

#	Metric name
<i>EXAMPLE: 1 (Do not delete or edit this row)</i>	<i>EXAMPLE: Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i>

1	Assessed for SUD Treatment Needs Using a Standardized Screening Tool
2	Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis
3	Medicaid Beneficiaries with SUD Diagnosis (monthly)
4	Medicaid Beneficiaries with SUD Diagnosis (annually)
5	Medicaid Beneficiaries Treated in an IMD for SUD
6	Any SUD Treatment
7	Early Intervention
8	Outpatient Services

9	Intensive Outpatient and Partial Hospitalization Services
10	Residential and Inpatient Services
11	Withdrawal Management
12	Medication-Assisted Treatment (MAT)
13	SUD Provider Availability
14	SUD Provider Availability - MAT
15	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)  [NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>f</sup>

- |       |  |
|-------|--|
| 16    | SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge,<br>SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge<br>[Joint Commission] |
| 17(1) | Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD)<br>[NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>c,d</sup>    |
| 17(2) | Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)<br>[NCQA; NQF #3489; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>c,e</sup>                      |
| 18    | Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)<br>[PQA, NQF #2940; Medicaid Adult Core Set]  |
| 19    | Use of Opioids from Multiple Providers in Persons Without Cancer (OMP)<br>[PQA; NQF #2950]   |

20	Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]
21	Concurrent Use of Opioids and Benzodiazepines (COB-AD) [PQA, NQF #3389; Medicaid Adult Core Set]
22	Continuity of Pharmacotherapy for Opioid Use Disorder [USC; NQF #3175]
23	Emergency Department Utilization for SUD per 1,000 Medicaid Beneficiaries
24	Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries
25	Readmissions Among Beneficiaries with SUD
26	Overdose Deaths (count)
27	Overdose Deaths (rate)
28	SUD Spending
29	SUD Spending within IMDs
30	Per Capita SUD Spending
31	Per Capita SUD Spending within IMDs
32	Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] <sup>c</sup>
33	Grievances Related to SUD Treatment Services
34	Appeals Related to SUD Treatment Services
35	Critical Incidents Related to SUD Treatment Services
36	Average Length of Stay in IMDs

Q1	<i>Project ECHO - OPIOID, ADDICTION, &amp; PAIN ECHO</i>
Q2	<i>Online Provider Directories</i>
Q3	<i>MAT Continuity Models</i>

### State-specific metrics

Note: Licensee and states must prominently display the following Measures IET-AD, FUA-AD, FUM-AD, and AAP [Metrics #12]. Information Set (HEDIS®) measures that are owned and copy HEDIS measures and specifications are not clinical guidelines for all potential applications. The measures and specification representations, warranties or endorsements about the quality otherwise identified as meeting the requirements of a HEDIS measure, warranties, or endorsement about the quality of any organization has no liability to anyone who relies on HEDIS measures or specifications.

The measure specification methodology used by CMS is different from measure specifications but has granted CMS permission to adjust rates for measures that have not been certified via NCQA's Measure Certification. Until it is audited and designated reportable, such measure rates shall be designated or referred to as

<sup>a</sup> Report metrics that are one annual value for a demonstration year.

<sup>b</sup> Enter any state-specific subpopulations that will be reported as a percentage of the total population.

<sup>c</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS measures.

<sup>d</sup> Rates 1 and 2 reported for Metric #17(1) correspond to rates 1 and 2 reported for Metric #17(2) in the 1115 Substance Use Disorder Demonstrations: Technical Specifications.

<sup>e</sup> Rates 1 and 2 reported for Metric #17(2) correspond to rates 1 and 2 reported for Metric #17(1) in the 1115 Substance Use Disorder Demonstrations: Technical Specifications.

#### Checks:

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) should be reported as a percentage of the total population.

## Metric description

**EXAMPLE:**

*Number of beneficiaries screened for SUD treatment needs using a standardized screening tool during the measurement*

Number of beneficiaries screened for SUD treatment needs using a standardized screening tool during the measurement period

Number of beneficiaries who receive MAT or a SUD-related treatment service with an associated SUD diagnosis during the measurement period but not in the three months before the measurement period

Number of beneficiaries who receive MAT or a SUD-related treatment service with an associated SUD diagnosis during the measurement period and/or in the 11 months before the measurement period

Number of beneficiaries who receive MAT or a SUD-related treatment service with an associated SUD diagnosis during the measurement period and/or in the 12 months before the measurement period

Number of beneficiaries with a claim for residential or inpatient treatment for SUD in IMDs during the measurement period.  
Number of beneficiaries enrolled in the measurement period receiving any SUD treatment service, facility claim, or pharmacy claim during the measurement period

Number of beneficiaries who used early intervention services (such as procedure codes associated with SBIRT) during the measurement period

Number of beneficiaries who used outpatient services for SUD (such as outpatient recovery or motivational enhancement therapies, step down care, and monitoring for stable patients) during the measurement period

Number of beneficiaries who used intensive outpatient and/or partial hospitalization services for SUD (such as specialized outpatient SUD therapy or other clinical services) during the measurement period

Number of beneficiaries who use residential and/or inpatient services for SUD during the measurement period

Number of beneficiaries who use withdrawal management services (such as outpatient, inpatient, or residential) during the measurement period

Number of beneficiaries who have a claim for MAT for SUD during the measurement period

The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period

The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period and who meet the standards to provide buprenorphine or methadone as part of MAT

Percentage of beneficiaries age 18 and older with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following:

- Initiation of AOD Treatment—percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis
- Engagement of AOD Treatment—percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit

The following diagnosis cohorts are reported for each rate: (1) Alcohol abuse or dependence, (2) Opioid abuse or dependence, (3) Other drug abuse or dependence, and (4) Total AOD abuse or dependence. A total of 8 separate rates are reported for this measure.

- Initiation of AOD Treatment - Alcohol abuse or dependence
- Initiation of AOD Treatment - Opioid abuse or dependence
- Initiation of AOD Treatment - Other drug abuse or dependence
  
- Initiation of AOD Treatment - Total AOD abuse or dependence

- Engagement of AOD Treatment - Alcohol abuse or dependence
- Engagement of AOD Treatment - Opioid abuse or dependence
- Engagement of AOD Treatment - Other drug abuse or dependence
- Engagement of AOD Treatment - Total AOD abuse of dependence

**SUB-3:** Patients who are identified with alcohol or drug use disorder who receive or refuse at discharge a prescription for FDA-approved medications for alcohol or drug use disorder, OR who receive or refuse a referral for addictions treatment.

**SUB-3a:** Patients who are identified with alcohol or drug disorder who receive a prescription for FDA-approved medications for alcohol or drug use disorder OR a referral for addictions treatment. Percentage of ED visits for beneficiaries age 18 and older with a principal diagnosis of AOD abuse or dependence who had a follow-up visit for AOD abuse or dependence. Two rates are reported:

- Percentage of ED visits for which the beneficiary received follow-up within 30 days of the ED visit (31 total days).
- Percentage of ED visits for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).

Percentage of ED visits for beneficiaries age 18 and older with a principal 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 (31 total days)
- Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).

Percentage of beneficiaries age 18 and older who received prescriptions for opioids with an average daily dosage greater than or equal to 90 morphine milligram equivalents (MME) over a period of 90 days or more. Beneficiaries with a cancer diagnosis, sickle cell disease diagnosis, or in hospice are excluded.

The percentage of individuals  $\geq 18$  years of age who received prescriptions for opioids from  $\geq 4$  prescribers AND  $\geq 4$  pharmacies within  $\leq 180$  days.



The percentage of individuals  $\geq 18$  years of age who received prescriptions for opioids with an average daily dosage of  $\geq 90$  morphine milligram equivalents (MME) AND who received prescriptions for opioids from  $\geq 4$  prescribers AND  $\geq 4$  pharmacies. Percentage of beneficiaries age 18 and older with concurrent use of prescription opioids and benzodiazepines. Beneficiaries with a cancer diagnosis, sickle cell disease diagnosis, or in hospice are excluded.

Percentage of adults 18 years of age and older with pharmacotherapy for OUD who have at least 180 days of continuous treatment

Total number of ED visits for SUD per 1,000 beneficiaries in the measurement period

Total number of inpatient stays per 1,000 beneficiaries in the measurement period

The rate of all-cause readmissions during the measurement period among beneficiaries with SUD.

Number of overdose deaths during the measurement period among Medicaid beneficiaries living in a geographic area covered by the demonstration. The state is encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid).

Rate of overdose deaths during the measurement period among adult Medicaid beneficiaries living in a geographic area covered by the demonstration. The state is encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid).

Total Medicaid SUD spending during the measurement period.

Total Medicaid SUD spending on inpatient/residential treatment within IMDs during the measurement period.

Per capita SUD spending during the measurement period

Per capita SUD spending within IMDs during the measurement period

The percentage of Medicaid beneficiaries with SUD who had an ambulatory or preventive care visit during the measurement period.

Number of grievances filed during the measurement period that are related to SUD treatment services

Number of appeals filed during the measurement period that are related to SUD treatment services

Number of critical incidents filed during the measurement period that are related to SUD treatment services

The average length of stay for beneficiaries discharged from IMD inpatient/residential treatment for SUD.

