

Memorandum of Understanding for
TEXAS COORDINATED SYSTEM OF CARE
November 2017

A. Overview

Pursuant to the Texas Government Code, Section 531.251, this memorandum of understanding ("the Memorandum") has been developed by the following member agencies, hereinafter referred to as "the agencies," in consultation with family and youth representatives, including advocacy and consumer groups.

B. Lead Agency Responsibilities

As described in Texas Government Code, Section 531.251, Texas Health and Human Services Commission (HHSC) is the lead agency for this Memorandum. HHSC shall maintain a comprehensive system of care (SOC) strategic plan for the delivery of mental and behavioral health services using an SOC framework, including best practices in the financing, administration, governance, and delivery of those services. HHSC shall implement and monitor an SOC framework to develop local mental and behavioral health systems of care in communities.

HHSC shall:

1. Maintain a comprehensive SOC strategic plan for the delivery of culturally and linguistically appropriate mental health services and supports to children, youth (including transition-age youth), and their families using an SOC framework, including best practices in the financing, administration, governance, and delivery of those services.
2. Identify appropriate local, state, and federal funding sources to finance infrastructure and mental health services and supports needed to support state and local SOC framework efforts.
3. Develop an evaluation system to measure cross-system performance and outcomes of state and local SOC framework efforts.
4. Consult with stakeholders in the provisions above. Stakeholders include children and youth who have or are at risk of developing a serious emotional disturbance or young adults who received mental health services and supports as a minor with or at risk of developing a serious emotional disturbance and family members of those children, youth or young adults. HHSC shall monitor the implementation of a culturally and linguistically appropriate SOC framework under Texas Government Code, Section 531.251, and adopt rules as necessary to facilitate or adjust that implementation.

This Memorandum supports the implementation of an SOC framework through the activities of the comprehensive SOC strategic plan.

C. Member Agencies

- Texas Health and Human Services Commission (HHSC)
- Texas Department of State Health Services (DSHS)
- Texas Department of Family and Protective Services (DFPS)
- Texas Education Agency (TEA)
- Texas Juvenile Justice Department (TJJD)
- Texas Department of Criminal Justice – Texas Correctional Office on Offenders with Medical or Mental Impairments (TDCJ-TCOOMMI)

D. Purpose and Definitions

The Memorandum, as adopted by each agency, provides for the implementation of a comprehensive plan to deliver mental health services and supports to children, youth (including transition-age youth), and their families using an SOC framework, in accordance with authorizing legislation for each agency.

- Children and youth means individuals younger than 21 years of age.
- Serious emotional disturbance means a mental, behavioral, or emotional disorder of sufficient duration to result in functional impairment that substantially interferes with or limits a person's role or ability to function in family, school, or community activities.
- SOC framework means a framework for collaboration among state agencies, children and youth who have a serious emotional disturbance or are at risk of developing a serious emotional disturbance, and the families of those children and youth that improves access to services and delivers effective community-based services that are family-driven, youth or young adult-guided, and culturally and linguistically competent.
- Transition-age youth means individuals 16 to 25 years old. Individuals in this unique group are included in discussions of both children's and adult mental health services. Individuals 16 through 20 years old are included in this group and in the children and youth group, while individuals 18 through 25 years old are included in discussions about adult mental health services.

HHSC shall implement a culturally and linguistically appropriate SOC framework to develop local mental health systems of care in communities for children and youth who are receiving residential mental health services and supports or inpatient mental health hospitalization, have or are at risk of developing a serious emotional disturbance, or are at risk of being removed from their homes and placed in a more restrictive

environment to receive mental health services and supports, including an inpatient mental health hospital, a residential treatment facility, or an agency operated by the juvenile justice system.

E. Vision and Mission

The vision of the Texas SOC initiative is that all Texas children and youth have access to high quality mental health care that is family-driven, youth-guided, community-based, culturally-grounded, and sustainable. The mission is to strengthen the collaboration of state and local efforts to weave mental health supports and services into seamless systems of care for children, youth, and their families.

