

Medicaid Section 1115 SMI/SED Demonstrations Monitoring Report (Part A) - Metrics (Version 2.0)

State *Utah*
 Demonstration Name *Medicaid Reform 1115 Demonstration*
 SMI/SED Demonstration Year (DY) (Format: DY1, DY3)
 Calendar Dates for SMI/SED DY (Format: MM/DD *07/01/2022-06/30/2023*)
 SMI/SED Reporting Period (Format: Q1, Q2, Q3, C Q2)
 Calendar Dates for SMI/SED Reporting Period (Fo *07/01/2022-9/30/2022*)

Serious Mental Illness/Serious Emotional Disturbance (SMI/SED) Metrics^a

#	Metric name	Metric description	Milestone or reporting topic
<i>EXAMPLE: 24 (Do not delete or edit this row)</i>	<i>EXAMPLE: Screening for Depression and Follow-Up Plan: Age 18 and Older (CDF-AD)</i>	<i>EXAMPLE: Percentage of beneficiaries age 18 and older screened for depression on the date of the encounter using an age appropriate standardized depression screening tool, AND if positive, a follow-up plan is documented on the date of the positive screen.</i>	<i>EXAMPLE: Milestone 4</i>
1	SUD Screening of Beneficiaries Admitted to Psychiatric Hospitals or Residential Treatment Settings (SUB-2)	SUB-2: Patients who screened positive for unhealthy alcohol use who received or refused a brief intervention during the hospital stay. SUB-2a: Patients who received the brief intervention during the hospital stay.	Milestone 1
2	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH)	Percentage of children and adolescents ages 1 to 17 who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment.	Milestone 1
3	All-Cause Emergency Department Utilization Rate for Medicaid Beneficiaries who may Benefit From Integrated Physical and Behavioral Health Care (PMH-20)	Number of all-cause ED visits per 1,000 beneficiary months among adult Medicaid beneficiaries age 18 and older who meet the eligibility criteria of beneficiaries with SMI.	Milestone 2
4	30-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an Inpatient Psychiatric Facility (IPF)	The rate of unplanned, 30-day, readmission for demonstration beneficiaries with a primary discharge diagnosis of a psychiatric disorder or dementia/Alzheimer’s disease. The measurement period used to identify cases in the measure population is 12 months from January 1 through December 31.	Milestone 2

Metric type	Reporting category	Data source	Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b	Deviations from CMS-provided technical specifications manual in approved protocol
<i>EXAMPLE: Established quality measure</i>	<i>EXAMPLE: Annual metrics that are an established quality measure</i>	<i>EXAMPLE: Claims Medical records</i>	<i>EXAMPLE: N</i>	<i>EXAMPLE: The Department will use state-defined procedure codes (<u>list specific codes</u>) to calculate this metric.</i>
Established quality measure	Annual metrics that are an established quality measure	Medical record review or claims		
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	
Established quality measure	Annual metrics that are an established quality measure	Claims		
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	

Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI-SED reporting issues tab)	Measurement period (month, quarter, year ⁶)	Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration Reporting	
				Demonstration Reporting Denominator	Demonstration Reporting Numerator or count
<i>EXAMPLE:</i> Version 2.0	<i>EXAMPLE:</i> Y	<i>EXAMPLE:</i> Year	<i>EXAMPLE:</i> 01/01/2020-12/31/2020	<i>EXAMPLE:</i> 200	<i>EXAMPLE:</i> 100

		Year			
		Year			
Version 2.0	N	Year	1/1/2022-12/31/2022	856	455
		Year			
Version 2.0	N	Year	1/1/2022-12/31/2022	1668	107

Reporting Demonstration Reporting Rate/Percentage ^d	Standardized definition of SMI			State-specific definition of SMI		
	Standardized definition of SMI Denominator	Standardized definition of SMI Numerator or count	Standardized definition of SMI Rate/Percentage ^d	State-specific definition of SMI Denominator	State-specific definition of SMI Numerator or count	State-specific definition of SMI Rate/Percentage ^d
EXAMPLE: 0.5						
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0.531542056						
0.064148681						

Children (Age <16)			Transition-age youth (Age 16-24)			Adults (Age 25-64)	
Children (Age <16) Denominator	Children (Age <16) Numerator or count	Children (Age <16) Rate/Percentage ^d	Transition-age youth (Age 16-24) Denominator	Transition-age youth (Age 16-24) Numerator or count	Transition-age youth (Age 16-24) Rate/Percentage ^d	Adults (Age 25-64) Denominator	Adults (Age 25-64) Numerator or count
[Redacted content]							

64) Adults (Age 25-64) Rate/Percentage ^d	Older adults (Age 65+)			Dual-eligible (Medicare-Medicaid eligible)		
	Older adults (Age 65+) Denominator	Older adults (Age 65+) Numerator or count	Older adults (Age 65+) Rate/Percentage ^d	Dual-eligible (Medicare-Medicaid eligible) Denominator	Dual-eligible (Medicare-Medicaid eligible) Numerator or	Dual-eligible (Medicare-Medicaid eligible) Rate/Percentage ^d

Medicaid only			Eligible for Medicaid on the basis of disability			Not eligible for Medicaid on the basis of disability
Medicaid only Denominator	Medicaid only Numerator or count	Medicaid only Rate/Percentage ^d	Eligible for Medicaid on the basis of disability Denominator	Medicaid on the basis of disability Numerator or count	Eligible for Medicaid on the basis of disability Rate/Percentage ^d	Not eligible for Medicaid on the basis of disability Denominator

Medicaid on the basis of disability		Criminally involved			Not criminally involved	
Not eligible for Medicaid on the basis of disability Numerator or count	Not eligible for Medicaid on the basis of disability Rate/Percentage ^d	Criminally involved Denominator	Criminally involved Numerator or count	Criminally involved Rate/Percentage ^d	Not criminally involved Denominator	Not criminally involved Numerator or count
[Redacted content]						

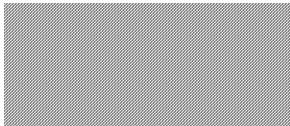
Not criminally involved Rate/Percentage ^d	Co-occurring SUD			Co-occurring physical conditions co-occurring			[S <i>[State-specific subpopulation]</i> Denominator
	Co-occurring SUD Denominator	Co-occurring SUD Numerator or count	Co-occurring SUD Rate/Percentage ^d	Co-occurring physical conditions Denominator	Co-occurring physical conditions Numerator or count	Co-occurring physical conditions Rate/Percentage ^d	<i>EXAMPLE:</i>
[Redacted content]							

