

Medicaid Section 1115 SUD Demonstrations Report (Part A) -
 State
 Demonstration Name
 SUD Demonstration Year (DY)
 (Format: DY1, DY2, DY3, etc.)
 Calendar Dates for SUD DY
 (Format: MM/DD/YYYY - MM/DD/YYYY)
 SUD Reporting Period
 (Format: Q1, Q2, Q3, Q4)
 Calendar Dates for SUD Reporting Period
 (Format: MM/DD/YYYY - MM/DD/YYYY)

Substance Use Disorder (SUD) Metrics

#	Metric name
<i>EXAMPLE: 1 (Do not delete or edit this row)</i>	<i>EXAMPLE: Assessed for SUD Treatment Needs Using a Standardized Screening Tool</i>

1	Assessed for SUD Treatment Needs Using a Standardized Screening Tool
2	Medicaid Beneficiaries with Newly Initiated SUD Treatment/Diagnosis
3	Medicaid Beneficiaries with SUD Diagnosis (monthly)
4	Medicaid Beneficiaries with SUD Diagnosis (annually)
5	Medicaid Beneficiaries Treated in an IMD for SUD

6	Any SUD Treatment
7	Early Intervention
8	Outpatient Services
9	Intensive Outpatient and Partial Hospitalization Services
10	Residential and Inpatient Services
11	Withdrawal Management
12	Medication-Assisted Treatment (MAT)
13	SUD Provider Availability
14	SUD Provider Availability - MAT

15	<p>Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-AD)</p> <p>[NCQA; NQF #0004; Medicaid Adult Core Set; Adjusted HEDIS measure]^f</p>
16	<p>SUB-3 Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge,</p> <p>SUB-3a Alcohol and Other Drug Use Disorder Treatment at Discharge</p> <p>[Joint Commission]</p>
17(1)	<p>Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence (FUA-AD)</p> <p>[NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure]^{c,d}</p>

17(2)	Follow-up after Emergency Department Visit for Mental Illness (FUM-AD) [NCQA; NQF #3489; Medicaid Adult Core Set; Adjusted HEDIS measure] ^{c,e}
18	Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD) [PQA, NQF #2940; Medicaid Adult Core Set]
19	Use of Opioids from Multiple Providers in Persons Without Cancer (OMP) [PQA; NQF #2950]
20	Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP) [PQA, NQF #2951]
21	Concurrent Use of Opioids and Benzodiazepines (COB-AD) [PQA, NQF #3389; Medicaid Adult Core Set]
22	Continuity of Pharmacotherapy for Opioid Use Disorder [USC; NQF #3175]
23	Emergency Department Utilization for SUD per 1,000 Medicaid Beneficiaries
24	Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries
25	Readmissions Among Beneficiaries with SUD
26	Overdose Deaths (count)

27	Overdose Deaths (rate)
28	SUD Spending
29	SUD Spending within IMDs
30	Per Capita SUD Spending
31	Per Capita SUD Spending within IMDs
32	Access to Preventive/ Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD [Adjusted HEDIS measure] ^c
33	Grievances Related to SUD Treatment Services
34	Appeals Related to SUD Treatment Services
35	Critical Incidents Related to SUD Treatment Services
36	Average Length of Stay in IMDs
Q1	<i>Project ECHO - OPIOID, ADDICTION, & PAIN ECHO</i>
Q2	<i>Online Provider Directories</i>
Q3	<i>MAT Continuity Models</i>

State-specific metrics

Note: Licensee and states must prominently display the following Measures IET-AD, FUA-AD, FUM-AD, and AAP [Metrics #1: Information Set (HEDIS®) measures that are owned and copy HEDIS measures and specifications are not clinical guidelines for all potential applications. The measures and specification, representations, warranties or endorsements about the quality otherwise identified as meeting the requirements of a HEDIS measure, warranties, or endorsement about the quality of any organization has no liability to anyone who relies on HEDIS measures or specifications.

The measure specification methodology used by CMS is different from the measure specifications but has granted CMS permission to adjust the measure specifications that has not been certified via NCQA's Measure Certification. Until it is audited and designated as a "HEDIS rate" until it is audited and designated as a HEDIS rate, such measure rates shall be designated or referred to as

^a Report metrics that are one annual value for a demonstration year.

^b Enter any state-specific subpopulations that will be reported :

^c Rates for these metrics reflect Uncertified, Unaudited HEDIS

^d Rates 1 and 2 reported for Metric #17(1) correspond to rates
1115 Substance Use Disorder Demonstrations: Technical Spec

^e Rates 1 and 2 reported for Metric #17(2) correspond to rates
1115 Substance Use Disorder Demonstrations: Technical Spec

Checks:

Numerator in #4 should equal the denominator in #30

The denominator in #23 should equal the denominator in #24

Numerator in #27 should equal the numerator in #26

Numerator in #30 should equal the numerator in #28

Denominator in #31 should equal the numerator in #5

Numerator in #31 should equal the numerator in #29

Counts for a subpopulation (e.g. pregnant, not pregnant) shoul

- Metrics (Version 5.1)
UT
Primary Care Network
DY5

07/01/2021-06/30/2022

Q3

01/01/2022-03/31/2022

Metric description

EXAMPLE:

Number of beneficiaries screened for SUD treatment needs using a standardized screening tool during the measurement

Number of beneficiaries screened for SUD treatment needs using a standardized screening tool during the measurement period

Number of beneficiaries who receive MAT or a SUD-related treatment service with an associated SUD diagnosis during the measurement period but not in the three months before the measurement period

Number of beneficiaries who receive MAT or a SUD-related treatment service with an associated SUD diagnosis during the measurement period and/or in the 11 months before the measurement period

Number of beneficiaries who receive MAT or a SUD-related treatment service with an associated SUD diagnosis during the measurement period and/or in the 12 months before the measurement period

Number of beneficiaries with a claim for residential or inpatient treatment for SUD in IMDs during the measurement period.

Number of beneficiaries enrolled in the measurement period receiving any SUD treatment service, facility claim, or pharmacy claim during the measurement period

Number of beneficiaries who used early intervention services (such as procedure codes associated with SBIRT) during the measurement period

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

Number of 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

Number of beneficiaries who use residential and/or inpatient services for SUD during the measurement period

Number of beneficiaries who use withdrawal management services (such as outpatient, inpatient, or residential) during the measurement period

Number of beneficiaries who have a claim for MAT for SUD during the measurement period

The number of providers who were enrolled in Medicaid and qualified to deliver SUD services during the measurement period

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

Percentage of beneficiaries age 18 and older with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following:

- Initiation of AOD Treatment—percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis
- Engagement of AOD Treatment—percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit

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.

- Initiation of AOD Treatment - Alcohol abuse or dependence
- Initiation of AOD Treatment - Opioid abuse or dependence
- Initiation of AOD Treatment - Other drug abuse or dependence

- Initiation of AOD Treatment - Total AOD abuse of dependence

- Engagement of AOD Treatment - Alcohol abuse or dependence

- Engagement of AOD Treatment - Opioid abuse or dependence

- Engagement of AOD Treatment - Other drug abuse or dependence

- Engagement of AOD Treatment - Total AOD abuse of dependence

SUB-3: 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.

SUB-3a: 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.
Percentage of ED visits for beneficiaries age 18 and older with a principal diagnosis of AOD abuse or dependence who had a follow-up visit for AOD abuse or dependence. Two rates are reported:

- Percentage of ED visits for which the beneficiary received follow-up within 30 days of the ED visit (31 total days).

- Percentage of ED visits for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).

Percentage of ED visits for beneficiaries age 18 and older with a principal diagnosis of mental illness or intentional self-harm and who had a follow-up visit for mental illness. Two rates are reported:

- Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit (31 total days)
- Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).

Percentage of 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, sickle cell disease diagnosis, or in hospice are excluded.

The percentage of individuals ≥ 18 years of age who received prescriptions for opioids from ≥ 4 prescribers AND ≥ 4 pharmacies within ≤ 180 days.

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. Percentage of beneficiaries age 18 and older with concurrent use of prescription opioids and benzodiazepines. Beneficiaries with a cancer diagnosis, sickle cell disease diagnosis, or in hospice are excluded.

Percentage of adults 18 years of age and older with pharmacotherapy for OUD who have at least 180 days of continuous treatment

Total number of ED visits for SUD per 1,000 beneficiaries in the measurement period

Total number of inpatient stays per 1,000 beneficiaries in the measurement period

The rate of all-cause readmissions during the measurement period among beneficiaries with SUD.

Number of overdose deaths during the measurement period among Medicaid beneficiaries living in a geographic area covered by the demonstration. The state is encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid).

Rate of overdose deaths during the measurement period among adult Medicaid beneficiaries living in a geographic area covered by the demonstration. The state is encouraged to report the cause of overdose death as specifically as possible (for example, prescription vs. illicit opioid).

Total Medicaid SUD spending during the measurement period.

Total Medicaid SUD spending on inpatient/residential treatment within IMDs during the measurement period.

Per capita SUD spending during the measurement period

Per capita SUD spending within IMDs during the measurement period

The percentage of Medicaid beneficiaries with SUD who had an ambulatory or preventive care visit during the measurement period.

Number of grievances filed during the measurement period that are related to SUD treatment services

Number of appeals filed during the measurement period that are related to SUD treatment services

Number of critical incidents filed during the measurement period that are related to SUD treatment services

The average length of stay for beneficiaries discharged from IMD inpatient/residential treatment for SUD.

