



May 7, 2024

The Honorable Xavier Becerra  
Secretary  
U.S. Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington, DC 20201

RE: Change Healthcare Cyberattack Ongoing Concerns and Next Steps

Dear Secretary Becerra:

On behalf of our more than 100,000 pharmacist, student pharmacist, and pharmacy technician members practicing in all settings across the nation, we request that the U.S. Department of Health and Human Services (HHS) take additional action in response to the March 2023 cyberattack on Change Healthcare.

We appreciated HHS's engagement with providers and patients in the immediate aftermath of the cyberattack. The impact on our members, and consequently, their patients, cannot be understated. Pharmacies across the country were unable to process pharmacy claims or access e-prescribing for several weeks. Consequently, providers were forced to move to new systems or default to paper recordkeeping, significantly increasing workloads and costs, slowing workflows, and creating compliance concerns. For patients, this resulted in delayed prescriptions, and, for some, the choice between paying full price for a prescription or going without until the attack was resolved and normal processing resumed.

Although ultimate responsibility for the cyberattack response rests with Change Healthcare, the depth and breadth of the attack's impact requires that HHS be fully engaged in addressing continued fallout from the event. Specifically, we are urging HHS to:

- **Establish HHS crisis communications plans for future attacks:** Although Change Health and its Optum/United Health Group leadership were in almost immediate contact with customers, HHS did not engage fully until several days after the issue arose and after many of the undersigned organizations sent inquiries. In future events, HHS should act as an immediate conduit for information, particularly for those people who are not included in the vendor-hosted calls or emails.

- **Direct Plans and PBMs to Pause Audits:** Future attacks should prompt an immediate pause of audits until providers confirm services are restored. This pause should be required. Although Optum has indicated that it took this step, other payors did not and although HHS indicated it requested other payors take this step, there has been no public response from those payors as to how they will handle the period of outage during audits.
- **Make Pharmacies Whole for Good Faith Dispensing:** Identify payment solution applicable to all payers that will make pharmacies whole for medications dispensed, and cost-sharing collected, based on good faith efforts to ensure continuity of patient care during this cyberattack.
- **Prevent Punitive Payer Actions:** Prohibit payers and PBMs from imposing DIR fees based on disruptions in care or recordkeeping that resulted from the cyberattack.
- **Address Longer-Term Impacts:** Clarify that providers will be held harmless for any data breaches attributable to the Change Healthcare cyberattack. Given the second breach of the Change system focused on patient data, providers remain concerned that patient data could have been breached without their knowledge.

Finally, we urge HHS to take steps to create a national action plan for future cyberattacks. Specifically, the agency should convene stakeholders to outline response plans, including communication plans for providers and the public, to reduce confusion and minimize impact on patient care.

We appreciate HHS's efforts to assist providers during the cyberattack. We look forward to continuing to work with you to protect our patients from cyberattacks and other data security threats. Please do not hesitate to reach out with questions or requests for additional information about the cyberattack's impact on our members and the patients they serve.

Sincerely,

American College of Clinical Pharmacists

American Pharmacists Association

American Society of Consultant Pharmacists

American Society of Health-System  
Pharmacists

National Community Pharmacists  
Association

National Alliance of State Pharmacy  
Associations