



**COLORADO**

**Department of Health Care  
Policy & Financing**

# Network Adequacy Quarterly Report Template

Managed Care Entity: *Rocky Mountain Health Plans – RAE*

Line of Business: *RAE Region 1*

Contract Number: *19-107507A14-B9*

Contact Name: *Jeremiah Fluke*

Report Submitted by: *Kendra Peters*

Report Submitted on: *01/31/2024*

Report due by *01/31/2024*, covering the MCE's network from *10/01/2023 – 12/31/2023*, FY24 Q2

*—Final Copy: September 2023 Release—*

1.

## Contents

<b>1. Instructions for Using the Network Adequacy Quarterly Report Template .....</b>	<b>1-1</b>
Definitions .....	1-1
Report Instructions .....	1-2
Questions .....	1-2
<b>2. Network Adequacy .....</b>	<b>2-1</b>
Establishing and Maintaining the MCE Network .....	2-1
<b>3. Network Changes and Deficiencies .....</b>	<b>3-1</b>
Network Changes .....	3-1
Inadequate Network Policies .....	3-2
<b>4. Appointment Timeliness Standards .....</b>	<b>4-1</b>
Appointment Timeliness Standards .....	4-1
<b>5. Time and Distance Standards .....</b>	<b>5-1</b>
Health Care Network Time and Distance Standards .....	5-1
<b>A Appendix A. Single Case Agreements (SCAs) .....</b>	<b>1</b>
<b>B Appendix B. Optional MCE Content .....</b>	<b>1</b>
Instructions for Appendices .....	1
Optional MCE Content .....	1
<b>C Appendix C. Optional MCE Content .....</b>	<b>1</b>

# 1. Instructions for Using the Network Adequacy Quarterly Report Template

This document contains the September 2023 release of a standardized template for use by all Colorado Medicaid or CHP+ Managed Care Entities (MCEs) for quarterly Network Adequacy (NA) reporting to the Colorado Department of Health Care Policy and Financing (HCPF). Each MCE should generate one quarterly NA report for each applicable line of business (i.e., CHP+ MCO, Medicaid MCO, or RAE); the report shall contain template elements applicable to the line of business. Network categories required for quarterly reporting are defined in the CO Network Adequacy Crosswalk Definitions (September 2023 version).

The practitioners, practice sites, and entities included in the quarterly NA report will include ordering, referring, and servicing contractors that provide care through a Colorado Medicaid or CHP+ MCE. To ensure consistent data collection across MCEs, each MCE must use this HCPF-approved report template (MS Word and MS Excel templates) to present the MCE’s quarterly NA report and data for the corresponding practitioners, practice sites, and entities. Report due dates will align with those outlined in the MCE’s contract, unless otherwise stated.

Fiscal Year Quarter Reported	Quarterly Reporting Deadline for HCPF	Reporting Date for Member and Network Files
FY 2023-24 Q1	October 2023	September 30, 2023
FY 2023-24 Q2	January 2024	December 31, 2023
FY 2023-24 Q3	April 2024	March 31, 2024
FY 2023-24 Q4	July 2024	June 30, 2024

## Definitions

- “MS Word template” refers to the *CO Network Adequacy\_Quarterly Report Word Template\_F2\_0923* document.
- “MS Word MCE Data Requirements” refers to the *CO Network Adequacy\_MCE\_DataRequirements\_F1\_0923* document that contains instructions for each MCE’s quarterly submission of member and network data.
- “MS Excel Geoaccess Compliance template” refers to the *CO<20##-##>\_NAV\_FY <#####> Q<#> QuarterlyReport\_GeoaccessCompliance\_<MCE Type>\_<MCE Name>* spreadsheet.
  - MCEs will use this file to supply county-level results from their geoaccess compliance calculations, including practitioner to member ratios and time/distance calculations.
- Use the Colorado county designations from the Colorado Rural Health Center to define a county as urban, rural, or frontier; the most recent county-level map is available at the following website:
  - <https://coruralhealth.org/resources/maps-resource>
  - Note: Urban counties with rural areas (e.g., Larimer County) should be reported with the rural counties and use rural time/distance standards.

- A “practice site” or “practice” refers to a physical healthcare facility at which the healthcare service is performed.
- A “practitioner” refers to an individual that personally performs the healthcare service, excluding single case agreement (SCA) practitioners.
- An “entity” refers to a facility-level healthcare service location (e.g., hospital, pharmacy, imaging service facility, and/or laboratory).

## Report Instructions

Each MCE should use this template to generate one quarterly NA report for each applicable line of business (i.e., CHP+ MCO, Medicaid MCO, and RAE); the report shall contain template elements applicable to the line of business. The MCE should update the highlighted, italicized data fields on the cover page of this template to reflect their contact information, contract information, and report dates associated with the current report submission.

This report template contains a comprehensive list of NA requirements for the CHP+ MCO, Medicaid MCO, and RAE lines of business. Each table in this MS Word document contains a header row which confirms the applicable line(s) of business for each response. The table below shows expected network categories by MCE type. The accompanying MS Excel spreadsheets contain tabs in which network data can be imported (e.g., member counts, ratio results, time/distance calculation results).

Network Category	CHP+ MCO	Medicaid MCO	RAE
Facilities (Entities) <i>(Hospitals, Pharmacies, Imaging Services, Laboratories)</i>	X	X	
Prenatal Care and Women’s Health Services	X	X	X
Primary Care Providers (PCPs)	X	X	X
Physical Health Specialists	X	X	
Behavioral Health Specialists <i>(RAEs’ network categories include Substance Use Disorder [SUD] treatment coverage that went into effect on 1/1/2021)</i>	X		X
Ancillary Physical Health Services <i>(Audiology, Optometry, Podiatry, Occupational/Physical/Speech Therapy)</i>	X	X	

## Questions

- Contact the MCE’s Department contract manager or specialist for data submission instructions and assistance with questions or access to HCPF’s FTP site.

## 2. Network Adequacy

### Establishing and Maintaining the MCE Network

Supporting contract reference: The MCE shall maintain a network that is sufficient in numbers and types of practitioners/practice sites to assure that all covered services to members will be accessible without unreasonable delay. The MCE shall demonstrate that it has the capacity to serve the expected enrollment in that service area.

- To count members, include each unique member enrolled with the MCE and line of business as of the last day of the measurement period (e.g., September 30, 2023, for the quarterly report due to the Department on October 31, 2023).
- To count practitioners/practice sites:
  - Include each unique practitioner/practice sites contracted with the MCE and line of business as of the last day of the measurement period (e.g., September 30, 2023, for the quarterly report due to the Department on October 31, 2023).
  - Define unique individual practitioners using Medicaid ID; a practitioner serving multiple locations should only be counted once for the count of practitioners and ratio calculations.

**Define unique practice sites by de-duplicating records by location, such that a single record is shown for each physical location without regard to the number of individual practitioners at the location.**

**Table 1A—Establishing and Maintaining the MCE Network: Primary Care Data**

Requirement	Previous Quarter		Current Quarter	
	Number	Percent	Number	Percent
<i>Sample</i>	0	0.0%	0	0.0%
<b>CHP+ MCO, Medicaid MCO, RAE</b>				
Total members	177,247	N/A	155,881	N/A
Total primary care practitioners (i.e., PROVCAT codes beginning with “PV” or “PG”)	1,834	N/A	913	N/A
Primary care practitioners accepting new members	1,671	91.11%	778	85.21%
Primary care practitioners offering after-hours appointments	297	16.19%	185	20.26%
New primary care practitioners contracted during the quarter	65	3.54%	51	5.59%
Primary care practitioners that closed or left the MCE’s network during the quarter	135	7.36%	29	3.18%

**Table 1B—Establishing and Maintaining the MCE Network: Primary Care Discussion**

Describe any barriers that affect the MCE’s ability to maintain a sufficient network in number and type of primary care practitioners to assure that all covered services will be accessible to members without unreasonable delay.

Describe how the MCE ensures members’ access to family planning services offered by any appropriate physical health practitioner, practice group, or entity.

If utilized, describe the impact telehealth services had in overcoming these barriers. Describe the methods used to monitoring the availability and usage of telehealth services.

**CHP+ MCO, Medicaid MCO, RAE**

Rocky Mountain Health Plans (RMHP) provides an inclusive network of Primary Care Medical Providers (PCMPs) in the Regional Accountable Entity (RAE) service area, with 193 PCMP service locations and a tiered structure for Per Member Per Month (PMPM) administrative payments and Key Performance Indicator (KPI) incentive payments. The structure ranges from Tier 1 practices that are open to all Medicaid Members and have accomplished the highest demonstrated practice transformation competencies through Tier 4 practices that meet minimum participation requirements. 41.45% of all practice sites are currently participating at Tier 1 or Tier 2.

RMHP met the time and distance requirements, ensuring accessibility and Member choice to primary care and family planning services, for 100% of network categories for MD, DO, NP, CNS in the 14 rural and 8 frontier counties of RAE Region 1. However, our system did not correctly categorize PA providers for physical health and currently shows that only 41% of the PA categories met the requirements. This discrepancy will be updated in the next quarterly reporting to accurately reflect our PA category for physical health.

RMHP continues to offer RAE, PRIME and CHP+ Members access to CirrusMD for RMHP. This is a free, text-based platform which allows Members to connect with providers 24/7 if they have a health question or if they are not sure if they should go to an urgent care or emergency room.

RMHP continues to track CirrusMD for RMHP registrations and encounters broadly as Medicaid category (which includes CHP+). In FY 23/24 Q2 there were 57 unique Member registrations and 109 CirrusMD encounters. This is a decrease from 118 unique Member registrations and 150 CirrusMD encounters in FY 23/24 Q1. RMHP acknowledges the decrease in utilization for CirrusMD but continues to work on aligning CirrusMD marketing strategy with UHC and will continue to monitor utilization.

RMHP and CirrusMD have a workflow by which CirrusMD providers make referrals to RMHP Care Coordinators when Members have follow-up needs, such as finding a primary care provider. The number of referrals from CirrusMD providers to RMHP care coordinators decreased slightly from last quarter to this quarter (1 in Q2 vs. 6 in Q1).

Additionally, RMHP has facilitated a Psychiatric Fellowship Training Program for Primary Care Providers in Region 1. This fellowship allows for primary care providers across the region to diagnose and provide medical management for Members and helps to improve psychiatric access. This is initially a 1-year program with potential to continue learning past year 1. The program is headed by a dual boarded physician in Internal Medicine and Psychiatry. Each fellow receives a mentor. RMHP plans to meet with the cohort monthly and the expectation is that these fellows will become and act as SMEs in their clinics, while also providing education in

Describe any barriers that affect the MCE’s ability to maintain a sufficient network in number and type of primary care practitioners to assure that all covered services will be accessible to members without unreasonable delay.

Describe how the MCE ensures members’ access to family planning services offered by any appropriate physical health practitioner, practice group, or entity.

If utilized, describe the impact telehealth services had in overcoming these barriers. Describe the methods used to monitoring the availability and usage of telehealth services.

**CHP+ MCO, Medicaid MCO, RAE**

their clinics to allow for a larger, clinic-wide effect. Practice/Providers participating are shown in the chart below.

