



NETWORK ERROR

Secret shopper survey finds more than 1 in 5 health care providers inaccurately listed as “in-network”

Provider directories, or the listing of health care providers that are participating in a particular health plan, are intended to inform patients and consumers about which doctors are in their plan and how they can contact them to set up an appointment. For these directories to serve as the tool that consumers need, they must be accurate and up-to-date. A secret shopper survey conducted by the statewide consumer health advocacy organization Georgians for a Healthy Future, however, found these directories to be error-ridden, a problem that places consumers at risk when they seek to access an appropriate in-network health care provider. An analysis of four provider directories associated with plans offered by three of the state’s largest insurers found:

- » Three-quarters of the listings had at least one inaccuracy (not in-network, not accepting new patients, not practicing at the location listed, inaccurate or inoperable phone number, or languages spoken inaccurately listed)
- » One in five health care providers listed as participating in a plan’s network were not; in one directory forty percent of the providers listed were not actually participating in the plan
- » Among the providers who were confirmed to be in-network, thirteen percent were not accepting new patients; in one directory one in four confirmed in-network providers were not accepting new patients
- » Fifteen percent of telephone numbers associated with providers listed in the directories were inaccurate or inoperable

These inaccuracies and usability limitations make it difficult for health care consumers, particularly those who haven’t had insurance before, to find and access an appropriate medical care provider. Setting basic standards for provider directories and protections for the consumers who rely upon them would go a long way towards making provider directories the tool that patients and consumers need when they shop for and use their health insurance.



METHODOLOGY

GHF’s secret shoppers chose to examine plans offered by three of the state’s largest insurers. Four silver tier HMO plans, two offered on the health insurance exchange and two offered outside of the exchange, were selected. The provider directories for each plan were located on the carriers’ websites. Within each provider directory, a search was done for primary care providers within a 30-mile radius of the zip code 30312, to capture a diverse swath of the metro Atlanta area. The first 100 entries in each directory were alphabetically sorted. The provider’s name, office address, telephone number, whether or not they are accepting new patients, languages spoken and plan participation information were then copied from the directories into Excel spreadsheets. GHF secret shoppers called each doctor’s office to compare the information listed in the directory to providers’ office staff responses. The same script was used for each call. Provider staff and insurer responses to inquiries, dates and time calls were made, as well other observations were carefully recorded. Data was analyzed by GHF staff.

Health Insurance carrier	Plan Type/Network	PCP Categories	Provider listed in directory confirmed as participating in plan	Among confirmed plan participants, percent not accepting new patients	Among confirmed plan participants, percent not practicing at location listed
Carrier A	Silver HMO/ Individual via Exchange	Primary Care Physicians	28%	25%	18%
Carrier B	Silver HMO/ Individual via Exchange	Family/General Practice, Internal Medicine	55%	9%	9%
Carrier C	HMO/Individual	Primary Care and Family Medicine	52%	13%	4%
Carrier D	HMO/Individual	Doctor/Medical Professional, Family/ General Practice, Internal Medicine; Able to serve as PCP	45%	11%	18%
Average Across All Sampled Directories	N/A	N/A	45%	13%	11%

Health insurance carrier	Plan Type/ Network	PCP Categories	At least one element of provider directory listing inaccurate	Inaccurate or inoperable telephone number	Provider plan participation could not be determined	Provider confirmed as not participating in the network	Provider confirmed as participating in the network
Carrier A	Silver HMO/ Individual via Exchange	Primary Care Physicians	83%	19%	32%	40%	28%
Carrier B	Silver HMO/ Individual via Exchange	Family/General Practice, Internal Medicine	79%	22%	29%	16%	55%
Carrier C	HMO/ Individual	Primary Care and Family Medicine	78%	6%	37%	11%	52%
Carrier D	HMO/ Individual	Doctor/ Medical Professional, Family/ General Practice, Internal Medicine; Able to serve as PCP	68%	11%	42%	13%	45%
Average Across All Sampled Directories	N/A	N/A	75%	15%	35%	20%	45%