

February 2, 2026

The Honorable Mehmet Oz, M.D.
Administrator, Centers for Medicare & Medicaid Services
Department of Health and Human Services
7500 Security Boulevard, Baltimore, MD 21244

RE: Medicare and Medicaid Programs; Repeal of Minimum Staffing Standards for Long-Term Care Facilities - CMS-3442-IFC

Dear Dr. Oz,

On behalf of the American Society of Consultant Pharmacists (ASCP) and the National Community Pharmacists Association (NCPA), we appreciate the opportunity to submit the following comments in response to the interim final rule that repeals the minimum staffing standards for Long-Term Care (LTC) Facilities.

ASCP is the only international professional society devoted to optimal medication management and improved health outcomes for older adults. ASCP's thousands of pharmacist members manage drug therapies and improve the quality of life of geriatric patients and others living in various settings, including sub-acute and LTC facilities, skilled nursing facilities (SNFs), assisted living communities, psychiatric hospitals, hospice programs, correctional facilities, home and community-based care. Practicing within this variety of settings gives our pharmacist members unique insight into the staffing workload of these facilities.

NCPA represents America's community pharmacists, including 18,900 independent community pharmacies. Over half of all community pharmacies provide long-term care services and play a critical role in ensuring patients have immediate access to medications in both community and long-term care (LTC) settings. Together, our members employ 205,000 individuals, and provide an expanding set of healthcare services to millions of patients every day. Our members are small business owners who are among America's most accessible healthcare providers.

Consultant pharmacists are grateful for the high-quality and high-skill care provided by nurses and nurse aides in LTC settings. Without their hard work and dedication, LTC facilities would not be able to operate, and patients would suffer. We are proud to serve on the care team with these talented, committed professionals.

While we strongly support robust nursing staff within LTC facilities to meet patient care needs, the original rule was simply unworkable under current staffing and reimbursement conditions. External expert analysis and CMS' own assessment determined that most facilities will not be able to meet the standards established in the rule, thus risking continued access to LTC facilities and LTC care, especially in rural communities.

As stated in ASCP's previous comments on this matter, we recommend that CMS re-examine staffing and wage reimbursement levels, as well as sector-specific economic conditions and the nation-wide nursing shortage. At present, CMS correctly assessed that this rule is an unfunded, unenforceable and unworkable mandate. We believe with the right reimbursement incentives for the sector staffing will naturally increase caregiving hours and achieve the same goals of the rule without unfunded mandates.

Beyond this rule, we remind CMS of the vital care that pharmacists play in the delivery of patient care, especially in LTC facilities. CMS has stated that pharmacy staff can assist in providing some of the essential services and resources required to care for the residents in these facilities and we appreciate the agency's effort to ensure reimbursement for these services via "incident to" billing and additional G-codes. Further changes to CMS policies could empower pharmacists further to alleviate the care burden facing many LTC facilities, notably in rural areas.

As always, our member pharmacists and pharmacies stand ready to work with CMS to ensure the highest possible quality care for all older Americans, and especially those residing in LTC facilities. For further questions or follow-up, please contact ASCP's Chief of Policy Jim Lewis at jlewis@ascp.com.

Sincerely,



Chad Worz, PharmD, BCGP, FASCP
Chief Executive

American Society of Consultant Pharmacists



Ronna B. Hauser, PharmD
Senior Vice President, Policy & Pharmacy Affairs
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