

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

State	Louisiana
Demonstration name	Healthy Louisiana Substance Use Disorder 1115 Demonstration
Approval date for demonstration	February 1, 2018
Approval period for SUD	February 1, 2018 – December 31, 2022
SUD (or if broader demonstration, then SUD - related) demonstration goals and objectives	<p>The goal of this demonstration is for Louisiana to maintain critical access to opioid use disorder (OUD) and other substance use disorder (SUD) services and continue delivery system improvements for these services to provide more coordinated and comprehensive OUD/SUD treatment for Medicaid beneficiaries. This demonstration will provide the state with authority to provide high-quality, clinically appropriate SUD treatment services for short-term residents in residential and inpatient treatment settings that qualify as an Institution for Mental Diseases (IMD). It will also build on the state’s existing efforts to improve models of care focused on supporting individuals in the community and home, outside of institutions and strengthen a continuum of SUD services based on the American Society of Addiction Medicine (ASAM) criteria or other comparable nationally recognized assessment and placement tools that reflect evidence-based clinical treatment guidelines.</p> <p>During the demonstration period, Louisiana seeks to achieve the following:</p> <ul style="list-style-type: none"> • Increase enrollee access to and utilization of appropriate OUD/SUD treatment services based on the ASAM Criteria; • Decreased use of medically inappropriate and avoidable high-cost emergency department and hospital services by enrollees with OUD/SUD; • Increased initiation of follow-up after discharge from emergency department for alcohol or other drug dependence; and • Reduced readmission rates for OUD/SUD treatment.

2. Executive Summary

Louisiana received approval of the Healthy Louisiana OUD/SUD 1115 demonstration waiver on February 1, 2018. Louisiana completed action items identified in the approved Implementation Plan Protocol within the indicated timelines. Related to milestone 3, education of the benefits of Medication Assisted Treatment (MAT) is an ongoing initiative.

In DY3 Q2, in response to CMS feedback on the monitoring protocol, Louisiana requested and received approval from CMS on revisions and deviations from the technical specifications for certain metrics. The revised protocol was submitted on May 22, 2020, and approval of the monitoring protocol was received on June 3, 2020.

Submission of the quarterly report now includes a completed Part A (the metrics workbook) and corresponding metric trends analysis in the narrative information below; which, now includes trend analysis for established quality measures in this revised Part-B Report. In addition to the DY3 Q2 data, Louisiana collected data for the retrospective reports, which is submitted as one workbook, with a separate tab for each reported quarter from DY1 Q1 through DY3 Q1.

In DY3 Q2, Louisiana also increased meeting recurrences and correspondence with the independent evaluator, Tulane University, to focus on information needed for the Mid-Point Assessment. Preliminary guidance was also requested and received from CMS. At this time, Louisiana expects to submit the assessment by November 16, 2020.

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)
1.2 Assessment of Need and Qualification for SUD Services			
1.2.1 Metric Trends			
<input checked="" 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.	During this reporting period there was a positive deviation from the previous quarter for Medicaid Beneficiaries with Newly Initiated SUD Treatment and Diagnosis (metric 2) with a 6.09% increase and Medicaid Beneficiaries with SUD Diagnosis Monthly (metric 3) with a .11% increase. The trends were impacted due to the state’s Performance Improvement Project (PIP) with the MCOs to improve rates of initiation and engagement in SUD treatment. In 2020 the state added a new HEDIS measure to the PIP gauging follow up at 7 days and 30 days post discharge from EDs to keep persons engaged in care. Additionally, there was a positive trend from the previous year for Medicaid Beneficiaries with SUD Diagnosis Annually (metric 4) with a 4.79% increase. However, for metric 5 there was a minimal decrease of 2.01% in the number of beneficiaries treated in IMDs from DY1 to DY2. This is attributable to the 3.37% increase in beneficiaries receiving outpatient and IOP services over the same time period. In addition, the state has implemented trainings, outreach and awareness campaigns to heighten awareness in the community about available services for SUD and OUD.		
<input type="checkbox"/> The state has no metrics trends to report for this reporting topic.			
1.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) The target population(s) of the demonstration <input type="checkbox"/> ii) The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

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Submitted on August 28, 2020

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			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
2.2 Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)			
2.2.1 Metric Trends			
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1	<p>During this reporting period there was a positive deviation from the previous quarter for Intensive Outpatient (3.19%), Residential (8.27%), Withdrawal Management (21.73%) and MAT (9.06%) These positive trends were impacted due to the state’s Performance Improvement Project (PIP) with the MCOs to improve rates of initiation and engagement in SUD treatment. In 2020 OBH added a new HEDIS measure to the PIP gauging follow up at 7 days and 30 days post discharge from EDs for SUD to keep persons engaged in care, In addition, the state has implemented trainings, outreach and awareness campaigns to heighten awareness in the community about available services for SUD and OUD.</p> <p>During this period there was a negative deviation from previous year for Average Length of Stay in IMDs of 4.97%. This deviation is attributed to the increase in admissions to withdrawal management facilities identified as IMDs which have shorter length of stays than other levels of care identified as IMDs, thereby impacting the overall average length of stay for IMDs.</p>		<p>6-12</p> <p>36</p>
<input 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)
2.2.2 Implementation Update			
<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"> <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) <input 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 	<p>i.) The state continues to take measures that will increase access to Medication Assisted Treatment. Although language is incorporated within all behavioral health provider contracts, the Louisiana Medicaid Provider Manual, and the State Plan Amendment to provide MAT onsite or initiate a referral to such services when indicated, this new concept contradicts the historical notion of abstinence based models, which creates resistance and stigma. OBH continues to implement workforce development initiatives to provide training and education of the evidence and efficacy of MAT for persons with Opioid Use Disorder (OUD).</p> <p>Louisiana continues to implement the Extension for Community Health Outcomes (ECHO) Project, which is a virtual online professional development series for educators, University Fellow Programs, physicians, clinicians, BH providers and private practitioners. This opportunity allows clinicians to analyze de-identified, real time cases that explore approaches, methods and strategies to offering MAT. OBH is currently in the planning stages of offering a stigma reduction series of trainings across the state. Due to COVID 19, the state is in the process of restructuring the training approach.</p> <p>In addition, OBH continues to offer outreach mobile teams throughout the state. These teams consist of a Licensed Mental Health Professional (LMHP), Nurse, and a Peer Support Specialist. These teams have created strategic outreach and awareness initiatives that are specific to their respective Region. These initiatives are geared to provide education on MAT, Narcan distribution and Screening, Brief Intervention and Referral to MAT specialty treatment services. However, as of March 2020, due to COVID, these programs were temporarily suspended due to the Governor’s stay at home order. As of this quarter, these teams have implemented other virtual techniques to disseminate information, such as social media.</p>	<p>i.) 7/1/2019 – 9/30/2019</p>	

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<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.			
3.2 Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)			
3.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2			
<input 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.			
3.2.2 Implementation Update			
<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"> <input checked="" type="checkbox"/> i) Planned activities to improve providers' use of evidence-based, SUD-specific placement criteria <input 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 	<p>i) To address expansion efforts for MAT services, OBH implemented the specialized Hub and Spoke Model and currently have 47 Spokes and 10 Hubs, with a goal of operating a target of 50 Spokes by 9/2020. Selected providers complete a comprehensive assessment and the Treatment Needs Questionnaire (TNQ) Form, which guides proper patient placement for MAT services. The intent of the TNQ form is to guide practitioners in determining whether the patient should be receiving treatment at an Office Based Opioid Treatment facility (OBOT) or receive more intensive services at an Opioid Treatment Program (OTP).</p> <p>In addition, some of Louisiana's MCOs are providing trainings on MAT and offering participants the ability to become a certified buprenorphine prescriber during the course.</p>		
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			

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<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.			
4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)			
4.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3			
<input 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.			
4.2.2 Implementation Update			
<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"> <input type="checkbox"/> i) Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards <input type="checkbox"/> ii) State review process for residential treatment providers' compliance with qualifications standards <input type="checkbox"/> iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

