13,549,056	13,733,874
Long-Term Liabilities				
Lease liability	1,375,088		1,375,088	1,375,088
SBITA liability	1,781,998		1,781,998	1,781,998
Net pension liability	7,984,263	-	7,984,263	7,984,263
Unearned MHSA revenue	-	7,974,203	7,974,203	8,684,945
Total Long-Term Liabilities	11,141,349	7,974,203	19,115,552	19,826,294
Total Liabilities	19,741,409	12,923,200	32,664,608	33,560,168
Deferred Inflow of Resources				
BHSA revenues restricted for future period	-	-	-	11,828,248
Deferred inflows related to the net pension liability	1,080,360	-	1,080,360	1,080,360
Total Deferred Inflow of Resources	1,080,360	-	1,080,360	12,908,608
NET POSITION				
Invested in capital assets net of related debt	1,152,698	7,972,522	9,125,220	9,261,700
Restricted for BHSA programs	-	41,424,153	41,424,153	33,226,218
Unrestricted	12,512,108	-	11,558,179	5,695,555
Total Net Position	13,664,806	49,396,674	62,107,552	48,183,474
Total Liabilities, Deferred Inflows of Resources and Net Position	**$ 34,486,575**	**$ 62,319,873**	**$ 95,852,521**	**$ 94,652,250**

Definitions:
TCMH=Tri-City's Outpatient Clinic
B**HSA**=Behavioral Health Services Act (Proposition 63), previously MHSA

TRI-CITY MENTAL HEALTH AUTHORITY
STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
THREE MONTHS ENDED SEPTEMBER 30, 2026 AND 2025

	PERIOD ENDED 9/30/26		PERIOD ENDED 9/30/26	PERIOD ENDED 9/30/25
	TCMH Unaudited	BHSA Unaudited	Consolidated Unaudited	Consolidated Unaudited
OPERATING REVENUES				
Medi-Cal FFP	$ 1,110,106	$ 1,656,630	$ 2,766,736	$ 2,641,762
Medi-Cal SGF-EPSDT	337,919	563,365	901,285	640,498
Medicare	3,839	1,934	5,772	6,745
Contracts	-	17,152	17,152	8,278
Patient fees and insurance	-	139	139	-
Rent income - TCMH & MHSA Housing	3,451	14,169	17,620	19,011
Other income	189	202	390	459
Net Operating Revenues	**1,455,504**	**2,253,591**	**3,709,095**	**3,316,753**
OPERATING EXPENSES				
Salaries, wages and benefits	4,627,649	4,190,222	8,817,871	8,264,708
Facility and equipment operating cost	472,662	261,117	733,778	876,482
Client lodging, transportation, and supply expense	12,132	20,219	32,351	46,011
Depreciation & amortization	137,010	104,270	241,280	247,725
Security expense	146,334	132,420	278,754	239,801
Professional fees	37,279	62,230	99,509	87,883
Legal fees	60,253	31,337	91,589	85,053
Other operating expenses	243,687	365,015	608,701	450,694
Total Operating Expenses	**5,737,005**	**5,166,829**	**10,903,833**	**10,298,356**
OPERATING (LOSS) (Note 1)	**(4,281,501)**	**(2,913,238)**	**(7,194,739)**	**(6,981,603)**
Non-Operating Revenues (Expenses)				
Realignment	913,838	-	913,838	913,838
BHSA funds	-	19,616,301	19,616,301	13,729,208
Grants and Contracts	260,293	-	260,293	266,851
Interest Income net with FMV	85,089	243,296	328,385	723,265
Total Non-Operating Revenues (Expense)	1,259,220	19,859,597	21,118,817	15,633,162
INCOME (LOSS)	**(3,022,281)**	**16,946,359**	**13,924,078**	**8,651,559**
INCREASE (DECREASE) IN NET POSITION	**(3,022,281)**	**16,946,359**	**13,924,078**	**8,651,559**
NET POSITION, BEGINNING OF YEAR	16,687,087	31,496,387	48,183,474	52,031,405
NET POSITION, END OF MONTH	**$ 13,664,806**	**$ 48,442,746**	**$ 62,107,552**	**$ 60,682,964**

(**Note 1**) "Operating Loss" reflects loss before realignment funding and BHSA funding which is included in non-operating revenues.

Definitions:
Medi-Cal FFP= Federal Financial Participation Reimbursement
Medi-Cal SGF-EPSDT=State General Funds reimbursement for Medi-Cal services provided to children under the "Early and Periodic Screening, Diagnosis and Treatment" regulations.

