

IHN-CCO Provider Directory Feedback
Community Advisory Council and its Local Advisory committees
September 11, 2018

The IHN-CCO Community Advisory Council (CAC) and its Local Advisory Committees appreciate the improvements IHN-CCO made to the Provider Directory in 2017. We recognize that the directory platform is an improvement over the previous PDF format.

To further improve the on-line Provider Directory, these advisory bodies provide the following feedback and/or questions to better understand the directory's purpose and utility:

1. **Provider specialties:** There needs to be a way to search for types of providers. For example, in mental health, IHN-CCO members need to be able to search for a psychiatrist or a therapist and also for therapists with various specialties, such as eating disorders or Cognitive Behavioral Therapy.
2. **Providers who see patients:** Only providers who can actually see patients should be listed in the directory. Currently, Qualified Mental Health Associates (QMHA) are listed when they aren't qualified to take appointments.
3. **County providers:** There seems to be some differences between county health departments in how they would like their mental health providers listed. For example, Benton County should be listed as a provider, not individual providers. It sounds like Lincoln County prefers that individual providers be listed. This should be clarified with each county.
4. Everyone in the provider directory is listed as taking new patients even when there are 18-month waiting lists.
5. Search feature should be flexible enough to allow for misspellings of words such as cardiologist.
6. The Directory should make it clear if a patient can call a specialist themselves or if they will need a referral to see a pulmonologist or not, for example.
7. How often is the Provider Directory updated?
8. The website where the provider directory is located could provide more guidance to members on how to use the Directory. For example, steps could be outlined for how to find a provider and more clarity given on if a referral is necessary before seeing a particular provider. Language around calling your PCP could be included so people know that their PCP might be the place to start with finding other providers.
9. Terms such as "preauthorization" and "Primary Care Provider" should be defined.