

## DEPARTMENT OF HUMAN SERVICES, DIVISION OF MEDICAL SERVICES

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**SUBJECT:** Pharmacy Manual Update 3-21 and SPA 2022-0001

**DESCRIPTION:**

Statement of Necessity

The 93<sup>rd</sup> General Assembly enacted Acts 406, 407, 408, and 503, which give pharmacists a new scope of practice to prescribe certain vaccines, immunizations, and certain prescriptions. They also allow for prescription of over the counter (OTC) drugs and testing for certain infections and viruses per protocol. These Acts were put into place officially in compliance with the Prep Act due to COVID-19 U.S. Department of Health and Human Services (HHS) regulation, but also expand other prescribing and testing allowances for pharmacists individually. Legislation did not address reimbursement to pharmacists for these services but rather allows pharmacists to be the prescriber on the pharmacy and medical claims in the pharmacy. The Division of Medical Services is revising Section 201.100 of the Pharmacy Manual to comply with the Acts. The Medicaid State Plan Amendment (SPA) has been updated to reflect the changes in the Acts.

Rule Summary

Pharmacy Manual Section II, Section 201.100

- Renamed the section title
- Added, “The Arkansas Medicaid Program will allow pharmacists to enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol.”
- Changed seven (7) to three (3)
- Deleted “...to eighteen (18) years of age under a general written...”
- Added “...and older under current...”
- Deleted “The Arkansas Medicaid Program will continue to reimburse pharmacies the cost and administration fee of selected vaccines for Medicaid beneficiaries nineteen (19) years of age and older.”

State Plan Amendment (SPA)

- Page 3.1-A, page 3b: Added “(7) Pharmacists. Pharmacists may enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol.”

- Page 3.1-B, page 3d: Added “(7) Pharmacists. Pharmacists may enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol.”

**PUBLIC COMMENT:** A public hearing was held on this rule on March 24, 2022. The public comment period expired on April 11, 2022. The agency indicated that it received no public comments.

The proposed effective date is June 1, 2022.

**FINANCIAL IMPACT:** The agency indicated that this rule has a financial impact.

Per the agency, the total cost to implement this rule is \$9,167 for the current fiscal year (\$2,602 in general revenue and \$6,565 in federal funds) and \$110,000 for the next fiscal year (\$31,218 in general revenue and \$78,782 in federal funds). The total estimated cost by fiscal year to state, county, and municipal government as a result of this rule is \$2,602 for the current fiscal year and \$31,218 for the next fiscal year.

**LEGAL AUTHORIZATION:** The Department of Human Services has the responsibility to administer assigned forms of public assistance and is specifically authorized to maintain an indigent medical care program (Arkansas Medicaid). *See* Ark. Code Ann. §§ 20-76-201(1), 20-77-107(a)(1). The Department has the authority to make rules that are necessary or desirable to carry out its public assistance duties. Ark. Code Ann. § 20-76-201(12). The Department and its divisions also have the authority to promulgate rules as necessary to conform their programs to federal law and receive federal funding. Ark. Code Ann. § 25-10-129(b). This rule implements Acts 406, 407, 408, and 503 of 2021.

Act 406, sponsored by Representative Justin Boyd, allowed pharmacists to prescribe, administer, deliver, distribute, or dispense vaccines, immunizations, and medications to treat adverse reactions to administered vaccines.

Act 407, also sponsored by Representative Boyd, authorized pharmacy technicians to administer vaccines and immunizations.

Act 408, sponsored by Representative Aaron Pilkington, amended the provisions of the Arkansas Code concerning the practice of pharmacy and authorized pharmacists to provide access to and administration of oral contraceptives.

Act 503, sponsored by Representative Lee Johnson, allowed pharmacists to treat certain health conditions, modified physician dispensing and allowed delegation of physician dispensing.

**QUESTIONNAIRE FOR FILING PROPOSED RULES AND REGULATIONS  
WITH THE ARKANSAS LEGISLATIVE COUNCIL**

DEPARTMENT/AGENCY Department of Human Services  
DIVISION Division of Medical Services  
DIVISION DIRECTOR Elizabeth Pitman  
CONTACT PERSON Mac Golden  
ADDRESS P. O. Box 1437, Slot S295 Little Rock, AR 72203-1437  
PHONE NO. 501-320-6383 FAX NO. 501-404-4619 E-MAIL Mac.E.Golden@dhs.arkansas.gov  
NAME OF PRESENTER AT COMMITTEE MEETING Elizabeth Pitman  
PRESENTER E-MAIL Elizabeth.Pitman@dhs.arkansas.gov

**INSTRUCTIONS**

- A. Please make copies of this form for future use.
- B. Please answer each question **completely** using layman terms. You may use additional sheets, if necessary.
- C. If you have a method of indexing your rules, please give the proposed citation after "Short Title of this Rule" below.
- D. Submit two (2) copies of this questionnaire and financial impact statement attached to the front of two (2) copies of the proposed rule and required documents. Mail or deliver to:

Rebecca Miller-Rice  
Administrative Rules Review Section  
Arkansas Legislative Council  
Bureau of Legislative Research  
One Capitol Mall, 5<sup>th</sup> Floor  
Little Rock, AR 72201

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1. What is the short title of this rule? Pharmacy Manual Update 3-21 and SPA 2022-0001

2. What is the subject of the proposed rule? See Attached.

3. Is this rule required to comply with a federal statute, rule, or regulation? Yes  No   
If yes, please provide the federal rule, regulation, and/or statute citation. prep-act-guidance.pdf (hhs.gov)

4. Was this rule filed under the emergency provisions of the Administrative Procedure Act?  
Yes  No

If yes, what is the effective date of the emergency rule? \_\_\_\_\_

When does the emergency rule expire? \_\_\_\_\_

Will this emergency rule be promulgated under the permanent provisions of the Administrative Procedure Act?  
Yes  No

5. Is this a new rule? Yes  No   
If yes, please provide a brief summary explaining the regulation. \_\_\_\_\_

Does this repeal an existing rule? Yes  No   
If yes, a copy of the repealed rule is to be included with your completed questionnaire. If it is being replaced with a new rule, please provide a summary of the rule giving an explanation of what the rule does. \_\_\_\_\_

Is this an amendment to an existing rule? Yes  No   
If yes, please attach a mark-up showing the changes in the existing rule and a summary of the substantive changes. **Note: The summary should explain what the amendment does, and the mark-up copy should be clearly labeled "mark-up."**

See attached.

