

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

State	<i>New Hampshire</i>
Demonstration name	<i>New Hampshire Substance Use Disorder (SUD) Treatment and Recovery Access Section 1115(a) Research and Demonstration Waiver</i>
Approval date for demonstration	<i>07/10/2018</i>
Approval period for SUD	<i>07/10/2018 – 06/30/2023</i>
Approval date for SUD, if different from above	<i>Enter approval date for the SUD demonstration as listed in the demonstration approval letter if different from above (N/A).</i>
Implementation date of SUD, if different from above	<i>Enter SUD demonstration implementation date (approximately 07/26/2018). The state should consider its SUD implementation date to be the date the state began claiming federal financial participation for services provided to individuals in IMDs.</i>
SUD (or if broader demonstration, then SUD - related) demonstration goals and objectives	<p><i>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.</i></p> <p><i>During the demonstration, NH seeks to achieve the following:</i></p> <ol style="list-style-type: none"> <i>1 . Increased rates of identification, initiation, and engagement in treatment.</i> <i>2. Increased adherence to and retention in treatment.</i> <i>3. Reductions in overdose deaths, particularly those due to opioids.</i> <i>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.</i> <i>5. Fewer readmissions to the same or higher level of care where the readmission is preventable or medically inappropriate.</i> <i>6. Improved access to care for physical health conditions among Medicaid beneficiaries.</i>

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.

Annual Report

- *In DY2, with the exception of Q1 Providers Utilization of NH Prescription Drug Monitoring Program (PDMP), there has been no metric trends with changes (+ or -) greater than 2 percent. There are no metric updates to report for this quarter.*
- *The State purchased 3,950 Naloxone kits for distribution to community providers. Distribution of kits began in April.*
- *July 1, 2019 – June 30, 2020 resulted in (9) grievances and (23) appeals related to the provision of Substance Use Disorder services.*
- *COVID-19 continues to have an impact on the services covered under this demonstration. The pandemic has created additional barrier to both inpatient and outpatient SUD treatment, like many other health services.*

Quarterly Report

- *Governor Chris Sununu issued Emergency Order 31 on April 16th which provided stipends for certain healthcare workers, including those working in residential substance use disorder treatment facilities.*
- *The State is working to release a Request for Proposal (RFP-2021-DMS-01-SUBST) for the Demonstration evaluation. The release of this RFP has been significantly delayed and affected by the need to procure high-priority COVID-19 contracts.*

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

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
1.2 Assessment of Need and Qualification for SUD Services			
1.2.1 Metric Trends			
<input type="checkbox"/> 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.	<u>Annual Report</u> <i>In DY2, with the exception of Q1 Providers Utilization of NH Prescription Drug Monitoring Program (PDMP), there has been no metric trends with changes (+ or -) greater than 2 percent. There are no metric updates to report for this quarter.</i>		N/A
<input checked="" type="checkbox"/> The state has no metrics trends to report for this reporting topic.			
1.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) The target population(s) of the demonstration <input type="checkbox"/> ii) The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration 			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to assessment of need and qualification for SUD services			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

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Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
2.2 Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)			
2.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1			N/A
<input checked="" type="checkbox"/> The state has no metrics trends to report for this reporting topic.			
2.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> 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) <input type="checkbox"/> 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 individuals in IMDs 	<p><u>Annual Report</u> <i>On September 25, 2019, the New Hampshire Legislature passed the SFY20/21 budget, which included a 3.1% increase to Medicaid rates across the board effective January 1, 2020 with a second 3.1% increase effective January 1, 2021. Since this rate increase was passed, several SUD providers who were not previously willing to engage as Medicaid providers have submitted applications.</i></p> <p><i>In response to the COVID-19 Public Health Emergency, NH Governor Chris Sununu issued the following Emergency Orders in March that impact SUD access and services.</i></p> <p><i>Emergency Order 8 - Temporary expansion of access to Telehealth Services to protect the public and health care providers. Certain SUD treatment services such as Outpatient, intensive outpatient, partial hospitalization and peer recovery support services are now being delivered primarily via telehealth and providers are reporting significant success with engaging clients.</i></p> <p><i>Emergency Order 9 - Establishes the COVID-19 Emergency Healthcare System Relief Fund This order established stipends for individuals serving Medicaid clients in certain settings, including residential substance use disorder treatment programs, allowing providers to retain and/or replace staff.</i></p>	<p><i>10/01/2019-12/31/2019 for rate increase</i></p> <p><i>1/1/2020-6/30/2020 for EOs</i></p>	N/A

