

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]<sup>f</sup></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]<sup>c,d</sup></p>

17(2)	Follow-up after Emergency Department Visit for Mental Illness (FUM-AD) [NCQA; NQF #3489; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>c,e</sup>
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] <sup>c</sup>
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, &amp; 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

<sup>a</sup> Report metrics that are one annual value for a demonstration year.

<sup>b</sup> Enter any state-specific subpopulations that will be reported :

<sup>c</sup> Rates for these metrics reflect Uncertified, Unaudited HEDIS

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

<sup>e</sup> 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  
DY7

07/01/2022-06/30/2023

Q1

01/01/2023-03/31/2023

#### 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  $\geq 18$  years of age who received prescriptions for opioids from  $\geq 4$  prescribers AND  $\geq 4$  pharmacies within  $\leq 180$  days.

The percentage of individuals  $\geq 18$  years of age who received prescriptions for opioids with an average daily dosage of  $\geq 90$  morphine milligram equivalents (MME) AND who received prescriptions for opioids from  $\geq 4$  prescribers AND  $\geq 4$  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>


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









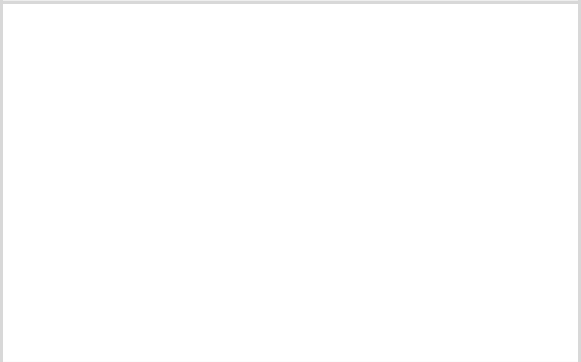
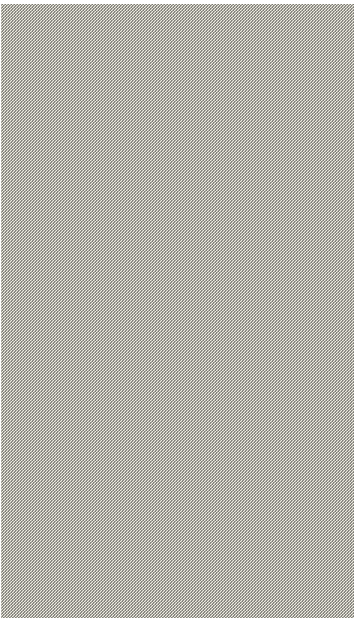
Reporting issue (Y/N) (further describe in SUD reporting issues tab)	Measurement period (month, quarter, year <sup>a</sup> )	Dates covered by measurement period (MM/DD/YYYY- MM/DD/YYYY)
EXAMPLE: Y	EXAMPLE: Month 1	EXAMPLE: 07/01/2018-7/31/2018
	EXAMPLE: Month 2	EXAMPLE: 08/01/2018-08/31/2018
	EXAMPLE: Month 3	EXAMPLE: 09/01/2018-09/30/2018
	Month 1	
	Month 2	
	Month 3	
	Month 1	
	Month 2	
	Month 3	
N	Month 1	1/1/2023-1/31/2023
	Month 2	2/1/2023-2/28/2023
	Month 3	3/1/2023-3/31/2023
	Year	
	Year	







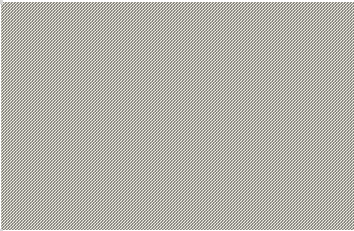
Year



Year



Year



	Year	
	Year	
	Year	
	Year	
	Year	
	Year	
	Month 1	1/1/2023-1/31/2023
N	Month 2	2/1/2023-2/28/2023
	Month 3	3/1/2023-3/31/2023
	Month 1	1/1/2023-1/31/2023
N	Month 2	2/1/2023-2/28/2023
	Month 3	3/1/2023-3/31/2023
N	Year	7/01/2021-6/30/2022
	Year	

	Year	
	Year	
	Year	
	Year	
	Year	
	Quarter	
	Quarter	
	Quarter	
	Year	
Y	Year	01/01/2022-12/31/2022
N	Year	01/01/2022-12/31/2022
Y	Year	01/01/2022-12/31/2022



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>		
	30811		
	30844		
	30591		

12376

11658

11232

60

65

59

7145

6618

5849

153

156

127

1166

1015

959

431

311

272

6297

5968

6251

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

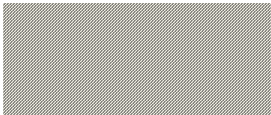
#DIV/0!

#DIV/0!

487322	1536	3.151920086	228662
489852	1371	2.798804537	229398
493687	1194	2.418536441	230760
487322	950	1.949429741	228662
489852	779	1.590276247	229398
493687	657	1.330802715	230760
9031	1581	0.17506367	



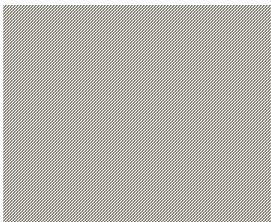
#DIV/0!



#DIV/0!

#DIV/0!

#DIV/0!



#DIV/0!

