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

The state should complete this Title Page at the beginning of a demonstration and submit as the title page of all SUD Monitoring Reports. The content of this l table should stay consistent over time.

	Nebraska
State	Treorasia
	Nebraska Substance Use Disorder Demonstration
<b>Demonstration name</b>	Nebraska Substance Use Disorder Demonstration
	06/20/2010
Approval date for	06/28/2019
demonstration	
Approval period for SUD	07/01/2019 - 6/30/2024
Approval period for SCD	
Approval date for SUD, if	06/28/2019
different from above	
Implementation date of SUD,	07/01/2019
if different from above	
	During the demonstration period, the state seeks to achieve the
	following goals:
	1. Increased rates of identification, initiation, and engagement in
	treatment for SUD;
	2. Increased adherence to and retention in treatment;
	3. Reductions in overdose deaths, particularly those due to opioids;
SUD (or if broader	4. Reduced utilization of emergency departments and inpatient
demonstration, then SUD -	hospital settings for
related) demonstration goals	treatment where the utilization is preventable or medically inappropriate through
and objectives	improved access to other continuum of care services;
	5. Fewer readmissions to the same or higher level of care where the
	readmission is
	preventable or medically inappropriate; and,
	6. Improved access to care for physical health conditions among
	beneficiaries with SUD
	y.

## 2. Executive Summary

The executive summary should be reported in the fillable box below. It is intended for summary-level information only. The recommended word count is 500 or less.

In DY1Q2 (October 2019 – December 2019), the state continues to focus on two implementation areas: 1) 1115 demonstration administration and 2) new Medicaid covered services. As the SUD demonstration represents Nebraska's first 1115 waiver implementation, the state has been putting in to place the structure, policies, and procedures necessary to ensure effective implementation and ongoing administration of the demonstration. These activities include identifying an independent entity to support evaluation design and ideally to function as Nebraska's demonstration evaluator. More information on the evaluation topic is included in Section 12.1 of this report.

While the SUD demonstration STCs require that the state submit state plan amendments for the coverage of Medically-monitored Inpatient Withdrawal Management and Opioid Treatment Program within 24 months of demonstration approval, Nebraska had the opportunity to accelerate the addition of these services and therefore prioritized SPA development in DY1Q1 and DY1Q2. More information on the SPAs is included in Section 2.2.2.

## 3. Narrative Information on Implementation, by Milestone and Reporting Topic

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYYY)	Related metric (if any)
1.2 Assessment of Need and Qualification for SUD	Services		
1.2.1 Metric Trends			
☐ 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.	EXAMPLE: The number of beneficiaries with a SUD diagnoses treated in an IMD in the last quarter decreased by 5% due to the closure of one IMD in the state.	Insert the first measurement period in which the current trend (+ or – two percent) was reported.  EXAMPLE: 01/01/2018- 03/31/2018	Insert the metric related to the trend reported.  EXAMPLE: #8: Medicaid beneficiaries with SUD diagnosis treated in an IMD
☑ The state has no metrics trends to report for this rep	porting topic.		
1.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to:  □ i) The target population(s) of the demonstration □ ii) The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration	For implementation updates, insert annual or quarterly report in which the updated was first reported.  EXAMPLE:  ii) The state is expanding the clinical criteria to include X diagnoses.	Insert the measurement period in which the update was first reported.  EXAMPLE: ii) 01/01/2018- 03/31/2018	Insert the metric related to the reported update (if any) or write "N/A".  EXAMPLE: ii) N/A

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
☐ The state expects to make other program changes that may affect metrics related to assessment of need and qualification for SUD services	EXAMPLE: The state projects an x% increase in beneficiaries with an SUD diagnosis due to an increase in the FPL limits which will be effective on X date.	EXAMPLE: 01/01/2019- 03/31/2019	EXAMPLE: #6 and 7: Medicaid beneficiaries with SUD diagnosis (monthly)
☐ The state has no implementation update to report for	or this reporting topic.		
2.2 Access to Critical Levels of Care for OUD and o	ther SUDs (Milestone 1)		
2.2.1 Metric Trends			
☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1			
☐ The state has no metrics trends to report for this rep	orting topic.		

