

Medicaid Section 1115 SUD Demonstration Report - Metrics reporting

State [Enter State Name]  
 Demonstration Name [Enter Demonstration Name]  
 Demonstration Year (DY) [Enter Demonstration Year] (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for DY [Enter Calendar Dates for Demonstration Year] (Format: MM/DD/YYYY - MM/DD/YYYY)  
 Reporting Period Q4  
 Calendar Dates for Reporting Period 10/01/2020-12/31/2020  
 Submitted on 4.16.2021

**Substance Use Disorder (SUD) Metrics<sup>a</sup>**

#	Metric name	Metric description	Milestone or reporting topic	Reporting category	Metric type	Data source	Technical specification manual version	Attest that reporting matches CMS-provided specification (Y/N)
1	Assessed for SUD Treatment Needs Using a Standardized Screening Tool	Number of beneficiaries screened for SUD treatment needs using a standardized screening tool during the measurement period	Assessment of need and qualification for SUD treatment services	Other monthly and quarterly metric	CMS-constructed	Medical record review or claims		
2	Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis	Number of beneficiaries with a SUD diagnosis and a SUD-related service during the measurement period but not in the three months before the measurement period	Assessment of need and qualification for SUD treatment services	Other monthly and quarterly metric	CMS-constructed	Claims		
3	Medicaid Beneficiaries with SUD Diagnosis (monthly)	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	Assessment of need and qualification for SUD treatment services	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y
4	Medicaid Beneficiaries with SUD Diagnosis (annually)	Number of beneficiaries with a SUD diagnosis and a SUD-related service during the measurement period and/or in the 12 months before the measurement period	Assessment of need and qualification for SUD treatment services	Other annual metric	CMS-constructed	Claims	Version 2	Y
5	Medicaid Beneficiaries Treated in an IMD for SUD	Number of beneficiaries with a claim for residential or inpatient treatment for SUD in IMDs during the measurement period	Assessment of need and qualification for SUD treatment services	Other annual metric	CMS-constructed	Claims	Version 2	Y
6	Any SUD Treatment	Number of beneficiaries enrolled in the measurement period receiving any SUD treatment service, facility claim, or pharmacy claim during the measurement period	Milestone 1	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y

Medicaid Section 1115 SUD Demonstration Report - Metrics reporting  
 State [Enter State Name]  
 Demonstration Name [Enter Demonstration Name]  
 Demonstration Year (DY) [Enter Demonstration Year] (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for DY [Enter Calendar Dates for Demonstration Year] (Format: MM/DD/YYYY - MM/DD/YYYY)  
 Reporting Period Q4  
 Calendar Dates for Reporting Period 10/01/2020-12/31/2020  
 Submitted on 4.16.2021

