



Qualified Health Plan Directory Pilot Fact Sheet

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Background

In September 2024, the Centers for Medicare & Medicaid Services (CMS) announced a first-of-its-kind Qualified Health Plan (QHP) Directory Pilot (“the pilot”) to establish and launch an automated, one-stop shop, statewide, provider directory that will be accessible through the QHP Directory Pilot Portal (“the portal”). The goal of the pilot is to improve data accuracy, lessen the administrative burden on providers and payers, lower administrative costs, support interoperable data exchange, and ultimately improve patient and provider experiences.

The pilot is being launched in collaboration with the Oklahoma Insurance Department (OID). As its first test market, the pilot targets providers and organizational administrators representing health care organizations (or their assigned delegates) who participate in QHPs (including Stand-Alone Dental Plans) in Oklahoma, a state served by a federally facilitated exchange. Starting June 2025, users are requested to log in, review their prepopulated data, and verify their information is accurate and complete or make corrections as necessary.

Upon completion of this pilot, CMS will assess the data to understand results and identify the lessons learned. CMS will rely on end users for feedback on the portal’s ease of use, burden reduction, and other value-added benefits.



Why Participate?

This pilot aims to:

Reduce Burden for Providers and QHP

Issues: The pilot will allow users to access a portal where they can review and update prepopulated provider directory information. Once verified, provider information will be accessible to all participating health plans. This one-stop approach minimizes or eliminates the need for providers and health care organizations to update information in multiple locations across multiple plans, while also reducing the time that issuers must spend requesting and tracking updates from network providers.

Provide a Streamlined and Interoperable

Solution: The pilot will use Health Level Seven International® (HL7®) Fast Healthcare Interoperability Resources® (FHIR®) standards and support data exchange with issuers, leading to improved data consistency, reduced data discrepancy, and better collaboration among stakeholders.

Improve Data Accuracy: CMS used a specially designed data cleansing method to review and aggregate existing federal and state data, resulting in an updated database of provider information. CMS uploaded these cleansed data to the portal, creating the starting point for users to review, update, and verify their information. The database will be available to participating QHP issuers throughout the course of the pilot.

Benefit Consumers: Health plans will have access to accurate and current provider data, which they can then post to their individual websites for consumers to view.

Current Research Demonstrates the Need for Innovative Solutioning:

Provider directories are often inaccurate, fragmented and burdensome to maintain. ^[1] In examining directory entries for more than 40% of U.S. physicians, inconsistencies were found in 81% of entries across five large national health insurers. ^[2]

One study of two Oklahoma counties reviewed the top nine provider directories for accuracy of directory information. **Accuracy varied widely among the provider directories reviewed, with the top payers almost reaching 60% accuracy, and other hovering around 40% or 50%.** ^[3]

Current directories **rarely support interoperable data exchange** and are costly to the health care industry. ^[1]

On average, **providers across the country must routinely update directory information for 20 different payers and plans.**

U.S. physicians collectively **spend \$2.76 billion each year on directory maintenance.**

A single, streamlined platform for directory maintenance, could **save physician practices in this country \$4,746 annually, with approximately \$1.1 billion in collective annual savings nationwide.** ^[4]

¹ Request for Information; National Directory of Healthcare Providers & Services. Federal Register. October 7, 2022. Accessed April 16, 2025. <https://www.federalregister.gov/documents/2022/10/07/2022-21904/request-for-information-national-directory-of-healthcare-providers-and-services>

² Butala NM, Jiwani K, Bucholz EM. Consistency of Physician Data Across Health Insurer Directories. *JAMA*. 2023;329(10):841-842. doi:10.1001/jama.2023.0296

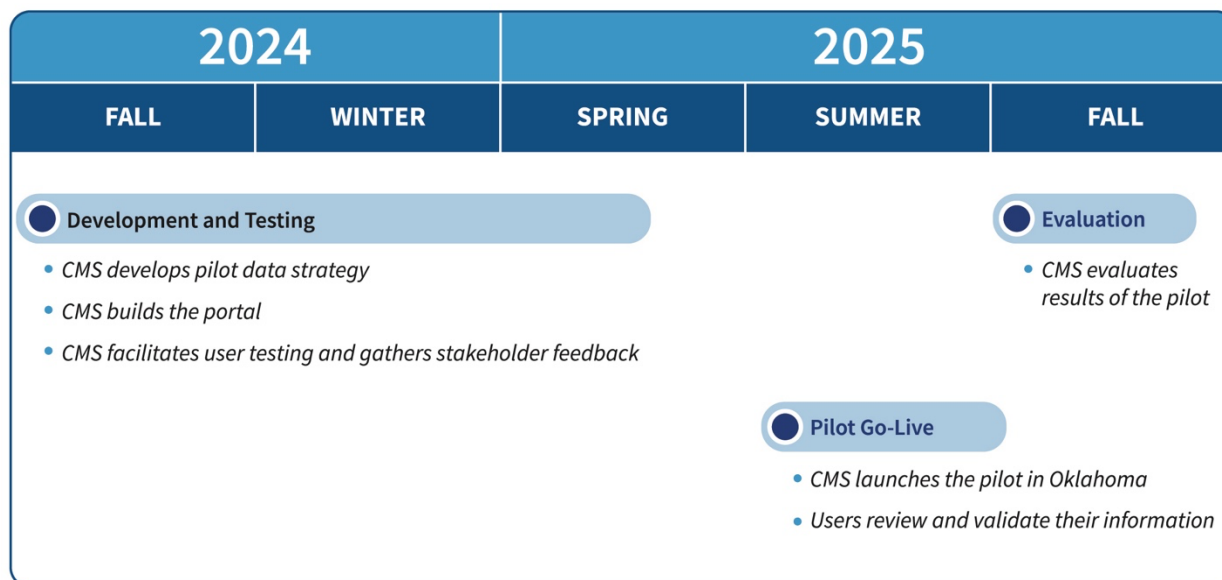
³ CMS Announces National Directory for Healthcare Pilot in Oklahoma – Defacto Health. September 18, 2024. Accessed April 16, 2025. <https://defacto.health/2024/09/18/cms-announces-national-directory-for-healthcare-pilot-in-oklahoma/>

⁴ Council for Affordable Quality Healthcare. *The Hidden Causes of Inaccurate Provider Directories*; November 22, 2019. Accessed April 16, 2025. <https://www.caqh.org/hubfs/43908627/drupal/explorations/CAQH-hidden-causes-provider-directories-whitepaper.pdf>



Timeline

The timeline below provides an overview of the pilot's major milestones. This timeline is subject to change.



Key Information for Issuers

OID is requiring QHP issuers in Oklahoma to participate in this pilot per Oklahoma Bulletin 2025-03. Issuers must complete the below activities:

- ✓ **Engage with** their providers to encourage participation.
- ✓ **Establish HL7 FHIR application programming interfaces (APIs) to the portal to use the data** from the portal on a weekly basis to update their respective public-facing issuer websites to reflect the latest data for providers participating in their plans.
- ✓ **Direct providers to update information in the portal** and limit other requests for directory information.

Participating issuers may see:

- ✓ **Improvements in data accuracy** resulting in enhanced provider network management.
- ✓ **Decreases in costs** due to fewer errors and reduced administrative overhead.
- ✓ **Efficiencies** associated with standardized provider directory processes.
- ✓ **Opportunities to drive innovation** by participating in a pilot that aims to shape future national health care directory standards.



Key Information for Providers and Organizational Administrators

During the pilot's development phase, CMS extracted provider and facility-level information from existing data sources (e.g., the [National Plan and Provider Enumeration System](#) [NPPES]) and prepopulated these cleansed data into the portal. Leading up to the portal's launch, CMS engaged a subset of providers, organizational administrators, and their assigned delegates in user feedback/testing sessions and gathered their input to inform development and refinement of the portal.

With the go-live of the portal, users should:

- ✓ **Log in** to the [portal](#), validate their prepopulated provider and/or facility information, and correct inaccuracies within 30 days.
- ✓ **Update** their data in the portal within 30 days of any subsequent change and re-verify all information every 90 days, in accordance with federal guidelines and separate state guidelines.
- ✓ **Provide feedback** to CMS on the experience of using the portal.

Participating providers and organizational administrators may see:

- ✓ **Reductions in administrative burden** due to streamlined, single-location data submission and improved data sharing processes.
- ✓ **Decreases in costs** due to reduced administrative overhead.
- ✓ **Improved data accuracy** for patients within provider referrals.
- ✓ **Opportunities to drive innovation** by participating in and providing feedback on a pilot that aims to shape future national health care directory standards.



Key Information for Consumers

At this time, the portal is only for the use of QHP issuers, QHP in-network providers, organizational administrators, and their assigned delegates in the state of Oklahoma. Consumers will not be able to access the portal during this pilot. However, CMS anticipates that participating issuers will use the updated and verified data from the portal to populate their consumer-facing websites, which may benefit consumers through improved data accuracy.



Resources

Please refer to the following resources for more information on roles and responsibilities related to the pilot, answers to frequently asked questions, and technical support.

- Frequently Asked Questions (available on the [QHP Directory Pilot](#) web page).
- QHP Directory Pilot Portal Technical User Guide (available within the [portal's](#) main navigation menu).

To receive additional information and updates about the pilot, subscribe to our distribution list [here](#).

Contact Us

Please contact QHPDirectoryPilot@cms.hhs.gov with any questions.