

Monitoring Metrics for Section 1115 Demonstrations with SUD Policies

This document provides an overview of monitoring metrics for states with section 1115 demonstrations that focus on substance use disorder (SUD). A technical specifications manual for the monitoring metrics was made available to states in late 2018. States can contact the CMS 1115 monitoring and evaluation email (1115MonitoringAndEvaluation@cms.hhs.gov) if assistance is needed to receive the technical specifications manual.

An important goal of monitoring SUD demonstrations is to identify trends that suggest the need for adjustments to improve demonstration performance and protect beneficiaries. These metrics are designed to monitor demonstration performance while minimizing state reporting burden. This set focuses on metrics that can be calculated from Medicaid administrative data. Monitoring metrics may be useful to include in formal evaluations along with more complex outcome measures and those that draw on non-administrative data sources, including medical records.

CMS selected SUD demonstration monitoring metrics with input from subject matter experts and members of the state technical advisory group for Medicaid monitoring and evaluation. These metrics consist of (1) established quality measures endorsed by NQF or included in other Medicaid Quality Measures measure sets and (2) CMS-constructed implementation performance metrics to track the goals and milestones presented in the State Medicaid Directors Letter dated November 1, 2017 (SMDL #17-003). The implementation performance metrics often refer to definitions included in established quality measures, but they did not go through the measure endorsement process and are intended only for monitoring progress of SUD demonstrations.

The metrics are organized into six sections: (1) assessment of need and qualification for SUD treatment services, (2) access to critical levels of care for opioid use disorders (OUD) and other SUDs, (3) sufficient provider capacity at critical levels of care including medication assisted treatment (MAT) for OUD, (4) implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUD, (5) improved care coordination and transitions between levels of care, and (6) other SUD-related metrics. Table 1 presents the metrics included within each section, as well as the associated milestone (if applicable) as described in the State Medicaid Directors Letter dated November 1, 2017 (SMDL #17-003). The table also includes the following information for each metric:

- **Required or Recommended.** Metrics are either required or recommended
 - *Required metrics* provide information that is critical for monitoring the success of SUD demonstrations and could be constructed with data that are readily available to states.
 - *Recommended metrics* might be more difficult to obtain than required metrics, but still provide important information on the operation of a demonstration.
- **Subpopulations.** Some subpopulations have unique treatment needs with respect to SUD. When instructed by metric specifications, states should calculate and report metrics for each stratification within subgroups. These subgroups are as follows:

- *Age groups (children <18, adults 18–64, and older adults 65+)*. Determine beneficiary age status as of the first day of the measurement period.
- *Dual–eligible status (Medicaid only or Medicare-Medicaid eligible)*. Determine dual eligible status as of the first day of the measurement period. For reference, in T-MSIS, dual eligible status is determined by the eligibility file data element, DUAL-ELIGIBLE-CODE.¹
- *Pregnancy status (yes, no)*. Determine pregnancy status based on ever qualifying for this subpopulation during the measurement period. For reference, in T-MSIS, pregnancy status is determined by the eligibility file data element, PREGNANCY-IND.
- *Criminal justice status (criminally involved, not criminally involved)*. Determine criminal justice status based on ever qualifying for this subpopulation during the measurement period. There is no standard methodology across states for identifying criminal justice status; states will need to identify a method for flagging criminal involvement (such as by matching Medicaid beneficiaries to data from state law enforcement agencies).
- *OUD diagnosis*. States can monitor some metrics for SUD diagnosis overall as well as for OUD diagnosis specifically. Separate reporting for OUD diagnosis is optional. To identify the OUD population, identify beneficiaries who have at least one claim with a diagnosis code listed under the HEDIS 2018 Opioid Abuse and Dependence Value Set.
- **Measurement period.** This parameter identifies the data collection time frame for each metric. Measurement periods may be monthly, quarterly, or annual. Annual metrics, such as Medicaid Beneficiaries with SUD Diagnosis (annually), may have additional requirements, such as a continuous eligibility period that begins in the prior year. Monthly metrics are reported to CMS in quarterly and annual reports, according to specifications.