*Utah will work with the University of Utah's Project ECHO program on Opioid, Addiction & Pain sessions. Utah will contact all Medicaid Prepaid Mental Health Plans (PMHP) will be required to implement online provider directories, updating annually to ensure that contact Utah will track MAT continuity with and without behavioral counseling therapy. Utah will identify high and low performing*

ing notice on any display of Measure rates:

*5, 17(1), 17(2), and 32] are Healthcare Effectiveness Data and righted by the National Committee for Quality Assurance (NCQA). s, do not establish a standard of medical care and have not been tested s are provided "as is" without warranty of any kind. NCQA makes no of any product, test or protocol identified as numerator compliant or measure or specification. NCQA makes no representations, ion or clinician who uses or reports performance measures and NCQA pecifications or data reflective of performance under such measures*

*ent from NCQA's methodology. NCQA has not validated the adjusted just. A calculated measure result (a "rate") from a HEDIS measure Program, and is based on adjusted HEDIS specifications, may not be rtable by an NCQA-Certified HEDIS Compliance Auditor. Until such "Adjusted, Uncertified, Unaudited HEDIS rates."*

year only in the report specified in the reporting schedule

after column AU; create new columns as needed

rates

2 and 3 for Metric #17 from Version 1.1 of the the Medicaid Section ifications for Monitoring Metrics

1 and 2 for Metric #17 from Version 1.1 of the the Medicaid Section ifications for Monitoring Metrics

d sum approximately to counts for the overall demonstration

Milestone or reporting topic	Reporting category	Metric type
<i>EXAMPLE:</i> <i>Assessment of need and qualification for SUD treatment services</i>	<i>EXAMPLE:</i> <i>Other monthly and quarterly metrics</i>	<i>EXAMPLE:</i> <i>CMS-constructed</i>
Assessment of need and qualification for SUD treatment services	Other monthly and quarterly metrics	CMS-constructed
Assessment of need and qualification for SUD treatment services	Other monthly and quarterly metrics	CMS-constructed
Assessment of need and qualification for SUD treatment services	Other monthly and quarterly metrics	CMS-constructed
Assessment of need and qualification for SUD treatment services	Other annual metrics	CMS-constructed
Milestone 2	Other annual metrics	CMS-constructed
Milestone 1	Other monthly and quarterly metrics	CMS-constructed
Milestone 1	Other monthly and quarterly metrics	CMS-constructed
Milestone 1	Other monthly and quarterly metrics	CMS-constructed

Milestone 1	Other monthly and quarterly metrics	CMS-constructed
Milestone 1	Other monthly and quarterly metrics	CMS-constructed
Milestone 1	Other monthly and quarterly metrics	CMS-constructed
Milestone 1	Other monthly and quarterly metrics	CMS-constructed
Milestone 4	Other annual metrics	CMS-constructed
Milestone 4	Other annual metrics	CMS-constructed
Milestone 6	Annual metrics that are established quality measures	Established quality measure

Milestone 6

Annual metrics that are established quality measures

Established quality measure

Milestone 6

Annual metrics that are established quality measures

Established quality measure

Milestone 6

Annual metrics that are established quality measures

Established quality measure

Milestone 5

Annual metrics that are established quality measures

Established quality measure

Milestone 5

Annual metrics that are established quality measures

Established quality measure

Milestone 5	Annual metrics that are established quality measures	Established quality measure
Milestone 5	Annual metrics that are established quality measures	Established quality measure
Milestone 1	Annual metrics that are established quality measures	Established quality measure
Milestone 5	Other monthly and quarterly metrics	CMS-constructed
Other SUD-related metrics	Other monthly and quarterly metrics	CMS-constructed
Milestone 6	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed
Milestone 5	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed
Other SUD-related metrics	Annual metrics that are established quality measures	Established quality measure
Other SUD-related metrics	Grievances and appeals	CMS-constructed
Other SUD-related metrics	Grievances and appeals	CMS-constructed
Other SUD-related metrics	Grievances and appeals	CMS-constructed
Milestone 2	Other annual metrics	CMS-constructed

Health IT

*Other annual metrics*

State-specific

Health IT

*Other annual metrics*

State-specific

Health IT

*Other annual metrics*

State-specific



Data source	State will report (Y/N)	Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N)
<i>EXAMPLE: Medical record review or claims</i>	<i>EXAMPLE (automatically populated):</i>	<i>EXAMPLE (automatically populated):</i>
Medical record review or claims	N	N
Claims		
Claims	N	N
Claims	Y	Y
Claims	Y	Y
Claims	Y	Y
Claims		
Claims	Y	Y
Claims		



Claims	Y	Y
Claims	Y	Y
Claims	Y	Y
Claims	Y	Y
Provider enrollment database; Claims Provider enrollment database, SAMHSA datasets	Y	Y
Claims	Y	N

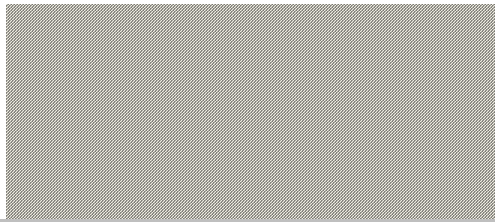
Medical record review or claims	Y	Y
Claims	N	N
Claims	Y	Y
Claims	Y	Y
Claims	Y	Y
	N	N

Claims		
	N	N
Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
State data on cause of death		
	Y	Y
State data on cause of death		
	Y	Y
Claims	Y	Y
Claims	N	N
Claims	N	N
Claims	N	N
Claims	N	N
Claims		
	Y	Y
Administrative records		
	N	N
Administrative records		
	N	N
Administrative records		
	N	N
Claims; State-specific IMD database	Y	Y

*Administrative records* Y

*Administrative records* Y

*Administrative records* Y



<b>Deviations from CMS-provided technical specifications manual in approved protocol</b>	<b>Technical specifications manual version</b>
<i>EXAMPLE (automatically populated): The Department will use state-defined procedure codes (list specific codes)</i>	<i>EXAMPLE: Version 3.0</i>


Utah will use claims data where MAT is dispensed for a list of Medica:

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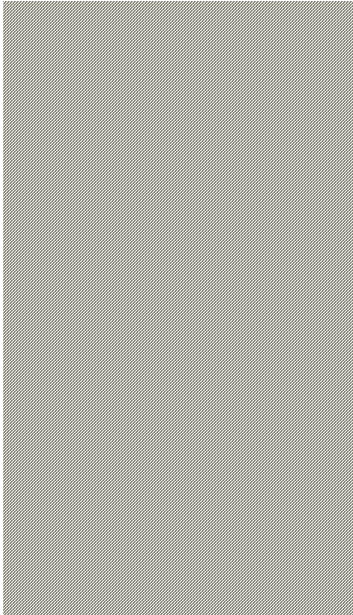




Reporting issue (Y/N) (further describe in SUD reporting issues tab)	Measurement period (month, quarter, year <sup>a</sup> )	Dates covered by measurement period (MM/DD/YYYY- MM/DD/YYYY)
<i>EXAMPLE:</i> Y	<i>EXAMPLE:</i> Month 1	<i>EXAMPLE:</i> 07/01/2018-7/31/2018
	<i>EXAMPLE:</i> Month 2	<i>EXAMPLE:</i> 08/01/2018-08/31/2018
	<i>EXAMPLE:</i> Month 3	<i>EXAMPLE:</i> 09/01/2018-09/30/2018
	Month 1	
	Month 2	
	Month 3	
	Month 1	
	Month 2	
	Month 3	
	Month 1	4/1/2022-4/30/2022
	Month 2	5/1/2022-5/31/2022
	Month 3	6/1/2022-6/30/2022
	Year	7/1/2021-6/30/2022
	Year	7/1/2021-6/30/2022
	Year	7/1/2021-6/30/2022
	Month 1	4/1/2022-4/30/2022
	Month 2	5/1/2022-5/31/2022
	Month 3	6/1/2022-6/30/2022
	Month 1	4/1/2022-4/30/2022
	Month 2	5/1/2022-5/31/2022
	Month 3	6/1/2022-6/30/2022
	Month 1	4/1/2022-4/30/2022
	Month 2	5/1/2022-5/31/2022

	Month 3	6/1/2022-6/30/2022
	Month 1	
	Month 2	4/1/2022-4/30/2022
	Month 3	5/1/2022-5/31/2022
	Month 1	6/1/2022-6/30/2022
	Month 1	4/1/2022-4/30/2022
	Month 2	5/1/2022-5/31/2022
	Month 3	6/1/2022-6/30/2022
	Month 1	4/1/2022-4/30/2022
	Month 2	5/1/2022-5/31/2022
	Month 3	6/1/2022-6/30/2022
	Month 1	4/1/2022-4/30/2022
	Month 2	5/1/2022-5/31/2022
	Month 3	6/1/2022-6/30/2022
	Year	7/1/2021-6/30/2022
	Year	

id prescribers of MAT. We believe this is an eff

	Year	7/1/2021-6/30/2022
	Year	
	Year	01/01/2021-12/31/2021
	Year	01/01/2021-12/31/2021
	Year	01/01/2021-12/31/2021
	Year	01/01/2021-12/31/2021

		01/01/2021-12/31/2021
		01/01/2021-12/31/2021
		01/01/2021-12/31/2021
		01/01/2021-12/31/2021
	Year	
	Year	
		01/01/2021-12/31/2021
		01/01/2021-12/31/2021
	Year	
		01/01/2021-12/31/2021
		01/01/2021-12/31/2021
	Year	
		01/01/2021-12/31/2021
	Year	

	Year	
	Year	
	Year	01/01/2021-12/31/2021
	Year	01/01/2020-12/31/2021
	Month 1	4/1/2022-4/30/2022
	Month 2	5/1/2022-5/31/2022
	Month 3	6/1/2022-6/30/2022
	Month 1	4/1/2022-4/30/2022
	Month 2	5/1/2022-5/31/2022
	Month 3	6/1/2022-6/30/2022
	Year	7/1/2021-6/30/2022
	Year	
	Year	7/1/2021-6/30/2022
	Year	
	Year	7/1/2021-6/30/2022
	Year	
	Year	
	Year	
	Year	
	Year	
	Year	
	Year	01/01/2021-12/31/2021
	Quarter	
	Quarter	
	Quarter	
	Year	

