

ADVANCE PREVENTION AND EARLY DETECTION FOR WOMEN

THE ISSUE:

Cardiovascular disease remains the leading cause of death among women in the U.S., yet too many women, especially those who are low-income, uninsured or underinsured, lack access to timely cardiovascular risk screening and preventive services. The U.S.

Centers for Disease Control and Prevention's (CDC's) WISEWOMAN program helps address this gap by providing cardiovascular risk screenings and lifestyle support to women ages 35-64. However, current eligibility and referral requirements limit participation, and the program operates in only a small number of states and tribal organizations, leaving many at-risk women without access. These barriers can delay early detection and management of cardiovascular risk factors, increasing the likelihood of heart attack, stroke and other preventable cardiovascular complications.

ACC'S POSITION:

The ACC urges Congress to support the bipartisan **Women's Heart Health Expansion Act** (H.R. 7417/S. 3944) to strengthen access to cardiovascular screening and preventive services for women. The legislation would provide \$250 million over five years to reauthorize and expand the WISEWOMAN program, enabling broader health care provider participation nationwide and giving states and tribal organizations greater flexibility to establish referral pathways. Expanding this program would help more women identify and manage cardiovascular risk factors earlier, reduce disparities in care access, and ultimately decrease preventable heart disease morbidity and mortality.

ACC'S ASK:

Cosponsor and support the **Women's Heart Health Expansion Act** (H.R. 7417/S. 3944), introduced by **Sens. Angela Alsobrooks (D-MD)** and **Katie Britt (R-AL)** in the U.S. Senate and **Reps. Joyce Beatty (D-OH)** and **Christopher Smith (R-NJ)** in the U.S. House.

KEY TAKEAWAYS



Cardiovascular disease is the leading cause of death among women in the U.S., yet more than half of American women do not recognize heart disease as their leading health threat.



According to the CDC, 43.5% of WISEWOMAN participants with known hypertension achieved or are maintaining blood pressure control through Year 2.



Recent ACC guidelines on high blood pressure, dyslipidemia and cardiovascular-kidney-metabolic syndrome emphasize early risk identification and personalized risk assessment to improve women's heart health. **Scan the QR code** for more.



The bill authorizes \$250 million over five years to expand the WISEWOMAN program nationwide, increasing state and tribal participation and broadening provider eligibility through more flexible referral requirements.



STREAMLINE PRIOR AUTHORIZATION PRACTICES

THE ISSUE:

Prior authorization (PA), a tool health plans use to control costs by requiring approval of testing, treatment and medications, can lead to delays and abandonment in patient care, which contribute significantly to clinician burnout. This administrative red tape, often seen as a barrier to providing efficient and effective care, further overwhelms clinicians amid a growing health care workforce shortage. The ACC has long advocated for streamlining and modernizing the PA process to reduce delays for patients and unnecessary workload for clinicians.

ACC'S POSITION:

The ACC applauds the Centers for Medicare and Medicaid Services (CMS) for implementing the Interoperability and Prior Authorization Rule in 2024, which mandates the use of electronic PA, increases transparency, tightens response timelines, and creates a pathway for CMS to institute real-time decision-making for routinely approved services in the future. As a next step, Congress can codify this rule through the passage of the **Improving Seniors' Timely Access to Care Act** (H.R. 3514/S. 1816). The bill has secured majority bipartisan cosponsorship in both chambers and has successfully advanced through the U.S. House Energy & Commerce and Ways & Means committees.

ACC'S ASK:

Cosponsor and support the **Improving Seniors' Timely Access to Care Act** (H.R. 3514/S. 1816), introduced by **Reps. Mike Kelly (R-PA), Suzan DelBene (D-WA), Ami Bera, MD, (D-CA), and John Joyce, MD, (R-PA)** in the U.S. House and **Sens. Roger Marshall, MD, (R-KS) and Mark Warner (D-VA)** in the U.S. Senate. If already a cosponsor, encourage House and Senate leadership to bring the bill to the floor for a vote.

KEY TAKEAWAYS



88% of physicians reported to the American Medical Association that the administrative burden associated with PA as high or extremely high, and 70% of patients report that PA creates barriers to care.



A recent report from the Kaiser Family Foundation (KFF) found that Medicare Advantage plans ultimately approve 67% of requests that were originally denied.



KFF also found that 47% of Medicaid managed care and 43% of **Affordable Care Act** marketplace claims denials are overturned on appeal.



The **Improving Seniors' Timely Access to Care Act** is designed to have a low Congressional Budget Office score.



More than 300 organizations representing patients, health care providers, health plans, and others endorse the legislation.