

ACC Network Adequacy Report

RAE Name: Health Colorado, Inc. Region: 4 Period Covered: Q1 FY19

Updated Report on December 17, 2018

Please indicate below any areas within the region where the network does not meet the choice of 2 providers within contracted time and distance standards. Please describe:

- What actions have been taken to address network deficiencies,
- Whether any deficiencies were resolved during the past quarter and how, and
- What ongoing actions the RAE is implementing to address unresolved network deficiencies while supporting client access and mitigating problems.

Health Colorado, Inc. 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 assigned to the regional organization. Beacon works in close collaboration with HCI Board of Directors and Program Officer, as well as, the Provider Network Subcommittee to oversee the development and maintenance of a robust network of primary care providers (PCPs) and behavioral health providers for the regional organization that meets and exceeds the network time and distances standards, in addition to, member to provider ratios.

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

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

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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 SUMMARY

Physical Health

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

Beacon monitors the network to identify and address network deficiencies 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 to 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.

Through these strategies, Beacon created a network of 44 PCPs in 107 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. The PCP network also includes CMHCs, Health Solutions, Southeast Mental Health Centers and Solvista Health which Medicaid Enrolled, meet PCP criteria and are contracted PCP locations. Per contract Section 9.1.3.4, CMHCs are appropriate for PCMP network. Future reports will integrate CMHCs as one of the physical health provider types (adult primary care, family practice, pediatric primary care or OB/GYN).

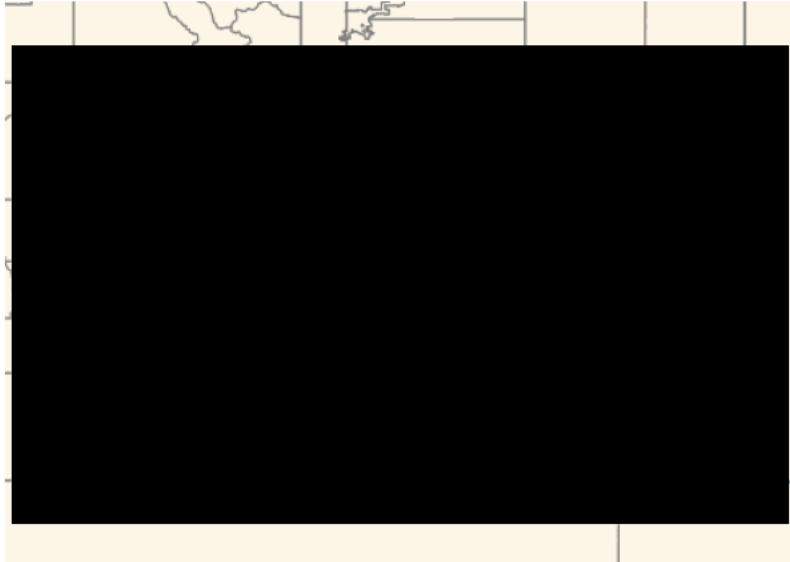
Diagram 1 below, shows the members in black with access to at least two (2) providers within the maximum distance for their county classification. All adult members have a choice of providers within the required distance. Most pediatric members (99%) have a choice of two (2) providers within the required.

The overall member to provider ratio for primary care providers in the region meets the standard for adults and pediatric members. While there are not sufficient mid-level

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practitioners in nine (9) of the counties to meet the standard for adult members, the adult primary care providers meet or exceed the standard of the adult to provider ratio. The exception are the counties of Pueblo and Las Animas where the adult primary care provider to member ratio needs improvement. Beacon is recruiting providers who serve these areas and others who are willing to expand their serve area.

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



Behavioral Health

Beacon Health Options has a strong 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.

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 reviewed network adequacy 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;

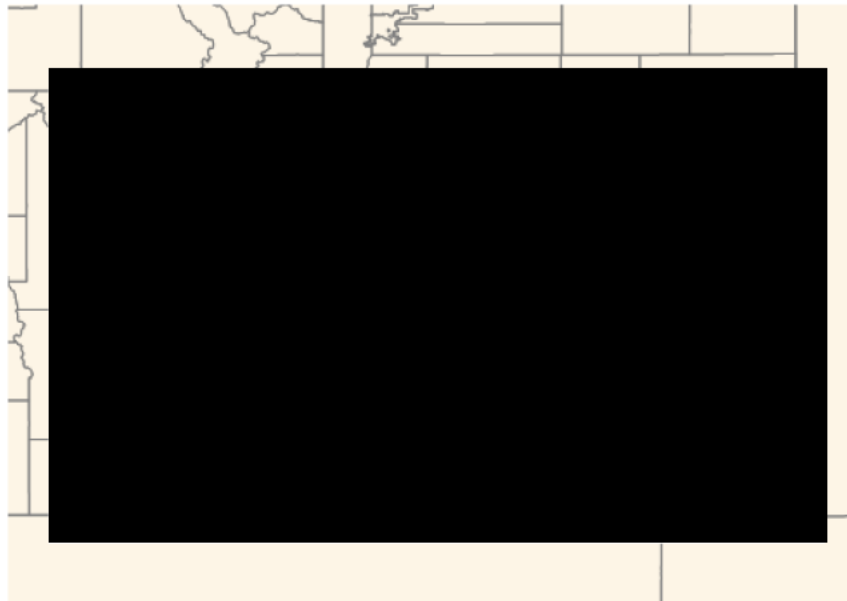
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- Determining any existing gap by a comparison of availability of providers as well as reviewing findings in Member and Family Affairs surveys or through contacts/surveys with advocacy organization of key populations (for examples children in foster 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.

