

ACEP HEALTH INSURANCE POLL RESEARCH RESULTS

Prepared For:

American College of Emergency Physicians



September 2015

625 North Washington Street, Suite 450
Alexandria, VA 22314
800.644.6646 *toll free*
703.739.1000 *telephone*
703.549.6057 *fax*
www.MarketingGeneral.com

TABLE OF CONTENTS

Project Background1

Research Methodology.....1

Sample Characteristics1

Findings1

Project Background

ACEP is interested in conducting a short poll with its member physicians to understand the impact the Affordable Care Act (ACA) has had on the ability of patients with medical insurance to pay out of pocket and/or out of network costs.

Research Methodology

Marketing General Incorporated (MGI) sent invitations to participate in the poll on September 8, 2015, to a list of 25,501 current ACEP members.

Of the 25,501 email invitations sent, 1,407 emails bounced or failed to send, resulting in a net total of 24,094 invitations sent. To boost response rates, MGI sent reminder emails to non-responders and non-completers on September 10 and September 14.

The poll officially closed on September 15 at 12 noon. A total of 1,433 responses were completed, providing a response rate of approximately 6%* and a margin of error of +/- 2.6%. The margin of error, or standard of error, is a statistical term used to measure the random fluctuations inherent in samples—the smaller the standard of error, the more accurate the measurement of the population or universe.

This study's significance level of .05 carries with it a 95 percent confidence interval. The confidence interval is established as the likelihood that the same results would be achieved in a similar study, meaning that if we were to conduct this study 100 times, then the same results plus or minus the margin of error (2.6%) would occur 95 out of 100 times.

* Typically, we see an 8% response rate for polls.

