

Reporting of Waiting Lists for Mental Health Services

**As Required by
2023-2024 General Appropriations Act
House Bill 1, 88th Legislature, Regular
Session, 2023 (Article II, Health and
Human Services Commission, Rider
45)**

**Texas Health and Human Services
May 2024**



TEXAS
Health and Human
Services

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1. Introduction

The *Reporting of Waiting Lists for Mental Health Services* meets the requirements of the 2024-25 General Appropriations Act, House Bill 1, 88th Legislature, Regular Session, 2023 (Article II, Health and Human Services Commission [HHSC], Rider 45). Rider 45 requires HHSC to report on waiting lists for mental health services to the Legislative Budget Board and Governor by November 1 and May 1 of each year.

Rider 45 requires the report to include waiting list and expenditure data for community mental health services for adults and children, forensic state hospital beds, and maximum security forensic state hospital beds for each local mental health authority (LMHA), local behavioral health authority (LBHA), state facility, and contracted entity. Required data include:

- Number of people waiting for all services;
- Number of underserved¹ people waiting for additional services;
- Number of people removed from the waiting list;
- Funds expended to remove people on the waiting list in each fiscal quarter included in the reporting period;
- Average number of days spent on a waiting list; and
- Explanation whether waiting lists are due to operational or other short-term or long-term factors, such as insufficient capacity.

The reporting period for this report spans fiscal years 2023-24, encompassing quarters three and four of fiscal year 2023, and quarters one and two of fiscal year 2024.

Data Context and Limitations

The LMHA and LBHA community mental health waiting lists are point-in-time calculations of the total number of people waiting for mental health services at the end of the respective quarter of the reporting period. The waiting lists are subject to daily fluctuations as people are added or removed for various reasons (e.g.,

¹ Term used to designate persons who received a lower level of care than recommended based on assessment scores.

admitted to services, no longer interested in services, receiving services elsewhere, no longer able to be contacted).

As part of the federal response to the coronavirus disease 2019 (COVID-19) pandemic, the Substance Abuse and Mental Health Services Administration awarded HHSC supplemental funding, part of which HHSC allocated to LMHAs and LBHAs to increase the number of people served in fiscal years 2021-2024.² The COVID-19 pandemic affected many providers' ability to attract and retain a stable workforce, both during and after the pandemic, resulting in unprecedented workforce shortages statewide.

If the demand for services increases beyond the total funded capacity for community mental health services and available staff resources, a waiting list may remain despite the effective use of additional funding and an LMHA's or LBHA's success in meeting its contracted targets.

