WHAT'S AVAILABLE?
BEHAVIORAL HEALTH DATA
Colorado All Payer Claims Database (CO APCD)

Behavioral Health Overview

Behavioral Health is defined by the Agency for Healthcare Research and Quality (AHRQ) as a term that addresses any behavioral problems bearing on health, including mental health and substance abuse conditions, stress-linked physical symptoms, patient activation and health behaviors, including those that may contribute to chronic conditions such as obesity.

Claims in the CO APCD

Claims for behavioral health-related care, including some Substance Use Disorder (SUD) claims, are collected in the CO APCD from commercial payers and Medicaid (including submissions from HCPF and the RAEs) on a monthly basis and Medicare FFS on a quarterly basis. The CO APCD has a limited number of SUD claims available for release due to Title 42 of the Code of Federal Regulations (CFR) Part 2 which protects the confidentiality of patient records for visits to federally-funded facilities. Visit www.civhc.org to see claims volume for SUD and BHO in the CO APCD.

The CO APCD contains approx. 40M behavioral health claims, with nearly 2M substance use disorder claims.

Regional Accountable Entities (RAEs) submitting claims:
Beacon Health Systems
Colorado Community Health Alliance
Rocky Mountain Health Plans
Colorado Access

Accessing Behavioral Health Data

"Behavioral Health" is not a designated category of claims in the CO APCD but rather a subset of medical claims. However, analysis of behavioral health claims can be conducted using diagnosis and procedure codes as defined in the source examples listed below.

Health Care Cost and Utilization Project (HCUP) - Clinical Classification Software (CCS) tables - diagnosis and procedure codes grouped by clinical categories

HEDIS measures - behavioral health codes sets

These classification systems rely on different types of codes to identify behavioral health claims:
Revenue Codes, **Place of Service Codes**, **CPT/HCPCS**, Pharmacy Claims - **AHFS classes**

Publicly available CO APCD behavioral health analyses:
Emergency Department Use for Mental Health Reasons
Shows volume and cost to provide ED care when mental health is a primary diagnosis by age group, region, gender, and payer category type. Analysis based on HEDIS mental health ICD-10 diagnosis codes.

Other ways to use claims data to analyze behavioral health concerns:
Evaluating prevalence of obesity diagnoses and impact on chronic conditions like diabetes.
Identifying where people are accessing services with a primary and secondary diagnosis of mental health (i.e. are people with depression being diagnosed during a preventive primary care office visit?)