# **Network Report**

# UPDATED: 7/31/19 **RAE Name:** Colorado Community Health Alliance **Region #** 6 **Period Covered:** Quarter 4 FY 2018-2019

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.

# 1. Physical Health:

# Addressing Network Deficiencies to Improve Access to Care

The Region 6 Provider Network is sufficient in terms of provider choice available to members per time/distance standards. There are no gaps that exceed a 30-mile drive to a Primary Care Medical Provider (PCMP) within the region. In spite of meeting time and distance standards, Colorado Community Health Alliance (CCHA) remains alert to general access barriers for Medicaid members living in rural areas, including lack of access to transportation and primary care.

To continue to improve access in rural areas, CCHA collaborates with community partners to address disparities in such areas, specifically Clear Creek and Gilpin counties. Below are a few examples of collaborative efforts aimed at improving access to care in Region 6.

# EFFORTS TO INCREASE ACCESS IN REGION 6 - PREVIOUS REPORT

### Boulder and Broomfield Counties

• At the time of this report's submission, CCHA will have executed 2 new contracts with UCHealth, adding one additional PCMP location in Boulder County and one additional PCMP location in Broomfield County.

# Clear Creek and Gilpin Counties

- During the reporting period, CCHA's collaborative efforts with Clear Creek County focused on the Healthy Communities program. Current activities center on increasing prenatal visits and behavioral health support for expectant moms.
- CCHA is also in the process of strengthening relationships with other community entities to help identify local challenges/gaps in services and partner to develop and implement interventions.

### EFFORTS TO INCREASE ACCESS IN REGION 6 – Q4 UPDATES

# Clear Creek and Gilpin Counties

• CCHA continued efforts with Clear Creek County's Health Communities program to increase prenatal visits and behavioral health support for expectant moms. Progress on these activities will be reported in the Health Neighborhood report.



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# Network Development, Support and Improvement Activities

CCHA continued efforts to develop both the primary care and behavioral health network during the reporting period. Activities related to building a robust provider network include recruitment and contracting as well as efforts to support the already-contracted network.

## PROVIDER RECRUITMENT AND CONTRACTING - PREVIOUS REPORT

- CCHA completed three provider orientations in Region 6.
- Five clinics across two counties left the Region 6 network, including:
  - Boulder County clinic closures:
    - CHPG Primary Care Longmont
    - My Family Doctor, PLLC
  - Broomfield County practice acquisition:
    - Family Medicine Associates P.C. was acquired by CU Family Medicine Depot Hill Rd
  - Jefferson County clinic closures:
    - Kaiser Evergreen Medical Office
    - Simms Crossing Family Practice
  - Jefferson County practice acquisition:
    - Wheat Ridge Family Clinic was acquired by Inner City Health Center at Wheat Ridge
- Although four clinics left the network due to closures, the region continued to meet member choice and network adequacy standards. Additionally, CCHA worked with Kaiser and HCPF to ensure members were successfully transitioned to Kaiser's Wheat Ridge clinic upon closure of the Evergreen Medical Office. Prior to transition, members were also informed of their option to select a new provider and receive assistance with that process.
- CCHA executed new contracts with five practices across 3 counties in Region 6, including:
  - Boulder County:
    - Boulder Medical Associates
    - CU Family Medicine Boulder
  - Broomfield County:
    - CU Family Medicine Depot Hill Rd
  - o Jefferson County:
    - CU Family Medicine Westminster
    - Inner City Health Center at Wheat Ridge

### PROVIDER RECRUITMENT AND CONTRACTING - Q4 UPDATES

- CCHA completed two provider orientations in Region 6.
- Three clinics closed, one clinic opted out of the network, and one practice was acquired during the reporting period, including:
  - Boulder County:
    - Clinic closed/provider retired: Dr. Mary Kirker, MD
  - Jefferson County:
    - Clinic closed/provider retired: Dr. Gordon Fleischaker, MD



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Department of Health Car Policy & Financing

