

1. Title page for the state’s substance use disorder (SUD) demonstration or the SUD component of the broader demonstration

The state should complete this title page at the beginning of a demonstration and submit as the title page for all monitoring reports. The content of this table should stay consistent over time. Definitions for certain rows are below the table.

State	Maine	Maine
Demonstration name		Maine’s Substance Use Disorder Care Initiative
Approval period for section 1115 demonstration		January 1, 2021 through December 31, 2025
SUD demonstration start date^a		January 1, 2021
Implementation date of SUD demonstration, if different from SUD demonstration start date^b		July 26, 2021
SUD (or if broader demonstration, then SUD-related) demonstration goals and objectives		<p>SUD Demonstration Goals:</p> <ol style="list-style-type: none"> 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. <p>Enter summary of the SUD (or if broader demonstration, then SUD related) demonstration goals and objectives as summarized in the STCs and/or demonstration fact sheet.</p>

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

extension request on 12/15/2020, with an effective date of 1/1/2021 for the new demonstration period. In many cases, the effective date also differs from the date a state begins implementing its demonstration.

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

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 words or less.

The State of Maine continues to see growing concerns with drug use and deaths related to drug use. Overdose deaths have continued to climb, with a 109% increase since 2019¹. These overdose deaths are occurring despite implementing preventative measures including increasing distribution of naloxone 622% and implementing overdose prevention programs like OPTIONS², a coordinated effort by state agencies to improve the health of Mainers using substances through harm reduction strategies. While it is clear the state has more to do, we remain hopeful that through a greater focus on harm reduction, increasing access to naloxone, and through systemic improvements to our service delivery system, we can continue to increase access to SUD treatment and prevent overdoses and deaths.

The Office of MaineCare Services (OMS) within the Maine Department of Health and Human Services (DHHS) is the single state agency that administers Maine’s Medicaid program, known as MaineCare. This quarter, CMS approved OMS’s implementation plan, which is a major milestone toward operationalizing the waiver. Since approval, OMS has continued to work internally and with its partner Gainwell to lay out the policies, procedures and system capabilities for enrolling providers as IMDs so they may begin expanding capacity and access to SUD treatment services. System capabilities will take time to develop, so OMS is working out procedures to implement more rapidly.

This quarter, OMS has continued to move forward state policy amendments aimed at increasing access to SUD treatment services by removing potentially stigmatizing language, eliminating arbitrary policy limits, and supporting collaboration with MAT. Additionally, OMS completed two rate studies targeting SUD services (IOP and SUD residential treatment) that resulted in recommended increases to reimbursement rates that we fell will positively impact providers and support increased access to services. Additionally, OMS has

¹ <https://mainedrugdata.org/>

² <https://knowyouroptions.me/>

continued working on the recently approved implementation plan and are beginning conversations with its ASO for supporting post utilization placement reviews using ASAM assessments to determine appropriate level of care placement and timely access to care.

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

Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
1. Assessment of need and qualification for SUD services			
1.1 Metric trends			
1.1.1. 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	X	<i>*EXAMPLE: #5: Medicaid Beneficiaries Treated in an IMD for SUD</i>	The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.
1.2 Implementation update			
1.2.1. Compared to the demonstration design and operational details, the state expects to make the following changes to: 1.2.1.i. The target population(s) of the demonstration	X		<i>*EXAMPLE: The state is expanding the clinical criteria to include X diagnoses</i>
1.2.1.ii. The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration	X		<i>*EXAMPLE: The state projects an x% increase in beneficiaries with a SUD diagnosis due to an increase in the FPL limits which will be effective on X date.</i>
1.2.2 The state expects to make other program changes that may affect metrics related to assessment of need and qualification for SUD services	X		

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
2. Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)			
2.1 Metric trends			
2.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1	X		The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.
2.2 Implementation update			
2.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 2.2.1.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)			No updates at this time.
2.2.1.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 individual IMDs			No updates at this time.
2.2.2 The state expects to make other program changes that may affect metrics related to Milestone 1	X		

