

The Centers for Medicare & Medicaid Services (CMS) customized the Monitoring Report Template (Version 3.0) to support Delaware’s retrospective reporting of monitoring data for its section 1115 substance use disorder (SUD) demonstration. The state should use this customized template to report on retrospective metric trends as requested in the Monitoring Report Instructions (p. 12 of Version 3.0). This template was customized for retrospective reporting in the following ways:

- *Added footnote C to the title page in section 1*
- *The table in section 3 (Narrative information on implementation, by milestone and reporting topics) has been modified to ask the state to report general trends for each Milestone, rather than changes (+ or -) greater than 2 percent for each metric.*
- *The prompts in section 3 that requested implementation updates were removed.*
- *Section 4 (Narrative information on other reporting topics) has been removed entirely.*

1. Title page for the state’s SUD demonstration or the SUD component of the broader demonstration

CMS has pre-populated the title page for the state (see blue text). The state should review the pre-populated text and confirm that it is accurate. Definitions for certain rows are below the table.

Medicaid Section 1115 SUD Demonstrations Monitoring Report – Part B Version 3.0 (customized)
 Delaware Diamond State Health Plan

State	<i>Delaware</i>
Demonstration name	<i>Diamond State Health Plan</i>
Approval period for section 1115 demonstration	<i>08/01/2019-12/31/2023</i>
SUD demonstration start date^a	<i>8/01/2019</i>
Implementation date of SUD demonstration, if different from SUD demonstration start date^b	<i>n.a.</i>
SUD (or if broader demonstration, then SUD -related) demonstration goals and objectives	<i>Increase enrollee access and utilization of appropriate SUD treatment services; decrease use of medically inappropriate and avoidable high cost emergency and hospital services; increase initiation of follow-up SUD treatment after emergency department discharge; and reduce SUD readmission rates.</i>
SUD demonstration year and quarter^c	<i>SUD DY1Q4 – SUD DY3Q1</i>
Reporting period^c	<i>08/01/2019-03/31/2021</i>

^a **SUD demonstration start date:** For monitoring purposes, CMS defines the start date of the demonstration as the *effective date* listed in the state’s STCs at time of SUD demonstration approval. For example, if the state’s STCs at the time of SUD demonstration approval note that the SUD demonstration is effective January 1, 2020 – December 31, 2025, the state should consider January 1, 2020 to be the start date of the SUD demonstration. Note that the effective date is considered to be the first day the state may begin its SUD demonstration. In many cases, the effective date is distinct from the approval date of a demonstration; that is, in certain cases, CMS may approve a section 1115 demonstration with an effective date that is in the future. For example, CMS may approve an extension request on 12/15/2020, with an effective date of 1/1/2021 for the new demonstration period. In many cases, the effective date also differs from the date a state begins implementing its demonstration.

^b **Implementation date of SUD demonstration:** The date the state began claiming federal financial participation for services provided to individuals in institutions for mental disease.

^c **SUD demonstration year and quarter, and reporting period.** The demonstration year, quarter, and calendar dates associated with the monitoring reports in which the metric trends would have been reported according to the reporting schedule in the state’s approved monitoring protocol. For example, if the state’s first monitoring report after monitoring protocol approval is its SUD DY2Q2 monitoring report, the retrospective reporting period is considered SUD DY1Q2 through SUD DY2Q1. The SUD DY1Q1 reporting period is not listed because metrics data are reported with a one-quarter lag.

2. Executive summary

The executive summary should be reported in the fillable box below. It is intended for summary-level information of metrics trends from the retrospective reporting period. The recommended word count is 500 words or less.

DMMA is reporting in this document information for the experience period of January 2019 through December 2020. With a demonstration start date of August 1, 2019, the baseline period is January 1 to July 31, 2019 and the demonstration period reported here is July 1, 2019 through December 31, 2020. For ease of analyzing trends, metrics that are reported to CMS on a monthly basis are also being summarized on a calendar quarter basis. These quarter-by-quarter values are further rolled up to compute a 4-quarter moving average trend. Two values are assessed and reported here on CMS metrics reported monthly—the 4-quarter average trend for CY2019 and the 4-quarter average trend for CY2020. This allows DMMA to review trends at a macro level. For CMS metrics that are annual measures (either CMS-defined or established quality measures), the two data points for annual values for CY2019 and CY2020 are trended here.

The 4-quarter trend of Medicaid beneficiaries with a SUD diagnosis (Metric #3) is 22,948 in CY2019 and 22,972 in CY2020, an increase of 0.1%. The trend rate for Medicaid members with a newly initiated SUD treatment/diagnosis decreased 7.8% over the two years, from a 4-quarter trend value of 1,342 in CY2019 to a value of 1,237 in CY2020. Since Metric #2 is dependent upon claims utilization, the decrease here is expected in CY2020 due to lower utilization during the public health emergency (PHE).

