2026

Grand County Behavioral Health Provider Survey Results

Behavioral health access, coverage, and service capacity

31

Providers serve Grand County

Compared with 23 in 2024

~17

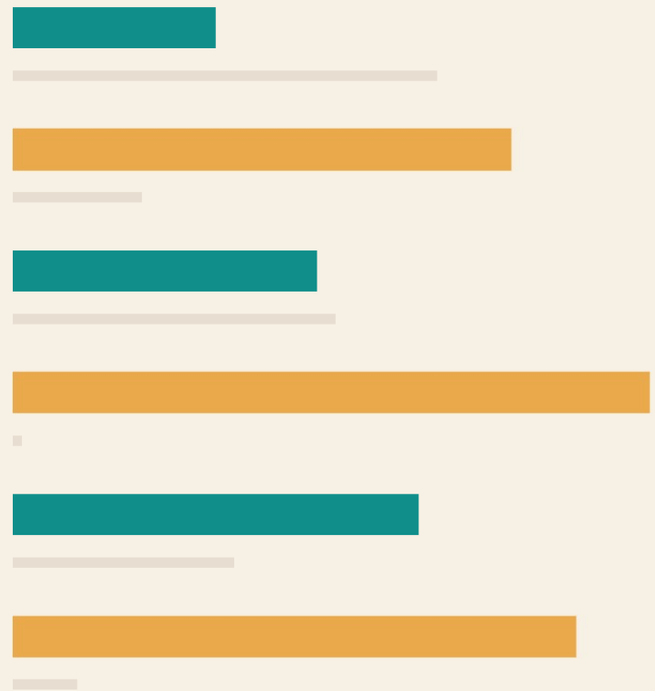
estimated FTEs

Across responding practices

82%

Local provider response rate

14 of 17 local practices responded.



External stakeholder + direct service provider briefing

Prepared from 2023-24 and 2026 provider survey responses and summary notes.

Surveying and summary completed by Grand County Rural Health Network

PROVIDER SUMMARY

Behavioral Health Provider Landscape: stronger access, clearer gaps

31

Providers serve Grand County

+8 vs. 2024; additional HSW telehealth providers available

17

Practices based in Grand

+3 vs. 2024; group practices are growing local capacity

69%

in-person 4+ days/week

More than double the 2024 share of 33%

71%

accept Medicaid

10 providers in 2026, up from 2 in 2024

Providers with Primary Practice Based in Grand

1. Colorado Relationship Therapy Center: Jackie Coors
2. Health Solutions West: Cynthia James, Lance Howe, Laura Robinson, +2 clinicians PRN
   Emily Shupak (crisis clinician); psychiatry via telehealth
3. High Altitude Counseling: Danielle Newell
4. Dr. Jessica Stern MD (Psychiatry)
5. Krista Ochocki Counseling
6. Lisa Ansell
7. Middle Park Health: Marcie Beroski (PMHNP); Jess Reed & Andy Thomasson (BH Navigators)
8. Open Space Therapy: Stephanie Miller
9. Parallel Counseling: Kyle Ohl & Julia Macchione
10. Radiant Dawn Therapy: Christina Devore
11. River Song Counseling: Jacqueline Schnellinger
12. The Synergy Collective: Nicole Akselrad, Joe Candelario, Lauren Stokes
13. Shawn Dinkel
14. Tasha Eichenseher
15. Unveiled to Freedom: Kristyn Roe, Brooklyn Fernandez, Austin Nichol
16. Wander More Counseling: Kelle Sajdak
17. Find Your Ember Counseling: Jay Monger

Providers with Secondary Practice serving Grand County

(some telehealth only; needs to be reviewed for directory listing)

1. 2nd Star Counseling: Kathryn Raley
2. Denver Health: Angela Kaushik
3. Jen Tilden: telehealth only
4. Lauren Hughes
5. Slopeside Counseling: Andrea Brown
6. Glow Collective: Samantha Johnson
7. Stacy York Nation: telehealth only
8. Stephanie Brooks: telehealth only
9. Wellness Psychiatry: Laura Corriero (PMHNP) (in-person); additional telehealth

SO WHAT

- More local capacity and broader access is now in place.
- Payer and affordability supports are strong enough to use in referral workflows.

