

**Health First Colorado – Northeast Health Partners**  
**Network Adequacy Plan**  
**July 1, 2018 – June 30, 2019**

Prepared by: Provider Relations

July 31, 2018

Revised: November 16, 2018

Second Revision: January 17, 2019

**Executive Summary**

Northeast Health Partners delegates network management responsibilities to Beacon Health Options (“Beacon”). Beacon seeks to create, administer and maintain a network of PCPs and a network of behavioral health providers to serve the needs of Medicaid members attributed to the region. In an effort to meet this function, Beacon has leveraged existing contracts and relationships with providers in the region, as well as continuing to recruit new providers, to assure access and maintain an adequate network to serve the primary care and behavioral health needs of Medicaid members and their families under the regional organization.

Our network support strategy will be documented in our practice support plan, which will be submitted to the Department of Health Care Policy and Financing (the Department) on an annual basis, for review and approval.

This practice support plan will be updated annually and submitted to the Department by July 31 of each year by RAE’s Program Officer on behalf of the Director of Provider Relations or their designee. Our Director of Provider Relations will also serve as the liaison between the Department and our partners, network providers, and subcontractors to ensure that all provider support is coordinated, does not duplicate existing service, and keeps the Department informed of our support activities.

**Network Development**

Beacon Health Options’ goal is to ensure network adequacy for the regional organization by closely monitoring development and access of the Health First Colorado provider network in the region and add providers based on overall network density and membership needs. This includes providers who have demonstrated experience providing care using a patient-centered model, clinical specialty, cultural background, or licensure level, and meet criteria for participation in the network. Beacon, on behalf of the regional organization, will create, administer, and maintain a network of PCPs and a network of behavioral health providers, building on the current network of Medicaid providers, to serve the needs of its members.

The network of PCPs and behavioral health providers will be monitored to meet or exceed the network time and distance standards. Given that our region contains significant rural membership, Beacon is also implementing programs such as C-PAC and telehealth services so support the work of our networks. Beacon will expand the network considering member enrollment and changes within the network.

### **Primary Care Provider (PCPs)**

Beacon Health Options has processes in place to create and maintain a robust network of physical health providers in the region. Beacon contracts with any willing provider who is enrolled with the State as a Medicaid Primary Care Provider (PCP) in the region.

The network will be monitored to meet or exceed the network time and distance standards for PCPs by:

- Using of current list of providers participating in Medicaid, utilization data and historical claims information to cross-reference against providers to identify key practices and providers who are currently providing services to Health First Colorado Medicaid Members;
- Incorporating GeoAccess mapping in order ensure the PCP network meets member ratios and distance standards;
- Considering Member and local stakeholder (i.e. Department of Health Services) requests of providers they would like to see and are not currently in the network, and meet Medicaid criteria; and
- Assisting interested providers to enroll with the State as a Medicaid PCP.

### *PCP Network Standards*

The regional organization expects to meet PCP access standards set by contract requirements as follows:

#### Time and Distance Standard

- Urban Counties: Maximum travel of 30 minutes or 30 miles
- Rural Counties: Maximum travel of 45 minutes or 45 miles
- Frontier Counties: Maximum travel of 60 minutes or 60 miles

#### Member to Provider Ratio

- 1/1,800 adult members - Adult primary care providers
- 1/1,800 adult members - Mid-level primary care providers
- 1/1,800 pediatric members – Pediatric primary care providers

### *Recruitment Strategies*

Provider Relations, in collaboration with the regional organization's leadership, will outreach to the identified providers to have the providers in the network.

To recruit these providers, our provider relations staff will stress the positive aspects of participation in the regional organization, such as:

- Per member per month (PMPM) provider payment
- Alternative payment model that allows for incentives based on quality of care
- Additional volume to their practice
- The opportunity to provide for a needed community resource
- Benefits for the Medicaid Members served through the RAE program
- Resources and trainings available to support the practice

