

September 15, 2025

The Honorable Mike Johnson
Speaker
U.S. House of Representatives
Washington, D.C. 20515

The Honorable Hakeem Jeffries
Minority Leader
U.S. House of Representatives
Washington, D.C. 20515

The Honorable John Thune
Majority Leader
U.S. Senate
Washington, D.C. 20510

The Honorable Chuck Schumer
Minority Leader
U.S. Senate
Washington, D.C. 20510

Dear Speaker Johnson, Majority Leader Thune, Minority Leader Schumer, and Minority Leader Jeffries:

As Deans of the nation's colleges and schools of pharmacy, we are writing to urge swift action to protect America's seniors and preserve access to essential pharmacist-provided care by passing the *Ensuring Community Access to Pharmacist Services Act (ECAPS)* into law.

America's seniors deserve better than shuttered pharmacies, higher costs, and delayed care. H.R. 3164/S.2426 safeguards their access to frontline pharmacy professionals who are often the only healthcare providers in rural communities. Pharmacists help people live better lives and keep them out of overcrowded, expensive emergency rooms all while strengthening our nation's public health response.

Under ECAPS, pharmacists will be able to continue to provide preventive healthcare services to seniors at a lower cost, reducing unnecessary hospitalizations and state and federal healthcare costs. This fiscally responsible solution strengthens America's healthcare infrastructure and saves taxpayer dollars.

Without ECAPS, many community pharmacies will continue to close, leaving seniors with fewer options and higher hurdles to get the care they need. Seniors will be forced to travel, receive higher cost of care or forgo care altogether leading to greater downstream negative impacts for our patients and worsen our broken healthcare system.

Updated [community pharmacy closure data](#) is available to view in your states and congressional districts. ECAPS is a reimbursement bill and does not supersede state scope of practice laws.

Pharmacists are well-trained and [highly qualified to provide](#) clinical services with a minimum of 6 years of education focusing on pharmacotherapy, medication and disease management, clinical decision-making, patient education, and preventive care. All college and school of pharmacy graduates earn a doctor of pharmacy (PharmD) degree

signifying the complexity and advanced training needed for patient care and medication use and management. All colleges and schools of pharmacy programs are required, by the 2025 Standards for PharmD Program Accreditation from the Accreditation Council for Pharmacy Education (ACPE), to deliver didactic training that includes evidence-based clinical decision making, as well as therapeutic treatment planning which includes diagnosing and prescribing. All student pharmacists are required to complete no less than 1740 hours of patient care experience purposefully integrated into the curriculum which prepares pharmacists for post-graduate training. Many PharmD graduates continue with post-graduate training in one of over 2,300 pharmacy residency programs across the U.S., providing pharmacists with specialized skills in a wide range of areas including ambulatory care, infectious diseases, and psychiatry – all areas where physician shortages make patient access to care challenging. As Doctors of Pharmacy, pharmacists are clinically competent, easily accessible providers available right in the local community.

Inaction is not an option and pharmacists are indispensable, here's why:

- Pharmacists are the most accessible health care provider. Nine in 10 Americans live within 5 miles of a pharmacy, and patients visit their community pharmacist approximately twice as frequently as they visit primary care physicians. Pharmacy locations offer 95.7% more operating hours than physician practice sites.
- Pharmacists keep senior and rural communities healthy. More than half of pharmacists (55%) work in a community-based setting and 77% of community pharmacies serve population areas of 50,000 or fewer.
- Prompt pharmacist care averted 1 million deaths and hundreds of billions in costs. By conservative [estimates](#), the 350 million clinical interventions to approximately 150 million people that pharmacists provided have saved millions of lives and over \$450 billion in healthcare costs. The Congressional Budget Office (CBO) previously scored ECAPS with a range as low as \$2.3 billion over 10 years. This return on investment (ROI) for our states and Medicare seniors is undeniable.

Without action, the population most vulnerable to common respiratory conditions, our nation's seniors, will be left without coverage for services provided by pharmacists on which they have come to rely.

Thank you for your continued support for our nation's pharmacists, educators, student pharmacists, and seniors.

Sincerely,

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