TRI-CITY MENTAL HEALTH AUTHORITY
STATEMENTS OF CASH FLOWS
THREE MONTHS ENDED SEPTEMBER 30, 2026 AND 2025

	TCMH	BHSA	PERIOD ENDED 9/30/26	PERIOD ENDED 9/30/25
	Unaudited	Unaudited	Unaudited	Unaudited
Cash Flows from Operating Activities				
Cash received from and on behalf of patients	$ 376,343	$ 686,514	$ 1,062,857	$ 789,225
Cash payments to suppliers and contractors	(1,791,499)	(870,557)	(2,662,056)	(2,921,133)
Payments to employees	(4,432,409)	(4,500,146)	(8,932,555)	(7,700,528)
	(5,847,565)	(4,684,189)	(10,531,754)	(9,832,436)
Cash Flows from Noncapital Financing Activities				
BHSA Funding	-	7,071,908	7,071,908	4,802,079
CalHFA-State Administered Projects	-	5,403	5,403	-
Realignment	2,586,711	-	2,586,711	2,592,213
Grants and Contracts	384,872	-	384,872	124,765
	2,971,583	7,077,311	10,048,894	7,519,058
Cash Flows from Capital and Related Financing Activities				
Purchase of capital assets	-	-	-	(30,865)
Note receivable from Housing Development Projects	-	(2,733,254)	(2,733,254)	-
	2,279,891	(5,013,145)	(2,733,254)	(30,865)
Cash Flows from Investing Activities				
Interest received	143,505	403,250	546,755	639,268
	143,505	403,250	546,755	639,268
Net Increase (Decrease) in Cash and Cash Equivalents	(452,586)	(2,216,773)	(2,669,359)	(1,704,975)
Cash Equivalents at Beginning of Year	18,965,830	42,093,273	61,059,102	69,649,305
Cash Equivalents at End of Month	**$ 18,513,244**	**$ 39,876,499**	**$ 58,389,743**	**$ 67,944,330**
Cash from the Balance Sheet	**18,450,363**	**39,718,465**	**58,168,828**	**67,992,919**
YTD Gain/(Loss) from GASB 31 Fair Market Value	**$ (62,881)**	**$ (158,034)**	**$ (220,915)**	**48,589**

Definitions:

TCMH=Tri-City's Outpatient Clinic

B**HSA**=Behavioral Health Services Act (Proposition 63), previously MHSA

TRI-CITY MENTAL HEALTH AUTHORITY
STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
ACTUAL TO BUDGET COMPARISON
THREE MONTHS ENDING SEPTEMBER 30, 2026
(UNAUDITED)

	TRI-CITY MENTAL HEALTH OUTPATIENT CLINIC (TCMH)			TRI-CITY MENTAL HEALTH SERVICES ACT (BHSA)			TRI-CITY MENTAL HEALTH AUTHORITY		
	Actual	**Budget**	**Variance**	**Actual**	**Budget**	**Variance**	**Actual**	**Budget**	**Variance**
OPERATING REVENUES									
Medi-Cal FFP	$ 1,210,585	$ 2,967,053	$ (1,756,468)	$ 1,806,575	$ 4,130,858	$ (2,324,282)	$ 3,017,160	$ 7,097,910	$ (4,080,750)
Medi-Cal SGF-EPSDT	368,505	867,242	(498,736)	614,357	1,406,830	(792,473)	982,862	2,274,072	(1,291,209)
Medicare	3,839	-	3,839	1,934	-	1,934	5,772	-	5,772
Patient fees and insurance	-	-	-	139	-	139	139	-	139
Contracts	-	-	-	17,152	-	17,152	17,152	-	17,152
Rent income - TCMH & BHSA Housing	3,451	-	3,451	14,169	-	14,169	17,620	-	17,620
Other income	189	-	189	202	-	202	390	-	390
Provision for contractual disallowances	(131,064)	-	(131,064)	(200,937)	-	(200,937)	(332,002)	-	(332,002)
Net Operating Revenues	**1,455,504**	**3,834,295**	**(2,378,791)**	**2,253,591**	**5,537,688**	**(3,284,097)**	**3,709,095**	**9,371,982**	**(5,662,887)**
OPERATING EXPENSES									
Salaries, wages and benefits	4,627,649	4,027,435	600,214	4,190,222	8,497,775	(4,307,553)	8,817,871	12,525,210	(3,707,339)
Facility and equipment operating cost	472,662	143,529	329,132	261,117	321,219	(60,103)	733,778	464,749	269,030
Client program costs	12,132	38,688	(26,556)	20,219	86,582	(66,364)	32,351	125,270	(92,919)
Grants	-	188,212	(188,212)	126,244	4,052,496	(3,926,251)	126,244	4,240,707	(4,114,463)
BHSA training/learning costs	-	-	-	56,825	-	56,825	56,825	-	56,825
Depreciation, amortization& Captial Outlays	137,010	-	137,010	104,270	1,400,000	(1,295,730)	241,280	1,400,000	(1,158,720)
Security expense	146,334	54,873	91,461	132,420	122,806	9,614	278,754	177,679	101,075
Professional fees	25,180	9,118	16,062	29,806	79,806	(50,001)	54,986	88,924	(33,938)
Legal fees	60,253	37,064	23,189	31,337	82,949	(51,612)	91,589	120,013	(28,423)
Other operating expenses	255,786	98,340	157,446	214,370	218,230	(3,859)	470,156	316,570	153,586
Total Operating Expenses	**5,737,005**	**4,597,259**	**1,139,746**	**5,166,829**	**14,861,863**	**(9,695,034)**	**10,903,833**	**19,459,121**	**(8,555,288)**
OPERATING INCOME (LOSS)	**(4,281,501)**	**(762,964)**	**(3,518,537)**	**(2,913,238)**	**(9,324,175)**	**6,410,937**	**(7,194,739)**	**(10,087,139)**	**2,892,400**
Non-Operating Revenues (Expenses)									
Realignment	913,838	681,496	232,341	-	-	-	913,838	681,496	232,341
BHSA Funding	-	-	-	19,616,301	38,133,090	(18,516,789)	19,616,301	38,133,090	(18,516,789)
Grants and contracts	260,293	162,500	97,793			-	260,293	162,500	97,793
Interest (expense) income, net	85,089	-	85,089	243,296	-	243,296	328,385	-	328,385
Total Non-Operating Revenues (Expense)	**1,259,220**	**843,996**	**415,223**	**19,859,597**	**38,133,090**	**(18,273,493)**	**21,118,817**	**38,977,086**	**(17,858,269)**
INCREASE(DECREASE) IN NET POSITION	**$ (3,022,281)**	**$ 81,032**	**$ (3,103,313)**	**$ 16,946,359**	**$ 28,808,915**	**$ (11,862,556)**	**$ 13,924,078**	**$ 28,889,947**	**$ (14,965,869)**

Definitions:
Medi-Cal FFP= Federal Financial Participation Reimbursement
Medi-Cal SGF-EPSDT=State General Funds reimbursement for Medi-Cal services provided to children under the "Early and Periodic Screening, Diagnosis and Treatment" regulations.