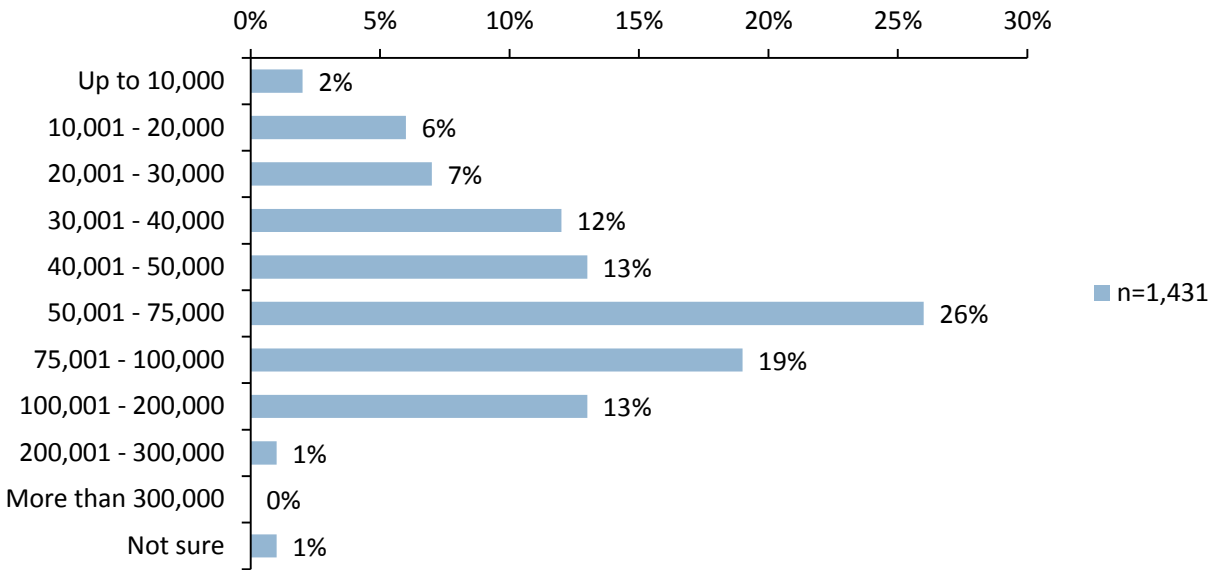
Sample Characteristics

Number of Responses per State					
STATE	COUNT	PERCENT	STATE	COUNT	PERCENT
Alabama	19	1%	Montana	4	0%
Alaska	6	0%	Nebraska	6	1%
Arizona	26	2%	Nevada	8	1%
Arkansas	5	0%	New Hampshire	5	0%
California	139	10%	New Jersey	40	3%
Colorado	32	2%	New Mexico	7	0%
Connecticut	27	2%	New York	90	6%
Delaware	9	1%	North Carolina	42	3%
District of Columbia	11	1%	North Dakota	3	0%
Florida	77	5%	Ohio	79	6%
Georgia	36	3%	Oklahoma	13	1%
Hawaii	7	0%	Oregon	20	1%
Idaho	7	0%	Pennsylvania	61	4%
Illinois	60	4%	Rhode Island	12	1%
Indiana	21	1%	South Carolina	21	1%
Iowa	11	1%	South Dakota	4	0%
Kansas	5	0%	Tennessee	22	2%
Kentucky	17	1%	Texas	113	8%
Louisiana	20	1%	Utah	20	1%
Maine	6	0%	Vermont	1	0%
Maryland	33	2%	Virginia	45	3%
Massachusetts	44	3%	Washington	42	3%
Michigan	69	5%	West Virginia	10	1%
Minnesota	13	1%	Wisconsin	19	1%
Mississippi	12	1%	Wyoming	2	0%
Missouri	28	2%	Puerto Rico	4	0%

The top 10 participating states include:

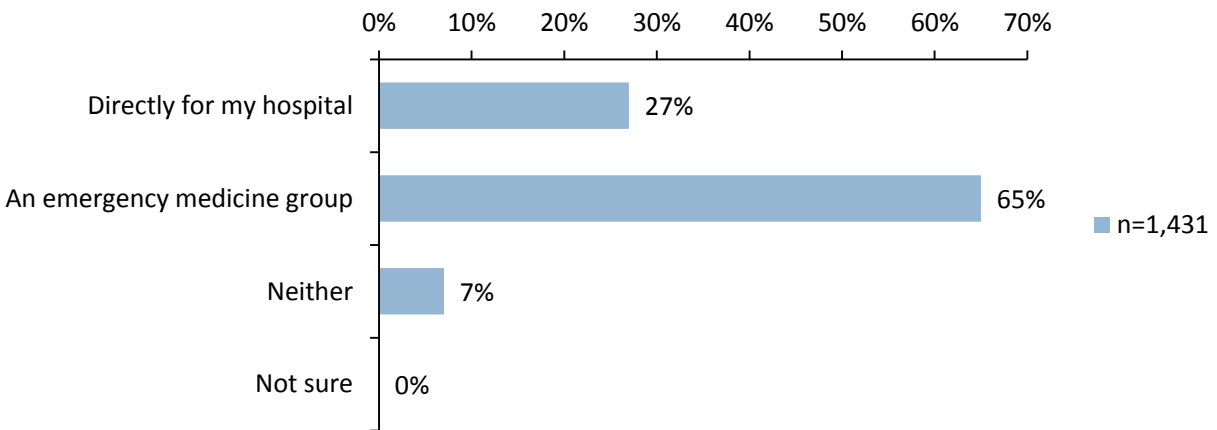
1. California	139—10%	6. Michigan	69—5%
2. Texas	113—8%	7. Illinois	60—4%
3. New York	90—6%	8. Pennsylvania	61—4%
4. Ohio	79—6%	9. Georgia	36—3%
5. Florida	77—5%	10. Massachusetts	44—3%

What is the emergency department patient volume where you work the majority of your time?



ACEP member physicians generally work in emergency departments with patient volumes between 50,001 and 75,000.

