

#	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] ^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	<i>Project ECHO - OPIOID, ADDICTION, & 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 states 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 "unaudited HEDIS rates".

^a Report metrics that are one annual value for a demonstration year.

^b Enter any state-specific subpopulations that will be reported as a percentage of the total population.

^c Rates for these metrics reflect Uncertified, Unaudited HEDIS rates.

^d 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.

^e 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 ≥ 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 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> Assessment of need and qualification for SUD treatment services	<i>EXAMPLE:</i> Other monthly and quarterly metrics	<i>EXAMPLE:</i> 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 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

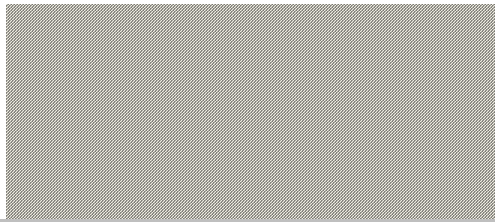
Medical record review or claims	Y	Y
Claims	N	N
Claims	Y	Y
Claims	Y	Y
Claims	Y	Y
	N	N

Claims		
	N	N
Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
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
Administrative records	Y	Y
	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

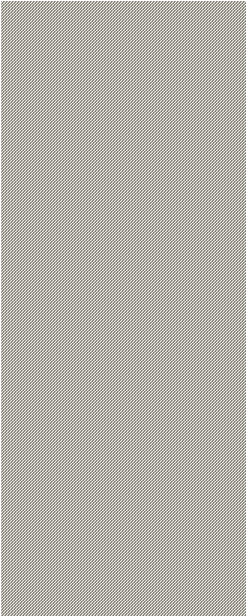


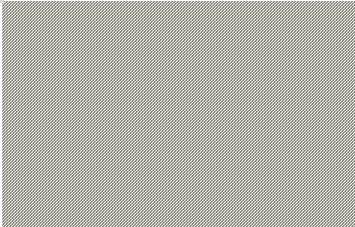
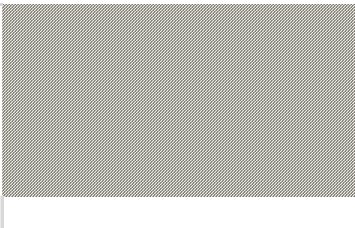
Deviations from CMS-provided technical specifications manual in approved protocol	Technical specifications manual version
<i>EXAMPLE (automatically populated): The Department will use state-defined procedure codes (list specific codes)</i>	<i>EXAMPLE: Version 3.0</i>

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



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)
<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	
	Month 2	4/1/2023-4/30/2023
	Month 3	5/1/2023-5/31/2023 6/1/2023-6/30/2023
N	Year	
	Year	7/1/2022-6/30/2023
N	Year	7/1/2022-6/30/2023
N	Month 1	
	Month 2	4/1/2023-4/30/2023
	Month 3	5/1/2023-5/31/2023 6/1/2023-6/30/2023
N	Month 1	
	Month 2	4/1/2023-4/30/2023
	Month 3	5/1/2023-5/31/2023 6/1/2023-6/30/2023
	Month 1	
	Month 2	4/1/2023-4/30/2023 5/1/2023-5/31/2023

N	Month 3 Month 1	6/1/2023-6/30/2023
N	Month 2 Month 3 Month 1	4/1/2023-4/30/2023 5/1/2023-5/31/2023 6/1/2023-6/30/2023
N	Month 2 Month 3 Month 1	4/1/2023-4/30/2023 5/1/2023-5/31/2023 6/1/2023-6/30/2023
N	Month 2 Month 3 Month 1	4/1/2023-4/30/2023 5/1/2023-5/31/2023 6/1/2023-6/30/2023
N	Month 2 Month 3	4/1/2023-4/30/2023 5/1/2023-5/31/2023 6/1/2023-6/30/2023
N	Year Year	7/1/2022-6/30/2023
N	Year	7/1/2022-6/30/2023
		
		01/01/2022-12/31/2022
		01/01/2022-12/31/2022
		01/01/2022-12/31/2022
		01/01/2022-12/31/2022

N		01/01/2022-12/31/2022 01/01/2022-12/31/2022 01/01/2022-12/31/2022 01/01/2022-12/31/2022
	Year	
N	Year	 01/01/2022-12/31/2022 01/01/2022-12/31/2022
N	Year	 01/01/2022-12/31/2022
N	Year	01/01/2022-12/31/2022
N	Year	01/01/2022-12/31/2022

	Year	
	Year	
N		01/01/2022-12/31/2022
	Year	
N		01/01/2022-12/31/2022
	Month 1	4/1/2023-4/30/2023
	Month 2	5/1/2023-5/31/2023
N	Month 3	6/1/2023-6/30/2023
	Month 1	4/1/2023-4/30/2023
	Month 2	5/1/2023-5/31/2023
N	Month 3	6/1/2023-6/30/2023
	Year	
N		7/1/2022-6/30/2023
	Year	
N		7/1/2022-6/30/2023
	Year	
N		7/1/2022-6/30/2023
	Year	
	Year	
	Year	
	Year	
	Year	
N		01/01/2022-12/31/2022
	Quarter	
	Quarter	
	Quarter	
	Year	
N		7/1/2022-6/30/2023

Y

Year

Year

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>		
	31405		
	30496		
	29400		
	43828		
	2603		
	12278		
	12218		
	11882		
	58		
	49		
	49		
	7308		
	7286		

6991
127

122
122
1165

1288
1284
352

387
375
6155

5989
5997
436

101

4729	1901	40.19877353
4675	2532	54.16042781
6914	2638	38.15446919
14553	6143	42.21122793

4729	534	11.29202791
4675	1199	25.64705882
6914	836	12.09140874
14553	2340	16.07915894

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2301	950	41.28639722
2301	566	24.59800087

4332	1051	24.26131117
4332	626	14.45060018
6994	255	3.645982271

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8540

1653

19.3559719

10828

2363

21.82305135

503977

1442

2.861241684

231648

482599

1464

3.033574458

220891

462538

1446

3.126229629

210858

503977

835

1.656821641

231648

482599

860

1.782017783

220891

462538

913

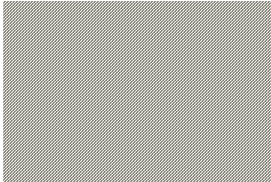
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210858

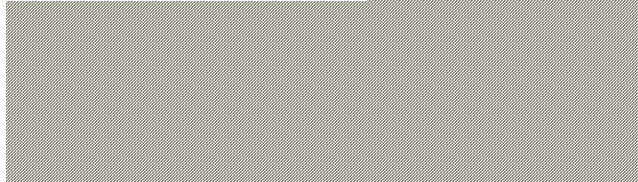
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1482

0.186767486



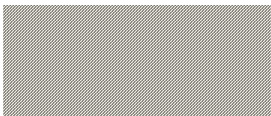
334



536910

334

0.622078188



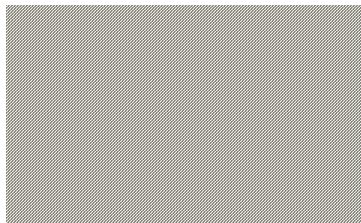
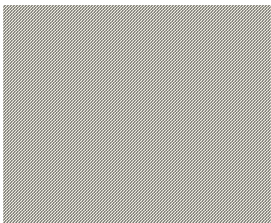
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29532

