



# Arizona Administrative REGISTER

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~ Administrative Register Contents ~

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**Information** ..... 2156  
**Rulemaking Guide** ..... 2157

**RULES AND RULEMAKING**

**Proposed Rulemaking, Notices of**

9 A.A.C. 13 Department of Health Services - Health Programs Services ..... 2159  
13 A.A.C. 1 Department of Public Safety - Criminal Identification Section. .... 2166  
20 A.A.C. 6 Department of Insurance ..... 2168

**OTHER AGENCY NOTICES**

**Docket Opening, Notices of Rulemaking**

20 A.A.C. 6 Department of Insurance ..... 2171

**Ombudsman, Notices of Agency**

Department of Public Safety. .... 2172

**GOVERNOR'S OFFICE**

**Governor's Executive Orders**

E.O. 2017-02: Internal Review of Administrative Rules; Moratorium to Promote Job Creation  
and Customer-Service-Oriented Agencies. .... 2173

**Governor's Proclamations**

Child Care Provider Appreciation Day ..... 2175  
Congenital Disorders of Glycosylation Awareness Day ..... 2175  
Cornelia De Lange Syndrome Awareness Day ..... 2176  
Cri Du Chat Syndrome Awareness Day ..... 2176  
Diffuse Intrinsic Pontine Glioma Awareness Day ..... 2177  
Emergency Medical Services Week/Emergency Medical Services for Children Day ..... 2177  
Experience Matters Community Engagement Month. .... 2178  
Food Allergy and Anaphylaxis Awareness Month ..... 2178  
Foster Care Awareness Month. .... 2179  
Gold Star Awareness Month ..... 2179

**INDEXES**

Register Index Ledger ..... 2181  
Rulemaking Action, Cumulative Index for 2017 ..... 2182  
Other Notices and Public Records, Cumulative Index for 2017 ..... 2191

**CALENDAR/DEADLINES**

Rules Effective Dates Calendar ..... 2193  
Register Publishing Deadlines ..... 2195

**GOVERNOR'S REGULATORY REVIEW COUNCIL**

Governor's Regulatory Review Council Deadlines. .... 2196

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# From the Publisher

## ABOUT THIS PUBLICATION

The paper copy of the *Administrative Register* (A.A.R.) is the official publication for rules and rulemaking activity in the state of Arizona.

Rulemaking is defined in Arizona Revised Statutes known as the Arizona Administrative Procedure Act (APA), A.R.S. Title 41, Chapter 6, Articles 1 through 10.

The Office of the Secretary of State does not interpret or enforce rules published in the *Arizona Administrative Register* or *Code*. Questions should be directed to the state agency responsible for the promulgation of the rule as provided in its published filing.

The *Register* is cited by volume and page number. Volumes are published by calendar year with issues published weekly. Page numbering continues in each weekly issue.

In addition, the *Register* contains the full text of the Governor's Executive Orders and Proclamations of general applicability, summaries of Attorney General opinions, notices of rules terminated by the agency, and the Governor's appointments of state officials and members of state boards and commissions.

## ABOUT RULES

Rules can be: made (all new text); amended (rules on file, changing text); repealed (removing text); or renumbered (moving rules to a different Section number). Rules activity published in the *Register* includes: proposed, final, emergency, expedited, and exempt rules as defined in the APA.

Rulemakings initiated under the APA as effective on and after January 1, 1995, include the full text of the rule in the *Register*. New rules in this publication (whether proposed or made) are denoted with underlining; repealed text is stricken.

## WHERE IS A "CLEAN" COPY OF THE FINAL OR EXEMPT RULE PUBLISHED IN THE REGISTER?

The *Arizona Administrative Code* (A.A.C.) contains the codified text of rules. The A.A.C. contains rules promulgated and filed by state agencies that have been approved by the Attorney General or the Governor's Regulatory Review Council. The *Code* also contains rules exempt from the rulemaking process.

The printed *Code* is the official publication of a rule in the A.A.C., and is prima facie evidence of the making, amendment, or repeal of that rule as provided by A.R.S. § 41-1012. Paper copies of rules are available by full Chapter or by subscription. The *Code* is posted online for free.

## LEGAL CITATIONS AND FILING NUMBERS

On the cover: Each agency is assigned a Chapter in the *Arizona Administrative Code* under a specific Title. Titles represent broad subject areas. The Title number is listed first; with the acronym A.A.C., which stands for the *Arizona Administrative Code*; following the Chapter number and Agency name, then program name. For example, the Secretary of State has rules on rulemaking in Title 1, Chapter 1 of the *Arizona Administrative Code*. The citation for this chapter is 1 A.A.C. 1, Secretary of State, Rules and Rulemaking

Every document filed in the office is assigned a file number. This number, enclosed in brackets, is located at the top right of the published documents in the *Register*. The original filed document is available for 10 cents a copy.

# Arizona Administrative REGISTER

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**ADMINISTRATIVE REGISTER**  
This publication is available online for free at [www.azsos.gov](http://www.azsos.gov).

**ADMINISTRATIVE CODE**  
A price list for the *Arizona Administrative Code* is available online. You may also request a paper price list by mail. To purchase a paper Chapter, contact us at (602) 364-3223.

**PUBLICATION DEADLINES**  
Publication dates are published in the back of the *Register*. These dates include file submittal dates with a three-week turnaround from filing to published document.

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# Participate in the Process

## Look for the Agency Notice

Review (inspect) notices published in the *Arizona Administrative Register*. Many agencies maintain stakeholder lists and would be glad to inform you when they proposed changes to rules. Check an agency's website and its newsletters for news about notices and meetings.

Feel like a change should be made to a rule and an agency has not proposed changes? You can petition an agency to make, amend, or repeal a rule. The agency must respond to the petition. (See A.R.S. § 41-1033)

## Attend a public hearing/meeting

Attend a public meeting that is being conducted by the agency on a Notice of Proposed Rulemaking. Public meetings may be listed in the Preamble of a Notice of Proposed Rulemaking or they may be published separately in the *Register*. Be prepared to speak, attend the meeting, and make an oral comment.

