

**1. Title Page for the State’s SUD Demonstration or SUD Components of Broader Demonstration**

*The state should complete this Title Page at the beginning of a demonstration and submit as the title page of all SUD Monitoring Reports. The content of this table should stay consistent over time.*

Medicaid Section 1115 SUD Demonstration Monitoring Report – Part B  
 Kentucky - SUD Demonstration, KY HEALTH  
 DY2 – January 2019 – December 2019  
 Q3 Y2 – July 2019 – September 2019  
 Submitted on 11/29/2019

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| <b>State</b>   | Kentucky   |
| <b>Demonstration name</b>                                  | SUD Demonstration, Kentucky Helping to Engage and Achieve Long Term Health ( KY HEALTH)  |
| <b>Approval date for demonstration</b>                     | January 12, 2018   |
| <b>Approval period for SUD</b>                             | January 12, 2018 – September 30 , 2023   |
| <b>Approval date for SUD, if different from above</b>      | Enter approval date for the SUD demonstration as listed in the demonstration approval letter if different from above (MM/DD/YYYY). |
| <b>Implementation date of SUD, if different from above</b> | 7/1/2019   |

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| <p><b>SUD (or if broader demonstration, then SUD - related) demonstration goals and objectives</b></p> | <p>Effective upon CMS’ approval of the SUD Implementation Protocol, as described in STC 93, the demonstration benefit package for all Medicaid beneficiaries as authorized by this demonstration will include OUD/SUD residential treatment, crisis stabilization and withdrawal management services provided in IMDs, which are not otherwise matchable expenditures under section 1903 of the Act. Medicaid beneficiaries residing in IMDs under the terms of this demonstration will have coverage of all benefits that would otherwise be covered if the beneficiary were not residing in an IMD. Effective upon CMS’ approval of this demonstration, methadone treatment services will be a covered service under the state plan for Medicaid beneficiaries.</p> <p>The coverage of OUD/SUD residential treatment, crisis stabilization, withdrawal management and methadone treatment services will expand Kentucky’s current SUD benefit package available to all Medicaid beneficiaries. Note: room and board costs are not considered allowable costs for residential treatment service providers unless they qualify as inpatient facilities under section 1905(a) of the Act.</p> <p>A waiver of the NEMT assurance is granted for methadone treatment services to allow the state not to provide NEMT for methadone services to all Medicaid beneficiaries, except that NEMT for methadone services will be provided for children under age 21 who are subject to EPSDT, former foster care youth, and for pregnant women. (A waiver of the NEMT assurance for all other Medicaid covered services is granted for beneficiaries eligible through the new adult group, as defined in 42 CFR 435.119, except for beneficiaries in that group who are under age 21 and subject to EPSDT, pregnant, medically frail, survivors of domestic violence, or former foster care youth.)</p> |
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## 2. Executive Summary

*The executive summary should be reported in the fillable box below. It is intended for summary-level information only. The recommended word count is 500 or less.*

During this reporting period the state awaited the oral arguments with the appellate court and an ultimate court ruling on the program. Kentucky HEALTH did continue to maintain courses designed for the My Rewards account. These courses are housed in a learning management system accessible to beneficiaries. Course topics include health, life skills and employment focused subjects. Conducted a My Rewards webinar on August 29, 2019 to connect with stakeholders who may have courses to submit.

The program has maintained the Community Forum platform to connect with stakeholders to announce program updates and host local community partners and other key information about support programs. During this reporting period, forums were held in person as well as virtually in Frankfort, Covington, Louisville, and Hazard, Kentucky.

Participated in the Kentucky Nonprofit Leadership forum, Kentucky Health Benefit Exchange monthly meetings, KWIB Board Meetings, DCBS Change Agent meetings to provide an update on the Kentucky HEALTH program.

Maintained bi-weekly Program Status and communication meetings to manage activity within the SUD component, and support communication needs and effort program wide.

Substance Use Disorder (SUD) component of KY HEALTH continues with a phased rollout. Phase one was implemented July 1, 2019 with effective State Plan Amendment and Administrative Regulation changes. These changes included adding coverage of methadone for Medication Assisted Treatment (MAT) in Narcotic Treatment Program, allowing service planning for SUD treatment, requiring utilization of the ASAM Criteria across the continuum, incorporated withdrawal management when at the appropriate levels, allow partial hospitalization in a Behavioral Health Service Organization (BHSO), and require care coordination within residential treatment.

SUD Phase One system changes were deployed 6/20/19 to allow providers to perform maintenance updates in Partner Portal, self-identifying SUD providers and newly enrolling Narcotic Treatment Programs. These maintenance updates were reviewed by the DMS Provider Licensing and Certification Branch before being transmitted to MCOs to facilitate claims processing. Beginning 7/1/2019 providers began submitting claims for SUD treatment in outpatient and residential facilities.

SUD Phase Two planning began July 1, 2019 to include Administrative Regulations changes and implementing the DMS Residential Provisional Certification for ASAM Level of Care. The residential provisional certification process was designed during this reporting period, as well as vendor joint application design (JAD) sessions to facilitate systems changes needed to implement the provisional residential LOC certification.

**3. Narrative Information on Implementation, by Milestone and Reporting Topic**

| Prompt   | State response   | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)  | Related metric (if any)   |
|--|--|--|---|
| <b>1.2 Assessment of Need and Qualification for SUD Services</b>   |  |  |   |
| <b>1.2.1 Metric Trends</b>   |  |  |   |
| <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to assessment of need and qualification for SUD services.  | <i>EXAMPLE: The number of beneficiaries with a SUD diagnoses treated in an IMD in the last quarter decreased by 5% due to the closure of one IMD in the state.</i> | Insert the first measurement period in which the current trend (+ or - two percent) was reported.<br><br><i>EXAMPLE: 01/01/2018-03/31/2018</i> | Insert the metric related to the trend reported.<br><br><i>EXAMPLE: #8: Medicaid beneficiaries with SUD diagnosis treated in an IMD</i> |
| <input checked="" type="checkbox"/> The state has no metrics trends to report for this reporting topic.  |  |  |   |
| <b>1.2.2 Implementation Update</b>   |  |  |   |
| Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <li><input type="checkbox"/> i) The target population(s) of the demonstration</li> <li><input type="checkbox"/> ii) The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration</li> </ul> |  | Insert the measurement period in which the update was first reported.<br><br><i>EXAMPLE: ii) 01/01/2018-03/31/2018</i>                         | Insert the metric related to the reported update (if any) or write "N/A".<br><br><i>EXAMPLE: ii) N/A</i>                                |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.   |  |  |   |

| Prompt  | State response   | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any)   |
|---|--|---|---|
| <input type="checkbox"/> The state expects to make other program changes that may affect metrics related to assessment of need and qualification for SUD services | <i>EXAMPLE: The state projects an x% increase in beneficiaries with an SUD diagnosis due to an increase in the FPL limits which will be effective on X date.</i> | <i>EXAMPLE: 01/01/2019-03/31/2019</i>                       | <i>EXAMPLE: #6 and 7: Medicaid beneficiaries with SUD diagnosis (monthly)</i> |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |  |   |   |
| <b>2.2 Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)</b>   |  |   |   |
| <b>2.2.1 Metric Trends</b>  |  |   |   |
| <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1              |  |   |   |
| <input checked="" type="checkbox"/> The state has no metrics trends to report for this reporting topic.   |  |   |   |

| Prompt   | State response  | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|--|---|---|-------------------------|
| <b>2.2.2 Implementation Update</b>   |   |   |                         |
| <p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> i) Planned activities to improve access to SUD treatment services across the continuum of care for Medicaid beneficiaries (e.g. outpatient services, intensive outpatient services, medication assisted treatment, services in intensive residential and inpatient settings, medically supervised withdrawal management)</li> <li><input checked="" type="checkbox"/> ii) SUD benefit coverage under the Medicaid state plan or the Expenditure Authority, particularly for residential treatment, medically supervised withdrawal management, and medication assisted treatment services provided to individuals in IMDs</li> </ul> | <ul style="list-style-type: none"> <li>i.) Per the updated 8/11/19 implementation plan, the state implemented State Plan Amendment changes effective 7/1/19 to include service planning for SUD treatment. The state implemented regulation changes effect 7/1/19 to include service planning for SUD treatment, as well as adding partial hospitalization services allowable in a BHSO.</li> <li>ii.) Per the updated 8/11/19 implementation plan, the state implemented State Plan Amendment changes effective 7/1/19 to include coverage of Methadone for MAT, utilizing the ASAM Criteria for residential treatment and description of withdrawal management services. The state implemented BHSO regulations changes effective 7/1/19 to include Narcotic Treatment Programs for coverage of methadone for MAT, as well as applying ASAM Criteria for residential treatment to include ASAM Level of Care Certification and include service description of withdrawal management within the appropriate levels of care.</li> </ul> | 07/01/2019 – 09/30/2019                                     |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.  |   |   |                         |
| <input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 1  |   |   |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.   |   |   |                         |
| <b>3.2 Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)</b>  |   |   |                         |
| <b>3.2.1 Metric Trends</b>   |   |   |                         |
| <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2   |   |   |                         |
| <input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.  |   |   |                         |
| <input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 2.   |   |   |                         |

| Prompt  | State response  | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|---|---|-------------------------|
| <b>3.2.2 Implementation Update</b>  |   |   |                         |
| Compared to the demonstration design and operational details, the state expects to make the following changes to:<br><input checked="" type="checkbox"/> i) Planned activities to improve providers’ use of evidence-based, SUD-specific placement criteria<br><br><input checked="" type="checkbox"/> ii) Implementation of a utilization management approach to ensure (a) beneficiaries have access to SUD services at the appropriate level of care, (b) interventions are appropriate for the diagnosis and level of care, or (c) use of independent process for reviewing placement in residential treatment settings | i.) Per the updated 8/11/19 implementation plan, SPA and regulation changes effective 7/1/19 required SUD providers to meet the service criteria, including the components for support systems, staffing, and therapies outlined in the most current edition of The ASAM Criteria for intensive outpatient services, partial hospitalization and residential treatment.<br><br>ii.) (a & b) Per the updated 8/11/19 implementation plan, the state implemented SPA and regulation changes effective 7/1/19 to require utilization of ASAM’s six dimension multidimensional assessment tool for SUD treatment providers to determine the most appropriate level of care. | 07/01/2019 – 09/30/2019                                     |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.   |   |   |                         |
| <input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 2   |   |   |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.   |   |   |                         |
| <input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 2.  |   |   |                         |
| <b>4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)</b>  |   |   |                         |
| <b>4.2.1 Metric Trends</b>  |   |   |                         |
| <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3  |   |   |                         |
| <input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.   |   |   |                         |
| <input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 3.  |   |   |                         |



| Prompt   | State response   | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|--|--|---|-------------------------|
| <b>4.2.2 Implementation Update</b>   |  |   |                         |
| Compared to the demonstration design and operational details, the state expects to make the following changes to:<br><input checked="" type="checkbox"/> i) Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards<br><input type="checkbox"/> ii) State review process for residential treatment providers' compliance with qualifications standards<br><input checked="" type="checkbox"/> iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site | i.) Per the updated 8/11/19 implementation plan, SPA and regulation changes effective 7/1/19 required residential SUD providers to meet the service criteria, including the components for support systems, staffing, and therapies outlined in the most current edition of The ASAM Criteria.<br>ii.) No updates to report for this topic.<br>iii.) Per the updated 8/11/19 implementation plan, SPA and regulation changes effective 7/1/19 added coverage of Methadone for MAT. Care coordination in residential treatment was added to include facilitating MAT off-site, if not offered on-site per recipient choice. | 07/01/2019 – 09/30/2019                                     |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.  |  |   |                         |
| <input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 3  |  |   |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.  |  |   |                         |
| <input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 3.   |  |   |                         |
| <b>5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)</b>   |  |   |                         |
| <b>5.2.1 Metric Trends</b>   |  |   |                         |
| <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4   |  |   |                         |
| <input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.  |  |   |                         |

| Prompt  | State response   | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|--|---|-------------------------|
| <b>5.2.2 Implementation Update</b>  |  |   |                         |
| Compared to the demonstration design and operational details, the state expects to make the following changes to:<br><input type="checkbox"/> Planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients in across the continuum of SUD care  |  | 07/01/2019 – 09/30/2019                                     |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |  |   |                         |
| <input checked="" type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 4  | Per the updated 11/04/19 implementation plan, providers will self-attest to a residential LOC. This attestation will verify MAT in residential treatment and capacity in which is provided.  |   |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.   |  |   |                         |
| <b>6.2 Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)</b>  |  |   |                         |
| <b>6.2.1 Metric Trends</b>  |  |   |                         |
| <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5  |  |   |                         |
| <input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.   |  |   |                         |
| <b>6.2.2 Implementation Update</b>  |  |   |                         |
| Compared to the demonstration design and operational details, the state expects to make the following changes to:<br><input checked="" type="checkbox"/> i) Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD<br><input type="checkbox"/> ii) Expansion of coverage for and access to naloxone | i.) Prior authorizations for buprenorphine were removed up to 24 mg in February 2019. In July 2019, Vivitrol’s prior authorization was removed. Also in July 2019, reimbursement for methadone administration began at the Department. | 07/01/2019 – 09/30/2019                                     |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.   |  |   |                         |

| Prompt  | State response   | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|--|---|-------------------------|
| <input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 5   |  |   |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |  |   |                         |
| <b>7.2 Improved Care Coordination and Transitions between Levels of Care (Milestone 6)</b>  |  |   |                         |
| <b>7.2.1 Metric Trends</b>  |  |   |                         |
| <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6  |  |   |                         |
| <input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.   |  |   |                         |
| <b>7.2.2 Implementation Update</b>  |  |   |                         |
| Compared to the demonstration design and operational details, the state expects to make the following changes to:<br><input checked="" type="checkbox"/> Implementation of policies supporting beneficiaries' transition from residential and inpatient facilities to community-based services and supports | Per the updated 8/11/19 implementation plan, the State Plan and BHSO regulation was amended effective 7/1/19 to include care coordination requirements within SUD residential treatment. | 07/01/2019 – 09/30/2019                                     |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.   |  |   |                         |
| <input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 6   |  |   |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |  |   |                         |
| <b>8.2 SUD Health Information Technology (Health IT)</b>  |  |   |                         |
| <b>8.2.1 Metric Trends</b>  |  |   |                         |
| <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its Health IT metrics  |  |   |                         |
| <input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.   |  |   |                         |

| Prompt  | State response   | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|--|---|-------------------------|
| <b>8.2.2 Implementation Update</b>  |  |   |                         |
| <p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> i) How health IT is being used to slow down the rate of growth of individuals identified with SUD</li> <li><input type="checkbox"/> ii) How health IT is being used to treat effectively individuals identified with SUD</li> <li><input type="checkbox"/> iii) How health IT is being used to effectively monitor “recovery” supports and services for individuals identified with SUD</li> <li><input type="checkbox"/> iv) Other aspects of the state’s plan to develop the health IT infrastructure/capabilities at the state, delivery system, health plan/MCO, and individual provider levels</li> <li><input checked="" type="checkbox"/> v) Other aspects of the state’s health IT implementation milestones</li> <li><input type="checkbox"/> vi) The timeline for achieving health IT implementation milestones</li> <li><input checked="" type="checkbox"/> vii) Planned activities to increase use and functionality of the state’s prescription drug monitoring program</li> </ul> | <ul style="list-style-type: none"> <li>i.) Kentucky continues to study correlations between initial opioid use and patient misuse and abuse patterns.</li> <li>v.) Kentucky continues to work to enhance interstate data sharing in order to better track patient specific prescription data and has connectivity with approx.. 15 states. Drug toxicity screen results began being reported by EDs to KHIE beginning _____. Beginning October 30, 2019 KASPER users could see a flag for drug toxicity issues.</li> <li>vii.) Kentucky is currently hiring staff and beginning the planning including requirements gathering</li> </ul> | 07/01/2019 – 09/30/2019                                     |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.   |  |   |                         |
| <input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Health IT   |  |   |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |  |   |                         |

| Prompt  | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|----------------|---|-------------------------|
| <b>9.2 Other SUD-Related Metrics</b>  |                |   |                         |
| <b>9.2.1 Metric Trends</b>  |                |   |                         |
| <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics  |                |   |                         |
| <input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.   |                |   |                         |
| <b>9.2.2 Implementation Update</b>  |                |   |                         |
| <input type="checkbox"/> The state expects to make other program changes that may affect metrics related to other SUD-related metrics   |                |   |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |                |   |                         |
| <b>10.2 Budget Neutrality</b>   |                |   |                         |
| <b>10.2.1 Current status and analysis</b>   |                |   |                         |
| <input type="checkbox"/> If the SUD component is part of a broader demonstration, the state should provide an analysis of the SUD-related budget neutrality and an analysis of budget neutrality as a whole. Describe the current status of budget neutrality and an analysis of the budget neutrality to date. |                |   |                         |
| <b>10.2.2 Implementation Update</b>   |                |   |                         |
| <input type="checkbox"/> The state expects to make other program changes that may affect budget neutrality  |                |   |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |                |   |                         |

| Prompt  | State response  | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|---|---|-------------------------|
| <b>11.1 SUD-Related Demonstration Operations and Policy</b>   |   |   |                         |
| <b>11.1.1 Considerations</b>  |   |   |                         |
| <input type="checkbox"/> States should highlight significant SUD (or if broader demonstration, then SUD-related) demonstration operations or policy considerations that could positively or negatively affect beneficiary enrollment, access to services, timely provision of services, budget neutrality, or any other provision that has potential for beneficiary impacts. Also note any activity that may accelerate or create delays or impediments in achieving the SUD demonstration’s approved goals or objectives, if not already reported elsewhere in this document. See report template instructions for more detail. |   |   |                         |
| <input checked="" type="checkbox"/> The state has no related considerations to report for this reporting topic.   |   |   |                         |
| <b>11.1.2 Implementation Update</b>   |   |   |                         |
| Compared to the demonstration design and operational details, the state expects to make the following changes to:<br><input checked="" type="checkbox"/> i) How the delivery system operates under the demonstration (e.g. through the managed care system or fee for service)<br><input type="checkbox"/> ii) Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes)<br><input type="checkbox"/> iii) Partners involved in service delivery  | i.) The majority of SUD services are delivered through the managed care organization system with a small percentage of fee for service. | 07/01/2019 – 09/30/2019                                     |                         |
| <input type="checkbox"/> The state has no implementation update to report for this reporting topic.   |   |   |                         |

