Submitted on September 30, 2019

1. New Hampshire's Medicaid Section 1115(a) SUD Demonstration

State	New Hampshire (NH)				
Demonstration Name	New Hampshire Substance Use Disorder (SUD) Treatment and Recovery Access Section 1115(a) Research and Demonstration Waiver				
Approval Date	July 10, 2018				
Approval Period	July 10, 2018 – June 30, 2023				
SUD Demonstration Goals and Objectives	The goal of this demonstration is for NH to maintain critical access to opioid use disorder (OUD) and other substance use disorder (SUD) services and continue delivery system improvements for these services to provide more coordinated and comprehensive OUD/SUD treatment for Medicaid beneficiaries. During the demonstration, NH seeks to achieve the following: 1. Increased rates of identification, initiation, and engagement in treatment. 2. Increased adherence to and retention in treatment. 3. Reductions in overdose deaths, particularly those due to opioids. 4. Reduced utilization of emergency departments and inpatient hospital settings for treatment where utilization is preventable or medically appropriate through 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. 6. Improved access to care for physical health conditions among Medicaid beneficiaries.				

Medicaid Section 1115 SUD Demonstration Monitoring Report – Part B

New Hampshire Substance Use Disorder Treatment and Recovery Access Section 1115(a) Research and Demonstration Waiver

Demonstration Year 1 (7/10/18 - 6/30/19)

Annual including Quarter 4 (4/1/19 - 6/30/19)

Submitted on September 30, 2019

2. Executive Summary

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

During the annual reporting period for DY1 including Q4, New Hampshire achieved the following implementation milestones:

- Conducted monitoring call with CMS per STC requirements.
- •

During the reporting period, DY1 Q4, New Hampshire identified the following trends from the data:

As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact).

During the annual reporting period for DY1 including Q4, New Hampshire made the following changes to the implementation plan:

N/A

3. New Hampshire's 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		1	
Discuss any relevant trends that	DY,Q1	N/A	As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not
the data shows related to			analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is
assessment of need and			sufficient data to determine seasonality and common cause variation associated with the
qualification for SUD services. At			data (e.g., flu season impact).
a minimum, changes (+ or -)			
greater than two percent should			
be described.			
[Add rows as needed]	1	1	<u> </u>
New Hampshire has no metric t	rends to report for t	this reporting top	DIC.
1.2.2 Implementation Update	T	T .	
Compared to the demonstration	DY1, Q1	N/A	
design details outlined in the			
STCs and implementation plan,			
have there been any changes or			
does New Hampshire 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	DY1, Q1	NA	
program changes that may impact	D11, Q1	1111	
metrics related to assessment of			
need and qualification for SUD			

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
services? If so, please describe			
these changes.			
[Add rows as needed]			
New Hampshire has no implement ■ Ne		_	
2.2 Access to Critical Levels of Ca	are for OUD and o	ther SUDs (Mil	estone 1)
2.2.1 Metric Trends		<u> </u>	
Discuss any relevant trends that	DY1, Q1	N/A	As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not
the data shows related to			analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is
assessment of need and qualification for SUD services. At			sufficient data to determine seasonality and common cause variation associated with the
a minimum, changes (+ or -)			data (e.g., flu season impact).
greater than two percent should			
be described.			
[Add rows as needed]			
New Hampshire has no metric t	rends to report for t	his reporting top	nic.
2.2.2 Implementation Update	•	1 0 1	
Compared to the demonstration	DY1, Q1		
design and operational details	-		
outlined the implementation plan,			
have there been any changes or			
does New Hampshire 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			

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary	
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.	DY1, Q1	N/A		
[Add rows as needed]				
☐ New Hampshire has no implementation updates to report for this reporting topic.				
3.2 Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)				
3.2.1 Metric Trends				