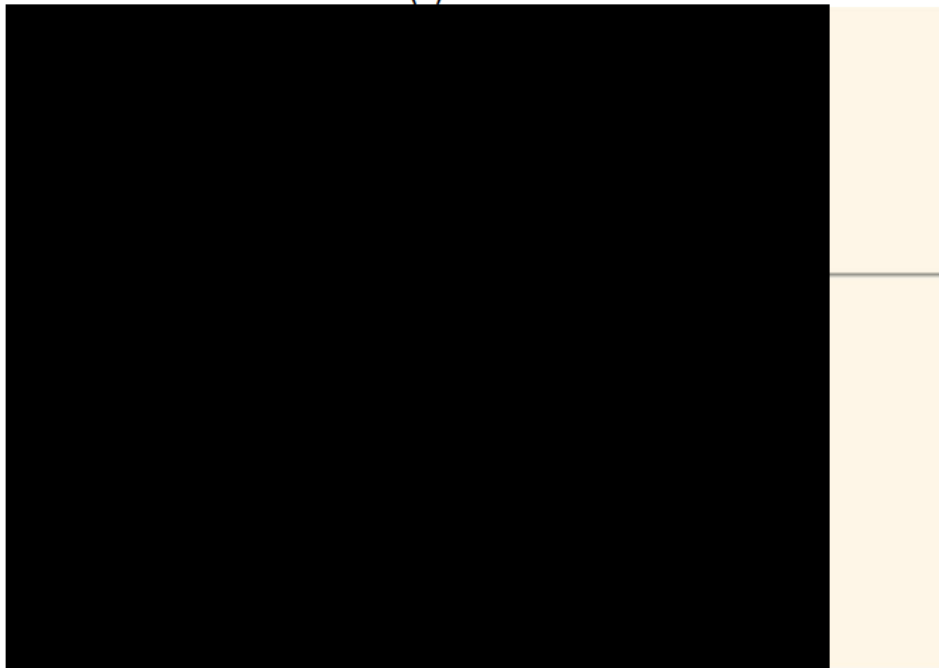
- Care coordination support to the practice to address members' needs.

In addition to communications via email and telephone, our staff visited providers' offices to inquire about participation. Staff conducted weekly webinars that providers and their staff can join to learn about the regional organization and respond to questions. Through the collaboration of the regional organization's leadership and provider input, Provider Relations made connections with local provider organizations and government entities such as Department of Health Services, to identify gathering places to outreach providers that serve their communities. Furthermore, Provider Relations conducted informational seminars or "meet and greets" at local facilities throughout the region to meet with providers and office staff and respond to questions. Providers received electronic communications, also known as Provider Alerts, to inform them of these opportunities. In addition, this communication method has served as an ongoing source of information sharing and education once the regional organization went live on July 1, 2018.

#### *Network Overview*

Through these strategies, Beacon created a network of 24 PCPs in 50 locations that covered all counties of the regional organization. The network includes contracts with Essential Community Providers including FQHCs and Rural Health Centers, in addition to private and non-profit Medicaid enrolled PCPs in the region that serve both adult and children. Diagram 1 below, shows the members in black with access to at least two (2) providers within the maximum distance for their county classification. Most of the members (99%) have a choice of providers within the required distance. Members in the northern part of Weld County, which has an urban county classification, do not have a choice of two (2) providers within a 30-mile radius. Beacon will target this area to recruit PCPs to fill in this network gap.

Diagram 1: Member access to at least two (2) PCPs



Member attribution for the regional organization included members with residence outside the regional organization's boundaries due to members' historical utilization of the network PCPs. For the members residing outside the regional organization's boundaries, the distance to the closest provider was a minimum of 31.2 miles to the closest network PCP. Members under the age of 18 were the highest number of the members identified as residing outside of the regional organization's boundaries. Reasons for this trend will need to be analyzed and monitored to identify strategies to meet to their needs through primary and behavioral health services, as well as, care coordination and health neighborhoods.

### **Behavioral Health Providers**

Beacon Health Options has an existing state-wide network of behavioral health providers to comply with the network time and distance standards. The network includes contracts and relationships with Essential Community Providers including Community Mental Health Centers, FQHCs, school-based health centers, Rural Health Centers, community safety-net clinics, as well as number of private/non-profit providers and substance use disorder providers in the region.

#### *Behavioral Health Network Standards*

The regional organization expects to meet behavioral health access standards set by contract requirements as follows:

##### *Time and Distance Standard*

- Urban Counties: Maximum travel of 30 minutes or 30 miles
- Rural Counties: Maximum travel of 60 minutes or 60 miles
- Frontier Counties: Maximum travel of 90 minutes or 90 miles

##### *Member to Provider Ratio*

- 1/1,800 adult members - Adult mental health providers
- 1/1,800 pediatric members – Pediatric mental health providers
- 1/1,800 all members – Substance use disorder providers

#### *Network Overview*

The State-wide network of behavioral health providers in 718 locations which includes fully executed contracts with 16 of the 17 community mental health centers, 19 Federally Qualified Health Centers (FQHCs) and Rural Health Centers, psychiatric hospitals (including one within the region), substance use disorder providers, as well as, public and private independent practitioners. Diagram 2 below, shows the members in black with access to at least two (2) behavioral health providers (not including SUD providers) within the maximum distance for their county classification. Most of the members (99.7%) have a choice of providers within the required distance. Members in the northern part of Weld County, which has an urban county classification, do not have a choice of two (2) behavioral health providers within a 30-mile radius. Beacon will target this area to recruit behavioral health providers to fill in this network gap.