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	<p><i>Emergency Order 15: Temporary authorization for out of state medical providers to provide medically necessary services and provide services through telehealth. The Department plans to track data to determine what impact this order has had on the service delivery system.</i></p> <p><u>Quarterly Report</u> <i>Emergency Order 31: provided stipends for certain healthcare workers, including those working in residential substance use disorder treatment facilities.</i></p>		
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 1			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
3.2 Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)			
3.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2			N/A
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
<input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 2.			
3.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) Planned activities to improve providers' use of evidence-based, SUD-specific placement criteria 	<p><u>Annual and Quarterly Report</u> <i>The state is actively working with the three managed care organizations to improve providers' use of evidence-based practices, including but not limited to appropriate application of American Society of Addiction Medicine (ASAM) criteria. Efforts in this area have been focused on the development of a shared audit process for all three managed care organizations and determining an equitable sampling process.</i></p>	10/01/2019-12/31/2019	N/A

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<input type="checkbox"/> 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			
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 2			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 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			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3			N/A
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
<input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 3.			
4.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to:	<i>The Bureau of Health Facilities Administration has specific rules (He-P 826) which govern the operation of residential substance use disorder treatment facilities.</i>		N/A

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<input type="checkbox"/> i) Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards <input type="checkbox"/> ii) State review process for residential treatment providers' compliance with qualifications standards <input type="checkbox"/> iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 3			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input checked="" type="checkbox"/> 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			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4			N/A
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

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5.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <input type="checkbox"/> Planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients in across the continuum of SUD care			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 4			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
6.2 Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)			
6.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5			N/A
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
6.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <input type="checkbox"/> i) Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD	<u>Annual Report</u> <i>The State purchased 3,950 Naloxone kits for distribution to community providers. Distribution of kits began in April. These kits are being used to reach those who are at the highest risk, and who are hardest to reach. Kits are being distributed to agencies that can reach that audience and who may not have been involved in other Naloxone distribution efforts. These agencies include OTPs, Federally Qualified Health Centers, Recovery Community Organizations, Recovery Houses, Outreach Workers, Food Pantries, Shelters, and Churches.</i>	1/1/20-3/31/20	N/A

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<input type="checkbox"/> ii) Expansion of coverage for and access to naloxone	<p><u>Quarterly Report</u> <i>The State continues to identify organizations and distribute Naloxone to those organizations.</i></p>		
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 5			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
7.2 Improved Care Coordination and Transitions between Levels of Care (Milestone 6)			
7.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6			N/A
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
7.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> Implementation of policies supporting beneficiaries' transition from residential and inpatient facilities to community-based services and supports 			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 6			N/A

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<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
8.2 SUD Health Information Technology (Health IT)			
8.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its Health IT metrics	<p><u>Annual Report</u> <i>In DY2, with the exception of Q1 Providers Utilization of NH Prescription Drug Monitoring Program (PDMP), there has been no metric trends with changes (+ or -) greater than 2 percent.</i></p> <p><u>Quarterly Report</u> <i>In DY2, Q4 the quarterly number of patient queries decreased from DY2, Q3. While the decrease was greater than 2%, the DY2, Q4 rate returned back to similar levels established prior to DY2, Q3.</i></p>	01/01/2020 – 03/31/2020	N/A
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
8.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) How health IT is being used to slow down the rate of growth of individuals identified with SUD <input type="checkbox"/> ii) How health IT is being used to treat effectively individuals identified with SUD <input type="checkbox"/> iii) How health IT is being used to effectively monitor “recovery” supports and services for individuals identified with SUD 			N/A

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<input type="checkbox"/> 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 <input type="checkbox"/> v) Other aspects of the state’s health IT implementation milestones <input type="checkbox"/> vi) The timeline for achieving health IT implementation milestones <input type="checkbox"/> vii) Planned activities to increase use and functionality of the state’s prescription drug monitoring program			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Health IT			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
9.2 Other SUD-Related Metrics			
9.2.1 Metric Trends			
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics	<p><i>42 CFR 431.428(a) 5 qualitative information related to grievances and appeals.</i></p> <p><u>Annual Report</u> <i>July 1, 2019 – June 30, 2020 resulted in (9) grievances and (23) appeals related to the provision of Substance Use Disorder services.</i></p>	07/01/2019 – 06/30/2020	N/A

