



## Appendix B - Access to Care Metrics

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# 1. Dialysis and Dialysis-related Services

## 1.1 Facility

### 1.1.1 Panel Size Analysis

The first part of the panel size analysis considers the number of utilizers per provider for the **Dialysis and Dialysis-related Services (Facility)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024)<sup>1</sup>.

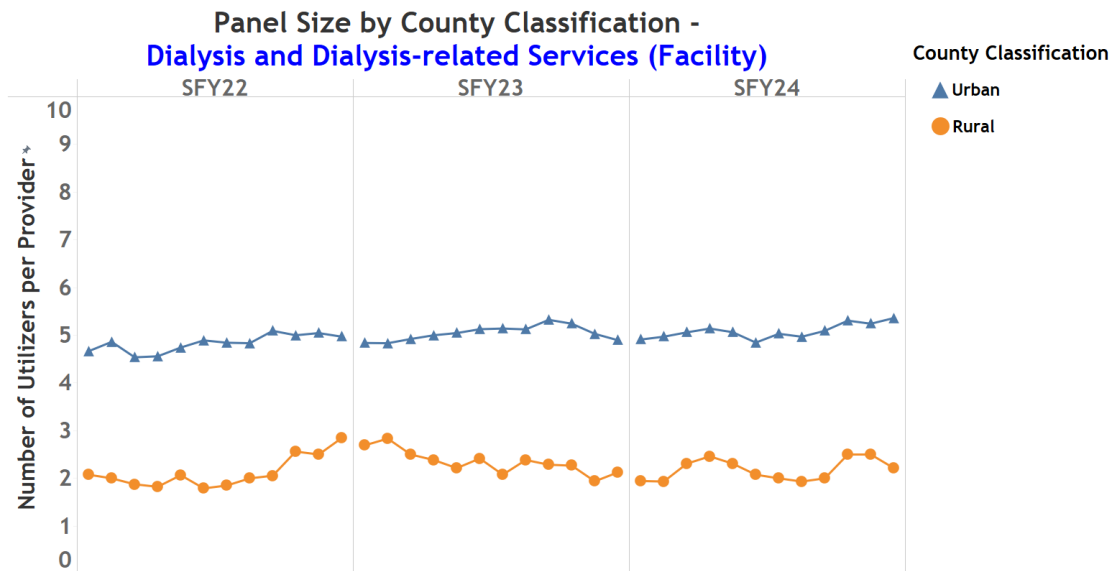


Figure 1.

As shown in Figure 1, in urban areas during SFY 2021-22 to 2023-24, the numbers of utilizers per provider ranged from 4.54 to 5.36. In rural areas, the number of utilizers per provider ranged from 1.79 to 2.85. The overall trend over these years for each region type is stable<sup>2</sup>.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Dialysis and Dialysis-related Services (Facility)** category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 2, the number of utilizers per provider was highest in El Paso County. Additionally, Montezuma and Pueblo County had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern, Western, and Central parts of Colorado.

<sup>1</sup> For the 2025 panel size analysis, rural and frontier classified counties have been combined under rural. Consistent with previous review years, county classifications are determined by their Regional Accountable Entity (RAE) classification.

<sup>2</sup> Dialysis and dialysis-related services (facility) used billing provider ID to calculate the number of providers in the state. Other service categories used rendering provider ID to calculate the number of providers (except for DIDD, which used rendering provider NPI). This is because the rendering provider ID was unavailable for dialysis and dialysis-related services (facility), whereas for DIDD, rendering and billing provider ID were either unavailable or invalid for a significant portion of claims. This applies to panel size, penetration rate, special provider metrics, and the dialysis facility in-home services analysis.

**Panel Size by County (SFY24) - Dialysis and Dialysis-related Services (Facility)**

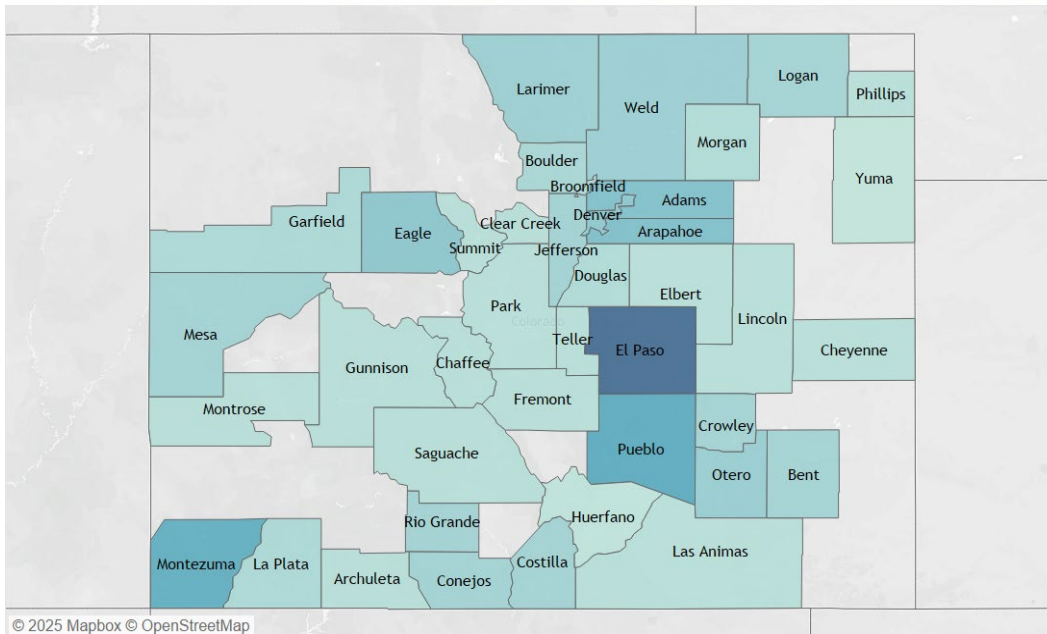


Figure 2.

### 1.1.2 Penetration Rate

The penetration rate analysis considers the number of members that utilized services in the **Dialysis and Dialysis-related Services (Facility)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Dialysis and Dialysis-related Services (Facility)**

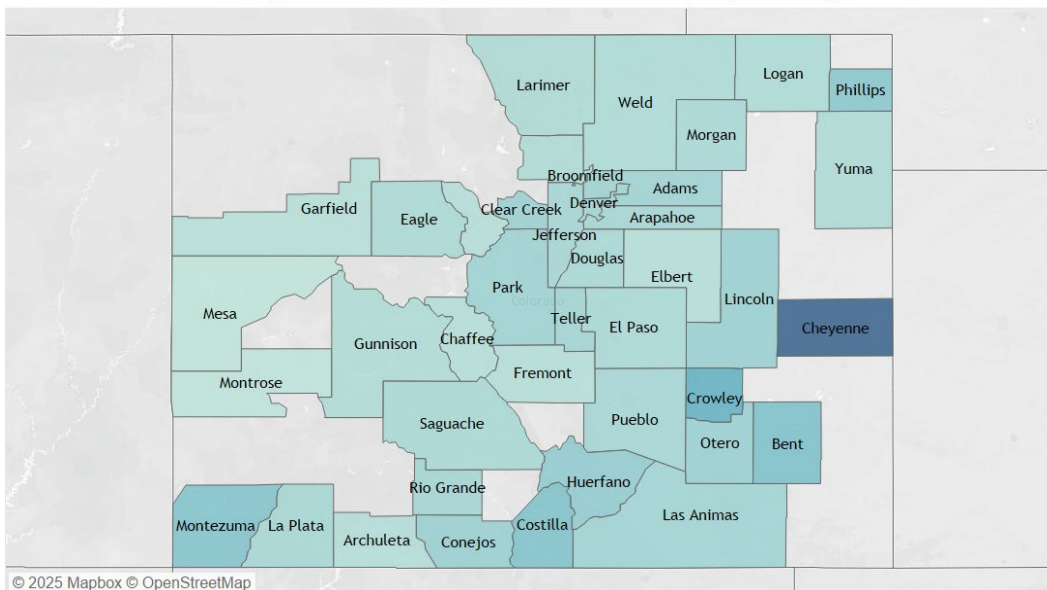


Figure 3.

As shown in Figure 3, members in 41 of Colorado’s 64 counties utilized services in this category. Other than in Cheyenne County, which had the highest penetration rate, the penetration rate for this service category across the other 40 counties was mostly uniform.

### 1.1.3 In-Home Services Analysis

The first part of the in-home services analysis considered the number of individual members that utilized services in the **Dialysis and Dialysis-related Services (Facility)** category and what percentage of those members received at least one in-home dialysis service<sup>3</sup>.

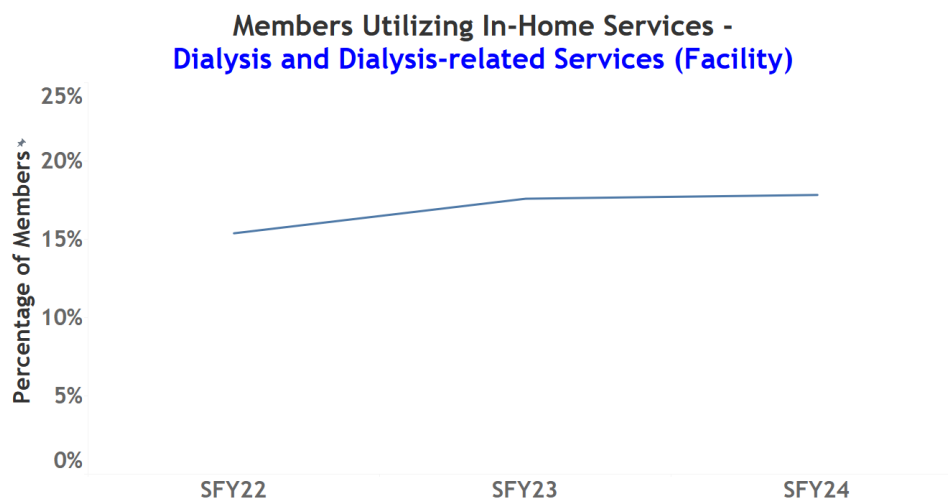


Figure 4.

As shown in Figure 4, the percentage of individual members that utilized in-home **Dialysis and Dialysis-related Services (Facility)** increased during SFY 2021-22 and remained relatively stable from SFY 2022-23 to SFY 2023-24.

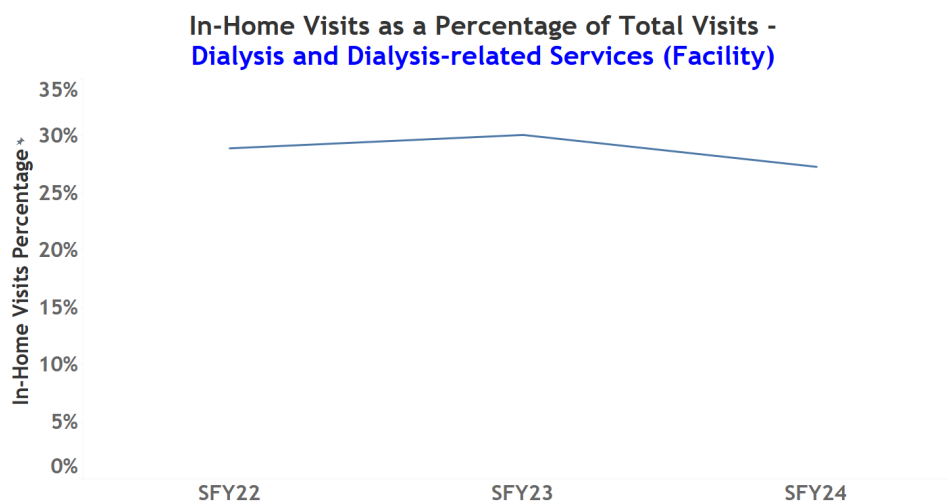


Figure 5.

<sup>3</sup> The dialysis and dialysis-related services (facility) category uses the in-home service analysis in place of the telemedicine analysis, which is seen across other service categories, as applicable. This is because the in-home service analysis is a more relevant measure for dialysis and dialysis-related services (facility).

The second part of the in-home analysis (Figure 5) considered the number of total visits<sup>4</sup> in the **Dialysis and Dialysis-related Services (Facility)** category and what percentage of those visits were delivered in members' homes across SFY 2021-22 to SFY 2023-24.

As shown in Figure 5, the overall percentage of total visits that were delivered in members' homes for **Dialysis and Dialysis-related Services (Facility)** remained relatively stable during SFY 2021-22, then decreased from SFY 2022-23 to SFY 2023-24.

### 1.1.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Dialysis-related Services (Facility)** providers.

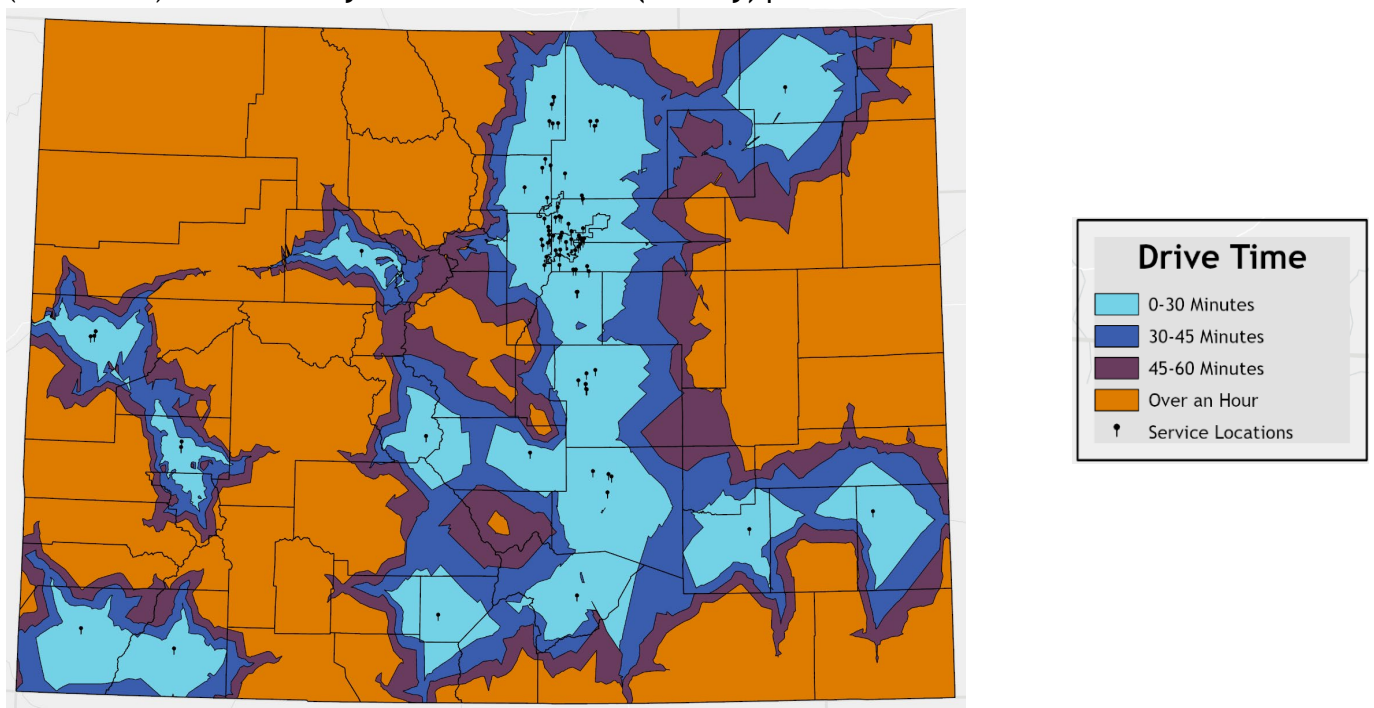


Figure 6.

Figure 6 shows the drive time bands across the state wherein members reside, relative to **Dialysis and Dialysis-related Services (Facility)** providers. From SFY 2021-22 to SFY 2023-24, 91.86% of total members resided 30 minutes or less from a provider; 3.18% of total members resided approximately 30-45 minutes; 2.06% of total members resided 45-60 minutes; and 2.91% of total members resided over an hour from a provider.

<sup>4</sup> In dialysis and dialysis-related services (facility), a visit equates to a delivered service.

## 1.2 Non-Facility

### 1.2.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Dialysis and Dialysis-related Services (Non-Facility)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

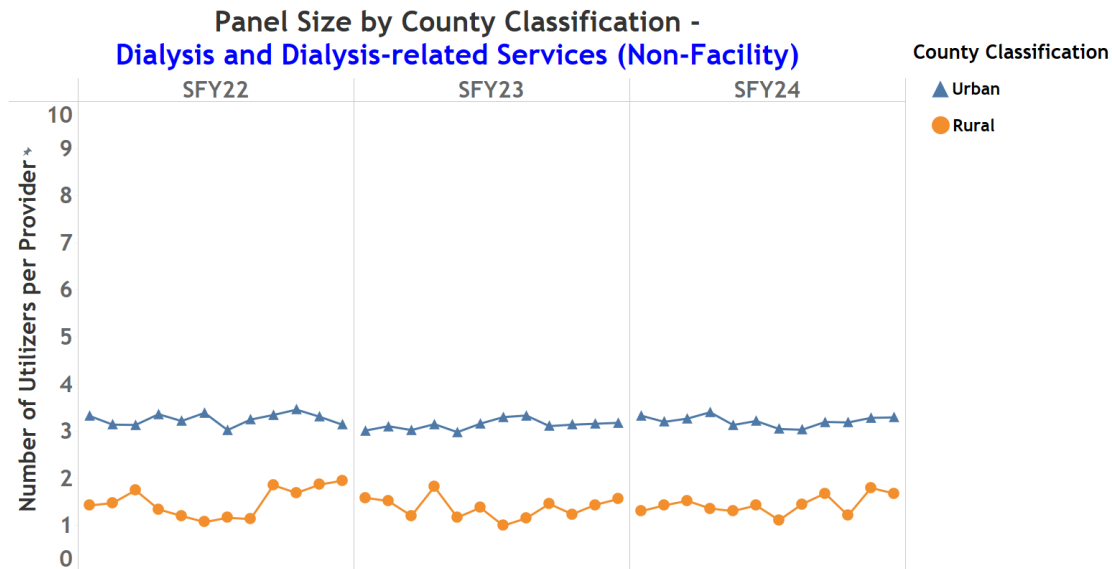


Figure 7.

As shown in Figure 7, in urban areas during SFY 2021-22 to SFY 2023-24, the numbers of utilizers per provider ranged from 2.98 to 3.46. In rural areas, the number of utilizers per provider ranged from 1 to 1.95. The overall trend over these years for each region is stable.

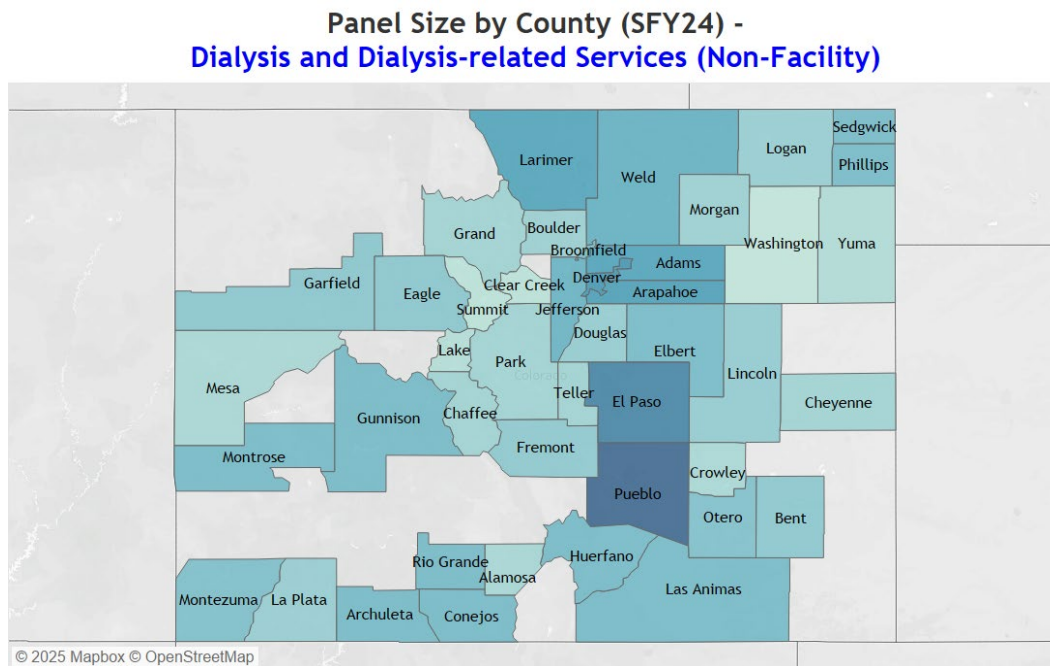


Figure 8.



The second part of the panel size analysis (Figure 8) considers the average number of utilizers per provider in each county for the **Dialysis and Dialysis-related Services (Non-Facility)** category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 8, in SFY 2023-24, the number of utilizers per provider was highest in Pueblo County, followed by El Paso County. Additionally, some counties along the I-25 corridor had relatively moderate panel sizes. However, their panel sizes did not exceed other counties by a substantial margin because the overall range of panel sizes was low. As such, Pueblo and El Paso County appeared higher because their number of utilizers to providers was proportionally larger than that in other counties. Meanwhile, the panel size across several counties in Eastern and Western Colorado was lower and relatively uniform.

## 1.2.2 Penetration Rate

The penetration rate analysis considers the number of members that utilized services in the **Dialysis and Dialysis-related Services (Non-Facility)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

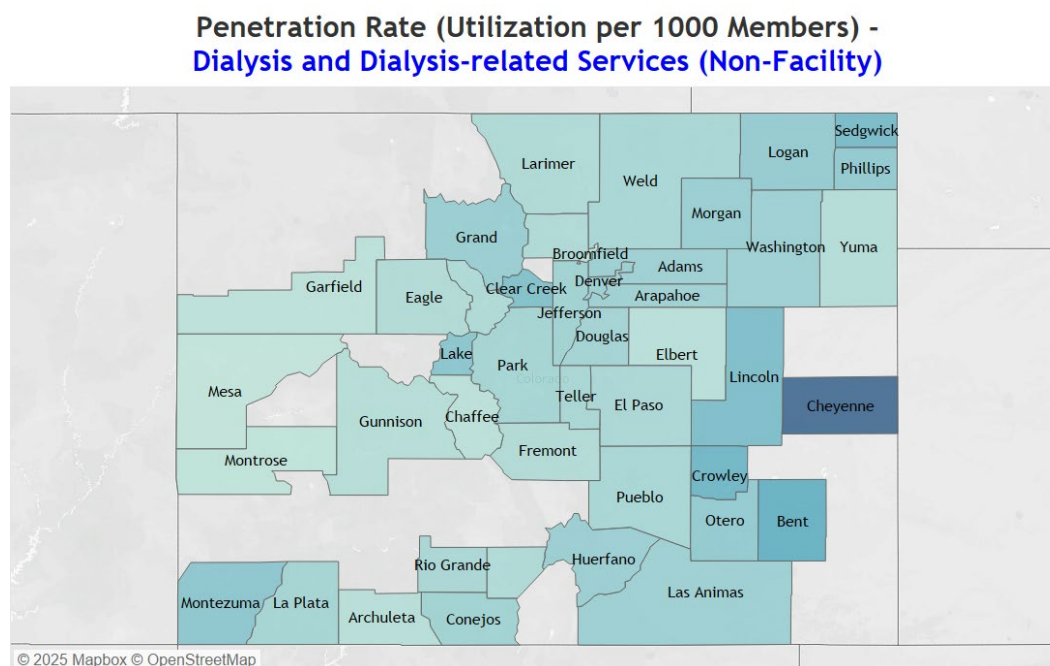


Figure 9.

As shown in Figure 9, members in 44 of Colorado's 64 counties utilized services in this category. Cheyenne County had the highest penetration rate, while the penetration rate across the other 43 counties for **Dialysis and Dialysis-related Services (Non-Facility)** was mostly uniform.



### 1.2.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Dialysis and Dialysis-related Services (Non-Facility)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

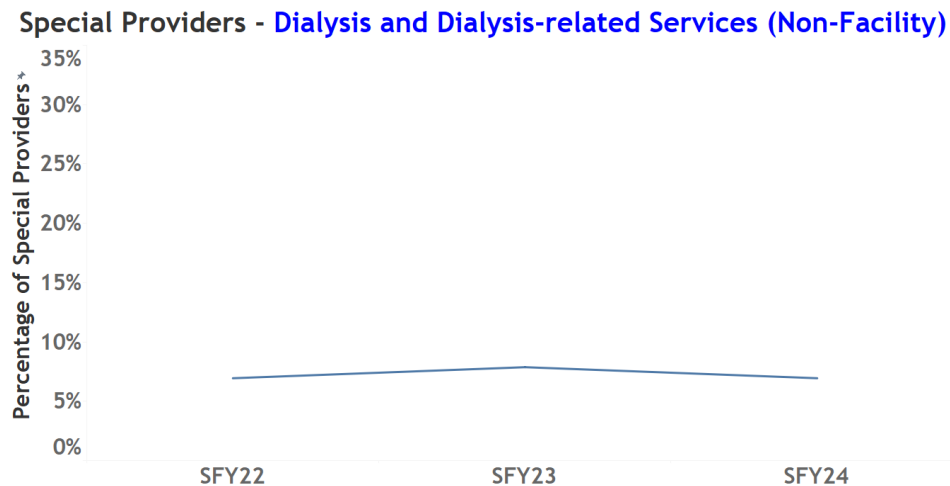


Figure 10.

As shown in Figure 10, the special provider percentage remained relatively stable from SFY 2021-22 to SFY 2022-23, increasing very slightly before decreasing very slightly from SFY 2022-23 to SFY 2023-24. One provider, a nurse practitioner, decreased in the number of members served during this time frame. After further investigation, this provider was found to be no longer enrolled to provide services to members.

### 1.2.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Dialysis and Dialysis-related Services (Non-Facility)** providers.

Figure 11 shows the drive time bands across the state wherein members reside, relative to **Dialysis and Dialysis-related Services (Non-Facility)** providers. From SFY 2021-22 to SFY 2023-24, 83.05% of total members resided 30 minutes or less from a provider; 4.71% of total members resided approximately 30-45 minutes; 2.49% of total members resided 45-60 minutes; and 9.75% of total members resided over an hour from a provider.

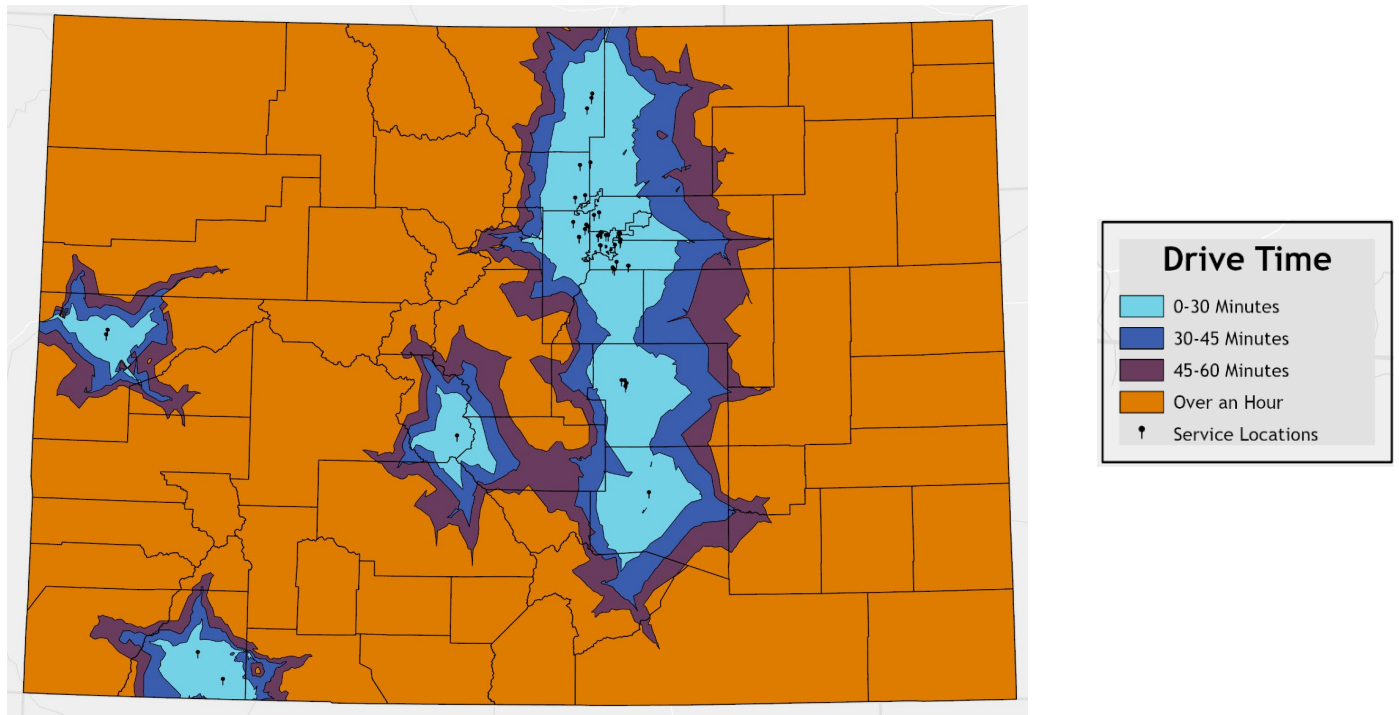


Figure 11.

## 2. Dental for People with Intellectual and Developmental Disabilities (DIDD)

### 2.1 Panel Size Analysis

The first part of the panel size analysis considers the number of utilizers per provider for the **DIDD** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

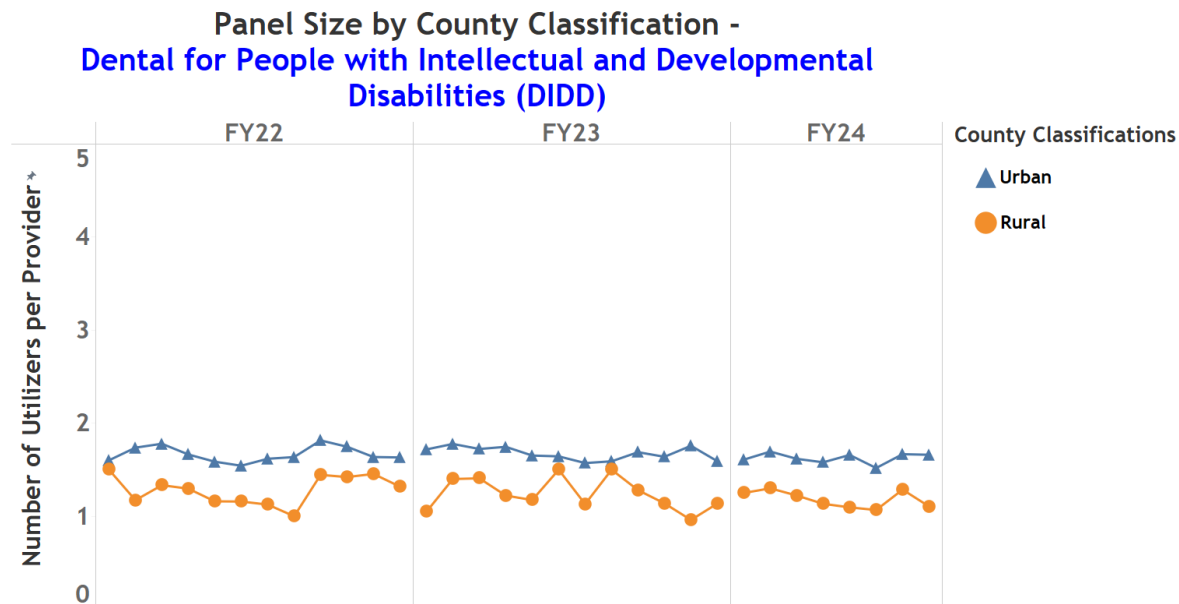


Figure 12.

As shown in Figure 12, in urban areas during SFY 2021-22 to 2023-24, the number of utilizers per provider ranged from 1.52 to 1.81. In rural areas, the number of utilizers per provider ranged from 0.96 to 1.5. The overall trend over these years for both regions was stable. However, low overall utilizer and provider numbers in rural regions caused panel size to be more sensitive to changes, resulting in slight month-to-month fluctuations.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **DIDD** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 13, in SFY 2023-24, the number of utilizers per provider was highest in Park County, followed by Mesa County and El Paso County, which had relatively moderate panel sizes. Meanwhile, the panel size across the other counties in Eastern and Western Colorado was lower and relatively uniform.

**Panel Size by County (SFY24) -  
Dental for People with Intellectual and Developmental Disabilities (DIDD)**

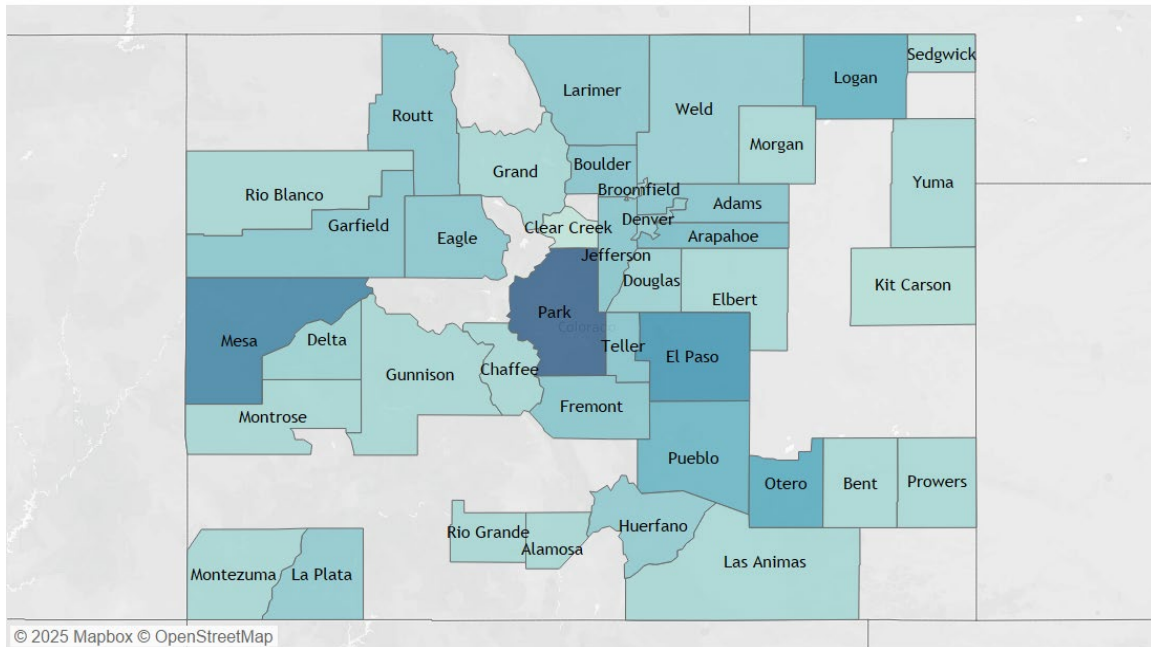


Figure 13.

## 2.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **DIDD service** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024).

**Penetration Rate (Utilization per 1000 Members) -  
Dental for People with Intellectual and Developmental Disabilities (DIDD)**

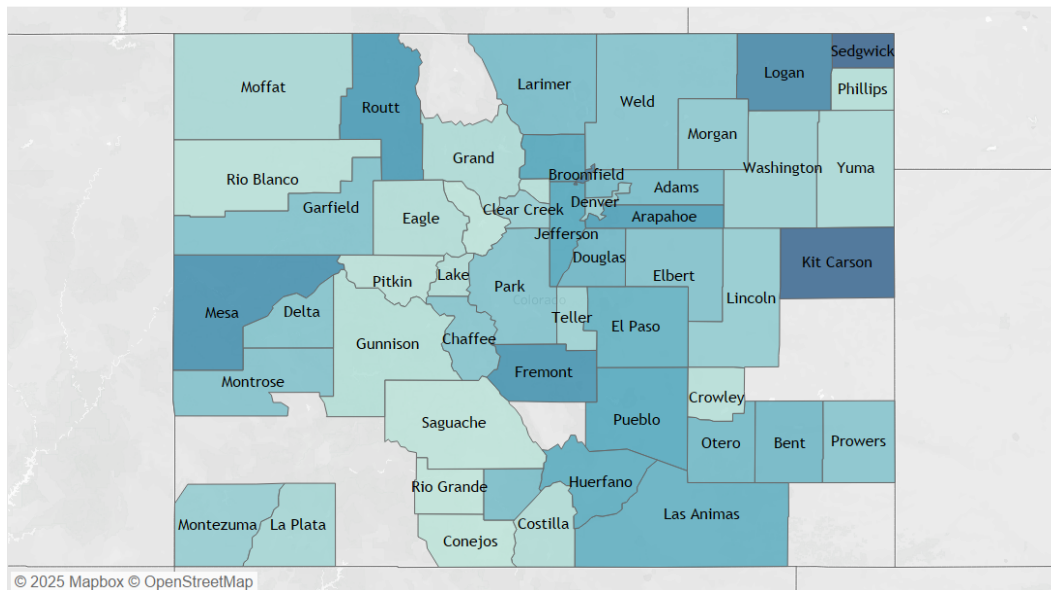


Figure 14.

As shown in Figure 14, members in 52 of Colorado’s 64 counties utilized services in this category. Sedgwick County had the highest penetration rate, followed closely by Kit Carson County, while the penetration rate across the other 50 counties for DIDD was lower and mostly uniform. However, there were several counties throughout the state that stood out as having relatively moderate penetration rates, but there was not a pattern in their distribution.

## 2.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **DIDD** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

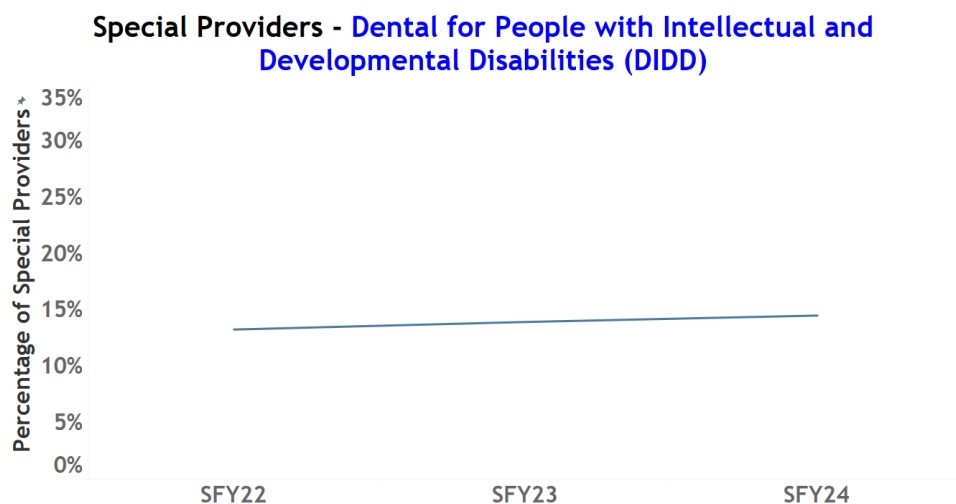


Figure 15.

As shown in Figure 15, the special provider percentage remained stable, with a slight increase from SFY 2021-22 to SFY 2023-24.

### 3. Durable Medical Equipment (DME)

#### 3.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Durable Medical Equipment (DME)** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

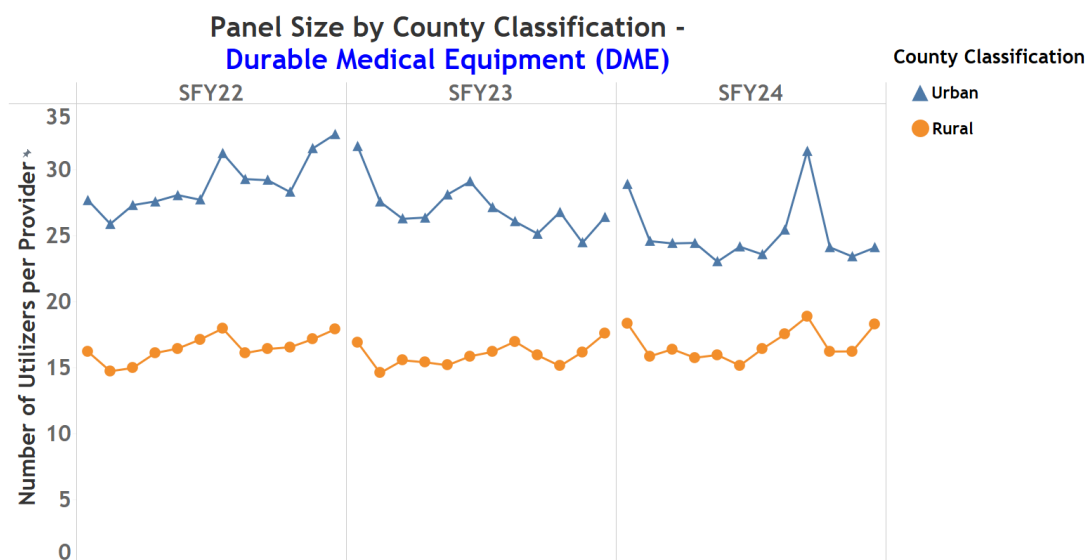


Figure 16.

As shown in Figure 16, in urban areas during SFY 2021-22 to 2023-24, the number of utilizers per provider ranged from 23.04 to 32.7. In rural areas, the number of utilizers per provider ranged from 14.6 to 18.89. Urban panel size increased during SFY 2021-22 due to increases in utilizers with decreases in providers, before beginning to trend downward across SFY 2022-23 to SFY 2023-24 due to increasing numbers of providers. Meanwhile, panel size in rural regions was stable in comparison.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Durable Medical Equipment (DME)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 17, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed by nearby Pueblo County. Additionally, some counties along the northern part of the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, the counties with the lower panel sizes were mostly located in the Eastern, Western, and South-Central parts of Colorado.

**Panel Size by County (SFY24) - Durable Medical Equipment (DME)**

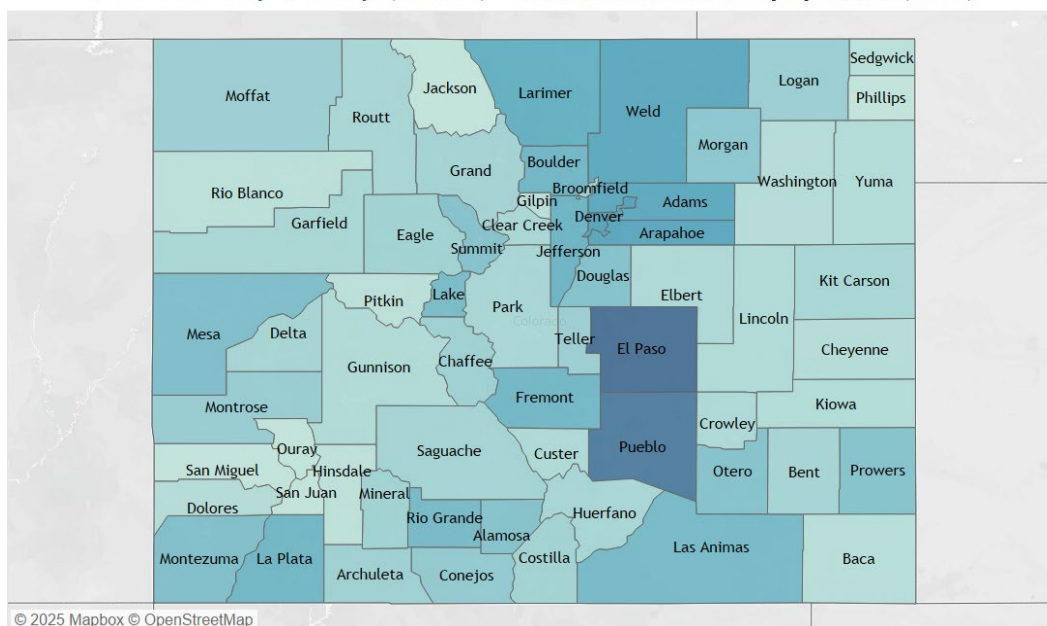


Figure 17.

### 3.2 Penetration Rate

The penetration rate analysis considers the number of members that utilized services in the **Durable Medical Equipment (DME)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Durable Medical Equipment (DME)**

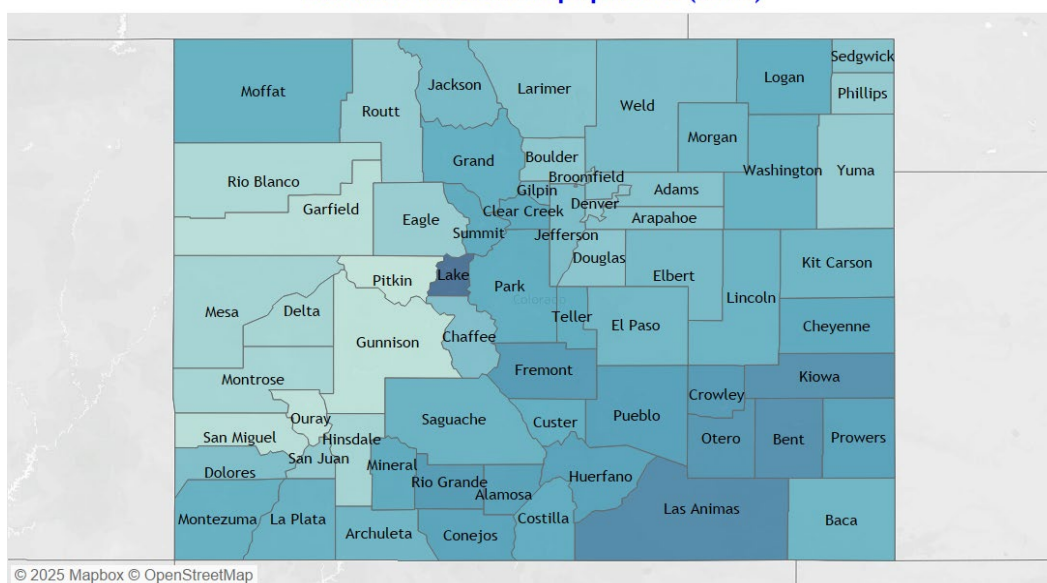


Figure 18.

As shown in Figure 18, members in all of Colorado's 64 counties utilized services in this category. Lake County had the highest penetration rate. However, the penetration rate across



the other 63 counties was uneven for DME services. For instance, the South-Eastern region of Colorado exhibited a significantly higher penetration rate for DME services, whereas the Western Slope had the lowest penetration rate.

### 3.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Durable Medical Equipment (DME)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

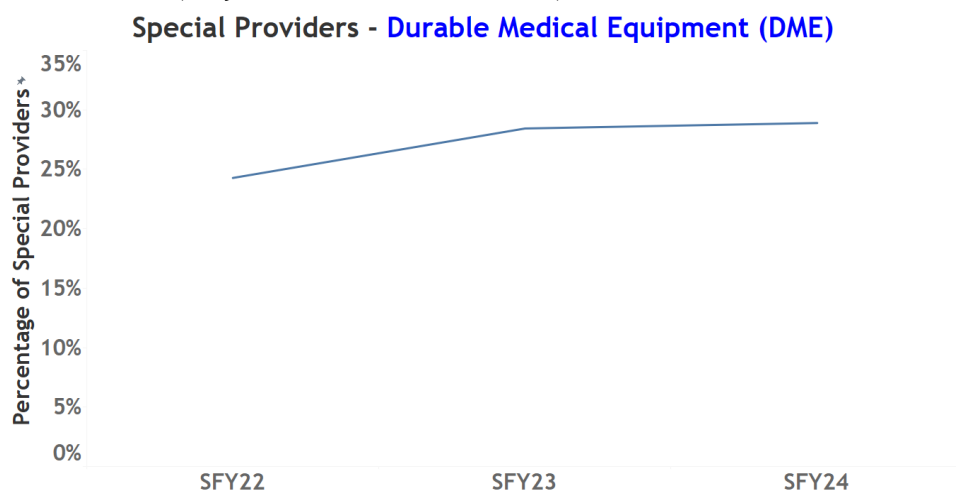


Figure 19.

As shown in Figure 19, the percentage of special providers had an increasing trend from SFY 2021-22 to SFY 2023-24. Several providers had a notable decrease in the number of members they served over these three fiscal years resulting in just one member served in SFY 2023-24. Additionally, for some providers, the number of members served increased substantially from SFY 2021-22 to SFY 2022-23 but decreased to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served among many providers can be attributed to an increasing trend of online retailers that provide DME, which enables members to have DME products delivered to their homes, rather than receiving them directly from a provider.

### 3.4 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Durable Medical Equipment (DME)** service category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 28% of DME providers statewide served Medicaid members.

### 3.5 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Durable Medical Equipment (DME)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers



(Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

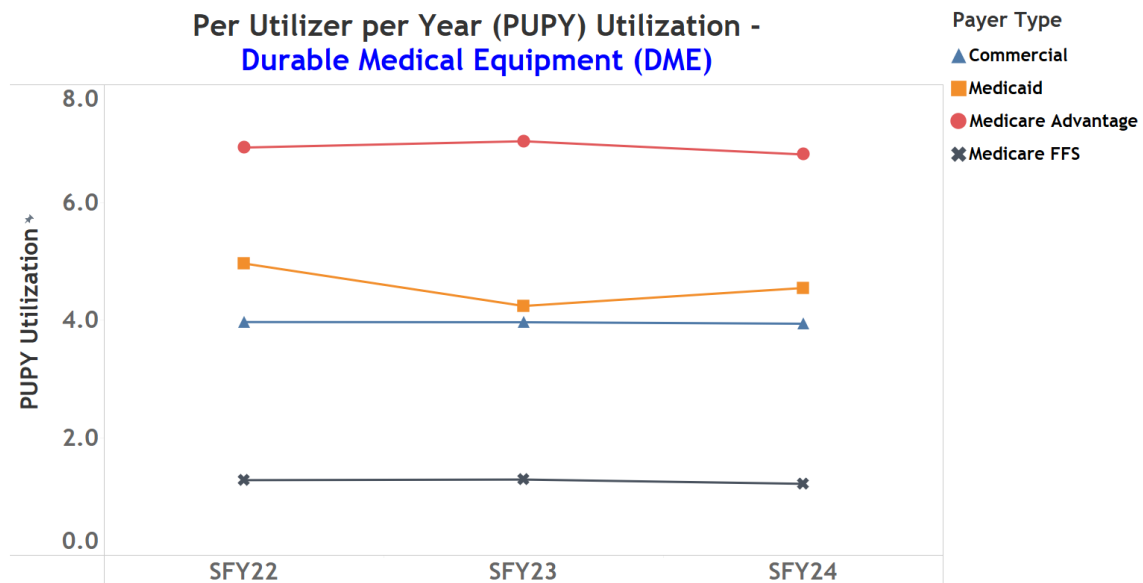


Figure 20.

As shown in Figure 20, statewide Medicaid utilization per utilizer per year for the **Durable Medical Equipment (DME)** category decreased from SFY 2021-22 to SFY 2022-23 and increased from SFY 2022-23 to SFY 2023-24 and was higher than commercial payers and Medicare FFS, but lower than Medicare Advantage.

## 4. Prosthetics, Orthotics, and Disposable Supplies (POS)

### 4.1 Prosthetics

#### 4.1.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **POS Prosthetics** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

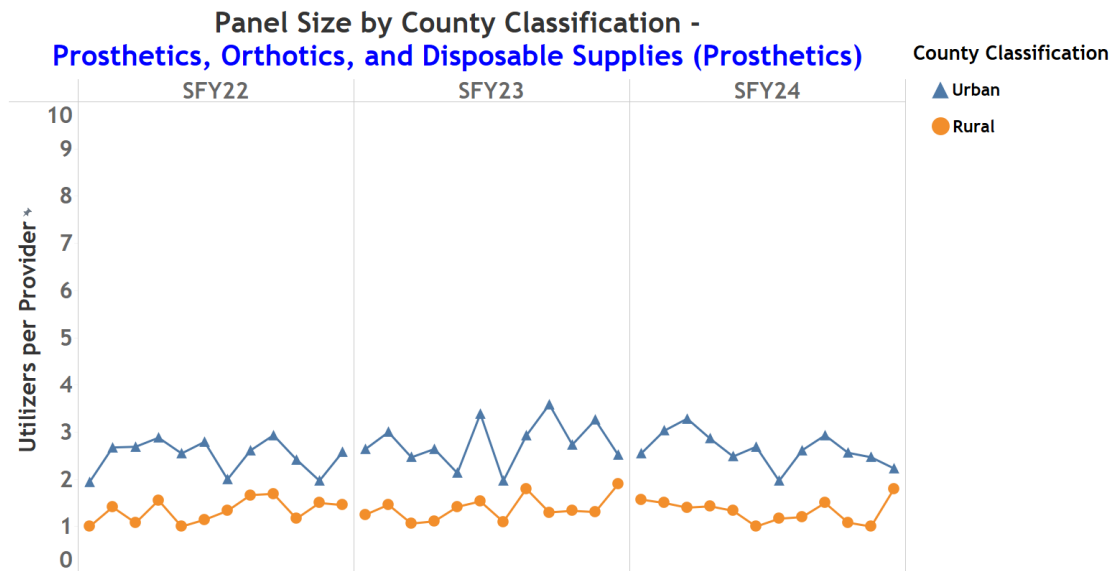


Figure 21.

As shown in Figure 21, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 1.95 and 3.59. In rural areas, this metric ranged from 1 to 1.9. The overall trend over these three years for each region type was relatively stable, although urban regions had several minor month-to-month fluctuations throughout the period.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **POS Prosthetics** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 22, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed by Denver County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as Bent County, had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern and Western parts of Colorado.

**Panel Size by County (SFY24) -  
Prosthetics, Orthotics, and Disposable Supplies (Prosthetics)**

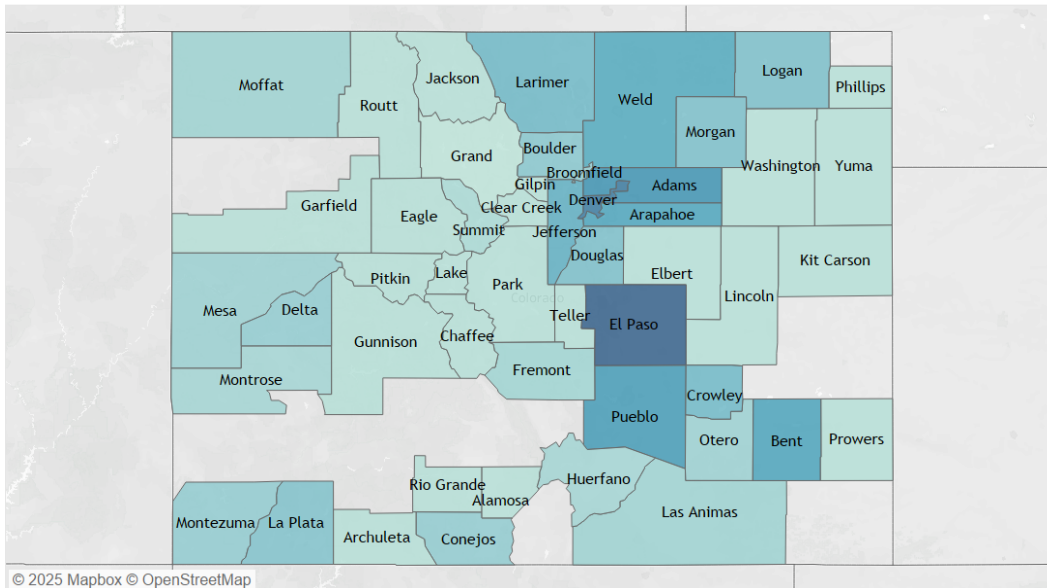


Figure 22.

#### 4.1.2 Penetration Rate

The penetration rate analysis considers the number of members that utilized services in the **POS Prosthetics** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Prosthetics, Orthotics, and Disposable Supplies (Prosthetics)**

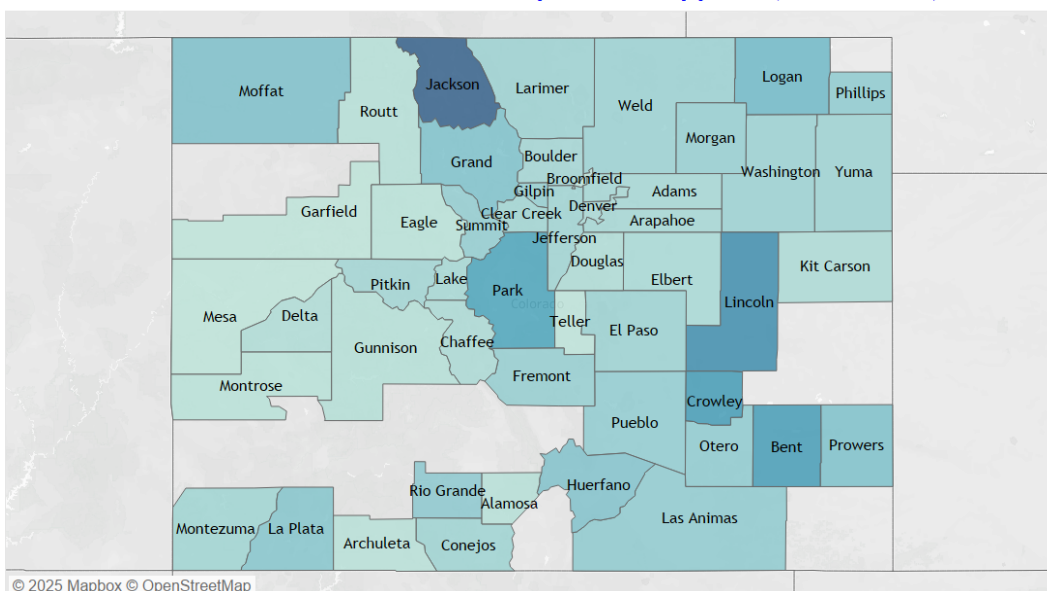


Figure 23.

As shown in Figure 23, members in 50 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Jackson County, with a few counties in Eastern and Central Colorado that had relatively moderate penetration rates. The other counties were lower and relatively uniform in their penetration rates throughout the state.

### 4.1.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **POS Prosthetics** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

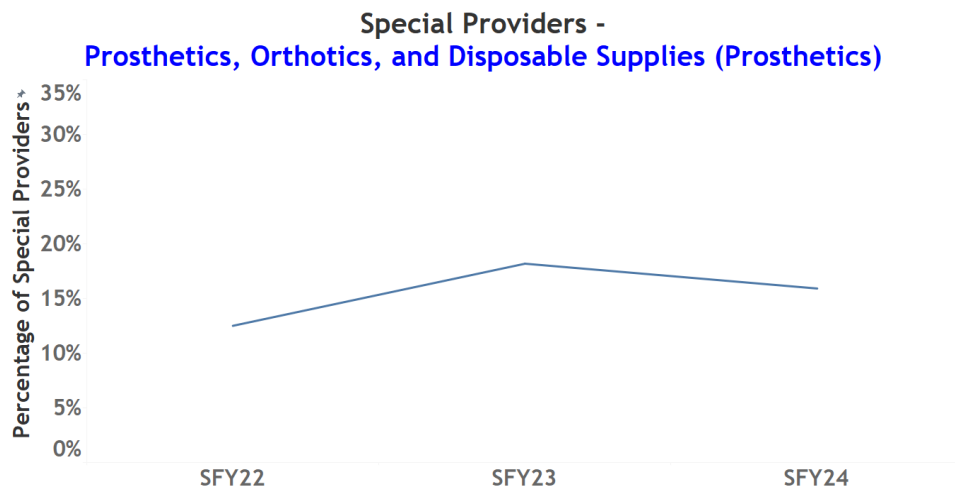


Figure 24.

As shown in Figure 24, the percentage of special providers increased from SFY 2021-22 to SFY 2022-23, before decreasing from SFY 2022-23 to SFY 2023-24. A few providers decreased in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served can be partially attributed to an increasing trend of more online POS retailers, which enables members to have prosthetics products delivered to their homes, rather than receiving them directly from a provider. However, this likely excludes the actual fitting of prosthetics by providers.

### 4.1.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **POS Prosthetics** providers.

Figure 25 shows the drive time bands across the state wherein members reside, relative to **POS Prosthetics** providers. From SFY 2021-22 to SFY 2023-24, 88.05% of total members resided 30 minutes or less from a provider; 4.22% of total members resided approximately 30-45 minutes; 2.60% of total members resided 45-60 minutes; and 5.12% of total members resided over an hour from a provider.

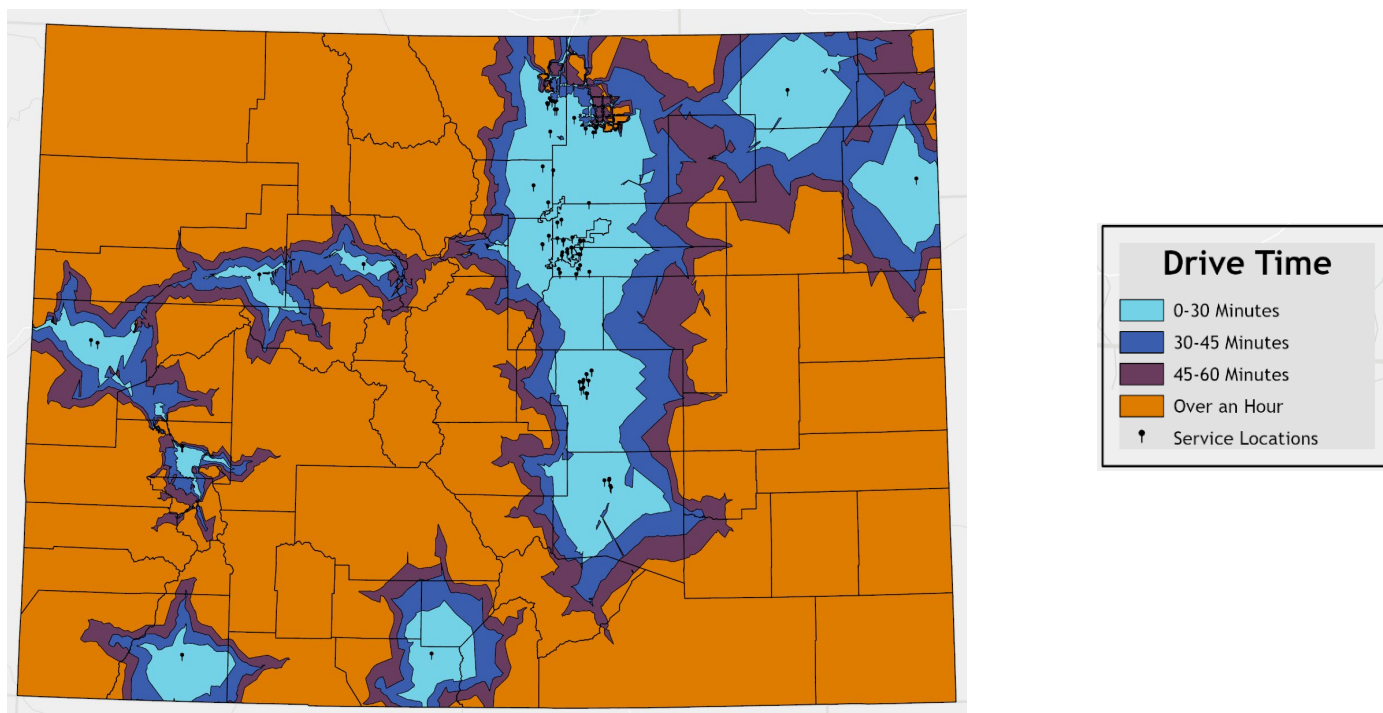


Figure 25.