| Prompt  | State response  | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|---|---|-------------------------|
| <input type="checkbox"/> The state experienced challenges in partnering with entities contracted to help implement the demonstration (e.g., health plans, credentialing vendors, private sector providers) and/or noted any performance issues with contracted entities |   |   |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |   |   |                         |
| <input type="checkbox"/> The state is working on other initiatives related to SUD or OUD  |   |   |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |   |   |                         |
| <input type="checkbox"/> The initiatives described above are related to the SUD or OUD demonstration (States should note similarities and differences from the SUD demonstration)   |   |   |                         |
| <input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.  |   |   |                         |
| <b>12. SUD Demonstration Evaluation Update</b>  |   |   |                         |
| <b>12.1. Narrative Information</b>  |   |   |                         |
| <input checked="" type="checkbox"/> Provide updates on SUD evaluation work and timeline. The appropriate content will depend on when this report is due to CMS and the timing for the demonstration. See report template instructions for more details.                 | 1. The state is preparing the DUA for the independent evaluator (Penn) to gain access to the encounter, vital statistics, provider enrollment, and KTOS/KORTOS survey data required for the evaluation.<br>2. Penn has developed a plan for recruitment of subjects for the qualitative beneficiary survey.<br>3. Penn has contacted potential KY partner who will assist Penn in gaining access to clinics for survey recruitment.<br>4. Penn has prepared a draft of the flier to be distributed at survey clinics.<br>5. Penn is developing an interview guide for the qualitative survey. | 7/2/2019-9/30/2019  |                         |
| <input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.   |   |   |                         |

| Prompt  | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|----------------|---|-------------------------|
| <input type="checkbox"/> Provide status updates on deliverables related to the demonstration evaluation and indicate whether the expected timelines are being met and/or if there are any real or anticipated barriers in achieving the goals and timeframes agreed to in the STCs. |                |   |                         |
| <input checked="" type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.  |                |   |                         |
| <input type="checkbox"/> List anticipated evaluation-related deliverables related to this demonstration and their due dates.  |                |   |                         |
| <input checked="" type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.  |                |   |                         |
| <b>13.1 Other Demonstration Reporting</b>   |                |   |                         |
| <b>13.1.1 General Reporting Requirements</b>  |                |   |                         |
| <input type="checkbox"/> The state reports changes in its implementation of the demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol   |                |   |                         |
| <input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.  |                |   |                         |
| <input type="checkbox"/> The state anticipates the need to make future changes to the STCs, implementation plan, or monitoring protocol, based on expected or upcoming implementation changes   |                |   |                         |
| <input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.  |                |   |                         |



| Prompt   | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|--|----------------|---|-------------------------|
| Compared to the demonstration design and operational details, the state expects to make the following changes to:<br><input type="checkbox"/> i) The schedule for completing and submitting monitoring reports<br><input type="checkbox"/> ii) The content or completeness of submitted reports and/or future reports  |                |   |                         |
| <input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.   |                |   |                         |
| <input type="checkbox"/> The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation  |                |   |                         |
| <input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.   |                |   |                         |
| <b>13.1.2 Post-Award Public Forum</b>  |                |   |                         |
| <input type="checkbox"/> If applicable within the timing of the demonstration, provide a summary of the annual post-award public forum held pursuant to 42 CFR § 431.420(c) indicating any resulting action items or issues. A summary of the post-award public forum must be included here for the period during which the forum was held and in the annual report. |                |   |                         |
| <input checked="" type="checkbox"/> No post-award public forum was held during this reporting period and this is not an annual report, so the state has no post-award public forum update to report for this topic.  |                |   |                         |

| Prompt  | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|----------------|---|-------------------------|
| <b>14.1 Notable State Achievements and/or Innovations</b>   |                |   |                         |
| <b>14.1 Narrative Information</b>   |                |   |                         |
| <input type="checkbox"/> Provide any relevant summary of achievements and/or innovations in demonstration enrollment, benefits, operations, and policies pursuant to the hypotheses of the SUD (or if broader demonstration, then SUD related) demonstration or that served to provide better care for individuals, better health for populations, and/or reduce per capita cost. Achievements should focus on significant impacts to beneficiary outcomes. Whenever possible, the summary should describe the achievement or innovation in quantifiable terms, e.g., number of impacted beneficiaries. |                |   |                         |
| <input checked="" type="checkbox"/> The state has no notable achievements or innovations to report for this reporting topic.  |                |   |                         |

Note: Licensee and states must prominently display the following notice on any display of Measure rates:

*The IET-AD, FUA-AD, FUM-AD, and AAP measures (metrics #15, 17 (1), and 17 (2), and 32) are Healthcare Effectiveness Data and Information Set (“HEDIS®”) measures that are owned and copyrighted by the National Committee for Quality Assurance (“NCQA”). NCQA makes no representations, warranties, or endorsement about the quality of any organization or physician that uses or reports performance measures and NCQA has no liability to anyone who relies on such measures or specifications.*

*The measure specification methodology used by CMS is different from NCQA’s methodology. NCQA has not validated the adjusted measure specifications but has granted CMS permission to adjust. Calculated measure results, based on the adjusted HEDIS specifications, may be called only “Uncertified, Unaudited HEDIS rates.”*

*Certain non-NCQA measures in the CMS 1115 Substance Use Disorder Demonstration contain HEDIS Value Sets (VS) developed by and included with the permission of the NCQA. Proprietary coding is contained in the VS. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. NCQA disclaims all liability for use or accuracy of the VS with the non-NCQA measures and any coding contained in the VS.*

*Note: PRA Disclosure Statement to be added here*

Medicaid Section 1115 SUD Demonstrations Report (Part A) - Metrics (Version 5.0)  
 State Commonwealth Of Kentucky  
 Demonstration Name [Enter Demonstration Name]  
 SUD Demonstration Year (DY) DY1  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY [Enter Calendar Dates for SUD Demonstration Year]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period Q2  
 (Format: Q1, Q2, Q3, Q4)  
 Calendar Dates for SUD Reporting Period (Format: [Enter Calendar Dates for SUD Reporting Period]  
 MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Metric description  |
|--|--|---|
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:<br/>Number of beneficiaries screened for SUD treatment needs using a standardized screening tool during the measurement</i>   |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     | Number of beneficiaries screened for SUD treatment needs using a standardized screening tool during the measurement period  |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | Number of beneficiaries who receive MAT or a SUD-related treatment service with an associated SUD diagnosis during the measurement period but not in the three months before the measurement period |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | Number of beneficiaries who receive MAT or a SUD-related treatment service with an associated SUD diagnosis during the  |

| #  | Metric name   | Metric description   |
|----|---|--|
|    |   | measurement period and/or in the 11 months before the measurement period   |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      | Number of beneficiaries who receive MAT or a SUD-related treatment service with an associated SUD diagnosis during the measurement period and/or in the 12 months before the measurement period                    |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          | Number of beneficiaries with a claim for residential or inpatient treatment for SUD in IMDs during the measurement period.   |
| 6  | Any SUD Treatment   | Number of beneficiaries enrolled in the measurement period receiving any SUD treatment service, facility claim, or pharmacy claim during the measurement period  |
| 7  | Early Intervention  | Number of beneficiaries who used early intervention services (such as procedure codes associated with SBIRT) during the measurement period   |
| 8  | Outpatient Services                                       | Number of beneficiaries who used outpatient services for SUD (such as outpatient recovery or motivational enhancement therapies, step down care, and monitoring for stable patients) during the measurement period |
| 9  | Intensive Outpatient and Partial Hospitalization Services | Number of beneficiaries who used intensive outpatient and/or partial hospitalization services for SUD (such as specialized outpatient SUD therapy or other clinical services) during the measurement period        |
| 10 | Residential and Inpatient Services                        | Number of beneficiaries who use residential and/or inpatient services for SUD during the measurement period  |
| 11 | Withdrawal Management                                     | Number of beneficiaries who use withdrawal management services (such as outpatient, inpatient, or residential) during the measurement period   |
| 12 | Medication-Assisted Treatment (MAT)                       | Number of beneficiaries who have a claim for MAT for SUD during the measurement period   |

| #  | Metric name  | Metric description  |
|----|--|---|
| 13 | SUD Provider Availability  | The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period   |
| 14 | SUD Provider Availability - MAT  | The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period and who meet the standards to provide buprenorphine or methadone as part of MAT   |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> | <p>Percentage of beneficiaries age 18 and older with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following:</p> <ul style="list-style-type: none"> <li>• Initiation of AOD Treatment—percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis</li> <li>• Engagement of AOD Treatment—percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit</li> </ul> <p>The following diagnosis cohorts are reported for each rate: (1) Alcohol abuse or dependence, (2) Opioid abuse or dependence, (3) Other drug abuse or dependence, and (4) Total AOD abuse or dependence. A total of 8 separate rates are reported for this measure.</p> <ul style="list-style-type: none"> <li>• Initiation of AOD Treatment - Alcohol abuse or dependence</li> <li>• Initiation of AOD Treatment - Opioid abuse or dependence</li> <li>• Initiation of AOD Treatment - Other drug abuse or dependence</li> </ul> |

| #     | Metric name  | Metric description   |
|-------|--|--|
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge,<br>SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge<br>[Joint Commission] | <ul style="list-style-type: none"> <li>• Initiation of AOD Treatment - Total AOD abuse of dependence</li> <li>• Engagement of AOD Treatment - Alcohol abuse or dependence</li> <li>• Engagement of AOD Treatment - Opioid abuse or dependence</li> <li>• Engagement of AOD Treatment - Other drug abuse or dependence</li> <li>• Engagement of AOD Treatment - Total AOD abuse of dependence</li> </ul> <p><b>SUB-3:</b> Patients who are identified with alcohol or drug use disorder who receive or refuse at discharge a prescription for FDA-approved medications for alcohol or drug use disorder, OR who receive or refuse a referral for addictions treatment.</p> <p><b>SUB-3a:</b> Patients who are identified with alcohol or drug disorder who receive a prescription for FDA-approved medications for alcohol or drug use disorder OR a referral for addictions treatment.</p> |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD)<br>[NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup>    | <p>Percentage of ED visits for beneficiaries age 18 and older with a principal diagnosis of AOD abuse or dependence who had a follow-up visit for AOD abuse or dependence. Two rates are reported:</p> <ul style="list-style-type: none"> <li>• Percentage of ED visits for which the beneficiary received follow-up within 30 days of the ED visit (31 total days).</li> <li>• Percentage of ED visits for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).</li> </ul>  |

| #     | Metric name   | Metric description  |
|-------|---|---|
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> | <p>Percentage of ED visits for beneficiaries age 18 and older with a principal diagnosis of mental illness or intentional self-harm and who had a follow-up visit for mental illness. Two rates are reported:</p> <ul style="list-style-type: none"> <li>• Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit (31 total days)</li> <li>• Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).</li> </ul> |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   | Percentage of beneficiaries age 18 and older who received prescriptions for opioids with an average daily dosage greater than or equal to 90 morphine milligram equivalents (MME) over a period of 90 days or more. Beneficiaries with a cancer diagnosis, sickle cell disease diagnosis, or in hospice are excluded.   |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  | The percentage of individuals $\geq 18$ years of age who received prescriptions for opioids from $\geq 4$ prescribers AND $\geq 4$ pharmacies within $\leq 180$ days.   |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  | The percentage of individuals $\geq 18$ years of age who received prescriptions for opioids with an average daily dosage of $\geq 90$ morphine milligram equivalents (MME) AND who received prescriptions for opioids from $\geq 4$ prescribers AND $\geq 4$ pharmacies.  |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   | Percentage of beneficiaries age 18 and older with concurrent use of prescription opioids and benzodiazepines. Beneficiaries with a cancer diagnosis, sickle cell disease diagnosis, or in hospice are excluded.   |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder [USC; NQF #3175]  | Percentage of adults 18 years of age and older with pharmacotherapy for OUD who have at least 180 days of continuous treatment  |



| #  | Metric name  | Metric description   |
|----|--|--|
| 23 | Emergency Department Utilization for SUD per 1,000   | Total number of ED visits for SUD per 1,000 beneficiaries in the   |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | Total number of inpatient stays per 1,000 beneficiaries in the measurement period  |
| 25 | Readmissions Among Beneficiaries with SUD  | The rate of all-cause readmissions during the measurement period among beneficiaries with SUD.   |
| 26 | Overdose Deaths (count)  | Number of overdose deaths during the measurement period among Medicaid beneficiaries living in a geographic area covered by the demonstration. The state is encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid).     |
| 27 | Overdose Deaths (rate)   | Rate of overdose deaths during the measurement period among adult Medicaid beneficiaries living in a geographic area covered by the demonstration. The state is encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid). |
| 28 | SUD Spending   | Total Medicaid SUD spending during the measurement period.   |
| 29 | SUD Spending within IMDs   | Total Medicaid SUD spending on inpatient/residential treatment within IMDs during the measurement period.  |
| 30 | Per Capita SUD Spending  | Per capita SUD spending during the measurement period  |
| 31 | Per Capita SUD Spending within IMDs  | Per capita SUD spending within IMDs during the measurement period  |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> | The percentage of Medicaid beneficiaries with SUD who had an ambulatory or preventive care visit during the measurement period.  |

| #   | Metric name  | Metric description  |
|---|--|---|
| 33  | Grievances Related to SUD Treatment Services                         | Number of grievances filed during the measurement period that are related to SUD treatment services         |
| 34  | Appeals Related to SUD Treatment Services                            | Number of appeals filed during the measurement period that are related to SUD treatment services            |
| 35  | Critical Incidents Related to SUD Treatment Services                 | Number of critical incidents filed during the measurement period that are related to SUD treatment services |
| 36  | Average Length of Stay in IMDs                                       | The average length of stay for beneficiaries discharged from IMD inpatient/residential treatment for SUD.   |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |   |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |   |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |   |
| <b>State-specific metrics</b>                             |  |   |
| <i>Add rows for any additional state-specific metrics</i> |  |   |

| # | Metric name | Metric description |
|---|-------------|--------------------|
|---|-------------|--------------------|

Note: Licensee and states must prominently display the following notice on any display of Measure rates:  
*Measures IET-AD, FUA-AD, FUM-AD, and AAP [Metrics #15, 17(1), 17(2), and 32] are Healthcare Effectiveness Data and Information Set (HEDIS®) measures that are owned and copyrighted by the National Committee for Quality Assurance (NCQA). HEDIS measures and specifications are not clinical guidelines, do not establish a standard of medical care and have not been tested for all potential applications. The measures and specifications are provided “as is” without warranty of any kind. NCQA makes no representations, warranties or endorsements about the quality of any product, test or protocol identified as numerator compliant or otherwise identified as meeting the requirements of a HEDIS measure or specification. NCQA makes no representations, warranties, or endorsement about the quality of any organization or clinician who uses or reports performance measures and NCQA has no liability to anyone who relies on HEDIS measures or specifications or data reflective of performance under such measures and specifications.*

*The measure specification methodology used by CMS is different from NCQA’s methodology. NCQA has not validated the adjusted measure specifications but has granted CMS permission to adjust. A calculated measure result (a “rate”) from a HEDIS measure that has not been certified via NCQA’s Measure Certification Program, and is based on adjusted HEDIS specifications, may not be called a “HEDIS rate” until it is audited and designated reportable by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates shall be designated or referred to as “Adjusted, Uncertified, Unaudited HEDIS rates.”*

| # | Metric name | Metric description |
|---|-------------|--------------------|
|---|-------------|--------------------|

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in their monitoring protocol

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report specified in the reporting schedule

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create new columns as needed

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17 from Version 1.1 of the the Medicaid Section 1115 Substance Use Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17 from Version 1.1 of the the Medicaid Section 1115 Substance Use Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to counts for the overall demonstration

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Milestone or reporting topic  | Reporting category                                     |
|--|--|---|--|
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:<br/>Assessment of need and qualification for SUD treatment services</i> | <i>EXAMPLE:<br/>Other monthly and quarterly metric</i> |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     | Assessment of need and qualification for SUD treatment services                     | Other monthly and quarterly metric                     |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | Assessment of need and qualification for SUD treatment services                     | Other monthly and quarterly metric                     |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | Assessment of need and qualification for SUD treatment services                     | Other monthly and quarterly metric                     |

| #  | Metric name   | Milestone or reporting topic                                    | Reporting category                 |
|----|---|---|------------------------------------|
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      | Assessment of need and qualification for SUD treatment services | Other annual metric                |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          | Milestone 2   | Other annual metric                |
| 6  | Any SUD Treatment   | Milestone 1   | Other monthly and quarterly metric |
| 7  | Early Intervention  | Milestone 1   | Other monthly and quarterly metric |
| 8  | Outpatient Services                                       | Milestone 1   | Other monthly and quarterly metric |
| 9  | Intensive Outpatient and Partial Hospitalization Services | Milestone 1   | Other monthly and quarterly metric |
| 10 | Residential and Inpatient Services                        | Milestone 1   | Other monthly and quarterly metric |
| 11 | Withdrawal Management                                     | Milestone 1   | Other monthly and quarterly metric |
| 12 | Medication-Assisted Treatment (MAT)                       | Milestone 1   | Other monthly and quarterly metric |

| #  | Metric name  | Milestone or reporting topic | Reporting category   |
|----|--|------------------------------|--|
| 13 | SUD Provider Availability  | Milestone 4                  | Other annual metric  |
| 14 | SUD Provider Availability - MAT  | Milestone 4                  | Other annual metric  |
| 15 | Initiation and Engagement of Alcohol and Other Drug<br>Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted<br>HEDIS measure] <sup>f</sup> | Milestone 6                  | Annual metric that is an<br>established quality<br>measure |

| #     | Metric name  | Milestone or reporting topic | Reporting category                                   |
|-------|--|------------------------------|--|
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] | Milestone 6                  | Annual metric that is an established quality measure |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> | Milestone 6                  | Annual metric that is an established quality measure |



| #     | Metric name   | Milestone or reporting topic | Reporting category                                   |
|-------|---|------------------------------|--|
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> | Milestone 6                  | Annual metric that is an established quality measure |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   | Milestone 5                  | Annual metric that is an established quality measure |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  | Milestone 5                  | Annual metric that is an established quality measure |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  | Milestone 5                  | Annual metric that is an established quality measure |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   | Milestone 5                  | Annual metric that is an established quality measure |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   | Milestone 1                  | Annual metric that is an established quality measure |

| #  | Metric name  | Milestone or reporting topic | Reporting category                                   |
|----|--|------------------------------|--|
| 23 | Emergency Department Utilization for SUD per 1,000   | Milestone 5                  | Other monthly and quarterly metric                   |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | Other SUD-related metrics    | Other monthly and quarterly metric                   |
| 25 | Readmissions Among Beneficiaries with SUD  | Milestone 6                  | Other annual metric                                  |
| 26 | Overdose Deaths (count)  | Other SUD-related metrics    | Other annual metric                                  |
| 27 | Overdose Deaths (rate)   | Milestone 5                  | Other annual metric                                  |
| 28 | SUD Spending   | Other SUD-related metrics    | Other annual metric                                  |
| 29 | SUD Spending within IMDs   | Other SUD-related metrics    | Other annual metric                                  |
| 30 | Per Capita SUD Spending  | Other SUD-related metrics    | Other annual metric                                  |
| 31 | Per Capita SUD Spending within IMDs  | Other SUD-related metrics    | Other annual metric                                  |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> | Other SUD-related metrics    | Annual metric that is an established quality measure |

| #   | Metric name  | Milestone or reporting topic | Reporting category     |
|---|--|------------------------------|------------------------|
| 33  | Grievances Related to SUD Treatment Services                         | Other SUD-related metrics    | Grievances and appeals |
| 34  | Appeals Related to SUD Treatment Services                            | Other SUD-related metrics    | Grievances and appeals |
| 35  | Critical Incidents Related to SUD Treatment Services                 | Other SUD-related metrics    | Grievances and appeals |
| 36  | Average Length of Stay in IMDs                                       | Milestone 2                  | Other annual metric    |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> | Health IT                    |                        |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> | Health IT                    |                        |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> | Health IT                    |                        |
| <b>State-specific metrics</b>                             |  |                              |                        |
| <i>Add rows for any additional state-specific metrics</i> |  |                              |                        |

| # | Metric name | Milestone or reporting topic | Reporting category |
|---|-------------|------------------------------|--------------------|
|---|-------------|------------------------------|--------------------|