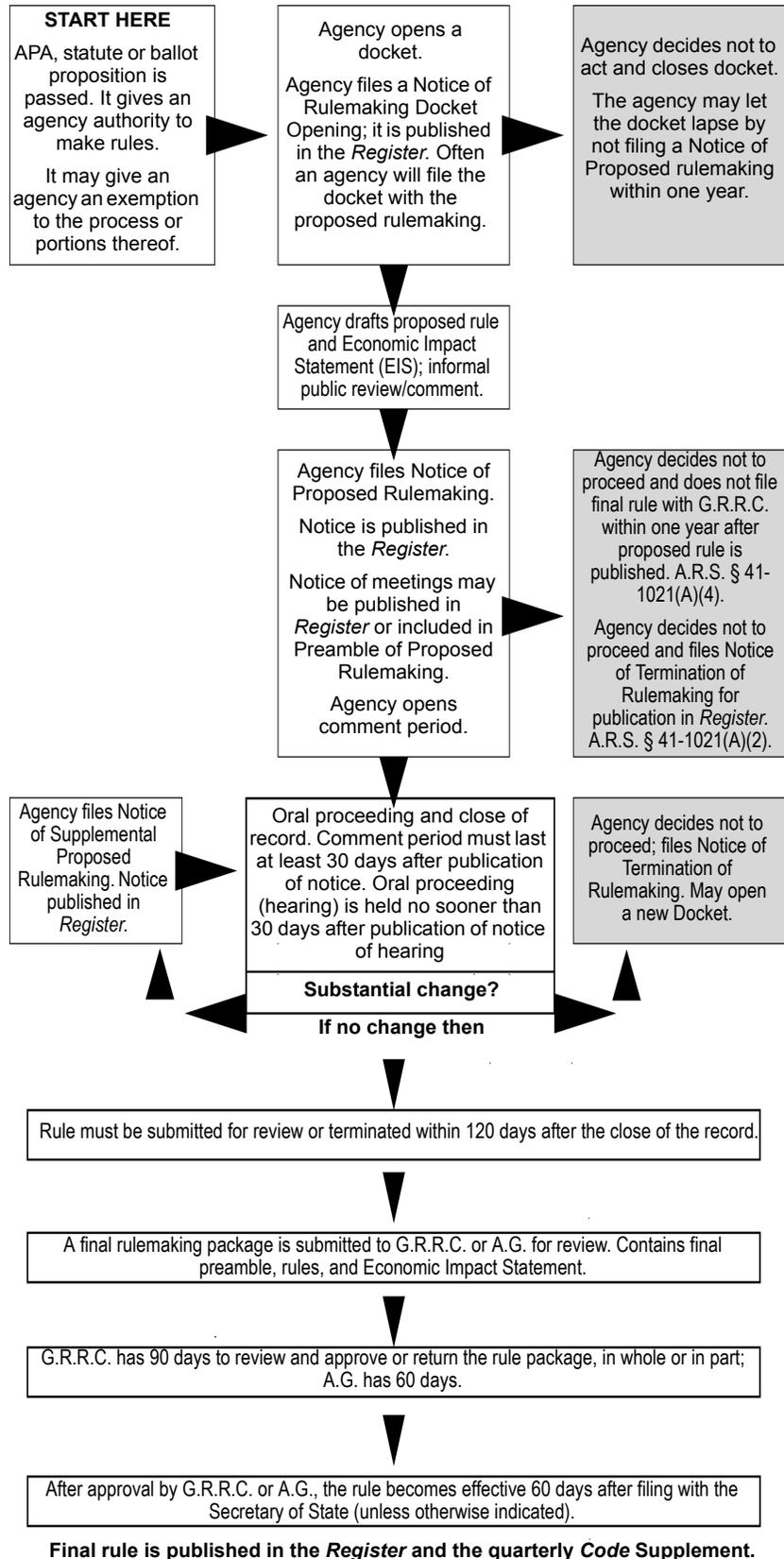
An agency may not have a public meeting scheduled on the Notice of Proposed Rulemaking. If not, you may request that the agency schedule a proceeding. This request must be put in writing within 30 days after the published Notice of Proposed Rulemaking.

## Write the agency

Put your comments in writing to the agency. In order for the agency to consider your comments, the agency must receive them by the close of record. The comment must be received within the 30-day comment timeframe following the *Register* publication of the Notice of Proposed Rulemaking.

You can also submit to the Governor's Regulatory Review Council written comments that are relevant to the Council's power to review a given rule (A.R.S. § 41-1052). The Council reviews the rule at the end of the rulemaking process and before the rules are filed with the Secretary of State.

# Arizona Regular Rulemaking Process



## Definitions

**Arizona Administrative Code (A.A.C.):** Official rules codified and published by the Secretary of State's Office. Available online at [www.azsos.gov](http://www.azsos.gov).

**Arizona Administrative Register (A.A.R.):** The official publication that includes filed documents pertaining to Arizona rulemaking. Available online at [www.azsos.gov](http://www.azsos.gov).

**Administrative Procedure Act (APA):** A.R.S. Title 41, Chapter 6, Articles 1 through 10. Available online at [www.azleg.gov](http://www.azleg.gov).

**Arizona Revised Statutes (A.R.S.):** The statutes are made by the Arizona State Legislature during a legislative session. They are compiled by Legislative Council, with the official publication codified by Thomson West. Citations to statutes include Titles which represent broad subject areas. The Title number is followed by the Section number. For example, A.R.S. § 41-1001 is the definitions Section of Title 41 of the Arizona Administrative Procedures Act. The "§" symbol simply means "section." Available online at [www.azleg.gov](http://www.azleg.gov).

**Chapter:** A division in the codification of the *Code* designating a state agency or, for a large agency, a major program.

**Close of Record:** The close of the public record for a proposed rulemaking is the date an agency chooses as the last date it will accept public comments, either written or oral.

**Code of Federal Regulations (CFR):** The *Code of Federal Regulations* is a codification of the general and permanent rules published in the *Federal Register* by the executive departments and agencies of the federal government.

**Docket:** A public file for each rulemaking containing materials related to the proceedings of that rulemaking. The docket file is established and maintained by an agency from the time it begins to consider making a rule until the rulemaking is finished. The agency provides public notice of the docket by filing a Notice of Rulemaking Docket Opening with the Office for publication in the *Register*.

**Economic, Small Business, and Consumer Impact Statement (EIS):** The EIS identifies the impact of the rule on private and public employment, on small businesses, and on consumers. It includes an analysis of the probable costs and benefits of the rule. An agency includes a brief summary of the EIS in its preamble. The EIS is not published in the *Register* but is available from the agency promulgating the rule. The EIS is also filed with the rulemaking package.

**Governor's Regulatory Review (G.R.R.C.):** Reviews and approves rules to ensure that they are necessary and to avoid unnecessary duplication and adverse impact on the public. G.R.R.C. also assesses whether the rules are clear, concise, understandable, legal, consistent with legislative intent, and whether the benefits of a rule outweigh the cost.

**Incorporated by Reference:** An agency may incorporate by reference standards or other publications. These standards are available from the state agency with references on where to order the standard or review it online.

**Federal Register (FR):** The *Federal Register* is a legal newspaper published every business day by the National Archives and Records Administration (NARA). It contains federal agency regulations; proposed rules and notices; and executive orders, proclamations, and other presidential documents.

**Session Laws or "Laws":** When an agency references a law that has not yet been codified into the Arizona Revised Statutes, use the word "Laws" is followed by the year the law was passed by the Legislature, followed by the Chapter number using the abbreviation "Ch.," and the specific Section number using the Section symbol (§). For example, Laws 1995, Ch. 6, § 2. Session laws are available at [www.azleg.gov](http://www.azleg.gov).

**United States Code (U.S.C.):** The Code is a consolidation and codification by subject matter of the general and permanent laws of the United States. The Code does not include regulations issued by executive branch agencies, decisions of the federal courts, treaties, or laws enacted by state or local governments.

## Acronyms

A.A.C. – *Arizona Administrative Code*

A.A.R. – *Arizona Administrative Register*

APA – *Administrative Procedure Act*

A.R.S. – *Arizona Revised Statutes*

CFR – *Code of Federal Regulations*

EIS – *Economic, Small Business, and Consumer Impact Statement*

FR – *Federal Register*

G.R.R.C. – *Governor's Regulatory Review Council*

U.S.C. – *United States Code*

## About Preambles

The Preamble is the part of a rulemaking package that contains information about the rulemaking and provides agency justification and regulatory intent.

It includes reference to the specific statutes authorizing the agency to make the rule, an explanation of the rule, reasons for proposing the rule, and the preliminary Economic Impact Statement.

The information in the Preamble differs between rulemaking notices used and the stage of the rulemaking.



**NOTICES OF PROPOSED RULEMAKING**

This section of the *Arizona Administrative Register* contains Notices of Proposed Rulemakings.

A proposed rulemaking is filed by an agency upon completion and submittal of a Notice of Rulemaking Docket Opening. Often these two documents are filed at the same time and published in the same *Register* issue.

When an agency files a Notice of Proposed Rulemaking under the Administrative Procedure Act (APA), the notice is published in the *Register* within three weeks of filing. See the publication schedule in the back of each issue of the *Register* for more information.

Under the APA, an agency must allow at least 30 days to elapse after the publication of the Notice of Proposed Rulemaking in the *Register* before beginning any proceedings for making, amending, or repealing any rule (A.R.S. §§ 41-1013 and 41-1022).

The Office of the Secretary of State is the filing office and publisher of these rules. Questions about the interpretation of the proposed rules should be addressed to the agency that promulgated the rules. Refer to item #4 below to contact the person charged with the rulemaking and item #10 for the close of record and information related to public hearings and oral comments.