TRI-CITY MENTAL HEALTH AUTHORITY
ACTUAL TO BUDGET VARIANCE EXPLANATIONS
THREE MONTHS ENDING SEPTEMBER 30, 2026

COMMENT: PLEASE NOTE, THE DISCUSSION BELOW MAY USE THE FOLLOWING ABBREVIATIONS:
TCMH==TRI-CITY MENTAL HEALTH (OUTPATIENT CLINIC OPERATIONS)
BHSA==BEHAVIORAL HEALTH SERVICES ACT (ACTIVITIES INCLUDE FSP, BHSS, HOUSING PROGRAMS)

---NOTE: due to the BHSA transition period, Tri-City is experiencing a bulk of costs temporarily until such time that they can be properly allocated. Once the new program teams are built, the costs will be allocated accordingly.

Net Operating Revenues

Net operating revenues are lower than the budget by approximately $5.7 million for the following reasons:

1 **Medi-Cal FFP revenues for FY 2026-27** were approximately $4.1 million lower than the budget.

2 **Medi-Cal SGF-EPSDT revenues for fiscal year 2026-27** were lower than budget by approximately $1.3 million.

3 **Medicare revenues** are approximately $6 thousand higher than the budget. Tri-City records revenue when the services are provided and the claims are incurred and submitted.

4 **Contract revenues** are $17 thousand higher than the budget.

5 **Rent Incomes** are higher than the budget by $18 thousand. The rental income represents the payments collected from Genoa pharmacy for space leasing at the 2008 N. Garey Avenue and from the tenants staying at the BHSA house on Park Avenue.

6 **Provision for contractual disallowances** for fiscal year 2026-27 was higher than budget by $332 thousand.

Operating Expenses

Operating expenses were lower than budget by approximately $8.6 million for the following reasons:

1 **Salaries and benefits** are $3.7 million lower than the budget.

2 **Facility and equipment operating costs** were higher than the budget by $269 thousand.

3 **Client program costs** are lower than the budget by $93 thousand.

4 **Grants for fiscal year 2026-27** are $4.1 million lower than the budget. These are the sub-grants awarded under the Behavioral Health Student Services Act program and the community grants under the BHSA BHSS Community Wellbeing project.

5 **BHSA learning and training costs** are $57 thousand higher than the budget.

6 **Depreciation, amortization and capital outlays** are approximately $1.2 million lower than the budget.

7 **Other operating expenses net** were higher than the budget by $192 thousand. Of that, security expense was higher by $101 thousand. Professional fees and legal fees both are lower than the budgets.

Non-Operating Revenues (Expenses)

Non-operating revenues, net, are lower than budget by approximately $18 million as follows:

1 **TCMH non-operating revenues** are $415 million higher than the budget. Of that, realignment fund was higher than the budget by $232 thousand, grants and contracts were higher by $98 thousand, and interest income net with fair market value was higher than budget by $85 thousand.

TRI-CITY MENTAL HEALTH AUTHORITY
ACTUAL TO BUDGET VARIANCE EXPLANATIONS
THREE MONTHS ENDING SEPTEMBER 30, 2026

COMMENT: PLEASE NOTE, THE DISCUSSION BELOW MAY USE THE FOLLOWING ABBREVIATIONS:
TCMH==TRI-CITY MENTAL HEALTH (OUTPATIENT CLINIC OPERATIONS)
BHSA==BEHAVIORAL HEALTH SERVICES ACT (ACTIVITIES INCLUDE FSP, BHSS, HOUSING PROGRAMS)

2 **BHSA non-operating revenue** is approximately $19 million lower than the budget.
In accordance with Government Accounting Standards Board, BHSA funds received and available to be spent must be recorded as non-operating revenue as soon as the funds are received. Funds are available to be spent when an BHSA plan and related programs have been approved and the proposed expenditures for those programs have been approved through an BHSA plan, BHSA update, or State Oversight and Accountability Commission.

The differences in actual to budget are broken out as follows:

	Actual	Budget	Variance
FSP funds received and available to be spent	$ 2,475,168	$ 6,715,840	$ (4,240,672)
BHSS funds received and available to be spent	2,138,456	8,623,277	(6,484,821)
WET funds available from MHSA carry over funds	-	-	-
CAP/TECH funds available from MHSA carry over funds	-	-	-
INN funds available from MHSA carry over funds	-	-	-
HOUSING funds received and available to be spent	13,802,677	22,793,973	(8,991,296)
Prudent Reserves	1,200,000	-	1,200,000
Non-operating revenues recorded	$ 19,616,301	$ 38,133,090	$ (18,516,789)

FSP, BHSS, and HOUSING recorded revenues are lower than budgets by approximately $19 million**.** The differences are due to the amounts received and available for the BHSA plans through September 2026. The additional funds received during the fiscal year 2026-27 will be recorded as revenues up to the budgeted amounts.

Interest income for BHSA net with Fair Market Value is higher than budget by approximately $243 thousand.

