Colorado Medicaid eConsult Annual Report

Fiscal Year 2024-2025

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COLORADO
Department of Health Care Policy & Financing

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I. Executive Summary

Background

The Colorado Medicaid eConsult Platform[1] was launched in February 2024 by the Colorado Department of Health Care Policy and Financing (HCPF) to improve access to specialty care for Health First Colorado (Colorado Medicaid) members. This report primarily focuses on FY24-25,[2] with select performance data from FY23-24.[3] It evaluates the platform's performance over the first 17 months of implementation.

Medicaid members experience longer wait times and face more barriers to specialty care compared to those with commercial insurance.[4] To address this, HCPF selected Safety Net Connect (SNC) through a competitive procurement process to design, implement, and manage the Colorado Medicaid eConsult Platform. SNC is responsible for onboarding, training, outreach, and engagement of treating practitioners (primary care providers),[5] consulting practitioners (specialists),[6] and Regional Accountable Entities (RAEs).

The platform enables asynchronous communication (eConsult) between primary care providers and specialists, allowing them to receive timely specialty input without in-person referrals.[7] This approach promotes faster care, reduces unnecessary specialist visits, and enhances care coordination. Currently, the platform supports 21 adult and 16 pediatric specialties.

This second Annual Report offers a comprehensive analysis of eConsult activity from February 2024 through June 2025. Over this period, engagement strategies have included EHR integration, CME-accredited webinars, and RAE incentive program funding to support primary care provider adoption and utilization.

HCPF, in partnership with SNC and RAEs, continues to oversee platform operations, monitor progress, and promote stakeholder engagement.

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[1] Colorado Medicaid eConsult Program. (2024). https://www.econsultco.info
[2] Fiscal Year 2024–2025: The period from 2/1/2025 through 6/30/2025, the first five months of implementation.
[3] Fiscal Year 2023–2024: The period from 7/1/2023 through 6/30/2024
[4] Colorado Health Institute. (2019). Colorado's Unmet Demand for Specialty Care. https://www.coloradohealthinstitute.org/sites/default/files/file_attachments/Telligen%20Specialty%20Care%20Access%20Report.pdf
[5] Treating Practitioner: A member's treating physician or other qualified health care practitioner who is a primary care provider contracted with a Regional Accountable Entity to participate in the Accountable Care Collaborative as a Network Provider.
[6] Consulting Practitioner: A provider who has education, training, or qualifications in a specialty field other than primary care.
[7] Colorado Department of Health Care Policy & Financing eConsult Platform. (2024). https://hcpf.colorado.gov/eConsult-Platform

Key Findings

This report covers several key findings from analysis of eConsult performance from February 2024 through June 2025:

- **Platform Performance:** A total of 1,064 eConsults were submitted since the platform launched in February 2024. Usage peaked at 161 submissions in September 2024 during the RAE incentive program, through which HCPF allocated unspent administrative funds to each RAE to promote eConsult adoption.

- **eConsult Outcomes:** 100% of eConsults were signed off within 30 days, with an average specialist response time of less than one business day. The majority (89.9%) of eConsults were resolved through PCMP Management[8] or Further Workup Recommended, [9] helping to avoid unnecessary in-person specialist visits. Meanwhile, 8.8% resulted in Face-to-Face (F2F) Recommended,[10] indicating that an in-person specialist visit was needed.

- **Primary Care Provider Participation:** Participation (defined by the submission of an eConsult) increased significantly between FY 23-24 and FY 24-25, from 18 primary care providers to a total of 259 providers across 130 practice sites as of June 2025. All primary care providers submitted at least one eConsult, and 172 primary care providers submitted two or more.

- **Successes:** SNC achieved 100% completion of their contract performance metrics. Provider satisfaction surveys indicated overall positive feedback from providers. Primary care providers reported increased clinical confidence and improved medical knowledge, while specialists appreciated the quality of eConsults and found the process efficient when complete information was provided.

- **Challenges:** The RAE incentive program implemented between July 1 and December 1, 2024, led to an increase in eConsult utilization. However, usage declined and stabilized at fewer than 100 eConsults per month after the program ended. In FY25-26, the Department is conducting research on other ideas to increase adoption and utilization of eConsults in the SNC platform and across all HCPF approved platforms.

- **Next Steps:** Beginning July 1, 2025, the Accountable Care Collaborative (ACC) Phase III introduced restructured RAEs, updated county assignments, and a new performance standard to increase eConsult adoption (these will go into effect in the RAE contracts in 2026). The eConsult platform expanded to support specialty-to-specialty eConsults,

[8] PCMP Management: The specialist provides clinical guidance for the PCMP to manage the member's care.
[9] Further Workup Recommended: The specialist suggests additional steps, such as lab tests or clinical assessments, to obtain more information.
[10] F2F (Face to Face) Recommended: A direct appointment with a specialist is necessary.

enhancing care coordination and management of complex cases among specialists. HCPF will continue partnering with SNC and RAEs to support ongoing operations of the Colorado Medicaid eConsult Platform and find new ways to increase adoption and utilization.

II. Introduction

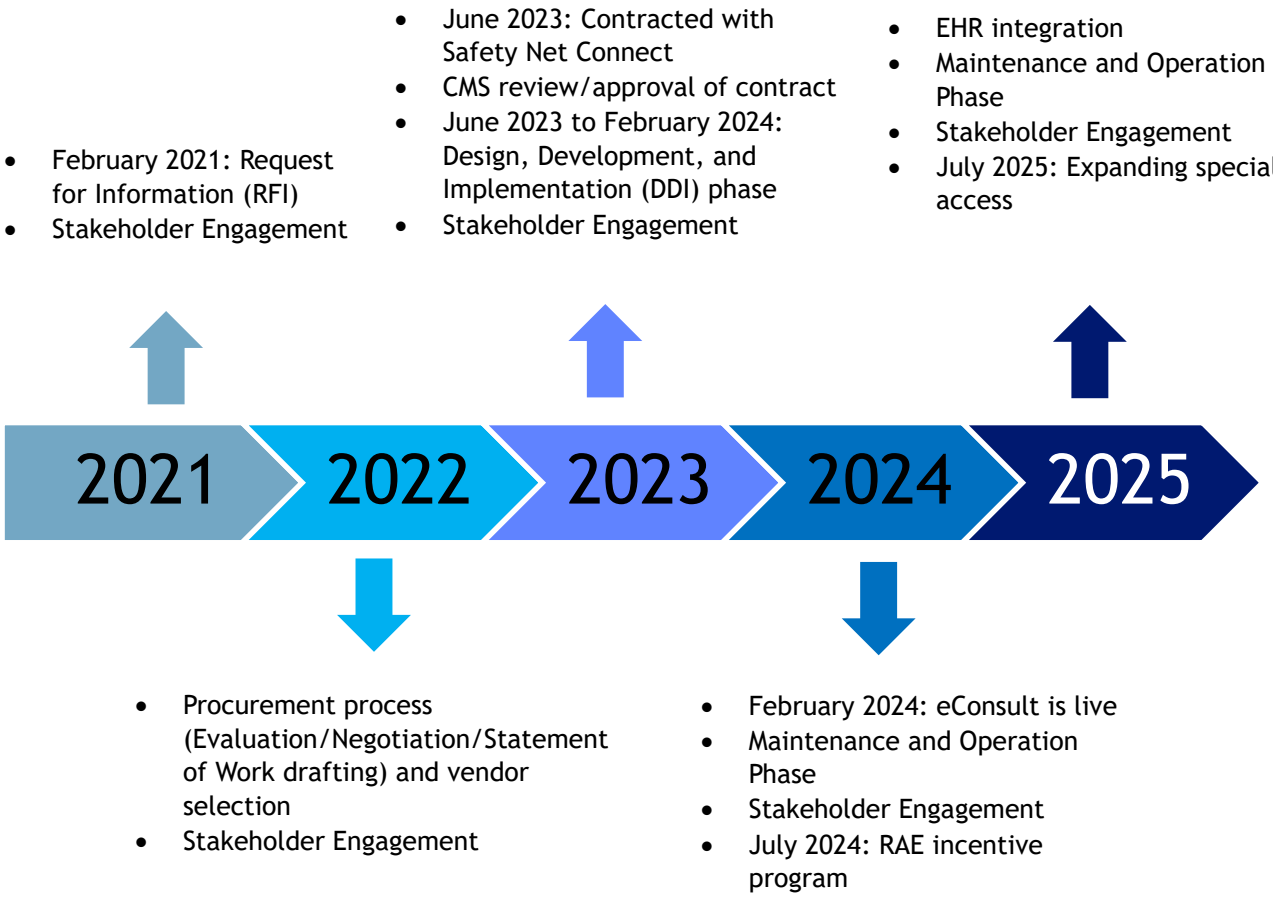
The Colorado Medicaid eConsult Platform was developed and implemented by the Department of Health Care Policy & Financing (HCPF) in partnership with Safety Net Connect (SNC) and the Regional Accountable Entities (RAEs) to expand access to specialty care for members. The platform enables secure, asynchronous communication between treating practitioners (primary care providers) and consulting practitioners (specialists), allowing primary care providers to obtain timely guidance from specialists that supports care within the primary care setting.