Note: Licensee and states must prominently display the following notice on any display of HEDIS Measures IET-AD, FUA-AD, FUM-AD, and AAP [Metrics #15, 17(1), 17(2), and 32] measures that are owned and copyrighted by the National Committee for Quality Assurance: "These guidelines, do not establish a standard of medical care and have not been tested for a specific purpose. They are provided "as is" without warranty of any kind. NCQA makes no representations, warranties, or endorsement about the quality of any organization or data reflect any liability to anyone who relies on HEDIS measures or specifications or data reflect

The measure specification methodology used by CMS is different from NCQA's methodology but has granted CMS permission to adjust. A calculated measure result (a "rate") from the Medicare Certification Program, and is based on adjusted HEDIS specifications, may not be calculated by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates are Unaudited HEDIS rates."

| # | Metric name | Milestone or reporting topic | Reporting category |
|---|-------------|------------------------------|--------------------|
|---|-------------|------------------------------|--------------------|

- <sup>a</sup> States should create a new metrics report for each reporting quarter
- <sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the
- <sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s
- <sup>d</sup> If applicable. See CMS-provided technical specifications manual
- <sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create
- <sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates
- <sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics
- <sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

- Numerator in #4 should equal the denominator in #30
- The denominator in #23 should equal the denominator in #24
- Numerator in #27 should equal the numerator in #26
- Numerator in #30 should equal the numerator in #28
- Denominator in #31 should equal the numerator in #5
- Numerator in #31 should equal the numerator in #29
- Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Metric type                         | Data source   |
|--|--|-------------------------------------|---|
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:<br/>CMS-constructed</i> | <i>EXAMPLE:<br/>Medical record review or claims</i> |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     | CMS-constructed                     | Medical record review or claims                     |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | CMS-constructed                     | Claims  |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | CMS-constructed                     | Claims  |

| #  | Metric name   | Metric type     | Data source |
|----|---|-----------------|-------------|
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      | CMS-constructed | Claims      |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          | CMS-constructed | Claims      |
| 6  | Any SUD Treatment   | CMS-constructed | Claims      |
| 7  | Early Intervention  | CMS-constructed | Claims      |
| 8  | Outpatient Services                                       | CMS-constructed | Claims      |
| 9  | Intensive Outpatient and Partial Hospitalization Services | CMS-constructed | Claims      |
| 10 | Residential and Inpatient Services                        | CMS-constructed | Claims      |
| 11 | Withdrawal Management                                     | CMS-constructed | Claims      |
| 12 | Medication-Assisted Treatment (MAT)                       | CMS-constructed | Claims      |

| #  | Metric name  | Metric type                 | Data source                                   |
|----|--|-----------------------------|---|
| 13 | SUD Provider Availability  | CMS-constructed             | Provider enrollment database; Claims          |
| 14 | SUD Provider Availability - MAT  | CMS-constructed             | Provider enrollment database, SAMHSA datasets |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> | Established quality measure | Claims  |



| #     | Metric name  | Metric type                 | Data source                     |
|-------|--|-----------------------------|---------------------------------|
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] | Established quality measure | Medical record review or claims |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> | Established quality measure | Claims                          |

| #     | Metric name   | Metric type                 | Data source |
|-------|---|-----------------------------|-------------|
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> | Established quality measure | Claims      |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   | Established quality measure | Claims      |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  | Established quality measure | Claims      |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  | Established quality measure | Claims      |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   | Established quality measure | Claims      |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   | Established quality measure | Claims      |

| #  | Metric name  | Metric type                 | Data source                  |
|----|--|-----------------------------|------------------------------|
| 23 | Emergency Department Utilization for SUD per 1,000   | CMS-constructed             | Claims                       |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | CMS-constructed             | Claims                       |
| 25 | Readmissions Among Beneficiaries with SUD  | CMS-constructed             | Claims                       |
| 26 | Overdose Deaths (count)  | CMS-constructed             | State data on cause of death |
| 27 | Overdose Deaths (rate)   | CMS-constructed             | State data on cause of death |
| 28 | SUD Spending   | CMS-constructed             | Claims                       |
| 29 | SUD Spending within IMDs   | CMS-constructed             | Claims                       |
| 30 | Per Capita SUD Spending  | CMS-constructed             | Claims                       |
| 31 | Per Capita SUD Spending within IMDs  | CMS-constructed             | Claims                       |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> | Established quality measure | Claims                       |

| #  | Metric name  | Metric type     | Data source                            |
|----|--|-----------------|--|
| 33 | Grievances Related to SUD Treatment Services                         | CMS-constructed | Administrative records                 |
| 34 | Appeals Related to SUD Treatment Services                            | CMS-constructed | Administrative records                 |
| 35 | Critical Incidents Related to SUD Treatment Services                 | CMS-constructed | Administrative records                 |
| 36 | Average Length of Stay in IMDs                                       | CMS-constructed | Claims; State-specific<br>IMD database |
| Q1 | <i>Insert selected metric(s) related to key health IT question 1</i> | State-specific  |  |
| Q2 | <i>Insert selected metric(s) related to key health IT question 2</i> | State-specific  |  |
| Q3 | <i>Insert selected metric(s) related to key health IT question 3</i> | State-specific  |  |

**State-specific metrics**

*Add rows for any additional state-specific metrics*

| # | Metric name | Metric type | Data source |
|---|-------------|-------------|-------------|
|---|-------------|-------------|-------------|

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| # | Metric name | Metric type | Data source |
|---|-------------|-------------|-------------|
|---|-------------|-------------|-------------|

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) <sup>b</sup> | Deviations from CMS-provided technical specifications manual in approved protocol   |
|--|--|--|---|
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:<br/>N</i>  | <i>EXAMPLE:<br/>The Department will use state-defined procedure codes (list specific codes) to calculate this metric.</i> |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |  |   |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | Y  |   |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | Y  |   |

| #  | Metric name   | Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) <sup>b</sup> | Deviations from CMS-provided technical specifications manual in approved protocol |
|----|---|--|---|
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |  |   |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          | Y  |   |
| 6  | Any SUD Treatment   | Y  |   |
| 7  | Early Intervention  | Y  |   |
| 8  | Outpatient Services                                       | Y  |   |
| 9  | Intensive Outpatient and Partial Hospitalization Services | Y  |   |
| 10 | Residential and Inpatient Services                        | Y  |   |
| 11 | Withdrawal Management                                     | Y  |   |
| 12 | Medication-Assisted Treatment (MAT)                       | Y  |   |



| #  | Metric name  | Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) <sup>b</sup> | Deviations from CMS-provided technical specifications manual in approved protocol |
|----|--|--|---|
| 13 | SUD Provider Availability  |  |   |
| 14 | SUD Provider Availability - MAT  | Y  |   |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> | Y  |   |

| #     | Metric name  | Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) <sup>b</sup> | Deviations from CMS-provided technical specifications manual in approved protocol |
|-------|--|--|---|
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |  |   |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |  |   |

| #     | Metric name   | Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) <sup>b</sup> | Deviations from CMS-provided technical specifications manual in approved protocol |
|-------|---|--|---|
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |  |   |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |  |   |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |  |   |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |  |   |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |  |   |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |  |   |

| #  | Metric name  | Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) <sup>b</sup> | Deviations from CMS-provided technical specifications manual in approved protocol |
|----|--|--|---|
| 23 | Emergency Department Utilization for SUD per 1,000   | Y  |   |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | Y  |   |
| 25 | Readmissions Among Beneficiaries with SUD  | Y  |   |
| 26 | Overdose Deaths (count)  | Y  |   |
| 27 | Overdose Deaths (rate)   | Y  |   |
| 28 | SUD Spending   | Y  |   |
| 29 | SUD Spending within IMDs   | Y  |   |
| 30 | Per Capita SUD Spending  | Y  |   |
| 31 | Per Capita SUD Spending within IMDs  | Y  |   |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |  |   |

| #   | Metric name  | Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) <sup>b</sup> | Deviations from CMS-provided technical specifications manual in approved protocol |
|---|--|--|---|
| 33  | Grievances Related to SUD Treatment Services                         |  |   |
| 34  | Appeals Related to SUD Treatment Services                            |  |   |
| 35  | Critical Incidents Related to SUD Treatment Services                 |  |   |
| 36  | Average Length of Stay in IMDs                                       |  |   |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> | Y  |   |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |  |   |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |  |   |
| <b>State-specific metrics</b>                             |  |  |   |
| <i>Add rows for any additional state-specific metrics</i> |  |  |   |

| # | Metric name | Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) <sup>b</sup> | Deviations from CMS-provided technical specifications manual in approved protocol |
|---|-------------|--|---|
|---|-------------|--|---|

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The measure specification methodology used by CMS is different from NCQA’s methodology but has granted CMS permission to adjust. A calculated measure result (a “rate”) from the Certification Program, and is based on adjusted HEDIS specifications, may not be calculated by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates are Unaudited HEDIS rates.”

| # | Metric name | Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) <sup>b</sup> | Deviations from CMS-provided technical specifications manual in approved protocol |
|---|-------------|--|---|
|---|-------------|--|---|

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Technical specifications manual version | Reporting issue (Y/N)<br>(further describe in SUD reporting issues tab) |
|--|--|---|---|
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:<br/>Version 3.0</i>         | <i>EXAMPLE:<br/>Y</i>   |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |   |   |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      |   |   |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      |   |   |



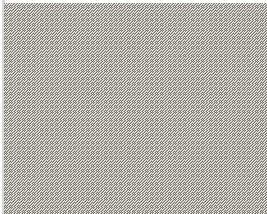


| #  | Metric name   | Technical specifications manual version | Reporting issue (Y/N)<br>(further describe in SUD reporting issues tab) |
|----|---|---|---|
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |   |   |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |   |   |
| 6  | Any SUD Treatment   |   |   |
| 7  | Early Intervention  |   |   |
| 8  | Outpatient Services                                       |   |   |
| 9  | Intensive Outpatient and Partial Hospitalization Services |   |   |
| 10 | Residential and Inpatient Services                        |   |   |
| 11 | Withdrawal Management                                     |   |   |
| 12 | Medication-Assisted Treatment (MAT)                       |   |   |

| #  | Metric name  | Technical specifications manual version | Reporting issue (Y/N)<br>(further describe in SUD reporting issues tab) |
|----|--|---|---|
| 13 | SUD Provider Availability  |   |   |
| 14 | SUD Provider Availability - MAT  |   |   |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |   |   |

| #     | Metric name  | Technical specifications manual version | Reporting issue (Y/N)<br>(further describe in SUD reporting issues tab) |
|-------|--|---|---|
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge,<br>SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge<br>[Joint Commission] |   |   |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD)<br>[NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup>    |   |   |

| #     | Metric name   | Technical specifications manual version | Reporting issue (Y/N) (further describe in SUD reporting issues tab) |
|-------|---|---|--|
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |   |  |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |   |  |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |   |  |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |   |  |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |   |  |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |   |  |

| #  | Metric name  | Technical specifications manual version | Reporting issue (Y/N) (further describe in SUD reporting issues tab) |
|----|--|---|--|
| 23 | Emergency Department Utilization for SUD per 1,000   |   |  |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   |   |  |
| 25 | Readmissions Among Beneficiaries with SUD  |   |  |
| 26 | Overdose Deaths (count)  |   |  |
| 27 | Overdose Deaths (rate)   |   |  |
| 28 | SUD Spending   |   |  |
| 29 | SUD Spending within IMDs   |   |  |
| 30 | Per Capita SUD Spending  |   |  |
| 31 | Per Capita SUD Spending within IMDs  |   |  |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |   |  |

| #   | Metric name  | Technical specifications manual version   | Reporting issue (Y/N)<br>(further describe in SUD reporting issues tab) |
|---|--|---|---|
| 33  | Grievances Related to SUD Treatment Services                         |   |   |
| 34  | Appeals Related to SUD Treatment Services                            |   |   |
| 35  | Critical Incidents Related to SUD Treatment Services                 |   |   |
| 36  | Average Length of Stay in IMDs                                       |   |   |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |  |   |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |   |   |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |   |   |
| <b>State-specific metrics</b>                             |  |  |   |
| <i>Add rows for any additional state-specific metrics</i> |  |  |   |

| # | Metric name | Technical specifications manual version | Reporting issue (Y/N) (further describe in SUD reporting issues tab) |
|---|-------------|---|--|
|---|-------------|---|--|

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| # | Metric name | Technical specifications manual version | Reporting issue (Y/N) (further describe in SUD reporting issues tab) |
|---|-------------|---|--|
|---|-------------|---|--|

- <sup>a</sup> States should create a new metrics report for each reporting quarter
- <sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the
- <sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s
- <sup>d</sup> If applicable. See CMS-provided technical specifications manual
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Disorder Demonstrations: Technical Specifications for Monitoring Metrics
- <sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
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Medicaid Section 1115 SUD Demonstrations Report (Part A) -  
 State  
 Demonstration Name  
 SUD Demonstration Year (DY)  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period  
 (Format: Q1, Q2, Q3, Q4)  
 Calendar Dates for SUD Reporting Period (Format:  
 MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Measurement period<br>(month, quarter, year <sup>c</sup> ) | Dates covered by<br>measurement period<br>(MM/DD/YYYY-<br>MM/DD/YYYY) | Demonstration<br>denominator |
|--|--|--|---|------------------------------|
| <i>EXAMPLE: 1<br/>(Do not delete or<br/>edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized<br/>Screening Tool</i> | <i>EXAMPLE:<br/>Month 1</i>                                | <i>EXAMPLE:<br/>07/01/2018-7/31/2018</i>                              |                              |
|  |  | <i>EXAMPLE:<br/>Month 2</i>                                | <i>EXAMPLE:<br/>08/01/2018-08/31/2018</i>                             |                              |
|  |  | <i>EXAMPLE:<br/>Month 3</i>                                | <i>EXAMPLE:<br/>09/01/2018-09/30/2018</i>                             |                              |
| 1  | Assessed for SUD Treatment Needs Using a<br>Standardized Screening Tool                      | Month 1  |   |                              |
|  |  | Month 2  |   |                              |
|  |  | Month 3  |   |                              |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD<br>Treatment/Diagnosis                       | Month 1  | 10/1/2019-10/31/2019  |                              |
|  |  | Month 2  | 11/1/2019-11/30/2019  |                              |
|  |  | Month 3  | 12/1/2019-12/31/2019  |                              |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)  | Month 1  | 10/1/2019-10/31/2019  |                              |
|  |  | Month 2  | 11/1/2019-11/30/2019  |                              |

| #  | Metric name   | Measurement period<br>(month, quarter, year <sup>c</sup> ) | Dates covered by<br>measurement period<br>(MM/DD/YYYY-<br>MM/DD/YYYY) | Demonstration<br>denominator |
|----|---|--|---|------------------------------|
|    |   | Month 3  |   |                              |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      | Year   | 12/1/2019-12/31/2019  |                              |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          | Year   |   |                              |
| 6  | Any SUD Treatment   | Month 1  | 10/1/2019-10/31/2019  |                              |
|    |   | Month 2  | 11/1/2019-11/30/2019  |                              |
|    |   | Month 3  | 12/1/2019-12/31/2019  |                              |
| 7  | Early Intervention  | Month 1  | 10/1/2019-10/31/2019  |                              |
|    |   | Month 2  | 11/1/2019-11/30/2019  |                              |
|    |   | Month 3  | 12/1/2019-12/31/2019  |                              |
| 8  | Outpatient Services                                       | Month 1  | 10/1/2019-10/31/2019  |                              |
|    |   | Month 2  | 11/1/2019-11/30/2019  |                              |
|    |   | Month 3  | 12/1/2019-12/31/2019  |                              |
| 9  | Intensive Outpatient and Partial Hospitalization Services | Month 1  | 10/1/2019-10/31/2019  |                              |
|    |   | Month 2  | 11/1/2019-11/30/2019  |                              |
|    |   | Month 3  | 12/1/2019-12/31/2019  |                              |
| 10 | Residential and Inpatient Services                        | Month 1  | 10/1/2019-10/31/2019  |                              |
|    |   | Month 2  | 11/1/2019-11/30/2019  |                              |
|    |   | Month 3  | 12/1/2019-12/31/2019  |                              |
| 11 | Withdrawal Management                                     | Month 1  | 10/1/2019-10/31/2019  |                              |
|    |   | Month 2  | 11/1/2019-11/30/2019  |                              |
|    |   | Month 3  | 12/1/2019-12/31/2019  |                              |
| 12 | Medication-Assisted Treatment (MAT)                       | Month 1  | 10/1/2019-10/31/2019  |                              |
|    |   | Month 2  | 11/1/2019-11/30/2019  |                              |
|    |   | Month 3  | 12/1/2019-12/31/2019  |                              |

| #  | Metric name  | Measurement period<br>(month, quarter, year <sup>c</sup> ) | Dates covered by<br>measurement period<br>(MM/DD/YYYY-<br>MM/DD/YYYY)      | Demonstration<br>denominator   |
|----|--|--|--|--|
| 13 | SUD Provider Availability  | Year   |  |  |
| 14 | SUD Provider Availability - MAT  | Year   |  |  |
| 15 | Initiation and Engagement of Alcohol and Other Drug<br>Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted<br>HEDIS measure] <sup>f</sup> | Year   | <div style="background-color: #cccccc; height: 400px; width: 100%;"></div> | <div style="background-color: #cccccc; height: 400px; width: 100%;"></div> |
|    |  |  | 1/1/2019-12/31/2019  | 50618  |
|    |  |  | 1/1/2019-12/31/2019  | 50618  |
|    |  |  | 1/1/2019-12/31/2019  | 50618  |

| #     | Metric name  | Measurement period<br>(month, quarter, year <sup>c</sup> ) | Dates covered by<br>measurement period<br>(MM/DD/YYYY-<br>MM/DD/YYYY) | Demonstration<br>denominator |
|-------|--|--|---|------------------------------|
|       |  |  |   | 50618                        |
|       |  |  | 1/1/2019-12/31/2019   | 50618                        |
|       |  |  | 1/1/2019-12/31/2019   | 50618                        |
|       |  |  | 1/1/2019-12/31/2019   | 50618                        |
|       |  |  | 1/1/2019-12/31/2019   | 50618                        |
|       |  |  | 1/1/2019-12/31/2019   | 50618                        |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] | Year   | 1/1/2019-12/31/2019   |                              |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> | Year   |   |                              |
|       |  |  |   | 9613                         |
|       |  |  | 1/1/2019-12/31/2019   | 9613                         |
|       |  |  | 1/1/2019-12/31/2019   |                              |

