Medicaid and CHIP State Plan, Waiver, and Program Submissions

PRA Disclosure Statement - This information is being collected to assist the Centers for Medicare & Medicaid Services in program monitoring of Medicaid Section 1115 Substance Use Disorder Demonstrations. This mandatory information collection (42 CFR § 431.428) will be used to support more efficient, timely and accurate review of states' SUD 1115 demonstrations monitoring reports submissions to support consistency of monitoring and evaluation of SUD 1115 Demonstrations, increase in reporting accuracy, and reduce timeframes required for monitoring and evaluation. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is **0938-1148 (CMS-10398 #57)**." If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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

State	Kansas
Demonstration Name	KanCare
Approval Date	August 7, 2019
Approval Period	January 1, 2019 – December 31, 2023
SUD (or if broader demonstration, then SUD Related) Demonstration Goals and Objectives	Under this SUD Demonstration, KanCare beneficiaries will have access to high quality, evidence-based OUD and other SUD treatment services ranging from medically supervised withdrawal management to on-going chronic care for these conditions cost- effective settings while also improving care coordination and care for comorbid physical and mental health conditions.

2. Executive Summary

Despite the COVID-19 pandemic related challenges, Kansas continued to make progress on Demonstration implementation activities during DY3Q1. Highlights include:

- State Opioid Response program trained 539 total accumulative attendees and distributed 4,314 Naloxone kits. In addition to supplying Naloxone, the State Opioid Response program provided other materials: overdose pocket guides, treatment referral cards, and instructions for administering Naloxone following training.
 - The entire staff of the Kansas Department of Wildlife, Parks, and Tourism was trained so that all parks in the state are covered
- Continued development of policy to include coverage of Methadone for Medication Assisted Treatment for KanCare beneficiaries.
- Several media campaigns have been implemented to increase awareness of substance use and services offered throughout the state. The It Matters/ Learn, Lock, Lead campaign is targeted at 55+ with display and video (30,000 smart TV's viewing video app and 1.3 million impressions on website and medical apps); and University of Kansas & Kansas-State Media Campaign will utilize Kansas State University Head Football Coach Chris Klieman this week for stimulant prevention
- The Kansas University Medical Center has provided 1-1 education to three providers around opioid prescribing safety and overdose prevention. The Board of Healing Arts has implemented a requirement for providers to have at least one CE credit for overdose prevention/safe prescribing/pain management, whereby this initiative may fulfill that. Efforts are ongoing for recruitments.
- The Kansas Opioid and Stimulant Conference will be held in person/virtually on Wednesday, November 10, 2021, in Topeka. Speakers and proposals for presentations are currently being recruited and accepted. A location is being sought after the past conference center has undergone bankruptcy and is now under new management.

3. Narrative Information on Implementation, by Reporting Topic

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
1.2 Assessment of Need and Qual	ification for SUD S	Services	
1.2.1 Metric Trends			
Discuss any relevant trends that			
the data shows related to			
assessment of need and			
qualification for SUD services. At			
a minimum, changes (+ or -)			
greater than two percent should			
be described.			
\boxtimes The state has no metrics trends t	o report for this rep	orting topic.	
1.2.2 Implementation Update			
Compared to the demonstration			
design details outlined in the			
STCs and implementation plan,			
have there been any changes or			
does the state expect to make any			
changes to: A) the target			
population(s) of the			
demonstration? B) the clinical			
criteria (e.g., SUD diagnoses) that			
qualify a beneficiary for the			
demonstration?			
Are there any other anticipated			
program changes that may impact			
metrics related to assessment			

