



Health and Human Services

Behavioral Health Advisory Committee

February 6, 2026

This summary contains supplemental information from reliable sources where that information provides clarity to the issues being discussed. Power Point tables used in the presentations may also be used in this summary. Names of individuals may be misspelled but every attempt has been made to ensure accuracy. Tables and Text have been used from executive and legislative agencies and departments' presentations and publications.





[Behavioral Health Advisory Committee](#) provides customer, consumer and stakeholder input by making recommendations regarding the allocation and adequacy of behavioral health services and programs within the state of Texas.

The Health and Human Services Commission established the Behavioral Health Advisory Committee (BHAC) to serve as the planning council for the Mental Health Block Grant and the Substance Use Prevention, Treatment, and Recovery Services Block Grant in accordance with the state's obligations under 42 U.S.C. §300x-3.

The BHAC members serve as stakeholders for the behavioral health system, monitoring operations and recommend improvements for allocation and adequacy of behavioral health services across the state.

Recommendations to the Health and Human Services system agencies regarding behavioral health services may relate to:

- Promotion of cross-agency coordination, state/local partnerships, and public/private partnerships in the funding and delivery of behavioral health services;
- Promotion of data-driven decision-making;
- Prevention of behavioral health issues and promotion of behavioral health wellness and recovery;
- Integration of services for both mental illness and substance use disorder in prevention, intervention, treatment, and recovery services and supports;
- Integrating delivery of behavioral health services and supports with delivery of physical health service;
- Access to services and supports in urban, rural, and frontier areas of the state;
- Access to services and supports to special populations;
- Rules, policies, programs, initiatives, and grant proposals/awards for behavioral health services; and
- Monitoring the five-year behavioral health strategic plan and coordinating expenditure plan developed by the [Statewide Behavioral Health Coordinating Council](#).

Members

Mark Carmona, (Chair)

Local Government

San Antonio

Elizabeth Henry, (Co-Chair)

Advocate

Austin

Nicolas Sanchez

Youth/Young Adult with Lived Experience*

Austin

James Simmons

Other Interest in and Knowledge of



Jolene Rasmussen	Behavioral Health
Representative of the Texas Council of Community Centers	Pearland
Austin	
Olawale Adio-Oduola	Yolanda Nelson
Other Interest in and Knowledge of Behavioral Health	Adult with Lived Experience*
Richmond	Dallas
Doug Beach	Dana Drexler
Family Member	Local Government
San Antonio	Houston
Amy Curtis	Nydia Garcia
Representative of the Interagency Coordinating Group for Faith and Community-Based Organizations	Parent of a Child with Serious Emotional Disturbance
Dallas	Dickinson
Eric Sanchez	Christopher Gomez
Provider	Representative of a Federally Recognized Native American Tribe in Texas
San Angelo	Ysleta del Sur Pueblo
Victoria Rodriguez	Diane Partin
Managed Care Organization	Provider
Corpus Christi	Arlington
Nasruddin Rupani	VACANT
Advocate	Adult Certified Peer Provider
Houston	VACANT
	Adult with Lived Experience*
	VACANT
	Representative of the Association of Substance Abuse Programs

[Advisory Committee Reports | Texas Health and Human Services](#)

1. Welcome, introductions, and roll call. The 41st meeting of the BHAC was convened by Mark Carmona, Chair. A quorum was present.

2. Consideration of November 7, 2025, draft meeting minutes. The minutes were approved as drafted.



3. Behavioral Health Services general program updates

Office of Mental Health Coordination

[Behavioral Health Strategic Plan, as required by Texas Government Code, Section 547.0156](#) Diana Busler, Strategic Initiatives Coordinator Behavioral Health Services

Summary. Dianna Bussler presented on the Texas Statewide Behavioral Health Strategic Plan (2027-2031), emphasizing a collaborative, actionable, and digestible plan due by December 1st. She described the Statewide Behavioral Health Coordinating Council (SBHCC) involves over 20 state agencies, coordinating funding and services. The focus is on systemic, cross-agency issues and difficult-to-serve populations rather than niche groups. There has been engagement with external subject matter experts, providers, and those with lived experience. A statewide survey is being launched to gather perspectives from providers, consumers, families, and caregivers; efforts will be made to ensure accessibility, including print and QR codes for those without internet access. The plan will be concise (max 75 pages), actionable, supported by data, and written in accessible language.

