

Congress of the United States

Washington, DC 20515

June 22, 2026

Dr. Mehmet Oz
Administrator
Centers for Medicare and Medicaid Services
200 Independence Ave, SW
Washington, DC 20201

Dear Administrator Oz,

We write to share our concerns regarding the implementation of the Center for Medicare and Medicaid Innovation's (CMMI's) Wasteful and Inappropriate Service Reduction (WISeR) model.

Through the WISeR model, the Centers for Medicare & Medicaid Services (CMS) contracts with private companies to use artificial intelligence (AI) to automate prior authorization in traditional Medicare, which rarely required prior authorization in the past. Services newly subjected to prior authorization include, but are not limited to, skin and tissue substitutes, implantation of electrical nerve stimulators, and knee arthroscopy for knee osteoarthritis. The model is scheduled to run from January 1, 2026, to December 31, 2031, and only applies to providers and patients in New Jersey, Ohio, Oklahoma, Texas, Arizona, and Washington.¹

Since the WISeR model began in traditional Medicare on January 1, 2026, patients and providers in the affected states have reported care denials, long wait times, and increased administrative burden.² Well documented issues with prior authorization in Medicare Advantage (MA) suggested that this would be the case. A 2018 Department of Health and Human Services (HHS) Office of Inspector General (OIG) report found that 75 percent of denied prior authorization requests in MA were overturned on appeal, suggesting initial denials were often unfounded. A 2026 OIG report found that the same was true for 95 percent of denied prior authorization requests in MA for post-acute care. Further, a 2022 OIG report revealed that MA plans routinely use prior authorizations to deny access to services, even when those services meet Medicare coverage guidelines.

Despite reports from providers and patients on the ground, CMS has not yet released comprehensive data on the WISeR model's implementation, leaving impacted patients and providers in the dark, and preventing Congress from conducting appropriate oversight. To better understand the scope of the implementation's failures and determine whether termination of the model is appropriate, we request you provide answers to the following questions by July 15, 2026:

- **Prior Authorization, Claims Submission, and Payment:** In your response to a letter we sent in August 2025³ about how the WISeR model would be implemented, CMS maintained that “initial data reports show that turnaround time for determinations from model participants ranges from within a single day to approximately three days.” However, this reported turnaround time seems to only reflect the vendor determination interval rather than the point at which the physician actually receives a Unique Tracking Number (UTN) and can proceed with claim submission. To that end, please provide the following data for each participating state:

¹ <https://www.cms.gov/priorities/innovation/innovation-models/wiser>

² <https://wpintelligence.washingtonpost.com/topics/2026/03/18/exclusive-medicare-ai-experiment-leads-delayed-care-some-seniors/>

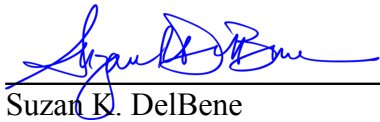
³ https://delbene.house.gov/uploadedfiles/letter_to_cms_on_prior_authorization_in_traditional_medicare_via_the_cmmi_wiser_model.pdf

- Average, median, and percentile distribution metrics for time from WISeR submission to vendor determination;
 - Average, median, and percentile distribution metrics for time from vendor determination to issuance of a UTN;
 - Average, median, and percentile distribution metrics for total time from WISeR submission to physician receipt of a UTN;
 - Number and percentage of requests that are:
 - affirmed,
 - non-affirmed, and
 - dismissed;
 - Top five reasons given for request dismissals;
 - Appeal rate and overturn rate for non-affirmations;
 - Percentage of non-affirmed requests that ultimately result in paid claims;
 - Average, median, and percentile distribution metrics for time from claim submission with a valid UTN to final payment by CMS;
 - Percentage of claims denied despite a valid UTN;
 - Number and percentage of claims submitted with a valid UTN that nevertheless required additional documentation requests, medical review, claim suspension, or other post-submission development prior to payment; and
 - Average and median total elapsed time from initial WISeR submission to final claim payment.
- **Peer-to-Peer Review:** Providers can request a peer-to-peer clinical review after a claim is not affirmed or denied. However, providers report waiting for up to 90 minutes on the phone just to schedule a peer-to-peer conversation, which then occurs a week or more later. Please provide the following data for each participating state:
 - Average and median time physicians wait to complete a peer-to-peer review after requesting one;
 - Number and percentage of peer-to-peer reviews conducted by a physician licensed in the same specialty or a materially similar specialty as the treating physician;
 - Number and percentage conducted by non-physician reviewers;
 - Number and percentage conducted by reviewers holding board certification relevant to the service under review; and
 - Number and percentage of non-affirmations overturned following peer-to-peer review.

