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: Increased rates of identification, initiation, and engagement in treatment. Increased adherence to and retention in treatment. Reductions in overdose deaths, particularly those due to opioids. 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. Fewer readmissions to the same or higher level of care where the readmission is preventable or medically inappropriate. Improved access to care for physical health conditions among Medicaid beneficiaries. 			

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

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) Quarter 1 (7/10/18 – 9/30/18) Submitted on December 4, 2018

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 reporting period, DY1 Q1, New Hampshire achieved the following implementation milestones:

- Post-award public forum held pursuant to 42 CFR § 431.420(c) on October 15, 2018.
- Monitoring calls established and conducted with CMS per STC requirements.
- On September 20, 2018, New Hampshire entered into a contract with the Pacific Health Policy Group (PHPG) to perform the Evaluation Design Plan for SUD. First Draft of the Evaluation Design is required to be submitted to NH before December 1, 2018.
- NH has had two meetings with its PDMP partner at the Board of Pharmacy to consider the strategic plan being developed and how this correlates to efforts within the waiver. NH has determined monitoring IT metrics and questions in collaboration with the PDMP leadership. The strategic plan is under consideration with the state's fiscal committee in November 2018.
- In order to comply with the STC's, the Department began working on amending the Substance Use Disorder (SUD) Treatment and Recovery Support Services rule (He-W 513) in June, 2018. The rule was submitted to NH's Medical Care Advisory Committee (MCAC) in July 2018 for discussion, if needed, at the August 2018 meeting. No issues or concerns were raised. Concurrent with the July 2018 submittal of the official, required documents into the APA rulemaking process, the SUD program area worked informally with various stakeholder groups to obtain any further input or suggestions on the rule. In accordance with the rulemaking process, a public hearing was held on September 27, 2018, with any further written comments due by October 4. Based on the APA rulemaking calendar, the Department has until November 1 (or October 25 if there is a change in fiscal impact) to take any comments into consideration and submit the final proposal into the rulemaking process. Informal comments have been logged and the program area met internally to discuss the comments received. Once the comment deadline of October 4 was reached, the program area again met to consider all of the comments from the formal public hearing and to incorporate changes to the rule as applicable. The final proposed rules, which incorporated public input, were submitted into the next phase of the rulemaking process on October 25. The Joint Legislative Committee on Administrative Rules (JLCAR) meeting was on November 15, 2018, at which time the rule was heard, considered, and approved, thus meeting the STC deadline of November 30, 2018.

During the reporting period, DY1 Q1, New Hampshire identified the following trends from the data:

N/A

During the reporting period, DY1 Q1, New Hampshire made the following changes to the implementation plan:

■ N/A

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 Discuss any relevant trends that the data shows related to assessment of need and qualification for SUD services. At a minimum, changes (+ or -) greater than two percent should be described.	DY,Q1	N/A	 Trends have not been evaluated in this report as NH does not have sufficient data to analyze. No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD. Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD:
1.2.2 Implementation Update		I	
Compared to the demonstration 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?	DY1, Q1	N/A	 (a) <u>Target Populations</u> ⊠No, there have been no changes and NH does not expect to make any changes to the target population(s) of the demonstration. □Yes, NH expects to make the following changes to the target populations(s) of the demonstration: • (b) <u>Clinical Criteria</u> ⊠No, there have been no changes and NH does not expect to make any changes to the clinical criteria that qualify a beneficiary for the demonstration.

3. New Hampshire's Narrative Information on Implementation, by Reporting Topic

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
			□ Yes, NH expects to make the following changes to the clinical criteria that qualify a beneficiary for the demonstration:
Are there any other anticipated program changes that may impact metrics related to assessment of need and qualification for SUD services? If so, please describe these changes.	DY1, Q1	NA	 No, there are no anticipated program changes that may impact NH's metrics related to the assessment and qualifications for SUD services. Yes, the following are anticipated program changes that may impact NH's metrics related to the assessment and qualifications for SUD services:
2.2 Access to Critical Levels of Ca	are for OUD and o	ther SUDs (Mil	estone 1)
2.2.1 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 -) greater than two percent should be described.	DY1, Q1	N/A	 Trends have not been evaluated in this report as NH does not have sufficient data to analyze. No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD. Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD:
2.2.2 Implementation Update			
Compared to the demonstration design and operational details outlined the implementation plan,	DY1, Q1		(a) <u>Access Across the Continuum of Care</u>