Utah will work with the University of Utah's Project ECHO program on Opioid, Addiction & Pain sessions. Utah will contact all Medicaid Prepaid Mental Health Plans (PMHP) will be required to implement online provider directories, updating annually to ensure that contact Utah will track MAT continuity with and without behavioral counseling therapy. Utah will identify high and low performing

ing notice on any display of Measure rates:

5, 17(1), 17(2), and 32] are Healthcare Effectiveness Data and righted by the National Committee for Quality Assurance (NCQA). s, do not establish a standard of medical care and have not been tested s are provided "as is" without warranty of any kind. NCQA makes no ' of any product, test or protocol identified as numerator compliant or measure or specification. NCQA makes no representations, ion or clinician who uses or reports performance measures and NCQA pecifications or data reflective of performance under such measures

ent from NCQA's methodology. NCQA has not validated the adjusted just. A calculated measure result (a "rate") from a HEDIS measure Program, and is based on adjusted HEDIS specifications, may not be rtable by an NCQA-Certified HEDIS Compliance Auditor. Until such "Adjusted, Uncertified, Unaudited HEDIS rates."

year only in the report specified in the reporting schedule

after column AU; create new columns as needed

rates

2 and 3 for Metric #17 from Version 1.1 of the the Medicaid Section
ifications for Monitoring Metrics

1 and 2 for Metric #17 from Version 1.1 of the the Medicaid Section
ifications for Monitoring Metrics

d sum approximately to counts for the overall demonstration

Milestone or reporting topic	Reporting category	Metric type
<i>EXAMPLE: Assessment of need and qualification for SUD treatment services</i>	<i>EXAMPLE: Other monthly and quarterly metrics</i>	<i>EXAMPLE: CMS-constructed</i>
Assessment of need and qualification for SUD treatment services	Other monthly and quarterly metrics	CMS-constructed
Assessment of need and qualification for SUD treatment services	Other monthly and quarterly metrics	CMS-constructed
Assessment of need and qualification for SUD treatment services	Other monthly and quarterly metrics	CMS-constructed
Assessment of need and qualification for SUD treatment services	Other annual metrics	CMS-constructed
Milestone 2	Other annual metrics	CMS-constructed

Milestone 1	Other monthly and quarterly metrics	CMS-constructed	
Milestone 1	Other monthly and quarterly metrics	CMS-constructed	
Milestone 1	Other monthly and quarterly metrics	CMS-constructed	
Milestone 1	Other monthly and quarterly metrics	CMS-constructed	
Milestone 1	Other monthly and quarterly metrics	CMS-constructed	
Milestone 1	Other monthly and quarterly metrics	CMS-constructed	
Milestone 1	Other monthly and quarterly metrics	CMS-constructed	
Milestone 4	Other annual metrics	CMS-constructed	
Milestone 4	Other annual metrics	CMS-constructed	

Milestone 6	Annual metrics that are established quality measures	Established quality measure
Milestone 6	Annual metrics that are established quality measures	Established quality measure
Milestone 6	Annual metrics that are established quality measures	Established quality measure

Milestone 6	Annual metrics that are established quality measures	Established quality measure
Milestone 5	Annual metrics that are established quality measures	Established quality measure
Milestone 5	Annual metrics that are established quality measures	Established quality measure
Milestone 5	Annual metrics that are established quality measures	Established quality measure
Milestone 5	Annual metrics that are established quality measures	Established quality measure
Milestone 1	Annual metrics that are established quality measures	Established quality measure
Milestone 5	Other monthly and quarterly metrics	CMS-constructed
Other SUD-related metrics	Other monthly and quarterly metrics	CMS-constructed
Milestone 6	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed

Milestone 5	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed
Other SUD-related metrics	Other annual metrics	CMS-constructed
Other SUD-related metrics	Annual metrics that are established quality measures	Established quality measure
Other SUD-related metrics	Grievances and appeals	CMS-constructed
Other SUD-related metrics	Grievances and appeals	CMS-constructed
Other SUD-related metrics	Grievances and appeals	CMS-constructed
Milestone 2	Other annual metrics	CMS-constructed
Health IT	<i>Other annual metrics</i>	State-specific
Health IT	<i>Other annual metrics</i>	State-specific
Health IT	<i>Other annual metrics</i>	State-specific



Approved protocol indicates that reporting matches the CMS-provided technical specifications manual (Y/N)		
Data source	State will report (Y/N)	
EXAMPLE: Medical record review or claims	EXAMPLE (automatically populated):	EXAMPLE (automatically populated): N
Medical record review or claims		
	N	N
Claims		
	N	N
Claims		
	Y	Y
Claims		
	Y	Y
Claims	Y	Y

Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
Claims		
	Y	Y
Provider enrollment database; Claims database; Claims Provider enrollment database, SAMHSA datasets	Y	Y
	Y	N

Claims

Medical record review
or claims

Claims

Y	Y	
N	N	

Claims	Y	Y
Claims	Y	Y
Claims	Y	Y
Claims	N	N
Claims	N	N
Claims	Y	Y
Claims	Y	Y
Claims	Y	Y
Claims	Y	Y
State data on cause of death	Y	Y
	Y	Y

State data on cause of death		
	Y	Y
Claims	N	N
Claims		
	N	N
Claims	N	N
Claims		
	N	N
Claims		
	Y	Y
Administrative records	N	N
Administrative records		
	N	N
Administrative records	N	N
Claims; State-specific IMD database	Y	Y
<i>Administrative records</i>	Y	
<i>Administrative records</i>	Y	
<i>Administrative records</i>	Y	

Deviations from CMS-provided technical specifications manual in approved protocol	Technical specifications manual version
<i>EXAMPLE (automatically populated): The Department will use state-defined procedure codes (list specific codes)</i>	<i>EXAMPLE: Version 3.0</i>
	Version 4.0

	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0
	Version 4.0

Utah will use claims data where MAT is dispensed for a list of Medica

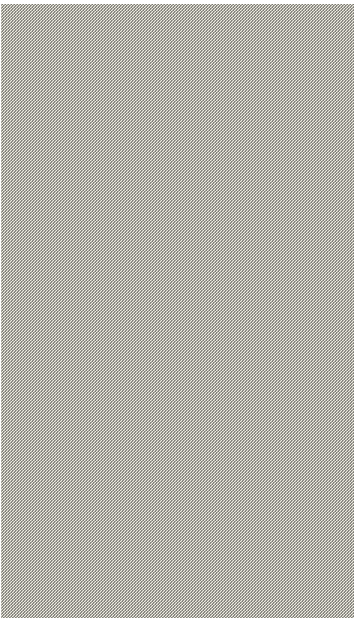
	Version 4.0
	Version 4.0



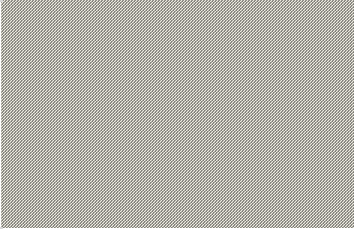
Reporting issue (Y/N) (further describe in SUD reporting issues tab)	Measurement period (month, quarter, year ^a)	Dates covered by measurement period (MM/DD/YYYY- MM/DD/YYYY)
EXAMPLE: Y	EXAMPLE: Month 1	EXAMPLE: 07/01/2018-7/31/2018
	EXAMPLE: Month 2	EXAMPLE: 08/01/2018-08/31/2018
	EXAMPLE: Month 3	EXAMPLE: 09/01/2018-09/30/2018
	Month 1	
	Month 2	
	Month 3	
	Month 1	
	Month 2	
	Month 3	
N	Month 1	10/01/2021-10/31/2021
	Month 2	11/01/2021-11/30/2021
	Month 3	12/01/2021-12/31/2021
	Year	
	Year	



Year



Year



Year

	Year	
	Year	
	Year	
	Year	
	Year	
	Year	
	Month 1	10/01/2021-10/31/2021
N	Month 2	11/01/2021-11/30/2021
	Month 3	12/01/2021-12/31/2021
	Month 1	10/01/2021-10/31/2021
	Month 2	11/01/2021-11/30/2021
N	Month 3	12/01/2021-12/31/2021
	Year	
	Year	

Year

Year

Year

Year

Year

Year

Quarter

Quarter

Quarter

Year

Year

Year

Year



Demonstration			Age < 18 denominator
Demonstration denominator	Demonstration numerator or count	Demonstration rate/percentage	
	<i>EXAMPLE:</i> <i>100</i>		
	<i>EXAMPLE:</i> <i>100</i>		
	<i>EXAMPLE:</i> <i>100</i>		
	27425		
	27648		
	27839		

11069

10935

10869

7220

7126

7016

6628

6484

6588

111

103

110

1234

1164

1181

364

347

363

5833

5916

5904

#DIV/0!

