

Healthcare providers express frustration with payers over denied treatments [survey]

Providers chafe when insurance companies second guess their medical decisions; 74% indicate it happens frequently; 45% say it takes too much time; 44% have considered quitting over the demands these engagements add to their jobs

by Intelliworx

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Introduction

When healthcare insurers deny treatments, it can derail a healthcare provider's day. Suddenly, they are thrust into a forum where they have to justify their medical decisions. Many providers say this happens too frequently and takes up too much time.

That's according to a new survey of 211 U.S.-based healthcare providers published by Intelliworx. Respondents were solicited through an independent survey panel between January 30, 2025, and February 4, 2025.

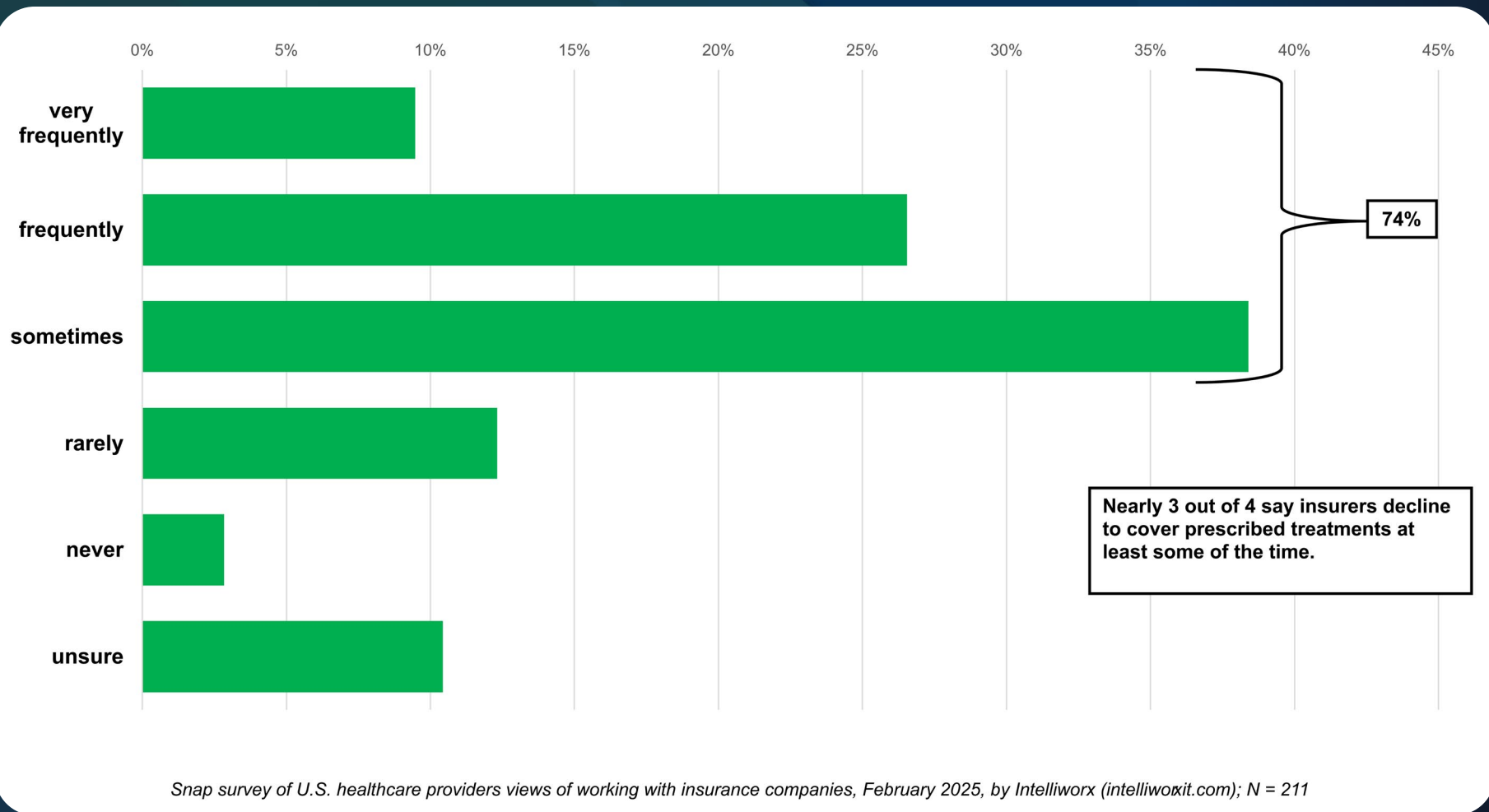
The survey may well serve as a call to action for healthcare employers as well.