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) Quarter 1 (7/10/18 – 9/30/18) Submitted on December 4, 2018

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
 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 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? 			 No, there have been no changes and NH does not expect to make any changes to planned activities to improve access to SUD treatment services across the continuum of care for Medicaid beneficiaries. Yes, NH expects to make the following changes to planned activities to improve access to SUD treatment services across the continuum of care for Medicaid beneficiaries. (b) Benefit Coverage Under Medicaid State Plan/Expenditure Authority No, there have been no changes and NH does not expect to make any changes to planned activities to SUD benefit coverage under the Medicaid state plan or the Expenditure Authority. Yes, NH expects to make the following changes to planned activities to SUD benefit coverage under the Medicaid state plan or the Expenditure Authority. Yes, NH expects to make the following changes to planned activities to SUD benefit coverage under the Medicaid state plan or the Expenditure Authority. Yes, NH expects to make the following changes to planned activities to SUD benefit coverage under the Medicaid state plan or the Expenditure Authority for: Residential Treatment: Medically supervised withdrawal management: Medication Assisted Treatment to individuals in IMDs:
Are there any other anticipated program changes that may impact metrics related to access to	DY1, Q1	N/A	⊠No, NH does not anticipate making any program changes that may impact metrics related to access to critical levels of care of OUD and other SUDs.

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
critical levels of care for OUD and other SUDs? If so, please describe these changes.			□Yes, NH anticipates making the following program changes that may impact metrics related to access to critical levels of care of OUD and other SUDs:
3.2 Use of Evidence-based, SUD-s	specific Patient Pla	cement Criteri	a (Milestone 2)
3.2.1 Metric Trends Discuss any relevant trends that the data shows related to assessment of need and qualification for SUD services. Changes (+ or -) greater than two percent should be described.	DY1, Q1	N/A	 Trends have not been evaluated in this report as NH does not have sufficient data to analyze. No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD. Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD: •
3.2.2 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: a. Planned activities to improve providers' use of evidence- based, SUD-specific placement criteria?	DY, Q1	N/A	 (a) <u>Placement Criteria</u> ⊠No, NH does not expect to make any changes to planned activities to improve providers' use of evidence-based, SUD-specific placement criteria. □Yes, NH expects to make the following changes to planned activities to improve providers' use of evidence-based, SUD-specific placement criteria: • (b) <u>Utilization Management Approach</u>

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary	
 b. Implementation of a utilization management approach to ensure: Beneficiaries have access to SUD services at the appropriate level of care? Interventions are appropriate for the diagnosis and level of care? Use of independent process for reviewing placement in residential treatment settings? 			 No, NH does not expect to make any changes to implement a utilization management approach. Yes, NH expects to make the following changes to implement a utilization management approach to ensure: Beneficiaries have access to SUD services at the appropriate level of care: Interventions are appropriate for the diagnosis and level of care: Use of independent process for reviewing placement in residential treatment settings: 	
Are there any other anticipated 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. 4.2 Use of Nationally Recognized	DY1, Q1 SUD-specific Prog	N/A ram Standards	 No, NH does not expect to make any other changes that may impact metrics related to the use of evidence-based, SUD-specific patient placement criteria. Yes, NH expects to make the following changes that may impact metrics related to the use of evidence-based, SUD-specific patient placement criteria: to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3) 	
4.2.1 Metric Trends				
Discuss any relevant trends that the data shows related to assessment of need and	DY1, Q1	N/A	⊠ Trends have not been evaluated in this report as NH does not have sufficient data to analyze.	

