

# Stakeholders Aligned

## On the Need for a Special Registration Pathway to Allow for Safe Access to Medications for Patients

*It has been 16 years since the Drug Enforcement Administration (DEA) was congressionally mandated to create a special registration for telemedicine pathway, which would ensure patient access to practitioners who can prescribe controlled substances via telehealth in limited circumstances. Due to recent reporting of concerning guardrails that would limit patient access, stakeholders have responded, aligned for a need to allow safe access to medical care for patients.*

## Access to Medications via Telemedicine Have Provided a Lifeline to Millions of Americans

“For the past 18 months, stimulant shortages have become a constant source of frustration. For many weeks, navigating this shortage became a full-time job. I spent hours driving across my family’s major metropolitan city, I called multiple pharmacies...If we go in person, it’s an average loss of four hours to my workday and my child’s school day. **With telehealth, my kids can hop on a quick video call with their prescriber between classes, which beats missing half a school day for an appointment. And with five of us on stimulant medications, time is a precious resource.**”

**Jeremy Didier, President, CHADD Board of Directors**

“Telehealth...has made it so we can get to people who can’t come to us. Especially if they’re **in rural areas, it cuts down on travel times** and when it’s appropriate to see people virtually and that really matters, especially because being able to commute and do all those things takes quite a bit of time away from actual patient care. **Sometimes the best way to get people care the fastest is via telehealth.**”

**Dr. Holly Yang, Immediate Past President, American Academy of Hospice and Palliative Medicine (AAHPM)**

“Approximately one half of adults with ADHD have ever used telehealth for ADHD services. Experts on ADHD treatment suggest that **the benefits of increased access to diagnosis and treatment via telehealth outweigh the risks of undiagnosed and untreated ADHD**. Evaluating, monitoring, and identifying standards for quality telehealth implementation have been demonstrated to help maximize these benefits and limit risks.

**Centers for Disease Control and Prevention (CDC)**



Interested in joining hundreds of health and patient organizations in this advocacy effort? Reach out to [rikki.cheung@connectwithcare.org](mailto:rikki.cheung@connectwithcare.org) to be included in future opportunities.

## Proposed Guardrails Should be Supported by Evidence

"Requirements such as limiting 50% of ... prescriptions to in-person visits and requiring prescribers to check prescription drug monitoring programs across all 50 states present logistical challenges that are difficult for clinicians and health systems to operationalize, particularly for group practices. **Most importantly, there is no clear evidence or pilot study to support the assumption that these guardrails will effectively address the risk of misuse.**"

**Chad Ellimoottil, MD, Medical Director of Virtual Care at the University of Michigan Medical Group**

"Requirements for in-person visits to receive controlled substances **will particularly have an impact on individuals who reside in rural areas, those with transportation barriers, and those suffering from mental health and addiction issues.**"

**Association of American Medical Colleges (AAMC)**

## Balancing Diversion and Patient Access

"We understand the DEA's responsibility to address the risks associated with prescription drug diversion and abuse and to ensure that prescriptions for controlled substances are issued for a legitimate medical purpose. However, it is vital that any new regulations do not erect barriers to necessary, life-saving care. **It is essential to strike a balance between regulatory oversight and accessibility, ensuring that patients who benefit from telemedicine continue to receive the care they need without undue impediments.**"

**Bipartisan Senate Letter Led by Sens. Whitehouse (D-RI), Murkowski (R-AK), Warner (D-VA), and Blackburn (R-TN)**

"[DEA should] **leverage existing data** to prevent and prosecute inappropriate prescriptions, **while allowing clinically appropriate prescribing to occur.**"

**Helen Hughes, MD, MPH**  
**Medical Director, Office of Telemedicine at Johns Hopkins Medicine**

"We maintain our belief that **the Special Registration process is a viable option to allow for patient access to care** via telemedicine while balancing DEA's law enforcement mission."

**Bipartisan House Letter Led by Reps. Matsui (D-CA) and Carter (R-GA)**

"A health care provider's objective is to provide vital behavioral health services to those in need. **The balance of these two objectives can be achieved by allowing access to mental health services where Schedule IIN medications are prescribed while having the necessary regulatory "guardrails" to prevent diversion.** Not allowing access to Schedule IIN via telehealth is not a guardrail, it is a blanket prohibition that will significantly impede access to mental health services and ultimately, hurt patients."

**Coalition of Mental Health Organizations, including the American Psychiatric Association, the American Academy of Pediatrics and the Kennedy Forum**