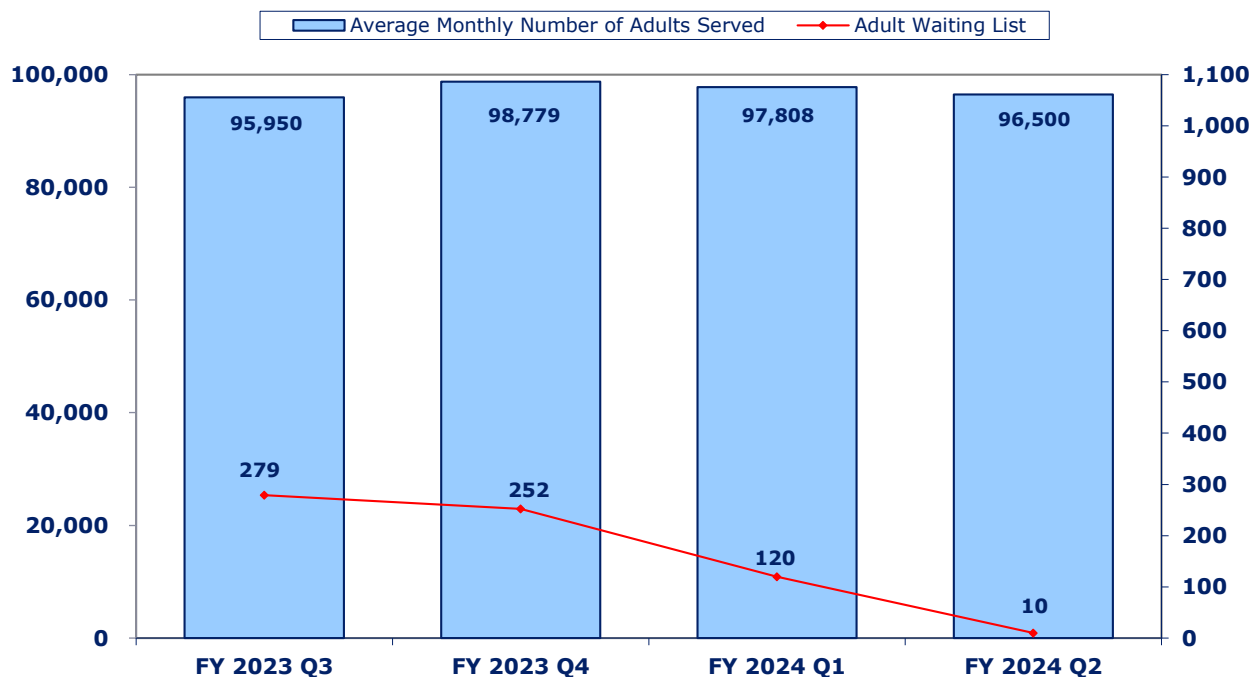
² Funds provided by the federal Coronavirus Response and Relief Supplemental Appropriations Act, 2021, which expires in 2024, and the American Rescue Plan Act, 2021, which expires in 2025.

2. Adult and Children’s Community Mental Health Services Waiting List Data

Adult Community Mental Health Services

The following graph shows the average monthly number of adults served and the adult waiting list during the most recent four quarters.³

Figure 1. Adult Community Mental Health Number Served and Waiting List for FY 2023 (Q3-Q4) and FY 2024 (Q1-Q2)⁴



³ Source: Client Assignment and Registration, March 2024.

⁴ The figure includes the Average Monthly Number of Adults Receiving Community Mental Health Services measure per the Legislative Budget Board performance measures.

Table 1. Adult Community Mental Health Number Served and Waiting List for FY 2023 (Q3-Q4) and FY 2024 (Q1-Q2)

Category	FY 2023 Q3	FY 2023 Q4	FY 2024 Q1	FY 2024 Q2
Average Monthly Number of Adults Served	95,950	98,779	97,808	96,500
Adult Waiting List	279	252	120	10

Table 2 and Table 3 outline the required report elements for the community mental health services for adults in LMHAs and LBHAs with waiting lists.

Table 2. Number of Adults Waiting for All Services or Removed from a Waiting List and Average Number of Days on a Waiting List by LMHA or LBHA⁵

LMHA or LBHA	No. Waiting for All Services FY 24 Q1	No. Waiting for All Services FY 24 Q2	No. Removed from Waiting List FY 24 Q1	No. Removed from Waiting List FY 24 Q2	Average No. of Days on Waiting List FY 24 Q1	Average No. of Days on Waiting List FY 24 Q2
Texas Panhandle Centers	0	1	2	1	0	61
Austin-Travis County Integral Care	0	1	112	110	0	7
North Texas Behavioral Health Authority	0	1	2	0	0	41
Gulf Bend Center	24	3	27	21	282	272
Heart of Texas Behavioral Health Network	42	0	98	41	147	129
Pecan Valley Centers for Behavioral & Developmental Healthcare	54	4	54	71	163	169
Total	120	10	295	244	592	679

⁵ LMHAs and LBHAs with no waiting lists from FY 24 Q1 to FY Q2 are excluded.