Among the CMS-defined utilization metrics (Metrics #6 through #12), the counts of Medicaid beneficiaries using each service decreased between CY2019 and CY2020 likely due to the PHE, with the notable exception that MAT (Metric #12) increased between CY2019 and CY2020 by 9%, from a 4-quarter average of 5,797 beneficiaries in CY2019 to a 4-quarter average of 6,291 beneficiaries in CY2020. Because this is service used by the most members among those examined in Metrics #7 through #12, the number of beneficiaries receiving any SUD service (Metric #6) also increased 1% from CY2019 and CY2020.

DMMA is pleased to report that the results for initiation (Metric 15) improved from CY 2019 to CY 2020, for all sub-populations (alcohol, opioid, other drug, total). Follow-up after ED visits improved for individuals with mental illness (Metric #17) on both the 7-day and 30-day metrics. For the five measures related to the use of opioids (Metrics #18, #19, #20, #21 and #22), DMMA saw improvement among its SUD population between CY2019 and CY2020 for Metrics #19, #21 and #22. For Metric #20, the numerator is insignificant (3 individuals).

ED utilization per for SUD per 1,000 beneficiaries decreased by 6% from CY2019 to CY2019 (4-quarter average values compared), but this may be due to lower ED utilization overall in 2020 due to the PHE.

Spending for SUD services increased 7% overall from CY2019 to CY2020. On a per capita basis, the increase was 11%. Spending for IMD services was down 20% from CY2019 to CY2020, but it should be noted that the baseline spend for these services is only \$2.8 million.

The count (Metric #26) and rate (Metric #27) of Drug Overdose Deaths increased 25% and 27% respectively.

The HIT metrics saw positive trends, with: Utilization of Telehealth Services for SUD per 1,000 beneficiaries (Metric Q1) 4-qtr avg values increased 2471% (1.2 to 30.9); the Number of Queries to the PMP (Metric Q2) increased 3.9%; and Initial Opioid Prescribing for Long Duration (Metric Q3) decreased by 48.7%.

3. Narrative information on implementation, by milestone and reporting topic

The state should provide a general summary of metric trends by milestone and reporting topic for the entire retrospective reporting period. In these general summaries, the state should discuss any relevant trends that the data shows related to each milestone or reporting topic, including trends in state-specific metrics.

Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State summary of retrospective reporting period
1. Assessment of need and qualification for SUD services			
1.1 Metric trends			
1.1.1. The state reports the following metric trends related to assessment of need and qualification for SUD services		2, 3, 4	Metric 2, newly initiated: 4-qtr avg values were 1,342 for CY2019 and 1,237 for CY2020, respectively. This is a reduction of 7.8%. Metric 3, all beneficiaries with SUD, monthly measure: 4-qtr avg values were 22,948 for CY2019 and 22,972 for CY2020, respectively. This is an increase of 0.1%. Metric 4, all beneficiaries with SUD, annual measure: CY2019 value was 24,062 and CY2020 value was 23,148, a reduction of 3.8%.
2. Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)			
2.1 Metric trends			

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<p>2.1.1 The state reports the following metric trends related to Milestone 1</p>		<p>6, 7, 8, 9, 10, 11, 12, 22</p>	<p>For metrics 6 through 12, 4-qtr averages were computed for CY2019 and CY2020. The comparisons of these values are shown for each metric below.</p> <p>Metric 6, any SUD treatment: change of +1%, from 10,773 in CY2019 to 10,898 in CY2020. In CY2021, Metric #6's Pregnant subpopulation total (2,093) is approximately 52% of Metric #3's Pregnant subpopulation total (4,036). This is a very similar trend when considering the Demonstration total population, Metric #6 (133,572) is approximately 50% of Metric #3's Demonstration total population (268,665).</p> <p>Metric 7, early intervention: using the CMS-defined hierarchical methodology, 0 beneficiaries are counted in this metric in either year.</p> <p>Metric 8, outpatient services: change of -4%, from 8,145 in CY2019 to 7,840 in CY2020</p> <p>Metric 9, IOP and partial hospitalization: change of -40%, from 437 in CY2019 to 263 in CY2020</p> <p>Metric 10, residential and inpatient: change of -15%, from 565 in CY2019 to 482 in CY2020</p> <p>Metric 11, withdrawal management: change of -9%, from 476 in CY2019 to 433 in CY2020</p> <p>Metric 12, MAT: change of +9%, from 5,797 in CY2019 to 6,291 in CY2020</p>
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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State summary of retrospective reporting period
			Changes in annual results from CY2019 to CY2020 for measures 22 and 36 are shown below. Metric 22: increase of 5% (18.0% to 18.9%)
3. Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)			
3.1 Metric trends			
3.1.1 The state reports the following metric trends related to Milestone 2		5, 36	Metric 5, beneficiaries treated in an IMD for SUD, annual measure: CY2019 value was 413 and CY2020 value was 362, a reduction of 12%. Metric 36: decrease of 12% from avg length of stay in IMD of 7.6 days in CY2019 to 6.7 days in CY2020.

