

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

The state should complete this Title Page at the beginning of a demonstration and submit as the title page of all SUD Monitoring Reports. The content of this table should stay consistent over time.

State	<i>State of Utah</i>
Demonstration name	<i>Utah Primary Care Network Demonstration</i>
Approval date for demonstration	<i>11/01/2017</i>
Approval period for SUD	<i>11/01/2017 - 06/30/2022</i>
Approval date for SUD, if different from above	<i>11/09/2017</i>
Implementation date of SUD, if different from above	<i>11/09/2017</i>
SUD (or if broader demonstration, then SUD - related) demonstration goals and objectives	<i>The SUD demonstration goals and objectives are to provide a broad continuum of care to Utah’s Medicaid beneficiaries who have a SUD, which will improve the quality, care and health outcomes for all Utah Medicaid state plan beneficiaries and Targeted Adults in the demonstration. The SUD program will contribute to a comprehensive statewide strategy to combat prescription drug abuse and opioid use disorders, and will expand the SUD benefits package to cover short-term residential services to all Medicaid enrollees.</i>

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 or less.

Key achievements:

A key achievement and major benefit from this waiver has been increased access to treatment through an increase in treatment providers and treatment facilities. Due to the increase in new treatment providers and established providers increasing their program size, beneficiaries are able to access treatment quickly and with more options.

Highlights:

Throughout the demonstration period one of the most notable highlights has been the increase in access to treatment beds and the increased ability for beneficiaries to access treatment services. Due to the increase in access to treatment services, beneficiaries are experiencing shorter wait times to receive treatment and are able to access the needed benefits and services in a timelier manner.

The Utah Division of Substance Abuse and Mental Health has also provided trainings and seminars for all providers on ASAM Guidelines, Levels of Care, and Treatment Planning. They have also hosted trainings on Motivation Interviewing, a treatment modality used in the field of addiction.

Issues:

The increase in access has also created an increase in demand. For a period, access to treatment was same day; however, because of the increase in demand some providers have struggled to keep up and wait times have increased.

In the next reporting period the state will report on trends from the start of the demonstration to the current reporting period. At that time, trends and significant changes should be more notable.

Risks:

None

Key changes:

The prior authorization process continues to be refined to ensure proper utilization of the services. The COVID-19 pandemic required changing some prior authorization timelines in order to accommodate provider needs during this time.

Unexpected changes:

As noted, COVID-19 has required changing some prior authorization timelines in order to accommodate provider needs due to changes in staffing and the need to maintain a safe environment for residents.

3. Narrative Information on Implementation, by Milestone and Reporting Topic

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
1.2 Assessment of Need and Qualification for SUD Services			
1.2.1 Metric Trends			
<input type="checkbox"/> 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.			
<input checked="" type="checkbox"/> The state has no metrics trends to report for this reporting topic.			
1.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) The target population(s) of the demonstration <input type="checkbox"/> ii) The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to assessment of need and qualification for SUD services			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
2.2 Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)			
2.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1			
<input checked="" type="checkbox"/> The state has no metrics trends to report for this reporting topic.			

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2.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> 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) <input type="checkbox"/> 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 individuals in IMDs 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic. The State continues to utilize the American Society of Addiction Medicine (ASAM) levels of care in the authorization of services for individuals in ASAM levels of care 3.1, 3.3, 3.5, and 3.7 on a per diem basis and for residential programs with 17 or more beds. The Utah provider manual, “Rehabilitative Mental Health and Substance Use Disorder Services” has been updated to reflect the changes to coverage for these levels of care as well as provide Prior Authorization requirements for providers of these services. MMIS system modifications have been completed and trainings on ASAM assessment, treatment planning, and motivational interviewing have been provided several times to providers since the implementation of the waiver amendment by the Utah Division of Substance Abuse and Mental Health.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 1			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
3.2 Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)			
3.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2			
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
<input type="checkbox"/> The state is not reporting metrics related to Milestone 2.			
3.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) Planned activities to improve providers’ use of evidence-based, SUD-specific placement criteria <input type="checkbox"/> 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 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic. Since 2017 the Division of Substance Abuse and Mental Health provided training on ASAM treatment planning and placement criteria as well as Motivational Interviewing to providers throughout the state. Utah Medicaid established policy for the prior authorization of treatment at ASAM treatment levels 3.1, 3.3, 3.5, and 3.7 in 2018. This policy was released in the January 2018 Medicaid Information Bulletin and included guidance for members enrolled in a Pre-paid Mental Health Plan and traditional Fee-for-Service members. Contracts with the Pre-paid Mental Health Plans have been clarified to include the use of ASAM for placement criteria and the utilization review process.			

