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Coding to Hide Health Prices from Web Searches Is Barred by Regulators

The guidance regarding insurers' required posting of healthcare prices came after The Wall Street Journal revealed hospitals used such coding on their price pages



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Federal regulators said healthcare pricing data that health insurers must post under a new requirement shouldn't be blocked from web searches, issuing new guidance after The Wall Street Journal reported that hospitals used special coding that shielded such information from Google and other search engines.

Under new federal requirements, both hospitals and insurers must reveal long-confidential pricing data, including the rates that insurers pay for services. Hospitals were supposed to post data at the start of this year, while insurers must comply beginning in 2022. The hospital industry had fought the requirement in court but lost.

Separately, leaders of the House Energy and Commerce Committee, including both Chairman Frank Pallone Jr. (D., N.J.) and ranking Republican Cathy McMorris Rodgers of

Washington, sent a letter Tuesday to the federal Department of Health and Human Services calling for tough enforcement of the pricing-transparency requirements. The letter cited evidence of hospitals' lack of compliance, including the Journal's report on the search-blocking code.

The new guideline, from the Centers for Medicare and Medicaid Services, was released March 23, the day after the Journal's article revealed that hundreds of hospital pricing-data websites included special coding that kept them from showing up in searches on Google, which is owned by Alphabet Inc.

The new CMS guidance was issued in an online technical forum on GitHub, a website and cloud-based service, that focuses on the insurer-pricing rule. The rule that applies to hospitals isn't covered in that forum.

A CMS spokesman said in a statement that the rule change "helps clarify the intent of this regulation—make the files public and accessible." The agency "intends to provide more guidance on this in the future," he said. The statement didn't directly address whether CMS will issue similar guidance for hospitals, but it said the hospital regulation requires the data to be "easily accessible and void of barriers" and that digital files "be digitally searchable." Previously, HHS has said it expects hospitals to comply with the pricing-transparency requirements and will enforce them.

In the GitHub posting about insurers' data, CMS said, "to allow for search engine discoverability," the page where the data files are hosted can't have "rules such that give instructions to web crawlers to not index the page."

The guidance flagged the same type of code that the Journal found embedded on hundreds of hospital websites. 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 included hospitals owned by HCA Healthcare Inc., Universal Health Services Inc., the University of Pennsylvania Health System and NYU Langone Health.





After the Journal contacted them, many hospital owners, including HCA and Penn Medicine, removed the blocking code from their pricing-data sites. An HCA spokesman said the search blocker was “a legacy code that we’ve removed.”

Penn Medicine and NYU Langone 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 said it used the blocking code to ensure consumers acknowledge a disclosure statement before viewing prices.

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 soon after the Journal contacted their owners.

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