**NOTICE OF PROPOSED RULEMAKING  
TITLE 9. HEALTH SERVICES  
CHAPTER 13. DEPARTMENT OF HEALTH SERVICES  
HEALTH PROGRAMS SERVICES**

[R17-138]

**PREAMBLE**

- |   |                                 |
|---|---------------------------------|
| <b>1. <u>Article, Part, or Section Affected (as applicable)</u></b> | <b><u>Rulemaking Action</u></b> |
| R9-13-201   | Amend                           |
| R9-13-203   | Amend                           |
| R9-13-208   | Amend                           |
- 2. Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):**  
 Authorizing statutes: A.R.S. §§ 36-132(A), 36-136(A)(7), and 36-136(F)  
 Implementing statutes: A.R.S. § 36-694, as amended by Laws 2017, Ch. 339
- 3. Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the proposed rule:**  
 Notice of Rulemaking Docket Opening: 23 A.A.R. 1810, July 7, 2017
- 4. The agency's contact person who can answer questions about the rulemaking:**
- |            |   |
|------------|---|
| Name:      | Sonal Bhakta, Office Chief  |
| Address:   | Arizona Department of Health Services<br>Office of Newborn Screening<br>250 N. 17th Ave.<br>Phoenix, AZ 85007                           |
| Telephone: | (602) 364-1409  |
| Fax:       | (602) 364-1495  |
| E-mail:    | Sonal.Bhakta@azdhs.gov  |
|            | or  |
| Name:      | Robert Lane, Chief  |
| Address:   | Arizona Department of Health Services<br>Office of Administrative Counsel and Rules<br>150 N. 18th Ave., Suite 200<br>Phoenix, AZ 85007 |
| Telephone: | (602) 542-1020  |
| Fax:       | (602) 364-1150  |
| E-mail:    | Robert.Lane@azdhs.gov   |
- 5. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**  
 Arizona Revised Statutes (A.R.S.) § 36-694 contains requirements for ordering tests for certain congenital disorders and for reporting congenital disorder test results and hearing test results to the Arizona Department of Health Services (Department), and establishes a newborn screening program, a central database for information about newborns and infants who are tested for hearing loss or congenital disorders, an educational program and follow-up services, and a newborn screening program committee. Current rules in Arizona Administrative Code (A.A.C.) Title 9, Chapter 13, Article 2, specify the congenital disorders being tested for, the



information required to be submitted when critical congenital heart defect screening is performed or a bloodspot specimen is collected from a newborn or infant, the person responsible for collecting the specimen and when the specimen should be collected, reporting requirements for a bloodspot test, reporting requirements for hearing tests, and fees.

As part of a 2015 exempt rulemaking, the Department included in the rules in 9 A.A.C. 13, Article 2, notice that the Department may include screening for severe combined immunodeficiency (SCID) as part of a newborn bloodspot test when the Department has funding available to cover the Department’s costs for activities related to screening for SCID. SCID is the most serious of a group of genetic disorders known as “Primary Immunodeficiency.” Babies born with SCID fail to develop a functioning immune system, leaving them with no defense against the multitude of disease-causing germs an individual encounters every day. Although these babies appear healthy at birth, they cannot fight off infections, are repeatedly hospitalized for these life-threatening infections, and may die before their first birthday if undiagnosed and untreated. With newborn screening, SCID can be identified, and a baby diagnosed and potentially cured. Currently, 44 states include SCID in their newborn screening panel for all newborns, one state offers screening for SCID to select populations, two states anticipate including SCID in their newborn screening panels later this year, and three do not offer screening for SCID.

Laws 2017, Ch. 339 increased the fee cap for the first newborn screening test from \$30 to \$36, which will enable the Department, through rulemaking, to raise the fee for a first specimen to allow for SCID testing as part of newborn screening. After obtaining an exception from the rulemaking moratorium established by Executive Order 2017-02, the Department is amending the rules in 9 A.A.C. 13, Article 2 to add SCID to the newborn screening panel of conditions and raise the fee for a first specimen from \$30 to \$36. Through this rulemaking, newborns will be screened for SCID, enabling babies with SCID to be diagnosed and cured. The proposed amendments conform to rulemaking format and style requirements of the Governor’s Regulatory Review Council and the Office of the Secretary of State.

**6. A reference to any study relevant to the rule that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

The Department did not review or rely on any study for this rulemaking.

**7. A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:**

Not applicable

**8. The preliminary summary of the economic, small business, and consumer impact:**

Annual cost/revenue changes are designated as minimal when \$1,500 or less, moderate when between \$1,500 and \$15,000, and substantial when \$15,000 or greater in additional costs or revenues. A cost is listed as significant when meaningful or important, but not readily subject to quantification. The Department anticipates that persons affected by the rulemaking include the Department; health insurance providers, including AHCCCS; hospitals; midwives; and the general public.

The Department will receive a substantial benefit from the fee increase for a first specimen. During CY 2016, the Department collected approximately \$6,516,360 in fees, which were deposited into the newborn screening fund established by A.R.S. § 36-694.01, with approximately \$2,393,650 collected for first specimens. In FY 2016, the Department received an appropriation of approximately \$6,738,300 from the newborn screening fund to support the Newborn and Infant Screening Program. To adequately provide bloodspot testing for SCID and follow-up for newborns and infants who had an abnormal screening test result for SCID, the Department requires approximately an additional \$767,000 and received an additional appropriation of \$513,000 for FY 2018. If the Department receives approximately 83,000 first specimens annually, the Department anticipates that the fee increase for first specimens will provide approximately \$498,000 more in revenue. The Department expects to cover the shortfall through a combination of appropriation increase requests, indirect waivers, and/or cuts to other areas of the Newborn and Infant Screening Program operating budget. The Department expects to add two employees as a result of this rulemaking. The addition of these employees does not require an increase in the Department’s allocated FTEs.

AHCCCS is expected to incur as much as a substantial cost increase due to the fee increase for first specimens. According to CY 2016 birth data from the Department’s Health Status and Vital Statistics group, AHCCCS covered approximately 51.64% of births. The cost for a first specimen is built into the birth-package fee that AHCCCS negotiates with hospitals. An increase in the fee for a first specimen may cause hospitals to negotiate a higher birth-package fee from AHCCCS. If AHCCCS increases the cost of every birth package to account for the fee increase, the Department would expect AHCCCS to incur approximately between \$257,000 and \$330,000 in additional costs annually. The Department expects this cost to be offset by savings experienced by detecting the disease at birth, which can save nearly \$2 million in treatment costs for each case.

Third-party payors, including private insurance plans, military health care facilities, Indian Health Service, and tribal health care facilities, paid for approximately 41.71% of births in Arizona in CY 2016, based on data from the Department’s Health Status and Vital Statistics group. Third-party payors as a whole may incur a substantial cost increase due to the fee increase for first specimens if hospitals negotiate a higher birth-package fee from a third-party payor. The cost incurred by a specific third-party payor would vary depending on the number of covered births and could range from minimal to substantial. The Department expects this cost to be offset by the savings of nearly \$2 million in treatment costs for each case due to detecting the disease at birth.

In FY 2017, approximately 82,447 first specimens were submitted by hospitals and birthing centers, which were billed the fee in R9-13-208 for a first specimen. The Department anticipates that a hospital or birthing center may incur minimal-to-substantial costs due to the fee increase for a first specimen, depending on the number of first specimens submitted and whether the increased cost for a first specimen is offset by a corresponding increase in the birth-package fee.

Midwives as a whole submit less than 300 first specimens per year. The additional costs incurred by a midwife for submitting a first specimen will vary with the number of the first specimens submitted by the midwife, and may range from none-to-minimal, most of which may be reimbursed by parents.



Parents paid for about 6.65% of births (percentage of self-paid births plus births for which the payor was unknown) in Arizona in CY 2016, according to data from the Department's Health Status and Vital Statistics group. The cost to an individual parent for increased fees for first specimens is expected to be minimal. The Department anticipates that a parent of a baby with a third-party payor may incur none-to-minimal costs associated with an increase in insurance premiums if the third-party payor passes costs associated with the fee increase on to policyholders. The testing and follow-up activities for SCID are expected to provide a significant benefit to the parent of a baby tested through newborn screening.

Society in general is expected to receive a significant benefit from having a baby grow up to be a healthy and productive member of society because of timely identification and treatment of SCID.

