

September 17, 2019

Scott Brinks, Section Chief, Regulatory Drafting & Policy Support Section (DPW)
Drug Enforcement Administration
Department of Justice
8701 Morrissette Drive
Springfield, VA 22152

Re: Special Registration for Telemedicine

Dear Section Chief Brinks:

As national organizations, associations, and businesses focused on addressing serious, chronic, disabling, and debilitating conditions and ensuring all patients have access to effective and affordable health care, we are writing to bring to your attention the important role that your agency can play in addressing unmet health care needs by implementing the *Special Registration for Telemedicine Act of 2018*, which was a part of the [*SUPPORT for Patient and Communities Act*](#). We are pleased that the Drug Enforcement Administration (DEA) is expected shortly to promulgate regulations that have the potential to help ensure patients in rural and other underserved communities have timely access to the care and treatments they need and deserve.

Specifically, we understand that DEA soon will propose the circumstances under which special registration for controlled substance prescribing via telemedicine will be permitted and that the agency also will outline the process for securing such a special registration. In advance of this important policy development, we respectfully encourage you to take into consideration our recommendations and concerns, outlined below.

Background

We are dedicated to promoting health, preventing disease, and ensuring that patients have access to care and treatments in their own communities. The advent of telemedicine has significantly expanded access to care for some of our nation's hardest to reach and most in need individuals, families, and communities. No longer is access to the best health care dependent on where you live – individuals and providers with smartphones and remote video capabilities can connect and have a health care encounter directly – via telemedicine – with a range of primary and specialty care practitioners. Telemedicine is helping to address long-standing disparities in access to care and has the power to reduce disparities in health outcomes, as well.

The ability to diagnose and/or manage a patient's condition through remote access technology provides significant benefits to patients, but if the patient cannot subsequently get a prescription that his or her qualified health care provider deems appropriate, the promise of telemedicine falls far short. Prescription therapies that are also controlled substances provide patients with much-needed treatment for a range of serious, disabling, and debilitating conditions and access to those treatments is life-changing for the patients who need them. **As such, we strongly urge you to consider how the design of the process and criteria for special registrations for controlled substance prescribing through telemedicine can positively or negatively impact patients living with serious, chronic, disabling, and debilitating conditions – such as obesity, insomnia, substance use disorder, and some psychiatric conditions – in underserved communities.**

Special Registration for Telemedicine Prescribing for Controlled Substances Must Address the Nation's Top Public Health Threats

It is important to note that when the special registration process was first envisioned and called for under the *Ryan Haight Online Pharmacy Consumer Protection Act of 2008*, telemedicine was in its infancy and the principal focus was on preventing fraudulent prescribing over the internet. However, accompanied by significant technological advancements and cultural changes related to technology use over the past 11 years, telemedicine now is significantly more advanced and sophisticated – offering patients access to a range of high-tech primary and specialty care. Equally important is that telemedicine is much more commonly utilized and accepted by providers, patients, and public and commercial payers. In response to the advancement of telemedicine, states and the federal government have taken steps to support and facilitate telemedicine use as well as continue to protect patients and health care providers from bad actors by outlining – in statute and/or regulations – the manner in which practicing health professionals and patients can interact via telemedicine and digital health technology.

Numerous national organizations, including signatories to this letter, have highlighted the immense promise that telemedicine has to facilitate patient access to disease diagnosis, management, and treatment. Moreover, the Administration, the Department of Health and Human Services and its [Federal Office of Rural Health Policy](#), and the [Department of Veterans Affairs](#), among other federal agencies, recognize the enormous potential for telemedicine and telehealth to deliver care to patients in underserved communities. In addition, Congress has been focused on advancing the benefits of telemedicine by not only passing the *Special Registration for Telemedicine Act* as a part of the *SUPPORT Act*, but by also expanding [Medicare reimbursement](#) for the use of telemedicine for stroke, substance use disorder or co-occurring mental health disorder, and end stage renal disease.

Our organizations join with these government entities and federal elected officials in believing that telemedicine has the power to transform our nation's health care system and, in turn, reduce disease, improve health and well-being, and decrease costs. Policymakers recognize that telemedicine plays a critical role in expanding access to care, whether to older Americans who no longer can drive to appointments or for busy single parents who cannot take time off from work to take their children physically to an appointment required for a three-month medication refill. For example, if an individual is unable to travel independently to a health care provider for treatment for obesity due to physical constraints or lack of transportation options, this individual should not have to forgo treatment or care. With today's technological advancements, telemedicine could be an option for such patients. As such, we feel strongly that any regulations promulgated regarding special registration for telemedicine prescribing of controlled substances must ensure that providers can receive special registration to support prescribing of the range of medicines their patients need.

In addition, we believe it is very important for the DEA to support patients in engaging with health care providers via telemedicine in locations that are convenient to them. To do otherwise undermines the value of telemedicine. At a minimum, that would involve expanding the locations where patients can engage via telemedicine – whether in the workplace, schools, residences, pharmacies, urgent care clinics, other medical facilities. Given recent technological advancements and improved remote patient monitoring capabilities, a patient's location for telemedicine prescribing should not be limited, especially since there could be a number of ways to address diversion concerns through the use of same or similar technology. We believe ensuring patient safety is vital, but we also believe it is important to find ways

to meet patients where they are located and treat them in a manner that facilitates access to timely, necessary, and appropriate care. Given today's technological capabilities and innovative medicines, we have an extraordinary opportunity to expand access to care across the country. We believe there are creative solutions to address this need to balance access with public safety and we look forward to exploring and discussing them with you.

Our organizations believe the special registration provision in the *SUPPORT Act*, which received overwhelming bipartisan support from Congress and was supported by the Trump Administration, offers a real opportunity to expand access to care to the millions of Americans who are living with chronic, serious, disabling, and debilitating conditions and who do not have regular or sufficient access to health care providers.

We thank you for your attention to our recommendations and stand ready to work with you to ensure that patients have access to the care and therapies they need while also ensuring that prescribing controlled substances via telemedicine remains safe for patients, families, and communities across the nation.

Sincerely,

Alyvant, Inc.
American Association of Nurse Practitioners
The American Telemedicine Association
Bipartisan Policy Center
Centerstone
Cognitive Psychiatry of Chapel Hill PLLC
Encounter Telehealth
Hazelden Betty Ford Foundation
HealthyWomen
Heron Therapeutics, Inc.
InnovaTel Telepsychiatry
InSight Telepsychiatry
InTouch Health
Men's Health Network
National Hispanic Medical Association
National Minority Quality Forum
Ochsner Health System
Pine Rest Christian Mental Health Services
Preventive Cardiovascular Nurses Association (PCNA)