

## HCSDB Issue Brief

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# TRICARE Select: Access to Care by Provider Specialty

A chief objective of the Defense Health Agency is to provide health benefits through TRICARE that enable easy access to high quality care for active duty and retired military members and their families. To evaluate whether this goal is being met, it is important to examine whether TRICARE beneficiaries can readily access health care, whether the care they receive is high quality, and common problems that impede access to care.

Previous studies have explored beneficiary access to and ratings of providers, based on data from the TRICARE Select Survey of Beneficiaries (TSS-B). These studies focused on differences between broadly defined provider types, such as personal doctors, specialists, and mental health care providers, but not between specialty categories within these broader types. For example, the Government Accountability Office (GAO) analyzed TSS-B data from 2008–2011 and found that 25 percent of users of TRICARE's Standard/Extra options (now combined into the single Select plan) reported problems finding a civilian personal doctor or specialist who would accept TRICARE insurance, and 28 percent reported problems accessing a civilian mental health care doctor (GAO 2013). Among beneficiaries who had a problem finding a personal doctor, the most common reason was that the doctor did not accept TRICARE payments or was not taking any new patients; beneficiaries who had issues accessing civilian specialists and mental health care providers reported similar problems.

This issue brief draws on data from the 2017–2020 TSS-B to examine how ease of access, ratings of providers, and problems reported by beneficiaries vary across provider types and by specialty within provider types. To be consistent with how providers are defined in the TSS-B, we define provider types as personal doctors, specialists, and mental health care providers. For each provider type, TSS-B respondents were asked to select the specialty category of their provider (see Table 1 for the specialty category options). Our analysis focuses on the subsample of TSS-B respondents who reported using TRICARE Select for all or most of their care in the last 12 months and having a civilian personal doctor, specialist, or mental health care provider.

The language of the questions in the TSS-B differed slightly across provider type, an important point to consider when interpreting the results. Most notably, beneficiaries were asked to report access issues and ratings of their personal doctors since joining TRICARE Select, while the corresponding questions about specialists and mental health care providers focused on the providers that beneficiaries saw most often in the last 12 months. Other language differences in the questions are mentioned in the discussion of results and appear in the titles of the tables and figures.

**This issue brief explores how ease of access, ratings of providers, and problems reported by TRICARE Select users vary across provider types and by specialty categories within provider types.**

- More Select users reported no problem accessing care from specialists than from the other two provider types. Similar shares of users reported no problem accessing a personal doctor they were happy with and treatment or counseling from a mental health care provider, but there was more variation across specialty categories for mental health care providers than for personal doctors.
- Similar shares of Select users rated personal doctors and specialists highly (over 80 percent for most specialty categories); these shares were also much larger than the share who rated mental health care providers highly.
- Doctors not accepting TRICARE payments was the most commonly reported problem among Select users, across most provider specialty categories.

## A. Which providers do TRICARE Select users see most often?

Among Select users with a civilian personal doctor, a large majority said that their personal doctor was a general practitioner or was in family medicine (Table 1). But we saw greater variation among the specialists and mental health care providers whom beneficiaries saw most often in the last 12 months.

For specialists, beneficiaries cited "other" providers most often, even though they could select from 12 specialty categories. The next most common specialty categories were obstetricians-gynecologists (ob-gyns), dermatologists, and orthopedists. For beneficiaries who saw a mental health care provider, a quarter reported seeing a psychologist most often; marriage or family therapists and mental health counselors were the next most common specialty categories.

## B. Access to providers

Figures 1a through 1c show the percentages of TRICARE Select users who had no problem accessing care, by provider type and specialty category. Sixty-eight percent of beneficiaries reported no problem accessing a personal doctor they were happy with (Figure 1a). By specialty category, this number ranged from 61 percent for nurse practitioners or physician assistants to 78 percent for ob-gyns, but these differences were not statistically significant.

Even more beneficiaries, 83 percent, said they had no problems to get an appointment with their specialist in the last 12 months (Figure 1b). This number was largest for oncologists (90 percent) and was the only category to differ statistically from the estimate for all specialists.