<i>[State-specific subpopulation]</i> ^{d,e}	
<i>[State-specific subpopulation]</i> Numerator or count	<i>[State-specific subpopulation]</i> Rate/Percentage ^d
EXAMPLE:	EXAMPLE:

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#	Metric name	Metric description	Milestone or reporting topic
5	Medication Reconciliation Upon Admission	Percentage of patients for whom a designated prior to admission (PTA) medication list was generated by referencing one or more external sources of PTA medications and for which all PTA medications have a documented reconciliation action by the end of Day 2 of the hospitalization.	Milestone 2
6	Medication Continuation Following Inpatient Psychiatric Discharge	This measure assesses whether psychiatric patients admitted to an inpatient psychiatric facility (IPF) for major depressive disorder (MDD), schizophrenia, or bipolar disorder filled a prescription for evidence-based medication within 2 days prior to discharge and 30 days post-discharge.	Milestone 2
7	Follow-up After Hospitalization for Mental Illness: Ages 6-17 (FUH-CH)	Percentage of discharges for children ages 6 to 17 who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health practitioner. Two rates are reported: Percentage of discharges for which the child received follow-up within 30 days after discharge. Percentage of discharges for which the child received follow-up within 7 days after discharge.	Milestone 2
8	Follow-up After Hospitalization for Mental Illness: Age 18 and Older (FUH-AD)	Percentage of discharges for beneficiaries age 18 years and older who were hospitalized for treatment of selected mental illness diagnoses or intentional self-harm and who had a follow-up visit with a mental health practitioner. Two rates are reported: Percentage of discharges for which the beneficiary received follow-up within 30 days after discharge. Percentage of discharges for which the beneficiary received follow-up within 7 days after discharge.	Milestone 2
9	Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse (FUA-AD)	Percentage of emergency department (ED) visits for beneficiaries age 18 and older with a primary diagnosis of alcohol or other drug (AOD) abuse dependence who had a follow-up visit for AOD abuse or dependence. Two rates are reported: Percentage of ED visits for AOD abuse or dependence for which the beneficiary received follow-up within 30 days of the ED visit. Percentage of ED visits for AOD abuse or dependence for which the beneficiary received follow-up within 7 days of the ED visit.	Milestone 2

Metric type	Reporting category	Data source	Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b	Deviations from CMS-provided technical specifications manual in approved protocol
Established quality measure	Annual metrics that are an established quality measure	Electronic/paper medical records		
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	

Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI-SED reporting issues tab)	Measurement period (month, quarter, year ^c)	Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration Reporting	
				Demonstration Reporting Denominator	Demonstration Reporting Numerator or count
		Year			
Version 2.0	N	Year	1/1/2022-12/31/2022	3412	2340
Version 2.0	N				
		Year	1/1/2022-12/31/2022	977	621
		Year	1/1/2022-12/31/2022	977	408
Version 2.0	N				
		Year	1/1/2022-12/31/2022	4268	1976
		Year	1/1/2022-12/31/2022	4268	1147
Version 2.0	N				
		Year	1/1/2022-12/31/2022	4332	1051
		Year	1/1/2022-12/31/2022	4332	626

Reporting Demonstration Reporting Rate/Percentage ^d	Standardized definition of SMI			State-specific definition of SMI		
	Standardized definition of SMI Denominator	Standardized definition of SMI Numerator or count	Standardized definition of SMI Rate/Percentage ^d	State-specific definition of SMI Denominator	State-specific definition of SMI Numerator or count	State-specific definition of SMI Rate/Percentage ^d
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0.417604913						
0.462980319						
0.268744142						
0.242613112						
0.144506002						

Children (Age <16)			Transition-age youth (Age 16-24)			Adults (Age 25-64)	
Children (Age <16) Denominator	Children (Age <16) Numerator or count	Children (Age <16) Rate/Percentage ^d	Transition-age youth (Age 16-24) Denominator	Transition-age youth (Age 16-24) Numerator or count	Transition-age youth (Age 16-24) Rate/Percentage ^d	Adults (Age 25-64) Denominator	Adults (Age 25-64) Numerator or count
[Redacted content]							

64) Adults (Age 25-64) Rate/Percentage ^d	Older adults (Age 65+)			Dual-eligible (Medicare-Medicaid eligible)		
	Older adults (Age 65+) Denominator	Older adults (Age 65+) Numerator or count	Older adults (Age 65+) Rate/Percentage ^d	Dual-eligible (Medicare-Medicaid eligible) Denominator	Dual-eligible (Medicare-Medicaid eligible) Numerator or	Dual-eligible (Medicare-Medicaid eligible) Rate/Percentage ^d

Medicaid only			Eligible for Medicaid on the basis of disability			Not eligible for Medicaid on the basis of disability
Medicaid only Denominator	Medicaid only Numerator or count	Medicaid only Rate/Percentage ^d	Eligible for Medicaid on the basis of disability Denominator	Eligible for Medicaid on the basis of disability Numerator or count	Eligible for Medicaid on the basis of disability Rate/Percentage ^d	Not eligible for Medicaid on the basis of disability Denominator

Medicaid on the basis of disability		Criminally involved			Not criminally involved	
Not eligible for Medicaid on the basis of disability Numerator or count	Not eligible for Medicaid on the basis of disability Rate/Percentage ^d	Criminally involved Denominator	Criminally involved Numerator or count	Criminally involved Rate/Percentage ^d	Not criminally involved Denominator	Not criminally involved Numerator or count
[Redacted content]						

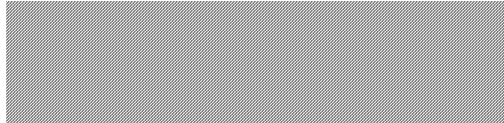
Not criminally involved Rate/Percentage ^d	Co-occurring SUD			Co-occurring physical conditions Co-occurring			[S <i>[State-specific subpopulation]</i> Denominator
	Co-occurring SUD Denominator	Co-occurring SUD Numerator or count	Co-occurring SUD Rate/Percentage ^d	Co-occurring physical conditions Denominator	physical conditions Numerator or count	Co-occurring physical conditions Rate/Percentage ^d	
[Redacted content]							

