

## Accessing providers in Oklahoma's insurance networks

At a time of unprecedented need for mental health services, Oklahomans frequently report waiting weeks or months to see therapists and other behavioral health providers. For the nearly two million Oklahomans who have commercial insurance, affordable access to care depends on whether their insurance carrier offers a reliable network of providers.

Healthy Minds Policy Initiative studied whether Oklahomans have reliable access to behavioral health providers through their private insurance plans. Here's what we found.

### **Key findings**

- Many providers appear unreachable
- Active providers have long wait times
- Networks have gaps in rural areas and specialties
- Networks leave out most providers

#### FINDING #1

# The majority of behavioral health providers listed by insurance networks appear unavailable or unreachable – many with disconnected phone lines.

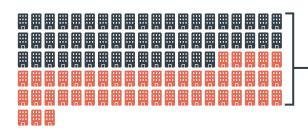
Oklahomans with commercial health plans rely on behavioral health provider directories to seek services. On the surface, network directories provided by insurance plans appear to have providers who cover large swaths of Oklahoma. When Healthy Minds tested these directories in nine urban, suburban, and rural ZIP codes, as many as 65% of providers couldn't be reached — and half of those had disconnected or out-of-service phone lines.

#### Findings from calls to 159 behavioral health providers revealed significant problems:

56 were reachable by phone (35%)

Of the 40 providers who agreed to an interview, 18% were not in network or were unsure.

103 were unable to be reached (65%)



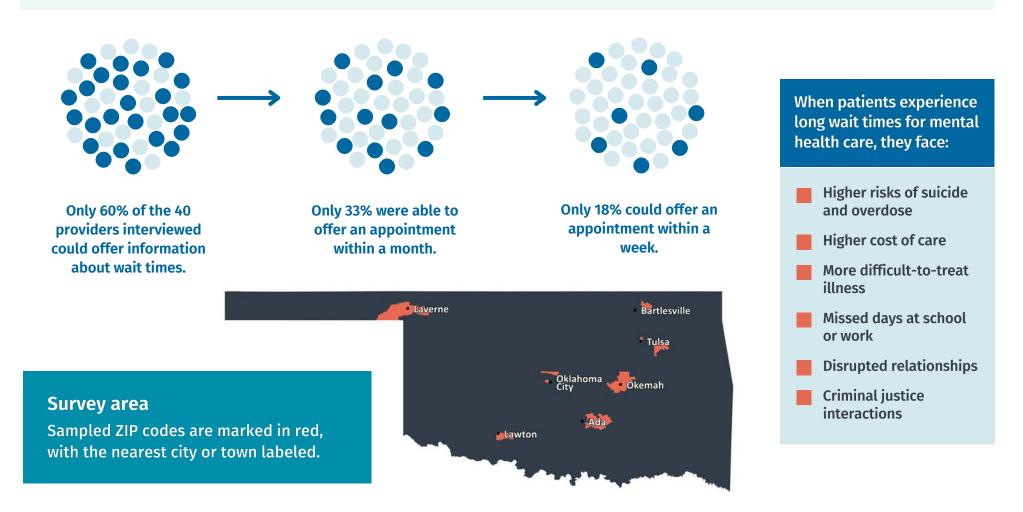
65% of providers did not respond, including 30% who were unable to be reached because of inaccurate and outdated directories.

hm.

# Even when behavioral health providers are active in the network, many cannot see clients in a timely manner.

A common standard for routine outpatient care is that a health plan member can be seen within 7 days of their initial contact. Without this timely access, Oklahomans face escalating crises that increase poor academic performance, emergency room utilization, unnecessary law enforcement contacts, and escalating costs for public services.

In our sampling of nine urban, suburban, and rural ZIP codes, only 18% of active providers could meet the 7-day benchmark.



# Network directories offer fewer behavioral health providers for rural Oklahomans and those with complex needs such as substance use treatment.

Using provider directories from three commercial health plans, we found that over 90% of the population lives within a 30-minute drive of at least one behavioral health provider. However, far fewer Oklahomans live near a listed psychiatrist or substance use treatment specialist. Depending on the plan examined, as few as 64% of the population resides within 30 minutes of a substance use treatment specialist and as few as 71% reside within 30 minutes of a psychiatrist.

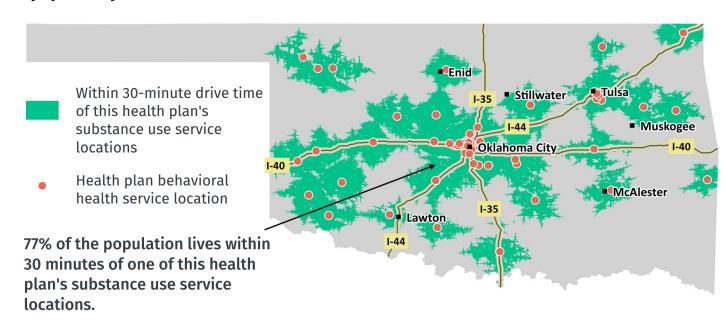








## Access to in-network providers is lower in rural areas and for specialties like psychiatry and substance use treatment.

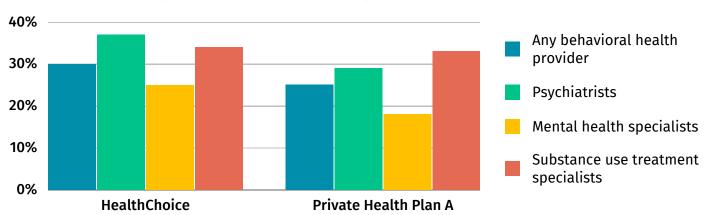


These findings assume that directories are up to date and accurate. However, a separate analysis showed that as many as 65% of providers listed in the directories have inaccurate contact information or may not be available.

# Insurance plans leave out the vast majority of available providers. In the best example, only 30% of behavioral health providers are in network.

A separate analysis involved matching the names of licensed behavioral health clinicians from state licensing boards to the names of behavioral health clinicians listed in the provider network directories. Any given directory is missing somewhere between 63-71% of licensed psychiatrists and 66-67% of licensed substance use treatment specialists.

### Share of licensed providers within health plan networks



27%

In Oklahoma, private insurance pays on average 27% less to behavioral health providers than to general health care practitioners.

## 2023 legislative opportunities



## Ensure timely care and protect Oklahomans from high out-of-network costs

Oklahomans across the state, but especially in rural areas, struggle to find mental health clinicians who can see them in a timely manner. **SB 254** in the 2023 legislative session allows people who are insured to seek out-of-network mental health care coverage at no additional cost to them when the networks fail.



### Establish network monitoring standards

Consumers struggling to find mental health care in their insurance networks are further frustrated by inaccurate network directories. **SB 442** in the 2023 legislative session lays out standards for directory accuracy along with reporting requirements. More than half of states across the country have implemented similar standards.