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. Almost all adult members (98%) have a choice of providers within the required distance. A majority of pediatric members (87.6%) have a choice of two (2) behavioral health providers within the time and distance requirement.

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



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. Additionally, Beacon will target these areas to identify and recruit existing providers who serve these areas. Beacon is also exploring how we can support existing network providers in expanding their service array/area.

Note: Beacon Health Options is working with reporting department to update the maps to be larger, indicate the counties and differentiate between adult and pediatric practices and for the

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behavioral health map include SUD providers. This will be available on second quarter report due on January 31, 2019.

DATA MANAGEMENT

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 specialty, after-hours and weekend availability, accessible facilities, and cultural expertise. Beacon communicated to providers about the requirement to report this information through the onboarding 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 next quarterly report will reflect any data changes made by the providers.

ENHANCE AFTER-HOURS AND WEEKEND AVAILABILITY

Provider Relations is educating behavioral health providers about the access to care standards to ensure they are meeting the requirement of routine appointment availability. Part of the discussion has been offering training and assessment of services to providers to increase after-hour appointment availability.

Furthermore, Provider Relations works in collaboration with PCPs to educate on the benefits of offering after-hours and weekend appointments to meet the needs of their members. Provider Relations shares tools and resources when practices report interest in enhancing its services through after-hours or weekend appointments. Once the new appointment schedule is implemented, then Provider Relations assists providers to update the data in the Beacon system to accurately track the practices with after-hours and weekend availability. However, many practice locations in rural or frontier areas lack the resources and staffing to have routine/published extended hours and may not be able to incorporate after-hours or weekend appointments into their schedules.

NETWORK ENHANCEMENT

Beacon works to identify methods to enhance the network of 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
- Track utilization and Single Case Agreement data and historical claims information to identify providers who are currently providing services to Health First Colorado Members
- Work with County DHS Departments to identify CORE providers and work with these providers in enrolling in Medicaid and credentialing with Beacon
- Work with providers, who may be outside the region and willing to provide services within the region on a contract basis

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- 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
- Collaborate with Health Colorado partners to expand services in areas of need
- Engage Provider Network Subcommittee to identify key practices and network enhancement 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 of behavioral health services.
- Review current provider fee schedules to align with the RAE market and remain competitive to meet member needs.
- Update and maintain data systems to more accurately identify providers who have the availability of after-hours; weekend appointments; 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 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.

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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.

Furthermore, Health Colorado Inc. is contracted with Ieso Digital Health, a telemedicine program. It provides online cognitive behavioral therapy (CBT) for member with common depressive and anxiety disorders. Ieso uses a secure and HIPAA compliant, web-based platform to deliver real-time typed conversation with licensed and credentialed therapists.

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 an area in which recruiting providers is challenging as well as traveling to these counties also poses a challenge.

Health Colorado offers Colorado Psychiatric Access and Consultation (CPAC). 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 psychiatrics thus optimizing the available resources in rural and frontier areas.

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1. Please complete the tables for all of the providers in your network.

Please reference “Region 4 Q1 FY19 Provider Network” on Tabs “Physical Health Network” and “Behavioral Health Network”.

Below is the breakdown of physical health providers by type. The practitioner is based on practice location not rendering provider or PCMP Billing ID. In the case where a practice location has more than one Billing ID, they are listed only once.