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<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 2			
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state is not reporting metrics related to Milestone 2.			
4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)			
4.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3			
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
<input type="checkbox"/> The state is not reporting metrics related to Milestone 3.			
4.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards <input type="checkbox"/> ii) State review process for residential treatment providers' compliance with qualifications standards <input type="checkbox"/> iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site 			

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<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic. The Utah Division of Substance Abuse and Mental Health (DSAMH) has provided ongoing ASAM Criteria training to treatment providers in Utah through a contract with the Change Company. Training is offered four times per year and will continue for the next five years. DSAMH also met with ASAM to discuss participation in the ASAM accreditation pilot. DSAMH has worked with the Utah Department of Human Services Office of Licensing (OL) to update and revise administrative rules for substance use disorder treatment programs. This year, DSAMH and the OL will work to incorporate the principles consistent with ASAM Criteria into administrative rules governing residential treatment programs.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 3			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state is not reporting metrics related to Milestone 3.			
5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)			
5.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4			
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
5.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> Planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients in across the continuum of SUD care 	DSAMH has contracted with Juvare, LLC to implement a bed registry tracking platform with the funding awarded to DSAMH through a TTI grant. The platform will allow behavioral health professionals to search for available treatment spots through a filtered search tool. The Juvare, LLC contract was executed June, 2020. The bed registry project will kick-off on August 5th 2020. Initially it will be utilized for mental health hospitalization beds and then will be rolled out to other areas of our behavioral health system. DSAMH is also looking at public-face utilization of the platform for a later date.		
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 4			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
6.2 Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)			
6.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5			
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
6.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <input type="checkbox"/> i) Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD <input type="checkbox"/> ii) Expansion of coverage for and access to naloxone	All needed changes for this milestone were completed in July 2018.		
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 5			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
7.2 Improved Care Coordination and Transitions between Levels of Care (Milestone 6)			
7.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6			
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

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7.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <input type="checkbox"/> Implementation of policies supporting beneficiaries’ transition from residential and inpatient facilities to community-based services and supports	All needed changes for this milestone were completed by July 2018.		
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 6			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
8.2 SUD Health Information Technology (Health IT)			
8.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its Health IT metrics			
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

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8.2.2 Implementation Update			
<p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> i) How health IT is being used to slow down the rate of growth of individuals identified with SUD <input type="checkbox"/> ii) How health IT is being used to treat effectively individuals identified with SUD <input type="checkbox"/> iii) How health IT is being used to effectively monitor “recovery” supports and services for individuals identified with SUD <input type="checkbox"/> iv) 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 <input type="checkbox"/> v) Other aspects of the state’s health IT implementation milestones <input type="checkbox"/> vi) The timeline for achieving health IT implementation milestones <input type="checkbox"/> vii) Planned activities to increase use and functionality of the state’s prescription drug monitoring program 	<p>The State is currently working with Intermountain Health Care (IHC) to add an additional 4500 providers to EHR. This should be completed by the end of 2020. The State is also in negotiations to sign contracts with three additional providers.</p> <p>Progress on other health IT tasks continues. However, completion of these tasks have been extended due to key staff leaving, and the need to hire and train new staff. In addition, COVID has affected some tasks. For example, academic detailing of controlled substance providers has slowed due to COVID because it is now being done over the phone. Staff receive monthly reports of up to 30 providers per month, but not all providers may choose to participate.</p>		
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Health IT			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
9.2 Other SUD-Related Metrics			
9.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics			
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
9.2.2 Implementation Update			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to other SUD-related metrics			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
10.2 Budget Neutrality			
10.2.1 Current status and analysis			
<input checked="" type="checkbox"/> 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.	The State is working with CMS to update the budget neutrality workbook. Once this is completed, the State will complete the analysis.		
10.2.2 Implementation Update			
<input type="checkbox"/> The state expects to make other program changes that may affect budget neutrality			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

