

Health First Colorado – Health Colorado, Inc.

Network Adequacy Plan

July 1, 2018 – June 30, 2019

Prepared by: Provider Relations

July 31, 2018

Revised: November 19, 2018

Updated: January 17, 2019

Executive Summary

Health Colorado 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.

Accessibility for Primary Care and Behavioral Health Providers

Accessible Facilities (Section 9.8.1.2)

Four (4) Primary Care Provider (PCP) locations 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 101 locations as offering accessible facilities.

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

Beacon is working to close the discrepancy between the self-reported v. actually reported data of PCMPs so quarterly reports accurately reflect network accessible facilities. 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 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.

The structure of the webinars is to is three (3) parts: (1) describe the importance and use of the demographic information, (2) provide a brief presentation and (3) open the line for an opportunity for questions and answers. This structure allows the attendees to ask their individual questions and, if time allows, troubleshoot with them. This allows attendees to learn from each other and spark additional questions from other attendees. The initiative will be measured by the attendance in the webinar, number of providers who report updating the demographic information and the quarter-to-quarter change in demographic reporting.

Provider Relations is scheduling on-site visits or webinars (based on provider preference) with the Practice Managers of the contracted PCPs to offer the practice important RAE information. This will include a check-in on the status of their demographic information and provide any assistance in completing it during the meeting.

The Member and Family Affairs surveys will assist in identifying any gaps in availability of providers that are needed and outreach to providers. The RAE participates in multiple regional committees and meeting such as Program Improvement Advisory Committee (PIAC) and Member Engagement Advisory Committee (MEAC) where a broad range of local stakeholders and members offer guidance and make recommendations for improved network for member and provider satisfaction within the region. Additionally, we meet with key stakeholders such as Department of Health Services (DHS) to receive feedback on network needs for their service population.

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 (Sections 9.8.1.7; 9.8.3.3 and 9.8.3.4)

Thirty-one (31 or 25%) Primary Care Provider (PCP) locations (based on Billing IDs) have identified as offering after-hours and/or weekend appointments.

As for behavioral health providers, there is sixty-nine (69) (15%) practitioners who reported as having afterhours and/or weekend care.

Provider Type	Number of Practitioners
ADULT_MH_PROVIDER	29
PED_MH_PROVIDER	22
PSYCHIATRIC_PRESCRIBER	4
SUD_PROVIDER	14
Total	69

Cultural and Language Expertise (Section 9.8.1.6)

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.

Beacon offers free language services to providers and members. The provider and/or member can access these services by calling the toll free number and during or prior the appointment.

Seventy-three (73 or 57%) primary care providers (PCP) locations reported as having completed a cultural competency training. This includes PCP locations that are adult primary care (73) and pediatric primary care (70). Please note that the numbers do not total 65 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.

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.

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.

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.