TRI-CITY MENTAL HEALTH AUTHORITY
STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
THREE MONTHS ENDED SEPTEMBER 30, 2026 AND 2025

			PERIOD ENDED 9/30/26	PERIOD ENDED 9/30/25
	TCMH Unaudited	BHSA Unaudited	Consolidated Unaudited	Consolidated Unaudited
REVENUES				
Medi-Cal FFP, net of reserves	$ 1,110,106	$ 1,656,630	$ 2,766,736	$ 2,641,762
Medi-Cal SGF-EPSDT	337,919	563,365	901,285	640,498
Medicare	3,839	1,934	5,772	6,745
Realignment	913,838	-	913,838	913,838
BHSA funds	-	19,616,301	19,616,301	13,729,208
Grants and contracts	260,293	17,152	277,446	275,130
Patient fees and insurance	-	139	139	-
Rent income - TCMH & BHSA Housing	3,451	14,169	17,620	19,011
Other income	189	202	390	459
Interest Income	85,089	243,296	328,385	723,265
Total Revenues	**2,714,724**	**22,113,188**	**24,827,912**	**18,949,915**
EXPENSES				
Salaries, wages and benefits	4,627,649	4,190,222	8,817,871	8,264,708
Facility and equipment operating cost	472,662	261,117	733,778	876,482
Client lodging, transportation, and supply expense	12,132	20,219	32,351	46,011
Depreciation & amortization	137,010	104,270	241,280	247,725
Security expense	146,334	132,420	278,754	239,801
Professional fees	37,279	62,230	99,509	87,883
Legal fees	60,253	31,337	91,589	85,053
Other operating expenses	243,687	365,015	608,701	450,694
Total Expenses	**5,737,005**	**5,166,829**	**10,903,833**	**10,298,356**
INCREASE (DECREASE) IN NET POSITION	**(3,022,281)**	**16,946,359**	**13,924,078**	**8,651,559**
NET POSITION, BEGINNING OF YEAR	16,687,087	31,496,387	48,183,474	52,031,405
NET POSITION, END OF MONTH	**$ 13,664,806**	**$ 48,442,746**	**$ 62,107,552**	**$ 60,682,964**

NOTE: This presentation of the Change in Net Assets is NOT in accordance with GASB, but is presented only for a simple review of Tri-Ctiy's revenue sources and expenses.

Definitions:

Medi-Cal FFP= Federal Financial Participation Reimbursement

Medi-Cal SGF-EPSDT=State General Funds reimbursement for Medi-Cal services provided to children under the "Early and Periodic Screening, Diagnosis and Treatment" regulations.

AGENDA ITEM NO. 4

Tri-City Mental Health Authority
MONTHLY STAFF REPORT

DATE: November 18, 2026

TO: Governing Board of Tri-City Mental Health Authority
Ontson Placide, LMFT, Executive Director

FROM: Elizabeth Renteria, LCSW

SUBJECT: Monthly Report of Programs Department

I. EXECUTIVE SUMMARY

This month's report highlights leadership recruitment and onboarding, community engagement events, and planning activities. Interviews are scheduled for the Adult Programs Deputy Director position, and new deputies are receiving training and participating in cross-department collaboration. The Wellness Center job fair and the Children's Department fall harvest event were well attended, supporting community connections and welcoming access to services. Work is also underway on the Integrated Plan annual update, due in early 2027, and applications are being reviewed for sub-grants supporting student mental health programs and services.

II. DEPT OPERATIONAL ITEMS / PROGRAMS & SERVICES

Wellness Center Job Fair. The Wellness Center hosted a job fair on October 30, 2026, from 11:00 a.m. to 2:00 p.m. The well-attended event brought together clients, community members, and local employers to explore employment opportunities and build connections. The event emphasized the role of employment in mental health wellness and recovery and supported clients' goals for community participation.

Children's Services Division Fall Harvest Event. The Children's Services Division hosted its annual fall harvest event for current clients. The well-attended event provided a welcoming opportunity for clients to connect with staff outside routine appointments. It emphasized connection and belonging while supporting efforts to reduce stigma and make services more approachable.

III. ADMINISTRATIVE UPDATE

Adult Programs Deputy Director Recruitment. Interviews are scheduled for the Adult Programs Deputy Director position, and invitations have been issued. Reporting to the Chief Program Officer, the position will provide senior-level leadership and oversight of adult behavioral health programs and services.

Deputy Onboarding. New deputies are being onboarded through training and cross-department collaboration. Orientation covers departmental programs, operational procedures, and leadership responsibilities, with an emphasis on communication, coordination, and service delivery across departments.

Integrated Plan Annual Update. Work is underway on the Integrated Plan annual update, which is due in early 2027.

Behavioral Health Student Services Act Sub-Grant Process. Applications are being reviewed for the Behavioral Health Student Services Act sub-grant process. Selected sub-grantees will provide programs and services supporting student mental health. All applications will be reviewed before selections are finalized, and recipients will be announced soon.

IV. ATTACHMENTS

No attachments are included with this report.

END >>

AGENDA ITEM NO. 5

Tri-City Mental Health Authority
MONTHLY STAFF REPORT

DATE: November 18, 2026

TO: Governing Board of Tri-City Mental Health Authority

FROM: Sheryll Prinz-McMillan, Chief Administrative Officer

SUBJECT: Monthly Chief Administrative Officer Report

I. SUMMARY

The administrative teams are advancing workforce recruitment, technology improvements, facilities readiness, and coordinated client service. HR staff concluded the recruitment advertising campaign in October and are pursuing targeted outreach for hard-to-fill positions; campaign application and hiring outcomes remain pending. IT staff completed the accounting software and server upgrade, continue Netsmart data-conversion work and service-request workflow development, and are nearing completion of technology preparations for 1902 Royalty. Facilities and Front Desk staff are coordinating KeyCafe deployment and vehicle moves to the PVCH lot, while Park Avenue safety cameras are installed. Other work includes furniture planning for 1902 Royalty, updated evacuation checklists, website branding updates, and a standardized email-signature rollout expected in November.

II. DEPT. OPERATIONAL ITEMS / PROGRAMS & SERVICES

A. Dept / Program Priorities / Projects

The teams are prioritizing verification of current workforce data, recruitment-campaign closeout review, technology and facilities readiness, and clarification of approval and implementation status for operational projects.