6. Cite the state law that grants the authority for this proposed rule? If codified, please give the Arkansas Code citation. Arkansas Code §§ 20-76-201, 20-77-107, and 25-10-129

7. What is the purpose of this proposed rule? Why is it necessary? See Attached.

8. Please provide the address where this rule is publicly accessible in electronic form via the Internet as required by Arkansas Code § 25-19-108(b).

<https://humanservices.arkansas.gov/do-business-with-dhs/proposed-rules/>

9. Will a public hearing be held on this proposed rule? Yes  No   
If yes, please complete the following:

Date: March 24, 2022

Time: 11:30 a.m.

Place: <https://us02web.zoom.us/j/87865566387>

10. When does the public comment period expire for permanent promulgation? (Must provide a date.)

April 11, 2022

11. What is the proposed effective date of this proposed rule? (Must provide a date.)

June 1, 2022

12. Please provide a copy of the notice required under Ark. Code Ann. § 25-15-204(a), and proof of the publication of said notice. See Attached.

13. Please provide proof of filing the rule with the Secretary of State as required pursuant to Ark. Code Ann. § 25-15-204(e). See Attached.

14. Please give the names of persons, groups, or organizations that you expect to comment on these rules? Please provide their position (for or against) if known. Unknown



## NOTICE OF RULE MAKING

The Director of the Division of Medical Services of the Department of Human Services announces for a public comment period of thirty (30) calendar days a notice of rulemaking for the following proposed rule under one or more of the following chapters, subchapters, or sections of the Arkansas Code: §20-76-201, 20-77-107, & 25-10-129.

### **Effective June 1, 2022:**

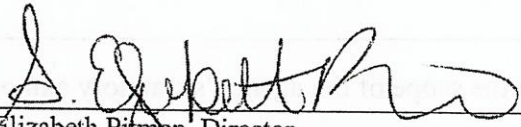
The Director of the Division of Medical Services (DMS) amends the Medicaid State Plan and the Pharmacy Manual to comply with Acts 406, 407, 408, and 503 of the 93<sup>rd</sup> General Assembly. Arkansas Medicaid Program will allow pharmacists to enroll individually as atypical providers to prescribe and administer specific drugs as well as test and screen for certain health conditions.

The proposed rule is available for review at the Department of Human Services (DHS) Office of Rules Promulgation, 2nd floor Donaghey Plaza South Building, 7th and Main Streets, P. O. Box 1437, Slot S295, Little Rock, Arkansas 72203-1437. You may also access and download the proposed rule at <https://humanservices.arkansas.gov/do-business-with-dhs/proposed-rules/>. Public comments must be submitted in writing at the above address or at the following email address: [ORP@dhs.arkansas.gov](mailto:ORP@dhs.arkansas.gov). All public comments must be received by DHS no later than April 11, 2022. Please note that public comments submitted in response to this notice are considered public documents. A public comment, including the commenter's name and any personal information contained within the public comment, will be made publicly available and may be seen by various people.

A public hearing by remote access only through a Zoom webinar will be held on March 24, 2022, at 11:30 a.m. and public comments may be submitted at the hearing. Individuals can access this public hearing at <https://us02web.zoom.us/j/87865566387>. The webinar ID is 878 6556 6387. If you would like the electronic link, "one-tap" mobile information, listening only dial-in phone numbers, or international phone numbers, please contact ORP at [ORP@dhs.arkansas.gov](mailto:ORP@dhs.arkansas.gov).

If you need this material in a different format, such as large print, contact the Office of Rules Promulgation at 501-396-6428.

The Arkansas Department of Human Services is in compliance with Titles VI and VII of the Civil Rights Act and is operated, managed, and delivers services without regard to religion, disability, political affiliation, veteran status, age, race, color, or national origin. 4502035775

  
Elizabeth Pitman, Director  
Division of Medical Services

**FINANCIAL IMPACT STATEMENT**

**PLEASE ANSWER ALL QUESTIONS COMPLETELY**

**DEPARTMENT** Department of Human Services

**DIVISION** Division of Medical Services

**PERSON COMPLETING THIS STATEMENT** Jason Callan

**TELEPHONE** 501-320-6540 **FAX** \_\_\_\_\_ **EMAIL:** Jason.Callan@dhs.arkansas.gov

To comply with Ark. Code Ann. § 25-15-204(e), please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

**SHORT TITLE OF THIS RULE** Pharmacy Manual Update 3-21 and SPA 2022-0001

- 1. Does this proposed, amended, or repealed rule have a financial impact? Yes  No
- 2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule? Yes  No
- 3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered? Yes  No

If an agency is proposing a more costly rule, please state the following:

- (a) How the additional benefits of the more costly rule justify its additional cost;  
\_\_\_\_\_
- (b) The reason for adoption of the more costly rule;  
\_\_\_\_\_
- (c) Whether the more costly rule is based on the interests of public health, safety, or welfare, and if so, please explain; and;  
\_\_\_\_\_
- (d) Whether the reason is within the scope of the agency's statutory authority; and if so, please explain.  
\_\_\_\_\_

4. If the purpose of this rule is to implement a federal rule or regulation, please state the following:

- (a) What is the cost to implement the federal rule or regulation?

