Behavioral Health Provider Network Dashboard

Update: July 2025   *Reporting period: June 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 Q4 FY 24/25 (ending June 30, 2025)

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

RAE/MCO	Contracted Network		New Contracts		Lost/Closed Contracts		Accepting New Members	
	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility
RAE 1	6,197	549	795	0	142	9	6,185	538
RAE 2	4,954	880	247	0	139	0	4,954	880
RAE 3	9,820	489	159	0	55	2	8,826	452
RAE 4	4,954	880	247	0	140	0	4,954	880
RAE 5	9,820	489	163	0	55	2	8,797	452
RAE 6	8,965	539	424	2	595	46	8,601	539
RAE 7	8,965	539	424	2	595	46	8,601	539
Denver Health MCO	9,820	489	163	0	55	2	8,797	452
PRIME MCO	1,143	135	66	0	22	1	6,627	512

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 **June 1, 2025 – June 30, 2025**

	PRIME MCO (Medical, Surgical/Physical Health)	RAE 1	RAE 2	RAE 3	RAE 4	RAE 5	RAE 6	RAE 7
% of practitioners credentialed and contracted within 90 days	96.97% /100%	100%	100%	100%	100%	100%	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**	84.49%	90.28%	86.08%	91.14%	88.58%	92.48%	92.73%	92.73%
B.% of clean claims paid or adjudicated within **14 days**	5.81%	8.08%	1.21%	2.2%	1.84%	2.81%	4.63%	4.63%
C.% of clean claims paid or adjudicated within **30 days**	9.59%	1.59%	10.50%	4.94	8.23%	3.79%	2.59%	2.59%
Total % *(Rows A+B +C)*	99.89%	99.95%	97.79%	92.28%	98.65%	99.08%	99.95%	99.95%

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.
- **Fee schedule updates that are pending for system issue resolution.**

Providers can find RAE contact information at colorado.gov/hcpf/provider-help. Fill out the Health First Colorado Managed Care Provider Complaints – select the Provider Escalation Request form if you have a concern or complaint about a certain region.