

**Medicaid Section 1115 Substance Use Disorder Demonstrations  
Monitoring Report Template**

*Note: PRA Disclosure Statement to be added here*

# 1. Title page for the state's substance use disorder (SUD) demonstration or the SUD component of the broader demonstration

*The title page is a brief form that the state completed as part of its monitoring protocol. The title page will be populated with the information from the state's approved monitoring protocol. The state should complete the remaining two rows. Definitions for certain rows are below the table.*

<b>State</b>	Maine
<b>Demonstration name</b>	Maine Substance Use Disorder Care Initiative
<b>Approval period for section 1115 demonstration</b>	<i>Automatically populated with the current approval period for the section 1115 demonstration as listed in the current special terms and conditions (STC), including the start date and end date (MM/DD/YYYY – MM/DD/YYYY).</i> Start Date: 01/01/2021      End Date: 12/31/2025
<b>SUD demonstration start date<sup>a</sup></b>	<i>Automatically populated with the start date for the section 1115 SUD demonstration or SUD component if part of a broader demonstration (MM/DD/YYYY).</i> 01/01/2021
<b>Implementation date of SUD demonstration, if different from SUD demonstration start date<sup>b</sup></b>	<i>Automatically populated with the SUD demonstration implementation date (MM/DD/YYYY).</i> 07/01/2022
<b>SUD (or if broader demonstration, then SUD - related) demonstration goals and objectives</b>	<i>Automatically populated with the summary of the SUD (or if broader demonstration, then SUD- related) demonstration goals and objectives.</i> SUD Demonstration Goals 1. Increased rates of identification, initiation, and engagement
<b>SUD demonstration year and quarter</b>	<i>Enter the SUD demonstration year and quarter associated with this monitoring report (e.g., SUD DY1Q3 monitoring report). This should align with the reporting schedule in the state's approved monitoring protocol.</i> SUD DY 4      Q 4
<b>Reporting period</b>	<i>Enter calendar dates for the current reporting period (i.e., for the quarter or year) (MM/DD/YYYY – MM/DD/YYYY). This should align with the reporting schedule in the state's approved monitoring protocol.</i> Start Date: 01/01/2024      End Date: 12/31/2024

## 2. Executive summary

In Demonstration Year 4, Maine has made substantial strides in enhancing its substance use disorder treatment services, focusing on aligning with the updated American Society of Addiction Medicine (ASAM) 4th edition, improving residential programs, and expanding care models for specific populations. The state has been actively reviewing policies to ensure compliance with ASAM's new framework and has developed a comprehensive training plan for both state staff and external agencies. A notable achievement has been the creation of a Maternity position within the Office of MaineCare, specifically aimed at improving maternal and infant health for individuals with SUD. This position will oversee initiatives like the MOM initiative, Opioid Health Home, and Rural Maternity and Obstetrics Management Strategies programs. Additionally, a new incentive program was piloted in the first quarter to encourage providers to engage individuals recently released from incarceration within two days to ensure continuity of care and strengthen community-based services.

In the second quarter, Maine progressed with its ASAM-focused training plan for residential substance use providers, with sessions slated for September 2024. The state also began a rate determination process for a new SUD Health Home Model that will expand services to cover all substance use disorders, with the virtual kickoff for the rate study in May 2024. Efforts to support youth with SUD continued to gain momentum, including the planning of a Youth Peer Recovery Coach pilot set to begin in June 2024, and the conclusion of the Co-Occurring Collaborative Serving Maine's Project ECHO series, which provided support to 127 prescribers to enhance opioid use disorder and SUD treatment. Maine CDC, in partnership with the Addiction Policy Forum, also initiated a pilot program aimed at reducing stigma through educational intervention.