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
qualification for SUD services. Changes (+ or -) greater than two percent should be described.			 No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD. Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD: •
4.2.2 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: a. Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD- specific program standards?	DY1, Q1	N/A	 (a) <u>Provider Qualifications</u> ⊠No, there have been no changes and NH does not expect to make any changes to implement residential treatment provider qualifications that meet the ASAM criteria or other nationally recognized, SUD-specific program standards. □Yes, NH expects to make the following changes to implement residential treatment provider qualifications that meet the ASAM criteria or other nationally recognized, SUD-specific program standards. (b) <u>State Review Process</u>
 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 			 No, there have been no changes, and NH does not expect to make any changes to implement the state review process for residential treatment providers' compliance with qualification standards. Yes, NH expects to make the following changes to implement the state review process for residential treatment providers' compliance with qualification standards: Implement the state review process for residential treatment providers to implement the state review process for residential treatment providers' compliance with qualification standards:

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
through facilitated access to services off site? Are there any other anticipated program changes that may impact	DY1, Q1	N/A	 (c) <u>Medication Assisted Treatment (MAT)</u> ⊠No, there have been no changes, and NH does not expect to make any changes to the availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site. □Yes, NH expects to make the following changes to the availability of medication assisted treatment at residential treatment facilities: □On-site: □Facilitated access to services off site: ⊠No, NH does not anticipate any other program changes that may impact metrics related to the use of nationally recognized SUD-specific program standards to set provider
metrics related to the use of nationally recognized SUD- specific program standards to set provider qualifications for residential treatment facilities (if New Hampshire is reporting such metrics)? If so, please describe these changes.			qualifications for residential treatment facilities. Yes, NH anticipates the following program changes that may impact metrics related to the use of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities:
5.2 Sufficient Provider Capacity a 5.2.1 Metric Trends	at Critical Levels of	of Care includin	ng for Medication Assisted Treatment for OUD (Milestone 4)
Discuss any relevant trends that the data shows related to assessment of need and	DY1, Q1	N/A	⊠ Trends have not been evaluated in this report as NH does not have sufficient data to analyze.
qualification for SUD services. At a minimum, changes (+ or -)			\Box No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD.

NH's 1115 SUD Demonstration Monitoring Report Page 9

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
greater than two percent should be described.			□Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD:
5.2.2 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 planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients across the continuum of SUD care?	DY1, Q1	N/A	 No, NH does not expect to make any changes to planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients across the continuum of SUD care. Yes, NH expects to make the following changes to planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients across the continuum of SUD care: Image: Image: Imag
Are there any other anticipated 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.	DY1, Q1	N/A	 No, NH does not anticipate any program changes that may impact metrics related to provider capacity at critical levels of care, including MAT for OUD. Yes, NH anticipates the following program changes that may impact metrics related to provider capacity at critical levels of care, including MAT for OUD: Strategies to Address Opioid Abuse and OUD (Milestone 5)
6.2.1 Metric Trends	ensive i reatment a	nu Prevention S	Strategies to Address Opioid Addse and OUD (Milestone 5)
Discuss any relevant trends that the data shows related to assessment of need and	DY1, Q1	N/A	☐ Trends have not been evaluated in this report as NH does not have sufficient data to analyze.

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
qualification for SUD services. At a minimum, changes (+ or -) greater than two percent should be described.			 No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD. Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD: Image: Image: Image:
6.2.2 Implementation Update	I	1	
 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: a. Implementation of opioid prescribing guidelines and other interventions related to the prevention of OUD? b. Expansion of coverage for and access to naloxone? 	DY1, Q1	N/A	 (a) <u>Opioid Prescribing Guidelines</u> ⊠No, there have been no changes and NH does not expect to make any changes to the implementation of opioid prescribing guidelines and other interventions related to the prevention of OUD. □Yes, NH expects to make the following changes to the implementation of opioid prescribing guidelines and other interventions related to the prevention of OUD: (b) <u>Coverage and Access to Naloxone</u> ⊠No, there have been no changes and NH does not expect to make any changes to the expansion of coverage for and access to naloxone. □Yes, NH expects to make the following changes to the expansion of coverage for and access to naloxone:

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
Are there any other anticipated program changes that may impact metrics related to the implementation of comprehensive	DY1, Q1	N/A	⊠No, NH does not anticipate any other program changes that may impact metrics related to the implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUD.
treatment and prevention strategies to address opioid abuse and OUD? If so, please describe these changes.			\Box Yes, NH anticipates the following program changes that may impact metrics related to the implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUD:
7.2 Improved Care Coordination	and Transitions b	etween Levels o	f Care (Milestone 6)
7.2.1 Metric Trends	1	1	
Discuss any relevant trends that the data shows related to assessment of need and qualification for SUD services. At a minimum, changes (+ or -) greater than two percent should	DY1, Q1	N/A	 Trends have not been evaluated in this report as NH does not have sufficient data to analyze. No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD.
be described.			□Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD:
7.2.2 Implementation Update		I	
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	DY1, Q1	N/A	⊠No, there have been no changes and NH does not expect to make any changes to implement policies supporting beneficiaries' transition from residential and inpatient facilities to community-based services and supports.