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- Clinic location closed: Springs Medical Associates, Inc.
- Practice determined PCMP medical home requirements could not be met: Road to Recovery
- Practice acquisition: Garrison Family Practice acquired by Colorado Physician Partners – location re-contracted under new TIN
- Although four clinics left the network due to closures, the region continued to meet member choice and network adequacy standards.
- CCHA executed new contracts with four practices across 3 counties in Region 6, including:
  - Boulder County:
    - UCHealth Longmont, which houses four clinics at one site, including Family Medicine, Internal Medicine, Pediatric Care, and Women's Care Clinic.
  - Broomfield County:
    - UCHealth Primary Care Clinic Broomfield
  - Jefferson County:
    - Springs Medical Associates
    - Colorado Physician Partners, PLLC (acquired Garrison Family Physicians)

# NETWORK SUPPORT AND IMPROVEMENT - PREVIOUS REPORT

In January 2019, CCHA implemented its tiered payment methodology where PCMPs are paid an administrative PMPM of \$3 for a verified member and \$1 for an unverified member. If CCHA is able to identify a relationship between the assigned provider and the member, validated by a claim within the previous 24 months, then the member is considered verified, resulting in a \$3 PMPM. The goal of this payment methodology is to incentivize PCMPs to establish a relationship with members and initiate well visits. Additionally, CCHA recently developed an "unverified member list" that PCMPs will be able to use for targeted outreach. The unverified member list includes member birthdate, Medicaid ID, phone number, and address.

### NETWORK SUPPORT AND IMPROVEMENT - Q4 UPDATES

• During the reporting period, CCHA distributed performance payments to practices qualified for participation in the CCHA Provider Incentive Program. A total of \$512,703 was distributed to 46 practices for the first quarter of the 2019 calendar year.

# Monitoring Network Adequacy

In addition to time and distance standards, member access to care is monitored and tracked through providers' timeliness of care, after-hours availability, and accessibility. CCHA's practice support efforts help ensure providers can accommodate appointments for more urgent or acute care needs using the 3<sup>rd</sup> Next Available Appointment<sup>1</sup> methodology. In higher-volume practices, same-day and acute care is

<sup>&</sup>lt;sup>1</sup> Third Next Available Appointment is the average length of time in days between the day a patient makes a request for an appointment with a physician and the third available appointment for a new patient physical, routine exam, or return visit exam. The "third next available" appointment is used rather than the "next available" appointment since it is a more sensitive reflection of true appointment availability. For example, an appointment may be open at the time of a request because of a



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often provided by dedicated mid-level practitioners staffed within the practice. Additionally, many of the CCHA-contracted practices offer both weekend and evening hours, extending to 7pm and weekends. To educate providers on these standards, CCHA hosts an orientation for newly contracted providers. This orientation also serves as a forum to educate providers on various level of support CCHA provides, such as member educational materials indicating where and when to access care.

Members can find a provider, and general information about providers' accommodations using the Find a Provider tool on CCHA's website. Though PCMP hours are not posted on the website due the frequency of updated hours, members can connect with CCHA member support specialists for assistance with selecting a provider that offers extended hours and information about alternative options for urgent needs.

#### PRACTICE ACCESSIBILITY - PREVIOUS REPORT

- In January 2019, The Center for People With Disabilities (CPWD) hosted CCHA practice transformation and member support staff for an ADA training and collaboration meeting. A second training will be held for CCHA staff, *Creating Disability-Friendly Healthcare*, in Q4 at The Independence Center.
- In an effort to better assess the ADA accessibility of contracted practices, CCHA has been revising the physical and behavioral health practice applications. Revisions to the applications will help inform CCHA of providers' specific accommodations that enhance accessibility at each practice location, including:
  - Near mass transit
  - High-low exam table
  - Wheelchair ramps
  - o Accessible parking
  - o Wheelchair scale
  - o Hoyer-type lift
  - Listening loops
  - o Automatic door
  - o Written policy on chemical/scent free
  - Written policy on service dogs
  - Low-vision aids/braille signs
  - ADA compliant bathroom
  - Other: (open text-field for providers to report any additional accommodations)
- CCHA is also working with CPWD on ways to increase ADA compliance in medical offices in Region 6 by implementing The Independence Center's model. Currently, these conversations are focused on aligning goals and exploring options that might enhance and support provider participation such as process improvement, incentive programs, and/or training for practice and community service providers. Updates will be reported as these discussion and plans progress.

cancellation or other unexpected event. Using the "third next available" appointment eliminates these chance occurrences from the measure of availability. Reference: Institute for Healthcare Improvement.



