

Report on Community Hospitals

**Rider 64, House Bill 1
78th Texas Legislature**

Texas Department of State Health Services

Report on Community Hospitals HB 1, Rider 64, 78th Legislature Texas Department of State Health Services

PURPOSE

The 78th Legislature, General Appropriations Act, Rider 64, directed the Texas Department of Mental Health and Mental Retardation, now the Texas Department of State Health Services (DSHS), to develop a study to identify the cost effectiveness of community hospitals across the state, and submit the findings of the study to the Legislature.

FACILITIES

Today, the private psychiatric hospitals in Texas represent approximately 46 percent of the psychiatric bed capacity, while the state hospital system comprises about 54 percent of the bed capacity. In 1995, the numbers were just the opposite, with 63 percent in private psychiatric hospitals and 37 percent in state hospitals. The change is due to a drastic decline in the number of private psychiatric facilities. The decline in private psychiatric hospitals has been impacted by financial, insurance and other market factors. The overall reduction in bed capacity from 1995 to 2005 is 3,843, or a 48 percent decrease.

In addition to state mental health hospitals, Texas appropriates funding for the purchase of inpatient services through what are termed “community hospitals.” There are presently three MHMR community centers that operate community hospitals. The Gulf Coast Center (GCC), located in Galveston, contracts with the University of Texas Medical Branch at Galveston for the provision of 20 beds dedicated to the GCC clients. The MHMR Authority of Harris County contracts with the Department of Psychiatry, University of Texas Health Science Center in Houston, for the operation of University of Texas Harris County Psychiatry Center, with an allocated 184 beds. The Sunrise Canyon Hospital is operated by the Lubbock Regional MHMR Center and has a 30-bed capacity.

METHODOLOGY

The time period used to conduct this study is State Fiscal Year 2004. The principal factors reviewed in this report were a) operational costs, b) bed days, c) admissions, d) average length of stay, and e) unique characteristics. Information gathered from each community hospital was obtained by a written survey process (Appendix I). The survey

requested month-by-month departmental operating costs, monthly bed days, and unique benefits that the community hospital provides to its local service area. For the purpose of comparison, equivalent information on the State Hospitals was extracted from the Mental Health and Mental Retardation Performance report (Appendix II).

Upon receipt of the community centers surveys, DSHS representatives conducted on-site reviews to validate the operational costs submitted.

SUMMARY OF FINDINGS

I. COMMUNITY HOSPITALS

A. Bed Days and Operating Expenses

Below is a summary of the total operating expenses, the bed days, cost per bed day and average length of stay (LOS). Detailed reports that were submitted by the community hospitals can be found in Appendix III.

SUMMARY-FY 04	Total Operating Expense	Bed Days	Cost/Bed Day	Average LOS
Harris County Psychiatric Center-Houston	\$27, 998,440	60,458	\$463.11	7.73
Sunrise Canyon Hospital-Lubbock	\$3,771,710	7,778	\$484.92	9.97
The Gulf Coast Center-Galveston*	\$2,021,892	7,237	\$279.38	8.03

* Based on amount expended and not actual bed cost.

The average length of stay at the community hospitals is relatively short. Gulf Coast Community Regional Hospital reports an average length of stay of 6 days for FY2004, with The University of Texas Harris County Psychiatric Center and Sunrise Canyon Hospital reporting an average length of stay of 11 and 14 days, respectively

The average cost per bed day is difficult to compare due to different methodologies for financing operations and calculating expenses. For example, the bed cost for the Gulf Coast Center in Galveston is not completely reimbursed for by GCC, but UTMB bills for additional inpatient costs that reimburse them for the total inpatient stay. UTMB is getting the flat rate from GCC and any additional revenue they generate from their own billing activities. When the flat rate was negotiated, the state rate, at that time, was used as the benchmark to conduct the negotiations. In addition, GCC is paying for a 100% occupancy rate when in fact they do not always have all 20 beds filled. When GCC exceeds the 20-bed limit a premium is charged by UTMB for the additional bed days.

B. Program Characteristics

Each community hospital submitted information to DSHS about benefits they believe their hospitals offer clients and their communities. The following is a summarization of the information presented by the hospitals. The complete information the hospitals submitted appears in Appendix IV.

Each community hospital benefits from community and local outreach opportunities. For example, The University of Texas Harris County Psychiatric Center provides a variety of service outreach programs that are self-funded, either through grants or through second party payer sources, to assist individuals with successful integration into life outside the hospital (e.g., Harris County Children's Assessment Center Program for Abused Children and Adolescents). The University of Texas Harris County Psychiatric Center also offers community outreach programs to promote The Center as a provider of quality mental healthcare and as a leader in the education of clinical professionals (e.g., Nursing Education). Likewise, Lubbock Regional MHMR Center receives local monies to help support the Sunrise Canyon Hospital triage and admission process because of the positive impact that Sunrise Canyon Hospital has had on the local emergency room. The Sunrise Canyon Hospital has also become an invaluable training ground for mental health professionals and medical personnel.

All three community hospitals offer continuity of care from outpatient to inpatient mental health services and vice versa. For instance, the admission process at Sunrise Canyon Hospital is streamlined, in part, by Lubbock Regional MHMR Center's ability to provide medical clearance on-site at the Sunrise Canyon Hospital, instead of sending people to the emergency room. Also, people served by an Assertive Community Treatment (ACT) team have one physician who directs all their treatment, regardless of whether it is on an inpatient or outpatient basis. Similarly, outpatient psychosocial rehabilitation specialists often serve on a person's inpatient treatment team in order to ensure continuity of care. In addition, Sunrise Canyon Hospital and Lubbock Regional MHMR Center share many administrative departments (and costs) to further promote continuity of care (e.g., contracts management, data management, quality management, records department).

Another unique characteristic of the community hospitals is that each offers local access for family and other supports for patients. For example, Gulf Coast Community Regional Hospital allows for immediate access as needed for family. Sunrise Canyon Hospital is located within the city limits of Lubbock, with the next closest publicly-funded inpatient psychiatric hospital, Big Spring State Hospital, over 100 miles away. Receiving inpatient psychiatric services as close to home as possible allows individuals to remain connected to family members, friends, housing, outpatient services, employment, etc. Having a local community hospital also reduces the cost to the center and local law enforcement of transporting patients to a state hospital.

Both the Gulf Coast Community Regional Hospital and Sunrise Canyon hospital offer healthcare services in addition to psychiatric services. For instance, Gulf Coast

Community Regional Hospital offers emergency room services and indigent healthcare, while patients at Sunrise Canyon Hospital have the opportunity to continue receiving ongoing physical health care from that facility.

Finally, the community hospitals also benefit from jail diversion programs and links to the juvenile probation and court systems. For instance, The University of Texas Harris County Psychiatric Center provides inpatient services to children and adolescents under the jurisdiction of the Harris County Juvenile Probation Department who are in need of psychiatric and psychological care. Similarly, Sunrise Canyon Hospital, through Lubbock Regional MHMR Center, enjoys a positive relationship with the Lubbock Sheriff’s Office, and is able to support jail diversion and competency restoration activities. When magistrate’s warrants are issued, people can be taken directly to the Sunrise Canyon Hospital for assessment, physician evaluation, medical clearance and admission, which greatly shortens the amount of time the entire process takes and, subsequently the time enforcement is detained.

II. STATE MENTAL HEALTH HOSPITALS

SUMMARY-SFY 04	Total Operating Expense	Bed Days	Cost/Bed Day	Average LOS
State Hospitals	\$258,478,094	802,727	\$322.00	26.00

State Hospitals accommodate a larger number of clients than community hospitals, which leads to a greater economy of scale. Because they operate as a hospital system across the state, state mental health hospitals can handle an overflow of clients at one facility by transferring clients to a different state hospital with available beds. State hospitals are able to accommodate some specialized populations including forensic patients, who are patients criminally committed by the courts, children and youth, and patients with dual diagnoses. State hospitals act as a safety net for the indigent population, and they receive clients who have exhausted their benefits at both private and community hospitals. State hospitals also receive patients for whom there are no treatment alternatives in the community. State hospitals provide specialty services that would be otherwise unavailable, and provide cost-effective treatment for the most complex and severe conditions.

The state mental health hospital system had an average length of stay of 26 days at all facilities in FY 04 (*DSHS State Mental Health Facilities Performance Indicators, 4th Quarter FY2004*, <http://www.dshs.state.tx.us/mhreports/MhBook44.pdf>). This average length of stay consists of both civil and criminal code commitments at all hospitals, including the Vernon campus of North Texas State Hospital, which is the state hospital system’s maximum security unit. The average amount of time the criminally committed, or forensic, patients stay at facilities is considerably longer than that of other patients. The forensic population now represents 30% of the patients in state mental health hospitals. The average length of stay for state hospital patients also includes the

population at the Waco Center for Youth, which serves the entire state as a psychiatric residential treatment facility for adolescents ages 13 through 17. Residents at Waco Center for Youth tend to have average lengths of stay of several months. Community hospitals do not serve forensic patients and they do not provide residential treatment for adolescents.

State Hospitals educate a wide segment of the general population, including health and social service providers, about mental illness, and the disease's treatment options. They provide nursing education, including educational training in critical shortage areas. Like the community hospitals, state hospitals participate in outreach activities with local school districts, and community and religious organizations. They are a regional resource for rural communities and smaller urban areas in Texas, providing services such as family overnight lodging, toll-free family access to professionals, flexible family visitation times, teleconferencing for treatment planning, and teleconferencing with community professionals to coordinate care and discharge planning and to provide staff training.

