### 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.

| State   | Maine  |  |  |  |  |
|---|--|--|--|--|--|
| Demonstration name  | Maine Substance Use Disorder Care Initiative   |  |  |  |  |
| Approval period for section 1115 demonstration  | 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).  Start Date: 01/01/2021 End Date: 12/31/2025 |  |  |  |  |
| SUD demonstration start date <sup>a</sup>   | Automatically populated with the start date for the section 1115 SUD demonstration or SUD component if part of a broader demonstration (MM/DD/YYYY). 01/01/2021  |  |  |  |  |
| Implementation date of SUD demonstration, if different from SUD demonstration start date <sup>b</sup> | Automatically populated with the SUD demonstration implementation date (MM/DD/YYYY). 07/01/2022  |  |  |  |  |
| SUD (or if broader demonstration, then SUD -  | Automatically populated with the summary of the SUD (or if broader demonstration, then SUD- related) demonstration goals and objectives.   |  |  |  |  |
| related) demonstration goals and objectives   | SUD Demonstration Goals 1. Increased rates of identification, initiation, and engagement   |  |  |  |  |
| SUD demonstration year and quarter  | 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. SUD DY 4 Q 4                                       |  |  |  |  |
| Reporting period  | 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.  Start Date: 01/01/2025 End Date: 03/31/2025               |  |  |  |  |

#### 2. Executive summary

During this reporting period of January 1, 2025, through March 31, 2025, the State continued to focus on aligning policy, licensing and contracts with American Society of Addiction Medicine and the Office of MaineCare Services (OMS) has been meeting weekly with the Office of Behavioral Health (OBH) and the Division of Licensing & Certification to evaluate all SUD policies, licensure and Department SUD treatment contracts to develop changes required to bring all components in compliance with the 4th edition. OBH, through a contracted vendor, offered a two-day application focused training that provided 30 participants with an in-depth look at some of the significant changes and improvements in the Fourth Edition. In addition to the in-person training, OBH has 247 of 250 training slots filled for an on-demand training library that focuses on foundations of the 4th edition, program design, effective documentation, understanding levels of care, and conducting multidimensional assessments. In support of service expansion, Maine continues publishing weekly bed availability reports and daily withdrawal management bed accessibility to over 500 entities statewide to ensure connections of care.

OMS continues to work on the 1115 waiver renewal proposal and the amendment dealing with the Budget Neutrality overage. There are continued delays in submitting the proposal in order to incorporate initiatives that improve the SUD system of care, along with Re-Entry SMI and Health Related Social Needs 1115 opportunities waivers that will improve the overall system of care for individuals covered by Medicaid in Maine. The State completed development of the 1115 draft renewal application and opened the Public Comment period March 21, 2025, with virtual/in-person meetings projected to occur early April.

OMS finalized the Certified Community Behavioral Health Clinic (CCBHC) rate methodology process, posting responses to the public comments on January 8, 205, with an official start of service delivery implementation of March 1, 2025.

MaineCare has been selected to participate in the Transforming Maternal Health (TMaH) Model with TMaH initiative officially launched in January 2025. Led by OMS, the program is designed to run over 10 years and will focus on transforming care delivery and strengthening maternal health systems, particularly in rural areas. This effort will work alongside MaineCare's MaineMOM model, which improves care for pregnant and postpartum people with opioid use disorder and their infants by integrating perinatal and postpartum care with substance use treatment services.

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

| Promp |   | State has no<br>trends/update<br>to report<br>(place an X) | Related metric(s)<br>(if any) | State response   |
|-------|---|--|-------------------------------|--|
| 1.    | Assessment of need and qualification for SUD ser  | rvices   |                               |  |
| 1.1   | Metric trends   |  |                               |  |
| 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- 3.63% decrease this is not the desired directionality. |

| Substance Use Disorder Care Initiative | ate name – Maine |
|--|------------------|

|       |  |   | = |
|-------|--|---|---|
|       |  |   |   |
| 1.2   | Implementation update  |   |   |
| 1.2.1 | Compared to the demonstration design and operational details, the state expects to make the following changes to:  1.2.1.a The target population(s) of the demonstration | X |   |
|       | 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 |   |

Medicaid Section 1115 SUD Demonstrations Monitoring Report – Part B Version 5.0

[State name – Maine ] [Demonstration name – Maine Substance Use Disorder Care Initiative

| Promp | ot  | State has no<br>trends/update<br>to report<br>(place an X) | Related metric(s)<br>(if any) | State response   |
|-------|---|--|-------------------------------|--|
| 2.    | Access to Critical Levels of Care for OUD and ot  | her SUDs (Milest   | cone 1)                       |  |
| 2.1   | Metric trends   |  |                               |  |
| 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- 2.03% decrease this is not the desired directionality.  Metric 9- 5.98% increase this is the desired directionality.  Metric 10- 4.65% decrease this is not the desired directionality  Metric 11- 5.28% decrease this is not the desired directionality  Metric 12- 2.07% increase this is the desired directionality  Metric 22- 7.56% decrease this is not the desired directionality  Metric 22- 7.56% decrease this is not the desired directionality |
| 2.2   | Implementation update   |  |                               |  |