**Substance Use Disorder (SUD) Metrics<sup>a</sup>**

#	Metric name	Metric description	Milestone or reporting topic	Reporting category	Metric type	Data source	Technical specification manual version	Attest that reporting matches CMS-provided specification (Y/N)
7	Early Intervention	Number of beneficiaries who used early intervention services (such as procedure codes associated with SBIRT) during the measurement period	Milestone 1	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y
8	Outpatient Services	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	Milestone 1	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y
9	Intensive Outpatient and Partial Hospitalization Services	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	Milestone 1	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y
10	Residential and Inpatient Services	Number of beneficiaries who use residential and/or inpatient services for SUD during the measurement period	Milestone 1	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y
11	Withdrawal Management	Number of beneficiaries who use withdrawal management services (such as outpatient, inpatient, or residential) during the measurement period	Milestone 1	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y
12	Medication Assisted Treatment (MAT)	Number of beneficiaries who have a claim for MAT for SUD during the measurement period	Milestone 1	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y
36	Average Length of Stay in IMDs	The average length of stay for beneficiaries discharged from IMD inpatient or residential treatment for SUD	Milestone 1	Other annual metric	CMS-constructed	Claims; State-specific IMD database	Version 2	Y
13	SUD Provider Availability	The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period	Milestone 4	Other annual metric	CMS-constructed	Provider enrollment database; Claims	Version 2	Y
14	SUD Provider Availability - MAT	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	Milestone 4	Other annual metric	CMS-constructed	Provider enrollment database, SAMHSA datasets	Version 2	Y
15	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)  [NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure]	<p>Percentage of beneficiaries with a new episode of alcohol or other drug (AOD) AOD abuse or dependence who received the following:</p> <ul style="list-style-type: none"> <li>• 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</li> <li>• Engagement of AOD Treatment—percentage of beneficiaries who initiated treatment and who had two or more additional AOD services or MAT within 34 days of the initiation visit</li> </ul> <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>	Milestone 5	Annual metric that is an established quality measure	Established quality measure			
		• Initiation of AOD Treatment - Alcohol abuse or dependence				Claims	Version 2	Y
		• Initiation of AOD Treatment - Opioid abuse or dependence				Claims	Version 2	Y
		• Initiation of AOD Treatment - Other drug abuse or dependence				Claims	Version 2	Y
		• Initiation of AOD Treatment - Total AOD abuse of dependence				Claims	Version 2	Y
		• Engagement of AOD Treatment - Alcohol abuse or dependence				Claims	Version 2	Y
		• Engagement of AOD Treatment - Opioid abuse or dependence				Claims	Version 2	Y
		• Engagement of AOD Treatment - Other drug abuse or dependence				Claims	Version 2	Y
		• Engagement of AOD Treatment - Total AOD abuse of dependence				Claims	Version 2	Y

Medicaid Section 1115 SUD Demonstration Report - Metrics reporting  
 State [Enter State Name]  
 Demonstration Name [Enter Demonstration Name]  
 Demonstration Year (DY) [Enter Demonstration Year] (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for DY [Enter Calendar Dates for Demonstration Year] (Format: MM/DD/YYYY - MM/DD/YYYY)  
 Reporting Period Q4  
 Calendar Dates for Reporting Period 10/01/2020-12/31/2020  
 Submitted on 4.16.2021

**Substance Use Disorder (SUD) Metrics<sup>a</sup>**

#	Metric name	Metric description	Milestone or reporting topic	Reporting category	Metric type	Data source	Technical specification manual version	Attest that reporting matches CMS-provided specification (Y/N)
18	Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD) [PQA, NQF #2940; Medicaid Adult Core Set]	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.	Milestone 5	Annual metric that is an established quality measure	Established quality measure	Claims	Version 2	Y
19	Use of Opioids from Multiple Providers in Persons Without Cancer [PQA; NQF #2950]	The percentage of individuals ≥18 years of age who received prescriptions for opioids from ≥4 prescribers AND ≥4 pharmacies within ≤180 days.	Milestone 5	Annual metric that is an established quality measure	Established quality measure	Claims		
20	Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer [PQA, NQF #2951]	The percentage of individuals ≥18 years of age who received prescriptions for opioids with an average daily dosage of ≥90 morphine milligram equivalents (MME) AND who received prescriptions for opioids from ≥4 prescribers AND ≥4 pharmacies.	Milestone 5	Annual metric that is an established quality measure	Established quality measure	Claims		
21	Concurrent Use of Opioids and Benzodiazepines (COB-AD) [PQA]	Percentage of beneficiaries age 18 and older with concurrent use of prescription opioids and benzodiazepines. Patients with a cancer diagnosis or in hospice are excluded.	Milestone 5	Annual metric that is an established quality measure	Established quality measure	Claims	Version 2	Y
22	Continuity of Pharmacotherapy for Opioid Use Disorder [USC; NQF #3175]	Percentage of adults in the denominator with pharmacotherapy for OUD who have at least 180 days of continuous treatment	Milestone 5	Annual metric that is an established quality measure	Established quality measure	Claims	Version 2	Y
16	SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge, SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge [Joint Commission; NQF #1664]	<b>SUB-3:</b> Patients who are identified with alcohol or drug use disorder who receive or refuse at discharge a prescription for FDA-approved medications for alcohol or drug use disorder, OR who receive or refuse a referral for addictions treatment.  <b>SUB-3a:</b> Patients who are identified with alcohol or drug disorder who receive a prescription for FDA-approved medications for alcohol or drug use disorder OR a referral for addictions treatment.	Milestone 6	Annual metric that is an established quality measure	Established quality measure	Medical record review or claims		
17(1)	Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD) [NCCA; NQF #2605; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>14</sup>	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:  <ul style="list-style-type: none"> <li>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).</li> <li>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).</li> </ul>	Milestone 6	Annual metric that is an established quality measure	Established quality measure	Claims	Version 2	Y
17(2)	Follow-up after Emergency Department Visit for Mental Illness (FUM-AD) [NCCA; NQF #2605; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>14</sup>	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:  <ul style="list-style-type: none"> <li>Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).</li> <li>Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit (31 total days).</li> </ul>	Milestone 6	Annual metric that is an established quality measure	Established quality measure	Claims	Version 2	Y
Q1	Insert selected metric(s) related to key health IT question 1		Health IT		State-identified			
Q2	Insert selected metric(s) related to key health IT question 2		Health IT		State-identified			
Q3	Insert selected metric(s) related to key health IT question 3		Health IT		State-identified			
23	Emergency Department Utilization for SUD per 1,000 Medicaid	Total number of ED visits for SUD per 1,000 beneficiaries in the measurement period	Other SUD-related metrics	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y

