ata ACTION
Telehealth Policy to Transform Healthcare

November 11, 2026

E.J. Jackson
Bureau Chief
Missouri Bureau of Narcotics and Dangerous Drugs

Sarah Willson
Director
Missouri Department of Health and Senior Services

Richard Moore
General Counsel & Deputy Director
Missouri Department of Health and Senior Services

Amie Coleman
Office of General Counsel
Missouri Department of Health and Senior Services

Dr. Heidi B. Miller
Chief Medical Officer
Missouri Department of Health and Senior Services

Mindy Laughlin
Director
Division of Regulation and Licensure
Missouri Department of Health and Senior Services

Jeff Prosser
Chief Investigator
Missouri Bureau of Narcotics and Dangerous Drugs

RE: CONCERNS REGARDING MISSOURI CONTROLLED SUBSTANCE REGISTRATION REQUIREMENTS FOR OUT-OF-STATE TELEHEALTH PROVIDERS

Dear Chief Jackson, Dir. Willson, Mr. Moore, Ms. Coleman, Dr. Miller, Ms. Laughlin and Mr. Prosser,

On behalf of ATA Action, I am writing to express our concern regarding the Missouri Bureau of Narcotics and Dangerous Drugs' (BNDD) interpretation of controlled substance registration (CSR) requirements for Missouri-licensed healthcare practitioners. BNDD's current interpretation, that practitioners who are not located in Missouri cannot obtain or maintain a CSR, threatens Missouri patients' access to care by limiting the ability of Missouri-licensed practitioners to provide telehealth services while physically located outside the state. We respectfully request that BNDD reconsider its current position to ensure that Missouri patients do not experience unnecessary disruptions in access to clinically appropriate care.

ATA Action is the affiliated policy and legislative advocacy arm of the American Telemedicine Association. ATA Action is the leading advocacy organization dedicated to advancing policy and accelerating the adoption of technology-enabled healthcare. Working collaboratively with federal and state legislators and policymakers, our organization drives industry momentum by influencing legislative and regulatory developments in telehealth, virtual care, remote patient monitoring, artificial intelligence in health, health data privacy, private sector healthcare investment, and more. We represent a diverse membership – including hospital systems, technology companies, professional associations, direct-to-consumer digital health providers, payers, pharmaceutical manufacturers, digital therapeutics developers, and remote monitoring organizations.

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Telehealth has become an essential component of healthcare delivery, particularly in rural and medically underserved communities where patients often face significant challenges accessing local providers and specialty services. For Missouri patients, telehealth provides an important means of accessing psychiatric and behavioral health services, specialty consultations and ongoing treatment that may otherwise require extensive travel or involve significant delays. These services are particularly valuable for patients receiving mental health or substance use disorder treatment, where consistent access to providers and appropriate medication management are essential to successful treatment outcomes. Policies that unnecessarily restrict the availability of qualified telehealth practitioners risk exacerbating existing workforce shortages and widening gaps in access to care. This is of particular note in Missouri, where 23 counties have primary care health care shortages and 27 counties face mental health professional shortage areas.[1]

Missouri licensed telehealth providers who reside out-of-state also play a critical role in supporting Missouri healthcare facilities through overnight, weekend and other after-hours coverage arrangements. Hospitals, skilled nursing facilities, rural clinics, hospice programs and other healthcare settings frequently rely on remote practitioners to provide timely medical evaluations and treatment when an on-site provider may not be available. These arrangements are especially important for residents of long-term care facilities who may require urgent medication management, palliative care or treatment following an acute change in condition. In many cases, remote practitioners work in coordination with on-site clinical staff and established care teams to ensure patients receive appropriate treatment. Restricting these arrangements could result in unnecessary delays in care, avoidable emergency department transfers, hospital readmissions and increased costs for patients and the healthcare system.

Against this backdrop, ATA Action is particularly concerned by BNDD's position that Missouri-licensed practitioners who are physically located outside the state are ineligible to obtain or maintain a Missouri CSR. Such an interpretation effectively limits the ability of otherwise qualified healthcare practitioners to provide certain medically necessary services to Missouri patients, regardless of the clinical setting, existing safeguards or established patient-provider relationships. The physical location of a practitioner alone should not determine whether a Missouri patient can access appropriate medical treatment. Not only could this interpretation create issues for the coverage and provider access situation raised above, but this new interpretation could significantly disrupt ongoing care for Missouri patients and facilities who have come to rely on out-of-state, Missouri licensed telehealth providers. Some Missouri-licensed practitioners' registrations have already expired while their renewal applications remained unresolved. Patients who rely on these practitioners for medication management have to find a new prescriber or face an interruption in treatment.

Missouri has established a statutory framework that recognizes telehealth as a legitimate means of delivering healthcare services, including prescribing medications when clinically appropriate. Mo. Rev. Stat. § 334.108 specifically addresses prescribing through telemedicine and establishes requirements intended to ensure patient safety and appropriate clinical practice. We believe these existing protections provide an important foundation for supporting responsible telehealth prescribing without imposing unnecessary geographic restrictions on practitioners who are appropriately licensed to treat Missouri patients. ATA Action encourages BNDD to interpret its controlled substance registration requirements in

[1] Rural Health Information Hub, Health Professional Shortage Areas: Mental Health & Primary Care, Geographic, by County, 2026. https://www.ruralhealthinfo.org/data-explorer?id=209&state=MO

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a manner consistent with Missouri's broader recognition of telehealth and the state's interest in maintaining access to healthcare services.

We recognize and strongly support BNDD's responsibility to prevent the diversion and misuse of controlled substances. Ensuring appropriate prescribing practices and protecting patients from harm are essential components of a safe and effective healthcare system. However, protecting against diversion and maintaining access to medically necessary care should not be viewed as competing objectives. Telehealth providers are subject to applicable state and federal prescribing requirements, professional standards of care and other safeguards designed to promote patient safety. A refined approach that considers the nature of the care being provided, the clinical setting and existing oversight mechanisms would better balance these important priorities than a blanket restriction based on a practitioner's physical location.

For these reasons, ATA Action respectfully requests that BNDD reconsider its current position regarding controlled substance registrations for Missouri-licensed practitioners located outside the state and clarify a pathway for these practitioners to continue providing clinically appropriate care to Missouri patients through telehealth. We believe such an approach would better reflect the realities of modern healthcare delivery while maintaining appropriate safeguards against controlled substance diversion.

We appreciate BNDD's commitment to protecting public health and safety and welcome the opportunity to discuss these concerns with Bureau and Department leadership. ATA Action stands ready to work collaboratively toward a resolution that protects Missouri patients, supports responsible prescribing practices and preserves access to telehealth services. To facilitate a meeting or for further perspective from the telehealth industry, please contact hyoung@ataaction.org at ATA Action.

Sincerely,

Hunter Young

Hunter Young
Head of State Government Relations
ATA Action