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Hospitals Hide Pricing Data From Search Results

Webpages for hundreds of hospitals require users to click through to find prices, undermining federal transparency rule, Journal analysis shows

NYU Langone Health was among hospital systems that used blocking code preventing search engines from displaying pages with price lists.
PHOTO: BRENDAN MCDERMID/REUTERS

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Hospitals that have published their previously confidential prices to comply with a new federal rule have also blocked that information from web searches with special coding embedded on their websites, according to a Wall Street Journal examination.

The information must be disclosed under a federal rule aimed at making the $1 trillion sector more consumer friendly. But hundreds of hospitals embedded code in their websites that prevented Alphabet Inc.'s GOOG **-2.74%** ▼ Google and other search engines from displaying pages with the price lists, according to the Journal examination of more than 3,100 sites.

The code keeps pages from appearing in searches, such as those related to a hospital's name and prices, computer-science experts said. The prices are often accessible other ways, such as through links that can require clicking through multiple layers of pages.

"It's technically there, but good luck finding it," said Chirag Shah, an associate professor at the University of Washington who studies human interactions with computers. "It's one thing not to optimize your site for searchability, it's another thing to tag it so it can't be searched. It's a clear indication of intentionality."

De-Coded

Many hospital websites with mandated price disclosures reviewed by The Wall Street Journal contained lines of code that prevented the sites from showing up in searches. After the Journal contacted hospital operators, some removed the code snippet from their websites. An example:

Methodist Healthcare in San Antonio's website* on March 11 ——

Underlying website code ——
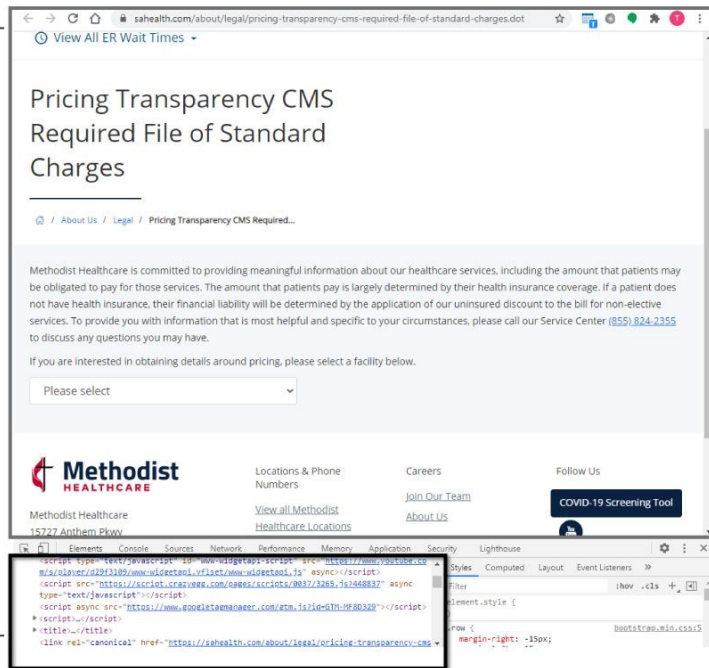

`<meta name="robots" content="noindex, follow">`
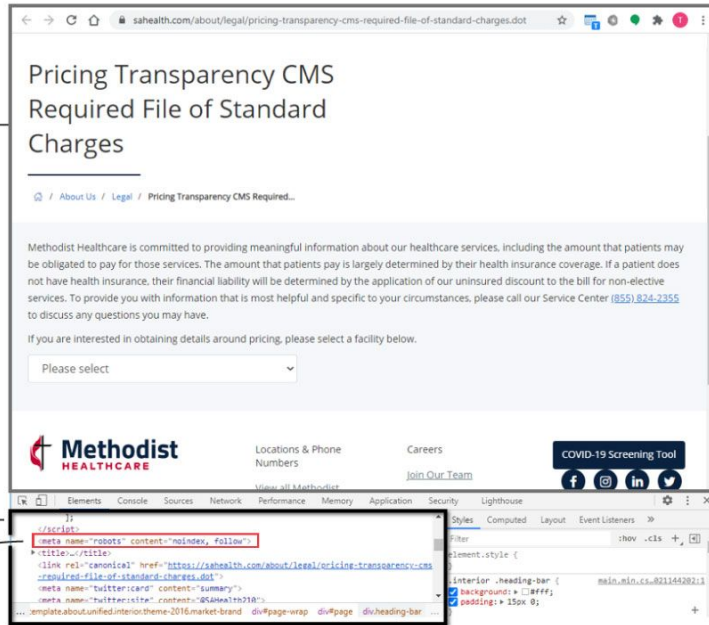
By adding a snippet of code to the head section of the HTML, the website operator ensured that the page wouldn't show up in search results.

The same site now ——

As of March 15, the code snippet was no longer there. A company spokesman said the search blocker was "a legacy code that we've removed." ——

*Methodist Healthcare System is jointly owned by Methodist Healthcare Ministries of South Texas Inc. and HCA Healthcare Inc. and operated by HCA.
Source: A Wall Street Journal examination of the website

Among websites where the Journal found the blocking code were those for some of the biggest U.S. healthcare systems and some of the largest hospitals in cities including New York and Philadelphia. They

include hospitals owned by HCA Healthcare Inc., HCA **-0.58%** ▼ Universal Health Services Inc., UHS **-0.03%** ▼ the University of Pennsylvania Health System and NYU Langone Health. Some regional systems also had such code on their websites, including Michigan's Beaumont Health and Novant Health in Winston-Salem, N.C.