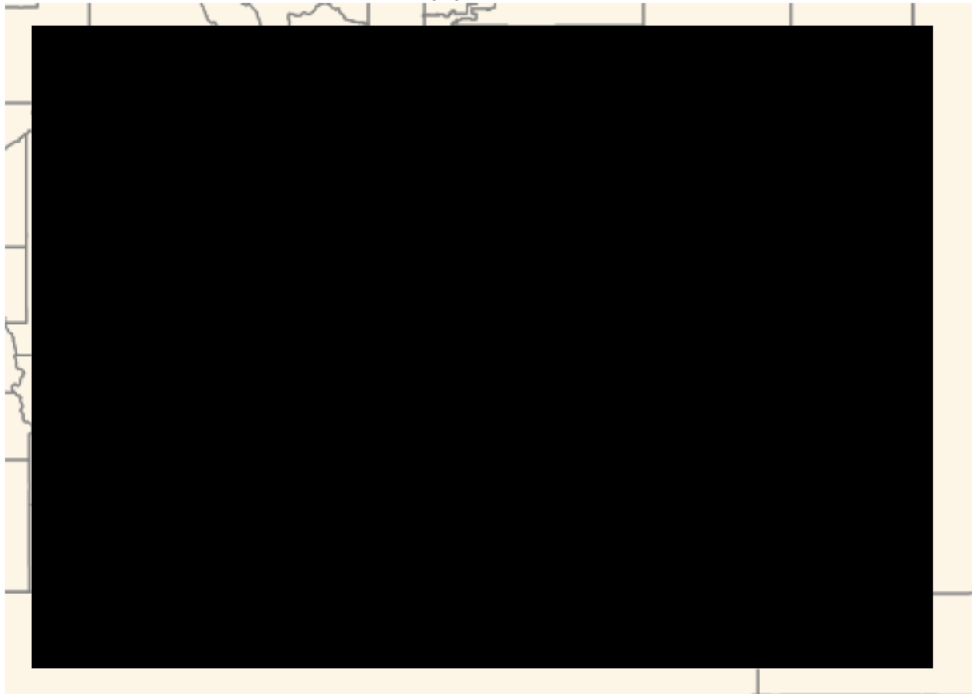
Network Overview

Through these strategies, Beacon created a network of 44 PCPs in 127 locations (based on Billing IDs) that covered all counties of the regional organization. Of these locations, 111 PCP practitioners offer adult primary care. 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. Of the 127 PCP locations, 126 are open to accepting new Medicaid Members (or 99%) (Sections 9.8.1.4 and 9.8.3.1).

Diagram 1 below, shows the members in black with access to at least two (2) providers within the maximum distance for their county classification (section 9.8.1.5). All adult members have a choice of providers within the required distance. Most pediatric members (98%) have a choice

of two (2) providers within the required. Beacon will target this area to recruit PCPs that serve pediatric population to fill in this network gap.

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



Monitoring Strategies – Section 9.8.1.8

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

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.

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.

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.

Network Overview

The State-wide network of behavioral health providers of 1,456 behavioral health practitioners 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. 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.

Health Colorado meets or exceeds the member to provider ratio standards. This is as follows:

Ratio for Adult Mental Health Practitioner is 1:162

Ratio for Pediatric Mental Health Practitioner is 1:335

Ratio for Substance Use Disorder Practitioner is 1:692

All (100%) of the behavioral health providers in all provider types are currently accepting new members (Section 9.8.1.4 and 9.8.3.2).

The overall member to provider ratio for mental health providers in the region meets or exceeds the standard for adult and pediatric population. Contracted pediatric mental health providers are not sufficiently available within the region, particularly in Conejos, Crowley, Custer, Lake and Otero counties. Beacon is working with the partner Community Mental Health Centers to identify ways to improve access to these services.

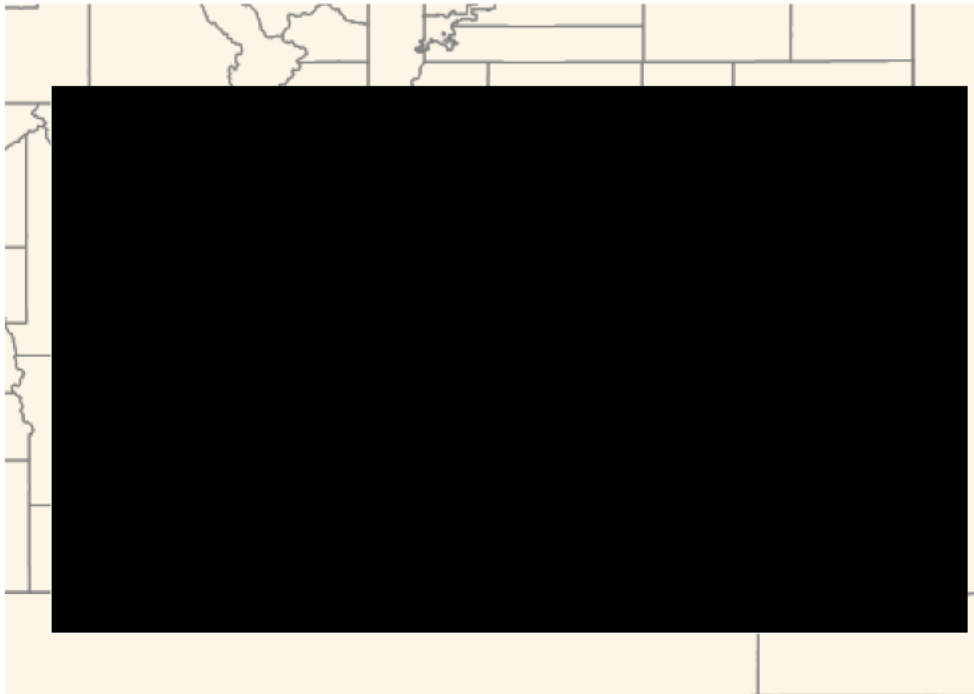
Diagrams 2 and 3 below, show the members in black with access to at least two (2) behavioral health providers (not including SUD providers) within the maximum distance for their county classification (section 9.8.1.5). All adult members and most of the pediatric members have a choice of providers within the required distance.

