Medicaid Section 1115 SUD Demonstrations Report (Part A) - State

Demonstration Name

SUD Demonstration Year (DY)
(Format: DY1, DY2, DY3, etc.)

Calendar Dates for SUD DY
(Format: MM/DD/YYYY - MM/DD/YYYY)

SUD Reporting Period
(Format: Q1, Q2, Q3, Q4)

Calendar Dates for SUD Reporting Period
(Format: MM/DD/YYYY - MM/DD/YYYY)

Substance Use Disorder (SUD) Metrics

#	Metric name
EXAMPLE: 1 ***(Do not delete or edit this row)***	*EXAMPLE:* *Assessed for SUD Treatment Needs Using a Standardized Screening Tool*
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][f]	
16	SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission]	
17(1)	Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure][c,d]	

17(2)	Follow-up after Emergency Department Visit for Mental Illness (FUM-AD) [NCQA; NQF #3489; Medicaid Adult Core Set; Adjusted HEDIS measure][c,e]
18	Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD) [PQA, NQF #2940; Medicaid Adult Core Set]
19	Use of Opioids from Multiple Providers in Persons Without Cancer (OMP) [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][c]
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	*Project ECHO - OPIOID, ADDICTION, & PAIN ECHO*
Q2	*Online Provider Directories*
Q3	*MAT Continuity Models*
State-specific metrics	

Note: Licensee and states must prominently display the follow
Measures IET-AD, FUA-AD, FUM-AD, and AAP [Metrics #1
Information Set (HEDIS®) measures that are owned and copy
HEDIS measures and specifications are not clinical guideline
for all potential applications. The measures and specification
representations, warranties or endorsements about the quality
otherwise identified as meeting the requirements of a HEDIS r
warranties, or endorsement about the quality of any organizat
has no liability to anyone who relies on HEDIS measures or sp
and specifications.

The measure specification methodology used by CMS is differe
measure specifications but has granted CMS permission to adj
that has not been certified via NCQA's Measure Certification
called a "HEDIS rate" until it is audited and designated repor
time, such measure rates shall be designated or referred to as

[a] Report metrics that are one annual value for a demonstration

[b] Enter any state-specific subpopulations that will be reported a
[c] Rates for these metrics reflect Uncertified, Unaudited HEDIS
[d] Rates 1 and 2 reported for Metric #17(1) correspond to rates
1115 Substance Use Disorder Demonstrations: Technical Spec
[e] Rates 1 and 2 reported for Metric #17(2) correspond to rates
1115 Substance Use Disorder Demonstrations: Technical Spec

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) shoul

- Metrics (Version 5.1)
UT
Primary Care Network

DY4

07/01/2020 - 06/30/2021

Q3

01/01/2021 - 03/31/2021

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 of 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 ≥18 years of age who received prescriptions for opioids from ≥4 prescribers AND ≥4 pharmacies within ≤180 days.

The percentage of individuals ≥18 years of age who received prescriptions for opioids with an average daily dosage of ≥90 morphine milligram equivalents (MME) AND who received prescriptions for opioids from ≥4 prescribers AND ≥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 neasure 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
cifications for Monitoring Metrics

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

d sum approximately to counts for the overall demonstration

Milestone or reporting topic	Reporting category	Metric type
EXAMPLE: *Assessment of need and qualification for SUD treatment services*	*EXAMPLE:* *Other monthly and quarterly metrics*	*EXAMPLE:* *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 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 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)
EXAMPLE: Medical record review or claims	*EXAMPLE (automatically populated):*	*EXAMPLE (automatically populated): N*
Medical record review or claims	N	N
Claims	N	N
Claims	Y	Y
Claims	Y	Y
Claims	Y	Y

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

Claims	Y	Y
Medical record review or claims	N	N
Claims		

	Y	Y
Claims	Y	Y
Claims	Y	Y
Claims	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

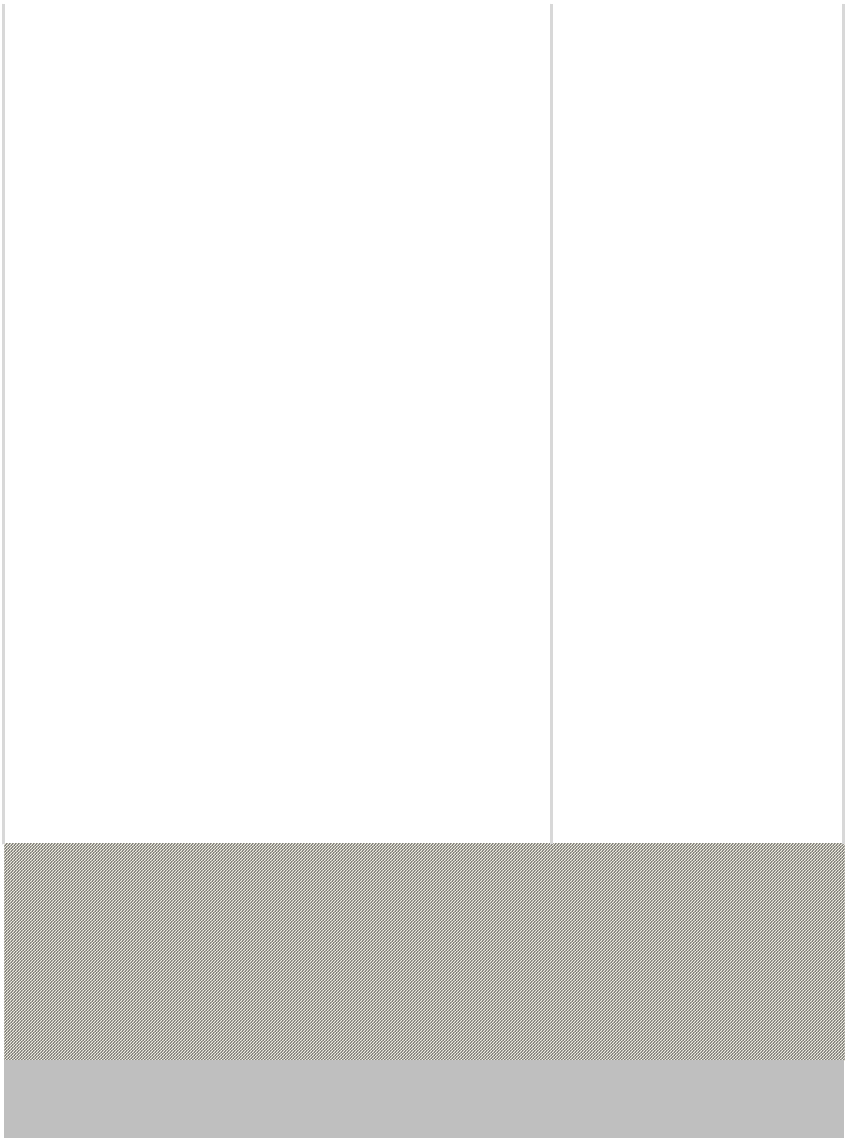
State data on cause of death	Y	Y
Claims	N	N
Claims	N	N
Claims	N	N
Claims	N	N
Claims	Y	Y
Administrative records	N	N
Administrative records	N	N
Administrative records	N	N
Claims; State-specific IMD database	Y	Y
Administrative records	Y	
Administrative records	Y	
Administrative records	Y	

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

	Version 3.0
	Version 3.0
	Version 3.0
	Version 3.0
	Version 3.0
	Version 3.0
	Version 3.0

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

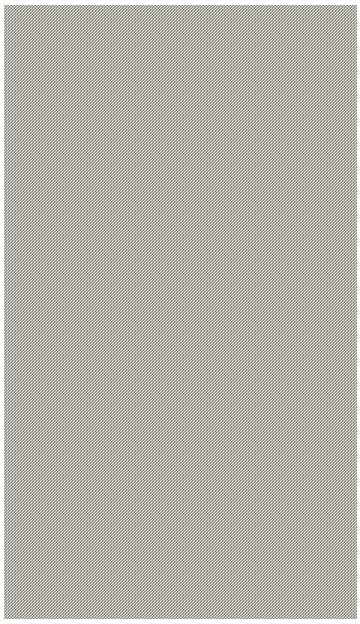
	Version 3.0
	Version 3.0



Reporting issue (Y/N) (further describe in SUD reporting issues tab)	Measurement period (month, quarter, year[a])	Dates covered by measurement period (MM/DD/YYYY-MM/DD/YYYY)
EXAMPLE: *Y*	*EXAMPLE:* *Month 1*	*EXAMPLE:* *07/01/2018-7/31/2018*
	EXAMPLE: *Month 2*	*EXAMPLE:* *08/01/2018-08/31/2018*
	EXAMPLE: *Month 3*	*EXAMPLE:* *09/01/2018-09/30/2018*
	Month 1	
	Month 2	
	Month 3	
	Month 1	
	Month 2	
	Month 3	
	Month 1	10/01/2020-10/31/2020
	Month 2	11/01/2020-11/30/2020
N	Month 3	12/01/2020-12/31/2020
	Year	
	Year	

N	Month 1 Month 2 Month 3	10/01/2020-10/31/2020 11/01/2020-11/30/2020 12/01/2020-12/31/2020
N	Month 1 Month 2 Month 3	10/01/2020-10/31/2020 11/01/2020-11/30/2020 12/01/2020-12/31/2020
N	Month 1 Month 2 Month 3	10/01/2020-10/31/2020 11/01/2020-11/30/2020 12/01/2020-12/31/2020
N	Month 1 Month 2 Month 3	10/01/2020-10/31/2020 11/01/2020-11/30/2020 12/01/2020-12/31/2020
N	Month 1 Month 2 Month 3	10/01/2020-10/31/2020 11/01/2020-11/30/2020 12/01/2020-12/31/2020
N	Month 1 Month 2 Month 3	10/01/2020-10/31/2020 11/01/2020-11/30/2020 12/01/2020-12/31/2020
N	Month 1 Month 2 Month 3	10/01/2020-10/31/2020 11/01/2020-11/30/2020 12/01/2020-12/31/2020
	Year Year	

id prescribers of MAT. We believe this is an eff

	Year	
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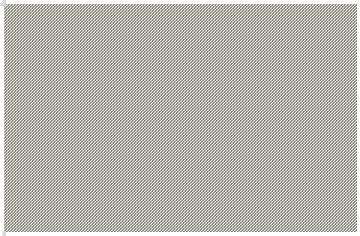
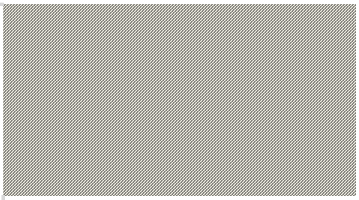
	Year	

	Year	
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	Year	
	Year	
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	Year	
	Month 1	10/01/2020-10/31/2020
N	Month 2 Month 3	11/01/2020-11/30/2020 12/01/2020-12/31/2020
N	Month 1 Month 2 Month 3	10/01/2020-10/31/2020 11/01/2020-11/30/2020 12/01/2020-12/31/2020
	Year Year	

Year

Year
Year

Year
Year

Year

Quarter

Quarter

Quarter

Year

Year

Year

Year

Demonstration			
Demonstration denominator	**Demonstration numerator or count**	**Demonstration rate/percentage**	**Age < 18 denominator**
	EXAMPLE: 100		
	EXAMPLE: 100		
	EXAMPLE: 100		
	22336 22726 23028		