While many providers say their employers are supportive, there is a substantial percentage who say employers could do more to help them manage this challenge. What's more, the frustration has grown to the extent that nearly 4 in 10 providers have considered quitting.

Given the persistent and prolonged [shortage of healthcare talent](#), this could be an opportunity for savvy employers to stand out among rivals. Those who are willing and able to find creative solutions to ease the strain providers face in complying with payer demands could be a boost to provider [recruiting](#) and [retention](#).

Q1. 74% of healthcare providers say insurers deny covering treatments at least some of the time

Q1: How often do healthcare insurers (or other healthcare payers) decline to cover the treatment you prescribed for a patient on your first attempt?



Q1. Analysis

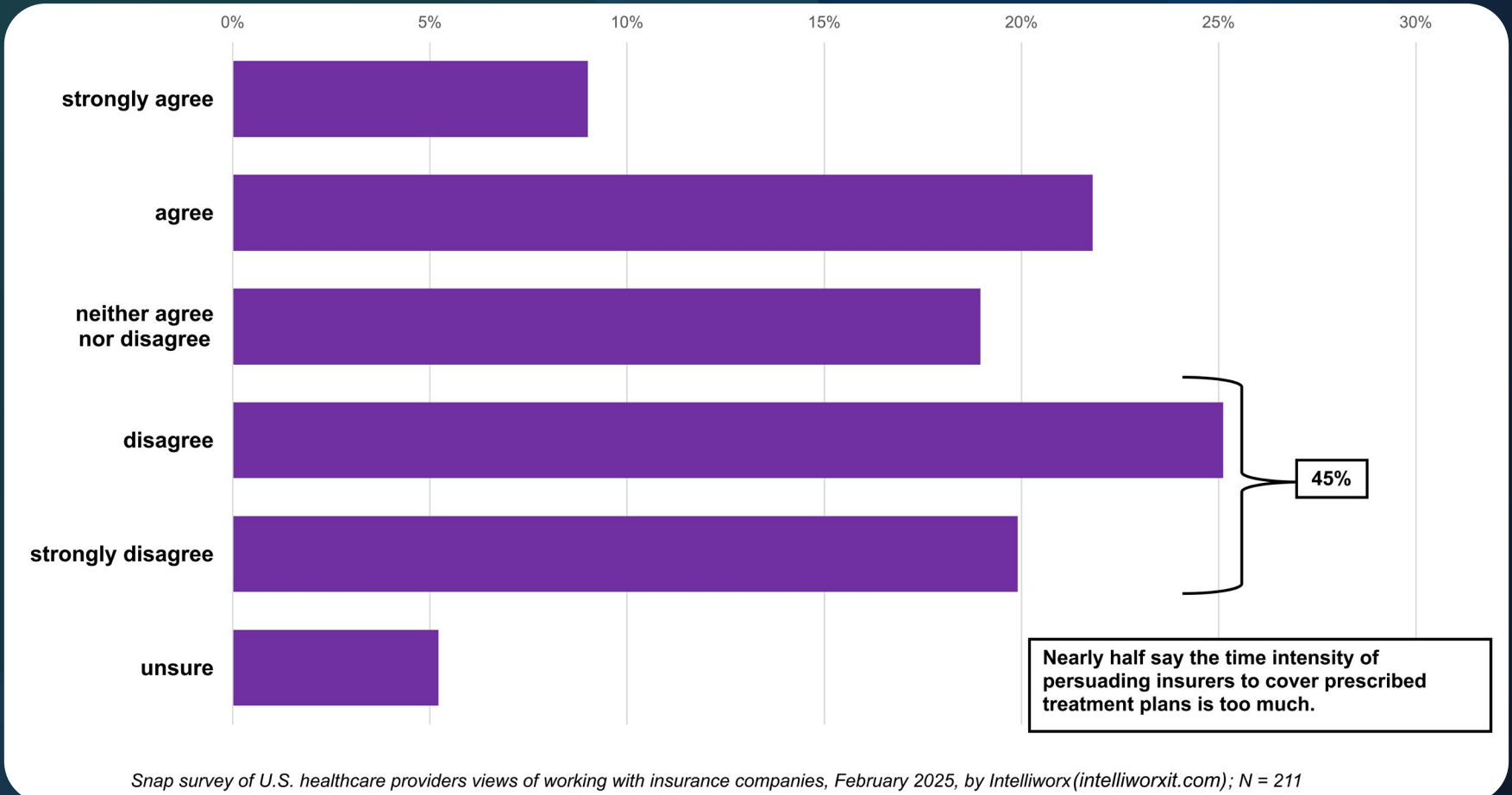
Nearly 3 out of 4 healthcare providers (74%) say health insurance companies decline to cover prescribed treatments at least some of the time. Further, more than 1 out of 3 (36%) say this happens “frequently” (9%) or “very frequently” (27%).

