
**Medicaid Section 1115 Substance Use Disorder Demonstrations
Monitoring Report Template**

Note: PRA Disclosure Statement to be added here

1. Title page for the state's substance use disorder (SUD) demonstration or the SUD component of the broader demonstration

The title page is a brief form that the state completed as part of its monitoring protocol. The title page will be populated with the information from the state's approved monitoring protocol. The state should complete the remaining two rows. Definitions for certain rows are below the table.

| | |
|---|--|
| State | Kentucky |
| Demonstration name | KY HEALTH |
| Approval period for section 1115 demonstration | <p>Automatically populated with the current approval period for the section 1115 demonstration as listed in the current special terms and conditions (STC), including the start date and end date (MM/DD/YYYY – MM/DD/YYYY).</p> <p>Start Date: 01/12/2018 End Date: 09/30/2023</p> |
| SUD demonstration start date^a | <p>Automatically populated with the start date for the section 1115 SUD demonstration or SUD component if part of a broader demonstration (MM/DD/YYYY).</p> <p>01/12/2018</p> |
| Implementation date of SUD demonstration, if different from SUD demonstration start date^b | <p>Automatically populated with the SUD demonstration implementation date (MM/DD/YYYY).</p> <p>07/01/2019</p> |
| SUD (or if broader demonstration, then SUD - related) demonstration goals and objectives | <p>Automatically populated with the summary of the SUD (or if broader demonstration, then SUD- related) demonstration goals and objectives.</p> <p>Effective upon CMS approval of the SUD Implementation Protocol, as described in STC</p> |
| SUD demonstration year and quarter | <p>Enter the SUD demonstration year and quarter associated with this monitoring report (e.g., SUD DY1Q3 monitoring report). This should align with the reporting schedule in the state's approved monitoring protocol.</p> <p>SUD DY 4 Q 4</p> |
| Reporting period | <p>Enter calendar dates for the current reporting period (i.e., for the quarter or year) (MM/DD/YYYY – MM/DD/YYYY). This should align with the reporting schedule in the state's approved monitoring protocol.</p> <p>Start Date: 01/01/2023 End Date: 03/31/2023</p> |

^a **SUD demonstration start date:** For monitoring purposes, CMS defines the start date of the demonstration as the *effective date* listed in the state's STCs at time of SUD demonstration approval. For example, if the state's STCs at the time of SUD demonstration approval note that the SUD demonstration is effective January 1, 2020 – December 31, 2025, the state should consider January 1, 2020 to be the start date of the SUD demonstration. Note that the effective date is considered to be the first day the state may begin its SUD demonstration. In many cases, the effective date is distinct from the approval date of a demonstration; that is, in certain cases, CMS may approve a section 1115 demonstration with an effective date that is in the future. For example, CMS may approve an extension request on December 15, 2020, with an effective date of January 1, 2021 for the new demonstration period. In many cases, the effective date also differs from the date a state begins implementing its demonstration.

^b **Implementation date of SUD demonstration:** The date the state began claiming or will begin claiming federal financial participation for services provided to individuals in institutions for mental disease.

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 words or less.

Enter the executive summary text here.

KY Department for Medicaid Services (DMS) continued to issue DMS residential provisional certifications through DY4Q3. As of July 1, 2022 all SUD residential programs (ASAM Level 3.1 - 3.7) are required to obtain DMS Provisional Certification prior to enrolling program with DMS and expected to obtain ASAM Level of Care (LOC) Certification prior to the end of the provisional certification period. DMS continues to work with providers and Managed Care Organizations (MCOs) to ensure providers are aware of these expectations. The provider attestation process also allows the Department the opportunity to ensure services are provided in accordance with DMS regulations and provide feedback to the provider.

KY submitted a State Plan Amendment (SPA) request to CMS on 3/31/23 requesting approval to add additional Behavioral Health practitioner types to address workforce shortage and relative challenges; the SPA request includes practitioners specific to treating SUD.

During this reporting period, KY noted continuations in monitoring metrics and trends: KY continues to see increases in utilization of services for SUD, including beneficiaries with SUD diagnosis receiving SUD treatment, specifically Medication Assisted Treatment (MAT) and decreases in ED and inpatient stays per 1,000 beneficiaries with SUD. KY continues to evaluate the demonstration, as well as impacts beyond implementation, such as the PHE, and its impact to the demonstration and outcomes. During this reporting period, KY submitted changes to the Draft Interim Assessment to CMS on 2/14/23.

