

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

The state should complete this Title Page at the beginning of a demonstration and submit as the title page of all SUD Monitoring Reports. The content of this l table should stay consistent over time.

Medicaid Section 1115 SUD Demonstration Monitoring Report – Part B
 NM [Centennial Care 2.0 1115 Medicaid Demonstration]
 Demonstration Year 2 – January 1, 2020-December 31,2020
 DY2 Quarter 2 – April 1, 2020- June 30, 2020
 Submitted on [08/31/2020]

State	<i>New Mexico</i>
Demonstration name	<i>Centennial Care 2.0 1115 Medicaid Demonstration</i>
Approval date for demonstration	<i>12/14/2018.</i>
Approval period for SUD	<i>01/01/2019-12/31/2023</i>
Approval date for SUD, if different from above	<i>05/21/2019</i>
Implementation date of SUD, if different from above	<i>01/01/2019</i>

SUD (or if broader demonstration, then SUD - related) demonstration goals and objectives

New Mexico’s 1115 waiver application supports and focuses its SUD evaluation on the six goals developed by CMS:

1. Increased rates of identification, initiation and engagement in treatment for OUD and other SUDs;
2. Increased adherence to and retention in treatment for OUD and other SUD;
3. Reductions in overdose deaths, particularly those due to opioids;
4. Reduced utilization of emergency departments and inpatient hospital settings for OUD and other SUD treatment where the utilization is preventable or medically inappropriate through improved access to other continuum of care services;
5. Fewer readmissions to the same or higher level of care where readmission is preventable or medically inappropriate for OUD and other SUD; and
6. Improved access to care for physical health conditions among beneficiaries with OUD or other SUDs.

This implementation plan will describe services currently in place, and put forward our plans to implement new services, i.e. our gaps in service options. It is based upon American Society of Addiction Medicine (ASAM) levels of care for the continuum of care, and is organized by CMS’s SUD milestones:

1. Access to critical levels of care for OUD and other SUDs
2. Widespread use of evidence-based, SUD-specific patient placement criteria;
3. Use of nationally recognized, evidence-based, SUD program standards to set residential treatment provider qualifications;
4. Sufficient provider capacity at each level of care, including Medication Assisted Treatment (MAT);
5. Implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUD; and
6. Improved care coordination and transitions between levels of care.

2. Executive Summary

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

New Mexico has made significant advances in recent years in our services to both combat and treat OUD and SUD. We halted the increasing overdose trend from the highest rate among states to 13th. We must consider, however, that the upward trends of other states also impact this. However, New Mexico continues to be the top state in alcohol-related deaths and third in the nation for suicides. We still have much work to do.

New Mexico's continuum of SUD services and its implementation plan also includes:

- Treatment of co-occurring mental health conditions with a primary diagnosis of SUD;
- A focus on the integration of SUD screening in physical health provider locations;
- The introduction of behavioral health counselors in primary care agencies, and primary care practitioners in behavioral health agencies; and
- Interdisciplinary teaming with the Medicaid beneficiary and his/her natural supports to treat not only the person with the SUD, but also the family or natural support system.

