



Pharmacy Community Stands Together to Protect Seniors and Prevent a Long-Term Care Crisis

The Senior Care Pharmacy Coalition (SCPC), representing the nation's long-term care pharmacies, the American Society of Consultant Pharmacists (ASCP), representing pharmacists and pharmacies dedicated to managing medications for older adults and medically complex patients, and the National Community Pharmacists Association (NCPA), representing community pharmacists nationwide, stand united in support of immediate action—whether through legislation or administrative measures—to protect seniors' access to the pharmacy care they depend on. The organizations strongly support the *Preserving Patient Access to Long-Term Care Pharmacies Act* ([H.R. 5031](#)) as a critical step toward that goal.

Patients in nursing homes, assisted living facilities and other long-term care (LTC) settings are among the nation's most vulnerable. They are typically older adults with multiple chronic illnesses such as dementia, heart failure, or diabetes, and most take more than a dozen medications daily. Many rely on complex dosing schedules, specialty packaging, and clinical monitoring that can only be provided by LTC pharmacies working hand-in-hand with nurses and physicians. When these pharmacies lose the ability to operate sustainably, residents face delayed treatments, medication errors, and potentially life-threatening lapses in care.

While our organizations strongly support efforts to lower drug prices for seniors, Medicare Part D negotiated drug prices taking effect on January 1, 2026 will have devastating unintended consequences for older Americans' access to lifesaving medications. Without a fix, these new policies will disproportionately harm LTC pharmacies, which already face higher dispensing costs due to complex patient needs and stringent regulatory requirements. Existing pharmacy benefit manager dynamics already strain the LTC pharmacy model and adding Medicare negotiated prices could make many operations financially unsustainable. Without timely action, many LTC pharmacies could be forced to close, cutting off access to vital medications and care for residents in LTC facilities, particularly in rural areas.

Introduced by Representatives Beth Van Duyne (R-TX) and Brad Schneider (D-IL), along with original co-sponsors Buddy Carter (R-GA), Brian Jack (R-GA), Deborah Ross (D-NC), and Sharice Davids (D-KS), H.R. 5031 addresses this challenge by establishing a targeted \$30 supplemental supply fee for prescription drugs subject to Medicare-negotiated prices. Modeled after an existing Medicare Part B supply fee, this solution will help offset deep financial losses and ensure LTC pharmacies can continue delivering round-the-clock, specialized care that vulnerable patients rely on.

Together, SCPC, ASCP and NCPA call on Congress and the Administration to act quickly- either through this legislation or by using the statutory authority CMS has through a demonstration project or waiver program—to prevent a crisis in long-term care pharmacy access. Protecting seniors' access to essential pharmacy services and medications cannot wait.