Practice	Provider
Ute Mountain Ute	Melissa Churchill
Rangely Family Medicine	Kelsey Riggio, PA-C
Northwest Colorado Health	Dr. Diana Hornung
River Valley Family Health Centers	Rachel Stranathan, PA
Delta Health Family Medicine	Haley (Carlton) McCullough, PA
Gunnison Valley Health Family Physicians	Dr. Bill Gattis
Cedar Point Health	Dr. Stephanie Sargent
Grand River Primary Care	Dr. Megan Patrick
St. Mary's Integrated Addiction Medicine Clinic	Dr. Ryan Jackman
Telluride Medical Center - Dr. Grundy	Emily McGough, NP

**Table 2A—Establishing and Maintaining the MCE Network: Behavioral Health Data**

Requirement	Previous Quarter		Current Quarter	
	Number	Percent	Number	Percent
<i>Sample</i>	0	0.0%	0	0.0%
<b>CHP+ MCO, Medicaid MCO, RAE</b>				
Total members	177,247	N/A	155,881	N/A
Total behavioral health practitioners (i.e., PROVCAT codes beginning with “BV” or “BG”)	6,248	N/A	5,015	N/A
Behavioral health practitioners accepting new members	6,131	98.13%	4,840	96.51%
Behavioral health practitioners offering after-hours appointments	1,015	16.25%	708	14.12%
New behavioral health practitioners contracted during the quarter	568	9.09%	221	4.41%
Behavioral health practitioners that closed or left the MCE’s network during the quarter	35	0.56%	28	0.56%

**Table 2B—Establishing and Maintaining the MCE Network: Substance Use Disorder (SUD) Treatment Facilities**

Requirement	Previous Quarter	Current Quarter
	Number	Number
<i>Sample</i>	0	0
<b>RAE</b>		
Total SUD treatment facilities offering American Society of Addiction Medicine (ASAM) Level 3.1 services	15	12
Total SUD treatment facilities offering ASAM Level 3.3 services	1	1
Total SUD treatment facilities offering ASAM Level 3.5 services	13	12
Total SUD treatment facilities offering ASAM Level 3.7 services	8	6
Total SUD treatment facilities offering ASAM Level 3.2 WM (Withdrawal Management)	15	12
Total SUD treatment facilities offering ASAM Level 3.7 WM services	13	12



**Table 2C—Establishing and Maintaining the MCE Network: Behavioral Health Discussion**

Describe any barriers that affect the MCE’s ability to maintain a sufficient network in number and type of behavioral health practitioners to assure that all covered services will be accessible to members without unreasonable delay. If your network includes out-of-state practitioners serving members enrolled with the MCE, please describe.

If utilized, describe the impact telehealth services had in overcoming these barriers. Describe the methods used to monitoring the availability and usage of telehealth services.

For RAEs, describe any barriers to incorporating the ASAM levels of care for the SUD treatment practitioners, practice sites, and entities. Describe the methods used to monitor the available SUD treatment bed at each ASAM level.

**CHP+ MCO, Medicaid MCO, RAE**

Rocky Mountain Health Plans provides a strong network of behavioral health providers to our RAE Membership. RMHP is always open to expanding the network by enrolling new Behavioral Health and SUD providers as they meet our credentialing and contract requirements.

RMHP met the time and distance requirements, ensuring accessibility and Member choice to behavioral health (non-SUD) services, for approximately 98% of network category/county/urbanicity combinations in the 14 *rural* and 8 *frontier* counties of RAE Region 1. SUD network categories are met for 39.45% of network category/county/urbanicity combinations from a state-wide perspective. The *Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals* network category did not meet time and distance requirements in all 22 RAE Region 1 counties, as there is only 1 Psychiatric Hospital on the Western Slope (Mesa County).

In addition to contracting efforts, RMHP’s Care Coordination and Utilization Management teams maintain relationships with SUD providers within the region and other portions of the State to find Members the appropriate ASAM level of care when needed. Most identified deficiencies are within the *SUD treatment facility* network category across all ASAM levels. This overall category is met for only 22% statewide. RMHP contracts with all SUD facilities within RAE Region 1. RAE Region 1 is comprised solely of *rural* and *frontier* counties, all of which fall within the geographic designation for [Mental Health Professional Shortage Areas](#) (HPSAs). Any member who falls outside of the 30/60 minute or 30/60 miles distance requirement makes it appear we are not meeting these requirements.

Overall behavioral health claims for RAE Members decreased by 4% from last quarter; telehealth claims decreased by 4.7% as compared to last quarter (as percentage of all claims). Telehealth services represented 32.85% of claims this quarter, as compared to 33.12% of overall behavioral health claims last quarter.

Additionally, RMHP has contracted with the Foundry Treatment Center Steamboat Springs as they recently became a Medicaid provider. Through this partnership, the Foundry Treatment Center provides a residential program for men and an intensive outpatient telehealth treatment program.

**Table 3A—Establishing and Maintaining the MCE Network: Specialty Care Data**

Requirement	Previous Quarter		Current Quarter	
	Number	Percent	Number	Percent
<i>Sample</i>	0	0.0%	0	0.0%
<b>CHP+ MCO, Medicaid MCO</b>				
Total members	n/a	N/A	n/a	N/A
Total specialty care practitioners (i.e., PROVCAT codes beginning with “SV” or “SG”)	n/a	N/A	n/a	N/A
Specialty care practitioners accepting new members	n/a	n/a	n/a	n/a
Specialty care practitioners offering after-hours appointments	n/a	n/a	n/a	n/a
New specialty care practitioners contracted during the quarter	n/a	n/a	n/a	n/a
Specialty care practitioners that closed or left the MCE’s network during the quarter	n/a	n/a	n/a	n/a

**Table 3B—Establishing and Maintaining the MCE Network: Specialty Care Discussion**

<p>Describe any barriers that affect the MCE’s ability to maintain a sufficient network in number and type of specialty care practitioners to assure that all covered services will be accessible to members without unreasonable delay.</p> <p>If utilized, describe the impact telehealth services had in overcoming these barriers. Describe the methods used to monitoring the availability and usage of telehealth services.</p>
<b>CHP+ MCO, Medicaid MCO</b>
<i>N/A</i>

### 3. Network Changes and Deficiencies

#### Network Changes

Supporting contract reference: The MCE shall report in writing to the Department, all changes or deficiencies in MCE Networks related to access to care.

**Table 4–Network Changes: Discussion**

<p>If the MCE experienced an unexpected or anticipated material change to the network or a network deficiency that could affect service delivery, availability, or capacity within the provider network, describe the change and state whether the MCE notified the Department, in writing, within five (5) business days of the change.</p> <p><b>Note:</b> If the MCE experienced an unexpected or anticipated material change to the network or a network deficiency that could affect service delivery, availability, or capacity within the provider network during the quarter prior to the measurement period, the MCE’s response should include a description of the actions taken by the MCE during the current measurement period to address the deficiency.</p>
<b>CHP+ MCO, Medicaid MCO, RAE</b>
<i>N/A</i>

**Table 5–CHP+ MCO Network Volume Changes and Notification: Discussion**

<p>If the MCE experienced at least a five percent (5%) increase or decrease in its network in a thirty (30) calendar day period, describe the change and answer the following questions:</p> <p>Did the MCE notify the Department, in writing, within ten (10) business days of the change?</p> <p>Was the change due to a practitioner/practice site/entity’s request to withdraw; was the change due to the MCE’s activities to obtain or retain NCQA accreditation?</p> <p>Was the change due to a practitioner/practice site/entity’s failure to receive credentialing or re-credentialing from the MCE?</p>
<b>CHP+ MCO</b>
<i>N/A</i>

## Inadequate Network Policies

Supporting contract reference: If the MCE fails to maintain an adequate network that provides Members with access to PCPs within a county in the MCE’s Service Area, the Department may designate that county as a mixed county for the purpose of offering the option of an HMO or the State’s self-funded network to eligible Members by providing the MCE a thirty (30) calendar day written notice.

**Table 6—CHP+ MCO Inadequate Access to PCPs: Discussion**

<p><b>Did the MCE fail to maintain an adequate network that provides members with access to PCPs within a county in the MCE’s service area?</b></p> <p><b>If the MCE answered “yes”, did the Department designate that county as a mixed county for the purpose of offering the option of an HMO or the State’s self-funded network to eligible members?</b></p>
<b>CHP+ MCO</b>
<i>N/A</i>

**Table 7—CHP+ MCO Discontinue Services to an Entire County: Discussion**

<p><b>Did the MCE discontinue providing covered services to members within an entire county within the MCE’s service area?</b></p> <p><b>If the MCE answered “yes”, did the MCE provide no less than sixty (60) calendar days prior written notice to the Department of the MCE’s intent to discontinue such services?</b></p>
<b>CHP+ MCO</b>
<i>N/A</i>

**Table 8—CHP+ MCO Provider Network Changes: Discussion**

<p><b>Did the MCE experience an unexpected or anticipated material change to the network or a network deficiency that could affect service delivery, availability or capacity within the provider network?</b></p> <p><b>If the MCE answered “yes”, did the MCE notify the Department, in writing, of the change?</b></p>
<b>CHP+ MCO</b>
<i>N/A</i>

## 4. Appointment Timeliness Standards

### Appointment Timeliness Standards

Supporting contract reference: The MCE shall ensure its network is sufficient so that services are provided to members on a timely basis.

**Table 9—Physical Health Appointment Timeliness Standards**

Describe the method(s) used by the MCE to monitor its contract’s timeliness requirements for members’ access to physical health services. Describe findings specific to the current reporting period.																																												
<b>CHP+ MCO, Medicaid MCO, RAE</b>																																												
<p>RMHP Provider Network Management (PNM) staff distributes Appointment Wait Time Surveys to Members throughout all lines of business who received services from primary care practitioners, high-volume specialists, and high-impact specialists on a quarterly basis. The purpose of these surveys is to determine if appointment availability is sufficient for Members based on performance standards defined by the Division of Insurance (DOI), Colorado Department of Health Care Policy and Financing (HCPF), as well as the National Committee for Quality Assurance (NCQA).</p> <p>In 2023, Cotiviti (previously Eliza) took over the survey process by utilizing IVR calls to the entire universe of Member claims activity whereas RMHP previously used an email survey process to survey Members quarterly and surveyed only a small sample of claims. In addition to the new survey distribution process, frequency of surveys, and increase in survey recipients, a \$10 gift card will be provided to each Member who completes the survey.</p> <p>There was a total of 24,344 surveys sent by Cotiviti for 1/1/2023 to 6/30/23 which includes PRIME, RAE, and CHP+ Members for PH, BH &amp; specialty categories. The response rate for surveying members remained at 9-11% rate for all categories surveyed. Per HCPF request, we have provided a more detailed analysis of the survey results, as shown below. Survey data for period of 7/1/23 to 12/31/23 will be presented in the next quarterly report submission.</p> <p><b>Primary Care Provider Surveys</b></p> <p>Were you able to get an appointment with your primary care practitioner within seven days of contacting the doctor’s office or clinic?</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: #d3d3d3;"> <th>Product</th> <th>Total Number of Responses</th> <th>Product Line</th> <th>Number of Responses</th> <th>% of Total Number of Responses</th> <th>YES</th> <th>NO</th> <th>Goal</th> <th>Performance by Product Line</th> <th>Performance by Product</th> <th>Goal Met?</th> </tr> </thead> <tbody> <tr> <td rowspan="3">Medicaid</td> <td rowspan="3">2,106</td> <td>PRIME</td> <td>1,773</td> <td>84%</td> <td>1,455</td> <td>318</td> <td rowspan="3">≥90%</td> <td>82.1%</td> <td rowspan="3">83.3%</td> <td rowspan="3">N</td> </tr> <tr> <td>RAE Region 1</td> <td>■</td> <td>■</td> <td>■</td> <td>■</td> <td>■</td> </tr> <tr> <td>CHP+</td> <td>325</td> <td>15%</td> <td>293</td> <td>32</td> <td>90.1%</td> </tr> </tbody> </table> <p>Members were asked if they were able to get an appointment with their primary care practitioner within 7 days of contacting the doctor’s office or clinic and a total of 2,106 responses were received. Of the 2,106 responses, 84% or 1,773 in total were from PRIME Members, who reported that, 82.1% of the time, ‘yes,’ they were able</p>											Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?	Medicaid	2,106	PRIME	1,773	84%	1,455	318	≥90%	82.1%	83.3%	N	RAE Region 1	■	■	■	■	■	CHP+	325	15%	293	32	90.1%
Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?																																		
Medicaid	2,106	PRIME	1,773	84%	1,455	318	≥90%	82.1%	83.3%	N																																		
		RAE Region 1	■	■	■	■		■																																				
		CHP+	325	15%	293	32		90.1%																																				

**Describe the method(s) used by the MCE to monitor its contract's timeliness requirements for members' access to physical health services. Describe findings specific to the current reporting period.**

**CHP+ MCO, Medicaid MCO, RAE**

to get an appointment within 7 days. Only [REDACTED] RAE Members responded to this question, with [REDACTED] of the respondents answering yes. CHP+ responses were 15% of the total responses received or 325 responses in total. CHP+ had the highest performance rate with 90.1% of CHP+ Members reporting that they were able to get an appointment within 7 days.

