Should I see a specialist for my psoriasis or psoriatic arthritis?

You may want to see a specialist if any of the following apply to you:

- Your PCP is not treating your psoriatic disease in a way that is appropriate to the level of severity of your symptoms, whether mild, moderate or severe.
- Your PCP is not comfortable prescribing treatment options including biologics, oral treatments and phototherapy (also called “light therapy”).
- You are not achieving psoriasis clearance or remission (clearance of your symptoms for periods of time) after being on a treatment that your PCP prescribed for 3 to 6 months.

Working with your primary care physician

A primary care physician (PCP) is generally trained in family medicine, pediatrics or internal medicine. Your PCP plays an important role in treating acute (short-term) illnesses, having regular check-ups for signs and symptoms of comorbidities and referring you to specialists. We recommend that you see specialists, such as a dermatologist (skin doctor) for your psoriasis and a rheumatologist (arthritis doctor) for your psoriatic arthritis.

There may be situations when seeing a specialist may be difficult. However, it is still possible to effectively manage your psoriatic disease while working with your PCP.

The key steps to managing your psoriatic disease include:

- Getting the correct diagnosis
- Deciding on a treatment plan with your health care provider
- Accessing your treatment(s)
- Managing your overall health

It is important that you learn as much as you can about psoriatic disease and the possible treatment options whether you are working with your PCP or a specialist for your psoriatic disease. This will help you to play an active role in discussing treatment options, setting personal treatment goals and making a treatment decision.
How do I work with my primary care physician to manage my psoriatic disease?

Your health care provider should treat your psoriatic disease in a way that is appropriate to the level of severity of your symptoms. You and your PCP should work together to decide on a treatment plan to help clear or reduce your psoriatic symptoms and achieve remission.

Psoriasis treatments should be based on how severe your psoriasis is. Severity can be measured by using the palm of your hand. The palm of your hand is equal to about 1 percent of your body surface area (BSA).

- Mild psoriasis affects less than 3 percent of your body.
- Moderate psoriasis affects 3 to 10 percent of your body.
- Severe psoriasis generally affects more than 10 percent. However, your psoriasis can be considered severe if it affects less than 10 percent of your body but has a large impact on your overall quality of life. Examples of this include psoriasis on your hands, feet, face or genital area.

Mild psoriasis may be effectively treated with topicals, phototherapy or a combination of the 2.

Moderate-to-severe psoriasis generally requires stronger or more aggressive treatment options. These may include biologics, oral treatments, phototherapy or a combination of treatments. A treatment plan for moderate-to-severe psoriasis may also include topical treatments to help with occasional plaques or flares. However, topical treatments alone are usually not effective enough to manage moderate-to-severe psoriasis.

Psoriatic arthritis treatments should treat the inflammation in your body and help manage pain. Treatments that help to reduce the inflammation caused by psoriatic arthritis include biologics and oral treatments. Additionally, treatments called nonsteroidal anti-inflammatory drugs (NSAIDs) like aspirin or ibuprofen can help to reduce pain, swelling and stiffness. Physical therapy may also be helpful in managing symptoms, improving mobility and keeping joints healthy. Your psoriatic arthritis treatment plan should effectively reduce inflammation in your body and help to manage your other symptoms.

How do I get health insurance to cover treatments?

Your health insurance plan may require a preauthorization (also called prior authorization, prior approval or precertification) before agreeing to cover your treatment. A preauthorization means that your health insurance plan must decide whether your treatment is medically necessary.

Before receiving your treatment, make sure that your health care provider:

1. Contacts your health insurance plan to confirm if a preauthorization is required
2. Completes the preauthorization request forms and submits them to your health insurance plan
3. Confirms that your preauthorization is approved

If your preauthorization is denied, you may be able to appeal the denial. The steps on how to appeal should be on your denial letter or can be accessed by calling your health insurance plan. You and your health care provider will have to work together to request an appeal.

Other resources may be available if you need help with applying for disability, purchasing health insurance or accessing health care services for free or low cost.

What should I do next?

There are various resources and programs that may be able to provide financial assistance to help you access your treatments once your health insurance plan has approved it. Contact our Patient Navigation Center to find providers, prepare for appointments, discuss treatments and get help with accessing treatments (find contact information below).