

July 5th, 2018

**Note: This template is being finalized for review and approval by OMB. It is structured for easy and consistent use by states and will facilitate cross-state assessment and the identification of trends, challenges and best practices to support learning collaboration and policy / operations enhancements as may be needed. Until such time, its use is optional, although it conveys the nature and extent of monitoring information that CMS is seeking on SUD demonstrations, and the state's comments on its structure and ease of use are helpful in finalizing it. The SUD STCs require the state's compliance with Federal Systems Updates. As federal systems continue to evolve and incorporate additional 1115 waiver reporting and analytics functions, the state is required to work with CMS to:*

- a. Revise the reporting templates and submission processes to accommodate timely compliance with the requirements of the new systems;*
- b. Ensure all 1115, T-MSIS, and other data elements that have been agreed to for reporting and analytics are provided by the state; and*
- c. Submit deliverables to the appropriate system as directed by CMS.*

When this template is OMB approved, then the state will be required to use it.

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

The state should complete this Transmittal Title Page as part of its SUD Monitoring Protocol. This form should be submitted as the title page of all Monitoring Reports. The content of this transmittal table should stay consistent over time.

State	West Virginia
Demonstration Name	West Virginia Continuum of Care for Medicaid Enrollees with Substance Use Disorders (Project Number: 11 – W – 00307/3) <input type="checkbox"/>
Approval Date	October 6, 2017
Approval Period	January 1, 2018 through December 31, 2022
SUD (or if broader demonstration, then SUD Related) Demonstration Goals and Objectives	<p>Under this demonstration, the State expects to achieve the following to promote the objectives of Title XIX:</p> <ul style="list-style-type: none"> • Improve quality of care and population health outcomes for Medicaid enrollees with SUD • Increase enrollee access to and utilization of appropriate SUD treatment services based on the American Society of Addiction Medicine (ASAM®) Criteria • Decrease medically inappropriate and avoidable utilization of high-cost emergency department (ED) and hospital services by enrollees with SUD • Improve care coordination and care transitions for Medicaid enrollees with SUD.

2. Proposed Modifications to SUD Narrative Information on Implementation, by Reporting Topic

Summary of proposed modification	Related metric (if any)	Justification for modification
1. Assessment of Need and Qualification for SUD Services		
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
2. Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)		
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
3. Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)		
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
4. Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)		
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
5. Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)		
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		

<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).
6. Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).
7. Improved Care Coordination and Transitions between Levels of Care (Milestone 6)
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).
8. SUD Health Information Technology (Health IT)
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).
9. Other SUD-Related Metrics
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).
10. Budget Neutrality
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).

11. SUD-Related Demonstration Operations and Policy
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).
12. SUD Demonstration Evaluation Update
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).
13. Other Demonstration Reporting
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).
14. Notable State Achievements and/or Innovations
<input type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.
<input checked="" type="checkbox"/> The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).

3. Acknowledgement of Budget Neutrality Reporting-

The state has reviewed the Budget Neutrality workbook provided by the project officer and understands the expectations for quarterly and annual monitoring reports. The state will provide the requested budget neutrality information (no modifications).

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4. SUD Demonstration Monitoring Reporting Schedule

Report name:	DY1 Q1 report	DY1 Q2 report	DY1 Q3 report	DY1 Q4 (annual) report	DY2 Q1 report
Report due date:	Due 60 days after quarter ends	Due 60 days after quarter ends	Due 60 days after quarter ends	Due 90 days after quarter ends	Due 60 days after quarter ends
Measurement Periods, by type of metric/information					
Narrative information	DY1 Q1	DY1 Q2	DY1 Q3	DY1 Q4	DY2 Q1
Grievances and appeals metrics	DY1 Q1	DY1 Q2	DY1 Q3	DY1 Q4	DY2 Q1
Claims-based or state-identified monthly and quarterly metrics	NA	DY1 Q1	DY1 Q2	DY1 Q3	DY1 Q4
Annual CMS-constructed or state-identified metrics (calculated for demonstration year)	NA	NA	NA	NA	DY1
Annual metrics that are established quality measures (calculated for calendar year)	NA	NA	NA	DY1 (Q1-Q4): if state's DY ends 1/30 – 12/30	DY1 (Q1-Q4): if state's DY ends 12/31 – 1/29

Medicaid Section 1115 SUD Demonstration Monitoring Protocol

State: West Virginia
 Demonstration Name: West Virginia Creating a Continuum of Care for Medicaid Enrollees with Substance Use Disorders
 Submitted on: 5/30/2019 Revised