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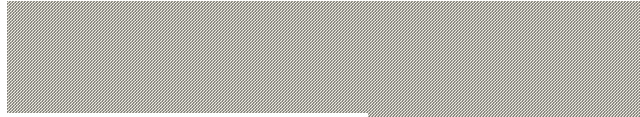
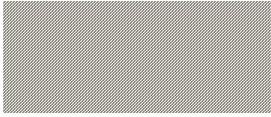
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426135	1683	3.949452638	211710
430935	1578	3.661805145	213168
435554	1510	3.466849116	214555
426135	793	1.860912622	211710
430935	729	1.691670438	213168
435554	761	1.747200118	214555

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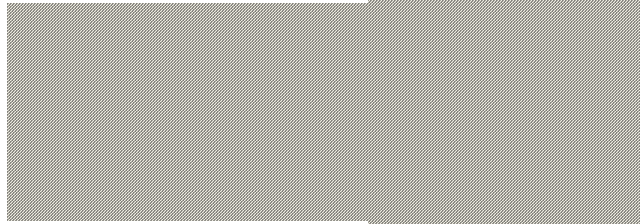
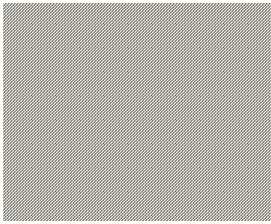
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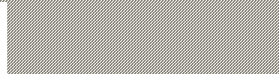
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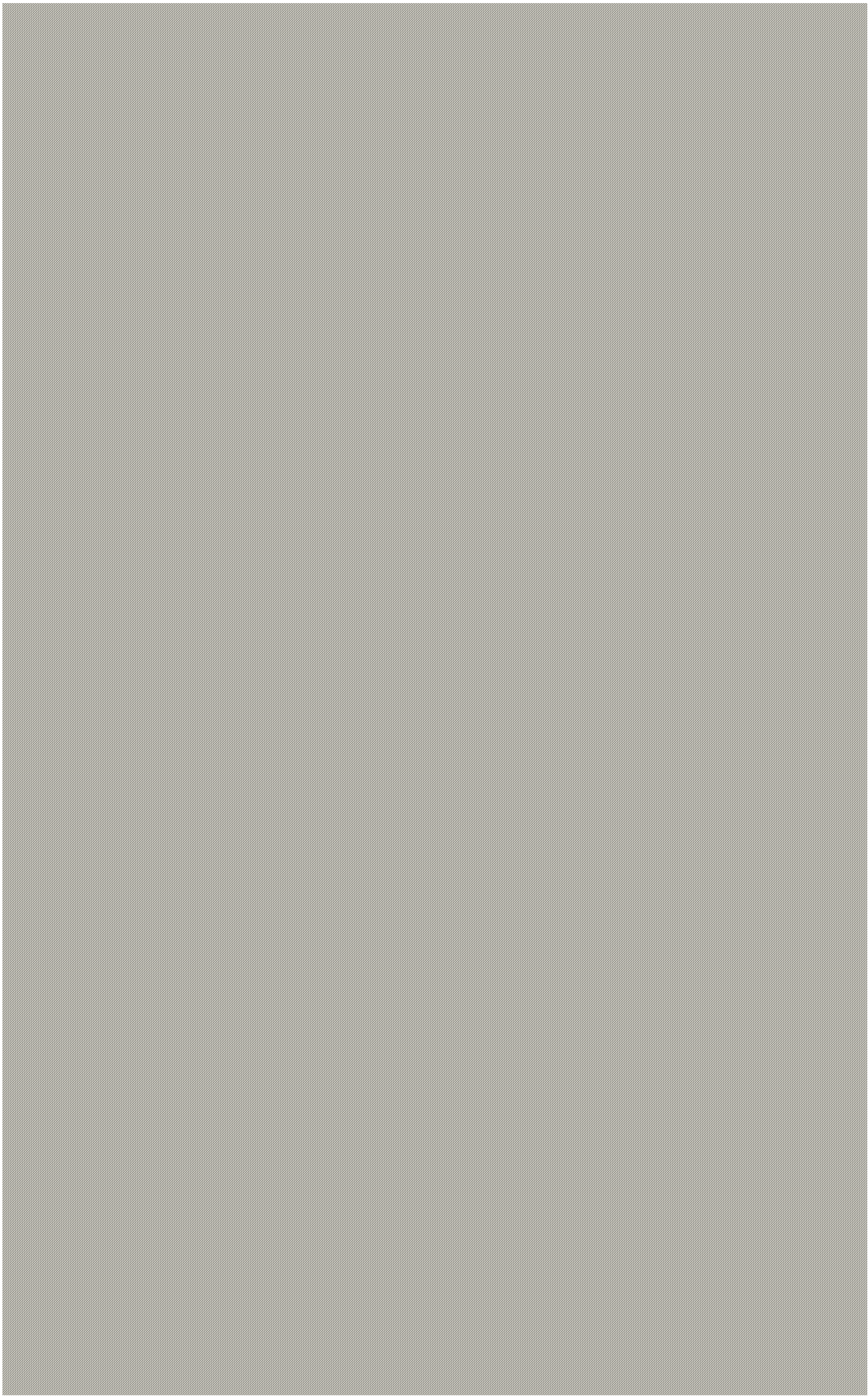


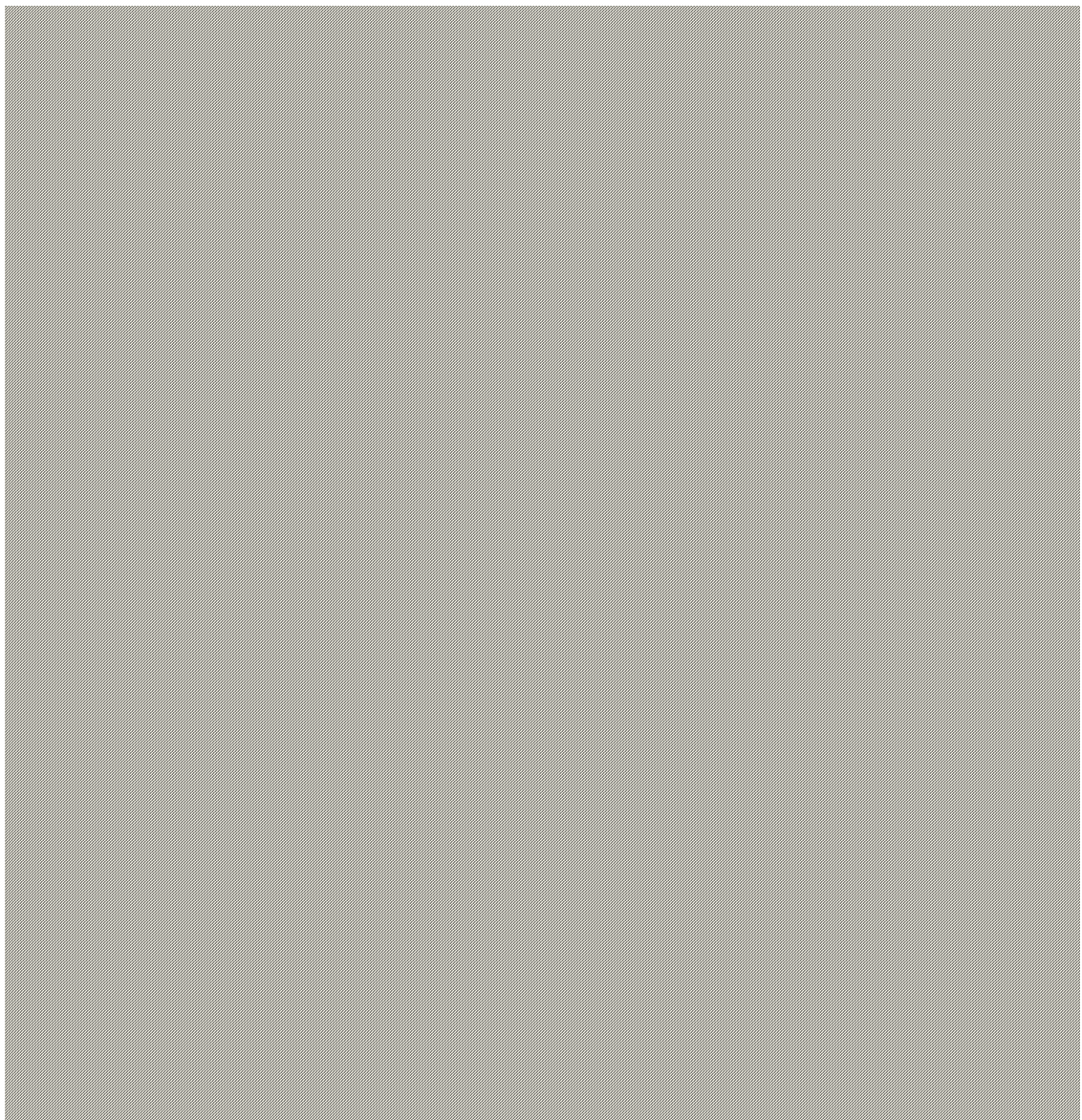
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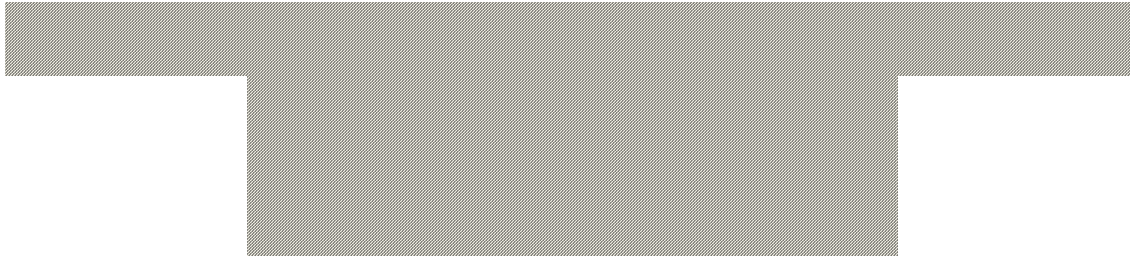
Age < 18		Age 18-64	
Age < 18 numerator or count	Age <18 rate/percentage	Age 18-64 denominator	Age 18-64 numerator or count
EXAMPLE:			EXAMPLE:
EXAMPLE:			EXAMPLE:
EXAMPLE:			EXAMPLE:
636			26152
651			26361
656			26528

203		10752
208		10622
193		10562
163		6962
154		6892
138		6795
128		6432
128		6293
114		6400
0		110
1		99
1		106
39		1188
42		1117
35		1143
0		361
0		343
0		360
14		5803
20		5882
28		5861





32	0.151150158	197309	1607
37	0.173572018	200519	1502
33	0.153806716	203581	1440
10	0.047234424	197309	757
11	0.051602492	200519	696
12	0.055929715	203581	715



