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Healthcare Alert

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New Jersey expands Telemedicine Rules for Schedule II controlled drug substances

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The law revises New Jersey's in-person examination requirements for prescribing Schedule II controlled dangerous substances.



What's the impact?

- New Jersey's new law keeps in-person exams as the default for most Schedule II controlled dangerous substances (CDS) telehealth or telemedicine prescribing.
- Adults on Schedule II stimulants may now have their initial examination conducted via telehealth, provided that an in-person visit follows within 30 days, with follow-up visits required at least quarterly thereafter, which may be conducted in-person or via telemedicine or telehealth. An in-person visit is required at least once annually.
- The law adds exemptions for patients in cancer, hospice, or palliative treatment; those in long-term care or that have a terminal illness; or for medications used in substance use disorder treatment.

This alert is a follow-up to our [February 20, 2026](#), alert regarding New Jersey's reinstatement of in-person examination requirements for Schedule II controlled dangerous substances (CDS) prescribing, and our [March 9, 2026](#), advisory addressing the Division of Consumer Affairs' transitional guidance.

On July 8, 2026, Governor Sherrill signed Assembly Bill No. 4852 into law. The law revises requirements for prescribing Schedule II CDS via telemedicine and telehealth. While the bill as introduced sought to broadly allow the prescription of Schedule II CDS through use of telemedicine without an initial in-person visit, the enacted law preserves the general in-person requirement while carving out specific exceptions for patients in treatment for cancer, receiving hospice or palliative care, or are residents of a long-term care facility; for patients who are terminally ill; or for patients in substance use disorder treatment. The law also creates a distinct pathway for prescribing adult stimulants via telemedicine or telehealth, as described in more detail below.

Background

As originally enacted, the statute authorized the prescription of Schedule II CDS via telemedicine or telehealth only after an initial in-person examination, with a subsequent in-person visit required every three months for as long as the patient was prescribed the substance. The sole exception was for stimulants prescribed to minors under 18, provided the provider used interactive real-time two-way audio and video and obtained written parental consent to waive the in-person requirement.

The amended law

While the general rule requiring an initial in-person examination and quarterly in-person visits remains the default, the law now fully exempts several patient populations from the in-person requirement, creates a new telehealth-first pathway for adult stimulant prescriptions, and retains the existing pediatric stimulant exception. The enacted law creates more flexible framework than the one originally contemplated upon the expiration of the COVID-19 emergency waivers but still preserves in-person touchpoints for most patients and imposes specific sequencing rules for adults on stimulants.

NEW EXEMPTIONS FOR CERTAIN PATIENT POPULATIONS

In addition to retaining the existing exception for pediatric stimulant prescription, the law adds a new set of exemptions under which the general in-person requirement does not apply to the prescription of Schedule II CDS via telemedicine or telehealth for:

- / Patients who are currently in active treatment for cancer, receiving hospice care from a licensed hospice, receiving palliative care, or who are residents of a long-term care facility

- / Patients who are undergoing evaluation, consultation, or treatment related to the Medical Aid in Dying for the Terminally Ill Act (N.J.S.A. 26:16-1 et seq.)
- / Any medications being prescribed to a patient for use in the treatment of a substance use disorder

NEW PATHWAY FOR ADULT STIMULANT PRESCRIPTIONS

The law establishes a distinct pathway for prescribing a stimulant that is a Schedule II CDS to an adult patient via telemedicine or telehealth. Prescriptions for adult stimulants are authorized only after an initial examination of the patient conducted either in-person or by telehealth or telemedicine. If the initial examination is conducted using telehealth or telemedicine, an in-person visit is required within 30 days of that initial examination. Thereafter, a subsequent in-person visit, or telehealth or telemedicine contact is required every three months, and an in-person visit is required at least once annually for the duration of time the patient is being prescribed the Schedule II CDS.

TELEHEALTH REQUIREMENTS

Notwithstanding any of the above, the prescription of Schedule II CDS to a patient through the use of telemedicine or telehealth is authorized only when the prescribing healthcare provider is using interactive, real-time, two-way audio and visual technologies when treating the patient, and the use of such technologies is consistent with state and federal law, including, without limitation, that the provider meets the same standard of care or practice standards that apply in in-person settings.

Practical implications for healthcare providers

The enacted law expands telehealth flexibility, but providers should be mindful of several compliance considerations as they update their protocols.

- / The general rule requiring an initial in-person examination and quarterly in-person visits continues to apply to Schedule II CDS prescriptions that do not fall within one of the enumerated exceptions, so providers should not assume that all telehealth or telemedicine prescribing of Schedule II CDS is now permissible without an in-person visit.
- / Providers treating adult patients on Schedule II CDS stimulants should build workflows around the new sequencing requirements. An initial examination may be conducted via telehealth, an in-person visit within 30 days, quarterly contact, and at least one in-person visit annually.
- / Providers relying on the new patient-population exemptions should carefully document the patient's qualifications for such exemptions.

- / Regardless of which pathway applies, every telehealth prescription of a Schedule II CDS must be conducted using interactive, real-time, two-way audio and visual technology and must meet the same standard of care applicable to in-person care.

Next Steps

The federal telemedicine flexibilities administered by the Drug Enforcement Administration and the Department of Health and Human Services remain in effect through December 31, 2026, permitting DEA-registered practitioners to remotely prescribe controlled medications in appropriate circumstances. New Jersey providers must nonetheless comply with the state requirements set forth in the amended statute, which apply regardless of any continued flexibilities in federal law. Providers and provider organizations that prescribe Schedule II CDS to New Jersey patients should evaluate which patients now qualify for the expanded telehealth pathways, update consent and documentation practices accordingly, and monitor for implementing regulations or guidance from the relevant New Jersey licensing boards and the Division of Consumer Affairs.

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