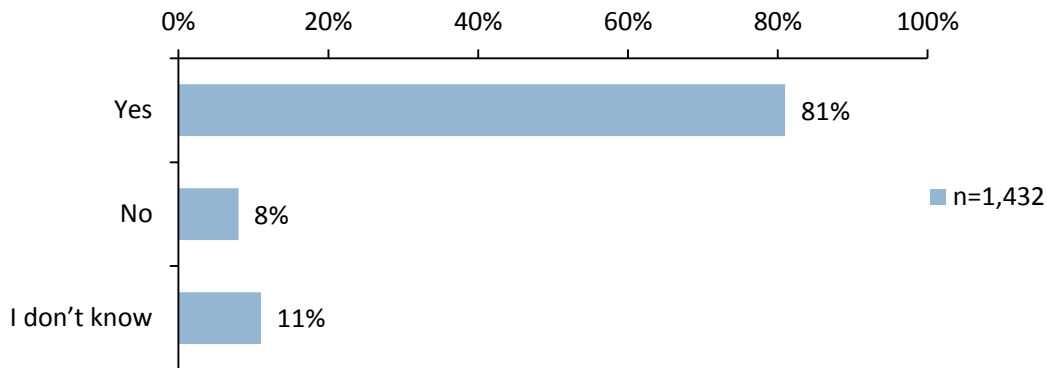
As an emergency physician, do you work directly for your hospital or for a private group contracting with your hospital?



Approximately two-thirds of ACEP members work for an emergency medical group.

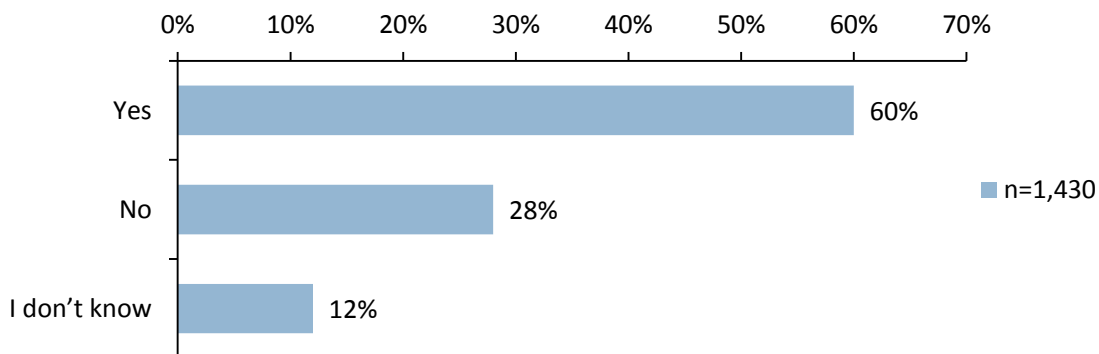
Findings

Have you treated patients in your emergency department who have had difficulty finding specialists because they are participating in narrow network plans that limit their options for medical providers?



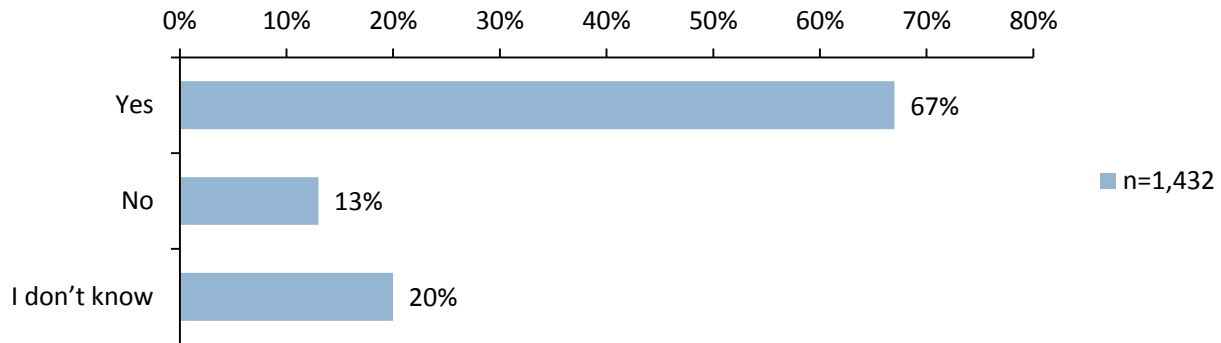
Eight in ten ACEP members report they have treated patients in their emergency department who have had trouble finding specialists because they are participating in narrow network plans that limit their options for medical providers.