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)		
2.2.2 Implementation Update					
Compared to the demonstration design and operational details, the state expects to make the following changes to:  i) 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)  ii) 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	The state issued public notices on December 18, 2019 communicating the intent to add Medically-monitored Inpatient Withdrawal Management and Opioid Treatment Program (OTP) as Medicaid-covered state plan services. <a href="http://dhhs.ne.gov/Pages/Medicaid-Public-Notices.aspx">http://dhhs.ne.gov/Pages/Medicaid-Public-Notices.aspx</a> The state issued SPA-related tribal notices for both services on February 7, 2020.  The state is on track for an end of calendar year Q1 2020 (March 31, 2020) submission of the SPAs to CMS for both services.  Additionally, the state continues its work to develop services definitions and other service support material for use by providers and contracted Medicaid MCOs. The state is also continuing work necessary to facilitate provider Medicaid enrollment and reimbursement for the new services.				
individuals in IMDs					
☐ The state has no implementation update to report fo	r this reporting topic.				
☐ The state expects to make other program changes that may affect metrics related to Milestone 1					
☐ The state has no implementation update to report fo	r this reporting topic.				
3.2 Use of Evidence-based, SUD-specific Patient Pla	3.2 Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)				
3.2.1 Metric Trends					
☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2					
☐ The state has no trends to report for this reporting to	☐ The state has no trends to report for this reporting topic.				
$\square$ The state is not reporting metrics related to Mileston	☐ The state is not reporting metrics related to Milestone 2.				

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)		
3.2.2 Implementation Update					
Compared to the demonstration design and operational details, the state expects to make the following changes to:   i) Planned activities to improve providers' use of evidence-based, SUD-specific placement criteria	For DY1Q3, MLTC will continue its work with NE DHHS sister divisions and contracted health plans to develop additional managed care contract language specifying utilization management requirements and level of care assessments for SUD treatment.				
☐ ii) 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					
☐ The state has no implementation update to report fo	r this reporting topic.				
☐ The state expects to make other program changes that may affect metrics related to Milestone 2					
☐ The state has no implementation update to report fo	r this reporting topic.				
☐ The state is not reporting metrics related to Mileston	ne 2.				
	4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)				
4.2.1 Metric Trends					
☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3					
$\Box$ The state has no trends to report for this reporting to	opic.				
☐ The state is not reporting metrics related to Mileston	☐ The state is not reporting metrics related to Milestone 3.				