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• In addition to providing cultural competency training to providers during the March 2019 town hall meeting, providers have access to CCHA's <u>Caring for Diverse Populations toolkit</u> from the Provider Resources & Training page on the CCHA website. The toolkit offers physician and health care professionals resources for delivering effective and compassionate care.

## PRACTICE ACCESSIBILITY – Q4 UPDATES

- In April 2019, CCHA practice transformation, member support, and provider relations staff from both Regions 6 and 7 attended the *Creating Disability-Friendly Healthcare* training hosted by The Independence Center (TIC).
- In April 2019, CCHA finalized revisions to the primary care and behavioral health provider contracting applications. As reported in Q3, the applications were enhanced to collect more specific information about member accommodations and the accessibility of each contracted practice.
- CCHA is assisting TIC to inform the provider network of the new disability placards that waive parking meter fees for people with certain limitations. CCHA is incorporating information in the provider newsletter and distributing brochures to PCMPs.

## APPOINTMENT AVAILABILITY - PREVIOUS REPORT

A summary of the percentage of providers accepting new members and those offering after-hours appointment availability is below:

- 88.2% of PCMPs are accepting new Medicaid members
- 100% of behavioral health providers are accepting new Medicaid members
- 42.5% of PCMPs are offering after-hours appointment availability to Medicaid members
- 25.8% of behavioral health providers are offering after-hours appointment availability to Medicaid members

# APPOINTMENT AVAILABILITY – Q4 UPDATES<sup>2</sup>

- 88.9% of PCMPs are accepting new Medicaid members
- 99.4% of behavioral health providers are accepting new Medicaid members
- 43.1% of PCMPs are offering after-hours appointment availability to Medicaid members
- 27.6% of behavioral health providers are offering after-hours appointment availability to Medicaid members

# 2. Behavioral Health

# Addressing Network Deficiencies to Improve Access to Care

CCHA adopts an integrated approach to care, so most activities indicated in the physical health section are applicable to the behavioral health network as well. CCHA continues to expand the behavioral health network in Region 6 and statewide through an open network to ensure access to integrated primary and behavioral health care. Efforts to develop a robust behavioral health network are aimed to span all levels of care, including hospital systems with facility access, all Community Mental Health Centers

<sup>&</sup>lt;sup>2</sup> Changes in appointment availability among behavioral health providers are the result of CCHA's ongoing efforts to refine and streamline provider data reporting methodologies.



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(CMHCs), and Federally Qualified Health Centers across Colorado. CCHA will continue to be responsive to network needs and review all new-provider contracting requests.

CCHA is addressing access deficiencies by creating an open behavioral health network and contracting behavioral health providers who meet credentialing standards. The previous Behavioral Health Organization's network was closed to new providers, so operating with an open network has garnered interest from behavioral health providers to join our network and offers the potential to significantly improve access to mental health services, particularly to members who reside in rural zip codes that exist in Region 6 counties. Further, CCHA is contracting statewide with CMHCs and other behavioral health providers to improve access for members who travel to other parts of the state, or who find it more feasible to see a provider that is not located in the region.

### ADDRESSING NETWORK DEFICIENCIES TO IMPROVE ACCESS TO CARE

• CCHA is now contracted with one Adult Mental Health and one Pediatric provider in each county. As contracting, credentialing, and payment issues are addressed, CCHA will explore options to improve access to care in areas that continue to lack hospital and substance abuse providers.

