

Fifty-seventh Legislature  
Second Regular Session

COMMITTEE ON HEALTH & HUMAN SERVICES  
HOUSE OF REPRESENTATIVES AMENDMENTS TO H.B. 2444  
(Reference to printed bill)

Amendment instruction key:  
[GREEN UNDERLINING IN BRACKETS] indicates text added to statute or previously enacted session law.  
[Green underlining in brackets] indicates text added to new session law or text restoring existing law.  
[GREEN STRIKEOUT IN BRACKETS] indicates new text removed from statute or previously enacted session law.  
[Green strikeout in brackets] indicates text removed from existing statute, previously enacted session law or new session law.  
<<Green carets>> indicate a section added to the bill.  
<<Green strikeout in carets>> indicates a section removed from the bill.

1 The bill as proposed to be amended is reprinted as follows:  
2       Section 1. Title 32, chapter 18, article 3, Arizona Revised  
3 Statutes, is amended by adding section 32-1979.04, to read:  
4       32-1979.04. Pharmacists: statewide written protocol:  
5                   independent testing; treatment; health  
6                   conditions; notification requirements  
7       A. PURSUANT TO A STATEWIDE WRITTEN PROTOCOL APPROVED BY THE BOARD,  
8 A PHARMACIST MAY INDEPENDENTLY ORDER, PERFORM AND INTERPRET TESTS THAT ARE  
9 AUTHORIZED BY THE UNITED STATES FOOD AND DRUG ADMINISTRATION AND WAIVED  
10 UNDER THE CLINICAL LABORATORY IMPROVEMENT AMENDMENTS OF 1988 (P.L.  
11 100-578; 102 STAT. 2903; 42 UNITED STATES CODE SECTION 201). A PHARMACIST  
12 MAY INDEPENDENTLY INITIATE TREATMENT TO ELIGIBLE PERSONS WHO ARE AT LEAST  
13 [~~SIX~~] [TEN] YEARS OF AGE OR THE AGE AUTHORIZED BY THE TREATMENT, WHICHEVER  
14 AGE IS OLDER, AND WHO HAVE TEST RESULTS THAT INDICATE THE NEED FOR  
15 TREATMENT, BY A TEST THAT IS AUTHORIZED BY THE UNITED STATES FOOD AND DRUG  
16 ADMINISTRATION AND WAIVED UNDER THE CLINICAL LABORATORY IMPROVEMENT  
17 AMENDMENTS OF 1988, FOR ANY OF THE FOLLOWING:  
18       1. INFLUENZA.  
19       2. GROUP A STREPTOCOCCUS PHARYNGITIS.  
20       3. SARS-COV-2 OR ANY OTHER CORONAVIRUS RESPIRATORY ILLNESS.  
21       [4. ~~HUMAN IMMUNODEFICIENCY VIRUS PREEXPOSURE PROPHYLAXIS OR~~  
22 ~~POSTEXPOSURE PROPHYLAXIS.~~]  
23       [5.] [4.] A CONDITION RELATED TO AN EMERGING OR EXISTING PUBLIC  
24 HEALTH THREAT IDENTIFIED BY THE DEPARTMENT OF HEALTH SERVICES FOR WHICH A  
25 STATEWIDE STANDING ORDER, RULE OR EXECUTIVE ORDER IS ISSUED.  
26       B. WHEN DEVELOPING THE STATEWIDE WRITTEN PROTOCOL, THE BOARD SHALL  
27 ADDRESS AT A MINIMUM THE FOLLOWING:  
28       1. DOCUMENTATION.