114

11

11

0

0





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:
648			29256
648			29303
634			29074

158

11947

149

11302

135

10915

1

58

0

64

2

57

90

6919

83

6444

80

5690

0

151

3

151

2

121

12

1148

12

997

9

940

0

431

0

311

0

269

14

6252

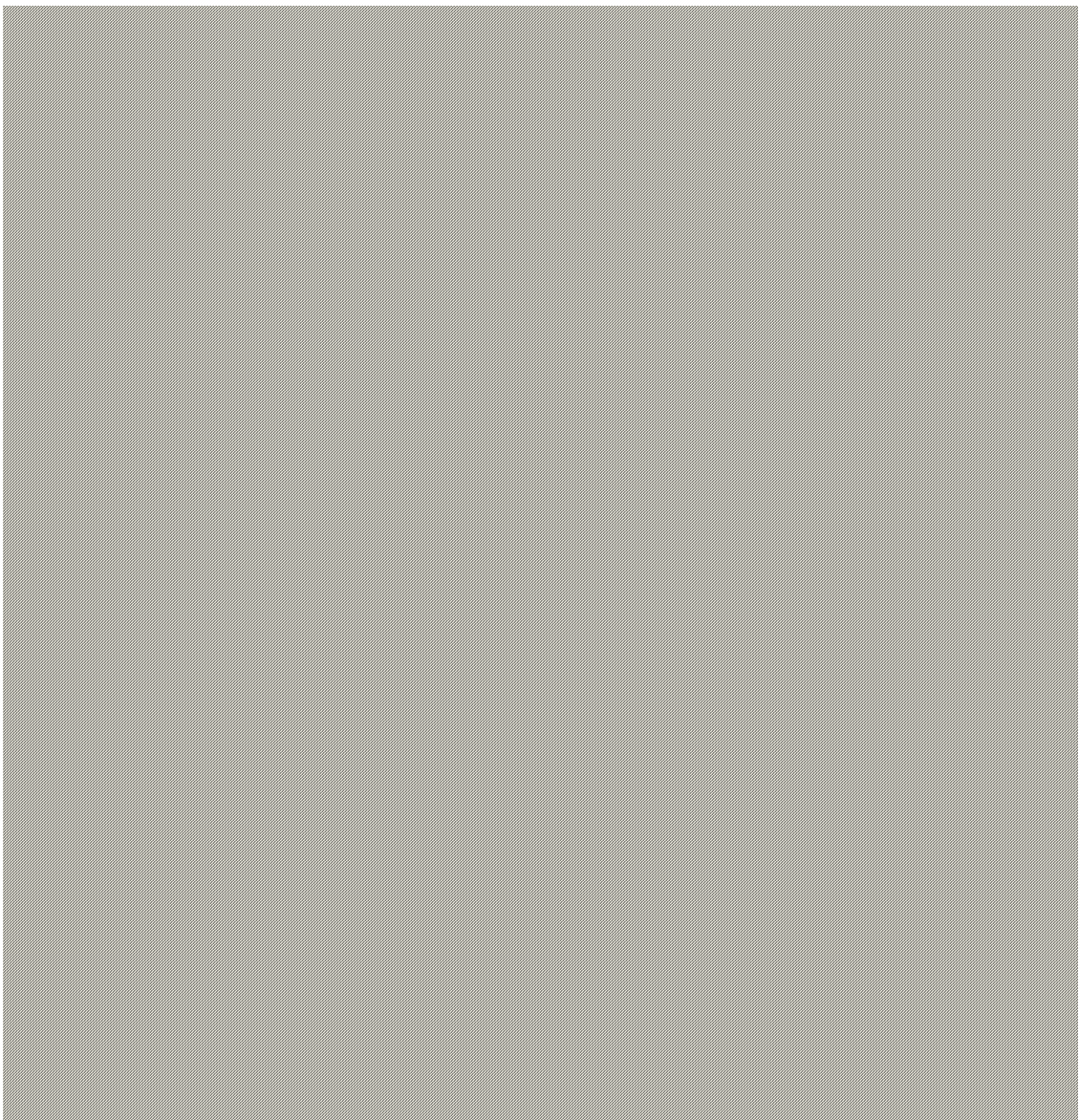
6

5939

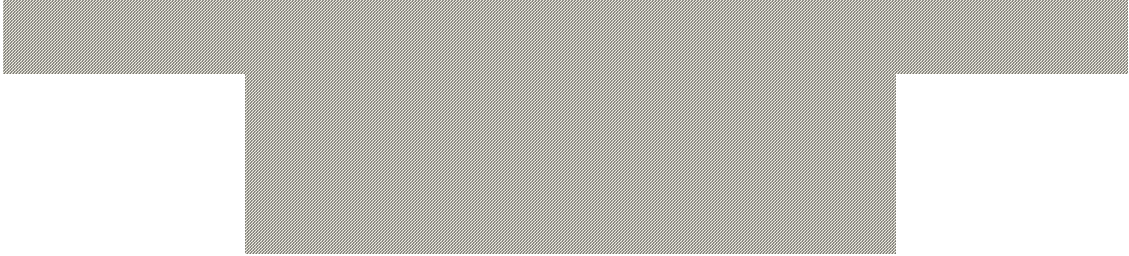
12

6226





27	0.118078212	239212	1473
32	0.139495549	240960	1313
22	0.095337147	243423	1153
9	0.039359404	239212	846
9	0.039233123	240960	682
9	0.03900156	243423	557



#DIV/0!







4	Age 65+		
	Age 18-64 rate/percentage	Age 65+ denominator	Age 65+ numerator or count
			Age 65+ rate/percentage
		EXAMPLE:	
		EXAMPLE:	
		EXAMPLE:	
		907	
		893	
		883	

271

207

182

1

1

0

136

91

79

2

2

4

6

6

10

0

0

3

31

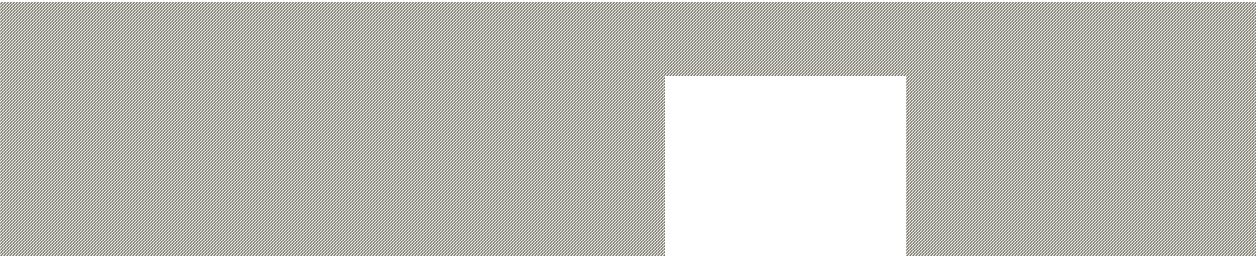
23

13





6.15771784	19448	36	1.851090086
5.449037185	19494	26	1.333743716
4.736610756	19504	19	0.974159147
3.536611876	19448	95	4.884821061
2.830345286	19494	88	4.5142095
2.288197911	19504	91	4.665709598



#DIV/0!