8983

8943
9045
6452

6343
6372
5683

5379
5483
71

68
82
1027

962
999
148

107
127
4293

4410
4641

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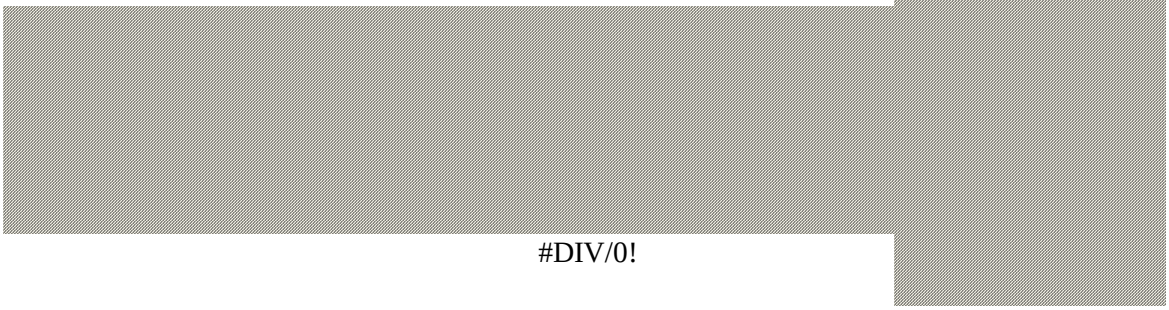

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358081	1526	4.261605614	188884
366279	1460	3.986032505	191527
374078	1408	3.763920894	193871
358081	811	2.26485069	188884
366279	700	1.911111475	191527
374078	701	1.873940729	193871
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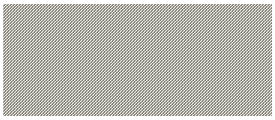

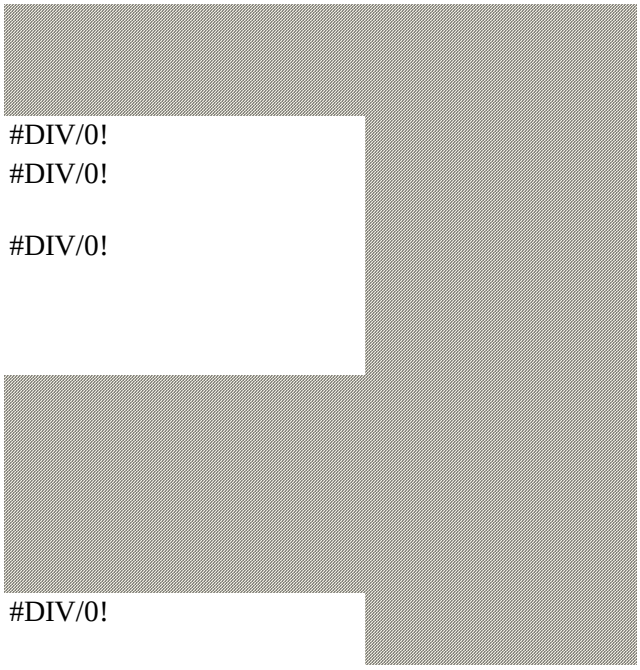

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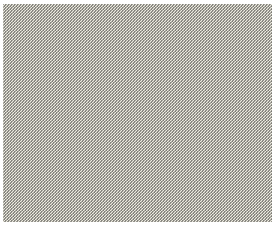

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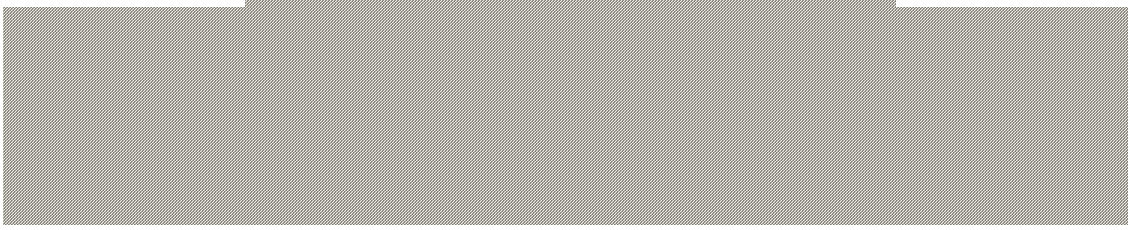
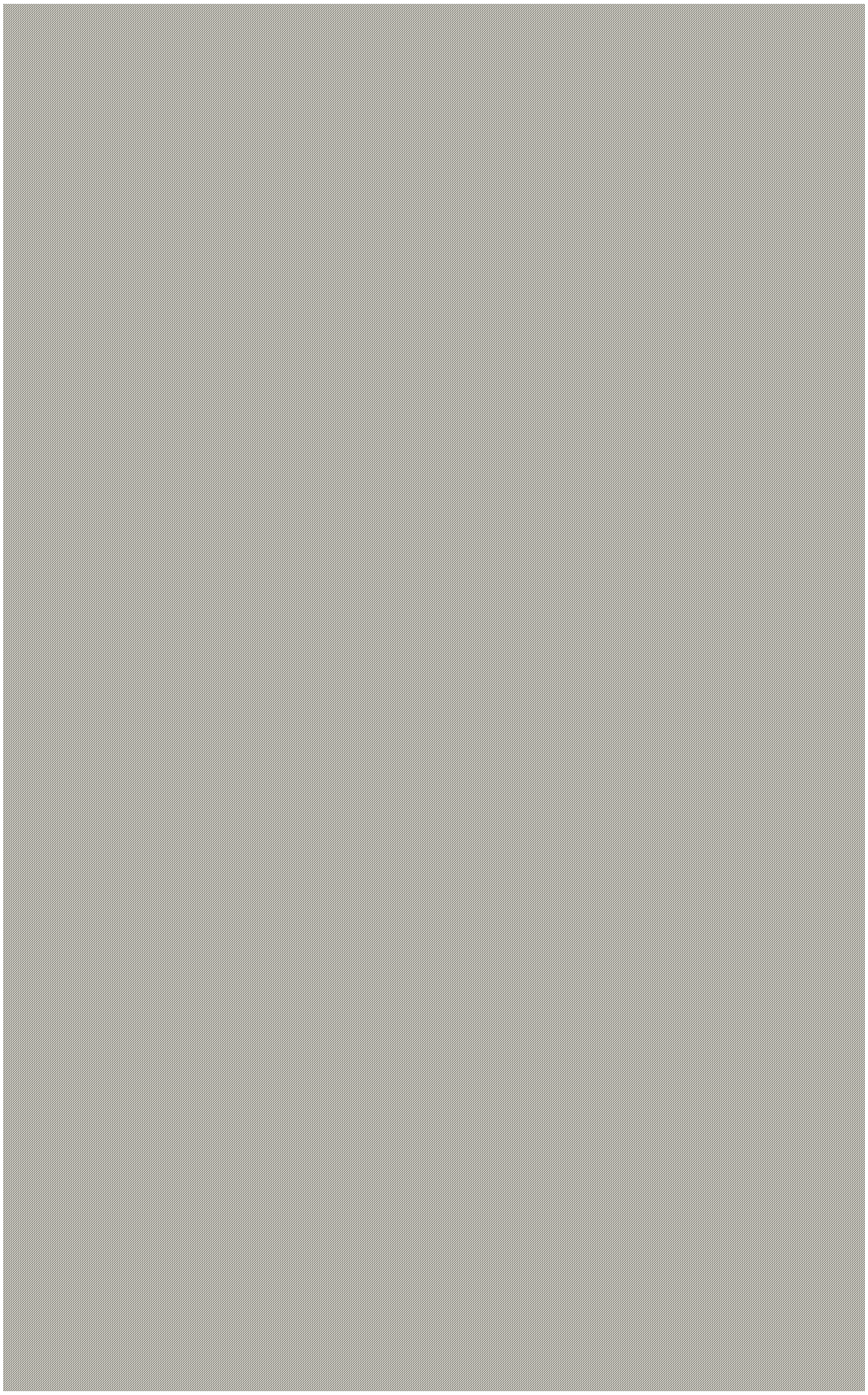
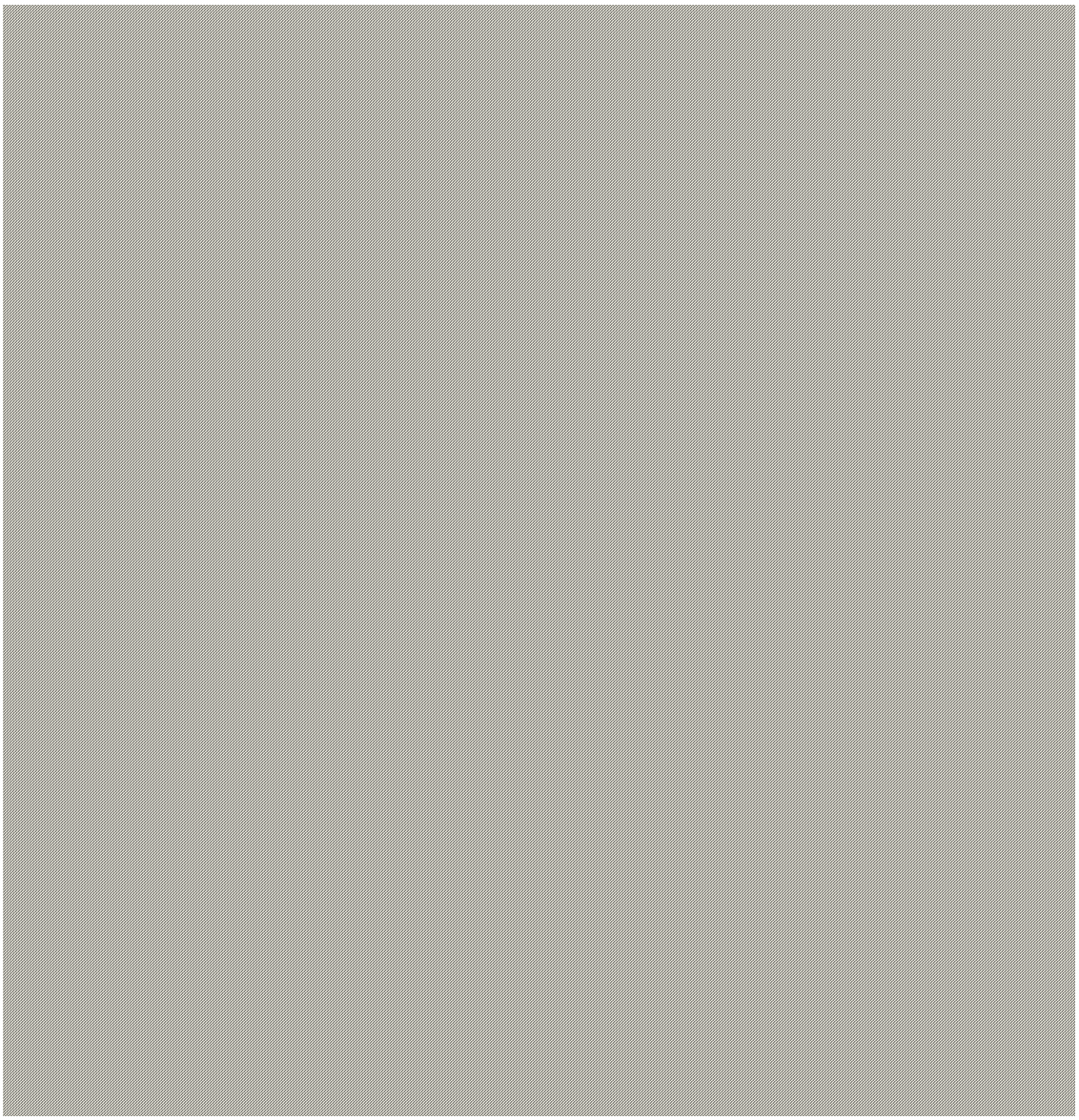
Age < 18			Age 18-64
Age < 18 numerator or count	**Age <18 rate/percentage**	**Age 18-64 denominator**	**Age 18-64 numerator or count**
EXAMPLE:			*EXAMPLE:*
EXAMPLE:			*EXAMPLE:*
EXAMPLE:			*EXAMPLE:*
606			21158
604			21541
588			21862