Discussion highlighted the need for the plan to be usable by both agencies and community organizations, and for feedback loops with BHAC and subcommittees. Suggestions included in-person engagement with diverse communities (e.g., Houston), and consideration of non-English-speaking populations in outreach.

Presentation.

The Statewide Behavioral Health Coordinating Council (SBHCC) is updating the five-year statewide behavioral health strategic plan pursuant to Texas Government Code, Section 547.0156 , and Senate Bill 1, 89th Legislature, Regular Session, 2025, (Article IX, Section 10.04(c). Most recently published in November 2022, the updated plan will be the 3rd Edition covering fiscal years 2027-2031. The plan is due to the Governor's Office and Legislative Budget Board by December 1, 2026.

The Statewide Behavioral Health Coordinating Council was established to ensure a strategic statewide approach to behavioral health services and is comprised of



representatives of state agencies, institutions of higher education and the judiciary that receive state funds for behavioral health services. Core duties of the Council include:

- Developing and monitoring the implementation of a five-year statewide behavioral health strategic plan with an accompanying yearly progress report.
- Developing annual coordinated statewide behavioral health expenditure proposals.
- Publishing an updated annual inventory of behavioral health programs and services that are funded by the state.

There is also a core workgroup that is comprised of representatives from SBHCC member institutions who are responsible for developing and implementing the strategic plan. The workgroup will meet monthly through July 2026 and will engage non-SBHCC organizations and subject matter experts during the development of the strategic plan.

Scope and Parameters The strategic plan will focus on systemic issues (i.e., infrastructure, policy, process, procedures and entries and exits to care) and impacts on access to care. The strategic plan will recognize special populations without featuring any specific population and cross-reference existing reports. In addition, the plan will describe the continuum of care as "mental health and substance use disorder continuum." The strategic plan will contain strategies that state agencies have the authority to implement and will not exceed 75 pages.

Works in Progress

- Identify infrastructure and service gaps in the mental health and substance use disorder continuum of care.
- Identify contributors and subject matter experts.
- Develop a statewide survey to collect input from stakeholders, communities and people with lived experience.
- Design an all-day meeting to facilitate engagement with contributors.

Non-SBHCC organizations and subject matter experts will be invited to contribute a variety of perspectives. Examples include the following:



Statewide Behavioral Health Strategic Plan Timeline

Date	Activity
September 2025 – July 2026	Monthly workgroup meetings
September 2025 – May 2026	Workgroup develops strategic plan, identifies information sources, collects data
November 2025 – January 2026	Workgroup identifies key contributors and subject matter experts
January 2026 – April 2026	Workgroup engages key contributors, conducts statewide survey
May 2026 – September 2026	Workgroup drafts strategic plan, revises draft through multi-round review process
September 2026 – November 2026	Strategic plan moves through final review and approval processes
December 1, 2026	Strategic plan due to Governor and Legislative Budget Board

Discussion.

If there is an organization that should be part of this discussion, HHSC requested that they be notified. Organizations are needed to disseminate information as well.

There is a large client base through the clinics. They have been convening already in Houston with community leaders.

The organizations on the ground are what is needed to take the plan to the people.

The different subcommittees of the BHAC can engage in the process. This is a robust opportunity for us. In the end, the focus is how this will impact the people in different communities.



Behavioral health is both mental health and substance use.

Mental health programs

Summary. Elizabeth Miller and Lillian Nguyen presented on youth-focused programs: YCOT (Youth Crisis Outreach Teams) serves youth ages 3-17 in mental health crisis, now expanded to new sites via legislative funding.

DFPS PPBE expansion: 90-day psychiatric inpatient care programs for children, contracts with Harris Center and North Texas Behavioral Health Authority; plans to expand eligibility criteria.

- Spindletop Center Facility is a new psychiatric residential and respite facility under construction in Jefferson County, opening in 2027.
- Uvalde Behavioral Health Campus: Construction on track for Jan/Feb 2027 opening, will include both crisis residential and extended observation services.
- Harris County Psychiatric Center: Renovations funded to expand child bed capacity.