#### 4.1.5 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **POS Prosthetics** service category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 29% of providers statewide served Medicaid members.

#### 4.1.6 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **POS Prosthetics** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 26, Statewide Medicaid utilization per utilizer per year for the **POS Prosthetics** category remained relatively stable from SFY 2021-22 to SFY 2023-24 and was very similar to other payers, although slightly higher than commercial payers and Medicare FFS, but about equal to Medicare Advantage.

Per Utilizer per Year (PUPY) Utilization -  
Prosthetics, Orthotics, and Disposable Supplies (Prosthetics)

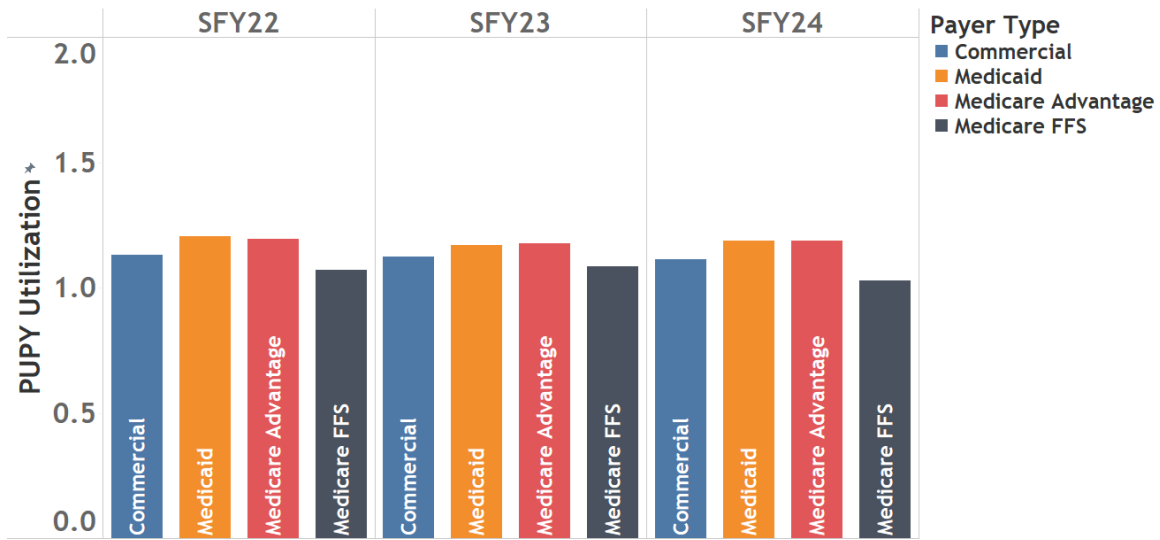


Figure 26.

## 4.2 Orthotics

### 4.2.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **POS Orthotics** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

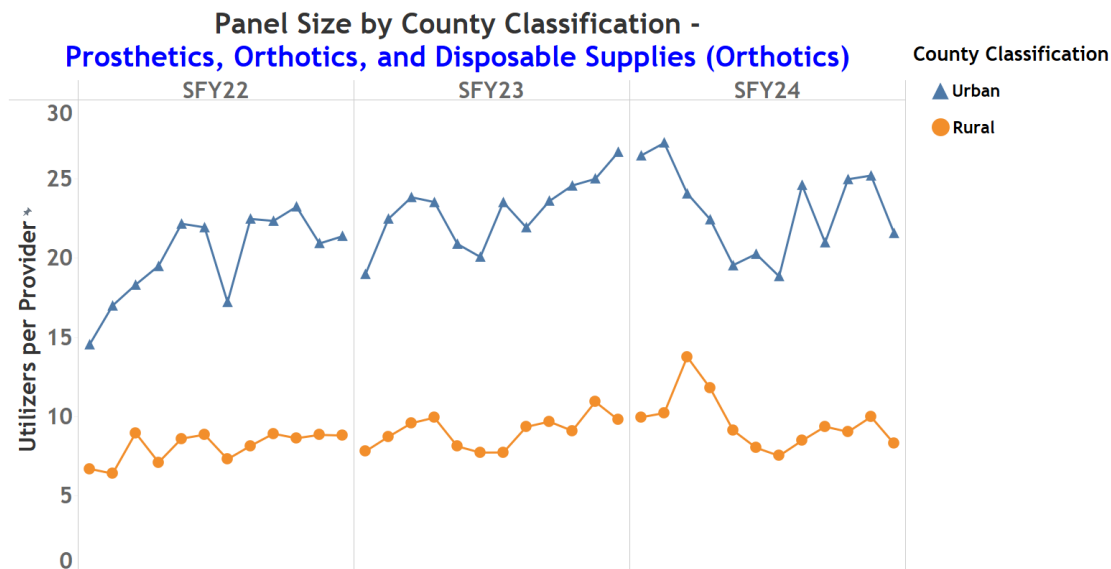


Figure 27.

As shown in Figure 27, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 14.55 and 27.28. In rural areas, this metric ranged from 6.39 to 13.76. At the beginning of SFY 2021-22, urban panel size increased then decreased, followed by another increase, before decreasing into the beginning of SFY 2022-23. Similar trends were noted at the beginning of SFY 2022-23, when initial increases were followed by decreases, before increasing to its highest point into the beginning of SFY 2023-24. These increases can be attributed to either: 1) a decrease in provider counts; 2) an increase in utilizers while provider count remained stable, or 3) an increase in utilizers that outpaced that of providers. An opposite trend was noted in SFY 2023-24, where a sizable decrease in panel size was due to utilizers decreasing or being outpaced by the growth in numbers of providers. Finally, the second half of SFY 2023-24 saw similar fluctuations as previous fiscal years. Meanwhile, the panel size in rural regions was relatively stable in comparison but had a notable increase in the beginning of SFY 2023-24 due to an increase in utilizers and decrease in providers, before the panel size decreased to similar levels as those in SFY 2021-22 and SFY 2022-23.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **POS Orthotics** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

**Panel Size by County (SFY24) -  
Prosthetics, Orthotics, and Disposable Supplies (Orthotics)**

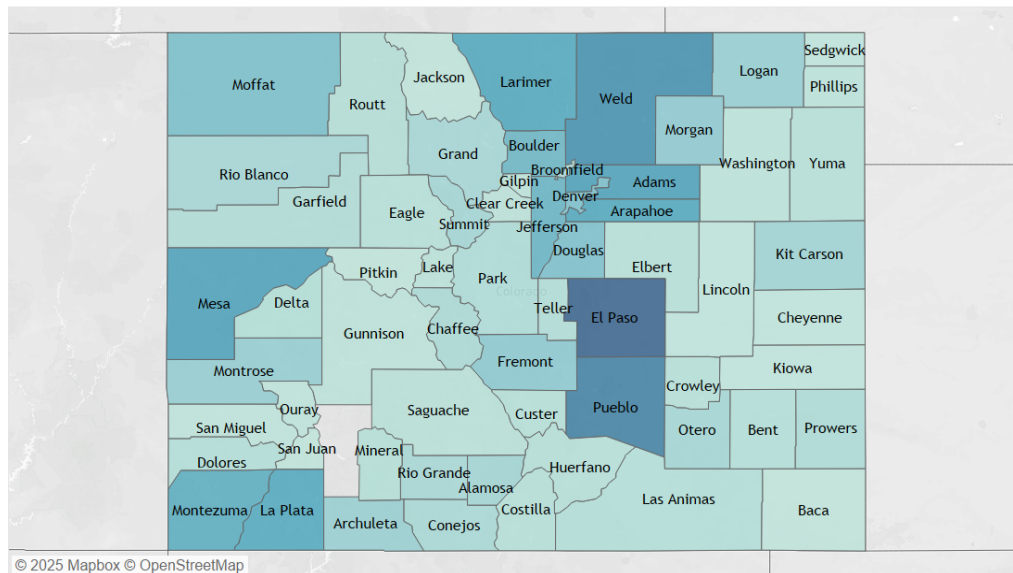


Figure 28.

As shown in Figure 28, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed by Pueblo County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as a select few in Western Colorado, had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern, Western, and South-Central parts of Colorado.

### 4.2.3 Penetration Rate

**Penetration Rate (Utilization per 1000 Members) -  
Prosthetics, Orthotics, and Disposable Supplies (Orthotics)**

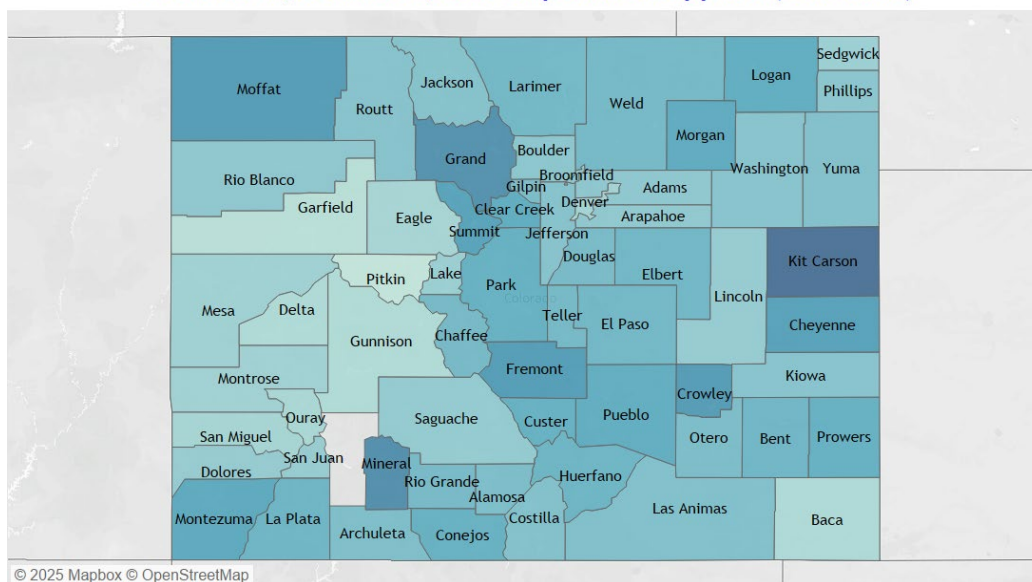


Figure 29.



The penetration rate analysis (Figure 29) considers the number of members that utilized services in the **POS Orthotics** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

As shown in Figure 29, members in 63 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Kit Carson County. Other counties were relatively uniform with moderate penetration rates throughout the state. However, counties on the Western Slope of Colorado had the lowest penetration rates.

#### 4.2.4 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **POS Orthotics** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

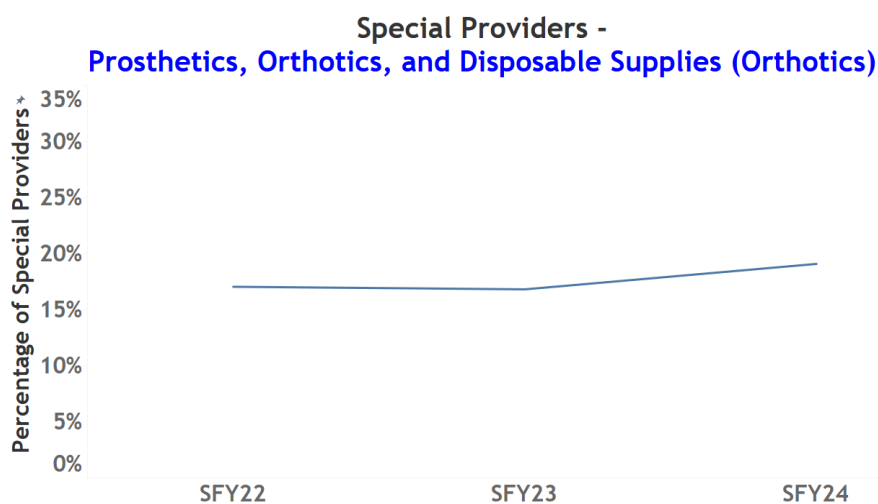


Figure 30.

As shown in Figure 30, the percentage of special providers remained stable, increasing slightly from SFY 2022-23 to SFY 2023-24. One provider decreased in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served can be partially attributed to an increasing trend of more online POS retailers, which enables members to have orthotics products delivered to their homes, rather than receiving them directly from a provider. However, this likely excludes the actual fitting of orthotics by providers.

#### 4.2.5 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **POS Orthotics** providers.

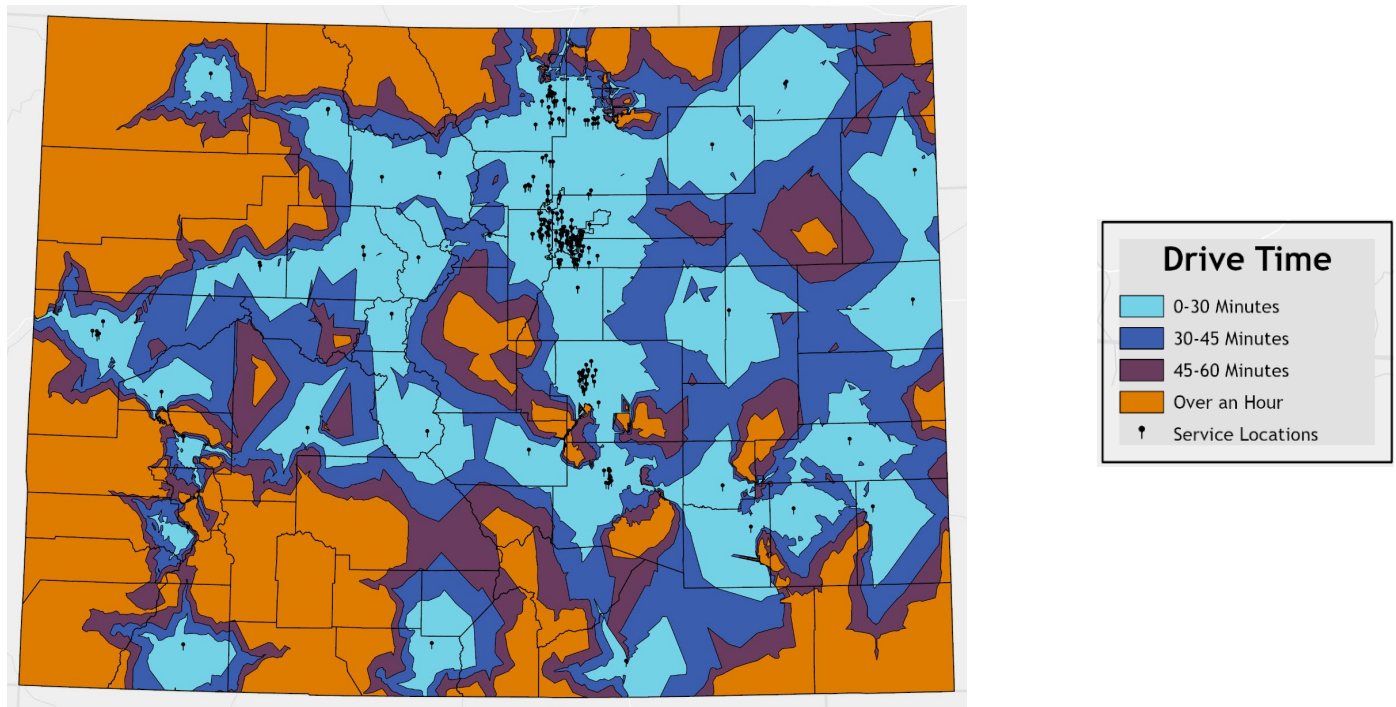


Figure 31.

Figure 31 shows the drive time bands across the state wherein members reside, relative to **POS Orthotics** providers. From SFY 2021-22 to SFY 2023-24, 93.65% of total members resided 30 minutes or less from a provider; 3.70% of total members resided approximately 30-45 minutes; 1.31% of total members resided 45-60 minutes; and 1.34% of total members resided over an hour from a provider.

#### 4.2.6 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **POS Orthotics** service category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 39% of providers statewide served Medicaid members.

#### 4.2.7 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **POS Orthotics** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 32, statewide Medicaid utilization per utilizer per year for the **POS Orthotics** category remained relatively stable from SFY 2021-22 to SFY 2023-24 and was very similar to other payers, although slightly higher.

Per Utilizer per Year (PUPY) Utilization -  
Prosthetics, Orthotics, and Disposable Supplies (Orthotics)

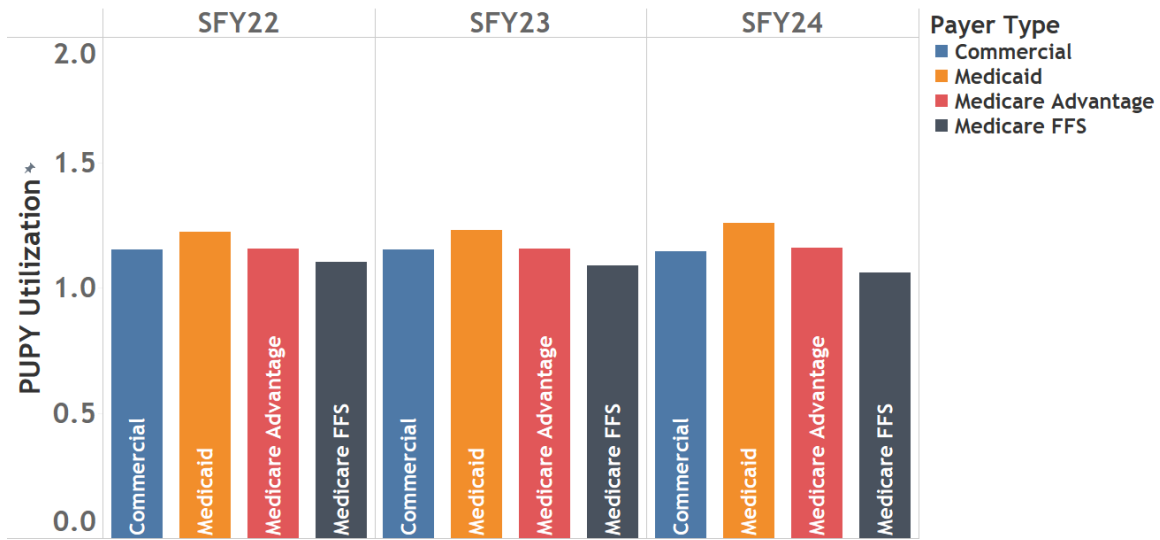


Figure 32.

## 4.3 Enteral Formula

### 4.3.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **POS Enteral Formula** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

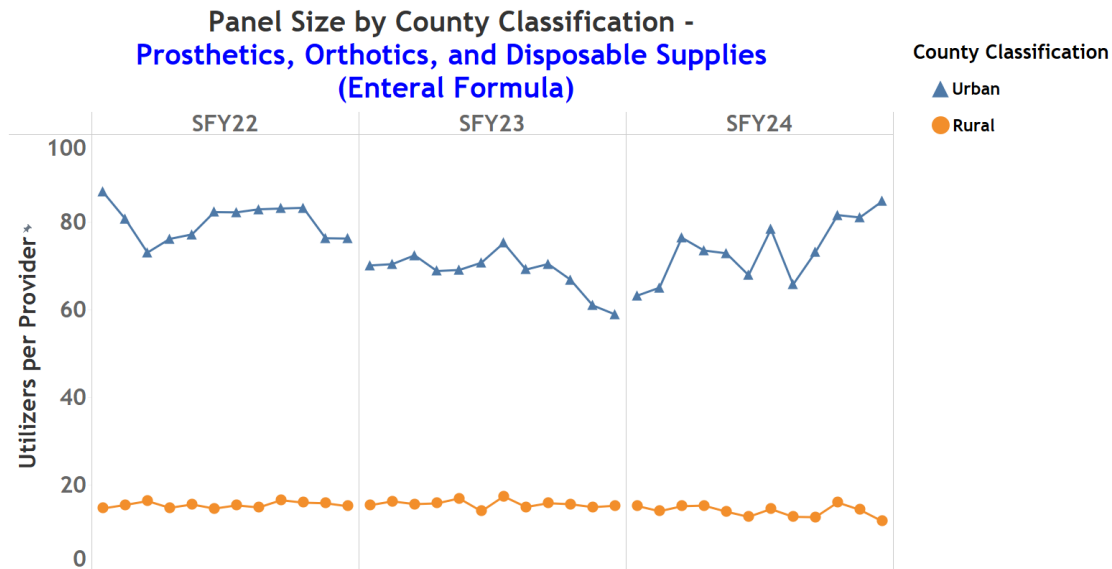


Figure 33.

As shown in Figure 33, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 58.95 to 86.91. In rural areas, this metric ranged from 11.76 to 17.42. In urban areas, panel size had a decreasing trend in SFY 2022-23 as a result of the number of providers increasing more quickly than utilizers. Urban panel size then increased again in SFY 2023-24 due to decreases in providers. Meanwhile, the panel size in rural regions was relatively stable.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **POS Enteral Formula** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 34, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern and Western parts of Colorado.

### Panel Size by County (SFY24) - Prosthetics, Orthotics, and Disposable Supplies (Enteral Formula)

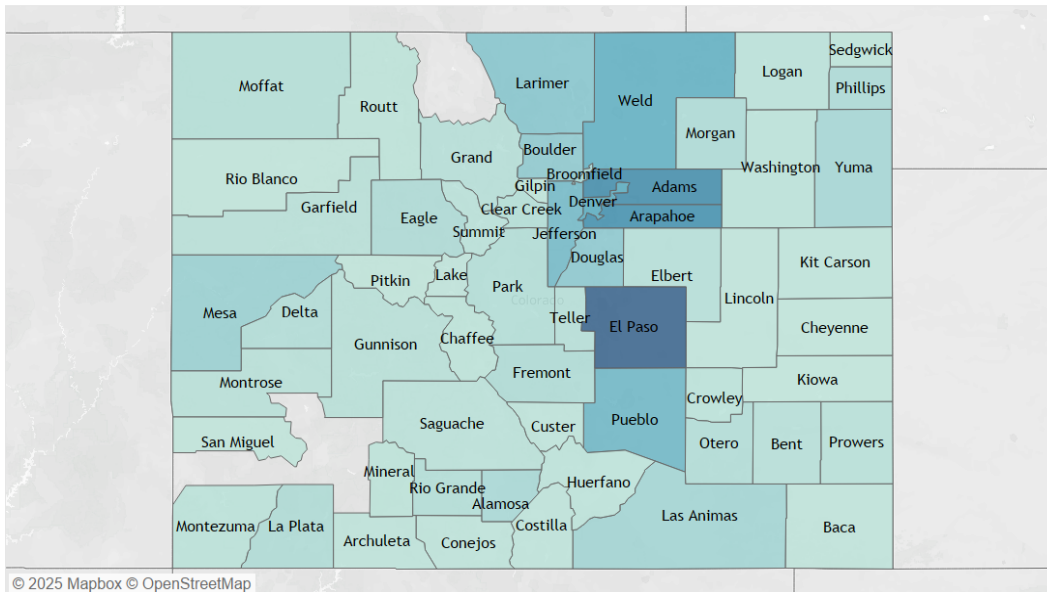


Figure 34.

### 4.3.2 Penetration Rate

The penetration rate analysis considers the number of members that utilized services in the POS Enteral Formula category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024).

### Penetration Rate (Utilization per 1000 Members) - Prosthetics, Orthotics, and Disposable Supplies (Enteral Formula)

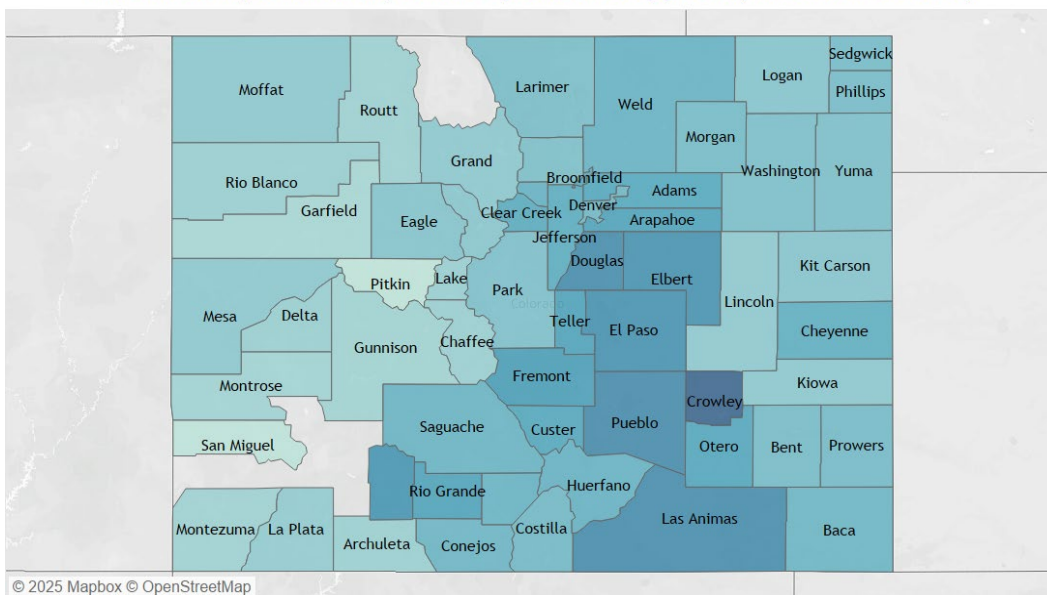


Figure 35.

As shown in Figure 35, members in 59 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Crowley County, while several counties along

the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, the penetration rate was lowest in Western Colorado and some Eastern Colorado counties.

### 4.3.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **POS Enteral Formula** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

#### Special Providers - Prosthetics, Orthotics, and Disposable Supplies (Enteral Formula)

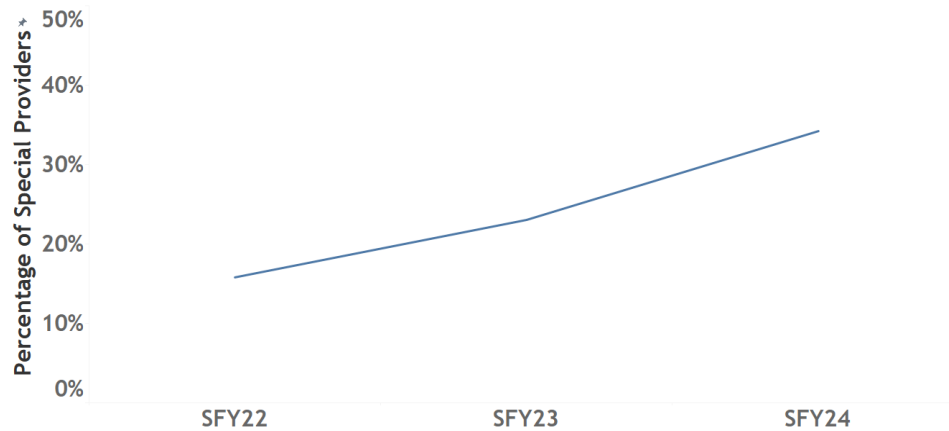


Figure 36.

As shown in Figure 36, the percentage of special providers increased from SFY 2021-22 to SFY 2023-24.

## 4.4 Other and Disposable Supplies

### 4.4.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **POS Other and Disposable Supplies** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

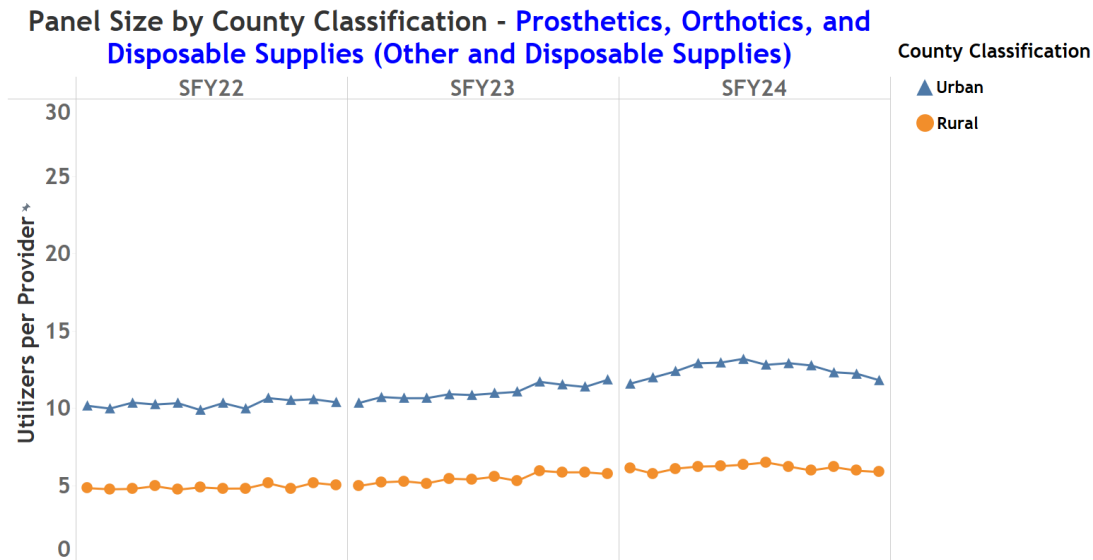


Figure 37.

As shown in Figure 37, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 9.88 and 13.19. In rural areas, this metric ranged from 4.73 to 6.5. The overall trend over these three years for each region type was stable, although urban regions had a slight upward trend in SFY 2023-24 due to an increase in utilizers.

### Panel Size by County (SFY24) - Prosthetics, Orthotics, and Disposable Supplies (Other and Disposable Supplies)

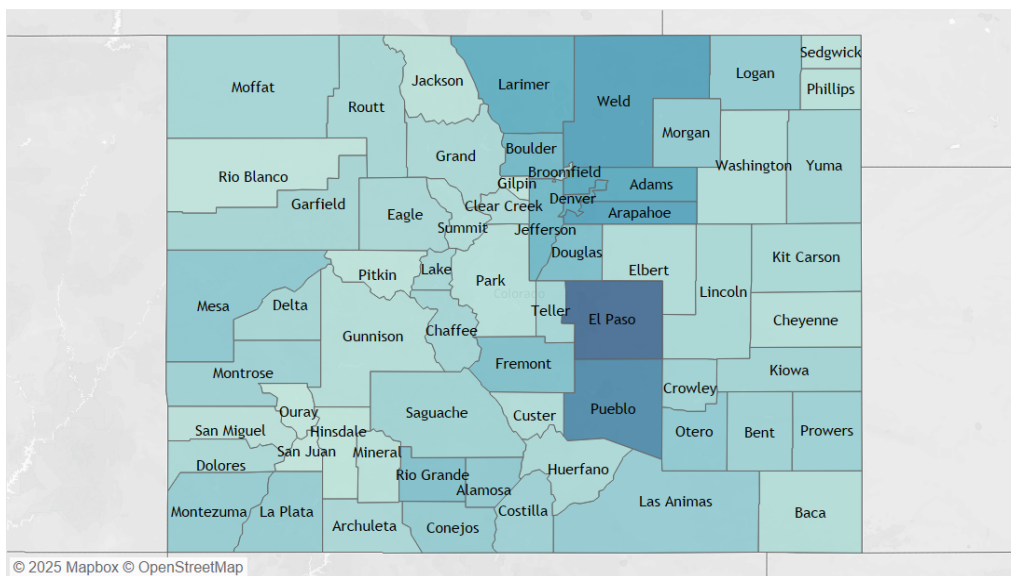


Figure 38.



The second part of the panel size analysis (Figure 38) considers the average number of utilizers per provider in each county for the **POS Other and Disposable Supplies** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 38, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed by Pueblo County. Additionally, several other counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern and Western parts of Colorado.

#### 4.4.2 Penetration Rate

The penetration rate analysis considers the number of members that utilized services in the **POS Other and Disposable Supplies** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024).

##### Penetration Rate (Utilization per 1000 Members) - Prosthetics, Orthotics, and Disposable Supplies (Other and Disposable Supplies)

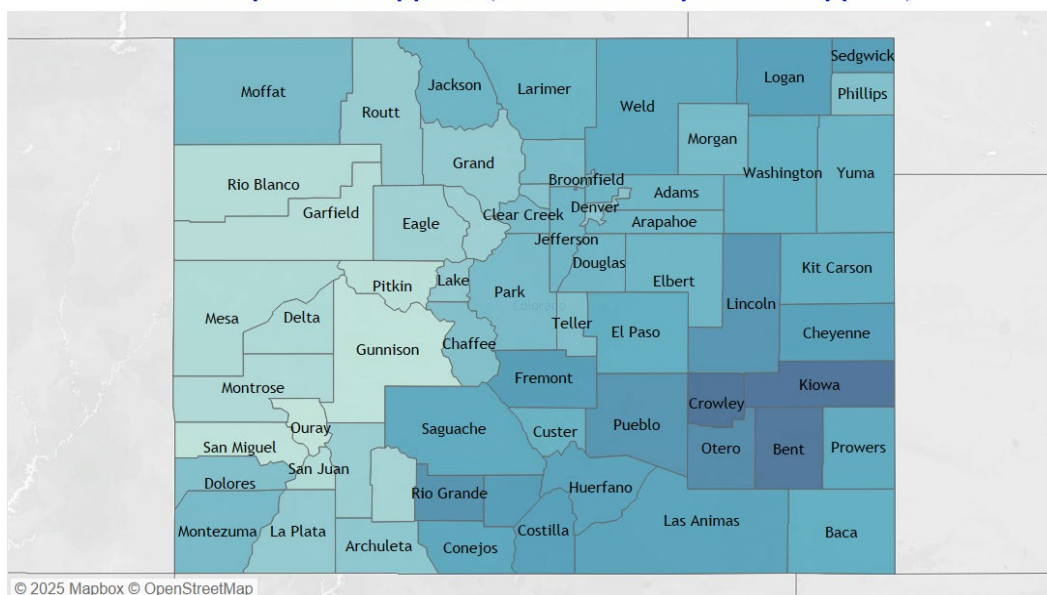


Figure 39.

As shown in Figure 39, members in all 64 of Colorado's counties utilized services in this category. The penetration rate was highest in Crowley County and otherwise moderate throughout much of the state, especially Eastern Colorado. This excludes the Western Slope, which was much lower in comparison.

#### 4.4.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **POS Other and Disposable Supplies** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).



**Special Providers - Prosthetics, Orthotics, and Disposable Supplies  
(Other and Disposable Supplies)**

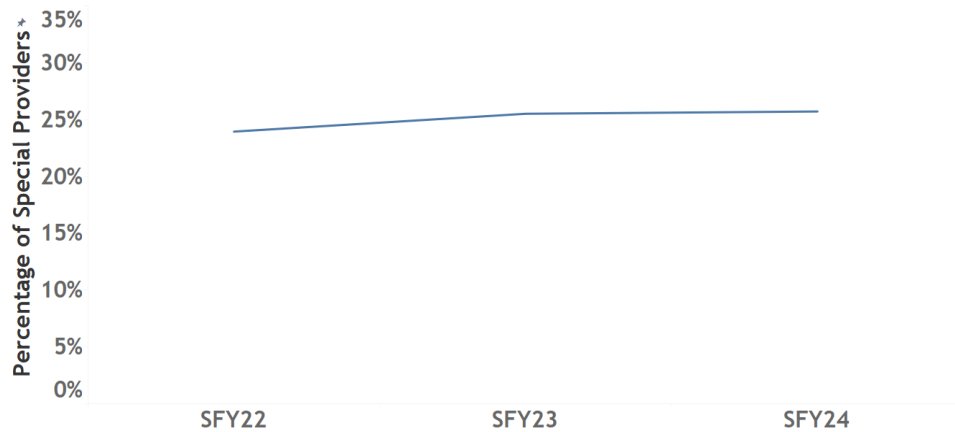


Figure 40.

As shown in Figure 40, the percentage of special providers remained stable, increasing slightly from SFY 2021-22 to SFY 2023-24. Several providers decreased in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served can be partially attributed to an increasing trend of more online POS retailers. This would enable members to have disposable and other types of supplies delivered to their homes, rather than receiving them directly from a provider.

## 5. Laboratory and Pathology Services

### 5.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Laboratory and Pathology Services** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

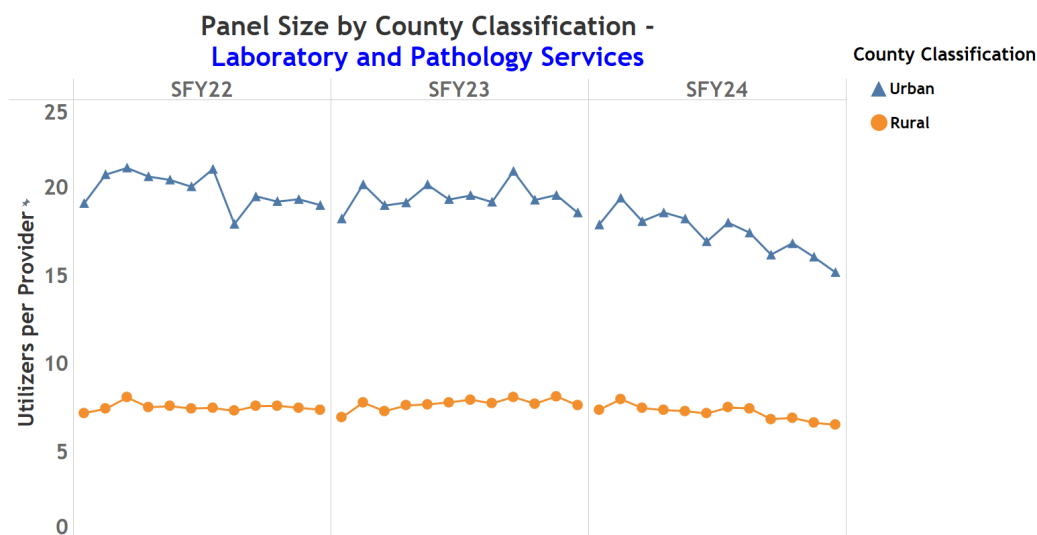


Figure 41.

As shown in Figure 41, in urban areas during SFY 2021-22 to 2023-24, the number of utilizers per provider ranged from 15.2 to 21.13. In rural areas, the number of utilizers per provider ranged from 6.54 to 8.15. Urban panel size had a downward trend from SFY 2021-22 to SFY 2023-24 as a result of the number of utilizers decreasing more quickly than providers. Meanwhile, rural panel size remained relatively stable, with a slight downward trend noted in SFY 2023-24.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Laboratory and Pathology Services** category during SFY 2023-24. A darker blue color indicates a higher panel size.

As shown in Figure 42, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed by nearby Pueblo County. Additionally, several other counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were mostly located in the Eastern and Western parts of Colorado.

Panel Size by County (SFY24) - Laboratory and Pathology Services

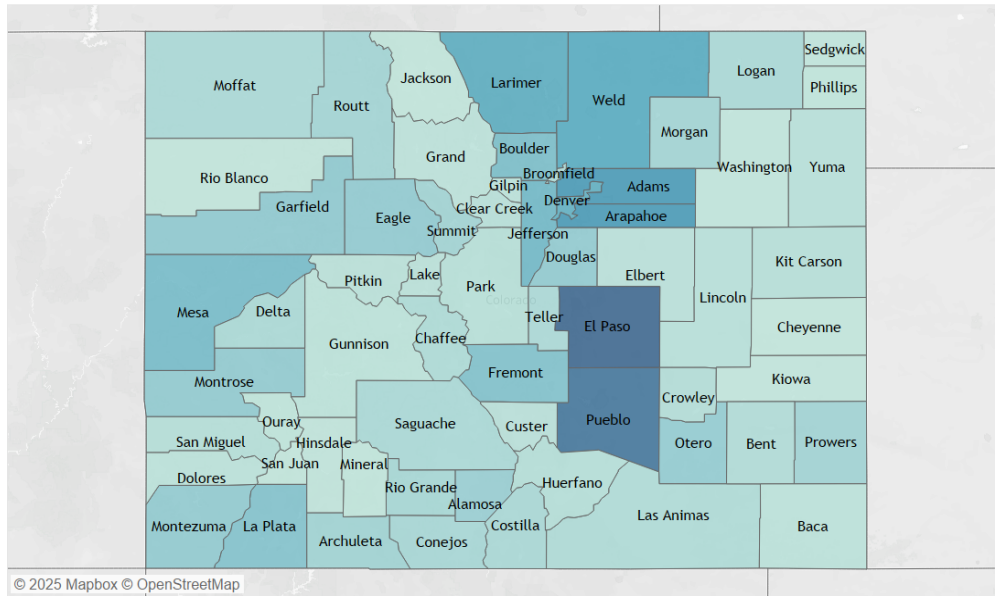


Figure 42.

## 5.2 Penetration Rate

The penetration rate analysis considers the number of members that utilized services in the **Laboratory and Pathology Services** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) -  
Laboratory and Pathology Services

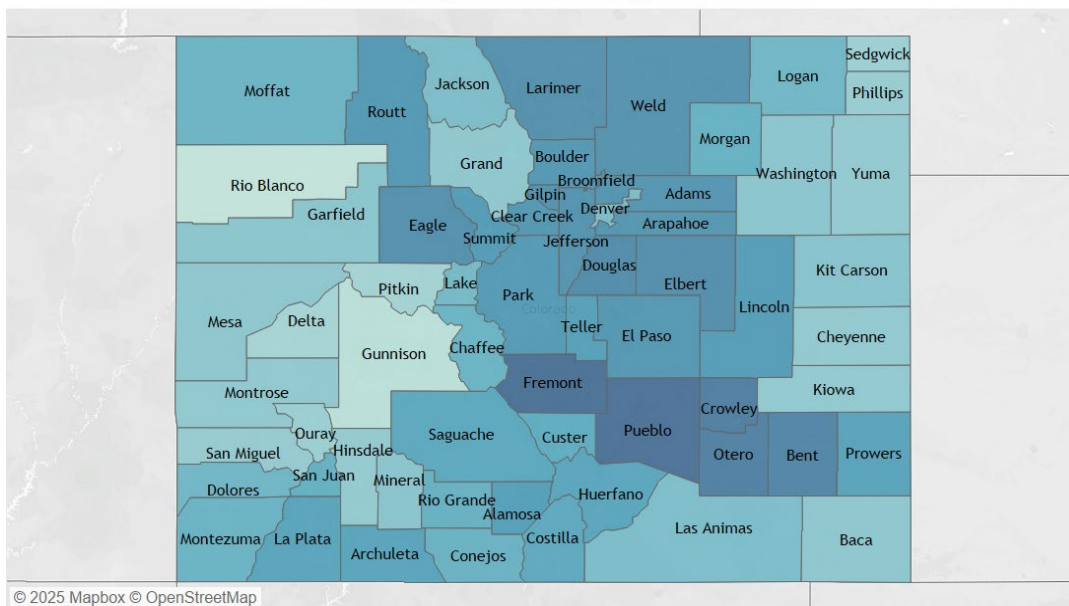


Figure 43.

As shown in Figure 43, members in all 64 of Colorado's counties utilized services in this category. The penetration rate was highest in Fremont County, followed closely by Pueblo

County. Additionally, many of the counties along the I-25 corridor and adjacent counties, as well as some in South-Western and North-Western Colorado, had relatively moderate penetration rates. However, the other counties had lower and relatively similar penetration rates, with the lowest being on the Western Slope of Colorado.

### 5.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Laboratory and Pathology Services** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

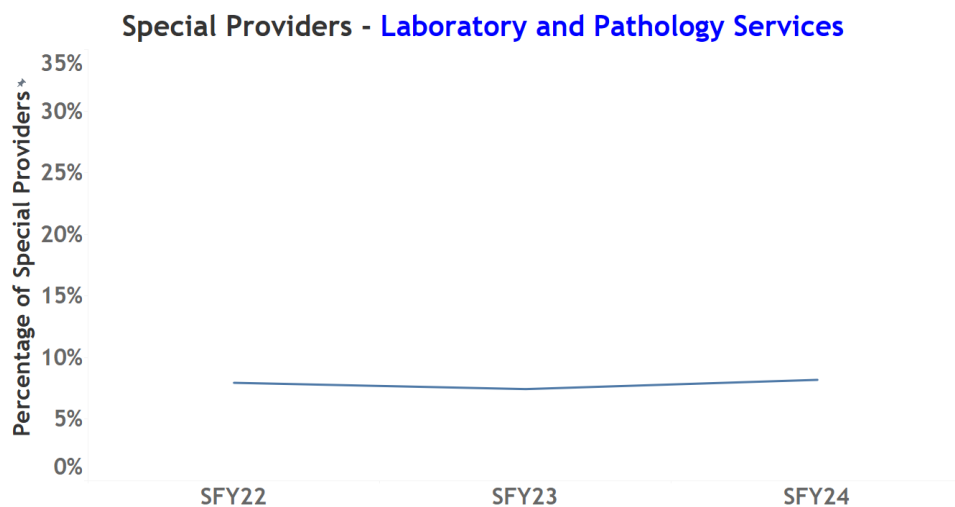


Figure 44.

As shown in Figure 44, the percentage of special providers remained stable from SFY 2021-22 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers had an increase in the number of members they served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served among providers can be attributed to several situations, including: the closure of facilities, denial of provider applications, providers no longer accepting Medicaid, providers moving to new locations, and one provider working at a practice that does not currently have Medicaid listed as an accepted form of insurance on their website.

### 5.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Laboratory and Pathology Services** providers.

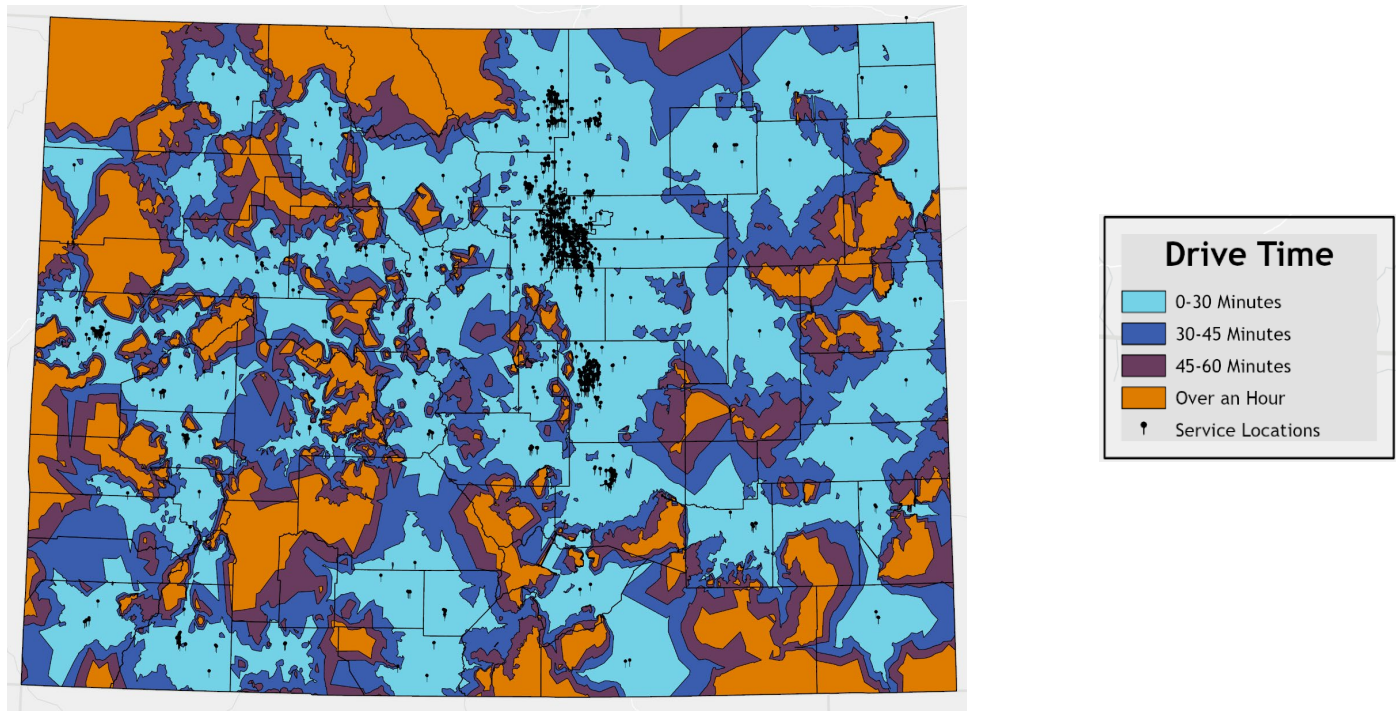


Figure 45.

Figure 45 shows the drive time bands across the state wherein members reside, relative to **Laboratory and Pathology Services** providers. From SFY 2021-22 to SFY 2023-24, 98.65% of total members resided 30 minutes or less from a provider; 0.75% of total members resided approximately 30-45 minutes; 0.35% of total members resided 45-60 minutes; and 0.25% of total members resided over an hour from a provider.

## 5. Outpatient PT/OT/ST

### 5.1 Outpatient PT

#### 5.1.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Outpatient PT** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

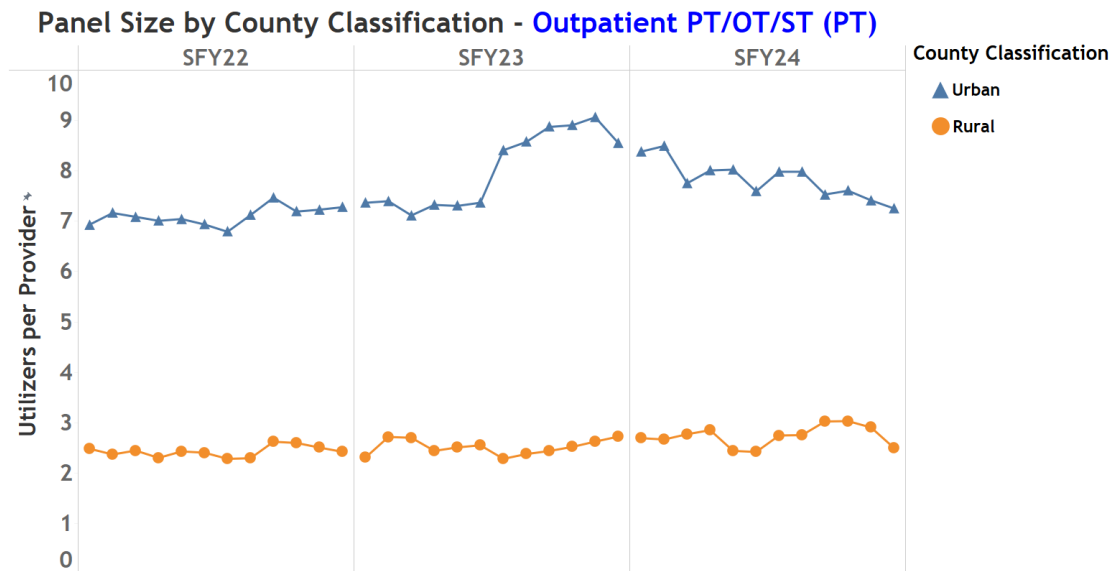


Figure 46.

As shown in Figure 46, in urban areas during SFY 2021-22 to 2023-24, the numbers of utilizers per provider ranged from 6.79 to 9.06. In rural areas, the number of utilizers per provider ranged from 2.28 to 3.03. Urban panel size increased in January of SFY 2022-23 due to the number of utilizers increasing more quickly than providers, followed by a decrease in SFY 2023-24. Meanwhile, rural regions remained stable across all three fiscal years.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Outpatient PT** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 47, in SFY 2023-24, the number of utilizers per provider was highest in Kit Carson County, followed by El Paso County and Pueblo County, which were moderate in comparison. Some counties along the northern portion of the I-25 corridor and adjacent counties were lower yet still had moderate panel sizes compared to counties with the lowest panel sizes, which were located throughout the state and relatively uniform in panel size.



Panel Size by County (SFY24) - Outpatient PT/OT/ST (PT)

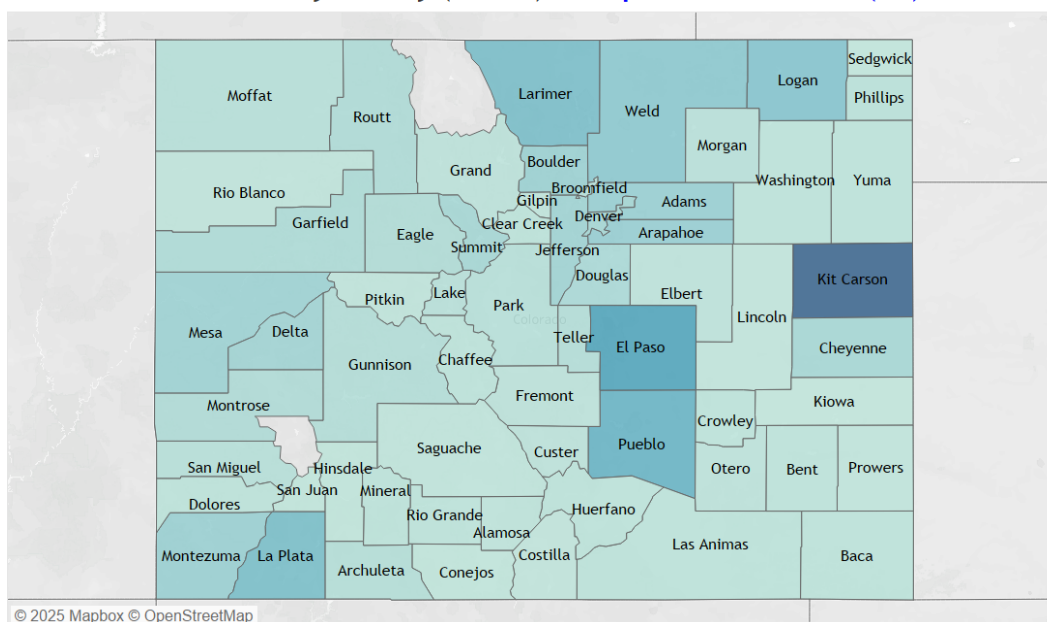


Figure 47.

### 5.1.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Outpatient PT** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) - Outpatient PT/OT/ST (PT)

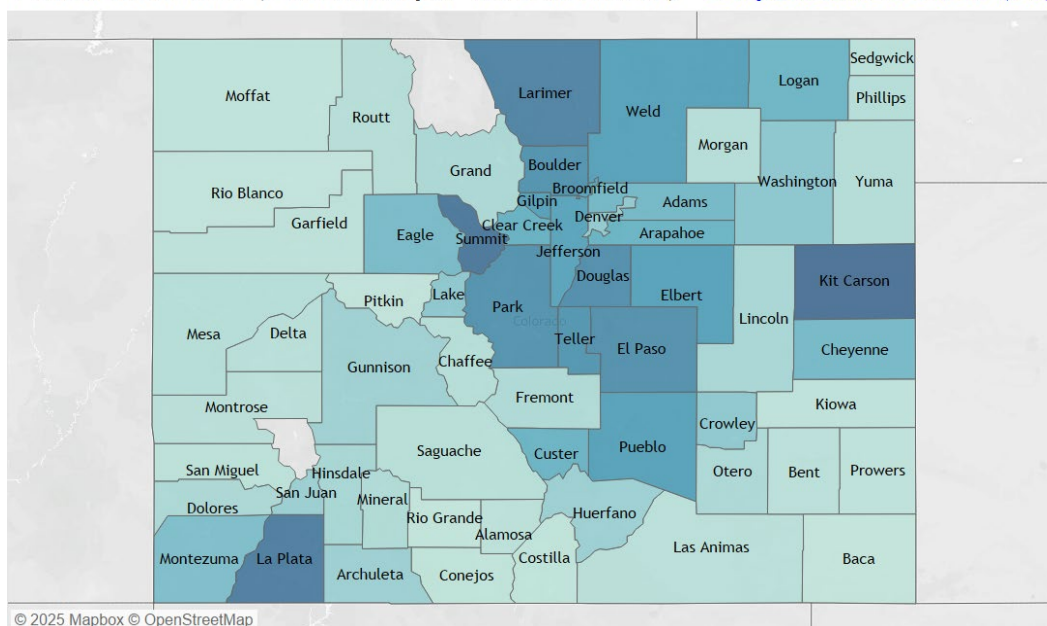


Figure 48.

As shown in Figure 48, members in 62 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Kit Carson County. Additionally, many of the

counties along the I-25 corridor and adjacent counties, as well as La Plata County, were relatively moderate in their penetration rates. However, the other counties were lower and relatively similar in their penetration rates, with the lowest being in the Western and South-Eastern parts of the state.

### 5.1.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Outpatient PT** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

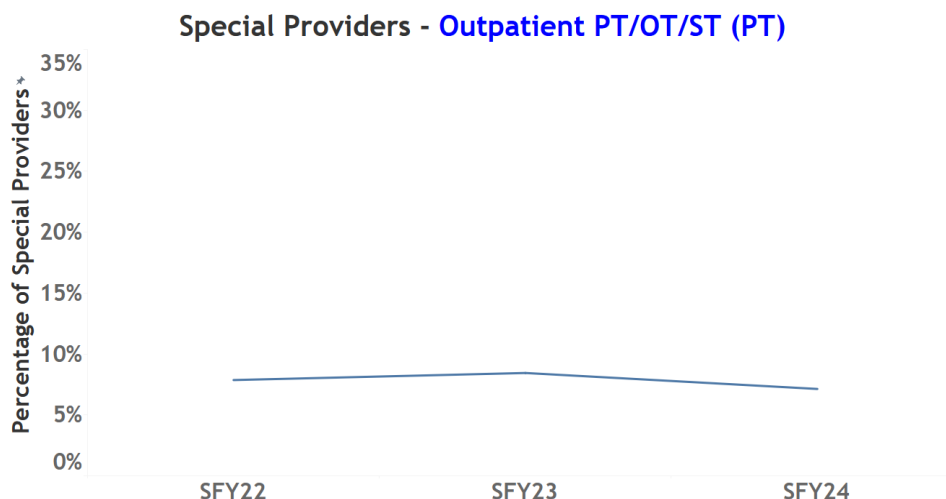


Figure 49.

As shown in Figure 49, the percentage of special providers remained relatively stable from SFY 2021-22 to SFY 2022-23, before decreasing slightly from SFY 2022-23 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served among providers can possibly be attributed to the Medicaid Operations Office disenrolling inactive providers, or that providers no longer accept Medicaid patients.

### 5.1.4 Telemedicine Analysis

The first part of the telemedicine analysis considered the number of individual members that utilized services in the **Outpatient PT** category and what percentage of those members received at least one service through telemedicine across SFY 2021-22 to SFY 2023-24.



#### Members Utilizing Telemedicine Services - Outpatient PT/OT/ST (PT)

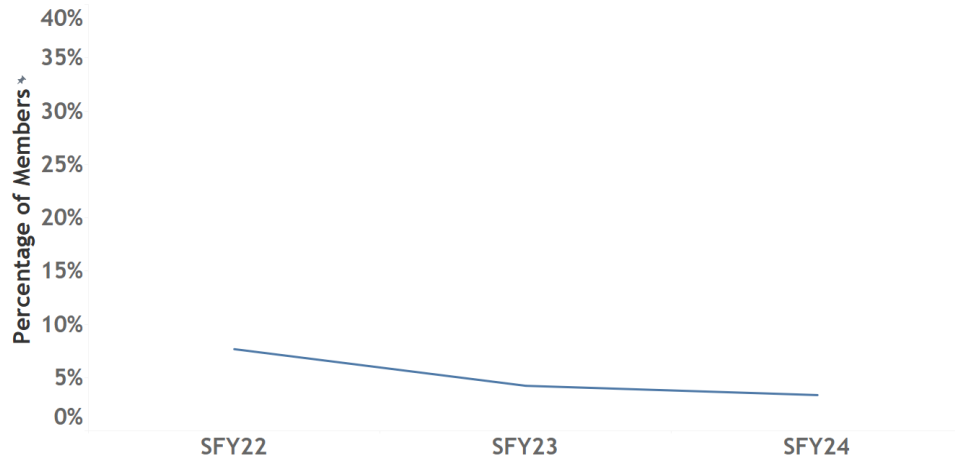


Figure 50.

As shown in Figure 50, the overall percentage of individual members that utilized telemedicine **Outpatient PT** services was low, with a decreasing trend from SFY 2021-22 to SFY 2023-24.

The second part of the telemedicine analysis considered the number of total visits in the **Outpatient PT** category and what percentage of those visits were delivered through telemedicine across SFY 2021-22 to SFY 2023-24.

#### Telemedicine as a Percentage of Total Visits - Outpatient PT/OT/ST (PT)

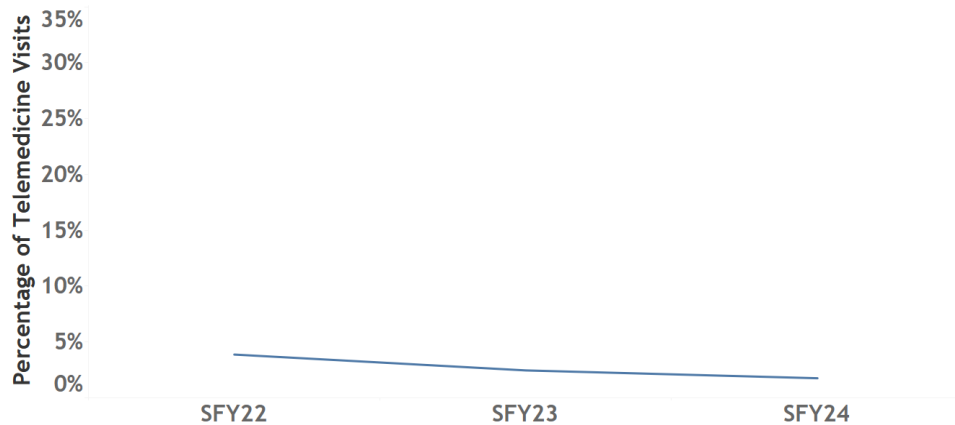


Figure 51.

