

Supplemental Online Content

Creadore A, Desai S, Li SJ, et al. Insurance acceptance, appointment wait time, and dermatologist access across practice types in the US. *JAMA Dermatol*. Published online January 13, 2021. doi:10.1001/jamadermatol.2020.5173

eFigure 1. Caller script

eFigure 2. Boxplot of median wait time for first available appointment with any provider

eTable 1. Clinic locations by state

eTable 2. Referral success

This supplemental material has been provided by the authors to give readers additional information about their work.

eFigure 1. Caller Script

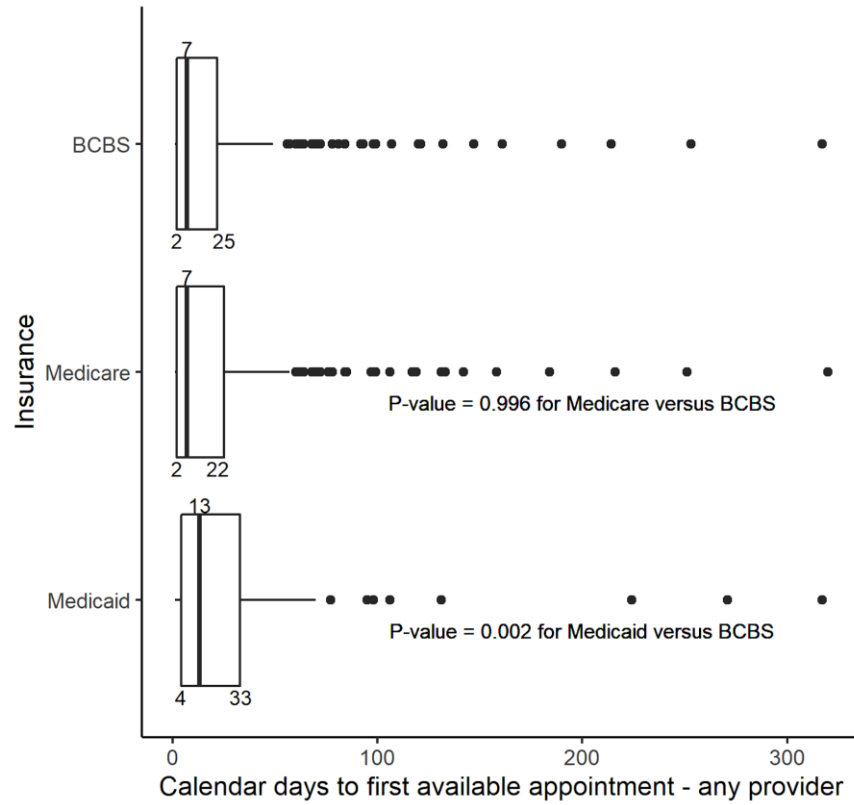
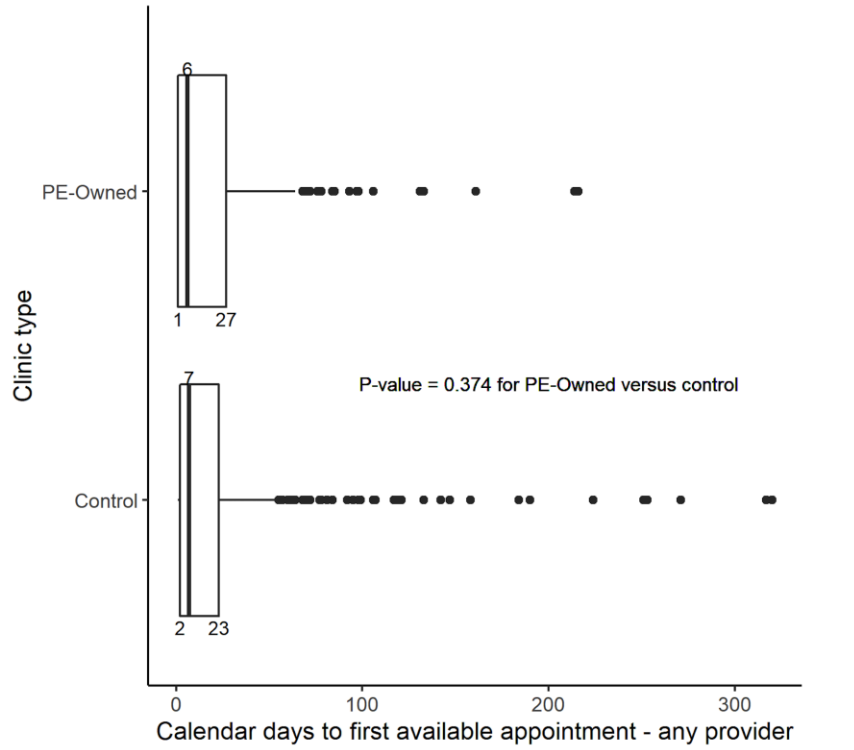
1. **Researcher:** “I’m calling to see if you would have any availability to see my mother for a new mole she has that’s growing. Are you seeing new patients for this problem?”
 - a. Yes: continue below b. No: end call
2. **Researcher:** “Do you see patients with (STATE ASSIGNED PAYMENT TYPE)”
 - a. *If they do accept, continue to question 3*
 - b. *If they say they do not accept the stated payment choice, continue to question 9*
3. **Researcher:** “What would be the first available appointment for her to be seen?”
 - a. If offered appointment, continue to question 5
4. If they ask for specific insurance information (group #, plan ID, etc.), record this, and say
 - a. **Researcher:** “I don’t have the card with me, but would you still be able to let me know when the first available appointment would be?”
5. **Researcher:** “Is this appointment with a physician dermatologist or with a nurse practitioner or physician assistant?”
 - a. If appointment is next-day and with a physician dermatologist, continue to question 8
 - b. If appointment is with a physician dermatologist, continue to question 7
 - c. If appointment is with an NP or PA, continue to question 6
6. **Researcher:** “If she wanted to be seen by a physician dermatologist instead, what would be the first date to be seen?”
 - a. Record if MD/DO appointments available, date if provided, and continue to question 8
7. **Researcher:** “Are there any appointments available sooner with a nurse practitioner or physician assistant?”
 - a. Record if NP/PA appointments are available, date if provided, and continue to question 8
8. **Researcher:** “I will need to check her schedule before I confirm an appointment but I will call back when I can commit to an appointment. Can you confirm for me that I haven’t scheduled an appointment?”
 - a. End phone call
9. **Researcher:** “Do you know of a clinic nearby that does accept (STATE PAYMENT TYPE)?”
 - a. Record contact information you are provided for referred clinic

eFigure 1. The script and call flow that researchers followed when contacting clinics.

Researchers were instructed to provide a name, address, and telephone number if requested. If any additional information was requested in order to inquire about appointment dates, we recorded this, stated we did not currently have that information available, and asked if the first

available appointment date could still be given. If no dates could be provided without specific insurance details (i.e. group number, plan ID, etc), or the clinic only accepted specific Medicaid vendors, we considered this a legitimate request and recorded the insurance type as accepted for that particular clinic. Other requests, like requiring a referral or lab results, were considered an unnecessary barrier to making an appointment, and we recorded the insurance type as not accepted for that particular clinic. For ten calls (0.6%, 3 BCBS, 7 Medicare, 0 Medicaid), the researcher calling mistakenly accepted a same-day appointment, and this call data was excluded from the analysis. Sixteen calls (0.9%, 6 BCBS, 8 Medicare, 2 Medicaid) were marked as completed in our call log tracker but had their associated data on appointment availability missing from our database, and were thus excluded from analysis.

eFigure 2. Boxplot of median wait time for first available appointment with any provider



eTable 1. Clinic locations by state

State	PE-Owned Clinics (N)	Control Clinics (N)
AZ	7	14
CA	16	31
CO	5	12
FL	43	86
GA	1	2
IA	2	4
ID	1	2
IL	6	12
IN	2	6
MA	17	33
MD	12	23
MI	13	23
MN	1	2
NC	9	19
NH	2	5
NJ	12	23
NM	2	2
NV	6	12
NY	6	13
OH	7	14
OK	2	4
OR	3	6
PA	2	4
SC	1	2
TX	20	40
VA	3	5
WI	3	6
WV	0	1

eTable 2. Referral Success

	Offered Referral When Asked		
	BCBS	Medicare	Medicaid
All Clinics (N)	2/10 (20.0%)	0/16 (0%)	60/488 (12.3%)
Private Equity-Owned Clinics (N)	0/1 (0.0%)	0/1 (0%)	19/158 (12.0%)
Control Clinics (N)	2/9 (22.2%)	0/15 (0%)	41/330 (12.4%)
	Referred Clinics Actually Accepting the Insurance		
	BCBS	Medicare	Medicaid
All Clinics (N)	1/2 (50.0%)	N/A	35/60 (58.3%)
Private Equity-Owned Clinics (N)	N/A	N/A	12/19 (63.2%)
Control Clinics (N)	1/2 (50.0%)	N/A	23/41 (56.1%)
	Corrected Accurate Referrals		
	BCBS	Medicare	Medicaid
All Clinics (N)	1/10 (10.0%)	N/A	35/488 (7.2%)
Private Equity-Owned Clinics (N)	N/A	N/A	12/158 (7.6%)
Control Clinics (N)	1/9 (11.1%)	N/A	23/330 (7.0%)