[State-specific subpopulation]^{d,e}

<i>[State-specific subpopulation]</i> Numerator or count	<i>[State-specific subpopulation]</i> Rate/Percentage ^d
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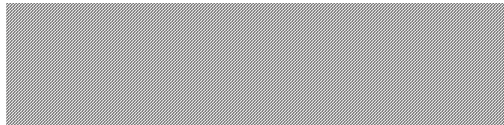
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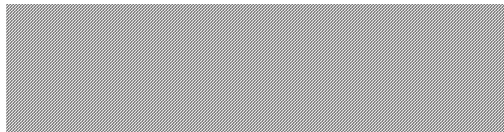
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#	Metric name	Metric description	Milestone or reporting topic
10	Follow-Up After Emergency Department Visit for Mental Illness (FUM-AD)	Percentage of emergency department (ED) visits for beneficiaries age 18 and older with a primary diagnosis of mental illness or intentional self-harm and who had a follow-up visit for mental illness. Two rates are reported: Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit. Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit.	Milestone 2
11	Suicide or Overdose Death Within 7 and 30 Days of Discharge From an Inpatient Facility or Residential Treatment for Mental Health Among Beneficiaries With SMI or SED (count)	Number of suicide or overdose deaths among Medicaid beneficiaries with SMI or SED within 7 and 30 days of discharge from an inpatient facility or residential stay for mental health. 7 days of discharge from an inpatient facility or residential stay for mental health. 30 days of discharge from an inpatient facility or residential stay for mental health.	Milestone 2
12	Suicide or Overdose Death Within 7 and 30 Days of Discharge From an Inpatient Facility or Residential Treatment for Mental Health Among Beneficiaries With SMI or SED (rate)	Rate of suicide or overdose deaths among Medicaid beneficiaries with SMI or SED within 7 and 30 days of discharge from an inpatient facility or residential stay for mental health. 7 days of discharge from an inpatient facility or residential stay for mental health. 30 days of discharge from an inpatient facility or residential stay for mental health.	Milestone 2
13	Mental Health Services Utilization - Inpatient	Number of beneficiaries in the demonstration population who use inpatient services related to mental health during the measurement period.	Milestone 3
14	Mental Health Services Utilization - Intensive Outpatient and Partial Hospitalization	Number of beneficiaries in the demonstration population who used intensive outpatient and/or partial hospitalization services related to mental health during the measurement period.	Milestone 3

Metric type	Reporting category	Data source	Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b	Deviations from CMS-provided technical specifications manual in approved protocol
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	
CMS-constructed	Other annual metrics	State data on cause of death		
CMS-constructed	Other annual metrics	State data on cause of death		
CMS-constructed	Other monthly and quarterly metrics	Claims	Y	
CMS-constructed	Other monthly and quarterly metrics	Claims	Y	

Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI-SED reporting issues tab)	Measurement period (month, quarter, year ^c)	Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration Reporting	
				Demonstration Reporting Denominator	Demonstration Reporting Numerator or count
Version 2.0	N				
		Year	1/1/2022-12/31/2022	2301	950
		Year	1/1/2022-12/31/2022	2301	566
		Year			
		Year			
		Year			
		Year			
Version 2.0	N	Month 1	4/1/2023-4/30/2023		392
		Month 2	5/1/2023-5/31/2023		458
		Month 3	6/1/2023-6/30/2023		477
Version 2.0	N	Month 1	4/1/2023-4/30/2023		875
		Month 2	5/1/2023-5/31/2023		882
		Month 3	6/1/2023-6/30/2023		839

Reporting	Standardized definition of SMI			State-specific definition of SMI		
	Standardized definition of SMI Denominator	Standardized definition of SMI Numerator or count	Standardized definition of SMI Rate/Percentage ^d	State-specific definition of SMI Denominator	State-specific definition of SMI Numerator or count	State-specific definition of SMI Rate/Percentage ^d
			0.412863972			
			0.245980009			
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		326			67	
		365			68	
		398			66	
		182			12	
		206			13	
		181			9	

Children (Age <16)			Transition-age youth (Age 16-24)			Adults (Age 25-64)	
Children (Age <16) Denominator	Children (Age <16) Numerator or count	Children (Age <16) Rate/Percentage ^d	Transition-age youth (Age 16-24) Denominator	Transition-age youth (Age 16-24) Numerator or count	Transition-age youth (Age 16-24) Rate/Percentage ^d	Adults (Age 25-64) Denominator	Adults (Age 25-64) Numerator or count

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	31			83			262
	43			93			306
	41			72			346
	128			185			542
	120			175			562
	106			176			537

64) Adults (Age 25-64) Rate/Percentage ^d	Older adults (Age 65+)		Dual-eligible (Medicare-Medicaid eligible)			
	Older adults (Age 65+) Denominator	Older adults (Age 65+) Numerator or count	Older adults (Age 65+) Rate/Percentage ^d	Dual-eligible (Medicare-Medicaid eligible) Denominator	Dual-eligible (Medicare-Medicaid eligible) Numerator or	Dual-eligible (Medicare-Medicaid eligible) Rate/Percentage ^d
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#DIV/0!						46
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#DIV/0!			18			104
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Medicaid only			Eligible for Medicaid on the basis of disability			Not eligible for Medicaid on the basis of disability
Medicaid only Denominator	Medicaid only Numerator or count	Medicaid only Rate/Percentage ^d	Eligible for Medicaid on the basis of disability Denominator	Medicaid on the basis of disability Numerator or count	Eligible for Medicaid on the basis of disability Rate/Percentage ^d	Not eligible for Medicaid on the basis of disability Denominator
	346					
	409					
	428					
	771					
	766					
	740					

Medicaid on the basis of disability		Criminally involved			Not criminally involved	
Not eligible for Medicaid on the basis of disability Numerator or count	Not eligible for Medicaid on the basis of disability Rate/Percentage ^d	Criminally involved Denominator	Criminally involved Numerator or count	Criminally involved Rate/Percentage ^d	Not criminally involved Denominator	Not criminally involved Numerator or count
[Redacted content]						

Not criminally involved Rate/Percentage ^d	Co-occurring SUD			Co-occurring physical conditions Co-occurring			[S <i>[State-specific subpopulation]</i> Denominator
	Co-occurring SUD Denominator	Co-occurring SUD Numerator or count	Co-occurring SUD Rate/Percentage ^d	Co-occurring physical conditions Denominator	physical conditions Numerator or count	Co-occurring physical conditions Rate/Percentage ^d	