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
Discuss any relevant trends that	DY1, Q1	N/A	As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not
the data shows related to			analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is
assessment of need and			sufficient data to determine seasonality and common cause variation associated with the
qualification for SUD services.			data (e.g., flu season impact).
Changes (+ or -) greater than two			
percent should be described.			
[Add rows as needed]			
☐ New Hampshire is reporting me	etrics related to Mile	estone 2, but has	no metric trends to report for this reporting period.
	g any metrics related	d to this reporting	g topic.
3.2.2 Implementation Update			
Compared to the demonstration	DY, Q1	N/A	
design and operational details			
outlined the implementation plan,			
have there been any changes or			
does New Hampshire expect to			
make any changes to:			
a. Planned activities to improve			
providers' use of evidence-			
based, SUD-specific			
placement criteria?			
b. Implementation of a			
utilization management			
approach to ensure:			
i. Beneficiaries have			
access to SUD services			
at the appropriate level			
of care?			

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary	
ii. Interventions are				
appropriate for the diagnosis and level of				
care?				
iii. Use of independent				
process for reviewing				
placement in residential				
treatment settings?				
Are there any other anticipated	DY1, Q1	N/A		
program changes that may impact				
metrics related to the use of				
evidence-based, SUD-specific				
patient placement criteria (if New Hampshire is reporting such				
metrics)? If so, please describe				
these changes.				
[Add rows as needed]				
☐ New Hampshire has no implem	entation updates to	report for this re	eporting topic.	
			to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)	
4.2.1 Metric Trends				
Discuss any relevant trends that	DY1, Q1	N/A	As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not	
the data shows related to			analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is	
assessment of need and			sufficient data to determine seasonality and common cause variation associated with the	
qualification for SUD services.			data (e.g., flu season impact).	
Changes (+ or -) greater than two				
percent should be described. [Add rows as needed]				
	.4		and the state of t	
□ New Hampshire is reporting metrics related to Milestone 3, but has no metrics to report for this reporting topic.				

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
New Hampshire is not reporting	g any metrics related	d to this reporting	g topic.
4.2.2 Implementation Update			
Compared to the demonstration	DY1, Q1	N/A	
design and operational details			
outlined the implementation plan,			
have there been any changes or			
does New Hampshire 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			
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	DY1, Q1	N/A	
program changes that may impact			
metrics related to the use of			
nationally recognized SUD-			

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
specific program standards to set			
provider qualifications for			
residential treatment facilities (if			
New Hampshire is reporting such			
metrics)? If so, please describe			
these changes.			
[Add rows as needed]			
☐ New Hampshire has no implem	entation updates to	report for this re	eporting topic.
5.2 Sufficient Provider Capacity a	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	DY1, Q1	N/A	As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not
the data shows related to			analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is
assessment of need and			sufficient data to determine seasonality and common cause variation associated with the
qualification for SUD services. At			data (e.g., flu season impact).
a minimum, changes (+ or -)			
greater than two percent should			
be described.			
[Add rows as needed]			
	rends to report for t	this reporting top	pic.
5.2.2 Implementation Update			
Compared to the demonstration	DY1, Q1	N/A	
design and operational details			
outlined the implementation plan,			
have there been any changes or			
does New Hampshire expect to			
make any changes to planned			
activities to assess the availability			

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary	
of providers enrolled in Medicaid				
and accepting new patients across				
the continuum of SUD care?	DVI OI	21/4		
Are there any other anticipated	DY1, Q1	N/A		
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.				
[Add rows as needed]				
☐ New Hampshire has no implem	entation updates to	report for this re	porting topic.	
	nsive Treatment a	nd Prevention S	Strategies to Address Opioid Abuse and OUD (Milestone 5)	
6.2.1 Metric Trends				
Discuss any relevant trends that	DY1, Q1	N/A	As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not	
the data shows related to			analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is	
assessment of need and			sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact).	
qualification for SUD services. At a minimum, changes (+ or -)			data (e.g., Hu season impact).	
greater than two percent should				
be described.				
[Add rows as needed]				
New Hampshire has no metric trends to report for this reporting topic.				
6.2.2 Implementation Update				
Compared to the demonstration	DY1, Q1	N/A		
design and operational details				
outlined the implementation plan,				

