



# HOPE. WELLNESS. COMMUNITY.

Let's find it together.

Founded in 1960  
by the residents

of Pomona,  
Claremont and La  
Verne.

## TRI-CITY MENTAL HEALTH AUTHORITY

### AGENDA

#### GOVERNING BOARD REGULAR MEETING

WEDNESDAY, JULY 16, 202 AT 5:00 P.M.  
MHSA ADMINISTRATION BUILDING  
2001 NORTH GAREY AVENUE, POMONA, CA 91767

#### GOVERNING BOARD

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

#### **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) 242-7691

To join the meeting on-line click on the following link:

<https://tricitymhs-org.zoom.us/j/86827762369?pwd=64bMQRjqaX8P1arPaGCiNMN6Xp4hYd.1>

**Passcode: awFL+Wy4**

**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, that 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 [molmos@tricitymhs.org](mailto:molmos@tricitymhs.org). 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 in order to participate in a meeting should contact JPA Administrator/Clerk Mica Olmos at (909) 451-6421 at least 24 hours prior to the meeting.

**GOVERNING BOARD CALL TO ORDER**

Chair Leano calls the meeting to Order.

**ROLL CALL**

Board Members Lorraine Canales, Carolyn Cockrell, Sandra Grajeda, Paula Lantz, and Elizabeth Ontiveros-Cole; 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.tricitymhs.org>

**CONSENT CALENDAR****1. APPROVAL OF MINUTES OF THE JUNE 18, 2025 REGULAR MEETING OF THE GOVERNING BOARD**

Recommendation: “A motion to approve the Minutes of the Governing Board Regular Meeting of June 18, 2025.”

**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 CLINICAL OFFICER MONTHLY REPORT**

Recommendation: “A motion to receive and file.”

**5. SEEYAM TEIMOORI, MEDICAL DIRECTOR MONTHLY REPORT**

Recommendation: “A motion to receive and file.”

**6. DANA BARFORD, DIRECTOR OF MHSA AND ETHNIC SERVICES 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.”

**8. CONSIDERATION OF RESOLUTION NO. 798 ESTABLISHING THE AUTHORITY’S DRUG MEDI-CAL FEE PAYMENT POLICY AND PROCEDURE REQUIRED TO COMPLETE THE APPLICATION PROCESS FOR BOTH THE DEPARTMENT OF HEALTH CARE SERVICES (DHCS) ALCOHOL AND OTHER DRUGS (AOD) CERTIFICATION AND THE SAPC (SUBSTANCE ABUSE PREVENTION AND CONTROL) CONTRACT WITH THE LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH, EFFECTIVE JULY 16, 2025**

Recommendation: “A motion to adopt Resolution No. 798 establishing the Drug Medi-Cal Fee Payment Policy and Procedure to obtain AOD Certification from the DHCS and the SAPC Contract with the LAC Dept. of Public Health, effective July 16, 2025.”

**9. CONSIDERATION OF RESOLUTION NO. 799 APPROVING AN AFFILIATION AGREEMENT FOR INTERNSHIP PROGRAM WITH THE TRUSTEES OF THE CALIFORNIA STATE UNIVERSITY (CSU) ON BEHALF OF CALIFORNIA STATE UNIVERSITY, FULLERTON, AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AGREEMENT AND ANY AMENDMENTS THEREAFTER**

Recommendation: “Staff recommends that the Governing Board adopt Resolution No. 799 approving the Affiliation Agreement with the Trustees of the CSU on behalf of CSUF and authorizing the Executive Director to execute the Agreement, and any amendments thereafter.”

**NEW BUSINESS**

**10. CONSIDERATION OF RESOLUTION NO. 800 ADOPTING A REVISED MASTER CLASSIFICATION AND SALARY SCHEDULE REFLECTING A 2% COST OF LIVING ADJUSTMENT (COLA), HEALTHCARE WORKER MINIMUM WAGE COMPLIANCE UNDER SB NO. 525, AND CLINICAL COMPENSATION ADJUSTMENTS, EFFECTIVE JULY 1, 2025**

Recommendation: “A motion to adopt Resolution No. 800 adopting the revised Authority’s Master Classification and Salary Schedule reflecting a 2% COLA, HCW Minimum Wage Compliance under SB No. 525; and Salary Range adjustments for the Clinical classification series, effective July 1, 2025.”

**11. CONSIDERATION OF RESOLUTION NO. 801 AWARDING THE AGREEMENT FOR LAPTOP FLEET REFRESH SERVICES TO INTELLI-TECH IN THE AMOUNT OF \$302,985,00; AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AGREEMENT**

Recommendation: “A motion to adopt Resolution No. 801 authorizing the Executive Director to enter into an Agreement with Intelli-Tech for Laptop Fleet Refresh services in the amount of \$302,985,00, effective July 16, 2025.”

**12. CONSIDERATION OF RESOLUTION NO. 802 APPROVING THE THIRD AMENDMENT TO THE AGREEMENT WITH CAPSTONE SOLUTIONS CONSULTING GROUP, LLC FOR COMPLETION OF THE DRUG MEDICAL CERTIFICATION FROM THE CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES (DHCS), AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AMENDMENT**

Recommendation: “A motion to adopt Resolution No. 802 approving the Third Amendment to the Agreement with Capstone Solutions Consulting Group, LLC; and authorizing the Executive Director to execute the Amendment.”

**13. CONSIDERATION OF RESOLUTION NO. 803 APPROVING THE FIRST AMENDMENT TO THE AGREEMENT WITH THE RIVERSIDE COMMUNITY CARE, INC. FOR SUICIDE POSTVENTION: SUPPORTING SCHOOLS, WORKPLACES, AND COMMUNITIES AFTER SUDDEN, UNEXPECTED LOSS TRAINING SERVICES, AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AMENDMENT**

Recommendation: “A motion to adopt Resolution No. 803 approving the First Amendment to the Agreement with Riverside Community Care, Inc. for suicide postvention services, and authorizing the Executive Director to execute said Amendment.”

**14. CONSIDERATION OF RESOLUTION NO. 804 AUTHORIZING THE EXPENDITURE OF \$5,790,000 FROM ITS CAPITAL FACILITIES AND TECHNOLOGICAL NEEDS (CFTN) PLAN FUNDS FOR PROPERTY ACQUISITION AND TECHNOLOGY ENHANCEMENTS**

Recommendation: “A motion to adopt Resolution No. 804 authorizing the Executive Director to utilize \$5,790,000 from the Authority’s CFTN Plan Funds for property acquisition and technology enhancements.”

**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.

**CLOSED SESSION**

The Governing Board will recess to a Closed Session pursuant to:

- 1) CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION  
Significant exposure to litigation pursuant to Government Code § 54956.9(d)(2). One case.
- 2) CONFERENCE WITH REAL PROPERTY NEGOTIATORS  
(Government Code § 54956.8)  
Property: 431 West Baseline Road, Claremont, CA 91711  
Agency Negotiators: Ontson Placide, Diana Acosta.  
Negotiating Party: The Renken Company  
Under Negotiation: Price and terms of payment.
- 3) CONFERENCE WITH LEGAL COUNSEL – EXISTING LITIGATION  
(Government Code § 54956.9) *Patricia Kears v. Tri-City Mental Health Authority, et al.*,  
LA Superior Ct. Case No. 21PSCV00953.

**RECONVENE TO OPEN SESSION**

The Governing Board will reconvene to an Open Session.

**CLOSED SESSION REPORT**

Any reportable action taken is announced.

**ADJOURNMENT**

The next regular meeting of the Governing Board will be held on **Wednesday, September 17, 2025 at 5:00 p.m.** in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California. The Governing Board is dark in August.

MICAELA P. OLMOS  
JPA ADMINISTRATOR/CLERK



## MINUTES

### GOVERNING BOARD REGULAR MEETING

June 18, 2025 – 5:00 P.M.

The Governing Board Regular Meeting held on Wednesday, June 18, 2025, at 5:00 p.m. in the MHSA 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 Olmos.

#### GOVERNING BOARD

**PRESENT:** Lorraine Canales, City of Pomona, Board Member  
Carolyn Cockrell, City of La Verne, Board Member  
Sandra Grajeda, City of Claremont, Board Member  
Paula Lantz, City of Pomona, Board Member  
Elizabeth Ontiveros-Cole, City of Pomona, Board Member  
Wendy Lau, City of La Verne, Vice-Chair  
Jed Leano, City of Claremont, Chair

**ABSENT:**

**STAFF:** Ontson Placide, Executive Director  
Steven Flower, General Counsel  
Diana Acosta, Chief Financial Officer  
Elizabeth Renteria, Chief Clinical Officer  
Dana Barford, Director of MHSA & Ethnic Services  
Natalie Majors-Stewart, Chief Compliance Officer  
Sara Azzam, Administrative Assistant

**ABSET:** Seeyam Teimoori, Medical Director  
Mica Olmos, JPA Administrator/Clerk

#### **CONSENT CALENDAR**

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

At 5:03 p.m., Chair Leano called for a recess of the meeting.

Board Member Lantz arrived to the meeting at 5:06 p.m.

**AGENDA ITEM NO. 1**

At 5:06 p.m., Chair Leano reconvened the meeting

There being no further comment, Vice-Chair Lau moved, and Board Member Cockrell seconded to approve the Consent Calendar Item Nos. 1-16. The motion was carried by the following vote: Board Members Canales, Cockrell, Grajeda, and Lantz, Vice-Chair Lau and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: Board Member Ontiveros-Cole.

**1. APPROVAL OF MINUTES OF THE MAY 21, 2025, REGULAR JOINT MEETING OF THE GOVERNING BOARD AND THE MENTAL HEALTH COMMISSION**

Recommendation: “A motion to approve the Minutes of the Governing Board and the Mental Health Commission Regular Joint Meeting of May 21, 2025.”

**2. APPROVAL OF MINUTES OF THE MAY 21, 2025, SPECIAL MEETING OF THE GOVERNING BOARD**

Recommendation: “A motion to approve the Minutes of the Governing Board Special Meeting of May 21, 2025.”

**3. ONTSON PLACIDE, EXECUTIVE DIRECTOR REPORT**

Recommendation: “A motion to receive and file.”

**4. DIANA ACOSTA, CHIEF FINANCIAL OFFICER REPORT**

Recommendation: “A motion to receive and file.”

**5. LIZ RENTERIA, CHIEF CLINICAL OFFICER REPORT**

Recommendation: “A motion to receive and file.”

**6. SEEYAM TEIMOORI, MEDICAL DIRECTOR REPORT**

Recommendation: “A motion to receive and file.”

**7. DANA BARFORD, DIRECTOR OF MHSA AND ETHNIC SERVICES REPORT**

Recommendation: “A motion to receive and file.”

**8. NATALIE MAJORS-STEWART, CHIEF COMPLIANCE OFFICER REPORT**

Recommendation: “A motion to receive and file.”

**9. CONSIDERATION OF RESOLUTION NO. 786 ADOPTING THE AUTHORITY’S REVISED POLICIES AND PROCEDURES NOS.: CL.V.01 AND CL.V.02, EFFECTIVE JUNE 18, 2025**

Recommendation: “A motion to adopt Resolution No. 786 establishing the revised Policy and Procedures Nos.: CL.V.01 and CL.V.02, effective June 18, 2025.”

**10. CONSIDERATION OF RESOLUTION NO. 787 ADOPTING THE AUTHORITY'S POLICIES AND PROCEDURES REQUIRED TO COMPLETE THE APPLICATION PROCESS FOR BOTH THE DEPARTMENT OF HEALTH CARE SERVICES (DHCS) ALCOHOL AND OTHER DRUGS (AOD) CERTIFICATION AND THE SAPC (SUBSTANCE ABUSE PREVENTION AND CONTROL) CONTRACT WITH THE LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH, EFFECTIVE JUNE 18, 2025**

Recommendation: "A motion to adopt Resolution No. 787 establishing the required Policies and Procedures to obtain AOD Certification from the DHCS and the SAPC Contract with the LAC Dept. of Public Health, effective June 18, 2025."

**11. CONSIDERATION OF RESOLUTION NO. 788 ADOPTING THE AUTHORITY'S REVISED POLICY AND PROCEDURES NOS.: II.02; AND ADOPTING VARIOUS NEW POLICIES AND PROCEDURES, EFFECTIVE JUNE 18, 2025**

Recommendation: "A motion to adopt Resolution No. 788 establishing the revised Policy and Procedures Nos.: II.02; and adopting new Policies and Procedures effective June 18, 2025."

**12. APPROVAL FOR THE DISPOSAL OF OBSOLETE OR DAMAGED I.T. EQUIPMENT**

Recommendation: "A motion to approve the disposal of I.T. equipment listed on the I.T. Equipment List for Disposal-June 2025."

**13. CONSIDERATION OF RESOLUTION NO. 789 ADOPTING THE AUTHORITY'S REVISED POLICIES AND PROCEDURES NOS.: VIII.1 and VIII.4, EFFECTIVE JUNE 18, 2025**

Recommendation: "A motion to adopt Resolution No. 789 establishing the revised Policy and Procedures No. VIII.1 – Additions to Fixed Assets, and Policy and Procedures No. VIII.4 – Disposal of Fixed Assets; effective June 18, 2025."

**14. CONSIDERATION OF RESOLUTION NO. 790 APPROVING AN AFFILIATION AGREEMENT FOR STUDENT INTERNSHIPS WITH SIMMONS UNIVERSITY AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AGREEMENT AND ANY AMENDMENTS THEREAFTER**

Recommendation: "A motion to adopt Resolution No. 790 approving an Affiliation Agreement with Simmons University; and authorizing the Executive Director to execute the agreement and any amendments thereafter."

**15. CONSIDERATION OF RESOLUTION NO. 791 ADOPTING A REVISED MASTER CLASSIFICATION AND SALARY SCHEDULE TO INCLUDE THE REVISED JOB DESCRIPTIONS FOR MASTER OF SOCIAL WORK/MASTER OF MARRIAGE AND FAMILY THERAPY INTERN AND DATA ANALYST CLASSIFICATIONS**

Recommendation: "A motion to adopt Resolution No. 791 approving the revised Job Descriptions for the Master of Social Work/Master of Marriage and Family Therapy

Intern and Data Analyst classifications, and the Master Classification and Salary Schedule to reflect these changes.”

**16. CONSIDERATION OF RESOLUTION NO. 792 ADOPTING THE AUTHORITY’S REVISED SIGN-ON BONUS POLICY AND PROCEDURES NO. II.22, EFFECTIVE JUNE 18, 2025**

Recommendation: “A motion to adopt Resolution No. 792 establishing the revised Sign-on Bonus Policy and Procedures No. II.22, effective June 18, 2025.”

**NEW BUSINESS**

**17. CONSIDERATION OF AWARDING TWENTY COMMUNITY WELLBEING GRANTS TOTALING \$178,486.00 FOR FISCAL YEAR 2025-26 UNDER THE COMMUNITY CAPACITY BUILDING PROJECT OF THE PREVENTION AND EARLY INTERVENTION (PEI) PLAN**

Director of MHSA and Ethnic Services Barford presented a series of community wellbeing grant contracts. These grants offer funding of up to \$10,000 for a period of three years, supporting local organizations in promoting mental and emotional wellbeing within their communities. The funding opportunity attracted significant interest, with 36 applications received. Of those, 20 proposals were recommended for approval, and the agreements and lists of awards were included in the report presented to the board.

Board Member Lantz inquired about a particular project near a veterans park, expressing difficulty in locating it within the report. Director of MHSA and Ethnic Services Barford clarified that the organization in question is the Hope Through Housing Foundation. Board Member Lantz noted her surprise at the demographic data from the community, observing that one-third of the residents are children, with over 30 of the 120 individuals under the age of 18, especially given the community’s proximity to a railroad track. This was offered as a general observation about the community’s needs.

Community Capacity Organizer Daisy Martinez stated it was a new partnership and the potential to offer resources, mental health workshops, and peer mentorship. Board Member Lantz noted that this applicant is a new facility and added that they are also connected with a local food bank, further enhancing community support.

Vice-Chair Lau confirmed that the grants are limited to a three-year term and raised questions about sustainability once the grant period ends. Director of MHSA and Ethnic Services Barford affirmed the time limitation, and Community Capacity Organizer Martinez addressed the concern by explaining that grantees are supported in building long-term sustainability. They are encouraged to connect with current or past grantees, apply for additional funding sources, and expand upon their initial projects. Community Capacity Organizer Martinez noted that by the end of the third year, the majority of funded organizations typically achieve a level of stability. Vice-Chair Lau acknowledged

these efforts, recognizing that many grantees find alternative ways to remain sustainable beyond the grant cycle.

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 Grajeda seconded to approve the motion to award twenty (20) Community Wellbeing Grants totaling \$178,486.00 to be funded under the MHSA PEI Plan in FY 2025-26.. The motion was carried by the following vote: Board Members Canales, Cockrell, Grajeda, Lantz; Vice-Chair Lau and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: Board Member Ontiveros-Cole.

**18. CONSIDERATION OF RESOLUTION NO. 793 APPROVING THE THIRD AMENDMENT TO THE AGREEMENT WITH THE CITY OF POMONA FOR THE AUTHORITY'S USE OF THE CITY'S 'HOPE FOR HOME' YEAR-ROUND EMERGENCY SHELTER FACILITY, AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE SAID AMENDMENT**

Chief Clinical Officer Renteria provided an update to the Board regarding the expansion of services through the long-standing partnership with Hope for Hope. The initiative will significantly increase the number of available beds from 31 to 71, with funding allocated from the MHSA bed program. This expansion is expected to improve service capacity and is supported by anticipated funding for long-term sustainability. Executive Director Placide noted that this initiative is part of the MHSA reversion process.

Board Member Lantz inquired whether the increase in beds would result in expanded services. Chief Clinical Officer Renteria confirmed that more beds will indeed lead to increased services, including a greater presence of staff on-site. Board Member Lantz also asked whether this expansion would mean more staff available specifically for TCMHA clients. Chief Clinical Officer Renteria responded that while the organization is currently working on hiring additional staff, the increase in beds primarily serves to meet the needs of clients already assigned to staff who currently lack adequate housing. The expanded capacity will allow those preexisting clients to be placed appropriately, which has not always been possible due to bed shortages.

Board Member Elizabeth Ontiveros-Cole arrived at the meeting at 5:14 p.m.

Board Member Lantz emphasized that doubling the number of beds would logically require additional staff to maintain service levels. Chief Clinical Officer Renteria clarified that while staff will indeed follow the services being provided at the shelter, this expansion does not involve adding more clients to the program. Vice-Chair Lau further clarified that the focus is on increasing services to existing clients rather than bringing in new clients. Chief Clinical Officer Renteria confirmed this understanding.

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 Cockrell seconded to approve Resolution No. 793 approving the Third Amendment to the

Agreement with the City of Pomona for the Authority's exclusive use of 71 shelter beds in the City's H4H Year-Round Emergency Shelter in the amount of \$1,943,625, effective July 1, 2025, and authorizing the Executive Director to execute said Amendment. The motion was carried by the following vote: Board Members Canales, Cockrell, Grajeda, and Lantz; Vice-Chair Lau and Chair Leano. NOES: None. ABSTAIN: Board Member Ontiervos-Cole. ABSENT: None.

**19. CONSIDERATION OF RESOLUTION NO. 794 AUTHORIZING AN AGREEMENT WITH SYRACUSE UNIVERSITY FOR THE IMPLEMENTATION OF THE MULTI-COUNTY COLLABORATIVE PSYCHIATRIC ADVANCE DIRECTIVES (PADs) PHASE II PROJECT EFFECTIVE JULY 1, 2025 THROUGH JUNE 30, 2029, AND AUTHORIZING THE EXECUTIVE DIRECTOR TO SIGN THE AGREEMENT**

Director of MHSA and Ethnic Services Barford provided an update on the Psychiatric Advance Directive System (PADS), announcing the continuation into Phase II of the project. She offered a brief overview of Phase I, which focused on development. Phase II will extend PADS into additional counties, begin live data collection, and engage in testing its effectiveness, particularly in coordination with law enforcement agencies.

Board Member Lantz questioned the total expenditure of Phase I, estimating between \$500,000 and \$750,000. MHSA Program Coordinator – Innovation Paulina Ale responded that the amount spent was under \$800,000, primarily allocated to subcontractors. Director of MHSA and Ethnic Services Barford confirmed the total was approximately \$700,000. Board Member Lantz expressed concern that despite nearly eight years of development and over \$1.5 million in projected expenditures, PADS is still in the testing phase and not yet in use, with no clear indication in the report of an official launch or practical application.

MHSA Program Coordinator Ale clarified that public presentations are planned for the summer and recruitment is underway. The goal is to begin developing directives with clients and the community by next year. Board Member Lantz asked whether the system would be in use within a year. MHSA Program Coordinator Ale responded that directives would be created within that time, though full implementation would depend on voluntary use of entities.

Board Member Lantz noted that after several years, there is still no functioning directive in use and no clear timeline for when counties, including TCMHA, would have an actionable tool. Director of MHSA and Ethnic Services Barford responded that the final format will be electronic, not a traditional document, though Board Member Lantz emphasized that it still functions as a document, since users must rely on the information it contains.

Director of MHSA and Ethnic Services Barford explained that Phase I focused on development, while Phase II is a one-year testing phase. MHSA Program Coordinator Ale added that before the tool can be deployed, law enforcement and hospital staff must be trained to use it. Until that occurs, the system cannot go live. Board Member Lantz asked whether full utilization could be expected by the end of 2026, and MHSA Program

Coordinator Ale confirmed that is the goal. However, she noted that as a supplemental tool, some users—such as law enforcement or hospitals—may opt not to use it.

Board Member Lantz expressed concern about the unclear timeline for when clients will have direct access to PADS. Director of MHSA and Ethnic Services Barford reiterated that the projection is within a year but emphasized the complexity of innovation projects. She noted that such initiatives are intended to test a theory, not guarantee immediate implementation. Legal restrictions, including HIPAA compliance, have required extensive review, and currently, peers—not staff—must assist individuals in completing directives. With eight legal opinions now guiding the effort, every phase requires approval and frequent adjustments. Director of MHSA and Ethnic Services Barford concluded by emphasizing that this remains a learning project that may or may not ultimately result in a widely adopted tool.

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

There being no further comment, Board Member Canales, and Board Member Ontiveros-Cole seconded to approve Resolution No. 794 authorizing the Executive Director to execute an Agreement with Syracuse University, in the amount of \$500,000.00 for the implementation of the Multi-County Psychiatric Advance Directives (PADs) Phase II Project, effective July 1, 2025 through June 30, 2029. The motion was carried by the following vote: Board Members Canales, Cockrell, Grajeda, Lantz, and Ontiveros-Cole; Vice-Chair Lau and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

**20. CONSIDERATION OF AWARDING EIGHT MENTAL HEALTH STUDENT SERVICES ACT (MHSSA) SUB-GRANTS ROUND 3 TOTALING \$257,871.84 BEGINNING JULY 1, 2025 THROUGH JUNE 30, 2026, UNDER THE MHSSA GRANT RECEIVED FROM THE CALIFORNIA MENTAL HEALTH SERVICES OVERSIGHT AND ACCOUNTABILITY COMMISSION (MHSOAC)**

Chief Clinical Officer Liz Renteria presented to the Board the third and final round of a community grant initiative designed to bring funding directly to local organizations. She submitted eight applications that were recommended for award and requested Board approval for a total amount not to exceed \$257,871.84. Chief Clinical Officer Renteria emphasized the importance of these funds in supporting community-based services and committed to returning at a later date to report on the outcomes and overall success of the awarded grants.

Chair Leano opened the meeting to Public Comment, there was none.

There being no further comment, Board Member Grajeda, and Board Member Canales seconded to approve an award eight (8) MHSSA Sub-Grants Round 3 totaling \$257,871.84, beginning July 1, 2025 through June 30, 2026, to be funded under the MHSSA Grant received from the MHSOAC. The motion was carried by the following vote: Board Members Canales, Cockrell, Grajeda, Lantz, and Ontiveros-Cole; Vice-Chair Lau and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

**21. CONSIDERATION OF RESOLUTION NO. 795 AWARDING A ONE-YEAR AGREEMENT TO LESAR DEVELOPMENT CONSULTANTS FOR HOUSING ADVISORY AND CONSULTING SERVICES IN AN AMOUNT NOT TO EXCEED \$50,000.00; AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AGREEMENT**

Executive Director Placide informed the Board that Tri-City Mental Health Authority (TCMHA) has selected a development consultant, LeSar Development Consultants, to support the agency's housing advisory work following a thorough interview process. Executive Director Placide noted that LeSar is recognized as a premier organization with statewide experience in housing development and policy.

Board Member Lantz inquired whether representatives from LeSar were present at the meeting, to which Executive Director Placide responded that they were not. Board Member Lantz noted that LeSar has worked with Councils of Governments (COGs) in the San Gabriel Valley and raised questions about their track record, specifically whether the firm has a history of actual housing production or if their role has primarily been in consulting and planning. She referenced LeSar's work with the City of Oakland since 2020, which had a goal of producing 4,000 units, and expressed interest in learning what tangible outcomes had resulted from that partnership.

Executive Director Placide acknowledged the importance of those questions and shared that similar inquiries were made during the selection process. He stated that LeSar has been involved in several housing projects from inception to completion, although the firm's full track record would be reviewed further. Board Member Lantz requested that this information be brought back to the Board and asked what deliverables could be expected within the next 90 days. Executive Director Placide clarified that while deliverables were outlined as part of LeSar's bid proposal, they are not yet official. The scope and expectations of the partnership will be defined collaboratively with LeSar based on the specific needs of TCMHA projects.

Board Member Lantz further asked about timelines, expectations, and whether a clear schedule would be established. Executive Director Placide confirmed that, given TCMHA's current circumstances, expectations such as six- to nine-month timelines would be set through scheduled meetings and formal agreements. Regarding compensation, Board Member Lantz asked whether the contract would be paid on an hourly basis, with an estimate of \$50,000 worth of services over the course of a year. Executive Director Placide confirmed that this was correct.

Chair Leano opened the meeting to Public Comment, there was none.

There being no further comment, Board Member Canales, and Vice-Chair Lau seconded to approve A motion to adopt Resolution No. 795 authorizing the Executive Director to enter into a One-Year Agreement with LeSar Development Consultants for Housing Advisory and Consulting Services in an amount not to exceed \$50,000.00, effective July 1, 2025 through June 30, 2026. The motion was carried by the following vote: Board

Members Canales, Cockrell, Grajeda, Lantz, and Ontiveros-Cole; Vice-Chair Lau and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

**22. CONSIDERATION OF RESOLUTION NO. 796 AUTHORIZING THE EXECUTIVE DIRECTOR TO UTILIZE MENTAL HEALTH SERVICES ACT UNSPENT COMMUNITY SERVICES AND SUPPORT (CSS) PLAN FUNDS IN THE AMOUNT OF \$8,552,475.00 FOR THREE HOUSING AND SHELTER PROJECTS APPROVED THROUGH A STAKEHOLDER PROCESS**

Executive Director Placide presented a PowerPoint overview to the Board outlining current and upcoming housing projects supported by Tri-City Mental Health Authority (TCMHA). The presentation highlighted key developments, including a slide featuring the Hope Through Housing (H4H) project. Board Member Lantz raised a clarification regarding whether families are currently housed at H4H. Executive Director Placide acknowledged the slide contained an error and that families are not housed at H4H and thanked Board Member Lantz for catching it.

Executive Director Placide reminded the Board that the figures presented represent one-time costs and do not include operational or ongoing expenses. On the "Process Steps" slide, he emphasized that TCMHA has requested its funds be used first in order to avoid MHSA fund reversion.

Board Member Ontiveros-Cole inquired about the number of units planned for the project at 464 W. 8th Street. Executive Director Placide responded that the development will include eight units. She further asked whether local residents had been informed about the upcoming construction. City of Pomona Neighborhood Services Director Beverly Johnson stated that the city is currently in the process of holding community meetings to engage residents.

Board Member Ontiveros-Cole also recognized the location at 252 E. 4th Street as an older apartment building. Neighborhood Services Director Johnson confirmed that the site is undergoing renovations. Board Member Lantz noted the location as a former parking lot, which Neighborhood Services Director Johnson affirmed. Board Member Ontiveros-Cole commented positively on the location, and Executive Director Placide added that the site is advantageous because it is easy to build on, allows for quick construction, and is easy to maintain.

Regarding the 4th Street project, Board Member Lantz expressed concern that tiny homes would be placed downtown. Neighborhood Services Director Johnson clarified that modular homes are planned and that design considerations were made to help the homes blend with the surrounding area. Board Member Lantz requested that renderings or façades of the units be shared with the Board, to which Neighborhood Services Director Johnson agreed. Executive Director Placide assured the Board that updates would continue to be provided.

Board Member Ontiveros-Cole confirmed with Neighborhood Services Director Johnson that the building at 252 E. 4th Street will not be demolished, but rather rehabilitated to which Neighborhood Services Director Johnson replied in the affirmative.

Chair Leano opened the meeting to Public Comment, there was none.

There being no further comment, Board Member Ontiveros-Cole, and Board Member Canales seconded to approve Resolution No. 796 authorizing the Executive Director to fund three housing and shelter projects using MHSA CSS unspent funds in the total amount of \$8,552,475.00 that are subject to reversion. The motion was carried by the following vote: Board Members Canales, Cockrell, Grajeda, Lantz, and Ontiveros-Cole; Vice-Chair Lau and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

**23. CONSIDERATION OF RESOLUTION NO. 797 ADOPTING TRI-CITY MENTAL HEALTH AUTHORITY'S PROPOSED OPERATING BUDGET & CASH FLOW BUDGET FOR FISCAL YEAR 2025-26**

Executive Director Placide introduced a required Human Resources presentation. Chair Leano confirmed whether any board action was needed, to which General Counsel Flower clarified that this presentation could be heard as a Public Hearing.

Director of Human Resources Torregano delivered the presentation via PowerPoint, providing an overview of Tri-City Mental Health Authority's staffing challenges and efforts to address them. She reported that TCMHA had a vacancy rate of 18.7%, with 49.5 positions unfilled. She identified the medical team and support staff roles as the most difficult to recruit and retain.

HR Director Torregano reviewed key performance indicators, noting that in 2024, Human Resources processed 53 completed recruitments, 102 position changes, and approximately 12 employee referrals. She described several active outreach campaigns, including upcoming hiring events, participation in college job fairs, partnerships with professional organizations, and expansion of the agency's internship program. TCMHA also encourages employee referrals and promotes its competitive wages, strong benefits package, available incentives, and eligibility for loan forgiveness programs.

She also outlined upcoming enhancements to support recruitment and retention efforts. Vice-Chair Lau thanked Director Torregano for the detailed and informative presentation but noted that current Instagram recruitment posts are static and suggested exploring more engaging formats. HR Director Torregano responded that a video featuring Executive Director Placide was forthcoming. Executive Director Placide added that social media engagement must be ongoing and consistent to be effective. Vice-Chair Lau reiterated that varied and dynamic content is important, as the current posts tend to look too similar.

Board Member Cockrell inquired about the confidentiality of employee surveys. HR Director Torregano responded that while survey responses are submitted to HR, any

information shared with departments is censored to protect confidentiality. Board Member Cockrell asked for reassurance that employees are aware of this confidentiality, and HR Director Torregano confirmed that they are. Vice-Chair Lau also commented positively on the practice of conducting Stay Interviews, emphasizing their value in employee retention efforts.

Chief Financial Officer Acosta provided a brief review of the budget as outlined in the report and accompanying binder. She explained that the budget is organized by funding sources, including the general fund—which encompasses realignment and grant funding—and Mental Health Services Act (MHSA) funding. All components ultimately consolidate into the primary financial document: the cash flow statement. Chief Financial Officer Acosta directed the Board's attention to this statement within the binder for a comprehensive view of the agency's financial outlook.

Board Member Lantz inquired whether the document presented was a consolidated budget or a consolidating one. Chief Financial Officer Acosta clarified that it is a *consolidating* budget, meaning it shows the individual funding streams and how they contribute to the overall financial picture, rather than a final, consolidated summary.

Chair Leano opened the meeting to Public Comment, there was none.

There being no further comment, Board Member Lantz, and Board Member Canales seconded to approve Resolution No. 797 adopting the Authority's Fiscal Year 2025-26 Operating Budget and Cash Flow Budget. The motion was carried by the following vote: Board Members Canales, Cockrell, Grajeda, Lantz, and Ontiveros-Cole; Vice-Chair Lau and Chair Leano. NOES: None. ABSTAIN: None. ABSENT: None.

