

December 9, 2025

The Honorable Mike Johnson
Speaker
U.S. House of Representatives
H-232, The Capitol
Washington, DC 20515

The Honorable John Thune
Senate Majority Leader
U.S. Senate
S-230, The Capitol
Washington, DC 20510

The Honorable Hakeem Jeffries
House Democratic Leader
U.S. House of Representatives
H-204, The Capitol
Washington, DC 20515

The Honorable Charles Schumer
Senate Minority Leader
U.S. Senate
322 Hart Senate Office Building
Washington, DC 20510

Dear Speaker Johnson, Majority Leader Thune, Minority Leader Schumer, and Leader Jeffries:

The undersigned physician organizations representing national medical specialty societies and state medical associations write in strong support of (H.R. 3514/S. 1816), the “*Improving Seniors’ Timely Access to Care Act of 2025*.” This bipartisan legislation would streamline and standardize prior authorization requirements within the Medicare Advantage (MA) program, addressing one of the most persistent barriers to timely, medically necessary care for America’s seniors.

Prior authorization continues to be a leading source of care delays and frustration for patients and physicians alike. It is a practice used by health plans to require pre-approval for coverage of items, services, and pharmaceuticals, often resulting in treatment delays, denials of medically necessary care, poorer patient health outcomes, and significant administrative burden. In a 2024 American Medical Association national survey, 93 percent of physicians cited care delays linked to prior authorization, 82 percent reported that it sometimes causes patients to abandon recommended treatment, and almost one in three physicians witnessed prior authorization leading to a serious adverse event for a patient, including hospitalization, disability, or death.¹ The consequences are particularly acute for patients with complex or life-threatening conditions, such as cancer. A recent survey of oncology professionals found that nearly all participants reported patients experiencing harm due to prior authorization delays, including disease progression (80 percent) and even loss of life (36 percent).² These findings highlight the urgent need for congressional action to protect patients from bureaucratic barriers to care.

Data from the federal government further confirms the negative impact of prior authorization processes within MA. More specifically, an April 2022 Department of Health and Human Services Office of Inspector General Report concluded that 13 percent of prior authorization requests that were ultimately denied for MA patients would have been approved for these same beneficiaries had they been covered under traditional Medicare. The same study also found that 18 percent of payment requests that were denied by MA plans actually met standard Medicare coverage and billing rules.³

The Improving Seniors’ Timely Access to Care Act of 2025 provides numerous solutions to the multi-faceted problem of prior authorization. It would require MA plans to implement an electronic prior

¹ 2024 AMA Prior Authorization Physician Survey. Available at: <https://www.ama-assn.org/system/files/priorauthorization-survey.pdf>.

² 2022 ASCO Prior Authorization Survey. Available at: <https://cdn.bfldr.com/KOIHB2Q3/as/wt2thjbxbj24ncwnwjwzv9c/2022-ASCO-Prior-Auth-Survey-Summary>.

³ <https://oig.hhs.gov/documents/evaluation/3150/OEI-09-18-00260-Complete%20Report.pdf>.

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authorization system that meets federal interoperability standards, building on the Centers for Medicare & Medicaid Services' (CMS) 2024 Interoperability and Prior Authorization Final Rule.⁴ By replacing outdated faxes, proprietary portals, and inconsistent processes, the bill would simplify and accelerate prior authorization decisions by requiring a standard electronic process that integrates with physicians' electronic health records. It also promotes transparency by requiring public reporting of approval and denial data and disclosure of any use of artificial intelligence or algorithmic tools in coverage determinations. Further, it outlines a process for defining routinely approved care and gives CMS explicit authority to implement tighter deadlines for approving items and services, such as 24 hours for urgent care. Finally, it directs plans to base requirements on evidence-based criteria and to review those requirements annually to eliminate unnecessary barriers to care. By codifying these patient protections and remaining consistent with the CMS' 2024 Interoperability and Prior Authorization Final Rule,⁵ the bill would reduce administrative waste, improve patient outcomes, and make certain that medical decisions are timely, transparent, and clinically sound.

The Improving Seniors' Timely Access to Care Act has been the principal prior authorization legislative priority for national medical specialty societies and state medical associations for many years. In fact, previous versions of this legislation passed the House of Representatives and key committees of jurisdiction in the 117th and 118th Congresses, respectively. Introduced in the 119th Congress by Representatives Mike Kelly (R-PA), Suzan DelBene (D-WA), Ami Bera, MD (D-CA), and John Joyce, MD (R-PA), as well as Senators Roger Marshall, MD (R-KS) and Mark Warner (D-VA), this bipartisan legislation has already been cosponsored by a majority of the House of Representatives and a super majority of the Senate. Furthermore, the latest version of the Improving Seniors' Timely Access to Care Act has been modified in a way that preserves its ability to enact meaningful changes to prior authorization processes while simultaneously ensuring limited to no fiscal impact as assessed by the Congressional Budget Office.