Marisol Acosta shared findings from a pilot on peer support for crisis prevention and follow-up in rural areas. The pilot is in partnership with UT Health Science Center and Bluebonnet Trails Community Services. There have been 105 clients served, mostly children/adolescents, with high engagement and retention post-crisis follow-up using peer and youth peer specialists. Services are often provided outside clinical settings; lessons learned included importance of flexible service locations and integrating youth/family peer specialists. Sustainability is linked to billing for family partner services and leveraging peer workforce in rural counties.

Presentations

Youth Crisis Outreach Team (YCOT). Elizabeth Miller, Deputy Associate Commissioner, Adult, Crisis and Forensic Services Behavioral Health Services, Texas Health and Human Services.

YCOTs. The 2026-27 General Appropriations Act, Senate Bill (S.B.) 1, 89th Legislature, Regular Session, 2025 (Article II, Health and Human Services Commission [HHSC], Rider 54) appropriated \$27,000,000 from the General Revenue Fund in each fiscal year of the biennium for YCOT, including funding to establish at least eight new YCOT programs.



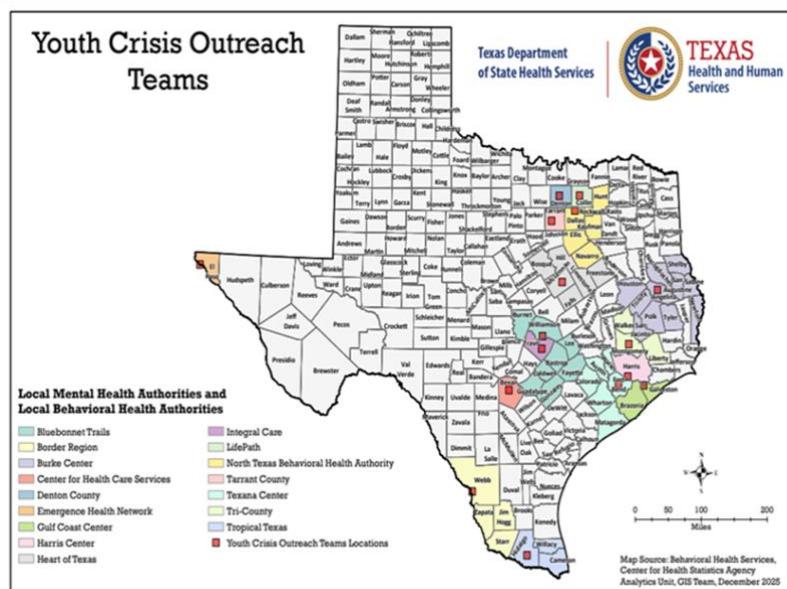
- Previously existing YCOTs: Bluebonnet Trails, Border Region, Burke Center, Emergence Health Network, Heart of Texas, North Texas Behavioral Health Authority, Tarrant County and Tri-County
- New YCOTs: Center for Health Care Services, Denton County, Gulf Coast, Harris Center, Integral Care, LifePath Systems, Texana and Tropical Texas

YCOT aims to provide crisis support to youth, ages 3 to 17, and families beyond traditional crisis response by following a three-phase approach:

- Phase 1: Screening and Triage: YCOT referral received
- Phase 2: Initial Crisis Response: Crisis service is provided
- Phase 3: Stabilization and Follow-Up: YCOT services are provided to the youth and family for no less than 30 days and up to 90 days following the initial crisis.

In alignment with Rider 54, HHSC established three funding tiers for YCOT coverage by utilizing a data-driven approach and prioritizing urban areas within the state.

- Tier 1: 24/7 crisis response (North Texas Behavioral Health Authority and Harris Center)
- Tier 2: 60 hour minimum for crisis response (Center for Health Care Services, Integral Care, Tarrant County and Tropical Texas)
- Tier 3: 40 hour minimum for crisis response (Bluebonnet Trails, Border Region, Burke Center, Denton County, Gulf Coast, Heart of Texas, LifePath Systems, Tri-County, Emergence Health Network and Texana)





Performance Measure	Fiscal Year 2024-2025
Unduplicated number of youth served by YCOT	1,787

HHSC expects service volumes to grow in fiscal year 2026 as eight new YCOT contracts executed as of 1/5/26. Early efforts focused on correcting budget issues and aligning operations with updated program standards. Programs are now positioned to expand community outreach and referrals to increase utilization.

