Prior authorization delaying healthcare longer than Texans can — or should — wait

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Ezequiel Silva June 18, 2026



If Congress wants to strengthen rural healthcare, it should start by linking Medicare reimbursement to inflation, instead of imposing cut after cut, our guest columnist writes.
Marcus Yam/TNS

Are you searching high and low for a doctor? You're not alone.

Now more than ever, Texans are finding it harder to get care, with some having to wait months for an opening and many being told their local doctor's office can't take new patients.

On average, patients wait 31 days for an appointment. This could grow, as Texas Health and Human Services estimates a shortage of 10,000 physicians across the Lone Star State. To make matters worse, insurance company barriers further disrupt patients' access to necessary treatment.

Few of us, it seems, are exempt from this challenge.

I'm a doctor, and I've struggled to get care for my family. Even after multiple calls to colleagues searching for an opening, it was difficult to find a physician who could accept new Medicare patients like my parents.

When my wife had breast cancer, her insurance company initially denied the MRI she needed to plan her surgery. We appealed, and it was eventually approved, but the delay she faced was frustrating and unnecessary.

When I think about the Texans who don't have the time, know-how or resources to navigate this broken system, I worry about the care they may forgo or delay.

It is a failure of our healthcare system when patients aren't able to get the care they need.

Today, prior authorization by big health insurance companies is out of control.

About 80% of physicians say prior authorization leads patients to abandon treatment, according to recent data from the American Medical Association. Consequently, 1 in 4 doctors report having patients who suffered serious harm due to the process.

Insurance company barriers have downstream effects, too. Prior authorization forces doctors to spend more time on paperwork and less time on direct care, hiring new staff just to appeal for our patients. Simply put, prior authorization raises costs for everyone.

That's only part of the problem.

At the same time, physician practices lack the financial stability to expand services, invest in new technology, offer new treatments and, yes, accept new patients due to rising costs. Add the years of Medicare cuts Washington policymakers have imposed, and it's little wonder that many small towns and rural communities continue struggling to recruit and retain physicians.

So, what can be done to improve Texans' access to care?

First, Congress must pass the Improving Seniors' Timely Access to Care Act, which would streamline the prior authorization process and put important guardrails in place.

Second, Medicare policy must provide stability and predictability for physician practices.

As Congress works to strengthen rural healthcare, there must be solutions that support independent physician practices, which are small businesses and pillars of their communities. This should start by linking Medicare reimbursement to inflation, instead of imposing cut after cut.

The decisions that affect patient care are often made far from the exam room. They are made in boardrooms, state capitols and the halls of Congress.

Often, I’m the only doctor in the room during policy discussions.

Only by addressing the factors that limit access to care and fuel the physician shortage can our leaders make Texas an even healthier place to live and work.

With thoughtful changes from Congress, I believe we can cut through unnecessary red tape, strengthen the physician workforce and ultimately improve care.

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