Y

Year

Year

01/01/2021-12/31/2021

Year

Y



Demonstration			
Demonstration denominator	Demonstration numerator or count	Demonstration rate/percentage	Age < 18 denominator
	<i>EXAMPLE: 100</i>		
	<i>EXAMPLE: 100</i>		
	<i>EXAMPLE: 100</i>		
	28407		
	28485		
	28446		
	39083		
	2771		
	11503		
	11704		
	11902		
	7123		
	7299		
	7307		
	6906		
	7116		

6963  
125

120  
126  
1039

1365  
1306  
414

444  
436  
6039

5626  
6393  
736

85

4727	1910	40.40617728
4577	2411	52.67642561
6880	2734	39.73837209
14436	6097	42.23469105



4727	537	11.36027078
4577	1097	23.96766441
6880	854	12.4127907
14436	2246	15.55832641

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23035	7318	31.7690471
23035	4560	19.79596267

14948	6240	41.74471501
14948	3944	26.38480064
7325	511	6.976109215

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8834 1759 19.91170478

8845 2180 24.64669305

449177 1500 3.3394408 219001

452671 1615 3.567712533 220061

456174 1565 3.430708458 221290

449177 721 1.605157878 219001

452671 754 1.665668885 220061

456174 731 1.602458711 221290

9031 1581 0.17506367

302

484156 302 0.623765894

26901 23613 87.77740604

18786 771888 41.08847014

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41.08847014

11

11

100%



Age < 18		Age 18-64	
Age < 18 numerator or count	Age <18 rate/percentage	Age 18-64 denominator	Age 18-64 numerator or count
<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
<i>EXAMPLE:</i>			<i>EXAMPLE:</i>

709

27046

718

27123

719

27084

191

11171

206

11353

184

11571

126

6898

118

7054

118

7066

129

6672

144

6878

119  
0



6750  
124

0  
0  
19

120  
125  
1012

16  
17  
0

1340  
1279  
408

1  
0  
23

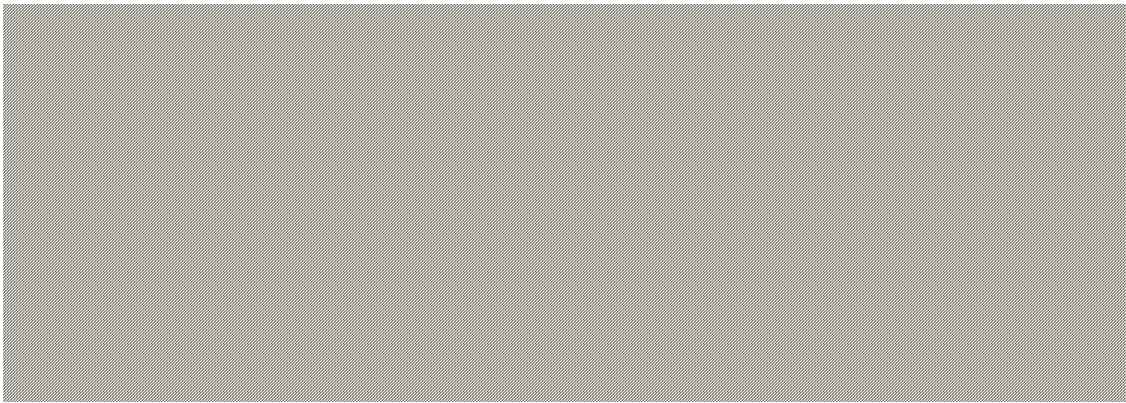
436  
429  
6001

15  
23

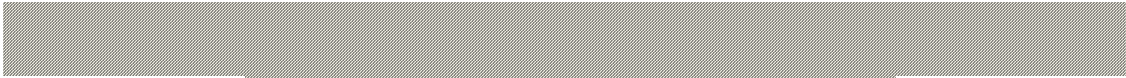
5592  
6347







20	0.091323784	212651	1445
34	0.154502615	214944	1541
26	0.117492883	217085	1500
3	0.013698568	212651	695
7	0.031809362	214944	712
6	0.027113742	217085	690



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Age 18-64 rate/percentage	Age 65+		
	Age 65+ denominator	Age 65+ numerator or count	Age 65+ rate/percentage
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		652	
		644	
		643	
		141	
		145	
		147	
		99	
		127	
		123	
		105	
		94	

94

1

0

1

8

9

10

6

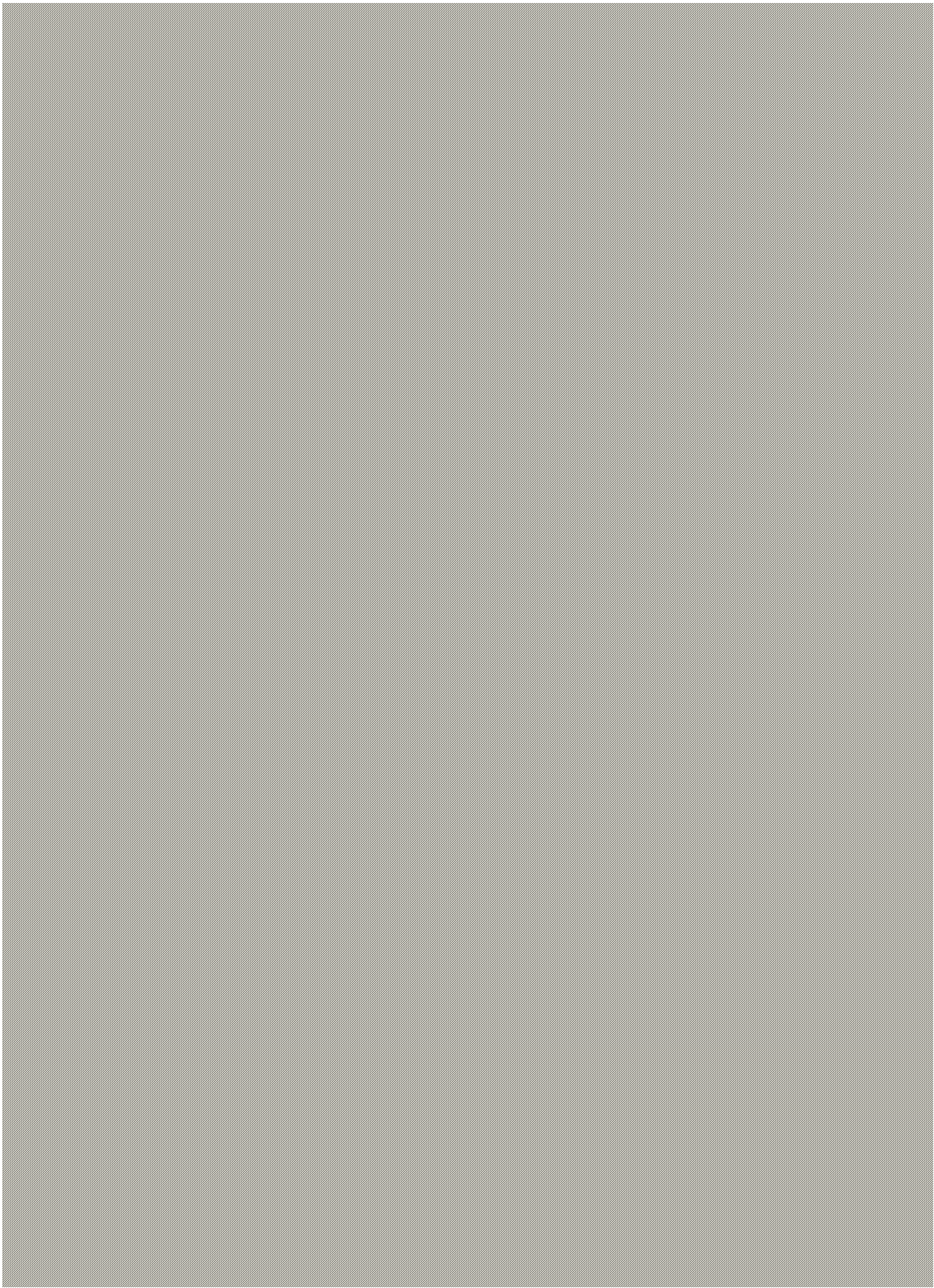
7

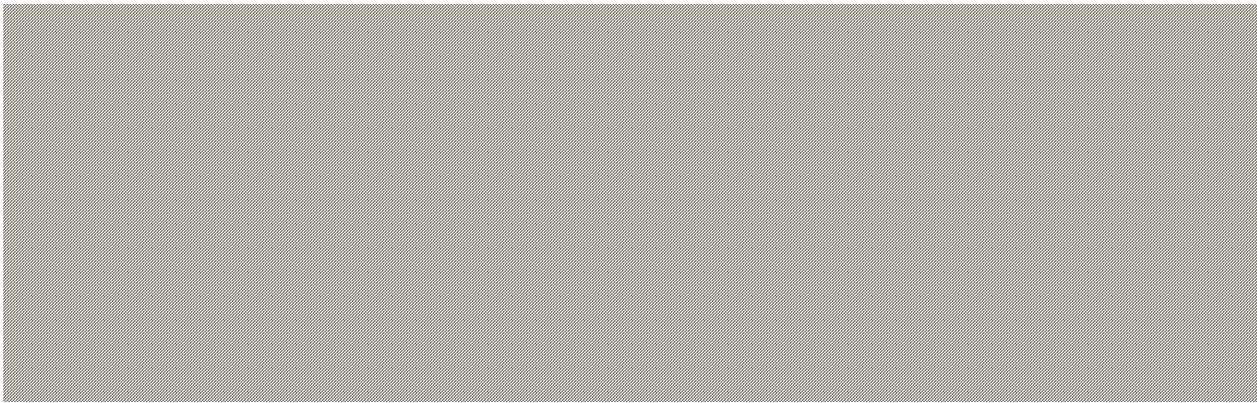
7

15

19

23





6.795171431	17525	35	1.997146933
7.169309215	17666	40	2.264236386
6.909735818	17799	39	2.191134333
3.268265844	17525	23	1.312410842
3.312490695	17666	35	1.981206838
3.178478476	17799	35	1.966402607