SNC manages platform operations, provider onboarding, and training, while RAEs promote adoption and engagement within their regions. Together, HCPF, SNC, and the RAEs support statewide implementation through electronic health record (EHR) integration, Continuing Medical Education (CME)-accredited webinars, stakeholder meetings, and targeted provider outreach.

The platform offers 21 adult and 16 pediatric specialties. All specialties have been utilized at least once, with the most frequently accessed adult specialties being endocrinology, neurology, and rheumatology. For pediatric members, the top specialties include dermatology, psychiatry, and neurology.

As of June 2025, 259 primary care providers across 130 practice sites have submitted a total of 1,064 eConsults. The complete list of specialties is available in Table 7 (Appendix). The timeline below (Figure 1) displays major milestones since the beginning of the project in 2021.

Figure 1. Timeline of eConsult



Three of the major activities from FY24-25 (RAE incentive program, EHR integration, and stakeholder engagement and outreach) are described in more detail below.

RAE Incentive Program

Between July 1 and December 1, 2024, HCPF implemented the RAE incentive program to promote eConsult adoption and utilization. Using unspent administrative funds from FY22-23, HCPF distributed incentive payments to RAEs to support promotion of the platform.

The incentive program led to a substantial increase in eConsult submissions. Prior to the program, fewer than 10 eConsults per month were submitted. After implementation, monthly submissions peaked at 161 in September 2024 and stabilized below 100 per month once the program ended.

Participation by primary care providers followed a similar trend. As of June 2024, only 18 primary care providers had submitted an eConsult. By June 2025, participation had grown to a total of 259 primary care providers, with 172 providers submitting two or more eConsults.

Though the increased utilization of eConsult during the incentive period was encouraging, the number of submitted eConsults dropped and stabilized at a lower level following the end of the program. The incentive program was successful in encouraging new providers to submit an eConsult, but not in sustaining utilization. Further details on provider participation and submission trends are presented in the "Primary Care Providers' Participation" and "eConsult Submissions" sections of this report.

EHR Integration

To improve ease of use and workflow efficiency, the Colorado Medicaid eConsult Platform integrates with EHR systems, allowing primary care providers to initiate eConsults within their existing workflows. As of June 2025, SNC completed EHR integration for 17 practice sites, with ongoing efforts to expand integration statewide. Primary care providers without EHR connectivity continue to access eConsults through the platform's secure web portal.

Stakeholder Engagement and Outreach

Throughout FY24–25, HCPF and SNC regularly presented program updates and progress during stakeholder meetings, including sessions with the ACC Provider & Community Experience Subcommittee, Aurora Health Alliance, and the Colorado Rural Health Center. These sessions provided opportunities to share progress, collect feedback, and strengthen collaboration on expanding specialty access through eConsults.

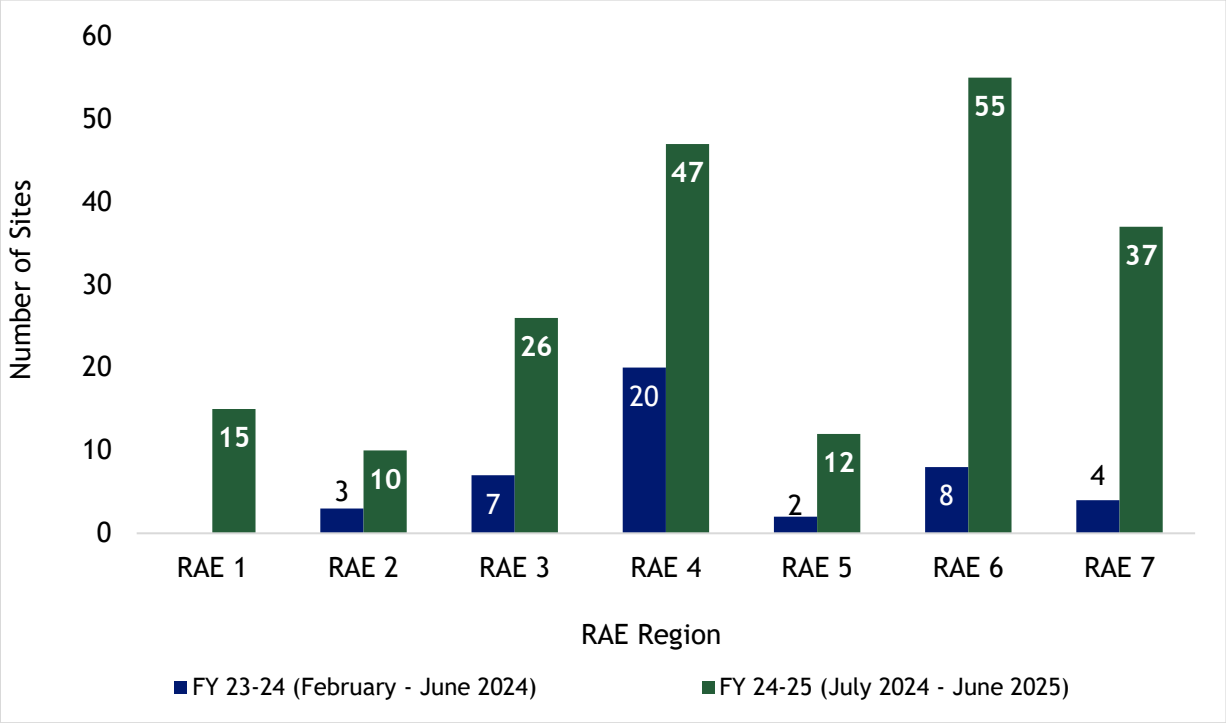
To encourage provider education and adoption, SNC partnered with ConferMed (its subcontractor for specialist recruitment and training) to host a series of specialty-specific CME webinars, open to all interested providers.

