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Comment On: CMS-2025-0964-0001
Requirement for Electronic Prescribing for Controlled Substances (EPCS) for a Covered Part D Drug Under a Prescription Drug Plan or an MA–PD Plan (CMS-10834)

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General Comment

As a pediatric nurse practitioner (PNP) student and soon-to-be provider, the CMS proposal that caught my attention concerns the Requirement for Electronic Prescribing for Controlled Substances (EPCS) for a Covered Part D Drug Under a Prescription Drug Plan or an MA-PD Plan (CMS-10834). My interest in this proposal stems from my clinical experience in pediatric settings, where I have observed how both paper and electronic prescribing systems impact workflow, patient safety, and compliance. Electronic prescribing is the safest and most efficient option, especially for highly controlled substances.

While compliance for most prescribers has already begun, the proposed information collection of this plan allows prescribers to request a waiver when they are unable to conduct EPCS due to circumstances beyond their control. Although this flexibility is important, the estimated 306 annual waiver submissions, representing more than 52 hours of review time, may present challenges for smaller or resource-limited clinics.

Many small, independent, or rural practices still lack integrated electronic health record (EHR) systems and face significant costs related to software upgrades, licensing, and training. Pediatric and family practices also experience unique challenges when prescribing controlled substances, as EHR systems are often not optimized for pediatric workflows, such as weight-based dosing or parental consent documentation. Furthermore, the CMS proposal does not clearly outline educational or technical support for clinicians navigating EPCS compliance or waiver applications.

To improve implementation, CMS should expand data collection to better capture real-world burdens across diverse practice types, provide technical assistance resources for prescribers, include pediatric and small practice perspectives in future revisions, and clarify waiver duration and renewal processes. These measures will enhance compliance, reduce administrative burden, and ensure equitable access to safe electronic prescribing for all providers and patients.