## **GOVERNING BOARD COMMENTS**

Board Member Grajeda thanked Chief Financial Officer Acosta and her team's work on the Budget acknowledging the hard work put in. Chief Financial Officer Acosta stated she would relay it to her team.

## **PUBLIC COMMENT**

General Counsel Joseph Flower informed the Board that there would be an opportunity for general Public Comment as well as a closed session later in the meeting.

MHSA Projects Manager Sara Rodriguez announced that public comment is currently open for the Capital Facilities and Technological Needs (CFTN) component, and that informational packets have been distributed to community sites in Pomona, La Verne, and Claremont for public review. Chief Clinical Officer Renteria shared that each Board member had received an invitation and flyer for the upcoming Community Wellness Fair. Executive Director Placide asked how many organizations would be participating, to which Chief Clinical Officer Renteria responded that 39 organizations are confirmed.

Board Member Canales asked if the event is only for participating organizations. Chief Clinical Officer Renteria clarified that the event is open to the public and is an opportunity for the community to learn more about Tri-City Mental Health Authority (TCMHA) and the services offered by the participating organizations. Board Member Canales then inquired whether representatives from the Watch Commander's Meeting could attend. Chief Clinical Officer Renteria confirmed that they are welcome. Board Member Canales asked whether the event would be recorded, and Executive Director Placide confirmed that it would be. Chief Clinical Officer Renteria added that the fair will feature resource booths and a brief program to introduce the participating organizations.

### **CLOSED SESSION**

The Governing Board will recess to a Closed Session pursuant to:

- 1) CONFERENCE WITH LEGAL COUNSEL – EXISTING LITIGATION (Gov't Code § 54956.9) Patricia Kears v. Tri-City Mental Health Authority, et al., LA Superior Ct. Case No. 21PSCV00953.
- 2) CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION Significant exposure to litigation pursuant to Gov't Code § 54956.9(d)(2). One case.

### **RECONVENE TO OPEN SESSION**

At 6:55 p.m. the Governing Board reconvened to an Open Session.

### **CLOSED SESSION REPORT**

There was no reportable action.

### **ADJOURNMENT**

The next Regular Meeting of the **Governing Board** will be held on **Wednesday, July 16, 2025, at 5:00 p.m.**, in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.

---

Sara Azzam, Administrative Assistant



**Tri-City Mental Health Authority  
MONTHLY STAFF REPORT**

**DATE:** July 16, 2025  
**TO:** Governing Board of Tri-City Mental Health Authority  
**FROM:** Ontson Placide, LMFT, Executive Director  
**SUBJECT:** Executive Director’s Monthly Report

---

**UPDATE ON THE MHSA to BHSA REVERSION PLANNING**

The MHSA Plan recommendations for reversion projects were accepted and approved by the Governing Board in June. The Executive Team is currently working with the 3 Cities and project funders/parties to finalize each project details and timelines. Additional updates will be brought to the Governing Board as milestones are reached.

**ONGOING AGENCY PLANNING**

As mentioned in las months report TCMHA is continuing with planning with the large-scale transformation of the behavioral health system—including the **Behavioral Health Continuum Infrastructure Program (BHCIP)**, **BH Connect**, and the transition from **MHSA to the Behavioral Health Services Act (BHSA)**—Tri-City is actively monitoring these initiatives to understand their potential impact and ensure our region is not overlooked due to our carve-out status. These funding sources represent key areas for expanding services and meeting growing community needs, especially if Tri-City can align strategically without forfeiting local control.

**HUMAN RESOURCES**

Staffing – Month Ending June 2025:

- Total Staff is 216 full-time and 7 part-time plus 46 full-time vacancies 3 part-time vacancies for a total of 266 full-time equivalent positions.
- There were 6 new hires in June 2025.
- There were 1 separation in June 2025.

Workforce Demographics in June 2025:

- American Indian or Alaska Native = 0.45%
- Asian = 7.17%
- Black or African American = 7.17%
- Hispanic or Latino = 63.68%
- Native Hawaiian or Other Pacific Islander = 0.45%

**Governing Board of Tri-City Mental Health Authority  
Monthly Staff Report of Ontson Placide, Executive Director  
July 16, 2025  
Page 2**

- Other = 2.24%
- Two or more races = 1.79%
- White or Caucasian = 16.59%

New Posted Positions in June 2025:

- Clinical Supervisor I/II – MHSSA (1 FTE)
- Clinical Supervisor I/II – Hiring Event (2 FTEs)
- Nurse Practitioner (1 FTE)

TCMHA Hiring Event

We are excited to share that Tri-City hosted its first Hiring Event in over six years on Wednesday, June 25, 2025, at The Union in Pomona. The response exceeded our expectations, with approximately 145 prospective candidates in attendance. Throughout the event, four interview panels conducted interviews with 44 candidates. We are pleased to report that 32% of those interviewed are currently being considered for employment with Tri-City. Thank you for your continued support in promoting the event and for championing our efforts to attract diverse, qualified talent. A special note of appreciation goes to the Hiring Event Committee and our dedicated volunteers whose hard work made the event a success.

**NATIONAL & STATEWIDE UPDATES IN BEHAVIORAL HEALTH**

**Immigration sweeps and health data sharing are pushing some local immigrant families out of Medi-Cal**

*Health care providers across Southern California say some undocumented and mixed-status families are abandoning the public health system and much needed care, citing reports that Medi-Cal data was shared federal agents to assist recent immigration enforcement sweeps. The Trump administration’s alleged data sharing is also at the center of a lawsuit filed by California Attorney General Rob Bonta and 19 other states. Bonta said in a statement that the White House has “upended longstanding privacy protections” by sharing sensitive health information with ICE. [LAist](#)*

***LA County’s big program for people living with mental illness needs refining, officials say-***

*More than a year-and-a-half in, Los Angeles County Supervisors say California’s big plan to get more people living with serious mental illness into treatment needs improving. Known as CARE Court, the program launched in L.A. County in December 2023 and was promised as an innovative approach to bringing thousands of Californians living with untreated serious mental illness — like schizophrenia — under the care of mental health professionals. [LAist](#)*

***Exploring Record-High Student Homelessness-***

*Despite widespread enrollment declines in California public schools, the number of students experiencing homelessness rose by almost 20,000 in 2024. This is the highest rate of student homelessness in a decade—reaching 4% based on a single day count in October 2024—with wide variation by district. While cumulative data for 2024–25 is not yet available, rates are historically higher when counting all students who experience homelessness over the course of the year. Students are considered homeless if they lack a regular and adequate nighttime residence. This includes those who are living on the street, in shelters, in motels, in cars, or doubled up with other families due to economic hardship. [Public Policy Institute of California](#)*

***Fewer people on streets, in shelters after getting LA homelessness prevention help-***

*A Los Angeles County program that seeks out people at high risk of homelessness and tries to help them stay off the streets and out of shelters is showing early signs of success, according to a study published Thursday. Launched in 2021, the county's Homelessness Prevention Unit uses artificial intelligence to comb through vast troves of government data, looking for signs that someone is likely to fall into homelessness. Some of the risk factors include frequent hospitalizations, psychiatric holds, welfare program enrollment and past incarceration. [LAist](#)*

***How a century of decisions wrought L.A.'s homeless crisis-***

*As a teenager in the late 1970s, Steve Richardson was sweeping and stocking shelves at a toy store on the edge of L.A.'s Skid Row when he noticed the first signs of a monumental change in the city. Day after day, workers, hired from the surrounding streets to unload trucks full of toys, would take the empty boxes and transform them into makeshift shelters where they would spend the night. [Los Angeles Times](#)*

**END>**



Tri-City Mental Health Authority  
**MONTHLY STAFF REPORT**

**DATE:** July 16, 2025

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

**FROM:** Diana Acosta, CPA, Chief Financial Officer

**SUBJECT:** Monthly Finance and Facilities Report

---

**UNAUDITED FINANCIAL STATEMENTS FOR THE ELEVEN MONTHS ENDED MAY 31, 2025 (2025 FISCAL YEAR-TO-DATE):**

The financials presented herein are the PRELIMINARY and unaudited financial statements for the eleven months ended May 31, 2025. These financial statements include the activities from the clinical outpatient operations as well as activities from the implemented MHSA programs under the CSS, PEI, INN, WET and CFTN plans.

The increase in net position (income) is approximately \$9.5 million. MHSA operations accounted for approximately \$6.7 million of the increase, which is primarily the result of recognizing MHSA revenues on hand at the beginning of the fiscal year. MHSA non-operating revenues are reflected when MHSA funds have been received and are eligible to be spent.

During fiscal 2024, Tri-City received MHSA funding of approximately \$20.7 million, of which \$13.2 million were for approved programs for fiscal 2024-25 MHSA operations and was reflected as MHSA Revenue Restricted for Future Period on the Statement of Net Position (balance sheet) at June 30, 2024. These restricted MHSA revenues have now been recorded as non-operating revenues in fiscal 2024-25. In addition, during this current fiscal year 2024-25 approximately \$20.7 million in MHSA funding has been received of which \$3.5 million was identified and approved for use in the current fiscal year 2024-25 and recorded as non-operating revenues, bringing the total MHSA non-operating revenues recognized to date up to approximately \$16.7 million. Unlike the requirement to reflect all available and **approved** MHSA 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 increase in net position of approximately \$2.8 million is from Clinic outpatient operations, which is the result of operations for the eleven months ended May 31, 2025 which includes one-time payments made at the beginning of the year.

The total cash balance at May 31, 2025 was approximately \$66.6 million, which represents an increase of approximately \$18.8 million from the June 30, 2024 balance of

approximately \$47.8 million. Outpatient Clinic operations, after excluding any intercompany receipts or costs resulting from MHSA operations, had an increase in cash of approximately \$5.8 million primarily as a result timing of cash receipts from LADMH. MHSA operations reflected an increase in cash of approximately \$13.0 million, after excluding intercompany receipts or costs resulting from clinic operations. Total increase in MHSA cash reflects the receipt of approximately \$20.7 million in MHSA funds offset by the use of cash for MHSA operating activities.

Approximately \$21.8 million in Medi-Cal cash receipts have been collected for both Outpatient Clinic Operations and MHSA Operations within the eleven months ended May 31, 2025. As of the date of the report (07/09/2025), approximately \$4.6 million of additional receipts received are related to outstanding receivables. Of total receipts year-to-date, interim cost settlements account for approximately \$3.0 million.

## **UPCOMING, CURRENT EVENTS & UPDATES**

### Overall Financial Update:

We continue to closely monitor for any new developments, changes to legislation and updated revenue projections from CBHDA, specifically with regard to MHSA as these revenues continually fluctuate and as evidenced in the past and as noted below, 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.

### Upcoming reporting & project deadlines:

#### **External**

- Preparation for new reporting requirements under BHSA, final draft of the Integrated Plan has been released
- The interim phase of the annual financial statement audit (FY2024-25) has begun, with the final phase scheduled to commence in September 2025
- PERS has started an audit of the reporting of longevity pay (20 different municipalities are included in the audit).
  - Draft report is scheduled to be due in August 2025 with the final report due in December 2025

#### **Internal**

- Preparation for the BHSA Integrated Plan

MHSA Funding Updates:

**Estimated Current Cash Position** – The following table represents a brief summary of the estimated (unaudited) current MHSA cash position as of the eleven months ended May 31, 2025.

	<b>MHSA</b>
Cash at May 31, 2025	\$ 50,234,926
Receivables net of Reserve for Cost Report Settlements	1,439,963
Prudent Reserves	(2,200,000) *
Estimated Remaining Expenses for Operations FY 2024-25	(864,202) **
Reserved for future CFTN Projects	(6,417,848)
Total Estimated Adjustments to Cash	<u>(8,042,087)</u>
Estimated Available at June 30, 2025	<u>\$ 42,192,839</u>
Estimated remaining MHSA funds to be received in FY 2024-25	\$ 737,692

\* Per SB 192, Prudent Reserves are required to be maintained at an amount that does not exceed 33% of the average Community Services and Support (CSS) revenue received for the fund, in the preceding 5 years.

\*\* Estimated based on to-date actuals projected through year-end June 30, 2025, net of estimated Medi-Cal revenue, including actual and estimated amounts to year end 06/30/2025.

**MHSA EXPENDITURES AND MHSA REVENUE RECEIPTS**

MHSA Reversion Update:

Each remittance of MHSA funds received by Tri-City is required to be allocated among three of the five MHSA Plans, CSS, PEI and INN. The first 5% of each remittance is required to be allocated to INN and the remaining amount is split 80% to CSS and 20% to PEI. While the WET and the CapTech plans have longer time frames in which to spend funds (made up of one-time transfers into these two plans), the CSS, PEI and INN plans have three years.

Amounts received within the CSS and PEI programs must be expended within three years of receipt. INN amounts must be programmed in a plan that is approved by the Mental Health Services Oversight and Accountability Commission (MHSOAC) within three years of receipt, and spent within the life of the approved program. Upon approval by the MHSOAC, INN amounts have to be expended within the life of said program. For

**Governing Board of Tri-City Mental Health Authority**  
**Ontson Placide, LMFT, Executive Director**  
**Monthly Staff Report of Diana Acosta**  
**July 16, 2025**  
**Page 4 of 5**

example, a program approved for a five-year period will have the full five years associated with the program to expend the funds.

The following tables are **excerpts** from DHCS's annual reversion report received by Tri-City on February 11, 2025 based on the fiscal year 2023-24 Annual Revenue and Expense Report (ARER).

**CSS reversion waterfall analysis**

CSS amounts received							
	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24*	Total
	8,797,914	9,293,482	11,824,329	13,252,035	9,139,346	<b>16,870,739</b>	77,854,693
<b>Expended in:</b>							
2017-18							-
2018-19	-						939,014
2019-20	1,290,269	-					9,028,103
2020-21	7,507,645	3,546,924	-				11,054,569
2021-22		5,746,558	3,676,533	-			9,423,091
2022-23			8,147,796	5,723,324	-		13,871,120
2023-24				7,528,711	4,245,936	-	11,774,647
2024-25 **					<b>4,893,410</b>	<b>13,731,208</b>	<b>18,624,618</b>
2025-26							-
<b>Total Expended</b>	<b>8,797,914</b>	<b>9,293,482</b>	<b>11,824,329</b>	<b>13,252,035</b>	<b>9,139,346</b>	<b>13,731,208</b>	<b>74,715,162</b>
<b>Unspent Balance</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>3,139,531</b>	<b>3,139,531</b>

\*=Based on latest revenue projections

\*\*=Planned Expenditures based on approved MHSA Plan

**PEI reversion waterfall analysis**

PEI amounts received								
	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24*	Total
	2,145,788	2,119,324	2,173,110	2,948,240	3,311,501	2,260,797	4,175,846	19,134,606
<b>Expended in:</b>								
2017-18	726,119							726,119
2018-19	1,419,669	387,017						1,806,686
2019-20	-	1,644,825	-					1,644,825
2020-21		87,482	1,746,984	-				1,834,466
2021-22			426,126	1,309,696	-			1,735,822
2022-23				1,638,544	1,718,632	-		3,357,176
2023-24					<b>1,592,869</b>	<b>1,840,888</b>	-	<b>3,433,757</b>
2024-25 **						<b>419,909</b>	<b>3,586,503</b>	4,006,412
2025-26 **								-
<b>Total Expended</b>	<b>2,145,788</b>	<b>2,119,324</b>	<b>2,173,110</b>	<b>2,948,240</b>	<b>3,311,501</b>	<b>2,260,797</b>	<b>3,586,503</b>	<b>18,545,263</b>
<b>Unspent Balance</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>589,343</b>	<b>589,343</b>

\*=Based on latest revenue projections

\*\*=Planned Expenditures based on approved MHSA Plan

**Governing Board of Tri-City Mental Health Authority**  
**Ontson Placide, LMFT, Executive Director**  
**Monthly Staff Report of Diana Acosta**  
**July 16, 2025**  
**Page 5 of 5**

The following table was copied directly from latest information provided from DHCS

**INN reversion waterfall analysis**

INN	Reallocated AB 114	FY 17-18	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24	
Encumbered Unspent Funds	799,187	302,889	580,471	550,879	784,114	874,536	620,101	926,070	
Unencumbered Unspent Funds	-	-	-	-	-	-	-	251,396	
<b>Unspent Balance</b>	<b>799,187</b>	<b>302,889</b>	<b>580,471</b>	<b>550,879</b>	<b>784,114</b>	<b>874,536</b>	<b>620,101</b>	<b>1,177,466</b>	
<b>Encumbered Funds Starting Balance →</b>	<b>799,187</b>	<b>302,889</b>	<b>580,471</b>	<b>550,879</b>	<b>784,114</b>	<b>874,536</b>	<b>620,101</b>	<b>926,070</b>	
<b>Applied Expenditure ↓</b>									<b>Applied Expenditure ↓</b>
FY 15-16									-
FY 16-17									-
FY 17-18	304,376	-							304,376
FY 18-19	131,206	-	-						131,206
FY 19-20	355,393	-	-	-					355,393
FY 20-21	8,212	-	-	-	-				8,212
FY 21-22	-	302,889	25,035	-	-	-			327,924
FY 22-23	-	-	555,436	179,342	-	-	-		734,778
FY 23-24	-	-	-	371,537	182,851	-	-		554,388
FY 24-25									
<b>Encumbered Unspent Balance →</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>601,263</b>	<b>874,536</b>	<b>620,101</b>	<b>926,070</b>	

Note that in fiscal year 2024, the INN *Community Planning Process for Innovation Project(s)* program was approved by the MHSAOAC in the amount of \$675 thousand. Additionally, in fiscal year 2025, the INN PADs Phase II program was approved by the MHSAOAC in the amount of \$1.5 million.

Overall Facilities Update:

The leases at the 1900 Royalty location are due to expire at the end of the current fiscal year, June 30, 2025. Additionally, the lease at 1717 North Indian Hill Blvd is set to expire at the end of September 2025. Management is currently working on lease renewals as necessary and actively considering all options to accommodate staff and client space needs.

Attachments

*Attachment 3-A: March 31, 2025 Unaudited Monthly Financial Statements*

**TRI-CITY MENTAL HEALTH AUTHORITY  
CONSOLIDATING STATEMENTS OF NET POSITION**

	AT MAY 31, 2025			AT JUNE 30, 2024		
	TCMH	MHSA	Consolidated	TCMH	MHSA	Consolidated
	Unaudited	Unaudited	Unaudited	Audited	Audited	Audited
<b>Current Assets</b>						
Cash	\$ 16,352,431	\$ 50,234,926	\$ 66,587,357	\$ 11,061,930	\$ 36,745,684	\$ 47,807,614
Accounts receivable, net of reserve for uncollectible accounts \$720,940 at May 31, 2025 and \$1,028,867 at June 30, 2024	4,744,282	5,391,902	10,136,185	6,958,443	6,511,598	13,470,040
	<u>21,096,713</u>	<u>55,626,829</u>	<u>76,723,542</u>	<u>18,020,372</u>	<u>43,257,282</u>	<u>61,277,654</u>
<b>Property and Equipment</b>						
Land, building, furniture and equipment	4,267,139	10,282,671	14,549,810	4,100,520	10,766,682	14,867,203
Accumulated depreciation	(2,965,584)	(5,272,078)	(8,237,663)	(2,864,375)	(4,972,020)	(7,836,395)
Rights of use assets-building lease	1,753,343	-	1,753,343	1,753,343	-	1,753,343
Accumulated amortization-building lease	(1,723,506)	-	(1,723,506)	(1,395,366)	-	(1,395,366)
Rights of use assets-SBITA	1,298,467	-	1,298,467	1,298,467	-	1,298,467
Accumulated amortization-SBITA	(588,073)	-	(588,073)	(588,073)	-	(588,073)
Total Property and Equipment	<u>2,041,786</u>	<u>5,010,593</u>	<u>7,052,379</u>	<u>2,304,516</u>	<u>5,794,663</u>	<u>8,099,179</u>
<b>Other Assets</b>						
Deposits and prepaid assets	216,803	63,245	280,048	93,757	63,245	157,002
Note receivable-Housing Development Project	-	2,800,000	2,800,000	-	2,800,000	2,800,000
Total Noncurrent Assets	<u>2,258,589</u>	<u>7,873,838</u>	<u>10,132,427</u>	<u>2,398,273</u>	<u>8,657,908</u>	<u>11,056,181</u>
<b>Total Assests</b>	<u>23,355,302</u>	<u>63,500,667</u>	<u>86,855,969</u>	<u>20,418,645</u>	<u>51,915,190</u>	<u>72,333,835</u>
<b>Deferred Outflows of Resources</b>						
Deferred outflows related to the net pension liability	6,257,996	-	6,257,996	6,257,996	-	6,257,996
Total Deferred Outflows of Resources	<u>6,257,996</u>	<u>-</u>	<u>6,257,996</u>	<u>6,257,996</u>	<u>-</u>	<u>6,257,996</u>
<b>Total Assests and Deferred Outflows of Resources</b>	<u>\$ 29,613,298</u>	<u>\$ 63,500,667</u>	<u>\$ 93,113,965</u>	<u>\$ 26,676,641</u>	<u>\$ 51,915,190</u>	<u>\$ 78,591,831</u>
<b>LIABILITIES</b>						
<b>Current Liabilities</b>						
Accounts payable	597,920	52,757	650,677	608,213	452,165	1,060,378
Accrued payroll liabilities	95,937	292,226	388,163	93,247	262,608	355,855
Accrued vacation and sick leave	638,135	1,296,598	1,934,733	636,668	1,264,537	1,901,206
Deferred revenue	929,365	-	929,365	496,724	-	496,724
Reserve for Medi-Cal settlements	4,178,417	3,951,939	8,130,356	3,673,280	3,201,942	6,875,222
Current portion of lease liability	29,837	-	29,837	357,977	-	357,977
Current portion of SBITA liability	308,979	-	308,979	308,979	-	308,979
Total Current Liabilities	<u>6,778,589</u>	<u>5,593,519</u>	<u>12,372,108</u>	<u>6,175,088</u>	<u>5,181,252</u>	<u>11,356,340</u>
<b>Intercompany Acct-MHSA &amp; TCMH</b>	<u>(319,247)</u>	<u>319,247</u>	<u>-</u>	<u>177,414</u>	<u>(177,414)</u>	<u>-</u>
<b>Long-Term Liabilities</b>						
Lease liability	-	-	-	-	-	-
SBITA liability	401,415	-	401,415	401,415	-	401,415
Net pension liability	9,745,737	-	9,745,737	9,745,737	-	9,745,737
Unearned MHSA revenue	-	18,540,735	18,540,735	-	1,383,814	1,383,814
Total Long-Term Liabilities	<u>10,147,152</u>	<u>18,540,735</u>	<u>28,687,887</u>	<u>10,147,152</u>	<u>1,383,814</u>	<u>11,530,966</u>
<b>Total Liabilities</b>	<u>16,606,494</u>	<u>24,453,501</u>	<u>41,059,996</u>	<u>16,499,654</u>	<u>6,387,651</u>	<u>22,887,305</u>
<b>Deferred Inflow of Resources</b>						
MHSA revenues restricted for future period	-	-	-	-	13,188,357	13,188,357
Deferred inflows related to the net pension liability	156,688	-	156,688	156,688	-	156,688
Total Deferred Inflow of Resources	<u>156,688</u>	<u>-</u>	<u>156,688</u>	<u>156,688</u>	<u>13,188,357</u>	<u>13,345,045</u>
<b>NET POSITION</b>						
Invested in capital assets net of related debt	1,301,555	5,010,593	6,312,148	1,236,145	5,794,663	7,030,808
Restricted for MHSA programs	-	34,036,573	34,036,573	-	26,544,519	26,544,519
Unrestricted	11,548,560	-	11,548,560	8,784,153	-	8,784,153
Total Net Position	<u>12,850,115</u>	<u>39,047,166</u>	<u>51,897,281</u>	<u>10,020,298</u>	<u>32,339,182</u>	<u>42,359,480</u>
<b>Total Liabilities, Deferred Inflows of Resources and Net Position</b>	<u>\$ 29,613,298</u>	<u>\$ 63,500,667</u>	<u>\$ 93,113,965</u>	<u>\$ 26,676,641</u>	<u>\$ 51,915,190</u>	<u>\$ 78,591,831</u>

**Definitions:**

TCMH=Tri-City's Outpatient Clinic

MHSA=Mental Health Services Act (Proposition 63)

**TRI-CITY MENTAL HEALTH AUTHORITY**  
**CONSOLIDATING STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION**  
**ELEVEN MONTHS ENDED MAY 31, 2025 AND 2024**

	PERIOD ENDED 5/31/25			PERIOD ENDED 5/31/24		
	TCMH Unaudited	MHSA Unaudited	Consolidated Unaudited	TCMH Audited	MHSA Audited	Consolidated Audited
<b>OPERATING REVENUES</b>						
Medi-Cal FFP	\$ 4,339,254	\$ 6,366,316	\$ 10,705,570	\$ 4,911,459	\$ 5,612,970	\$ 10,524,429
Medi-Cal FFP FYE Prior Year	1,099,382	1,196,558	2,295,940	116,355	25,682	142,038
Medi-Cal SGF-EPSDT	1,080,471	2,189,466	3,269,937	1,026,077	1,050,010	2,076,087
Medi-Cal SGF-EPSDT Prior Year	424,279	444,395	868,674	51,816	52,750	104,565
Medicare	7,892	6,722	14,614	6,286	4,918	11,205
Contracts	-	29,463	29,463	17,500	28,374	45,874
Patient fees and insurance	-	-	-	446	614	1,061
Rent income - TCMH & MHSA Housing	11,858	73,221	85,080	10,164	60,990	71,154
Other income	685	730	1,415	839	605	1,444
<b>Net Operating Revenues</b>	<b>6,963,822</b>	<b>10,306,871</b>	<b>17,270,693</b>	<b>6,140,943</b>	<b>6,836,913</b>	<b>12,977,856</b>
<b>OPERATING EXPENSES</b>						
Salaries, wages and benefits	7,396,685	16,904,311	24,300,996	7,433,144	15,347,504	22,780,649
Facility and equipment operating cost	634,752	1,521,797	2,156,549	616,744	1,193,735	1,810,478
Client lodging, transportation, and supply expense	48,882	499,016	547,898	113,934	482,870	596,804
Depreciation & amortization	273,496	570,017	843,513	271,045	552,891	823,936
Other operating expenses	997,371	2,205,409	3,202,780	735,032	1,820,820	2,555,852
<b>Total Operating Expenses</b>	<b>9,351,185</b>	<b>21,700,551</b>	<b>31,051,736</b>	<b>9,169,900</b>	<b>19,397,819</b>	<b>28,567,718</b>
<b>OPERATING (LOSS) (Note 1)</b>	<b>(2,387,363)</b>	<b>(11,393,680)</b>	<b>(13,781,043)</b>	<b>(3,028,957)</b>	<b>(12,560,906)</b>	<b>(15,589,863)</b>
<b>Non-Operating Revenues (Expenses)</b>						
Realignment	3,350,738	-	3,350,738	3,512,397	-	3,512,397
Contributions from member cities & donations	58,236	-	58,236	70,236	-	70,236
MHSA funds	-	16,693,035	16,693,035	-	15,539,345	15,539,345
Grants and Contracts	1,374,584	-	1,374,584	1,054,862	-	1,054,862
Interest Income net with FMV	433,622	2,044,401	2,478,023	267,318	1,627,429	1,894,747
Gain/(Loss) on disposal of assets	-	(635,773)	(635,773)	-	-	-
Total Non-Operating Revenues (Expense)	5,217,180	18,101,663	23,318,843	4,904,813	17,166,774	22,071,587
<b>INCOME (LOSS)</b>	<b>2,829,817</b>	<b>6,707,984</b>	<b>9,537,800</b>	<b>1,875,856</b>	<b>4,605,868</b>	<b>6,481,724</b>
<b>INCREASE (DECREASE) IN NET POSITION</b>	<b>2,829,817</b>	<b>6,707,984</b>	<b>9,537,800</b>	<b>1,875,856</b>	<b>4,605,868</b>	<b>6,481,724</b>
<b>NET POSITION, BEGINNING OF YEAR</b>	<b>10,020,298</b>	<b>32,339,182</b>	<b>42,359,480</b>	<b>8,639,329</b>	<b>28,506,858</b>	<b>37,146,187</b>
<b>NET POSITION, END OF MONTH</b>	<b>\$ 12,850,115</b>	<b>\$ 39,047,166</b>	<b>\$ 51,897,281</b>	<b>\$ 10,515,185</b>	<b>\$ 33,112,726</b>	<b>\$ 43,627,912</b>

(Note 1) "Operating Loss" reflects loss before realignment funding and MHSA 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.