Table 3. Number of Underserved Adults Waiting for Additional Services by LMHA or LBHA⁶

LMHA or LBHA	FY 24 Q1	FY 24 Q2
Anderson Cherokee Community Enrichment Services	2	0
Andrews Center Behavioral Healthcare System	267	435
Austin Travis County Integral Care	313	317
Betty Hardwick Center	38	22
Border Region Behavioral Health Center	23	29
Camino Real Community Services	10	9
Center for Health Care Services	30	36
Center for Life Resources	31	16
Central Counties Center Services	2	1
Central Plains Center	1	1
Denton County MHMR Center	14	19
Emergence Health Network	33	39
Gulf Bend Center	1	0
Gulf Coast Center	14	13
Heart of Texas Behavioral Health Network	0	1
Helen Farabee Centers	0	1
MHMR Authority of Brazos Valley	73	65
MHMR Services for the Concho Valley	1	0
Nueces Center for Mental Health and Intellectual Disabilities	115	117
North Texas Behavioral Health Authority (NTBHA)	1	1
Pecan Valley Centers for Behavioral and Developmental Healthcare	76	101
PermiaCare	1	1
Community Healthcore	0	2
Spindletop Center	71	96
StarCare Specialty Health System	234	248
Texas Panhandle Centers	2	2
Texoma Community Center	24	17
Tri-County Behavioral Healthcare	10	60
Tropical Texas Behavioral Health	267	251
West Texas Centers	4	3
Total	1,658	1,903

⁶ Data does not include adults in a lower level of care due to "consumer refused."

Children’s Community Mental Health Services

The following figure shows the average monthly number of children served and the children’s waiting list during the most recent four quarters.⁷

Figure 2. Children’s Community Mental Health Number Served and Waiting List⁸

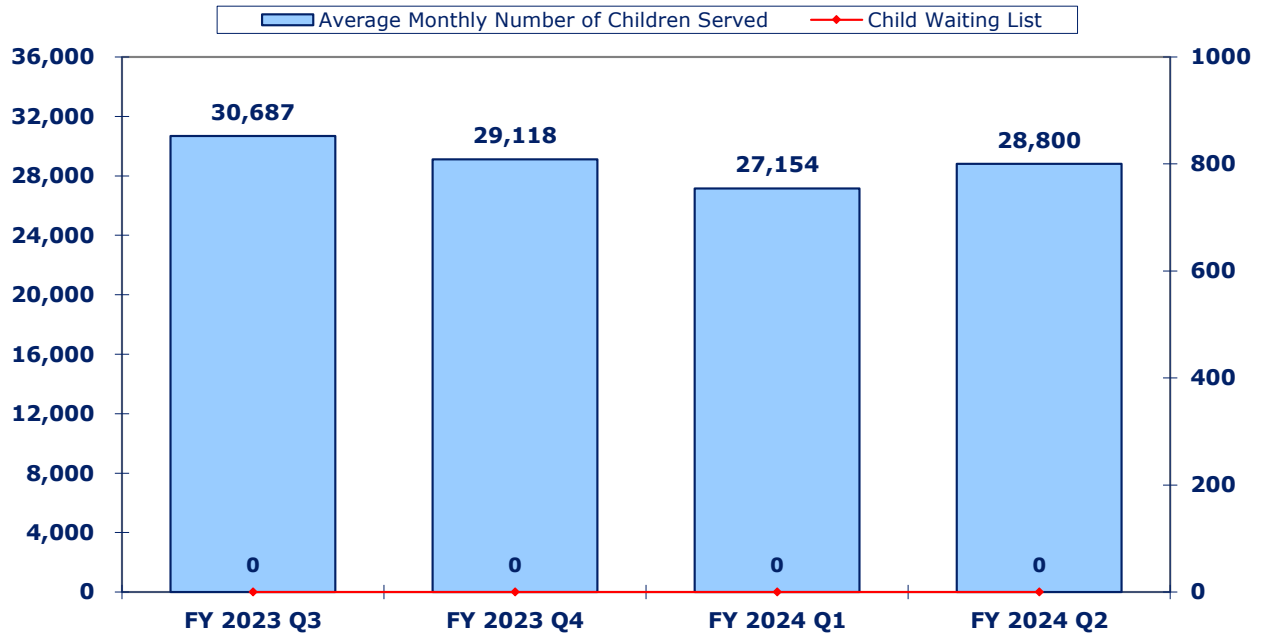


Table 4. Children’s Community Mental Health Number Served and Waiting List

Category	FY 2023 Q3	FY 2023 Q4	FY 2024 Q1	FY 2024 Q2
Average Monthly Number of Children Served	30,688	29,118	27,154	28,800
Child Waiting List	0	0	0	0

⁷ Source: Client Assignment and Registration, March 2024.