WATCH-OUTS

- Increased part-time in-county, in-person availability may mask gaps in services such as specialization, payers accepted, and in-person service availability.

Source: 2026 Provider Survey Results; n=14 unless noted. 2024 comparisons from prior survey summary.

NAVIGATION SUMMARY

Behavioral Health Navigators & Certified Peer & Family Specialists

Providing individualized support for community members to access behavioral health care and resources.
Existing services with room to scale to meet community needs as program awareness increases.

2
Behavioral Health Navigators

2
Peer & Family Recovery Coordinators

Mon-Fri
In-person & virtual services

FREE
Services in Grand & Jackson County

Behavioral Health Navigation

- Middle Park Health (MPH) employs 2 full-time Behavioral Health Navigators serving throughout community and at MPH facilities
  - Collective impact efforts began in 2015. As backbone organization for Behavioral Health Committee, GCRHN coordinated partners and collaborative funding strategy.
  - Launched in 2017 with 2 BH Navigators employed through Mind Springs Health.
  - Transitioned to Middle Park Health in 2020 for long-term sustainability.
  - After a time with one BH Navigator, MPH expanded to two BH Navigators/Medical Social Workers in 2023.
  - Behavioral Health Navigators are licensed or pre-licensed clinical behavioral health providers, who provide care in primary care clinic and community settings. They can provide brief interventional therapy, help find a therapist or psychiatrist, remove barriers to receiving care, educate about treatment options, and help clients develop coping skills.

https://middleparkhealth.org/service/behavioral-health-services/

Recovery Coordination – Certified Peer & Family Specialists (CPFS)

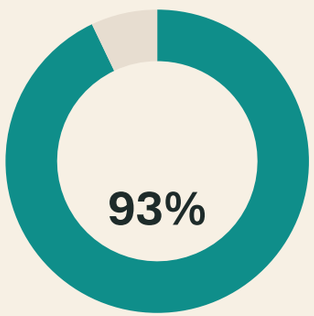
- Grand County Rural Health Network employs 2 full-time Recovery Coordinators, with full-time bilingual position to launch fall 2026
  - Launched Recovery Coordination program in 2023 with .8 FTE; expanded to 1.8 FTE in 2024.
  - Added Prevention & Recovery Manager in 2026, retaining 1.8 FTE for direct service roles.
  - Coordinate care & support with BH Navigators, Care Coordinators, Health Coverage Guides.
  - Staff receive 60 hours of specialized training and 500 hours post-training supervised experience prior to becoming Certified Peer & Family Specialists (CPFS).
  - Use personal lived experience with mental health or substance use recovery to guide and support individuals and families.
  - Help participants access substance use and mental health treatment and recovery care, resources, and community connectedness. Collaborate with Jail-Based Behavioral Services for in-jail recovery, care, and health coverage coordination to support re-entry.

https://gcruralhealth.org/direct-services/

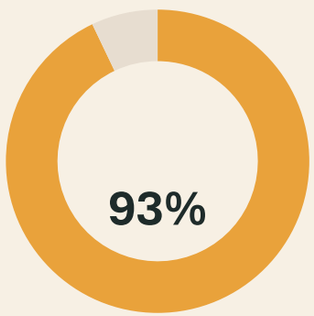
ACCESS MODES

Availability is strong, but capacity still needs monitoring

Most respondents accept new clients; reported wait times are generally under two weeks.