Were you able to be seen for an urgent care appointment within 24 hours of contacting the organization?

Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?
Medicaid	122	PRIME	92	[REDACTED] %	[REDACTED]	[REDACTED]	100%	87.0%	88.5%	N
		RAE Region 1	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]		[REDACTED]		
		CHP+	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]		[REDACTED]		

Members were asked if they were able to be seen for an urgent care appointment within 24 hours of contacting the organization. 122 total responses were received for this question and of those, 75% or 92 responses came from PRIME Members who responded with 87% of the time, 'yes,' they were seen within 24 hours. CHP+ Membership accounted for [REDACTED] % of total responses for [REDACTED] responses in total, with 93.3% responses stating 'yes,' they were able to be seen for an urgent care appointment within 24 hours. [REDACTED] responses from RAE to this question.

Did you receive an after-hours phone call from an appropriate practitioner within an hour of contacting the organization?

Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?
Medicaid	206	PRIME	164	80%	118	46	≥90%	72.0%	73.3%	N
		RAE Region 1	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]		[REDACTED]		
		CHP+	40	19%	[REDACTED]	[REDACTED]		[REDACTED]		

There was a total of 206 respondents when Members were asked if they received an after-hours phone call from an appropriate practitioner within an hour of contacting the organization. Of the 206 total respondents, 80%, or 164 of them were PRIME Members, with 72% responding that they did receive an after-hours phone call within the hour. [REDACTED] RAE Members responded to this question and the results were split, for a [REDACTED] performance rate. CHP+ had 40 respondents for 19% of all total responses and [REDACTED] of those responded with 'yes,' they did receive an after-hours phone call from the practitioner within the hour.

**Specialists Surveys**

Including: Radiology, Ophthalmology, Physical Therapy, Pulmonology, Oncology, Cardiology and Neurology

Were you able to be seen for a non-urgent specialty care appointment within 60 calendar days of contacting the organization?

**Describe the method(s) used by the MCE to monitor its contract’s timeliness requirements for members’ access to physical health services. Describe findings specific to the current reporting period.**

**CHP+ MCO, Medicaid MCO, RAE**

Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?
Medicaid	610	PRIME	573	94%	522	51	≥90%	91.0%	91.3%	Y
		RAE Region 1	█	█				-		
		CHP+	37	6%	█	█		█		

For non-urgent specialty care, Members were asked if they were able to be seen for a non-urgent specialty care appointment within 60 calendar days within contacting the organization and 610 responses were received. PRIME Members were 94% of the respondents with a total of 573 responses and 522 of them or 94% saying that they were able to get an appointment within 60 calendar days. There were █ responses from RAE. 6% of the total respondents were CHP+ Members for a total of 37 responses. Of the 37 responses, █ said that they were able to get an appointment within 60 calendar days.

Were you able to be seen for an urgent specialty care appointment within 24 hours of contacting the organization?

Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?
Medicaid	0	PRIME	-	-	-	-	100%	-	-	N/A
		RAE Region 1	-	-	-	-		-		
		CHP+	-	-	-	-		-		

There were no responses to the urgent specialty care appointment question.

**Table 10–Behavioral Health Appointment Timeliness Standards**

**Describe the method(s) used by the MCE to monitor its contract’s timeliness requirements for members’ access to behavioral health services. Describe findings specific to the current reporting period.**

**CHP+ MCO, RAE**

RMHP Provider Network Management (PNM) staff distributes Appointment Wait Time Surveys to Members throughout all lines of business who received services from primary care practitioners, high-volume specialists, and high-impact specialists on a quarterly basis. The purpose of these surveys is to determine if appointment availability is sufficient for Members based on performance standards defined by the Division of Insurance (DOI), Colorado Department of Health Care Policy and Financing (HCPF), as well as the National Committee for Quality Assurance (NCQA).

In 2023, Cotiviti (previously Eliza) took over the survey process by utilizing IVR calls to the entire universe of Member claims activity whereas RMHP previously used an email survey process to survey Members quarterly

**Describe the method(s) used by the MCE to monitor its contract's timeliness requirements for members' access to behavioral health services. Describe findings specific to the current reporting period.**

**CHP+ MCO, RAE**

and surveyed only a small sample of claims. In addition to the new survey distribution process, frequency of surveys, and increase in survey recipients, a \$10 gift card will be provided to each Member who completes the survey.

There was a total of 24,344 surveys sent by Cotiviti for 1/1/2023 to 6/30/23 which includes PRIME, RAE, and CHP+ Members for PH, BH & specialty categories. The response rate for surveying members remained at 9-11% rate for all categories surveyed. Per HCPF request, we have provided a more detailed analysis of the survey results, as shown below. Survey data for period of 7/1/23 to 12/31/23 will be presented in the next quarterly report submission.

**Behavioral Health Surveys**

Were you able to get an appointment with your behavioral healthcare practitioner within seven days of contacting the doctor's office or clinic?

Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?
Medicaid	205	PRIME	199	97%	165	34	≥90%	83.0%	83.4%	N
		RAE Region 1	█	█ %	█	█		100.0%		
		CHP+	█	█ %	█	█		100.0%		

Members were asked if there were able to get an appointment with their behavioral health practitioner within 7 days of contacting the doctor's office or clinic and there were a total of 205 responses. Of the total responses, 97% or 199 total responses came from PRIME Members. Out of the PRIME Member responses, 165 or 83% responded that 'yes,' they were able to get an appointment within 7 days. There was 1 response from RAE Members 5 responses from CHP+ Members to this question, all responding with 'yes.'

Were you able to get a follow-up appointment with your behavioral healthcare practitioner within seven days of contacting the doctor's office or clinic?

Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?
Medicaid	157	PRIME	155	99%	█	█	≥90%	84.5%	84.7%	N
		RAE Region 1	█	█ %	█	█		100.0%		
		CHP+	█	█ %	█	█		100.0%		

157 Member responses were received when asked if the Member was able to get a follow-up appointment with their behavioral healthcare practitioner within 7 days of contacting the doctor's office or clinic. All but █ responses came from PRIME for a total of 155 responses or 99%. Of the PRIME responses, 84.5% or 131 responded that they were able to get a follow-up appointment within 7 days of contacting the doctor's office. There was █ response from RAE and █ response from CHP+, █ responses were 'yes.'



**Describe the method(s) used by the MCE to monitor its contract's timeliness requirements for members' access to behavioral health services. Describe findings specific to the current reporting period.**

**CHP+ MCO, RAE**

Were you able to be seen for an urgent care appointment within 24 hours of contacting the organization?

Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?
Medicaid	0	PRIME	-	-	-	-	100%	-	N/A	N/A
		RAE Region 1	-	-	-	-		-		
		CHP+	-	-	-	-		-		

There were no responses to the urgent care behavioral health appointment question from any line of business.

Were you able to obtain emergency behavioral healthcare in person within one hour/two hours of contact?

Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?
Medicaid	0	PRIME	-	-	-	-	100%	-	-	N/A
		RAE Region 1	-	-	-	-		-		
		CHP+	-	-	-	-		-		

There were no responses to the emergency care behavioral health appointment question from any line of business.

Were you offered a follow-up appointment with a behavioral healthcare practitioner within seven days of discharge?

Product	Total Number of Responses	Product Line	Number of Responses	% of Total Number of Responses	YES	NO	Goal	Performance by Product Line	Performance by Product	Goal Met?
Medicaid	█	PRIME	█	█ %	█	█	≥90%	100%	100.0%	Y
		RAE Region 1	0	0	0	0		-		
		CHP+	0	0	0	0		-		

Members were asked if they were offered a follow-up appointment with a behavioral healthcare practitioner within seven days of discharge and there was a total of █ PRIME 'yes' responses to this question, for 100% performance rate.

## 5. Time and Distance Standards

### Health Care Network Time and Distance Standards

Supporting contract reference: The MCE shall ensure that its network has a sufficient number of practitioners, practice sites, and entities who generate billable services within their zip code or within the maximum distance for their county classification. The MCE must use GeoAccess or a comparable service to measure the travel time and driving distance between where members live and the physical location of the practitioners/practice sites/entities in the MCE's Region.

Enter time and distance compliance results (e.g., “Met” or “Not Met”) in the MS Excel template. Use Tables 11, 12, and 13 for additional relevant information regarding the MCE’s compliance with time and distance requirements in its contracted counties, including region-specific contracted counties for RAEs’ behavioral health networks. Geographic regions refer to the areas in which members reside, as members may travel outside their county of residence for care. For physical health time and distance requirements, MCEs are only required to report compliance with minimum time and distance requirements for members residing inside the MCE’s contracted counties. For statewide behavioral health time and distance requirements, MCEs are required to report compliance with minimum time and distance requirements for all members regardless of county residence.

- CHP+ MCO defines “child members” as 0 through the month in which the member turns 19 years of age.
- CHP+ MCO defines “adult members” as those over 19 years of age (beginning the month after the member turned 19 years of age).
- Medicaid MCO and RAE define “child members” as under 21 years of age.
- Medicaid MCOs and RAEs define “adult members” as those 21 years of age or over.

There are two levels of primary care practitioners: primary practitioners that can bill as individuals (e.g., MDs, DOs, NPs, and CNS’) and mid-level practitioners that cannot bill as individuals (e.g., PAs); each type of practitioner has its own row in the MS Excel template tabs for time/distance reporting.

**A practitioner/practice site/entity should only be counted one time in the MCE’s data submission for each associated network category (PROVCAT code). If a practitioner provides primary care for adult and pediatric members at a specific location, count the practitioner once under the Adult Primary Care Practitioner PROVCAT code, once under the Pediatric Primary Care Practitioner PROVCAT code, and once under the Family Practitioner PROVCAT code.** For example, a primary care nurse practitioner (NP) that serves adult and pediatric members can be categorized with the PV063, PV064, and PV065 PROVCAT codes. That practitioner will then be counted for the minimum network standards for pediatric primary care practitioner (NP) (PV064 and PV065); adult primary care practitioner (NP) (PV063 and PV064); and family practitioner (NP) (PV064).