On the flip side, just 15% say this happens “rarely” (12%) or “never” (3%). This cohort is in the minority, so it’s reasonable to conclude this happens all too often – from a provider’s perspective.

Suggestion: Healthcare employers should run a similar survey within their own organization. The results would provide a baseline for the sentiment among your providers. In addition, interviewing those providers who say this is an infrequent occurrence may reveal what this cohort is doing differently. Such findings would be valuable to share across the team.

Q2. 45% of healthcare providers say they are required to spend too much time on persuading insurers

Q2: Which of the following best describes your level of agreement with this statement: The time you are required to spend persuading insurance or other payers to cover treatments you prescribe for your patients is appropriate.



Q2. Analysis

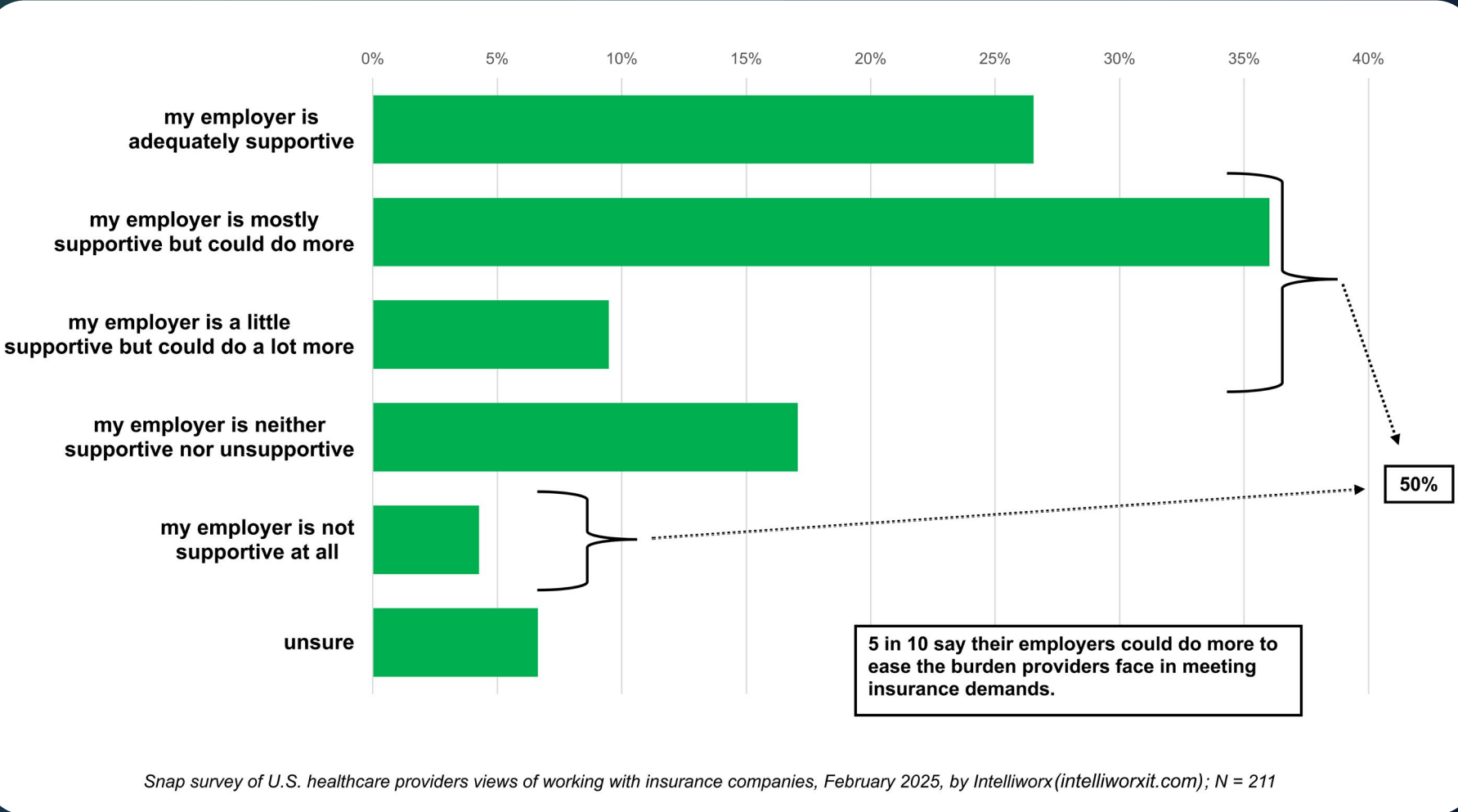
Nearly half of the healthcare providers surveyed (45%) say the time intensity of persuading insurers to cover prescribed treatment plans is too much. Of this cohort, 1 in 5 (20%) expressed strong dissatisfaction with the amount of effort they are forced to pour into insurance matters.

Conversely, 31% indicated such engagement with payers is just part of the job. Indeed, 9%, or nearly 1 in 10, signaled the level of effort is just right.

Suggestion: Healthcare employers should explore this question with their own employees. The key to looking for is if the differences in perception match the physical tangible actions. For example, of those providers who feel the time required of them on insurance issues is reasonable – do they enter better notes – or do insurers simply have overzealous expectations?

Q3. 50% of providers say healthcare employers could do more to address insurance demands

Q3: Which of the following best describes how you feel about the level of support your employer or practice provides to you in meeting the demands insurance or other payers?



Q3. Analysis

Exactly 5 in 10 healthcare providers (50%) surveyed say their employers could do more to ease the burden they face in meeting insurance demands. About a quarter of respondents (27%) feel their employers do help enough and another 17% are indifferent.