**TCMH**=Tri-City's Outpatient Clinic

**MHSA**=Mental Health Services Act (Proposition 63)

**TRI-CITY MENTAL HEALTH AUTHORITY  
CONSOLIDATING STATEMENTS OF CASH FLOWS  
ELEVEN MONTHS ENDED MAY 31, 2025 AND 2024**

	PERIOD ENDED 5/31/25			PERIOD ENDED 5/31/24		
	TCMH Unaudited	MHSA Unaudited	Consolidated Unaudited	TCMH Audited	MHSA Audited	Consolidated Audited
<b>Cash Flows from Operating Activities</b>						
Cash received from and on behalf of patients	\$ 9,714,087	\$ 12,194,327	\$ 21,908,414	\$ 5,809,696	\$ 6,715,298	\$ 12,524,994
Cash payments to suppliers and contractors	(1,986,630)	(4,781,484)	(6,768,114)	(1,453,444)	(3,766,692)	(5,220,135)
Payments to employees	(7,392,529)	(16,842,633)	(24,235,162)	(8,214,282)	(17,285,681)	(25,499,964)
	<u>334,929</u>	<u>(9,429,790)</u>	<u>(9,094,862)</u>	<u>(3,858,031)</u>	<u>(14,337,075)</u>	<u>(18,195,105)</u>
<b>Cash Flows from Noncapital Financing Activities</b>						
MHSA Funding	-	20,661,067	20,661,067	-	19,987,118	19,987,118
CalHFA-State Administered Projects	-	532	532	-	30,266	30,266
Realignment	3,350,738	-	3,350,738	4,836,309	-	4,836,309
Contributions from member cities	58,236	-	58,236	70,236	-	70,236
Grants and Contracts	1,790,436	-	1,790,436	1,281,214	-	1,281,214
	<u>5,199,410</u>	<u>20,661,599</u>	<u>25,861,010</u>	<u>6,187,759</u>	<u>20,017,383</u>	<u>26,205,142</u>
<b>Cash Flows from Capital and Related Financing Activities</b>						
Purchase of capital assets	(166,619)	(265,866)	(432,485)	(218,446)	(352,083)	(570,529)
Intercompany-MHSA & TCMH	(496,661)	496,661	-	(320,224)	320,224	-
	<u>(663,280)</u>	<u>230,795</u>	<u>(432,485)</u>	<u>(538,670)</u>	<u>(31,859)</u>	<u>(570,529)</u>
<b>Cash Flows from Investing Activities</b>						
Interest received	387,021	1,860,290	2,247,311	221,342	1,269,848	1,491,190
	<u>387,021</u>	<u>1,860,290</u>	<u>2,247,311</u>	<u>221,342</u>	<u>1,269,848</u>	<u>1,491,190</u>
<b>Cash Flows from Reorganization Items</b>						
Receipt of SB90 claims previously reserved and accrued	-	-	-	241,378	-	241,378
	<u>-</u>	<u>-</u>	<u>-</u>	<u>241,378</u>	<u>-</u>	<u>241,378</u>
<b>Net Increase (Decrease) in Cash and Cash Equivalents</b>	5,258,080	13,322,894	18,580,974	2,253,778	6,918,298	9,172,077
<b>Cash Equivalents at Beginning of Year</b>	11,061,930	36,745,684	47,807,614	8,976,643	30,118,745	39,095,388
<b>Cash Equivalents at End of Month</b>	<u>\$ 16,320,010</u>	<u>\$ 50,068,578</u>	<u>\$ 66,388,588</u>	<u>\$ 11,230,421</u>	<u>\$ 37,037,044</u>	<u>\$ 48,267,465</u>
<b>Cash from the Balance Sheet</b>	16,352,431	50,234,926	66,587,357	11,272,652	37,300,325	48,572,977
<b>YTD Gain/(Loss) from GASB 31 Fair Market Value</b>	<u>\$ 32,421</u>	<u>\$ 166,348</u>	<u>\$ 198,769</u>	<u>\$ 42,231</u>	<u>\$ 263,281</u>	<u>\$ 305,512</u>

**Definitions:**

**TCMH**=Tri-City's Outpatient Clinic

**MHSA**=Mental Health Services Act (Proposition 63)

**TRI-CITY MENTAL HEALTH AUTHORITY**  
**CONSOLIDATING STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION**  
**ACTUAL TO BUDGET COMPARISON**  
**ELEVEN MONTHS ENDING MAY 31, 2025**  
**(UNAUDITED)**

	TRI-CITY MENTAL HEALTH OUTPATIENT CLINIC (TCMH)			TRI-CITY MENTAL HEALTH SERVICES ACT (MHSA)			TRI-CITY MENTAL HEALTH AUTHORITY CONSOLIDATED		
	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
<b>OPERATING REVENUES</b>									
Medi-Cal FFP	\$ 4,732,011	\$ 5,411,918	\$ (679,907)	\$ 6,916,428	\$ 10,117,285	\$ (3,200,857)	\$ 11,648,439	\$ 15,529,203	\$ (3,880,764)
Medi-Cal FFP Prior Year	935,186	-	935,186	1,111,854	-	1,111,854	2,047,040	-	2,047,040
Medi-Cal SGF-EPSTD	1,178,267	1,678,203	(499,936)	2,413,759	1,936,542	477,217	3,592,026	3,614,745	(22,719)
Medi-Cal SGF-EPSTD Prior Year	398,095	-	398,095	401,730	-	401,730	799,824	-	799,824
Medicare	7,892	4,583	3,309	6,722	2,383	4,339	14,614	6,967	7,648
Patient fees and insurance	-	917	(917)	-	458	(458)	-	1,375	(1,375)
Contracts	-	-	-	29,463	25,667	3,797	29,463	25,667	3,797
Rent income - TCMH & MHSA Housing	11,858	10,164	1,694	73,221	55,000	18,221	85,080	65,164	19,916
Other income	685	550	135	730	183	547	1,415	733	681
Provision for contractual disallowances	(490,553)	(709,012)	218,459	(774,406)	(1,205,378)	430,973	(1,264,959)	(1,914,391)	649,432
Provision for contractual disallowances prior year	190,380	-	190,380	127,370	-	127,370	317,750	-	317,750
<b>Net Operating Revenues</b>	<b>6,963,822</b>	<b>6,397,323</b>	<b>566,498</b>	<b>10,306,871</b>	<b>10,932,140</b>	<b>(625,269)</b>	<b>17,270,693</b>	<b>17,329,463</b>	<b>(58,771)</b>
<b>OPERATING EXPENSES</b>									
Salaries, wages and benefits	7,396,685	9,559,507	(2,162,822)	16,904,311	21,004,990	(4,100,678)	24,300,996	30,564,496	(6,263,500)
Facility and equipment operating cost	634,756	514,811	119,945	1,523,679	1,274,121	249,558	2,158,435	1,788,932	369,503
Client program costs	48,882	10,388	38,494	499,016	552,778	(53,762)	547,898	563,166	(15,268)
Grants	257,843	1,251,889	(994,046)	104,725	340,653	(235,927)	362,568	1,592,542	(1,229,974)
MHSA training/learning costs	-	-	-	80,587	65,745	14,842	80,587	65,745	14,842
Depreciation & amortization	273,496	181,022	92,473	570,017	572,286	(2,269)	843,513	753,308	90,204
Other operating expenses	739,524	476,454	263,070	2,018,214	2,531,066	(512,852)	2,757,738	3,007,520	(249,782)
<b>Total Operating Expenses</b>	<b>9,351,185</b>	<b>11,994,071</b>	<b>(2,642,886)</b>	<b>21,700,551</b>	<b>26,341,639</b>	<b>(4,641,088)</b>	<b>31,051,736</b>	<b>38,335,710</b>	<b>(7,283,974)</b>
<b>OPERATING INCOME (LOSS)</b>	<b>(2,387,363)</b>	<b>(5,596,748)</b>	<b>3,209,385</b>	<b>(11,393,680)</b>	<b>(15,409,499)</b>	<b>4,015,819</b>	<b>(13,781,043)</b>	<b>(21,006,246)</b>	<b>7,225,203</b>
<b>Non-Operating Revenues (Expenses)</b>									
Realignment	3,350,738	4,033,333	(682,595)	-	-	-	3,350,738	4,033,333	(682,595)
Contributions from member cities & donations	58,236	70,236	(12,000)	-	-	-	58,236	70,236	(12,000)
MHSA Funding	-	-	-	16,693,035	16,693,035	-	16,693,035	16,693,035	-
Grants and contracts	1,374,584	2,934,471	(1,559,887)	-	-	-	1,374,584	2,934,471	(1,559,887)
Interest (expense) income, net	433,622	178,677	254,945	2,044,401	1,255,835	788,566	2,478,023	1,434,512	1,043,511
Other income-loss on disposal of assets	-	-	-	(635,773)	-	(635,773)	(635,773)	-	(635,773)
Total Non-Operating Revenues (Expense)	<b>5,217,180</b>	<b>7,216,717</b>	<b>(1,999,537)</b>	<b>18,101,663</b>	<b>17,948,870</b>	<b>152,793</b>	<b>23,318,843</b>	<b>25,165,587</b>	<b>(1,846,744)</b>
<b>INCREASE(DECREASE) IN NET POSITION</b>	<b>\$ 2,829,817</b>	<b>\$ 1,619,969</b>	<b>\$ 1,209,848</b>	<b>\$ 6,707,984</b>	<b>\$ 2,539,372</b>	<b>\$ 4,168,612</b>	<b>\$ 9,537,800</b>	<b>\$ 4,159,341</b>	<b>\$ 5,378,459</b>

**Definitions:**

**Medi-Cal FFP**= Federal Financial Participation Reimbursement

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

**TCMH**=Tri-City's Outpatient Clinic

**MHSA**=Mental Health Services Act (Proposition 63)

**TRI-CITY MENTAL HEALTH AUTHORITY  
ACTUAL TO BUDGET VARIANCE EXPLANATIONS  
ELEVEN MONTHS ENDING MAY 31, 2025**

**COMMENT: PLEASE NOTE, THE DISCUSSION BELOW MAY USE THE FOLLOWING ABBREVIATIONS:**

**TCMH**==TRI-CITY MENTAL HEALTH (OUTPATIENT CLINIC OPERATIONS)

**MHSA**==MENTAL HEALTH SERVICES ACT (ACTIVITIES INCLUDE CSS, PEI, INN, WET AND CFTN PROGRAMS)

**Net Operating Revenues**

***Net operating revenues are lower than the budget by \$59 for the following reasons:***

- 1 Medi-Cal FFP revenues for FY 2024-25** were approximately \$3.9 million lower than the budget. Medi-Cal FFP revenues were \$680 thousand lower for TCMH and approximately \$3.2 million lower for MHSA. At TCMH, the adult program revenues were lower than budget by \$603 thousand and the children program revenues were lower by \$77 thousand. For MHSA, the adult and older adult FSP program: were lower than budget by \$3.0 million and the Children and TAY FSP programs were lower by \$160 thousand. Additionally, as a result of higher than expected billing rates approved by the LACDMH for the fiscal year 2023-24, a total of \$2.0 million from prior year Medi-Cal FFP revenues were recorded to the current year operations.
- 2 Medi-Cal SGF-EPSDT revenues for fiscal year 2024-25** were lower than budget by \$23 thousand of which \$500 thousand lower were from TCMH and \$477 thousand higher were from MHSA. As was mentioned above, additional \$800 thousand in prior year Medi-Cal SGF-EPSDT revenues were recorded in the current year operations. SGF-EPSDT relates to State General Funds (SGF) provided to the agency for provision of qualifying Medi-Cal services for Early Prevention Screening and Diagnostic Testing (EPSDT) to children and youth under 21 years. These funds are in addition to the FFP reimbursed by the federal government.
- 3 Medicare revenues** are \$8 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 approximately \$4 thousand higher than the budget.
- 5 Rent Incomes** are higher than the budget by \$20 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 MHSA house on Park Avenue.
- 6 Provision for contractual disallowances** for fiscal year 2024-25 was lower than budget by \$649 thousand. Furthermore, due to the State's completion of FY15-16 cost report audit, the overall reserves were reduced by another \$318 thousand. This prior year's reserves write off essentially helps increasing the current year's net operating revenues.

**Operating Expenses**

***Operating expenses were lower than budget by approximately \$7.3 million for the following reasons:***

- 1 Salaries and benefits** are \$6.3 million lower than budget and of that amount, salaries and benefits are approximately \$2.2 million lower for TCMH operations and are \$4.1 million lower for MHSA operations. These variances are due to the following:  
  
**TCMH** salaries are lower than budget by \$1.3 million due to vacant positions and benefits are lower than budget by \$902 thousand. Benefits are budgeted as a percentage of the salaries. Therefore, when salaries are lower, benefits will also be lower.  
  
**MHSA** salaries are lower than budget by \$2.4 million. The direct program salary costs are lower by \$1.5 million due to vacant positions and the administrative salary costs are lower than budget by \$837 thousand. Benefits are lower than the budget by another \$1.7 million. Of that, health insurance was lower than budget by \$573 thousand, retirement insurance \$883 thousand, state unemployment insurance \$118 thousand, workers compensation \$43 thousand, medicare tax \$41 thousand. All other employee benefits are also lower than the budgets.
- 2 Facility and equipment operating costs** were higher than the budget by \$370 thousand of which \$120 thousand higher was from TCMH and \$250 thousand higher was from MHSA. Overall, furniture costs were higher than the budget by \$50 thousand. Building and facility costs were higher by \$171 thousand due to repairs and maintenance costs at the 2008 N. Garey building and the Community Therapeutic Garden. The equipment costs were higher than the budget by \$149 thousand due to upgrading of the Wellness Center's computer lab, replacement of agency wide laptop docking stations, aging printer scanners and projectors and purchasing of video conferencing equipment for the 2001 N. Garey building. Most of these expenses were funded by the MHSA CFTN plan.
- 3 Client program costs** are lower than the budget by approximately \$15 thousand.
- 4 Grants for fiscal year 2024-25** are \$1.2 million lower than the budget. These are the sub-grants awarded under the TCMH Mental Health Student Services Act program, the community grants under the MHSA PEI Community Wellbeing project and the Student Loan Forgiveness program under the MHSA WET plan.

**TRI-CITY MENTAL HEALTH AUTHORITY  
ACTUAL TO BUDGET VARIANCE EXPLANATIONS  
ELEVEN MONTHS ENDING MAY 31, 2025**

**COMMENT: PLEASE NOTE, THE DISCUSSION BELOW MAY USE THE FOLLOWING ABBREVIATIONS:**

**TCMH==TRI-CITY MENTAL HEALTH (OUTPATIENT CLINIC OPERATIONS)**

**MHSA==MENTAL HEALTH SERVICES ACT (ACTIVITIES INCLUDE CSS, PEI, INN, WET AND CFTN PROGRAMS)**

- 5 **MHSA learning and training costs** are approximately \$15 thousand higher than the budget.
- 6 **Depreciation and amortization** are \$90 thousand higher than the budget.
- 7 **Other operating expenses** were lower than the budget by \$250 thousand of which \$263 thousand higher were from TCMH offset by \$513 thousand lower from MHSA. Overall, the higher costs were due to higher personnel recruiting fees, attorney fees, liability insurance and security expenses. These higher costs are offset with lower professional fees from MHSA.

**Non-Operating Revenues (Expenses)**

**Non-operating revenues, net, are lower than budget by \$1.8 million as follows:**

- 1 **TCMH non-operating revenues** are approximately \$2.0 million lower than the budget. Of that, realignment fund was lower than the budget by \$683 thousand, contributions from member cities are lower by \$12 thousand due to timing, grants and contracts were lower by \$1.6 million and lastly, interest income net with fair market value were higher by \$255 thousand.
- 2 **MHSA non-operating revenue** is in line with the budget.  
In accordance with Government Accounting Standards Board, MHSA 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 MHSA plan and related programs have been approved and the proposed expenditures for those programs have been approved through an MHSA plan, MHSA update, or State Oversight and Accountability Commission.

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

	<b>Actual</b>	<b>Budget</b>	<b>Variance</b>
<b>CSS funds received and available to be spent</b>	\$ 12,056,637	\$ 12,056,637	\$ -
<b>PEI funds received and available to be spent</b>	4,006,412	4,006,412	-
<b>WET funds received and available to be spent</b>	-	-	-
<b>CFTN funds received and available to be spent</b>	-	-	-
<b>INN funds received and available to be spent</b>	629,986	629,986	-
<b>Non-operating revenues recorded</b>	<u>\$ 16,693,035</u>	<u>\$ 16,693,035</u>	<u>\$ -</u>

**CSS, PEI and INN recorded revenues** are all in line with the budget.

**Interest income net with Fair Market Value for MHSA** were higher than budget by approximately \$789 thousand.

**Other Income-Loss on Disposal of Assets** was approximately \$636 thousand. This was due to the transferring of Tri-City's property on 956 W. Baseline Rd. in Claremont to Restore Neighborhoods LA, Inc. (RNLA) for the development and construction of a 15-unit of combined affordable and permanent supportive senior housing project, known as Claremont Gardens. The escrow was successfully closed on February 28, 2025.

**TRI-CITY MENTAL HEALTH AUTHORITY**  
**CONSOLIDATING STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION**  
**ELEVEN MONTHS ENDED MAY 31, 2025 AND 2024**

	PERIOD ENDED 5/31/25			PERIOD ENDED 5/31/24		
	TCMH Unaudited	MHSA Unaudited	Consolidated Unaudited	TCMH Audited	MHSA Audited	Consolidated Audited
<b>REVENUES</b>						
Medi-Cal FFP, net of reserves	\$ 4,339,254	\$ 6,366,316	\$ 10,705,570	\$ 4,911,459	\$ 5,612,970	\$ 10,524,429
Medi-Cal FFP FYE Prior Year	1,099,382	1,196,558	2,295,940	116,355	25,682	142,038
Medi-Cal SGF-EPSDT	1,080,471	2,189,466	3,269,937	1,026,077	1,050,010	2,076,087
Medi-Cal SGF-EPSDT Prior Year	424,279	444,395	868,674	51,816	52,750	104,565
Medicare	7,892	6,722	14,614	6,286	4,918	11,205
Realignment	3,350,738	-	3,350,738	3,512,397	-	3,512,397
MHSA funds	-	16,693,035	16,693,035	-	15,539,345	15,539,345
Grants and contracts	1,374,584	29,463	1,404,047	1,072,362	28,374	1,100,735
Contributions from member cities & donations	58,236	-	58,236	70,236	-	70,236
Patient fees and insurance	-	-	-	446	614	1,061
Rent income - TCMH & MHSA Housing	11,858	73,221	85,080	10,164	60,990	71,154
Other income	685	730	1,415	839	605	1,444
Interest Income	433,622	2,044,401	2,478,023	267,318	1,627,429	1,894,747
Gain (Loss) on disposal of assets	-	(635,773)	(635,773)	-	-	-
<b>Total Revenues</b>	<b>12,181,002</b>	<b>28,408,534</b>	<b>40,589,536</b>	<b>11,045,756</b>	<b>24,003,687</b>	<b>35,049,443</b>
<b>EXPENSES</b>						
Salaries, wages and benefits	7,396,685	16,904,311	24,300,996	7,433,144	15,347,504	22,780,649
Facility and equipment operating cost	634,752	1,521,797	2,156,549	616,744	1,193,735	1,810,478
Client lodging, transportation, and supply expense	48,882	499,016	547,898	113,934	482,870	596,804
Depreciation & amortization	273,496	570,017	843,513	271,045	552,891	823,936
Other operating expenses	997,371	2,205,409	3,202,780	735,032	1,820,820	2,555,852
<b>Total Expenses</b>	<b>9,351,185</b>	<b>21,700,551</b>	<b>31,051,736</b>	<b>9,169,900</b>	<b>19,397,819</b>	<b>28,567,718</b>
<b>INCREASE (DECREASE) IN NET POSITION</b>	<b>2,829,817</b>	<b>6,707,984</b>	<b>9,537,800</b>	<b>1,875,856</b>	<b>4,605,868</b>	<b>6,481,724</b>
<b>NET POSITION, BEGINNING OF YEAR</b>	10,020,298	32,339,182	42,359,480	8,639,329	28,506,858	37,146,187
<b>NET POSITION, END OF MONTH</b>	<b>\$ 12,850,115</b>	<b>\$ 39,047,166</b>	<b>\$ 51,897,281</b>	<b>\$ 10,515,185</b>	<b>\$ 33,112,726</b>	<b>\$ 43,627,912</b>

**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-City'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.

**TCMH**=Tri-City's Outpatient Clinic

**MHSA**=Mental Health Services Act (Proposition 63)



Tri-City Mental Health Authority  
**MONTHLY STAFF REPORT**

**DATE:** July 16, 2025

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

**FROM:** Elizabeth Renteria, LCSW, Chief Clinical Officer

**SUBJECT:** Monthly Clinical Services Report

---

**MOBILE CRISIS CARE LAUNCH AND COMMUNITY RESOURCE FAIR – EVENT SUMMARY JUNE 26, 2025, | THE CATHEDRAL, DOWNTOWN POMONA**

Tri-City Mental Health proudly hosted the Mobile Crisis Care (MCC) Launch and Community Resource Fair on June 26, 2025, at The Cathedral event venue in downtown Pomona. The event was a great success, with over 180 community members in attendance and 40 community partners hosting resource tables to share vital information and services.

Attendees were welcomed with a “passport” activity, encouraging them to visit various booths. Completed passports were entered into raffle drawings for exciting prizes, helping to foster community engagement and interaction among attendees and service providers.

Participants received an overview of the Mobile Crisis Care program, learning about its role in providing immediate, compassionate, and accessible mental health crisis services. Additionally, guests had the opportunity to learn more about other TCMH programs and the wide range of services offered by our partnering organizations.

A highlight of the event was the opportunity for attendees to tour the new MCC van, giving them a firsthand look at the mobile resources available to support those in crisis. The celebration concluded with a vibrant folklorico dance performance by the talented Galan Dance Troupe, adding a festive and cultural touch to the day.

This event demonstrated the power of collaboration and community engagement in promoting mental health awareness and access to care.



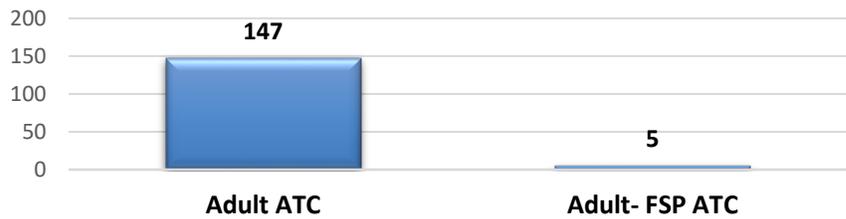
TCMHA extends its heartfelt thanks to all who attended, supported, and contributed to making the event a memorable and impactful experience.



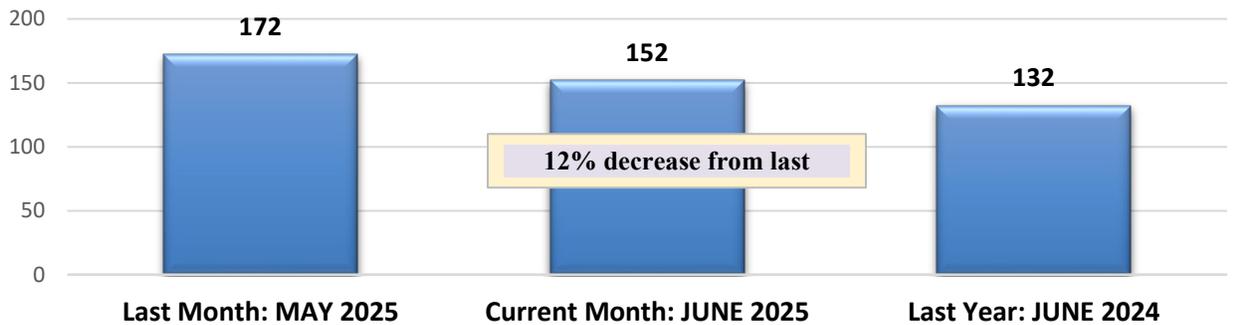
### ADULT OUTPATIENT SERVICES

Total Number of completed Service Requests  
**152**

Total Number of Service Requests by Program- AAOP



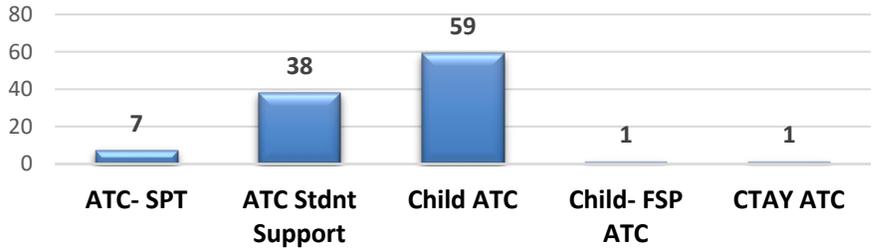
Service Request (AAOP)- Time Based Comparison



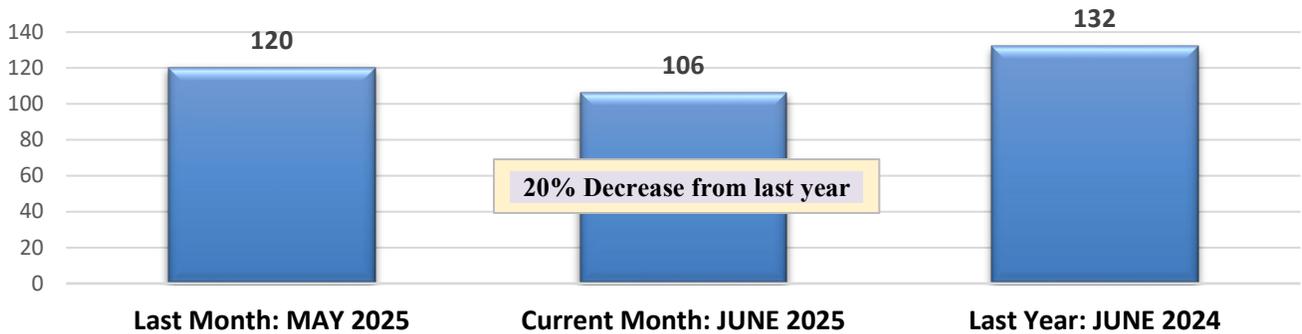
**CHILD AND FAMILY SERVICES**

**Total Number of completed Service Requests**  
**105**  
**101 Unique Individuals**

**Total Number of Service Requests by Program- CFS**



**Service Request (CFS)- Time Based Comparison**



*This graph above compares the number of services requests from last month, May 2025 and last year, June 2024 to the current month, June 2025. There was a 20% decrease in the number of service requests from last year.*



**Tri-City Mental Health Authority  
MONTHLY STAFF REPORT**

**DATE:** July 16, 2025

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

**FROM:** Seeyam Teimoori, M.D., Medical Director

**SUBJECT:** Medical Director's Monthly Report

---

**SERVICES PROVIDED BY OUR PSYCHIATRISTS AND NURSING TEAM IN THE  
MONTH OF JUNE 2025**

The team of psychiatrists provides initial psychiatric evaluations and psychiatric follow ups to our clients. The initial psychiatric evaluations are scheduled based on the clients' severity of symptoms, recent hospital admissions and being currently on psychiatric medications, to ensure timely access to these services, based on the urgency of cases.

The nursing team provides medication monitoring services in our in-house medication room for our outpatient clients. In the field medication monitoring services are provided for our clients in full-service partnership program. This includes providing oral medications and administering long acting injectables, which are proven to improve treatment outcomes.

These services which are supervised by our psychiatrists, improve medication compliances, facilitate treatments by monitoring the efficacies of medications and early reporting of side effects and other concerns, which will be addressed by treating psychiatrists.

Here are some of the services provided in the month of June:

- Total number of initial psychiatric evaluations: 53
- Total number of appointments with our psychiatrists: 255
- Total number of medication monitoring services: 626
- Total number of long-acting injections: 85



Tri-City Mental Health Authority  
**MONTHLY STAFF REPORT**

**DATE:** July 16, 2025

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

**FROM:** Dana Barford, Director of MHSA and Ethnic Services

**SUBJECT:** Monthly MHSA and Ethnic Services Report

---

**DIVERSITY, EQUITY, AND INCLUSION (DEI)**

July is BIPOC Mental Health Month

In honor of Bebe Moore Campbell National Minority Mental Health Awareness Month, we're spotlighting Mental Health America's 2025 BIPOC Mental Health Toolkit. This month is an opportunity to recognize how culture, identity, and systemic inequities impact mental health and to take meaningful steps toward healing and equity.

The toolkit focuses on these areas of action:

- **Take care of yourself** through culturally grounded wellness practices
- **Take care of your community** by building connections and mutual support
- **Advocate** for systemic change in mental health access and equity

Resources include worksheets, discussion guides, and tools for reflection and advocacy available in English and Spanish. Explore the toolkit and consider how you can engage this month: [mhanational.org/bipoc](https://mhanational.org/bipoc) Let's continue working toward a culture where mental health support is accessible, inclusive, and affirming for all.

RAINBOW Collaborative WEBINAR

Thank you to our partners at **Pomona Valley Pride** for their meaningful collaboration during this month's staff education hour. The RAINBOW Collaborative hosted a webinar focused on creating inclusive spaces, where participants heard real, day-to-day scenarios from panelists with lived experience. The session explored challenges faced by LGBTQIA+ individuals and offered practical strategies for providing supportive, affirming responses. It also addressed microaggressions, how to recognize, prevent, and respond to them, and highlighted local resources that support the LGBTQIA+ community. Attendees left with actionable tools to promote inclusion both in the workplace and beyond. We're grateful to Pomona Valley Pride for their partnership and for generously sharing their time and insight with our staff.

## **WORKFORCE EDUCATION AND TRAINING (WET)**

For the past 3 years Tri-City has offered the Loan Repayment Program to staff as an incentive to help pay down their student loans. Below is a breakdown of the number of staff this program has served over the years.

- Year 1: 30 applicants, 27 received award ~\$200,000 paid.
- Year 2: 67 applicants, 56 received award, ~400,000 paid.
- Year 3: 58 applicants, 52 received award, ~\$250,000 paid.

In FY 2024-2025, Tri-City gave out 51 awards to staff totaling \$ 241,435. First-time applicants received \$7,500 with the remaining staff receiving \$3,600 towards their student loan payments.

## **PREVENTION AND EARLY INTERVENTION (PEI)**

### Community Wellbeing Grants

On June 25, 2025, program staff held an orientation for twenty new FY 2025-26 CWB Grantees at the University of La Verne. Four grantees shared details about their projects, including their goals and what they are looking forward to in this grant year. Additionally, program staff provided an overview of all the forms used within the program and shared resources available through Tri-City. Grantees will be submitting their signed contracts in July to receive their 1<sup>st</sup> quarter check.

### Peer Mentor Program

While the peer mentors are on summer break there have been many opportunities to volunteer in events hosted by Tri-City which included tabling at the Community Resource Fair for the Mobile Crisis Launch with the hope of recruiting new peer mentors and mentees. This process has been successful yielding seven new mentor applicants for the upcoming program year beginning in September 2025.

### Stigma Reduction

For the month of June, program staff supported several community partner's events through stigma reduction activities and tabling mental health resources. On June 6, program staff supported a Courageous Minds speaker who shared their mental health story at the Living Stories event which was held outside of Pomona Public Library. The following week, staff also supported the final Community Wellbeing Grant meeting by providing different Tri-City resources, attended the grand re-opening of Youth and Family Club of Pomona Valley, and supported the Community Wellbeing Grant orientation meeting. Lastly, program staff has been planning and preparing for September activities which coincides with National Suicide Prevention Awareness Month.

## **WELLNESS CENTER (WC)**

The Wellness Center wrapped up fiscal year 2024/2025 with a joyful noise. The annual Wellness Center Talent Show was an unforgettable evening of song, art and laughs. Over 40 participants attended the star-studded event to encourage and support these wonderful performers. The audience was treated to a special performance by the Center's very own Wellness Band and more than a few chuckles from the endless, witty jokes of the Master of Ceremonies. The band was comprised of staff and participants. Participants sang such hits as, "I Love Rock 'N Roll" and "Save Your Tears" by the artist The Weekend.

## **INNOVATIONS (INN)**

Community Planning Process Project (CPP): In June, the Innovation team finalized the collection of community responses for the CPP FY 2024–2025 survey, resulting in 532 completed surveys. To support this effort, the team concluded its outreach by participating in two final events: the Tri-

City Mobile Crisis Launch on Wednesday, June 26, and the City of Pomona's Concert in the Park on Saturday, June 29. The team looks forward to presenting the survey findings to this Board in September.

## **COMMUNITY NAVIGATORS (CN)**

Outreach efforts for the Community Navigator Program included tabling at the following events: Youth Health Resource Fair hosted by Just Us 4 Youth, Mobile Crisis Unit Launch hosted by Tri-City, and Men's Health Event hosted by Pomona Wellness Community. The Community Navigator team also helped promote the Tri-City Job Fair and the Mobile Crisis Unit Launch by distributing flyers for both events at various locations in the community.

### Success Story

One of the Community Navigators received a call from a concerned mother regarding her adult daughter, who has a long history of alcohol abuse. Although the daughter had received mental health treatment in the past, she had never been open to entering detox or a residential treatment center. After years of hesitation, the daughter finally agreed to seek treatment. The Community Navigator who was assisting was able to quickly connect her with Inland Valley Recovery Services for detox and treatment. Both the mother and daughter expressed their gratitude for the referral and the timely connection to the needed services.

## **COMMUNITY PLANNING PROCESS (CPP)**

### Capital Facilities and Technological Needs Project Proposal (CFTN) 30-Day Public Comment

On June 12th, Tri-City MHSA posted a draft plan for public review. The plan requests approval for the expenditure of Capital Facilities and Technological Needs (CFTN) funds in an amount not to exceed five million seven hundred ninety thousand dollars (\$5,790,000), for property acquisition and technology enhancements. Comments will be collected and addressed accordingly. Comment period will close on July 16th.

### Community Forum: Local Immigrant Integration and Inclusion Grant (LIIIG)

On June 10th the MHSA Projects Manager presented to LIIIG regarding Tri-City programs, services, and MHSA to BHSA updates. The audience expressed appreciation for the information and several individuals asked to be placed on the project manager's emailing list to be informed of community forums, public hearings and otherwise.

### Planning with Purpose: CalMHSA

On the 4th of June MHSA Projects Manager attended a CalMHSA workshop in Sacramento to assist counties with the Community Planning Process under BHSA. Counties had the opportunity to explore tools, frameworks, and strategies for community engagement, as well as have county to county dialogue pertaining to the transition from MHSA to BHSA. The book Meaningful Engagement: A Guide to the Community Planning Process, was provided to attendees and has been a helpful tool in informing Tri-City's Community Planning Process.



Tri-City Mental Health Authority  
**MONTHLY STAFF REPORT**

**DATE:** July 16, 2025

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

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

**SUBJECT:** Monthly Best Practices Report

---

### **SITE CERTIFICATION**

The Los Angeles County Department of Mental Health has completed the re-certification for TCMHA-Site 7731A: located at 2008 N. Garey Avenue (completed on June 26, 2025). Re-Certification is required for legal entities (agencies) to be able to provide and be reimbursed for Specialty Mental Health Services. The re-certification process went well and there were no concerns or findings reported.

### **NETWORK ADEQUACY CERTIFICATION ENFORCEMENT ACTIONS**

In June 2025, the department of healthcare services (DHCS) released notice that starting with the reporting period of fiscal year 23/24, DHCS will impose enforcement actions for Behavioral Health Plans that fail to meet network adequacy standards (as outlined in the *Timely Access Enforcement Actions: Enforcement Tiers*).

State and federal laws require that all health plans uphold network adequacy standards, which encompass standards for time and distance and timely access to care. The purpose of network adequacy standards is to ensure that enrollees can access health care services in a timely manner.

Adherence to network adequacy standards is closely monitored at Tri-City. The best practices division works closely with the clinical department to ensure that agency programs are meeting network adequacy standards and/or are continually working towards improvement.

### **BHSA INTEGRATED PLAN DATA**

The Behavioral Health Services Act (BHSA) will require that all county Behavioral Health Departments complete and submit a three-year Integrated Plan for Behavioral Health Services. Version one (1) of the *Integrated Plan Template* has been released for cities/counties to review and begin preparing their reporting strategies.

**Governing Board of Tri-City Mental Health Authority**  
**Ontson Placide, LMFT, Executive Director**  
**Monthly Staff Report of Natalie Majors-Stewart**  
**July 16, 2025**  
**Page 2 of 2**

Within the new *Integrated Plan Template*, there is a significant requirement for data reporting throughout the plan. Integrated Plans will require cities/counties to conduct thorough data-informed local service planning processes and provide transparency into county planning for BHSA.