Psychiatric Residential Youth Treatment Facilities

DFPS PPB Expansion The 2024-25 General Appropriations Act, House Bill (H.B.) 1, 88th Legislature, Regular Session, 2023 (Article II, HHSC, Rider 52) authorized the DFPS PPB expansion. The program serves 20 children statewide in an inpatient care setting for up to 90 days to stabilize psychiatric symptoms and address emotional dysregulation, allowing a safe transition to the least restrictive environment. HCPC currently operates at full capacity, serving five children and will expand to 10 beds in April 2026. North Texas Behavioral Health Authority, in partnership with Millwood Hospital, will begin serving 10 children in quarter 2 in fiscal year 2026. HHSC, DFPS and local mental health authorities and local behavioral health authorities are working to expand program eligibility to children at risk of imminent relinquishment to DFPS.

Spindletop Center Facility The 2026-27 General Appropriations Act, S.B. 1, 89th Legislature, Regular Session, 2025 (Article II, Health and Human Services Commission [HHSC], Rider 60) allocated \$5 million for the construction and operation of a psychiatric residential youth treatment facility, mental health respite facility and education opportunity center in Jefferson County run by Spindletop Center. Following contract execution with HHSC, Spindletop Center will begin construction and renovations in Summer 2026. HHSC anticipates the psychiatric residential youth treatment facility will open in Spring 2027.

Uvalde Behavioral Health Campus. S.B. 30, 88th Legislature, Regular Session, 2023 allocated \$33.6 million for the construction of a behavioral health campus. The 2024-25 General Appropriations Act, H.B. 1, 88th Legislature, Regular Session, 2023, (Article II,



HHSC, Rider 52) allocated \$5 million for the 2024-25 biennium to HHSC to support operation ramp up of the Uvalde Behavioral Health Campus. On the horizon:

- The 2026-27 GAA, S.B. 1, 89th Legislature, Regular Session, 2025 (Article II, HHSC, Rider 59) appropriated \$2.5 million in fiscal year 2026 and \$10 million in fiscal year 2027 for start-up and operational funding for the Uvalde Behavioral Health Campus.
- Construction remains on schedule.
- Currently, the tentative project completion date continues to be Jan. 2027, and doors will open Feb. 2027.

HCPC Renovations House Bill 500, 89th Texas Legislature, Regular Session, 2025 (Section 2.06), allocated \$12.8 million for building renovations, including patient care areas, patient and visitor areas, and physical plant items at HCPC. Following contract execution with HHSC, HCPC will begin renovations in Spring 2026. Renovations will include converting office space to a patient care area for children.

Discussion.

What are we learning through the YCOT process and where are the gaps. Staff stated that they send out a report on the services they provide.

What are the services that will be offered at Uvalde? Staff stated they will get that information for the committee.

Transformation Transfer Initiative (TTI) Peer Providers Pilot Project

Marisol Acosta, MEd, LPC-S, Senior Advisor Behavioral Health Services.

Grant Overview The grant is named the National Association of State Mental Health Program Directors Transformation Transfer Initiative grant, and it establishes same day or rapid access to behavioral health care for crisis prevention and follow up care. It is a one-time award of \$250,000 in partnership between:

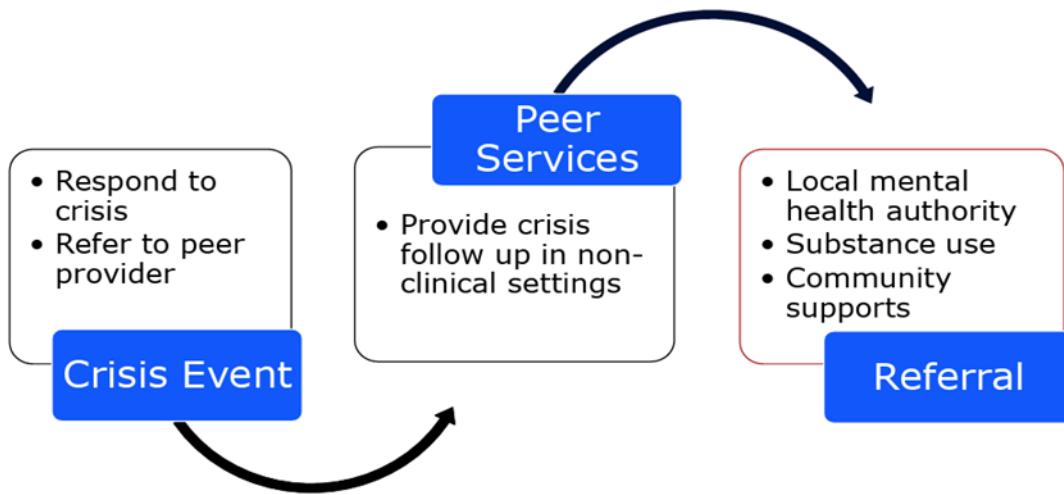
- Health and Human Services Commission
- University of Texas Health Science Center, San Antonio
- Bluebonnet Trails Community Services

The pilot objectives are:

- Decrease the use of the local crisis system through crisis prevention and follow-up care.

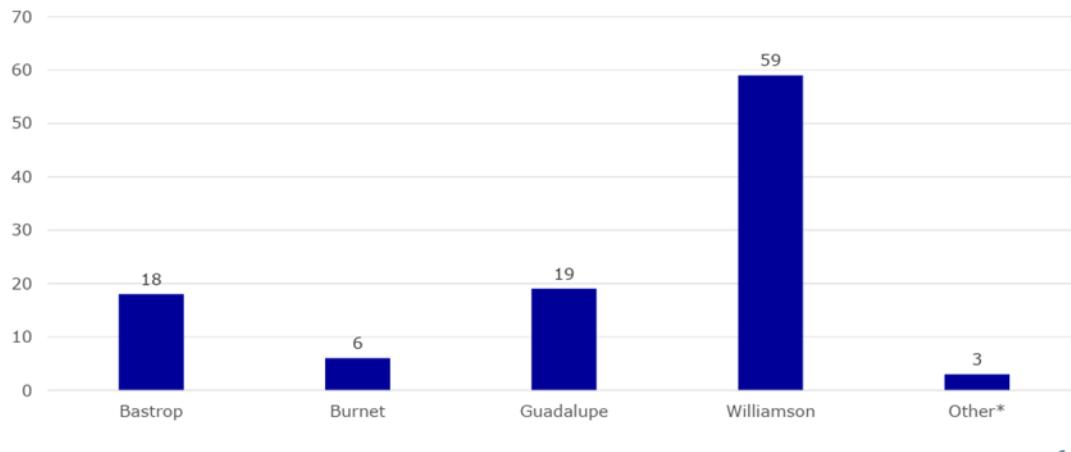
- Increase access to routine behavioral health services and supports to people who are not engaged in services.
- Provide peer services face-to-face, virtually and telephonically in non-clinical community settings.
- Measure the level of satisfaction with peer crisis services.