Accepting new clients

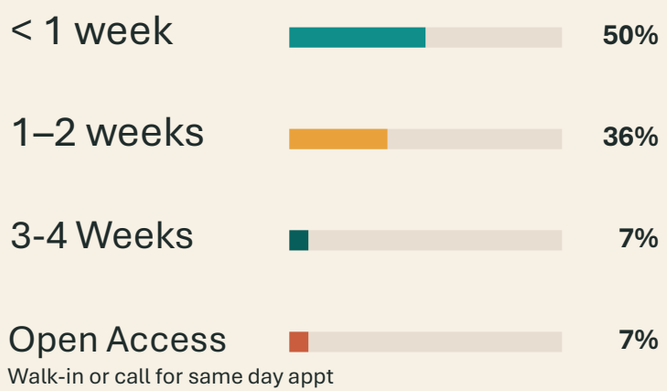


In-county availability



Offer telehealth

WAIT-TIMES



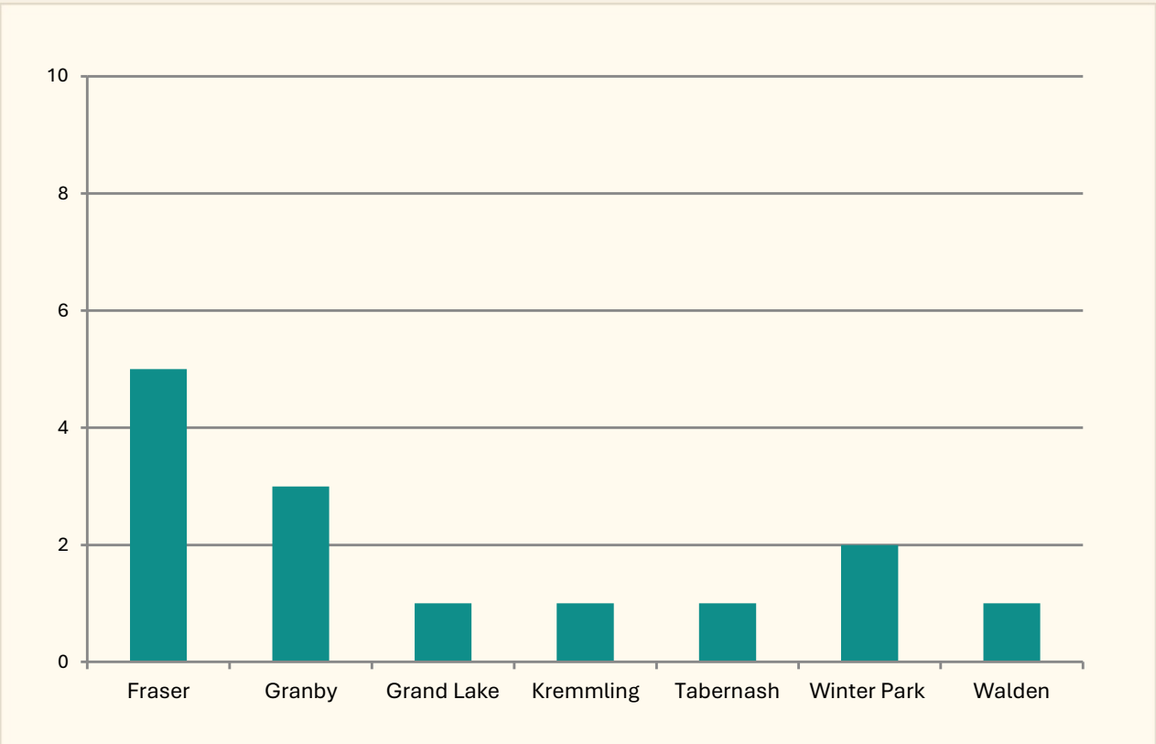
Availability appears strong, but fit, specialization, and capacity should still be monitored.

Source: 2026 Provider Survey Results; n=14 unless noted. 2024 comparisons from prior survey summary.

PROVIDER FOOTPRINT

Local provider footprint expanded; telehealth extends local reach

In-person office locations reported by responding practices.
All providers offer telehealth services.



IN-COUNTY CREDENTIAL SNAPSHOT

Caseloads vary widely, from part-time practice to PMHNPs with the highest weekly client volume.

