

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
<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,  
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]<sup>c,d</sup>

- 17(2) Follow-up after Emergency Department Visit for Mental Illness (FUM-AD)  
[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)  
[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] <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 #1: 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 r, 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 the measure specifications but has granted CMS permission to adjust the measure specifications that has not been certified via NCQA's Measure Certification. A measure rate called a "HEDIS rate" 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 :

<sup>b</sup> Enter any state-specific subpopulations that will be reported :

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

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

<sup>e</sup> 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

DY5

07/01/2021 - 06/30/2022

Q2

10/01/2021 - 12/31/2021

**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  $\geq 18$  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	<i>Other annual metrics</i>	State-specific
Health IT	<i>Other annual metrics</i>	State-specific
Health IT	<i>Other annual metrics</i>	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): N</i>
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
Provider enrollment database; Claims database; Claims Provider enrollment database, SAMHSA datasets	Y	Y
	Y	N

Claims

Medical record review or claims	Y	Y
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
	Y	Y

State data on cause of death		
	Y	Y
Claims	N	N
Claims	N	N
Claims	N	N
Claims	N	N
Claims	N	N
	Y	Y
Administrative records	N	N
Administrative records	N	N
Administrative records	N	N
Claims; State-specific IMD database	Y	Y
<i>Administrative records</i>	Y	
<i>Administrative records</i>	Y	
<i>Administrative records</i>	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>
	Version 4.0

	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0

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



	Version 4.0
	Version 4.0





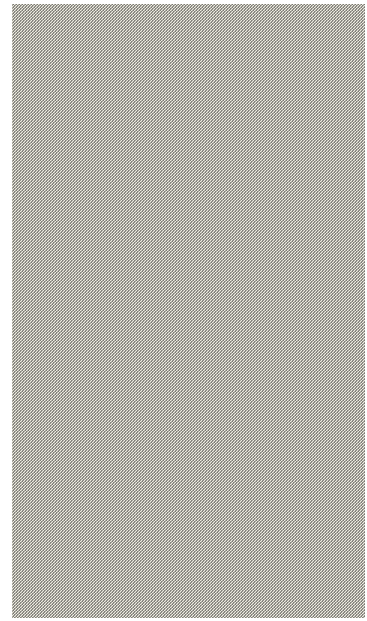
Reporting issue (Y/N) (further describe in SUD reporting issues tab)	Measurement period (month, quarter, year <sup>a</sup> )	Dates covered by measurement period (MM/DD/YYYY- MM/DD/YYYY)
<i>EXAMPLE:</i> Y	<i>EXAMPLE:</i> Month 1	<i>EXAMPLE:</i> 07/01/2018-7/31/2018
	<i>EXAMPLE:</i> Month 2	<i>EXAMPLE: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

	Month 1	
N	Month 2	07/01/2021-07/31/2021
	Month 3	08/01/2021-08/31/2021
	Month 3	09/01/2021-09/30/2021
	Month 1	
N	Month 2	07/01/2021-07/31/2021
	Month 3	08/01/2021-08/31/2021
	Month 3	09/01/2021-09/30/2021
	Month 1	
N	Month 2	07/01/2021-07/31/2021
	Month 3	08/01/2021-08/31/2021
	Month 3	09/01/2021-09/30/2021
	Month 1	
N	Month 2	07/01/2021-07/31/2021
	Month 3	08/01/2021-08/31/2021
	Month 3	09/01/2021-09/30/2021
	Month 1	
N	Month 2	07/01/2021-07/31/2021
	Month 3	08/01/2021-08/31/2021
	Month 3	09/01/2021-09/30/2021
	Year	
	Year	

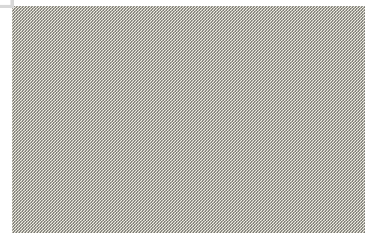
id prescribers of MAT. We believe this is an eff



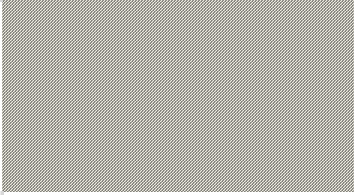
Year



Year



Year

	Year	
	Year	
	Year	
	Year	
	Year	
	Year	
N	Month 1	07/01/2021-07/31/2021
	Month 2	08/01/2021-08/31/2021
	Month 3	09/01/2021-09/30/2021
	Month 1	07/01/2021-07/31/2021
N	Month 2	08/01/2021-08/31/2021
	Month 3	09/01/2021-09/30/2021
	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
	<i>EXAMPLE:</i> 100		
	<i>EXAMPLE:</i> 100		
	<i>EXAMPLE:</i> 100		
	26712		
	27011		
	27104		

10527

10783

10483

7035

7145

6908

6352

6625

6425

113

126

108

1196

1244

1192

393

424

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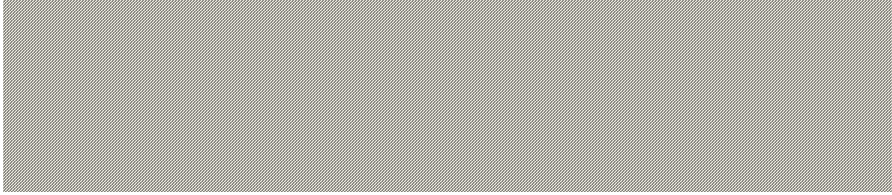
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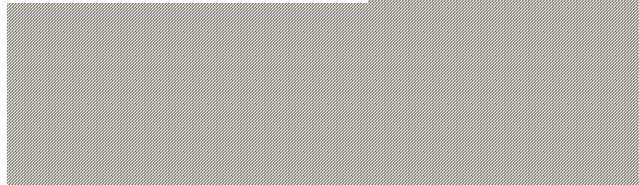
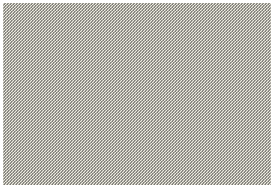
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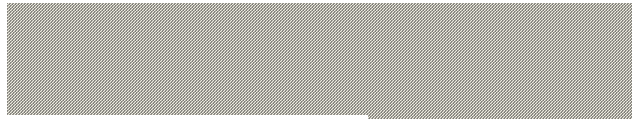
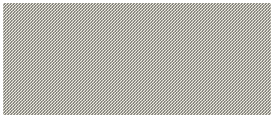
408414	1741	4.262831343	198769
413293	1652	3.997164239	198883
417256	1589	3.808213663	198631
408414	829	2.029803092	198769
413293	773	1.8703438	198883
417256	756	1.811837337	198631

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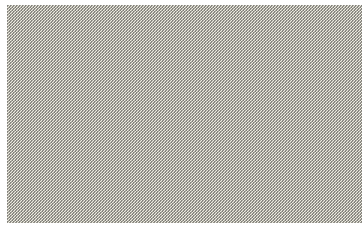
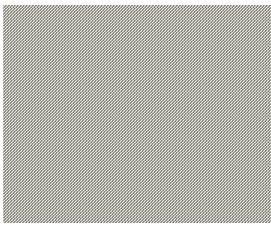
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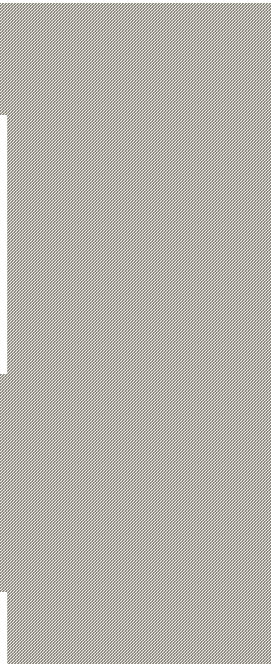
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Age < 18		Age 18-64	
Age < 18 numerator or count	Age <18 rate/percentage	Age 18-64 denominator	Age 18-64 numerator or count
<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
595			25347
610			25619
621			25676