B. Human Resources

Staffing – Month Ending October 2026:

Total staff: 237 full-time and 12 part-time employees (249 total), plus 115 full-time and three part-time vacancies. The HR submission reports 358 total full-time equivalent positions and 68% fully staffed. There were four hires and two separations in October 2026.

Workforce Demographics in October 2026:

☐

Demographic Group	Percentage
American Indian or Alaska Native	0.40%
Asian	8.43%
Black or African American	7.23%
Hispanic or Latino	62.65%
Native Hawaiian or Other Pacific Islander	0.80%
Other	2.41%
Two or more races	2.01%
White or Caucasian	16.06%

New Posted Positions in October 2026:

Position	FTEs
Medical Assistant	1
Clinical Program Manager	3
Office Specialist	1
Clinical Therapist II	2
Community Navigator	1
Clinical Therapist I/II	1
Group Services Coordinator	3
Deputy Director – Adult Programs	1
Program Manager – Quality Improvement	1
Medical Records Supervisor	1

Recruitment Campaign:

Human Resources staff concluded the six-month recruitment advertising campaign with VMA Communications in October 2026, generating more than 1 million advertising impressions and 23,000 clicks across multiple digital platforms. They saw the strongest interest in Behavioral Health Specialist, Peer Support Specialist, Registered Nurse, and Clinical Therapist positions. Specialized roles, including Psychiatrist and Psychiatric Technician, received lower engagement, reinforcing the need for more focused recruitment strategies. HR staff are pursuing targeted outreach through LinkedIn, Indeed, and professional associations for hard-to-fill positions. The submission states that additional information on actual applications received and positions filled will be provided in the November Board Report; those results were not included in the supplied update.

C. Information Technology (IT)

Staff Support: IT staff continue daily Help Desk support for computers, applications, accounts, agency systems, and other technology needs.
Internal Process Improvements: IT staff continue developing service-request workflows for non-IT departments and agency incident reporting.
Accounting Systems: IT staff completed the accounting software and server upgrade, including financial-data migration and validation.
EHR Data Conversion: IT staff made significant progress on the Netsmart transition and continue developing and validating legacy data-conversion processes.
Facility Technology: IT staff are nearing completion of technology preparations for 1902 Royalty, coordinating remaining equipment and site-readiness work.

D. Facilities

Building readiness and maintenance. The administrative and Facilities teams are coordinating furniture planning for 1902 Royalty. They received an October 21 update that included a full-service furnishing proposal for review, not a confirmed purchase. Facilities staff also identified air-conditioning replacement coordination at the Wellness Center and 2001 Garey, expanded repairs, inspections, and security work at the Park Avenue housing property, and development of requirements for elevator modernization at 2008 in Alex's October 16 board-report update. The teams have not yet confirmed completion of these items from the available updates.
Safety and fleet coordination. Facilities and Front Desk staff are working together to deploy KeyCafe and move agency vehicles to the PVCH lot to reduce parking congestion. Park Avenue safety cameras are installed, and Facilities staff distributed November's evacuation checklist. The teams continue to follow up on a replacement minivan, vehicle repairs, and accessibility-van concerns; approvals and repair completion remain unconfirmed.

E. Communications/Social Media

The administrative and Communications teams are reviewing the recruitment campaign following its October closeout. Campaign metrics and recruitment findings are summarized in the Human Resources section; actual application and hiring outcomes remain pending. Communications and IT staff are also coordinating updated logo versions for the website and email signature and revised confidentiality language. They completed the website logo update on November 10; they have not yet rolled out the consistent email-signature implementation but should do so in November. This will help with branding consistency.

F. Front Desk Operations

Front Desk staff continue to manage client interactions with professionalism, patience, and care, including during stressful or rapidly changing situations. During recent power outages, they assessed immediate needs, communicated clearly with clients and employees, and identified safe, practical solutions to maintain access and minimize

disruption. They continue to de-escalate challenging encounters, adapt to unexpected conditions, and prioritize safety and well-being. Front Desk and Facilities staff are also working together to deploy KeyCafe and coordinate vehicle-key access as agency cars move from congested lots to the PVCH lot.

G. Other

The administrative teams remain focused on coordinating facilities expansion, fleet access, communications, and systems that support agency operations. They are aligning facilities readiness with technology requirements and reviewing shared tools for service requests and project tracking. Throughout this report, they distinguish proposed work and items awaiting confirmation from completed actions.

END>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>

Tri-City Mental Health Authority

MONTHLY STAFF REPORT

DATE: November 18, 2026

TO: Governing Board of Tri-City Mental Health Authority
Ontson Placide, LMFT, Executive Director

FROM: Natalie Majors-Stewart, LCSW, Chief Compliance Officer

SUBJECT: Monthly Report of Quality, Compliance, and Health Information

---

I. EXECUTIVE SUMMARY

The Quality, Compliance, and Health Information division continues to advance Behavioral Health Transformation development activities.
The QCH team continues to collaborate with the clinical and finance departments on data analyses and planning to support a coordinated transition for clients and staff as new programs launch. The QCH team is also partnering with the housing team to develop and expand program workflows and structures that meet data tracking and documentation requirements while maintaining and improving operational processes.
Development of ISL reporting is progressing, with launch planned for early 2027. The team is working with the relevant departments to establish backend workflows and test reporting processes. Training for applicable agency staff will follow. ISL is a new DHCS reporting requirement under BHSA that captures person-level behavioral health services and expenditures not reimbursable through Medi-Cal, providing a more complete view of behavioral health investments and outcomes across California.