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

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
1.2 Assessment of Need and Qualification for SUD Services			
1.2.1 Metric Trends			
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to assessment of need and qualification for SUD services.	<p>The number of beneficiaries with a SUD diagnosis and a SUD-related service during the measurement period (QTR 2 DY2 2020) decreased by 3% from the first quarter of DY2. SUD is a key behavioral health issue for the state and this trend underrepresents the scope of the problem. In response to the public health emergency related to COVID-19, HSD has allowed behavioral health providers to offer most behavioral health services using telehealth, telephonic and e-visit delivery systems to ensure safe access to health care. Despite these efforts to maintain access, utilization of services has dropped.</p> <p>QTR 2- A total of 142,592 beneficiaries with a SUD diagnosis sought SUD-related service during the measurement period. The average number of beneficiaries for the second quarter was 47,531 per month.</p>	QTR-2 04/01/2020- 06/30/2020	Number of beneficiaries with a SUD diagnosis and a SUD-related service during the measurement period and/or in the 11 months before the measurement period
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to assessment of need and qualification for SUD services.		Annual- 01/01/2020- 12/31/2020	Number of beneficiaries with a claim for residential or inpatient treatment for SUD in IMDs during the measurement period
<input checked="" type="checkbox"/> The state has no metrics trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
1.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <input type="checkbox"/> i) The target population(s) of the demonstration <input type="checkbox"/> ii) The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to assessment of need and qualification for SUD services			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
2.2 Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)			
2.2.1 Metric Trends			
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1	<p>The number of beneficiaries enrolled during the measurement period (QTR 2 DY2 2020) and receiving any SUD treatment service, facility claim, or pharmacy claim decreased by 5% from the first quarter of DY2. SUD is a key behavioral health issue for the state and this trend underrepresents the scope of the problem. In response to the public health emergency related to COVID-19, HSD has allowed behavioral health providers to offer most behavioral health services using telehealth, telephonic and e-visit delivery systems to ensure safe access to health care. Despite these efforts to maintain access, utilization of services has dropped. In addition, BHSD will be re-evaluating data collection and analysis protocols to ensure we are capturing accurate data for this metric.</p> <p>QTR 2- A total of 138,372 beneficiaries enrolled in the measurement period received any SUD treatment service, facility claim, or pharmacy claim during the measurement period. The average number of beneficiaries for the second quarter is 46,124 per month.</p>	QTR-2 04/01/2020- 06/30/2020	Number of beneficiaries enrolled in the measurement period receiving any SUD treatment service, facility claim, or pharmacy claim during the measurement period
<input type="checkbox"/> The state has no metrics trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1	<p>The number of beneficiaries who used early intervention services during the measurement period (QTR 2 DY2 2020) decreased by 15% from the first quarter of DY2. This is a significant decline, particularly following an 85% increase over the course of DY1 and another increase of 38% from QTR 4 of DY1 to QTR 1 of DY2. The primary driver of the upward trend was the addition of SBIRT to the state’s Medicaid program, effective 1/1/19, followed by expanded outreach to providers and state-sponsored provider trainings around the state. This quarter’s decline clearly reflects the impact of the COVID-19 public health emergency. In response to the public health emergency, HSD has allowed behavioral health providers to offer most behavioral health services using telehealth, telephonic and e-visit delivery systems to ensure safe access to health care. Despite these efforts to maintain access, utilization of services has dropped.</p> <p>QTR 2- A total of 1,727 beneficiaries used early intervention services during the measurement period. The average number of beneficiaries for the second quarter is 576 per month.</p>	QTR-2 04/01/2020- 06/30/2020	Number of beneficiaries who used early intervention services (such as procedure codes associated with SBIRT) during the measurement period
<input type="checkbox"/> The state has no metrics trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1	<p>The number of beneficiaries who used outpatient services for SUD during the measurement period (QTR 2 DY2 2020) decreased by 13% from the end of DY2 QTR1. SUD is a key behavioral health issue for the state and this trend underrepresents the scope of the problem. In response to the public health emergency related to COVID-19, HSD has allowed behavioral health providers to offer most behavioral health services using telehealth, telephonic and e-visit delivery systems to ensure safe access to health care. Despite these efforts to maintain access, utilization of services has dropped.</p> <p>QTR 2- A total of 21,641 beneficiaries used outpatient services for SUD during the measurement period. The average number of beneficiaries for the second quarter is 7,214 per month.</p>	QTR-2 04/01/2020- 06/30/2020	Number of beneficiaries who used outpatient services for SUD (such as outpatient recovery or motivational enhancement therapies, step down care, and monitoring for stable patients) during the measurement period
<input type="checkbox"/> The state has no metrics trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1	<p>The number of unique beneficiaries who used intensive outpatient and/or partial hospitalization services for SUD during the measurement period (QTR 2 DY2 2020) saw a 9% increase between the first and second quarters of DY2. There were no active Partial Hospitalization Programs (PHP) in NM during the measurement period, so this metric applies only to Intensive Outpatient Program (IOP). The number of IOP programs in NM doubled during 2019, and this modest increase may be a reflection of that growth, tempered by the drop in utilization across all behavioral health services that has resulted from the COVID-19 public health emergency. IOP providers have worked particularly hard to ensure that patients can get care through phone and video which has increased compliance and participation. With the video ability, IOP it is expanding to rural communities.</p> <p>QTR 2 - A total of 12,569 unique beneficiaries used intensive outpatient services for SUD during the measurement period. The average number of unique beneficiaries for the second quarter are 4,190 per month.</p>	QTR-2 04/01/2020- 06/30/2020	Number of unique beneficiaries who used intensive outpatient and/or partial hospitalization services for SUD (such as specialized outpatient SUD therapy or other clinical services) during the measurement period
