Introduction

Nevada Community Enrichment Program (NCEP), a program of Accessible Space, Inc. (ASI), is a leader in the field of brain injury rehabilitation. We are the only non-profit, CARF accredited, post-acute brain injury rehabilitation in Nevada, serving individuals with Acquired Brain Injury, Traumatic Brain Injury and neurological impairments. NCEP has earned and maintained CARF accreditation for Outpatient Brain Injury Rehabilitation for adults, adolescents and children and Residential Brain Injury Rehabilitation for adults. Residential rehabilitation is provided 24 hours a day 7 days a week. NCEP utilizes an interdisciplinary team approach with each member of the management and clinical team responsible for performance measurement.

Our Mission: NCEP is dedicated to providing a therapeutic environment that encourages evidence-based, person centered and outcomes oriented rehabilitation in a community based setting, while promoting training and education.

Our Goal: To ensure that all rehabilitation is person centered and driven, so that each individual may reach their highest level of independence.

NCEP outcomes and quality indicators and measurement included:

I. Overall Short Term Goal Attainment

A. Based on Short Term Goals Met at D/C (overall and by discipline)

II. Quality of Life

- A. Based on Mayo Portland (MPAI-4)
 - 1. Admission
 - 2. Discharge
 - 3. 6 months post Discharge
 - 4. 12 months post Discharge

III. Independence

- A. Based on the Supervision Rating Scale (SRS)
 - 1. Admission
 - 2. Discharge
 - 3. 6 months post Discharge
 - 4. 12 months post Discharge
- B. Based on Discharge Site /Level of Independence
 - 1. Home Independent or with Family Support
 - 2. Community Based Living
 - 3. Skilled Facility/Long Term Care
 - 4. Acute/Medical
 - 5. Other (unknown)
- IV. Activity Level (Discharge, 6 months post Discharge, 12 months post Discharge)
 - A. Employed at time of admission (returned to previous, leave, new job)
 - B. Unemployed
 - C. Retired
 - D. Homemaker

- E. Post HS Student (college/trade/professional school)
- F. Productive Activity (including volunteer work)
- G. Other

V. Satisfaction (Discharge)

- A. Satisfaction of Persons Served: Universal Stakeholder Participation and Experience Questionnaire (USPEQ)
- B. Family Satisfaction: NCEP's toolC. Payer Satisfaction: NCEP's tool

VI. Additional indicators and information tracked included:

- A. # of Admissions, Discharges and Persons Served
- B. Gender
- C. Ethnicity
- D. Length of Stay/Treatment Days
- E. Diagnosis
- F. Age
- G. Employment Status
- H. Funding Source
- I. Location of Person at Time of Referral
- J. Discharge Site/Outcome
- K. Trends in Referrals, Denials, Admissions & Discharges

Demographic Data

# OF ADMISSIONS, DISCHARGES, AND PERSONS SERVED					
# of Persor	ns Served	3	0		
# of Adm	issions*	1	8		
# of Disch	narges*	2	5		
Ma	le	1	8		
Fem	Female		12		
THREE YEAR TREND	2022	2023	2024		
# of Persons Served	38	20	30		
# of Admissions*	36	18	18		
# of Discharges*	34	16	25		
Male	25	12	18		
Female	13	8	12		

^{*}Based on total admissions—accounts for multiple admits/discharges, if applicable

	DIAGNOSIS A	T ADMISSION	
	Etiology	# of Persons	%
	CVA	20	67%
	Anoxia	2	7%
ACQUIRED BRAIN INJURY	AVM	0	0%
	Brain Tumor	0	0%
	Other*	2	6%
	TOTAL ABI	24	80%
	MVA	1	3%
	Fall	1	3%
	Assault 0		0%
TRAUMATIC BRAIN	Motorcycle/Bicycle 0		0%
INJURY	Pedestrian	2	7%
	Gunshot/Self Inflicted	0	0%
	Other*	1	3%
	TOTAL TBI	5	17%
	SCI	0	0%
OTHER INJURY	ORTHO	0	0%
	Other*	1	3%
	TOTAL OTHER	1	3%
3 Year Trend	2022	2023	2024
ТВІ	11%	20%	17%
ABI	76%	65%	80%
OTHER	13%	15%	3%

 $[\]hbox{*Other could include multiple sclerosis, infections and other neurological issues/unknown causes}$

AGE AT ADMISSION					
Age Range		# of	Persons	%	
18-40 years			3	11%	
41-65 years			26	85%	
66-85 years		1		4%	
86+		0		0%	
THREE YEAR TREND		2022	2023	2024	
18-40 years		18% 15%		11%	
41-65 years		76% 75%		85%	
66-85 years		6% 10%		4%	
86+		0%	0%	0%	

ETHNICITY					
White		14			
Black Americ	an	8			
Spanish, Hispanic	, Latino	7	,		
Asian		C			
Native Hawaiian or other	Pacific Islander	1			
Other*		0			
THREE YEAR TREND	2022	2023	2024		
White	37%	35%	46%		
Black American	29%	25%	27%		
Spanish, Hispanic, Latino	Spanish, Hispanic, Latino 18%		23%		
Asian 10%		10%	0%		
Native Hawaiian or Pacific Islander	tive Hawaiian or Pacific Islander 3%		4%		
Other	3%	0%	0%		

^{*}Other includes Native American and Native African

AVERAGE LENGTH OF STAY (Treatment Days)					
Program Type	Program Type # Of Discharged Persons served Avg. # of Treatment Days*				
Comprehensive		23	54		
Transitional Rehab					
THREE YEAR TREND - A	AVERAGE	2022	2023	2024	
Comprehensive Transition	onal Rehab	60	50	54	

FUNDING SOURCE UPON ADMISSION*						
Funding	# of Perso	ons	%			
Private Insurance	15		50%			
Medicaid	0		0%			
Medicaid-MCO	15		50%			
Workers Compensation	0		0%			
Other	0		0%			
3 YEAR TREND	2022	2023	2024			
Private Insurance& Private Pay	76%	90%	50%			
Medicaid	0%	0%	0%			
Medicaid MCO	24%	10%	50%			
Workers Compensation	0%	0%	0%			
Other*	0%	0%	0%			

^{*} "Other" includes all other funding sources including lien, pending insurance, pro bono, and private pay

LOCATION UPON REFERRAL					
Setting	# of	Persons	%		
Home		4	11%		
Acute Hospital		0	0%		
Acute Rehabilitation		9	31%		
Skilled Facility		16	54%		
Other*		1	4%		
3 Year Trend	2022	2023	2024		
Home	34%	0%	11%		
Acute Hospital	8%	10%	0%		
Acute Rehabilitation	53%	30%	31%		
Skilled Facility	5%	60%	54%		
Other*	0%	0%	4%		

^{*}Other includes group homes, assisted living, shelter or homeless

Outcome Measurements

DISCHARGE LOCATION (Goal = 85% to discharge home independent/community based)					
Status	# of Persons		%		
Home	25			100%	
Other Community Based Living	0			0%	
Acute/Medical	0			0%	
Skilled Facility/Long Term Care	0		0%		
Other (unknown)	0		0%		
3 YEAR TREND	2022	202	.3	2024	
Home	97%	97% 88%		100%	
Other Community Based Living	0%	0% 6%		0%	
Acute/Medical	3% 0%		ó	0%	
Skilled Facility/Long Term Care	0%	6%	ó	0%	
Other (unknown)	0%	0%	/ 0	0%	

2024 SH	2024 SHORT TERM GOAL ATTAINMENT BY DISCIPLINE*				
Discipline	Percentage of Goals Met		Overall Goal Attainmen Benchmark=85%		
Case Management	98%				
Nursing	98%				
Occupational Therapy	93%				
Physical Therapy	93%				
Speech Pathology	94%				
Overall Goal Attainment	95%				
3 YEAR TREND	2022	202	23	2024	
Case Management	99%	99	%	98%	
Nursing	98%	98	%	98%	
Occupational Therapy	91% 87		%	93%	
Physical Therapy	93% 91		%	93%	
Speech Pathology	91%	90	%	94%	
Overall Goal Attainment	94%	93	%	95%	

