



## Bulletin No. B-4.131

# Policy Directives for Credentialing Standards and Timeline for Mental Health, Behavioral Health, and Substance Use Disorder Providers

### I. Background and Purpose

The Public Health Emergency (PHE) to address the COVID-19 pandemic will end on May 11, 2023, and is expected to increase the number of Coloradans using health benefit plan networks to seek mental health, behavioral health, and substance use disorder (SUD) services. The Colorado Division of Insurance (the Division) has received complaints from providers related to their ability to participate in insurance carriers' health benefit plan networks and from consumers regarding their ability to receive care from in-network behavioral health, mental health, and SUD providers. Prior to the end of the PHE, consumers reported waiting up to ninety (90) days at times to seek such care from an in-network provider.

Carriers submit data to the Division annually as part of Colorado Insurance Regulation 4-2-64 Concerning Mental Health Parity in Health Benefit Plans, including credentialing and network admission data. In aggregate, carriers report completing credentialing processes for providers in as few as five (5) days to almost four (4) months for each application. However, providers report waiting several months to be approved for network participation. They also report challenges with billing and receiving reimbursement for behavioral health provider candidates under their supervision that are in the process of becoming licensed, who may alleviate overburdened caseloads and lengthy wait times for consumers. These data illustrate the importance of increasing the number of providers and streamlining processes to reduce credentialing timelines for mental health, behavioral health, and SUD providers participating in commercial networks.

### II. Application and Scope

This bulletin is intended to provide guidance to all carriers offering individual, small group, large group, and student health benefit plans and managed care plans, including health-savings-account (HSA)-qualified health benefit plans, that are subject to the insurance laws of Colorado.

### III. Division Position

Federal and State parity laws require carriers to ensure behavioral health, mental health, and SUD benefits are no less restrictive than medical and surgical benefits. Both individual and

facility provider credentialing standards are integral factors of parity-compliant benefit designs and consumer access to care. The Division is issuing this guidance to provide direction regarding credentialing standards and timelines for licensed and pre-licensed mental health, behavioral health, and SUD providers to ensure Colorado consumers have access to such services. This guidance applies to carriers and their contracted third-party administrators (TPAs).

#### **A. Timeline**

Carriers and TPAs are directed to expedite credentialing processes for mental health, behavioral health, and SUD providers without unreasonable delay, and make best efforts to ensure the process, in total, takes no longer than sixty (60) calendar days. Carriers are also directed to provide each applicant written or electronic notice of the outcome of the applicant's credentialing within ten (1) calendar days after the conclusion of the credentialing process. These standards apply to credentialing providers for both telehealth and in-person mental health, behavioral health, and SUD service coverage.

#### **B. Administration**

Carriers and TPAs are directed to clarify and reduce unnecessary and/or duplicative administrative processes and documentation that impedes a mental health, behavioral health, or SUD provider's ability to be credentialed in a health network in a reasonable timeframe. Carriers and TPAs are advised to:

- Monitor and refine their internal application review and credentialing systems to streamline processes and procedures, to minimize redundancies and eliminate the duplication of information across the various credentialing applications and forms providers are required to submit;
- Minimize requirements of providers above and beyond those required and conducted by the Council for Affordable Quality Healthcare, Inc. (CAQH);
- Use short-term, patient-specific contracts that allow for the continuation of care as the provider's credentialing application is under consideration; and
- Provide a single point of contact at the company to assist and support providers in the application and credentialing process to reduce confusion and administrative error, and publicize the contact information for the point of contact clearly on the carrier's website.

#### **C. Transparency and Communication**

Carriers and TPAs are directed to post conspicuously on their websites all required documentation as specified in §10-16-705.7(7) C.R.S., expected and maximum timeline for response by carrier and provider alike, and all requirements associated with credentialing approval. Carriers and TPAs are directed to accept provider credentialing documentation and correspondence in written and electronic form.

#### **D. Pre-Licensure Candidate Reimbursement**

The Division encourages carriers and TPAs to allow for billing for pre-license mental health, behavioral health, and SUD provider candidates who are under supervision of an in-network provider and to reimburse for such claims. They are encouraged to expeditiously amend contracts, as needed, to allow for the billing and reimbursement of these candidates.

The Division will inquire with carriers about the pre-licensure billing and reimbursement policies and will post the responses conspicuously on its website.

#### **IV. Additional Resources**

For more information on coverage for mental health, behavioral health, SUD, and mental health parity laws in Colorado, please see the DOI website here:

<https://www.colorado.gov/pacific/dora/mental-behavioral-health-and-insurance>

For more information about telehealth, please visit the DOI regulation here:

<https://drive.google.com/file/d/1RPT0thkoQv5bRU9GWh0Wr1UcVvPVjQoo/view>

For more information on network adequacy standards, please visit the DOI regulation here:

<https://drive.google.com/file/d/0BwMmWVFE3YMsSktjVkxOLWFqOHc/view?usp=sharing>

For more information on the Council for Affordable and Quality Healthcare, please visit CAQH ProView for Providers and Practice Managers here:

[Operating Rules | CAQH](#)

For more information or questions about your current coverage, please contact:

Colorado Division of Insurance

Consumer Services, Life and Health Section

#### **V. History**

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