⁸ The figure includes the Average Monthly Number of Children Receiving Community Mental Health Services measure per the Legislative Budget Board performance measures.

Table 5 and Table 6 summarize the required report elements for the community mental health services waiting list for children. There were no children on a waiting list in quarters one or two of fiscal year 2024.

Table 5. Number of Children Waiting for All Services or Removed from a Waiting List and Average Number of Days on a Waiting List by LMHA or LBHA

LMHA or LBHA	No. Waiting for All Services FY 24 Q1	No. Waiting for All Services FY 24 Q2	No. Removed from Waiting List FY 24 Q1	No. Removed from Waiting List FY 24 Q2	Average No. of Days on Waiting List FY 24 Q1	Average No. of Days on Waiting List FY 24 Q2
Total	0	0	0	0	0	0

Table 6. Number of Underserved Children Waiting for Additional Services by LMHA or LBHA^{9 10}

LMHA or LBHA	FY 24 Q1	FY 24 Q2
Andrews Center Behavioral Healthcare System	2	2
Austin Travis County Integral Care	2	0
Betty Hardwick Center	0	2
Border Region Behavioral Health Center	1	1
Coastal Plains Community Center	0	1
Community Healthcore	88	90
Emergence Health Network	91	69
Gulf Coast Center	3	3
Heart of Texas Region MHMR Center	0	1
LifePath Systems	1	0
MHMR Authority of Brazos Valley	2	0
MHMR of Tarrant County	0	1
Texas Panhandle Centers	1	2
Pecan Valley Centers for Behavioral & Developmental Healthcare	9	12
Spindletop Center	79	99
Texoma Community Center	0	1
The Center for Health Care Services	4	3
Tropical Texas Behavioral Health	79	9
West Texas Centers	3	4
Total	365	300

⁹ Data does not include children in a lower level of care due to "consumer refused."

¹⁰ LMHAs and LBHAs with no waiting lists from FY 24 Q1 to FY Q2 are excluded.

Funds Expended to Remove People from Waiting Lists

The 2024-25 General Appropriations Act, House Bill 1, 88th Legislature, Regular Session, 2023, appropriated \$451,244,249 per fiscal year for adult community mental health services (D.2.1 Strategy) and \$110,629,159 per fiscal year for children’s community mental health services (D.2.2 Strategy). HHSC’s Utilization Management Program Manual requires LMHAs and LBHAs to prioritize the reduction of the waiting list as soon as service capacity allows.

In accordance with the federal Coronavirus Response and Relief Supplemental Appropriations Act, 2021, and the American Rescue Plan Act, 2021, the Substance Abuse and Mental Health Services Administration awarded Texas a combined total of \$203.4 million in Community Mental Health Services Block Grant supplemental funds, of which HHSC allocated \$78.2 million toward the Mental Health Outpatient Capacity Expansion project.¹¹ These funds are for use through 2024. LMHAs and LBHAs continued expending the funds to address workforce shortages in order to serve additional people.

Factors Affecting Community Mental Health Waiting Lists for Adults and Children

The LMHAs and LBHAs with waiting lists reported continued workforce shortage challenges, including recruitment and retention of behavioral health providers, particularly of Licensed Practitioners of the Healing Arts and Qualified Mental Health Professionals. These challenges come from a mental healthcare industry with a competitive job market. LMHAs and LBHAs have limited funding to retain existing staff or to increase targeted recruiting efforts.

