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Biography

Fourth-year medical student focused on health equity in dermatology. Founder of UV and Me sun-safety education, legislative research lead for Arizona Dermatology Advocacy Day, and mentee in the Skin of Color community. Interests include access policy, photoprotection, and patient education.

Step Therapy And Delayed Access To Care In Skin Of Color Highlights A Need For Policy Reform

Abstract:

Step therapy and prior authorizations are used to control costs for dermatology medications, but they delay treatment, add practice burden, and worsen outcomes. In skin of color, later recognition and undertraining already slow diagnosis. Step therapy then pushes patients with conditions like scarring alopecia, keloids, and refractory inflammatory disease through cheaper but ineffective options before they can access advanced therapies such as biologics and JAK inhibitors. I reviewed state step-therapy reforms and PubMed literature on standard of care. Practice-based surveys and reports describe high denial rates, long appeal cycles, and significant office time spent on paperwork. Prior authorizations delay treatment by about one month on average and longer when appeals are required. Many dermatology patients avoid care altogether because of insurance barriers. Recent reforms in Arizona, Texas, and Virginia helped limit forced switching and shortened approval timelines, but they were not written with dermatology in mind. I propose dermatology-specific provisions that account for disease course in skin of color, transparent access reporting, and routine equity audits. Digital tools can track delays and outcomes, and language access can improve adherence and trust. Creating SOC-informed criteria that reduce unnecessary step edits would move patients faster to effective therapy and narrow gaps in care.