#DIV/0!





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:
	2565			28246
	2508			28336
	2451			28140

694

11682

570

11088

509

10723

2

58

4

61

1

58

422

6723

360

6258

302

5547

21

132

15

141

16

111

18

1148

17

998

22

937

5

426

7

304

6

266

59

6238

36

5932

23

6228











	Pregnant		
Medicaid only rate/percentage	Pregnant denominator	Pregnant numerator or count	Pregnant rate/percentage
		EXAMPLE:	
		EXAMPLE:	
		EXAMPLE:	
		487	
		489	
		479	

218

212

180

1

2

2

125

128

100

1

0

0

3

5

3

2

2

2

122

125

117











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:
	30324			
	30355			
	30112			

12158

11446

11052

59

63

57

7020

6490

5749

152

156

127

1163

1010

956

429

309

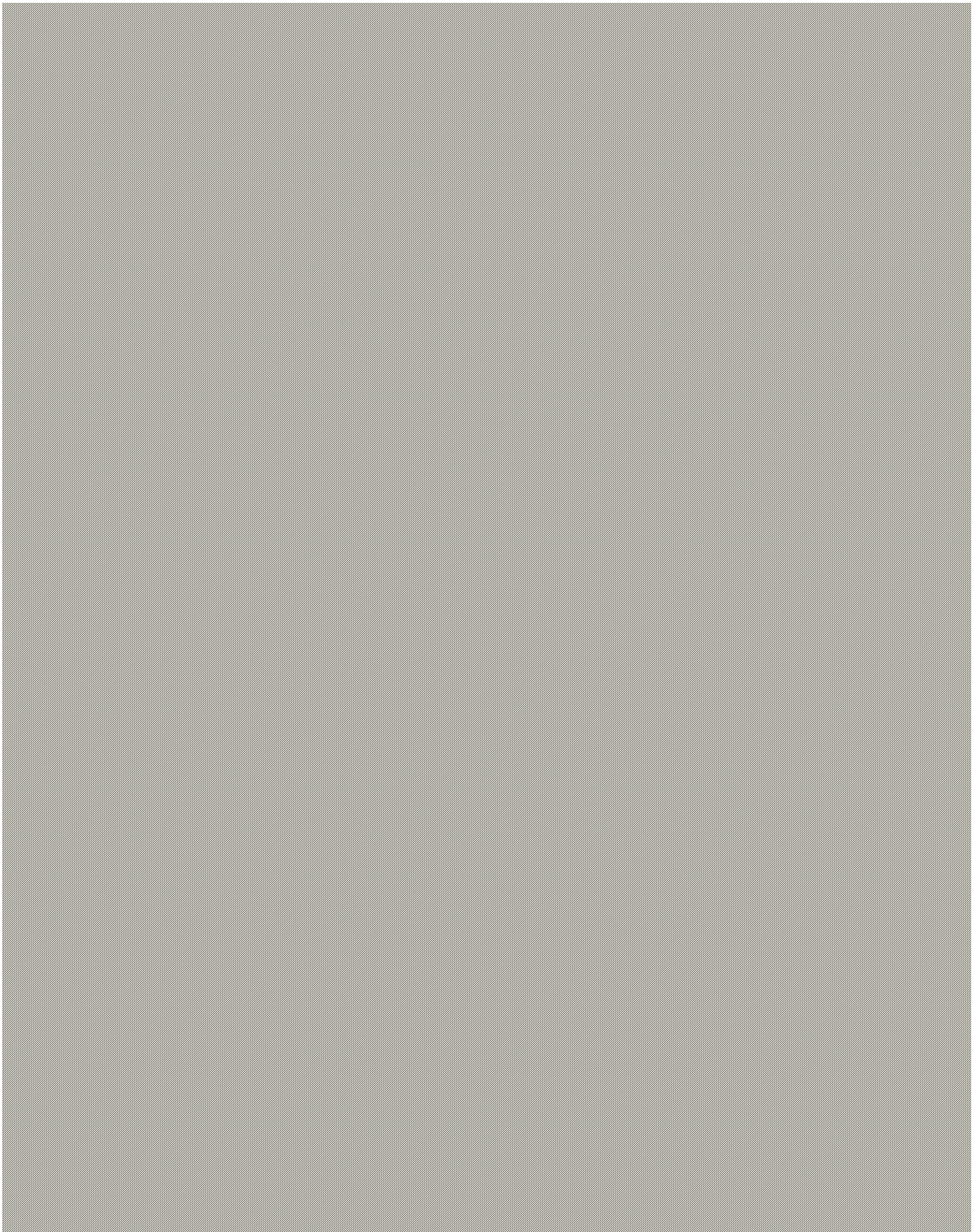
270

6175

5843

6134



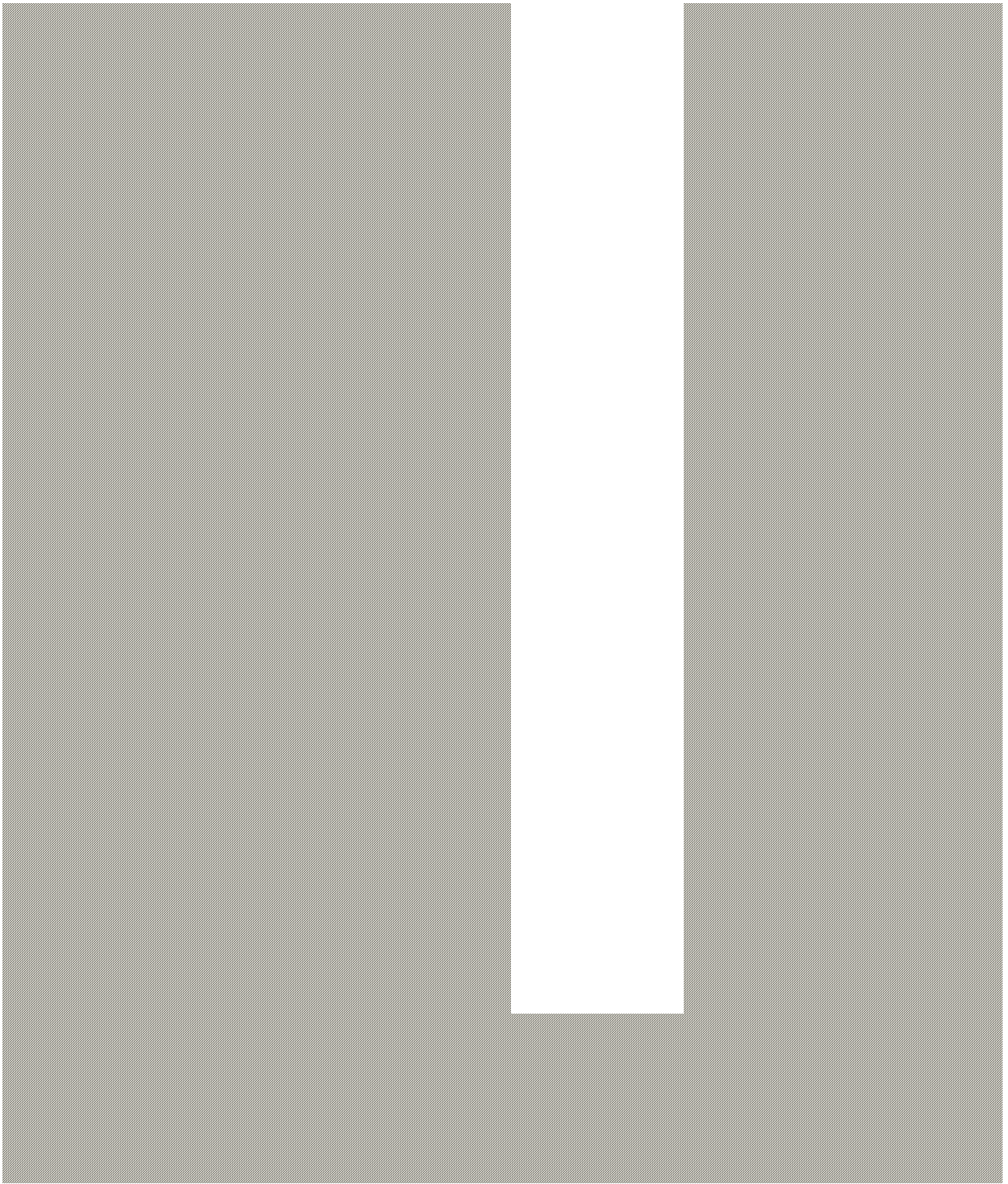








Involved	Not criminally involved		
Criminally involved rate/percentage	Not criminally involved denominator	Not criminally involved numerator or count	Not criminally involved rate/percentage
		EXAMPLE:	
		EXAMPLE:	
		EXAMPLE:	







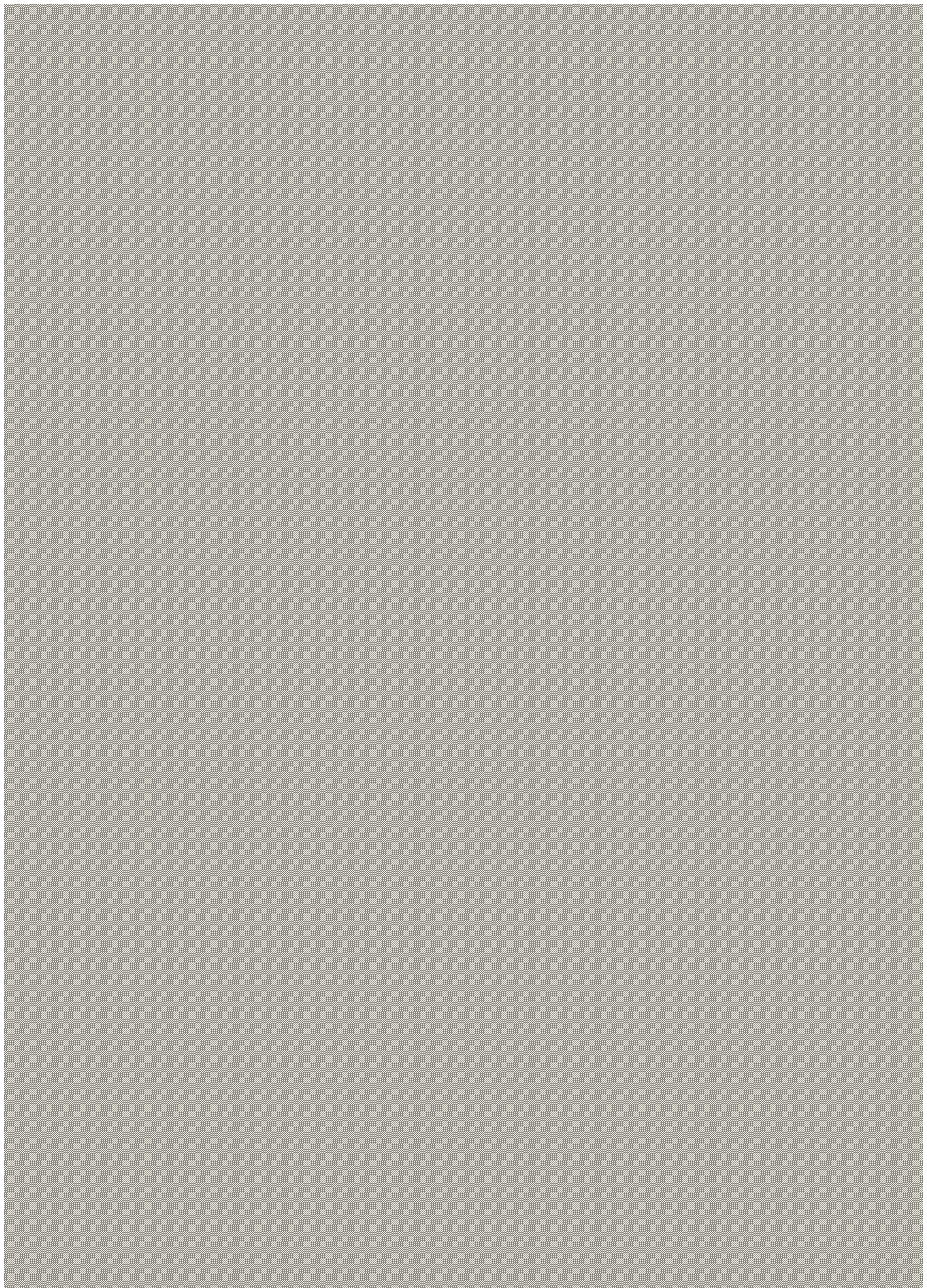














#DIV/0!