II. DEPT OPERATIONAL ITEMS / PROGRAMS & SERVICES

Compliance – In addition to its ongoing responsibilities, the Compliance office is preparing to assume oversight of policy monitoring and tracking. Transition priorities include renumbering policies to establish a clearer, more accessible numbering convention and identifying policy gaps to guide the development of required and relevant policies.
Data Collection, Analysis, and Reporting – The Data and Outcomes team continues to refine the Accountability Quality Measurement Process (AQM).
The team is reviewing and testing the initial set of measures, with implementation planned for early 2027. AQM is one of three data processes being redesigned to improve access to outcome data, strengthen program monitoring, and support program accountability. These changes are intended to enhance agency decision-making, regulatory compliance, performance monitoring, and measurement of program and client outcomes.
Electronic Health Record – The EHR team continues to work with Netsmart, the agency's new EHR vendor, to establish the foundational structure for the electronic health record system, with the official transition planned for summer 2027. The team is also

collaborating with Information Technology and other relevant teams to begin planning the migration of client data to the new system. Data migration is a significant and critical component of the project and requires coordination across multiple stakeholders to support a seamless transition.

Quality Assurance - The Quality Assurance (QA) team is preparing the agency's QAPI plan for submission to the Los Angeles County Department of Mental Health (LACDMH). QAPI provides a framework for monitoring provider compliance with quality standards, Medi-Cal Specialty Mental Health Services (SMHS) requirements, and other County, State, and federal requirements. Areas of focus include quality management, clinical record reviews, access to care, network adequacy, training, credentialing, QA/QI committees and activities, and corrective feedback and improvement processes. DMH requires providers to submit an annual P-QAPI Report, a written Quality Management Program (QMP), and all required supporting documentation.

III. ADMINISTRATIVE UPDATE

The Quality, Compliance, and Health Information (QCH) Division continues the process of recruiting and hiring for new positions to expand departmental capacity, better support agency needs, and ensure that oversight resources grow in alignment with the agency's continued expansion and evolving operational requirements.

IV. INTERAGENCY COLLABORATION / COMMUNITY PARTNERSHIPS

The Quality, Compliance, and Health Information (QCH) Division continues to collaborate regularly with the Los Angeles County Department of Mental Health (LACDMH) and the California Department of Health Care Services (DHCS) to support compliance with applicable contractual and regulatory requirements. In addition, QCH team members continue to partner with the Centers of Excellence (in collaboration with the clinical department), to support the implementation of evidence-based practices across the agency.

END >>

AGENDA ITEM NO. 7

Tri-City Mental Health Authority
AGENDA REPORT

DATE: November 18, 2026

TO: Governing Board of Tri-City Mental Health Authority

FROM: Ontson, Placide, LMFT, Executive Director

BY: Diana Acosta, Chief Financial Officer

SUBJECT: Service Encounter Claims Reconciliation and Report

Summary:

A report of periodic and systematic reconciliation of accounts receivable and reporting service encounter claims is being provided in accordance with Policy No. I.29.

Background:

In accordance with Policy No. I.29 Reconciliation and Reporting of Service Encounter Claims, TCMHA shall perform a routine and systematic reconciliation of Accounts Receivable (A/R) & Claims Status on a regular basis. The accounts receivable & claims data will be reported and provided to the Governing Board quarterly and within 60 days of quarter-end.

Also in accordance with the policy any identified denied claim, underpayment, outstanding payment or overpayment, will be identified, tracked, and reflected in accounting records and reports. Identified overpayments will be returned to revenue source within the requisite 60-day reporting period as part of normal operations.

Fiscal Impact:

Based on the first quarter of FY 2026-2027 service encounter reconciliation data, claims submissions decreased from $5.80 million in Q4(FY2026) to $4.00 million in Q1 (FY2027) primarily due to the timing and release of claims in the prior quarter. At the same time, accounts receivable increased from $8.51 million as of June 30, 2026, to $11.47 million as of September 30, 2026, primarily due to the timing lag between claims submission and payment receipt, while all monthly reconciliations, corrections, and resubmissions were completed and approved in accordance with established financial controls.

Accounts receivable and revenue cycle indicators should be considered preliminary until all reconciliations, adjustments, and claim adjudications have been finalized.

Attachments

Attachment 7-A: Accounts Receivable and Service Encounter Data

No Governing Board Action Required

End >>

Accounts Receivable Snapshot 4.4.1

GL account 11177 & 11165

Fiscal Years	Net Receivable	Payments	Remaining Receivable	
2015-16	$ 6,675,177	$ (6,658,348)	$ 16,829	
2016-17	$ 6,627,444	$ (6,627,444)	$ -	
2017-18	$ 7,494,001	$ (7,494,001)	$ -	
2018-19	$ 8,792,938	$ (8,792,938)	$ -	
2019-20	$ 10,091,617	$ (10,091,617)	$ -	
2020-21	$ 11,164,507	$ (11,164,507)	$ -	
2021-22	$ 11,054,869	$ (11,054,869)	$ -	
2022-23	$ 13,242,397	$ (13,201,175)	$ 41,222	
2023-24	$ 17,732,290	$ (17,734,594)	$ (2,304)	
2024-25	$ 16,693,125	$ (16,769,755)	$ (76,630)	
2025-26	$ 16,625,904	$ (9,134,895)	$ 7,491,009	
2026-27	$ 4,000,022	$ -	$ 4,000,022	
	$ 130,194,291	$ (118,724,143)	$ 11,470,148	**total A/R Balance as of Sept. 30, 2026 (4.4.1a)**
			$ 8,509,092	**total A/R Balance as of June. 30, 2026 (4.4.1b)**