Have you personally had difficulty finding medical specialists to care for your emergency patients because the specialists in their health plans are out-of-network?



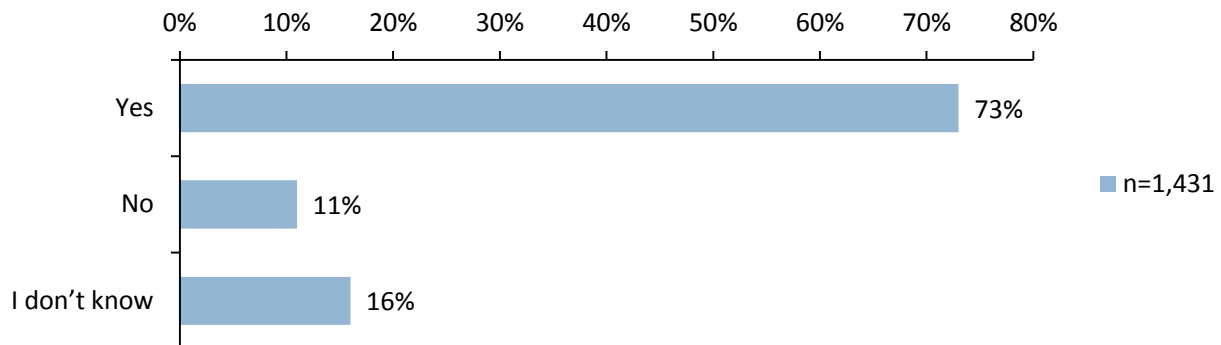
Six in ten member physicians indicate that they have personally had difficulty finding medical specialists to care for their emergency patients because specialists in their health plans are out-of-network.

Are primary care physicians in your community sending patients to the emergency department to obtain medical tests or procedures that health plans are refusing to cover (e.g., MRI)?



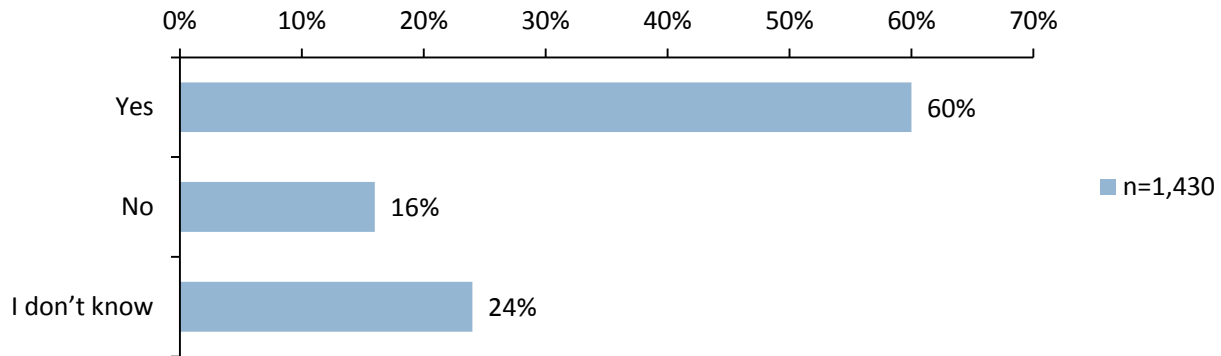
Two-thirds of ACEP members report primary care physicians in their communities are sending patients to the emergency department to obtain medical tests or procedures that health plans refuse to cover.

Are you seeing increased numbers of Medicaid patients because health insurance companies are failing to provide adequate numbers of primary care or specialty care physicians for their patients?



