



Behavioral Health Provider Network Dashboard

Update: October 2023

Reporting period: September 2023

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 22/23

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

Region	Current BH Practitioners in Networks	# New BH Practitioners Contracted	# BH Practitioners that Closed or Left Network	# BH Practitioners Accepting New Members
1	4,064	40	3	4,045
2*	3,480	200	83	3,480
3	8,300	260	109	8,181
4*	3,480	200	80	3,480
5	8,302	257	107	8,167
6	7,421	427	400	6,534
7	7,421	427	400	6,534
DH	8,302	257	107	8,167
PRIME	4,142	41	3	4,129

*RAEs 2 & 4 only contract with providers that accept new Medicaid members.

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 September 1, 2023 through September 30, 2023

	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	100%	91%	97%	91%	97%	100%	100%
Response to practitioner questions within 2 business days	100%	100%	100%	100%	100%	100%	100%
97. % of clean claims paid or adjudicated within 7 days	86.96%	78%	81.36%	82.45%	86.58%	78.92%	78.92%
B. % of clean claims paid or adjudicated within 14 days	7.89%	4.41%	8.05%	6.37%	5.14%	17.34%	17.34%
C. % of clean claims paid or adjudicated within 30 days	4.12%	17.23%	4.59%	10.87%	3.18%	3.59%	3.59%
Total % (Rows A+B +C)	96.97%	99.64%	94%	99.69%	94.90%	99.85%	99.85%

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 [the Provider Contact page](#). Fill out the [Health First Colorado Managed Care Provider Complaints form](#) if you have a concern or complaint about a certain region.

