

Attachment E: Drug and Alcohol Assessment and Treatment Report 02 ADM 3

Drug and Alcohol Assessment and Treatment Report

Reporting District: _____
Reporter: _____
Telephone Number: _____

Report Period
Months Year
01/01 – 06/30 _____
07/01 – 12/31 _____

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A. Assessment Statistics

	Six Month Total
TANF	
Safety Net	
TOTAL	

B. Treatment Statistics (Mandated Clients Only)

1. Individuals **mandated** to treatment this period (new code 63's):

	Six Month Total
TANF	
Safety Net	
TOTAL	

2. Total mandated individuals in treatment (all code 63's):

	Six Month Total
TANF	
Safety Net	
TOTAL	

3. Individuals mandated to treatment who return to employable status this period (code 63's that change to other codes):

	Six Month Total
TANF	
Safety Net	
TOTAL	

NOTE: This report is used to track only **mandated individuals** (those individuals who are determined to be not employable due to drug/alcohol addiction) in the TANF and Safety Net Programs. Individuals who are employable and participate in drug and/or alcohol rehabilitation programs on a voluntary basis or as part of an employability plan are **not** to be included on this report.

Medicaid only clients are **not** to be included on this report.