



## Policy and Procedure

<b>Policy Name:</b> Selection & Retention of Providers	<b>Policy#:</b> PNS-202	<b>Version#:</b> 24
<b>Author Department:</b> Provider Recruitment & Contracting	<b>Origination Date:</b> 6/26/2008	
<b>Business Units Impacted:</b> All	<b>Date Last Reviewed:</b> 11/1/2024	
<b>Products/LOBs:</b> All	<b>Date Approved by CPT:</b> 11/21/2024	

### DEFINITIONS:

None

### SCOPE:

This policy applies to all prospective and newly contracted providers.

### PURPOSE:

The purpose of this policy is to ensure that our members have sufficient access to physical and behavioral health providers.

### STATEMENT OF POLICY:

Colorado Access will maintain a process to identify providers for potential network participation and for the retention of providers currently contracted for network participation. Colorado Access will not discriminate in its selection process against providers that serve high-risk populations or who specialize in conditions that require costly treatment. In addition, Colorado Access will not discriminate with respect to the participation, reimbursement, or indemnification of any provider who is acting within the scope of his or her license or certification under applicable Colorado State law, solely on the basis of that license or certification.

### PROCEDURES:

#### 1. Provider Selection

- A. Either Colorado Access or interested providers may initiate a request for participation in one or more Colorado Access lines of business.
- B. In order to be eligible to participate in the network, the provider must hold all necessary registrations, permits, licenses, state validation, and other approvals required by Colorado State or federal Law to perform the obligations of the contractual agreement. Colorado Access will not contract with unlicensed providers, including unlicensed psychotherapists, unless there is a demonstrated network need to meet member linguistic/cultural needs, or for service provision in rural under-served areas.
- C. Additions to the Colorado Access network may be required in existing service areas and would be required when a service area is undergoing expansion.
  1. In establishing and maintaining the provider network, the following factors are taken into consideration:
    - The anticipated enrollment;
    - The expected utilization of services, taking into consideration the characteristics and health care needs of specific populations represented in the enrolled population;



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- Standards of appropriate case load for providers;
  - The numbers, types and specialties of providers required to furnish the contracted services;
  - The number of network providers who are not accepting new patients;
  - The geographic locations of providers and members, considering the distance, travel time, the means of transportation ordinarily used by members, and whether the location provides physical access for members with disabilities; and
  - The racial and ethnic communities being served.
2. In prospective new service areas, Colorado Access will identify providers and facilities, obtain contracts, and generate a list of those providers and facilities that intend to contract with Colorado Access. The list will be included in the application for licensure to the Colorado Division of Insurance or Centers for Medicare and Medicaid Services. This information is also provided to the Department of Health Care Policy and Financing (HCPF) for network adequacy review.
3. In existing service areas, ensuring adequate access to providers may require that Colorado Access identify specific types of providers by specialty. Prospective providers may be identified by Provider Recruitment, Provider Network Services or Provider Contracting through requests submitted by the provider via the website or provider email, member feedback, recommendations that are forwarded by Customer Service, Care Management or Utilization Management, feedback and/or a request made by a currently contracted provider, or Colorado Access staff referrals.
4. Colorado Access also performs a quarterly network adequacy review for contracted lines of business and will tailor contracting activities to those findings and specific network needs and contract requirements.
5. Colorado Access shall notify HCPF, in writing, of its decision to terminate any existing participating provider agreement where such termination will cause the delivery of Covered Services to be inadequate in a given area. The notice to HCPF shall include a description of how the Contractor will replace the provision of Covered Services at issue.
- D. In the case of either a new area expansion or additions to the existing service area, Provider Recruitment, Provider Network Services and Provider Contracting may utilize community health and hospital system directories, websites, and/or cold-call prospecting to identify prospective providers. In all instances contracting efforts will include essential community providers.



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- E. In an area where there is demonstrated behavioral health network adequacy, prospective behavioral health providers will submit information in order for Colorado Access to evaluate whether a provider is likely to meet criteria and has a specialty expertise that would enhance the existing network.
- F. If Colorado Access declines to include the individual or groups of providers in its network, written notice of the reason for this decision will be given to the provider or group.
- G. Once a provider is identified, Provider Contracting will offer a contract which will include all relevant lines of business.
- H. When an agreement is reached, the provider signs the contract and returns it to Provider Contracting. Upon receipt of the contract from the provider, providers are screened for sanctions pursuant to CMP206. Provider Contracting notifies Credentialing to initiate the credentialing process, as applicable and required (see CR301 Practitioner Credentialing and Recredentialing and CR305 Assessment of Organizational Providers).

## 2. Provider Training and Retention

- A. Once a provider contract is executed, Provider Network Services will reach out via phone or email to provide contact information for assistance and offer to conduct a new provider training.
- B. Provider Network Services, Provider Recruitment or Practice Support will conduct site visits to network providers as needed.
- C. Provider Network Services contacts are listed on the Colorado Access website or providers may email [ProviderNetworkServices@coaccess.com](mailto:ProviderNetworkServices@coaccess.com).

## REFERENCES:

CMP206 Sanctions Screening

CR301 Practitioner Credentialing and Recredentialing

CR305 Assessment of Organizational Providers

RAE Contracts Region 3 and Region 5, Ex. B-9, Statement of Work, and CHP Contract, Ex. B, Statement of Work § 9

42 CFR §§ 455.100-106; 42 CFR §§ 455.400-470; 45 CFR § 438.12

## ATTACHMENTS

None



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### POLICY HISTORY:

#### SUMMARY OF REVIEW/REVISION/APPROVAL DATES:

Version 1 - 12/01/03, Version 2 - 10/01/05, Version 3 - 11/01/06, Version 4 - 08/07/07, Version 5 - 06/26/08, Version 6 - 10/29/08, Version 7 - 10/22/09, Version 8 - 01/14/10, Version 9 - 04/23/10, Version 10 - 06/14/12, Version 11 - 01/09/13, Version 12 - 02/20/13, Version 13 - 10/15/14, Version 14 - 10/29/15, Version 15 - 11/12/15, Version 16 - 10/23/17, Version 17 - 10/23/18, Version 18 - 12/15/19, Version 19 - 12/23/19, Version 20 - 05/07/21, Version 21 - 12/07/22, Version 22 - 11/27/23, Version 23 - 01/24/24, Version 24- 11/21/2024

**APPROVAL BODY:** COA Core Policy Team

**APPROVAL DATE:** 11/21/2024