HCPF and SNC also participate in the Colorado eConsult Community of Practice, a bi-monthly collaborative forum convened by the Office of eHealth Innovation (OeHI) and The Care Collaborative (TCC). Participants include representatives from the University of Colorado School of Medicine, Denver Health, Kaiser Permanente, Children's Hospital Colorado, and Rocky Mountain Health Plans (RMHP). This forum facilitates sharing of implementation experiences, platform updates, and lessons learned to advance eConsult adoption across the state.

III. Primary Care Providers' Participation

From the platform's launch in February 2024 through June 2025, a total of 246 practice sites have enrolled in the Colorado Medicaid eConsult Platform. Enrollment means that at least one primary care provider at a site has completed the required training. These 246 sites represent those that are enrolled and trained, not necessarily those that have submitted eConsults. Figure 2 displays the total number of enrolled practice sites by RAE region by Fiscal Year.

Figure 2. Primary Care Provider Practice Sites Enrollment by RAE, February 2024 – June 2025



Overall, RAE 4 reported the highest participation with 67 sites (27.2% of all sites), followed by RAE 6 with 63 sites (25.6%). Each RAE has demonstrated growth in enrolled sites between FY23-24 and FY24-25, with RAE 4 (Health Colorado, Inc.) and RAE 6 (Colorado Community Health Alliance) showing the largest increases. This overall growth is largely attributed to the RAE incentive program implemented during FY24-25. RAE 2 (Northeast Health Partners) and RAE 5 (Colorado Access) showed more modest growth, likely reflecting the continued use of independent third-party eConsult platforms within those regions.

In RAE 1 (Rocky Mountain Health Plans), primary care providers primarily use the region's separate eConsult program Colorado Specialty CareConnect (CSCC), which serves eligible RAE 1 members. Providers can choose to participate in one or more eConsult platforms, and participation remains voluntary for primary care providers in this region. Enrollment in the statewide Colorado Medicaid eConsult Platform increased from 0 sites in FY23-24 to 15 in FY24-25, though there have been no eConsult submissions to date.

Table 1 below summarizes primary care providers' participation (providers who have submitted at least one eConsult) across FY23-24 and FY24-25. During FY23-24, a total of 18 primary care providers submitted at least one eConsult. Of these, seven submitted two or more eConsults, while 11 submitted one.

Table 1. Primary Care Providers' Participation by Fiscal Year, February 2024 – June 2025

Primary Care Provider Participation	FY 2023-2024 (2/1/24-6/30/24)	FY 2024-2025 (7/1/24-6/30/25)	Total*
Primary Care Providers Submitted One eConsult	11	85	87
Primary Care Providers Submitted Two or More eConsults	7	169	172
Total number of Primary Care Providers who submitted an eConsult	18	254	259

*The totals show unique counts for the entire period from February 2024 through June 2025, instead of adding the two fiscal years together.

In FY24–25, participation expanded substantially, with 254 primary care providers submitting at least one eConsult. Among these, 169 submitted two or more eConsults, while 85 submitted one. As of June 2025, a total of 130 practice sites were actively participating in the Colorado Medicaid eConsult platform. This increase in participation is largely attributed to the previously mentioned RAE incentive program implemented during FY24-25.

IV. eConsult Submissions

During the first five months of implementation in FY23-24, a total of 31 eConsults were submitted. In FY24–25, utilization grew substantially with 1,033 additional eConsults, bringing the cumulative total to 1,064 eConsults since the platform's launch.

To provide a comprehensive view of eConsult activity on the Colorado Medicaid eConsult Platform, all data presented in this and subsequent sections reflect the full total of 1,064 eConsults submitted since the program started.

RAE 1 is not included because it operates a separate eConsult program (CSCC) for its members. Participation in the statewide Colorado Medicaid eConsult Platform remains voluntary, and no submissions were recorded.

Among the other RAEs, RAE 4 reported the highest number of eConsults (371 or 34.9% of all submissions). RAEs 2 and 5 showed comparatively lower utilization, which likely reflects the use of third-party eConsult platforms operating independently within those regions. Most eConsults (86.5%) originated in urban areas, which is expected given the volume of members who live there.

Figure 3 below displays the eConsult submission by RAE and by county designation as rural, urban, or frontier.

Figure 3. eConsult Submissions by RAE by County Designation, February 2024 – June 2025