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114

105

114

95

80

83

68

63

74

1

3

3

7

5

3

3

4


3

16


14

15





8.144585397	17116	44	2.570694087
7.490561992	17248	39	2.261131725
7.073351639	17418	37	2.124239293
3.836621746	17116	26	1.519046506
3.470992774	17248	22	1.275510204
3.512115571	17418	34	1.952003674



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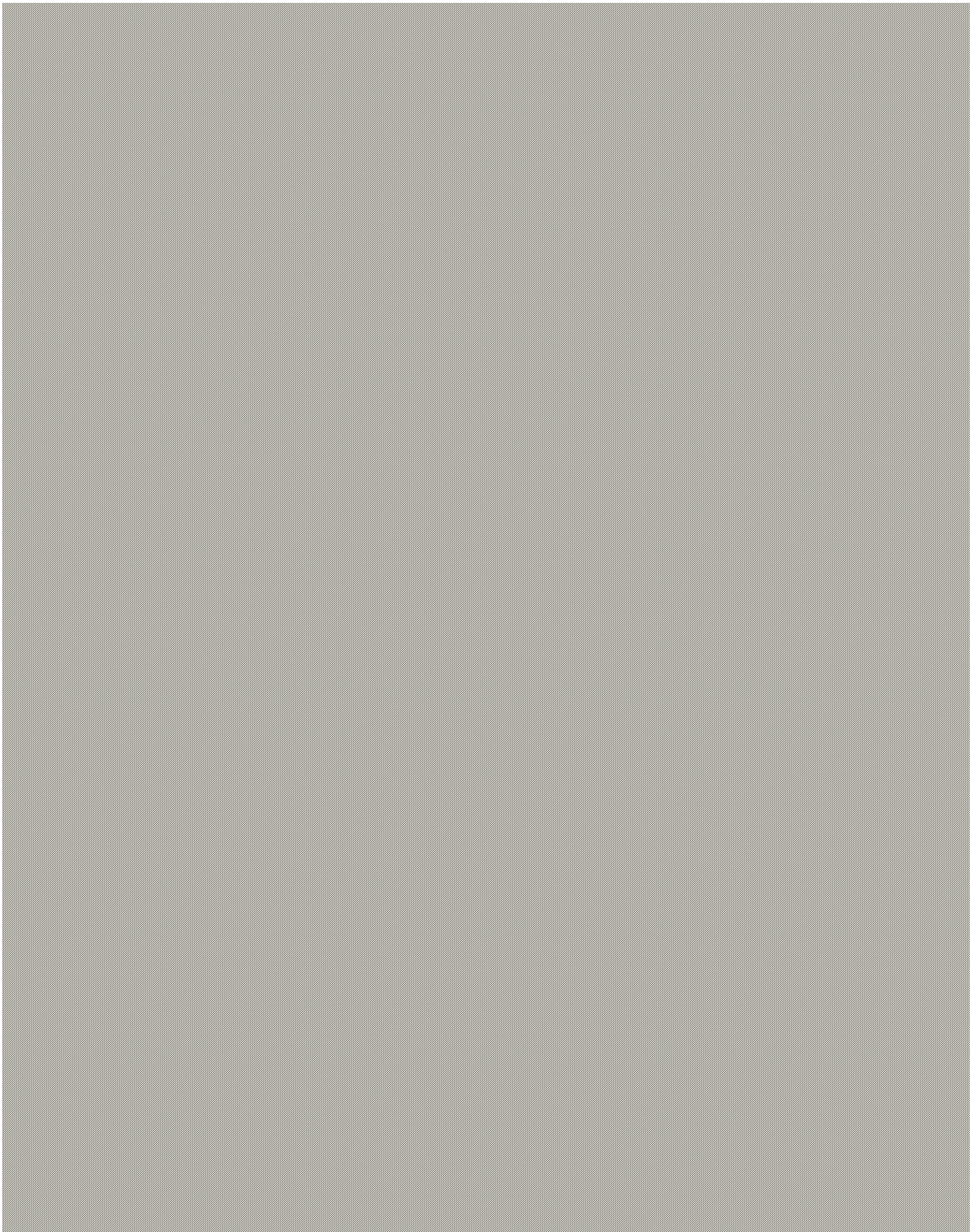
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Dual eligible (Medicare-Medicaid eligible)			Medicaid only	
Dual eligible (Medicare-Medicaid eligible) denominator	Dual eligible (Medicare-Medicaid eligible) numerator or count	Dual eligible (Medicare-Medicaid eligible) rate/percentage	Medicaid only denominator	Medicaid only numerator or count
	EXAMPLE:			EXAMPLE:
	EXAMPLE:			EXAMPLE:
	EXAMPLE:			EXAMPLE:
	2221			25204
	2200			25448
	2201			25638

469	10600
437	10498
439	10430
291	6929
297	6829
258	6758
300	6328
299	6185
292	6296
12	99
17	86
21	89
33	1201
25	1139
31	1150
17	347
15	332
18	345
35	5798
34	5882
34	5870







ly	Pregnant		
Medicaid only rate/percentage	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage
		EXAMPLE:	
		EXAMPLE:	
		EXAMPLE:	
		565	
		548	
		540	

263

263

234

155

141

128

159

154

147

1

0

0

11

11

17

6

3

7

166

167

147







Not pregnant			Criminally inv	
Not pregnant denominator	Not pregnant numerator or count	Not pregnant rate/percentage	Criminally involved denominator	Criminally involved numerator or count
	EXAMPLE:			EXAMPLE:
	EXAMPLE:			EXAMPLE:
	EXAMPLE:			EXAMPLE:
	26860			
	27100			
	27299			