[State-specific subpopulation]^{d,e}

<i>[State-specific subpopulation]</i> Numerator or count	<i>[State-specific subpopulation]</i> Rate/Percentage ^d
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#	Metric name	Metric description	Milestone or reporting topic
15	Mental Health Services Utilization - Outpatient	Number of beneficiaries in the demonstration population who used outpatient services related to mental health during the measurement period.	Milestone 3
16	Mental Health Services Utilization - ED	Number of beneficiaries in the demonstration population who use emergency department services for mental health during the measurement period.	Milestone 3
17	Mental Health Services Utilization - Telehealth	Number of beneficiaries in the demonstration population who used telehealth services related to mental health during the measurement period.	Milestone 3
18	Mental Health Services Utilization - Any Services	Number of beneficiaries in the demonstration population who used any services related to mental health during the measurement period.	Milestone 3
19a	Average Length of Stay in IMDs	Average length of stay (ALOS) for beneficiaries with SMI discharged from an inpatient or residential stay in an IMD. Three rates are reported: ALOS for all IMDs and populations ALOS among short-term stays (less than or equal to 60 days) ALOS among long-term stays (greater than 60 days)	Milestone 3
19b	Average Length of Stay in IMDs (IMDs receiving FFP only)	Average length of stay (ALOS) for beneficiaries with SMI discharged from an inpatient or residential stay in an IMD receiving federal financial participation (FFP). Three rates are reported: ALOS for all IMDs and populations ALOS among short-term stays (less than or equal to 60 days) ALOS among long-term stays (greater than 60 days)	Milestone 3
20	Beneficiaries With SMI/SED Treated in an IMD for Mental Health	Number of beneficiaries in the demonstration population who have a claim for inpatient or residential treatment for mental health in an IMD during the reporting year.	Milestone 3
21	Count of Beneficiaries With SMI/SED (monthly)	Number of beneficiaries in the demonstration population during the measurement period and/or in the 11 months before the measurement period.	Milestone 4

Metric type	Reporting category	Data source	Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b	Deviations from CMS-provided technical specifications manual in approved protocol
CMS-constructed	Other monthly and quarterly metrics	Claims	Y	
CMS-constructed	Other monthly and quarterly metrics	Claims	Y	
CMS-constructed	Other monthly and quarterly metrics	Claims	Y	
CMS-constructed	Other monthly and quarterly metrics	Claims	Y	
CMS-constructed	Other annual metrics	Claims State-specific IMD database	Y	
CMS-constructed	Other annual metrics	Claims State-specific IMD database	Y	
CMS-constructed	Other annual metrics	Claims	Y	
CMS-constructed	Other monthly and quarterly metrics	Claims	Y	

Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI-SED reporting issues tab)	Measurement period (month, quarter, year ^c)	Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration Reporting		
				Demonstration Reporting Denominator	Demonstration Reporting Numerator or count	
Version 2.0	N	Month 1	4/1/2023-4/30/2023		9478	
		Month 2	5/1/2023-5/31/2023		9839	
		Month 3	6/1/2023-6/30/2023		9111	
Version 2.0	N	Month 1	4/1/2023-4/30/2023		21	
		Month 2	5/1/2023-5/31/2023		14	
		Month 3	6/1/2023-6/30/2023		11	
Version 2.0	N	Month 1	4/1/2023-4/30/2023		2590	
		Month 2	5/1/2023-5/31/2023		2470	
		Month 3	6/1/2023-6/30/2023		2315	
Version 2.0	N	Month 1	4/1/2023-4/30/2023		12008	
		Month 2	5/1/2023-5/31/2023		12280	
		Month 3	6/1/2023-6/30/2023		11442	
Version 2.0	N					
		Year	7/1/2022-6/30/2023		1555	16509
		Year	7/1/2022-6/30/2023		1551	16169
		Year	7/1/2022-6/30/2023	4	340	
Version 2.0	N					
		Year	7/1/2022-6/30/2023	1555	16509	
		Year	7/1/2022-6/30/2023	1551	16169	
		Year	7/1/2022-6/30/2023	4	340	
Version 2.0	N	Year	7/1/2022-6/30/2023		1359	
Version 2.0	N	Month 1	4/1/2023-4/30/2023		13852	

Reporting Demonstration Reporting Rate/Percentage ^d	Standardized definition of SMI		State-specific definition of SMI			
	Standardized definition of SMI Denominator	Standardized definition of SMI Numerator or count	Standardized definition of SMI Rate/Percentage ^d	State-specific definition of SMI Denominator	State-specific definition of SMI Numerator or count	State-specific definition of SMI Rate/Percentage ^d
		2000			61	
		2167			53	
		2059			53	
		14			3	
		10			3	
		8			0	
		509			6	
		494			1	
		465			4	
		2536			99	
		2734			86	
		2606			88	
10.61672026 10.42488717 85						
10.61672026 10.42488717 85						
		2968			105	

Children (Age <16)			Transition-age youth (Age 16-24)			Adults (Age 25-64)	
Children (Age <16) Denominator	Children (Age <16) Numerator or count	Children (Age <16) Rate/Percentage ^d	Transition-age youth (Age 16-24) Denominator	Transition-age youth (Age 16-24) Numerator or count	Transition-age youth (Age 16-24) Rate/Percentage ^d	Adults (Age 25-64) Denominator	Adults (Age 25-64) Numerator or count
	1681			1587			5845
	1694			1663			6075
	1430			1516			5765
	0			6			15
	0			4			10
	0			2			9
	277			450			1734
	232			435			1668
	197			406			1591
	1923			2055			7546
	1900			2104			7744
	1605			1922			7415
	1581			2099			9402

64)	Older adults (Age 65+)			Dual-eligible (Medicare-Medicaid eligible)			
	Adults (Age 25-64) Rate/Percentage ^d	Older adults (Age 65+) Denominator	Older adults (Age 65+) Numerator or count	Older adults (Age 65+) Rate/Percentage ^d	Dual-eligible (Medicare-Medicaid eligible) Denominator	Dual-eligible (Medicare- Medicaid eligible) Numerator or	Dual-eligible (Medicare- Medicaid eligible) Rate/Percentage ^d
			365			1157	
			407			1244	
			400			1215	
			0			3	
			0			2	
			0			2	
			129			321	
			135			321	
			121			308	
			484			1477	
			532			1551	
			500			1501	
			770			2082	

