

State of Arizona  
House of Representatives  
Fifty-third Legislature  
Second Regular Session  
2018

**CHAPTER 87**  
**HOUSE BILL 2633**

AN ACT

AMENDING SECTIONS 32-3248 AND 32-3248.01, ARIZONA REVISED STATUTES, AS ADDED BY LAWS 2018, FIRST SPECIAL SESSION, CHAPTER 1, SECTION 29; AMENDING SECTION 36-2525, ARIZONA REVISED STATUTES, AS AMENDED BY LAWS 2018, FIRST SPECIAL SESSION, CHAPTER 1, SECTION 37; RELATING TO PHARMACISTS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Section 32-3248, Arizona Revised Statutes, as added by  
3 Laws 2018, first special session, chapter 1, section 29, is amended to  
4 read:

5 32-3248. Health professionals; controlled substances; initial  
6 prescriptions; limits; exceptions; definition

7 A. A health professional who is authorized under this title to  
8 prescribe controlled substances shall limit the initial prescription for a  
9 patient for a schedule II controlled substance that is an opioid to not  
10 more than a five-day supply, except that an initial prescription for a  
11 schedule II controlled substance that is an opioid following a surgical  
12 procedure is limited to not more than a fourteen-day supply.

13 B. Subsection A of this section does not apply to initial  
14 prescriptions if the patient:

- 15 1. Has an active oncology diagnosis.
- 16 2. Has a traumatic injury, not including a surgical procedure.
- 17 3. Is receiving hospice care.
- 18 4. Is receiving end-of-life care.
- 19 5. Is receiving palliative care.
- 20 6. Is receiving skilled nursing facility care.
- 21 7. Is receiving treatment for burns.
- 22 8. Is receiving medication-assisted treatment for a substance use  
23 disorder.
- 24 9. Is an infant who is being weaned off opioids at the time of  
25 hospital discharge.

26 C. If a health professional's prescribing authority under the  
27 relevant chapter of this title for schedule II controlled substances is  
28 more restrictive than the limit specified in subsection A of this section,  
29 the health professional's prescribing authority under the relevant chapter  
30 of this title applies.

31 D. AN INITIAL PRESCRIPTION FOR A SCHEDULE II CONTROLLED SUBSTANCE  
32 THAT IS AN OPIOID THAT IS WRITTEN FOR MORE THAN A FIVE-DAY SUPPLY IS  
33 DEEMED TO MEET THE REQUIREMENTS OF AN EXEMPTION UNDER THIS SECTION WHEN  
34 THE INITIAL PRESCRIPTION IS PRESENTED TO THE DISPENSER. A PHARMACIST IS  
35 NOT REQUIRED TO VERIFY WITH THE PRESCRIBER WHETHER THE INITIAL  
36 PRESCRIPTION COMPLIES WITH THIS SECTION.

37 ~~D.~~ E. For the purposes of this section, "initial prescription"  
38 means a prescription for a schedule II controlled substance that is an  
39 opioid that has not covered any portion of the past sixty days before the  
40 date the pharmacy dispenses the current prescription as evidenced by the  
41 controlled substances prescription monitoring program's central database  
42 tracking system.

1           Sec. 2. Section 32-3248.01, Arizona Revised Statutes, as added by  
2 Laws 2018, first special session, chapter 1, section 29, is amended to  
3 read:

4           32-3248.01. Schedule II controlled substances; dosage limit;  
5                                   exceptions; morphine; opioid antagonist;  
6                                   definition

7           A. A health professional who is authorized under this title to  
8 prescribe controlled substances may not issue a new prescription order for  
9 a schedule II controlled substance that is an opioid that exceeds ninety  
10 morphine milligram equivalents per day.

11           B. The limit prescribed by subsection A of this section does not  
12 apply to:

13           1. A continuation of a prior prescription order that was issued  
14 within the previous sixty days.

15           2. An opioid with a maximum approved total daily dose in the  
16 labeling as approved by the United States food and drug administration.

- 17           3. A patient who:  
18           (a) Has an active oncology diagnosis.  
19           (b) Has a traumatic injury, not including a surgical procedure.  
20           (c) Is receiving hospice care.  
21           (d) Is receiving end-of-life care.  
22           (e) Is receiving palliative care.  
23           (f) Is receiving skilled nursing facility care.  
24           (g) Is receiving treatment for burns.  
25           (h) Is receiving medication-assisted treatment for a substance use  
26 disorder.

