# PUTTING PROFITS BEFORE PATIENTS:

FINDINGS FROM A 2018 SURVEY OF PHYSICIANS REGARDING
THEIR EXPERIENCES WITH HEALTH INSURERS

# THE TOLL FOR PHYSICIANS

## **HEALTH INSURERS OVERRIDE DOCTORS' DECISIONS**

92%

Consider health insurer personnel unqualified to make medical decisions for patients

89%

Say they no longer have adequate influence in health decisions for their patients

87%

Report health insurers interfere with their ability to prescribe individualized treatments

79%

Worry health insurers have a negative effect on patient care

41%

Recommend that patients order drugs online from countries with lower safety standards to get the prescribed medications

## PATIENT CONFIDENCE IS DECLINING

YES OR NO: Because of insurance company decisions that take away my discretion, patients are losing confidence in the care I provide

47% Agree Strongly or Somewhat Agree

**47**%

31% Disagree Somewhat

17% Disagree Strongly

5% Don't Know

# ALMOST HALF OF PRIMARY CARE DOCTORS (48%) ARE CONSIDERING LEAVING MEDICINE, AND 67% RECOMMEND AGAINST A CAREER IN MEDICINE.

## **HEAVY FINANCIAL & EMOTIONAL BURDEN**



**90%** have diminished time for patients due to administrative requirements



**85**% feel frustrated when they encounter health insurance-related issues



77% have hired more administrative staff to handle paperwork



**65**% believe they face greater legal risks due to health insurers' decisions



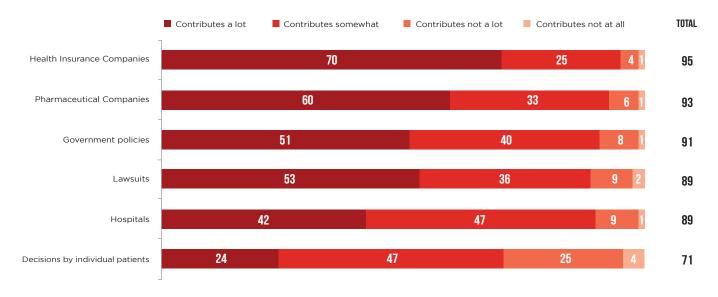
**37%** say half or more of daily stress is due to insurance problems



## THE TOLL FOR PATIENTS

## DOCTORS SAY HEALTH INSURERS ARE MOST RESPONSIBLE FOR RISING HEALTH CARE COSTS

How much do the following industries contribute to rising health care costs?



## **ACCESS BARRIERS OF TOP CONCERN**

**91%** say insurers engage in **nonmedical switching**, which forces stable patients to take less costly and potentially less effective medicine

**91%** state that **prior authorization**, a time-consuming process to get insurers' approval for a treatment, delays needed care

**90%** criticize **step therapy** policies, which force patients to try and fail on cheaper, sometimes less effective treatments before plans will cover what doctors prescribe

**89**% say insurers use predetermined **formulas for decision-making** rather than allowing for patient-centered care

DUE TO INSURERS' ACCESS
BARRIERS, SUCH AS PRIOR
AUTHORIZATION,
87% OF DOCTORS
SAY PATIENTS' CONDITIONS
HAVE WORSENED, AND
83% FEAR THEIR PATIENTS
MAY EXPERIENCE
PROLONGED PAIN.

Conducted for Aimed Alliance by David Binder Research, the survey involved online interviews with 600 physicians practicing family medicine, internal medicine, pediatrics, and obstetrics/gynecology in the U.S. between February 25 and March 2, 2018. The margin of sampling error is ±4.0 percent at the 95 percent confidence level. To view the survey, please visit www.AimedAlliance.org/providerperceptionssurvey.