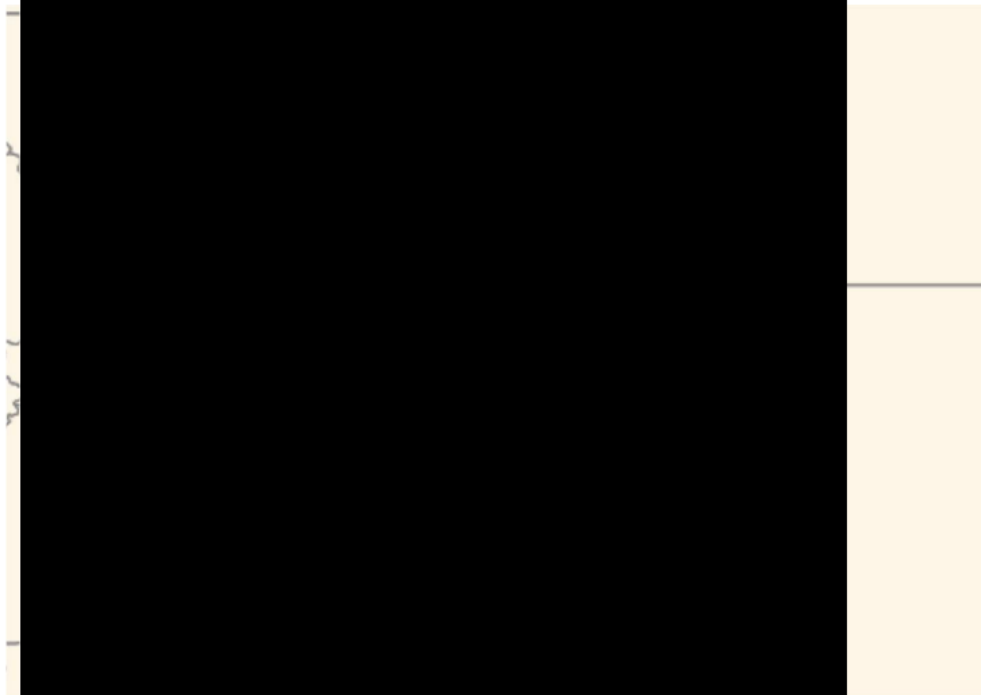
Diagram 2: Member access to behavioral health providers (not including SUD providers)



Beacon Health Options assesses geographic accessibility (geoaccess) based on provider types to ensure the provider is appropriate for the members. Most of the members have a choice of providers within the required distance including 95.4% of adult members and 90.5% of pediatric members. Counties that do not have sufficient behavioral health providers who serve pediatric members are rural counties of Kit Carson, Cheyenne, and Yuma.

Beacon has contracts with Substance Use Disorder (SUD) providers throughout the state that meets the provider to member ratio. As demonstrated in Diagram 3, most members (92.9%) have access to at least two (2) SUD providers within the required distance. Contracted SUD providers are not sufficiently located within the Cheyenne, Lincoln, Phillips and Yuma counties of the regional organization to meet the time and distance requirement. There are limited SUD providers in these rural and frontier counties beyond partner provider Centennial Mental Health Center, which provides SUD services. Beacon will target these areas to identify and recruit existing SUD providers who serve these areas. Beacon is also exploring how we can support existing network providers in expanding their service array/area.

Diagram 3: Member access to SUD providers



Beacon Health Options (Beacon) has a network of 1,456 behavioral health practitioners throughout the State of Colorado. This includes practitioners in 17 community mental health centers, 19 Federally Qualified Health Centers (FQHCs) and Rural Health Centers as well as our larger independent provider network. The total number of practitioners is based on their specialties and location. If practitioner serves more than one specialty or location, then they are counted more than once.

