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WILLIAM H. TRICE III (1946-2014)

October 29, 2018

Via email and U.S. Mail
donna@arkleg.state.ar.us

Ms. Donna K. Davis, Committee Staff
Bureau of Legislative Research
State Capitol Building, Room 315
Little Rock, AR 72201

**RE: My Client: Arkansas State Board of Optometry
Proposed Amendment to Chapter 5, Article IX**

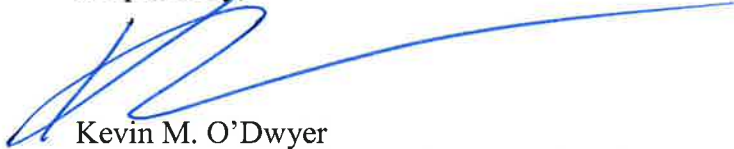
Dear Ms. Davis:

Enclosed please find the following:

1. Two copies of Questionnaire and Financial Impact Statement.
2. Two copies of the Mark-Up Amendment.
3. Two copies of the Proposed Amendment.
4. Two copies of a Summary.
5. Two copies of the Notice of Hearing that is being published, setting forth the public hearing for February 14, 2019.

Please schedule this for a hearing before the Committee of Legislative Council and notify me of the date and time of the hearing. I wait to hear from you.

Respectfully,



Kevin M. O'Dwyer
Attorney for the Arkansas State Board of Optometry

KMO/mel
Enclosures

cc w/encl.: Arkansas Secretary of State, register@sos.arkansas.gov
Arkansas State Library, statedocs@library.arkansas.gov
Dr. Howard Flippin, Executive Director, aroptometry@sbcglobal.net

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

DEPARTMENT/AGENCY Arkansas State Board of Optometry
DIVISION _____
DIVISION DIRECTOR Howard Flippin, OD, Executive Director
CONTACT PERSON Kevin M. O'Dwyer, Attorney
ADDRESS 211 S. Spring Street, Little Rock AR 72201
PHONE NO. 501-372-4144 **FAX NO.** 501-372-7480 **E-MAIL** kodwyer@htolaw.com
NAME OF PRESENTER AT COMMITTEE MEETING Kevin M. O'Dwyer
PRESENTER E-MAIL kodwyer@htolaw.com

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:

Donna K. Davis
Administrative Rules Review Section
Arkansas Legislative Council
Bureau of Legislative Research
One Capitol Mall, 5th Floor
Little Rock, AR 72201

1. What is the short title of this rule? Chapter 5, Article IX – Prescribing Controlled Substances
2. What is the subject of the proposed rule? To mandate the use of the Prescription Drug Monitoring Program
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. _____
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? N/A
- When does the emergency rule expire? N/A

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."** Attached.

6. Cite the state law that grants the authority for this proposed rule? If codified, please give the Arkansas Code citation. Act 820 of 2017 and A.C.A. §17-90-204.

7. What is the purpose of this proposed rule? Why is it necessary? To add language under Section 1, Part A, regarding prescribing of opiate medications and documentation of patient record.

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). www.aroptometry.org

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

Date: February 14, 2019

Time: 1:30 p.m.

Arkansas Optometric Association
1401 W Capitol, 4th Fl., Room 445

Place: Little Rock AR

10. When does the public comment period expire for permanent promulgation? (Must provide a date.)
December 6, 2018

11. What is the proposed effective date of this proposed rule? (Must provide a date.)
March 29, 2019

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. Attached. Proof of publication will be provided after it is received.

13. Please provide proof of filing the rule with the Secretary of State and the Arkansas State Library as required pursuant to Ark. Code Ann. § 25-15-204(e). Will provide after approval by Governor.

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. Arkansas Optometric Association

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DEPARTMENT Arkansas State Board of Optometry

DIVISION _____

PERSON COMPLETING THIS STATEMENT Kevin M. O'Dwyer, Attorney

TELEPHONE 501-372-4144 **FAX** 501-372-7480 **EMAIL:** kodwyer@htolaw.com

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 Amendment to Chapter 5 Article IX Governing Prescription Drug Monitoring Program

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;
N/A

(b) The reason for adoption of the more costly rule;
N/A

(c) Whether the more costly rule is based on the interests of public health, safety, or welfare, and if so, please explain; and;
N/A

(d) Whether the reason is within the scope of the agency's statutory authority; and if so, please explain.
N/A

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	<u>N/A</u>
Federal Funds	<u></u>
Cash Funds	<u></u>
Special Revenue	<u></u>
Other (Identify)	<u></u>
Total	<u></u>

Next Fiscal Year

General Revenue	<u>N/A</u>
Federal Funds	<u></u>
Cash Funds	<u></u>
Special Revenue	<u></u>
Other (Identify)	<u></u>
Total	<u></u>

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

Current Fiscal Year

General Revenue N/A
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____

Total _____

Next Fiscal Year

General Revenue N/A
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____

Total _____

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

\$ N/A

Next Fiscal Year

\$ N/A

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

\$ N/A

Next Fiscal Year

\$ N/A

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.

Document: A.C.A. § 17-90-204

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A.C.A. § 17-90-204**Copy Citation**

Current through all laws of the 2018 Fiscal Session and 2018 Second Extraordinary Session,
including changes and corrections by the Arkansas Code Revision Commission.

Arkansas Code Annotated **Title 17 Professions, Occupations, and**
Businesses **Subtitle 3. Medical Professions** **Chapter 90**
Optometrists **Subchapter 2-- State Board of Optometry.**

17-90-204. Powers and duties.

The State Board of Optometry shall have the following powers in addition to those conferred elsewhere within this chapter:

- (1) To make rules and regulations for the administration and enforcement of this chapter;
- (2) To revoke, suspend, or refuse to renew any certificate of license in the manner and for the causes set forth in this chapter;
- (3) To determine what acts on the part of any person licensed under this chapter shall constitute unprofessional conduct;
- (4) To employ or retain the services of attorneys and other necessary assistants in carrying out the provisions of this chapter;
- (5) To bring suit in its proper name to enforce or restrain the violation of any provision of this chapter;
- (6) To administer oaths, to have an official seal, or to issue a subpoena for any witness or a subpoena duces tecum to compel the production of any books, records, papers, or documents pertinent to any matters coming before the board;
- (7)
 - (A) To levy civil penalties, after providing notice and a hearing, in an amount not to exceed one thousand dollars (\$1,000) for each violation against those individuals, firms, or corporations found to be in violation of this chapter or rules and regulations promulgated thereunder.
 - (B) These penalties shall be used for the purposes of defraying the expenses of the board and as required for carrying out the provisions of this chapter.
 - (C) These penalties shall be in addition to other penalties which may be imposed by the board pursuant to this chapter.
 - (D) Unless the penalty assessed under this section is paid within fifteen (15) days following the date for an appeal from the order, the board shall have the power to file suit in the Pulaski County Circuit Court to obtain a judgment for the amount of penalty not paid; and
- (8) To promulgate rules limiting the amount of Schedule II narcotics that may be prescribed and dispensed by licensees of the board.



Document: A.C.A. § 17-90-204

History

Acts 1941, No. 94, § 8; A.S.A. 1947, § 72-811; Acts 1993, No. 474, § 1; 2017, No. 820, § 10.

Arkansas Code of 1987 Annotated Official Edition
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Stricken language would be deleted from and underlined language would be added to present law.
Act 820 of the Regular Session

State of Arkansas *As Engrossed: S2/20/17 S3/9/17 S3/13/17 S3/14/17 S3/15/17*
H3/17/17

91st General Assembly
Regular Session, 2017

A Bill

SENATE BILL 339

By: Senator J. Hutchinson
By: Representative Hammer

For An Act To Be Entitled

AN ACT TO AMEND THE PRESCRIPTION DRUG MONITORING
PROGRAM TO MANDATE PRESCRIBERS CHECK THE PRESCRIPTION
DRUG MONITORING PROGRAM WHEN PRESCRIBING CERTAIN
MEDICATIONS; AND FOR OTHER PURPOSES.

Subtitle

TO AMEND THE PRESCRIPTION DRUG MONITORING
PROGRAM TO MANDATE PRESCRIBERS CHECK THE
PRESCRIPTION DRUG MONITORING PROGRAM WHEN
PRESCRIBING CERTAIN MEDICATIONS.

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

SECTION 1. Arkansas Code § 20-7-604(d), concerning the requirements
for the Prescription Drug Monitoring Program, is amended to read as follows:

(d)(1) Practitioners Except as required in subdivision (d)(2) of this
section, practitioners are encouraged to access or check the information in
the controlled substance database created under this subchapter before
prescribing, dispensing, or administering medications.

(2)(A) A prescriber shall check the information in the
Prescription Drug Monitoring Program when prescribing:

(i) An opioid from Schedule II or Schedule III for
every time prescribing the medication to a patient; and

(ii) A benzodiazepine medication for the first time
prescribing the medication to a patient.



1 (B) A licensing board that licenses practitioners who have
2 the authority to prescribe shall adopt rules requiring the practitioners to
3 check the information in the Prescription Drug Monitoring Program as
4 described in subdivision (d)(2) of this section.

5 (C) This subdivision (d)(2) does not apply to:

6 (i) A practitioner administering a controlled
7 substance:

8 (a) Immediately before or during surgery;

9 (b) During recovery from a surgery while in a
10 healthcare facility;

11 (c) In a healthcare facility; or

12 (d) Necessary to treat a patient in an
13 emergency situation at the scene of an emergency, in a licensed ground
14 ambulance or air ambulance, or in the intensive care unit of a licensed
15 hospital;

16 (ii) A practitioner prescribing or administering a
17 controlled substance to:

18 (a) A palliative care or hospice patient; or

19 (b) A resident in a licensed nursing home
20 facility; or

21 (iii) Situations in which the Prescription Drug
22 Monitoring Program is not accessible due to technological or electrical
23 failure.

24 (D) The State Board of Health may amend, by rule, the
25 exemptions listed in subdivision (d)(2)(C) of this section upon a
26 recommendation from the Director of the Department of Health and a showing
27 that the exemption or lack of exemption is unnecessarily burdensome or has
28 created a hardship.

29 (3) A licensed oncologist shall check the Prescription Drug
30 Monitoring Program when prescribing to a patient on an initial malignant
31 episodic diagnosis and every three (3) months following the diagnosis while
32 continuing treatment.

33
34 SECTION 2. Arkansas Code § 20-7-607(a)(1), concerning providing
35 prescription monitoring information to the Prescription Drug Monitoring
36 Program, is amended to read as follows:

1 (a)(1)(A)(i) The Department of Health ~~may~~ shall review the
2 Prescription Drug Monitoring Program information, including without
3 limitation a review to identify information that appears to indicate whether
4 a person ~~may be~~ is obtaining prescriptions in a manner that may represent
5 misuse or abuse of controlled substances based on prescribing criteria
6 determined by the Director of the Department of Health upon consultation with
7 the Prescription Drug Monitoring Program Advisory Committee.

8 (ii) The prescribing criteria shall be posted on the
9 website of the department and be available in print upon request.

10 (B) If the information appears to indicate misuse or abuse
11 may have occurred, the department shall notify the practitioners and
12 dispensers who have prescribed or dispensed in the following manner:

13 (i) The department shall provide quarterly reports
14 to the individual practitioners and dispensers; and

15 (ii) If after twelve (12) months of providing
16 quarterly reports to the practitioners and dispensers, the information
17 appears to indicate misuse or abuse may be continuing, the department shall
18 send a report to the licensing boards of the practitioner or dispenser who
19 prescribed or dispensed the prescription.

20 (C) If information of misuse or abuse is identified, the
21 department shall notify the practitioners and dispensers who prescribed or
22 dispensed the prescriptions and the Office of Diversion Control of the United
23 States Drug Enforcement Administration.

24 (D) On or before January 1, 2019, the department shall
25 contract with a vendor to make the Prescription Drug Monitoring Program
26 interactive and to provide same-day reporting in real-time, if funding and
27 technology are available.

28
29 SECTION 3. Arkansas Code § 20-7-611, concerning unlawful acts and
30 penalties regarding the Prescription Drug Monitoring Program, is amended to
31 add an additional subsection to read as follows:

32 (i) A practitioner who purposely fails to access the Prescription Drug
33 Monitoring Program as required by § 20-7-604(d) is subject to disciplinary
34 action by the licensing board of the practitioner.

35
36 SECTION 4. Arkansas Code § 20-7-605(c), concerning the membership of

1 the Prescription Drug Monitoring Program Advisory Committee, is amended to
2 read as follows:

3 (c) The committee shall consist of:

4 (1) One (1) representative designated by each of the following
5 organizations:

6 (A) The Arkansas Academy of Physician Assistants;

7 (B) The Arkansas Association of Chiefs of Police;

8 (C) The Arkansas Drug Director;

9 (D) The Arkansas Medical Society;

10 (E) The Arkansas Nurses Association;

11 (F) The Arkansas Optometric Association;

12 (G) The Arkansas Osteopathic Medical Association;

13 (H) The Arkansas Pharmacists Association;

14 (I) The Arkansas Podiatric Medical Association;