Medicaid Section 1115 SUD Demonstration Report - Metrics reporting

State [Enter State Name]  
 Demonstration Name [Enter Demonstration Name]  
 Demonstration Year (DY) [Enter Demonstration Year] (Format: DY1, DY2, DY3, etc.)  
 Calendar Dates for DY [Enter Calendar Dates for Demonstration Year] (Format: MM/DD/YYYY - MM/DD/YYYY)  
 Reporting Period Q4  
 Calendar Dates for Reporting Period 10/01/2020-12/31/2020  
 Submitted on 4.16.2021

**Substance Use Disorder (SUD) Metrics<sup>a</sup>**

#	Metric name	Metric description (Measurement period)	Milestone or reporting topic	Reporting category (Quarterly/Annual)	Metric type	Data source	Technical specification manual version	Attest that reporting matches CMS-provided specification (Y/N)
	Beneficiaries					Claims	Version 2	Y
24	Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries	Total number of inpatient stays per 1,000 beneficiaries in the measurement period	Other SUD-related metrics	Other monthly and quarterly metric	CMS-constructed	Claims	Version 2	Y
25	Readmissions Among Beneficiaries with SUD	The rate of all-cause readmissions during the measurement period among beneficiaries with SUD.	Other SUD-related metrics	Other annual metric	CMS-constructed	Claims	Version 2	Y
26	Overdose Deaths (count)	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).	Other SUD-related metrics	Other annual metric	CMS-constructed	State data on cause of death	Version 2	Y
27	Overdose Deaths (rate)	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).	Other SUD-related metrics	Other annual metric	CMS-constructed	State data on cause of death	Version 2	Y
28	SUD Spending	Total Medicaid SUD spending during the measurement period.	Other SUD-related metrics	Other annual metric	CMS-constructed	Claims		
29	SUD Spending within IMDs	Total Medicaid SUD spending on residential or inpatient treatment within IMDs during the measurement period	Other SUD-related metrics	Other annual metric	CMS-constructed	Claims		
30	Per Capita SUD Spending	Per capita SUD spending during the measurement period	Other SUD-related metrics	Other annual metric	CMS-constructed	Claims		
31	Per Capita SUD Spending within IMDs	Per capita SUD spending within IMDs during the measurement period	Other SUD-related metrics	Other annual metric	CMS-constructed	Claims		
32	Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD (AAP) [Adjusted HEDIS measure] <sup>1</sup>	The percentage of Medicaid beneficiaries with SUD who had an ambulatory or preventive care visit during the measurement period.	Other SUD-related metrics	Annual metric that is an established quality measure	Established quality measure	Claims	version 2	Y
33	Grievances Related to SUD Treatment Services	Number of grievances filed during the measurement period that are related to SUD treatment services	Other SUD-related metrics	Grievances and appeals	CMS-constructed	Administrative records		
34	Appeals Related to SUD Treatment Services	Number of appeals filed during the measurement period that are related to SUD treatment services	Other SUD-related metrics	Grievances and appeals	CMS-constructed	Administrative records		
35	Critical Incidents Related to SUD Treatment Services	Number of critical incidents filed during the measurement period that are related to SUD treatment services	Other SUD-related metrics	Grievances and appeals	CMS-constructed	Administrative records		

