Behavioral Health Provider Network Dashboard

Update: December 2024   *Reporting period: November 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.

RAE/MCO	Contracted Network		New Contracts		Lost/Closed Contracts		Accepting New Members	
	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility	Practitioner	Facility
RAE 1	5,631	516	221	5	67	0	5,267	419
RAE 2	4,394	747	175	86	285	5	4,394	747
RAE 3	8,905	572	323	36	123	1	8,673	559
RAE 4	4,395	747	176	86	287	5	4,395	747
RAE 5	8,901	572	323	36	127	1	8,658	559
RAE 6	7,637	1,074	829	24	114	0	7,177	713
RAE 7	7,637	1,074	829	24	114	0	7,177	713
Denver Health MCO	8,901	571	323	36	127	1	8,658	559
PRIME MCO	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 **November 1, 2024 – November 30, 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%	94%	100%	94%	100%	100%	100%
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**	81.56%	92.54%	84.56%	90.88%	91.69%	93.49%	93.42%	93.42%
B.% of clean claims paid or adjudicated within **14 days**	8.28%	5.26%	2.70%	2.58%	2.41%	1.91%	5.82%	5.82%
C.% of clean claims paid or adjudicated within **30 days**	6.01%	1.82%	12.42%	5.66%	7.43%	3.98%	0.75%	0.75%
Total % *(Rows A+B +C)*	95.85%	99.62%	99.68%	99.12%	99.86%	99.38%	99.99%	99.99%

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 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.