November 19, 2025

Mehmet C. Oz, MD, MBA
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Administrator Oz:

On behalf of the Regulatory Relief Coalition (RRC), a coalition of national physician organizations and our allies seeking to reduce regulatory burdens that interfere with patient care, we write to thank you for your continued leadership at the Centers for Medicare & Medicaid Services (CMS) in advancing reforms to bring greater accountability and transparency to the Medicare Advantage (MA) prior authorization process. We would welcome the opportunity to meet with you to discuss how we can build on this progress together to ensure that the nearly 35 million seniors enrolled in MA receive timely, high-quality care.

As you know, prior authorization use has historically been far higher in MA than in traditional Fee-for-Service (FFS) Medicare.[1] In 2023 alone, MA insurers made nearly 50 million prior authorization determinations, compared to fewer than 400,000 in FFS Medicare. The overuse and misuse of prior authorization by some MA plans continue to threaten patient access to medically necessary care and significantly increase provider administrative burden.

We applaud your recent remarks at the Better Medicare Alliance forum calling for greater transparency in MA prior authorization practices and increased oversight of overpayment clawbacks. Building on the progress achieved through the American Health Insurance Plans (AHIP) commitment to improve the prior authorization process for providers and patients, we strongly urge support for the bipartisan, bicameral *Improving Seniors' Timely Access to Care (Seniors') Act* (H.R. 3514 / S. 1816) in the 119th Congress. The bill would codify and enhance elements of the Advancing Interoperability and Improving Prior Authorization Processes (e-PA) rule that was finalized by CMS on January 17, 2024.[2]

The bill enjoys broad, bipartisan support from nearly 300 stakeholder organizations—including the Better Medicare Alliance—as well as groups representing patients, providers,

[1] See Medicare Advantage Insurers Made Nearly 50 Million Prior Authorization Determinations in 2023 | KFF
[2] Medicare and Medicaid Programs; Patient Protection and Affordable Care Act; Interoperability and Prior Authorization Processes, 86 Fed. Reg. 7767 (Feb. 2, 2021) (to be codified at 42 C.F.R. pts. 431, 438, 440, 457, 457, and 45 C.F.R. pt. 156)

and the medical technology and biopharmaceutical industries. Notably, the Congressional Budget Office (CBO) awarded the bill with a preliminary score of zero in October 2024.

Thank you again for your ongoing commitment to advancing patient-centered reforms within the MA program. We look forward to working together toward these shared goals.

Sincerely,

RRC Members

American Academy of Family Physicians
American Academy of Neurology
American Academy of Ophthalmology
American Academy of Physical Medicine and Rehabilitation
American Association of Neurological Surgeons
American Association of Orthopaedic Surgeons
American College of Cardiology
American College of Rheumatology
American College of Surgeons
American Gastroenterological Association
American Osteopathic Association
Association For Clinical Oncology
Congress of Neurological Surgeons
Heart Rhythm Advocates
Medical Group Management Association
Society for Cardiovascular Angiography & Interventions

RRC Allies

American Podiatric Medical Association
Premier, Inc.
The National Association for Proton Therapy

cc: Chris Klomp
Deputy Administrator and Director
Center for Medicare