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House of Representatives
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House Engrossed
FILED
MICHELE REAGAN
SECRETARY OF STATE

CHAPTER 92
HOUSE BILL 2195

AN ACT

AMENDING SECTIONS 32-1401, 32-1402, 32-1422, 32-1426, 32-1438, 32-1452, 32-1452.01 AND 32-1458, ARIZONA REVISED STATUTES; RELATING TO THE ARIZONA MEDICAL BOARD.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Section 32-1401, Arizona Revised Statutes, is amended to
3 read:

4 32-1401. Definitions

5 In this chapter, unless the context otherwise requires:

6 1. "Active license" means a valid and existing license to practice
7 medicine.

8 2. "Adequate records" means legible medical records, produced by
9 hand or electronically, containing, at a minimum, sufficient information
10 to identify the patient, support the diagnosis, justify the treatment,
11 accurately document the results, indicate advice and cautionary warnings
12 provided to the patient and provide sufficient information for another
13 practitioner to assume continuity of the patient's care at any point in
14 the course of treatment.

15 3. "Advisory letter" means a nondisciplinary letter to notify a
16 licensee that either:

17 (a) While there is insufficient evidence to support disciplinary
18 action, the board believes that continuation of the activities that led to
19 the investigation may result in further board action against the licensee.

20 (b) The violation is a minor or technical violation that is not of
21 sufficient merit to warrant disciplinary action.

22 (c) While the licensee has demonstrated substantial compliance
23 through rehabilitation or remediation that has mitigated the need for
24 disciplinary action, the board believes that repetition of the activities
25 that led to the investigation may result in further board action against
26 the licensee.

27 4. "Approved hospital internship, residency or clinical fellowship
28 program" means a program at a hospital that at the time the training
29 occurred was legally incorporated and that had a program that was approved
30 for internship, fellowship or residency training by the accreditation
31 council for graduate medical education, the association of American
32 medical colleges, the royal college of physicians and surgeons of Canada
33 or any similar body in the United States or Canada approved by the board
34 whose function is that of approving hospitals for internship, fellowship
35 or residency training.

36 5. "Approved school of medicine" means any school or college
37 offering a course of study that, on successful completion, results in the
38 degree of doctor of medicine and whose course of study has been approved
39 or accredited by an educational or professional association, recognized by
40 the board, including the association of American medical colleges, the
41 association of Canadian medical colleges or the American medical
42 association.

43 6. "Board" means the Arizona medical board.

1 7. "Completed application" means that the applicant has supplied
2 all required fees, information and correspondence requested by the board
3 on forms and in a manner acceptable to the board.

4 8. "Direct supervision" means that a physician, physician assistant
5 licensed pursuant to chapter 25 of this title or nurse practitioner
6 certified pursuant to chapter 15 of this title is within the same room or
7 office suite as the medical assistant in order to be available for
8 consultation regarding those tasks the medical assistant performs pursuant
9 to section 32-1456.

10 9. "Dispense" means the delivery by a doctor of medicine of a
11 prescription drug or device to a patient, except for samples packaged for
12 individual use by licensed manufacturers or repackagers of drugs, and
13 includes the prescribing, administering, packaging, labeling and security
14 necessary to prepare and safeguard the drug or device for delivery.

15 10. "Doctor of medicine" means a natural person holding a license,
16 registration or permit to practice medicine pursuant to this chapter.

17 11. "Full-time faculty member" means a physician who is employed
18 full time as a faculty member while holding the academic position of
19 assistant professor or a higher position at an approved school of
20 medicine.

21 12. "Health care institution" means any facility as defined in
22 section 36-401, any person authorized to transact disability insurance, as
23 defined in title 20, chapter 6, article 4 or 5, any person who is issued a
24 certificate of authority pursuant to title 20, chapter 4, article 9 or any
25 other partnership, association or corporation that provides health care to
26 consumers.

27 13. "Immediate family" means the spouse, natural or adopted
28 children, father, mother, brothers and sisters of the doctor and the
29 natural or adopted children, father, mother, brothers and sisters of the
30 doctor's spouse.

31 14. "Letter of reprimand" means a disciplinary letter that is
32 issued by the board and that informs the physician that the physician's
33 conduct violates state or federal law and may require the board to monitor
34 the physician.

35 15. "Limit" means taking a nondisciplinary action that alters the
36 physician's practice or professional activities if the board determines
37 that there is evidence that the physician is or may be mentally or
38 physically unable to safely engage in the practice of medicine.

39 16. "Medical assistant" means an unlicensed person who meets the
40 requirements of section 32-1456, has completed an education program
41 approved by the board, assists in a medical practice under the supervision
42 of a doctor of medicine, physician assistant or nurse practitioner and
43 performs delegated procedures commensurate with the assistant's education
44 and training but does not diagnose, interpret, design or modify

1 established treatment programs or perform any functions that would violate
2 any statute applicable to the practice of medicine.

3 17. "Medical peer review" means:

4 (a) The participation by a doctor of medicine in the review and
5 evaluation of the medical management of a patient and the use of resources
6 for patient care.

7 (b) Activities relating to a health care institution's decision to
8 grant or continue privileges to practice at that institution.

9 18. "Medically incompetent" means a person who the board determines
10 is incompetent based on a variety of factors, including:

11 (a) A lack of sufficient medical knowledge or skills, or both, to a
12 degree likely to endanger the health of patients.

13 (b) When considered with other indications of medical incompetence,
14 failing to obtain a scaled score of at least seventy-five percent on the
15 written special purpose licensing examination.

16 19. "Medicine" means allopathic medicine as practiced by the
17 recipient of a degree of doctor of medicine.