<input type="checkbox"/> The state has no metrics trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1	<p>The number of beneficiaries who used residential and/or inpatient services for SUD during the measurement period (QTR 2 DY2 2020) decreased by 2% between the first quarter of DY2 and the second quarter of DY2. This slight decline, even in the midst of dropping utilization across all services due to the COVID-19 public health emergency, may reflect something of a stabilization in the provider network for residential and inpatient services. Providers have been particularly challenged by the need to transition from reimbursement largely through state general funds to enrollment in the Medicaid program.</p> <p>QTR 2- A total of 2,744 beneficiaries used residential and/or inpatient services for SUD during the measurement period. The average of number of beneficiaries for the second quarter is 915 per month.</p>	QTR-2 04/01/2020- 06/30/2020	Number of beneficiaries who use residential and/or inpatient services for SUD during the measurement period
<input type="checkbox"/> The state has no metrics trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1	<p>The number of beneficiaries who use withdrawal management services during the measurement period (QTR 2 DY2 2020) decreased by 9% between the first quarter of DY2 and the second quarter of DY2. These are very small numbers and slight quarter to quarter shifts result in large percentage changes. The provider network for withdrawal management services has been particularly challenged by the need to transition from reimbursement largely through state general funds to enrollment in the Medicaid program, and providers report continued difficulty retaining medical staff sufficient to maintain services, an unfortunately common challenge in NM. In addition, this quarter’s decline reflects the impact of the COVID-19 public health emergency. In response to the public health emergency, HSD has allowed behavioral health providers to offer most behavioral health services using telehealth, telephonic and e-visit delivery systems to ensure safe access to health care. Withdrawal management services are not all amenable to telehealth type delivery of care.</p> <p>QTR 2- A total of 72 beneficiaries used withdrawal management services during the measurement period. The average number of beneficiaries for the second quarter was 24 per month.</p>	QTR-2 04/01/2020- 06/30/2020	Number of beneficiaries who use withdrawal management services (such as outpatient, inpatient, or residential) during the measurement period
<input type="checkbox"/> The state has no metrics trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1	<p>The number of beneficiaries who had a claim for MAT for SUD during the measurement period (QTR 2 DY2 2020) decreased by 3% between the first quarter and second quarters of DY2. SUD is a key behavioral health issue for the state and this trend underrepresents the scope of the problem. The state has identified a large number of providers certified to provide buprenorphine who are not actively prescribing and will be working to address this situation in the coming year. In addition, this quarter’s decline reflects the impact of the COVID-19 public health emergency. In response to the public health emergency, HSD has allowed behavioral health providers to offer most behavioral health services using telehealth, telephonic and e-visit delivery systems to ensure safe access to health care. Despite these efforts, utilization has declined across all behavioral health services.</p> <p>QTR 2- A total of 125,287 beneficiaries had a claim for MAT for SUD during the measurement period. The average number of beneficiaries for the second quarter is 41,762 per month.</p>	QTR-2 04/01/2020- 06/30/2020	Number of beneficiaries who have a claim for MAT for SUD during the measurement period
<input type="checkbox"/> The state has no metrics trends to report for this reporting topic.			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1		Annual- 01/01/2020- 12/31/2020	The average length of stay for beneficiaries discharged from IMD inpatient or residential treatment for SUD during the measurement period
<input checked="" type="checkbox"/> The state has no metrics trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
2.2.2 Implementation Update			
<p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> i) Planned activities to improve access to SUD treatment services across the continuum of care for Medicaid beneficiaries (e.g. outpatient services, intensive outpatient services, medication assisted treatment, services in intensive residential and inpatient settings, medically supervised withdrawal management) <input type="checkbox"/> ii) SUD benefit coverage under the Medicaid state plan or the Expenditure Authority, particularly for residential treatment, medically supervised withdrawal management, and medication assisted treatment services provided to individuals in IMDs 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 1			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
3.2 Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)			
3.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2			
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 2.			
3.2.2 Implementation Update			
<p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> i) Planned activities to improve providers’ use of evidence-based, SUD-specific placement criteria <input type="checkbox"/> ii) Implementation of a utilization management approach to ensure (a) beneficiaries have access to SUD services at the appropriate level of care, (b) interventions are appropriate for the diagnosis and level of care, or (c) use of independent process for reviewing placement in residential treatment settings 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 2			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 2.			
4.2 Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)			
4.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3			
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 3.			
4.2.2 Implementation Update			
<p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> i) Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards <input type="checkbox"/> ii) State review process for residential treatment providers' compliance with qualifications standards <input type="checkbox"/> iii) Availability of medication assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 3			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input checked="" type="checkbox"/> The state is not reporting metrics related to Milestone 3.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
5.2 Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)			
5.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4		Annual-01/01/2020-12/31/2020	The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4		Annual-01/01/2020-12/31/2020	The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period and who meet the standards to provide buprenorphine or methadone as part of MAT
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
5.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <input type="checkbox"/> Planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients in across the continuum of SUD care			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 4			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
6.2 Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)			
6.2.1 Metric Trends			