III. CONCLUSION

The report explains a number of facts about these hospitals that can be viewed as advantages and/or disadvantages depending on the perspective. Whether the facilities represent a more cost-effective approach to services is unclear due to the differences in the individual services and business models of each. The difference in size and patient type makes benchmarking against the state hospitals difficult. Serving the mental health needs of Texans requires a systems approach, including local community services, inpatient services, and services for those individuals who may fall somewhere between these services as they are currently defined. What is clear is that transforming the mental health system of this state will continue to take creative solutions that promote effective use of resources and evidence-based practices in addressing the mental health needs of Texas.



APPENDIX I

Eduardo J. Sanchez, M.D., MPH
Commissioner

July 26, 2005

Dear _____,

As you know the FY 2004-2005 General Appropriations Act includes a Rider that directs the Department of State Health Services (DSHS) to evaluate the cost effectiveness of community hospitals (Rider 64 of the former the Texas Department of Mental Health and Mental Retardation appropriation).

DSHS is in the process of conducting this evaluation. In order to do this in an efficient matter we ask that you provide two documents for review prior to an on-site review at your organization. The requested documents are as follows:

- A schedule of monthly expenditures the requested costs associated with the operations of your community hospital for the SFY 2004 period, please use the attached format. We can email the template if requested.
- And, a two-page analysis of the positive and unique benefits your community hospital provides to your service delivery area. Please outline the distinctive services your community hospital provides, as opposed to the services provided by the state hospitals.

Please submit the requested information via e-mail to me no later than Tuesday, August 2, 2005. We anticipate that DSHS staff will be onsite at you offices the week of August 8. This process will be relatively simple and will consist primarily of an examination and analysis of financial information. We will contact you after we receive the information to set up a specific date and time.

We recognize that the operation of each of the community hospitals is distinct. While the financial reporting format may not be specifically tailored to your operations, we are attempting to bring some uniformity to a complex situation. DSHS staff will be willing to work with your staff to resolve any questions you may have throughout the process.

We plan to work with each Center to ensure the accuracy of all the information reported. If you have any questions or concerns, please do not hesitate to contact me directly at 512-206-5444 or via email, Patrick.gillies@dshs.state.tx.us.

Your cooperation is greatly appreciated.

Sincerely,

Patrick M. Gillies, MPA
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Substance Abuse and Mental Health Services
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Cc: Joe Vesowate

APPENDIX II

TEXAS DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
 FINANCIAL AND STATISTICAL INFORMATION
 FOURTH QUARTER, FY 2004 YEAR-TO-DATE

ALL STATE HOSPITALS	Small					Medium				Large	Total	High	Low	Avg
	RGSC - MH	El Paso Psych	Waco	Kerrville	Big Spring	Austin	Terrell	Rusk	San Antonio	North TX				
VOLUME STATISTICS														
Admissions	1,416	1,189	146	669	1,187	4,318	2,290	1,963	2,779	2,527	18,484	4,318	146	1,848
Discharges	1,415	1182	142	664	1,194	4,338	2,257	1,974	2,798	2,508	18,472	4,338	142	1,847
Average LOS at Discharge	11	13	198	88	57	25	42	48	37	93	614	198	11	61
% Occupancy	99%	100%	95%	95%	105%	89%	99%	97%	93%	100%	96%	105%	89%	97%
BED DAYS By LOC														
Adult	16,656	16,545	0	60,887	55,398	87,064	88,261	97,616	90,718	187,352	700,497	187,352	0	70,050
Child	0	1751	27,257	0	0	11,500	11,713	0	11,603	38,406	102,230	38,406	0	14,604
TOTAL BED DAYS	16,656	18,296	27,257	60,887	55,398	98,564	99,974	97,616	102,321	225,758	802,727	225,758	16,656	80,273
STAFFING (actual pay data for quarter)														
OFFICIAL/ADMIN	6.0	7.7	3.4	9.0	7.7	25.2	11.7	17.5	21.9	33.1	143.3	33.1	3.4	14.3
PROFESSIONALS	9.6	11.0	18.6	48.9	33.7	79.8	35.0	40.3	46.9	82.5	406.2	82.5	9.6	40.6
MEDICAL/DENTAL STAFF	2.1	6.1	2.7	9.4	7.8	6.1	12.3	6.3	50.5	6.2	109.6	50.5	2.1	11.0
NURSE	17.5	24.4	13.5	44.4	56.6	102.6	87.5	73.2	79.2	139.1	638.1	139.1	13.5	63.8
LVN	4.0	0.0	6.0	33.5	31.3	43.8	44.6	36.9	10.4	116.3	326.8	116.3	0.0	32.7
PSYCHOLOGIST	1.9	0.0	4.0	8.1	3.0	12.7	8.9	11.4	10.0	25.4	85.4	25.4	0.0	8.5
PROFESSIONAL DIRECT	4.8	10.7	7.5	17.8	19.9	35.4	29.3	20.6	32.0	74.6	252.6	74.6	4.8	25.3
TECHNICIANS	0.9	0.1	0.8	3.5	7.0	4.0	3.9	3.2	2.0	12.2	37.6	12.2	0.1	3.8
PROTECTIVE SERVICES	0.0	0.0	5.6	18.3	4.4	6.6	5.9	7.0	5.2	80.7	133.7	80.7	0.0	13.4
PARA PROFESSIONALS	72.0	67.4	102.2	177.9	207.5	305.3	315.9	359.2	365.7	871.9	2,844.9	871.9	67.4	284.5
ADMIN. SUPPORT	23.7	17.9	17.9	56.7	55.9	82.2	94.2	102.1	88.0	197.3	736.0	197.3	17.9	73.6
SKILLED CRAFT	3.5	2.1	10.5	18.6	27.6	39.1	33.3	33.0	40.5	71.4	279.6	71.4	2.1	28.0
SERVICE MAINTENANCE	19.5	6.1	21.3	57.1	62.3	54.2	85.6	82.1	116.0	197.1	701.2	197.1	6.1	70.1
TOTAL STAFFING	165.4	153.4	214.1	503.3	524.7	797.1	768.1	792.8	868.2	1,907.9	6,695.1	1,907.9	153.4	669.5
Ratio of Staff to Patients	3.01	2.43	2.75	2.84	3.75	2.64	2.76	2.89	2.87	3.10	2.93	3.75	2.43	2.90
<p>NOTE: Account numbers 57500000-57522000 have been broken out into a new rollup expense line for fees and premiums as of fourth quarter FY 2003. This will affect the cost per bed day calculations by removing workers' compensation from benefits, where it has been to date. (See page 2 of this report). NOTE: Rio Grande State Center is included in the state hospital and state school reports and the separate center report has been discontinued.</p>														

APPENDIX II

TEXAS DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
 FINANCIAL AND STATISTICAL INFORMATION
 FOURTH QUARTER, FY 2004 YEAR-TO-DATE

ALL STATE HOSPITALS	Small					Medium				Large	Total	High	Low	Avg
	RGSC - MH	El Paso Psych	Waco	Kerrville	Big Spring	Austin	Terrell	Rusk	San Antonio	North TX				
EXPENSES														
Exempt Salaries	0	0	0	0	0	0	0	0	0	0	0	NA	NA	NA
Classified, Hourly, Other	5,055,947	5,035,686	6,407,769	15,745,138	15,902,591	26,935,972	23,799,530	23,449,176	25,242,144	53,325,732	200,899,685	53,325,732	5,035,686	20,089,968
Benefits	1,609,363	1,104,190	1,609,370	4,055,522	4,160,435	6,496,485	6,241,840	6,456,887	7,083,904	14,694,344	53,512,340	14,694,344	1,104,190	5,351,234
Professional Services	717,920	946,375	107,723	258,747	703,854	919,565	1,200,810	1,523,649	1,138,111	1,385,089	8,901,842	1,523,649	107,723	890,184
Food	60,159	408,927	113,263	232,679	208,030	36,085	425,673	407,141	1,041,266	805,505	3,738,727	1,041,266	36,085	373,873
Drugs	397,433	359,311	360,189	1,458,508	1,100,975	2,039,527	1,965,947	2,301,823	2,203,399	4,263,966	16,451,078	4,263,966	359,311	1,645,108
Medical/Hospital Supplies	27,891	37,436	12,244	81,553	94,255	638,615	158,185	211,571	222,928	500,932	1,985,611	638,615	12,244	198,561
Supplies - Other	133,603	141,151	223,433	455,833	690,402	(20,085)	728,240	627,768	407,385	2,198,838	5,586,569	2,198,838	(20,085)	558,657
Fees and Premiums	166,843	70,063	83,456	437,429	445,908	198,116	778,375	629,920	948,519	1,705,143	5,463,771	1,705,143	70,063	546,377
Maintenance Supplies & Repairs	78,350	44,624	(736,608)	178,489	237,284	682,229	476,205	370,521	935,224	271,983	2,538,301	935,224	(736,608)	253,830
Merchandise for Resale	-411	0	0	(13,653)	(86,904)	(14,669)	18,873	(13,018)	136,341	31,440	58,000	136,341	(86,904)	5,800
Travel	41,359	41,309	10,158	31,436	56,679	14,905	41,314	42,788	29,354	65,054	374,355	65,054	10,158	37,435
Utilities	112,654	332,488	174,451	665,226	730,256	1,579,193	1,303,068	1,118,928	1,138,770	2,084,863	9,239,897	2,084,863	112,654	923,990
Telephone	45,325	27,780	37,749	54,534	59,565	127,908	175,616	94,512	175,102	145,826	943,917	175,616	27,780	94,392
Rental and Leasing	29,333	115,137	18,895	149,766	79,094	153,288	106,271	82,055	148,114	163,905	1,045,858	163,905	18,895	104,586
Purchased/Contracted Services	89,280	176,067	21,345	31,418	61,274	232,949	43,504	69,953	316,016	104,572	1,146,377	316,016	21,345	114,638
Other Expenses	10,383	6,367	22,580	11,193	20,046	18,463	1,911	5,605	100,062	112,097	308,707	112,097	1,911	30,871
Depreciation	149,801	466,438	231,197	844,923	506,049	819,680	909,993	871,918	819,960	1,613,897	7,233,856	1,613,897	149,801	723,386
Interfacility Services	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL FACILITY EXPENSE	8,725,233	9,313,349	8,697,212	24,678,741	24,969,791	40,858,227	38,375,354	38,251,195	42,086,599	83,473,189	319,428,891	83,473,189	8,697,212	31,942,889
DICAP/SWICAP Allocation	1,267,160	216,645	1,133,779	3,064,134	3,375,178	4,550,538	4,321,134	4,121,573	4,799,572	8,283,861	35,133,573	8,283,861	216,645	3,513,357
GRAND TOTAL	9,992,394	9,529,994	9,830,991	27,742,875	28,344,969	45,408,765	42,696,488	42,372,768	46,886,171	91,757,049	354,562,463	91,757,049	9,529,994	35,456,246
Facility Cost Per Bed Day	523.85	509.04	319.08	405.32	450.73	414.53	383.85	391.85	411.32	369.75	397.93	523.85	319.08	397.93
Cost/Bed Day w/ DICAP/SWICAP	599.93	520.88	360.68	455.65	511.66	460.70	427.08	434.08	458.23	406.44	441.70	599.93	360.68	441.70
APPROPRIATED FUNDS COST (for LBB)														
Total Facility Expense	8,725,233	9,313,349	8,697,212	24,678,741	24,969,791	40,858,227	38,375,354	38,251,195	42,086,599	83,473,189	319,428,891			31,942,889
Less: Benefits	1,609,363	1,104,190	1,609,370	4,055,522	4,160,435	6,496,485	6,241,840	6,456,887	7,083,904	14,694,344	53,512,340			5,351,234
Subtotal	7,115,870	8,209,159	7,087,843	20,623,219	20,809,356	34,361,743	32,133,514	31,794,308	35,002,695	68,778,844	265,916,550			26,591,655
Less: Depreciation	149,801	466,438	231,197	844,923	506,049	819,680	909,993	871,918	819,960	1,613,897	7,233,856			723,386
Adjusted Total Expense	6,966,069	7,742,721	6,856,646	19,778,296	20,303,307	33,542,062	31,223,522	30,922,390	34,182,735	67,164,947	258,682,694			25,868,269
Total Bed Days	16,656	18,296	27,257	60,887	55,398	98,564	99,974	97,616	102,321	225,758	802,727			80,273
Adjusted Cost per Bed Day (adjusted total expense divided by total bed days)	418	423	252	325	366	340	312	317	334	298	322		423	322
LBB Average Daily Census	55	63	78	177	140	302	278	274	303	615	2,285		615	229
Alternate Cost per Bed Day (adjusted total exp. divided by LBB ADC x 366 days)	346	336	240	305	396	303	307	308	308	298	309		396	315
Actual Average Daily Census	46	50	75	166	151	270	273	267	280	615	2,193		615	219
Adjusted total expense divided by actual ADC x 366 days	414	423	250	326	367	339	312	316	334	298	322		423	323

