

San Luis Valley Behavioral Health Group Board Meeting

Tuesday, March 31, 2026, 5:00 PM

San Luis Valley Behavioral Health Board Room

Vision: To improve the quality of life for the residents of the San Luis Valley.

Mission: To provide access to quality behavioral health services that enrich lives and promote wellness. We are driven by a profound respect for human dignity and a desire to serve the unrepresented, the disenfranchised, and those who experience behavioral health distress.

Values:

Excellence

Activism

Ethical Practices

Innovation

Diversity

<u>Agenda</u>	
<i>*Indicates an action item/vote</i>	
Roll Call/Declaration of Quorum Pat Stanford	5:00 pm-5:01 pm
*Approval of Agenda Pat Stanford	5:01 pm-5:03 pm
*Approval of Minutes Pat Stanford	5:03 pm-5:05 pm
Investment Portfolio/Market Update Wes Ursic	5:05 pm-5:20 pm
Presentation Arnold Salazar	5:20 pm-5:50 pm
*Finance Report Kyle Turnwall	5:50 pm -6:15 pm
Executive Committee Report Pat Stanford	6:15 pm-6:25 pm
CEO Report Victoria Romero	6:25 pm-6:35 pm
Executive Session Pat Stanford	
Correspondence Review Angie Gallegos	6:54 pm-6:55 pm
Other Business *Property Update Pat Stanford/Victoria Romero	6:55 pm-6:59 pm
Adjournment- Next Meeting: April 28, 2026 Pat Stanford	6:59 pm-7:00 pm

San Luis Valley Behavioral Health Group Board Meeting

Tuesday, February 24, 2026, 5:00 PM

San Luis Valley Behavioral Health Board Room

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<u>Agenda</u> <i>*Indicates an action item/vote</i>	
Roll Call/Declaration of Quorum Member Present: Pat Stanford, Mark Manzanares, Laurie Rivera, Olivia How, Jody Kern, and Victoria Romero Members Excused: Aquino Gallegos and George Wilkinson Staff Present: Kyle Turnwall and Angie Gallegos	5:00 pm-5:01 pm
*Approval of Agenda It was M/S by Laurie Rivera and Mark Manzanares to approve the agenda, with an edit to postpone Jennifer Silva's presentation. Motion carried.	5:01 pm-5:03 pm
*Approval of Minutes It was M/S by Olivia How and Victoria Romero to approve the minutes dated January 29, 2026, with a correction to Laurie's name. Motion carried.	5:03 pm-5:05 pm
Psychiatric Updates (Geriatric Updates) Jennifer Silva's presentation was postponed.	5:05 pm-5:20 pm
*Finance Report Kyle Turnwall presented the financial statements for the month ending January 31, 2026. He reviewed the balance sheet liquidity, operating revenue, operating expenses, the Medicaid PPS reconciliation, the consolidated statements of operations, and capital projects. It was M/S by Laurie Rivera and Olivia How to approve the financial statements and file them for audit. Motion carried.	5:20 pm-5:50 pm
Executive Committee Report Pat Stanford reported that there was no executive committee meeting in February.	5:50 pm -5:55 pm
CEO Report Victoria Romero presented her CEO report. Her report was included in the board packet for review.	5:55 pm-6:15 pm
Correspondence Review Angie Gallegos reviewed two items: A thank-you note from Mercadillo Farmer's Market and a greeting card from Adams State University's president and first lady.	6:15 pm-6:20 pm

Other Business Property Update- The parcels of land by Walmart have been separated and put up for sale. We plan to move forward with listing the South Fork office. Mi Esperanza is still on the table. Matter from Last Meeting-Due to the absence of board members in January and February, the matter discussed during Executive Session at the January Meeting was postponed to the March meeting.	6:20 pm-6:29 pm
Adjournment- Next <i>Meeting: March 31, 2026</i> The meeting was adjourned at 6:12 pm.	6:29 pm-6:30 pm



SAN LUIS VALLEY

Behavioral Health Group

Dedicated to Hope, Healing and Recovery

FINANCIAL REPORT

FEBRUARY 2026

SAN LUIS VALLEY BEHAVIORAL HEALTH GROUP
CONSOLIDATED BALANCE SHEET
FEBRUARY 28, 2026

	Community Mental Health Center	Asset Management Corporation	Intercompany Eliminations	Consolidated San Luis Valley Behavioral Health Group
ASSETS				
Cash	4,358,667	\$ 1,110,062	\$ -	\$ 5,468,729
Investments	5,494,769	10,599,621	-	16,094,390
Grants Receivable	394,673	-	-	394,673
Interest Receivable	-	4,697	-	4,697
Intercompany Receivable	-	88,216	(88,216)	-
Prepaid Expenses and Other Assets	281,937	-	-	281,937
Notes Receivable	-	915,775	-	915,775
Investment in Health Colorado, Inc.	1,085,366	-	-	1,085,366
Right-of-Use Assets, net	-	335,971	-	335,971
Property and Equipment, net	84,868	6,662,099	-	6,746,967
TOTAL ASSETS	\$ 11,700,280	\$ 19,716,441	\$ (88,216)	\$ 31,328,505
LIABILITIES				
Accounts Payable	53,695	747	-	54,442
Accrued Payroll and Employee Benefits	943,613	-	-	943,613
Due to Health Colorado	17,300	-	-	17,300
Due to Rocky Mountain Health Plans	500,000	-	-	500,000
Leases Payable	-	331,049	-	331,049
Intercompany Payable	88,216	-	(88,216)	-
Security Deposits	16,143	9,653	-	25,796
Deferred Revenue	1,115	8,660	-	9,775
TOTAL LIABILITIES	1,620,082	350,109	(88,216)	1,881,975
NET ASSETS	10,080,198	19,366,332	-	29,446,530
TOTAL LIABILITIES AND NET ASSETS	\$ 11,700,280	\$ 19,716,441	\$ (88,216)	\$ 31,328,505

San Luis Valley Behavioral Health Group
San Luis Valley Community Mental Health Center
Balance Sheet
February 28, 2026