<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5		Annual- 01/01/2020- 12/31/2020	Percentage of beneficiaries with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following: <ul style="list-style-type: none"> • Initiation of AOD Treatment—percentage of beneficiaries who initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or MAT within 14 days of the diagnosis • Engagement of AOD Treatment—percentage of beneficiaries who initiated treatment and
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Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
			<p>who had two or more additional AOD services or MAT within 34 days of the initiation visit</p> <p>The following diagnosis cohorts are reported for each rate: (1) Alcohol abuse or dependence, (2) Opioid abuse or dependence, (3) Other drug abuse or dependence, and (4) Total AOD abuse or dependence. A total of 8 separate rates are reported for this measure.</p>

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5		Annual-01/01/2020-12/31/2020	Percentage of beneficiaries age 18 and older who received prescriptions for opioids with an average daily dosage greater than or equal to 90 morphine milligram equivalents (MME) over a period of 90 days or more. Beneficiaries with a cancer diagnosis or in hospice are excluded.
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5		Annual-01/01/2020-12/31/2020	Percentage of beneficiaries age 18 and older with concurrent use of prescription opioids and benzodiazepine. Patients with a cancer diagnosis or in hospice are excluded.
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5		Annual-01/01/2020-12/31/2020	Percentage of adults in the denominator with pharmacotherapy for OUD who have at least 180 days of continuous treatment.
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
6.2.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD <input type="checkbox"/> ii) Expansion of coverage for and access to naloxone 			
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 5			
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
7.2 Improved Care Coordination and Transitions between Levels of Care (Milestone 6) 7.2.1 Metric Trends			

<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6		Annual-01/01/2020-12/31/2020	<p>Percentage of ED visits for beneficiaries who have a principal diagnosis of AOD abuse or dependence and who had a follow-up visit with a corresponding principal diagnosis for AOD. Two rates are reported:</p> <p>- Percentage of ED visits for AOD abuse or dependence for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).</p> <p>- Percentage of ED visits for AOD abuse or dependence for which the beneficiary received follow-up within 30 days of the ED visit (31 total days).</p>
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DY2 Quarter 2 – April 1, 2020- June 30, 2020
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<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			

