



October 17, 2023

The Honorable Ron Wyden
Chairman
Senate Finance Committee
United States Senate
Washington, DC 20510

Dear Senator Wyden:

Thank you for meeting with the Alliance of Community Health Plans (ACHP) and our member company CEOs and senior executives on September 28, 2023, during our fall Board meeting and annual Symposium. We appreciate your continued leadership and commitment to making health care accessible and affordable.

During our meeting, you requested additional details regarding ACHP's stance on provider directory accuracy and "ghost networks." I reaffirm our member companies' commitment to ensuring provider directory information is accurate so patients have access to the care they need, especially mental health services. ACHP member companies also recognize the essential need for accurate behavioral and mental health provider information as the U.S. faces overwhelming patient demand and a dwindling provider workforce.

One of a health plan's core functions is to establish and maintain a broad network of providers to ensure their enrollees have access to care. ACHP member companies invest substantial financial and human resources to ensure provider directories are accurate. However, notable challenges remain that are not unique to our member companies. Through extensive discussions with our member companies, the key challenges for highly accurate provider directories include:

- 1. Misaligned data sources.** There are significant issues with the source and type of information provider directories are based on. This data typically is sourced from credentialing, claims or contracting departments, for those specific purposes, resulting in no guarantee that the information is useful for the purposes of scheduling an appointment. While plans implement processes to eliminate excess data, it is ultimately a process driven by imperfect human interactions.
- 2. Insufficient and ineffective incentives.** Plans yield limited, if any, improvement in provider data accuracy when providing financial incentives to providers. In addition, plans rarely hold the market leverage to levy penalties on providers for missed deadlines or inaccurate information.
- 3. Provider shortages and administrative burnout.** The nation's dramatic provider shortage has serious downstream impacts, one of which is clinical staff are overburdened by verifying provider information for multiple different contracted payers. This burden only increases with the size of the provider group or the nature of the market.



ACHP member companies use two key approaches to make improvements to the accuracy of their provider directories. First, our member companies leverage personal relationships with their provider network to maintain accurate provider information. As required by the *No Surprises Act* and the *Patient Access API and Interoperability* regulation, our member plans engage with providers at the required, or more frequent, intervals. While this process is labor-intensive, it typically yields more successful results in comparison to other collection and verification processes. Established and longstanding relationships with the appropriate individuals within the provider practice or group is the key to the success of those efforts. However, success is subject to the time and availability of provider staff. With no enforcement mechanism to guarantee the timely exchange of updated provider information, our member companies are left with insufficient tools to ensure accurate directory information.

Second, most ACHP member companies rely on third party partners with sophisticated software to cross-check and analyze a plan's provider directory information across larger data sources. This helps flag any data with high, mid- or-low probability for inaccuracies, prompting the plan to conduct targeted outreach to that provider.

In addition to health plan specific efforts to ensure patients have access to accurate information, there are protections in place for instances when patients accidentally receive out-of-network care based on inaccurate provider directory information. For instance, the *No Surprises Act* requires that health plans issue in-network cost sharing for patients that receive care from a provider that is inaccurately listed as "in-network" on the directory. Despite these protections and payer efforts to improve provider directories, there is opportunity for further legislative and regulatory assistance. Our member companies' experience in maintaining provider directories highlights clear opportunities for improving provider directory accuracy:

- 1. Establish standards for provider reporting.** Currently, there are no standards for how to collect or submit provider information. The lack of standardization results in the primarily manual and burdensome process for maintaining these directories. Standards would help address the excess data not necessary for consumer use (i.e., selecting a provider and scheduling an appointment) and any data not currently captured that consumers should have access to such as, whether a provider is seeing new patients and any cultural competencies.
- 2. Create a National Provider Directory.** The current patchwork approach to provider directories benefits neither plan, nor provider. A single source of truth for provider information could ameliorate much of the provider burden associated with updating their directory information. Providers would no longer need to submit data to multiple different plans, multiple times a year or for updates to location, availability, etc. This would also eliminate the unstandardized approach of plans using different means and methods to collect and verify provider information. CMS also issued a [Request for Information](#) on this option to improve provider directories and has the authority and early industry insight to take initial steps. ACHP recognizes that this would require substantial industry assistance and we are prepared to lead.

While there is no silver bullet solution to provider directory inaccuracies, a national approach would dramatically improve directory accuracy among federal health programs. Until we achieve a national



directory that addresses the data credibility, provider burden and cost concerns, standardized reporting would lead to substantial improvements in the interim.

ACHP and our member companies are ready to work with you and your staff to improve provider directory accuracy and care delivery. We look forward to continued engagement and partnership in this effort. Please contact Tricia Guay, ACHP's Director of Legislative Affairs, at tguay@achp.org, with any questions or if we can provide further information.

Sincerely,

Ceci Connolly
President and CEO
Alliance of Community Health Plans