The Best Practices Data Team has been preparing for the new integrated plan structure for the last several months, starting with the completion of a capacity assessment in late 2024/early 2025. The capacity assessment included data and analyses to help drive decision making with the integrated planning process and program implementation for BHSA. The Best Practices Data Team will continue to work closely with Programs and Services to gather, analyze, and report data as required for the BHSA program planning process.



**Tri-City Mental Health Authority  
AGENDA REPORT**

**DATE:** July 16, 2025  
**TO:** Governing Board of Tri-City Mental Health Authority  
**FROM:** Ontson Placide, LMFT, Executive Director  
**BY:** Liz Renteria, LCSW, Chief Clinical Officer  
**SUBJECT:** Consideration of Resolution No. 798 Establishing the Authority's Drug Medi-Cal Fee Payment Policy and Procedure, Effective July 16, 2025

---

Summary:

Staff is seeking Board approval of the Drug Medi-Cal Fee Payment Policy and Procedure required to complete the application process for both the Department of Health Care Services (DHCS) Alcohol and Other Drugs (AOD) certification and the SAPC (Substance Abuse Prevention and Control) contract with the Los Angeles County Department of Public Health.

Background:

In order to deliver integrated behavioral health services, including co-occurring substance use and mental health treatment, our organization must obtain DHCS AOD certification and enter into a contract with the Los Angeles County SAPC. These steps require Board-approved policies and procedures to ensure compliance with state and county requirements.

Fiscal Impact:

Approval of this policy will position our organization to become Medi-Cal billable for substance use disorder services. This will generate sustainable reimbursement revenue and allow us to provide critical services to individuals with co-occurring disorders who are in urgent need of care.

Recommendation:

Staff recommends that the Governing Board adopt Resolution No. 798 establishing the Drug Medi-Cal Fee Payment Policy and Procedure to obtain AOD Certification from the DHCS and the SAPC Contract with the LAC Dept. of Public Health, effective July 16, 2025.

Attachments

*Attachment 8-A:* Resolution No. 798 - Draft

*Attachment 8-B:* Drug Medi-Cal Fee Payment Policy and Procedure - Draft

**RESOLUTION NO. 798**

**A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY ADOPTING THE AUTHORITY'S DRUG MEDI-CAL FEE PAYMENT POLICY AND PROCEDURE, EFFECTIVE JULY 16, 2025**

**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. Tri-City Mental Health Authority ("TCMHA" or "Authority") desires to establish its Drug Medi-Cal Fee Payment Policy and Procedure to obtain the Alcohol and Other Drugs (AOD) Certification from the Department of Health Care Services (DHCS) and the Substance Abuse Prevention and Control (SAPC) contract with the Los Angeles County Department of Public Health (LACDPH).

B. TCMHA Policies and Procedures are routinely reviewed and updated, or newly established, to ensure they are relevant, effective, and compliant with current regulations, mandates, and processes.

**2. Action**

The Governing Board approves and establishes the Authority's Drug Medi-Cal Fee Payment Policy and Procedure effective July 16, 2025.

**3. Adoption**

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on July 16, 2025 by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

---

JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

---

STEVEN L. FLOWER, GENERAL COUNSEL

---

MICHAELA P. OLMOS, RECORDING SECRETARY

**ATTACHMENT 8-A**



# POLICY & PROCEDURE

<b>SUBJECT:</b>  <b>Drug Medi-Cal Fee Payment</b>	<b>POLICY NO.:</b>	<b>EFFECTIVE DATE:</b> <b>July 16, 2025</b>	<b>PAGE:</b>  <b>1 of 6</b>
<b>APPROVED BY:</b> <b>Governing Board</b>  <b>Executive Director</b>	<b>SUPERCEDES:</b>	<b>ORIGINAL ISSUE DATE:</b>	<b>RESPONSIBLE PARTIES:</b>  <b>Chief Clinical Director</b> <b>Chief Financial Officer</b>

## 1. PURPOSE

- 1.1 To Establish transparent and lawful fee structures for mental health and SUD services
- 1.2 To Comply with Medi-Cal reimbursement guidelines and federal regulations.
- 1.3 To Protect consumer rights and prevent unfair billing practices.
- 1.4 Align clinic practices with FTC guidelines, CMS “No Surprises Act,” and applicable standards.

## 2. POLICY

2.1 This policy outlines Tri-City Mental Health Authority’s (TCMHA) procedures and regulatory requirements for establishing, communicating, and collecting fees for services provided at TCMHA, a licensed provider of Mental Health and Substance Use Disorder (SUD) treatment. This policy ensures compliance with federal and California laws, Medi-Cal regulations, and relevant consumer protection standards. This policy will apply those to seeking services through self-pay and are not Medi-Cal eligible.

## 3. Areas of Responsibility and Scope

- 3.1 Clients receiving services
- 3.2 Clinical and administrative staff
- 3.3 Billing, revenue cycle, and financial management personnel

## 4. Establishing Fees - Fees shall be established based on:

- 4.1 Fair market rates for services
- 4.2 Medi-Cal reimbursement rates
- 4.3 Operational costs and sustainability
- 4.4 Equity and accessibility considerations
- 4.5 Fee schedules shall be reviewed as updated by the Los Angeles County of Public Health, SAPC and approved by Executive leadership.
- 4.6 Services provided under Medi-Cal shall be billed in accordance with DHCS guidelines and limitations.



## POLICY & PROCEDURE

<b>SUBJECT:</b> <b>Drug Medi-Cal Fee Payment</b>	<b>POLICY NO.:</b>	<b>EFFECTIVE DATE:</b> <b>July 16, 2025</b>	<b>PAGE:</b> <b>2 of 3</b>
---	--------------------	--	-------------------------------

### 5. Fee Transparency

**5.1** Clients will receive written notice of fees before services begin, including:

- 5.1.1 Rates for each service type
- 5.1.2 Information on sliding scale or hardship waivers, if available
- 5.1.3 Insurance billing practices
- 5.1.4 Any anticipated out-of-pocket costs
- 5.1.5 For uninsured or self-pay clients, a **Good Faith Estimate** will be provided as required under the CMS “No Surprises Act.”

### 6. Billing and Collections

**6.1** All services shall be documented and billed using current procedural codes and standards and Billing statements shall be:

- 6.1.1 Clear and itemized
- 6.1.2 Delivered timely
- 6.1.3 Reflective of services actually rendered
- 6.1.4 Clients will not be billed more than Medi-Cal's allowable amounts for covered services.
- 6.1.5 Reasonable payment plans will be offered to clients with financial difficulty.
- 6.1.6 Collection practices shall comply with FTC guidance and will not involve coercion or harassment.

### 7. Complaints and Disputes

**7.1** Clients may submit billing disputes in writing. All complaints will be addressed within 30 days.

**7.2** Clients will be informed of their rights under the **No Surprises Act** and FTC consumer protection laws.

### 8. Staff Training

**8.1** All billing and administrative staff will be trained as necessary on:

- 8.1.1 This policy
- 8.1.2 Federal and state billing regulations
- 8.1.3 FTC standards for fair debt collection
- 8.1.4 CMS “No Surprises” provisions

### 9. Record Keeping and Audit

**9.1** All financial records will be maintained in accordance with:

- 9.1.1 HIPAA
- 9.1.2 Medi-Cal audit standards
- 9.1.3 Accrediting body requirements



## POLICY & PROCEDURE

<b>SUBJECT:</b> Drug Medi-Cal Fee Payment	<b>POLICY NO.:</b>	<b>EFFECTIVE DATE:</b> July 16, 2025	<b>PAGE:</b> 3 of 3
--	--------------------	---	------------------------

### 10. Regulatory References

- 10.1.1 **Federal Trade Commission (FTC) Guidance on Billing Transparency and Fair Practices:** [www.ftc.gov](http://www.ftc.gov)
- 10.1.2 **CMS No Surprises Act:** <https://www.cms.gov/nosurprises>
- 10.1.3 **Medi-Cal Mental Health & SUD Services Billing Guidelines:** [California Department of Health Care Services \(DHCS\)](#)
- 10.1.4 **Accreditation Requirements:** Refer to standards from The Joint Commission (TJC), CARF, or other accrediting bodies
- 10.1.5 **State Regulation:** No additional state-specific billing requirements for California noted at this time.



Tri-City Mental Health Authority  
**AGENDA REPORT**

**DATE:** July 11, 2025

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

**FROM:** Ontson Placide, LMFT Executive Director

**BY:** Elizabeth Renteria, LCSW, Chief Clinical Officer

**SUBJECT:** Consideration of Resolution No. 799 Approving an Affiliation Agreement for Internship Program with the Trustees of the California State University (CSU) on Behalf of California State University, Fullerton, and Authorizing the Executive Director to Execute the Agreement and any Amendments Thereafter

---

Summary:

The purpose of this agreement is to enter into an agreement by and between Tri-County Mental Health Authority (TCMHA) and the California State University, Fullerton (CSUF). Staff seeks Board approval and authorize the Executive Director to enter into this agreement, which will support student internships and enhance workforce development at no additional cost to the agency.

Background:

TCMHA seeks to formalize a partnership with CSUF Department of Social Work to serve as a host site for Master of Social Work (MSW) student interns. This agreement reflects the time-honored role of public mental health agencies in serving as training institutions for the next generation of mental health professionals. Interns will participate in a variety of agency functions, including clinical services, outreach, and program support. In return, TCMHA will provide supervision, training, and a structured learning environment. This partnership strengthens our mission by expanding service capacity and contributing to workforce development in the behavioral health field.

Fiscal Impact:

There is no negative fiscal impact associated with this agreement. While staff time is required for supervision and support of interns, these costs are offset by the interns' ability to contribute to Medi-Cal billable services, generating revenue that covers their associated costs.

**Governing Board of Tri-City Mental Health Authority**  
***Consideration of Resolution No. 799 Approving an Affiliation Agreement for Internship Program with the Trustees of the California State University (CSU) on Behalf of California State University, Fullerton, and Authorizing the Executive Director to Execute the Agreement and any Amendments Thereafter***  
**July 16, 2025**  
**Page 2 of 2**

Recommendation:

Staff recommends that the Governing Board adopt Resolution No. 799 approving the Affiliation Agreement with the Trustees of the CSU on behalf of CSUF and authorizing the Executive Director to execute the Agreement, and any amendments thereafter.

Attachments

*Attachment 9-A:* Resolution No. 799 – Draft

*Attachment 9-B:* TCMHA & CSUF Affiliation Agreement – Draft

## RESOLUTION NO. 799

### A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY APPROVING AN AFFILIATION AGREEMENT WITH THE TRUSTEES OF THE CALIFORNIA STATE UNIVERSITY (CSU) ON BEHALF OF CALIFORNIA STATE UNIVERSITY, FULLERTON, AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AGREEMENT AND ANY AMENDMENTS THEREAFTER

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. Tri-City Mental Health Authority (“TCMHA” or “Authority”) desires to train and provide practical fieldwork experience to California State University, Fullerton students enrolled in the approved program of special training for a Master’s in Social Work pursuant to the Affiliation Agreement.

B. The Authority affirms that Trustees of the California State University (CSU) and the California State University, Fullerton, are an independent contractor and not an employee, agent, joint venture or partner of TCMHA. The Agreement does not create or establish the relationship of employee and employer between CSU and TCMHA.

C. The Authority affirms that California State University, Fullerton students are considered learners who are fulfilling specific requirements for field experiences as part of a degree and/or credential requirement during their school calendar year, and are not employees, agents, joint venture or partners of TCMHA.

2. **Action**

The Governing Board approves the Affiliation Agreement with the Trustees of the California State University (CSU) on behalf of California State University, Fullerton, in substantially the same form as presented at its meeting on July 16, 2025, and authorizes the Authority’s Executive Director to enter into and execute the Agreement, effective July 16, 2025 through June 30, 2030, and any amendments or extensions of such Agreement.

[continued on page 2]

**3. Adoption**

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on July 16, 2025, by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

\_\_\_\_\_  
JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

\_\_\_\_\_  
STEVEN L. FLOWER, GENERAL COUNSEL

\_\_\_\_\_  
MICAELA P. OLMOS, RECORDING SECRETARY



**HOPE. WELLNESS. COMMUNITY.**

**Let's find it together.**

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

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

**AFFILIATION AGREEMENT**

**BETWEEN THE**

**TRI-CITY MENTAL HEALTH AUTHORITY**

**AND**

**THE TRUSTEES OF THE CALIFORNIA STATE UNIVERSITY  
ON BEHALF OF CALIFORNIA STATE UNIVERSITY, FULLERTON**

**DATED**

**JULY 16, 2025**

**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 & Family**

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) 242-7691

**ATTACHMENT 9-B**

**TABLE OF CONTENTS**

	<u>Section Page</u>
1. Parties and Date. ....	1
2. Independent Contractor. ....	1
3. Scope of Services. ....	1
4. Performance of Services. ....	1
A. TCMHA (Practicum Site) Responsibilities. ....	1
B. UNIVERSITY (Sponsoring Institution) Responsibilities. ....	2
5. Compliance. ....	3
6. Time and Location of Work. ....	4
7. Terms. ....	4
8. Termination. ....	4
9. Research. ....	4
10. No Financial Agreement. ....	5
11. Licenses. ....	5
12. Proprietary Information. ....	5
13. Fair Labor Standards Act and Displacement of Organization Employees. ....	5
14. Conflict of Interest. ....	5
15. General Terms and Conditions. ....	6
A. Mutual Indemnification. ....	6
B. Insurance. ....	6
C. Non-Discrimination and Equal Employment Opportunity. ....	7
D. Prohibition on Assignment. ....	7
E. Changes to the Agreement. ....	7
F. Contractor Attestation. ....	8
G. Governing Law, Jurisdiction and Venue. ....	8
H. No-Use of Names. ....	8
I. No Third Party Beneficiaries. ....	8
16. Representative and Notice. ....	8
A. TCMHA’s Representative. ....	8
B. UNIVERSITY’s Representative. ....	8
C. Delivery of Notices. ....	8
17. Exhibits. ....	9
18. Effective Date. ....	9
19. Entire Agreement. ....	9
20. Severability. ....	9
21. Waiver. ....	9
22. Execution. ....	10

## AGREEMENT

### 1. PARTIES AND DATE

THIS AGREEMENT (hereinafter “Contract” or “Agreement”) is made and entered into as of July 16, 2025 by and between the TRI-CITY MENTAL HEALTH AUTHORITY (“TCMHA” or “Practicum Site”), a joint powers agency organized under the laws of the State of California, with its administrative office at 1717 N. Indian Hill Boulevard, #B, Claremont, California 91711, and THE TRUSTEES OF THE CALIFORNIA STATE UNIVERSITY (“CSU”) on behalf of the CALIFORNIA STATE UNIVERSITY FULLERTON (“UNIVERSITY” or “Sponsoring Institution”), with its principal place of business at 2600 East Nutwood Avenue, Suite 300, Fullerton, CA 92831. TCMHA and UNIVERSITY are sometimes individually referred to as a “Party” and collectively as “Parties.”

### 2. INDEPENDENT CONTRACTOR

The express intention of the Parties is that UNIVERSITY is an independent contractor and not an employee, agent, joint venture or partner of TCMHA. Nothing in this Agreement shall be interpreted or construed as creating or establishing the relationship of employee and employer between UNIVERSITY and TCMHA or any employee, agent, or student of UNIVERSITY. At all times UNIVERSITY shall be an independent contractor and UNIVERSITY shall have no power to incur any debt, obligation, or liability on behalf of TCMHA without the express written consent of TCMHA. Neither TCMHA nor any of its agents shall have control over the conduct of UNIVERSITY or any of UNIVERSITY’s students, except as set forth in this Agreement.

### 3. SCOPE OF SERVICES

TCMHA will provide practical fieldwork experience (“Program”) pursuant to the terms of this Agreement and serve as a learning site offering facilities, resources, and training supervision to UNIVERSITY students enrolled in the approved program of special training for a Master’s in Social Work and approved for placement at Practicum Site by UNIVERSITY.

### 4. PERFORMANCE OF SERVICES

#### A. TCMHA (Practicum Site) Responsibilities

1) Allow UNIVERSITY students reasonable access to its site to fulfil internship hours and requirements within the scope of services offered by TCMHA in accord with an individual learning contract developed in line with the UNIVERSITY student’s learning objectives. When appropriate and agreed upon by the Parties, TCMHA may provide a remote or off-site internship experience with supervision by TCMHA staff. TCMHA shall determine the number of students it is capable of accepting for fieldwork placement, and the academic programs that it is willing to provide training.

2) Assign qualified employees to supervise, coordinate and oversee the internship experience, ensure the assigned students perform tasks consistent with UNIVERSITY’s student learning objectives, verify hours completed and provide feedback on the student’s performance. When required by state or professional licensing boards, TCMHA will assign a

supervisor or preceptor that is a licensed practitioner in the applicable health sciences field to oversee the students in the clinical education training program.

3) TCMHA shall provide an orientation of its site and all relevant policies and procedures to assigned students and UNIVERSITY faculty. TCMHA shall inform the participating student of any potential health or safety risks associated with the location of their field placement.

4) Allow management or employees to participate in meetings with UNIVERSITY, complete verification forms or otherwise communicate with UNIVERSITY faculty regarding the program.

5) Coordinate emergency care or first aid to UNIVERSITY students enrolled in the Program.

6) Have the right to refuse participation to any UNIVERSITY student who TCMHA determines is not participating satisfactorily in the Program. In the event that TCMHA determines a student is not satisfactorily participating in the Program, TCMHA will consult with UNIVERSITY regarding the reasons for denying participation of such student, but TCMHA shall make the final decision on such student's participation in its sole discretion and UNIVERSITY agrees to honor any such decision.

#### B. UNIVERSITY (Sponsoring Institution) Responsibilities

1) Be responsible for development, organization, and implementation of the academic curriculum and student learning objectives related to the internship Program; and provide TCMHA with a statement of its educational goals, of appropriate learning experiences, and of its expectations for student performance in the Program.

2) Be responsible for the selection, placement, removal, and final grading of students placed with TCMHA. These decisions shall be made in consultation with TCMHA in accordance with the respective responsibilities of each Party to this Agreement.

3) Designate students in such numbers as are mutually agreed to by both Parties.

4) Maintain all attendance and academic records of students participating in field work assignments pursuant to this Agreement.

5) Assign a representative of its faculty to act as the Faculty Field Liaison between UNIVERSITY and TCMHA in the development and execution of the internship Program, rotation plan, the valuation of student performance, and to engage in such other activities as are of mutual concern in the provision of student training.

6) The Faculty Field Liaison will exchange relevant information regarding the student's progress with TCMHA's Primary Supervisor as needed; and will also notify TCMHA's director in advance of: a) schedules of the students participating in the Program, b) placement of students in fieldwork assignments, and 3) changes in fieldwork assignments.

7) Be responsible for the students professional activities and conduct while they are at TCMHA locations; require every student to conform to all applicable TCMHA policies, procedures, and regulations, and all requirements and restrictions specified by TCMHA; and inform the students that they will serve as volunteers without compensation, and that they will not be considered officers, agents or employees of TCMHA for any purpose, including Worker's Compensation purposes. These requirements shall include, but are expressly not limited to, that every student shall be required to successfully pass a criminal history background investigation as a condition of participation in the program. UNIVERSITY will assure that each Student is covered by health and liability (malpractice) insurance.

8) In consultation and coordination with the TCMHA's staff, arrange for periodic conferences between appropriate representatives of UNIVERSITY and TCMHA to evaluate the fieldwork experience program provided under this Agreement.

## **5. COMPLIANCE**

A. Students providing services pursuant to this Agreement may have access to Protected Health Information, as defined at 45 CFR §160.103, and shall adhere to the requirements of the Health Insurance Portability and Accountability Act (HIPAA), 45 CFR, Parts 160 and 164; 42 CFR, Part 2, and Welfare Institutions Code (WIC) Sections 5328 through 5330, inclusive, and all other applicable County, State, and federal laws, ordinances, rules, regulations, manuals, guidelines, and directives, relating to confidentiality and privacy.

B. During internship at TCMHA, students will be required to participate in training related to TCMHA's HIPAA Privacy and Security policies and procedures; and shall conform to all applicable TCMHA policies, procedures, regulation, and all requirements and restriction specified by TCMHA.

C. All TCMHA's medical records and charts, created in connection with professional training for students enrolled in the internship Program, shall be and shall remain property of TCMHA.

D. The Parties agree that UNIVERSITY is not a "Business Associate" of TCMHA under HIPAA. UNIVERSITY shall not perform or assist in the performance of covered HIPAA functions on behalf of TCMHA. There shall be no exchange of individually identifiable protected health information between UNIVERSITY and TCMHA, or between any student and UNIVERSITY. Notwithstanding the foregoing, UNIVERSITY shall be bound by all the requirements of HIPAA, as applicable, and shall ensure that UNIVERSITY Personnel (as defined in Section 9 of this Agreement), and UNIVERSITY's students comply with all applicable HIPAA requirements.

## **6. TIME AND LOCATION OF WORK**

Students shall perform the training required by this Agreement at any place or location and at any time as TCMHA deems necessary and appropriate, so long as they met the educational goals and objectives as required by UNIVERSITY's internship program.

## **7. TERM**

The term of this Agreement shall commence July 16, 2025, and shall be and remain in full force and effect until June 30, 2030; unless it is amended or terminated pursuant to the provisions of Section 8 below.

## **8. TERMINATION**

Either Party may terminate this Agreement at any time, without cause, upon thirty (30) calendar days' prior written notice to the other Party. Such termination shall not impair the activities of the students then at TCMHA and participating satisfactorily and in good standing in the internship Program, as determined by TCMHA pursuant to Section 4(A)(6). In the event of a material breach of this Agreement by either Party, the other Party may terminate this Agreement immediately upon written notice. Both Parties agree to cooperate fully in any such transition.

## **9. RESEARCH**

UNIVERSITY and TCMHA agree that neither the UNIVERSITY nor TCMHA, nor any student, UNIVERSITY Personnel or TCMHA Personnel, will conduct any formal or informal survey, research or other study relating in any way to the patients treated under the Program at the TCMHA without first obtaining a written determination made by the UNIVERSITY Personnel and the TCMHA Coordinator (or their designated representatives) that appropriate consent has been obtained from any patient who is the subject of or participates in such survey, research or other study. As used in this Agreement, the term "UNIVERSITY Personnel" means and includes any official, officer, director, trustee, agent, employee, or contractor of UNIVERSITY. As used in this Agreement, the term "TCMHA Personnel" means and includes any elective or appointive official, officer, agent, employee, or contractor of TCMHA.

## **10. NO FINANCIAL AGREEMENT**

TCMHA shall not compensate or reimburse UNIVERSITY, any of the UNIVERSITY's students, or any of the UNIVERSITY Personnel in connection with their participation in the Program under this Agreement. UNIVERSITY shall pay and administer all compensation and fringe benefits, if any, due its students and/or UNIVERSITY Personnel, and shall make any required federal or state income tax withholdings and all payments due as an employer's contribution under workers' compensation laws, or other laws, if applicable for any students and UNIVERSITY Personnel.

## **11. LICENSES.**

UNIVERSITY declares that UNIVERSITY has complied with all federal, state, and local business permits and licensing requirements necessary to conduct business and to enter into this Agreement.

## **12. PROPRIETARY INFORMATION**

UNIVERSITY agrees that all information, whether or not in writing, of a private, secret or confidential nature concerning TCMHA's business, activities, programs, services, business relationships or financial affairs (collectively, "Proprietary Information") is and shall be the exclusive property of TCMHA. UNIVERSITY, UNIVERSITY Personnel and UNIVERSITY's

students shall not disclose any Proprietary Information to any person or entity, other than persons who have a need to know about such information, without written approval by Executive Director of TCMHA, either during or after its engagement with TCMHA, unless and until such Proprietary Information has become public knowledge without fault by the UNIVERSITY.

### **13. FAIR LABOR STANDARDS ACT AND DISPLACEMENT OF ORGANIZATION EMPLOYEES**

It is not the intention of this Agreement for UNIVERSITY students to perform services that would displace or replace regular employees of TCMHA. It is understood by the Parties that UNIVERSITY's students are not employees of TCMHA for any purpose and shall not be entitled compensation for services, employees' health, welfare and pension benefits, or other fringe benefits of employment, or worker's compensation insurance, from TCMHA. UNIVERSITY and TCMHA shall inform their students that no student is, or will be, entitled to any employment by either Party upon completion of their rotation.

### **14. CONFLICT OF INTEREST**

UNIVERSITY hereby certifies that to the best of its knowledge or belief, no elected/appointed official or employee of TCMHA is financially interested, directly or indirectly, in the provision of services specified in this Agreement. Furthermore, UNIVERSITY represents and warrants to TCMHA that it has not employed nor retained any person or company employed by the TCMHA to solicit or secure the award of this Agreement and that it has not offered to pay, paid, or agreed to pay any person any fee, commission, percentage, brokerage fee, or gift of any kind contingent upon or in connection with, the award of the Agreement.

### **15. GENERAL TERMS AND CONDITIONS**

#### **A. Mutual Indemnification.**

1. Indemnification by UNIVERSITY. UNIVERSITY shall, at its sole cost and expense, indemnify, defend and hold harmless TCMHA, its elective and appointive officers, officials, agents, employees, volunteers, and contractors who serve as TCMHA officers, officials or staff (collectively "TCMHA Indemnitees" in this Subsection (A)(1) of Section 15), from any and all demands, claims, costs or liability of personal injury, bodily injury (including death) and property damage, of any nature (collectively "Claims"), in law or in equity, whether actual, alleged or threatened, caused by or arising out of, in whole or in part, the acts or omissions of UNIVERSITY, its officers, trustees, directors, agents, employees, contractors, subcontractors, or their officers, trustees, directors, agents or employees, or any of UNIVERSITY's students (or any entity or individual that UNIVERSITY shall bear the legal liability thereof), (collectively "UNIVERSITY Indemnitors" in this Subsection (A)(1) of Section 15), including the UNIVERSITY Indemnitors' active or passive negligence, recklessness or willful misconduct in the performance of this Agreement, UNIVERSITY's for-credit internship course program, and/or the participation by any student in UNIVERSITY's for-credit internship course program, except as for Claims arising from the sole negligence or willful misconduct of TCMHA Indemnitees.

2. Indemnification by TCMHA. TCMHA shall, at its sole cost and expense, indemnify, defend and hold harmless UNIVERSITY, its officers, agents and employees (collectively "UNIVERSITY Indemnitees" in this Subsection (A)(2) of Section 15) from any and all demands, claims, costs or liability of personal injury, bodily injury (including death) and property damage of any nature (collectively "Liabilities"), in law or in equity, whether actual, alleged or threatened, caused by or arising out, in whole or in part, the acts or omissions of TCMHA, its officers, officials, agents, employees, volunteers, and contractors who serve as TCMHA officers, officials or staff (collectively "TCMHA Indemnitors" in this Subsection (A)(2) of Section 15), including TCMHA Indemnitors' active or passive negligence, recklessness, or willful misconduct in the performance of this Agreement, except for Liabilities arising from the sole negligence or willful misconduct of UNIVERSITY Indemnitees.

B. **Insurance.** UNIVERSITY shall obtain and file with TCMHA, at UNIVERSITY's expense, certificates of insurance providing the following insurance before commencing any services under this Agreement as follows:

1. **Workers Compensation Insurance:** Minimum statutory limits.
2. **Automobile Insurance:** \$1,000,000.00 per occurrence.
3. **Errors And Omissions Insurance:** \$1,000,000.00 per occurrence, and \$3,000,000 in the aggregate.
4. **Commercial General Liability And Property Damage Insurance:** General Liability and Property Damage Combined. \$2,000,000.00 per occurrence including comprehensive form, personal injury, broad form personal damage, contractual and premises/operation, all on an occurrence basis. If an aggregate limit exists, it shall apply separately or be no less than two (2) times the occurrence limit.
5. UNIVERSITY, on behalf of students, shall maintain **General and Professional Liability**, as well as educator's **Errors and Omissions coverage**, through the Student Professional Liability Insurance (SPLIP) program, in the amount of \$2,000,000 each occurrence and \$4,000,000 general aggregate.
6. **Notice Of Cancellation:** TCMHA requires, and UNIVERSITY shall provide TCMHA with, 30 days' written notice of cancellation. Additionally, the notice statement on the certificate should not include the wording "endeavor to" or "but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives."
7. **Waiver of Subrogation:** Each insurance policy required by this Agreement shall expressly waive the insurer's right of subrogation against TCMHA and its elected and appointive officials, officers, employees, agents, volunteers and contractors serving as TCMHA officers, officials or staff. UNIVERSITY hereby waives all rights of subrogation against TCMHA.
8. **Certificate Of Insurance:** Prior to commencement of services, evidence of insurance coverage must be shown by a properly executed certificate of insurance by an insurer licensed to do business in California, satisfactory to TCMHA, and it shall name "*Tri-City Mental Health Authority, its elective and appointed officers, employees, volunteers, and contractors who serve as TCMHA officers, officials, or staff*" as additional insureds.

**9. Delivery of Certificates and Endorsements:** To prevent delay and ensure compliance with this Agreement, the insurance certificates and endorsements must be submitted to:

Tri-City Mental Health Authority  
Attn: JPA Administrator/Clerk  
1717 N. Indian Hill Boulevard, #B  
Claremont, CA 91711-2788

C. Non-Discrimination and Equal Employment Opportunity. In the performance of this Agreement, UNIVERSITY shall not discriminate against any employee, subcontractor, student or applicant for employment because of race, color, creed, religion, sex, marital status, national origin, ancestry, age, physical or mental disability, medical condition, sexual orientation or gender identity. UNIVERSITY will take affirmative action to ensure that subcontractors and applicants are employed, that are treated during employment, without regard to their race, color, creed, religion, sex, marital status, national origin, ancestry, age, physical or mental handicap, medical condition, sexual orientation or gender identity.

D. Prohibition on Assignment. This Agreement shall not be assigned or transferred without advance written consent of TCMHA.

E. Changes to the Agreement. No changes or variations of any kind are authorized without the written consent of TCMHA's Executive Director. This Agreement may only be amended by a written instrument signed by both Parties. UNIVERSITY agrees that any written change after the signing of this Agreement shall not affect the validity or scope of this Agreement and shall be deemed to be a supplement to this Agreement and shall specify any changes in the Scope of Services.

F. Contractor Attestation. Also in accordance with TCMHA's policies and procedures, TCMHA will not enter into contracts with individuals, or entities, or owners, officers, partners, directors, or other principals of entities, who have been convicted recently of a criminal offense related to health care or who are debarred, excluded or otherwise precluded from providing goods or services under Federal health care programs, or who are debarred, suspended, ineligible, or voluntarily suspended from securing Federally funded contracts. TCMHA requires that UNIVERSITY certify that no staff member, officer, director, partner, or principal, sub-contractor, or Student is excluded from any Federal health care program, or federally funded contract and will sign attached *Contractor's Attestation That Neither It Nor Any Of Its Staff Members Are Restricted, Excluded Or Suspended From Providing Goods Or Services Under Any Federal Or State Health Care Program*, attached hereto as 'Exhibit A' and incorporated herein by this reference. UNIVERSITY agrees that UNIVERSITY shall comply with this requirement.

G. Governing Law, Jurisdiction and Venue. This Agreement shall be governed by, and construed in accordance with, the laws of the State of California, except that any rule of construction to the effect that ambiguities are to be resolved against the drafting party shall not be applied in interpreting this Agreement. The Parties agree that venue of any action that arises under or relates to this Agreement (whether contract, tort, or both) shall be resolved exclusively in a superior court or federal court in the County of Los Angeles, California.



**18. EFFECTIVE DATE**

This Agreement shall become effective upon (a) its approval and execution by UNIVERSITY; and (b) its approval and execution by TCMHA.

**19. ENTIRE AGREEMENT**

This Agreement and any other documents incorporated herein by specific reference, represents the entire and integrated agreement between the Parties. Any ambiguities or disputed terms between this Agreement and any attached Exhibits shall be interpreted according to the language in this Agreement and not the Exhibits. This Agreement supersedes all prior agreements, written or oral, between the UNIVERSITY and TCMHA relating to the subject matter of this Agreement. This Agreement may not be modified, changed or discharged in whole or in part, except by an agreement in writing signed by the UNIVERSITY and TCMHA.

**20. SEVERABILITY**

The validity or unenforceability of any provision of this Agreement declared by a valid judgment or decree of a court of competent jurisdiction, shall not affect the validity or enforceability of any other provision of this Agreement.

**21. WAIVER**

No delay or omission by TCMHA in exercising any right under this Agreement will operate as a waiver of that or any other right. A waiver or consent given by TCMHA on any one occasion is effective only in that instance and will not be construed as a bar to or waiver of any right on any other occasion or a waiver of any other condition of performance under this Agreement.

[SIGNATURES FOLLOW ON NEXT PAGE]

**22. EXECUTION**

**IN WITNESS WHEREOF**, the Parties have executed this Agreement as of the Agreement Date.

**PRACTICUM SITE**

**SPONSORING INSTITUTION**

**Tri-City Mental Health Authority**

**California State University, Fullerton**

By: \_\_\_\_\_  
Ontson Placide, Executive Director

By: \_\_\_\_\_  
Kristiann Bonus, Buyer II

Attest:

By: \_\_\_\_\_  
Micaela P. Olmos, JPA Administrator/Clerk

Approved as to Form:  
RICHARDS WATSON GERSHON LAW

By: \_\_\_\_\_  
Steven L. Flower, General Counsel

**EXHIBIT A**

**CONTRACTOR’S ATTESTATION THAT NEITHER IT NOR ANY OF ITS STAFF MEMBERS OR STUDENTS ARE RESTRICTED, EXCLUDED OR SUSPENDED FROM PROVIDING GOODS OR SERVICES UNDER ANY FEDERAL OR STATE HEALTH CARE PROGRAM**

CALIFORNIA STATE UNIVERSITY, FULLERTON

Contractor’s Name	Last	First
-------------------	------	-------

Contractor hereby warrants that neither it nor any of its staff members or students is restricted, excluded, or suspended from providing goods or services under any health care program funded by the Federal or State Government, directly or indirectly, in whole or in part, and the Contractor will notify Tri-City Mental Health Authority (TCMHA) within thirty (30) days in writing of: 1) any event that would require Contractor or a staff member’s mandatory exclusion or suspension from participation in a Federal or State funded health care program; and 2) any exclusionary action taken by any agency of the Federal or State Government against Contractor or one or more staff members barring it or the staff members from participation in a Federal or State funded health care program, whether such bar is direct or indirect, or whether such bar is in whole or in part.

Contractor shall indemnify and hold TCMHA harmless against any and all loss or damage Contractor may suffer arising from the Federal or State exclusion or suspension of Contractor or its staff members from such participation in a Federal or State funded health care program.

Failure by Contractor to meet the requirements of this paragraph shall constitute a material breach of contract upon which TCMHA may immediately terminate or suspend this Agreement.

**Is Contractor/Proposer/Vendor or any of its staff members or students currently barred from participation in any Federal or State funded health care program?**

\_\_\_\_\_ **NO**, Contractor or any of its staff members or students is not currently barred from participation in any Federal or State funded health care program.

\_\_\_\_\_ **YES**, Contractor or any of its staff members or students is currently barred from participation in any Federal or State funded health care program. Describe the particulars on a separate page.

Kristiann Bonus, Buyer II

Date	Contractor or Vendor’s Name	Contractor or Vendor’s Signature
------	-----------------------------	----------------------------------

Ontson Placide, Executive Director

Date	TCMHA Executive Official’s Name	TCMHA Executive Official’s Signature
------	---------------------------------	--------------------------------------

**DISTRIBUTION:**

COPIES: Contractor  
Finance



**Tri-City Mental Health Authority  
AGENDA REPORT**

**DATE:** July 16, 2025

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

**FROM:** Ontson Placide, LMFT, Executive Director

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

**SUBJECT:** Consideration of Resolution No. 800 Adopting a Revised Master Classification and Salary Schedule Reflecting a 2% COLA, Healthcare Worker Minimum Wage Compliance under SB No. 525, and Clinical Compensation Adjustments, Effective July 1, 2025

---

Summary:

Effective July 1, 2025, Tri-City Mental Health Authority (TCMHA) will implement the Governing Board-approved 2% Cost of Living Adjustment (COLA) for all classifications. In addition, to comply with Senate Bill (SB) No. 525, the minimum wage for healthcare workers will increase to \$24.00 per hour. Salary range adjustments for the Clinical classification series (Clinical Therapist I/II, Clinical Supervisor I/II, and Clinical Program Manager) will also take effect based on recent compensation study findings. The attached revised Master Classification and Salary Schedule reflects all changes.

Background:

On June 18, 2025, the Governing Board adopted TCMHA's FY 2025–2026 budget, which included:

- A 2% COLA for all classifications to support employee retention and offset inflation.
- Market-based adjustments for the Clinical classification series to maintain competitiveness in the regional labor market.

Additionally, to ensure compliance with SB 525, which mandates a \$24.00/hour minimum wage for healthcare workers in large-population counties effective July 1, 2025, the salary schedule was updated accordingly.

Nine classifications were impacted by this requirement as follows: Behavioral Health Advocate I/II, Peer Support Specialist I/II, TCG Gardener, Office Assistant, Office Specialist, Behavioral Health Worker, Medical Assistant and Program Support Supervisor.

**Governing Board of Tri-City Mental Health Authority**  
***Consideration of Resolution No. 800 Adopting a Revised Master Classification and Salary Schedule Reflecting a 2% COLA, Healthcare Worker Minimum Wage Compliance under SB No. 525, and Clinical Compensation Adjustments, Effective July 1, 2025***  
**July 16, 2025**  
**Page 2 of 2**

Fiscal Impact:

All adjustments were accounted for in the Budget for Fiscal Year 2025–2026 adopted by the Governing Board on June 18, 2025.

Recommendation:

Staff recommends the Governing Board adopt Resolution No. 800 approving the revised Authority's Master Classification and Salary Schedule, effective July 1, 2025. This update will implement the 2% COLA, apply market-based adjustments to the Clinical classification series, and ensure compliance with California's healthcare worker minimum wage requirements.

Attachments

*Attachment 10-A:* Resolution No. 800 - Draft

*Exhibit A:* Master Classification and Salary Schedule, effective July 1, 2025

**RESOLUTION NO. 800**

**A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY ADOPTING THE AUTHORITY'S REVISED MASTER CLASSIFICATION AND SALARY SCHEDULE REFLECTING A 2% COLA, HEALTHCARE WORKER MINIMUM WAGE COMPLIANCE UNDER SB NO. 525, AND CLINICAL COMPENSATION ADJUSTMENTS, EFFECTIVE JULY 1, 2025**

**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. Tri-City Mental Health Authority ("Authority" or "TCMHA") desires to update its Master Classification and Salary Schedule to implement a 2% Cost of Living Adjustment (COLA); apply market-based adjustments to the Clinical classification series; and ensure compliance with California's healthcare worker minimum wage requirements under Senate Bill No. 525.

**2. Action**

The Governing Board approves the Authority's revised Master Classification and Salary Schedule effective July 1, 2025, attached herein as 'Exhibit A.', replacing and superseding all previous versions.

**3. Adoption**

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on July 16, 2025, by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

---

JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

---

STEVEN L. FLOWER, GENERAL COUNSEL

---

MICAELA P. OLMOS, RECORDING SECRETARY

**ATTACHMENT 10-A**

**EXHIBIT A**

**TRI-CITY MENTAL HEALTH AUTHORITY  
MASTER CLASSIFICATION AND SALARY SCHEDULE  
EFFECTIVE JULY 1, 2025  
ADOPTED JULY 16, 2025**

<b>Classification</b>	<b>Salary Range</b>
Accountant	31
Accounting Manager	52
Accounting Technician	22
Administrative Assistant	26
Administrative Services Manager	46
Behavioral Health Advocate I	15
Behavioral Health Advocate II	17
Behavioral Health Program Supervisor	43
Behavioral Health Specialist	22
Behavioral Health Specialist Coordinator	30
Behavioral Health Worker	19
Chief Clinical Officer	70
Chief Compliance Officer & Privacy Officer	65
Chief Financial Officer	70
Chief Information Officer	65
Chief Operating Officer/HIPAA Privacy Officer	70
Clinical Program Manager	57
Clinical Supervisor I	51
Clinical Supervisor II	54
Clinical Therapist I	42
Clinical Therapist II	46
Communications Coordinator	32
Community Behavioral Health Trainer	37
Community Capacity Organizer	37
Community Navigator	19
Compliance Administrator	37
Controller	57
Counselor	31
Crisis Intervention & Medication Support Manager	52
Crisis Intervention & Medication Support Supervisor	37
Data Analyst	42
Data Specialist	38
Data Supervisor	46
Deputy Chief Clinical Officer	61
Director of MHSA & Ethnic Services	65
Diversity, Equity & Inclusion Coordinator	37
Electronic Health Records Specialist	37
Executive Director	93
Facilities and Safety Manager	46
Facilities Coordinator	42
Facilities Maintenance Worker	19
Grants Manager	47
Housing Manager	52
Housing Outreach Specialist	26
Housing Supervisor	46
Human Resources Analyst	38
Human Resources Assistant	19
Human Resources Director	60
Human Resources Technician	32
Information Technology Service Desk & Project Supervisor	46
Information Technology Specialist I	30
Information Technology Specialist II	34
Information Technology Systems Administrator & Security Officer	52
Joint Powers Authority (JPA) Administrator/Clerk	52
Manager of Best Practices	52
Master of Social Work/Master of Marriage & Family Therapy Intern	15
Medical Assistant	15

<b>Medical Director</b>	93
<b>MHSA Program Coordinator</b>	42
<b>MHSA Projects Manager</b>	52
<b>Nurse Practitioner</b>	71
<b>Occupational Therapist</b>	50
<b>Office Assistant</b>	15
<b>Office Specialist</b>	19
<b>Peer Support Specialist I</b>	15
<b>Peer Support Specialist II</b>	19
<b>Program Analyst</b>	42
<b>Program Manager</b>	52
<b>Program Supervisor</b>	46
<b>Program Support Supervisor</b>	31
<b>Psychiatric Technician I</b>	22
<b>Psychiatric Technician II</b>	26
<b>Psychiatrist I</b>	82
<b>Psychiatrist II</b>	86
<b>Psychiatrist III</b>	90
<b>Psychologist</b>	46
<b>Quality Assurance Specialist I</b>	38
<b>Quality Assurance Specialist II</b>	42
<b>Quality Assurance Supervisor</b>	46
<b>Residential Services Coordinator</b>	18
<b>Revenue/Billing Manager</b>	52
<b>Senior Accountant</b>	37
<b>Senior Facilities Maintenance Worker</b>	23
<b>Senior Human Resources Analyst</b>	42
<b>Senior Information Technology Specialist</b>	52
<b>Senior Behavioral Health Specialist</b>	26
<b>TCG Gardener</b>	15
<b>WET Supervisor</b>	46

**TRI-CITY MENTAL HEALTH AUTHORITY  
MASTER CLASSIFICATION AND SALARY SCHEDULE  
EFFECTIVE JULY 1, 2025  
ADOPTED JULY 16, 2025**

Salary Range	Annually						Monthly						Per Pay Period						Hourly						
	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	
15				51,993.41	54,593.22	57,322.87				4,332.78	4,549.44	4,776.91				1,999.75	2,099.74	2,204.73				24,996.8	26,246.7	27,559.1	
16			50,755.46	53,293.32	55,958.05	58,755.80			4,229.62	4,441.11	4,663.17	4,896.32			1,952.13	2,049.74	2,152.23	2,259.84			24,401.7	25,621.8	26,902.9	28,248.0	
17			52,024.39	54,625.68	57,357.03	60,224.80			4,335.37	4,552.14	4,779.75	5,018.73			2,000.94	2,100.99	2,206.04	2,316.34			25,011.7	26,262.3	27,575.5	28,954.2	
18		50,785.80	53,325.14	55,991.36	58,790.81	61,730.50		4,232.15	4,443.76	4,665.95	4,899.23	5,144.21			2,050.97	2,153.51	2,261.18	2,374.25		24,416.3	25,637.1	26,918.9	28,264.8	29,678.1	
19		52,055.37	54,658.14	57,390.98	60,260.65	63,273.75		4,337.95	4,554.85	4,782.58	5,021.72	5,272.81			2,002.13	2,102.24	2,207.35	2,317.72	2,433.61		25,026.6	26,278.0	27,591.8	28,971.5	30,420.1
20	50,815.93	53,356.75	56,024.67	58,825.82	61,767.20	64,855.40	4,234.66	4,446.40	4,668.72	4,902.15	5,147.27	5,404.62	1,954.46	2,052.18	2,154.79	2,262.53	2,375.66	2,494.44		24,430.7	25,652.3	26,934.9	28,281.6	29,695.8	31,180.5
21	52,086.34	54,690.60	57,425.14	60,296.51	63,311.30	66,476.94	4,340.53	4,557.55	4,785.43	5,024.71	5,275.94	5,539.75	2,003.32	2,103.48	2,208.66	2,319.10	2,435.05	2,556.81	25,041.5	26,293.6	27,608.2	28,988.7	30,438.1	31,960.1	
22	53,388.58	56,057.98	58,860.82	61,803.91	64,894.02	68,138.79	4,449.05	4,671.50	4,905.07	5,150.33	5,407.83	5,678.23	2,053.41	2,156.08	2,263.88	2,377.07	2,495.92	2,620.72	25,667.6	26,951.0	28,298.5	29,713.4	31,199.0	32,759.0	
23	54,723.28	57,459.50	60,332.36	63,349.07	66,516.40	69,842.22	4,560.27	4,788.29	5,027.70	5,279.09	5,543.03	5,820.19	2,104.74	2,209.98	2,320.48	2,436.50	2,558.32	2,686.24	26,309.3	27,624.8	29,005.9	30,456.3	31,979.0	33,578.0	
24	56,091.29	58,895.83	61,840.61	64,932.63	68,179.31	71,588.30	4,674.27	4,907.99	5,153.38	5,411.05	5,681.61	5,965.69	2,157.36	2,265.22	2,378.48	2,497.41	2,622.28	2,753.40	26,967.0	28,315.3	29,731.1	31,217.6	32,778.5	34,417.5	
25	57,493.66	60,368.22	63,386.62	66,556.08	69,883.81	73,378.08	4,791.14	5,030.68	5,282.22	5,546.34	5,823.65	6,114.84	2,211.29	2,321.85	2,437.95	2,559.85	2,687.84	2,822.23	27,641.2	29,023.2	30,474.3	31,998.1	33,598.0	35,277.9	
26	58,931.05	61,877.52	64,971.45	68,220.05	71,630.94	75,212.42	4,910.92	5,156.46	5,414.29	5,685.00	5,969.25	6,267.70	2,266.58	2,379.90	2,498.90	2,623.85	2,755.04	2,892.79	28,332.2	29,748.8	31,236.3	32,798.1	34,438.0	36,159.8	
27	60,404.29	63,424.38	66,595.75	69,925.39	73,421.79	77,092.79	5,033.69	5,285.37	5,549.65	5,827.12	6,118.48	6,424.40	2,323.24	2,439.40	2,561.38	2,689.44	2,823.91	2,965.11	29,040.5	30,492.5	32,017.2	33,618.0	35,298.9	37,063.8	
28	61,914.44	65,010.07	68,260.57	71,673.59	75,257.18	79,020.05	5,159.54	5,417.51	5,688.38	5,972.80	6,271.43	6,585.00	2,381.32	2,500.39	2,625.41	2,756.68	2,894.51	3,039.23	29,766.6	31,254.8	32,817.6	34,458.5	36,181.3	37,990.4	
29	63,462.15	66,635.21	69,966.97	73,465.49	77,138.62	80,995.69	5,288.51	5,552.93	5,830.58	6,122.12	6,428.22	6,749.64	2,440.85	2,562.89	2,691.04	2,825.60	2,966.87	3,115.22	30,510.6	32,036.2	33,638.0	35,319.9	37,085.9	38,940.2	
30	65,048.68	68,301.09	71,716.23	75,302.16	79,067.15	83,020.54	5,420.72	5,691.76	5,976.35	6,275.18	6,588.93	6,918.38	2,501.87	2,626.97	2,758.32	2,896.24	3,041.04	3,193.10	31,273.4	32,837.1	34,479.0	36,203.0	38,013.1	39,913.7	
31				77,184.66	81,043.85	85,096.10				6,432.05	6,735.65	7,091.34				2,968.64	3,117.07	3,272.93				37,108.0	38,963.4	40,911.6	
32	68,341.83	71,758.88	75,346.93	79,114.25	83,069.98	87,223.43	5,695.15	5,979.91	6,278.91	6,592.85	6,922.50	7,268.62	2,628.53	2,759.96	2,897.96	3,042.86	3,195.00	3,354.75	32,856.6	34,499.5	36,224.5	38,035.7	39,937.5	41,934.3	
33	70,050.35	73,552.90	77,230.48	81,092.01	85,146.60	89,404.01	5,837.53	6,129.41	6,435.87	6,757.67	7,095.55	7,450.33	2,694.24	2,828.96	2,970.40	3,118.92	3,274.87	3,438.62	33,678.1	35,362.0	37,130.0	38,986.5	40,935.9	42,982.7	
34	71,801.73	75,391.69	79,161.35	83,119.41	87,275.41	91,639.12	5,983.48	6,282.64	6,596.78	6,926.62	7,272.95	7,636.59	2,761.61	2,899.68	3,044.67	3,196.90	3,356.75	3,524.58	34,520.1	36,246.0	38,058.3	39,961.3	41,959.3	44,057.3	
35	73,596.61	77,276.52	81,140.38	85,197.30	89,457.26	93,930.02	6,133.05	6,439.71	6,761.70	7,099.78	7,454.77	7,827.50	2,830.64	2,972.17	3,120.78	3,276.82	3,440.66	3,612.69	35,383.0	37,152.2	39,009.8	40,960.2	43,008.3	45,158.7	
36	75,436.67	79,208.45	83,168.84	87,327.39	91,693.64	96,278.42	6,286.39	6,600.70	6,930.74	7,277.28	7,641.14	8,023.20	2,901.41	3,046.48	3,198.80	3,358.75	3,526.68	3,703.02	36,267.6	38,081.0	39,985.0	41,984.3	44,083.5	46,287.7	
37	77,322.56	81,188.75	85,248.01	89,510.52	93,986.03	98,685.38	6,443.55	6,765.73	7,104.00	7,459.21	7,832.17	8,223.78	2,973.94	3,122.64	3,278.77	3,442.71	3,614.85	3,795.59	37,174.3	39,033.1	40,984.6	43,039.9	45,185.6	47,444.9	
38	79,255.55	83,218.27	87,379.37	91,748.17	96,335.70	101,152.37	6,604.63	6,934.86	7,281.61	7,645.68	8,027.98	8,429.36	3,048.29	3,200.70	3,360.74	3,528.78	3,705.22	3,890.48	38,103.6	40,008.8	42,009.3	44,109.7	46,315.2	48,630.9	
39	81,236.91	85,298.93	89,563.77	94,042.04	98,744.14	103,681.32	6,769.74	7,108.24	7,463.65	7,836.84	8,228.68	8,640.11	3,124.50	3,280.73	3,444.76	3,617.00	3,797.85	3,987.74	39,056.2	41,009.1	43,059.5	45,212.5	47,473.1	49,846.8	
40	83,267.92	87,431.35	91,802.90	96,392.99	101,212.63	106,273.28	6,938.99	7,285.95	7,650.24	8,032.75	8,434.39	8,856.11	3,202.61	3,362.74	3,530.88	3,707.42	3,892.79	4,087.43	40,032.7	42,034.3	44,136.0	46,342.8	48,659.9	51,092.9	
41	85,349.63	89,617.02	94,097.84	98,802.91	103,743.06	108,930.16	7,112.47	7,468.09	7,841.49	8,233.58	8,645.25	9,077.51	3,282.68	3,446.81	3,619.15	3,800.11	3,990.12	4,189.62	41,033.5	43,085.1	45,239.3	47,501.4	49,876.5	52,370.4	
42	87,483.33	91,857.43	96,450.48	101,272.88	106,336.50	111,653.44	7,290.28	7,654.79	8,037.54	8,439.41	8,861.38	9,304.45	3,364.74	3,532.98	3,709.63	3,895.11	4,089.87	4,294.36	42,059.3	44,162.2	46,370.4	48,688.9	51,123.3	53,679.5	
43	89,670.48	94,153.85	98,861.68	103,804.80	108,994.87	114,444.62	7,472.54	7,846.15	8,238.47	8,650.40	9,082.91	9,537.05	3,448.86	3,621.30	3,802.37	3,992.49	4,192.11	4,401.72	43,110.8	45,266.3	47,529.7	49,906.2	52,401.4	55,021.5	
44	91,912.17	96,507.77	101,333.13	106,399.94	111,719.85	117,305.81	7,659.35	8,042.31	8,444.43	8,866.66	9,309.99	9,775.48	3,535.08	3,711.84	3,897.43	4,092.31	4,296.92	4,511.76	44,188.5	46,398.0	48,717.9	51,153.8	53,711.5	56,397.0	
45	94,210.07	98,920.45	103,866.53	109,059.79	114,512.72	120,238.50	7,850.84	8,243.37	8,655.54	9,088.32	9,542.73	10,019.87	3,623.46	3,804.63	3,994.87	4,194.61	4,404.34	4,624.56	45,293.3	47,557.9	49,935.8	52,432.6	55,054.2	57,807.0	
46	96,565.26	101,393.60	106,463.16	111,786.26	117,375.61	123,244.38	8,047.11	8,449.47	8,871.93	9,315.52	9,781.30	10,270.37	3,714.05	3,899.75	4,094.74	4,299.47	4,514.45	4,740.17	46,425.6	48,746.9	51,184.2	53,743.4	56,430.6	59,252.1	
47	98,979.43	103,928.27	109,124.71	114,581.04	120,310.00	126,325.58	8,248.29	8,660.69	9,093.73	9,548.42	10,025.83	10,527.13	3,806.90	3,997.24	4,197.10	4,406.96	4,627.31	4,858.68	47,586.3	49,965.5	52,463.8	55,070.0	57,841.3	60,733.5	
48	101,453.85	106,526.60	111,852.87	117,445.41	123,317.79	129,483.58	8,454.49	8,877.22	9,321.07	9,787.12	10,276.48	10,790.30	3,902.07	4,092.18	4,302.03	4,517.13	4,742.99	4,980.14	48,759.9	51,214.7	53,775.4	56,464.1	59,287.4	62,251.7	
49	103,990.22	109,189.63	114,649.14	120,381.71	126,400.68	132,720.72	8,665.85	9,099.14	9,554.10	10,031.81	10,533.39	11,060.06	3,999.62	4,199.60	4,409.58	4,630.07	4,861.56	5,104.64	49,953.5	52,495.0	55,119.8	57,875.8	60,769.6	63,808.0	
50	106,590.03	111,919.49	117,515.42	123,391.20	129,560.81	136,038.69	8,882.50	9,326.62	9,792.95	10,282.60	10,796.73	11,336.56	4,099.62	4,304.60	4,519.82	4,745.82	4,983.11	5,232.26	51,245.2	53,807.4	56,497.8	59,327.6	62,288.9	65,403.2	
51	109,254.76	114,717.46	120,453.20	126,476.00	132,799.85	139,439.83	9,104.56	9,559.79	10,037.77	10,539.67	11,066.65	11,619.99	4,202.11	4,412.21	4,632.82	4,864.46	5,107.69	5,363.07	52,526.3	55,152.6	57,910.2	60,805.8	63,846.1	67,038.4	
52	111,986.11	117,585.44	123,464.60	129,637.82	136,119.73	142,925.83	9,332.18	9,798.79																	

**TRI-CITY MENTAL HEALTH AUTHORITY**  
**MASTER CLASSIFICATION AND SALARY SCHEDULE**  
**EFFECTIVE JULY 1, 2025**  
**ADOPTED JULY 16, 2025**

Salary Range	Annually						Monthly						Per Pay Period						Hourly					
	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6
<b>90</b>	286,200.87	300,510.85	315,536.45	331,313.30	347,878.96	365,272.90	23,850.07	25,042.57	26,294.70	27,609.44	28,989.91	30,439.41	11,007.73	11,558.11	12,136.02	12,742.82	13,379.96	14,048.96	137.5966	144.4764	151.7002	159.2852	167.2495	175.6120
<b>91</b>	293,355.75	308,023.65	323,424.77	339,596.03	356,575.83	374,404.69	24,446.31	25,668.64	26,952.06	28,299.67	29,714.65	31,200.39	11,282.91	11,847.06	12,439.41	13,061.39	13,714.45	14,400.18	141.0364	148.0883	155.4927	163.2673	171.4307	180.0023
<b>92</b>	300,689.70	315,724.21	331,510.40	348,086.03	365,490.37	383,764.77	25,057.48	26,310.35	27,625.87	29,007.17	30,457.53	31,980.40	11,564.99	12,143.24	12,750.40	13,387.92	14,057.32	14,760.18	144.5624	151.7905	159.3800	167.3491	175.7165	184.5023
<b>93</b>	308,206.95	323,617.41	339,798.21	356,788.20	374,627.46	393,358.85	25,683.91	26,968.12	28,316.52	29,732.35	31,218.96	32,779.90	11,854.11	12,446.82	13,069.16	13,722.62	14,408.75	15,129.19	148.1764	155.5853	163.3645	171.5328	180.1094	189.1148
<b>94</b>	315,912.18	331,707.70	348,293.10	365,707.83	383,993.26	403,192.90	26,326.02	27,642.31	29,024.43	30,475.65	31,999.44	33,599.41	12,150.47	12,757.99	13,395.89	14,065.69	14,768.97	15,507.42	151.8809	159.4749	167.4486	175.8211	184.6121	193.8427
<b>95</b>	323,810.05	340,000.40	357,000.57	374,850.44	393,593.08	413,272.62	26,984.17	28,333.37	29,750.05	31,237.54	32,799.42	34,439.38	12,454.23	13,076.94	13,730.79	14,417.32	15,138.20	15,895.10	155.6779	163.4617	171.6349	180.2166	189.2274	198.6888
<b>96</b>	331,905.23	348,500.38	365,925.51	384,221.76	403,432.85	423,604.60	27,658.77	29,041.70	30,493.79	32,018.48	33,619.40	35,300.38	12,765.59	13,403.86	14,074.06	14,777.76	15,516.65	16,292.48	159.5698	167.5483	175.9257	184.7220	193.9581	203.6561
<b>97</b>	340,202.80	357,212.94	375,073.63	393,827.30	413,518.72	434,194.56	28,350.23	29,767.75	31,256.14	32,818.94	34,459.89	36,182.88	13,084.72	13,738.96	14,425.91	15,147.20	15,904.57	16,699.79	163.5590	171.7370	180.3239	189.3401	198.8071	208.7474
<b>98</b>	348,707.87	366,143.39	384,450.47	403,673.01	423,856.64	445,049.52	29,058.99	30,511.95	32,037.54	33,639.42	35,321.39	37,087.46	13,411.84	14,082.44	14,786.56	15,525.89	16,302.18	17,117.29	167.6480	176.0305	184.8320	194.0736	203.7772	213.9661
<b>99</b>	357,425.53	375,296.83	394,061.74	413,764.83	434,452.97	456,175.82	29,785.46	31,274.74	32,838.48	34,480.40	36,204.41	38,014.65	13,747.14	14,434.49	15,156.22	15,914.03	16,709.73	17,545.22	171.8392	180.4312	189.4528	198.9254	208.8716	219.3153
<b>100</b>	366,361.28	384,679.39	403,913.18	424,108.90	445,314.29	467,580.06	30,530.11	32,056.62	33,659.43	35,342.41	37,109.52	38,965.01	14,090.82	14,795.36	15,535.12	16,311.88	17,127.47	17,983.85	176.1352	184.9420	194.1890	203.8985	214.0934	224.7981



**Tri-City Mental Health Authority  
AGENDA REPORT**

**DATE:** July 16, 2025

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

**FROM:** Ontson Placide, LMFT, Executive Director

**BY:** Brian Cesario, IT Systems Administrator

**SUBJECT:** Consideration of Resolution No. 801 Awarding the Agreement for Laptop Fleet Refresh Services to Intelli-Tech in the Amount of \$302,985,00; and Authorizing the Executive Director to Execute the Agreement

---

Summary:

In May of 2025, Tri-City Mental Health Authority issued a Request for Proposals (RFP) to obtain proposals from vendors for a refresh of its agency-wide laptop fleet. Proposals were evaluated through a formal selection process; and the selected vendor proposal is now presented to the Governing Board for review, approval, and contract award.

Background:

In May of 2025, staff initiated a Request for Proposals process to replace aging laptops across the agency. The RFP called for new devices meeting minimum performance specifications and included delivery, warranty, and support service requirements to ensure continuity of operations. The RFP was posted on the agency website at [www.tricitymhs.org/](http://www.tricitymhs.org/) as well as on our social media feeds. In addition, the agency's regular IT vendors were invited to participate in the process. Two proposals were received:

<b>Proposals Received for 250 Laptops</b>		
	<b>Per unit</b>	<b>Total cost</b>
Intelli-Tech	\$1,211.94	\$302,985.00
Insight Direct USA	\$1,055.15	\$277,987.50

Based on pricing, specifications, warranty terms, and vendor capacity to deliver within required timeframes, Intelli-Tech was selected. It is recommended that the Governing Board award the contract to Intelli-Tech for \$302,985, with delivery and deployment planned to begin within 2-3 weeks of placing the order.

While the selected proposal is \$24,997 higher than the second-lowest bid, it offers significant operational advantages. The vendor is an HP Authorized Service Center with an existing Business Associate Agreement (BAA) in place, enabling secure handling of device repairs.

**Governing Board of Tri-City Mental Health Authority**  
***Consideration of Resolution No. 801 Awarding the Agreement for Laptop Fleet Refresh Services to Intelli-Tech in the Amount of \$302,985,00; and Authorizing the Executive Director to Execute the Agreement***  
**July 16, 2025**  
**Page 2 of 2**

Intelli-Tech's proposal includes direct pickup and delivery of devices and integrated ticket tracking, reducing time and administrative overhead for IT staff. In contrast, the lower-cost option would require separate coordination with HP, a new BAA, and increased in-house effort to manage repairs.

Fiscal Impact:

The selected proposal for 250 laptops in the amount of \$302,985. This purchase has been allocated in the FY 25/26 budget and in the previously approved CFTN plan.

Recommendation:

Staff recommends that the Governing Board adopt Resolution No. 801 awarding the agreement with Intelli-Tech for the purchase of the agency's laptop fleet refresh in the amount of \$302,985, effective July 16, 2025, and authorizing the Executive Director to execute the Agreement.

Attachments

*Attachment 11-A:* Resolution No. 801 - Draft

*Attachment 11-B:* TCMHA-Intelli-Tech Agreement for Laptop Fleet Refresh-Effective July 16, 2025

**RESOLUTION NO. 801**

**A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY AWARDING AN AGREEMENT TO INTELLI-TECH FOR LAPTOP FLEET REFRESH IN THE AMOUNT \$302,985,00; AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AGREEMENT**

**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. Tri-City Mental Health Authority (“TCMHA” or “Authority”) desires to replace aging laptops across the agency, and in May of 2025 issued a Request for Proposals (RFP) for Laptop Fleet Refresh.

B. After a competitive bid selection process, the Authority desires to award the contract to Intelli-Tech for 250 laptops in the amount of \$302,985.00.

C. The funding for the Laptop Fleet Refresh is allocated in the Budget for Fiscal Year 2025-26, under the Capital Facilities Technology Plan (CFTN) Plan.

**2. Action**

The Governing Board awards the agreement for Laptop Fleet Refresh to Intelli-Tech, in substantially the same form as presented at its meeting on July 16, 2025, in the amount of \$302,985.00, effective July 16, 2025, and authorizes the Executive Director to execute the Agreement.

**3. Adoption**

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on July 16, 2025 by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

---

JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

---

STEVEN L. FLOWER, GENERAL COUNSEL

---

MICAELA P. OLMOS, RECORDING SECRETARY  
**ATTACHMENT 11-A**



HOPE. WELLNESS. COMMUNITY.

Let's find it together.

