

House Engrossed Senate Bill  
opioid prescriptions; intractable pain; exceptions

State of Arizona  
Senate  
Fifty-fifth Legislature  
Second Regular Session  
2022

# SENATE BILL 1162

AN ACT

AMENDING SECTION 32-3248.01, ARIZONA REVISED STATUTES; RELATING TO  
CONTROLLED SUBSTANCES.

(TEXT OF BILL BEGINS ON NEXT PAGE)

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

2 Section 1. Section 32-3248.01, Arizona Revised Statutes, is amended  
3 to read:

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

7 A. A health professional who is authorized under this title to  
8 prescribe controlled substances may not issue a new prescription to be  
9 filled or dispensed for a patient outside of a health care institution for  
10 a schedule II controlled substance that is an opioid that exceeds ninety  
11 morphine milligram equivalents per day.

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

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

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

18 3. A prescription that is issued following a surgical procedure and  
19 that is limited to not more than a fourteen-day supply.

20 4. A patient who:

21 (a) Has an active oncology diagnosis.

22 (b) Has a traumatic injury, ~~not including a surgical procedure.~~

23 (c) Is receiving hospice care.

24 (d) Is receiving end-of-life care.

25 (e) Is receiving palliative care.

26 (f) Is receiving skilled nursing facility care.

27 (g) Is receiving treatment for burns.

28 (h) Is receiving medication-assisted treatment for a substance use  
29 disorder.

30 (i) Is hospitalized.

31 (j) HAS CHRONIC INTRACTABLE PAIN.

32 (k) IS RECEIVING OPIOID TREATMENT FOR PERIOPERATIVE CARE FOLLOWING  
33 AN INPATIENT SURGICAL PROCEDURE.

34 C. If a health professional believes that a patient requires more  
35 than ninety morphine milligram equivalents per day and the patient is not  
36 exempt from the limit pursuant to subsection B of this section, the health  
37 professional shall first consult with a physician who is licensed pursuant  
38 to chapter 13 or 17 of this title and who is board-certified in pain, or  
39 an opioid assistance and referral call service, if available, that is  
40 designated by the department of health services. The consultation may be  
41 done by telephone or through telehealth. If the opioid assistance and  
42 referral call service agrees with the higher dose, the health professional  
43 may issue a prescription for more than ninety morphine milligram  
44 equivalents per day. If the consulting physician agrees with the higher  
45 dose, the health professional may issue a prescription for more than

1 ninety morphine milligram equivalents per day. If the consulting  
2 physician is not available to consult within forty-eight hours after the  
3 request, the health professional may prescribe the amount that the health  
4 professional believes the patient requires and subsequently have the  
5 consultation. If the health professional is a physician who is licensed  
6 pursuant to chapter 13 or 17 of this title and is board-certified in pain,  
7 the health professional may issue a prescription for more than ninety  
8 morphine milligram equivalents per day without a consultation under this  
9 subsection.

10 D. If a patient is prescribed more than ninety morphine milligram  
11 equivalents per day pursuant to subsection B or C of this section, the  
12 prescribing health professional shall also prescribe for the patient  
13 naloxone hydrochloride or any other opioid antagonist that is approved by  
14 the United States food and drug administration ~~for the treatment of~~ TO  
15 TREAT opioid-related overdoses.

16 E. THE NINETY MORPHINE MILLIGRAM EQUIVALENTS PER DAY LIMIT  
17 PRESCRIBED IN THIS SECTION DOES NOT APPLY TO A PATIENT WITH CHRONIC  
18 INTRACTABLE PAIN ONCE THE PATIENT HAS AN ESTABLISHED HEALTH  
19 PROFESSIONAL-PATIENT RELATIONSHIP AND THE PATIENT HAS TRIED DOSES OF LESS  
20 THAN NINETY MORPHINE MILLIGRAM EQUIVALENTS THAT HAVE BEEN INEFFECTIVE AT  
21 ADDRESSING THE PATIENT'S PAIN.

22 ~~F.~~ F. A prescription for a schedule II controlled substance that  
23 is an opioid that is written for more than ninety morphine milligram  
24 equivalents per day is deemed to meet the requirements of an exemption  
25 under this section when the prescription is presented to the dispenser. A  
26 pharmacist is not required to verify with the prescriber whether the  
27 prescription complies with this section.

28 G. FOR THE PURPOSES OF THIS SECTION:

29 1. "CHRONIC INTRACTABLE PAIN" MEANS PAIN THAT MEETS BOTH OF THE  
30 FOLLOWING:

31 (a) IS EXCRUCIATING, CONSTANT, INCURABLE AND OF SUCH SEVERITY THAT  
32 IT DOMINATES VIRTUALLY EVERY CONSCIOUS MOMENT.

33 (b) PRODUCES MENTAL AND PHYSICAL DEBILITATION.

34 2. "ESTABLISHED HEALTH PROFESSIONAL-PATIENT RELATIONSHIP" MEANS  
35 THAT ALL OF THE FOLLOWING HAVE OCCURRED:

36 (a) A PATIENT HAS PHYSICALLY PRESENTED TO A HEALTH PROFESSIONAL  
37 WITH A MEDICAL COMPLAINT.

38 (b) THE HEALTH PROFESSIONAL HAS TAKEN A MEDICAL HISTORY OF THE  
39 PATIENT.

40 (c) THE HEALTH PROFESSIONAL HAS PERFORMED A PHYSICAL EXAMINATION OF  
41 THE PATIENT.

42 (d) SOME LOGICAL CONNECTION EXISTS BETWEEN THE MEDICAL COMPLAINT,  
43 THE MEDICAL HISTORY, THE PHYSICAL EXAMINATION AND THE DRUG PRESCRIBED.