



Helen Farabee

Centers

— a commitment to caring —

Wichita Falls Administrative Office
P. O. Box 8266, Wichita Falls, TX 76307-8266
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Phone (940) 397-3100
Fax (940) 397-3150
www.helenfarabee.org

June 13, 2025

Dear Honorable Judge,

JUN 16 2025

On behalf of Helen Farabee Centers, I would like to thank you for your County's continual support of Helen Farabee Centers' services.

We are now letting each county know their full calculated matching fund amount per HHS guidelines. These matching county funds are what the state requires each LMHA to ask for to complete our annual budgets. If a county has increased its support toward these requested amounts, thank you! If a county is unable to meet the full amount requested, we would appreciate any incremental increases toward that amount this year.

The State of Texas supplies some funding to Helen Farabee Centers directly but requires every Local Authority like ours to request matching funds from each county we serve. That match requirement is 9% of the total funding provided by the state. The total match figure is then distributed across all counties based on the number of clients HFC served and the percent of state-funded psychiatric beds that are purchased for clients from each county. While we are thankful for any past funds received through each Commissioner's Court, we are required to ask for the full required local match per county (reflected in the figure below). These funds flow directly into service provision to citizens in your county that need them the most. Thank you for your support!

The proposed amount HFC is requesting is listed in the attached MOA under section 3a.

Enclosed are two copies of the Fiscal Year 2026 Memorandum of Agreement (MOA) between The County and Helen Farabee Centers. Sign both copies, keep one copy for your county records, and return one to me at the address above. **Please consider this your invoice for the agreed upon support for Fiscal Year 2026, date span of September 1, 2025 – August 31, 2026**

Please feel free to contact Helen Farabee Centers if any questions arise now or throughout the year. Contact information can be found in the attached MOA under section 2.

Again, thank you for your support.

Sincerely,

Angela Dove
Contracts Manager

MEMORANDUM OF AGREEMENT (MOA)
Inter-local Government Agreement

Helen Farabee Centers

is a non-profit governmental entity headquartered in Wichita Falls, Texas, established in TITLE 7. Mental Health and Intellectual Disability, Subtitle A. Chapter 534 Subchapter A. of the Texas Health and Safety Code. Helen Farabee Centers provides community-based services to adults and children residing in the counties of: Archer, Baylor, Childress, Clay, Cottle, Dickens, Foard, Hardeman, Haskell, Jack, King, Knox, Montague, Stonewall, Throckmorton, Wichita, Wilbarger, Wise, and Young.

This Memorandum of Agreement (MOA) is effective as referenced above, by and between:

Helen Farabee Centers (“Center”)

P. O. Box 8266

Wichita Falls, TX 76307

acting by and through its Executive Director

and

Montague County (“Agency”)

P.O. Box 475

Montague, TX 76251

acting by and through its role as a Sponsoring Agency of the Center per the Interlocal Governmental Agreement effective September 1, 1998.

This MOA sets forth the terms and conditions under which the Center will provide Public Behavioral Health and Intellectual Disability Services pursuant to the authority contained in the Texas Health and Safety Code, Section 534.

Agency agrees to:

1. Allow the Helen Farabee Centers to supervise and administer Behavioral Health Services at Center’s location(s) in compliance with appropriate standards.
2. Center Contacts are as follows:
Contracts Manager, Angela Dove, 940.397.3116, dovea@helenfarabee.org
Executive Director, Gianna Harris, 940.397.3355, harrisg@helenfarabee.org
Associate Executive Director, Andrew Martin, 940.397.3333, martina@helenfarabee.org

or by mail at
P. O. Box 8266
Wichita Falls, TX 76307
3. We are now letting each county know their full calculated matching fund amount per HHS guidelines. These matching county funds are what the state requires each LMHA to ask for to complete our annual budgets. If a county has increased its support toward these requested amounts, thank you! If a county is unable to meet the full amount requested, we would appreciate any incremental increases toward that amount this year.

a) Requested contribution per HHS guidelines: \$100,656.45

4. Contribute support for Center's services made available for Agency's residents, as follows:

a) Cash contribution in the amount for FY25 was: \$ 97,294.09

a) Cash contribution in the amount for FY26 will be: \$ 100,656.45 (please fill in when you sign)

and/or

b) In-kind contribution, as follows:

1) No in-kind contribution at this time.

The total value of cash contribution and in-kind support from Agency to Center is:

\$ 100,656.45 (please fill in when you sign)

Center agrees to:

1. Provide sufficient staff to offer Behavioral Health Services at Center's location(s). All services will be in compliance with the standards set forth in Texas Department of State Health Services Rules and Community Standards.
2. Furnish all staff and program monies to support local service delivery including staff training, travel monies, cost for medications, laboratory, and other medical supplies, telephone costs to Helen Farabee Centers and other phone calls for administrative purposes, telephone line(s) for facsimile communication, computer support and equipment, and other supplies as may be deemed necessary.
3. Provide services in or from other locations, including:
 - a) Crisis Hotline for all local residents,
 - b) residential options,
 - c) laboratory testing,
 - d) psychological testing as deemed necessary,
 - e) continuity of care/discharge planning for those hospitalized, and
 - f) all other available services provided by Center, upon eligibility.
4. Continually promote and upgrade communications and services allowing both the Community and Center to offer quality services to residents of Center's catchment area.

It is mutually agreed that:

1. Fees charged and collected from residents for services shall be retained by Center. No one is refused services solely on inability to pay.
2. This Agreement shall be a continuing until either party desires to revise or cancel the agreement.
3. A review of this agreement will be conducted annually for the purpose of making revisions that might be required; either party may request an additional review at any time.
4. This agreement may be canceled by either party by giving written notice to the other party thirty (30) days in advance.

Correspondence regarding this Agreement should be directed to:

Montague County
Honorable Judge
Co.judge@co.montague.tx.us
940.894.2401

Center
Angela Dove, Contracts Manager
dovea@helenfarabee.org
940.397.3116

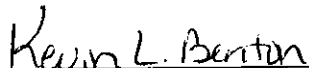
Duly authorized signatories for each party:

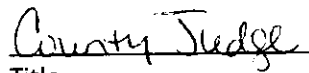
Agency

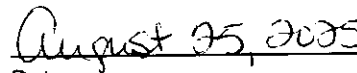
Helen Farabee Centers



Signature


Printed Name


Title

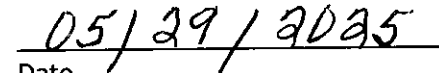

Date



Signature

Gianna Harris

Executive Director


Date