F. Core Values and Guiding Principles

The core values for an SOC framework are:

1. Family-driven and youth-guided, with the strengths and needs of the child and family determining the types and mix of services and supports provided.
2. Community-based, with the core of services as well as system management resting within a supportive, adaptive infrastructure of structures, processes, and relationships at the community level.
3. Trauma-informed, with agencies, programs, and service providers infusing and sustaining trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies.
4. Culturally and linguistically competent, with agencies, programs, and services that reflect the cultural, racial, ethnic, and linguistic differences of the populations they serve to facilitate access to and utilization of appropriate services and supports, and to eliminate disparities in care.

The guiding principles aligned with a culturally and linguistically appropriate, trauma-informed SOC framework are designed to:

1. Ensure availability and access to a broad, flexible array of effective, community-based services and supports for children and their families that address their emotional, social, educational and physical needs, including traditional and nontraditional services, as well as natural and informal supports.
2. Improve delivery of community-based services in an effective, equitable, understandable, and respectful manner in response to the cultural health beliefs, practices, preferred language, health literacy, and other communication needs of children and youth accessing mental and behavioral health services.

3. Provide individualized, trauma-informed services in accordance with the unique potentials and needs of each child and family, guided by a strengths-based, wraparound service planning process and an individualized service plan developed in true partnership with the child and family.
4. Increase services and supports that include evidence-informed and promising practices, as well as interventions supported by practice-based evidence, to ensure the effectiveness of services and to improve outcomes for children and their families.
5. Deliver services and supports within the least restrictive, most normative environments that are clinically and culturally appropriate.
6. Ensure families, other caregivers, and youth are full partners in all aspects of the planning and delivery of their own services, and in the policies and procedures that govern care for all children and youth in their communities, states, territories, tribes, and nations, to the extent possible.
7. Work to integrate services at the system level, using best practices in the financing, administration, governance, and delivery of those services, with linkages between child-serving agencies and programs across administrative and funding boundaries and mechanisms for system-level management, coordination, and integrated care management.
8. Provide care management or similar mechanisms at the practice level to ensure that multiple services are delivered in a coordinated and therapeutic manner and that children and their families can move through the system of services in accordance with their changing needs.
9. Provide developmentally appropriate mental and behavioral health services and supports that promote optimal social-emotional outcomes for young children and their families in their homes and community settings.
10. Provide developmentally appropriate services and supports to facilitate the transition of youth to adulthood and to the adult service system as needed.
11. Incorporate or link with mental and behavioral health promotion, prevention, and early identification and intervention in order to improve long-term outcomes, including mechanisms to identify problems at an earlier stage and mental and behavioral health promotion and prevention activities directed at all children and adolescents.
12. Incorporate continuous accountability and quality improvement mechanisms to track, monitor, and manage the achievement of SOC goals; fidelity to the SOC philosophy; and quality, effectiveness, and

outcomes at the system level, practice level, and child and family level.

13. Protect the rights of children and families and promote effective youth and family advocacy efforts.
14. Support the adoption and implementation of national standards for Culturally and Linguistically Appropriate Services (CLAS) to improve policies, practices, and service delivery.
15. Ensure that leadership and workforce that provide mental and behavioral health services are educated and trained in cultural and linguistic competency, as well as in maintaining a trauma-informed organization and in the delivery of trauma-informed care.
16. Provide services and supports without regard to race, religion, national origin, gender, gender expression, sexual orientation, physical disability, socio-economic status, geography, language, immigration status, or other characteristics, with services and supports being sensitive and responsive to these differences, in accordance with state and federal laws.

G. System of Care Oversight Subcommittee

A representative from each of the named agencies within this Memorandum will participate on the Texas SOC oversight body, Texas Health and Human Services Commission's Children and Youth Behavioral Health Subcommittee (CYBHS), to facilitate the responsibilities in this Memorandum and to implement the comprehensive plan for statewide implementation of the SOC framework. State agency membership will be determined by agency leadership with the appointment of at least a primary and an alternate member. Appointed members will have decision-making authority, if possible, and a working knowledge of children's mental and behavioral health and cultural and linguistic needs. Members will select family and youth representatives through consensus. It is expected that members or their alternates will attend and actively participate in quarterly meetings. Recommendations made by agency, family, and youth CYBHS members regarding children and youth behavioral health issues will be submitted to the Behavioral Health Advisory Committee for inclusion in a report to the Texas Health and Human Services Executive Commissioner.

