

**Medicaid Section 1115 Serious Mental Illness and Serious
Emotional Disturbance Demonstrations
Monitoring Report Instructions**

***PRA Disclosure Statement** - This information is being collected to assist the Centers for Medicare & Medicaid Services in program monitoring of Medicaid Section 1115 Serious Mental Illness and Serious Emotional Disturbance Demonstrations. This mandatory information collection (42 CFR § 431.428) will be used to support more efficient, timely and accurate review of states' monitoring report submissions of Medicaid Section 1115 Serious Mental Illness and Serious Emotional Disturbance Demonstrations, and also support consistency in monitoring and evaluation, increase in reporting accuracy, and reduction in timeframes required for monitoring and evaluation. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148 (CMS-10398 #59). The time required to complete this information collection is estimated to average 29 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.*

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A. Instructions for completing a quarterly or annual monitoring report

1. Customize the template for use in quarterly and annual monitoring reports.

1a) **Customize Part A: Monitoring Report Workbook (Excel file, “SMI-SED metrics” tab).**

The state should align the content of the tab named “SMI-SED metrics” with information provided in its approved monitoring protocol, including: (1) populating the required health IT metrics (metric name, description, reporting category, data source, and measurement period); (2) adding rows at the bottom of the tab for any additional state-specific metrics; and (3) adding columns for any additional subpopulations to the end of the workbook. The state should note that cells containing standard information (i.e., milestone or reporting topic, metric type, reporting category, metric number, metric name, metric description, data source, and measurement period) for CMS-provided metrics are locked for editing and cannot be altered by the state.

1b) **Customize Part B: Monitoring Report Template (Word document).** Complete Section 1 (Title page) of the template using the title page from Part B of the monitoring protocol.

1c) **Customize Part C: Budget Neutrality Workbook (Excel file).** At the time of demonstration approval, CMS will work with the state to confirm the appropriate workbook for this demonstration. The state should work with its CMS demonstration team on developing the Budget Neutrality Workbook.

2. Complete Parts A, B, and C of the customized template as summarized in [Table 1](#) and according to the instructions below:

Note: If a state’s section 1115 SMI/SED demonstration is part of a broader demonstration, CMS will work with the state to ensure there is no duplication in the reporting requirements for different components of the demonstration. For example, CMS may work with the state to avoid duplication in selecting metrics within Part A and selecting reporting topics within Part B (for example, SMI/SED demonstration operations and policy, budget neutrality, SMI/SED demonstration and evaluation update, other SMI/SED demonstration reporting, and notable state achievements and/or innovations).

2a) **Complete Part A: Monitoring Report Workbook.** CMS requires each state with an SMI/SED demonstration to provide data on monitoring metrics for different milestones and reporting topics (see Table 1). Appendix A contains detailed guidance for reporting monitoring metrics and narrative information. For each quarterly and annual monitoring report, the state should create a new copy of the “SMI-SED metrics” tab and the “SMI-SED reporting issues” tab within Part A. For each annual monitoring report, the state should create a new “Annual Avail Assessment” tab within Part A. The instructions for these tabs are presented below according to the order of the columns listed in each tab.

- **“SMI-SED metrics” tab:** Report metrics values using the Medicaid Section 1115 SMI/SED Demonstrations: Technical Specifications for Monitoring Metrics (hereafter referred to as “technical specifications manual”) provided by CMS. The technical specifications manual and the supplemental materials (such as associated value sets) that

accompany this manual can be accessed on the Performance Management Database and Analytics (PMDA) system on the “*Reference Materials*” page.¹ The link to the “*Reference Materials*” page is available on the right side of the state's demonstration dashboard. If the state did not propose reporting a given metric in its approved monitoring protocol, or if the reporting schedule in Part A (“SMI-SED reporting schedule” tab) of a state’s approved protocol indicates a metric is not scheduled for reporting, the state should leave the remaining cells in that row blank. Similarly, if a state does not plan to report a metric by subpopulation, it should leave the cells in those columns blank.

- The state should fill out the following header information below (columns B and C above the metrics table). This information will populate the headers of the “SMI/SED reporting issues” tab.
 - *State*
 - *Demonstration name*
 - *SMI/SED Demonstration Year (DY) (Format: DY1, DY2, DY3, etc.)*
 - *Calendar dates for SMI/SED DY (Format: MM/DD/YYYY)*
 - *SMI/SED Reporting Period (Format: Q1, Q2, Q3, Q4)*
 - *Calendar dates for SMI/SED Reporting Period (Format: MM/DD/YYYY – MM/DD/YYYY)*

If a state has renewed its SMI/SED demonstration or the SMI/SED component of a broader demonstration, the state should number the SMI/SED DY and Q continuously from the previous approval period. For example, if a state’s last monitoring report from the previous approval period was submitted for SMI/SED DY4Q4, the subsequent report should be named SMI/SED DY5Q1.