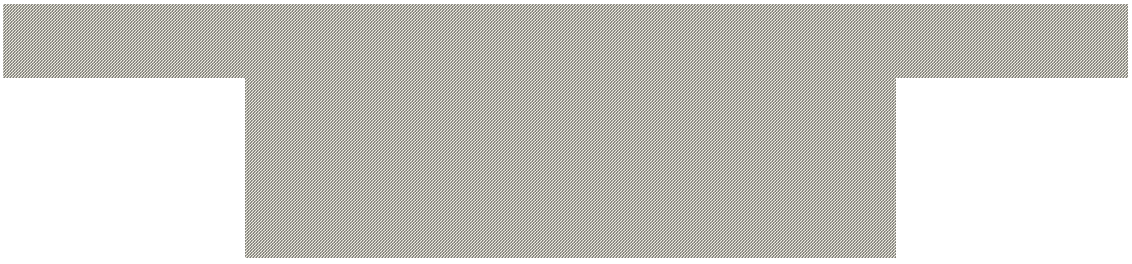
175		8711
173		8684
150		8789
153		6220
152		6099
138		6140
126		5488
124		5198
108		5309
0		71
1		66
0		81
28		998
23		938
18		979
0		146
0		107
0		127
6		4281
7		4391
8		4620







20	0.105885093	153806	1477
21	0.109645115	159246	1404
19	0.098003311	164565	1360
8	0.042354037	153806	770
8	0.041769568	159246	667
5	0.025790345	164565	660



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4	Age 65+		
Age 18-64 rate/percentage	Age 65+ denominator	Age 65+ numerator or count	Age 65+ rate/percentage
		EXAMPLE:	
		EXAMPLE:	
		EXAMPLE:	
		572 581 578	

97

86
106
79

92
94
69

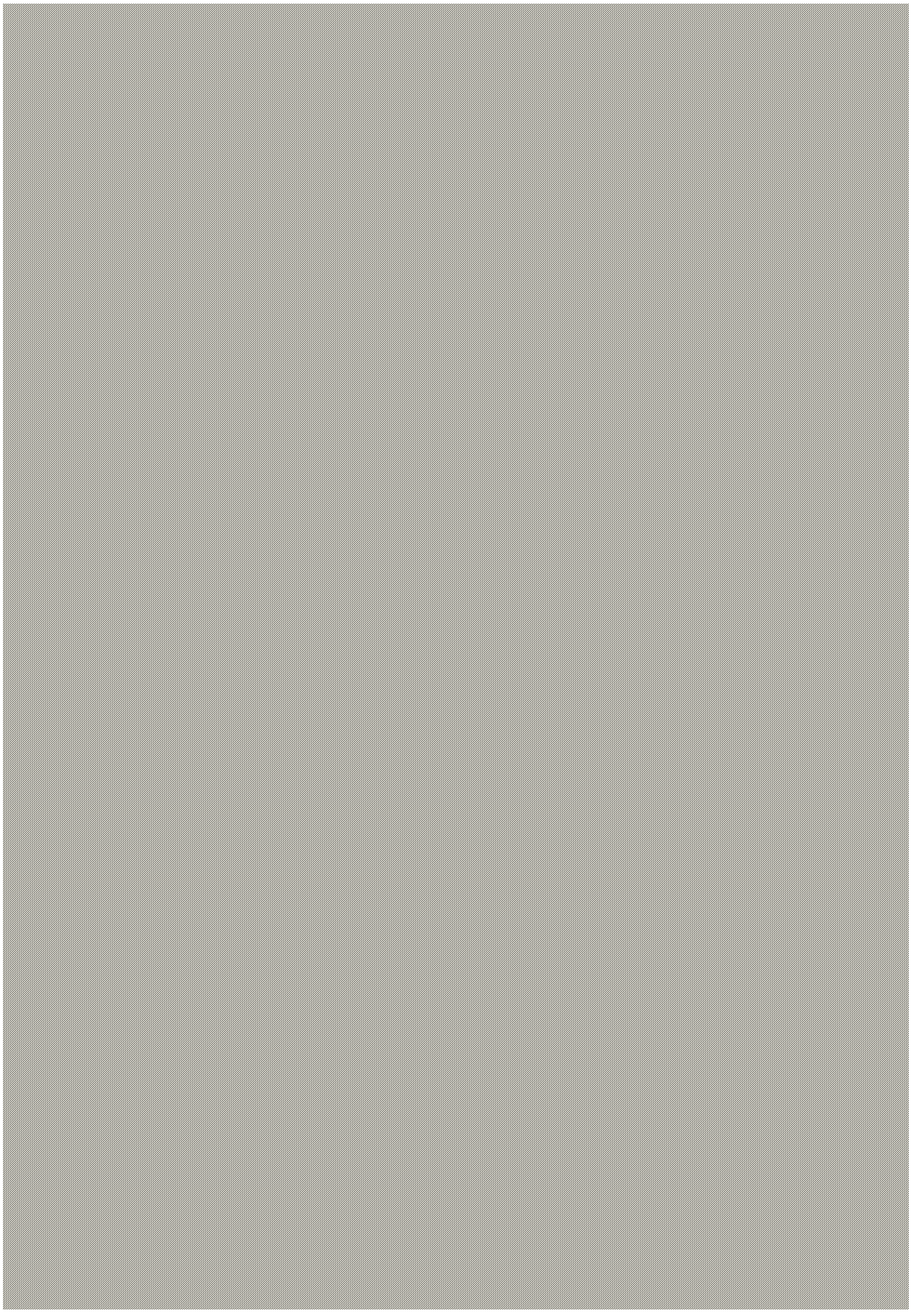
57
66
0

1
1
1

1
2
2

0
0
6

12
13



9.603006385	15391	29	1.88421805
8.816547982	15506	35	2.257190765
8.26421171	15642	29	1.853982867
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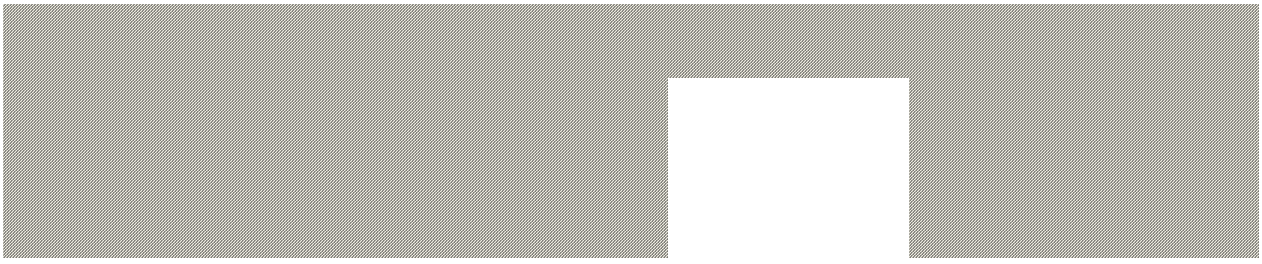
4.188488251	15506	25	1.612279118
4.01057333	15642	36	2.301495972



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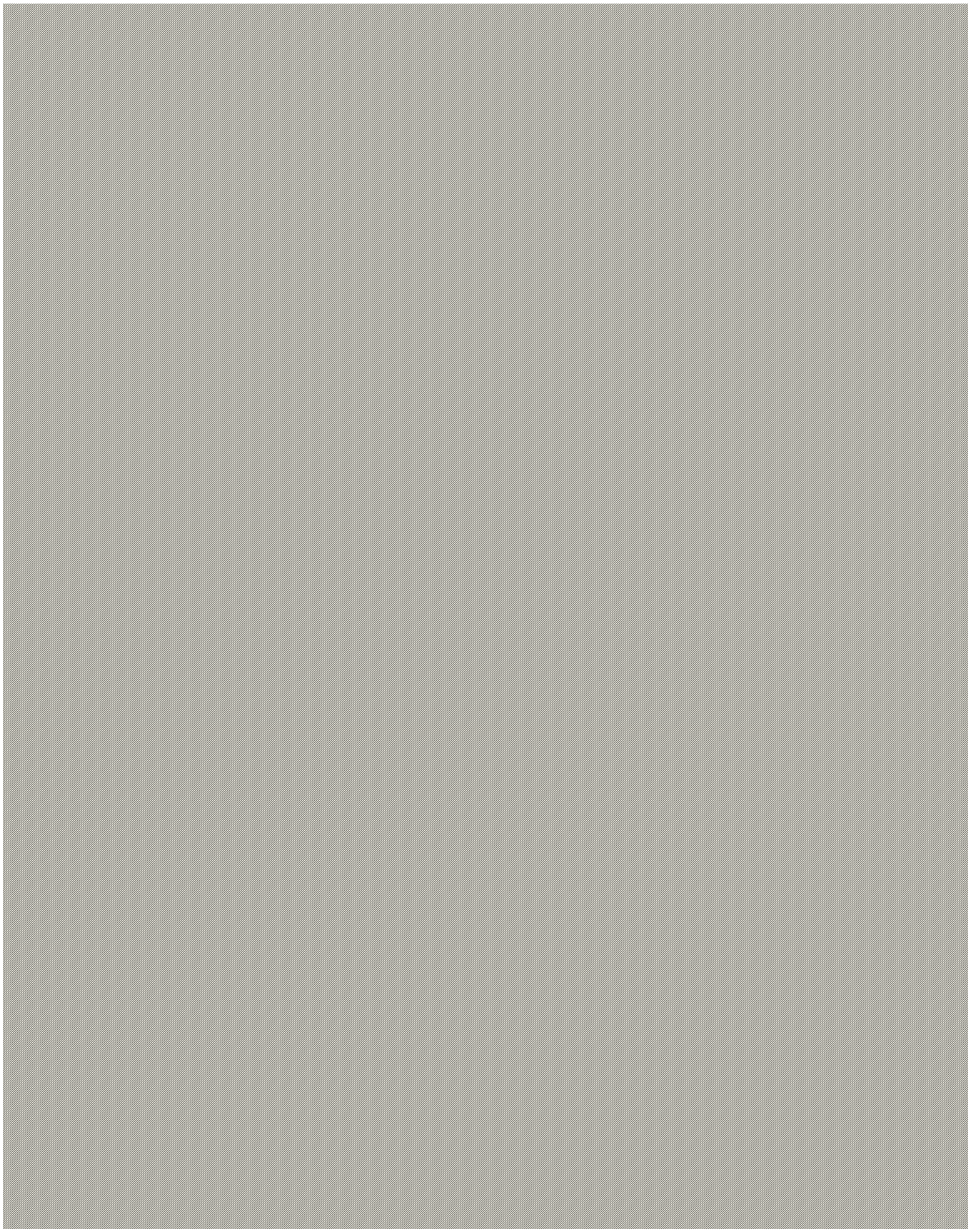
Dual eligible (Medicare-Medicaid eligible)				Medicaid on
Dual eligible (Medicare-Medicaid eligible) denominator	Dual eligible (Medicare-Medicaid eligible) numerator or count	Dual eligible (Medicare-Medicaid eligible) rate/percentage	Medicaid only denominator	Medicaid only numerator or count
	EXAMPLE:			*EXAMPLE:*
	EXAMPLE:			*EXAMPLE:*
	EXAMPLE:			*EXAMPLE:*
	2026			20310
	2046			20680
	2029			20999

387	8596
414	8529
426	8619
286	6166
318	6025
315	6057
287	5396
296	5083
297	5186
8	63
11	57
12	70
23	1004
26	936
27	972
9	139
3	104
2	125
14	4279
44	4366
26	4615



ly	Pregnant		
Medicaid only rate/percentage	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage
		EXAMPLE:	
		EXAMPLE:	
		EXAMPLE:	
		757 808 861	