have there been any changes or does New Hampshire expect to make any changes to: a. Implementation of opioid prescribing guidelines and other interventions related to the 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 Mew Hampshire has no implementation updates to report for this reporting topic. 7.2. Improved Care Coordination and Transitions between Levels of Care (Milestone 6) 7.2. Improved Care Coordination and Transitions between Levels of Care (Milestone 6) As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is sufficient data to deemine seasonality and common cause variation associated with the data (e.g., flu season impact).	Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
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implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUD? If so, please describe these changes. Add rows as needed				
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[Add rows as needed] New Hampshire has no implementation updates to report for this reporting topic. 7.2 Improved Care Coordination and Transitions between Levels of Care (Milestone 6) 7.2.1 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 -) N/A As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact).				
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the data shows related to assessment of need and qualification for SUD services. At a minimum, changes (+ or -) analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact).		DV1_01	NI/A	As approved by CMS at the 0/21/19 SUD manitoring call. Navy Hampshire will not
assessment of need and qualification for SUD services. At a minimum, changes (+ or -) sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact).		D11, Q1	1N/A	
qualification for SUD services. At a minimum, changes (+ or -) data (e.g., flu season impact).				
a minimum, changes (+ or -)				
				data (e.g., 11d season impact).
greater than two percent broate				
be described.				

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary		
[Add rows as needed]	-				
	rends to report for t	his reporting top	ic.		
7.2.2 Implementation Update	•				
Compared to the demonstration design and operational details outlined the implementation plan, have there been any changes or does New Hampshire expect to make any changes to implementation of policies supporting beneficiaries' transition from residential and inpatient facilities to community-	DY1, Q1	N/A			
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.	DY1, Q1	N/A			
[Add rows as needed]					
	New Hampshire has no implementation updates to report for this reporting topic.				
8.2 SUD Health Information Tech	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	DY1, Q1	N/A	As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is		

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
qualification for SUD services.			sufficient data to determine seasonality and common cause variation associated with the
Changes (+ or -) greater than two			data (e.g., flu season impact).
percent should be described.			
[Add rows as needed]			
	rends to report for t	his reporting top	pic.
8.2.2 Implementation Update			
Compared to the demonstration	DY1, Q1	N/A	
design and operational details			
outlined in STCs and			
implementation plan, have there			
been any changes or does New			
Hampshire expect to make any			

a.	How health IT is being used
	to slow down the rate of
	growth of individuals
	identified with SUD?
h	How health IT is being used

changes to demonstrate:

- b. How health IT is being used to effectively treat 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 New
 Hampshire's plan to develop
 the health IT

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary		
infrastructure/capabilities at					
New Hampshire, delivery					
system, health plan/MCO,					
and individual provider					
levels?					
e. Other aspects of New					
Hampshire's health IT					
implementation milestones?					
f. The timeline for achieving					
health IT implementation milestones?					
g. Planned activities to increase use and functionality of New					
Hampshire's prescription					
drug monitoring program?					
Are there any other anticipated					
program changes that may impact					
metrics related to SUD Health IT					
(if New Hampshire is reporting					
such metrics)? If so, please					
describe these changes.					
[Add rows as needed]					
New Hampshire has no implementation updates to report for this reporting topic.					
9.2 Other SUD-Related Metrics					
9.2.1 Metric Trends					
Discuss any relevant trends that	DY1, Q1	N/A	As approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not		
the data shows related to			analyze relevant trends until Demonstration Year 2, Quarter 1, to assure that there is		
assessment of need and					

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary		
qualification for SUD services. At			sufficient data to determine seasonality and common cause variation associated with the		
a minimum, changes (+ or -)			data (e.g., flu season impact).		
greater than two percent should					
be described.					
[Add rows as needed]					
	rends to report for t	his reporting top	pic.		
9.2.2 Implementation Update					
Are there any anticipated program	DY1, Q1	N/A			
changes that may impact the other					
SUD-related metrics? If so, please					
describe these changes.					
[Add rows as needed]					
	☐ New Hampshire has no implementation updates to report for this reporting topic.				
10.2 Budget Neutrality					
10.2.1 Current status and analysis					
Discuss the current status of	DY1, Q1	N/A			
budget neutrality and provide an					
analysis of the budget neutrality					
to date. If the SUD component is					
part of a comprehensive					
demonstration, New Hampshire					
should provide an analysis of the					
SUD-related budget neutrality					
and an analysis of budget					
neutrality as a whole.					
	[Add rows as needed]				
New Hampshire has no metric trends to report for this reporting topic.					