25762

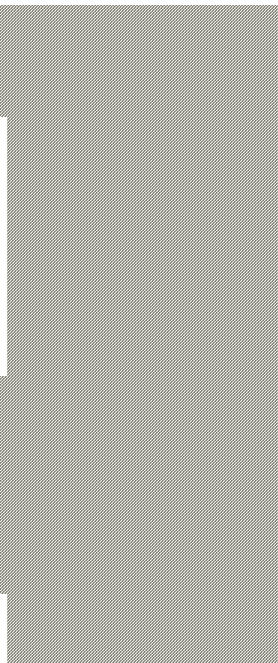
87.23418664



6176

177509

28.74174223



13

13

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>

673

29782

649

28915

634

27819

165

11875

190

11794

172

11463

1

57

1

48

0

49

85

7098

95

7081

90
1

3
3
23

24
25
0

0
0
10

22
20



6788
122

117
117
1133

1253
1249
351

385
375
6129

5955
5965





29	0.125189943	248661	1386
32	0.144867831	238705	1396
22	0.104335619	228250	1377
11	0.047485841	248661	727
14	0.063379676	238705	746
14	0.066395394	228250	794



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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>	
		950	
		932	
		947	
		238	
		234	
		247	
		0	
		0	
		0	
		125	
		110	

113

4

2

2

9

11

10

1

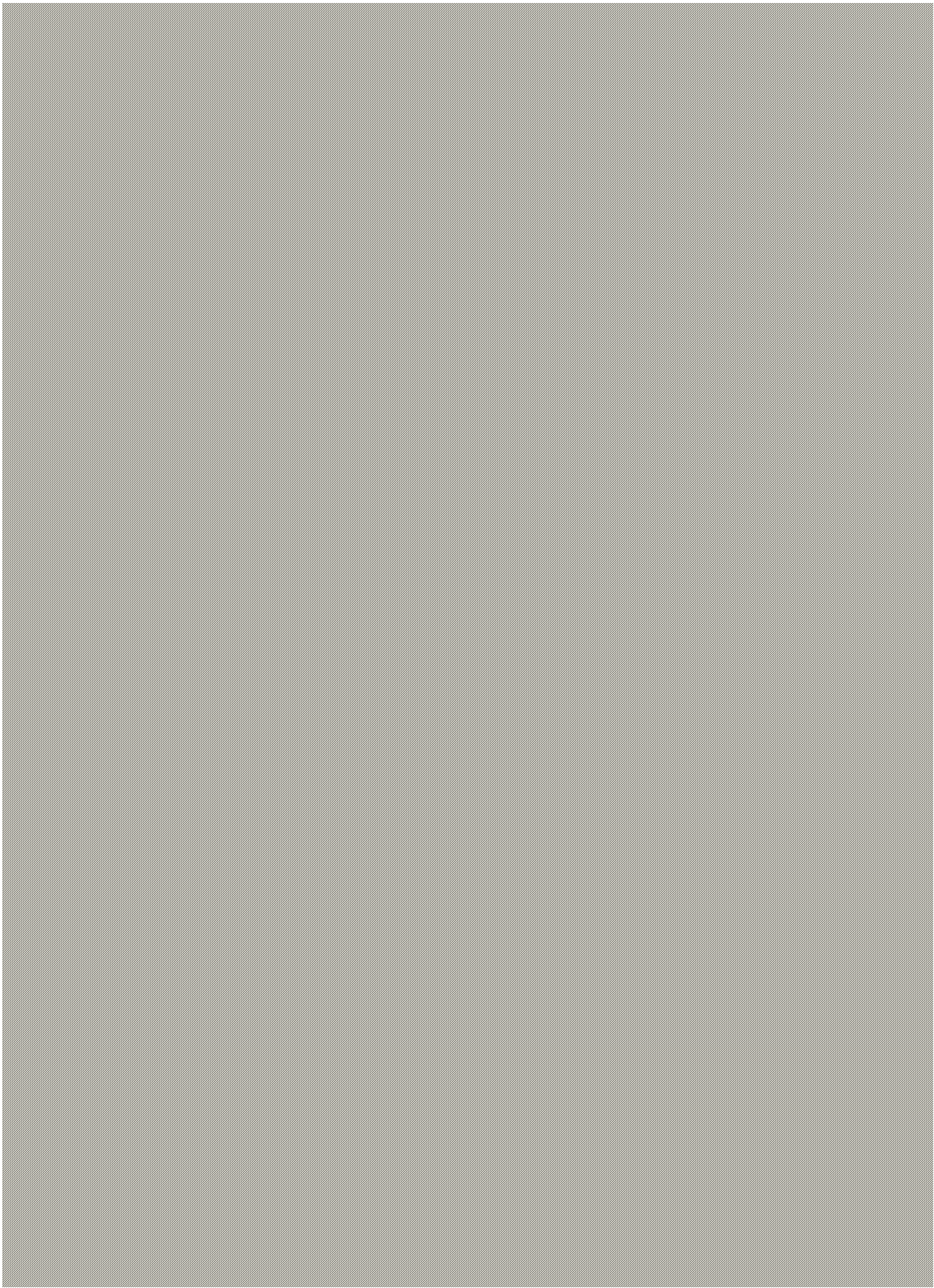
2

0

16

12

12



5.57385356	23668	27	1.140780801
5.848222702	23003	36	1.565013259
6.032858708	23430	47	2.005975245
2.923659118	23668	97	4.098360656
3.125196372	23003	100	4.347259053
3.47864184	23430	105	4.481434059

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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
	EXAMPLE:			EXAMPLE:
	EXAMPLE:			EXAMPLE:
	EXAMPLE:			EXAMPLE:
	2707			28698
	2655			27841
	2678			26722
	691			11587
	695			11523
	718			11164
	3			55
	5			44
	2			47
	463			6845
	450			6836