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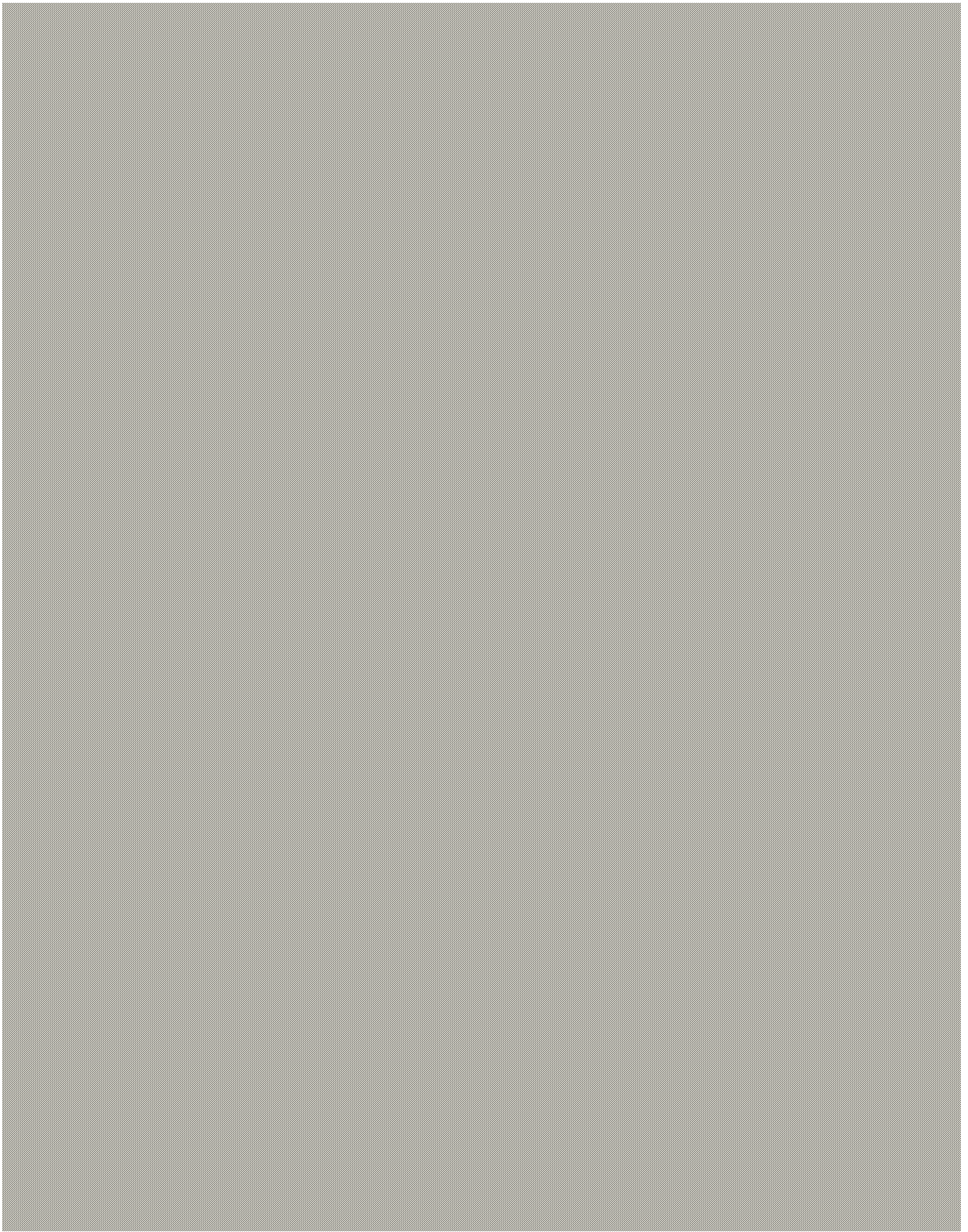




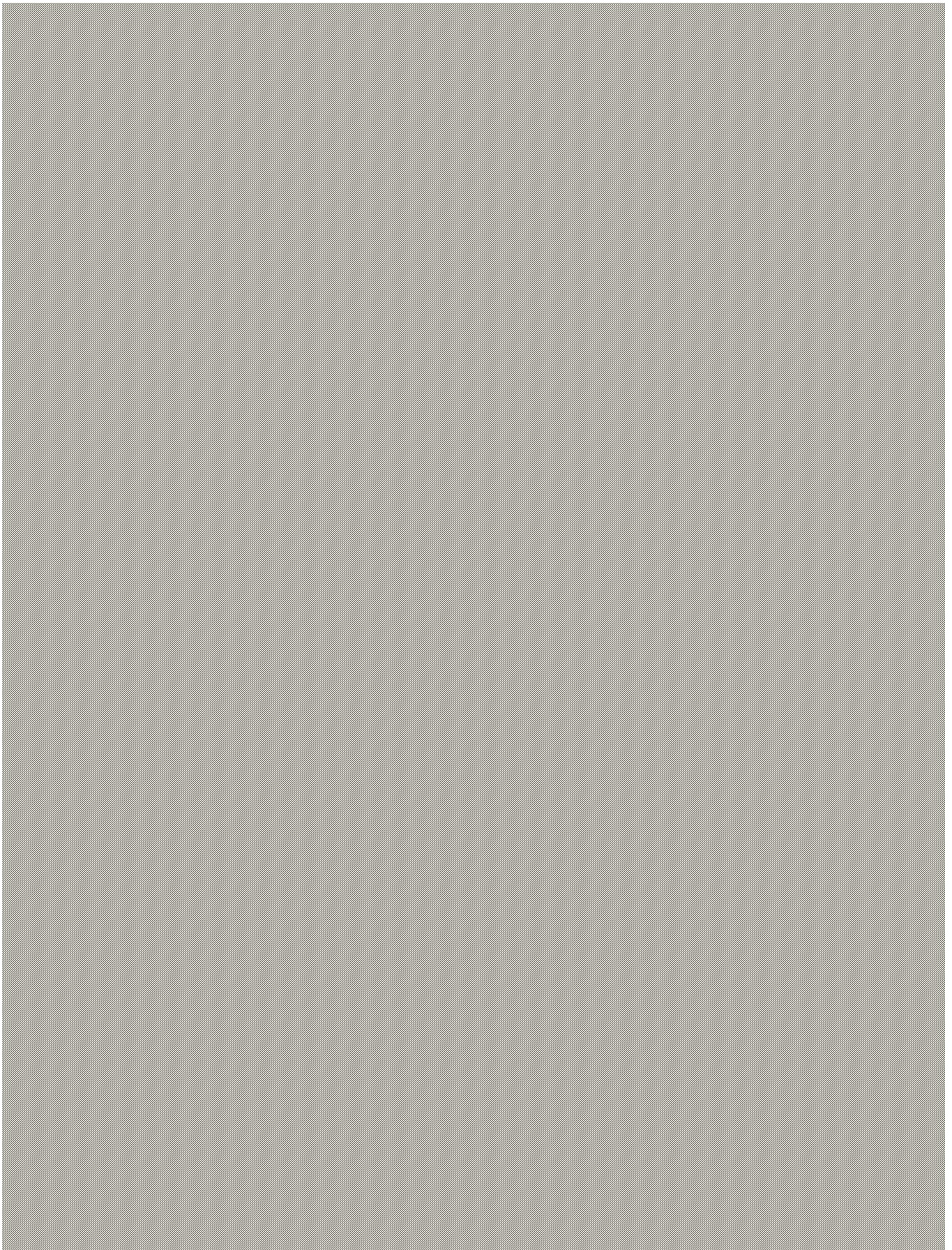
Dual eligible (Medicare-Medicaid eligible) Dual eligible (Medicare-Medicaid eligible) denominator	Dual eligible (Medicare-Medicaid eligible) numerator or count	Dual eligible (Medicare-Medicaid eligible) rate/percentage	Medicaid only denominator	Medicaid only numerator or count
	<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
	<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
	<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
	2163			26244
	2150			26335
	2153			26293
	576			10927
	587			11117
	536			11366
	310			6813
	329			6970
	305			7002
	442			6464
	425			6691

390  
11  
  
14  
14  
43  
  
48  
46  
25  
  
28  
26  
23  
  
37  
53

6573  
114  
  
106  
112  
996  
  
1317  
1260  
389  
  
416  
410  
6016  
  
5589  
6340









ly Medicaid only rate/percentage	Pregnant		
	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		514	
		502	
		506	
		250	
		242	
		251	
		116	
		119	
		108	
		148	
		157	

156

1

0

1

16

18

13

3

3

6

142

135

139







Not pregnant			Criminally inv	
Not pregnant denominator	Not pregnant numerator or count	Not pregnant rate/percentage	Criminally involved denominator	Criminally involved numerator or count
	<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
	<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
	<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
	27893			
	27983			
	27940			
	11253			
	11462			
	11651			
	7007			
	7180			
	7199			
	6758			
	6959			