27           (i) Is hospitalized.  
28           C. If a health professional believes that a patient requires more  
29 than ninety morphine milligram equivalents per day and the patient is not  
30 exempt from the limit pursuant to subsection B of this section, the health  
31 professional shall first consult with a physician who is licensed pursuant  
32 to chapter 13 or 17 of this title and who is board-certified in pain. The  
33 consultation may be done by telephone or through telemedicine. If the  
34 consulting physician is not available to consult within forty-eight hours  
35 after the request, the health professional may prescribe the amount that  
36 the health professional believes the patient requires and subsequently  
37 have the consultation. If the health professional is a physician who is  
38 licensed pursuant to chapter 13 or 17 of this title and is board-certified  
39 in pain, the health professional may issue a prescription order for more  
40 than ninety morphine milligram equivalents per day without a consultation  
41 under this subsection.

42           D. If a patient is prescribed more than ninety morphine milligram  
43 equivalents per day pursuant to subsection B or C of this section, the  
44 prescribing health professional shall also prescribe for the patient  
45 naloxone hydrochloride or any other opioid antagonist that is approved by

1 the United States food and drug administration for the treatment of  
2 opioid-related overdoses.

3 E. A PRESCRIPTION ORDER FOR A SCHEDULE II CONTROLLED SUBSTANCE THAT  
4 IS AN OPIOID THAT IS WRITTEN FOR MORE THAN NINETY MORPHINE MILLIGRAM  
5 EQUIVALENTS PER DAY IS DEEMED TO MEET THE REQUIREMENTS OF AN EXEMPTION  
6 UNDER THIS SECTION WHEN THE PRESCRIPTION ORDER IS PRESENTED TO THE  
7 DISPENSER. A PHARMACIST IS NOT REQUIRED TO VERIFY WITH THE PRESCRIBER  
8 WHETHER THE PRESCRIPTION ORDER COMPLIES WITH THIS SECTION.

9 ~~E.~~ F. For the purposes of this section, "prescription order" has  
10 the same meaning prescribed in section 32-1901.

11 Sec. 3. Section 36-2525, Arizona Revised Statutes, as amended by  
12 Laws 2018, first special session, chapter 1, section 37, is amended to  
13 read:

14 36-2525. Prescription orders; labels; packaging; definition

15 A. In addition to the requirements of section 32-1968 pertaining to  
16 prescription orders for prescription-only drugs, the prescription order  
17 for a controlled substance shall bear the name, address and federal  
18 registration number of the prescriber. A prescription order for a  
19 schedule II controlled substance drug other than a hospital drug order for  
20 a hospital inpatient shall contain only one drug order per prescription  
21 blank. If authorized verbally by the prescriber, the pharmacist may make  
22 changes to correct errors or omissions made by the prescriber on the  
23 following parts of a written or electronic schedule II controlled  
24 substance prescription order:

- 25 1. The date issued.
- 26 2. The strength, dosage form or quantity of drug.
- 27 3. The directions for its use.

28 B. The pharmacist must document on the original prescription order  
29 the changes that were made pursuant to the verbal authorization and record  
30 the time and date the authorization was granted.

31 C. A person who is registered to dispense controlled substances  
32 under this chapter must keep and maintain prescription orders for  
33 controlled substances as follows:

34 1. Prescription orders for controlled substances listed in  
35 schedules I and II must be maintained in a separate prescription file for  
36 controlled substances listed in schedules I and II only.

37 2. Prescription orders for controlled substances listed in  
38 schedules III, IV and V must be maintained either in a separate  
39 prescription file for controlled substances listed in schedules III, IV  
40 and V only or in a form that allows them to be readily retrievable from  
41 the other prescription records of the registrant. For the purposes of  
42 this paragraph, "readily retrievable" means that, when the prescription is  
43 initially filed, the face of the prescription is stamped in red ink in the  
44 lower right corner with the letter "C" in a font that is not less than one  
45 inch high and that the prescription is filed in the usual consecutively

1 numbered prescription file for noncontrolled substance prescriptions. The  
2 requirement to stamp the hard copy prescription with a red "C" is waived  
3 if a registrant employs an electronic data processing system or other  
4 electronic recordkeeping system for prescriptions that permits  
5 identification by prescription number and retrieval of original documents  
6 by the prescriber's name, patient's name, drug dispensed and date filled.

7 D. Except in emergency situations in conformity with subsection E  
8 of this section, under the conditions specified in subsections F and G of  
9 this section or when dispensed directly by a medical practitioner to an  
10 ultimate user, a controlled substance in schedule II shall not be  
11 dispensed without either the written prescription order in ink or  
12 indelible pencil or typewritten and manually signed by the medical  
13 practitioner or an electronic prescription order as prescribed by federal  
14 law or regulation. Beginning January 1, 2019, a schedule II controlled  
15 substance that is an opioid may be dispensed in a county with a population  
16 of one hundred fifty thousand persons or more only with an electronic  
17 prescription order as prescribed by federal law or regulation. Beginning  
18 July 1, 2019, a schedule II controlled substance that is an opioid may be  
19 dispensed in a county with a population of less than one hundred fifty  
20 thousand persons only with an electronic prescription order as prescribed  
21 by federal law or regulation. A prescription order for a schedule II  
22 substance shall not be dispensed more than ninety days after the date on  
23 which the prescription order was issued. **NOTWITHSTANDING ANY OTHER**  
24 **PROVISION OF THIS SECTION,** a ~~limited service~~ pharmacy ~~as defined in~~  
25 ~~section 32-1901~~ may sell and dispense a schedule II **CONTROLLED** substance  
26 prescribed by a medical practitioner who is located **IN ANOTHER COUNTY IN**  
27 **THIS STATE OR** in another state if the prescription was issued to the  
28 patient according to and in compliance with the applicable laws of the  
29 state of the prescribing medical practitioner and federal law. A  
30 prescription order for a schedule II controlled substance shall not be  
31 refilled.