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
10.2.2 Implementation Update			
Are there any anticipated program	DY1, Q1	N/A	
changes that may impact budget			
neutrality? If so, please describe			
these changes.			
[Add rows as needed]			
☐ New Hampshire has no implement	entation updates to	report for this re	porting topic.
11.1 SUD-Related Demonstration	Operations and P	olicy	
11.1.1 Considerations			
Highlight significant SUD (or if	DY1, Q1	N/A	
broader demonstration, then			
SUD-related) demonstration			
operations or policy			
considerations that could			
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.			

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
[Add rows as needed]			
	considerations to re	port for this repo	orting topic.
11.1.2 Implementation Update		•	
Compared to the demonstration	DY1, Q1	N/A	
design and operational details			
outlined in STCs and the			
implementation plan, have there			
been any changes or does New			
Hampshire 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?		27/1	
Has New Hampshire experienced	DY1, Q1	N/A	
any significant challenges in			
partnering with entities contracted			
to help implement the			
demonstration (e.g., health plans,			
credentialing vendors, private			

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
sector providers)? Has New			
Hampshire noted any			
performance issues with			
contracted entities?			
What other initiatives is New	DY1, Q1	N/A	
Hampshire working on related to			
SUD or OUD? How do these			
initiatives relate to the SUD			
demonstration? How are they			
similar to or different from the			
SUD demonstration?			
[Add rows as needed]			

New Hampshire has no implementation updates to report for this reporting topic.

12.1 SUD Demonstration Evaluation Update

12.1.1 Narrative Information Provide updates on SUD DY1, Q1 N/A **Annual Report:** evaluation work and timeline. On September 20, 2018, New Hampshire entered into a contract with the Pacific The appropriate content will Health Policy Group (PHPG) to perform the Evaluation Design Plan for SUD. NH met with PHPG on 11/15/18 to review the first version of the Draft Evaluation depend on when this report is due to CMS and the timing for the Design. demonstration. See report On 11/20/18, PHPG provided an updated version of the evaluation design draft with template instructions for more changes and comments from the 11/15 meeting that represent an inventory of action items and decisions. details. On December 19, 2018, NH in collaboration with the independent evaluator Westport Healthcare Management, Inc. d/b/a Pacific Health Policy Group, submitted a Draft Evaluation Design and loaded this document in the PDMA. On February 21, 2019, New Hampshire received written feedback and comments from

CMS on the Draft Evaluation Design that was submitted on 12/19/18. CMS concluded

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
			 that the evaluation design was generally responsive to the requirements specified in the STCs and the Evaluation TA document. They further identified areas in which New Hampshire should make revisions or provided clarification. During Q3, New Hampshire worked closely with its independent evaluation vendor, Pacific Health Policy Group (PHPG), to revise the Draft Evaluation Design per CMS recommendations. Quarter 4 Report: On May 22, 2019, the draft SUD evaluation design submitted to CMS on 5/13/19 was found to fulfill the requirements set for in the Special Terms and Conditions, Section X and State Medicaid Director Letter SMD #17-003, "Strategies to Address the Opioid Epidemic." The SUD evaluation design was approved for the period starting from 5/22/19 through 6/30/23, and incorporated into the demonstration STCs as Attachment C. On June 4, 2019, NH posted the CMS approved SUD Evaluation Design in accordance with STCs 26 and 39. This document is publically available on the NH DHHS Substance Use Disorder Treatment and Recovery Access Section 1115(a) Research and Demonstration Waiver web page at CMS Approved Evaluation Design. The Department is now awaiting on planning related to applying for an 1115 Waiver for an IMD exclusion for adults with serious mental illness. Pending this waiver application, DHHS will complete an RFP for the evaluation design and implementation as well as the implementation of the 1115 SUD evaluation plan.
Provide status updates on deliverables related to the demonstration evaluation and indicate whether the expected timelines are being met and/or if	DY1, Q1	N/A	