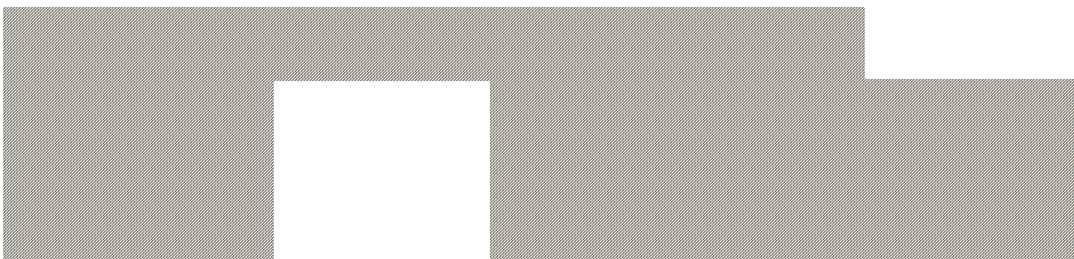
#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!



#DIV/0!

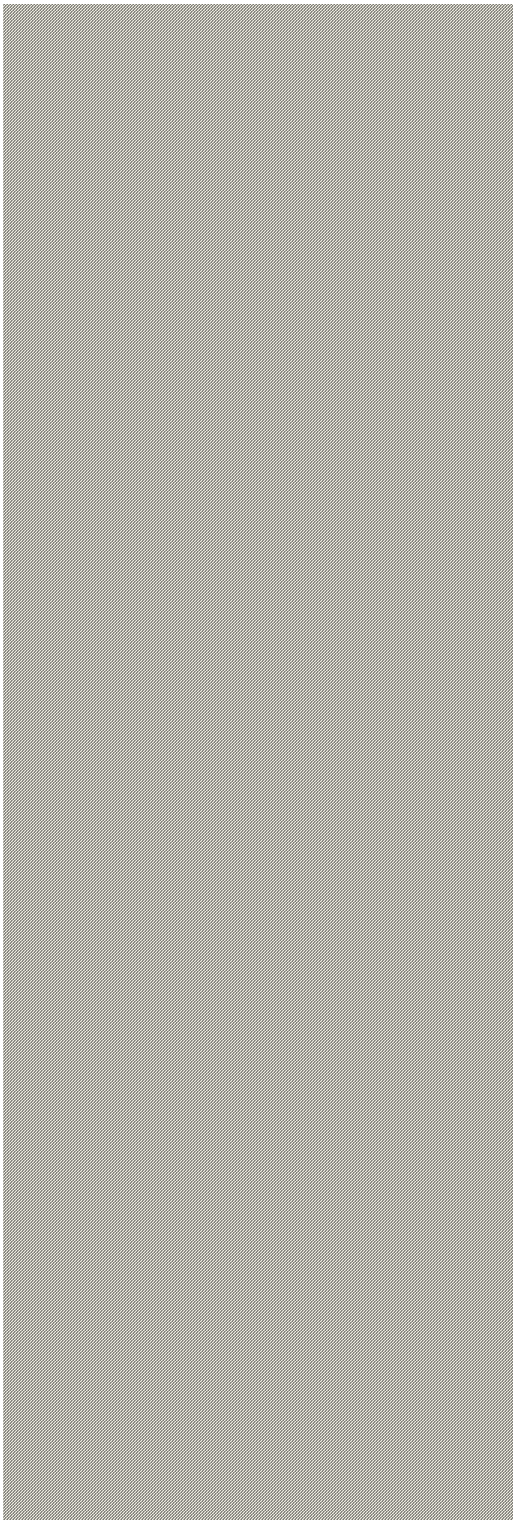


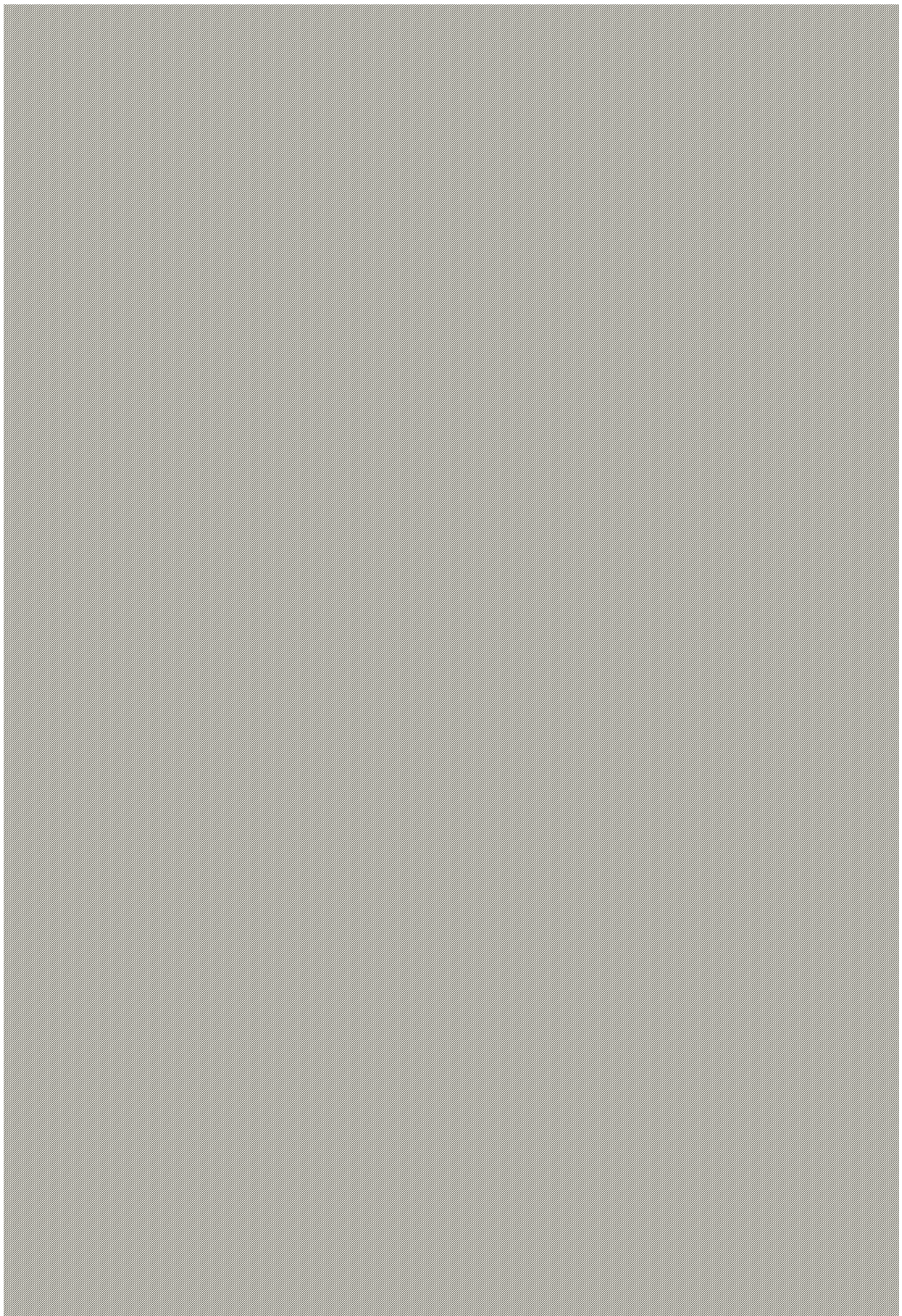
#DIV/0!





Population 1 <sup>b</sup>	State-specific subpopulation 2 <sup>b</sup>		State-specific subpopulation 3 <sup>b</sup>
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:	