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
3. Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)			
3.1 Metric trends			
3.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2	X		The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.
3.2. Implementation update			
3.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 3.2.1.i. Planned activities to improve providers’ use of evidence-based, SUD-specific placement criteria	X		The state is evaluating its Medicaid benefits provider manual and licensing rules to determine where updates can be made to better support ASAM placement criteria. Update planned to be effective October, 2021 to support the most current version of ASAM placement criteria.
3.2.1.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	X		The State has identified utilization management limits for residential care that will be removed to ensure that there is no administrative barrier to clinically appropriate admissions for this level of care. Further, we are engaging our ASO to discuss a process for post utilization review for appropriate level of care using ASAM assessments.
3.2.2 The state expects to make other program changes that may affect metrics related to Milestone 2	X		

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
4. Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)			
4.1 Metric trends			
4.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3 <i>Note: There are no CMS-provided metrics related to Milestone 3. If the state did not identify any metrics for reporting this milestone, the state should indicate it has no update to report.</i>	X		The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.
4.2 Implementation update			
4.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 4.2.1.i. Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards	X		The state is planning a comprehensive review of its MaineCare Benefits provider manual and applicable licensing standards to evaluate the structure of policy to identify and recommend future changes to clearly outline program descriptions, including provider requirements following ASAM criteria. Work to commence Fall 2021. No further update for this report.
4.2.1.ii. Review process for residential treatment providers’ compliance with qualifications.	X		Maine’s Office of Behavioral Health and Office of Child and Family Services will commence oversight of adult and youth SUD residential treatment programs in July 2021 and November 2021, respectively. Implementation has been pushed back a month to accommodate the state rulemaking process.

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
4.2.1.iii. Availability of medication-assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site	X		MaineCare Benefits provider manual will be updated effective November 2021 to replace general language that is misaligned with ASAM regarding the use of MAT and include language to specifically require the facilitation of MAT off-site if that is not a service offered within the facility. Implementation has been pushed back a month to accommodate the state rulemaking process.
4.2.2 The state expects to make other program changes that may affect metrics related to Milestone 3	X		

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
5. Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)			
5.1 Metric trends			
5.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4	X		The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.
5.2 Implementation update			
5.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: Planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients in across the continuum of SUD care	X		The State is continuing work developing a service locator tool which will assist the public, including health care providers and consumers, to search for local behavioral health providers with capacity to provide SUD/ODU care.
5.2.2 The state expects to make other program changes that may affect metrics related to Milestone 4	X		
6. Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)			
6.1 Metric trends			
6.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5	X		The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.
6.2 Implementation update			
6.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 6.2.1.i. Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD	X		No further update at this time.

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
6.2.1.ii. Expansion of coverage for and access to naloxone	X		The State provides Medicaid coverage for with low-barrier access and additional efforts are underway to incentivize and/or require co-prescribing of naloxone with MAT. The State is considering implementing a standing order for naloxone. No further update at this time.
6.2.2 The state expects to make other program changes that may affect metrics related to Milestone 5	X		
7. Improved Care Coordination and Transitions between Levels of Care (Milestone 6)			
7.1 Metric trends			
7.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6	X		The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.
7.2 Implementation update			
7.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: Implementation of policies supporting beneficiaries’ transition from residential and inpatient facilities to community-based services and supports	X		The State is updating its MaineCare benefits provider manual to reinforce that providers must coordinate with the member's treatment team, including but not limited to the member's case management, behavioral health home, or opioid health home providers to coordinate care and facilitate access to any identified services and supports, considering their physical and mental health needs. Implementation has been pushed back to November to accommodate the state rulemaking process.
7.2.2 The state expects to make other program changes that may affect metrics related to Milestone 6	X		
8. SUD health information technology (health IT)			
8.1 Metric trends			

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
8.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its health IT metrics	X		The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.
8.2 Implementation update			
8.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 8.2.1.i. How health IT is being used to slow down the rate of growth of individuals identified with SUD			No updates at this time.
How health IT is being used to treat effectively individuals identified with SUD	X		No updates at this time.
8.2.1.ii. How health IT is being used to effectively monitor “recovery” supports and services for individuals identified with SUD	X		No updates at this time.
8.2.1.iii. 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	X		No updates at this time.
8.2.1.iv. Other aspects of the state’s health IT implementation milestones	X		No updates at this time.
8.2.1.v. The timeline for achieving health IT implementation milestones	X		No updates at this time.
8.2.1.vi. Planned activities to increase use and functionality of the state’s prescription drug monitoring program	X		No updates at this time.
8.2.2 The state expects to make other program changes that may affect metrics related to health IT	X		
9. Other SUD-related metrics			

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Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
9.1 Metric trends			
9.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics	X		The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.
9.2 Implementation update			
9.2.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics	X		The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming when the state begins reporting metrics.