167

10178

191

10396

201

10068

140

6709

151

6813

152

6579

126

6132

139

6369

133

6155

2

106

2

122

2

105

21

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31

1185

31

1129

0

379

0

413

0

346

8

5482

11

5601

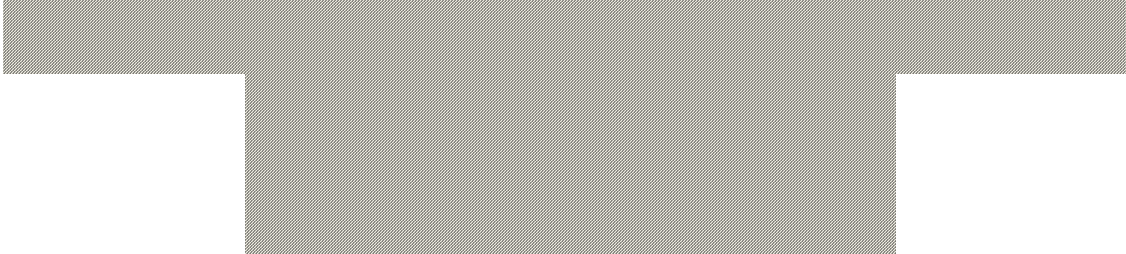
17

5400





21	0.105650277	185973	1646
25	0.125702046	188507	1558
32	0.161102748	190609	1477
9	0.04527869	185973	762
7	0.035196573	188507	720
8	0.040275687	190609	701



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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>	
		770 782 807	

182

196

214

186

181

177

94

117

137

5

2

1

26

28

32

14

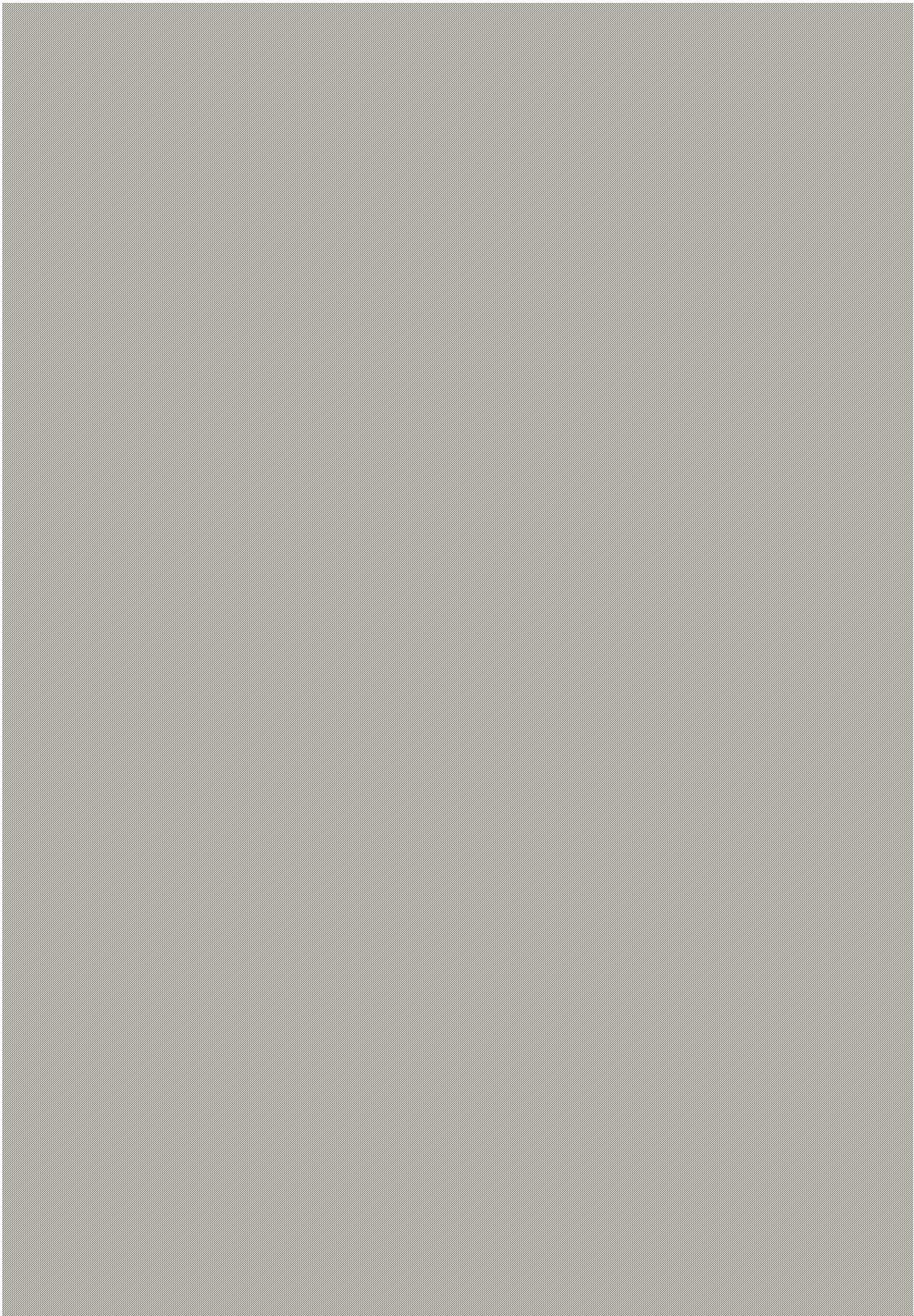
11


12

38

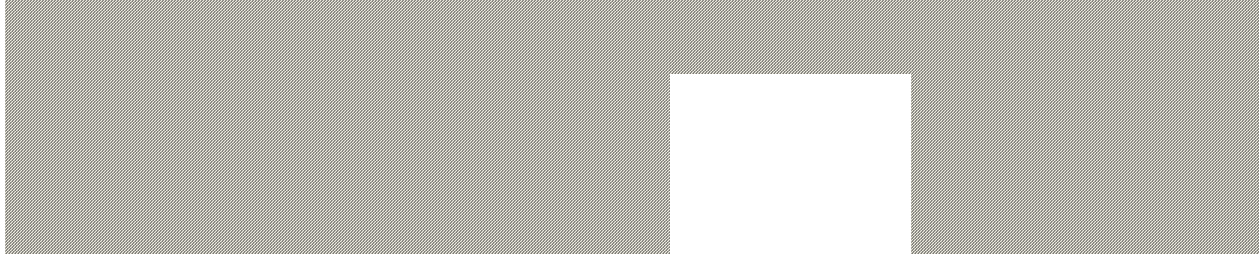
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52





8.850747151	23672	74	3.1260561
8.264945068	25903	69	2.663784118
7.748847116	28016	80	2.855511136
4.097368973	23672	58	2.450152078
3.81948681	25903	46	1.775856078
3.677685734	28016	47	1.677612793



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Dual eligible (Medicare-Medicaid eligible) Dual eligible (Medicare-Medicaid eligible) denominator	Dual eligible (Medicare-Medicaid eligible) Dual eligible (Medicare-Medicaid eligible) numerator or count	Dual eligible (Medicare-Medicaid eligible) Dual eligible (Medicare-Medicaid eligible) rate/percentage	Medicaid only Medicaid only denominator	Medicaid on Medicaid only numerator or count
	<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
	<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
	<i>EXAMPLE:</i>			<i>EXAMPLE:</i>
	2246			24466
	2200			24811
	2200			24904