#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

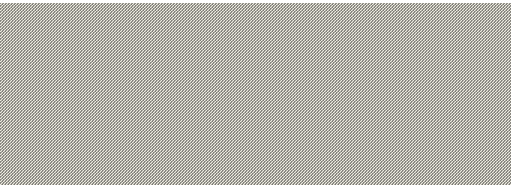
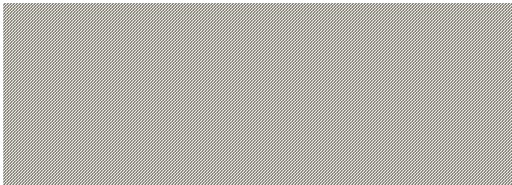
#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

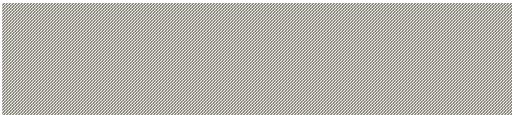
#DIV/0!





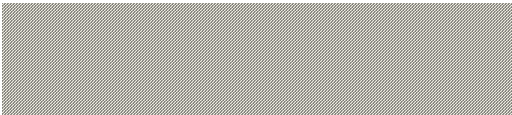
#DIV/0!

#DIV/0!



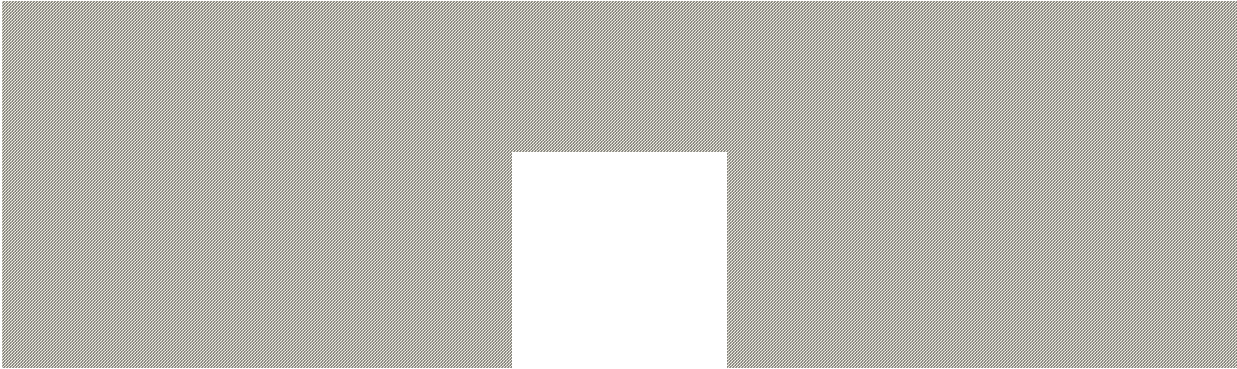
#DIV/0!

#DIV/0!



#DIV/0!

#DIV/0!



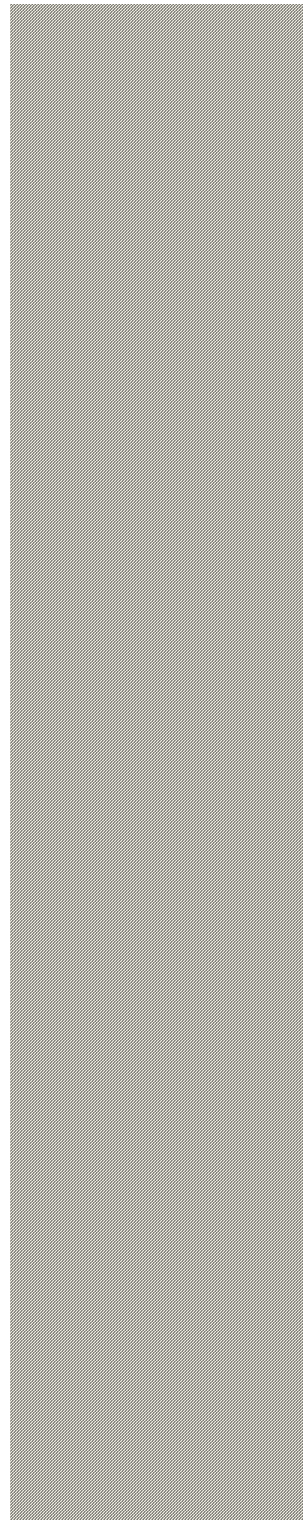
#DIV/0!