**Table 11–Urban Health Care Network Time and Distance Standards: Discussion**

Present detailed time/distance results for members residing in Colorado’s urban counties using the accompanying MS Excel workbook template.

List the specific contracted urban counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted urban Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

RMHP’s service area counties are all designated as *rural* or *frontier*, however; RMHP has Region 1 attributed Members residing in some urban counties such as in the Denver Metro area. RMHP contracts with numerous providers in those areas although they may not cover all services. RMHP enters into single case agreements with providers in these areas when needed.

The table below shows membership access by county by network category for the urban analysis.

County	County Class	Provider Network Category	% with Access
Adams	Urban	General Behavioral Health	99.60%
Arapahoe	Urban	General Behavioral Health	99.70%
Boulder	Urban	General Behavioral Health	100.00%
Broomfield	Urban	General Behavioral Health	100.00%
Clear Creek	Urban	General Behavioral Health	100.00%
Denver	Urban	General Behavioral Health	100.00%
Douglas	Urban	General Behavioral Health	100.00%
El Paso	Urban	General Behavioral Health	100.00%
Elbert	Urban	General Behavioral Health	100.00%
Gilpin	Urban	General Behavioral Health	100.00%
Jefferson	Urban	General Behavioral Health	100.00%
Pueblo	Urban	General Behavioral Health	100.00%
Teller	Urban	General Behavioral Health	100.00%
Weld	Urban	General Behavioral Health	99.80%
Adams	Urban	General Psychiatrists and other Psychiatric Prescribers	99.40%
Arapahoe	Urban	General Psychiatrists and other Psychiatric Prescribers	99.50%
Boulder	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%
Broomfield	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%
Clear Creek	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%
Denver	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%
Douglas	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%

Present detailed time/distance results for members residing in Colorado’s urban counties using the accompanying MS Excel workbook template.

List the specific contracted urban counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted urban Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

El Paso	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%
Elbert	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%
Gilpin	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%
Jefferson	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%
Pueblo	Urban	General Psychiatrists and other Psychiatric Prescribers	99.20%
Teller	Urban	General Psychiatrists and other Psychiatric Prescribers	100.00%
Weld	Urban	General Psychiatrists and other Psychiatric Prescribers	99.70%
Adams	Urban	General SUD Treatment Practitioner	99.40%
Arapahoe	Urban	General SUD Treatment Practitioner	99.50%
Boulder	Urban	General SUD Treatment Practitioner	100.00%
Broomfield	Urban	General SUD Treatment Practitioner	100.00%
Clear Creek	Urban	General SUD Treatment Practitioner	100.00%
Denver	Urban	General SUD Treatment Practitioner	100.00%
Douglas	Urban	General SUD Treatment Practitioner	100.00%
El Paso	Urban	General SUD Treatment Practitioner	100.00%
Elbert	Urban	General SUD Treatment Practitioner	96.00%
Gilpin	Urban	General SUD Treatment Practitioner	100.00%
Jefferson	Urban	General SUD Treatment Practitioner	100.00%
Pueblo	Urban	General SUD Treatment Practitioner	100.00%
Teller	Urban	General SUD Treatment Practitioner	100.00%
Weld	Urban	General SUD Treatment Practitioner	99.60%
Adams	Urban	Pediatric Behavioral Health	99.80%
Arapahoe	Urban	Pediatric Behavioral Health	97.90%
Boulder	Urban	Pediatric Behavioral Health	100.00%
Broomfield	Urban	Pediatric Behavioral Health	100.00%
Clear Creek	Urban	Pediatric Behavioral Health	100.00%
Denver	Urban	Pediatric Behavioral Health	100.00%
Douglas	Urban	Pediatric Behavioral Health	100.00%
El Paso	Urban	Pediatric Behavioral Health	100.00%

Present detailed time/distance results for members residing in Colorado’s urban counties using the accompanying MS Excel workbook template.

List the specific contracted urban counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted urban Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Elbert	Urban	Pediatric Behavioral Health	100.00%
Gilpin	Urban	Pediatric Behavioral Health	100.00%
Jefferson	Urban	Pediatric Behavioral Health	100.00%
Pueblo	Urban	Pediatric Behavioral Health	100.00%
Teller	Urban	Pediatric Behavioral Health	100.00%
Weld	Urban	Pediatric Behavioral Health	99.90%
Adams	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	99.80%
Arapahoe	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	97.00%
Boulder	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Broomfield	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Clear Creek	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Denver	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Douglas	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
El Paso	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Elbert	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Gilpin	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Jefferson	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Pueblo	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	98.30%
Teller	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Weld	Urban	Pediatric Psychiatrists and other Psychiatric Prescribers	99.80%
Adams	Urban	Pediatric SUD Treatment Practitioner	99.80%
Arapahoe	Urban	Pediatric SUD Treatment Practitioner	97.00%
Boulder	Urban	Pediatric SUD Treatment Practitioner	100.00%
Broomfield	Urban	Pediatric SUD Treatment Practitioner	100.00%
Clear Creek	Urban	Pediatric SUD Treatment Practitioner	100.00%
Denver	Urban	Pediatric SUD Treatment Practitioner	100.00%
Douglas	Urban	Pediatric SUD Treatment Practitioner	100.00%
El Paso	Urban	Pediatric SUD Treatment Practitioner	100.00%
Elbert	Urban	Pediatric SUD Treatment Practitioner	100.00%

Present detailed time/distance results for members residing in Colorado’s urban counties using the accompanying MS Excel workbook template.

List the specific contracted urban counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted urban Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Gilpin	Urban	Pediatric SUD Treatment Practitioner	100.00%
Jefferson	Urban	Pediatric SUD Treatment Practitioner	100.00%
Pueblo	Urban	Pediatric SUD Treatment Practitioner	100.00%
Teller	Urban	Pediatric SUD Treatment Practitioner	100.00%
Weld	Urban	Pediatric SUD Treatment Practitioner	99.60%
Adams	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	97.40%
Arapahoe	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	97.90%
Boulder	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	92.50%
Broomfield	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	100.00%
Clear Creek	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	1.10%
Denver	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	100.00%
Douglas	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	98.60%
El Paso	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	97.80%
Elbert	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	39.40%
Gilpin	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	55.60%
Jefferson	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	98.00%
Pueblo	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Teller	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	43.80%
Weld	Urban	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	92.20%
Adams	Urban	SUD Treatment Facilities-ASAM 3.1	97.40%
Arapahoe	Urban	SUD Treatment Facilities-ASAM 3.1	97.90%
Boulder	Urban	SUD Treatment Facilities-ASAM 3.1	76.10%

Present detailed time/distance results for members residing in Colorado’s urban counties using the accompanying MS Excel workbook template.

List the specific contracted urban counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted urban Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Broomfield	Urban	SUD Treatment Facilities-ASAM 3.1	100.00%
Clear Creek	Urban	SUD Treatment Facilities-ASAM 3.1	48.90%
Denver	Urban	SUD Treatment Facilities-ASAM 3.1	100.00%
Douglas	Urban	SUD Treatment Facilities-ASAM 3.1	96.80%
El Paso	Urban	SUD Treatment Facilities-ASAM 3.1	0.00%
Elbert	Urban	SUD Treatment Facilities-ASAM 3.1	27.30%
Gilpin	Urban	SUD Treatment Facilities-ASAM 3.1	100.00%
Jefferson	Urban	SUD Treatment Facilities-ASAM 3.1	100.00%
Pueblo	Urban	SUD Treatment Facilities-ASAM 3.1	0.00%
Teller	Urban	SUD Treatment Facilities-ASAM 3.1	0.00%
Weld	Urban	SUD Treatment Facilities-ASAM 3.1	99.40%
Adams	Urban	SUD Treatment Facilities-ASAM 3.2 WM	99.40%
Arapahoe	Urban	SUD Treatment Facilities-ASAM 3.2 WM	98.80%
Boulder	Urban	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Broomfield	Urban	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Clear Creek	Urban	SUD Treatment Facilities-ASAM 3.2 WM	30.70%
Denver	Urban	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Douglas	Urban	SUD Treatment Facilities-ASAM 3.2 WM	98.90%
El Paso	Urban	SUD Treatment Facilities-ASAM 3.2 WM	98.10%
Elbert	Urban	SUD Treatment Facilities-ASAM 3.2 WM	39.40%
Gilpin	Urban	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Jefferson	Urban	SUD Treatment Facilities-ASAM 3.2 WM	99.70%
Pueblo	Urban	SUD Treatment Facilities-ASAM 3.2 WM	97.80%
Teller	Urban	SUD Treatment Facilities-ASAM 3.2 WM	93.80%
Weld	Urban	SUD Treatment Facilities-ASAM 3.2 WM	99.60%
Adams	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Arapahoe	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Boulder	Urban	SUD Treatment Facilities-ASAM 3.3	28.50%

Present detailed time/distance results for members residing in Colorado’s urban counties using the accompanying MS Excel workbook template.

List the specific contracted urban counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted urban Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Broomfield	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Clear Creek	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Denver	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Douglas	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
El Paso	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Elbert	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Gilpin	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Jefferson	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Pueblo	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Teller	Urban	SUD Treatment Facilities-ASAM 3.3	0.00%
Weld	Urban	SUD Treatment Facilities-ASAM 3.3	77.70%
Adams	Urban	SUD Treatment Facilities-ASAM 3.5	99.40%
Arapahoe	Urban	SUD Treatment Facilities-ASAM 3.5	98.80%
Boulder	Urban	SUD Treatment Facilities-ASAM 3.5	95.10%
Broomfield	Urban	SUD Treatment Facilities-ASAM 3.5	100.00%
Clear Creek	Urban	SUD Treatment Facilities-ASAM 3.5	48.90%
Denver	Urban	SUD Treatment Facilities-ASAM 3.5	100.00%
Douglas	Urban	SUD Treatment Facilities-ASAM 3.5	99.30%
El Paso	Urban	SUD Treatment Facilities-ASAM 3.5	4.20%
Elbert	Urban	SUD Treatment Facilities-ASAM 3.5	84.80%
Gilpin	Urban	SUD Treatment Facilities-ASAM 3.5	100.00%
Jefferson	Urban	SUD Treatment Facilities-ASAM 3.5	100.00%
Pueblo	Urban	SUD Treatment Facilities-ASAM 3.5	98.90%
Teller	Urban	SUD Treatment Facilities-ASAM 3.5	0.00%
Weld	Urban	SUD Treatment Facilities-ASAM 3.5	99.60%
Adams	Urban	SUD Treatment Facilities-ASAM 3.7	97.40%
Arapahoe	Urban	SUD Treatment Facilities-ASAM 3.7	97.90%
Boulder	Urban	SUD Treatment Facilities-ASAM 3.7	76.40%



Present detailed time/distance results for members residing in Colorado’s urban counties using the accompanying MS Excel workbook template.