10806

10672

10635

7065

6985

6888

6469

6330

6441

110

103

110

1223

1153

1164

358

344

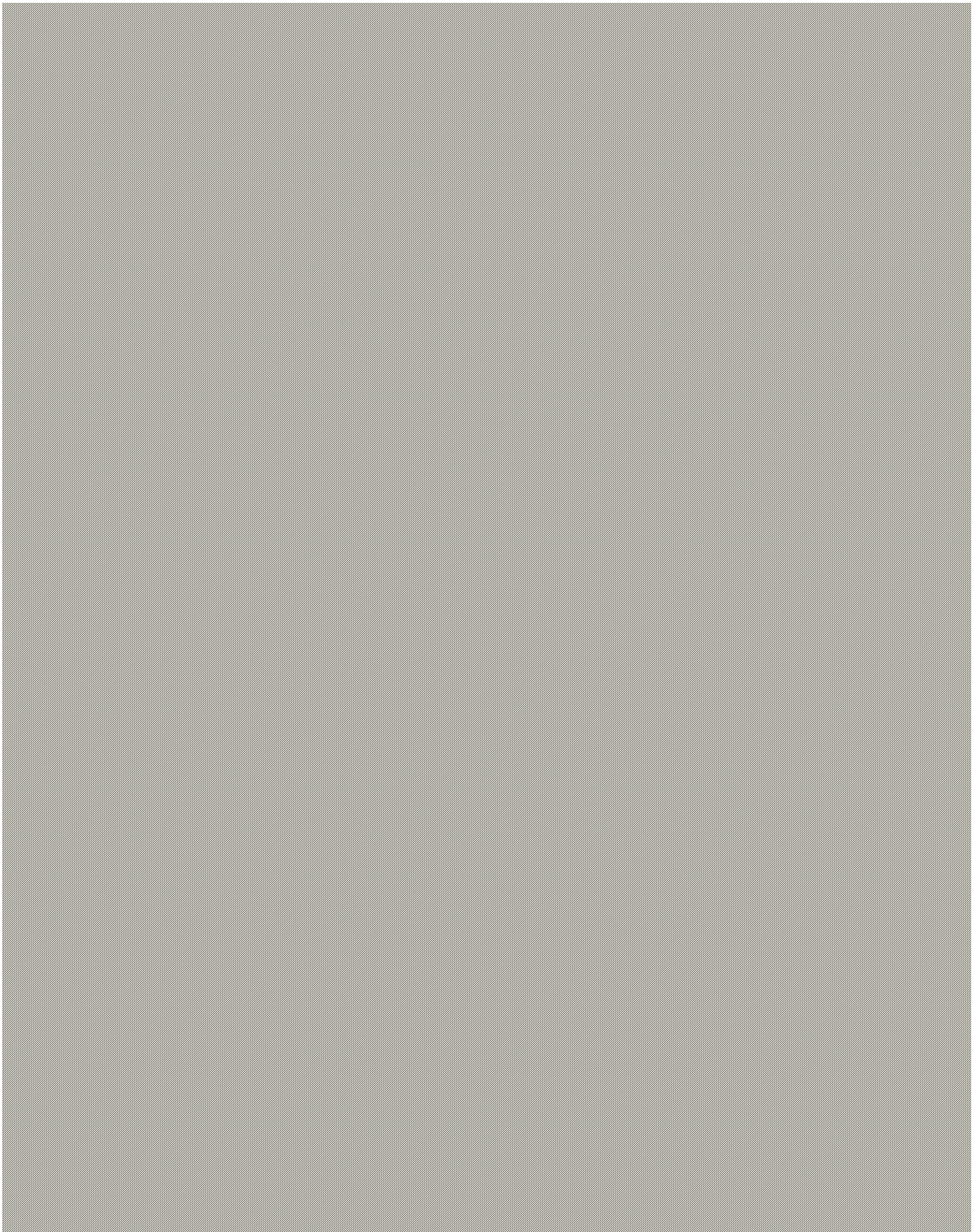
356

5667

5749

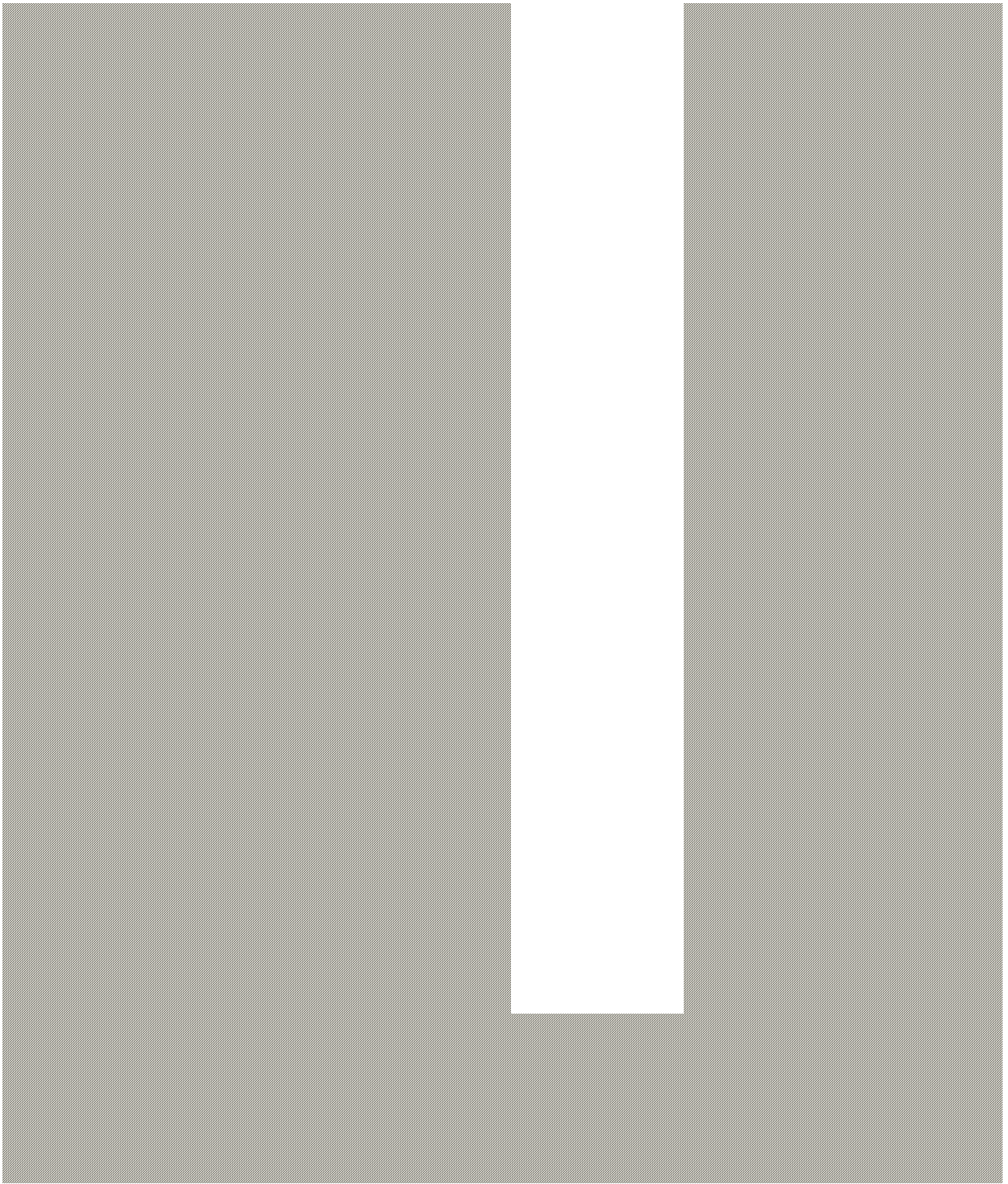
5757

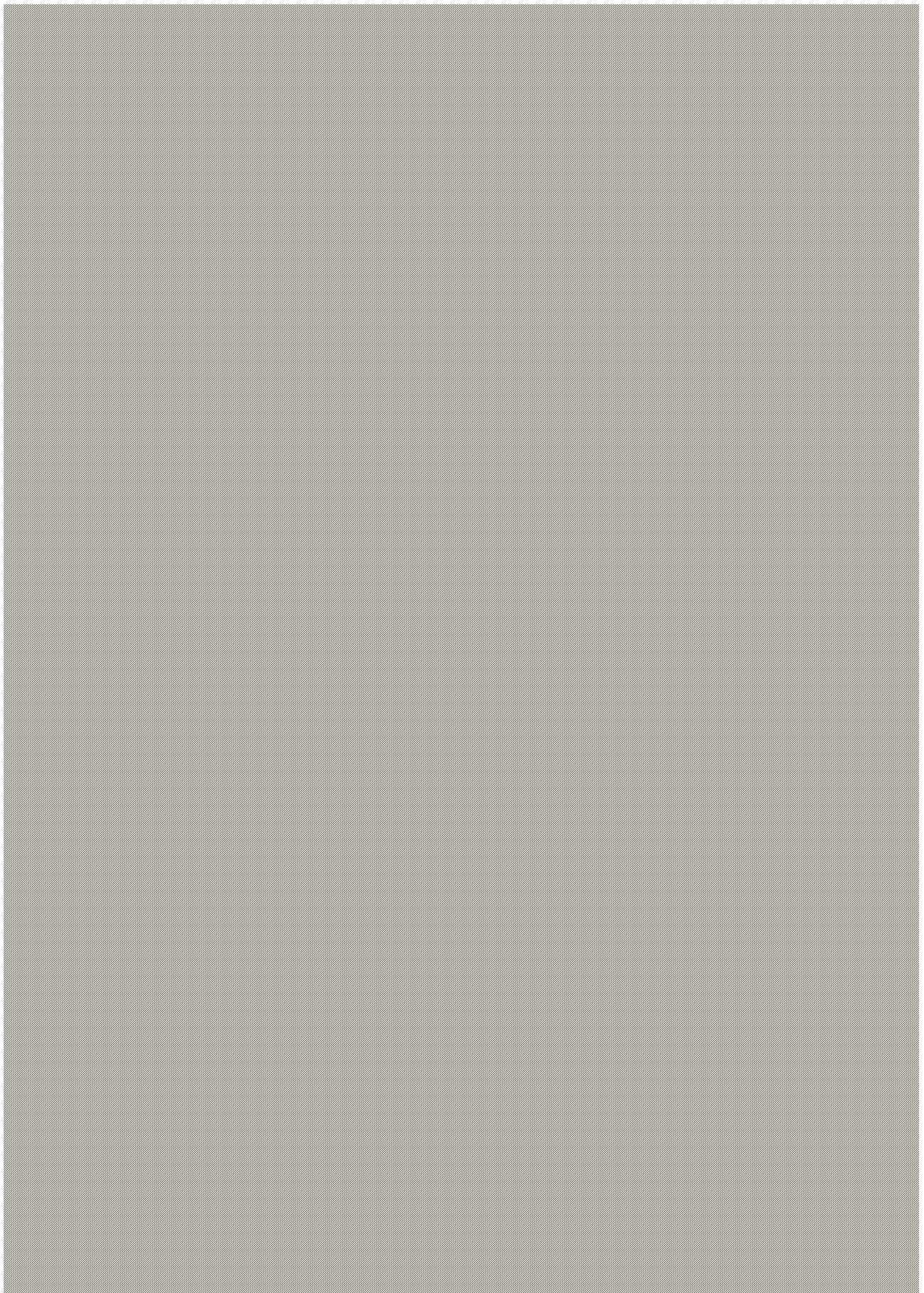






Involved		Not criminally involved	
Criminally involved rate/percentage	Not criminally involved denominator	Not criminally involved numerator or count	Not criminally involved rate/percentage
		EXAMPLE:	
		EXAMPLE:	
		EXAMPLE:	