Medicaid only			Eligible for Medicaid on the basis of disability Eligible for			Not eligible for
Medicaid only Denominator	Medicaid only Numerator or count	Medicaid only Rate/Percentage ^d	Eligible for Medicaid on the basis of disability Denominator	Medicaid on the basis of disability Numerator or count	Eligible for Medicaid on the basis of disability Rate/Percentage ^d	Not eligible for Medicaid on the basis of disability Denominator
	8321					
	8595					
	7896					
	18					
	12					
	9					
	2269					
	2149					
	2007					
	10531					
	10729					
	9941					
	11770					

Medicaid on the basis of disability		Criminally involved			Not criminally involved	
Not eligible for Medicaid on the basis of disability Numerator or count	Not eligible for Medicaid on the basis of disability Rate/Percentage ^d	Criminally involved Denominator	Criminally involved Numerator or count	Criminally involved Rate/Percentage ^d	Not criminally involved Denominator	Not criminally involved Numerator or count

Not criminally involved Rate/Percentage ^d	Co-occurring SUD			Co-occurring physical conditions Co-occurring			[State-specific subpopulation] Denominator
	Co-occurring SUD Denominator	Co-occurring SUD Numerator or count	Co-occurring SUD Rate/Percentage ^d	Co-occurring physical conditions Denominator	Co-occurring physical conditions Numerator or count	Co-occurring physical conditions Rate/Percentage ^d	
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
		[Redacted]					
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
		[Redacted]					
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
		[Redacted]					

[state-specific subpopulation]^{d,e}

<i>[State-specific subpopulation]</i> Numerator or count	<i>[State-specific subpopulation]</i> Rate/Percentage ^d
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#	Metric name	Metric description	Milestone or reporting topic
22	Count of Beneficiaries With SMI/SED (annually)	Number of beneficiaries in the demonstration population during the measurement period and/or in the 12 months before the measurement period.	Milestone 4
23	Diabetes Care for Patients with Serious Mental Illness: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPCMI-AD)	Percentage of beneficiaries ages 18 to 75 with a serious mental illness and diabetes (type 1 and type 2) whose most recent Hemoglobin A1c (HbA1c) level during the measurement year is >9.0%.	Milestone 4
24	Screening for Depression and Follow-Up Plan: Age 18 and Older (CDF-AD)	Percentage of beneficiaries age 18 and older screened for depression on the date of the encounter using an age appropriate standardized depression screening tool, AND if positive, a follow-up plan is documented on the date of the positive screen.	Milestone 4
25	Screening for Depression and Follow-Up Plan: Ages 12–17 (CDF-CH)	Percentage of beneficiaries ages 12 to 17 screened for depression on the date of the encounter using an age appropriate standardized depression screening tool, AND if positive, a follow-up plan is documented on the date of the positive screen.	Milestone 4
26	Access to Preventive/Ambulatory Health Services for Medicaid Beneficiaries With SMI	The percentage of Medicaid beneficiaries age 18 years or older with SMI who had an ambulatory or preventive care visit during the measurement period.	Milestone 4
27	Tobacco Use Screening and Follow-up for People with Serious Mental Illness or Alcohol or Other Drug Dependence	The percentage of patients 18 years and older with a serious mental illness or alcohol or other drug dependence who received a screening for tobacco use and follow-up for those identified as a current tobacco user. Two rates are reported: Percentage of adults with SMI who received a screening for tobacco use and follow-up for those identified as a current tobacco user Percentage of adults with AOD who received a screening for tobacco use and follow-up for those identified as a current tobacco user	Milestone 4
28	Alcohol Screening and Follow-up for People with Serious Mental Illness	The percentage of patients 18 years and older with a serious mental illness, who were screened for unhealthy alcohol use and received brief counseling or other follow-up care if identified as an unhealthy alcohol user.	Milestone 4
29	Metabolic Monitoring for Children and Adolescents on Antipsychotics	The percentage of children and adolescents ages 1 to 17 who had two or more antipsychotic prescriptions and had metabolic testing. Three rates are reported:	Milestone 4

Metric type	Reporting category	Data source	Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b	Deviations from CMS-provided technical specifications manual in approved protocol
CMS-constructed	Other annual metrics	Claims	Y	
Established quality measure	Annual metrics that are an established quality measure	Claims Medical records	N	Since we do not track CPT Category II c
Established quality measure	Annual metrics that are an established quality measure	Claims Medical records		
Established quality measure	Annual metrics that are an established quality measure	Claims Electronic medical records		
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	
Established quality measure	Annual metrics that are an established quality measure	Claims		
Established quality measure	Annual metrics that are an established quality measure	Claims		
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	

Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI-SED reporting issues tab)	Measurement period (month, quarter, year ^c)	Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration Reporting	
				Demonstration Reporting Denominator	Demonstration Reporting Numerator or count
		Month 2	5/1/2023-5/31/2023		13972
		Month 3	6/1/2023-6/30/2023		13189
Version 2.0	N	Year	7/1/2022-6/30/2023		85767
codes, we agreed with CI N		Year	1/1/2022-12/31/2022	6577	4160
		Year			
		Year			
Version 2.0	N	Year	1/1/2022-12/31/2022	86705	82268
		Year			
		Year			
		Year			
Version 2.0	N				

Reporting	Standardized definition of SMI			State-specific definition of SMI		
	Standardized definition of SMI Denominator	Standardized definition of SMI Numerator or count	Standardized definition of SMI Rate/Percentage ^d	State-specific definition of SMI Denominator	State-specific definition of SMI Numerator or count	State-specific definition of SMI Rate/Percentage ^d
		3141			94	
		2983			93	
		15800			1057	
0.632507222						
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0.948826481						
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Children (Age <16)			Transition-age youth (Age 16-24)			Adults (Age 25-64)	
Children (Age <16) Denominator	Children (Age <16) Numerator or count	Children (Age <16) Rate/Percentage ^d	Transition-age youth (Age 16-24) Denominator	Transition-age youth (Age 16-24) Numerator or count	Transition-age youth (Age 16-24) Rate/Percentage ^d	Adults (Age 25-64) Denominator	Adults (Age 25-64) Numerator or count
	1594			2111			9489
	1365			1955			9098
	9118			13612			56447

64) Adults (Age 25-64) Rate/Percentage ^d	Older adults (Age 65+)		Dual-eligible (Medicare-Medicaid eligible)		
	Older adults (Age 65+) Denominator	Older adults (Age 65+) Numerator or count	Older adults (Age 65+) Rate/Percentage ^d	Dual-eligible (Medicare-Medicaid eligible) Denominator	Dual-eligible (Medicare-Medicaid eligible) Numerator or Rate/Percentage ^d
		778			2089
		771			2022
		6590			14516

Medicaid only			Eligible for Medicaid on the basis of disability			Not eligible for Medicaid on the basis of disability
Medicaid only Denominator	Medicaid only Numerator or count	Medicaid only Rate/Percentage ^d	Eligible for Medicaid on the basis of disability Denominator	Eligible for Medicaid on the basis of disability Numerator or count	Eligible for Medicaid on the basis of disability Rate/Percentage ^d	Not eligible for Medicaid on the basis of disability Denominator
	11883					
	11167					
	71251					

Medicaid on the basis of disability		Criminally involved			Not criminally involved	
Not eligible for Medicaid on the basis of disability Numerator or count	Not eligible for Medicaid on the basis of disability Rate/Percentage ^d	Criminally involved Denominator	Criminally involved Numerator or count	Criminally involved Rate/Percentage ^d	Not criminally involved Denominator	Not criminally involved Numerator or count

Not criminally involved Rate/Percentage ^d	Co-occurring SUD			Co-occurring physical conditions Co-occurring			[S <i>[State-specific subpopulation]</i> Denominator
	Co-occurring SUD Denominator	Co-occurring SUD Numerator or count	Co-occurring SUD Rate/Percentage ^d	Co-occurring physical conditions Denominator	physical conditions Numerator or count	Co-occurring physical conditions Rate/Percentage ^d	

[state-specific subpopulation]^{d,e}

[State-specific subpopulation] Numerator or count	[State-specific subpopulation] Rate/Percentage ^d
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#	Metric name	Metric description	Milestone or reporting topic
		Percentage of children and adolescents on antipsychotics who received blood glucose testing	
		Percentage of children and adolescents on antipsychotics who received cholesterol testing	
		Percentage of children and adolescents on antipsychotics who received blood glucose and cholesterol testing	
30	Follow-Up Care for Adult Medicaid Beneficiaries Who are Newly Prescribed an Antipsychotic Medication	Percentage of Medicaid beneficiaries age 18 years and older with new antipsychotic prescriptions who have completed a follow-up visit with a provider with prescribing authority within four weeks (28 days) of prescription of an antipsychotic medication.	Milestone 4
32	Total Costs Associated With Mental Health Services Among Beneficiaries With SMI/SED - Not Inpatient or Residential	The sum of all Medicaid spending for mental health services not in inpatient or residential settings during the measurement period.	Other SMI/SED metrics
33	Total Costs Associated With Mental Health Services Among Beneficiaries With SMI/SED - Inpatient or Residential	The sum of all Medicaid costs for mental health services in inpatient or residential settings during the measurement period.	Other SMI/SED metrics
34	Per Capita Costs Associated With Mental Health Services Among Beneficiaries With SMI/SED - Not Inpatient or Residential	Per capita costs for non-inpatient, non-residential services for mental health, among beneficiaries in the demonstration population during the measurement period.	Other SMI/SED metrics
35	Per Capita Costs Associated With Mental Health Services Among Beneficiaries With SMI/SED - Inpatient or Residential	Per capita costs for inpatient or residential services for mental health among beneficiaries in the demonstration population during the measurement period.	Other SMI/SED metrics
36	Grievances Related to Services for SMI/SED	Number of grievances filed during the measurement period that are related to services for SMI/SED.	Other SMI/SED metrics
37	Appeals Related to Services for SMI/SED	Number of appeals filed during the measurement period that are related to services for SMI/SED.	Other SMI/SED metrics
38	Critical Incidents Related to Services for SMI/SED	Number of critical incidents filed during the measurement period that are related to services for SMI/SED.	Other SMI/SED metrics
39	Total Costs Associated With Treatment for Mental Health in an IMD Among Beneficiaries With SMI/SED	Total Medicaid costs for beneficiaries in the demonstration population who had claims for inpatient or residential treatment for mental health in an IMD during the reporting year.	Other SMI/SED metrics
40	Per Capita Costs Associated With Treatment for Mental Health in an IMD Among Beneficiaries With SMI/SED	Per capita Medicaid costs for beneficiaries in the demonstration population who had claims for inpatient or residential treatment for mental health in an IMD during the reporting year.	Other SMI/SED metrics
Q1	<i>Inpatient Psychiatric Facilities Connected to HIE</i>	Number of inpatient psychiatric facilities who have connected to the HIE	Health IT

Metric type	Reporting category	Data source	Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b	Deviations from CMS-provided technical specifications manual in approved protocol
Established quality measure	Annual metrics that are an established quality measure	Claims	Y	
CMS-constructed	Other annual metrics	Claims	Y	
CMS-constructed	Other annual metrics	Claims	Y	
CMS-constructed	Other annual metrics	Claims	Y	
CMS-constructed	Other annual metrics	Claims	Y	
CMS-constructed	Grievances and appeals	Administrative records	Y	N
CMS-constructed	Grievances and appeals	Administrative records	Y	N
CMS-constructed	Grievances and appeals	Administrative records	Y	N
CMS-constructed	Other annual metrics	Claims	Y	
CMS-constructed	Other annual metrics	Claims	Y	
State-specific	Other annual metrics	HIE Records		

Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI-SED reporting issues tab)	Measurement period (month, quarter, year ^c)	Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration Reporting	
				Demonstration Reporting Denominator	Demonstration Reporting Numerator or count
		Year	1/1/2022-12/31/2022	3225	829
		Year	1/1/2022-12/31/2022	3225	68
		Year	1/1/2022-12/31/2022	3225	900
Version 2.0	N	Year	1/1/2022-12/31/2022	9670	6970
Version 2.0	N	Year	7/1/2022-6/30/2023		77798051.09
Version 2.0	N	Year	7/1/2022-6/30/2023		81893151.15
Version 2.0	N	Year	7/1/2022-6/30/2023	85767	77798051.09
Version 2.0	N	Year	7/1/2022-6/30/2023	85767	81893151.15
Version 2.0	N	Quarter	10/01/2023-12/31/2023		41
Version 2.0	N	Quarter	10/01/2023-12/31/2023		26
Version 2.0	N	Quarter	10/01/2023-12/31/2023		9
Version 2.0	N	Year	7/1/2022-6/30/2023		9312083.57
Version 2.0	N	Year	7/1/2022-6/30/2023	1314	9312083.57
					0

