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

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, DY2 Q1, New Hampshire achieved the following implementation milestones:

• CMS and the State agreed that there were not matters that warranted monitoring calls during this reporting period.

During the reporting period, DY2 Q1, 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 data is available as indicated in the NH approved monitoring protocols, 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 reporting period, DY2 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 1.2.1 Metric Trends	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.	DY2,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 data is available as indicated in the NH approved monitoring protocols, to assure that there is sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact).
[Add rows as needed]			
\Box New Hampshire has no metric t	rends to report for t	this reporting top	pic.
1.2.2 Implementation Update	1	1	
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?	DY2, Q1	N/A	
Are there any other anticipated program changes that may impact metrics related to assessment of need and qualification for SUD	DY2, Q1	NA	

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

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Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
services? If so, please describe			
these changes.			
[Add rows as needed]			
\Box New Hampshire has no implem	entation updates to	report for this re	porting topic.
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	DY2, 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 data is available as indicated in the NH approved monitoring protocols, to assure that there is sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact).
be described.			
[Add rows as needed]	1	1	·
□ New Hampshire has no metric t	rends to report for t	his reporting top	אור.
2.2.2 Implementation Update	DVA 01		
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 access to SUD treatment services across the continuum of care for Medicaid beneficiaries (e.g. outpatient	DY2, Q1		

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.	DY2, 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 the data shows related to assessment of need and qualification for SUD services. Changes (+ or -) greater than two percent should be described.	DY2, 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 data is available as indicated in the NH approved monitoring protocols, to assure that there is sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact).
[Add rows as needed]			
			no metric trends to report for this reporting period.
□ New Hampshire is not reporting	g any metrics related	d to this reporting	g topic.
3.2.2 Implementation Update Compared to the demonstration	DY2, 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: Beneficiaries have access to SUD services 			
at the appropriate level of care?			

ii. Interventions are appropriate for the diagnosis and level of care? iii. Use of independent process for reviewing placement in residential treatment settings? iii. Use of independent process for reviewing placement in residential treatment settings? DY2, Q1 N/A 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)? DY2, Q1 N/A Hampshire is reporting such metrics related to the use of the data is on implementation updates to report for this reporting topic. Implementation updates to report for this reporting topic. 4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3) Implementation updates to report for this reporting topic. 4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3) Implementation updates to report for this reporting topic. 4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3) Implementation updates to report for this reporting topic. 4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3) Implementation updates to report for this reporting topic. 4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualification for SUD service	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 use of evidence-based, SUD-specific patient placement criteria (if New Hampshire is reporting such metrics)? If so, please describe these changes. N/A Image: A metric is reporting such metrics)? If so, please describe these changes. Image: A metric is reporting such metrics)? If so, please describe these changes. Image: A metric is reporting such metrics)? If so, please describe these changes. Image: A metric is reporting such metrics)? If so, please describe these changes. Image: A metric is report for this reporting topic. 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 Discuss any relevant trends that the data shows related to assessment of need and qualification for SUD services. DY2, 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 data is available as indicated in the NH approved monitoring protocols, to assure that there is sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact). (Add rows as needed] Image: Add rows as needed Image: Add rows as needed	appropriate for the diagnosis and level of care? iii. Use of independent process for reviewing			
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. Image: Change State St	treatment settings?			
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.DY2, Q1N/AAs approved by CMS at the 9/21/18 SUD monitoring call, New Hampshire will not analyze relevant trends until Demonstration Year 2, Quarter 1 data is available as indicated in the NH approved monitoring protocols, to assure that there is sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu season impact).[Add rows as needed]Image: Changes (-1) or - (-1)	 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 4.2 Use of Nationally Recognized 	entation updates to	report for this re	
the data shows related to analyze relevant trends until Demonstration Year 2, Quarter 1 data is available as indicated assessment of need and in the NH approved monitoring protocols, to assure that there is sufficient data to qualification for SUD services. determine seasonality and common cause variation associated with the data (e.g., flu changes (+ or -) greater than two season impact). <i>[Add rows as needed]</i> determine seasonality and common cause variation associated with the data (e.g., flu		1	-	
	the data shows related to assessment of need and qualification for SUD services. Changes (+ or -) greater than two percent should be described.	DY2, Q1	N/A	analyze relevant trends until Demonstration Year 2, Quarter 1 data is available as indicated in the NH approved monitoring protocols, to assure that there is sufficient data to determine seasonality and common cause variation associated with the data (e.g., flu
		trics related to Mil	estone 3 but has	no metrics to report for this reporting tonic