Services Flow Chart



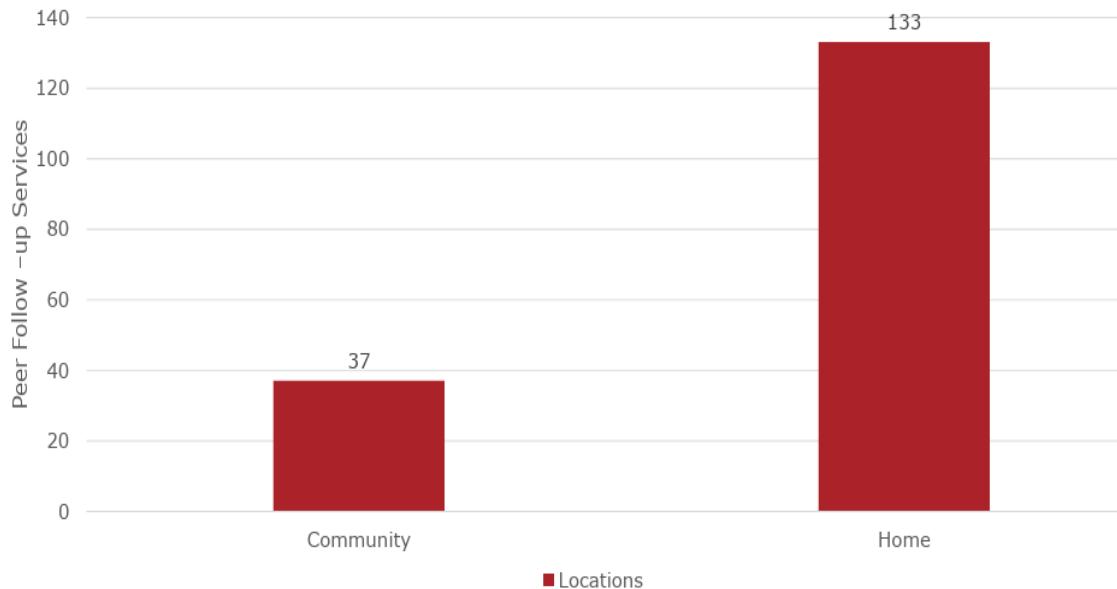
Pilot Data

Number of People Served Per County

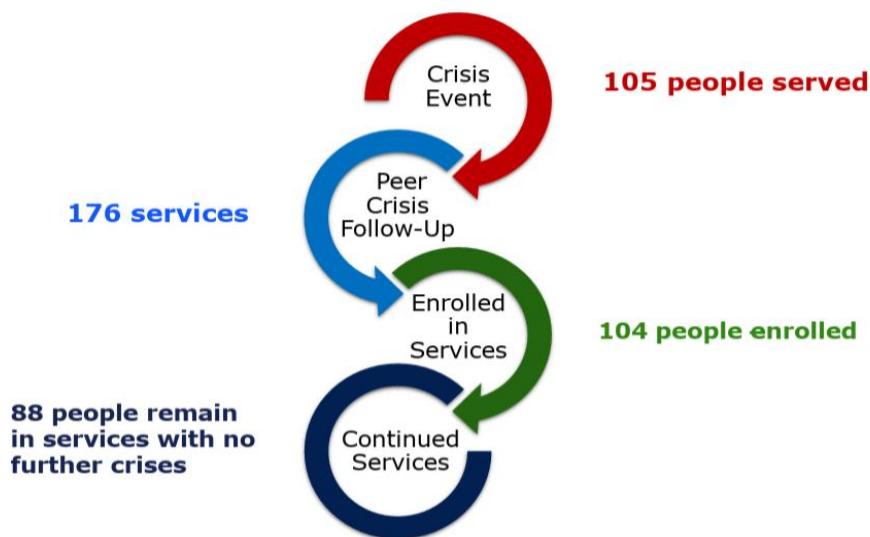


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Peer Crisis Follow-Up Services and Locations



Pilot Outcomes





Lessons Learned

- Anticipate workforce changes that may impact pilot.
- Identify existing processes and crisis systems further enhances the crisis referral system.
- Allow people to select location for crisis follow-up increases the likelihood of receiving the service.
- Co-response with a Certified Family Partner increases family engagement.
- Engage with youth peer specialists motivates youth to participate in services.

Sustainability

- Integrate peers in the crisis continuum workforce.
- Streamline referral processes into existing systems.
- Identify funding streams for peer crisis follow up.

Discussion.

Do you have a breakdown of numbers of adults and children separately. The speaker stated they have served more children than adults (93% children/adolescents).

For funding it would be good to partner with MCOs who are frequently looking at creative service/funding options. Crisis services bill at a higher rate.

How do young people become peer specialists. Staff stated that they can get that information from Blue Bonnet for the committee.

4. Subcommittee updates

Access to Care and Community Engagement-- is focusing on transitional age youth (16-25), highlighting challenges with YES Waiver service eligibility, provider shortages, and service gaps—especially in rural areas.