^{*}Excludes those discharged prior to program completion

	2024	ACTIVITY	Y LEVEL A	Admission to Discharge			
Admission	1			Discharge			
Activity Level at Admission	# Of Person s served	%		Activity Level at Discharge	# Of Perso ns served	%	TARGET FOR DISCHARGE
Employed at time of admission	16	54%	E	imployed at Discharge	7	28%	25%
Unemployed	11	35%		Unemployed	4	16%	
Retired	2	8%		Retired	0	0%	
Student (Post HS)	0	0%		Student (Post HS)	0	0%	
			Prod	ductive Activity (including volunteer work)	14	56%	20%
Other	1	3%		Other	0	0%	
				Activity Levels for Employed ity (including volunteer wor			50%
Trend for Discharge		2022		2023		2024	
Employed		33%		43%		28%	
Unemployed	22%			19%		16%	
Retired	25%			19%		0%	
Student	0%			0%		0%	
Productive Activity		0%		19%		56%	
Other		20%		0%	0%		

QUALITY OF LIFE Admit to Discharge					
MPAI PARTICIPATION INDEX Admit to D/C	GOAL=80% of Persons served to decrease MPAI score	# Of Discharged Persons served	Percentage of Persons served		
Decrease		25	100%		
No Change		0	0%		
Increase		0	0%		
*Note: A	decrease in score is a positiv	e change and indicates impr	ovement		
THREE YEAR TREND	2022	2023	2024		
Decrease	78%	81%	100%		
No Change	14%	13%	0%		
Increase	8%	6%	0%		

INDEPENDENCE Admit to Discharge					
Independence Measures SRS Admit to D/C	GOAL=75% of Persons served to decrease SRS score	# Of Discharged Persons served	Percentage of Persons served		
Decrease		21	83%		
No Change		4	17%		
Increase		0	0%		
*Note: A	decrease in score is a positiv	e change and indicates impr	ovement		
THREE YEAR TREND	2022	2023	2024		
Decrease	69%	75%	83%		
No Change	17%	19%	17%		
Increase	14%	6%	0%		

QUALITY OF LIFE Admit to Discharge							
MPAI TOTAL SCORE Admit to D/C	GOAL=80% of Persons served to decrease MPAI score	# Of Discharged Persons served	Percentage of Persons served				
Decrease		25	100%				
No Change		0	0%				
Increase		0	0%				
*Note: A	*Note: A decrease in score is a positive change and indicates improvement						
THREE YEAR TREND	2022	2023	2024				
Decrease	84%	87%	100%				
No Change	8%	13%	0%				
Increase	8%	0%	0%				

DISCHARGES PRIOR TO PROGRAM COMPLETION					
Reason		# of P	ersons	%	
Unaware of Deficits			0	0%	
Left Against Clinical Ad	vice		1		50%
Lack of Funding			1		50%
Medical Acuity		(0		0%
Deceased		0		0%	
Non Voluntary Dischar	ge	0		0%	
Other		0		0%	
3 YEAR TREND		2022	2023		2024
Unaware of Deficits		25%	0%		0%
Left Against Clinical Advice		0%	0%		50%
Medical Acuity		0%	0%		50%
Deceased		0%	0%		0%
Non Voluntary Discharge		75%	100%		0%
Other		0%	0%		0%

Family Satisfaction*

Standard	Strongly Disa	agree	Disa	gree		Agree	Strongly Agree
Treated with Dignity and Respect	0%		0	%		7%	193%
Knowledgeable Clinical Staff	0%		0	% 0%		100%	
Realistic Goals	0%		0	0%		7%	93%
Team Listened to Me	0%		0	%		11%	89%
Felt Part of the Team	0%		0%		0%	100%	
Discharge Planning	0%		0	%		18%	82%
Understood Grievance Process	0%		0	%		0%	100%
Reports were Understandable	0%		0	%		0%	100%
Overall Program Satisfaction	0%		0	% 25%		75%	
TOTAL % AVER	_						100%
3 YEAR TREND	2022			2023			2024
TOTAL % AVERAGE SATISFACTION RATIN		96%			93%		100%

^{*}It should be noted that family satisfaction ratings include data from both residential and transition programs.

Payer Satisfaction

PAYER SATISFACTION*						
Standard	Strongly Disagree	Disa	gree	Agree	Strongly Agre	:e
All Reports were Sent in a Timely Manner	0%	0	%	0%	100%	
The appropriate staff members responded to requests/communi cation in a timely manner	0%	0	%	0%	100%	
Reports were Understandable, Comprehensive, Objective & Functional	0%	% 0%		0%	100%	
Overall Program Satisfaction	0%	0%		19%	81%	
TOTAL % AVERAGE SATISFACTION RATING					100%	
3 YEAR TREND	2022	2022		2023	2024	
TOTAL % AVERAG SATISFACTION RATI {agree/strongly agre (Referral/Payers)	NG ee}			100%	100%	

^{*}It should be noted that payer satisfaction surveys include all NCEP programs including residential, transition and day.

