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United States Senate

SPECIAL COMMITTEE ON AGING

WASHINGTON, DC 20510-6400

(202) 224-5364

April 16, 2025

The Honorable Mehmet Oz, M.D.
Administrator
Centers for Medicare & Medicaid Services
200 Independence Ave., S.W.
Washington, D.C. 20001

Dear Administrator Oz:

Congratulations on your recent confirmation and swearing-in as Administrator. I look forward to collaborating with you to ensure that the Medicaid program remains strong and able to serve our most vulnerable populations while reducing waste, fraud, and abuse within the program. While Medicaid is administered by the states, protecting the Medicaid program requires strict oversight from the Centers for Medicare & Medicaid Services (CMS) to ensure total accountability and the responsible use of every taxpayer dollar. I write today to request information for the Committee on what actions your office is taking to ensure the long-term health of the Medicaid program and deliver accountability to American taxpayers through eligibility verification efforts.

Since its inception in 1965, the Medicaid program has served a vital purpose in providing health coverage to low-income Americans. While Medicaid is administered by the states and, therefore, functions differently across the nation, a common goal of the states, Congress, and CMS must be to ensure that 100% of the individuals receiving Medicaid benefits are eligible beneficiaries. Providing benefits to individuals who are not eligible for Medicaid coverage threatens the integrity of the program to serve those truly in need and results in a needless and unacceptable waste of taxpayer dollars.

I am encouraged by the work that the Trump administration is doing to eliminate waste, fraud, and abuse across the federal government and look forward to your leadership at CMS to continue this work. I believe that better enforcement of eligibility verification in the Medicaid program is a necessary step that complements this work, protects the program, and prevents waste, fraud and improper payments.

As Chairman of the U.S. Senate Special Committee on Aging, I am eager to support you and CMS in this work, and I ask that you answer the following questions:

The Honorable Mehmet Oz, M.D.

April 16, 2025

Page Two

1. Did the Biden administration issue rules that made it harder for states to perform eligibility checks?
2. What action is CMS taking to prevent ineligible beneficiaries from enrolling in Medicaid and address current ineligible enrollees?
3. What action has CMS taken to incentivize states to increase and report anti-fraud and eligibility verification activity?
4. What success has CMS had in the past with efforts to eliminate inaccuracy among Medicaid eligibility?
5. How does CMS collaborate with states to validate birth and death records?
6. How is CMS working to identify efficiencies and lower administrative costs?
7. Do the state Medicaid Recovery Audit Contractors (RACs) and the Unified Program Integrity Contractors (UPIC) have the ability to review ineligible enrollment?
8. Do Medicaid Managed Care Organizations (MCOs) have the ability to review ineligible enrollees?

It is essential that CMS take aggressive action to stop waste, fraud, and abuse and make it a priority to clearly communicate the scope and success of this critical work for the hardworking American people who fund these programs and the vital benefits they provide to our citizens.

I look forward to your prompt response and working together to protect and preserve Medicaid benefits for beneficiaries.

Sincerely,

A handwritten signature in blue ink, appearing to read "Rick Scott". The signature is stylized with a large initial "R" and a prominent "S".

Rick Scott

Chairman

Senate Special Committee on Aging