Reporting Demonstration Reporting Rate/Percentage ^d	Standardized definition of SMI			State-specific definition of SMI		
	Standardized definition of SMI Denominator	Standardized definition of SMI Numerator or count	Standardized definition of SMI Rate/Percentage ^d	State-specific definition of SMI Denominator	State-specific definition of SMI Numerator or count	State-specific definition of SMI Rate/Percentage ^d
0.257054264						
0.021085271						
0.279069767						
0.720785936						
907.0860714						
954.8328745						
7086.821591						

Children (Age <16)			Transition-age youth (Age 16-24)			Adults (Age 25-64)	
Children (Age <16) Denominator	Children (Age <16) Numerator or count	Children (Age <16) Rate/Percentage ^d	Transition-age youth (Age 16-24) Denominator	Transition-age youth (Age 16-24) Numerator or count	Transition-age youth (Age 16-24) Rate/Percentage ^d	Adults (Age 25-64) Denominator	Adults (Age 25-64) Numerator or count
[Redacted content]							

64)	Older adults (Age 65+)			Dual-eligible (Medicare-Medicaid eligible)		
	Older adults (Age 65+) Denominator	Older adults (Age 65+) Numerator or count	Older adults (Age 65+) Rate/Percentage ^d	Dual-eligible (Medicare-Medicaid eligible) Denominator	Dual-eligible (Medicare- Medicaid eligible) Numerator or	Dual-eligible (Medicare- Medicaid eligible) Rate/Percentage ^d
[Redacted Content]						

Medicaid only			Eligible for Medicaid on the basis of disability			Not eligible for Medicaid on the basis of disability
Medicaid only Denominator	Medicaid only Numerator or count	Medicaid only Rate/Percentage ^d	Eligible for Medicaid on the basis of disability Denominator	Eligible for Medicaid on the basis of disability Numerator or count	Eligible for Medicaid on the basis of disability Rate/Percentage ^d	Not eligible for Medicaid on the basis of disability Denominator

Medicaid on the basis of disability		Criminally involved			Not criminally involved	
Not eligible for Medicaid on the basis of disability Numerator or count	Not eligible for Medicaid on the basis of disability Rate/Percentage ^d	Criminally involved Denominator	Criminally involved Numerator or count	Criminally involved Rate/Percentage ^d	Not criminally involved Denominator	Not criminally involved Numerator or count
[Redacted Content]						

Not criminally involved Rate/Percentage ^d	Co-occurring SUD			Co-occurring physical conditions Co-occurring			[State-specific subpopulation] Denominator
	Co-occurring SUD Denominator	Co-occurring SUD Numerator or count	Co-occurring SUD Rate/Percentage ^d	Co-occurring physical conditions Denominator	Co-occurring physical conditions Numerator or count	Co-occurring physical conditions Rate/Percentage ^d	
[Redacted content]							

[state-specific subpopulation]^{d,e}

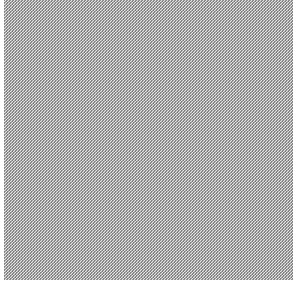
<i>[State-specific subpopulation]</i> Numerator or count	<i>[State-specific subpopulation]</i> Rate/Percentage ^d
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#	Metric name	Metric description	Milestone or reporting topic
Q2	<i>Access to additional services using provider/resource directory - connecting primary care to mental health service offerings</i>	Number of providers managed in provider directory	Health IT
Q3		<i>Number of requests for community based resources fulfilled using statewide resource e-directory. Requests for resources are submitted via phone calls and online requests through the 211 website. Call centers provide aggregated data about the calls to 2-1-1 Counts, which systematically tracks and summarizes callers' needs. Data can be accessed on the 211 website.</i>	Health IT
Individuals Connected to Community-Based Reso			
State-specific metrics			
<i>Add rows for any additional state-specific metrics</i>			

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

The MPT, FUH-CH, FUH-AD, FUA-AD, FUM-AD, AAP, and APM measures (#13, 14, 15, 16, 17, 18, 7, 8, 9, 10, 26, 29) are Healthcare Effectiveness Data and Information Set (HEDIS®) measures that are owned and copyrighted by the National Committee for Quality Assurance (NCQA). HEDIS measures and specifications are not clinical guidelines, do not establish a standard of medical care and have not been tested for all potential applications. The measures and specifications are provided "as is" without warranty of any kind. NCQA makes no representations, warranties or endorsements about the quality of any product, test or protocol identified as numerator compliant or otherwise identified as meeting the requirements of a HEDIS measure or specification. NCQA makes no representations, warranties, or endorsement about the quality of any organization or clinician who uses or reports performance measures and NCQA has no liability to anyone who relies on HEDIS measures or specifications or data reflective of performance under such measures and specifications.

The measure specification methodology used by CMS is different from NCQA's methodology. NCQA has not validated the adjusted measure specifications but has granted CMS permission to adjust. A calculated measure result (a "rate") from a HEDIS measure that has not been certified via NCQA's Measure Certification Program, and is based on adjusted HEDIS specifications, may not be called a "HEDIS rate" until it is audited and designated reportable by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates shall be designated or referred to as "Adjusted, Uncertified, Unaudited HEDIS rates."

^a States should create a new metrics report for each reporting quarter.

^b For state-specific metrics, states should attest that they are reporting as specified in their monitoring protocol.

^c Report metrics that are one annual value for a demonstration year only in the report specified in the reporting schedule.

^d If applicable. See CMS-provided technical specifications manual.

^e Enter any state-specific subpopulations that will be reported after column BF; create new columns as needed.