Add rows for any additional state-identified metrics

**Subs**

#	Describe any deviations from CMS-provided specifications	Reporting issue (Y/N) (further describe in data and reporting issues tab)	Measurement period (month, quarter, year <sup>b</sup> )	Dates covered by measurement period (MM/DD/YYYY-	Demonstration denominator	Demonstration numerator or count	Demonstration rate/percentage <sup>c</sup>	Model denominator <sup>d</sup>	Model numerator or count <sup>d</sup>	Model rate/percentage <sup>c,d</sup>	OID subpopulation denominator
1			Month 1 Month 2 Month 3								
2			Month 1 Month 2 Month 3								
3		N	Month 1 Month 2 Month 3	10/1/2020 - 10/31/2020 11/1/2020 - 11/30/2020 12/1/2020 - 12/31/2020		21,513 20,822 20,843					
4		N	Year								
5		N	Year								
6		N	Month 1 Month 2 Month 3	10/1/2020 - 10/31/2020 11/1/2020 - 11/30/2020 12/1/2020 - 12/31/2020		21,418 20,737 20,757					

Subs

#	Describe any deviations from CMS-provided specifications	Reporting issue (Y/N) (further describe in data and reporting issues tab)	Measurement period (month, quarter, year <sup>b</sup> )	Dates covered by measurement period (MM/DD/YYYY-)	Demonstration denominator	Demonstration numerator or count	Demonstration rate/percentage <sup>c</sup>	Model denominator <sup>d</sup>	Model numerator or count <sup>d</sup>	Model rate/percentage <sup>c,d</sup>	OID subpopulation denominator
7		N	Month 1	10/1/2020 - 10/31/2020		861					
			Month 2	11/1/2020 - 11/30/2020		615					
			Month 3	12/1/2020 - 12/31/2020		597					
8		N	Month 1	10/1/2020 - 10/31/2020		10,337					
			Month 2	11/1/2020 - 11/30/2020		9,987					
			Month 3	12/1/2020 - 12/31/2020		9,929					
9		N	Month 1	10/1/2020 - 10/31/2020		734					
			Month 2	11/1/2020 - 11/30/2020		768					
			Month 3	12/1/2020 - 12/31/2020		794					
10		N	Month 1	10/1/2020 - 10/31/2020		250					
			Month 2	11/1/2020 - 11/30/2020		217					
			Month 3	12/1/2020 - 12/31/2020		211					
11		N	Month 1	10/1/2020 - 10/31/2020		57					
			Month 2	11/1/2020 - 11/30/2020		44					
			Month 3	12/1/2020 - 12/31/2020		37					
12		N	Month 1	10/1/2020 - 10/31/2020		10,779					
			Month 2	11/1/2020 - 11/30/2020		10,710					
			Month 3	12/1/2020 - 12/31/2020		10,847					
36		N	Year						#DIV/0!		
13		N	Year								
14		N	Year								
15		N	Year								
		N	Year								
		N	Year								
		N	Year								
		N	Year								
		N	Year								
		N	Year								
		N	Year								