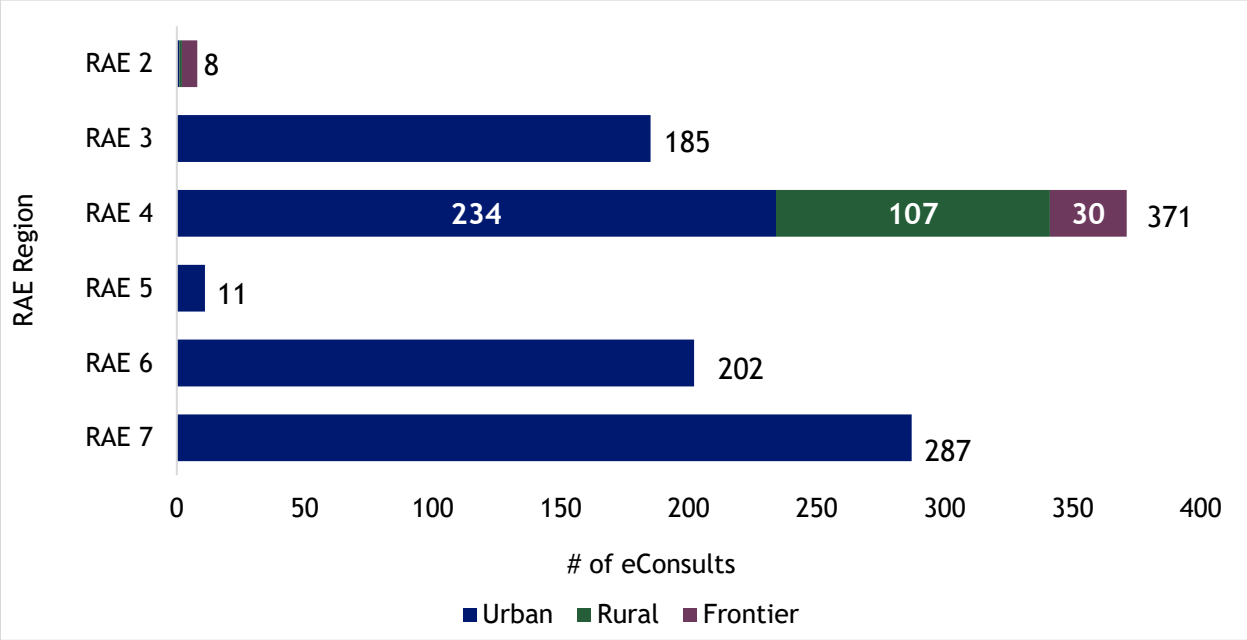
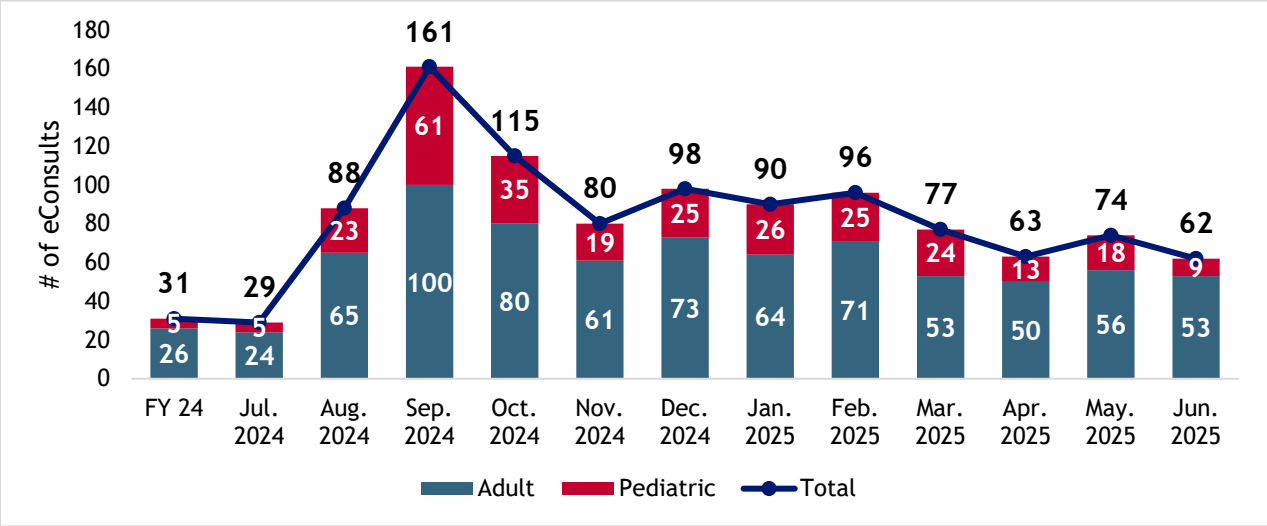


Figure 4 below presents total eConsult submissions by month. Data from February to June 2024 are grouped and reported as a single entry labeled "FY24" because each of those initial months recorded 10 or fewer eConsults due to the program's early implementation phase.

Figure 4. eConsults Submissions by Month, February 2024 – June 2025



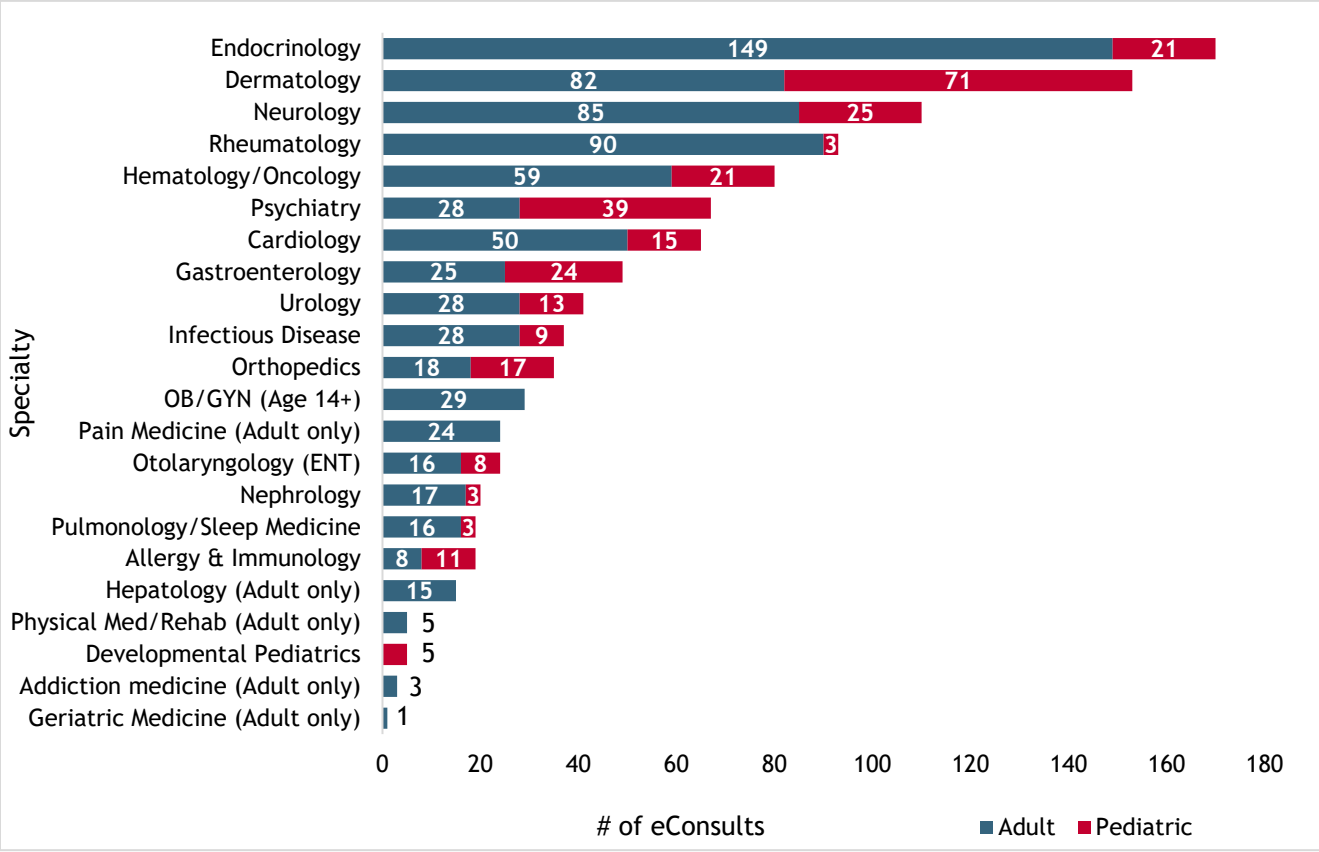
As shown in Figure 4, utilization peaked at 161 eConsults in September and 115 in October 2024. This trend suggests that short-term financial incentives were effective in accelerating early adoption; however, sustained utilization will require continued engagement and integration into regular clinical workflows.

Figure 5 displays eConsult submissions by specialty from February 2024 through June 2025. Among adult specialties, the highest volumes were observed in endocrinology (n = 149),

rheumatology (n = 90), and neurology (n = 85). For pediatric consultations, the most frequently utilized were dermatology (n = 71), psychiatry (n = 39), and neurology (n = 25).