As shown in Figure 51, From SFY 2021-22 to SFY 2023-24, the overall percentage of total visits that were delivered through telemedicine for **Outpatient PT** was low. This percentage decreased from SFY 2021-22 to SFY 2023-24.

### 5.1.5 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Outpatient PT** providers.

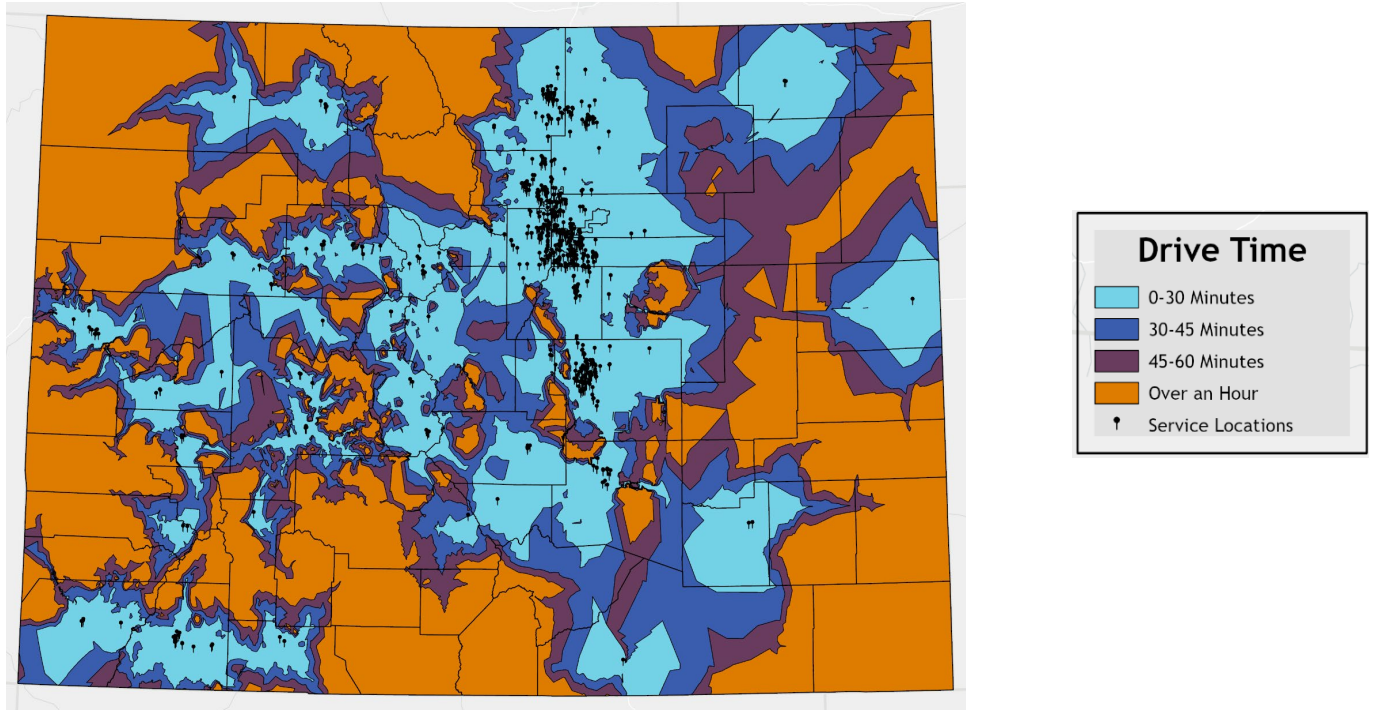


Figure 52.

Figure 52 shows the drive time bands across the state wherein members reside, relative to **Outpatient PT** providers. From SFY 2021-22 to SFY 2023-24, 94.40% of total members resided 30 minutes or less from a provider; 1.70% of total members resided approximately 30-45 minutes; 1.62% of total members resided 45-60 minutes; and 2.27% of total members resided over an hour from a provider.

### 5.1.6 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Outpatient PT** service category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 37% of providers statewide served Medicaid members.

### 5.1.7 Per Utilizer Per Year (PUPY) Expenditure

The PUPY Expenditure analysis shows the average total expenditures per utilizer per year for the **Outpatient PT** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024) based on the line level claim data for each procedure code and/or revenue code. The PUPY expenditure metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 53, statewide Medicaid expenditures per utilizer per year for the **Outpatient PT** service category increased slightly from SFY 2021-22 to SFY 2023-24 and were slightly lower than commercial payers, although they were significantly higher than Medicare Advantage and Medicare FFS.

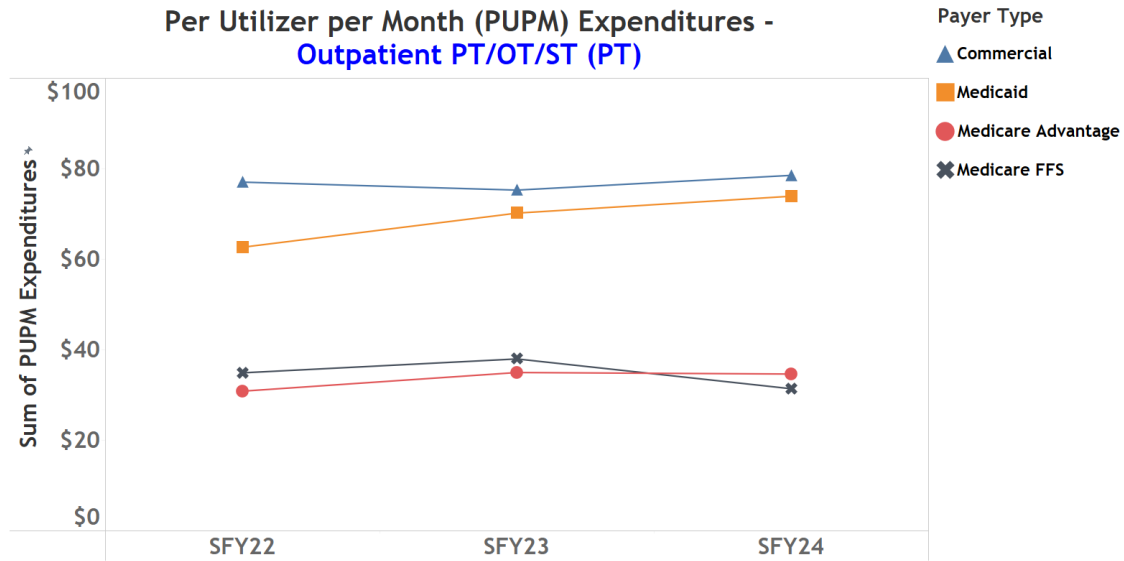


Figure 53.

### 5.1.8 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Outpatient PT** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

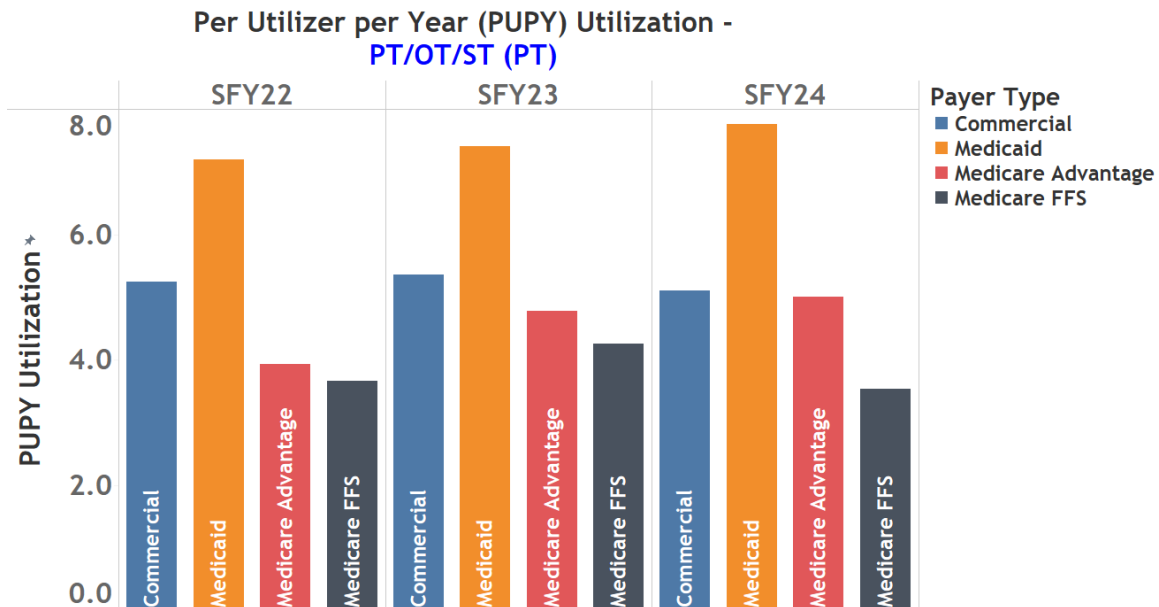


Figure 54.

As shown in Figure 54, statewide Medicaid utilization per utilizer per year for the **Outpatient PT** service category increased slightly from SFY 2021-22 to SFY 2023-24 and was higher than other payers.

## 5.2 Outpatient OT

### 5.2.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Outpatient OT** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

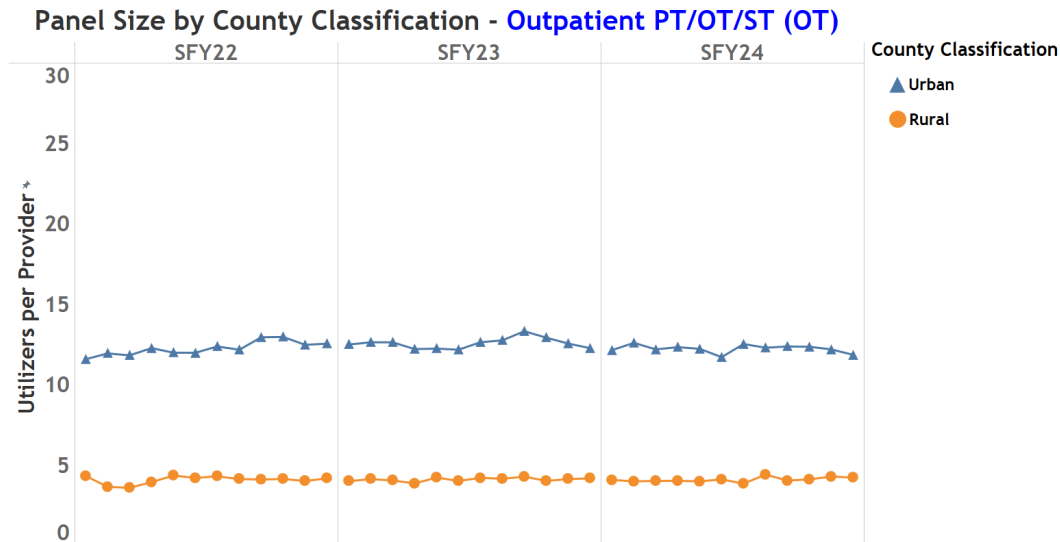


Figure 55.

As shown in Figure 55, in urban areas during SFY 2021-22 to 2023-24, the numbers of utilizers per provider ranged from 11.6 to 13.34. In rural areas, the number of utilizers per provider ranged from 3.61 to 4.43. The overall trend over these three years for each region type was stable.

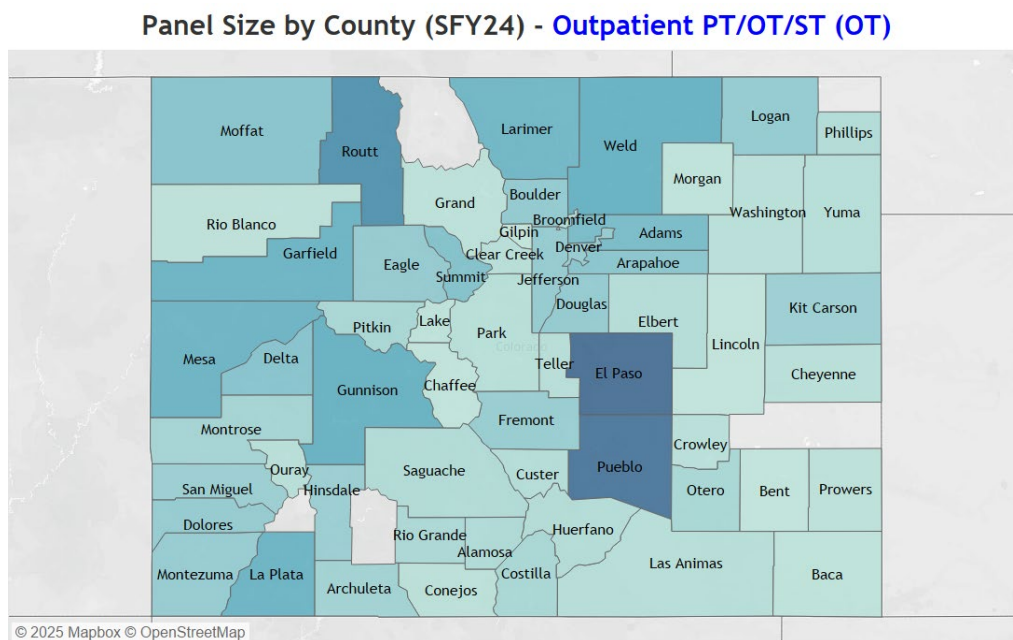


Figure 56.

The second part of the panel size analysis (Figure 56) considers the average number of utilizers per provider in each county for the **Outpatient OT** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 56, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed by nearby Pueblo County. Additionally, several counties in Western Colorado and a few in Northern Colorado had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were mostly located in the Eastern and South-Central parts of Colorado.

### 5.2.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Outpatient OT** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024).

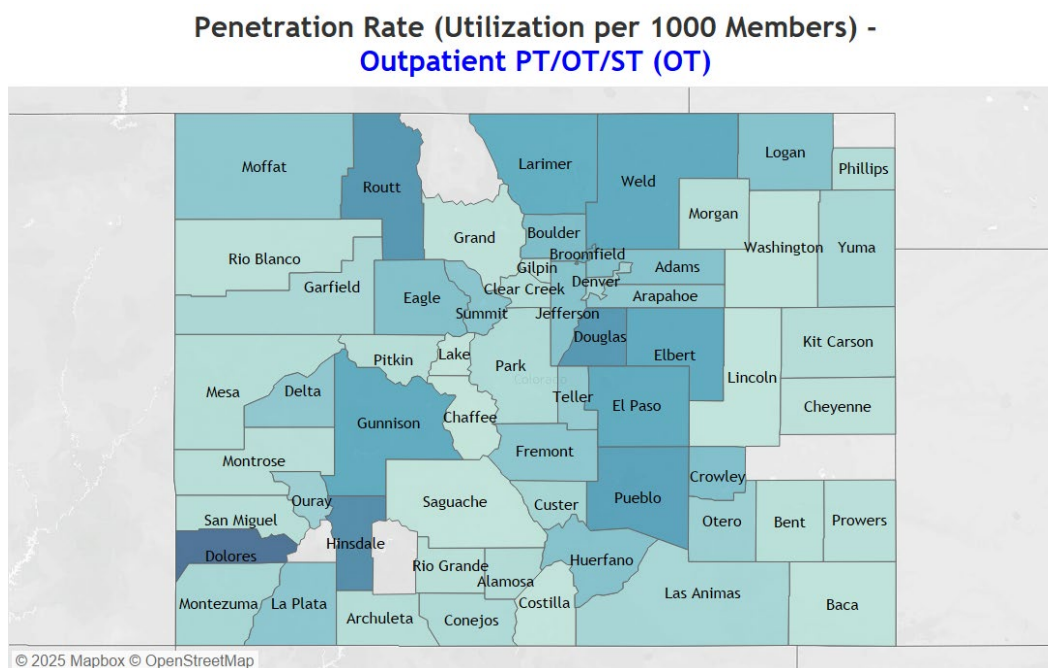


Figure 57.

As shown in Figure 57, members in 59 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Dolores County. Additionally, a few counties in Western Colorado and several counties along the I-25 corridor and adjacent counties had relatively moderate penetration rates. The other counties were lower and similar in their penetration rates, with the lowest being in the Western and Eastern part of the state.

### 5.2.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Outpatient OT** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

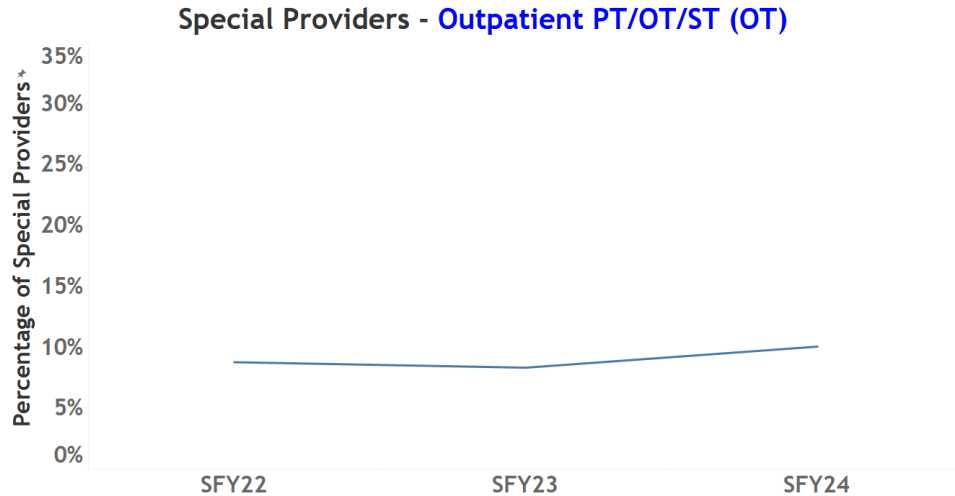


Figure 58.

As shown in Figure 58, the percentage of special providers remained relatively stable, with a slight increasing trend from SFY 2022-23 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served among providers can possibly be attributed to the Medicaid Operations Office disenrolling inactive providers, or that providers no longer accept Medicaid patients.

#### 5.2.4 Telemedicine Analysis

The first part of the telemedicine analysis considered the number of individual members that utilized services in the **Outpatient OT** service category and what percentage of those members received at least one service through telemedicine across SFY 2021-22 to SFY 2023-24.

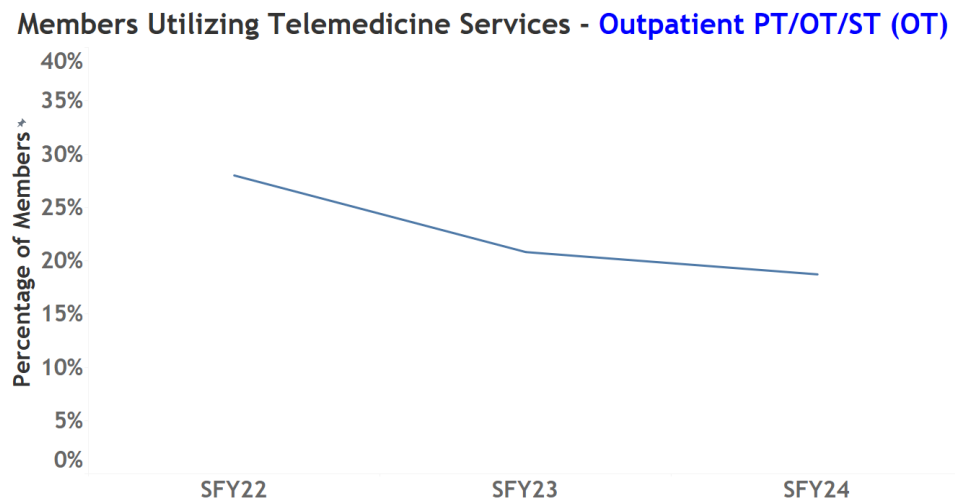


Figure 59.

As shown in Figure 59, the overall percentage of individual members that utilized telemedicine **Outpatient OT** services was moderate, with a decreasing trend from SFY 2021-22 to SFY 2023-24.

The second part of the telemedicine analysis considered the number of total visits in the **Outpatient OT** service category and what percentage of those visits were delivered through telemedicine across SFY 2021-22 to SFY 2023-24.

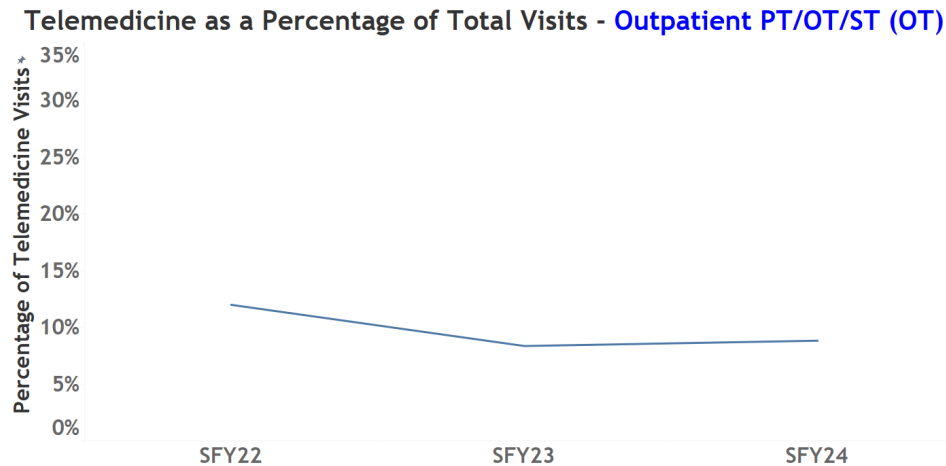


Figure 60.

As shown in Figure 60, From SFY 2021-22 to SFY 2023-24, the overall percentage of total visits that were delivered through telemedicine for **Outpatient OT** was low. This percentage decreased from SFY 2021-22 to SFY 2022-23, then increased very slightly from SFY 2022-23 to SFY 2023-24.

### 5.2.5 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Outpatient OT** providers.

Figure 61 shows the drive time bands across the state wherein members reside, relative to **Outpatient OT** providers. From SFY 2021-22 to SFY 2023-24, 92.74% of total members resided 30 minutes or less from a provider; 2.50% of total members resided approximately 30-45 minutes; 1.81% of total members resided 45-60 minutes; and 2.95% of total members resided over an hour from a provider.



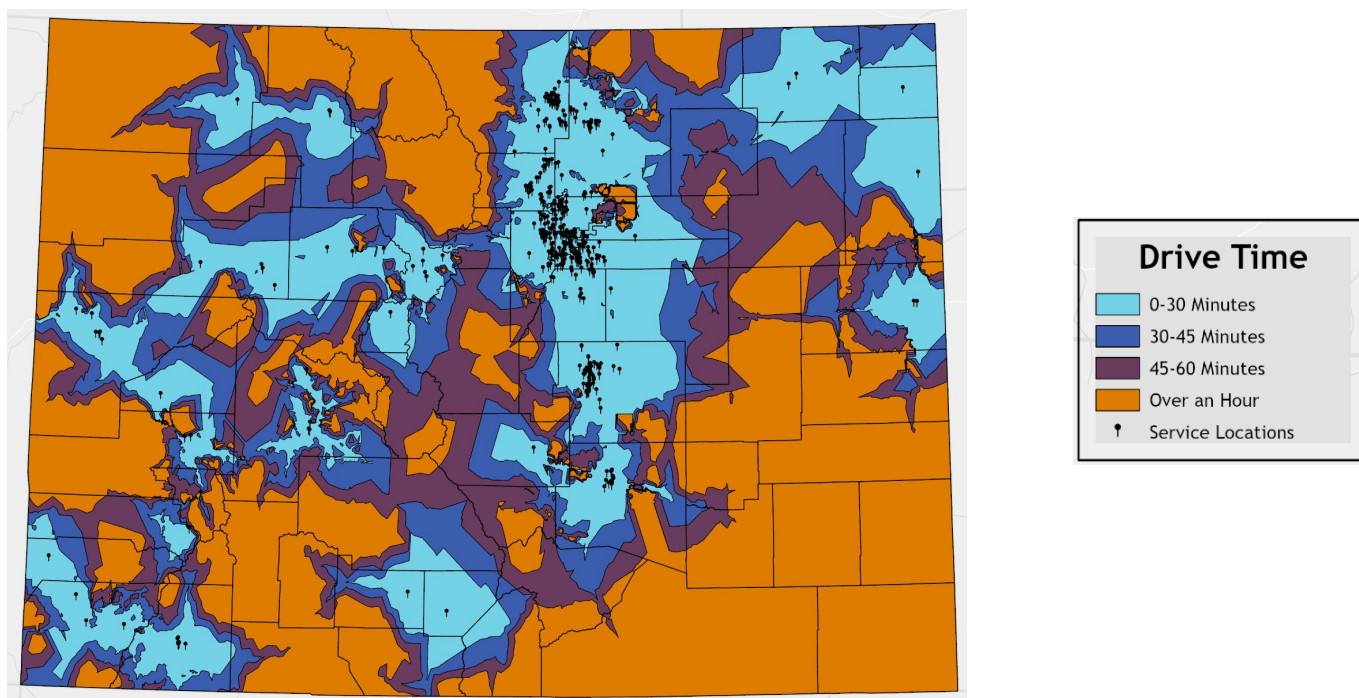


Figure 61.

## 5.2.6 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Outpatient OT** service category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 51% of providers statewide served Medicaid members.

## 5.2.7 Per Utilizer Per Month (PUPM) Expenditure

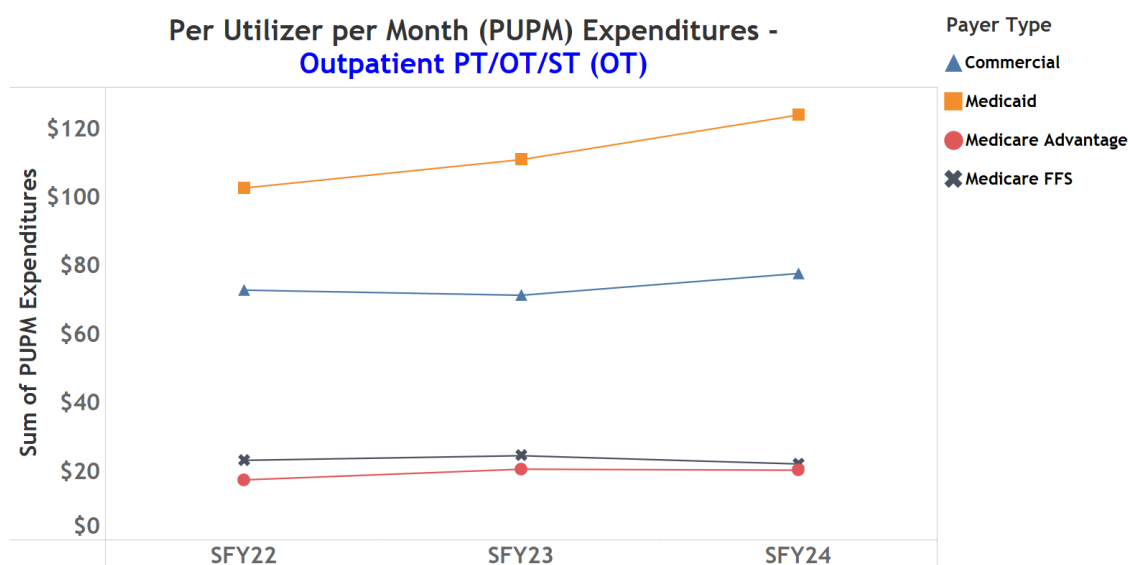


Figure 62.

The PUPM Expenditure analysis (Figure 62) shows the average total expenditures per utilizer per month for the **Outpatient OT** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2023 - June 30, 2024).



2021 - June 30, 2024) based on the line level claim data for each procedure code and/or revenue code. The PUPM expenditure metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 62, statewide Medicaid expenditures per utilizer per month for the **Outpatient OT** service category increased from SFY 2021-22 to SFY 2023-24 and were significantly higher than other payers.

### 5.2.8 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Outpatient OT** service category during SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

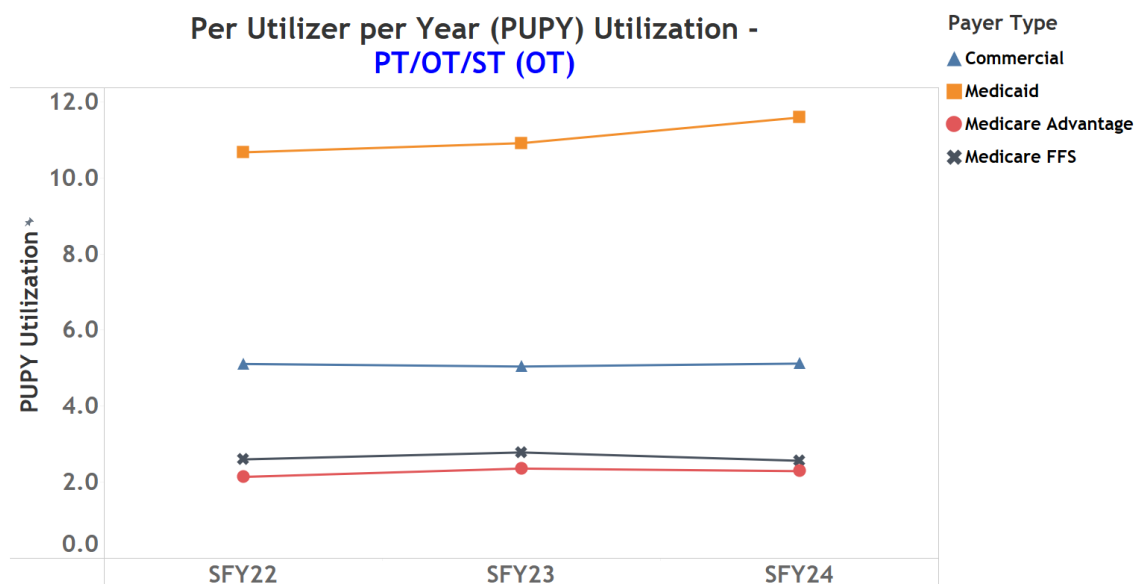


Figure 63.

As shown in Figure 63, statewide Medicaid utilization per utilizer per year for the **Outpatient OT** service category increased from SFY 2021-22 to SFY 2023-24 and was higher than other payers.

## 5.3 Outpatient ST

### 5.3.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Outpatient ST** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

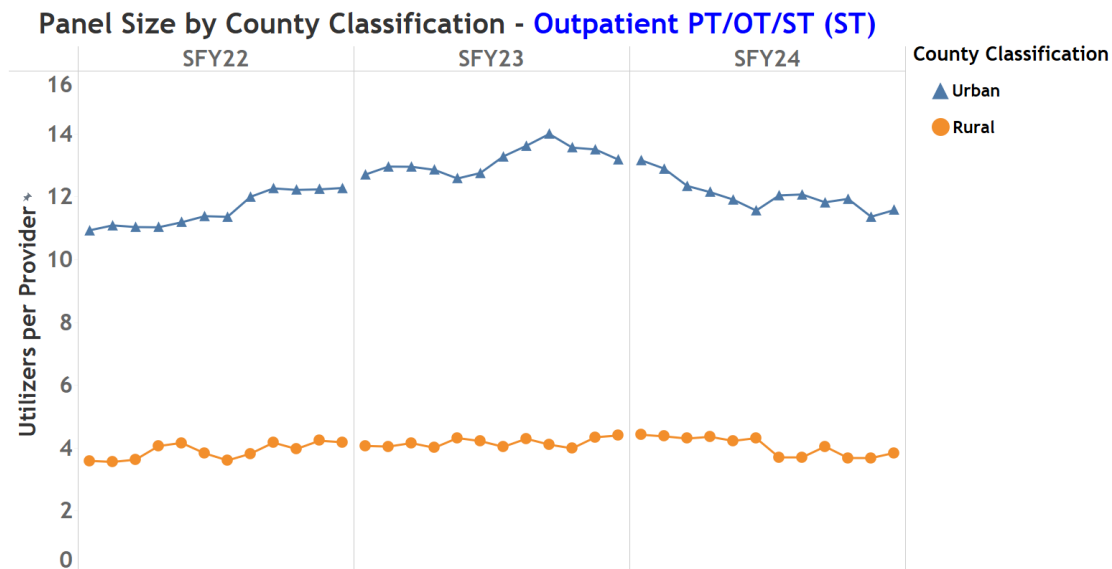


Figure 64.

As shown in Figure 64, in urban areas during SFY 2021-22 to 2023-24, the number of utilizers per provider ranged from 10.93 to 14. In rural areas, the number of utilizers per provider ranged from 3.56 to 4.42. Urban panel size increased from SFY 2021-22 to SFY 2022-23, before returning to near similar levels as SFY 2021-22 in SFY 2023-24. This was a result of the number of utilizers having initially increased at a faster rate than the number of providers. Meanwhile, the overall trend for rural regions was relatively stable.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Outpatient ST** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 65, in SFY 2023-24, the number of utilizers per provider was highest in Kit Carson County, followed by El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as a select few in Western Colorado, had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern, South-Central, and Western parts of Colorado.

Panel Size by County (SFY24) - Outpatient PT/OT/ST (ST)

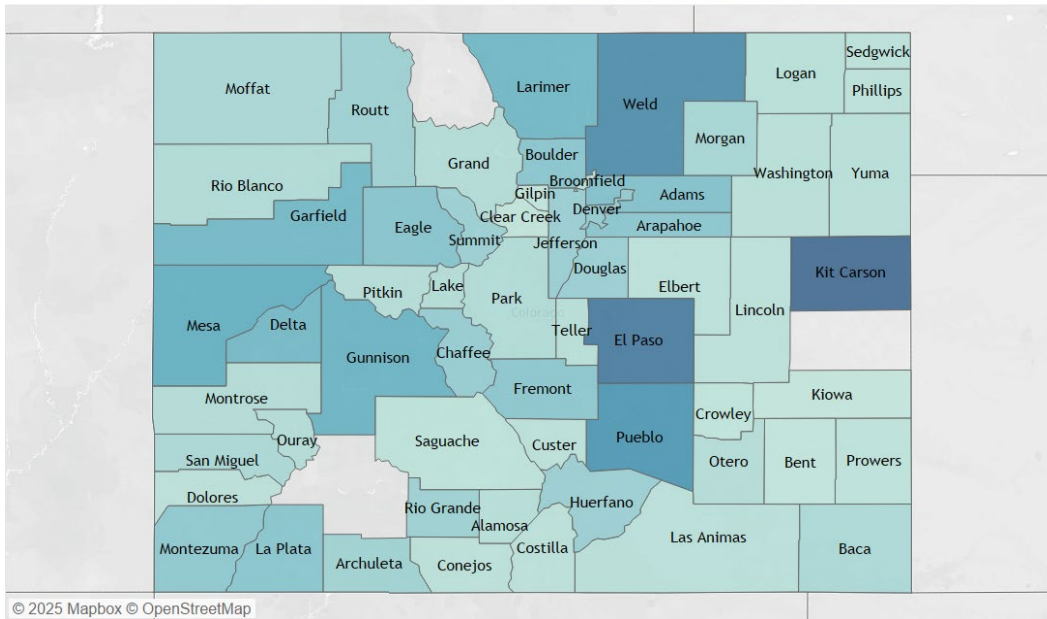


Figure 65.

### 5.3.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Outpatient ST** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024).

Penetration Rate (Utilization per 1000 Members) - Outpatient PT/OT/ST (ST)

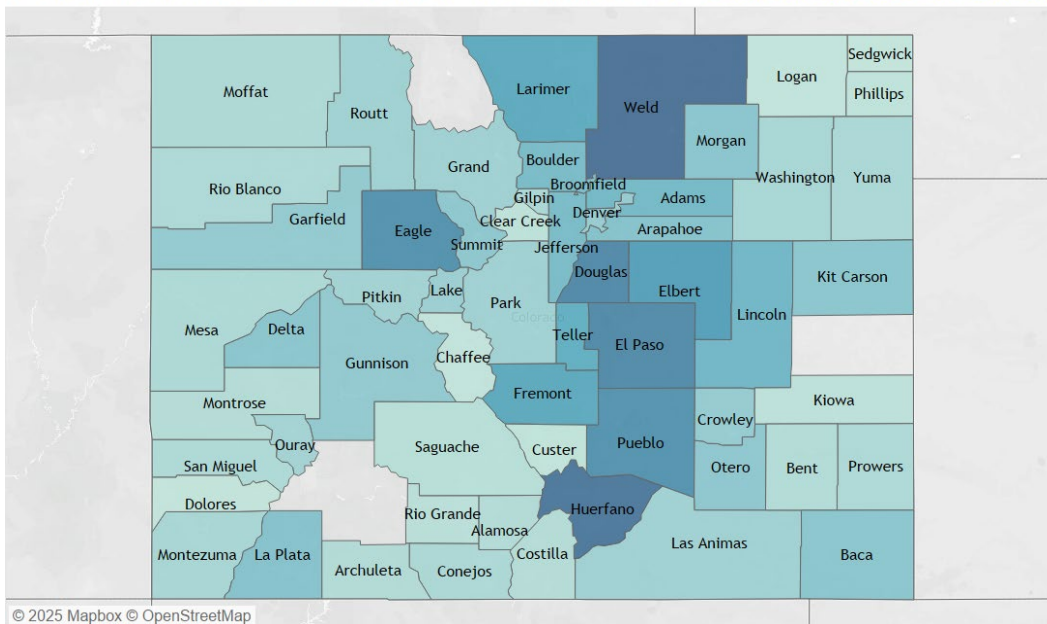


Figure 66.

As shown in Figure 66, members in 59 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Weld County. Additionally, several counties

along the I-25 corridor and adjacent counties, as well as Eagle County, had relatively moderate penetration rates. The other counties were lower and similar in their penetration rates, with the lowest being in the Western and Eastern part of the state.

### 5.3.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Outpatient ST** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

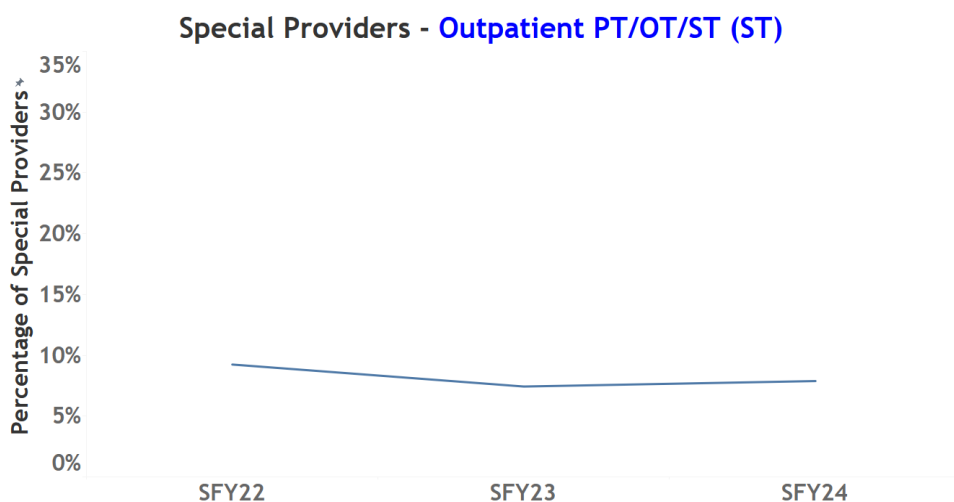


Figure 67.

As shown in Figure 67, the percentage of special providers remained relatively stable, with a slight decreasing trend from SFY 2021-22 to SFY 2022-23. Several providers had a notable decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served among providers can possibly be attributed to the Medicaid Operations Office disenrolling inactive providers, or that providers no longer accept Medicaid patients.

### 5.3.4 Telemedicine Analysis

The first part of the telemedicine analysis considered the number of individual members that utilized services in the **Outpatient ST** category and what percentage of those members received at least one service through telemedicine across SFY 2021-22 to SFY 2023-24.

As shown in Figure 68, the overall percentage of individual members that utilized telemedicine **Outpatient ST** services was moderately high, with a decreasing trend from SFY 2021-22 to SFY 2023-24.

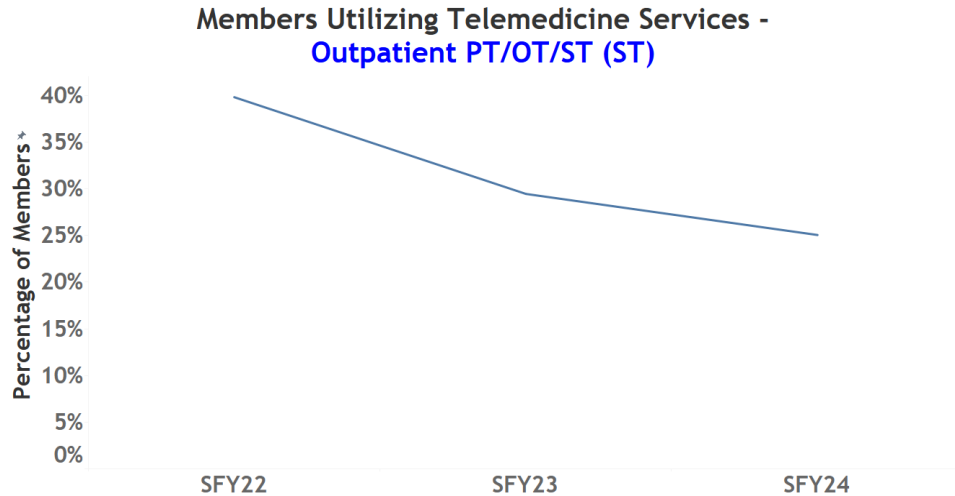


Figure 68.

The second part of the telemedicine analysis considered the number of total visits in the **Outpatient ST** service category and what percentage of those visits were delivered through telemedicine across SFY 2021-22 to SFY 2023-24.

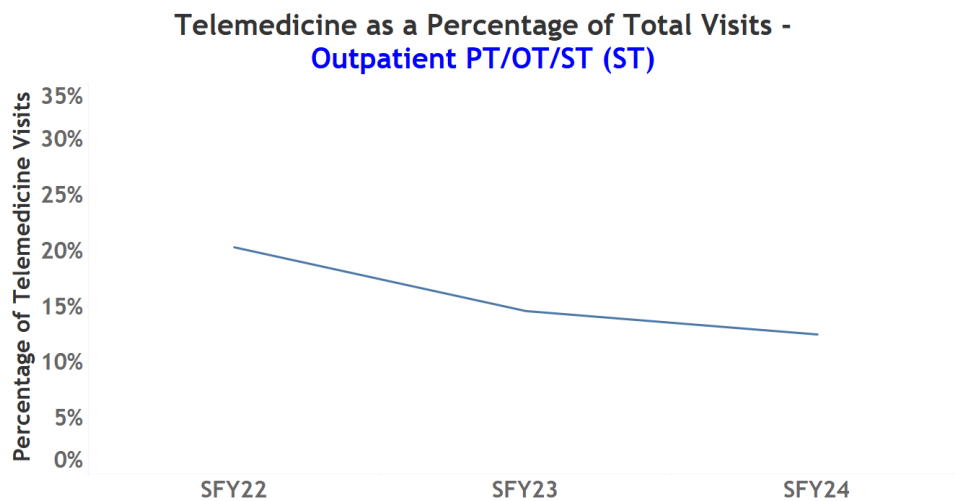


Figure 69.

As shown in Figure 69, from SFY 2021-22 to SFY 2023-24, the percentage of total visits that were delivered through telemedicine for **Outpatient ST** was moderate, decreasing from SFY 2021-22 to SFY 2023-24.

### 5.3.5 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Outpatient ST** providers.

Figure 70 shows the drive time bands across the state wherein members reside, relative to **Outpatient ST** providers. From SFY 2021-22 to SFY 2023-24, 91.86% of total members resided 30 minutes or less from a provider; 3.18% of total members resided approximately 30-45

minutes; 2.06% of total members resided 45-60 minutes; and 2.91% of total members resided over an hour from a provider.

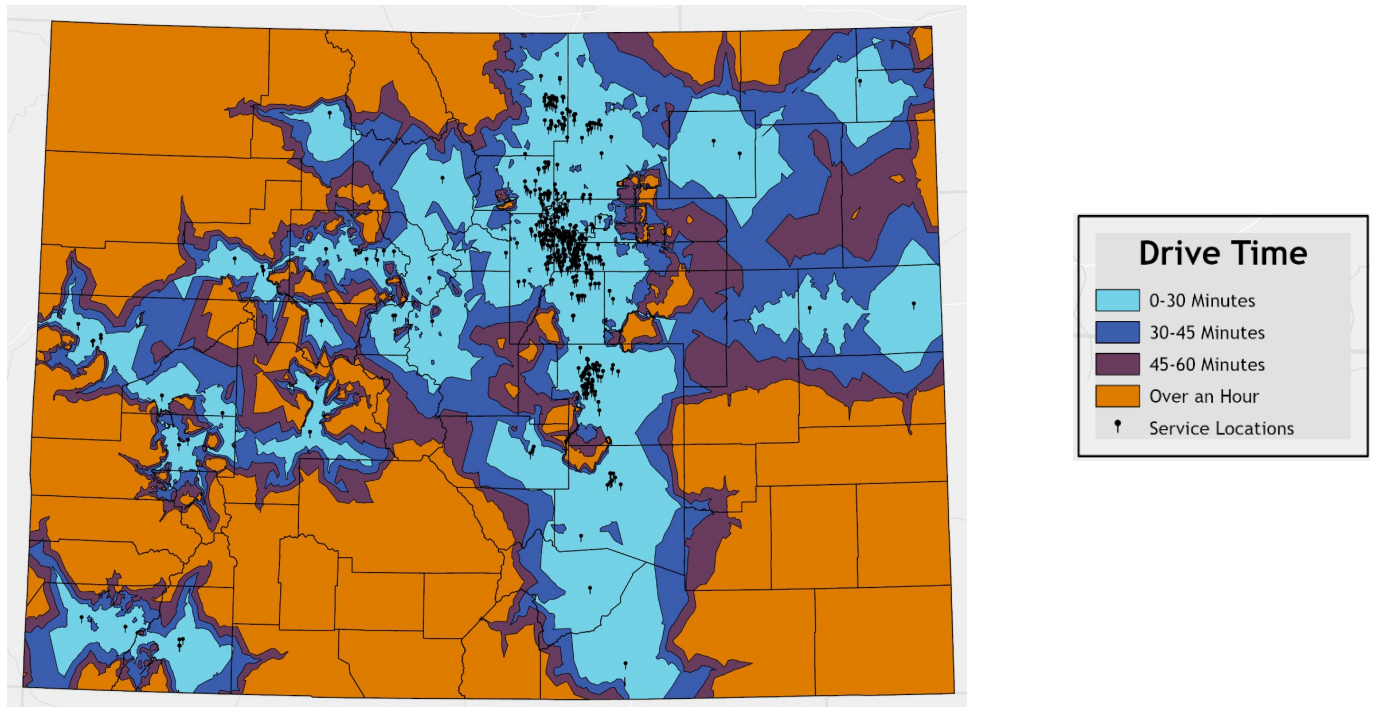


Figure 70.

### 5.3.6 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Outpatient ST** service category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 61% of providers statewide served Medicaid members.

### 5.3.7 Per Utilizer Per Month (PUPM) Expenditure

The PUPM Expenditure analysis shows the average total expenditures per utilizer per month for the **Outpatient ST** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024) based on the line level claim data for each procedure code and/or revenue code. The PUPM expenditure metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 71, statewide Medicaid expenditures per utilizer per month for the **Outpatient ST** service category increased slightly from SFY 2021-22 to SFY 2023-24 and were significantly higher than other payers.

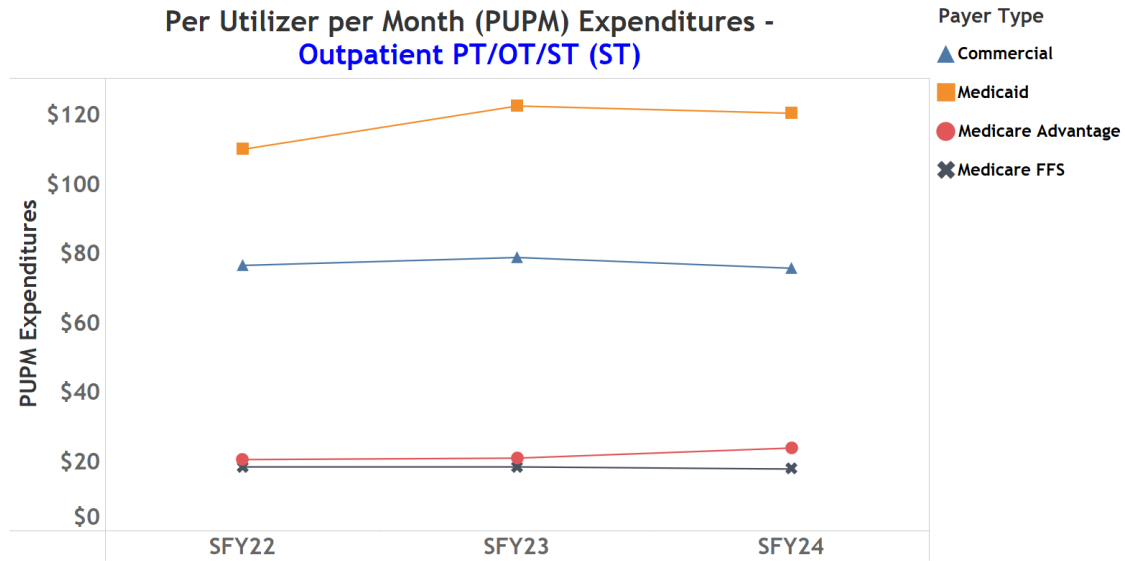


Figure 71.

### 5.3.8 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Outpatient ST** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

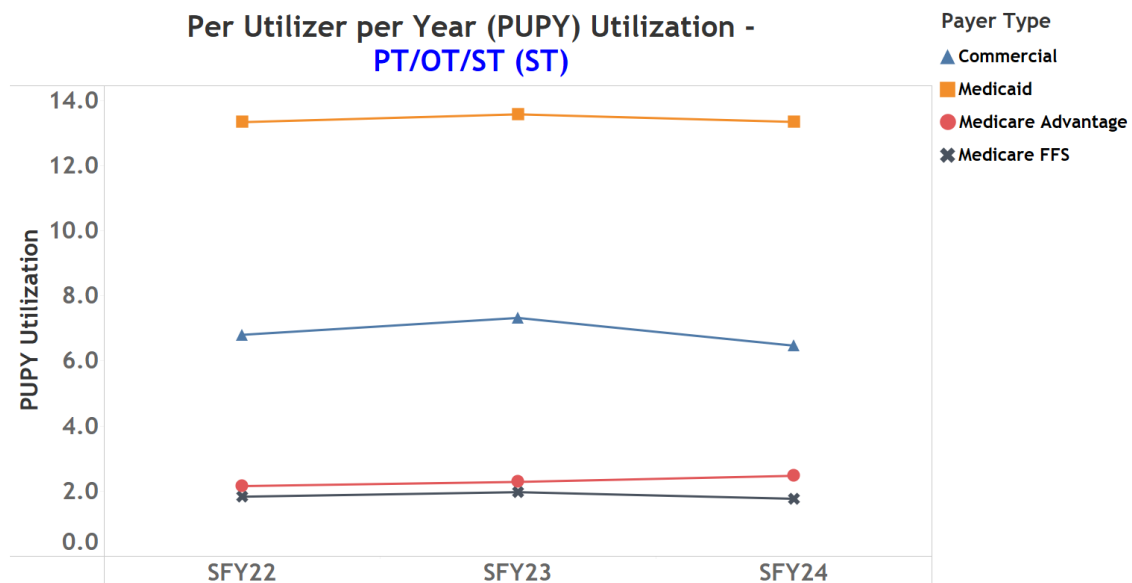


Figure 72.

As shown in Figure 72, statewide Medicaid utilization per utilizer per year for the **Outpatient ST** service category remained relatively stable from SFY 2021-22 to SFY 2023-24 and was higher than other payers.



## 6. Specialty Care Services

### 6.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Specialty Care Services** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

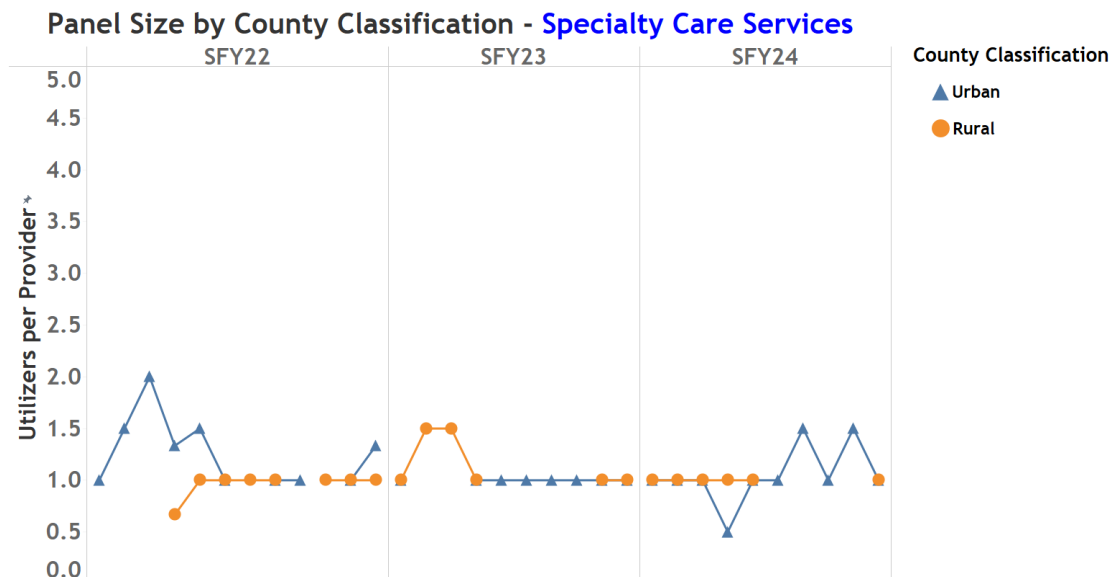


Figure 73.

As shown in Figure 73, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 0.5 and 2. In rural areas, this metric ranged from 0.67 to 1.5. The overall trend over these three years for each region type was relatively stable, though utilizers and providers were very low across both regions. The **Specialty Care Services** category overall has very low utilization, so any changes in utilizer or provider counts will appear to cause fluctuations.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Specialty Care Services** category during SFY 2023-24. A darker blue color indicates a higher panel size.

As shown in Figure 74, in SFY 2023-24, the number of utilizers per provider was highest in Weld County. Meanwhile, the other counties had lower panel sizes, though not by a significant margin because utilization for this service category was very low overall.



Panel Size by County (SFY24) - **Specialty Care Services**

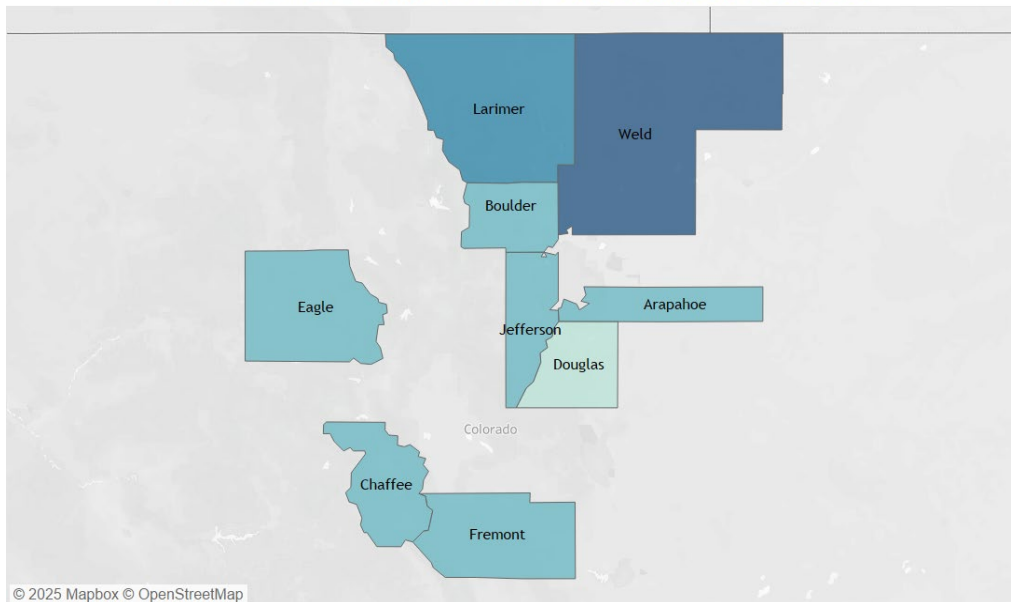


Figure 74.

## 6.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Specialty Care Services** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) - **Specialty Care Services**

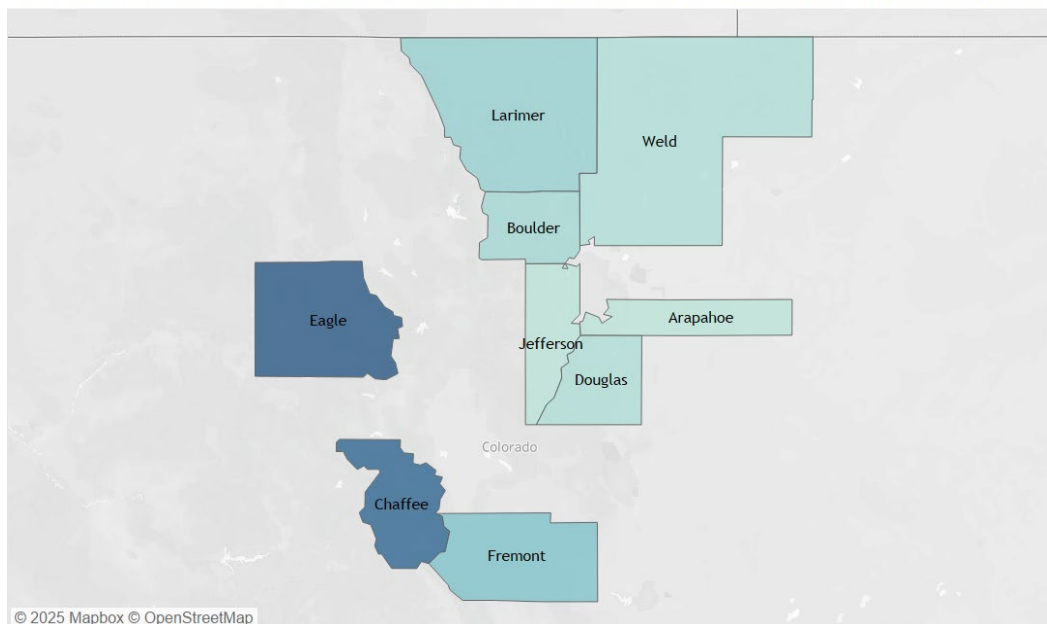


Figure 75.

As shown in Figure 75, members in 9 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Eagle County, followed closely by Chaffee

County, while being low and relatively uniform throughout the other counties, which were mostly located along or adjacent to the northern portion of the I-25 corridor. However, they were not significantly lower in penetration rate due to overall low utilization in this service category.

### 6.3 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Specialty Care Services** providers.

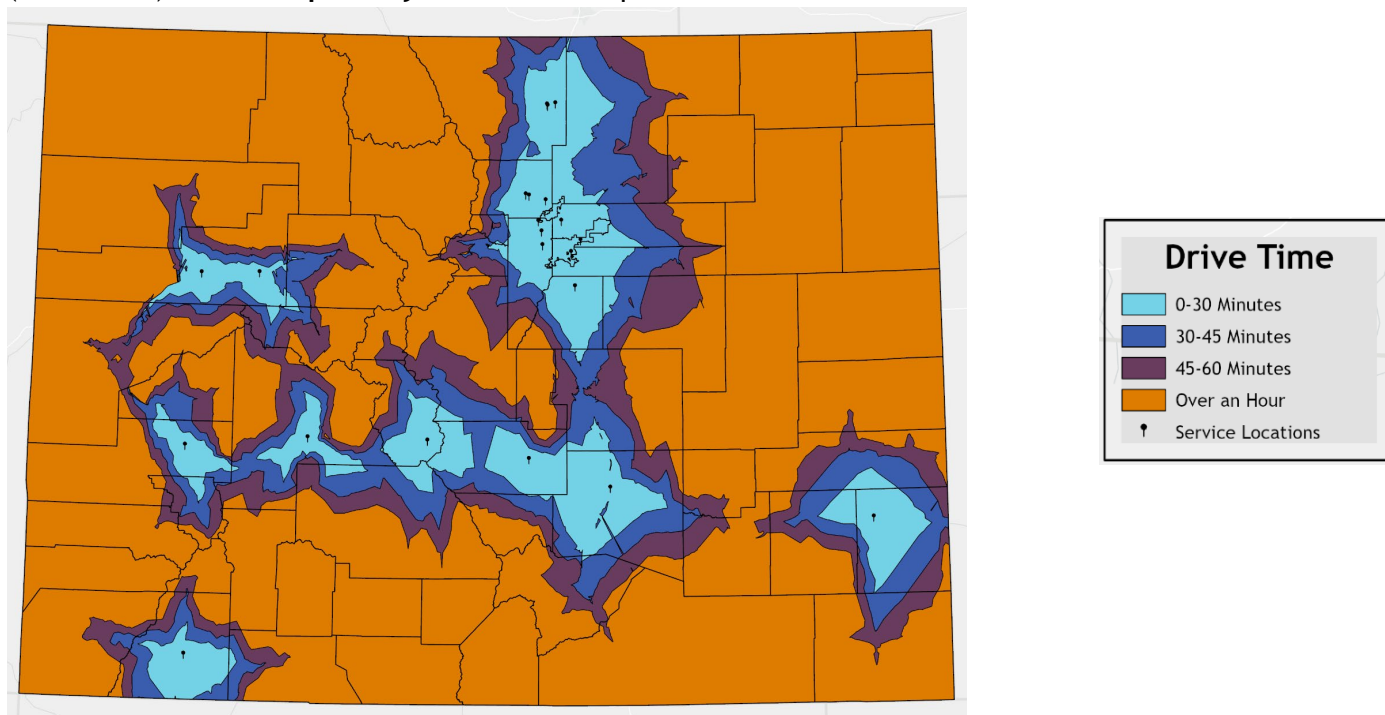


Figure 76.