438

460

455

350

314

290

305

317

312

16

12

11

28

31

28

16

20

18

31

34

32

10089

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6308

6113

97

114

97

1168

1213

1164

377

404

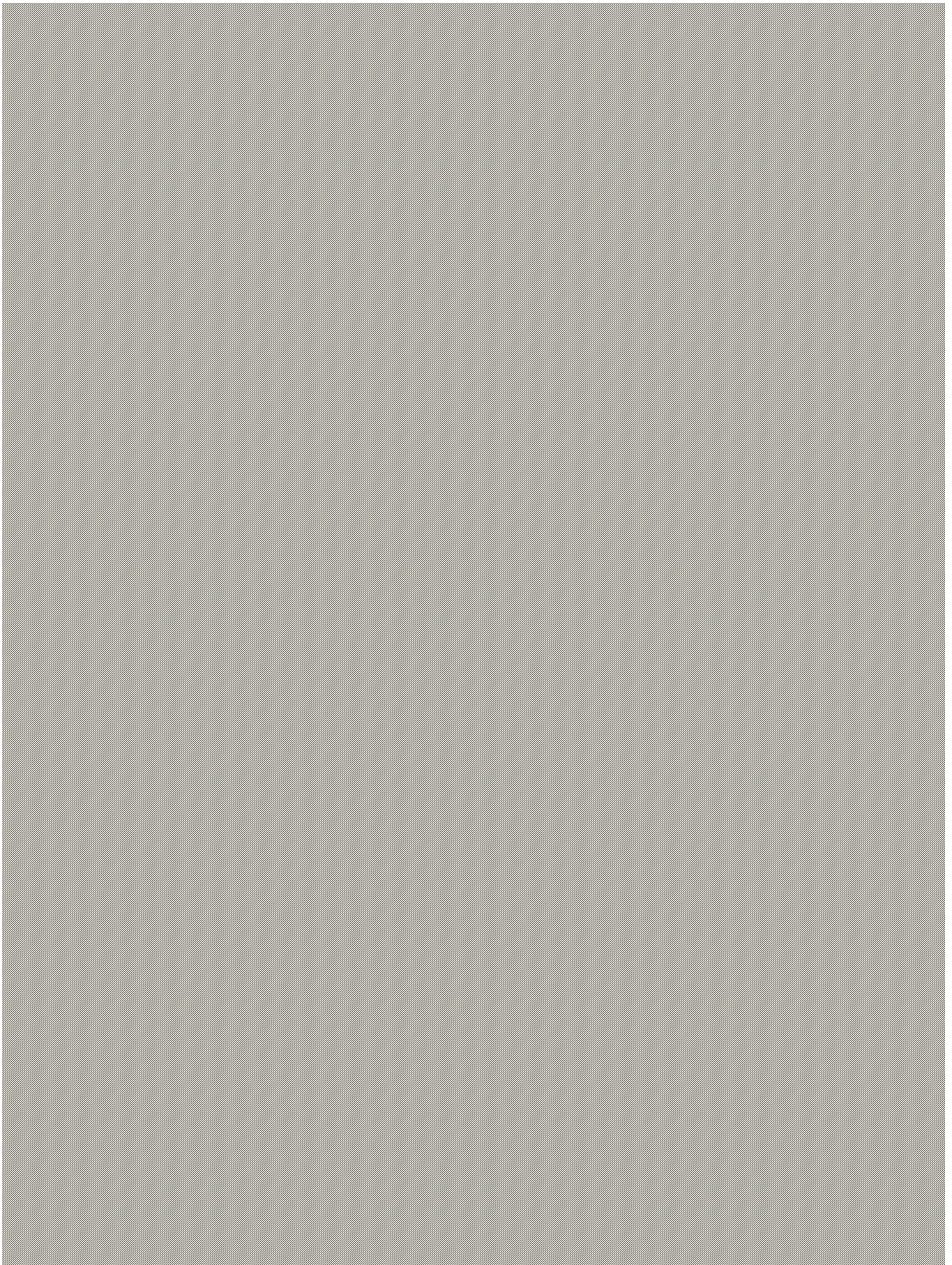
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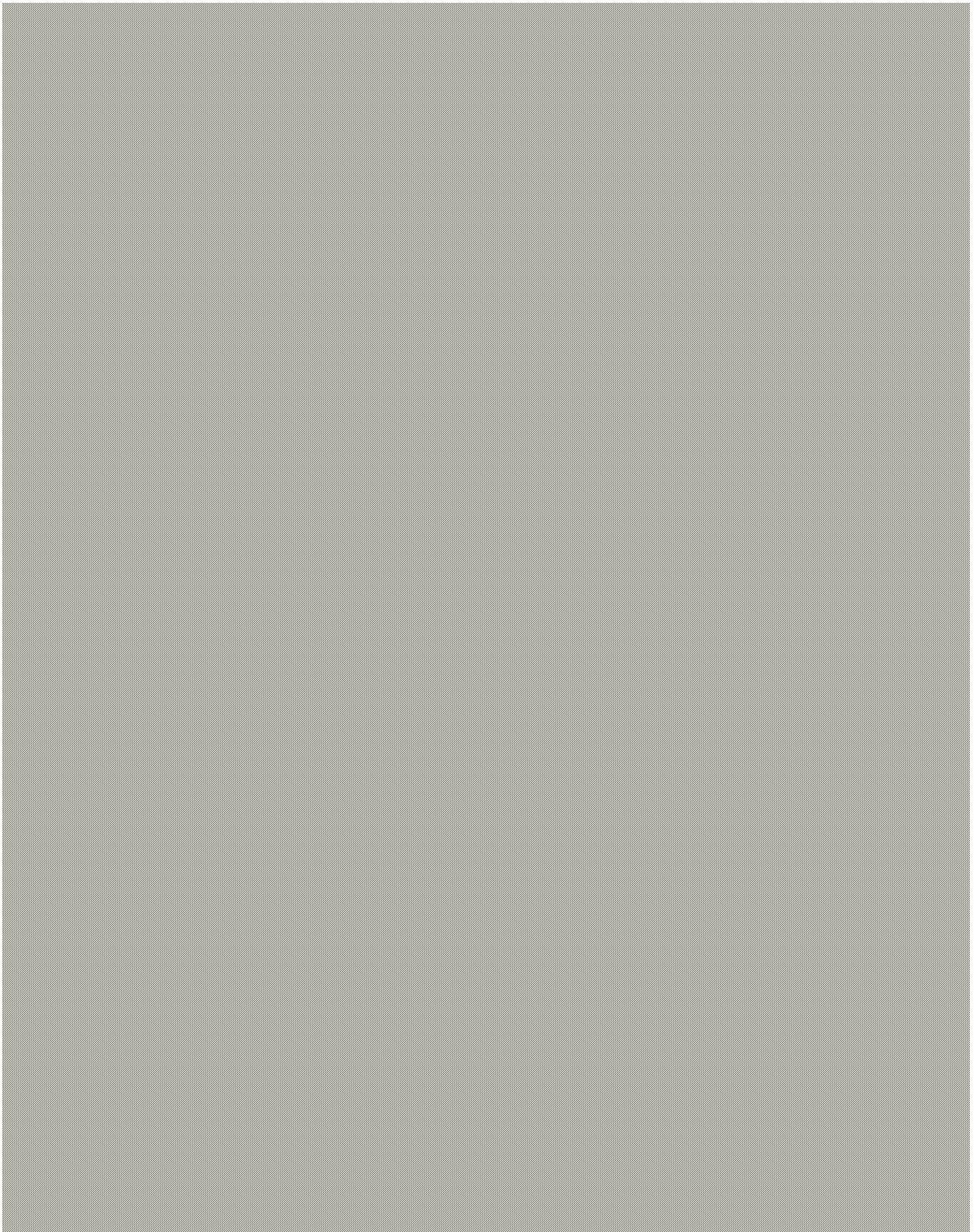
5497