H. System of Care Oversight Subcommittee Responsibilities

Each of the participating state agencies will implement the core values and guiding principles of the SOC framework listed in Section F of this Memorandum, within the context of that agency and within available resources, to support the development and sustainability of state and local infrastructures.

Agencies on the SOC oversight subcommittee will, individually and collectively, implement the activities of the comprehensive SOC strategic plan, including, as applicable:

- Develop a communication plan that addresses strategies within the respective state agencies and across agencies regarding SOC framework awareness and best practices.
- Promote leadership opportunities within the organization for family members and young people with lived experiences, who are knowledgeable about agency programs and services, and who have diverse cultural backgrounds. These individuals include racial and ethnic minorities, sexual and gender minorities, persons with disabilities, as well as individuals living in rural areas and persons from low socio-economic backgrounds.
- Integrate family and youth voice within the planning, implementation, and evaluation of agency programs and practices.
- Identify, recruit, select, and train persons with lived experience to create full, meaningful, and sustained partnerships to inform and benefit child, youth, and family-serving systems.
- Support the adoption and implementation of national CLAS standards to improve policies, practices, and service delivery.
- Facilitate the implementation of the goals and objectives of the Texas Statewide Behavioral Health Strategic Plan, as related to the goals of the Texas SOC.
- Work with other interagency child-serving initiatives (e.g., Community Resource Coordination Groups, Trauma-Informed Learning Collaboratives, wraparound initiatives, etc.) to promote successful collaborations across child, youth, and family-serving systems.
- Be available to support local staffing groups with resource identification.
- Support activities (e.g., governance, youth and family voice, sustainability) to strengthen community capacity to implement the SOC philosophy and approach.
- Identify appropriate local, state, and federal funding sources to finance and sustain state and local SOC infrastructure.
- Develop an annual budget proposal beginning in FY2019, as resources allow, to fund the local and state infrastructure needed to support the implementation of a statewide SOC. The budget proposal will reflect the coordination of all state agencies represented in this Memorandum, with the goal of each agency investing in that budget proposal, as resources allow. Sources of collaborative funding may include general revenue, Medicaid, block grants, exceptional items, federal funds, in-kind contributions, or other unique sources agencies may identify. Local and state infrastructure may include services and supports such as youth and family engagement; local community infrastructure

development, collaboration, and mobilization; professional development and ongoing coaching to enhance mental and behavioral health services and supports and cross-agency service delivery efforts; program evaluation and data analysis; outreach, communication, and social marketing; and efforts related to cultural and linguistic competence and sustainability, financing strategies, policy development, and strategic planning.

- Develop an evaluation system to measure cross-system performance and outcomes of state and local SOC framework efforts.

I. Agency Responsibilities

Member agencies will execute the following strategies to implement the statewide SOC framework.

1. **Texas Health and Human Services Commission (HHSC) Medicaid and Children's Health Insurance Program (CHIP) Services and Office of Mental Health Coordination (OMHC)** will support the goals of the Texas SOC strategic plan through implementation of strategies in the following goal areas.

a) *Leadership. HHSC OMHC will:*

- Provide leadership to ensure that state-level collaborative efforts enhance mental and behavioral health services and supports through a statewide SOC framework for children, youth, and their families.
- Facilitate linkages with the Behavioral Health Advisory Committee, other committees focused on children and youth, and with the agency's behavioral health strategic planning processes.
- Incorporate SOC core values and guiding principles within all HHSC child, youth, and family-related programs.
- Apprise member agencies, through the CYBHS, of Texas SOC initiatives and activities.

b) *Leadership. HHSC Medicaid and CHIP Services will:*

- Incorporate systems of care core values and guiding principles within HHSC Medicaid medical policies, as appropriate.

c) *Enhance Equitable Access to Services and Supports. HHSC OMHC will:*

- Support the adoption and implementation of national CLAS standards to improve policies, practices, and service delivery.