Post Discharge Data

ACTIVITY LEVEL Post Discharge						
Activity Level Post D/C	6 Months Post Discharge (3Q 2023- 2Q 2024)			12 Months Post Discharge (1Q 2023- 4Q 2023)		
	# Of Persons se	erved	erved Percentage #		# Of Persons served	Percentage
Paid Employment	3		25%		6	24%
Unemployed	2		17%		3	12%
Retired	2		17%		7	28%
Homemaker	0		0%		0	0%
Attending School	0		0%		0	0%
Volunteer	0		0%		0	0%
Productive Activity	5		41%		9	36%
Other	0		0%		0	0%
3 YEAR TR (POST DISCHARGE		3Q	2022 202 – 2Q 2023		2023 3Q 2022-2Q 2023	2024 3Q 2023-2Q 2024
Paid Employ	yment		25%		50%	25%
Unemplo			37%		50%	17%
Retire	d		13%		0%	17%
Homema	ker		4%		0%	0%
Attending S	ichool		0%		0%	0%
Volunte	er		13%		0%	0%
Productive A	Activity		8%		0%	41%
Other			0%		0%	0%
3 YEAR TR (POST DISCHARGE		3Q	2022 2022 – 4Q 2023	3	2023 Q 2022 – 4Q 2023	2024 1Q 2023 – 4Q 2023
Paid Employ	yment		20%		38%	24%
Unemplo	Unemployed		30%		25%	12%
Retire			25%		25%	28%
Homema	ker		5%		0%	0%
	Attending School		0%		0%	0%
Volunte			5%		0%	0%
Productive A	Activity		15%		12%	36%
Other			0%		0%	0%

Post Discharge Data

QUALITY OF LIFE Discharge to 6 months Post (3Q 2023-2Q 2024)						
MPAI PARTICIPATION INDEX D/C to 6 months post	GOAL=80% of Persons served to decrease MPAI score	# Of persons served Surveyed 12	Percentage of Persons served			
Decrease		12	100%			
No Change		0	0%			
Increase		0	0%			
*Note: A	decrease in score is a positiv	e change and indicates impr	ovement			
THREE YEAR TREND	2022	2023	2024			
Decrease	83%	86%	100%			
No Change	13%	14%	0%			
Increase	4%	0%	0%			

QUALITY OF LIFE Discharge to 12 months Post (1Q 2023-4Q 2023)							
MPAI PARTICIPATION INDEX D/C to 12 months post	GOAL=80% of Persons served to decrease MPAI score	# Of persons served Surveyed 25	Percentage of Persons served				
Decrease		19	76%				
No Change		2	8%				
Increase		4	16%				
*Note: A	*Note: A decrease in score is a positive change and indicates improvement						
THREE YEAR TREND	2022	2023	2024				
Decrease	80%	70%	76%				
No Change	10%	20%	8%				
Increase	10%	10%	16%				

INDEPENDENCE Discharge to 6 months Post (3Q 2023-2Q 2024)							
Independence Measures SRS D/C to 6 months post	GOAL=80% of Persons served to decrease SRS score	# Of persons served Surveyed 12	Percentage of Persons served				
Decrease		10	83%				
No Change		2	17%				
Increase		0	0%				
*Note: A	*Note: A decrease in score is a positive change and indicates improvement						
THREE YEAR TREND	2022	2023	2024				
Decrease	75%	75%	83%				
No Change	17%	25%	17%				
Increase	8%	0%	0%				

INDEPENDENCE Discharge to 12 Months Post (1Q 2023- 4Q 2023)					
Independence Measures SRS D/C to 12 Months post	GOAL=80% of Persons served to decrease SRS score	# Of persons served Surveyed 25	Percentage of Persons served		
Decrease		18	72%		
No Change		2	8%		
Increase		5	20%		
*1	Note: A decrease in score is a positiv	re change and indicates improveme	ent		
THREE YEAR TREND	2022	2023	2024		
Decrease	84%	86%	72%		
No Change	16%	0%	8%		
Increase	0%	14%	20%		

