Apex
Danbury, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2024 - June 2025 (Data as of Sep 09, 2025)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	56	57	-2%
	Admits	28	31	-10%
	Discharges	35	30	17% ▲
	Service Hours	1,840	1,395	32% ▲

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

Consumer Satisfaction Survey (Based on 10 FY24 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ Quality and Appropriateness		100%	80%	93%
✓ Participation in Treatment		100%	80%	92%
✓ General Satisfaction		100%	80%	92%
✓ Overall		100%	80%	91%
✓ Respect		100%	80%	91%
✓ Access		100%	80%	88%
✓ Outcome		100%	80%	83%

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

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Case Management	56	100.0%

Client Demographics

Age	#	%	State Avg
18-25	6	11%	9%
26-34	16	29%	19%
35-44	14	25%	26%
45-54	9	16%	18%
55-64	7	13%	18%
65+	4	7%	10%

Gender	#	%	State Avg
Male	38	68%	60%
Female	18	32%	40%
Transgender/Other			0%

Ethnicity	#	%	State Avg
Hispanic-Other	26	46% ▲	12%
Hisp-Puerto Rican	16	29% ▲	10%
Hispanic-Cuban	8	14% ▲	0%
Hispanic-Mexican	5	9%	1%
Non-Hispanic	1	2% ▼	64%
Unknown		▼	14%

Race	#	%	State Avg
Other	42	75% ▲	12%
Multiple Races	6	11%	1%
Unknown	4	7%	10%
White/Caucasian	4	7% ▼	58%
Am. Indian/Native Alaskan			1%
Asian			1%
Black/African American		▼	18%
Hawaiian/Other Pacific Islander			0%

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

Latino Outreach
Apex
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2024 - June 2025 (Data as of Sep 09, 2025)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	56	57	-2%	
Admits	28	31	-10%	
Discharges	35	30	17%	▲
Service Hours	1,840	1,395	32%	▲

Service Engagement

	Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	at least 1 Service within 180 days		28	100%	50%	78%	50%	▲

Data Submitted to DMHAS for Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	■		■		■		■		■	■	■		58%
Discharges	■	■					■		■	■	■	■	58%
Services	■	■	■	■	■	■	■	■	■	■	■	■	100%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 24 Active Outreach & Engagement Programs