Figure 76 shows the drive time bands across the state wherein members reside, relative to **Specialty Care Services** providers. From SFY 2021-22 to SFY 2023-24, 69.09% of total members resided 30 minutes or less from a provider; 15.15% of total members resided approximately 30-45 minutes; 7.58% of total members resided 45-60 minutes; and 8.18% of total members resided over an hour from a provider.

### 6.4 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Specialty Care Services** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 18% of providers statewide served Medicaid members.

### 6.5 Per Utilizer Per Month (PUPM) Expenditure

The PUPM Expenditure analysis shows the average total expenditures per utilizer per month for the **Specialty Care Services** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024) based on the line level claim data for each procedure code and/or revenue

code. The PUPM expenditure metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

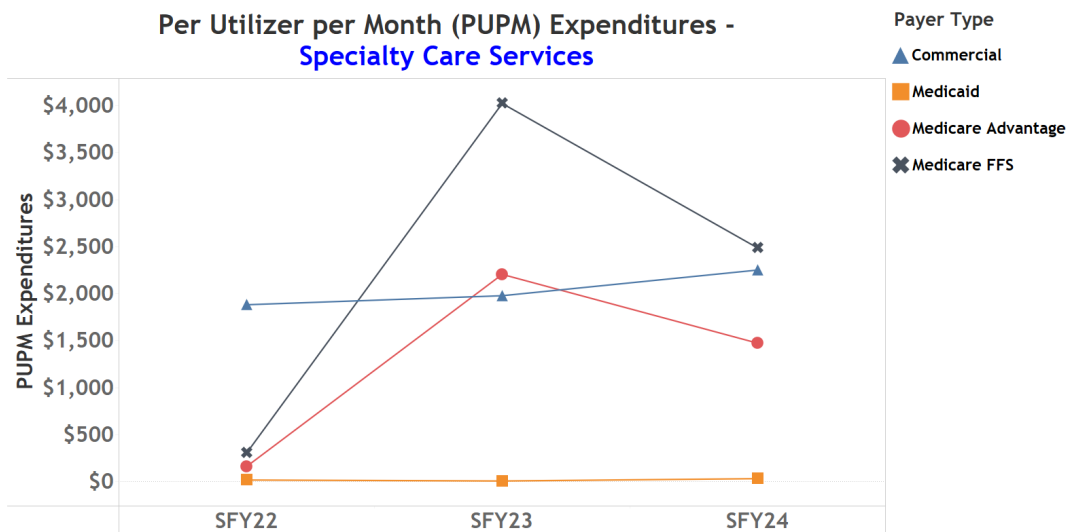


Figure 77.

As shown in Figure 77, statewide Medicaid expenditures per utilizer per month for the **Specialty Care Services** remained relatively stable From SFY 2021-22 to SFY 2023-24 and was lower than other payers by a very significant margin.

## 6.6 Per Utilizer Per Year (PUPY) Utilization

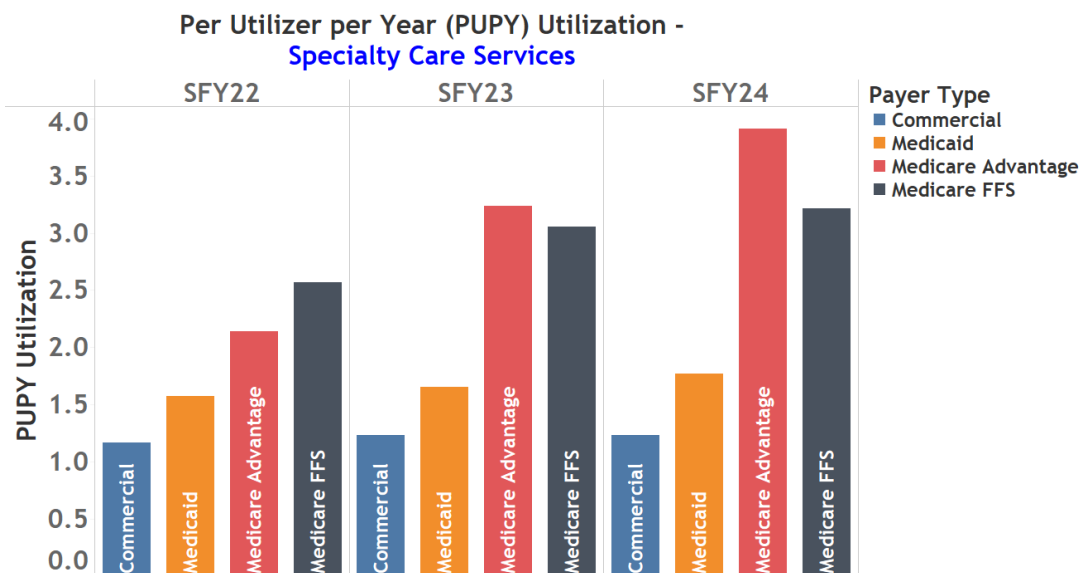


Figure 78.

The PUPY utilization analysis (Figure 78) refers to the average total utilization per utilizer per year for the **Specialty Care Services** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid,

Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 78, statewide Medicaid utilization per utilizer per year for the **Specialty Care Services** remained stable from SFY 2021-22 to SFY 2023-24 and was higher than commercial payers, though exceeded by Medicare Advantage and Medicare FFS.

## 7. Early Intervention (TCM)

### 7.1 Panel Size Analysis

The first part of the panel size analysis considers the number of utilizers per provider for the **Early Intervention Targeted Case Management (TCM)** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

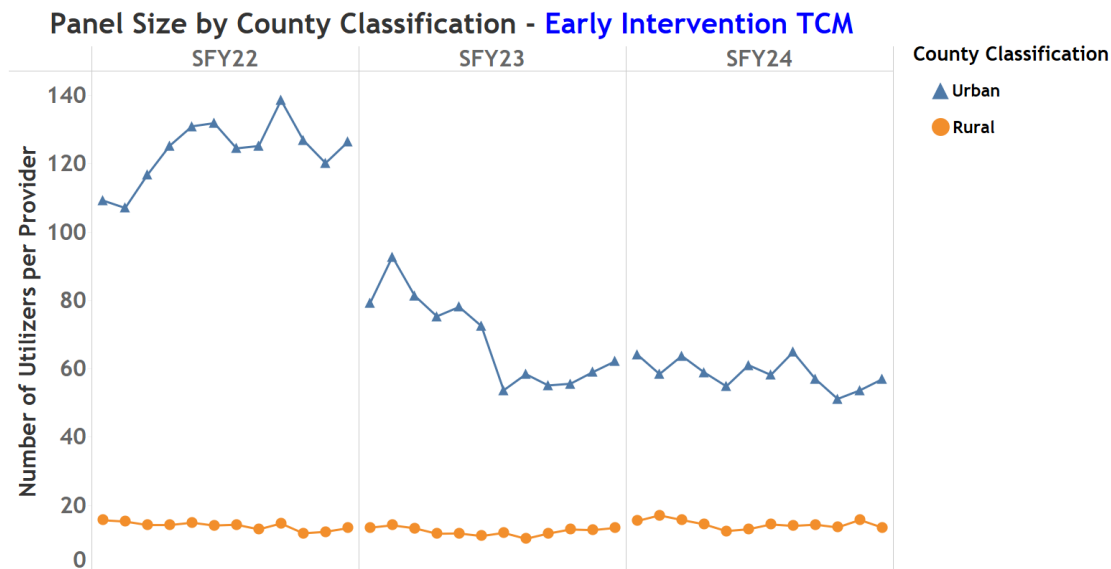


Figure 79.

As shown in Figure 79, in urban areas during SFY 2021-22 to 2023-24, the numbers of utilizers per provider ranged from 51.19 to 138.63. In rural areas, the number of utilizers per provider ranged from 10.23 to 17.09. In urban regions, there was a significant decrease in panel size at the beginning of SFY 2022-23 due to an increase in providers, which further decreased before stabilizing around the middle of SFY 2022-23. For rural regions, panel size remained stable across all three fiscal years.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Early Intervention Targeted Case Management (TCM)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 80, in SFY 2023-24, the number of utilizers per provider was highest in Adams County, followed by nearby Arapahoe County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as some counties in North-Western Colorado, had moderate panel sizes. Meanwhile, counties with the lowest panel sizes were mostly located in the Eastern and South-Western parts of Colorado.

Panel Size by County (SFY24) - **Early Intervention TCM**

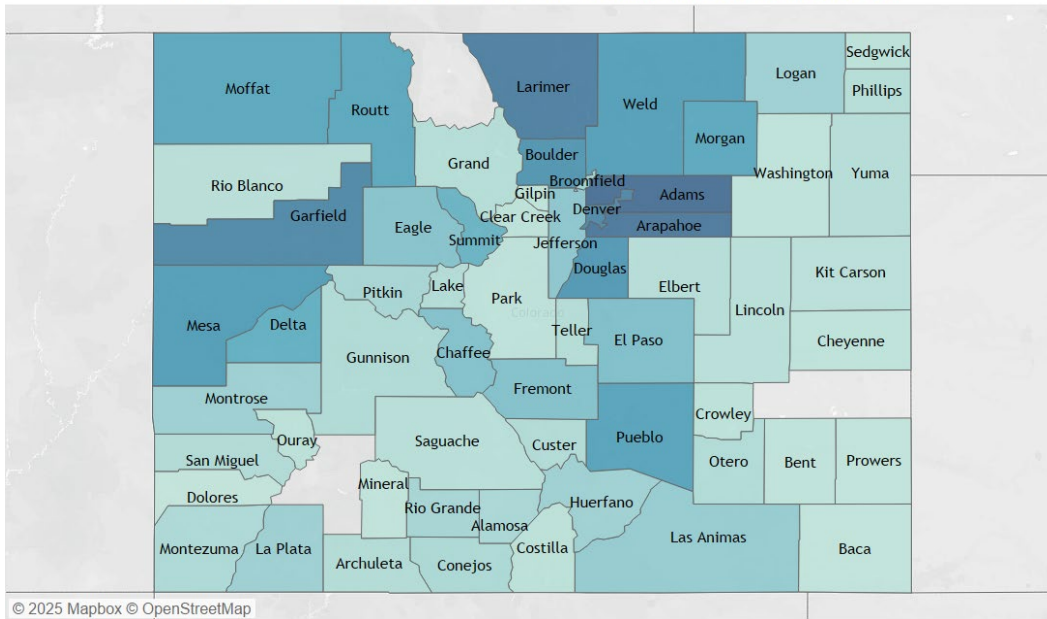


Figure 80.

## 7.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Early Intervention Targeted Case Management (TCM)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) - **Early Intervention TCM**

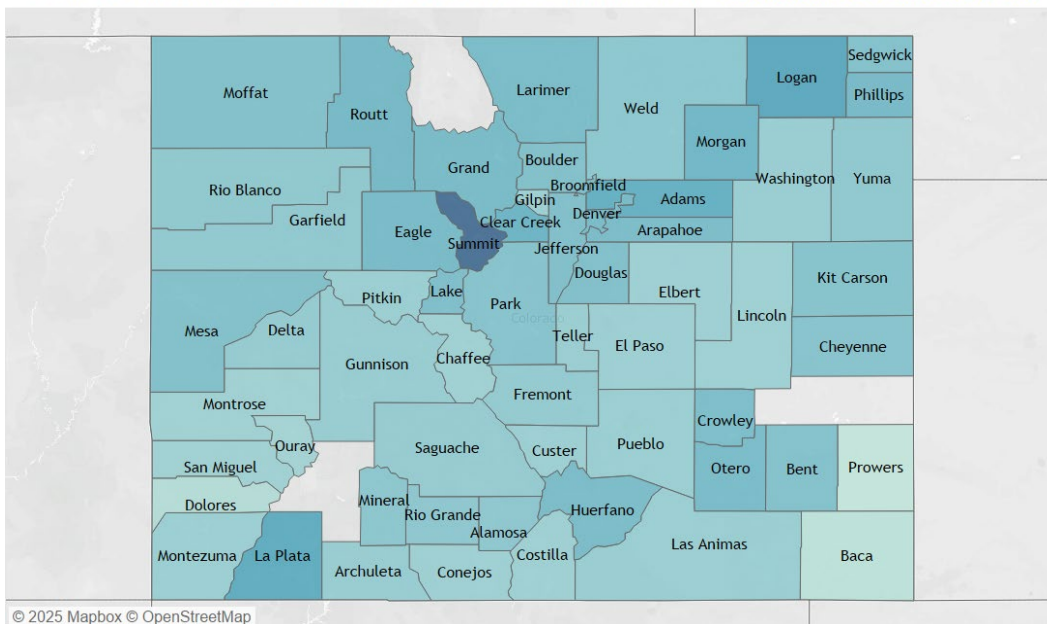


Figure 81.

As shown in Figure 81, members in 60 of Colorado’s 64 counties utilized services in this category. The penetration rate was highest in Summit County, while the penetration rate across the other 59 counties was lower and relatively uniform, with the lowest panel sizes located in the South-Eastern part of Colorado.

### 7.3 Telemedicine Analysis

The first part of the telemedicine analysis considered the number of individual members that utilized services in the **Early Intervention Targeted Case Management (TCM)** category and what percentage of those members received at least one service through telemedicine across SFY 2021-22 to SFY 2023-24.

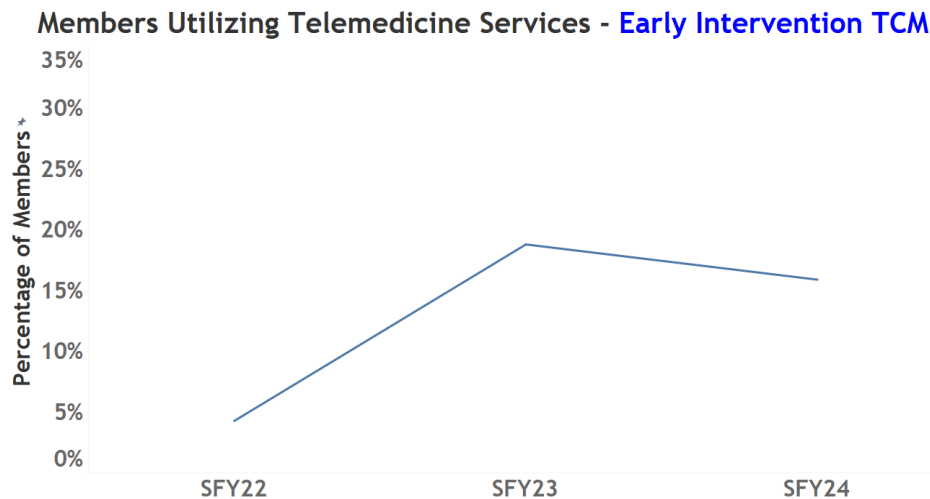


Figure 82.

As shown in Figure 82, the percentage of individual members that utilized telemedicine **Early Intervention Targeted Case Management (TCM)** services was overall moderate, with an increasing trend from SFY 2021-22 to SFY 2023-24, before decreasing from SFY 2022-23 to SFY 2023-24.

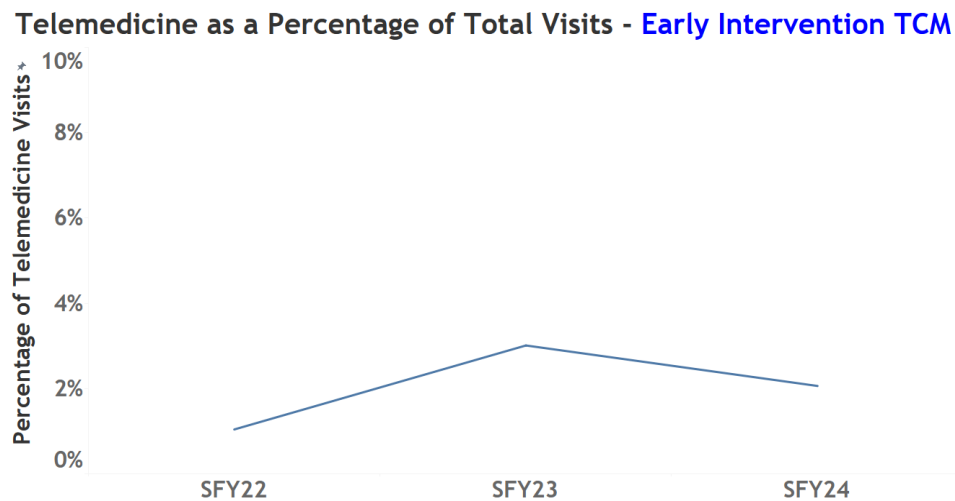


Figure 83.



The second part of the telemedicine analysis (Figure 83) considered the number of total visits in the **Early Intervention Targeted Case Management (TCM)** category and what percentage of those visits were delivered through telemedicine across SFY 2021-22 to SFY 2023-24.

As shown in Figure 83, from SFY 2021-22 to SFY 2023-24, the overall percentage of total visits that were delivered through telemedicine for **Early Intervention Targeted Case Management (TCM)** was low. This percentage increased from SFY 2021-22 to SFY 2022-23, then decreased from SFY 2022-23 to SFY 2023-24.

## 7.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Early Intervention Targeted Case Management (TCM)** providers.

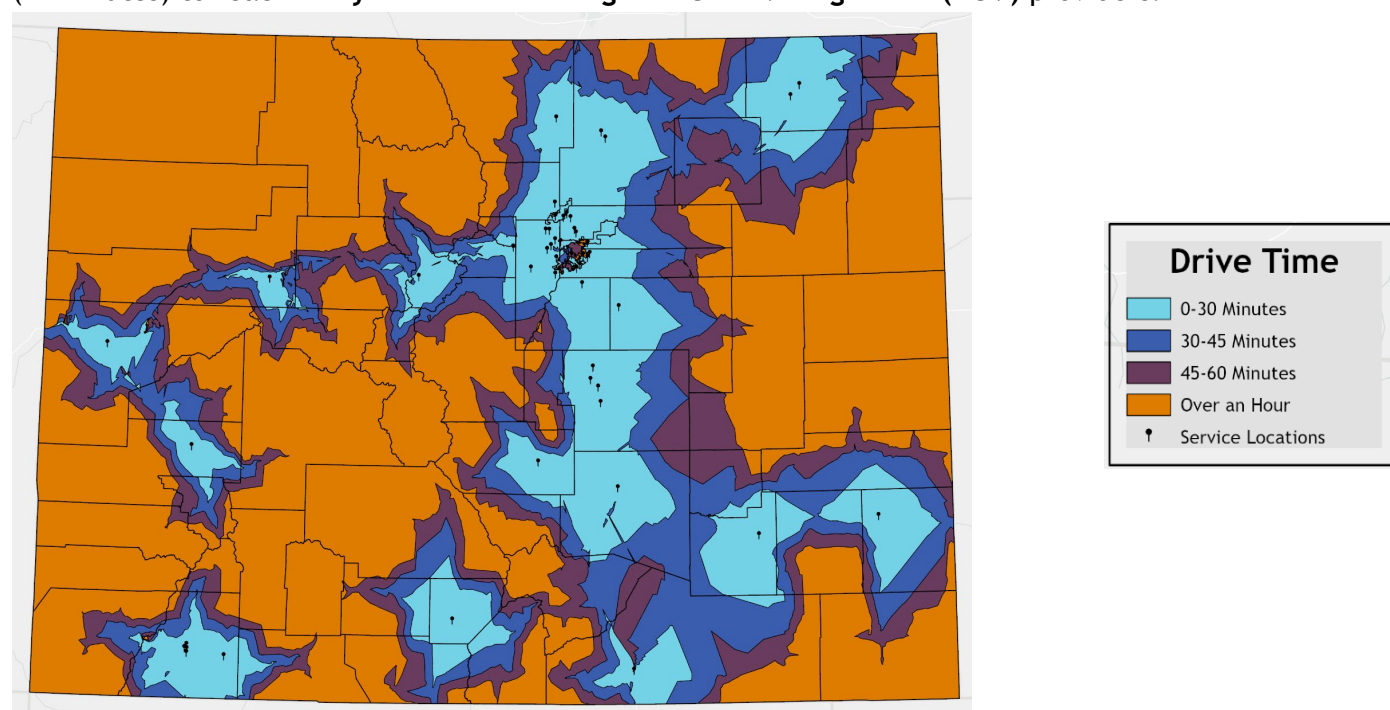


Figure 84.

Figure 84 shows the drive time bands across the state wherein members reside, relative to **Early Intervention Targeted Case Management (TCM)** providers. From SFY 2021-22 to SFY 2023-24, 82.30% of total members resided 30 minutes or less from a provider; 6.83% of total members resided approximately 30-45 minutes; 6.26% of total members resided 45-60 minutes; and 4.61% of total members resided over an hour from a provider.

## 7.5 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Early Intervention Targeted Case Management (TCM)** service category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 97% of providers statewide served Medicaid members.



## 8. Targeted Case Management (TCM)

### 8.1 Case Management

#### 8.1.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **TCM Case Management** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

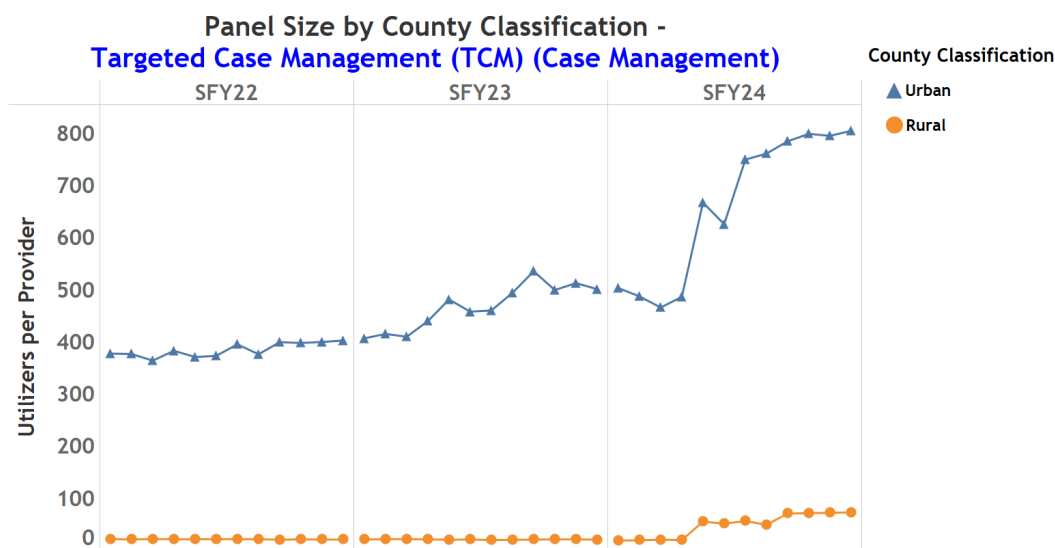


Figure 85.

As shown in Figure 85, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 365 and 805.81. In rural areas, this metric ranged from 19.8 to 73.81. In urban regions, panel size increased slightly from SFY 2021-22 to SFY 2022-23, before increasing significantly in November of SFY 2023-24 as a result of a substantial increase in the number of utilizers while the number of providers remained the same<sup>5</sup>. In rural regions, there was a similar pattern for the same reasons, though the increase in November of SFY 2023-24 was less pronounced.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Targeted Case Management** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

<sup>5</sup> The substantial increase noted in SFY 2023-24 was related to case management redesign policy changes, first taking effect in SFY 2022-23. One primary change required Community Centered Boards (CCBs) to be restructured under the newly created Case Management Agencies (CMAs) and Single-Entry Point (SEP) agencies to contract with or be absorbed into the CMAs. The deprecated SEP's previously served members not on the IDD waiver and services were paid under monthly contracts and billed under a different waiver. Additionally, the Business Utilization System (BUS), which SEPs had used to document service activities until the case management redesign, was replaced by the Care and Case Management System (CCM). As such, the complete data picture for TCM Case Management utilization was not available prior to SFY 2023-24 because of the fragmentation of services under different agency types. The services have since become more aligned with the care and case management redesign, thus causing this perceived increase in utilizers per provider from SFY 2022-23 to SFY 2023-24.

**Panel Size by County (SFY24) -  
Targeted Case Management (TCM) (Case Management)**

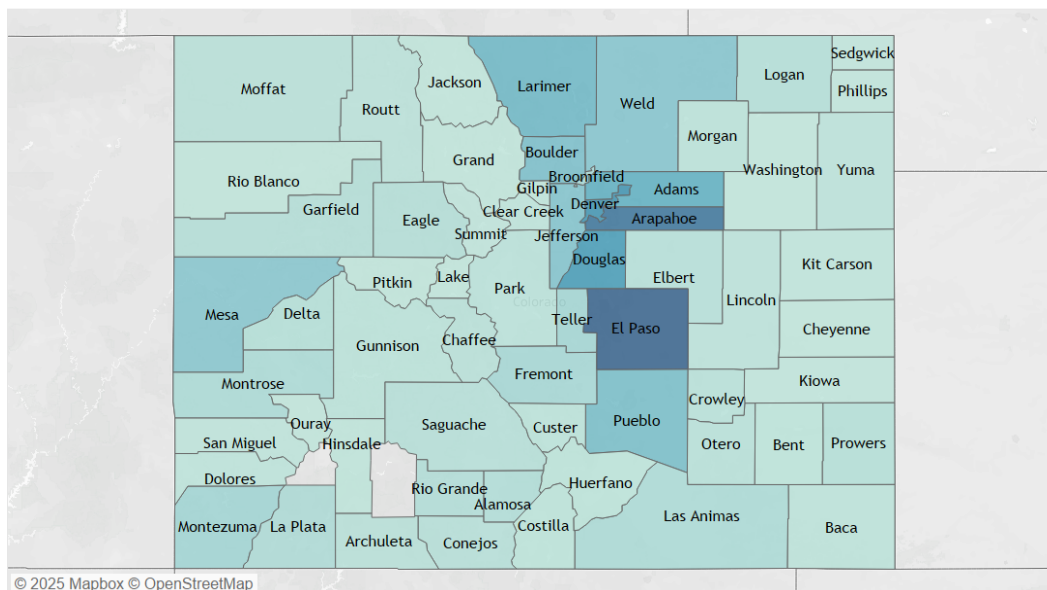


Figure 86.

As shown in Figure 86, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as a select few in Western Colorado, had relatively moderate panel sizes. Meanwhile, counties with lower panel sizes were located throughout the state, with many being in the Eastern and Western parts of Colorado.

### 8.1.2 Penetration Rate

**Penetration Rate (Utilization per 1000 Members) -  
Targeted Case Management (TCM) (Case Management)**

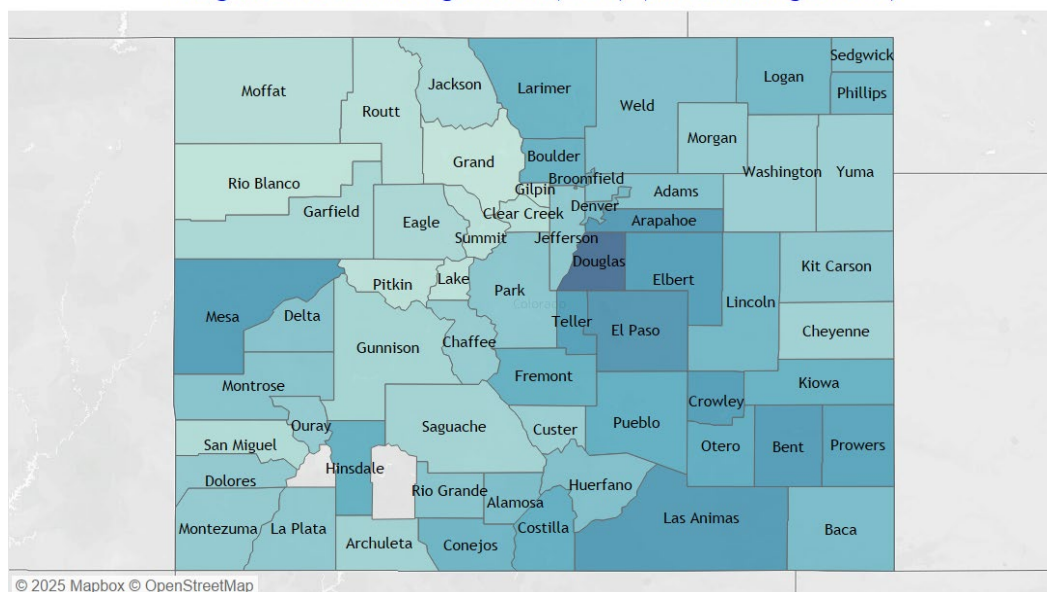


Figure 87.

The Penetration Rate analysis (Figure 87) considers the number of members that utilized services in the **TCM Case Management** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

As shown in Figure 87, members in 62 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Douglas County and relatively uniform throughout much of the state, with a few counties in South-Eastern Colorado having somewhat moderate penetration rates. This excludes the North-Western part of Colorado, where penetration rates were lower in comparison.

### 8.1.3 Telemedicine Analysis

The first part of the telemedicine analysis considered the number of individual members that utilized services in the **TCM Case Management** service category and what percentage of those members received at least one service through telemedicine across SFY 2021-22 to SFY 2023-24.

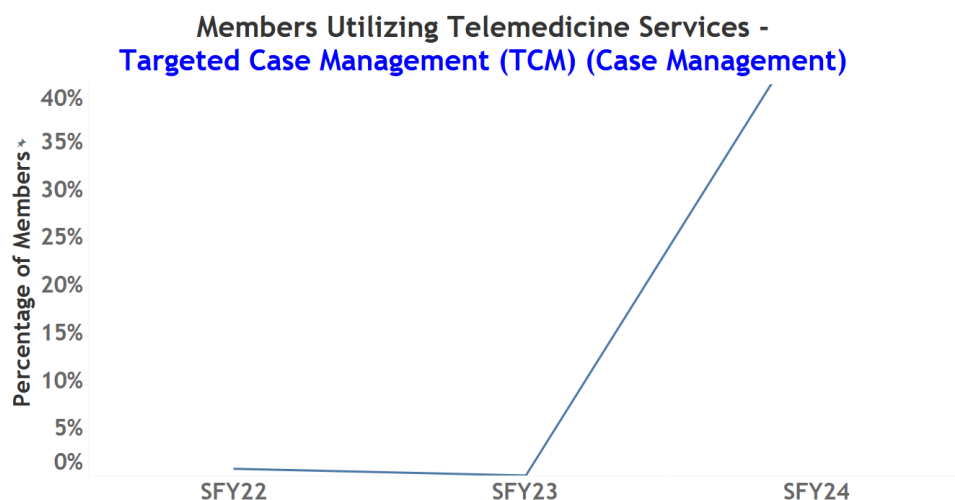


Figure 88.

As shown in Figure 88, from SFY 2021-22 to SFY 2022-23, the percentage of individual members that utilized telehealth **TCM Case Management** services appeared to be very low, before experiencing a dramatic increase from SFY 2022-23 to SFY 2023-24. However, this apparent spike was the result of new reporting requirements for telemedicine case management services implemented through the case management redesign policy changes at the beginning of SFY 2023-24<sup>6</sup>.

<sup>6</sup> This perceived increase in telemedicine utilization resulted from the deprecation of the previous case management billing system, the Benefits Utilization System (BUS), which did not require providers to report Telemedicine visits. Before the BUS's deprecation, a significant proportion of members still likely received what would be considered telemedicine services from SFY 2021-22 through SFY 2022-23, because most case management visits during the Public Health Emergency were done via telemedicine. As such, Figure 88 shows the effects of the new Care and Case Management System (CCM) being introduced in July SFY 2023-24 (July 2023) and Community Centered Boards (CCBs) becoming restructured into Case Management Agencies (CMAs), enabling providers to more effectively document a service performed as telemedicine under the new system.

The second part of the telemedicine analysis considered the number of total visits in the **TCM Case Management** category and what percentage of those visits were delivered through telemedicine across SFY 2021-22 to SFY 2023-24.

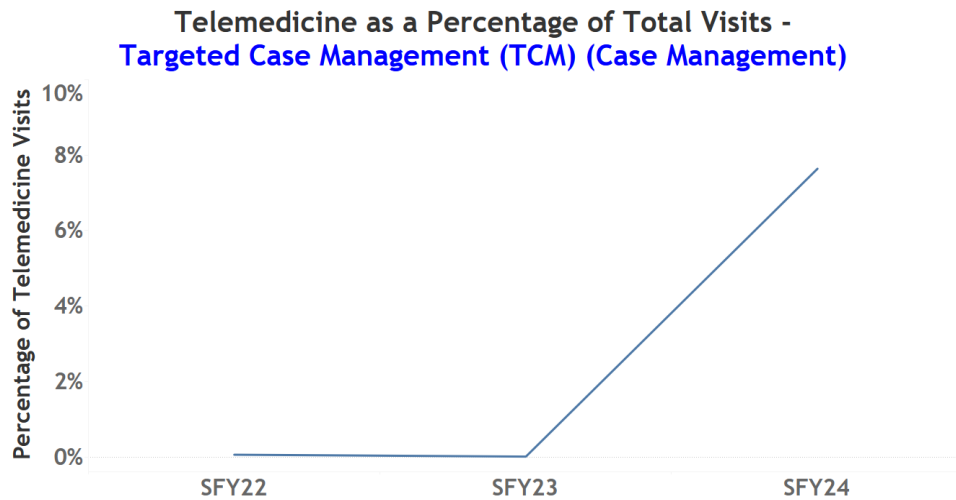


Figure 89.

As shown in Figure 89, From SFY 2021-22 to SFY 2023-24, the percentage of total visits that were delivered through telemedicine for **TCM Case Management** followed a similar pattern as the first telemedicine metric due to the case management redesign. What appears as a spike in telemedicine visits from SFY 2022-23 to SFY 2023-24 was not actually a dramatic increase, but rather a result of changes in reporting requirements for telemedicine case management services.

#### 8.1.4 Drive Time

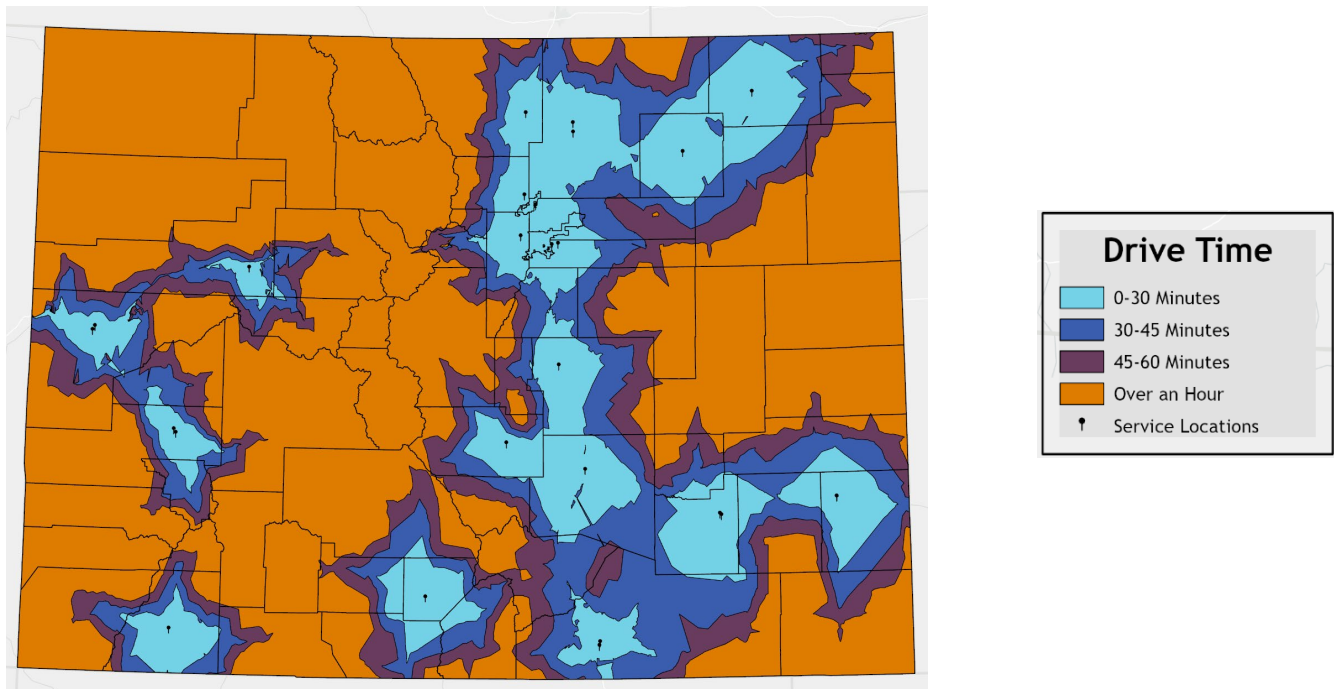


Figure 90.

The drive time metric (Figure 90) calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to **TCM Case Management** providers.

Figure 90 shows the drive time bands across the state wherein members reside, relative to **TCM Case Management** providers. From SFY 2021-22 to SFY 2023-24, 90.21% of total members resided 30 minutes or less from a provider; 3.85% of total members resided approximately 30-45 minutes; 2.22% of total members resided 45-60 minutes; and 3.72% of total members resided over an hour from a provider.

### **8.1.5 Provider Participation**

The provider participation rate identifies the percentage of providers in Colorado that serves Medicaid members for the **TCM Case Management** service category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 90% of providers statewide served Medicaid members.

## 8.2 Transition Coordination

### 8.2.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **TCM Transition Coordination** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

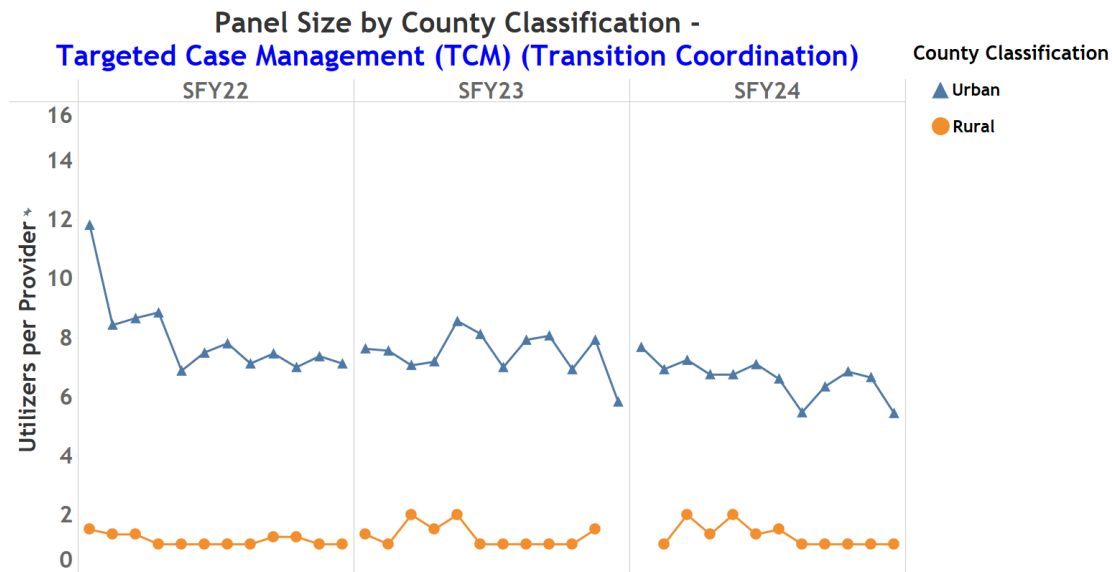


Figure 91.

As shown in Figure 91, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 5.44 and 11.83. In rural areas, this metric ranged from 1 to 2. In urban regions, panel size decreased at the beginning of SFY 2021-22 as a result of a decrease in the number of utilizers, before maintaining a relatively stable pattern through the end of SFY 2023-24. In rural regions, there was a stable pattern through all three fiscal years.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **TCM Care Coordination** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 92, in SFY 2023-24, the number of utilizers per provider was highest in Pueblo County. Additionally, several other counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, counties with the lower panel sizes were located throughout the state, with many being in parts of Eastern and Western Colorado.

**Panel Size by County (SFY24) -  
Targeted Case Management (TCM) (Transition Coordination)**

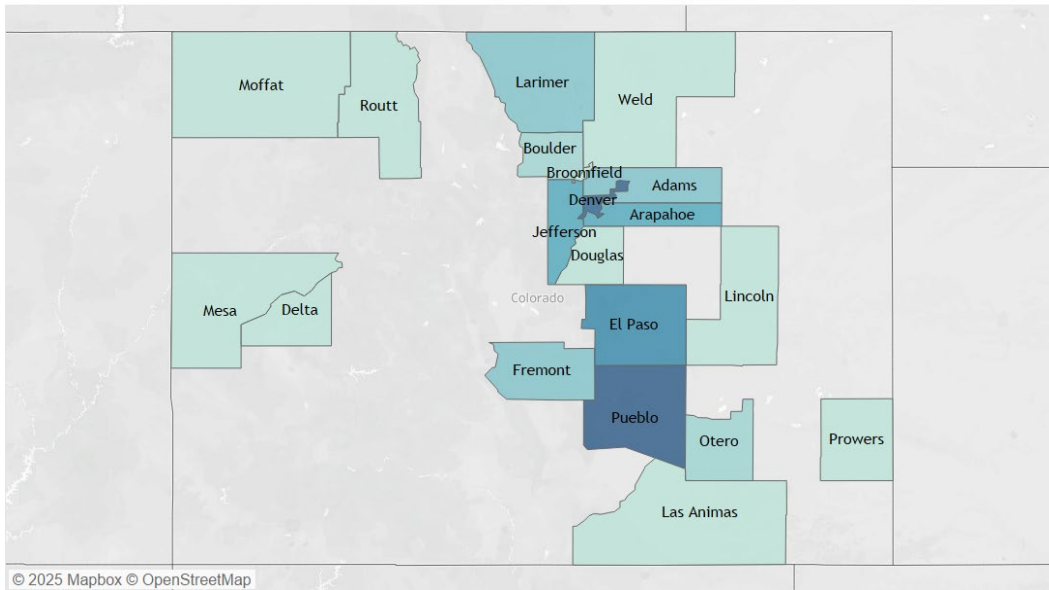


Figure 92.

### 8.2.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **TCM Transition Coordination** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Targeted Case Management (TCM) (Transition Coordination)**

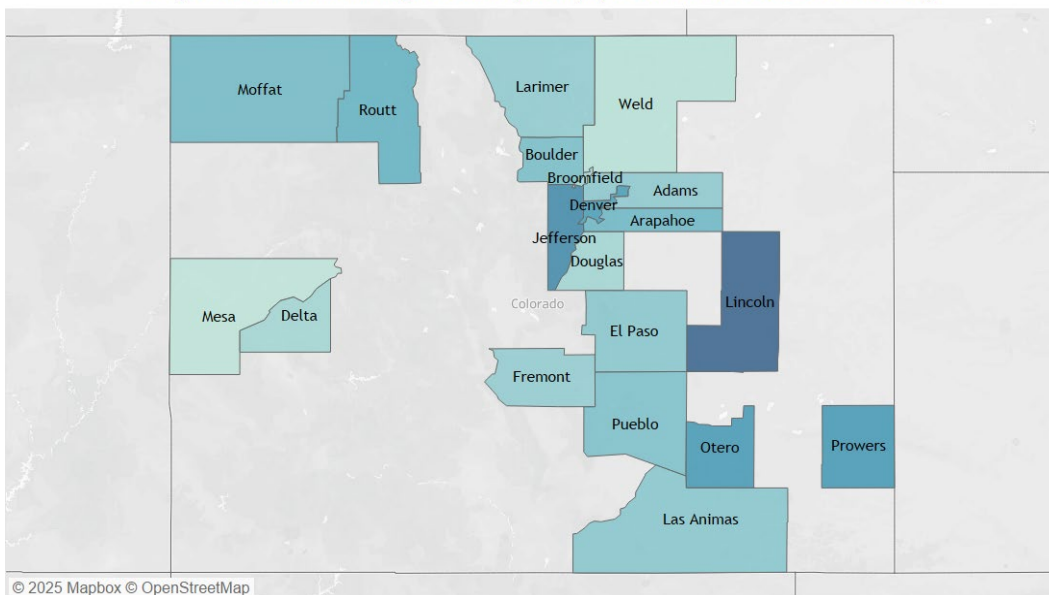


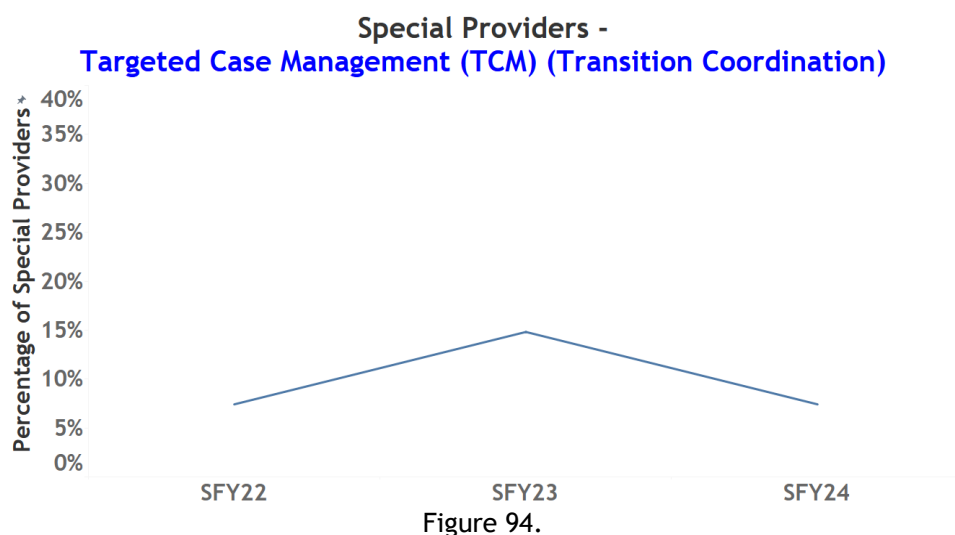
Figure 93.



As shown in Figure 93, members in 20 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Lincoln County and relatively uniform throughout the other counties, although they were not significantly lower in penetration rate due to overall low utilization in this service category.

### 8.2.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **TCM Transition Coordination** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).



As shown in Figure 94, the percentage of special providers increased from SFY 2021-22 to SFY 2022-23, before decreasing from SFY 2022-23 to SFY 2023-24. One provider had a notable decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. After further investigation, it was determined that this provider changed NPI and Medicaid ID, causing the decrease in members served under their previous ID's.

### 8.2.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **TCM Transition Coordination** providers.

Figure 95 shows the drive time bands across the state wherein members reside, relative to **TCM Transition Coordination** providers. From SFY 2021-22 to SFY 2023-24, 79.66% of total members resided 30 minutes or less from a provider; 7.81% of total members resided approximately 30-45 minutes; 2.47% of total members resided 45-60 minutes; and 10.06% of total members resided over an hour from a provider.

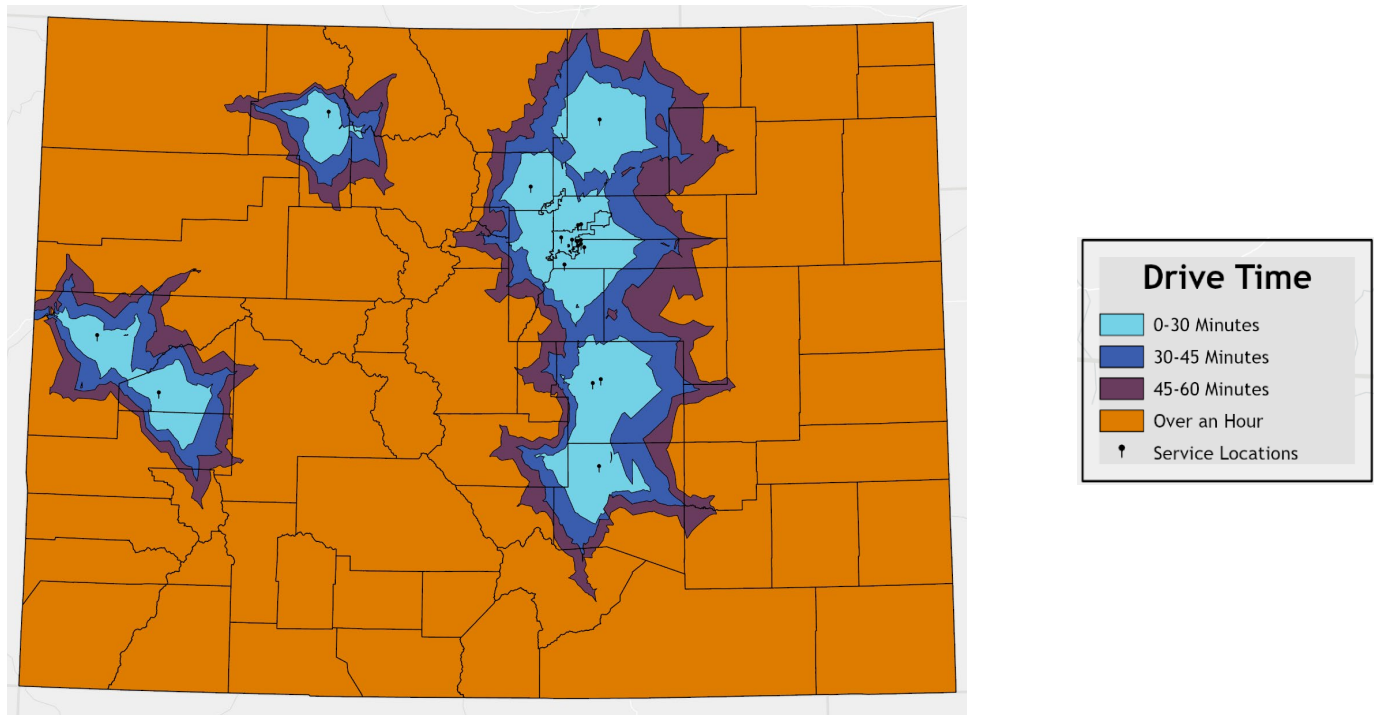


Figure 95.

### 8.2.5 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serves Medicaid members for the **TCM Transition Coordination** service category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 90% of providers statewide served Medicaid members.

## 9. Vision Services

### 9.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Vision Services** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

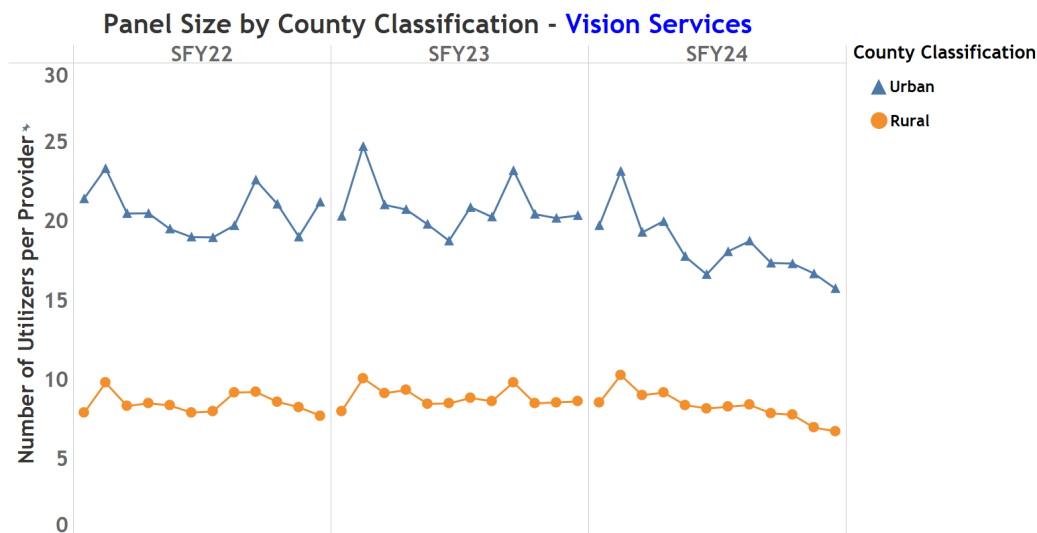


Figure 96.

As shown in Figure 96, in urban areas during SFY 2021-22 to 2023-24, the numbers of utilizers per provider ranged from 15.75 to 24.74. In rural areas, the number of utilizers per provider ranged from 6.74 to 10.28. In both urban and rural regions, panel size had a spike pattern at the beginning of each fiscal year and near the end of each fiscal year due to an increase in utilizers, though there was a downward trend at the end of SFY 2023-24 due to a decrease in utilizers. When the panel size was further broken out by three age categories: young children (less than 5 years), school-aged children (5 - 18 years), and adults (over 18), school-aged children were observed to have driven the spike pattern across urban and rural regions for codes related to eyeglasses. This can be explained by annual vision checks and eyeglass fittings that are given to school-aged children when they return to school around August of each year.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Vision Services** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 97, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed by nearby Pueblo County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as a select few in Western Colorado, had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were mostly located in the Eastern and Western parts of Colorado.

**Panel Size by County (SFY24) - Vision Services**

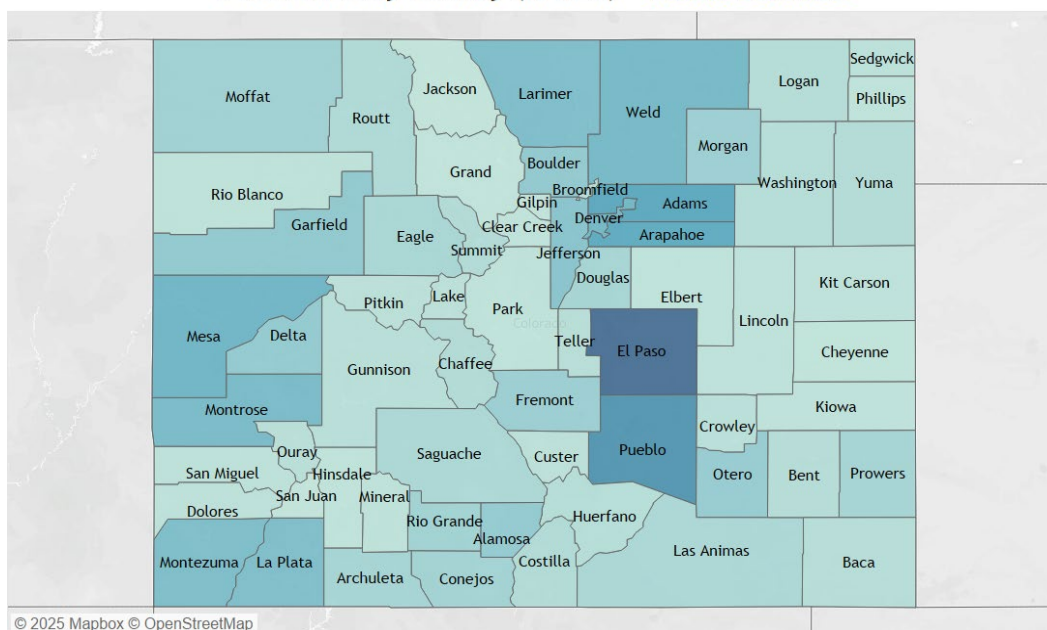


Figure 97.

## 9.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Vision Services** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) - Vision Services**

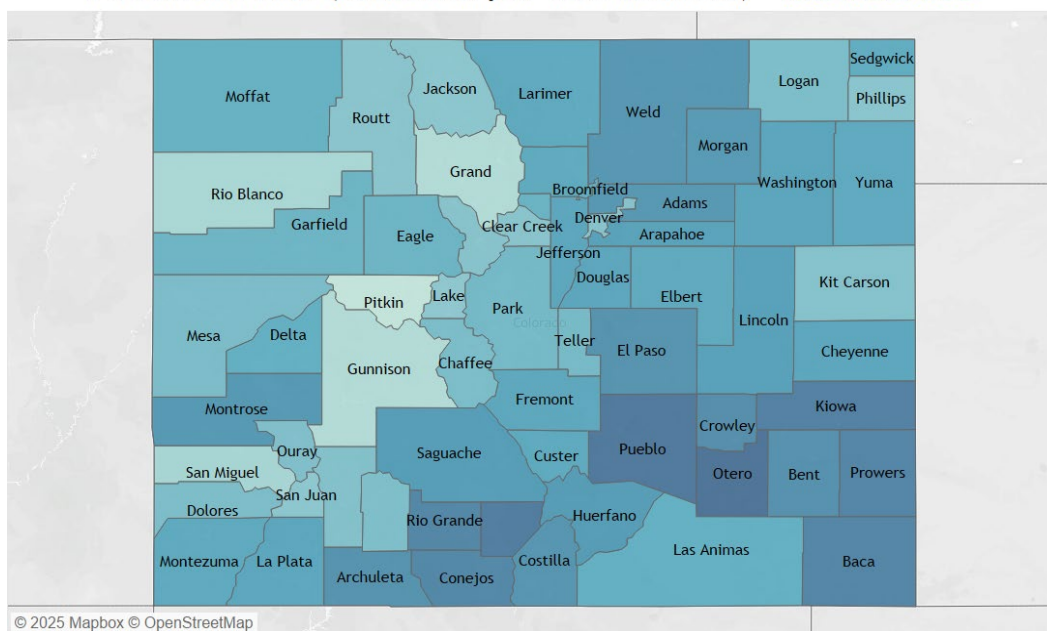


Figure 98.

As shown in Figure 98, members in all 64 of Colorado's counties utilized services in this category. The highest penetration rate was in Otero County. Additionally, the penetration

rate across the other 63 counties was uneven for **Vision Services**. For instance, the South-Eastern region of Colorado had the highest penetration rate, whereas several of the counties in Western Colorado had lower penetration rates.

### 9.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Vision Services** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

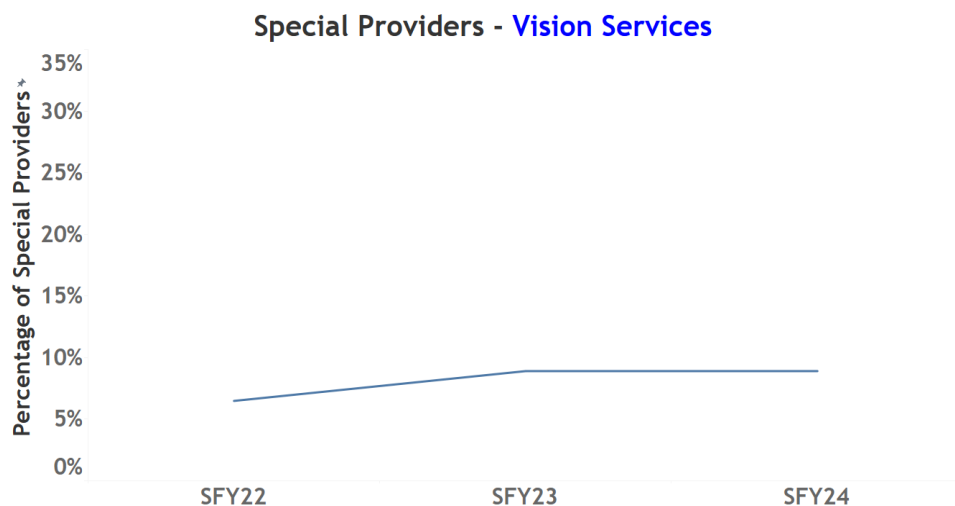


Figure 99.

As shown in Figure 99, the percentage of special providers remained relatively stable, increasing slightly from SFY 2021-22 to SFY 2023-24. Several providers had a notable decrease in the number of members they served over these three fiscal years. Additionally, some providers increased from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24.

### 9.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Vision Services** providers.

Figure 100 shows the drive time bands across the state wherein members reside, relative to **Vision Services** providers. From SFY 2021-22 to SFY 2023-24, 97.60% of total members resided 30 minutes or less from a provider; 1.33% of total members resided approximately 30-45 minutes; 0.67% of total members resided 45-60 minutes; and 0.40% of total members resided over an hour from a provider.

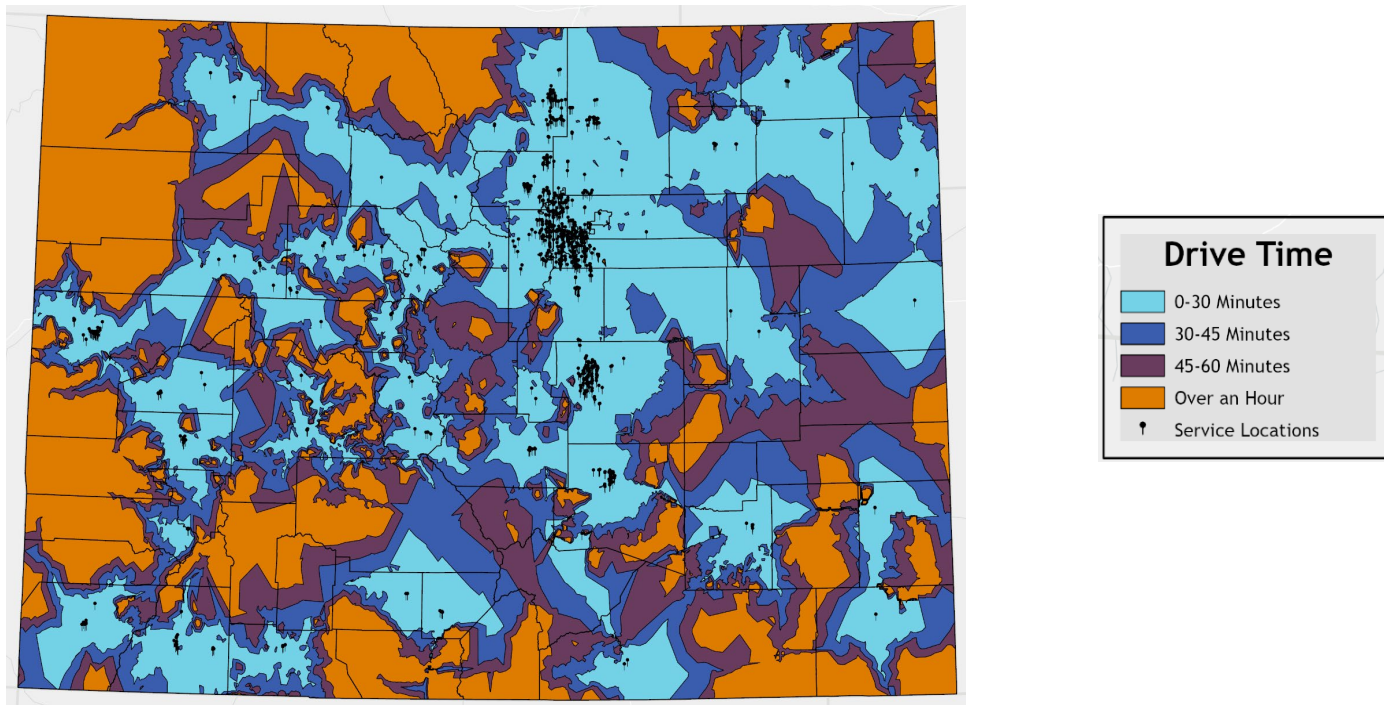


Figure 100.