**Current Fiscal Year**

General Revenue \$ \_\_\_\_\_  
Federal Funds \$ \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_

**Next Fiscal Year**

General Revenue \$ \_\_\_\_\_  
Federal Funds \$ \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_



Other (Identify) \_\_\_\_\_  
 Total \$ \_\_\_\_\_

Other (Identify) \_\_\_\_\_  
 Total \$ \_\_\_\_\_

(b) What is the additional cost of the state rule?

**Current Fiscal Year**

General Revenue \$2,602  
 Federal Funds \$6,565  
 Cash Funds \_\_\_\_\_  
 Special Revenue \_\_\_\_\_  
 Other (Identify) \_\_\_\_\_  
 Total \$9,167

**Next Fiscal Year**

General Revenue \$31,218  
 Federal Funds \$78,782  
 Cash Funds \_\_\_\_\_  
 Special Revenue \_\_\_\_\_  
 Other (Identify) \_\_\_\_\_  
 Total \$110,000

5. What is the total estimated cost by fiscal year to any private individual, entity and business subject to the proposed, amended, or repealed rule? Identify the entity(ies) subject to the proposed rule and explain how they are affected.

**Current Fiscal Year**

\$ \_\_\_\_\_

**Next Fiscal Year**

\$ \_\_\_\_\_

6. What is the total estimated cost by fiscal year to state, county, and municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

**Current Fiscal Year**

\$ 2,602

**Next Fiscal Year**

\$ 31,218

7. With respect to the agency's answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars (\$100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

Yes  No

If YES, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

- (1) a statement of the rule's basis and purpose;
- (2) the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;
- (3) a description of the factual evidence that:
  - (a) justifies the agency's need for the proposed rule; and
  - (b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule's costs;

- (4) a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and
- (7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
  - (a) the rule is achieving the statutory objectives;
  - (b) the benefits of the rule continue to justify its costs; and
  - (c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.



**Statement of Necessity and Rule Summary**  
**Pharmacy Manual 3-21 and SPA 2022-0001 Per Acts 406, 407, 408 and 503**

**Why is this change necessary? Please provide the circumstances that necessitate the change.**

The 93<sup>rd</sup> General Assembly enacted Acts 406, 407, 408, and 503 that give pharmacists a new scope of practice to prescribe certain vaccines, immunizations, and certain prescriptions. They also allow for prescription of over the counter (OTC) drugs and testing for certain infections and viruses per protocol. These Acts were put into place officially in compliance with the Prep Act due to COVID-19 U.S. Department of Health and Human Services (HHS) regulation, but also expands other prescribing and testing allowances for pharmacists individually. Legislation did not address reimbursement to pharmacists for these services, but rather allows pharmacists to be the prescriber on the pharmacy and medical claims in the pharmacy. The Division of Medical Services is revising Section 201.100 of the Pharmacy Manual, to comply with the Acts. The Medicaid State Plan Amendment (SPA) has been updated to reflect the changes in the Acts.

**What is the change? Please provide a summary of the change.**

Pharmacy Manual Section II

Section 201.100

- Renamed the section title.
- Added, "The Arkansas Medicaid Program will allow pharmacists to enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol."
- Changed seven (7) to three (3).
- Deleted, "... to eighteen (18) years of age under a general written..."
- Added, "...and older under current..."
- Deleted, "The Arkansas Medicaid Program will continue to reimburse pharmacies the cost and administration fee of selected vaccines for Medicaid beneficiaries nineteen (19) years of age and older."

State Plan Amendment (SPA)

SPA page 3.1-A, page 3b- Added, "(7) Pharmacists. Pharmacists may enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol."

SPA page 3.1-B, page 3d- Added, "(7) Pharmacists. Pharmacists may enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol."

**Please attach additional documents if necessary**

*TOC required*

201.100	Arkansas Medicaid Participation Requirements for <b>Prescribing Pharmacists and for Pharmacies Administering Vaccines</b>	2-4-206-1- <u>22</u>
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The Arkansas Medicaid Program will allow pharmacists to enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol.

The Arkansas Medicaid Program will reimburse pharmacies the cost and administration fee for selected vaccines and immunizations for Medicaid beneficiaries ~~clients seven (7)~~ three (3) years of age to eighteen (18) years of age under a general written and older under current protocol and written consent of the parent or legal guardian of the minor. -Consent must be obtained before the administration of the vaccine or immunization. -Written protocol and consent must be retained and is subject to reporting requirements. -The Arkansas Medicaid Program will continue to reimburse pharmacies the cost and administration fee of selected vaccines for Medicaid beneficiaries ~~nineteen (19) years of age and older.~~ For a complete list of covered vaccines and CMS-1500 billing instructions, please refer to the **CMS-1500 Claim Form Billing Instructions**.

The Arkansas Medicaid Program will reimburse pharmacies the administration fee for selected vaccines that are obtained through the Vaccine for Children Program (VFC) or ARKids-B SCHIP Vaccine Program. -Please refer to section 292.950 of the Physician manual for VFC vaccines billing procedures and section 262.430 for ARKids-B SCHIP vaccine. -All Arkansas State Board of Pharmacy laws and regulations will apply.

To be eligible for participation, the pharmacy must meet the following criteria, in addition to those specified in Section 201.000:

- A. Complete Section III, Item 22, of the enrollment application (**view or print Provider Enrollment application material**) if the pharmacist is certified to administer the influenza virus and pneumococcal polysaccharide vaccines; and
- B. Pharmacies must be enrolled in the Title XVIII (Medicare) Program to administer the vaccines.

Refer to Section 210.100 for scope of coverage; Section 213.000 for benefit limits.