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[State name – Maine ] [Demonstration name – Maine Substance Use Disorder Care Initiative

|   |   |  | • |
|---|---|--|---|
| 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 |  |   |
| The state expects to make other program changes that may affect metrics related to Milestone 1  | X |  |   |

| Promj | ot   | State has no<br>trends/update<br>to report<br>(place an X) | Related metric(s) (if any) | State response  |
|-------|--|--|----------------------------|---|
| 3.    | Use of Evidence-based, SUD-specific Patient Pla  | cement Criteria (I   | Milestone 2)               |   |
| 3.1   | Metric trends  |  |                            |   |
| 3.1.1 | The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2  |  | 5, 36                      | Metric 5- 185.68% increase; this is likely due to the increased availability of IMD beds.  Metric 36- 19.58% decrease this is the desired directionality. |
| 3.2.  | Implementation update  |  |                            |   |
| 3.2.1 | Compared to the demonstration design and operational details, the state expects to make the following changes to:  3.2.1.a Planned activities to improve providers' use of evidence-based, SUD-specific placement criteria | X  |                            |   |

| Promp | ot Use of Evidence-based, SUD-specific Patient Plac  | trends/update to report (place an X) cement Criteria (l | Related metric(s) (if any) Milestone 2) | State response  |
|-------|--|---|---|---|
| 3.1   | Metric trends  |   | ·                                       |   |
| 3.1.1 | The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2  |   | 5, 36                                   | Metric 5- 185.68% increase; this is likely due to the increased availability of IMD beds.  Metric 36- 19.58% decrease this is the desired directionality. |
| 3.2.  | Implementation update  | <u> </u>  |   |   |
| 3.2.1 | Compared to the demonstration design and operational details, the state expects to make the following changes to:  3.2.1.a Planned activities to improve providers' use of evidence-based, SUD-specific placement criteria   | X   |   |   |
|       | 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   |   |   |

| Promp              | ot  | State has no<br>trends/update<br>to report<br>(place an X) | Related metric(s) (if any) | State response   |
|--------------------|---|--|----------------------------|--|
| 4.                 | Use of Nationally Recognized SUD-specific Prog<br>(Milestone 3)   | gram Standards to  | Set Provider Qualit        | ications for Residential Treatment Facilities  |
| 4.1                | Metric trends   |  |                            |  |
| 4.1.1              | The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3   |  |                            |  |
| Milesto<br>reporti | There are no CMS-provided metrics related to one 3. If the state did not identify any metrics for ng this milestone, the state should indicate it has no to report.   | X  |                            |  |
| 4.2                | Implementation update   |  |                            |  |
| 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  |                            |  |

| Promp | t  | State has no<br>trends/update<br>to report<br>(place an X) | Related metric(s) (if any)            | State response   |
|-------|--|--|---------------------------------------|--|
| 5.    | Sufficient Provider Capacity at Critical Levels of   | ,  | , , , , , , , , , , , , , , , , , , , |  |
| 5.1   | Metric trends  |  |                                       |  |
| 5.1.1 | The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4  |  | 13, 14                                | Metric 13- 4.35% increase this is the desired directionality.  Metric 14- 7.49% increase this is the desired directionality. |
| 5.2   | Implementation update  |  |                                       |  |
| 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  |                                       |  |

| Promp | t   | State has no<br>trends/update<br>to report<br>(place an X) | Related metric(s)    | State response  |
|-------|---|--|----------------------|---|
| 6.    | Implementation of Comprehensive Treatment an  | nd Prevention Str  | ategies to Address C | Opioid Abuse and OUD (Milestone 5)  |
| 6.1   | Metric trends   |  |                      |   |
| 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 21 11.35%% decrease this is the desired directionality.  Metric 23- 2.84% decrease, this is the desired directionality of the 1115 waiver. |
| 6.2   | Implementation update   |  |                      |   |
| 6.2.1 | Compared to the demonstration design and operational details, the state expects to make the following changes to:  6.2.1.a Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD | X  |                      |   |
|       | 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  |                      |   |

| Promp | t  | State has no<br>trends/update<br>to report<br>(place an X) | Related metric(s)<br>(if any) | State response  |
|-------|--|--|-------------------------------|---|
| 7.    | Improved Care Coordination and Transitions be  | tween Levels of (  | Care (Milestone 6)            |   |
| 7.1   | Metric trends  |  |                               |   |
| 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                 | Metric 25- 3.67% increase this is not the desired directionality. |
| 7.2   | Implementation update  |  |                               |   |
| 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  |                               |   |

