

March 3, 2025

Derek S. Maltz
Acting Administrator
Drug Enforcement Administration
8701 Morrissette Drive
Springfield, VA 22152

Update to DEA Registration Process for Pharmacists to Reflect State Law Changes

Dear Acting Administrator Maltz,

The undersigned organizations write to request that the Drug Enforcement Administration (DEA) update its online DEA registration process and the Mid-Level Practitioners Authorization by State table¹ to reflect recent changes in state laws and regulations that explicitly grant pharmacists prescriptive authority for controlled substances. These state legislative and regulatory updates have expanded pharmacists' scope of practice, enabling them to prescribe controlled substances and obtain a controlled substance license from their respective State Boards of Pharmacy. However, pharmacists in these states currently face barriers in successfully applying for DEA registration due to outdated federal records.

Additionally, the undersigned organizations request that the DEA update its online registration process and the Mid-Level Practitioners Authorization by State table annually to reflect future changes governed under state law and regulations that grant pharmacists the authority to prescribe controlled substances within their state scope of practice.

State Law Changes Requiring DEA Updates

In addition to the states already recognized on the Mid-Level Practitioners Authorization by State table,² several states have recently enacted legislation or promulgated regulations that authorize pharmacists to prescribe controlled substances, including but not limited to medications for opioid use disorder (MOUD), through collaborative practice agreements, statewide protocols, independent prescriptive authority, or other means. To ensure DEA records align with these state policies, we request the following updates to the “**RPH**” column of the **Mid-Level Practitioners Authorization by State** table:

- **Colorado** – Update to include “Schedules 3, 3N, 4, and 5 with authority to Administer, Prescribe & Dispense (pursuant to a collaborative agreement with a prescriber or a statewide protocol).”
 - **Justification:** HB24-1045³ expands pharmacists' authority to prescribe medications for opioid use disorder (MOUD) pursuant to a collaborative practice agreement or a statewide protocol and requires health plan coverage of these services.⁴

¹ Diversion Control Division. Mid-Level Practitioners Authorization by State. Drug Enforcement Agency. Available at: <https://www.deadiversion.usdoj.gov/drugreg/practioners/practioners.html>

² California, Idaho, Massachusetts, Montana, New Mexico, North Carolina, Ohio, Tennessee, Utah, Washington

³ Colorado General Assembly. HB24-1045: Treatment for Substance Use Disorders. Colorado General Assembly. Available at: <https://leg.colorado.gov/bills/HB24-1045>.

⁴ C.R.S. 12-280-604

- **Iowa – Update to include “Schedules 2, 2N, 3, 3N, 4 and 5 with authority to Administer, Prescribe & Dispense.”**
 - **Justification:** HF 555⁵ expands pharmacists’ authority to dispense, administer, and issue prescription drugs, biological products, and medication orders commensurate with the pharmacist’s training and education and in accordance with the appropriate standard of care without including any prohibition for issuing prescriptions for controlled substances. Further, state law⁶ includes pharmacists in the definition of “practitioners.”
- **Nevada – Update to include “Schedules 2, 2N, 3, 3N, 4, and 5 with authority to Administer, Prescribe & Dispense (pursuant to a statewide protocol).”**
 - **Justification:** AB 156⁷ expands pharmacists’ scope of practice to assess, prescribe, and dispense medications for opioid use disorder under statewide protocols.^{8,9}
- **North Dakota – Update to include “Schedules 2, 2N, 3, 3N, 4, and 5 with authority to Administer, Prescribe & Dispense (pursuant to a collaborative agreement with a prescriber).”**
 - **Justification:** North Dakota statute details the ability for a pharmacist to enter into a collaborative practice agreement with physicians and advanced practice registered nurses and allows pharmacists to prescribe drugs, including controlled substances.^{10,11} As referenced in letters from 1996,¹² 2020,¹³ 2023,¹⁴ and 2024,¹⁵ it is the position of the North Dakota State Board of Pharmacy that pharmacists have the authority under their state scope of practice to prescribe controlled substances and should be granted the ability to register with the DEA.
- **Oregon – Update to include “Schedules 2, 2N, 3, 3N, 4, and 5 with authority to Administer, Prescribe & Dispense.”**
 - **Justification:** HB 4002¹⁶ expands pharmacists’ authority to prescribe and dispense an early refill of a medication for opioid use disorder treatment.^{17,18}

We appreciate DEA accepting recommendations from APhA to update the “RPH” Idaho column to include “Schedules 2, 2N, 3, 3N, 4, and 5 with authority to Administer, Prescribe & Dispense” on the 2/14/2025 update of the Mid-Level Practitioners Authorization by State table and request the aforementioned updates be made for Colorado, Iowa, Nevada, North Dakota, and Oregon.

Ensuring DEA Alignment with State Scope of Practice Laws

Pharmacists in these states are legally authorized to prescribe controlled substances under their respective practice acts, governed by state law. The inability to obtain DEA registration due to

⁵ Iowa Legislature. 2024 Regular Session: [HF 555](#).

⁶ [Iowa Code 147.107](#); [124.101\(27\)](#)

⁷ Nevada Legislature. AB156. Nevada Legislature. Available at: leg.state.nv.us/App/NELIS/REL/82nd2023/Bill/9819/Overview

⁸ Nev. Rev. Stat. Ann. § 639.0124

⁹ Nev. Rev. Stat. Ann. § 639.28079

¹⁰ N.D. Cent. Code, § 43-15-01

¹¹ N.D. Cent. Code, § 43-15-31.4

¹² Johnson LL. Letter sent to Dr. Gross at DEA on September 9, 1996.

¹³ Hardy MJ. Letter sent to Agent Chenin Donahue at DEA on January 23, 2020.

¹⁴ Hardy MJ. Letter sent to Liaison and Policy Section at DEA on August 7, 2023.

¹⁵ Hardy MJ. Letter sent to Charlene Scott at DEA on October 23, 2024.

¹⁶ Oregon State Legislature. 2024 Regular Session: HB 4002. Available at:

<https://olis.oregonlegislature.gov/liz/2024R1/Measures/Overview/HB4002>.

¹⁷ Oregon Chapter 70, (2024 Laws). Available at: https://www.oregonlegislature.gov/bills_laws/lawsstatutes/2024orLaw0070.pdf.

¹⁸ OAR 855-115-0345

outdated federal records prevents pharmacists from fully utilizing their statutory authority to address critical public health needs and decreases patient access to lifesaving opioid use disorder treatment.

The DEA must ensure that its registration process reflects the current scope of practice for pharmacists as authorized by state law. We urge the DEA to take immediate action to update its online application and the Mid-Level Practitioners Authorization by State table to include pharmacists in these states, allowing them to register and provide essential patient care without administrative barriers.

We appreciate your prompt attention to this matter and would welcome the opportunity to discuss it further. Please do not hesitate to contact Michael Baxter, the American Pharmacists Association Vice President of Government Affairs, at mbaxter@aphanet.org should you require any additional information or would like to arrange a meeting.

Sincerely,

American Pharmacists Association
American Association of Colleges of Pharmacy
American Association of Psychiatric Pharmacists
American College of Clinical Pharmacy
American Society of Consultant Pharmacists
American Society of Health-System Pharmacists
Colorado Pharmacists Society
Iowa Pharmacy Association
National Alliance of State Pharmacy Associations
National Association of Chain Drug Stores
National Community Pharmacists Association
Nevada Pharmacy Alliance
North Dakota Pharmacists Association
Oregon State Pharmacy Association