

Behavioral Health Provider Network Dashboard

Update: February 2025 Reporting period: January 2025

The Department of Health Care Policy & Financing is committed to improving access to behavioral health services for Health First Colorado (Colorado's Medicaid program) members. Behavioral health services are managed by Regional Accountable Entities (RAEs). The organizations are contracted to build regional networks through credentialing and contracting with providers, and to ensure timely payment and responses to network providers. This dashboard includes network adequacy and accountability metrics for each region.

*Behavioral Health Providers by Region Q2 FY 24/25 (ending December 31, 2024)

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

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

	Contracted Network		New Contracts		Lost/Closed Contracts		Accepting New Members	
RAE/MCO	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility
RAE 1	5,534	419	256	3	101	35	5.517	322
RAE 2	4,692	830	343	126	45	29	4,692	830
RAE 3	9,277	597	522	21	124	1	9,034	582
RAE 4	4,693	830	343	126	45	29	4,693	830
RAE 5	9,285	597	521	21	116	1	9,049	582
RAE 6	9,507	1,165	976	4	87	1	9.006	1,165
RAE 7	9,507	1,165	976	4	87	1	9.006	1,165
Denver Health MCO	9,285	597	521	21	116	1	9,049	582
PRIME MCO	5,957	419	250	3	105	0	5,948	322

RAE Metrics: The Department updated its contracts with the RAEs to improve turnaround times for enrollment, credentialing and contracting. These contracts and the new amendments are available on the Health First Colorado Managed Care Contracts webpage.

Accountability Summary by Region

NOTE: This information is updated monthly. Data reported **January 1, 2025 - January 31, 2025**

	PRIME MCO (medical, surgical/Physic al Health)	RAE 1	RAE 2	RAE 3	RAE 4	RAE 5	RAE 6	RAE 7
% of practitioners credentialed and contracted within 90 days	100% /100%	100%	94.4%	95%	100%	95%	100%	100%
Response to practitioner questions within 2 business days	100% /100%	100%	100%	100%	100%	100%	100%	100%
A.% of clean claims paid or adjudicated within 7 days	85.74%	87.72%	80.87%	90.25%	85.76%	92.81%	92.57%	92.57%
B.% of clean claims paid or adjudicated within 14 days	4.70%	6.95%	3.62%	2.61%	5.84%	2.07%	5.66%	5.66%
C.% of clean claims paid or adjudicated within 30 days	9.40%	5.10%	13.19%	5.78%	7.07%	4.28%	1.75%	1.75%
Total % (Rows A+B +C)	99.84%	99.77%	97.68%	98.64%	98.67%	99.16%	99.98%	99.98%

Top Reasons a Claim is Held Up or Denied

Providers submitting claims to their RAE must provide adequate documentation and fit within the contractual requirements. Below are common themes with technical claim denials (claims can also be denied if they do not meet medical necessity requirements).

- Inaccurate billing: Some providers work with a third party to handle billing; some of these billers may have incorrectly submitted claims. In this case, the RAE can work with the biller to help resolve billing inaccuracies.
- **Use of wrong modifier:** This is an example of inaccurate billing. Billing agents should work with the RAE to correct this mistake for proper claim processing.
- Providers can find RAE contact information at <u>colorado.gov/hcpf/provider-help.</u> Fill out the <u>Health First Colorado Managed Care Provider Complaints - select the Provider Escalation</u> <u>Request form</u> if you have a concern or complaint about a certain region.