| D.,         |                     |  | State has no trends/update to report | Related metric(s) |                |
|-------------|---------------------|--|--------------------------------------|-------------------|----------------|
| Promp<br>8. |                     | lth information technology (health IT)   | (place an X)                         | (if any)          | State response |
| 8.1         | Metric to           | 3, ( )   |                                      |                   |                |
| 8.1.1       | The state including | reports the following metric trends,<br>g all changes (+ or -) greater than 2<br>elated to its health IT metrics   | X                                    |                   |                |
| 8.2         | Impleme             | ntation update   |                                      |                   |                |
| 8.2.1       | operation           | d to the demonstration design and hal details, the state expects to make the g changes to:  How health IT is being used to slow down the rate of growth of individuals identified with SUD | X                                    |                   |                |
|             | 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                                    |                   |                |

| [State n | ame – Maine | ][Demonstration name – Maine                                   | e Substance Use D | isorder Care Initiative | ] |  |
|----------|-------------|--|-------------------|-------------------------|---|--|
|          | 8.2.1.f     | The timeline for achieving health IT implementation milestones | X                 |                         |   |  |

| Promp | t   | State has no<br>trends/update<br>to report<br>(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  |                            |   |
| 9.    | Other SUD-related metrics   |  |                            |   |
| 9.1   | Metric trends   |  |                            |   |
| 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 3.07% decrease, this is the desired directionality of the waiver. |
| 9.2   | Implementation update   |  |                            |   |
| 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

| Promp  | ts   | State has no<br>update to report<br>(place an X) | State response  |
|--------|--|--|---|
| 10.    | Budget neutrality  |  |   |
| 10.1   | Current status and analysis  |  |   |
| 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. |  | January 9, 2025 the Maine Department of Health and Human Services submitted an amendment for the Maine Section 1115 Substance Use Disorder Care Initiative. The Demonstration Amendment Request addresses the budget neutrality overages Maine has experienced and the State is requesting a one-time adjustment to the budget of the current Demonstration. When originally developing budget neutrality calculations of the Expansion Adult population the State did not have historical data to base the projection on as coverage for the Expansion Adults population began in July 2018. Annual utilization for this population has been much higher than in calendar Year 2019 as a result of steadily increasing enrollment for this population. |
| 10.2   | Implementation update  |  |   |
| 10.2.1 | The state expects to make other program changes that may affect budget neutrality  | X  |   |

| Promp  | ts  | State has no<br>update to report<br>(place an X) | State response |
|--------|---|--|----------------|
| 11.    | SUD-related demonstration operations and policy   |  |                |
| 11.1   | Considerations  |  |                |
| 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  |                |
| 11.2   | Implementation update   |  |                |
| 11.2.1 | Compared to the demonstration design and operational details, the state expects to make the following changes to:  11.2.1.a How the delivery system operates under the demonstration (e.g., through the managed care system or fee for service)   | X  |                |
|        | 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<br>update to report<br>(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- Agency in process of hiring staff for this pilot. |
| 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  |  |

| Promp  | ts  | State has no<br>update to report<br>(place an X) | State response |
|--------|---|--|----------------|
| 12.    | SUD demonstration evaluation update   |  |                |
| 12.1   | Narrative information   |  |                |
| 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  |  |                |

| Promp  | ts   | State has no<br>update to report<br>(place an X) | State response   |
|--------|--|--|--|
| 13.    | Other SUD demonstration reporting  |  |  |
| 13.1   | General reporting requirements   |  |  |
| 13.1.1 | The state reports changes in its implementation of<br>the demonstration that might necessitate a change to<br>approved STCs, implementation plan, or monitoring<br>protocol                          |  | Pilot 2: Program 2 -on hold pending engagement with agencies.  Pilot 3: Home-based Skill Development Services- Agency in process of hiring staff for this pilot. |
| 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<br>update to report<br>(place an X) | State response |
|---------|--|--|----------------|
| 13.2    | Post-award public forum  |  |                |
| 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  |                |

| Promp  | ts   | State has no<br>update to report<br>(place an X) | State response |
|--------|--|--|----------------|
| 14.    | Notable state achievements and/or innovations  |  |                |
| 14.1   | Narrative information  |  |                |
| 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  |                |

<sup>\*</sup>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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The measure specification methodology used by CMS is different from NCQA's methodology. NCQA has not validated the adjusted measure specifications but has granted CMS permission to adjust. A calculated measure result (a "rate") from a HEDIS measure that has not been certified via NCQA's Measure Certification Program, and is based on adjusted HEDIS specifications, may not be called a "HEDIS rate" until it is audited and designated reportable by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates shall be designated or referred to as "Adjusted, Uncertified, Unaudited HEDIS rates."