The breakdown of behavioral health provider types overall is as follows:

Provider Types	Number of Practitioners
ADULT_MH_PROVIDER	805
CHILD_PSYCHIATRIST	8
PED_MH_PROVIDER	390
PSYCHIATRIC_PRESCRIBER	42
PSYCHIATRIST	21
SUD_PROVIDER	190
Total	1456

The breakdown of behavioral health provider types by County is as follows:

Provider Types by County	Number of Practitioners
Adams	46
ADULT_MH_PROVIDER	27
PED_MH_PROVIDER	11

SUD_PROVIDER	8
<b>Alamosa</b>	<b>10</b>
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	3
PSYCHIATRIC_PRESCRIBER	1
SUD_PROVIDER	1
<b>Arapahoe</b>	<b>45</b>
ADULT_MH_PROVIDER	27
PED_MH_PROVIDER	9
SUD_PROVIDER	9
<b>Archuleta</b>	<b>5</b>
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	2
<b>Baca</b>	<b>3</b>
ADULT_MH_PROVIDER	2
SUD_PROVIDER	1
<b>Bent</b>	<b>4</b>
ADULT_MH_PROVIDER	3
SUD_PROVIDER	1
<b>Boulder</b>	<b>64</b>
ADULT_MH_PROVIDER	34
PED_MH_PROVIDER	17
SUD_PROVIDER	13
<b>Broomfield</b>	<b>7</b>
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	2
<b>Chaffee</b>	<b>23</b>
ADULT_MH_PROVIDER	11
PED_MH_PROVIDER	7
PSYCHIATRIC_PRESCRIBER	1
SUD_PROVIDER	4
<b>Cheyenne</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>Clear Creek</b>	<b>4</b>
ADULT_MH_PROVIDER	2
PED_MH_PROVIDER	2
<b>Conejos</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>Cook</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>Costilla</b>	<b>1</b>
ADULT_MH_PROVIDER	1

<b>Crowley</b>	<b>3</b>
ADULT_MH_PROVIDER	2
SUD_PROVIDER	1
<b>Custer</b>	<b>3</b>
ADULT_MH_PROVIDER	2
SUD_PROVIDER	1
<b>Delta</b>	<b>10</b>
ADULT_MH_PROVIDER	6
PED_MH_PROVIDER	4
<b>Denver</b>	<b>67</b>
ADULT_MH_PROVIDER	41
PED_MH_PROVIDER	14
SUD_PROVIDER	12
<b>Douglas</b>	<b>21</b>
ADULT_MH_PROVIDER	10
CHILD_PSYCHIATRIST	1
PED_MH_PROVIDER	6
PSYCHIATRIC_PRESCRIBER	2
PSYCHIATRIST	1
SUD_PROVIDER	1
<b>Eagle</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>El Paso</b>	<b>263</b>
ADULT_MH_PROVIDER	132
CHILD_PSYCHIATRIST	2
PED_MH_PROVIDER	86
PSYCHIATRIC_PRESCRIBER	5
PSYCHIATRIST	5
SUD_PROVIDER	33
<b>Elbert</b>	<b>2</b>
ADULT_MH_PROVIDER	2
<b>Fremont</b>	<b>26</b>
ADULT_MH_PROVIDER	13
PED_MH_PROVIDER	6
SUD_PROVIDER	7
<b>Garfield</b>	<b>5</b>
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	2
<b>Gilpin</b>	<b>4</b>
ADULT_MH_PROVIDER	2
PED_MH_PROVIDER	2
<b>Grand</b>	<b>3</b>



ADULT_MH_PROVIDER	2
SUD_PROVIDER	1
<b>Gunnison</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>Hinsdale</b>	<b>3</b>
ADULT_MH_PROVIDER	1
PED_MH_PROVIDER	1
SUD_PROVIDER	1
<b>Huerfano</b>	<b>5</b>
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	1
SUD_PROVIDER	1
<b>Jackson</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>Jefferson</b>	<b>137</b>
ADULT_MH_PROVIDER	78
PED_MH_PROVIDER	38
PSYCHIATRIC_PRESCRIBER	3
SUD_PROVIDER	18
<b>Kit Carson</b>	<b>3</b>
ADULT_MH_PROVIDER	2
SUD_PROVIDER	1
<b>La Plata</b>	<b>14</b>
ADULT_MH_PROVIDER	8
PED_MH_PROVIDER	5
SUD_PROVIDER	1
<b>Lake</b>	<b>2</b>
ADULT_MH_PROVIDER	1
SUD_PROVIDER	1
<b>Larimer</b>	<b>194</b>
ADULT_MH_PROVIDER	119
PED_MH_PROVIDER	52
PSYCHIATRIC_PRESCRIBER	5
PSYCHIATRIST	1
SUD_PROVIDER	17
<b>Las Animas</b>	<b>7</b>
ADULT_MH_PROVIDER	4
PED_MH_PROVIDER	2
SUD_PROVIDER	1
<b>Lincoln</b>	<b>4</b>
ADULT_MH_PROVIDER	3
SUD_PROVIDER	1