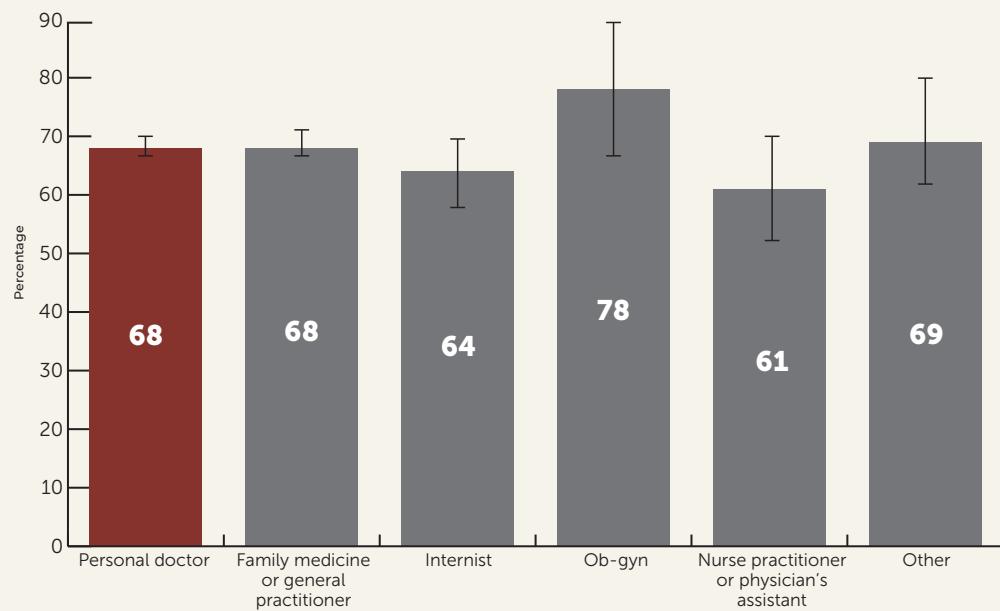
Compared with the other provider types, we found considerably more variation in the results across mental health care providers (Figure 1c), but the estimates were also less precise because of smaller sample sizes. One notable finding was the estimate for beneficiaries' personal doctors or nurses (81 percent). This was the only result to differ statistically from the estimate for all mental health providers and was much higher than the estimates across all other mental health specialty categories (70 percent or less).

**Table 1. Providers seen by TRICARE Select users, by provider type and specialty category**

Provider types and specialty categories	Percentage of Select users who saw provider (%)
<b>Personal doctor (n=16,071)</b>	
Family medicine or general practitioner	75.6
Internist	8.6
Ob-gyn	4.2
Nurse practitioner or physician's assistant	7.7
Other	3.9
<b>Specialist (n=12,678)</b>	
Surgeon	6.6
Cardiologist	6.8
Allergist	2.6
Dermatologist	13.8
Rheumatologist	2.8
Endocrinologist	4.8
Urologist	3.4
Oncologist	3.6
Orthopedist	10.9
Ear, nose, and throat specialist	4.0
Ob-gyn	16.6
Ophthalmologist	3.0
Other	21.2
<b>Mental health care provider (n = 1,839)</b>	
Psychologist	21.6
Psychiatrist	14.8
Psychotherapist	2.4
Social worker	6.0
Mental health counselor	17.1
Marriage or family therapist	19.6
Personal doctor or nurse	12.1
Other	6.3

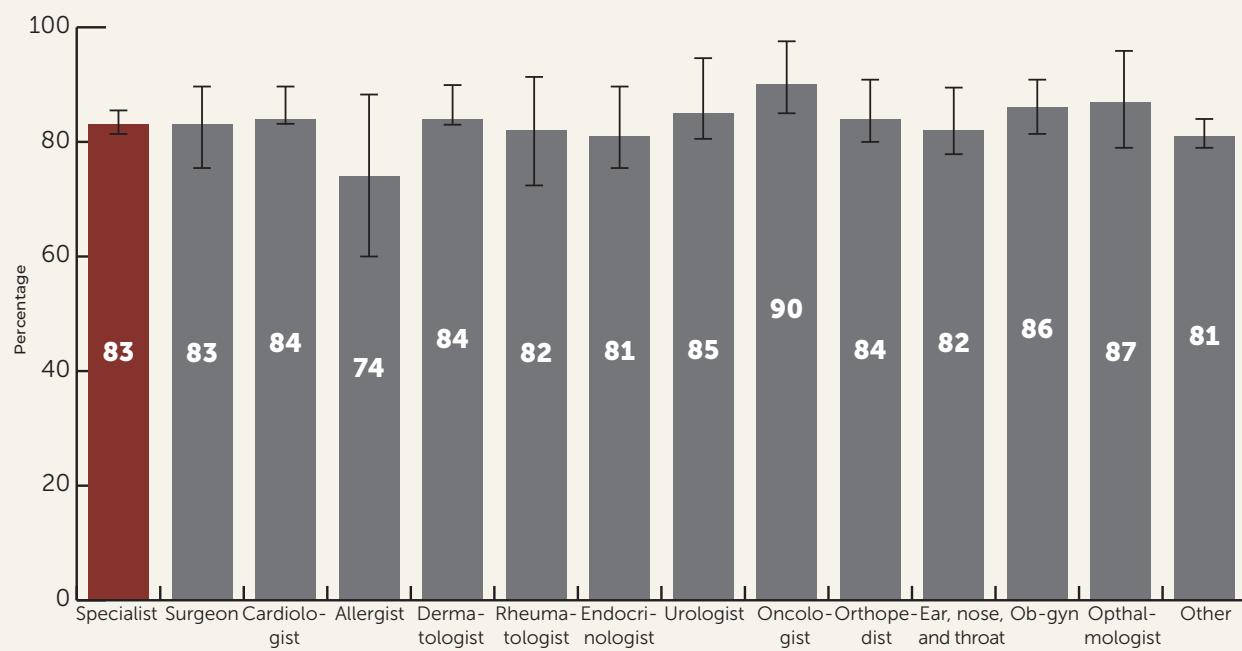
Note: Provider specialty categories are listed below each provider type in the order in which they appeared in the survey.

