

Behavioral Health Provider Network Dashboard

Update: November 2024 Reporting period: October 2024

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 Q1 FY 24/25 (ending September 30, 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.

	Contracted Network		New Contracts		Lost/Closed Contracts		Accepting New Members	
RAE/MCO	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility
1	5,631	516	221	5	67	0	5,267	419
2	4,394	747	175	86	285	5	4,394	747
3	8,905	572	323	36	123	1	8,673	559
4	4,395	747	176	86	287	5	4,395	747
5	8,901	572	323	36	127	1	8,658	559
6	7,637	1,074	829	24	114	0	7,177	713
7	7,637	1,074	829	24	114	0	7,177	713
DH	8,901	571	323	36	127	1	8,658	559
PRIME	5,747	516	258	219	70	0	5,722	419

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 October 1, 2024 - October 31, 2024

	PRIME MCO (medical and surgical)	RAE 1	RAE 2	RAE 3	RAE 4	RAE 5	RAE 6	RAE 7
% of practitioners credentialed and contracted within 90 days	100%	100%	80%	100%	80%	100%	97%	97%
Response to practitioner questions within 2 business days	100%	100%	100%	100%	100%	100%	100%	100%
A.% of clean claims paid or adjudicated within 7 days	83.72%	81.19%	86.39%	93.78%	89.29%	92.87%	93.01%	93.01%
B.% of clean claims paid or adjudicated within 14 days	11.70%	8.13%	4.63%	1.51%	3.08%	2.23%	2.72%	2.72%
C.% of clean claims paid or adjudicated within 30 days	3.68%	7.77%	8.71%	3.2%	7.43%	4.15%	3.86%	3.86%
Total % (Rows A+B +C)	99.10%	97.09%	99.73%	98.49%	99.80%	99.25%	99.59%	99.59%

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 form</u> if you have a concern or complaint about a certain region.

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