State will report (Y/N)	Reporting priority	#	CMS Metric name	CMS Metric description	Data source	Measurement period	Reporting frequency	Baseline Reporting Period (MM/DD/YYYY--MM/DD/YYYY)	Annual goal	Overall demonstration target	Attest that planned reporting matches the CMS-provided specification (Y/N)	Explanation of any deviations from CMS specifications	Demonstration Year and Quarter in which reporting will begin (DY1Q3)	Explanation of any plans to phase in reporting over time
Assessment of need and qualification for SUD treatment services														
Y	Recommended	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	Medical record review or claims	Month	Quarterly	1/1/2018 - 12/31/2018	20%	Increase	N	The Criminal Justice subpopulation cannot be identified at this time.	DY3Q1	N/A
Y	Recommended	2	Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis	Number of beneficiaries with a SUD diagnosis and a SUD-related service during the measurement period but not in the three months before the measurement period	Claims	Month	Quarterly	1/1/2018 - 12/31/2018	5%	Increase	N	The Criminal Justice subpopulation cannot be identified at this time.	DY3Q1	N/A
Y	Required	3	Medicaid Beneficiaries with SUD Diagnosis (monthly)	Number of beneficiaries with a SUD diagnosis and a SUD-related service during the measurement period and/or in the 11 months before the measurement period	Claims	Month	Quarterly	1/1/2018 - 12/31/2018	1%	Decrease	N	The Criminal Justice subpopulation cannot be identified at this time.	DY3Q1	N/A
Y	Required	4	Medicaid Beneficiaries with SUD Diagnosis (annually)	Number of beneficiaries with a SUD diagnosis and a SUD-related service during the measurement period and/or in the 12 months before the measurement period	Claims	Year	Annually	1/1/2018 - 12/31/2018	1%	Decrease	Y	The cause of delay for this metric is that this is an annual metric, and the December data will not be loaded into the system until February of the following year. The State will have some of the data available, but not all data will be loaded in the system. This will delay all fourth quarter reports.	DY3Q1	There will be a delay of Q4, which will be reported in Q2 of the following demonstration year
Y	Required	5	Medicaid Beneficiaries Treated in an IMD for SUD	Number of beneficiaries with a claim for residential treatment for SUD in an IMD during the reporting year	Claims	Year	Annually	1/1/2018 - 12/31/2018	5%	Increase	Y	The cause of delay for this metric is that this is an annual metric, and the December data will not be loaded into the system until February of the following year. The State will have some of the data available, but not all data will be loaded in the system. This will delay all fourth quarter reports.	DY3Q1	There will be a delay of Q4, which will be reported in Q2 of the following demonstration year
Milestone 1: Access to critical levels of care for OUD and other SUDs														
Y	Required	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	Claims	Month	Quarterly	1/1/2018 - 12/31/2018	5%	Increase	N	The Criminal Justice subpopulation cannot be identified at this time.	DY3Q1	N/A
Y	Required	7	Early Intervention	Number of beneficiaries who used early intervention services (such as procedure codes associated with SBIRT) during the measurement period	Claims	Month	Quarterly	1/1/2018 - 12/31/2018	5%	Increase	N	The Criminal Justice subpopulation cannot be identified at this time. WV utilizes the follow codes for SBIRT services: H0031, 90791, 90792 Services billed with these state-specific codes include a screening for SUD. SBIRT is part of the documentation requirement for the noted codes, and is performed once yearly for ages 10 and up.	DY3Q1	N/A
Y	Required	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	Claims	Month	Quarterly	1/1/2018 - 12/31/2018	5%	Increase	N	The Criminal Justice subpopulation cannot be identified at this time.	DY3Q1	N/A
Y	Required	9	Intensive Outpatient and Partial Hospitalization Services	Number of unique 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	Claims	Month	Quarterly	1/1/2018 - 12/31/2018 (Previously July 1 - June 30)	7%	Increase	N	The State is unable to currently run intensive outpatient claims in system. The State cannot identify intensive outpatient services in the system, and at this time there is no plan to change the system because it would require opening up the State Plan. The Criminal Justice subpopulation cannot be identified at this time.	DY3Q1	N/A
Y	Required	10	Residential and Inpatient Services	Number of beneficiaries who use residential and/or inpatient services for SUD during the measurement period	Claims	Month	Quarterly	1/1/2018 - 12/31/2018 (Previously July 1 - June 30)	10%	Increase	N	The Criminal Justice subpopulation cannot be identified at this time.	DY3Q1	N/A

State will report (Y/N)	Reporting priority	#	CMS Metric name	CMS Metric description	Data source	Measurement period	Reporting frequency	Baseline Reporting Period (MM/DD/YYYY--MM/DD/YYYY)	Annual goal	Overall demonstration target	Attest that planned reporting matches the CMS-provided specification (Y/N)	Explanation of any deviations from CMS specifications	Demonstration Year and Quarter in which reporting will begin (DY1Q3)	Explanation of any plans to phase in reporting over time
Y	Required	11	Withdrawal Management	Number of beneficiaries who use withdrawal management services (such as outpatient, inpatient, or residential) during the measurement period	Claims	Month	Quarterly	1/1/2018 - 12/31/2018	2% - 5%	Increase	N	The Criminal Justice subpopulation cannot be identified at this time.	DY3Q1	Will report in DY3
Y	Required	12	Medication Assisted Treatment	Number of beneficiaries who have a claim for MAT for SUD during the measurement period	Claims	Month	Quarterly	1/1/2018 - 12/31/2018	5%	Increase	N	The Criminal Justice subpopulation cannot be identified at this time.	DY3Q1	N/A
Y	Required	36	Average Length of Stay in IMDs	The average length of stay for beneficiaries discharged from IMD residential treatment for SUD	Claims; State-specific IMD database	Year	Annually	1/1/2018 - 12/31/2018	2%	Decrease	N	Data source will only be claims for West Virginia The State only pays for in-state IMD stays. The cause of delay for this metric is that this is an annual metric, and the December data will not be loaded into the system until February of the following year. The State will have some of the data available, but not all data will be loaded in the system. This will delay all fourth quarter reports.	DY3Q1	There will be a delay of Q4, which will be reported in Q2 of the following demonstration year
Milestone 2: Use of evidence-based, SUD-specific patient placement criteria														
Y	State Identified	S.1	State-Defined: The State will follow nationally-recognized evidence based guidelines for use of evidence-based, SUD-specific patient placement criteria	The State will follow The American Society of Addiction Medicine (ASAM) Criteria for SUD-specific patient placement criteria for Levels of Care 2.1 and higher.	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A
Milestone 3: Use of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities														
Y	State Identified	S.2	State-Defined: The State will follow nationally-recognized evidence based practice guidelines for the use of recognized SUD-specific program standards to set provider qualifications for residential treatment facilities	The State will follow The American Society of Addiction Medicine (ASAM) Criteria for SUD-specific patient placement criteria for Levels of Care 2.1 and higher.	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A
Milestone 4: Sufficient provider capacity at critical levels of care including for medication assisted treatment for OUD														
Y	Required	13	SUD Provider Availability	The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period	Provider enrollment database; Claims	Year	Annually	1/1/2018 - 12/31/2018	Increase	1%	Y	The State can conduct a count of all physicians, PAs, APRNs, psychologists, LICSWs, PLCs, day report centers, CACs, and LBHCs	DY3Q1	N/A
Y	Required	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	Provider enrollment database; Claims; SAMHSA datasets	Year	Annually	1/1/2018 - 12/31/2018	Increase	8%	Y	The State will provide a list of the SAMHSA approved MAT providers West Virginia State Code has established a moratorium on enrolling both in-state and out-of-state OTPs. Therefore, the number of OTPs is unlikely to change. The State will report all OTPs and enrolled buprenorphine providers but does not track individual physicians within the OTPs.	DY3Q1	N/A
Milestone 5: Implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUD														

