Behavioral Health Provider Network Dashboard

Update: August 2022   *Reporting dates: July 2022*

The Department of Health Care Policy & Financing is committed to improving access to behavioral health services for Health First Colorado (Colorado's Medicaid program) members. Behavioral health services are managed by Regional Accountable Entities (RAEs). The organizations are contracted to build regional networks through credentialing and contracting with providers, and to ensure timely payment and responses to network providers. This dashboard includes network adequacy and accountability metrics for each region.

Behavioral Health Providers by Region Q4 FY 21-22
NOTE: This information is updated quarterly and reported in the RAEs' network adequacy deliverables. The numbers are validated by HSAG.

Region	Current BH Practitioners in Networks	# New BH Practitioners Contracted	# BH Practitioners that Closed or Left Network	# BH Practitioners Accepting New Members
1	3,360	26	15	3,341
2	3,308	155	138	3,308*
3	6,311	164	76	4,115
4	3,307	154	138	3,307*
5	6,283	164	83	4,093
6	4,294	218	27	3,881
7	4,294	218	27	3,881
DH	6,283	164	83	4,093

RAE 2 and RAE 4 only report contracted practitioners that accept new members, per their contracting requirements

RAE Metrics
The Department updated its contracts with the RAEs to improve turnaround times for enrollment, credentialing and contracting. These contracts and the new amendments are available on the [Health First Colorado Managed Care Contracts webpage](#).

Accountability Summary by Region
NOTE: This information is updated monthly.
Data reported through July 31, 2022

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7
% of providers credentialed and contracted within 90 days* *Contract change started in Jan. '22	100%	100%	100%	100%	100%	100%	100%
% of clean claims paid or adjudicated within 30 days	99.58%	99.36%	99.68%	99.88%	99.72%	99.97%	99.97%
Response to provider questions within 2 business days	100%	100%	100%	100%	100%	100%	100%

Top Reasons a Claim is Held Up or Denied
Providers submitting claims to their RAE must provide adequate documentation and fit within the contractual requirements. Below are common themes with technical claim denials (claims can also be denied if they do not meet medical necessity requirements).

- **Inaccurate billing:** Some providers work with a third party to handle billing; some of these billers may have incorrectly submitted claims. In this case, the RAE can work with the biller to help resolve billing inaccuracies.
- **Use of wrong modifier:** This is an example of inaccurate billing. Billing agents should work with the RAE to correct this mistake for proper claim processing.

Providers can find RAE contact information at [colorado.gov/hcpf/provider-help.](#) Fill out the [Health First Colorado Managed Care Provider Complaints form](#) if you have a concern or complaint about a certain region.