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<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 3			
<input checked="" 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.			
5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)			
5.2.1 Metric Trends			
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4	<p>The number of Medicaid SUD providers (Metric #13) has increased by 9.49% as well as those that meet the standard to provide buprenorphine or methadone as part of MAT (Metric #14) has increased by 10.42% respectively.</p> <p>As of January 20, 2020, Methadone for opioid dependence is a LA Medicaid covered service which will be provided by the Opioid Treatment Programs (OTP) located in each Louisiana Department of Health Region.</p> <p>In October 2019, Tulane University School of Medicine, Department of Psychiatry, in collaboration with LDH’s Office of Behavioral Health implemented the Hub and Spoke model which seeks to combat the opioid epidemic by helping to reduce barriers for healthcare prescribers, treating opioid use disorders, especially in rural Louisiana. Project ECHO will give healthcare professionals access to training, experts and resources not usually available to them creating an environment that is conducive to partnership development, collaborations and expansion of community resources. LDH continues to encourage provider to become certified dispensers by offering Drug Addiction Treatment Act of 2000 (DATA 2000) waiver trainings to all interested waiver-eligible providers through the Tulane Echo Project free of charge.</p>		13,14
<input type="checkbox"/> The state has no trends to report for this reporting topic.			

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5.2.2 Implementation Update			
<p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <p><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</p>			
<input checked="" 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 4			
<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)
6.2 Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)			
6.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5	<p>IET (measure 15) – There is a slight decrease in the total initiation rate and a slight increase in total engagement rate comparing 2018 to 2019. A performance improvement project was implemented in 2019 with the purpose of improving initiation and engagement rates for substance use treatment services. For those members enrolled in managed care, the rates for both initiation and engagement showed improvement in comparing the 2018 statewide average to the 2019 statewide average; in addition, the 2019 rates are above the national mean.</p> <p>OHD (measure 18) – There is a positive trend (decrease) in the number of members prescribed opioids at a high dosage comparing 2018 to 2019. There are a number of successful interventions in place to monitor and oversee opioid prescribing practices.</p> <p>COB (measure 21) – There is a positive trend (decrease) in the number of members with concurrent use of opioids and benzodiazepines comparing 2018 to 2019. There are a number of successful interventions in place to monitor and oversee opioid prescribing practices.</p> <p>USC (measure 22) – There is a slight decrease in the number of members receiving continued use of pharmacotherapy for OUD comparing 2018 to 2019. It is anticipated this measure will be adopted as a monitored measure for the Healthy Louisiana program (managed care) beginning with measurement year 2021.</p>		15, 18, 21, 22
<input type="checkbox"/> The state has no trends to report for this reporting topic.			

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6.2.2 Implementation Update			
<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"> <input type="checkbox"/> i) Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD <input type="checkbox"/> ii) Expansion of coverage for and access to naloxone 			
<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 5	The State has suspended performance improvement projects and other quality initiatives in response to COVID-19. As a result, performance on these measures may decrease given the demands on the healthcare system.		
<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)
7.2 Improved Care Coordination and Transitions between Levels of Care (Milestone 6)			
7.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6	<p>FUA (measure 17) – There is a slight increase in the number of members receiving a follow-up visit after a hospital visit for an AOD reason comparing 2018 to 2019. This metric was added to the Initiation and Engagement of SUD Treatment Services performance improvement project in 2020 for the purpose of identifying barriers and appropriate interventions to improve the overall statewide rate.</p> <p>FUM (measure 17-2) – There is a decrease in the number of members receiving a follow-up visit after a hospital visit for a mental health reason comparing 2018 to 2019. Overall, we see a decrease in the total number of hospitalizations for a mental health related reason in comparing 2018 to 2019. It is anticipated this measure will be adopted as a monitored measure for the Healthy Louisiana program (managed care) beginning with measurement year 2021.</p>		17(1), 17(2)
<input type="checkbox"/> The state has no trends to report for this reporting topic.			
7.2.2 Implementation Update			
<p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <input type="checkbox"/> Implementation of policies supporting beneficiaries’ transition from residential and inpatient facilities to community-based services and supports			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

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<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.			
8.2 SUD Health Information Technology (Health IT)			
8.2.1 Metric Trends			
<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.			

