

Prior authorization impacts care, workforce productivity

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(HealthDay)—More than one-third of physicians report that prior

authorization has led to a serious adverse event for a patient in their care, according to a survey released by the American Medical Association (AMA).

The web-based survey was conducted in December 2021 and included a sample of 1,004 practicing physicians (40% [primary care](#)), all of whom complete prior authorizations during a typical work week.

The survey found that 34% of physicians reported that prior authorization led to a serious adverse event, such as hospitalization (24%) and disability or death (8%), for a patient in their care. Care delays were reported by the vast majority of responding physicians (93%) while waiting for health insurers to authorize necessary care. More than four in five physicians (82%) said patients abandoned treatment due to authorization struggles with health insurers.

Roughly half of physicians reported that prior authorization had interfered with a patient's job responsibilities. The AMA urges employers to ask [health insurance](#) plans about the impact of prior authorizations and to solicit feedback from employees.

"Health insurance companies entice employers with claims that [prior authorization](#) requirements keep [health care costs](#) in check, but often these promises obscure the full consequences on an employer's bottom line or employees' well-being," Gerald Harmon, M.D., president of the AMA, said in a statement. "Benefit plans with excessive authorization controls create serious problems for employers when delayed, denied, or abandoned care harms the health of employees and results in missed work days, lost productivity, and other costs."

More information: [AMA prior authorization physician survey](#)

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