

### Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	558	679	-18% ▼
	Admits	540	873	-38% ▼
	Discharges	539	718	-25% ▼
	Service Hours	1,895	2,942	-36% ▼
	Bed Days	5,945	8,026	-26% ▼

▲ > 10% Over 1 Yr Ago    ▼ > 10% Under 1Yr Ago

### Consumer Satisfaction Survey

(Based on 440 FY20 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Overall		97%	80%	91%
✓ Participation in Treatment		97%	80%	92%
✓ Quality and Appropriateness		97%	80%	93%
✓ Access		95%	80%	88%
✓ Respect		94%	80%	91%
✓ General Satisfaction		94%	80%	92%
✓ Outcome		91%	80%	83%
✓ Recovery		90%	80%	79%

■ Satisfied %    |    Goal %     0-80%     80-100%    ✓ Goal Met    ● Under Goal

### Clients by Level of Care

Program Type	Level of Care Type	#	%
<b>Addiction</b>	Outpatient	326	42.2%
	Residential Services	126	16.3%
	Case Management	74	9.6%
<b>Other</b>	Other	236	30.5%
<b>Forensic SA</b>	Case Management	11	1.4%

### Client Demographics

Age	#	%	State Avg
18-25	59	11%	9%
26-34	146	26%	21%
35-44	184	33% ▲	22%
45-54	110	20%	19%
55-64	51	9% ▼	20%
65+	7	1%	8%

Gender	#	%	State Avg
Male	409	73% ▲	58%
Female	149	27% ▼	42%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	411	74%	70%
Hisp-Puerto Rican	126	23% ▲	12%
Hispanic-Other	18	3%	8%
Hispanic-Mexican	2	0%	0%
Hispanic-Cuban	1	0%	0%
Unknown			10%

Race	#	%	State Avg
White/Caucasian	244	44% ▼	62%
Black/African American	176	32% ▲	17%
Other	133	24% ▲	13%
Am. Indian/Native Alaskan	4	1%	1%
Asian	1	0%	1%
Multiple Races			1%
Hawaiian/Other Pacific Islander			0%
Unknown			6%

■ Unique Clients    |    State Avg    ▲ > 10% Over State Avg    ▼ > 10% Under State Avg

Variations in data may be indicative of operational adjustments related to the pandemic.

# Case Management 931480

Wellmore

Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services

Program Quality Dashboard

Reporting Period: July 2020 - December 2020 (Data as of Apr 06, 2021)

## Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	74	76	-3%
Admits	51	49	4%
Discharges	51	50	2%
Service Hours	235	309	-24% ▼

## Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	93%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	63%

## Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		51	100%	50%	48%	50% ▲

## Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Employed		47	64%	20%	28%	44% ▲
✓ Self Help		73	99%	60%	59%	39% ▲
✓ Stable Living Situation		70	95%	80%	81%	15% ▲

## Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		20	87%	90%	83%	-3%

## Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	█	█	█	█	█	█	100%
Discharges	█	█	█	█	█	█	100%
Services	█	█	█	█	█	█	100%

█ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

█ Actual | Goal ✓ Goal Met ● Below Goal

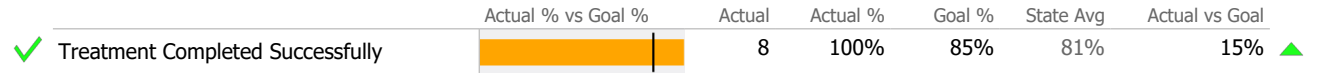
\* State Avg based on 8 Active Standard Case Management Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

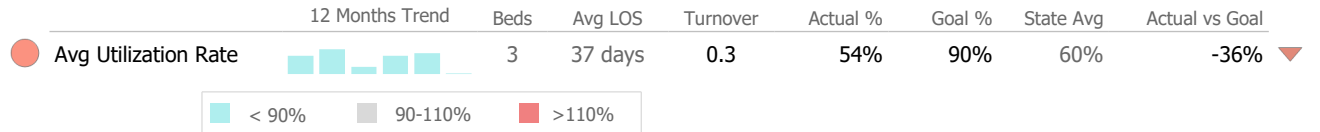
### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	10	20	-50% ▼
Admits	9	18	-50% ▼
Discharges	8	18	-56% ▼
Bed Days	297	438	-32% ▼