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

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

**INDEPENDENT CONTRACTOR AGREEMENT**  
**BETWEEN THE**  
**TRI-CITY MENTAL HEALTH AUTHORITY**  
**AND**  
**INTELLI-TECH**  
**DATED**  
**JULY 16, 2025**

**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 & Family**

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) 242-7691

**ATTACHMENT 11-B**

**TABLE OF CONTENTS**

	<u>Section Page</u>
1. Parties and Date. ....	1
2. Independent Contractor. ....	1
3. Scope of Services. ....	1
4. Performance of Services. ....	1
5. Subcontractors. ....	2
6. Time and Location of Work. ....	2
7. Terms. ....	2
8. Compensation. ....	2
9. Termination. ....	3
10. Licenses. ....	4
11. Proprietary Information. ....	5
12. Audits. ....	5
13. Conflict of Interest. ....	5
14. General Terms and Conditions. ....	5
A. Indemnity. ....	5
B. Insurance. ....	5
C. Non-Discrimination and Equal Employment Opportunity. ....	6
D. Prohibition on Assignment. ....	6
E. Changes to the Agreement. ....	6
F. Records. ....	7
G. Business Associate Agreement. ....	7
H. Contractor Attestation. ....	7
I. Governing Law, Jurisdiction, and Venue. ....	7
J. Non-Use of Names. ....	7
K. No Third Party Beneficiaries. ....	7
15. Representative and Notice. ....	7
16. Exhibits. ....	8
17. Effective Date. ....	8
18. Entire Agreement. ....	8
19. Severability. ....	8
20. Waiver. ....	8
21. Execution. ....	9

## AGREEMENT

### 1. PARTIES AND DATE

THIS AGREEMENT (hereinafter “Contract” or “Agreement”) is made and entered into on the 16th Day of July, 2025 by and between the TRI-CITY MENTAL HEALTH AUTHORITY, a joint powers agency organized under the laws of the State of California with its administrative office at 1717 N. Indian Hill Boulevard, Suite B, Claremont, California 91711 (hereinafter “TCMHA” or “Authority”) and INTELLI-TECH, California corporation, with its principal place of business at 1652 Yeager Avenue, La Verne, CA 91750 (hereinafter “CONTRACTOR”). TCMHA and CONTRACTOR are sometimes individually referred to as a “Party” and collectively as “Parties.”

### 2. INDEPENDENT CONTRACTOR

The express intention of the parties is that CONTRACTOR is an independent contractor and not an employee, agent, joint venture or partner of TCMHA. Nothing in this Agreement shall be interpreted or construed as creating or establishing the relationship of employee and employer between CONTRACTOR and TCMHA or any employee or agent of CONTRACTOR. At all times CONTRACTOR shall be an independent contractor and CONTRACTOR shall have no power to incur any debt, obligation, or liability on behalf of TCMHA without the express written consent of TCMHA. Neither TCMHA nor any of his agents shall have control over the conduct of CONTRACTOR or any of CONTRACTOR’s employees, except as set forth in this Agreement. In executing this Agreement, CONTRACTOR certifies that no one who has or will have any financial interest under this Agreement is an officer or employee of TCMHA.

### 3. SCOPE OF SERVICES

CONTRACTOR shall provide the specified services and/or materials as set forth in ‘Exhibit A’ of this Agreement and the CONTRACTOR’s Proposal for Laptop Fleet Refresh Services incorporated into and made a part of this Agreement as ‘Exhibit B.’

### 4. PERFORMANCE OF SERVICES

CONTRACTOR reserves the sole right to control or direct the manner in which services are to be performed. CONTRACTOR shall retain the right to perform services for other entities during the term of this Agreement, so long as they are not competitive with the services to be performed under this Agreement. CONTRACTOR shall neither solicit remuneration nor accept any fees or commissions from any third party in connection with the Laptop Fleet Refresh provided to TCMHA under this Agreement without the expressed written permission of TCMHA. CONTRACTOR warrants that it is not a Party to any other existing agreement which would prevent CONTRACTOR from entering into this Agreement or which would adversely affect CONTRACTOR’s ability to fully and faithfully, without any conflict of interest, perform the Services under this Agreement. In addition, CONTRACTOR shall provide Laptop Fleet Refresh Services in a manner consistent with that level of care and skill ordinarily exercised by members of the profession currently practicing under similar conditions and in similar locations and in accordance with all applicable, current industry standards, regulations codes and statutes. Unless the means or methods of performing a task are specified elsewhere in this Agreement, CONTRACTOR shall employ methods that are generally accepted and used by the industry. All

work shall comply with the applicable licensing, federal, state, and/or all local or city ordinances, codes, rules, orders, regulations, and statutes affecting any services performed under this Agreement. Compliance with this section by CONTRACTOR shall not in any way excuse or limit the CONTRACTOR's obligations to fully comply with all other terms in this Agreement.

## **5. SUBCONTRACTORS**

Neither Party hereto may assign this Agreement, nor will CONTRACTOR subcontract any service requested hereunder to contractor(s) unless consented to in writing by the Executive Director of TCMHA or Designee. After approval from TCMHA, any work or services subcontracted hereunder shall be specified by written contract or agreement and shall be subject to each provision of this Agreement.

## **6. TIME AND LOCATION OF WORK**

CONTRACTOR shall perform the services required by this Agreement at any place or location and at any time as CONTRACTOR deems necessary and appropriate, so long as the services are provided within the manner and time frames outlined in 'Exhibit A' and 'Exhibit B.'

## **7. TERMS**

The services and materials furnished under this Agreement shall commence on July 16, 2025 and shall be and remain in full force and effect until the completion of Laptop Fleet Refresh Services for Fiscal Year ending June 30, 2026; or until amended or terminated in accordance with the provisions of Section 9 below.

## **8. COMPENSATION**

For the full performance of this Agreement:

**A.** The CONTRACTOR will bill based on work performed and completion/delivery of services/goods as detailed in Section 3 of this Agreement and only upon satisfactory delivery/completion of goods/services in a manner consistent with professional and industry standards for the area in which CONTRACTOR operates.

**B.** TCMHA shall pay CONTRACTOR an amount not to exceed amount as stated in 'Exhibit B'. TCMHA is not responsible for paying for any work done by CONTRACTOR or any subcontractor above and beyond the amount listed in the CONTRACTOR's Proposal for Laptop Fleet Refresh Services ('Exhibit B'), unless agreed upon in writing by TCMHA's Executive Director.

**C.** CONTRACTOR acknowledges and agrees that, as an independent contractor, the CONTRACTOR will be responsible for paying all required state and federal income taxes, social security contributions, and other mandatory taxes and contributions. TCMHA shall neither withhold any amounts from the Compensation for such taxes, nor pay such taxes on CONTRACTOR's behalf, nor reimburse for any of CONTRACTOR's costs or expenses to deliver any services/goods including, without limitation, all fees, fines, licenses, bonds, or taxes required of or imposed upon CONTRACTOR. TCMHA shall not be responsible for any interest or late charges on any payments from TCMHA to CONTRACTOR.

**D.** CONTRACTOR is responsible for monitoring its own forces/employees/agents/subcontractors to ensure delivery of goods/services within the terms of this Agreement. TCMHA will not accept or compensate CONTRACTOR for incomplete goods/services.

## **9. TERMINATION**

This Agreement may be terminated only as follows:

**A.** Written Notice. TCMHA may terminate this Agreement at any time, without cause, upon ten days (10) calendar days' prior written notice to the CONTRACTOR. CONTRACTOR agrees to cooperate fully in any such transition, including the transfer of records and/or work performed. TCMHA will reimburse CONTRACTOR for its satisfactorily-completed services up to the date specified in the notice of termination and for demobilization costs reasonably incurred by CONTRACTOR after that date.

**B.** Neglect or Refusal to Comply. If at any time, CONTRACTOR fails to supply suitable equipment, an adequate working force, or material of proper quality, or shall fail in any respect to perform any work with the diligence and force specified and intended in and by the terms of the contract, notice thereof will be provided in writing to CONTRACTOR. Should the CONTRACTOR neglect or refuse to provide means for satisfactory compliance with the contract, as directed by the TCMHA Representative, within the time specified in such notice, TCMHA in any such case shall have the power to terminate all or any portion of the contract.

**C.** Breach. TCMHA, in its sole discretion, may terminate this Agreement "for cause" effective upon written notice to CONTRACTOR if CONTRACTOR has committed a material default under, or a breach of, this Agreement or has committed an act of gross misconduct. CONTRACTOR's failure to complete Laptop Fleet Refresh Services on a timely basis shall constitute a material breach of this Agreement. For the purposes of this Agreement, the term "act of gross misconduct" shall mean the commission of any theft offense, misappropriation of funds, dishonest or fraudulent conduct, or any violation of any of the provisions under this Agreement.

**D.** Non-payment. CONTRACTOR, in its sole discretion, may terminate this Agreement effective upon written notice to TCMHA if TCMHA fails to pay the Compensation as defined in Section 9 (other than amounts which are subject to a good faith dispute between the parties) to CONTRACTOR within thirty (30) calendar days of the applicable payment's due date.

**E.** Effect of Termination. No termination of this Agreement shall affect or impair CONTRACTOR's right to receive compensation earned for work satisfactorily completed through the effective date of termination. In the event of termination, CONTRACTOR shall immediately deliver all work product to TCMHA, which work product shall be consistent with all progress payments made to the date of termination.

## **10. LICENSES.**

CONTRACTOR declares that CONTRACTOR has a complied with all federal, state, and local business permits and licensing requirements necessary to conduct business.

## 11. PROPRIETARY INFORMATION.

The CONTRACTOR agrees that all information, whether or not in writing, of a private, secret or confidential nature concerning TCMHA's business, business relationships or financial affairs (collectively, "Proprietary Information") is and shall be the exclusive property of TCMHA. The CONTRACTOR will not disclose any Proprietary Information to any person or entity, other than persons who have a need to know about such information in order for CONTRACTOR to render services to TCMHA and employees of TCMHA, without written approval by Executive Director of TCMHA, either during or after its engagement with TCMHA, unless and until such Proprietary Information has become public knowledge without fault by the CONTRACTOR.

## 12. AUDITS

The CONTRACTOR shall maintain accounts and records, including all working papers, personnel, property, and financial records, adequate to identify and account for all costs pertaining to the Contract and such other records as may be deemed necessary by TCMHA to assure proper accounting for all project funds, both Federal and non-Federal shares. These records must be made available for Marketing purposes to TCMHA or any authorized representative, and must be retained, at the CONTRACTOR's expense, for a minimum of seven (7) years, unless CONTRACTOR is notified in writing by TCMHA of the need to extend the retention period.

## 13. CONFLICT OF INTEREST

CONTRACTOR hereby certifies that no elected/appointed official or employee of the Authority is financially interested, directly or indirectly, in the provision of goods/services specified in this Agreement. Furthermore, CONTRACTOR represents and warrants to TCMHA that it has not employed or retained any person or company employed by the Authority to solicit or secure the award of this Agreement and that it has not offered to pay, paid, or agreed to pay any person any fee, commission, percentage, brokerage fee, or gift of any kind contingent upon or in connection with, the award of the Agreement.

## 14. GENERAL TERMS AND CONDITIONS

### A. Indemnity.

a. To the maximum extent permitted by law, CONTRACTOR shall defend, indemnify, and hold TCMHA, its officials, officers, employees, volunteers, and agents serving as independent contractors in the role of TCMHA officials (collectively "Indemnitees") free and harmless from any and all claims, demands, causes of action, costs, expenses, liability, loss, damage or injury, in law or equity, to property or persons, including wrongful death, in any manner arising out of or incident to any acts or omissions of CONTRACTOR, its employees, its agents, or its subcontractors in connection with the performance of this Agreement, including without limitation the payment of all consequential damages and attorneys' fees and other related costs and expenses, except for such loss or damage arising from the sole negligence or willful misconduct of TCMHA. With respect to any and all such aforesaid suits, actions, or other legal proceedings of every kind that may be brought or instituted against Indemnitees, Contractor shall defend Indemnitees, at CONTRACTOR's own cost, expense, and risk, and shall pay and satisfy any judgment, award, or decree that may be rendered against Indemnitees. CONTRACTOR shall reimburse TCMHA and its directors, officials, officers, employees, agents and/or volunteers, for

any and all legal expenses and costs incurred by each of them in connection therewith or in enforcing the indemnity herein provided. CONTRACTOR's obligation to indemnify shall not be restricted to insurance proceeds, if any, received by CONTRACTOR, TCMHA, its directors, officials, officers, employees, agents or volunteers. All duties of CONTRACTOR under this Section shall survive termination of this Agreement.

**b.** CONTRACTOR must obtain executed indemnity agreements with provisions identical to those in Section 14.A.a from each and every subcontractor or any other person or entity involved by, for, with or on behalf of CONTRACTOR in the performance of the Services. If CONTRACTOR fails to obtain such indemnities, CONTRACTOR shall be fully responsible and indemnify, hold harmless, and defend the Indemnitees from and against any and all Claims in law or equity, whether actual, alleged, or threatened, arising or claimed to arise out of, pertaining to, or relating to the acts or omissions of CONTRACTOR's subcontractor, its officers, agents, servants, employees, subcontractors, materialmen, contractors, or their respective officers, agents, servants or employees (or any entity or individual that CONTRACTOR's subcontractor shall bear the legal liability thereof) in the performance of this Agreement, including the Indemnitees' active or passive negligence, except for Claims arising from the sole negligence or willful misconduct of the Indemnitees, as determined by final arbitration or court decision or by the agreement of the Parties.

**B. Insurance.** CONTRACTOR shall obtain and file with TCMHA, at its expense, a certificate of insurance before commencing any services under this Agreement as follows:

**a. Commercial General Liability And Property Damage Insurance:** General Liability and Property Damage Combined. \$2,000,000.00 per occurrence including comprehensive form, personal injury, broad form personal damage, contractual and premises/operation, all on an occurrence basis. If an aggregate limit exists, it shall apply separately or be no less than two (2) times the occurrence limit.

**b. Errors And Omissions Insurance:** \$1,000,000.00 per occurrence, and \$3,000,000 in the aggregate.

**c. Workers Compensation Insurance:** Minimum statutory limits.

**d. Automobile Insurance:** \$1,000,000.00 per occurrence.

**e. Notice Of Cancellation:** The TCMHA requires 30 days written notice of cancellation. Additionally, the notice statement on the certificate should not include the wording "endeavor to" or "but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives."

**f. Certificate Of Insurance:** Prior to commencement of services, evidence of insurance coverage must be shown by a properly executed certificate of insurance by an insurer licensed to do business in California, satisfactory to TCMHA, and it shall name "*Tri-City Mental Health Authority, its elective and appointed officers, employees, volunteers, and contractors who serve as TCMHA officers, officials, or staff*" as additional insureds. All coverage for subcontractors shall be subject to all of the requirements stated herein. All subcontractors shall be protected against risk of loss by maintaining insurance in the categories and the limits required herein. Subcontractors shall name TCMHA and CONTRACTOR as additional insured.

**g. Delivery of Certificates and Endorsements:** To prevent delay and ensure compliance with this Agreement, the insurance certificates and endorsements must be submitted to:

Tri-City Mental Health Authority  
Attn: JPA Administrator/Clerk  
1717 N. Indian Hill Boulevard, #B  
Claremont, CA 91711-2788

**C. Non-Discrimination and Equal Employment Opportunity.** In the performance of this Agreement, CONTRACTOR shall not discriminate against any employee, subcontractor, or applicant for employment because of race, color, creed, religion, sex, marital status, national origin, ancestry, age, physical or mental disability, medical condition, sexual orientation or gender identity. CONTRACTOR will take affirmative action to ensure that subcontractors and applicants are employed, and that employees are treated during employment, without regard to their race, color, creed, religion, sex, marital status, national origin, ancestry, age, physical or mental handicap, medical condition, sexual orientation or gender identity.

**D. Prohibition on Assignment.** This Agreement shall not be assigned or transferred without advance written consent of TCMHA.

**E. Changes to the Agreement.** This Agreement shall not be assigned or transferred. No changes or variations of any kind are authorized without the written consent of the Executive Director. This Agreement may only be amended by a written instrument signed by both Parties. The CONTRACTOR agrees that any written change or changes in compensation after the signing of this Agreement shall not affect the validity or scope of this Agreement and shall be deemed to be a supplement to this Agreement and shall specify any changes in the Scope of Services.

**F. Records.** All reports, data, maps, models, charts, studies, surveys, calculations, photographs, memoranda, plans, studies, specifications, records, files, or any other documents or materials, in electronic or any other form, that are prepared or obtained pursuant to this Agreement and that relate to the matters covered hereunder shall be and remain the property of TCMHA. CONTRACTOR will be responsible for and maintain such records during the term of this Agreement. CONTRACTOR hereby agrees to deliver those documents to TCMHA at any time upon demand of TCMHA. It is understood and agreed that the documents and other materials, including but not limited to those described above, prepared pursuant to this Agreement are prepared specifically for TCMHA and are not necessarily suitable for any future or other use. Failure by CONTRACTOR to deliver these documents to TCMHA within a reasonable time period or as specified by TCMHA shall be a material breach of this Agreement. TCMHA and CONTRACTOR agree that until final approval by TCMHA, all data, reports and other documents are preliminary drafts not kept by TCMHA in the ordinary course of business and will not be disclosed to third parties without prior written consent of both parties. All work products submitted to TCMHA pursuant to this Agreement shall be deemed a "work for hire." Upon submission of any work for hire pursuant to this Agreement, and acceptance by TCMHA as complete, non-exclusive title to copyright of said work for hire shall transfer to TCMHA. The compensation recited in Section 8 shall be deemed to be sufficient consideration for said transfer of copyright. CONTRACTOR retains the right to use any project records, documents and materials for marketing of their professional services.

**G. Business Associate Agreement.** To the extent necessary, TCMHA will furnish Protected Health Information (PHI) to CONTRACTOR (Business Associate) in accordance with all applicable legal requirements to allow CONTRACTOR to perform its auditing functions on TCMHA's behalf. CONTRACTOR is required to appropriately safeguard the PHI disclosed to it. In accordance with TCMHA's policies and procedures, CONTRACTOR will sign a *Business Associate Agreement*, incorporated herein as 'Exhibit C', accepting liability for any breach of ePHI or PHI.

**H. CONTRACTOR Attestation.** Also in accordance with TCMHA's policies and procedures, TCMHA will not enter into contracts with individuals, or entities, or owners, officers, partners, directors, or other principals of entities, who have been convicted recently of a criminal offense related to health care or who are debarred, excluded or otherwise precluded from providing goods or services under Federal health care programs, or who are debarred, suspended, ineligible, or voluntarily suspended from securing Federally funded contracts. TCMHA requires that CONTRACTOR certifies that no staff member, officer, director, partner, or principal, or sub-contractor is excluded from any Federal health care program, or federally funded contract and will sign attached *Contractor's Attestation That Neither It Nor Any Of Its Staff Members Are Restricted, Excluded Or Suspended From Providing Goods Or Services Under Any Federal Or State Health Care Program*, incorporated herein as 'Exhibit D'.

**I. Governing Law, Jurisdiction and Venue.** This Agreement shall be governed by, and construed in accordance with, the laws of the State of California. CONTRACTOR agrees and consents to the exclusive jurisdiction of the courts of the State of California for all purposes regarding this Agreement and further agrees and consents that venue of any action brought hereunder shall be exclusively in the County of Los Angeles, California.

**J. Non-Use of Names.** Except as required by applicable law, neither Party shall use the name of the other Party in any publicity without the prior written permission of the Party whose name is to be used.

**K. No Third Party Beneficiaries.** Notwithstanding any other provision of this Agreement, the Parties do not in any way intend that any person shall acquire any rights as a third party beneficiary of this Agreement; and no third Party shall have the right to enforce any right or enjoy any benefit created or established under this Agreement.

## **15. REPRESENTATIVE AND NOTICE**

**A. TCMHA's Representative.** TCMHA hereby designates its Executive Director to act as its representative for the performance of this Agreement ("TCMHA's Representative"). TCMHA's Representative shall have the power to act on behalf of TCMHA for all purposes under this Agreement.

**B. CONTRACTOR's Representative.** CONTRACTOR warrants that the individual who has signed the Agreement has the legal power, right, and authority to make this Agreement and to act on behalf of CONTRACTOR for all purposes under this Agreement.

**C. Delivery of Notices.** All notices permitted or required under this Agreement shall be given to the respective parties at the following address, or at such other address as the respective parties may provide in writing for this purpose:

**If to TCMHA:**

Tri-City Mental Health Authority  
1717 N. Indian Hill Boulevard #B  
Claremont, CA 91711-2788  
Attn: Executive Director

**If to CONTRACTOR:**

Intelli-Tech  
1652 Yeager Avenue  
La Verne, CA 91750  
Attn: Account Executive

Any notices required by this Agreement shall be deemed received on (a) the day of delivery if delivered by hand during receiving Party's regular business hours or by facsimile before or during receiving Party's regular business hours; or (b) on the third business day following deposit in the United States mail, postage prepaid, to the addresses set forth below, or to such other addresses as the Parties may, from time to time, designate in writing pursuant to the provision of this Section. Actual notice shall be deemed adequate notice on the date actual notice occurred, regardless of the method of service.

## **16. EXHIBITS**

The following attached exhibits are hereby incorporated into and made a part of this Agreement:

Exhibit A: Scope of Services

Exhibit B: Proposal from Contractor dated May 27, 2025

Exhibit C: Business Associate Agreement

Exhibit D: Contractor's Attestation That Neither It Nor Any Of Its Staff Members Are Restricted, Excluded Or Suspended From Providing Goods Or Services Under Any Federal Or State Health Care Program

## **17. EFFECTIVE DATE**

This Agreement shall become effective upon (a) its approval and execution by CONTRACTOR; and (b) its approval and execution by TCMHA.

## **18. ENTIRE AGREEMENT**

This Agreement and any other documents incorporated herein by specific reference, represents the entire and integrated agreement between the Parties. Any ambiguities or disputed terms between this Agreement and any attached Exhibits shall be interpreted according to the language in this Agreement and not the Exhibits. This Agreement supersedes all prior agreements, written or oral, between CONTRACTOR and TCMHA relating to the subject matter of this Agreement. This Agreement may not be modified, changed or discharged in whole or in part, except by an agreement in writing signed by the CONTRACTOR and TCMHA.

**19. SEVERABILITY**

The validity or unenforceability of any provision of this Agreement declared by a valid judgment or decree of a court of competent jurisdiction, shall not affect the validity or enforceability of any other provision of this Agreement.

**20. WAIVER**

No delay or omission by TCMHA in exercising any right under this Agreement will operate as a waiver of that or any other right. A waiver or consent given by TCMHA on any one occasion is effective only in that instance and will not be construed as a bar to or waiver of any right on any other occasion or a waiver of any other condition of performance under this Agreement.

**21. EXECUTION**

**a.** Each person executing this Agreement on behalf of CONTRACTOR warrants that he or she is duly authorized to execute this Agreement on behalf of CONTRACTOR and that by his or her execution, CONTRACTOR is formally bound to the provisions of this Agreement.

**b.** CONTRACTOR certifies it is aware of the requirements of Sections 313 of the California Corporations Code. If CONTRACTOR is a corporate entity, it shall either: (i) provide City written proof that each person executing this Agreement on CONTRACTOR's behalf is duly authorized to bind CONTRACTOR; or (ii) provide two signatories to this Agreement, of whom the first must be CONTRACTOR's chairman of the board, president, or a vice president and the second must be CONTRACTOR's secretary, an assistant secretary, its chief financial officer, or an assistant treasurer.

**IN WITNESS WHEREOF**, the Parties have executed this Agreement as of the Agreement Date.

**TRI-CITY MENTAL HEALTH AUTHORITY**

**INTELLI-TECH**

By: \_\_\_\_\_  
Ontson Placide, Executive Director

By: \_\_\_\_\_  
Kevin Praeger, Account Executive

Attest:

By: \_\_\_\_\_  
Micaela P. Olmos, JPA Administrator/Clerk

Approved as to Form:  
RICHARDS WATSON & GERSHON LAW

By: \_\_\_\_\_  
Steven L. Flower, General Counsel

**EXHIBIT A****SCOPE OF SERVICE**

- A.** The selected vendor will be responsible for:
1. Supplying new laptops that meet the specified technical requirements.
  2. Configuring Microsoft Intune and Autopilot to align with our hybrid environment.
  3. Enrolling devices in Microsoft Intune and Autopilot according to our policies.
  4. Providing post-deployment support to ensure successful implementation.
- B. Technical Requirements:** All laptops must meet the following specifications:
1. **\*\*Model:\*\*** HP EliteBook G11
  2. **\*\*Processor:\*\*** Intel (latest generation preferred)
  3. **\*\*Memory:\*\*** Minimum 16GB RAM
  4. **\*\*Storage:\*\*** SSD (minimum 512GB preferred)
  5. **\*\*Display:\*\*** Non-touchscreen
  6. **\*\*Operating System:\*\*** Windows 11 Professional
  7. **\*\*Warranty:\*\*** Minimum 3-year onsite warranty preferred
  8. **\*\*Security Features:\*\*** TPM 2.0, BIOS security, and endpoint protection compatibility
  9. **\*\*Connectivity:\*\*** Wi-Fi 6E, Bluetooth 5.2, USB-C with power delivery
- C. Microsoft Intune and Autopilot Configuration & Enrollment:** The vendor must provide:
1. Review of existing Microsoft Intune policies, profiles, and compliance settings.
  2. Optimization of Intune and Autopilot deployment settings to streamline provisioning.
  3. Pre-provisioning of devices with Autopilot profiles.
  4. Enrollment of devices into Microsoft Intune with compliance policies applied.
  5. Validation of successful deployment before delivery.
  6. Documentation of the configuration and enrollment process for internal IT reference.
  7. Technical support for resolving any post-enrollment issues.

**EXHIBIT B**  
**CONTRACTOR'S PROPOSAL**



RFP NO. 2025-0501

**ATTACHMENT A**  
**RFP COVER PAGE**

<b>Name of Person, Vendor, Business or Organization:</b>	Intelli-Tech
<b>Type of Entity:</b> (e.g. Sole-Proprietorship, Partnership, Corporation)	Corporation
<b>Federal Tax ID Number:</b>	95-4496919
<b>Contact Person – Name</b>	Kevin Praeger
<b>Contact Person – Address</b>	1652 Yeager Ave La Verne, CA 91750
<b>Contact Person – Phone Number (s)</b>	(909) 480-4515
<b>Contact Person – e-mail address</b>	kevin.praeger@intelli-tech.com

By signing this **RFP Cover Page** I hereby attest:

1. that I have read and understood all the terms listed in the RFP;
2. that I am authorized to bind the listed entity into this Agreement;
3. that neither I nor any principals are presently disbarred, suspended, proposed for disbarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency, any California State agency, or any local government agency;
4. that should this Proposal be accepted, I am authorized and able to secure the resources required to deliver against all terms listed within the RFP as published by TCMHA, including any amendments or addenda thereto except as explicitly noted or revised in my submitted Proposal;
5. that I did not, in any way, collude, conspire or agree, directly or indirectly, with any person, agency, corporation or other Proposer in regard to the amount, terms, or conditions of this Proposal; and
6. that the information contained in the Proposal Packet and all accompanying documents is true and correct.

**PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE**

Kevin Praeger Account Executive

**SIGNATURE OF AUTHORIZED REPRESENTATIVE**

*Kevin Praeger*

**DATE**

5/27/2025

**PLEASE ATTACH ANY DOCUMENTS RELATED TO YOU OR YOUR AGENCY'S SUMMARY STATEMENT AS REQUIRED UNDER SECTION V.C.1 OF THIS RFP DOCUMENT.**





Attachment A - Continued

**A. Brief description of the Proposer's (vendor's) background**

Intelli-Tech is an IT solutions provider headquartered at 1652 Yeager Avenue in La Verne, California. Founded in 1992 by Darrell and Cindy Johnson, the company specializes in delivering comprehensive technology solutions—including hardware, software, and IT services—to a diverse range of clients, including educational institutions, healthcare organizations, government agencies, and corporate enterprises.

With over 32 years of experience, Intelli-Tech has built a reputation for its "white glove" service, offering personalized support and managing the entire process from product acquisition to on-site installation. The company maintains partnerships with thousands of manufacturers and provides access to a vast inventory of technology products.

For Tri-City's Laptop Fleet Refresh, this is a project we have done many times for organizations of many sizes including Glendora USD, Azusa USD, Pomona USD. We have a great relationship with the manufacturer (HP) and have plenty of experience procuring these devices. In addition, we are fully capable of handling any and all of the Microsoft Autopilot/Intune needs associated with this project.

Intelli-Tech has approximately 30 employees. Intelli-Tech is located very close to Tri-City in the City of La Verne at 1652 Yeager Ave, La Verne, CA 91750

Organization Chart - Owners (Darrell & Cindy Johnson) > VP of Sales (Rosy Salgado) > Account Executive (Kevin Praeger). Kevin Praeger is your single point of contact, and employees at all levels are very approachable.

**B. Affirmative statement that Proposer is independent**

Intelli-Tech is independent of TCMHA and the services to be performed will be in the capacity of an independent contractor and not as an officer, agent, or employee of TCMHA. Intelli-Tech does not have any conflicts of interest with TCMHA.

**C. Proposer's Interest**

Intelli-Tech is pleased to submit this proposal in response to TCMHA's RFP No. 2025-0501. We are highly interested in supporting your Laptop Fleet Refresh and understand the importance of a seamless, secure, and efficient transition.

Our team is fully committed to delivering and deploying approximately 250 laptops across your locations in Pomona, Claremont, and La Verne. We will handle procurement and all other requirements of the RFP in a smooth manner.

Your Account Executive will be your single point of contact, ensuring compliance with specifications, and provide post-deployment support. With over 32 years of experience in IT products and services, we are confident in our ability to execute this project with professionalism and precision.

**D. Proposal Timeline**

The Proposal is irrevocable for 90 days from the closing.



1652 Yeager Avenue  
La Verne, CA 91750



(909) 394-5188



intelli-tech.com

RFP NO. 2025-0501

**ATTACHMENT B**  
**PROPOSER'S REFERENCES AND SUBCONTRACTORS**

Vendor/Company Name: <b>Intelli-Tech</b>	Address: 1652 Yeager Ave, La Verne, CA 91750
Owner, Principal Officer: <b>Darrell Johnson</b>	Headquarters Location/Date of Establishment: La Verne, CA - Established 1992
Email: kevin.praeger@intelli-tech.com	Website: www.intelli-tech.com
Phone: (909) 480-4515	Fax:

1. List license(s) and corresponding numbers/classification applicable or required for the Scope of Work of this Proposal:

To our knowledge, no specific licenses are required to perform the scope of work.

2. Have you ever operated this business under a different name? Yes  No

If yes, please explain:

Note: Intelligent VAR Technology is our legal name, whereas Intelli-Tech is our DBA

3. **On Going Legal Proceedings:** Provide details on any litigation in which you/your company have been the subject of a lawsuit in the past five (5) years. If none, then write "NONE."

NONE

4. Has the Proposer, any officer of the Proposer, or any employee of the Proposer who has proprietary interest in the Proposer, ever been disqualified, removed, or otherwise prevented from bidding on, or completing a federal, state, or local government project because of a violation of law or safety regulation?

Yes  No

If the answer is yes, explain the circumstances in the following space:

[Continued on Page 2]

TRI-CITY MENTAL HEALTH AUTHORITY

HOPE. WELLNESS. COMMUNITY. **Let's find it together.**

**RFP NO. 2025-0501**

**List references** for projects of similar size and scope of work for this Proposal that you/your company are/is currently *working on or has completed* in the last 5 years:

1. Agency Name: Bonita Unified School District Contact Name: Bob Ford  
Contact e-mail: ford@bonita.k12.ca.us Contact Phone: (909) 971-8200 x5270  
Scope of Work: IT Products and services

Agreement Amount: Ongoing Agreement Start/End Date: Ongoing

2. Agency Name: Azusa Pacific University Contact Name: Freddie Roberts  
Contact e-mail: froberts@apu.edu Contact Phone: (626) 815-5050  
Scope of Work: IT Products and services

Agreement Amount: Ongoing Agreement Start/End Date: Ongoing

3. Agency Name: Azusa Unified School District Contact Name: Manuel Sanchez  
Contact e-mail: mosanchez@azusa.org Contact Phone: (626) 967-6211  
Scope of Work: IT Products and services

Agreement Amount: Ongoing Agreement Start/End Date: Ongoing

4. Agency Name: Baldwin Park Unified School District Contact Name: Rick Hassler  
Contact e-mail: rlhassler529@bpusd.net Contact Phone: (626) 962-3311  
Scope of Work: IT Products and services

Agreement Amount: Ongoing Agreement Start/End Date: Ongoing

5. Agency Name: Glendora Unified School District Contact Name: Kristy Espino  
Contact e-mail: kespino@glendora.k12.ca.us Contact Phone: (626) 963-1611 x1217  
Scope of Work: IT Products and services

Agreement Amount: Ongoing Agreement Start/End Date: Ongoing

**Subcontractors** to be utilized, if applicable:

1. Agency Name: n/a Contact Name: \_\_\_\_\_  
Contact e-mail: \_\_\_\_\_ Contact Phone: \_\_\_\_\_  
Specialty: \_\_\_\_\_ Years in Business: \_\_\_\_\_  
Scope of Work: \_\_\_\_\_

RFP NO. 2025-0501

**ATTACHMENT C**  
**PROPOSER COMPANY WORK PROCESS INFORMATION**

As part of Proposal, Proposers are required to respond to the following questions:

- 1. Provide a description of completed projects that demonstrate the vendor's ability to complete projects of similar scope, size, and purpose, and in a timely manner, and cost-effective:

Intelli-Tech has done many projects similar in scope to the Laptop Fleet Refresh project.