342

366
393
170

197
199
225

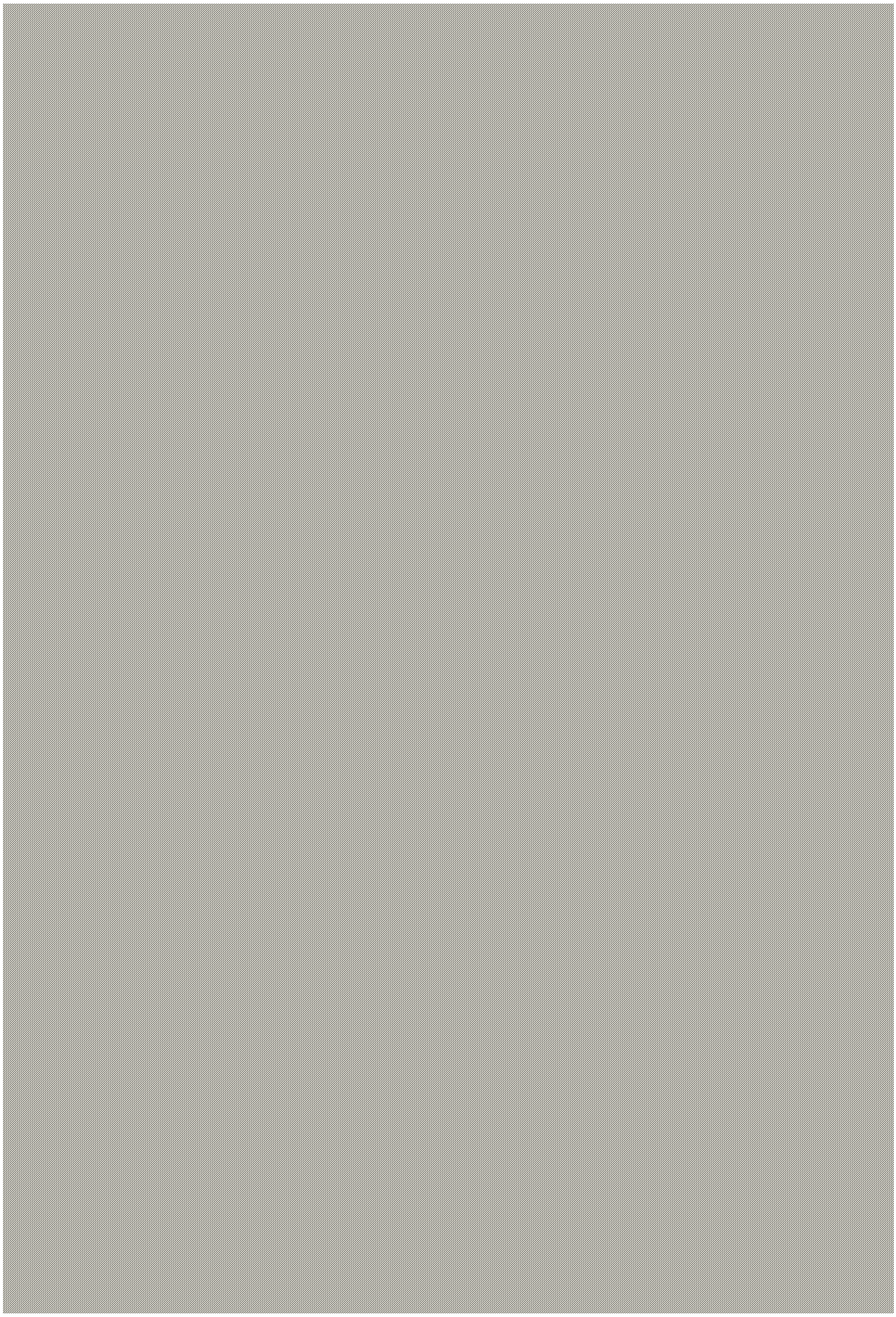
238
267
1

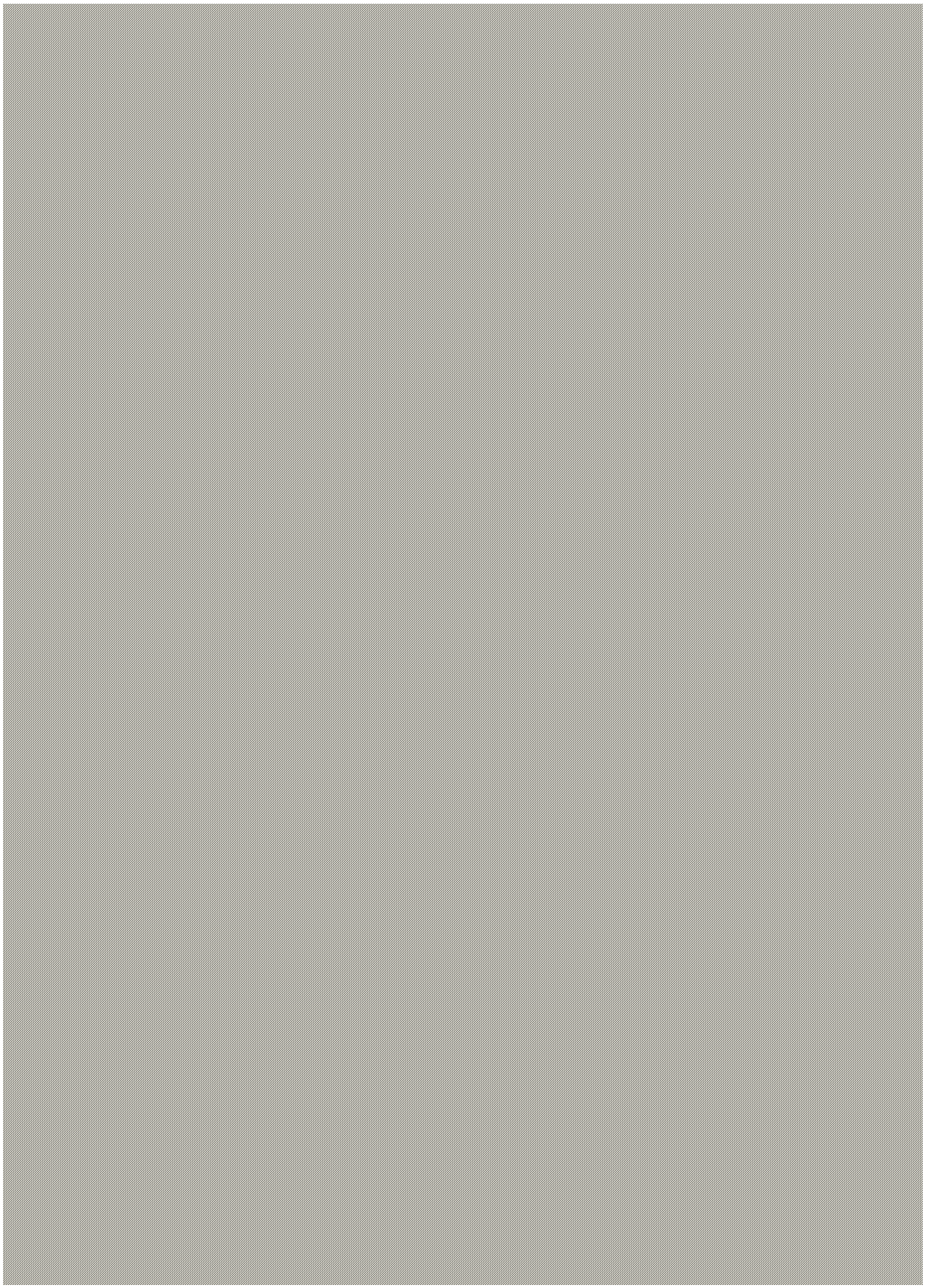
1
3
23

21
26
3

2
3
184

205
233





Not pregnant			Criminally inv	
Not pregnant denominator	Not pregnant numerator or count	Not pregnant rate/percentage	Criminally involved denominator	Criminally involved numerator or count
	EXAMPLE:			*EXAMPLE:*
	EXAMPLE:			*EXAMPLE:*
	EXAMPLE:			*EXAMPLE:*
	21579 21918 22167			

8641

8577
8652
6282

6146
6173
5458

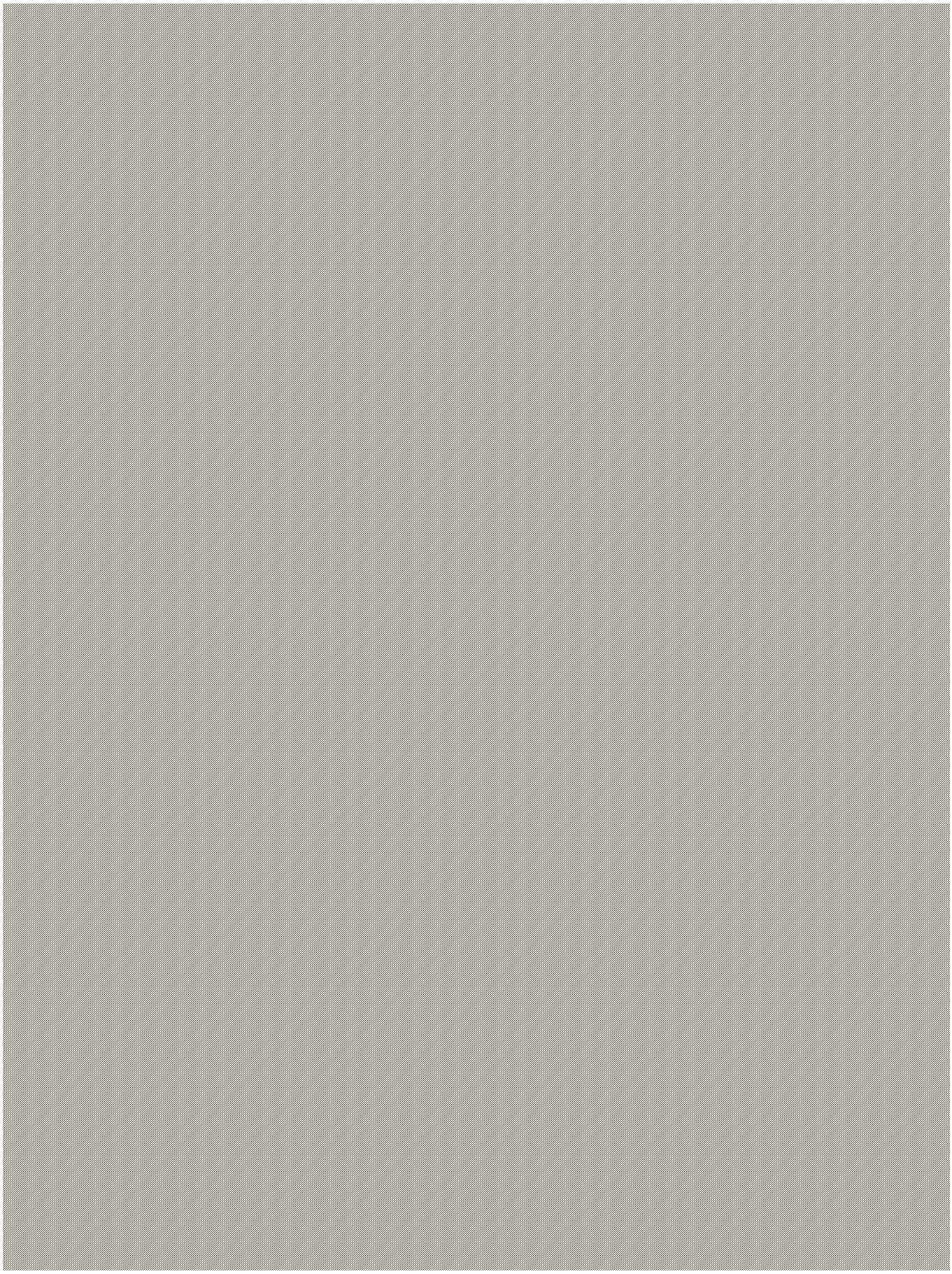
5141
5216
70

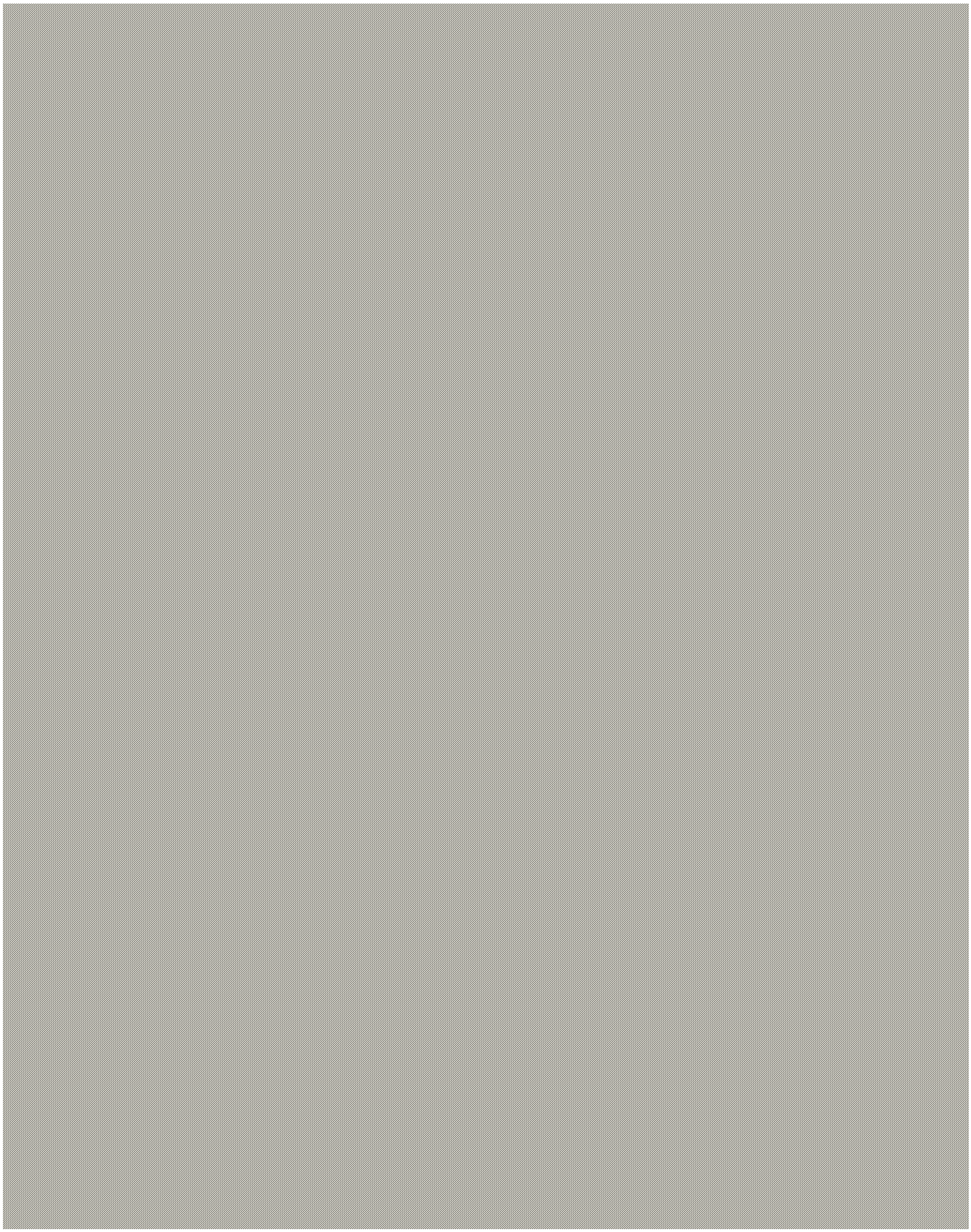
67
79
1004

941
973
145

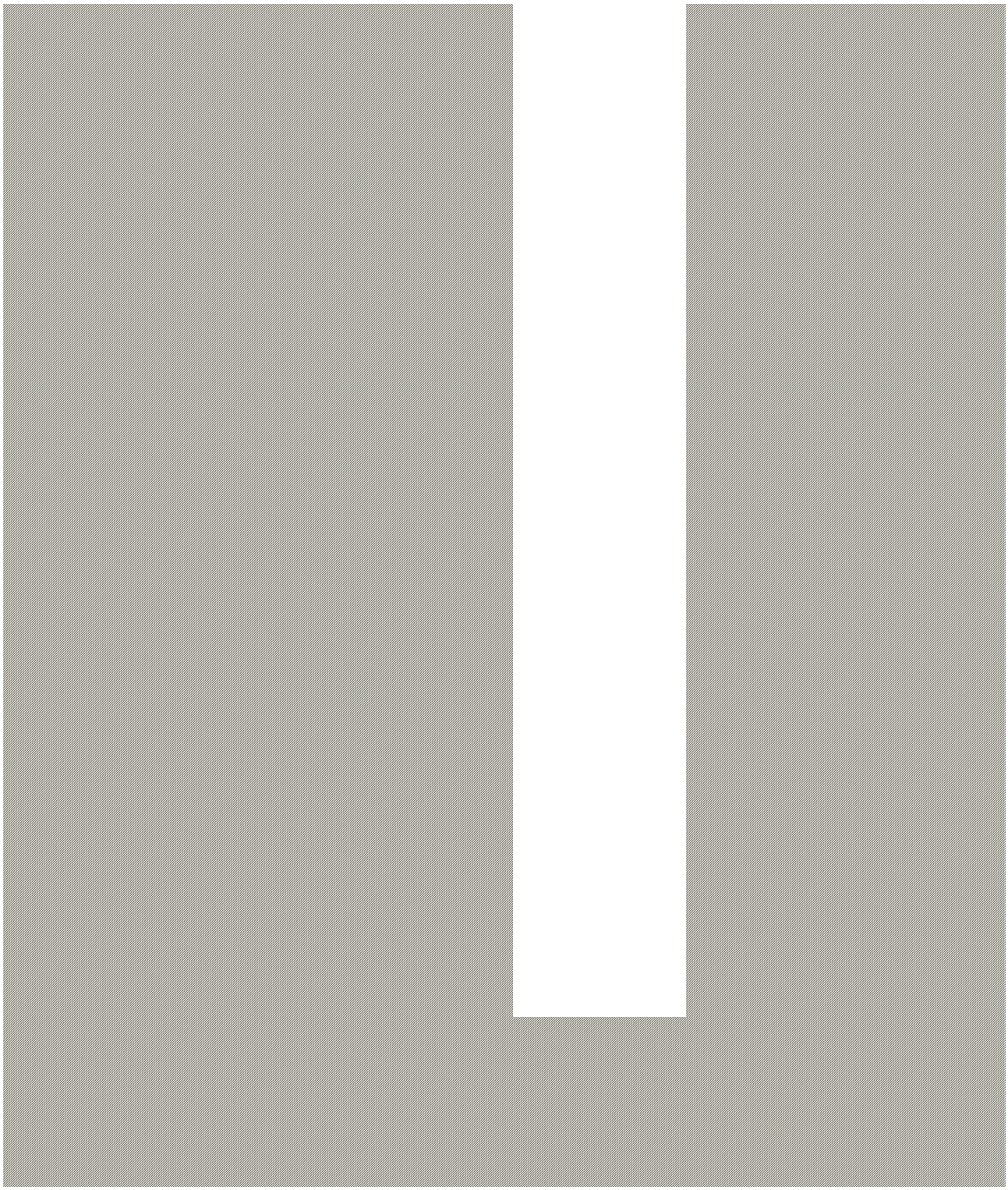
105
124
4109

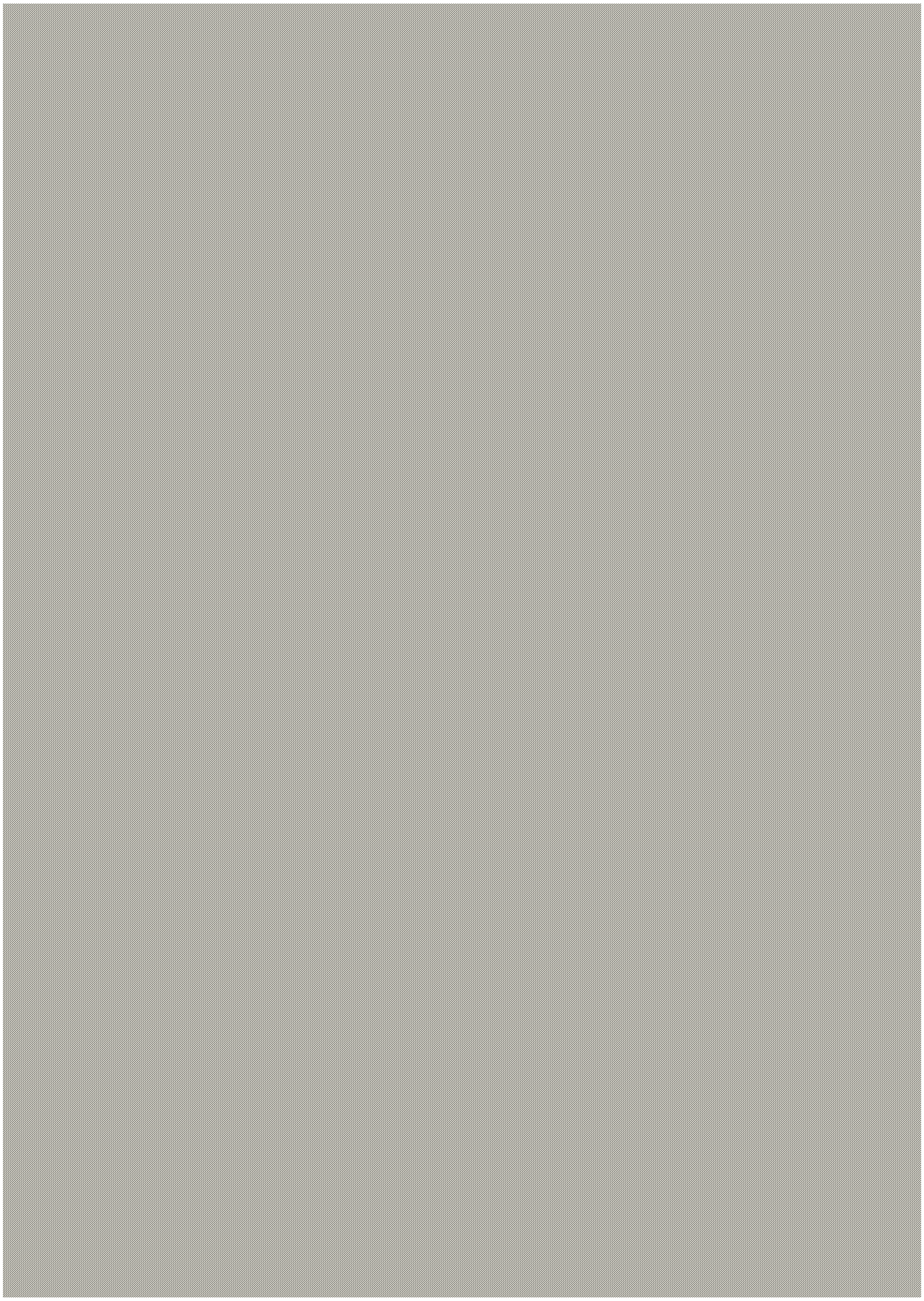
4205
4408

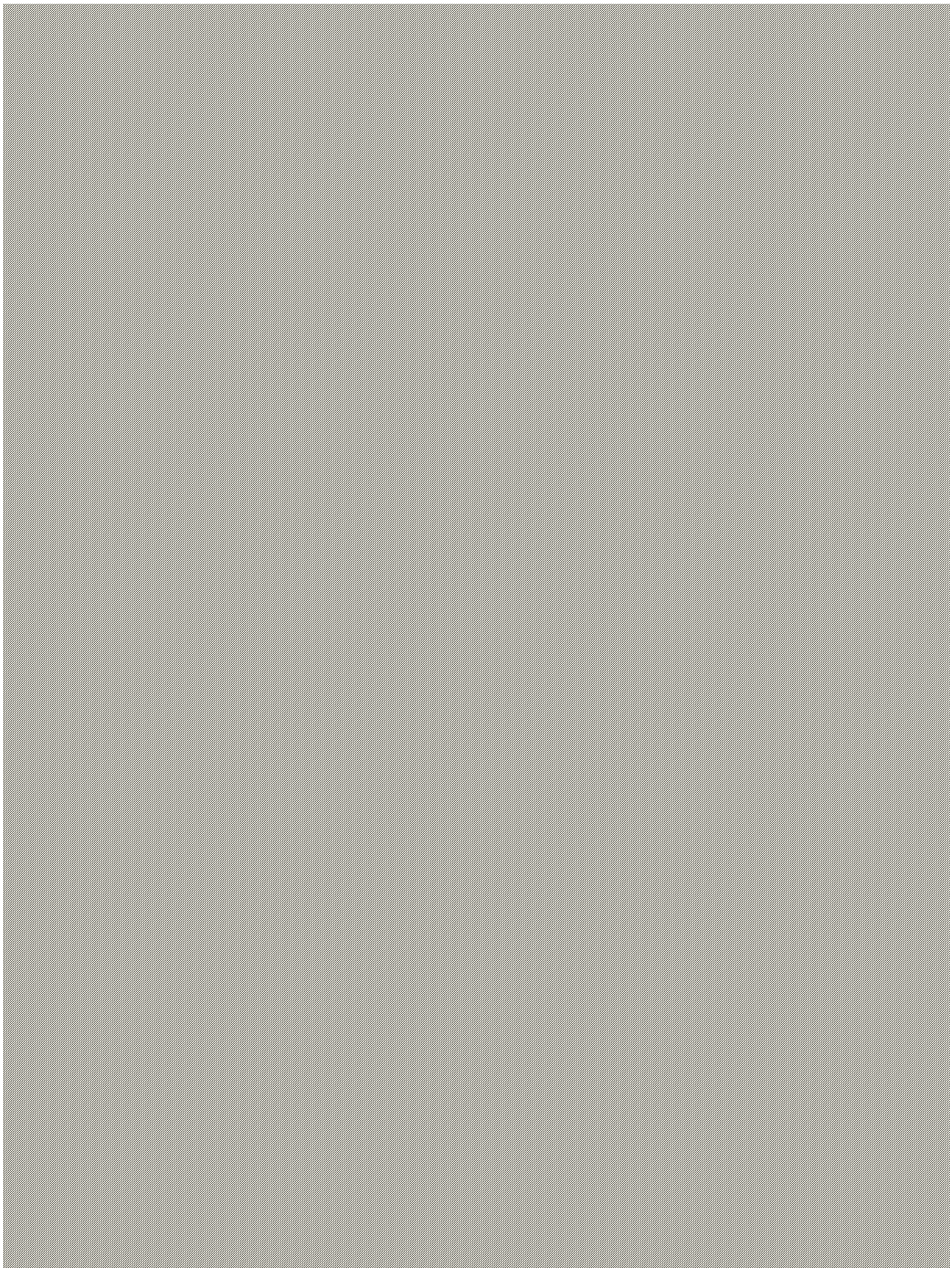




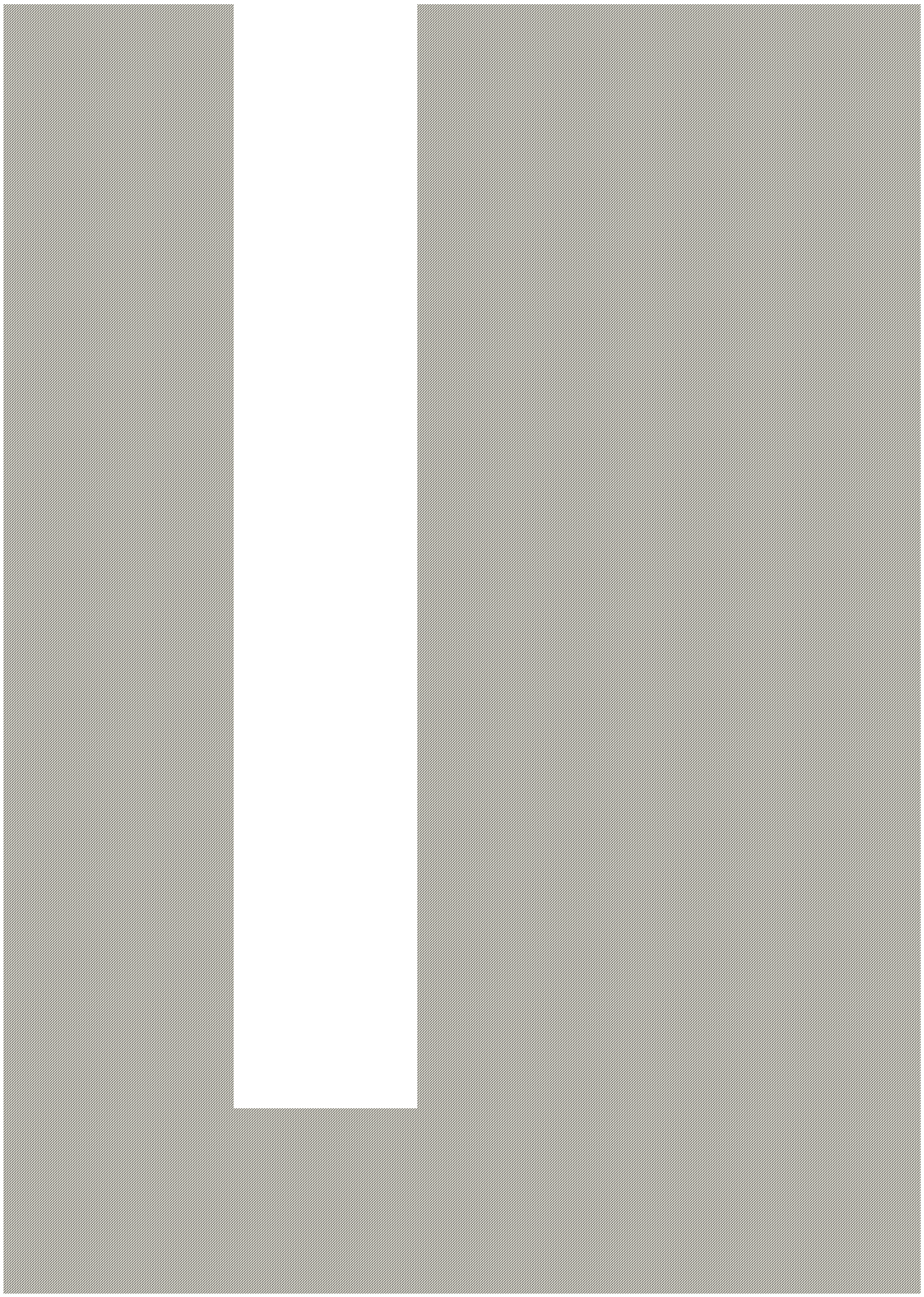
olved	Not criminally involved		
Criminally involved rate/percentage	Not criminally involved denominator	Not criminally involved numerator or count	Not criminally involved rate/percentage
		EXAMPLE:	
		EXAMPLE:	
		EXAMPLE:	

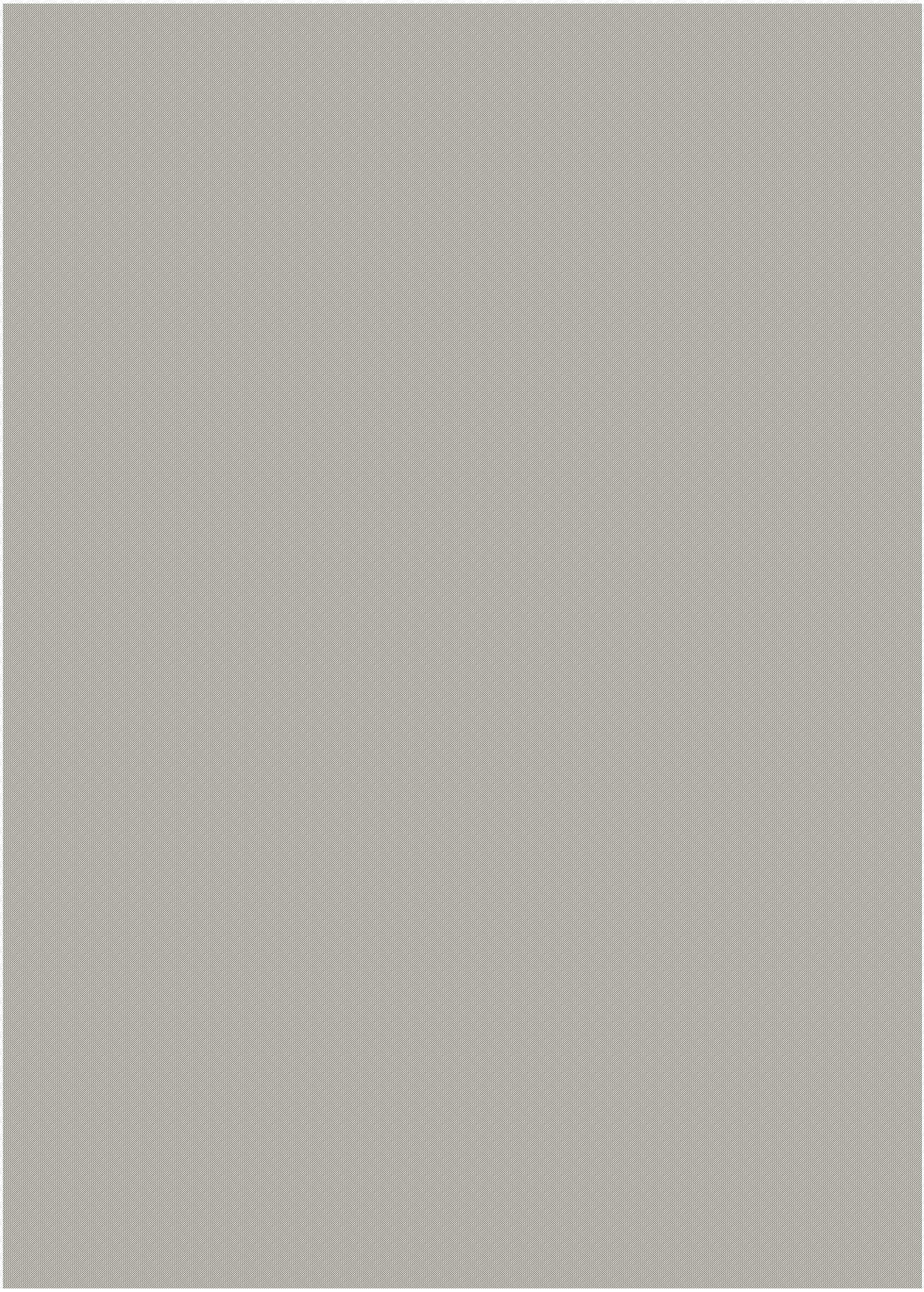






OUD subpopulation			State-specific subpop	
OUD subpopulation denominator	OUD subpopulation numerator or count	OUD subpopulation rate/percentage	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count
				EXAMPLE:
				EXAMPLE:
				EXAMPLE:





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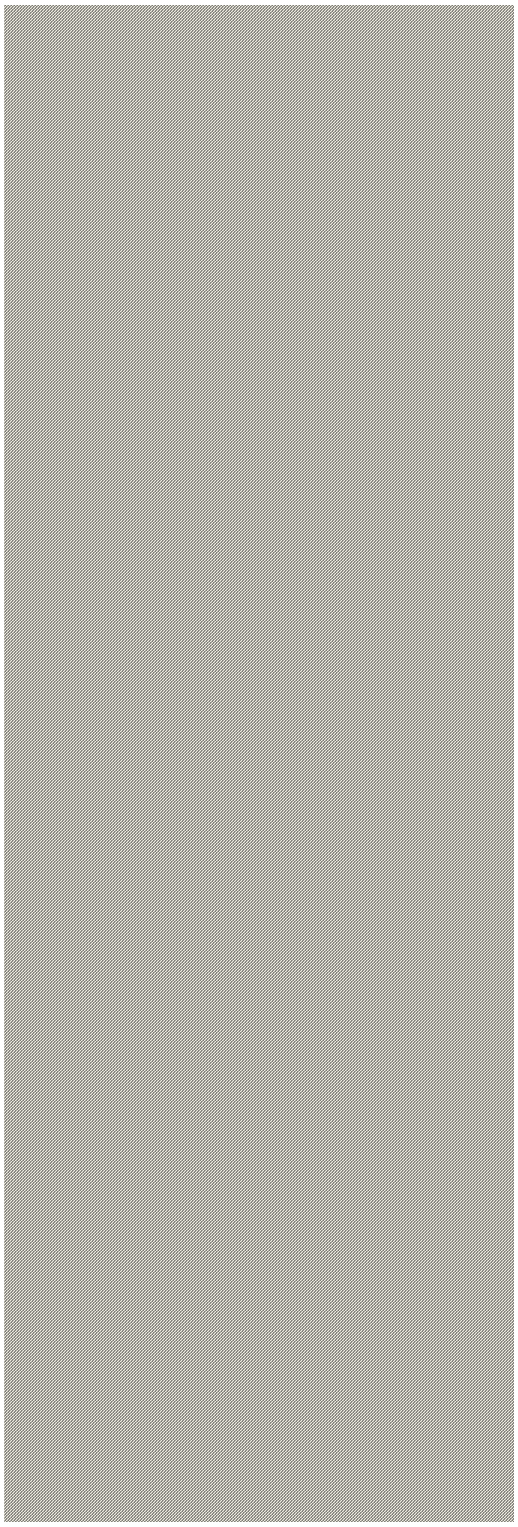
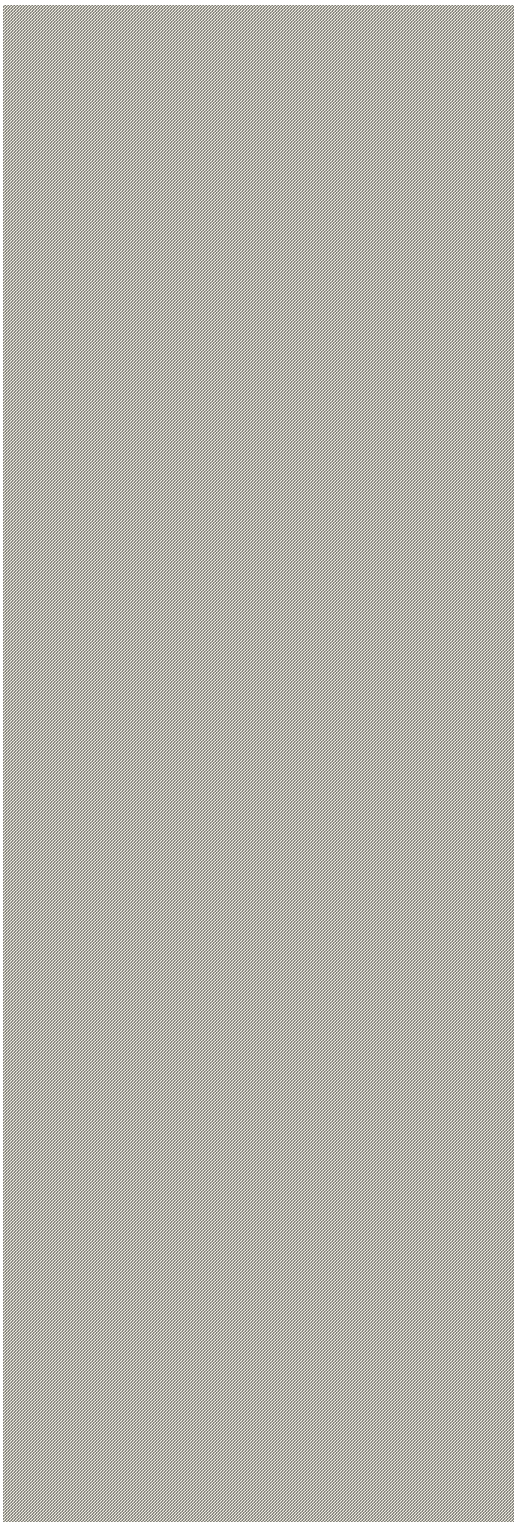
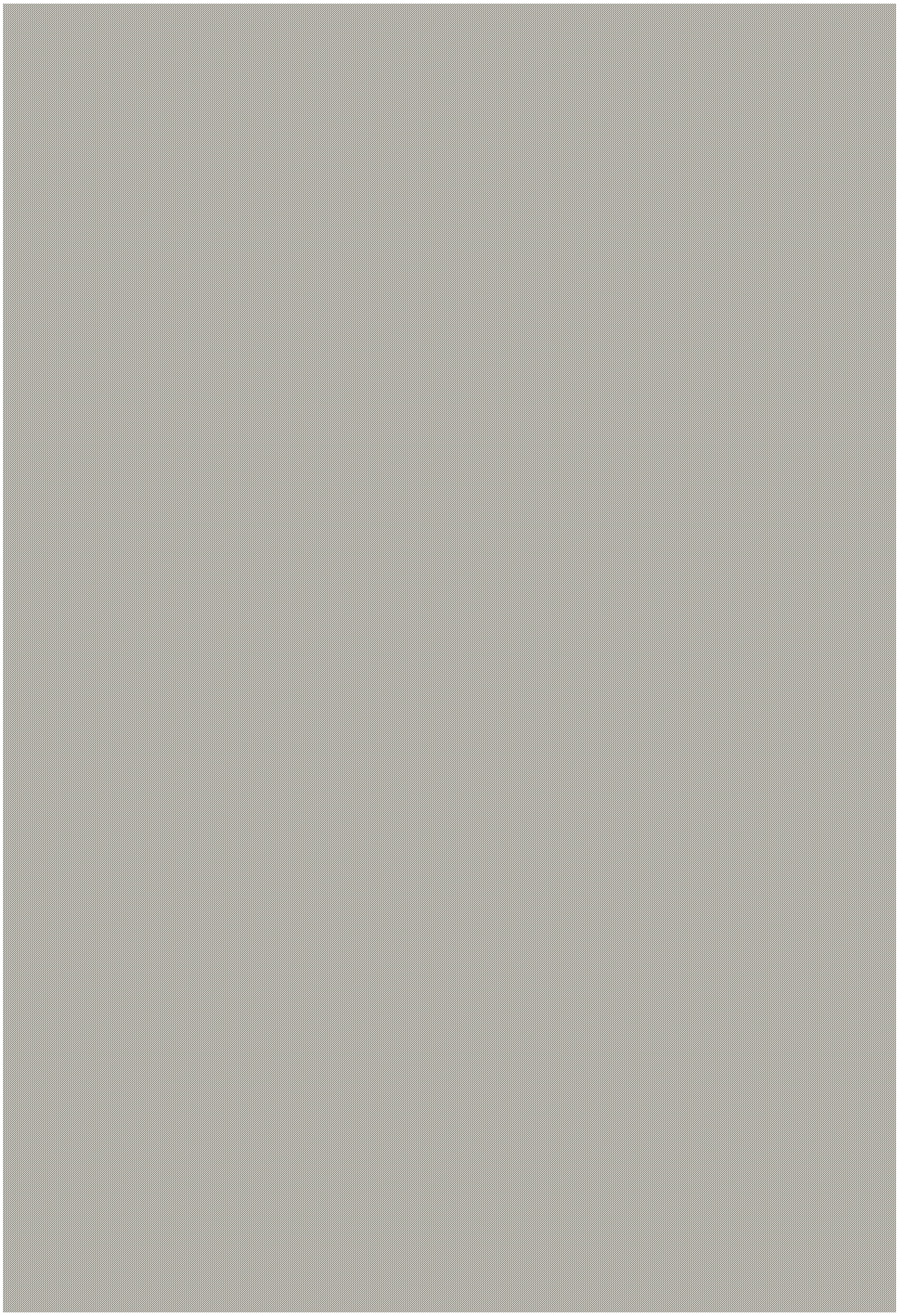
ulation 1[b]	State-specific subpopulation 2[b]			Stat
State-specific subpopulation 1 rate/percentage	State-specific subpopulation 2 denominator	State-specific subpopulation 2 numerator or count	State-specific subpopulation 2 rate/percentage	State-specific subpopulation 3 denominator
		EXAMPLE:		
		EXAMPLE:		
		EXAMPLE:		







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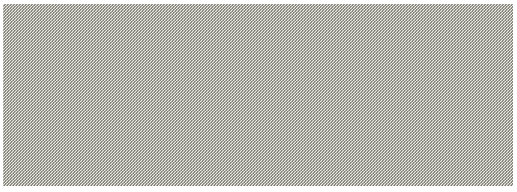

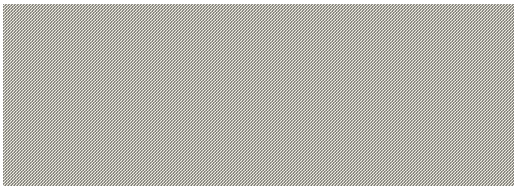

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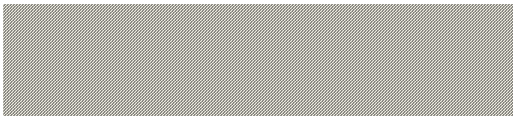