- d) *Enhance Equitable Access to Services and Supports. HHSC Medicaid and CHIP Services will:*
 - Integrate systems of care core values and guiding principles into the managed care organization (MCO) contractual requirements, including, but not limited to training requirements and service delivery (e.g., wraparound and other services authorized through the Youth Empowerment Services waiver).
- e) *Financing. HHSC Medicaid and CHIP Services and OMHC will:*
 - Investigate and identify funding opportunities, including the potential of Medicaid reimbursable services that support the SOC framework.
- f) *Accountable Systems. HHSC OMHC will:*
 - Ensure that stakeholders have access to reliable and valid data to make informed decisions to improve outcomes for children and families.
 - Facilitate the development and implementation of data-driven strategies to eliminate disparities in mental and behavioral health and cultural and linguistic competencies.

2. HHSC Intellectual and Developmental Disabilities and Behavioral Health Services (IDD/BH) will support the goals of the Texas SOC strategic plan through implementation of strategies in the following goal areas.

- a) *Leadership. HHSC IDD/BH will:*
 - Participate in state-level collaboration efforts to enhance mental and behavioral health services and supports through a statewide SOC framework for children and youth with serious emotional disturbances and their families.
 - Promote opportunities for families and youth to learn about the continuum of community-based mental and behavioral health services and systems of care guiding principles and core values to enable them to be effective advocates for themselves and others.
- b) *Community Capacity. HHSC IDD/BH will:*
 - Support SOC training activities, including cultural and linguistic competency training, to local mental and behavioral health authorities and at state-level conferences and events.
 - Ensure that every Local Mental Health Authority has staff who are trained and capable of facilitation using the high fidelity wraparound model.

- Support SOC practices through contracts with local mental and behavioral health authorities and other interagency initiatives that target children and youth with complex mental and behavioral health needs and their families to ensure equitable delivery of services.
- c) *Enhance Equitable Access to Services and Supports. HHSC IDD/BH will:*
- Support the evidence-based practice of peer support, including certified family partners, certified peer specialists, recovery coaches, and other peer providers throughout the service delivery systems.
 - Support the quality and fidelity of cross-discipline implementation and evaluation of children’s mental and behavioral health evidence-based practices.
 - Promote strong evidence-based service coordination strategies for children and youth with complex mental and behavioral health conditions whose needs cross agencies.
- d) *Financing. HHSC IDD/BH will:*
- Leverage Substance Abuse and Mental Health Services Administration mental and behavioral health block grant funding to support Local Mental and Behavioral Health Authorities’ capacity for supporting the SOC framework.
- e) *Accountable systems. HHSC IDD/BH will:*
- Coordinate data-sharing with the Child and Adolescent Needs and Strengths assessment tools between the Local Mental and Behavioral Health Authorities and the child welfare population.
 - Facilitate qualitative and quantitative data-sharing to promote a continuum of care involving the *HHSC IDD/BH* and Texas Department of Family and Protective Services Residential Treatment Center Relinquishment Avoidance Project.
3. **Texas Department of State Health Services (DSHS)** will support the goals of the Texas SOC strategic plan through implementation of strategies in the following goal areas.
- a) *Leadership. DSHS will:*
- Participate in state-level collaboration efforts to enhance mental and behavioral health services and supports through a statewide SOC framework for children and youth with serious emotional disturbances and their families.

