

**EXHIBIT E-PERFORMANCE MEASURES**

SUD Adult	CommuniCare OLE	Shannon Garza Kevin Moses
<b>Program Purpose</b>	Decrease incidences of substance abuse, reduce incarceration, and improve the quality of life for members.	
<b>Program Description</b>	Outpatient, Intensive Outpatient, Care Coordination, Clinician Consultation, Recovery Services, and In-Person Screening and Referral to treatment, for any Yolo resident referred through an access point established by Yolo County or directly requesting services through the provider. Services can include individual and group counseling, drug testing, care coordination for level of care placement, linkage to other necessary services, oversight of complicated co-morbid or co-occurring member cases, and improved access to the substance use continuum of services.	
<b>PM1: How much did we do?</b>		
<b>1.1</b>	Bi-Annually Reported # of Members Demographics: 1. Age 2. Gender 3. Race/Ethnicity 4. Disability	
<b>1.2</b>	Bi-Annually Reported # of referrals/ coordination for other services and referral dispositions	
<b>1.3</b>	Bi-Annually Reported # of referrals/ coordination to/with other substance use disorder providers for continued care	
<b>1.4</b>	Bi-Annually Reported # of total members who completed their treatment episode	
<b>PM2: How well did we do it?</b>		
<b>2.1</b>	Bi-Annually Reported # of Members satisfied with services provided % of members satisfied with services provided (As collected by question #1-3 on the Consumer Perception Survey)(Results provided by County Quality Management Team) 1. I like the services that I received here 2. If I had other choices, I would still get services from this agency 3. I would recommend this agency to a friend or family member	
<b>2.2</b>	Annually Reported # of members satisfied with access and services provided based on Drug Medi-Cal Organized Delivery System (DMC-ODS) Treatment Perception Survey (TPS) % of members satisfied with access and services provided based on Drug Medi-Cal Organized Delivery System (DMC-ODS) Treatment Perception Survey (TPS). (As collected by TPS Survey – HHSA Reportable Data)	
<b>2.3</b>	Bi-Annually Reported Initiation Rate # of members who receive at least one (1) service (individual, group, collateral, or case management) within fourteen (14) days of a diagnosis being established by your facility.	

**EXHIBIT E-PERFORMANCE MEASURES**

	% of members who receive at least one (1) or more services (individual, group, collateral, or case management) within fourteen (14) days of a diagnosis being established by your facility.
<b>2.4</b>	Bi-Annually Reported Engagement Rate # of members who receive at least two (2) or more services (individual, group, collateral, or case management) within thirty (30) days of a diagnosis being established by your facility. % of members who receive at least two (2) or more services (individual, group, collateral, or case management) within thirty (30) days of a diagnosis being established by your facility.
<b>2.5</b>	Bi-Annually Reported Retention Rate: # of members who stayed for a minimum of two weeks that completed their entire treatment episode % of members who stayed for a minimum of two weeks that completed their entire treatment episode.
<b>2.6</b>	Bi-Annually Reported # of members who were satisfied with access to services. % of members who were satisfied with access to services (As collected by question #4-8 on the Consumer Perception Survey) <ol style="list-style-type: none"> <li>1. The location of service was convenient (parking, public transportation, distance etc.)</li> <li>2. Staff were willing to see me as often as I felt it was necessary</li> <li>3. Staff returned my calls within 24 hours</li> <li>4. Services were available at times that were good for me</li> <li>5. I was able to get all the services I thought I needed.</li> </ol>
<b>PM3: Is anyone better off?</b>	
<b>3.1</b>	Bi-Annually Reported # of members reporting a reduction in substance use at completion of the program, and % of members reporting a reduction in substance use at completion of the program
<b>3.2</b>	Bi-Annually Reported # of members reporting a reduction in days incarcerated while in treatment, compared to the previous 6 months % of members reporting a reduction in days incarcerated while in treatment, compared to the previous 6 months.
<b>3.3</b>	Bi-Annually Reported % reduction of days incarcerated during treatment (1- days incarcerated in treatment/days incarcerated 6 months prior to treatment)

Performance Measures Reports are due Bi-Annually as follows:

Submit January 1<sup>st</sup> for the period of July 1<sup>st</sup> through December 31<sup>st</sup>

Submit July 30<sup>th</sup> for the period of January 1<sup>st</sup> through June 30<sup>th</sup>

Contractor shall submit the Performance Outcome Measures report electronically via email to:

[Kerrie.Covert@yoloCounty.org](mailto:Kerrie.Covert@yoloCounty.org) and [Glenn.Johnson@yolocounty.org](mailto:Glenn.Johnson@yolocounty.org) and [Julie.Freitas@yolocounty.org](mailto:Julie.Freitas@yolocounty.org)

**[END EXHIBIT E]**