Instructions: Answer each question below as thoroughly as possible. Reports are due April 30 (January-March), July 31 (April-June), October 31 (July-September), and January 31 (October 31-December 31).

Submit prior to the HCA BHASO Mailbox at: [HCABHASO@hca.wa.gov](mailto:hcabhaso@hca.wa.gov)

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| **Organization Name** |  |
| **Contact Information** |  |
| **Time Frame of the Report** |  |

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| 1. **List the aggregate number of Individuals served by the co-responder program.** |  |
| 1. **List all current sub-contractors that will be providing co-responder services.** |  |
| 1. **Describe successes of the co-responder program in your region.** |  |
| 1. **Describe barriers or challenges of the co-responder program in your region**. |  |