



October 2, 2026

Senator Ron Wyden
Ranking Member
United States Senate Finance Committee
219 Dirksen Senate Office Building
Washington, DC 20510-6200

Dear Ranking Member Senator Ron Wyden and the Senate Finance Committee,

Thank you for your efforts to ensure that patients do not face unnecessary hurdles or delays in accessing healthcare. We appreciate the report “Health Coverage that Works for Everyone” that addresses utilization management and its impact on healthcare.

Like other professional medical associations, the American Medical Women’s Association (AMWA) is concerned about the impact of utilization management on physicians’ ability to direct the best care for their patients and patients’ ability to access care. These issues align with our mission to advance women physicians and to improve the health of women.

We agree with the many points cited in the report, that utilization management and especially prior authorization can cause delays that can lead to treatment abandonment, worsening disease, hospitalization, and other adverse outcomes. And that it also creates substantial physician and staff administrative burden that can contribute to burnout

We support potential reforms that have been proposed, including gold carding; exemptions for certain chronic conditions, preventive services, time-sensitive treatments, and medications; requiring appropriately qualified clinicians to conduct peer-to-peer reviews; using independent third-party review rather than relying solely on insurer review; establishing a uniform electronic PA processes and standardized requirements; setting firm deadlines for insurer decisions; and considering automatic approval when insurers fail to respond on time.

To reiterate one of the studies referenced in your report:

[American Medical Association Survey:](#)

- 94% of physicians report that prior authorization delays necessary care
- 92% of physicians report that prior authorization negatively affects patients' health
- Four out of five physicians have reported that patients abandon treatments because of prior authorization issues
- One in three physicians have witnessed prior authorization contribute to a serious adverse event, including hospitalization, permanent impairment, or death
- Physicians and their staff spend an average of 13 hours each week managing prior authorization requirements

American Medical Women’s Association

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We offer survey data from [one of our studies](#) in 2025:

- 94% of practitioners experience frustration navigating utilization management
- 80% of practitioners are not consistently aware of requirements when prescribing new medications
- 70% of practitioners are not clearly told why prescriptions are denied

Studies have also shown that the extra administrative workload of utilization management is contributing to the growing problem of [physician burnout](#).

Most concerning is the fact that these barriers can [impact clinical decision-making](#) by influencing clinicians to prescribe differently than they otherwise would. In one study, more than 80% of respondents reported that they had decided against prescribing certain treatments in anticipation of [drug utilization management requirements](#).

Utilization management affects patients across the healthcare system, but its burden may be particularly consequential for women. Women are disproportionately affected by several chronic and autoimmune diseases requiring ongoing treatment and specialty medications. Women also live, on average, longer than men. Over a lifetime, prior authorization, step therapy, and other utilization management requirements can create repeated barriers to timely care—potentially compounding existing challenges women face in accessing appropriate treatment.

We hope that Congress can help by implementing policies that improve the prior authorization process, ensure timely decisions and appeals, and reduce repetitive paperwork for treatments that may be routinely approved.

Respectfully submitted,



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