Subs

#	Describe any deviations from CMS-provided specifications	Reporting issue (Y/N) (further describe in data and reporting issues tab)	Measurement period (month, quarter, year <sup>b</sup> )	Dates covered by measurement period (MM/DD/YYYY-)	Demonstration denominator	Demonstration numerator or count	Demonstration rate/percentage <sup>c</sup>	Model denominator <sup>d</sup>	Model numerator or count <sup>d</sup>	Model rate/percentage <sup>c,d</sup>	OID subpopulation denominator
18		N	Year				#DIV/0!			#DIV/0!	
19			Year				#DIV/0!			#DIV/0!	
20			Year				#DIV/0!			#DIV/0!	
21		N	Year				#DIV/0!			#DIV/0!	
22		N	Year				#DIV/0!			#DIV/0!	
16			Year				#DIV/0!			#DIV/0!	
			Year				#DIV/0!			#DIV/0!	
17(1)											
		N	Year				#DIV/0!			#DIV/0!	
		N	Year				#DIV/0!			#DIV/0!	
17(2)											
		N	Year				#DIV/0!			#DIV/0!	
		N	Year				#DIV/0!			#DIV/0!	
Q1											
Q2											
Q3											
23			Month 1	10/1/2020 - 10/31/2020	737,672	4,033	5.47			#DIV/0!	
			Month 2	11/1/2020 - 11/30/2020	744,742	3,528	4.74			#DIV/0!	

**Subs**

#	Describe any deviations from CMS-provided specifications	Reporting issue (Y/N) (further describe in data and reporting issues tab)	Measurement period (month, quarter, year <sup>b</sup> )	Dates covered by measurement period (MM/DD/YYYY-)	Demonstration denominator	Demonstration numerator or count	Demonstration rate/percentage <sup>c</sup>	Model denominator <sup>d</sup>	Model numerator or count <sup>d</sup>	Model rate/percentage <sup>c,d</sup>	OID subpopulation denominator
24		N	Month 3	12/1/2020 - 12/31/2020	751,973	3,469	4.61			#DIV/0!	
			Month 1	10/1/2020 - 10/31/2020	737,672	1,885	2.56			#DIV/0!	
			Month 2	11/1/2020 - 11/30/2020	744,742	1,610	2.16			#DIV/0!	
		N	Month 3	12/1/2020 - 12/31/2020	751,973	1,677	2.23			#DIV/0!	
25		N	Year				#DIV/0!			#DIV/0!	
26		N	Year								
27		N	Year				#DIV/0!			#DIV/0!	
28			Year								
29			Year								
30			Year				#DIV/0!			#DIV/0!	
31			Year				#DIV/0!			#DIV/0!	
32											
33		N	Year				#DIV/0!			#DIV/0!	
34			Quarter								
35			Quarter								
35			Quarter								

Add ro



**Subs**

#	OAD subpopulation numerator or	OAD subpopulation rate/percentage <sup>c</sup>	Age < 18 denominator	Age < 18 numerator or count	Age <18 rate/percentage <sup>c</sup>	Age 18-64 denominator	Age 18-64 numerator or count	Age 18-64 rate/percentage <sup>c</sup>	Age 65+ denominator	Age 65+ numerator or count	Age 65+ rate/percentage <sup>c</sup>	Dual eligible (Medicare-Medicaid eligible)	Dual eligible (Medicare-Medicaid eligible) numerator or
1													
2													
3				547			20,553			413			1,200
				536			19,896			390			1,099
				496			19,962			385			1,055
4													
5													
6			546			20,489			383				1,152
			536			19,840			361				1,057
			496			19,909			352				1,013