	AMOUNT
ASSETS	
Current Assets	
Bank	
1000 - Checking - CMHC Operating	\$4,047,162.60
1015 - Cash in Bank - Credit Cards	\$3,109.24
1020 - Cash in Bank - Cafe	\$20,206.04
1080 - Money Market - SLV Federal Bank	\$287,079.15
1095 - Petty Cash	\$1,110.00
Total Bank	\$4,358,667.03
Accounts Receivable	
1210 - Accounts Receivable - Grants	\$394,673.10
Total Accounts Receivable	\$394,673.10
Other Current Asset	
1300 - Prepaid Expenses	
1310 - Prepaid Expenses - Insurance	\$138,494.49
1320 - Prepaid Expenses - Licenses	\$143,217.76
Total - 1300 - Prepaid Expenses	\$281,712.25
Total Other Current Asset	\$281,712.25
Total Current Assets	\$5,035,052.38
Fixed Assets	
1500 - Property and Equipment	\$108,245.84
1600 - Accumulated Depreciation and Amortization	(\$23,377.60)
Total Fixed Assets	\$84,868.24
Other Assets	
1800 - Investments	
1810 - Investments - LPL Financial - CMHC	\$5,494,769.14
1850 - Investment in Health Colorado Inc.	\$1,085,366.00
Total - 1800 - Investments	\$6,580,135.14
1910 - Deposits	\$223.88
Total Other Assets	\$6,580,359.02
Total ASSETS	\$11,700,279.64
Liabilities & Equity	
Current Liabilities	
Accounts Payable	\$53,695.12
Other Current Liability	
2110 - Accrued Payroll	\$149,218.47
2120 - Accrued Vacation Payable	\$512,114.16
2300 - Employee Benefits Payable	\$282,279.94
2501 - Due to Health Colorado Inc	\$17,300.00
2502 - Due to Rocky Mountain Health Plans	\$500,000.00
2590 - Deferred Revenue	\$1,115.00
2595 - Intercompany Payable	\$88,216.27
Total Other Current Liability	\$1,550,243.84
Total Current Liabilities	\$1,603,938.96
Long Term Liabilities	
2710 - Rental Security Deposits	\$16,143.00
Total Long Term Liabilities	\$16,143.00
Equity	
Retained Earnings	\$10,288,386.14
Net Income	(\$208,188.46)
Total Equity	\$10,080,197.68
Total Liabilities & Equity	\$11,700,279.64

San Luis Valley Behavioral Health Group
San Luis Valley Asset Management Corporation
Balance Sheet
February 28, 2026

	AMOUNT
ASSETS	
Current Assets	
Bank	
1010 - Checking - Asset Management Operating	\$1,110,061.75
Total Bank	\$1,110,061.75
Accounts Receivable	
1250 - Accounts Receivable - Other	\$4,697.34
Total Accounts Receivable	\$4,697.34
Other Current Asset	
1395 - Intercompany Receivable	\$88,216.27
Total Other Current Asset	\$88,216.27
Total Current Assets	\$1,202,975.36
Fixed Assets	
1500 - Property and Equipment	
1510 - Land	\$1,100,660.11
1520 - Buildings and Improvements	\$10,107,789.93
1540 - Vehicles	\$186,422.44
1550 - Right-of-Use Assets - Vehicles	\$588,445.36
1590 - Work In Progress	\$50,006.00
Total - 1500 - Property and Equipment	\$12,033,323.84
1600 - Accumulated Depreciation and Amortization	(\$5,035,254.27)
Total Fixed Assets	\$6,998,069.57
Other Assets	
1700 - Notes Receivable	
1710 - Note Receivable - ATC (2017 / 2257 Lava Lane)	\$813,769.16
1720 - Note Receivable - ATC (2261 Lava Lane)	\$102,005.52
Total - 1700 - Notes Receivable	\$915,774.68
1800 - Investments	
1820 - Investments - LPL Financial - Asset Management	\$10,599,621.17
Total - 1800 - Investments	\$10,599,621.17
Total Other Assets	\$11,515,395.85
Total ASSETS	\$19,716,440.78
Liabilities & Equity	
Current Liabilities	
Accounts Payable	\$746.81
Other Current Liability	
2590 - Deferred Revenue	\$8,660.56
Total Other Current Liability	\$8,660.56
Total Current Liabilities	\$9,407.37
Long Term Liabilities	
2710 - Rental Security Deposits	\$9,653.00
2750 - Lease Liability - Vehicles	\$331,048.56
Total Long Term Liabilities	\$340,701.56
Equity	
Retained Earnings	\$17,912,783.04
Net Income	\$1,453,548.81
Total Equity	\$19,366,331.85
Total Liabilities & Equity	\$19,716,440.78

SAN LUIS VALLEY BEHAVIORAL HEALTH GROUP
CONSOLIDATED STATEMENT OF OPERATIONS
FEBRUARY 28, 2026

	Community Mental Health Center	Asset Management Corporation	Intercompany Eliminations	Consolidated San Luis Valley Behavioral Health Group
REVENUE				
Client Service Revenue	\$ 7,387,796	\$ -	\$ -	\$ 7,387,796
Government Grant Income	2,449,400	-	-	2,449,400
Contributions and Other Grant Income	64,389	-	-	64,389
Lease Income	135,044	456,827	(339,560)	252,311
Other Operating Income	115,165	-	-	115,165
Total REVENUE	10,151,794	456,827	(339,560)	10,269,061
EXPENSES				
Salaries and Wages	6,431,543	-	-	6,431,543
Payroll Taxes	482,386	-	-	482,386
Employee Benefits	1,612,050	-	-	1,612,050
Advertising and Marketing	22,854	-	-	22,854
Client	23,515	-	-	23,515
Conferences, Trainings and Meetings	57,829	-	-	57,829
Depreciation and Amortization	14,261	331,664	-	345,925
Information Technology	596,206	-	-	596,206
Liability Insurance	68,116	-	-	68,116
Licenses, Fees and Dues	157,495	-	-	157,495
Occupancy	556,986	22,934	(207,615)	372,305
Office Expense	83,237	-	-	83,237
Professional Fees	104,054	-	-	104,054
Travel	63,501	-	-	63,501
Vehicle Expense	220,805	-	(131,945)	88,860
Other Operating Expense	9,668	31,339	-	41,007
Total EXPENSES	10,504,506	385,937	(339,560)	10,550,883
OPERATING INCOME (LOSS)	(352,712)	70,890	-	(281,822)
OTHER INCOME (EXPENSE)				
Interest Income	4,364	35,899	-	40,263
Investment Income	113,959	245,381	-	359,340
Gain on Disposal of Property & Equipment	-	26,649	-	26,649
Unrealized Gain (Loss) on Investments	26,201	1,074,730	-	1,100,931
Total OTHER INCOME (EXPENSE)	144,524	1,382,659	-	1,527,183
CHANGE IN NET ASSETS	(208,188)	1,453,549	-	1,245,361
NET ASSETS - 06/30/2025	10,288,386	17,912,782	-	28,201,168
NET ASSETS - 02/28/2026	\$ 10,080,198	\$ 19,366,331	\$ -	\$ 29,446,529