The time for expeditious legislative action is now. We urge the House and Senate to bring the H.R. 3514/S. 1816, the Improving Seniors' Timely Access to Care Act of 2025, to the floor and pass it without delay.

Sincerely,

American Medical Association
American Academy of Allergy, Asthma & Immunology
American Academy of Facial Plastic and Reconstructive Surgery
American Academy of Family Physicians
American Academy of Hospice and Palliative Medicine
American Academy of Neurology
American Academy of Ophthalmology
American Academy of Otolaryngic Allergy
American Academy of Otolaryngology - Head and Neck Surgery

⁴ <https://www.federalregister.gov/documents/2024/02/08/2024-00895/medicare-and-medicaid-programs-patient-protection-and-affordable-care-act-advancing-interoperability>.

⁵ *Id.*

American Academy of Physical Medicine and Rehabilitation
American Academy of Sleep Medicine
American Association of Hip and Knee Surgeons
American Association of Neurological Surgeons
American Association of Orthopaedic Surgeons
American Association of Physicians of Indian Origin
American Association of Public Health Physicians
American Clinical Neurophysiology Society
American College of Allergy, Asthma and Immunology
American College of Chest Physicians
American College of Emergency Physicians
American College of Gastroenterology
American College of Medical Genetics and Genomics
American College of Medical Toxicology
American College of Mohs Surgery
American College of Obstetricians & Gynecologists
American College of Physicians
American College of Radiation Oncology
American College of Radiology
American College of Rheumatology
American College of Surgeons
American Gastroenterological Association
American Geriatrics Society
American Orthopaedic Foot & Ankle Society
American Osteopathic Association
American Psychiatric Association
American Society for Clinical Pathology
American Society for Gastrointestinal Endoscopy
American Society for Laser Medicine and Surgery, Inc.
American Society for Radiation Oncology
American Society for Surgery of the Hand Professional Organization
American Society of Addiction Medicine
American Society of Anesthesiologists
American Society of Breast Surgeons
American Society of Cataract & Refractive Surgery
American Society of Echocardiography
American Society of Hematology
American Society of Interventional Pain Physicians
American Society of Nephrology
American Society of Neuroradiology
American Society of Nuclear Cardiology
American Society of Plastic Surgeons
American Society of Retina Specialists
American Society of Transplant Surgeons
American Urogynecologic Society
American Venous Forum

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Association for Clinical Oncology
Association of Academic Physiatrists
College of American Pathologists
Congress of Neurological Surgeons
Heart Rhythm Society
International Pain and Spine Intervention Society
Medical Group Management Association
National Association of Medical Examiners
National Association of Spine Specialists
North American Neuromodulation Society
Outpatient Endovascular and Interventional Society
Post-Acute and Long-Term Care Medical Association
Renal Physicians Association
Society for Cardiovascular Angiography and Interventions
Society for Pediatric Dermatology
Society for Vascular Surgery
Society of American Gastrointestinal and Endoscopic Surgeons (SAGES)
Society of Critical Care Medicine
Society of Hospital Medicine
Society of Interventional Radiology
The American Society of Dermatopathology
The Society of Thoracic Surgeons

Medical Association of the State of Alabama
Alaska State Medical Association
Arizona Medical Association
Arkansas Medical Society
California Medical Association
Colorado Medical Society
Connecticut State Medical Society
Medical Society of Delaware
Medical Society of District of Columbia
Florida Medical Association
Medical Association of Georgia
Hawaii Medical Association
Idaho Medical Association
Illinois State Medical Society
Indiana State Medical Association
Iowa Medical Society
Kansas Medical Society
Kentucky Medical Association
Louisiana State Medical Society
Maine Medical Association
MedChi, The Maryland State Medical Society
Massachusetts Medical Society
Michigan State Medical Society

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Minnesota Medical Association
Mississippi State Medical Association
Missouri State Medical Association
Montana Medical Association
Nebraska Medical Association
Nevada State Medical Association
New Hampshire Medical Society
New Mexico Medical Society
Medical Society of the State of New York
North Dakota Medical Association
Ohio State Medical Association
Oklahoma State Medical Association
Oregon Medical Association
Pennsylvania Medical Society
Rhode Island Medical Society
South Carolina Medical Association
South Dakota State Medical Association
Tennessee Medical Association
Texas Medical Association
Utah Medical Association
Vermont Medical Society
Medical Society of Virginia
Washington State Medical Association
West Virginia State Medical Association
Wisconsin Medical Society
Wyoming Medical Society