



COLORADO

Department of Health Care
Policy & Financing

1570 Grant Street
Denver, CO 80203

Behavioral Health Provider Network Dashboard

Update: November 2022

Reporting dates: October 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	3,349
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 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 October 31, 2022

	RAE 1	RAE 2	RAE 3	RAE 4	RAE 5	RAE 6	RAE 7
% of practitioners credentialed and contracted within 90 days*Contract change started in Jan. '22	95%	92%	100%	92%	100%	100%	100%
Response to practitioner questions within 2 business days	100%	100%	100%	100%	100%	100%	100%
A. % of clean claims paid or adjudicated within 7 days	72.54%	78.17%	68.90%	82.56%	62.70%	16.75%*	16.75%*
B. % of clean claims paid or adjudicated within 8-14 days	19.97%	4.05%	23.87%	3.80%	29.58%	24.82%	24.82%
C. % of clean claims paid or adjudicated within 15-30 days	7.36%	16.16%	4.76%	12.73%	3.44%	57.80%	57.80%
Total % (rows A+B +C)	99.87%	99.38%	97.53%	99.09%	95.72%	99.37%	99.37%

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.
- ***CCHA's** claims processing system was capturing more claims than intended for manual review by their claims processor, instead of having these claims processed automatically. This caused a slowdown for processing and payment. Contractual monthly claim obligations were met, during this period.

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.