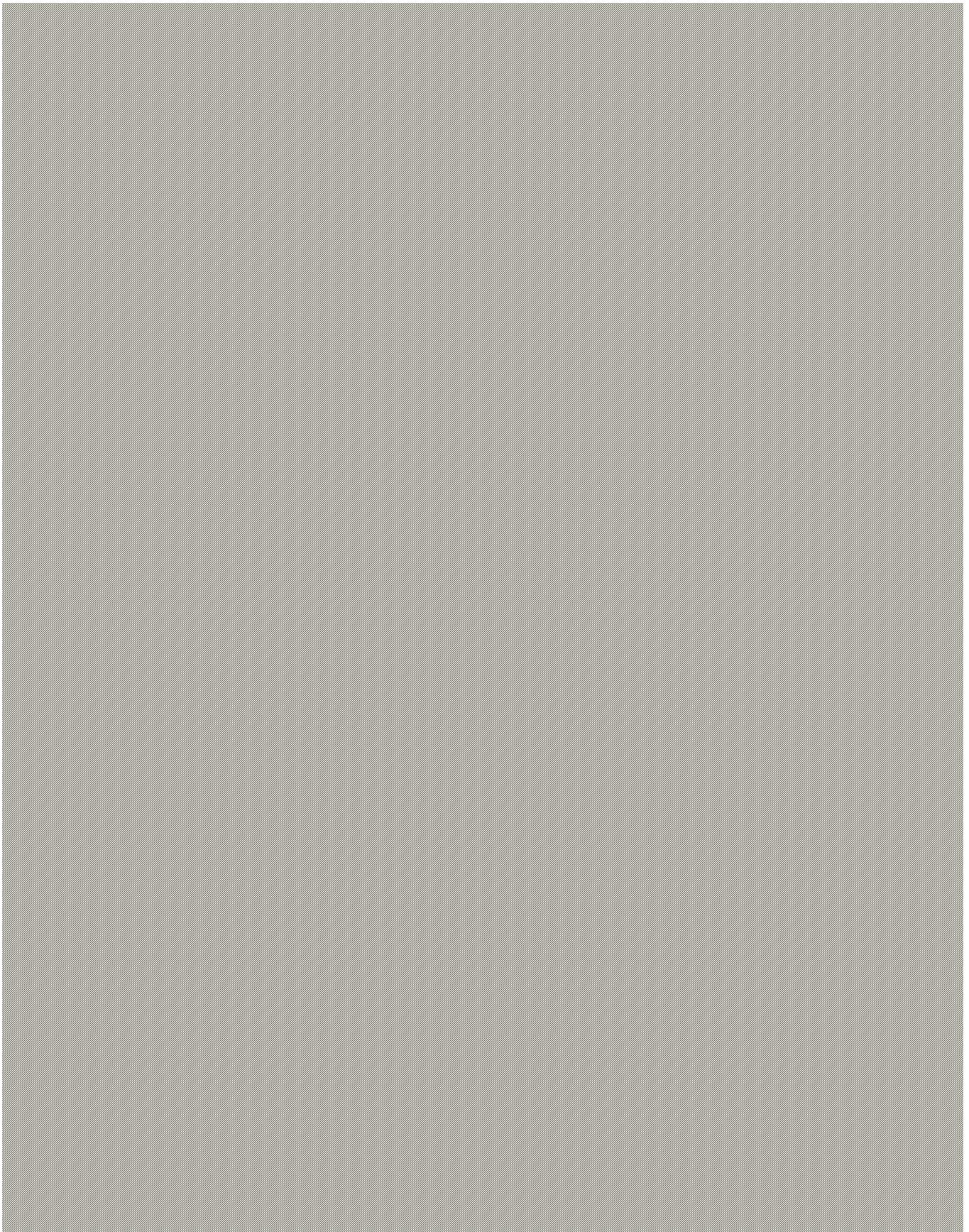
6807  
124

120  
125  
1023

1347  
1293  
411

441  
430  
5897

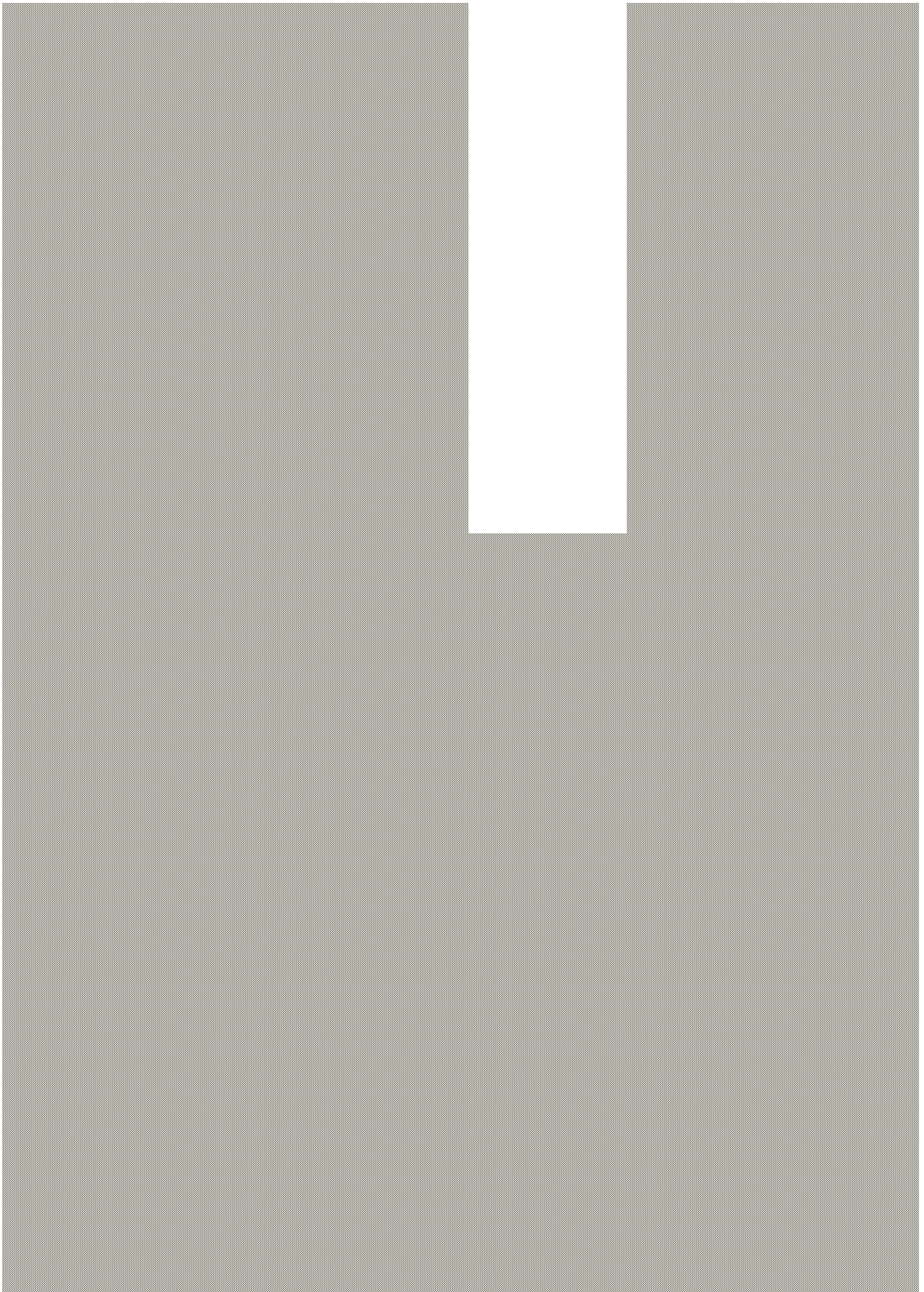
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6254