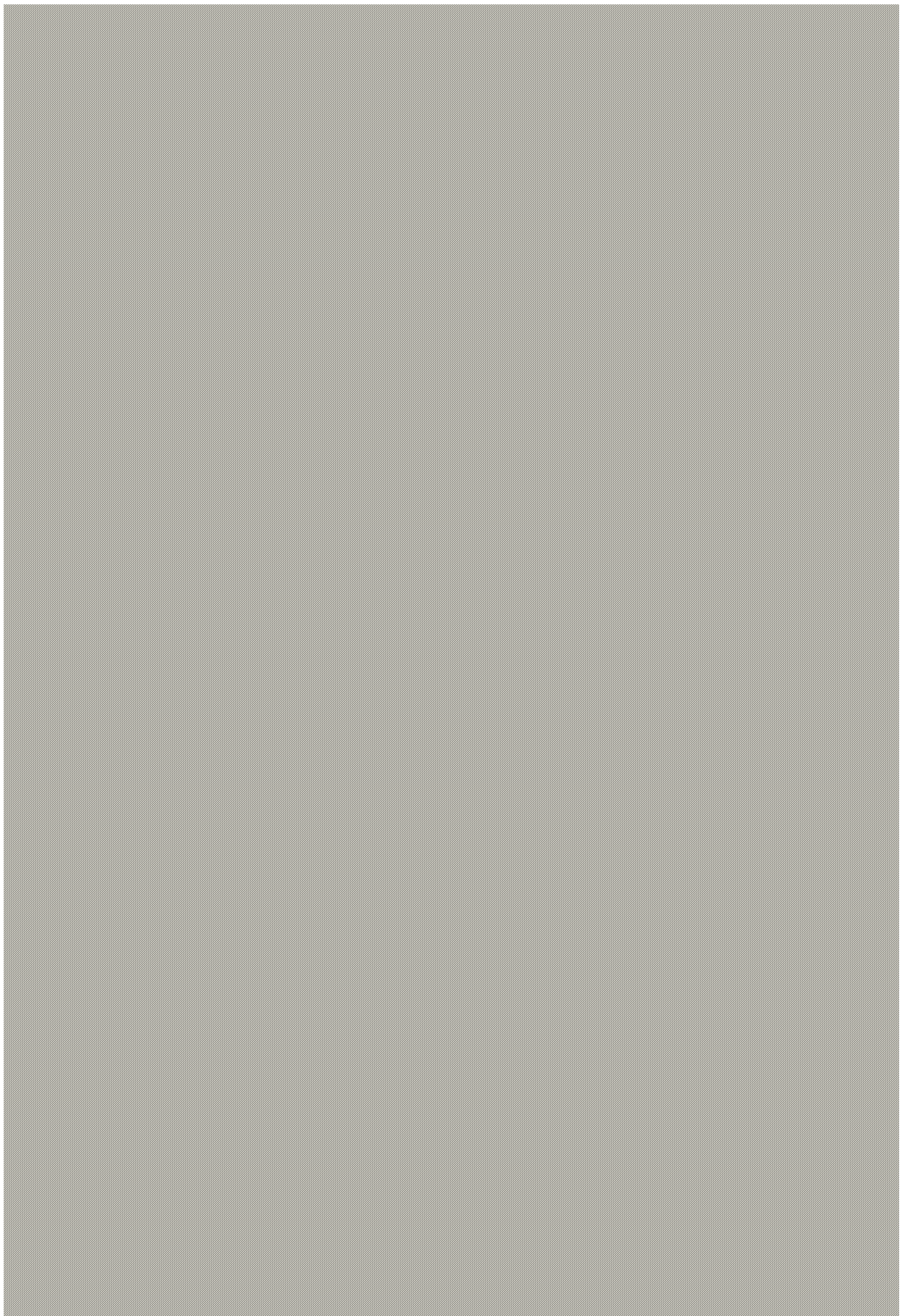
#DIV/0!





State-specific subpopulation 3 <sup>b</sup>		State-specific subpopulation 4 <sup>b</sup>		
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:	







#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

#DIV/0!

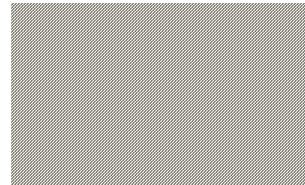
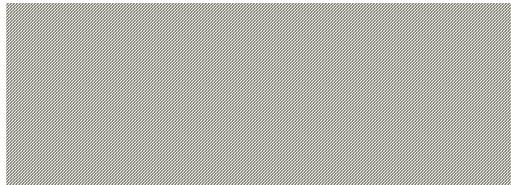
#DIV/0!

#DIV/0!

#DIV/0!

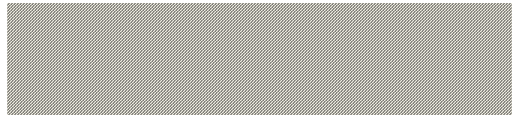
#DIV/0!

#DIV/0!



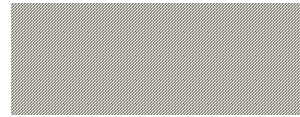
#DIV/0!

#DIV/0!