1           2. RECORDS RETENTION.  
2           3. REFERRALS.  
3           4. PATIENT SCREENING REQUIREMENTS AND OBTAINING RELEVANT MEDICAL  
4 HISTORY.  
5           5. EXCLUSION CRITERIA.  
6           6. TREATMENT INSTRUCTIONS BASED ON THE PATIENT'S AGE AND MEDICAL  
7 HISTORY.  
8           7. FOLLOW-UP MAINTENANCE AND CARE PLANS.  
9           8. ANY NECESSARY PHARMACIST TRAINING OR CERTIFICATION REQUIREMENTS.  
10          C. A PHARMACIST WHO ORDERS OR CONDUCTS TESTING OR TREATS HEALTH  
11 CONDITIONS PURSUANT TO SUBSECTION A OF THIS SECTION SHALL USE ANY TEST  
12 THAT MAY GUIDE CLINICAL DECISION-MAKING FOR WHICH A WAIVER HAS BEEN  
13 OBTAINED UNDER THE CLINICAL LABORATORY IMPROVEMENT AMENDMENTS OF 1988, OR  
14 THE FEDERAL RULES ADOPTED THEREUNDER, OR ANY SCREENING PROCEDURE THAT IS  
15 ESTABLISHED BY THE STATEWIDE WRITTEN PROTOCOL.  
16          D. A PHARMACIST SHALL USE EVIDENCE-BASED CLINICAL GUIDELINES  
17 PUBLISHED BY THE UNITED STATES CENTERS FOR DISEASE CONTROL AND PREVENTION  
18 OR THE INFECTIOUS DISEASES SOCIETY OF AMERICA, THE AMERICAN ACADEMY OF  
19 PEDIATRICS COMMITTEE ON INFECTIOUS DISEASE OR ANOTHER CLINICALLY  
20 RECOGNIZED RECOMMENDATION IN PROVIDING PATIENT TREATMENT PURSUANT TO  
21 SUBSECTION A OF THIS SECTION.  
22          E. AN ELIGIBLE PERSON MUST MEET CRITERIA FOR TREATMENT BASED ON THE  
23 STATEWIDE WRITTEN PROTOCOL THAT SPECIFIES THE FOLLOWING:  
24           1. PATIENT INCLUSION AND EXCLUSION CRITERIA.  
25           2. EXPLICIT MEDICAL REFERRAL CRITERIA.  
26          F. A PHARMACIST SHALL REFER A PATIENT TO THE PATIENT'S PRIMARY CARE  
27 PROVIDER, IF ONE IS IDENTIFIED, OR RECOMMEND FOLLOW UP WITH A PRIMARY CARE  
28 PROVIDER, IF THE PATIENT EITHER:  
29           1. IS NOT ELIGIBLE FOR TREATMENT PURSUANT TO THIS SECTION AND  
30 PRESENTS WITH SYMPTOMS.  
31           2. DOES NOT RESPOND TO THE INITIAL TREATMENT PROVIDED PURSUANT TO  
32 THIS SECTION.  
33          G. A PHARMACIST WHO INITIATES A TREATMENT UNDER THIS SECTION SHALL:  
34           1. NOTIFY THE PATIENT'S PRIMARY CARE PROVIDER, IF ONE IS  
35 IDENTIFIED, WITHIN SEVENTY-TWO HOURS AFTER INITIATING TREATMENT PURSUANT  
36 TO THIS SECTION. THE NOTICE SHALL INCLUDE THE PATIENT'S NAME, THE  
37 TREATMENT INITIATED AND THE DATE OF TREATMENT AND MAY BE SUBMITTED BY  
38 ENTRY INTO AN ELECTRONIC HEALTH RECORD OR BY TELEPHONE, FAX, MAIL OR  
39 EMAIL. THE PHARMACIST SHALL MAKE A REASONABLE EFFORT TO IDENTIFY THE  
40 PATIENT'S PRIMARY CARE PROVIDER BY AT LEAST ONE OF THE FOLLOWING METHODS:  
41           (a) CHECKING PHARMACY RECORDS.  
42           (b) REQUESTING THE INFORMATION FROM THE PATIENT OR, FOR A PATIENT  
43 UNDER EIGHTEEN YEARS OF AGE, THE PATIENT'S PARENT OR GUARDIAN.  
44           2. MAINTAIN A RECORD OF THE RESULTS OF ANY TESTING OR SCREENING FOR  
45 WHICH A TREATMENT IS INITIATED PURSUANT TO THIS SECTION, INCLUDING A  
46 SUMMARY OF THE VISIT AND PATIENT ASSESSMENT INFORMATION, FOR A PERIOD OF  
47 SEVEN YEARS.

1       3. NOTIFY THE PATIENT'S PRIMARY CARE PROVIDER, IF ONE IS  
2 IDENTIFIED, WITHIN FORTY-EIGHT HOURS AFTER THE OCCURRENCE OF ANY ADVERSE  
3 REACTION THAT IS REPORTED TO OR WITNESSED BY THE PHARMACIST AS A RESULT OF  
4 THE TREATMENT PROVIDED PURSUANT TO THIS SECTION.