of need and qualification for			
SUD services? If so, please			
describe these changes.			
\boxtimes The state has no implementation	update to report for	r this reporting t	topic.
2.2 Access to Critical Levels of Ca	are for OUD and o	ther SUDs (Mil	lestone 1)
2.2.1 Metric Trends		•	
Discuss any relevant trends that the data shows related to assessment of need and qualification for SUD services. At	DY2Q1	Metric 6	The number of beneficiaries enrolled in the measurement period in the last quarter increased by 11% due to the substance use services and programs beginning to open services to normal capacity with the increase of vaccinations and safety precautions.
a minimum, changes (+ or -) greater than two percent should be described.	DY2Q1	Metric 8	The number of beneficiaries who used outpatient services for SUD services in the last quarter increased by 13% due to the substance use services and programs beginning to open services to normal capacity with the increase of vaccinations and safety precautions.
	DY2Q1	Metric 9	The number of beneficiaries who used outpatient and/ or partial hospitalization service for SUD in the last quarter increased by 8% due to the substance use services and programs beginning to open services to normal capacity with the increase of vaccinations and safety precautions.
	DY2Q1	Metric 10	The number of beneficiaries who use residential and/ or inpatient services for SUD in the measurement period in the last quarter increased by 10% due to the substance use services and programs beginning to open services to normal capacity with the increase of
	DY2Q1		vaccinations and safety precautions.
	DY2Q1	Metric 11	The number of beneficiaries who use withdrawal management services in the last quarter increased by 57% due to the substance use services and programs beginning to open services to normal capacity with the increase of vaccinations and safety precautions.
	DY2Q3	Metric 12	The number of beneficiaries who have a claim for medication assisted treatment for substance use disorders in the last quarter increased by 11% due to the substance use

			services and programs beginning to open services to normal capacity with the increase of vaccinations and safety precautions.
\Box The state has no metrics trends to	o report for this repo	orting topic.	
2.2.2 Implementation Update			
Compared to the demonstration			
design and operational details			
outlined the implementation plan,			
have there been any changes or			
does the state expect to make any			
changes to:			
a. Planned activities to improve			
access to SUD treatment			
services across the continuum			
of care for Medicaid			
beneficiaries (e.g. outpatient			
services, intensive outpatient			
services, medication assisted			
treatment, services in intensive residential and			
inpatient settings, medically			
supervised withdrawal			
management)?			
b. SUD benefit coverage under			
the Medicaid state plan or the			
Expenditure Authority,			
particularly for residential			
treatment, medically			

supervised withdrawal			
management, and medication			
assisted treatment services			
provided to individuals in			
IMDs?			
Are there any other anticipated			
program changes that may impact			
metrics related to access to			
critical levels of care for OUD			
and other SUDs? If so, please			
describe these changes.			
\boxtimes The state has no implementation	updates to report for	or this reporting	topic.
3.2 Use of Evidence-based, SUD-s	pecific Patient Pla	cement Criteria	a (Milestone 2)
3.2.1 Metric Trends			
Discuss any relevant trends that			
the data shows related to			
assessment of need and			
qualification for SUD services.			
Changes (+ or -) greater than two			
percent should be described.			
\Box The state is reporting metrics rel	ated to Milestone 2	, but has no meti	rics trends to report for this reporting topic.
\boxtimes The state is not reporting any me	etrics related to this	reporting topic.	
3.2.2 Implementation Update			
Compared to the demonstration			
design and operational details			
outlined the implementation plan,			
have there been any changes or			
does the state expect to make any			
changes to:			

providers' use of evidence- based, SUD-specific placement criteria?					
based, SUD-specific placement criteria? Implementation of a utilization management approach to ensure: i i. Beneficiaries have access to SUD services at the appropriate level of care? iii Interventions are approach to endure: iiii Interventions are appropriate for the diagnosis and level of care? iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	a.				
placement criteria? b. Implementation of a utilization management approach to ensure: i. Beneficiaries have access to SUD services at the appropriate level of care? ii. Interventions are appropriate for the diagnosis and level of care? iii. Use of independent process for reviewing placement in residential treatment settings? Wre there any other anticipated roogram changes that may impact netrics related to the use of vidence-based, SUD-specific tate is reporting such metrics)? If o, please describe these changes. 2.1 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3) 2.1 Metric Trends Discuss any relevant trends that the data shows related to					
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Discuss any relevant trends that he data shows related to	4.2	Use of Nationally Recognized	SUD-specific Prog	ram Standards	to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)
he data shows related to	4.2	2.1 Metric Trends			
issessment of need and					
	ass	sessment of need and			

qualification for SUD services.			
Changes (+ or -) greater than two			
percent should be described.			
\Box The state is reporting metrics rel	ated to Milestone 3	, but has no met	rics trends to report for this reporting topic.
\boxtimes The state is not reporting any me	etrics related to this	reporting topic.	
4.2.2 Implementation Update			
Compared to the demonstration			
design and operational details			
outlined the implementation plan,			
have there been any changes or			
does the state expect to make any			
changes to:			
a. Implementation of residential			
treatment provider			
qualifications that meet the			
ASAM Criteria or other			
nationally recognized, SUD-			
specific program standards?			
b. State review process for			
residential treatment			
providers' compliance with			
qualifications standards?			
c. Availability of medication			
assisted treatment at			
residential treatment			
facilities, either on-site or			
through facilitated access to			
services off site?			
Are there any other anticipated			
program changes that may impact			
metrics related to the use of			

