U.S. Senator Maria Cantwell

Floor Speech on WISeR Model

July 16, 2026

Sen. Cantwell Floor Speech

[VIDEO]

Sen. Cantwell: Mr. President, today we are faced with a critical choice here in the United States Senate [and] across the country about the future of traditional Medicare. We had an opportunity to protect Medicare, the thing that seniors care about most, and they wanted to hear from us that we were going to do that. I'm not sure that's what just transpired.

People don't want to have corporations or insurance companies tell them about traditional Medicare. They want that relationship to be about the doctor-patient relationship. If you're on [traditional] Medicare, you go to your doctor, you ask him what he thinks should be done, and he basically tells you, and then you receive your Medicare treatment.

Well, Medicare is a promise, and that promise is made when we pay into that as taxpayers, and we expect to get the care that we need. But in this case, there are those in the Trump administration who are trying to change that obligation.

Instead of having your doctor tell you what you need, they are trying to push an AI-driven software program that will tell you in advance [that] you don't even get that treatment. So instead of relying on your doctor's advice, instead they are telling you [that] you do not get what the doctor ordered.

This is very troubling because this might be the way private insurance works, and many Americans know what it's like to be on the phone with an insurance company telling you they are going to deny your benefits, but they certainly don't [expect], for traditional Medicare, [to have] an AI app telling you in advance [that] you don't even get the Medicare that you've paid into.

More than 700,000 Washingtonians and 28 million Americans have chosen the [traditional] Medicare program because they want their healthcare decisions made by their doctor. If they don't, you can choose Medicare Advantage. Medicare Advantage is different.

But on January 1 of this year, the Centers for Medicare and Medicaid Services launched an application driven by AI, euphemistically called the Wasteful and Inappropriate Service Reduction Model, known as WISeR.

WISeR is an AI-driven prior authorization program being piloted in six states: Arizona, New Jersey, Ohio, Oklahoma, Texas, and in my home state of Washington. This model inserts a black box computer algorithm into the decisions that should be made by a physician and the patient. It puts a layer of bureaucracy between seniors and the care their doctors have recommended.

In April, with the help of the Washington State Hospital Association, my office released a report examining the impacts of this application on seniors in my state. What we found was deeply troubling.

Washington's patients are waiting up to four times longer to complete procedures covered by this model. Procedures that took approximately two weeks to get taken care of are now taking months.

In Washington alone, more than 18,600 people receive services now subject to WISeR [in 2024], and [the total] people in the nation [receiving services covered by WISeR was] about 1.1 million. That is 1.1 million people who could face delays or denials for care.

Michael Edgerly is a 78-year-old from Cle Elum, Washington, who spent 22 years serving his community as a mail carrier. He left his job with scoliosis and degenerative joint disease. His neurosurgeon recommended a non-opioid – a non-opioid treatment; an epidural steroid injection to manage this serious and severe chronic pain.

But what did the AI app WISeR tell him? Nope, system delayed. He went on for weeks and weeks, living in constant pain which, if he was talking to a doctor, would have just said, "I approve this treatment." But no, he was forced into an AI app approval process that took longer and longer and longer to get his coverage.

Another constituent, Keith Magnuson of Seattle, used to be an extremely active man who could regularly walk six miles a day. Now, because of lumbar spinal stenosis, he can barely walk 100 yards without severe pain.

His doctor recommended a minimally invasive procedure called MILD, which is commonly used for conditions covered by Medicare. But again, the WISeR model [delayed] his treatment and said it was denied. As a result, this once-active man had to significantly scale back even his daily life, all because of an AI model telling him he was denied [treatment].

Michael and Keith are not isolated cases. At the University of Washington Medical Center alone, our report found that more than 100 patients were waiting for similar approvals. What makes this even more concerning is that many of the procedures included in the WISeR model are non-opioid pain treatments.

We are trying to get [people] off of opioids, not prescribe them, [and] there are alternatives, but this AI model for Medicare – even though your doctor might have said otherwise, "Go ahead and do it" – is now denying you or taking weeks and weeks and weeks and weeks to give you the approval [for treatment].

These treatments provide patients with critical alternatives to addictive medicines, and we need to continue to get them to our constituents. And at a time when our country continues to face an opioid crisis with more than 50,000 overdose deaths annually, we should be making it easier for patients to access these non-opioid treatments.

And we should not enable a system where contractors have financial incentives to delay or deny care. That is not efficiency. These concerns are not just coming from me; they are coming from seniors, physicians, and healthcare organizations.

Organizations like [the American Association of Retired People] (AARP} and the American Medical Association have warned that the impact of this program on aging Americans is real. I'm hearing every day from patients in my state, including the two I mentioned, who have been negatively impacted by this WISeR model.

I brought this up at an important Senate Finance Committee with Secretary [Kennedy] of [Health and Human Services] (HHS), and [I] have said this has to stop.

I do believe AI has enormous potential to improve healthcare and healthcare research. I do think it's going to help us find some new things, but technology should not be us[ed] today on programs that are guaranteed for our citizens. Now [treatments are being] interrupted and delayed by an AI model instead of allowing [patients] to talk to their doctor.

Again, private insurance can [currently] do whatever it wants [on this issue]. Medicare Advantage can [currently] do whatever it wants [too], but traditional Medicare should not be subject to an AI model denying people things that the doctor wants to order.

There's nothing, in my mind, innovative about using a computer to tell a senior they can't get the care that their doctor prescribed. Unfortunately, this model is now, in six states, being tested, but the administration has made it clear it expects to expand this [program] nationwide.

So, if you don't represent a state where it's being deployed, I encourage you to get up to speed on this. The Senate, in this last vote, just had a chance to stop it, but we didn't.

I'm asking my colleagues to please get educated on how devastating this can be for individual lives, and ask yourselves if you believe in traditional Medicare and the doctor-patient relationship. If you do, I guarantee you, we will force this administration to stop using this AI tool to deny care for our seniors. I thank the president and I yield the floor.