<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6		Annual- 01/01/2020- 12/31/2020	Percentage of ED visits for beneficiaries who have a principal diagnosis of mental illness and who had a follow-up visit with a corresponding principal diagnosis for mental illness. Two rates are reported: - Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit (8 total days). - Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit (31 total days)
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
7.2.2 Implementation Update			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
Compared to the demonstration design and operational details, the state expects to make the following changes to: <input type="checkbox"/> Implementation of policies supporting beneficiaries’ transition from residential and inpatient facilities to community-based services and supports			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Milestone 6			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
8.2 SUD Health Information Technology (Health IT)			
8.2.1 Metric Trends			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its Health IT metrics		Annual-01/01/2020-12/31/2020	Percentage of providers checking PDMP by provider type (number of PDMP users, number of checks)
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

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<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its Health IT metrics		Annual-01/01/2020-12/31/2020	Number of providers trained on pain management through Project ECHO and number of training sessions held.
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its Health IT metrics		Annual-01/01/2020-12/31/2020	Number of providers and resources managed in provider/resource directory; accuracy of information; frequency of information update
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its Health IT metrics	.	Annual-01/01/2020-12/31/2020	Number of clinicians with list of community resources that individuals can be referred to in an e-directory; tracking MAT with counseling and behavioral therapies to treat SUD and prevent opioid overdose
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
8.2.2 Implementation Update			
<p>Compared to the demonstration design and operational details, the state expects to make the following changes to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> i) How health IT is being used to slow down the rate of growth of individuals identified with SUD <input type="checkbox"/> ii) How health IT is being used to treat effectively individuals identified with SUD <input type="checkbox"/> iii) How health IT is being used to effectively monitor “recovery” supports and services for individuals identified with SUD <input type="checkbox"/> iv) Other aspects of the state’s plan to develop the health IT infrastructure/capabilities at the state, delivery system, health plan/MCO, and individual provider levels <input type="checkbox"/> v) Other aspects of the state’s health IT implementation milestones <input type="checkbox"/> vi) The timeline for achieving health IT implementation milestones <input type="checkbox"/> vii) Planned activities to increase use and functionality of the state’s prescription drug monitoring program 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to Health IT			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
9.2 Other SUD-Related Metrics			
9.2.1 Metric Trends			
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics	<p>The total number of ED visits for SUD per 1,000 beneficiaries in the measurement period (QTR 2 DY2 2020) declined 9% between the first and second quarter of DY2, dropping from 16.1 per 1,000 to 14.7 per 1,000. Since the start of Centennial Care 2.0 in 2019, the state has expanded access to both inpatient and outpatient SUD services. While it would be heartening to attribute the decline in this measure to expanded access to inpatient and outpatient SUD services, the COVID-19 public health emergency is also a driver: average Medicaid enrollment increased 3% this quarter and the number of ED visits dropped by 5%, contributing to a lower ratio for this metric. In addition, utilization of all hospital-based services declined this quarter as hospitals focused their efforts on COVID-related cases.</p> <p>Note: The denominator, or total beneficiaries, is the average number of beneficiaries per month for each quarter. The numerator is the total number of inpatient discharges related to a SUD stay during the measurement period.</p> <p>QTR 2- Total number of inpatient stays per 1,000 beneficiaries in the measurement period. Denominator: 700,454 Numerator: 10,334 Stays/1,000: 14.7</p> <p>* Claim lag for data is present for 90 days after the end of the quarter</p>	QTR-2 04/01/2020- 06/30/2020	Total number of ED visits for SUD per 1,000 beneficiaries in the measurement period.
<input type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics	<p>The total number of inpatient stays related to SUD per 1,000 beneficiaries in the measurement period (QTR 2 DY2 2020) increased 2% between the first and second quarters of DY2, rising from 6.6 per 1,000 to 6.7 per 1,000. Since the start of Centennial Care 2.0 in 2019, the state has expanded access to both inpatient and outpatient SUD services. While it would be heartening to attribute the relative stability in this measure to expanded access to inpatient and outpatient SUD services, there are other factors. Due to economic impacts from COVID-19, average Medicaid enrollment increased 3% this quarter, contributing to a lower ratio for this metric despite a 5% increase in inpatient stays.</p> <p>Note: The denominator, or total beneficiaries, is the average number of beneficiaries per month for each quarter. The numerator is the total number of inpatient discharges related to a SUD stay during the measurement period.</p> <p>QTR 2- Total number of inpatient stays per 1,000 beneficiaries in the measurement period. Denominator: 700,454 Numerator: 4,660 Stays/1,000: 6.7</p> <p>* Claim lag for data is present for 90 days after the end of the quarter.</p>	QTR-2 04/01/2020- 06/30/2020	Total number of inpatient stays per 1,000 beneficiaries in the measurement period.
<input type="checkbox"/> The state has no trends to report for this reporting topic.			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics		Annual- 01/01/2020- 12/31/2020	The rate of all-cause readmissions during the measurement period among beneficiaries with SUD.

Medicaid Section 1115 SUD Demonstration Monitoring Report – Part B
 NM [Centennial Care 2.0 1115 Medicaid Demonstration]
 Demonstration Year 2 – January 1, 2020-December 31,2020
 DY2 Quarter 2 – April 1, 2020- June 30, 2020
 Submitted on [08/31/2020]

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic. <input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics		Annual-01/01/2020-12/31/2020	Number of overdose deaths during the measurement period among Medicaid beneficiaries living in a geographic area covered by the demonstration. States are encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid).
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics		Annual-01/01/2020-12/31/2020	Rate of overdose deaths during the measurement period among adult Medicaid beneficiaries living in a geographic area covered by the demonstration. States are encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid).
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			
<input type="checkbox"/> The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics		Annual-01/01/2020-12/31/2020	The percentage of Medicaid beneficiaries with SUD who had an ambulatory or preventive care visit during the measurement period.
<input checked="" type="checkbox"/> The state has no trends to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
9.2.2 Implementation Update			
<input type="checkbox"/> The state expects to make other program changes that may affect metrics related to other SUD-related metrics			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
10.2 Budget Neutrality			
10.2.1 Current status and analysis			
<input checked="" type="checkbox"/> If the SUD component is part of a broader demonstration, the state should provide an analysis of the SUD-related budget neutrality and an analysis of budget neutrality as a whole. Describe the current status of budget neutrality and an analysis of the budget neutrality to date.	<p>The expenditures of substance use disorder (SUD) are included in the historical program data that was used to develop the overall budget neutrality. The quarterly waiver budget monitoring continues to show that all Medicaid eligibility groups (MEG) remain in compliance with the budget neutrality conditions. The substance use disorder/institution for mental diseases (SUD/IMD), a subset, is subject to a hypothetical test for budget neutrality monitoring. As described in the STCs, this includes comparing the actual capitation PMPMs for SUD/IMD members to the expenditure caps defined for each demonstration year (DY). The SUD/IMD budget neutrality monitoring continues to show that SUD/IMD remains in compliance with the budget neutrality requirement.</p>	QTR 2-04/1/2020 – 06/30/2020	STC 100 - Hypothetical Test 3 for SUD/IMD
10.2.2 Implementation Update			
<input type="checkbox"/> The state expects to make other program changes that may affect budget neutrality			
<input type="checkbox"/> The state has no implementation update to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
11.1 SUD-Related Demonstration Operations and Policy			
11.1.1 Considerations			
<input type="checkbox"/> States should highlight significant SUD (or if broader demonstration, then SUD-related) demonstration operations or policy considerations that could positively or negatively affect beneficiary enrollment, access to services, timely provision of services, budget neutrality, or any other provision that has potential for beneficiary impacts. Also note any activity that may 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.			
<input checked="" type="checkbox"/> The state has no related considerations to report for this reporting topic.			
11.1.2 Implementation Update			
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) How the delivery system operates under the demonstration (e.g. through the managed care system or fee for service) <input type="checkbox"/> ii) Delivery models affecting demonstration participants (e.g. Accountable Care Organizations, Patient Centered Medical Homes) <input type="checkbox"/> iii) Partners involved in service delivery 			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input type="checkbox"/> The state experienced challenges in partnering with entities contracted to help implement the demonstration (e.g., health plans, credentialing vendors, private sector providers) and/or noted any performance issues with contracted entities			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The state is working on other initiatives related to SUD or OUD			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
<input type="checkbox"/> The initiatives described above are related to the SUD or OUD demonstration (States should note similarities and differences from the SUD demonstration)			
<input checked="" type="checkbox"/> The state has no implementation update to report for this reporting topic.			
12. SUD Demonstration Evaluation Update			
12.1. Narrative Information			
<input checked="" type="checkbox"/> Provide updates on SUD evaluation work and timeline. The appropriate content will depend on when this report is due to CMS and the timing for the demonstration. See report template instructions for more details.	New Mexico’s implementation plan has been approved by CMS. New Mexico is in the process of procuring an Independent evaluator to complete the evaluation work requirements and is on track with the current timeline.	04/01/2020-06/30/2020	
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
<input checked="" type="checkbox"/> Provide status updates on deliverables related to the demonstration evaluation and indicate whether the expected timelines are being met and/or if there are any real or anticipated barriers in achieving the goals and timeframes agreed to in the STCs.	New Mexico’s, implementation plan was approved by CMS and is on track on all evaluation deliverables timelines with no barriers in achieving the goals agreed in the STC.	01/01/2020-12/31/2020	
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			
<input type="checkbox"/> List anticipated evaluation-related deliverables related to this demonstration and their due dates.			
<input type="checkbox"/> The state has no SUD demonstration evaluation update to report for this reporting topic.			
13.1 Other Demonstration Reporting			
13.1.1 General Reporting Requirements			
<input type="checkbox"/> The state reports changes in its implementation of the demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol			
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.			
<input type="checkbox"/> The state anticipates the need to make future changes to the STCs, implementation plan, or monitoring protocol, based on expected or upcoming implementation changes			
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
Compared to the demonstration design and operational details, the state expects to make the following changes to: <ul style="list-style-type: none"> <input type="checkbox"/> i) The schedule for completing and submitting monitoring reports <input type="checkbox"/> ii) The content or completeness of submitted reports and/or future reports 			
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.			
<input type="checkbox"/> The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation			
<input checked="" type="checkbox"/> The state has no updates on general requirements to report for this reporting topic.			
13.1.2 Post-Award Public Forum			
<input type="checkbox"/> If applicable within the timing of the demonstration, provide a summary of the annual post-award public forum held pursuant to 42 CFR § 431.420(c) indicating any resulting action items or issues. A summary of the post-award public forum must be included here for the period during which the forum was held and in the annual report.			
<input checked="" type="checkbox"/> No post-award public forum was held during this reporting period and this is not an annual report, so the state has no post-award public forum update to report for this topic.			

