

State of Arizona
House of Representatives
Fifty-fourth Legislature
First Regular Session
2019

HOUSE BILL 2075

AN ACT

AMENDING SECTIONS 32-2504, 32-2532, 36-2525 AND 36-2603, ARIZONA REVISED STATUTES; RELATING TO PRESCRIPTION ORDERS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:
2 Section 1. Section 32-2504, Arizona Revised Statutes, is amended to
3 read:
4 32-2504. Powers and duties; delegation of authority; rules;
5 subcommittees; immunity
6 A. The board shall:
7 1. As its primary duty, protect the public from unlawful,
8 incompetent, unqualified, impaired or unprofessional physician assistants.
9 2. License and regulate physician assistants pursuant to this
10 chapter.
11 3. Order and evaluate physical, psychological, psychiatric and
12 competency testing of licensees and applicants the board determines is
13 necessary to enforce this chapter.
14 4. Review the credentials and the abilities of applicants for
15 licensure whose professional records or physical or mental capabilities
16 may not meet the requirements of this chapter.
17 5. Initiate investigations and determine on its own motion whether
18 a licensee has engaged in unprofessional conduct or is or may be
19 incompetent or mentally or physically unable to safely perform health care
20 tasks.
21 6. Establish fees and penalties pursuant to section 32-2526.
22 7. Develop and recommend standards governing the profession.
23 8. Engage in the full exchange of information with the licensing
24 and disciplinary boards and professional associations of other states and
25 jurisdictions of the United States and foreign countries and a statewide
26 association for physician assistants.
27 9. Direct the preparation and circulation of educational material
28 the board determines is helpful and proper for its licensees.
29 10. Discipline and rehabilitate physician assistants pursuant to
30 this chapter.
31 11. ~~Beginning October 1, 2018,~~ Certify physician assistants for
32 THIRTY-DAY PRESCRIPTION PRIVILEGES FOR SCHEDULE II, SCHEDULE III, SCHEDULE
33 IV AND SCHEDULE V CONTROLLED SUBSTANCES THAT ARE OPIOIDS OR BENZODIAZEPINE
34 AND ninety-day prescription privileges for schedule II, ~~or~~ schedule III,
35 SCHEDULE IV AND SCHEDULE V controlled substances that are not opioids or
36 benzodiazepine if the physician assistant either:
37 (a) Within the preceding three years of application, completed
38 forty-five hours in pharmacology or clinical management of drug therapy or
39 at the time of application is certified by a national commission on the
40 certification of physician assistants or its successor.
41 (b) Met any other requirement established by board rule.
42 B. The board may delegate to the executive director the board's
43 authority pursuant to this section or section 32-2551. The board shall
44 adopt a substantive policy statement pursuant to section 41-1091 for each

1 specific licensing and regulatory authority the board delegates to the
2 executive director.

3 C. The board may make and adopt rules necessary or proper for the
4 administration of this chapter.

5 D. The chairperson may establish subcommittees consisting of board
6 members and define their duties as the chairperson deems necessary to
7 carry out the functions of the board.

8 E. Board employees, including the executive director, temporary
9 personnel and professional medical investigators, are immune from civil
10 liability for good faith actions they take to enforce this chapter.

11 F. In performing its duties pursuant to subsection A of this
12 section, the board may receive and review staff reports on complaints,
13 malpractice cases and all investigations.

14 G. The chairperson and vice chairperson of the Arizona regulatory
15 board of physician assistants are members of the committee on executive
16 director selection and retention established by section 32-1403,
17 subsection G, which is responsible for the appointment of the executive
18 director pursuant to section 32-1405.

19 Sec. 2. Section 32-2532, Arizona Revised Statutes, is amended to
20 read:

21 32-2532. Prescribing, administering and dispensing drugs:
22 limits and requirements; notice

23 A. Except as provided in subsection F of this section, a physician
24 assistant shall not prescribe, dispense or administer:

25 1. A schedule II or schedule III controlled substance as defined in
26 the federal controlled substances act of 1970 (P.L. 91-513; 84 Stat. 1242;
27 21 United States Code section 802) without delegation by the supervising
28 physician, board approval and United States drug enforcement
29 administration registration.

30 2. A schedule IV or schedule V controlled substance as defined in
31 the federal controlled substances act of 1970 without United States drug
32 enforcement administration registration and delegation by the supervising
33 physician.