State will report (Y/N)	Reporting priority	#	CMS Metric name	CMS Metric description	Data source	Measurement period	Reporting frequency	Baseline Reporting Period (MM/DD/YYYY--MM/DD/YYYY)	Annual goal	Overall demonstration target	Attest that planned reporting matches the CMS-provided specification (Y/N)	Explanation of any deviations from CMS specifications	Demonstration Year and Quarter in which reporting will begin (DY1Q3)	Explanation of any plans to phase in reporting over time
Y	Required	17	Follow-up after Discharge from the Emergency Department for Mental Health or Alcohol or Other Drug Dependence§ [NCQA; NQF #2605; Medicaid Adult Core Set]	Percentage of ED visits for beneficiaries who have a principal diagnosis of mental illness or AOD abuse or dependence and who had a follow-up visit for mental illness or AOD. Four rates are reported: Percentage 1. Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit (8 total days). Percentage 2. Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit (31 total days) Percentage 3. Percentage of ED visits for which the beneficiary received a follow-up visit for mental illness or AOD within 30 days of the ED visit (31 total days) Percentage 4. Percentage of ED visits for which the beneficiary received a follow-up visit for mental illness or AOD within 7 days of the ED visit (8 total days)	Claims	Year	Annually	1/1/2018 - 12/31/2018	5%	Increase	Y	Age restriction of 21-64 Upon further review, the age restriction is 18 -64 years of age	N/A	TBD
SUD health information technology (SUD health IT) (Insert at least one selected metric per key health IT question 1-3. See instructions document for further guidance.)														
Y	Required	S.3	Total number of PDMP users, number of checks	How information technology being used to slow down the rate of growth of individuals identified with SUD via PDMP checking by provider types (prescribers, dispensers)	PDMP	Year	Annually	1/1/2018 - 12/31/2018	2%	Increase	N/A	N/A	DY3Q1	TBD
Y	Required	S.4	Total number of telehealth/telemedicine visits with an SUD diagnosis	How information technology being used to treat effectively individuals identified with SUD via telehealth	Claims	Year	Annually	1/1/2018 - 12/31/2018	5%	Increase	N/A	N/A	DY3Q1	TBD
Y	Required	S.5	Total number of patients per 1,000 beneficiaries receiving concurrent MAT and therapy services	How information technology being used to effectively monitor "recovery" supports and services for individuals identified with SUD via tracking Medication-assisted treatment (MAT) (use of medications with counseling and behavioral therapies to treat substance use disorders and prevent opioid overdose	Claims	Year	Annually	1/1/2018 - 12/31/2018	5%	Increase	N/A	N/A	DY3Q1	TBD
Other SUD-related metrics														
Y	Required	23	Emergency Department Utilization for SUD per 1,000 Medicaid Beneficiaries	Total number of ED visits for SUD per 1,000 beneficiaries in the measurement period	Claims	Month	Quarterly	1/1/2018 - 12/31/2018	5%	Decrease	Y	N/A	DY3Q1	TBD
Y	Required	24	Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries	Total number of inpatient stays per 1,000 beneficiaries in the measurement period	Claims	Month	Quarterly	1/1/2018 - 12/31/2018	10%	Decrease	Y	N/A	DY3Q1	TBD
Y	Required	25	Readmissions Among Beneficiaries with SUD	The number of acute inpatient stays among beneficiaries with SUD during the measurement period followed by an acute readmission within 30 days.	Claims	Year	Annually	1/1/2018 - 12/31/2018	5%	Decrease	N	1. The criteria specify that the enrollee should be age 18 years and older as of the date of discharge. We cannot determine age based on the discharge date, so we include enrollees age 18 years and older anytime during the reporting period. 2. The exclusion criteria have been simplified. We did not implement exclusion criteria for admissions in which there was a planned readmission within 30 days for kidney transplants or other organ transplants for the autologous pancreatic cells or for a potentially planned procedure without a principal acute diagnosis. We did include exclusion criteria for admissions in which the admission date was the same as the discharge date, for admissions for pregnancy or perinatal conditions, for stays in which the enrollee died, and for admissions in	DY3Q1	TBD
Y	Required	26	Overdose Deaths (count)	Number of overdose deaths during the measurement period among Medicaid beneficiaries living in a geographic area covered by the demonstration. States are encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid).	State data on cause of death	Year	Annually	1/1/2018 - 12/31/2018	1%	Decrease	Y	N/A	DY3Q1	TBD
Y	Required	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. States are encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid).	State data on cause of death	Year	Annually	1/1/2018 - 12/31/2018	1%	Decrease	Y	N/A	DY3Q1	TBD
Y	Recommended	28	SUD Spending	Total Medicaid SUD spending during the measurement period.	Claims	Year	Annually	1/1/2018 - 12/31/2018	5%	Increase	Y	N/A	DY3Q1	TBD
Y	Recommended	29	SUD Spending Within IMDs	Total Medicaid SUD spending on residential treatment within IMDs during the measurement period	Claims	Year	Annually	1/1/2018 - 12/31/2018	5%	Decrease	Y	N/A	DY3Q1	TBD