### Compared to the demonstration design and operational details, the state expects to make the following changes to:    Si   Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards   For DY1Q3, MLTC will continue its work with NE DHHS sister divisions and contracted health plans to develop additional managed care contract language to require provider education regarding the requirements to facilitate onsite or offsite access to MAT.    For DY1Q3, MLTC will continue its work with NE DHHS sister divisions and contracted health plans to develop additional managed care contract language to require review providers constant that the new offsite access to MAT.    For DY1Q3, MLTC will continue its work with the NE DHHS sister divisions and contracted health plans to develop additional managed care contract language to require reviews of residential treatment providers to assure the types of services, hours of clinical care, and credentials of staff for residential treatment settings are performed according to ASAM Criteria, or other nationally recognized, evidence- based SUD-specific program standards.    The state has no implementation update to report for this reporting topic.   The state is not reporting metrics related to Milestone 3   The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4   The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4   The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4   The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4   The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4   The state reports the following metric trends, including all c	Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)	
operational details, the state expects to make the following changes to:    Si   Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards   Si   State review process for residential treatment providers' compliance with qualifications standards   Si   Availability of medication assisted treatment at residential treatment are residential treatment are residential treatment are sidential treatment are site or through facilitated access to services off site   The state has no implementation update to report for this reporting topic.     The state expects to make the following metric trends, including all changes (+ or -) greater than 2 percent	4.2.2 Implementation Update				
following changes to:	Compared to the demonstration design and	For DY1Q3, MLTC will continue its work with NE DHHS sister divsions to			
Solution   Simplementation of residential treatment provider qualifications that meet the ASAM   Criteria or other nationally recognized, SUD-specific program standards   Silvata   Si	operational details, the state expects to make the	develop updated service definitions for requiring access to MAT.			
contracted health plans to develop additional managed care contract language to require provider education regarding the requirements to facilitate onsite or offsite access to MAT.  Solution i) State review process for residential treatment providers' compliance with qualifications standards Solution iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site  The state has no implementation update to report for this reporting topic.  The state expects to make other program changes that may affect metrics related to Milestone 3  The state is not reporting metrics related to Milestone 3.  Contracted health plans to develop additional managed care contract and develop additional managed care contract and contracted health plans to develop additional managed care contract and contracted health plans to develop additional managed care contract offsite access to MAT.  For DY1Q3, MLTC will continue its work with the NE DHHS sister divisions and contracted health plans to develop additional managed care contract and contracted health plans to develop additional managed care contract language to require reviews of residential treatment providers to assure the types of services, hours of clinical care, and credentials of staff for residential treatment settings are performed according to ASAM Criteria, or other nationally recognized, evidence- based SUD-specific program standards.  The state expects to make other program changes that may affect metrics related to Milestone 3  The state has no implementation update to report for this reporting topic.  The state is not reporting metrics related to Milestone 3.  Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  The state reports the following metric trends, including all changes (+ or -) greater than 2 percent	following changes to:				
Criteria or other nationally recognized, SUD-specific program standards  ☑ ii) State review process for residential treatment providers' compliance with qualifications standards  ☑ iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state is not reporting metrics related to Milestone 3.  ☐ The state is not reporting metrics related to Milestone 3.  ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent		~ '			
specific program standards  ii) State review process for residential treatment providers' compliance with qualifications standards  iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site  The state has no implementation update to report for this reporting topic.  The state expects to make other program changes that may affect metrics related to Milestone 3  The state is not reporting metrics related to Milestone 3.  St. 2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  The state reports the following metric trends, including all changes (+ or -) greater than 2 percent					
Sii) State review process for residential treatment providers' compliance with qualifications standards   Siii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site   The state has no implementation update to report for this reporting topic.     The state expects to make other program changes that may affect metrics related to Milestone 3     The state has no implementation update to report for this reporting topic.     The state has no implementation update to report for this reporting topic.     The state has no implementation update to report for this reporting topic.     The state has no implementation update to report for this reporting topic.     The state has no implementation update to report for this reporting topic.     The state review process for residential treatment providers to assure the types of services, hours of clinical care, and credentials of staff for residential treatment settings are performed according to ASAM Criteria, or other nationally recognized, evidence- based SUD-specific program standards.					
treatment providers' compliance with qualifications standards  ☑ iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state has no implementation update to Milestone 3  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state has no implementation update to Milestone 3  ☐ The state reporting metrics related to Milestone 3  ☐ S.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent		offsite access to MAT.			
qualifications standards  ⊠ iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site  The state has no implementation update to report for this reporting topic.  The state has no implementation update to report for this reporting topic.  The state has no implementation update to report for this reporting topic.  The state has no implementation update to report for this reporting topic.  The state has no implementation update to report for this reporting topic.  The state has no implementation update to report for this reporting topic.  The state has no implementation update to report for this reporting topic.  The state has no implementation update to report for this reporting topic.  The state is not reporting metrics related to Milestone 3.  5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  5.2.1 Metric Trends  The state reports the following metric trends, including all changes (+ or -) greater than 2 percent	· · ·				