<b>Logan</b>	<b>10</b>
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	3
SUD_PROVIDER	2
<b>Mesa</b>	<b>56</b>
ADULT_MH_PROVIDER	27
PED_MH_PROVIDER	19
PSYCHIATRIC_PRESCRIBER	2
SUD_PROVIDER	8
<b>Moffat</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>Montezuma</b>	<b>5</b>
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	1
SUD_PROVIDER	1
<b>Montrose</b>	<b>7</b>
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	2
<b>Morgan</b>	<b>9</b>
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	2
SUD_PROVIDER	2
<b>Otero</b>	<b>10</b>
ADULT_MH_PROVIDER	6
PSYCHIATRIC_PRESCRIBER	1
PSYCHIATRIST	1
SUD_PROVIDER	2
<b>Park</b>	<b>9</b>
ADULT_MH_PROVIDER	4
PED_MH_PROVIDER	3
SUD_PROVIDER	2
<b>Phillips</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>Pitkin</b>	<b>3</b>
ADULT_MH_PROVIDER	2
PED_MH_PROVIDER	1
<b>Prowers</b>	<b>6</b>
ADULT_MH_PROVIDER	4
SUD_PROVIDER	2
<b>Pueblo</b>	<b>138</b>
ADULT_MH_PROVIDER	61
CHILD_PSYCHIATRIST	4

PED_MH_PROVIDER	36
PSYCHIATRIC_PRESCRIBER	14
PSYCHIATRIST	10
SUD_PROVIDER	13
<b>Rio Blanco</b>	<b>3</b>
ADULT_MH_PROVIDER	2
PED_MH_PROVIDER	1
<b>Rio Grande</b>	<b>5</b>
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	1
SUD_PROVIDER	1
<b>Routt</b>	<b>4</b>
ADULT_MH_PROVIDER	2
PSYCHIATRIC_PRESCRIBER	1
PSYCHIATRIST	1
<b>Saguache</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>San Miguel</b>	<b>4</b>
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	1
<b>Sedgwick</b>	<b>1</b>
ADULT_MH_PROVIDER	1
<b>Summit</b>	<b>2</b>
ADULT_MH_PROVIDER	2
<b>Teller</b>	<b>14</b>
ADULT_MH_PROVIDER	8
PED_MH_PROVIDER	4
SUD_PROVIDER	2
<b>Washington</b>	<b>4</b>
ADULT_MH_PROVIDER	2
PED_MH_PROVIDER	1
SUD_PROVIDER	1
<b>Weld</b>	<b>167</b>
ADULT_MH_PROVIDER	95
CHILD_PSYCHIATRIST	1
PED_MH_PROVIDER	43
PSYCHIATRIC_PRESCRIBER	7
PSYCHIATRIST	2
SUD_PROVIDER	19
<b>Yuma</b>	<b>2</b>
ADULT_MH_PROVIDER	2
<b>Total</b>	<b>1456</b>

Based on this information, Northeast Health Partners meets or exceeds the member to provider ratio standards. This is as follows:

Ratio for Adult Mental Health Practitioner is 1:110

Ratio for Pediatric Mental Health Practitioner is 1:226

Ratio for Substance Use Disorder Practitioner is 1:471

The overall member to provider ratio for mental health providers in the region meets or exceeds the standard for adult and pediatric population. Contracted mental health providers are not sufficiently available in frontier counties of Morgan for adults and Kit Carson, Morgan and Yuma for pediatric mental health providers. Beacon will target these areas to identify and recruit existing providers who serve these areas or partner to build additional resources.

Beacon has contracts with Substance Use Disorder (SUD) providers throughout the state that meet the provider to member ratio. Most members (96%) have access to at least two (2) SUD providers within the required distance. Contracted SUD providers are not sufficiently located within the Cheyenne, Kit Carson and Yuma counties of the regional organization to meet the time and distance requirement and Kit Carson, Logan and Morgan do not have sufficient providers to meet the member to provider ratio standards. There are limited SUD providers in these rural and frontier counties beyond partner provider Centennial Mental Health Center, which provides SUD services.