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11.1 SUD-Related Demonstration Operations and Policy			
11.1.1 Considerations			
<input checked="" type="checkbox"/> States 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.	COVID-19 has impacted many parts of Utah’s Medicaid program. Some of the impacts have been not disenrolling or reducing any benefit for beneficiaries, changes to some prior authorization policy timelines discussed in the above section, quarantining beneficiaries before entering residential SUD treatment, and moving to telehealth for many outpatient SUD treatment services.		
<input type="checkbox"/> The state has no related considerations to report for this reporting topic.			
11.1.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) How the delivery system operates under the demonstration (e.g. through the managed care system or fee for service) <input checked="" type="checkbox"/> ii) Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes) <input type="checkbox"/> iii) Partners involved in service delivery 	In January 2020, Utah Medicaid began enrolling beneficiaries in integrated managed care plans known as Utah Medicaid Integrated Care (UMIC) plans. These plans cover both physical health and behavioral health services. These plans are responsible for managing care for some beneficiaries receiving substance use disorder services in outpatient and residential treatment programs. Beneficiaries enrolled with UMIC plans receive the same benefits as beneficiaries in other managed care plans but through an integrated system.		
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			

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<input type="checkbox"/> 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			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state is working on other initiatives related to SUD or OUD			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The initiatives described above are related to the SUD or OUD demonstration (States should note similarities and differences from the SUD demonstration)			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
12. SUD Demonstration Evaluation Update			
12.1. Narrative Information			
<input checked="" type="checkbox"/> 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. See report template instructions for more details.	The State is currently working with its third party evaluator on completing the SUD Mid-Point Assessment, which will be submitted to CMS in November 2020. The third party evaluator will then begin completing the evaluation to be submitted with the demonstration renewal due June 2021.		
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			

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<input checked="" type="checkbox"/> 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.	See response above. There are no anticipated barriers to achieving the evaluation goals and timeframes.		
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			
<input checked="" type="checkbox"/> List anticipated evaluation-related deliverables related to this demonstration and their due dates.	Mid-Point Assessment- Due 11/30/20 SUD Evaluation Report for Evaluation Renewal- Due June 30, 2021		
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			
13.1 Other Demonstration Reporting			
13.1.1 General Reporting Requirements			
<input type="checkbox"/> The state reports changes in its implementation of the demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol			
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.			
<input type="checkbox"/> The state anticipates the need to make future changes to the STCs, implementation plan, or monitoring protocol, based on expected or upcoming implementation changes			
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.			

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Compared to the demonstration design and operational details, the state expects to make the following changes to: <input type="checkbox"/> i) The schedule for completing and submitting monitoring reports <input type="checkbox"/> ii) The content or completeness of submitted reports and/or future reports			
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.			
<input type="checkbox"/> The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation			
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.			
13.1.2 Post-Award Public Forum			
<input type="checkbox"/> 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.			
<input checked="" type="checkbox"/> No post-award public forum was held during this reporting period and this is not an annual report, so the state has no post-award public forum update to report for this topic.			

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14.1 Notable State Achievements and/or Innovations			
14.1 Narrative Information			
<input checked="" type="checkbox"/> 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.	For this reporting period, a monthly average of 17,088 beneficiaries had a SUD diagnosis. A monthly average of 7,080 received some form of SUD treatment. Monthly averages were also calculated for medication assisted treatment (2,099), and residential or inpatient services (1,156). Approximately 40% of beneficiaries received some form of SUD treatment for their disorder.		
<input type="checkbox"/> The state has no notable achievements or innovations to report for this reporting topic.			

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

The IET-AD, FUA-AD, FUM-AD, and AAP measures (metrics #15, 17 (1), and 17 (2), and 32) are Healthcare Effectiveness Data and Information Set (“HEDIS®”) measures that are owned and copyrighted by the National Committee for Quality Assurance (“NCQA”). NCQA makes no representations, warranties, or endorsement about the quality of any organization or physician that uses or reports performance measures and NCQA has no liability to anyone who relies on such measures or specifications.

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