

FOR IMMEDIATE RELEASE:

Monday, August 1, 2016

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DMHC Director Rouillard Issues Statement on Provider Directory Non-Routine Survey Follow-Up Reports for Anthem Blue Cross & Blue Shield of California

(Sacramento) –California Department of Managed Health Care (DMHC) Director Shelley Rouillard issued the following statement today after the DMHC issued Non-Routine Survey Follow-Up Reports on the accuracy of provider directories for Anthem Blue Cross (Blue Cross of California) and Blue Shield of California (California Physicians' Service).

“Access to care often starts with the provider directory, which is why its accuracy is so important,” said Director Shelley Rouillard. “While I am disappointed the corrective actions implemented by the plans to date have not resulted in more accurate provider directories, we expect measurable improvement with the full implementation of Senate Bill 137. This legislation provides a new comprehensive framework for the regulation of provider directories and adds significant accountability for health plans and providers.”

Senate Bill 137 (Hernandez, 2015) was enacted subsequent to the DMHC’s initial Non-Routine Surveys in 2014. SB 137 includes several key provisions pertaining to both health plans and their contracted providers, which were not previously required, including strict timeframes for verification of provider information, investigation of inaccuracies, frequent updating, and consistency of the information displayed for all health plans. For more information on the new requirements of SB 137 see page 6 of the follow-up survey reports linked below. SB 137 took effect on July 1, 2016.

The Non-Routine Survey Follow-Up Reports can be viewed by clicking on the following links:

Anthem Blue Cross (Blue Cross of California):

http://dmhc.ca.gov/desktopmodules/dmhc/medsurveys/surveys/303_nr_follow%20up_080116.pdf

Blue Shield of California’s (California Physicians' Service):

http://dmhc.ca.gov/desktopmodules/dmhc/medsurveys/surveys/043_nr_follow%20up_080116.pdf

Enrollees experiencing difficulty locating a provider should first contact their health plan’s member services for assistance. If they are unsatisfied with their health plan’s response, they can contact the DMHC Help Center for assistance at 1-888-466-2219 or www.HealthHelp.ca.gov.

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Background:

Between January and May 2014, the DMHC received numerous complaints from Anthem Blue Cross and Blue Shield of California individual market enrollees who could not find a primary care physician in their area or alleged that they had been misled by inaccurate provider directories. On June 10, 2014, the DMHC initiated Non-Routine Surveys of the plans' provider directories.

On November 3, 2015, the DMHC [announced](#) settlement agreements with the plans to address deficiencies identified during the surveys. The agreements resulted in a \$350,000 fine against Blue Shield of California and a \$250,000 fine against Anthem Blue Cross. The settlement agreements also required the plans to continue corrective actions to correct provider directory deficiencies and to reimburse enrollees who may have been financially impacted by inaccuracies in provider directories. In October 2015, the DMHC initiated the follow-up surveys. The DMHC will continue to monitor plan progress.

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About DMHC:

The DMHC protects the health care rights of more than 25 million Californians and ensures a stable health care delivery system. The Department has helped more than 1.7 million Californians resolve health plan problems through the Help Center. Information and assistance is available at www.HealthHelp.ca.gov or by calling 1-888-466-2219.