

Medicaid Section 1115 SMI/SED Demonstrations Monitoring Report (Part A) - Metrics (Version 3.0)

State	Utah
Demonstration Name	Utah Medicaid Reform 1115 Demonstration
SMI/SED Demonstration Year (DY) (Format: DY1, DY2, DY3, etc.)	DY1
Calendar Dates for SMI/SED DY (Format: MM/DD/YYYY - MM/DD/YYYY)	07/01/2020-06/30/2021
SMI/SED Reporting Period (Format: Q1, Q2, Q3, Q4)	Q2
Calendar Dates for SMI/SED Reporting Period (Format: MM/DD/YYYY - MM/DD/YYYY)	10/1/2020-12/31/2020

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

#	Metric name	Metric description
<i>EXAMPLE:</i> 20 <i>(Do not delete or edit this row)</i>	<i>EXAMPLE:</i> <i>Beneficiaries With SMI/SED Treated in an IMD for Mental Health</i>	<i>EXAMPLE:</i> <i>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.</i>
1	SUD Screening of Beneficiaries Admitted to Psychiatric Hospitals or Residential Treatment Settings	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
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
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
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
7	Follow-up After Hospitalization for Mental Illness: Ages 6 to 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 provider. Two rates are 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 or reporting topic	Metric type	Reporting category	Data source	State will report (Y/N)	Approved monitoring protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b
<i>EXAMPLE: Milestone 3</i>	<i>EXAMPLE: CMS-constructed</i>	<i>EXAMPLE: Other annual metrics</i>	<i>EXAMPLE: Claims</i>	<i>EXAMPLE: Y</i>	<i>EXAMPLE: N</i>
Milestone 1	Established quality measure	Annual metrics that are an established quality measure	Medical record review or claims		
Milestone 1	Established quality measure	Annual metrics that are an established quality measure	Claims		
Milestone 2	Established quality measure	Annual metrics that are an established quality measure	Claims		
Milestone 2	Established quality measure	Annual metrics that are an established quality measure	Claims		
Milestone 2	Established quality measure	Annual metrics that are an established quality measure	Claims		

Deviations from CMS-provided technical specifications manual or other considerations in approved monitoring protocol	Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI - SED reporting issues tab)	Measurement period (month, quarter, year ^c)
<i>EXAMPLE:</i> The Department will use state-defined procedure codes to calculate this metric.	<i>EXAMPLE:</i> Version 3.0	<i>EXAMPLE:</i> Y	<i>EXAMPLE:</i> Year
			Year
			Year
			Year
			Year
			Year
			Year

Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration reporting denominator	Demonstration reporting numerator or count	Demonstration reporting rate/percentage ^d	Standardized definition of SMI denominator	Standardized definition of SMI numerator or count	Standardized definition of SMI rate/percentage ^d
<i>EXAMPLE:</i> 01/01/2020-12/31/2020		<i>EXAMPLE:</i> 100				
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Co-occurring physical conditions denominator	Co-occurring physical conditions numerator or count	Co-occurring physical conditions rate/percentage ^d	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count	State-specific subpopulation 1 rate/percentage ^d
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#	Metric name	Metric description
8	Follow-up After Hospitalization for Mental Illness: Age 18 and Older (FUH-AD)	<p>Percentage of discharges for beneficiaries age 18 and older who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and <u>who had a follow-up visit with a mental health provider</u>. Percentage of discharges for which the beneficiary received follow-up within 30 days after discharge</p> <hr/> <p>Percentage of discharges for which the beneficiary received follow-up within 7 days after discharge</p>
9	Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence: Age 18 and Older (FUA-AD)	<p>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:</p> <hr/> <p>Percentage of ED visits for AOD abuse or dependence for which the beneficiary received follow-up within 30 days of the ED visit</p> <hr/> <p>Percentage of ED visits for AOD abuse or dependence for which the beneficiary received follow-up within 7 days of the ED visit</p>
10	Follow-Up After Emergency Department Visit for Mental Illness: Age 18 and Older (FUM-AD)	<p>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:</p> <hr/> <p>Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit</p> <hr/> <p>Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit</p>

Milestone or reporting topic	Metric type	Reporting category	Data source	State will report (Y/N)	Approved monitoring protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b
Milestone 2	Established quality measure	Annual metrics that are an established quality measure	Claims		
Milestone 2	Established quality measure	Annual metrics that are an established quality measure	Claims		
Milestone 2	Established quality measure	Annual metrics that are an established quality measure	Claims		

Deviations from CMS-provided technical specifications manual or other considerations in approved monitoring protocol	Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI - SED reporting issues tab)	Measurement period (month, quarter, year ^c)
			Year
			Year

Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration reporting denominator	Demonstration reporting numerator or count	Demonstration reporting rate/percentage ^d	Standardized definition of SMI denominator	Standardized definition of SMI numerator or count	Standardized definition of SMI rate/percentage ^d
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Co-occurring physical conditions denominator	Co-occurring physical conditions numerator or count	Co-occurring physical conditions rate/percentage ^d	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count	State-specific subpopulation 1 rate/percentage ^d
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#	Metric name	Metric description
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
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
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
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
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
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 or reporting topic	Metric type	Reporting category	Data source	State will report (Y/N)	Approved monitoring protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b
Milestone 2	CMS-constructed	Other annual metrics	State data on cause of death		
Milestone 2	CMS-constructed	Other annual metrics	State data on cause of death		
Milestone 3	CMS-constructed	Other monthly and quarterly metrics	Claims		
Milestone 3	CMS-constructed	Other monthly and quarterly metrics	Claims	Y	Y
Milestone 3	CMS-constructed	Other monthly and quarterly metrics	Claims		
Milestone 3	CMS-constructed	Other monthly and quarterly metrics	Claims		

Deviations from CMS-provided technical specifications manual or other considerations in approved monitoring protocol	Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI - SED reporting issues tab)	Measurement period (month, quarter, year ^c)
			Year
			Year
			Month 1
			Month 2
			Month 3
None	Version 3.0	N	Month 1
			Month 2
			Month 3
			Month 1
			Month 2
			Month 3
			Month 1
			Month 2
			Month 3

Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration reporting denominator	Demonstration reporting numerator or count	Demonstration reporting rate/percentage ^d	Standardized definition of SMI denominator	Standardized definition of SMI numerator or count	Standardized definition of SMI rate/percentage ^d
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07/1/2020-7/31/2020						
		466			126	
08/01/2020-08/31/2020		492			134	
09/01/2020-09/30/2020		507			147	

Transition-age youth (age 16-24) rate/percentage ^d	Adults (age 25-64) denominator	Adults (age 25-64) numerator or count	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
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		326			14	
		350			11	
		344			17	

#	Metric name	Metric description
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
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
19a	Average Length of Stay in IMDs ^d	Average length of stay (ALOS) for beneficiaries with SMI discharged from an inpatient or residential stay in an IMD. Three rates are reported: <hr/> ALOS for all IMDs and populations <hr/> ALOS among short-term stays (less than or equal to 60 days) <hr/> ALOS among long-term stays (greater than 60 days)
19b	Average Length of Stay in IMDs (IMDs receiving FFP only) ^d	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: <hr/> ALOS for all IMDs and populations <hr/> ALOS among short-term stays (less than or equal to 60 days) <hr/> ALOS among long-term stays (greater than 60 days)
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
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 or reporting topic	Metric type	Reporting category	Data source	State will report (Y/N)	Approved monitoring protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b
Milestone 3	CMS-constructed	Other monthly and quarterly metrics	Claims		
Milestone 3	CMS-constructed	Other monthly and quarterly metrics	Claims		
Milestone 3	CMS-constructed	Other annual metrics	Claims State-specific IMD database		
Milestone 3	CMS-constructed	Other annual metrics	Claims State-specific IMD database		
Milestone 3	CMS-constructed	Other annual metrics	Claims		
Milestone 4	CMS-constructed	Other monthly and quarterly metrics	Claims		

Deviations from CMS-provided technical specifications manual or other considerations in approved monitoring protocol	Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI - SED reporting issues tab)	Measurement period (month, quarter, year ^c)
			Month 1
			Month 2
			Month 3
			Month 1
			Month 2
			Month 3
			Year
			Year
			Year
			Month 1
			Month 2

Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration reporting denominator	Demonstration reporting numerator or count	Demonstration reporting rate/percentage ^d	Standardized definition of SMI denominator	Standardized definition of SMI numerator or count	Standardized definition of SMI rate/percentage ^d
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#	Metric name	Metric description
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
23	Diabetes Care for People 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) who had hemoglobin A1c (HbA1c) in poor control (> 9.0%)
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 or 14 days prior to the date of the encounter using an age appropriate standardized depression screening tool, and
25	Screening for Depression and Follow-up Plan: Ages 12 to 17 (CDF-CH)	Percentage of beneficiaries ages 12 to 17 screened for depression on the date of the encounter or 14 days prior to the date of the encounter using an age appropriate standardized depression screening tool, and if positive, a
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
29	Metabolic Monitoring for Children and Adolescents on Antipsychotics	<p>Percentage of children and adolescents ages 1 to 17 who had two or more antipsychotic prescriptions and had metabolic testing. Three rates are reported:</p> <hr/> <p>Percentage of children and adolescents on antipsychotics who received blood glucose testing</p> <hr/> <p>Percentage of children and adolescents on antipsychotics who received cholesterol testing</p> <hr/> <p>Percentage of children and adolescents on antipsychotics who received blood glucose and</p>
30	Follow-Up Care for Adult Medicaid Beneficiaries Who are Newly Prescribed an Antipsychotic Medication	<p>Percentage of new antipsychotic prescriptions for Medicaid beneficiaries who meet the following criteria:</p> <ul style="list-style-type: none"> • age 18 years and older, and • completed a follow-up visit with a provider with prescribing authority within four weeks (28 days) of prescription of an antipsychotic medication