| #     | Metric name   | Measurement period<br>(month, quarter, year <sup>c</sup> ) | Dates covered by<br>measurement period<br>(MM/DD/YYYY-<br>MM/DD/YYYY) | Demonstration<br>denominator |
|-------|---|--|---|------------------------------|
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> | Year   |   | 6017                         |
|       |   |  | 1/1/2019-12/31/2019   | 6017                         |
|       |   |  | 1/1/2019-12/31/2019   |                              |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   | Year   |   | 38137                        |
|       |   |  | 1/1/2019-12/31/2019   |                              |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  | Year   |   | 38137                        |
|       |   |  | 1/1/2019-12/31/2019   |                              |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  | Year   |   | 38137                        |
|       |   |  | 1/1/2019-12/31/2019   |                              |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   | Year   |   | 42327                        |
|       |   |  | 1/1/2019-12/31/2019   |                              |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   | Year   |   | 37183                        |
|       |   |  | 1/1/2019-12/31/2019   |                              |

| #  | Metric name  | Measurement period<br>(month, quarter, year <sup>c</sup> ) | Dates covered by<br>measurement period<br>(MM/DD/YYYY-<br>MM/DD/YYYY) | Demonstration<br>denominator |
|----|--|--|---|------------------------------|
| 23 | Emergency Department Utilization for SUD per 1,000   | Month 1  | 10/1/2019-10/31/2019  | 1379043                      |
|    |  | Month 2  | 11/1/2019-11/30/2019  | 1371672                      |
|    |  | Month 3  | 12/1/2019-12/31/2019  | 1368722                      |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | Month 1  | 10/1/2019-10/31/2019  | 1379043                      |
|    |  | Month 2  | 11/1/2019-11/30/2019  | 1371672                      |
|    |  | Month 3  | 12/1/2019-12/31/2019  | 1368722                      |
| 25 | Readmissions Among Beneficiaries with SUD  | Year   |   |                              |
| 26 |  | Overdose Deaths (count)                                    | Year  |                              |
| 27 | Overdose Deaths (rate)   | Year   |   |                              |
| 28 |  | SUD Spending   | Year  |                              |
| 29 | SUD Spending within IMDs   | Year   |   |                              |
| 30 | Per Capita SUD Spending  | Year   |   |                              |
| 31 | Per Capita SUD Spending within IMDs  | Year   |   |                              |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> | Year   |   | 98048                        |
|    |  |  | 1/1/2019-12/31/2019   |                              |

| #   | Metric name  | Measurement period<br>(month, quarter, year <sup>c</sup> ) | Dates covered by<br>measurement period<br>(MM/DD/YYYY-<br>MM/DD/YYYY) | Demonstration<br>denominator |
|---|--|--|---|------------------------------|
| 33  | Grievances Related to SUD Treatment Services                         | Quarter  |   |                              |
| 34  | Appeals Related to SUD Treatment Services                            | Quarter  |   |                              |
| 35  | Critical Incidents Related to SUD Treatment Services                 | Quarter  |   |                              |
| 36  | Average Length of Stay in IMDs                                       | Year   |   |                              |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |  |   |                              |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |  |   |                              |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |  |   |                              |
| <b>State-specific metrics</b>                             |  |  |   |                              |
| <i>Add rows for any additional state-specific metrics</i> |  |  |   |                              |

| # | Metric name | Measurement period<br>(month, quarter, year <sup>c</sup> ) | Dates covered by<br>measurement period<br>(MM/DD/YYYY-<br>MM/DD/YYYY) | Demonstration<br>denominator |
|---|-------------|--|---|------------------------------|
|---|-------------|--|---|------------------------------|

Note: Licensee and states must prominently display the following notice on any display of HEDIS measures: *Measures IET-AD, FUA-AD, FUM-AD, and AAP [Metrics #15, 17(1), 17(2), and 32] are measures that are owned and copyrighted by the National Committee for Quality Assurance. These measures do not establish a standard of medical care and have not been tested for accuracy. They are provided "as is" without warranty of any kind. NCQA makes no representations, warranties, or endorsements about the quality of any organization or the accuracy of any data. NCQA is not liable to anyone who relies on HEDIS measures or specifications or data reflecting performance on these measures.*

*The measure specification methodology used by CMS is different from NCQA's methodology but has granted CMS permission to adjust. A calculated measure result (a "rate") from the CMS Certification Program, and is based on adjusted HEDIS specifications, may not be comparable to an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates are Unaudited HEDIS rates."*



| # | Metric name | Measurement period<br>(month, quarter, year <sup>c</sup> ) | Dates covered by<br>measurement period<br>(MM/DD/YYYY-<br>MM/DD/YYYY) | Demonstration<br>denominator |
|---|-------------|--|---|------------------------------|
|---|-------------|--|---|------------------------------|

- <sup>a</sup> States should create a new metrics report for each reporting quarter
- <sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the
- <sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s
- <sup>d</sup> If applicable. See CMS-provided technical specifications manual
- <sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create
- <sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates
- <sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics
- <sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

- Numerator in #4 should equal the denominator in #30
- The denominator in #23 should equal the denominator in #24
- Numerator in #27 should equal the numerator in #26
- Numerator in #30 should equal the numerator in #28
- Denominator in #31 should equal the numerator in #5
- Numerator in #31 should equal the numerator in #29
- Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

**Substance Use Disorder (SUD) Metrics<sup>a</sup>**

|  |  | Demonstration                    |  |                      |
|--|--|----------------------------------|--|----------------------|
| #  | Metric name  | Demonstration numerator or count | Demonstration rate/percentage <sup>d</sup> | Age < 18 denominator |
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:<br/>100</i>          |  |                      |
|  |  | <i>EXAMPLE:<br/>100</i>          |  |                      |
|  |  | <i>EXAMPLE:<br/>100</i>          |  |                      |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |                                  |  |                      |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 7703<br>6907<br>6927             |  |                      |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 102080<br>102117                 |  |                      |

| Demonstration |   |                                  |  |                      |
|---------------|---|----------------------------------|--|----------------------|
| #             | Metric name   | Demonstration numerator or count | Demonstration rate/percentage <sup>d</sup> | Age < 18 denominator |
|               |   | 102242                           |  |                      |
| 4             | Medicaid Beneficiaries with SUD Diagnosis (annually)      |                                  |  |                      |
| 5             | Medicaid Beneficiaries Treated in an IMD for SUD          |                                  |  |                      |
| 6             | Any SUD Treatment   | 46794<br>45907<br>46215          |  |                      |
| 7             | Early Intervention  | 563<br>473                       |  |                      |
| 8             | Outpatient Services                                       | 497<br>31082<br>30278<br>30595   |  |                      |
| 9             | Intensive Outpatient and Partial Hospitalization Services | 6051<br>5597                     |  |                      |
| 10            | Residential and Inpatient Services                        | 5508<br>3325<br>3073             |  |                      |
| 11            | Withdrawal Management                                     | 3096<br>688<br>523               |  |                      |
| 12            | Medication-Assisted Treatment (MAT)                       | 447<br>26420<br>26185<br>26323   |  |                      |

| Demonstration |  |                                  |  |                      |
|---------------|--|----------------------------------|--|----------------------|
| #             | Metric name  | Demonstration numerator or count | Demonstration rate/percentage <sup>d</sup> | Age < 18 denominator |
| 13            | SUD Provider Availability  |                                  |  |                      |
| 14            | SUD Provider Availability - MAT  |                                  |  |                      |
| 15            | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |                                  |  |                      |
|               |  | 5085                             | 10.0458335                                 |                      |
|               |  | 10455                            | 20.65470781                                |                      |
|               |  | 9674                             | 19.11177842                                |                      |

| #     | Metric name  | Demonstration                    |  | Age < 18 denominator |
|-------|--|----------------------------------|--|----------------------|
|       |  | Demonstration numerator or count | Demonstration rate/percentage <sup>d</sup> |                      |
|       |  | 21906                            | 43.2770951                                 |                      |
|       |  | 2204                             | 4.354182307                                |                      |
|       |  | 8631                             | 17.05124659                                |                      |
|       |  | 5021                             | 9.919396262                                |                      |
|       |  | 13935                            | 27.52973251                                |                      |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |                                  | #DIV/0!                                    |                      |
|       |  |                                  | #DIV/0!                                    |                      |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |                                  |  |                      |
|       |  | 1010                             | 10.50660564                                |                      |
|       |  | 1834                             | 19.07833143                                |                      |

| #     | Metric name   | Demonstration                    |  | Age < 18 denominator |
|-------|---|----------------------------------|--|----------------------|
|       |   | Demonstration numerator or count | Demonstration rate/percentage <sup>d</sup> |                      |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> | 1763                             | 29.30031577                                |                      |
|       |   | 2701                             | 44.88947981                                |                      |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   | 963                              | 25.25106852                                |                      |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  | 3063                             | 80.31570391                                |                      |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  | 48                               | 1.258620238                                |                      |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   | 8643                             | 20.41959033                                |                      |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   | 22563                            | 60.68095635                                |                      |

| #  | Metric name  | Demonstration                    |  |                      |
|----|--|----------------------------------|--|----------------------|
|    |  | Demonstration numerator or count | Demonstration rate/percentage <sup>d</sup> | Age < 18 denominator |
| 23 | Emergency Department Utilization for SUD per 1,000   | 5484                             | 3.976670778                                | 526981               |
|    |  | 4749                             | 3.46219796                                 | 524723               |
|    |  | 5055                             | 3.693226236                                | 523897               |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | 3580                             | 2.59600317                                 | 526981               |
|    |  | 3166                             | 2.308131973                                | 524723               |
|    |  | 3237                             | 2.364979886                                | 523897               |
| 25 | Readmissions Among Beneficiaries with SUD  |                                  | #DIV/0!                                    |                      |
| 26 | Overdose Deaths (count)  |                                  |  |                      |
| 27 | Overdose Deaths (rate)   |                                  | #DIV/0!                                    |                      |
| 28 | SUD Spending   |                                  |  |                      |
| 29 | SUD Spending within IMDs   |                                  |  |                      |
| 30 | Per Capita SUD Spending  |                                  | #DIV/0!                                    |                      |
| 31 | Per Capita SUD Spending within IMDs  |                                  | #DIV/0!                                    |                      |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> | 89685                            | 91.47050424                                |                      |

| Demonstration   |  |                                  |  |                      |
|---|--|----------------------------------|--|----------------------|
| #   | Metric name  | Demonstration numerator or count | Demonstration rate/percentage <sup>d</sup> | Age < 18 denominator |
| 33  | Grievances Related to SUD Treatment Services                         |                                  |  |                      |
| 34  | Appeals Related to SUD Treatment Services                            |                                  |  |                      |
| 35  | Critical Incidents Related to SUD Treatment Services                 |                                  |  |                      |
| 36  | Average Length of Stay in IMDs                                       |                                  | #DIV/0!                                    |                      |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |                                  |  |                      |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |                                  |  |                      |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |                                  |  |                      |
| <b>State-specific metrics</b>                             |  |                                  |  |                      |
| <i>Add rows for any additional state-specific metrics</i> |  |                                  |  |                      |



| # | Metric name | Demonstration                    |  | Age < 18 denominator |
|---|-------------|----------------------------------|--|----------------------|
|   |             | Demonstration numerator or count | Demonstration rate/percentage <sup>d</sup> |                      |

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*The measure specification methodology used by CMS is different from NCQA's methodology but has granted CMS permission to adjust. A calculated measure result (a "rate") from the Medicare Star Certification Program, and is based on adjusted HEDIS specifications, may not be calculated by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates are Unaudited HEDIS rates."*

| # | Metric name | Demonstration                    |  | Age < 18 denominator |
|---|-------------|----------------------------------|--|----------------------|
|   |             | Demonstration numerator or count | Demonstration rate/percentage <sup>d</sup> |                      |

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -  
 State  
 Demonstration Name  
 SUD Demonstration Year (DY)  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period  
 (Format: Q1, Q2, Q3, Q4)  
 Calendar Dates for SUD Reporting Period (Format:  
 MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Age < 18                    |                                      | Age 18-64 denominator |
|--|--|-----------------------------|--------------------------------------|-----------------------|
|  |  | Age < 18 numerator or count | Age <18 rate/percentage <sup>d</sup> |                       |
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:</i>             |                                      |                       |
|  |  | <i>EXAMPLE:</i>             |                                      |                       |
|  |  | <i>EXAMPLE:</i>             |                                      |                       |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |                             |                                      |                       |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 313<br>289<br>254           |                                      |                       |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 2869<br>2884                |                                      |                       |

| #  | Metric name   | Age < 18                    |                                      | Age 18-64 denominator |
|----|---|-----------------------------|--------------------------------------|-----------------------|
|    |   | Age < 18 numerator or count | Age <18 rate/percentage <sup>d</sup> |                       |
|    |   | 2882                        |                                      |                       |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |                             |                                      |                       |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |                             |                                      |                       |
| 6  | Any SUD Treatment   | 738                         |                                      |                       |
|    |   | 714                         |                                      |                       |
|    |   | 657                         |                                      |                       |
| 7  | Early Intervention  | 6                           |                                      |                       |
|    |   | 8                           |                                      |                       |
|    |   | 6                           |                                      |                       |
| 8  | Outpatient Services                                       | 294                         |                                      |                       |
|    |   | 306                         |                                      |                       |
|    |   | 266                         |                                      |                       |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 191                         |                                      |                       |
|    |   | 182                         |                                      |                       |
|    |   | 172                         |                                      |                       |
| 10 | Residential and Inpatient Services                        | 90                          |                                      |                       |
|    |   | 79                          |                                      |                       |
|    |   | 59                          |                                      |                       |
| 11 | Withdrawal Management                                     | 0                           |                                      |                       |
|    |   | 0                           |                                      |                       |
|    |   | 1                           |                                      |                       |
| 12 | Medication-Assisted Treatment (MAT)                       | 22                          |                                      |                       |
|    |   | 26                          |                                      |                       |
|    |   | 29                          |                                      |                       |

|    |  | Age < 18                          |   |                          |
|----|--|-----------------------------------|---|--------------------------|
| #  | Metric name  | Age < 18<br>numerator or<br>count | Age <18<br>rate/percentage <sup>d</sup> | Age 18-64<br>denominator |
| 13 | SUD Provider Availability  |                                   |   |                          |
| 14 | SUD Provider Availability - MAT  |                                   |   |                          |
| 15 | Initiation and Engagement of Alcohol and Other Drug<br>Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted<br>HEDIS measure] <sup>f</sup> |                                   |   |                          |

| #     | Metric name  | Age < 18                    |                                      | Age 18-64 denominator |
|-------|--|-----------------------------|--------------------------------------|-----------------------|
|       |  | Age < 18 numerator or count | Age <18 rate/percentage <sup>d</sup> |                       |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |                             |                                      |                       |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |                             |                                      |                       |

| #     | Metric name   | Age < 18                    |                                      | Age 18-64 denominator |
|-------|---|-----------------------------|--------------------------------------|-----------------------|
|       |   | Age < 18 numerator or count | Age <18 rate/percentage <sup>d</sup> |                       |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |                             |                                      |                       |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |                             |                                      |                       |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |                             |                                      |                       |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |                             |                                      |                       |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |                             |                                      |                       |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |                             |                                      |                       |

| #  | Metric name  | Age < 18                          |   |                          |
|----|--|-----------------------------------|---|--------------------------|
|    |  | Age < 18<br>numerator or<br>count | Age <18<br>rate/percentage <sup>d</sup> | Age 18-64<br>denominator |
| 23 | Emergency Department Utilization for SUD per 1,000   | 109                               | 0.206838577                             | 762428                   |
|    |  | 92                                | 0.175330603                             | 757078                   |
|    |  | 78                                | 0.148884227                             | 754815                   |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | 148                               | 0.28084504                              | 762428                   |
|    |  | 109                               | 0.207728649                             | 757078                   |
| 25 | Readmissions Among Beneficiaries with SUD  | 96                                | 0.183242126                             | 754815                   |
|    |  |                                   |   |                          |
| 26 | Overdose Deaths (count)  |                                   |   |                          |
| 27 | Overdose Deaths (rate)   |                                   | #DIV/0!                                 |                          |
| 28 | SUD Spending   |                                   |   |                          |
| 29 | SUD Spending within IMDs   |                                   |   |                          |
| 30 | Per Capita SUD Spending  |                                   |   |                          |
| 31 | Per Capita SUD Spending within IMDs  |                                   |   |                          |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |                                   |   |                          |



|   |  | Age < 18                          |   |                          |
|---|--|-----------------------------------|---|--------------------------|
| #   | Metric name  | Age < 18<br>numerator or<br>count | Age <18<br>rate/percentage <sup>d</sup> | Age 18-64<br>denominator |
| 33  | Grievances Related to SUD Treatment Services                         |                                   |   |                          |
| 34  | Appeals Related to SUD Treatment Services                            |                                   |   |                          |
| 35  | Critical Incidents Related to SUD Treatment Services                 |                                   |   |                          |
| 36  | Average Length of Stay in IMDs                                       |                                   |   |                          |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |                                   |   |                          |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |                                   |   |                          |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |                                   |   |                          |
| <b>State-specific metrics</b>                             |  |                                   |   |                          |
| <i>Add rows for any additional state-specific metrics</i> |  |                                   |   |                          |

| # | Metric name | Age < 18                    |                                      | Age 18-64 denominator |
|---|-------------|-----------------------------|--------------------------------------|-----------------------|
|   |             | Age < 18 numerator or count | Age <18 rate/percentage <sup>d</sup> |                       |

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*The measure specification methodology used by CMS is different from NCQA’s methodology but has granted CMS permission to adjust. A calculated measure result (a “rate”) from the Certification Program, and is based on adjusted HEDIS specifications, may not be calculated by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates are Unaudited HEDIS rates.”*

| # | Metric name | Age < 18                    |                                      | Age 18-64 denominator |
|---|-------------|-----------------------------|--------------------------------------|-----------------------|
|   |             | Age < 18 numerator or count | Age <18 rate/percentage <sup>d</sup> |                       |