5626

5437











ly  Medicaid only rate/percentage	Pregnant		
	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage
		<p data-bbox="760 1178 984 1035"><i>EXAMPLE:</i></p> <p data-bbox="760 1035 984 1102"><i>EXAMPLE:</i></p> <p data-bbox="760 1102 984 1178"><i>EXAMPLE:</i></p>	
		<p data-bbox="760 1913 984 1980">613</p> <p data-bbox="760 1980 984 2047">615</p> <p data-bbox="760 2047 984 2081">583</p>	

278

266

253

137

155

129

177

170

153

1

3

2

22

16

11

8

3

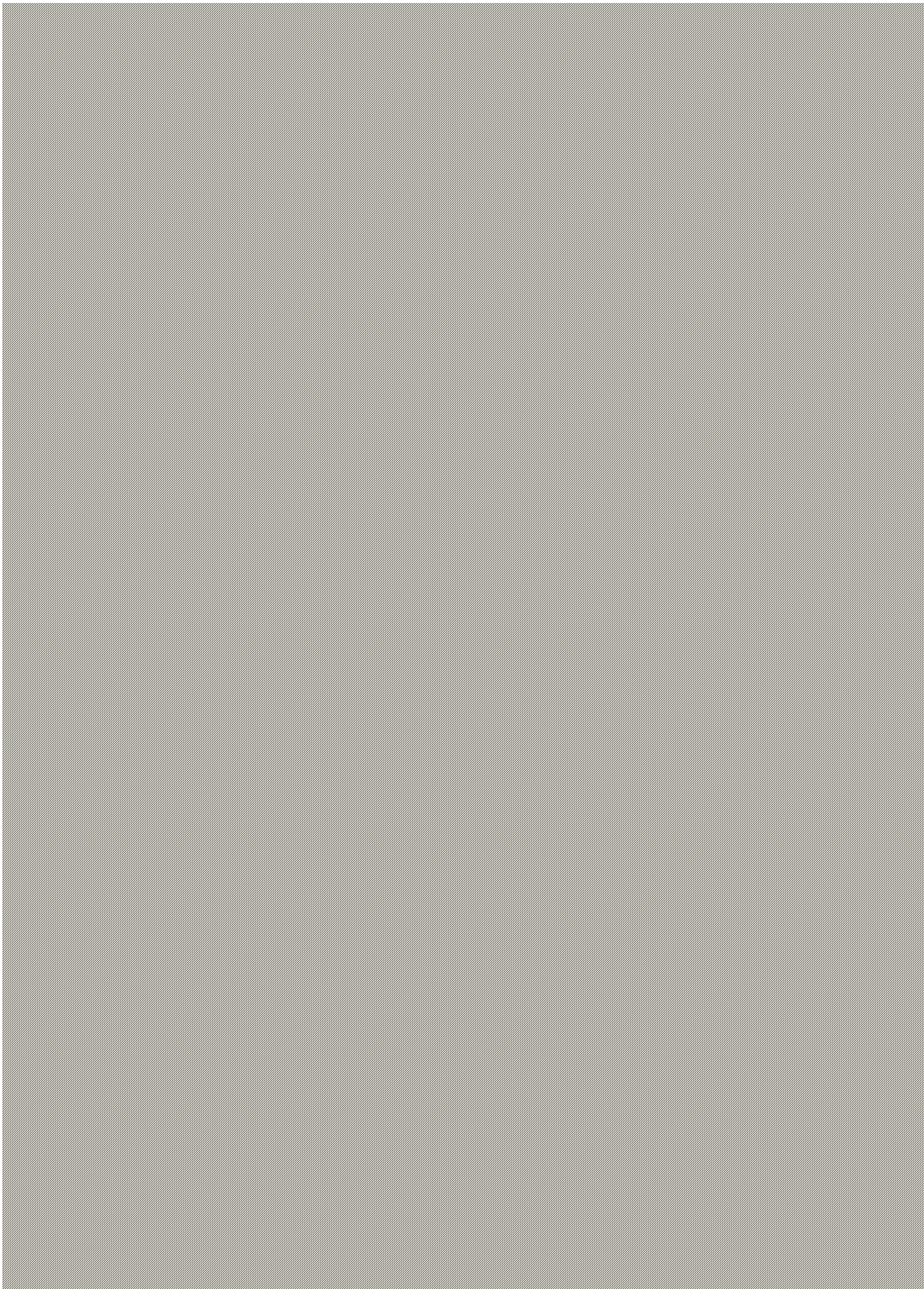
4

151

169

148











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>
	26099			
	26396			
	26521			

10249

10517

10230

6898

6990

6779

6175

6455

6272

112

123

106

1174

1228

1181

385

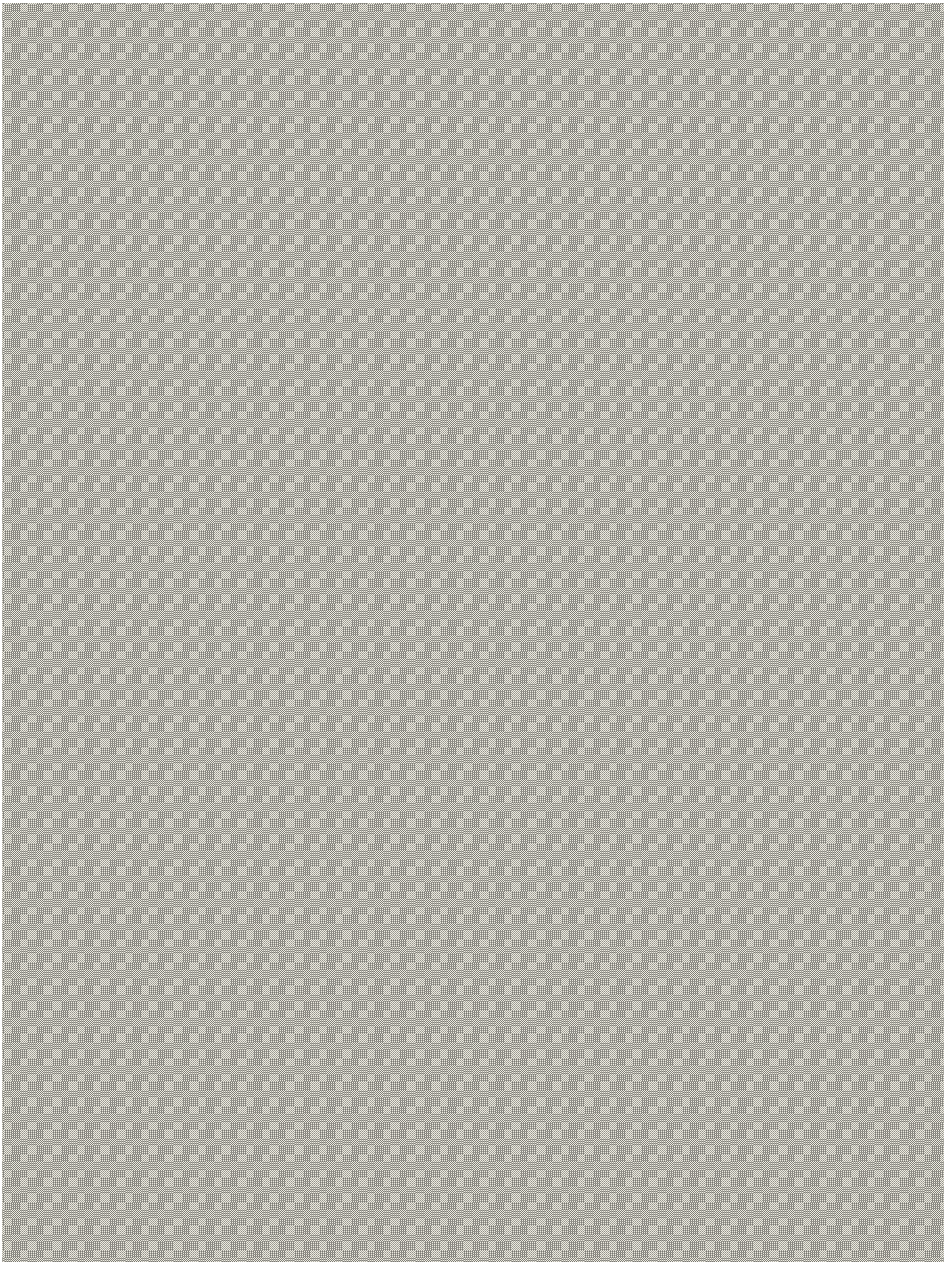
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354