18 20. "Office based surgery" means a medical procedure conducted in a
19 physician's office or other outpatient setting that is not part of a
20 licensed hospital or licensed ambulatory surgical center.

21 21. "Physician" means a doctor of medicine who is licensed pursuant
22 to this chapter.

23 22. "Practice of medicine" means the diagnosis, the treatment or
24 the correction of or the attempt or the claim to be able to diagnose,
25 treat or correct any and all human diseases, injuries, ailments,
26 infirmities or deformities, physical or mental, real or imaginary, by any
27 means, methods, devices or instrumentalities, except as the same may be
28 among the acts or persons not affected by this chapter. The practice of
29 medicine includes the practice of medicine alone or the practice of
30 surgery alone, or both.

31 23. "Restrict" means taking a disciplinary action that alters the
32 physician's practice or professional activities if the board determines
33 that there is evidence that the physician is or may be medically
34 incompetent or guilty of unprofessional conduct.

35 24. "Special purpose licensing examination" means an examination
36 that is developed by the national board of medical examiners on behalf of
37 the federation of state medical boards for use by state licensing boards
38 to test the basic medical competence of physicians who are applying for
39 licensure and who have been in practice for a considerable period of time
40 in another jurisdiction and to determine the competence of a physician who
41 is under investigation by a state licensing board.

42 25. "Teaching hospital's accredited graduate medical education
43 program" means that the hospital is incorporated and has an internship,
44 fellowship or residency training program that is accredited by the
45 accreditation council for graduate medical education, the American medical

1 association, the association of American medical colleges, the royal
2 college of physicians and surgeons of Canada or a similar body in the
3 United States or Canada that is approved by the board and whose function
4 is that of approving hospitals for internship, fellowship or residency
5 training.

6 26. "Teaching license" means a valid license to practice medicine
7 as a full-time faculty member of an approved school of medicine or a
8 teaching hospital's accredited graduate medical education program.

9 27. "Unprofessional conduct" includes the following, whether
10 occurring in this state or elsewhere:

11 (a) Violating any federal or state laws, rules or regulations
12 applicable to the practice of medicine.

13 (b) Intentionally disclosing a professional secret or intentionally
14 disclosing a privileged communication except as either act may otherwise
15 be required by law.

16 (c) False, fraudulent, deceptive or misleading advertising by a
17 doctor of medicine or the doctor's staff, employer or representative.

18 (d) Committing a felony, whether or not involving moral turpitude,
19 or a misdemeanor involving moral turpitude. In either case, conviction by
20 any court of competent jurisdiction or a plea of no contest is conclusive
21 evidence of the commission.

22 (e) Failing or refusing to maintain adequate records on a patient.

23 ~~(f) Habitual intemperance in the use of alcohol or habitual~~
24 ~~substance abuse.~~

25 (f) A PATTERN OF USING OR BEING UNDER THE INFLUENCE OF ALCOHOL OR
26 DRUGS OR A SIMILAR SUBSTANCE WHILE PRACTICING MEDICINE OR TO THE EXTENT
27 THAT JUDGMENT MAY BE IMPAIRED AND THE PRACTICE OF MEDICINE DETRIMENTALLY
28 AFFECTED.

29 (g) Using controlled substances except if prescribed by another
30 physician for use during a prescribed course of treatment.

31 (h) Prescribing or dispensing controlled substances to members of
32 the physician's immediate family.

33 (i) Prescribing, dispensing or administering schedule II controlled
34 substances as defined in section 36-2513 including amphetamines and
35 similar schedule II sympathomimetic drugs in the treatment of exogenous
36 obesity for a period in excess of thirty days in any one year, or the
37 nontherapeutic use of injectable amphetamines.

38 (j) Prescribing, dispensing or administering any controlled
39 substance or prescription-only drug for other than accepted therapeutic
40 purposes.

41 (k) Signing a blank, undated or predated prescription form.

42 (l) Conduct that the board determines is gross malpractice,
43 repeated malpractice or any malpractice resulting in the death of a
44 patient.

1 (m) Representing that a manifestly incurable disease or infirmity
2 can be permanently cured, or that any disease, ailment or infirmity can be
3 cured by a secret method, procedure, treatment, medicine or device, if
4 this is not true.

5 (n) Refusing to divulge to the board on demand the means, method,
6 procedure, modality of treatment or medicine used in the treatment of a
7 disease, injury, ailment or infirmity.

8 (o) Action that is taken against a doctor of medicine by another
9 licensing or regulatory jurisdiction due to that doctor's mental or
10 physical inability to engage safely in the practice of medicine or the
11 doctor's medical incompetence or for unprofessional conduct as defined by
12 that jurisdiction and that corresponds directly or indirectly to an act of
13 unprofessional conduct prescribed by this paragraph. The action taken may
14 include refusing, denying, revoking or suspending a license by that
15 jurisdiction or a surrendering of a license to that jurisdiction,
16 otherwise limiting, restricting or monitoring a licensee by that
17 jurisdiction or placing a licensee on probation by that jurisdiction.

18 (p) Sanctions imposed by an agency of the federal government,
19 including restricting, suspending, limiting or removing a person from the
20 practice of medicine or restricting that person's ability to obtain
21 financial remuneration.

22 (q) Any conduct or practice that is or might be harmful or
23 dangerous to the health of the patient or the public.

24 (r) Violating a formal order, probation, consent agreement or
25 stipulation issued or entered into by the board or its executive director
26 under this chapter.

27 (s) Violating or attempting to violate, directly or indirectly, or
28 assisting in or abetting the violation of or conspiring to violate any
29 provision of this chapter.

30 (t) Knowingly making any false or fraudulent statement, written or
31 oral, in connection with the practice of medicine or if applying for
32 privileges or renewing an application for privileges at a health care
33 institution.

34 (u) Charging a fee for services not rendered or dividing a
35 professional fee for patient referrals among health care providers or
36 health care institutions or between these providers and institutions or a
37 contractual arrangement that has the same effect. This subdivision does
38 not apply to payments from a medical researcher to a physician in
39 connection with identifying and monitoring patients for a clinical trial
40 regulated by the United States food and drug administration.

41 (v) Obtaining a fee by fraud, deceit or misrepresentation.

42 (w) Charging or collecting a clearly excessive fee. In determining
43 whether a fee is clearly excessive, the board shall consider the fee or
44 range of fees customarily charged in this state for similar services in
45 light of modifying factors such as the time required, the complexity of

1 the service and the skill requisite to perform the service properly. This
2 subdivision does not apply if there is a clear written contract for a
3 fixed fee between the physician and the patient that has been entered into
4 before the provision of the service.

5 (x) Conduct that is in violation of section 36-2302.

6 (y) The use of experimental forms of diagnosis and treatment
7 without adequate informed patient consent, and without conforming to
8 generally accepted experimental criteria, including protocols, detailed
9 records, periodic analysis of results and periodic review by a medical
10 peer review committee as approved by the United States food and drug
11 administration or its successor agency.

12 (z) Engaging in sexual conduct with a current patient or with a
13 former patient within six months after the last medical consultation
14 unless the patient was the licensee's spouse at the time of the contact
15 or, immediately preceding the physician-patient relationship, was in a
16 dating or engagement relationship with the licensee. For the purposes of
17 this subdivision, "sexual conduct" includes:

18 (i) Engaging in or soliciting sexual relationships, whether
19 consensual or nonconsensual.

20 (ii) Making sexual advances, requesting sexual favors or engaging
21 in any other verbal conduct or physical contact of a sexual nature.

22 (iii) Intentionally viewing a completely or partially disrobed
23 patient in the course of treatment if the viewing is not related to
24 patient diagnosis or treatment under current practice standards.

25 (aa) Procuring or attempting to procure a license to practice
26 medicine or a license renewal by fraud, by misrepresentation or by
27 knowingly taking advantage of the mistake of another person or an agency.

28 (bb) Representing or claiming to be a medical specialist if this is
29 not true.

30 (cc) Maintaining a professional connection with or lending one's
31 name to enhance or continue the activities of an illegal practitioner of
32 medicine.

33 (dd) Failing to furnish information in a timely manner to the board
34 or the board's investigators or representatives if legally requested by
35 the board.

36 (ee) Failing to allow properly authorized board personnel on demand
37 to examine and have access to documents, reports and records maintained by
38 the physician that relate to the physician's medical practice or medically
39 related activities.

40 (ff) Knowingly failing to disclose to a patient on a form that is
41 prescribed by the board and that is dated and signed by the patient or
42 guardian acknowledging that the patient or guardian has read and
43 understands that the doctor has a direct financial interest in a separate
44 diagnostic or treatment agency or in nonroutine goods or services that the
45 patient is being prescribed if the prescribed treatment, goods or services

1 are available on a competitive basis. This subdivision does not apply to
2 a referral by one doctor of medicine to another doctor of medicine within
3 a group of doctors of medicine practicing together.

4 (gg) Using chelation therapy in the treatment of arteriosclerosis
5 or as any other form of therapy, with the exception of treatment of heavy
6 metal poisoning, without:

7 (i) Adequate informed patient consent.

8 (ii) Conforming to generally accepted experimental criteria,
9 including protocols, detailed records, periodic analysis of results and
10 periodic review by a medical peer review committee.

11 (iii) Approval by the United States food and drug administration or
12 its successor agency.

13 (hh) Prescribing, dispensing or administering anabolic-androgenic
14 steroids to a person for other than therapeutic purposes.

15 (ii) Lack of or inappropriate direction, collaboration or direct
16 supervision of a medical assistant or a licensed, certified or registered
17 health care provider employed by, supervised by or assigned to the
18 physician.

19 (jj) Knowingly making a false or misleading statement to the board
20 or on a form required by the board or in a written correspondence,
21 including attachments, with the board.

22 (kk) Failing to dispense drugs and devices in compliance with
23 article 6 of this chapter.

24 (ll) Conduct that the board determines is gross negligence,
25 repeated negligence or negligence resulting in harm to or the death of a
26 patient.

27 (mm) The representation by a doctor of medicine or the doctor's
28 staff, employer or representative that the doctor is boarded or board
29 certified if this is not true or the standing is not current or without
30 supplying the full name of the specific agency, organization or entity
31 granting this standing.

32 (nn) Refusing to submit to a body fluid examination or any other
33 examination known to detect the presence of alcohol or other drugs as
34 required by the board pursuant to section 32-1452 or pursuant to a board
35 investigation into a doctor of medicine's alleged substance abuse.

36 (oo) Failing to report in writing to the Arizona medical board or
37 the Arizona regulatory board of physician assistants any evidence that a
38 doctor of medicine or a physician assistant is or may be medically
39 incompetent, guilty of unprofessional conduct or mentally or physically
40 unable to safely practice medicine or to perform as a physician assistant.

41 (pp) The failure of a physician who is the chief executive officer,
42 the medical director or the medical chief of staff of a health care
43 institution to report in writing to the board that the hospital privileges
44 of a doctor of medicine have been denied, revoked, suspended, supervised
45 or limited because of actions by the doctor that appear to show that the

1 doctor is or may be medically incompetent, is or may be guilty of
2 unprofessional conduct or is or may be unable to engage safely in the
3 practice of medicine.