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
STATE OF ~~AR~~ ARKANSAS

ATTACHMENT 3.1-A  
Page 3b

AMOUNT, DURATION AND SCOPE OF  
SERVICES PROVIDED  
~~—2022~~

Revised: ~~December~~ June 1, 2021

CATEGORICALLY NEEDY

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6. Medical Care and any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law. (Continued)
- 6.d. Other Practitioners' Services (Continued)
- (5) Psychologists  
Refer to Attachment 3.1-A, Item 4.b. (13).
- (6) Obstetric - Gynecologic and **Gerontological** Nurse Practitioner  
Refer to Attachment 3.1-A, Item 24 for coverage limitations.
- (7) Pharmacists

Pharmacists may enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
STATE OF ~~ARKANSAS~~

ATTACHMENT 3.1-B  
Page 3d

AMOUNT, DURATION, AND SCOPE OF  
SERVICES PROVIDED  
~~—2022~~

Revised: ~~December-June 1, 2001~~

MEDICALLY NEEDY

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6. Medical care and any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law. (Continued)

6.d. Other Practitioners' Services (Continued)

(5) Psychologists

Refer to Attachment 3.1-A, Item 4.b.(13).

(6) Obstetric - Gynecologic and **Gerontological** Nurse Practitioner

Refer to Attachment 3.1-B, Item 21 for coverage limitations.

(7) Pharmacists

Pharmacists may enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol.

TN: 22-0001  
Supersedes TN: AR-01-25

Approved:

Effective: 06/01/2022



TOC required

201.100 Arkansas Medicaid Participation Requirements for Prescribing Pharmacists and for Pharmacies Administering Vaccines 6-1-22

The Arkansas Medicaid Program will allow pharmacists to enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol.

The Arkansas Medicaid Program will reimburse pharmacies the cost and administration fee for selected vaccines and immunizations for Medicaid clients three (3) years of age and older under current protocol and written consent of the parent or legal guardian of the minor. Consent must be obtained before the administration of the vaccine or immunization. Written protocol and consent must be retained and is subject to reporting requirements. For a complete list of covered vaccines and CMS-1500 billing instructions, please refer to the [CMS-1500 Claim Form Billing Instructions](#).

The Arkansas Medicaid Program will reimburse pharmacies the administration fee for selected vaccines that are obtained through the Vaccine for Children Program (VFC) or ARKids-B SCHIP Vaccine Program. Please refer to section 292.950 of the Physician manual for VFC vaccines billing procedures and section 262.430 for ARKids-B SCHIP vaccine. All Arkansas State Board of Pharmacy laws and regulations will apply.

To be eligible for participation, the pharmacy must meet the following criteria, in addition to those specified in Section 201.000:

- A. Complete Section III, Item 22, of the enrollment application ([view or print Provider Enrollment application material](#)) if the pharmacist is certified to administer the influenza virus and pneumococcal polysaccharide vaccines; and
- B. Pharmacies must be enrolled in the Title XVIII (Medicare) Program to administer the vaccines.

Refer to Section 210.100 for scope of coverage; Section 213.000 for benefit limits.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
STATE ARKANSAS

ATTACHMENT 3.1-A  
Page 3b

AMOUNT, DURATION AND SCOPE OF  
SERVICES PROVIDED

Revised: June 1, 2022

CATEGORICALLY NEEDY

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6. Medical Care and any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law. (Continued)

6.d. Other Practitioners' Services (Continued)

(5) Psychologists

Refer to Attachment 3.1-A, Item 4.b. (13).

(6) Obstetric - Gynecologic and **Gerontological** Nurse Practitioner

Refer to Attachment 3.1-A, Item 24 for coverage limitations.

(7) **Pharmacists**

**Pharmacists may enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol.**

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
STATE ARKANSAS

ATTACHMENT 3.1-B  
Page 3d

AMOUNT, DURATION, AND SCOPE OF  
SERVICES PROVIDED

Revised: June 1, 2022

MEDICALLY NEEDY

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6. Medical care and any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law. (Continued)

6.d. Other Practitioners' Services (Continued)

(5) Psychologists

Refer to Attachment 3.1-A, Item 4.b.(13).

(6) Obstetric - Gynecologic and **Gerontological** Nurse Practitioner

Refer to Attachment 3.1-B, Item 21 for coverage limitations.

(7) **Pharmacists**

**Pharmacists may enroll individually as atypical providers to prescribe and administer specified drugs and test and screen for certain health conditions, per current allowable protocols. Pharmacists are not billing providers, but they may be rendering providers on medical claims. Pharmacists will be allowed as prescribing providers on pharmacy claims for drugs identified in current protocol.**



1 State of Arkansas  
2 93rd General Assembly  
3 Regular Session, 2021  
4

As Engrossed: H2/25/21 H3/8/21

## A Bill

HOUSE BILL 1134

5 By: Representative Boyd  
6 By: Senator Gilmore  
7

### For An Act To Be Entitled

8  
9 AN ACT TO AMEND THE DEFINITION OF "PRACTICE OF  
10 PHARMACY" TO ALLOW PHARMACISTS TO PRESCRIBE,  
11 ADMINISTER, DELIVER, DISTRIBUTE, OR DISPENSE  
12 VACCINES, IMMUNIZATIONS, AND MEDICATIONS TO TREAT  
13 ADVERSE REACTIONS TO ADMINISTERED VACCINES OR  
14 IMMUNIZATIONS TO A PERSON WHO IS THREE (3) YEARS OF  
15 AGE OR OLDER; AND FOR OTHER PURPOSES.  
16

### Subtitle

17  
18  
19 *TO ALLOW PHARMACISTS TO PRESCRIBE,*  
20 *ADMINISTER, DELIVER, DISTRIBUTE, OR*  
21 *DISPENSE VACCINES, IMMUNIZATIONS, AND*  
22 *MEDICATIONS TO TREAT ADVERSE REACTIONS TO*  
23 *ADMINISTERED VACCINES.*  
24

25  
26 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:  
27

28 *SECTION 1.* Arkansas Code § 17-92-101(17)(A)(i), concerning the  
29 definition of "practice of pharmacy", is amended to read as follows:

30 (i)(a) Dispensing, selling, distributing,  
31 transferring possession of, vending, bartering, or, in accordance with rules  
32 adopted by the Arkansas State Board of Pharmacy, administering drugs,  
33 medicines, poisons, or chemicals that under the laws of the United States or  
34 the State of Arkansas may be sold or dispensed only on the prescription and  
35 order of a practitioner authorized by law to prescribe drugs, medicines,  
36 poisons, or chemicals.