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8.2.2 Implementation Update			
<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"> <input type="checkbox"/> i) How health IT is being used to slow down the rate of growth of individuals identified with SUD <input type="checkbox"/> ii) How health IT is being used to treat effectively individuals identified with SUD <input type="checkbox"/> iii) How health IT is being used to effectively monitor “recovery” supports and services for individuals identified with SUD <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 <input type="checkbox"/> v) Other aspects of the state’s health IT implementation milestones <input type="checkbox"/> vi) The timeline for achieving health IT implementation milestones <input type="checkbox"/> vii) Planned activities to increase use and functionality of the state’s prescription drug monitoring program 	<p>A general update on the Health IT Plan and data for DY3 (Q2) is included in Attachments A1-DY3 (Q2)-HIT and A2-DY3 (Q2)- HIT. Additionally, the attached 1115 SUD Workbook-HIT Measures DY3 (Q2) includes data for HIT metrics.</p>		
<input checked="" 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)
9.2 Other SUD-Related Metrics			
9.2.1 Metric Trends			

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<p><input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics</p>	<p>Metric 23-Emergency Department Utilization and Metric 24-Inpatient Stays for SUD per 1,000 Medicaid beneficiaries were not above or below the 2% deviation this reporting period.</p> <p>Metric 25-Readmissions Among Beneficiaries with SUD presented a positive deviation of (5.34%), which may be attributed to hospital admissions due to other primary comorbidities, thereby treating the SUD as a secondary condition when readmitted to the hospital. In addition, readmissions could be a direct correlation to the increase of trainings, education and outreach in the community to engage persons back into care.</p> <p>Metric 27 - Overdose Death rates presented a positive deviation of (8.83%), which could be attributed to the increase of OUD overdose rates of (15.86%), thereby increasing the overall rate of overdoses. Another attributing factor is the rate of drugs coming into Louisiana and the number of persons buying unfamiliar product that is laced with fentanyl.</p> <p>Metric 32 - Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD (AAP). There is a slight decrease in the number of members with SUD who had an ambulatory or preventative care visit comparing 2018 to 2019; however, the overall percentage of members accessing preventive or ambulatory health services remains fairly high.</p> <p>Metrics 33, 34, and 35 – Given the very low incidents of these categories, even an increase of 1 gives a percentage change of greater than 2%. Statewide, there was 1 grievance last quarter compared to 3 grievances this quarter. Additionally, there were 4 appeals last quarter compared to 5 this quarter. Please see table below.</p>		<p>23-25,27 & 32 - 35</p>
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Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)																												
	<table border="1" data-bbox="848 542 1404 954"> <thead> <tr> <th data-bbox="848 542 976 683">Month/Year</th> <th data-bbox="976 542 1115 683">Critical Incidents</th> <th data-bbox="1115 542 1276 683">Grievances</th> <th data-bbox="1276 542 1404 683">Appeals</th> </tr> </thead> <tbody> <tr> <td data-bbox="848 683 976 732">20-Jan</td> <td data-bbox="976 683 1115 732">0</td> <td data-bbox="1115 683 1276 732">1</td> <td data-bbox="1276 683 1404 732">3</td> </tr> <tr> <td data-bbox="848 732 976 781">20-Feb</td> <td data-bbox="976 732 1115 781">0</td> <td data-bbox="1115 732 1276 781">0</td> <td data-bbox="1276 732 1404 781">0</td> </tr> <tr> <td data-bbox="848 781 976 829">20-Mar</td> <td data-bbox="976 781 1115 829">0</td> <td data-bbox="1115 781 1276 829">0</td> <td data-bbox="1276 781 1404 829">1</td> </tr> <tr> <td data-bbox="848 829 976 878">20-Apr</td> <td data-bbox="976 829 1115 878">0</td> <td data-bbox="1115 829 1276 878">1</td> <td data-bbox="1276 829 1404 878">2</td> </tr> <tr> <td data-bbox="848 878 976 927">20-May</td> <td data-bbox="976 878 1115 927">0</td> <td data-bbox="1115 878 1276 927">0</td> <td data-bbox="1276 878 1404 927">1</td> </tr> <tr> <td data-bbox="848 927 976 954">20-Jun</td> <td data-bbox="976 927 1115 954">0</td> <td data-bbox="1115 927 1276 954">2</td> <td data-bbox="1276 927 1404 954">2</td> </tr> </tbody> </table>	Month/Year	Critical Incidents	Grievances	Appeals	20-Jan	0	1	3	20-Feb	0	0	0	20-Mar	0	0	1	20-Apr	0	1	2	20-May	0	0	1	20-Jun	0	2	2		
Month/Year	Critical Incidents	Grievances	Appeals																												
20-Jan	0	1	3																												
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20-May	0	0	1																												
20-Jun	0	2	2																												
<input type="checkbox"/> The state has no trends to report for this reporting topic.																															
9.2.2 Implementation Update																															
<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.																															
10.2 Budget Neutrality																															
10.2.1 Current status and analysis																															
<input checked="" 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.	Beginning this quarter, DY3 (Q2), the State is submitting the 1115 SUD Demonstration budget neutrality data using the Budget Neutrality Template issued by CMS. The Budget Neutrality Template uploaded to PMDA (LA BN Workbook – OUD_SUD – 1115 PMDA-20200724 v2.12 - QE.3.31.20) incorporates data collected from the beginning of the 1115 SUD Demonstration period.																														

