



## CMS Reviews Online Provider Directory Accuracy

CMS conducted its first round of reviews to assess the accuracy of Medicare Advantage (MA) online provider directories between February and August of 2016. In January, CMS issued its report of this review and provided insight into the primary findings and implications for the future.

The CMS review assessed the accuracy of 54 Medicare Advantage Organizations (MAOs), with almost 6,000 total providers reviewed. The overall results of the review were that 45 percent of the provider directory locations listed were inaccurate. The primary types of inaccuracies identified were:

- 1) The address was incorrect, and the provider was not at the location listed.
- 2) The phone number was incorrect.
- 3) The provider did not accept new patients when the directory indicated that the panel was open.

Frequent instances of inaccuracies will result in increased frustration for members trying to locate a provider and prevent access to care. CMS is concerned about the inaccuracies found and has expressed that organizations with poor findings may find that CMS has a reason to question the validity and adequacy of the MAO's network, overall. In looking at the deficiencies most likely to impact care, 85 percent of those were the most egregious errors. The findings suggest that MAOs are not conducting adequate reviews of their provider directories as required.

CMS offered suggestions to minimize deficiencies based on their reviews.

- Group practices should not use their common address at the group level to populate the directory. Individual provider office addresses where care is delivered is what is expected.
- Routine internal audit and testing of the provider directory data is essential and required quarterly.
- MAOs must implement routine processes that drive more accurate information in their directories. This includes a proactive approach that reaches out to providers for updated information on a regular basis.

Failure to provide accurate information to members may hinder their ability to get care and poses a significant barrier to access to providers. Consequently, CMS has issued compliance actions to address the inaccuracies as a means of driving the industry to improve the quality and accuracy of their online directories. Thirty-one (31) Notices of Non-Compliance, 18 Warning Letters and 3 Warning Letters with a Request for a Business Plan were issued to the impacted organizations.

BluePeak conducts provider directory reviews as CMS would do. Let BluePeak identify any deficiencies you may have in your directories, allowing you the opportunity to correct deficiencies before CMS finds them.

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