- **Standard Information.** The following columns of the “SMI-SED metrics” tab (columns A-G and L) contain standard information on CMS-provided metrics:
 - *Number*
 - *Metric name*
 - *Metric description*

¹ The technical specifications manual can be accessed on PMDA in the Reference Materials section after completing the National Measure Stewards Terms and Conditions ‘Point and Click’ Agreement. This agreement should automatically appear when a state downloads the technical specifications manual.

- *Milestone or reporting topic²*
- *Metric type*
- *Reporting category*
- *Data source*
- *Measurement period*

Standard information listed above on CMS-provided metrics cannot be altered by the state. The state can edit the “SMI-SED metrics” tab starting with column H, “*Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N).*”

- If the state’s approved monitoring protocol specifies that it will report on additional state-specific subpopulations, that state should edit the titles of the provided columns (columns BG-BI), and include additional columns as necessary, to reflect the approved state-specific subpopulation names.
- The state should follow the guidance below to complete the “SMI-SED metrics” tab:
 - **Alignment with CMS-provided technical specifications manual.** The state should indicate the version of the metrics technical specifications manual used to report each metric, using the drop-down options (Version 1.0 or Version 2.0) in column J, “*Technical specifications manual version.*” The state should consult the technical specifications manual (Chapter I, “Manual version” section) for more information regarding the appropriate version for calculating each monitoring metric. If a state uses a version of the technical specifications that differs from the expectations outlined in the current technical specifications manual, it should indicate “Y” in the “*Reporting issue (Y/N)*” column (column L) and provide an explanation in the “SMI/SED reporting issues” tab. In addition, the state should attest that its reporting matches the CMS-provided technical specifications manual for each metric, using the drop-down option to select Y or N in column H, “*Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N).*” For metrics where reporting does not match the CMS-provided specifications, the state should use column I, “*Deviations from CMS-provided technical specifications manual in approved protocol*” to list any deviations that were approved in its protocol. For state-specific metrics, the state should attest that it is reporting as specified in its monitoring protocol or list any deviations that were approved in its monitoring protocol in the provided column.

² The milestones correspond with those listed in State Medicaid Director Letter #18-011, which announced the SMI/SED demonstration opportunity. The full letter is available here: <https://www.medicaid.gov/sites/default/files/federal-policy-guidance/downloads/smd18011.pdf>.

- **Presence of data and reporting issues.** In the column named “*Reporting issue (Y/N)*” (column K), the state should indicate whether any data or reporting issues affected the state’s ability to report metrics as described in its approved monitoring protocol (for example, difficulty obtaining necessary data or calculating a required measure). For any identified issues, the state should provide further detail in the “SMI-SED reporting issues” tab described below.
 - **Dates covered by measurement period for each metric.** The state should use the column “*Dates covered by measurement period*” (column M) to provide the calendar dates associated with the measurement period (data collection timeframe). See the technical specifications manual for additional guidance on determining the measurement period for each metric.
 - **Presenting data for counts.** The denominator and rate/percentage columns are shaded grey for any metrics that are reported as counts. For each count metric, the state should report the numerator (outlined in the corresponding metric’s technical specification) in the numerator column, leaving the denominator and the rate/percentage columns grey. The state should report separately for the overall demonstration and for any subpopulations reported, using the columns provided.
 - **Presenting data for rates or percentages.** The state should populate both the denominator and numerator columns for metrics that are reported as rates or percentages. After these values are entered, the “Rate/percentage” cells—which are locked for editing—will calculate the associated rate or percentage. The state should report separately for the overall demonstration, and for any subpopulations reported, using the columns provided.
 - **Reporting annual metrics.** The state should report data for annual metrics (CMS-constructed and established quality measures) according to the reporting schedule in Part A in its approved monitoring protocol. The annual metric reporting columns should remain empty in other quarterly monitoring reports, as noted within the tab.
- **“SMI-SED reporting issues” tab:** Report any data or reporting issues associated with specific metrics as indicated in column K, “*Reporting issue (Y/N)*” in the “SMI-SED metrics” tab or associated with any metrics with issues that have been resolved since the last report in the “SMI-SED reporting issues” tab. A reporting issue is considered any issue that prevents a state from reporting in alignment with its approved monitoring protocol. The state may use the filter feature function in column A (“#”) to select the applicable metrics, if desired.
 - **New issues.** The state should use the “SMI-SED reporting issues” tab to provide CMS with information on the issue and how it affects reporting. The state should complete columns D-G for new issues:

- *Summary of issue:* The summary should include known or suspected causes of the issue, if applicable.
 - *Date and report in which issue was first reported*
 - *Remediation plan and timeline for resolution*
 - *Status*
- **Updates on previous issues.** The state should provide CMS with updates on any data or reporting issues described in previous reports with status “New” or “Ongoing.” The state should copy the information entered into columns D-F from the report in which the issue was first reported into its current report. If any data and reporting issues described in a previous report are unresolved, the state should select “Ongoing” from the drop-down in column G, “*Status,*” and provide CMS with updates in column H, “*Update(s) to issue summary, remediation plan, and/or timeline for resolution, if issue previously reported.*” These updates can include updates to the remediation plan and timeline, or any other new information the state deems relevant. For any resolved data and reporting issues, the state should select “Resolved” from the drop-down in column G, and provide an update on how the issue was resolved in column H. Please note that a resolved issue should be reported with “N” in column L, “*Reporting issue (Y/N)*” in the “SMI-SED metrics” tab. If an issue was noted as resolved in a previous report, it should not be reported in subsequent reports.
- **Confirmation that there are no issues.** For any metric reported as outlined in the monitoring protocol with no data or reporting issues, the state should not enter any text in the corresponding row of the “SMI-SED reporting issues” tab.
- **“Annual Avail Assessment” tab:** Report the state’s Annual Assessment of the Availability of Mental Health Services as part of each annual monitoring report. The Annual Availability Assessment contains parallel information to the Initial Assessment of the Availability of Mental Health Services submitted as part of the state’s application. The state should use the instructions provided in the “Avail Assessment instructions” tab to complete the “Annual Avail Assessment” tab. Also, the “Avail Assessment definitions” tab provides definitions of terms used in the assessment.

2b) Complete Part B: Monitoring Report Template. The instructions below describe the four sections of the Monitoring Report Template. Please note that embedded objects (for example, documents, shapes, SmartArt, screenshots, charts, tables) are not permitted in Part B. If necessary, the state may upload any objects as separate attachments and reference the attachment within Part B. The Monitoring Report Template sections include:

- **Section 1. Title page.** The title page is a brief form that the state completed as part of its monitoring protocol. The state should submit this form as the title page for all monitoring reports and should match the information from the state’s approved monitoring protocol, except for the following two rows:

- *SMI/SED demonstration year and quarter.* The state will enter the section 1115 SMI/SED demonstration year and quarter associated with the submitted monitoring report. This should align with the reporting schedule in the state’s approved monitoring protocol.
- *Reporting period.* The state will enter the calendar dates for the current reporting period (i.e., for the quarter or year). This should align with the reporting schedule in the state’s approved monitoring protocol.
- **Section 2. Executive summary.** The state should provide a brief, targeted executive summary to communicate key achievements, highlights, issues, and/or risks identified during the current reporting period for the SMI/SED demonstration or SMI/SED component of a broader section 1115 demonstration. This summary should also identify: (1) key changes since the last monitoring report, including the implementation of new program components; (2) programmatic improvements (for example, increased outreach or any beneficiary or provider education efforts); and (3) highlights of unexpected changes (for example, unexpected increases or decreases in enrollment or complaints, etc.), which may include changes related to the 2019 coronavirus (COVID-19) pandemic. Historical background or general descriptions of the demonstration component should not be included. The word count should not exceed 500.
- **Section 3. Narrative information on implementation, by milestone and reporting topic.** The state should report narrative information in this table following the detailed prompts for each reporting topic. Any narrative/summary text provided in Section 3 should be brief and not exceed 250 words (2-3 paragraphs). The state should remove the provided example text from the table and provide a response for each reporting topic. The narrative information for each reporting topic is organized into two subsections:
 - **Subsection 1. Metrics trends.** The state should discuss any relevant trends that the data shows related to each milestone or reporting topic, including trends in state-specific metrics. Describe and explain changes (+ or -) greater than two percent. The state should also describe any changes that are possibly due to the impact of COVID-19. The state should insert the metric related to the trend reported in the column “*Related metric(s) (if any).*” If the state has not identified any trends in the data, the state should put an “X” in the “*State has no update*” column and should not enter any text in the “*State response*” column. CMS will continuously review the threshold (currently +/- 2%) and ensure that it is a helpful threshold for monitoring purposes. Appendix B contains detailed guidance for calculating the percent change for metrics trends reporting.

In some instances, the metric specifications for a given metric may have changed substantially relative to the last time the state reported the metric. Examples of substantial changes may include the state adding state-specific codes to reflect newly

covered services,³ or a national measure steward updating the measure rate calculation for a metric that is an established quality measure. If a metric changed substantially, the state should describe how the specification change affected the metrics data relative to the previous report, as well as any anticipated effect on trends over time.