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10.2.2 Implementation Update			
<input type="checkbox"/> The state expects to make other program changes that may affect budget neutrality			
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
11.1 SUD-Related Demonstration Operations and Policy			
11.1.1 Considerations			
<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.			

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11.1.2 Implementation Update			
<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"> <input type="checkbox"/> i) How the delivery system operates under the demonstration (e.g. through the managed care system or fee for service) <input type="checkbox"/> ii) Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes) <input type="checkbox"/> iii) Partners involved in service delivery 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<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.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state is working on other initiatives related to SUD or OUD	<p>OBH is working to expand access to MAT via multiple grant awards, targeting expansion of evidence based treatment for persons with opioid use disorder (OUD). The state is implementing a Hub and Spoke model. This model is utilizing Louisiana’s current ten opioid treatment programs (OTPs) as the “Hub” and mobilizing Drug Addiction Treatment Act (DATA) Waived Physicians as the “Spokes.”</p> <p>Louisiana is one of six states participating in the Shatterproof Quality Measurement System pilot program. The Shatterproof pilot complements the SUD demonstration via use of claims based measures, improving consumer awareness of SUD services and providing the opportunity for consumer feedback on SUD providers.</p>		
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input checked="" type="checkbox"/> The initiatives described above are related to the SUD or OUD demonstration (States should note similarities and differences from the SUD demonstration)	<p>The Shatterproof initiative works with all addition treatment facilities, not only those providing Medicaid services.</p>		
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
12. SUD Demonstration Evaluation Update 12.1. Narrative Information			
<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.	<p>A summary of DY3 Q2 evaluation activities is included in the attachment, provided by Tulane University.</p>  <p>Apr Jun SUD Quarterly_Report Yr:</p>		
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			

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Quarter 2 – April 1, 2020 – June 30, 2020
Submitted on August 28, 2020

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" 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.	LDH meets regularly with our independent evaluators of Tulane University to identify, clarify and fulfill information requests on deliverables. This work is ongoing. LDH anticipates expected timelines to be met at this time.		
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			
<input checked="" type="checkbox"/> List anticipated evaluation-related deliverables related to this demonstration and their due dates.	Interim Evaluation Report, Dec 31, 2021 Summative Evaluation Report, June 30, 2024		
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			
13.1 Other Demonstration Reporting			
13.1.1 General Reporting Requirements			
<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.			

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Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<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"> <input type="checkbox"/> i) The schedule for completing and submitting monitoring reports <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.			
13.1.2 Post-Award Public Forum			
<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.			

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Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
14.1 Notable State Achievements and/or Innovations			
14.1 Narrative Information			
<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:

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