**9. The agency's contact person who can answer questions about the economic, small business, and consumer impact statement:**

Name: Sonal Bhakta, Office Chief  
 Address: Department of Health Services  
 Office of Newborn Screening  
 250 N. 17th Ave.  
 Phoenix, AZ 85007  
 Telephone: (602) 364-1409  
 Fax: (602) 364-1495  
 E-mail: Sonal.Bhakta@azdhs.gov  
 or  
 Name: Robert Lane, Chief  
 Address: Department of Health Services  
 Office of Administrative Counsel and Rules  
 150 N. 18th Ave., Suite 200  
 Phoenix, AZ 85007  
 Telephone: (602) 542-1020  
 Fax: (602) 364-1150  
 E-mail: Robert.Lane@azdhs.gov

**10. The time, place, and nature of the proceedings to make, amend, repeal, or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rule:**

The Department has scheduled the following oral proceeding:

Date and time: Thursday, September 14, 2017, 1:00 p.m.  
 Location: 250 N. 17th Ave., First Floor Conference Room  
 Phoenix, AZ 85007

Close of record: Thursday, September 14, 2017, 4:00 p.m.

A person may submit written comments on the proposed rules no later than the close of record to either of the individuals listed in items 4 and 9.

A person with a disability may request a reasonable accommodation, such as a sign language interpreter, by contacting Robert Lane at Robert.Lane@azdhs.gov or (602) 542-1020. Requests should be made as early as possible to allow time to arrange the accommodation.

**11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. §§ 41-1052 and 41-1055 shall respond to the following questions:**

**a. Whether the rule requires a permit, whether a general permit is used and if not, the reasons why a general permit is not used:**

The rule does not require a permit.

**b. Whether a federal law is applicable to the subject of the rule, whether the rule is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of federal law:**

Not applicable

**c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:**

No business competitiveness analysis was received by the Department.

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

Not applicable

**13. The full text of the rules follows:**

TITLE 9. HEALTH SERVICES  
 CHAPTER 13. DEPARTMENT OF HEALTH SERVICES  
 HEALTH PROGRAMS SERVICES



ARTICLE 2. NEWBORN AND INFANT SCREENING

Section	
R9-13-201.	Definitions
R9-13-203.	Newborn and Infant Bloodspot Tests
R9-13-208.	Fees

ARTICLE 2. NEWBORN AND INFANT SCREENING

R9-13-201. Definitions

In this Article, unless otherwise specified:

1. "Abnormal result" means an outcome that deviates from the range of values established by:
  - a. The Department for an analysis performed as part of a bloodspot test; or for a hearing test, or
  - b. A health care facility or health care provider for critical congenital heart defect screening.
2. "Admission" or "admitted" means the same as in A.A.C. R9-10-101.
3. "AHCCCS" means the Arizona Health Care Cost Containment System.
4. "Argininosuccinic acidemia" means a congenital disorder characterized by an inability to metabolize the amino acid argininosuccinic acid due to defective argininosuccinate lyase activity.
5. "Arizona State Laboratory" means the entity operated according to A.R.S. § 36-251.
6. "Audiological equipment" means an instrument used to help determine the presence, type, or degree of hearing loss by:
  - a. Providing ear-specific and frequency-specific stimuli to an individual; or
  - b. Measuring an individual's physiological response to stimuli.
7. "Audiologist" means the same as in A.R.S. § 36-1901.
8. "Beta-ketothiolase deficiency" means a congenital disorder characterized by an inability to metabolize 2-methyl-acetoacetyl-CoA due to defective mitochondrial acetoacetyl-CoA thiolase activity.
9. "Biotinidase deficiency" means a congenital disorder characterized by defective biotinidase activity that causes abnormal biotin metabolism.
10. "Birth center" means a health care facility that is not a hospital and is organized for the sole purpose of delivering newborns.
11. "Blood sample" means capillary or venous blood, but not cord blood, applied to the filter paper of a specimen collection kit.
12. "Bloodspot test" means multiple laboratory analyses performed on a blood sample to screen for the presence of congenital disorders listed in R9-13-203.
13. "Carnitine uptake defect" means a congenital disorder characterized by a decrease in the amount of free carnitine due to defective sodium ion-dependent carnitine transporter OCTN2 activity.
14. "Citrullinemia" means a congenital disorder characterized by an inability to convert the amino acid citrulline and aspartic acid into argininosuccinic acid due to defective argininosuccinate synthetase activity.
15. "Classic galactosemia" means a congenital disorder characterized by abnormal galactose metabolism due to defective galactose-1-phosphate uridylyltransferase activity.
16. "Congenital adrenal hyperplasia" means a congenital disorder characterized by decreased cortisol production and increased androgen production due to defective 21-hydroxylase activity.
17. "Congenital disorder" means an abnormal condition present at birth, as a result of heredity or environmental factors, that impairs normal physiological functioning of a human body.
18. "Congenital hypothyroidism" means a congenital disorder characterized by deficient thyroid hormone production.
19. "Critical congenital heart defect" means a heart abnormality or condition present at birth that places a newborn or infant at significant risk of disability or death if not diagnosed soon after birth.
20. "Cystic fibrosis" means a congenital disorder caused by defective functioning of a transmembrane regulator protein and characterized by damage to and dysfunction of various organs, such as the lungs, pancreas, and reproductive organs.
21. "Department" means the Arizona Department of Health Services.
22. "Diagnostic evaluation" means a hearing test performed by an audiologist or a physician to determine whether hearing loss exists, and, if applicable, determine the type or degree of hearing loss.
23. "Discharge" means the termination of inpatient services to a newborn or an infant.
24. "Disorder" means a disease or medical condition that may be identified by a laboratory analysis.
25. "Document" means to establish and maintain information in written, photographic, electronic, or other permanent form.
26. "Educational materials" means printed or electronic information provided by the Department, explaining newborn and infant screening, any of the congenital disorders listed in R9-13-203, hearing loss, or critical congenital heart defect.
27. "Electronic" means the same as in A.R.S. § 44-7002.
28. "First specimen" means the initial specimen that is collected from a newborn who is less than five days of age and sent to the Arizona State Laboratory for testing and recording of demographic information.