**Figure 1a. Beneficiaries who had no problem accessing personal doctor with whom they are happy**



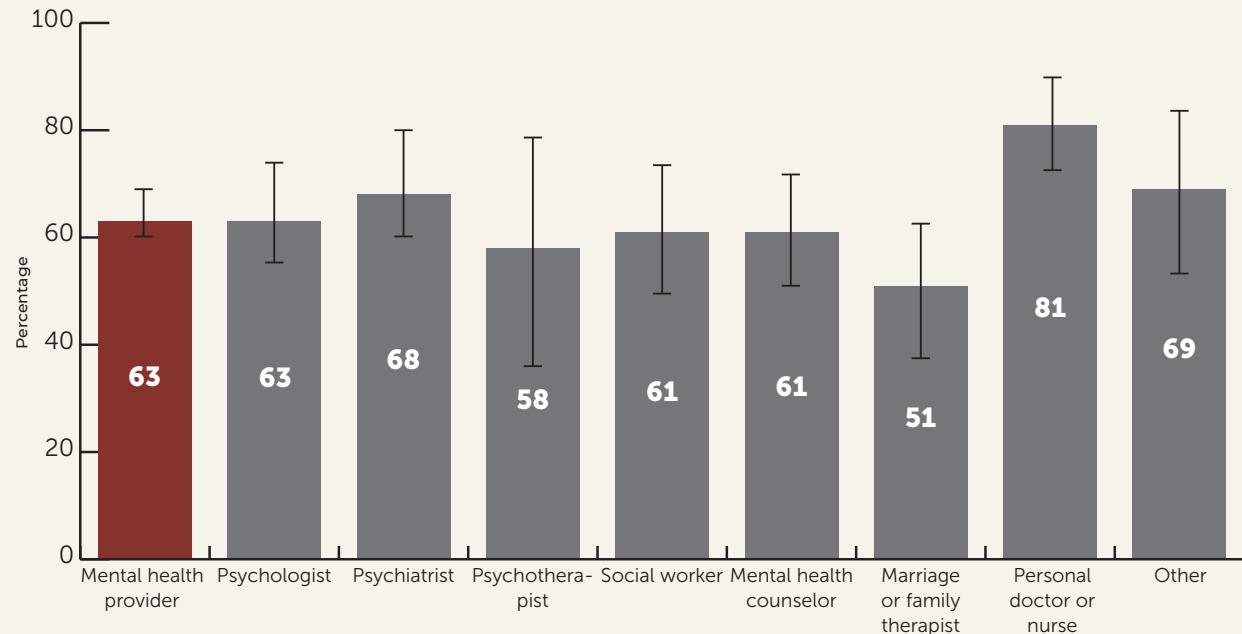
Note: Brackets at the top of each bar represent the 95 percent confidence interval.

**Figure 1b. Beneficiaries who had no problem accessing specialist in last 12 months**



Note: Brackets at the top of each bar represent the 95 percent confidence interval.

**Figure 1c. Beneficiaries who had no problem accessing mental health treatment/counseling in last 12 months**



Note: Brackets at the top of each bar represent the 95 percent confidence interval.