The third quarter was marked by the Governor's 6th Annual Opioid Response Summit, which brought together over 1,200 participants from various sectors to address key issues in prevention, treatment, harm reduction, and recovery. At the summit, the Office of MaineCare showcased its whole-person care models, including initiatives like the Treatment Connection Initiative and Certified Community Behavioral Health Clinics. Additionally, a new Adolescent-focused Project ECHO titled "Adolescent Medicine: How SUD Fits" was launched, aimed at enhancing treatment for adolescents and young adults. Maine's CDC also updated its "Eyes Open for ME" campaign materials to promote safe medication storage and disposal and collaborated with community organizations to distribute medication safety products. Plans for a harm reduction-focused Project ECHO for pharmacy students and pharmacists are set to begin in winter 2025.

The fourth quarter Maine has also worked to reduce stigma surrounding SUD through several initiatives, including a deep canvassing pilot and anti-stigma campaigns. Collaboration with the Department of Education led to the development of an on-demand train-the-trainer program and toolkit for overdose prevention and naloxone administration, aimed at school educators. In support of service expansion, Maine began publishing weekly bed availability reports and enhancing residential SUD programs, with ongoing training initiatives for ASAM.

## 3. Narrative information on implementation, by milestone and reporting topic

Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>1. Assessment of need and qualification for SUD services</b>			
<b>1.1 Metric trends</b>			
1.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to assessment of need and qualification for SUD services		Metric 3-4	

<b>1.2</b>	<b>Implementation update</b>			
1.2.1	Compared to the demonstration design and operational details, the state expects to make the following changes to:	X		
1.2.1.a	The target population(s) of the demonstration			
1.2.1.b	The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration	X		
1.2.2	The state expects to make other program changes that may affect metrics related to assessment of need and qualification for SUD services	X		

Prompt	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>2. Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)</b>			
<b>2.1 Metric trends</b>			
2.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1		Metric 6-12, 22	Metric 8- 3.41% decrease this is not the desired directionality. Metric 9- 5.11% increase this is the desired directionality. Metric 10- 21.49% increase this is the desired directionality Metric 11- 30.10% increase this is the desired directionality Starting in July 2024 the Department began disseminating an open beds report to identify what facilities have capacity for admissions. This has increased awareness of what facilities have capacity and correlated to an increase in connections to care.
<b>2.2 Implementation update</b>			

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2.2.1	Compared to the demonstration design and operational details, the state expects to make the following changes to:			
2.2.1.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)	X		
2.2.1.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 individual IMDs	X		
2.2.2	The state expects to make other program changes that may affect metrics related to Milestone 1	X		

Prompt		State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>3. Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)</b>				
<b>3.1 Metric trends</b>				
3.1.1	The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2	X	5, 36	
<b>3.2. Implementation update</b>				
3.2.1	Compared to the demonstration design and operational details, the state expects to make the following changes to:	X		
3.2.1.a	Planned activities to improve providers' use of evidence-based, SUD-specific placement criteria			
3.2.1.b	Implementation of a utilization management approach to ensure (a) beneficiaries have access to SUD services at the appropriate level of care, (b) interventions are appropriate for the diagnosis and level of care, or (c) use of independent process for reviewing placement in residential treatment settings	X		
3.2.2	The state expects to make other program changes that may affect metrics related to Milestone 2	X		

Prompt		State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>4. Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)</b>				
<b>4.1 Metric trends</b>				
4.1.1	The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3  Note: There are no CMS-provided metrics related to Milestone 3. If the state did not identify any metrics for reporting this milestone, the state should indicate it has no update to report.	X		
<b>4.2 Implementation update</b>				
4.2.1	Compared to the demonstration design and operational details, the state expects to make the following changes to: 4.2.1.a Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards			The State continues to work with SUD Residential providers on training opportunities focused on the new 4th edition ASAM criteria. Cross Department team reviewing policy and licensure alignment with the 4 <sup>th</sup> edition.
4.2.1.b	Review process for residential treatment providers' compliance with qualifications	X		
4.2.1.c	Availability of medication-assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site	X		
4.2.2	The state expects to make other program changes that may affect metrics related to Milestone 3	X		