List the specific contracted urban counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted urban Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Broomfield	Urban	SUD Treatment Facilities-ASAM 3.7	100.00%
Clear Creek	Urban	SUD Treatment Facilities-ASAM 3.7	30.70%
Denver	Urban	SUD Treatment Facilities-ASAM 3.7	100.00%
Douglas	Urban	SUD Treatment Facilities-ASAM 3.7	96.80%
El Paso	Urban	SUD Treatment Facilities-ASAM 3.7	3.30%
Elbert	Urban	SUD Treatment Facilities-ASAM 3.7	27.30%
Gilpin	Urban	SUD Treatment Facilities-ASAM 3.7	11.10%
Jefferson	Urban	SUD Treatment Facilities-ASAM 3.7	100.00%
Pueblo	Urban	SUD Treatment Facilities-ASAM 3.7	98.90%
Teller	Urban	SUD Treatment Facilities-ASAM 3.7	0.00%
Weld	Urban	SUD Treatment Facilities-ASAM 3.7	97.10%
Adams	Urban	SUD Treatment Facilities-ASAM 3.7 WM	99.40%
Arapahoe	Urban	SUD Treatment Facilities-ASAM 3.7 WM	98.80%
Boulder	Urban	SUD Treatment Facilities-ASAM 3.7 WM	100.00%
Broomfield	Urban	SUD Treatment Facilities-ASAM 3.7 WM	100.00%
Clear Creek	Urban	SUD Treatment Facilities-ASAM 3.7 WM	45.50%
Denver	Urban	SUD Treatment Facilities-ASAM 3.7 WM	100.00%
Douglas	Urban	SUD Treatment Facilities-ASAM 3.7 WM	100.00%
El Paso	Urban	SUD Treatment Facilities-ASAM 3.7 WM	99.00%
Elbert	Urban	SUD Treatment Facilities-ASAM 3.7 WM	93.90%
Gilpin	Urban	SUD Treatment Facilities-ASAM 3.7 WM	100.00%
Jefferson	Urban	SUD Treatment Facilities-ASAM 3.7 WM	100.00%
Pueblo	Urban	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Teller	Urban	SUD Treatment Facilities-ASAM 3.7 WM	93.80%
Weld	Urban	SUD Treatment Facilities-ASAM 3.7 WM	98.70%

**Table 12–Rural Health Care Network Time and Distance Standards: Discussion**

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Time/distance deficiencies in one or more network categories exist in several counties, which is a function of provider availability in rural and frontier areas. This is approximately 42% unmet for the network category/county/urbanicity combination in both behavioral and physical health. For example, SUD treatment facilities and psychiatric hospitals are limited, despite the inclusion of all active practices and facilities in our networks for the entire geography of Region 1. The grid below shows membership access by county by network category.

RMHP’s Care Coordination team assists Members who need a particular service that may not be available in their community. Care Coordinators work with participating providers in nearby communities to facilitate appointment scheduling and transportation.

RMHP continues to offer RAE, PRIME and CHP+ Members access to CirrusMD for RMHP. This is a free, text-based platform which allows Members to connect with providers 24/7 if they have a health question or if they are not sure if they should go to an urgent care or emergency room.

The table below shows membership access by county by network category for the urban analysis.

County	County Class	Provider Network Category	% with Access
Archuleta	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Delta	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Eagle	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Garfield	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Grand	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
La Plata	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Larimer	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Mesa	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Montezuma	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Montrose	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Ouray	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Pitkin	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Routt	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Summit	Rural	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Archuleta	Rural	Adult Primary Care Practitioner (PA)	100.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Delta	Rural	Adult Primary Care Practitioner (PA)	100.00%
Eagle	Rural	Adult Primary Care Practitioner (PA)	12.70%
Garfield	Rural	Adult Primary Care Practitioner (PA)	6.40%
Grand	Rural	Adult Primary Care Practitioner (PA)	97.10%
La Plata	Rural	Adult Primary Care Practitioner (PA)	66.20%
Larimer	Rural	Adult Primary Care Practitioner (PA)	99.90%
Mesa	Rural	Adult Primary Care Practitioner (PA)	99.90%
Montezuma	Rural	Adult Primary Care Practitioner (PA)	0.40%
Montrose	Rural	Adult Primary Care Practitioner (PA)	100.00%
Ouray	Rural	Adult Primary Care Practitioner (PA)	100.00%
Pitkin	Rural	Adult Primary Care Practitioner (PA)	8.20%
Routt	Rural	Adult Primary Care Practitioner (PA)	0.00%
Summit	Rural	Adult Primary Care Practitioner (PA)	100.00%
Archuleta	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Delta	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Eagle	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Garfield	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Grand	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
La Plata	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Larimer	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Mesa	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Montezuma	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Montrose	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Ouray	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Pitkin	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Routt	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Summit	Rural	Family Practitioner (MD, DO, NP, CNS)	100.00%
Archuleta	Rural	Family Practitioner (PA)	100.00%
Delta	Rural	Family Practitioner (PA)	100.00%
Eagle	Rural	Family Practitioner (PA)	8.60%
Garfield	Rural	Family Practitioner (PA)	8.00%
Grand	Rural	Family Practitioner (PA)	97.40%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

La Plata	Rural	Family Practitioner (PA)	67.70%
Larimer	Rural	Family Practitioner (PA)	99.90%
Mesa	Rural	Family Practitioner (PA)	99.90%
Montezuma	Rural	Family Practitioner (PA)	0.40%
Montrose	Rural	Family Practitioner (PA)	100.00%
Ouray	Rural	Family Practitioner (PA)	100.00%
Pitkin	Rural	Family Practitioner (PA)	7.70%
Routt	Rural	Family Practitioner (PA)	0.00%
Summit	Rural	Family Practitioner (PA)	100.00%
Alamosa	Rural	General Behavioral Health	100.00%
Archuleta	Rural	General Behavioral Health	100.00%
Chaffee	Rural	General Behavioral Health	100.00%
Conejos	Rural	General Behavioral Health	100.00%
Crowley	Rural	General Behavioral Health	100.00%
Delta	Rural	General Behavioral Health	100.00%
Eagle	Rural	General Behavioral Health	100.00%
Fremont	Rural	General Behavioral Health	100.00%
Garfield	Rural	General Behavioral Health	100.00%
Grand	Rural	General Behavioral Health	100.00%
La Plata	Rural	General Behavioral Health	100.00%
Lake	Rural	General Behavioral Health	100.00%
Larimer	Rural	General Behavioral Health	100.00%
Logan	Rural	General Behavioral Health	100.00%
Mesa	Rural	General Behavioral Health	100.00%
Montezuma	Rural	General Behavioral Health	100.00%
Montrose	Rural	General Behavioral Health	100.00%
Morgan	Rural	General Behavioral Health	100.00%
Otero	Rural	General Behavioral Health	100.00%
Ouray	Rural	General Behavioral Health	100.00%
Park	Rural	General Behavioral Health	100.00%
Phillips	Rural	General Behavioral Health	100.00%
Pitkin	Rural	General Behavioral Health	100.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Prowers	Rural	General Behavioral Health	100.00%
Rio Grande	Rural	General Behavioral Health	100.00%
Routt	Rural	General Behavioral Health	100.00%
Summit	Rural	General Behavioral Health	100.00%
Alamosa	Rural	General Psychiatrists and other Psychiatric Prescribers	9.30%
Archuleta	Rural	General Psychiatrists and other Psychiatric Prescribers	99.80%
Chaffee	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Conejos	Rural	General Psychiatrists and other Psychiatric Prescribers	0.00%
Crowley	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Delta	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Eagle	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Fremont	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Garfield	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Grand	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
La Plata	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Lake	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Larimer	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Logan	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Mesa	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Montezuma	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Montrose	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Morgan	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Otero	Rural	General Psychiatrists and other Psychiatric Prescribers	46.70%
Ouray	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Park	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Phillips	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Pitkin	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Prowers	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Rio Grande	Rural	General Psychiatrists and other Psychiatric Prescribers	6.50%
Routt	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Summit	Rural	General Psychiatrists and other Psychiatric Prescribers	100.00%
Alamosa	Rural	General SUD Treatment Practitioner	100.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Archuleta	Rural	General SUD Treatment Practitioner	100.00%
Chaffee	Rural	General SUD Treatment Practitioner	100.00%
Conejos	Rural	General SUD Treatment Practitioner	100.00%
Crowley	Rural	General SUD Treatment Practitioner	100.00%
Delta	Rural	General SUD Treatment Practitioner	100.00%
Eagle	Rural	General SUD Treatment Practitioner	100.00%
Fremont	Rural	General SUD Treatment Practitioner	100.00%
Garfield	Rural	General SUD Treatment Practitioner	100.00%
Grand	Rural	General SUD Treatment Practitioner	100.00%
La Plata	Rural	General SUD Treatment Practitioner	100.00%
Lake	Rural	General SUD Treatment Practitioner	100.00%
Larimer	Rural	General SUD Treatment Practitioner	100.00%
Logan	Rural	General SUD Treatment Practitioner	100.00%
Mesa	Rural	General SUD Treatment Practitioner	100.00%
Montezuma	Rural	General SUD Treatment Practitioner	100.00%
Montrose	Rural	General SUD Treatment Practitioner	100.00%
Morgan	Rural	General SUD Treatment Practitioner	100.00%
Otero	Rural	General SUD Treatment Practitioner	100.00%
Ouray	Rural	General SUD Treatment Practitioner	100.00%
Park	Rural	General SUD Treatment Practitioner	100.00%
Phillips	Rural	General SUD Treatment Practitioner	100.00%
Pitkin	Rural	General SUD Treatment Practitioner	100.00%
Prowers	Rural	General SUD Treatment Practitioner	93.80%
Rio Grande	Rural	General SUD Treatment Practitioner	100.00%
Routt	Rural	General SUD Treatment Practitioner	100.00%
Summit	Rural	General SUD Treatment Practitioner	100.00%
Alamosa	Rural	Pediatric Behavioral Health	100.00%
Archuleta	Rural	Pediatric Behavioral Health	100.00%
Chaffee	Rural	Pediatric Behavioral Health	100.00%
Conejos	Rural	Pediatric Behavioral Health	100.00%
Delta	Rural	Pediatric Behavioral Health	100.00%
Eagle	Rural	Pediatric Behavioral Health	100.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Fremont	Rural	Pediatric Behavioral Health	100.00%
Garfield	Rural	Pediatric Behavioral Health	100.00%
Grand	Rural	Pediatric Behavioral Health	100.00%
La Plata	Rural	Pediatric Behavioral Health	100.00%
Lake	Rural	Pediatric Behavioral Health	100.00%
Larimer	Rural	Pediatric Behavioral Health	100.00%
Logan	Rural	Pediatric Behavioral Health	100.00%
Mesa	Rural	Pediatric Behavioral Health	100.00%
Montezuma	Rural	Pediatric Behavioral Health	100.00%
Montrose	Rural	Pediatric Behavioral Health	100.00%
Morgan	Rural	Pediatric Behavioral Health	100.00%
Otero	Rural	Pediatric Behavioral Health	100.00%
Ouray	Rural	Pediatric Behavioral Health	100.00%
Park	Rural	Pediatric Behavioral Health	100.00%
Phillips	Rural	Pediatric Behavioral Health	100.00%
Pitkin	Rural	Pediatric Behavioral Health	100.00%
Prowers	Rural	Pediatric Behavioral Health	100.00%
Rio Grande	Rural	Pediatric Behavioral Health	100.00%
Routt	Rural	Pediatric Behavioral Health	100.00%
Summit	Rural	Pediatric Behavioral Health	100.00%
Archuleta	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Delta	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Eagle	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Garfield	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Grand	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
La Plata	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Larimer	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Mesa	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Montezuma	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Montrose	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Ouray	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Pitkin	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Routt	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Summit	Rural	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Archuleta	Rural	Pediatric Primary Care Practitioner (PA)	100.00%
Delta	Rural	Pediatric Primary Care Practitioner (PA)	100.00%
Eagle	Rural	Pediatric Primary Care Practitioner (PA)	100.00%
Garfield	Rural	Pediatric Primary Care Practitioner (PA)	55.40%
Grand	Rural	Pediatric Primary Care Practitioner (PA)	99.70%
La Plata	Rural	Pediatric Primary Care Practitioner (PA)	96.60%
Larimer	Rural	Pediatric Primary Care Practitioner (PA)	100.00%
Mesa	Rural	Pediatric Primary Care Practitioner (PA)	99.90%
Montezuma	Rural	Pediatric Primary Care Practitioner (PA)	99.90%
Montrose	Rural	Pediatric Primary Care Practitioner (PA)	100.00%
Ouray	Rural	Pediatric Primary Care Practitioner (PA)	100.00%
Pitkin	Rural	Pediatric Primary Care Practitioner (PA)	97.20%
Routt	Rural	Pediatric Primary Care Practitioner (PA)	11.10%
Summit	Rural	Pediatric Primary Care Practitioner (PA)	100.00%
Alamosa	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	15.00%
Archuleta	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Chaffee	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Conejos	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	0.00%
Delta	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Eagle	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Fremont	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Garfield	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Grand	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
La Plata	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Lake	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Larimer	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Logan	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Mesa	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Montezuma	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Montrose	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%



Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Morgan	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Otero	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	44.40%
Ouray	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Park	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Phillips	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Pitkin	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Prowers	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Rio Grande	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	20.00%
Routt	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Summit	Rural	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Alamosa	Rural	Pediatric SUD Treatment Practitioner	100.00%
Archuleta	Rural	Pediatric SUD Treatment Practitioner	100.00%
Chaffee	Rural	Pediatric SUD Treatment Practitioner	100.00%
Conejos	Rural	Pediatric SUD Treatment Practitioner	100.00%
Delta	Rural	Pediatric SUD Treatment Practitioner	100.00%
Eagle	Rural	Pediatric SUD Treatment Practitioner	100.00%
Fremont	Rural	Pediatric SUD Treatment Practitioner	100.00%
Garfield	Rural	Pediatric SUD Treatment Practitioner	100.00%
Grand	Rural	Pediatric SUD Treatment Practitioner	100.00%
La Plata	Rural	Pediatric SUD Treatment Practitioner	100.00%
Lake	Rural	Pediatric SUD Treatment Practitioner	100.00%
Larimer	Rural	Pediatric SUD Treatment Practitioner	100.00%
Logan	Rural	Pediatric SUD Treatment Practitioner	100.00%
Mesa	Rural	Pediatric SUD Treatment Practitioner	100.00%
Montezuma	Rural	Pediatric SUD Treatment Practitioner	100.00%
Montrose	Rural	Pediatric SUD Treatment Practitioner	100.00%
Morgan	Rural	Pediatric SUD Treatment Practitioner	100.00%
Otero	Rural	Pediatric SUD Treatment Practitioner	100.00%
Ouray	Rural	Pediatric SUD Treatment Practitioner	100.00%
Park	Rural	Pediatric SUD Treatment Practitioner	100.00%
Phillips	Rural	Pediatric SUD Treatment Practitioner	100.00%
Pitkin	Rural	Pediatric SUD Treatment Practitioner	100.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Prowers	Rural	Pediatric SUD Treatment Practitioner	100.00%
Rio Grande	Rural	Pediatric SUD Treatment Practitioner	100.00%
Routt	Rural	Pediatric SUD Treatment Practitioner	100.00%
Summit	Rural	Pediatric SUD Treatment Practitioner	100.00%
Alamosa	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Archuleta	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Chaffee	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Conejos	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Crowley	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Delta	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Eagle	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Fremont	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Garfield	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Grand	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
La Plata	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Lake	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Larimer	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	99.20%
Logan	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Mesa	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	98.30%
Montezuma	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Montrose	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Morgan	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Otero	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Ouray	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Park	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.20%
Phillips	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Pitkin	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Prowers	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Rio Grande	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Routt	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Summit	Rural	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Alamosa	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Archuleta	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Chaffee	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Conejos	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Crowley	Rural	SUD Treatment Facilities-ASAM 3.1	100.00%
Delta	Rural	SUD Treatment Facilities-ASAM 3.1	99.50%
Eagle	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Fremont	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Garfield	Rural	SUD Treatment Facilities-ASAM 3.1	47.00%
Grand	Rural	SUD Treatment Facilities-ASAM 3.1	67.90%
La Plata	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Lake	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Larimer	Rural	SUD Treatment Facilities-ASAM 3.1	100.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Logan	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Mesa	Rural	SUD Treatment Facilities-ASAM 3.1	100.00%
Montezuma	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Montrose	Rural	SUD Treatment Facilities-ASAM 3.1	34.80%
Morgan	Rural	SUD Treatment Facilities-ASAM 3.1	88.20%
Otero	Rural	SUD Treatment Facilities-ASAM 3.1	100.00%
Ouray	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Park	Rural	SUD Treatment Facilities-ASAM 3.1	14.70%
Phillips	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Pitkin	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Prowers	Rural	SUD Treatment Facilities-ASAM 3.1	95.00%
Rio Grande	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Routt	Rural	SUD Treatment Facilities-ASAM 3.1	0.00%
Summit	Rural	SUD Treatment Facilities-ASAM 3.1	97.70%
Alamosa	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Archuleta	Rural	SUD Treatment Facilities-ASAM 3.2 WM	99.90%
Chaffee	Rural	SUD Treatment Facilities-ASAM 3.2 WM	35.40%
Conejos	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Crowley	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Delta	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Eagle	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Fremont	Rural	SUD Treatment Facilities-ASAM 3.2 WM	92.90%
Garfield	Rural	SUD Treatment Facilities-ASAM 3.2 WM	82.10%
Grand	Rural	SUD Treatment Facilities-ASAM 3.2 WM	76.40%
La Plata	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Lake	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Larimer	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Logan	Rural	SUD Treatment Facilities-ASAM 3.2 WM	0.00%
Mesa	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Montezuma	Rural	SUD Treatment Facilities-ASAM 3.2 WM	98.00%
Montrose	Rural	SUD Treatment Facilities-ASAM 3.2 WM	99.90%
Morgan	Rural	SUD Treatment Facilities-ASAM 3.2 WM	76.40%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Otero	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Ouray	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Park	Rural	SUD Treatment Facilities-ASAM 3.2 WM	98.60%
Phillips	Rural	SUD Treatment Facilities-ASAM 3.2 WM	0.00%
Pitkin	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Prowers	Rural	SUD Treatment Facilities-ASAM 3.2 WM	95.00%
Rio Grande	Rural	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Routt	Rural	SUD Treatment Facilities-ASAM 3.2 WM	0.30%
Summit	Rural	SUD Treatment Facilities-ASAM 3.2 WM	99.60%
Alamosa	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Archuleta	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Chaffee	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Conejos	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Crowley	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Delta	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Eagle	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Fremont	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Garfield	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Grand	Rural	SUD Treatment Facilities-ASAM 3.3	11.80%
La Plata	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Lake	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Larimer	Rural	SUD Treatment Facilities-ASAM 3.3	100.00%
Logan	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Mesa	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Montezuma	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Montrose	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Morgan	Rural	SUD Treatment Facilities-ASAM 3.3	1.80%
Otero	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Ouray	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Park	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Phillips	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Pitkin	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Prowers	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Rio Grande	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Routt	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Summit	Rural	SUD Treatment Facilities-ASAM 3.3	0.00%
Alamosa	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Archuleta	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Chaffee	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Conejos	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Crowley	Rural	SUD Treatment Facilities-ASAM 3.5	100.00%
Delta	Rural	SUD Treatment Facilities-ASAM 3.5	99.50%
Eagle	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Fremont	Rural	SUD Treatment Facilities-ASAM 3.5	91.80%
Garfield	Rural	SUD Treatment Facilities-ASAM 3.5	47.00%
Grand	Rural	SUD Treatment Facilities-ASAM 3.5	69.20%
La Plata	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Lake	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Larimer	Rural	SUD Treatment Facilities-ASAM 3.5	100.00%
Logan	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Mesa	Rural	SUD Treatment Facilities-ASAM 3.5	100.00%
Montezuma	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Montrose	Rural	SUD Treatment Facilities-ASAM 3.5	34.80%
Morgan	Rural	SUD Treatment Facilities-ASAM 3.5	78.20%
Otero	Rural	SUD Treatment Facilities-ASAM 3.5	41.70%
Ouray	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Park	Rural	SUD Treatment Facilities-ASAM 3.5	14.70%
Phillips	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Pitkin	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Prowers	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Rio Grande	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Routt	Rural	SUD Treatment Facilities-ASAM 3.5	0.00%
Summit	Rural	SUD Treatment Facilities-ASAM 3.5	97.70%
Alamosa	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Archuleta	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Chaffee	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Conejos	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Crowley	Rural	SUD Treatment Facilities-ASAM 3.7	100.00%
Delta	Rural	SUD Treatment Facilities-ASAM 3.7	99.50%
Eagle	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Fremont	Rural	SUD Treatment Facilities-ASAM 3.7	88.20%
Garfield	Rural	SUD Treatment Facilities-ASAM 3.7	47.00%
Grand	Rural	SUD Treatment Facilities-ASAM 3.7	45.10%
La Plata	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Lake	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Larimer	Rural	SUD Treatment Facilities-ASAM 3.7	99.90%
Logan	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Mesa	Rural	SUD Treatment Facilities-ASAM 3.7	100.00%
Montezuma	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Montrose	Rural	SUD Treatment Facilities-ASAM 3.7	34.80%
Morgan	Rural	SUD Treatment Facilities-ASAM 3.7	14.50%
Otero	Rural	SUD Treatment Facilities-ASAM 3.7	41.70%
Ouray	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Park	Rural	SUD Treatment Facilities-ASAM 3.7	14.70%
Phillips	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Pitkin	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Prowers	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Rio Grande	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Routt	Rural	SUD Treatment Facilities-ASAM 3.7	0.00%
Summit	Rural	SUD Treatment Facilities-ASAM 3.7	78.30%
Alamosa	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Archuleta	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Chaffee	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Conejos	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Crowley	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Delta	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%

Present detailed time/distance results for members residing in Colorado’s rural counties using the accompanying MS Excel workbook template.

List the specific contracted rural counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted rural Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Eagle	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Fremont	Rural	SUD Treatment Facilities-ASAM 3.7 WM	91.80%
Garfield	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Grand	Rural	SUD Treatment Facilities-ASAM 3.7 WM	76.40%
La Plata	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Lake	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Larimer	Rural	SUD Treatment Facilities-ASAM 3.7 WM	99.90%
Logan	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Mesa	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Montezuma	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Montrose	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Morgan	Rural	SUD Treatment Facilities-ASAM 3.7 WM	14.50%
Otero	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Ouray	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Park	Rural	SUD Treatment Facilities-ASAM 3.7 WM	17.40%
Phillips	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Pitkin	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Prowers	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Rio Grande	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Routt	Rural	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Summit	Rural	SUD Treatment Facilities-ASAM 3.7 WM	95.30%



**Table 13—Frontier Health Care Network Time and Distance Standards: Discussion**

Present detailed time/distance results for members residing in Colorado’s frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Time/distance deficiencies in one or more network categories exist in numerous counties for Region 1. This is approximately 36% unmet for the network category/county/urbanicity combination for both behavioral and physical health. For example, SUD treatment facilities and psychiatric hospitals are limited, despite the inclusion of all active practices and facilities in our networks for the entire geography of Region 1. In many cases this is a function of care being consolidated in one location within a county and in others cases the pattern of care is to travel to neighboring communities for care.

