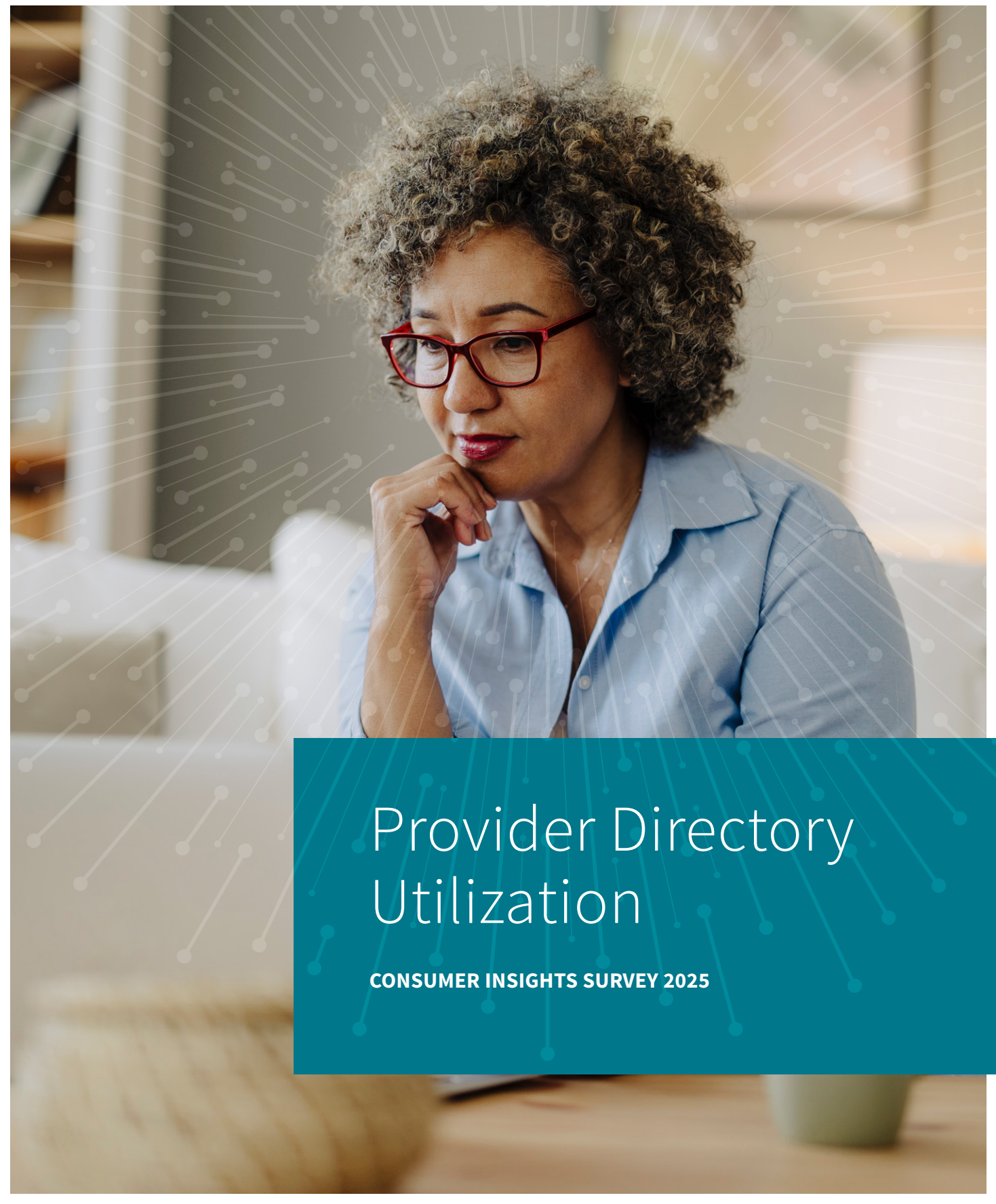




Provider Directory Utilization

CONSUMER INSIGHTS SURVEY 2025



Amid ongoing provider shortages, an aging population, and the growing burden of chronic disease, finding the right healthcare provider is more important than ever. Provider directories can play a vital role in connecting individuals to care, but their value depends on accuracy and reliability.

