

Notable inaccuracies found in insurers' mental health care provider directories in California

February 24 2023, by Rae Lynn Mitchell



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As the mental health crisis continues across the nation, many people struggle to find the care they need. Health insurers publish directories of

mental health providers to help consumers obtain care; however, inaccurate directories and a shortage of providers within many insurance networks can make finding covered mental health services challenging.

The U.S. [federal government](#) and those of many states have put regulations in place to ensure [provider directory accuracy](#), with California having some of the most stringent rules. However, research on the [accuracy](#) of mental health care provider directories has been limited. Simon Haeder, Ph.D., associate professor in the Department of Health Policy & Management at the Texas A&M University School of Public Health, together with colleagues from Yale University and Ohio State University, measured the accuracy of provider directories in California and the ability to schedule timely appointments with the listed providers. The [study](#), published in *The American Journal of Managed Care*, used provider survey data from 2018 and 2019 for provider directories in different types of health insurance plans, amounting to a total of more than 1 million provider listings.

The surveys covered health insurance plans that are sold commercially, those included in California's Affordable Care Act marketplace (Covered California) and plans available through California's Medi-Cal program. Haeder and colleagues first assessed the total number of providers that could be contacted successfully. For successfully contacted providers, the researchers then analyzed timely access by measuring how soon a patient could see a psychiatrist or non-physician mental health provider (NPMHP) for either an urgent care or general care visit. The researchers classified urgent care appointments scheduled within 96 hours as timely. For general care appointments they classified psychiatrist appointments scheduled within 15 days and NPMHP visits within 10 days as timely.

Researchers found that surveyors could reach about 68 percent of the psychiatrists and nearly 60 percent of the NPMHPs listed. In 2019, the

accuracy increased, though it is unclear whether this was due to more accurate directories, changes in survey methods or a larger sample size. However, the researchers note that there was notable public and political focus on provider directories at that time. They also found that provider directory accuracy was somewhat higher for NPMHPs compared to psychiatrists and for commercial plans compared to Covered California and Medi-Cal plans. The researchers hypothesize that the greater accuracy for commercial plan directories may be due to consumer pressure or a focus on [customer satisfaction](#).

The analysis found that surveyors could schedule timely urgent care appointments with psychiatrists in 47 percent of cases in 2018 and 49 percent of cases in 2019. Surveyors achieved timely urgent care NPMHP appointments in nearly 62 percent of cases in 2018 and around 57 percent of cases in 2019. For general care appointments, the 2018 and 2019 timely care percentages were around 74 percent and 70 percent, respectively, for psychiatrists and 77 percent and 65 percent, respectively, for NPMHPs. In contrast with the accuracy analysis, the researchers found that timely access percentages were consistently higher for Medi-Cal plans and lowest for commercial insurance plans. Haeder and colleagues note that Medicaid contract obligations and federal requirements may have contributed to the greater timely access in Medi-Cal plans.

The analysis found that despite the attention paid to provider directory accuracy and timely access there is still significant room for improvement in both regards. They also note a few limitations to their analysis. First, the study focuses entirely on health insurance provider directories in a single state, California. However, California is the most populous state in the country. Additionally, the state has some of the most stringent regulations on provider networks. Lastly, the NPMHP category covers a diverse set of mental health providers. Future research that further differentiate these providers could give a more detailed understanding of provider directory accuracy and care access.

Despite the limitations to this analysis, the researchers found notable directory inaccuracies and inadequate provider networks that could hinder timely access to mental health care that many people need. These findings indicate a need for greater oversight as shortcomings persist despite California having some of the strongest regulations in the nation. More accurate directories and improved access to timely care are vital parts of ensuring better [health](#) coverage for the population.

More information: Provider Directory Inaccuracy and Timely Access for Mental Health Care, *The American Journal of Managed Care* (2023). DOI: [10.37765/ajmc.2023.89318](https://doi.org/10.37765/ajmc.2023.89318)

Provided by Texas A&M University

Citation: Notable inaccuracies found in insurers' mental health care provider directories in California (2023, February 24) retrieved 15 July 2023 from <https://medicalxpress.com/news/2023-02-notable-inaccuracies-mental-health-directories.html>

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