

Thank you everyone on this email list for taking the time to look into the important issue of prior authorizations. **Out of all the issues that impact the care of my patients, this particular issue is the greatest obstacle I face on a daily basis.** As a pediatric dermatologist, many of the medications I prescribe are technically off-label as the original clinical trials did not include pediatric patients. Despite this, these topical and oral medications are still the standard of care within our field and are important for our young patients to receive to both treat and prevent serious health issues. **I truly have hundreds of examples of insurance delays and denials of important treatments for these pediatric patients but I think it may be helpful to present a single patient to highlight the degree of harm prior auths can impose.**

I am caring for an 8 year old child who has a condition called lichen sclerosis. This is an autoimmune issue where intense itching, discoloration, and eventual scarring can occur. The most common area of involvement is in the groin region. With appropriate treatment, permanent scarring and mutilation can be prevented. Topical steroids are important to control the disease initially and these are often covered by insurance. However, once the disease is controlled, pediatric dermatologists recommend switching to a non-steroid treatment since topical steroids can thin the skin in these already sensitive locations. The non-steroid of choice is called tacrolimus ointment which is more expensive than topical steroids. For this reason, most insurances require a prior authorization. Every year, these prior authorizations become more cumbersome, denials more frequent, and appeals more difficult to achieve. Tacrolimus ointment was denied on two recent appeals for my recent patient. Today, I spent over an hour being passed along her Aetna insurance merry-go-round being sent from one unhelpful department to another. I made no progress with the last care representative I spoke with hanging up on me as I asked why I couldn't have a peer to peer to speak with an actual medical provider. If I was able to speak with a medical provider, they are sometimes able to overturn these otherwise automatic denials but these peer to peers are usually not dermatologists and not familiar with the conditions I see or treatments I use. I am left with the option of continuing to fight a soul-crushing battle against her insurance company by myself or give my patients suboptimal treatment. This situation needs to change. Please push back with all your might against prior authorizations and the significant insurance overreach that has occurred in recent years. Providers will burn out and patients will suffer until this situation is resolved.

Thank you sincerely,
Keith Morley, MD
Director of Pediatric Dermatology

***Please note *Dr. Morley is the lone pediatric dermatologist in Vermont.* His burn out from prior authorizations is real and could result in him leaving us, jeopardizing the health of thousands of our state's children.**

Respectfully,
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