

Behavioral health value-based payment program

Frequently asked questions

Overview

The value-based payment (VBP) program is our way to show appreciation for your practice's dedication to providing quality behavioral health care services to members of Rocky Mountain Health Plans (RMHP), a UnitedHealthcare company. Your enhanced rate applies to all providers identified by your practice's tax identification number (TIN). Each state's fiscal year's rate enhancement is a percent of our [fee schedule](#) and is based on the number of Star points earned by your practice's providers in 2024 for achieving specific criteria. (See the chart on the next page.) You can find more information in the [Medicaid behavioral health value-based payment updates](#).

General questions

How often does RMHP review the VBP base rates?

We update the procedure codes and their rates on the base fee schedule at least once a year.

Can providers in the same practice have different rate enhancements?

No. RMHP contracts with health care practices based on the TIN. This means the agreement is made with the practice as a whole, not with individual providers. All providers within the same practice sharing the same TIN receive the same rate for services. However, the base fee schedule includes different base rates for providers with a Ph.D. or Psy.D.



How are non-licensed providers (peers and those seeking licensure) included in the VBP program?

Non-licensed providers, those in the process of obtaining their license, can participate in the VBP program as follows:

- VBP rates apply to services billed on behalf of non-licensed clinicians by a supervising psychologist, master's therapist or Certified Addiction Counselor (CAC)
- Practices receive credit for non-licensed providers who complete Violet and/or approved intellectual and developmental disabilities (IDD) trainings
- Non-licensed providers are not eligible in instances when National Provider Identifier (NPI) numbers are the only data available

Can practices earn points in all criteria offered in the program?

- **Achievability** – Not all practices can meet every criterion due to factors like location or specialty
- **Encouragement** – Practices should aim for the criteria and Star rating that best fit their unique situation

How will Star ratings apply to practices that serve Regional Accountable Entity (RAE) members for both Rocky Mountain Health Plans and the Northeast Health Partners (NHP)?

Effective **July 1, 2025**, RMHP's contracts will cover all Medicaid members in RAEs operated by RMHP and NHP. Each practice will have one Star rating and one rate enhancement that applies equally to members from both regions.

Our practice is a Comprehensive Safety Net Provider (CSNP)/Essential Safety Net Provider (ESNP). Can we participate in the VBP and Violet programs?

While you can participate in Violet, you're not able to earn Star points through the VBP program. Providers with CSNP and ESNP designations participate in contracts separate from the VBP program and are subject to the state of Colorado's rates.

Can we opt out of the VBP program?

Yes. Email RMHPRae_BH_PR@uhc.com stating your decision to opt out of the VBP program. Note that you won't be eligible for future VBP adjustments, and your contract rates may be lower than those in the VBP program.

Questions on calculations

How are Star points calculated?

You're not required to submit data or report achievement of any criteria. We calculate each practice's points individually using various internal and external data sources.¹ The table below provides details of the data we use to calculate points for each criterion.

¹ RHMP may include additional data sources or update data sources as appropriate



Criterion	Data source(s)
Criterion including the percent of members served	Based on claims we adjudicated for the lookback period.
Rural counties and counties with extreme access consideration	Based on each member's home address provided at the time of their enrollment or as updated by the member. The data includes the addresses of members served through telehealth.
Local practices	The practice's physical location (not telehealth) where a member received services. The address is identified during contracting and credentialing.
Bilingual providers*	Based on information submitted by providers during contracting and credentialing.
Safe-space provider*	Quarterly surveys previously completed by providers who welcome and affirm members identifying as a part of the LGBTQIA+ community.
Specialized provider types	Providers submit specialty type information to RMHP during contracting and credentialing.
Enrollment in the Violence Prevention Network	The Department of Justice provides enrollment information to RMHP.
Completed IDD training	• Oliver Behavioral Health Consultants issues IDD training rosters to RMHP • Providers who complete alternative IDD training can submit information about the training, including proof of completion, to RMHPRae_BH_PR@uhc.com for consideration. To qualify, the training must aim at improving care for members with co-occurring mental health challenges.
Violet enrollment and designation	Violet provides supporting data to RMHP.
Prioritized populations	• Member demographics (language spoken, race and ethnicity, etc.) – Data from member enrollment files and RMHP teams providing care • Members previously in foster care – Identified by Health Care Policy and Financing (HCPF) program aid codes • Members with social drivers of health (SDOH) needs – Data obtained from the Quality Health Network (QHN) and/or the Community Resource Network (CRN) • Members diagnosed with IDD – Identified by diagnosis codes from claims adjudicated by RMHP

* Only applicable for the 2024 lookback period.

Why are practices limited to earning points based on the number of members served?

We require a minimum of 20 visits for some criteria for the following reasons:

- **Credibility** – To help ensure a credible percentage of members, you must serve a minimum number of qualified members
- **Financial support** – The VBP program provides financial resources when you increase access to care for Medicaid members

Do we need to serve 20 different Medicaid members to earn points?

No. The requirement is for the number of visits during the lookback period, not the number of members. If the criterion requires a minimum 20 visits, you can provide care to any number of members if you reach at least 20 visits.