San Luis Valley Behavioral Health Group
San Luis Valley Community Mental Health Center
Budget vs. Actual Statement of Operations
Current Month - February 2026

	AMOUNT	BUDGET AMOUNT	AMOUNT OVER BUDGET	% OF BUDGET
Ordinary Income/Expense				
Income				
4000 - Client Service Revenue	\$949,160.74	\$969,300.00	(\$20,139.26)	97.92%
4200 - Government Grant Income	\$214,402.24	\$209,750.00	\$4,652.24	102.22%
4400 - Contributions and Other Grant Income	\$0.00	\$2,500.00	(\$2,500.00)	0.00%
4700 - Rental Income	\$24,098.50	\$16,500.00	\$7,598.50	146.05%
4900 - Other Operating Income	\$9,823.17	\$6,250.00	\$3,573.17	157.17%
Total - Income	\$1,197,484.65	\$1,204,300.00	(\$6,815.35)	99.43%
Gross Profit	\$1,197,484.65	\$1,204,300.00	(\$6,815.35)	99.43%
Expense				
6200 - Salaries and Wages	\$904,134.83	\$782,000.00	\$122,134.83	115.62%
6300 - Payroll Taxes	\$69,152.08	\$61,615.00	\$7,537.08	112.23%
6400 - Employee Benefits	\$207,736.79	\$190,195.00	\$17,541.79	109.22%
7000 - Advertising and Marketing	\$1,994.98	\$3,050.00	(\$1,055.02)	65.41%
7050 - Client	\$2,333.68	\$4,500.00	(\$2,166.32)	51.86%
7100 - Conferences, Trainings and Meetings	(\$252.93)	\$5,500.00	(\$5,752.93)	-4.60%
7150 - Depreciation and Amortization	\$1,890.10	\$2,500.00	(\$609.90)	75.60%
7200 - Information Technology	\$56,176.45	\$64,375.00	(\$8,198.55)	87.26%
7250 - Liability Insurance	\$8,407.33	\$9,500.00	(\$1,092.67)	88.50%
7300 - Licenses, Fees and Dues	\$11,006.12	\$11,350.00	(\$343.88)	96.97%
7400 - Occupancy	\$64,069.97	\$67,775.00	(\$3,705.03)	94.53%
7500 - Office Expense	\$9,458.20	\$11,450.00	(\$1,991.80)	82.60%
7650 - Professional Fees	\$3,500.00	\$4,350.00	(\$850.00)	80.46%
7700 - Travel	\$4,257.37	\$9,475.00	(\$5,217.63)	44.93%
7800 - Vehicle Expense	\$26,144.08	\$31,800.00	(\$5,655.92)	82.21%
7900 - Other Operating Expense	(\$8.69)	\$1,350.00	(\$1,358.69)	-0.64%
Total - Expense	\$1,370,000.36	\$1,260,785.00	\$109,215.36	108.66%
Net Ordinary Income	(\$172,515.71)	(\$56,485.00)	(\$116,030.71)	305.42%
Other Income and Expenses				
Other Income				
9000 - Other Income				
9010 - Interest Income	\$538.10	\$0.00	\$538.10	0.00%
9020 - Investment Income	\$26,389.52	\$15,500.00	\$10,889.52	170.25%
9030 - Unrealized Gain (Loss) on Investments	\$635.88	\$0.00	\$635.88	0.00%
Total - 9000 - Other Income	\$27,563.50	\$15,500.00	\$12,063.50	177.83%
Total - Other Income	\$27,563.50	\$15,500.00	\$12,063.50	177.83%
Net Other Income	\$27,563.50	\$15,500.00	\$12,063.50	177.83%
Net Income	(\$144,952.21)	(\$40,985.00)	(\$103,967.21)	353.67%

**San Luis Valley Behavioral Health Group
San Luis Valley Community Mental Health Center
Budget vs. Actual Statement of Operations
Fiscal-Year-To-Date February 28, 2026**