4. Narrative information on other reporting topics

Prompts	State has no update to report (Place an X)	State response
10. Budget neutrality		
10.1 Current status and analysis		
10.1.1 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.	X	The State has recently received approval of its implementation plan but has yet to expend funds under the waiver. Updates will be forthcoming as the state begins operationalizing the waiver.
10.2 Implementation update		
10.2.1 The state expects to make other program changes that may affect budget neutrality	X	No updates at this time.

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Prompts	State has no update to report (Place an X)	State response
11. SUD-related demonstration operations and policy		
11.1 Considerations		
11.1.1 The state 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.	X	The State has finalized and independent rate study for its SUD residential treatment services and SUD Intensive Outpatient Program. The SUD residential rates are planned to be effective November 2021, and the SUD IOP rates effective January 2022. The state anticipates that these new rates will lead increased provider participation, opening member access to services. The State’s legislature did not pass LD 415, contemplating amending the MaineCare Benefits manual which will expand the eligibility criteria for SUD targeted case management. The state will continue to consider whether this is a change we are able to make at this time. The State is experiencing workforce shortages following COVID-19 concerns and that state is considering ways to incentivize individuals to join the SUD workforce.
11.2 Implementation update		
11.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 11.2.1.i. How the delivery system operates under the demonstration (e.g. through the managed care system or fee for service)	X	No updates at this time.
11.2.1.ii. Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes)	X	No updates at this time.
11.2.1.iii. Partners involved in service delivery	X	No updates at this time.

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Prompts	State has no update to report (Place an X)	State response
11.2.2 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	X	No challenges to note at this time.
11.2.3 The state is working on other initiatives related to SUD or OUD	X	
11.2.4 The initiatives described above are related to the SUD or OUD demonstration (The state should note similarities and differences from the SUD demonstration)	X	
12. SUD demonstration evaluation update		
12.1 Narrative information		
12.1.1 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. There are specific requirements per Code of Federal Regulations (CFR) for annual reports. See report template instructions for more details.		No further update at this time.
12.1.2 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		No further update at this time.
12.1.3 List anticipated evaluation-related deliverables related to this demonstration and their due dates		The evaluation design continues to be under CMS review since submitting in June. No further deliverable due at this time.
13. Other demonstration reporting		
13.1 General reporting requirements		
13.1.1 The state reports changes in its implementation of the demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol	X	The State is continuing to work with CMS on its monitoring protocol.

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Prompts	State has no update to report (Place an X)	State response
13.1.2 The state anticipates the need to make future changes to the STCs, implementation plan, or monitoring protocol, based on expected or upcoming implementation changes	X	The State is continuing to work with CMS on monitoring protocol.
13.1.3 Compared to the demonstration design and operational details, the state expects to make the following changes to: 13.1.3.i. The schedule for completing and submitting monitoring reports	X	The State is continuing to work with CMS on its monitoring protocol.
13.1.3.ii. The content or completeness of submitted reports and/or future reports	X	The State is continuing to work with CMS on monitoring protocol.
13.1.4 The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation	X	The State is continuing to work with CMS on its monitoring protocol. No issues noted as of this report.
13.2 Post-award public forum		
13.2.2 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.	X	The state is planning to host its post award forum since receiving CMS approval of the implementation plan, though it has not yet been scheduled.

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Prompts	State has no update to report (Place an X)	State response
14. Notable state achievements and/or innovations		
14.1 Narrative information		
14.1.1 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.	X	The State is continuing to work with CMS on its monitoring protocol. Updates will be forthcoming.

*The state should remove all example text from the table prior to submission.

Note: Licensee and states must prominently display the following notice on any display of Measure rates:

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