1 (b) Except as limited by rules adopted by the  
2 Arkansas State Board of Pharmacy, a pharmacist has the ability to administer  
3 medications.

4 ~~(c) Influenza vaccines and influenza~~  
5 ~~immunizations may be administered to a person seven (7) years of age or older~~  
6 ~~under a general written protocol.~~

7 ~~(d) Vaccines and immunizations other than~~  
8 ~~influenza vaccines and influenza immunizations may be administered to a~~  
9 ~~person from seven (7) years of age to eighteen (18) years of age under a~~  
10 ~~general written protocol and subject to reporting required under § 20-15-1203~~  
11 ~~if written consent of the parent or legal guardian of the minor is obtained~~  
12 ~~before the administration of the vaccine or immunization.~~

13 ~~(e) Vaccines and immunizations other than~~  
14 ~~influenza vaccines and influenza immunizations may be administered to a~~  
15 ~~person eighteen (18) years of age or older under a general written protocol.~~

16 ~~(f) Medications other than vaccines and~~  
17 ~~immunizations may be administered to a person seven (7) years of age or older~~  
18 ~~under a patient specific order or prescription and subject to reporting of~~  
19 ~~the administration to the prescribing physician.~~

20 (c) A pharmacist may prescribe, administer,  
21 deliver, distribute, or dispense medications that treat adverse reactions  
22 associated with the administration of vaccines and immunizations, vaccines,  
23 and immunizations to or for a person three (3) years of age or older.

24 (d) A pharmacist who prescribes and  
25 administers vaccines and immunizations other than for influenza or  
26 coronavirus 2019 (COVID-19) to a person who is three (3) years of age to six  
27 (6) years of age shall:

28 (1) Participate in the federal Vaccines  
29 for Children Program; and

30 (2) Inform the person who is three (3)  
31 years of age to six (6) years of age and adult caregivers accompanying the  
32 person who is three (3) years of age to six (6) years of age of the  
33 importance of a well-child visit with a pediatrician or other licensed  
34 primary care provider and recommend a well-child visit at least yearly.

35 (e)(1) A pharmacist may administer medications  
36 other than medications that treat adverse reactions associated with the

1 administration of vaccines and immunizations, vaccines, and immunizations  
2 under a patient-specific order or prescription or general written protocol.

3 (2) The administration of the medication  
4 under subdivision (17)(A)(i)(e)(1) of this section is subject to reporting to  
5 the prescribing physician, if applicable.

6 ~~(g)(f)~~ A general written protocol ~~under~~  
7 ~~subdivisions (17)(A)(i)(e) and (e) of this section and patient-specific~~  
8 ~~orders or prescriptions under subdivisions (17)(A)(i)(d) and (f)~~ subdivision  
9 (17)(A)(i)(e) of this section shall be from a physician licensed by the  
10 Arkansas State Medical Board and practicing in Arkansas or within fifty (50)  
11 miles of the Arkansas border.

12 ~~(h)(g)~~ Under a statewide protocol, a  
13 pharmacist may initiate therapy and administer or dispense, or both, drugs  
14 that include Naloxone and nicotine replacement therapy products;

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16 /s/Boyd  
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19 APPROVED: 3/22/21  
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1 State of Arkansas As Engrossed: H1/19/21 H3/8/21

2 93rd General Assembly

# A Bill

3 Regular Session, 2021

HOUSE BILL 1135

4  
5 By: Representatives Boyd, Pilkington

6 By: Senator Gilmore

7

8

## For An Act To Be Entitled

9

AN ACT TO AUTHORIZE PHARMACY TECHNICIANS TO

10

ADMINISTER VACCINES AND IMMUNIZATIONS; TO AMEND THE

11

DEFINITION OF "PRACTICE OF PHARMACY" TO ALLOW

12

PHARMACY TECHNICIANS TO ADMINISTER VACCINES OR

13

IMMUNIZATIONS TO A PERSON WHO IS THREE (3) YEARS OF

14

AGE OR OLDER; AND FOR OTHER PURPOSES.

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16

17

## Subtitle

18

TO AUTHORIZE PHARMACY TECHNICIANS TO

19

ADMINISTER VACCINES AND IMMUNIZATIONS.

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BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

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SECTION 1. Arkansas Code § 17-92-101(17)(C), concerning the

25

definition of "practice of pharmacy" relating to pharmacists and pharmacies,

26

is amended to read as follows:

27

(C)(i) The Arkansas State Board of Pharmacy may permit

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pharmacy technicians other than pharmacists or interns to perform some or all

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of those functions described in Arkansas State Board of Pharmacy rules under

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the direct, personal supervision of a licensed pharmacist ~~pursuant to~~ under

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rules defining the minimum qualifications of such employees, the ratio of

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pharmacy technicians to supervising pharmacists, and the scope of the duties,

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practices, and procedures that the Arkansas State Board of Pharmacy

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determines will promote the delivery of competent, professional

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pharmaceutical services and promote the public health and welfare. ~~Nothing in~~

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~~this chapter shall be construed as allowing pharmacy technicians to~~





1 ~~administer medications.~~

2 (ii) A pharmacy technician may administer vaccines  
3 and immunizations to a person three (3) years of age or older if delegated to  
4 do so by a supervising pharmacist, but may not administer other medications.

5 (iii) The conduct of a pharmacy technician is the  
6 responsibility of the pharmacist-in-charge and supervising pharmacist of the  
7 pharmacy who shall not permit the employee to perform any act, task, or  
8 function that involves the exercise of independent judgment by the employee.