449
14

17
19
26

31
40
4

6
9
29

25
21

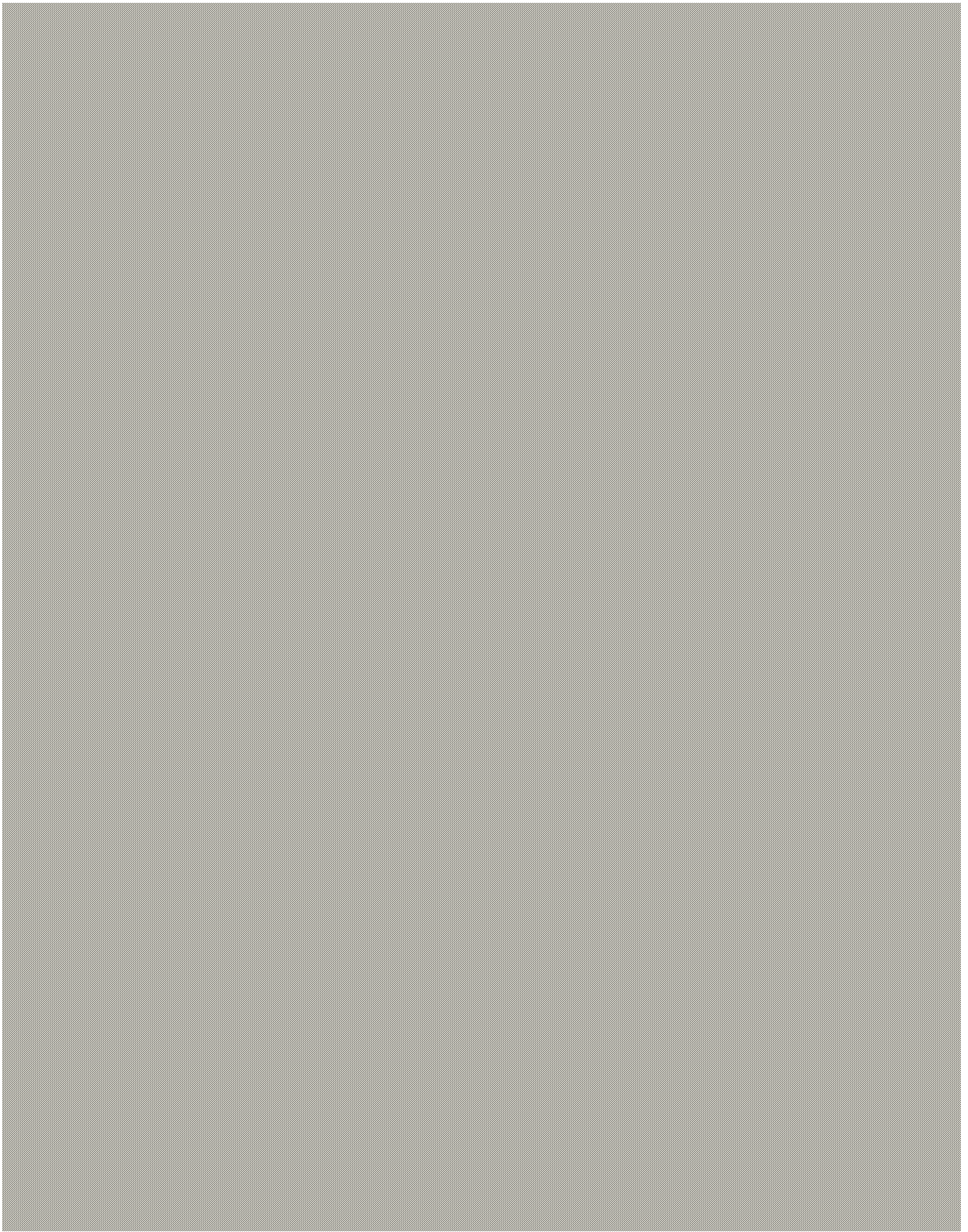
6542
113

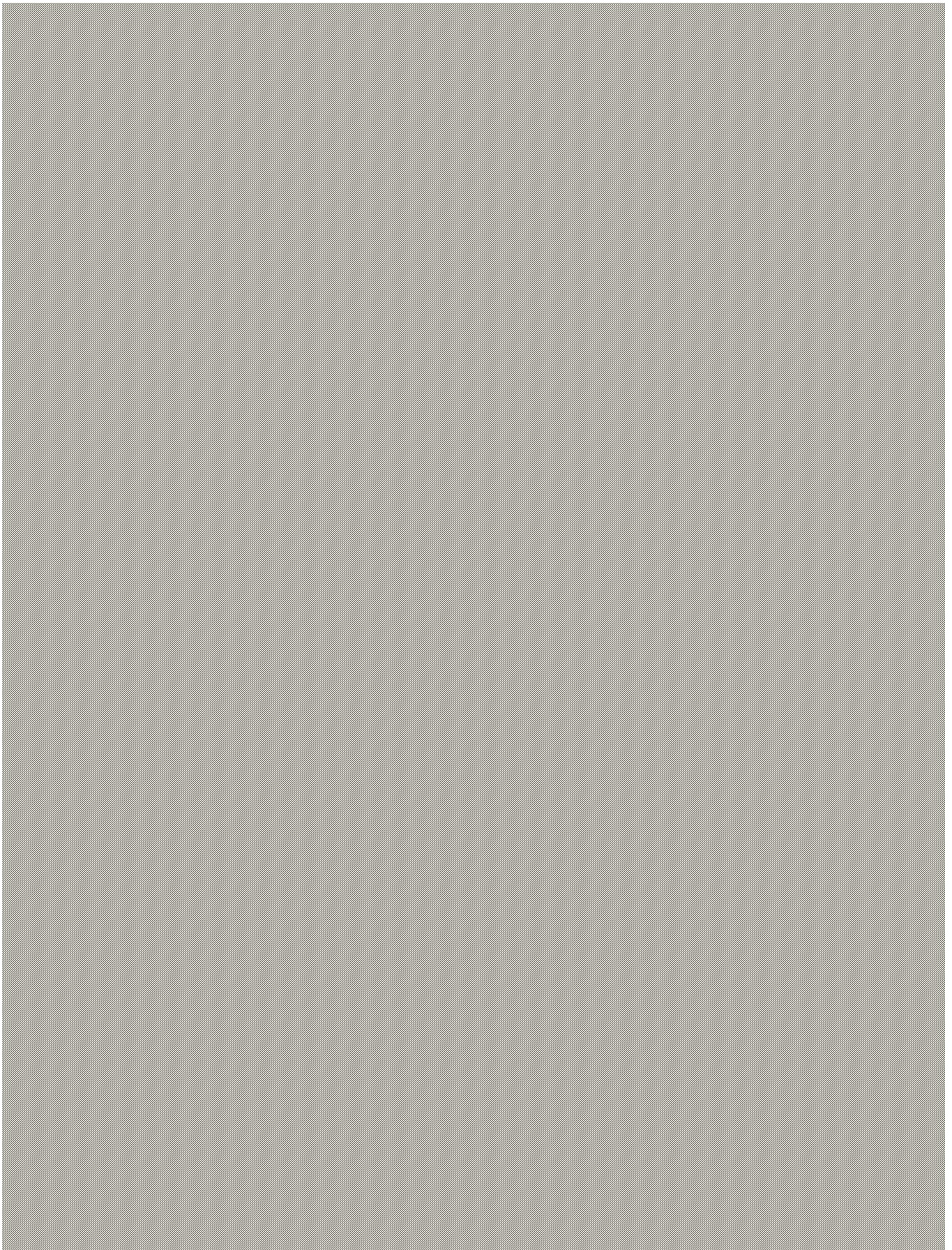
105
103
1139

1257
1244
348

381
366
6126

5964
5976







ly Medicaid only rate/percentage	Pregnant		
	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		478	
		438	
		416	
		206	
		192	
		194	
		1	
		3	
		0	
		128	
		128	

120
0

1
0
7

8
10
3

3
1
134

109
112







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>
	30927			
	30058			
	28984			
	12072			
	12026			
	11688			
	57			
	46			
	49			
	7180			
	7158			

