

Abstract

OBJECTIVE: To evaluate the mean appointment wait time for a new patient visit to female pelvic medicine and reconstructive surgery, gynecologic oncology, maternal-fetal medicine, and reproductive endocrinology and infertility when presenting with public versus private insurance.

HYPOTHESIS: We hypothesize that the mean wait time for a new appointment for those presenting with public insurance exceeds the mean wait time for a new appointment for those presenting with private insurance.

METHODS: Each subspecialty medical society has a patient-facing physician directory tool to generate a list of physicians across the United States. Eight hundred unique physician offices were randomly selected from the directories -- 200 per subspecialty. Each of the 800 individual physician offices was called twice. The caller presented with Medicaid or, in a separate call, with Blue Cross/Blue Shield. The order in which the calls were placed was randomized. The caller asked for the soonest appointment available for respective medical conditions based on subspecialty: stress urinary incontinence, new-onset pelvic mass, preconception counseling for twin-twin transfusion syndrome, and primary infertility. Data for each office were collected, including the date of the soonest appointment and physician demographics.

RESULTS: From eight hundred physicians initially contacted, 477 responded to at least one call in 48 states plus the District of Columbia. The mean appointment wait time was 20.3 (SD=18.6) business days for an appointment. A significant difference was found in waiting times by type of insurance with 44% longer waiting time for Medicaid (ratio = 1.44, 95%CI = 1.34 to 1.54, $z = 10.51$, $p < 0.001$). When the interaction between insurance type and subspecialty was added to the model, it was found to be highly significant ($p < 0.01$), with Medicaid patients in Female Pelvic

Medicine and Reconstructive Surgery having the longest wait time increase relative to private insurance and Maternal-Fetal Medicine having the least, with Medicaid times always longer than private insurance times.

CONCLUSION: Typically, a woman can expect to wait almost three weeks for a new patient appointment with a board-certified obstetrics and gynecology subspecialist. There was a significant difference in wait time for patients with Medicaid public insurance versus private insurance.