DMS also continues to collaborate with statewide agencies to discuss SUD/OUD initiatives such as assessing quality of SUD treatment, overdose prevention and implementation of the Behavioral Health Conditional Dismissal Program.

During this reporting period, CMS announced approval of California's 1115 amendment regarding the reentry population. KY along with state partners have reviewed CA's Standard Terms and Conditions (STCs) and engaged with CMS regarding KY's pending incarceration amendment.

KY DMS continues to consider any potential impacts to the Demonstration population in discussions related to anticipated unwinding in 2023 to ensure all current beneficiaries have access to needed services. As noted in previous reporting, there are no prior authorizations (PAs) for outpatient behavioral health services, including SUD; PAs for residential and inpatient SUD services was reinstated 7/1/22.

3. Narrative information on implementation, by milestone and reporting topic

| Prompt | State has no trends/update to report (place an X) | Related metric(s) (if any) | State response |
|--|---|----------------------------|----------------|
| 1. Assessment of need and qualification for SUD services | | | |
| 1.1 Metric trends | | | |
| 1.1.1 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 | X | | |
| 1.2 Implementation update | | | |
| 1.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 1.2.1.a The target population(s) of the demonstration | | | |
| 1.2.1.b The clinical criteria (e.g., SUD diagnoses) that qualify a beneficiary for the demonstration | X | | |
| 1.2.2 The state expects to make other program changes that may affect metrics related to assessment of need and qualification for SUD services | X | | |

| Prompt | State has no trends/update to report (place an X) | Related metric(s) (if any) | State response |
|---|---|---|---|
| 2. Access to Critical Levels of Care for OUD and other SUDs (Milestone 1) | | | |
| 2.1 Metric trends | | | |
| 2.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 1 | | Metric 6-9, 11-12 | DY4Q1: Metric 6-9 and 12 continue to experience quarterly increases during this reporting period indicating |
| 2.2 Implementation update | | | |
| 2.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 2.2.1.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) | | KY met with Ohio Medicaid regarding reimbursement for withdrawal management (WDM) and medications in Opioid Treatment Programs (OTPs). Currently KY only reimburses for WDM as a stand alone service at ASAM Level 4.0; KY is researching other states reimbursing WDM as a separate billable service at all levels in consideration of adding additional procedure codes to better identify utilization of WDM services within the current foundation of KY's State Plan and BH regulations. KY is also researching other states reimbursement for OTP services. The state currently | |
| 2.2.1.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 individual IMDs | | X | |
| 2.2.2 The state expects to make other program changes that may affect metrics related to Milestone 1 | | X | |

| Prompt | State has no trends/update to report (place an X) | Related metric(s) (if any) | State response |
|--|---|----------------------------|----------------|
| 3. Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2) | | | |
| 3.1 Metric trends | | | |
| 3.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 2 | X | | |
| 3.2. Implementation update | | | |
| 3.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: | | | |
| 3.2.1.a Planned activities to improve providers' use of evidence-based, SUD-specific placement criteria | X | | |
| 3.2.1.b 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 | | X | |
| 3.2.2 The state expects to make other program changes that may affect metrics related to Milestone 2 | X | | |

| Prompt | State has no trends/update to report (place an X) | Related metric(s) (if any) | State response |
|--|---|----------------------------|--|
| 4. Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3) | | | |
| 4.1 Metric trends | | | |
| 4.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 3 Note: There are no CMS-provided metrics related to Milestone 3. If the state did not identify any metrics for reporting this milestone, the state should indicate it has no update to report. | X | | |
| 4.2 Implementation update | | | |
| 4.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 4.2.1.a Implementation of residential treatment provider qualifications that meet the ASAM Criteria or other nationally recognized, SUD-specific program standards | X | | During this reporting period, KY DMS continued to issue SUD residential provisional certifications with 6 new H |
| 4.2.1.b Review process for residential treatment providers' compliance with qualifications | | | The continued desk audit process mentioned in 4.2.1.b includes a review of providers attestation related to providing MAT to ensure a. the provider offers MAT, and H |
| 4.2.1.c Availability of medication-assisted treatment at residential treatment facilities, either on-site or through facilitated access to services off site | X | | |
| 4.2.2 The state expects to make other program changes that may affect metrics related to Milestone 3 | | | |

| Prompt | State has no trends/update to report (place an X) | Related metric(s) (if any) | State response |
|--|---|----------------------------|----------------|
| 5. Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4) | | | |
| 5.1 Metric trends | | | |
| 5.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 4 | X | | |
| 5.2 Implementation update | | | |
| 5.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: Planned activities to assess the availability of providers enrolled in Medicaid and accepting new patients in across the continuum of SUD care | X | | |
| 5.2.2 The state expects to make other program changes that may affect metrics related to Milestone 4 | X | | |