LMHAs and LBHAs across the state faced professional mental health workforce shortages, with the impact on community mental health waiting lists for rural LMHAs being greatest. Five of the six LMHAs and LBHAs with reported waiting lists for adults are rural providers in designated health professional shortage areas. Yet

¹¹ [COVID-19 Supplemental Funding Primer](https://www.hhs.texas.gov/sites/default/files/documents/covid-19-federal-supplemental-funding-primer-jan-2022.pdf)
(<https://www.hhs.texas.gov/sites/default/files/documents/covid-19-federal-supplemental-funding-primer-jan-2022.pdf>)

all six continue to exceed their contracted monthly service targets, serving more people than required by their contracts with HHSC.

To minimize the adult and child waiting lists, HHSC monitors the community mental health waiting list monthly and contacts LMHAs and LBHAs reporting waiting lists to obtain details for the cause of their waiting lists and efforts taken to reduce them. HHSC provided technical assistance to these LMHAs and LBHAs by addressing workforce needs and guidance for expanding service capacity. HHSC informed the LMHAs and LBHAs about the opportunity to use additional COVID-19 funding for workforce recruitment and retention, hosted a training webinar on recruitment and retention, facilitated collaboration between LMHAs and LBHAs and health-related institutions of higher education to establish talent pipelines, and assisted LMHAs and LBHAs in the application process for federal assistance in recruiting, hiring, and retaining licensed clinicians.

3. Forensic Inpatient Bed Waiting List Data

The tables below show the number of people waiting, number of people removed, and average number of days spent waiting on the forensic inpatient bed waiting lists. HHSC’s Health and Specialty Care System (HSCS) maintains two distinct lists of pending admissions for people on forensic commitments to state hospitals: one for people pending admission to a non-maximum security unit (non-MSU); and one for people pending admission to a maximum security unit (MSU).

Individuals may be admitted to a different facility than the facility they are noted to be waiting for. This may be due to availability of special population beds, admission to a contract bed with a statewide catchment area, or other factors. Additionally, individuals waiting for admission to an MSU are not added to a facility-specific waiting list until closer to their admission because all MSUs serve a statewide catchment area, rather than a region-specific catchment area.

The number of people removed from a forensic inpatient bed waiting list not only includes people removed due to admission, but also due to case resolution, restoration of competency in jail, and various other dispositions.

Average number of days spent on a forensic inpatient bed waiting list is measured from the date the court notifies HSCS of the commitment and provides the commitment packet to the date of admission.

Table 7. Number of People on Non-MSU Forensic Inpatient Bed Waiting List

Facility	FY 24 Q1	FY 24 Q2
Austin State Hospital	224	229
Big Spring State Hospital	79	80
El Paso Psychiatric Center	76	100
Kerrville State Hospital	0	1
North Texas State Hospital Wichita Falls	148	118
Rio Grande State Center	0	1
Rusk State Hospital	124	133
San Antonio State Hospital	199	203
Terrell State Hospital	232	264
Dunn Behavioral Center	89	110
Montgomery County Hospital	2	3
Harris County Psychiatric Center	0	0
Palestine Regional	2	1
Dallas Behavioral Hospital	3	6
TOTAL	1,178	1,249

Table 8. Number of People Removed from Non-MSU Forensic Inpatient Bed Waiting List

Facility	FY 24 Q1	FY 24 Q2
Austin State Hospital	63	81
Big Spring State Hospital	34	29
El Paso Psychiatric Center	29	8
Kerrville State Hospital	9	7
North Texas State Hospital Wichita Falls	97	106
Rio Grande State Center	14	8
Rusk State Hospital	28	13
San Antonio State Hospital	72	63
Terrell State Hospital	88	100
Dunn Behavioral Center	112	94
Montgomery County Hospital	64	41
Harris County Psychiatric Center	18	20
Palestine Regional	29	29
Dallas Behavioral	2	0
TOTAL	659	599