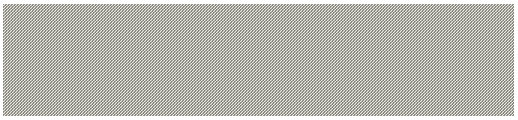

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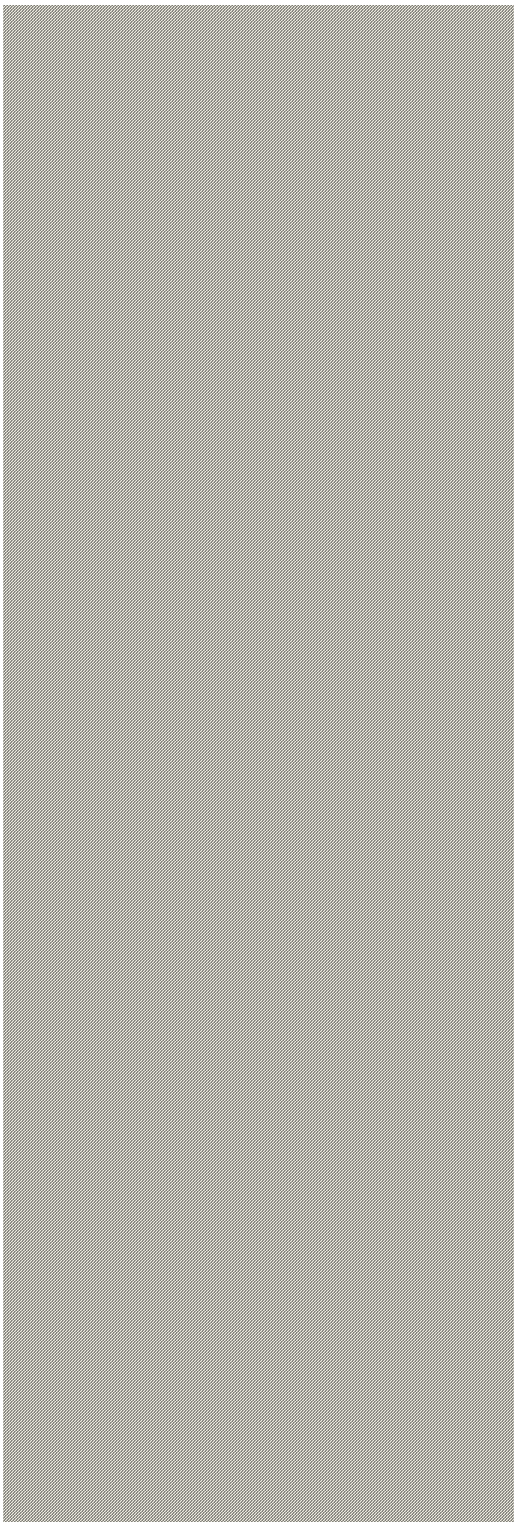
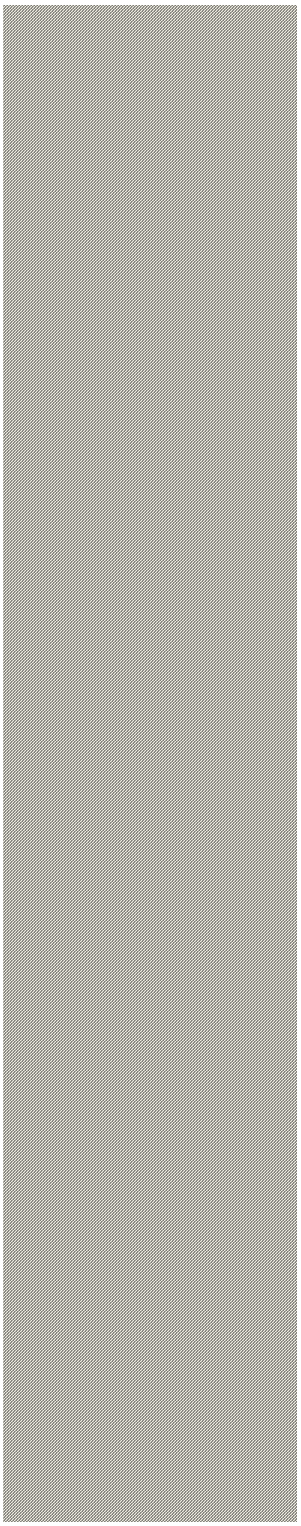
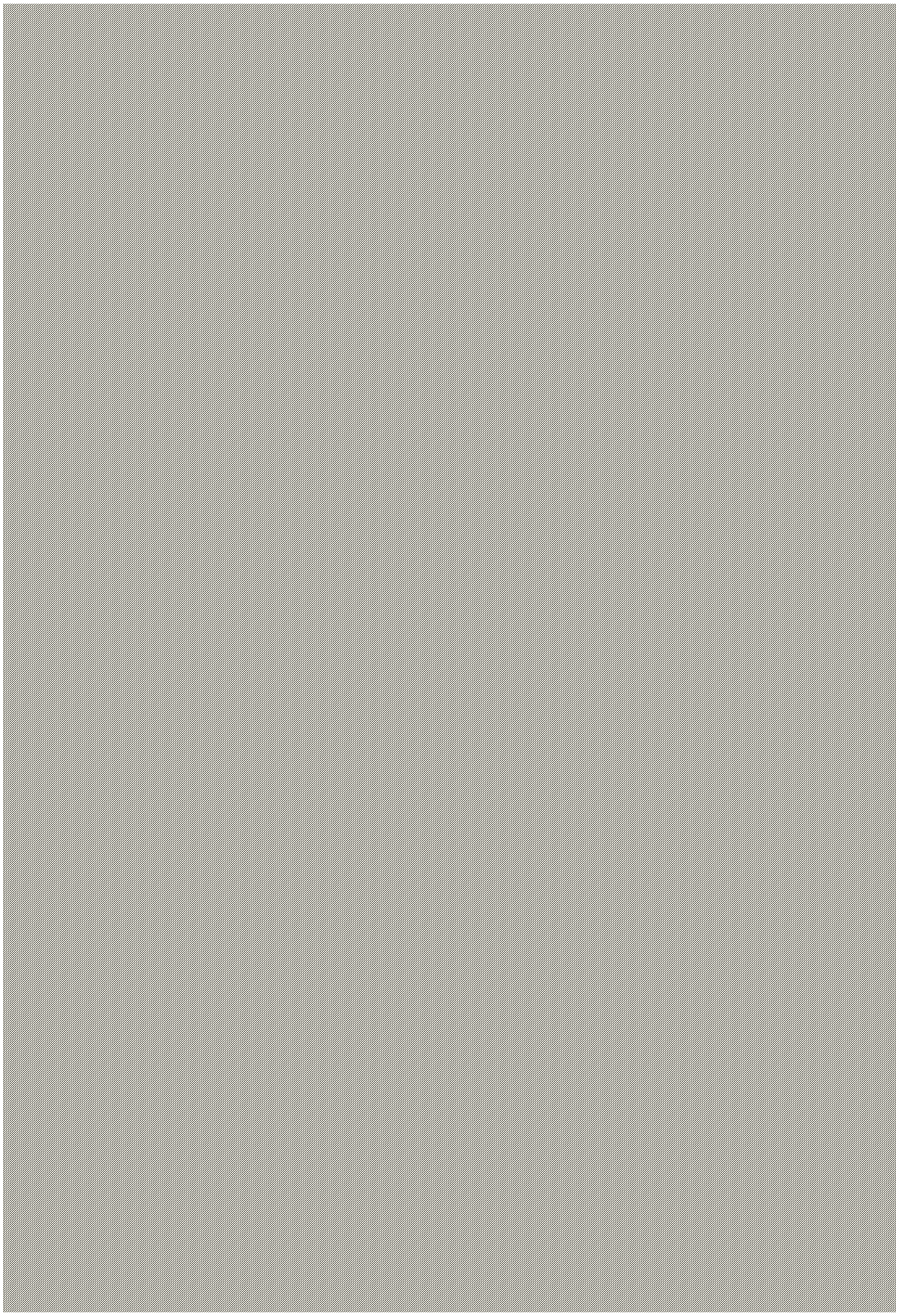
te-specific subpopulation 3[b]		State-specific subpopulation 4[b]		
State-specific subpopulation 3 numerator or count	State-specific subpopulation 3 rate/percentage	State-specific subpopulation 4 denominator	State-specific subpopulation 4 numerator or count	State-specific subpopulation 4 rate/percentage
EXAMPLE:			*EXAMPLE:*	
EXAMPLE:			*EXAMPLE:*	
EXAMPLE:			*EXAMPLE:*	







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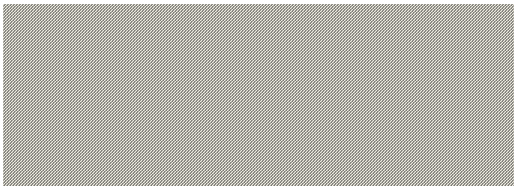

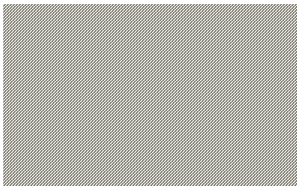

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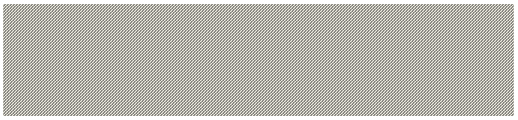

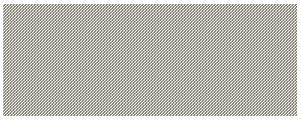

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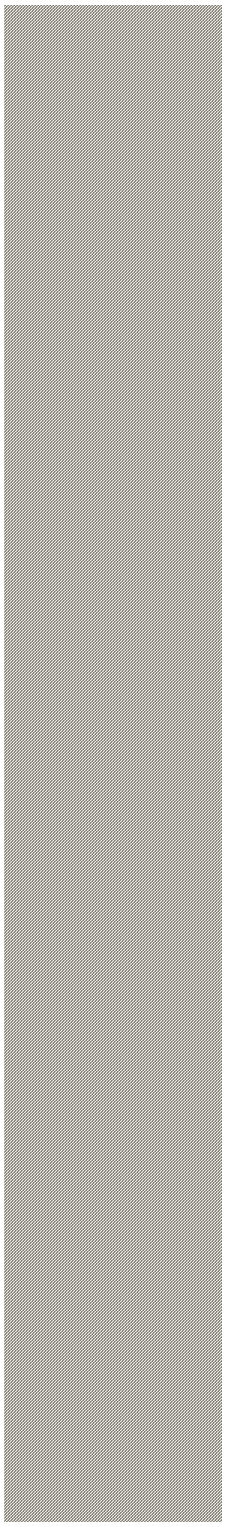
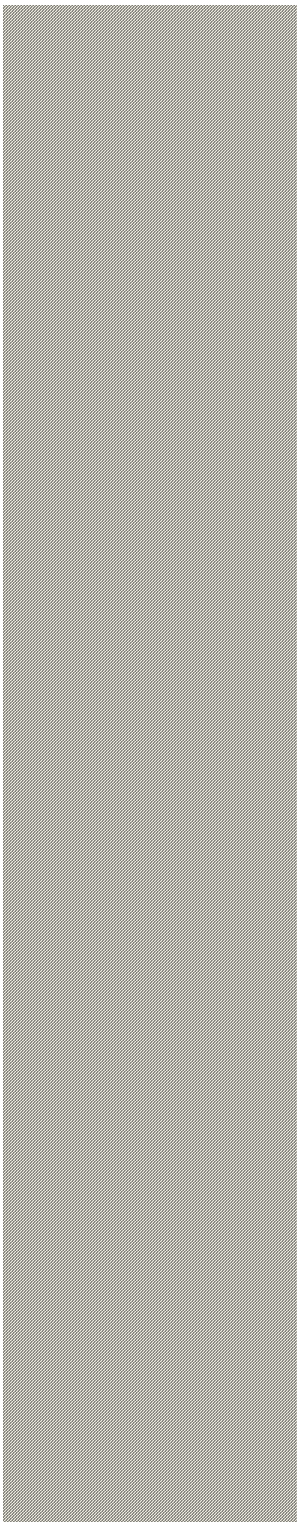
State-specific subpopulation 5[b]		
State-specific subpopulation 5 denominator	**State-specific subpopulation 5 numerator or count**	**State-specific subpopulation 5 rate/percentage**
	EXAMPLE:	
	EXAMPLE:	
	EXAMPLE:	





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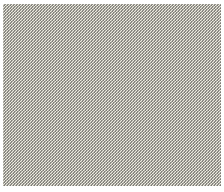

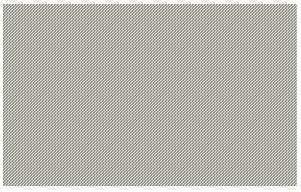

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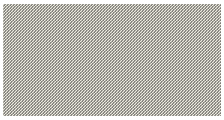

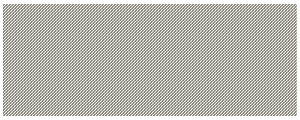

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