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WHN Panel Discusses Challenges and Future of Prior Authorization

Emplify's Finley calls for reform to ease burden on providers and patients

On May 13, Wisconsin Health News (WHN) hosted a panel discussion on the challenges and future of prior authorization in health care. The panel included:

- Rep. Clint Moses, Chair of the Committee on Health, Aging and Long-Term Care;
- Michael Finley, Vice President of Revenue Cycle at Emplify Health;
- Dr. Mark Huth, CEO of Group Health Cooperative of South Central Wisconsin;
- Dr. Julie Mitchell, Senior Clinical Officer at Anthem Blue Cross and Blue Shield; and
- Dr. Mike White of the Wisconsin Medical Society.



L to R: Moderator Tim Stumm, Editor, Wisconsin Health News; Dr. Julie Mitchell; Dr. Mike White; Michael Finley; Dr. Mark Huth; Rep. Clint Moses.

Finley offered a strong provider perspective, emphasizing the operational complexity of prior authorization and its negative impact on care teams and patients. He called for a more streamlined, standardized approach, pointing out that inconsistent requirements across insurers create inefficiencies and unnecessary barriers.

"We see prior authorization being applied much more broadly, creating unnecessary burdens and waste on the health care system," Finley said.

He also stressed the downstream effects on patients. "Sometimes there's a very black-and-white approach from the insurance company... but it puts the patient in the middle," Finley said. "The health system does not play a role in the marketing of the insurance company or health plan, but we're often left to be the communicator, sharing bad news that something's not approved and what that additional out-of-pocket cost will be."

One of Finley's key recommendations was using claims analysis and quality outcomes to shape the prior authorization process. "Using claims analysis and quality outcomes to impact the authorization process would allow us to show our outcomes and reduce unnecessary prior authorization."

In terms of potential reforms, Finley advocated for standardizing the prior authorization process to make it more efficient and accurate. He mentioned the need for a consistent approach across different insurance companies to reduce the administrative burden on health care providers. "Standardizing the process can become more efficient and become more accurate and again have a positive impact on the cost of care."

Other panelists echoed Finley's call for reform. Dr. Huth noted the need to improve usability. "We need to continue the work to make it easier for providers to submit and make sure that the turnaround time is reasonable and does not delay care."

Rep. Moses expressed support for moving forward with reforms and encouraged engagement on the issue. "Reach out to either myself, anyone on the Health Committee, or your Assembly reps or senators," he said. "This is a national trend. As a provider and someone who deeply cares about patients in this state, I believe something needs to be done."

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EDUCATION EVENTS

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Critical Access Hospital (CAH) Conditions of Participation Series

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How to Implement a Near Miss Program

May. 22, 2025

Critical Access Hospital (CAH) Conditions of Participation Series