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
	<p><u>Grievances</u> <i>The Department collects member qualitative data on the details surrounding member grievances. Grievance details include but are not limited to the individual filing the grievance, the party the grievance was against, a summary, the action taken to resolve the grievance, and the date in which the grievance is resolved.</i></p> <p><i>In SFY 2020 there were 9 grievances filed related to SUD services. The majority of the grievances (n=5) were focused on Customer Service issues where the member was dissatisfied with how they were treated by a provider, pharmacy technician, or non-emergent transportation call center representative. Potential issues ranged from rude behavior to a lack of understanding about providing Medicaid beneficiaries an emergency 3-day supply of medication.</i></p> <p><i>Two grievances were related to the quality of care provided at inpatient residential treatment facilities and one grievance was related to the quality of care provided by an outpatient provider. Potential issues ranged from disagreements with the provider’s approach to treatment to a lack of effort to fully understand the patient’s condition.</i></p> <p><i>Finally one grievance was related to a member not having access to an inpatient residential treatment provider.</i></p> <p><i>All grievances were acted upon with a variety of resolutions, which included provider training, provider peer-to-peer consultations, and escalations for further investigations. A high-level thematic analysis of grievances did not result in identification of patterns that could indicate larger systemic issues.</i></p> <p><u>Appeals</u> <i>The Department collects appeals data specific to services and outcomes of the appeals. Insight through qualitative data are provided when members file a grievance related to the appeals process or the outcome. Of the 23 appeals for SUD services, zero grievances were</i></p>		

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	<p><i>filed. A low number of grievances filed based on coverage decisions could be an indicator that the appeal was processed correctly.</i></p> <p><i>Of the 23 appeals filed for SUD services, the outcome of 15 of the appeals was a reversed decision. A high rate of reversed appeals could indicate that coverage decisions were not initially determined in an accurate fashion. While further research would be needed to evaluation decision making criteria the overall low number of appeals supports the theory that there are no systemic issues.</i></p> <p><i>Of the 23 appeals filed for SUD services, 21 were related to pharmacy services. This finding is consistent with appeals for all services and does not suggest a system issue.</i></p> <p><i>At this time there are no beneficiary satisfaction surveys that were conducted during the reporting year for this 1115 demonstration.</i></p>		
<input type="checkbox"/> The state has no trends to report for this reporting topic.			
9.2.2 Implementation Update			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to other SUD-related metrics			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
10.2 Budget Neutrality			
10.2.1 Current status and analysis			
<input checked="" type="checkbox"/> 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	<p><u>Annual Report</u> <i>The Budget Neutrality workbook for DY2 Q4 is being submitted along with this monitoring report. The State is currently working with CMS on developing an amendment to address budget neutrality limit calculations and corrective action.</i></p>	10/1/19-12/31/19	N/A

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status of budget neutrality and an analysis of the budget neutrality to date.	<p><u>Quarterly Report</u> <i>The State submitted an amendment to this Demonstration on August 21st related to the prospective adjustment to Budget Neutrality limits and corrective action thereto. Further detail on the amendment will be included in the next quarterly report.</i></p>		
10.2.2 Implementation Update			
<input type="checkbox"/> The state expects to make other program changes that may affect budget neutrality	<p><u>Annual Report</u> <i>The State is currently working with CMS on developing an amendment to address budget neutrality limit calculations and corrective action.</i></p> <p><u>Quarterly Report</u> <i>The State submitted an amendment to this Demonstration on August 21st related to the prospective adjustment to Budget Neutrality limits and corrective action thereto. Further detail on the amendment will be included in the next quarterly report.</i></p>	10/1/19-12/31/19	N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
11.1 SUD-Related Demonstration Operations and Policy			
11.1.1 Considerations			
<input type="checkbox"/> 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	<p><u>Annual and Quarterly Report</u> <i>COVID continues to have an impact on the services covered under this demonstration. The pandemic has created additional barrier to both inpatient and outpatient SUD treatment, like many other health services. NH saw a dip in treatment intakes initially and also had a residential treatment provider close due to COVID for several months, but has since reopened. As mentioned previously, NH also had many providers transition to telehealth services with the issuance of Emergency Order 8 in March. The EO remains in effect and there continues to be reportedly high client engagement levels through telehealth, although most providers do have in person options as well now.</i></p>	1/1/2020-3/31/2020	N/A

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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.	<i>The State continues to track the impact of COVID on all aspects of this demonstration. At this point, it is too soon to determine the full impact of the pandemic on the SUD population, providers and services and what, if any, changes to the demonstration need to be made as a result.</i>		
<input type="checkbox"/> The state has no related considerations to report for this reporting topic.			
11.1.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) How the delivery system operates under the demonstration (e.g. through the managed care system or fee for service) <input type="checkbox"/> ii) Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes) <input type="checkbox"/> iii) Partners involved in service delivery 			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> 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			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