¹ The T-MSIS data dictionary can be accessed at <https://www.medicaid.gov/medicaid/data-and-systems/macbis/tmsis/index.html>.

Table 1: 1115 SUD Demonstration Monitoring Metrics

Metric	Metric name and description	Required or recommended	Subpopulations					Measurement period
			OUD	Age	Dual	Pregnant	Criminal justice	
Assessment of need and qualification for SUD treatment services								
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	Recommended		X	X	X	X	Quarterly
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	Recommended	X	X	X	X	X	Quarterly
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	Required	X	X	X	X	X	Quarterly
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	Required	X					Annually
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.	Required	X					Annually
Access to critical levels of care for OUD and other SUDs (Milestone 1)								
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	Required	X	X	X	X	X	Quarterly
7	Early Intervention Number of beneficiaries who used early intervention services (such as procedure codes associated with SBIRT) during the measurement period	Required	X	X	X	X	X	Quarterly
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	Required	X	X	X	X	X	Quarterly

Metric	Metric name and description	Required or recommended	Subpopulations					Measurement period
			OUD	Age	Dual	Pregnant	Criminal justice	
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	Required	X	X	X	X	X	Quarterly
10	Residential and Inpatient Services Number of beneficiaries who use residential and/or inpatient services for SUD during the measurement period	Required	X	X	X	X	X	Quarterly
11	Withdrawal Management Number of beneficiaries who use withdrawal management services (such as outpatient, inpatient, or residential) during the measurement period	Required	X	X	X	X	X	Quarterly
12	Medication Assisted Treatment Number of beneficiaries who have a claim for MAT for SUD during the measurement period	Required	X	X	X	X	X	Quarterly
36	Average Length of Stay in IMDs The average length of stay for beneficiaries discharged from IMD residential treatment for SUD.	Required	X					Annually
Sufficient provider capacity at critical levels of care including Medication Assisted Treatment for OUD (Milestone 4)								
13	SUD Provider Availability The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period	Required						Annually
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	Required						Annually

Metric	Metric name and description	Required or recommended	Subpopulations					Measurement period
			OUD	Age	Dual	Pregnant	Criminal justice	
Implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUD (Milestone 5)								
15	<p>Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment Percentage of beneficiaries with a new episode of AOD abuse or dependence who received the following:</p> <ul style="list-style-type: none"> • Initiation of AOD Treatment—percentage of beneficiaries who initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or MAT within 14 days of the diagnosis • Engagement of AOD Treatment—percentage of beneficiaries who initiated treatment and who had two or more additional AOD services or MAT within 34 days of the initiation visit <p>Each rate includes the following diagnosis cohorts: (1) Alcohol abuse or dependence, (2) Opioid abuse or dependence, (3) Other drug abuse or dependence, and (4) Total AOD abuse or dependence.</p>	Required	X					Annually
18	<p>Use of Opioids at High Dosage in Persons Without Cancer Rate per 1,000 beneficiaries age 18 and older included in the denominator without cancer who received prescriptions for opioids with a daily dosage greater than 120 morphine milligram equivalents for 90 consecutive days or longer. Patients in hospice are also excluded.</p>	Required						Annually
19	<p>Use of Opioids from Multiple Providers in Persons Without Cancer Rate per 1,000 beneficiaries included in the denominator without cancer who received prescriptions for opioids from four or more prescribers and four or more pharmacies</p>	Recommended						Annually
20	<p>Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer Rate per 1,000 beneficiaries included in the denominator without cancer who received prescriptions for opioids greater than 120mg morphine equivalent dose (MED) for 90 consecutive days or longer, and from four or more prescribers and four or more pharmacies.</p>	Recommended						Annually