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
implementation of policies supporting beneficiaries' transition from residential and inpatient facilities to community- based services and supports?			□Yes, NH expects to make the following changes to implement policies supporting beneficiaries' transition from residential and inpatient facilities to community-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	 No, NH does not anticipate any other program changes that may impact metrics related to care coordination and transitions between levels of care. Yes, NH anticipates the following program changes that may impact metrics related to care coordination and transitions between levels of care:
8.2 SUD Health Information Tech 8.2.1 Metric Trends	nology (Health IT]	
8.2.1 Metric Trends Discuss any relevant trends that the data shows related to assessment of need and qualification for SUD services. Changes (+ or -) greater than two percent should be described.	DY1, Q1	N/A	 Trends have not been evaluated in this report as NH does not have sufficient data to analyze. No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD. Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD: •
11.2.2 Implementation Update		1	
Compared to the demonstration design and operational details	DY1, Q1	N/A	(a) <u>Health IT Used to Slow Growth</u>

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) Quarter 1 (7/10/18 – 9/30/18) Submitted on December 4, 2018

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
outlined in STCs and implementation plan, have there been any changes or does New Hampshire expect to make any changes to demonstrate: a. How health IT is being used to slow down the rate of			 No, there have been no changes and NH does not expect to make any changes to demonstrate how health IT is being used to slow down the rate of growth of individuals identified with SUD. Yes, NH expects to make the following changes to demonstrate how health IT is being used to slow down the rate of growth of individuals identified with SUD:
 growth of individuals identified with SUD? 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? 			 (b) <u>Health IT Used to Effectively Treat</u> ⊠ No, there have been no changes and NH does not expect to make any changes to demonstrate how health IT is being used to effectively treat individuals identified with SUD. □ Yes, NH expects to make the following changes to demonstrate how health IT is being used to effectively treat individuals identified with SUD:
 d. Other aspects of New Hampshire's plan to develop the health IT 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? 			 (c) <u>Health IT Used to Monitor Recovery</u> ⊠ No, there have been no changes and NH does not expect to make any changes to demonstrate how health IT is being used to effectively monitor recovery supports and services for individuals identified with SUD. □ Yes, NH expects to make the following changes to demonstrate health IT is being used to effectively monitor recovery supports and services for individuals identified with SUD.

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
 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? 			(d) Health IT Infrastructure/Capabilities ⊠No, there have been no changes and NH does not expect to make any changes to other aspects of its plan to develop health IT infrastructure/capabilities including its delivery system, health plan/MCO, and individual provider level. □Yes, NH plans to make changes to the following aspects of its plan to develop health IT infrastructure/capabilities: □Delivery system: □Health IT Implementation Milestones ⊠No, there have been no changes and NH does not expect to make any changes to other aspects of its health IT implementation milestones. □Yes, NH expects to make changes to the following aspects of its health IT implementation milestones. • (f) Health IT Implementation Timelines ⊠No, there are no changes and NH does not expect to make any changes to the timeline for achieving heath IT implementation milestones: • •

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
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.			 (g) Prescription Drug Monitoring Program (PDM) □No, there are no changes and NH does not expect to make any changes to planned activities to increase the use and functionality of its prescription drug monitoring program (PDMP). ☑ Yes, NH expects to make the following changes to planned activities to increase the use and functionality of its prescription drug monitoring program (PDMP): ■ NH is in the process of developing a strategic plan for its PDMP and will keep CMS informed of any potential changes through monitoring calls and the next quarterly update. The plan is pending review by the State's fiscal committee in November. □ No, NH does not anticipate any other program changes that may impact metrics related to SUD health IT monitoring: ■ See above. There is a possibility that some metrics may change as the State's PDMP strategic plan is considered and approved.
9.2 Other SUD-Related Metrics 9.2.1 Metric Trends			
Discuss any relevant trends that the data shows related to assessment of need and qualification for SUD services. At	DY1, Q1	N/A	Trends have not been evaluated in this report as NH does not have sufficient data to analyze.