nationally recognized SUD-						
specific program standards to set						
provider qualifications for						
residential treatment facilities (if						
the state is reporting such						
metrics)? If so, please describe						
these changes.						
\boxtimes The state has no implementation	updates to report for	or this reporting	topic.			
	at Critical Levels o	of Care includin	g for Medication Assisted Treatment for OUD (Milestone 4)			
5.2.1 Metric Trends						
Discuss any relevant trends that						
the data shows related to						
assessment of need and						
qualification for SUD services. At						
a minimum, changes (+ or -)						
greater than two percent should						
be described.						
\boxtimes The state has no metrics trends to	o report for this rep	orting topic.				
5.2.2 Implementation Update						
Compared to the demonstration						
design and operational details						
outlined the implementation plan,						
have there been any changes or						
does the state expect to make any						
changes to planned activities to						
assess the availability of						
providers enrolled in Medicaid						
and accepting new patients in						
across the continuum of SUD						
care?						

Are there any other anticipated program changes that may impact metrics related to provider capacity at critical levels of care, including for medication assisted treatment (MAT) for OUD? If so, please describe these changes.			
prease deserve these changes.			
\boxtimes The state has no implementation	updates to report	for this reporting	topic.
	nsive Treatment a	and Prevention	Strategies to Address Opioid Abuse and OUD (Milestone 5)
6.2.1 Metric Trends	Γ	1	1
Discuss any relevant trends that the data shows related to assessment of need and qualification for SUD services. At a minimum, changes (+ or -) greater than two percent should	DY2Q3	Metric 15	The percentage of beneficiaries who initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or MAT within 14 days enrolled in the measurement period in the last year increased by 6% due to the substance use services and programs beginning to open services to normal capacity with the increase of vaccinations and safety precautions.
be described.	DY2Q3	Metric 18	The number of opioids at high dosage in person without cancer enrolled in the measurement period in the last year decreased by 6% due to opioid and substance use awareness campaigns and prescriber's awareness.
	DY2Q3	Metric 21	The number of concurrent use of opioids and benzodiazepines measured in the last year increased by 9%.
	DY2Q3	Metric 22	The continuity of pharmacotherapy for opioid use disorder use in the measurement period in the last year decreased by 74% due to because beneficiaries are not seeking readmissions during COVID-19 with limited spaces and longer treatment wait times.

\boxtimes The state has no metrics trends t	o report for this rep	orting topic.			
6.2.2 Implementation Update					
Compared to the demonstration					
design and operational details					
outlined the implementation plan,					
have there been any changes or					
does the state expect to make any					
changes to:					
a. Implementation of opioid					
prescribing guidelines and					
other interventions related to					
prevention of OUD?					
b. Expansion of coverage for					
and access to naloxone?					
Are there any other anticipated					
program changes that may impact					
metrics related to the					
implementation of comprehensive					
treatment and prevention					
strategies to address opioid abuse					
and OUD? If so, please describe					
these changes.					
[Add rows as needed]					
\boxtimes The state has no implementation	updates to report for	or this reporting	topic.		
7.2 Improved Care Coordination	and Transitions be	etween Levels o	of Care (Milestone 6)		
7.2.1 Metric Trends					
Discuss any relevant trends that	DY2Q1	<i>Metric</i> 17(2)	The number of follow-ups after emergency department visit for mental illness enrolled in		
the data shows related to			the measurement period in the last year increased by 6% due to less access to mental health		
assessment of need and			services during COVID-19 so individuals are accessing ED visits for mental health issues		
qualification for SUD services. At			in interim.		
a minimum, changes (+ or -)					

greater than two percent should						
be described.						
\Box The state has no metrics trends t	o report for this rep	orting topic.				
7.2.2 Implementation Update						
Compared to the demonstration						
design and operational details						
outlined the implementation plan,						
have there been any changes or						
does the state expect to make any						
changes to implementation of						
policies supporting beneficiaries'						
transition from residential and						
inpatient facilities to community-						
based services and supports?						
Are there any other anticipated						
program changes that may impact						
metrics related to care						
coordination and transitions						
between levels of care? If so,						
please describe these changes.						
☑ The state has no implementation updates to report for this reporting topic.						
8.2 SUD Health Information Technology (Health IT)						
8.2.1 Metric Trends						
Discuss any relevant trends that						
the data shows related to						
assessment of need and						
qualification for SUD services.						