Subs

#	OID subpopulation numerator or denominator	OID subpopulation rate/percentage <sup>c</sup>	Age < 18 denominator	Age <18 numerator or count	Age <18 rate/percentage <sup>c</sup>	Age 18-64 denominator	Age 18-64 numerator or count	Age 18-64 rate/percentage <sup>c</sup>	Age 65+ denominator	Age 65+ numerator or count	Age 65+ rate/percentage <sup>c</sup>	Dual eligible (Medicare-Medicaid eligible)	Dual eligible (Medicare-Medicaid eligible) numerator or denominator
7	132			27			785			49			85
	117			26			555			34			56
	106			19			548			30			51
8	4,665			295			9,900			142			520
	4,569			290			9,556			141			467
	4,482			276			9,538			115			435
	217			18			715			1			9
9	200			17			750			1			12
	215			23			770			1			10
10				2			241			7			14
				1			210			6			11
				2			203			6			7
11				0			57			0			2
				0			44			0			0
				0			37			0			0
12				31			10,675			73			243
				34			10,604			72			243
				32			10,740			75			235

36 #DIV/0!

13

14

15

Subs

#	OID subpopulation numerator or	OID subpopulation rate/percentage <sup>c</sup>	Age < 18 denominator	Age < 18 numerator or count	Age <18 rate/percentage <sup>c</sup>	Age 18-64 denominator	Age 18-64 numerator or count	Age 18-64 rate/percentage <sup>c</sup>	Age 65+ denominator	Age 65+ numerator or count	Age 65+ rate/percentage <sup>c</sup>	Dual eligible (Medicare-Medicaid eligible)	Dual eligible (Medicare-Medicaid eligible) numerator or
18													
19													
20													
21													
22													
16													
17(1)													
17(2)													
Q1													
Q2													
Q3													
23	#DIV/0! #DIV/0!		302,895 303,872	105 95	0.35 0.31	408,631 414,423	<u>3,849</u> <u>3,371</u>	9.42 8.13	26,146 26,447	79 62	3.02 2.34		

**Subs**

#	OID subpopulation numerator or denominator	OID subpopulation rate/percentage <sup>c</sup>	Age < 18 denominator	Age < 18 numerator or count	Age <18 rate/percentage <sup>c</sup>	Age 18-64 denominator	Age 18-64 numerator or count	Age 18-64 rate/percentage <sup>c</sup>	Age 65+ denominator	Age 65+ numerator or count	Age 65+ rate/percentage <sup>c</sup>	Dual eligible (Medicare-Medicaid eligible)	Dual eligible (Medicare-Medicaid eligible) numerator or denominator
		#DIV/0!	304,986	85	0.28	420,413	3,316	7.89	26,574	68	2.56		
24		#DIV/0!	302,895	87	0.29	408,631	1,638	4.01	26,146	160	6.12		
		#DIV/0!	303,872	75	0.25	414,423	1,403	3.39	26,447	132	4.99		
		#DIV/0!	304,986	79	0.26	420,413	1,459	3.47	26,574	139	5.23		
25													
26													
27													
		#DIV/0!			#DIV/0!			#DIV/0!			#DIV/0!		
28													
29													
30													
31													
32													
33													
34													
35													

Address

**Subs**

#	Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>c</sup>	Medicaid only denominator	Medicaid only numerator or count	Medicaid only rate/percentage <sup>c</sup>	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage <sup>c</sup>	Not pregnant denominator	Not pregnant numerator or count	Not pregnant rate/percentage <sup>c</sup>	Criminally involved denominator	Criminally involved numerator or count	Criminally involved rate/percentage <sup>c</sup>
1													
2													
3			20,313 19,723 19,788			386 387 395			21,127 20,435 20,448			96 81 97	
4													
5													
6			20,266 19,680 19,744			384 385 394			21,034 20,352 20,363			96 81 97	