Penn Medicine, NYU Langone and Novant Health said that they used blocking code to direct patients first to information they considered more useful than raw pricing data for which they also included links. Universal Health uses the blocking code to ensure consumers acknowledge a disclosure statement before viewing prices, said spokeswoman Jane Crawford.

"We are making NO efforts to hide any information," Ms. Crawford said in an email.

After the Journal approached hospitals about its findings, the search-blocking code was removed from sites including those of HCA, Penn Medicine and Beaumont, and of South Dakota-based Avera Health, Tennessee-based Ballad Health, Maine's Northern Light Health and Gundersen Health System in Wisconsin.

An HCA spokesman said the search blocker was "a legacy code that we've removed." Avera, Ballad, Beaumont and Northern Light said the code had been left on their websites by mistake. A Gundersen Health System spokesman said a website vendor had inserted the code. "It's not clear why," he said.

Computer-science experts said such code can be used during webpage development to prevent search engines from storing an incomplete copy as a backup, known as a cached copy. The code is typically removed when a page is completed, experts said. Some hospital owners said they had recently completed their pricing-data pages to comply with the rule.

Pennsylvania Hospital in Philadelphia, shown last March, was among hospitals found to be using code that hid pricing search results.
PHOTO: JESSICA KOURKOUNIS/REUTERS

Hospitals are supposed to disclose price information that they have long kept secret to comply with a federal rule that took effect Jan. 1 as part of a Trump administration push to increase transparency in

healthcare pricing. For the first time, the rule is revealing the prices that insurers negotiate for many hospital services.

These prices have been opaque even to employers and consumers who pay for coverage, and can vary widely depending on who pays.

Federal officials who developed the regulation said the data could help consumers to find better deals and help doctors and employers to select the hospitals where they steer patients for service.

The use of blocking code is one way hospitals have fallen short of the rule's requirements, experts on the new regulation said.

"They're taking an active step to make something harder to find," said Thomas Barker, a healthcare attorney at Foley Hoag and former official at the Department of Health and Human Services. "I would say it violates the spirit of the rule."

The rule requires hospitals to release prices for all services. Hospitals typically have a sticker price, which can be a starting point for discounted rates they negotiate with insurers. Hospitals also have cash prices for the uninsured. The new regulation requires disclosure of those rates, in addition to the insurers' prices.

The rule also says that the data file with all of the rates has to be displayed prominently on a public website, and that a hospital has to ensure the data "are easily accessible and without barriers."

Hospitals that violate the rule face a penalty of up to $300 a day.

"We expect hospitals to comply with these requirements and will enforce these rules to make sure Americans know the cost of their healthcare in advance," an HHS spokesman said.

Slow compliance with the rule is frustrating employers, researchers and startups that want to use the price information to make tools for consumers. Officials overseeing New Jersey's employee-health plan, which covers around 800,000 people, wanted to compare their rates with those for other health plans. They suspended the project because the data weren't good enough, said Christin Deacon, director of health benefits. Officials found "a disappointing patchwork of willful noncompliance and attempted compliance that is not in the spirit of the rule," she said.

To identify webpages hidden from search results, the Journal wrote a program that read the contents of 3,190 disclosure pages whose addresses were provided by Turquoise Health Co., a startup working with the price-transparency data. The program searched for a tag in the pages' background coding that instructs search engines not to index the page.

The Journal found 164 webpages hosting disclosure files for 307 hospitals that contained versions of that blocking syntax. Some pages include information for more than one hospital within a system. The code was removed from pages with data for 182 hospitals after the Journal contacted their owners.

Turquoise, which has searched for price disclosures on the websites of U.S. hospitals since Jan. 1, has found that many facilities are falling short of compliance with the new rule. Some 45% of the 2,267 short-term, children's and rural hospitals that Turquoise has rated so far scored a three or lower on the company's five-point rating of compliance. Many hospitals with low ratings disclosed only sticker prices for procedures, not actual rates negotiated with insurers.

NYU Langone is among hospital operators that posted only sticker prices. "We are continuing to work on meeting the new requirements," an NYU Langone spokeswoman said.

Houston Methodist hasn't posted negotiated rates. The eight-hospital system has posted sticker prices and average charges for certain inpatient services, but the pages containing those files include the blocking code. A spokeswoman said Houston Methodist believes listing the negotiated rates would be confusing and misleading. The available pricing data can be found through a web search, she said. An adjacent site does appear in searches.

Some hospitals list prices in spots on their websites that require many scrolls or clicks to reach. That can make the information hard to find, computer-science experts said.

"The more clicks or scrolls it takes to get something done is a pretty good predictor of how many people will succeed," said Ben Shneiderman, a professor emeritus of computer science at the University of Maryland.

UPMC, a 40-hospital system based in Pittsburgh, has placed the price lists on each hospital's website, which can require seven clicks to reach from UPMC.com. A user navigates through links with labels including "Locations," "Hospitals," "Patients & Visitors," and "Patient Information" to reach them. UPMC, which removed blocking code from price-data websites for two hospitals after the Journal reached out, didn't include the negotiated commercial rates for insurers in its data. The health system did offer other data points required under the rule, such as sticker prices and cash prices.

A UPMC spokesman said that navigation of its site is consistent with that of other health-system websites, and that it only takes around three clicks to get to the data from the webpages for individual hospitals. He said UPMC is watching how other hospitals and regulators respond to the rule's requirements. The blocking code was on the hospital sites in error, he said.

—*Rob Barry contributed to this article.*

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