32 E. In emergency situations, emergency quantities of schedule II  
33 controlled substances may be dispensed on an oral prescription order of a  
34 medical practitioner. Such an emergency prescription order shall be  
35 immediately reduced to writing by the pharmacist and shall contain all the  
36 information required for schedule II controlled substances except for the  
37 manual signing of the order by the medical practitioner. Within seven  
38 days after authorizing an emergency oral prescription order, the  
39 prescribing medical practitioner shall cause a written prescription order  
40 manually signed for the emergency quantity prescribed to be delivered to  
41 the dispensing pharmacist or an electronic prescription order to be  
42 transmitted to the dispensing pharmacist. In addition to conforming to  
43 other requirements for prescription orders for schedule II controlled  
44 substances, the prescription order shall indicate electronically or have  
45 written on its face "authorization for emergency dispensing" and the date

1 of the oral order. If the prescribing medical practitioner fails to  
2 deliver such an emergency prescription order within seven days in  
3 conformance with board rules, the pharmacist shall notify the board.  
4 Failure of the pharmacist to notify the board voids the authority  
5 conferred by this subsection to dispense without a prescription order of a  
6 medical practitioner that is electronic or that is written and manually  
7 signed.

8 F. The following may be transmitted to a pharmacy by fax by a  
9 patient's medical practitioner or the medical practitioner's agent:

10 1. A prescription order written for a schedule II controlled  
11 substance to be compounded for the direct administration to a patient by  
12 parenteral, intravenous, intramuscular, subcutaneous or intraspinal  
13 infusion.

14 2. A prescription order written for any schedule II controlled  
15 substance for a resident of a long-term care facility.

16 3. A prescription order written for a schedule II controlled  
17 substance for a patient enrolled in a hospice care program that is  
18 certified or paid for by medicare under title XVIII or a hospice program  
19 that is licensed by this state. The medical practitioner or the medical  
20 practitioner's agent must note on the prescription that the patient is a  
21 hospice patient.

22 G. A fax transmitted pursuant to subsection F of this section is  
23 the original written prescription order for purposes of this section and  
24 must be maintained as required by subsection C of this section.

25 H. Except when dispensed directly by a medical practitioner to an  
26 ultimate user, a controlled substance included in schedule III or IV that  
27 requires a prescription order as determined under state or federal laws  
28 shall not be dispensed without a written or oral prescription order of a  
29 medical practitioner or an electronic prescription order as prescribed by  
30 federal law or regulation. The prescription order shall not be filled or  
31 refilled more than six months after the date on which the prescription  
32 order was issued. A prescription order authorized to be refilled shall  
33 not be refilled more than five times. Additional quantities may only be  
34 authorized by the prescribing medical practitioner through issuance of a  
35 new prescription order that shall be treated by the pharmacist as a new  
36 and separate prescription order.

37 I. Except when dispensed directly by a medical practitioner to an  
38 ultimate user, a controlled substance that is included in schedule V and  
39 that requires a prescription order as determined under state or federal  
40 laws shall not be dispensed without a written or oral prescription order  
41 of a medical practitioner. The prescription order may be refilled as  
42 authorized by the prescribing medical practitioner but shall not be filled  
43 or refilled more than one year after the date of issuance.

44 J. A controlled substance that is listed in schedule III, IV or V  
45 and that does not require a prescription order as determined under state

1 or federal laws may be dispensed at retail by a pharmacist, a pharmacy  
2 intern or a graduate intern under the pharmacist's supervision without a  
3 prescription order to a purchaser who is at least eighteen years of age if  
4 all of the following are true:

5 1. It is for a legitimate medical purpose.

6 2. Not more than two hundred forty cubic centimeters (eight ounces)  
7 of any such controlled substance containing opium, nor more than one  
8 hundred twenty cubic centimeters (four ounces) of any other such  
9 controlled substance, nor more than forty-eight dosage units of any such  
10 controlled substance containing opium, nor more than twenty-four dosage  
11 units of any other controlled substance may be dispensed at retail to the  
12 same purchaser in any given forty-eight-hour period.