- **Subsection 2. Implementation update.** The state should describe concisely but precisely any changes made in the current reporting period regarding the demonstration design and operational details since submitting its original implementation plan, including any changes due to the COVID-19 pandemic. The state should include within its description the name of the report in which the update was first reported (DY#Q#). If a state has not made any changes since the last report, and does not plan to make any changes, or if the implementation prompt does not apply to the state’s demonstration, the state should put an “X” in the “*State has no update*” column, and should not enter any text in the “*State response*” column.

Grey cells indicate that those cells do not need to be filled out for that row because they are not applicable.

- **Section 4. Narrative information on other reporting topics.** The state should report narrative information in the table on eight other reporting topics: Annual Availability Assessment, maintenance of effort, financing plan, budget neutrality, demonstration operations and policy, demonstration evaluation update, other demonstration reporting, and notable state achievements and/or innovations. Any narrative/summary text provided in Section 4 should be brief and not exceed 250 words (2-3 paragraphs), with the exception of the narrative responses for the Annual Availability Assessment. If the state has no update to report on the requested prompt, the state should put an “X” in the “*State has no trends/update to report*” column, and should not enter any text in the “*State response*” column in the table indicating that there is no update. For reports that are not annual monitoring reports, the state should put an “X” in the “*State has no trends/update to report*” column for all reporting topics that are only required in annual monitoring reports.
- **Reporting Topic 7. Annual Assessment of the Availability of Mental Health Services.** The state should report on implementation updates related to the Annual Availability Assessment in each annual monitoring report. The subsection “Description of changes to baseline conditions and practices” corresponds to the questions the state provided in its Initial Assessment of the Availability of Mental Health Services with the exception of topic 7.1.5, which asks the state to describe whether changes in the availability of mental health services have impacted the state’s maintenance of effort dollar amount. The subsection “Implementation update”

³ If the state plans to make modifications or changes to monitoring metrics, the state should discuss the proposed changes with the state’s CMS demonstration team. After discussion with CMS, the state should document these changes in its monitoring protocol and submit to PMDA for reapproval.

corresponds with the state's responses related to its Annual Availability Assessment as part of Milestone 3 of its implementation plan.

- **Reporting topic 8. Maintenance of effort (MOE) on funding outpatient community-based mental health services.** The state should report on its MOE as a dollar amount in each annual monitoring report. The MOE should represent the level of state appropriations and local funding for outpatient community-based mental health services for the most recently completed state fiscal year. If the MOE amount is less than the dollar amount provided in the state's application materials, the state should provide an explanation of the change. The state should include in its explanation confirmation that it did not move resources to increase access to treatment in inpatient or residential settings at the expense of community-based services.
- **Reporting Topic 9. SMI/SED financing plan.** The state should report on efforts to increase access to mental health providers throughout the state to assess progress on the financing plan to be implemented by the end of the demonstration. This section corresponds with "Attachment A: Financing Plan" of the state's implementation plan.
- **Reporting Topic 10. Budget neutrality.** The state should provide a detailed narrative on the current status of budget neutrality and provide an analysis of the budget neutrality to date.
- **Reporting Topic 11. SMI/SED-related demonstration operations and policy.** The state should highlight significant SMI/SED (or if a broader demonstration, then SMI/SED-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 effects. The state should also note any activity that may accelerate or create delays or impediments in achieving the SMI/SED demonstration's approved goals or objectives, if not already reported elsewhere in this document. Such considerations and activities could include the following, either real or anticipated:
 - Any changes to SMI/SED populations served, benefits, access, delivery systems, or eligibility
 - Legislative activities and state policy changes
 - Fiscal changes that would result in changes in access, benefits, populations, enrollment, etc.
 - Related audit or investigation activity, including findings
 - Litigation activity
 - Status and/or timely milestones for health plan contracts
 - Market changes that may impact Medicaid operations
 - Any delays or variance with provisions outlined in STCs
 - Systems issues or challenges that might impact the demonstration [i.e. eligibility and enrollment (E&E), Medicaid management information systems (MMIS)]

- Changes in key state personnel or organizational structure
 - Procurement items that will impact demonstration (i.e. enrollment broker, etc.)
 - Significant changes in payment rates to providers which will impact demonstration or significant losses for managed care organizations (MCOs) under the demonstration
 - Emergency Situation/Disaster
 - Other
- **Reporting Topic 12. SMI/SED demonstration evaluation update.** The state should report on relevant updates to its SMI/SED demonstration evaluation work and timeline. Depending on when this report is due to CMS and the timing for the demonstration, this might include updates on progress with:
- Evaluation design
 - Evaluation procurement
 - Evaluation implementation
 - Evaluation deliverables (information presented in below table)
 - Data collection, including any issues collecting, procuring, managing, or using data for the state’s evaluation or federal evaluation
 - For annual monitoring reports per 42 Code of Federal Regulations (CFR) 431.428, the results/effects of any demonstration programmatic area defined by CMS that is unique to the demonstration design or evaluation hypothesis

The state should also 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 time frames agreed to in the STCs. In addition to any status updates on the demonstration evaluation, the state should list anticipated evaluation-related deliverables related to this demonstration and its due dates.