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

|  |  | Age 18-64                          |   |                        |
|--|--|------------------------------------|---|------------------------|
| #  | Metric name  | Age 18-64<br>numerator or<br>count | Age 18-64<br>rate/percentage <sup>d</sup> | Age 65+<br>denominator |
| <i>EXAMPLE: 1<br/>(Do not delete or<br/>edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized<br/>Screening Tool</i> | <i>EXAMPLE:</i>                    |   |                        |
|  |  | <i>EXAMPLE:</i>                    |   |                        |
|  |  | <i>EXAMPLE:</i>                    |   |                        |
| 1  | Assessed for SUD Treatment Needs Using a<br>Standardized Screening Tool                      |                                    |   |                        |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD<br>Treatment/Diagnosis                       | 7206<br>6465<br>6509               |   |                        |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)  | 97106<br>97105                     |   |                        |

|    |   | Age 18-64                          |   |                        |
|----|---|------------------------------------|---|------------------------|
| #  | Metric name   | Age 18-64<br>numerator or<br>count | Age 18-64<br>rate/percentage <sup>d</sup> | Age 65+<br>denominator |
|    |   | 97218                              |   |                        |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |                                    |   |                        |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |                                    |   |                        |
| 6  | Any SUD Treatment   | 45449                              |   |                        |
|    |   | 44634                              |   |                        |
|    |   | 44979                              |   |                        |
| 7  | Early Intervention  | 554                                |   |                        |
|    |   | 461                                |   |                        |
|    |   | 489                                |   |                        |
| 8  | Outpatient Services                                       | 30509                              |   |                        |
|    |   | 29740                              |   |                        |
|    |   | 30089                              |   |                        |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 5842                               |   |                        |
|    |   | 5399                               |   |                        |
|    |   | 5317                               |   |                        |
| 10 | Residential and Inpatient Services                        | 3215                               |   |                        |
|    |   | 2976                               |   |                        |
|    |   | 3017                               |   |                        |
| 11 | Withdrawal Management                                     | 687                                |   |                        |
|    |   | 518                                |   |                        |
|    |   | 444                                |   |                        |
| 12 | Medication-Assisted Treatment (MAT)                       | 26377                              |   |                        |
|    |   | 26142                              |   |                        |
|    |   | 26278                              |   |                        |

|    |  | Age 18-64                          |   |                        |
|----|--|------------------------------------|---|------------------------|
| #  | Metric name  | Age 18-64<br>numerator or<br>count | Age 18-64<br>rate/percentage <sup>d</sup> | Age 65+<br>denominator |
| 13 | SUD Provider Availability  |                                    |   |                        |
| 14 | SUD Provider Availability - MAT  |                                    |   |                        |
| 15 | Initiation and Engagement of Alcohol and Other Drug<br>Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted<br>HEDIS measure] <sup>f</sup> |                                    |   |                        |

| #     | Metric name  | Age 18-64                    |  | Age 65+ denominator |
|-------|--|------------------------------|--|---------------------|
|       |  | Age 18-64 numerator or count | Age 18-64 rate/percentage <sup>d</sup> |                     |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |                              |  |                     |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |                              |  |                     |

|       |   | Age 18-64                          |   |                        |
|-------|---|------------------------------------|---|------------------------|
| #     | Metric name   | Age 18-64<br>numerator or<br>count | Age 18-64<br>rate/percentage <sup>d</sup> | Age 65+<br>denominator |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |                                    |   |                        |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |                                    |   |                        |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |                                    |   |                        |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |                                    |   |                        |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |                                    |   |                        |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |                                    |   |                        |



| Age 18-64 |  |                                    |   |                        |
|-----------|--|------------------------------------|---|------------------------|
| #         | Metric name  | Age 18-64<br>numerator or<br>count | Age 18-64<br>rate/percentage <sup>d</sup> | Age 65+<br>denominator |
| 23        | Emergency Department Utilization for SUD per 1,000   | 5313                               | 6.968526864                               | 89634                  |
|           |  | 4586                               | 6.05750002                                | 89871                  |
|           |  | 4909                               | 6.503580348                               | 90010                  |
| 24        | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | 3077                               | 4.035790921                               | 89634                  |
|           |  | 2740                               | 3.619177945                               | 89871                  |
|           |  | 2794                               | 3.701569259                               | 90010                  |
| 25        | Readmissions Among Beneficiaries with SUD  |                                    |   |                        |
| 26        | Overdose Deaths (count)  |                                    |   |                        |
| 27        | Overdose Deaths (rate)   |                                    | #DIV/0!                                   |                        |
| 28        | SUD Spending   |                                    |   |                        |
| 29        | SUD Spending within IMDs   |                                    |   |                        |
| 30        | Per Capita SUD Spending  |                                    |   |                        |
| 31        | Per Capita SUD Spending within IMDs  |                                    |   |                        |
| 32        | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |                                    |   |                        |

|   |  | Age 18-64                          |   |                        |
|---|--|------------------------------------|---|------------------------|
| #   | Metric name  | Age 18-64<br>numerator or<br>count | Age 18-64<br>rate/percentage <sup>d</sup> | Age 65+<br>denominator |
| 33  | Grievances Related to SUD Treatment Services                         |                                    |   |                        |
| 34  | Appeals Related to SUD Treatment Services                            |                                    |   |                        |
| 35  | Critical Incidents Related to SUD Treatment Services                 |                                    |   |                        |
| 36  | Average Length of Stay in IMDs                                       |                                    |   |                        |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |                                    |   |                        |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |                                    |   |                        |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |                                    |   |                        |
| <b>State-specific metrics</b>                             |  |                                    |   |                        |
| <i>Add rows for any additional state-specific metrics</i> |  |                                    |   |                        |

|   |             | Age 18-64                    |  |                     |
|---|-------------|------------------------------|--|---------------------|
| # | Metric name | Age 18-64 numerator or count | Age 18-64 rate/percentage <sup>d</sup> | Age 65+ denominator |

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| # | Metric name | Age 18-64                    |  | Age 65+ denominator |
|---|-------------|------------------------------|--|---------------------|
|   |             | Age 18-64 numerator or count | Age 18-64 rate/percentage <sup>d</sup> |                     |

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Age 65+                    |                                      | Dual elig  |
|--|--|----------------------------|--------------------------------------|--|
|  |  | Age 65+ numerator or count | Age 65+ rate/percentage <sup>d</sup> | Dual eligible (Medicare-Medicaid eligible) denominator |
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:</i>            |                                      |  |
|  |  | <i>EXAMPLE:</i>            |                                      |  |
|  |  | <i>EXAMPLE:</i>            |                                      |  |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |                            |                                      |  |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 184<br>153<br>164          |                                      |  |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 2105<br>2128               |                                      |  |

| #  | Metric name   | Age 65+                    |                                      | Dual elig  |
|----|---|----------------------------|--------------------------------------|--|
|    |   | Age 65+ numerator or count | Age 65+ rate/percentage <sup>d</sup> | Dual eligible (Medicare-Medicaid eligible) denominator |
|    |   | 2142                       |                                      |  |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |                            |                                      |  |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |                            |                                      |  |
| 6  | Any SUD Treatment   | 607                        |                                      |  |
|    |   | 559                        |                                      |  |
|    |   | 579                        |                                      |  |
| 7  | Early Intervention  | 3                          |                                      |  |
|    |   | 4                          |                                      |  |
|    |   | 2                          |                                      |  |
| 8  | Outpatient Services                                       | 279                        |                                      |  |
|    |   | 232                        |                                      |  |
|    |   | 240                        |                                      |  |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 18                         |                                      |  |
|    |   | 16                         |                                      |  |
|    |   | 19                         |                                      |  |
| 10 | Residential and Inpatient Services                        | 20                         |                                      |  |
|    |   | 18                         |                                      |  |
|    |   | 20                         |                                      |  |
| 11 | Withdrawal Management                                     | 1                          |                                      |  |
|    |   | 5                          |                                      |  |
|    |   | 2                          |                                      |  |
| 12 | Medication-Assisted Treatment (MAT)                       | 21                         |                                      |  |
|    |   | 17                         |                                      |  |
|    |   | 16                         |                                      |  |

| #  | Metric name  | Age 65+                    |                                      | Dual elig  |
|----|--|----------------------------|--------------------------------------|--|
|    |  | Age 65+ numerator or count | Age 65+ rate/percentage <sup>d</sup> | Dual eligible (Medicare-Medicaid eligible) denominator |
| 13 | SUD Provider Availability  |                            |                                      |  |
| 14 | SUD Provider Availability - MAT  |                            |                                      |  |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |                            |                                      |  |

| #     | Metric name  | Age 65+                    |                                      | Dual elig  |
|-------|--|----------------------------|--------------------------------------|--|
|       |  | Age 65+ numerator or count | Age 65+ rate/percentage <sup>d</sup> | Dual eligible (Medicare-Medicaid eligible) denominator |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |                            |                                      |  |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |                            |                                      |  |



| #     | Metric name   | Age 65+                    |                                      | Dual elig  |
|-------|---|----------------------------|--------------------------------------|--|
|       |   | Age 65+ numerator or count | Age 65+ rate/percentage <sup>d</sup> | Dual eligible (Medicare-Medicaid eligible) denominator |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |                            |                                      |  |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |                            |                                      |  |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |                            |                                      |  |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |                            |                                      |  |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |                            |                                      |  |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |                            |                                      |  |

| #  | Metric name  | Age 65+                          |   | Dual eligible<br>(Medicare-Medicaid<br>eligible)<br>denominator |
|----|--|----------------------------------|---|---|
|    |  | Age 65+<br>numerator or<br>count | Age 65+<br>rate/percentage <sup>d</sup> |   |
| 23 | Emergency Department Utilization for SUD per 1,000   | 62                               | 0.69170181                              |   |
|    |  | 71                               | 0.790021253                             |   |
|    |  | 68                               | 0.755471614                             |   |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | 355                              | 3.960550684                             |   |
|    |  | 317                              | 3.527277987                             |   |
|    |  | 347                              | 3.855127208                             |   |
| 25 | Readmissions Among Beneficiaries with SUD  |                                  |   |   |
| 26 | Overdose Deaths (count)  |                                  |   |   |
| 27 | Overdose Deaths (rate)   |                                  | #DIV/0!                                 |   |
| 28 | SUD Spending   |                                  |   |   |
| 29 | SUD Spending within IMDs   |                                  |   |   |
| 30 | Per Capita SUD Spending  |                                  |   |   |
| 31 | Per Capita SUD Spending within IMDs  |                                  |   |   |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |                                  |   |   |

| #   | Metric name  | Age 65+                    |                                      | Dual elig  |
|---|--|----------------------------|--------------------------------------|--|
|   |  | Age 65+ numerator or count | Age 65+ rate/percentage <sup>d</sup> | Dual eligible (Medicare-Medicaid eligible) denominator |
| 33  | Grievances Related to SUD Treatment Services                         |                            |                                      |  |
| 34  | Appeals Related to SUD Treatment Services                            |                            |                                      |  |
| 35  | Critical Incidents Related to SUD Treatment Services                 |                            |                                      |  |
| 36  | Average Length of Stay in IMDs                                       |                            |                                      |  |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |                            |                                      |  |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |                            |                                      |  |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |                            |                                      |  |
| <b>State-specific metrics</b>                             |  |                            |                                      |  |
| <i>Add rows for any additional state-specific metrics</i> |  |                            |                                      |  |

| # | Metric name | Age 65+                    |                                      | Dual elig  |
|---|-------------|----------------------------|--------------------------------------|--|
|   |             | Age 65+ numerator or count | Age 65+ rate/percentage <sup>d</sup> | Dual eligible (Medicare-Medicaid eligible) denominator |

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| # | Metric name | Age 65+                    |                                      | Dual elig  |
|---|-------------|----------------------------|--------------------------------------|--|
|   |             | Age 65+ numerator or count | Age 65+ rate/percentage <sup>d</sup> | Dual eligible (Medicare-Medicaid eligible) denominator |

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Medicare-Medicaid eligible (Medicare-Medicaid eligible) numerator or count | Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>d</sup> | Medicaid only denominator |
|--|--|--|---|---------------------------|
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:</i>  |   |                           |
|  |  | <i>EXAMPLE:</i>  |   |                           |
|  |  | <i>EXAMPLE:</i>  |   |                           |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |  |   |                           |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 541<br>510<br>471  |   |                           |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 7252<br>7265   |   |                           |

| #  | Metric name   | Medicare-Medicaid eligible (Medicare-Medicaid eligible) Dual eligible (Medicare-Medicaid eligible) numerator or count | Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>d</sup> | Medicaid only denominator |
|----|---|---|---|---------------------------|
|    |   | 7244  |   |                           |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |   |   |                           |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |   |   |                           |
| 6  | Any SUD Treatment   | 2313  |   |                           |
|    |   | 2237  |   |                           |
|    |   | 2220  |   |                           |
| 7  | Early Intervention  | 13  |   |                           |
|    |   | 15  |   |                           |
|    |   | 10  |   |                           |
| 8  | Outpatient Services                                       | 1508  |   |                           |
|    |   | 1390  |   |                           |
|    |   | 1402  |   |                           |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 235   |   |                           |
|    |   | 210   |   |                           |
|    |   | 192   |   |                           |
| 10 | Residential and Inpatient Services                        | 61  |   |                           |
|    |   | 65  |   |                           |
|    |   | 62  |   |                           |
| 11 | Withdrawal Management                                     | 19  |   |                           |
|    |   | 22  |   |                           |
|    |   | 15  |   |                           |
| 12 | Medication-Assisted Treatment (MAT)                       | 82  |   |                           |
|    |   | 75  |   |                           |
|    |   | 76  |   |                           |

| #  | Metric name  | Dual eligible (Medicare-Medicaid eligible)<br>Dual eligible (Medicare-Medicaid eligible)<br>numerator or count | Dual eligible (Medicare-Medicaid eligible)<br>rate/percentage <sup>d</sup><br>Medicaid only denominator |
|----|--|--|---|
| 13 | SUD Provider Availability  |  |   |
| 14 | SUD Provider Availability - MAT  |  |   |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |  |   |



| #     | Metric name  | Dual eligible (Medicare-Medicaid eligible) numerator or count | Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>d</sup> | Medicaid only denominator |
|-------|--|---|---|---------------------------|
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |   |   |                           |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |   |   |                           |

| #     | Metric name   | Dual eligible (Medicare-Medicaid eligible)<br>Dual eligible (Medicare-Medicaid eligible)<br>numerator or count | Dual eligible (Medicare-Medicaid eligible)<br>rate/percentage <sup>d</sup> | Medicaid only denominator |
|-------|---|--|--|---------------------------|
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |  |  |                           |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |  |  |                           |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |  |  |                           |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |  |  |                           |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |  |  |                           |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |  |  |                           |

| #  | Metric name  | Dual eligible (Medicare-Medicaid eligible) numerator or count | Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>d</sup> | Medicaid only denominator |
|----|--|---|---|---------------------------|
| 23 | Emergency Department Utilization for SUD per 1,000   |   |   |                           |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   |   |   |                           |
| 25 | Readmissions Among Beneficiaries with SUD  |   |   |                           |
| 26 | Overdose Deaths (count)  |   |   |                           |
| 27 | Overdose Deaths (rate)   |   |   |                           |
| 28 | SUD Spending   |   |   |                           |
| 29 | SUD Spending within IMDs   |   |   |                           |
| 30 | Per Capita SUD Spending  |   |   |                           |
| 31 | Per Capita SUD Spending within IMDs  |   |   |                           |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |   |   |                           |

| #   | Metric name  | Dual eligible (Medicare-Medicaid eligible)<br>Dual eligible (Medicare-Medicaid eligible)<br>numerator or count | Dual eligible (Medicare-Medicaid eligible)<br>rate/percentage <sup>d</sup> | Medicaid only denominator |
|---|--|--|--|---------------------------|
| 33  | Grievances Related to SUD Treatment Services                         |  |  |                           |
| 34  | Appeals Related to SUD Treatment Services                            |  |  |                           |
| 35  | Critical Incidents Related to SUD Treatment Services                 |  |  |                           |
| 36  | Average Length of Stay in IMDs                                       |  |  |                           |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |  |  |                           |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |  |  |                           |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |  |  |                           |
| <b>State-specific metrics</b>                             |  |  |  |                           |
| <i>Add rows for any additional state-specific metrics</i> |  |  |  |                           |

| # | Metric name | Dual eligible (Medicare-Medicaid eligible) numerator or count | Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>d</sup> | Medicaid only denominator |
|---|-------------|---|---|---------------------------|
|---|-------------|---|---|---------------------------|

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| # | Metric name | Dual eligible (Medicare-Medicaid eligible) numerator or count | Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>d</sup> | Medicaid only denominator |
|---|-------------|---|---|---------------------------|
|---|-------------|---|---|---------------------------|

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

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Numerator in #4 should equal the denominator in #30

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Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Medicaid only                    |  | Pregnant denominator |
|--|--|----------------------------------|--|----------------------|
|  |  | Medicaid only numerator or count | Medicaid only rate/percentage <sup>d</sup> |                      |
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:</i>                  |  |                      |
|  |  | <i>EXAMPLE:</i>                  |  |                      |
|  |  | <i>EXAMPLE:</i>                  |  |                      |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |                                  |  |                      |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 7162<br>6397<br>6456             |  |                      |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 94828<br>94852                   |  |                      |

| #  | Metric name   | Medicaid only                    |  | Pregnant denominator |
|----|---|----------------------------------|--|----------------------|
|    |   | Medicaid only numerator or count | Medicaid only rate/percentage <sup>d</sup> |                      |
|    |   | 94998                            |  |                      |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |                                  |  |                      |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |                                  |  |                      |
| 6  | Any SUD Treatment   | 44481                            |  |                      |
|    |   | 43670                            |  |                      |
|    |   | 43995                            |  |                      |
| 7  | Early Intervention  | 550                              |  |                      |
|    |   | 458                              |  |                      |
|    |   | 487                              |  |                      |
| 8  | Outpatient Services                                       | 29574                            |  |                      |
|    |   | 28888                            |  |                      |
|    |   | 29193                            |  |                      |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 5816                             |  |                      |
|    |   | 5387                             |  |                      |
|    |   | 5316                             |  |                      |
| 10 | Residential and Inpatient Services                        | 3264                             |  |                      |
|    |   | 3008                             |  |                      |
|    |   | 3034                             |  |                      |
| 11 | Withdrawal Management                                     | 669                              |  |                      |
|    |   | 501                              |  |                      |
|    |   | 432                              |  |                      |
| 12 | Medication-Assisted Treatment (MAT)                       | 26338                            |  |                      |
|    |   | 26110                            |  |                      |
|    |   | 26247                            |  |                      |



| #  | Metric name  | Medicaid only                    |  | Pregnant denominator |
|----|--|----------------------------------|--|----------------------|
|    |  | Medicaid only numerator or count | Medicaid only rate/percentage <sup>d</sup> |                      |
| 13 | SUD Provider Availability  |                                  |  |                      |
| 14 | SUD Provider Availability - MAT  |                                  |  |                      |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |                                  |  |                      |

| #     | Metric name  | Medicaid only                    |  | Pregnant denominator |
|-------|--|----------------------------------|--|----------------------|
|       |  | Medicaid only numerator or count | Medicaid only rate/percentage <sup>d</sup> |                      |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |                                  |  |                      |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |                                  |  |                      |

| #     | Metric name   | Medicaid only                    |  | Pregnant denominator |
|-------|---|----------------------------------|--|----------------------|
|       |   | Medicaid only numerator or count | Medicaid only rate/percentage <sup>d</sup> |                      |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |                                  |  |                      |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |                                  |  |                      |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |                                  |  |                      |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |                                  |  |                      |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |                                  |  |                      |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |                                  |  |                      |

| #  | Metric name  | Medicaid only                    |  | Pregnant denominator |
|----|--|----------------------------------|--|----------------------|
|    |  | Medicaid only numerator or count | Medicaid only rate/percentage <sup>d</sup> |                      |
| 23 | Emergency Department Utilization for SUD per 1,000   |                                  |  |                      |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   |                                  |  |                      |
| 25 | Readmissions Among Beneficiaries with SUD  |                                  |  |                      |
| 26 | Overdose Deaths (count)  |                                  |  |                      |
| 27 | Overdose Deaths (rate)   |                                  |  |                      |
| 28 | SUD Spending   |                                  |  |                      |
| 29 | SUD Spending within IMDs   |                                  |  |                      |
| 30 | Per Capita SUD Spending  |                                  |  |                      |
| 31 | Per Capita SUD Spending within IMDs  |                                  |  |                      |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |                                  |  |                      |

| #   | Metric name  | Medicaid only                    |  | Pregnant denominator |
|---|--|----------------------------------|--|----------------------|
|   |  | Medicaid only numerator or count | Medicaid only rate/percentage <sup>d</sup> |                      |
| 33  | Grievances Related to SUD Treatment Services                         |                                  |  |                      |
| 34  | Appeals Related to SUD Treatment Services                            |                                  |  |                      |
| 35  | Critical Incidents Related to SUD Treatment Services                 |                                  |  |                      |
| 36  | Average Length of Stay in IMDs                                       |                                  |  |                      |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |                                  |  |                      |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |                                  |  |                      |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |                                  |  |                      |
| <b>State-specific metrics</b>                             |  |                                  |  |                      |
| <i>Add rows for any additional state-specific metrics</i> |  |                                  |  |                      |

| # | Metric name | Medicaid only                    |  | Pregnant denominator |
|---|-------------|----------------------------------|--|----------------------|
|   |             | Medicaid only numerator or count | Medicaid only rate/percentage <sup>d</sup> |                      |