	AMOUNT	BUDGET AMOUNT	AMOUNT OVER BUDGET	% OF BUDGET
Ordinary Income/Expense				
Income				
4000 - Client Service Revenue	\$7,387,795.99	\$7,754,400.00	(\$366,604.01)	95.27%
4200 - Government Grant Income	\$2,449,399.82	\$2,178,000.00	\$271,399.82	112.46%
4400 - Contributions and Other Grant Income	\$64,388.73	\$20,000.00	\$44,388.73	321.94%
4700 - Rental Income	\$135,044.00	\$132,000.00	\$3,044.00	102.31%
4900 - Other Operating Income	\$115,165.11	\$55,000.00	\$60,165.11	209.39%
Total - Income	\$10,151,793.65	\$10,139,400.00	\$12,393.65	100.12%
Gross Profit	\$10,151,793.65	\$10,139,400.00	\$12,393.65	100.12%
Expense				
6200 - Salaries and Wages	\$6,431,543.15	\$6,256,000.00	\$175,543.15	102.81%
6300 - Payroll Taxes	\$482,385.93	\$492,920.00	(\$10,534.07)	97.86%
6400 - Employee Benefits	\$1,612,049.76	\$1,537,245.00	\$74,804.76	104.87%
7000 - Advertising and Marketing	\$22,853.99	\$25,800.00	(\$2,946.01)	88.58%
7050 - Client	\$23,514.60	\$36,000.00	(\$12,485.40)	65.32%
7100 - Conferences, Trainings and Meetings	\$57,829.47	\$73,000.00	(\$15,170.53)	79.22%
7150 - Depreciation and Amortization	\$14,260.80	\$20,000.00	(\$5,739.20)	71.30%
7200 - Information Technology	\$596,205.78	\$575,000.00	\$21,205.78	103.69%
7250 - Liability Insurance	\$68,115.64	\$82,000.00	(\$13,884.36)	83.07%
7300 - Licenses, Fees and Dues	\$157,495.33	\$184,300.00	(\$26,804.67)	85.46%
7400 - Occupancy	\$556,985.80	\$544,000.00	\$12,985.80	102.39%
7500 - Office Expense	\$83,237.14	\$95,350.00	(\$12,112.86)	87.30%
7650 - Professional Fees	\$104,054.54	\$111,800.00	(\$7,745.46)	93.07%
7700 - Travel	\$63,500.82	\$75,800.00	(\$12,299.18)	83.77%
7800 - Vehicle Expense	\$220,804.97	\$257,550.00	(\$36,745.03)	85.73%
7900 - Other Operating Expense	\$9,668.25	\$10,800.00	(\$1,131.75)	89.52%
Total - Expense	\$10,504,505.97	\$10,377,565.00	\$126,940.97	101.22%
Net Ordinary Income	(\$352,712.32)	(\$238,165.00)	(\$114,547.32)	148.10%
Other Income and Expenses				
Other Income				
9000 - Other Income				
9010 - Interest Income	\$4,363.66	\$0.00	\$4,363.66	0.00%
9020 - Investment Income	\$113,958.71	\$124,000.00	(\$10,041.29)	91.90%
9030 - Unrealized Gain (Loss) on Investments	\$26,201.49	\$0.00	\$26,201.49	0.00%
Total - 9000 - Other Income	\$144,523.86	\$124,000.00	\$20,523.86	116.55%
Total - Other Income	\$144,523.86	\$124,000.00	\$20,523.86	116.55%
Net Other Income	\$144,523.86	\$124,000.00	\$20,523.86	116.55%
Net Income	(\$208,188.46)	(\$114,165.00)	(\$94,023.46)	182.36%

San Luis Valley Behavioral Health Group
San Luis Valley Asset Management Corporation
Budget vs. Actual Statement of Operations
Current Month - February 2026

	AMOUNT	BUDGET AMOUNT	AMOUNT OVER BUDGET	% OF BUDGET
Ordinary Income/Expense				
Income				
4700 - Rental Income	\$60,092.38	\$55,500.00	\$4,592.38	108.27%
Total - Income	\$60,092.38	\$55,500.00	\$4,592.38	108.27%
Gross Profit	\$60,092.38	\$55,500.00	\$4,592.38	108.27%
Expense				
7150 - Depreciation and Amortization	\$41,522.12	\$42,750.00	(\$1,227.88)	97.13%
7400 - Occupancy	\$1,590.32	\$5,000.00	(\$3,409.68)	31.81%
7900 - Other Operating Expense	\$3,609.29	\$3,750.00	(\$140.71)	96.25%
Total - Expense	\$46,721.73	\$51,500.00	(\$4,778.27)	90.72%
Net Ordinary Income	\$13,370.65	\$4,000.00	\$9,370.65	334.27%
Other Income and Expenses				
Other Income				
9000 - Other Income				
9010 - Interest Income	\$4,246.58	\$4,500.00	(\$253.42)	94.37%
9020 - Investment Income	\$25,196.14	\$25,000.00	\$196.14	100.78%
9030 - Unrealized Gain (Loss) on Investments	\$283,200.84	\$0.00	\$283,200.84	0.00%
9100 - Gain (Loss) on Disposal of Property and Equipment	\$16,610.00	\$0.00	\$16,610.00	0.00%
Total - 9000 - Other Income	\$329,253.56	\$29,500.00	\$299,753.56	1,116.11%
Total - Other Income	\$329,253.56	\$29,500.00	\$299,753.56	1,116.11%
Net Other Income	\$329,253.56	\$29,500.00	\$299,753.56	1,116.11%
Net Income	\$342,624.21	\$33,500.00	\$309,124.21	1,022.76%

San Luis Valley Behavioral Health Group
San Luis Valley Asset Management Corporation
Budget vs. Actual Statement of Operations
Fiscal-Year-To-Date February 28, 2026

	AMOUNT	BUDGET AMOUNT	AMOUNT OVER BUDGET	% OF BUDGET
Ordinary Income/Expense				
Income				
4700 - Rental Income	\$456,826.54	\$444,000.00	\$12,826.54	102.89%
Total - Income	\$456,826.54	\$444,000.00	\$12,826.54	102.89%
Gross Profit	\$456,826.54	\$444,000.00	\$12,826.54	102.89%
Expense				
7150 - Depreciation and Amortization	\$331,663.79	\$342,000.00	(\$10,336.21)	96.98%
7400 - Occupancy	\$22,934.32	\$62,000.00	(\$39,065.68)	36.99%
7900 - Other Operating Expense	\$31,338.69	\$30,000.00	\$1,338.69	104.46%
Total - Expense	\$385,936.80	\$434,000.00	(\$48,063.20)	88.93%
Net Ordinary Income	\$70,889.74	\$10,000.00	\$60,889.74	708.90%
Other Income and Expenses				
Other Income				
9000 - Other Income				
9010 - Interest Income	\$35,899.07	\$36,000.00	(\$100.93)	99.72%
9020 - Investment Income	\$245,380.76	\$200,000.00	\$45,380.76	122.69%
9030 - Unrealized Gain (Loss) on Investments	\$1,074,730.24	\$0.00	\$1,074,730.24	0.00%
9100 - Gain (Loss) on Disposal of Property and Equipment	\$26,649.00	\$0.00	\$26,649.00	0.00%
Total - 9000 - Other Income	\$1,382,659.07	\$236,000.00	\$1,146,659.07	585.87%
Total - Other Income	\$1,382,659.07	\$236,000.00	\$1,146,659.07	585.87%
Net Other Income	\$1,382,659.07	\$236,000.00	\$1,146,659.07	585.87%
Net Income	\$1,453,548.81	\$246,000.00	\$1,207,548.81	590.87%