Additionally, the distribution aligns with statewide specialty access challenges previously identified by HCPF, reinforcing the eConsult platform's role in improving timely guidance for high-demand specialties. Figure 5 below shows eConsults submissions by specialty area.

Figure 5. eConsult Submissions by Specialty, February 2024 – June 2025



V. eConsult Outcomes

Of the 1,064 eConsults submitted during the study period, 1,056 were completed with a designated closed code, while five were administratively closed[11] and three were cancelled[12].

Among the closed cases, the majority, 70.0% (n = 739), were resolved as PCMP Management, indicating that the members' needs could be fully addressed by the primary care provider. An additional 19.9% (n = 210) were categorized as Further Workup Recommended, where specialists advised additional diagnostic testing or assessments, but care remained within the primary care setting. Figure 6 below displays the eConsult outcomes over the study period.

[11] Administrative Closure: The eConsult has not been signed off by the PCMP within 30 days of the specialist's response.
[12] Cancelled: PCMP withdraws an eConsult due to reasons such as resolving the issue or Member ineligibility.

Collectively, PCMP Management and Further Workup Recommended represented 89.9% (n = 949) of all closed eConsults. These outcomes demonstrate the platform's strong potential to reduce unnecessary in-person referrals, support timely clinical decision-making, and enhance continuity of care within the primary care environment. Face-to-Face (F2F) Recommended accounted for 8.8% (n = 93), and Specialty Change[13] made up the remaining 1.3% (n = 14). Figure 6 below displays these findings.

Figure 6. eConsult Outcomes, February 2024 – June 2025

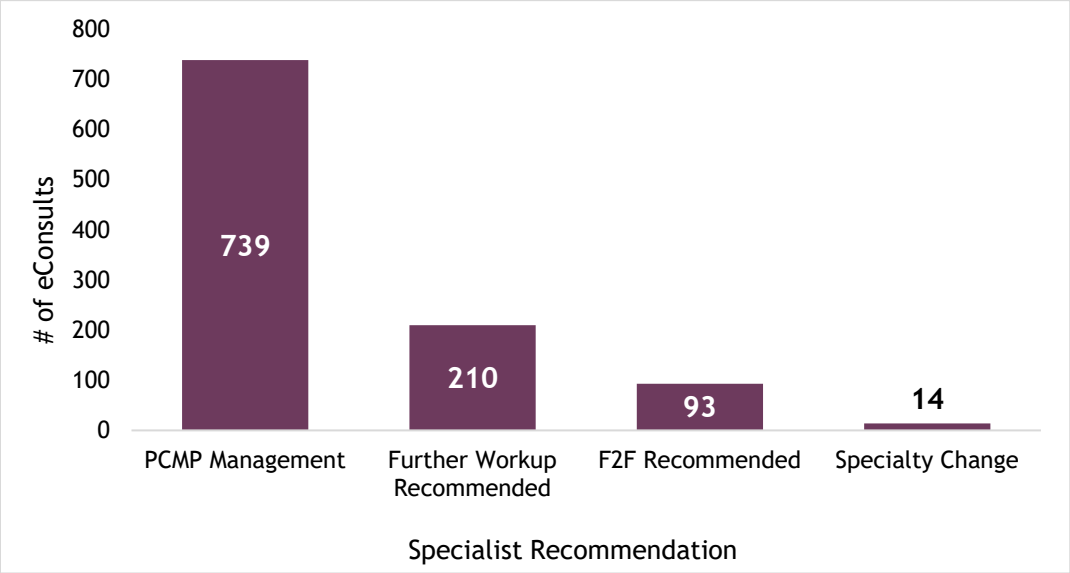
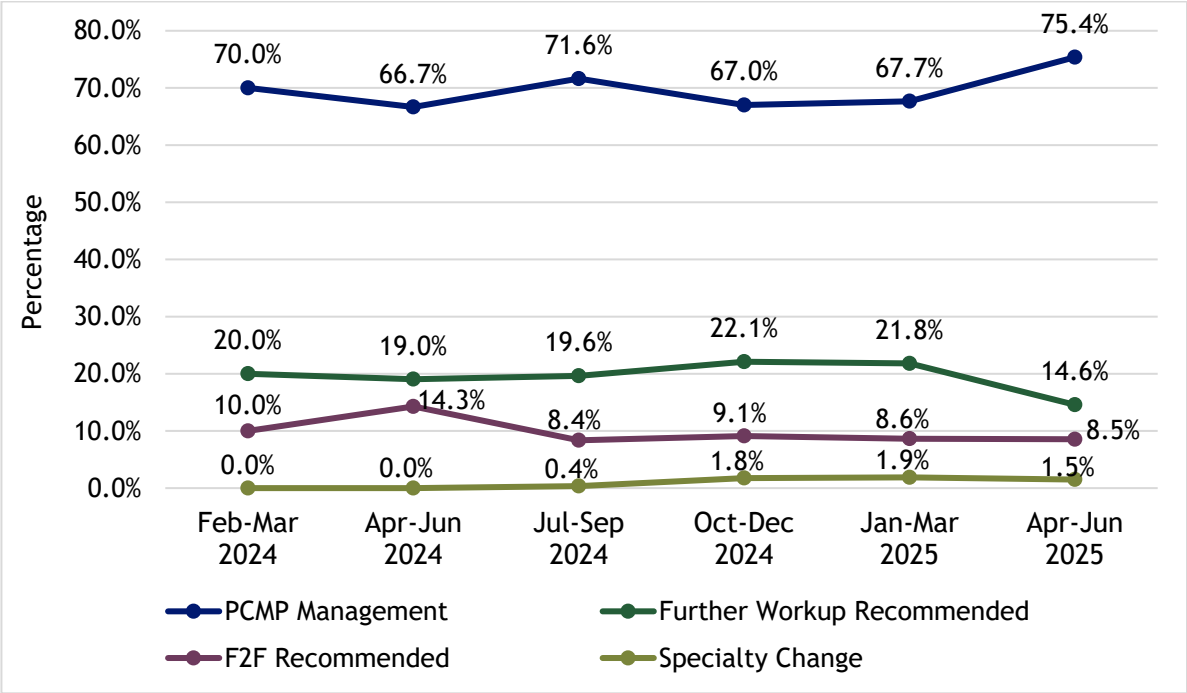


Figure 7 displays the quarterly percentages of eConsult outcomes, with each outcome represented by a unique color: PCMP Management (dark blue), Further Workup Recommended (dark green), Face-to-Face (F2F) Recommended (purple), and Specialty Change (light green). Since the platform launched in February 2024, the first reporting period covers only February to March 2024.

[13] Specialty Change: Specialist determines the question is most appropriate for a different specialty. PCMP must submit a new eConsult.

Figure 7. Percentage of eConsult Outcomes by Quarter, February 2024 – June 2025



PCMP Management remained the most frequent outcome, averaging 70.0% of all eConsults, followed by Further Workup Recommended at 19.9%. In the most recent quarter (April–June 2025), the proportion of eConsults resulting in PCMP Management increased to 75.4%, while Further Workup Recommended declined to 14.6%. These trends indicate that primary care providers are able to manage cases with guidance from specialists utilizing eConsult, reducing the need for in-person specialty visits.

