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, Montague, 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. Provide a safe interview area located at county jail if county chooses to have inmates seen at jail by a CENTER clinician OR help facilitate a video session between inmate at jail and remote CENTER clinician. This section is "not applicable" if county declines the invoicing arrangement above covering services at the jail/ remote services by video.

3. 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

4. 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: $114,256.45

5. Contribute support for Center's services made available for Agency's residents, as follows:
   a) Cash contribution in the amount for FY26 was: $ 100,656.45

   a) Cash contribution in the amount for FY27 will be: $ 114,256.45 (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:

$ 114,256.45 (please fill in when you sign)

Center agrees to:

1. Provide sufficient staff to offer Behavioral Health Services in Montague County.

2. The Center will provide Behavioral Health Services to the residents of Montague County. All services will be in compliance with the standards set forth in Texas Department of State Health Services Rules and Community Standards.
   a. All services will comply with the standards set forth in Texas Department of State Health Services and the Texas Department of Aging and Disability Services in the Texas Health and Safety Code and the Texas Administrative Code.
   b. The Center will provide Behavioral Health outreach, hotline, screening, extended observation, psychiatric examination, assessments, routine case management, counseling, peer support, respite services, crisis, medication training and support, psychosocial rehabilitative, skills training and development, laboratory tests, and for those hospitalized continuity of care/discharge planning.
   c. The Center will provide Eligibility Determination, Case Management, respite, nursing, behavioral supports, day habilitation, community supports, supported employment services to individuals with Intellectual Disabilities and Related Conditions.
   d. The choice of and admission to medically necessary services is determined jointly by the individual seeking service, the Center, and State Eligibility Criteria set by the Texas Department of State Health Services and the Texas Department of Aging and Disability Services.

e. The Center may delegate another entity to perform some or all of the Behavioral Health Services and Intellectual Disability Services described herein.
f. In addition to the annual support received by the County, the Center will provide the necessary resources to provide services as described in this MOA. However, services may be limited, reduced, or individuals placed on waiting lists depending on funding availability.

3. 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.

4. 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.

5. Regarding Service Fees:

a. Fees charged and collected from residents or 3rd parties for services shall be retained by Helen Farabee Centers.
b. No one is refused services solely on inability to pay.

6. The Center must treat all information that is obtained through the performance of services included in the MOA as confidential information under state and federal laws, rules, and regulations, including the HIPAA Privacy and Security Rule, governing the use and disclosure of Member Protected Health Information (PHI).

7. While performing the services described in the MOA, the Center will require it's employees and contractors to conduct themselves in a businesslike and professional manner.

8. The Center shall designate a local point of contact for Montague County each year for communication regarding the services provided under this agreement. The Center shall provide the name, title, and contact information of this individual in writing to the county no later than September of each year.

9. The center will provide routine behavioral health services to inmates of Montague County Jail. Services can be provided by a clinician face-to-face at a designated location at the jail OR remotely by video by a qualified clinician OR at CENTER's clinic location (requires jail staff to transport).

A. Services provided by CENTER staff at the jail or remotely by video to an inmate located at the jail are not covered by CENTER's General Revenue dollars, per HHSC Technical Assistance Memo to Sheriffs and Jail Administrators dated 7/19/2019 (attached). CENTER will invoice county monthly for these services based on the attached fee schedule. The additional cost of medications will be included in the invoice and is not described in the fee

schedule (med costs vary by inmate). A discounted rate will be applied to this invoice and that rate is based on the county's percentage of contributed in-kind or cash match (see Section 3, a)/b). Example: if a county's full requested match amount is X and the county contributes 50% of X, then the discount rate applied to the jail services invoice is 50%.

B. Montague County's matching contribution percentage is 100%. The discount rate applied to the jail service agreement is 100%.

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	Signature
Kevin L. Benton Printed Name	Gianna Harris
County Judge Title	Executive Director
July 27, 2026 Date	Date

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Printed Name	
County Judge	Executive Director
Title	
July 27, 2026	07/28/2026
Date	Date