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| # | Metric name | Medicaid only                    |  | Pregnant denominator |
|---|-------------|----------------------------------|--|----------------------|
|   |             | Medicaid only numerator or count | Medicaid only rate/percentage <sup>d</sup> |                      |

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

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<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

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Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Pregnant                    |                                       | Not pregnant denominator |
|--|--|-----------------------------|---------------------------------------|--------------------------|
|  |  | Pregnant numerator or count | Pregnant rate/percentage <sup>d</sup> |                          |
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:</i>             |                                       |                          |
|  |  | <i>EXAMPLE:</i>             |                                       |                          |
|  |  | <i>EXAMPLE:</i>             |                                       |                          |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |                             |                                       |                          |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 1977<br>1777<br>1795        |                                       |                          |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 19690<br>19159              |                                       |                          |



| #  | Metric name   | Pregnant                    |                                       | Not pregnant denominator |
|----|---|-----------------------------|---------------------------------------|--------------------------|
|    |   | Pregnant numerator or count | Pregnant rate/percentage <sup>d</sup> |                          |
|    |   | 18891                       |                                       |                          |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |                             |                                       |                          |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |                             |                                       |                          |
| 6  | Any SUD Treatment   | 9634                        |                                       |                          |
|    |   | 9138                        |                                       |                          |
|    |   | 9093                        |                                       |                          |
| 7  | Early Intervention  | 101                         |                                       |                          |
|    |   | 92                          |                                       |                          |
|    |   | 96                          |                                       |                          |
| 8  | Outpatient Services                                       | 6003                        |                                       |                          |
|    |   | 5566                        |                                       |                          |
|    |   | 5621                        |                                       |                          |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 1357                        |                                       |                          |
|    |   | 1210                        |                                       |                          |
|    |   | 1174                        |                                       |                          |
| 10 | Residential and Inpatient Services                        | 884                         |                                       |                          |
|    |   | 805                         |                                       |                          |
|    |   | 743                         |                                       |                          |
| 11 | Withdrawal Management                                     | 234                         |                                       |                          |
|    |   | 167                         |                                       |                          |
|    |   | 150                         |                                       |                          |
| 12 | Medication-Assisted Treatment (MAT)                       | 4501                        |                                       |                          |
|    |   | 4319                        |                                       |                          |
|    |   | 4334                        |                                       |                          |

| #  | Metric name  | Pregnant                    |                                       | Not pregnant denominator |
|----|--|-----------------------------|---------------------------------------|--------------------------|
|    |  | Pregnant numerator or count | Pregnant rate/percentage <sup>d</sup> |                          |
| 13 | SUD Provider Availability  |                             |                                       |                          |
| 14 | SUD Provider Availability - MAT  |                             |                                       |                          |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |                             |                                       |                          |

| #     | Metric name  | Pregnant                    |                                       | Not pregnant denominator |
|-------|--|-----------------------------|---------------------------------------|--------------------------|
|       |  | Pregnant numerator or count | Pregnant rate/percentage <sup>d</sup> |                          |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |                             |                                       |                          |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |                             |                                       |                          |

| #     | Metric name   | Pregnant                    |                                       | Not pregnant denominator |
|-------|---|-----------------------------|---------------------------------------|--------------------------|
|       |   | Pregnant numerator or count | Pregnant rate/percentage <sup>d</sup> |                          |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |                             |                                       |                          |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |                             |                                       |                          |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |                             |                                       |                          |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |                             |                                       |                          |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |                             |                                       |                          |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |                             |                                       |                          |

| #  | Metric name  | Pregnant                    |                                       | Not pregnant denominator |
|----|--|-----------------------------|---------------------------------------|--------------------------|
|    |  | Pregnant numerator or count | Pregnant rate/percentage <sup>d</sup> |                          |
| 23 | Emergency Department Utilization for SUD per 1,000   |                             |                                       |                          |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   |                             |                                       |                          |
| 25 | Readmissions Among Beneficiaries with SUD  |                             |                                       |                          |
| 26 | Overdose Deaths (count)  |                             |                                       |                          |
| 27 | Overdose Deaths (rate)   |                             |                                       |                          |
| 28 | SUD Spending   |                             |                                       |                          |
| 29 | SUD Spending within IMDs   |                             |                                       |                          |
| 30 | Per Capita SUD Spending  |                             |                                       |                          |
| 31 | Per Capita SUD Spending within IMDs  |                             |                                       |                          |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |                             |                                       |                          |

| #   | Metric name  | Pregnant                    |                                       | Not pregnant denominator |
|---|--|-----------------------------|---------------------------------------|--------------------------|
|   |  | Pregnant numerator or count | Pregnant rate/percentage <sup>d</sup> |                          |
| 33  | Grievances Related to SUD Treatment Services                         |                             |                                       |                          |
| 34  | Appeals Related to SUD Treatment Services                            |                             |                                       |                          |
| 35  | Critical Incidents Related to SUD Treatment Services                 |                             |                                       |                          |
| 36  | Average Length of Stay in IMDs                                       |                             |                                       |                          |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |                             |                                       |                          |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |                             |                                       |                          |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |                             |                                       |                          |
| <b>State-specific metrics</b>                             |  |                             |                                       |                          |
| <i>Add rows for any additional state-specific metrics</i> |  |                             |                                       |                          |

| # | Metric name | Pregnant                    |                                       | Not pregnant denominator |
|---|-------------|-----------------------------|---------------------------------------|--------------------------|
|   |             | Pregnant numerator or count | Pregnant rate/percentage <sup>d</sup> |                          |

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| # | Metric name | Pregnant                    |                                       | Not pregnant denominator |
|---|-------------|-----------------------------|---------------------------------------|--------------------------|
|   |             | Pregnant numerator or count | Pregnant rate/percentage <sup>d</sup> |                          |

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

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<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

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Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to



Medicaid Section 1115 SUD Demonstrations Report (Part A) -  
 State  
 Demonstration Name  
 SUD Demonstration Year (DY)  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period  
 (Format: Q1, Q2, Q3, Q4)  
 Calendar Dates for SUD Reporting Period (Format:  
 MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Not pregnant                    |   | Criminally involved denominator |
|--|--|---------------------------------|---|---------------------------------|
|  |  | Not pregnant numerator or count | Not pregnant rate/percentage <sup>d</sup> |                                 |
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:</i>                 |   |                                 |
|  |  | <i>EXAMPLE:</i>                 |   |                                 |
|  |  | <i>EXAMPLE:</i>                 |   |                                 |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |                                 |   |                                 |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 5726<br>5130<br>5132            |   |                                 |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 82390<br>82958                  |   |                                 |

| #  | Metric name   | Not pregnant                    |   | Criminally involved denominator |
|----|---|---------------------------------|---|---------------------------------|
|    |   | Not pregnant numerator or count | Not pregnant rate/percentage <sup>d</sup> |                                 |
|    |   | 83351                           |   |                                 |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |                                 |   |                                 |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |                                 |   |                                 |
| 6  | Any SUD Treatment   | 37160                           |   |                                 |
|    |   | 36769                           |   |                                 |
|    |   | 37122                           |   |                                 |
| 7  | Early Intervention  | 462                             |   |                                 |
|    |   | 381                             |   |                                 |
|    |   | 401                             |   |                                 |
| 8  | Outpatient Services                                       | 25079                           |   |                                 |
|    |   | 24712                           |   |                                 |
|    |   | 24974                           |   |                                 |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 4694                            |   |                                 |
|    |   | 4387                            |   |                                 |
|    |   | 4334                            |   |                                 |
| 10 | Residential and Inpatient Services                        | 2441                            |   |                                 |
|    |   | 2268                            |   |                                 |
|    |   | 2353                            |   |                                 |
| 11 | Withdrawal Management                                     | 454                             |   |                                 |
|    |   | 356                             |   |                                 |
|    |   | 297                             |   |                                 |
| 12 | Medication-Assisted Treatment (MAT)                       | 21919                           |   |                                 |
|    |   | 21866                           |   |                                 |
|    |   | 21989                           |   |                                 |

| #  | Metric name  | Not pregnant                    |   | Criminally involved denominator |
|----|--|---------------------------------|---|---------------------------------|
|    |  | Not pregnant numerator or count | Not pregnant rate/percentage <sup>d</sup> |                                 |
| 13 | SUD Provider Availability  |                                 |   |                                 |
| 14 | SUD Provider Availability - MAT  |                                 |   |                                 |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |                                 |   |                                 |

| #     | Metric name  | Not pregnant                    |   | Criminally involved denominator |
|-------|--|---------------------------------|---|---------------------------------|
|       |  | Not pregnant numerator or count | Not pregnant rate/percentage <sup>d</sup> |                                 |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |                                 |   |                                 |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |                                 |   |                                 |

| #     | Metric name   | Not pregnant                    |   | Criminally involved denominator |
|-------|---|---------------------------------|---|---------------------------------|
|       |   | Not pregnant numerator or count | Not pregnant rate/percentage <sup>d</sup> |                                 |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |                                 |   |                                 |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |                                 |   |                                 |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |                                 |   |                                 |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |                                 |   |                                 |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |                                 |   |                                 |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |                                 |   |                                 |

| #  | Metric name  | Not pregnant                    |   | Criminally involved denominator |
|----|--|---------------------------------|---|---------------------------------|
|    |  | Not pregnant numerator or count | Not pregnant rate/percentage <sup>d</sup> |                                 |
| 23 | Emergency Department Utilization for SUD per 1,000   |                                 |   |                                 |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   |                                 |   |                                 |
| 25 | Readmissions Among Beneficiaries with SUD  |                                 |   |                                 |
| 26 | Overdose Deaths (count)  |                                 |   |                                 |
| 27 | Overdose Deaths (rate)   |                                 |   |                                 |
| 28 | SUD Spending   |                                 |   |                                 |
| 29 | SUD Spending within IMDs   |                                 |   |                                 |
| 30 | Per Capita SUD Spending  |                                 |   |                                 |
| 31 | Per Capita SUD Spending within IMDs  |                                 |   |                                 |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |                                 |   |                                 |

| #   | Metric name  | Not pregnant                    |   | Criminally involved denominator |
|---|--|---------------------------------|---|---------------------------------|
|   |  | Not pregnant numerator or count | Not pregnant rate/percentage <sup>d</sup> |                                 |
| 33  | Grievances Related to SUD Treatment Services                         |                                 |   |                                 |
| 34  | Appeals Related to SUD Treatment Services                            |                                 |   |                                 |
| 35  | Critical Incidents Related to SUD Treatment Services                 |                                 |   |                                 |
| 36  | Average Length of Stay in IMDs                                       |                                 |   |                                 |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |                                 |   |                                 |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |                                 |   |                                 |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |                                 |   |                                 |
| <b>State-specific metrics</b>                             |  |                                 |   |                                 |
| <i>Add rows for any additional state-specific metrics</i> |  |                                 |   |                                 |

| # | Metric name | Not pregnant                    |   | Criminally involved denominator |
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| # | Metric name | Not pregnant                    |   | Criminally involved denominator |
|---|-------------|---------------------------------|---|---------------------------------|
|   |             | Not pregnant numerator or count | Not pregnant rate/percentage <sup>d</sup> |                                 |

<sup>a</sup> States should create a new metrics report for each reporting quarter

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<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

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Disorder Demonstrations: Technical Specifications for Monitoring Metrics

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Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | Criminally involved                    |  | Not criminally involved denominator |
|--|--|--|--|-------------------------------------|
|  |  | Criminally involved numerator or count | Criminally involved rate/percentage <sup>d</sup> |                                     |
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:</i>                        |  |                                     |
|  |  | <i>EXAMPLE:</i>                        |  |                                     |
|  |  | <i>EXAMPLE:</i>                        |  |                                     |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |  |  |                                     |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 222                                    |  |                                     |
|  |  | 165                                    |  |                                     |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 176                                    |  |                                     |
|  |  | 2100                                   |  |                                     |
|  |  | 2152                                   |  |                                     |

| #  | Metric name   | Criminally involved                    |  | Not criminally involved denominator |
|----|---|--|--|-------------------------------------|
|    |   | Criminally involved numerator or count | Criminally involved rate/percentage <sup>d</sup> |                                     |
|    |   | 2000                                   |  |                                     |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |  |  |                                     |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |  |  |                                     |
| 6  | Any SUD Treatment   | 700<br>666<br>647                      |  |                                     |
| 7  | Early Intervention  | 7<br>3<br>5                            |  |                                     |
| 8  | Outpatient Services                                       | 370<br>342<br>331                      |  |                                     |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 167<br>128<br>142                      |  |                                     |
| 10 | Residential and Inpatient Services                        | 111<br>125<br>113                      |  |                                     |
| 11 | Withdrawal Management                                     | 11<br>15<br>13                         |  |                                     |
| 12 | Medication-Assisted Treatment (MAT)                       | 301<br>300<br>302                      |  |                                     |

| #  | Metric name  | Criminally involved                    |  | Not criminally involved denominator |
|----|--|--|--|-------------------------------------|
|    |  | Criminally involved numerator or count | Criminally involved rate/percentage <sup>d</sup> |                                     |
| 13 | SUD Provider Availability  |  |  |                                     |
| 14 | SUD Provider Availability - MAT  |  |  |                                     |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |  |  |                                     |

| #     | Metric name  | Criminally involved                    |  | Not criminally involved denominator |
|-------|--|--|--|-------------------------------------|
|       |  | Criminally involved numerator or count | Criminally involved rate/percentage <sup>d</sup> |                                     |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |  |  |                                     |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |  |  |                                     |

| #     | Metric name   | Criminally involved                    |  | Not criminally involved denominator |
|-------|---|--|--|-------------------------------------|
|       |   | Criminally involved numerator or count | Criminally involved rate/percentage <sup>d</sup> |                                     |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |  |  |                                     |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |  |  |                                     |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |  |  |                                     |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |  |  |                                     |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |  |  |                                     |
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| #  | Metric name  | Criminally involved                    |  | Not criminally involved denominator |
|----|--|--|--|-------------------------------------|
|    |  | Criminally involved numerator or count | Criminally involved rate/percentage <sup>d</sup> |                                     |
| 23 | Emergency Department Utilization for SUD per 1,000   |  |  |                                     |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   |  |  |                                     |
| 25 | Readmissions Among Beneficiaries with SUD  |  |  |                                     |
| 26 | Overdose Deaths (count)  |  |  |                                     |
| 27 | Overdose Deaths (rate)   |  |  |                                     |
| 28 | SUD Spending   |  |  |                                     |
| 29 | SUD Spending within IMDs   |  |  |                                     |
| 30 | Per Capita SUD Spending  |  |  |                                     |
| 31 | Per Capita SUD Spending within IMDs  |  |  |                                     |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |  |  |                                     |

| #   | Metric name  | Criminally involved                    |  | Not criminally involved denominator |
|---|--|--|--|-------------------------------------|
|   |  | Criminally involved numerator or count | Criminally involved rate/percentage <sup>d</sup> |                                     |
| 33  | Grievances Related to SUD Treatment Services                         |  |  |                                     |
| 34  | Appeals Related to SUD Treatment Services                            |  |  |                                     |
| 35  | Critical Incidents Related to SUD Treatment Services                 |  |  |                                     |
| 36  | Average Length of Stay in IMDs                                       |  |  |                                     |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |  |  |                                     |
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| <b>State-specific metrics</b>                             |  |  |  |                                     |
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| # | Metric name | Criminally involved                    |  | Not criminally involved denominator |
|---|-------------|--|--|-------------------------------------|
|   |             | Criminally involved numerator or count | Criminally involved rate/percentage <sup>d</sup> |                                     |

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| # | Metric name | Criminally involved                    |  | Not criminally involved denominator |
|---|-------------|--|--|-------------------------------------|
|   |             | Criminally involved numerator or count | Criminally involved rate/percentage <sup>d</sup> |                                     |

<sup>a</sup> States should create a new metrics report for each reporting quarter

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Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