15 (J) The Arkansas Prosecuting Attorneys Association;

16 (K) The Arkansas Sheriffs' Association;

17 (L) The Arkansas State Dental Association;

18 (M) The Arkansas Veterinary Medical Association;

19 (N) The State Board of Health; and

20 (O) The Arkansas Public Defender Commission;

21 (2) One (1) mental health provider or certified drug and alcohol
22 counselor; and

23 (3) One (1) consumer appointed by the Governor;

24 (4) The chair of the Arkansas State Medical Board or his or her
25 designee who is also a member of the Arkansas State Medical Board; and

26 (5) The chair of the Arkansas State Board of Dental Examiners or
27 his or her designee who is also a member of the Arkansas State Board of
28 Dental Examiners.

29

30 SECTION 5. Arkansas Code § 17-95-303, concerning the powers and duties
31 of the Arkansas State Medical Board, is amended to add an additional
32 subdivision to read as follows:

33 (11) Promulgate rules limiting the amount of Schedule II
34 narcotics that may be prescribed and dispensed by licensees of the board.

35

36 SECTION 6. Arkansas Code § 10-3-309(c), concerning the review and

1 approval of proposed state agency rules by the Legislative Council, is
2 amended to read as follows:

3 (c)(1) A state agency shall file a proposed rule with the Legislative
4 Council at least thirty (30) days before the expiration of the period for
5 public comment on the rule under the Arkansas Administrative Procedure Act, §
6 25-15-201 et seq., or other laws or policies pertaining to the rulemaking
7 authority of that state agency.

8 (2) The Legislative Council shall assign proposed rules to the
9 Administrative Rules and Regulations Subcommittee of the Legislative Council.

10 (3)(A)(i) The proposed rule shall be reviewed by the
11 Administrative Rules and Regulations Subcommittee of the Legislative Council.

12 (ii) When reviewing a rule under subdivision
13 (c)(3)(A)(i) of this section, the Administrative Rules and Regulations
14 Subcommittee of the Legislative Council shall allow members of the public a
15 reasonable opportunity to comment on the proposed rule.

16 (B)(i)(a) Except as set forth in subdivision (c)(3)(B)(ii)
17 of this subsection, Upon upon conclusion of the review of the proposed rule
18 by the Administrative Rules and Regulations Subcommittee of the Legislative
19 Council, the proposed rule shall be considered approved unless a majority of
20 a quorum present request that the Administrative Rules and Regulations
21 Subcommittee of the Legislative Council vote on the issue of approving the
22 proposed rule.

23 ~~(ii)(b)~~ If the Administrative Rules and Regulations
24 Subcommittee of the Legislative Council votes on the issue of approving the
25 proposed rule, the proposed rule shall be approved unless a majority of a
26 quorum present vote for the proposed rule to not be approved.

27 (ii) A proposed rule submitted by the State Board of
28 Health under Arkansas Code § 20-7-604(d)(2)(D), concerning exemptions from
29 the requirements of the Prescription Drug Monitoring Program, shall be
30 considered reviewed and approved by the subcommittee upon an affirmative vote
31 of three-fourths (3/4) of the members present when a quorum is present.

32 (4)(A)(i) Except as set forth in subdivision (c)(4)(B) of this
33 subsection, A a proposed rule approved by the Administrative Rules and
34 Regulations Subcommittee of the Legislative Council shall be considered
35 approved by the Legislative Council unless a majority of a quorum present
36 request that the Legislative Council vote on the issue of approving the

1 proposed rule.

2 ~~(B)(ii)~~ If the Legislative Council votes on the issue of
3 approving the proposed rule, the proposed rule shall be approved unless a
4 majority of a quorum present vote for the proposed rule to not be approved.

5 (B) A proposed rule submitted by the State Board of Health
6 under Arkansas Code § 20-7-604(d)(2)(D), concerning exemptions from the
7 requirements of the Prescription Drug Monitoring Program, shall be considered
8 reviewed and approved by the Legislative Council upon an affirmative vote of
9 three-fourths (3/4) of the members present when a quorum is present.

10

11

12 SECTION 7. Arkansas Code § 10-3-309(f), concerning a vote not to
13 approve a state agency rule, is amended to read as follows:

14 (f)(1) A committee or subcommittee under this section may vote to not
15 approve a rule under this section only if the rule is inconsistent with:

16 (A) State or federal law; or

17 (B) Legislative intent.

18 (2) A committee or subcommittee under this section voting not to
19 approve a rule under this section shall state the grounds under subdivision
20 (f)(1) of this section when not approving a rule.