See methodology for explanation of data

APPENDIX IIIA

FY 04 GULF COAST CENTER

Community Hospital Selected Expense Items SFY 2004													
Community Center: The Gulf Coast Center - #100													
Expenses	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March	April	May	June	July	Aug.	Total FY2004
Exempt Salaries													-
Classified, Hourly, Other													-
Benefits													-
Professional Services													-
Food													-
Drugs													-
Medical/Hospital Supplies													-
Supplies - Other													-
Fees and Premiums													-
Maintenance Supplies & Repairs													-
Merchandise for Resale													-
Travel													-
Utilities													-
Telephone													-
Rental and Leasing													-
Purchased/Contracted Services	168,741.00	168,741.00	168,741.00	168,741.00	169,657.00	167,825.00	168,741.00	168,741.00	165,741.00	168,741.00	168,741.00	168,741.00	2,021,892.00
Other Expenses													-
Depreciation													-
Medical Records													-
Information Security													-
<i>subtotal direct</i>	\$ 168,741.00	\$ 168,741.00	\$ 168,741.00	\$ 168,741.00	\$ 169,657.00	\$ 167,825.00	\$ 168,741.00	\$ 168,741.00	\$ 165,741.00	\$ 168,741.00	\$ 168,741.00	\$ 168,741.00	\$ 2,021,892.00
Authority Costs (Give Details)	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative Costs	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>total direct</i>	\$ 168,741.00	\$ 168,741.00	\$ 168,741.00	\$ 168,741.00	\$ 169,657.00	\$ 167,825.00	\$ 168,741.00	\$ 168,741.00	\$ 165,741.00	\$ 168,741.00	\$ 168,741.00	\$ 168,741.00	\$ 2,021,892.00
Total Bed Days	639	692	537	611	640	695	711	666	605	632	444	365	7,237
Cost/Bed Day	264.07	243.85	314.23	276.17	265.09	241.47	237.33	253.36	273.95	267.00	380.05	462.30	# 279.38

Facility: The Gulf Coast Center

Period Ending: September 1st, 2003 - November 31st, 2003

Strategy A.1.2				
	Inpatient	Outpatient and Other Programming	Research & Education	Total
EXPENDITURES:				
Exempt Salaries	-	-	-	-
Employee Benefits	-	34,175	-	34,175
Debt Service	-	12,300	-	12,300
Capital Outlay	-	-	-	-
Equity Uses/Transfers	-	-	-	-
Other Operating Expenses	506,436	53,525	-	559,961
TOTAL DIRECT	506,436	100,000	-	606,436
ADMINISTRATIVE OVERHEAD				-
GRAND TOTAL - EXPENDITURES	506,436	100,000	-	606,436
EXPENDITURES PAID WITH MHMR GENERAL REVENUE	506,436	100,000		606,436
METHOD OF FINANCE:				
General Revenue Allocated - Psychiatric Hospital	506,436	100,000	-	606,436
All Other General Revenue Allocated				-
TOTAL GENERAL REVENUE ALLOCATED	506,436	100,000	-	606,436
TOTAL ALLOCATED FEDERAL FUNDS	-	-	-	-
TOTAL OTHER FEDERAL FUNDS	-	-	-	-
TOTAL LOCAL FUNDS	-	-	-	-
GRAND TOTAL METHOD OF FINANCE	506,436	100,000	-	606,436

Outpatient & Other Programming Number Served

242

Avg. Outpatient & Other Programming Cost/Person Served

\$ 413.22

Total Occupied Bed Days

Quarter	Year to Date
n/a	1,764

Average Daily Census (Total Bed Days / Number of Days in Period)

n/a	97%
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Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)

n/a	\$ 287.10
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Inpatient Cost per Bed Day for Allocated General Revenue Only
(Total General Revenue MH/Total Actual Bed Days)

n/a	\$ 287.10
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fy04 1st Quarter	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	20	91	1,764	19.38	97%	242	7.29
Geriatric							
Child/Adolescent							
Other							
Combined Totals	20	91	1,764	19.38	97%	242	7.29

Seclusion/Restraint rate per 1000 bed-days	not available	Number of consumers discharged less than 72 hours after admission	not available
Patient Injury rate per 1000 bed-days	not available	Readmits < 30 days	not available

Facility: The Gulf Coast Center	Period Ending: September 1st, 2003 - February 29th, 2004 (Preliminary)
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Strategy A.1.2				
	Inpatient	Outpatient and Other Programming	Research & Education	Total
EXPENDITURES:				
Exempt Salaries	-	-	-	-
Employee Benefits	-	68,340	-	68,340
Debt Service	-	24,600	-	24,600
Capital Outlay	-	-	-	-
Equity Uses/Transfers	-	-	-	-
Other Operating Expenses	1,012,448	107,060	-	1,119,508
TOTAL DIRECT	1,012,448	200,000	-	1,212,448
ADMINISTRATIVE OVERHEAD				-
GRAND TOTAL - EXPENDITURES	1,012,448	200,000	-	1,212,448

EXPENDITURES PAID WITH MHMR GENERAL REVENUE	1,012,448	200,000		1,212,448
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METHOD OF FINANCE:				
General Revenue Allocated - Psychiatric Hospital	1,012,448	200,000	-	1,212,448
All Other General Revenue Allocated				-
TOTAL GENERAL REVENUE ALLOCATED	1,012,448	200,000	-	1,212,448

TOTAL ALLOCATED FEDERAL FUNDS	-	-	-	-
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TOTAL OTHER FEDERAL FUNDS	-	-	-	-
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TOTAL LOCAL FUNDS	-	-	-	-
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GRAND TOTAL METHOD OF FINANCE	1,012,448	200,000	-	1,212,448
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Outpatient & Other Programming Number Served		461		
Avg. Outpatient & Other Programming Cost/Person Served		\$ 433.84		
		Quarter	Year to Date	
Total Occupied Bed Days		1,600	3,364	
Average Daily Census (Total Bed Days / Number of Days in Period)		88%	92%	
Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)		\$ 316.26	\$ 300.97	
Inpatient Cost per Bed Day for Allocated General Revenue Only (Total General Revenue MH/Total Actual Bed Days)		\$ 316.26	\$ 300.97	

Facility: The Gulf Coast Center				Period Ending: September 1st, 2003 - February 29th, 2004 (Preliminary)			
fy04 Year to Date: through 2nd Quarter	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	20	182	3,364	18.48	92%	461	7.30
Geriatric							
Child/Adolescent							
Other							
Combined Totals	20	182	3,364	18.48	92%	461	7.30

Seclusion/Restraint rate per 1000 bed-days	not available	Number of consumers discharged less than 72 hours after admission	not available
Patient Injury rate per 1000 bed-days	not available	Readmits < 30 days	not available