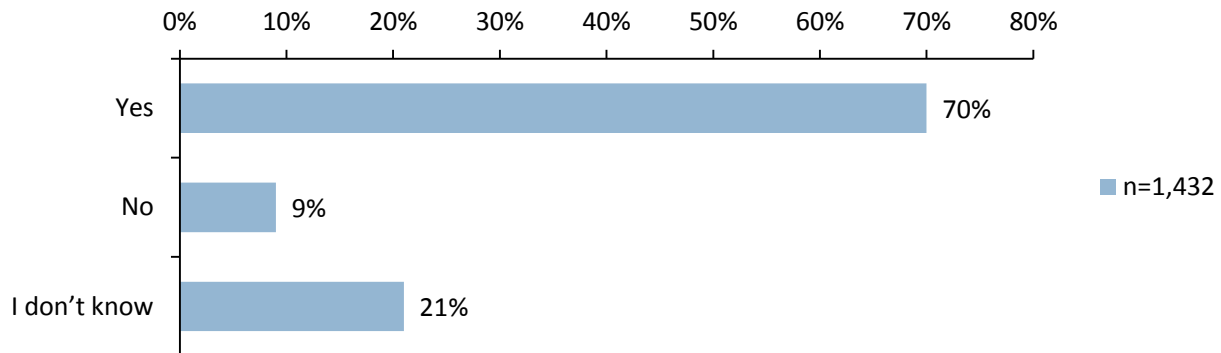
Three-quarters of member physicians are seeing increases in the number of Medicaid patients due to health insurance companies' inability to provide sufficient primary care or specialty care physicians for their patients.

Are you seeing increased numbers of emergency patients because their commercial health insurance plans are failing to provide adequate numbers of medical or surgical specialists for their patients?



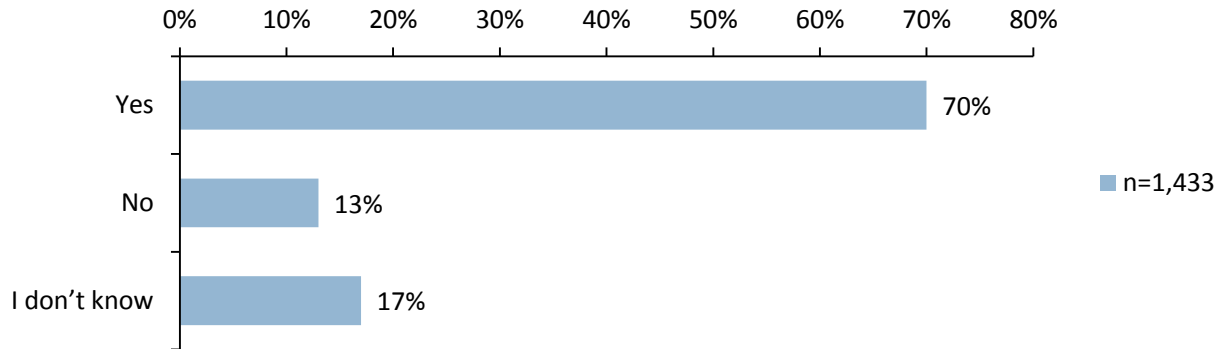
Six in ten ACEP member physicians report seeing higher numbers of emergency patients because their commercial health insurance plans are not providing adequate numbers of medical or surgical specialists for their patients.

Are you seeing patients in your emergency department who have health insurance (private and Exchange plans — not Medicare or Medicaid) but have forgone or delayed medical care because of high out-of-pocket expenses, co-insurance, or high deductibles?