## NETWORK DEVELOPMENT, SUPPORT, AND IMPROVEMENT ACTIVITIES - PREVIOUS REPORT

- CCHA continues to work with the IMD facilities to develop a payment solution that is both configurable in the system and compliant with State guidelines. The rates are being negotiated with the IMD facilities and an update will be provided to HCPF by 4/30/19.
- CCHA has one outstanding CMHC not yet contracted with Midwestern MHC. Midwestern MHC has indicated they will reach out when they are ready to move forward on contracting with CCHA.
- During the third quarter, CCHA continued efforts to proactively communicate with providers and work through behavioral health credentialing and contracting issues. An update on these efforts is as follows:
  - CCHA continues to monitor the credentialing process, and the average number of days in workflow currently has a turnaround time of 26 days.
  - $\circ$   $\,$   $\,$  Providers added to the Region 6 network during the third quarter:
    - Boulder County: 4 adult and pediatric mental health providers
    - Broomfield County: 1 adult and pediatric mental health provider
    - Jefferson County: 20 adult mental health providers and 21 pediatric mental health providers
    - Other counties (outside of Region 6):
      - 3 acute care hospitals
      - 218 adult mental health providers
      - 1 child psychiatrist
      - 216 pediatric mental health providers
      - 21 psychiatric prescribers
      - 17 psychiatrist/physicians



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- 43 other providers, not categorized as an adult mental health provider, pediatric mental health provider, substance use provider, psychiatrist, child psychiatrist, or psychiatric prescriber
- Below is the current status of the contracting queue for Region 6:
  - Contracts distributed: 5
  - Contracts signed and returned for processing: 21
  - Contracts requested and pending distribution: 10

### NETWORK DEVELOPMENT, SUPPORT, AND IMPROVEMENT ACTIVITIES - Q4 UPDATES

- CCHA finalized rates agreements with the IMD facilities statewide prior to July 1, 2019.
- CCHA has one outstanding CMHC not yet contracted with Midwestern MHC. Midwestern MHC has indicated they will reach out when they are ready to move forward on contracting with CCHA.
- During the fourth quarter, CCHA continued efforts to proactively communicate with providers and work through behavioral health credentialing and contracting issues. An update on these efforts is as follows:
  - CCHA continues to monitor the credentialing process, and the average number of days in workflow currently has a turnaround time of 15 days.
  - Providers added to the Region 6 network during the fourth quarter:
    - Boulder County:
      - 11 adult mental health providers
      - 10 pediatric mental health providers
      - 1 psychiatric prescriber
    - Broomfield County:
      - 2 adult and pediatric mental health providers
      - Jefferson County:

- 122 adult mental health providers
- 117 pediatric mental health providers
- 20 psychiatric prescribers
- 14 psychiatric/physician providers
- 16 other providers not categorized as an adult mental health provider, pediatric mental health provider, substance use provider, psychiatrist, child psychiatrist, or psychiatric prescriber
- Other counties (outside of Region 6):
  - 212 adult mental health providers
  - 6 child psychiatrist
  - 184 pediatric mental health providers
  - 38 psychiatric prescribers
  - 19 psychiatrist/physicians
  - 26 other providers, not categorized as an adult mental health provider, pediatric mental health provider, substance use provider, psychiatrist, child psychiatrist, or psychiatric prescriber



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- Below is the current status of the contracting queue for Region 6:
  - Contracts distributed: 32
  - Contracts signed and returned for processing: 20
  - Contracts requested and pending distribution: 19



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

NOTE: For the Physical Health Provider Type, please enter either: Adult Primary Care, Family Medicine, Pediatric Primary Care, OB/GYN, CMHC, or Other.