greater than two percent should be described. need and qualifications for SUD. □Yes, NH reports the following metric trends greater than 2% for the asses and qualifications for SUD: 9.2.2 Implementation Update Are there any anticipated program changes that may impact the other SUD-related metrics? If so, please describe these changes. DY1, Q1 N/A IO.2 Budget Neutrality DY1, Q1 N/A ⊠No, NH does not anticipate any program changes that may impact the other metrics. IO.2.1 Current status and analysis U U Image: second	Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
Are there any anticipated program changes that may impact the other SUD-related metrics? If so, please describe these changes. DY1, Q1 N/A ⊠No, NH does not anticipate any program changes that may impact the other metrics. □ Yes, NH anticipates the following changes that may impact the other SUI metrics: □ Yes, NH anticipates the following changes that may impact the other SUI metrics: 10.2 Budget Neutrality 10.2.1 Current status and analysis DY1, Q1 N/A Discuss the current status of budget neutrality and provide an analysis of the budget neutrality to date. If the SUD component is part of a comprehensive demonstration, New Hampshire DY1, Q1 N/A The following is a current startus end analysis of a comprehensive demonstration, New Hampshire DY1, Q1 N/A	greater than two percent should			\Box Yes, NH reports the following metric trends greater than 2% for the assessment of need
changes that may impact the other metrics. SUD-related metrics? If so, please metrics. describe these changes. □Yes, NH anticipates the following changes that may impact the other SUI metrics: 10.2 Budget Neutrality • 10.2.1 Current status and analysis • Discuss the current status of DY1, Q1 budget neutrality and provide an analysis of the budget neutrality DY1, Q1 N/A The following is a current status and analysis of budget neutrality: to date. If the SUD component is part of a comprehensive demonstration, New Hampshire Discuss will jeopardize the Budget Neutrality calculations for 2QE	9.2.2 Implementation Update			
10.2.1 Current status and analysis Discuss the current status of DY1, Q1 budget neutrality and provide an N/A analysis of the budget neutrality Experience data for Q1DY01 as reported in CMS64 form is higher to Budget Neutrality Targets on a per member per month basis. It is in part of a comprehensive note that DHHS recently made significant increases to provider rein demonstration, New Hampshire note that DHHS recently made significant increases for 2QE	changes that may impact the other SUD-related metrics? If so, please	DY1, Q1	N/A	\Box Yes, NH anticipates the following changes that may impact the other SUD-related metrics:
Discuss the current status of budget neutrality and provide an analysis of the budget neutrality to date. If the SUD component is part of a comprehensive demonstration, New HampshireDY1, Q1N/AThe following is a current status and analysis of budget neutrality: Experience data for Q1DY01 as reported in CMS64 form is higher to Budget Neutrality Targets on a per member per month basis. It is in note that DHHS recently made significant increases to provider rein residential treatment services (H2034-HF-U4, H0018-HF-U4, and H increases will jeopardize the Budget Neutrality calculations for 2QE				
 budget neutrality and provide an analysis of the budget neutrality to date. If the SUD component is part of a comprehensive demonstration, New Hampshire Experience data for Q1DY01 as reported in CMS64 form is higher to Budget Neutrality Targets on a per member per month basis. It is in note that DHHS recently made significant increases to provider rein residential treatment services (H2034-HF-U4, H0018-HF-U4, and H increases will jeopardize the Budget Neutrality calculations for 2QE 			1	1
SUD-related budget neutrality provider reimbursement changes. and an analysis of budget neutrality as a whole. 10.2.2 Implementation Update Implementation Update	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.	DY1, Q1	N/A	 Experience data for Q1DY01 as reported in CMS64 form is higher than projected Budget Neutrality Targets on a per member per month basis. It is important to note that DHHS recently made significant increases to provider reimbursement for residential treatment services (H2034-HF-U4, H0018-HF-U4, and H0018). These increases will jeopardize the Budget Neutrality calculations for 2QDY01 and later quarters. We recommend revising Budget Neutrality Targets to reflect the recent

