

**U.S. Senator Maria Cantwell**

**Finance Committee Hearing on the President's Budget Request**

**April 22, 2026**

**Sen. Cantwell Q&A with Sec. Kennedy**

**[VIDEO]**

**Sen. Cantwell:** Thank you, Secretary Kennedy, thank you for your very long statement that's in the book — you covered a lot. I think it was 10 or 11 pages. I don't think secretaries usually show up covering 11 pages of material in their written testimony.

So, I wanted to ask a couple — I have three subjects that I want to go over, if I could. One...

**Sec. Kennedy:** Are you being sarcastic?

**Sen. Cantwell:** No, no, no, no, no. Ernie Moniz once said, I read the four-year Quadrennial Energy Report for our nation, and he thought that was crazy. But you know, when somebody spends — I think he probably took him two years to write what was our four-year energy outlook — somebody needs to read it.

So, I actually think you covered a lot of subjects there. So, I wanted to ask about that, because I have priorities that I wanted to cover, and see if we could get your commitments on them.

One, you talked a lot about Indian health care, which I appreciated. I've met with several tribes. One issue is that we don't have — for urban you know, IHS does their thing. You've addressed trying to fix that, but Indian urban health needs the full FMAP funding.

We got a fix, myself and Senator Murkowski, but it only lasted for two years. And so, we would like to see Urban Indian Health get the full federal medical assistance for the Indian health care programs. And would you work with us on that?

**Sec. Kennedy:** Absolutely and enthusiastically.

**Sen. Cantwell:** Okay, great. Second issue...

**Sec. Kennedy:** And you can call me directly on that

**Sen. Cantwell:** Great. So appreciate that. This is a really big issue people don't understand, but we have 150,000 American Indians and Alaska Natives that live in urban areas like Seattle, and so when they only get half the money for the care that everybody else gets, it creates a disparity in actually being able to deliver that care.

Okay, second issue is in the cuts to Head Start — in the cuts to the administrative issues [for] Head Starts and not putting out the new RFP — [request] for proposals — in Walla Walla, which is, yes, a real place. They may have to shut down their whole head start program.

So, are you going to put out requests for proposals for funding for Head Start?

**Sec. Kennedy:** Requests for proposal for Head Start... We, you know...

**Sen. Cantwell:** There's been some administrative cuts, and so one of the things they haven't put out are these RFPs that allow programs to actually apply for those federal dollars and then be able to keep their program open. I think what I should do is send you a letter on this.

**Sec. Kennedy:** I mean, you know, I'm very committed to Head Start. My family started a Head Start. I just, we protected it in the budget. I just put \$62 million extra into it so that they can do good nutrition. I'm happy to work with you to make sure –

**Sen. Cantwell:** I think this is an area where we might say, yes, Secretary, would you call the [program] administrator in Walla Walla, Washington.

**Sec. Kennedy:** I'm happy to do that.

**Sen. Cantwell:** Thank you. The big question I wanted to ask about is this issue of WISeR. I don't know if you've heard about this, and you mentioned briefly in your testimony the coverage of modernization of CMS [using] technology.

The concern that I wanted to try to address today is something that's been raised in our newspaper in Seattle. We obviously know a lot about AI because we have a big AI community, but what's happening is AI is being used as a denial device for the CMS system.

And it's apparently had some problems where it's not taking a few days to find out whether you're going to get covered or not. It's basically taking weeks to find out that you're denied on things that never were a prior denial before.

This is a gentleman who had some back issues and wanted to get what would have been, under Medicare, an approved [procedure recommended] by his doctor, whether he could have that steroid or whatever care he could get.

Now he's under this WISeR application process which can just turn down and deny [claims], so we have hospitals calling me about this, I have doctors calling me about this, I have patients calling me about this. So, I would appreciate if you take a look at it.

**Sec. Kennedy:** Okay, first of all, that kind of delay is unacceptable, and we will work with you on it. The WISeR model – you know, we do only 5% prior authorization across Medicare and Medicaid.

But we found we were being ripped off by a certain categories of procedures that are not good for the patient, and a lot of time, they're unnecessary, and they're very lucrative for the doctors. Skin substitutes went, in three years, from being \$250 million to \$23 billion.

The spinal surgery, certain kind of spinal surgeries, which is maybe the one he's in, and then knee arthroscopic surgeries: so the AI targets those, and I don't know what happens then, but anyway, it shouldn't be delayed, and we will try to work with you to fix it.

**Sen. Cantwell:** I just want to bring up my last point, because I know my time is almost expired, but this is exactly the point: somebody might add a bright idea. I think AI should be used for advancing research and finding things that might take us years to figure out and find them out in months instead.

But to use AI as an a tool that might deny people and then cut them off of Medicare when this part of Medicare was never [requiring] a [prior authorization], is making me anxious that somebody really does

think that AI should be used to judge our Medicare services, and so it makes me anxious, so I appreciate you saying you...

**Sec. Kennedy:** It's supposed to allow us to detect fraud early. There's probably kinks in the system. I will work with you to try to straighten that out.

**Sen. Cantwell:** Great.

**Sec. Kennedy:** But as I said, we were getting ripped off for \$23 billion just by one category of procedure.

**Sen. Cantwell:** I don't want Mr. Magnuson, who I showed, to be ripped off, though, and I think that's – the scary thing about AI is that if we really think we're going to put AI in charge of deciding [medical care] instead of doctors, I think we're going to have some real problems.

And also, what do you think about the transparency on this? Because if you created that [AI] model or that app, or I think here is a third party, what is the transparency that we all have about how that app works?

**Sec. Kennedy:** It's supposed to have a human supervisor, so the human, when prior authorization is denied, there's supposed to be a human being who checks that off and that the AI just identifies at the outset.

**Sen. Cantwell:** We want to know before, so that we're not – I hear what you're saying. So, thank you, Mr. Chair.