

# Guest Column: Medicare Advantage growth spurs questions, concerns

PUBLISHED SEPTEMBER 22, 2025 BY HELEN DWIGHT, HUNTER HALL



*Helen Dwight (left) is senior director of health policy with The Picard Group, while Hunter Hall is a partner with the firm. (Photos by The Picard Group)*

Medicare Advantage began as a relatively small alternative to traditional fee-for-service Medicare, offering seniors coverage through privatized Medicare plans, but its rapid enrollment growth is reshaping the healthcare landscape in Louisiana and across the country. As participation in MA grows, policymakers are discussing reforms to ensure the program functions as intended for both beneficiaries and providers.

Since its introduction, MA plans have been promoted to seniors as providing access to broader benefits than traditional Medicare coverage. However, many providers share that care for MA beneficiaries has been hindered by excessive prior authorization requirements, as well as varying differences in coverage criteria. These increased administrative burdens can cause delays in care and or a lack of coverage for beneficiaries needing specialized care.

In Louisiana, hospitals and other providers have voiced concerns over the discrepancy in benefits between traditional Medicare and MA. Differences in how care is approved and reimbursed under MA compared to traditional Medicare impact how quickly patients are treated and how smoothly providers can deliver services. As enrollment grows, these issues take on greater significance.

To address these concerns, lawmakers on Capitol Hill are considering various approaches to strengthen program oversight. A recent proposal would impose penalties on MA plans that fail to pay in-network claims on time. Another would close loopholes that allow overpayments to plans without corresponding increases in patient care needs.

In July, the House Committee on Ways and Means held a hearing to examine how MA functions in practice, underscoring bipartisan interest in ensuring accountability as enrollment grows.

In the executive branch, the Centers for Medicare & Medicaid Services has signaled that additional administrative action may be on the horizon, including changes designed to improve transparency and ensure plans are meeting coverage obligations. This follows rules released by CMS in 2023 and 2024 that cracked down on misleading advertising and curbed tactics that incentivized agents and brokers to steer beneficiaries into MA plans.

The increase in enrollment presents both opportunity and responsibility. Expanding coverage through MA offers real benefits for Louisiana beneficiaries, but it is also a timely moment to reevaluate program rules and ensure appropriate guardrails are in place. From payment timeliness to prior authorization standards and coverage criteria, accountability measures will be central to ensuring the program evolves in a way that supports patients, providers and the broader healthcare system.

At the policy level, the current focus is less about limiting growth and more about ensuring that growth is managed responsibly. This balance between flexibility and accountability will likely remain at the center of the Medicare Advantage conversation in the months ahead.

The Picard Group has been tracking the increasing challenges facing providers and MA beneficiaries. Our team will continue to work with the delegation and key leaders in Washington to ensure that Medicare Advantage lives up to its promise.

Helen Dwight is senior director of health policy with The Picard Group, a federal, state and local governmental affairs and business consulting firm with offices in Louisiana and Washington, D.C., while Hunter Hall is a partner with the firm.

Would you, your client or someone in your organization like to write a guest column

---

for Beltway Beat? Email David Jacobs at [djacobs@stateaffairs.com](mailto:djacobs@stateaffairs.com) and make your pitch!