29. “Glutaric acidemia type I” means a congenital disorder characterized by an accumulation of glutaric acid due to defective glutaryl-CoA dehydrogenase activity.
30. “Guardian” means an individual appointed by a court under A.R.S. Title 14, Chapter 5, Article 2.
31. “Health care facility” means a health care institution defined in A.R.S. § 36-401 where obstetrical care or newborn care is provided.
32. “Health care provider” means a physician, physician assistant, registered nurse practitioner, or midwife.
33. “Health-related services” means the same as in A.R.S. § 36-401.
34. “Hearing screening” means a hearing test to determine the likelihood of hearing loss in a newborn or infant.
35. “Hearing test” means an evaluation of each of a newborn’s or an infant’s ears, using audiological equipment to:
  - a. Screen the newborn or infant for a possible hearing loss;
  - b. Determine that the newborn or infant does not have a hearing loss; or
  - c. Diagnose a hearing loss in the newborn or infant, including, if applicable, determining the type or degree of hearing loss.
36. “Hemoglobin S/Beta-thalassemia” means a sickle cell disease in which an individual has one sickle cell gene and one gene for beta thalassemia, another inherited hemoglobinopathy.
37. “Hemoglobin S/C disease” means a sickle cell disease in which an individual has one sickle cell gene and one gene for another inherited hemoglobinopathy called hemoglobin C.
38. “Hemoglobinopathy” means a congenital disorder characterized by abnormal production, structure, or functioning of hemoglobin.
39. “Home birth” means delivery of a newborn, outside a health care facility, when the newborn is not hospitalized within 72 hours of delivery.
40. “Homocystinuria” means a congenital disorder characterized by abnormal methionine and homocysteine metabolism due to defective cystathione-β-synthase activity.
41. “Hospital” means the same as in A.A.C. R9-10-101.
42. “Hospital services” means the same as in A.A.C. R9-10-201.
43. “3-Hydroxy-3-methylglutaric aciduria” means a congenital disorder characterized by the accumulation of 3-hydroxy-3-methylglutaric acid due to a defective 3-hydroxy-3-methylglutaryl-CoA lyase activity.
44. “Identification code” means a unique set of numbers or letters, or a unique set of both numbers and letters, assigned by the Department to a health care facility, a health care provider, an audiologist, or another person submitting specimen collection kits to the Arizona State Laboratory or hearing test results to the Department.
45. “Infant” means the same as in A.R.S. § 36-694.
46. “Inpatient” means an individual who:
  - a. Is admitted to a hospital,
  - b. Receives hospital services for 24 consecutive hours, or
  - c. Is admitted to a birth center.
47. “Inpatient services” means medical services, nursing services, or other health-related services provided to an inpatient in a health care facility.
48. “Isovaleric acidemia” means a congenital disorder characterized by an accumulation of isovaleric acid due to defective isovaleryl-CoA dehydrogenase activity.
49. “Long-chain 3-hydroxy acyl-CoA dehydrogenase deficiency” means a congenital disorder characterized by an inability to metabolize fatty acids that are 12 to 16 carbon atoms in length due to defective long-chain 3-hydroxy acyl-CoA dehydrogenase activity.
50. “Maple syrup urine disease” means a congenital disorder of branched chain amino acid metabolism due to defective branched chain-keto acid dehydrogenase activity.
51. “Medical services” means the same as in A.R.S. § 36-401.
52. “Medium chain acyl-CoA dehydrogenase deficiency” means a congenital disorder characterized by an inability to metabolize fatty acids that are 6 to 10 carbon atoms in length due to defective medium-chain acyl-CoA dehydrogenase activity.
53. “3-Methylcrotonyl-CoA carboxylase deficiency” means a congenital disorder characterized by an accumulation of 3-methylcrotonyl-glycine due to defective 3-methylcrotonyl-CoA carboxylase activity.
54. “Methylmalonic acidemia (Cbl A,B)” means a congenital disorder characterized by an accumulation of methylmalonic acid due to defective activity of methylmalonyl-CoA racemase or adenosylcobalamin synthetase.
55. “Methylmalonic acidemia (mutase deficiency)” means a congenital disorder characterized by an accumulation of methylmalonic acid due to defective methylmalonyl-CoA mutase activity.
56. “Midwife” means an individual licensed under A.R.S. Title 36, Chapter 6, Article 7, or certified under A.R.S. Title 32, Chapter 15.
57. “Multiple carboxylase deficiency” means a congenital disorder characterized by an inability to transport or metabolize biotin that leads to defective activity of propionyl-CoA carboxylase, beta-methylcrotonyl-CoA carboxylase, and pyruvate carboxylase.



- 58. “Newborn” means the same as in A.R.S. § 36-694.
- 59. “Newborn care” means medical services, nursing services, and health-related services provided to a newborn.
- 60. “Nursing services” means the same as in A.R.S. § 36-401.
- 61. “Obstetrical care” means medical services, nursing services, and health-related services provided to a woman throughout her pregnancy, labor, delivery, and postpartum.
- 62. “Organ” means a somewhat independent part of a human body, such as a salivary gland, kidney, or pancreas, which performs a specific function.
- 63. “Parent” means a natural, adoptive, or custodial mother or father of a newborn or an infant.
- 64. “Parenteral nutrition” means the feeding of an individual intravenously through the administration of a formula containing glucose, amino acids, lipids, vitamins, and minerals.
- 65. “Person” means the state, a municipality, district, or other political subdivision, a cooperative, institution, corporation, company, firm, partnership, individual, or other legal entity.
- 66. “Phenylketonuria” means a congenital disorder characterized by abnormal phenylalanine metabolism due to defective phenylalanine hydroxylase activity.
- 67. “Physician” means an individual licensed under A.R.S. Title 32, Chapters 13, 14, 17, or 29.
- 68. “Physician assistant” means an individual licensed under A.R.S. Title 32, Chapter 25.
- 69. “Propionic acidemia” means a congenital disorder characterized by an accumulation of glycine and 3-hydroxypropionic acid due to defective propionyl-CoA carboxylase activity.
- 70. “Pulse oximetry” means a non-invasive method of measuring the percentage of hemoglobin in the blood that is saturated with oxygen using a device approved by the U.S. Food and Drug Administration for use with newborns or infants less than six weeks of age.
- 71. “Registered nurse practitioner” means the same as in A.R.S. § 32-1601.
- 72. “Second specimen” means a specimen that is sent to the Arizona State Laboratory for testing and recording of demographic information, after being collected:
  - a. From a newborn after a first specimen; or
  - b. From an individual at least five days and not older than one year of age, regardless of whether a first specimen was collected.
- 73. “Severe combined immunodeficiency” means a congenital disorder usually characterized by a defect in both the T- and B-lymphocyte systems, which typically results in the onset of one or more serious infections within the first few months of life.
- 74. “Sickle cell anemia” means a sickle cell disease in which an individual has two sickle cell genes.
- 75. “Sickle cell disease” means a hemoglobinopathy characterized by an abnormally shaped red blood cell resulting from the abnormal structure of the protein hemoglobin.
- 76. “Sickle cell gene” means a unit of inheritance that is involved in producing an abnormal type of the protein hemoglobin, in which the amino acid valine is substituted for the amino acid glutamic acid at a specific location in the hemoglobin.
- 77. “Specimen” means a blood sample obtained from and demographic information about a newborn or an infant.
- 78. “Specimen collection kit” means a strip of filter paper for collecting a blood sample attached to a form for obtaining the information specified in ~~R9-13-203(C)(3)~~ R9-13-203(B)(3) about a newborn or an infant.
- 79. “Transfer” means a health care facility or health care provider discharging a newborn and sending the newborn to a hospital for inpatient medical services without the intent that the patient will be returned to the sending health care facility or health care provider.
- 80. “Transfusion” means the infusion of blood or blood products into the body of an individual.
- 81. “Trifunctional protein deficiency” means a congenital disorder characterized by an inability to metabolize fatty acids that are 12 to 18 carbon atoms in length due to defective mitochondrial trifunctional protein activity.
- 82. “Tyrosinemia type I” means a congenital disorder characterized by an accumulation of the amino acid tyrosine due to defective fumarylacetoacetate hydrolase activity.
- 83. “Verify” means to confirm by obtaining information through a source such as the newborn screening program, a health care provider, a health care facility, or a documented record.
- 84. “Very long-chain acyl-CoA dehydrogenase deficiency” means a congenital disorder characterized by an inability to metabolize fatty acids that are 14 to 18 carbon atoms in length due to defective very long-chain acyl-CoA dehydrogenase activity.
- 85. “Working day” means 8:00 a.m. through 5:00 p.m. Monday through Friday, excluding state holidays.

**R9-13-203. Newborn and Infant Bloodspot Tests**

- A. A bloodspot test shall screen for the following congenital disorders:
  - 1. 3-Hydroxy-3-methylglutaric aciduria,
  - 2. 3-Methylcrotonyl-CoA carboxylase deficiency,
  - 3. Argininosuccinic acidemia,
  - 4. Beta-ketothiolase deficiency,



5. Biotinidase deficiency,
6. Carnitine uptake defect,
7. Citrullinemia,
8. Classic galactosemia,
9. Congenital adrenal hyperplasia,
10. Congenital hypothyroidism,
11. Cystic fibrosis,
12. Glutaric acidemia type I,
13. Hemoglobin S/Beta-thalassemia,
14. Hemoglobin S/C disease,
15. Homocystinuria,
16. Isovaleric acidemia,
17. Long-chain 3-hydroxy acyl-CoA dehydrogenase deficiency,
18. Maple syrup urine disease,
19. Medium chain acyl-CoA dehydrogenase deficiency,
20. Methylmalonic acidemia (Cbl A,B),
21. Methylmalonic acidemia (mutase deficiency),
22. Multiple carboxylase deficiency,
23. Phenylketonuria,
24. Propionic acidemia,
25. Severe combined immunodeficiency,
- ~~25-26.~~ Sickle cell anemia,
- ~~26-27.~~ Trifunctional protein deficiency,
- ~~27-28.~~ Tyrosinemia type I, and
- ~~28-29.~~ Very long-chain acyl-CoA dehydrogenase deficiency.