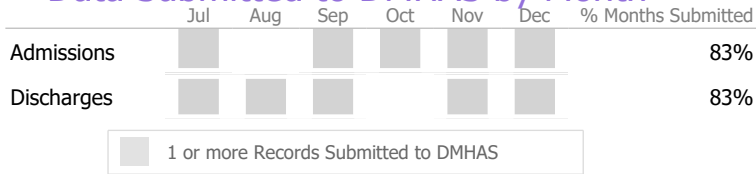
### Discharge Outcomes



### Bed Utilization



### Data Submitted to DMHAS by Month



\* State Avg based on 12 Active Recovery House Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

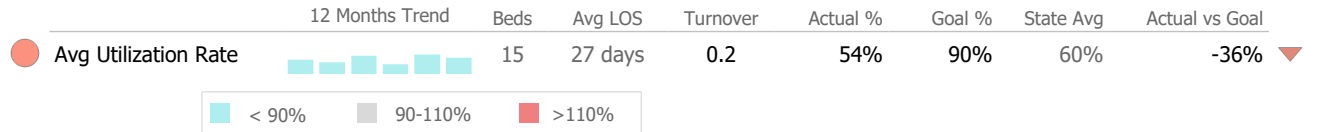
### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	65	118	-45% ▼
Admits	60	121	-50% ▼
Discharges	64	124	-48% ▼
Bed Days	1,484	2,109	-30% ▼

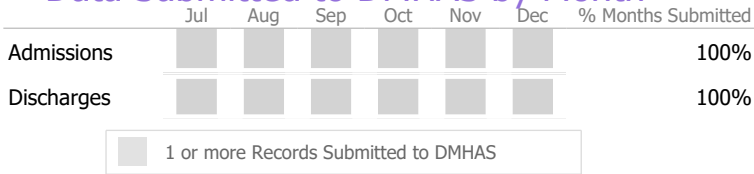
### Discharge Outcomes



### Bed Utilization



### Data Submitted to DMHAS by Month



\* State Avg based on 12 Active Recovery House Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	236	256	-8%
Admits	88	146	-40% ▼
Discharges	57	21	171% ▲
Service Hours	363	797	-54% ▼

### Data Submission Quality

Data Entry Actual State Avg

Co-occurring	Actual	State Avg
✓ MH Screen Complete	100%	65%
✓ SA Screen Complete	100%	85%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	93%

### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■	■	■	■	100%
Discharges	■	■	■	■	■	■	100%
Services	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

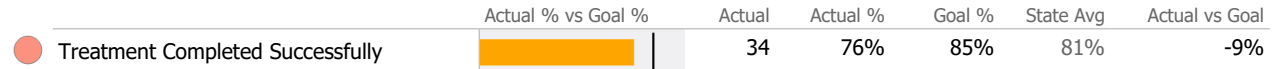
\* State Avg based on 6 Active Integrated Primary Care Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

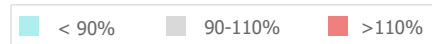
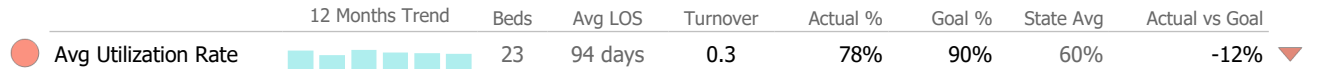
### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	58	75	-23% ▼
Admits	41	61	-33% ▼
Discharges	45	56	-20% ▼
Bed Days	3,285	4,173	-21% ▼

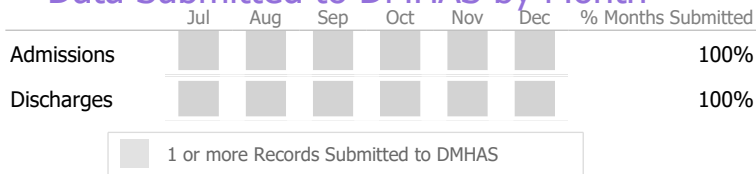
### Discharge Outcomes



### Bed Utilization



### Data Submitted to DMHAS by Month



\* State Avg based on 12 Active Recovery House Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	8	17	-53% ▼
Admits	4	15	-73% ▼
Discharges	6	11	-45% ▼
Service Hours	82	97	-15% ▼

### Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	4%

### Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		6	100%	50%	63%	50% ▲

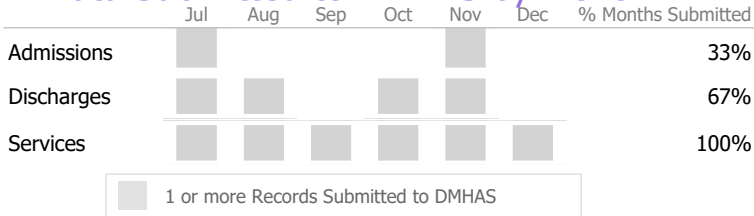
### Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		8	100%	60%	73%	40% ▲
✓ Employed		4	50%	20%	17%	30% ▲
✓ Stable Living Situation		7	88%	80%	48%	8%
● Self Help		4	50%	60%	52%	-10%

### Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		2	100%	90%	22%	10%

### Data Submitted to DMHAS by Month



▲ > 10% Over ▼ < 10% Under

■ Actual | Goal ✓ Goal Met ● Below Goal

\* State Avg based on 8 Active Standard Case Management Programs

### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	3	48	-94% ▼
Admits	-	42	-100% ▼
Discharges	3	37	-92% ▼
Service Hours	6	324	-98% ▼

### Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	98%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	4%

### Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		3	100%	50%	63%	50% ▲

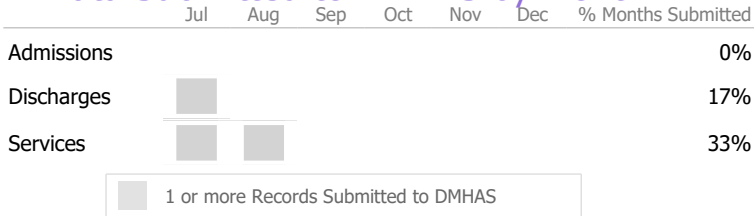
### Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Social Support		3	100%	60%	73%	40% ▲
✓ Employed		1	33%	20%	17%	13% ▲
● Stable Living Situation		2	67%	80%	48%	-13% ▼
● Self Help		0	0%	60%	52%	-60% ▼

### Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		N/A	N/A	90%	22%	N/A ▼

### Data Submitted to DMHAS by Month



▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 8 Active Standard Case Management Programs

Variations in data may be indicative of operational adjustments related to the pandemic.



### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	326	401	-19% ▼
Admits	277	404	-31% ▼
Discharges	296	385	-23% ▼
Service Hours	1,208	1,415	-15% ▼

### Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	85%
Valid TEDS Data	74%	84%
<b>On-Time Periodic</b>		
6 Month Updates	0%	21%
<b>Co-occurring</b>		
MH Screen Complete	100%	90%
SA Screen Complete	100%	96%
<b>Diagnosis</b>		
Valid Axis I Diagnosis	100%	99%

### Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully		178	60%	50%	53%	10% ▲

### Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Not Arrested		330	94%	75%	74%	19% ▲
● Abstinence/Reduced Drug Use		183	52%	55%	47%	-3%
● Stable Living Situation		281	80%	95%	73%	-15% ▼
● Employed		125	36%	50%	30%	-14% ▼
● Self Help		74	21%	60%	18%	-39% ▼

### Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		53	95%	90%	60%	5%

### Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ 2 or more Services within 30 days		238	93%	75%	60%	18% ▲

### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions	■	■	■	■	■	■	100%
Discharges	■	■	■	■	■	■	100%
Services	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over    ▼ < 10% Under

■ Actual    | Goal    ✓ Goal Met    ● Below Goal

\* State Avg based on 107 Active Standard Outpatient Programs

Variations in data may be indicative of operational adjustments related to the pandemic.

### Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	14	23	-39% ▼
Admits	10	17	-41% ▼
Discharges	9	16	-44% ▼
Bed Days	879	1,306	-33% ▼

### Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	100%	90%
Valid TEDS Data	100%	99%
<b>On-Time Periodic</b>		
6 Month Updates	N/A	7%
<b>Co-occurring</b>		
MH Screen Complete	100%	92%
SA Screen Complete	100%	92%
<b>Diagnosis</b>		
Valid Axis I Diagnosis	100%	100%

### Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		3	33%	70%	64%	-37% ▼
No Re-admit within 30 Days of Discharge		9	100%	85%	87%	15% ▲
Follow-up within 30 Days of Discharge		1	33%	90%	69%	-57% ▼

### Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		7	50%	70%	64%	-20% ▼

### Bed Utilization

	12 Months Trend			Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		8	125 days	0.5	60%	90%	77%	-30% ▼		

Legend: ■ < 90% ■ 90-110% ■ > 110%

### Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	% Months Submitted
Admissions							83%
Discharges							50%

Legend: ■ 1 or more Records Submitted to DMHAS

Legend: ▲ > 10% Over ▼ < 10% Under

Legend: ■ Actual | Goal ✓ Goal Met ● Below Goal

\* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Variances in data may be indicative of operational adjustments related to the pandemic.