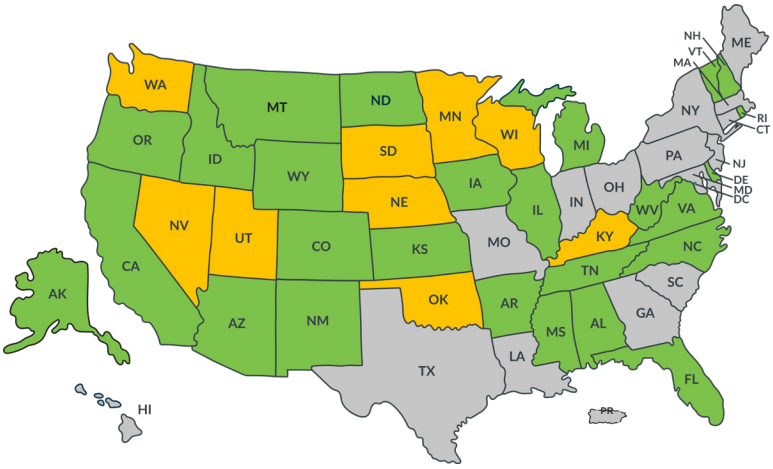
Cosponsor and Call for Passage of the Main Street Pharmacy Access Act (H.R. 3164) and Equitable Community Access to Pharmacist Services Act (S. 2426)

The Main Street Pharmacy Access Act (H.R. 3164) and Equitable Community Access to Pharmacist Services Act (S. 2426) are companion bills to ***ensure Medicare patients have access to services that pharmacists are licensed in their state to provide.*** Specifically, it calls for Medicare coverage of testing and treatment services ("Test and Treat") provided by pharmacists for COVID-19, influenza, respiratory syncytial virus (RSV), and streptococcal pharyngitis (strep throat).

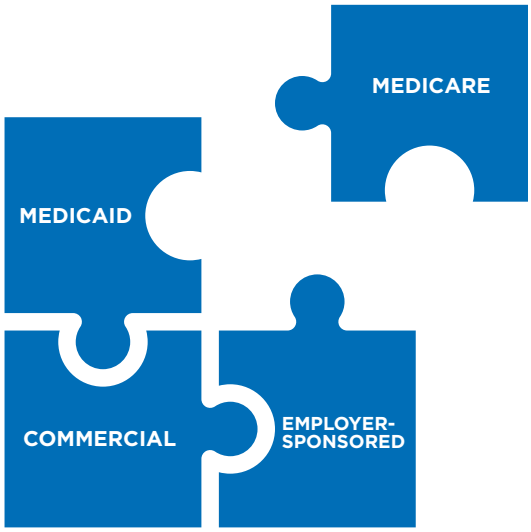
Modernize Medicare to Reflect State Pharmacy Practice Authority

- **Thirty-four states** (depicted in map) authorize pharmacists to provide test and treat services independently, under collaborative practice agreements, or through other state-approved mechanisms.
- **H.R. 3164/S. 2426** aligns Medicare policy with these state authorities, providing patients with faster access to evaluation and treatment while reducing delays in care and helping prevent complications.
- **Medicare policy** has not kept pace, leaving beneficiaries in every state without consistent access to services pharmacists are authorized to provide under state law.



Pharmacists may independently initiate treatment for upper respiratory infection

Pharmacists may initiate treatment pursuant to a signed agreement with a physician



Align Medicare Coverage with State Payer Trends

- **Twenty-eight states** recognize the value of pharmacist-provided test and treat services by requiring coverage through Medicaid and commercial insurance.
- **Without a reimbursement mechanism**, Medicare beneficiaries are unable to access pharmacist-provided test and treat services, creating an unnecessary care gap.
- **Medicare beneficiaries** should have access to the same pharmacist services already available to patients covered by other major payers.