Table 9. Average Number of Days Spent on Non-MSU Forensic Inpatient Waiting List

Facility	FY 24 Q1	FY 24 Q2
Austin State Hospital	253.9	510.4
Big Spring State Hospital	255.4	219.4
El Paso Psychiatric Center	502.3	523
Kerrville State Hospital	33.8	32.4
North Texas State Hospital Wichita Falls	256.8	163.2
Rio Grande State Center	346.5	335.4
Rusk State Hospital	468.7	571
San Antonio State Hospital	388.6	284.3
Terrell State Hospital	306.6	239.6
Dunn Behavioral Center	45.9	78.1
Montgomery County Hospital	341.5	307.8
Harris County Psychiatric Center	45.4	47.2
Palestine Regional	316.5	308.8
Dallas Behavioral Hospital	320.5	-
TOTAL	239.3	200.6

Table 10. Number of People Waiting for an MSU Forensic Inpatient Bed

Facility	FY 24 Q1	FY 24 Q2
North Texas State Hospital Vernon	44	21
Kerrville State Hospital	3	0
Maximum Security	792	684
Rusk State Hospital	11	13
North Texas State Hospital Wichita Falls	7	2
TOTAL	857	720

Table 11. Number of People Removed from MSU Forensic Inpatient Waiting List

Facility	FY 24 Q1	FY 24 Q2
North Texas State Hospital Vernon	94	84
Kerrville State Hospital	18	14
Maximum Security	102	84
Rusk State Hospital	55	47
North Texas State Hospital Wichita Falls	20	24
TOTAL	289	253

Table 12. Average Number of Days Spent on MSU Forensic Inpatient Bed Waiting List

Facility	FY 24 Q1	FY 24 Q2
North Texas State Hospital Vernon	599.8	563
Kerrville State Hospital	441.3	409.3
Maximum Security	620.2	-
Rusk State Hospital	624.5	532.3
North Texas State Hospital Wichita Falls	629.6	500.6
TOTAL	595.4	531.3

Factors Impacting Forensic Inpatient Bed Waiting Lists

Below are the long-term factors that impact the forensic waiting list. Currently, there are no short-term factors impacting the forensic waiting list.

Deferred Maintenance and Emergency Repairs

State hospitals are required to comply with Life Safety Code and regulatory requirements such as ensuring the mitigation of ligature risks. State hospital beds are taken offline when mitigation and remediation efforts or maintenance is required.

The Supplemental Appropriations Act, Senate Bill (S.B.) 30, 88th Legislature, Regular Session, 2023, appropriated \$50,000,000 for deferred maintenance and \$14,000,000 for emergency repairs to Strategy G.2.4, Facility Repairs and Renovation, to be used for state hospitals and state supported living centers. Currently the cost of anti-ligature remediation and other necessary repairs for the state hospitals exceeds what has been appropriated and the state hospitals experience challenges maintaining buildings with aging infrastructure and building systems, which further impacts the number of patients who can be served. HSCS has a deferred maintenance need of approximately \$1,000,000,000 and requests

appropriations each legislative session to maintain a consistent cycle of projects to meet this need.

County Planning, Coordination, and Education

Planning, coordination, and education among county stakeholders can impact the demand for inpatient competency restoration services. Collaboration with stakeholders can help to address effective and timely services depending on the individual's needs and placements, such as when an individual's competency to stand trial is restored prior to admission to a state hospital, or when a person is not likely to restore to competency in the foreseeable future but may be able to successfully live and receive treatment in the community. To address these issues, the Texas State Hospitals Office of Forensic Medicine proactively reaches out to stakeholders to explore alternative dispositions and options.

Additionally, the Texas State Hospital Office of Forensic Medicine and the Behavioral Health Services Office of Forensic Coordination (OFC) engage counties through the Jail In-Reach Learning Collaborative which aims to educate and collaborate with external stakeholders and community-based teams to support active forensic waitlist monitoring and services through:

- Clinical consultation services that may assist with psychiatric stabilization;
- Trial competency re-evaluations in the event of immediate restoration while awaiting state hospital transfer;
- Legal education on options for alternative case dispositions; and
- Enhanced follow-ups on patients restored to competency and returned to jail to prevent clinical decompensation and unnecessary rehospitalization.