**Substance Use Disorder (SUD) Metrics<sup>a</sup>**

| #  | Metric name  | Not criminally involved                    |  | OUD subpopulation denominator |
|--|--|--|--|-------------------------------|
|  |  | Not criminally involved numerator or count | Not criminally involved rate/percentage <sup>d</sup> |                               |
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> | <i>EXAMPLE:</i>                            |  |                               |
|  |  | <i>EXAMPLE:</i>                            |  |                               |
|  |  | <i>EXAMPLE:</i>                            |  |                               |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |  |  |                               |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 7481<br>6742<br>6751                       |  |                               |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 99980<br>99965                             |  |                               |

| #  | Metric name   | Not criminally involved                    |  | OUD subpopulation denominator |
|----|---|--|--|-------------------------------|
|    |   | Not criminally involved numerator or count | Not criminally involved rate/percentage <sup>d</sup> |                               |
|    |   | 100242                                     |  |                               |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |  |  |                               |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |  |  |                               |
| 6  | Any SUD Treatment   | 46094                                      |  |                               |
|    |   | 45241                                      |  |                               |
|    |   | 45568                                      |  |                               |
| 7  | Early Intervention  | 556  |  |                               |
|    |   | 470  |  |                               |
|    |   | 492  |  |                               |
| 8  | Outpatient Services                                       | 30712                                      |  |                               |
|    |   | 29936                                      |  |                               |
|    |   | 30264                                      |  |                               |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 5884                                       |  |                               |
|    |   | 5469                                       |  |                               |
|    |   | 5366                                       |  |                               |
| 10 | Residential and Inpatient Services                        | 3214                                       |  |                               |
|    |   | 2948                                       |  |                               |
|    |   | 2983                                       |  |                               |
| 11 | Withdrawal Management                                     | 677  |  |                               |
|    |   | 508  |  |                               |
|    |   | 434  |  |                               |
| 12 | Medication-Assisted Treatment (MAT)                       | 26119                                      |  |                               |
|    |   | 25885                                      |  |                               |
|    |   | 26021                                      |  |                               |

| #  | Metric name  | Not criminally involved                    |  | OUD subpopulation denominator |
|----|--|--|--|-------------------------------|
|    |  | Not criminally involved numerator or count | Not criminally involved rate/percentage <sup>d</sup> |                               |
| 13 | SUD Provider Availability  |  |  |                               |
| 14 | SUD Provider Availability - MAT  |  |  |                               |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |  |  |                               |

| #     | Metric name  | Not criminally involved                    |  | OUD subpopulation denominator |
|-------|--|--|--|-------------------------------|
|       |  | Not criminally involved numerator or count | Not criminally involved rate/percentage <sup>d</sup> |                               |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |  |  |                               |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |  |  |                               |

| #     | Metric name   | Not criminally involved                    |  | OUD subpopulation denominator |
|-------|---|--|--|-------------------------------|
|       |   | Not criminally involved numerator or count | Not criminally involved rate/percentage <sup>d</sup> |                               |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |  |  |                               |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |  |  |                               |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |  |  |                               |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |  |  |                               |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |  |  |                               |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |  |  |                               |

| #  | Metric name  | Not criminally involved                    |  | OUD subpopulation denominator |
|----|--|--|--|-------------------------------|
|    |  | Not criminally involved numerator or count | Not criminally involved rate/percentage <sup>d</sup> |                               |
| 23 | Emergency Department Utilization for SUD per 1,000   |  |  | 931                           |
|    |  |  |  | 859                           |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   |  |  | 794                           |
|    |  |  |  | 992                           |
|    |  |  |  | 907                           |
| 25 | Readmissions Among Beneficiaries with SUD  |  |  | 872                           |
| 26 | Overdose Deaths (count)  |  |  |                               |
| 27 | Overdose Deaths (rate)   |  |  |                               |
| 28 | SUD Spending   |  |  |                               |
| 29 | SUD Spending within IMDs   |  |  |                               |
| 30 | Per Capita SUD Spending  |  |  |                               |
| 31 | Per Capita SUD Spending within IMDs  |  |  |                               |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |  |  |                               |



| #   | Metric name  | Not criminally involved                    |  | OUD subpopulation denominator |
|---|--|--|--|-------------------------------|
|   |  | Not criminally involved numerator or count | Not criminally involved rate/percentage <sup>d</sup> |                               |
| 33  | Grievances Related to SUD Treatment Services                         |  |  |                               |
| 34  | Appeals Related to SUD Treatment Services                            |  |  |                               |
| 35  | Critical Incidents Related to SUD Treatment Services                 |  |  |                               |
| 36  | Average Length of Stay in IMDs                                       |  |  |                               |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |  |  |                               |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |  |  |                               |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |  |  |                               |
| <b>State-specific metrics</b>                             |  |  |  |                               |
| <i>Add rows for any additional state-specific metrics</i> |  |  |  |                               |

| # | Metric name | Not criminally involved                    |  | OUD subpopulation denominator |
|---|-------------|--|--|-------------------------------|
|   |             | Not criminally involved numerator or count | Not criminally involved rate/percentage <sup>d</sup> |                               |

Note: Licensee and states must prominently display the following notice on any display of HEDIS measures: *Measures IET-AD, FUA-AD, FUM-AD, and AAP [Metrics #15, 17(1), 17(2), and 32] are not established as a standard of medical care and have not been tested for a provided “as is” without warranty of any kind. NCQA makes no representations, warranties, or endorsement about the quality of any organization or no liability to anyone who relies on HEDIS measures or specifications or data reflect*

*The measure specification methodology used by CMS is different from NCQA’s methodology but has granted CMS permission to adjust. A calculated measure result (a “rate”) from the Certification Program, and is based on adjusted HEDIS specifications, may not be calculated by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates are Unaudited HEDIS rates.”*

| # | Metric name | Not criminally involved                    |  | OUD subpopulation denominator |
|---|-------------|--|--|-------------------------------|
|   |             | Not criminally involved numerator or count | Not criminally involved rate/percentage <sup>d</sup> |                               |

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -  
 State  
 Demonstration Name  
 SUD Demonstration Year (DY)  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period  
 (Format: Q1, Q2, Q3, Q4)  
 Calendar Dates for SUD Reporting Period (Format:  
 MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Metrics<sup>a</sup>

| #  | Metric name  | OUD subpopulation                    |  | [State-specific subpop]                    |   |
|--|--|--------------------------------------|--|--|---|
|  |  | OUD subpopulation numerator or count | OUD subpopulation rate/percentage <sup>d</sup> | [State-specific subpopulation] denominator | [State-specific subpopulation] numerator or count |
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> |                                      |  |  | <i>EXAMPLE:</i>                                   |
|  |  |                                      |  |  | <i>EXAMPLE:</i>                                   |
|  |  |                                      |  |  | <i>EXAMPLE:</i>                                   |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |                                      |  |  |   |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      | 2840<br>2700<br>2564                 |  |  |   |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      | 57797<br>58058                       |  |  |   |

| #  | Metric name   | OUD subpopulation                    |  | [State-specific subpop]                    |   |
|----|---|--------------------------------------|--|--|---|
|    |   | OUD subpopulation numerator or count | OUD subpopulation rate/percentage <sup>d</sup> | [State-specific subpopulation] denominator | [State-specific subpopulation] numerator or count |
|    |   | 58216                                |  |  |   |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |                                      |  |  |   |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |                                      |  |  |   |
| 6  | Any SUD Treatment   | 32600<br>32439<br>33016              |  |  |   |
| 7  | Early Intervention  | 487<br>388                           |  |  |   |
| 8  | Outpatient Services                                       | 408<br>24926<br>24735<br>25078       |  |  |   |
| 9  | Intensive Outpatient and Partial Hospitalization Services | 2485<br>2315<br>2359                 |  |  |   |
| 10 | Residential and Inpatient Services                        | 1308<br>1223<br>1191                 |  |  |   |
| 11 | Withdrawal Management                                     | 410<br>305<br>273                    |  |  |   |
| 12 | Medication-Assisted Treatment (MAT)                       | 22403<br>21923<br>22297              |  |  |   |

| #  | Metric name  | OUD subpopulation                    |  | [State-specific subpop]                    |   |
|----|--|--------------------------------------|--|--|---|
|    |  | OUD subpopulation numerator or count | OUD subpopulation rate/percentage <sup>d</sup> | [State-specific subpopulation] denominator | [State-specific subpopulation] numerator or count |
| 13 | SUD Provider Availability  |                                      |  |  |   |
| 14 | SUD Provider Availability - MAT  |                                      |  |  |   |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |                                      |  |  |   |

| #     | Metric name   | OUD subpopulation                    |  | <i>[State-specific subpop]</i>                    |  |
|-------|---|--------------------------------------|--|---|--|
|       |   | OUD subpopulation numerator or count | OUD subpopulation rate/percentage <sup>d</sup> | <i>[State-specific subpopulation] denominator</i> | <i>[State-specific subpopulation] numerator or count</i> |
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge<br>[Joint Commission] |                                      |  |   |  |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD)<br>[NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |                                      |  |   |  |

| #     | Metric name   | OUD subpopulation                    |  | [State-specific subpop]                    |   |
|-------|---|--------------------------------------|--|--|---|
|       |   | OUD subpopulation numerator or count | OUD subpopulation rate/percentage <sup>d</sup> | [State-specific subpopulation] denominator | [State-specific subpopulation] numerator or count |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |                                      |  |  |   |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |                                      |  |  |   |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |                                      |  |  |   |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |                                      |  |  |   |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |                                      |  |  |   |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |                                      |  |  |   |



| #  | Metric name  | OUD subpopulation                    |  | [State-specific subpop]                    |   |
|----|--|--------------------------------------|--|--|---|
|    |  | OUD subpopulation numerator or count | OUD subpopulation rate/percentage <sup>d</sup> | [State-specific subpopulation] denominator | [State-specific subpopulation] numerator or count |
| 23 | Emergency Department Utilization for SUD per 1,000   | 1054                                 | 1132.116004                                    |  |   |
|    |  | 943                                  | 1097.788126                                    |  |   |
|    |  | 894                                  | 1125.944584                                    |  |   |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | 1085                                 | 1093.75  |  |   |
|    |  | 978                                  | 1078.280044                                    |  |   |
|    |  | 941                                  | 1079.12844                                     |  |   |
| 25 | Readmissions Among Beneficiaries with SUD  |                                      |  |  |   |
| 26 | Overdose Deaths (count)  |                                      |  |  |   |
| 27 | Overdose Deaths (rate)   |                                      | #DIV/0!  |  |   |
| 28 | SUD Spending   |                                      |  |  |   |
| 29 | SUD Spending within IMDs   |                                      |  |  |   |
| 30 | Per Capita SUD Spending  |                                      |  |  |   |
| 31 | Per Capita SUD Spending within IMDs  |                                      |  |  |   |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |                                      |  |  |   |

| #   | Metric name  | OUD subpopulation                    |  | [State-specific subpop]                    |   |
|---|--|--------------------------------------|--|--|---|
|   |  | OUD subpopulation numerator or count | OUD subpopulation rate/percentage <sup>d</sup> | [State-specific subpopulation] denominator | [State-specific subpopulation] numerator or count |
| 33  | Grievances Related to SUD Treatment Services                         |                                      |  |  |   |
| 34  | Appeals Related to SUD Treatment Services                            |                                      |  |  |   |
| 35  | Critical Incidents Related to SUD Treatment Services                 |                                      |  |  |   |
| 36  | Average Length of Stay in IMDs                                       |                                      | #DIV/0!  |  |   |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |                                      |  |  |   |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |                                      |  |  |   |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |                                      |  |  |   |
| <b>State-specific metrics</b>                             |  |                                      |  |  |   |
| <i>Add rows for any additional state-specific metrics</i> |  |                                      |  |  |   |

| # | Metric name | OUD subpopulation                    |  | [State-specific subpop]                    |   |
|---|-------------|--------------------------------------|--|--|---|
|   |             | OUD subpopulation numerator or count | OUD subpopulation rate/percentage <sup>d</sup> | [State-specific subpopulation] denominator | [State-specific subpopulation] numerator or count |

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*The measure specification methodology used by CMS is different from NCQA’s methodology but has granted CMS permission to adjust. A calculated measure result (a “rate”) from the HEDIS Certification Program, and is based on adjusted HEDIS specifications, may not be calculated by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates are Unaudited HEDIS rates.”*

| # | Metric name | OUD subpopulation                    |  | [State-specific subpop]                    |   |
|---|-------------|--------------------------------------|--|--|---|
|   |             | OUD subpopulation numerator or count | OUD subpopulation rate/percentage <sup>d</sup> | [State-specific subpopulation] denominator | [State-specific subpopulation] numerator or count |

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) -

State

Demonstration Name

SUD Demonstration Year (DY)

(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY

(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period

(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period (Format:

MM/DD/YYYY - MM/DD/YYYY)

**Substance Use Disorder (SUD) Metrics<sup>a</sup>**

| #  | Metric name  | [State-specific subpopulation] rate/percentage <sup>d</sup> |
|--|--|---|
| <i>EXAMPLE: 1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i> |   |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                     |   |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                      |   |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)                                      |   |

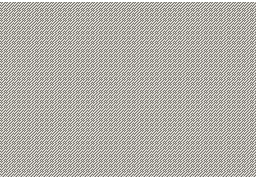
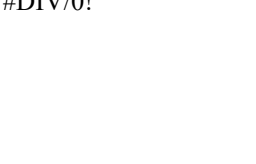

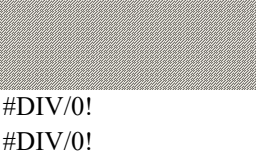
| #  | Metric name   | ulation] <sup>d,e</sup>                                     |
|----|---|---|
|    |   | [State-specific subpopulation] rate/percentage <sup>d</sup> |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)      |   |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD          |   |
| 6  | Any SUD Treatment   |   |
| 7  | Early Intervention  |   |
| 8  | Outpatient Services                                       |   |
| 9  | Intensive Outpatient and Partial Hospitalization Services |   |
| 10 | Residential and Inpatient Services                        |   |
| 11 | Withdrawal Management                                     |   |
| 12 | Medication-Assisted Treatment (MAT)                       |   |

| #  | Metric name  | ulation] <sup>d,e</sup><br><br>[State-specific subpopulation] rate/percentage <sup>d</sup> |
|----|--|--|
| 13 | SUD Provider Availability  |  |
| 14 | SUD Provider Availability - MAT  |  |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)<br><br>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup> |  |

| #     | Metric name  | ulation] <sup>d,e</sup><br>[State-specific subpopulation]<br>rate/percentage <sup>d</sup> |
|-------|--|---|
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission] |   |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,g</sup> |   |



| #     | Metric name   | ulation] <sup>d,e</sup><br>[State-specific subpopulation]<br>rate/percentage <sup>d</sup> |
|-------|---|---|
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f,h</sup> |   |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]   |   |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]  |   |
| 20    | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]  |   |
| 21    | Concurrent Use of Opioids and Benzodiazepines (COB-AD)<br>[PQA, NQF #3389; Medicaid Adult Core Set]   |   |
| 22    | Continuity of Pharmacotherapy for Opioid Use Disorder<br>[USC; NQF #3175]   |   |

| #  | Metric name  | ulation] <sup>d,e</sup><br>[State-specific subpopulation]<br>rate/percentage <sup>d</sup> |
|----|--|---|
| 23 | Emergency Department Utilization for SUD per 1,000   | #DIV/0!   |
|    |  | #DIV/0!   |
|    |  | #DIV/0!   |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | #DIV/0!   |
|    |  | #DIV/0!   |
|    |  | #DIV/0!   |
| 25 | Readmissions Among Beneficiaries with SUD  | #DIV/0!   |
|    |  | #DIV/0!   |
|    |  | #DIV/0!   |
| 26 | Overdose Deaths (count)  |        |
|    |  |   |
|    |  |   |
| 27 | Overdose Deaths (rate)   | #DIV/0!   |
|    |  |   |
|    |  |   |
| 28 | SUD Spending   |       |
| 29 | SUD Spending within IMDs   |       |
|    |  |   |
| 30 | Per Capita SUD Spending  | #DIV/0!   |
| 31 | Per Capita SUD Spending within IMDs  | #DIV/0!   |
|    |  |   |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>f</sup> |      |

|   |  | ulation] <sup>d,e</sup>                                     |
|---|--|---|
| #   | Metric name  | [State-specific subpopulation] rate/percentage <sup>d</sup> |
| 33  | Grievances Related to SUD Treatment Services                         |   |
| 34  | Appeals Related to SUD Treatment Services                            |   |
| 35  | Critical Incidents Related to SUD Treatment Services                 |   |
| 36  | Average Length of Stay in IMDs                                       | #DIV/0!   |
| Q1  | <i>Insert selected metric(s) related to key health IT question 1</i> |   |
| Q2  | <i>Insert selected metric(s) related to key health IT question 2</i> |   |
| Q3  | <i>Insert selected metric(s) related to key health IT question 3</i> |   |
| <b>State-specific metrics</b>                             |  |   |
| <i>Add rows for any additional state-specific metrics</i> |  |   |
|   |  |   |

| # | Metric name | [State-specific subpopulation] rate/percentage <sup>d</sup> |
|---|-------------|---|
|---|-------------|---|

Note: Licensee and states must prominently display the following notice on any display of HEDIS Measures IET-AD, FUA-AD, FUM-AD, and AAP [Metrics #15, 17(1), 17(2), and 32] measures that are owned and copyrighted by the National Committee for Quality Assurance: "These HEDIS measures are based on national HEDIS guidelines, do not establish a standard of medical care and have not been tested for a specific jurisdiction. They are provided "as is" without warranty of any kind. NCQA makes no representations, warranties, or endorsements about the quality of any organization or the accuracy of any data. NCQA is not liable for any liability to anyone who relies on HEDIS measures or specifications or data reflecting the quality of care." The measure specification methodology used by CMS is different from NCQA's methodology but has granted CMS permission to adjust. A calculated measure result (a "rate") from the HEDIS Certification Program, and is based on adjusted HEDIS specifications, may not be calculated by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates are Unaudited HEDIS rates."

