## **APPENDIX 1**

CAT PROGRAM REPORT PERSONS SERVED									
CAT Tier Variation (Select One)	Tier 1 Ages 11-21	Tier 1 Tier 2 T			ier 3 ages 0-10	Tier 4 FST Team			
Provider Name									
Contract Number									
Reporting Period	From To								
Reporting Requirement	Targ	Target This Quarter Year to Date						e	
DELIVERABLE  Number of Persons Served - Section D-2 (Mininum Numbers Apply to CAT Tier 1 only)  1st Month = 10 2nd Month = 20 3rd Month = 25 Thereafter = 35		Min per month		Month 3	I I otal				
MINIMUM PERFORMANCE MEASURES – Section XV			Numerator	Denominator		Percentage	Numerator	Denominator	Percentage
School, Preschool, and Daycare Attendance	80%	6							
Improved Level of Functioning, based upon CFARS, FARS, CANS, or alternative assessment	80%	6							
Living in a Community Setting	90%	6							
Improved Family Functioning based upon NCFAS-G+R, CANS, or alternative assessment	70%	6							
Notes: 1. Performance measures for CFARS/FARS, NCFAS, and CANS will become effective once the Provider discharges a minimum of 10 individuals. 2. Providers may use the space below to provide performance-related details affecting the delivery of services according to the specified targets. (Optional)									
ATTESTATION									
I hereby attest the information provided herein is accurate, reflects services provided in accordance with the terms and conditions of this contract, and is supported by client documentation records maintained by this agency.									
Authorized Name and Title (please print)									
Signature					I	Date			

## **APPENDIX 2**

QUARTERLY SUPPLEMENTAL DATA REPORT CAT PROGRAM							
CAT Tier Variation (Select One)	Ages FFPSA Ag		Tier 3         Tier 4           Ages         FST           0-10         Team				
Provider Name							
Contract #							
Reporting Period	From			То			
		Individuals Div	erted from Out of	Home Placement			
		, number of partic f home placement					
Discharge Options	Child Welfare involvement	Residential mental health treatment	Juvenile Justice commitment	At admission, number of participants not at risk of out of home placement	Total Qua		Total Year to Date
Number of discharges removed from the home due to child welfare involvement							
Number of discharges admitted to a residential mental health treatment center							
Number of discharges committed to juvenile justice placement							
Number of discharges living in the community							
Totals							
Use the space below to provide any discussion of details affecting the delivery of services and supplemental data. (Optional)							

## APPENDIX 2 (CONTINUED)

Gainful Activity for Individuals Not Enrolled in School or a Vocational Program								
	Required	Reporting	Total This	Quarter	Total Year to Date			
	dividuals served during uded in the school atte	the reporting period age 16 and ndance measure.						
Number of the during the rep		gaged in at least one gainful activity						
Use the space	Use the space below to provide examples of the gainful activities these individuals engaged in during the reporting period.							
		Individuals Waiting to R	eceive Services					
Wait list records are created by providers when an individual has been determined as eligible for services, but the provider is at maximum capacity and access is not immediately available. Signed consent to services is part of eligibility determination.								
	Required Reporting This Quarter Year to Date							
Total number of individuals eligible to receive services that have been waitlisted								
	time for individuals eli n the wait list for servic	gible for services (in number of es)						
ATTESTATION								
I hereby attest the information provided herein is accurate, reflects services provided in accordance with the terms and conditions of this contract, and is supported by client documentation records maintained by this agency.								
	Authorized Name and Title (please print)							
Signature			Date					

## **APPENDIX 3**

CAT Return On Investment Quarterly Report						
Network Service Provider:						
Managing Entity:						
Cumulative Fiscal Quarterly R	Ol Report:					
Number of Clients			Da	ays Involved		
			Actual Costs Per Day		Total Costs Per Quarter	
Clients Served in CAT						
Clients Discharged from CAT						
Clients Discharged from CAT Community	who Remain in					
The Clients discharged from CAT were diverted from:			Co	osts Per Day	Annualized Cost Avoided	
Diverted from Child Welfare				\$291.16		
Diverted from Juvenile Justice				\$322.00		
Diverted from Psychiatric Residential (SIPP)			\$513.31			
Total Cost Avoidance						
ROI Differential (Total Cost Avoidance minus Total Cost for the Quarter)						
Return on Investment Differential (Divided by the Total Costs for the Quarter)						
ATTESTATION						
I hereby attest the information provided herein is accurate, reflects services provided in accordance with the terms and conditions of this contract, and is supported by client documentation records maintained by this agency.						
Authorized Name and Title (please print)						
Signature				Date		