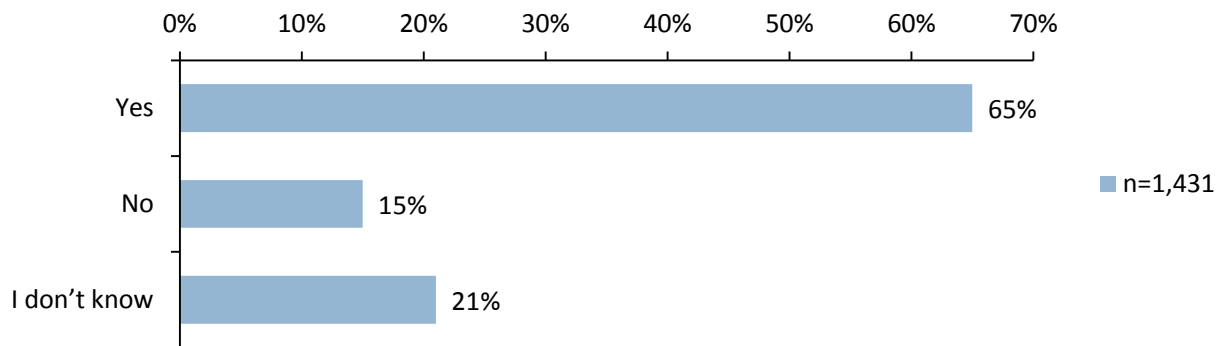
The majority of member physicians are seeing patients in their emergency department who have health insurance (private and Exchange plans) but have forgone or delayed medical care because of high out-of-pocket expenses, co-insurance, or high deductibles (70%).

Are you seeing emergency patients with health insurance who have delayed seeking emergency care because of high co-pays, co-insurance, or deductibles?



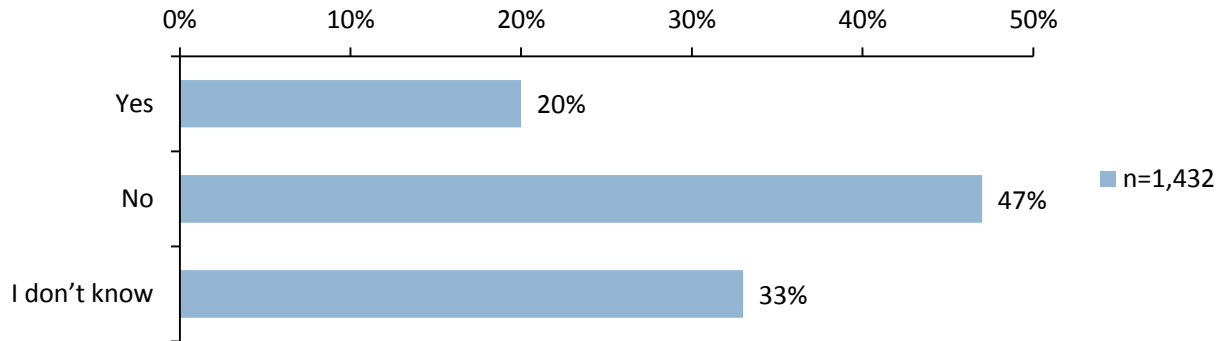
Seventy percent of member physicians report seeing insured emergency patients who have delayed seeking emergency care due to high co-pays, co-insurance, or deductibles.

Are you seeing increased numbers of emergency patients because their commercial health insurance plans are failing to provide adequate numbers of primary care providers for their patients?



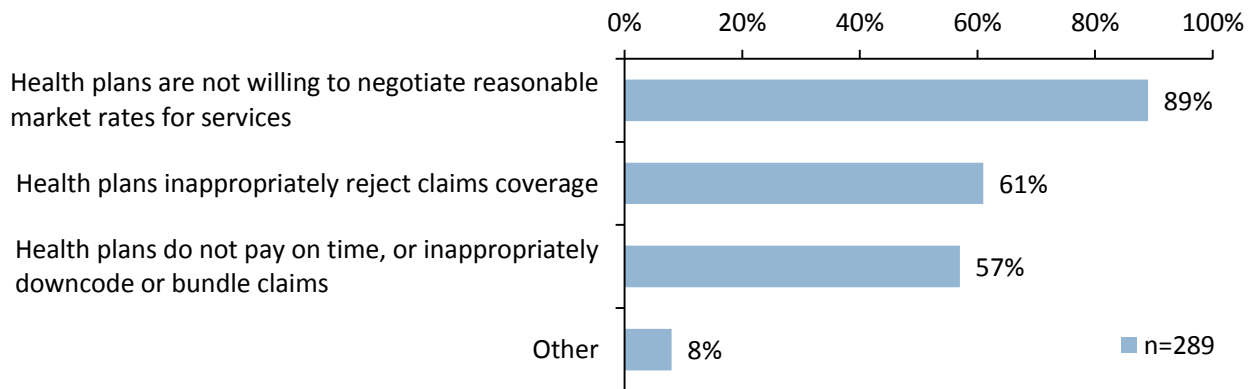
Two-thirds of ACEP members are seeing increased numbers of emergency patients due to their commercial health insurance plans failing to provide adequate numbers of primary care providers.

