

The Honorable Chairman Susan Collins

Senate Committee on Appropriations
Room S-128, The Capitol
Washington, DC 20510

The Honorable Chairman Tom Cole

House Committee on Appropriations
H-307, The Capitol
Washington, DC 20515

The Honorable Ranking Member Patty Murray

Senate Committee on Appropriations
Room S-128, The Capitol
Washington, DC 20510

The Honorable Ranking Member Rosa DeLauro

House Committee on Appropriations
H-307, The Capitol
Washington, DC 20515

Dear XXX,

On behalf of the undersigned organizations, we strongly urge you to direct the Centers for Medicare and Medicaid Services (CMS) to remove administrative barriers to beneficiaries accessing pharmacist services in Medicare Advantage (MA). We ask that the Appropriations Committees include report language in final fiscal year 2027 (FY2027) Labor, Health and Human Services, and Education (Labor/HHS) House and Senate appropriation bills directing CMS to remove these bureaucratic barriers.

While pharmacists are not providers under Medicare Part B, they do meet the definition of a provider under MA. This means they have the opportunity to extend patient access to care to over 35 million MA beneficiaries. The MA statute states that:

Provider means—

(1) Any individual who is engaged in the delivery of health care services in a State and is licensed or certified by the State to engage in that activity in the State; and

(2) Any entity that is engaged in the delivery of health care services in a State and is licensed or certified to deliver those services if such licensing or certification is required by State law or regulation. (42.U.S.C. 422.2)

As such, MA plans may contract with pharmacists to deliver healthcare services to MA beneficiaries, as licensed by their state. Despite this flexibility from MA plans to recognize state licensed providers, there is no clear way for pharmacists to enroll in the Medicare Provider Enrollment, Chain, and Ownership System (PECOS) as a non-physician specialty type. Enrolling in PECOS is required for a pharmacist to receive a Provider Transaction Access Number (PTAN), necessary for internal processing and communication with MA plans.

Pharmacists can and do provide state-authorized patient care services to Medicare beneficiaries participating in MA plans. This care is often disrupted because CMS does not provide a clear mechanism for pharmacists to enroll in PECOS and obtain a PTAN. Pharmacists are not on

the list of eligible professionals or non-physician specialty types for PECOS enrollment. This fails to account for the patient care role that pharmacists play in ambulatory clinical settings and results in care disruptions for MA beneficiaries. Clarifying that CMS should offer a mechanism for pharmacists to enroll in PECOS and obtain a PTAN would make it easier for MA plans to contract with pharmacists to provide services to MA beneficiaries, as allowed by their state license.

The report language that has been submitted to XX offices states:

Removing Administrative Barriers to Accessing Pharmacists Services in Medicare Advantage Plans:

The Committee recognizes that Medicare Advantage (MA) plans may choose to reimburse patient care services provided by state-licensed pharmacists as individuals engaged in the delivery of services as licensed or certified by the state, as allowed under 42 U.S.C. 422.2. The Committee identified that administrative barriers limit the ability of MA plans to successfully contract with pharmacists. The Centers for Medicare and Medicaid Services (CMS) does not provide a clear mechanism for pharmacists to enroll in the Medicare Provider Enrollment, Chain, and Ownership System (PECOS). Enrolling in PECOS is required for a pharmacist to receive a Provider Transaction Access Number (PTAN), necessary for internal processing and communication with Medicare Advantage plans. The Committee strongly urges CMS ensure pharmacists can enroll in PECOS as a non-physician specialty type and provide an administrative mechanism for pharmacists to obtain a PTAN.

We ask for your support to ensure this language is included as report language in the FY2027 Labor/HHS appropriation bills.

Sincerely,

Cc: