



NAPT Advocacy Report: 1H 2026

On The Hill

In April, NAPT met with key Congressional offices and committee staff to advocate for policies that protect and expand access to proton therapy. Discussions focused on improving reimbursement, with an emphasis on the benefits of therapy for complex cases and the growing evidence base supporting its use, such as in the treatment of head and neck cancer, which follows a recent [publication](#) of a Phase III trial in the Lancet.

Reimbursement

CY 2027 Medicare Payment Rules

The Centers for Medicare & Medicaid Services (CMS) recently released CY 2027 Medicare Physician Fee Schedule (MPFS) and Hospital Outpatient Prospective Payment System (OPPS) Proposed Rules impacting payment rates and policies for various healthcare services. NAPT reviewed these rules to assess their implications for proton therapy coverage and reimbursement.

In the CY 2027 OPPS Proposed Rule, codes that map to APC 5625 (Level 5 Radiation Therapy procedures) (i.e., 77522, 77523, and 77525) have a **proposed 12.3% increase**, with final payment rates for hospitals expected in November 2026 for an effective date of January 12, 2027. This proposed increase is likely due to CMS' proposal to reduce payments for 340B-acquired drugs. Radiation oncology services, including proton therapy, are largely non-drug services and therefore benefit from the budget-neutral redistribution of those funds. NAPT has also educated hospital-based members on the importance of accurate charge capture and cost reporting.

In the CY 2027 MPFS Proposed Rule, CMS **proposed establishing national pricing for proton therapy in the freestanding setting**. While NAPT has long advocated for a transparent, nationally consistent payment methodology, we have consistently maintained that reimbursement for proton therapy—regardless of site of service—must appropriately reflect the unique costs of delivering this highly specialized treatment. NAPT is concerned that the proposed national pricing methodology significantly undervalues the specialized equipment, highly complex case mix, increased staffing requirements, and extensive clinical resources required to deliver proton therapy and support ongoing clinical research. This



proposal raises concerns for the entire proton therapy community because undervaluing this technology in any setting ultimately threatens long-term patient access and continued innovation. NAPT reinforces our position from our [September 2025 comments](#) on the CY 2026 MPFS Proposed Rule, that national pricing must “appropriately value the reasonable costs for delivering this critical service to certain Medicare beneficiaries fighting cancer given the unique circumstances of each respective geographic market.”

Please see the links below for full text.

- OPPTS Proposed Rule [text](#)
- MPFS Proposed Rule [text](#)

As we have done in years past, NAPT will be submitting official comments to CMS by the September deadline. We will continue to engage with CMS for fair and supportive payment structures.

Protecting Payment for Image Guidance

NAPT monitors and engages with Medicare Administrative Contractors (MACs) to ensure fair and sustainable reimbursement for proton therapy and coverage guidelines. As MACs historically have played a critical role in setting regional payment rates and Local Coverage Determinations (LCD), we have engaged with key decision-makers to address concerns over rate variability that could negatively impact reimbursement and restrictive coverage guidelines that limit patient access to proton therapy. During the CY 2026 Medicare rulemaking process, NAPT advocated for payment policies that recognized the loss of standalone imaging reimbursement resulting from CMS' decision to bundle key IGRT codes into photon treatment delivery codes. Earlier this year, NAPT engaged directly with select MACs and federal policymakers to help ensure proton therapy payment rates more accurately reflected these changes, contributing to average 2026 reimbursement rates for freestanding proton centers that were approximately 10–20% higher than the previous year. By providing data-driven insights and working alongside our members, NAPT continues to advocate for payment structures that accurately reflect the costs of delivering high-quality proton therapy.

[Labor-HHS-Education Appropriations Bill](#)

This summer, the full House Appropriations Committee approved its version of the FY 2027 Labor-HHS-Education appropriations bill, which funds programs through the Department of



Health and Human Services (HHS), including CMS. NAPT was once again successful in having language included in the Committee's [explanatory report](#) accompanying the bill encouraging Congress to work with stakeholders to ensure any future radiation oncology payment reform does not negatively impact patient access to innovative technologies. This is part of NAPT's continued campaign to ensure Congress demonstrates support for innovative therapies like proton therapy through a variety of policy platforms.

Federal Legislation

Radiation Oncology Case Rate (ROCR) Act

The Radiation Oncology Case Rate (ROCR) Act ([S.1031](#) / [H.R.2120](#)) was reintroduced in March 2025 in an effort to establish a radiation oncology case rate value-based payment program where per-episode payments are made to radiation therapy providers for treating Medicare Part B beneficiaries with one of 15 specified cancer types.

NAPT worked closely with the American Society for Radiation Oncology (ASTRO) and Senator Thom Tillis' office to modify the legislation to delay inclusion of proton therapy in ROCR's current form for 12 years and will continue to advocate for a tiered model to ensure proton therapy reimbursement is not the same as other modalities.

Learn more on ROCR [here](#).

Prior Authorization

Improving Seniors' Timely Access to Care Act

As a member of the Regulatory Relief Coalition (RRC), NAPT continues to support the *Improving Seniors' Timely Access to Care Act* ([S. 1816](#) / [H.R. 3514](#)), which seeks to streamline and modernize the prior authorization process for Medicare Advantage plans. In July, the bipartisan bill unanimously passed both the House Committee on Energy and Commerce and the House Committee on Ways and Means.

Download a fact sheet and find other information [here](#).

WISer Model Faces Congressional Opposition



The House Appropriations Committee has once again approved language in its Fiscal Year 2027 Labor-HHS spending bill that would prohibit CMS from using appropriated funds to implement the WISeR (Wasteful and Inappropriate Service Reduction) model or similar prior authorization efforts in traditional Medicare. The bipartisan provision reflects ongoing congressional concerns that the model could create delays and administrative burdens for patients and providers. Lawmakers also directed CMS to report on WISeR's impact on patient access, care delivery, and state selection criteria, as opposition to the demonstration continues to grow in both the House and Senate. This signals that Congress is aware of and listening to patients' and providers' concerns on prior authorization.

HERI Grants

NAPT recently completed the final funding disbursements for its current cycle of Health Economics and Research Initiative (HERI) grants. This round of funding supported studies led by Steven Frank, MD, and Brian Baumann, MD, advancing research on the clinical, economic, and comparative effectiveness of proton therapy. We look forward to the valuable publications on these projects that will contribute to the growing evidence base for proton therapy.

Member Updates

- Researchers with **Penn Medicine** and corporate member **IBA** are contributing expertise in Proton FLASH radiotherapy and advanced proton therapy technologies as part of the groundbreaking Advanced Research Projects Agency for Health (ARPA-H) initiative, [1-CURE](#), designed to improve radiotherapy treatment effectiveness while reducing side effects.
- Corporate member **Mevion Medical Systems** welcomed representatives from NAPT and members of U.S. Congress to a tour of their headquarters and a discussion which focused on proton therapy access and the policy considerations that influence patient access to care across Massachusetts and the United States.



Excellence Awards

Each year, NAPT honors individuals who have made outstanding contributions to advancing proton therapy through the Champion Award and Patient Advocate Award.

- **Champion Award, 2026 Recipient: U.S. Representative Diana Harshbarger**, Tennessee-01, helped lead our efforts in Congress to protect fair reimbursement and enhance access to proton therapy for patients.
- **Patient Advocate Award, 2026 Recipient: Grace Eline**, a childhood cancer survivor, has become a passionate advocate for children and families facing pediatric cancer, raising awareness about the importance of advanced treatments like proton therapy through the “With Grace” Foundation.

Read more on the Excellence Awards [here](#).