Blair HealthChoices Behavioral Health
81 Holliday Hills Drive
Hollidaysburg PA 16648

Blair HealthChoices Behavioral Health System

1st Quarter January-March 2026

Consumer and Family (C/FST) Satisfaction & Outcomes: Survey Findings

Detailed Report of Survey Findings

April 2026

Survey Administration and Evaluation Services Provided By:

THE CENTER FOR BEHAVIORAL HEALTH DATA RESEARCH, INC.

The Consumer Family Satisfaction Team (C/FST) program is a statewide county based program mandated by Appendix L of the Pennsylvania HealthChoices Program to measure member perceptions of satisfaction and treatment outcomes with publicly funded mental health and drug and alcohol services.

Chart Informational Guide

An appropriate benchmark system is utilized to highlight positive findings and better recognize areas requiring Improvement.

Above 90% Benchmark - **Meets Expectations**
Between 85%-89% - **Satisfactory**
Below 85% - **Requires Action**

No chart information - **No Data this Quarter**

(Reference chart below)

Data Utilization & Provider Response
Per the Pennsylvania HealthChoices Program, the C/FST data is designed to be utilized as an additional input to the provider's existing internal quality improvement processes. Additionally, the provider is to review their quarterly and year-to-date data and respond with actions your organization will take to improve any indicator that has at least five (5) year-to-date completed interviews/surveys and is below the 85% benchmark. Please utilize the enclosed provider response template.

***Please note that no written response is required until 4th Quarter.**

Counts Break % Respondents	2021 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr Jul.- -Sept.	4th Qtr Oct.--Dec.
Neutral responses reduce total	93	93	-	-	-
I feel like I was able to get the help I needed within an acceptable amount of time.					
Strongly Agree/Agree	89 95.7%	89 95.7%	- -	- -	- -
Strongly Disagree/Disagree	4 4.3%	4 4.3%	- -	- -	- -

95.7% of target rate Y-T-D **Meets Expectations**

Not all charts are benchmarked. Benchmarked charts are identified by one of three colors (green, yellow, or red) directly below the chart.**If you have 5 or more surveys Y-T-D, the benchmark will determine if you need to respond.** (See above sample).

Introduction

The ***Blair County Consumer/Family Satisfaction Team (C/FST)*** is a county-wide program mandated under Appendix L of the Pennsylvania HealthChoices Program to obtain input from individuals and caregivers receiving treatment from publicly funded mental health and drug & alcohol services.

The C/FST is required to be independent and unbiased, although it does seek input from the county (primary contractor), the Managed Care Organization (the insurance company) and treatment providers, as well as individuals being treated and other stakeholders in designing its data collection processes and interview questionnaires.

Individuals receiving treatment are interviewed and asked for their opinions (perceptions) of the ease of accessing treatment, their treatment experiences, their perception of provider recovery orientation practices and treatment outcomes. They are also asked about issues or problems.

The C/FST produces a quarterly report starting with the 1st Quarter produced in April for the January-March period and ending with a 4th Quarter produced in January which also includes the annual report as quarter-to-quarter and year-to-date results are tracked and compared.

The county, MCO and providers are asked to utilize the C/FST data as an additional input into their internal quality improvement processes to support both system and treatment outcomes.

How this report is organized:

The 1st Section covers adults (age 21 and above) interviewed for the present quarter, while the 2nd Section covers family/caregivers (of a child under age 14) receiving treatment and the 3rd Section covers Youths (between the ages of 14 and 21) receiving treatment.

The first two pages of Adult, Family and Youth sections contain a C/FST analysis of interviews/surveys achieved for that quarter, changes in sample characteristics, findings and recommendations.

Some questions provide for an opportunity for the respondent to give literal comments and these are shown under the question, if any additional comments were made.

The Provider Comment Section will list provider comments received in response to the previous quarter report. Typically, these comments are in response to areas receiving year-to-date percentage that are under the established benchmarks and have had at least three (5) individuals interviewed.

The MCO Comment Section and functions the same as the provider comment section with the distinction being the MCO is more focused on systemic delivery outcome and issues across the network, while individual providers are focused on their own results.

The Technical Notes section addresses target sample size, survey/interview processes, data analysis and reporting, benchmarking, and data limitations.

Adult Survey Findings

Blair County C/FST – 1st Quarter (January – March) 2026

This 1st Quarter Blair County C/FST Report covers the period between January and March 2026 and provides detail on the 95 adults, 28 family and 18 youths (141 total) interviews that were completed for the 1st Quarter of calendar year 2026.

Adult Survey Process & Findings

Survey Results & Variations on Sample Characteristics
Variations in sample characteristics between quarters are provided so that the reader may infer what influences, if any, these variations may have had on member response ratings.

1st Quarter 2026 Adult Sample Characteristics versus 4th Quarter 2025 Comparison:
1. Lower percentage of face-to-face – 67% (64 of 95) versus 72% (74 of 103).
2. Similar percentage of female respondents – 55% (52 of 95) versus 58% (60 of 103).
3. Similar percentage of members between 35-54 - 54% (51 of 95) versus 52% (54 of 103).
4. Higher percentage MH services only –68% (65 of 95) versus 59% (61 of 103)
5. Higher mix of MH outpatient – 35% (33 of 95, excludes medication mgt) versus 26% (27 of 103).

The following are C/FST Findings and Recommendations based on the 95 adult surveys completed during the 1st Quarter of Calendar Year 2026 for the period from January to March 2026.

Note: *Treatment Experiences* and *Provider Recovery Orientation* have been combined, revised, and expanded into a new set of questions – *Recovery Oriented Treatment Experiences* (Questions Q29a to Q29e).

Findings Overview
1. Just 25% (24 of 95) adults interviewed reported they *"reviewed their insurance benefits and treatment options through Community Care"* during the 1st Quarter of 2026. This indicator was 26% (102 of 392) for the calendar year 2025.

2. 100% (2 of 2, excluding 93 n/a) of adult members interviewed during the 1st Quarter agreed that if they contacted Community Care in the previous 12 months, they *"were satisfied with the level of dignity and respect the staff conveyed."* This indicator was 95% (40 of 42) for the calendar year 2025.

3. 24% (23 of 95) of adults interviewed were aware of the complaint or grievance through Community Care. This indicator is 39% (152 of 392) for the calendar year 2025. Note: The C/FST surveyor provides the members with contact information.

4. Indicators regarding ***Access*** to provider treatment continue to be good. 94% (89 of 95) of surveyed adults agreed with *"I get the right amount of help,"* and 94% (89 of 95) *"they were able to receive help in an acceptable amount of time,"*

53% (50 of 95) of adults interviewed received their treatment services through telehealth and 86% (43 of 50) of those were satisfied with their telehealth experience.

Just 13% (12 of 95) reported having barriers that prevented them from getting behavioral health services and 8% (8 of 95) reported having reading or writing barriers.

5.This quarter, three of six satisfaction indicators under the combined, revised and expanded ***Recovery Oriented Treatment Experiences*** section were in the 86% to 98% (82-93 of 95) range. These included *"The interventions offered me on my treatment plan are a good fit for me," "My provider treated me with dignity and respect,"* and *"My provider asked me questions about my physical health."*

The indicator *"My provider talks to me about my plan after treatment,"* dropped from 78% (80 of 103) during the 4th quarter to 53% (50 of 95) during the 1st quarter. The indicator *"(I) was given a chance to make treatment decisions"* is 87% (83 of 95).

The new indicator for 2026, *"Based on the help I received, I am likely to recommend (provider) to others,"* is 84% (80 of 95) for the 1st quarter and was 90% (354 of 392) for the calendar year 2025.

6. The adult responses to ***Treatment Outcomes*** were 86% to 94% (85-89 of 95) during the 1st Quarter of 2026 in all four indicators. Adult respondents agreed that *"Treatment received improved the quality of their life a little too much better," "As a result of treatment, they feel more hopeful," "They feel they can function better in daily life,"* and they *"deal with problems better" regarding the effect treatment has had on their life.*

7. 6% (6 of 95) report issues or problems with their provider during the 1st Quarter of 2026 and was 5% (20 of 392) for the calendar year 2025.

8. See Pages 21-33 for member literal comments regarding access, barriers, treatment, issues, or additional compliments or concerns.

Observations Overview
1. Just 25% (24 of 95) of adults interviewed indicated they had reviewed their insurance benefits and treatment options (available) through Community Care. This indicator has been historically low and was 26% (102 of 392) for the calendar year 2025.

2. Adult survey question Q27 asks *"Are there any barriers that prevent you from getting your behavioral health needs met?"* 13% (12 of 95) answered "yes" and member literals regarding those barriers can be found on Page 21. Also, 8% (8 of 95) of adults who reported having barriers themselves or within their family were associated with reading or writing.

3. An overall summary question (Q38) asks *"Please share any additional compliments or concerns."* 23% (22 of 95) adults interviewed answered "yes" and those literal responses start on Page 24.

Adult – Member Request for Assistance
Upon completing the survey, 0% (0 of 6 excluding 89 n/a) adult members surveyed expressed interest in having a provider or MCO concern or issue they shared during the interview referred for immediate handling by Blair HealthChoices.

Quality Audits
Periodically, random quality audits are performed which have the dual purpose of obtaining member feedback regarding the survey process plus confirming the integrity of the survey.

During the 1st Quarter 2026, 15 adult quality audits were performed. One (1) adult member did not remember doing the survey. 100% (9 of 9) adults felt the length of the survey and number of questions were satisfactory. 100% (9 of 9) adults were satisfied with the survey process and 100% (9 of 9) adults felt ok or good about being contacted.

Member comments,
"The surveyor did a good job."
"The surveyor was nice and polite."
"The surveyor was professional and polite."

Demographics

*Question 5-Zip codes, please check your summary for a complete break out of your zip codes in your area.

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	95	**95**	-	-	-
Q6-What type of survey is it?					
Telephone	**31** **32.6%**	31 32.6%	- -	- -	- -
Face to Face	**64** **67.4%**	64 67.4%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	95	**95**	-	-	-
Q7-What is your gender?					
Male	**37** **38.9%**	37 38.9%	- -	- -	- -
Female	**52** **54.7%**	52 54.7%	- -	- -	- -
Does not identify with either gender	**6** **6.3%**	6 6.3%	- -	- -	- -
Refused to answer	**-** **-**	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	95	**95**	-	-	-
Q8-How old are you?					
21--24 years	**9** **9.5%**	9 9.5%	- -	- -	- -
25--34 years	**24** **25.3%**	24 25.3%	- -	- -	- -
35--44 years	**27** **28.4%**	27 28.4%	- -	- -	- -
45--54 years	**24** **25.3%**	24 25.3%	- -	- -	- -
55--64 years	**11** **11.6%**	11 11.6%	- -	- -	- -
65 and over	**-** **-**	- -	- -	- -	- -

Demographics

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	95	**95**	**-**	**-**	**-**
Q9-What do you consider your race to be?					
Caucasian	**84** **88.4%**	84 88.4%	- -	- -	- -
African American	**10** **10.5%**	10 10.5%	- -	- -	- -
Hispanic American	**-** **-**	- -	- -	- -	- -
American Indian/ Alaskan Native	**-** **-**	- -	- -	- -	- -
Asian American	**-** **-**	- -	- -	- -	- -
Bi-racial	**1** **1.1%**	1 1.1%	- -	- -	- -
Other	**-** **-**	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	95	**95**	**-**	**-**	**-**
Q10-Are you receiving services primary for:					
Mental Health	**65** **68.4%**	65 68.4%	- -	- -	- -
Substance Use Disorder	**30** **31.6%**	30 31.6%	- -	- -	- -
Both Mental Health and Substance Use Disorder	**-** **-**	- -	- -	- -	- -

Adult Satisfaction with Community Care Analysis

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**95**	**95**	**-**	**-**	**-**
Q11-Community Care is your insurance for mental health and substance use services, have you reviewed your insurance benefits and treatment options through Community Care (CCBH)?					
Yes	**24** **25.3%**	24 25.3%	- -	- -	- -
No	**71** **74.7%**	71 74.7%	- -	- -	- -

Adult Satisfaction with Community Care Analysis

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	95	95	-	-	-
Q12-Do you know how to contact Community Care's member services if you have questions? (If no, offer them a card.)					
Yes	25 26.3%	25 26.3%	- -	- -	- -
No	70 73.7%	70 73.7%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
NA responses reduce total	2	2	-	-	-
Q13-If you had contact with Community Care (CCBH) in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you?					
Yes	2 100.0%	2 100.0%	- -	- -	- -
No	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	95	95	-	-	-
Q14-Are you aware of the Complaint and Grievance process through Community Care (CCBH)?					
Yes	23 24.2%	23 24.2%	- -	- -	- -
No	72 75.8%	72 75.8%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
NA responses reduce total	-	-	-	-	-
Q15-If you filed a complaint or grievance within the last 12 months, were you satisfied with how it was handled?					
Yes	- -	- -	- -	- -	- -
No	- -	- -	- -	- -	- -

Adult Providers Level Analysis

Counts Break % Respondents	2026 YTD Total	What quarter is it?
		1st Qtr Jan--Mar
Base	**95**	**95**
Q16-What is the name of your treatment provider?		
Primary Health Network	**14** **14.7%**	14 14.7%
UPMC Behavioral Health of Alleghenies (HNA)	**10** **10.5%**	10 10.5%
Nulton Diagnostic	**9** **9.5%**	9 9.5%
(ACRP) Alternative Community Resource Program	**18** **18.9%**	18 18.9%
Cove Forge	**18** **18.9%**	18 18.9%
Dolminis	**1** **1.1%**	1 1.1%
Blair Family Solutions	**10** **10.5%**	10 10.5%
Pyramid HealthCare	**11** **11.6%**	11 11.6%
Caring HealthCare Network	**1** **1.1%**	1 1.1%
Other	**3** **3.2%**	3 3.2%

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul--S...	4th Qtr Oct--Dec
Base	**95**	**95**	**-**	**-**	**-**
Q17-How did you hear about this provider?					
Community Care (CCBH)	**-** **-**	- -	- -	- -	- -
Referred by another provider	**32** **33.7%**	32 33.7%	- -	- -	- -
Internet search	**9** **9.5%**	9 9.5%	- -	- -	- -
Advertisement	**-** **-**	- -	- -	- -	- -
Word of mouth	**53** **55.8%**	53 55.8%	- -	- -	- -
other	**1** **1.1%**	1 1.1%	- -	- -	- -

Adult Providers Level Analysis

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan.--Mar.
N/A responses reduce total	95	95
Q18-What services are you currently receiving or have you received from this provider?		
MH Blended Case Management (BCM)	4 4.2%	4 4.2%
2.5 Partial Hospitalization (SUD Partial)	2 2.1%	2 2.1%
3.5/3.7 SUD Rehabilitation	21 22.1%	21 22.1%
4/3.7 Withdrawal Management (detox)	6 6.3%	6 6.3%
MH Outpatient Therapy	33 34.7%	33 34.7%
Methadone Maintenance	1 1.1%	1 1.1%
Medication Management	28 29.5%	28 29.5%

Adult Providers Level Analysis

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**95**	**95**	**-**	**-**	**-**
Q19-How long have you been receiving services from (provider)?					
Less than 6 months	**36** **37.9%**	36 37.9%	- -	- -	- -
6 months to 1 year	**14** **14.7%**	14 14.7%	- -	- -	- -
1 to 2 years	**8** **8.4%**	8 8.4%	- -	- -	- -
2 to 4 years	**14** **14.7%**	14 14.7%	- -	- -	- -
4 + years	**23** **24.2%**	23 24.2%	- -	- -	- -
Completed	**-** -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J- ul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q20-My provider made me aware of the different treatment services available to best meet my needs.					
Yes	**82** **86.3%**	82 86.3%	- -	- -	- -
No	**13** **13.7%**	13 13.7%	- -	- -	- -

86.3% of target rate Y-T-D **Satisfactory**

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
NA responses reduce total	**95**	**95**	**-**	**-**	**-**
Q21-I was made aware of the different providers available for the treatment services that best meet my needs.					
Yes	**74** **77.9%**	74 77.9%	- -	- -	- -
No	**21** **22.1%**	21 22.1%	- -	- -	- -

77.9% of target rate Y-T-D **Action Required**

Adult Providers Level Analysis

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q22-In the last twelve months, were you able to get the help you needed? (State question)					
Yes	**78** **82.1%**	78 82.1%	- -	- -	- -
Sometimes	**15** **15.8%**	15 15.8%	- -	- -	- -
Never	**2** **2.1%**	2 2.1%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q23-How long did you have to wait for services?					
Less than a week	**47** **49.5%**	47 49.5%	- -	- -	- -
1-2 weeks	**33** **34.7%**	33 34.7%	- -	- -	- -
3-4 weeks	**8** **8.4%**	8 8.4%	- -	- -	- -
Longer than a month	**7** **7.4%**	7 7.4%	- -	- -	- -

Adult Access to Services

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q24A-I feel like I was able to get the help I needed within an acceptable amount of time.					
Yes	**89** **93.7%**	89 93.7%	- -	- -	- -
No	**6** **6.3%**	6 6.3%	- -	- -	- -

93.7% of target rate Y-T-D **Meets Expectations**

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q24B- I get the right amount of help.					
Yes	**89** **93.7%**	89 93.7%	- -	- -	- -
No	**6** **6.3%**	6 6.3%	- -	- -	- -

93.7% of target rate Y-T-D **Meets Expectations**

Adult Access to Services

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr Jul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q25-Did you receive any of your treatment services through telehealth?					
Yes	**50** **52.6%**	50 52.6%	- -	- -	- -
No	**45** **47.4%**	45 47.4%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr Jul.--Sept.	4th Qtr Oct.--Dec.
NA's reduce totals	**50**	**50**	**-**	**-**	**-**
Q26-If yes, were you satisfied with your telehealth experience?					
Yes	**43** **86.0%**	43 86.0%	- -	- -	- -
No	**7** **14.0%**	7 14.0%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr Jul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q27-Are there any barriers that prevent you from getting your behavioral health needs met?					
Yes	**12** **12.6%**	12 12.6%	- -	- -	- -
No	**83** **87.4%**	83 87.4%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr Jul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q28-Do you have difficulties with reading or writing that impacts your ability to understand your treatment?					
Yes	**8** **8.4%**	8 8.4%	- -	- -	- -
No	**87** **91.6%**	87 91.6%	- -	- -	- -

Adult Recovery Oriented Treatment Experiences

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**95**	**95**	**-**	**-**	**-**
Q29A-The interventions offered to me on my treatment plan are a good fit for me.					
Strongly Agree/Agree	**88** **92.6%**	88 92.6%	- -	- -	- -
Strongly Disagree/Disagree	**4** **4.2%**	4 4.2%	- -	- -	- -
Neutral	**3** **3.2%**	3 3.2%	- -	- -	- -

92.6% of target rate Y-T-D **Meets Expectations**

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J- ul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q29B-My provider asked questions about my physical health.					
Strongly Agree/Agree	**82** **86.3%**	82 86.3%	- -	- -	- -
Strongly Disagree/Disagree	**10** **10.5%**	10 10.5%	- -	- -	- -
Neutral	**3** **3.2%**	3 3.2%	- -	- -	- -

86.3% of target rate Y-T-D **Satisfactory**

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J- ul.--Sept.	4th Qtr Oct.--Dec.
Base	**95**	**95**	**-**	**-**	**-**
Q29C-My provider treated me with dignity and respect.					
Strongly Agree/Agree	**93** **97.9%**	93 97.9%	- -	- -	- -
Strongly Disagree/Disagree	**-** **-**	- -	- -	- -	- -
Neutral	**2** **2.1%**	2 2.1%	- -	- -	- -

97.9% of target rate Y-T-D **Meets Expectations**

Adult Recovery Oriented Treatment Experiences

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	95	95	-	-	-
Q29D-The provider site is welcoming and comfortable.					
Strongly Agree/Agree	91 95.8%	91 95.8%	- -	- -	- -
Strongly Disagree/Disagree	2 2.1%	2 2.1%	- -	- -	- -
Neutral	2 2.1%	2 2.1%	- -	- -	- -

95.8% of target rate Y-T-D **Meets Expectations**

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	95	95	-	-	-
Q29e-My provider talks to me about my plan for after treatment.					
Strongly Agree/Agree	50 52.6%	50 52.6%	- -	- -	- -
Strongly Disagree/Disagree	40 42.1%	40 42.1%	- -	- -	- -
Neutral	5 5.3%	5 5.3%	- -	- -	- -

52.6% of target rate Y-T-D **Action Required**

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	95	95	-	-	-
Q29F-Based on the help I received, I am likely to recommend (provider) to others.					
Strongly Agree/AGree	80 84.2%	80 84.2%	- -	- -	- -
Strongly Disagree/Disagree	10 10.5%	10 10.5%	- -	- -	- -
Neutral	5 5.3%	5 5.3%	- -	- -	- -

84.2% of target rate Y-T-D **Action Required**

Adult Recovery Oriented Treatment Experiences

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	95	95	-	-	-
Q30-Were you given the chance to make treatment decisions? (State question)					
Yes	83 87.4%	83 87.4%	- -	- -	- -
No	1 1.1%	1 1.1%	- -	- -	- -
Sometimes	11 11.6%	11 11.6%	- -	- -	- -

Adult Outcomes

Counts Break % Respondents	2025 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	95	95	-	-	-
Q31-What effect has the treatment you've received had on the quality of your life? (State question)					
Much better	41 43.2%	41 43.2%	- -	- -	- -
A little better	44 46.3%	44 46.3%	- -	- -	- -
About the same	8 8.4%	8 8.4%	- -	- -	- -
A little worse	2 2.1%	2 2.1%	- -	- -	- -
Much worse	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	95	95	-	-	-
Q32-As a result of treatment, I feel more hopeful.					
Much better	50 52.6%	50 52.6%	- -	- -	- -
A little better	39 41.1%	39 41.1%	- -	- -	- -
About the same	4 4.2%	4 4.2%	- -	- -	- -
A little worse	2 2.1%	2 2.1%	- -	- -	- -
Much worse	- -	- -	- -	- -	- -

Adult Outcomes

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	95	95	-	-	-
Q33-As a result of treatment, I feel like I can function better in my daily life.					
Much better	50 52.6%	50 52.6%	- -	- -	- -
A little better	38 40.0%	38 40.0%	- -	- -	- -
About the same	7 7.4%	7 7.4%	- -	- -	- -
A little worse	- -	- -	- -	- -	- -
Much worse	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	95	95	-	-	-
Q34-As a result of treatment, I feel I can deal with problems better.					
Much better	49 51.6%	49 51.6%	- -	- -	- -
A little better	33 34.7%	33 34.7%	- -	- -	- -
About the same	12 12.6%	12 12.6%	- -	- -	- -
A little worse	1 1.1%	1 1.1%	- -	- -	- -
Much worse	- -	- -	- -	- -	- -

Adult Provider Issues

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
Base	95	95	-	-	-
Q35-Have you had any issues or problems with (provider)?					
Yes	6 6.3%	6 6.3%	- -	- -	- -
No	89 93.7%	89 93.7%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
NA reponses reduce total	95	95	-	-	-
Q36-If yes, what were the issues or problems with services from (provider)?					
Lack of treatment planning and coordination	- -	- -	- -	- -	- -
Poor Communication	1 1.1%	1 1.1%	- -	- -	- -
Frequent Staff Changes	- -	- -	- -	- -	- -
Frequent provider cancellations	- -	- -	- -	- -	- -
Services not provided when I needed them	2 2.1%	2 2.1%	- -	- -	- -
Other	3 3.2%	3 3.2%	- -	- -	- -
Not Applicable	89 93.7%	89 93.7%	- -	- -	- -

Adult Provider Issues

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
NA reponses reduce total	6	6	-	-	-
Q37-If yes, were you able to resolve these issues or problems with (provider)?					
Yes	- -	- -	- -	- -	- -
No	6 100.0%	6 100.0%	- -	- -	- -

Question 38 can be found in the back with literal comments.

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan.--Mar.	2nd Qtr Apr.--Jun.	3rd Qtr J-ul.--Sept.	4th Qtr Oct.--Dec.
NA responses reduce total	95	95	-	-	-
Q39-If you have shared problems about your provider or managed care company during this survey, are you interested in having your concerns addressed immediately by Blair HealthChoices?					
Yes	- -	- -	- -	- -	- -
No	6 6.3%	6 6.3%	- -	- -	- -
N/A	89 93.7%	89 93.7%	- -	- -	- -

***Question 39A-If you wish, I can forward your concerns directly to Blair HealthChoices, but I would need to include your name and information from the survey, which means your comments will no longer be anonymous. This may include discussing your specific concerns with your provider. If you do not wish to have this done all your answers will remain confidential.**

Adult Literal Comments

Q9A-What do you consider your race to be?

Q16A-What is the name of your treatment provider?

Q1- Alison Seltzer
Q1- Oasis LIfecare
Q1- Truecare Wellness

Q17A-How did you hear about this provider?

Q1- I was a previous employee

Q18A-What services are you currently receiving, or have you received from this provider?

Q24C -These statements are about your Access to services with provider.

Q1- They lost my referral for my MAT
Q1- They have no communication
Q1- I am already on medication and they made me start over
Q1- I am still in need of help

Q26A-If yes were you satisfied with your telehealth experience?

Q1- Things were already marked on my chart before we went over it and he barely said 2 words to me
Q1- She was short with me
Q1- They increased one of my medications and told me the other medication would not work then, but could not give me a reason why
Q1- They are always late to the appointment

Q27A-Are there any barriers that prevent you form getting your behavioral health needs met?

Q1- Transportation is an issue
Q1- Transportation is an issue
Q1- Their lack of communication
Q1- Driving and finances is an issue
Q1- My financial situation
Q1- Transportation is an issue

Q28A-Do you have any difficulties with reading or writing that impacts your ability to understand your treatment?

Q1- I don't read and write real good
Q1- Some reading and writing, some of the harder words or medical terms
Q1- I was ran over by a car and part of my skull is gone and it messed my brain up pretty bad
Q1- I have dysgraphia, it is a condition that effects reading and writing

Q29G--These statements are about Recovery Oriented Treatment Practices with (provider). Please indicate your level of agreement or disagreement with each statement.

Q1- We have not reached that part yet

Q1- We're not there yet

Q1- After treatment did not come up, they know what they're doing

Q1- After treatment hasn't been discussed yet. The provider's office staff are nice people

Q1- I'd recommend them because they are polite

Q1- The therapist was very personable

Q1- People are nice and caring

Q1- The doctor doesn't talk much but I'm pretty sure discharge has come up

Q1- My therapist is great!

Q1- There has been no talk of after treatment. I don't have a strong opinion of them in either direction

Q1- I would not recommend for people with my condition

Q1- I do not have a counselor that works well with me. I have not really been asked about my physical. They did not start after treatment. I am a little hesitant to recommend

Q1- The provider hasn't discussed after treatment yet

Q1- I don't want to be sent over to PHP, I would like to stay on the rehab side, it's better. It's a great program, good Christian based too if you are into that

Q1- The counselors- 90% of them are genuinely here to help you

Q1- They are good with the program

Q1- The people seem like they genuinely care

Q1- The pastor and the gym/fitness program are amazing

Q1- It's comprehensive care, they are dual diagnosis and that's critical

Q1- They give me the help I need

Q1- They're good for me, they're making sure I work the program

Q1- They are very kind and caring

Q1- It did not come up yet

Q1- After treatment did not come up yet

Q1- We did not go over any after treatment

Q1- I am not sure if we talked about a plan for my after treatment

Q1- Not there yet, not sure how long I can be here

Q1- They hav enot said anything about an after treatment plan. No communication- they don't care about people's health issues

Q1- They are very understanding

Q1- They don't help with anything or talk to me about anything. I would not recommend them because of the drama and very inconsistent

Q1- The employees are very friendly

Q1- I needed more of a structured therapy. We went over a treatment plan, not sure if it was after treatment. I would recommend her to certain people that need her type of services

Q1- I would recommend them because you're not stuck in one place, we go to different buildings and stuff

Q1- I would recommend them, I really like my counselor

Q1- I would recommend them because the staff has experience

Q29G--These statements are about Recovery Oriented Treatment Practices with (provider). Please indicate your level of agreement or disagreement with each statement.

Q1- They give you a variety of things to do

Q1- I love how we move from one building to another here

Q1- The girls here are awesome

Q1- They give me a broad spectrum of services and let me choose what I want

Q1- The rules change depending on the staff. After treatment did not come up yet. I would not recommend then because they do not communicate well

Q1- My counselor is good and so are some of the techs

Q1- We did not go over an after treatment plan. They treat you like a normal human being here and are respectful

Q1- I would reccommend them because they help you with your problems at hand

Q1- Reccommend them because they help with my recovery

Q1- I feel like they are just here for money, they don't care

Q1- My therapist is awazing!!

Q1- I would reccommend them because they are kind

Q1- Everyone is really nice

Q1- I don't think we are anywhere near the end of my treatment

Q1- As of now, they won't call me back

Q36A-If yes. what were the issues or problems with services from (provider)?

Q1- There is a lack of treatment planning and coordination, poor communication, and I feel my provider is not a good fit for me

Q1- I don't know my treatment plan, they just told me to sign papers

Q1- I have called several times and left messages and no one has called me back

Q37A-If yes, were you able to resolve these issues or problems with (provider).

Q1- I am looking for a different place for meds

Q1- I am in the middle of trying to work on this

Q1- I did not do anything about it because nothing will be done

Q38-Please share any additional compliments or concerns you have about the services you participate in with (provider)

Q1- My therapist is great!

Q1- They don't judge you, they are very polite

Q1- She is very nice and listens to what I say. She helped me so much and helped me get clean. They are polite and respectful

Q1- It was a very good experience

Q1- I appreciate the services being available

Q1- They might make me go to the partial hospital program and it should be my choice. Great program

Q1- Everyone is really nice

Q1- Both of my therapists are great, I would recommend them

Q1- No one has talked to me about my discharge and I've been here for 60 days

Q38-Please share any additional compliments or concerns you have about the services you participate in with (provider)

Q1- Supervisors are wonderful

Q1- She deals with internal family systems where she works with different parts of your mind. I needed something different. She is very knowledgeable but was not right for me to continue with

Q1- I really like my counselor

Q1- The veterans' program is amazing, it helps us more. I recommend they allow vaping- they could buy it for us on store runs

Q1- Someone stole my cross necklace and I did not get it back. It meant a lot to me and upsets me that someone stole it

Q1- I really like the staff

Q1- The nurses are the best and housekeeping staff is great

Q1- I feel like I have reached my goals, but they will not release me. They are holding me hostage, I feel like a cash cow. They don't listen to me

Q1- My therapist deserves a raise, she goes above and beyond

Q1- I enjoy coming here, I click well with my therapist

Q1- I thank all the staff for everything they have done for me and my family

Q1- I have seen my therapist for years and thanks to her, and Oasis, it has been life changing

Q1- They need to get ahold of me and get a new appointment

Family Survey Findings

Family Survey Process & Findings
The following are C/FST Findings and Recommendations based on the 28 family surveys completed during the 1st Quarter of 2026 for the period from January to March 2026.

Survey Results
Variations in sample characteristics between quarters are represented so that the reader may infer what influences, if any, these variations may have had on member response ratings for the quarter.

1st Quarter 2026 Family Sample Characteristics versus 4th Quarter 2025 Comparison:
1. Higher face-to-face interviews with – 32% (9 of 28) versus 19% (5 of 27).
2. Equivalent ratio of male caregivers – 4% (1 of 28) versus 4% (1 of 27).
3. Similar percentage of child members aged 8 and under – 64% (18 of 28) versus 63% (17 of 27).
4. Higher percent of foster/step/adoptive/caregiver – 4% (1 of 28) versus 0% (0 of 27).
5. Lower ratio of male member service recipients – 54% (15 of 28) versus 63% (17 of 27).
6. Equivalent percent of youths' members receiving IBHS – 4% (1 of 28) versus 4%. (1 of 27).
7. Less members, 32% (9 of 28) versus 44% (12 of 27) receiving services from providers for less than one (1) year.

Note: *Treatment Experiences* and *Provider Recovery Orientation* have been combined, revised, and expanded into a new set of questions – *Recovery Oriented Treatment Experiences* (Question 30a – 30e).

Findings Overview

1. 54% (15 of 28) family/caregivers interviewed reported they *"reviewed their child's insurance benefits and treatment options through Community Care"* during the 1st Quarter. This was 38% (41 of 108) for the calendar year 2025.

11% (3 of 28) of family/caregivers interviewed during the 1st Quarter of 2026 reported they contacted Community Care in the past 12 months, and 100% (3 of 3) *"were satisfied with the level of dignity and respect the staff conveyed."* This indicator was 73% (8 of 11) compared to calendar year 2025.

2. 64% (18 of 28) family/caregivers interviewed during the 1st Quarter of 2026 were aware they could file a complaint or grievance if they needed to. This indicator was 42% (45 of 108) for the calendar year 2025.

3. Family/caregivers are generally pleased with ***Access*** to provider treatment services with 100% (28 of 28) having a positive perception of *'ability to receive help in an acceptable amount of time."* 89% (25 of 28) believed *"their child gets the right amount of help."*

11% (3 of 28) family/caregivers reported *"… barriers prevented their child from getting his/her behavioral needs met."* 0% (0 of 28) of family/caregivers interviewed reported they or their family were experiencing barriers with reading and writing. See Page 49 for member literal comments.

21% (6 of 28) of family/caregivers interviewed reported having to wait *"less than a week for child services"* during the 1st Quarter of 2026. This indicator was 14% (15 of 108) for the calendar year 2025.

54% (15 of 28) of family/caregivers interviewed reported receiving their child's treatment services through telehealth and 100% (15 of 15) were *"…satisfied with their child's telehealth experience."*

4. This quarter, five of six satisfaction indicators under the combined, revised, and expanded ***Recovery Oriented Treatment Experiences*** section were 93% to 100% (26-28 of 28). These include; *"The interventions offered to my child on my child's treatment plan are a good fit for my child and family," "My provider ask questions about my child's physical health," "My provider treats my family with dignity and respect," "The provider site is welcoming and comfortable," "Based on the help my family received, I am likely to recommend (provider) to others,"* and *"..were given a chance to make treatment decisions."*

This indicator is normally low *"(Provider) talks to me and my child about my child's plan for after treatment,"* and is at 35% agreement (10 of 28) for the 1st Quarter of 2026. In the 4th Quarter of 2025, it was at 48% (13 of 27). This indicator is generally low and was 44% (47 of 108) for calendar year 2025.

5. Family/caregivers satisfaction with T***reatment Outcomes*** during the 1st Quarter of 2026 are: 100%(28 of 28) agreeing that *"treatment had improved the overall quality of their child's life a little to much better,"* 89% (25 of 28) agreed that *"as a result of treatment, I feel my child is more hopeful,"* and 93% (26 of 28) stated *"as a result of treatment, I feel my child can function better in their daily life."*

The indicator *"As a result of treatment, I feel my child can deal with problems better"* rose to 100% (28 of 28) in the 1st Quarter of 2026 from 56% (15 of 27) in the 4th Quarter of 2025. This indicator was 69% (74 of 108) for the calendar year 2025.

6. 0% (0 of 28) family/caregivers reported issues or problems with their provider during the 1s Quarter of 2026. This indicator was 5% (5 of 108) for the calendar year 2025.

Recommendations Overview
1. The lowest indicator regarding family/caregivers' perception of satisfaction typically is *"Provider talks to me and my child about my child's plan for after treatment"* but this quarter it is at 100% (28 of 28) compared to the 48% (13 of 27) in the 4th Quarter. This indicator is 44% (47 of 108) for the calendar year 2025 compared to 35% for calendar year 2024.

This indicator fluctuates and this is the first time it has been higher than 48% in the past three years. More provider reviews and discussions are needed to determine what overall improvement can be achieved in this indicator given its importance in recovery and resiliency.

2. An overall summary question (Q39) asks *"Please share any additional compliments or concerns you have about the services your child participates in with…(provider)."* 18% (5 of 28) family/caregivers interviewed answered "yes." The reader is asked to review the many positive family/caregivers' responses on Page 51.

Member Request for Assistance
Upon completing the survey 0% (0 of 0 28 n/a) family/caregiver members surveyed during the 4th Quarter expressed interest in having a provider or MCO concern or issue they shared during the interview referred for immediate handling by Blair HealthChoices.

Quality Audits
Periodically, random quality audits are performed which have the dual purpose of obtaining member feedback regarding the survey process plus confirming the integrity of the survey.

During the 1st Quarter 2026, 3 family quality audits were performed. 100% (3 of 3) family/caregivers felt the length of the survey and number of questions were satisfactory. 100% (3 of 3) family/caregivers were satisfied with the survey process and 100% (3 of 3) family/caregivers felt ok or good about being contacted.

Demographics

*Question 5 Zip Codes, please check your summary for complete break out of your zip codes in your area.

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
	28	**28**	**-**	**-**	**-**
Q6-What type of survey is it?					
Telephone	**19** **67.9%**	19 67.9%	- -	- -	- -
Face to Face	**9** **32.1%**	9 32.1%	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
	28	**28**	**-**	**-**	**-**
Q7-What is your gender?					
Female	**27** **96.4%**	27 96.4%	- -	- -	- -
Male	**1** **3.6%**	1 3.6%	- -	- -	- -
Does not identify with either gender	**-** **-**	- -	- -	- -	- -
Refused to answer	**-** **-**	- -	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
	28	**28**	**-**	**-**	**-**
Q8-What is your child's gender?					
Male	**15** **53.6%**	15 53.6%	- -	- -	- -
Female	**13** **46.4%**	13 46.4%	- -	- -	- -
Does not identify with either gender	**-** **-**	- -	- -	- -	- -
Refused to answer	**-** **-**	- -	- -	- -	- -

Demographics

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
	28	**28**	**-**	**-**	**-**
Q9-How old is the child receiving services?					
5 or under	**6** **21.4%**	6 21.4%	- -	- -	- -
6-8 years	**12** **42.9%**	12 42.9%	- -	- -	- -
9-13 years	**10** **35.7%**	10 35.7%	- -	- -	- -
14 and older	**-** **-**	- -	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	**-**	**-**	**-**
Q10-What is your relationship to the child?					
Parent	**21** **75.0%**	21 75.0%	- -	- -	- -
Grandparent	**3** **10.7%**	3 10.7%	- -	- -	- -
Aunt/Uncle	**-** **-**	- -	- -	- -	- -
Brother/Sister	**-** **-**	- -	- -	- -	- -
Foster Parent	**-** **-**	- -	- -	- -	- -
Adoptive Parent	**-** **-**	- -	- -	- -	- -
Stepparent	**1** **3.6%**	1 3.6%	- -	- -	- -
Legal Guardian	**-** **-**	- -	- -	- -	- -
Other	**3** **10.7%**	3 10.7%	- -	- -	- -

Demographics

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J- uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	**-**	**-**	**-**
Q11-What do you consider the child's race to be?					
Caucasian	**20** **71.4%**	20 71.4%	- -	- -	- -
African American	**-** **-**	- -	- -	- -	- -
Hispanic American	**2** **7.1%**	2 7.1%	- -	- -	- -
Asian/ Pacific Island	**-** **-**	- -	- -	- -	- -
Bi-Racial	**6** **21.4%**	6 21.4%	- -	- -	- -
American Indian/Alaskan Native	**-** **-**	- -	- -	- -	- -
Other	**-** **-**	- -	- -	- -	- -

Family Satisfaction with Community Care

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J- uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	**-**	**-**	**-**
Q12-Community Care is your child's insurance for mental health and substance use services. Have you reviewed your child's insurance benefits and treatment options through Community Care (CCBH)?					
Yes	**15** **53.6%**	15 53.6%	- -	- -	- -
No	**13** **46.4%**	13 46.4%	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J- uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	**-**	**-**	**-**
Q13-Do you know how to contact Community Care's member services if you have a question? (If no offer them a card.)					
Yes	**18** **64.3%**	18 64.3%	- -	- -	- -
No	**10** **35.7%**	10 35.7%	- -	- -	- -

Family Satisfaction with Community Care

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
NA responses reduce total	3	3	-	-	-
Q14-If you contacted Community Care (CCBH) in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you?					
Yes	3 100.0%	3 100.0%	- -	- -	- -
No	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q15-Are you aware of the Complaint and Grievance process through Community Care (CCBH)?					
Yes	18 64.3%	18 64.3%	- -	- -	- -
No	10 35.7%	10 35.7%	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
NA responses reduce total	3	3	-	-	-
Q16-If you filed a Complaint or Grievance within the last 12 months, were you satisfied with how it was handled?					
Yes	3 100.0%	3 100.0%	- -	- -	- -
No	- -	- -	- -	- -	- -

Family Provider Level Analysis

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan- Mar.
Base	28	28
Q17-What is the name of your child's treatment provider?		
ACRP (Alternative Community Resource Program	11 39.3%	11 39.3%
Blair Family Solutions	6 21.4%	6 21.4%
Nulton Diagnostic	9 32.1%	9 32.1%
Evolution Counseling Services	1 3.6%	1 3.6%
Other	1 3.6%	1 3.6%

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J- uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q18-How did you hear about this provider?					
Community Care (CCBH)	- -	- -	- -	- -	- -
Referred by another provider	3 10.7%	3 10.7%	- -	- -	- -
Internet Search	8 28.6%	8 28.6%	- -	- -	- -
Advertisement	- -	- -	- -	- -	- -
Word of mouth	14 50.0%	14 50.0%	- -	- -	- -
Other	3 10.7%	3 10.7%	- -	- -	- -

Family Provider Level Analysis

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.
Base	28	28
Q19-What services does your child currently receive, or has your child received from this provider?		
Blended Case Management (BCM)	1 3.6%	1 3.6%
Family Based MH Services	1 3.6%	1 3.6%
IBHS (BHT, MT, BC)	1 3.6%	1 3.6%
MH Outpatient Therapy	14 50.0%	14 50.0%
Community School Based Behavioral Health (CSBBH)	1 3.6%	1 3.6%
Medication Management	10 35.7%	10 35.7%

Family Provider Level Analysis

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	**-**	**-**	**-**
Q20-How long has your child been receiving services from provider?					
Less than 6 months	**3** **10.7%**	3 10.7%	- -	- -	- -
6 months to 1 year	**6** **21.4%**	6 21.4%	- -	- -	- -
1 to 2 years	**9** **32.1%**	9 32.1%	- -	- -	- -
2 to 3 years	**4** **14.3%**	4 14.3%	- -	- -	- -
3 to 4 years	**-** **-**	- -	- -	- -	- -
4+ years	**6** **21.4%**	6 21.4%	- -	- -	- -
Completed	**-** **-**	- -	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	**-**	**-**	**-**
Q21-My child's provider made me aware of the different treatment services available to best meet my child's needs.					
Yes	**25** **89.3%**	25 89.3%	- -	- -	- -
No	**3** **10.7%**	3 10.7%	- -	- -	- -

89.3% of target rate Y-T-D **Satisfactory**

Family Provider Level Analysis

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
N/A responses reduce total	28	28	-	-	-
Q22-I was made aware of the different providers available for the treatment services that best meet my child's needs.					
Yes	23 82.1%	23 82.1%	- -	- -	- -
No	5 17.9%	5 17.9%	- -	- -	- -

82.1% **of target rate Y-T-D** **Action Required**

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q23-In the last twelve months, was your child able to get the help they needed? (State Question)					
Yes	26 92.9%	26 92.9%	- -	- -	- -
Sometimes	2 7.1%	2 7.1%	- -	- -	- -
Never	- -	- -	- -	- -	- -

Family Access to Services

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q24-How long did you have to wait for you child's services?					
Less than a week	6 21.4%	6 21.4%	- -	- -	- -
1-2 weeks	11 39.3%	11 39.3%	- -	- -	- -
3-4 weeks	2 7.1%	2 7.1%	- -	- -	- -
Longer than a month	9 32.1%	9 32.1%	- -	- -	- -

Family Access to Services

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	-	-	-
Q25A-I feel like my child was able to get the help he/she needed within an acceptable amount of time.					
Yes	**28** **100.0%**	28 100.0%	- -	- -	- -
No	- -	- -	- -	- -	- -

100.0% **of target rate Y-T-D** **Meets Expectations**

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	-	-	-
Q25B-I believe my child gets the right amount of help.					
Yes	**25** **89.3%**	25 89.3%	- -	- -	- -
No	**3** **10.7%**	3 10.7%	- -	- -	- -

89.3% of target rate Y-T-D **Satisfactory**

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	-	-	-
Q26-Did you receive any of your child's treatment services through telehealth?					
Yes	**15** **53.6%**	15 53.6%	- -	- -	- -
No	**13** **46.4%**	13 46.4%	- -	- -	- -

Family Access to Services

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
NA responses reduce total	15	15	-	-	-
Q27-Were you satisfied with your child's telehealth experience?					
Yes	15 100.0%	15 100.0%	- -	- -	- -
No	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q28-Are there any barriers that prevent your child from getting his/her behavioral needs met?					
Yes	3 10.7%	3 10.7%	- -	- -	- -
No	25 89.3%	25 89.3%	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q29-Do you or your child have any difficulties with reading or writing that impacts your ability to understand your treatment?					
Yes	- -	- -	- -	- -	- -
No	28 100.0%	28 100.0%	- -	- -	- -

Family Recovery Oriented Treatment Experiences

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q30A-The interventions offered to my child on my child's treatment plan are a good fit for my child and family.					
Strongly Agree/Agree	28 100.0%	28 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -
Neutral	- -	- -	- -	- -	- -

100.0% **of target rate Y-T-D** **Meets Expectations**

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q30B-My provider asks questions about my child's physical health.					
Strongly AgreeAgree	26 92.9%	26 92.9%	- -	- -	- -
Strongly Disagree/Disagree	2 7.1%	2 7.1%	- -	- -	- -
Neutral	- -	- -	- -	- -	- -

92.9% **of target rate Y-T-D** **Meets Expectations**

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q30C-My provider treated my family with dignity and respect.					
Strongly Agree/Agree	28 100.0%	28 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -
Neutral	- -	- -	- -	- -	- -

100.0% **of target rate Y-T-D** **Meets Expectations**

Family Recovery Oriented Treatment Experiences

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q30D-The provider site is welcoming and comfortable.					
Strongly Agree/Agree	28 100.0%	28 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -
Neutral	- -	- -	- -	- -	- -

100.0% **of target rate Y-T-D** **Meets Expectations**

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q30E-My provider talked to me and my child about my child's plan for after treatment.					
Strongly Agree/Agree	28 100.0%	28 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -
Neutral	- -	- -	- -	- -	- -

100.0% **of target rate Y-T-D** **Meets Expectations**

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q30F-Based on the help my family received, I am likely to recommend (provider) to others.					
Strongly Agree/Agree	28 100.0%	28 100.0%	- -	- -	- -
Stongly Disagree/Disagree	- -	- -	- -	- -	- -
Neutral	- -	- -	- -	- -	- -

100.0% **of target rate Y-T-D** **Meets Expectations**

Family Recovery Oriented Treatment Experiences

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q31-Were you and your child given a chance to make treatment decisions? (State Question)					
Yes	28 100.0%	28 100.0%	- -	- -	- -
No	- -	- -	- -	- -	- -
Sometimes	- -	- -	- -	- -	- -

Family Outcomes

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q32-What effect has the treatment received had on the quality of your child's life? The quality of their life is: (State question)					
Much better	18 64.3%	18 64.3%	- -	- -	- -
A little better	10 35.7%	10 35.7%	- -	- -	- -
About the same	- -	- -	- -	- -	- -
A little worse	- -	- -	- -	- -	- -
Much worse	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q33-As a result of treatment, I feel my child is more hopeful.					
Much better	12 42.9%	12 42.9%	- -	- -	- -
A little better	13 46.4%	13 46.4%	- -	- -	- -
About the same	- -	- -	- -	- -	- -
A little worse	3 10.7%	3 10.7%	- -	- -	- -
Much worse	- -	- -	- -	- -	- -

Family Outcomes

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	**-**	**-**	**-**
Q34-As a result of treatment, I feel my child can function better in their daily life.					
Much better	**15** **53.6%**	15 53.6%	- -	- -	- -
A little better	**11** **39.3%**	11 39.3%	- -	- -	- -
About the same	**-** **-**	- -	- -	- -	- -
A little worse	**-** **-**	- -	- -	- -	- -
Much worse	**2** **7.1%**	2 7.1%	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	**-**	**-**	**-**
Q35-As a result of treatment, I feel my child can deal with problems better.					
Much better	**12** **42.9%**	12 42.9%	- -	- -	- -
A little better	**9** **32.1%**	9 32.1%	- -	- -	- -
About the same	**2** **7.1%**	2 7.1%	- -	- -	- -
A little worse	**-** **-**	- -	- -	- -	- -
Much worse	**5** **17.9%**	5 17.9%	- -	- -	- -

Family Issues and Problems

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it? 1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J-uly-Sept.	4th Qtr Oct.--Dec.
Base	**28**	**28**	**-**	**-**	**-**
Q36-Have you had any issues or problems with (provider)?					
Yes	**-** **-**	- -	- -	- -	- -
No	**28** **100.0%**	28 100.0%	- -	- -	- -

Family Issues and Problems

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J- uly-Sept.	4th Qtr Oct.--Dec.
NA responses reduce total	28	28	-	-	-
Q37-If you had issues or problems with (provider), what were they?					
Lack of treatment planning and coordination	- -	- -	- -	- -	- -
Poor Communication	- -	- -	- -	- -	- -
Frequent Staff Changes	- -	- -	- -	- -	- -
Frequent provider cancellations	- -	- -	- -	- -	- -
Services not available when I needed them.	- -	- -	- -	- -	- -
Not Applicable	28 100.0%	28 100.0%	- -	- -	- -
Other	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J- uly-Sept.	4th Qtr Oct.--Dec.
Base	28	28	-	-	-
Q38-If yes, were you able to resolve these issues with (provider)?					
Yes	- -	- -	- -	- -	- -
No	1 3.6%	1 3.6%	- -	- -	- -
Not Applicable	27 96.4%	27 96.4%	- -	- -	- -

Question 40 can be found in the back with literal questions.

Family Issues and Problems

Counts Break % Respondents	2026 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-Mar.	2nd Qtr Apr.-June	3rd Qtr J- uly-Sept.	4th Qtr Oct.--Dec.
NA responses reduce total	28	28	-	-	-
Q40-If you have shared problems about your provider or managed care company during this survey, are you interested in having your concerns addressed immediately by Blair HealthChoices?					
Yes	- -	- -	- -	- -	- -
No	- -	- -	- -	- -	- -
Not Applicable	28 100.0%	28 100.0%	- -	- -	- -

Question 41-If you wish, I can forward your concerns directly to Blair HealthChoices, but I would need to include your name and information from the survey, which means your comments will no longer be anonymous. This may include discussing your specific concerns with your provider. If you do not wish to have this done all your answers will remain confidential.

Family Literal Comments

Q10A-What is your relationship to the child?

Q1- Godmother
Q1- Godmother
Q1- Godmother

Q11A-What do you consider the child's race to be?

Q17A-What is the name of your child's treatment provider?

Q1- Allison Seltzer

Q18A-How did you hear about this provider?

Q1- The school
Q1- Daycare

Q19A-What service does your child currently receive, or has you child received from this provider.

Q25c-These statements are about your child's Access to services with (provider).

Q1- It was not the provider's fault, it was the mother's fault she is not getting the right amount of services
Q1- To a point, I worry because they change his meds all the time

Q27A-Were you satisfied with your child's telehealth experience?

Q28A-Are there any barriers that prevent your child from getting his/her behavioral needs met?

Q1- Her mom took her out of the school the provider went to

Q29A-Are there any barriers you or your family are experiencing with reading or writing?

Q30G-These next statements are about the child's Recovery Oriented Treatment Experiences.

Q1- Not there just yet

Q1- Recommend because I was satisfied with how they were attentative to her needs

Q1- Not so much since we got him into life skills

Q1- Maybe in the past

Q1- Not right now

Q1- Not yet

Q1- Not there yet

Q1- Not there yet

Q1- They have helped to get him under control. He will be in services for a long time

Q1- I would recommend them because they are very compassionate

Q1- They don't ask about his physical health or discuss after treatment. I would recommend them because the doctor relates with kids really well

Q1- They are very good

Q1- They help us

Q37A-If you had issues or problems with (provider), what were they?

Q38A-If yes, were you able to resolve these issues with (provider)?

Q39-Please share any additional compliments or concerns you have about the services your partipates in with (provider).

Q1- The team we had was amazing. They didn't make ys feel like he was the problem, very welcoming, and gave us a lot of support

Q1- Both her therapists are great!!

Q1- She is a great counselor

Q1- She is very thorough. If we can't go in for an appointment, they will change to telehealth. If we have any issues, we can call and talk to her and she will help whenever

Q1- I really wish they would get his meds correct

Youth Survey Findings

Youth C/FST Survey Process & Findings
The following are C/FST Findings and Recommendations based on the 18 youth surveys completed during the 1st Quarter of 2026 for the period from January to March 2026.

Survey Results
Variations in sample characteristics between quarters are represented so that the reader may infer what influences, if any, these variations may have had on member response ratings for the quarter.

1st Quarter 2026 Youth Sample Characteristics compared to 4th Quarter 2025:
1. Equivalent youth members received telephone interviews – 100% (18 of 18) versus 100% (18 of 18).
2. Less youth members received services for four or more years – 22% (4 of 18) versus 39% (7 of 18)
3. Lower ratio of female treatment recipients – 61% (11 of 18) versus 78% (14 of 18).
4. Lower percentage of youth members under age 17 – 72% (13 of 18) versus 100%. (18 of 18).
5. Higher number of youth members receiving Medication Mgt – 50% (9 of 18) versus 39% (7 of 18).
6. Higher percentage of youth respondents reporting issues/problems with provider 11% (2 of 18) versus 6% (1 of 18).

Note: *Treatment Experiences* and *Provider Recovery Orientation* have been combined, revised, and expanded into a new set of questions – *Recovery Oriented Treatment Experiences* (Questions 30a-30e).

Findings Overview
1. 11% (2 of 18) youths interviewed reported they *"reviewed their insurance benefits and treatment options through Community Care"* during the 1st Quarter 2026. This indicator was 26% (19 of 72) for the calendar year 2025.

2. 0% (0 of 0 18 n/a) of youths interviewed during the 1st Quarter had the need to contact Community Care in the past 12 months and 0% (0 of 0 18 n/a) were satisfied of the level of respect and dignity shown to them.

17% (3 of 18) of youths acknowledge they were aware they could file a complaint or grievance with CCBHO during the 1st Quarter of 2026. This indicator was 36% (26 of 72) for the calendar year 2025.

3. Youths surveyed were satisfied with ***Access*** to provider treatment services with all ten indicators:
89% (16 of 18) felt they were *"getting the help within an acceptable amount of time."* and 83% (15 of 18) felt *"there were no barriers that prevented them from getting their behavioral health care needs met."* 83% (15 of 18) felt *"there are no barriers for them or their family regarding reading and writing."*

94% (17 of 18) of interviewed youths felt they *"were getting the right amount of help"* and 39% (7 of 18) of youths reported *"waiting less than a week"* to receive service. 89% (16 of 18) youths reported *"no problems in getting the help they needed during the past twelve months."* 94% (17 of 18) reported *"their provider made them aware of different treatment services available."* The indicator *"they were made aware of the different providers available for the treatment services that best meet their needs,"* is at 89% (16 of 18).

22% (4 of 18) of youths interviewed during the 1st Quarter reported receiving their treatment services through telehealth and 100% (4 of 4) reported being satisfied with the experience.

4. Youth perceptions of ***Recovery Oriented Treatment Experiences*** are generally good, having 83% to 100% (15-18 of 18) in the five indicators of satisfaction. These include, *"The interventions offered me on my treatment plan are a good fit for me," "My provider treated me with dignity and respect," "My provider asked questions about my physical health," "Were you given a chance to make treatment decisions?"* and *"Based on the help I received, I am likely to recommend (provider) to others."*

"My provider talks to me about my plan for after treatment" was 56% (10 of 18) during the 1st Quarter of 2026. This indicator was 76% (55 of 72) for the calendar year 2025.

5.Youth perceptions of ***Treatment Outcomes*** and satisfaction are 78% (14 of 18) for the indicator and *"As a result of treatment, I feel I can deal with problems better."* The indicator *"As a result of treatment, I feel more hopeful,"* is at 95% (17 of 18) in agreement. The indicators *"As a result of treatment, I feel I can function better in daily life,"* and *"Effect treatment has had on the overall quality of your life is a little to much better,"* are the lowest at 72% (13 of 18).

6.11% (2 of 18) youths surveyed during the 1st Quarter 2026 reported having issues or problems with their provider. This was 4% (3 of 72) for the calendar year 2025.

Recommendations Overview
Behavioral Health providers should continue to address recovery and resiliency factors (Recovery Oriented Systems Indicators ROSI) as members are transitioned into the community and self-help support systems. These include the ROSI and CCISC indicators, developing treatment plans with respect to the member's specific needs and asking the member what goals would help achieve a happy life.

1. The lowest rated indicator for the 1st Quarter is Q11 was 11% (2 of 18) where interviewed youths reported they had not *"reviewed their insurance benefits and treatment options through Community Care."* This indicator was 26% (19 of 72) for the calendar year 2025.

2. An overall summary question (Q39) asks *"Please share any additional compliments or concerns."* 17 % (3 of 18) youths interviewed answered "yes" during the 1st Quarter 2026. Comments are found on page 70.

Member Request for Assistance
Upon completing the survey 0% (0 of 2 excluding 16 n/a) of youths surveyed expressed interest in having a provider or MCO concern or issue they shared during the interview referred for immediate handling by Blair HealthChoices.

Quality Audits
Periodically, random quality audits are performed which have the dual purpose of obtaining member feedback regarding the survey process plus confirming the integrity of the survey.

During the 1st Quarter, No youth quality audits were performed.

Member Comments:
"None."

Demographics

*Question 5 Zip Code, please check your summary for complete break out of your zip codes in your area.

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	18	18	-	-	-
Q6-What type of survey is it?					
Telephone	18 100.0%	18 100.0%	- -	- -	- -
Face to Face	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	18	18	-	-	-
Q7-What is your gender?					
Female	11 61.1%	11 61.1%	- -	- -	- -
Male	6 33.3%	6 33.3%	- -	- -	- -
Does not identify with either gender	- -	- -	- -	- -	- -
Refused to answer	1 5.6%	1 5.6%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	18	18	-	-	-
Q8-How old are you?					
14--15 years	10 55.6%	10 55.6%	- -	- -	- -
16--17 years	3 16.7%	3 16.7%	- -	- -	- -
18--20 years	5 27.8%	5 27.8%	- -	- -	- -
Over 20 years	- -	- -	- -	- -	- -

Demographics

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	18	**18**	**-**	**-**	**-**
Q9-What do you consider your race to be?					
Caucasian	**13** **72.2%**	13 72.2%	- -	- -	- -
African American	**3** **16.7%**	3 16.7%	- -	- -	- -
Hispanic American	**-** **-**	- -	- -	- -	- -
Asian/ Pacific Island	**-** **-**	- -	- -	- -	- -
Bi-Racial	**2** **11.1%**	2 11.1%	- -	- -	- -
American Indian/Alaskan Native	**-** **-**	- -	- -	- -	- -
Other	**-** **-**	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
	18	**18**	**-**	**-**	**-**
Q10-Are you receiving services primary for:					
Mental Health	**18** **100.0%**	18 100.0%	- -	- -	- -
Substance Use Disorder	**-** **-**	- -	- -	- -	- -
Both Mental Health and Substance Use Disorder	**-** **-**	- -	- -	- -	- -

Youth Satisfaction with Community Care (CCBH)

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**18**	**18**	**-**	**-**	**-**
Q11-Community Care is your insurance for mental health and substance use services, have you reviewed your insurance benefits and treatment options through Community Care (CCBH)?					
Yes	**2** **11.1%**	2 11.1%	- -	- -	- -
No	**16** **88.9%**	16 88.9%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**18**	**18**	**-**	**-**	**-**
Q12-Do you know how to contact Community Care's member service if you have a question?					
Yes	**2** **11.1%**	2 11.1%	- -	- -	- -
No	**16** **88.9%**	16 88.9%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
NA reponses reduce toal	-	-	-	-	-
Q13-If you had contact with Community Care (CCBH) in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you?					
Yes	- -	- -	- -	- -	- -
No	- -	- -	- -	- -	- -

- NO Data this quarter

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**18**	**18**	**-**	**-**	**-**
Q14-Are you aware of the complaint and grievance process through Community Care (CCBH)?					
Yes	**3** **16.7%**	3 16.7%	- -	- -	- -
No	**15** **83.3%**	15 83.3%	- -	- -	- -

Youth Satisfaction with Community Care (CCBH)

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
NA reponses reduce toal	-	-	-	-	-
Q15-If you filed a complaint or grievance within the last 12 months, were you satisfied with how it was handled?					
Yes	- -	- -	- -	- -	- -
No	- -	- -	- -	- -	- -

- No Data this quarter

Youth Provider Level Analysis

Counts Break % Respondents	2026 YTD Total	What quarter is it?	
		1st Qtr Jan- -Mar	
Base	18	18	
Q16-What is the name of your treatment provider?			
UPMC Behavioral Health of Alleghenies (HNA)	**3** **16.7%**	3 16.7%	
Nulton Diagnostic	**4** **22.2%**	4 22.2%	
Primary Health Network	**5** **27.8%**	5 27.8%	
Blair Family Solutions	**5** **27.8%**	5 27.8%	
Honeycomb ABA	**1** **5.6%**	1 5.6%	

Youth Provider Level Analysis

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**18**	**18**	**-**	**-**	**-**
Q17-How did you hear about this provider?					
Community Care	**-** **-**	- -	- -	- -	- -
Referred by another provider	**4** **22.2%**	4 22.2%	- -	- -	- -
Internet search	**5** **27.8%**	5 27.8%	- -	- -	- -
Advertisement	**-** **-**	- -	- -	- -	- -
Word of mouth	**7** **38.9%**	7 38.9%	- -	- -	- -
other	**2** **11.1%**	2 11.1%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?	
		1st Qtr Jan- -Mar	
N/A responses reduce total	**18**	**18**	
Q18-What services are you currently receiving, or have received from this provider?			
Medication Management	**9** **50.0%**	9 50.0%	
Community School Based Behavioral Health (CSBBH)	**2** **11.1%**	2 11.1%	
IBHS (BHT, MT, BC)	**1** **5.6%**	1 5.6%	
MH Outpatient Therapy	**6** **33.3%**	6 33.3%	

Youth Provider Level Analysis

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q19-How long have you been receiving services from (provider)?					
Less than 6 months	5 27.8%	5 27.8%	- -	- -	- -
6 months to 1 year	6 33.3%	6 33.3%	- -	- -	- -
1 to 2 years	2 11.1%	2 11.1%	- -	- -	- -
2 to 4 years	1 5.6%	1 5.6%	- -	- -	- -
4+ years	4 22.2%	4 22.2%	- -	- -	- -
Completed	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q20-My provider made me aware of different treatment services available to best meet my needs.					
Yes	17 94.4%	17 94.4%	- -	- -	- -
No	1 5.6%	1 5.6%	- -	- -	- -

94.4% of target rate Y-T-D **Meets Expectations**

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q21-I was made aware of the different providers available for the treatment services that best meet my needs.					
Yes	16 88.9%	16 88.9%	- -	- -	- -
No	2 11.1%	2 11.1%	- -	- -	- -

88.9% of target rate Y-T-D **Satisfactory**

Youth Access to Services

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**18**	**18**	**-**	**-**	**-**
Q22-In the last twelve months, were you able to get the help you needed? (State Question)					
Yes	**16** **88.9%**	16 88.9%	- -	- -	- -
Sometimes	**2** **11.1%**	2 11.1%	- -	- -	- -
Never	**-** -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**18**	**18**	**-**	**-**	**-**
Q23-How long did you have to wait for services?					
Less than a week	**7** **38.9%**	7 38.9%	- -	- -	- -
1-2 weeks	**5** **27.8%**	5 27.8%	- -	- -	- -
3-4 weeks	**1** **5.6%**	1 5.6%	- -	- -	- -
Longer than a month	**5** **27.8%**	5 27.8%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	**18**	**18**	**-**	**-**	**-**
Q24-I feel I am able to get the help I need within an acceptable amount of time.					
Yes	**16** **88.9%**	16 88.9%	- -	- -	- -
No	**2** **11.1%**	2 11.1%	- -	- -	- -

88.9% of target rate Y-T-D **Satisfactory**

Youth Access to Services

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q25-I get the right amount of help.					
Yes	17 94.4%	17 94.4%	- -	- -	- -
No	1 5.6%	1 5.6%	- -	- -	- -

94.4% of target rate Y-T-D **Meets Expectations**

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q26-Did you receive any of your treatment services through telehealth?					
Yes	4 22.2%	4 22.2%	- -	- -	- -
No	14 77.8%	14 77.8%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
NA responses reduce total	4	4	-	-	-
Q27-Were you satisfied with your telehealth experience?					
Yes	4 100.0%	4 100.0%	- -	- -	- -
No	- -	- -	- -	- -	- -

Youth Access to Services

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q28-Are there any barriers that prevent you from getting your behavioral health needs met?					
Yes	3 16.7%	3 16.7%	- -	- -	- -
No	15 83.3%	15 83.3%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q29-Do you have any difficulties with reading or writing that impacts your ability to understand your treatment?					
Yes	3 16.7%	3 16.7%	- -	- -	- -
No	15 83.3%	15 83.3%	- -	- -	- -

Youth Recovery Oriented Treatment Experience

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q30A-The interventions offered to me on my treatment plan are a good fit to me.					
Strongly Agree/Agree	17 94.4%	17 94.4%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -
Neutral	1 5.6%	1 5.6%	- -	- -	- -

94.4% of target rate Y-T-D **Meets Expectations**

Youth Recovery Oriented Treatment Experience

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q30B-My provider asked questions about my physical health.					
Strongly Agree/Agree	15 83.3%	15 83.3%	- -	- -	- -
Strongly Disagree/Disagree	1 5.6%	1 5.6%	- -	- -	- -
Neutral	2 11.1%	2 11.1%	- -	- -	- -

83.3% of target rate Y-T-D **Action Required**

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q30C-My provider treated me with dignity and respect.					
Strongly Agree/Agree	18 100.0%	18 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -
Neutral	- -	- -	- -	- -	- -

100.0% of target rate Y-T-D **Meets Expectations**

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q30D-The physical enviroment is welcoming and comfortable.					
Strongly Agree/Sgree	18 100.0%	18 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -
Neutral	- -	- -	- -	- -	- -

100.0% of target rate Y-T-D **Meets Expectations**

Youth Recovery Oriented Treatment Experience

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q30E-My provider talks to me about my plan for after treatment.					
Strongly Agree/Agree	10 55.6%	10 55.6%	- -	- -	- -
Strongly Disagree/Disagree	5 27.8%	5 27.8%	- -	- -	- -
Neutral	3 16.7%	3 16.7%	- -	- -	- -

55.6% of target rate Y-T-D **Action Required**

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q30F-Based on the help I received, I am likely to recommend (provider) to others.					
Strongly Agree/Agree	17 94.4%	17 94.4%	- -	- -	- -
Strongly Disagree/Disagree	1 5.6%	1 5.6%	- -	- -	- -
Neutral	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q31-Were you given the chance to make treatment decisions? (State question)					
Yes	15 83.3%	15 83.3%	- -	- -	- -
No	1 5.6%	1 5.6%	- -	- -	- -
Sometimes	2 11.1%	2 11.1%	- -	- -	- -

Youth Outcomes

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q32-What effect has the treatment you've received had on the quality of your life? The quality of your life is: (State question)					
Much better	6 33.3%	6 33.3%	- -	- -	- -
A little better	7 38.9%	7 38.9%	- -	- -	- -
About the same	4 22.2%	4 22.2%	- -	- -	- -
A little worse	1 5.6%	1 5.6%	- -	- -	- -
Much worse	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q33-As a result of treatment, I feel more hopeful.					
Much better	7 38.9%	7 38.9%	- -	- -	- -
A little better	10 55.6%	10 55.6%	- -	- -	- -
About the same	- -	- -	- -	- -	- -
A little worse	- -	- -	- -	- -	- -
Much worse	1 5.6%	1 5.6%	- -	- -	- -

Youth Outcomes

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q34-As a result of treatment, I feel like I can function better in my daily life.					
Much better	7 38.9%	7 38.9%	- -	- -	- -
A little better	6 33.3%	6 33.3%	- -	- -	- -
About the same	4 22.2%	4 22.2%	- -	- -	- -
A little worse	1 5.6%	1 5.6%	- -	- -	- -
Much worse	- -	- -	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q35-As a result of treatment, I feel like I can deal with problems better.					
Much better	6 33.3%	6 33.3%	- -	- -	- -
A little better	8 44.4%	8 44.4%	- -	- -	- -
About the same	1 5.6%	1 5.6%	- -	- -	- -
A little worse	3 16.7%	3 16.7%	- -	- -	- -
Much worse	- -	- -	- -	- -	- -

Youth Behavioral Health Provider Issues

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q36-Have you had any issues or problems with (provider)?					
Yes	2 11.1%	2 11.1%	- -	- -	- -
No	16 88.9%	16 88.9%	- -	- -	- -

Counts Break % Respondents	2026 YTD Total	What quarter is it?			
		1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
NA responses reduce total	2	2	-	-	-
Q37-If you had issues or problems with (provider) what were they?					
Lack of treatment planning and coordination	- -	- -	- -	- -	- -
Poor Communication	- -	- -	- -	- -	- -
Frequent Staff Changes	1 50.0%	1 50.0%	- -	- -	- -
Frequent provider cancellations	- -	- -	- -	- -	- -
Services not available when I needed them.	- -	- -	- -	- -	- -
Other	1 50.0%	1 50.0%	- -	- -	- -

Youth Behavioral Health Provider Issues

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
NA responses reduce total	2	2	-	-	-
Q38-If yes, were you able to resolve these issues with (provider)?					
Yes	- -	- -	- -	- -	- -
No	2 100.0%	2 100.0%	- -	- -	- -

Q39- Listed in back with literal comments

Counts Break % Respondents	2026 YTD Total	What quarter is it? 1st Qtr Jan--Mar	2nd Qtr Apr--Jun	3rd Qtr Jul- -S...	4th Qtr Oct--Dec
Base	18	18	-	-	-
Q40-If you have shared problems about your provider or managed care company during this survey, are you interested in having your concerns addressed immediately by Blair HealthChoices?					
Yes	1 5.6%	1 5.6%	- -	- -	- -
No	- -	- -	- -	- -	- -
Not Applicable	17 94.4%	17 94.4%	- -	- -	- -

***Question 41-If you wish, I can forward your concerns directly to Blair HealthChoices, but I would need to include your name and information from this survey. This means your comments would no longer be anonymous. This may include discussing your specific concerns with your provider. If you do not wish to have this done, all your answers will remain anonymous.**

Youth Literal Comments

Q9A-What do you consider your race to be?

Q15A-If you filed a compliant or grievance within the last 12 months, were you satisfied with how it was handled?

Q16A-What is the name of your treatment provider?

Q17A-How did you hear about this provider?

Q1- It was through my work
Q1- My parents started me there

Q18A-What service are you currently receiving, or have received from this provider?

Q27A-Were you satisfied with your telehealth experience?

Q28A-Are there any barriers that prevent you from getting your behavioral health needs met?

Q1- We have problems with the pharmacy
Q1- Sometimes he gets set up with a program and the program turns him down
Q1- Sometimes the programs he's set up with don't always work out

Q29A-Do you have difficulties with reading or writing that impacts your ability to understand your treatment?

Q1- Her level of intellectual ability
Q1- Sometimes I just can't understand what I read

Q30G-These statements are about the Recovery Oriented Treatment Experiences with provider.

Q1- We do not go over the plan much. They just ask how she is feeling. They have not talked to me about an after treatment plan
Q1- He has a long way to go before he is ever done
Q1- He won't be done for a long time
Q1- I do not recall if my provider asks about my physical health
Q1- They may have asked about my physical health but I do not remember
Q1- We are more in the present of what we are doing
Q1- They have not discussed this at all
Q1- We are kind of discussing this now

Q37A-If you had issues or problems with (provider) what were they?

Q1- There is a lack of treatment planning and coordination, as well as poor communication, frequent staff changes, and lack of understanding

Q38A-If yes, were you able to resolve these issues with (provider)?

Q1- Nothing has been done, the problem is always there

Q1- There is nothing I can do about staff changes

Q39-Please share any additional compliments or concerns you have about the services you participate in with (provider).

Q1- I think the doctor has moments when she does try, but she is not understanding my daughter and there is more they can do

Q1- They are wonderful. I would highly recommend them to any family in need

Q1- They always pick things that work for her

Provider Responses

Provider Responses to 4th Quarter/Annual 2025 (October-December) C/FST Data

Blair HealthChoices appreciates the support and ongoing cooperation providers have demonstrated in working with the Blair County Consumer/Family Satisfaction Team (C/FST). All participating providers have access to the comprehensive quarterly Blair County C/FST Report and its accompanying Public Document through the Blair HealthChoices website.

Providers also receive quarterly individual summary counts and response percentages relevant to any adult, family and youth surveys completed during the quarter.

The C/FST is extremely impressed and pleased with the time, effort, and quality of provider responses to the C/FST data. It is recognized that providers necessarily contend with a host of regulatory, clinical, and operational issues and we value both their time and commitment.

Please review the following provider comments:

Provider 1:
"OP Director and OP Supervisor will discuss barriers to discussing discharge planning and after care treatment during individual and group supervision. Team/clinician will continue to review aftercare plans during each treatment plan review and as client/families make progress towards their therapeutic goals. Additionally, plans for discharge are reviewed in therapy sessions and weeks leading up to discharge as well as ongoing during the treatment process. IBHS Director will also review barriers to discussing discharge and aftercare treatment during supervisions with the IBHS team. This has been an area that (provider) has needed to address yearly and the continued consensus from the OP clinicians remain that clients become anxious discussing discharge plans for after care if they are newer patients as they are attempting to build rapport. Also noted, some IBHS families resist discussion based on the expectation that the client will be nearing discharge at the time aftercare plan is being reviewed."

"Clinicians review additional treatment providers and resources during the intake process when the client signs the Freedom of Choice consent. Clinicians also discuss higher levels of care, resources, and available local groups that can assist in their treatment process. OP Director will review and problem solve with the team to ensure they are verbalizing it more clearly to the clients during the intake process when signing the Freedom of Choice consent. "

"Each Quarterly result of the C/FST are reviewed at IBHS/Outpatient Group Supervisions with the team and the team has been collaborating on how we can reach all of the markers that were identified in the survey. I do believe the OP/IBHS teams are discussing the markers that were scored low during intake and treatment plan updates, but I am not sure how the information discussed is not being received well by the consumers. OP Director and OP Supervisor will continue to discuss and problem solve with the clinicians"

Provider 2:
"The only area that required a response for 2025, across all 3 sets of surveys was "my provider talks to me about a plan for after treatment'.

We would like to note that there has continued to be improvement in these scores over the last several years. In the family surveys the score improved from 14.3% in 2022 to 34.8% in 2023 to 42.1% in 2024 and to 64.3 % in 2025. In the adult surveys the score improved from 33.3% in 2022 to 57.1% in 2023 to 59.1% in 2024 and to 66.7% in 2025. In the youth surveys the score improved from 52.6% in 2022 to 70.8% in 2023 but saw a decline in 2024 to 55%, in 2025 this increased to 76.5%. These are the highest scores we have had in this area and continue to be a focus of improvement. As said previously, this has been a focus of training, changes to forms and wording and is a frequent topic in staff meetings and supervisions. We would like to note that we feel the responses from clients that bring the average down below benchmark come primarily from medication management and outpatient. All of our community-based services now have a model where service is intended to be time limited and so aftercare planning is more naturally occurring regularly. Medication management and OP are often the aftercare plan for

other higher levels of care and therefor do not always lend to aftercare planning for members that have more chronic mental illness. Particularly with medication management, this is often times a lifelong service that is needed and the literal comments from the clients often reflect that very thing.

"We are pleased to see that the other area we fell below benchmark in 2024 has improved for 2025, "my provider talks to me about my physical health". This is something that we focused on in 2025 and it did show improvement. We will continue to give this feedback to our staff in hopes that it can move from satisfactory to met in 2026."

Provider 3:
Q29D-My provider talks to me about my plan for after treatment. (Adult)
"To ensure that this item is addressed, we will begin to create and implement a more intensive transition planning protocol to occur within the intake. Additionally, we will require continuous aftercare discussion be implemented every ninety (90) days and at least once thirty (30) days prior to discharge."

"Will seek to provide additional person-centered discharge planning to staff; seek to have specific motivational-interviewing training to enhance engagement for transition planning and ensure that this metric is reviewed during supervisions with staff."

Q29D-My provider talks to me about my plan for after treatment. (Adult)
"We will seek to increase positive responses (e.g., "Yes") to Q29D by 15-20% within 6–12 months."
"There were no additional comments as it relates to this question to provide additional insight."

Q21-My child's provider made me aware of the different treatment services available to best meet my child's needs. (Family)
"Based on the responses, we have decided to create a "service overview protocol" that will be implemented at every OP intake that reviews the current treatment options available to children, based on their current needs. Providers will seek to review the current services offered at (provider) with every client."
"Review the current (provider) website with clients to ensure that they know of the additional programs available and the region in which they are offered.".

Q22-I was made aware of the providers available for the treatment services that best meet my child's needs. (Family)
"The (provider) agency created the "Referral Decision Tree". This academic and clinically based form reviews significant behavioral and mental health markers for individuals to ensure that they are referred for the most appropriate programs for treatment. Providers will seek to review the current referral decision tree with children's guardians to increase awareness of different treatment options available."

Q25A-I feel like my child was able to get the help he/she needed within an acceptable amount of time. (Family)
"With this, we find that there needs to be both education to the population that is served and then an internal standard, which is clear across all departments. We find that there needs to be an overlapping of the two educational pieces (both to individuals served and to staff) to increase overall awareness. We have found that the combination of both will allow for more understanding across all platform.".
"For internal, we need to ensure that referrals, intakes and appointments are occurring within the appropriate timeframe to ensure access to care. We additionally recognize that through the additional monitoring of provider caseload with our current RVU model will allow for services to be implemented and started within a shorter window of time.".

Q25B-I believe my child gets the right amount of help. (Family)
"To ensure that guardians are aware of current treatment clear documentation of service frequency, clinical rationale for level of care and measurable goals tied to service intensity will be reviewed. Although all information is recorded for intake purposes, clinicians and staff can sometimes forget to ensure that this information is provided to guardians. At the end of the first session with (provider) staff, staff will now review documentation as it relates to treatment planning practices, so guardians are aware of the intensity and frequency at which services are occurring to meet the current needs identified."

Provider 4:
Q29D-My provider talks to me about my plan for after treatment
"Goals are set in our treatment plan process and once a patient has successfully met treatment outcomes we discuss next steps in the end of care planning. Whenever possible, the provider and patient will have a documented conversation about the end of care. The process of ending care should be carefully considered and will provide reasonable notice. This allows for patient to request to return to treatment and request medications if needed. Treatment recommendations and education will be made clear to the patient and include potential risks of not continuing in treatment. This should occur in a face-to-face visit whenever possible. Resources for treatment should be provided to assist the patient in their next steps. The patient should understand how to request a copy of their records to be released. The patient is welcome to return to services at any time."

Q25B-I believe my child gets the right amount of help
"Providers have a list of community resources to provide patients and families, they encourage involvement with school districts, case managers, and interdisciplinary teams both in and out of our Network. It is our goal to ensure open lines of communication and take a holistic approach to treatment."

Q30A-The interventions offered to my child on my child's treatment plan are a good fit for my child and family.
"Providers encourage the utilization of therapy and if unavailable at our site we refer to sister sites in our Network, or community resources. Providers have a list of community resources to provide patients and families, they encourage involvement with school districts, case managers, and interdisciplinary teams both in and out of our Network. It is our goal to ensure open lines of communication and take a holistic approach to treatment."

Q30B-My provider asks questions about my child's physical health
"Our clinical staff are required to ask about the patient's PCP, last physical exam during the rooming process. The provider reviews this with the patient, this is standard in our visit. We review that information in the chart during random quarterly compliance audits."

Q30C-My provider treated my family with dignity and respect
"It is (provider's) core value to treat all patients with dignity and respect. We value diversity and inclusivity and encourage open voices and autonomy in healthcare decisions. We discuss our core values at each staff or provider meeting, and have this displayed in our employee areas. We utilize Google reviews as well as internal patient satisfaction surveys to obtain feedback and address patient concerns in a timely fashion. This information is provided to clinicians and addressed if action is warranted. We will continue to utilize these methods for improvement and work to increase this patient satisfaction."

30D-My provider talked to me and my child about my child's plan for after treatment.
"Goals are set in our treatment plan process and once a patient has successfully met treatment outcomes we discuss next steps in the end of care planning. Whenever possible, the provider and patient will have a documented conversation about the end of care. The process of ending care should be carefully considered and will provide reasonable notice. This allows for patient to request to return to treatment and request medications if needed. Treatment recommendations and education will be made clear to the patient and include potential risks of not continuing in treatment. This should occur in a face-to-face visit whenever possible. Resources for treatment should be provided to assist the patient in their next steps. The patient should understand how to request a copy of their records to be released. The patient is welcome to return to services at any time."

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Q25B-I believe my child gets the right amount of help
"Providers have a list of community resources to provide patients and families, they encourage involvement with school districts, case managers, and interdisciplinary teams both in and out of our Network. It is our goal to ensure open lines of communication and take a holistic approach to treatment."

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Q30C-My provider treated my family with dignity and respect
"It is (provider's) core value to treat all patients with dignity and respect. We value diversity and inclusivity and encourage open voices and autonomy in healthcare decisions. We discuss our core values at each staff or provider meeting, and have this displayed in our employee areas. We utilize Google reviews as well as internal patient satisfaction surveys to obtain feedback and address patient concerns in a timely fashion. This information is provided to clinicians and addressed if action is warranted. We will continue to utilize these methods for improvement and work to increase this patient satisfaction."

30D-My provider talked to me and my child about my child's plan for after treatment.
"Goals are set in our treatment plan process and once a patient has successfully met treatment outcomes we discuss next steps in the end of care planning. Whenever possible, the provider and patient will have a documented conversation about the end of care. The process of ending care should be carefully considered and will provide reasonable notice. This allows for patient to request to return to treatment and request medications if needed. Treatment recommendations and education will be made clear to the patient and include potential risks of not continuing in treatment. This should occur in a face-to-face visit whenever possible. Resources for treatment should be provided to assist the patient in their next steps. The patient should understand how to request a copy of their records to be released. The patient is welcome to return to services at any time."

Provider 5:
"The program will continue to utilize Client handbook, program schedules, clinical and CM documentation – all methods in which clients are able to obtain the variety of treatment services available to them while in our treatment program as well as documentation of what was offered to them."

"Realtime feedback from surveyors may be beneficial in implementing changes and may yield data reflecting improved results between quarterly scores. Furthermore, this survey is representative of 2 of the 4 quarters for the year. Case Management documentation within the chart reflects all of the services available and/or scheduled for aftercare. It is possible that at the time of the survey, aftercare plans have not been arranged and therefore the client would not have had this information. Aftercare plans / providers would be identified on their Discharge Management Plan provided to all clients around time of discharge. Appropriate services and providers available would be tailored to the client's unique discharge planning and needs and may not have been identified at time of survey."

"Further information may be needed to better respond to this. However, the interpretation being responded to is that this is for aftercare planning. Case Management documentation within the chart reflects all of the providers available and/or scheduled for aftercare. It is possible that at the time of the survey, aftercare plans have not been arranged and therefore the client would not have had this information. Aftercare plans / providers would be identified on their Discharge Management Plan provided to all clients around time of discharge."

" Acceptable amount of (waiting appointment) time is subjective. Our LOS is based on individualized need as well as evidenced based treatment modalities and most current research available regarding most effective treatment outcomes. The program will continue to utilize an individualized approach to treatment stays to meet as many needs as reasonably possible while in this level of care. When needs are unable to be met or are not reasonable within this level of care, referrals will be made as part of the discharge management plan when appropriate."

"Every treatment plan is individualized to the best of our ability (to ensure member is receivin the help they need). Treatment team meetings are held weekly, individual sessions are occurring weekly, small clinical groups occur a minimum of 5 times per week in addition to paraprofessional programming through life skills and BHT programs. As we adapt to upcoming ASAM alignment changes, our programming will continue to be aligned with ASAM and industry standards of treatment expectations / programming."

" The program continues to utilize interventions (that) are individualized and developed with the client and clinician (to ensure a good treatment fit). Include evidenced based practices such as MI, DBT, CBT and trauma informed care. Training efforts will continue as evidenced by training records located within our Relias training system.".

"Chart audits will continue to be conducted to ensure compliance with history and physical exams completed by the provider within 24 hours of admission."

"Staff will continue to complete mandatory trainings as well as offered supplemental trainings regarding client engagement, respect, unconscious bias and boundaries. All clients are provided with an opportunity to file a grievance at any time if they feel their rights have been violated with includes but not limited to being treated with dignity and respect. "

"It may be beneficial to have meetings with the surveyors to discuss how the questions could be worded in order to better capture accurate information. For example, physical health is reviewed multiple times throughout the admission process as well as during their stay in treatment as appropriate. This is not something that would be addressed by a clinician but may be facilitated by the clinician connecting the client to the medical provider when needed but is also carried out in other ways such as during med passes with nursing and sick call requests."

Blair County C/FST Response – This is a great suggestion, and we believe it would be helpful to strive to have all stakeholders concur with proper phraseology to ensure the efficacy, accuracy and usefulness of collected information.

Provider 6:
"Based on the Adult Providers survey results, questions 21 and 29D, we will be making the following improvement efforts.
Q21- Discuss and give the clients resource information during intake assessments, individual sessions, and during discharge planning sessions to ensure that the clients are aware of the different providers available for the treatment services to best meet their needs. There is a resource document in each intake packet.
Q29D- Providers will discuss the client's plan for after treatment during discharge planning sessions. A smart phrase was added to EPIC note to alert therapists to complete.

Based on the Family provider survey results, Questions 21, 22, and 30D, we will be making the following improvement efforts
Q 21- Discuss and give the clients resource information during intake assessments, individual sessions, and during discharge planning sessions to ensure that the clients are aware of the different providers available for the treatment services to best mee their needs.
Q22- Discuss and give the clients resource information during intake assessments, individual sessions, and during discharge planning sessions to ensure that the clients are aware of the different providers available for the treatment services to best meet their needs. There is a resource document in each intake packet.
Q30D- Providers will discuss with the child and parents the child's plan for after treatment during discharge planning sessions. A smart phrase was added to EPIC note to alert therapists to complete."

Provider 7:

Youth Survey: Q30-D My provider talks to me about my plan for after treatment.

Response: This was an identified need that was addressed through training in the November 2025 Roaring Spring Site Meeting. Examples were given of where and how to document within the Individual Service Plan (ISP) and Assessment within our current electronic health record the discussion of transition/discharge planning. The 2025-2026 training schedule included training related to setting person-centered treatment goals.

Adult Survey: Q21 I was made aware of the different providers available for the treatment services that best meet my needs.

Response: The following information is part of consent for services - Freedom of Choice in Mental Health and Substance Use Disorder Services:)Provider) offers a range of mental health and substance use treatment programs that are also available from other agencies and private practitioners. You have the option to select a provider of your choice. If you would like information about other providers, you can coordinate with a (provider) staff person. Navigators assist with referrals to other providers, as needed.

Adult Survey: Q29-B My Provider asked questions about my physical health

Response: Physical health integration remains a focus for (provider) Within thirty days of an assessment and at least once yearly, a physical health wellness screen and flow sheet (including vitals), is to be completed in alignment with Behavioral Health Home Plus recommendations. Wellness carts are provided at each clinic and include information on topics related to tobacco cessation, hypertension, and diabetes.

Prior to psychiatric medication services, a nurse meets with the client and obtains vitals and other pertinent health issues. We offered two choices in the 2025-2026 training schedule under the primary care and integration section, smoking cessation and preventing diabetes, to assist clinicians with knowledge related to these two primary health concerns.

Adult Survey: Q29-D My provider talks to me about my plan for after treatment.

Response: This was an identified need that was addressed through training in the November 2025 Roaring Spring Site Meeting. Yearly training is provided on relevant topics. Information is disseminated and mini training/demonstrations also occur at monthly mental health outpatient site meetings.

Provider 8:

“Responses are shared with the management team. Actions taken in specific departments are dependent upon consumer results/scores for each department referenced. Results are utilized as quality initiative information to make improvements in the facility.

Most results are positive. Every individual that is admitted has a history and physical, so it is a bit odd that so many say their physical health was not addressed.”

Community Care's Response

Community Care Response to 4th Quarter/Annual 2025 C/FST Data

Community Care reviews the quarterly C/FST data in several ways and responds, if applicable. The first review is directed toward questions that are related to Community Care while the second review looks at the systemic performance of their network of participating providers.

Please review the MCO comments below:

Community Care appreciates the opportunity to respond to The Center for Behavioral Health Data Research (CBHDR)'s CFST Survey Calendar Year End Report for 2025 regarding these areas not meeting benchmark:

Provider Analysis
I was made aware of the different providers available for the treatment services that best meet my needs.
Adult: 77.8%
Family: 82.2%
Access to Services
I believe my child gets the right amount of help.
Family: 84.3%
Recovery-Oriented Treatment Experiences
My provider asked questions about my physical health.
Adult: 82.1%
My provider talks to me about my plan for after treatment.
Adult: 68.9%
Family: 43.5%
Youth: 76.4%

Reviewing the members surveyed, it is noted that approximately 30% of adults, 38% of families, and 43% of youth identified Methadone Maintenance or Medication Management as the Level of Care (LOC) or service received. Community Care acknowledges that these particular LOCs are often long-term if not life-long for many members due to their diagnosis; thus, the provider talking with them about their plan for after treatment might not be as applicable as other time-limited or shorter designed services. Members' thoughts on this were evident within some of the literal comments they made as well.

Listed below are the interventions/actions that Community Care has/will implement to address the area that did not meet benchmark.

Provider Analysis/Access to Services
Community Care Actions/Interventions:
1. Community Care's Customer Service continues to make welcome calls to newly enrolled Community Care members to acquaint them with Community Care. Customer Services shares information on the website that members can access to learn more about various levels of care and who provides those services.
2. Community Care's website includes information for a member to call Community Care for assistance with finding a provider as well as offers an online directory, HYPERLINK "https://members.ccbh.com/find-provider"Find a Provider: HealthChoices Members - Community Care. Members are able to search for providers accepting new patients, offers telehealth, location, language spoken, discipline, and gender of provider. Members searching for providers of child and adolescent services are able to see available appointments reported by the provider.
3. Information, including how members can contact Community Care to assist with obtaining treatment services was distributed in February 2026 at HOPE Drop-in, Healthy Community Living, Center for Community Action,

St. Vincent DePaul and Blair HealthChoices' Care Coordinators for them to share with Blair Medicaid funded individuals.
4. In the last year, the ASAM Learning Collaboratives for Level 1 and 2 community-based services followed the prior Learning Collaboratives for Level 3 residential services which highlighted education on different levels of care and appropriateness of services to meet the needs of our members. These Learning Collaboratives will aid providers in educating members on available SUD services to meet their needs.
5. One of Community Care's Care Managers goes to Pyramid every other week and to Cove Forge once per month to meet with adult members and conduct readmission interviews. During those meetings, the Care Manager shares resources about treatment options.
6. During various LOC meetings, there are opportunities where providers within our network are able to share unique services they provide as well as capacity so that providers can help refer members to services that may better meet their needs or have availability.

7. During the Provider Advisory Committee (PAC) meeting in March 2026, discussion occurred with providers of the importance of interagency treatment team meetings and collaborating with Care Managers on complex cases to aid in accessing services.
8. Regarding Intensive Behavioral Health Services (IBHS) waitlists, Care Managers outreach to families to assist with linkages to other services while waiting for an opening with an IBHS provider.
9. In 2026, education on the Child and Adolescent Social Service Program (CASSP) Principles with a focus on the least restrictive LOC to address the needs and the importance of the family's role and participation in treatment will be occurring during CASSP meetings and applicable treatment team meetings.
10. During the complaint process, the Quality Management Clinician will ask the member or family if they need any assistance with their treatment services, which may include referrals for services. If the member identifies a need, a referral is made for a Care Manager to follow up with the member or family to help find available treatment options to meet their needs.

Recovery-Oriented Treatment Experiences

Community Care Actions/Interventions:

Community Care has established numerous Recovery and Wellness Initiatives to facilitate change in Behavioral Health Systems of Care that support recovery, health, and wellness. This work is grounded in the belief that recovery from mental health and substance use conditions is not the privilege of a few but a possibility for everyone. Recovery is seen as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential (SAMHSA, 2012). Community Care's mission is to improve the health and well-being of the community through the delivery of effective and accessible behavioral health services. To facilitate these principles within Blair County, there have been several long-term projects and activities, as well as some newer implemented ones, including:

1. In 2024, the BCM APA kicked off with the five BCM providers who identified a champion within their agency to focus on quality outcomes with our high-risk population with a yearlong Learning Collaborative. Trainings have occurred based on High-Fidelity Wraparound Principles in Case Management focusing on the phases as well as integrating the Core Four Principles. Throughout the Learning Collaborative there have been discussions related to preparing members for independence after discharge from services. There have been reports by these Champions of positive interactions with members of talking about their needs and abilities, which led to successful discharges with a focus on how to be successful following discharge. In 2025, this training was offered to all BCMs for the three providers participating in a monthly PMPM. Monthly consultations occur with these providers to continue work on implementation of this model within their daily service delivery.
2. Community Care developed a document for members that addresses what to do/what to expect after returning from inpatient or other residential settings with the assistance of our Member and Family Advisory Boards. These resources can be found at HYPERLINK "https://members.ccbh.com/uploads/files/What-to-Expect-When-My-Child-Comes-Home-from-the-Hospital-04042025.pdf"What-to-Expect-When-My-Child-Comes-Home-from-the-Hospital-04042025.pdf and HYPERLINK "https://members.ccbh.com/uploads/files/Community-Care_Leaving-the-Hospital-Checklist_PR2-SH.pdf"Community-Care_Leaving-the-Hospital-Checklist_PR2-SH.pdf.
3. In addition to the above resources, the following is a resource related to discharge management planning that is located for members to access on Community Care's website: HYPERLINK "https://members.ccbh.com/health-topics/resources/discharge-management-plans-and-your-medicine"Discharge Management Plans and Your Medicine: HealthChoices Members - Community Care

4. Community Care reviews aftercare planning during Family Based Mental Health Services (FBMHS) treatment team meetings as well as through other LOC and systemwide meetings and via email blasts to the entire network of independent outpatient practitioners.
5. Related to IBHS, Care Managers complete chart collaborative sessions with the providers and discuss the Core Four Clinical Model with providers and how they are focusing on titrating and aftercare planning with members and their families. Additionally, Community Care's Professional Advisor reviews IBHS packets including areas of Length of Stay and how providers are titrating services and working collaboratively with families for discharge.
6. Discharging providers are expected to engage in active discharge planning as part of transitioning from their service which includes what aftercare services a member may want or need and any appointments of follow-up services should be scheduled prior to discharge. Care Managers discuss this with providers during continued stay and discharge reviews. If providers do not secure aftercare plans for members, then a Provider Performance Issue (PPI) is recorded in our internal database. If providers trend related to a PPI then a Quality Improvement Plan is requested from the provider to address.
7. Community Care's Project Director of Substance Use Disorder Services and Recovery provided a training entitled: "Navigating Change: Effective Strategies for Transition Planning" in May and October 2025.