- **Reporting Topic 13. Other SMI/SED demonstration reporting.** The state should provide a detailed narrative on general SMI/SED reporting requirements not captured under other reporting topics and any post-award public forums. For annual monitoring reports, the state should:
- Include updates on the results of beneficiary satisfaction surveys, if conducted during the reporting year, including grievances and appeals from beneficiaries, per 42 CFR 431.428(a)5; and
 - Provide an update on the annual post-award public forum, including all public comments received regarding the progress of the demonstration project, per 42 CFR 431.428(a)11.

- **Reporting Topic 14. Notable state achievements and/or innovations.** The state should provide a detailed narrative on notable state achievements and/or innovations.

2c) Complete Part C: Budget Neutrality Workbook. The budget neutrality reporting topic incorporates a Budget Neutrality Workbook for the demonstration. This Budget Neutrality Workbook should be submitted as a separate deliverable as part of each monitoring report.

3. Submit Parts A, B, and C according to the instructions.

3a) The state should name the files according to the following convention:

StateAbbreviation_SMI-DY#Q#_Report_PartofReport_DateofSubmission, where:

- *State abbreviation* is the two-letter abbreviation for the state name
- *DY#Q#* is written with the number of the demonstration year and quarter of the reporting period, no spaces
- *Part of report* refers to Part A, B or C, written as “Part-[A, B, or C]”
- *Date of submission* is the date the report is submitted to PMDA in yyyyymmdd format

For example, a monitoring report submitted by a state with a standalone SMI/SED demonstration on May 29, 2020 for SMI/SED DY1Q1 would be comprised of three files named: XX_SMI-DY1Q1_Report_Part-A_20200529, XX_SMI-DY1Q1_Report_Part-B_20200529, and XX_SMI-DY1Q1_Report_Part-C_20200529 where XX stands for the state’s 2-letter abbreviation.

If the state’s section 1115 SMI/SED demonstration is part of a broader demonstration, the state should use the DY and Q of the broader demonstration and replace “SMI” with “1115” (i.e., XX_1115-DY1Q1_Report_Part-A_20200529, XX_1115-DY1Q1_Report_Part-B_20200529, and XX_1115-DY1Q1_Report_Part-C_20200529. If a file is named with a Q4 it is understood to be the state’s annual monitoring report.

If the state needs to resubmit Parts A, B, or C after making changes or revisions, the state should use the same naming convention guidance, but insert “Revised” in front of the file name. For example, if a state resubmits Part A for its SMI/SED DY1Q1 report on June 2, 2020, the file name would be: Revised_XX_SMI-DY1Q1_Report_Part-A_20200602.

3b) After naming the files using the naming convention above, the state should upload Parts A, B, and C to PMDA for CMS to review through its state demonstration dashboard. This dashboard will list all section 1115 demonstrations associated with the state. The state can upload Parts A, B, and C by navigating to the appropriate demonstration name (name of the state’s stand-alone SMI/SED demonstration or broader demonstration with an SMI/SED component) and in the “Actions” column, select “Deliverables” and click “Go” to get to its “*Deliverables*” page. A list of deliverables including names, types, due dates, and other information will be displayed on this page. The state should go to the appropriate deliverable (i.e., the corresponding quarterly/annual monitoring report) and click “Upload/View Docs” under the “Actions” column. Any file named with a Q4 should be submitted to the “Annual report” deliverable. The state will be able to upload Parts A, B,

and C. The state should submit revised monitoring reports to the same deliverable as the original submission. The state should make sure to mark the “Ready for CMS Review” button in the “Submission Confirmation” section of the “*Add a New State File*” page and click the “Update Status” button to complete its submission. For further guidance on monitoring report submission, the state should review the PMDA state user manual. This manual can be accessed by clicking the “FAQ” button at the bottom of the state’s demonstration dashboard. This will take the state to the “*Frequently Asked Questions*” page. From here, the state should click on the “Training and Support Materials” link found on the top right of the page which will take the state to the “*Training and Support Materials*” page. This page contains the PMDA state user manual as well as other resources such as tutorial videos.

B. Instructions for completing a retrospective monitoring report

If the monitoring protocol is approved after one or more of a state’s quarterly monitoring report submission due date(s), the state will need to report metrics data to CMS retrospectively for any prior quarters of section 1115 SMI/SED demonstration implementation that precede the monitoring protocol approval date.⁴

The state should compile and submit a separate monitoring report (Parts A and B only) for retrospective data following the steps below. CMS will provide the state with customized templates for Part A and B of its retrospective reporting.