Introduction

A new survey from LexisNexis® Risk Solutions reveals that many Americans struggle with the accuracy and usability of healthcare provider directories. In fact, one in three adults who have used a directory report encountering outdated or incorrect information—highlighting how frequently provider data changes.

Provider directories—databases from hospitals, health systems, and health plans—help connect consumers with details on physicians, facilities and insurance coverage. Reliable information in these directories is essential to ensuring access to care.

And while a majority of all respondents report they have used a provider directory, gaps in awareness and utilization persist. The findings in this report highlight pain points that may hinder consumers' ability to find and access care.

Directory users

82%

of survey respondents report they have used a provider directory.

Directory non-users

10%

of non-users report they were unaware a directory was available.

Key Takeaways

Although the majority of respondents report using provider directories, a significant number has not. Data inaccuracy remains the primary obstacle to provider directory use, along with limited familiarity and usability challenges. Even so, respondents recognize the significant value of these tools in supporting critical healthcare decisions.



KEY TAKEAWAY NO. 1

Data accuracy and user difficulties create pain points, with one third (33%) of respondents reporting they have encountered outdated or incorrect information. Over one in five (21%) report finding the directory difficult to use.



KEY TAKEAWAY NO. 2

While most American adults (82%) have used a healthcare provider directory, a portion of the adult population remains unengaged, with nearly one in five Americans (18%) saying they have never used one.



KEY TAKEAWAY NO. 3

Consumers rely on healthcare provider directories for critical healthcare decisions, such as finding a specialist (49%) or confirming a provider is in network (46%). Nearly one third (30%) report network participation as the single most important factor when searching for a provider that meets their needs.



KEY TAKEAWAY NO. 4

Usage of digital healthcare directories lags behind traditional referral methods. More than half (52%) of respondents report they rely on doctor referrals and 46% report they rely on referrals from family and friends.

Data Accuracy and Ease of Use

One in three healthcare provider directory users surveyed encounter incorrect information. And just over one in five directory users finds it difficult to search for a doctor, specialist or healthcare provider on the platforms.

With 26% of providers experiencing information changes every 90 days,¹ keeping directories current is a constant challenge. Industry consolidation further complicates matters, as physician practices merge or are acquired. While penalties for inaccurate directories remain limited, regulators continue to push for greater accountability to protect consumers from a complex and confusing system.

Many users—especially those managing care for entire households—face outdated or incorrect provider information, exposing a widespread issue in digital healthcare navigation. This inconsistency erodes trust and creates barriers to timely, appropriate care. **To address this, healthcare organizations must take a more proactive and strategic approach to improving the reliability and accessibility of their provider directories.**

DATA INACCURACY AND USER DIFFICULTIES CREATE PAIN POINTS.



Incorrect information

33%

of healthcare provider directory users indicate they have encountered outdated or incorrect information.

Difficult to use

21%

of users found their last experience using a healthcare provider directory to search for a doctor, specialist or other healthcare provider to be somewhat difficult (17%) or very difficult (4%).



*26% of providers experience
information changes every 90 days.¹*



Awareness and Access

While healthcare provider directories are widely available, one in five consumers has never used one, often because they don't know they exist or how to access one.

These findings point to a clear opportunity: **healthcare organizations can increase directory use by raising awareness and educating consumers, as well as understanding access preferences.** An insight-driven approach can help organizations better understand utilization and develop strategies to improve access, ultimately enhancing consumers' ability to find the care they need.

MANY REPORT NOT USING OR BEING UNFAMILIAR WITH HEALTHCARE PROVIDER DIRECTORIES.

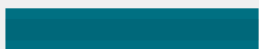
Never used a directory



18%

of respondents report they have never used a healthcare provider directory to find a doctor, specialist or other healthcare provider or healthcare facility.