		Quarter 1 FY 2027			QTR 1
		September	**August**	**July**	**FY 2027 Total**
4.4.2	Claims submitted during quarter	1,620,987	1,016,016	1,363,019	4,000,023
4.4.3	Claims paid (cash receipts)	-	-	1,038,967	1,038,967
4.4.4	Overpayments Identified (Returned)	-	-	-	-
4.4.5	Voids/Disallowances	15,487	-	-	15,487
4.4.6	Denials	37,538	-	114,765	152,303
4.4.7	Held Claims	190,200	125,761	82,613	398,574

4.4.8 & 4.4.9
Status of corrections/resubmissions and Statement that monthly reconciliations were completed

As of the quarter ended, any claiming corrections that have been identified and approved for resubmission have been submitted through the claiming process. All monthly reconciliations have been performed, completed, reviewed and approved by the Revenue Manager and the Controller. All resulting journal enteries have been performed, completed, reviewed and approved by the Accounting Manager and Controller and posted to the general ledger.

AGENDA ITEM NO. 8

Tri-City Mental Health Authority
AGENDA REPORT

DATE: **November 18, 2026**

TO: **Governing Board of Tri-City Mental Health Authority**

FROM: **Sheryll Prinz-McMillan, Chief Administrative Officer**

BY: **Kitha Torregano, Human Resources Director**

SUBJECT: **Approval of Resolution No. 894 Authorizing an Amendment to TCMHA and LCW Agreement for Labor Legal Services**

Summary:

Staff are requesting Governing Board approval to amend the existing agreement between Liebert Cassidy and Whitmore (LCW) and Tri-City Mental Health Authority (TCMHA) to reflect updated pricing for labor legal services, as outlined in the agenda report below and attached exhibit. This amendment does not change the terms of the current agreement, which remains in effect through June 30, 2028.

Background:

On July 1, 2025, TCMHA entered into an agreement with LCW to provide professional consulting, representational, and legal labor services pertaining to employment relations matters. Since then, LCW has notified us of their fee schedule changes, hence, the need to amend our existing agreement to incorporate the new fee schedule.

This amendment will incorporate LCW's updated hourly rates, fees and costs, as outlined in the amendment and summarized below:

"SCHEDULE I – HOURLY RATES

Partners	$500.00
Senior Counsel	$415.00 - $465.00
Associates	$310.00 - $400.00
Labor Relations/Human Resources Consultant	$330.00
Classification & Compensation Consultant	$250.00
Paralegals	$185.00

E-Discovery Specialists	$200.00
Law Clerks	$200.00 - $220.00

Provided for as attached is the First Amendment to Independent Contractor Agreement between Tri-City Mental Health Authority and Liebert Cassidy and Whitmore dated November 18, 2026, setting forth the current Schedule of Fees and Costs.

Fiscal Impact:

This cost is already budgeted for in the current Fiscal Year 2026-2027 budget as part of attorney fees.

Recommendation:

Staff recommends that the Governing Board adopt Resolution No. 894 authorizing an Amendment to the TCMHA and LCW Independent Contractor Agreement incorporating the revised Fee Schedule for labor legal services.

Attachments

Attachment 8-A: First Amendment to Independent Contractor Agreement

Attachment 8-B: LCW Fee Schedule

END >>

RESOLUTION NO. 894

A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY APPROVING THE FIRST AMENDMENT TO THE AGREEMENT WITH LIEBERT CASSIDY WHITMORE (LCW) FOR A REVISED LABOR LEGAL SERVICES FEE SCHEDULE; AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AMENDMENT; AND MAINTAINING ALL OTHER TERMS AND CONDITIONS, INCLUDING THE JUNE 30, 2028 TERM.

The Governing Board of the Tri-City Mental Health Authority does resolve as follows:

1. Findings. The Governing Board hereby finds and declares the following:

A. The Tri-City Mental Health Authority (TCMHA) has an existing agreement with Liebert Cassidy Whitmore (LCW) for labor legal services.
B. The updated pricing for labor legal services is set forth in Exhibit 1, LCW Fee Schedule — P500. An amendment to the agreement is proposed for Governing Board approval to incorporate that revised fee schedule.
C. All other terms and conditions of the existing agreement remain unchanged, including its term through June 30, 2028.

Updated LCW Fee Schedule

Professional Category	Hourly Rate
Partners	$500.00
Senior Counsel	$415.00–$465.00
Associates	$310.00–$400.00
Labor Relations/Human Resources Consultant	$330.00
Classification & Compensation Consultant	$250.00
Paralegals	$185.00
E-Discovery Specialists	$200.00
Law Clerks	$200.00–$220.00

Source: Exhibit 1 — LCW Fee Schedule — P500.

[Continues on Page 2]

2. Action

Staff recommends that the Governing Board adopt Resolution No. 894 approving the First Amendment to the Independent Contractor Agreement with Liebert Cassidy Whitmore (LCW) to incorporate the revised fee schedule for labor legal services and authorize the Executive Director to execute the amendment. All other terms and conditions of the existing agreement, including its term through June 30, 2028, remain unchanged.

3. Adoption

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on November 18, 2026, by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

JED LEANO, CHAIR

APPROVED AS TO FORM:

STEVEN L. FLOWER, GENERAL COUNSEL

ATTEST:

ONSTON PLACIDE, EXECUTIVE DIRECTOR

Founded in 1960
by the residents

of Pomona, Claremont and
La Verne

FIRST AMENDMENT

TO

INDEPENDENT CONTRACTOR AGREEMENT

BETWEEN

TRI-CITY MENTAL HEALTH AUTHORITY

AND

LIEBERT CASSIDY WHITMORE

DATED

NOVEMBER 18, 2026

Administrative Office
1717 North Indian Hill
Boulevard, Suite B
Claremont, CA 91711
Phone (909) 623-6131
Fax (909) 623-4073

Clinical Office / Adult
2008 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 865-9281

Clinical Office / Child & Fam
1900 Royalty Drive, Suite 180
Pomona, CA 91767
Phone (909) 766-7340
Fax (909) 865-0730

MHSA Administrative Office
2001 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 326-4690

Wellness Center
1403 North Garey Avenue
Pomona, CA 91767
Phone (909) 242-7600
Fax (909) 242-769

ATTACHMENT 8-A

TABLE OF CONTENTS

Section Page

1. PARTIES AND DATE 1
2. RECITALS 1
3. AMENDMENT-FEE SCHEDULE 1
4. REAFFIRMATION OF OTHER TERMS 2
5. EXECUTION 3

FIRST AMENDMENT

AGREEMENT
BY AND BETWEEN TRI-CITY MENTAL HEALTH AUTHORITY AND LIEBERT CASSIDY WHITMORE

FOR PROFESSIONAL LABOR LEGAL SERVICES

1. PARTIES AND DATE.

This FIRST AMENDMENT ("First Amendment") is made and entered into as of November 18, 2026 ("First Amendment Date"), by and between TRI-CITY MENTAL HEALTH AUTHORITY, a California joint powers authority ("TCMHA" or "Tri-City") and LIEBERT CASSIDY WHITMORE, a professional corporation ("Contractor"). TCMHA and Contractor are sometimes individually referred to as a "Party" and collectively as "Parties."

2. RECITALS.

a. TCMHA and Contractor entered into an independent contractor Agreement effective July 1, 2025, ("Agreement") for professional consulting, representational, and legal services pertaining to employment relations matters, through June 30, 2028.

b. The Parties desire to amend the Agreement to increase the professional hourly rates, incorporated in and made part of this First Amendment as Exhibit 1 effective November 18, 2026.

c. In consideration of these Recitals and the performance by the Parties of the promises, covenants, and conditions herein contained, the Parties agree as provided in this First Amendment.

3. **AMENDMENT – FEE SCHEDULE.**

Schedule I (FEES & COSTS) of Exhibit A to the Agreement is hereby amended and restated in its entirety to read as follows:

"SCHEDULE 1- HOURLY RATES

Partners	$500.00
Senior Counsel	$415.00 - $465.00
Associates	$310.00 - $400.00
Labor Relations/Human Resources Consultant	$330.00
Classification & Compensation Consultant	$250.00
Paralegals	$185.00
E-Discovery Specialists	$200.00
Law Clerks	$200.00 - $220.00

4. REAFFIRMATION OF OTHER TERMS

Except as expressly modified or changed herein, all of the terms and provisions of the Agreement, as amended by the First Amendment, shall remain in full force and effect.

5. EXECUTION

The Parties have executed this Agreement as of the First Amendment Date.

TRI-CITY MENTAL HEALTH AUTHORITY

By: _____
Ontson Placide, Executive Director

LIEBERT CASSIDY WHITMORE

By: _____
J. Scott Teidemann, Managing Partner

Attest:

By:

Sara Azzam, JPA Administrator/Clerk

Approved as to Form:
RICHARDS WATSON & GERSHON

Steven L. Flower, General Counsel

LIEBERT CASSIDY WHITMORE

FEE SCHEDULE

Partners	$500.00
Senior Counsel	$415.00 - $465.00
Associates	$310.00- $400.00
Labor Relations/Human Resources Consultant	$330.00
Classification & Compensation Consultant	$250.00
Paralegals	$185.00
E-Discovery Specialists	$200.00
Law Clerks	$200.00- $220.00

Attachment No. 8-B

AGENDA ITEM NO. 9

Tri-City Mental Health Authority
AGENDA REPORT

DATE: November 18, 2026

TO: Governing Board of Tri-City Mental Health Authority

FROM: Liz Renteria, Chief Program Officer
Mary Monzon, Housing Manager
Ontson Placide, Executive Director

SUBJECT: Presentation and Discussion on BHSA Housing Interventions and Housing First

---

Summary:

Staff will provide a presentation on Tri-City Mental Health Authority's (TCMHA) housing initiatives, the distinction between Behavioral Health Services Act (BHSA) Housing Interventions and Housing First, and their alignment with the Authority's behavioral health mission.

Background:

The presentation will provide an overview of current and planned housing initiatives, applicable funding and program requirements, and the Governing Board's role in strategic oversight, investment priorities, partnerships and housing outcomes.

Fiscal Impact:

There is no fiscal impact associated with this informational item.

Recommendation:

Staff recommend that the Governing Board receive the presentation and engage in discussion. No formal action is requested.

Attachments

None. A PowerPoint presentation will be provided at the meeting.

END >>

2026-11-18 Governing Board Regular Meeting Agenda Packet

Final Audit Report 2026-11-14

Created:	2026-11-14
By:	Sara Azzam (sazzam@tricitymhs.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAy-8Dp_M8nQ7URO3a1Qfvl08y9p959Sga

"2026-11-18 Governing Board Regular Meeting Agenda Packet" History

Document created by Sara Azzam (sazzam@tricitymhs.org)
2026-11-14 - 1:26:22 AM GMT

Document emailed to Ontson Placide (oplacide@tricitymhs.org) for signature
2026-11-14 - 1:26:33 AM GMT

Email viewed by Ontson Placide (oplacide@tricitymhs.org)
2026-11-14 - 1:27:15 AM GMT

Document e-signed by Ontson Placide (oplacide@tricitymhs.org)
Signature Date: 2026-11-14 - 1:50:43 AM GMT - Time Source: server - Signature Appearance Selected: MOBILE_IMAGE

Agreement completed.
2026-11-14 - 1:50:43 AM GMT

Adobe Acrobat Sign