#### *Monitoring Strategies*

Beacon Health Options has policies in place to ensure that providers are accessible and available to Members, and that the provider network contains the specialties necessary to accommodate the needs of Members. Beacon monitors overall provider network patient load on our network using a comprehensive system for monitoring patient load and overall network capacity.

Beacon reviews network adequacy annually regarding the availability of providers who meet or exceed the cultural needs of Medicaid members by:

- Use of an updated and accurate list, in assessing the number of providers with expertise in key culturally based populations;
- Determining number of members, by county, through the enrollment file, within the key population groups;
- Determining any existing gap by a comparison of availability of providers as well as reviewing findings in Member and Family Affairs surveys or through contacts/surveys with advocacy organization of key populations (for examples children in foster care); and
- Increasing capacity of providers who meet or exceed cultural needs of Medicaid members through specialized provider training on Cultural Competency.

This list of provider network monitoring methods is not meant to cover all network development activities, as some activities are initiated as needed in response to community developments.

### *Recruitment Strategies*

Beacon Health Options regularly reviews current provider fee schedules to align with the RAE market and any future recruitment strategies.

Beacon Health Options works to engage specialty provider groups and facilities as needed by the membership, such as providers who have:

- A unique specialty or clinical expertise;
- License to prescribe in all areas: APRN/APN, NP, PA, MD/DO (Board Certified Child and Adult Psychiatrists);
- Capability to treat in a foreign language, ASL, and/or, have specific cultural experience;
- Capability of billing both Medicare and Medicaid;
- Practice located in regional organization's service areas considered rural or frontier where there are fewer providers;
- Telemedicine, especially for prescriber services;
- Alignment with primary care and are co-located in an integrated model;
- Capability to serve unique populations and disorders; or
- Specialties such as Intellectual Disabilities, Autism, Members with Traumatic Brain Injuries or other groups that provide behavioral health services in addition to their non-covered specialty. Also, providers with experience in specialty care, long-term services and supports (LTSS) providers, managed service organizations and their networks of substance use disorder providers, dental and other ancillary providers;
- Behavioral health providers that span inpatient, outpatient, and all other covered mental health and substance use disorder services.

Beacon will target the areas of need to identify and recruit existing SUD and Mental Health providers who serve the areas of need. These strategies include:

- Use current list of providers participating in Health First Colorado to identify providers within the region for recruitment
- Work with County DHS Departments to identify CORE providers and work with these providers in becoming credentialed within the system
- Working with providers, who may be outside the region and willing to provide services within the region on a contract basis.
- Work with providers, particularly in frontier areas, to identify workforce recruitment options we can assist with to recruit and retain staff. I.E. National Health Service Core, Public Loan Forgiveness
- Providing enhanced case rates to providers who are willing to extend beyond their current radius of service provision

- Track utilization and Single Case Agreement data and historical claims information to identify providers who are currently providing services to Health First Colorado Members
- Collaborate with NHP partners such as Centennial Mental Health Center and North Range Behavioral Health to expand services in areas of need through school based services and co-location at PCP offices
- Engage Provider Network Subcommittee to identify key practices and recruitment strategies that would be best suited for the region, as well as, ways to support existing network providers in expanding their service array/area
- Offer telemedicine services to members in rural and frontier areas who have psychiatry and other specialty needs
- Engage PCPs, especially those in rural and frontier areas, with practice transformation, care coordination, behavioral health providers co-located at PCP offices and programs such C-PAC to expand their capabilities to serve their members in need behavioral health services.
- Update and maintain data systems to more accurately identify providers who have availability of after-hours and weekend appointments and disability accessible facilities, and have cultural expertise.
- Offer training and assessment services to providers to increase availability of after-hours and weekend appointments, cultural competent providers and disability accessible facilities.

Beacon Health Options' Credentialing Department maintains NCQA compliant policies to conduct credentialing and re-credentialing functions as required by RAE contract. Beacon's Credentialing Department conducts a thorough NCQA compliant primary source verification process to prescreen providers and facilities prior to their inclusion in the behavioral health network and on a routine basis once contracted.

#### TELEMEDICINE

Beacon Health Options has contracted with two (2) telehealth service providers, Heart Centered Counseling and ReNew Behavioral Health. They offer mental health counseling and tele-psychiatry services with fully credentialed and Medicaid enrolled master's level licensed counselors and prescribing Registered Nurses (RNs) and Nurse Practitioners (NPs). Beacon is expanding access to these services in the rural and frontier counties in the third quarter of the fiscal year as an option when members identify transportation issues or the next appointment with a local provider is outside the access to care standards. Telehealth will be presented as an option to all member in the region as a choice of providers in the referral process.