Milestone or reporting topic	Metric type	Reporting category	Data source	State will report (Y/N)	Approved monitoring protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b
Milestone 4	CMS-constructed	Other annual metrics	Claims		
Milestone 4	Established quality measure	Annual metrics that are an established quality measure	Claims Medical records		
Milestone 4	Established quality measure	Annual metrics that are an established quality measure	Claims Medical records		
Milestone 4	Established quality measure	Annual metrics that are an established quality measure	Claims Electronic medical records		
Milestone 4	Established quality measure	Annual metrics that are an established quality measure	Claims		
Milestone 4	Established quality measure	Annual metrics that are an established quality measure	Claims		
Milestone 4	Established quality measure	Annual metrics that are an established quality measure	Claims		

Deviations from CMS-provided technical specifications manual or other considerations in approved monitoring protocol	Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI - SED reporting issues tab)	Measurement period (month, quarter, year ^c)
			Month 3
			Year
			Year
			Year
			Year
			Year
			Year
			Year
			Year
			Year

Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration reporting denominator	Demonstration reporting numerator or count	Demonstration reporting rate/percentage ^d	Standardized definition of SMI denominator	Standardized definition of SMI numerator or count	Standardized definition of SMI rate/percentage ^d
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Co-occurring physical conditions denominator	Co-occurring physical conditions numerator or count	Co-occurring physical conditions rate/percentage ^d	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count	State-specific subpopulation 1 rate/percentage ^d
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#	Metric name	Metric description
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
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
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
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
36	Grievances Related to Services for SMI/SED	Number of grievances filed during the measurement period that are related to services for SMI/SED
37	Appeals Related to Services for SMI/SED	Number of appeals filed during the measurement period that are related to services for SMI/SED
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
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
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
Q1	Inpatient Psychiatric Facilities Connected to HIE	Number of inpatient psychiatric facilities who have connected to the HIE
Q2	Access to additional services using provider/resource directory - connecting primary care to mental health service offerings	Number of providers managed in provider directory

Milestone or reporting topic	Metric type	Reporting category	Data source	State will report (Y/N)	Approved monitoring protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b
Other SMI/SED metrics	CMS-constructed	Other annual metrics	Claims		
Other SMI/SED metrics	CMS-constructed	Other annual metrics	Claims		
Other SMI/SED metrics	CMS-constructed	Other annual metrics	Claims		
Other SMI/SED metrics	CMS-constructed	Other annual metrics	Claims		
Other SMI/SED metrics	CMS-constructed	Grievances and appeals	Administrative records	Y	Y
Other SMI/SED metrics	CMS-constructed	Grievances and appeals	Administrative records	Y	Y
Other SMI/SED metrics	CMS-constructed	Grievances and appeals	Administrative records	Y	Y
Other SMI/SED metrics	CMS-constructed	Other annual metrics	Claims		
Other SMI/SED metrics	CMS-constructed	Other annual metrics	Claims		
Health IT	State-specific	Other annual metrics	HIE Records		
Health IT	State-specific	Other annual metrics	Prepaid Mental Health Plans and Utah Medicaid Integrated Care Plans		

Deviations from CMS-provided technical specifications manual or other considerations in approved monitoring protocol	Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI - SED reporting issues tab)	Measurement period (month, quarter, year ^c)
			Year
			Year
			Year
			Year
			Quarter
			Quarter
			Quarter
			Year
			Year
			Year
			Year
			Year
			Year

Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration reporting denominator	Demonstration reporting numerator or count	Demonstration reporting rate/percentage ^d	Standardized definition of SMI denominator	Standardized definition of SMI numerator or count	Standardized definition of SMI rate/percentage ^d
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Co-occurring physical conditions denominator	Co-occurring physical conditions numerator or count	Co-occurring physical conditions rate/percentage ^d	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count	State-specific subpopulation 1 rate/percentage ^d
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#	Metric name	Metric description
Q3	Individuals Connected to Community-Based Resources	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.
State-specific metrics		
<i>[Insert rows for any additional state-specific metrics by right-clicking on row 90 and selecting "Insert"]</i>		

Milestone or reporting topic	Metric type	Reporting category	Data source	State will report (Y/N)	Approved monitoring protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b
Health IT	State-specific	Other annual metrics	211- United Ways of Utah		

Deviations from CMS-provided technical specifications manual or other considerations in approved monitoring protocol	Technical specifications manual version	Reporting issue (Y/N) (further describe in SMI - SED reporting issues tab)	Measurement period (month, quarter, year ^c)
			Year

Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)	Demonstration reporting denominator	Demonstration reporting numerator or count	Demonstration reporting rate/percentage ^d	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	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	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 count	Dual-eligible (Medicare-Medicaid eligible) rate/percentage ^d	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	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 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	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count	State-specific subpopulation 1 rate/percentage ^d

#	Metric name	Metric description
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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

- ^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
- 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

Milestone or reporting topic	Metric type	Reporting category	Data source	State will report (Y/N)	Approved monitoring protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N) ^b
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