RMHP’s Care Coordination team assists Members who need a particular service that may not be available in their community. Care Coordinators work with participating providers in nearby communities to facilitate appointment scheduling and transportation.

RMHP continues to offer RAE, PRIME and CHP+ Members access to CirrusMD for RMHP. This is a free, text-based platform which allows Members to connect with providers 24/7 if they have a health question or if they are not sure if they should go to an urgent care or emergency room.

The table below shows membership access by county by network category for the rural analysis.

County	County Class	Provider Network Category	% with Access
Dolores	Frontier	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Gunnison	Frontier	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Hinsdale	Frontier	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Jackson	Frontier	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Moffat	Frontier	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Rio Blanco	Frontier	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
San Juan	Frontier	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
San Miguel	Frontier	Adult Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Dolores	Frontier	Adult Primary Care Practitioner (PA)	99.50%
Gunnison	Frontier	Adult Primary Care Practitioner (PA)	75.70%
Hinsdale	Frontier	Adult Primary Care Practitioner (PA)	100.00%
Jackson	Frontier	Adult Primary Care Practitioner (PA)	7.60%
Moffat	Frontier	Adult Primary Care Practitioner (PA)	0.00%
Rio Blanco	Frontier	Adult Primary Care Practitioner (PA)	1.80%
San Juan	Frontier	Adult Primary Care Practitioner (PA)	100.00%

Present detailed time/distance results for members residing in Colorado's frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE's approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

San Miguel	Frontier	Adult Primary Care Practitioner (PA)	100.00%
Dolores	Frontier	Family Practitioner (MD, DO, NP, CNS)	100.00%
Gunnison	Frontier	Family Practitioner (MD, DO, NP, CNS)	100.00%
Hinsdale	Frontier	Family Practitioner (MD, DO, NP, CNS)	100.00%
Jackson	Frontier	Family Practitioner (MD, DO, NP, CNS)	100.00%
Moffat	Frontier	Family Practitioner (MD, DO, NP, CNS)	100.00%
Rio Blanco	Frontier	Family Practitioner (MD, DO, NP, CNS)	100.00%
San Juan	Frontier	Family Practitioner (MD, DO, NP, CNS)	100.00%
San Miguel	Frontier	Family Practitioner (MD, DO, NP, CNS)	100.00%
Dolores	Frontier	Family Practitioner (PA)	99.20%
Gunnison	Frontier	Family Practitioner (PA)	7.20%
Hinsdale	Frontier	Family Practitioner (PA)	100.00%
Jackson	Frontier	Family Practitioner (PA)	6.20%
Moffat	Frontier	Family Practitioner (PA)	0.00%
Rio Blanco	Frontier	Family Practitioner (PA)	1.00%
San Juan	Frontier	Family Practitioner (PA)	100.00%
San Miguel	Frontier	Family Practitioner (PA)	100.00%
Baca	Frontier	General Behavioral Health	100.00%
Bent	Frontier	General Behavioral Health	100.00%
Cheyenne	Frontier	General Behavioral Health	100.00%
Costilla	Frontier	General Behavioral Health	100.00%
Custer	Frontier	General Behavioral Health	100.00%
Dolores	Frontier	General Behavioral Health	100.00%
Gunnison	Frontier	General Behavioral Health	100.00%
Hinsdale	Frontier	General Behavioral Health	100.00%
Huerfano	Frontier	General Behavioral Health	100.00%
Jackson	Frontier	General Behavioral Health	100.00%
Kiowa	Frontier	General Behavioral Health	100.00%
Kit Carson	Frontier	General Behavioral Health	100.00%
Las Animas	Frontier	General Behavioral Health	100.00%
Lincoln	Frontier	General Behavioral Health	100.00%
Mineral	Frontier	General Behavioral Health	100.00%

Present detailed time/distance results for members residing in Colorado’s frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Moffat	Frontier	General Behavioral Health	100.00%
Rio Blanco	Frontier	General Behavioral Health	100.00%
Saguache	Frontier	General Behavioral Health	100.00%
San Juan	Frontier	General Behavioral Health	100.00%
San Miguel	Frontier	General Behavioral Health	100.00%
Sedgwick	Frontier	General Behavioral Health	100.00%
Washington	Frontier	General Behavioral Health	100.00%
Yuma	Frontier	General Behavioral Health	100.00%
Baca	Frontier	General Psychiatrists and other Psychiatric Prescribers	0.00%
Bent	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Cheyenne	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Costilla	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Custer	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Dolores	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Gunnison	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Hinsdale	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Huerfano	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Jackson	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Kiowa	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Kit Carson	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Las Animas	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Lincoln	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Mineral	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Moffat	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Rio Blanco	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Saguache	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
San Juan	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
San Miguel	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Sedgwick	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Washington	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Yuma	Frontier	General Psychiatrists and other Psychiatric Prescribers	100.00%
Baca	Frontier	General SUD Treatment Practitioner	100.00%

Present detailed time/distance results for members residing in Colorado's frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE's approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Bent	Frontier	General SUD Treatment Practitioner	100.00%
Cheyenne	Frontier	General SUD Treatment Practitioner	100.00%
Costilla	Frontier	General SUD Treatment Practitioner	100.00%
Custer	Frontier	General SUD Treatment Practitioner	100.00%
Dolores	Frontier	General SUD Treatment Practitioner	100.00%
Gunnison	Frontier	General SUD Treatment Practitioner	100.00%
Hinsdale	Frontier	General SUD Treatment Practitioner	100.00%
Huerfano	Frontier	General SUD Treatment Practitioner	100.00%
Jackson	Frontier	General SUD Treatment Practitioner	100.00%
Kiowa	Frontier	General SUD Treatment Practitioner	100.00%
Kit Carson	Frontier	General SUD Treatment Practitioner	100.00%
Las Animas	Frontier	General SUD Treatment Practitioner	100.00%
Lincoln	Frontier	General SUD Treatment Practitioner	100.00%
Mineral	Frontier	General SUD Treatment Practitioner	100.00%
Moffat	Frontier	General SUD Treatment Practitioner	100.00%
Rio Blanco	Frontier	General SUD Treatment Practitioner	100.00%
Saguache	Frontier	General SUD Treatment Practitioner	100.00%
San Juan	Frontier	General SUD Treatment Practitioner	100.00%
San Miguel	Frontier	General SUD Treatment Practitioner	100.00%
Sedgwick	Frontier	General SUD Treatment Practitioner	100.00%
Washington	Frontier	General SUD Treatment Practitioner	100.00%
Yuma	Frontier	General SUD Treatment Practitioner	100.00%
Bent	Frontier	Pediatric Behavioral Health	100.00%
Costilla	Frontier	Pediatric Behavioral Health	100.00%
Custer	Frontier	Pediatric Behavioral Health	100.00%
Dolores	Frontier	Pediatric Behavioral Health	100.00%
Gunnison	Frontier	Pediatric Behavioral Health	100.00%
Hinsdale	Frontier	Pediatric Behavioral Health	100.00%
Huerfano	Frontier	Pediatric Behavioral Health	100.00%
Jackson	Frontier	Pediatric Behavioral Health	100.00%
Kiowa	Frontier	Pediatric Behavioral Health	100.00%
Kit Carson	Frontier	Pediatric Behavioral Health	100.00%

Present detailed time/distance results for members residing in Colorado's frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE's approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Las Animas	Frontier	Pediatric Behavioral Health	100.00%
Lincoln	Frontier	Pediatric Behavioral Health	100.00%
Mineral	Frontier	Pediatric Behavioral Health	100.00%
Moffat	Frontier	Pediatric Behavioral Health	100.00%
Rio Blanco	Frontier	Pediatric Behavioral Health	100.00%
Saguache	Frontier	Pediatric Behavioral Health	100.00%
San Juan	Frontier	Pediatric Behavioral Health	100.00%
San Miguel	Frontier	Pediatric Behavioral Health	100.00%
Sedgwick	Frontier	Pediatric Behavioral Health	100.00%
Washington	Frontier	Pediatric Behavioral Health	100.00%
Yuma	Frontier	Pediatric Behavioral Health	100.00%
Dolores	Frontier	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Gunnison	Frontier	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Hinsdale	Frontier	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Jackson	Frontier	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Moffat	Frontier	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Rio Blanco	Frontier	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
San Juan	Frontier	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
San Miguel	Frontier	Pediatric Primary Care Practitioner (MD, DO, NP, CNS)	100.00%
Dolores	Frontier	Pediatric Primary Care Practitioner (PA)	100.00%
Gunnison	Frontier	Pediatric Primary Care Practitioner (PA)	24.90%
Hinsdale	Frontier	Pediatric Primary Care Practitioner (PA)	100.00%
Jackson	Frontier	Pediatric Primary Care Practitioner (PA)	6.60%
Moffat	Frontier	Pediatric Primary Care Practitioner (PA)	0.00%
Rio Blanco	Frontier	Pediatric Primary Care Practitioner (PA)	2.40%
San Juan	Frontier	Pediatric Primary Care Practitioner (PA)	100.00%
San Miguel	Frontier	Pediatric Primary Care Practitioner (PA)	100.00%
Bent	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Costilla	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Custer	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Dolores	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Gunnison	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%

Present detailed time/distance results for members residing in Colorado's frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE's approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Hinsdale	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Huerfano	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Jackson	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Kiowa	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Kit Carson	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Las Animas	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Lincoln	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Mineral	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Moffat	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Rio Blanco	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Saguache	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
San Juan	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
San Miguel	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Sedgwick	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Washington	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Yuma	Frontier	Pediatric Psychiatrists and other Psychiatric Prescribers	100.00%
Bent	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Costilla	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Custer	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Dolores	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Gunnison	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Hinsdale	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Huerfano	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Jackson	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Kiowa	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Kit Carson	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Las Animas	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Lincoln	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Mineral	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Moffat	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Rio Blanco	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Saguache	Frontier	Pediatric SUD Treatment Practitioner	100.00%

Present detailed time/distance results for members residing in Colorado's frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE's approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

San Juan	Frontier	Pediatric SUD Treatment Practitioner	100.00%
San Miguel	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Sedgwick	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Washington	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Yuma	Frontier	Pediatric SUD Treatment Practitioner	100.00%
Baca	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Bent	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Cheyenne	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Costilla	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Custer	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Dolores	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Gunnison	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Hinsdale	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Huerfano	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Jackson	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	5.30%
Kiowa	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Kit Carson	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Las Animas	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Lincoln	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	50.00%
Mineral	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%