We have procured and prepared a wide variety of devices for our customers including laptops, desktops, chromebooks, phones, and many other types of devices. This includes procurement and many other optional services around that which could include imaging, provisioning, asset tagging, UV printing, etching, inventory management, and many other similar tasks.

Intelli-Tech is professional and always customizing our services to the customer.

We are cost-effective. By working with the manufacturer and distributors, we are able to negotiate the best pricing for our customers, and pass along the savings to them as much as possible.

[Continued on Page 2]

RFP NO. 2025-0501

- 2. Provide a written plan detailing the timeline to supply new laptops and provide support for configuring and enrolling devices in Microsoft Intune and Autopilot within the agency's hybrid environment, and description of tasks to carry out in accomplishing the scope of work, deliverables, and responsibilities under this RFP:

As of this writing, over 250 laptops are in stock ready to ship. If stock levels continue to hold, We anticipate being able to deliver the 250 laptops within than 2 weeks of ordering. This includes support for enrolling the devices in Microsoft Windows Intune/Autopilot. There is a one-time setup process for Intelli-Tech to be able to access Tri-City's Microsoft environment to be able to provision the devices, but this process is just a click of a button by a Tri-City global admin.

Once the serial numbers are available, they will be uploaded into Microsoft's system, and be available for use by Microsoft Intune/Autopilot. Tri-City to provide what they would like for the Group Tag. Otherwise, the customer PO# will be used as the group tag.

As a value-added service, we are recommending a 3-year pickup and return warranty service. Since Intelli-Tech is an authorized HP Repair Center, we will save Tri-City money by essentially providing the same level of service as an on-site warranty, without the potential hassle of having to open tickets with HP. Since the RFP mentioned the on-site service was preferred versus required, we did not feel this was an exception to the RFP requirements.

Prices listed on the pricing sheet do not include e-waste recycling fees or sales tax. See our quote for details.

**PLEASE ATTACH ANY ADDITIONAL INFORMATION OR DOCUMENTS RELATED TO YOU/YOUR COMPANY'S WORK PROCESS INFORMATION AS REQUIRED UNDER SECTION V.C.3 OF THIS RFP DOCUMENT.**

TRI-CITY MENTAL HEALTH AUTHORITY

HOPE. WELLNESS. COMMUNITY. Let's find it together.

RFP NO. 2025-0501

**ATTACHMENT D**  
**EXCEPTION(S) TO SPECIFICATIONS AND/OR**  
**SAMPLE INDEPENDENT CONTRACTOR AGREEMENT**

- We **have no** exceptions to the Scope of Work/Requirements
- We **have** exceptions to the Scope of Work/Requirements as listed below. Exceptions to the Scope of Work/Requirements stated herein shall be fully described in writing by the Proposer in the space provided below. Any alternate must be approved by Tri-City Mental Health Authority no less than 10 business days prior to the closing date.

---

---

---

---

---

---

---

---

---

---

- We **have no** exceptions to any other section of the RFP document or Independent Contractor Agreement.
- We **have** exceptions to the RFP document or Independent Contractor Agreement stated herein shall be fully described in writing by the Proposer in the space provided below.

---

---

---

---

---

---

---

---

---

---

TRI-CITY MENTAL HEALTH AUTHORITY HOPE. WELLNESS. COMMUNITY. Let's find it together.

RFP NO. 2025-0501

**ATTACHMENT E  
PROPOSER PRICE PROPOSAL**

To ensure consistency and for proper analysis, cost/pricing submission should follow the format reflected and completed in its entirety. The Proposer should consider the Scope of Services as set forth in **Section III** and as required under **Section V.C.5** of this RFP.

The hourly rates shall include any required overhead or internal administrative services. Overtime, double-time, holiday pay, shall be calculated per the Department of Industrial Relations Prevailing Wage Labor Code, if applicable. Please include the billable hour for time and materials per assigned project manager or employees OR final price at the bottom of your cost Proposal as a total not-to-exceed amount to implement the Proposal. The Proposer shall state specifically what is being furnished, such as materials, labor, tools, and other equipment necessary to complete the scope of services or expected number of hours with hourly rate. The cost for the Scope of Services as stated in the Request for Proposals documents shall be a lump sum, as follows:

ITEM	PRICE PROPOSAL	
	COST RATES PER UNIT	ALL INCLUSIVE MAX COST FOR 250 LAPTOPS
HARDWARE	\$ 1,028.00	\$ 257,000.00 (laptops)
SOFTWARE	\$ Included	\$ Included
TECHNICAL SUPPORT	\$ 72.00	\$ 18,000.00 (warranty/intune)
STAFF	\$ Included	\$ Included
SUBCONTRACTOR	\$ n/a	\$ n/a
Miscellaneous (Attach Detailed Description)	\$ 111.94	\$ 27,985.00 (taxes)
<b>TOTAL PROJECT COST (Not to Exceed)</b>	<b>\$ 1,211.94</b>	<b>\$ 302,985.00</b>

Vendor/Company Name: Intelli-Tech

Name of Authorized Representative: Kevin Praeger

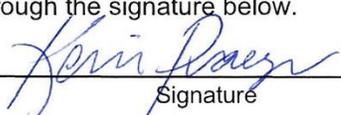
Authorized Representative Signature: 

Date: 5/27/2025





**ADDENDUM NO. 1  
REQUEST FOR PROPOSALS NO. 2025-0501  
LAPTOP FLEET REFRESH  
(Issued: May 7, 2025)**

<b>NOTICE TO ALL PROPOSERS</b>	
<p>The Request for Proposals (RFP) for Laptop Fleet Refresh Services is modified as set forth in this Addendum. The original RFP Documents remain in full force and effect, except as modified by this Addendum which is hereby made part of the RFP. Proposer shall take this Addendum into consideration when preparing and submitting a Proposal. The original document can be found on TCMHA's website at <a href="http://www.tricitymhs.org">www.tricitymhs.org</a>. Proposer acknowledges receipt of this Addendum No. 1 through the signature below.</p>	
 _____ Signature	Kevin Praeger Acct. Exec. _____ Print Name and Title
<b>DESCRIPTION OF CHANGE</b>	
The following section has been amended as follows:	
<b>III. SCOPE OF SERVICES</b>	<b>B. Technical Requirements: All laptops must meet the following specifications:</b> <ol style="list-style-type: none"> <li>1. <b>**Model:** HP EliteBook G11</b></li> <li>2. <b>**Processor:** Intel (latest generation preferred)</b></li> <li>3. <b>**Memory:** Minimum 16GB RAM</b></li> <li>4. <b>**Storage:** SSD (minimum 512GB preferred)</b></li> <li>5. <b>**Display:** Non-touchscreen</b></li> <li>6. <b>**Operating System:** Windows 11 Professional</b></li> <li>7. <b>**Warranty:** Minimum 3-year onsite warranty preferred</b></li> <li>8. <b>**Security Features:** TPM 2.0, BIOS security, and endpoint protection compatibility</b></li> <li>9. <b>**Connectivity:** Wi-Fi 6E, Bluetooth 5.2, USB-C with power delivery</b></li> </ol>
This Addendum No. 1 has been issued to modify the Scope of Services, changing the operating system requirement from Windows 11 Enterprise to Windows 11 Professional.	

**END OF ADDENDUM**

## EXHIBIT C

### **BUSINESS ASSOCIATE AGREEMENT**

This BUSINESS ASSOCIATE AGREEMENT (“**BAA**”) is made as of this 16th day of July, 2025 (the “**Effective Date**”) by and between TRI-CITY MENTAL HEALTH AUTHORITY, a Covered Entity (“**Covered Entity**” or “**CE**”) and INTELLI-TECH (“**Business Associate**” or “**BA**”) (each a “**party**” and, collectively, the “**parties**”).

### RECITALS

A. CE is a “covered entity” under the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (“**HIPAA**”) and, as such, must enter into so-called “business associate” contracts with certain contractors that may have access to certain consumer medical information.

B. Pursuant to the terms of one or more agreements between the parties, whether oral or in writing, (collectively, the “**Agreement**”), BA shall provide certain services to CE. To facilitate BA’s provision of such services, CE wishes to disclose certain information to BA, some of which may constitute Protected Health Information (“**PHI**”) (defined below).

C. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the Agreement in compliance with HIPAA, the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 (“**HITECH Act**”), and regulations promulgated thereunder by the U.S. Department of Health and Human Services (“**HIPAA Regulations**”) and other applicable laws, including without limitation state patient privacy laws (including the Lanterman-Petris-Short Act), as such laws may be amended from time to time. This BAA shall be governed by and construed in accordance with the laws of the State of California.

D. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI (defined below), as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(e) and 164.504(e) of the Code of Federal Regulations (“**C.F.R.**”) and contained in this BAA.

**NOW, THEREFORE**, in consideration of the mutual promises below and the exchange of information pursuant to this BAA, CE and BA agree as follows:

### AGREEMENT

#### **I. Definitions.**

**A. Breach** shall have the meaning given to such term under 42 U.S.C. § 17921(1) and 45 C.F.R. § 164.402.

**B. Business Associate** shall have the meaning given to such term under 42 U.S.C. § 17921 and 45 C.F.R. § 160.103.

**C. Consumer** is an individual who is requesting or receiving mental health services and/or has received services in the past. Any consumer certified as eligible under the Medi-Cal program according to Title 22, Section 51001 is also known as a beneficiary.

**D. Covered Entity** shall have the meaning given to such term under 45 C.F.R. § 160.103.

**E. Data Aggregation** shall have the meaning given to such term under 45 C.F.R. § 164.501.

**F. Designated Record Set** shall have the meaning given to such term 45 C.F.R. § 164.501.

**G. Electronic Protected Health Information or EPHI** means Protected Health Information that is maintained in or transmitted by electronic media.

**H. Electronic Health Record** shall have the meaning given to such term under 42 U.S.C. § 17921(5).

**I. Health Care Operations** shall have the meaning given to such term under 45 C.F.R. § 164.501.

**J. Privacy Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.

**K. Protected Health Information or PHI** means any information, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under 45 C.F.R. § 160.103. Protected Health Information includes Electronic Protected Health Information.

**L. Protected Information** shall mean PHI provided by CE to BA or created or received by BA on CE's behalf.

**M. Security Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and C.

**N. Subcontractor** shall mean a person to whom a business associate delegates a function, activity, or service, other than in the capacity of a member of the workforce of such business associate, pursuant to 45 C.F.R. § 160.103.

**O. Unsecured PHI** shall have the meaning given to such term under 42 U.S.C. § 17932(h), 45 C.F.R. § 164.402 and guidance issued pursuant to the HITECH Act including, but not limited to that issued on April 17, 2009 and published in 74 Federal Register 19006 (April 27, 2009), by the Secretary of the U.S. Department of Health and Human Services (“**Secretary**”).

## **II. Obligations of Business Associate.**

**A. Permitted Access, Use or Disclosure.** BA shall neither permit the unauthorized or unlawful access to, nor use or disclose, PHI other than as permitted or required by the Agreement, this BAA, or as required by law, including but not limited to the Privacy Rule. To the extent that BA carries out CE's obligations under the Privacy Rule, BA shall comply with the requirements of the Privacy Rule that apply to CE in the performance of such obligations. Except as otherwise limited in the Agreement, this BAA, or the Privacy Rule or Security Rule, BA may access, use, or disclose PHI (i) to perform its services as specified in the Agreement; and (ii) for the proper administration of BA, provided that such access, use, or disclosure would not violate HIPAA, the HITECH Act, the HIPAA Regulations, or applicable state law if done or maintained by CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable assurances from such third party that such Protected Information will be held confidential as provided pursuant to this BAA and only disclosed as required by law or for the purposes for which it was disclosed to such third party, and (ii) agreement from such third party to promptly notify BA of any Breaches of confidentiality of the Protected Information, to the extent it has obtained knowledge of such Breach.

**B. Prohibited Uses and Disclosures.** Notwithstanding any other provision in this BAA, BA shall comply with the following requirements: (i) BA shall not use or disclose Protected Information for fundraising or marketing purposes, except as provided under the Agreement and consistent with the requirements of the HITECH Act, the HIPAA Regulations, and applicable state law, including but not limited to 42 U.S.C. § 17936, 45 C.F.R. § 164.508, and 45 C.F.R. § 164.514(f); (ii) BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the PHI solely relates, 42 U.S.C. § 17935(a); 45 C.F.R. § 164.522(a); (iii) BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. § 17935(d)(2); 45 C.F.R. § 164.502(a)(5); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Agreement.

**C. Appropriate Safeguards.** BA shall comply, where applicable, with the HIPAA Security Rule, including but not limited to 45 C.F.R. §§ 164.308, 164.310, and 164.312 and the policies and procedures and documentation requirements set forth in 45 C.F.R. § 164.316, and shall implement appropriate safeguards designed to prevent the access, use or disclosure of Protected Information other than as permitted by the Agreement or this BAA. BA shall use administrative, physical and technical safeguards that reasonably and appropriately protect the confidentiality, integrity and availability of EPHI.

### **D. Reporting of Improper Access, Use, or Disclosure.**

**1. Generally.** BA shall provide an initial telephone report to CE's Compliance Contact within twenty-four (24) hours of any suspected or actual breach of security, intrusion or unauthorized access, use, or disclosure of PHI of which BA becomes aware and/or any actual or suspected access, use, or disclosure of data in violation of the Agreement, this BAA, or any applicable federal or state laws or regulations, including, for the avoidance of doubt, any Security Incident (as defined in 45 C.F.R. § 164.304). BA shall take (i) prompt corrective action to cure any deficiencies in its policies and procedures that may have led to the incident, and (ii) any

action pertaining to such unauthorized access, use, or disclosure required of BA by applicable federal and state laws and regulations.

**2. Breaches of Unsecured PHI.** Without limiting the generality of the reporting requirements set forth in Section D(1), BA shall report to CE any use or disclosure of the information not permitted by this BAA, including any Breach of Unsecured PHI pursuant to 45 C.F.R. § 164.410. Following the discovery of any Breach of Unsecured PHI, BA shall notify CE in writing of such Breach without unreasonable delay and in no case later than three (3) days after discovery. The notice shall include the following information if known (or can be reasonably obtained) by BA: (i) contact information for the individuals who were or who may have been impacted by the Breach (*e.g.*, first and last name, mailing address, street address, phone number, email address); (ii) a brief description of the circumstances of the Breach, including the date of the Breach and date of discovery (as defined in 42 U.S.C. § 17932(c)); (iii) a description of the types of Unsecured PHI involved in the Breach (*e.g.*, names, social security numbers, date of birth, addresses, account numbers of any type, disability codes, diagnostic and/or billing codes and similar information); (iv) a brief description of what the BA has done or is doing to investigate the Breach and to mitigate harm to the individuals impacted by the Breach; (v) any other available information that CE is required to include in notification to the individual under 45 C.F.R. § 164.404.

**3. Mitigation.** BA shall establish and maintain safeguards to mitigate, to the extent practicable, any deleterious effects known to BA of any unauthorized or unlawful access or use or disclosure of PHI not authorized by the Agreement, this BAA, or applicable federal or state laws or regulations; provided, however, that such mitigation efforts by BA shall not require BA to bear the costs of notifying individuals impacted by such unauthorized or unlawful access, use, or disclosure of PHI, unless (i) otherwise agreed in writing by the parties, (2) BA bears responsibility for the unauthorized or unlawful access or use or disclosure of PHI, or (3) required by applicable federal or state laws or regulations; provided, further, however, that BA shall remain fully responsible for all aspects of its reporting duties to CE under Section D(1) and Section D(2).

**E. Business Associate's Subcontractors and Agents.** BA shall ensure that any agents or Subcontractors to whom it provides Protected Information agree to the same restrictions and conditions that apply to BA with respect to such PHI. To the extent that BA creates, maintains, receives or transmits EPHI on behalf of the CE, BA shall ensure that any of BA's agents or Subcontractors to whom it provides Protected Information agree to implement the safeguards required by Section C above with respect to such EPHI.

**F. Access to Protected Information.** To the extent BA maintains a Designated Record Set on behalf of the CE, BA shall make Protected Information maintained by BA or its agents or Subcontractors in Designated Record Sets available to CE for inspection and copying within ten (10) days of a request by CE to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. § 164.524. If BA maintains an Electronic Health Record, BA shall provide such information in electronic format to enable CE to fulfill its obligations under the HITECH Act, including, but not limited to, 42 U.S.C. § 17935(e).

**G. Amendment of PHI.** To the extent BA maintains a Designated Record Set on behalf of CE, within ten (10) days of receipt of a request from the CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA

or its agents or Subcontractors shall make PHI available to CE so that CE may make any amendments that CE directs or agrees to in accordance with the Privacy Rule.

**H. Accounting Rights.** Within ten (10) days of notice by CE of a request for an accounting of disclosures of Protected Information, BA and its agents or Subcontractors shall make available to CE the information required to provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. § 164.528, and its obligations under the HITECH Act, including but not limited to 42 U.S.C. § 17935(c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents or Subcontractors for at least six (6) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment, or health care operations purposes are required to be collected and maintained for three (3) years prior to the request, and only to the extent BA maintains an electronic health record and is subject to this requirement. At a minimum, the information collected and maintained shall include, to the extent known to BA: (i) the date of the disclosure; (ii) the name of the entity or person who received PHI and, if known, the address of the entity or person; (iii) a brief description of the PHI disclosed; and (iv) a brief statement of the purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure. The accounting must be provided without cost to the individual or the requesting party if it is the first accounting requested by such individual within any twelve (12) month period. For subsequent accountings within a twelve (12) month period, BA may charge the individual or party requesting the accounting a reasonable cost-based fee in responding to the request, to the extent permitted by applicable law, so long as BA informs the individual or requesting party in advance of the fee and the individual or requesting party is afforded an opportunity to withdraw or modify the request. BA shall notify CE within five (5) business days of receipt of any request by an individual or other requesting party for an accounting of disclosures. The provisions of this Section H shall survive the termination of this BAA.

**I. Governmental Access to Records.** BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the Secretary for purposes of determining BA's compliance with the Privacy Rule. BA shall immediately notify CE of any requests made by the Secretary and provide CE with copies of any documents produced in response to such request.

**J. Minimum Necessary.** BA (and its agents or Subcontractors) shall request, use, and disclose only the minimum amount of Protected Information necessary to accomplish the purpose of the request, use, or disclosure. Because the definition of "minimum necessary" is in flux, BA shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary." Notwithstanding the foregoing, BA must limit its (and its agents or Subcontractors) uses and disclosures of Protected Information to be consistent with CE's minimum necessary policies and procedures as furnished to BA.

**K. Permissible Requests by Covered Entity.** CE shall not request BA to use or disclose PHI in any manner that would not be permissible under HIPAA or the HITECH Act if done by CE or BA. CE shall not direct BA to act in a manner that would not be compliant with the Security Rule, the Privacy Rule, or the HITECH Act.

**L. Breach Pattern or Practice.** If CE knows of a pattern of activity or practice of the BA that constitutes a material breach or violation of BA's obligations under this BAA or other

arrangement, CE must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, CE must terminate the applicable Agreement to which the breach and/or violation relates if feasible. If BA knows of a pattern of activity or practice of an agent or Subcontractor that constitutes a material breach or violation of the agent or Subcontractor's obligations under its BAA or other arrangement with BA, BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, BA must terminate the applicable agreement to which the breach and/or violation relates if feasible.

**III. Indemnification; Limitation of Liability.** To the extent permitted by law, BA shall indemnify, defend and hold harmless CE from any and all liability, claim, lawsuit, injury, loss, expense or damage resulting from or relating to the acts or omissions of BA or its agents, Subcontractors or employees in connection with the representations, duties and obligations of BA under this Agreement. Any limitation of liability contained in the applicable Agreement shall not apply to the indemnification requirement of this provision. This provision shall survive the termination of this BAA.

**IV. Business Associate's Insurance.** BA shall obtain insurance for itself and all its employees, agents and independent contractors in an amount not less than One Million Dollars (\$1,000,000) per occurrence and Two Million Dollars (\$2,000,000) annual aggregate of Commercial General Liability insurance and Two Million Dollars (\$2,000,000) per occurrence and Four Million Dollars (\$4,000,000) annual aggregate of Errors and Omissions insurance. The Errors and Omissions insurance shall cover, among other things, Breaches. If the general liability or the errors and omissions insurance do not cover, among other things, Breaches, Business Associate should also carry Two Million Dollars (\$2,000,000) per occurrence and Four Million Dollars (\$4,000,000) annual aggregate of Cyber/Privacy insurance that covers, among other things, Breaches. BA shall provide CE with certificates of insurance or other written evidence of the insurance policy or policies required herein prior to execution of this BAA (or as shortly thereafter as is practicable) and as of each annual renewal of such insurance policies during the period of such coverage. Further, in the event of any modification, termination, expiration, non-renewal or cancellation of any of such insurance policies, BA shall give written notice thereof to CE not more than ten (10) days following BA's receipt of such notification. If BA fails to procure, maintain or pay for the insurance required under this section, CE shall have the right, but not the obligation, to obtain such insurance. In such event, BA shall promptly reimburse CE for the cost thereof upon written request, and failure to repay the same upon demand by CE shall constitute a material breach of this BAA.

**V. Term and Termination.**

**A. Term.** The term of this BAA shall be effective as of the Effective Date and shall terminate when all of the PHI provided by CE to BA, or created or received by BA on behalf of CE, is destroyed or returned to CE.

**B. Termination.**

**1. Material Breach by BA.** Upon any material breach of this BAA by BA, CE shall provide BA with written notice of such breach and such breach shall be cured by BA within thirty (30) business days of such notice. If such breach is not cured within such time period, CE may immediately terminate this BAA and the applicable Agreement.

**2. Effect of Termination.** Upon termination of any of the agreements comprising the Agreement for any reason, BA shall, if feasible, return or destroy all PHI relating to such agreements that BA or its agents or Subcontractors still maintain in any form, and shall retain no copies of such PHI. If return or destruction is not feasible, BA shall continue to extend the protections of this BAA to such information, and limit further use of such PHI to those purposes that make the return or destruction of such PHI infeasible.

**VI. Assistance in Litigation.** BA shall make itself and any subcontractors, employees or agents assisting BA in the performance of its obligations under the Agreements or this BAA available to CE, at no cost to CE, to testify as witnesses, or otherwise, in the event of litigation or administrative proceedings being commenced against CE, its shareholders, directors, officers, agents or employees based upon a claim of violation of HIPAA, the HITECH Act, or other laws related to security and privacy, except where BA or its subcontractor, employee or agent is named as an adverse party.

**VII. Compliance with State Law.** Nothing in this BAA shall be construed to require BA to use or disclose Protected Information without a written authorization from an individual who is a subject of the Protected Information, or without written authorization from any other person, where such authorization would be required under state law for such use or disclosure.

**VIII. Compliance with 42 C.F.R. Part 2.** CE is also subject to the Confidentiality of Alcohol and Drug Abuse Patient Records regulations, 42 C.F.R. Part 2, which requires certain programs to enter into contracts with qualified service organizations (as defined in 42 C.F.R. § 2.11) that may have access to certain patient medical information. BA acknowledges that in receiving, storing, processing, or otherwise dealing with any Records (as defined in 42 C.F.R. Part 2) from CE, BA is fully bound by 42 C.F.R. Part 2. BA agrees to resist in judicial proceedings any efforts to obtain access to patient records except as permitted by 42 C.F.R. Part 2. To the extent any provisions of 42 C.F.R. Part 2 restricting disclosure of Records are more protective of privacy rights than the provisions of this BAA, HIPAA, the HITECH Act, or other applicable laws, 42 C.F.R. Part 2 controls.

**IX. Amendment to Comply with Law.** Because state and federal laws relating to data security and privacy are rapidly evolving, amendment of the Agreement or this BAA may be required to provide for procedures to ensure compliance with such developments. BA and CE shall take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the Privacy Rule, the Security Rule and other applicable laws relating to the security or confidentiality of PHI. BA shall provide to CE satisfactory written assurance that BA will adequately safeguard all PHI. Upon the request of either party, the other party shall promptly enter into negotiations concerning the terms of an amendment to this BAA embodying written assurances consistent with the standards and requirements of HIPAA, the HITECH Act, the Privacy Rule, the Security Rule or other applicable laws. CE may terminate the applicable Agreement upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the Agreement or this BAA when requested by CE pursuant to this Section or (ii) BA does not enter into an amendment to the Agreement or this BAA providing assurances regarding the safeguarding of PHI that CE, in its reasonable discretion, deems sufficient to satisfy the standards and requirements of applicable laws, within thirty (30) days following receipt of a written request for such amendment from CE.

**X. No Third-Party Beneficiaries.** Nothing express or implied in the Agreement or this BAA is intended to confer, nor shall anything herein confer upon any person other than CE, BA and their respective successors or assigns, any rights, remedies, obligations or liabilities whatsoever.

**XI. Notices.** All notices hereunder shall be in writing, delivered personally, by certified or registered mail, return receipt requested, or by overnight courier, and shall be deemed to have been duly given when delivered personally or when deposited in the United States mail, postage prepaid, or deposited with the overnight courier addressed as follows:

**If to CE:**

Tri-City Mental Health Authority  
1717 N. Indian Hill Blvd., Suite B  
Claremont, CA 91711  
Attn: Privacy Officer

**If to BA:**

Intelli-Tech  
1652 Yeager Avenue  
La Verne, CA 91750  
Attn: Account Executive

**With a copy to:**

Hooper, Lundy & Bookman, P.C.  
1875 Century Park East, Suite 1600  
Los Angeles, CA 90067  
Attn: Linda Kollar, Esq.  
Fax: 310-551-8181

or to such other persons or places as either party may from time to time designate by written notice to the other.

**XII. Interpretation.** The provisions of this BAA shall prevail over any provisions in the Agreement that may conflict or appear inconsistent with any provision in this BAA. This BAA and the Agreement shall be interpreted as broadly as necessary to implement and comply with HIPAA, the HITECH Act, the Privacy Rule and the Security Rule. Any ambiguity in this BAA shall be resolved in favor of a meaning that complies and is consistent with HIPAA, the HITECH Act, the Privacy Rule and the Security Rule. Except as specifically required to implement the purposes of this BAA, or to the extent inconsistent with this BAA, all other terms of the Agreement shall remain in force and effect.

**XIII. Entire Agreement of the Parties.** This BAA supersedes any and all prior and contemporaneous business associate agreements or addenda between the parties and constitutes the final and entire agreement between the parties hereto with respect to the subject matter hereof. Each party to this BAA acknowledges that no representations, inducements, promises, or agreements, oral or otherwise, with respect to the subject matter hereof, have been made by either party, or by anyone acting on behalf of either party, which are not embodied herein. No other agreement, statement or promise, with respect to the subject matter hereof, not contained in this BAA shall be valid or binding.

**XIV. Regulatory References.** A reference in this BAA to a section of regulations means the section as in effect or as amended, and for which compliance is required.

**XV. Counterparts.** This BAA may be executed in one or more counterparts, each of which shall be deemed to be an original, and all of which together shall constitute one and the same instrument.

**IN WITNESS WHEREOF**, the parties hereto have duly executed this BAA as of the BAA Effective Date.

**AGREED AND ACCEPTED:**

TRI-CITY MENTAL HEALTH  
AUTHORITY

INTELLI-TECH

\_\_\_\_\_  
**Name of Covered Entity**

\_\_\_\_\_  
**Name of Business Associate**

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Authorized Signature**

Ontson Placide

Kevin Praeger

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Print Name**

Executive Director

Account Executive

\_\_\_\_\_  
**Print Title**

\_\_\_\_\_  
**Print Title**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

**EXHIBIT D**

**CONTRACTOR'S ATTESTATION THAT NEITHER IT NOR ANY OF ITS STAFF MEMBERS ARE RESTRICTED, EXCLUDED OR SUSPENDED FROM PROVIDING GOODS OR SERVICES UNDER ANY FEDERAL OR STATE HEALTH CARE PROGRAM**

INTELLI-TECH

Contractor/Vendor's Name	Last	First
--------------------------	------	-------

Contractor hereby warrants that neither it nor any of its staff members is restricted, excluded, or suspended from providing goods or services under any health care program funded by the Federal or State Government, directly or indirectly, in whole or in part, and the Contractor will notify Tri-City Mental Health Authority (TCMHA) within thirty (30) days in writing of: 1) any event that would require Contractor or a staff member's mandatory exclusion or suspension from participation in a Federal or State funded health care program; and 2) any exclusionary action taken by any agency of the Federal or State Government against Contractor or one or more staff members barring it or the staff members from participation in a Federal or State funded health care program, whether such bar is direct or indirect, or whether such bar is in whole or in part.

Contractor shall indemnify and hold TCMHA harmless against any and all loss or damage Contractor may suffer arising from the Federal or State exclusion or suspension of Contractor or its staff members from such participation in a Federal or State funded health care program.

Failure by Contractor to meet the requirements of this paragraph shall constitute a material breach of contract upon which TCMHA may immediately terminate or suspend this Agreement.

**Is Contractor/Proposer/Vendor or any of its staff members currently barred from participation in any Federal or State funded health care program?**

\_\_\_\_\_ **NO**, Contractor or any of its staff members is not currently barred from participation in any Federal or State funded health care program.

\_\_\_\_\_ **YES**, Contractor or any of its staff members is currently barred from participation in any Federal or State funded health care program. Describe the particulars on a separate page.

	Kevin Prager, Account Executive	
_____	_____	_____
Date	Contractor or Vendor's Name	Contractor or Vendor's Signature
	Ontson Placide, Executive Director	
_____	_____	_____
Date	TCMHA Executive Official's Name	TCMHA Executive Official's Signature

**DISTRIBUTION:**

COPIES: Contractor  
Finance



**Tri-City Mental Health Authority  
AGENDA REPORT**

**DATE:** July 16, 2025

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

**FROM:** Ontson Placide, LMFT, Executive Director

**SUBJECT:** Consideration of Resolution No. 802 Approving the Third Amendment to the Agreement with Capstone Solutions Consulting Group, LLC for Completion of the Drug Medi-Cal Certification from the California Department of Health Care Services (DHCS), And Authorizing the Executive Director to Execute the Amendment

---

Summary:

Staff is seeking approval from the Governing Board to authorize the executive director of Tri-City Mental Health Authority (TCMHA) to amend the agreement with Capstone Solutions Consulting Group, LLC, for consulting services related to Drug Medi-Cal Certification from the California Department of Health Care Services. Additionally, the consultant will assist TCMHA negotiate and address the terms for intergovernmental agreement with the Los Angeles County Substance Abuse Provider Control to become a provider of substance use treatment services. The proposed amount for this amendment is \$25,000 bringing the overall total for this agreement to an amount not to exceed \$120,000.

Background:

TCMHA is working towards obtaining Drug Medi-Cal certification to provide comprehensive co-occurring mental health and substance use treatment for the clients in their care. This certification will allow TCMHA to better serve the community and meet a critical service need. Additionally, becoming a certified Drug Medi-Cal site will enable TCMHA to seek reimbursement for the substance use treatment services provided.

The certification process is a new initiative for TCMHA, and the organization has been collaborating with a consultant to complete it. However, more time is required to finish the process due to several factors, including significant changes to the application requirements released by the Department of Health Care Services on February 3, 2025, as well as the resignation and leave of the program manager who was previously overseeing the project.

Fiscal Impact:

The funding source will be realignment dollars.

**Governing Board of Tri-City Mental Health Authority**  
***Consideration of Resolution No. 802 Approving the Third Amendment to the Agreement with Capstone Solutions Consulting Group, LLC for Completion of the Drug Medi-Cal Certification from the California Department of Health Care Services (DHCS), And Authorizing the Executive Director to Execute the Amendment***  
**July 16, 2025**  
**Page 2 of 2**

Recommendation:

Staff recommends that the Governing Board adopt Resolution No 802 approving the Third Amendment to the Agreement with Capstone Solutions Consulting Group, LLC, for consulting services related to Drug Medi-Cal Certification from the California Department of Health Care Services; and authorize the Executive Director to execute the Amendment.