## C. Ratings of providers

The proportions of beneficiaries who rated their personal doctors highly (not shown) were notably higher than the corresponding results for beneficiaries who had no problem accessing a personal doctor. Estimates were above 80 percent for all specialty categories and were similar to the results for beneficiaries who gave a high rating to the category of specialist they saw most often in the last 12 months. The shares of beneficiaries who gave high ratings to the mental health treatment or counseling they received were notably smaller than the corresponding estimates for personal doctors and specialists. Most estimates across specialty categories were 70 percent or less. This could partly reflect that the question in the TSS-B asked beneficiaries to rate *all* mental health treatment or counseling they had received, instead of, like for specialists, asking them to rate the provider seen most often.

## D. What problems do TRICARE Select users face when seeking care?

Figure 2 shows the distribution of specific problems that beneficiaries faced related to personal doctors, specialists, and mental health care providers. (This analysis included only respondents who reported a problem accessing care, and respondents could select more than one problem.) For all three provider types, the most frequently reported problem was doctors not accepting TRICARE payments. The next four most common problems were the same for the three provider types, although the order of the problems varied. For example, of the three provider types, respondents were most likely to cite personal doctors for not taking new TRICARE patients. On the other hand, long waits for appointments were more commonly reported for specialists than for personal doctors and mental health care providers.

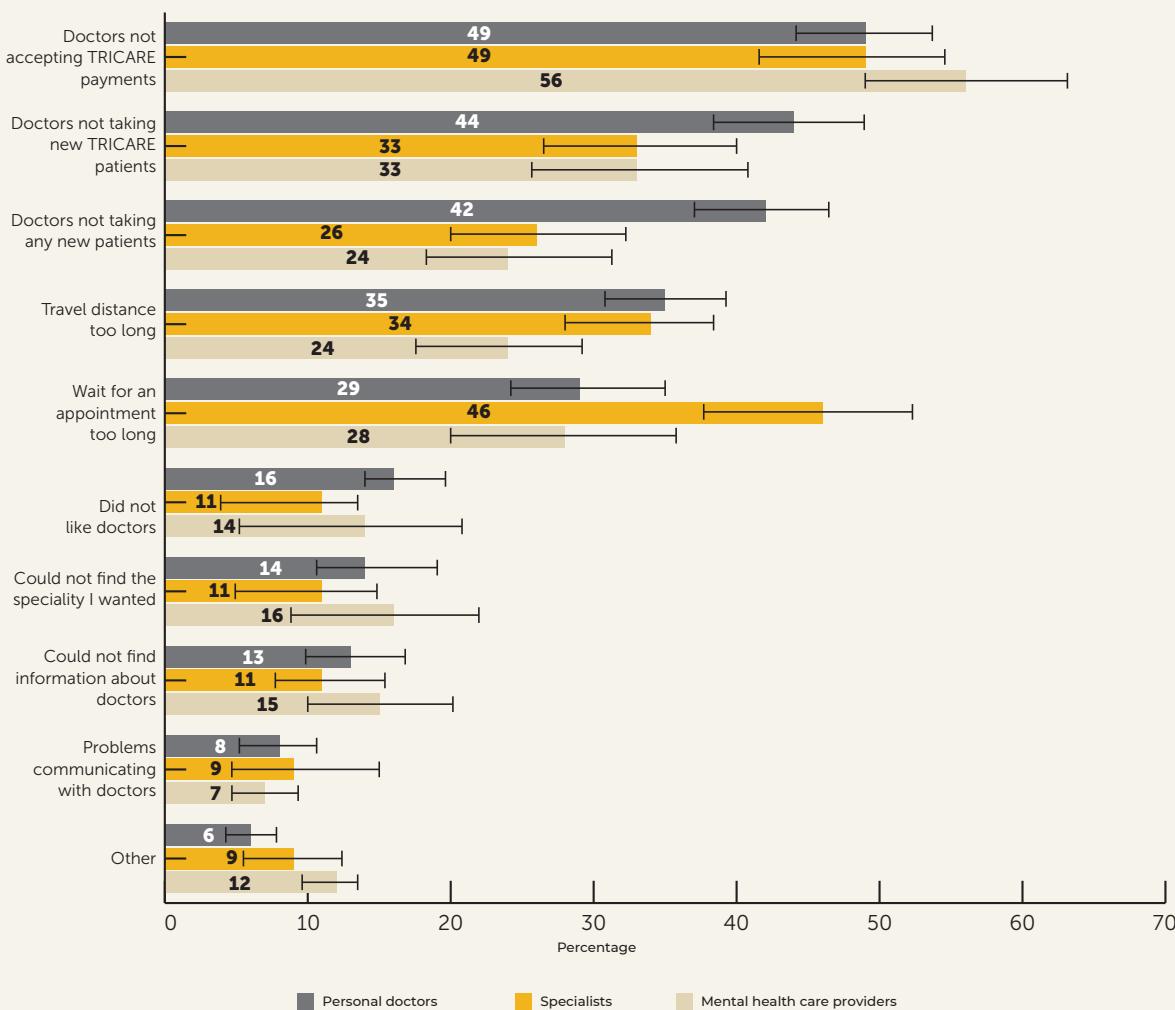
Results by specialty category appear in Appendix Tables A.1 through A.3. The problems in each table are ordered from the most to least common. Table A.1 shows that the most common problems were largely the same across specialty categories for personal doctors, except for beneficiaries who had problems finding a personal doctor in the "other" specialty category. These beneficiaries were more likely than others to cite not liking the doctor and not being able to find the specialty they wanted.

Table A.2 shows a similar pattern for specialists. Beneficiaries not being able to find the specialty

category they wanted was a common problem reported for surgeons and cardiologists. Nearly 40 percent of beneficiaries said they could not find information about their oncologist, whereas over half of beneficiaries who reported problems accessing an ophthalmologist cited an "other" problem.

For mental health care providers, psychotherapists not accepting TRICARE payments was a particularly common complaint (Table A.3). Beneficiaries also frequently mentioned not being able to find the specialty category they wanted for psychotherapists, social workers, mental health counselors, personal doctors or nurses, and "other."

**Figure 2. Beneficiaries reporting specific problems when accessing care, by provider type**



## E. Conclusions

Of the three provider types, TRICARE Select users were least likely to report a problem accessing care from specialists. The shares of beneficiaries who reported no problems accessing a personal doctor and mental health care provider were similar to each other, but there was more variation across the individual specialty categories for mental health care providers. Despite the differences in access, the shares who rated their personal doctors and specialists highly were similar and much larger than for mental health care providers. Among beneficiaries who had problems accessing care, they cited the same problems consistently across the three provider types. However, we saw some variation in the most common problems reported within provider types.

The findings in this issue brief shed new light on an important topic. However, more research is needed to better understand how access issues and beneficiary ratings vary across and within provider types. One limitation of the analysis is the small number of beneficiary respondents who see providers in certain specialty categories. This limitation was most evident for beneficiaries who saw a mental health care provider;

the results for these respondents showed substantial uncertainty around the point estimates. Future studies using larger samples could improve the precision of the estimates and provide a clearer picture of key takeaways.

Researchers could also analyze access issues based on responses from the TRICARE Select Survey of Providers, which could inform some of the findings in this brief. For example, it appears important to better understand what factors affect civilian providers' acceptance of TRICARE payments, given how often beneficiaries mentioned this problem across the board.

## References

GAO. "Defense Health Care: TRICARE Multiyear Surveys Indicate Problems with Access to Care for Non-Enrolled Beneficiaries." Report No. GAO-13-364. Washington, DC: GAO, April 2013. Available at <https://www.gao.gov/assets/660/653487.pdf>. Accessed November 29, 2020.

## Sources

2017-2020 TRICARE Select Survey of Beneficiaries. N=27,719. The response rate is 19.7 percent. The survey was fielded from November 2016 to March 2020.

**Table A.1. Problems reported when accessing care, personal doctors**

Problems	Personal doctor (n=1,707)	Family medicine general practitioner (n=1,263)	Internist (n=191)	Ob-gyn (n=24)	Nurse practitioner/ physician assistant (n=154)	Other (n=71)
Doctors not accepting TRICARE payments	49.1	49.3	55.8	71.8	37.4	39.7
Doctors not taking new TRICARE patients	44.3	47.0	47.8	46.2	24.5	23.6
Doctors not taking any new patients	41.7	44.8	40.1	47.6	23.4	20.4
Travel distance too long	34.6	37.6	24.4	20.4	22.5	37.3
Wait for an appointment too long	29.3	29.9	32.6	32.2	24.2	14.3
Did not like doctors	16.2	17.1	13.6	14.0	10.1	21.2
Could not find the specialty I wanted	13.8	11.8	19.3	10.3	19.1	31.0
Could not find information about doctors	13.1	12.7	17.4	12.9	14.3	6.4
Problems communicating with doctors	7.7	7.9	8.3	10.2	1.8	16.0
Other	6.1	6.6	2.3	0.0	4.4	13.9

Note: The numbers of beneficiaries that reported having a problem accessing care are shown below each specialty category. The numbers in the table correspond to the percentages of beneficiaries who reported each specific problem.

**Table A.2. Problems reported when accessing care, specialists**

Problems	Spec- ialist (n=820)	Surgeon (n=42)	Cardio- logist (n=53)	Aller- gist (n=25)	Dermat- ologist (n=114)	Rheumat- ologist (n=25)	Endocrin- ologist (n=53)	Urol- ogist (n=33)	Onc- ologist (n=12)	Ortho- pedist (n=99)	Ear, nose, throat (n=36)	Ob-gyn (n=80)	Ophthalm- ologist (n=17)	Other (n=231)
Doctors not accepting TRICARE payments	48.9	61.6	54.0	54.3	54.8	27.2	40.6	58.0	48.1	36.5	27.0	43.3	25.3	58.6
Wait for an appointment too long	46.0	68.3	38.8	34.2	34.4	70.9	47.2	34.6	43.9	46.8	57.6	43.2	28.0	49.1
Travel distance too long	33.7	12.7	17.8	43.8	25.5	30.2	67.2	57.8	51.4	27.8	23.6	33.9	24.6	36.4
Doctors not taking any new patients	32.7	49.3	42.3	44.3	41.1	26.7	20.3	36.6	42.8	43.3	36.4	28.5	19.4	24.2
Doctors not taking new TRICARE patients	26.1	40.5	18.2	9.5	20.4	30.4	29.6	30.8	35.8	17.5	27.8	29.0	14.9	29.1
Could not find information about doctors	11.5	7.9	1.7	5.9	5.3	6.1	9.4	0.8	38.6	18.6	10.2	13.2	11.0	14.7
Did not like doctors	10.7	12.3	3.0	0.0	9.2	32.1	10.5	13.7	9.0	4.0	12.8	7.7	0.0	15.8
Could not find the specialty I wanted	10.6	39.8	20.2	20.3	6.2	1.0	6.8	8.4	13.2	5.8	18.5	7.8	1.1	9.6
Problems communicating with doctors	9.5	2.4	4.4	17.9	6.9	24.9	8.8	0.0	10.4	22.3	17.0	2.8	0.0	10.2
Other	9.3	5.1	0.7	11.7	1.0	2.3	3.3	6.8	0.0	5.6	7.1	9.7	55.7	15.9

Note: The numbers of beneficiaries that reported having a problem accessing care are shown below each specialty category. The numbers in the table correspond to the percentages of beneficiaries who reported each specific problem.

**Table A.3. Problems reported when accessing care, mental health care providers**

Problems	Mental health care provider (n=656)	Psychologist (n=160)	Psychiatrist (n=91)	Psycho-therapist (n=25)	Social worker (n=51)	Mental health counselor (n=119)	Marriage/family therapist (n=126)	Personal doctor/nurse (n=37)	Other (n=33)
Doctors not accepting TRICARE payments	56.2	59.0	48.5	81.2	60.2	59.0	61.8	38.9	36.7
Doctors not taking new TRICARE patients	33.4	33.1	37.5	34.2	22.9	38.2	36.2	17.3	39.9
Wait for an appointment too long	27.5	23.6	42.1	28.4	26.0	29.1	25.4	23.0	10.7
Doctors not taking any new patients	24.3	20.0	34.9	24.5	13.9	24.0	28.5	10.3	34.1
Travel distance too long	23.6	21.9	26.2	17.0	20.3	38.0	15.9	28.0	8.6
Could not find the specialty I wanted	15.9	10.5	6.8	31.2	23.4	27.3	7.1	36.4	22.3
Could not find information about doctors	14.7	11.8	7.0	31.2	21.4	20.0	11.8	19.3	0.2
Did not like doctors	14.5	5.5	29.9	23.3	9.4	21.3	14.2	0.3	0.0
Other	12.0	13.3	7.7	4.3	11.8	13.4	9.9	10.3	18.9
Problems communicating with doctors	6.6	11.3	7.6	12.8	0.8	4.2	2.9	9.6	3.2

Note: The numbers of beneficiaries that reported having a problem accessing care are shown below each specialty category. The numbers in the table correspond to the percentages of beneficiaries who reported each specific problem.