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
Are there any anticipated program changes that may impact budget neutrality? If so, please describe these changes.	DY1, Q1	N/A	 No, NH does not anticipate any program changes that impact budget neutrality. Yes, NH anticipates the following program changes that may impact the other SUD-related metrics: NH has raised rates for residential services for children and adults. This may impact the budget neutrality analysis submitted once the rates are effective on January 1, 2019 and the State is in the process of discussing this matter with CMS in the monthly monitoring calls.
11.1 SUD-Related Demonstration	Operations and P	olicy	
11.1.1 Considerations		1 .	
Highlight significant SUD (or if 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	DY1, Q1	N/A	The following are operations or policy considerations that could positively or negatively impact: Beneficiary enrollment: Access to services: Timely provision of services: Budget neutrality: Other provisions that have potential for beneficiary impacts: No, NH does not identify any activity that may accelerate or create delays or impediments in achieving the SUD demonstration's approved goals or objectives. Yes, NH identifies the following activities that may accelerate or create delays or impediments in achieving the SUD demonstration's approved goals and objectives: •

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
document. See report templateinstructions for more detail.11.1.2 Implementation Update			
 Compared to the demonstration 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? 	DY1, Q1	N/A	 (a) Delivery System Operations ⊠No, there have been no changes and NH does not expect to make any changes to how the delivery system operates under the demonstration. □Yes, NH expects the following changes to how the delivery system operates under the demonstration: • (b) Delivery Model ⊠No, there have been no changes and NH does not expect to make any changes to the delivery model affecting demonstration participants. □Yes, NH expects to make the following changes to the delivery model affecting demonstration participants: • (c) Partners in Service Delivery ⊠No, there are no changes and NH does not expect to make any changes to partners involved in service delivery. □Yes, NH expects to make the following changes to partners involved in service delivery.

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary		
Has New Hampshire experienced any significant challenges in partnering with entities contracted to help implement the demonstration (e.g., health plans, credentialing vendors, private sector providers)? Has New Hampshire noted any performance issues with contracted entities?	DY1, Q1	N/A	 No, NH has not experienced any significant challenges or performance issues in partnering with entities contracted to help implement the demonstration. Yes, NH has the following challenges and performance issues with entities contracted to help implement the demonstration: 		
What other initiatives is New 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?	DY1, Q1	N/A	 □ No, NH is not currently working on any other initiatives related to SUD or OUD. □ Yes, NH is currently working on the following initiatives related to SUD or OUD. □ Similar to SUD/OUD: □ Different from SUD/OUD: The New Hampshire Department of Health and Human Services (DHHS) received funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) for the State Opioid Response (SOR) Grant. DHHS is eligible for up to \$45.8 million over two years (\$22.8 million per year), for the purposes of increasing access to medication-assisted treatment, reducing unmet treatment needs, and reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder (OUD). The Department expects that the SOR Grant will compliment efforts being made with the SUD IMD waiver. To learn more, please link to the Department's web site at https://www.dhhs.nh.gov/dcbcs/bdas/sor.htm. 		
12.1.1 Narrative Information	12.1 SUD Demonstration Evaluation Update 12.1.1 Narrative Information				

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
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.	DY1, Q1	N/A	 No, NH has no updates to provide on the SUD evaluation work and timeline. Yes, NH has the following updates on the SUD evaluation work and timeline: On September 20, 2018, New Hampshire entered into a contract with the Pacific Health Policy Group (PHPG) to perform the Evaluation Design Plan for SUD. A call was held with PHPG on 10/4/18 to discuss next steps and the focus of the Evaluation Design. NH provided PHPG with: MCM Performance Measures Draft monitoring plan Public comments and responses for the SUD waiver Methodology and Final Report template for the EQRO A status call schedule was established bi-weekly until the first Draft of the Evaluation Design is submitted to NH (before Thanksgiving). NH met with PHPG on 11/15/18 to review the first version of the Draft Evaluation Design. On 11/20/18, PHPG provided an updated version of the evaluation design draft with changes and comments from the 11/15 meeting that represent an inventory of action items and decisions.
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	 NH has the following updates to provide on the demonstration evaluation: NO, NH does not anticipate any barriers in achieving deliverable goals and/or timelines.
there are any real or anticipated barriers in achieving the goals and timeframes agreed to in the STCs.			□Yes, NH anticipates the following barriers in achieving deliverables goals: •
List anticipated evaluation-related deliverables related to this	DY1, Q1	N/A	□No, NH has no SUD demonstration evaluation update to report.