San Luis Valley Behavioral Health Group
Cash Position

	03/25/26	02/18/26	Variance	12/31/25	09/30/25	06/30/25	03/31/25
Asset Mgmt Corp - Operating Cash	\$ 1,107,840	\$ 1,115,152	\$ (7,312)	\$ 985,795	\$ 856,001	\$ 883,349	\$ 1,161,222
CMHC - Operating Cash	\$ 4,583,969	\$ 3,896,880	\$ 687,089	\$ 4,363,598	\$ 3,876,848	\$ 3,193,411	\$ 3,377,977
Total Operating Cash	\$ 5,691,809	\$ 5,012,032	\$ 679,777	\$ 5,349,393	\$ 4,732,849	\$ 4,076,760	\$ 4,539,199
SLV Federal Money Market Account	\$ 287,079	\$ 286,991	\$ 88	\$ 286,894	\$ 286,605	\$ 286,316	\$ 286,030
LPL Financial - Asset Mgmt Corp	\$ 10,599,621	\$ 10,291,224	\$ 308,397	\$ 10,074,795	\$ 9,990,715	\$ 9,279,510	\$ 8,212,028
LPL Financial - CMHC	\$ 5,494,769	\$ 5,467,744	\$ 27,025	\$ 5,465,200	\$ 5,414,978	\$ 5,354,609	\$ 5,289,974
Total Long-Term Investments	\$ 16,381,469	\$ 16,045,959	\$ 335,510	\$ 15,826,889	\$ 15,692,298	\$ 14,920,435	\$ 13,788,032
Total Operating Cash / LT Investments	\$ 22,073,278	\$ 21,057,991	\$ 1,015,287	\$ 21,176,282	\$ 20,425,147	\$ 18,997,195	\$ 18,327,231
Notes Receivable - The Carrigan Group (Advantage Treatment Center)							
	Loan #1	Loan #2	Total				
Loan Amount	\$ 1,000,000	\$ 350,000	\$ 1,350,000	10 year term 06/01/2023 - 06/01/2033			
Interest Received	\$ 137,499	\$ 37,473	\$ 174,972	Interest Rate - 5.5%			
Principal Received	\$ 192,501	\$ 252,527	\$ 445,028				
Total Received	\$ 330,000	\$ 290,000	\$ 620,000				
Outstanding Loan Balance	\$ 807,499	\$ 97,473	\$ 904,972				

San Luis Valley Behavioral Health Group Executive Committee Meeting

Tuesday, March 10, 2026 1:00 PM

Vision: To improve the quality of life for the residents of the San Luis Valley.

Mission: To provide access to quality behavioral health services that enrich lives and promote wellness. We are driven by a profound respect for human dignity and a desire to serve the unrepresented, the disenfranchised, and those who experience behavioral health distress.

Values:

Excellence

Activism

Ethical Practices

Innovation

Diversity

BHA Update

Governor Jared Polis has announced the appointment of Lieutenant Governor Dianne Primavera as Interim Commissioner of the Colorado Behavioral Health Administration, effective February 28. With the upcoming shift in power in the state, this feels like a thoughtful and strategic move, allowing the next governor to determine the long-term direction of this role. Lieutenant Governor Primavera shared that in this interim role, she is committed to ensuring steady leadership while supporting the essential functions of the BHA. She will focus on providing stability, clear direction, and consistent accountability—while keeping at the forefront the Coloradans who rely on access to affordable, high-quality behavioral health services throughout our state. Some have noted that she will ensure work moves forward, but that not many new initiatives or changes will occur until the new Governor is in place.

ASU Project follow-up

Victoria will follow up with Mark regarding the student support project's contact information.

AI Summit and CEO Work Session Report out

The AI Summit brought together executive and technology leaders for a dynamic, at times sobering, conversation about the role of AI in behavioral health.

There was strong alignment that AI is not simply a technology issue, but a fundamental shift in how care is delivered, financed, and regulated. On the practical side, participants identified immediate opportunities, such as documentation support, workflow optimization, and revenue cycle improvements, to reduce administrative burden and increase capacity.

At the same time, there was significant discussion of risks—including governance, data privacy, staff deskilling, and the pace of change—that left many organizations feeling both unprepared and unable to wait.

The group ultimately aligned around key priorities: building internal guardrails, starting with small pilots, increasing AI literacy across teams, and strengthening collaboration across CBHC members so organizations are not navigating this in isolation. Overall, AI represents both a significant opportunity and a real responsibility—one that will require ongoing leadership attention.

CEO Retreat March 5-6

The retreat was a valuable opportunity for CEOs to spend focused time on two key areas: long-term behavioral health financing in Colorado and near-term CCBHC implementation.

On financing, while the group did not land on a single model, there was strong alignment around a shared set of guiding principles—integrating behavioral health into whole-person care, simplifying and centralizing oversight, and reducing administrative complexity across the system.

There was also a clear sense that we are at an inflection point, and that CBHC and its members have an important role to play in helping shape what comes next.

On CCBHC, there is strong alignment around the opportunity, alongside recognition that thoughtful, coordinated implementation—especially early on—will be critical to success.

Overall, the group left with a shared framework and clearer direction, which we will continue to build on through our policy and engagement work.

April Board Meeting

Victoria will attend the National Conference for Mental Wellbeing in Denver and join the board meeting via Zoom. Kyle will be in person as we anticipate the budget conversation.

Board Dashboard

Victoria is working on a Data Dashboard report for the Board and will be seeking feedback. She will use information from the Board survey conducted this year, as well as continued feedback from BOD.

Housing Update

Kyle and Victoria have proactively notified the state of potential changes and have begun exploratory conversations with La Puente regarding future housing partnerships. La Puente has expressed interest in assuming the Voucher Administrator role to ensure this function remains locally managed. In addition, they are exploring opportunities to expand their housing capacity, including the potential transition of our voucher program and, longer term, our apartment units. Importantly, La Puente has emphasized their commitment to maintaining a strong partnership with SLVBHG, ensuring continued coordination so that tenant referrals remain streamlined and individuals continue to have access to behavioral health services. These discussions are in early stages, and we will continue to evaluate options that align with our mission, operational capacity, and long-term sustainability.