1 Ph.D – Psychologist
1 M.D. - Psychiatrist
2 PMHNP - Psychiatric Mental Health Nurse Practitioner
7 LPC – Licensed Professional Counselor
6 LPC Candidate (pre-licensed candidates)
6 LCSW – Licensed Clinical Social Worker
1 LMFT – Licensed Marriage and Family Therapist

IMPLICATION

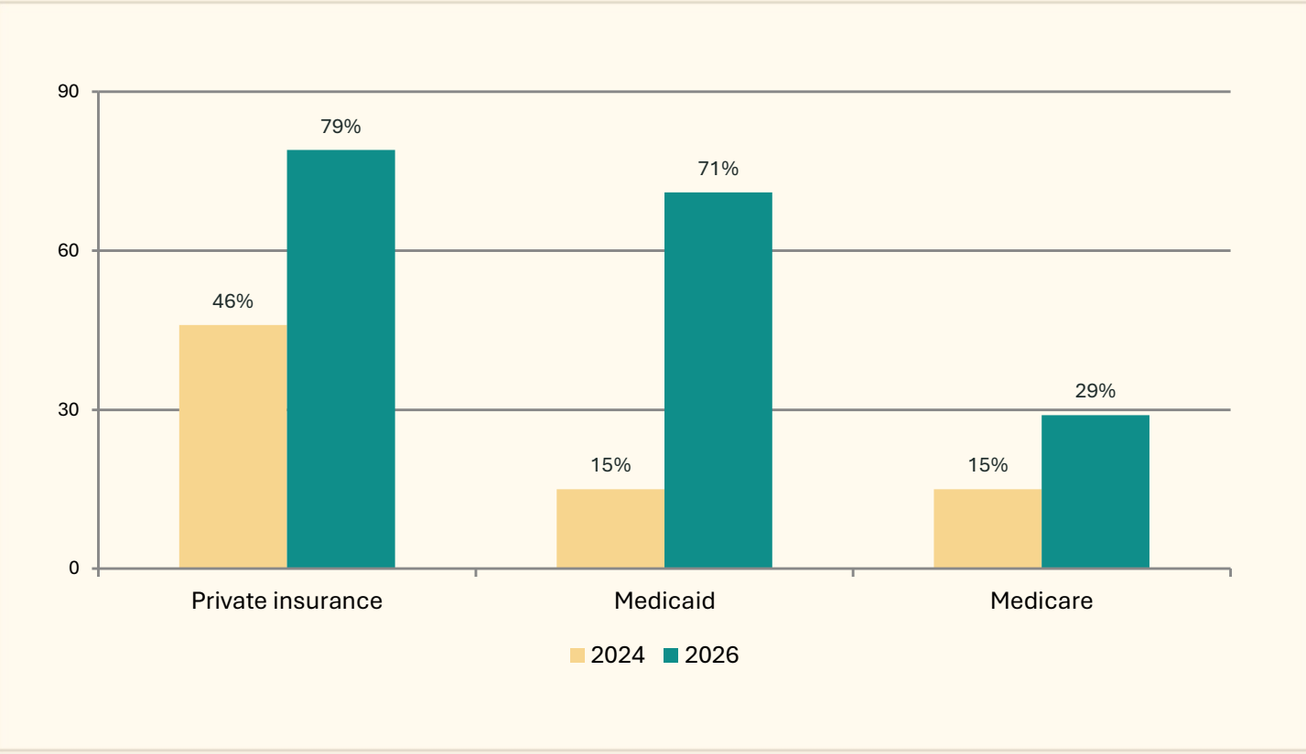
- Use telehealth to complement but not replace local access.
- Maintain current provider inventory with filters for location, payer, specialty, language, and availability.
- Explore targeted provider recruitment pending review of specialty and credential gaps, opportunities for local provider continuing education.
- Assess non-clinical supports for continuum of care.
- Address gaps in higher levels of care, including assessment of regional service availability and feasibility study where appropriate.