Attachments

*Attachment 12-A:* Resolution No. 802 - Draft

*Attachment 12-B:* Third Amendment to Agreement with Capstone Solutions Consulting Group, LLC

## RESOLUTION NO. 802

### A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY APPROVING THE THIRD AMENDMENT TO THE AGREEMENT WITH CAPSTONE SOLUTIONS CONSULTING GROUP, LLC FOR COMPLETION OF THE DRUG MEDI-CAL CERTIFICATION FROM THE CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES (DHCS), AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AMENDMENT

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. Tri-City Mental Health Authority (“Authority” or “TCMHA”) on September 1, 2023, through its Executive Director, entered into an agreement with Capstone Solutions Consulting Group LLC (Capstone) in an amount not to exceed \$25,000.00, for consulting services to complete TCMHA’S Drug Medi-Cal Certification from the California Department of Health Care Services (DHSC) to become a provider of substance use treatment services.

B. On June 12, 2024, the Authority adopted Resolution No. 746 approving the First Amendment to the Agreement with Capstone to extend it for one additional year, ending on June 30, 2025; 2) increase Capstone’s hourly rate to \$275.00 effective January 1, 2024; 3) increase the compensation by an additional \$25,000.00, in a total amount not to exceed \$50,000.00 for the entire project; and 4) modify the Scope of Services.

C. On March 19, 2025, the Governing Board adopted Resolution No. 773, approving the Second Amendment to the Agreement to increase Capstone’s compensation by an additional \$45,000.00, in a total amount not to exceed \$95,000.00 for the entire project.

D. The Authority desires to amend again the Agreement and execute the Third Amendment to increase Capstone’s compensation by an additional \$25,000.00 in a total amount not to exceed \$120,000.00 for the entire project.

E. The Authority affirms that Capstone Consulting Group LLC’s is an independent contractor and not an employee, agent, joint venture or partner of TCMHA. The Agreement does not create or establish the relationship of employee and employer between Capstone and TCMHA.

**2. Action**

The Authority's Executive Director is authorized to enter into, and execute, the Third Amendment to the Agreement with Capstone Consulting Group LLC, in substantially the same form as presented at its meeting on July 16, 2025, to increase Capstone's compensation by an additional \$25,000.00 in a total amount not to exceed \$120,000.00 for the entire project.

**3. Adoption**

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on July 16, 2025, by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

\_\_\_\_\_  
JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

\_\_\_\_\_  
STEVEN L. FLOWER, GENERAL COUNSEL

\_\_\_\_\_  
MICAELA P. OLMOS, RECORDING SECRETARY



**HOPE. WELLNESS. COMMUNITY.**

**Let's find it together.**

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

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

**THIRD AMENDMENT**

**TO**

**INDEPENDENT CONTRACTOR AGREEMENT**

**BETWEEN**

**TRI-CITY MENTAL HEALTH AUTHORITY**

**AND**

**CAPSTONE SOLUTIONS CONSULTING GROUP, LLC**

**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 & Family**

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) 242-7691

**DATED**

**JULY 16, 2025**

**ATTACHMENT 12-B**

## TABLE OF CONTENTS

	<u>Section Page</u>
1. PARTIES AND DATE .....	1
2. RECITALS .....	1
3. AMENDMENT .....	1
4. REAFFIRMATION OF OTHER TERMS .....	2
5. EXECUTION .....	2

## THIRD AMENDMENT

### INDEPENDENT CONTRACTOR AGREEMENT BY AND BETWEEN TRI-CITY MENTAL HEALTH AUTHORITY AND CAPSTONE SOLUTIONS CONSULTING GROUP, LLP

#### 1. PARTIES AND DATE

This Third Amendment to Independent Contractor Agreement (“Third Amendment”) is made and entered into as of July 16, 2025 (“Third Amendment Date”), by and between TRI-CITY MENTAL HEALTH AUTHORITY, a California joint powers authority (“TCMHA” or “Authority”) and CAPSTONE SOLUTIONS CONSULTING GROUP, LLP, incorporated under the laws of the State of California (“CONTRACTOR”). TCMHA and CONTRACTOR are sometimes individually referred to as a “Party” and collectively as “Parties.”

#### 2. RECITALS

**2.1.** TCMHA and CONTRACTOR entered into that certain Independent Contractor Agreement effective September 1, 2023, (“Agreement”) for consultant services for Drug Medical Certification from the California Department of Health Care Services.

**2.2.** On July 1, 2024, the Parties executed the First Amendment to that certain Agreement to: 1) extend it for one additional year, ending on June 30, 2025; 2) increase the CONTRACTOR’s hourly rate to Two Hundred Seventy-Five (\$275.00) dollars effective January 1, 2024; 3) increase the compensation in a total amount not to exceed \$50,000.00 for the entire project; and 4) modify the Scope of Services.

**2.3.** On March 19, 2025, the Parties executed the Second Amendment to that certain Agreement to increase the compensation in a total amount not to exceed \$95,000.00 for the entire project.

**2.4.** TCMHA and CONTRACTOR desire to amend again the Agreement and execute the Third Amendment to: 1) extend the term of the Agreement to September 30, 2025; and 2) increase the compensation an additional \$25,000.00, in a total amount not to exceed \$120,000.00 for the entire project.

**2.5.** 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 Third Amendment.

#### 3. AMENDMENT

Section 7 (Term) and Section 9(a) (Compensation) are amended to read as follows:

##### “7. TERM

The Term of this Agreement shall be from August 1, 2023 to September 30, 2025, unless earlier terminated in accordance with the provisions of Section 8 below; or renewed subject to an amendment to this Agreement.

**9. COMPENSATION.** For the full performance of this Agreement:

**a.** TCMHA shall pay CONTRACTOR an hourly rate of Two Hundred Seventy-Five (\$275) dollars as indicated under 'Exhibit A' effective January 1, 2024; and the total compensation will be an amount not to exceed One Hundred Twenty Thousand (\$120,000.00) dollars for the entire project. CONTRACTOR acknowledges and agrees that it will not be compensated for any work in excess of this amount unless an amendment to the Agreement authorizing payment for such work has been first approved by the Authority's Governing Board."

**4. REAFFIRMATION OF OTHER TERMS**

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

**5. EXECUTION**

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

**Tri-City Mental Health Authority**

**Capstone Solutions Consulting Group, LLP**

By: \_\_\_\_\_  
Ontson Placide, Executive Director

By: \_\_\_\_\_  
Cassandra Fatouros, Managing Director

**Attest:**

By: \_\_\_\_\_  
Micaela P. Olmos, JPA Administrator/Clerk

**Approved as to Form:**  
RICHARDS WATSON & GERSHON

By: \_\_\_\_\_  
Steven L. Flower, General Counsel



**Tri-City Mental Health Authority  
AGENDA REPORT**

**DATE:** July 16, 2025

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

**FROM:** Ontson Placide, LMFT, Executive Director

**SUBJECT:** Consideration of Resolution No. 803 Approving the First Amendment to the Agreement with Riverside Community Care Inc. for Suicide Postvention: Supporting Schools, Workplaces, and Communities After Sudden, unexpected Loss Training services, and Authorizing the Executive Director to Execute the Amendment

---

Summary:

Staff is seeking approval from the Governing Board to authorize the Executive Director of Tri-City Mental Health Authority (TCMHA) to amend the agreement with Riverside Community Care Inc., for Suicide Postvention: Supporting Schools, Workplaces, and Communities After Sudden, unexpected Loss Training services. The proposed amount for this amendment is \$20,350 bringing the overall total for this agreement to an amount not to exceed \$33,850.

Background:

Tri-City Mental Health Authority (TCMHA) serves a population that includes individuals living with severe and persistent mental illness (SPMI), many of whom are at elevated risk for suicide. In alignment with our mission to provide comprehensive, high-quality behavioral health services, it is imperative that our clinical staff possess advanced competencies in suicide prevention and treatment, beyond general crisis intervention skills.

Riverside Community Care, Inc. offers nationally recognized suicide prevention trainings that go beyond foundational crisis response and focus on effective, evidence-informed suicide treatment strategies. Their curriculum is uniquely suited to address the complex clinical presentations commonly seen in clients with SPMI. This includes training in suicide-specific assessment, safety planning, and ongoing therapeutic engagement with individuals experiencing chronic suicidality.

A significant portion of TCMHA's clinical staff is early in their professional careers, with limited formal training in suicide-specific interventions beyond basic crisis response. Integrating Riverside's trainings will not only enhance their clinical skill set but also promote staff confidence, competence, and retention. Importantly, the training aligns with national best practices and strengthens our ability to meet the California Department of Health Care Services (DHCS) requirements around suicide prevention in behavioral health settings.

**Governing Board of Tri-City Mental Health Authority**  
***Consideration of Resolution No. 803 Approving the First Amendment to the Agreement with Riverside Community Care Inc., for Suicide Postvention: Supporting Schools, Workplaces, and Communities After Sudden, unexpected Loss Training services, And Authorizing the Executive Director to Execute the Amendment***  
**July 16, 2025**  
**Page 2 of 2**

By investing in this targeted training, TCMHA is making a proactive and strategic decision to improve the safety and outcomes of our most vulnerable clients, while simultaneously supporting workforce development and clinical excellence.

Fiscal Impact:

The funding source will be realignment dollars.

Recommendation:

Staff recommends that the Governing Board adopt Resolution No. 803 approving the First Amendment to the Agreement with Riverside Community Care Inc., for Suicide Postvention: Supporting Schools, Workplaces, and Communities After Sudden, unexpected Loss Training services; and authorize the Executive Director to execute the Amendment.

Attachments

*Attachment 13-A:* Resolution No. 803 - Draft

*Attachment 13-B:* First Amendment to Agreement with Riverside Community Care, Inc.

## RESOLUTION NO. 803

### A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY APPROVING THE FIRST AMENDMENT TO AGREEMENT WITH RIVERSIDE COMMUNITY CARE, INC. FOR *SUICIDE POSTVENTION: SUPPORTING SCHOOLS, WORKPLACES, AND COMMUNITIES AFTER SUDDEN, UNEXPECTED LOSS* TRAINING SERVICES, AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AMENDMENT

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. Tri-City Mental Health Authority (“Authority” or “TCMHA”) on February 1, 2025, through its Executive Director, entered into an agreement with Riverside Community Care, Inc. (RCC) in the amount of \$13,500.00, for *Suicide Postvention: Supporting Schools, Workplaces, and Communities After Sudden, Unexpected Loss* training services.

B. The Authority desires to execute the First Amendment to the Agreement with RCC to: 1) extend the term of the Agreement to December 31, 2025; and 2) increase RCC’s compensation by an additional \$20,350.00 for added *Suicide Postvention* training services and *Suicide Assessment and Intervention Training for Mental Health Professionals*.

C. The Authority affirms that Riverside Community Care, Inc. is an independent contractor and not an employee, agent, joint venture or partner of TCMHA. The Agreement does not create or establish the relationship of employee and employer between Capstone and TCMHA.

**2. Action**

The Authority’s Executive Director is authorized to enter into, and execute, the First Amendment to the Agreement with Riverside Community Care, Inc., in substantially the same form as presented at its meeting on July 16, 2025, to increase RCC’s compensation by an additional \$20,350.00, in a total amount not to exceed \$33,850.00, for all training services.

[Continues on Page 2]

**3. Adoption**

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on July 16, 2025, by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

\_\_\_\_\_  
JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

\_\_\_\_\_  
STEVEN L. FLOWER, GENERAL COUNSEL

\_\_\_\_\_  
MICAELA P. OLMOS, RECORDING SECRETARY



**HOPE. WELLNESS. COMMUNITY.**

Let's find it together.

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

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

**FIRST AMENDMENT**

**TO**

**INDEPENDENT CONTRACTOR AGREEMENT**

**BETWEEN**

**TRI-CITY MENTAL HEALTH AUTHORITY**

**AND**

**RIVERSIDE COMMUNITY CARE, INC.**

**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 & Family**

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) 242-7691

**DATED**

**JULY 1, 2025**

**ATTACHMENT 13-B**

## TABLE OF CONTENTS

	<u>Section Page</u>
1. PARTIES AND DATE .....	1
2. RECITALS .....	1
3. AMENDMENT .....	1
4. REAFFIRMATION OF OTHER TERMS .....	2
5. EXECUTION .....	2

## FIRST AMENDMENT

### INDEPENDENT CONTRACTOR AGREEMENT BY AND BETWEEN TRI-CITY MENTAL HEALTH AUTHORITY AND RIVERSIDE COMMUNITY CARE, INC.

#### 1. PARTIES AND DATE

This First Amendment (“First Amendment”) is made and entered into as of July 1, 2025 (“First Amendment Date”), by and between TRI-CITY MENTAL HEALTH AUTHORITY, a California joint powers authority (“TCMHA” or “Authority”) and RIVERSIDE COMMUNITY CARE, INC., a nonprofit corporation organized under the laws of the State of Massachusetts, with its business address at 270 Bridge Street, Suite 301, Dedham, MA 02026 (the “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 February 1, 2025 (“Agreement”) for *Suicide Postvention: Supporting Schools, Workplaces, and Communities After Sudden, Unexpected Loss* training services.

b. The Parties desire to enter into a First Amendment to the Agreement to: 1) extend the term of the Agreement to December 31, 2025; 2) increase the CONTRACTOR’s compensation by an additional \$20,350.00 for added *Suicide Postvention* training services and *Suicide Assessment and Intervention Training for Mental Health Professionals*; and 3) modify the Scope of Services, incorporated and made part of the First Amendment as ‘Exhibit 1.’

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

a. Exhibit A (Scope of Work) to the Agreement is hereby amended by the addition thereto of Exhibit 1 to this First Amendment. Exhibit A to the Agreement shall remain otherwise unchanged.

b. Section 7 (Term) of the Agreement is hereby amended and restated in its entirety to read as follows:

“The Term of this Agreement shall begin February 1, 2025 and continue until the “Services” have been completed unless earlier terminated in accordance with the provisions of Section 8 below; or renewed subject to an amendment to this Agreement.”

c. Section 9 (Compensation) of the Agreement is hereby amended by the addition thereto of a new paragraph "e." to read as follows:

"Notwithstanding any other provision of this Agreement, CONTRACTOR's total compensation for the Services shall not exceed \$33,850.00 unless approved by TCMHA pursuant to a written amendment to this Agreement."

**4. REAFFIRMATION OF OTHER TERMS**

Except as 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      RIVERSIDE COMMUNITY CARE, INC.**

By: \_\_\_\_\_  
Ontson Placide, Executive Director

By: \_\_\_\_\_  
Vicker Digravio III, President

**Attest:**

By: \_\_\_\_\_  
Micaela P. Olmos, JPA Administrator/Clerk

**Approved as to Form:**  
RICHARDS WATSON & GERSHON

By: \_\_\_\_\_  
Steven L. Flower, General Counsel

## **EXHIBIT 1**



### **Riverside Trauma Center A Service of Riverside Community Care Proposal**

**For Tri-City Mental Health Services**

**Trainings:**

***Suicide Postvention: Supporting Schools, Workplaces, and Communities After Sudden, Unexpected Loss | \$2,200***

Postvention is the organized response that provides immediate support after a death by suicide. It addresses the needs of those affected, reduces the likelihood of more suicides, fosters healthy coping strategies for individuals and the community, and becomes an essential part of future suicide prevention.

Through an interactive, discussion-based program, attendees will learn:

- An overview of suicide, including risk factors and warning signs for youth and adults.
- The scope and impact of a death by suicide, including its effects on family, friends, peers, and the community, and the importance of reducing copycat behavior and future mental health issues.
- The goals, guiding processes, and timeline of a postvention process.
- A comprehensive exploration of the 12 key tasks of a best practice postvention process.
- Our presenters draw from their broad experience in postvention and share highlights on data and comments generated by community members where postventions were successfully implemented.

Six (6) hours of continuing education may be available for this training.

***Details:***

- Number of Sessions: 1
- Number of hours per session: 7
- Modality: Virtual
- Training Date: June 10, 2025
- Maximum Attendees: 40

***Suicide Assessment & Intervention Training for Mental Health Professionals\****

Recognizing and addressing suicidal thoughts and behaviors in clients is vital for any mental health professional, yet many in the field do not receive adequate training in this critical area.

Our Suicide Assessment and Intervention Training (SAIT) for Mental Health Professionals is designed to improve the skills and confidence of clinicians and other mental health professionals who identify high-risk individuals and plan for their care. Developed by clinicians, this training is based on the latest research and recommendations in the field of suicidology. This training has also demonstrated increased knowledge, confidence, and changes in clinical practice in published outcomes studies.

This full-day training is divided into 12 modules that include interactive discussions and activities. Participants will learn:

- Risk factors and warning signs for suicide in youth, adolescents, and adults.
- To identify and manage personal reactions to suicidal behavior.

- To utilize best practices in risk formulation and safety planning.
- Strategies to increase positive outcomes during the clinical interview.
- Suicide postvention strategies, liability management, and the role of self-care.

Six (6) hours of continuing education may be available for this training.

***Suicide Postvention: Supporting Schools, Workplaces, and Communities After Sudden, Unexpected Loss\****

Postvention is the organized response that provides immediate support after a death by suicide. It addresses the needs of those affected, reduces the likelihood of more suicides, fosters healthy coping strategies for individuals and the community, and becomes an essential part of future suicide prevention.

Through an interactive, discussion-based program, attendees will learn:

- An overview of suicide, including risk factors and warning signs for youth and adults.
- The scope and impact of a death by suicide, including its effects on family, friends, peers, and the community, and the importance of reducing copycat behavior and future mental health issues.
- The goals, guiding processes, and timeline of a postvention process.
- A comprehensive exploration of the 12 key tasks of a best practice postvention process.
- Our presenters draw from their broad experience in postvention and share highlights on data and comments generated by community members where postventions were successfully implemented.

Six (6) hours of continuing education may be available for this training.

**\*The cost for both of these trainings is \$17,400.**

***Details:***

- Number of Sessions: 2
- Number of hours per session: 7-8
- Modality: In-person
- Training Dates: June 24 and June 26
- Maximum Attendees: 40

***Riverside Policy for Training Cancellations and Rescheduling***

To cancel or reschedule a training, please email [zbuchanan@riversidecc.org](mailto:zbuchanan@riversidecc.org). When a partner schedules a training with us, we immediately begin planning for the training.

Time is valuable for both us and our partners. The following are the terms of Riverside's cancellation and rescheduling policy:

- A 10-day notice is required to cancel or reschedule a training. Should a 10-day cancellation or rescheduling notice not be given, the partner will be required to pay the full invoice.
- In the event that Riverside is the party needing to cancel or reschedule, the partner will not be responsible for paying any additional fees.
- If a rescheduled date is requested by the client, events will be scheduled no less than 45 days in advance of the originally scheduled date.

By signing this agreement, you agree to the terms above.

**Invoicing and Payment:**

An invoice will be sent via email based on the following services:

Trainings:	\$19,600.00
CEUs:	\$750.00

**Total:                   \$20,350.00**

Invoices will be emailed to:

Deborah Johnson, LMFT  
Deputy Chief Clinical Officer  
Tri-City Mental Health Services  
1900 Royalty Dr Suite 180  
Pomona, CA 91767  
909-766-7307  
[djohnson@tricitymhs.org](mailto:djohnson@tricitymhs.org)

Payments are to be made in full within 30 days of date of invoice.

All Payments and Billing Inquires should be directed to:

Riverside Community Care  
270 Bridge Street, Suite 301  
Dedham, MA 02026  
781-239-0071



**Tri-City Mental Health Authority  
AGENDA REPORT**

**DATE:** July 16, 2025

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

**FROM:** Ontson Placide, Executive Director

**BY:** Diana Acosta, CPA, Chief Financial Officer  
Dana Barford, Director of MHSA and Ethnic Services

**SUBJECT:** Consideration of Resolution No. 804 Authorizing the Expenditure of \$5,790,000 from its Capital Facilities and Technological Needs (CFTN) Plan Funds for Property Acquisition and Technology Enhancements

---

Summary:

Tri-City management recommends that the Governing Board approve an updated Capital Facilities and Technological Needs (CFTN) Plan which will allow the use of existing unspent MHSA CFTN Funding to support the upgrading of technology and the purchase of a new building for office space.

Background:

The Capital Facilities and Technological Needs (CFTN) Plan is one of five MHSA Plans. These funds are however considered one-time use funds and in order to continue projects in the CFTN plan, transfers of MHSA CSS Plan funds must be made into the CFTN Plan from available CSS funds. These transfers must first be approved by the stakeholders and then by the Mental Health Commission and the Governing Board. Over the years several transfers have been approved with the intent to utilize the funds as needed for various facility and technology related projects.

In anticipation of the significant changes expected under BHSA, management has identified the need to expand administrative infrastructure agency-wide, with a particular emphasis on supporting BHSA-related functions. While specific positions are still being evaluated, various roles are under consideration to ensure the agency is equipped to manage both the demands of BHSA and broader operational needs. To support this anticipated growth, and the existing needs of the agency improvements in technology and office space are necessary. As such this proposed CFTN Plan includes the purchase of property and upgrades to various technology infrastructure.

Property Acquisition:

For more than a decade, Tri-City Mental Health Authority's main administrative office has been located at 1717 North Indian Hill Blvd., Suite B, Claremont, CA 91711, under a lease agreement with the City of Claremont. The building provides approximately 4,000 square

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

***Consideration of Resolution No. 804 Authorizing the Expenditure of \$5,790,000 from its Capital Facilities and Technological Needs (CFTN) Plan Funds for Property Acquisition and Technology Enhancements***

**July 16, 2025**

**Page 2 of 3**

feet of space and currently accommodates 15 administrative staff, including personnel from Administration, Human Resources, Information Technology, Compliance, and Finance. This space is no longer adequate, requiring staff to share offices and coordinate on-site work schedules based on space availability. With the lease set to expire in September 2025, Tri-City plans to relocate its administrative offices to a larger facility that can better meet current needs and support projected growth.

On May 21, 2025, during a joint session of Tri-City's Mental Health Commission and Governing Board, a study session was held in which the Executive Director outlined the critical need and urgency of this request. To date, more than 21 buildings have been reviewed and considered as potential locations, and the vetting process is ongoing. However, given the time-sensitive nature of the situation—particularly with the upcoming expiration of the lease on the current administrative building—it is essential that Tri-City has funds readily available to act swiftly when an appropriate property becomes available. The proposed allocation of funds is based on the estimated costs associated with purchasing an existing building, its surrounding parking area, and the anticipated expenses for necessary improvements to the facility and its supporting spaces. This plan proposes and estimates that the purchase of a building to house staff will not exceed \$4 million.

Technology Infrastructure:

In order to maintain appropriate and functioning systems, organizations are required to review and refresh applicable technology infrastructure and related components periodically. In addition to keeping up with technology changes, it is necessary to keep up with and consider security risks, compliance requirements, the reliability of data backup, and ensure we stay relevant.

This plan includes a menu of anticipated technology needs as follows:

- Network Infrastructure Refresh
- Agency Security Upgrades
- Staff Equipment Upgrades
- Electronic Health Record Platform
- Enterprise Resource Planning (ERP) Platform

As noted in the plan, the approximate and estimated total costs for these projects is \$1,790,000 and to be expended roughly over one to three years or as needed.

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

***Consideration of Resolution No. 804 Authorizing the Expenditure of \$5,790,000 from its Capital Facilities and Technological Needs (CFTN) Plan Funds for Property Acquisition and Technology Enhancements***

**July 16, 2025**

**Page 3 of 3**

Posting of the Plan:

On Thursday, June 12, 2025, Tri-City posted a draft of the CFTN plan for a 30-day public comment period that will end on July 16, 2025. The document can be found on Tri-City's website as well as on all social media sites including Facebook, Instagram, and Twitter. In addition, the CFTN Plan was distributed to numerous locations including city halls, libraries, and community centers. All written and verbal comments received during this comment period would be reviewed by Tri-City staff and included in the final document, however no comments have been received as of the date of this report.

Fiscal Impact:

The projects included in this CFTN Plan will be covered by existing unspent CFTN MHSA funding.

Recommendation:

Staff recommends that the Governing Board adopt Resolution No. 804 approving the Authority's Capital Facilities Technological Plan, and authorizing the executive director to utilize funds from the CFTN Plan in the approximate amount of \$5,790,000 for property acquisition and technology enhancements.

Attachments

*Attachment 14-A:* Resolution No. 804 - DRAFT

*Attachment 14-B:* Capital Facilities and Technological Needs Plan FY 2025-26

**RESOLUTION NO. 804**

**A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY ADOPTING THE AUTHORITY'S CAPITAL FACILITIES AND TECHNOLOGICAL NEEDS (CFTN) PLAN FOR FY 2025-26, AND AUTHORIZING THE EXPENDITURE OF APPROXIMATELY \$5,790,000 OF CFTN PLAN FUNDS FOR PROPERTY ACQUISITION AND TECHNOLOGY ENHANCEMENTS**

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. Tri-City Mental Health Authority ("TCMHA" or "Authority") desires to adopt the Authority's Capital Facilities and Technological Needs (CFTN) Plan for Fiscal Year 2025-26 and utilize these funds for the proposed acquisition of real estate property and implement upgrades to various technology infrastructure, as described in the CFTN Plan.

B. The CFTN Plan was developed through a Community Planning Process.

2. **Action**

The Governing Board approves the Authority's Capital Facilities and Technological Needs (CFTN) Plan for Fiscal Year 2025-26 and authorizes the Executive Director to spend funds in the approximate amount of \$5,790,000 from the CFTN Plan for costs related to real estate property acquisition and agency-wide technology enhancements.

3. **Adoption**

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on July 16, 2025, by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

\_\_\_\_\_  
JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

\_\_\_\_\_  
STEVEN L. FLOWER, GENERAL COUNSEL

\_\_\_\_\_  
MICAELA P. OLMOS, RECORDING SECRETARY

**ATTACHMENT 14-A**



## Mental Health Services Act (MHSA) Capital Facilities and Technological Needs Project Proposal

*Capital Facilities and Technological Need means projects for the acquisition and development of land and the construction or renovation of buildings or the development, maintenance or improvement of information technology for the provision of Mental Health Services Act administration, services, and supports. (9 C.C.R. § 3200.022).*

### **Subject:**

Tri-City Mental Health Authority respectfully requests approval for the expenditure of Capital Facilities and Technological Needs (CFTN) funds in an amount not to exceed five million seven hundred ninety thousand dollars (\$5,790,000), for property acquisition and technology enhancements.

### **Summary:**

1. Property Acquisition – Authorization to purchase an existing building/property located within the cities of Pomona, Claremont, or La Verne, in an amount not to exceed four million dollars (\$4,000,000), to serve as the new administrative office.
2. Technology Enhancements – Allocation of funds to support upgrades to current and future technology projects, in an amount not to exceed one million seven hundred ninety thousand dollars (\$1,790,000).

### **Background:**

#### **1) Property Acquisition:**

For more than a decade, Tri-City Mental Health Authority's main administrative office has been located at 1717 North Indian Hill Blvd., Suite B, Claremont, CA 91711, under a lease agreement with the City of Claremont. The building provides approximately 4,000 square feet of space and currently accommodates 15 administrative staff, including personnel from Administration, Human Resources, Information Technology, Compliance, and Finance. This space is no longer adequate, requiring staff to share offices and coordinate on-site work schedules based on space availability.

With the lease set to expire in September 2025, Tri-City plans to relocate its administrative offices to a larger facility that can better meet current needs and support projected growth. Over the next 1–2 years, Tri-City anticipates adding 6 to 10 administrative positions. Additionally, there is a growing need for expanded meeting areas to support new hire orientations, staff trainings, and team meetings.

On May 21, 2025, during a joint session of Tri-City's Mental Health Commission and Governing Board, a study session was held in which the Executive Director outlined the critical need and urgency of this request. To date, more than 21 buildings have been reviewed

and considered as potential locations, and the vetting process is ongoing. However, given the time-sensitive nature of the situation—particularly with the upcoming expiration of the lease on the current administrative building—it is essential that Tri-City has funds readily available to act swiftly when an appropriate property becomes available. The proposed allocation of funds is based on the estimated costs associated with purchasing an existing building, its surrounding parking area, and the anticipated expenses for necessary improvements to the facility and its supporting spaces.

**2) Technology Enhancements:**

In June of 2022, Governing Board approved a Capital Facilities and Technology Plan (CFTN) for IT Infrastructure Upgrades that included various anticipated needs and projects to be completed. While many of the original projects and goals were accomplished or completed, there are still various projects that need completion along with additional projects identified as noted below. In order to keep up with the ever-changing technology landscape, Tri-City is required to ensure robust ability to remain technologically relevant in relation to the services we offer and as such Tri-City has identified the following overall technology projects to be completed over the course of 3 to 5 years:

Project	Approximate Amounts
TC MH Network Infrastructure Refresh	\$ 420,000
TC MH Agency Security Upgrades	\$ 245,000
TC MH Staff Equipment Upgrades	\$ 475,000
TC MH EHR Platform	\$ 450,000
TC MH ERP or Equivalent Technology	\$ 200,000
	<u>\$ 1,790,000</u>

**TCMH Network Infrastructure Refresh**

Tri-City Mental Health is undertaking a comprehensive network infrastructure refresh to modernize and secure the foundation of our digital operations. This initiative includes replacing outdated switches, improving building wiring, expanding wireless access with modern access points, and deploying high-availability servers and backup systems. Additionally, a secure edge solution will ensure that remote staff benefit from the same firewall protections as those working onsite.

This upgrade is essential to support the reliability, security, and scalability of our services—particularly as we cloud-based Electronic Health Record systems and expand mobile care capabilities. By investing in this infrastructure, we are ensuring uninterrupted, HIPAA-compliant connectivity across all service locations, ultimately enhancing the quality and consistency of care for the community we serve.

### **TCMH Agency Security Upgrades**

As part of the Workplace Violence Prevention Plan adopted by the Governing Board in 2024, Tri-City Mental Health is pursuing a series of security upgrades to ensure a safer and more responsive environment for staff, clients, and visitors across all agency locations. These upgrades include expanding access control to all buildings, enhancing surveillance systems, and implementing a centralized emergency messaging and paging system integrated with our existing communication platforms.

These efforts reflect our continued commitment to workplace safety, staff well-being, and operational readiness—particularly in behavioral health settings. By proactively strengthening our physical security infrastructure, we are supporting the safe and uninterrupted delivery of essential public health services to the communities we serve.

### **TCMH Staff Equipment Upgrades**

To maintain a secure, efficient, and modern workplace, Tri-City Mental Health is upgrading staff laptops and essential peripherals on a planned five-year replacement cycle. This project includes deploying new HP EliteBook laptops, docking stations, monitors, accessories and software to support staff in both onsite and remote work environments.

Routine equipment refreshes reduce hardware failures, improve system performance, and ensure compatibility with evolving software and security standards. By providing staff with reliable, up-to-date tools, we are strengthening productivity, and ultimately improving the quality and consistency of services delivered to our community.

### **TCMH EHR Platform**

Tri-City Mental Health is exploring a transition to a new Electronic Health Record (EHR) platform to better support the continued growth and complexity of our behavioral health services. While our current system has served us to this point, we are seeking a solution that offers greater flexibility, improved workflow alignment, and enhanced integration with other healthcare and reporting systems.

A modern, purpose-built EHR will enable our staff to work more efficiently, reduce administrative overhead, and strengthen our ability to deliver timely, coordinated care. This

investment supports our long-term commitment to service excellence, regulatory compliance, and better health outcomes for the communities we serve.

### **TCMH ERP or Equivalent Technology**

TCMH ERP Platform Implementation – As Tri-City grows, the need to integrate disparate system and departments in order to work cohesively with one another becomes more evident. An enterprise resource planning platform, or accounting system or equivalent technology system that will allow departments to properly document their workflows more seamless while providing opportunities to better collaborate with previously siloed departments.

### **Stakeholder Involvement:**

Under State MHSA Regulations (9 C.C.R. § 3315(b)), any update to the MHSA Program—outside of the required annual update—must undergo a local review process that includes a 30-day public comment period, although a public hearing is not expressly required. This project proposal was made available for public review from June 12, 2025, through July 16, 2025, via Tri-City’s website and social media platforms, including Facebook, Instagram, and X (formerly Twitter). In addition, the proposal was distributed to various community locations such as city halls, libraries, and community centers. Any feedback received will be shared with staff and considered, as appropriate.

The plan will be presented to the Mental Health Commission on July 8, 2025. Final review and potential adoption by the Tri-City Governing Board is scheduled for July 16, 2025, following the close of the public comment period.

### **Fiscal Impact:**

The total amount required to complete the projects is estimated to be approximately five million seven hundred ninety thousand dollars (\$5,790,000). Utilizing these funds will also help mitigate the risk of future reversion if the funds remain unexpended within the next seven years. If approved, this project proposal will take effect on July 16, 2025.