Present detailed time/distance results for members residing in Colorado's frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE's approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Moffat	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Rio Blanco	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	1.00%
Saguache	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
San Juan	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
San Miguel	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Sedgwick	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Washington	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Yuma	Frontier	Psychiatric Hospitals, or Psychiatric Units in Acute Care Hospitals	0.00%
Baca	Frontier	SUD Treatment Facilities-ASAM 3.1	100.00%
Bent	Frontier	SUD Treatment Facilities-ASAM 3.1	100.00%
Cheyenne	Frontier	SUD Treatment Facilities-ASAM 3.1	100.00%
Costilla	Frontier	SUD Treatment Facilities-ASAM 3.1	0.00%
Custer	Frontier	SUD Treatment Facilities-ASAM 3.1	0.00%
Dolores	Frontier	SUD Treatment Facilities-ASAM 3.1	3.90%
Gunnison	Frontier	SUD Treatment Facilities-ASAM 3.1	25.30%
Hinsdale	Frontier	SUD Treatment Facilities-ASAM 3.1	0.00%
Huerfano	Frontier	SUD Treatment Facilities-ASAM 3.1	100.00%
Jackson	Frontier	SUD Treatment Facilities-ASAM 3.1	100.00%
Kiowa	Frontier	SUD Treatment Facilities-ASAM 3.1	100.00%
Kit Carson	Frontier	SUD Treatment Facilities-ASAM 3.1	0.00%
Las Animas	Frontier	SUD Treatment Facilities-ASAM 3.1	82.10%
Lincoln	Frontier	SUD Treatment Facilities-ASAM 3.1	100.00%
Mineral	Frontier	SUD Treatment Facilities-ASAM 3.1	0.00%
Moffat	Frontier	SUD Treatment Facilities-ASAM 3.1	3.20%
Rio Blanco	Frontier	SUD Treatment Facilities-ASAM 3.1	100.00%
Saguache	Frontier	SUD Treatment Facilities-ASAM 3.1	0.00%



Present detailed time/distance results for members residing in Colorado’s frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE’s approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

San Juan	Frontier	SUD Treatment Facilities-ASAM 3.1	0.00%
San Miguel	Frontier	SUD Treatment Facilities-ASAM 3.1	96.70%
Sedgwick	Frontier	SUD Treatment Facilities-ASAM 3.1	0.00%
Washington	Frontier	SUD Treatment Facilities-ASAM 3.1	64.70%
Yuma	Frontier	SUD Treatment Facilities-ASAM 3.1	0.00%
Baca	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Bent	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Cheyenne	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Costilla	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Custer	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Dolores	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Gunnison	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Hinsdale	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Huerfano	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Jackson	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Kiowa	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Kit Carson	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	0.00%
Las Animas	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Lincoln	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Mineral	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Moffat	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	3.40%
Rio Blanco	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Saguache	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
San Juan	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
San Miguel	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	100.00%
Sedgwick	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	0.00%
Washington	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	64.70%
Yuma	Frontier	SUD Treatment Facilities-ASAM 3.2 WM	0.00%
Baca	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Bent	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Cheyenne	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Costilla	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%

Present detailed time/distance results for members residing in Colorado's frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE's approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Custer	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Dolores	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Gunnison	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Hinsdale	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Huerfano	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Jackson	Frontier	SUD Treatment Facilities-ASAM 3.3	100.00%
Kiowa	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Kit Carson	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Las Animas	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Lincoln	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Mineral	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Moffat	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Rio Blanco	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Saguache	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
San Juan	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
San Miguel	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Sedgwick	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Washington	Frontier	SUD Treatment Facilities-ASAM 3.3	5.90%
Yuma	Frontier	SUD Treatment Facilities-ASAM 3.3	0.00%
Baca	Frontier	SUD Treatment Facilities-ASAM 3.5	0.00%
Bent	Frontier	SUD Treatment Facilities-ASAM 3.5	91.30%
Cheyenne	Frontier	SUD Treatment Facilities-ASAM 3.5	0.00%
Costilla	Frontier	SUD Treatment Facilities-ASAM 3.5	87.50%
Custer	Frontier	SUD Treatment Facilities-ASAM 3.5	100.00%
Dolores	Frontier	SUD Treatment Facilities-ASAM 3.5	3.90%
Gunnison	Frontier	SUD Treatment Facilities-ASAM 3.5	25.30%
Hinsdale	Frontier	SUD Treatment Facilities-ASAM 3.5	0.00%
Huerfano	Frontier	SUD Treatment Facilities-ASAM 3.5	100.00%
Jackson	Frontier	SUD Treatment Facilities-ASAM 3.5	100.00%
Kiowa	Frontier	SUD Treatment Facilities-ASAM 3.5	20.00%
Kit Carson	Frontier	SUD Treatment Facilities-ASAM 3.5	50.00%
Las Animas	Frontier	SUD Treatment Facilities-ASAM 3.5	100.00%

Present detailed time/distance results for members residing in Colorado's frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE's approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Lincoln	Frontier	SUD Treatment Facilities-ASAM 3.5	100.00%
Mineral	Frontier	SUD Treatment Facilities-ASAM 3.5	0.00%
Moffat	Frontier	SUD Treatment Facilities-ASAM 3.5	3.20%
Rio Blanco	Frontier	SUD Treatment Facilities-ASAM 3.5	100.00%
Saguache	Frontier	SUD Treatment Facilities-ASAM 3.5	63.60%
San Juan	Frontier	SUD Treatment Facilities-ASAM 3.5	0.00%
San Miguel	Frontier	SUD Treatment Facilities-ASAM 3.5	96.70%
Sedgwick	Frontier	SUD Treatment Facilities-ASAM 3.5	0.00%
Washington	Frontier	SUD Treatment Facilities-ASAM 3.5	64.70%
Yuma	Frontier	SUD Treatment Facilities-ASAM 3.5	0.00%
Baca	Frontier	SUD Treatment Facilities-ASAM 3.7	0.00%
Bent	Frontier	SUD Treatment Facilities-ASAM 3.7	91.30%
Cheyenne	Frontier	SUD Treatment Facilities-ASAM 3.7	0.00%
Costilla	Frontier	SUD Treatment Facilities-ASAM 3.7	87.50%
Custer	Frontier	SUD Treatment Facilities-ASAM 3.7	100.00%
Dolores	Frontier	SUD Treatment Facilities-ASAM 3.7	3.90%
Gunnison	Frontier	SUD Treatment Facilities-ASAM 3.7	25.30%
Hinsdale	Frontier	SUD Treatment Facilities-ASAM 3.7	0.00%
Huerfano	Frontier	SUD Treatment Facilities-ASAM 3.7	100.00%
Jackson	Frontier	SUD Treatment Facilities-ASAM 3.7	100.00%
Kiowa	Frontier	SUD Treatment Facilities-ASAM 3.7	20.00%
Kit Carson	Frontier	SUD Treatment Facilities-ASAM 3.7	0.00%
Las Animas	Frontier	SUD Treatment Facilities-ASAM 3.7	100.00%
Lincoln	Frontier	SUD Treatment Facilities-ASAM 3.7	83.30%
Mineral	Frontier	SUD Treatment Facilities-ASAM 3.7	0.00%
Moffat	Frontier	SUD Treatment Facilities-ASAM 3.7	3.20%
Rio Blanco	Frontier	SUD Treatment Facilities-ASAM 3.7	100.00%
Saguache	Frontier	SUD Treatment Facilities-ASAM 3.7	63.60%
San Juan	Frontier	SUD Treatment Facilities-ASAM 3.7	0.00%
San Miguel	Frontier	SUD Treatment Facilities-ASAM 3.7	96.70%
Sedgwick	Frontier	SUD Treatment Facilities-ASAM 3.7	0.00%
Washington	Frontier	SUD Treatment Facilities-ASAM 3.7	11.80%

Present detailed time/distance results for members residing in Colorado's frontier counties using the accompanying MS Excel workbook template.

List the specific contracted frontier counties in which the MCE does not meet the time/distance requirements. Each RAE should limit this discussion to counties within its RAE region for both physical and behavioral health time/distance requirements.

Describe the MCE's approach to ensuring access to care for members residing in its contracted frontier Colorado counties where the MCE does not meet the time/distance requirements.

**CHP+ MCO, Medicaid MCO, RAE**

Yuma	Frontier	SUD Treatment Facilities-ASAM 3.7	0.00%
Baca	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Bent	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Cheyenne	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Costilla	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Custer	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	100.00%
Dolores	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Gunnison	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Hinsdale	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Huerfano	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	91.70%
Jackson	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	100.00%
Kiowa	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Kit Carson	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	50.00%
Las Animas	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Lincoln	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	100.00%
Mineral	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Moffat	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Rio Blanco	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Saguache	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	50.00%
San Juan	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
San Miguel	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Sedgwick	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%
Washington	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	11.80%
Yuma	Frontier	SUD Treatment Facilities-ASAM 3.7 WM	0.00%

## Appendix A. Single Case Agreements (SCAs)

Individual practitioners with single case agreements (SCAs) are not counted as part of the MCE’s health care network and should be excluded from tabulations in the body of this MS Word report and the associated MS Excel report(s). However, the Department acknowledges the role of SCAs in mitigating potential network deficiencies and requests that the MCE use Tables A-1 and A-2 below to list individual practitioners or SUD treatment facilities with SCAs and describe the MCE’s use of SCAs.

**Table A-1–Practitioners and SUD Treatment Facilities with SCAs: Data**

SCA Practitioners or SUD Treatment Facilities	Medicaid ID	County Name	HCPF Network Category Code(s)	HCPF Network Category Description (include ASAM levels for SUD treatment facilities)	Number of Members Served by SCA
<i>Franklin Q. Smith</i>	<i>0000000</i>	<i>Denver</i>	<i>PV050</i>	<i>Adult Only Primary Care</i>	■
<i>Chrysalis Behavioral Health</i>	<i>0000000</i>	<i>Baca</i>	<i>BF085</i>	<i>SUD Treatment Facility, ASAM Levels 3.1 and 3.3</i>	■
<b>CHP+ MCO, Medicaid MCO, RAE</b>					
Redpoint Center	9000223245	Garfield	BF085	SUD Treatment Facility IOP/H0015	■
Megan Johnson	43724337	Larimer	BV130	Licensed Clinical Social Worker (LCSW) OP Psychotherapy/ 90834, 90837	■
Change Academy at Lake of the Ozarks	9000217016	Out of State	BF142	PRTF	■

**Table A-2–Practitioners with SCAs: Discussion**

Describe the MCE’s approach to expanding access to care for members with the use of SCAs.
Describe the methods used to upgrade practitioners with SCAs to fully contracted network practitioners.
<b>CHP+ MCO, Medicaid MCO, RAE</b>
RMHP uses SCAs for specific Member needs such as specialized care (in or outside the region) or special circumstance (e.g., hardships around transportation or travel or an existing relationship with a provider who is not in the network).
If RMHP becomes aware of a provider through the SCA process that is registered with interChange and is willing to join the network, RMHP offers to contract with the provider and help with the interChange process.

## B Appendix B. Optional MCE Content

This optional appendix may contain additional information, graphs, or maps that the MCE would like to include in its quarterly report.

### Instructions for Appendices

To add an image:

- Go to “Insert” and click on “Pictures”.
- Select jpg file and click “Insert”.

To add an additional Appendix:

- Go to “Layout” and click on “Breaks”.
- Select “Next Page” and a new page will be created.
- Go to “Home” and select “HSAG Heading 6”.
- Type “Appendix C.” and a descriptive title for the appendix.
- Select the Table of Contents and hit F9 to refresh.

### Optional MCE Content

*Free text*

## Appendix C. Optional MCE Content

This optional appendix may contain additional information, graphs, or maps that the MCE would like to include in its quarterly report.