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State summary of retrospective reporting period
4. Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)			
4.1 Metric trends			
4.1.1 The state reports the following metric trends related to Milestone 3 <i>Note: There are no CMS-provided metrics related to Milestone 3. If the state did not identify any metrics for reporting this milestone, the state should indicate it has no update to report.</i>	X		
5. Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)			
5.1 Metric trends			
5.1.1 The state reports the following metric trends related to Milestone 4		13, 14	Metric 13: Total number of providers paid for SUD services decreased from 677 in CY2019 to 671 in CY2020 Metric 14: Total number of providers paid for SUD MAT services decreased from 33 in CY2019 to 32 in CY2020
6. Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)			
6.1 Metric trends			

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State summary of retrospective reporting period
6.1 The state reports the following metric trends related to Milestone 5		18, 19, 20, 21, 23, 27	<p>Changes in annual results from CY2019 to CY2020 for measures 18, 19, 20 and 21 are shown below.</p> <p>Metric 18, Use of Opioids at High Dosage in Persons Without Cancer: increase of 5% (8.0% to 8.4%)</p> <p>Metric 19, Use of Opioids from Multiple Providers in Persons Without Cancer: decrease of 42% (1.0% to 0.6%)</p> <p>Metric 20, Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer: no meaningful finding as there are only 3 beneficiaries in the numerator</p> <p>Metric 21, Concurrent Use of Opioids and Benzodiazepines: decrease of 7% (9.0% to 8.3%)</p> <p>Metric 23, ED utilization for SUD per 1000 Medicaid beneficiaries: 4-qtr avg values were 6.9 for CY2019 and 6.3 for CY2020, respectively. This is a reduction of 6%.</p> <p>Metric 27, Drug Overdose Deaths (rate): increase of 27% from CY 2019 to CY 2020 (9.44 to 12.03 per 1000).</p>
7. Improved Care Coordination and Transitions between Levels of Care (Milestone 6)			
7.1 Metric trends			

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State summary of retrospective reporting period
7.1.1 The state reports the following metric trends related to Milestone 6		15, 17, 25	<p>Metric 15, initiation results, change from CY2019 to CY2020: for alcohol abuse only, increase of 3% (52.6% to 53.9%); for opioid abuse only, increase of 8% (41.0% to 44.1%); for other drug abuse, increase of 2% (51.7% to 52.9%); for total AOD, increase of 5% (45.7% to 48.1%)</p> <p>Metric 15, engagement results, change from CY2019 to CY2020: for alcohol abuse only, increase of 0.3% (23.5% to 23.6%); for opioid abuse only, decrease of 8% (47.3% to 43.5%); for other drug abuse, decrease of 7% (24.5% to 22.6%); for total AOD, decrease of 6% (35.5% to 33.2%)</p> <p>Metric 17, FUA-AD, change from CY2019 to CY2020: for 7-days, decrease of 15% (10.3% to 8.8%); for 30-days, decrease of 10% (19.6% to 17.6%)</p> <p>Metric 17, FUM-AD, change from CY2019 to CY2020: for 7-days, increase of 7% (18.1% to 19.4%); for 30-days, increase of 1% (36.7% to 37.3%)</p> <p>Metric 25, readmissions among SUD beneficiaries: No material change in this measure from CY2019 (25.8%) to CY2020 (25.8%)</p>

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State summary of retrospective reporting period
8. SUD health information technology (health IT)			
8.1 Metric trends			
8.1.1 The state reports the following metric trends related to its health IT metrics			Metric Q1, Utilization of Telehealth Services for SUD per 1,000 beneficiaries: 4-qtr avg values from CY 2019 to CY 2020 increased 2471% (1.2 to 30.9). Metric Q2, Number of queries to the PMP: increased 3.9% from CY 2019 to CY 2020 (15.2 to 18.9 million). Metric Q3, Initial Opioid Prescribing for Long Duration (IOP-LD): 4-qtr avg values from CY 2019 to CY 2020 decreased by 48.7% (20.3% to 9.9%).
9. Other SUD-related metrics			
9.1 Metric trends			

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State summary of retrospective reporting period
9.1.1 The state reports the following metric trends related to other SUD-related metrics		24, 26, 28, 29, 30, 31, 32	<p>Metric 24, Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries: 4-qtr avg values were 5.4 for CY2019 and 4.7 for CY2020, respectively. This is a reduction of 12%.</p> <p>Metric 26: Drug Overdose Deaths (count): increased 25% from CY 2019 (2,817) to CY 2020 (3,531).</p> <p>Metric 28: Overall SUD spending increased 7% from CY2019 to CY2020</p> <p>Metric 29: SUD spending within IMDs decreased 20% from CY2019 to CY2020. Note that baseline spending is only \$2.8 million.</p> <p>Metric 30: Per capita spending increased 11% from CY 2019 to CY2020</p> <p>Metric 31: Per capita spending within IMDs decreased 9% from CY2019 to CY2020. Note that baseline spending is only \$2.8 million.</p> <p>Metric 32: No material change in this measure from CY2019 (92.0%) to CY2020 (91.7%)</p>

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

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