Are you or emergency physicians in your community opting out of participating in networks of commercial health insurance companies (not taking health insurance coverage)?



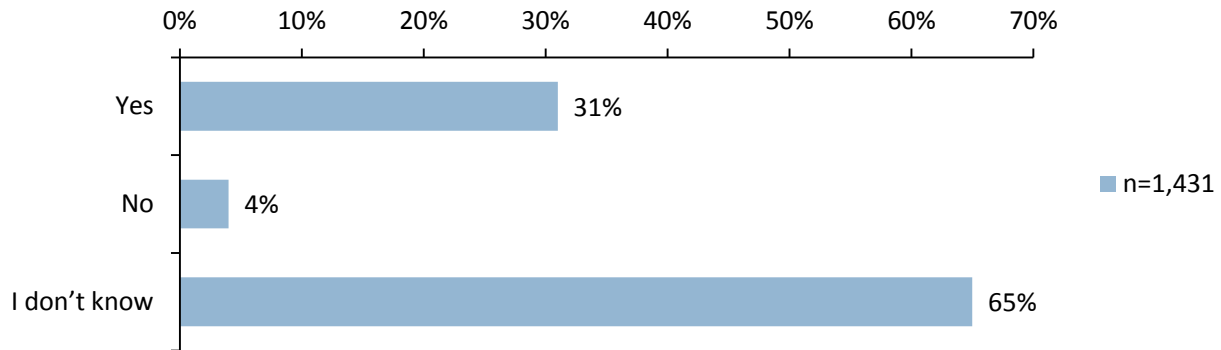
Almost half of ACEP member physicians report they or the emergency physicians in their community are not opting out of participating in networks of commercial health insurance companies (not taking health insurance coverage). However, 20% of emergency physicians are taking this route.

If yes, then why? Check all that apply.



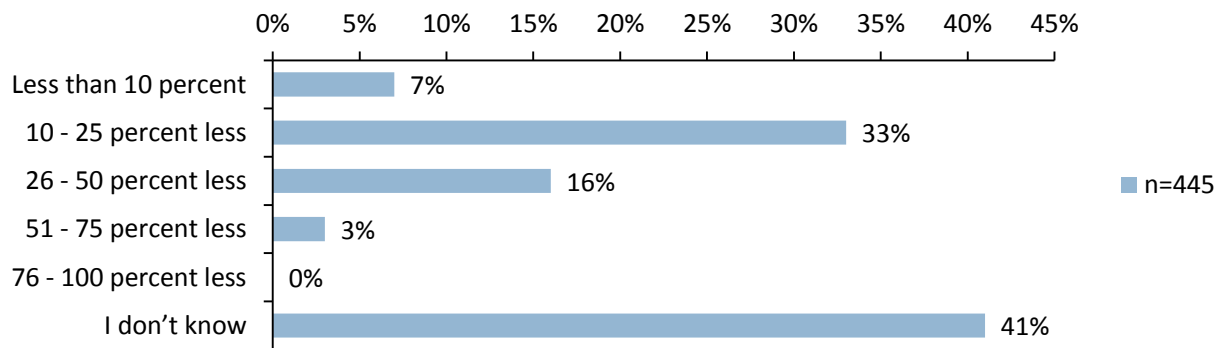
Nine in ten member physicians report they or the emergency physicians in their community are opting out of participating in networks of commercial health insurance companies (not taking health insurance coverage) because health plans are not willing to negotiate reasonable market rates for services. Most respondents also report they are opting out of commercial health insurance networks due to health plans inappropriately rejecting claims coverage (61%) and delaying payments or inappropriately downcoding or bundling claims (57%).