Mobile device access



51%

of those who use healthcare provider directories say they access directories via mobile devices.

Healthcare Decision Making

Healthcare provider directory users say they use directories most often to find specialists and confirm their insurance coverage.

The data show that consumers not only value provider information, but also network coverage information such as copays and deductibles, within provider directories. These tools play a vital role in helping consumers through complex decisions related to both providers and health plans—especially when switching plans, seeking new care or navigating other periods of change. Healthcare organizations have a clear opportunity to strengthen patient and member engagement and improve provider selection by rethinking how they present and promote provider directories.

To meet evolving consumer expectations, **healthcare organizations should focus on making directories more intuitive, accurate and aligned with individual needs.** Provider directories that effectively balance user-friendliness with up-to-date information serve as valuable tools for provider and payer organizations to engage and retain patients and members. By enhancing usability, increasing awareness and ensuring directories reflect up-to-date network and credential information, organizations can empower consumers to make more informed, confident choices. This ultimately improves access, satisfaction and outcomes.



CONSUMERS RELY ON HEALTHCARE PROVIDER DIRECTORIES FOR CRITICAL HEALTHCARE DECISIONS.

Locate specialist

49%

of users report they use a healthcare provider directory to find specialist.

In-network providers

46%

of users report they use a healthcare provider directory to confirm providers are in network.

Network participation

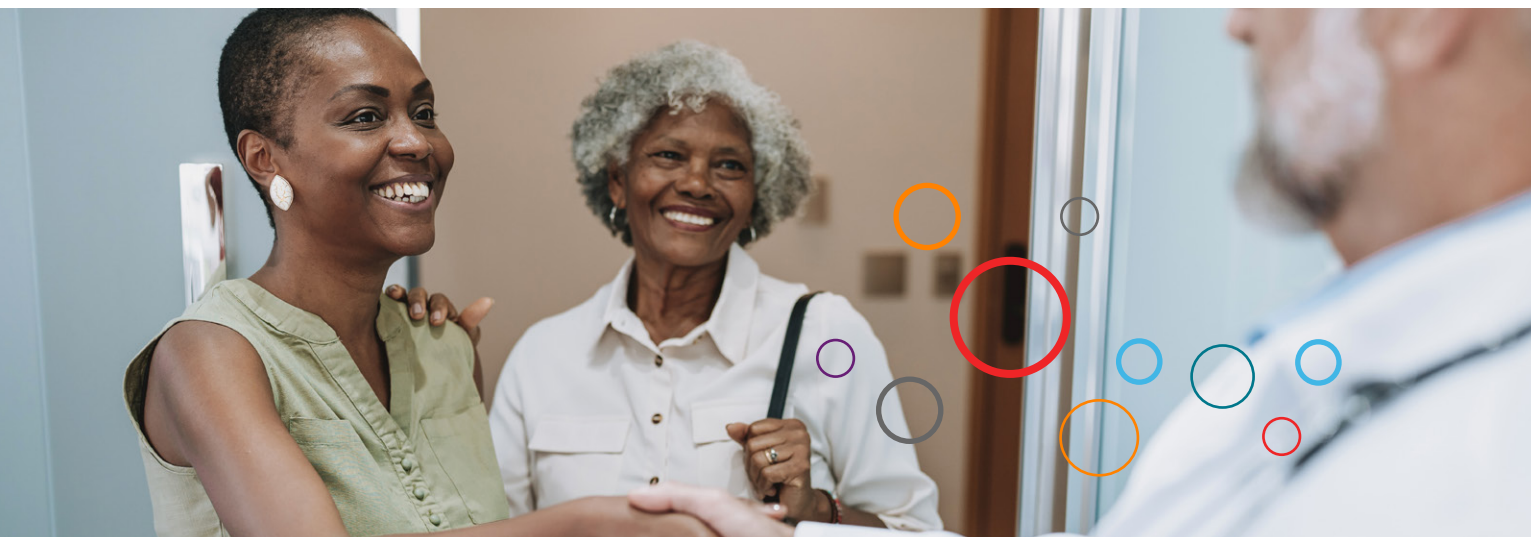
58%

of users report network coverage/participation as among the most important factors when looking for a provider, while 30% report it as the single most important factor.