	PHYSICAL HEALTH										
Network Provider (Practice sites) <sup>3</sup>	County	Provider Type <sup>4</sup>	Number of Practitioners <sup>5</sup>	New Provider	Left the Network	Accepting New Clients <sup>6</sup>	Provides after- hours care <sup>7</sup>	Single Case Agreement			
						Please Check if applicable					
39	Boulder	All	220	1 site	1 sites	201 practitioners	18 sites	None			
35	Boulder	Family Medicine	200	-	-	185 practitioners	18 sites	None			
36	Boulder	Adult Primary Care	199	-	-	184 practitioners	18 sites	None			
35	Boulder	Pediatric Primary Care	197	-	-	182 practitioners	18 sites	None			
3	Boulder	OB/GYN	19	-	-	15 practitioners	0 sites	None			
8	Broomfield	All	33	1 site	0 sites	30 practitioners	1 sites	None			
7	Broomfield	Family Medicine	32	-	-	29 practitioners	1 sites	None			
7	Broomfield	Adult Primary Care	32	-	-	29 practitioners	1 sites	None			
7	Broomfield	Pediatric Primary Care	32	-	-	29 practitioners	1 sites	None			
1	Broomfield	OB/GYN	1	-	-	1 practitioner	0 sites	None			

<sup>&</sup>lt;sup>3</sup> Categories are not mutually exclusive. For example, a clinic may be counted in Family Medicine, Adult Primary Care, and Pediatric Care.

the number of individual providers accepting new Medicaid members, as this is primarily managed at the practice level.

<sup>7</sup> Data for after-hours care reflects all providers offering weekend appointments and weekday appointments outside the hours of 8:00am to 5:00pm.



<sup>&</sup>lt;sup>4</sup> Totals for each provider type are not necessarily unique. For example, a single rendering provider is included in both the adult and pediatric practitioner totals if services are open to both demographics. Additionally, primary care provider information is inclusive of both voluntary and contractually required information. As such, the following information is likely underreported: providers' secondary and tertiary specialty types, particularly for OB/GYN specialists;

<sup>&</sup>lt;sup>5</sup> Kaiser PCMPs are excluded from this report, so the number of practitioners in Boulder and Jefferson counties is underreported for this reporting period. CCHA is working on validating provider data from Kaiser so it can be integrated into the Network Report.

<sup>&</sup>lt;sup>6</sup> With CCHA's efforts to refine and streamline provider data reporting methodologies, CCHA is now reporting the number of practitioners accepting new clients rather than the number of PCMP sites.

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	PHYSICAL HEALTH (continued)									
Network Provider (Practice sites) <sup>8</sup>	County	Provider Type <sup>9</sup>	Number of Practitioners <sup>10</sup>	New Provider	Left Network	Accepting New Clients <sup>11</sup>	Provides after- hours care <sup>12</sup>	Single Case Agreement		
1	Clear Creek	All	15	-	-	14 practitioners	0 sites	None		
1	Clear Creek	Adult Primary Care	15	-	-	14 practitioners	0 sites	None		
1	Clear Creek	Family Medicine	15	-	-	14 practitioners	0 sites	None		
1	Clear Creek	Pediatric Primary Care	15	-	-	14 practitioners	0 sites	None		
0	Clear Creek	OB/GYN	0	-	-	0 practitioners	0 sites	None		
0	Gilpin	All	0	-	-	0 practitioners	0 sites	None		
68	Jefferson	All	334	2 sites	4 sites	289 practitioners	31 sites	None		
63	Jefferson	Family Medicine	286	-	-	248 practitioners	30 sites	None		
63	Jefferson	Adult Primary Care	282	-	-	245 practitioners	30 sites	None		
65	Jefferson	Pediatric Primary Care	318	-	-	281 practitioners	31 sites	None		
3	Jefferson	OB/GYN	12	-	-	5 practitioners	0 sites	None		

<sup>&</sup>lt;sup>12</sup> Data for after-hours care reflects all providers offering weekend appointments and weekday appointments outside the hours of 8:00am to 5:00pm.



<sup>&</sup>lt;sup>8</sup> Categories are not mutually exclusive. For example, a clinic may be counted in Family Medicine, Adult Primary Care, and Pediatric Care.

<sup>&</sup>lt;sup>9</sup> Totals for each provider type are not necessarily unique. For example, a single rendering provider is included in both the adult and pediatric practitioner totals if services are open to both demographics. Additionally, primary care provider information is inclusive of both voluntary and contractually required information. As such, the following information is likely underreported: providers' secondary and tertiary specialty types, particularly for OB/GYN specialists; the number of individual providers accepting new Medicaid members, as this is primarily managed at the practice level.

<sup>&</sup>lt;sup>10</sup> Kaiser PCMPs are excluded from this report, so the number of practitioners in Boulder and Jefferson counties is underreported for this reporting period. CCHA is working on validating provider data from Kaiser so it can be integrated into the Network Report.

<sup>&</sup>lt;sup>11</sup> With CCHA's efforts to refine and streamline provider data reporting methodologies, CCHA is now reporting the number of practitioners accepting new clients rather than the number of PCMP sites.

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RAE Name: Colorado Community Health Alliance Region # 6 Period Covered: Quarter 4 SFY 2018-19 NOTE: For the Behavioral Health Provider Types, please enter either: Adult Mental Health Provider, Pediatric Mental Health Provider, Substance Use Provider, Psychiatrist, Child Psychiatrist, Psychiatric Prescriber, or Other.

	BEHAVIORAL HEALTH									
Network Provider (Practice sites) <sup>13</sup>	County <sup>14</sup>	Provider Type	The Number of Licensed Behavioral Health Practitioners and Clinicians <sup>15</sup>	New Provider	Left the Network	Accepting New Clients	Provides after- hours care	Single Case Agreement	Located in PCMP Practice <sup>16</sup>	
						Please Ch	eck if applic	able		
1	BOULDER	Acute Care Hospitals	1	0	0	1	1	0	0	
106	BOULDER	Adult Mental Health	319	10	0	319	79	0	38	
105	BOULDER	Pediatric Mental Health	318	9	0	318	78	0	38	
12	BOULDER	Psychiatric Prescriber	18	1	0	18	0	0	4	
8	BOULDER	Psychiatrist/Physician	15	0	0	15	0	0	4	
6	BOULDER	Substance Use Disorder	4	0	0	4	1	0	0	
8	BOULDER	Other	10	3	0	10	4	0	1	
17	BROOMFIELD	Adult Mental Health	22	2	0	22	16	0	1	
16	BROOMFIELD	Pediatric Mental Health	22	1	0	22	16	0	1	
2	BROOMFIELD	Other	2	0	0	2	1	0	0	
1	CLEAR CREEK	Adult Mental Health	1	0	0	1	1	0	0	
1	CLEAR CREEK	Pediatric Mental Health	1	0	0	1	1	0	0	
1	GILPIN	Adult Mental Health	1	0	0	1	0	0	0	

<sup>&</sup>lt;sup>13</sup> Number of practice sites reflects unique addresses among licensed clinicians. A practice site was considered unique if any part of a complete address was unique, including any variation in abbreviations and suite numbers.

<sup>&</sup>lt;sup>16</sup> Number of practice sites located in PCMP practice reflects the number of unique addresses among licensed clinicians that had an exact match with the address of a PCMP location in Region 6. This is not necessarily an indication that the behavioral health provider is integrated in the PCMP practice. Since PCMP sites and behavioral health practices can operate as separate entities at a single physical location, the number of behavioral health clinicians located in a PCMP practice is not representative of integrated physical/behavioral health providers.



<sup>&</sup>lt;sup>14</sup> "Other" County includes all counties outside of Region 6.

<sup>&</sup>lt;sup>15</sup> In order for CCHA to report on the number of licensed behavioral health providers in accordance with the Behavioral Health Provider Type categories indicated in this report, CCHA created a manual cross-walk. CCHA continues to refine the methodology by which behavioral health provider specialties correlate to the specified provider types in this report.