5377

5491

5321



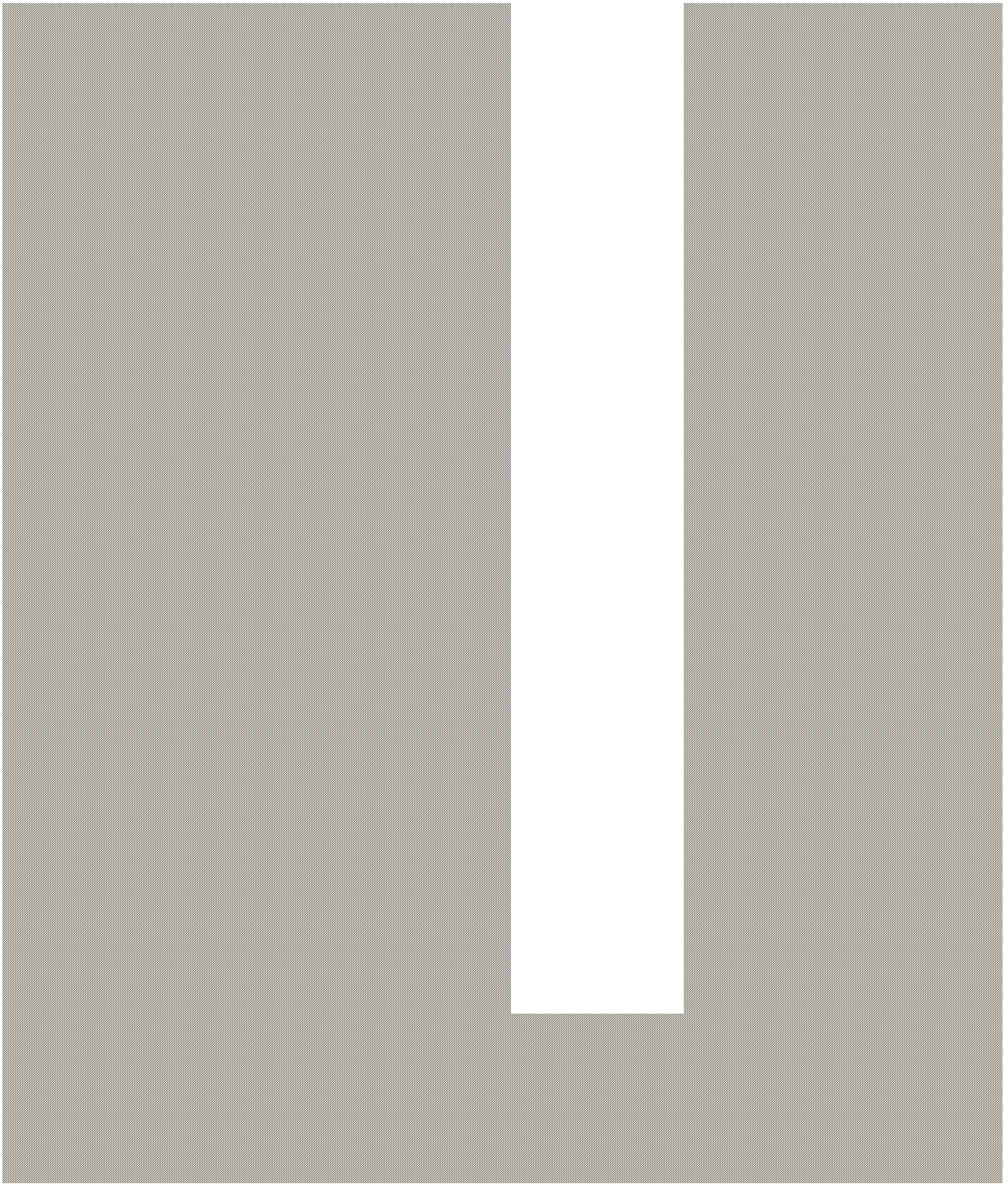


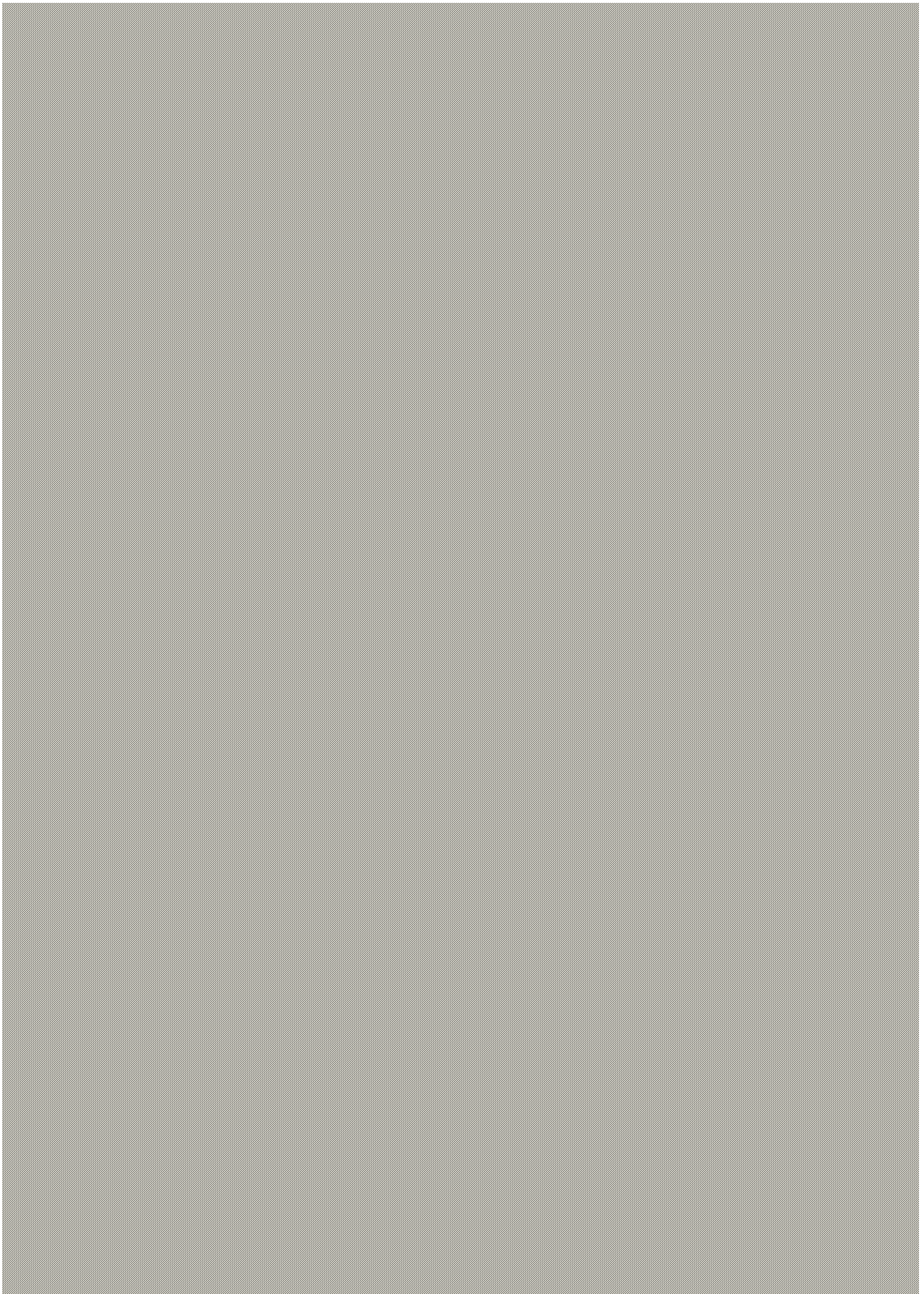


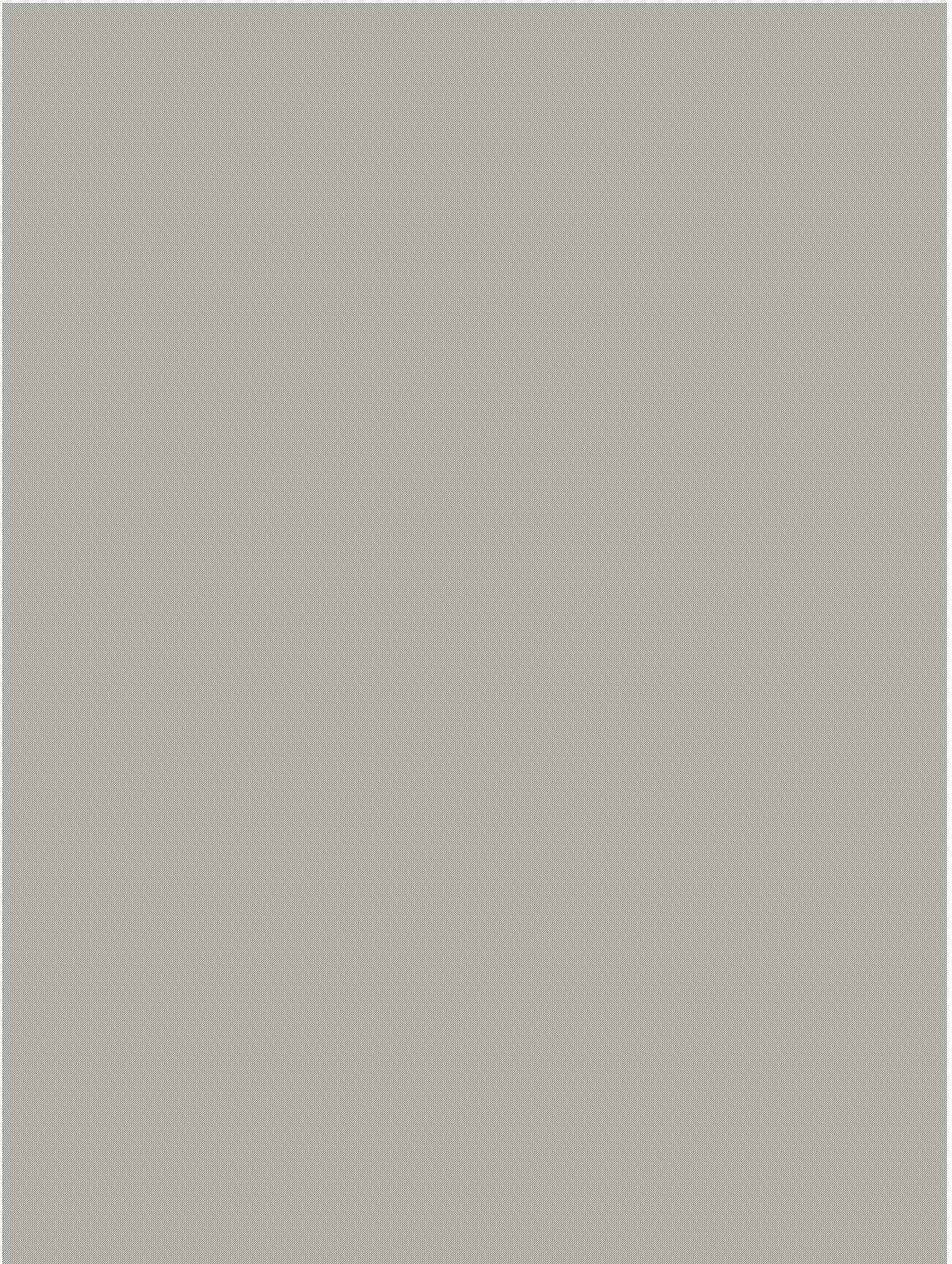




Criminally involved	Not criminally involved		
Criminally involved rate/percentage	Not criminally involved denominator	Not criminally involved numerator or count	Not criminally involved rate/percentage
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		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	