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treatment at residential treatment facilities, either on-site or through facilitated access to services off site  The state has no implementation update to report for this reporting topic.  The state expects to make other program changes that may affect metrics related to Milestone 3  The state is not reporting metrics related to Milestone 3.  5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  5.2.1 Metric Trends  The state reports the following metric trends, including all changes (+ or -) greater than 2 percent	=				
on-site or through facilitated access to services off site  The state has no implementation update to report for this reporting topic.  The state expects to make other program changes that may affect metrics related to Milestone 3  The state has no implementation update to report for this reporting topic.  The state is not reporting metrics related to Milestone 3.  S.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  S.2.1 Metric Trends  The state reports the following metric trends, including all changes (+ or -) greater than 2 percent					
isite    nationally recognized, evidence- based SUD-specific program standards.   The state has no implementation update to report for this reporting topic.   The state expects to make other program changes that may affect metrics related to Milestone 3   The state has no implementation update to report for this reporting topic.   The state is not reporting metrics related to Milestone 3.   S.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)   The state reports the following metric trends, including all changes (+ or -) greater than 2 percent	· · · · · · · · · · · · · · · · · · ·				
☐ The state has no implementation update to report for this reporting topic.  ☐ The state expects to make other program changes that may affect metrics related to Milestone 3  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state is not reporting metrics related to Milestone 3.  5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  5.2.1 Metric Trends  ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent					
☐ The state expects to make other program changes that may affect metrics related to Milestone 3  ☐ The state has no implementation update to report for this reporting topic.  ☐ The state is not reporting metrics related to Milestone 3.  5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  5.2.1 Metric Trends  ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent	777	, v , v			
that may affect metrics related to Milestone 3  The state has no implementation update to report for this reporting topic.  The state is not reporting metrics related to Milestone 3.  5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  5.2.1 Metric Trends  The state reports the following metric trends, including all changes (+ or -) greater than 2 percent		this reporting topic.			
□ The state has no implementation update to report for this reporting topic. □ The state is not reporting metrics related to Milestone 3.  5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  5.2.1 Metric Trends □ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent					
☐ The state is not reporting metrics related to Milestone 3.  5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  5.2.1 Metric Trends  ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent	that may affect metrics related to Milestone 3				
5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  5.2.1 Metric Trends  ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent	☐ The state has no implementation update to report for	r this reporting topic.			
5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)  5.2.1 Metric Trends  ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent	☐ The state is not reporting metrics related to Mileston	ne 3.			
5.2.1 Metric Trends  ☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent					
including all changes (+ or -) greater than 2 percent	5.2.1 Metric Trends				
including all changes (+ or -) greater than 2 percent	☐ The state reports the following metric trends,				
☑ The state has no trends to report for this reporting topic.	☐ The state has no trends to report for this reporting to	ppic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
5.2.2 Implementation Update			
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	For DY1Q3, MLTC will continue its work with contracted health plans to develop additional managed care contract language to require provider capacity reporting to include number of participating providers accepting new patients by level of care and providers that offer MAT.  For DY1Q3, MLTC will continue its work with contracted health plans to develop expanded telehealth reporting requirements.		
☐ The state has no implementation update to report for	r this reporting topic.		
☐ The state expects to make other program changes that may affect metrics related to Milestone 4			
☐ The state has no implementation update to report for	r this reporting topic.		
-	nd Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)		
6.2.1 Metric Trends			
☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5			
☐ The state has no trends to report for this reporting to	opic.		
6.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to:  i) Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD  ii) Expansion of coverage for and access to			
naloxone			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
☐ The state has no implementation update to report fo	•	*	•
☐ The state expects to make other program changes that may affect metrics related to Milestone 5			
☐ The state has no implementation update to report for	r this reporting topic.		
7.2 Improved Care Coordination and Transitions b	etween Levels of Care (Milestone 6)		
7.2.1 Metric Trends			
☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6			
☐ The state has no trends to report for this reporting to	opic.		
7.2.2 Implementation Update			
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	For DY1Q3, MLTC will continue its work with contracted health plans to update contract language to reflect specific requirements for Care Management follow up after SUD treatment discharge.		
☐ The state has no implementation update to report for	r this reporting topic.		
☐ The state expects to make other program changes that may affect metrics related to Milestone 6			
☐ The state has no implementation update to report for	r this reporting topic.		
8.2 SUD Health Information Technology (Health IT	1 0 1		
8.2.1 Metric Trends			
☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its Health IT metrics			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
☐ The state has no trends to report for this reporting to	ppic.		
8.2.2 Implementation Update			
Compared to the demonstration design and			
operational details, the state expects to make the			
following changes to:			
$\Box$ i) How health IT is being used to slow down			
the rate of growth of individuals identified with			
SUD			
$\square$ ii) How health IT is being used to treat			
effectively individuals identified with SUD			
$\square$ iii) How health IT is being used to effectively			
monitor "recovery" supports and services for			
individuals identified with SUD			
☐ iv) 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			
$\square$ v) Other aspects of the state's health IT			
implementation milestones			
☐ vi) The timeline for achieving health IT			
implementation milestones			
☐ vii) Planned activities to increase use and			
functionality of the state's prescription drug			
monitoring program			
☐ The state has no implementation update to report fo	r this reporting topic.		
☐ The state expects to make other program changes that may affect metrics related to Health IT			
☐ The state has no implementation update to report fo	r this reporting topic.		