Source: 2026 Provider Survey Results; n=14 unless noted. 2024 comparisons from prior survey summary.

PAYER ACCESS

Coverage and affordability supports expanded materially

Insurance, vouchers, EAPs, and sliding scale options are now practical referral levers.



PAYER TYPE BREAKDOWN

12

practices accept private insurance

Top plans: Aetna, United Healthcare/Optum, Anthem/BCBS, and Cigna

10

practices accept Medicaid

Up from 2 providers in 2024;
Medicare remains smaller at 4 providers

25

practices accept GCRHN Healthcare Vouchers

Some providers previously located in Grand continue accepting vouchers for continuity of care

73%

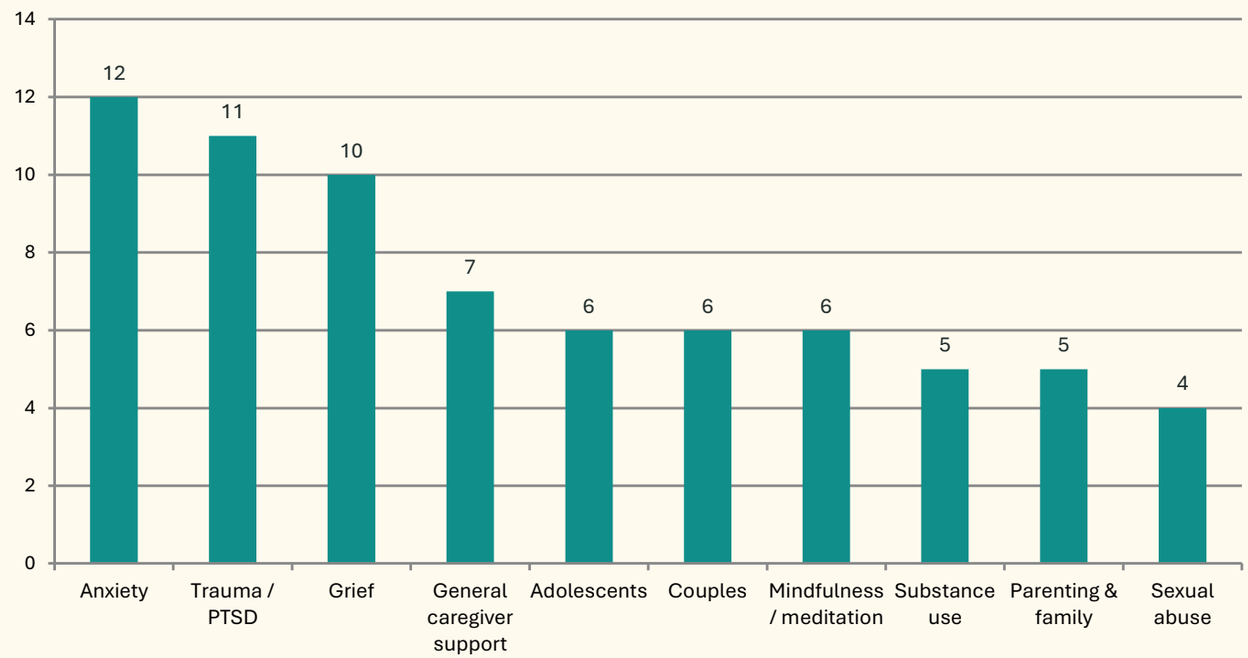
Accept EAPs and/or have sliding scale

Source: 2026 Provider Survey Results; n=14 unless noted. 2024 comparisons from prior survey summary.

PRACTICE SPECIALTIES

Clinical strengths cluster around anxiety, trauma, grief, and relationships

Top specialty / practice areas reported by providers.