34 3. Prescription-only medication without delegation by the
35 supervising physician.

36 4. Prescription medication intended to perform or induce an
37 abortion.

38 B. All prescription orders issued by a physician assistant shall
39 contain the name, address and telephone number of the physician
40 assistant. A physician assistant shall issue prescription orders for
41 controlled substances under the physician assistant's own United States
42 drug enforcement administration registration number.

43 ~~C. Unless certified for ninety-day prescription privileges pursuant~~
44 ~~to section 32-2504, subsection A, a physician assistant shall not~~
45 ~~prescribe a schedule II or schedule III controlled substance for a period~~

1 ~~exceeding seventy-two hours.~~ IF CERTIFIED FOR PRESCRIPTION PRIVILEGES
2 PURSUANT TO SECTION 32-2504, SUBSECTION A, INITIAL PRESCRIPTIONS FOR
3 SCHEDULE II CONTROLLED SUBSTANCES THAT ARE OPIOIDS ARE SUBJECT TO THE
4 LIMITS PRESCRIBED IN SECTIONS 32-3248 AND 32-3248.01 IF THE PHYSICIAN
5 ASSISTANT HAS BEEN DELEGATED TO PRESCRIBE SCHEDULE II CONTROLLED
6 SUBSTANCES BY THE SUPERVISING PHYSICIAN PURSUANT TO THIS SECTION. For
7 each schedule IV or schedule V controlled substance, ~~a~~ THE physician
8 assistant may not prescribe the controlled substance more than five times
9 in a six-month period for each patient.

10 D. A prescription for a schedule ~~II~~ or III controlled substance
11 that is an opioid or benzodiazepine is not refillable without the written
12 consent of the supervising physician.

13 E. Prescription-only drugs shall not be dispensed, prescribed or
14 refillable for a period exceeding one year.

15 F. Except in an emergency, a physician assistant may dispense
16 schedule II or schedule III controlled substances for a period of use of
17 not to exceed seventy-two hours with board approval or any other
18 controlled substance for a period of use of not to exceed ninety days and
19 may administer controlled substances without board approval if it is
20 medically indicated in an emergency dealing with potential loss of life or
21 limb or major acute traumatic pain. Notwithstanding the authority granted
22 in this subsection, a physician assistant may not dispense a schedule II
23 controlled substance that is an opioid, except for an implantable device
24 or an opioid that is for medication-assisted treatment for substance use
25 disorders.

26 G. Except for samples provided by manufacturers, all drugs
27 dispensed by a physician assistant shall be:

- 28 ~~1. Prepackaged in a unit-of-use package by a pharmacist.~~
29 ~~2.~~ labeled to show the name of the physician assistant.

30 H. A physician assistant shall not obtain a drug from any source
31 other than the supervising physician or a pharmacist. A physician
32 assistant may receive manufacturers' samples if delegated to do so by the
33 supervising physician.

34 I. If a physician assistant is approved by the board to prescribe,
35 administer or dispense schedule II and schedule III controlled substances,
36 the physician assistant shall maintain an up-to-date and complete log of
37 all schedule II and schedule III controlled substances the physician
38 assistant administers or dispenses. The board may not grant a physician
39 assistant the authority to dispense schedule II controlled substances that
40 are opioids, except for implantable devices or opioids that are for
41 medication-assisted treatment for substance use disorders.

42 J. The board shall advise the Arizona state board of pharmacy and
43 the United States drug enforcement administration of all physician
44 assistants who are authorized to prescribe or dispense drugs and any
45 modification of their authority.

1 K. The Arizona state board of pharmacy shall notify all pharmacies
2 at least quarterly of physician assistants who are authorized to prescribe
3 or dispense drugs.

4 Sec. 3. Section 36-2525, Arizona Revised Statutes, is amended to
5 read:

6 36-2525. Prescription orders; labels; packaging; definition

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

- 17 1. The date issued.
- 18 2. The strength, dosage form or quantity of drug.
- 19 3. The directions for its use.

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

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

26 1. Prescription orders for controlled substances listed in
27 schedules I and II must be maintained in a separate prescription file for
28 controlled substances listed in schedules I and II only.