4 (qq) Claiming to be a current member of the board or its staff or a
5 board medical consultant if this is not true.

6 (rr) Failing to make patient medical records in the physician's
7 possession promptly available to a physician assistant, a nurse
8 practitioner, a person licensed pursuant to this chapter or a podiatrist,
9 chiropractor, naturopathic physician, osteopathic physician or homeopathic
10 physician licensed under chapter 7, 8, 14, 17 or 29 of this title on
11 receipt of proper authorization to do so from the patient, a minor
12 patient's parent, the patient's legal guardian or the patient's authorized
13 representative or failing to comply with title 12, chapter 13, article
14 7.1.

15 (ss) Prescribing, dispensing or furnishing a prescription
16 medication or a prescription-only device as defined in section 32-1901 to
17 a person unless the licensee first conducts a physical or mental health
18 status examination of that person or has previously established a
19 doctor-patient relationship. The physical or mental health status
20 examination may be conducted during a real-time telemedicine encounter
21 with audio and video capability if the telemedicine audio and video
22 capability meets the elements required by the centers for medicare and
23 medicaid services, unless the examination is for the purpose of obtaining
24 a written certification from the physician for the purposes of title 36,
25 chapter 28.1. This subdivision does not apply to:

26 (i) A physician who provides temporary patient supervision on
27 behalf of the patient's regular treating licensed health care professional
28 or provides a consultation requested by the patient's regular treating
29 licensed health care professional.

30 (ii) Emergency medical situations as defined in section 41-1831.

31 (iii) Prescriptions written to prepare a patient for a medical
32 examination.

33 (iv) Prescriptions written or prescription medications issued for
34 use by a county or tribal public health department for immunization
35 programs or emergency treatment or in response to an infectious disease
36 investigation, public health emergency, infectious disease outbreak or act
37 of bioterrorism. For the purposes of this item, "bioterrorism" has the
38 same meaning prescribed in section 36-781.

39 (v) Prescriptions written or antimicrobials dispensed to a contact
40 as defined in section 36-661 who is believed to have had significant
41 exposure risk as defined in section 36-661 with another person who has
42 been diagnosed with a communicable disease as defined in section 36-661 by
43 the prescribing or dispensing physician.

44 (vi) Prescriptions written or prescription medications issued for
45 administration of immunizations or vaccines listed in the United States

1 centers for disease control and prevention's recommended immunization
2 schedule to a household member of a patient.

3 (vii) Prescriptions for epinephrine auto-injectors written or
4 dispensed for a school district or charter school to be stocked for
5 emergency use pursuant to section 15-157 or for an authorized entity to be
6 stocked pursuant to section 36-2226.01.

7 (viii) Prescriptions written by a licensee through a telemedicine
8 program that is covered by the policies and procedures adopted by the
9 administrator of a hospital or outpatient treatment center.

10 (ix) Prescriptions for naloxone hydrochloride or any other opioid
11 antagonist approved by the United States food and drug administration that
12 are written or dispensed for use pursuant to section 36-2228 or 36-2266.

13 (tt) Performing office based surgery using sedation in violation of
14 board rules.

15 (uu) Practicing medicine under a false or assumed name in this
16 state.

17 Sec. 2. Section 32-1402, Arizona Revised Statutes, is amended to
18 read:

19 32-1402. Board; appointment; qualifications; term; removal;
20 compensation; immunity; report

21 A. The Arizona medical board is established. The board consists of
22 twelve members, four of whom shall represent the public and eight of whom
23 shall be actively practicing medicine. One of the four public members
24 shall be a licensed practical nurse or a professional nurse, as defined in
25 chapter 15 of this title, with at least five years' experience. The eight
26 physicians must be from at least three different counties of the state.
27 Not more than five of the board members may be from any one county.
28 Members of the board are appointed by the governor. All appointments
29 shall be made promptly. The governor shall make all appointments pursuant
30 to section 38-211.

31 B. Each doctor of medicine who is appointed to the board shall have
32 been a resident of this state and actively engaged in the practice of
33 medicine as a licensed physician in this state for at least the five years
34 before appointment.

35 C. The term of office of a member of the board is five years,
36 commencing on July 1 and terminating on July 1 of the fifth year. Each
37 member is eligible for reappointment for not more than one additional
38 term. However, the term of office for a member of the board appointed to
39 fill a vacancy occasioned other than by expiration of a full term is for
40 the unexpired portion of that term. Each member may be appointed only
41 once to fill a vacancy caused other than by expiration of a term. The
42 governor may reappoint that member to not more than two additional full
43 terms. Each member of the board shall continue to hold office until the
44 appointment and qualification of that member's successor, subject to the
45 following exceptions:

1 1. A member of the board, after notice and a hearing before the
2 governor, may be removed on a finding by the governor of continued neglect
3 of duty, incompetence, or unprofessional or dishonorable conduct, in which
4 event that member's term shall end when the governor makes this finding.

5 2. The term of any member automatically ends:

6 (a) On death.

7 (b) On written resignation submitted to the board chairman or to
8 the governor.

9 (c) On absence from the state for a period of more than six months.

10 (d) For failure to attend three consecutive meetings of the board.

11 (e) Five years after retirement from the active practice of
12 medicine.

13 D. The board shall annually elect, from among its membership, a
14 chairman, a vice-chairman and a secretary, who shall hold their respective
15 offices at the pleasure of the board.

16 E. Board members are eligible to receive compensation in the amount
17 of UP TO two hundred fifty dollars per day for each day of actual service
18 in the business of the board, INCLUDING TIME SPENT IN PREPARATION FOR AND
19 ATTENDANCE AT BOARD MEETINGS, and all expenses necessarily and properly
20 incurred in attending meetings of the board.

21 F. Members of the board are personally immune from suit with
22 respect to all acts done and actions taken in good faith and in
23 furtherance of the purposes of this chapter.

24 G. The board shall submit a written report to the governor, the
25 Arizona regulatory board of physician assistants and the members of the
26 health and human services committee of the senate and the health committee
27 of the house of representatives, or their successor committees, no later
28 than August 31 of each year on the board's licensing and disciplinary
29 activities for the previous fiscal year. The report must include both of
30 the following:

31 1. Information regarding staff turnover that indicates whether the
32 person was temporary, part-time or full-time and in which department or
33 division the person worked.

34 2. The number of investigators ~~that~~ WHO have been hired and how
35 many of them have completed the investigator training program required by
36 section 32-1405.

37 H. Public members appointed to the board may submit a separate
38 written report to the governor by August 31 of each year setting forth
39 their comments relative to the board's licensing and disciplinary
40 activities for the previous fiscal year.

1 Sec. 3. Section 32-1422, Arizona Revised Statutes, is amended to
2 read:

3 32-1422. Basic requirements for granting a license to
4 practice medicine; credentials verification

5 A. An applicant for a license to practice medicine in this state
6 pursuant to this article shall meet each of the following basic
7 requirements:

8 1. Graduate from an approved school of medicine or receive a
9 medical education that the board deems to be of equivalent quality.

10 2. Successfully complete an approved twelve-month hospital
11 internship, residency or clinical fellowship program.

12 3. Have the physical and mental capability to safely engage in the
13 practice of medicine.

14 4. Have a professional record that indicates that the applicant has
15 not committed any act or engaged in any conduct that would constitute
16 grounds for disciplinary action against a licensee under this chapter.

17 5. Not have had a license to practice medicine revoked by a medical
18 regulatory board in another jurisdiction in the United States for an act
19 that occurred in that jurisdiction that constitutes unprofessional conduct
20 pursuant to this chapter.

21 6. Not be currently under investigation, suspension or restriction
22 by a medical regulatory board in another jurisdiction in the United States
23 for an act that occurred in that jurisdiction and that constitutes
24 unprofessional conduct pursuant to this chapter. If the applicant is
25 under investigation by a medical regulatory board in another jurisdiction,
26 the board shall suspend the application process and may not issue or deny
27 a license to the applicant until the investigation is resolved.

28 7. Not have surrendered a license to practice medicine in lieu of
29 disciplinary action by a medical regulatory board in another jurisdiction
30 in the United States for an act that occurred in that jurisdiction and
31 that constitutes unprofessional conduct pursuant to this chapter.

32 8. Pay all fees required by the board.

33 9. Complete the application as required by the board.

34 10. Complete a training unit as prescribed by the board relating to
35 the requirements of this chapter and board rules. The applicant shall
36 submit proof with the application form of having completed the training
37 unit.

38 11. Have submitted directly to the board, electronically or by hard
39 copy, verification of the following:

40 (a) Licensure from every state in which the applicant has ever held
41 a medical license.

42 (b) ~~All hospital affiliations and medical employment for the five~~
43 ~~years preceding application. Each hospital must verify affiliations or~~
44 ~~employment on the hospital's official letterhead or the electronic~~
45 ~~equivalent.~~ If the applicant is employed by a hospital or medical group

1 or organization, the board shall accept the ~~verifications~~ CONFIRMATION
2 required under this subdivision from the applicant's employer. FOR THE
3 PURPOSES OF THIS SUBDIVISION, MEDICAL EMPLOYMENT INCLUDES ALL MEDICAL
4 PROFESSIONAL ACTIVITIES.

5 ~~12. Beginning September 2, 2014,~~ Have submitted a full set of
6 fingerprints to the board for the purpose of obtaining a state and federal
7 criminal records check pursuant to section 41-1750 and Public Law 92-544.
8 The department of public safety may exchange this fingerprint data with
9 the federal bureau of investigation.

10 B. The board may require the submission of credentials or other
11 evidence, written and oral, and make any investigation it deems necessary
12 to adequately inform itself with respect to an applicant's ability to meet
13 the requirements prescribed by this section, including a requirement that
14 the applicant for licensure undergo a physical examination, a mental
15 evaluation and an oral competence examination and interview, or any
16 combination thereof, as the board deems proper.

17 C. In determining if the requirements of subsection A, paragraph 4
18 of this section have been met, if the board finds that the applicant
19 committed an act or engaged in conduct that would constitute grounds for
20 disciplinary action, the board shall determine to its satisfaction that
21 the conduct has been corrected, monitored and resolved. If the matter has
22 not been resolved, the board shall determine to its satisfaction that
23 mitigating circumstances exist that prevent its resolution.

24 D. In determining if the requirements of subsection A, paragraph 6
25 of this section have been met, if another jurisdiction has taken
26 disciplinary action against an applicant, the board shall determine to its
27 satisfaction that the cause for the action was corrected and the matter
28 resolved. If the matter has not been resolved by that jurisdiction, the
29 board shall determine to its satisfaction that mitigating circumstances
30 exist that prevent its resolution.

31 E. The board may delegate authority to the executive director to
32 deny licenses if applicants do not meet the requirements of this section.

33 F. Any credential information required to be submitted to the board
34 pursuant to this article must be submitted, electronically or by hard
35 copy, from the primary source where the document or information
36 originated, except that the board may accept primary-source verified
37 credentials from a credentials verification service approved by the
38 board. The board is not required to verify any documentation or
39 information received by the board from a credentials verification service
40 that has been approved by the board. If an applicant is unable to provide
41 a document or information from the primary source due to no fault of the
42 applicant, the executive director shall forward the issue to the full
43 board for review and determination. The board shall adopt rules
44 establishing the criteria that must be met in order to waive a
45 documentation requirement of this article.

1 Sec. 4. Section 32-1426, Arizona Revised Statutes, is amended to
2 read:

3 32-1426. Licensure by endorsement

4 A. An applicant who is licensed in another jurisdiction or whose
5 license under this chapter HAS BEEN REVOKED OR SURRENDERED OR has expired
6 and who meets the applicable requirements prescribed in section 32-1422,
7 32-1423 or 32-1424, has paid the fees required by this chapter and has
8 filed a completed application found by the board to be true and correct is
9 eligible to be licensed to engage in the practice of medicine in this
10 state through endorsement under any one of the following conditions:

11 1. The applicant is certified by the national board of medical
12 examiners or its successor entity as having successfully passed all three
13 parts of the United States medical licensing examination or its successor
14 examination.

15 2. The applicant has successfully passed a written examination that
16 the board determines is equivalent to the United States medical licensing
17 examination and that is administered by any state, territory or district
18 of the United States, a province of Canada or the medical council of
19 Canada.

20 3. The applicant successfully completed the three-part written
21 federation of state medical boards licensing examination administered by
22 any jurisdiction before January 1, 1985 and obtained a weighted grade
23 average of at least seventy-five on the complete examination. Successful
24 completion of the examination shall be achieved in one sitting.

25 4. The applicant successfully completed the two component
26 federation licensing examination administered after December 1, 1984 and
27 obtained a scaled score of at least seventy-five on each component within
28 a five-year period.

29 5. The applicant's score on the United States medical licensing
30 examination was equal to the score required by this state for licensure
31 pursuant to section 32-1425.

32 6. The applicant successfully completed one of the following
33 combinations of examinations:

34 (a) Parts one and two of the national board of medical examiners
35 examination, administered either by the national board of medical
36 examiners or the educational commission for foreign medical graduates,
37 with a successful score determined by the national board of medical
38 examiners and passed either step three of the United States medical
39 licensing examination or component two of the federation licensing
40 examination with a scaled score of at least seventy-five.

41 (b) The federation licensing examination component one examination
42 and the United States medical licensing step three examination with scaled
43 scores of at least seventy-five.

44 (c) Each of the following:

1 (i) Part one of the national board of medical examiners licensing
2 examination with a passing grade as determined by the national board of
3 medical examiners or step one of the United States medical licensing
4 examination with a scaled score of at least seventy-five.

5 (ii) Part two of the national board of medical examiners licensing
6 examination with a passing grade as determined by the national board of
7 medical examiners or step two of the United States medical licensing
8 examination with a scaled score of at least seventy-five.

9 (iii) Part three of the national board of medical examiners
10 licensing examination with a passing grade as determined by the national
11 board of medical examiners or step three of the United States medical
12 licensing examination with a scaled score of at least seventy-five or
13 component two of the federation licensing examination with a scaled score
14 of at least seventy-five.

15 B. The board may require an applicant seeking licensure by
16 endorsement based on successful passage of a written examination or
17 combination of examinations, the most recent of which precedes by more
18 than ten years the application for licensure by endorsement in this state,
19 to take and pass a special purpose licensing examination to assist the
20 board in determining the applicant's ability to safely engage in the
21 practice of medicine. The board may also conduct a records review and
22 physical and psychological assessments, if appropriate, and may review
23 practice history to determine the applicant's ability to safely engage in
24 the practice of medicine.

25 Sec. 5. Section 32-1438, Arizona Revised Statutes, is amended to
26 read:

27 32-1438. Temporary licensure; requirements; fee

28 A. Beginning July 1, 2017, the board may issue a temporary license,
29 which may not be renewed or extended, to allow a physician who is not a
30 licensee to practice in this state for a total of up to two hundred fifty
31 consecutive days if the physician meets all of the following requirements:

32 1. Holds an active and unrestricted license to practice medicine in
33 a state, territory or possession of the United States.

34 ~~2. Has never had a license revoked or suspended or surrendered a~~
35 ~~license for disciplinary reasons.~~

36 ~~3. Is not the subject of an unresolved complaint.~~

37 ~~4.~~ 2. Has applied for a license pursuant to section 32-1422 AND
38 MEETS THE REQUIREMENTS SPECIFIED IN SECTION 32-1422, SUBSECTION A,
39 PARAGRAPHS 1 THROUGH 7.

40 ~~5.~~ 3. Has paid any applicable fees.

41 B. The physician shall submit to the board a notarized affidavit
42 attesting that the physician meets the requirements of subsection A,
43 paragraphs 1, AND 2 and 3 of this section. The physician shall notify
44 the board immediately if any circumstance specified in subsection A,
45 paragraphs 1, AND 2 and 3 of this section changes during the application

1 period for a temporary license or while holding a temporary license, at
2 which time the board may SUSPEND, deny or revoke the temporary license.
3 THE BOARD MAY SUSPEND, DENY OR REVOKE A TEMPORARY LICENSE AND WITHDRAW THE
4 APPLICATION FOR INITIAL LICENSURE IF THE APPLICANT HAS MADE A
5 MISREPRESENTATION IN THE ATTESTATION REQUIRED BY THIS SECTION OR ANY OTHER
6 PORTION OF THE APPLICATION PURSUANT TO THIS CHAPTER.

7 C. The board shall approve or deny an application under this
8 section within thirty days after an applicant files a complete
9 application. The approval of a temporary license pursuant to this section
10 allows the physician to practice in this state without restriction.