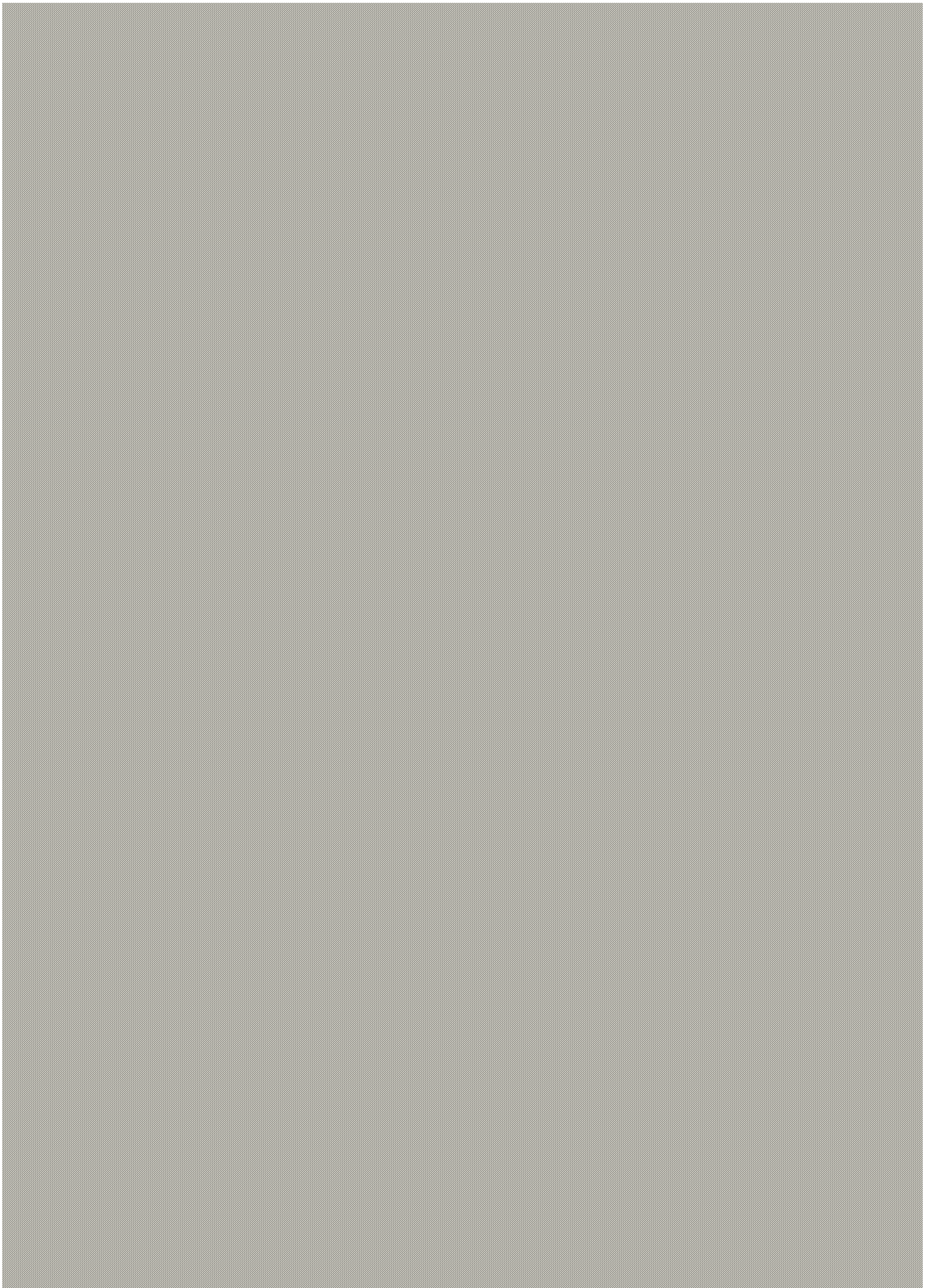




OUD subpopulation			State-specific subpop	
OUD subpopulation denominator	OUD subpopulation numerator or count	OUD subpopulation rate/percentage	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count
				<i>EXAMPLE:</i>
				<i>EXAMPLE:</i>
				<i>EXAMPLE:</i>
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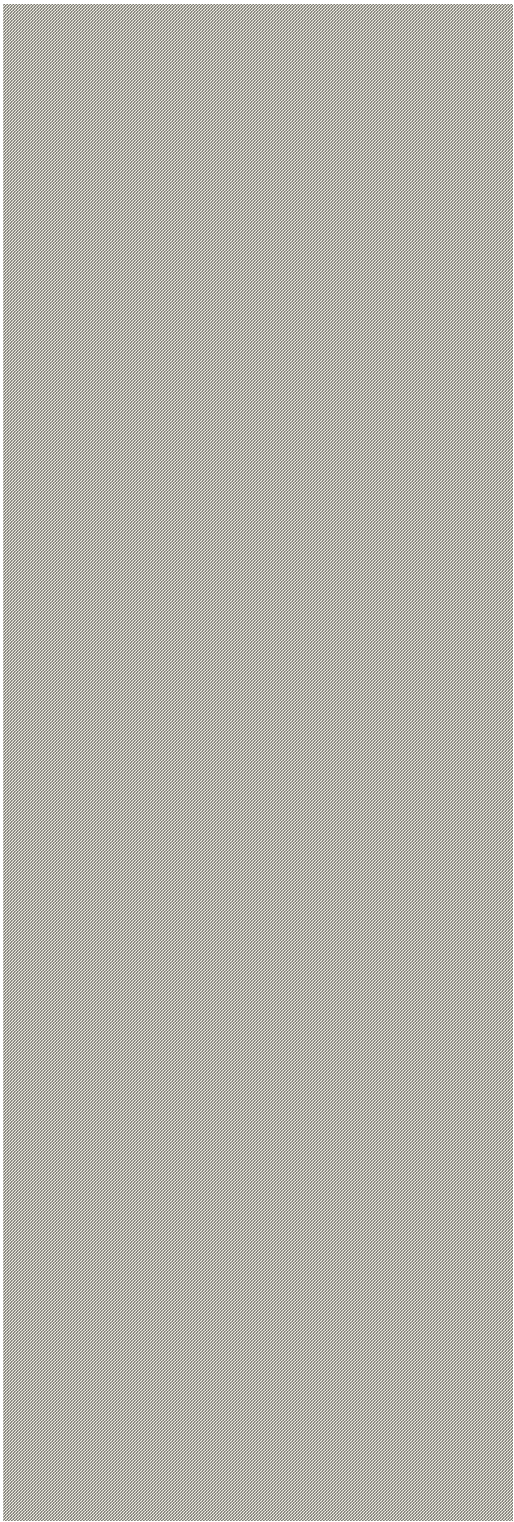


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ulation 1 <sup>b</sup>	State-specific subpopulation 2 <sup>b</sup>		Stat
State-specific subpopulation 1 rate/percentage	State-specific subpopulation 2 denominator	State-specific subpopulation 2 numerator or count	State-specific subpopulation 2 rate/percentage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







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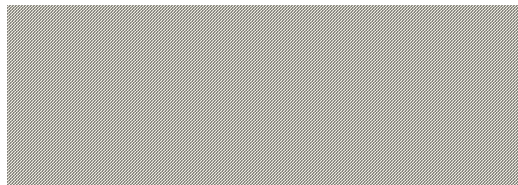
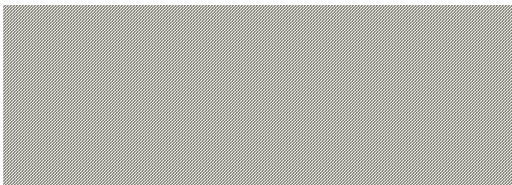
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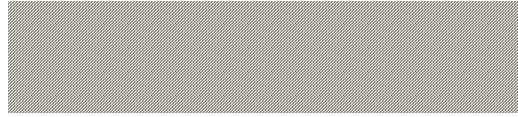
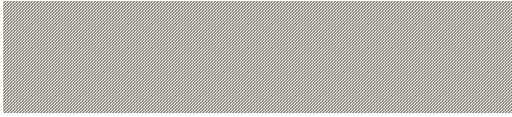
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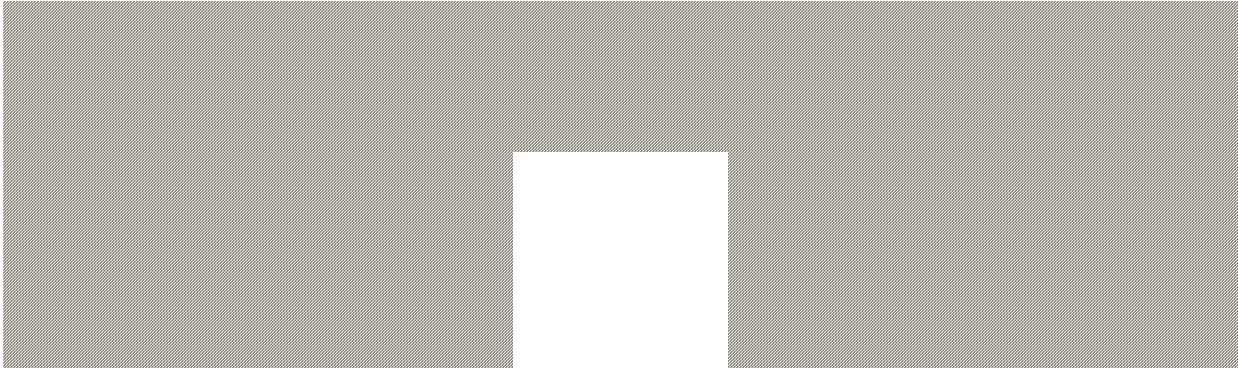