Leadership Update

As we continue advancing our strategic plan, I am placing stronger emphasis on leadership accountability to ensure we consistently meet our strategic goals and key performance indicators (KPIs). This means clearly aligning expectations at all levels of leadership, strengthening how we track and review performance data, and holding ourselves accountable not only for outcomes, but for the processes that drive those outcomes. By reinforcing regular monitoring, transparent reporting, and timely course correction, we are creating a more disciplined, data-informed approach to decision-making. This focus is intended to strengthen organizational performance, ensure we remain aligned with our mission, and position us to respond proactively to both opportunities and challenges in an increasingly complex behavioral health environment.

CEO Report

March 2026 Board Meeting

- * HCPF – Health Care Policy and Finance
- * BHA – Behavioral Health Administration
- *BHASO – Behavioral Health Administrative Service Organization
- *RAE – Regional Accountable Entity
- *CSNP – Comprehensive Safety Net Provider
- *CMS – Center for Medicaid/Medicare Services

Health Colorado Inc. (HCI):

There has been no update on the release of Behavioral Health Incentive funds from HCPF to Caredon for distribution to providers. HCI has two claimants pending resolution of provider issues; until these are resolved, we continue to hold biweekly meetings with HCPF. HCI has been randomly selected to participate in the 2026 Compliance Review Program through CMS, see below.

Dear Victoria Romero,

We are contacting you on behalf of the Centers for Medicare & Medicaid Services (CMS), National Standards Group (NSG), under the U.S. Department of Health & Human Services (HHS). As authorized by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Affordable Care Act (ACA), we oversee compliance with HIPAA Administrative Simplification standards for electronic health care transactions (45 CFR Parts 160 and 162).

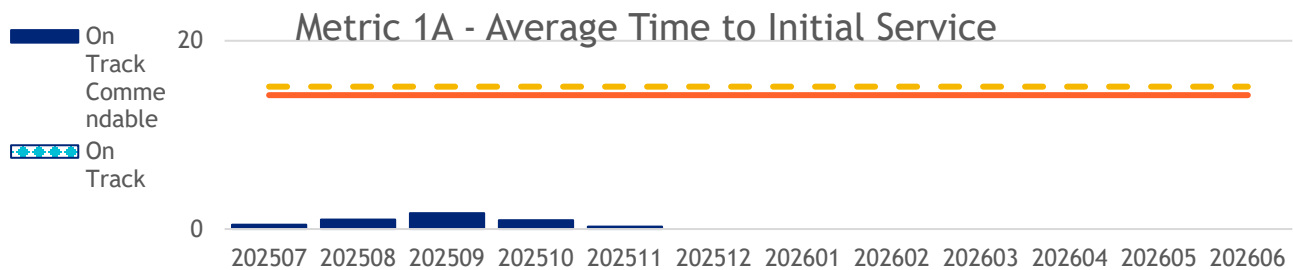
Your organization, Health Co., Inc. (NAIC# 16486), has been selected randomly to participate in the 2026 Compliance Review Program.

To begin the compliance review process, we must identify a primary point of contact at Health Co., Inc. (NAIC# 16486). This would be a contact who is a HIPAA compliance officer, EDI Manager, and/or a designee who is responsible for electronic health care transaction compliance for your organization. Once the primary point of contact is identified, we will send an introductory email with further instructions, including steps for registering your organization in the Compliance Review Program.

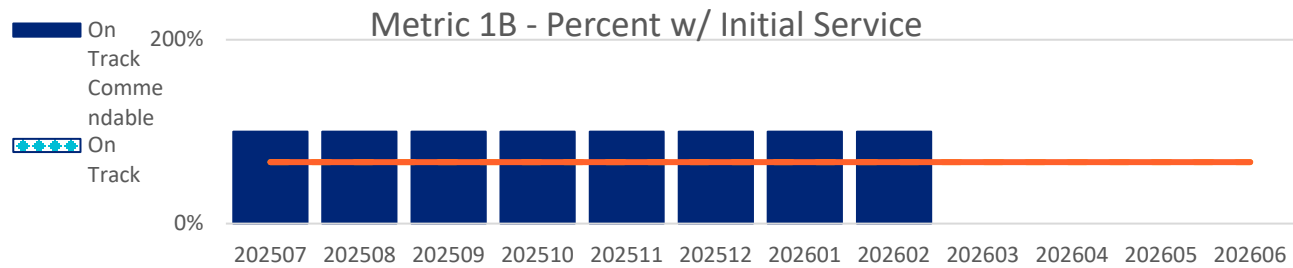
I am meeting with Caredon staff regarding this audit. Based on their experience in other states, they have a good sense of what information might be targeted. Colorado is the fifth state to undergo this type of auditing, according to HHS reviews.

Rocky Mountain Health Partners (RMHP)(RAE 1 and BHASO)

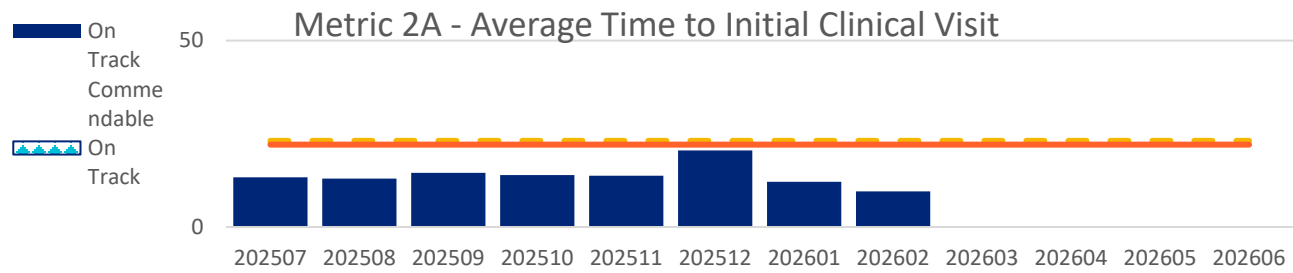
SLVBHG continues to do well with our KPI measurements from Rocky.