11 D. If granted, the physician's temporary license expires the
12 earlier of two hundred fifty days after the date the temporary license is
13 granted or on approval or denial of the physician's license application
14 submitted pursuant to section 32-1422.

15 E. For the purpose of meeting the requirements of subsection A of
16 this section, an applicant shall provide the board the name of each state,
17 territory or possession of the United States in which the person is
18 licensed or has held a license and the board shall verify with the
19 applicable regulatory board that the applicant holds an active and
20 unrestricted license to practice medicine, AND has never had a license
21 revoked or suspended or surrendered a license for disciplinary reasons ~~and~~
22 ~~is not the subject of an unresolved complaint.~~ AN APPLICANT SHALL ALSO
23 PROVIDE THE BOARD WITH ALL MEDICAL EMPLOYMENT AS REQUIRED BY SECTION
24 32-1422, SUBSECTION A. The board may accept the ~~verification~~ CONFIRMATION
25 of this information from each other regulatory board verbally, IN WRITING
26 OR THROUGH THE USE OF THE OTHER REGULATORY BOARD'S WEBSITE, which shall be
27 followed by either an electronic or hard copy OF THE VERIFICATION REQUIRED
28 BY SECTION 32-1422, SUBSECTION F before the physician's permanent license
29 is granted. If the board is unable to verify the information within the
30 initial thirty days as required by subsection C of this section, the board
31 may extend the time frame by an additional thirty days to receive the
32 necessary verification.

33 F. The board may establish a fee in rule for temporary licensure
34 under this section.

35 Sec. 6. Section 32-1452, Arizona Revised Statutes, is amended to
36 read:

37 32-1452. Substance abuse treatment and rehabilitation;
38 confidential program; private contract; funding;
39 license restrictions; immunity

40 A. The board may establish a confidential program for the treatment
41 and rehabilitation of doctors of medicine who are licensed pursuant to
42 this chapter and physician assistants who are licensed pursuant to chapter
43 25 of this title and who are impaired by alcohol or drug abuse. This
44 program shall include education, intervention, therapeutic treatment and
45 posttreatment monitoring and support.

1 B. The board may contract with other organizations to operate the
2 program established pursuant to subsection A of this section. A contract
3 with a private organization shall include the following requirements:

4 1. Periodic reports to the board regarding treatment program
5 activity.

6 2. Release to the board on demand of all treatment records.

7 3. Immediate reporting to the board of the name of an impaired
8 doctor or physician assistant ~~who~~ WHOM the treating organization believes
9 to be misusing chemical substances.

10 4. Reports to the board, as soon as possible, of the name of a
11 doctor or physician assistant who refuses to submit to treatment or whose
12 impairment is not substantially alleviated through treatment.

13 C. The board may allocate an amount of not to exceed forty dollars
14 from each fee it collects from the biennial renewal of active licenses
15 pursuant to section 32-1436 for the operation of the program established
16 by this section.

17 D. A doctor of medicine or physician assistant who ~~is impaired by~~
18 ~~alcohol or drug abuse~~ COMMITS UNPROFESSIONAL CONDUCT AS DEFINED IN SECTION
19 32-1401, PARAGRAPH 27, SUBDIVISION (f) shall agree to enter into a
20 ~~stipulation order~~ CONSENT AGREEMENT with the board or the doctor or
21 physician assistant shall be placed on probation or shall be subject to
22 other action as provided by law.

23 E. In order to determine that a doctor of medicine or physician
24 assistant who has been placed on probationary order or who has entered
25 into a ~~stipulation order~~ CONSENT AGREEMENT pursuant to this section ~~is not~~
26 ~~impaired by drugs or alcohol~~ HAS NOT COMMITTED UNPROFESSIONAL CONDUCT AS
27 DEFINED IN SECTION 32-1401, PARAGRAPH 27, SUBDIVISION (f) after that order
28 is no longer in effect, the board or its designee may require the doctor
29 of medicine or physician assistant to submit to body fluid examinations
30 and other examinations known to detect the presence of alcohol or other
31 drugs at any time within five consecutive years following termination of
32 the probationary ORDER or ~~stipulated order~~ CONSENT AGREEMENT.

33 F. A doctor of medicine or physician assistant who is ~~impaired by~~
34 ~~alcohol or drug abuse and who~~ OR was under a ~~board stipulation~~ CONSENT
35 AGREEMENT or probationary order that is no longer in effect AND WHO
36 COMMITS UNPROFESSIONAL CONDUCT AS DEFINED IN SECTION 32-1401, PARAGRAPH
37 27, SUBDIVISION (f) shall request the board to place the license on
38 inactive status with cause. If the doctor or physician assistant fails to
39 do this, the board shall summarily suspend the license pursuant to section
40 32-1451, subsection D. In order to reactivate the license, the doctor or
41 physician assistant shall successfully complete a long-term care
42 residential ~~or~~ PROGRAM, AN inpatient hospital treatment program, ~~or both,~~
43 AN INTENSIVE OUTPATIENT TREATMENT PROGRAM OR ANY COMBINATION OF THESE
44 PROGRAMS and shall meet the applicable requirements of section 32-1431,
45 subsection D. After the doctor or physician assistant completes

1 treatment, the board shall determine ~~if~~ WHETHER it should refer the matter
2 for a formal hearing for the purpose of suspending or revoking the license
3 or to place the licensee on probation for a minimum of five years with
4 restrictions necessary to ensure the public's safety.

5 G. The board shall revoke the license of a doctor of medicine or
6 physician assistant if that licensee ~~is impaired by alcohol or drug abuse~~
7 COMMITS UNPROFESSIONAL CONDUCT AS DEFINED IN SECTION 32-1401, PARAGRAPH
8 27, SUBDIVISION (f) and was previously placed on probation pursuant to
9 subsection D of this section and the probation is no longer in effect.
10 The board may accept the surrender of the license if the licensee admits
11 in writing to being impaired by alcohol or drug abuse.