- **Oversight:** CMS states that it will “audit participants to prevent inappropriate denials, and participants will be held accountable to a performance metric related to accuracy of determinations.”⁴
 - When will the first audit of the WISeR model be publicly released?
 - What are the performance metrics and benchmarks CMS will use to determine whether to terminate participating vendors?
 - Is CMS planning to evaluate impacts of increased administrative burden on providers subject to the WISeR model?
 - How will CMS determine the success of each vendor in the model?

Thank you for your timely response and your careful attention to these matters.

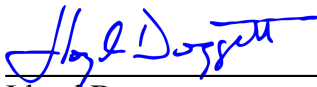
Sincerely,



Suzan K. DelBene
Member of Congress




Ami Bera, M.D.
Member of Congress



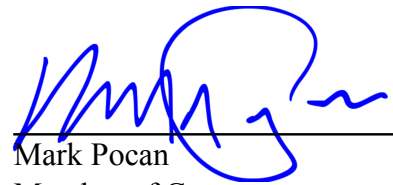
Lloyd Doggett
Member of Congress



Lois Frankel
Member of Congress



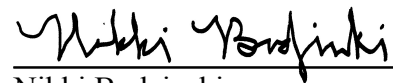
Alexandria Ocasio-Cortez
Member of Congress



Mark Pocan
Member of Congress

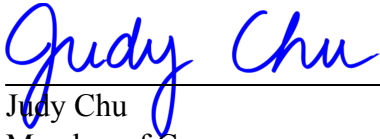


Donald S. Beyer Jr.
Member of Congress

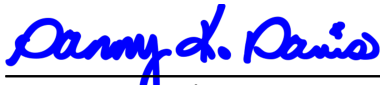


Nikki Budzinski
Member of Congress

⁴ <https://www.cms.gov/priorities/innovation/files/document/wiser-model-frequently-asked-questions>



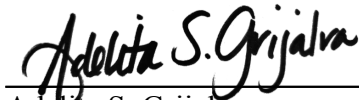
Judy Chu
Member of Congress



Danny K. Davis
Member of Congress



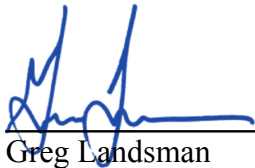
Jesús G. "Chuy" García
Member of Congress



Adenta S. Grijalva
Member of Congress



Julie Johnson
Member of Congress



Greg Landsman
Member of Congress



Eleanor Holmes Norton
Member of Congress



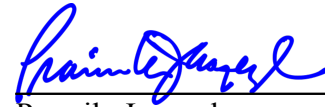
Herbert C. Conaway, Jr.
Member of Congress



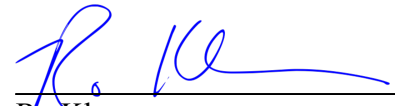
Veronica Escobar
Member of Congress



Maggie Goodlander
Member of Congress



Pramila Jayapal
Member of Congress



Ro Khanna
Member of Congress



Rick Larsen
Member of Congress



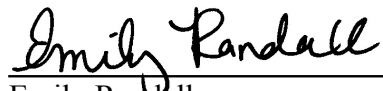
Jimmy Panetta
Member of Congress



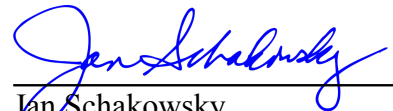
Chellie Pingree
Member of Congress



Nellie Pou
Member of Congress



Emily Randall
Member of Congress




Jan Schakowsky
Member of Congress



Terri A. Sewell
Member of Congress



Adam Smith
Member of Congress



Marilyn Strickland
Member of Congress



Rashida Tlaib
Member of Congress



Bonnie Watson Coleman
Member of Congress