- 1. Use the state’s customized template for Parts A and B.** The state should use the CMS-provided customized retrospective template for Parts A and B using guidance in Section A above.
- 2. Complete Parts A and B for the retrospective monitoring report:**
 - 2a) Complete Part A: Monitoring Report Workbook.** Using the guidance in Section A, the state should complete the “SMI-SED metrics” tab for each quarter of retrospective data. The customized Part A will include one tab per retrospective quarter named: *DY#Q#SMI-SED metrics*, where *DY#Q#* is written with the number of the SMI/SED demonstration year and quarter of the retrospective reporting period. Retrospective Part A will also include one “SMI-SED reporting issues” tab for the entire retrospective reporting period which the state should complete.

⁴ While a state does not need to submit metrics data until after its monitoring protocol is approved by CMS, the state should submit quarterly and annual monitoring reports according to the requirements in its STCs with narrative updates on implementation progress, and other information that may be applicable. The state is encouraged to use Part B, Monitoring Report Template to fulfill this reporting requirement until its monitoring protocol is approved. Please note that if a state chooses to submit metrics data before its monitoring protocol is approved, it may need to resubmit these data after protocol approval.

2b) Complete Part B: Monitoring Report Template. Using the guidance in Section A, the state should complete:

- **Section 1. Title page**
- **Section 2. Executive summary**
- **Section 3. Narrative information on implementation, by milestone and reporting topic** for the entire retrospective reporting period. In these general summaries, the state should discuss any relevant trends that the data shows related to each milestone or reporting topic, including trends in state-specific metrics.

Please note, the state does not need to report on implementation updates in Section 3, or complete Section 4 (Narrative information on other reporting topics) for retrospective reports.

3. Submit Parts A and B to PMDA:

3a) The state should name retrospective monitoring reports according to the convention: StateAbbreviation_RetroDY#Q#_PartofReport_DateofSubmission, where:

- *State abbreviation* is the two-letter abbreviation for the state name
- *RetroDY#Q#* refers to the quarter(s) being reported on retrospectively. If a state is reporting more than one quarter of retrospective data, it should include the range in the file name by adding a dash (-) between the quarters (see below for an example).
- *Part of report* refers to Part A or B, written as “Part-[A or B]”
- *Date of submission* is the date the report is submitted to PMDA in yyyyymmdd format

For example, a retrospective report submitted by a state on May 29, 2020 for retrospective quarters DY1Q1 – DY1Q3 would be comprised of two files named: XX_RetroDY1Q1-Q3_Part-A_20200529, XX_RetroDY1Q1-Q3_Part-B_20200529, where XX stands for a state’s 2-letter abbreviation.

3b) The state should submit Parts A and B of the retrospective monitoring report along with the state’s scheduled monitoring report submission.

Table 1. SMI/SED monitoring reporting overview, by milestone or reporting topic

#	Milestone or reporting topic	Part A. Monitoring Report Workbook	Part B. Monitoring Report Template ^a	Part C. Budget Neutrality Workbook
0.	Title page	--	Section 1	--
0.	Executive summary	--	Section 2	--
1.	Ensuring Quality of Care in Psychiatric Hospitals and Residential Settings (Milestone 1)	<ul style="list-style-type: none"> • SMI-SED metrics tab • SMI-SED reporting issues tab 	Section 3: <ul style="list-style-type: none"> • Metrics trends • Implementation update 	--
2.	Improving Care Coordination and Transitions to Community-Based Care (Milestone 2)	<ul style="list-style-type: none"> • SMI-SED metrics tab • SMI-SED reporting issues tab 	Section 3: <ul style="list-style-type: none"> • Metrics trends • Implementation update 	--
3.	Increasing Access to Continuum of Care, Including Crisis Stabilization Services (Milestone 3)	<ul style="list-style-type: none"> • SMI-SED metrics tab • SMI-SED reporting issues tab 	Section 3: <ul style="list-style-type: none"> • Metrics trends • Implementation update 	--
4.	Earlier Identification and Engagement in Treatment, Including Through Increased Integration (Milestone 4)	<ul style="list-style-type: none"> • SMI-SED metrics tab • SMI-SED reporting issues tab 	Section 3: <ul style="list-style-type: none"> • Metrics trends • Implementation update 	--
5.	SMI/SED health information technology (health IT)	<ul style="list-style-type: none"> • SMI-SED metrics tab^b • SMI-SED reporting issues tab^b 	Section 3: <ul style="list-style-type: none"> • Metrics trends • Implementation update 	--
6.	Other SMI/SED-related metrics	<ul style="list-style-type: none"> • SMI-SED metrics tab • SMI-SED reporting issues tab 	Section 3: <ul style="list-style-type: none"> • Metrics trends • Implementation update 	--
7.	Annual Assessment of the Availability of Mental Health Services	<ul style="list-style-type: none"> • Annual Avail Assessment tab^c 	Section 4: <ul style="list-style-type: none"> • Description of changes to baseline conditions and practices • Implementation update 	--
8.	Maintenance of effort (MOE) on funding outpatient community-based mental health services	--	Section 4: <ul style="list-style-type: none"> • MOE dollar amount • Narrative information 	--
9.	SMI/SED financing plan	--	Section 4: <ul style="list-style-type: none"> • Implementation update 	--
10.	Budget neutrality	--	Section 4: <ul style="list-style-type: none"> • Current status and analysis • Implementation update 	Submit completed workbook
11.	SMI/SED-related demonstration operations and policy	--	Section 4: <ul style="list-style-type: none"> • SMI/SED-related demonstrations operations and policy • Implementation update 	--
12.	SMI/SED demonstration evaluation update	--	Section 4: <ul style="list-style-type: none"> • SMI/SED demonstration evaluation update 	--