NH's 1115 SUD Demonstration Monitoring Report Page 21

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary	
demonstration and their due dates.			⊠ The following are the anticipated evaluation-related d demonstration:	leliverables related to this
			Deliverable	Due Date
			1. DRAFT SUD Evaluation Design	1/4/19
			2. REVISED SUD Evaluation Design	No later than 4/5/19
			3. FINAL & APPROVED Evaluation Design posted to the DHHS website https://www.dhhs.nh.gov/	30 days after CMS approval
			4. DRAFT SUD Interim Evaluation Report	6/20/22
			5. FINAL SUD Interim Evaluation Report	No later than 9/30/22
			6. DRAFT SUD Summative Evaluation Report	12/30/24
			7. FINAL SUD Summative Evaluation Report	No later than 3/28/25
			8. FINAL & APPROVED SUD Summative Evaluation Report posted to the DHHS website	30 days after CMS Approval
13.1 Other Demonstration Repor	ting			
13.1.1 General Reporting Requir	ements			
Have there been any changes in New Hampshire's implementation of the	DY1, Q1	N/A	⊠No, there have been no changes to NH's implementat necessitate a change to approved STCs, implementation	-
demonstration that might necessitate a change to approved STCs, implementation plan, or			\Box Yes, the following are changes to NH's implementati necessitate a change to approved:	on of the demonstration that might
monitoring protocol?			□STCs: □Implementation plan:	
			Monitoring protocol:	

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
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	 No, NH does not anticipate the need to make future changes to the STCs, implementation plan, or monitoring protocol based on expected or upcoming implementation changes. Yes, based on expected or upcoming implementation changes, NH anticipates the need to make future changes to the approved: STCs: Implementation plan: Monitoring protocol:
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	DY1, Q1	N/A	 (a) <u>Monitoring Report Schedule</u> ⊠No, NH has not formally requested any changes nor does it expect to formally request any changes to the schedule for completing and submitting monitoring reports. □Yes, NH expects to formally request the following changes to the schedule for completing and submitting monitoring reports:
reports? b. The content or completeness of submitted reports? Future reports?			 (b) <u>Content of Monitoring Reports</u> ⊠No, NH has not formally requested nor does it expect to formally request any changes to the content or completeness of submitted reports or future reports. □Yes, NH expects to formally request the following changes to the content or completeness of: □Submitted reports □Future reports

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
Has New Hampshire identified any real or anticipated issues for submitting timely post-approval demonstration deliverables, including a plan for remediation?	DY1, Q1	N/A	 No, NH has not identified any real or anticipated issues for submitting timely post-approval demonstration deliverables. Yes, NH has identified the following issues for submitting timely post-approval demonstration deliverables. Deliverables. Issue Plan for Remediation:
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.	DY1, Q1	N/A	 No, this is not an annual report and NH did not host a post-award public forum during this reporting period. Yes, the following is NH's summary of the annual post-award public forum held pursuant to 42 CFR § 431.420(c) indicating any resulting action items or issues: On October 15, 2018, at New Hampshire's Medical Care Advisory Committee meeting, the Department presented post award information on the waiver approval and implementation plan. A notice was posted in advance of this meeting to solicit public input. The Department emailed meeting information to individuals and organizations from the interested parties list that was established during the development of the initial waiver application and has been updated thereafter regularly. The State asked for input from members of the state MCAC and the public at large, including providers engaged in waiver efforts. Visit the Department's web site at https://www.dhhs.nh.gov/sud-imd/index.htm for more information. No specific issues or concerns were raised at this meeting and no changes are necessitated in the implementation protocol.
14.1 Notable State Achievements	and/or Innovation	S	
14.1 Narrative Information			

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) Quarter 1 (7/10/18 – 9/30/18) Submitted on December 4, 2018

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	 No, NH has no notable achievements or innovations to report for this reporting topic. Yes, the following is a summary of NH's relevant achievements and/or innovations in this reporting period: Enrollment: Benefits: Operations: Policies pursuant to the hypotheses of the SUD demonstration or that served to provide better care for individuals: Policies pursuant to the hypotheses of the SUD demonstration or that served to provide better care for populations: Reduced cost per capita: Other significant impacts to beneficiary outcomes: