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

State	New Hampshire (NH)			
Demonstration Name	New Hampshire Substance Use Disorder (SUD) Treatment and Recovery Access Section 1115(a) Research and Demonstration Waiver			
Approval Date	July 10, 2018			
Approval Period	July 10, 2018 – June 30, 2023			
SUD Demonstration Goals and Objectives	The goal of this demonstration is for NH to maintain critical access to opioid use disorder (OUD) and other substance use disorder (SUD) services and continue delivery system improvements for these services to provide more coordinated and comprehensive OUD/SUD treatment for Medicaid beneficiaries.  During the demonstration, NH seeks to achieve the following:  1. Increased rates of identification, initiation, and engagement in treatment.  2. Increased adherence to and retention in treatment.  3. Reductions in overdose deaths, particularly those due to opioids.  4. Reduced utilization of emergency departments and inpatient hospital settings for treatment where utilization is preventable or medically appropriate through improved access to other continuum of care services.  5. Fewer readmissions to the same or higher level of care where the readmission is preventable or medically inappropriate.  6. Improved access to care for physical health conditions among Medicaid beneficiaries.			

## 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 Q2, New Hampshire achieved the following implementation milestones:

- Conducted monitoring call with CMS per STC requirements.
- Submitted a draft of the Evaluation Design to CMS for initial input and dialog.
- Worked with the Department's actuarial firm Milliman to determine the impact of recent changes to provider rate reimbursement rates and revised implementation schedule of the Sununu Youth Center on the waiver budget neutrality calculations. The Department is prepared to discuss how the information provided by Milliman will inform discussions with CMS to amend the original budget neutrality calculation documented in the original April 6, 2018 analysis and corresponding letter. The Department contacted CMS on January 9, 2019 to review the budget neutrality analysis submitted by the actuary firm.
- The Department completing, and is submitting in an Excel template, the past quarter's budget neutrality monitoring report.

During the reporting period, DY1 Q2, New Hampshire identified the following trends from the data:

N/A

During the reporting period, DY1 Q2, New Hampshire made the following changes to the implementation plan:

N/A

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

Prompts  1.2 Assessment of Need and Qual 1.2.1 Metric Trends  Discuss any relevant trends that	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary  Summary  Trends have not been evaluated in this report as NH does not have sufficient data to
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.			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 as described:
1.2.2 Implementation Update			
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	<ul> <li>(a) Target Populations</li> <li>☑ No, there have been no changes and NH does not expect to make any changes to the target population(s) of the demonstration.</li> <li>☑ Yes, NH expects to make the following changes to the target populations(s) of the demonstration as described: <ul> <li>■</li> </ul> </li> <li>(b) Clinical Criteria</li> <li>☒ 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.</li> </ul>

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 as described:
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	<ul> <li>☒No, there are no anticipated program changes that may impact NH's metrics related to the assessment and qualifications for SUD services.</li> <li>☐Yes, the following are anticipated program changes that may impact NH's metrics related to the assessment and qualifications for SUD services as described:</li> </ul>
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	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 -) greater than two percent should			□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 as described:
2.2.2 Implementation Update		l .	
Compared to the demonstration design and operational details outlined the implementation plan,	DY1, Q1		(a) Access Across the Continuum of Care

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?			<ul> <li>☑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.</li> <li>☐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 as described:         <ul> <li>(b) Benefit Coverage Under Medicaid State Plan/Expenditure Authority</li> <li>☑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.</li> <li>☐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:</li></ul></li></ul>
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 as described:
3.2 Use of Evidence-based, SUD-s	 specific Patient Pla	  cement Criteria	a (Milestone 2)
3.2.1 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.
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 as described:
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	DY, Q1	N/A	(a) Placement Criteria  ⊠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 as described:  ■
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:  i. 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?			<ul> <li>☒No, NH does not expect to make any changes to implement a utilization management approach.</li> <li>☐Yes, NH expects to make the following changes to implement a utilization management approach to ensure:         <ul> <li>☐Beneficiaries have access to SUD services at the appropriate level of care as described:</li> <li>☐Interventions are appropriate for the diagnosis and level of care as described:</li> <li>☐Use of independent process for reviewing placement in residential treatment settings as described:</li> </ul> </li> </ul>
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 gram Standards	<ul> <li>☑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.</li> <li>☐Yes, NH expects to make the following changes that may impact metrics related to the use of evidence-based, SUD-specific patient placement criteria as described:         <ul> <li>ato Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)</li> </ul> </li> </ul>
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 as described:
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?  b. State review process for residential treatment providers' compliance with qualifications standards?  c. Availability of medication assisted treatment at residential treatment	DY1, Q1	N/A	(a) Provider Qualifications  ⊠ 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 as described:  ■  (b) State Review Process  ⊠ 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 as described:

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 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	DY1, Q1	N/A	(c) Medication Assisted Treatment (MAT)  ⊠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 as described: □Facilitated access to services off site as described: □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 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 as described: □Yes of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities as described: □Yes of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities as described: □Yes of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities as described: □Xes of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities as described: □Xes of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities as described: □Xes of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities as described: □Xes of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities and the facilities
these changes.  5.2 Sufficient Provider Canacity a	Lat. Critical Levels o	 f Care includin	g for Medication Assisted Treatment for OUD (Milestone 4)
5.2.1 Metric Trends		,	e (
Discuss any relevant trends that the data shows related to assessment of need and qualification for SUD services. At	DY1, Q1	N/A	<ul> <li>☑ Trends have not been evaluated in this report as NH does not have sufficient data to analyze.</li> <li>☑ No, NH reports no relevant metric trends greater than 2% related to the assessment of</li> </ul>
a minimum, changes (+ or -)			need and qualifications for SUD.

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 as described:
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	<ul> <li>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.</li> <li>□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 as described:</li> </ul>
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	<ul> <li>☑ 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.</li> <li>☐ Yes, NH anticipates the following program changes that may impact metrics related to provider capacity at critical levels of care, including MAT for OUD as described:</li> <li>⑤ Strategies to Address Opioid Abuse and OUD (Milestone 5)</li> </ul>
6.2.1 Metric Trends	nsive Treatment a	na i revenuon s	bu augres to Address Optoid Abuse and OOD (Willestone 3)
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 as described:
6.2.2 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 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	<ul> <li>(a) Opioid Prescribing Guidelines</li> <li>  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 as described:  •  (b) Coverage and Access to Naloxone  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 as described:  □  Yes, NH expects to make the following changes to the expansion of coverage for and access to naloxone as described:  □  □  □  □  □  □  □  □  □  □  □  □  □</li></ul>

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
			Please note that the next Quarterly report will provide additional information about the Department's efforts to provide additional access to Naloxone through the State Opioid Response (SOR) initiative.
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.			☐ 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 as described:
7.2 Improved Care Coordination 7.2.1 Metric Trends	and Transitions b	etween Levels o	f Care (Milestone 6)
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	<ul> <li>☑ Trends have not been evaluated in this report as NH does not have sufficient data to analyze.</li> <li>☐ No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD.</li> <li>☐ Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD as described:</li> </ul>
7.2.2 Implementation Update	1	1	
Compared to the demonstration design and operational details outlined the implementation plan,	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
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?			☐ 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 as described:
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	<ul> <li>☒No, NH does not anticipate any other program changes that may impact metrics related to care coordination and transitions between levels of care.</li> <li>☐Yes, NH anticipates the following program changes that may impact metrics related to care coordination and transitions between levels of care as described:</li> </ul>
8.2 SUD Health Information Tech	nology (Health IT	7)	
B.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	<ul> <li>☑ Trends have not been evaluated in this report as NH does not have sufficient data to analyze.</li> <li>☐ No, NH reports no relevant metric trends greater than 2% related to the assessment of need and qualifications for SUD.</li> <li>☐ Yes, NH reports the following metric trends greater than 2% for the assessment of need and qualifications for SUD as described:</li> </ul>

Quarter 2 (10/1/18 – 12/31/18) Submitted on February 28, 2019

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
Compared to the demonstration design and operational details 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 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?  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?	DY1, Q1	N/A	<ul> <li>(a) Health IT Used to Slow Growth</li></ul>

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
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?			□ 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 as described:  (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 as described:  □ □ Health plan/MCO as described:  □ Individual provider level as described:  (e) 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 as described:  □ Yes, NH expects to make changes to the following aspects of its health IT implementation milestones as described:  □ Yes, NH expects to make changes to the following aspects of its health IT implementation milestones as described:

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
			⊠No, there are no changes and NH does not expect to make any changes to the timeline for achieving heath IT implementation milestones.
			☐ Yes, NH expects to make the following changes to the timeline for achieving heath IT implementation milestones as described:
			(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) as described:
Are there any other anticipated program changes that may impact metrics related to SUD Health IT			⊠No, NH does not anticipate any other program changes that may impact metrics related to SUD health IT monitoring.
(if New Hampshire is reporting such metrics)? If so, please describe these changes.			☐ Yes, NH expects to make the following program changes that may impact metrics related to SUD health IT monitoring as described:
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.

