



Behavioral Health Network Adequacy Report Columbia Pacific CCO: January 2024

This report is intended to highlight key areas of member access for behavioral health services in Columbia Pacific CCO. It offers a snapshot of current conditions and may not reflect the individual experiences of specific providers, which may vary by provider type. This data will illuminate areas of needed investment on a systemic scale and will be utilized to understand areas of success with past and current system investments in the region.

Data is pulled from existing reports stemming from access initiatives and include metrics that show a general health of access. Data sets are presented in four categories:

- 1. **Provider network**: Focus of this data is to understand the volume of providers in the network.
 - a. Total outpatient providers.
 - b. Outpatient provider average time serving the network.
- 2. **Provider reach**: Focus on the number of members served by providers and frequency of service.
 - a. Average members served per provider.
 - b. Average services per provider.
- 3. **Member experience**: Focus on penetration rate of members with a breakdown by various demographics.
 - a. Penetration rate reflects the number of active members engaged with BH services.

This data was gathered primarily from claims, authorization, member demographics, and provider self-reported data fields. Charts with *grey dots* indicate the averages or totals. As CareOregon continues its path towards system integration via the behavioral health systems integration (BHSI) project, our hope is to have more uniform cross-regional data.

We aim to release data on a quarterly basis, as we transition to an online dashboard format in the future. Future iterations of this report will also look to include areas focused on culturally specific services.

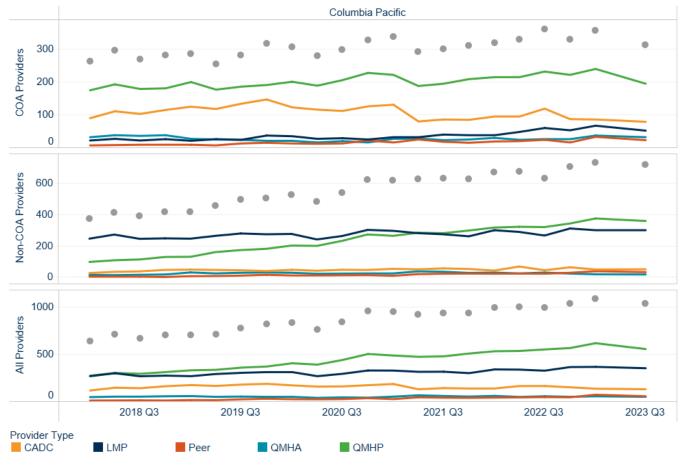
September 2023 Update:

Provider metrics are now split into three categories: COA providers, non-COA providers, and all providers. COA is defined as a rendering provider on a claim at a pay to provider with a COA on record with Care Oregon. Penetration rates now reflect only specialty behavioral health services, primary care is not included.

January 2024 Update:

The graph titled "Average Years Serving the Network" has been updated to reflect the differences between CMHP and non-CMHP provider groups. Other graphs currently using the above COA categories will be updated to CMHP/non-CMHP by the 2024 Q2 reporting period.

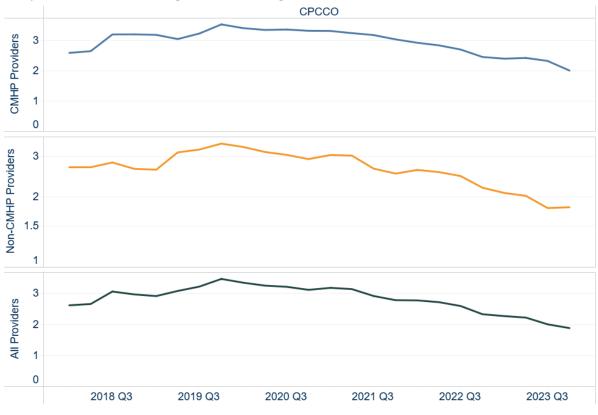
Provider network



Total Providers Serving Members

- Gray dotted line indicates total number of unique rendering providers, both contracted and non-contracted.
- QMHP includes registered associates, licensed or, those neither registered nor licensed.
- Includes only providers with paid BH claim within the quarter.