Prompt		State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>5. Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)</b>				
<b>5.1 Metric trends</b>				
5.1.1	The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4	X	13, 14	
<b>5.2 Implementation update</b>				
5.2.1	Compared to the demonstration design and operational details, the state expects to make the following changes to: Planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients in across the continuum of SUD care	X		
5.2.2	The state expects to make other program changes that may affect metrics related to Milestone 4	X		

Prompt		State has no trends/update to report (place an X)	Related metric(s)	State response
<b>6. Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)</b>				
<b>6.1 Metric trends</b>				
6.1.1	The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5		Metric 18, 21, 23	Metric 23- 8.17% increase, this is not the desired directionality of the 1115 waiver.
<b>6.2 Implementation update</b>				
6.2.1	Compared to the demonstration design and operational details, the state expects to make the following changes to:	X		
6.2.1.a	Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD			
6.2.1.b	Expansion of coverage for and access to naloxone	X		
6.2.2	The state expects to make other program changes that may affect metrics related to Milestone 5	X		

Prompt		State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>7. Improved Care Coordination and Transitions between Levels of Care (Milestone 6)</b>				
<b>7.1 Metric trends</b>				
7.1.1	The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6		15, 17, 25,27	
<b>7.2 Implementation update</b>				
7.2.1	Compared to the demonstration design and operational details, the state expects to make the following changes to: Implementation of policies supporting beneficiaries' transition from residential and inpatient facilities to community-based services and supports	X		
7.2.2	The state expects to make other program changes that may affect metrics related to Milestone 6	X		

Prompt		State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>8. SUD health information technology (health IT)</b>				
<b>8.1 Metric trends</b>				
8.1.1	The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its health IT metrics	X		
<b>8.2 Implementation update</b>				
8.2.1	Compared to the demonstration design and operational details, the state expects to make the following changes to:	X		
8.2.1.a	How health IT is being used to slow down the rate of growth of individuals identified with SUD			
8.2.1.b	How health IT is being used to treat effectively individuals identified with SUD	X		
8.2.1.c	How health IT is being used to effectively monitor “recovery” supports and services for individuals identified with SUD	X		
8.2.1.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	X		
8.2.1.e	Other aspects of the state’s health IT implementation milestones	X		

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8.2.1.f	The timeline for achieving health IT implementation milestones	X		

Prompt		State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
8.2.1.g	Planned activities to increase use and functionality of the state's prescription drug monitoring program	X		
8.2.2	The state expects to make other program changes that may affect metrics related to health IT	X		
<b>9. Other SUD-related metrics</b>				
<b>9.1 Metric trends</b>				
9.1.1	The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics		24,26, 32	Metric 24 5.31% increase, this is not the desired directionality of the waiver.
<b>9.2 Implementation update</b>				
9.2.1	The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics	X		

**4. Narrative information on other reporting topics**

Prompts		State has no update to report (place an X)	State response
<b>10. Budget neutrality</b>			
<b>10.1 Current status and analysis</b>			
10.1.1	If the SUD component is part of a broader demonstration, the state should provide an analysis of the SUD-related budget neutrality and an analysis of budget neutrality as a whole. Describe the current status of budget neutrality and an analysis of the budget neutrality to date.		Cumulatively, actual expenditure exceeded the limit by \$699,480. In preparation to submit an amendment, the state conducted public notice in accordance with 59 Fed. Reg. 49249 The public had an opportunity to comment on the demonstration amendment through the public notice and comment process which ran from December 5, 2024, through December 15, 2024. No comments were received. All notices provided the option for individuals to submit written feedback to the state by email or US postal service mail. On November 7, 2024, notice was issued to tribal chairs and health directors for federally recognized tribes within the state during the State's monthly MaineCare and Tribal Health Directors meeting with a written notice sent out on November 18, 2024. The state did not receive any comments or requests for consultation meetings in response to the tribal notice.
<b>10.2 Implementation update</b>			
10.2.1	The state expects to make other program changes that may affect budget neutrality	X	