Metric	Metric name and description	Required or recommended	Subpopulations					Measurement period
			OUD	Age	Dual	Pregnant	Criminal justice	
21	Concurrent Use of Opioids and Benzodiazepines Percentage of beneficiaries age 18 and older with concurrent use of prescription opioids and benzodiazepines. Patients with a cancer diagnosis or in hospice are excluded.	Required						Annually
22	Continuity of Pharmacotherapy for Opioid Use Disorder Percentage of adults in the denominator with pharmacotherapy for OUD who have at least 180 days of continuous treatment	Required						Annually
Improved care coordination and transitions between levels of care (Milestone 6)								
16	<p>SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge and SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge SUB-3: Patients who are identified with alcohol or drug use disorder who receive or refuse at discharge a prescription for FDA-approved medications for alcohol or drug use disorder, OR who receive or refuse a referral for addictions treatment.</p> <p>SUB-3a: Patients who are identified with alcohol or drug disorder who receive a prescription for FDA-approved medications for alcohol or drug use disorder OR a referral for addictions treatment.</p> <p>The measure is reported as an overall rate which includes all patients to whom alcohol or drug use disorder treatment was provided, or offered and refused, at the time of hospital discharge, and a second rate, a subset of the first, which includes only those patients who received alcohol or drug use disorder treatment at discharge. The Provided or Offered rate (SUB-3) describes patients who are identified with alcohol or drug use disorder who receive or refuse at discharge a prescription for FDA-approved medications for alcohol or drug use disorder, OR who receive or refuse a referral for addictions treatment. The Alcohol and Other Drug Disorder Treatment at Discharge (SUB-3a) rate describes only those who receive a prescription for FDA-approved medications for alcohol or drug use disorder OR a referral for addictions treatment. Those who refused are not included</p>	Recommended						Annually

Metric	Metric name and description	Required or recommended	Subpopulations					Measurement period
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17	<p>Follow-Up After Emergency Department Visit for Mental Illness or Alcohol and Other Drug Abuse or Dependence 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 with a corresponding principal diagnosis for mental illness or AOD. Four rates are reported:</p> <p>Mental Illness 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 of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit (31 total days).</p> <p>Alcohol and Other Drug Abuse or Dependence Percentage of ED visits for AOD abuse or dependence for which the beneficiary received follow-up within 7 days of the ED visit (8 total days). Percentage of ED visits for AOD abuse or dependence for which the beneficiary received follow-up within 30 days of the ED visit (31 total days).</p>	Required						Annually
Other SUD-related metrics								
23	<p>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</p>	Required	X	X				Quarterly
24	<p>Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries Total number of inpatient stays per 1,000 beneficiaries in the measurement period</p>	Required	X	X				Quarterly

Metric	Metric name and description	Required or recommended	Subpopulations					Measurement period
			OUD	Age	Dual	Pregnant	Criminal justice	
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. For this metric, acute inpatient stays and a discharge on or between the first day of the measurement period and 30 days prior to the last day of the measurement period are considered index hospital stays (with the exception of stays that meet exclusion criteria). Acute inpatient stays with an admission date within 30 days of a discharge date associated with an index hospital stay are index readmission stays.	Required						Annually
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).	Required	X	X				Annually
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).	Required	X	X				Annually
28	SUD Spending Total Medicaid SUD spending during the measurement period.	Recommended						Annually
29	SUD Spending Within IMDs Total Medicaid SUD spending on residential treatment within IMDs during the measurement period.	Recommended						Annually
30	Per Capita SUD Spending Per capita SUD spending during the measurement period	Recommended						Annually
31	Per Capita SUD Spending Within IMDs Per capita SUD spending within IMDs during the measurement period	Recommended						Annually
32	Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD The percentage of Medicaid beneficiaries with SUD who had an ambulatory or preventive care visit during the measurement period.	Required						Annually

Metric	Metric name and description	Required or recommended	Subpopulations					Measurement period
			OUD	Age	Dual	Pregnant	Criminal justice	
33	Grievances Related to SUD Treatment Services Number of grievances filed during the measurement period that are related to SUD treatment services	Recommended						Quarterly
34	Appeals Related to SUD Treatment Services Number of appeals filed during the measurement period that are related to SUD treatment services	Recommended						Quarterly
35	Critical Incidents Related to SUD Treatment Services Number of critical incidents filed during the measurement period that are related to SUD treatment services	Recommended						Quarterly

Note: Milestones included in this table are from the State Medicaid Director Letter #17-003. There are no CMS-provided metrics related to Milestones 2 or 3.