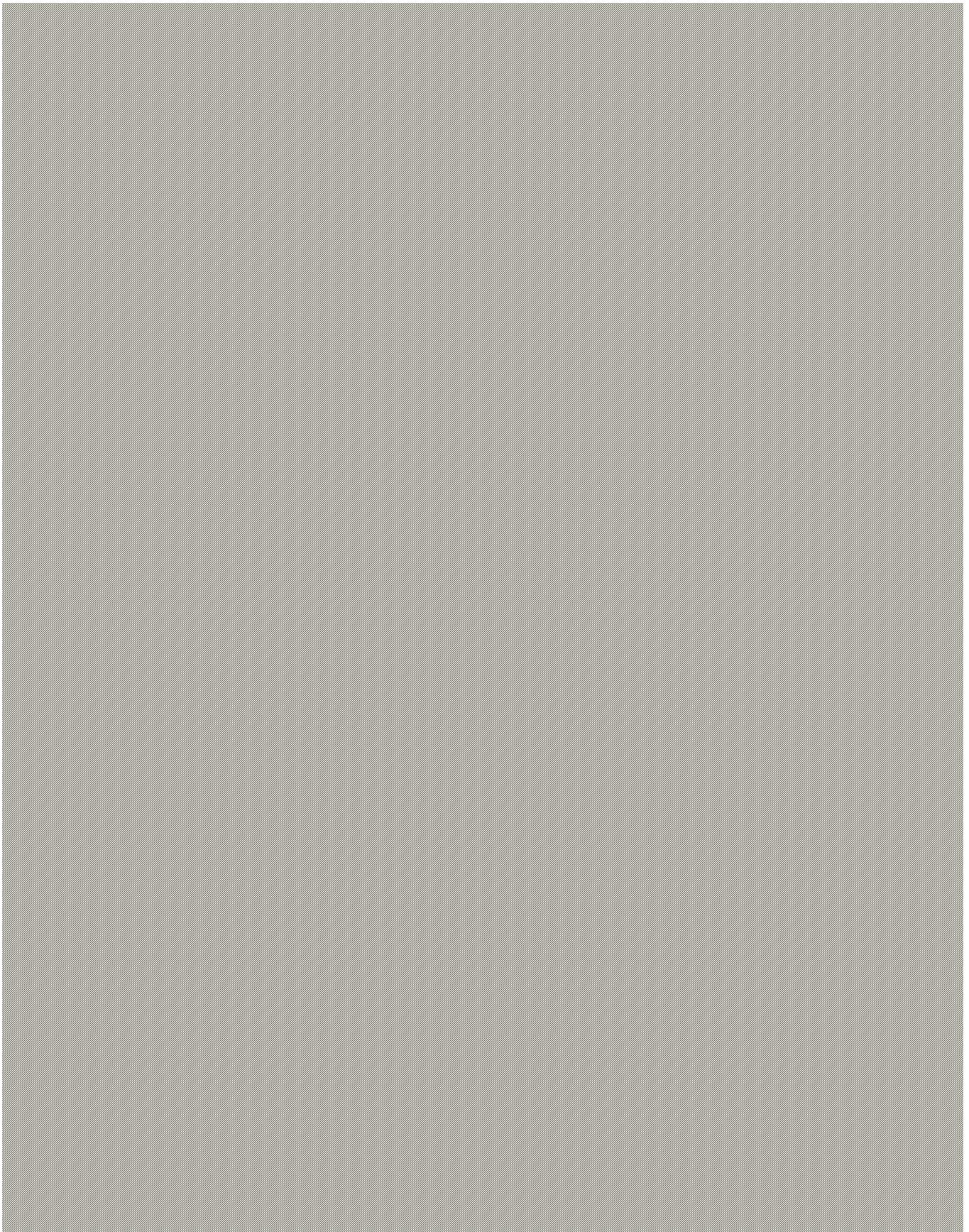
6871
127

121
122
1158

1280
1274
349

384
374
6021

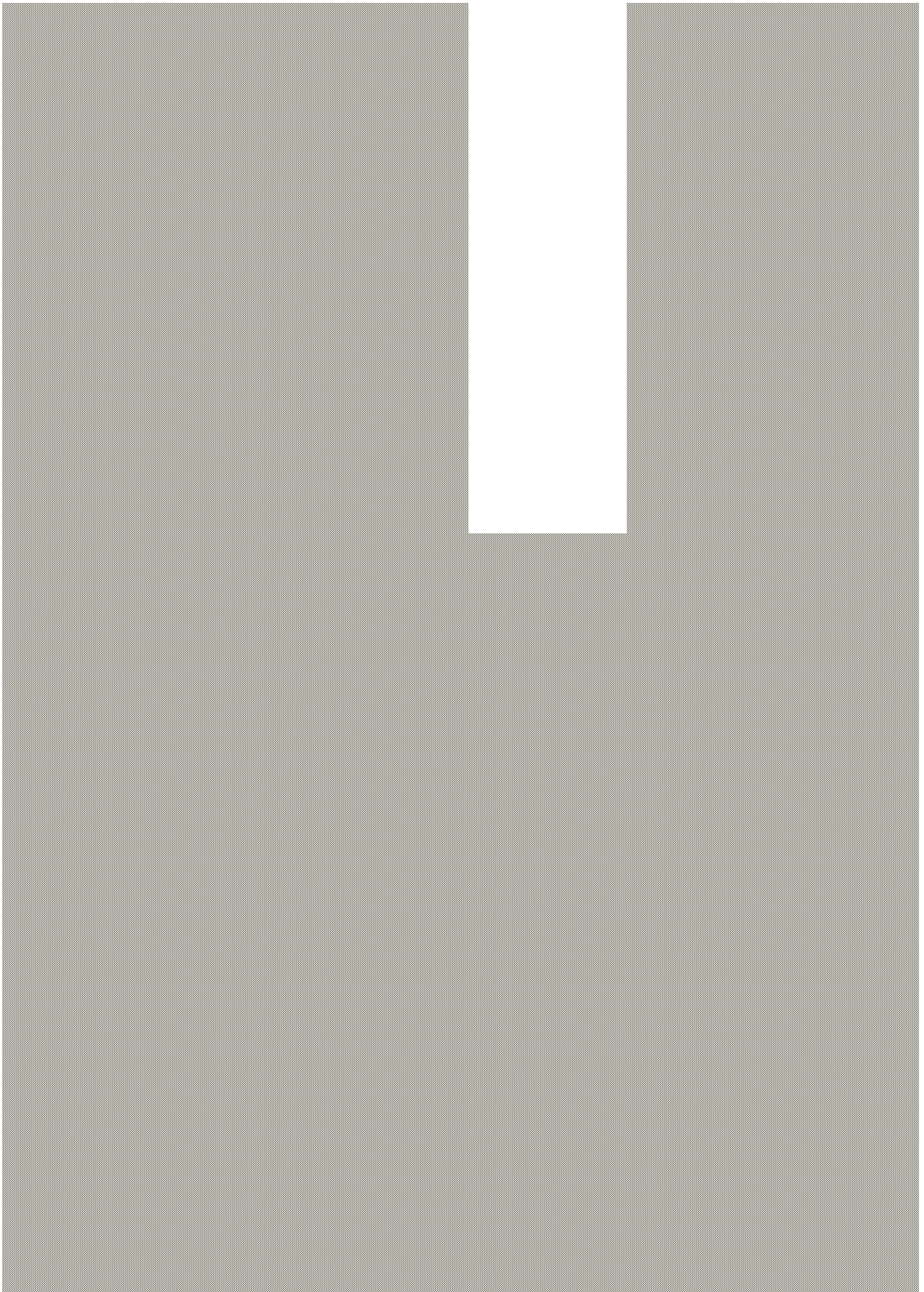
5880
5885

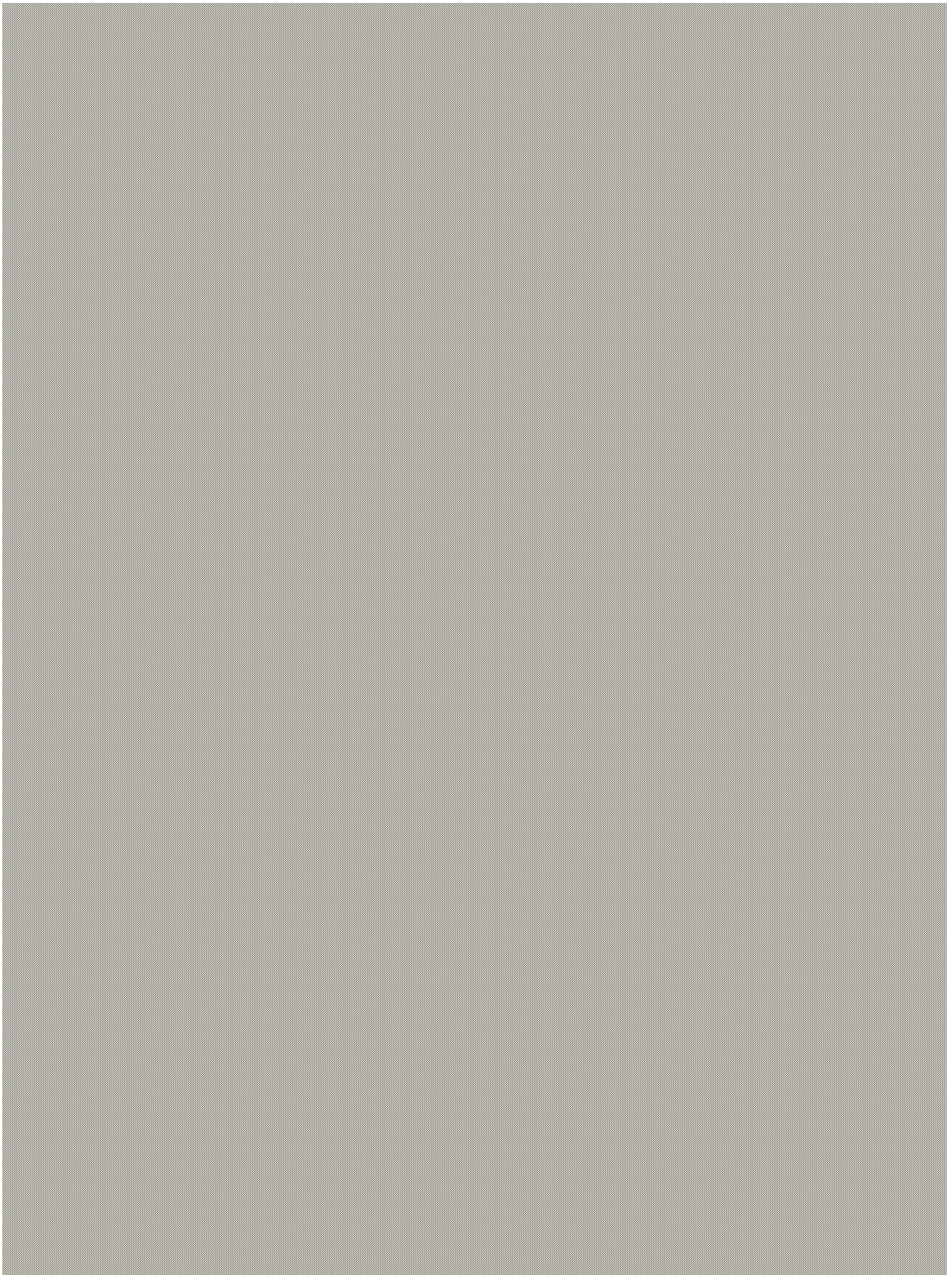


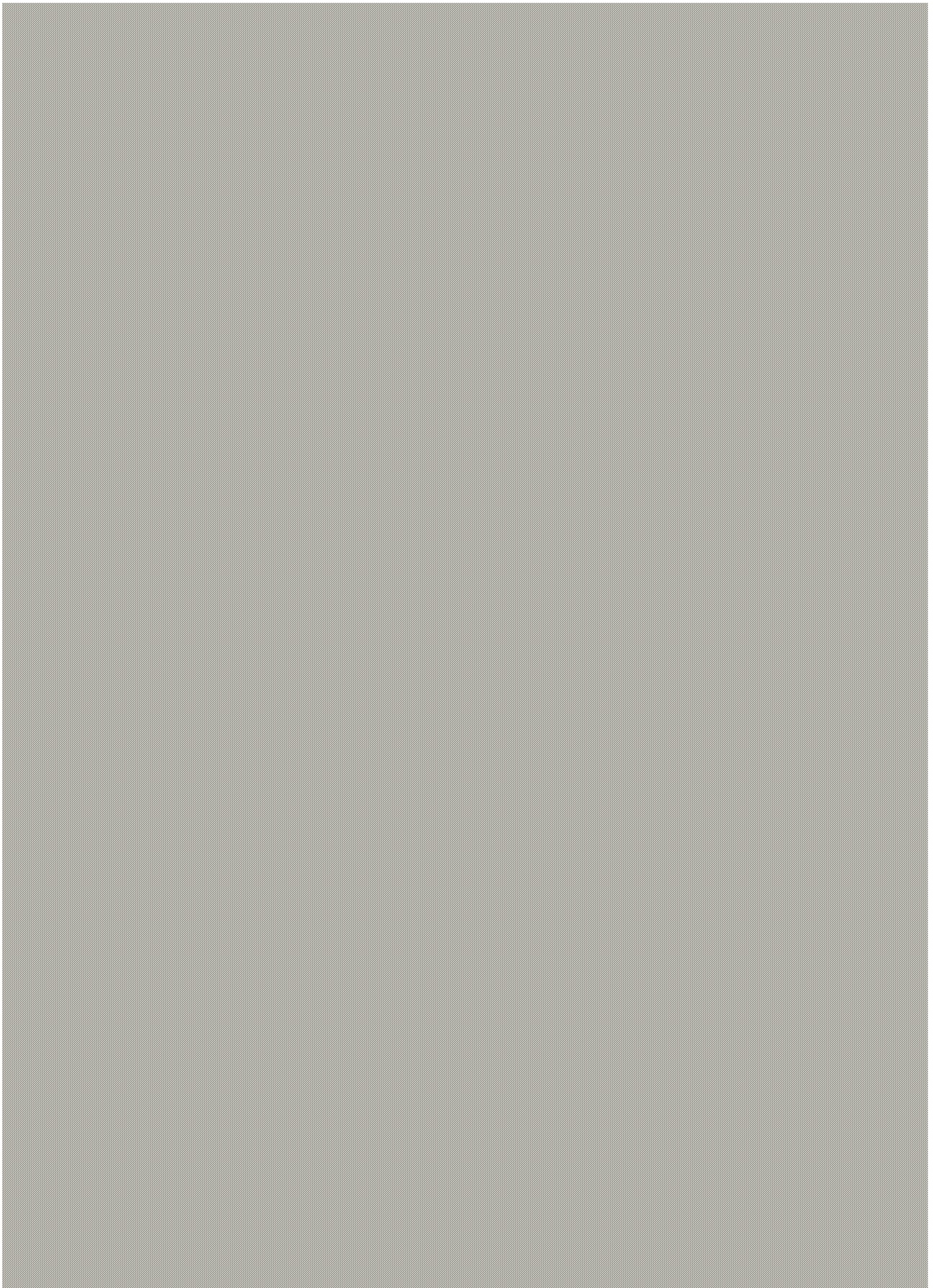




Criminally involved rate/percentage	Not criminally involved		
	Not criminally involved denominator	Not criminally involved numerator or count	Not criminally involved rate/percentage
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	





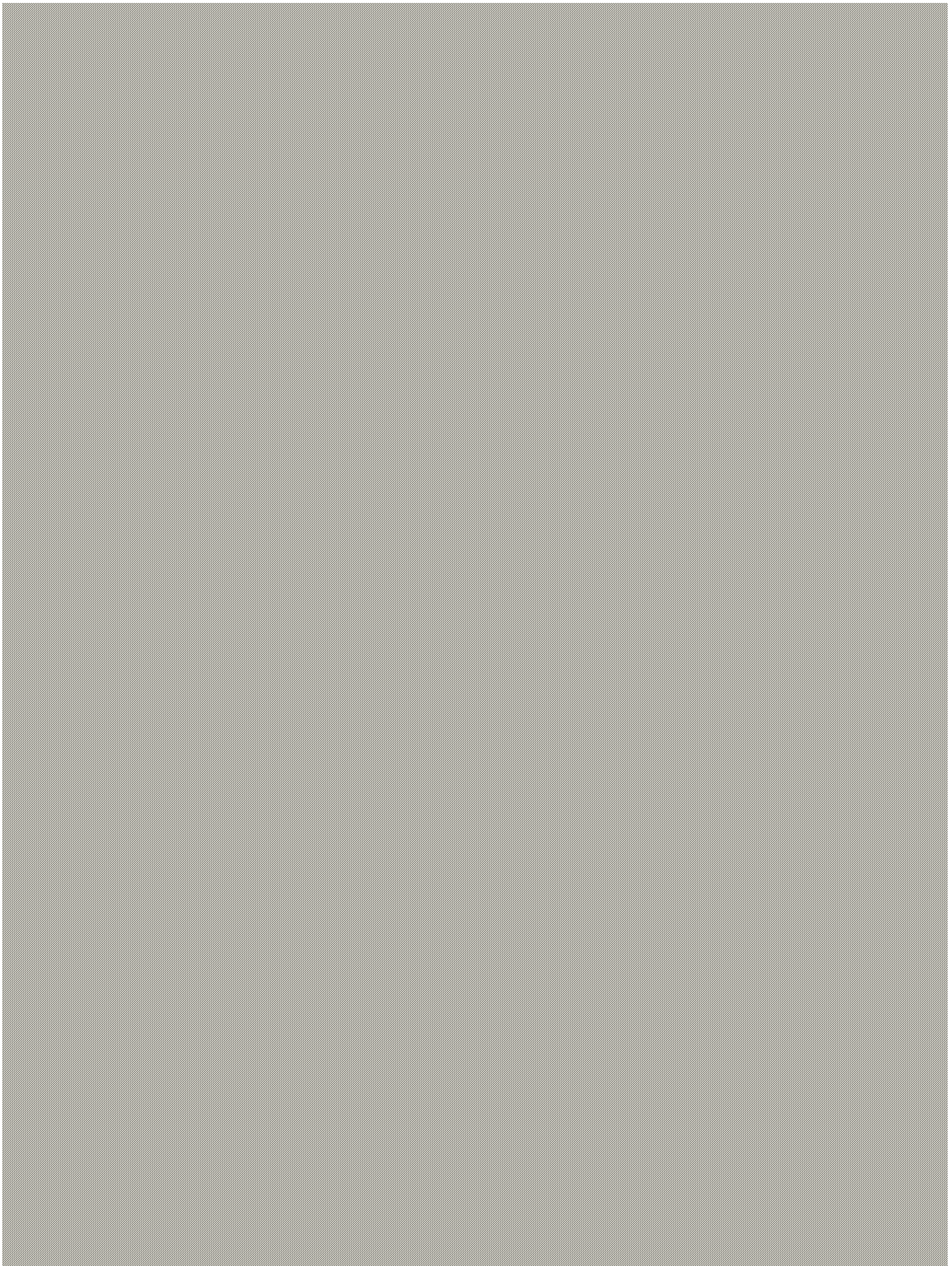


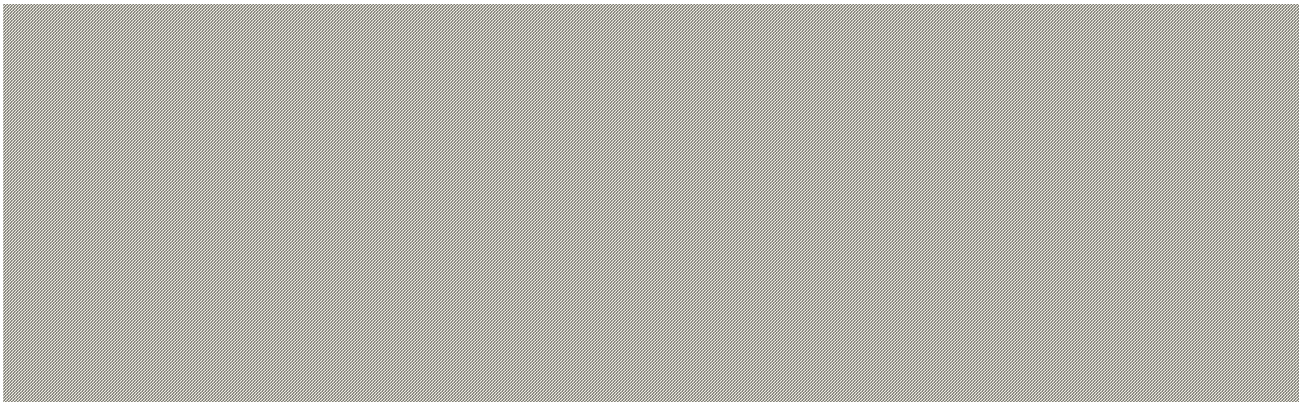


OUD subpopulation			State-specific subpop	
OUD subpopulation denominator	OUD subpopulation numerator or count	OUD subpopulation rate/percentage	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count
				<i>EXAMPLE:</i>
				<i>EXAMPLE:</i>
				<i>EXAMPLE:</i>