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 reportir	ng topic.
4.2.2 Implementation Update			
Compared to the demonstration	DY2, Q1	N/A	At this time, neither the He-W 513 or He-A 300 rules have been updated as outlined. We
design and operational details			intend to undertake this work in the coming year.
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			
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	DY2, 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	<u> </u>	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	DY2, 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 data is available as indicated
assessment of need and			in the NH approved monitoring protocols, to assure that there is sufficient data to
qualification for SUD services. At			determine seasonality and common cause variation associated with the data (e.g., flu
a minimum, changes (+ or -)			season impact).
greater than two percent should			
be described.			
[Add rows as needed]			
\Box New Hampshire has no metric t	rends to report for t	his reporting top	nic.
5.2.2 Implementation Update			
Compared to the demonstration	DY2, Q1	N/A	At this time, neither the He-W 513 or He-A 300 rules have been updated as outlined. We
design and operational details			intend to undertake this work in the coming year.
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?		27/1	
Are there any other anticipated	DY2, 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.
			Strategies to Address Opioid Abuse and OUD (Milestone 5)
6.2.1 Metric Trends			
Discuss any relevant trends that	DY2, 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 data is available as indicated
assessment of need and			in the NH approved monitoring protocols, to assure that there is sufficient data to
qualification for SUD services. At			determine seasonality and common cause variation associated with the data (e.g., flu
a minimum, changes (+ or -)			season impact).
greater than two percent should			
be described.			
[Add rows as needed]	1		
□ New Hampshire has no metric t	rends to report for t	this reporting top	ארכ.
6.2.2 Implementation Update	DV2 01	NT/A	
Compared to the demonstration	DY2, Q1	N/A	At this time, neither the He-W 513 or He-A 300 rules have been updated as outlined. We
design and operational details outlined the implementation plan,			intend to undertake this work in the coming year.
outimed the implementation plan,			1

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. 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	DY2, Q1	N/A	
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]			
□ New Hampshire has no implem	2	A	
7.2 Improved Care Coordination	and Transitions b	etween Levels o	f Care (Milestone 6)
7.2.1 Metric Trends	1		
Discuss any relevant trends that	DY2, 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 data is available as indicated
assessment of need and			in the NH approved monitoring protocols, to assure that there is sufficient data to
qualification for SUD services. At			determine seasonality and common cause variation associated with the data (e.g., flu
a minimum, changes (+ or -)			season impact).
greater than two percent should			
be described.			

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary		
[Add rows as needed]					
□ New Hampshire has no metric t	trends to report for t	this reporting to	pic.		
7.2.2 Implementation Update					
Compared to the demonstration	DY2, 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					
implementation of policies					
supporting beneficiaries'					
transition from residential and					
inpatient facilities to community-					
based services and supports?					
Are there any other anticipated	DY2, Q1	N/A			
program changes that may impact					
metrics related to care					
coordination and transitions					
between levels of care? If so,					
please describe these changes.					
[Add rows as needed]					
	□ New Hampshire has no implementation updates to report for this reporting topic.				
	8.2 SUD Health Information Technology (Health IT)				
8.2.1 Metric Trends					
Discuss any relevant trends that	DY2, 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 data is available as indicated		
assessment of need and			in the NH approved monitoring protocols, to assure that there is sufficient data to		

Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
		determine seasonality and common cause variation associated with the data (e.g., flu
		season impact).
rends to report for t	his reporting top	ic.
DY2, Q1	N/A	
	year (DY) and quarter first reported	year (DY) and quarter first reported (if any) rends to report for this reporting top

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]					
	\Box New Hampshire has no implementation updates to report for this reporting topic.				
9.2 Other SUD-Related Metrics					
9.2.1 Metric Trends		Γ			
Discuss any relevant trends that	DY2, 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 data is available as indicated		
assessment of need and			in the NH approved monitoring protocols, to assure that there is sufficient data to		

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qualification for SUD services. At a minimum, changes (+ or -) greater than two percent should be described.determine seasonality and common cause variation associated with the data (e.g., season impact).	flu			
greater than two percent should				
be described.				
[Add rows as needed]				
□ New Hampshire has no metric trends to report for this reporting topic.				
9.2.2 Implementation Update				
Are there any anticipated program DY2, 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 DY2, Q1 N/A The State is currently reviewing its budget neutrality and will submit the analysis				
budget neutrality and provide an separately at a later date.				
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 changes that may impact budget neutrality? If so, please describe	DY2, Q1	N/A	
these changes.			
[Add rows as needed]			
□ New Hampshire has no implem	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 broader demonstration, then SUD-related) demonstration operations or policy considerations that could positively or negatively impact beneficiary enrollment, access to services, timely provision of	DY2, Q1	N/A	
services, timery 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]			
□ New Hampshire has no related of	considerations to re	port for this repo	orting topic.
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	DY2, Q1	N/A	
 fee for service)? b. Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes)? c. Partners involved in service delivery? 			
Has New Hampshire experienced any significant challenges in partnering with entities contracted to help implement the demonstration (e.g., health plans, credentialing vendors, private	DY2, Q1	N/A	

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 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]	DY2, Q1	N/A		
□ New Hampshire has no implem	entation undates to	report for this re	nort	ing tonic
12.1 SUD Demonstration Evaluat	<u>^</u>		port	
12.1.1 Narrative Information				
Provide updates on SUD evaluation work and timeline. The appropriate content will depend on when this report is due to CMS and the timing for the demonstration. See report template instructions for more details.	DY2, Q1	N/A	•	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 Request for Proposal (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	DY2, 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	DY2, Q1	N/A	The following are anticipated evaluation-relat and 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	12/30/24	
			Report		
			4. FINAL SUD Summative Evaluation	No later than	
			Report	3/28/25	
			5. FINAL & APPROVED SUD Summative	30 days after CMS	
			Evaluation Report posted to the DHHS website	Approval	
F 4 1 1 1 17					
[Add rows as needed]					
□ New Hampshire has no SUD de		ition 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	DY2, Q1	N/A			
New Hampshire's	<i>D</i> 1 <i>2</i> , <i>X</i> 1	1.11/1			
implementation of the					
demonstration that might					
necessitate a change to approved					

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary	
STCs, implementation plan, or				
monitoring protocol?	DV2_01			
Does New Hampshire foresee the	DY2, Q1	N/A		
need to make future changes to				
the STCs, implementation plan, or monitoring protocol, based on				
expected or upcoming				
implementation changes?				
Compared to the details outlined	DY2, Q1	N/A		
in the STCs and the monitoring	D12, Q1	1.1721		
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?				
Has New Hampshire identified	DY2, 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				

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Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary		
If applicable within the timing of the demonstration, provide a	DY2, Q1	N/A	The annual post-award forum will be on 12/9/19 at MCAC.		
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 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		tins reporting pe	and, and, this is not an annual report so five manpshire has no post-award public forum		
14.1 Notable State Achievements		s			
14.1 Narrative Information					
Provide any relevant summary of	DY2, Q1	N/A			
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					
capita cost. Achievements should					

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary		
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.					
[Add rows as needed] ☑ New Hampshire has no notable	[Add rows as needed] New Hampshire has no notable achievements or innovations to report for this reporting topic.				