12 H. An evaluator, teacher, supervisor or volunteer in the board's
13 substance abuse treatment and rehabilitation program who acts in good
14 faith within the scope of that program is not subject to civil liability,
15 including malpractice liability, for the actions of a doctor or physician
16 assistant who is attending the program pursuant to board action.

17 Sec. 7. Section 32-1452.01, Arizona Revised Statutes, is amended to
18 read:

19 32-1452.01. Mental, behavioral and physical health evaluation
20 and treatment; confidential program; private
21 contract; immunity

22 A. The board may establish a confidential program for the
23 evaluation, treatment and monitoring of persons WHO ARE licensed pursuant
24 to this chapter and chapter 25 of this title AND who have medical,
25 psychiatric, psychological or behavioral health disorders that may impact
26 their ability to safely practice medicine or perform ~~healthcare~~ HEALTH
27 CARE tasks. The program shall include education, intervention,
28 therapeutic treatment and posttreatment monitoring and support.

29 B. A licensee who has a medical, psychiatric, psychological or
30 behavioral health disorder described in subsection A, ~~who voluntarily~~
31 ~~reports that disorder to that licensee's board and who has not committed a~~
32 ~~statutory violation under this chapter or chapter 25 of this title~~ OF THIS
33 SECTION may agree to enter into a ~~confidential~~ consent agreement for
34 participation in a program established pursuant to this section.

35 ~~C. A licensee who has a medical, psychiatric, psychological or~~
36 ~~behavioral health disorder described in subsection A, who is reported to~~
37 ~~that licensee's board by a peer review committee, hospital medical staff,~~
38 ~~health plan or other health care practitioner or health care entity and~~
39 ~~who has not committed a statutory violation under this chapter or chapter~~
40 ~~25 of this title may agree to enter into a confidential consent agreement~~
41 ~~for participation in a program established pursuant to this section.~~

42 ~~D.~~ C. The board may contract with other organizations to operate a
43 program established pursuant to this section. A contract with a private
44 organization must include the following requirements:

1 1. Periodic reports to the board regarding treatment program
2 activity.

3 2. Release to the board on demand of all treatment records.

4 3. Immediate reporting to the Arizona medical board of the name of
5 a licensee who the treating organization believes is incapable of safely
6 practicing medicine or performing ~~healthcare~~ HEALTH CARE tasks. If the
7 licensee is a physician assistant, the Arizona medical board shall
8 immediately report this information to the Arizona regulatory board of
9 physician assistants.

10 ~~E.~~ D. An evaluator, teacher, supervisor or volunteer in a program
11 established pursuant to this section who acts in good faith within the
12 scope of that program is not subject to civil liability, including
13 malpractice liability, for the actions of a licensee who is attending the
14 program pursuant to board action.

15 Sec. 8. Section 32-1458, Arizona Revised Statutes, is amended to
16 read:

17 32-1458. Reinstatement of revoked or surrendered license

18 A. On written application, the board may issue a new license to a
19 physician whose license was previously revoked by the board or surrendered
20 by the applicant if the applicant demonstrates to the board's satisfaction
21 that the applicant is completely rehabilitated with respect to the conduct
22 that was the basis for the revocation or the surrender. In making its
23 decision, the board shall determine:

24 1. That the applicant has not engaged in any conduct during the
25 revocation or surrender period that would have constituted a basis for
26 revocation pursuant to section 32-1451.

27 2. If a criminal conviction was a basis of the revocation or
28 surrender, that the applicant's civil rights have been fully restored
29 pursuant to statute or any other applicable recognized judicial or
30 gubernatorial order.

31 3. That the applicant has made restitution to any aggrieved person
32 as ordered by a court of competent jurisdiction.

33 4. That the applicant demonstrates any other standard of
34 rehabilitation the board determines is appropriate.

35 B. Except as provided in subsection C of this section, a person
36 shall not submit an application for reinstatement less than five years
37 after the date of revocation or surrender.

38 C. The board shall vacate its previous order to revoke a license if
39 that revocation was based on a conviction of a felony or an offense
40 involving moral turpitude and that conviction has been reversed on
41 appeal. The physician may submit an application for reinstatement as soon
42 as the court enters the reversal.

43 D. An applicant for reinstatement shall comply with all ~~initial~~
44 licensing requirements prescribed by this chapter.

APPROVED BY THE GOVERNOR MARCH 29, 2017.

FILED IN THE OFFICE OF THE SECRETARY OF STATE MARCH 29, 2017.

Passed the House February 13, 2017

Passed the Senate March 27, 2017

by the following vote: 52 Ayes,

by the following vote: 20 Ayes,

7 Nays, 1 Not Voting

9 Nays, 1 Not Voting

[Signature]
Speaker of the House
 Pro Tempore

[Signature]
President of the Senate

[Signature]
Chief Clerk of the House

[Signature]
Secretary of the Senate

EXECUTIVE DEPARTMENT OF ARIZONA
OFFICE OF GOVERNOR

This Bill received by the Governor this

28 day of March, 2017

at 11:10 o'clock A. M.

[Signature]
Secretary to the Governor

Approved this 29 day of

March, 2017

at 2:38 o'clock P. M.

[Signature]
Governor of Arizona

EXECUTIVE DEPARTMENT OF ARIZONA
OFFICE OF SECRETARY OF STATE

This Bill received by the Secretary of State

this 29 day of March, 2017

at 4:59 o'clock P. M.

[Signature]
Secretary of State

H.B. 2195