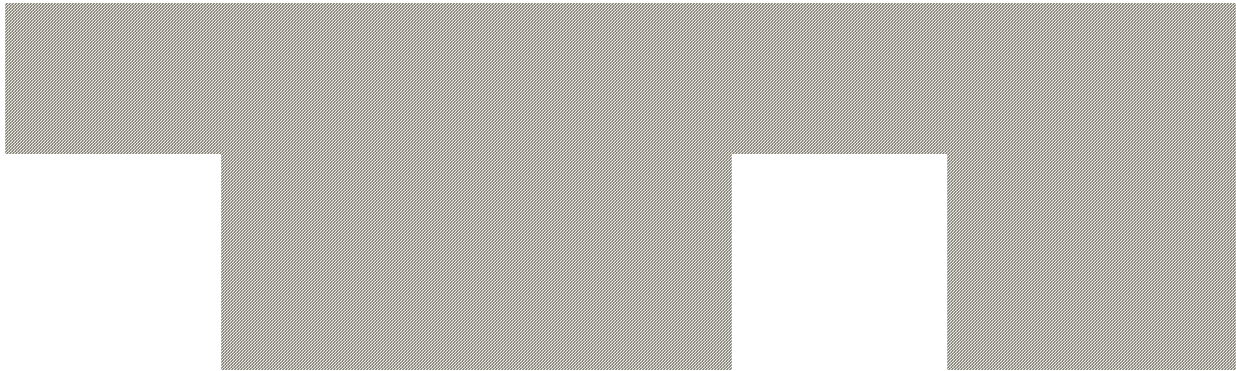
#DIV/0!

#DIV/0!



#DIV/0!

#DIV/0!



#DIV/0!

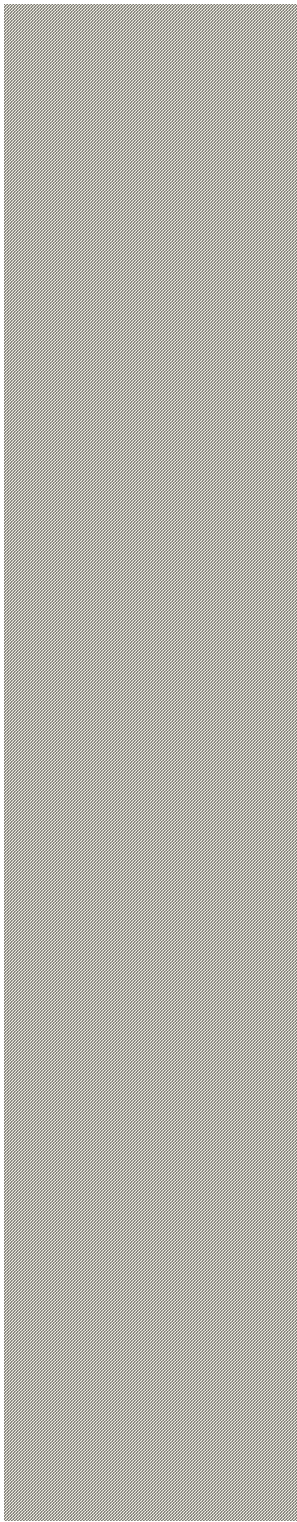
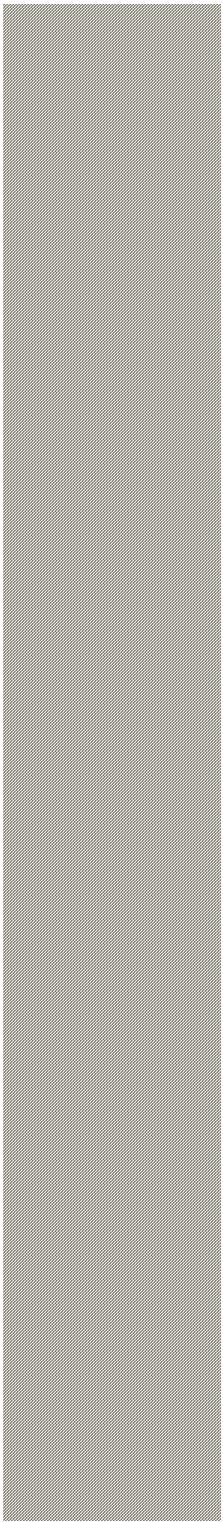
#DIV/0!







State-specific subpopulation 5 <sup>b</sup>		
State-specific subpopulation 5 denominator	State-specific subpopulation 5 numerator or count	State-specific subpopulation 5 rate/percentage
	EXAMPLE:	
	EXAMPLE:	
	EXAMPLE:	







#DIV/0!

#DIV/0!

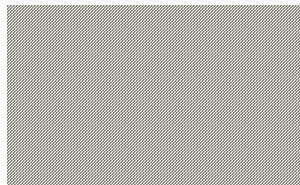
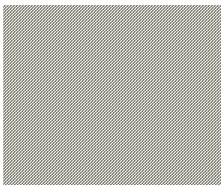
#DIV/0!

#DIV/0!

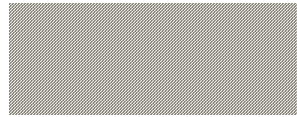
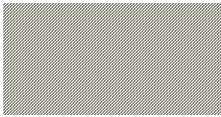
#DIV/0!

#DIV/0!

#DIV/0!

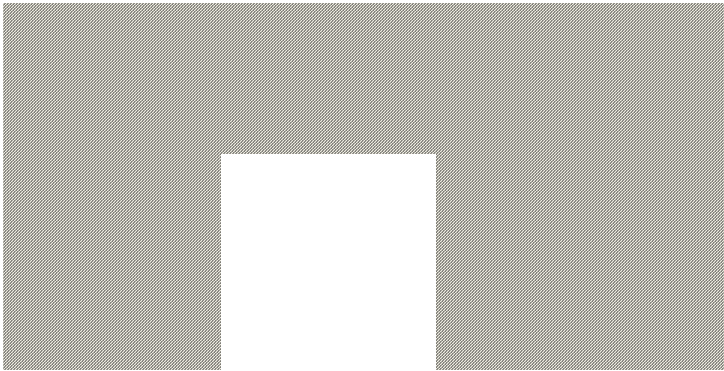


#DIV/0!



#DIV/0!

#DIV/0!



#DIV/0!

