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 l table should stay consistent over time.

| | Nebraska |
|---|--|
| State | |
| Demonstration name | Nebraska Substance Use Disorder Demonstration |
| Approval date for demonstration | 06/28/2019 |
| Approval period for SUD | 07/01/2019 - 6/30/2024 |
| Approval date for SUD, if different from above | 06/28/2019 |
| Implementation date of SUD, if different from above | 07/01/2019 |
| SUD (or if broader demonstration, then SUD - related) demonstration goals and objectives | During the demonstration period, the state seeks to achieve the following goals: 1. Increased rates of identification, initiation, and engagement in treatment for SUD; 2. Increased adherence to and retention in treatment; 3. Reductions in overdose deaths, particularly those due to opioids; 4. Reduced utilization of emergency departments and inpatient hospital settings for treatment where the utilization is preventable or medically inappropriate through improved access to other continuum of care services; 5. Fewer readmissions to the same or higher level of care where the readmission is preventable or medically inappropriate; and, 6. Improved access to care for physical health conditions among beneficiaries with SUD |

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.

Key Achievements & Highlights:

During DY3Q1 (July 1, 2021 – September 30, 2021), the state focused on two implementation areas: 1) evaluation and 2) new Medicaid-covered services.

On March 17, 2021, the state awarded the contract for the independent contractor for the evaluation design and as of this submission date conducted regular meetings with the contractor. Additionally, the contract was amended on August 3, 2021 to include the Mid-Point Assessment. The state is actively working with the contractor to facilitate MPA and Interim Report related interviews and data analysis.

Risks:

Work on the SUD demonstration implementation was impacted by the need to allocate state Medicaid resources towards addressing COVID-19. This reprioritization impacted multiple demonstration implementation milestones. In DY3Q1, the state made progress towards addressing the remaining implementation milestones that had been delayed due to the COVID-19 PHE.

Unexpected Changes:

The state recorded metric trends during DY3Q1 reporting quarter. These metric trends were almost exclusively due to the addition of Medicaid Expansion population.

Issues: None

Key Changes: None

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 | | | |
| ☑ 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. | The state continued to record metric increases during DY3Q1 reporting quarter. These metric trends were almost exclusively due to this being the first quarter fully reflecting the addition of the Medicaid Expansion population. *Metric 3 – Medicaid Beneficiaries with SUD Diagnosis (monthly): 22.25% | 10/01/2020- 12/31/2020 | Metric 3 |
| ☐ The state has no metrics trends to report for this rep | porting topic. | | |
| 1.2.2 Implementation Update | | | |
| Compared to the demonstration design and operational details, the state expects to make the following changes to: i) The target population(s) of the demonstration ii) The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration | For implementation updates, insert annual or quarterly report in which the updated was first reported. EXAMPLE: ii) The state is expanding the clinical criteria to include X diagnoses. | Insert the measurement period in which the update was first reported. EXAMPLE: ii) 01/01/2018-03/31/2018 | Insert the metric related to the reported update (if any) or write "N/A". EXAMPLE: ii) N/A |
| ☐ The state has no implementation update to report for | | | |
| ☐ The state expects to make other program changes that may affect metrics related to assessment of need and qualification for SUD services ☐ The state has no implementation update to report for the state has no implementation update to report | 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. | EXAMPLE: 01/01/2019- 03/31/2019 | EXAMPLE: #6 and 7: Medicaid beneficiaries with SUD diagnosis (monthly) |

| Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|---|---|--------------------------------|
| 2.2 Access to Critical Levels of Care for OUD and o | ther SUDs (Milestone 1) | | |
| 2.2.1 Metric Trends | | | |
| ⊠ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1 | The state continued to record metric increases during DY3Q1 reporting quarter. These metric trends were almost exclusively due to this being the first quarter fully reflecting the addition of the Medicaid Expansion population. *Metric 6 – Any SUD Treatment: 23.22% *Metric 8 – Outpatient Services: 20.95% *Metric 9 – Intensive Outpatient and Partial Hospitalization Services: 41.34% *Metric 10 – Residential and Inpatient Services: 36.47% *Metric 11 – Withdrawl Management: 28.05% *Metric 12 – Medication-Assisted Treatment (MAT): 14.84% | 10/01/2020- 12/31/2020 | Metric 6, 8, 9, 10, 11, and 12 |
| \Box The state has no metrics trends to report for this rep | orting topic. | | |

| Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|--|--|---|----------------------------|
| 2.2.2 Implementation Update | | | |
| Compared to the demonstration design and operational details, the state expects to make the following changes to: \[\subseteq 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) \[\subseteq 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 | On March 31, 2020, the state submitted state plan amendments (SPAs) to add Medically-monitored Inpatient Withdrawal Management (MMIW) and Opioid Treatment Program (OTP) as Medicaid-covered state plan services. The state recieved SPA approval for the MMIW and OTP services on Novermber 3, 2020. The state training materials for providers was released in DY2Q4. Service start date was June 1, 2021. The state continues the work necessary to facilitate provider Medicaid enrollment and reimbursement for the new services. Work on the SUD demonstration implementation was impacted by the need to allocate state Medicaid resources towards addressing COVID-19. This reprioritization impacted multiple demonstration implementation milestones. In DY3Q1, the state made progress towards addressing the remaining implementation milestones that had been | | |
| | delayed due to the COVID-19 PHE. | | |
| ☐ The state has no implementation update to report fo☐ The state expects to make other program changes that may affect metrics related to Milestone 1 | tuns reporting topic. | | |
| ☐ The state has no implementation update to report fo | r this reporting topic. | | |
| 3.2 Use of Evidence-based, SUD-specific Patient Pla | 1 9 1 | | |
| 3.2.1 Metric Trends | | | |
| ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2 | | | |
| $oxed{\boxtimes}$ The state has no trends to report for this reporting to | pic. | | |

| Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|--|---|----------------------------|
| ☑ The state is not reporting metrics related to Mileston | ne 2. | | |
| 3.2.2 Implementation Update | | | |
| Compared to the demonstration design and operational details, the state expects to make the following changes to: i) Planned activities to improve providers' use of evidence-based, SUD-specific placement criteria 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 | For DY3Q1, MLTC continued to work with NE DHHS sister divisions and contracted health plans to develop additional managed care contract language specifying utilization management requirements and level of care assessments for SUD treatment. Work on the SUD demonstration implementation was impacted by the need to allocate state Medicaid resources towards addressing COVID-19. This reprioritization impacted multiple demonstration implementation milestones. In DY3Q1, the state made progress towards addressing the remaining implementation milestones that had been delayed due to the COVID-19 PHE. | | |
| ☐ The state has no implementation update to report fo | r this reporting topic. | | |
| ☐ The state expects to make other program changes that may affect metrics related to Milestone 2 | | | |
| ☐ The state has no implementation update to report for | r this reporting topic. | | |
| ☐ The state is not reporting metrics related to Mileston | ne 2. | | |
| • • • • | ram Standards to Set Provider Qualifications for Residential Treatment Faci | ilities (Milestone 3) | |
| 4.2.1 Metric Trends | | | |
| ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3 | | | |
| $oxed{\boxtimes}$ The state has no trends to report for this reporting to | opic. | | |

| Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|--|--|---|----------------------------|
| ☐ The state is not reporting metrics related to Mileston | ne 3. | | |
| 4.2.2 Implementation Update | | | |
| Compared to the demonstration design and operational details, the state expects to make the following changes to: i) Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards ii) State review process for residential treatment providers' compliance with qualifications standards iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site | For DY3Q1, MLTC continued to work with NE DHHS sister divisions and contracted health plans to develop additional managed care contract language to require provider education regarding the requirements to facilitate onsite or offsite access to MAT. For DY3Q1, MLTC continued to work with the NE DHHS sister divisions and contracted health plans to develop additional managed care contract language to require reviews of residential treatment providers to assure the types of services, hours of clinical care, and credentials of staff for residential treatment settings are performed according to ASAM Criteria, or other nationally recognized, evidence-based SUD-specific program standards. Work on the SUD demonstration implementation was impacted by the need to allocate state Medicaid resources towards addressing COVID-19. This reprioritization impacted multiple demonstration implementation milestones. In DY3Q1, the state made progress towards addressing the remaining implementation milestones that had been delayed due to the COVID-19 PHE. | | |
| ☐ The state has no implementation update to report for | this reporting topic. | | |
| ☐ The state expects to make other program changes that may affect metrics related to Milestone 3 | | | |
| ☐ The state has no implementation update to report fo | r this reporting topic. | | |
| ☐ The state is not reporting metrics related to Mileston | | | |
| i j | of Care including for Medication Assisted Treatment for OUD (Milestone 4) | | |
| ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4 | 7 | | |

| Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|--|--|---|----------------------------|
| ☐ The state has no trends to report for this reporting to | - | , | |
| 5.2.2 Implementation Update | • | | |
| Compared to the demonstration design and operational details, the state expects to make the following changes to: | In DY3Q1, the Heritage Health MCOs reported capacity for all ASAM levels of care. | | |
| ☑ Planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients in across the continuum of SUD care | Work on the SUD demonstration implementation was impacted by the need to allocate state Medicaid resources towards addressing COVID-19. This reprioritization impacted multiple demonstration implementation milestones. In DY3Q1, the state made progress towards addressing the remaining implementation milestones that had been delayed due to the COVID-19 PHE. | | |
| ☐ The state has no implementation update to report fo | r this reporting topic. | | |
| ☐ The state expects to make other program changes that may affect metrics related to Milestone 4 | | | |
| ☐ The state has no implementation update to report for | r this reporting topic. | | |
| 6.2 Implementation of Comprehensive Treatment a 6.2.1 Metric Trends | nd Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5) | | |
| ⊠ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5 | The state continued to record metric increases during DY3Q1 reporting quarter. These metric trends were almost exclusively due to this being the first quarter fully reflecting the addition of the Medicaid Expansion population. *Metric 23 – Emergency Department Utilization fro SUD per 1,000: 4.39% | 10/01/2020- 12/31/2020 | Metric 23 |
| ☐ The state has no trends to report for this reporting to | opic. | | |

| Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|--|-------------------------------------|---|----------------------------|
| 6.2.2 Implementation Update | • | , | () |
| Compared to the demonstration design and operational details, the state expects to make the following changes to: i) Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD ii) Expansion of coverage for and access to naloxone | | | |
| ☐ The state has no implementation update to report for | r this reporting topic. | | |
| ☐ The state expects to make other program changes that may affect metrics related to Milestone 5 | | | |
| ☐ The state has no implementation update to report for | | | |
| 7.2 Improved Care Coordination and Transitions b | etween Levels of Care (Milestone 6) | | |
| 7.2.1 Metric Trends | | | |
| ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6 | | | |
| ☐ The state has no trends to report for this reporting to | opic. | | |

| Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|---|--|---|----------------------------|
| 7.2.2 Implementation Update | • | , | • |
| Compared to the demonstration design and operational details, the state expects to make the following changes to: | For DY3Q1, MLTC continued to work with contracted health plans to update contract language to reflect specific requirements for Care Management follow up after SUD treatment discharge. Work on the SUD demonstration implementation was impacted by the need to allocate state Medicaid resources towards addressing COVID-19. This reprioritization impacted multiple demonstration implementation milestones. In DY3Q1, the state made progress towards addressing the remaining implementation milestones that had been delayed due to the COVID-19 PHE. | | |
| ☐ The state has no implementation update to report fo | r this reporting topic. | | |
| ☐ The state expects to make other program changes that may affect metrics related to Milestone 6 | | | |
| ☐ The state has no implementation update to report fo | r this reporting topic. | | |
| 8.2 SUD Health Information Technology (Health IT 8.2.1 Metric Trends | | | |
| ☑ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its Health IT metrics | The state saw a 6.55% increase in telehealth utilization during DY2Q4 compared to the previous reporting quarter due to the COVID public health emergency. For DY3Q1, this decreased 20.77%. The state anticipates this may be due to the easing of public health restrictions and the reopening of inperson services. | 10/01/2020- 12/31/2020 | Metric Q3 |
| ☐ The state has no trends to report for this reporting to | ppic. | | |

| Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|--|-------------------------|---|----------------------------|
| 8.2.2 Implementation Update | State response | MIMI/DD/1111) | (II any) |
| Compared to the demonstration design and | | | |
| operational details, the state expects to make the | | | |
| following changes to: | | | |
| ☐ i) How health IT is being used to slow down | | | |
| the rate of growth of individuals identified with | | | |
| SUD | | | |
| ☐ ii) How health IT is being used to treat | | | |
| effectively individuals identified with SUD | | | |
| ☐ iii) How health IT is being used to effectively | | | |
| monitor "recovery" supports and services for individuals identified with SUD | | | |
| ☐ 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 | | | |
| □ v) Other aspects of the state's health IT | | | |
| implementation milestones | | | |
| □ vi) The timeline for achieving health IT | | | |
| implementation milestones | | | |
| ☐ vii) Planned activities to increase use and functionality of the state's prescription drug | | | |
| monitoring program | | | |
| momornig program | | | |
| ☐ The state has no implementation update to report for | r this reporting topic. | | |
| ☐ The state expects to make other program changes that may affect metrics related to Health IT | | | |
| that may affect metrics ferated to freatth IT | | | |
| ☐ The state has no implementation update to report for | r 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 | | | |
| ⊠ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics | The state continued to record metric increases during DY3Q1 reporting quarter. These metric trends almost exclusively reflect the addition of the Medicaid Expansion population. *Metric 24 – Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries: 4.47% | 10/01/2020- 12/31/2020 | Metric 24 |
| ☐ The state has no trends to report for this reporting to | opic. | 1 | ı |
| 9.2.2 Implementation Update | | | |
| ☐ The state expects to make other program changes that may affect metrics related to other SUD-related metrics | | | |
| ☐ The state has no implementation update to report fo | r this reporting topic. | | |
| 10.2 Budget Neutrality | | | |
| 10.2.1 Current status and analysis | | | |
| ☑ 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. | In DY3Q1, MLTC received communications from CMS regarding the submitted monitoring reports for DY2Q3. The state resubmitted DY2Q3 Part C and received affirmative confirmation from CMS that these reports fulfilled the budget neutral expectation. | 04/01/2021- 06/30/2021 | |
| 10.2.2 Implementation Update | | | |
| ☐ The state expects to make other program changes that may affect budget neutrality | | | |
| ☐ ☐ The state has no implementation update to report fo | r this reporting topic. | | |

| 11.1 SUD-Related Demonstration Operations and Policy 11.1.1 Considerations States should highlight significant SUD (or if broader demonstration, then SUD-related) demonstration operations or policy considerations that could positively or pegatively affect beneficiary. | Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) |
|--|---|-----------------------|---|----------------------------|
| 11.1.1 Considerations □ States should highlight significant SUD (or if broader demonstration, then SUD-related) demonstration operations or policy considerations | 11.1 SUD-Related Demonstration Operations and P | olicy | | |
| broader demonstration, then SUD-related) demonstration operations or policy considerations | - | • | | |
| 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. | 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 | | | |
| ☑ The state has no related considerations to report for this reporting topic. | ☐ The state has no related considerations to report for | this reporting topic. | | |
| 11.1.2 Implementation Update | 11.1.2 Implementation Update | | | |
| Compared to the demonstration design and operational details, the state expects to make the following changes to: □ i) How the delivery system operates under the demonstration (e.g. through the managed care system or fee for service) □ ii) Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes) □ iii) Partners involved in service delivery □ The state has no implementation update to report for this reporting topic. | operational details, the state expects to make the following changes to: □ i) How the delivery system operates under the demonstration (e.g. through the managed care system or fee for service) □ ii) Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes) □ iii) Partners involved in service delivery | | | |

