

**Attachment 2.a. MCO and Behavioral Health Provider Stakeholder Interview
Introductory Email from CMS to State Medicaid Director**

To: State Medicaid Director
CC: CMCS Project Officer, RTI SUD Team Lead
Subject: RTI International Evaluation of Section 1115 Substance Use Disorder
Demonstrations

Dear [STATE MEDICAID DIRECTOR],

Your state received approval from the Centers for Medicare & Medicaid Services (CMS) to implement a section 1115 substance use disorder (SUD) demonstration. States with section 1115 SUD demonstrations are required to conduct independent evaluations of their demonstrations and report monitoring data regularly. To complement individual state evaluations and monitoring, the CMS has contracted with RTI International to conduct a meta-evaluation of SUD demonstrations. This evaluation will look across states with SUD demonstrations to understand the demonstrations' effectiveness and how the context in which demonstrations are implemented lead to differences in effectiveness.

As part of the evaluation, RTI is conducting telephone interviews with managed care organizations (MCOs) and behavioral health provider leadership in states implementing SUD demonstrations to understand the impacts of demonstrations on MCOs, providers, and Medicaid beneficiaries. CMS is asking that you help identify relevant MCOs and behavioral health providers and provide a warm hand-off to the MCO and behavioral health provider leadership via email introduction.

Interviews will cover implementation of patient placement criteria, Medicaid billing and reimbursement, care coordination, transitions in care, care integration, recovery support services, and residential MAT.

RTI will follow up with you via email and can provide you with an email template for contacting MCO and behavioral health provider leadership. We appreciate your help facilitating this important evaluation. Please contact me at [INSERT CMS PHONE NUMBER] if you have questions.

Thank you,

[CMS LEAD]

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 # 64). The time required to complete this information collection is estimated to average 90 minutes to participate in this interview (30 minutes preparation, 60 minute interview). 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.