

May 20, 2026

Submitted electronically via Federal eRulemaking Portal: <https://www.regulations.gov>

Joe Massman  
Office of Postsecondary Education  
400 Maryland Avenue SW  
Washington, DC 20202

**RE:** Accountability in Higher Education and Access Through Demand-Driven Workforce Pell: Student Tuition and Transparency System (STATS) and Earnings Accountability [ID ED-2025-OPE-0151]

Dear Mr. Massman:

On behalf of the American Association of Colleges of Pharmacy (AACP), thank you for the opportunity to comment on the Department of Education's proposed rule, *Accountability in Higher Education and Access Through Demand-Driven Workforce Pell: Student Tuition and Transparency System (STATS) and Earnings Accountability*, [ID ED-2025-OPE-0151]. AACP supports the Department's goals of improving transparency, strengthening student decision-making, and ensuring that federal student aid supports programs that provide meaningful educational and economic value. AACP offers these comments to provide additional context on how the proposed earnings accountability framework may operate for Doctor of Pharmacy (Pharm.D.) and related graduate and professional pharmacy programs.

The mission of AACP is to lead and partner with our members in advancing pharmacy education, research, scholarship, practice and service to improve societal health. Our members include the 142 colleges and schools of pharmacy and over 15,000 faculty and staff members, students and administrators. Pharm.D. programs prepare graduates for varied licensure-based career pathways, including postgraduate training, public-service roles, rural and underserved practice, and other positions whose early earnings may not fully reflect long-term professional value or workforce need.

The proposed rule would establish the Student Tuition and Transparency System and an earnings accountability framework for gainful employment programs and eligible non-GE programs, including degree programs offered by public and nonprofit institutions. The Department states that a program would be assessed using an earnings premium measure, and programs that do not satisfy the earnings accountability criteria could face warnings and, after repeated failures, loss of Direct Loan eligibility.<sup>1</sup>

Pharmacy programs are licensure-based health professions programs that prepare graduates for essential roles in medication management, immunization, chronic disease prevention and management, public health, health-system practice, community-based care, research, academia, and service in rural

and underserved communities. Pharmacy programs serve both students, and broader health workforce needs to which the Department should ensure that the final rule measures outcomes accurately and avoids unintended consequences for access to pharmacy education, research, and the pharmacist workforce pipeline.

### **Amending the Earnings Premium Metric**

Accountability measures that aid students in comparing programs and understanding costs, debt, completion, licensure, and employment outcomes are vital. AACP encourages the Department to refine the proposed earnings calculation for graduate and professional health programs. For Pharm.D. programs, early post-completion earnings may be affected by factors that reflect professional training and public need rather than weak program value. These include postgraduate residencies, fellowships, academic and research pathways, public-sector service, rural practice, Indian Health Service, Veterans Health Administration, community health center employment, and other roles that support access to care but may not maximize early-career earnings. This distinction matters because pharmacy is a high-skill, licensed health profession.

The Bureau of Labor Statistics reports that pharmacists need a Doctor of Pharmacy degree and that every state requires pharmacists to be licensed. BLS also reports a May 2024 median annual wage for pharmacists of \$137,480 and projects pharmacist employment to grow 5% from 2024 to 2034, faster than the average for all occupations.<sup>2</sup> A recent national study also finds that pharmacy ranks among the top graduate degrees for lifetime earnings growth and return on investment, reinforcing the strong long-term value of the Pharm.D. degree.<sup>3</sup> Such national data indicate that pharmacy education is both essential for our nation's growth and generally leads to substantial labor-market value. However, a program-level earnings calculation may not fully account for geographic variation, state and local salary structures, postgraduate training, public-service employment, or workforce distribution needs.

AACP is particularly concerned that an earnings-only accountability measure may not distinguish between programs with poor value and programs whose graduates enter lower-paid but socially valuable and critical practice settings. For example, pharmacy graduates who pursue residencies or fellowships may have lower earnings during the measurement window but later enter specialized clinical, academic, research, or health-system roles. Similarly, graduates who serve in rural or underserved communities, which are incentivized by government programs, may accept compensation that differs from higher-paying private-sector positions while advancing access to care and public health. AACP's preliminary review of the proposed rule and related analysis identified these issues as especially important for colleges and schools of pharmacy because graduate health programs will face new exposure to earnings-based sanctions, reporting obligations, and student notification requirements.

### **Assessing Institutional and Administrative Burden**

AACP also encourages the Department to ensure that program-level data are transparent, reviewable, and reliable before any accountability consequence attaches. Pharmacy programs vary in class size, institutional setting, mission, geographic location, and graduate pathways. Programs with specialized tracks may be more sensitive to cohort construction, suppression rules, credential-level classification, Classification of Instructional Programs (CIP) codes, and state or field-of-study comparison groups.

Before issuing warnings or eligibility consequences, institutions should have meaningful access to the underlying cohort information and an opportunity to correct data errors. The Department should consider potential implications for colleges and schools of pharmacy:

- Abrupt program closures or increased provisional status programs
- Negative impact on access to public and non-profit institutional programs
- Increased administrative and compliance costs impacting academic priorities

We encourage the Department to align the proposed reporting requirements with existing institutional, accreditation, licensure, and federal reporting systems. Colleges and schools of pharmacy already report extensive information for accreditation, state authorization, licensure, institutional accountability, and federal student aid purposes. New STATS reporting on cost, completion, licensure, accreditation, grants and scholarships, private loans, and program-level outcomes should be structured to minimize duplication and allow institutions to use existing authoritative data sources wherever possible. This approach would preserve the Department's transparency goals while reducing unnecessary administrative burden.

AACP encourages the Department to evaluate how bachelor's degree and other undergraduate programs will be evaluated under the proposed earnings metric, particularly when graduates intentionally delay full-time workforce entry to pursue additional education. For many students, an undergraduate degree is a pathway into a graduate or professional program, including the Pharm.D., Ph.D., M.S., or other advanced degrees. In those cases, earnings in the years immediately following completion may be temporarily depressed because graduates are enrolled in further education rather than working full time. AACP seeks more clarification from the Department on accounting for continued enrollment in graduate or professional education when calculating or interpreting earnings outcomes for undergraduate programs.

AACP appreciates the Department's commitment to transparency and accountability. AACP looks forward to continued engagement with the Department on an accountability framework that is accurate, fair, and aligned with the nation's health care workforce priorities.

Sincerely,



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Executive Vice President and CEO  
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