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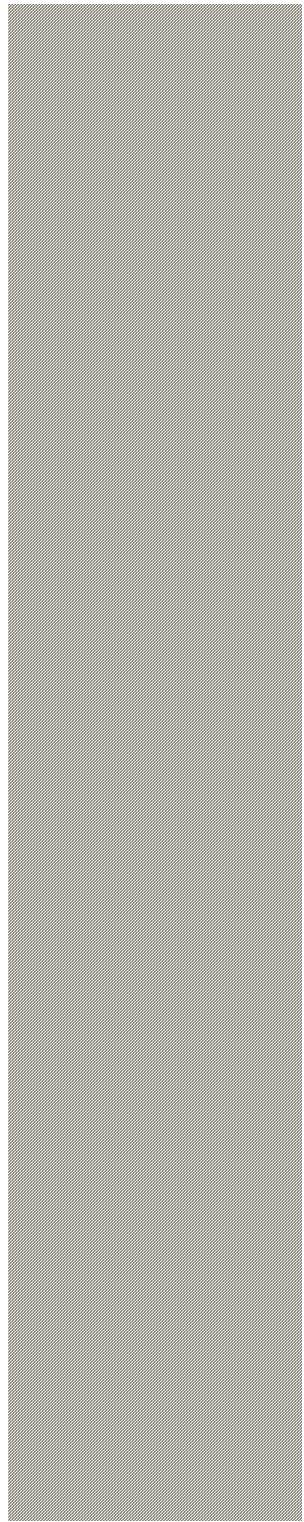
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State-specific subpopulation 3 <sup>b</sup>		State-specific subpopulation 4 <sup>b</sup>		
State-specific subpopulation 3 numerator or count	State-specific subpopulation 3 rate/percentage	State-specific subpopulation 4 denominator	State-specific subpopulation 4 numerator or count	State-specific subpopulation 4 rate/percentage
<i>EXAMPLE:</i>			<i>EXAMPLE:</i>	
<i>EXAMPLE:</i>			<i>EXAMPLE:</i>	
<i>EXAMPLE:</i>			<i>EXAMPLE:</i>	







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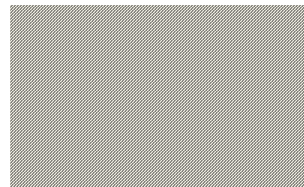
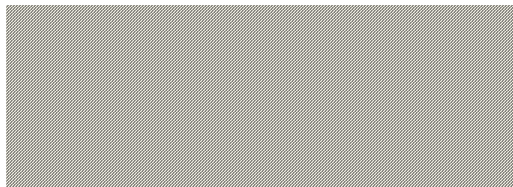
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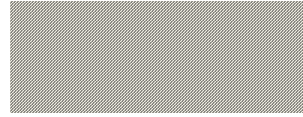
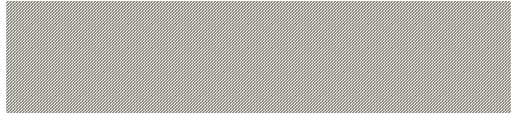
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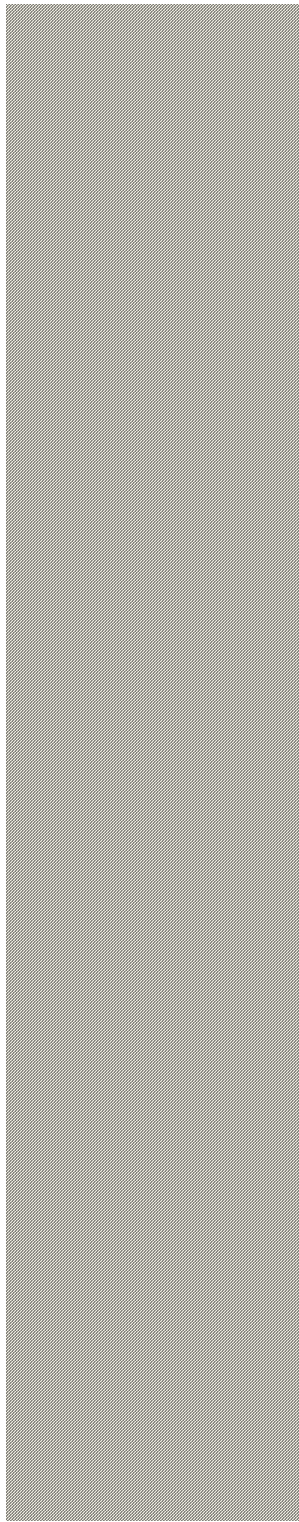
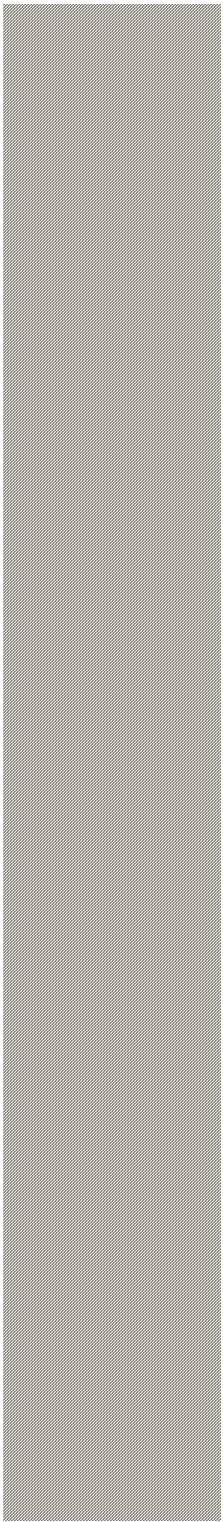
State-specific subpopulation 5<sup>b</sup>

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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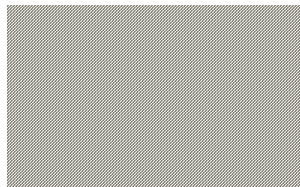
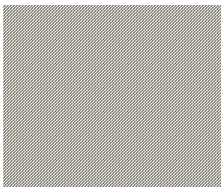
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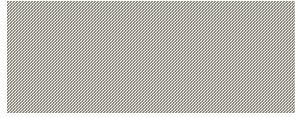
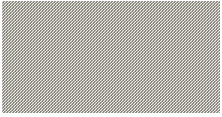
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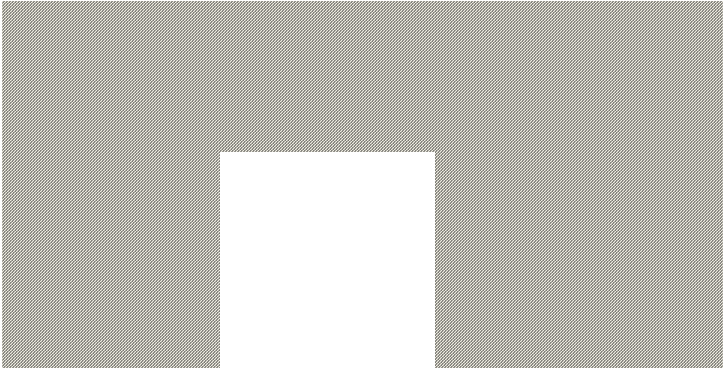


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