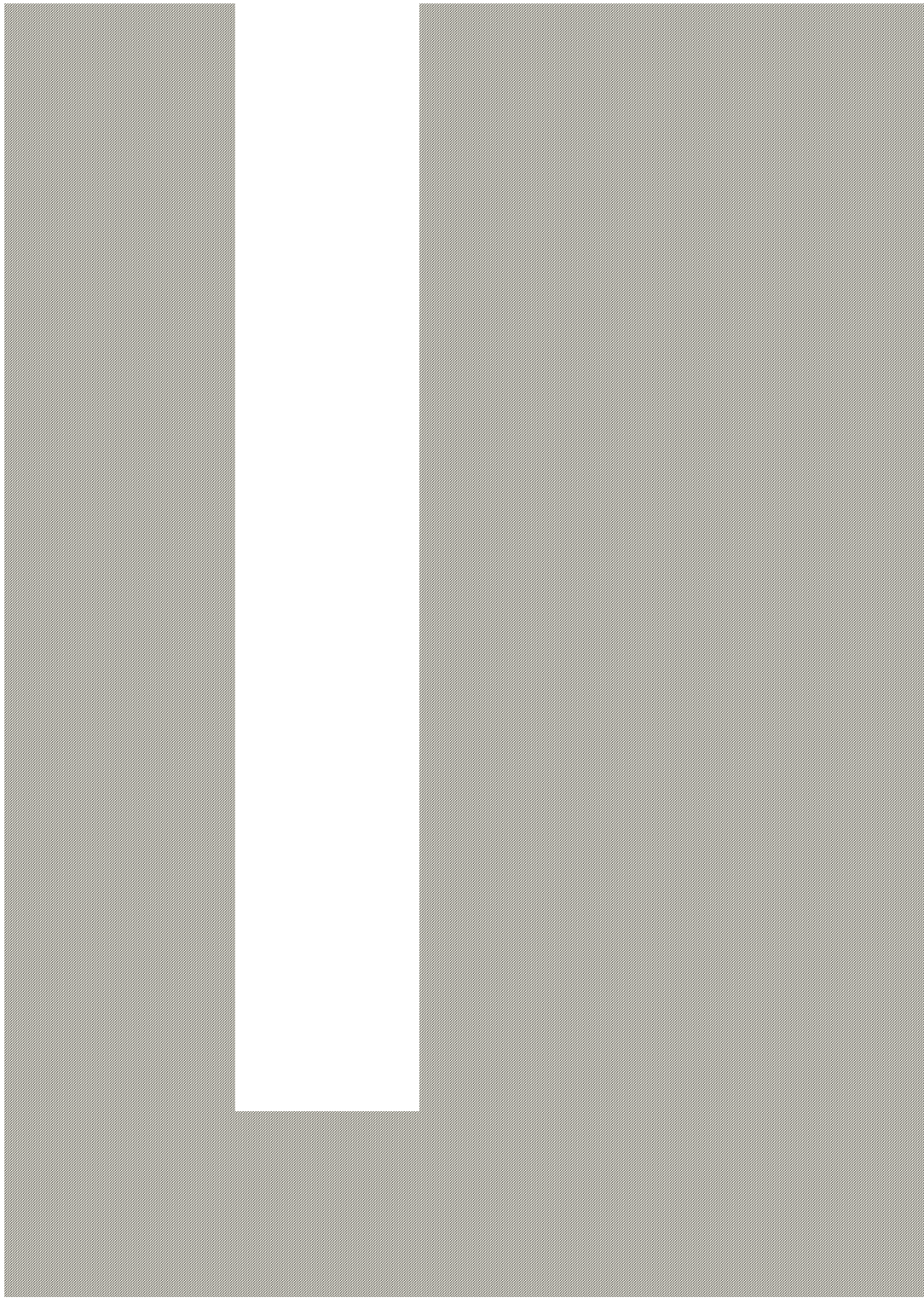


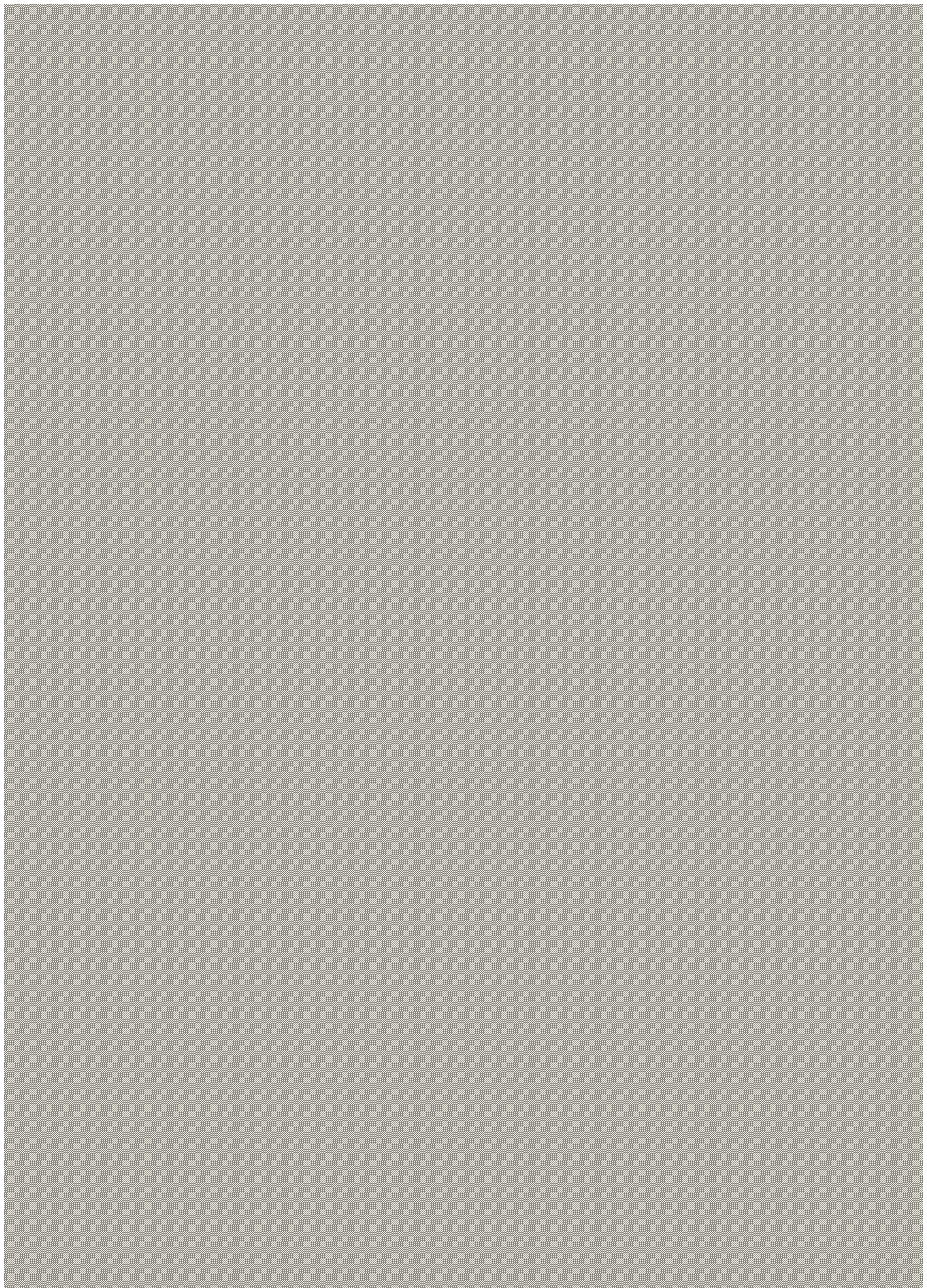






OUD subpopulation			State-specific subpop	
OUD subpopulation denominator	OUD subpopulation numerator or count	OUD subpopulation rate/percentage	State-specific subpopulation 1 denominator	State-specific subpopulation 1 numerator or count
				EXAMPLE:
				EXAMPLE:
				EXAMPLE:







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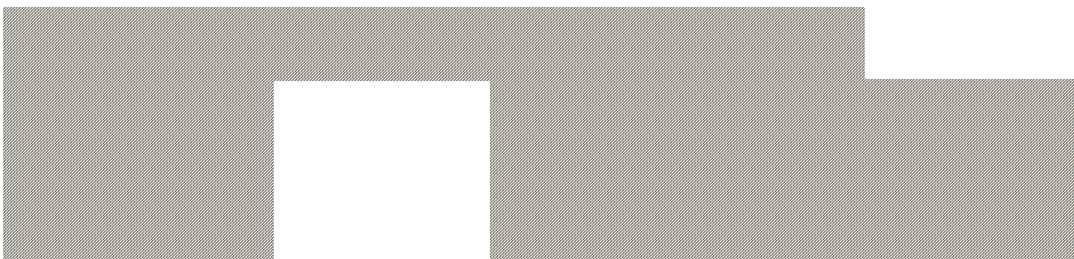
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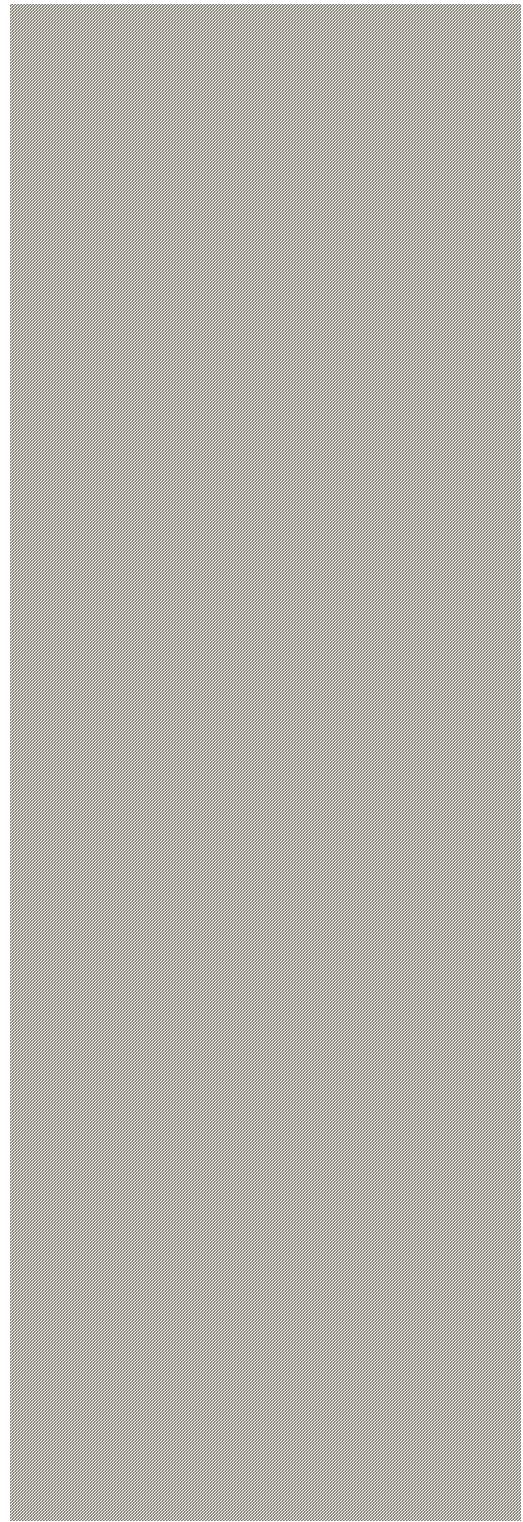
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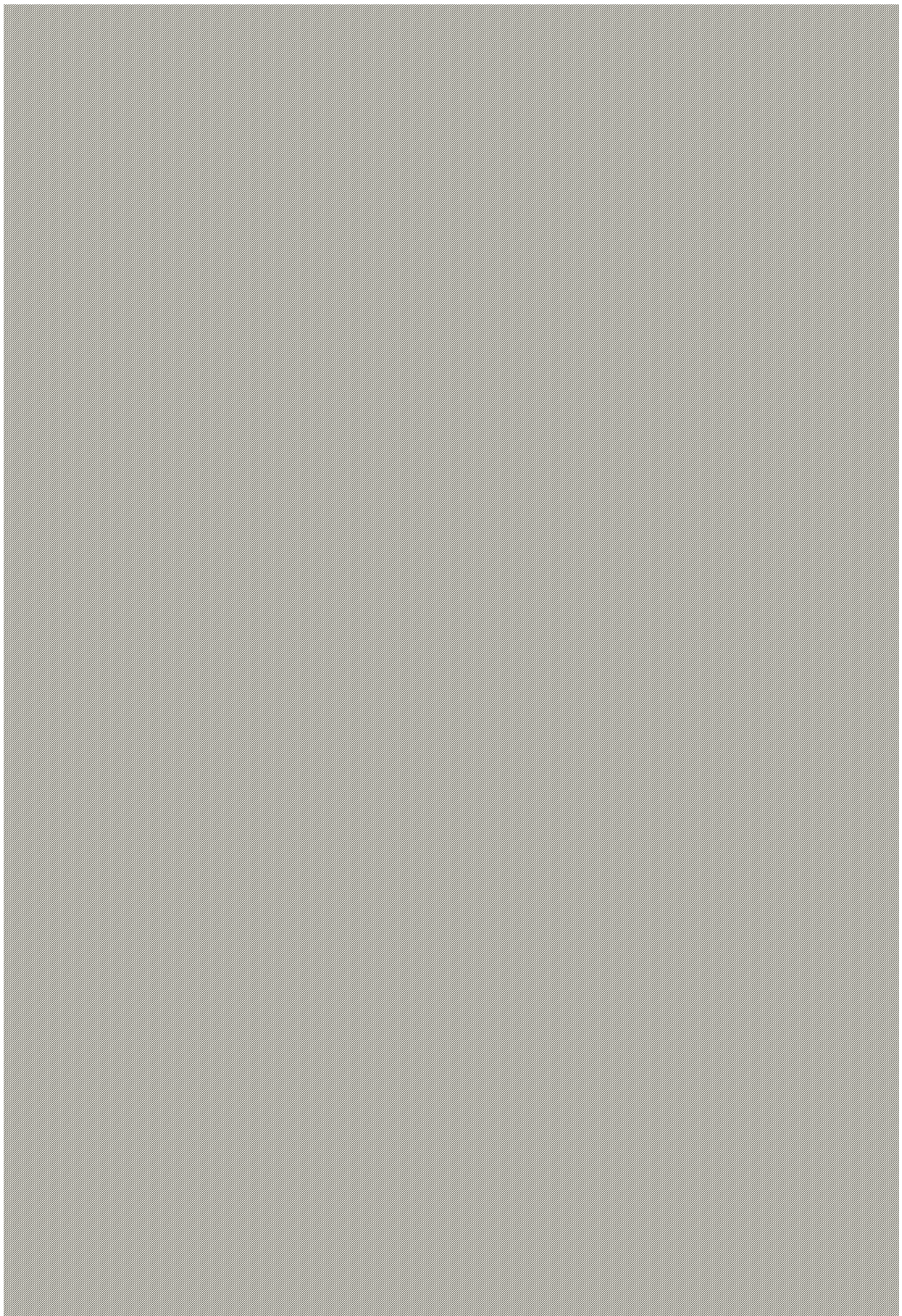