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	BEHAVIORAL HEALTH (continued)									
Network Provider (Practice sites) <sup>17</sup>	County <sup>18</sup>	Provider Type	The Number of Licensed Behavioral Health Practitioners and Clinicians <sup>19</sup>	New Provider	Left the Network	Accepting New Clients	Provides after- hours care	Single Case Agreement	Located in PCMP Practice <sup>20</sup>	
						Please Che	ck if applicab	le		
1	GILPIN	Pediatric Mental Health	1	0	0	1	0	0	0	
1	JEFFERSON	Acute Care Hospitals	1	1	0	1	1	0	103	
167	JEFFERSON	Adult Mental Health	<mark>5</mark> 65	123	0	565	152	0	76	
1	JEFFERSON	Child Psychiatrist	1	1	0	1	1	0	7	
167	JEFFERSON	Pediatric Mental Health	452	118	0	452	151	0	3	
12	JEFFERSON	Psychiatric Prescriber	48	19	0	48	4	0	0	
10	<b>JEFFERSON</b>	Psychiatrist/Physician	31	14	0	31	1	0	1	
11	JEFFERSON	Substance Use Disorder	9	1	0	9	3	0	0	
14	JEFFERSON	Other	22	16	0	22	2	0	0	
15	Other	Acute Care Hospitals	12	4	0	12	7	0	0	
906	Other	Adult Mental Health	2139	192	2	2129	637	0	0	
21	Other	Child Psychiatrist	13	6	0	13	1	0	0	
910	Other	Pediatric Mental Health	2135	194	2	2124	633	0	0	
114	Other	Psychiatric Prescriber	225	35	0	222	25	0	0	
80	Other	Psychiatrist/Physician	128	17	0	126	11	0	0	
51	Other	Substance Use Disorder	28	2	0	28	12	0	0	
90	Other	Other	157	21	0	141	11	0	0	

<sup>17</sup> Number of practice sites reflects unique addresses among licensed clinicians. A practice site was considered unique if any part of a complete address was unique, including any variation in abbreviations and suite numbers.

<sup>18</sup> "Other" County includes all counties outside of Region 6.

<sup>19</sup> In order for CCHA to report on the number of licensed behavioral health providers in accordance with the Behavioral Health Provider Type categories indicated in this report, CCHA created a manual cross-walk. CCHA continues to refine the methodology by which behavioral health provider specialties correlate to the specified provider types in this report.

<sup>20</sup> Number of practice sites located in PCMP practice reflects the number of unique addresses among licensed clinicians that had an exact match with the address of a PCMP location in Region 6. Clinicians affiliated with more than one PCMP location may be included in the totals. Totals for each provider type are not necessarily unique if a clinician provides both adult and pediatric mental health services and/or if the clinician renders services in more than one PCMP location.



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

PHYSICAL HEALTH								
County	Number of Practitioners <sup>21</sup>	Number of Enrolled Members <sup>22</sup>	Ratio for Adult Practitioner	Ratio for Pediatric Practitioner	Ratio for-Mid Level Adult Practitioner			
Boulder	220	39,922	199:24,609	197:15,313	53:31,922			
Broomfield	33	5,630	32:3,367	32:2,263	1:1,126			
Clear Creek	15	889	15:604		1:889			
Gilpin	0	844	0:558	0:286	0:844			
Jefferson	334	68,263	282:41,357	159:13,453	93:68,263			

BEHAVIORAL HEALTH								
County	The Number of Licensed Behavioral Health Practitioners and Clinicians	Number of Enrolled Members <sup>19</sup>	Ratio for Adult Mental Health Practitioner	Ratio for Pediatric Mental Health Practitioner	Ratio for Substance Use Disorder Practitioner			
Boulder	349	39,922	319:24,609	318:15,313	2:19,961			
Broomfield	24	5,630	22:3,367	22:2,263	0:5,630			
Clear Creek	1	889	1:604	1:285	0:889			
Gilpin	1	844	1:558	1:286	0:844			
Jefferson	628	68,263	565:41,357	226:13,453	9:68,263			

<sup>&</sup>lt;sup>22</sup> Source of enrollment numbers: 834 file. The number includes the unique members who were enrolled during the reporting period.



<sup>&</sup>lt;sup>21</sup> Kaiser PCMPs are excluded from this report, so the number of practitioners in Boulder and Jefferson counties is underreported for this reporting period. CCHA is working on validating provider data from Kaiser so it can be integrated into the Network Report.