Provider Type	PCP Practitioners Number	PCP Practitioners Percentage
ADULT_PRIMARY_CARE	111	32%
CMHC	9	2%
FAMILY_PRACTICE	111	32%
OB/GYN	3	1%
PEDIATRIC_PRIMARY_CARE	111	32%
Grand Total	345	100%

The breakdown of behavioral health providers by types is as follows:

Provider Type	Behavioral Health Practitioners Number	Behavioral Health Practitioners Percentage
ADULT_MH_PROVIDER	803	55%
CHILD_PSYCHIATRIST	8	1%
PED_MH_PROVIDER	395	27%
PSYCHIATRIC_PRESCRIBER	40	3%
PSYCHIATRIST	21	1%
SUD_PROVIDER	189	13%
Grand Total	1456	100%

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

Provider Type	Behavioral Health Practitioner Number	Behavioral Health Practitioner Percentage
Alamosa	10	0.7%
ADULT_MH_PROVIDER	5	0.3%

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PED_MH_PROVIDER	3	0.2%
PSYCHIATRIC_PRESCRIBER	1	0.1%
SUD_PROVIDER	1	0.1%
Baca	3	0.2%
ADULT_MH_PROVIDER	2	0.1%
SUD_PROVIDER	1	0.1%
Bent	4	0.3%
ADULT_MH_PROVIDER	3	0.2%
SUD_PROVIDER	1	0.1%
Chaffee	23	1.6%
ADULT_MH_PROVIDER	11	0.8%
PED_MH_PROVIDER	7	0.5%
PSYCHIATRIC_PRESCRIBER	1	0.1%
SUD_PROVIDER	4	0.3%
Conejos	1	0.1%
ADULT_MH_PROVIDER	1	0.1%
Costilla	1	0.1%
ADULT_MH_PROVIDER	1	0.1%
Crowley	3	0.2%
ADULT_MH_PROVIDER	2	0.1%
SUD_PROVIDER	1	0.1%
Custer	2	0.1%
ADULT_MH_PROVIDER	2	0.1%
Fremont	26	1.8%
ADULT_MH_PROVIDER	13	0.9%
PED_MH_PROVIDER	6	0.4%
SUD_PROVIDER	7	0.5%
Huerfano	5	0.3%
ADULT_MH_PROVIDER	3	0.2%
PED_MH_PROVIDER	1	0.1%
SUD_PROVIDER	1	0.1%
Lake	2	0.1%
ADULT_MH_PROVIDER	1	0.1%
SUD_PROVIDER	1	0.1%
Las Animas	7	0.5%
ADULT_MH_PROVIDER	4	0.3%
PED_MH_PROVIDER	2	0.1%
SUD_PROVIDER	1	0.1%
Otero	10	0.7%
ADULT_MH_PROVIDER	6	0.4%
PSYCHIATRIC_PRESCRIBER	1	0.1%

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PSYCHIATRIST	1	0.1%
SUD_PROVIDER	2	0.1%
Other	1206	82.8%
ADULT_MH_PROVIDER	678	46.6%
CHILD_PSYCHIATRIST	4	0.3%
PED_MH_PROVIDER	338	23.2%
PSYCHIATRIC_PRESCRIBER	23	1.6%
PSYCHIATRIST	10	0.7%
SUD_PROVIDER	153	10.5%
Prowers	6	0.4%
ADULT_MH_PROVIDER	4	0.3%
SUD_PROVIDER	2	0.1%
Pueblo	138	9.5%
ADULT_MH_PROVIDER	61	4.2%
CHILD_PSYCHIATRIST	4	0.3%
PED_MH_PROVIDER	36	2.5%
PSYCHIATRIC_PRESCRIBER	14	1.0%
PSYCHIATRIST	10	0.7%
SUD_PROVIDER	13	0.9%
Rio Blanco	3	0.2%
ADULT_MH_PROVIDER	2	0.1%
PED_MH_PROVIDER	1	0.1%
Rio Grande	5	0.3%
ADULT_MH_PROVIDER	3	0.2%
PED_MH_PROVIDER	1	0.1%
SUD_PROVIDER	1	0.1%
Saguache	1	0.1%
ADULT_MH_PROVIDER	1	0.1%
Grand Total	1456	100.00%

On the reports above, 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.

While Beacon Health Options had a network of behavioral health providers, all providers received an amendment to become providers for the regional organization to become effective on 7/1/18. As a result, they are listed as new providers for this contract in this quarter.

Beacon uses geographic access (geo-access) mapping to assess the distance of members residing outside the region. Beacon applies the 30-mile radius of an urban county and the same practitioner to member ratio to all members residing outside to determine access to care. This ensures that all members assigned to the RAE receive equitable access to care.

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Behavioral Health within PCP offices

Behavioral health providers are available within PCP offices. The following PCPs have behavioral health providers in at least one of their practice location:

- Health Solutions
- Solvista Health
- Pueblo Community Health Center
- Ryon Medical and Associates
- Valley-Wide Health Systems
- Wellness Works
- High Plains Community Health
- Parkview Ancillary

The data is currently being gathered to identify the number of providers by provider type and location to accurately report.