PCMP Management and Further Workup Recommended

A closer look at the 949 eConsults that resulted in PCMP Management and Further Workup Recommended shows how the platform is helping primary care providers manage member care within the primary care setting. These eConsults collectively supported 865 unique members from February 2024 through June 2025.

Among these members, 74 had multiple eConsults during the reporting period, including a few who had as many as five separate eConsults, all of which were resolved with either PCMP Management or Further Workup Recommended outcomes. One example involved a rural member whose eConsults were all managed within primary care, avoiding long-distance travel for specialty visits. This illustrates how the platform reduces geographic barriers, improves continuity of care, and ensures access to specialty expertise for members in underserved communities.

F2F (Face-to-Face) Recommended and Specialty Change

While the majority of eConsults were resolved within primary care, some cases required direct specialty intervention. A total of 93 eConsults were categorized as F2F Recommended, indicating that an in-person specialist visit was necessary. As shown in Table 2, hematology/oncology (n = 18) was the most common specialty requiring a direct appointment, followed by endocrinology (n = 16) and neurology (n = 9). These findings suggest that while some specialty questions can be resolved electronically, complex or high-acuity conditions continue to require referrals. Table 2 summarizes the eConsults resulted in F2F recommended by adult and pediatric members.

Table 2. eConsults Resulted in F2F Recommended, February 2024 – June 2025

Specialty	Adult eConsults	Pediatric eConsults	Total eConsults
Hematology/Oncology	16	2	18
Endocrinology	16	0	16
Neurology	9	0	9
Dermatology	3	5	8
Psychiatry	6	0	6
Urology	2	4	6
Pain Medicine	5	0	5
Pulmonology/Sleep Medicine	3	2	5
Rheumatology	5	0	5
Cardiology	2	2	4
Orthopedics	1	3	4
Gastroenterology	2	0	2
Nephrology	2	0	2
Geriatric Medicine	1	0	1
Hepatology	1	0	1
Otolaryngology (ENT)	0	1	1
Total	**74**	**19**	**93**

Table 3 below presents the eConsults resulted in Specialty Change by adult and pediatric members. Specialty Change means that the responding specialist determined that the clinical question would be more appropriately addressed by a different specialty.

Table 3. eConsults Resulted in Specialty Change, February 2024 – June 2025

Specialty	Adult eConsults	Pediatric eConsults	Total eConsults
Hematology/Oncology	0	3	3
Endocrinology	1	1	2
Neurology	2	0	2
Pain Medicine	2	0	2
Physical Med/Rehab	2	0	2
Dermatology	0	1	1
Rheumatology	1	0	1
Urology	1	0	1
Total	**9**	**5**	**14**

Fourteen eConsults resulted in a Specialty Change. As summarized in Table 3, hematology/oncology (n = 3) accounted for the highest number of specialty changes, followed by endocrinology (n = 2) and neurology (n = 2). Collectively, these cases represent approximately 10% of all closed eConsults, underscoring the platform's effectiveness in triaging patient needs.

eConsult Outcomes by Specialty

Table 4 summarizes the distribution of eConsult outcomes across the ten most frequently utilized specialties, combining data from both adult and pediatric eConsults. Infectious Disease, with 37 eConsults, had the highest rate of PCMP Management (97.3%), with no cases requiring a face-to-face visit or specialty change. High PCMP Management rates were also observed in dermatology (86.2%), psychiatry (84.6%), and rheumatology (82.8%), indicating that most cases in these specialties were effectively managed within primary care settings.

Table 4. Percentage of eConsult Outcomes by Top Ten Specialties, February 2024 - June 2025

Specialty/ Number of eConsult with a Closed Code	Percentage of PCMP Management	Percentage of Further Workup Recommended	Percentage of F2F Recommended	Percentage of Specialty Change	Total
Infectious Disease (n=37)	97.3%	2.7%	0.0%	0.0%	100%
Dermatology (n=152)	86.2%	7.9%	5.3%	0.7%	100%
Psychiatry (n=65)	84.6%	6.2%	9.2%	0.0%	100%
Rheumatology (n=93)	82.8%	10.8%	5.4%	1.1%	100%
Endocrinology (n=169)	66.3%	23.1%	9.5%	1.2%	100%
Gastroenterology (n=48)	64.6%	31.3%	4.2%	0.0%	100%
Hematology/ Oncology (n=80)	63.8%	10.0%	22.5%	3.8%	100%
Cardiology (n=65)	58.5%	35.4%	6.2%	0.0%	100%
Neurology (n=109)	56.0%	33.9%	8.3%	1.8%	100%
Urology (n=41)	36.6%	46.3%	14.6%	2.4%	100%

In contrast, urology demonstrated the lowest PCMP Management rate (36.6%) and the highest proportion of Further Workup Recommended (46.3%), suggesting that these cases often required additional diagnostic steps before resolution. Hematology/oncology recorded the highest percentage of Face-to-Face (F2F) Specialist Visits Recommended (22.5%) and the highest rate of Specialty Change (3.8%), reflecting the complex, multidisciplinary nature of care within that specialty area.

Overall, these results reinforce the platform's ability to prioritize in-person specialty visits for more complex cases, while enabling most primary care generated clinical questions—particularly in dermatology, psychiatry, and rheumatology—to be resolved effectively within the primary care environment.

VI. Contractor's Performance

Since the launch of the Colorado Medicaid eConsult Platform, SNC has been responsible for maintaining system performance and ensuring compliance with all contractual standards.

Continuous monitoring throughout FY24-25 confirmed that SNC consistently met or exceeded required performance benchmarks. These standards are designed to ensure timely use of the platform, promote adoption among participating practitioners, and enhance access to specialty care for members.

Table 5 summarizes the outcomes of the six contractual performance measures for FY24-25. As shown, SNC achieved 100 percent compliance across all metrics, reflecting stable operations and a maturing program infrastructure, and in several areas, performance exceeded the established benchmark.

Table 5. Outcomes of Contractor's Performance, July 2024 – June 2025

Performance Standards Descriptions	FY 25 Outcomes (7/1/24-6/30/25)
1. At least 95% of eConsults are signed off by a PCMP within 30 days after the date on which the eConsult is closed.	✓ Achieved
2. 100% of eConsults are either signed off by the PCMP or closed via an administrative closure within 30 days after the date on which the eConsult is closed.	✓ Achieved
3. Contractor shall ensure that PCMP enrollment in the eConsult Platform increases by 2% every six months through the lifetime of the contract.	✓ Achieved
4. 95% of eConsults must be responded to by a specialty provider within three business days.	✓ Achieved
5. 100% of eConsults must be responded to by a specialty provider within seven business days.	✓ Achieved
6. 100% of eConsults routed to Colorado-based specialty provider network providers in the appropriate specialty field who are available.	✓ Achieved

VII. Providers' eConsult Experience

The Colorado Medicaid eConsult Platform's success depends not only on performance metrics but also on provider satisfaction and engagement. To assess these factors, HCPF and SNC jointly administer two surveys: the Satisfaction Survey and the Annual Experience Survey. The Satisfaction Survey, available within the eConsult platform, is completed by both primary care providers and specialists following each submitted eConsult. It measures immediate user feedback on ease of use, quality of clinical guidance, and likelihood to recommend the platform.