13 3. No more than one hundred dosage units of any single active  
14 ingredient ephedrine preparation may be sold, offered for sale, bartered  
15 or given away to any one person in any one thirty-day period.

16 4. The pharmacist, pharmacy intern or graduate intern requires  
17 every purchaser of a controlled substance under this subsection who is not  
18 known to that person to furnish suitable identification, including proof  
19 of age if appropriate.

20 5. A bound record book for dispensing controlled substances under  
21 this subsection is maintained by the pharmacist and contains the name and  
22 address of the purchaser, the name and quantity of the controlled  
23 substance purchased, the date of each purchase and the name or initials of  
24 the pharmacist, pharmacy intern or graduate intern who dispensed the  
25 substance to the purchaser. The book shall be maintained in conformity  
26 with the recordkeeping requirements of section 36-2523.

27 K. In the absence of a law requiring a prescription for a schedule  
28 V controlled substance, the board, by rules, may require, or remove the  
29 requirement of, a prescription order for a schedule V controlled  
30 substance.

31 L. The label on a container of a controlled substance that is  
32 directly dispensed by a medical practitioner or pharmacist and that is not  
33 for the immediate administration to the ultimate user, such as a bed  
34 patient in a hospital, shall bear the name and address of the dispensing  
35 medical practitioner or pharmacist, the serial number, the date of  
36 dispensing, the name of the prescriber, the name of the patient or, if an  
37 animal, the name of the owner of the animal and the species of the animal,  
38 the directions for use and cautionary statements, if any, contained in the  
39 prescription order or required by law. If the controlled substance is  
40 included in schedule II, III or IV, the label shall bear a transfer  
41 warning to the effect: "Caution: federal law prohibits the transfer of  
42 this drug to any person other than the patient for whom it was  
43 prescribed". The container of a schedule II controlled substance that is  
44 an opioid that is directly dispensed by a pharmacist and that is not for  
45 the immediate administration to the ultimate user shall have a red cap and

1 a warning label prescribed by the board about potential addiction. THE  
2 BOARD OR THE EXECUTIVE DIRECTOR, IF DELEGATED BY THE BOARD, MAY WAIVE THE  
3 RED CAP REQUIREMENT IF IMPLEMENTING THE REQUIREMENT IS NOT FEASIBLE  
4 BECAUSE OF THE SPECIFIC DOSAGE FORM OR PACKAGING TYPE.

5 M. Controlled substances in schedules II, III, IV and V may be  
6 dispensed as electronically transmitted prescriptions if the prescribing  
7 medical practitioner is all of the following:

8 1. Properly registered by the United States drug enforcement  
9 administration.

10 2. Licensed in good standing in the United States jurisdiction in  
11 which the medical practitioner practices.

12 3. Authorized to issue such prescriptions in the jurisdiction in  
13 which the medical practitioner is licensed.

14 N. Notwithstanding any other provision of this section, beginning  
15 January 1, 2019, each prescription order that is issued by a medical  
16 practitioner in a county with a population of one hundred fifty thousand  
17 persons or more for a schedule II controlled substance that is an opioid  
18 shall be transmitted electronically to the dispensing pharmacy.  
19 Notwithstanding any other provision of this section, beginning July 1,  
20 2019, each prescription order that is issued by a medical practitioner in  
21 a county with a population of less than one hundred fifty thousand persons  
22 for a schedule II controlled substance that is an opioid shall be  
23 transmitted electronically to the dispensing pharmacy.

24 O. The requirement in subsections D and N of this section for an  
25 electronic prescription order does not apply to a prescription order for a  
26 schedule II controlled substance that is an opioid that is issued for  
27 medication-assisted treatment for a substance use disorder.

28 P. The board, by rule, may provide additional requirements for  
29 prescribing and dispensing controlled substances.

30 Q. The board shall establish a process to grant a waiver for the  
31 requirement in subsections D and N of this section for electronic  
32 prescription orders to a medical practitioner who lacks adequate access to  
33 broadband or faces other hardships that prevent the medical practitioner  
34 from implementing electronic prescription orders. A PHARMACIST IS NOT  
35 REQUIRED TO VERIFY WITH A MEDICAL PRACTITIONER OR THE BOARD WHETHER THE  
36 MEDICAL PRACTITIONER HAS RECEIVED A WAIVER PURSUANT TO THIS SUBSECTION.

37 R. For the purposes of this section, "medication-assisted  
38 treatment" has the same meaning prescribed in section 32-3201.01.

39 Sec. 4. Retroactivity

40 This act applies retroactively to from and after April 25, 2018.

APPROVED BY THE GOVERNOR MARCH 27, 2018.

FILED IN THE OFFICE OF THE SECRETARY OF STATE MARCH 27, 2018.