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Changes for Behavioral Health Providers in ACC Phase III

Accountable Care Collaborative Phase III | October 2025

This fact sheet explains how members are assigned to a Regional Accountable Entity (RAE) and other changes that behavioral health providers can expect during Accountable Care Collaborative (ACC) Phase III.

The Department of Health Care Policy and Financing (HCPF) administers Health First Colorado (Colorado's Medicaid program), Child Health Plan *Plus* (CHP+) and other health care programs for Coloradans who qualify. Created in 2011, the Accountable Care Collaborative (ACC) is the primary delivery system for Health First Colorado. New contracts with the RAEs, referred to as ACC Phase III, launched July 1, 2025.

HCPF is grateful for all the behavioral health providers who make behavioral health care possible for Health First Colorado members; we cannot serve them without you. We look forward to continuing to work together to ensure that Coloradans get the behavioral health care they need.

How Members Are Assigned to a RAE

RAEs help to manage care for the members in their regions, with a focus on primary care, care coordination and connection to community-based services, including behavioral health. RAEs also manage the behavioral health benefit in their regions and contract with a statewide network of behavioral health providers to provide services to their members. There are four RAEs, one for each major region of the state.

- A member is assigned to a RAE based on the geographic location of the member's primary care provider. Members without a primary care provider are assigned to a RAE based on their home address.
- The ACC is designed to connect members to services in their geographic area. For this reason, members cannot change to another RAE by request.
- Members will switch to a new RAE if they move to another region or select a new primary care provider in another region.
- Behavioral health providers not contracted with a specific RAE will not be able to serve members assigned to that RAE unless they secure a single case agreement or establish a provider contract. Behavioral health providers can contract with multiple RAEs.
- Behavioral health providers should not request that a member changes RAEs just because the provider has a contract with a different RAE.
- RAEs must follow HCPF's Transitions of Care policy for members that may change RAEs.

Changes for Behavioral Health Providers as of July 1, 2025

We recognize that there have been several changes in the behavioral health system over the past few months. Below are recent changes that affect behavioral health providers:

Change	Impact
New contracts were executed with RAEs with new requirements for Phase III.	 All members were reassigned to the new RAEs based on the geographic boundaries as of July 1, 2025. As a result, some members changed RAEs between June and July. RAEs established new provider networks. This means that some RAEs may have updated their provider contracts and/or reimbursement rates to reflect their new regional needs. Providers are recommended to contact RAEs to discuss network needs prior to expanding or adding services that would require a new or updated RAE contract.
RAE regions were reduced from seven to four.	There are now fewer entities for you to contract and credential with to provide services to members statewide.
Attribution methodology, which links members to a primary care provider and assigns them to a RAE, changed.	 Members that can't be linked to a primary care provider are assigned to a RAE only based on their home address. Members' RAE may change if they begin seeing a primary care provider in a new region.
 Behavioral health for members enrolled in managed care plans changed: Colorado Access manages behavioral health for members enrolled in Elevate (Denver Health) Medicaid Choice. Members enrolled in PRIME work with Rocky Mountain Health Plans for both their physical and behavioral health care. 	 When you are looking up a member's managed care enrollment history, you will see two active enrollments for a member: one for their RAE and one for their managed care organization. In instances where a behavioral health provider may bill HCPF fee-for-service (e.g., psychiatry services), providers should instead bill a member's managed care organization.
HCPF implemented <u>new policies</u> for Primary Care Medical Providers (PCMPs) to bill for coordinated physical and behavioral health care.	 See the Integrated Care Sustainability Code chart for which services are billed to a member's RAE and which are billed to HCPF. In addition, these codes now require a covered diagnosis for individuals 21 years and older to be eligible for payment. Behavioral health providers working as part of a PCMP team may be reimbursed fee-for-service for certain code sets to support physical and behavioral health integration.

Change	lmpact
Behavioral Health Secure Transport (BHST) Services are now managed by the RAEs. In recognition of Colorado's current	 If you previously billed HCPF for BHST services, you must now contract with the RAEs to provide these services for members. More information can be found in the State Behavioral Health Services Billing Manual. Each of these changes have been reviewed to
fiscal challenges and the evolving federal funding threats to Medicaid, HCPF is taking the following actions to preserve Medicaid sustainability: • We have updated the types of providers that can bill for services by a Peer Support Professional. • RAEs are required to implement all National Correct Coding Initiative (NCCI) edits to reduce improper payments stemming from incorrect coding and billing practices. Effective Oct. 1, 2025, RAEs are also required to implement Colorado-specific medically unlikely edits (MUEs) and Colorado-specific procedure to procedure (PTP) edits. • HCPF will no longer set directed payments for outpatient behavioral health essential safety net services, except for a limited list of services.	comply with parity regulations. These changes will affect individual behavioral health practices differently. For more information: > Medicaid Sustainability: Behavioral Health and Managed Care Actions > Behavioral Health webpage > Behavioral Health Policies webpage > Health First Colorado Behavioral Health Updates newsletter
RAE reimbursement of youth residential services for members engaged with child welfare has been postponed until July 1, 2026.	 If you provide services through a Psychiatric Residential Treatment Facility (PRTF) or Qualified Residential Treatment Program (QRTP), you will continue to bill HCPF for services provided to members engaged with child welfare through June 30, 2026. Beginning July 1, 2026, you must contract with the RAEs to provide these services for members.
HCPF is working toward expanding and improving implementation of Intensive Behavioral Health Services for children and youth through the Colorado System of Care (CO-SOC).	 Stay updated on the implementation of CO-SOC: CO-SOC webpage CO-SOC for Children and Youth Behavioral Health newsletter