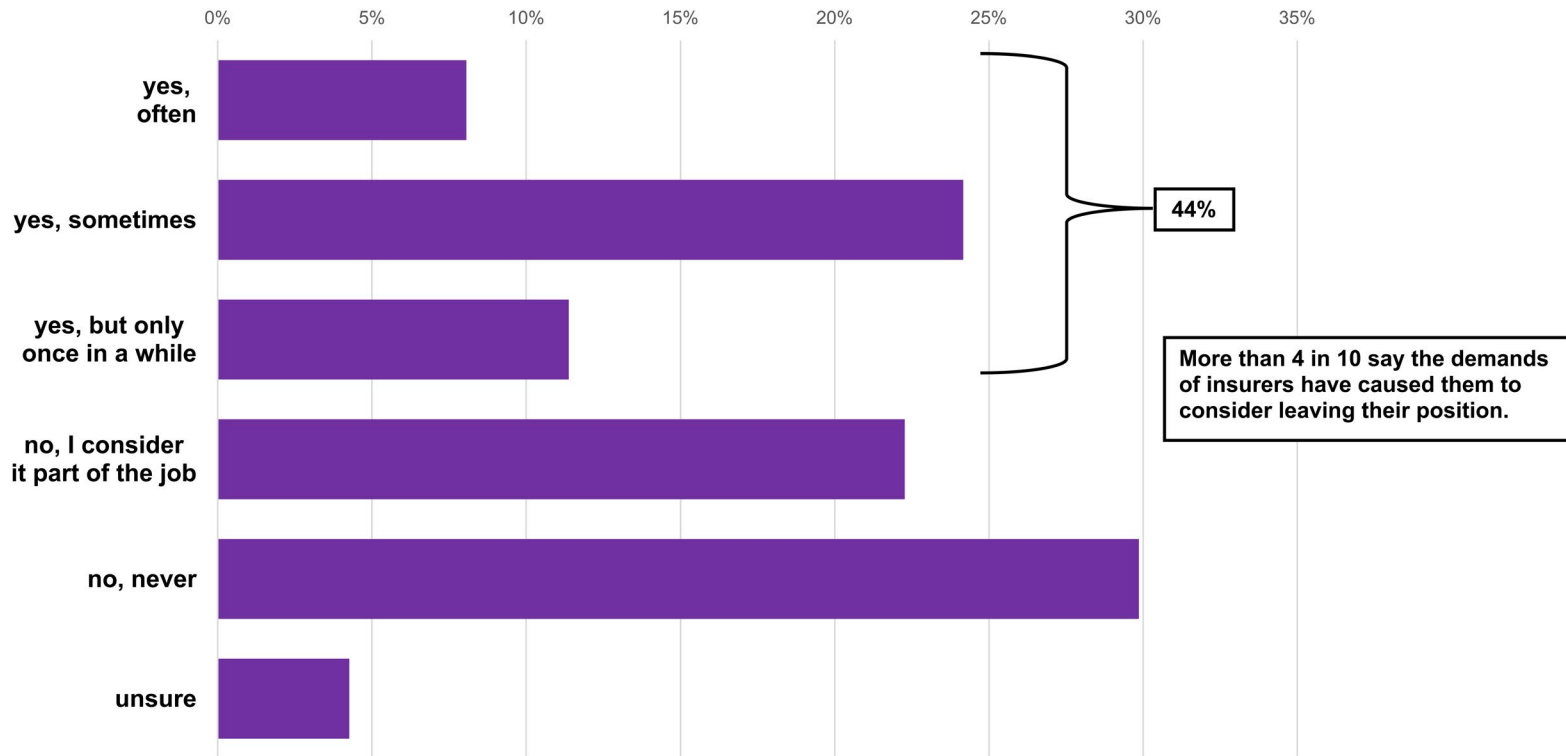
Since the answers range across a Likert scale, the degree of variation is important to examine. Here's how the numbers break out semantically:

- 27% say "my employer is adequately supportive;"
- 36% say "my employer is mostly supportive but could do more;"
- 9% say "my employer is a little supportive but could do a lot more;"
- 17% say "my employer is neither supportive nor unsupportive;"
- 4% say "my employer is not supportive at all;" and
- 7% say they are "unsure."

Suggestion: A simple way healthcare employers can make a difference is to periodically ask the providers you employ how you can help. However, you must also put some of those suggestions into action, or the effort can backfire. Keep an open mind about providers' suggestions and strive to experiment with as many as feasible.

Q4. More than 4 out of 10 healthcare providers have considered quitting their jobs over insurance demands

Q4: Have your interactions with an insurance company ever caused you to consider leaving your position?