- Provide information to create awareness among selected DSHS-funded contractors regarding research, best practices and opportunities to participate in the SOC framework.
 - Promote opportunities for families and youth to learn about the continuum of community-based mental and behavioral health services and systems of care guiding principles and core values to enable them to be effective advocates for themselves and others.
 - Identify divisions within the agency to participate in the SOC collaborative framework, including the Division of Community Health Improvement, Division of Regulatory Services, and other divisions deemed appropriate by the agency.
- b) *Community Capacity. DSHS will:*
- Encourage local and regional DSHS staff to plan, build relationships, and assess opportunities on the systems level to strengthen services and supports within the SOC framework.
 - Encourage DSHS-funded contractors to participate in SOC professional development opportunities, build relationships and strengthen practice-capacity to help youth and their families access appropriate services and supports.
 - Identify methods to infuse SOC guiding principles into training and contracting opportunities.
- c) *Enhance Equitable Access to Services and Supports. DSHS will:*
- Provide DSHS-funded contractors with web-based resources, information, and linkages to support coordinated mental and behavioral health service delivery for youth and their families.
- d) *Financing. DSHS will:*
- Identify methods to leverage public funding streams to support capacity building within the SOC framework.
- e) *Accountable Systems. DSHS will:*
- Provide aggregate data (as available) to assist in state-level SOC decision-making.
4. **Texas Department of Family and Protective Services (DFPS)** will support the goals of the Texas SOC strategic plan through implementation of strategies in the following goal areas, as agency resources and priorities allow, as determined by DFPS leadership.
- a) *Leadership and Support. DFPS will:*
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- Participate in state-level collaboration efforts to enhance mental and behavioral health services and supports through a statewide SOC framework for children, youth, and their families.
 - Integrate SOC core values and guiding principles into the contractual requirements of general residential operations, residential treatment, and child-placing agencies to ensure equitable delivery of services.
 - Align the agency's implementation of the Child and Adolescent Needs and Strengths assessment with HHSC IDD/BH practices as much as reasonably possible in order to help streamline service accessibility.
- b) Community Capacity. DFPS will:*
- Encourage local and regional DFPS staff to plan, to build relationships, and assess opportunities on the systems level to strengthen services and supports within the SOC framework.
 - Within the confines of state and federal confidentiality laws, streamline the ability to share youth-specific information to enhance service delivery and strengthen continuity of care.
 - If funds and resources allow, provide training, outreach, and assistance to ensure informed participation and partnership with youth and families.
- c) Enhance Equitable Access to Effective Services and Supports. DFPS will:*
- Through the administration of performance-based contracts, provide oversight to ensure child-placing agencies are accountable and trained on the principles and practices of trauma-informed care.
 - Incorporate SOC core values and guiding principles in all meetings with families, including Circles of Support, Family Group Conferencing, and Family Team meetings.
 - Designate regional liaisons to implement protocols to ensure coordination and continuity of services across systems for youth placed under joint managing conservatorship and for youth participating in the collaborative HHSC IDD/BH and DFPS Residential Treatment Center Relinquishment Avoidance Project.
- d) Financing. DFPS will:*
- Identify methods to leverage public funding streams to support capacity building within the SOC framework.
- e) Accountable Systems. DFPS will:*
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- Provide aggregate data to assist in state-level SOC decision-making.
- Strengthen the performance management of the full network of providers to address the use of restraint and seclusion of all youth, including those youth in foster care.

5. **Texas Education Agency (TEA)** will support each of the five goals of the Texas SOC strategic plan through implementation of strategies in the following goal areas.

a) Leadership. TEA will:

- Participate in state-level collaboration efforts to enhance mental and behavioral health services and supports through a statewide SOC framework for students and their families.
- Provide information to create awareness among regional education service centers' (ESCs), local Independent School Districts' (ISDs), and charter schools' education leaders, including district and campus-level planning and decision-making committees, and school health advisory committees, where feasible, regarding research, best practices and opportunities for the education system to participate in the SOC framework.
- Integrate systems of care guiding principles and core values, where appropriate, in contracts with the ESCs.

b) Community Capacity. TEA will:

- Encourage education leaders to participate in regional and local planning opportunities to build relationships and assess opportunities on the systems-level to strengthen services and supports for students and their families within the SOC framework.
- Encourage student services practitioners to participate in SOC professional development opportunities, build relationships and strengthen practice-capacity to help students and their families access appropriate services and supports.

c) Enhance Equitable Access to Services and Supports. TEA will:

- Encourage ESCs', ISDs', and charter schools' active participation, professional development, and linkages in individualized service planning groups, such as child and family wraparound teams.
- Provide ESCs, ISDs, charter schools, and school health advisory committees with access to available web-based resources, information, and linkages to support coordinated mental and behavioral health service delivery for students and their families.