| Prompt | State response | Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY) | Related metric (if any) | |
|--|---|---|----------------------------|--|
| ☐ 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 | | | | |
| ☐ The state has no implementation update to report for | or this reporting topic. | | | |
| ☐ The state is working on other initiatives related to SUD or OUD | | | | |
| ☐ The state has no implementation update to report for | or this reporting topic. | | | |
| ☐ The initiatives described above are related to the SUD or OUD demonstration (States should note similarities and differences from the SUD demonstration) | | | | |
| ☐ ☐ The state has no implementation update to report for | or this reporting topic. | | | |
| 12. SUD Demonstration Evaluation Update | | | | |
| 12.1. Narrative Information | | | | |
| ⊠ 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. | The state awarded the contract with Health Services Advisory Group (HSAG) as the demonstration evaluator on March 17, 2021 and began meeting with the contractor on April 6, 2021. These meetings are ongoing and the state is actively working with the contractor on the key informant interviews and needed data extracts. Additionally, the contract was amended August 3, 2021 to include the Mid-point Assessment. The state is actively working with the contractor to facilitate MPA and Interim Report related interviews and data analysis. | 04/01/20201 — 06/30/2021 | | |
| ☐ 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) |
|--|---|---|----------------------------|
| ⊠ Provide status updates on deliverables related to | The state received approval of its final Evaluation Design on August 28, 2020. The design and the approval have been posted to the MLTC SUD | | |
| the demonstration evaluation and indicate whether the expected timelines are being met and/or if there | Demonstration website: http://dhhs.ne.gov/Pages/Substance-Use-Disorder- | | |
| are any real or anticipated barriers in achieving the | Demonstration.aspx | | |
| goals and timeframes agreed to in the STCs. | | | |
| ☐ The state has no SUD demonstration evaluation update to report for this reporting topic. | | | |
| ☐ List anticipated evaluation-related deliverables related to this demonstration and their due dates. | | | |
| ☑ The state has no SUD demonstration evaluation upon | late to report for this reporting topic. | | |
| 13.1 Other Demonstration Reporting | | | |
| 13.1.1 General Reporting Requirements | | | |
| \Box The state reports changes in its implementation of | | | |
| the demonstration that might necessitate a change to | | | |
| approved STCs, implementation plan, or monitoring | | | |
| protocol | | | |
| ☐ The state has no updates on general requirements to report for this reporting topic. | | | |
| ☐ The state anticipates the need to make future | | | |
| changes to the STCs, implementation plan, or | | | |
| monitoring protocol, based on expected or upcoming implementation changes | | | |
| ☐ 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: □ i) The schedule for completing and submitting monitoring reports □ ii) The content or completeness of submitted reports and/or future reports | In DY3Q1, MLTC received communications from CMS regarding the submitted monitoring reports for DY2Q3. The state resubmitted DY2Q3 Part C and received affirmative confirmation from CMS that these reports fulfilled the budget neutral expectation. | | | |
| ☐ The state has no updates on general requirements to | ☐ The state has no updates on general requirements to report for this reporting topic. | | | |
| ☐ The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation | | | | |
| ☐ The state has no updates on general requirements to | report for this reporting topic. | | | |
| 13.1.2 Post-Award Public Forum | | | | |
| ☐ 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. | | | | |
| ⊠ No post-award public forum was held during this re | porting period and this is not an annual report, so the state has no post-award publi | ic forum update to repo | ort for this topic. | |

| 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 | | | |
| ☐ 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. | | | |
| ☑ 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.

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