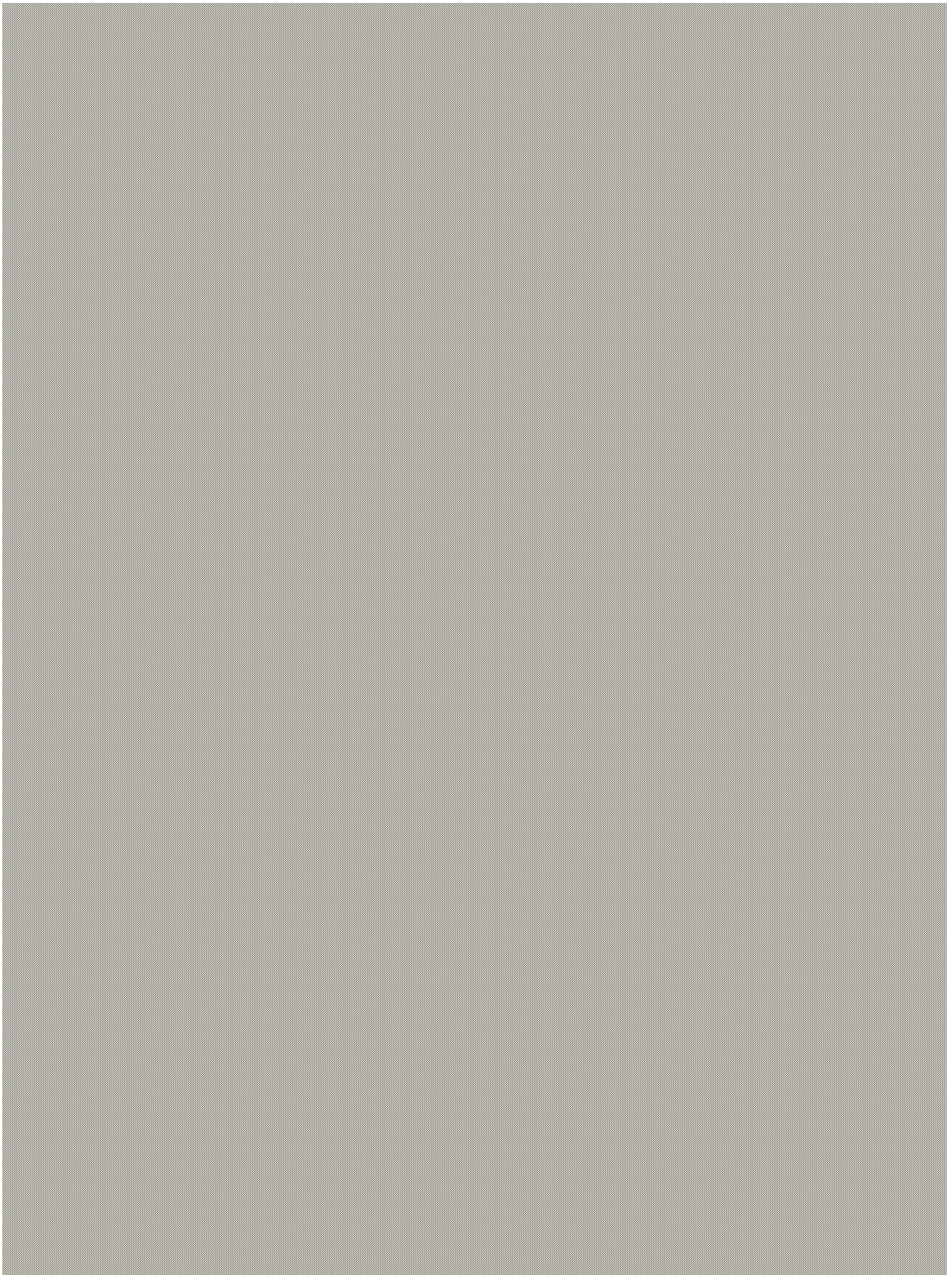


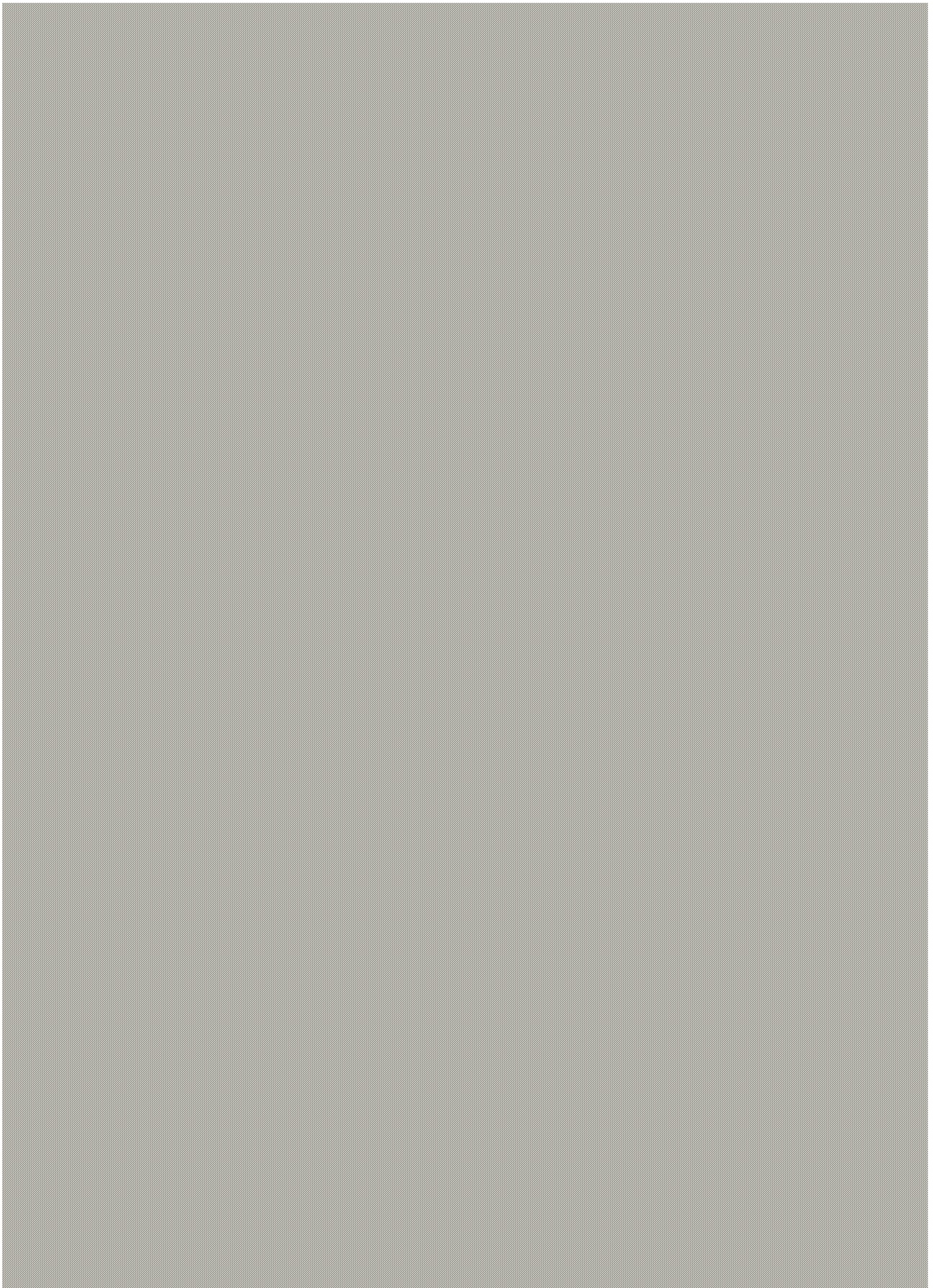




Criminally involved rate/percentage	Not criminally involved		
	Not criminally involved denominator	Not criminally involved numerator or count	Not criminally involved rate/percentage
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	







