How do you rate your medical care? Your answer might be affected by your insurance

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For patients seen at a urology clinic, patient satisfaction scores vary by

insurance status—with higher scores for patients on Medicare and commercial insurance, but lower scores for those on Medicaid, reports a study in *Urology Practice*, an Official Journal of the American Urological Association (AUA). The journal is published in the Lippincott portfolio by Wolters Kluwer.

"Our study adds to previous evidence showing patient satisfaction scores are affected by the type of insurance—not just by the quality of care provided," comments senior author Werner de Riese, MD, Ph.D., Chair of the Department of Urology of Texas Tech University Health Sciences Center (TTUHSC), Lubbock. "That may have important implications for physician reimbursements, which are increasingly adjusted upward or downward based on patient satisfaction ratings."

Urology clinic data show 'payor-bias' in patient ratings

The researchers analyzed satisfaction ratings made by nearly 21,000 patients seen at the TTUHSC urology clinic between 2013 and 2020. Patient satisfaction scores were compared for those with different kinds of insurance coverage.

Forty-six percent of patients were covered by commercial/private insurance, 37 percent by Medicare and nine percent by Medicaid. Five percent of patients had other government coverage; self-pay or workers' compensation patients accounted for less than two percent each.

Patient satisfaction ratings differed between groups. Medicare patients reported the highest average score, 93.03 (on a 0-to-100 scale); followed by other government coverage, 91.49; commercial insurance, 91.32; workers' compensation, 90.72; Medicaid, 89.21; and self-pay/uncompensated, 89.00.

Although the numerical range was small, the data showed several statistically significant differences between groups. The "other" government group—mainly veterans or active-duty military members covered by the Veterans Administration or Tricare—reported "generally higher" patient satisfaction levels than every other group besides Medicare.

In contrast, Medicaid and self-pay patients had the lowest satisfaction scores. "Medicaid often covers the most vulnerable and disadvantaged patients, and our results are consistent with other studies reporting that hospitals treating more Medicaid patients have lower satisfaction scores," says Dr. de Riese.

Medicare and Medicaid have introduced "fee for performance" payments, in which reimbursements to physicians and hospitals are adjusted based on quality measures—including patient satisfaction scores. Commercial insurance plans are also moving toward such "value-based" reimbursement plans. However, there are concerns patient satisfaction scores may be affected by certain non-modifiable characteristics, including insurance status.

"Data from our urology clinic illustrate a potential bias in reported patient satisfaction levels, based on their health insurance coverage," says Dr. de Riese. The researchers call for further studies to explore the underlying reasons for this "payor-specific bias," particularly among Medicaid patients. "Meanwhile," Dr. de Riese adds, "we believe reimbursement policies should be modified to account for the payor-mix of patients seen by each physician."

 More information: Dan Hayward et al. Association Between Payor-Class and Patient Satisfaction Scores in an Academic Urology Outpatient Clinic, *Urology Practice* (2021). DOI: 10.1097/UPJ.0000000000000224