

# Arizona's Opioid Epidemic New Legislation

## & What It Means for Physicians

Arizona lawmakers voted on January 25, 2018 and Governor Ducey signed Senate Bill (SB) 1001 (“Controlled Substances; regulation; appropriation”) into law on January 26, 2018. This new law establishes requirements and certain prohibitions for prescription, administration and dispensing of schedule II opioids. SB1001, among other things, establishes the Substance Abuse Disorder Services Fund, administered by the Arizona Health Care Cost Containment System. SB1001 appropriates \$10,000,000 for this fund in fiscal year 2018. This bill also appropriates money to the Department of Health Services and the Attorney General for education and prevention efforts.

### **Main Provisions of the bill related to prescribers and prescriptions are:**

The law prohibits podiatrists, dentists, allopathic physicians, physician assistants, osteopathic physicians, optometrists and homeopathic physicians from dispensing schedule II opioids for pain management and establishes violations as an act of unprofessional conduct. The law stipulates that physician assistants, allopathic physicians, homeopathic physicians and osteopathic physicians may dispense schedule II controlled substances for medication-assisted treatment (MAT) for substance use disorders. The new law directs the Board of Nursing to adopt rules prohibiting registered nurse practitioners from dispensing schedule II controlled substances for pain management, but does permit registered nurse practitioners to prescribe schedule II controlled substances for MAT.

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- a) a refill or extension of an existing prescription;
- b) an opioid with a maximum approved total daily dose in the labeling as approved by the United States Food and Drug Administration (FDA);
- c) for a patient who has an active oncology diagnosis or a traumatic injury, not including a surgical procedure;
- d) for a patient who is receiving hospice care, end-of-life care, palliative care or skilled nursing facility care;
- e) for a patient who is receiving MAT for a substance use disorder.

It further requires:

- ◆ a health professional additionally prescribe naloxone hydrochloride, or another opioid antagonist, to a patient who is prescribed more than 90 MMEs per day.
- ◆ Non-emergency prescription order for a schedule II drug dispensed directly by a pharmacist must have a red cap and warning label.
- ◆ Electronic prescription to a pharmacy for a schedule II drug for pain management in Maricopa, Pima, Pinal, Yavapai, Mohave and Yuma counties beginning January 1, 2019.
- ◆ Electronic prescription to a pharmacy for a schedule II drug for pain management in Greenlee, La Paz, Graham, Santa Cruz, Gila, Apache, Navajo, Cochise and Coconino counties beginning July 1, 2019.
- ◆ The Board of Pharmacy to adopt rules to establish a waiver process for electronic prescription requirements for smaller counties. Exempts MAT prescriptions from the electronic prescription requirements.

Lastly, it directs:

- ◆ a health professional who believes a patient requires more than 90 MMEs per day to consult with a board certified pain specialist.
- ◆ The Board of Pharmacy to provide a report to the Governor and the presiding officer in each legislative chamber regarding the ability of health care providers in counties with a population of less than 150,000 to access and use electronic prescribing tools.

For a complete version of this new law, please visit the Arizona State Legislature website at:

<https://apps.azleg.gov/BillStatus/GetDocumentPdf/456564>

For a primer from Governor Ducey's Office related to SB1001 and the Act:

[https://azgovernor.gov/sites/default/files/opioidemicactweb\\_0.pdf](https://azgovernor.gov/sites/default/files/opioidemicactweb_0.pdf)