The Annual Experience Survey, distributed at the end of each fiscal year, captures broader insights on training, technical support, workflow integration, and overall satisfaction from all enrolled providers regardless of whether they submitted or responded to an eConsult during the reporting period.

The FY23-24 surveys had a much lower response rate than FY24-25, reflecting the program's early implementation phase. As a result, the two years' results are not directly comparable, and this report presents survey findings only for FY24-25.

Satisfaction Survey Results

In FY24-25, a total of 793 primary care provider surveys and 645 specialist surveys were completed. Overall satisfaction remained high across both provider groups.

Primary care providers reported positive experiences, with average scores of 4.6 or higher out of 5 across all questions (Table 6). Providers praised the platform's ease of use, timeliness of specialist responses, and the clinical relevance of feedback provided. Many noted that eConsults enhanced their knowledge, improved patient care planning, and reduced the need for referrals particularly in areas with limited specialty access.

Specialists also reported favorable experiences, with average scores of 4.0 or higher out of 5 for all items. Notably, 79.8% confirmed receiving sufficient clinical information to provide an informed response. Specialists highlighted the efficiency of well-prepared eConsults but identified opportunities for improvement particularly around incomplete documentation, follow-up communication after eConsult closure, and technical challenges such as re-authentication and attachment uploads.

Table 6. Satisfaction Survey Results, July 2024 – June 2025

Primary Care Provider Questions	*FY 25 Average Scores (n=793)*
1. How easy is it to use the eConsult platform?	4.6
2. How did the eConsult response meet your clinical needs?	4.6
3. How likely would you recommend eConsult to other Providers?	4.7
Specialist Questions	***FY 25 Average Scores (n=645)***
1. How easy is it to use the eConsult platform?	4.0
2. How appropriate was the eConsult you received?	4.1
3. Did you receive the necessary information?	79.8% Yes (483 out of 605)

Qualitative comments emphasized that the platform's asynchronous communication model provided timely, actionable guidance, particularly in rural and underserved communities. Both provider groups also expressed appreciation for the growing range of specialties available through the platform. Many providers expressed that they learn from specialists and improve their knowledge and confidence in managing chronic conditions and supporting care coordination. However, recurring themes included the need for clearer closure processes, the ability to submit follow-up questions, and expanded EHR connectivity to reduce administrative steps. Some providers also ran into technical issues with uploading documents and access challenges due to network restrictions. Specialists noted a lack of important clinical information, such as patient age, weight, BMI, lab results, medication lists, and vital signs, which limited their ability to provide helpful guidance.

Annual Experience Survey Results

The Annual Experience Survey gathered additional feedback from 30 primary care providers and 9 specialists. Despite a lower than ideal response rate, results were broadly positive. Primary care providers rated onboarding and training experiences highly (average of 4.3 out of 5), with 91.3% finding the platform easy to use. Most respondents indicated that eConsult participation improved their confidence in managing chronic conditions and enhanced coordination of care. One primary care provider shared that, *"My patient has been on a waitlist that is up to 2 years to get in with a rheumatologist. This helped me navigate my patients care to provide support in the meantime."*

Common challenges cited by primary care providers included the limitation of the platform to Medicaid members only, the inability to reopen or follow up on closed cases, and workflow inefficiencies such as manual documentation uploads. Respondents recommended expanded specialty options (e.g., wound care, nutrition), greater EHR integration, and allowing clinical staff to assist with eConsult submission.

Specialists reported similarly positive experiences, rating ConferMED's onboarding and technical support at 4.4 out of 5. Specialists agreed that the eConsult platform supports primary care providers in managing patient care (average 4.6 out of 5) and improves interdisciplinary communication. However, they emphasized the need for standardized documentation guidelines and requested functionality to avoid receiving new eConsults during weekends or holidays, when timely responses may be more difficult to provide.

Together, survey results indicate strong and sustained provider satisfaction with the eConsult platform, coupled with constructive feedback that will inform future system enhancements and training initiatives.

VIII. Lessons Learned and Moving Forward

Building on the progress achieved and lessons learned in FY24–25, HCPF remains committed to advancing the eConsult Platform as a key tool for improving access to specialty care and supporting provider collaboration across Colorado. Lessons from this year will directly inform priorities for FY25-26 focusing on sustainability, integration, and system expansion.

1. Sustaining Utilization Through Long-Term Engagement Strategies: Provider engagement is critical for increasing statewide eConsult utilization. Solutions may include integrating eConsult use into regular quality improvement initiatives and exploring value-based payment models to sustain growth over time. Utilization of eConsults will be incorporated as a formal RAE performance metric through the ACC program starting in FY26-27 to ensure accountability and alignment with broader Medicaid delivery system goals.
2. Improving Workflow Integration and System Functionality: Expanding EHR integration remains a top priority. SNC will continue working with additional practice sites to embed eConsult functionality directly within existing workflows, minimizing manual steps and duplication. Enhancements could also address user feedback by simplifying authentication processes, improving file upload functionality, and exploring options for follow-up communication within the platform.
3. Strengthening Documentation Quality, Specialist Communication and Education: HCPF and SNC will continue to collaborate with RAEs, professional associations, and the Colorado eConsult Community of Practice to promote adoption and share implementation best practices. Targeted training, CME-accredited webinars, and data-driven outreach will focus on specialties and regions with lower utilization. Future education efforts will emphasize standardized documentation practices to improve submission quality and specialist response efficiency.
4. Expanding Specialty Access and Use Cases: In 2025, the platform expanded to include specialty-to-specialty eConsults, allowing eligible specialists to initiate consultations with other specialists, and added a new Staff Submitter User Role, enabling designated clinic staff such as medical assistants, to initiate and submit eConsults on behalf of primary care providers. These enhancements will improve workflow efficiency, reduce administrative barriers, and integrate eConsults into standard clinic operations.

IX. Conclusion

Since its launch in February 2024, the Colorado Medicaid eConsult Platform has continued to support expanded access to specialty care for members. After 17 months of operation, the platform has engaged 259 primary care providers across 130 practice sites, who collectively submitted 1,064 eConsults. The majority of eConsults were resolved through PCMP management or Further Workup Recommended, enabling member care to remain within the primary care setting and reducing unnecessary in-person specialty visits. All eConsults were signed off within 30 days, and specialists responded within an average of one business day,

demonstrating consistent operational performance. Findings from the surveys highlight continued practitioner satisfaction within the platform's usability, timeliness, and clinical utility as well as areas for improvement.

A key lesson from FY24–25 is the need to better understand the factors for sustained eConsult utilization and provider participation. While the incentive funding led to a short-term increase in utilization, this increase was not sustained after the incentive period was over. HCPF will evaluate evidence-based approaches to increase eConsult adoption across regions by assessing current utilization patterns, barriers, and types of support that most effectively encourage providers to use the platform. Findings will help develop strategies to expand adoption and sustain eConsult use statewide.

Overall, FY24–25 represents a year of operational maturity. The platform has demonstrated its value in promoting timely specialty input and enhancing primary care capacity. The lessons learned demonstrate that continued investment in workflow optimization, provider engagement, and specialty network growth will be key to increasing utilization and maximizing impact for Medicaid members. HCPF remains focused on sustaining growth, improving system usability, and enhancing provider and member experiences.