The OFC promotes statewide initiatives that support local communities in behavioral health and justice planning to reduce and prevent justice-involvement for people with behavioral health needs, with the downstream impact of reducing the number of people in the competency restoration process. OFC conducts local strategic planning with counties through Sequential Intercept Model (SIM) Mapping Workshops. SIM Workshops support counties in developing strategic plans that increase the use of diversion and reduce reliance on inpatient competency restoration services.

OFC, in collaboration with the Texas Judicial Commission on Mental Health launched the Eliminate the Wait Campaign, which provides municipal and county behavioral

health and justice stakeholders with training and technical assistance on strategies that reduce reliance on inpatient competency restoration services.

The Texas Behavioral Health and Justice Technical Assistance Center, supported by OFC, provides statewide training and technical assistance on competency restoration processes, diversion, and other issues that impact forensics and justice.

Current Construction

HSCS is ensuring current and future state hospital capacity through the following projects:

Austin State Hospital

A replacement hospital building for Austin State Hospital is under construction. This project will not increase capacity but will provide a lasting therapeutic environment. The project is nearing completion and move-in is estimated for June 2024.

San Antonio State Hospital

A replacement hospital building for the San Antonio State Hospital is under construction. The project is nearing completion and move-in is estimated for May 2024.

The Supplemental Appropriations Act, S.B. 30, 88th Legislature, Regular Session, 2023, appropriated \$15,000,000 to Strategy G.2.4, Facility Repairs and Renovation, to convert the 40-bed Alamo Hall at San Antonio State Hospital to an MSU.

Texas Behavioral Health Center at the University of Texas Southwestern

The Texas Behavioral Health Center at the University of Texas Southwestern will be a new 292-bed inpatient psychiatric hospital with 200 adult beds and 92 pediatric beds. The adult unit is under construction with move-in completion estimated for July 2025, and the pediatric unit is under construction with completion estimated for April 2026.

North Texas State Hospital – Wichita Falls Campus

The Supplemental Appropriations Act, S.B. 30, 88th Legislature, Regular Session, 2023, appropriated \$452,000,000 to Strategy G.2.4, Facility Repairs and

Renovation, to construct a 200-bed replacement hospital for the North Texas State Hospital Wichita Falls Campus to include 24 MSU beds and 136 non-MSU forensic beds. This project is in the planning phase, the architecture and engineering (A/E) contract was executed in December 2023, and the construction manager at risk (CMR) contract is estimated to be executed shortly.

Terrell State Hospital

The Supplemental Appropriations Act, S.B. 30, 88th Legislature, Regular Session, 2023, appropriated \$573,000,000 to Strategy G.2.4, Facility Repairs and Renovation, to construct a 250-bed replacement hospital for the Terrell State Hospital campus to include 50 MSU beds and 140 non-MSU forensic beds. This project is in the planning phase, the A/E contract was executed in January 2024, and the CMR contract is estimated to be executed shortly.

Rio Grande State Center

The Supplemental Appropriations Act, S.B. 30, 88th Legislature, Regular Session, 2023, appropriated \$120,000,000 to Strategy G.2.4, Facility Repairs and Renovation, to expand the Rio Grande State Center by 50 MSU beds. This project is in the planning phase, the A/E contract was executed in February 2024, and the CMR selection process is ongoing.

El Paso Psychiatric Center

The Supplemental Appropriations Act, S.B. 30, 88th Legislature, Regular Session, 2023, appropriated \$50,000,000 to Strategy G.2.4, Facility Repairs and Renovation, for land acquisition, pre-planning, planning, and initial construction of a 50-bed expansion of El Paso Psychiatric Center, to include 25 non-MSU beds. This project is in the planning phase, the A/E contract was executed in March 2024, sites are being studied to acquire land, and CMR selection will occur closer to final site selection.

Amarillo

The Supplemental Appropriations Act, S.B. 30, 88th Legislature, Regular Session, 2023, appropriated \$159,000,000 to Strategy G.2.4, Facility Repairs and Renovation, to construct a new 75-bed hospital in Amarillo to include 50 non-MSU forensic beds. This project is in the planning phase, the A/E contract was executed in January 2024, and the CMR selection process is ongoing.

Lubbock

The Supplemental Appropriations Act, S.B. 30, 88th Legislature, Regular Session, 2023, appropriated \$121,000,000 to Strategy G.2.4, Facility Repairs and Renovation, to construct a new 50-bed MSU hospital in Lubbock. This project is in the planning phase, the A/E contract was executed in February 2024, and the CMR selection process is ongoing.

Other Upcoming Capacity

The General Appropriations Act, House Bill 1, 88th Legislature, Regular Session, 2023, Article II, HHSC, Rider 52, appropriated \$45,834,616 per fiscal year to Strategy

G.2.2., Community Mental Health Hospitals, to contract for 150 additional competency restoration beds. Two of the five contracts are executed, and one sub-contractor began admitting patients in April 2024.

The Supplemental Appropriations Act, S.B. 30, 88th Legislature, Regular Session, 2023, appropriated \$239,000,000 in grants to Strategy G.2.4, Facility Repairs and Renovation, for private construction of up to 332 inpatient beds, half of which must serve forensic patients, in the Rio Grande Valley, Victoria County, Montgomery County and Beaumont. These grant awards remain pending.

Funds Expended to Remove People from Forensic Inpatient Bed Waiting Lists

Table 13. Forensic Waiting Lists Related Expenditures below details the funds expended to remove people from the forensic waiting lists in FY24 Q1 and Q2.

State hospital operations includes all expenditures from Strategy G.2.1, Mental Health State Hospitals, including funds used for salaries, supplies, other items, and excluding funds used for contract beds. State hospital operations expenditures include funds used to serve children and adolescents, and civil and voluntary patients at state hospitals in addition to forensic patients.

State hospital contract beds includes expenditures from Strategy G.2.1, Mental Health State Hospitals, and Strategy G.2.2, Community Mental Health Hospitals, that fund the contracts under HSCS for the operation of beds at the John S. Dunn Behavioral Sciences Center, Montgomery County Mental Health Treatment Facility, Palestine Regional Medical Center, and University of Texas Health Science Center at

Tyler. State hospital contract beds expenditures include funds used to serve civil patients at John S. Dunn Behavioral Sciences Center and University of Texas Health Science Center at Tyler in addition to forensic patients.

State hospital deferred maintenance includes expenditures. Additional deferred maintenance expenditures may be included within the state hospital operations category if funded within a state hospital’s existing budget.

Table 13. Forensic Waiting Lists Related Expenditures

Expenditures	FY24 Q1	FY24 Q2
State Hospital Operations	\$139,065,436.00	\$153,704,873.00
State Hospital Contract Beds	\$12,597,186.80	\$19,661,346.10
State Hospital Construction	\$100,510,748.19	\$6,973,385.85
State Hospital Deferred Maintenance	\$15,299,733.95	\$18,960,298.11
TOTAL	\$267,473,104.94	\$199,299,903.06

List of Acronyms

Acronym	Full Name
A/E	Architecture and Engineering
CMR	Construction Manager At-Risk
COVID-19	Coronavirus Disease 2019
H.B.	House Bill
HHSC	Health and Human Services Commission
HSCS	Health and Specialty Care System
LBHA	Local Behavioral Health Authority
LMHA	Local Mental Health Authority
MSU	Maximum-Security Unit
Non-MSU	Non-Maximum-Security Unit
OFC	Office of Forensic Coordination
Q	Quarter
S.B.	Senate Bill
SIM	Sequential Intercept Model