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Population 1 ^b	State-specific subpopulation 2 ^b		State-specific subpopulation 3 ^b
State-specific subpopulation 1 rate/percentage	State-specific subpopulation 2 denominator	State-specific subpopulation 2 numerator or count	State-specific subpopulation 3 denominator
		EXAMPLE:	
		EXAMPLE:	
		EXAMPLE:	







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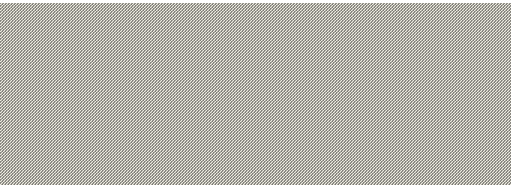
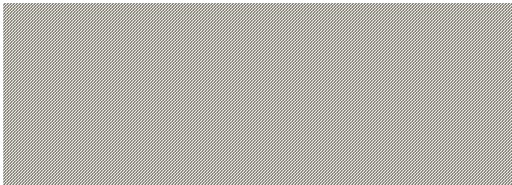
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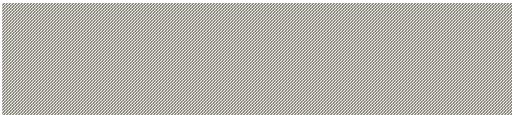
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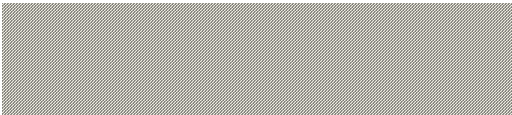
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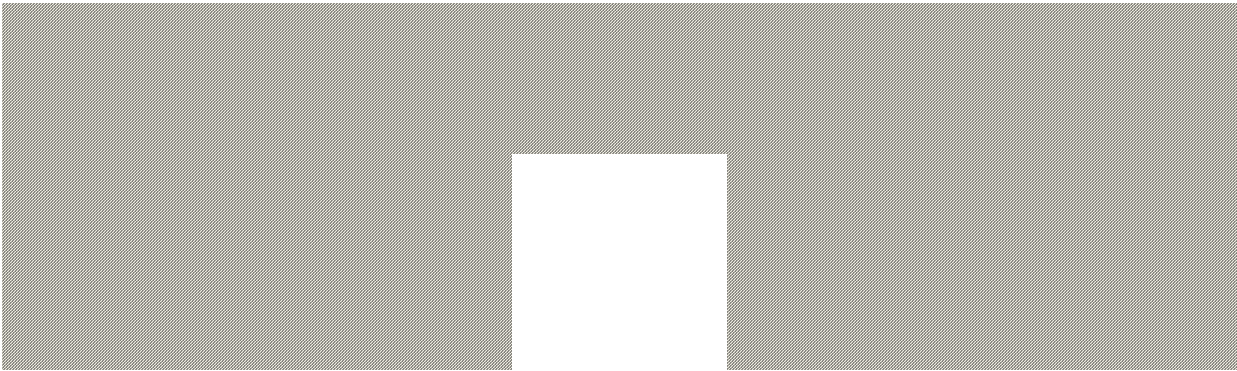
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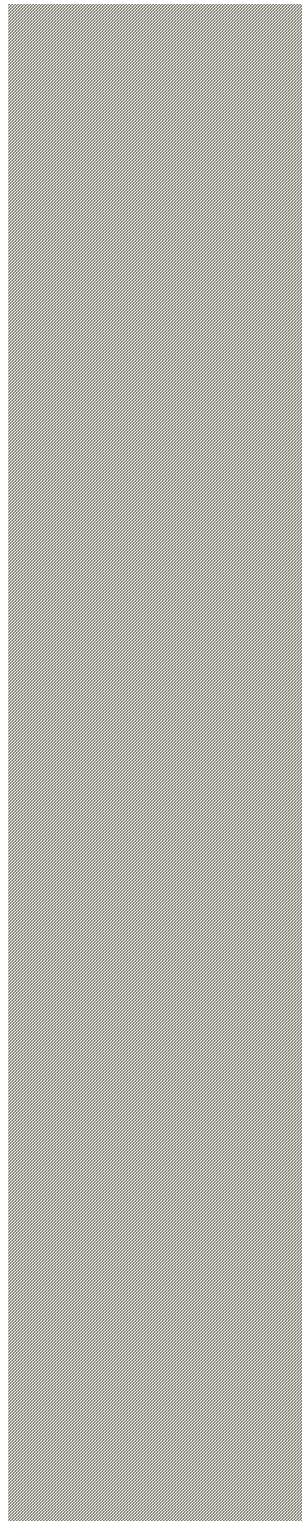