Facility: The Gulf Coast Center		Period Ending: September 1st, 2003 - May 31st, 2004 (Preliminary)			
Strategy A.1.2					
	Inpatient	Outpatient and Other Programming	Research & Education	Total	
EXPENDITURES:					
Exempt Salaries	-	-	-	-	
Employee Benefits	-	102,510	-	102,510	
Debt Service	-	36,900	-	36,900	
Capital Outlay	-	-	-	-	
Equity Uses/Transfers	-	-	-	-	
Other Operating Expenses	1,518,672	160,590	-	1,679,262	
TOTAL DIRECT	1,518,672	300,000	-	1,818,672	
ADMINISTRATIVE OVERHEAD				-	
GRAND TOTAL - EXPENDITURES	1,518,672	300,000	-	1,818,672	
EXPENDITURES PAID WITH MHMR GENERAL REVENUE	1,518,672	300,000		1,818,672	
METHOD OF FINANCE:					
General Revenue Allocated - Psychiatric Hospital	1,518,672	300,000	-	1,818,672	
All Other General Revenue Allocated				-	
TOTAL GENERAL REVENUE ALLOCATED	1,518,672	300,000	-	1,818,672	
TOTAL ALLOCATED FEDERAL FUNDS	-	-	-	-	
TOTAL OTHER FEDERAL FUNDS	-	-	-	-	
TOTAL LOCAL FUNDS	-	-	-	-	
GRAND TOTAL METHOD OF FINANCE	1,518,672	300,000	-	1,818,672	

Outpatient & Other Programming Number Served

783

Avg. Outpatient & Other Programming Cost/Person Served

\$ 383.14

Quarter	Year to Date
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Total Occupied Bed Days

1,661	5,025
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Average Daily Census (Total Bed Days / Number of Days in Period)

90%	92%
-----	-----

Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)

\$ 304.77	\$ 302.22
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Inpatient Cost per Bed Day for Allocated General Revenue Only
(Total General Revenue MH/Total Actual Bed Days)

\$ 304.77	\$ 302.22
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Facility: The Gulf Coast Center				Period Ending: September 1st, 2003 - February 29th, 2004 (Preliminary)			
fy04 Year to Date: through 3rd Quarter	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	20	274	5,025	18.34	92%	783	6.42
Geriatric							
Child/Adolescent							
Other							
Combined Totals	20	274	5,025	18.34	92%	783	6.42

Seclusion/Restraint rate per 1000 bed-days	not available	Number of consumers discharged less than 72 hours after admission	not available
Patient Injury rate per 1000 bed-days	not available	Readmits < 30 days	not available

Facility: The Gulf Coast Center		Period Ending: September 1st, 2003 - August 31st, 2004 (Preliminary)		
Strategy A.1.2				
	Inpatient	Outpatient and Other Programming	Research & Education	Total
EXPENDITURES:				
Exempt Salaries	-	-	-	-
Employee Benefits	-	102,510	-	102,510
Debt Service	-	36,900	-	36,900
Capital Outlay	-	-	-	-
Equity Uses/Transfers	-	-	-	-
Other Operating Expenses	2,024,900	260,590	-	2,285,490
TOTAL DIRECT	2,024,900	400,000	-	2,424,900
ADMINISTRATIVE OVERHEAD				-
GRAND TOTAL - EXPENDITURES	2,024,900	400,000	-	2,424,900
EXPENDITURES PAID WITH MHMR GENERAL REVENUE	2,024,900	400,000		2,424,900
METHOD OF FINANCE:				
General Revenue Allocated - Psychiatric Hospital	2,024,900	400,000	-	2,424,900
All Other General Revenue Allocated				-
TOTAL GENERAL REVENUE ALLOCATED	2,024,900	400,000	-	2,424,900
TOTAL ALLOCATED FEDERAL FUNDS	-	-	-	-
TOTAL OTHER FEDERAL FUNDS	-	-	-	-
TOTAL LOCAL FUNDS	-	-	-	-
GRAND TOTAL METHOD OF FINANCE	2,024,900	400,000	-	2,424,900

Outpatient & Other Programming Number Served

834

Avg. Outpatient & Other Programming Cost/Person Served

\$ 479.62

Quarter	Year to Date
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Total Occupied Bed Days

1,675	6,700
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Average Daily Census (Total Bed Days / Number of Days in Period)

91%	92%
-----	-----

Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)

\$ 302.23	\$ 302.22
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Inpatient Cost per Bed Day for Allocated General Revenue Only
(Total General Revenue MH/Total Actual Bed Days)

\$ 302.23	\$ 302.22
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Facility: The Gulf Coast Center				Period Ending: September 1st, 2003 - February 29th, 2004 (Preliminary)			
fy04 Year to Date: through 4th qtr (Prelim)	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	20	366	6,700	18.31	92%	834	8.03
Geriatric							
Child/Adolescent							
Other							
Combined Totals	20	366	6,700	18.31	92%	834	8.03

Seclusion/Restraint rate per 1000 bed-days	not available	Number of consumers discharged less than 72 hours after admission	not available
Patient Injury rate per 1000 bed-days	not available	Readmits < 30 days	not available

Facility: The Gulf Coast Center

Period Ending: September 1st, 2003-August 31st, 2004

Strategy A.1.2				
	Inpatient	Outpatient and Other Programming	Research & Education	Total
EXPENDITURES:				
Exempt Salaries	-	136,680	-	136,680
Employee Benefits	-	49,774	-	49,774
Debt Service	-	-	-	-
Capital Outlay	-	-	-	-
Equity Uses/Transfers	-	-	-	-
Other Operating Expenses	2,024,900	213,546	-	2,238,446
TOTAL DIRECT	2,024,900	400,000	-	2,424,900
ADMINISTRATIVE OVERHEAD				-
GRAND TOTAL - EXPENDITURES	2,024,900	400,000	-	2,424,900
WITH MHMR GENERAL REVENUE	2,024,900	400,000		2,424,900
METHOD OF FINANCE:				
General Revenue Allocated - Psychiatric Hospital	2024900	400000	0	2424900
All Other General Revenue Allocated				0
TOTAL GENERAL REVENUE ALLOCATED	2024900	400000	0	2424900
TOTAL ALLOCATED FEDERAL FUNDS	0	0	0	0
TOTAL OTHER FEDERAL FUNDS	0	0	0	0
TOTAL LOCAL FUNDS	0	0	0	0
GRAND TOTAL METHOD OF FINANCE	2024900	400000	0	2424900

Outpatient & Other Programming Number Served

Avg. Outpatient & Other Programming Cost/Person Served

Total Occupied Bed Days

Average Daily Census (Total Bed Days / Number of Days in Period)

Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)

Inpatient Cost per Bed Day for Allocated General Revenue Only

(Total General Revenue MH/Total Actual Bed Days)

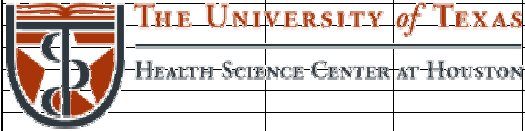
	825
\$	484.85
Quarter	Year to Date
n/a	6,570
n/a	90%
n/a	\$ 308.20
n/a	\$ 308.20

	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	20	365	6,570	18.00	90%	825	7.96
Geriatric							
Child/Adolescent							
Other							
Combined Totals	20	365	6,570	18.00	90%	825	7.96

Seclusion/Restraint rate per 1000 bed-days	not available	Number of consumers discharged less than 72 hours after admission	not available
Patient Injury rate per 1000 bed-days	not available	Readmits < 30 days	not available