Children and Youth Behavioral Health-- Children and Youth Subcommittee is transitioning due to expiration of federal System of Care grant; discussion about its continued role and structure is planned for the next meeting.



Policy and Rules-- is reviewing draft rules related to transportation standards and psychoactive medication consent, as well as Youth Empowerment Services rules.

5. [BHAC Member Spotlight Presentation: Buckner International](#)

Summary. Amy Curtis presented Buckner International's range of programs, including domestic and international foster care/adoption, family pathways (residential program for single mothers), family home/community centers, and counseling services. Buckner served 35,000 people in Texas and 47,000 internationally last year, with a strong emphasis on evidence-based, trauma-informed, and accessible counseling. Counseling is offered within Buckner programs without insurance billing or mandatory diagnosis, aiming to destigmatize mental health support. Buckner is a Christian faith-based organization but serves all individuals regardless of belief.

Presentation

A presentation slide for Buckner International Services. The title 'BUCKNER INTERNATIONAL SERVICES' is at the top in a large, bold, black font. Below the title, on the left, is a box containing the text '146 consecutive years of transforming lives through Christ's love' in blue script, with three small photographs of children and adults below it. To the right of this box is the text 'WHERE FAITH MEETS ACTION: TRANSFORMING LIVES FOR VULNERABLE CHILDREN, FAMILIES, AND SENIORS'. Further down on the right is the text 'HEADQUARTERED IN DALLAS, TEXAS, USA, BUCKNER HAS PHYSICAL OFFICE LOCATIONS ACROSS TEXAS AND OUR SEVEN NONGOVERNMENTAL ORGANIZATIONS (NGO) IN SEVEN COUNTRIES. FAITH DRIVES OUR MISSION, VISION, AND VALUES IN THE COMMUNITIES WHERE WE WORK.' At the bottom right is the text 'BUCKNER INTERNATIONAL INCLUDES BUCKNER RETIREMENT SERVICES AND BUCKNER CHILDREN AND FAMILY SERVICES'.

The Services are provided under four pillars.

Buckner International Pillars 1 & 2

Pillar #1



PROTECT CHILDREN. Children need safety and encouragement to thrive. Often, children are the most underserved and unheard population, subject to abuse, neglect or being orphaned. That's why we are called to protect children and provide loving families for a moment or a lifetime.

Pillar #2



STRENGTHEN FAMILIES. The number one reason children are exposed to harm or fail to thrive? Families that can't support them. The results are poverty, lack of education, poor parenting skills and poor decisions. When we strengthen entire families, we help parents develop skills to successfully support their children.

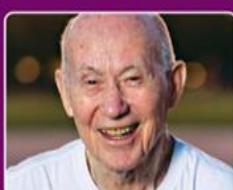
Buckner International Pillars 3 & 4

Pillar #3



TRANSFORM GENERATIONS. We break the cycle of family struggles through ministries that solve problems at the root cause, so families are empowered to be strong, successful and sustainable. Families are transformed when they dive into learning together, breaking habits and creating success from generation to generation.

Pillar #4



SERVE SENIORS. Senior adulthood should be the culmination of a life well-lived and a time of happiness. That's why we're Inspiring happiness® for senior adults by serving their needs in Buckner senior living communities, enriching their lives with the dignity, energy and attention they deserve.

OUR FOUR FOCUS MINISTRIES



More information? <https://www.buckner.org/>

Discussion.

What do you mean by faith based? The speaker stated the principles and guidance is Christian based but you do not have to be Christian to receive services.



6. Public comment. No public comment was offered.

7. Review of action items and agenda items for next meeting.

Future Meeting Dates

- May 8, 2026 (9 a.m.)
- August 7, 2026 (9 a.m.)
- November 6, 2026 (9 a.m.)

Future Agenda Items.

Send out strategic plan survey link

Opportunities for BHAC to provide impact on the strategic plan

YCOT report [youth-crisis-outreach-teams-report-sept-2025.pdf](#)

8. Closing remarks

Elizabeth Henry will be resigning from the BHAC. She was recognized by the Chair.

9. Adjourn. There being no further business, the meeting was adjourned.

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