Single Case Agreements

The report states the number of providers with single case agreements (SCAs), not the number of individual SCAs. Some providers, especially those in the process of completing credentialing, may have received multiple SCAs during the transition period. Beacon can include the number of SCAs executed during the reporting period starting in the second quarter the report.

Beacon had an established state-wide network of behavioral health providers, especially within the Region 4 area, for decades prior to the RAE implementation. Additionally, Provider Relations conducted an active recruitment of providers within the area to join the network and complete the credentialing process in an expedited process. Finally, Provider Relations continues to actively monitor single case agreements to identify providers, based on expertise or geographic location, who may best serve the membership by joining the network. This allowed for providers to be part of the network prior to, or shortly after, go-live and significantly reduce the need for single case agreements.

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Accepting New Members

Ninety-eight (98) primary care provider (PCP) locations reported they are accepting new members, (this is 92% locations within the network). The breakdown below shows at the provider type, 97% of the network is accepting new members.

Provider Type	PCP Practitioners Number	PCP Accepting New Clients Number	PCP Accepting New Clients Percentage
ADULT_PRIMARY_CARE	111	111	100%
CMHC	9	9	100%
FAMILY_PRACTICE	111	104	94%
OB/GYN	3	2	67%
PEDIATRIC_PRIMARY_CARE	111	110	99%
Grand Total	345	336	97%

On the report above, the total number of practitioners is based on specialties reported at the location level. If practice location has practitioners who offer a specialty, then the practice is counted more than once. Future quarterly reports will be provide data at the rendering practitioner level, not just the PCP or practice location. A PCP practice location may have multiple rendering practitioners and differentiate in their ability to accept new clients.

All (100%) of 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.

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After-Hours and Weekend Availability

Thirty-one (31 or 25%) Primary Care Provider (PCP) locations (based on Billing IDs) have identified as offering after-hours and/or weekend appointments. The breakdown below shows at the provider type, 14% of the network has reported as having after-hours care.

Row Labels	PCP Practitioners Total	PCP Extended Hours Number	PCP Extended Hours Percentage
ADULT_PRIMARY_CARE	111	16	14%
CMHC	9	0	0%
FAMILY_PRACTICE	111	16	14%
OB/GYN	3	0	0%
PEDIATRIC_PRIMARY_CARE	111	16	14%
Grand Total	345	48	14%

Note: The information used for the Network Adequacy Report was calculated using a data set different from the Network Adequacy Plan deliverable, which caused the discrepancy. The data reported on the Network Adequacy Plan is accurate and will be used for all future reports. Please reference “Region 4 Q1 FY19 Provider Network” Tab “Physical Health Network” for updated data.

As for behavioral health providers, there is sixty-nine (69 or 4.7%) practitioners who reported as having afterhours and/or weekend care in the State-wide network, of which 12 practitioners are within the region’s boundaries.

Provider Type	Behavioral Health Practitioner Total	Behavioral Health Extended Hours Number	Behavioral Health Extended Hours Percentages
ADULT_MH_PROVIDER	799	29	2.0%
CHILD_PSYCHIATRIST	8	0	0.0%
PED_MH_PROVIDER	397	22	1.5%
PSYCHIATRIC_PRESCRIBER	40	4	0.3%
PSYCHIATRIST	21	0	0.0%
SUD_PROVIDER	191	14	1.0%
Grand Total	1456	69	4.7%

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Additionally, future quarterly reports will be providing data at the rendering practitioner level, not just the PCP or practice location. A PCP practice location may have multiple rendering practitioners and differentiate in their ability to accept new clients.

2. Please indicate the practitioner to client ratios in each county of your region

Please reference “Region 4 Q1 FY19 Provider Network” on Tabs “Client Ratio- PCMP” and “Client-Ratio-BH” for the practitioner to client ratios in each county of the region.

Health Colorado meets or exceeds the overall member to provider ratio standards. Here is the summary for primary care:

Ratio for Adult Practitioner is 1: 1190

Ratio for Pediatric Practitioner is 1: 1190

This is as follows for behavioral health network:

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

There are high-density counties, such as Pueblo, where the ratios do not meet the standard for behavioral health providers despite having a number of providers in the network. In these areas, Beacon is implementing the recruitment strategies. Please reference section “Network Enhancement”.

Contracted pediatric and adult mental health providers are not sufficiently available in rural and frontier counties to recruit for contracting. Beacon is working with the partner Community Mental Health Centers to identify ways to improve access in these areas including partnering with local institutions (i.e. school based programs) to offer needed services. Please reference section “Network Enhancement”.

ACCESSIBILITY FOR PRIMARY CARE AND BEHAVIORAL HEALTH PROVIDERS

Accessible Facilities

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 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

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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.

Cultural and Language 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.

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.