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
a minimum, changes (+ or -) greater than two percent should be described.			$\square$ 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 as described:
9.2.2 Implementation Update		1	
Are there any anticipated program changes that may impact the other SUD-related metrics? If so, please	DY1, Q1	N/A	⊠No, NH does not anticipate any program changes that may impact the other SUD-related metrics.
describe these changes.			☐ Yes, NH anticipates the following changes that may impact the other SUD-related metrics as described:
10.2 Budget Neutrality			
10.2.1 Current status and analysi	s		
Discuss the current status of budget neutrality and provide an analysis of the budget neutrality to date. If the SUD component is	DY1, Q1	N/A	The following is a current status and analysis of budget neutrality:  • Please refer to the quarterly report submitted to CMS on December 4, 2018.
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.			
10.2.2 Implementation Update		•	

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
Are there any anticipated program	DY1, Q1	N/A	☐ No, NH does not anticipate any program changes that impact budget neutrality.
changes that may impact budget			
neutrality? If so, please describe			⊠Yes, NH anticipates the following program changes that may impact the other SUD-
these changes.			related metrics as described:
			<ul> <li>Please refer to the quarterly report submitted to CMS on December 4, 2018.</li> </ul>
11.1 SUD-Related Demonstration	Operations and P	olicy	
11.1.1 Considerations		T	
Highlight significant SUD (or if	DY1, Q1	N/A	The following are operations or policy considerations that could positively or negatively
broader demonstration, then			impact:
SUD-related) demonstration			Beneficiary enrollment as described:
operations or policy considerations that could			☐ Access to services as described:
positively or negatively impact			☐ Timely provision of services as described:
beneficiary enrollment, access to			☐ Budget neutrality as described:
services, timely provision of			Other provisions that have potential for beneficiary impacts as described:
services, budget neutrality, or any other provision that has potential			No, NH does not identify any activity that may accelerate, create delays, or impede achieving the SUD demonstration's approved goals or objectives.
for beneficiary impacts. Also note any activity that may accelerate or			achieving the 30D demonstration's approved goals of objectives.
create delays or impediments in			$\square$ Yes, NH identifies the following activities that may accelerate or create delays or
achieving the SUD			impediments in achieving the SUD demonstration's approved goals and objectives as
demonstration's approved goals			described:
or objectives, if not already			•
reported elsewhere in this			
document. See report template			
instructions for more detail.			
11.1.2 Implementation Update			

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
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 as described:  ■  (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 as described:  ■  (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 as described:  ■
Has New Hampshire experienced any significant challenges in	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.

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
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?			☐ Yes, NH has the following challenges and performance issues with entities contracted to help implement the demonstration as described:
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?  12.1 SUD Demonstration Evaluate	DY1, Q1  ion Update	N/A	<ul> <li>☒No, NH is not currently working on any other initiatives related to SUD or OUD.</li> <li>☐Yes, NH is currently working on the following initiatives related to SUD or OUD:</li> <li>☐Similar to SUD/OUD as described:</li> <li>☐Different from SUD/OUD as described:</li> </ul>
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.	DY1, Q1	N/A	<ul> <li>□ No, NH has no updates to provide on the SUD evaluation work and timeline.</li> <li>□ Yes, NH has the following updates on the SUD evaluation work and timeline as described:</li> <li>□ On December 19, 2018, NH in collaboration with the independent evaluator Westport Healthcare Management, Inc. d/b/a Pacific Health Policy Group, submitted a Draft Evaluation Design and loaded this document in the PDMA.</li> <li>□ NH is waiting for feedback from CMS and welcomes any additional discussion regarding the Draft Evaluation Design.</li> </ul>
Provide status updates on deliverables related to the	DY1, Q1	N/A	⊠No, NH has no updates to provide on the demonstration evaluation.