## 10. Physician Services

### 10.1 Physician Services (Allergy and Immunology)

#### 10.1.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Allergy and Immunology)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

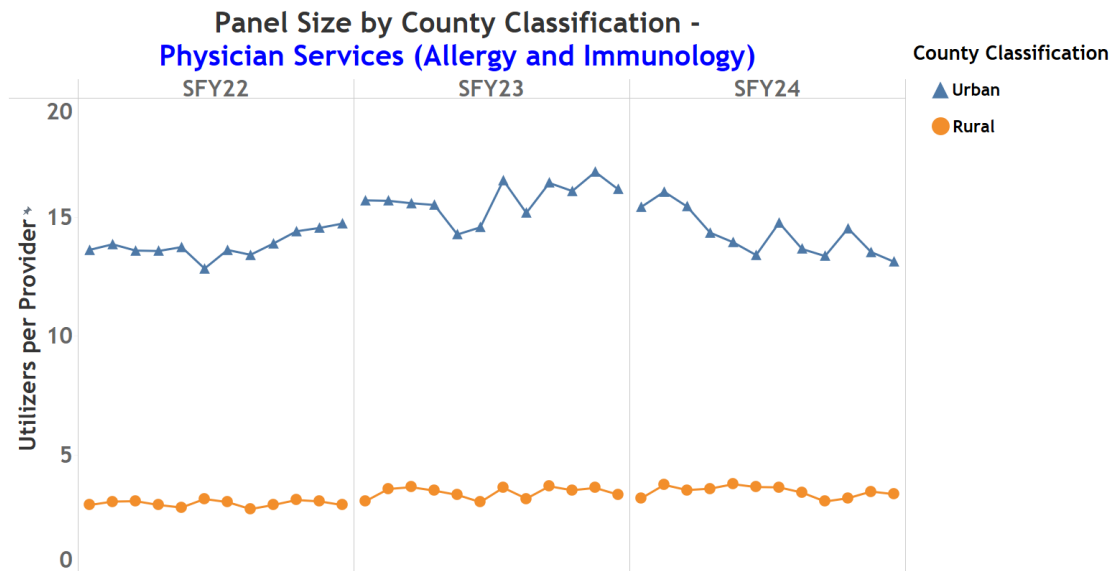


Figure 101.

As shown in Figure 101, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 12.84 and 16.9. In rural areas, this metric ranged from 2.72 to 3.77. In urban areas, panel size increased from SFY 2021-22 to SFY 2022-23 primarily due to increases in utilizers, then decreased in SFY 2023-24 due to decreases in utilizers. Meanwhile, panel size in rural areas was relatively stable.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Allergy and Immunology)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 102, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as some on the Western Slope, had relatively moderate panel sizes. Meanwhile, the other counties were relatively uniform in panel size and located throughout the state.



Panel Size by County (SFY24) - **Physician Services (Allergy and Immunology)**

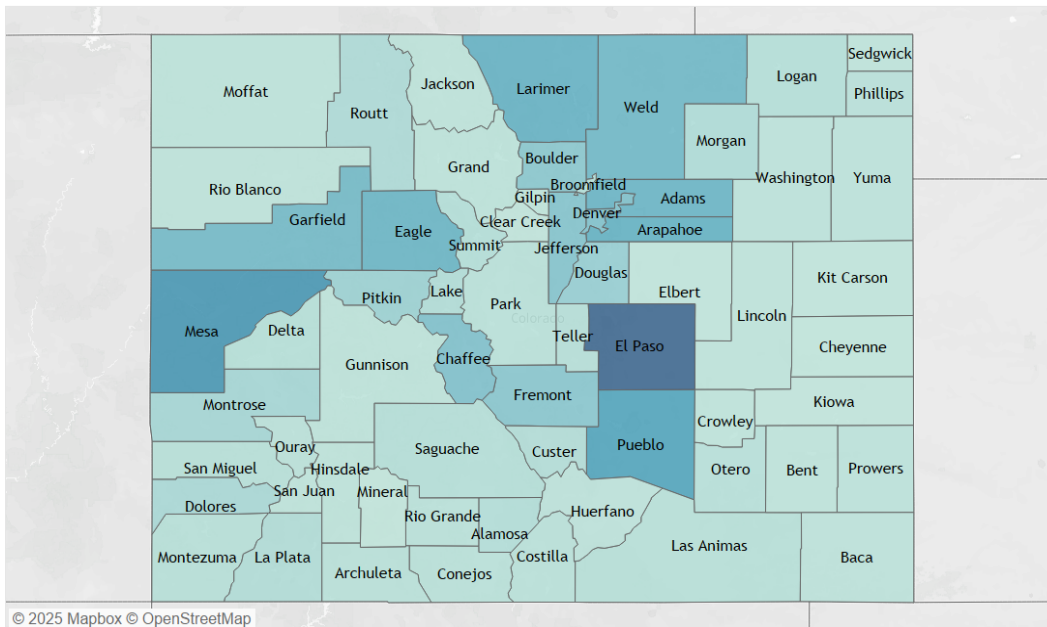


Figure 102.

### 10.1.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Allergy and Immunology)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) -  
**Physician Services (Allergy and Immunology)**

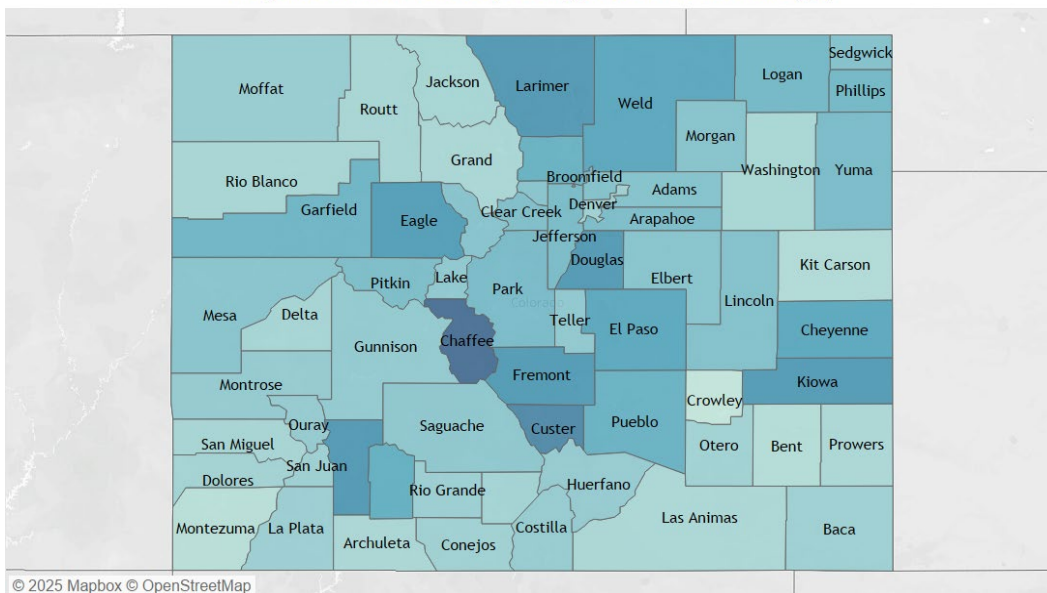


Figure 103.

As shown in Figure 103, members in all 64 of Colorado’s counties utilized services in this category. The penetration rate was highest in Chaffee County, with a few counties having relatively moderate penetration rates, though there was no pronounced pattern. Meanwhile, the counties having the lower penetration rates were located throughout the state.

### 10.1.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Allergy and Immunology)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

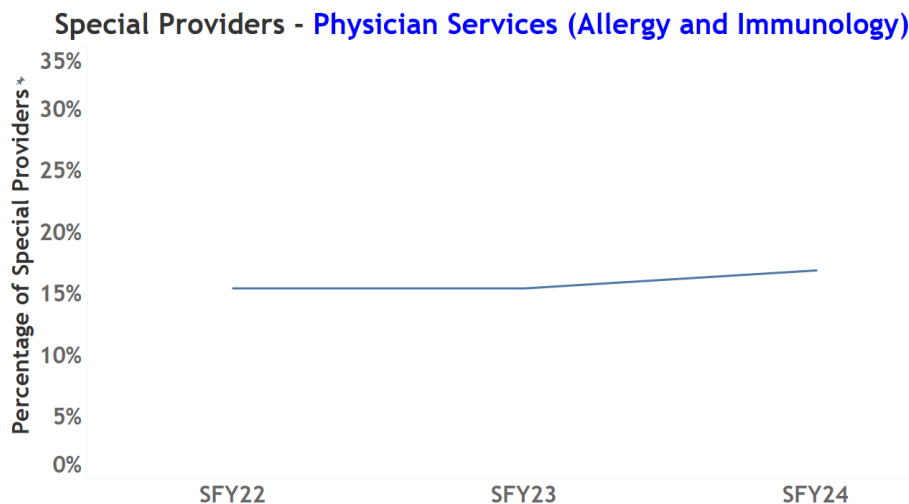


Figure 104.

As shown in Figure 104, the percentage of special providers was stable, with a slight increase from SFY 2021-22 to SFY 2023-24. A few providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served among providers can partially be attributed to provider(s) no longer practicing.

### 10.1.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Allergy and Immunology)** providers.

Figure 105 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Allergy and Immunology)** providers. From SFY 2021-22 to SFY 2023-24, 91.76% of total members resided 30 minutes or less from a provider; 4.98% of total members resided approximately 30-45 minutes; 1.77% of total members resided 45-60 minutes; and 1.49% of total members resided over an hour from a provider.

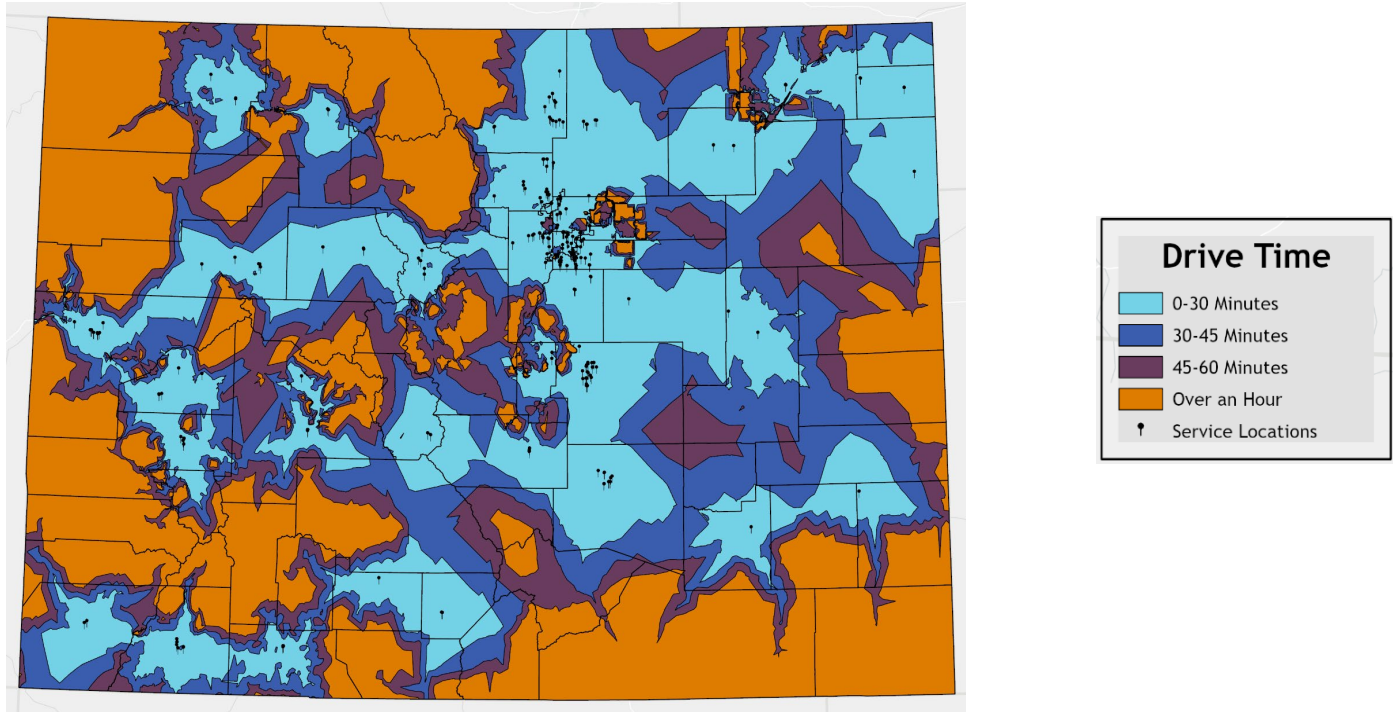


Figure 105.

## 10.2 Physician Services (Cardiology)

### 10.2.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Cardiology)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

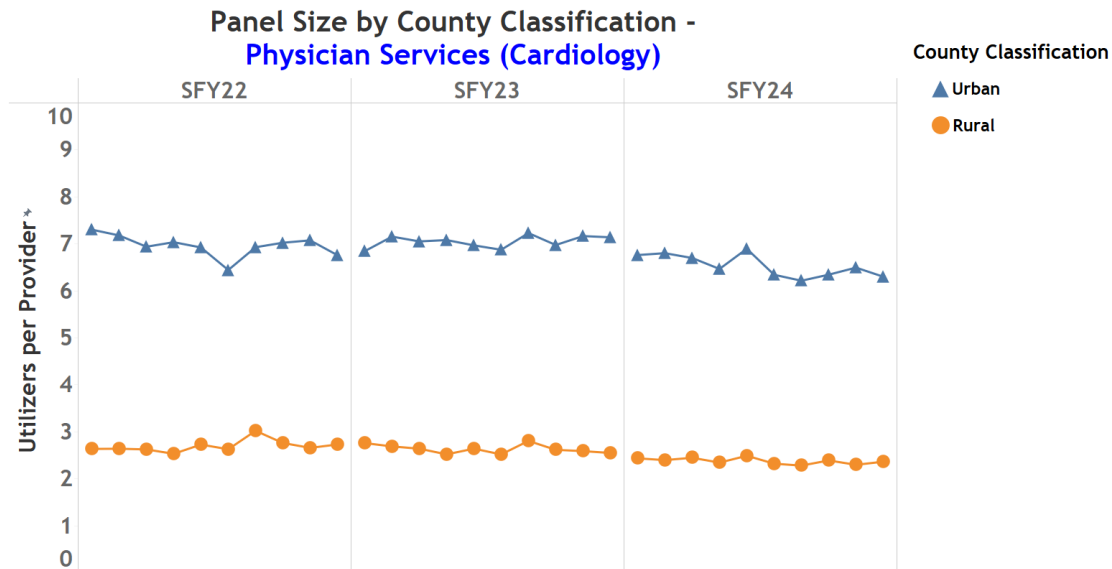


Figure 106.

As shown in Figure 106, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 6.22 and 7.32. In rural areas, this metric ranged from 2.28 to 3.02. The overall trend over these three years for each region type was relatively stable, though there is a slight downward trend in SFY 2023-24 due to a decrease in utilizers and provider counts, with the rate of decrease for utilizers outpacing the decrease in providers.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Cardiology)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 107, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed by nearby Pueblo County. Additionally, several other counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, the other counties were relatively uniform in panel size and located throughout the state.

Panel Size by County (SFY24) - Physician Services (Cardiology)

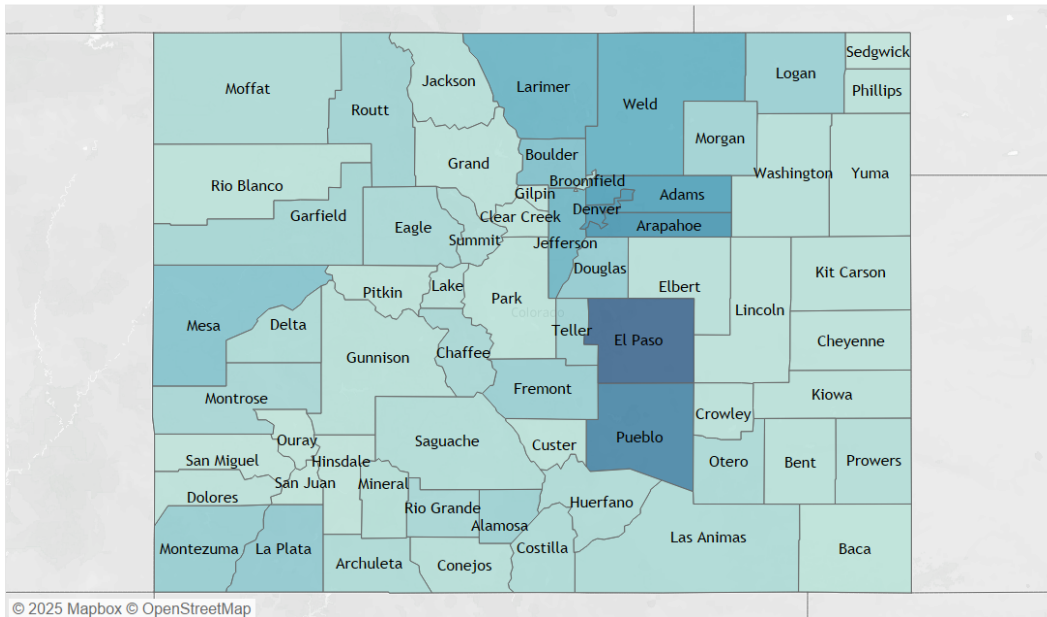


Figure 107.

### 10.2.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Cardiology)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) -  
Physician Services (Cardiology)

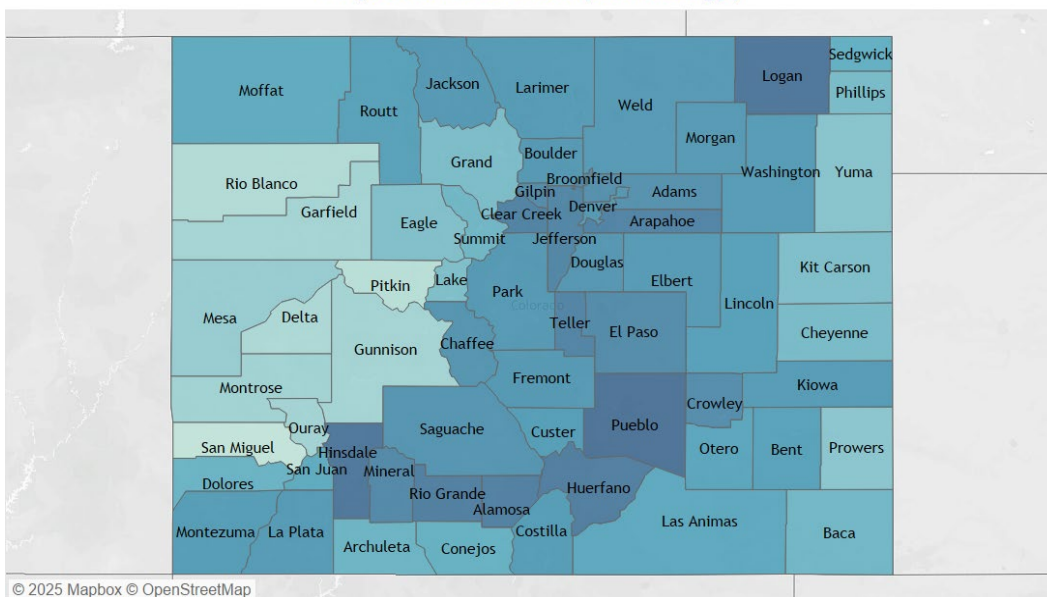


Figure 108.

As shown in Figure 108, members in all 64 of Colorado’s counties utilized services in this category. The penetration rate was highest in Pueblo County, with many of the other counties having moderately high penetration rates. Meanwhile, the counties having the lowest penetration rates were located on the Western Slope of Colorado.

### 10.2.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Cardiology)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

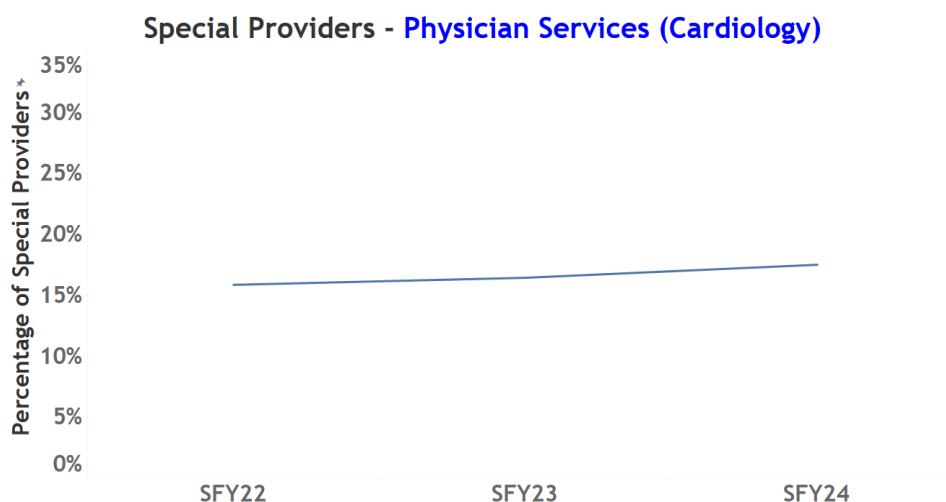


Figure 109.

As shown in Figure 109, the percentage of special providers was stable, with a slight increasing trend from SFY 2021-22 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, a few providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served among providers can partially be attributed to providers ending their group affiliations near the end of SFY 2022-23.

### 10.2.4 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Physician Services (Cardiology)** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 43% of providers statewide served Medicaid members.



### 10.2.5 Per Utilizer Per Year (PUPY) Expenditure

The PUPY Expenditure analysis shows the average total expenditures per utilizer per year for the **Physician Services (Cardiology)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024) based on the line level claim data for each procedure code and/or revenue code. The PUPY expenditure metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 110, statewide Medicaid expenditures per utilizer per year for the **Physician Services (Cardiology)** category increased slightly from SFY 2021-22 to SFY 2023-24 and were lower than those of the other payers.

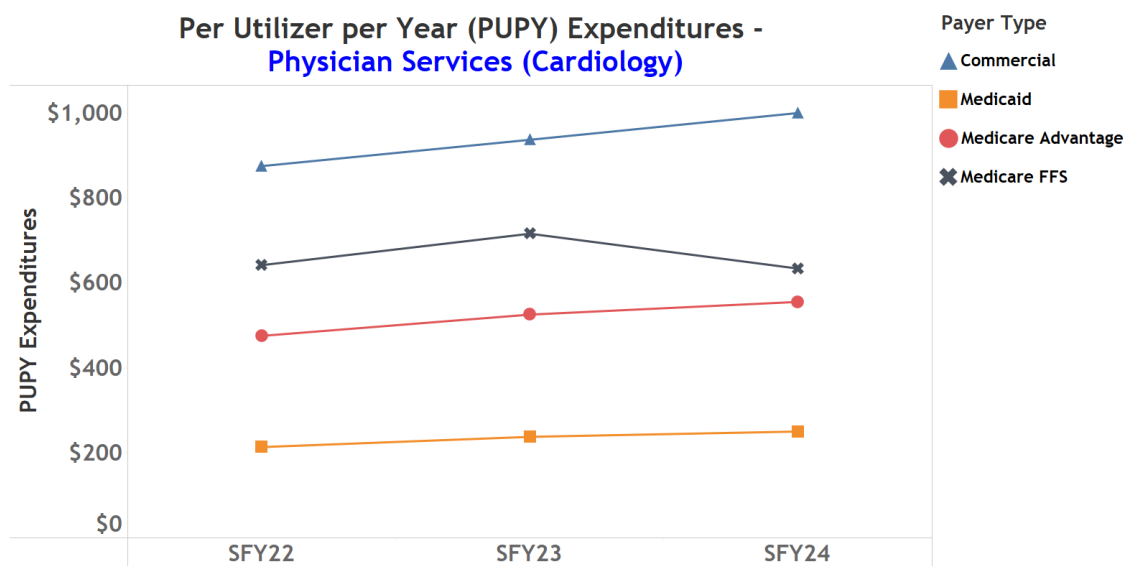


Figure 110.

### 10.2.6 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Physician Services (Cardiology)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 111, statewide Medicaid utilization per utilizer per year for the **Physician Services (Cardiology)** category remained relatively stable from SFY 2021-22 to SFY 2023-24 and was higher than commercial payers and Medicare FFS, but lower than Medicare Advantage.



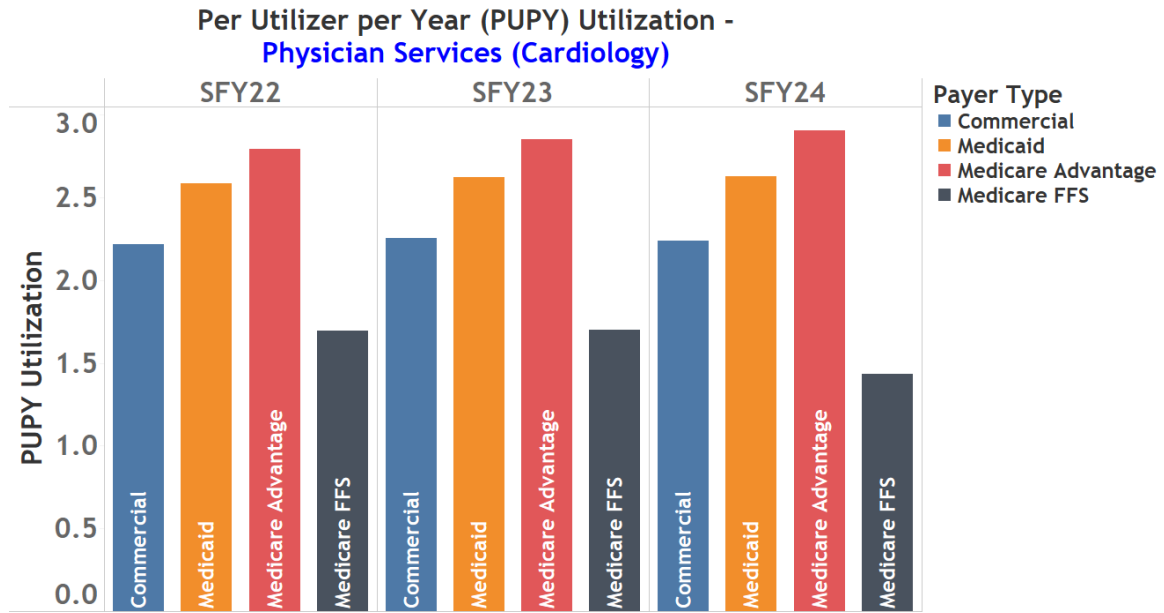


Figure 111.

## 10.3 Physician Services (Dermatology)

### 10.3.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Dermatology)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

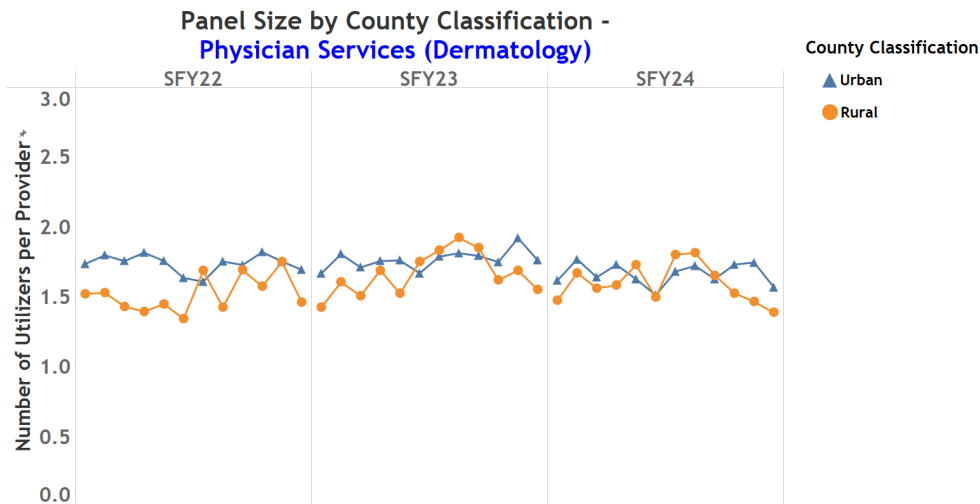


Figure 112.

As shown in Figure 112, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 1.52 and 1.92. In rural areas, this metric ranged from 1.35 to 1.93. The overall trend over these three years for each region type was relatively stable. However, rural panel size fluctuated more and exceeded urban panel size in several months over the period due to low overall utilizer and provider numbers in both regions; thus, causing panel size to be more sensitive to changes. Moreover, rural panel size had a slight downward trend at the end of SFY 2023-24.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Dermatology)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 113, in SFY 2023-24, the number of utilizers per provider was highest in Chaffee County, with a few counties having relatively moderate panel sizes, though there was no pronounced pattern. Meanwhile, the counties having lower panel sizes were located throughout the state.

Panel Size by County (SFY24) - **Physician Services (Dermatology)**

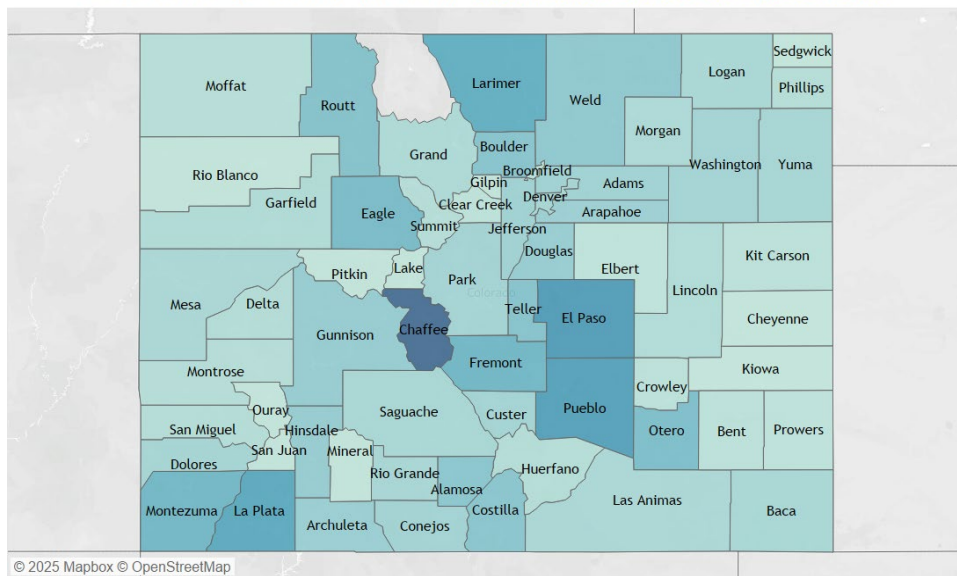


Figure 113.

### 10.3.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Dermatology)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) -  
**Physician Services (Dermatology)**

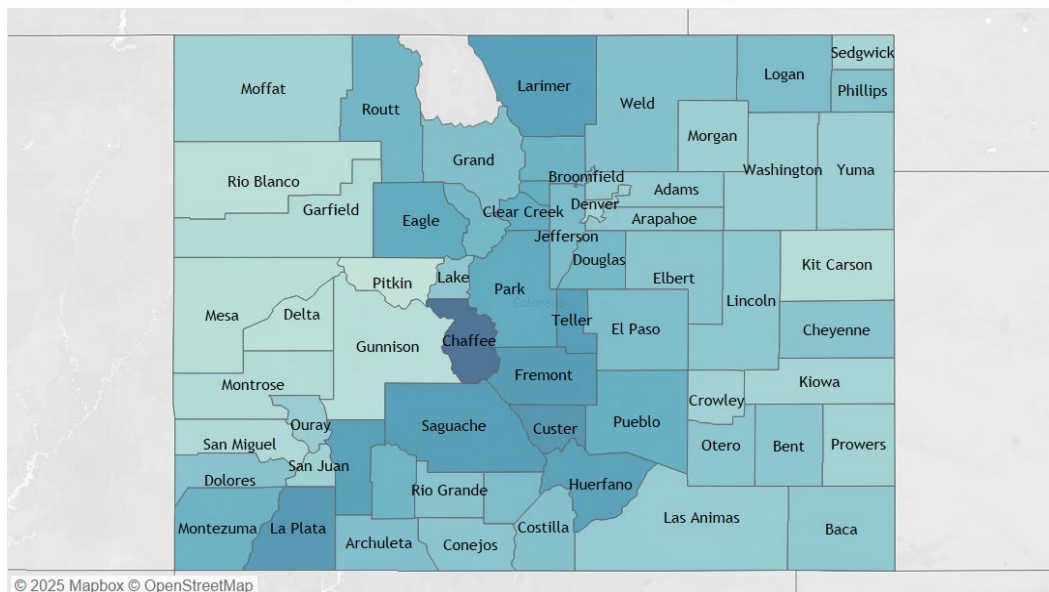


Figure 114.

As shown in Figure 114, members in 63 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Chaffee County, while being moderate in some North and South-Central Colorado counties. The other counties were lower and similar in their

penetration rates throughout the state, with the Western Slope having the lowest penetration rates.

### 10.3.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Dermatology)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

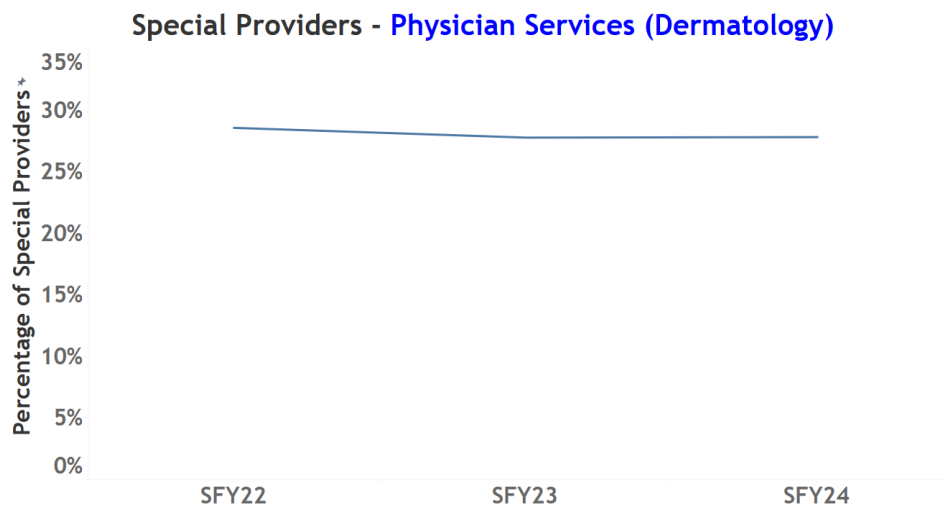


Figure 115.

As shown in Figure 115, the percentage of special providers remained stable from SFY 2021-22 to SFY 2023-24. Several providers had a notable decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24.

### 10.3.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Dermatology)** providers.

Figure 116 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Dermatology)** providers. From SFY 2021-22 to SFY 2023-24, 98.10% of total members resided 30 minutes or less from a provider; 1.02% of total members resided approximately 30-45 minutes; 0.47% of total members resided 45-60 minutes; and 0.41% of total members resided over an hour from a provider.

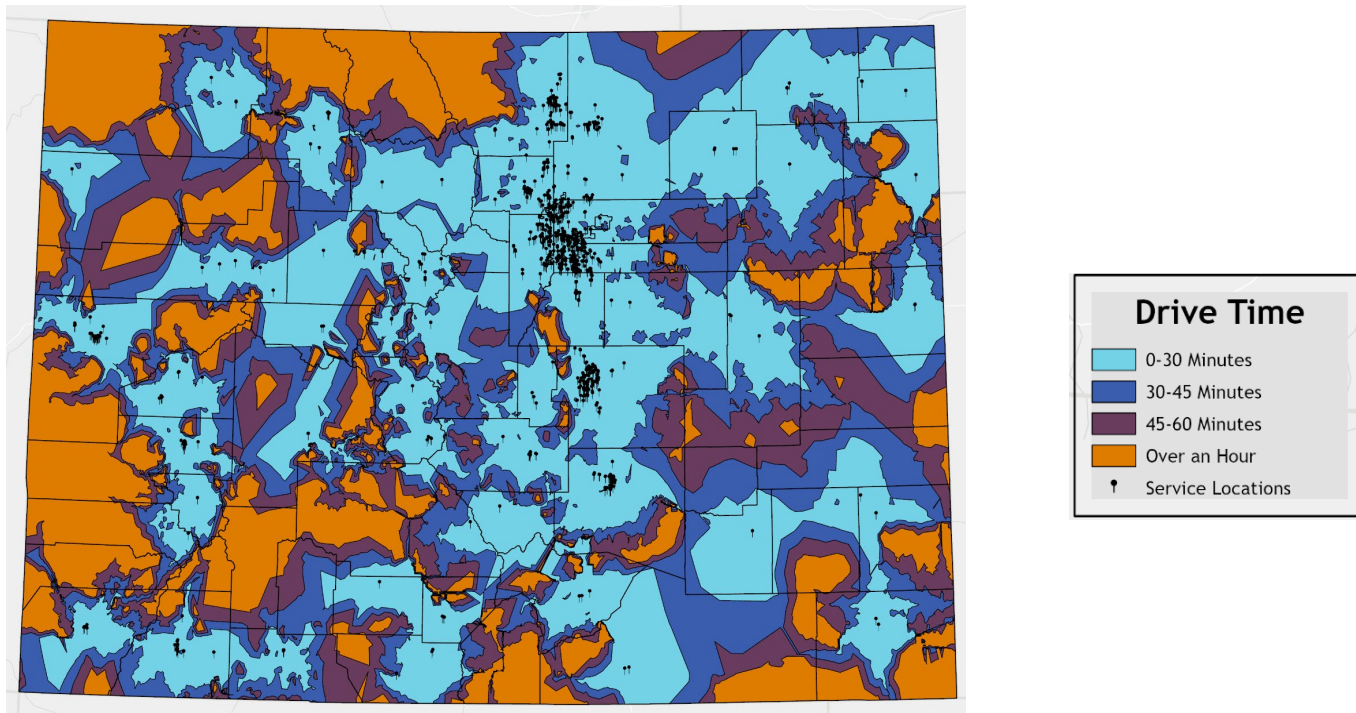


Figure 116.

## 10.4 Physician Services (ED Hospital E&M)

### 10.4.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (ED Hospital E&M)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

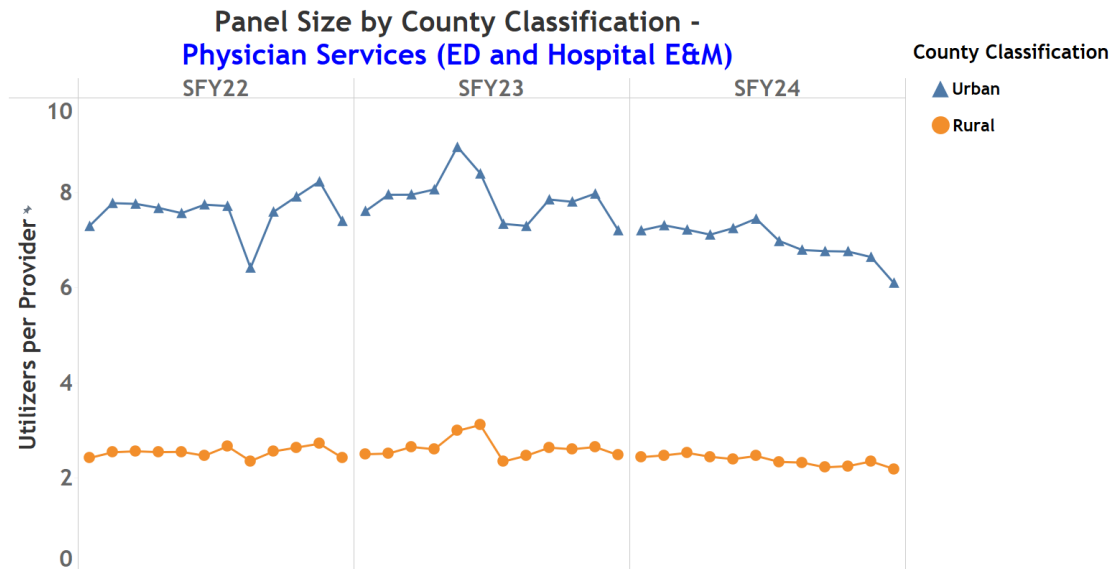


Figure 117.

As shown in Figure 117, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 6.1 and 8.97. In rural areas, this metric ranged from 2.19 to 3.11. In SFY 2021-22, urban panel size decreased near the middle of the fiscal year due to a decrease in utilizers before increasing again. A similar pattern was noted in SFY 2022-23 when panel size increased due to an increase in utilizers before decreasing. Additionally, there was a notable decrease across SFY 2023-24 as a result of the number of utilizers decreasing at a faster rate than the number of providers. Meanwhile, in rural regions, panel size maintained a relatively stable pattern, with a slight downward trend throughout the remainder of SFY 2023-24.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (ED Hospital E&M)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 118, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern, Western, and South-Central parts of Colorado.



**Panel Size by County (SFY24) -  
Physician Services (ED and Hospital E&M)**

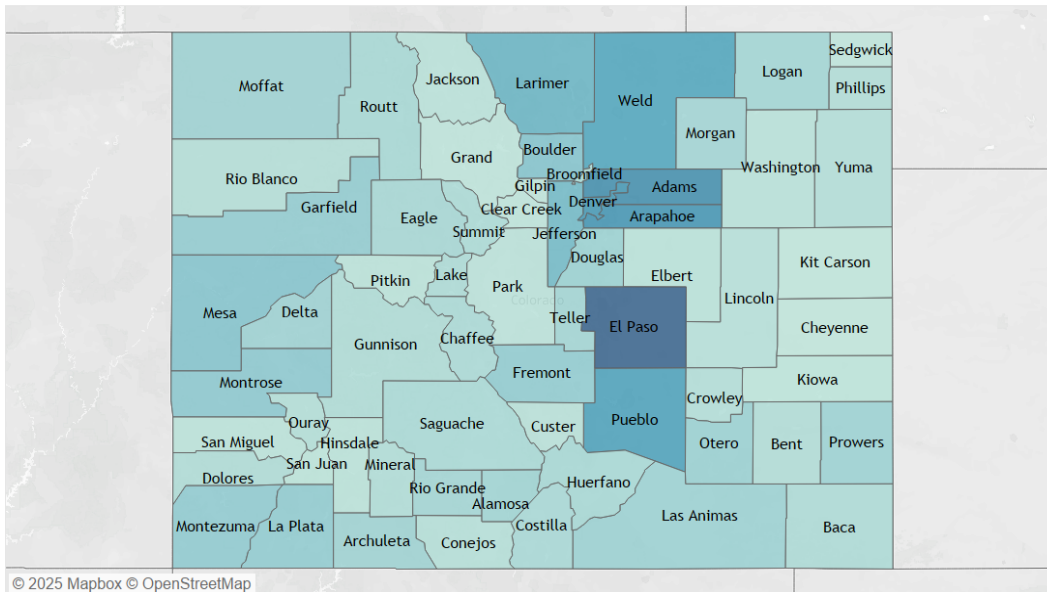


Figure 118.

## 10.4.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (ED Hospital E&M)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Physician Services (ED and Hospital E&M)**

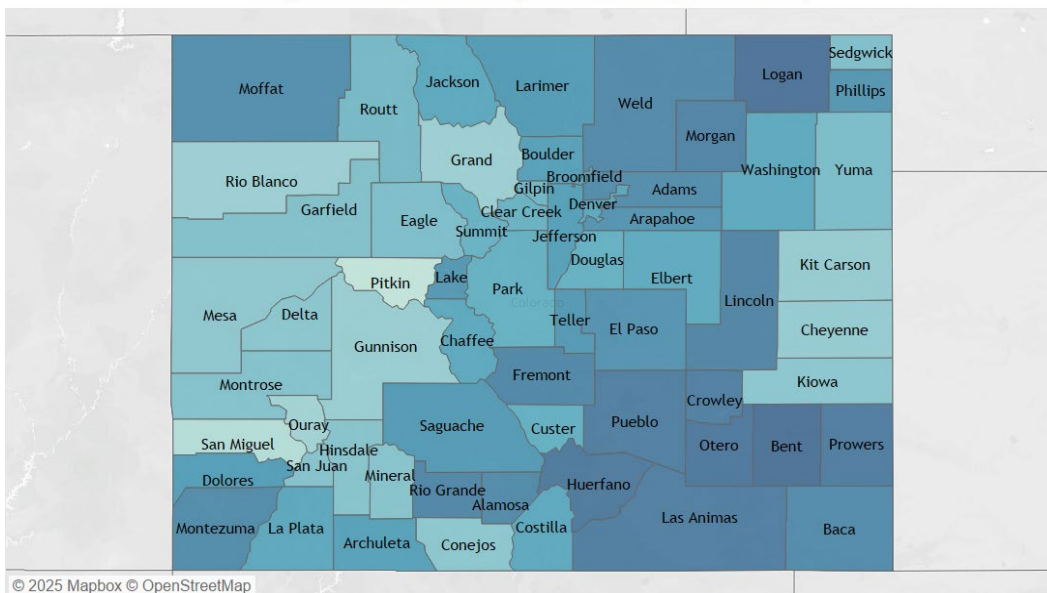


Figure 119.



As shown in Figure 119, members in all 64 of Colorado’s counties utilized services in this category. The penetration rate was highest in Bent County, followed closely by Logan County. Additionally, several counties along the Northern and Southern sections of Colorado had moderate to high penetration rates. The lowest penetration rates were mostly located in Western Colorado and a few along the Eastern border of the state.

### 10.4.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (ED Hospital E&M)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

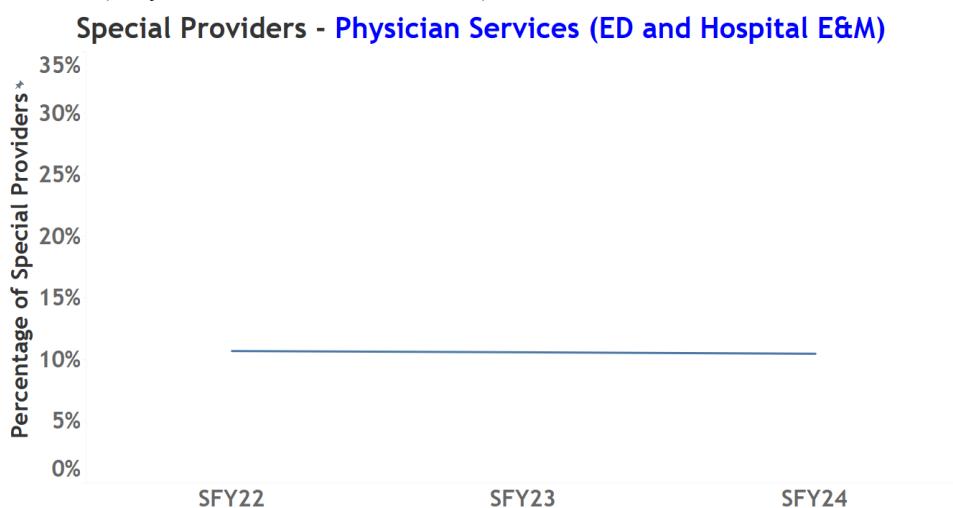


Figure 120.

As shown in Figure 120, the percentage of special providers remained stable from SFY 2021-22 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served can be partially attributed to provider(s) moving to new locations.

### 10.4.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (ED Hospital E&M)** providers.

Figure 121 shows the drive time bands across the state wherein members reside, relative to **Physician Services (ED Hospital E&M)** providers. From SFY 2021-22 to SFY 2023-24, 96.55% of total members resided 30 minutes or less from a provider; 2.38% of total members resided approximately 30-45 minutes; 0.77% of total members resided 45-60 minutes; and 0.30% of total members resided over an hour from a provider.

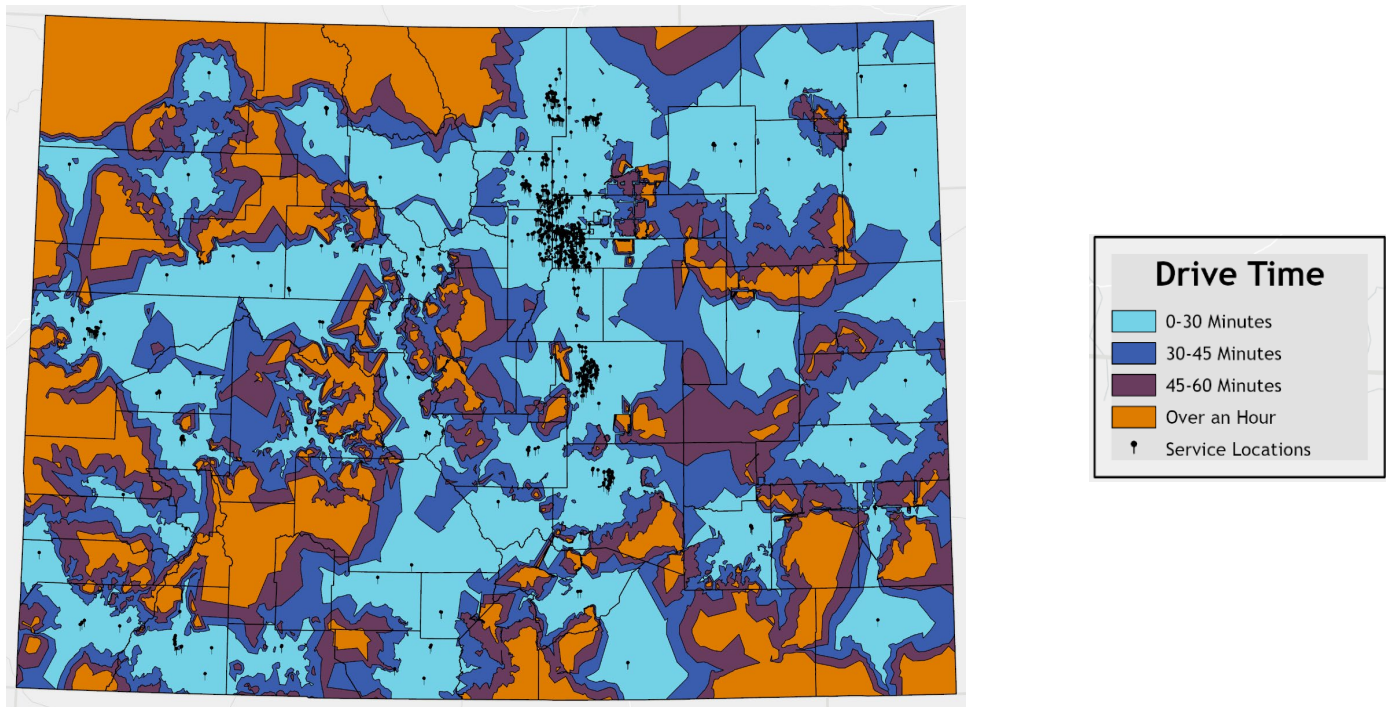


Figure 121.

## 10.5 Physician Services (Ear, Nose, and Throat) (ENT)

### 10.5.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (ENT)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

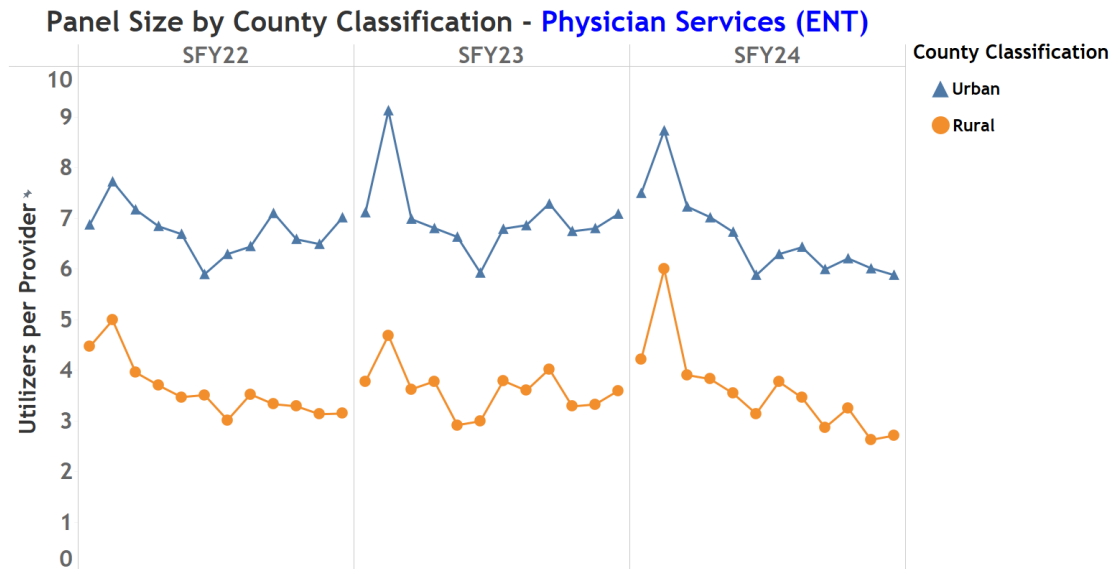


Figure 122.

As shown in Figure 122, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 5.87 and 9.12. In rural areas, this metric ranged from 2.62 to 5.99. In urban and rural regions, panel size had a modest spike pattern in August of each fiscal year before stabilizing, with a minor decreasing trend noted towards the end of SFY 2023-24 across both regions. When the panel size was further broken out by three age categories: young children (less than 5 years), school-aged children (5 - 18 years), and adults (over 18), school-aged children were observed to have driven the spike pattern across urban and rural regions. This can be explained by annual hearing checks that are given to school-aged children when they return to school around August of each year.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (ENT)** category during SFY 2023-24. A darker blue color indicates a higher panel size.

As shown in Figure 123, in SFY 2023-24, the number of utilizers per provider was highest in Montrose County, followed by nearby Delta County. Additionally, several counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, the others were lower in panel size and located throughout the state.

Panel Size by County (SFY24) - Physician Services (ENT)

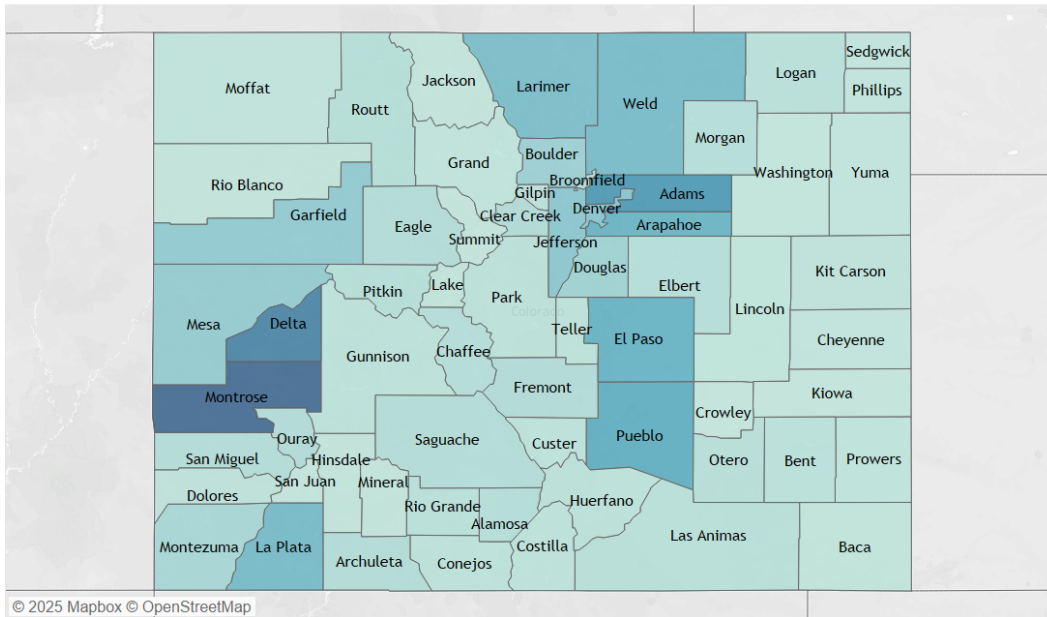


Figure 123.

### 10.5.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (ENT)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) - Physician Services (ENT)

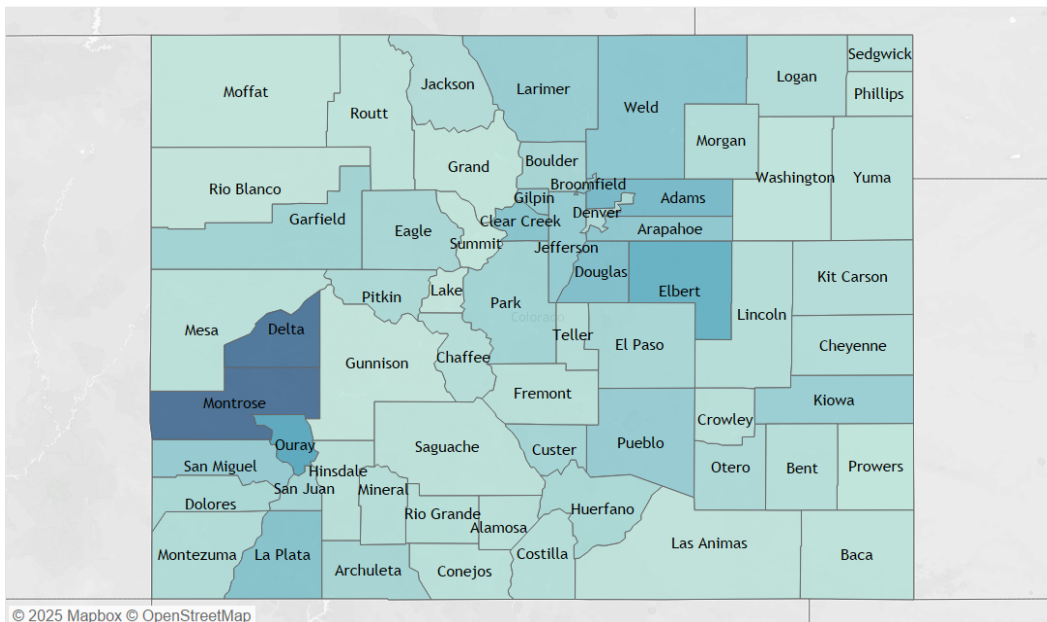


Figure 124.

As shown in Figure 124, members in all 64 of Colorado’s counties utilized services in this category. The penetration rate was highest in Montrose County, followed closely by nearby Delta County. The other counties were lower and similar in their penetration rates throughout the state, although some counties and along the northern half of the I-25 corridor, and those adjacent, were slightly higher than surrounding counties.

### 10.5.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (ENT)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

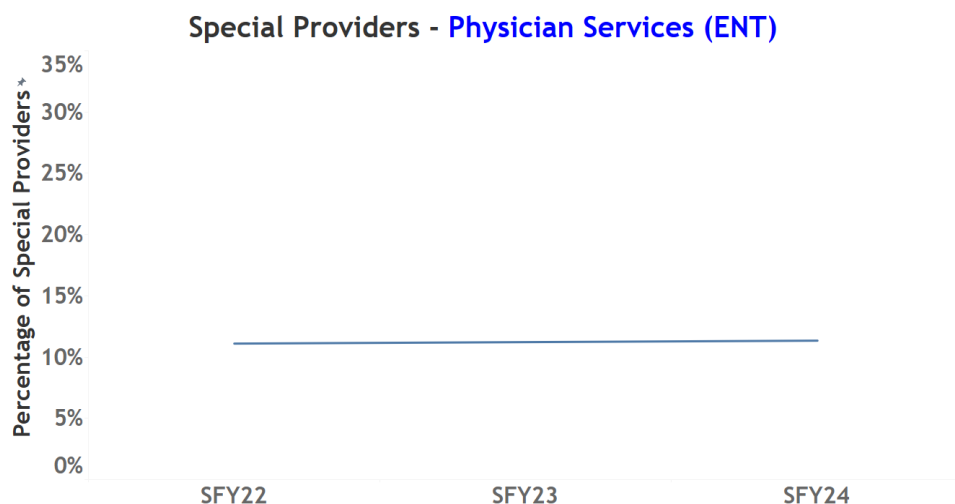


Figure 125.

As shown in Figure 125, the percentage of special providers had a stable trend from SFY 2021-22 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, a few providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, no specific reasons were found for this change.

### 10.5.4 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Physician Services (ENT)** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 29% of providers statewide served Medicaid members.

### 10.5.5 Per Utilizer Per Year (PUPY) Expenditure

The PUPY Expenditure analysis shows the average total expenditures per utilizer per year for the **Physician Services (ENT)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024) based on the line level claim data for each procedure code and/or revenue code. The PUPY expenditure metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 126, statewide Medicaid expenditures per utilizer per year for the **Physician Services (ENT)** service category increased from SFY 2021-22 to SFY 2023-24 and were higher than Medicare Advantage and commercial payers, although lower than Medicare FFS until becoming similar in SFY 2023-24.