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



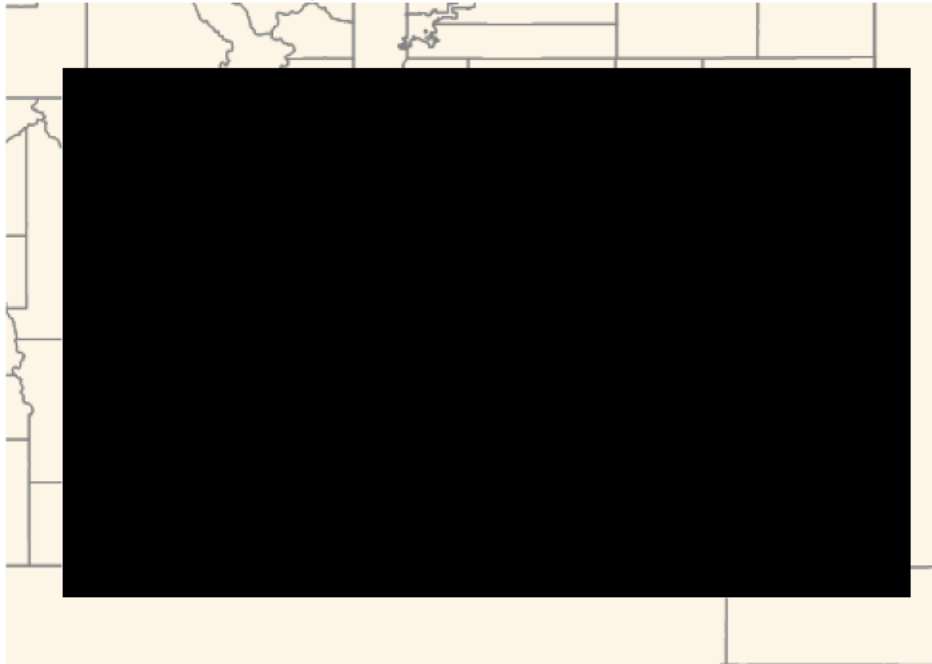
As demonstrated in Diagram 3, most pediatric members (98%) have a choice of two (2) behavioral health providers within the required. Contracted pediatric behavioral health providers are not sufficiently located within the Baca, Bent, Crowley, Kiowa and Otero counties of the regional organization to meet the time and distance requirement. Beacon will target these areas to recruit behavioral health providers that serve pediatric population to fill in this network gap.

Diagram 3: Pediatric member access to behavioral health providers (not including SUD providers)



Beacon has contracts with Substance Use Disorder (SUD) providers throughout the state that meets the provider to member ratio. As demonstrated in Diagram 4, most members (99.8%) have access to at least two (2) SUD providers within the required distance. Contracted SUD providers are not sufficiently located within the Baca, Las Animas, and Saguache counties of the regional organization to meet the time and distance requirement. There are limited SUD providers in these rural and frontier counties 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 4: Member access to SUD providers



The breakdown of behavioral health provider types overall is as follows (Sections 9.8.1.3.4 to 9.8.1.3.9):

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 (Section 9.8.1.5):

Provider Types by County	Number of Practitioners
Adams	46
ADULT_MH_PROVIDER	27
PED_MH_PROVIDER	11
SUD_PROVIDER	8
Alamosa	10
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	3
PSYCHIATRIC_PRESCRIBER	1
SUD_PROVIDER	1
Arapahoe	45
ADULT_MH_PROVIDER	27
PED_MH_PROVIDER	9
SUD_PROVIDER	9
Archuleta	5
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	2
Baca	3
ADULT_MH_PROVIDER	2
SUD_PROVIDER	1
Bent	4
ADULT_MH_PROVIDER	3
SUD_PROVIDER	1
Boulder	64
ADULT_MH_PROVIDER	34
PED_MH_PROVIDER	17
SUD_PROVIDER	13
Broomfield	7
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	2
Chaffee	23
ADULT_MH_PROVIDER	11
PED_MH_PROVIDER	7
PSYCHIATRIC_PRESCRIBER	1
SUD_PROVIDER	4
Cheyenne	1
ADULT_MH_PROVIDER	1
Clear Creek	4
ADULT_MH_PROVIDER	2
PED_MH_PROVIDER	2
Conejos	1

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

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

PED_MH_PROVIDER	2
SUD_PROVIDER	1
Lincoln	4
ADULT_MH_PROVIDER	3
SUD_PROVIDER	1
Logan	10
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	3
SUD_PROVIDER	2
Mesa	56
ADULT_MH_PROVIDER	27
PED_MH_PROVIDER	19
PSYCHIATRIC_PRESCRIBER	2
SUD_PROVIDER	8
Moffat	1
ADULT_MH_PROVIDER	1
Montezuma	5
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	1
SUD_PROVIDER	1
Montrose	7
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	2
Morgan	9
ADULT_MH_PROVIDER	5
PED_MH_PROVIDER	2
SUD_PROVIDER	2
Otero	10
ADULT_MH_PROVIDER	6
PSYCHIATRIC_PRESCRIBER	1
PSYCHIATRIST	1
SUD_PROVIDER	2
Park	9
ADULT_MH_PROVIDER	4
PED_MH_PROVIDER	3
SUD_PROVIDER	2
Phillips	1
ADULT_MH_PROVIDER	1
Pitkin	3
ADULT_MH_PROVIDER	2
PED_MH_PROVIDER	1
Prowers	6

ADULT_MH_PROVIDER	4
SUD_PROVIDER	2
Pueblo	138
ADULT_MH_PROVIDER	61
CHILD_PSYCHIATRIST	4
PED_MH_PROVIDER	36
PSYCHIATRIC_PRESCRIBER	14
PSYCHIATRIST	10
SUD_PROVIDER	13
Rio Blanco	3
ADULT_MH_PROVIDER	2
PED_MH_PROVIDER	1
Rio Grande	5
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	1
SUD_PROVIDER	1
Routt	4
ADULT_MH_PROVIDER	2
PSYCHIATRIC_PRESCRIBER	1
PSYCHIATRIST	1
Saguache	1
ADULT_MH_PROVIDER	1
San Miguel	4
ADULT_MH_PROVIDER	3
PED_MH_PROVIDER	1
Sedgwick	1
ADULT_MH_PROVIDER	1
Summit	2
ADULT_MH_PROVIDER	2
Teller	14
ADULT_MH_PROVIDER	8
PED_MH_PROVIDER	4
SUD_PROVIDER	2
Washington	4
ADULT_MH_PROVIDER	2
PED_MH_PROVIDER	1
SUD_PROVIDER	1
Weld	167
ADULT_MH_PROVIDER	95
CHILD_PSYCHIATRIST	1
PED_MH_PROVIDER	43
PSYCHIATRIC_PRESCRIBER	7

PSYCHIATRIST	2
SUD_PROVIDER	19
Yuma	2
ADULT_MH_PROVIDER	2
Total	1456

Telehealth Services

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 option to all member in the region as a choice of providers in the referral process.

A partner Community Mental Health Center, Health Solutions, implemented the use of tele-psychiatry to expand their access in the Pueblo, Las Animas and Huerfano counties. It is a creative method to bridge the need in a challenging area to recruit providers to travel to these counties.

Behavioral Health Providers Accepting Certifications

Four (4) of the Community Mental Health Centers in the RAE network accept mental health certifications. Two (2) CMCHs reported that they do not accept certifications. Provider Relations is surveying all CMHCs to confirm acceptance of certifications and expect to complete the survey for the Q2 2019 report.

Since Certifications is a legal process that compels a person to receive involuntary treatment and it requires that the treating facility accept the certification and agree to provide the court with information regarding the person’s progress, many facilities are reluctant to take on this responsibility. The facility needs to have the system of care and resources to appropriately care for this population. Some of the feedback received is that they feel that accepting such patients increases their potential liability if the patient commits an illegal act.

Additionally, Provider Relations is collaborating with Clinical Department to identify additional facilities that accept mental health certifications. For those facilities that do not, then we are identifying their concerns to present the findings to HCPF for potential collaboration in addressing them.

Monitoring Strategies (Section 9.8.1.8 to 9.8.1.11)

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

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. On a quarterly basis, Beacon monitors overall provider network patient load on our network using a comprehensive system for monitoring patient load and overall network capacity. Beacon conducts a geographic access mapping (geoaccess) and member to provider ratio analysis to check the availability of providers in the region by type. Areas with gaps in services or weaknesses are targeted for recruitment.

Beacon reviews network adequacy on a quarterly basis regarding the availability of providers that accept mental health certifications and able to meet the overall behavioral and physical health needs in the region. Additionally, review is conducted on 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.

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 the following edition of the Provider Directory will reflect the changes.

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 monitors requests for services through authorizations and claims data, as well as, request for Single Case Agreements (SCAs) for out of network providers. Based on this data, the RAE has been able to meet need for services using primarily contracted providers. Of those providers using an SCA, the majority of the providers are in the credentialing process and need SCAs while they complete it. Additionally, providers with significant number of SCAs or specialty service are outreached to recruit them into the network. Finally, members who have contacted the RAE for behavioral health services have been assisted to receive services through CMHC, an individual practitioner or telehealth services. Based on this information, the supply of network providers is fairly close to the demand for 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 Health Colorado partners 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
- 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.

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.