9 ~~(iii)~~(iv) Pharmacy products prepared by pharmacy  
10 technicians shall be verified for accuracy by the supervising pharmacist  
11 before release for patient use, and the verification shall be documented.

12 ~~(iv)~~(v) The use of pharmacy technicians in a manner  
13 not authorized by this chapter or rules promulgated hereunder shall be  
14 unprofessional conduct by the pharmacist-in-charge and the supervising  
15 pharmacist.

16 ~~(v)~~(vi) It is recognized that hospital pharmacy  
17 technicians as defined in § 17-92-602(4) are governed by the Hospital  
18 Pharmacies Act, § 17-92-601 et seq., and related Arkansas State Board of  
19 Pharmacy rules developed pursuant to that subchapter under the Hospital  
20 Pharmacies Act, § 17-92-601 et seq.;

21

22 /s/Boyd

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25 **APPROVED: BECAME LAW ON 3/22/21 WITHOUT THE GOVERNOR'S SIGNATURE.**

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1 State of Arkansas

As Engrossed: H2/22/21

2 93rd General Assembly

# A Bill

3 Regular Session, 2021

HOUSE BILL 1069

4

5 By: Representatives Pilkington, McCollum

6 By: Senators B. Davis, T. Garner

7

8

## For An Act To Be Entitled

9

AN ACT TO AMEND THE PROVISIONS OF THE ARKANSAS CODE  
CONCERNING THE PRACTICE OF PHARMACY; TO AUTHORIZE  
PHARMACISTS TO PROVIDE ACCESS TO AND ADMINISTRATION  
OF ORAL CONTRACEPTIVES; AND FOR OTHER PURPOSES.

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## Subtitle

16

TO AMEND THE PROVISIONS OF THE ARKANSAS  
CODE CONCERNING THE PRACTICE OF PHARMACY;  
AND TO AUTHORIZE PHARMACISTS TO PROVIDE  
ACCESS TO AND ADMINISTRATION OF ORAL  
CONTRACEPTIVES.

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23 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

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SECTION 1. Arkansas Code § 17-92-101(17)(A)(i)(h), concerning the  
definition of "practice of pharmacy" regarding pharmacists and pharmacies, is  
amended to read as follows:

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28

(h) Under a statewide protocol, a pharmacist  
may initiate therapy and administer or dispense, or both, drugs that include  
Naloxone, ~~and~~ nicotine replacement therapy products, and oral contraceptives;

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SECTION 2. Arkansas Code § 17-92-115 is amended to read as follows:  
17-92-115. Requirements for administering and dispensing under  
statewide protocol.

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(a) When initiating therapy and administering or dispensing, or both,  
under a statewide protocol, a pharmacist shall:

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1 (1) Notify the primary care provider of the patient of any drug  
2 or device furnished to the patient or enter the appropriate information in a  
3 patient record system shared with the primary care provider, as permitted by  
4 the primary care provider;

5 (2) Provide the patient with a written record of the drugs or  
6 devices furnished and advise the patient to consult a physician of the  
7 patient's choice, if the patient does not have a primary care provider; and

8 (3)(A) Make a standardized fact sheet available to the recipient  
9 of the drug or device.

10 (B) The standardized fact sheet shall include without  
11 limitation:

12 (i) The indications and contraindications for the  
13 use of the drug or device;

14 (ii) The appropriate method for the use of the drug  
15 or device;

16 (iii) The need for medical follow-up; and

17 (iv) Other appropriate information.

18 (b)(1) In addition to the requirements under subsection (a) of this  
19 section, when initiating therapy and administering or dispensing, or both,  
20 oral contraceptives under a statewide protocol, a pharmacist shall:

21 (A) Complete a training program related to oral  
22 contraceptives that has been approved by the Arkansas State Board of  
23 Pharmacy;

24 (B)(i) Screen a patient seeking oral contraceptives to  
25 assess whether the patient has been seen by a primary care provider or  
26 women's healthcare provider within the previous six (6) months.

27 (ii) If the patient has not been seen by a primary  
28 care provider or women's healthcare provider within the previous six (6)  
29 months, the pharmacist shall:

30 (a) Provide the patient with a referral to a  
31 local primary care provider or women's healthcare provider; and

32 (b) Not dispense more than a six-month supply  
33 of oral contraceptives or the equivalent number of refills to the patient  
34 until the patient has been seen by a primary care provider or women's  
35 healthcare provider.

36 (iii) A pharmacist shall not provide the patient

1 with a referral to a licensed abortion provider.

2 (iv) The board shall adopt screening assessment  
3 procedures and questionnaires to be used by pharmacists throughout the state;

4 (C)(i) Explain verbally to the patient the possible  
5 effects of an oral contraceptive, including without limitation the death of  
6 an unborn child and possible health complication or adverse reactions as  
7 printed by the United States Food and Drug Administration.

8 (ii) The patient and pharmacist shall sign an  
9 informed consent form that documents the explanation described in subdivision  
10 (b)(1)(C)(i) of this section and place the form in the patient's medical  
11 record;

12 (D) Report the following information to the Department of  
13 Health:

14 (i) The number of women who receive oral  
15 contraceptives without a prescription; and

16 (ii) The age of the women who receive oral  
17 contraceptives without a prescription;

18 (E) Provide a standardized information sheet about the  
19 oral contraceptive dispensed to the patient; and

20 (F) Write a summary of consultation to be maintained in  
21 the patient's medical record.

22 (2) A pharmacist shall only initiate therapy and administer or  
23 dispense, or both, oral contraceptives under a statewide protocol to an  
24 individual who is eighteen (18) years of age or older.