21 (3) A committee or subcommittee under this section considering a
22 rule submitted in accordance with Arkansas Code § 20-7-604(d)(2)(D),
23 concerning exemptions from the Prescription Drug Monitoring Program, is not
24 required to state the grounds required under subdivision (f)(1) when not
25 approving a rule.

26

27 SECTION 8. Arkansas Code § 17-82-208, concerning the rules and
28 regulations of the Arkansas State Board of Dental Examiners, is amended to
29 add an additional subsection to read as follows:

30 (e) The board shall promulgate rules limiting the amount of Schedule
31 II narcotics that may be prescribed and dispensed by licensees of the board.

32

33 SECTION 9. Arkansas Code § 17-87-203, concerning the powers and duties
34 of the Arkansas State Board of Nursing, is amended to add an additional
35 subdivision to read as follows:

36 (21) Promulgate rules limiting the amount of Schedule II

1 narcotics that may be prescribed and dispensed by licensees of the board.

2
3 SECTION 10. Arkansas Code § 17-90-204, concerning the powers and
4 duties of the State Board of Optometry, is amended to add an additional
5 subdivision to read as follows:

6 (8) Promulgate rules limiting the amount of Schedule II
7 narcotics that may be prescribed and dispensed by licensees of the board.

8
9 SECTION 11. Arkansas Code § 17-92-205, concerning the rules and
10 regulations of the Arkansas State Board of Pharmacy, is amended to add an
11 additional subsection to read as follows:

12 (d) The board shall promulgate rules limiting the amount of Schedule
13 II narcotics that may be dispensed by licensees of the board.

14
15 SECTION 12. Arkansas Code § 17-101-203, concerning the powers and
16 duties of the Veterinary Medical Examining Board, is amended to add an
17 additional subdivision to read as follows:

18 (12) Promulgate rules limiting the amount of Schedule II
19 narcotics that may be prescribed and dispensed by licensees of the board.

20
21 /s/J. Hutchinson

22
23
24 APPROVED: 04/03/2017

CHAPTER 5, ARTICLE IX – Prescribing Controlled Substances

Section 1 –

Arkansas optometrist licensed as optometric physician who applies for and possess a DEA number shall:

- A. Prescribe schedules II, III, IV, and V controlled substances only.
 1. It is incumbent of Optometrist to prescribe sufficient but minimal opiate medications. Any prescription for a Scheduled II or III opiate shall not exceed the total maximum manufacturer's recommended daily dose for a total of 72 hours' administration. Any refill of a prescription beyond the initial 72 hour prescription requires an inpatient visit and exam. Optometrist shall not prescribe more than 50 Morphine Milligram Equivalents (MME) per day.
 2. Patient record must be documented for a justification for the original prescription and for the need of any refill.
- B. Administer and prescribe controlled substances for the diagnosis and treatment of diseases and conditions of the eye, lids, and adnexa.
- C. Not sell any prescription medication including controlled substances.
- D. Be responsible for knowing and abiding by all state and federal regulations pertaining to controlled substances with emphasis on the "Mid-Level Practitioner's Manual", published by the DEA, and all State Board rules and regulations pertaining to controlled substances. Record the names and directions of prescribed controlled substances in the patient's record.
- E. A prescriber who has been found by the Arkansas State Board of Optometry to be in violation of a rule or law involving prescription drugs shall be required by the board to register with the Prescription Drug Monitoring Program and access patient information before writing a prescription for an opioid. The board, in its discretion, may remove this requirement after a period of time if the board deems removal of the requirement appropriate.
- F. Within the first two (2) years of being granted a license in the state, a prescriber shall obtain a minimum of three (3) hours of prescribing education approved by the Arkansas State Board of Optometry. The education approved by the board under this section shall include:
 1. Options for online and in-person programs; and
 2. Information on prescribing rules, regulations, and laws that apply to individuals who are licensed in the state.
 3. Information and instructions on prescribing controlled substances, record keeping and maintaining safe and professional boundaries.

MARK-UP

- G. A prescriber shall check the information in the Prescription Drug Monitoring Program when prescribing:
 - 1. An opioid from Schedule II through Schedule III for every time prescribing the medication to a patient; and
 - 2. A benzodiazepine medication for the first time prescribing the medication to a patient.
- H. A practitioner who fails to access the Prescription Drug Monitoring Program as required is subject to disciplinary action by the Board.