SERVICE PLANNING

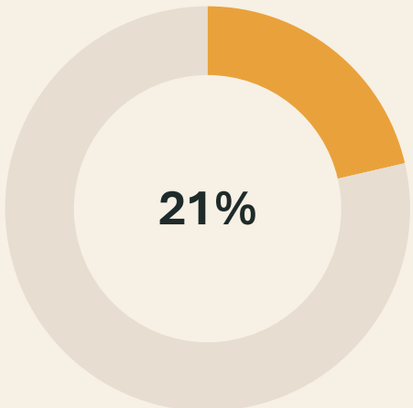
- Demand can be met with multiple high-coverage specialties, especially anxiety and trauma / PTSD.
- Grief and caregiver supports are notable strengths.
- Verify lower score specialties and assess professional development (“grow your own”) strategies prior to external recruitment efforts.

Source: 2026 Provider Survey Results; n=14 unless noted. 2024 comparisons from prior survey summary.

LANGUAGE ACCESS

Language access is present, but still limited

Language access is a clear improvement opportunity for an equitable provider network.



Offer languages beyond English

3 of 14 respondents

REPORTED PATHWAYS

1 Spanish-speaking provider

Lisa Ansell was identified as providing services in Spanish

3 interpretation-service users

Health Solutions West, Middle Park Health, and Denver Health use phone interpretation services.

COLLECTIVE ACTION

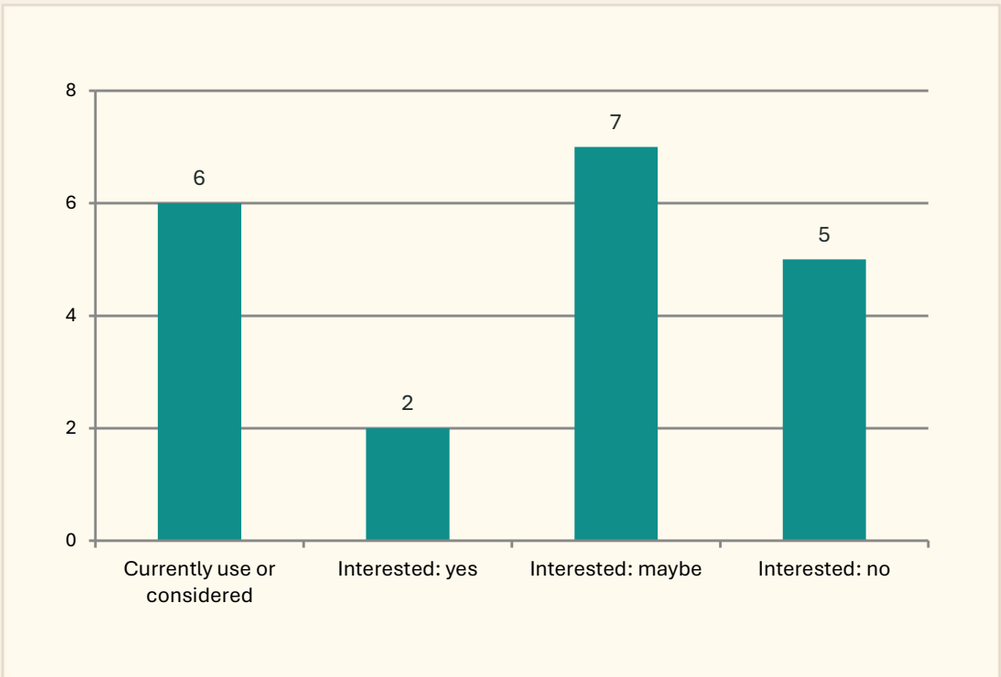
- Confirm interpreter availability, costs, and workflows.
- Publish language-access details in referral directories.
- Track language capacity as a core access measure next year.
- Monitor impact of bilingual Recovery Coordinator

Source: 2026 Provider Survey Results; n=14 unless noted. 2024 comparisons from prior survey summary.

SHARED INFRASTRUCTURE

Credentialing/Contracting Platform interest is enough for a low-burden discovery session

Most are not current users, but many are open to learning more about a pilot.