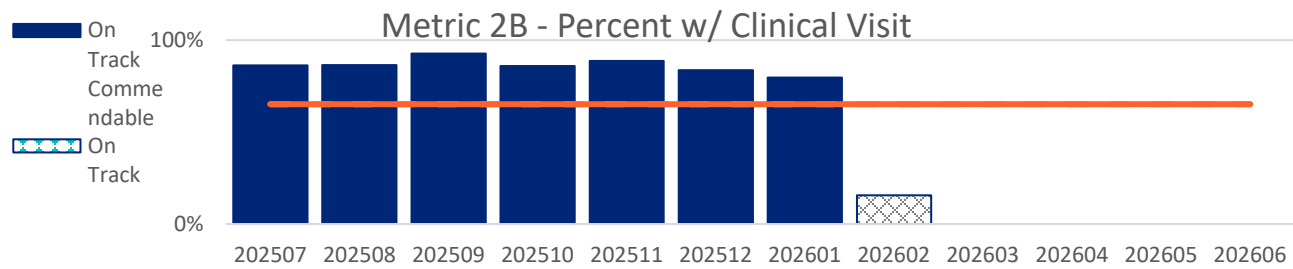
Baseline 16.03



Baseline 66.86%



Baseline 24.1225



Baseline 65.17%

Metric 3: Social Determinants of Health (SDoH) Screening	
Members served	1,197
Members with a SDoH Screening	1185
Metric 3 - Percent of Members w/ SDoH Screening	
Performance	99.0%
Baseline	4.0%
Target	12.6%
Commendable Target	21.2%
Status	On Track Commendable

Great results. On Track Commendable for all measures except for Metric 2B for February (this measure is usually 1 month behind and becomes On Track Commendable the following month when the data are processed).

Health Care Policy and Finance (HCPF):

HCPF's current priorities remain focused on maintaining discipline within the Medicaid Sustainability Framework, ensuring decisions are data-driven and aligned around shared statewide goals. A significant emphasis is being placed on preparing for the impacts of H.R. 1, including modernizing the eligibility ecosystem at both the state and county levels, strengthening fraud, waste, and abuse prevention, and supporting a "North Star" approach that helps Coloradans remain eligible and covered. At the same time, HCPF is actively pursuing additional federal funding opportunities and leveraging ACC Phase III innovations—such as eConsults, prescriber tools, and value-based payment models—to better control cost trends while improving quality outcomes. Across all efforts, the department continues to prioritize engagement, transparency, and strong partnerships, while incorporating third-party insights and national comparisons to guide strategy.

From a financial standpoint, HCPF's proposed FY 2026–27 budget totals \$20.6 billion, including \$5.99 billion in General Fund, reflecting a net increase of \$2.3 billion total funds and \$413 million General Fund. Notably, approximately 96% of these funds are directed to providers for member care, and HCPF represents roughly 32% of the state's total General Fund budget. However, this proposal already incorporates \$537 million in reductions, including \$217 million in General Fund. Additional January supplemental requests include further reductions of \$243.9 million total funds (\$126.8 million General Fund), alongside targeted investments and adjustments related to federal compliance, housing vouchers, and Certified Community Behavioral Health Clinic (CCBHC) waiver efforts.

Behavioral Health Administration (BHA):

BHA conducted its annual BHE and 27-65 renewal audit. Audit in March: a desk audit (virtual). Overall, we did well: we had 4 violations and 3 recommendations for improvement. All our BHE licenses were renewed. SLVBHG was found to be in substantial compliance with Behavioral Health Rules 2 CCR 502-1 and will be issued a full license for the next licensing cycle with an expiration of 3/24/2027.

- Reviewed Reports from Staff
- Reviewed Patient Client Charts
- Reviewed Personnel Files
- Reviewed Policies and Procedures

Auditor follow-up to include (not related to audit)

- Discussion regarding BHA rules for the change/implementation in July 2026
- Standardized referral tracking process (workflow- Standardized operating procedure)
- Access plan
- Walkthrough of outlying office sites due for in-person inspection

BHA Audit 2026- Action Plans

Due 05-05-26

Violation #1: Training needs to be completed prior to direct care. A lot were completed up to 6 months or so after the date of hire. Asked to have training done within the first month and prior to staff providing direct care.

Action Plan: This will be implemented into the onboarding process to ensure all new hires complete all training within the first month and/or before providing direct service.

Responsible Party: Human Resources Department

Violation #2: Regarding the youth outpatient charts, they lack risk assessments and safety concerns, address the armed forces as a cultural piece, and address family involvement.

Action Plan: Risk assessment and safety concerns, along with armed forces as a cultural piece and family involvement, will be added to the initial assessment template as a mandatory section to be completed. It will serve as a reminder. In conjunction with this enhancement, supervisors will train all credentialed staff to complete initial assessments in a clinically competent manner, including the newly added sections.

Responsible Party: Chief Program Officer, Leova Mascarenas & Director of Quality and Compliance, Amy Strasser-Garcia

Violation #3: Initial treatment plans are too basic and need to be individualized in some way. The recommendation is to pull something in from the screening.

Action Plan: CPO and CCO will work with directors and supervisors to develop training for staff and begin implementing individualized initial treatment plans the week of April 6th. The training shall include clinically appropriate information to include in the treatment plan from the screening, as well as the importance of personalized initial treatment plans.

Responsible party: Chief Program Officer, Leova Mascarenas & Chief Clinical Officer, Jennifer Silva

Violation #4: Mobile Crisis-no safety plan present.

Action plan: Supervisor of Crisis (ES), Susan Graham, stated in the close-out session with the BHA that practices were revised in February to make this change. The action plan is already in place, and it should be apparent from the charts in the future.

Responsible party: Director of Intensive Services, Diamond Mobbley & Crisis Supervisor, Susan Graham

BHA Recommendations-

While the following do not require formal action plans, please see below for our internal action plan to remedy the issue.

Recommendation #1:

Follow-up calls: One was late, taking 48 hours instead of 24 hours, during which they indicated they were not interested in follow-up calls. ES is obligated to follow up regardless, but clients are not required to answer our calls. We can reach out via call or, if we know their location, in person.

Internal action plan: Reinforce and train that all follow-up calls must be made within 24 hours, regardless of whether the client refuses, and must be documented.

Recommendation #2: Treatment plan signature pages — It is difficult to determine which signature page goes with which treatment plan.

Action plan: The treatment plan signature page will be revised to include a clear indicator that indicates which signature page corresponds to which treatment plan.