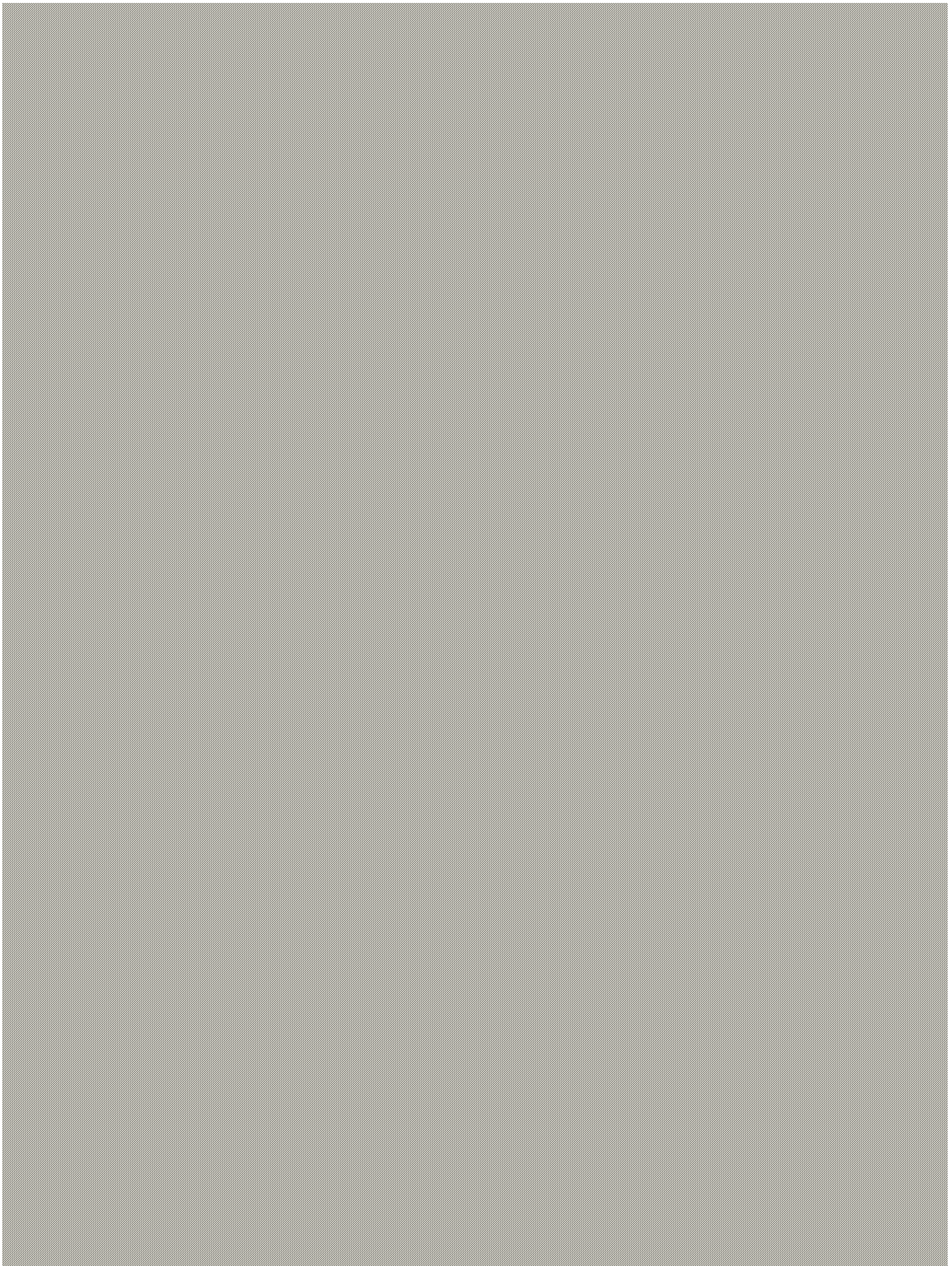


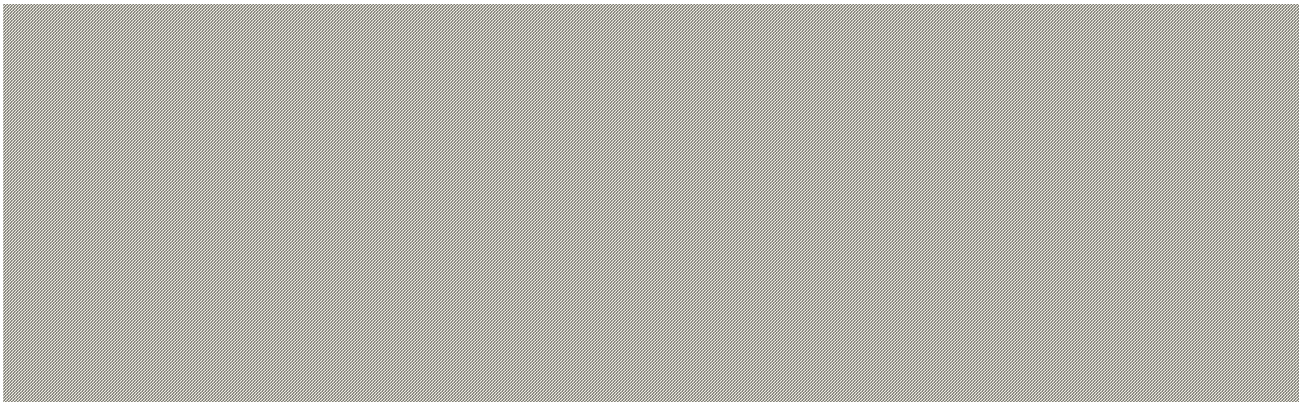


OUD subpopulation			State-specific subpop	
OUD subpopulation denominator	OUD subpopulation numerator or count	OUD subpopulation rate/percentage	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count
				<i>EXAMPLE:</i>
				<i>EXAMPLE:</i>
				<i>EXAMPLE:</i>

[Redacted content]				
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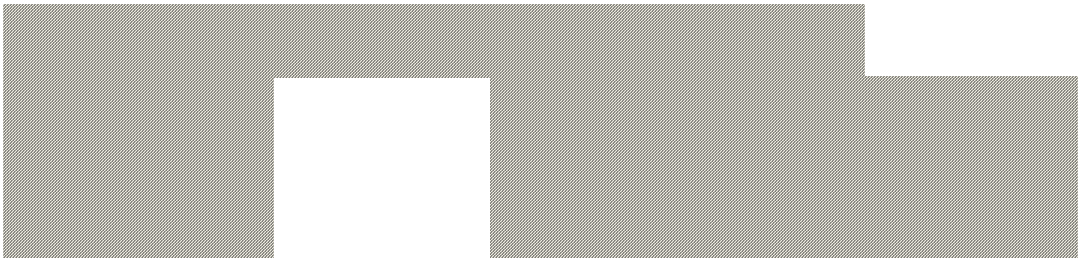
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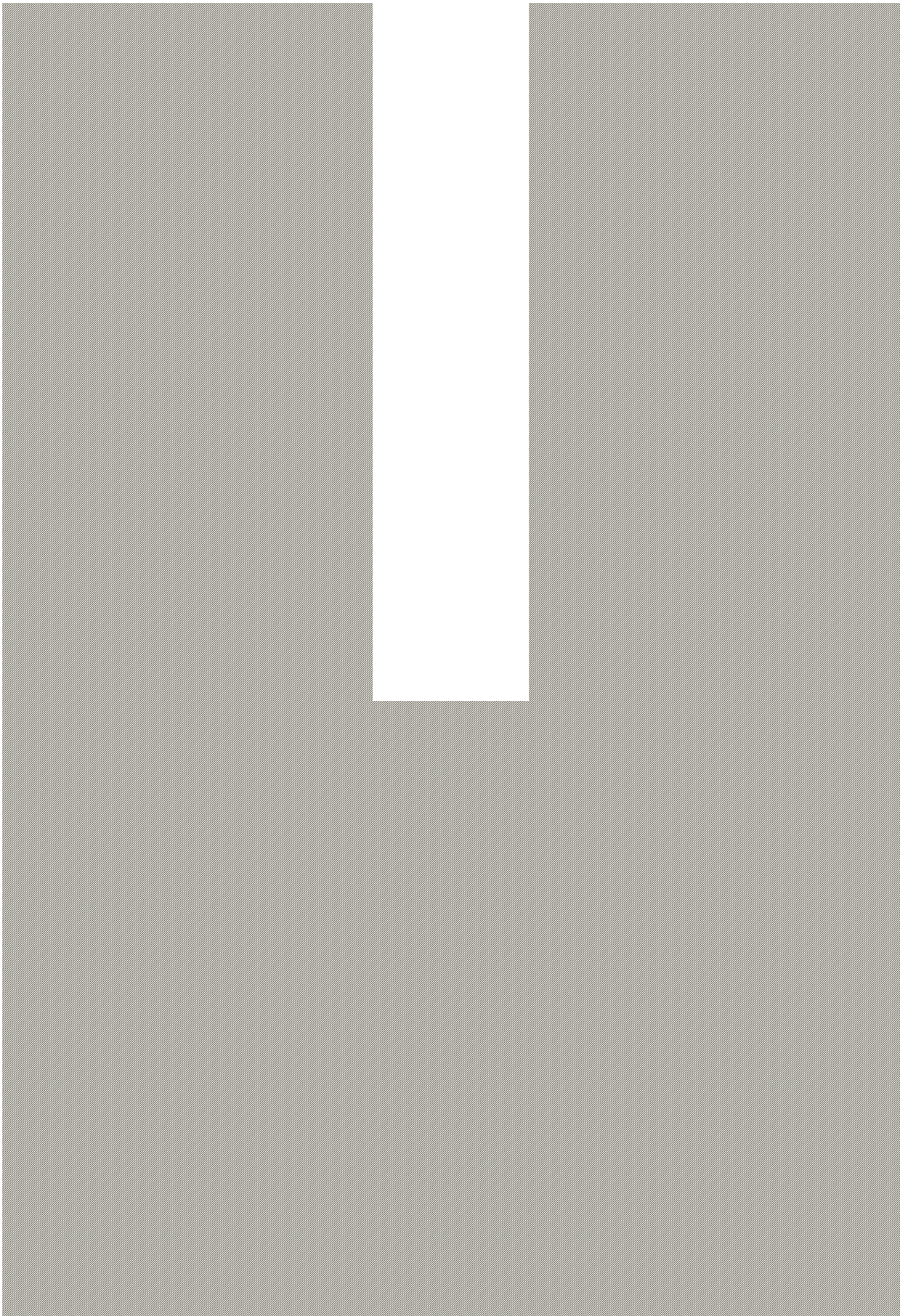
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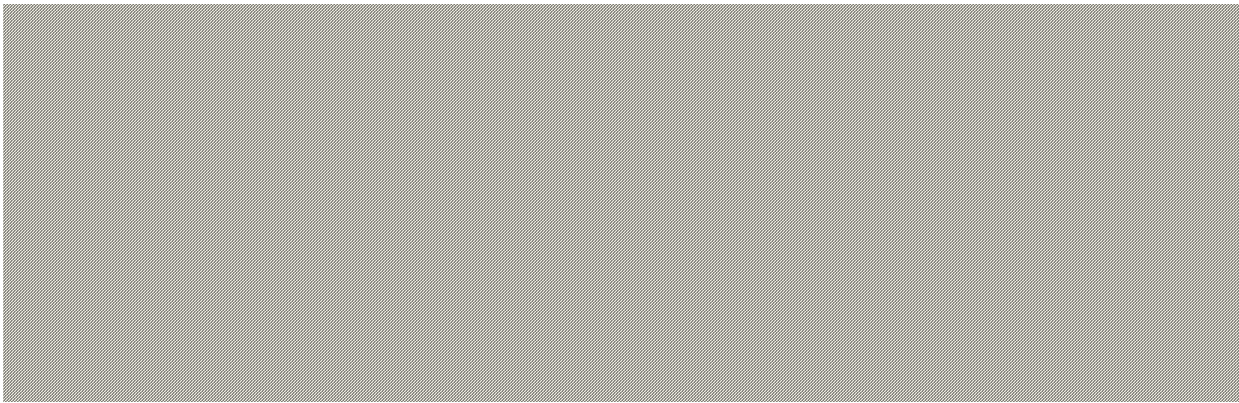


ulation 1 <sup>b</sup>	State-specific subpopulation 2 <sup>b</sup>		Stat
State-specific subpopulation 1 rate/percentage	State-specific subpopulation 2 denominator	State-specific subpopulation 2 numerator or count	State-specific subpopulation 2 rate/percentage
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	