DECISION LENS

64% **said yes or maybe to learning more about a pilot**

- Lead with a short discovery session, not a full implementation ask.
- Clarify value around credentialing, contracting, claims / billing, and payer participation support.
- Use provider concerns to design a right-sized pilot.

Source: 2026 Provider Survey Results; n=14 unless noted. 2024 comparisons from prior survey summary.

TREND CONTEXT

Access grew as measurement matured

Context matters for in-county providers. 17 practices have their primary office in Grand County.

SURVEY EVOLUTION

2023

9

local therapist base

Narrative findings surfaced scarcity, provider barriers, and support needs.

2024

23

Providers serving in-county

Survey fields began standardizing modality, payer, affordability, and platforms.

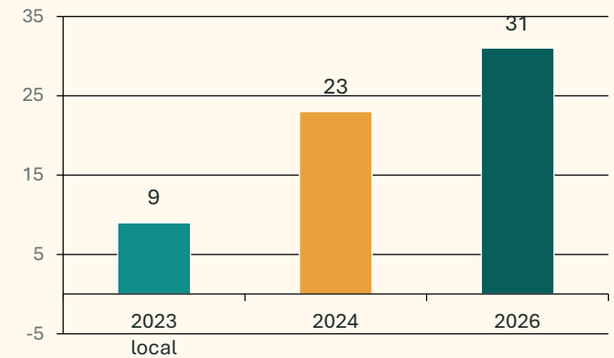
2026

31

providers serving in-county

Inventory expanded and access supports became easier to track.

Provider count indicators



Directional context only: definitions changed across surveys.

HOW TO READ THE TREND

Capacity is stronger, and a notable improvement is measurement maturity.

The priority gaps are now about fit, equity, and sustainability: matching clients to specialty and age group, making payer, affordability, location, and language fields visible, and supporting provider operations.

Sources: 2023 Therapist Survey Summary; 2024 GCRHN MH Provider Survey; 2026 Provider Survey Results.

ACTION AGENDA

Priorities: make access navigable, equitable, and sustainable

1. Make access equitable and navigable

- Local directory recommended to reflect location, language, specialty, payer, and affordability filters.
- Translate the directory into referral guidance for community as well as providers and navigators.

2. Support provider sustainability

- Develop provider retention initiatives.
- Establish targeted provider continuing education for specialization prior to implementing recruitment strategies.
- Continue expanding payer options, particularly Medicaid, Medicare, and Private Insurance.
- Align financial supports such as EAP, vouchers, and grants/scholarship.

3. Prioritize longitudinal data quality

- Assess data continuity in implementing Katz Amsterdam Foundation Shared Measurement Framework.
- Ensure consistent definitions for provider count, FTE, wait time, and payer acceptance.

Source: 2026 Provider Survey Results; n=14 unless noted. 2024 comparisons from prior survey summary.

PROVIDER-INFORMED NEXT STEPS

July 2026 Provider Meeting Outcomes and Next Steps

1. Providers request quarterly Provider workgroup meetings

- GCRHN to schedule next meeting Sept/Oct 2026
- GCRHN to create scheduling survey to maximize attendance.
- In-person meeting with lunch was well received - continue hybrid format.
- Providers expressed desire to better understand GCRHN and other care/resource support services.
- All welcome at BHSP Committee meetings.
  Next meeting October 20, 2:30-4:30pm

2. Payer streams and affordability to be top focus

- Explore strategies to support and incentivize providers to start and/or continue to accept Medicaid, Medicare, and private insurance.
- Connect providers to existing credentialing info and supports.
- Explore opportunities for alignment across vouchers, EAP, and grant/scholarship programs

3. Follow-up on provider recruitment, retention & workforce development incentive program

- Providers indicated preference for “grow your own” strategy to support local providers to complete specialized and advanced training (e.g. EMDR, substance use treatment, eating disorder).
- Continue discussion of Jackson County incentive program (e.g. office space, mileage, lodging).

Source: 2026 Provider Survey Results; n=14 unless noted. 2024 comparisons from prior survey summary.