29 2. Prescription orders for controlled substances listed in
30 schedules III, IV and V must be maintained either in a separate
31 prescription file for controlled substances listed in schedules III, IV
32 and V only or in a form that allows them to be readily retrievable from
33 the other prescription records of the registrant. For the purposes of
34 this paragraph, "readily retrievable" means that, when the prescription is
35 initially filed, the face of the prescription is stamped in red ink in the
36 lower right corner with the letter "C" in a font that is not less than one
37 inch high and that the prescription is filed in the usual consecutively
38 numbered prescription file for noncontrolled substance prescriptions. The
39 requirement to stamp the hard copy prescription with a red "C" is waived
40 if a registrant employs an electronic data processing system or other
41 electronic recordkeeping system for prescriptions that permits
42 identification by prescription number and retrieval of original documents
43 by the prescriber's name, patient's name, drug dispensed and date filled.

44 D. Except in emergency situations in conformity with subsection E
45 of this section, under the conditions specified in subsections F and G of

1 this section or when dispensed directly by a medical practitioner to an
2 ultimate user, a controlled substance in schedule II shall not be
3 dispensed without either the written prescription order in ink or
4 indelible pencil or typewritten and manually signed by the medical
5 practitioner or an electronic prescription order as prescribed by federal
6 law or regulation. Beginning January 1, ~~2019~~ 2020, a schedule II
7 controlled substance that is an opioid may be dispensed ~~in a county with a~~
8 ~~population of one hundred fifty thousand persons or more~~ only with an
9 electronic prescription order as prescribed by federal law or regulation.
10 ~~Beginning July 1, 2019, a schedule II controlled substance that is an~~
11 ~~opioid may be dispensed in a county with a population of less than one~~
12 ~~hundred fifty thousand persons only with an electronic prescription order~~
13 ~~as prescribed by federal law or regulation.~~ A prescription order for a
14 schedule II CONTROLLED substance shall not be dispensed more than ninety
15 days after the date on which the prescription order was
16 issued. Notwithstanding any other provision of this section, a pharmacy
17 may sell and dispense a schedule II controlled substance prescribed by a
18 medical practitioner who is located in another county in this state or in
19 another state if the prescription was issued to the patient according to
20 and in compliance with the applicable laws of the state of the prescribing
21 medical practitioner and federal law. A prescription order for a schedule
22 II controlled substance shall not be refilled. A PHARMACIST IS NOT IN
23 VIOLATION OF THIS SUBSECTION AND MAY DISPENSE A PRESCRIPTION ORDER IN THE
24 FOLLOWING CIRCUMSTANCES:

25 1. DURING ANY TIME PERIOD IN WHICH AN ESTABLISHED ELECTRONIC
26 PRESCRIBING SYSTEM OR A PHARMACY MANAGEMENT SYSTEM IS NOT OPERATIONAL OR
27 AVAILABLE IN A TIMELY MANNER. IF THE ELECTRONIC PRESCRIBING SYSTEM OR A
28 PHARMACY MANAGEMENT SYSTEM IS NOT OPERATIONAL OR AVAILABLE, THE PHARMACIST
29 MAY DISPENSE A PRESCRIPTION ORDER THAT IS WRITTEN FOR A SCHEDULE II
30 CONTROLLED SUBSTANCE THAT IS AN OPIOID. THE PHARMACIST MUST MAINTAIN A
31 RECORD, FOR A PERIOD OF TIME PRESCRIBED BY THE BOARD, OF WHEN THE
32 ELECTRONIC PRESCRIBING SYSTEM OR PHARMACY MANAGEMENT SYSTEM IS NOT
33 OPERATIONAL OR AVAILABLE IN A TIMELY MANNER.

34 2. THE PRESCRIPTION ORDER FOR A SCHEDULE II CONTROLLED SUBSTANCE
35 THAT IS AN OPIOID IS IN WRITING AND INDICATES THAT THE MEDICAL
36 PRACTITIONER WHO ISSUED THE PRESCRIPTION ORDER PROVIDED CARE FOR THE
37 PATIENT IN A VETERANS ADMINISTRATION FACILITY, A HEALTH FACILITY ON A
38 MILITARY BASE, AN INDIAN HEALTH SERVICES HOSPITAL OR OTHER INDIAN HEALTH
39 SERVICE FACILITY, OR A TRIBAL-OWNED CLINIC.