~~B.~~ In addition to the congenital disorders listed in subsection (A), a bloodspot test may screen for severe combined immunodeficiency when sufficient funding is available to the Department to cover the cost of the Department's activities related to the screening for severe combined immunodeficiency.

~~C.B.~~ When a bloodspot test is ordered for a newborn or an infant, a health care facility's designee, a health care provider, or the health care provider's designee shall:

1. Only use a specimen collection kit supplied by the Department;
2. Collect a blood sample from the newborn or infant on a specimen collection kit;
3. Complete the following information on the specimen collection kit:
  - a. The newborn's or infant's name, gender, race, ethnicity, medical record number, and, if applicable, AHCCCS identification number;
  - b. The newborn's or infant's type of food or food source;
  - c. Whether the newborn or infant is from a single or multiple birth;
  - d. If the newborn or infant is from a multiple birth, the birth order of the newborn or infant;
  - e. Whether the newborn or infant has a medical condition that may affect the bloodspot test results;
  - f. Whether the newborn or infant received a blood transfusion and, if applicable, the date of the last blood transfusion;
  - g. The date and time of birth, and the newborn's or infant's weight at birth;
  - h. The date and time of blood sample collection, and the newborn's or infant's weight when the blood sample is collected;
  - i. The identification code or the name and address of the health care facility or health care provider submitting the specimen collection kit;
  - j. The name, address, and telephone number or the identification code of the health care provider responsible for the management of medical services provided to the newborn or infant;
  - k. Except as provided in subsection ~~(C)(3)(4)~~ (B)(3)(1), the mother's first and last names, date of birth, name before first marriage, mailing address, telephone number, and if applicable, AHCCCS identification number; and
  - l. If the newborn's or infant's mother does not have physical custody of the newborn or infant, the first and last names, mailing address, and telephone number of the person who has physical custody of the newborn or infant; and
4. Submit the specimen collection kit to the Arizona State Laboratory no later than 24 hours or the next working day after the blood sample is collected.

~~D.C.~~ A health care facility or a health care provider submitting a first specimen to the Arizona State Laboratory shall pay the Department the fee in R9-13-208(A).

~~E.D.~~ A person who submits a second specimen to the Arizona State Laboratory shall:

1. Pay the fee in R9-13-208(B) to the Department, or
2. Provide the following information to the Arizona State Laboratory for billing purposes:
  - a. The name, mailing address, and telephone number of the newborn's or infant's parent or the individual responsible for paying, if not the parent; and



- b. If the individual responsible for paying has health care insurance for the newborn or infant, information about the health care insurance, including:
    - i. The policyholder's name;
    - ii. The name and billing address of the health care insurance company;
    - iii. The member identification number;
    - iv. The group number, if applicable; and
    - v. The effective date of the health care insurance; or
  - c. That the individual responsible for paying has no health care insurance for the newborn or infant.
- F.E.** When a health care insurance company or an individual responsible for paying is identified as specified in subsection ~~(E)(2)~~ **(D)(2)**, the health care insurance company or the individual responsible for paying shall pay the Department the fee in R9-13-208(B).
- G.F.** When a home birth not attended by a health care provider is reported to a local registrar, a deputy local registrar, or the state registrar under A.R.S. § 36-333:
- 1. The local registrar, deputy local registrar, or state registrar shall notify the local health department of the county where the birth occurred; and
  - 2. The local health department's designee shall collect a specimen from the newborn or infant according to the requirements in R9-13-204(A)(2) or R9-13-205(C).
- H.G.** A health care facility's designee, a health care provider, or the health care provider's designee shall ensure that:
- 1. Educational materials are provided to the parent or guardian of a newborn or an infant for whom a bloodspot test is ordered, and
  - 2. The newborn's or infant's parent or guardian is informed of the requirement for a second specimen if the second specimen has not been collected.
- I.H.** For a home birth, a health care provider or the health care provider's designee shall provide educational materials to the parent or guardian of a newborn or an infant for whom a bloodspot test is ordered.
- R9-13-208. Fees**
- A. The fee for a first specimen is ~~\$30.00~~ **\$36.00**.
  - B. The fee for a second specimen is \$65.00.

**NOTICE OF PROPOSED RULEMAKING**  
**TITLE 13. PUBLIC SAFETY**  
**CHAPTER 1. DEPARTMENT OF PUBLIC SAFETY**  
**CRIMINAL IDENTIFICATION SECTION**

[R17-139]

**PREAMBLE**

- |   |                                 |
|---|---------------------------------|
| <b><u>1. Article, Part, or Section Affected (as applicable)</u></b> | <b><u>Rulemaking Action</u></b> |
| R13-1-502   | Amend                           |
| R13-1-504   | Amend                           |
- 2. Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):**  
 Authorizing statute: A.R.S. § 41-1713(A)(4)  
 Implementing statute: A.R.S. § 41-1750(K)
- 3. Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the proposed rule:**  
 Notice of Rulemaking Docket Opening: 22 A.A.R. 2910, October 7, 2016
- 4. The agency's contact person who can answer questions about the rulemaking:**
- Name: Captain Daryll Willis  
 Address: Department of Public Safety  
 Mailing: POB 6638 Mail drop 1205  
 Phoenix, AZ 85005-6638  
 Telephone: (602) 223-2500  
 E-mail: dwillis@azdps.gov  
 Web site: www.azdps.gov
- 5. An agency's justification and reason why a rule should be made, amended, repealed, or renumbered, to include an explanation about the rulemaking:**  
 The Department is amending the rules to include modern electronic formats in addition to traditional paper and to provide less burdensome fee payment requirements by cash and methods; including electronic payment. Additionally, the Department has developed the least burdensome fee schedule possible to accurately reflect the current costs the Department incurs to provide public records in traditional paper and modern electronic formats. The option for payment by personal check was eliminated. This rulemaking establishes those fees and standards.  
 The Department was granted an exception to the rulemaking moratorium contained in Executive Orders 2016-03 and 2017-2 in an e-mail from Mr. Tim Roemer, Governor's Office, dated September 1, 2016 and March 27, 2017.



**6. A reference to any study relevant to the rule that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

The Department did not review a study relevant to the rules. This rulemaking does not rely on scientific principles or methods.

**7. A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:**

The rulemaking does not diminish a previous grant of authority to a political subdivision.

**8. The preliminary summary of the economic, small business, and consumer impact:**

The Department intends to amend R13-1-502 and R13-1-504 to allow for electronic delivery methods, establish fees for electronic delivery methods, and reduce some existing fees. Persons affected by the rule changes include, private citizens, insurance companies, third party resellers, attorneys, and media outlets. The Department will bring in less revenue as a result of lower fees, but the fees collected are still expected to support their units. The number of full-time employees in these units are not expected to change. Political subdivisions are not affected as governmental agencies are not charged for departmental reports. Currently, the department is aware of seven small business's buying Department accident reports and reselling them. These businesses would receive a benefit as they will have additional delivery methods available to them and a reduction of fees for reports larger than 9 pages.

**9. The agency's contact person who can answer questions about the economic, small business, and consumer impact statement:**

Name: Captain Daryll Willis  
 Address: Department of Public Safety  
 Mailing: POB 6638 Mail drop 1205  
 Phoenix, AZ 85005-6638  
 Telephone: (602) 223-2500  
 E-mail: dwillis@azdps.gov  
 Web site: www.azdps.gov

**10. The time, place, and nature of the proceedings to make, amend, repeal, or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rule:**

An oral proceeding regarding the proposed rule will be held as follows:

Date: Tuesday September 19, 2017  
 Time: 10:00 a.m.  
 Location: Arizona Peace Officer Standards and Training Board  
 2643 E. University Drive, Phoenix

The rulemaking record will close on: Wednesday September 20, 2017 at 5:00 p.m.

