

Reporting Period: July 2025 -September 2025 (Data as of Dec 16, 2025)

Provider Activity

| Monthly Trend | Measure        | Actual | 1 Yr Ago | Variance % |   |
|---------------|----------------|--------|----------|------------|---|
|               | Unique Clients | 4      | 5        | -20%       | ▼ |
|               | Admits         |        |          |            |   |
|               | Discharges     |        |          |            |   |
|               | Service Hours  | 11     | 22       | -49%       | ▼ |

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

Consumer Satisfaction Survey (Based on 7 FY25 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 | # | %      |
|---------------|--------------------|---|--------|
| Mental Health |                    |   |        |
|               | Case Management    | 4 | 100.0% |

Client Demographics

| Age               |   |     |           | Gender                          |   |     |           |
|-------------------|---|-----|-----------|---------------------------------|---|-----|-----------|
|                   | # | %   | State Avg |                                 | # | %   | State Avg |
| 18-25             |   |     | 9%        | Female                          | 3 | 75% | ▲ 41%     |
| 26-34             |   |     | ▼ 18%     | Male                            | 1 | 25% | ▼ 58%     |
| 35-44             |   |     | ▼ 25%     | Transgender/Other               |   |     | 0%        |
| 45-54             | 1 | 25% | 18%       |                                 |   |     |           |
| 55-64             | 1 | 25% | 19%       |                                 |   |     |           |
| 65+               | 2 | 50% | ▲ 11%     |                                 |   |     |           |
| Ethnicity         |   |     |           | Race                            |   |     |           |
|                   | # | %   | State Avg |                                 | # | %   | State Avg |
| Non-Hispanic      | 3 | 75% | ▲ 64%     | White/Caucasian                 | 3 | 75% | ▲ 59%     |
| Hisp-Puerto Rican | 1 | 25% | ▲ 10%     | Black/African American          | 1 | 25% | 17%       |
| Hispanic-Cuban    |   |     | 0%        | Am. Indian/Native Alaskan       |   |     | 1%        |
| Hispanic-Mexican  |   |     | 1%        | Asian                           |   |     | 1%        |
| Hispanic-Other    |   |     | ▼ 12%     | Multiple Races                  |   |     | 1%        |
| Unknown           |   |     | ▼ 13%     | Hawaiian/Other Pacific Islander |   |     | 0%        |
|                   |   |     |           | Other                           |   |     | ▼ 12%     |
|                   |   |     |           | Unknown                         |   |     | 8%        |

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

Program Activity

| Measure        | Actual | 1 Yr Ago | Variance % |   |
|----------------|--------|----------|------------|---|
| Unique Clients | 4      | 5        | -20%       | ▼ |
| Admits         | -      | -        |            |   |
| Discharges     | -      | -        |            |   |
| Service Hours  | 11     | 22       | -49%       | ▼ |

Data Submission Quality

| Data Entry       | Actual                      | State Avg |
|------------------|-----------------------------|-----------|
| Valid NOMS Data  | <div><div></div></div> 100% | 99%       |
| On-Time Periodic |                             |           |
| 6 Month Updates  | <div><div></div></div> 100% | 83%       |

Data Submitted to DMHAS for Month

|            | Jul                    | Aug                    | Sep                    | % Months Submitted |
|------------|------------------------|------------------------|------------------------|--------------------|
| Admissions |                        |                        |                        | 0%                 |
| Discharges |                        |                        |                        | 0%                 |
| Services   | <div><div></div></div> | <div><div></div></div> | <div><div></div></div> | 100%               |

1 or more Records Submitted to DMHAS

Recovery

| National Recovery Measures (NOMS) | Actual % vs Goal %     | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|-----------------------------------|------------------------|--------|----------|--------|-----------|----------------|
| ✓ Stable Living Situation         | <div><div></div></div> | 4      | 100%     | 85%    | 86%       | 15% ▲          |

Service Utilization

|                              | Actual % vs Goal %     | Actual | Actual % | Goal % | State Avg | Actual vs Goal |
|------------------------------|------------------------|--------|----------|--------|-----------|----------------|
| ✓ Clients Receiving Services | <div><div></div></div> | 4      | 100%     | 90%    | 94%       | 10%            |

▲ > 10% Over

▼ < 10% Under

Actual

Goal

✓ Goal Met

● Below Goal

\* State Avg based on 69 Active Supportive Housing – Development Programs