Beacon Health Options offers Colorado Psychiatric Access and Consultation (CPAC) to primary care providers in the Northeast Health Partners region. This is a psychiatric access program provides PCMPs with access to psychiatric specialists, and assist with providing the education, training, consultation, and referral resources to be able to provide psychiatric medications to members in their own practices, minimizing the need for referrals to outside specialists. By

providing consultation services to primary practices, psychiatric access services enables PCMPs to address psychiatric medication needs for their patients. Using this model reduces demand for the limited psychiatric resources, and ensures that the complex cases are referred to the psychiatrists thus optimizing the available resources in rural and frontier areas.

Telehealth services are available to all members assigned to Northeast Health Partners. This can be upon request from the member or offered as option when members report transportation concerns. Based on report of Claims paid to date, 232 unduplicated members assigned to NHP have received telehealth services since the start of the RAE.

### **Accessibility**

Beacon Health Options maintains information of primary care and behavioral health providers with accessibility and is part of the monitoring of an adequate network:

#### *Accepting New Members*

Forty-three (43) primary care provider (PCP) locations reported as accepting new members, out of 50 locations. The breakdown below shows at the provider type, 86% of the network is accepting new members.

<b>Provider Type</b>	<b>PCP Practitioners Number</b>	<b>PCP Accepting New Clients Number</b>	<b>PCP Accepting New Clients Percentage</b>
ADULT_PRIMARY_CARE	45	39	87%
FAMILY_PRACTICE	48	43	90%
OB/GYN	4	3	75%
PEDIATRIC_PRIMARY_CARE	47	39	83%
<b>Grand Total</b>	<b>144</b>	<b>124</b>	<b>86%</b>

All behavioral health providers in all provider types are currently accepting new members.

Providers are able to update their capacity by notifying Beacon to temporarily close their panels to new members. In those cases, Beacon removes the behavioral health practitioner from the clinical referrals; and for PCPs, Beacon updates the State's Portal and monthly reports. For all providers, the following edition of the Provider Directory will reflect the changes.

Patient Load: Primary Care Providers are able to update their capacity by notifying Beacon to temporarily close their panels to new members or geographic attribution, and/or change their panel size. In those cases, Beacon updates the State's Portal and monthly reports and the following edition of the Provider Directory will reflect the changes. Additionally, Beacon is developing a policy of PCPs panel ratio to member attribution to standardize capacity and improve access to care to Medicaid Members; likely based on the number of rendering providers within the PCP location.

#### *Accessible Facilities*

Six (6) Primary Care Provider (PCP) location serving adults, family and pediatric members reported having accessible facilities. This information is based on the available through Beacon's system. When using other reports collected by PCPs such as practice assessment tool, we identify 25 locations as offering accessible facilities.

For behavioral health providers, 676 practice locations and facilities reported handicap accessibility.

Beacon Health Options, on behalf of NHP, is actively working with Primary Care and Behavioral Health Providers to obtain complete and accurate information about the practice's information including after-hours and weekend availability and cultural expertise. Beacon communicated to providers about the requirement to have report after-hours and weekend availability through the on-boarding training and provider alerts and included a tutorial on how to update the information on Beacon's ProviderConnect. Provider Relations has scheduled weekly live webinars for providers to walk through updating their schedules and allow for questions and answer period.

Beacon will continue to outreach to Primary Care Provider practices (whether they report currently offering accessible facilities or not) to educate them on accessibility. Starting in second quarter of FY 2019, we will extend them the opportunity to assess their facilities on accessibility standards and show the provider on ways they can improve. For all providers, Beacon will share resources to allow them to make improvements within their practice.

#### *After-hours and Weekend Availability*

Fourteen (14) Primary Care Provider (PCP) location have identified as offering after-hours and/or weekend appointment availability, beyond their 8am-5pm Monday through Friday schedule. The breakdown below shows at the provider type, 13% of the network has reported as having after-hours care. Please reference "Region 2 Q1 FY19 Provider Network" Tab "Physical Health Network" for detailed data.