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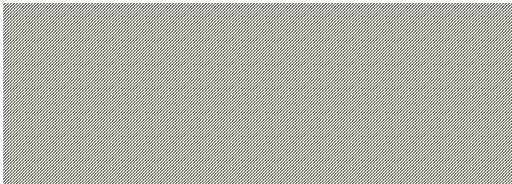
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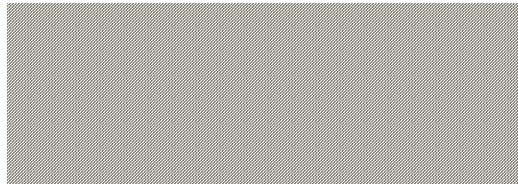
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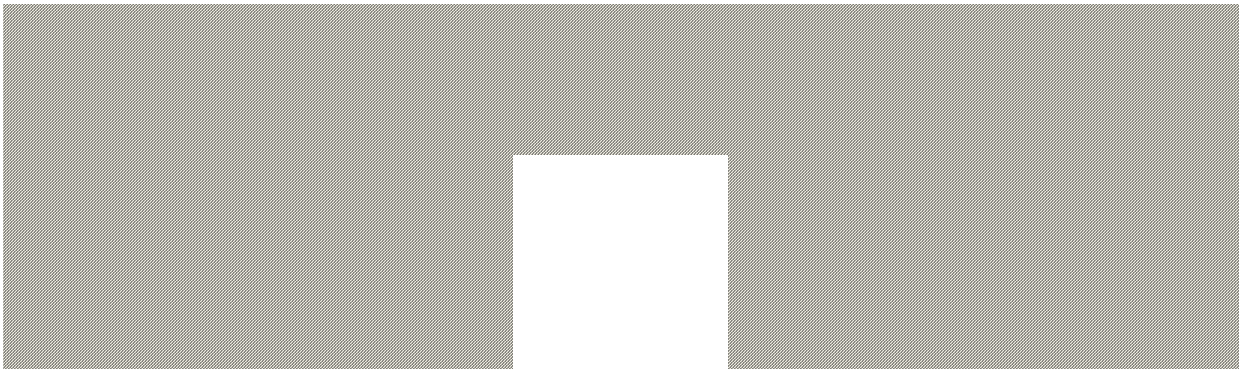
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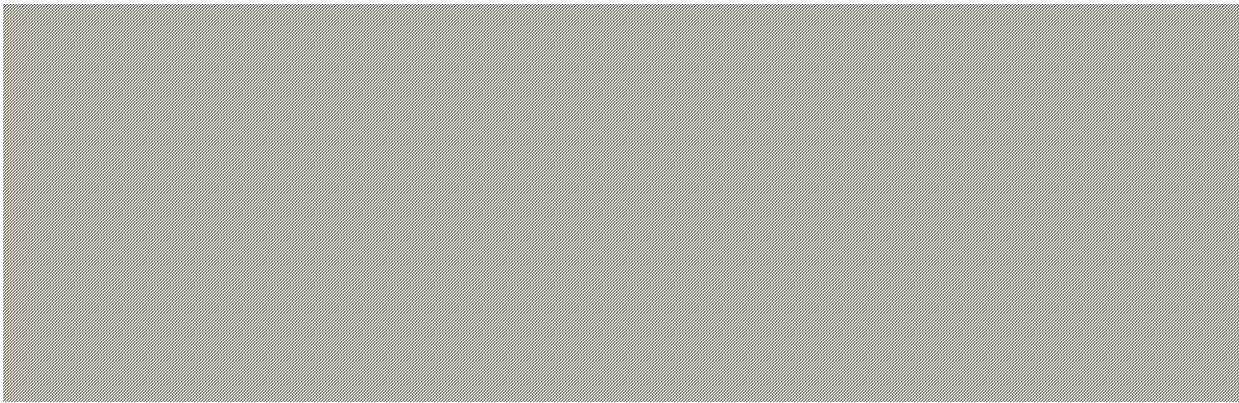
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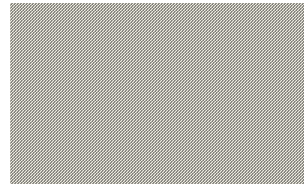
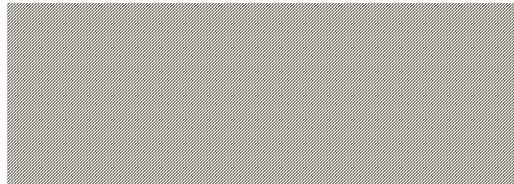
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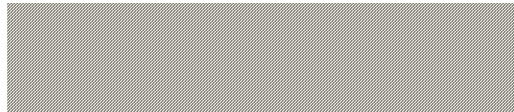
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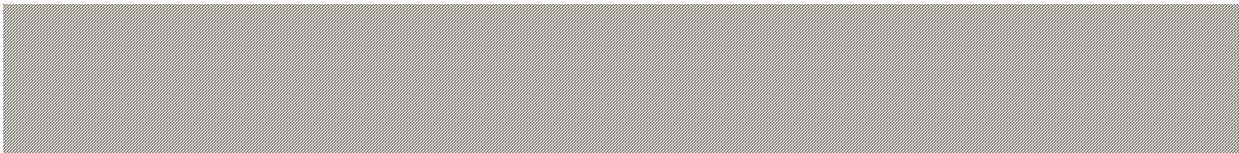


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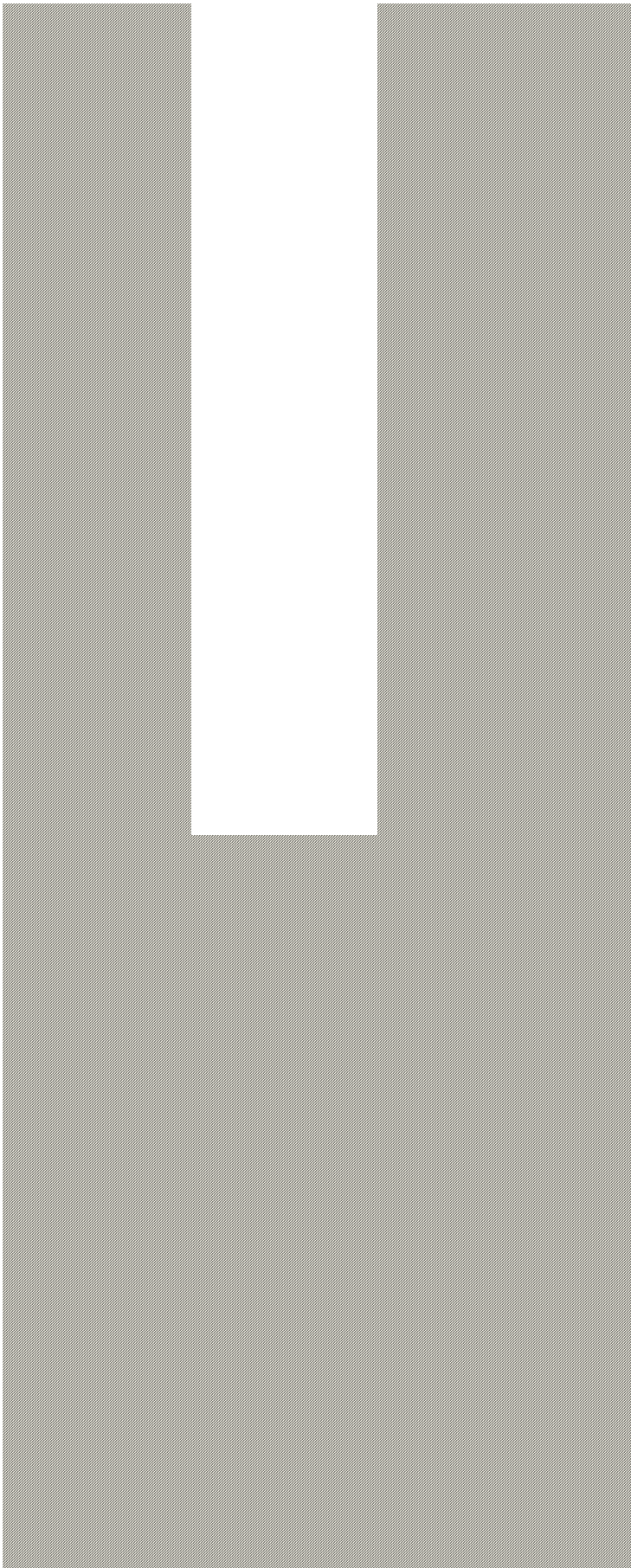
State-specific subpopulation 5<sup>b</sup>

State-specific subpopulation 5 denominator	State-specific subpopulation 5 numerator or count	State-specific subpopulation 5 rate/percentage
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*EXAMPLE:*

*EXAMPLE:*

*EXAMPLE:*







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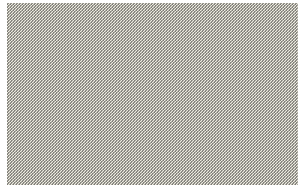
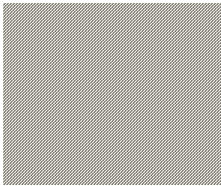
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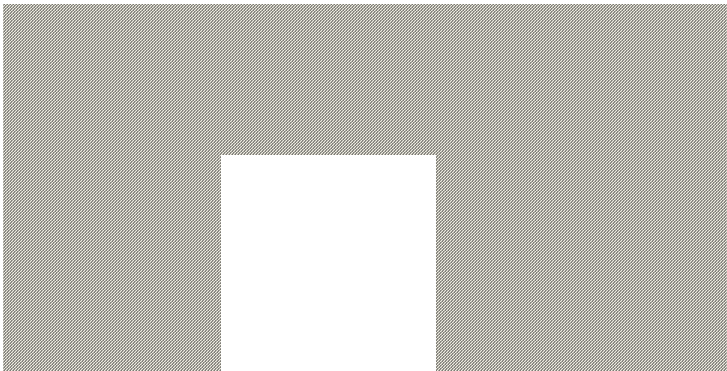


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