



September 4, 2025

The Honorable Robert F. Kennedy, Jr., Secretary  
The Honorable Dr. Mehmet Oz, CMS Administrator  
U.S. Department of Health and Human Services  
The Humphrey Building  
200 Independence Avenue, SW  
Washington, DC 20201

Dear Secretary Kennedy and Administrator Oz,

The American Health Care Association/National Center for Assisted Living (AHCA/NCAL), Argentum and LeadingAge are the leading organizations advocating for long-term care providers in nursing homes, assisted living, and other long-term care settings and senior living communities. Our commitment to high quality and effective care for the older adults we support is paramount to everything we do. Therefore, we wanted to jointly reach out to raise with you **an existential issue related to beneficiary access to long-term care pharmacy services** that we believe will have a significant impact on our member facilities, the older adults we support, and the 24/7 streamlined care that we strive to provide, and to urge you to quickly adopt a solution to the crisis facing long-term care pharmacies.

While we are fully supportive of lowering drug prices for the seniors we support, we have been hearing on a frequent basis the serious challenges that implementation of new drug prices in January 2026 will cause for our long-term care pharmacies. These pharmacies primarily serve Medicare Part D beneficiaries and depend on brand-name drug reimbursement to offset losses on generics—which make up the vast majority of what they dispense—due to the way PBMs structure payments. **The unexpected and unintended consequence of the recent Part D changes to brand-drug reimbursement poses a real threat to both beneficiaries and the facilities in which they reside.**

As background, five million Medicare beneficiaries require long-term care and 25% of them are living in either skilled nursing, nursing homes, intermediate care facilities and assisted living (there are approximately 32,231 assisted living communities and 1.2 million licensed beds in the U.S. today). For facility-based patients, 59% have 4 or more chronic conditions (such as diabetes, heart disease, and Alzheimer's/dementia), 35% have at least one emergency department visit per year, and a vast majority rely on Part D coverage for an average of 10+ prescription drugs.

For decades, **our members have relied on our partnerships with long-term care pharmacies to provide the highest level of medication and pharmacy services for our seniors.** This includes consultant pharmacists that come into our facilities to make sure our patients are on the right drugs and dosage, reviews of their clinical files to reduce prescriptions, specialized packaging and auditing in their pharmacies to ensure medication adherence and accuracy, and managing multiple-day deliveries to our provider communities sometimes many hours away. Not only are these essential services for our patients, but in fact, for skilled nursing and nursing homes these services are required by federal law.

**We cannot risk our long-term care pharmacies failing.** One rural long-term care pharmacy closure could equal dozens of our facilities no longer having access to their pharmacy services. We urge you as leaders of this administration to support long-term care pharmacies on an immediate fix whether administrative or legislative.

We note that CMS has the statutory authority to address this problem through a demonstration project or waiver program, and that Representatives Beth Van Duyne (R-TX), Brad Schneider (D-IL), Buddy Carter (R-GA), Brian Jack (R-GA), Deborah Ross (D-NC), and Sharice Davids (D-KS) recently introduced bipartisan legislation, the *Preserving Patient Access to Long-Term Care Pharmacies Act* ([H.R. 5031](#)), as well. Time is running out and we wanted to ensure you know of our support, our appreciation of their value to our combined memberships, and our shared commitment to uplifting long-term care pharmacy services.

Sincerely,

**American Health Care Association (AHCA), Argentum and LeadingAge**