At the end of 2016, in anticipation of healthcare discussions, the Alliance of Specialty Medicine began work on a survey of 1,000 of its provider members to quantify some of the issues that specialty physicians are facing in insurance markets. Highlights are below.

**Have you delayed or avoided prescribing a treatment due to the prior authorization process associated with it?**

> “I have patients that have been hospitalized and almost died due to the delays imposed by prior authorizations and inexperienced unknowable “physicians” […] making decisions on complex rheumatologic treatments being given to seriously ill rheumatology patients - this is shameful, if not criminal.”

**Have increased administrative burdens by insurers influenced your ability to practice medicine?**

> “Patient with spinal tumor and cord compression was denied [for surgery], because we did not try Physical Therapy.”

> “Never have I spent more time on administrative issues that do nothing but delay appropriate diagnostic and therapeutic intervention.”

> “I practice neurosurgery at a Level 1 Trauma and Comprehensive Stroke Center. It is common for some insurers to refuse to pay for emergency care without prior authorization, even when it was a matter of life or death (accident, gunshot wound, hemorrhagic stroke, hydrocephalus, etc.).”
In the past five years, have you experienced an occasion during which a stable patient was asked to switch from his/her medication by the insurer even though there was no medical reason to do so?

- **Yes**
- **No**
- **Not sure**
- **Question does not apply**

“*This happens ALL THE TIME. It is not "asking" to switch, it is "forcing" when they charge patients exorbitant costs to continue their medication.*”

“How likely are you to end your participation with any insurers due to the issues discussed in this survey?”

- **Already have ended...**
- **Highly likely to do so in...**
- **Somewhat likely**
- **Not very likely**
- **Will not end participation**
- **Not sure at this time**

“This feels like insurers are practicing medicine without a license.”

“I take all insurances basically to improve access of care [in] my area even at personal losses. I am not sure how much longer we can do this.”

“I miss actually taking care of patients.”

“I treat patients not insurers. Ending participation just restricts patients.”