25  
26 /s/Pilkington

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28  
29 APPROVED: 3/22/21



1 State of Arkansas  
2 93rd General Assembly  
3 Regular Session, 2021  
4

As Engrossed: H2/24/21 H3/4/21

# A Bill

HOUSE BILL 1246

5 By: Representatives L. Johnson, Bragg, Eubanks  
6 By: Senators D. Wallace, Hester  
7

## For An Act To Be Entitled

9 AN ACT TO ALLOW PHARMACISTS TO TREAT CERTAIN HEALTH  
10 CONDITIONS; TO MODIFY PHYSICIAN DISPENSING; TO ALLOW  
11 DELEGATION OF PHYSICIAN DISPENSING; AND FOR OTHER  
12 PURPOSES.  
13

## Subtitle

14 TO ALLOW PHARMACISTS TO TREAT CERTAIN  
15 HEALTH CONDITIONS; TO MODIFY PHYSICIAN  
16 DISPENSING; AND TO ALLOW DELEGATION OF  
17 PHYSICIAN DISPENSING.  
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22 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

### SECTION 1. DO NOT CODIFY. Purpose.

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24  
25 It is the purpose of this act to authorize pharmacists in Arkansas to  
26 test and screen for health conditions that the Centers for Medicare and  
27 Medicaid Services has determined qualify for a waiver under the federal  
28 Clinical Laboratory Improvement Amendments of 1988, the federal regulations  
29 adopted, or any established screening procedures that can safely be performed  
30 by a pharmacist.  
31

32 SECTION 2. Arkansas Code § 17-92-101(17)(A)(x), concerning the  
33 definition of "practice of pharmacy", is amended to read as follows:

34 (x)(a) Providing pharmacy care; ~~and.~~

35 (b) A pharmacist may treat the following  
36 conditions within the framework of a statewide written protocol:



1 (1) Influenza;  
2 (2) Pharyngitis caused by streptococcus  
3 A; or  
4 (3) Other health conditions that can be  
5 screened utilizing the waived test under the Clinical Laboratory Improvement  
6 Amendments of 1988, that may be adopted by rule of the Arkansas State Board  
7 of Pharmacy, in consultation with and upon approval of the Arkansas State  
8 Medical Board.

9 (c) A pharmacist shall only treat conditions  
10 for which the pharmacist has tested and that are approved under this  
11 subdivision (17)(A)(x)(c).

12 (d)(1) The Arkansas State Board of Pharmacy,  
13 with consultation and upon approval of the Arkansas State Medical Board,  
14 shall adopt by rule:

15 (A) A formulary of medicinal drugs  
16 that a pharmacist may prescribe for treatment of conditions listed in  
17 subdivision (17)(A)(x)(b) of this section; and

18 (B) A written statewide protocol  
19 for conditions listed in subdivision (17)(A)(x)(b) of this section, which  
20 shall including without limitation age of people that can be treated and  
21 medications to be used to treat people under this subdivision.

22 (2) The formulary shall include  
23 medicinal drugs approved by the United States Food and Drug Administration  
24 which are indicated for treatment of these conditions, including without  
25 limitation any over-the-counter medication.

26 (3) The formulary shall not include any  
27 controlled substance in Schedule I-IV or 21 U.S.C. § 812, as existing on  
28 January 1, 2021.

29 (e) A pharmacist may write a prescription for  
30 over-the-counter medications, supplies, and devices; and

31  
32 SECTION 3. Arkansas Code § 17-92-101(18), concerning the definition of  
33 "prescription", is amended to read as follows:

34 (18)(A)(i) "Prescription" means an order for medicine or  
35 medicines usually written as a formula by a physician, optometrist, dentist,  
36 veterinarian, or other licensed medicinal practitioner.



1                   (ii) A prescription ~~It~~ contains the names and  
2 quantities of the desired substance, with instructions to the pharmacist for  
3 its preparation and to the patient for the use of the medicine at a  
4 particular time and may authorize the pharmacist to substitute a  
5 therapeutically equivalent drug that is at a an equal or lower cost to the  
6 patient and communicate that authorization by any generally accepted means of  
7 communication of a prescription from a prescriber to a pharmacist.

8                   (B)(i) ~~A substitution of a therapeutically equivalent drug~~  
9 ~~shall occur only after the prescriber grants such authorization for each~~  
10 ~~prescription.~~ pharmacist whose practice is located within this state may  
11 substitute one (1) medication for a therapeutically equivalent medication.

12                   (ii) However, a pharmacist shall not substitute one  
13 (1) medication for a therapeutically equivalent medication if:

14                   (a) A prescription is in writing and the  
15 prescriber indicates in his or her own handwriting by name or initial that no  
16 substitution is to be made;

17                   (b) A prescription is not in writing and the  
18 prescriber expressly indicates that the prescription is to be dispensed as  
19 communicated; or

20                   (c) The Arkansas State Board of Pharmacy has  
21 determined that a therapeutically equivalent medication should not be  
22 substituted and has notified all pharmacists of that determination.

23                   (C)(i) Before dispensing, the pharmacist shall discuss  
24 verbally any suggested substitution with the patient and inform the patient  
25 that the patient has a right to refuse the substitution.

26                   (ii) The discussion under subdivision (18)(C)(i) of  
27 this section shall include without limitation:

28                   (a) Notification to the patient that the  
29 therapeutically equivalent drug does not contain the identical active  
30 ingredient present in the prescribed drug; and

31                   (b) All differences in dosage and frequency  
32 between the prescribed drug and the therapeutically equivalent drug.

33                   (D) The pharmacist shall send notice of the substitution  
34 to the prescriber in writing or by electronic communication within twenty-  
35 four (24) hours after the drug is dispensed to the patient.

36                   (E) Subdivision (18)(B) of this section does not apply to



1 *specific acts of drug therapy management or disease state management*  
2 *delegated to a pharmacist based upon a written protocol or patient care plan*  
3 *approved by a physician under subdivision (17)(A)(ix) of this section;*  
4

5 SECTION 4. Arkansas Code Title 17, Chapter 92, Subchapter 1, is  
6 amended to add an additional section to read as follows:

7 17-92-118. Point-of-care treatment.