In the past year, have commercial health insurance companies (private or Exchange plans — not Medicare or Medicaid) been paying less for out-of-network emergency care provided in your emergency department (compared to the previous year)?



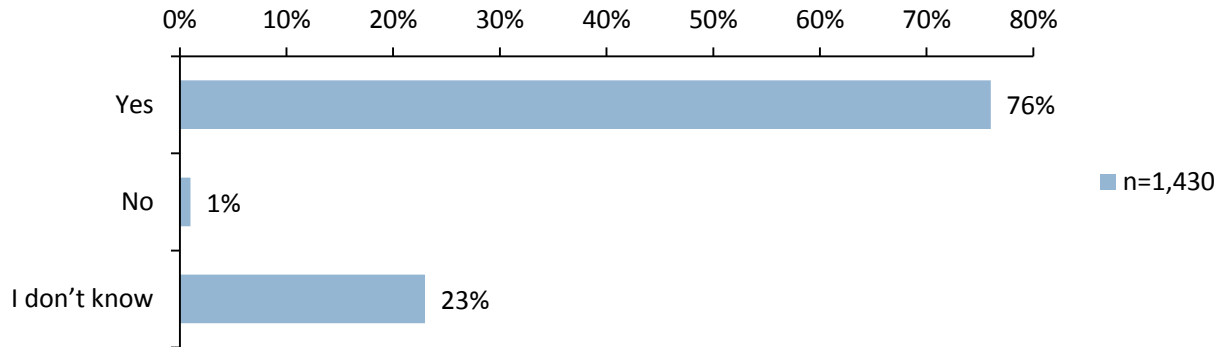
Less than one-third of ACEP members report commercial health insurance companies are paying less for out-of-network emergency care in the past year than in the previous year, while almost two-thirds of member physicians are uncertain of any difference.

If yes, then how much less?



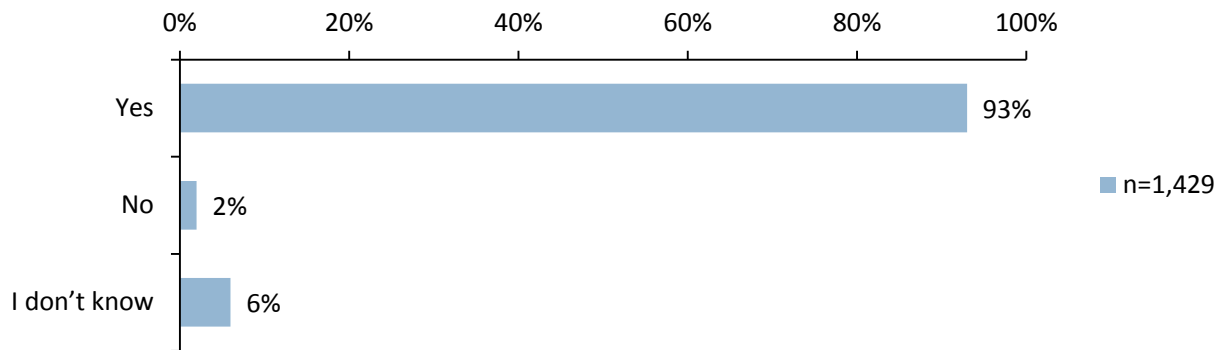
One-third of respondents indicate that commercial health insurance companies are paying 10% to 25% less for out-of-network emergency care; however, the majority of member physicians are uncertain how much less the insurance companies are paying (41%).

Are commercial health plans (private and Exchange) shifting more of the costs of medical care onto patients and medical providers?



More than three-quarters of member physicians report commercial health plans (private and Exchange) are shifting more of the costs of medical care onto patients and medical providers.

Should commercial health insurance companies be required to pay usual and customary charges for emergency patients?



More than nine in ten member physicians report commercial health insurance companies should be required to pay usual and customary charges for emergency patients.