40 E. In emergency situations, emergency quantities of schedule II
41 controlled substances may be dispensed on an oral prescription order of a
42 medical practitioner. Such an emergency prescription order shall be
43 immediately reduced to writing by the pharmacist and shall contain all the
44 information required for schedule II controlled substances except for the
45 manual signing of the order by the medical practitioner. Within seven

1 days after authorizing an emergency oral prescription order, the
2 prescribing medical practitioner shall cause a written prescription order
3 manually signed for the emergency quantity prescribed to be delivered to
4 the dispensing pharmacist or an electronic prescription order to be
5 transmitted to the dispensing pharmacist. In addition to conforming to
6 other requirements for prescription orders for schedule II controlled
7 substances, the prescription order shall indicate electronically or have
8 written on its face "authorization for emergency dispensing" and the date
9 of the oral order. If the prescribing medical practitioner fails to
10 deliver such an emergency prescription order within seven days in
11 conformance with board rules, the pharmacist shall notify the board.
12 Failure of the pharmacist to notify the board voids the authority
13 conferred by this subsection to dispense without a prescription order of a
14 medical practitioner that is electronic or that is written and manually
15 signed.

16 F. ~~NOTWITHSTANDING SUBSECTIONS D AND N OF THIS SECTION, the~~
17 ~~following may be transmitted to a pharmacy by fax by~~ a patient's medical
18 practitioner or the medical practitioner's agent MAY TRANSMIT TO A
19 PHARMACY BY FAX A PRESCRIPTION ORDER WRITTEN FOR A SCHEDULE II CONTROLLED
20 SUBSTANCE, INCLUDING OPIOIDS, IF THE PRESCRIPTION ORDER IS ANY OF THE
21 FOLLOWING:

22 1. ~~A prescription order written for a schedule II controlled~~
23 ~~substance~~ To be compounded for the direct administration to a patient by
24 parenteral, intravenous, intramuscular, subcutaneous or intraspinal
25 infusion.

26 2. ~~A prescription order written for any schedule II controlled~~
27 ~~substance~~ For a resident of a long-term care facility.

28 3. ~~A prescription order written for a schedule II controlled~~
29 ~~substance~~ For a patient WHO IS enrolled in a hospice care program that is
30 certified or paid for by medicare under title XVIII or a hospice program
31 that is licensed by this state. The medical practitioner or the medical
32 practitioner's agent must note on the prescription that the patient is a
33 hospice patient.

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

37 H. Except when dispensed directly by a medical practitioner to an
38 ultimate user, a controlled substance included in schedule III or IV that
39 requires a prescription order as determined under state or federal laws
40 shall not be dispensed without a written or oral prescription order of a
41 medical practitioner or an electronic prescription order as prescribed by
42 federal law or regulation. The prescription order shall not be filled or
43 refilled more than six months after the date on which the prescription
44 order was issued. A prescription order authorized to be refilled shall
45 not be refilled more than five times. Additional quantities may only be

1 authorized by the prescribing medical practitioner through issuance of a
2 new prescription order that shall be treated by the pharmacist as a new
3 and separate prescription order.

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

11 J. A controlled substance that is listed in schedule III, IV or V
12 and that does not require a prescription order as determined under state
13 or federal laws may be dispensed at retail by a pharmacist or a pharmacy
14 intern under the pharmacist's supervision without a prescription order to
15 a purchaser who is at least eighteen years of age if all of the following
16 are true:

17 1. It is for a legitimate medical purpose.

18 2. Not more than two hundred forty cubic centimeters (eight ounces)
19 of any such controlled substance containing opium, nor more than one
20 hundred twenty cubic centimeters (four ounces) of any other such
21 controlled substance, nor more than forty-eight dosage units of any such
22 controlled substance containing opium, nor more than twenty-four dosage
23 units of any other controlled substance may be dispensed at retail to the
24 same purchaser in any given forty-eight-hour period.

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

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

31 5. A bound record book for dispensing controlled substances under
32 this subsection is maintained by the pharmacist and contains the name and
33 address of the purchaser, the name and quantity of the controlled
34 substance purchased, the date of each purchase and the name or initials of
35 the pharmacist or pharmacy intern who dispensed the substance to the
36 purchaser. The book shall be maintained in conformity with the
37 recordkeeping requirements of section 36-2523.