| Prompt | State has no trends/update to report (place an X) | Related metric(s) | State response |
|---|---|-------------------|---|
| 6. Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5) | | | |
| 6.1 Metric trends | | | |
| 6.1.1 | The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 5 | Metric 23 | DY4Q1: Metric 23 experienced a 8.25% decrease in the average total number of ED visits for SUD per 1,000 + |
| 6.2 Implementation update | | | |
| 6.2.1 | Compared to the demonstration design and operational details, the state expects to make the following changes to: | | During this reporting period, DMS reviewed guidelines recommend for non-opioid therapy to treat pain like pregabalin and lidocaine patches. After reviewing diagnosis codes causing denials for pregabalin, DMS determined that the current prior authorization criteria + |
| 6.2.1.a | Implementation of opioid prescribing guidelines and other interventions related to prevention of OUD | | |
| 6.2.1.b | Expansion of coverage for and access to naloxone | | Over-the-counter naloxone was FDA-approved in March. + |
| 6.2.2 | The state expects to make other program changes that may affect metrics related to Milestone 5 | X | The availability of this new product is anticipated by late F |

| Prompt | State has no trends/update to report (place an X) | Related metric(s) (if any) | State response |
|--|---|----------------------------|----------------|
| 7. Improved Care Coordination and Transitions between Levels of Care (Milestone 6) | | | |
| 7.1 Metric trends | | | |
| 7.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to Milestone 6 | X | | |
| 7.2 Implementation update | | | |
| 7.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: Implementation of policies supporting beneficiaries' transition from residential and inpatient facilities to community-based services and supports | X | | |
| 7.2.2 The state expects to make other program changes that may affect metrics related to Milestone 6 | X | | |

| Prompt | State has no trends/update to report (place an X) | Related metric(s) (if any) | State response |
|---|---|----------------------------|--|
| 8. SUD health information technology (health IT) | | | |
| 8.1 Metric trends | | | |
| 8.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to its health IT metrics | X | | |
| 8.2 Implementation update | | | |
| 8.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: 8.2.1.a How health IT is being used to slow down the rate of growth of individuals identified with SUD | X | | |
| 8.2.1.b How health IT is being used to treat effectively individuals identified with SUD | X | | |
| 8.2.1.c How health IT is being used to effectively monitor “recovery” supports and services for individuals identified with SUD | | | DMS continues to participate in the Cabinet for Health and Family Services (CHFS) SUD Treatment Quality and Outcome Workgroup to review SUD treatment quality F |
| 8.2.1.d 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 | X | | |
| 8.2.1.e Other aspects of the state’s health IT implementation milestones | X | | |
| 8.2.1.f The timeline for achieving health IT implementation milestones | X | | |

| Prompt | State has no trends/update to report (place an X) | Related metric(s) (if any) | State response |
|---|---|----------------------------|--|
| 8.2.1.g Planned activities to increase use and functionality of the state's prescription drug monitoring program | | | During this reporting period, KASPER met timeline for Go LIVE of modernization project on February 25, 2023. The VACED Transition to modern system. |
| 8.2.2 The state expects to make other program changes that may affect metrics related to health IT | X | | |
| 9. Other SUD-related metrics | | | |
| 9.1 Metric trends | | | |
| 9.1.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics | | Metric 24 | DY4Q1: Metric 24, Total number of inpatient stays for SUD per 1,000 beneficiaries decreased by 2.04%. While |
| 9.2 Implementation update | | | |
| 9.2.1 The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to other SUD-related metrics | X | | |

4. Narrative information on other reporting topics

| Prompts | State has no update to report (place an X) | State response |
|--|--|---|
| 10. Budget neutrality | | |
| 10.1 Current status and analysis | | The reported member months for the waiver are as follows: DY1 = 1; DY2 = 74; DY3 (SUD DY1) = 14,604; DY4 (SUD DY2) = 32,228, DY5 (SUD DY3) = 41,475; DY6Q2 (SUD DY4Q1) = 28,328. Compared to previous DYs, DMS continues to project a decrease in member months for DY6 (SUD DY4); similarly, to with waiver spending. As noted in [+] |
| 10.2 Implementation update | | |
| 10.2.1 The state expects to make other program changes that may affect budget neutrality | X | |

| Prompts | State has no update to report (place an X) | State response |
|--|--|----------------|
| 11. SUD-related demonstration operations and policy | | |
| 11.1 Considerations | | |
| 11.1.1 The state 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 Monitoring Report Instructions for more detail. | X | |
| 11.2 Implementation update | | |
| 11.2.1 Compared to the demonstration design and operational details, the state expects to make the following changes to: | X | |
| 11.2.1.a How the delivery system operates under the demonstration (e.g., through the managed care system or fee for service) | | |
| 11.2.1.b Delivery models affecting demonstration participants (e.g., Accountable Care Organizations, Patient Centered Medical Homes) | X | |
| 11.2.1.c Partners involved in service delivery | X | |

