Provider Activity Monthly Trend Actual 1 Yr Ago Variance % Measure **Unique Clients** 1,015 1,138 **-11%** ▼ Admits 283 492 **-42%** ▼ 296 484 -39% ▼ Discharges Service Hours -39% ▼ 15,860 26,142 **Bed Days** 648 935 -31% ▼ **-100%** ▼ 4 4,120 S.Rehab/PHP/IOP ▲ > 10% Over 1 Yr Ago → > 10% Under 1Yr Ago Clients by Level of Care Program Type Level of Care Type % **Mental Health** Outpatient 877 61.0% Community Support 216 15.0% Social Rehabilitation 66 4.6% **Employment Services** 56 3.9% ACT 47 3.3% Case Management 10 0.7% Residential Services 6 0.4% Addiction 54 Medication Assisted Treatment 3.8%

Outpatient

Other

Recovery Support

Forensics Community-based

Forensic MH

Other

33

29

39

4

2.3%

2.0%

2.7%

0.3%



Gender Age # % State Avg % State Ava 12% 539 53% 42% 18-25 123 10% Female 58% 26-34 169 17% 22% Male 476 47% 0% 15% Transgender 35-44 154 23% 45-54 171 17% 19% 22% 55-64 224 19% Race % State Avg 65+ 173 17% 8% White/Caucasian 819 81% 62% **Ethnicity** Other 89 9% 13% # % State Avg Black/African American 56 6% 17% Non-Hispanic 788 78% 69% Unknown 30 3% 6% Unknown 10% 105 11% Am. Indian/Native Alaskan 1% 0% 11 Hispanic-Other 8% 81 8% Asian 9 1% 1% Hisp-Puerto Rican 4% 12% Hawaiian/Other Pacific Islander 0% 0% Hispanic-Cuban 0% 0% 1% Multiple Races Hispanic-Mexican 0% 0%

▲ > 10% Over State Avg

▼ > 10% Under State Avg

Unique Clients State Avg

Addiction Outpatient 988200

Bridges Healthcare Inc.

Addiction - Outpatient - Standard Outpatient

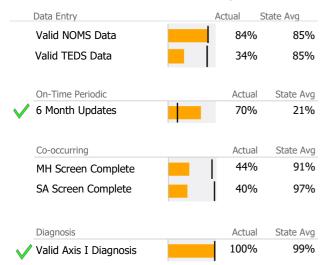
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity

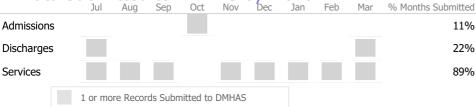
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	33	34	-3%	
Admits	1	5	-80%	•
Discharges	2	3	-33%	•
Service Hours	182	170	7%	

Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 109 Active Standard Outpatient Programs

Mental Health - Outpatient - Standard Outpatient

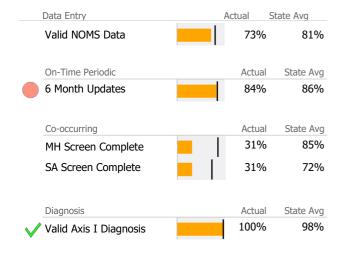
Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity Discharge Outcomes Actual % Measure 1 Yr Ago Variance % Actual % vs Goal % Actual Goal % State Ava Actual vs Goal **Unique Clients** 0% N/A N/A 50% 34% N/A Treatment Completed Successfully Admits Recovery Discharges Actual % vs Goal % National Recovery Measures (NOMS) Actual Actual % Goal % State Avg Actual vs Goal Service Hours 0 0% 30% 23% -30% **Employed** 0 0% 60% 62% -60% -Social Support **Data Submission Quality** 0 0% 95% -95% -Stable Living Situation 74% Data Entry Actual State Avg Service Utilization Valid NOMS Data 86% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 0 0% 90% 84% N/A -On-Time Periodic Actual State Avg 0% 55% 6 Month Updates Service Engagement Outpatient Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal Actual State Avg Co-occurring 75% -75% -0 0% 76% N/A 78% 2 or more Services within 30 days MH Screen Complete SA Screen Complete N/A 79% Diagnosis State Avg Actual 0% 98% Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted ▲ > 10% Over < 10% Under</p> Admissions 0% Discharges 0% Actual Goal ✓ Goal Met Below Goal 0% Services * State Avg based on 85 Active Standard Outpatient Programs 1 or more Records Submitted to DMHAS

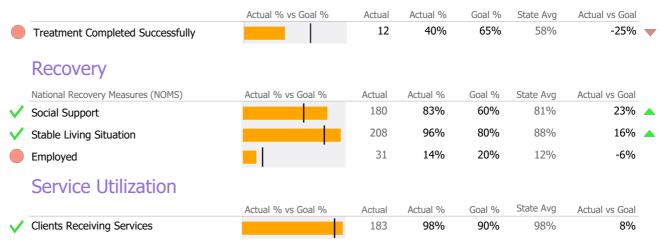
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	216	208	4%	
Admits	43	35	23%	•
Discharges	30	41	-27%	•
Service Hours	3,230	5,186	-38%	•

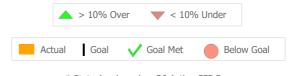
Data Submission Quality



Discharge Outcomes







Integrated Behavioral Health

Bridges Healthcare Inc.

Other - Other - Integrated Primary Care

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity

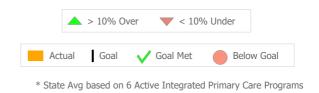
Measure	Actual	1 Yr Ago	Variance %
Unique Clients	4	4	0%
Admits	-	-	
Discharges	-	-	
Service Hours	_	_	

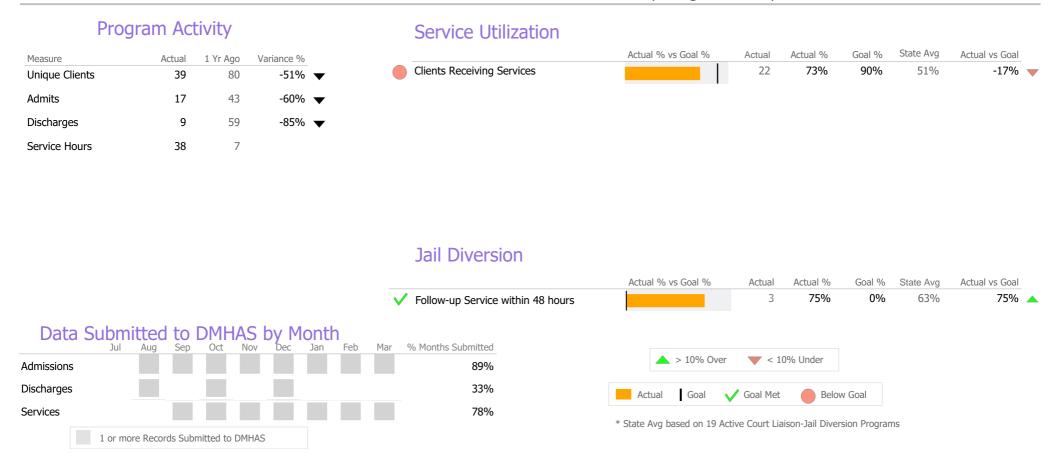
Data Submission Quality

Data Entry Actual State Avg

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	65%
SA Screen Complete	N/A	85%
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	94%

		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admission	S										0%
Discharge	s										0%
Services											0%
		1 or m	ore Recor	ds Subi	nitted to	DMHAS					





1 or more Records Submitted to DMHAS

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

* State Avg based on 85 Active Standard Outpatient Programs

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 876 971 -10% 29 18% 50% 34% -32% Treatment Completed Successfully Admits 132 264 -50% Recovery 158 Discharges 246 -36% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Service Hours 7,539 8,499 -11% 649 73% 60% 62% 13% 🔺 Social Support 25% 30% 23% -5% 219 **Employed Data Submission Quality** 773 87% 95% -8% Stable Living Situation 74% Data Entry Actual State Avg Service Utilization Valid NOMS Data 86% 86% State Avg Actual % vs Goal % Actual Actual % Goal % Actual vs Goal Clients Receiving Services 678 93% 90% 84% 3% On-Time Periodic Actual State Avg 6 Month Updates 58% 55% Service Engagement Outpatient Actual % vs Goal % Actual % Goal % State Ava Actual vs Goal Actual State Avg Actual Co-occurring 88 45% 69% 75% 76% -6% 78% 2 or more Services within 30 days MH Screen Complete SA Screen Complete 44% 79% Diagnosis State Avg Actual 100% 98% ✓ Valid Axis I Diagnosis Data Submitted to DMHAS by Month Mar % Months Submitted > 10% Over < 10% Under</p> Admissions 100% Discharges 100% ✓ Goal Met Actual Goal Below Goal 100% Services

Pro	ogram Activity	Service Utilization						
Measure	Actual 1 Yr Ago Variance %		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Unique Clients	0	Clients Receiving Services		N/A	N/A	90%	63%	N/A 🔻
Admits								
Discharges								
Service Hours								
	mitted to DMHAS by Month							
Jul Admissions	l Aug Sep Oct Nov Dec Jan	Feb Mar % Months Submitted 0%	▲ > 10% Over	V < 1	L0% Under			
Discharges		0%	Actual Goal	/ Goal Met	: Belo	ow Goal		
1 or r	more Records Submitted to DMHAS		* State Avg based on 34	Active Socia	al Rehabilitatio	on Programs		

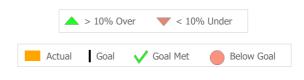
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	10	9	11%	•
Admits	3	8	-63%	•
Discharges	3	6	-50%	•
Service Hours	58	86	-33%	•

Service Engagement

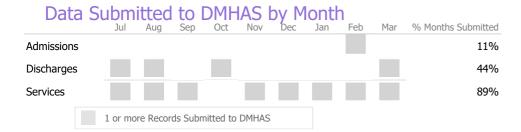


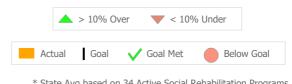




^{*} State Avg based on 46 Active Outreach & Engagement Programs

Program Activity Service Utilization Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal Measure Actual 1 Yr Ago Variance % Clients Receiving Services 54 87% 90% 63% -3% **Unique Clients** 66 71 -7% 9 1 Admits **-89%** ▼ 3 Discharges 4 33% 🔺 Service Hours 1,659 4,072 -59% Social Rehab/PHP/IOP 4,120 -100% Days





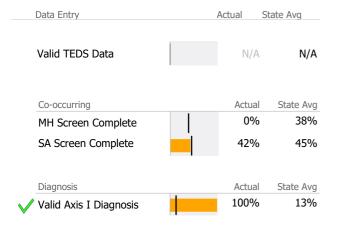
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	29	61	-52%	▼
Admits	21	43	-51%	•
Discharges	28	45	-38%	•

Data Submission Quality



Data Submitted to DMHAS by Month

Jul Aug Sep Oct Nov Dec Jan Feb Mar % Months Submitted

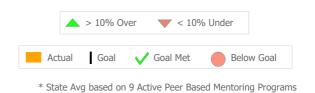
Imissions 67%

Scharges 56%

Admissions

Discharges

1 or more Records Submitted to DMHAS



Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

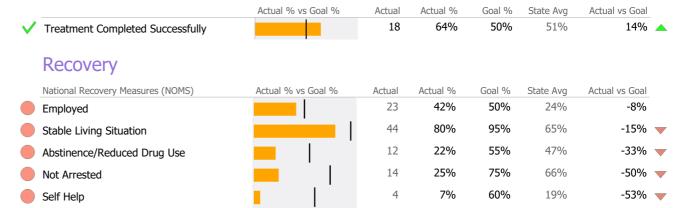
Program Activity

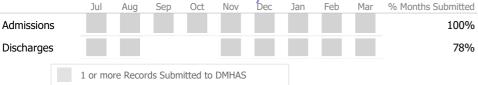
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	54	61	-11%	•
Admits	32	44	-27%	•
Discharges	28	36	-22%	•

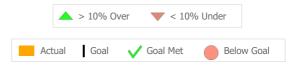
Data Submission Quality

✓ Valid Axis I Diagnosis		100%	100%
Diagnosis		Actual	State Avg
SA Screen Complete		25%	88%
MH Screen Complete		0%	76%
Co-occurring		Actual	State Avg
6 Month Updates		0%	24%
On-Time Periodic		Actual	State Avg
Valid TEDS Data		54%	96%
Valid NOMS Data		57%	88%
Data Entry		Actual	State Avg

Discharge Outcomes







^{*} State Avg based on 21 Active Buprenorphine Maintenance Programs

Mental Health - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2020 - March 2021 (Data as of Jun 28, 2021)

Program Activity

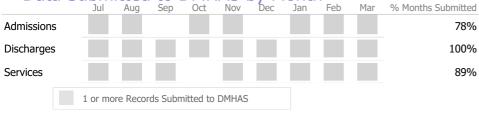
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	56	66	-15%	•
Admits	22	28	-21%	•
Discharges	22	36	-39%	•
Service Hours	608	485	25%	•

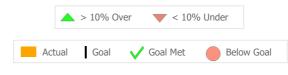
Recovery



Data Submission Quality

Dat	a Entry	Ac	tual	State Avg
Va	lid NOMS Data		78%	90%
On	-Time Periodic		Actual	State Avg
√ 6 N	Month Updates		100%	91%



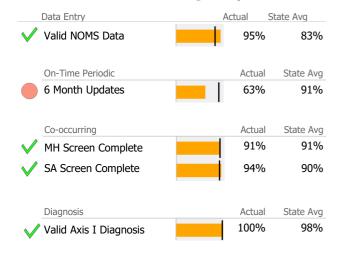


^{*} State Avg based on 39 Active Employment Services Programs

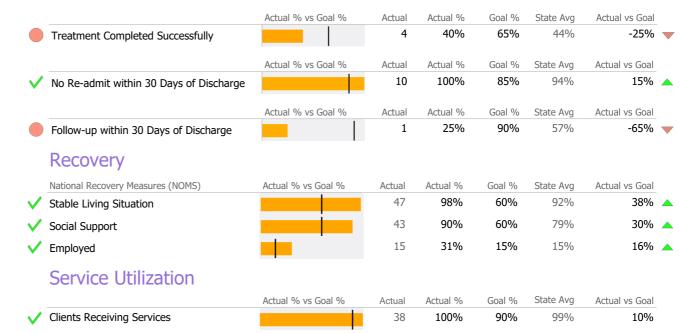
Program Activity

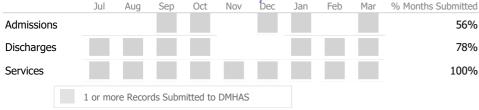
Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	47	48	-2%	
Admits	7	12	-42% ▼	
Discharges	10	7	43% 🔺	
Service Hours	2,265	6,724	-66% ▼	

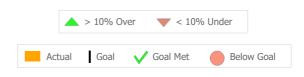
Data Submission Quality



Discharge Outcomes







^{*} State Avg based on 23 Active Assertive Community Treatment Programs

Program Activity Discharge Outcomes Variance % Measure Actual 1 Yr Ago Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal **Unique Clients** 50% 50% 60% 78% -10% Treatment Completed Successfully 300% Admits 1 Actual % vs Goal % Actual Actual % Goal % State Avg Actual vs Goal 2 2 0% Discharges Follow-up within 30 Days of Discharge 100% 90% 77% 10% Service Hours 281 912 -69% Recovery Bed Davs 648 935 -31% National Recovery Measures (NOMS) Actual % vs Goal % Actual Actual % Goal % State Ava Actual vs Goal 67% 7% Social Support 4 60% 84% **Data Submission Quality** 6 95% 94% 5% 100% Stable Living Situation Data Entry Actual State Ava 1 17% 25% 9% -8% **Employed** Valid NOMS Data 88% 75% **Bed Utilization** State Avg On-Time Periodic Actual 12 Months Trend Avg LOS Beds Turnover Actual % Goal % State Avg Actual vs Goal 6 Month Updates 100% 86% Avg Utilization Rate 636 days 59% 90% 93% -31% -----0.4 >110% 90-110% < 90% Data Submitted to DMHAS by Month Sep Oct Nov Dec Jan Mar % Months Submitted Feb > 10% Over < 10% Under</p> Admissions 33% 22% Discharges Actual Goal Goal Met Below Goal 100% Services * State Avg based on 79 Active Supervised Apartments Programs 1 or more Records Submitted to DMHAS