Section 2 –

- A. Only optometrists certified as optometric physicians, and/or approved by the Board, shall apply for or possess a DEA number to prescribe controlled substances.
- B. Optometrists not specifically approved by the Board to prescribe controlled substances:
 - 1. Cannot apply for, obtain or possess a DEA number.
 - 2. Cannot prescribe controlled substances without being in violation of State and Federal laws.

PROPOSED ARTICLE

CHAPTER 5, ARTICLE IX – Prescribing Controlled Substances

Section 1 –

Arkansas optometrist licensed as optometric physician who applies for and possess a DEA number shall:

- A. Prescribe schedules II, III, IV, and V controlled substances only.
 - 1. It is incumbent of Optometrist to prescribe sufficient but minimal opiate medications. Any prescription for a Scheduled II or III opiate shall not exceed the total maximum manufacturer's recommended daily dose for a total of 72 hours' administration. Any refill of a prescription beyond the initial 72 hour prescription requires an inpatient visit and exam. Optometrist shall not prescribe more than 50 Morphine Milligram Equivalents (MME) per day.
 - 2. Patient record must be documented for a justification for the original prescription and for the need of any refill.
- B. Administer and prescribe controlled substances for the diagnosis and treatment of diseases and conditions of the eye, lids, and adnexa.
- C. Not sell any prescription medication including controlled substances.
- D. Be responsible for knowing and abiding by all state and federal regulations pertaining to controlled substances with emphasis on the "Mid-Level Practitioner's Manual", published by the DEA, and all State Board rules and regulations pertaining to controlled substances. Record the names and directions of prescribed controlled substances in the patient's record.
- E. A prescriber who has been found by the Arkansas State Board of Optometry to be in violation of a rule or law involving prescription drugs shall be required by the board to register with the Prescription Drug Monitoring Program and access patient information before writing a prescription for an opioid. The board, in its discretion, may remove this requirement after a period of time if the board deems removal of the requirement appropriate.
- F. Within the first two (2) years of being granted a license in the state, a prescriber shall obtain a minimum of three (3) hours of prescribing education approved by the Arkansas State Board of Optometry. The education approved by the board under this section shall include:
 - 1. Options for online and in-person programs; and
 - 2. Information on prescribing rules, regulations, and laws that apply to individuals who are licensed in the state.
 - 3. Information and instructions on prescribing controlled substances, record keeping and maintaining safe and professional boundaries.

PROPOSED ARTICLE

- G. A prescriber shall check the information in the Prescription Drug Monitoring Program when prescribing:
 - 1. An opioid from Schedule II through Schedule III for every time prescribing the medication to a patient; and
 - 2. A benzodiazepine medication for the first time prescribing the medication to a patient.
- H. A practitioner who fails to access the Prescription Drug Monitoring Program as required is subject to disciplinary action by the Board.

Section 2 –

- A. Only optometrists certified as optometric physicians, and/or approved by the Board, shall apply for or possess a DEA number to prescribe controlled substances.
- B. Optometrists not specifically approved by the Board to prescribe controlled substances:
 - 1. Cannot apply for, obtain or possess a DEA number.
 - 2. Cannot prescribe controlled substances without being in violation of State and Federal laws.

SUMMARY

AMENDMENT TO CHAPTER 5, ARTICLE IX – Prescribing Controlled Substances

Amended to add language under Section 1, Part A, regarding prescription of opiate medications and documentation of patient record.

For publication in the Daily Record on November 6, 13, and 20, 2018

Bill to:

Arkansas State Board of Optometry
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Copy of Proof of Publication sent to:

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NOTICE OF PUBLIC HEARING

In compliance with Arkansas Code Annotated §25-15-204, the Arkansas State Board of Optometry gives notice that it will conduct a public hearing at 1:30 p.m. on the 14th day of February, 2019, at a meeting of the Arkansas State Board of Optometry at the Arkansas Optometric Association, Victory Building, 1401 W. Capitol Avenue, 4th Floor, Room 445, Little Rock, Arkansas. The public hearing will involve an Amendment to Chapter 5, Article IX of the Rules and Regulations of the Board governing the Prescription Drug Monitoring Program.

All individuals desiring to address the Board should contact Dr. Howard Flippin, Secretary of the Arkansas State Board of Optometry, PO Box 512, Searcy, Arkansas, 72145, telephone number 501-268-4351, to be placed on the agenda. Individuals desiring a copy of the proposed Amendment, as referred to herein, may contact Dr. Howard Flippin at the above address and telephone number.