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Sum	mary	
there are any real or anticipated barriers in achieving the goals and timeframes agreed to in the STCs.					
List anticipated evaluation-related deliverables related to this demonstration and their due	DY1, Q1	N/A	The following are anticipated evaluation-relatand their due dates:	ted deliverables relate	d to this demonstration
dates.			Deliverable	Due Date	Submission Date
			1. DRAFT SUD Interim Evaluation Report	6/20/22	
			2. FINAL SUD Interim Evaluation Report	No later than 9/30/22	
			3. DRAFT SUD Summative Evaluation Report	12/30/24	
			4. FINAL SUD Summative Evaluation Report	No later than 3/28/25	
			5. FINAL & APPROVED SUD Summative	30 days after CMS	
			Evaluation Report posted to the DHHS website	Approval	
☐ New Hampshire has no SUD de	emonstration evalua	tion updates to r	eport for this reporting topic.		
13.1 Other Demonstration Repor					
13.1.1 General Reporting Require					
Have there been any changes in New Hampshire's implementation of the demonstration that might	DY1, Q1	N/A			
necessitate a change to approved					

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
STCs, implementation plan, or monitoring protocol?			
Does New Hampshire foresee the need to make future changes to the STCs, implementation plan, or monitoring protocol, based on expected or upcoming implementation changes?	DY1, Q1	N/A	
Compared to the details outlined in the STCs and the monitoring protocol, has New Hampshire formally requested any changes or does New Hampshire 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?	DY1, Q1	N/A	 Annual Report: On February 21, 2019, New Hampshire received written feedback and comments from CMS on the Monitoring Protocols submitted on 12/19/18. CMS provided an overview of NH's SUD monitoring protocol and compared them against the STCs as well as the CMS-provided monitoring protocol guidance. Overall, NH's protocols were responsive to the requirements specified in the STCs and CMS' guidance, but there were some opportunities for improvement as noted in the CMS-recommended modifications. During Q3, New Hampshire incorporated the recommendations for modifications and revised the report template to facilitate standardized review and analysis of monitoring data submitted across all states with 1115 SUD demonstrations Ouarter 4 Report: On 5/13/19, NH submitted the revised SUD Monitoring Protocols Part A and Part B as described in the Special Terms and Conditions (STCs) 22 and 35 of the waiver per CMS comments provided on 2/28/19 and 4/26/19. On May 22, 2019, CMS approved the SUD monitoring protocols through 6/30/23, and they were incorporated into the demonstration STCs as Attachment D. On June 4, 2019, NH posted the approved CMS monitoring protocols. These document are publically available on the NH DHHS Substance Use Disorder Treatment and Recovery Access Section 1115(a) Research and Demonstration Waiver web page at:

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary			
			CMS Approved Protocol A			
			CMS Approved Protocol B			
Has New Hampshire identified	DY1, Q1	N/A				
any real or anticipated issues for						
submitting timely post-approval						
demonstration deliverables,						
including a plan for remediation?						
[Add rows as needed]						
☐ New Hampshire has no updates on general reporting requirements to report for this reporting topic.						
13.1.2 Post Award Public Forum						
If applicable within the timing of	DY1, Q1	N/A				
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.						
[Add rows as needed]						
☐ There was no post-award public	☐ There was no post-award public forum held during this reporting period; and, this is not an annual report so New Hampshire has no post-award public forum					
update to report for this reporting to	update to report for this reporting topic.					
14.1 Notable State Achievements	14.1 Notable State Achievements and/or Innovations					
14.1 Narrative Information	14.1 Narrative Information					

NH's 1115 SUD Demonstration Monitoring Report

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
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.	DY1, Q1	N/A	
[Add rows as needed]			

⊠ New Hampshire has no notable achievements or innovations to report for this reporting topic.