Prompt	State response	Measurement period first reported (MM/DD/YYYY - MM/DD/YYYY)	Related metric (if any)
14.1 Notable State Achievements and/or Innovations			
14.1 Narrative Information			
<input checked="" type="checkbox"/> Provide any relevant summary of achievements and/or innovations in demonstration enrollment, benefits, operations, and policies pursuant to the hypotheses of the SUD (or if broader demonstration, then SUD related) demonstration or that served to provide better care for individuals, better health for populations, and/or reduce per capita cost. Achievements should focus on significant impacts to beneficiary outcomes. Whenever possible, the summary should describe the achievement or innovation in quantifiable terms, e.g., number of impacted beneficiaries.	<p>New Mexico's continuum of SUD services and its implementation plan also includes and will be monitored for continued achievements in:</p> <ul style="list-style-type: none"> - Treatment of co-occurring mental health conditions with a primary diagnosis of SUD; - A focus on the integration of SUD screening in physical health provider locations; - The introduction of behavioral health counselors in primary care agencies, and primary care practitioners in behavioral health agencies; and - Interdisciplinary teaming with the Medicaid beneficiary and his/her natural supports to treat not only the person with the SUD, but also the family or natural support system. 	04/01/2020-06/30/2020	
<input type="checkbox"/> The state has no notable achievements or innovations to report for this reporting topic.			

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

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