APPENDIX IIIB

**FY 04 HARRIS COUNTY PSYCHIATRIC CENTER
MHMRA OF HARRIS COUNTY**



Harris County Psychiatric Center

Selected Expense Items FY 2004

Expenses	Sep-03	Oct-03	Nov-03	Dec-03	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Jul-04	Aug-04	YTD Totals	YTD Total Cost/Bed Day
Faculty Salaries	238,301.10	242,946.91	242,953.71	234,620.22	226,483.16	274,175.40	231,613.61	241,148.16	230,664.99	256,638.16	232,431.93	235,191.87	2,887,169.22	
Classified, Hourly, Other	1,215,012.85	1,175,611.89	1,176,323.23	1,222,585.81	1,200,333.95	1,210,617.41	1,170,926.39	1,181,737.95	1,223,079.79	1,245,415.73	1,221,583.43	1,232,940.64	14,476,169.07	239.44
Benefits	323,066.82	187,285.21	187,780.71	198,051.64	143,997.26	200,550.10	180,494.81	101,421.70	281,920.34	202,628.12	190,961.54	1,599,190.78	3,797,349.03	62.81
Professional Services	65,664.19	32,848.48	57,371.24	52,543.25	75,550.21	36,133.23	43,970.98	34,052.42	28,035.16	28,348.66	64,555.00	54,306.50	573,379.32	9.48
Food	106,225.19	70,648.76	50,620.54	102,812.62	60,977.96	102,578.97	109,027.15	110,765.02	111,996.52	105,026.64	102,270.11	68,973.89	1,101,923.37	18.23
Drugs	81,803.61	58,998.83	161,364.01	23,126.76	179,338.35	89,336.26	87,476.08	92,489.63	97,756.54	83,033.81	84,671.33	110,540.62	1,149,935.83	19.02
Medical/Hospital Supplies	38,544.28	59,378.99	17,426.20	18,052.62	96,343.51	63,959.77	74,865.65	83,919.20	74,496.12	69,744.47	78,625.57	(26,974.44)	648,381.94	10.72
Supplies - Other	4,255.76	7,107.41	1,318.47	41,437.14	6,496.88	9,134.29	17,084.06	8,391.51	8,226.88	9,654.61	14,912.24	(29,280.94)	98,738.31	1.63
Fees & Premiums	23,386.00	39,151.65	1,979.20	3,685.89	7,054.54	4,358.64	1,866.88	7,129.73	8,221.26	28,652.08	2,063.27	4,253.77	131,802.91	2.18
Maintenance Supplies & Repairs	19,958.18	45,923.16	59,976.41	30,192.20	23,534.27	31,546.65	55,756.81	29,970.27	27,385.26	22,119.14	89,675.41	70,356.30	506,394.06	8.38
Travel	-	3,718.85	1,539.11	9,573.86	708.18	1,218.91	292.78	-	-	-	-	972.50	18,024.19	0.30
Utilities	27,962.46	27,716.17	39,696.83	30,327.30	3,764.69	60,978.72	13,518.85	31,670.16	29,487.14	33,043.20	32,087.73	28,933.30	359,186.55	5.94
Telecommunications	-	891.12	20,908.32	26,871.04	80.27	21,267.34	5,525.66	18,609.78	19,485.80	9,922.09	23,255.99	15,760.81	162,578.22	2.69
Rental and Leasing	-	-	1,621.44	810.72	810.72	1,814.52	1,621.44	1,714.07	1,833.94	810.72	1,626.72	11,400.00	24,064.29	0.40
Purchased/Contracted Services	143,375.25	195,747.03	143,550.81	193,680.72	197,441.62	153,239.04	124,933.19	274,396.87	129,108.67	200,442.56	117,789.54	273,822.59	2,147,527.89	35.52
Other Expenses	273.18	4,303.97	4,208.51	8,308.99	14,674.03	15,356.40	7,757.31	10,757.56	8,593.27	6,962.71	11,910.36	2,261.63	95,367.92	1.58
Pers Prop/Depreciation	38,143.60	37,892.21	37,020.21	36,282.12	39,455.30	39,303.98	40,360.47	39,870.20	40,474.28	41,153.35	42,100.53	42,164.36	474,220.61	7.84
Security Services	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	857,673.00	14.19
Administrative Costs	112,405.94	112,405.94	112,405.94	112,405.94	114,056.66	115,707.38	115,687.37	115,707.36	115,790.70	115,874.04	116,460.48	116,816.28	1,375,724.03	22.76
TOTALS	2,271,550.06	2,131,102.42	2,146,583.93	2,182,221.37	2,236,091.15	2,228,574.36	2,122,638.63	2,214,076.18	2,277,364.42	2,274,304.68	2,266,022.00	3,647,911.34	27,998,440.54	463.11
Total Bed Days	5,052	5,259	4,845	4,729	5,107	4,698	4,976	5,094	5,302	4,993	5,239	5,164	60,458	
COSTS/BED DAY	449.63	405.23	443.05	461.46	437.85	474.37	426.58	434.64	429.53	455.50	432.53	706.41	463.11	

Facility: MHMRA of Harris County		Period Ending: 30 Novemeber 2003		
		A .1.3	A.1.1	
		Inpatient	Outpatient and Other Programming	Total
EXPENDITURES:				
	Exempt Salaries			0
	Employee Benefits			0
	Debt Service			0
	Capital Outlay			0
	Equity Uses/Transfers			0
	Other Operating Expenses			0
	TOTAL DIRECT	0	0	0
	ADMINISTRATIVE OVERHEAD			0
	GRAND TOTAL - EXPENDITURES	4,951,498	0	4,951,498
EXPENDITURES PAID WITH MHR GENERAL REVENUE				
METHOD OF FINANCE:				
	General Revenue Allocated - Psychiatric Hospital			
	All Other General Revenue Allocated			0
	TOTAL GENERAL REVENUE ALLOCATED	3,944,925	0	3,944,925
TOTAL ALLOCATED FEDERAL FUNDS				
				0
TOTAL OTHER FEDERAL FUNDS				
				0
TOTAL LOCAL FUNDS				
		1,006,573		1,006,573
GRAND TOTAL METHOD OF FINANCE				
		4,951,498	0	4,951,498
Outpatient & Other Programming Number Served				
Avg. Outpatient & Other Programming Cost/Person Served				
			Year to Date	
Total Occupied Bed Days			12,241	12241
Average Daily Census (Total Bed Days / Number of Days in Period)			134.52	134.52
Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)			404.50	404.50
Inpatient Cost per Bed Day for Allocated General Revenue Only (Total General Revenue MH/Total Actual Bed Days)			322.27	322.27

	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	124	91	11,370	124.95	101%	1090	10.43
Geriatric		91	0	0.00		0	
Child/Adolescent	14	91	871	9.57	68%	113	7.71
Other	5	91	0	0.00	0%	0	
Combined Totals	143	91	12,241	134.52	94%	1203	10.18
Seclusion/Restraint rate per 1000 bed-days		2.45	Number of consumers discharged less than 72 hours after admission				134
Patient Injury rate per 1000 bed-days		1.39	Readmits < 30 days				148
<p>The 143 beds under the contract between HCPC and MHMRA of Harris County are allocated as follows: Child/Adolescent - 8 to 14 beds per day MR/MI Dual Diagnosis -- 2 to 5 beds per day Adult - 124 to 133 beds per day depending on the usage in the two categories above. For the purposes of this worksheet, maximum numbers have been used for Child/Adolescent and MR/MI.</p>							

Facility: MHMRA of Harris County		Period Ending:	29-Feb-04	
		A .1.3	A.1.1	
		Inpatient	Outpatient and Other Programming	Total
EXPENDITURES:				
	Exempt Salaries			0
	Employee Benefits			0
	Debt Service			0
	Capital Outlay			0
	Equity Uses/Transfers			0
	Other Operating Expenses			0
	TOTAL DIRECT	0	0	0
	ADMINISTRATIVE OVERHEAD			0
	GRAND TOTAL - EXPENDITURES	9,903,092	0	9,903,092
	EXPENDITURES PAID WITH MHMR GENERAL REVENUE			0
METHOD OF FINANCE:				
	General Revenue Allocated - Psychiatric Hospital			
	All Other General Revenue Allocated			0
	TOTAL GENERAL REVENUE ALLOCATED	7,889,850	0	7,889,850
	TOTAL ALLOCATED FEDERAL FUNDS			0
	TOTAL OTHER FEDERAL FUNDS			0
	TOTAL LOCAL FUNDS	2,013,242		2,013,242
	GRAND TOTAL METHOD OF FINANCE	9,903,092	0	9,903,092
	Outpatient & Other Programming Number Served			
	Avg. Outpatient & Other Programming Cost/Person Served			
				Year to Date
	Total Occupied Bed Days		11,597	23,838
	Average Daily Census (Total Bed Days / Number of Days in Period)		127.44	130.98
	Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)		426.97	415.43
	Inpatient Cost per Bed Day for Allocated General Revenue Only (Total General Revenue MH/Total Actual Bed Days)		340.17	330.98

	1	2	3	4	5	6	7			
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay			
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)			
Adult	124	91	10,832	119.03	96%	1060	10.22			
Geriatric		91	0	0.00		0				
Child/Adolescent	14	91	765	8.41	60%	99	7.73			12/1/2003
Other	5	91	0	0.00	0%	0				2/29/2004 90.00
Combined Totals	143	91	11,597	127.44	89%	1159	10.01			
Seclusion/Restraint rate per 1000 bed-days		5.43	Number of consumers discharged less than 72 hours after admission				124			
Patient Injury rate per 1000 bed-days		1.47	Readmits < 30 days				114			
<p>The 143 beds under the contract between HCPC and MHMRA of Harris County are allocated as follows: Child/Adolescent - 8 to 14 beds per day MR/MI Dual Diagnosis -- 2 to 5 beds per day Adult - 124 to 133 beds per day depending on the usage in the two categories above. For the purposes of this worksheet, maximum numbers have been used for Child/Adolescent and MR/MI.</p>										

Facility: MHMRA of Harris County		Period Ending:	31-May-04	
		A .1.3	A.1.1	
		Inpatient	Outpatient and Other Programming	Total
EXPENDITURES:				
	Exempt Salaries			0
	Employee Benefits			0
	Debt Service			0
	Capital Outlay			0
	Equity Uses/Transfers			0
	Other Operating Expenses			0
	TOTAL DIRECT	0	0	0
	ADMINISTRATIVE OVERHEAD			0
	GRAND TOTAL - EXPENDITURES	14,854,687	0	14,854,687
EXPENDITURES PAID WITH MHR GENERAL REVENUE				0
METHOD OF FINANCE:				
	General Revenue Allocated - Psychiatric Hospital			
	All Other General Revenue Allocated			0
	TOTAL GENERAL REVENUE ALLOCATED	11,834,775	0	11,834,775
	TOTAL ALLOCATED FEDERAL FUNDS			0
	TOTAL OTHER FEDERAL FUNDS			0
	TOTAL LOCAL FUNDS	3,019,912		3,019,912
	GRAND TOTAL METHOD OF FINANCE	14,854,687	0	14,854,687
Outpatient & Other Programming Number Served				
Avg. Outpatient & Other Programming Cost/Person Served				
				Year to Date
Total Occupied Bed Days			12,281	36,119
Average Daily Census (Total Bed Days / Number of Days in Period)			133.49	131.82
Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)			403.19	411.27
Inpatient Cost per Bed Day for Allocated General Revenue Only (Total General Revenue MH/Total Actual Bed Days)			321.22	327.66

	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	124	92	11,390	123.80	100%	1057	10.78
Geriatric		92	0	0.00		0	
Child/Adolescent	14	92	891	9.68	69%	97	9.19
Other	5	92	0	0.00	0%	0	
Combined Totals	143	92	12,281	133.49	93%	1154	10.64
Seclusion/Restraint rate per 1000 bed-days		5.78	Number of consumers discharged less than 72 hours after admission				130
Patient Injury rate per 1000 bed-days		0.49	Readmits < 30 days				137
<p>The 143 beds under the contract between HCPC and MHMRA of Harris County are allocated as follows: Child/Adolescent - 8 to 14 beds per day MR/MI Dual Diagnosis -- 2 to 5 beds per day Adult - 124 to 133 beds per day depending on the usage in the two categories above. For the purposes of this worksheet, maximum numbers have been used for Child/Adolescent and MR/MI.</p>							

Facility: MHMRA of Harris County		Period Ending:	31-Aug-04	
		A .1.3	A.1.1	
		Inpatient	Outpatient and Other Programming	Total
EXPENDITURES:				
	Exempt Salaries			0
	Employee Benefits			0
	Debt Service			0
	Capital Outlay			0
	Equity Uses/Transfers			0
	Other Operating Expenses			0
	TOTAL DIRECT	0	0	0
	ADMINISTRATIVE OVERHEAD			0
	GRAND TOTAL - EXPENDITURES	19,806,281	0	19,806,281
EXPENDITURES PAID WITH MHR GENERAL REVENUE				0
METHOD OF FINANCE:				
	General Revenue Allocated - Psychiatric Hospital			
	All Other General Revenue Allocated			0
	TOTAL GENERAL REVENUE ALLOCATED	15,779,700	0	15,779,700
	TOTAL ALLOCATED FEDERAL FUNDS			0
	TOTAL OTHER FEDERAL FUNDS			0
	TOTAL LOCAL FUNDS	4,026,581		4,026,581
	GRAND TOTAL METHOD OF FINANCE	19,806,281	0	19,806,281
Outpatient & Other Programming Number Served				
Avg. Outpatient & Other Programming Cost/Person Served				
				Year to Date
Total Occupied Bed Days			12,732	48,851
Average Daily Census (Total Bed Days / Number of Days in Period)			138.39	133.47
Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)			388.91	405.44
Inpatient Cost per Bed Day for Allocated General Revenue Only (Total General Revenue MH/Total Actual Bed Days)			309.84	323.02



THE UNIVERSITY of TEXAS
HEALTH SCIENCE CENTER AT HOUSTON

Harris County Psychiatric Center

Selected Expense Items FY 2004

Expenses	Sep-03	Oct-03	Nov-03	Dec-03	Jan-04	Feb-04	Mar-04	Apr-04
Faculty Salaries	238,301.10	242,946.91	242,953.71	234,620.22	226,483.16	274,175.40	231,613.61	241,148.16
Classified, Hourly, Other	1,215,012.85	1,175,611.89	1,176,323.23	1,222,585.81	1,200,333.95	1,210,617.41	1,170,926.39	1,181,737.95
Benefits	323,066.82	187,285.21	187,780.71	198,051.64	143,997.26	200,550.10	180,494.81	101,421.70
Professional Services	65,664.19	32,848.48	57,371.24	52,543.25	75,550.21	36,133.23	43,970.98	34,052.42
Food	106,225.19	70,648.76	50,620.54	102,812.62	60,977.96	102,578.97	109,027.15	110,765.02
Drugs	81,803.61	58,998.83	161,364.01	23,126.76	179,338.35	89,336.26	87,476.08	92,489.63
Medical/Hospital Supplies	38,544.28	59,378.99	17,426.20	18,052.62	96,343.51	63,959.77	74,865.65	83,919.20
Supplies - Other	4,255.76	7,107.41	1,318.47	41,437.14	6,496.88	9,134.29	17,084.06	8,391.51
Fees & Premiums	23,386.00	39,151.65	1,979.20	3,685.89	7,054.54	4,358.64	1,866.88	7,129.73
Maintenance Supplies & Repairs	19,958.18	45,923.16	59,976.41	30,192.20	23,534.27	31,546.65	55,756.81	29,970.27
Travel	-	3,718.85	1,539.11	9,573.86	708.18	1,218.91	292.78	-
Utilities	27,962.46	27,716.17	39,696.83	30,327.30	3,764.69	60,978.72	13,518.85	31,670.16
Telecommunications	-	891.12	20,908.32	26,871.04	80.27	21,267.34	5,525.66	18,609.78
Rental and Leasing	-	-	1,621.44	810.72	810.72	1,814.52	1,621.44	1,714.07
Purchased/Contracted Services	143,375.25	195,747.03	143,550.81	193,680.72	197,441.62	153,239.04	124,933.19	274,396.87
Other Expenses	273.18	4,303.97	4,208.51	8,308.99	14,674.03	15,356.40	7,757.31	10,757.56
Pers Prop/Depreciation	38,143.60	37,892.21	37,020.21	36,282.12	39,455.30	39,303.98	40,360.47	39,870.20
Security Services	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75	71,472.75
Administrative Costs	112,405.94	112,405.94	112,405.94	112,405.94	114,056.66	115,707.38	115,687.37	115,707.36
TOTALS	2,271,550.06	2,131,102.42	2,146,583.93	2,182,221.37	2,236,091.15	2,228,574.36	2,122,638.63	2,214,076.18
Total Bed Days	5,052	5,259	4,845	4,729	5,107	4,698	4,976	5,094

APPENDIX III C

**FY 04 SUNRISE CANYON HOSPITAL
LUBBOCK REGIONAL MHMR CENTER**

Community Hospital Selected Expense Items SFY 2004															
Lubbock Regional MHMR Center-Sunrise Canyon Hospital															
Expenses	(1)	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March	April	May	June	July	Aug.	YTD	YTD Total Cost/Bed Day
Exempt Salaries	(2)														-
Classified, Hourly, Other		90,245	93,148	90,593	109,019	83,458	89,447	93,196	110,044	105,345	155,507	132,323	132,081	1,284,406	165.13
Benefits		28,040	28,527	28,468	29,536	26,725	27,508	30,965	29,545	29,414	35,851	32,077	24,290	350,946	45.12
Professional Services		58,767	62,196	70,774	63,859	67,504	80,156	50,200	85,255	46,880	44,003	64,952	68,001	762,547	98.04
Food		6,566	6,703	5,321	8,151	7,017	4,946	7,575	6,850	8,887	8,360	5,606	9,500	85,482	10.99
Drugs		12,101	16,466	1,135	29,425	12,142	17,927	13,842	27,350	26,306	30,083	25,276	20,764	232,817	29.93
Medical/Hospital Supplies		117	393	554	355	1,198	256	273	650	537	1,034	326	269	5,962	0.77
Supplies - Other		2,089	2,780	2,497	2,339	1,915	1,843	1,179	1,395	1,622	1,465	2,473	12,928	34,525	4.44
Fees and Premiums														-	-
Maintenance Supplies & Repairs		2,139	3,149	2,136	1,533	1,770	1,598	1,554	3,010	842	2,918	915	2,754	24,318	3.13
Merchandise for Resale														-	-
Travel				30	136	1,002	1,057		1,162	215	43	488	401	4,534	0.58
Utilities				90										90	0.01
Telephone	(3)	285	335	275	292	347	548	618	524	518	634	501	1,051	5,928	0.76
Rental and Leasing		637	867	150	918	1,499	579	853	480	663	877	727	872	9,122	1.17
Purchased/Contracted Services		6,551	9,739	1,679	11,823	13,296	7,302	9,083	3,998	12,961	11,480	9,516	12,150	109,580	14.09
Other Expenses		1,995	5,438	1,247	1,721	2,878	3,935	2,134	3,171	2,744	5,041	7,195	22,506	60,005	7.71
subtotal		209,533	229,742	204,949	259,107	220,752	237,102	211,472	273,434	236,934	297,296	282,375	307,567	2,970,261	381.88
Allocated Share of Building Costs				78,492			71,215			65,359			74,500	289,566	37.23
Allocated Share of Chief Operating Officer				8,607			9,178			11,754			30,259	59,798	7.69
Depreciation	(4)						10,311						8,955	19,266	2.48
Medical Records Information Security	(5)													-	-
Authority Costs (Give Details)	(6)			43,018			43,440			41,478			49,706	177,642	22.84
Administrative Costs	(6)			55,354			62,007			61,877			75,939	255,177	32.81
Total		209,533	229,742	390,420	259,107	220,752	433,253	211,472	273,434	417,402	297,296	282,375	546,926	3,771,710	484.92
Total Bed Days		648	842	510	408	648	782	343	678	887	497	680	855	7,778	
Cost/Bed Day		323	273	766	635	341	554	617	403	471	598	415	640	485	
(1) Expenses do not tie exactly to final FY04 Report III as external audit was not finalized until after the report was due to the state in late December 2004.															
(2) Exempt salaries are not captured separately from other salary categories.															
(3) Telephone costs include only mobile phones, paging and advertising. Other phone expense is included in the building allocation.															
(4) Depreciation expense is not recorded on Report III. In order to show applicable depreciation expense here, information from the corresponding semi-annual Cost Accounting Methodology (CAM) reports was used and is reflective of the hospital only.															
(5) Hospital charts are maintained by the unit clerk. The applicable expense is included in various other expense line items.															
(6) Report III does not allocate authority and administrative costs directly to the hospital strategy, as it does to the other strategies. In order to reflect the hospital's share of these costs, an allocation is made based upon the ration between the hospital costs to total costs receiving an overhead allocation. The amount determined to apply to the hospital is reported in the hospital strategy with the other direct costs.															

COMMUNITY HOSPITAL FINANCIAL REPORT

Facility: Lubbock Regional MHMR Center

Period Ending: FY 2004 1st Quarter

Strategy A.1.3				
	Inpatient	Outpatient and Other Programming	Research & Education	Total
EXPENDITURES:				
Exempt Salaries	291331			291331
Employee Benefits	90519			90519
Debt Service	29			29
Capital Outlay	21			21
Equity Uses/Transfers				0
Other Operating Expenses	331091			331091
TOTAL DIRECT	712991	0	0	712991
ADMINISTRATIVE OVERHEAD	98372			98372
GRAND TOTAL - EXPENDITURES	811363	0	0	811363
EXPENDITURES PAID WITH MHMR GENERAL REVENUE				
				0
METHOD OF FINANCE:				
General Revenue Allocated - Psychiatric Hospital	694762			694762
All Other General Revenue Allocated				0
TOTAL GENERAL REVENUE ALLOCATED	694762	0	0	694762
TOTAL ALLOCATED FEDERAL FUNDS				
				0
TOTAL OTHER FEDERAL FUNDS				
	539			539
TOTAL LOCAL FUNDS				
	116062			116062
GRAND TOTAL METHOD OF FINANCE				
	811363	0	0	811363

Outpatient & Other Programming Number Served
 Avg. Outpatient & Other Programming Cost/Person Served

Total Occupied Bed Days

Quarter	Year to Date
2,000	2000

Average Daily Census (Total Bed Days / Number of Days in Period)

21.98	21.98
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Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)

\$ 405.68	\$ 405.68
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Inpatient Cost per Bed Day for Allocated General Revenue Only
 (Total General Revenue MH/Total Actual Bed Days)

\$ 347.38	\$ 347.38
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COMMUNITY HOSPITAL OPERATIONS REPORT

	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	30	91	2,000	21.98	73%	181	11.05
Geriatric							
Child/Adolescent							
Other							
Combined Totals	30	91	2,000	21.98	73%	181	11.05

Seclusion/Restraint rate per 1000 bed-day:	13.5	Number of consumers discharged less than 72 hours after admission:	64
Patient Injury rate per 1000 bed-day:	0.5	Readmits < 30 days	18

COMMUNITY HOSPITAL FINANCIAL REPORT

Facility: Lubbock Regional MHMR Center

Period Ending: FY 2004 2nd Qtr

Strategy A.1.3				
	Inpatient	Outpatient and Other Programming	Research & Education	Total
EXPENDITURES:				
Exempt Salaries	592744			592744
Employee Benefits	180819			180819
Debt Service	92			92
Capital Outlay	1159			1159
Equity Uses/Transfers				0
Other Operating Expenses	691745			691745
TOTAL DIRECT	1466559	0	0	1466559
ADMINISTRATIVE OVERHEAD	203821			203821
GRAND TOTAL - EXPENDITURES	1670380	0	0	1670380
EXPENDITURES PAID WITH MHMR GENERAL REVENUE				
				0
METHOD OF FINANCE:				
General Revenue Allocated - Psychiatric Hospital	1392166			1392166
All Other General Revenue Allocated				0
TOTAL GENERAL REVENUE ALLOCATED	1392166	0	0	1392166
TOTAL ALLOCATED FEDERAL FUNDS				
				0
TOTAL OTHER FEDERAL FUNDS				
	1124			1124
TOTAL LOCAL FUNDS				
	277090			277090
GRAND TOTAL METHOD OF FINANCE				
	1670380	0	0	1670380

Outpatient & Other Programming Number Served
Avg. Outpatient & Other Programming Cost/Person Served

Total Occupied Bed Days

	Quarter		Year to Date
	1,838		3838

Average Daily Census (Total Bed Days / Number of Days in Period)

	20.20		21.09
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Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)

	\$ 467.37		\$ 435.22
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Inpatient Cost per Bed Day for Allocated General Revenue Only
(Total General Revenue MH/Total Actual Bed Days)

	\$ 379.44		\$ 362.73
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COMMUNITY HOSPITAL OPERATIONS REPORT

	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	30	182	3,838	21.09	70%	346	11.09
Geriatric							
Child/Adolescent							
Other							
Combined Totals	30	182	3,838	21.09	70%	346	11.09

Seclusion/Restraint rate per 1000 bed-day:	9.12	Number of consumers discharged less than 72 hours after admission:	103
Patient Injury rate per 1000 bed-day:	0.78	Readmits < 30 days	28

COMMUNITY HOSPITAL FINANCIAL REPORT

Facility: **Lubbock Regional MHMR Center**

Period Ending: **FY 2004 3rd Qtr**

Strategy A.1.3				
	Inpatient	Outpatient and Other Programming	Research & Education	Total
EXPENDITURES:				
Exempt Salaries	921341			921341
Employee Benefits	277709			277709
Debt Service	141			141
Capital Outlay	1361			1361
Equity Uses/Transfers				0
Other Operating Expenses	1036238			1036238
TOTAL DIRECT	2236790	0	0	2236790
ADMINISTRATIVE OVERHEAD	307173			307173
GRAND TOTAL - EXPENDITURES	2543963	0	0	2543963
EXPENDITURES PAID WITH MHMR GENERAL REVENUE				
				0
METHOD OF FINANCE:				
General Revenue Allocated - Psychiatric Hospital	2159349			2159349
All Other General Revenue Allocated				0
TOTAL GENERAL REVENUE ALLOCATED	2159349	0	0	2159349
TOTAL ALLOCATED FEDERAL FUNDS				
				0
TOTAL OTHER FEDERAL FUNDS				
	1241			1241
TOTAL LOCAL FUNDS				
	383373			383373
GRAND TOTAL METHOD OF FINANCE				
	2543963	0	0	2543963

Outpatient & Other Programming Number Served
Avg. Outpatient & Other Programming Cost/Person Served

Total Occupied Bed Days

	Quarter		Year to Date
	1,908		5746

Average Daily Census (Total Bed Days / Number of Days in Period)

	20.74		20.97
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Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)

	\$ 457.85		\$ 442.74
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Inpatient Cost per Bed Day for Allocated General Revenue Only
(Total General Revenue MH/Total Actual Bed Days)

	\$ 402.09		\$ 375.80
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COMMUNITY HOSPITAL OPERATIONS REPORT

	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	30	274	5,746	20.97	70%	555	10.35
Geriatric							
Child/Adolescent							
Other							
Combined Totals	30	274	5,746	20.97	70%	555	10.35

Seclusion/Restraint rate per 1000 bed-day:	9.22	Number of consumers discharged less than 72 hours after admission:	152
Patient Injury rate per 1000 bed-day:	1.74	Readmits < 30 days	52

COMMUNITY HOSPITAL FINANCIAL REPORT

Facility: **Lubbock Regional MHMR Center**

Period Ending: **FY 2004 4th Qtr**

Strategy A.1.3				
	Inpatient	Outpatient and Other Programming	Research & Education	Total
EXPENDITURES:				
Exempt Salaries	1355909			1355909
Employee Benefits	387302			387302
Debt Service	246			246
Capital Outlay	20368			20368
Equity Uses/Transfers				0
Other Operating Expenses	1372974			1372974
TOTAL DIRECT	3136799	0	0	3136799
ADMINISTRATIVE OVERHEAD	426828			426828
GRAND TOTAL - EXPENDITURES	3563627	0	0	3563627
EXPENDITURES PAID WITH MHMR GENERAL REVENUE				
				0
METHOD OF FINANCE:				
General Revenue Allocated - Psychiatric Hospital	2916655			2916655
All Other General Revenue Allocated				0
TOTAL GENERAL REVENUE ALLOCATED	2916655	0	0	2916655
TOTAL ALLOCATED FEDERAL FUNDS				
				0
TOTAL OTHER FEDERAL FUNDS				
	1094			1094
TOTAL LOCAL FUNDS				
	645881			645881
GRAND TOTAL METHOD OF FINANCE				
	3563630	0	0	3563630

Outpatient & Other Programming Number Served
Avg. Outpatient & Other Programming Cost/Person Served

Total Occupied Bed Days

Quarter	Year to Date
2,032	7778

Average Daily Census (Total Bed Days / Number of Days in Period)

22.09	21.25
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Inpatient Cost per Bed Day (Total Expenditures/Total Actual Bed Days)

\$ 501.80	\$ 458.17
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Inpatient Cost per Bed Day for Allocated General Revenue Only
(Total General Revenue MH/Total Actual Bed Days)

\$ 372.69	\$ 374.99
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COMMUNITY HOSPITAL OPERATIONS REPORT

	1	2	3	4	5	6	7
Inpatient Beds	# Beds	Days in Period	Actual Occupied Bed Days	Average Monthly Occupied Beds	Occupancy Rate	Total Admissions	Average Length of Stay
Calculation Method	(Count)		(Count)	(Column 3 Divided by Column 2)	Column 3 divided by (Column 1 times Column 2)	(Count)	(Column 3 divided by Column 6)
Adult	30	366	7,778	21.25	71%	780	9.97
Geriatric							
Child/Adolescent							
Other							
Combined Totals	30	366	7,778	21.25	71%	780	9.97

Seclusion/Restraint rate per 1000 bed-day:	8.61	Number of consumers discharged less than 72 hours after admission:	210
Patient Injury rate per 1000 bed-day:	2.44	Readmits < 30 days	75

APPENDIX IV

UNIQUE ASPECTS & BEST PRACTICES

The following was submitted by the Community Hospitals when asked to submit an analysis of the positive and unique benefits that the community hospital provides to their service delivery area as well as outline the distinctive services that they provide.

University of Texas Harris County Psychiatric Center

The University of Texas Harris County Psychiatric Center (UTHCPC) is located in a major metropolitan area, UTHCPC is able to provide local mental health care services for children, adolescents and adults. The fact that intensive local treatment is available is important to the successful treatment outcome for these patients. Often, families are involved in therapy and follow-up, ensuring a more successful outcome for discharged patients.

All treatment programs have the following components:

- Individualized treatment plans
- Individualized counseling and therapy, involving the family whenever possible
- Group counseling and therapy
- A multi-disciplinary team approach which allows patients to have a fuller understanding of their physical and mental health
- Discharge planning, including referrals for follow-up at local, community-based treatment clinics
- Academic programming, with State-certified teachers, for children and adolescents

UTHCPC continually seeks ways to enhance patient programming through a variety of outreach programs, funded through private sources, including grants. The purpose of these outreach activities is to:

- Provide a mechanism for early identification of and treatment intervention for those with mental illness or behavioral problems
- To educate a wider segment of the general population, including health and social service providers, about mental illness, and the disease's treatment options

UTHCPC's service and outreach activities include:

Service Outreach programs, self-funded, either through grant funding or through second party payer sources. The programs at these sites provided assessment and treatment of children and adults; follow-up, family counseling and education and related services to ensure the patient/client would have a more successful outcome of being able to function in an external environment. Programs were offered at or through the following sites:

- Houston Independent School District (program begins April, 2005)
- Gulf Coast Community Head Start

- Wesley Community Center
- Harris County Children's Assessment Center Program for Abused Children and Adolescents
- After – School Program for Children and Adolescents with Emotional Problems
- Sub-Acute Program for Harris County Juvenile Probation Department juvenile offenders
- Outpatient Services for adults needing intensive treatment, intermediate follow-up and medication monitoring
- Neighborhood Centers

In addition to the programs listed above, UTHCPC is actively seeking collaborative service agreements for grant and other funded programs aimed at early intervention, provision of services to the elderly and under served populations. To this end, UTHCPC is a member of a broad collaborative of agencies, including UTH, Baylor and the Harris County Community Access Collaborative, designed to assist in collaborative efforts to obtain grants for the local community.

Community Outreach programs are designed to reach a wide audience in an effort to promote the hospital as a provider of quality mental healthcare and a leader in the education of clinical professionals. Examples of outreach programs include:

- Tele-Education and Tele-Health
 - School Based Program, two-way interactive television providing services to 20-plus local schools in nine area school districts and the Harris County Juvenile Probation
- Patient Care/Support Program
 - Provided screening and brief intervention for those with substance abuse and mental health problems
 - Worked with corporate entities to eliminate stigma and discrimination in insurance coverage for those with mental illness
- Healthcare Education
 - Collaborated with the Area Agency on Aging to provide live interactive teleeducation programming for healthcare workers
- Nursing Education
 - The Greater Houston Partnership funded UTHCPC with an \$8,000 Work Resources Grant to allow UTHCPC senior nursing educational professionals to receive joint appointments with local nursing schools in order to provide educational training in this critical shortage area
- Publications
 - Mental Health Related Brochures –a series of 23 brochures about how to access the mental healthcare system, understanding various mental illness and mental health disorders was produced
- Website
 - UTHCPC's website, <http://hcpc.uth.tmc.edu> (available in English, Spanish and Vietnamese) was visited by approximately

20,000 people each month (more than 34% of the information is accessed in Spanish)

- Community Outreach
- Health fair participation – UTHCPC participated in approximately 24 community-wide health fairs
- Speaking engagements – UTHCPC faculty and staff speak at approximately 30 events each year, ranging from mental health community meetings to Rotary Club meetings, small and large company brown bag lunches, etc

UTHCPC staff participated in outreach activities with the following organizations:

- Local School Districts
- Local Religious Organizations and Church Groups
- NAACP
- Local Government Agencies
- Gateway to Care
- Area Agency on Aging
- Fifth Ward Multi Service Center
- Houston Crackdown
- Drug Abuse Early Warning Network
- Children's Festival
- Shell Oil
- Better Business Bureau
- Third Ward Community Festival
- Third Ward Cloth
- ChildBuilders
- United Way
- Zebec Corporation
- Children's Forum
- Dynegy
- Sally's House
- Children's Assessment Center
- Texas Southern University
- University of Houston

Sunrise Canyon Hospital, Lubbock

The foremost benefit of Sunrise Canyon Hospital is its proximity to where people actually live. Sunrise Canyon Hospital is located within the city limits of Lubbock, Texas. The next closest publicly-funded inpatient psychiatric hospital is Big Spring State Hospital, over 100 miles away. In most cases, people would be transported from

Lubbock to Big Spring by either law enforcement or ambulance; both of which are very expensive. Receiving inpatient psychiatric services as close to home as possible affords the opportunity for people to remain connected to family members, friends, housing, outpatient services, employment, etc.

Many family members and friends find it difficult to travel the distance to Big Spring State Hospital and are, therefore, less likely to visit. In most cases, the love and support of family and friends greatly increases the effectiveness of treatment for people in crises. The average lengths of stay (ALOS) at Sunrise Canyon Hospital are such that people don't usually lose their housing due to the limited length of time they are hospitalized. People can attend to the ongoing needs of a home (utilities, repairs, food, pets, etc.) even while hospitalized. During FY04.Q4, the ALOS at Sunrise Canyon Hospital was 14 days, compared to 32 days in the state mental health facility system. Length of stay and the stigma associated with the state mental health facility system have been cited by people as reasons why they prefer to be served by Sunrise Canyon Hospital.

For people served by Sunrise Canyon Hospital who do not have a place to live, the hospital's proximity to their home community allows staff members to more readily assist with locating housing upon discharge. Finding suitable housing is often difficult, a complexity worsened by great distances between a State hospital's location and a person's home community. Lubbock Regional MHMR Center is the recipient of housing grants, used to assist in these individuals.

Continuity of care is another unique benefit offered by Sunrise Canyon Hospital. Shared leadership between the community center's inpatient services and outpatient services allows for a common vision and consistent direction, as well as, opportunities for certain efficiencies. For example, hospitalization can often be avoided because local staff members are familiar with a person's needs and treatment plan when he/she calls the crisis line. Familiarity, from both the perspective of the staff member and the person in crisis, often aid in resolving a crisis situation without costly emergency room, ambulance, and hospital services. For a person who needs inpatient services, the admission process is better facilitated and less costly when a staff member has knowledge of the person and his/her specific circumstances. The admission process can be further streamlined by Lubbock Regional MHMR Center's ability to provide medical clearance on-site at the Sunrise Canyon facility, instead of sending people to the emergency room. When magistrate's warrants are issued, people can be taken directly to the Sunrise Canyon facility for assessment, physician evaluation, medical clearance and admission, which greatly shortens the amount of time the entire process takes and, subsequently, the time law enforcement is detained. When a crisis occurs in the community, an assessment can be done in vivo and, if appropriate, arrangements can be made for transport of the person to the Sunrise Canyon facility for the remainder of the process.

Another example of enhanced continuity of care can be found in Assertive Community Treatment (ACT). People served by the ACT Team have one (1) physician who directs all of their treatment, regardless of whether it is on an inpatient or outpatient basis. Similarly, outpatient psychosocial rehabilitation specialists often serve on a person's

inpatient treatment team in order to ensure continuity of care. Lubbock Regional MHMR Center has one (1) centralized records department which also acts to enhance continuity of care between inpatient and outpatient services.

For those people in need of ongoing physical health care, being served by Sunrise Canyon Hospital in Lubbock allows them the opportunity to continue receiving the care they require in a familiar and continuous way. In most instances, receiving services from a local physician, familiar with a person's need is much less expensive than providing intermittent care in the state hospital system.

Sunrise Canyon Hospital is a component of Lubbock Regional MHMR Center's system of care and, as such, shares many administrative and support functions provided to the other components of care. Sharing administrative and support functions allows Sunrise Canyon Hospital the unique opportunity to have economies of scale, not available to other psychiatric hospitals. Lubbock Regional MHMR Center utilizes a centralized model of administration and support that assists in deferring expenses associated with such functions. Centralized functions include, but are not limited to: records management, quality management, contracts management, planning and evaluation, data management, human rights, accounting and finance, human resource management, maintenance, etc. These economies of scale, paired with shorter average lengths of stay, make for a favorable comparison between Sunrise Canyon Hospital's average cost per episode of care and that of the state mental health facility system. In FY04.Q4, Sunrise Canyon Hospital's average cost per episode of care was \$5,121; the state mental health facility's was \$10,240.

Other unique benefits offered by Sunrise Canyon Hospital include opportunities for the leveraging of local resources, jail diversion, competency restoration, collaborations with institutions of higher education, etc. Local relationships, based upon mutual priorities allow for opportunities to leverage general revenue monies with local resources. For example, Lubbock Regional MHMR Center receives local monies to help support the Sunrise Canyon Hospital triage and admission processes, because of the positive impact Sunrise Canyon Hospital has on the local emergency room. These local monies allow general revenue to be used in ways it would not, if it were dedicated to the state mental health facility system. Lubbock Regional MHMR Center enjoys a positive relationship with the Lubbock County Sheriff's Office. Because of this relationship, Sunrise Canyon Hospital has had opportunities to support jail diversion and competency restoration activities. In addition to these collaborative efforts, Sunrise Canyon Hospital has proven to be an invaluable training ground for mental health professionals, such as medical residents, nursing students, social work and counseling interns, health organization management students, among others. These collaborations pave the way for the development of local talent to serve in the local service delivery system.

Community Regional Hospital - The Gulf Coast Center

One of the most positive aspects of the Community Regional Hospital in Galveston is that it meets community (consumers and family) identified needs for local hospital. The

community based hospital beds has over 7,300 bed days of service per year. The Regional Hospital assists in managing allocation of State Hospital Bed Days. There is a collaborative partnership of local community hospitals and community center. There is consumer choice for local hospitalization. There is an immediate/emergency hospital beds - *safety net* (in conjunction with community resource network). It maintains family support and access (i.e. closer to home). Consumers have access to other medical needs as needed. There is a better continuation / coordination of existing care. Short term hospitalization (average length of care: 6.03 days) for most clients. The Regional Hospital is cost effective - less than \$300/bed day.

In addition, cost of transportation to State Hospital (i.e. mileage, staff time) is low. There is an efficient use of local resource (i.e. MH Deputies who would be transporting). The collaborative partnership supports other local community projects and grant opportunities. There is more face-to-face contact with consumer upon discharge, admittance, and length of stay. The hospital allows for immediate access as needed for consumers and families (i.e. direct admit option). Funds expended locally. Community Regional Hospital is not just a psychiatric hospital, but is a full spectrum of medical care (i.e. ER, Indigent Health Hospital, Healthcare). There is a community hospital network - "overflow" bed options when primary beds filled.