X. Appendix

Available Specialties

Table 7 lists the available specialties. The program is designed to enhance member access to specialty care by utilizing a broad network of specialists, including both Colorado-based and national providers. All specialists must be licensed to practice in Colorado and enrolled as a Medicaid provider.

Table 7. Available Specialties, February 2024 – June 2025

Adult Specialties (21)			
Addiction Medicine Allergy/ Immunology Cardiology Dermatology Endocrinology	Gastroenterology Geriatric Medicine Hematology/ Oncology Hepatology Infectious Disease	Nephrology Neurology OB/Gynecology* Orthopedics Otolaryngology (ENT) Pain Medicine	Physical Med/Rehab Psychiatry Pulmonology/Sleep Medicine Rheumatology Urology
Pediatric Specialties (16)			
Allergy/ Immunology Cardiology Dermatology Developmental Pediatrics	Endocrinology Gastroenterology Hematology/ Oncology Infectious Disease	Nephrology Neurology Orthopedics Otolaryngology (ENT)	Psychiatry Pulmonology Rheumatology Urology

* OB/GYN is available for adolescents ages 14 and up

Results of Annual Experience Surveys

The survey includes questions on training, technical support, platform usability, job satisfaction, and open-ended feedback. If a respondent answered “no” to a question indicating they didn’t have the related experience, the survey ended for that user. Therefore, the number of responses varies slightly across sections.

Table 8. Results of Annual Experience Survey for Primary Care Providers, July 2024 – June 2025

Questions for Primary Care Provider	FY 25 Results
Training (n=30)	
1. Please rate your overall satisfaction with the communication you had with Safety Net Connect (SNC) during onboarding and training.	4.3 out of 5-point scale

Questions for Primary Care Provider	FY 25 Results
2. How would you rate the level of depth and clarity of the training provided by SNC, considering factors such as thoroughness, complexity, ease of understanding and relevance to your role as a PCMP?	4.4 out of 5-point scale
3. Since completing training, have you activated your profile in the eConsult Platform?	90.0% Yes
4. What has prevented you from activating your profile?	I do not plan to use eConsult. The indemnification clause.
Utilization (n=27)	
5. Have you submitted at least 1 eConsult?	85.2% Yes
6. Why not?	I have not needed it currently. I did not remember eConsult as an option. The members who need advice will need long-term care.
Technical Support (n=23)	
7. Have you had to contact customer support for any technical issues?	43.5% Yes
8. How satisfied are you with the customer support you received?	4.7 out of 5-point scale
eConsult Platform (n=23)	
9. Do you find the eConsult Platform easy to use?	91.3% Yes
10. Are the user guides and training videos helpful for refresher on system functions?	73.9% Yes 26.1% NA
11. Do you think the availability of templates is useful?	43.5% Yes 4.3% No 52.2% NA
12. How satisfied are you with the efficiency of the eConsult Platform in facilitating communication with specialty providers?	4.5 out of 5-point scale
13. Please rate your overall satisfaction with the use of the eConsult Platform.	4.5 out of 5-point scale
Job Satisfaction (n=22)	
14. Does the eConsult Platform increase your knowledge in treating medical conditions that would otherwise require assessment from a specialist?	81.8% Yes

Questions for Primary Care Provider	FY 25 Results
15. Does the eConsult Platform improve your confidence in treating medical conditions that require specialty advice?	90.9% Yes
16. Does the eConsult Platform help you improve the quality of care for your patient?	90.9% Yes
17. Do you agree that the eConsult Platform has a positive impact in treating a patient's health condition?	4.5 out of 5-point scale
18. Do you agree that the eConsult Platform has improved your ability to provide timely and comprehensive care to your patients?	4.4 out of 5-point scale
Open-Ended Question	**Summary of Responses**
19. What has gone well with your experience participating in eConsults?	Primary care providers noted that eConsults deliver fast, timely responses that enable them to quickly implement specialist recommendations and improve interim patient care.
20. What has not gone well with your experience participating in eConsults?	Primary care providers identified several challenges, including the platform's limitation to Medicaid patients, the inability to follow up on closed consults or continue communication with the same specialist, and workflow inefficiencies such as uploading documentation separately or the inability for medical assistants to submit on behalf of providers. Additionally, some providers reported billing difficulties when eConsults occur on the same day as patient visits.
21. What thoughts do you have about how to improve eConsult implementation and use within your clinic setting?	Primary care providers shared the need for better EHR integration, expanded specialty options such as nutrition, wound care, and pediatrics, and mentioned that remembering to use the platform consistently remains a challenge in daily practice.
22. How has eConsult implementation impacted your ability to provide care within your clinic setting?	Primary care providers reported that eConsults provide specialist input within hours or days, helping them adjust treatment plans quickly and prevent delays; however, they noted the service is limited to Medicaid patients.

Table 9. Results of Annual Experience Survey for Specialists, July 2024 - June 2025

Questions for Specialists	FY 25 Results
Training (n=9)	
1. Please rate your overall satisfaction with the communication you had with ConferMED during onboarding and training.	4.4 out of 5-point scale
2. How would you rate the level of depth and clarity of the training provided by ConferMED, considering factors such as thoroughness, complexity, ease of understanding and relevance to your role as a specialist?	4.2 out of 5-point scale
Technical Support (n=9)	
3. Have you had to contact customer support for any technical issues?	44.4% yes
4. How satisfied are you with the customer support you received?	4.5 of out 5-point scale
Job Satisfaction (n=9)	
5. Have you received at least 1 eConsult from a Primary Care Provider?	100% Yes
6. How satisfied are you with the clarity and completeness of the information provided by PCMPs when seeking clinical guidance through the eConsult Platform?	3.8 out of 5-point scale
7. Do you agree that providing guidance to Primary Care Providers using the eConsult Platform has had a positive impact on your workload as a specialist?	4.0 out of 5-point scale
8. Do you agree that the eConsult Platform has improved your ability to support and assist Primary Care Providers in the management of their patients' plan of care?	4.6 out of 5-point scale
9. If back and forth dialogue occurred during the eConsult, how satisfied are you with the extra clinical information provided in helping you develop a care plan for the patient?	4.4 out of 5-point scale
Open-Ended Question	**Summary of Responses**
10. What has gone well with your experience participating in eConsults?	Specialists shared that templates are helpful, the platform is easy to use and user-friendly, and it helps prevent unnecessary in-person consultations.

Questions for Specialists	FY 25 Results
11. What has not gone well with your experience participating in eConsults?	Specialists reported challenges with incomplete information in eConsult requests, which limits consultation quality. The two-step access requirements make it harder to retrieve account.
12. What thoughts do you have about how to improve eConsult implementation and use within your clinic setting?	Specialists suggested improvements such as limiting eConsults on weekends and holidays, enabling direct communication with PCPs through virtual meetings, and developing specialty-specific guidelines for required information
13. How has eConsult implementation affected your ability to provide specialty care within your clinic setting?	Specialists shared that eConsults improve communication between specialists and primary care providers, helping deliver adequate care for many patients.