Snap survey of U.S. healthcare providers views of working with insurance companies, February 2025, by Intelliworx (intelliworx.com); N = 211

Q4. Analysis

Some 44% of healthcare providers have considered leaving their position as a result of the insurance demands. Even more concerning, about 1 out of 3 (32%) have considered it with some frequency, including “often” (8%) and “sometimes” (24%).

It’s worth pointing out that the majority of respondents (52%) indicated they wouldn’t quit. This cohort includes 22% who say dealing with insurance is just “part of the job” and another 30% who have simply “never” considered leaving – over insurance.

Suggestion: Few healthcare employers have enough providers on staff. It’s expensive, hard and time consuming to replace even one provider – let alone up to 44% as this survey suggests. Addressing these concerns in tangible and practical ways can help provider retention.

Moreover, those healthcare facilities that do stand to attract providers who are burned out with what feels like a constant battle to deliver the proper care to their patients. Addressing their concerns and making it a point to highlight the solutions you’ve implemented as part of a methodical and well-organized recruiting process.

Q5. In their own words: what providers say they would change about healthcare insurance

Q2. Analysis

The final question of this snap survey was open-ended and optional. We asked providers the following question: “If you could change one thing about healthcare insurance what would it be?”

Of the 212 total responses, 208 took the time to write in answers. The previous word cloud depicts an analysis of all written responses to this question.

A sample of some of their **verbatim** responses follows on the next page.

Q5. Verbatim Responses

- “That they support the patient more and spend less time trying to save money.”
- “The provider makes the decisions of what is best for the patient not the insurance company.”
- “They would be more agreeable to what the physician is prescribing to help the patients.”
- “Make them stop thinking they are doctors when they do not know the best treatment for patients.”
- “To stop questioning why something is needed. To do away with Prior Authorization on medications, nothing worse than sending a patient home to get a call [because] their insurance wants approval before they will pay. If something is needed or prescribed, the doctor and team know what is best for the patient.”
- “Listen to the professionals and not waste time/money requiring totally unnecessary and pointless treatments. Delays proper care for the patient and costs way more than simply doing what is necessary for the proper treatment.”
- “It would be to never deny a cancer patient the lifesaving treatment they deserve.”

Methodology

Intelliworx polled 211 U.S.-based healthcare providers for this survey. Respondents were solicited through an independent survey panel between January 30, 2025, and February 4, 2025.

Suggested reading

- [7 observations showing how rural healthcare is overcoming the provider shortage](#)
- [Healthcare physician productivity has skyrocketed](#)
- [How healthcare staff compensation has changed over the last five years](#)
- [With all eyes on recruiting, healthcare also has a retention problem](#)
- [3 systemic problems in healthcare staff that may magnify the talent shortage](#)
- [Providers identify the top benefits of working in rural healthcare \[infographic\]](#)
- [A Porter's Five Forces Analysis for Provider Talent in Rural Healthcare](#)
- [Can hospitals really lose a provider to a chaotic recruiting process?](#)

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[Intelliworx](#) (formerly HRWorx) provides workflow management software that helps clients automate business processes such as [financial disclosure](#), [telework](#), [credentialing](#), [onboarding](#), and [workflow](#), among others.

The company got started more than 20 years ago by converting complex forms into intelligent interviews – similar to the way tax software simplifies the completion of complicated tax forms. It has since evolved from a simple and easy tool for collecting data, to a platform that manages and analyzes data to support decision-making.

Intelliworx creates solutions for rural healthcare facilities and the U.S. Government. It has provided purpose-built software to more than 35 [federal government agencies](#). The company is a certified veteran-owned small business and is FedRAMP-authorized.

It's newest product [Workforce Management Software](#) helps rural healthcare facilities modernize and improve the process of talent acquisition. The solution will help smaller healthcare facilities reduce the cost of recruiting, shorten the time it takes to fill open positions and improve the overall experience for hospitals and prospective candidates.

[Learn more about the product](#) or [request a no-obligation online demo of the solution](#).