**11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. §§ 41-1052 and 41-1055 shall respond to the following questions:**

**a. Whether the rule requires a permit, whether a general permit is used and if not, the reasons why a general permit is not used:**

The rules do not require a permit.

**b. Whether a federal law is applicable to the subject of the rule, whether the rule is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of federal law:**

Federal law is not applicable to the subject of the rules.

**c. Whether a person submitted an analysis to the agency that compares the rule's impact on the competitiveness of business in this state to the impact on business in other states:**

No analysis was submitted.

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

None

**13. The full text of the rules follows:**

**TITLE 13. PUBLIC SAFETY  
 CHAPTER 1. DEPARTMENT OF PUBLIC SAFETY  
 CRIMINAL IDENTIFICATION SECTION**

**ARTICLE 5. DEPARTMENT RECORDS**

Section

R13-1-502. Charges for Copies of Traffic Accident Reports and Photographs  
 R13-1-504. Charges for Copies of Offense, Arrest, or Incident Reports and Other Types of Departmental Reports

**ARTICLE 5. DEPARTMENT RECORDS**

**R13-1-502. Charges for Copies of Traffic Accident Reports and Photographs**



- A. The charges for copies of traffic accident reports and photographs are:
    1. ~~For traffic accident reports, \$9.00 for nine pages or less and one dollar for each additional page over nine; Charges for a copy of a traffic accident report by method of delivery:~~
      - a. ~~Paper – \$9.00 for nine pages or less and \$0.10 for each additional page exceeding nine.~~
      - b. ~~Fax – \$9.00 up to 20 pages.~~
      - c. ~~Electronic mail – \$9.00 up to five megabytes.~~
      - d. ~~Compact disk – \$10.00 up to 700 megabytes. Additional reports may be delivered on a single compact disk for \$9.00 each.~~
    2. ~~\$4.00 per photograph; and Charges for a copy of a traffic accident photograph by method of delivery:~~
      - a. ~~Printed photograph – \$4.00 each.~~
      - b. ~~Photographic contact sheet – \$10.00 each.~~
      - c. ~~For all photographs associated by a single report delivered by compact disk or digital versatile disk – \$15.00 up to 4.7 gigabytes.~~
    3. ~~\$10.00 per photo contact sheet.~~
  - B. A person shall mail ~~fees payment~~ to the ~~Department~~ Department’s Records Unit, Mail Drop 3111, P.O. Box 6638, Phoenix, AZ 85005-6638 in the form of a cashier’s check, money order, or a business check payable to the Arizona Department of Public Safety. If paying in person at the Department’s Public Records Unit, 2222 West Encanto Boulevard, Phoenix, AZ 85009, the person shall pay with a cashier’s check, money order, business check, ~~exact change in cash, or personal check if accompanied by valid picture identification~~ or in cash. If paying through an electronic payment system, as instructed on the Department’s website [www.azdps.gov](http://www.azdps.gov), the person shall pay with electronic funds.
- R13-1-504. Charges for Copies of Offense, Arrest, or Incident Reports and Other Types of Departmental Reports**
- A. ~~Charges for copies of Offense, Arrest, or Incident reports are \$9.00 for nine pages or less and \$1.00 for each additional page over nine. The charges for a copy of an offense, arrest, incident, and other types of departmental reports by method of delivery are:~~
    1. ~~Paper – \$9.00 for nine pages or less and \$0.10 for each additional page exceeding nine.~~
    2. ~~Fax – \$9.00 up to 20 pages.~~
    3. ~~Electronic mail – \$9.00 up to five megabytes.~~
    4. ~~Compact disk – \$10.00 up to 700 megabytes. Additional reports may be delivered on a single compact disk for \$9.00 each.~~
    5. ~~Digital versatile disk – \$15.00 up to 4.7 gigabytes.~~
    6. ~~Flash drive – \$20.00 up to eight gigabytes.~~
    7. ~~External drive – \$100.00 up to one terabyte.~~
  - B. A person shall mail ~~charges payment~~ to the ~~Department~~ Department’s Public Records Unit, Mail Drop 3240, P.O. Box 6638, Phoenix, AZ 85005-6638 in the form of a cashier’s check, money order, or a business check payable to the Arizona Department of Public Safety. If paying in person at the Department’s Public Records Unit, 2222 West Encanto Boulevard, Phoenix, AZ 85009, the person shall pay with a cashier’s check, money order, business check, or ~~exact change~~ in cash. If paying through an electronic payment system as instructed on the Department’s website [www.azdps.gov](http://www.azdps.gov), the person shall pay with electronic funds.

**NOTICE OF PROPOSED RULEMAKING**  
**TITLE 20. COMMERCE, FINANCIAL INSTITUTIONS, AND INSURANCE**  
**CHAPTER 6. DEPARTMENT OF INSURANCE**

[R17-140]

**PREAMBLE**

1. **Article, Part, or Section Affected (as applicable)**                      **Rulemaking Action**  
     R20-6-1409    Amend
2. **Citations to the agency’s statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):**  
     Authorizing statute: A.R.S. § 20-143  
     Implementing statute: A.R.S. § 20-481.22
3. **Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the rule:**  
     Notice of Rulemaking Docket Opening: 23 A.A.R. 2171, August 11, 2017 (*in this issue*)
4. **The agency’s contact person who can answer questions about the rulemaking:**  
     Name:                      Mary E. Kosinski  
     Address:                    Department of Insurance  
    2910 N. 44th St., Suite 210  
    Phoenix, AZ 85018  
     Telephone:                (602) 364-3471  
     E-mail:                      mkosinski@azinsurance.gov
5. **An agency’s justification and reason why a rule should be made, amended, repealed, or renumbered to include an explanation about the rulemaking:**  
     In 2014, to retain accreditation with the National Association of Insurance Commissioners (NAIC), the Arizona Legislature passed amendments to Arizona’s insurance holding company statutes, Arizona Revised Statutes (“A.R.S.”) §§ 20-481 through 20-481.32 (Laws 2014, Ch. 104, §§ 1-20). By session law, the legislature exempted the Arizona Department of Insurance (“Department”)



from Title 41, Chapter 6 for two years or until April 22, 2016.

A.R.S. § 20-481.19(C) reads in pertinent part: “For the purposes of this section, “extraordinary dividend or distribution” includes any dividend or distribution of cash or other property whose fair market value together with that of other dividends or distributions made within the preceding twelve months exceeds the lesser of . . . net income, if such insurer is not a life insurer, for the twelve month period ending December 31 next preceding . . .” (Emphasis added.)

In 2015, the Department published a Final Exempt Rulemaking (21 A.A.R. 54, January 9, 2015). Section R20-6-1409, which was renumbered from R20-6-1408, is the correlate rule to A.R.S. § 20-481.19. Unfortunately, the Department erred during the rulemaking process and failed to make one necessary change to R20-6-1409 to remove the word “investment” which had been a part of R20-6-1408. After publication, the NAIC brought to the Department’s attention that R20-6-1409(A)(4)(d) retained the phrase “net investment income” which does not comport with A.R.S. § 20-481.19 which uses “net income.” The current wording of R20-6-1409(A)(4)(d) places a financial limitation on certain insurers seeking to make a dividend or distribution. The Department seeks to amend the rule in order to be consistent with A.R.S. § 20-481.19(C), to be consistent with the NAIC Model Regulation, and to not burden insurers with this limitation.

**6. A reference to any study relevant to the rule that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

Not applicable

**7. A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:**

The rule will not diminish a previous grant of authority of a political subdivision of this state.

**8. The preliminary summary of the economic, small business, and consumer impact:**

No impact is anticipated on either insurers or consumers.

**9. The agency’s contact person who can answer questions about the economic, small business, and consumer impact statement:**

Name: Mary E. Kosinski  
 Address: Department of Insurance  
 2910 N. 44th St., Suite 210  
 Phoenix, AZ 85018  
 Telephone: (602) 364-3471  
 E-mail: mkosinski@azinsurance.gov

**10. The time, place, and nature of the proceedings to make, amend, repeal, or renumber the rule or, in no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rule:**

Due to the limited nature of the amendments being proposed, the Department has no plans to hold a hearing on the proposed rulemaking at this time. However, the Department will schedule an oral proceeding on the proposed rule if, within 30 days after the published notice, a written request for an oral proceeding is submitted to the contact person listed in paragraph 4 of this Notice.