The measure specification methodology used by CMS is different from NCQA's methodology but has granted CMS permission to adjust. A calculated measure result (a "rate") from the HEDIS Certification Program, and is based on adjusted HEDIS specifications, may not be calculated by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates are Unaudited HEDIS rates."

| # | Metric name | [State-specific subpopulation] rate/percentage <sup>d</sup> |
|---|-------------|---|
|---|-------------|---|

<sup>a</sup> States should create a new metrics report for each reporting quarter

<sup>b</sup> For state-specific metrics, states should attest that they are reporting as specified in the

<sup>c</sup> Report metrics that are one annual value for a demonstration year only in the report s

<sup>d</sup> If applicable. See CMS-provided technical specifications manual

<sup>e</sup> Enter any state-specific subpopulations that will be reported after column AT; create

<sup>f</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS rates

<sup>g</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 2 and 3 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

<sup>h</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 for Metric #17  
Disorder Demonstrations: Technical Specifications for Monitoring Metrics

**Checks:**

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should sum approximately to

Medicaid Section 1115 SUD Demonstrations Report (Part A) - Reporting issues (Version 5.0)

State Commonwealth Of Kentucky  
 Demonstration Name [Enter Demonstration Name]  
 SUD Demonstration Year (DY) DY1  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY [Enter Calendar Dates for SUD Demonstration Year]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period Q2  
 Calendar Dates for SUD Reporting Period [Enter Calendar Dates for SUD Reporting Period]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Reporting Issues

| #  | Metric name  | Milestone or reporting topic  | Summary of issue   | Date and report in which issue was first reported |
|--|--|---|--|---|
| <i>EXAMPLE:<br/>1<br/>(Do not delete or edit this row)</i> | <i>EXAMPLE:<br/>Assessed for SUD Treatment Needs<br/>Using a Standardized Screening Tool</i> | <i>EXAMPLE:<br/>Assessment of need and qualification for SUD services</i> | <i>EXAMPLE:<br/>Difficulty with collecting data for metric 1. There is a lack of EHR data.</i> | <i>EXAMPLE:<br/>9/1/19; SUD DY2Q3</i>             |
| 1  | Assessed for SUD Treatment Needs Using a Standardized Screening Tool                         | Assessment of need and qualification for SUD services                     |  |   |
| 2  | Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis                          | Assessment of need and qualification for SUD services                     |  |   |
| 3  | Medicaid Beneficiaries with SUD Diagnosis (monthly)  | Assessment of need and qualification for SUD treatment services           |  |   |
| 4  | Medicaid Beneficiaries with SUD Diagnosis (annually)   | Assessment of need and qualification for SUD treatment services           |  |   |
| 5  | Medicaid Beneficiaries Treated in an IMD for SUD   | Milestone 2   |  |   |
| 6  | Any SUD Treatment  | Milestone 1   |  |   |
| 7  | Early Intervention   | Milestone 1   |  |   |
| 8  | Outpatient Services  | Milestone 1   |  |   |

Medicaid Section 1115 SUD Demonstrations Report (Part A) - Reporting issues (Version 5.0)

State Commonwealth Of Kentucky  
 Demonstration Name [Enter Demonstration Name]  
 SUD Demonstration Year (DY) DY1  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY [Enter Calendar Dates for SUD Demonstration Year]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period Q2  
 Calendar Dates for SUD Reporting Period [Enter Calendar Dates for SUD Reporting Period]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)

### Substance Use Disorder (SUD) Reporting Issues

| #  | Metric name  | Milestone or reporting topic | Summary of issue | Date and report in which issue was first reported |
|----|--|------------------------------|------------------|---|
| 9  | Intensive Outpatient and Partial Hospitalization Services  | Milestone 1                  |                  |   |
| 10 | Residential and Inpatient Services   | Milestone 1                  |                  |   |
| 11 | Withdrawal Management  | Milestone 1                  |                  |   |
| 12 | Medication-Assisted Treatment  | Milestone 1                  |                  |   |
| 13 | SUD Provider Availability  | Milestone 4                  |                  |   |
| 14 | SUD Provider Availability - MAT  | Milestone 4                  |                  |   |
| 15 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)  | Milestone 6                  |                  |   |
|    | [NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure]   |                              |                  |   |
| 16 | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge and SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge | Milestone 6                  |                  |   |
|    | [Joint Commission]   |                              |                  |   |

Medicaid Section 1115 SUD Demonstrations Report (Part A) - Reporting issues (Version 5.0)

State Commonwealth Of Kentucky  
 Demonstration Name [Enter Demonstration Name]  
 SUD Demonstration Year (DY) DY1  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY [Enter Calendar Dates for SUD Demonstration Year]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period Q2  
 Calendar Dates for SUD Reporting Period [Enter Calendar Dates for SUD Reporting Period]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)

**Substance Use Disorder (SUD) Reporting Issues**

| #     | Metric name  | Milestone or reporting topic | Summary of issue | Date and report in which issue was first reported |
|-------|--|------------------------------|------------------|---|
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD)<br>[NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] | Milestone 6                  |                  |   |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #0576; Medicaid Adult Core Set; Adjusted HEDIS measure]                   | Milestone 6                  |                  |   |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]  | Milestone 5                  |                  |   |



Medicaid Section 1115 SUD Demonstrations Report (Part A) - Reporting issues (Version 5.0)

State Commonwealth Of Kentucky  
 Demonstration Name [Enter Demonstration Name]  
 SUD Demonstration Year (DY) DY1  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY [Enter Calendar Dates for SUD Demonstration Year]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period Q2  
 Calendar Dates for SUD Reporting Period [Enter Calendar Dates for SUD Reporting Period]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)

**Substance Use Disorder (SUD) Reporting Issues**

| #  | Metric name  | Milestone or reporting topic | Summary of issue | Date and report in which issue was first reported |
|----|--|------------------------------|------------------|---|
| 19 | Use of Opioids from Multiple Providers in Persons without Cancer (OMP) [PQA; NQF #2950]                      | Milestone 5                  |                  |   |
| 20 | Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951] | Milestone 5                  |                  |   |
| 21 | Concurrent Use of Opioids and Benzodiazepines (COB-AD) [PQA]   | Milestone 5                  |                  |   |
| 22 | Continuity of Pharmacotherapy for Opioid Use Disorder [USC; NQF #3175]                                       | Milestone 1                  |                  |   |
| 23 | Emergency Department Utilization for SUD per 1,000 Medicaid Beneficiaries                                    | Milestone 5                  |                  |   |
| 24 | Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries   | Other SUD-related metrics    |                  |   |
| 25 | Readmissions Among Beneficiaries with SUD  | Milestone 6                  |                  |   |
| 26 | Overdose Deaths (count)  | Milestone 5                  |                  |   |
| 27 | Overdose Deaths (rate)   | Milestone 5                  |                  |   |

Medicaid Section 1115 SUD Demonstrations Report (Part A) - Reporting issues (Version 5.0)

State Commonwealth Of Kentucky  
 Demonstration Name [Enter Demonstration Name]  
 SUD Demonstration Year (DY) DY1  
 (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for SUD DY [Enter Calendar Dates for SUD Demonstration Year]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)  
 SUD Reporting Period Q2  
 Calendar Dates for SUD Reporting Period [Enter Calendar Dates for SUD Reporting Period]  
 (Format: MM/DD/YYYY - MM/DD/YYYY)

**Substance Use Disorder (SUD) Reporting Issues**

| #  | Metric name   | Milestone or reporting topic | Summary of issue | Date and report in which issue was first reported |
|----|---|------------------------------|------------------|---|
| 28 | SUD Spending  | Other SUD-related metrics    |                  |   |
| 29 | SUD Spending Within IMDs  | Other SUD-related metrics    |                  |   |
| 30 | Per Capita SUD Spending   | Other SUD-related metrics    |                  |   |
| 31 | Per Capita SUD Spending Within IMDs   | Other SUD-related metrics    |                  |   |
| 32 | Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD (AAP) [Adjusted HEDIS measure] | Other SUD-related metrics    |                  |   |
| 33 | Grievances Related to SUD Treatment Services  | Other SUD-related metrics    |                  |   |
| 34 | Appeals Related to SUD Treatment Services   | Other SUD-related metrics    |                  |   |
| 35 | Critical Incidents Related to SUD Treatment Services  | Other SUD-related metrics    |                  |   |
| 36 | Average Length of Stay in IMDs  | Milestone 2                  |                  |   |
| Q1 | [Insert selected metric(s) for health IT question 1]  | Health IT                    |                  |   |

Medicaid Section 1115 SUD Demonstrations Report (Part A) - Reporting issues (Version 5.0)

State Commonwealth Of Kentucky

Demonstration Name [Enter Demonstration Name]

SUD Demonstration Year (DY)  
(Format: DY1, DY2, DY3, etc.) DY1

Calendar Dates for SUD DY  
(Format: MM/DD/YYYY - MM/DD/YYYY) [Enter Calendar Dates for SUD Demonstration Year]

SUD Reporting Period Q2

Calendar Dates for SUD Reporting Period  
(Format: MM/DD/YYYY - MM/DD/YYYY) [Enter Calendar Dates for SUD Reporting Period]

## Substance Use Disorder (SUD) Reporting Issues

| #  | Metric name  | Milestone or reporting topic | Summary of issue | Date and report in which issue was first reported |
|----|--|------------------------------|------------------|---|
| Q2 | [Insert selected metric(s) for health IT question 2] | Health IT                    |                  |   |
| Q3 | [Insert selected metric(s) for health IT question 3] | Health IT                    |                  |   |

Note: Licensee and states must prominently display the following notice on any display of Measure rates:

*Measures IET-AD, FUA-AD, FUM-AD, and AAP [Metrics #15, 17(1), 17(2), and 32] are Healthcare Effectiveness Data and Information Set (HEDIS®) measures that are owned and copyrighted by the National Committee for Quality Assurance (NCQA). HEDIS measures and specifications are not clinical guidelines, do not establish a standard of medical care and have not been tested for all potential applications. The measures and specifications are provided “as is” without warranty of any kind. NCQA makes no representations, warranties or endorsements about the quality of any product, test or protocol identified as numerator compliant or otherwise identified as meeting the requirements of a HEDIS measure or specification. NCQA makes no representations, warranties, or endorsement about the quality of any organization or clinician who uses or reports performance measures and NCQA has no liability to anyone who relies on HEDIS measures or specifications or data reflective of performance under such measures and specifications.*

*The measure specification methodology used by CMS is different from NCQA’s methodology. NCQA has not validated the adjusted measure specifications but has granted CMS permission to adjust. A calculated measure result (a “rate”) from a HEDIS measure that has not been certified via NCQA’s Measure Certification Program, and is based on adjusted HEDIS specifications, may not be called a “HEDIS rate” until it is audited and designated reportable by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates shall be designated or referred to as “Adjusted, Uncertified, Unaudited HEDIS rates.”*

**Substance U**

| #  | Remediation plan and timeline for resolution  | Status                     | Update(s) to issue summary, remediation plan, and/or timeline for resolution, if issue previously reported |
|--|---|----------------------------|--|
| <i>EXAMPLE:</i><br>1<br>(Do not delete or edit this row) | <i>EXAMPLE:</i><br>Demonstration site in process of updating EHR, to be completed in June 2020. Once completed, will report according to specification. | <i>EXAMPLE:</i><br>Ongoing | <i>EXAMPLE:</i><br>EHR implementation is preceeding as planned and will be completed by June 2020.         |
| 1  |   |                            |  |
| 2  |   |                            |  |
| 3  |   |                            |  |
| 4  |   |                            |  |
| 5  |   |                            |  |
| 6  |   |                            |  |
| 7  |   |                            |  |
| 8  |   |                            |  |

## Substance U

| #  | Remediation plan and timeline for resolution | Status | Update(s) to issue summary, remediation plan, and/or timeline for resolution, if issue previously reported |
|----|--|--------|--|
| 9  |  |        |  |
| 10 |  |        |  |
| 11 |  |        |  |
| 12 |  |        |  |
| 13 |  |        |  |
| 14 |  |        |  |
| 15 |  |        |  |
| 16 |  |        |  |

**Substance U**

| #     | Remediation plan and timeline for resolution | Status | Update(s) to issue summary, remediation plan, and/or timeline for resolution, if issue previously reported |
|-------|--|--------|--|
| 17(1) |  |        |  |
| 17(2) |  |        |  |
| 18    |  |        |  |

### Substance U

| #  | Remediation plan and timeline for resolution | Status | Update(s) to issue summary, remediation plan, and/or timeline for resolution, if issue previously reported |
|----|--|--------|--|
| 19 |  |        |  |
| 20 |  |        |  |
| 21 |  |        |  |
| 22 |  |        |  |
| 23 |  |        |  |
| 24 |  |        |  |
| 25 |  |        |  |
| 26 |  |        |  |
| 27 |  |        |  |

## Substance U

| #  | Remediation plan and timeline for resolution | Status | Update(s) to issue summary, remediation plan, and/or timeline for resolution, if issue previously reported |
|----|--|--------|--|
| 28 |  |        |  |
| 29 |  |        |  |
| 30 |  |        |  |
| 31 |  |        |  |
| 32 |  |        |  |
| 33 |  |        |  |
| 34 |  |        |  |
| 35 |  |        |  |
| 36 |  |        |  |
| Q1 |  |        |  |



## Substance U

| #  | Remediation plan and timeline for resolution | Status | Update(s) to issue summary, remediation plan, and/or timeline for resolution, if issue previously reported |
|----|--|--------|--|
| Q2 |  |        |  |
| Q3 |  |        |  |

Note: Licensee and Measures IET-AD, owned and copyright of medical care and representations, with requirements of a reports performance specifications.

The measure specification permission to adjust adjusted HEDIS score time, such measure

## Substance Use Disorder (SUD) Version Notes

Version 2.0 does not change the metrics for reporting or substantively modify their content.

Version 2.0 updates the original metrics workbook in the following ways:

- Renumbers metrics using consecutive numbers
- Updates titles of metrics 5, 22 and 23
- Edits descriptions of metrics 2, 3, 4, 5, 6, 12, 17, 18, 19, 22, 23, 24, 25, 34
- Updates subpopulations for reporting under metrics 6, 7, 8, 9, 10, 11, 12 and 23
- Clarifies data source for metrics 1, 16, 34
- Adds footnote "d" of the Metrics Reporting tab, instructing users to add columns as necessary to report on additional models
- Removes metrics formerly named 26 and 27, which are not yet included in reporting

Version 3.0 updates metrics workbook 2.0 in the following ways:

- Adds two recommended metrics for reporting: 'Use of Opioids from Multiple Providers in Persons Without Cancer' (metric 19) and 'Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer' (metric 20)
- Renumbers current metrics 21-36 to accommodate addition
- Edits description of metric 3, 'Medicaid Beneficiaries with SUD Diagnosis (monthly)', to reflect a lookback period of 11 months
- Reformats headers on all tabs so column A = label and column B = user entry
- Reformats Baseline Reporting Period to MM/DD/YYYY on monitoring protocol tab
- Updates column N title on monitoring protocol tab to 'Demonstration Year (DY) and Quarter(Q) in which reporting will begin (Format: DY1 Q3)
- Edits footnote "a" of the metrics reporting tab, instructing users to create a new metrics report for each reporting quarter
- Edits footnote "d" of the metrics reporting tab, instructing users to enter any new models that will be reported after column AR
- Adds columns AS, AT, and AU for state-identified models on the metrics reporting tab
- Changes the name of the "metrics reporting" tab to the "metrics report" tab
- On the metrics report tab, edits "numerator" headers to "numerator or count"

Version 3.1 updates metrics workbook 3.0 in the following ways:

- Assigns metric IDs Q1, Q2, Q3 to the SUD health information technology (SUD health IT) section on the Monitoring protocol tab
- Adds data validation checks to ensure numerator and denominator values are numeric values
- Locks down the Monitoring protocol, Metrics report and Data and reporting issues tabs

Version 4.0 updates metrics workbook 3.1 in the following ways:

- Changes the name of the workbook from "Metrics Workbook" to "Monitoring Workbook"
- Changes tab name to "Protocol – Planned metrics"

Adds new columns to the “Protocol – Planned metrics” tab:

- Dates covered by first measurement period for metric (MM/DD/YYYY--MM/DD/YYYY)
- Submission date of first report in which the metric will be reported (MM/DD/YYYY)
- State plans to phase in reporting (Y/N)
- Milestone or reporting topic with a footnote indicating there were no metrics for milestones 2 and 3.
- Type of metric

Adds headers to the "Protocol - Planned metrics" tab that map the columns to the instructions document (see row 7)

Adds conditional formatting to the "Protocol - Planned metrics" tab

Changes the name of "Demonstration Year (DY)" and "Quarter (Q)" in which reporting will begin column to "Demonstration Year (DY)" and "Quarter (Q) of first report in which the metric will be submitted”

Changes the name of the "Metrics report" tab to “Report – Metrics reporting”

Adds columns to the “Report – Metrics reporting” tab:

- Milestone or reporting topic
- Type of metric
- Dates covered by measurement period for each metric (MM/DD/YYYY--MM/DD/YYYY)

Changes name of the "Data and reporting issues" tab to “Report-Data & reporting issues”

Removes one required metric for reporting: "Follow-up after Discharge from the Emergency Department for Mental Illness or Alcohol or Other Drug Dependence"

Adds two required metrics for reporting: "Follow-up after Discharge from the Emergency Department for Mental Illness" and "Follow-up after Discharge from the Emergency Department for Alcohol or Other Drug Dependence"

Edits names for Metrics # 15, 18, 21, 25

Edits descriptions of Metrics # 15, 18, 19, 20, 25, 36

Adds four additional checks to the end of 'reporting - metrics reporting' tab

Adds NCQA measure rate notice to the "Report - Metrics reporting" and "Report-Data & reporting issues" tabs

Version 5.0 updates metrics workbook 4.0 in the following ways:

Divides the version 4.0 workbook into 2 workbooks - the "Medicaid Section 1115 Monitoring Report Workbook" and the "Medicaid Section 1115 Monitoring Proto

Deletes "Submitted on" section in the workbook header on all tabs

Adds bolded table titles for each tab of the workbook

Replaces references to "state-identified" with "state-specific"

Changes the name of the "Report-Metrics reporting" tab to “SUD metrics”

Changes the name of the following columns:

- From "Attest that reporting matches CMS-provided specification (Y/N)" to "Approved protocol indicates that reporting matches the CMS-provided techni
- From "Describe any deviations from CMS-provided specifications" to "Deviations from CMS-provided technical specifications manual in approved proto
- From "Technical specification manual version" to "Technical specifications manual version"

Deletes the "Model" denominator, numerator or count, and rate/percentage columns

Changes name of the "Report-Data & reporting issues" tab to "SUD reporting issues”

Changes the order of multiple columns

Adds drop-down function to "Reporting Issues (Y/N)" and "Technical specifications manual version" columns in the "SUD metrics" tab

Moves format examples in the header from column C to column B

Adds section to the bottom of "SUD metrics" tab for "State-specific metrics"

Changes the name of the "Report-Data & Reporting Issues" tab to "SUD reporting issues"

Reformats "SUD reporting issues" tab - lists all planned metrics and removes checkboxes

Reorders columns in the "SUD reporting issues" tab

Includes a filter on the "#" column of the "SUD reporting issues" tab

Deletes the following columns from the "SUD reporting issues" tab:

- Estimated number of impacted beneficiaries
- Known or suspected causes of issue (if applicable)

Splits the "Remediation plan and timeline for resolution (if applicable)/status update if issue previously reported" into 2 columns in the "SUD reporting issues" tab:

- Remediation plan and timeline for resolution
- Update(s) to issue summary, remediation plan, and/or timeline for resolution, if issue previously reported

Adds new column to the "SUD reporting issues" tab - "Status" which includes drop-down functionalities with the options: New, Ongoing, and Resolved

Changes name of "New Model" column to "State-specific subpopulation" column

Adds "For state-specific metrics, states should attest that they are reporting as specified in their monitoring protocol" footnote

Changes "Enter any new models that will be reported after column AX; create new columns as needed" footnote to "Enter any state-specific subpopulations that

Includes an example row in both "SUD metrics" and "SUD reporting issues" tabs

Edits names for Metrics # 19, 20, 32

Edits descriptions for Metrics # 2, 3, 4, 15, 17(1), 17(2), 18, 21, 22, 26, 27, 29, 36

Updated NQF numbers for Metrics # 17(1) and 17(2)

Added NQF number for Metric #21

Removed NQF number for Metric # 16

Changes the milestone or reporting topic of the following metrics:

- Metric #5: From "Assessment of need/qualification for SUD treatment services" to "Milestone 2"
- Metric #15: From "Milestone 5" to "Milestone 6"
- Metric #22: From "Milestone 5" to "Milestone 1"
- Metric #23: From "Other SUD-related metrics" to "Milestone 5"
- Metric #25: From "Other SUD-related metrics" to "Milestone 6"
- Metric #26: From "Other SUD-related metrics" to "Milestone 5"
- Metric #27: From "Other SUD-related metrics" to "Milestone 5"
- Metric #36: From "Milestone 1" to "Milestone 2"

Orders the metrics numerically rather than by milestone or reporting topic

Removes "The definition of an IMD should be the same in #5, #29, #31, and #36" item from the "Checks" section

Removes "Beneficiaries counted in #26 should be the same as those in #27" item from the "Checks" section

Removes "Numerator in #2 should equal the numerator in #4 denominator in #30" item from the "Checks" section