



*A Community Mental Health / Developmental Disabilities / Addictive Diseases Program*

*Administration  
P.O. Box 5328  
2100 Comer Avenue  
Columbus, GA 31906*

*(706) 596-5588  
FAX (706) 596-5589*

**NEW HORIZONS BEHAVIORAL HEALTH  
BOARD OF DIRECTORS  
2100 Comer Avenue – New Horizons Training Room  
Columbus, GA 31906**

Date of Meeting: February 2, 2026

Members Present: Damon Hoyte, Nancy Schroeder, Arcola Scott, Terry Edwards, Edwina Turner, April Hughes, Sandra Gill, and Linda McElroy

Members Excused: Ed Harbison, Karen J. Bussey, and LaVerne Chaffin

Staff Present: Andrea Winston, Denise Wade McLeod, Kenyetta Plummer, Cyndy Pattillo, LaKaren Rickman, Sherry Raya, Molly Jones, and Lisa Dionne

**CALL TO ORDER:** Board Chair Damon Hoyte called the meeting to order at 3:32 p.m. A quorum was not established at that time, but was established later in the meeting.

**RECOGNITION OF GUEST(S) ATTENDING TODAY'S MEETING:** Nick Garcia, Attorney, Valona Baldwin, DBHDD Regional Services Administrator, Kathleen Brown, DBHDD, Internal Auditor, Office of Internal Audit & Risk Management, Kenneth Ward, DBHDD Director, Office of Internal Audit & Risk Management, and Brenda Woodard, DBHDD General Counsel/Ethics Officer.

**\* SECRETARY'S MINUTES (Approval of December 8, 2025 minutes):** M/S/P Edwina Turner/Terry Edwards to approve the December 8, 2025 Board minutes, Board approved.

**FINANCIAL REVIEW:** Denise presented the Financial Performance Report for the period ended November 30, 2025 in the absence of CFO Susan Gallagher. She reported that Medicaid fees, DD Work Activity, and Other local funds are trending below budgeted amounts, but total revenues Year to Date (YTD) are at 41% of budget, where we should be for the month of November. Revenue for November is \$1,956,250 and the Year to Date is \$10,242,954. YTD we have a positive margin of \$155,307 for November, with a monthly deficit for the month due to pay out of Employee Retention bonuses. Overall expenses are on tract at 40% of budget YTD. A review of our major categories of revenues and expenses indicates that, currently, contract revenue is our major source of funding, but we anticipate this will change in the CCBHC environment with billable services becoming the major source of revenue and contract revenue decreasing. On the expenditure side, personnel is our largest category of expense, as it is across the CSB safety-net. Those costs are in-line with CSBs across the network at 73%. The Statement of Net Position is \$13,482,243 and Days Cash on Hand is 194.49 with average daily expenses at \$66,955.

During the transition to CCBHC, we are well-prepared to weather possible cash-flow challenges ahead. January revenues for both contract revenue and billable services will adjust downward as contract revenue for MH/SA programs has been rolled into the PPS rate and billing for MH/SA programs is temporarily slowed as we transition with our main CMO Payors – CareSource, peach State Health Plan, and Amerigroup – to PPS rate. We anticipate a significant increase in March billable revenue as claims for January and February begin to process and clear at the PPS rate.

It was noted that some financial data retrieval was delayed recently due to network interruption experienced by the agency that we are addressing.

**CERTIFIED COMMUNITY BEHAVIORAL HEALTH CENTER UPDATE:** Denise announced the new Director for CCBHC is Dr. LaKaren Rickman, PhD, Licensed Clinical Psychologist. Dr. Rickman has been with the agency several years, and is also responsible for completion of New Horizons' Community Needs Assessment, monitoring KPI and PMR+ data, and developing Performance Improvement goals/outcomes. With CCBHC beginning January 1, we continue to hold billing, transmit test claims, and are working diligently with CareLogic, DBHDD/Carelon, DCH & CMOs for authorizations and CMO contracting. Denise reminded Board Members that CCBHCs provide a comprehensive range of mental health and substance use disorder services across the lifespan to include nine required types of service, with a focus on providing 24-hour crisis care and care coordination between behavioral health, physical health care, social services, and other systems. Intensive Care Coordination is utilized as a core requirement to manage patient health. CCHBCs provide comprehensive, person-centered care by organizing services, sharing information, and partnering with community providers to address social determinants of health, such as housing and employment. Key aspects of care coordination include: Comprehensive Integration, System Collaboration, Actionable Support, and Targeted Outreach.

