KEEP YOUR BOARD PROFILE UP TO DATE

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https://azdo.glsuite.us/glsuiteweb/clients/azbom/Private/changeaddress/login.aspx

HIGHLIGHTS IN THIS ISSUE

The AMB Move - Page 1
Laws Related to the Practice of Medicine, Effective January 1, 2018 - Page 2
Medical Consultants Needed - Page 3
From the Desk of the Chief Medical Consultant - Page 4
In the Spotlight - Page 5
Opioid Crisis Legislation, what it means for physicians - Page 6

Arizona Medical Board (AMB)

New Address
Effective: January 8, 2018

Arizona Medical Board
1740 W. Adams, Suite 4000

The AMB completed its move to 1740 W. Adams in early January 2018. The AMB shares the new office space with 26 other regulatory boards, including the Arizona Board of Osteopathic Examiners, the Arizona Board of Nursing and the Arizona Dental Board.
Laws Related to Practice of Medicine Effective January 1, 2018

Senate Bill 1452

During the last legislative session, the Fifty-third Legislature, First Regular Session (2017), passed Senate Bill 1452. Its content is related to health regulatory boards.

Here are some of the highlights of the new law, as it relates to the AMB, with an effective date of January 1, 2018:

1. Requires all final non-disciplinary orders or actions and all disciplinary actions be available on the AMB’s website, and prohibits letters of concern and advisory letters from being available on a Board’s website.

2. Requires the non-disciplinary action(s) posted to AMB’s website be posted for only five years.

3. States all non-disciplinary orders or actions issued after January 1, 2018, and all disciplinary actions issued against a licensee or certificate holder are available to the public (by contacting the AMB directly).

4. Prohibits pending complaints and investigations from being disclosed to the public.

5. Allows the AMB, in addition to any other disciplinary action that may be taken, to impose a requirement for a reimbursement of fees paid to a licensee by or on behalf of the patient if request by the patient on an AMB-prescribed complaint form.
Outside Medical Consultants: Your Profession Needs YOU

There community needs physicians to review investigation cases for the AMB as outside medical consultants ("OMCs").

OMCs are professionals who receive a stipend and may be eligible for continuing medical education credit(s). OMCs evaluate investigatory cases for standard of care and provide written comments for AMB staff to review in the course of an investigation.

We need Arizona licensed physicians in ALL specialties, but there is high need for the following:

<table>
<thead>
<tr>
<th>Addiction Medicine</th>
<th>Interventional Cardiology</th>
<th>Medical Oncology</th>
<th>Gynecological Oncology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain Management</td>
<td>Cardiothoracic Surgery</td>
<td>Hematology/Oncology</td>
<td>Interventional Radiology</td>
</tr>
<tr>
<td>Pain Medicine</td>
<td>Clinical Cardiac Electrophysiology</td>
<td>Surgical Oncology</td>
<td>Neurology</td>
</tr>
<tr>
<td>Pharmacology and Toxicology</td>
<td>Anatomic/Clinical (Surgical) Pathology</td>
<td>Correctional Health</td>
<td>Bariatric Surgery</td>
</tr>
</tbody>
</table>

Please contact us at omc@azmd.gov for details, or call (480) 551-2700.

Dear Physician, Did You Know...

All felony charges and certain Misdemeanor charges must be reported to the AMB in writing within ten (10) working days after the charge is filed.

A.R.S. §32-3208(A)- A health professional who has been charged with a misdemeanor involving conduct that may affect patient safety or a felony after receiving or renewing a license or certificate must notify the health professional's regulatory board in writing within ten working days after the charge is filed.

*Includes DUI, assault, solicitation, disorderly conduct, and theft

**A full list of reportable misdemeanors and moral turpitude offenses are available on the AMB's website under Regulation.

All prescriptions issued by a physician assistant shall contain the name, address, and telephone number of the supervising physician.

A.R.S. §32–2532(B)– All prescription orders issued by a physician assistant shall contain the name, address and telephone number of the supervising physician. A physician assistant shall issue prescription orders for controlled substances under the physician assistant’s own drug enforcement administration registration number.
STAYING OUT OF TROUBLE
Opioids and Benzos: Check that database!

The AMB has received a number of questions about the new statutory requirements for accessing the Controlled Substances Prescription Monitoring Program database (CSPMP) prior to prescribing opioids and benzodiazepines. Hopefully the following will be helpful to some.

First, a couple of disclaimers. I am not an attorney. Also, the new requirements did not come about through any action by the AMB, but have been imposed by a new Arizona statute.

Here is a link to the pharmacy board website which may be helpful. (Pages 14-16 summarize the statutory requirements.)


A few bullet points might be helpful to address some of the questions asked by physicians on this issue:

• The requirement to access the CSPMP only applies to opioids and benzodiazepines.

• There are several exceptions to the requirement identified in the statute (see pages 15-16 in the link.) However, there are no exceptions identified that pertain to the age of the patient. Therefore, the requirement to access the CSPMP would apply to opioids and benzodiazepines prescribed to a minor unless the prescribing situation falls into one of the other exceptions.

• The law went into effect on October 16, 2017.

• The law does not state how physician compliance will be monitored. The database does keep track, of course, of utilization of the CSPMP as well as controlled substances prescribed in Arizona.

• Although the requirement applies only to opioids and benzodiazepines, the CSPMP also tracks all controlled substances prescribed in Arizona. Physicians are strongly encouraged to access the database for patients being prescribed other controlled substances if and when appropriate.

• In addition to the statute, Arizona Department of Health Services (ADHS) is developing Rules regarding application of the new statute. At the time of this writing, this is a work in progress. The link below provides some information that may be helpful. I would comment that although the ADHS doesn't regulate physicians directly, it does regulate entities that employ or contract with physicians. Therefore the final ADHS Rules will certainly impact physicians.


William Wolf, MD
Chief Medical Consultant
Raquel Rivera, Investigations Manager, is in the Spotlight this issue.

Raquel started with the AMB as a Senior Medical Investigator in 2012 and then promoted to Manager in July 2016. She is Council on Licensure, Enforcement and Regulation (CLEAR) certified. Raquel also earned the designation of Certified Medical Board Investigator (CMBI) by the Administrators in Medicine (AIM).

Prior to joining the AMB, Raquel worked in Medicaid and Medicare insurance and was a Health Unit Coordinator at a local hospital. Raquel holds a Bachelor’s in Business Communications and a Master’s in Public Health from Grand Canyon University. She is a past intern with the Greater Valley Area Health Education Center and worked with the Centers for Disease Control to create a public service announcement addressing health care barriers in minority communities.

Raquel is grateful to be able to bring a public health perspective to occupational and professional regulation. Raquel provides presentations on behalf of the AMB at professional and educational seminars, including Arizona State University’s Health Care Compliance and Regulation program. She enjoys the opportunity to educate students and physicians about the role of the AMB in Arizona.

Raquel enjoys spending time with her family. She considers herself a ‘foodie’ and also enjoys vacationing to Mexico whenever possible.

Upcoming AMB Meetings

February 13 - 14, 2018 - Regular Session Meeting
March 8, 2018 - Special Teleconference Meeting
April 16 - 17, 2018 - Regular Session Meeting
May 10, 2018 - Special Teleconference Meeting

please consult www.azmd.gov for meeting and other Agency information
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.

For post-surgical procedures, the law limits an initial prescription for a schedule II controlled substance for pain management to a 5-day supply and permits a 14-day supply for initial prescriptions following a surgical procedure.

Initial prescription supply limitations do not apply IF a patient: a) has an active oncology diagnosis; b) has a traumatic injury, excluding a surgical procedure; c) is receiving hospice care, end-of-life care, palliative care, treatment for burns or skilled nursing care; or d) is receiving MAT for a substance use disorder, and specifies that a health professional whose controlled substance prescribing authority is otherwise more restrictive is subject to the more restrictive prescribing requirements.

The law prohibits a health professional who is authorized to prescribe controlled substances from issuing a new prescription order for a schedule II controlled substance for pain management that exceeds 90 morphine milligram equivalents (MMEs), unless the prescription is:

a) a refill or extension of an existing prescription;

Article continues on the next page...
Continued from previous page...

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:

For a primer from Governor Ducey’s Office related to SB1001 and the Act:
https://azgovernor.gov/sites/default/files/opioidepidemicactweb_0.pdf