Type of care

56%

of users report that ensuring the provider can deliver the specific type of care they need is one of the most important factors when looking for a provider.



Provider Directory Usage Patterns

Despite the widespread availability of digital tools, usage of healthcare provider directories offered by health plans and hospitals remains significantly lower than reliance on personal recommendations, highlighting a key gap in consumer behavior.

For generations, consumers have relied on referrals from trusted sources—like doctors, friends and family—when choosing healthcare providers. While reassuring, these recommendations often overlook key factors such as network participation, credentials and specialization. As a result, patients may miss out on more suitable, cost-effective options that better align with their health and financial needs.

Understanding consumer preferences, behaviors and how different groups search for care can help healthcare organizations improve directories and increase their adoption. By using these insights, organizations can address gaps in awareness and access and better meet consumer needs.



USAGE OF DIGITAL HEALTHCARE DIRECTORIES LAGS BEHIND TRADITIONAL REFERRAL METHODS.

Doctor referral

52%

report they seek a referral from their current doctor.

Friends/family referral

46%

Say they ask friends or family for recommendations.

Health system directory

31%

report using a hospital or health system directory when searching for a new doctor, specialist or other healthcare provider.

Health plan directory

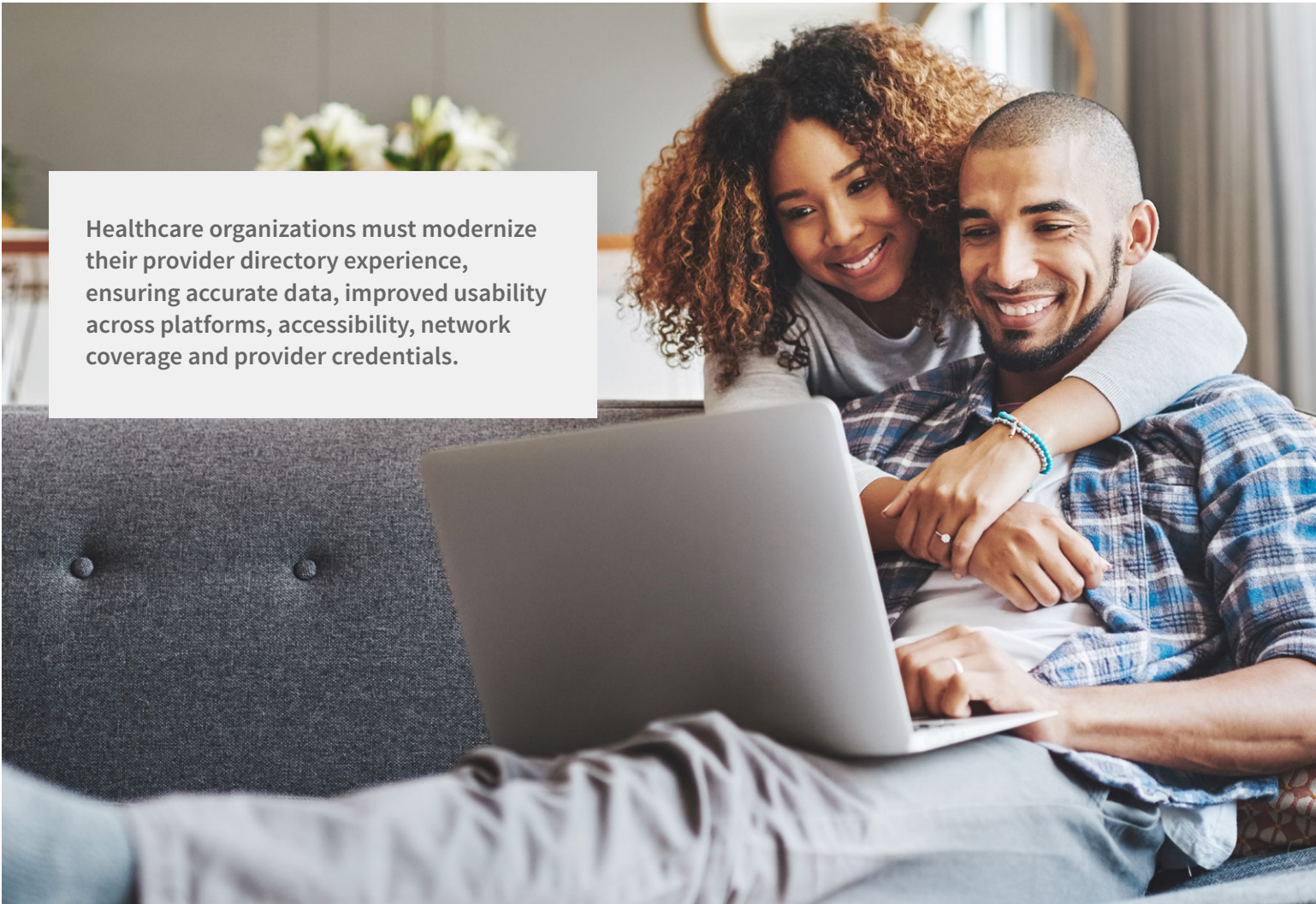
30%

report using a health plan directory when searching for a new provider.

Conclusion

A significant gap exists between the kind of resource provider directories are intended to be and what they actually deliver. Many users—especially those managing care for others—encounter outdated or inaccurate information. Frequent provider changes, industry consolidation and persistent “ghost networks” deepen this disconnect, undermining trust and limiting access to care.²

To address these challenges, healthcare organizations must modernize the provider directory experience. This includes ensuring accurate, regularly updated data; improving usability across platforms, especially mobile; and focusing on features consumers value most—accessibility, network coverage and provider credentials. These improvements can reduce friction, build trust and help consumers make more confident, informed healthcare decisions.

