

Behavioral Health Provider Network Dashboard

Update: April 2025

Reporting period: March 2025

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 Q3 FY 24/25 (ending March 31, 2025)

NOTE: This information is extracted from the Quarterly Network Adequacy Deliverable report.

*Beginning Q1 SFY 24-25, The Department updated provider count reporting requirements, breaking out practitoner and facility information. Effective 7/1/25, CMHC provider type 35 is migrating to CSNP provider type 78, during this transition new and lost contracts counts will fluctuate.

	Contracted Network		New Contracts		Lost/Closed Contracts		Accepting New Members	
RAE/MCO	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility
RAE 1	6,035	609	508	9	295	76	5,598	311
RAE 2	4,846	880	242	66	88	16	4,846	880
RAE 3	9,506	482	255	1	151	111	8,472	447
RAE 4	4,847	880	242	66	88	16	4,847	880
RAE 5	9,517	482	252	1	140	111	8,463	482
RAE 6	8,416	551	562	2	207	8	8,120	551
RAE 7	8,416	551	562	2	207	8	8,120	551
Denver Health MCO	9,517	482	252	1	140	111	8,463	447
PRIME MCO	6,462	591	528	7	332	2	5,965	304

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 March 1, 2025 - March 31, 2025

	PRIME MCO (Medical, Surgical/Physical Health)	RAE 1	RAE 2	RAE 3	RAE 4	RAE 5	RAE 6	RAE 7
% of practitioners credentialed and contracted within 90 days	100% /100%	100%	100%	97%	100%	97%	100%	100%
Response to practitioner questions within 2 business days	100% /100%	100%	100%	100%	100%	100%	100%	100%
A.% of clean claims paid or adjudicated within 7 days	86.82%	90.75%	81.04%	91.80%	86.37%	93.73%	96.34%	96.345
B.% of clean claims paid or adjudicated within 14 days	5.19%	7.12%	4.17%	5.47%	3.48%	3.93%	2.87%	2.87%
C.% of clean claims paid or adjudicated within 30 days	7.90%	1.82%	14.35%	1.27%	9.89%	1.31%	0.72%	0.72%
Total % (Rows A+B +C)	99.91%	99.69%	99.56%	99.54%	99.74%	98.97%	99.93%	99.93%

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 <u>colorado.gov/hcpf/provider-help.</u> Fill out the <u>Health First Colorado Managed Care Provider Complaints select the Provider Escalation</u> <u>Request form</u> if you have a concern or complaint about a certain region.

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