TRANSITION PERSONS SERVED 2024

Summary

NCEP served 30 persons who transitioned from Residential to Day treatment in 2024. There were 18 admissions and 25 discharges. The majority of persons served were between the ages of 41 and 65, which mirrors the results from NCEP's day program. 80% of persons served were diagnosed with an acquired brain injury; a large majority (68%) of them experienced a Cerebral Vascular Accident (CVA). 15% of persons served were diagnosed with a Traumatic Brain Injury and 4% were diagnosed with "Other" conditions. NCEP's ethnicity demographics for persons served who transitioned from the residential to the day treatment program mirror NCEP's demographics for persons served in the day treatment program with 46% being white, 27% being Black American, 23% being Spanish/Hispanic/Latino, and 4% being Native Hawaiian or Pacific Islander. The average number of treatment days was 54, which is consistent with 2023.

Average goal attainment was uniform with data from 2023 with an overall average of 95%. Similar to the day program, persons served in the transition program met NCEP's goal of 85% overall goal attainment.

ANALYSIS – PERSONS SERVED IN THE TRANSITION PROGRAM 2024

Demographic Data

The number of persons served in the transition program increased by 10 persons since 2023. A trend continues in which many persons in the residential program become approved for 1915i Habilitation services, which moves them from the "transition" population to the "day" population.

The trends in diagnosis have changed slightly with a moderate increase in ABIs and a small decrease in TBIs. This is the opposite from the trend observed in our day program. The majority of persons served continued to be admitted with an acquired brain injury. We can continue to expect the bulk of persons served in 2025 to have acquired brain injuries. 67% of persons served in the transition program were diagnosed with CVAs. NCEP will consider adding a CARF stroke specialty in the future.

The age at admission for persons served in the transition program has remained consistent over the last three years. 85% of persons served were between 41-65 years old, with 11% being 18-40 years old. This is similar to the trends observed in the NCEP's day and residential program.

For persons served in the transitional program, NCEP showed a 10% decrease in the Asian population, an 11% increase in the White population, and a 7% decrease in the Spanish/Hispanic/Latino population over the last year. There were trends noted over the last three years.

Half of persons served in the transition program in 2024 had private insurance as their main funding source, and the remaining persons had Medicaid Managed Care Organizations. Nevada Medicaid no longer funds rehabilitation services under the Fee For Service model, so no persons had Nevada Medicaid as their payer. NCEP continues to be involved with the BIAA leadership team and in advocating for brain injury as a chronic condition which should be covered under comprehensive services.

Outcome Measurements

Discharge Location (Goal = 85% to home or community-based living)

For persons who transitioned from Residential to Day treatment, 100% were able to discharge to their home which exceeded our expectations for 85% to discharge home or to a community based setting. This is an incredible outcome, especially given the high medical acuity and complex needs which accompany this particular outcome group. These results are indicative of NCEP's ability to promote independence within both the residential and day programs in order to allow persons to discharge to the least restrictive environment.

The majority of persons served who transitioned from residential to the day program were admitted from an acute rehab hospital or a skilled facility with greater than half from a skilled facility. This is similar to NCEP's referrals outcomes in 2023 with the exception that we admitted 11% of our persons served from home. 31% of our persons served were admitted from the acute rehab setting which follows the trend for insurance payer sources referring significantly higher numbers of patients to skilled facilities rather than acute rehab hospitals across the Las Vegas valley.

Overall Short Term Goal Attainment (Goal = 85%)

Overall short term goal attainment for this population was 95% which exceeded the goal of 85%. Average overall goal attainment remained similar for 2023 and 2024. There was exceptionally high goal attainment in the disciplines of Case management and Nursing in 2023 and 2024. In 2024, NCEP increased case management staff, thus increasing resources and support, which was echoed in the extremely high rate of completed goals. Additional support for nursing services was also achieved in 2024, which helped persons reach their goals with specific improvements in medication education and management.

Activity Levels (Goal = 50% of persons served to engage in employment and/or productive activity at discharge)

84% of persons served were engaged in employment or productive activity upon discharge. This exceeded NCEP's goal of 50%. 28% of persons were employed at discharge, which decreased from 54% who were employed at admission. This exceeded our goal of 25% employment at discharge. It should be noted that there were many persons served who were still employed over their hospital stay which carried over from their employment status previous to brain injury. 56% persons were involved in productive activity at discharge, which increased from 19% in 2023.