<b>Provider Type</b>	<b>PCP Practitioners Total</b>	<b>PCP Extended Hours Number</b>	<b>PCP Extended Hours Percentage</b>
ADULT_PRIMARY_CARE	45	6	13%
FAMILY_PRACTICE	48	7	15%
OB/GYN	4	0	0%
PEDIATRIC_PRIMARY_CARE	47	6	13%
<b>Grand Total</b>	<b>144</b>	<b>19</b>	<b>13%</b>

As for behavioral health providers, there is sixty-nine (69 or 5%) practitioners who reported as having afterhours and/or weekend care in the State-wide network, of which 9 practitioners are within the region's boundaries. Here is the breakdown by provider type:



<b>Provider Type</b>	<b>Behavioral Health Practitioner Total</b>	<b>Behavioral Health Extended Hours Number</b>	<b>Behavioral Health Extended Hours Percentages</b>
ADULT_MH_PROVIDER	799	29	4%
CHILD_PSYCHIATRIST	8	0	0%
PED_MH_PROVIDER	397	22	10%
PSYCHIATRIC_PRESCRIBER	40	4	4%
PSYCHIATRIST	21	0	0%
SUD_PROVIDER	191	14	7%
<b>Grand Total</b>	<b>1456</b>	<b>69</b>	<b>4.7%</b>

#### *Appointment Wait Times*

Beacon Health Options educates Primary Care and Behavioral Health providers on access to care standards including timeliness standards for appointments. Member Services addresses any complaints from a patient regarding appointment wait times and works with Provider Relations for timely resolution. This may include outreach to the practice to review their process ensuring it meets the requirements and address any a systemic reason for the complaint.

Working with Quality Department to implement a method to audit periodically practices on their wait times to ensure it meets standards and, if any deficits are identified, to educate and monitor the practice to achieve the standard.

All member grievances are addressed within fifteen (15) days by Member Services Department. The Community Outreach Specialists communicates with the provider on behalf of the member to resolve, educate the provider and achieve member satisfaction. All member grievances are tracked on Beacon's feedback database. If Member Services identifies a trend with provider wait times, then they engage Provider Relations for further provider education.

#### *Cultural Expertise*

Beacon obtains information of providers with cultural expertise through provider self-reporting. This is determined through language and specialty availability. For behavioral health providers, they report their competencies during their initial credentialing and re-credentialing and PCPs report it during contracting and Practice Assessment. They are able to update through Beacon's ProviderConnect. The information is available to members through the Provider Directory. An additional way this is identified is through site visits. During routine site visits, ensuring the visibility of culturally aware information, and how this is built into workflows. In numerous communities and provider locations, postings are offered in multiple languages, including Somali and Rohingya, which are two top languages spoken by refugees in our region.

Navigation of systems, with the language spoken by the individual, is also available through the Immigrant and Refugee Center of Northern Colorado.

Twenty-six (26) primary care providers (PCP) locations reported as having completed a cultural competency training. This includes PCP locations that are adult primary care (24) and pediatric primary care (26). Please note that the numbers do not total 26 as the same practice location may serve more than one population.

For behavioral health providers, there are 624 practitioners with language availability including 351 who have Spanish language. Our partner Community Mental Health Centers also utilize specialty programs to address the culture and language needs within the community. For example, North Range Behavioral Health Center employs numerous Americorps workers who speak multiple languages to assist families in accessing services and addressing healthcare needs. The average number of languages spoken by the Americorps workers is between 5-8 languages.

Within Morgan County, it is estimated between 27-40 languages are spoken, and the local law enforcement has been nominated to work with a national grant to ensure culturally appropriate services and interventions are available, at a minimum with an interpreter. Our goal locally is to partner within the community to ensure we are providing individualized, culturally aware services.

Beacon Health Options has a web-based, self-serving training for cultural competency available to all providers through CourseSite. Provider Relations will continue to promote cultural competency training to new and current providers and staff. Additionally, Provider Relations is available to conduct large group trainings for cultural competency for practices with a large staff size, upon request.

Beacon Health Options is actively working with Primary Care and Behavioral Health Providers to obtain complete and accurate information about the practice's information including cultural expertise. Provider Relations has scheduled weekly live webinars for providers to walk through updating their demographic information and allow for a question and answer period.

#### **Provider Network Sub-Committee**

Provider Network Sub-Committee, which will report to Quality Committee, has been designed to oversee network development functions and network management activities to ensure that providers receive appropriate technical support and training, as well as, support for practice transformation. The committee will meet periodically and will use available data and reports to ensure the RAE meets or exceeds contract requirements on:

- Network Adequacy;
- Provider support and training; and
- Practice Transformation.