- Promote school-based services and supports on school campuses to reduce time from school, allow for coordinated services, and allow for educator input and collaboration into service delivery.

d) Financing. TEA will:

- Identify public and private funding streams available to state and local education systems that could be leveraged or accessed to support capacity building and align with the SOC framework.
- Within the coordinated SOC framework, promote the use of non-educational funds to offer community-based support services to eligible students and their families.

e) Accountable Systems. TEA will:

In accordance with the requirements of the Family Educational Rights and Privacy Act:

- Provide information on available statewide aggregate education data that is publicly accessible on the TEA website by district, charter school, and campus to assist collaborating agencies with state-level SOC decision-making, with small numbers of students masked for privacy protection.
- Identify opportunities and capacity to provide aggregate education data to assist in state-level SOC decision-making in collaboration with mental health and behavioral health programs participating in the SOC framework.

6. Texas Juvenile Justice Department (TJJD) will support the goals of the Texas SOC strategic plan through implementation of strategies in the following goal areas.

a) Leadership. TJJD will:

- Participate in state-level collaboration efforts to enhance mental and behavioral health services and supports through a statewide SOC framework for children, youth, and their families.
- As appropriate, include representation of families of youth who have received services and persons with lived experience in the juvenile justice system, offering them training and support.
- Integrate systems of care core values and guiding principles into the contractual requirements of the agency, as appropriate.
- Promote opportunities for families and youth to learn about the continuum of community-based mental and behavioral health services and systems of care guiding principles and core values to enable them to be effective advocates for themselves and others.

b) Community Capacity. TJJD will:

- Offer family and youth engagement training for certain employees, including family liaisons, case managers, dorm supervisors, alcohol and other drug treatment providers, parole officers, parole supervisors, treatment providers, and county juvenile justice professionals, including judges and legal representatives, to facilitate the SOC principle of family-driven care.
- TJJD will identify methods to infuse SOC guiding principles into training and work towards the regionalization of juvenile justice services, including but not limited to, training and contracting opportunities.

c) Enhance Equitable Access to Services and Supports. TJJD will:

- Work with state and local agencies to coordinate individualized, community-based diversionary treatment and aftercare programs for youth with mental and behavioral health needs.
- Explore the ability of the agency to strengthen and promote family-driven service delivery.
- Identify opportunities to enhance trauma-informed care across the juvenile justice continuum including the impact of secondary trauma on staff.
- Identify methods to promote interventions and services that are responsive to the individualized needs of youth, including those that are culturally and linguistically inclusive.

d) Financing. TJJD will:

- Identify opportunities to infuse SOC core values and guiding principles into probation departments' requests for support.

e) Accountable Systems. TJJD will:

- Provide aggregate data, where available, to assist in state-level SOC decision-making.
- Support probation department efforts to consolidate to a single risk assessment tool, as resources allow.

7. Texas Department of Criminal Justice - Texas Correctional Office on Offenders with Medical or Mental Impairments (TDCJ-TCOOMMI) will support the goals of the Texas SOC strategic plan through implementation of strategies in the following goal areas.

a) Leadership. TCOOMMI will:

- Participate in state-level collaboration efforts to enhance mental and behavioral health services and supports through a statewide SOC framework for children, youth, and their families.
- b) Community Capacity. TCOOMMI will:*
- Work with other interagency child-serving initiatives (e.g., Community Resource Coordination Groups, Trauma-Informed Learning Collaboratives, wraparound initiatives, etc.) to ensure successful collaborations across child/youth, and family-serving systems.
 - Continue to foster local relationships with service organizations and providers to further the mission and goals of the statewide SOC framework.
- c) Enhance Equitable Access to Services and Supports. TCOOMMI will:*
- Provide local TCOOMMI programs with resources, information and linkages to support coordinated mental and behavioral health service delivery for service providers to enhance continuity of care coordination.
- d) Accountable systems. TCOOMMI will:*
- Explore opportunities to infuse SOC guiding principles and core values into policies and guidelines for local TCOOMMI programs.
 - Provide supportive data to assist in state-level SOC decision-making.