Can we earn points for services provided to members through telehealth?

Yes, for most criteria. Telehealth services are credited the same as in-person services, except for the local practice criterion where you must provide in-person services.

How can my practice earn points for participating in the Department of Justice Violence Prevention Network?

Enrollment in the Violence Prevention Network for the RMHP Behavioral Health VBP is now closed.

What is RMHP doing to help ensure all demographic data for members is complete and accurate and drive toward payment fairness?

- We use state enrollment, care coordination and call center data to establish accurate demographic information
- We increase payments in areas with good demographic data and work to improve data accuracy in other areas

Can my practice provide supplemental data for VBP consideration?

No. Providing supplemental data is currently not an option.

I reviewed our practice's Star rating and believe RHMP calculated our points incorrectly. What should I do?

Please email us at RMHPRae_BH_PR@uhc.com. We'll review our calculations within 30 days of receiving your inquiry and correct any data or calculation errors. We will not make changes to point criteria or review additional data sources.



Questions on the Violet program

What is Violet?

Violet is a platform that houses resources and training for providers interested in advancing culturally responsive care. Go to [JoinViolet](#) for information or to book a demo.

How can we enroll in the Violet program? Is there a cost?

Enroll online. There's no cost for enrolling. We cover all costs associated with Violet engagement, education and benchmarking.

Can our practice still enroll in the Violet program for the state fiscal year 2026?

Yes. You can still join the SFY2026 evaluation period (Jan. 1–Dec. 31, 2024) and work toward earning additional points. The enrollment period has been extended to **May 15, 2025**. If you enroll by this date, we'll recalculate your SFY2026 points and adjust your Star points and rate enhancement.

Are providers required to enroll in Violet to be eligible for rate increases?

No. Enrolling with Violet isn't a requirement for rate increases, but you might get additional points if you do enroll. You can earn points/Stars and associated rate increases by participating in the behavioral health VBP program.

Do Violet trainings count toward continuing professional development requirements?

Yes. Violet education allows clinicians to earn continuing education (CE) or continuing medical education (CME) credits across more than 15 medical associations. Visit [Cultural Competence Education](#) to learn more.

Does the VBP criterion for Violet enrollment call for at least 30% of all licensed providers affiliated with the group's NPI, or does it include all licensed and unlicensed providers in the practice?

The 30% criterion refers to providers affiliated with the group NPI. However, we encourage both licensed and non-licensed providers to participate in the Violet program. In fact, including both makes it easier to reach the 30% enrollment target for this criterion. Here's how we calculate the percentage. If only licensed providers participate in the program, we calculate the enrollment ratio using only licensed providers as the total number of providers at your clinic. If you include both licensed and non-licensed providers as participants, we will include both in the total number of providers at your clinic. Violet will track non-licensed clinicians on their end and will include them in the reports to RMHP. Practices do not need to track anything additional.

Questions on IDD training

Where can I enroll in IDD training?

Oliver Behavioral Consultants (OBC) provides training for providers serving members diagnosed with IDD. We cover the cost of training, which includes 6 modules held over 12 weeks. Register with OBC for the course. There will be opportunities for future IDD trainings each year this criteria remains in the VBP program. OBC submits to us a list of providers who have completed the IDD training and earned VBP points.

Will other IDD training satisfy this criterion?

Yes. We'll consider IDD trainings from other organizations if they meet our standards for improving care for members with co-occurring mental health challenges and cover topics comparable to the OBC curriculum. You can submit information about the training details and proof of completion to RMHPRae_BH_PR@uhc.com for consideration.

How often do providers need to complete IDD training to earn points in this category?

You must complete training once every 3 years. We'll give credit for any IDD training hosted by OBC or approved comparable training completed within the past 3 years.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health plan coverage provided by UnitedHealthcare of Arizona, Inc., UHC of California DBA UnitedHealthcare of California, UnitedHealthcare Benefits Plan of California, UnitedHealthcare of Colorado, Inc., UnitedHealthcare of the Mid-Atlantic, Inc., MAMSI Life and Health Insurance Company, UnitedHealthcare of New York, Inc., UnitedHealthcare Insurance Company of New York, UnitedHealthcare of Oklahoma, Inc., UnitedHealthcare of Oregon, Inc., UnitedHealthcare of Pennsylvania, Inc., UnitedHealthcare of Texas, Inc., UnitedHealthcare Benefits of Texas, Inc., UnitedHealthcare of Utah, Inc., UnitedHealthcare of Washington, Inc., Optimum Choice, Inc., Oxford Health Insurance, Inc., Oxford Health Plans (NJ), Oxford Health Plans (CT), Inc., All Savers Insurance Company, Tufts Health Freedom Insurance Company or other affiliates. Administrative services provided by OptumHealth Care Solutions, LLC, OptumRx, Oxford Health Plans LLC, United HealthCare Services, Inc., Tufts Health Freedom Insurance Company or other affiliates. Behavioral health products provided by U.S. Behavioral Health Plan, California (USBHPC), United Behavioral Health (UBH), or its affiliates.