Quality of Life Participation Index Gains (Goal = 80% of persons served to decrease MPAI Participation Index)

All persons served are assessed for their quality of life upon admission and again at discharge by using the Mayo Portland Adaptability Participation Index (MPAI). 100% of persons served decreased their score indicating an improvement in quality of life exceeding NCEP's goal of 80%. There has been a three-year trend of increasing of participation for persons served in this program.

Independence Gains (Goal = 75% of persons served to decrease SRS scores)

NCEP met our goal of 75% of persons served in the transition program to decrease SRS scores from admission to discharge which reflects an increase in their independence levels. 83% of persons served

decreased their score in 2024, as opposed to 75% in 2023. There has been a three-year trend of increasing independence for persons served in this program.

Quality of Life Total Score Gains (Goal = 80% of persons served to decrease MPAI Total Scores) 100% of persons served decreased their MPAI Total Score indicating an improvement in quality of life exceeding NCEP's goal of 80%. There has been a three-year trend of increasing of quality of life for persons served in this program.

NCEP demonstrated incredible results in 2024 across all independence and quality of life measures. The three-year trend of improvement across all of these domains is extraordinary.

Discharges Prior to Program Completion:

Two persons served were discharged from NCEP's program prior to completing the program. One person served had an unexpected change in insurance which eliminated their pay source. The other person served left against clinical advice due to a family crisis, however was very close to his planned discharge.

Satisfaction of Persons Served

Satisfaction of persons served is measured through the Universal Stakeholder Participation and Experience Questionnaire (USPEQ). This is a standardized, reliable and valid method of data collection and measurement with customized reports. USPEQ is a third party, and no data collection or analysis is done by NCEP. **See accompanying 2024 USPEQ report.** It should be noted that surveys completed by persons served in the transition program were not separated from surveys completed by persons served in the residential program in 2024.

Family Satisfaction:

Family satisfaction was measured by an NCEP developed tool based on USPEQ Questions. The overall family satisfaction for persons who transitioned from the residential to the day program was included in the residential outcomes data. Persons served indicated that they were 100% satisfied in areas of being treated dignity and respect, being provided with knowledgeable clinical staff, working on realistic goals, being listened by the team, being part of the team, having planned discharges, understanding the grievance process, being able to understand reports and with the overall program. NCEP demonstrated an overall family satisfaction between 2023 and 2024.

Payer Satisfaction:

The payer satisfaction survey is measured with a survey developed by NCEP and provided to payer sources. Payer satisfaction data for all NCEP programs, including residential, day and transition programs were combined. Payers completed one survey for all three programs. NCEP demonstrated 100% payer satisfaction rate. This has been the trend over the three-year period.

Post Discharge Data

Activity Level (Goal = 50% of persons served to engage in employment and productive activity at discharge)

6-month post discharge:

Persons served are contacted six months after discharging from the program to continue to track their progress in daily activities, quality of life, and general independence. 41% of persons served were engaged in productive activity, and 25% of persons served were engaged in paid employment.

12-month post discharge:

After one year, 24% of discharged persons served were employed and 36% of persons served were involved in productive activity. Unemployment was decreased significantly from 25% to 12% between 2023 and 2024.

Quality of Life (MPAI-4 Participation Index)

6-month post discharge:

100% of persons who were evaluated six months after discharge improved their quality of life scores. This is consistent with the scores at discharge. There is a three-year trend of improved scores in this area.

12-month post discharge:

One year after discharge, 76% of persons continued to increase their quality of life and 8% remained the same. This percentage did not meet our goal of 80% of persons to continue improvement on their quality of life 12-month post discharge. However, the majority of the remaining persons served surveyed stayed consistent with their quality of life scores.

Independence (SRS)

6-month post discharge:

83% of persons served continued to improve their independence levels six months after discharge when assessed using the SRS. This is an improvement from the 75% achieved in both 2023 and 2022.

12-month post discharge:

One year after discharge, 72% of persons continued to improve their independence. NCEP did not meet our goal of 80% of persons served to improve independence. Although this rate was lower than expected, NCEP demonstrated extraordinary SRS scores for both 2022 and 2023.