**PEER INVOLVEMENT IN IMPLEMENTATION OF CCBHC:** LaKaren reported that Certified Community Behavioral Health Clinics (CCBHCs) are required to ensure meaningful representation of individuals with lived or living experience of mental health and substance use challenges, as well as their family members, in both governance and program implementation. Georgia CCBHC Criteria 6.B.1 requires that at least fifty-one percent (51%) of the CCBHC governing board be comprised of individuals with lived experience of mental health and/or substance use disorders.

She further explained that “lived and living experience” refers to individuals who are currently experiencing or have previously experienced mental health and/or substance use challenges, as well as individuals who have a family member with such experiences. In addition, a peer supporter is defined as an individual who has been successful in their own recovery process and provides support to individuals with lived or living experience and their family members.

A brief survey was administered to Board members and the results indicated that 75% of respondents in attendance identified as having lived or living experience with mental health and/or substance use challenges.

**\*ELECTION OF BOARD OFFICERS FOR 2026:** The current slate of officers is: Damon Hoyte, Chair, Terry Edwards, Vice-Chair, and Sandra Gill, Secretary. M/S/P Arcola Scott/Edwina Turner that the current slate of officers be re-elected for 2026, Board approved.

**\*BOARD MEETING EXECUTIVE SESSION MINUTES POLICY:** Kenyetta and Attorney Garcia collaborated on the revised policy that has had several revisions from previous Board meetings. Mr. Garcia indicated the policy presented was not the latest version he had sent. Kenyetta asked were there any changes recommended prior to printing the latest version. Board Members expressed some concerns about the item indicating when the minutes would be approved. Further review/discussion was needed and the policy will be brought back to the March Board meeting.

**DBHDD PROPOSED LEGISLATION:** Andrea presented an overview of proposed changes to organizational authority that will be presented to the legislature this session. The current structure of CSBs and DBHDD under State Law were outlined. Key changes proposed include: CSB Executive Director (ED) would be appointed by the DBHDD Commissioner, serve at the pleasure of the Commissioner, follow all DBHDD directives, and become a DBHDD employee; CSB Boards become representative in nature and serve in an advisory function only, with no authority over CEO or CSB, the DBHDD Commissioner can give the ED power to overrule the Board, and Boards and County authorities lose the ability to reorganize the CSB. The Commissioner is meeting with an Ad Hoc Committee of four CEOs regarding concerns of the legislation and several revisions have been recommended. Board Composition, Appointments, and Standardization & Training are included in the proposal. Other policy considerations are to work with CSBs to standardize the components of risk assessment across the board, and the Commissioner has agreed to continue the conversation after further review of other issues raised by the committee. Currently, the GACSB has not received any updates or revisions to the legislation. A CEO meeting is scheduled for tomorrow morning and further updates are expected.

**EXECUTIVE SESSION:** At 4:42 p.m. M/S/P Edwina Turner, Terry Edwards to go into Executive Session to discuss CEO Employment Agreement, Letter from DBHDD, Anonymous Allegation letter, Board approved.

At 6:13, M/S/P Arcola Scott/Terry Edwards to exit Executive Session and return to regular meeting.

Due to time constraints, several documents requiring Board approval were not reviewed and will be addressed at a later time.

**BOARD MEMBER PRESENTATION:** Due to time constraints, this was tabled to the next meeting

**ANNOUNCEMENTS:**

Andrea announced that as of January 1<sup>st</sup>, all New Horizons' staff making under \$15.90 per hour were increased to \$15.90 as part of our team member raise initiative. In addition, all staff received a 3% raise, but if staff was under \$15.90 after receiving the 3% raise, they were bumped up to \$15.90 per hour.

Andrea reported she is scheduled for surgery on February 6<sup>th</sup> with additional treatment following the surgery. She expressed thanks to staff and Board Members for their continued thoughts and prayers.

Lisa Dionne is the new Executive Administrative Assistant. She has been with New Horizons in many roles for a number of years and is dedicated to serving our individuals and taking on new challenges. We are excited about her new position and are confident she will do a great job!

**PUBLIC COMMENTS:** No comments were made.

**ADJOURNMENT:** At 6:20 p.m., M/S/P Arcola Scott/Terry Edwards to adjourn the meeting, Board approved.

---

Damon Hoyte  
Chairperson