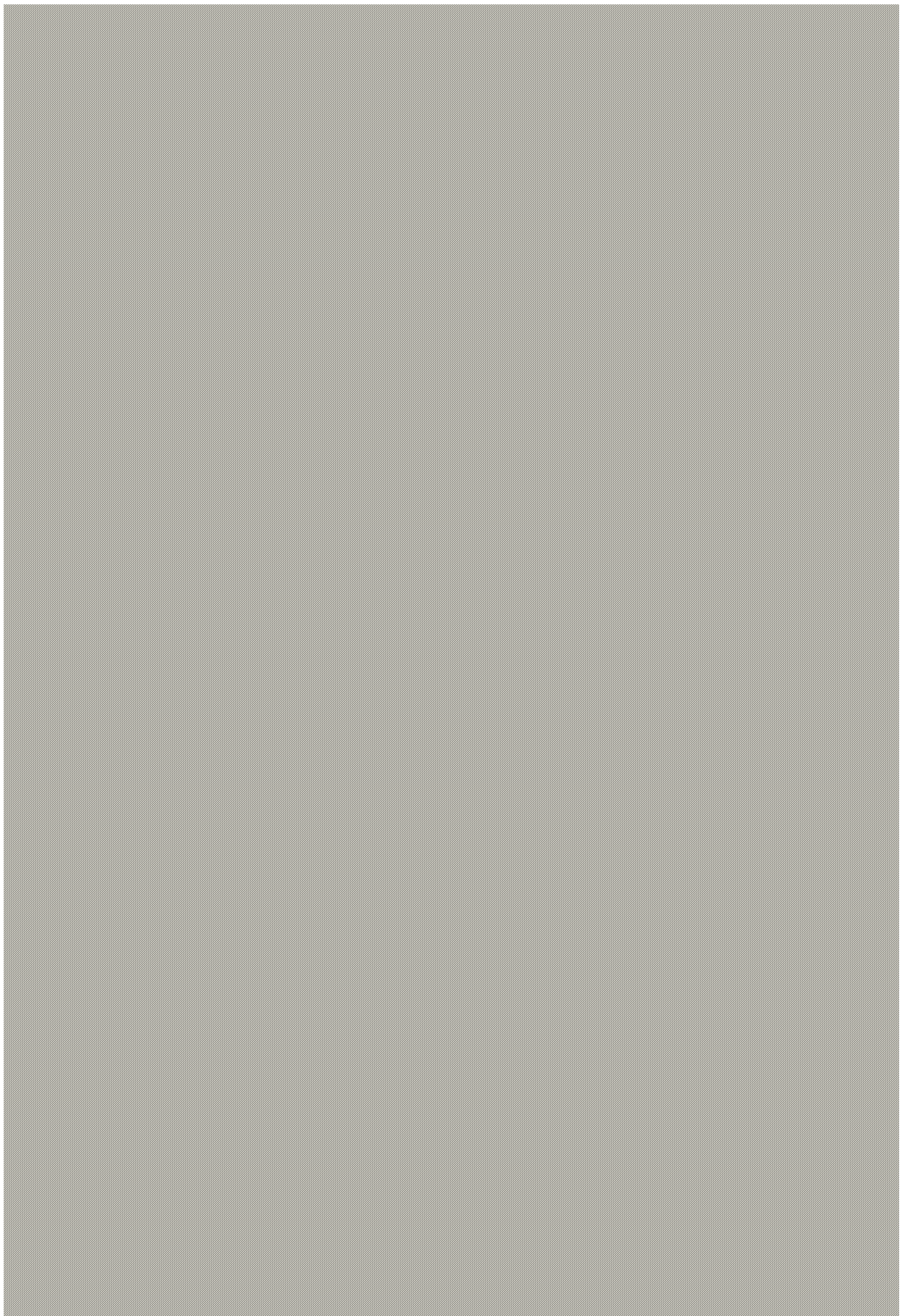
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State-specific subpopulation 3 ^b		State-specific subpopulation 4 ^b		
State-specific subpopulation 3 numerator or count	State-specific subpopulation 3 rate/percentage	State-specific subpopulation 4 denominator	State-specific subpopulation 4 numerator or count	State-specific subpopulation 4 rate/percentage
EXAMPLE:			EXAMPLE:	
EXAMPLE:			EXAMPLE:	
EXAMPLE:			EXAMPLE:	







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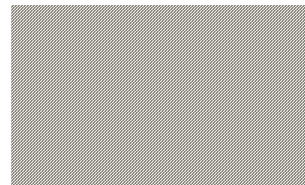
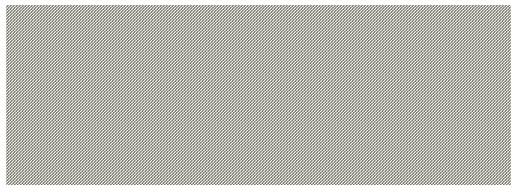
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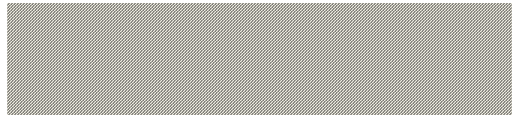
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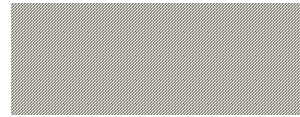
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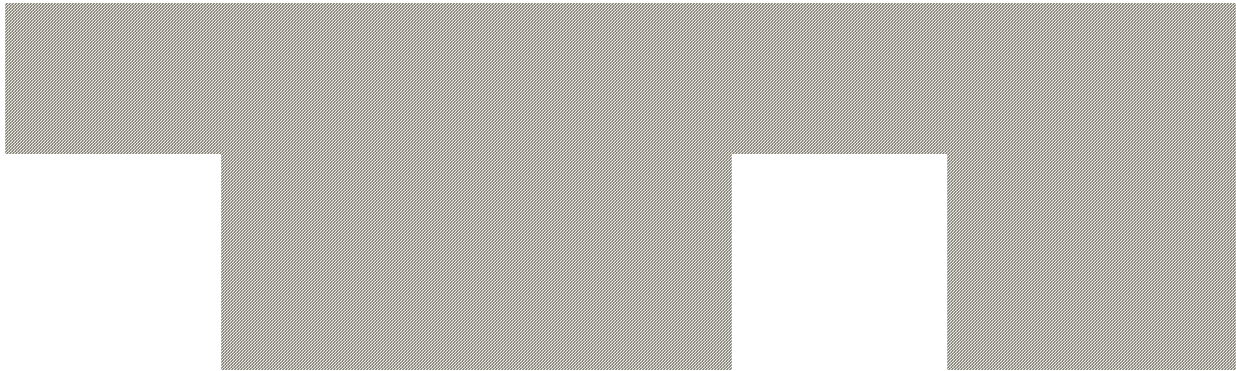
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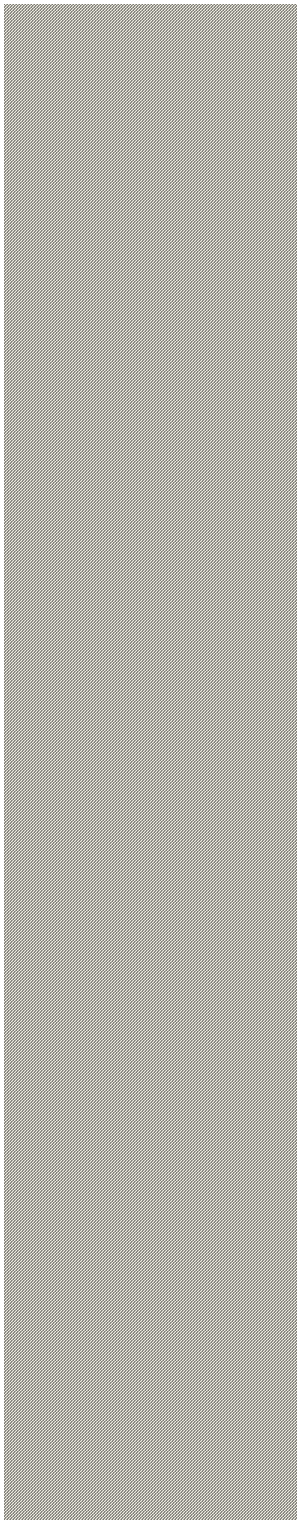
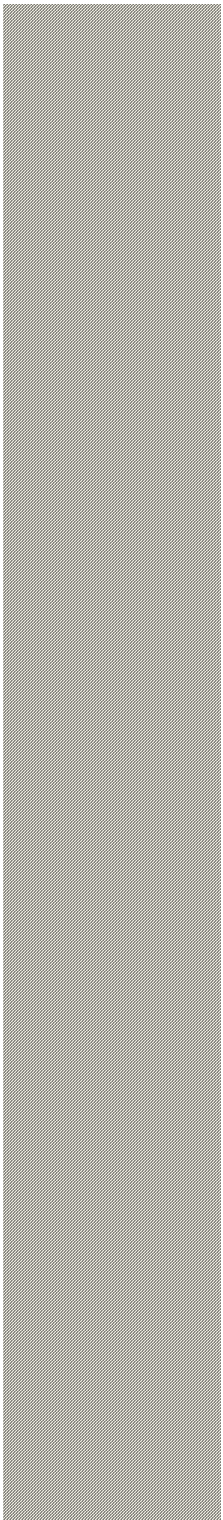


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State-specific subpopulation 5 ^b		
State-specific subpopulation 5 denominator	State-specific subpopulation 5 numerator or count	State-specific subpopulation 5 rate/percentage
	EXAMPLE:	
	EXAMPLE:	
	EXAMPLE:	







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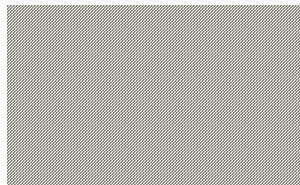
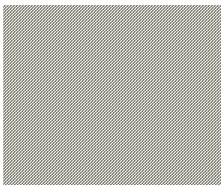
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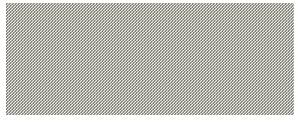
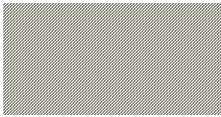
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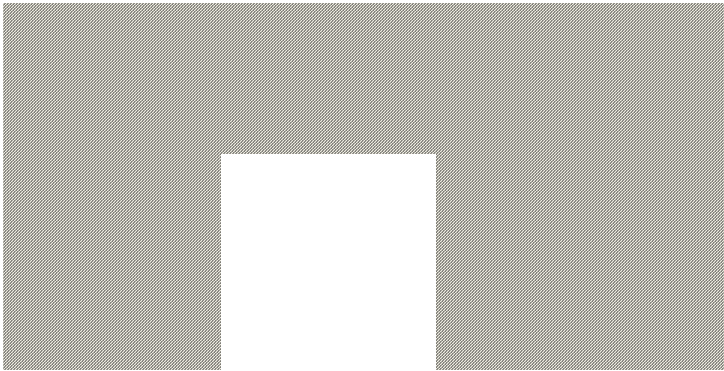


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