



To be reviewed as a potential provider for Beacon Health Options for Mental Health Services you must meet the following requirements:

- Must be licensed in Mental Health Discipline in the state of Colorado
- Must carry malpractice insurance in the amount of:
 - \$1,000,000/\$1,000,000 for non-prescribers
 - \$1,000,000/\$3,000,000 for prescribers
- MUST have completed required Revalidation (or Colorado Health First enrollment for providers who have not previously enrolled.). If you are NOT a Fee For Service Medicaid provider we will not accept your information.

If you meet all requirements above, please provide the following information either by fax (719-538-1433) or email COProviderRelations@beaconhealthoptions.com , (you do not need to submit your license or proof of insurance at this time):

- Submit current resume/Curriculum vitae
- Submit Letter of Intent with the following:
 - Specify what LOBs you are interested in
 - Colorado Health First (Colorado Health Partnerships or Foothills Behavioral Health Partners? Your geographic area will determine what network you will be considered for.)
 - Commercial/EAP
 - HMO – Kaiser, etc.
 - Gender
 - Practice location(s) (city/county)
 - Population (age) served
 - Specialties
 - If you provide services with animals, please indicate what kind and how many.
 - Languages Spoken (including sign language and what services provided)
 - Any other information deemed relevant
 - References from peers, CMHC, Colorado Health First members, etc. (not required)

Once these documents have been reviewed we will look at the Network need of providers in your area. You will be notified by mail whether your request for an application has been approved or denied.