[Redacted content]				
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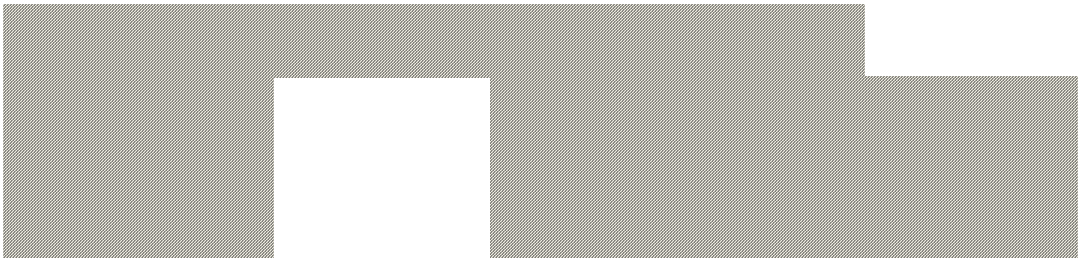
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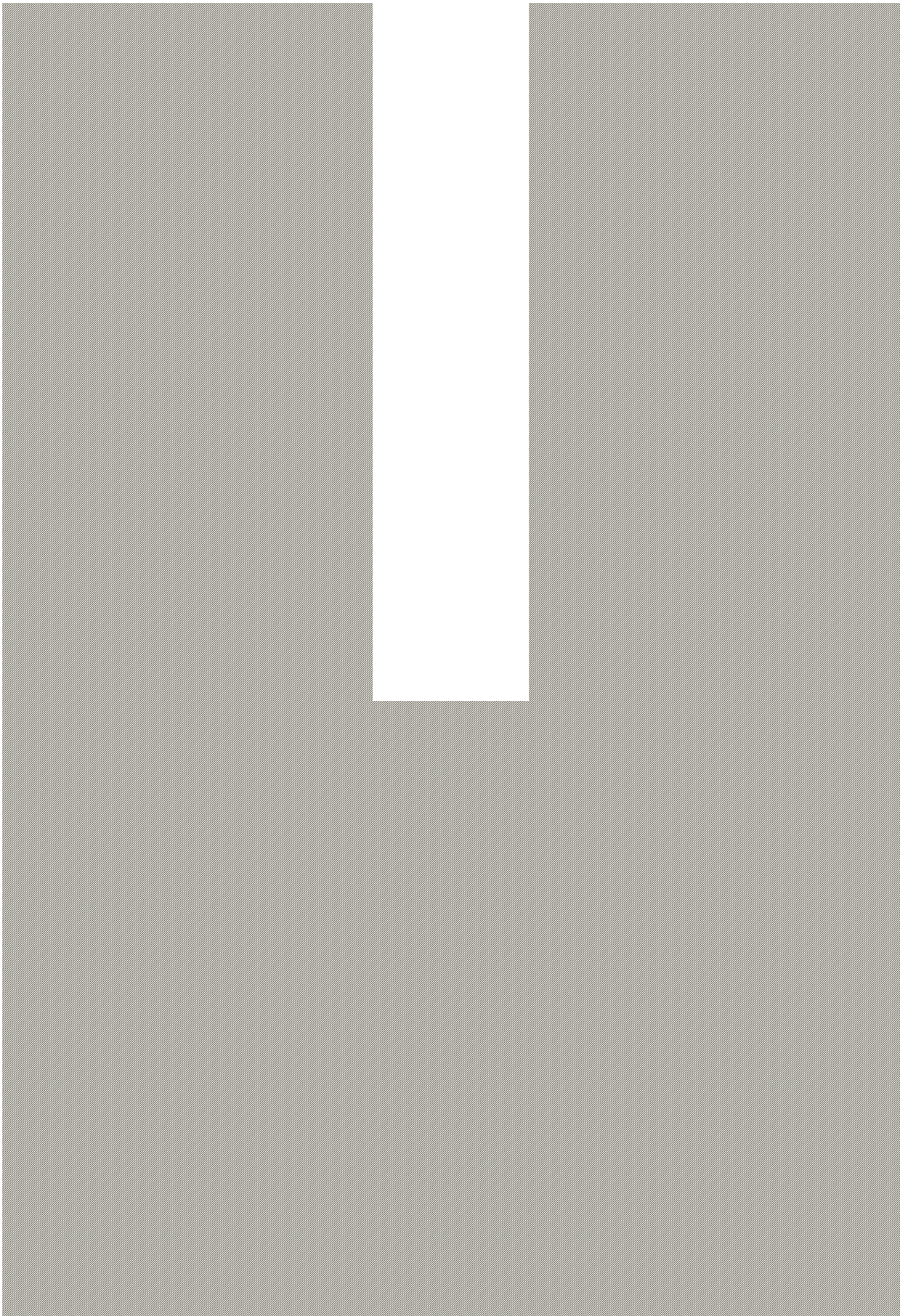
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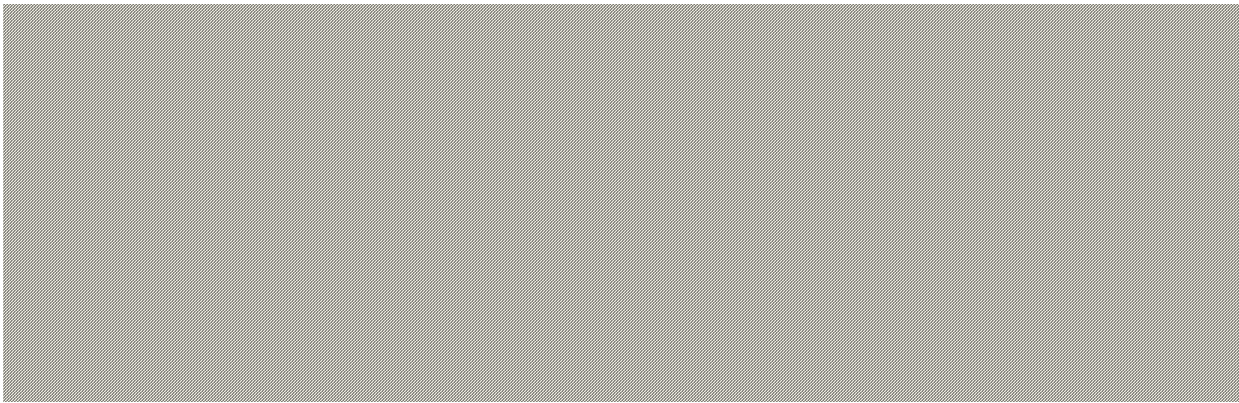
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ulation 1 ^b	State-specific subpopulation 2 ^b		Stat
State-specific subpopulation 1 rate/percentage	State-specific subpopulation 2 denominator	State-specific subpopulation 2 numerator or count	State-specific subpopulation 2 rate/percentage
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	
		<i>EXAMPLE:</i>	







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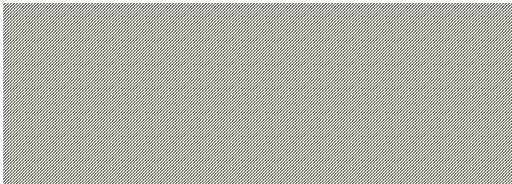
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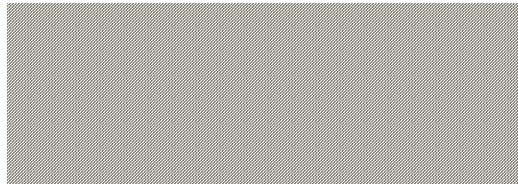
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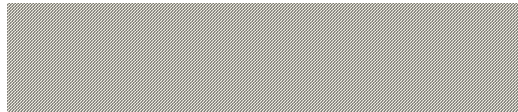


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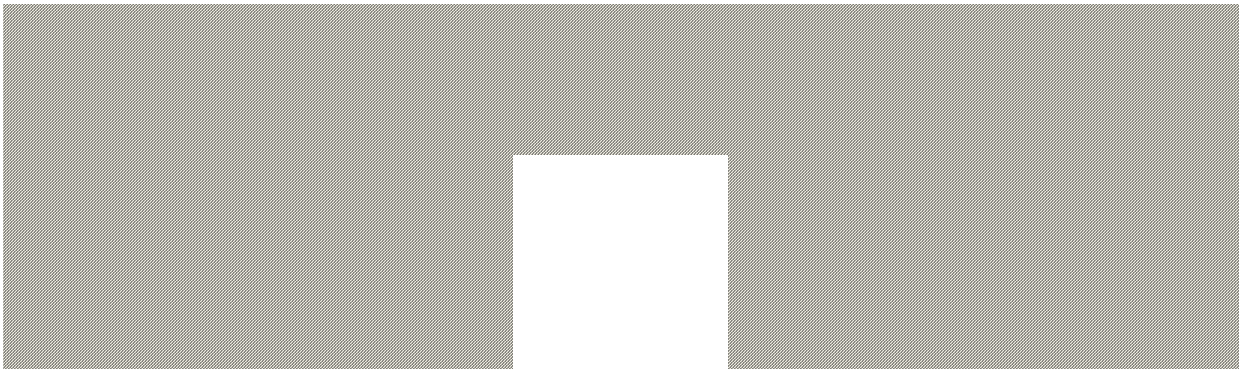
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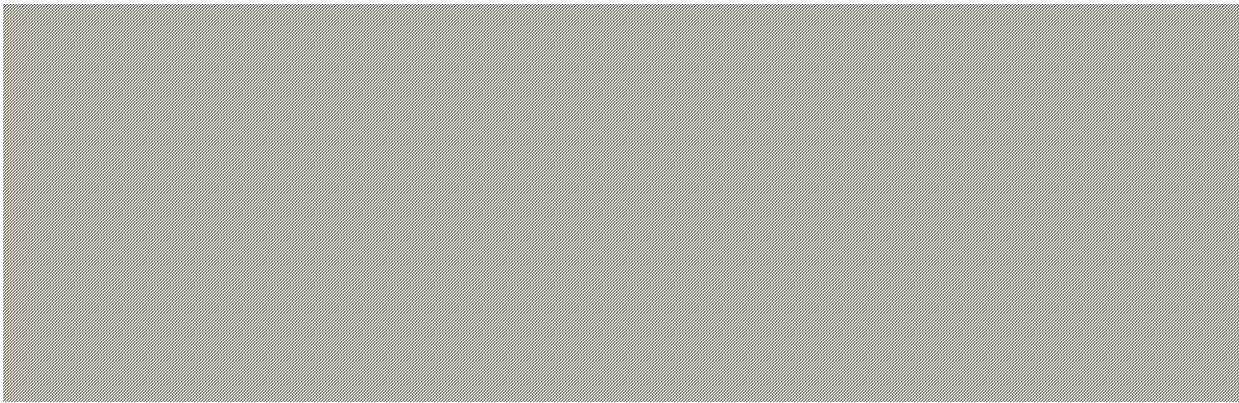
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e-specific subpopulation 3 ^b		State-specific subpopulation 4 ^b		
State-specific subpopulation 3 numerator or count	State-specific subpopulation 3 rate/percentage	State-specific subpopulation 4 denominator	State-specific subpopulation 4 numerator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