8 A pharmacist who tests for conditions under § 17-92-101(17)(A)(x)  
9 shall:

- 10 (1) Hold a license to practice pharmacy in this state;  
11 (2) Report a diagnosis or suspected existence of influenza to  
12 the Department of Health;  
13 (3) Furnish patient records to a healthcare practitioner  
14 designated by the patient upon the request of the patient; and  
15 (4) Maintain records of all patients receiving services under  
16 this section for two (2) years.  
17

18 SECTION 5. Arkansas Code § 17-95-102 is amended to read as follows:  
19 17-95-102. Legend drugs.

20 (a) ~~A dispensing physician is~~ As used in this section, a "dispensing  
21 physician" means a physician licensed under the Arkansas Medical Practices  
22 Act, § 17-95-201 et seq., § 17-95-301 et seq., and § 17-95-401 et seq., who  
23 purchases legend drugs to be dispensed to his or her patients for the  
24 patients' personal use and administration outside the physician's office.

25 (b) This section ~~shall~~ does not apply to physicians who only dispense  
26 drugs in injectable form unless they are controlled substances, in which case  
27 the section shall fully apply.

28 (c) The dispensing physician shall:

29 (1) Personally dispense legend drugs, and the dispensing of such  
30 drugs may ~~not~~ be delegated;

31 (2)(A) Keep records of all receipts and distributions of legend  
32 drugs.

33 (B) The records shall be subject to inspection by the  
34 proper enforcement authority and shall be readily accessible for inspection  
35 and maintained in a central registry; and

36 (3) Label legend drugs with the following information:

- 1 (A) Patient's name and address;
- 2 (B) Prescribing physician's address and narcotic registry
- 3 number issued by the United States Drug Enforcement Administration or
- 4 national provider identification number;
- 5 (C) Date of dispensing; and
- 6 (D) Directions and cautionary statements, if any, as
- 7 required by law.

8 (d)(1) A physician licensed under the Arkansas Medical Practices Act,  
9 § 17-95-201 et seq., § 17-95-301 et seq., and § 17-95-401 et seq., shall not  
10 dispense legend drugs without prior approval by the Arkansas State Medical  
11 Board after application to the ~~board~~ Arkansas State Medical Board and on the  
12 showing of need.

13 (2) Licensed physicians who were dispensing in the ordinary  
14 course of their practice before April 12, 2013, shall be exempt from the  
15 requirements of this subsection.

16 (3) The ~~board~~ Arkansas State Medical Board shall determine  
17 whether need exists for a physician to dispense a specific legend drug to the  
18 physician's patient for a patient's personal use and administration outside  
19 of the physician's office based on such information as is necessary for the  
20 ~~board~~ Arkansas State Medical Board to determine:

21 (A) The legend drug or drugs that the physician requests  
22 to dispense;

23 (B) The ability of a physician's patient to obtain the  
24 legend drug from other medical professionals;

25 (C) The availability of the legend drug to be prescribed  
26 by the physician;

27 (D) The hours at which the legend drug may be obtained  
28 from other medical professionals;

29 (E) The distance the physician's patient must travel to  
30 obtain the legend drug from other medical professionals;

31 (F) Whether the physician has been investigated by the  
32 ~~board~~ Arkansas State Medical Board concerning the improper prescribing or use  
33 of a legend drug;

34 (G) Whether the physician has a financial relationship  
35 with the manufacturer of a legend drug that would create the appearance of a  
36 conflict of interest;



1 (H) Whether the physician dispensing a legend drug will  
2 foster cost containment through improved efficiency and productivity; and

3 (I) The procedures the physician has implemented to:

4 (i) Assure compliance with the requirements of  
5 subsection (c) of this section;

6 (ii) Monitor and guard against potential drug  
7 interactions;

8 (iii) Store and safeguard the legend drugs; and

9 (iv) Comply with the Prescription Drug Monitoring  
10 Program Act, § 20-7-601 et seq., concerning the reporting requirements to the  
11 Prescription Drug Monitoring Program.

12 (4) This section does not apply to a prescription for:

13 (i) A prescription for a topical medication;

14 (ii) Naloxone;

15 (iii) Nicotine ~~nicotine~~ replacement therapy  
16 products, or;

17 (iv) Contraceptives; ~~contraceptives is exempt from~~  
18 subdivision (d)(3) of this section

19 (v) Acute care medication; or

20 (vi) Initial treatment for maintenance medication.

21 (e)(1) ~~The board~~ Arkansas State Medical Board shall enforce the  
22 provisions of this section and is authorized and directed to adopt rules to  
23 carry out ~~its purpose~~ the purpose of this section.

24 (2) The Arkansas State Medical Board shall adopt rules for  
25 physician dispensing that, at minimum, meet the same requirements for  
26 dispensing and oversight established by the Arkansas State Board of Pharmacy.

27 (f) As used in this section:

28 (1)(A) "Acute care medication" means a legend drug that is not a  
29 controlled substance and is prescribed for no more than fourteen (14) days of  
30 therapy.

31 (B) "Acute care medication" includes the following oral  
32 medications:

33 (i) Medications to treat infections;

34 (ii) Anti-inflammatory medications;

35 (iii) Antinausea medications;

36 (iv) Antihistamines; and



- 1 (v) Cough medications;
- 2 (2) "Initial treatment" means the first prescription written for
- 3 a specific prescription medication intended to initiate therapy on the
- 4 medication; and
- 5 (3) "Maintenance medication" means a legend drug that:
- 6 (A) Is not a controlled substance;
- 7 (B) Is prescribed for no more than thirty (30) days; and
- 8 (C) Is used to treat one (1) of the following medical
- 9 conditions:
- 10 (i) Hypertension;
- 11 (ii) Diabetes mellitus; or
- 12 (iii) Hypercholesterolemia.

13

14 SECTION 6. DO NOT CODIFY. Effective date.

15 Sections 1 -4 take effect on and after January 1, 2022.

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17 /s/Johnson

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20 APPROVED: 4/1/21

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