**Subs**

#	Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>c</sup>	Medicaid only denominator	Medicaid only numerator or count	Medicaid only rate/percentage <sup>c</sup>	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage <sup>c</sup>	Not pregnant denominator	Not pregnant numerator or count	Not pregnant rate/percentage <sup>c</sup>	Criminally involved denominator	Criminally involved numerator or count	Criminally involved rate/percentage <sup>c</sup>
7			776			16			845			2	
			559			10			605			2	
			546			13			584			1	
8			9,817			223			10,114			53	
			9,520			199			9,788			42	
			9,494			208			9,721			43	
9			725			11			723			3	
			756			15			753			9	
			784			7			787			8	
10			236			2			248			1	
			206			1			216			1	
			204			1			210			0	
11			55			1			57			0	
			44			0			44			0	
			37			0			37			0	
12			10,536			180			10,599			45	
			10,467			162			10,548			35	
			10,612			178			10,669			45	
36													
13													
14													
15													

**Subs**

#	Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>c</sup>	Medicaid only denominator	Medicaid only numerator or count	Medicaid only rate/percentage <sup>c</sup>	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage <sup>c</sup>	Not pregnant denominator	Not pregnant numerator or count	Not pregnant rate/percentage <sup>c</sup>	Criminally involved denominator	Criminally involved numerator or count	Criminally involved rate/percentage <sup>c</sup>
18													
19													
20													
21													
22													
16													
17(1)													
17(2)													

Q1  
Q2  
Q3

23

**Subs**

#	Dual eligible (Medicare-Medicaid eligible) rate/percentage <sup>c</sup>	Medicaid only denominator	Medicaid only numerator or count	Medicaid only rate/percentage <sup>c</sup>	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage <sup>c</sup>	Not pregnant denominator	Not pregnant numerator or count	Not pregnant rate/percentage <sup>c</sup>	Criminally involved denominator	Criminally involved numerator or count	Criminally involved rate/percentage <sup>c</sup>
24													
25													
26													
27													
28													
29													
30													
31													
32													
33													
34													
35													
<i>Add ro</i>													



**Subs**

#	Not criminally involved denominator	Not criminally involved numerator or	Not criminally involved rate/percentage <sup>c</sup>	New model denominator <sup>a</sup>	New model numerator or count <sup>a</sup>	New model rate/percentage <sup>c,a</sup>
1						
2						
3		21,417 20,741 20,746				
4						
5						
6	21,322 20,656 20,660					

**Subs**

#	Not criminally involved denominator	Not criminally involved numerator or	Not criminally involved rate/percentage <sup>c</sup>	New model denominator <sup>a</sup>	New model numerator or count <sup>a</sup>	New model rate/percentage <sup>c,a</sup>
7		859				
		613				
		596				
8		10284				
		9945				
		9886				
9		731				
		759				
		786				
10		249				
		216				
		211				
11		57				
		44				
		37				
12		10,734				
		10,675				
		10,802				
36						
13						
14						
15						

**Subs**

#	Not criminally involved denominator	Not criminally involved numerator or	Not criminally involved rate/percentage <sup>c</sup>	New model denominator <sup>a</sup>	New model numerator or count <sup>a</sup>	New model rate/percentage <sup>c,a</sup>
18	[REDACTED]					#DIV/0!
19						#DIV/0!
20						#DIV/0!
21						#DIV/0!
22						#DIV/0!
16						#DIV/0!
						#DIV/0!
17(1)						#DIV/0!
						#DIV/0!
17(2)						
Q1						
Q2						
Q3						
23						#DIV/0! #DIV/0!

**Subs**

#	Not criminally involved denominator	Not criminally involved numerator or	Not criminally involved rate/percentage <sup>c</sup>	New model denominator <sup>a</sup>	New model numerator or count <sup>a</sup>	New model rate/percentage <sup>c,a</sup>
24						#DIV/0! #DIV/0! #DIV/0! #DIV/0!
25						
26						
27						
28						#DIV/0!
29						
30						#DIV/0!
31						#DIV/0!
32						
33						#DIV/0!
34						
35						
<i>Add ro</i>						