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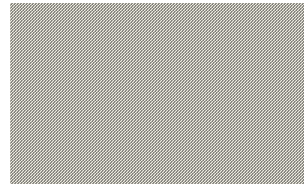
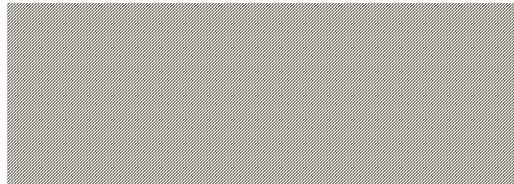
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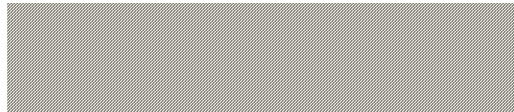
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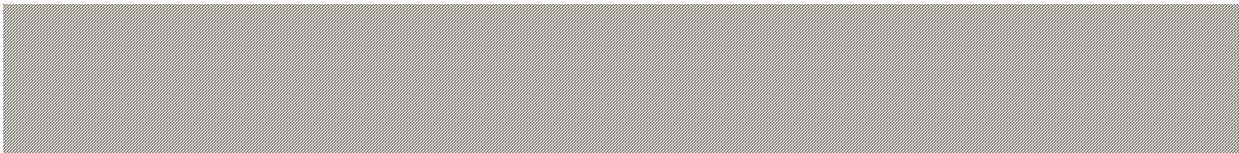


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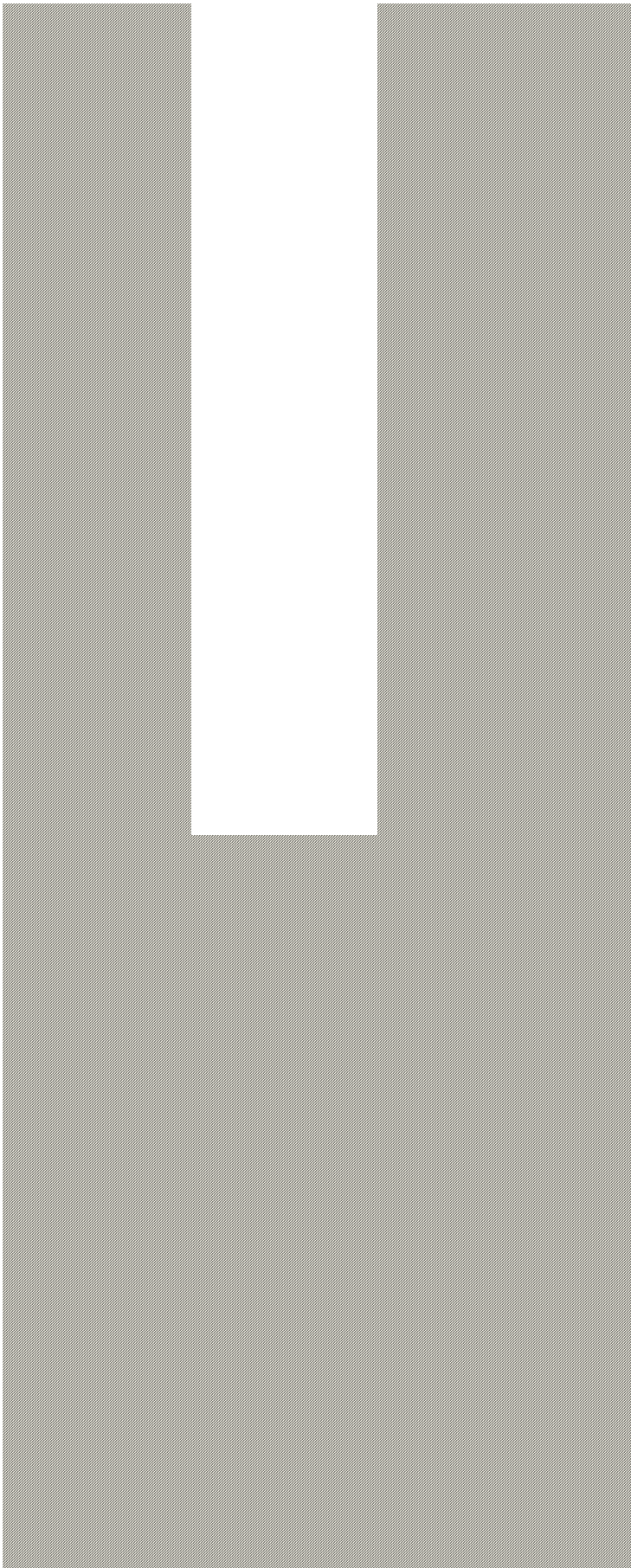
State-specific subpopulation 5^b

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

EXAMPLE:

EXAMPLE:







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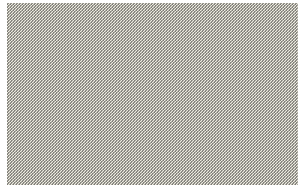
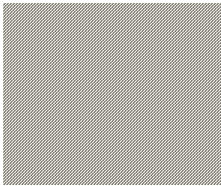
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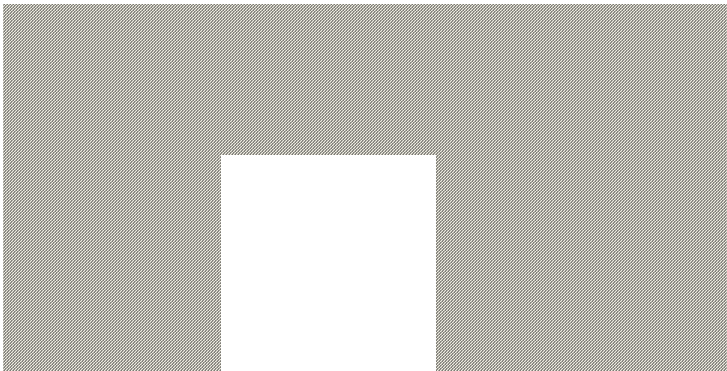


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