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<input type="checkbox"/> The state is working on other initiatives related to SUD or OUD			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The initiatives described above are related to the SUD or OUD demonstration (States should note similarities and differences from the SUD demonstration).			N/A
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
12. SUD Demonstration Evaluation Update			
12.1. Narrative Information			
<input checked="" type="checkbox"/> 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.	<p><u>Quarterly and Annual Report</u> DHHS is working with the Contracts and Procurement Unit to release a Request for Proposal (RFP-2021-DMS-01-SUBST). The draft of this RFP is currently being reviewed by Quality Control, DHHS Legal, and the Contracts and Procurement Unit Director.</p> <p><i>The release of this RFP has been significantly delayed and affected by the need to procure high-priority COVID-19 contracts.</i></p>	01/01/2020-03/01/2020	N/A
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			
<input checked="" type="checkbox"/> 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.	<p><u>Quarterly and Annual Report</u> DHHS is working with the Contracts and Procurement Unit to release a Request for Proposal (RFP-2021-DMS-01-SUBST). The draft of this RFP is currently being reviewed by Quality Control, DHHS Legal, and the Contracts and Procurement Unit Director.</p> <p><i>The release of this RFP has been significantly delayed and affected by the need to procure high-priority COVID-19 contracts.</i></p>	4/01/2020-6/30/2020	N/A
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			

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Prompt	State response		Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)	
<input checked="" type="checkbox"/> List anticipated evaluation-related deliverables related to this demonstration and their due dates.	Deliverable		07/10/2018-09/30/2018	N/A	
	1. DRAFT SUD Interim Evaluation Report				6/20/2022
	2. FINAL SUD Interim Evaluation Report				No later than 9/30/2022
	3. DRAFT SUD Summative Evaluation Report				12/30/2024
	4. FINAL SUD Summative Evaluation Report				No later than 3/28/2025
	5. FINAL & APPROVED SUD Summative Evaluation Report posted to the DHHS website				30 days after CMS Approval
<input checked="" type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.					
13.1 Other Demonstration Reporting 13.1.1 General Reporting Requirements					
<input type="checkbox"/> The state reports changes in its implementation of the demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol				N/A	
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.					
<input type="checkbox"/> The state anticipates the need to make future changes to the STCs, implementation plan, or monitoring protocol, based on expected or upcoming implementation changes				N/A	
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.					

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Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> i) The schedule for completing and submitting monitoring reports <input checked="" type="checkbox"/> ii) The content or completeness of submitted reports and/or future reports 	<p><u>Annual Report</u> <i>There are no updates for Q4 on this reporting topic. New Hampshire has reviewed the protocol updates detailed in the Section 1115 SUD Demonstration Monitoring Protocol Alignment Form and has submitted the completed form it to CMS via the Performance Management Database and Analytics System (PMDA) on 02/10/2020.</i></p> <p><i>Beginning in the Reporting Period 10/01/2019 – 12/31/2019, New Hampshire adopted the use of the updated CMS reporting tools:</i></p> <ol style="list-style-type: none"> 1) <i>1115 SUD Monitoring Workbook Version 4.0; and,</i> 2) <i>1115 SUD Monitoring Report Template Version 2.0.</i> 	<p>10/01/2019-12/31/2019</p>	<p>N/A</p>
<p><input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.</p>			
<p><input type="checkbox"/> The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation</p>			<p>N/A</p>
<p><input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.</p>			
<p>13.1.2 Post-Award Public Forum</p>			
<p><input type="checkbox"/> 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.</p>	<p><u>Annual Report</u> <i>The State held the second annual post-award forum for on December 9, 2019, at the Medical Care Advisory Committee. There was no action items or issues resulting from the forum.</i></p>	<p>10/1/2019-12/31/2019</p>	<p>N/A</p>

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Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input type="checkbox"/> No post-award public forum was held during this reporting period and this is not an annual report, so the state has no post-award public forum update to report for this topic.			
14.1 Notable State Achievements and/or Innovations			
14.1 Narrative Information			
<input type="checkbox"/> 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.			N/A
<input checked="" type="checkbox"/> The state has no notable achievements or innovations to report for this reporting topic.			

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

The IET-AD, FUA-AD, FUM-AD, and AAP measures (metrics #15, 17 (1), and 17 (2), and 32) are Healthcare Effectiveness Data and Information Set (“HEDIS®”) measures that are owned and copyrighted by the National Committee for Quality Assurance (“NCQA”). NCQA makes no representations, warranties, or endorsement about the quality of any organization or physician that uses or reports performance measures and NCQA has no liability to anyone who relies on such measures or specifications.

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. Calculated measure results, based on the adjusted HEDIS specifications, may be called only “Uncertified, Unaudited HEDIS rates.”

Certain non-NCQA measures in the CMS 1115 Substance Use Disorder Demonstration contain HEDIS Value Sets (VS) developed by and included with the permission of the NCQA. Proprietary coding is contained in the VS. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. NCQA disclaims all liability for use or accuracy of the VS with the non-NCQA measures and any coding contained in the VS.

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