Changes (+ or -) greater than two								
percent should be described.								
percent should be described.								
		•						
	Interstate has no metrics trends to report for this reporting topic.							
	11.2.2 Implementation Update							
Compared to the demonstration								
design and operational details								
outlined in STCs and								
implementation plan, have there								
been any changes or does the								
state expect to make any changes								
to:								
a. How health IT is being used								
to slow down the rate of								
growth of individuals								
identified with SUD?								
b. How health IT is being used								
to treat effectively individuals								
identified with SUD?								
c. How health IT is being used								
to effectively monitor								
"recovery" supports and								
services for individuals								
identified with SUD?								
d. Other aspects of the state's								
plan to develop the health IT								
infrastructure/capabilities at								
the state, delivery system,								
health plan/MCO, and								
individual provider levels?								

e. Other aspects of the state's			
health IT implementation milestones?			
f. The timeline for achieving			
health IT implementation			
milestones?			
g. Planned activities to increase			
use and functionality of the			
state's prescription drug			
monitoring program?			
Are there any other anticipated			
program changes that may impact			
metrics related to SUD Health IT			
(if the state is reporting such			
metrics)? If so, please describe			
these changes.			
	1		
The state has no implementation	updates to report for	or this reporting	topic.
9.2 Other SUD-Related Metrics			
9.2.1 Metric Trends	DWOOL	16	
Discuss any relevant trends that	DY2Q1	Metric 23	The total number of ED visits for substance use disorder number of beneficiaries enrolled
the data shows related to assessment of need and			in the measurement period in the last quarter increased by 6% due to the substance use
qualification for SUD services. At			services and programs beginning to open services to normal capacity with the increase of vaccinations and safety precautions.
a minimum, changes (+ or -)			vaccinations and safety precautions.
greater than two percent should			
be described.	DY2Q1	Metric 24	The total number of inpatient stays for substance use disorder for Medicaid beneficiaries
	$D12\Sigma1$	11101110 21	enrolled in the measurement period in the last quarter increased by 3% due to the substance
			use services and programs beginning to open services to normal capacity with the increase
			of vaccinations and safety precautions.

	DY2Q1	Metric 26	The total number of overdose deaths count in the measurement period in the last year decreased by 45%.			
	DY2Q1	Metric 27	The total number of overdose deaths rate in the measurement period in the last year decreased by 48%.			
	DY2Q1	Metric 34	The total number of appeals related to SUD treatment services in the measurement period in the last quarter increased by 200%.			
[Add rows as needed]						
\boxtimes The state has no metrics trends to	o report for this rep	orting topic.				
9.2.2 Implementation Update						
Are there any anticipated program						
changes that may impact the other						
SUD-related metrics? If so, please						
describe these changes.						
[Add rows as needed]						
\boxtimes The state has no implementation	updates to report for	or this reporting	topic.			
10.2 Budget Neutrality						
10.2.1 Current status and analysis	S	I				
Discuss the current status of						
budget neutrality and provide an						
analysis of the budget neutrality to date. If the SUD component is						
part of a comprehensive						
demonstration, the state should						
provide an analysis of the SUD-						
related budget neutrality and an						
analysis of budget neutrality as a						
whole.						

\boxtimes The state has no metrics trends to report for this re	eporting topic
10.2.2 Implementation Update	sporting topic.
Are there any anticipated program	
changes that may impact budget	
neutrality? If so, please describe	
these changes.	
I The state has no implementation updates to report	for this reporting topic.
11.1 SUD-Related Demonstration Operations and	Policy
11.1.1 Considerations	
Highlight significant SUD (or if	The onset of the COVID-19 pandemic may have significant impact on Demonstration
broader demonstration, then	outcomes this reporting period. Public health measures including stay-at-home orders and
SUD-related) demonstration	gathering restrictions may delay some demonstration goals to have been achieved by
operations or policy	training and outreach activities. The impact of these events on the demonstration will be
considerations that could	more evident once future quarterly metrics are reported.
positively or negatively impact	
beneficiary enrollment, access to	
services, timely provision of	
services, budget neutrality, or any	
other provision that has potential	
for beneficiary impacts. Also note	
any activity that may accelerate or	
create delays or impediments in	
achieving the SUD	
demonstration's approved goals	
or objectives, if not already	
reported elsewhere in this	
document. See report template	
instructions for more detail.	
[Add rows as needed]	