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)	
9.2 Other SUD-Related Metrics				
9.2.1 Metric Trends				
☐ The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics				
□ The state has no trends to report for this reporting to	opic.			
9.2.2 Implementation Update				
☐ The state expects to make other program changes that may affect metrics related to other SUD-related metrics				
☐ ☐ The state has no implementation update to report fo	or this reporting topic.			
10.2 Budget Neutrality				
10.2.1 Current status and analysis				
☑ 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.	Nebraska reported expenditures for DY1Q2 in accordance with STC 46. The state is in the process of completing the Nebraska-specific Budget Neutrality Template and is currently on track to upload the completed template by 2/29/2020 as required in STC 26(c).			
10.2.2 Implementation Update				
☐ The state expects to make other program changes that may affect budget neutrality				
☐ The state has no implementation update to report fo	or this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
11.1 SUD-Related Demonstration Operations and	Policy		
11.1.1 Considerations	·		
☐ States 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 report template instructions for more detail.			
☑ The state has no related considerations to report for	or this reporting topic.		
11.1.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to:  i) How the delivery system operates under the demonstration (e.g. through the managed care system or fee for service) ii) Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes) iii) Partners involved in service delivery  The state has no implementation update to report			

Prompt	State vectores	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
•	State response		(II any)
☐ 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			
☐ ☐ The state has no implementation update to report fo	r this reporting topic.		
$\Box$ The state is working on other initiatives related to			
SUD or OUD			
☐ ☐ The state has no implementation update to report fo	r this reporting topic.		
☐ The initiatives described above are related to the			
SUD or OUD demonstration (States should note			
similarities and differences from the SUD			
demonstration)			
, , , , , , , , , , , , , , , , , , ,			
☐ The state has no implementation update to report for	r this reporting topic.		
12. SUD Demonstration Evaluation Update			
12.1. 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.			
☐ ☐ The state has no SUD demonstration evaluation upon	late to report for this reporting topic.		

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
☑ 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.	On 1/3/2020, the state requested an extension for the submission of the draft evaluation design. The due date was moved to 3/31/2020 in the PMDA system. The primary driver necessitating the request for an extension was the state's need to complete the monitoring protocol so as to have a firmer grasp on the data that will be available to an independent evauluator. Furthermore, the state was investigating the possibility of using an existing state-baed entitiy for developing the design and potentially acting as the independent evaluator.  The state verbally relayed to the CMS Project Officer and Technical Officer on 2/10/2020 that the state had determined that it would need to procure an independent entity for the demonstration evaluation. The state also conveyed that it had retained consulting support for the evaluation design and was making good progress towards the development of the draft evaluation design. The state also raised the issue of the new due date for the draft evaluation design. The state will submit a written request regarding the due date along with a written status report and overview of our mitigation strategy on 2/28/2020 to both Project Officer and designated contacts within the CMS 1115 Monitoring and Evaluation group.		
☐ The state has no SUD demonstration evaluation upon	late to report for this reporting topic.		
☑ List anticipated evaluation-related deliverables related to this demonstration and their due dates.	Draft evaluation design due date was moved to 3/31/2020. The state is sending a communication on the current due date to CMS on 2/29/2020.		
☐ The state has no SUD demonstration evaluation upon	late to report for this reporting topic.		
13.1 Other Demonstration Reporting			
13.1.1 General Reporting Requirements			
☐ The state reports changes in its implementation of the demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
☐ The state has no updates on general requirements to	report for this reporting topic.		
☐ The state anticipates the need to make future changes to the STCs, implementation plan, or monitoring protocol, based on expected or upcoming implementation changes			
☐ The state has no updates on general requirements to	report for this reporting topic.		
Compared to the demonstration design and operational details, the state expects to make the following changes to:  ☑ i) The schedule for completing and submitting monitoring reports ☐ ii) The content or completeness of submitted reports and/or future reports	CMS approved an extension for the submission of the Monitoring Protocol to 1/3/2020 and the state submited its protocol to CMS on 1/2/2020.		
$\Box$ The state has no updates on general requirements to	report for this reporting topic.		
☐ The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation			
☐ The state has no updates on general requirements to	report for this reporting topic.		
13.1.2 Post-Award Public Forum			
☐ 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.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)		
	porting period and this is not an annual report, so the state has no post-award publ	ic forum update to rep	ort for this 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 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.					

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

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