8. In January and February 2026, three trainings were offered to Blair inpatient (mental health and substance use) as well as ambulatory providers on "Discharge Planning from Inpatient," which included actively engaging the member in the process.
9. Community Care's Quality Department completes routine record reviews every year on various LOCs. During these record reviews providers are reminded that active discharge planning throughout treatment should be discussed with members and their families as well as physical health is be reviewed at intake/assessment, coordination with Primary Care Physician (PCP) and addressed further accordingly to the specific LOC. Selected providers from LOCs were reviewed and included evidence of documented aftercare planning and discussion of physical health with members within charts. The following network average of 2025 reviewed providers per LOC are as follows:

BCM
1. Active discharge planning 72% an increase from 51% in 2024
2. PCP Coordination 83% a decrease from 86% in 2024
3. Service plan includes strategies for member to access medical and dental resources 94% an increase from 79% in 2024

FBMHS
1. Active discharge planning 100% an increase from 98% in 2024
2. PCP Coordination 100% an increase from 95% in 2024
3. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) screenings 100% in 2025 and 2024

IBHS
1. Active discharge planning 100% an increase from 80% in 2024
2. PCP Coordination 100% an increase from 90% in 2024
3. EPSDT screenings 100% an increase from 80% in 2024

Outpatient Practitioners
1. Active discharge planning 92% an increase from 57% in 2024
2. PCP Coordination 84% an increase from 20% in 2024

Outpatient Mental Health Clinics
1. Active discharge planning 74%
2. PCP Coordination 77%
3. EPSDT screenings 40%

School-Based Mental Health Outpatient
1. Active discharge planning 82% an increase from 59% in 2024
2. PCP Coordination 93% an increase from 88% in 2024

School-Based SUD Outpatient
1. PCP Coordination 50% in 2025 an increase from 40% in 2024

10. Healthwise is a free app offered for Community Care members with can be found at HYPERLINK "https://www.healthwise.net/upmchealthplan/Content/CustDocument.aspx?USE_LIST_XML=&XSL=CD.FRONTPAGE.XSL&sv=438e83df-fbb6-468f-9564-1132e5ffd9ba"Healthwise by WebMD Ignite Knowledgebase, which offers resources for members to make better health decisions. Available resources include topics and videos on various health conditions, wellness and prevention, life stages, etc. Additionally, there are tools to check symptoms, make a decision to get information and compare options, as well as interactive tools regarding health and fitness, lifestyle checkups, and pregnancy. This resource will be shared in upcoming provider meetings as well as emailed out for providers to share with members.
11. BCM and Methadone Clinic providers participate in the Behavioral Health Home Plus (BHHP) model. This model enhances the capacity of behavioral health providers to assist individuals with identifying physical health and wellness challenges and activating members to become better informed and more effective managers of their overall health.

12. Integrated Care Plans (ICPs) are a project that focuses on greater integration and coordination of PH-MCOs and BH-MCOs. With this project, Community Care collaborates with members directly in addition to their behavioral health providers and PH-MCOs to address their physical and behavioral health.

Community Care looks forward to continuing our collaboration with The Center for Behavioral Health Data Research and Blair HealthChoices to ensure our members are receiving the most effective and recovery-oriented services. We will continue to integrate feedback from these surveys into our actions and interventions. If you have any suggestions, comments, or questions, please contact me at HYPERLINK "mailto:buseckr@ccbh.com"buseckr@ccbh.com.

Technical Notes

Technical Notes

A. Projected Surveys – January 1, 2026 – December 31, 2026

The Center for Behavioral Health Data Research, Inc. has been contracted by Blair HealthChoices to conduct 462 general-purpose and 100 special focus surveys between January 1, 2026, and December 31, 2026.

The targeted surveys for the calendar year 2026 are 462 general-purpose and 100 special focus surveys between January 1, 2026, and December 31, 2026. This represents approximately 2.4% of Blair County's HealthChoices membership and approximately 13.8% of individuals receiving behavioral health services.

B. Focus

The survey activity includes 462 general purpose surveys (304 adult, 70 youth and 88 families) in addition to 100 special focus surveys. Any special focus surveys not completed will be added back into the general-purpose survey numbers to ensure that a minimum of 562 surveys is completed. The Blair County C/FST will continue achieving a representative sample of all service levels, age groupings, and providers.

C. C/FST Survey Process

The Center for Behavioral Health Data Research, Inc. (CBHDR) was contracted by Blair HealthChoices to provide Consumer and Family Satisfaction Team (C/FST) administration and evaluation services using surveys to assess member satisfaction and outcomes of mental health and drug and alcohol treatment services provided by Community Care's participating providers. The process includes conducting telephone and face-to-face interviews, collecting and analyzing the survey data, and the distribution of findings. The Center for Behavioral Health Data Research does not provide treatment services and thus is able to provide unbiased data collection and analysis.

The survey instruments were developed under the guidance and direction of a ***Blair County C/FST Advisory Committee*** consistent with the requirements and guidelines of DHS's Appendix L. The Committee is comprised of individuals representing Community Care adult, parent/family, and youth membership, and staff members of Blair HealthChoices, Community Care, and The Center for Behavioral Health Data Research, Inc. including the Blair County C/FST Program Director.

Please note that adult, family, and youth survey questions are reviewed and evaluated for their relevance and effectiveness by the Advisory Committee and Blair HealthChoices; additions, deletions and changes are usually made to the questionnaires at the start of a new calendar year in January.

Surveys are completed via two methods. The first method involved surveyors making visits to service area providers to conduct surveys with any Community Care members who happened to be at the provider during that time and who wished to participate in the survey. The second method involved calling Community Care members and offering to do face-to-face or phone surveys with them.

The interview questions are designed to determine member satisfaction and perceptions of Community Care (the MCO), provider access, treatment experiences, recovery-oriented practices, and outcomes. Care has been taken to ensure that collection and analysis is standardized, accurate and provides formative reliable data on critical system indicators that can be used to drive change and improvement.

Many of the questions incorporate the Recovery Oriented System Indicators (ROSI) including those under: Validated Personhood, Person Centered Decision Making & Choice, Self –Care, Wellness & Meaning, Rights & Informed Consent, and Treatment Options as these primarily relate to the managed care organization and provider practices. The C/FST added questions from ROSI that address community support and infrastructure including those under: Community Integration, Social Relationships, Basic Life Resources, and Peer Support & Self-Help.

The member responses and results of the survey process are shared with the MCO and providers on a quarterly basis with each provider receiving its own specific member responses (in the aggregate) in addition to the overall report. The C/FST information is to become part of operational and clinical processes, assist in decision making and help drive performance and quality. A key to this outcome is MCO and provider acknowledgement of, and response to, the process.

D.Survey Methodology Population/Sampling
Members receiving mental health services are contacted using a call list provided by Blair HealthChoices. Members receiving drug & alcohol treatment are interviewed on a face-to-face basis at provider offices when they volunteer for such interviews. Both Mental Health and D&A service recipients are interviewed at provider sites.

E.Data Analysis and Reporting
Survey instrument development, data entry, and data analysis were conducted using the SNAP software and incorporated Likert scale, multiple choice, and narrative responses. In addition, participants were able to skip questions or stop the interview at any point during the data collection process. As a result, the number of respondents (N) for each question and the total number of surveys completed may vary.

Respondents were offered the choice of answering; *“strongly agree”, “agree”, “neutral”, “disagree”* or *“strongly disagree”,* and a straight *“yes”* or *“no”* to some questions. Other questions asked for a verbal opinion or reasons for an answer. Additionally, some questions provide for a non-applicable response which can also alter the total when reconciling the *“agree”, “neutral”* and, *“disagree”* responses.

The C/FST Advisory Committee identified an appropriate benchmark system to highlight positive findings and better recognize areas requiring improvement – see following percentage ranges for member responses.

At or above 90% Benchmark – **Satisfactory**

Between 85%-90% - **Monitoring**

Below 85% - **Requires Action**

In addition to **Benchmarking** data to identify changes, trends and issues, other refinements have also been added to the quarterly reports. These include:

1. **Quarter-to-Quarter Analysis:** It is difficult to draw any conclusions from a single quarter which represents a “snapshot” in time. Thus, a quarter-to-quarter comparison was added so that member responses can be tracked over time.
2. **Sample Characteristics:** Significant variances in member responses between quarters are also evaluated by the size and characteristics of the member sample. Any variances in member age range, treatment service level or provider is also noted.
3. **Cross-Tabulation:** Using the SNAP software, member responses to an interview question can be evaluated by any other data characteristic including age, level of service, provider, or treatment category.

4.**Quarterly Provider Report:** As one quarter of member responses are only a snapshot in time, a quarterly provider report was developed to show member responses by provider by quarter with a year-to-date average which is more useful in identifying trends, drawing conclusions, and recommending improvements.

These data analysis enhancements are designed to provide additional interpretative capability for the reader to develop useful information regarding member perceptions of treatment access, provider treatment, recovery orientation and outcomes.

F. Limitations
There are always limitations to the administration of a survey. The following is a discussion of three significant limitations experienced during the administration process.

1. When attempting to assess satisfaction among a sample population, a telephone survey has both advantages and disadvantages. One of the advantages is that the time needed for data collection is far less than what would be needed for either face-to-face interviews or a mailed survey. An additional advantage is that it provides a way to collect data in a far more cost-effective manner than face-to-face interviewing. The major disadvantage to telephonic methodology is that consumers are eliminated from the survey if they have no access to a phone, or if the available phone number is inaccurate.

2. **Survey data obtained from members may be for service(s) rendered in a different period than when the survey was conducted**. Thus, it is difficult to assume that changes in data between quarters (actual counts and percentage) represent trends – good or bad. It is best to review year-to-date data and both member and provider demographics within a particular survey period to place the results into perspective.

C/FST Program Member Assistance & Reporting

1. **Monthly Status & Problem Resolution**
Consistent with the requirements of DHS's Appendix L, Blair HealthChoices, Community Care, and the C/FST Program Director communicate on a regular basis and meet monthly. The ongoing dialogue focuses on a review of program implementation, compliance with Appendix L, evolving findings, removing barriers, the member request for assistance process, and outreach to un-served or underserved member identification.

2. **Member Request for Assistance**
In cooperation with Blair HealthChoices, the Blair County C/FST developed a referral mechanism to assist members that identify service specific issues and concerns during the interview process. If the member desires to have their concern or issue immediately addressed, the surveyor obtains the member's consent to release the information, completes a Member Request for Assistance form, reviews it with the C/FST Program Director, and forwards the form to Blair HealthChoices.

The form requires a description of the reason the member is requesting assistance and a desired resolution/outcome description from the member. The request is checked as either urgent or non-urgent and the members are advised they can expect to be contacted within the next 30 days or sooner, depending on the nature of the issue.

Anonymous Member Concern(s)
In addition to a Member Request for Assistance, the C/FST surveyor may submit an Anonymous Member Concern form to Blair HealthChoices in cases where the surveyor believes Blair

HealthChoices should be made aware of the member's concern, but the member declined to release their contact information.

Critical Incident Reporting
It is the responsibility of the C/FST surveyor to report any unusual incident that occurs during the interview process. This includes awareness of abuse or alleged abuse of a member, seclusion, restraint, alleged medication errors, or talk of suicide.

H. Confidentiality, Consent and Protection of Participant Information
There are several mechanisms in place to safeguard confidentiality and protection of participant information.

1. Potential participants are assured of the confidentiality of their opinions.
2. Potential participants are also assured their opinions will not negatively affect the services they are currently receiving.
3. Individuals who indicated they did not wish to participate had their names or the name(s) of their child removed from the list of potential participants and were not contacted again.
4. Everyone contacted via telephone received another explanation of the survey during the survey introduction and was given another opportunity to opt in or out of participation.
5. Employee Confidentiality Statements are completed annually, and prior to any interviews/surveys conducted on behalf of the Center for Behavioral Health Data Research, Inc., and Blair HealthChoices.
6. Policies and practices for the storage, access, and disposal of participant records are designed to protect personal information and maintain confidentiality.

The oversight and monitoring of interviewers and calls are in accordance with approved protocols and are implemented in collaboration with CBHDR and Blair HealthChoices