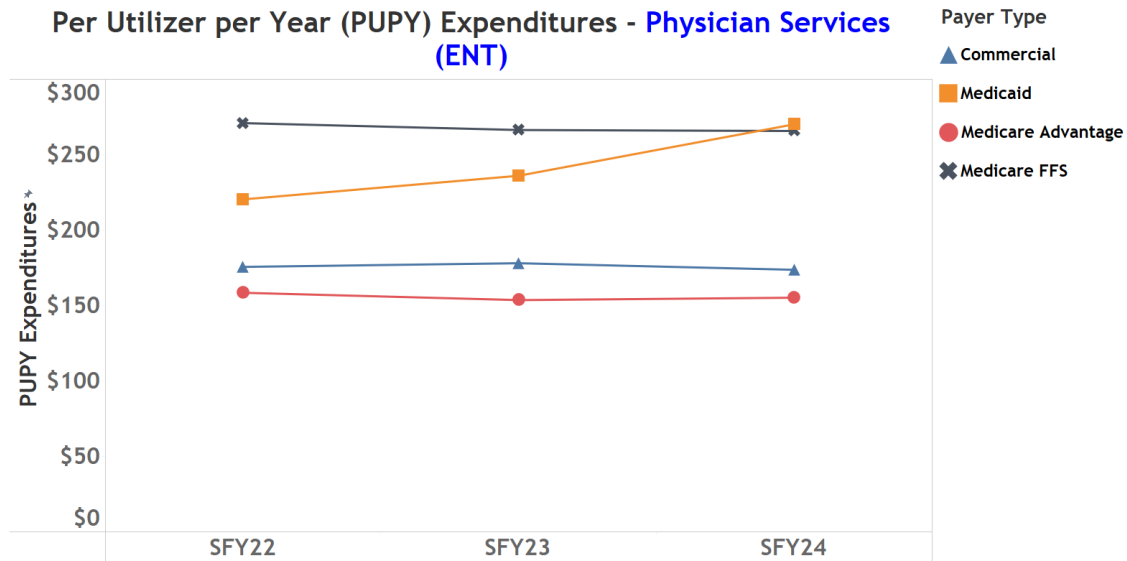


Figure 126.

### 10.5.6 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Physician Services (ENT)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

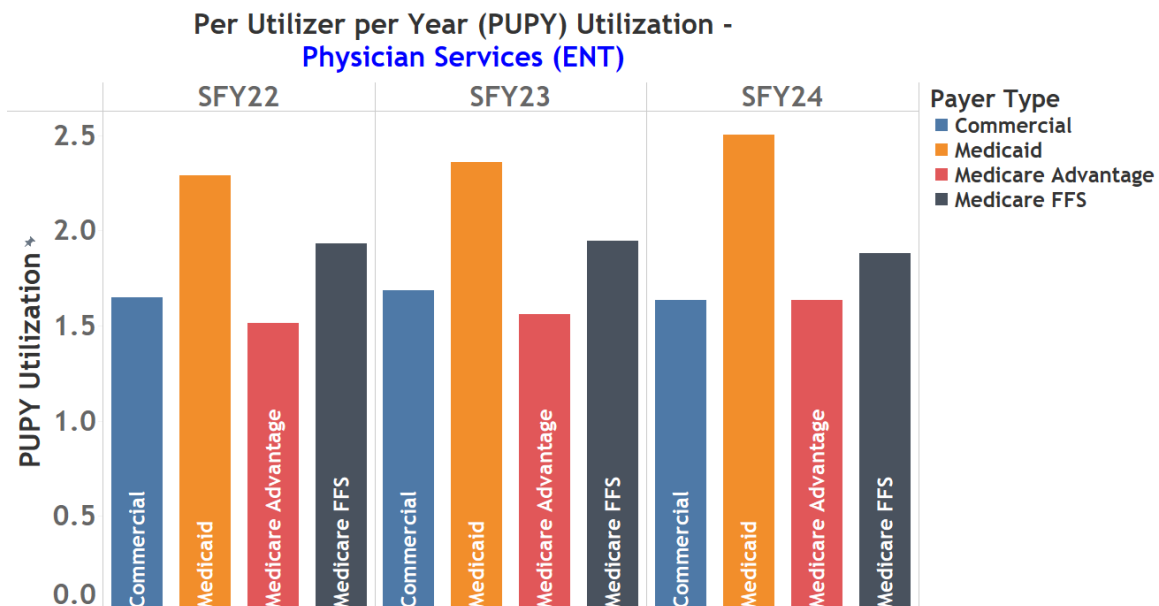


Figure 127.

As shown in Figure 127, statewide Medicaid utilization per utilizer per year for the **Physician Services (ENT)** category increased slightly from SFY 2021-22 to SFY 2023-24 and was higher than other payers.



## 10.6 Physician Services (Family Planning)

### 10.6.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Family Planning)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

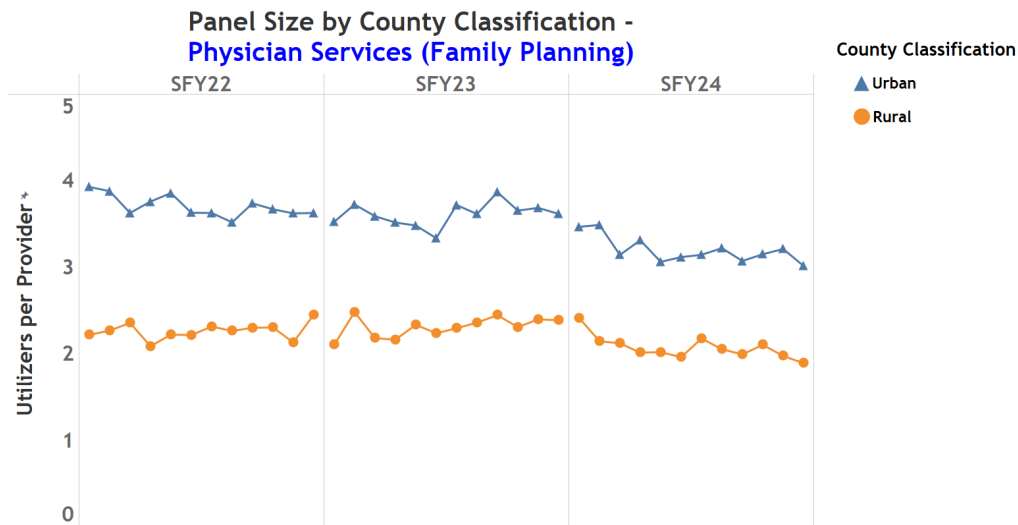


Figure 128.

As shown in Figure 128, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 3.02 and 3.93. In rural areas, this metric ranged from 1.89 to 2.48. The overall trend over these three years for each region type was relatively stable, although the panel size in both regions appears to be on a slight downward trend in SFY 2023-24.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Family Planning)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 129, in SFY 2023-24, the number of utilizers per provider was highest in Pueblo County, followed closely by nearby El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as a select few in Western Colorado, had relatively moderate panel sizes. Meanwhile, the other counties were lower in panel size and located throughout the state, with the lowest being in Eastern and Western Colorado.

**Panel Size by County (SFY24) - Physician Services (Family Planning)**

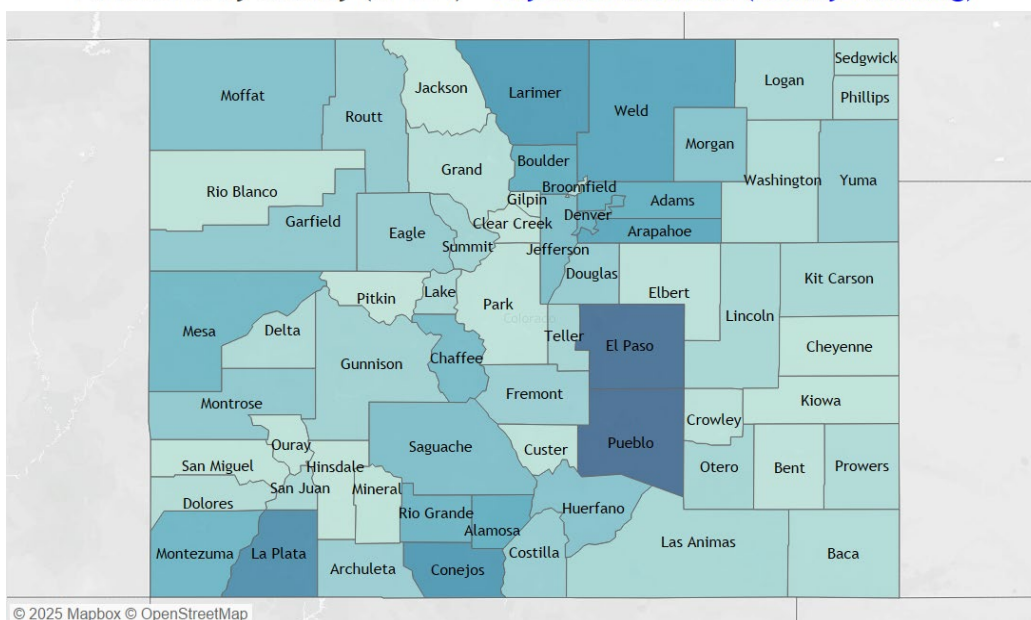


Figure 129.

### 10.6.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Family Planning)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Physician Services (Family Planning)**

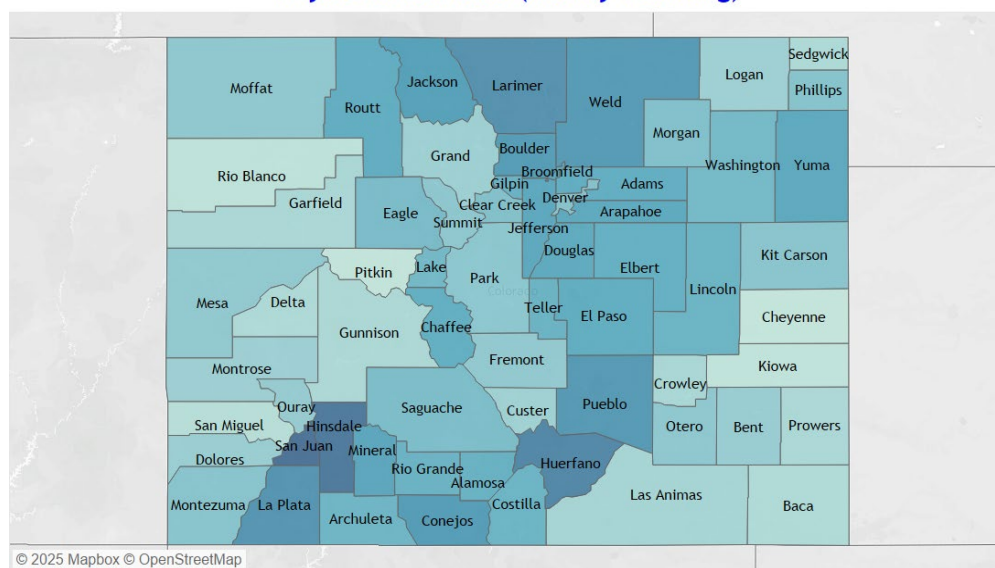


Figure 130.

As shown in Figure 130, members in all 64 of Colorado's counties utilized services in this category. The penetration rate was highest in San Juan County, followed closely by nearby

Hinsdale County. Several other counties were lower, yet still relatively moderate in their penetration rates throughout the state. This includes some counties in the South-Western and North-Eastern parts of the state, and several along the I-25 corridor and adjacent counties. Meanwhile, the counties with the lowest penetration rates were mostly located on the Western Slope and South-Eastern part of Colorado.

### 10.6.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Family Planning)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

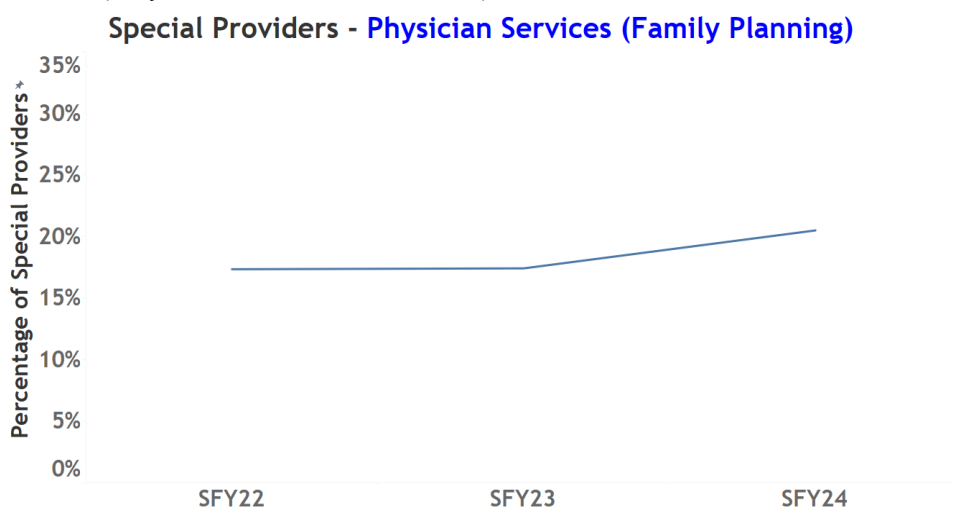


Figure 131.

As shown in figure 131, the percentage of special providers had an increasing trend from SFY 2021-22 to SFY 2023-24. Several providers had a notable decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served among providers can be attributed to several situations, including: a group practice changing coverage focus, leading to a decrease in the number of members served; individual practitioners changing their care focus, service area, and coverage they provide; and providers cutting back on the number of hours worked, reducing the amount of Medicaid members able to be seen.

### 10.6.4 Telemedicine Analysis

The first part of the telemedicine analysis considered the number of individual members that utilized services in the **Physician Services (Family Planning)** category and what percentage of those members received at least one service through telemedicine across SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

As shown in Figure 132, from SFY 2021-22 to SFY 2023-24, the percentage of individual members that utilized telemedicine **Physician Services (Family Planning)** was low. This percentage decreased from SFY 2021-22 to SFY 2023-24.

Members Utilizing Telemedicine Services - **Physician Services (Family Planning)**

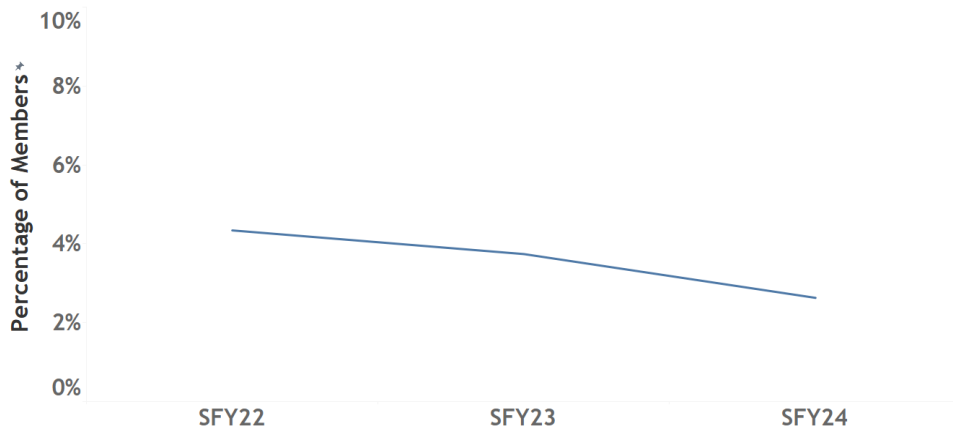


Figure 132.

The second part of the telemedicine analysis considered the number of total visits in the **Physician Services (Family Planning)** category and what percentage of those visits were delivered through telemedicine across SFY 2021-22 to SFY 2023-24.

Telemedicine as a Percentage of Total Visits - **Physician Services (Family Planning)**

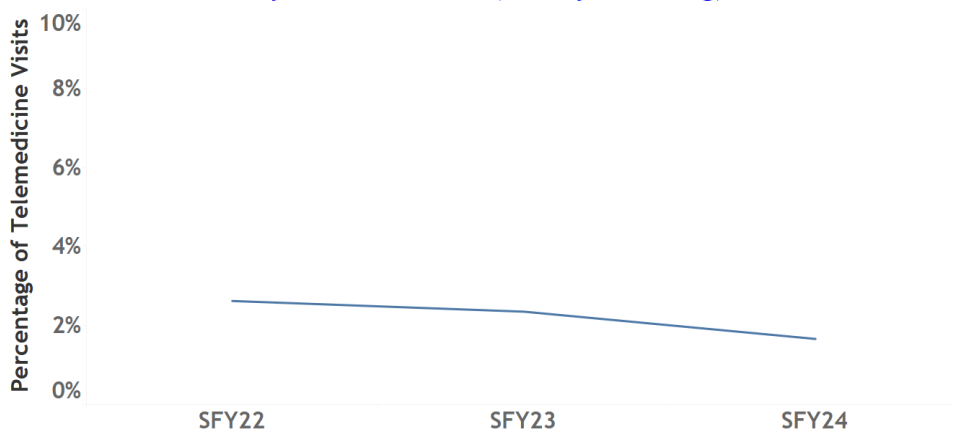


Figure 133.

As shown in Figure 133, from SFY 2021-22 to SFY 2023-24, the percentage of total visits that were delivered through telemedicine for **Physician Services (Family Planning)** was low. This percentage decreased from SFY 2021-22 to SFY 2022-23, then decreased again from SFY 2022-23 to SFY 2023-24.

### 10.6.5 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Physician Services (Family Planning)** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 98% of providers statewide served Medicaid members.

### 10.6.6 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Physician Services (Family Planning)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

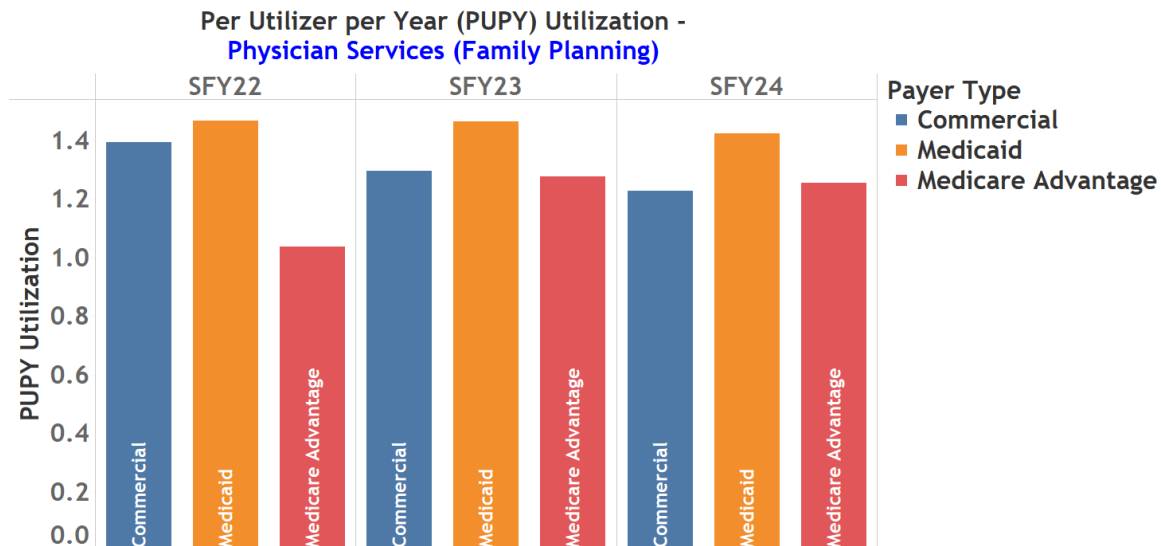


Figure 134.

As shown in Figure 134, statewide Medicaid utilization per utilizer per year for the **Physician Services (Family Planning)** category remained stable from SFY 2021-22 to SFY 2023-24 and was slightly higher than other payers.

## 10.7 Physician Services (Gastroenterology)

### 10.7.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Gastroenterology)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

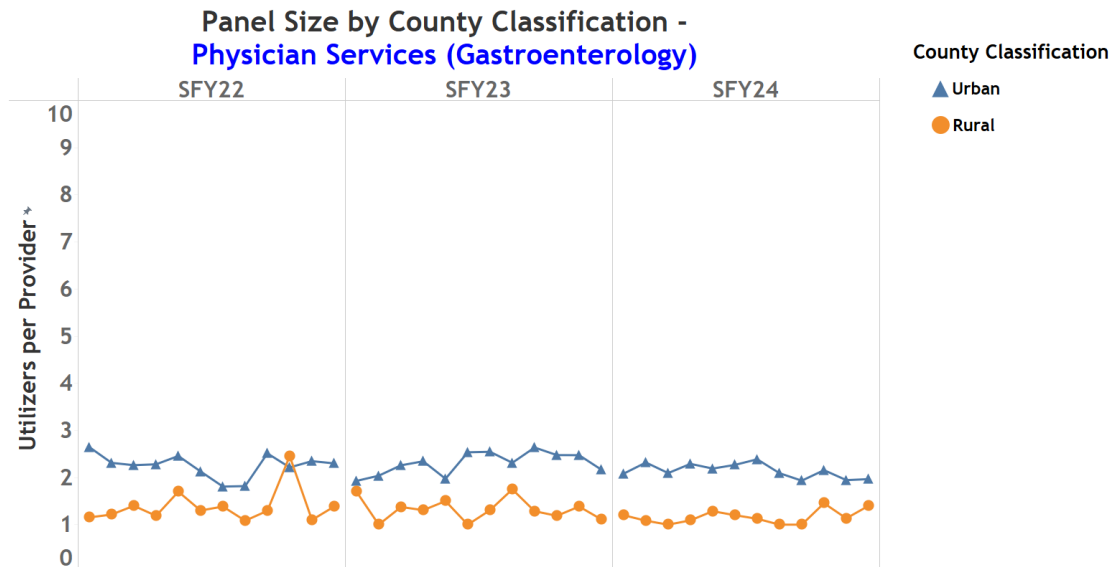


Figure 135.

As shown in Figure 135, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 1.81 and 2.65. In rural areas, this metric ranged from 1 to 2.45. The overall trend over these three years for each region type was relatively stable, though there was an instance in April of SFY 2021-22 where the rural panel size exceeded urban's. This unusual occurrence was as a result of urban regions having a moderate decrease in utilizers while the number of providers stayed about the same, whereas rural regions had an increase in utilizers with a drop in the number of providers.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Gastroenterology)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 136, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Additionally, several other counties along the northern portion of the I-25 corridor and adjacent counties were lower, yet relatively moderate in panel size. Meanwhile, counties with the lowest panel sizes were relatively uniform and located throughout the state.

Panel Size by County (SFY24) - **Physician Services (Gastroenterology)**

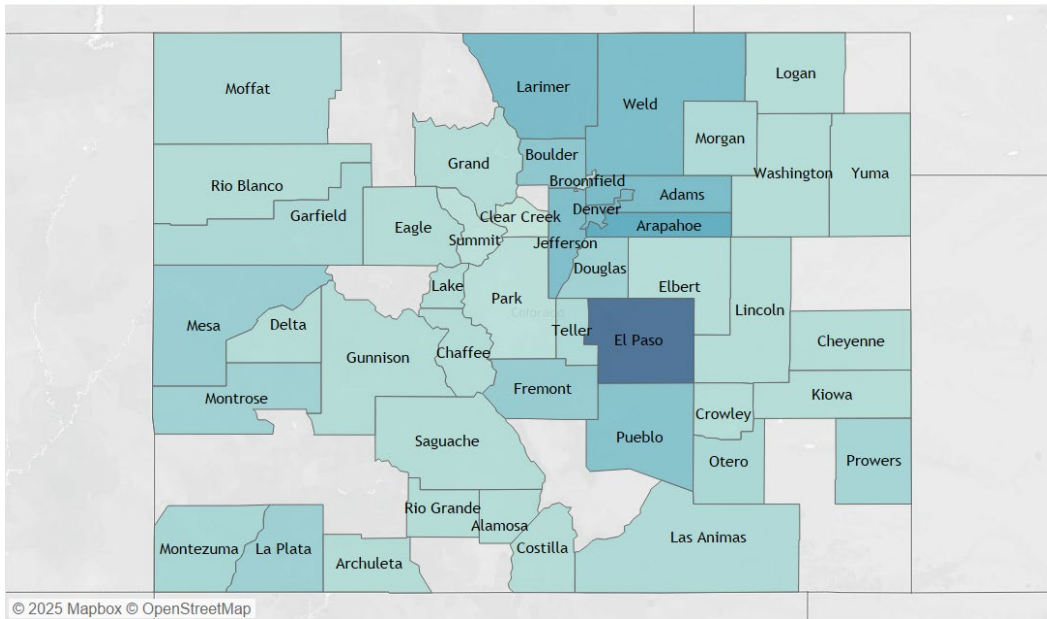


Figure 136.

### 10.7.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Gastroenterology)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) -  
**Physician Services (Gastroenterology)**

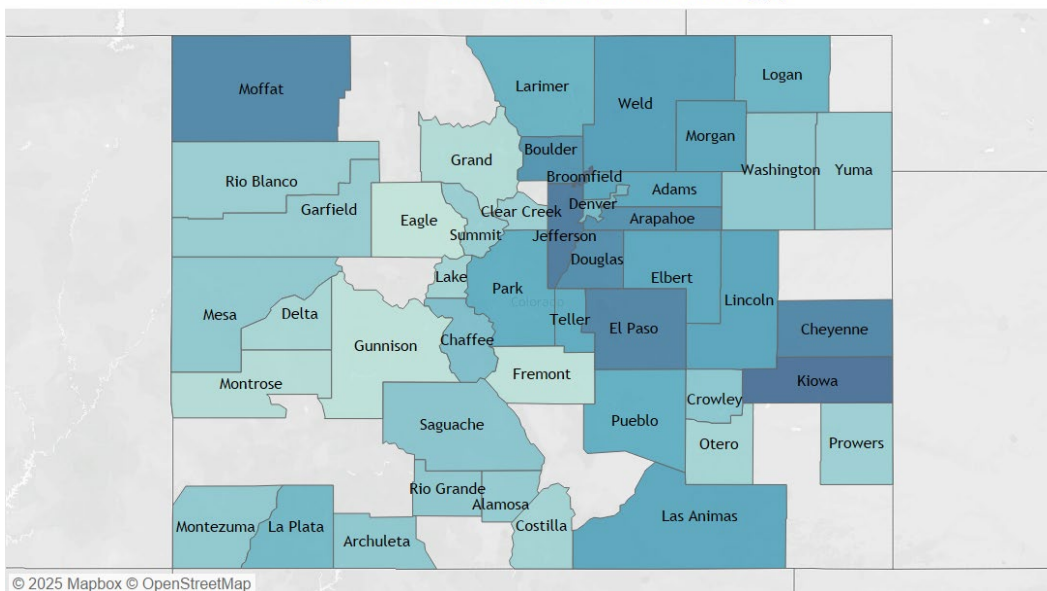


Figure 137.



As shown in Figure 137, members in 46 of Colorado’s 64 counties utilized services in this category. The penetration rate was highest in Broomfield County. Several other counties were lower, yet still relatively moderate in their penetration rates throughout the state. This includes Kiowa, Cheyenne, and Moffat County, as well as several counties along the I-25 corridor and adjacent counties. In general, the counties with the lowest penetration rates were in the Western half of Colorado, though there were several counties with similar low penetration rates in Eastern Colorado.

### 10.7.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Gastroenterology)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

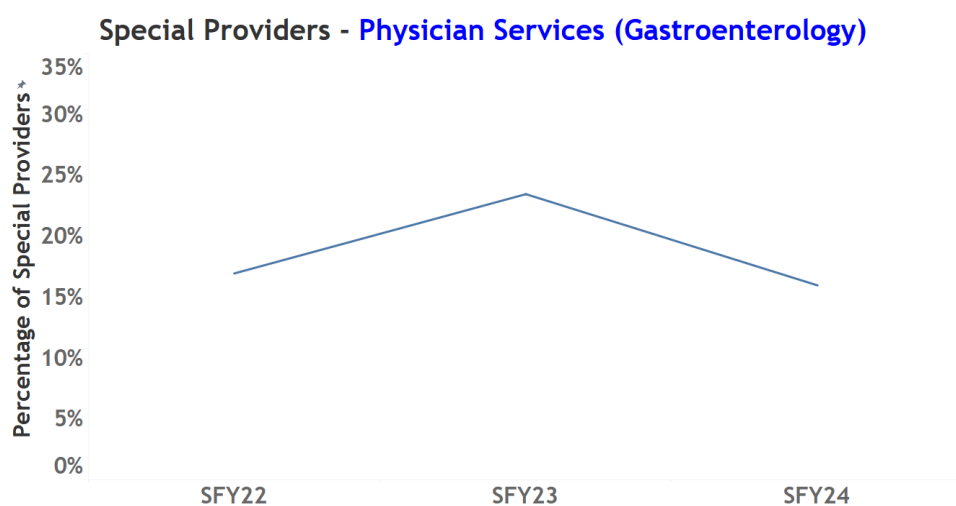


Figure 138.

As shown in Figure 138, the percentage of special providers had an increasing trend from SFY 2021-22 to SFY 2022-23, with a decreasing trend from SFY 2022-23 to SFY 2023-24. A few providers had a notable decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, a few providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24.

### 10.7.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Gastroenterology)** providers.

Figure 139 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Gastroenterology)** providers. From SFY 2021-22 to SFY 2023-24, 87.22% of total members resided 30 minutes or less from a provider; 3.32% of total members resided approximately 30-45 minutes; 2.21% of total members resided 45-60 minutes; and 7.25% of total members resided over an hour from a provider.

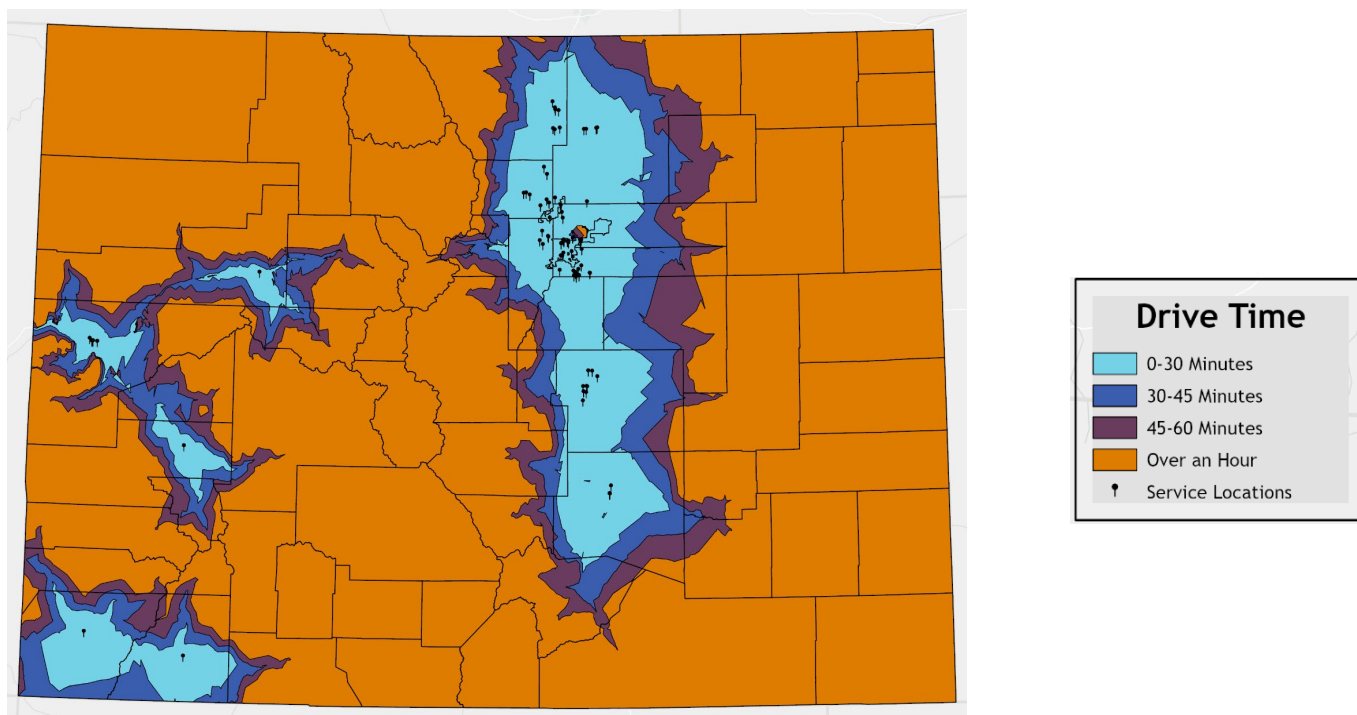


Figure 139.

### 10.7.5 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Physician Services (Gastroenterology)** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 36% of providers statewide served Medicaid members.

### 10.7.6 Per Utilizer Per Month (PUPM) Expenditure

The PUPM Expenditure analysis shows the average total expenditures per utilizer per month for the **Physician Services (Gastroenterology)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024) based on the line level claim data for each procedure code and/or revenue code. The PUPM expenditure metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 140, statewide Medicaid expenditures per utilizer per month for the **Physician Services (Gastroenterology)** service category decreased slightly from SFY 2021-22 to SFY 2022-23 before increasing slightly from SFY 2022-23 to SFY 2023-24, and were significantly lower than commercial payers, as well as other payers by a smaller yet notable margin.

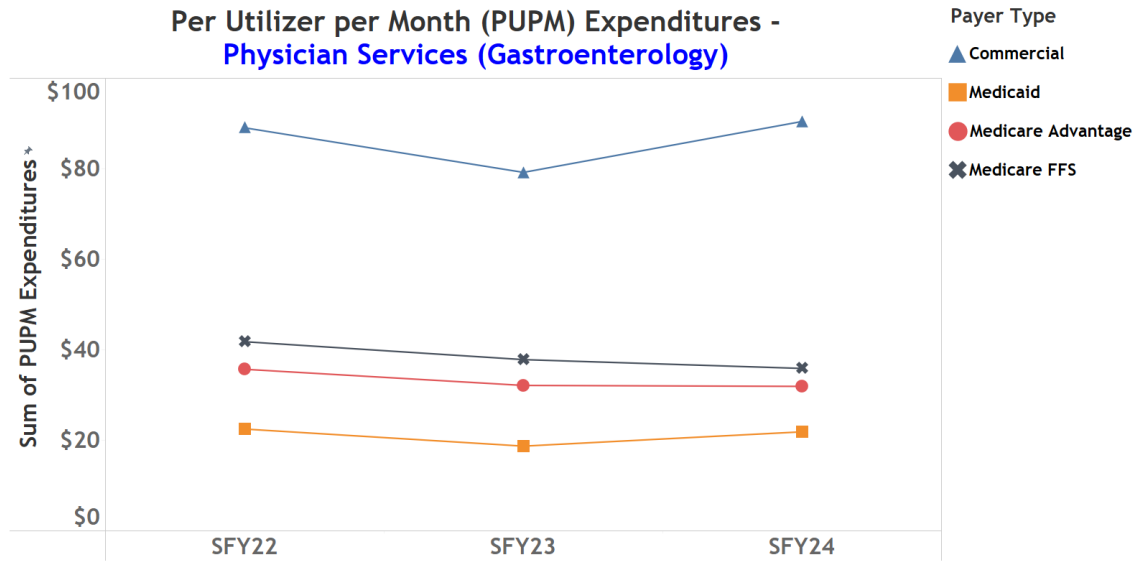


Figure 140.

### 10.7.7 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Physician Services (Gastroenterology)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

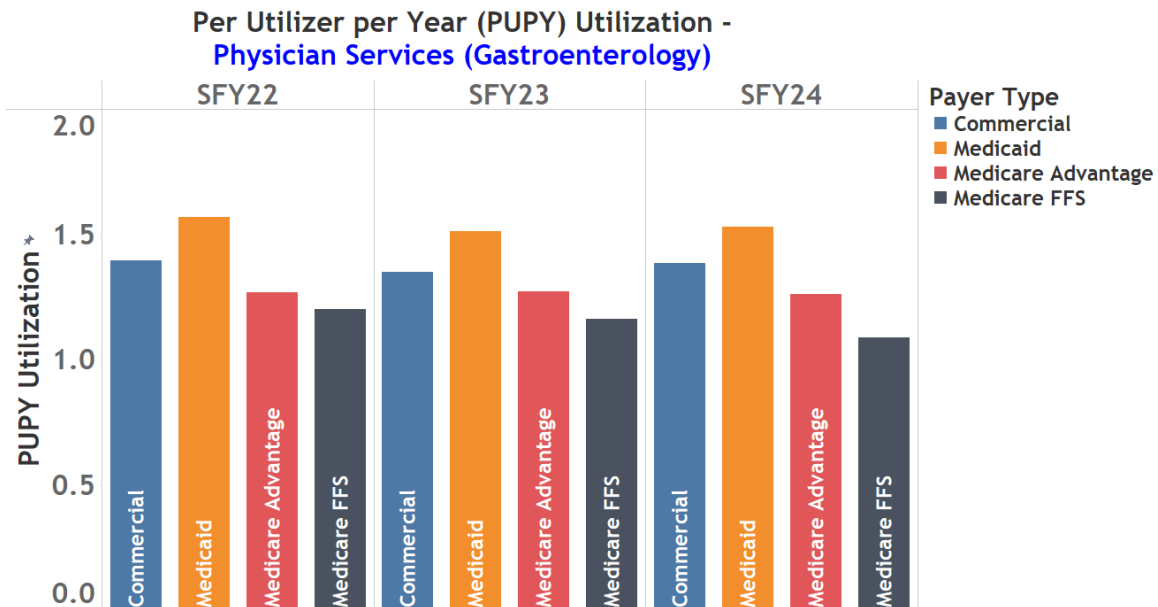


Figure 141.

As shown in Figure 141, statewide Medicaid utilization per utilizer per year for the **Physician Services (Gastroenterology)** remained relatively stable from SFY 2021-22 to SFY 2023-24 and was higher than other payers.

## 10.8 Physician Services (Gynecology)

### 10.8.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Gynecology)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

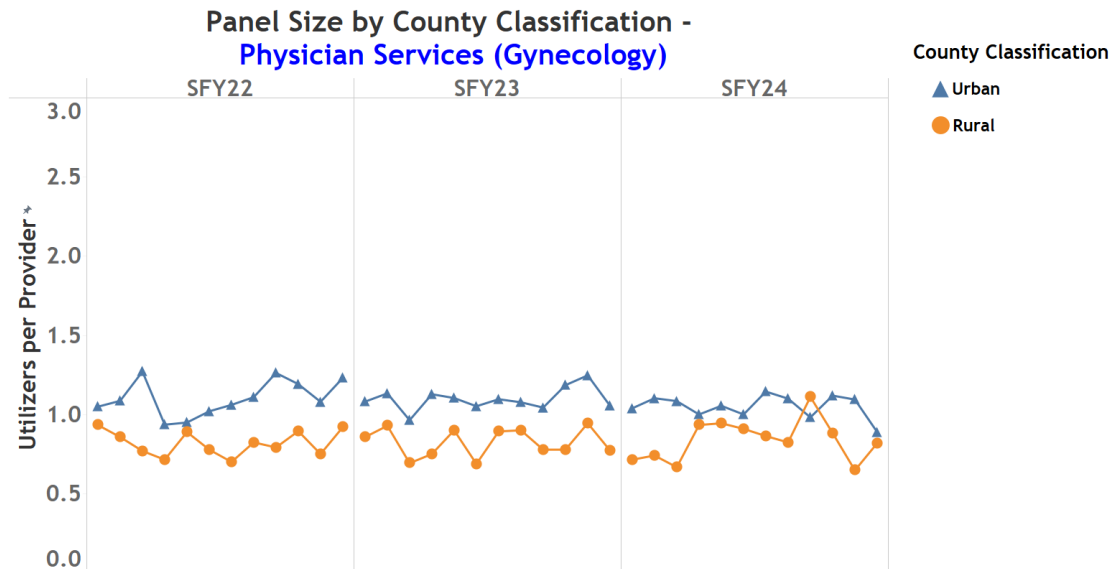


Figure 142.

As shown in Figure 142, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 0.89 and 1.27. In rural areas, this metric ranged from 0.65 to 1.11. The overall trend over these three years for each region type was relatively stable, although rural panel size slightly exceeded urban's near the end of SFY 2023-24 as a result of providers decreasing more quickly than utilizers, whereas utilizers decreased by a larger proportion than providers in urban regions.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Gynecology)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 143, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Meanwhile, other counties were lower and relatively uniform in panel size throughout the state, with a few counties in Northern and Southern Colorado being relatively moderate.

Panel Size by County (SFY24) - **Physician Services (Gynecology)**

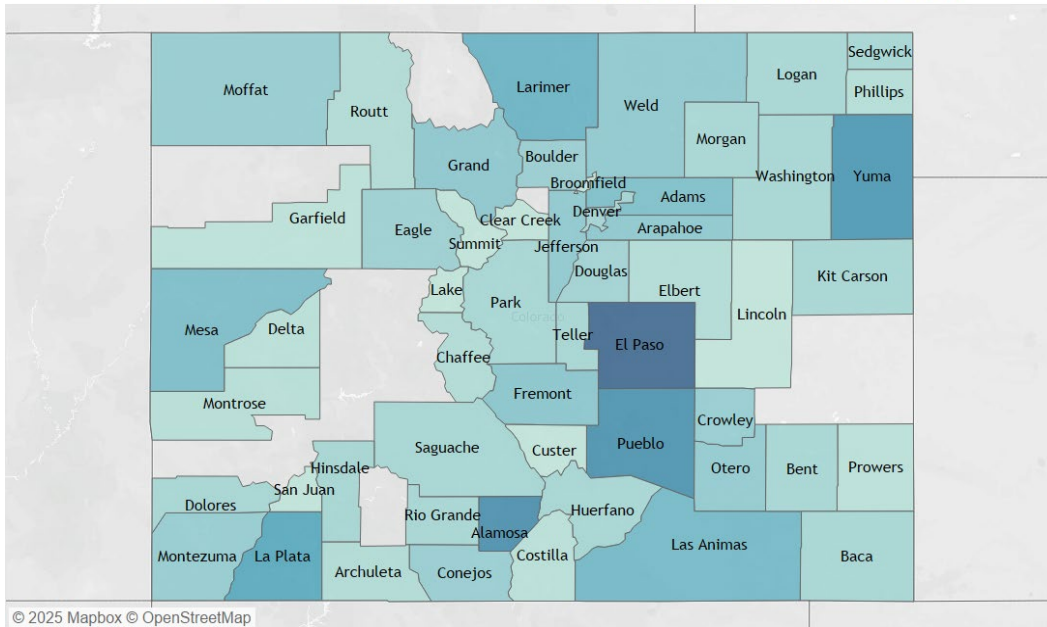


Figure 143.

### 10.8.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Gynecology)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) -  
**Physician Services (Gynecology)**

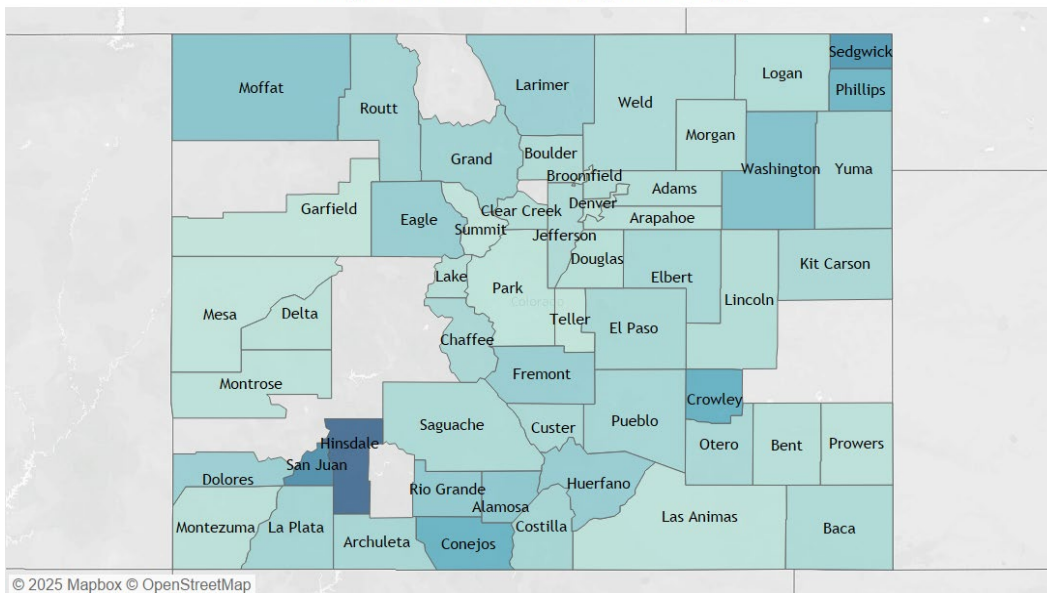


Figure 144.

As shown in Figure 144, members in 54 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Hinsdale County, while lower and relatively uniform throughout much of Colorado.

### 10.8.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Gynecology)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

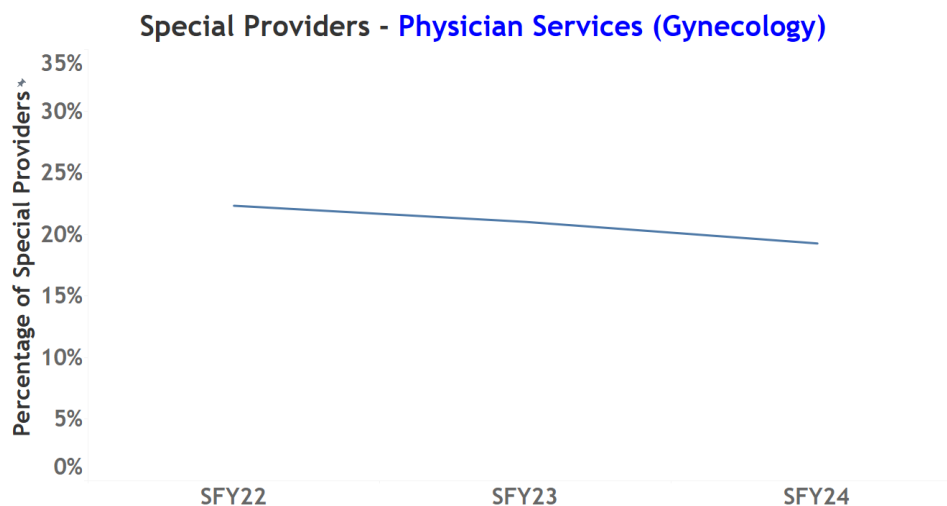


Figure 145.

As shown in Figure 145, the percentage of special providers decreased from SFY 2021-22 to SFY 2023-24.

### 10.8.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Gynecology)** providers.

Figure 146 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Gynecology)** providers. From SFY 2021-22 to SFY 2023-24, 89.30% of total members resided 30 minutes or less from a provider; 4.28% of total members resided approximately 30-45 minutes; 2.37% of total members resided 45-60 minutes; and 4.05% of total members resided over an hour from a provider.

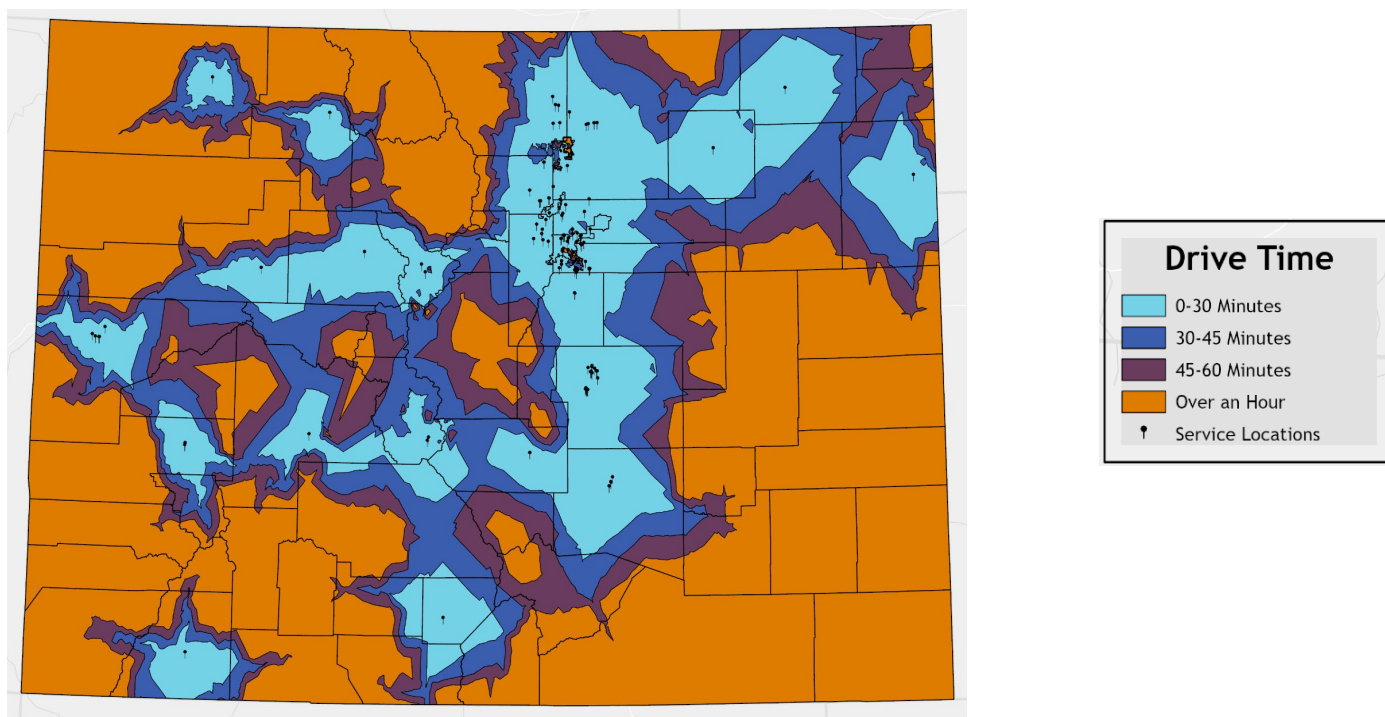


Figure 146.



## 10.9 Physician Services (Health Education)

### 10.9.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Health Education)** service category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

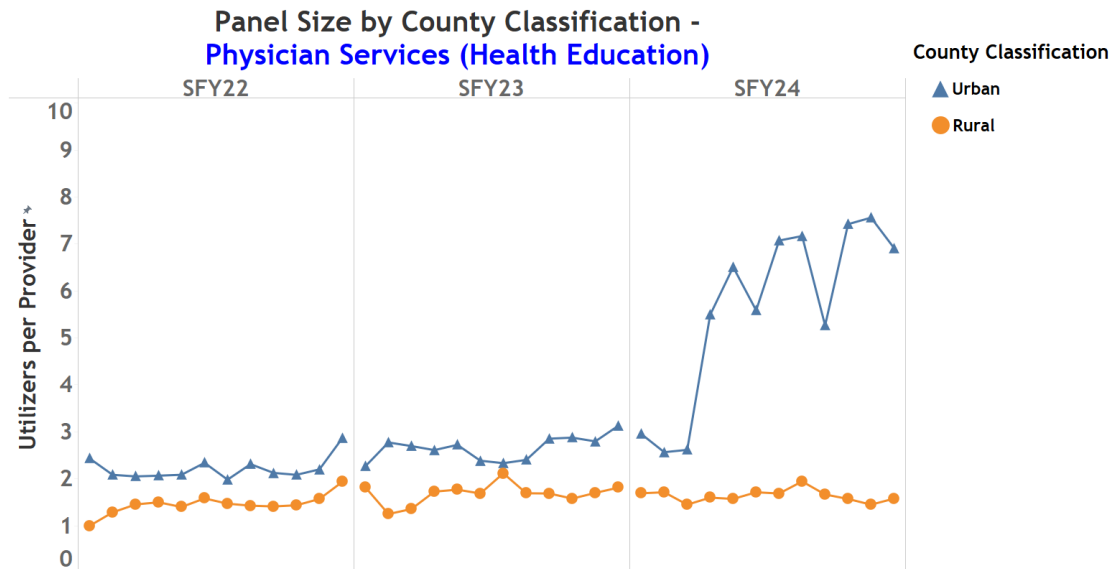


Figure 147.

As shown in Figure 147, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 1.98 and 7.56. In rural areas, this metric ranged from 1 to 2.12. In October of SFY 2023-24, urban areas experienced a significant increase in panel size and decreased a few times before ultimately reaching its highest level in May of SFY 2023-24. Meanwhile, the panel size for rural regions remained stable over the period. In urban areas, this noticeable spike was the result of a substantial increase in utilizers and a decrease in the number of providers, with subsequent month to month fluctuations in the number of utilizers relative to providers. Moreover, when the panel size was further broken out by three age categories: young children (less than 5 years); school-aged children (5 - 18 years); and adults (over 18), young children, and to a lesser extent school-aged children, were observed to be the primary drivers of the spike pattern in urban regions in SFY 2023-24, specifically for code 97535 (self-care management training). Additionally, adults contributed to the spiking pattern through increased utilization of code S9445 (patient education with non-physician providers), which is a substance use disorder (SUD) code in Colorado.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Health Education)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 148, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Meanwhile, the other counties had lower panel sizes and were located throughout the state.

**Panel Size by County (SFY24) - Physician Services (Health Education)**

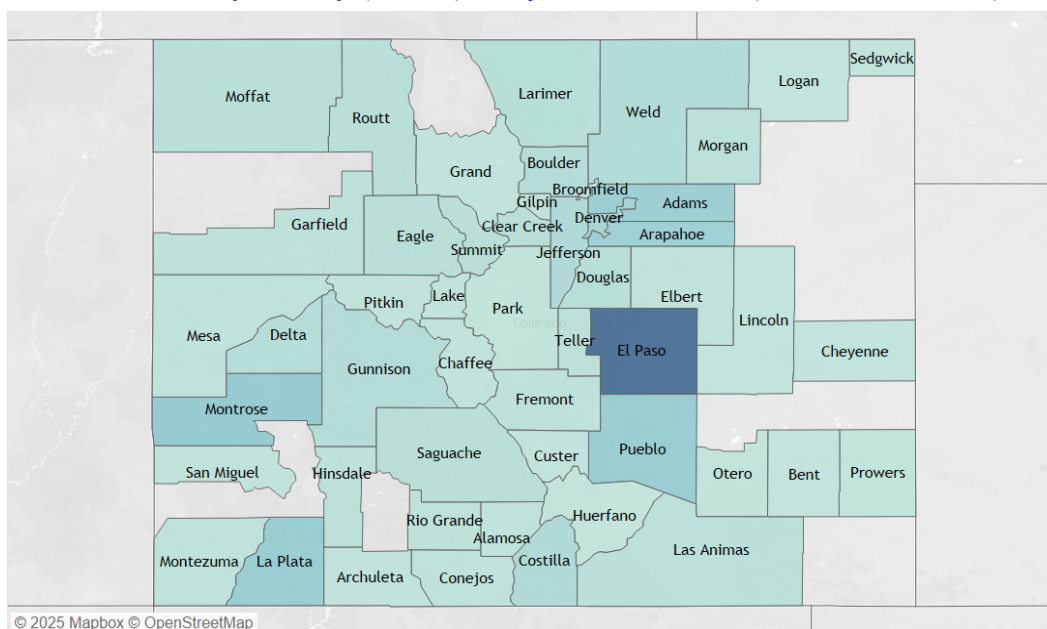


Figure 148.

## 10.9.2 Penetration Rate

**Penetration Rate (Utilization per 1000 Members) - Physician Services (Health Education)**

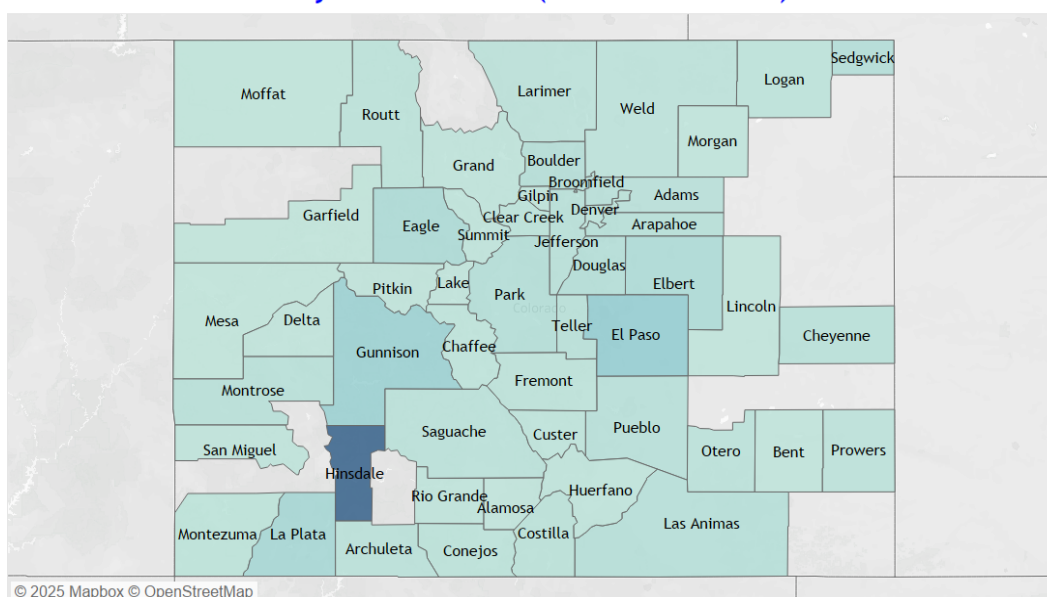


Figure 149.

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Health Education)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

As shown in Figure 149, members in 51 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Hinsdale County. In general, the other 50 counties were lower and relatively uniform in their penetration rates throughout Colorado.

### 10.9.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Health Education)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

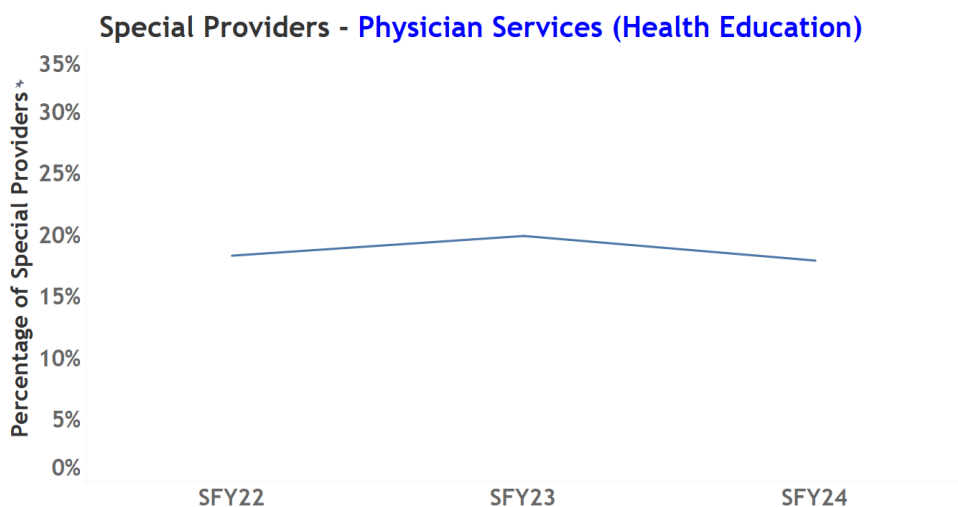


Figure 150.

As shown in Figure 150, the percentage of special providers had a slight increasing trend from SFY 2021-22 to SFY 2022-23, with a slight decreasing trend from SFY 2022-23 to SFY 2023-24. A few providers had a notable decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24.

### 10.9.4 Telemedicine Analysis

The first part of the telemedicine analysis considered the number of individual members that utilized services in the **Physician Services (Health Education)** category and what percentage of those members received at least one service through telemedicine across SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

As shown in Figure 151, From SFY 2021-22 to SFY 2023-24, the percentage of individual members that utilized telehealth **Physician Services (Health Education)** was moderately low.

This percentage increased from SFY 2021-22 to SFY 2022-23, before decreasing slightly from SFY 2022-23 to SFY 2023-24.

#### Members Utilizing Telemedicine Services - **Physician Services (Health Education)**

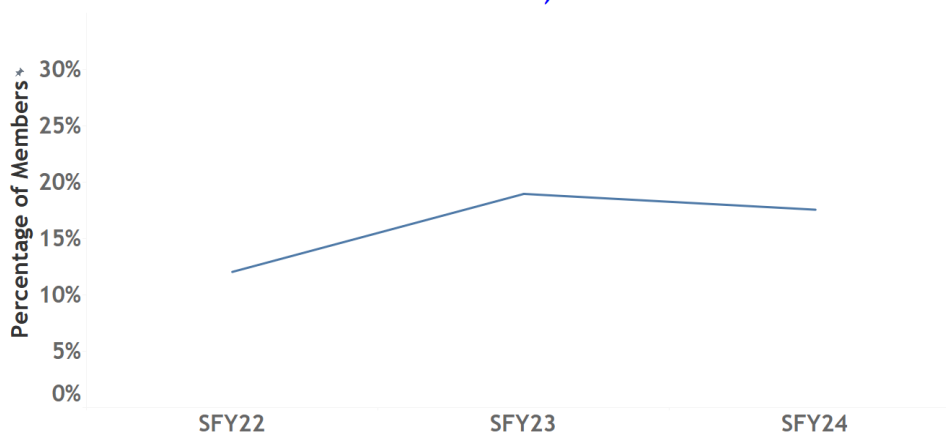


Figure 151.

The second part of the telemedicine analysis considered the number of total visits in the **Physician Services (Health Education)** category and what percentage of those visits were delivered through telemedicine across SFY 2021-22 to SFY 2023-24.

#### Telemedicine as a Percentage of Total Visits - **Physician Services (Health Education)**

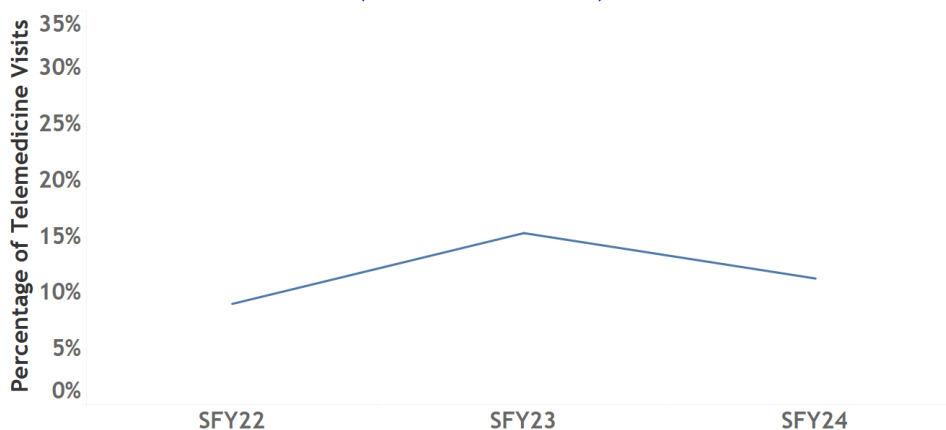


Figure 152.

As shown in Figure 152, From SFY 2021-22 to SFY 2023-24, the percentage of total visits that were delivered through telemedicine for **Physician Services (Health Education)** was moderately low. This percentage increased from SFY 2021-22 to SFY 2022-23, then decreased from SFY 2022-23 to SFY 2023-24.

### 10.9.5 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Health Education)** providers.

Figure 153 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Health Education)** providers. From SFY 2021-22 to SFY 2023-24, 90.44% of total members resided 30 minutes or less from a provider; 2.56% of total members resided approximately 30-45 minutes; 2.05% of total members resided 45-60 minutes; and 4.95% of total members resided over an hour from a provider.

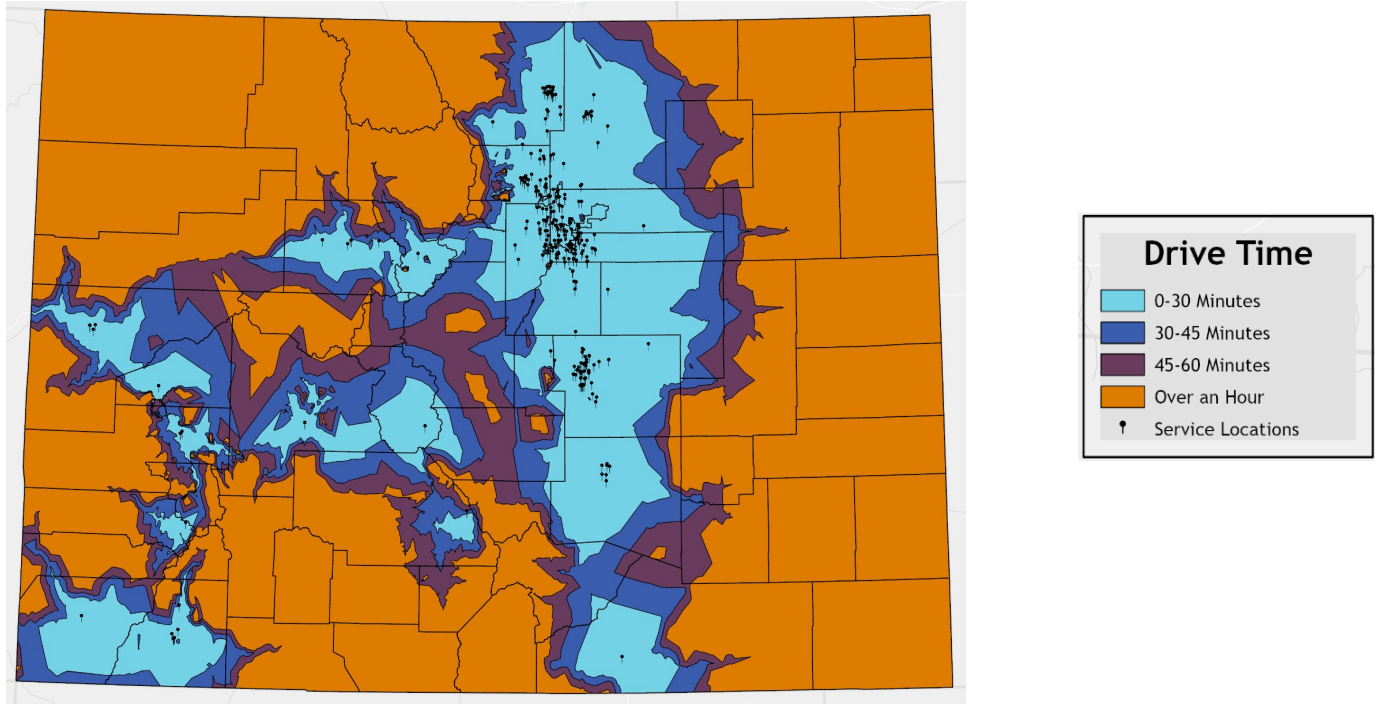


Figure 153.

## 10.10 Physician Services (Medication Injections & Infusions)

### 10.10.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Medication Injections & Infusions)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

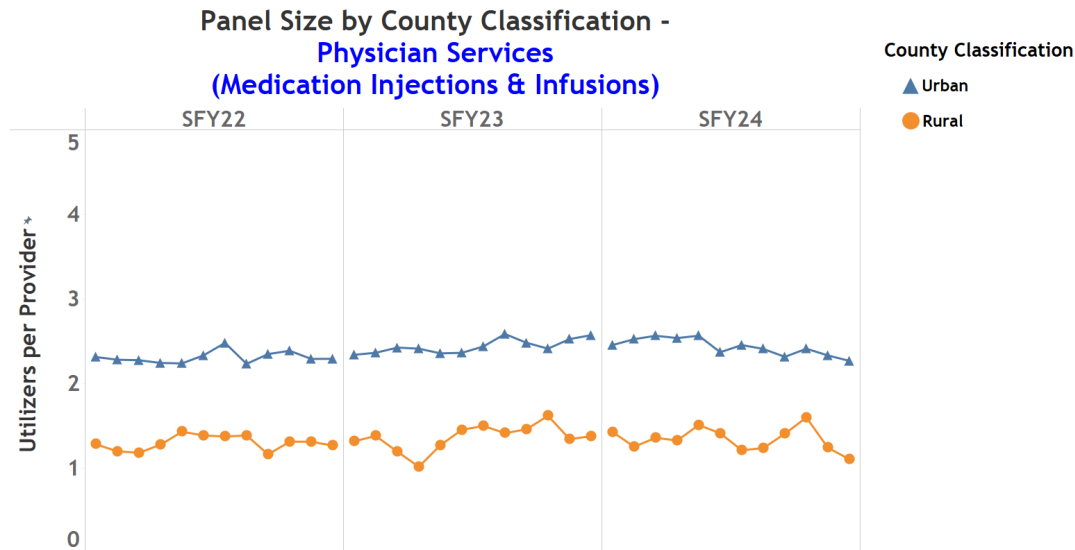


Figure 154.

As shown in Figure 154, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 2.23 and 2.59. In rural areas, this metric ranged from 1.02 to 1.62. The overall trend over these three years for each region type was stable.

### Panel Size by County (SFY24) - Physician Services (Medication Injections & Infusions)

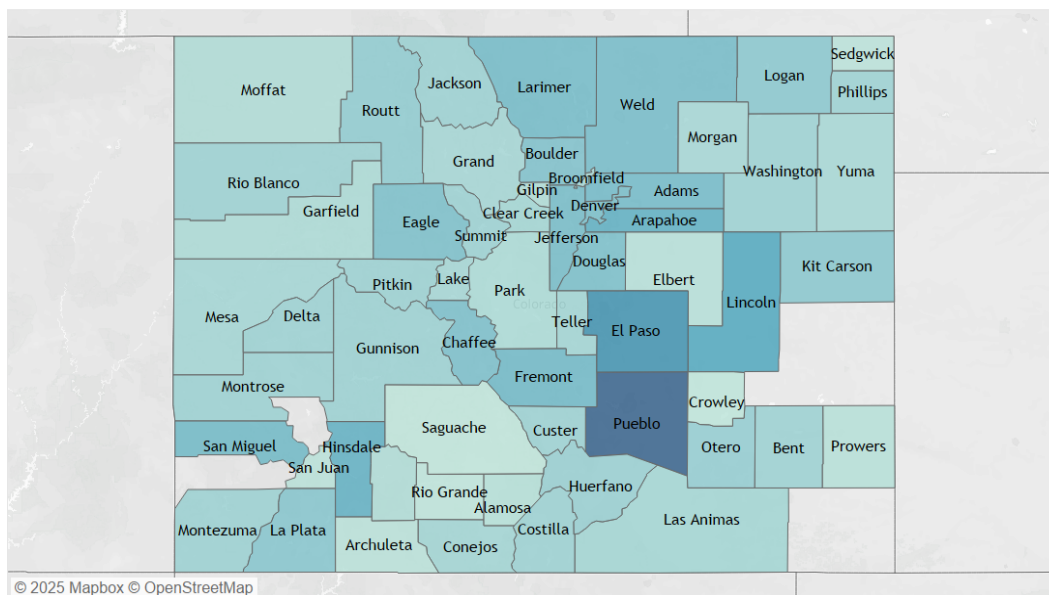


Figure 155.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Medication Injections & Infusions)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 155, in SFY 2023-24, the number of utilizers per provider was highest in Pueblo County, followed by nearby El Paso County. Additionally, several other counties along the northern portion of the I-25 corridor and adjacent counties were lower, yet relatively moderate in panel size. Meanwhile, counties with the lowest panel sizes were relatively uniform and located throughout the state.

### 10.10.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Medication Injections & Infusions)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Physician Services (Medication Injections & Infusions)**

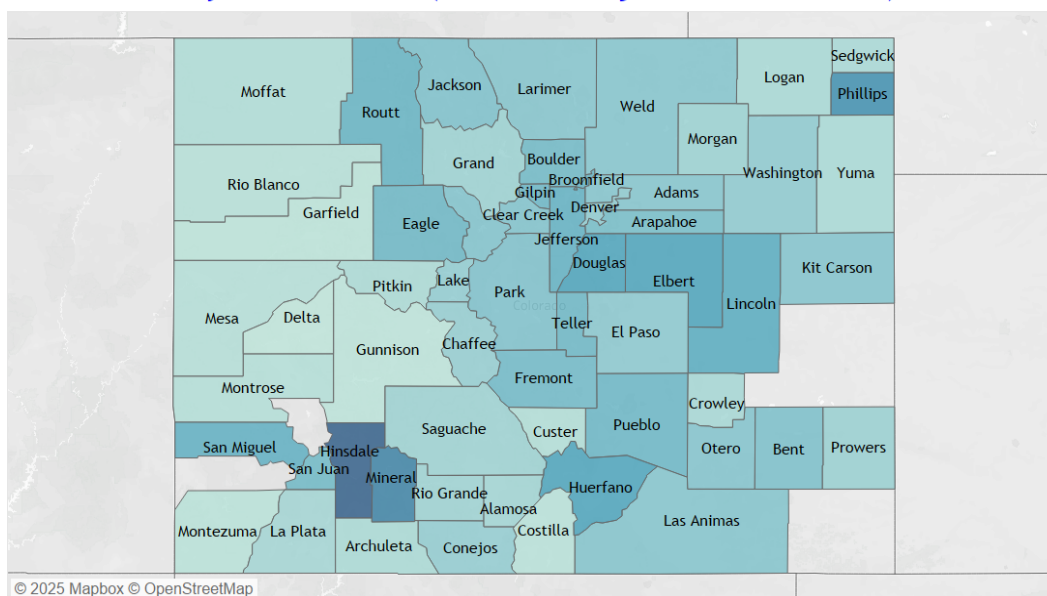


Figure 156.

As shown in Figure 156, members in 59 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Hinsdale County. In general, the other 58 counties were lower and relatively uniform in their penetration rates throughout the state, with the lowest being in Western Colorado.

### 10.10.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Medication Injections & Infusions)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).



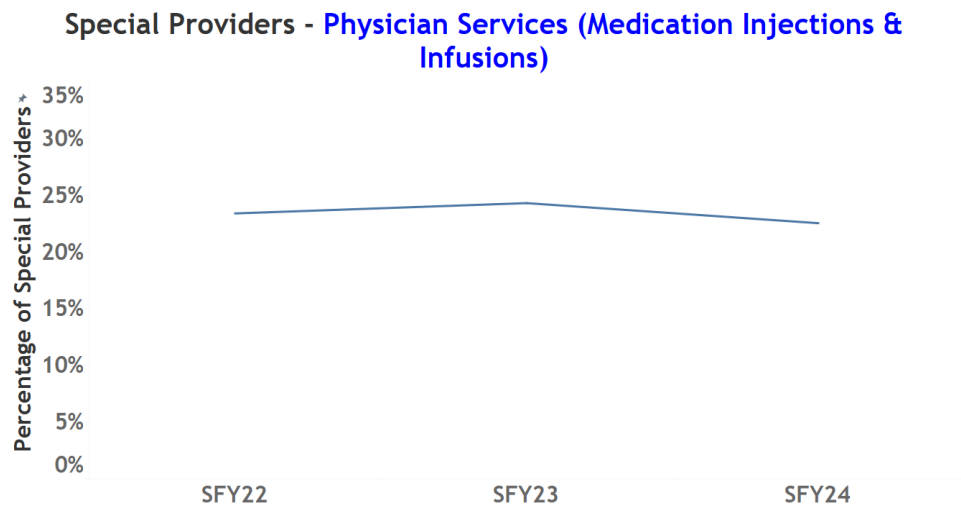


Figure 157.

As shown in Figure 157, the percentage of special providers remained relatively stable, with a slight increasing trend from SFY 2021-22 to SFY 2022-23 and a slight decreasing trend from SFY 2022-23 to SFY 2023-24. A few providers decreased in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, a few providers slightly increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served among providers can be attributed to some providers moving to different clinics or practices.

#### 10.10.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Medication Injections & Infusions)** providers.

Figure 158 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Medication Injections & Infusions)** providers. From SFY 2021-22 to SFY 2023-24, 94.24% of total members resided 30 minutes or less from a provider; 2.83% of total members resided approximately 30-45 minutes; 1.54% of total members resided 45-60 minutes; and 1.39% of total members resided over an hour from a provider.

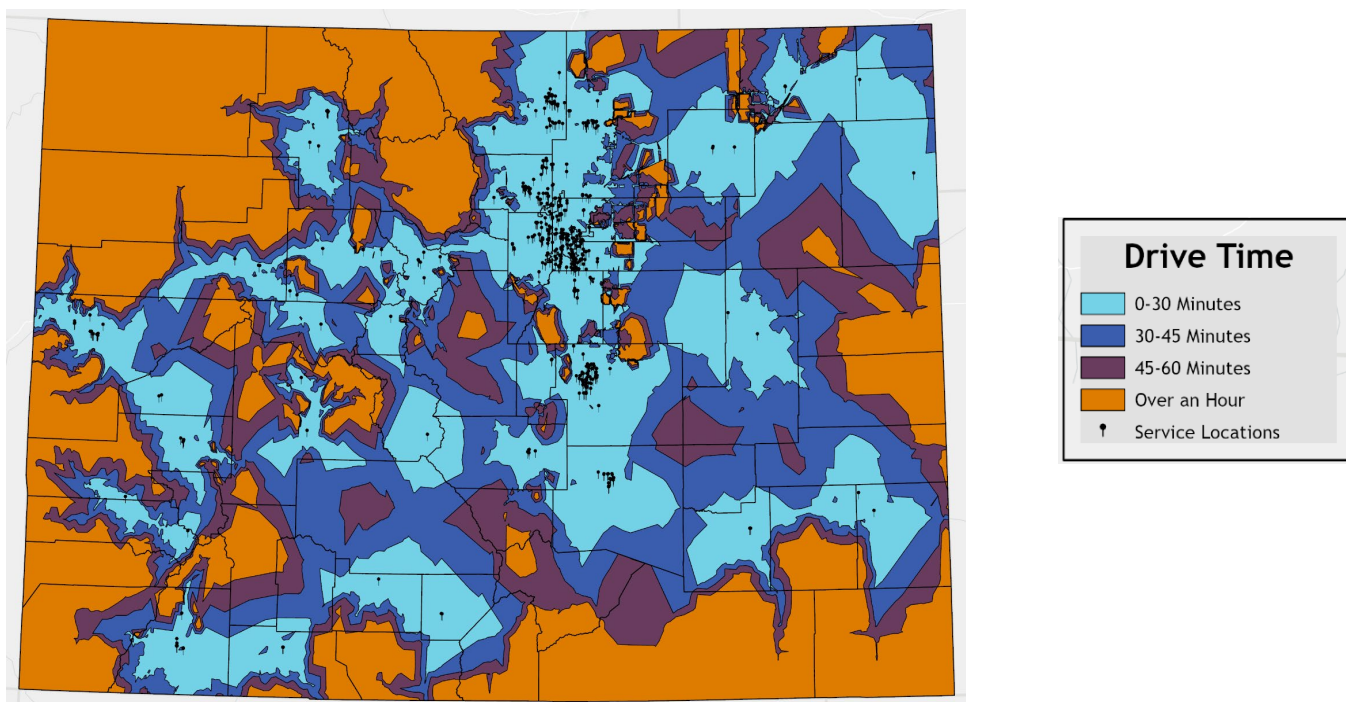


Figure 158.

## 10.11 Physician Services (Neuro/Psychological Testing Services)

### 10.11.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Neuro/Psychological Testing Services)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

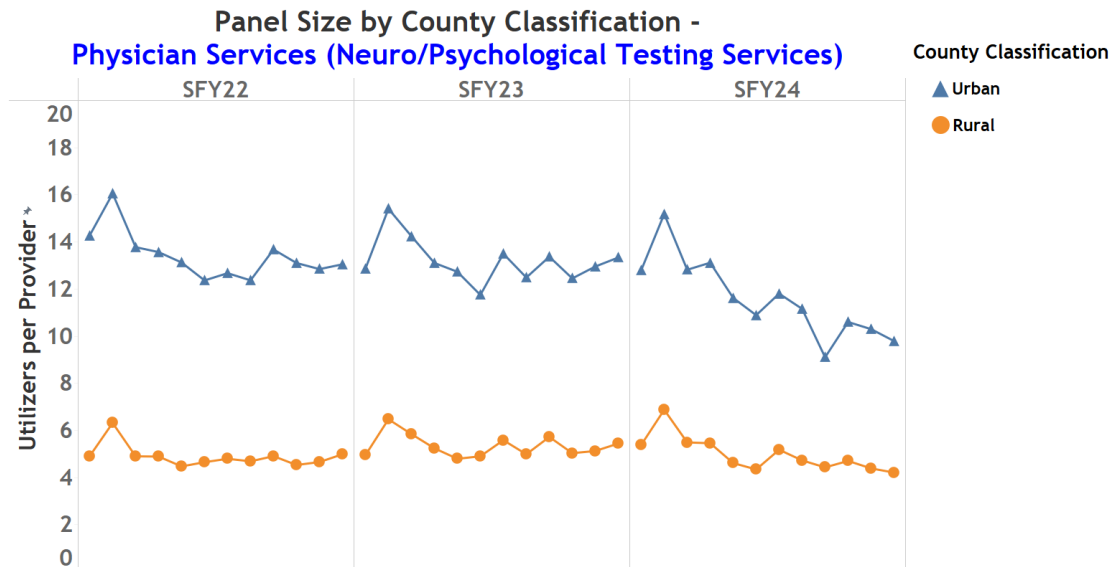


Figure 159.

As shown in Figure 159, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 9.1 and 16.05. In rural areas, this metric ranged from 4.21 to 6.88. In urban and rural regions, panel size had a modest spike pattern at the beginning of each fiscal year before stabilizing throughout the fiscal year, with a decreasing trend noted towards the end of SFY 2023-24 across both regions. When the panel size was further broken out by three age categories: young children (less than 5 years), school-aged children (5 - 18 years), and adults (over 18), school-aged children were observed to have driven the spike pattern across urban and rural regions. This can be explained by a large increase in utilization among the school-aged population in urban and rural areas, with a modest increase in the number of providers.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Neuro/Psychological Testing Services)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 160, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed closely by Mesa County. Additionally, several other counties in Western Colorado and some along the I-25 corridor and adjacent counties were lower, yet relatively moderate in panel size. Meanwhile, counties with the lowest panel sizes were mostly located in the Eastern and South-Central parts of the state.

**Panel Size by County (SFY24) -  
Physician Services (Neuro/Psychological Testing Services)**

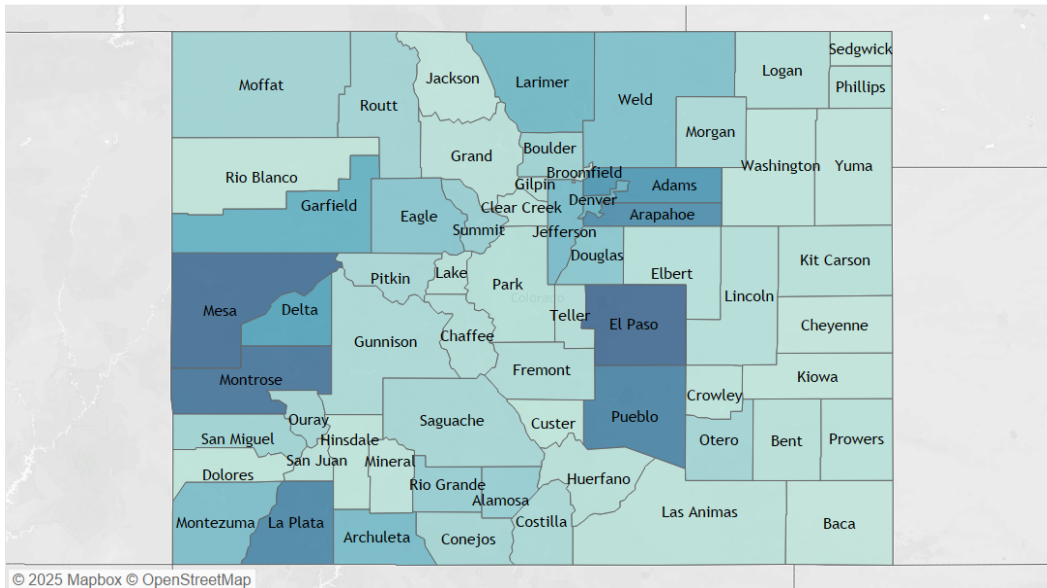


Figure 160.

### 10.11.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Neuro/Psychological Testing Services)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Physician Services (Neuro/Psychological Testing Services)**

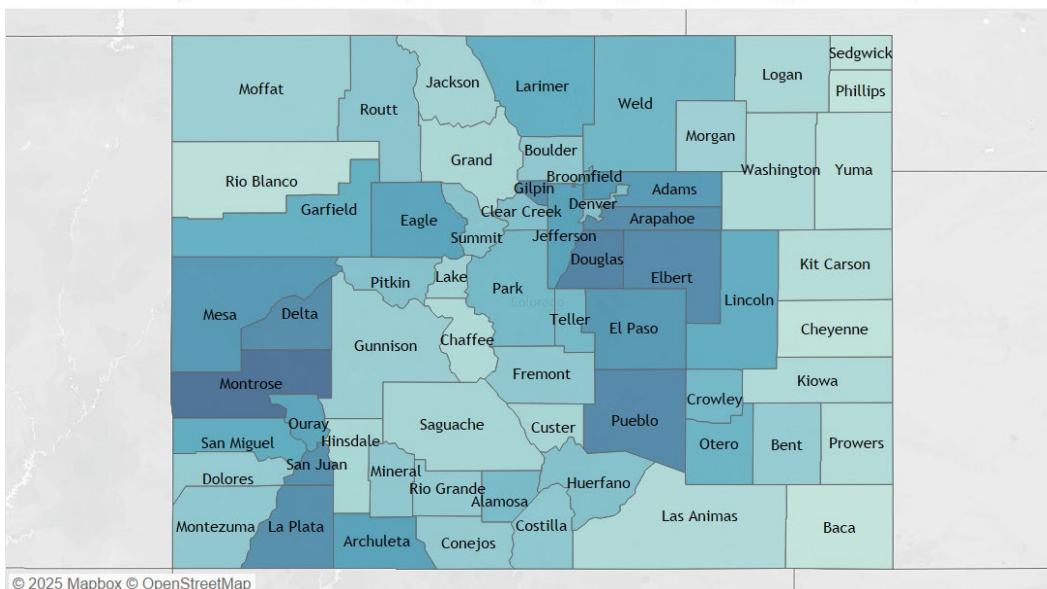


Figure 161.

As shown in Figure 161, members in all 64 of Colorado’s counties utilized services in this category. The penetration rate was highest in Montrose County. Additionally, several other counties on the Western Slope and several along the I-25 corridor and adjacent counties had moderate penetration rates. The other counties were lower and similar in their penetration rates and were mostly located in the Eastern and North-Western parts of Colorado, as well as Saguache and adjacent counties.

### 10.11.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Neuro/Psychological Testing Services)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

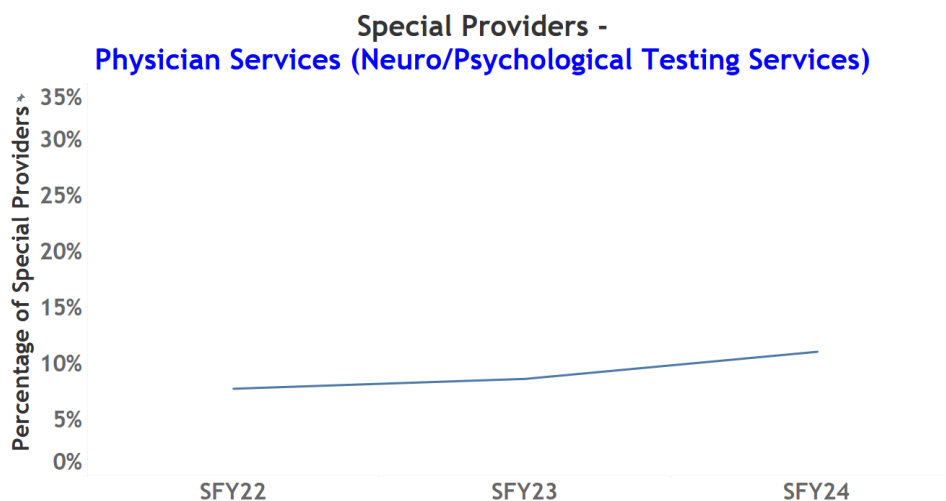


Figure 162.

As shown in Figure 162, the percentage of special providers had a slight increasing trend from SFY 2021-22 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, a few providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served can be attributed to several situations. This includes providers who were no longer practicing, moved locations, or moved to new practices. Additionally, one provider had served members across many different service categories but began to focus on serving members in a specific service category.

### 10.11.4 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Physician Services (Neuro/Psychological Testing Services)** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 63% of providers statewide served Medicaid members.

### 10.11.5 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Physician Services (Neuro/Psychological Testing Services)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

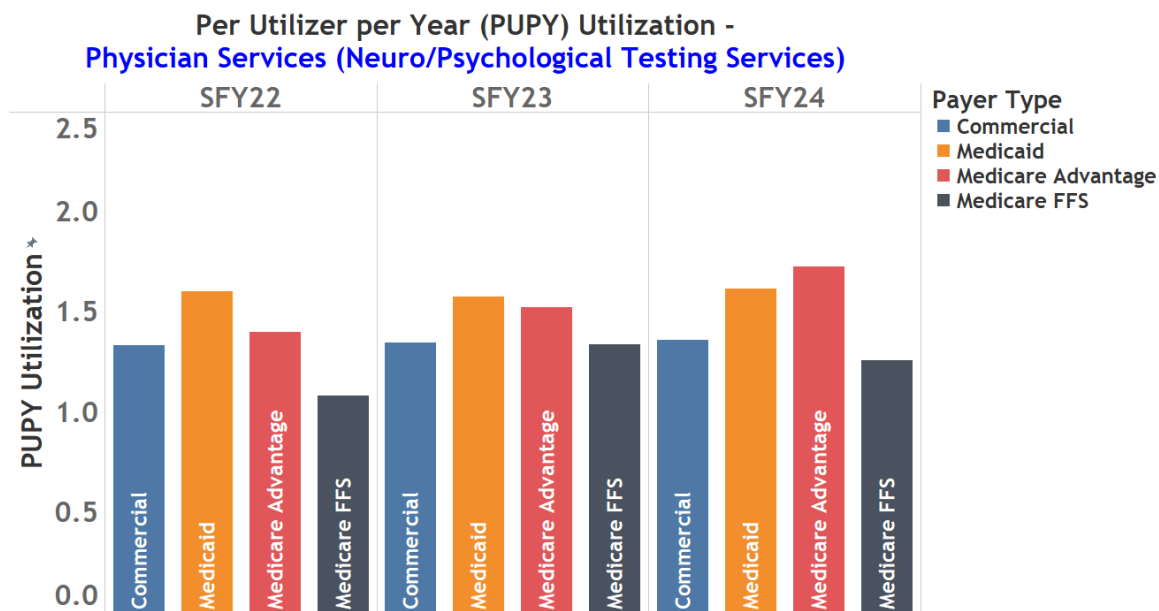


Figure 163.

As shown in Figure 163, statewide Medicaid utilization per utilizer per year for the **Physician Services (Neuro/Psychological Testing Services)** remained relatively stable from SFY 2021-22 to SFY 2023-24. It was slightly higher than commercial payers and Medicare FFS and was similar to Medicare Advantage, the latter of which slightly exceeded Medicaid in SFY 2023-24.

## 10.12 Physician Services (Neurology)

### 10.12.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Neurology)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

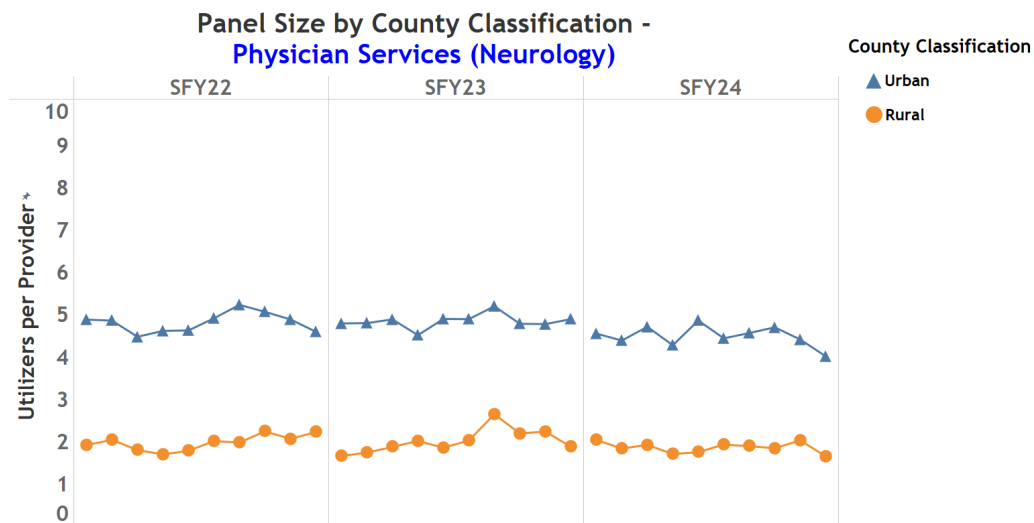


Figure 164.

As shown in Figure 164, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 4.03 and 5.25. In rural areas, this metric ranged from 1.66 to 2.66. The overall trend over these three years for each region type was relatively stable, with a slight downward trend at the end of SFY 2023-24 due to decreasing numbers of utilizers.

**Panel Size by County (SFY24) - Physician Services (Neurology)**

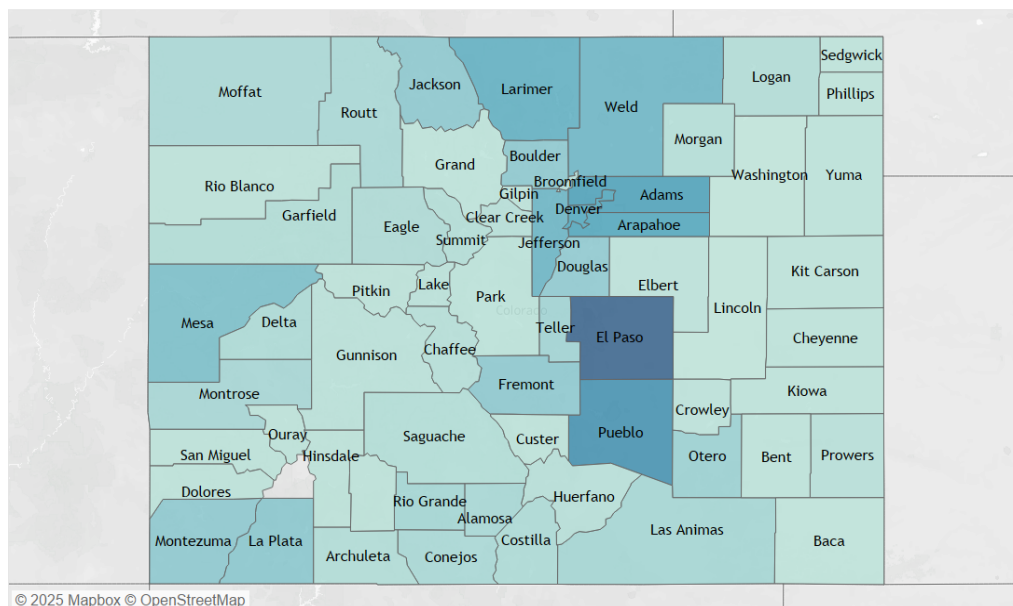


Figure 165.



The second part of the panel size analysis (Figure 165) considers the average number of utilizers per provider in each county for the **Physician Services (Neurology)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 165, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, panel size was lower in much of Eastern and Western Colorado.

### 10.12.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Neurology)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Physician Services (Neurology)**

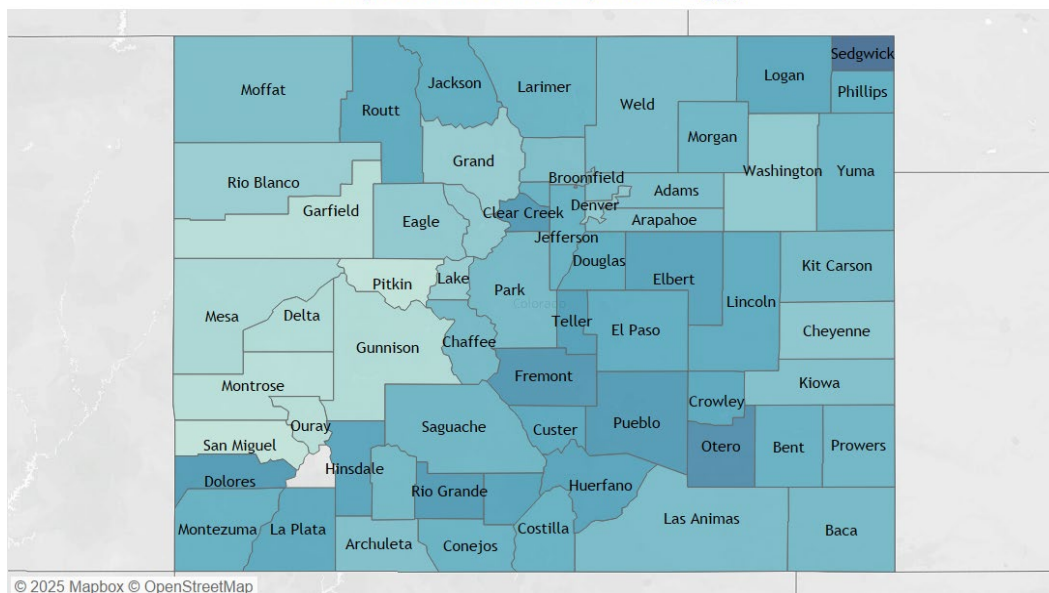


Figure 166.

As shown in Figure 166, members in 63 of Colorado's 64 counties utilized services in this category. The penetration rate was highest in Sedgwick County. The other 62 counties were lower and similar in their penetration rates throughout the state, with the exception of the Western Slope, which had the lowest penetration rates.

### 10.12.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Neurology)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

As shown in Figure 167, the percentage of special providers remained stable from SFY 2021-22 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24.

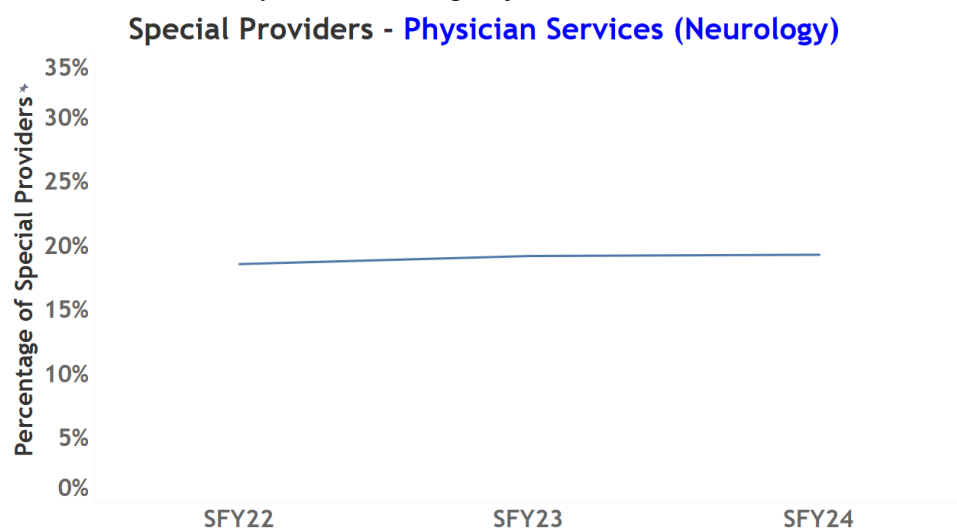


Figure 167.

#### 10.12.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Neurology)** providers.

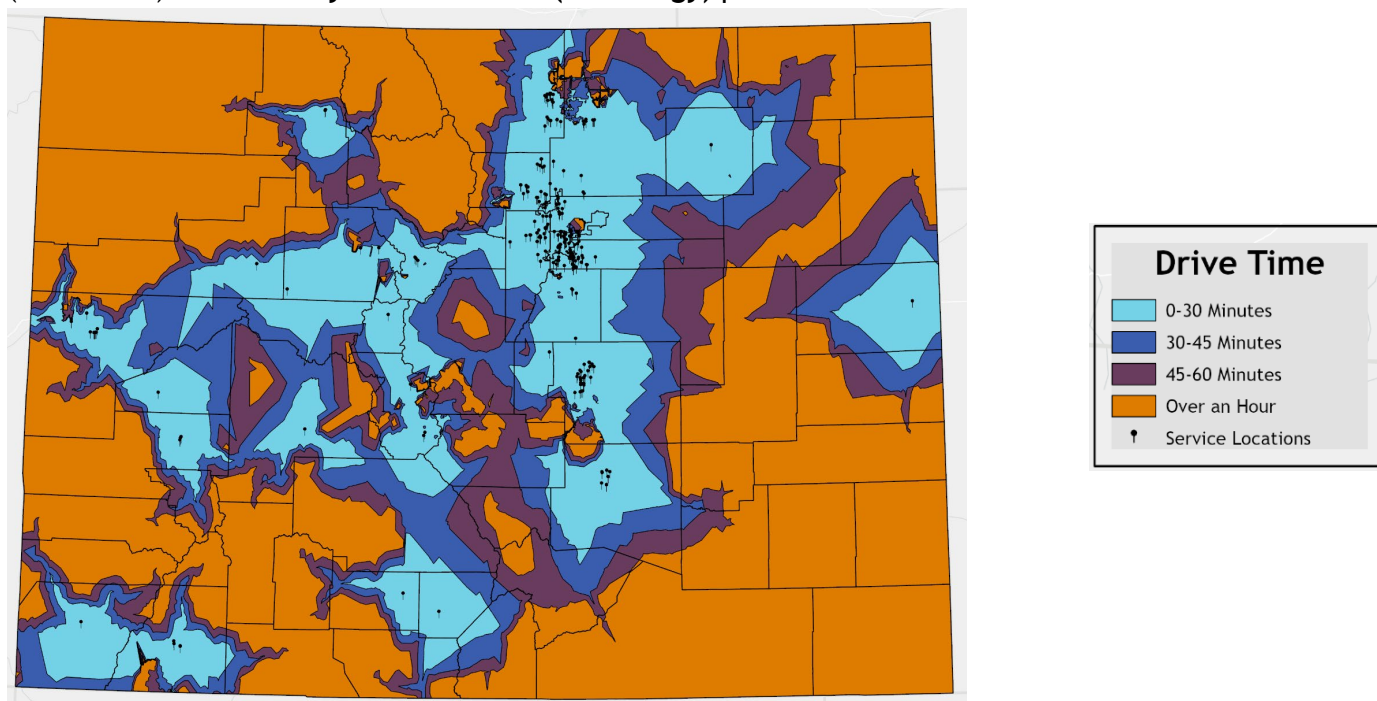


Figure 168.

Figure 168 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Neurology)** providers. From SFY 2021-22 to SFY 2023-24, 90.45% of total

members resided 30 minutes or less from a provider; 4.13% of total members resided approximately 30-45 minutes; 2.35% of total members resided 45-60 minutes; and 3.07% of total members resided over an hour from a provider.

## 10.13 Physician Services (Primary Care Evaluation and Management) (E&M)

### 10.13.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Primary Care E&M)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

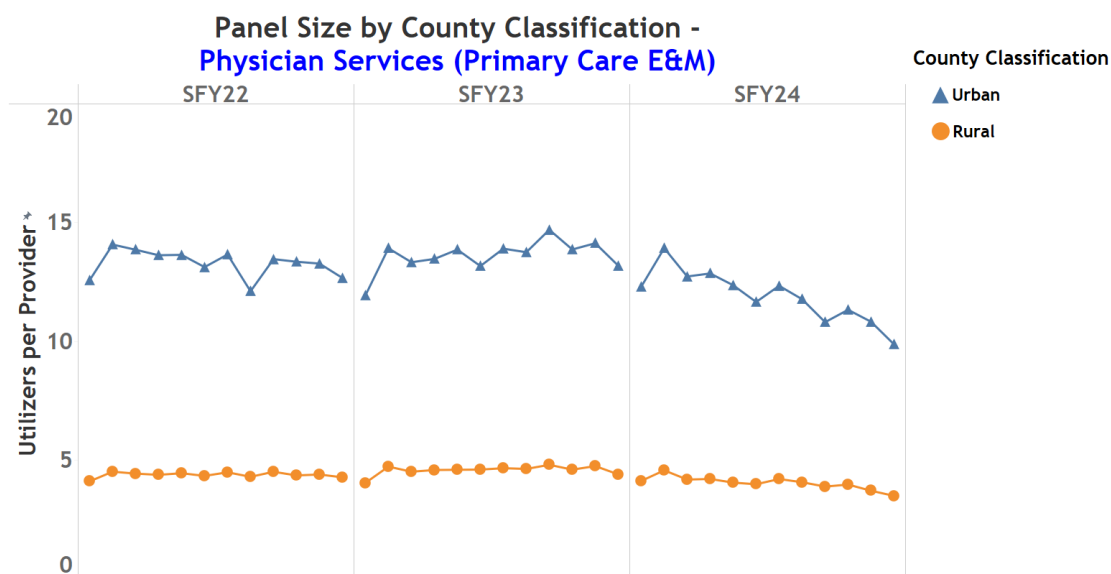


Figure 169.

As shown in Figure 169, in urban areas throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 9.87 and 14.70. In rural areas, this metric ranged from 3.49 to 4.80. Urban panel size had a notable decrease in SFY 2023-24 as a result of the number of utilizers decreasing at a faster rate than the number of providers. Meanwhile, in rural regions, panel size maintained a relatively stable pattern, with a slight downward trend throughout the remainder of SFY 2023-24.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Primary Care E&M)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 170, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as a select few in Western Colorado, had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern, Western, and South-Central parts of Colorado.

**Panel Size by County (SFY24) -  
Physician Services (Primary Care E&M)**

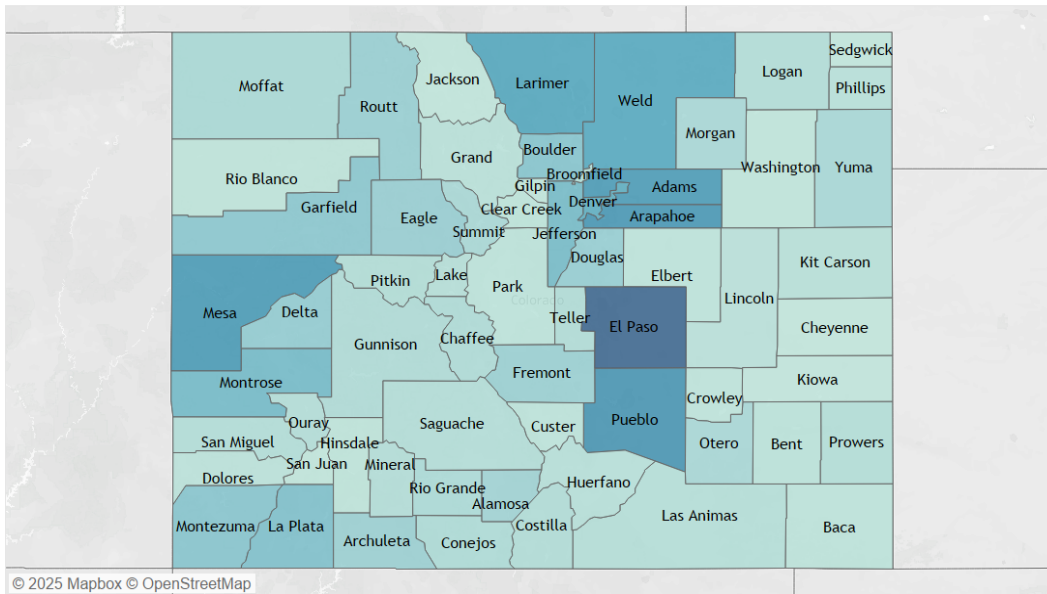


Figure 170.

### 10.13.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Primary Care E&M)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Physician Services (Primary Care E&M)**

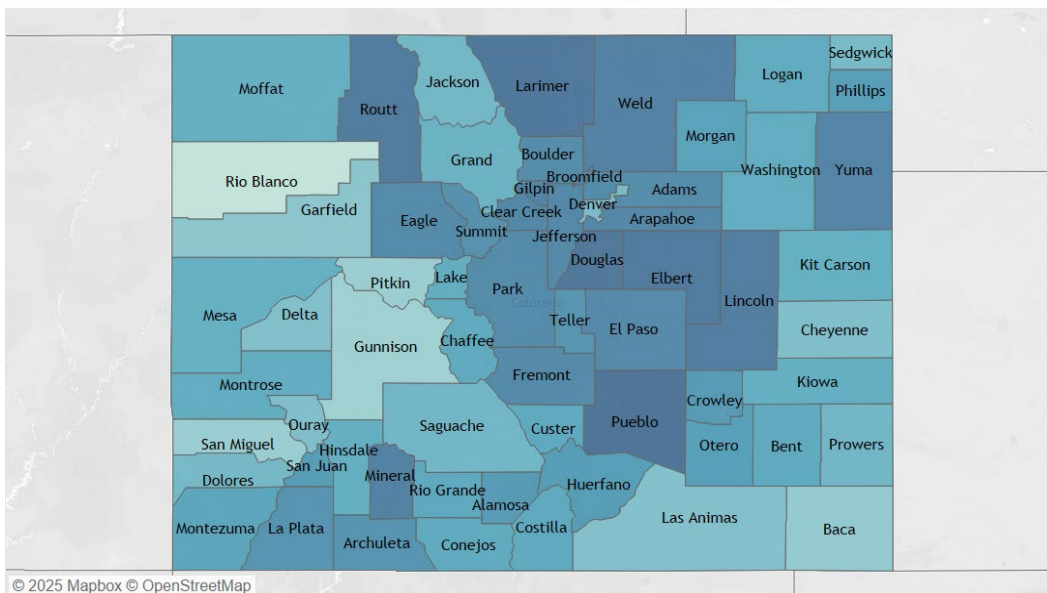


Figure 171.

As shown in Figure 171, members in all 64 of Colorado’s counties utilized services in this category. The penetration rate was highest in Pueblo County, with several counties along the I-25 corridor and across the state having moderate to high penetration rates. Meanwhile, counties with lower penetration rates were mostly located on the Western Slope.

### 10.13.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Primary Care E&M)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

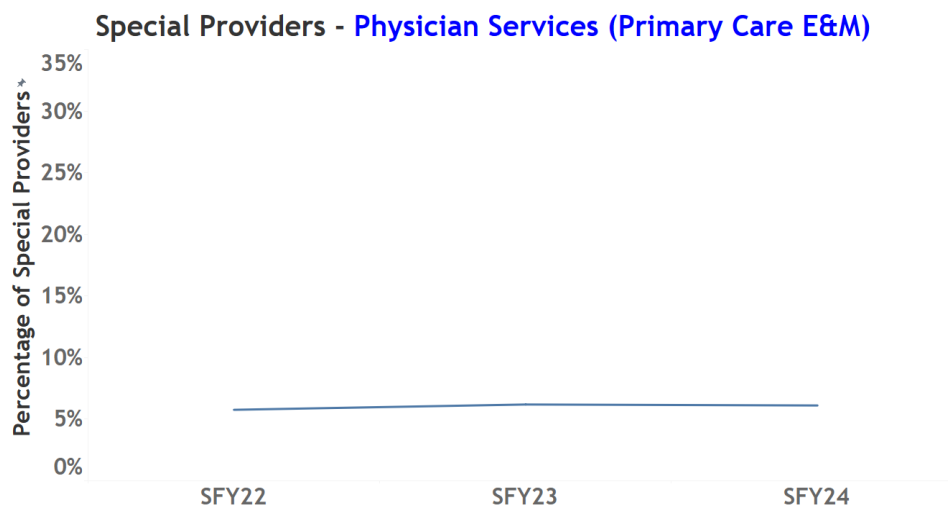


Figure 172.

As shown in Figure 172, the percentage of special providers remained stable from SFY 2021-22 to SFY 2023-24.

### 10.13.4 Telemedicine Analysis

The first part of the telemedicine analysis considered the number of individual members that utilized services in the **Physician Services (Primary Care E&M)** category and what percentage of those members received at least one service through telemedicine across SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

As shown in Figure 173, From SFY 2021-22 to SFY 2023-24, the percentage of individual members that utilized telehealth **Physician Services (Primary Care E&M)** was moderately low. This percentage decreased from SFY 2021-22 to SFY 2023-24.

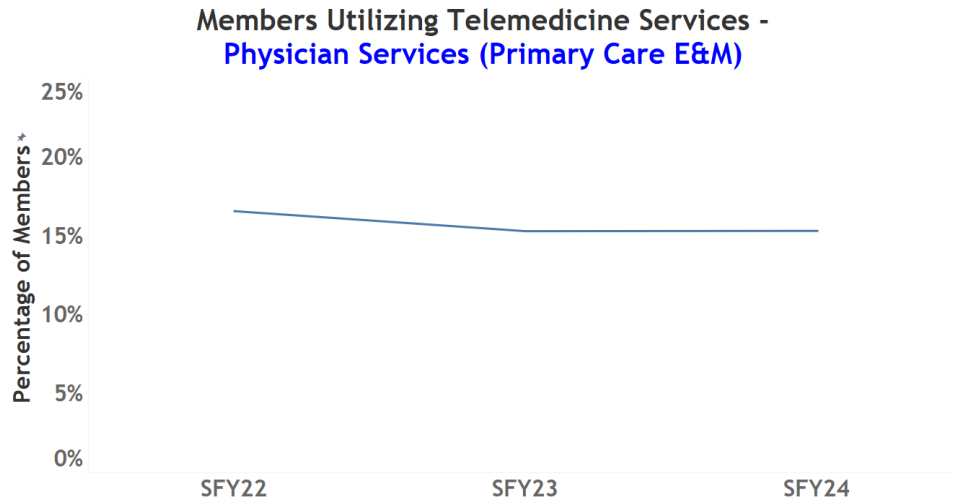


Figure 173.

The second part of the telemedicine analysis considered the number of total visits in the **Physician Services (Primary Care E&M)** category and what percentage of those visits were delivered through telemedicine across SFY 2021-22 to SFY 2023-24.

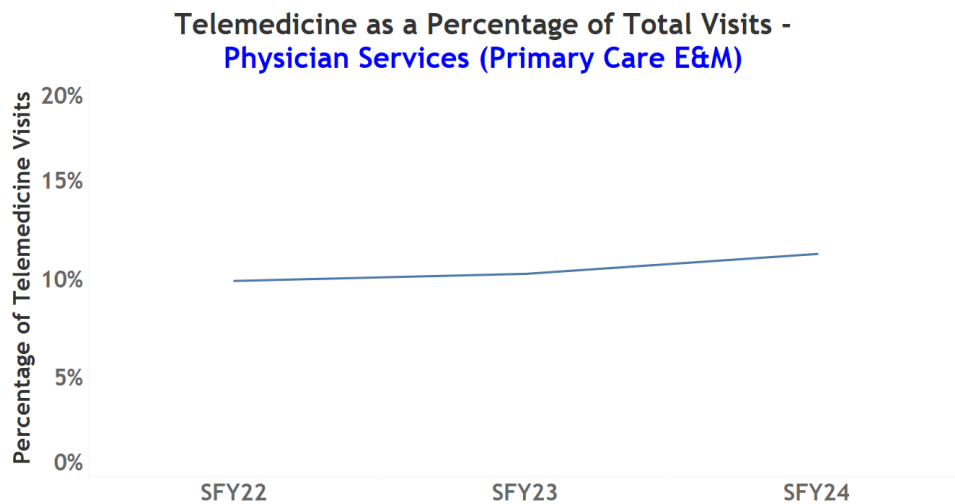


Figure 174.

As shown in Figure 174, From SFY 2021-22 to SFY 2023-24, the percentage of total visits that were delivered through telemedicine for **Physician Services (Primary Care E&M)** was moderately low, increasing from SFY 2021-22 to SFY 2023-24.

### 10.13.5 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Primary Care E&M)** providers.

Figure 175 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Primary Care E&M)** providers. From SFY 2021-22 to SFY 2023-24, 99.17% of total members resided 30 minutes or less from a provider; 0.55% of total members resided



approximately 30-45 minutes; 0.18% of total members resided 45-60 minutes; and 0.10% of total members resided over an hour from a provider.

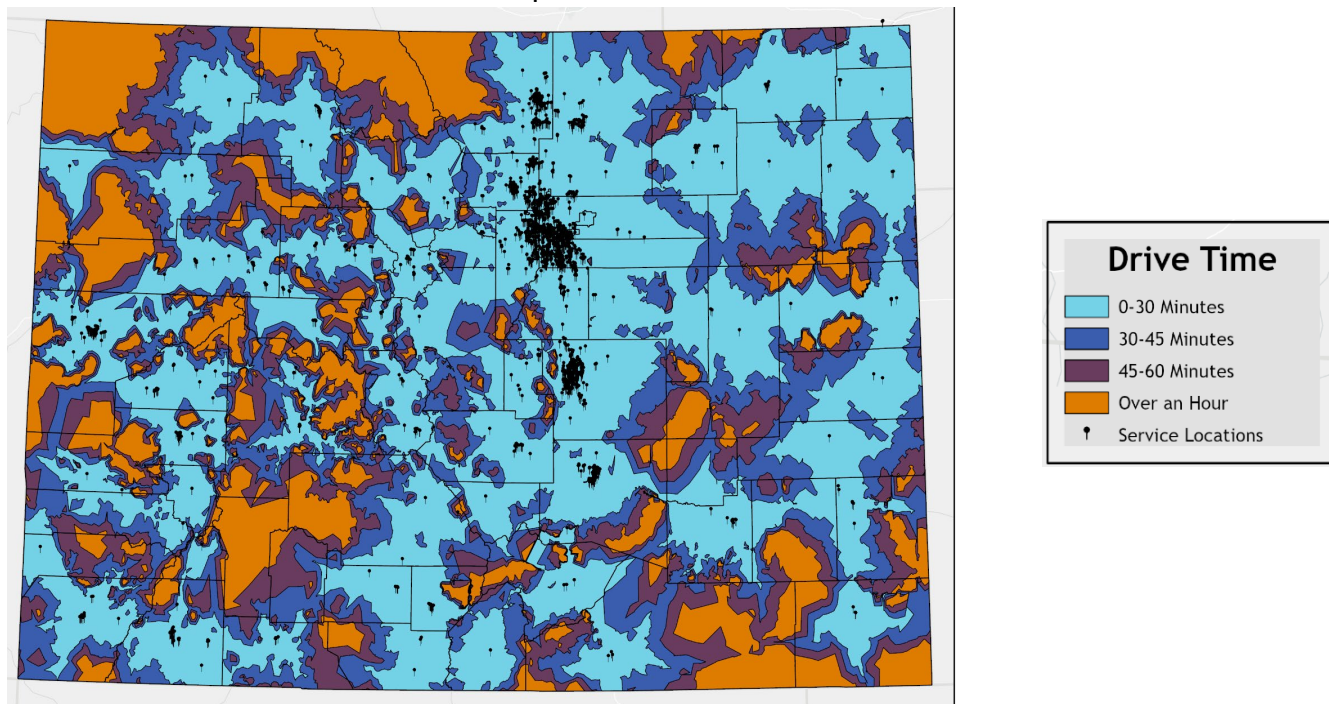


Figure 175.

### 10.13.6 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Physician Services (Primary Care E&M)** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), approximately 73% of providers statewide served Medicaid members<sup>7</sup>.

<sup>7</sup> An approximate percentage for provider participation is reflected within Primary Care E&M as a result of the regrouping of certain codes into ED and Hospital E&M. This metric was provided by the Center for Improving Value in Health Care (CIVHC) and therefore could not be recalculated. Provider participation for other service categories that did not have regrouped codes still reflect the precise percentage.

## 10.14 Physician Services (Radiology)

### 10.14.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Radiology)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

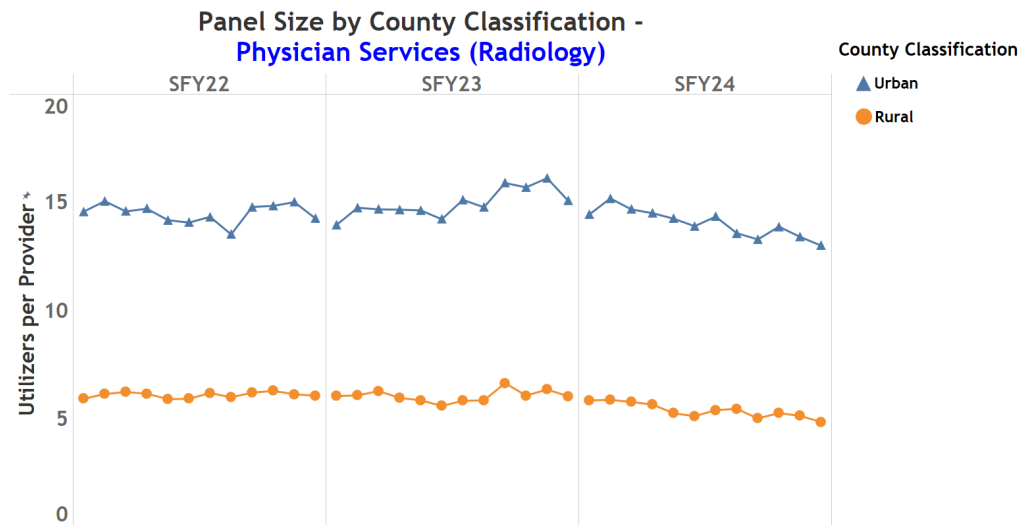


Figure 176.

As shown in Figure 176, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 13 and 16.12. In rural areas, this metric ranged from 4.85 to 6.65. The overall trend over these three years for each region type was stable, though there did appear to be a very slight decreasing trend near the end of SFY 2023-24.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Radiology)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 177, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern, Western, and South-Central parts of Colorado.

Panel Size by County (SFY24) - **Physician Services (Radiology)**

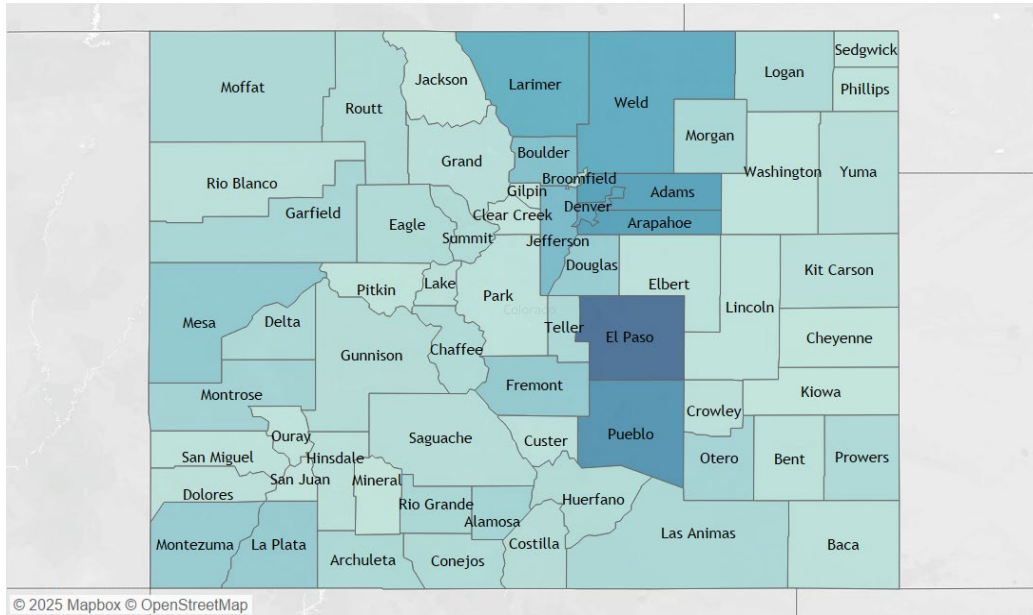


Figure 177.

### 10.14.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Radiology)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) -  
**Physician Services (Radiology)**

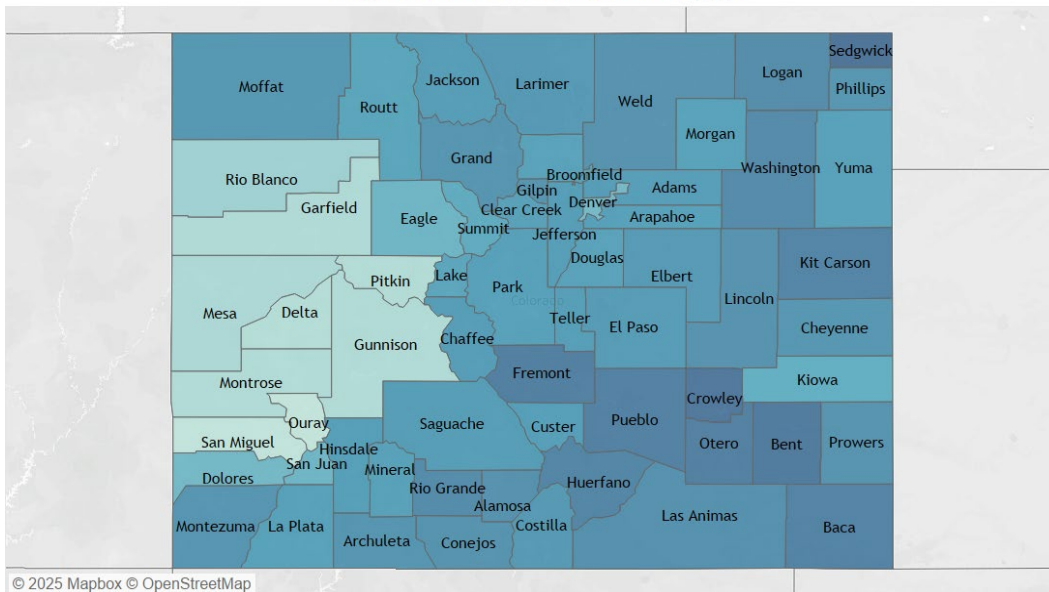


Figure 178.

As shown in Figure 178, members in all 64 of Colorado’s counties utilized services in this category. The penetration rate was highest in Sedgwick County and moderate to high throughout all of Colorado, with the exception of the Western Slope of Colorado, which had a much lower penetration rate in comparison.

### 10.14.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Radiology)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

As shown in Figure 179, the percentage of special providers was stable, with a slight increasing trend from SFY 2021-22 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served can be attributed to some providers moving to new locations, while some no longer have current enrollment.

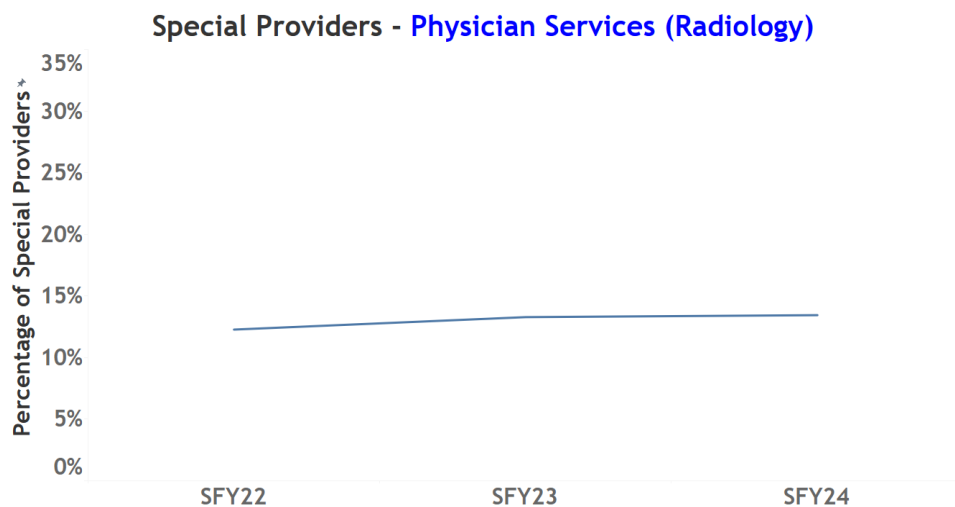


Figure 179.

### 10.14.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Radiology)** providers.

Figure 180 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Radiology)** providers. From SFY 2021-22 to SFY 2023-24, 97.49% of total members resided 30 minutes or less from a provider; 1.43% of total members resided approximately 30-45 minutes; 0.58% of total members resided 45-60 minutes; and 0.50% of total members resided over an hour from a provider.

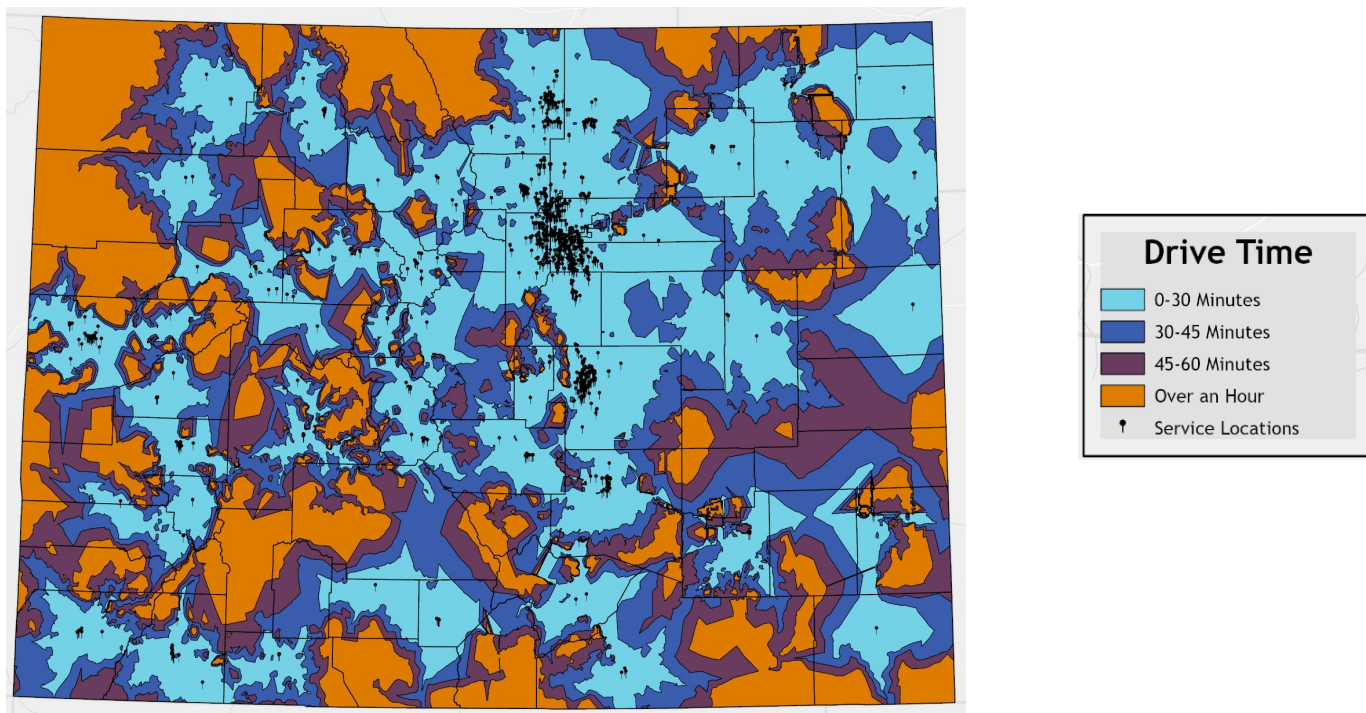


Figure 180.



## 10.15 Physician Services (Respiratory)

### 10.15.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Respiratory)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

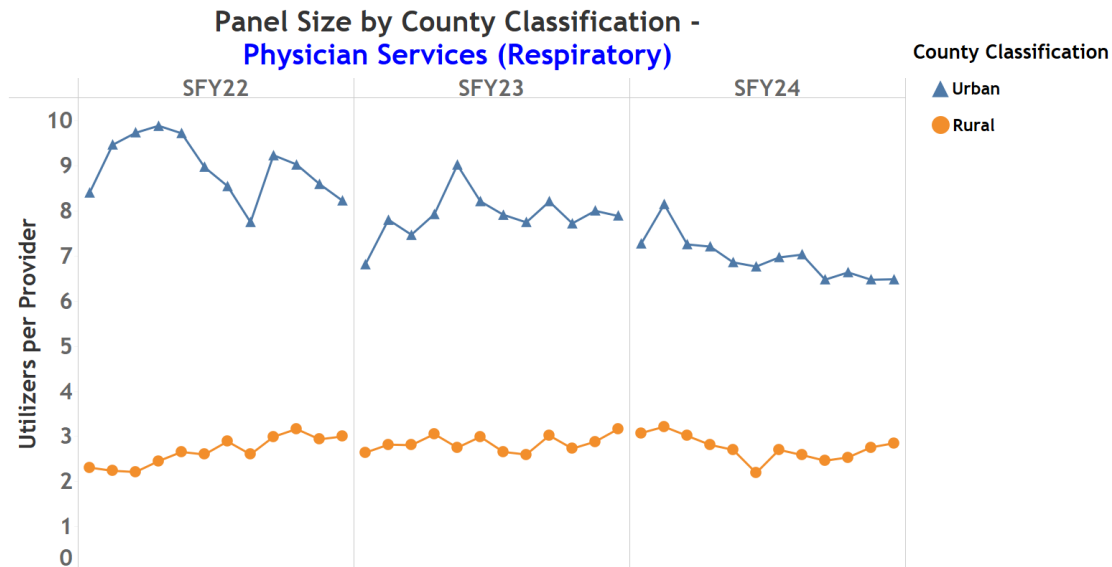


Figure 181.

As shown in Figure 181, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 6.48 and 9.89. In rural areas, this metric ranged from 2.19 to 3.22. In urban regions, the panel size increased at the beginning of SFY 2021-22, before decreasing into SFY 2022-23, where it maintained more stability before appearing to trend downwards into the end of SFY 2023-24 as a result of a decrease in the number of utilizers. Meanwhile, panel size in rural regions maintained a stable trend across all fiscal years.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Respiratory)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 182, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County, followed closely by Adams County. Additionally, several other counties along the I-25 corridor and adjacent counties, as well as a select few in Western Colorado, had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern, Western, and South-Central parts of Colorado.

Panel Size by County (SFY24) - **Physician Services (Respiratory)**

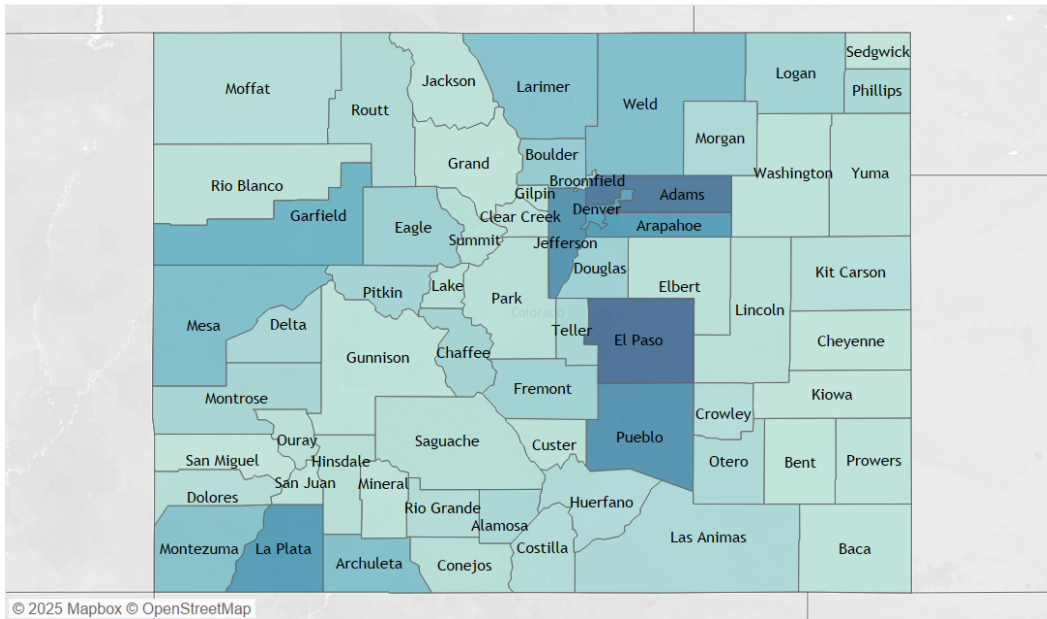


Figure 182.

### 10.15.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Respiratory)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

Penetration Rate (Utilization per 1000 Members) - **Physician Services (Respiratory)**

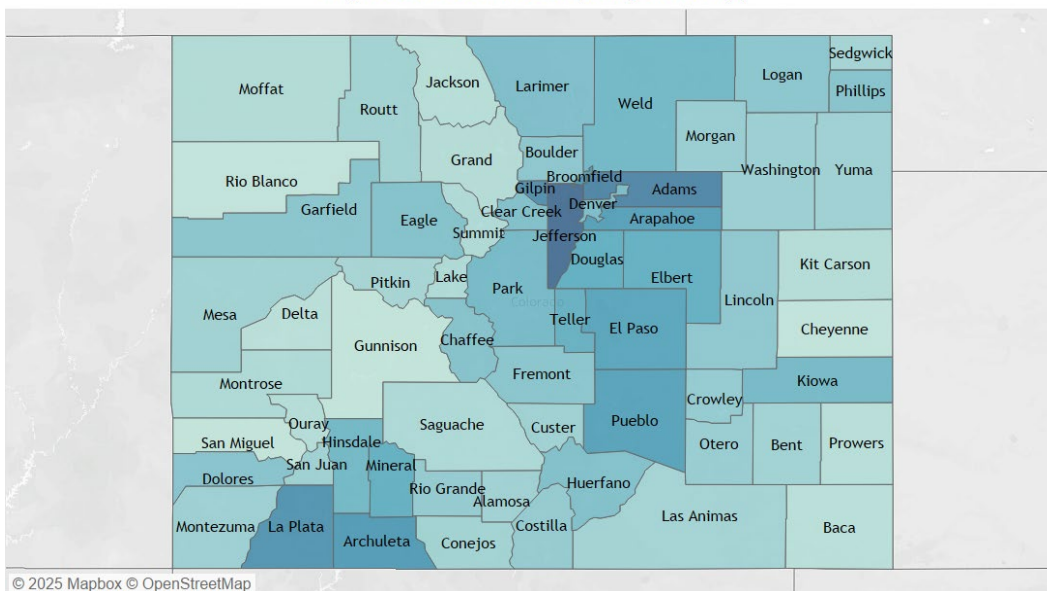


Figure 183.



As shown in Figure 183, members in all 64 of Colorado’s counties utilized services in this category. The penetration rate was highest in Jefferson County. Additionally, several counties in South-Western Colorado and along the I-25 corridor had moderate penetration rates. Meanwhile, other counties throughout Colorado had lower and relatively uniform penetration rates.

### 10.15.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Respiratory)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

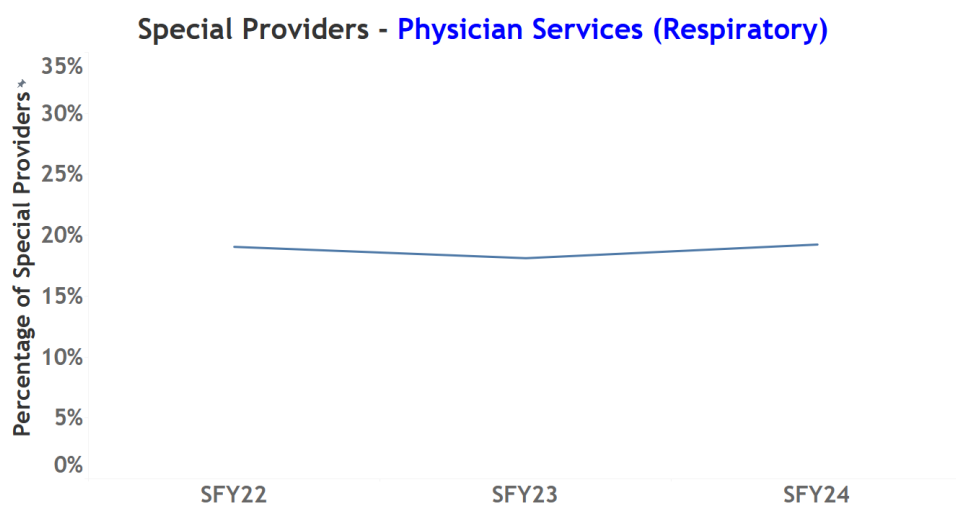


Figure 184.

As shown in Figure 184, the percentage of special providers was stable overall, decreasing slightly from SFY 2021-22 to SFY 2022-23, before increasing slightly from SFY 2022-23 to SFY 2023-24. Several providers had a dramatic decrease in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24.

Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served can be attributed to some providers moving to different practices within an organization, while some became affiliated with new practices.

### 10.15.4 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Physician Services (Respiratory)** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 34% of providers statewide served Medicaid members.

### 10.15.5 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Physician Services (Respiratory)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado

Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

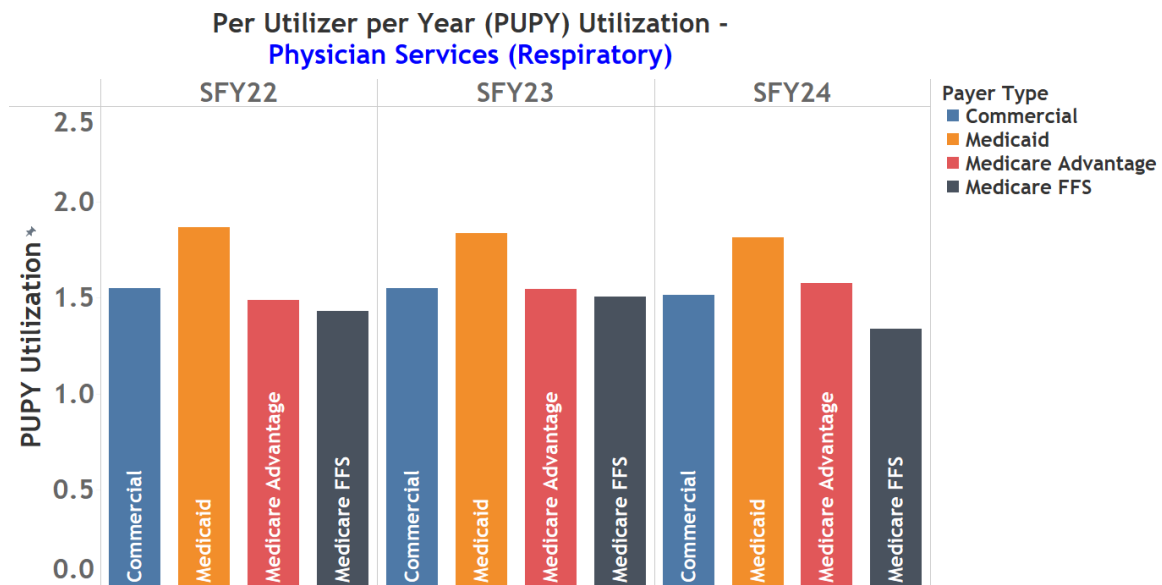


Figure 185.

As shown in Figure 185, statewide Medicaid utilization per utilizer per year for the **Physician Services (Respiratory)** remained relatively stable from SFY 2021-22 to SFY 2023-24 and was higher than other payers.

## 10.16 Physician Services (Sleep Study)

### 10.16.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Sleep Study)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

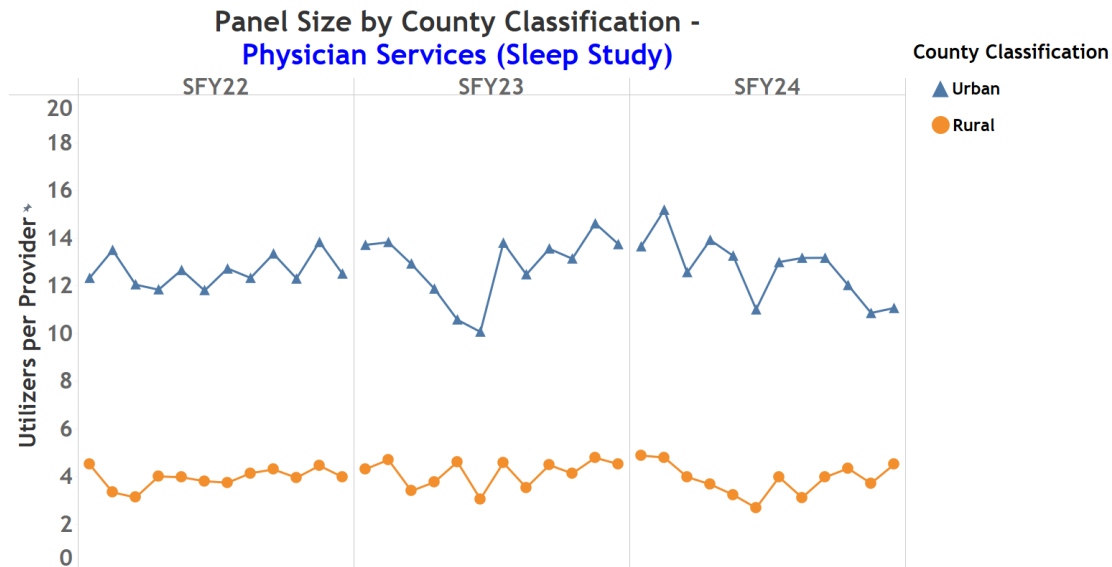


Figure 186.

As shown in Figure 186, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 10.06 and 15.16. In rural areas, this metric ranged from 2.68 to 4.87. In urban regions, panel size decreased from September to December of SFY 2022-23, before increasing again and maintaining a relatively stable pattern, with similar occurrences in SFY 2023-24. Meanwhile, panel size in rural regions maintained a relatively stable trend across all fiscal years.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Sleep Study)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 187, in SFY 2023-24, the number of utilizers per provider was highest in Pueblo County, followed by Larimer County. Additionally, several other counties along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Eastern, Western, and South-Central parts of Colorado.

**Panel Size by County (SFY24) - Physician Services (Sleep Study)**

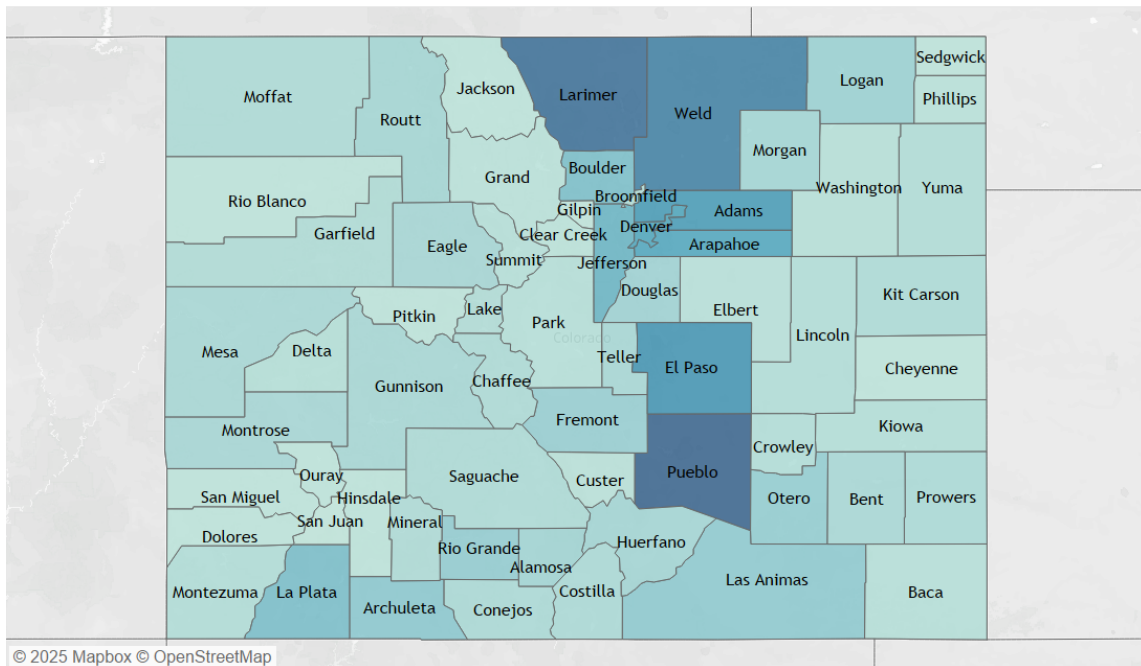


Figure 187.

### 10.16.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Sleep Study)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) - Physician Services (Sleep Study)**

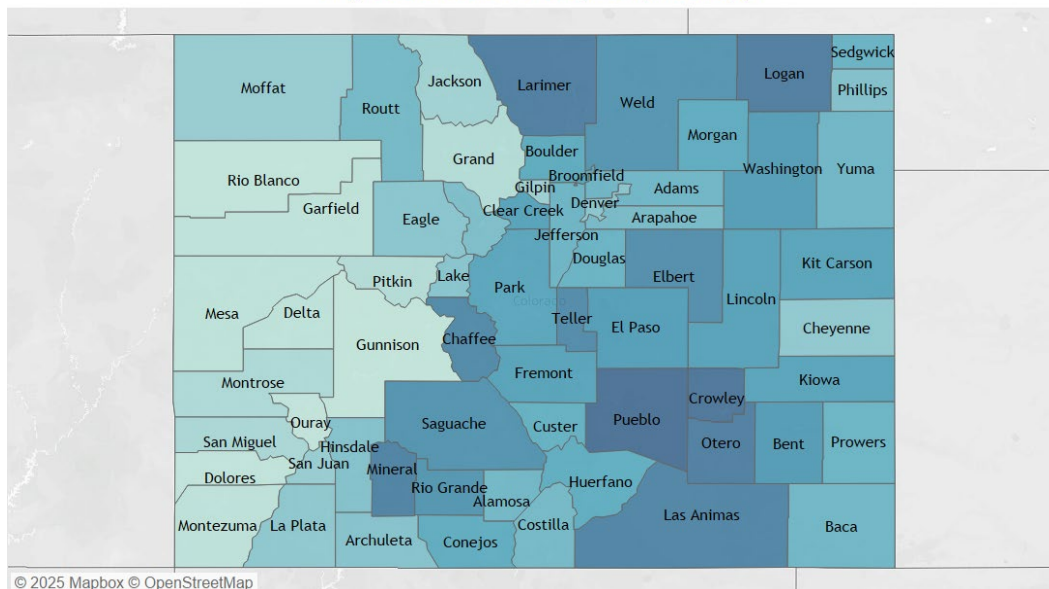


Figure 188.

As shown in Figure 188, members in all 64 of Colorado’s counties utilized services in this category. The penetration rate was highest in Pueblo County, followed closely by Crowley County. Additionally, several counties throughout the state had moderate penetration rates. Meanwhile, the lowest penetration rates were mostly located in Western Colorado.

### 10.16.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Sleep Study)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

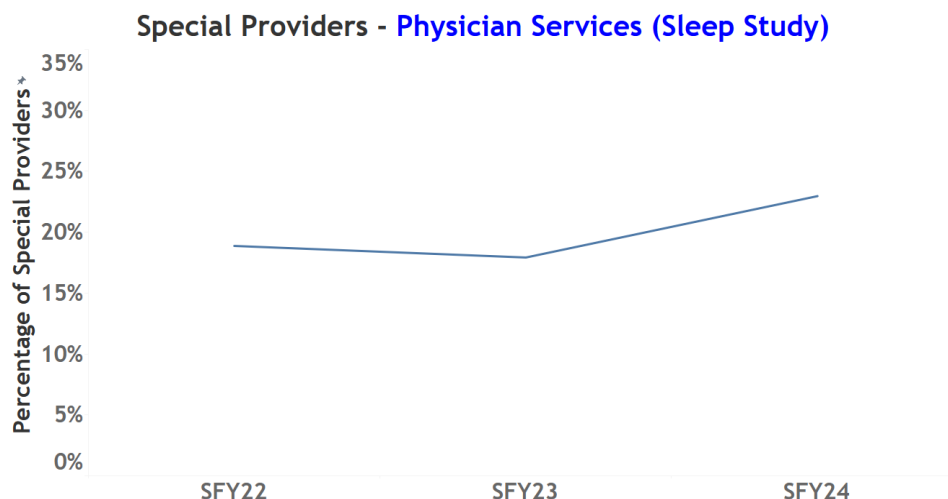


Figure 189.

As shown in Figure 189, the percentage of special providers decreased slightly from SFY 2021-22 to SFY 2022-23, before increasing from SFY 2022-23 to SFY 2023-24. A few providers decreased in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that the decrease in members served can be attributed to at least one provider moving to a practice that was not affiliated with their previous practice.

### 10.16.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Sleep Study)** providers.

Figure 190 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Sleep Study)** providers. From SFY 2021-22 to SFY 2023-24, 90.69% of total members resided 30 minutes or less from a provider; 3.43% of total members resided approximately 30-45 minutes; 1.66% of total members resided 45-60 minutes; and 4.22% of total members resided over an hour from a provider.

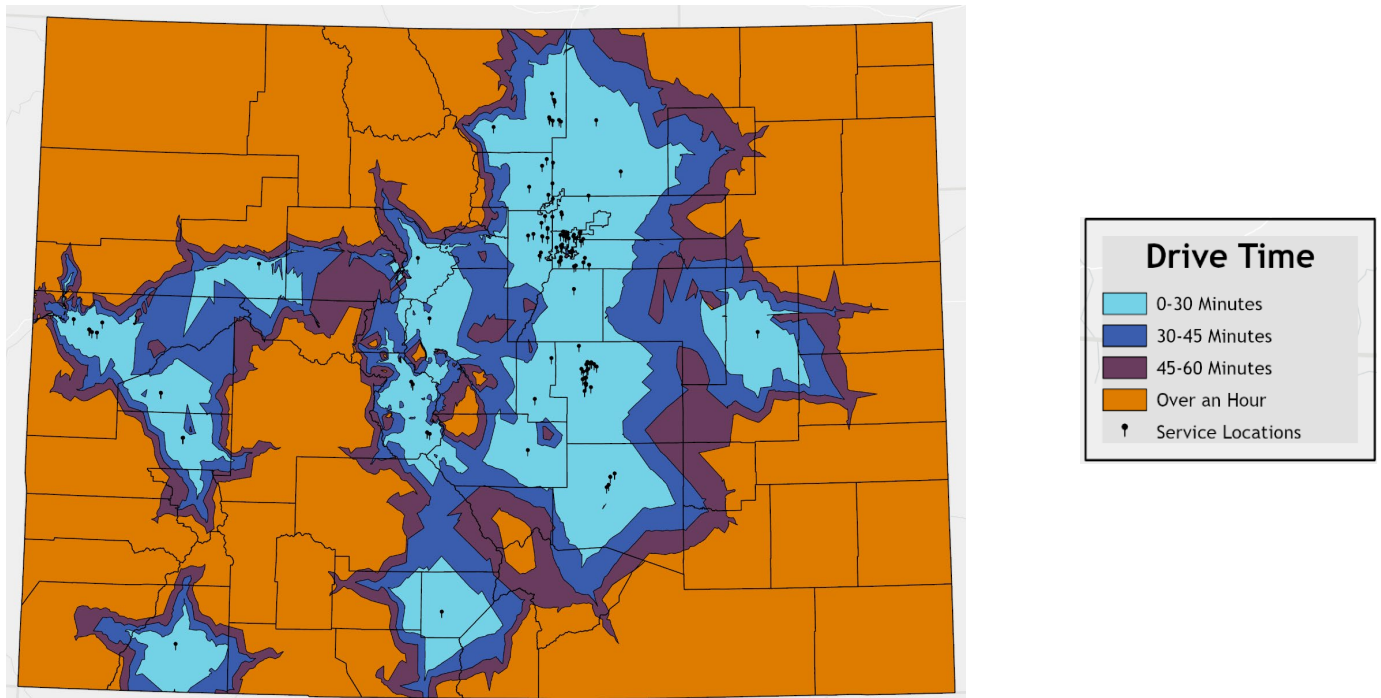


Figure 190.

### 10.16.5 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Physician Services (Sleep Study)** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 13% of providers statewide served Medicaid members.

### 10.16.6 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Physician Services (Sleep Study)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 191, statewide Medicaid utilization per utilizer per year for the **Physician Services (Sleep Study)** remained relatively stable from SFY 2021-22 to SFY 2023-24 and was slightly higher than other payers.

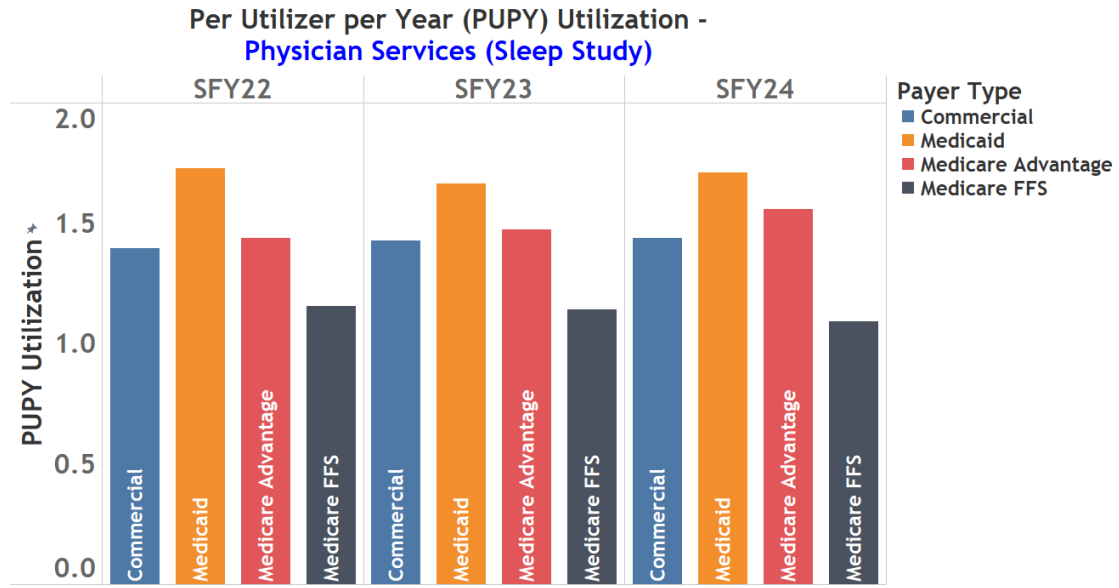


Figure 191.



## 10.17 Physician Services (Vaccines Immunizations)

### 10.17.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Vaccines Immunizations)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

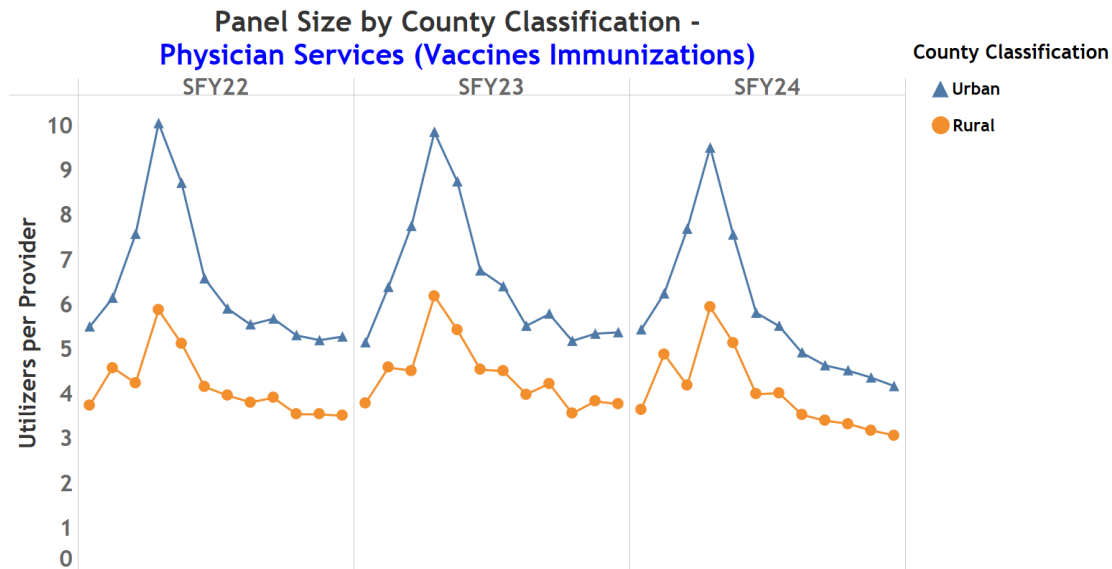


Figure 192.

As shown in Figure 192, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 4.18 and 10.06. In rural areas, this metric ranged from 3.08 to 6.19. In urban and rural regions, there was a noticeable spike pattern between October to November of each fiscal year before decreasing near the middle of the fiscal year.

Additionally, there was a decreasing trend noted towards the end of SFY 2023-24 across both regions due to decreasing utilizer numbers. When the panel size was further broken out by three age categories: young children (less than 5 years), school-aged children (5 - 18 years), and adults (over 18), all three age groups appeared to share a similar spike pattern across urban and rural regions. This can be explained by the disbursement of annual flu vaccines around October of each year.

The second part of the panel size analysis (Figure 193) considers the average number of utilizers per provider in each county for the **Physician Services (Vaccines and Immunizations)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

Panel Size by County (SFY24) - **Physician Services (Vaccines Immunizations)**

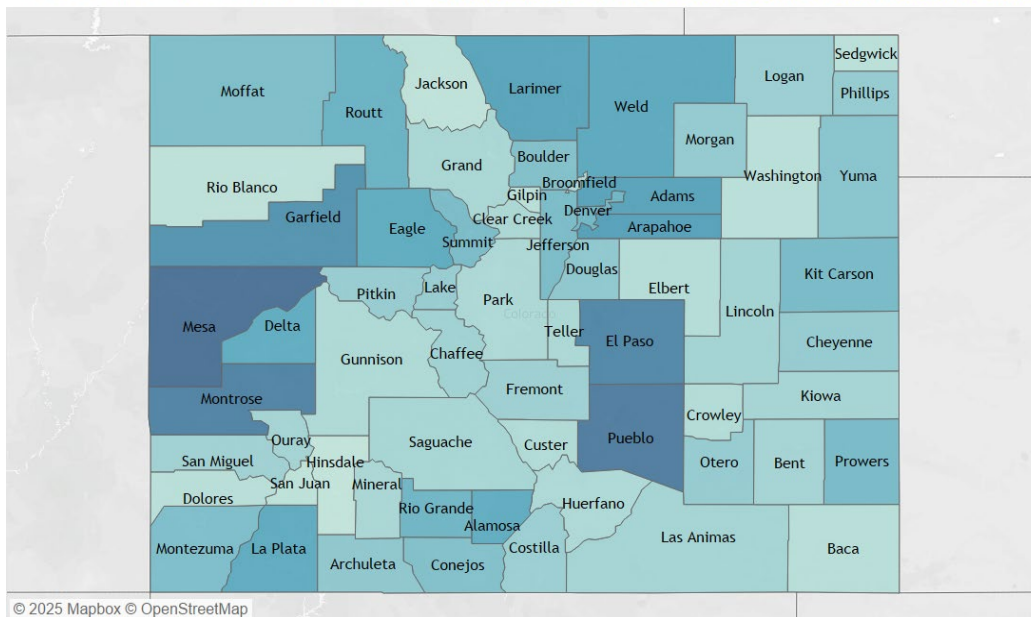


Figure 193.

As shown in Figure 193, in SFY 2023-24, the number of utilizers per provider was highest in Mesa County, followed by Pueblo County. Additionally, several other counties in Western Colorado and along the I-25 corridor and adjacent counties had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in Eastern and Central Colorado.

### 10.17.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Vaccines Immunizations)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

As shown in Figure 194, members in all 64 of Colorado's counties utilized services in this category. The penetration rate was highest in Douglas County, with nearby counties and several other counties throughout the state having moderate to high penetration rates. Meanwhile, counties with the lowest penetration rates varied in their locations with no distinct pattern of distribution.

**Penetration Rate (Utilization per 1000 Members) -  
Physician Services (Vaccines Immunizations)**

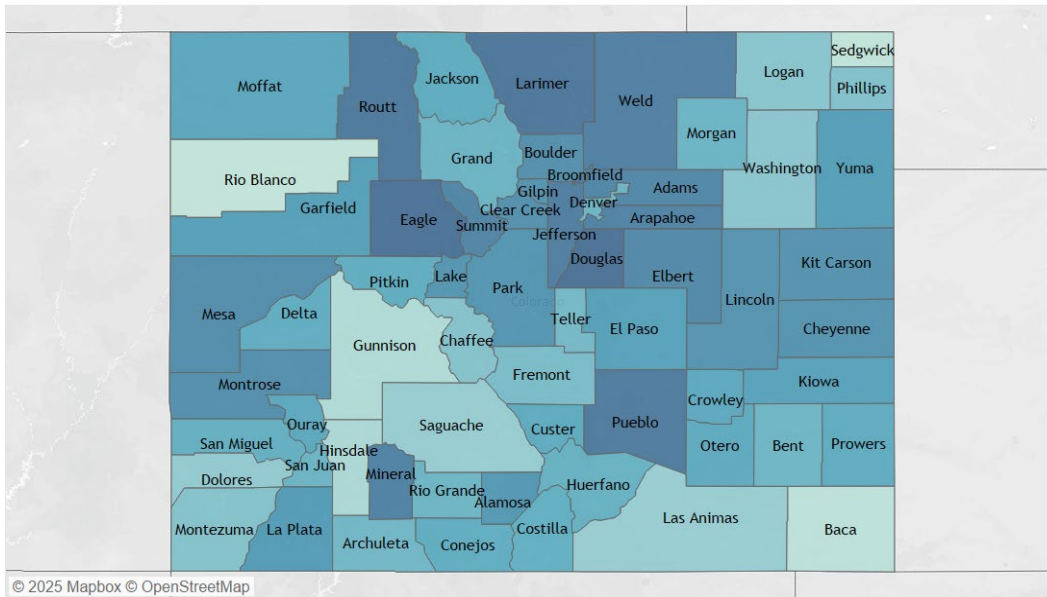


Figure 194.

### 10.17.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Vaccines Immunizations)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

**Special Providers - Physician Services (Vaccines Immunizations)**

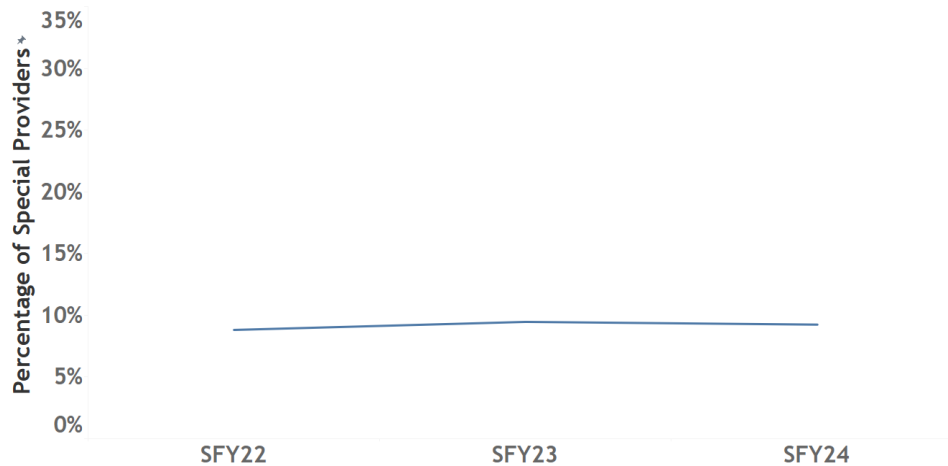


Figure 195.

As shown in Figure 195, the percentage of special providers remained stable from SFY 2021-22 to SFY 2023-24. Several providers had dramatic decreases in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased the number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24.

### 10.17.4 Provider Participation

The provider participation rate identifies the percentage of providers in Colorado that serve Medicaid members for the **Physician Services (Vaccines Immunizations)** category. In SFY 2023-24 (July 1, 2023 - June 30, 2024), 56% of providers statewide served Medicaid members.

### 10.17.5 Per Utilizer Per Year (PUPY) Expenditure

The PUPY Expenditure analysis shows the average total expenditures per utilizer per year for the **Physician Services (Vaccines Immunizations)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024) based on the line level claim data for each procedure code and/or revenue code. The PUPY expenditure metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

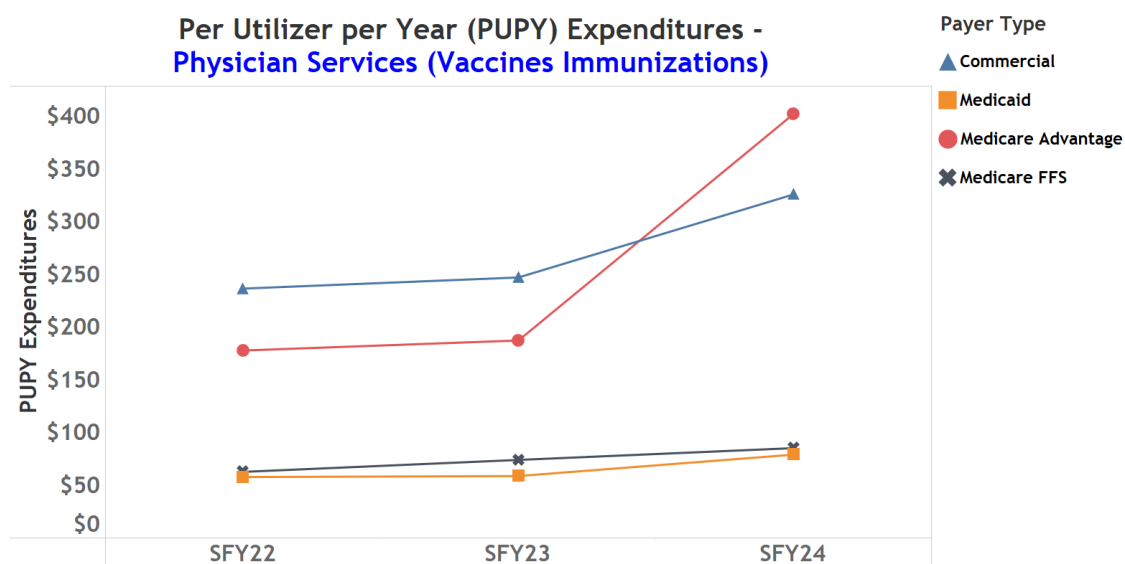


Figure 196.

As shown in Figure 196, statewide Medicaid expenditures per utilizer per year for the **Physician Services (Vaccines Immunizations)** category increased From SFY 2021-22 to SFY 2023-24, while being significantly lower than commercial payers and Medicare Advantage, and relatively close to Medicare FFS.

### 10.17.6 Per Utilizer Per Year (PUPY) Utilization

The PUPY utilization analysis refers to the average total utilization per utilizer per year for the **Physician Services (Vaccines Immunizations)** service category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024). The PUPY utilization metric is further stratified by payers (Colorado Medicaid, Commercial, Medicare FFS, Medicare Advantage), in order to compare these trends across payers.

As shown in Figure 197, statewide Medicaid utilization per utilizer per year for the **Physician Services (Vaccines Immunizations)** remained relatively stable from SFY 2021-22 to SFY 2023-

24 and was similar to other payers, although was exceeded by Medicare Advantage more notably in SFY 2023-24.

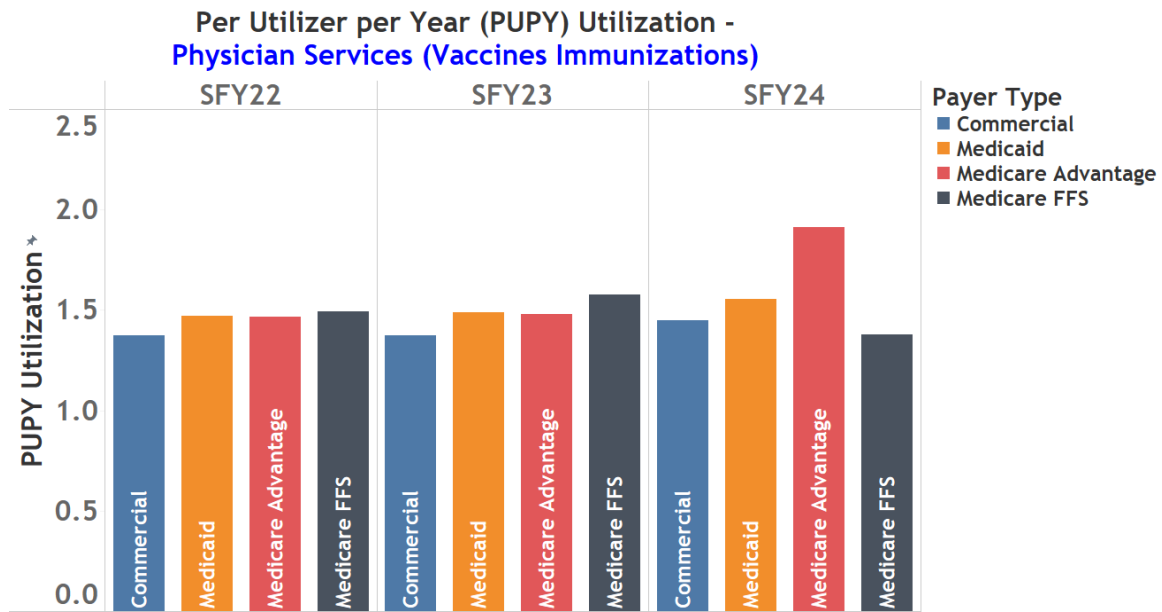


Figure 197.

## 10.18 Physician Services (Vascular)

### 10.18.1 Panel Size

The first part of the panel size analysis considers the number of utilizers per provider for the **Physician Services (Vascular)** category across urban and rural counties from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

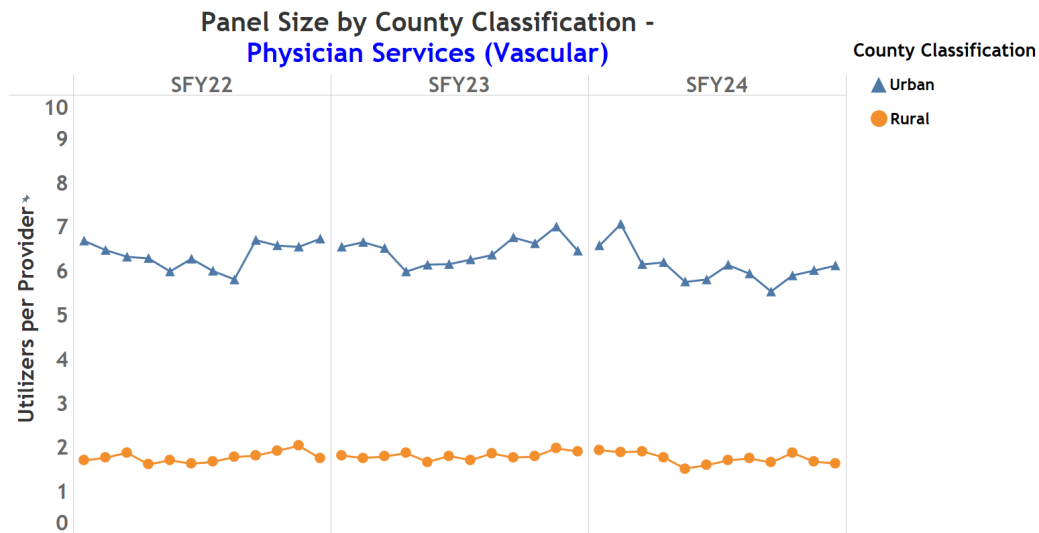


Figure 198.

As shown in Figure 198, in urban regions throughout SFY 2021-22 to SFY 2023-24, the utilizers per provider ranged between 5.54 and 7.07. In rural areas, this metric ranged from 1.53 to 2.05. The overall trend over these three years for each region type was relatively stable, although there did appear to be a slight decreasing trend in SFY 2023-24 in urban areas due to decreasing utilizer numbers, before it slightly rebounded at the end of the fiscal year.

The second part of the panel size analysis considers the average number of utilizers per provider in each county for the **Physician Services (Vascular)** service category during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher panel size.

As shown in Figure 199, in SFY 2023-24, the number of utilizers per provider was highest in El Paso County. Additionally, several other counties along the I-25 corridor and adjacent counties, had relatively moderate panel sizes. Meanwhile, counties with the lowest panel sizes were located throughout the state, with many being in the Western, Eastern, and South-Central parts of Colorado.

**Panel Size by County (SFY24) - Physician Services (Vascular)**

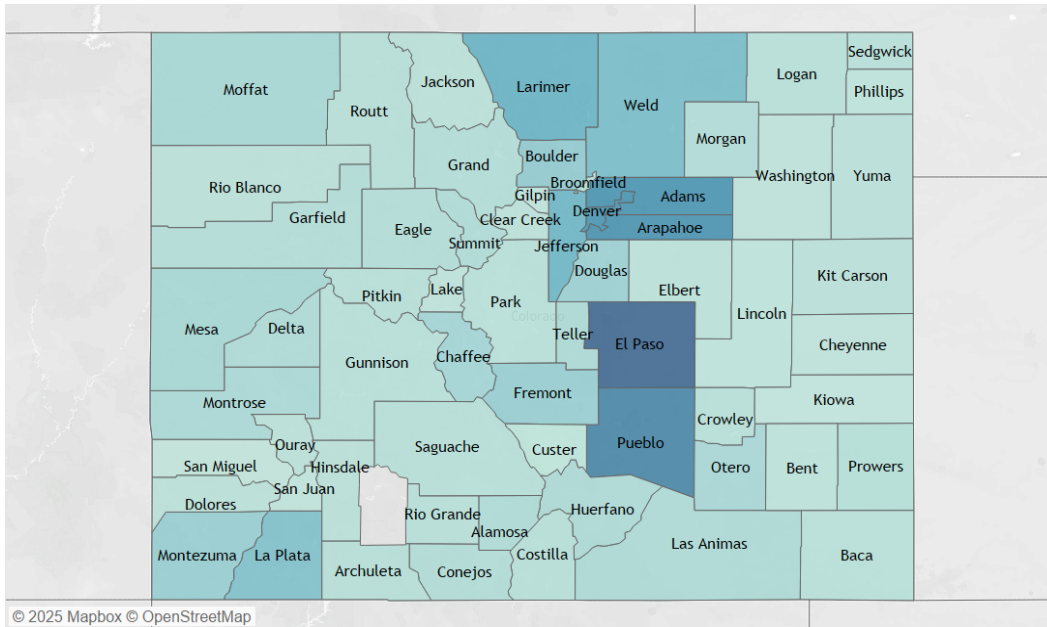


Figure 199.

## 10.18.2 Penetration Rate

The Penetration Rate analysis considers the number of members that utilized services in the **Physician Services (Vascular)** category per every 1000 Medicaid members for every county during SFY 2023-24 (July 1, 2023 - June 30, 2024). A darker blue color indicates a higher penetration rate.

**Penetration Rate (Utilization per 1000 Members) -  
Physician Services (Vascular)**

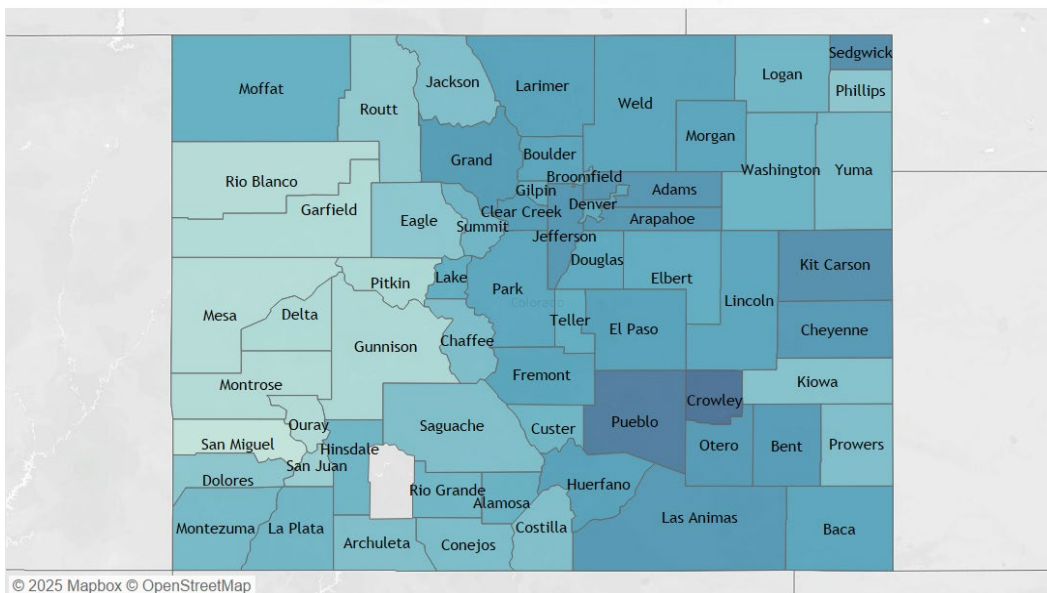


Figure 200.



As shown in Figure 200, members in 63 of Colorado’s 64 counties utilized services in this category. The penetration rate was highest in Crowley County with many counties throughout the state having relatively moderate penetration rates, except for counties on the Western Slope where penetration rate was lowest.

### 10.18.3 Special Provider

The special provider analysis considers the percentage of active providers who served only one Medicaid member for the **Physician Services (Vascular)** category from SFY 2021-22 to SFY 2023-24 (July 1, 2021 - June 30, 2024).

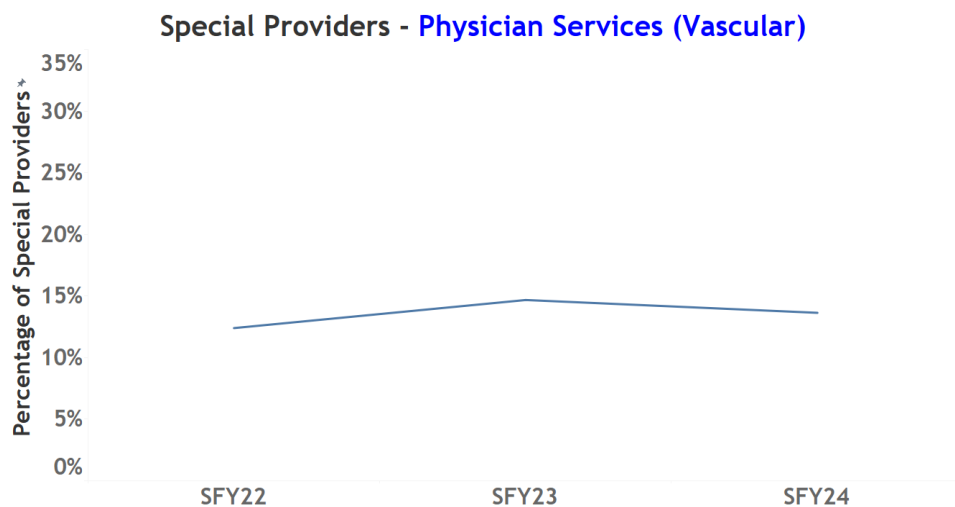


Figure 201.

As shown in Figure 201, the percentage of special providers remained stable, increasing slightly from SFY 2021-22 to SFY 2022-23, then decreasing slightly into SFY 2023-24. A few providers decreased in the number of members they served over these three fiscal years, resulting in just one member served in SFY 2023-24. Additionally, some providers increased in their number of members served from SFY 2021-22 to SFY 2022-23, before decreasing to just one member served in SFY 2023-24. After further investigation, it was determined that no policy, program, or provider enrollment reasons are associated with these declines in this service category.

### 10.18.4 Drive Time

The drive time metric calculates the percentage of Colorado Medicaid members that lived within certain drive time bands from SFY 2021-22 to SFY 2023-24 and the approximate time (in minutes) to reach **Physician Services (Vascular)** providers.

Figure 202 shows the drive time bands across the state wherein members reside, relative to **Physician Services (Vascular)** providers. From SFY 2021-22 to SFY 2023-24, 91.69% of total members resided 30 minutes or less from a provider; 4.62% of total members resided approximately 30-45 minutes; 2.24% of total members resided 45-60 minutes; and 1.45% of total members resided over an hour from a provider.

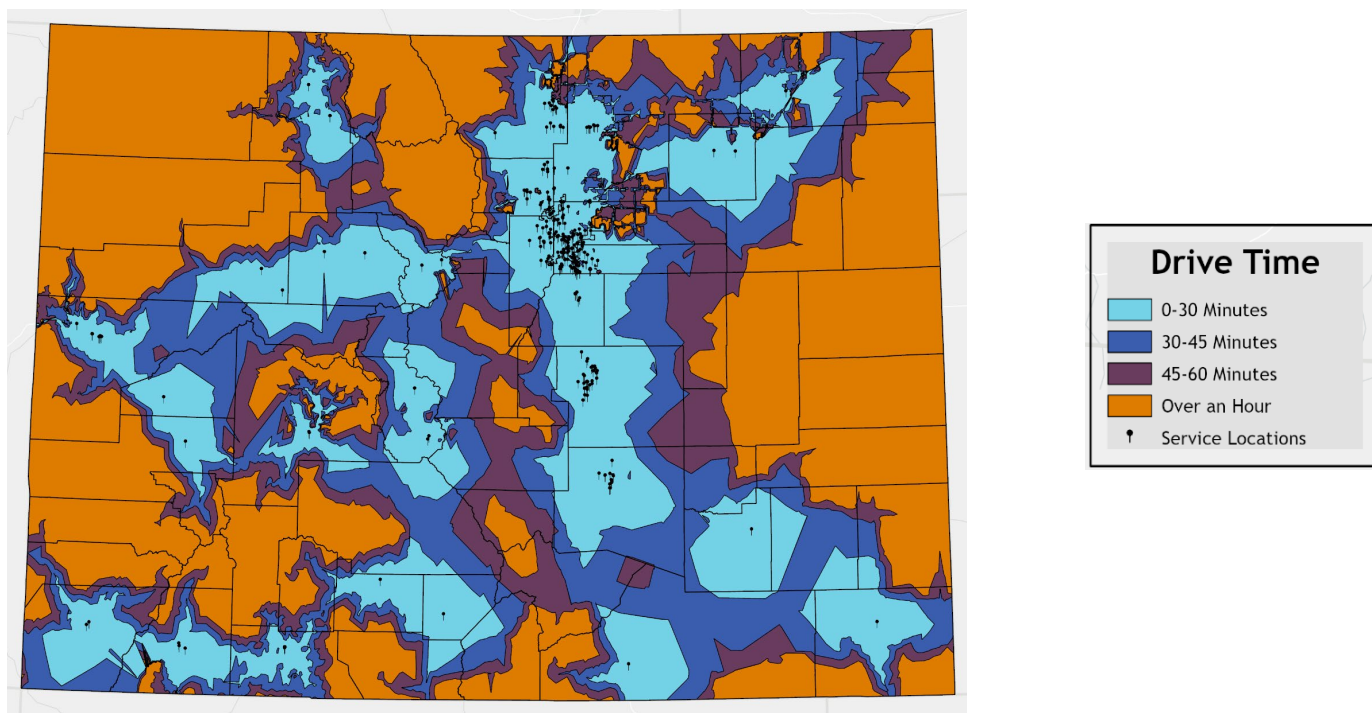


Figure 202.