

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

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Baltimore, Maryland 21244-1850



Center for Medicare and Medicaid Innovation

Notice of Statutory Waiver to Effectuate Pharmacy Billing of the Co-Management Payment (CMP) in the Advancing Chronic Care with Effective, Scalable Solutions (ACCESS) Model

The Center for Medicare and Medicaid Innovation (Innovation Center), which is testing the Advancing Chronic Care with Effective, Scalable Solutions (ACCESS) Model under section 1115A(b) of the Social Security Act (the Act), is exercising its waiver authority under section 1115A(d)(1) of the Act to allow Medicare Part B-enrolled pharmacies to bill the ACCESS Co-Management Payment (CMP), a payment for care coordination services furnished for ACCESS-aligned beneficiaries to support the early identification and mitigation of health risks that could otherwise exacerbate or develop into an acute event.

I. The Waiver

Pursuant to section 1115A(d)(1) of the Act, CMS waives such requirements of section 1861 of the Act, including but not limited to sections 1861(s)(2)(K) and 1861(ddd)(1)(B), as applicable, as necessary to permit Medicare-enrolled provider and supplier types, including pharmacies, to bill for the ACCESS Co-Management Payment.

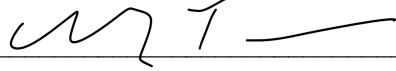
II. General Limitations

- The waiver set forth in Part I of this Notice applies only to billing of the CMP under the ACCESS Model, consistent with applicable CMS guidance.
- The waiver is established solely for purposes of testing the ACCESS Model and does not apply beyond the scope of that test.
- The waiver applies from the date of billing implementation, October 1, 2026, and remains in effect for the duration of the ACCESS Model test, including any extensions thereof, unless modified or terminated by CMS.
- This waiver does not expand any practitioner's scope of practice under state or other applicable law. Any clinical action taken in connection with services furnished under the CMP must be independently permissible under applicable law.
- Nothing in this Notice changes any Medicare program reimbursement or coverage rule not addressed by this waiver.

- Nothing in this Notice affects the obligations of individuals or entities to comply with any other applicable Federal or State law, including, but not limited to, the Federal anti-kickback statute, the Beneficiary Inducements Civil Monetary Penalty, or other anti-fraud laws, none of which are addressed by this waiver.

CENTERS FOR MEDICARE & MEDICAID SERVICES

Date: October 26, 2026

By: 

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