A photograph of a young couple with curly hair, smiling and looking at a laptop screen. The woman is leaning over the man's shoulder, and they are both looking at the screen with interest. The background is a softly blurred indoor setting with a plant and a mirror.

Healthcare organizations must modernize their provider directory experience, ensuring accurate data, improved usability across platforms, accessibility, network coverage and provider credentials.

Learn more about how to deliver a comprehensive, reliable and up-to-date view of providers while delivering a near-seamless consumer experience through provider data management at:

risk.lexisnexis.com/healthcare/provider-data-management

Methodology

These are findings of a LexisNexis Risk Solutions survey, with data collection provided by Ipsos, conducted between June 12 – June 18, 2025. For this survey, a nationally representative sample of 3,014 U.S. adults aged 18 and older were surveyed online in English. The results of this research have a credibility interval of plus or minus 2.0 percentage points for all respondents.

¹ LexisNexis Risk Solutions. (2024). The path to more accurate provider data: How a “golden record” enables insights at the point of decision-making [White paper]

² Blau, Max. Nov. 14, 2024. “State Regulators Know Health Insurance Directories Are Riddled With ‘Ghost Networks.’” ProPublica. Provided to ProPublica by ProPublica. Accessed July 31, 2025.

About LexisNexis Risk Solutions

LexisNexis® Risk Solutions harnesses the power of data and advanced analytics to provide insights that help businesses and governmental entities reduce risk and improve decisions to benefit people around the globe. We provide data and technology solutions for a wide range of industries including insurance, financial services, healthcare and government.

Headquartered in metro Atlanta, Georgia, we have offices throughout the world and are part of RELX (LSE: REL/NYSE: RELX), a global provider of information-based analytics and decision tools for professional and business customers. For more information, please visit <http://www.risk.lexisnexis.com> and www.relx.com.

LexisNexis and the Knowledge Burst logo are registered trademarks of RELX Inc. Other products and services may be trademarks or registered trademarks of their respective companies. © 2025 LexisNexis Risk Solutions. NXR17020-00-0825-EN-US

