

Behavioral Health and Integration Strategies Subcommittee

May 4, 2022

Presented by:
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Department of Health Care
Policy & Financing

Introductions



Our Mission

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.



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Objectives

- Housekeeping
- DOC metric update
- Behavioral health provider network discussion
- ACC 3.0 initial discussion
- Wrap up and next steps



Housekeeping

- Meeting Minutes: April
- COVID-19 Updates
- Meeting materials are posted on the BHIS Webpage



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COVID-19 Updates

- Public Health Emergency extended to July 15, 2022
- Federal Government has promised a 60 day warning
- Ongoing vaccine outreach and work to address disparities
- Planning for the end of the Public Health Emergency is ongoing. Resources can be found at <https://hcpf.colorado.gov/phe-planning>
- COVID related data: covid19.colorado.gov

DOC Metric and Goal Setting (Continued)

Matt Pfeifer - HCPF



No new DOC metric data this month

- The Department recently transitioned to a new process for RAEs/MCOs to submit claims which has delayed the metric calculations.
- The intention is to continue reporting the metric monthly.

Goal Setting Continued

- MAT services are generally included in the metric.
- Additional considerations
 - DOC population is increasing, releases continue to decrease.
 - DOC early releases as a response to COVID often included members with high BH needs and willingness to engage. Current releases seem less acute and less willing to engage.
 - The 91% ideal benchmark is based on DOC P code of 2 which is the lowest level of BH need (often based on history). Is that an appropriate benchmark?

Behavioral Health Provider Network Discussion

Matt Sundeen - HCPF



Number of Contracted Behavioral Health Practitioners Over Time

RAE Region	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20	Q2 19/20	Q3 19/20	Q4 19/20	Q1 20/21	Q2 20/21	Q3 20/21	Q4 20/21	Q1 21/22	Q2 21/22
R1	1065	1157	1162	1244	2352	2366	2912	3596	3616	3602	3626	3619	3293	3311
R2					1027	1968	2069	1805	1873	1918	1924	1912	3100	3166
R3	882	852	852	935	875	648	752	896	4761	6060	6010	6385	6118	7040
R4		610	609	668	1104	1969	2069	1804	1872	1917	1923	1911	3097	3164
R5	690	729	831	932	855	554	780	933	4,759	6,058	6,037	6206	6211	6983
R6	2312	3779	4366	6700	2734	2273	4639	5571	6610	6474	3607	3708	3921	4113
R7	2055	3647	4134	6470	7214	2218	4639	5571	6610	6474	3607	3708	3921	4113
Total	7004	10774	11954	16949	16161	11996	17860	20176	25342	26445	20697	27449	29661	31890

- There is some significant noise in this data as the Department, providers, RAEs and the EQRO (External Quality Review Organization) improved reporting accuracy.
- There is some double counting in this cumulative data as providers may, and often do, contract with multiple RAEs/MCOs.
- Blank cells are due to an excessive amount of duplicates in the data for the quarter.
- Denver Health MCO was removed for a more accurate comparison.



Discussion prompts

- How would you measure capacity?
- How appropriate/useful is the "raw" number of providers as measure?
- How does the issue of quality intertwine with capacity?
- If quality is considered, what is an appropriate way to measure quality?

ACC 3.0: Initial Discussion

Mark Queirolo - HCPF



Wrap Up and Next Steps

- Next meeting will be June 1, 2022



Questions?



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Thank you!



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