



**EXECUTIVE OFFICE OF THE PRESIDENT
OFFICE OF MANAGEMENT AND BUDGET
WASHINGTON, D.C. 20503**

July 16, 2026
(Senate)

STATEMENT OF ADMINISTRATION POLICY

S.J. Res. 198 – Providing for Congressional Disapproval of the Rule Submitted by the Centers for Medicare & Medicaid Services of the Department of Health and Human Services relating to "Medicare Program; Implementation of Prior Authorization for Select Services for the Wasteful and Inappropriate Services Reduction (WISeR) Model"

(Sen. Wyden, D-OR, and 21 cosponsors)

The Administration strongly opposes passage of S.J. Res. 198, which would disapprove a model recently announced by the Department of Health and Human Services and would increase Medicare fraud, waste, abuse, and improper payments.

Wasteful medical care spending accounts for at least 25 percent of total health care spending in the United States. The Medicare program is particularly vulnerable to fraud, and for decades Medicare fraud has drained billions from American seniors and subjected them to inappropriate, unnecessary, and at times harmful treatment.

Certain items and services in the Medicare program have been particularly susceptible to fraud, waste, and abuse. Through the Wasteful and Inappropriate Services Reduction (WISeR) model, the Trump Administration is conducting a limited test program that carefully targets a series of items and services where historically, as much as \$1.8 billion out of the \$3 billion, approximately two-thirds, of what was spent by Medicare may have been fraudulent, wasteful, or abused. This program leverages Artificial Intelligence and Machine Learning to facilitate a timely process, and includes important safeguards such as human clinical review, to ensure appropriate Medicare payment for certain services.

The Trump Administration has declared a comprehensive War on Fraud to end taxpayer-funded corruption and ensure taxpayer resources are going to providing seniors world class healthcare. Through the WISeR model, the Trump Administration empowers patients to partner with their health care providers on the most clinically appropriate care plan; protects seniors and taxpayers by decreasing fraud, waste, and abuse; and focuses providers on care that has the most impact on the well-being of individuals on Medicare. A vote for S.J. Res. 198 is a vote to impede this critical progress and further perpetuate fraud, waste, and abuse in Medicare.

If S.J. Res. 198 were presented to the President, his advisors would recommend that he veto it.

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