Checks:

Numerator in #32 is equal to the Numerator in #34

Metric type	Reporting category	Data source	Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b	Deviations from CMS-provided technical specifications manual in approved protocol
State-specific	Other annual metrics	Prepaid Mental Health Plans and Utah Medicaid Integrated Care Plans		
State-specific	Other annual metrics	211- United Ways of Utah		

Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI-SED reporting issues tab)	Measurement period (month, quarter, year ²)	Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration Reporting Denominator	Demonstration Reporting Numerator or count
	Y	Year			
	Y	Year			

Reporting	Standardized definition of SMI			State-specific definition of SMI		
	Standardized definition of SMI Denominator	Standardized definition of SMI Numerator or count	Standardized definition of SMI Rate/Percentage ^d	State-specific definition of SMI Denominator	State-specific definition of SMI Numerator or count	State-specific definition of SMI Rate/Percentage ^d
Demonstration Reporting Rate/Percentage ^d						



Children (Age <16)			Transition-age youth (Age 16-24)			Adults (Age 25-64)	
Children (Age <16) Denominator	Children (Age <16) Numerator or count	Children (Age <16) Rate/Percentage ^d	Transition-age youth (Age 16-24) Denominator	Transition-age youth (Age 16-24) Numerator or count	Transition-age youth (Age 16-24) Rate/Percentage ^d	Adults (Age 25-64) Denominator	Adults (Age 25-64) Numerator or count



64) Adults (Age 25-64) Rate/Percentage ^d	Older adults (Age 65+)			Dual-eligible (Medicare-Medicaid eligible)		
	Older adults (Age 65+) Denominator	Older adults (Age 65+) Numerator or count	Older adults (Age 65+) Rate/Percentage ^d	Dual-eligible (Medicare-Medicaid eligible) Denominator	Dual-eligible (Medicare- Medicaid eligible) Numerator or	Dual-eligible (Medicare- Medicaid eligible) Rate/Percentage ^d



Medicaid only			Eligible for Medicaid on the basis of disability			Not eligible for Medicaid on the basis of disability
Medicaid only Denominator	Medicaid only Numerator or count	Medicaid only Rate/Percentage ^d	Eligible for Medicaid on the basis of disability Denominator	Eligible for Medicaid on the basis of disability Numerator or count	Eligible for Medicaid on the basis of disability Rate/Percentage ^d	Not eligible for Medicaid on the basis of disability Denominator

Medicaid on the basis of disability		Criminally involved			Not criminally involved	
Not eligible for Medicaid on the basis of disability Numerator or count	Not eligible for Medicaid on the basis of disability Rate/Percentage ^d	Criminally involved Denominator	Criminally involved Numerator or count	Criminally involved Rate/Percentage ^d	Not criminally involved Denominator	Not criminally involved Numerator or count

[Redacted]						
[Redacted]						

Not criminally involved Rate/Percentage ^d	Co-occurring SUD			Co-occurring physical conditions Co-occurring			[State-specific subpopulation] Denominator
	Co-occurring SUD Denominator	Co-occurring SUD Numerator or count	Co-occurring SUD Rate/Percentage ^d	Co-occurring physical conditions Denominator	physical conditions Numerator or count	Co-occurring physical conditions Rate/Percentage ^d	



<i>[state-specific subpopulation]</i> ^{d,e}	
<i>[State-specific subpopulation]</i>	<i>[State-specific subpopulation]</i>
Numerator or count	Rate/Percentage ^d

[Redacted]

[Redacted]

#	Metric name	Metric description	Milestone or reporting topic
	Numerator in #33 is equal to the Numerator in #35		
	Denominator in #34 is equal to the Numerator in #22		
	Denominator in #35 is equal to the Numerator in #22		
	Denominator in #34 is equal to the Denominator in #35		
	Numerator in #40 is equal to the Numerator in #39		

Metric type	Reporting category	Data source	Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b	Deviations from CMS-provided technical specifications manual in approved protocol
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Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI-SED reporting issues tab)	Measurement period (month, quarter, year ²)	Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration Rep	
				Demonstration Reporting Denominator	Demonstration Reporting Numerator or count

Reporting	Standardized definition of SMI			State-specific definition of SMI		
	Standardized definition of SMI Denominator	Standardized definition of SMI Numerator or count	Standardized definition of SMI Rate/Percentage ^d	State-specific definition of SMI Denominator	State-specific definition of SMI Numerator or count	State-specific definition of SMI Rate/Percentage ^d
Demonstration Reporting Rate/Percentage ^d						

Children (Age <16)			Transition-age youth (Age 16-24)			Adults (Age 25-64)	
Children (Age <16) Denominator	Children (Age <16) Numerator or count	Children (Age <16) Rate/Percentage ^d	Transition-age youth (Age 16-24) Denominator	Transition-age youth (Age 16-24) Numerator or count	Transition-age youth (Age 16-24) Rate/Percentage ^d	Adults (Age 25-64) Denominator	Adults (Age 25-64) Numerator or count

64) Adults (Age 25-64) Rate/Percentage ^d	Older adults (Age 65+)			Dual-eligible (Medicare-Medicaid eligible)		
	Older adults (Age 65+) Denominator	Older adults (Age 65+) Numerator or count	Older adults (Age 65+) Rate/Percentage ^d	Dual-eligible (Medicare-Medicaid eligible) Denominator	Dual-eligible (Medicare-Medicaid eligible) Numerator or	Dual-eligible (Medicare-Medicaid eligible) Rate/Percentage ^d

Medicaid only			Eligible for Medicaid on the basis of disability			Not eligible for Medicaid on the basis of disability
Medicaid only Denominator	Medicaid only Numerator or count	Medicaid only Rate/Percentage ^d	Eligible for Medicaid on the basis of disability Denominator	Medicaid on the basis of disability Numerator or count	Eligible for Medicaid on the basis of disability Rate/Percentage ^d	Not eligible for Medicaid on the basis of disability Denominator

Medicaid on the basis of disability		Criminally involved			Not criminally involved	
Not eligible for Medicaid on the basis of disability Numerator or count	Not eligible for Medicaid on the basis of disability Rate/Percentage ^d	Criminally involved Denominator	Criminally involved Numerator or count	Criminally involved Rate/Percentage ^d	Not criminally involved Denominator	Not criminally involved Numerator or count

Not criminally involved Rate/Percentage ^d	Co-occurring SUD			Co-occurring physical conditions Co-occurring			[S <i>[State-specific subpopulation]</i> Denominator
	Co-occurring SUD Denominator	Co-occurring SUD Numerator or count	Co-occurring SUD Rate/Percentage ^d	Co-occurring physical conditions Denominator	physical conditions Numerator or count	Co-occurring physical conditions Rate/Percentage ^d	

[state-specific subpopulation]^{d,e}

<i>[State-specific subpopulation]</i>	<i>[State-specific subpopulation]</i>
Numerator or count	Rate/Percentage ^d