5       4. PROVIDE INFORMATIONAL MATERIALS TO THE PATIENT REQUESTING  
6 TREATMENT OR, FOR A PATIENT UNDER EIGHTEEN YEARS OF AGE, TO THE PATIENT'S  
7 PARENT OR GUARDIAN ABOUT THE IMPORTANCE OF PEDIATRIC PREVENTIVE HEALTH  
8 CARE VISITS AS RECOMMENDED BY THE AMERICAN ACADEMY OF PEDIATRICS.

9       H. A PHARMACIST MAY DELEGATE THE TASK OF PERFORMING A TEST WAIVED  
10 BY THE CLINICAL LABORATORY IMPROVEMENT AMENDMENTS OF 1988 TO A LICENSED  
11 MEMBER OF THE PHARMACY STAFF WHO IS UNDER THE SUPERVISION OF THE  
12 PHARMACIST. A PHARMACIST MAY NOT DELEGATE ANY TASKS THAT INCLUDE CLINICAL  
13 JUDGMENT OR TREATMENT AND MAY DELEGATE ONLY ANCILLARY DUTIES AS ALLOWED BY  
14 BOARD RULES.

15       I. THIS SECTION DOES NOT REQUIRE A PHARMACIST TO PROVIDE THE  
16 SERVICES AUTHORIZED BY THIS SECTION.

17       J. THIS SECTION DOES NOT ESTABLISH A CAUSE OF ACTION AGAINST A  
18 PATIENT'S PRIMARY CARE PROVIDER FOR ANY ADVERSE REACTION, COMPLICATION OR  
19 NEGATIVE OUTCOME ARISING FROM ANY TREATMENT INITIATED BY A PHARMACIST  
20 PURSUANT TO THIS SECTION.

21       K. A PHARMACIST MAY NOT INDEPENDENTLY INITIATE A TREATMENT USING  
22 OPIOIDS FOR A PATIENT.

23       L. A PHARMACIST MAY NOT INDEPENDENTLY ORDER A TEST OR SCREENING OR  
24 TREAT A MINOR WITHOUT THE WRITTEN CONSENT OF THE MINOR'S PARENT OR  
25 GUARDIAN.

26       M. A PHARMACY SHALL EITHER DISPLAY A NOTICE OR INCLUDE IN A  
27 PATIENT'S CONSENT PAPERWORK THAT THE TESTING AND TREATMENT BEING PERFORMED  
28 PURSUANT TO THIS SECTION ARE BEING PERFORMED BY A PHARMACIST WITHOUT  
29 CONSULTATION WITH OR OVERSIGHT BY A PHYSICIAN AND THAT THE PATIENT SHOULD  
30 CONSULT WITH A PRIMARY CARE PROVIDER IF SYMPTOMS CONTINUE.

31       Sec. 2. Independent testing and treatment advisory committee;  
32                   duties; members; delayed repeal

33       A. The Arizona state board of pharmacy shall convene an advisory  
34 committee to assist the board in developing this state's written protocols  
35 relating to pharmacists' independent authority to order testing and  
36 initiate treatments pursuant to section 32-1979.04, Arizona Revised  
37 Statutes, as added by this act. The advisory committee shall also make  
38 recommendations to the Arizona state board of pharmacy regarding the  
39 protocols required pursuant to that section.

40       B. The advisory committee shall include at least the following:

41           1. Two pharmacists who are licensed pursuant to title 32, chapter  
42 18, Arizona Revised Statutes, and who are appointed by the Arizona state  
43 board of pharmacy.

1           2. Two physicians who are licensed pursuant to title 32, chapter 13  
2 or 17, Arizona Revised Statutes, who specialize in primary care, at least  
3 one of whom has a patient population that is substantially composed of  
4 children and adolescents, and who are appointed by the Arizona medical  
5 board or the Arizona board of osteopathic examiners in medicine and  
6 surgery.

7           3. One person who represents a nonprofit patient advocacy  
8 organization and who is appointed by the governor.

9           4. One nurse practitioner who is licensed pursuant to title 32,  
10 chapter 15, Arizona Revised Statutes, who specializes in primary care and  
11 who is able to prescribe medication and who is appointed by the Arizona  
12 state board of nursing.

13           C. Advisory committee members are not eligible for compensation or  
14 reimbursement of expenses.

15           D. This section is repealed from and after December 31, 2027.

16 Enroll and engross to conform

17 Amend title to conform

And, as so amended, it do pass

SELINA BLISS  
CHAIRMAN

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