38 K. In the absence of a law requiring a prescription for a schedule
39 V controlled substance, the board, by rules, may require, or remove the
40 requirement of, a prescription order for a schedule V controlled
41 substance.

42 L. The label on a container of a controlled substance that is
43 directly dispensed by a medical practitioner or pharmacist and that is not
44 for the immediate administration to the ultimate user, such as a bed
45 patient in a hospital, shall bear the name and address of the dispensing

1 medical practitioner or pharmacist, the serial number, the date of
2 dispensing, the name of the prescriber, the name of the patient or, if an
3 animal, the name of the owner of the animal and the species of the animal,
4 the directions for use and cautionary statements, if any, contained in the
5 prescription order or required by law. If the controlled substance is
6 included in schedule II, III or IV, the label shall bear a transfer
7 warning to the effect: "Caution: federal law prohibits the transfer of
8 this drug to any person other than the patient for whom it was
9 prescribed". The container of a schedule II controlled substance that is
10 an opioid that is directly dispensed by a pharmacist and that is not for
11 the immediate administration to the ultimate user shall have a red cap and
12 a warning label prescribed by the board about potential addiction. The
13 board or the executive director, if delegated by the board, may waive the
14 red cap requirement if implementing the requirement is not feasible
15 because of the specific dosage form or packaging type.

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

19 1. Properly registered by the United States drug enforcement
20 administration.

21 2. Licensed in good standing in the United States jurisdiction in
22 which the medical practitioner practices.

23 3. Authorized to issue such prescriptions in the jurisdiction in
24 which the medical practitioner is licensed.

25 N. Notwithstanding any other provision of this section, beginning
26 January 1, ~~2019~~ 2020, each prescription order, **EXCEPT A PRESCRIPTION ORDER**
27 **UNDER SUBSECTION F OF THIS SECTION**, that is issued by a medical
28 practitioner ~~in a county with a population of one hundred fifty thousand~~
29 ~~persons or more~~ for a schedule II controlled substance that is an opioid
30 shall be transmitted electronically to the dispensing pharmacy.
31 ~~Notwithstanding any other provision of this section, beginning July 1,~~
32 ~~2019, each prescription order that is issued by a medical practitioner in~~
33 ~~a county with a population of less than one hundred fifty thousand persons~~
34 ~~for a schedule II controlled substance that is an opioid shall be~~
35 ~~transmitted electronically to the dispensing pharmacy.~~ **A MEDICAL**
36 **PRACTITIONER IS NOT IN VIOLATION OF THIS SUBSECTION:**

37 1. **DURING ANY TIME IN WHICH AN ESTABLISHED ELECTRONIC PRESCRIBING**
38 **SYSTEM OR A PHARMACY MANAGEMENT SYSTEM IS NOT OPERATIONAL OR AVAILABLE IN**
39 **A TIMELY MANNER. IF THE ELECTRONIC PRESCRIBING SYSTEM OR A PHARMACY**
40 **MANAGEMENT SYSTEM IS NOT OPERATIONAL OR AVAILABLE, THE MEDICAL**
41 **PRACTITIONER MAY WRITE A PRESCRIPTION ORDER FOR A SCHEDULE II CONTROLLED**
42 **SUBSTANCE THAT IS AN OPIOID. THE MEDICAL PRACTITIONER SHALL INDICATE ON**
43 **THE WRITTEN PRESCRIPTION ORDER THAT THE ELECTRONIC PRESCRIBING SYSTEM OR**
44 **PHARMACY MANAGEMENT SYSTEM IS NOT OPERATIONAL OR AVAILABLE. THE MEDICAL**
45 **PRACTITIONER MUST MAINTAIN A RECORD, FOR A PERIOD OF TIME PRESCRIBED BY**

1 THE BOARD, OF WHEN THE ELECTRONIC PRESCRIBING SYSTEM OR PHARMACY
2 MANAGEMENT SYSTEM IS NOT OPERATIONAL OR AVAILABLE IN A TIMELY MANNER.