J. Function of Local System of Care Communities

The primary functions of a local SOC community are to:

- Implement an SOC framework with the goal toward more efficient and effective service delivery to children and youth (including transition-age youth) with or at risk for serious emotional disturbances and their families.
- Develop a collaborative governance board or oversight team, which includes local representatives of the agencies included in this Memorandum, and local non-profits, in addition to family and youth/young adult representatives as defined under the purpose of this Memorandum.
- Develop a community action plan to address service gaps within the community and/or to reduce or eliminate redundancy in services and supports provided to children and youth and their families, and to create a more trauma-informed approach.

- Use information from local Community Resource Coordination Groups (CRCGs) to inform local SOC trends and challenges, and the community action plan.
- Identify and monitor client-specific and interagency process measures to evaluate outcomes and revise the community action plan as necessary.
- Integrate family and youth representatives in the planning, implementation, and evaluation functions.
- Receive quarterly monitoring, feedback, and successful models in all value areas.

K. Terms of Agreement

This Memorandum will be:

1. Effective upon adoption by each agency signatory and their successor.
2. Reviewed at least every five years or as needed by HHSC and member agencies.
3. Expanded, modified, or amended as needed, at any time by the unanimous consent of the agencies.

Signature page follows.



4-11-2018

Charles Smith, Executive Commissioner
Texas Health and Human Services Commission

Date

John Hellerstedt, M.D.
Texas Department of State Health Services

Date

Henry "Hank" Whitman
Texas Department of Family and Protective Services

Date

Michael Morath, Commissioner
Texas Education Agency

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David Reilly, Executive Director
Texas Juvenile Justice Department

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Jerry McGinty, Chief Financial Officer
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Texas Department of Criminal Justice

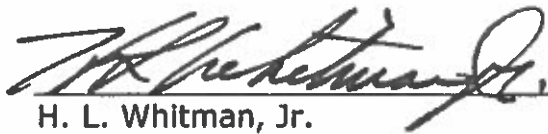
Date

Charles Smith, Executive Commissioner
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John Hellerstedt, M.D.
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H. L. Whitman, Jr.
Texas Department of Family and Protective Services

11-29-2017

Date

Michael Morath, Commissioner
Texas Education Agency

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Jerry McGinty, Chief Financial Officer
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Charles Smith, Executive Commissioner
Texas Health and Human Services Commission

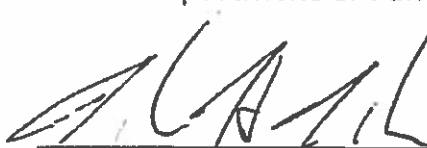
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 1/4/18

Michael Morath, Commissioner
Texas Education Agency

Date

David Reilly, Executive Director
Texas Juvenile Justice Department

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Texas Department of Criminal Justice

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Texas Health and Human Services Commission

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Texas Department of State Health Services


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Henry "Hank" Whitman
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Michael Morath, Commissioner
Texas Education Agency

Date

 for D. Reilly

David Reilly, Executive Director
Texas Juvenile Justice Department

12/1/17
Date

Jerry McGinty, Chief Financial Officer
Texas Department of Criminal Justice

Date

Charles Smith, Executive Commissioner
Texas Health and Human Services Commission

Date

John Hellerstedt, M.D.
Texas Department of State Health Services

Date

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Texas Department of Family and Protective Services

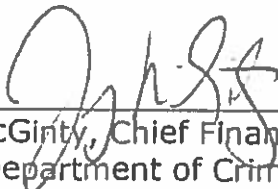
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David Reilly, Executive Director
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Jerry McGinty, Chief Financial Officer
Texas Department of Criminal Justice

11/21/17
Date