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#	Milestone or reporting topic	Part A. Monitoring Report Workbook	Part B. Monitoring Report Template ^a	Part C. Budget Neutrality Workbook
13.	Other demonstration reporting	--	Section 4: <ul style="list-style-type: none"> • General reporting requirements • Post-award public forum 	--
14.	Notable state achievements and/or innovations	--	Section 4: <ul style="list-style-type: none"> • Notable state achievements and/or innovations 	--

^a See detailed instructions for guidance on narrative reporting, which varies by milestone or reporting topic.

^b There are no CMS-provided metrics for the health IT topic; the state must identify relevant health IT metrics according to the guidance provided in the SMI/SED Monitoring Protocol Instructions.

^c The state is required to complete only the “Annual Avail Assessment” tab for annual monitoring reports.

APPENDIX A:

**REPORTING MEDICAID SECTION 1115 SMI/SED DEMONSTRATION MONITORING
METRICS AND NARRATIVE INFORMATION**

This appendix provides reporting guidance applicable to section 1115 SMI/SED demonstration monitoring metrics and other monitoring information. See Chapter 1 Section B of the technical specifications manual for additional guidance.

The state should report data to CMS in accordance with the schedule and format agreed upon in its approved monitoring protocol. Because of the dynamic nature of Medicaid data, metrics should be produced at the same time in each measurement period throughout the SMI/SED demonstration. For example, if a state submits data quarterly, the submission should contain three monthly values for each monthly metric, each produced at the same time relative to its measurement period.

Guidelines for including metrics and narrative information in monitoring reports are as follows:

- Each quarterly monitoring report should contain (1) narrative information on implementation for the most recent demonstration quarter, (2) grievances and appeals metrics for the most recent demonstration quarter, and (3) all other monthly and quarterly metrics for the prior quarter (which allows at least 90 days for claims run-out and other considerations for data completeness).
- To allow for adequate time to implement annual specification updates from measure stewards, annual metrics that are established quality measures should be reported:
 - For a state with an SMI/SED demonstration year that ends January 31 or February 28: in the first quarterly monitoring report of the next SMI/SED demonstration year
 - For a state with an SMI/SED demonstration year that ends March 31 through November 30: in the annual monitoring report
 - For a state with an SMI/SED demonstration year that ends December 31: in the second quarterly monitoring report of the next SMI/SED demonstration year
- All other annual metrics should be reported for the past demonstration year in the first quarterly monitoring report of the next demonstration year, rather than in the annual monitoring report. This allows at least 90 days for claims run-out and other considerations for data completeness.
- Each annual monitoring report should include the state’s Annual Assessment of the Availability of Mental Health Services.

Table A.1 illustrates these guidelines, which apply to both CMS-constructed and state-specific metrics (including health IT).

Table A.1. Reporting in quarterly and annual section 1115 SMI/SED monitoring reports

Report name:	DY1Q1 report	DY1Q2 report	DY1Q3 report	DY1Q4 (annual) report**	DY2Q1 report	DY2Q2 report
Report due date:	Due 60 days after quarter ends	Due 60 days after quarter ends	Due 60 days after quarter ends	Due 90 days after quarter ends	Due 60 days after quarter ends	Due 60 days after quarter ends
Measurement periods, by reporting category						
Narrative information on implementation	DY1Q1	DY1Q2	DY1Q3	DY1Q4	DY2Q1	DY2Q2
Grievances and appeals	DY1Q1	DY1Q2	DY1Q3	DY1Q4	DY2Q1	DY2Q2
Other monthly and quarterly metrics	n.a.	DY1Q1	DY1Q2	DY1Q3	DY1Q4	DY2Q1
Annual metrics that are established quality measures*	n.a.	n.a.	n.a.	A state with a DY ending 3/31 – 11/30: CY1	A state with a DY ending on 1/31 or 2/28: CY1	A state with a DY ending on 12/31: CY1
Other annual metrics	n.a.	n.a.	n.a.	n.a.	DY1	n.a.