3 2. IF THE MEDICAL PRACTITIONER WRITES A PRESCRIPTION ORDER FOR A
4 SCHEDULE II CONTROLLED SUBSTANCE THAT IS AN OPIOID THAT WILL BE DISPENSED
5 FOR THE PATIENT FROM A VETERANS ADMINISTRATION FACILITY, A HEALTH FACILITY
6 ON A MILITARY BASE, AN INDIAN HEALTH SERVICES HOSPITAL OR OTHER INDIAN
7 HEALTH SERVICE FACILITY, OR A TRIBAL-OWNED CLINIC.

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

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

14 ~~Q. The board shall establish a process to grant a waiver for the
15 requirement in subsections D and N of this section for electronic
16 prescription orders to a medical practitioner who lacks adequate access to
17 broadband or faces other hardships that prevent the medical practitioner
18 from implementing electronic prescription orders. A pharmacist is not
19 required to verify with a medical practitioner or the board whether the
20 medical practitioner has received a waiver pursuant to this subsection.~~

21 Q. IN CONSULTATION WITH THE TASK FORCE ESTABLISHED PURSUANT TO
22 SECTION 36-2603, THE BOARD MAY PRESCRIBE BY RULE ADDITIONAL EXCEPTIONS TO
23 THE ELECTRONIC PRESCRIBING REQUIREMENTS SPECIFIED IN THIS SECTION FOR BOTH
24 PHARMACISTS AND MEDICAL PRACTITIONERS.

25 R. NOTWITHSTANDING SUBSECTIONS D AND N OF THIS SECTION, A MEDICAL
26 PRACTITIONER WHO IS LICENSED PURSUANT TO TITLE 32, CHAPTER 21 IS NOT
27 REQUIRED TO COMPLY WITH THE ELECTRONIC PRESCRIBING REQUIREMENTS OF
28 SUBSECTIONS D AND N OF THIS SECTION UNTIL THE ARIZONA STATE VETERINARY
29 MEDICAL EXAMINING BOARD DETERMINES THAT ELECTRONIC PRESCRIBING SOFTWARE IS
30 WIDELY AVAILABLE FOR VETERINARIANS AND NOTIFIES THE ARIZONA STATE BOARD OF
31 PHARMACY OF THAT DETERMINATION.

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

34 Sec. 4. Section 36-2603, Arizona Revised Statutes, is amended to
35 read:

36 36-2603. Computerized central database tracking system task
37 force; consultation on electronic prescribing;
38 membership

39 A. The board shall appoint a task force to help it administer the
40 computerized central database tracking system, TO IDENTIFY EDUCATIONAL,
41 OUTREACH AND SUPPORT SERVICES TO ADVANCE MEDICAL PRACTITIONERS' ADOPTION
42 OF ELECTRONIC PRESCRIBING OF SCHEDULE II CONTROLLED SUBSTANCES AND
43 PHARMACY IMPLEMENTATION OF SECTION 36-2525 AND TO CONSULT WITH REGARDING
44 RECOMMENDATIONS FOR EXCEPTIONS TO THE ELECTRONIC PRESCRIBING REQUIREMENTS

1 **PRESCRIBED IN SECTION 36-2525.** The chairperson of the board shall chair
2 the task force. The task force shall include the following members:
3 1. Pharmacists, medical practitioners and other licensed health
4 care providers.
5 2. Representatives of professional societies and associations for
6 pharmacists, medical practitioners and other licensed health care
7 providers.
8 3. Representatives of professional licensing boards.
9 4. Representatives of the Arizona health care cost containment
10 system administration.
11 5. Representatives of state and federal agencies that have an
12 interest in ~~the control of~~ **CONTROLLING** controlled substances.
13 6. Criminal prosecutors.
14 **7. REPRESENTATIVES OF A HEALTH INFORMATION ORGANIZATION IN THIS**
15 **STATE.**
16 B. The task force shall meet to establish the procedures and
17 conditions relating to the release of prescription information pursuant to
18 section 36-2604. The task force shall meet at least once each year and at
19 the call of the chairperson.
20 C. Task force members serve at the pleasure of the board and are
21 not eligible to receive compensation or reimbursement of expenses.
22 Sec. 5. Retroactivity
23 Section 36-2525, Arizona Revised Statutes, as amended by this act,
24 applies retroactively to from and after December 31, 2018.
25 Sec. 6. Emergency
26 This act is an emergency measure that is necessary to preserve the
27 public peace, health or safety and is operative immediately as provided by
28 law.