

August 10, 2026

The Honorable Neal Dunn
466 Cannon House Office Building
Washington, D.C., 20515

The Honorable Nanette Barragán
2312 Rayburn House Office Building
Washington, D.C., 20515

The Honorable Claudia Tenney
2230 Rayburn House Office Building
Washington, D.C., 20515

Representative Dunn, Representative Barragán, and Representative Tenney:

We're writing to thank you for your leadership in introducing H.R. 8500, the *Timely Access to Coverage Decisions Act of 2026*. This legislation would help to ensure that patients have access to medically necessary items and services by making the local coverage determination (LCD) process more predictable and meaningful by providing an open, transparent process and improving the Centers for Medicare and Medicaid Services (CMS) oversight of Medicare Administrative Contractors (MACs) coverage policies.

Medicare coverage policy decisions are made nationally and locally. At the local level, LCDs are developed by MACs who determine whether, and under what circumstances, to cover a particular item or service on a contractor-wide basis.

As a result of contracting reforms that have taken place over the years, MACs are responsible for much larger jurisdictions, often with fewer opportunities for stakeholders to interact with the contractor medical directors who make local medical policies. Additionally, while CMS released revisions in 2018 to Medicare's Program Integrity Manual (PIM), which outlines the rules governing the development of LCDs, the process continues to lack transparency and sufficient stakeholder involvement to ensure that decisions are made in the best interests of patients. Codifying key elements of the PIM would strengthen CMS oversight of the LCD process and help ensure greater transparency, consistency, and accountability across MAC jurisdictions.

Considering these challenges, it is imperative to ensure that timely coverage decisions are made by qualified health experts through a transparent process that is based on sound medical evidence. That is why H.R. 8500 is so important. This bill would require Medicare contractors to establish a timely and open process for developing LCDs that includes defined timelines for both initial LCD requests and formal reconsideration, and open public meetings with an agenda provided 14 days in advance. The *Timely Access to Coverage Decisions Act* would also require that the LCD development process include input by physicians, patient representatives, and industry stakeholders, and a posting of the record of such meetings within 14 days. The MAC would also have to post a record of the open public meeting prior to the end of the comment period, so the public has access to this information. Additionally, to safeguard against procedural and evidentiary errors, stakeholders would have the option to appeal a final LCD to CMS after exhausting a review by the MAC. Finally, the legislation would require the final LCD to be a logical outgrowth of the initial draft LCD.

The undersigned organizations appreciate your leadership and support for this critical legislation in order to ensure patient access to care through a more transparent and accountable process for LCDs.

Sincerely,

AdvaMed

Alliance for Wound Care Stakeholders

American Academy of Neurology

American Association of Clinical Urology

American Academy of Ophthalmology

American Association of Oral and Maxillofacial Surgeons

American Clinical Laboratory Association

American College of Emergency Physicians

American College of Physicians

American College of Radiology

American College of Obstetricians & Gynecologists

American Medical Association

American Occupational Therapy Association

American Podiatric Medical Association

American Society for Clinical Pathology

Association for Clinical Oncology

Association for Diagnostics and Laboratory Medicine

Association for Molecular Pathology

Castle Biosciences

College of American Pathologists

Congress of Neurological Surgeons

National Independent Laboratory Association

New Jersey Association of Mental Health & Addiction Agencies

New York Clinical Laboratory Association

Point of Care Testing Association

Society for Cardiovascular Angiography and Interventions

Society for Vascular Surgery

Arizona Society of Pathologists

Arkansas Society of Pathologists

Connecticut Society of Pathologists

Illinois Society of Pathologists

Kentucky Society of Pathologists

Michigan Society of Pathologists

Missouri Society of Pathologists

North Carolina Society of Pathologists

Oklahoma Society of Pathologists