Note: The state is expected to submit retrospective data in the second monitoring report submission after monitoring protocol approval.

* Metrics that are established quality measures should be calculated for the calendar year, except for Metric #6 which is calculated over a 2-year period. All other metrics should be calculated for the SMI/SED demonstration year.

**Per the STCs, the state’s fourth quarterly monitoring report (Q4) is also considered to be its annual monitoring report for the previous demonstration year. If the state’s SMI/SED demonstration is part of a broader section 1115 demonstration, the state should consider its broader section 1115 demonstration Q4 monitoring report to be the state’s annual monitoring report.

CY = calendar year; CY1 = the calendar year in which the demonstration began; DY = Demonstration year; Q = Quarter; n.a. = not applicable (information not expected to be included in the monitoring report).

Technical Assistance. To help states collect, report, and use the section 1115 SMI/SED demonstration monitoring metrics, CMS offers technical assistance. For technical assistance, contact the section 1115 SMI/SED demonstration monitoring and evaluation mailbox (1115MonitoringandEvaluation@cms.hhs.gov), copying the CMS demonstration team on the message.

APPENDIX B:

**CALCULATING PERCENT CHANGE FOR MEDICAID SECTION 1115 SMI/SED
DEMONSTRATION MONITORING METRICS**

The Monitoring Report Instructions direct the state to report on metric trends in Part B of its reports, including all changes (+ or -) greater than 2%, within each milestone and reporting topic. Tables B.1 and B.2 below provide examples of how to calculate the percent change based on the data reported in the “SMI-SED metrics” tab of Part A for three metrics. This guidance also applies to state-specific metrics.

For monthly metrics, including state-specific metrics, the state should first calculate an average monthly value for the current quarter and an average monthly value for the prior quarter. To determine the “percent change”, calculate the difference between the metric’s current quarter average value and the prior quarter average value. Table B.1 illustrates the percentage calculation for a monthly measure, using Metric #21 “Count of beneficiaries with SMI/SED (monthly)” as an example. The row below the monthly counts in this table is the average count for the quarter ((A+B+C)/3). The difference between the average count for quarter 1 (column D) and quarter 2 (column E) is reported in column F, “Count change” (E - D). Column G, “Percent change”, shows as the difference between the value in the “Count change” and the average count for quarter 1 (F/D) as a percentage.

Table B.1. Example calculation of percent change for monthly measure

Metric	Quarter 1			Quarter 2			Count change (F)	Percent change (G)
	Denominator	Numerator or count (D)	Rate/%	Denominator	Numerator or count (E)	Rate/ %		
#21: Count of beneficiaries with SMI/SED (monthly)								
Month 1=A		7,000			7,120			
Month 2=B		7,035			7,155			
Month 3=C		7,120			7,175			
Average		7,052			7,150		98	1.4%

% = Percentage

*Grey shaded cells represent cells that are greyed out within the Monitoring Report Workbook.

**Yellow shaded cells represent cells that are not a part of the Monitoring Report Workbook and to highlight how to calculate count and percentage changes.

For quarterly and annual metrics, including state-specific metrics, “percent change” refers to the percent difference in the metric value between the current and prior quarters or years, respectively. Table B.2 provides two examples of annual metrics, which are expressed as counts or percentages. In this table, column G reports the difference between metric counts for year 1 and 2 (E-B), or the difference between the metric rates for year 1 and 2 (F - C). Column H, “Percent change” reports the difference between the value in the “Count change” column divided by the values for year 1 (G/B for counts and G/C for rates).

Table B.2. Example calculation of percent change for annual measure

Metric	Year 1			Year 2			Count Change (G)	Percent change (H)
	Denominator (A)	Numerator or count (B)	Rate/% (C=B/A)	Denominator (D)	Numerator or count (E)	Rate/% (F=E/D)		
#20: Beneficiaries with SMI/SED treated in an IMD for mental health							1,170	5.8%
Year		20,100			21,270			
#28: Alcohol Screening and Follow-up for People with SMI							5.1%	13.8%
Year	7,052	2,600	36.9%	7,150	3,000	42.0%		

% = Percentage

*Grey shaded cells represent cells that are greyed out within the Monitoring Report Workbook.

**Yellow shaded cells represent cells that are not a part of the Monitoring Report Workbook and to highlight how to calculate count and percentage changes.