Prompts	State has no update to report (place an X)	State response
<b>11. SUD-related demonstration operations and policy</b>		
<b>11.1 Considerations</b>		
11.1.1 The state should highlight significant SUD (or if broader demonstration, then SUD-related) demonstration operations or policy considerations that could positively or negatively affect 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 Monitoring Report Instructions for more detail.	X	
<b>11.2 Implementation update</b>		
11.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to:	X	
11.2.1.a How the delivery system operates under the demonstration (e.g., through the managed care system or fee for service)		
11.2.1.b Delivery models affecting demonstration participants (e.g., Accountable Care Organizations, Patient Centered Medical Homes)	X	
11.2.1.c Partners involved in service delivery		



Prompts	State has no update to report (place an X)	State response
11.2.2 The state experienced challenges in partnering with entities contracted to help implement the demonstration (e.g., health plans, credentialing vendors, private sector providers) and/or noted any performance issues with contracted entities		Pilot 2: Program 1 – Attachment Biobehavioral Catch-up- On hold pending identification of qualified agency. Pilot 2: Program 2 – Visit Coaching- On hold pending identification of qualified agency. Pilot 3: Home Based Skills Development- Contract has been issued.
11.2.3 The state is working on other initiatives related to SUD or OUD	X	
11.2.4 The initiatives described above are related to the SUD or OUD demonstration (The state should note similarities and differences from the SUD demonstration)	X	

Prompts	State has no update to report (place an X)	State response
<b>12. SUD demonstration evaluation update</b>		
<b>12.1 Narrative information</b>		
12.1.1 Provide updates on SUD evaluation work and timeline. The appropriate content will depend on when this monitoring report is due to CMS and the timing for the demonstration. There are specific requirements per 42 Code of Federal Regulations (CFR) § 431.428a(10) for annual [monitoring] reports. See Monitoring Report Instructions for more details.	X	
12.1.2 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	X	
12.1.3 List anticipated evaluation-related deliverables related to this demonstration and their due dates		An independent vendor is compiling data to complete the interim report due 31 December 2024.

Prompts	State has no update to report (place an X)	State response
<b>13. Other SUD demonstration reporting</b>		
<b>13.1 General reporting requirements</b>		
13.1.1 The state reports changes in its implementation of the demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol		Pilot 2: Program 2 -on hold pending engagement with agencies. Pilot 3: Home-based Skill Development Services- contract has been issued.
13.1.2 The state anticipates the need to make future changes to the STCs, implementation plan, or monitoring protocol, based on expected or upcoming implementation changes	X	
13.1.3 Compared to the demonstration design and operational details, the state expects to make the following changes to: 13.1.3.a The schedule for completing and submitting monitoring reports	X	
13.1.3.b The content or completeness of submitted monitoring reports and/or future monitoring reports	X	
13.1.4 The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation	X	
13.1.5 Provide updates on the results of beneficiary satisfaction surveys, if conducted during the reporting year, including updates on grievances and appeals from beneficiaries, per 42 CFR § 431.428(a)5	X	

Prompts	State has no update to report (place an X)	State response
<b>13.2 Post-award public forum</b>		
13.2.2 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 monitoring report.	X	

Prompts	State has no update to report (place an X)	State response
<b>14. Notable state achievements and/or innovations</b>		
<b>14.1 Narrative information</b>		
14.1.1 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 populations, and/or reduce per capita cost. Achievements should focus on significant impacts to beneficiary outcomes. Whenever possible, the summary should describe the achievement or innovation in quantifiable terms, e.g., number of impacted beneficiaries.	X	

\*The state should remove all example text from the table prior to submission.

Note: Licensee and states must prominently display the following notice on any display of Measure rates:

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