Responsible party: Director of Quality and Compliance, Amy Strasser-Garcia

Recommendation #3: Safety net screening, lacking symptoms and severity of symptoms of mental health diagnosis.

Action plan: Will revise the screening template to include symptoms and severity of symptoms as a prompt, coupled with staff training. Also, add the preliminary level of care recommended and whether they are a priority population.

Responsible party: Chief Program Officer, Leova Mascarenas, Chief Clinical Officer, Jennifer Silva & Director of Quality and Compliance, Amy Strasser-Garcia

Colorado Behavioral Health Council (CBHC):

We are now just over the halfway mark of the legislative session, and many of the dynamics outlined last month are beginning to take clearer shape. Fiscal constraints continue to influence nearly every policy conversation, and proposals impacting behavioral health are increasingly weighed not only on policy merit but also on cost, scalability, and long-term sustainability.

At this stage in the session, most bills have been introduced and are moving through committee hearings, where stakeholder input and amendments are actively shaping their trajectory. As fiscal notes are finalized and budget decisions come into sharper focus, we are seeing a narrowing of viable pathways forward for many proposals.

Budget Pressures Continue to Drive Decision-Making

The challenging budget environment remains the defining backdrop of the session. Following the March revenue forecast, the projected budget shortfall for FY 2026-27 has grown to \$1.5 billion, up from earlier estimates of approximately \$1 billion. As the Joint Budget Committee advances through figure setting, the tension between cost containment and maintaining access to critical services is becoming more pronounced. They still do not have a complete accounting of the cuts they've made-up to this point, but it is short of the \$1.5 billion mark. There are discussions about a 3.6% across-the-board cut for providers. Although this has not been made public, I understand it's a serious consideration.

For behavioral health providers, the potential for Medicaid rate reductions and broader cost containment strategies continues to create uncertainty. At the same time, policymakers are increasingly aware that reductions to community-based services may result in higher downstream costs in emergency departments, the criminal justice system, and state-run facilities.

This dynamic is contributing to a more cautious approach to new investments, while reinforcing the importance of protecting existing safety net infrastructure.

Key Legislation Moving Forward

CBHC continues to engage on a number of bills that could significantly impact the financing of and access to mental health and substance use treatment. Below are several where we have been most actively involved:

HB26-1002 — Provider Participation in Health Insurance

This bill addresses persistent barriers related to network access and reimbursement. It would require commercial insurers to verify network participation, expedite credentialing for behavioral health providers, and allow prelicensed clinicians to be reimbursed when working under supervision. It also reduces clinical hour requirements for LCSW licensure. These changes could improve network accuracy, reduce administrative delays, and strengthen the workforce pipeline during a critical staffing shortage.

Status: Passed the House; now moving to the Senate.

HB26-1195 — Psychotherapy Artificial Intelligence Restrictions

This bill establishes guardrails on the use of AI in psychotherapy, including limits on AI interacting directly with clients or generating treatment recommendations without clinician oversight, while allowing administrative uses like scheduling and documentation. This protects clinical decision-making and the therapeutic relationship. We are working with sponsors to clarify liability for AI use.

Status: Passed unanimously out of the House Health & Human Services Committee.

HB26-1116 — Processes for People with Behavioral Health Disorders

This bill aligns emergency commitment processes for substance use and mental health, expands discharge planning to include ongoing treatment and support, and allows courts to incorporate treatment requirements into release decisions. It also extends post-discharge follow-up timelines and creates limited regulatory flexibility for outpatient and telehealth providers. This bill aims to improve continuity of care and better integrate behavioral health into both crisis response and the criminal justice system.

Status: Passed third reading in the House; now moves to the Senate.

Sponsorships:

VW Brick for new location

Habitat for Humanity Bike 2 Build

CRP Sponsorship

cbh

Previous sponsorships:

Tu Casa Starry Night Ball

Boys and Girls Club of SLV

Sacred Heart Church

Farmers market

Alamosa After Prom

Grizzly Club

Leadership Connections/Meetings:

- Rocky RAE monthly meetings
- State Performance Improvement Advisory Committee
- Rocky Southern Colorado Payment Reform
- Western Health Alliance
- SLV Region 18 Opioid Governance
- BHA/CBHC Meeting
- HCPF/CBHC
- Western Health Alliance
- **Joint Budget Committee *** (Overall BH remains one of the three focus areas, along with Long-term Services and Support and pharmacy, for cuts to the budget.)
- CBHC Executive Committee
- CBHC PPAC committee
- Meeting with Rural Centers
- CRP meeting with Clarissa and Matt
-

Upcoming Time Off/Travel:

April 1-3rd

April 27th – 30th National Council for Mental Wellbeing Conference



San Luis Valley Community Mental Health Center Board Meeting

March 31, 2026

Vision: To improve the quality of life for the residents of the San Luis Valley.

Mission: To provide access to quality behavioral health services that enrich lives and promote wellness. We are driven by a profound respect for human dignity and a desire to serve the underrepresented, the disenfranchised, and those who experience behavioral distress.

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***indicates an action item/vote**

- 1) Roll Call/Declaration of Quorum
- 2) *Approval of Agenda
- 3) *Approval of Minutes
- 4) Correspondence Review
- 5) Other Business
- 6) Next Meeting- April 28, 2026
- 7) Adjournment

San Luis Valley Community Mental Health Center

February 24, 2025

SLVBHG Board
Room

Member Present: Pat Stanford, Mark Manzanares and Laurie Rivera, Olivia How, Jody Kern, and Victoria Romero

Members Excused: Aquino Gallegos and George Wilkinson

Staff Present: Kyle Turnwall and Angie Gallegos

1. Roll Call/Declaration of Quorum

2. Approval of Agenda

It was M/S by Laurie Rivera and Mark Manzanares to approve the agenda as presented. Motion carried.

3. Approval of Minutes

It was M/S by Mark Manzanares and Victoria Romero to approve the minutes dated January 29, 2026. Motion carried with two abstentions.

4. Correspondence Review

There was no correspondence to review.

5. Other Business

There was no other business to discuss.

6. Next Meeting

The next meeting date is March 31, 2026.

7. Adjournment

The meeting was adjourned at 6:14 pm.