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary	
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.			☐ Yes, NH has the following updates to provide on the object of the last of t	deliverable goals and/or timelines.
List anticipated evaluation-related deliverables related to this demonstration and their due dates.	DY1, Q1	N/A	<ul> <li>□ No, NH has no anticipated evaluation-related deliveratoreport.</li> <li>□ Yes, NH is reporting the following anticipated evaluathis demonstration and their due dates (same as reported)</li> </ul>	tion-related deliverables related to
			Deliverable	Due Date
			1. REVISED SUD Evaluation Design	No later than 4/5/19
			2. FINAL & APPROVED Evaluation Design posted to the DHHS website @ https://www.dhhs.nh.gov/	30 days after CMS approval
			3. DRAFT SUD Interim Evaluation Report	6/20/22
			4. FINAL SUD Interim Evaluation Report	No later than 9/30/22
			5. DRAFT SUD Summative Evaluation Report	12/30/24
			6. FINAL SUD Summative Evaluation Report	No later than 3/28/25
			7. FINAL & APPROVED SUD Summative Evaluation	30 days after CMS Approval

Report posted to the DHHS website

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
13.1 Other Demonstration Repor			
13.1.1 General Reporting Require			
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 implementation of the demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol.
demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol?			☐ Yes, the following are changes to NH's implementation of the demonstration that might necessitate a change to approved:  ☐ STCs as described:  ☐ Implementation plan as described:  ☐ Monitoring protocol as described:
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	<ul> <li>☒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.</li> <li>☐Yes, based on expected or upcoming implementation changes, NH anticipates the need to make future changes to the approved:         ☐STCs as described:         ☐Implementation plan as described:         ☐Monitoring protocol as described:</li> </ul>
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:	DY1, Q1	N/A	(a) Monitoring Report Schedule  ⊠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:

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
<ul> <li>a. The schedule for completing and submitting monitoring reports?</li> <li>b. The content or completeness of submitted reports? Future reports?</li> </ul>			<ul> <li>(b) Content of Monitoring Reports</li> <li>□ 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.</li> <li>□ Yes, NH expects to formally request the following changes to the content or completeness of:</li> <li>□ Submitted reports as described:</li> <li>□ Future reports as described:</li> <li>□ CMS created standardized SUD monitoring tools and offered NH a revised due date of 12/28/18 for submission.</li> <li>□ On December 19, 2018, NH submitted the Draft SUD Monitoring Protocols and Metrics Workbook to CMS.</li> <li>□ On December 19, 2018, NH loaded the Draft SUD Monitoring Protocols in the PDMA.</li> <li>■ NH is waiting for feedback from CMS regarding the submitted Draft SUD Monitoring Protocols and welcomes discussions.</li> </ul>
Has New Hampshire identified any real or anticipated issues for submitting timely post-approval demonstration deliverables, including a plan for remediation?  13.1.2 Post Award Public Forum	DY1, Q1	N/A	<ul> <li>☒No, NH has not identified any real or anticipated issues for submitting timely post-approval demonstration deliverables.</li> <li>☐Yes, NH has identified the following issues for submitting timely post-approval demonstration deliverables:</li> <li>☐Deliverable as described:</li> <li>☐Issue as described:</li> <li>☐Plan for remediation as described:</li> </ul>

Prompts	Demonstration year (DY) and quarter first reported	Related metric (if any)	Summary
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	<ul> <li>No, this is not an annual report and NH did not host a post-award public forum during this reporting period.</li> <li>□ 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 as described:</li> </ul>
14.1 Notable State Achievements	and/or Innovation	S	
14.1 Narrative Information  Provide any relevant summary of	DY1, 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 focus on significant impacts to beneficiary outcomes. Whenever possible, the summary should	211, V1		<ul> <li>☑No, NH has no notable achievements or innovations to report for this reporting topic.</li> <li>☐Yes, the following is a summary of NH's relevant achievements and/or innovations in this reporting period:</li> <li>☐Enrollment as described:</li> <li>☐Operations as described:</li> <li>☐Policies pursuant to the hypotheses of the SUD demonstration or that served to provide better care for individuals as described:</li> <li>☐Policies pursuant to the hypotheses of the SUD demonstration or that served to provide better care for populations as described:</li> <li>☐Reduced cost per capita as described:</li> <li>☐Other significant impacts to beneficiary outcomes as described:</li> </ul>

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describe the achievement or innovation in quantifiable terms, e.g., number of impacted beneficiaries.			