

**Statement
of the
American Hospital Association
for the
Special Committee on Aging
of the
United States Senate**

“The Doctor Is Out: How Washington’s Rules Drove Physicians Out of Medicine”

February 11, 2026

On behalf of our nearly 5,000 hospitals, health systems and other health care organizations, our clinician partners — including more than 270,000 affiliated physicians, 2 million nurses and other caregivers — and the 43,000 health care leaders who belong to our professional membership groups, the American Hospital Association (AHA) appreciates the opportunity to provide the hospital perspective on the issues impacting health care workforce burnout.

We appreciate Congress’ recent efforts to address health care workforce challenges and urge continued action to advance additional legislative initiatives that strengthen and sustain the nation’s physicians. These efforts include the recent reauthorization of the Dr. Lorna Breen Health Care Provider Protection Act as part of the Consolidated Appropriations Act of 2026. This legislation aims to reduce and prevent suicide, burnout and behavioral health disorders among health care professionals and authorizes grants to health care providers to establish programs that offer behavioral health services for front-line workers.

Hospitals and health systems are currently facing national physician shortages that threaten access to high-quality care for the patients and communities they serve. The factors that create these workforce challenges — some of which are highlighted below — affect every part of the care continuum and are especially acute in underserved and rural communities.



Commercial Insurance Policies and Practices

Hospitals and health systems have long raised concerns that the administrative practices that some commercial insurers rely on — especially the improper application of prior authorization in the Medicare Advantage (MA) program — have very real consequences for patients and providers. Inefficient prior authorization requirements remain a pervasive problem among certain plans in the MA program that result in delays in care and add financial burden and strain to the health care system. Plans vary widely on accepted methods of prior authorization requests and how to submit supporting documents. Many insurers continue to rely on fax machines and call centers to process prior authorization requests. This heavily burdensome process contributes to patient uncertainty regarding their care plan, creates harmful delays in care, and leads to health care worker burnout.

It is not unusual to hear from physicians about how they spend hours of their day away from the bedside while sitting on the phone urging a patient's insurance company to cover essential medical care. It is no surprise that administrative burden is one of the top contributors to clinician burnout. Nearly 90% of physicians report that prior authorization somewhat or significantly increases physician burnout, which adds to the workforce shortages facing hospitals across the country.¹

Workplace Violence

For the past several years, health care workers across the nation have experienced a sharp increase in incidences of workplace violence, with no sign that this trend is receding. Despite the diligent efforts of hospitals and health systems to prevent violence and protect their staff, health care workers remain five times more likely than any other type of worker to be physically attacked on the job, according to the U.S. Bureau of Labor Statistics.

Violence in health care settings has implications beyond the injuries sustained by the workforce. Our member hospitals and health systems report that workplace violence and intimidation make it more difficult for clinical staff to provide quality patient care. Providers cannot deliver attentive care when they are afraid for their personal safety, distracted by disruptive patients or family members, or traumatized from prior attacks. In addition, violent attacks at health care facilities can delay urgently needed care for other patients and increase the likelihood of adverse events.

The United States faces a projected shortage of up to 86,000 physicians by 2036 due to the nation's growing and aging population and a significant portion of the physician

¹ <https://www.aha.org/testimony/2026-01-21-aha-statement-house-wm-committee-hearing-health-insurance-ceos>

workforce approaching retirement age.² This has created a workforce crisis characterized by immediate staffing shortages and a long-term, insufficient talent pipeline. The projected shortages of physicians, nurses, and allied health and behavioral health professionals will further strain our health care system and disproportionately impact vulnerable and underserved populations.

POLICY RECOMMENDATIONS

Prior Authorization Reform

We urge Congress to pass the Improving Seniors' Timely Access to Care Act (H.R.3514/S.1816). This bill would streamline prior authorization requirements under MA plans by making them simpler and more uniform and eliminating the wide variation in prior authorization methods that frustrate both patients and providers. It also would require MA plans to report on their use of prior authorization, including the use of artificial intelligence in prior authorization and the rate of approvals and denials.

Curbing Violence in the Workplace

We urge Congress to pass the Save Healthcare Workers Act (H.R.3178/S.1600). This bill — modeled after the federal statute protecting aircraft and airport workers — would make it a federal crime to assault a hospital employee, with enhanced penalties applicable to acts that involve the use of a deadly or dangerous weapon, inflict bodily injury, or are committed during an emergency declaration.

Strengthening Graduate Medical Education

We urge Congress to pass the Resident Physician Shortage Reduction Act of 2025 (H.R.3890/S.2439). This bipartisan bill would add 14,000 Medicare-funded residency positions over seven years, thereby helping to alleviate ongoing physician shortages that threaten patients' access to care.

CONCLUSION

Thank you for examining the challenges facing physicians. The AHA stands ready to provide additional input as you continue to explore these important issues.

² <https://www.aamc.org/news/press-releases/new-aamc-report-shows-continuing-projected-physician-shortage>