Medicaid Section 1115 SUD Demonstrations Monitoring Report – Part B Version 4.0
[State name – Kentucky] [Demonstration name – KY HEALTH

| Prompts | State has no update to report (place an X) | State response |
|---|--|---|
| 11.2.2 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 | X | |
| 11.2.3 The state is working on other initiatives related to SUD or OUD | | As mentioned in 8.2.1.c, KY DMS continues to participate in the CHFS SUD Quality and Outcomes Workgroup. During this reporting period <input checked="" type="checkbox"/> |
| 11.2.4 The initiatives described above are related to the SUD or OUD demonstration (The state should note similarities and differences from the SUD demonstration) | X | |

| Prompts | State has no update to report (place an X) | State response |
|--|--|---|
| 12. SUD demonstration evaluation update | | |
| 12.1 Narrative information | | |
| | | |
| 12.1.1 Provide updates on SUD evaluation work and timeline. The appropriate content will depend on when this monitoring report is due to CMS and the timing for the demonstration. There are specific requirements per 42 Code of Federal Regulations (CFR) § 431.428a(10) for annual [monitoring] reports. See Monitoring Report Instructions for more details. | | An updated Draft Interim Assessment was completed and submitted to CMS on 2/14/23 reflecting changes and suggestions by CMS to an earlier draft submitted on 9/28/22. The updated assessment involved substantial activities including: <ul style="list-style-type: none">• Updating the Draft Interim Assessment data and hypothesis testing for two additional Demonstration Years ending 6/30/22<ul style="list-style-type: none">• Data runs and analyses for the additional data sets |
| 12.1.2 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 | | NKU will incorporate any feedback received from CMS regarding the 2/14/23 Draft Interim Assessment and make changes as needed. The expectation is that all goals and time-frames will be achieved relative to the independent evaluation as agreed to in the STCs. |
| 12.1.3 List anticipated evaluation-related deliverables related to this demonstration and their due dates | | Future deliverables are expected to be delivered as contractually specified. Final Assessment Data as of 6/20/21 |

| Prompts | State has no update to report (place an X) | State response |
|---|--|----------------|
| 13. Other SUD demonstration reporting | | |
| 13.1 General reporting requirements | | |
| 13.1.1 The state reports changes in its implementation of the demonstration that might necessitate a change to approved STCs, implementation plan, or monitoring protocol | X | |
| 13.1.2 The state anticipates the need to make future changes to the STCs, implementation plan, or monitoring protocol, based on expected or upcoming implementation changes | X | |
| 13.1.3 Compared to the demonstration design and operational details, the state expects to make the following changes to: 13.1.3.a The schedule for completing and submitting monitoring reports | X | |
| 13.1.3.b The content or completeness of submitted monitoring reports and/or future monitoring reports | X | |
| 13.1.4 The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation | X | |
| 13.1.5 Provide updates on the results of beneficiary satisfaction surveys, if conducted during the reporting year, including updates on grievances and appeals from beneficiaries, per 42 CFR § 431.428(a)5 | X | |

| Prompts | State has no update to report (place an X) | State response |
|--|--|----------------|
| 13.2 Post-award public forum 13.2.2 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 monitoring report. | X | |

| Prompts | State has no update to report (place an X) | State response |
|---|--|---|
| 14. Notable state achievements and/or innovations | | |
| 14.1 Narrative information | | |
| 14.1.1 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. | <p>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> | <p>Through the reporting period, the following residential programs are certified by Level of Care(s):</p> <ul style="list-style-type: none"> ASAM 3.1 Only: 6 ASAM 3.5 Only: 50 ASAM 3.7 Only: 0 ASAM 3.1 & 3.5: 59 ASAM 3.5 & 3.7: 3 ASAM 3.1 – 3.7: 6 <p>Of the programs mentioned above, 32 are DMS provisionally certified. As mentioned in Section 10.1.1, DMS is on track to see a reduction in per capita cost in SUD DY4 as the state moves out of the PHE. KY is + ■</p> |

*The state should remove all example text from the table prior to submission.

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

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