The data indicates the number of outpatient providers has risen since the pandemic in 2020. The rise could be attributed to an increase in telehealth usage. This data does not distinguish between private, group or certified mental health professional (CMHP) settings. Future waves of the report will look to incorporate organization types into this graph.

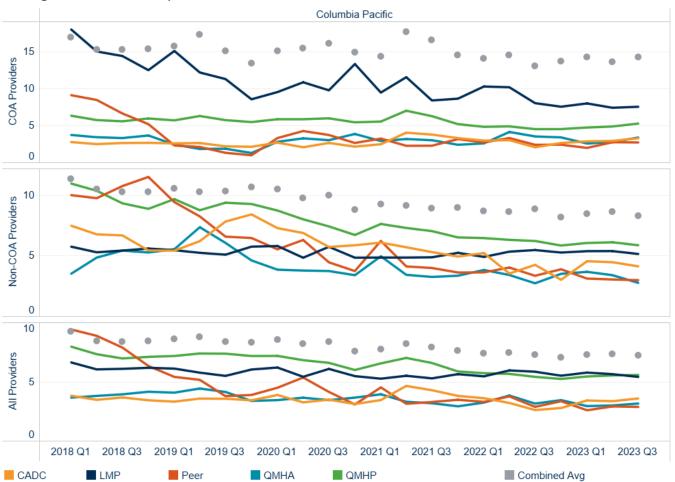


Outpatient Provider Average Years Serving Network

- Average time for individual providers serving CareOregon members. Range is individual providers' first claim to most recent.
- Calculated by national provider identifier (NPI).
- Same provider criteria for total outpatient providers data set.

The average time for providers has decreased steadily since 2019. More research on this metric would aid in understanding the cause of the decline, it may be that expansion of telehealth brought an increase in new providers to regions. Anecdotally, systemic issues of burnout, cost of living, etc., may also be factors. Organizations with high instances of turnover would lead to relying on new providers with less time in the field.

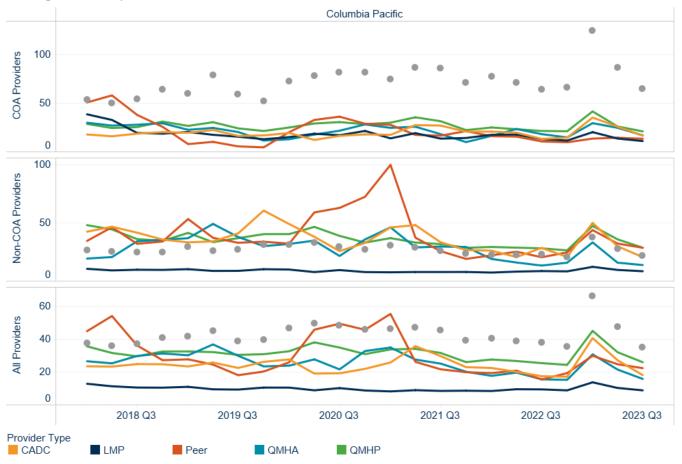
Provider reach



Average Members Served per Provider

Average unique members served by outpatient (OP) behavioral health, providers per quarter.





- Average services per provider per quarter.
- Services defined by a single claim line.

Member Experience



	2018	2019	2020	2021	2022	2023
American Indian or Alaska Native	19.1	17.0	17.0	12.4	20.4	13.9
Asian, Native Hawaiian, Pacific Islander	10.0	12.2	10.6	10.6	10.8	9.9
Black or African American	31.7	27.1	22.8	12.7	13.8	18.5
Hispanic or Latina/o/e/x	13.0	12.8	11.7	11.2	11.7	8.8
Not Provided	16.6	16.1	13.1	11.6	11.6	11.3
Other Race or Ethnicity	16.8	17.7	12.9	15.8	14.8	13.7
White	20.5	20.4	17.1	14.7	15.0	14.0



• Rate in current graphs does not include primary care services. Previous report did include primary care services.

15.6

5.6

12.5

5.7

12.1

5.2

12.2

4.7

10.8

4.1

8.6

3.9

• *PR* = percent of active members of total enrollment.

Other Race or Ethnicity

White

• 2023 drop-in SUD rates may be partially attributed to claims lag

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