☐ The state has no related considerations to report	□ The state has no related considerations to report for this reporting topic.				
11.1.2 Implementation Update					
Compared to the demonstration					
design and operational details					
outlined in STCs and the					
implementation plan, have there					
been any changes or does the					
state expect to make any changes					
to:					
a. How the delivery system					
operates under the					
demonstration (e.g. through					
the managed care system or					
fee for service)?					
b. Delivery models affecting					
demonstration participants					
(e.g. Accountable Care					
Organizations, Patient					
Centered Medical Homes)?					
c. Partners involved in service					
delivery?					
Has the state experienced any					
significant challenges in					
partnering with entities contracted					
to help implement the					
demonstration (e.g., health plans,					
credentialing vendors, private					
sector providers)? Has the state					
noted any performance issues					
with contracted entities?					
What other initiatives is the state	Kansas also engaged in planning and distribution of additional federal funding to				
working on related to SUD or	Substance Use Disorder programs across the state from CARES Act funding. This funding				

OUD? How do these initiatives	will be available to those not eligible for KanCare benefits but will continue to support
relate to the SUD demonstration?	expanded access of services across the state.
How are they similar to or	
different from the SUD	
demonstration?	
[Add rows as needed]	
☐ The state has no implementation updates to report for	or this reporting topic.
12.1 SUD Demonstration Evaluation Update	
12.1.1 Narrative Information	
Provide updates on SUD	
evaluation work and timeline.	
The appropriate content will	
depend on when this report is due	
to CMS and the timing for the	
demonstration. See report	
template instructions for more	
details.	
Provide status updates on	
deliverables related to the	
demonstration evaluation and	
indicate whether the expected	
timelines are being met and/or if	
there are any real or anticipated	
barriers in achieving the goals and	
timeframes agreed to in the STCs.	
List anticipated evaluation-related	Outstanding evaluation-related deliverables:
deliverables related to this	
demonstration and their due	• Draft Interim Evaluation Report – due January 1, 2023
dates.	• Final Interim Evaluation Report – due 60 days after receipt of CMS comments
	• Draft Summative Evaluation Report – due June 30, 2025

	Final Summative Evaluation Report – due 60 calendar days after receipt of CMS comments
[Add rows as needed]	
\Box The state has no SUD demonstration evaluation upd	late to report for this reporting topic
13.1 Other Demonstration Reporting	
13.1.1 General Reporting Requirements	
Have there been any changes in	
the state's implementation of the	
demonstration that might	
necessitate a change to approved	
STCs, implementation plan, or	
monitoring protocol?	
Does the state foresee the need to	
make future changes to the STCs,	
implementation plan, or	
monitoring protocol, based on	
expected or upcoming	
implementation changes?	
Compared to the details outlined	
in the STCs and the monitoring protocol, has the state formally	
requested any changes or does the	
state expect to formally request	
any changes to:	
a. The schedule for completing	
and submitting monitoring	
reports?	
b. The content or completeness	
of submitted reports? Future	
reports?	
Has the state identified any real or	
anticipated issues submitting	

timely post-approval						
demonstration deliverables,						
including a plan for remediation?						
\boxtimes The state has no updates on gene	eral reporting requir	ements to report	t for this reporting topic.			
13.1.2 Post Award Public Forum		<u>^</u>				
If applicable within the timing of						
the demonstration, provide a						
summary of the annual post-						
award public forum held pursuant						
to 42 CFR § 431.420(c)						
indicating any resulting action						
items or issues. A summary of the						
post-award public forum must be						
included here for the period						
during which the forum was held						
and in the annual report.						
	ic forum held durin	g this reporting	period and this is not an annual report, so the state has no post award public forum update to			
report for this reporting topic.	report for this reporting topic.					
14.1 Notable State Achievements and/or Innovations						
	14.1 Narrative Information					
Provide any relevant summary of						
achievements and/or innovations						
in demonstration enrollment,						
benefits, operations, and policies						
pursuant to the hypotheses of the						
SUD (or if broader						
demonstration, then SUD related)						
demonstration or that served to						
provide better care for						
individuals, better health for						

beneficiaries. ☑ The state has no notable achieve		 	
possible, the summary should describe the achievement or innovation in quantifiable terms, e.g., number of impacted			
populations, and/or reduce per capita cost. Achievements should focus on significant impacts to beneficiary outcomes. Whenever			