**11. All agencies shall list other matters prescribed by statute that are applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. §§ 41-1052 and 41-1055 shall respond to the following questions:**

**a. Whether the rule requires a permit, whether a general permit is used and if not, the reasons why a general permit is not used:**

No permit is required.

**b. Whether a federal law is applicable to the subject of the rule, whether the rule is more stringent than the federal law and if so, citation to the statutory authority to exceed the requirements of federal law:**

No federal law is applicable.

**c. Whether a person submitted an analysis to the agency that compares the rule’s impact of the competitiveness of business in this state to the impact on business in other states:**

No person submitted an analysis.

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

Not applicable

**13. The full text of the rule follows:**

**TITLE 20. COMMERCE, FINANCIAL INSTITUTIONS AND INSURANCE**

**CHAPTER 6. DEPARTMENT OF INSURANCE**

**ARTICLE 14. INSURANCE HOLDING COMPANY**

Section  
 R20-6-1409. Extraordinary Dividends and Other Distributions

**ARTICLE 14. INSURANCE HOLDING COMPANY**

**R20-6-1409. Extraordinary Dividends and Other Distributions**



- A. Requests for approval of extraordinary dividends or any other extraordinary distribution to shareholders shall include the following:
  - 1. The amount of the proposed dividend;
  - 2. The date established for payment of the dividend;
  - 3. A statement as to whether the dividend is to be in cash or other property and, if in property, a description thereof, its cost, and its fair market value together with an explanation of the basis for valuation;
  - 4. A copy of the calculations determining that the proposed dividend is extraordinary. The work paper shall include the following information:
    - a. The amounts, dates and form of payment of all dividends or distributions, including regular dividends but excluding distributions of the insurer's own securities, paid within the period of 12 consecutive months ending on the date fixed for payment of the proposed dividend for which approval is sought and commencing on the day after the same day of the same month in the last preceding year;
    - b. Surplus as regards policyholders, total capital and surplus, as of the 31st day of December next preceding;
    - c. If the insurer is a life insurer, the net gain from operations for the 12-month period ending the 31st day of December next preceding;
    - d. If the insurer is not a life insurer, the net investment-income, net realized capital gains for the 12-month period ending the 31st day of December next preceding and the two preceding 12-months periods; and
    - e. If the insurer is not a life insurer, the dividends paid to stockholders excluding distributions of the insurer's own securities in the preceding two calendar years.
  - 5. A balance sheet and statement of income for the period intervening from the last annual statement filed with the Director and the end of the month preceding the month in which the request for dividend approval is submitted; and
  - 6. A brief statement as to the effect of the proposed dividend upon the insurer's surplus and the reasonableness of surplus in relation to the insurer's outstanding liabilities and the adequacy of surplus relative to the insurer's financial needs.
- B. No change



**NOTICES OF RULEMAKING DOCKET OPENING**

This section of the *Arizona Administrative Register* contains Notices of Rulemaking Docket Opening.

A docket opening is the first part of the administrative rulemaking process. It is an “announcement” that the agency intends to work on its rules.

When an agency opens a rulemaking docket to consider rulemaking, the Administrative Procedure Act (APA) requires the publication of the Notice of Rulemaking Docket Opening.

Under the APA effective January 1, 1995, agencies must submit a Notice of Rulemaking Docket Opening before beginning the formal rulemaking process. Many times an agency may file the Notice of Rulemaking Docket Opening with the Notice of Proposed Rulemaking.

The Office of the Secretary of State is the filing office and publisher of these notices. Questions about the interpretation of this information should be directed to the agency contact person listed in item #4 of this notice.

**NOTICE OF RULEMAKING DOCKET OPENING  
DEPARTMENT OF INSURANCE**

[R17-141]

1. **Title and its heading:** 20, Commerce, Financial Institutions, and Insurance  
**Chapter and its heading:** 6, Department of Insurance  
**Article and its heading:** 14, Insurance Holding Company  
**Section numbers:** R20-6-1409 (*Sections may be added, deleted, or modified as necessary*).
  
2. **The subject matter of the proposed rule:**  

In 2014, to retain accreditation with the National Association of Insurance Commissioners (NAIC), the Arizona Legislature passed amendments to Arizona’s insurance holding company statutes, Arizona Revised Statutes (“A.R.S.”) §§ 20-481 through 20-481.32 (Laws 2014, Ch. 104, §§ 1-20). By session law, the legislature exempted the Arizona Department of Insurance (“Department”) from Title 41, Chapter 6 for two years or until April 22, 2016.

A.R.S. § 20-481.19(C) reads in pertinent part: “For the purposes of this section, “extraordinary dividend or distribution” includes any dividend or distribution of cash or other property whose fair market value together with that of other dividends or distributions made within the preceding twelve months exceeds the lesser of . . . net income, if such insurer is not a life insurer, for the twelve month period ending December 31 next preceding . . .” (Emphasis added.)

In 2015, the Department published a Final Exempt Rulemaking (21 A.A.R. 54, January 9, 2015). Section R20-6-1409, which was renumbered from R20-6-1408, is the correlate rule to A.R.S. § 20-481.19. Unfortunately, the Department erred during the rulemaking process and failed to make one necessary change to R20-6-1409 to remove the word “investment” which had been a part of R20-6-1408. After publication, the NAIC brought to the Department’s attention that R20-6-1409(A)(4)(d) retained the phrase “net investment income” which does not comport with ARS § 20-481.19 which uses “net income.” The current wording of R20-6-1409(A)(4)(d) places a financial limitation on certain insurers seeking to make a dividend or distribution. The Department seeks to amend the rule in order to be consistent with A.R.S. § 20-481.19(C), to be consistent with the NAIC Model Regulation, and to not burden insurers with this limitation.
  
3. **A citation to all published notices relating to the proceeding:**  

Notice of Proposed Rulemaking: 23 A.A.R. 2168, August 11, 2017 (*in this issue*).
  
4. **The name and address of agency personnel with whom persons may communicate regarding the rule:**  

Name: Mary E. Kosinski  
 Address: Department of Insurance  
 2910 N. 44th St., Suite 210  
 Phoenix, AZ 85018  
 Telephone: (602) 364-3471  
 E-mail: mkosinski@azinsurance.gov
  
5. **The time during which the agency will accept written comments and the time and place where oral comments may be made:**  

Due to the limited nature of the amendments being proposed, the Department has no plans to hold a hearing on the proposed rulemaking at this time. However, the Department will schedule an oral proceeding on the proposed rule if, within 30 days after the published notice, a written request for an oral proceeding is submitted to the contact person listed in paragraph 4 of this Notice. The Department will accept written comments for 30 days after the published notice at: public\_comments@azinsurance.gov.
  
6. **A timetable for agency decisions or other action on the proceeding, if known:**  

See the Notice of Proposed Rulemaking on page 2168 of this notice.



**NOTICES OF AGENCY OMBUDSMAN**

The Administrative Procedure Act requires the publication of Notices of Agency Ombudsman. Agencies shall publish annually in the *Register* the name or names of those employees who are designated by the agency to assist members of the public or regulated community in seeking information or assistance from the agency. (A.R.S. § 41-1006)

**NOTICE OF AGENCY OMBUDSMAN  
DEPARTMENT OF PUBLIC SAFETY**

[M17-209]

1. **The agency name:** Department of Public Safety
2. **The ombudsman's:**
  - a. **Name:** Ms. Anni Foster
  - b. **Title:** Executive Officer/General Counsel, Ombudsman
  - c. **Agency Division:** Office of the Director
3. **The ombudsman's office address to include city, state, and zip code:**

Physical Address: 2102 W. Encanto Blvd.  
Phoenix, AZ 85009

Mailing Address: POB 6638  
Mail Drop 1000  
Phoenix, AZ 85005-6638
4. **The ombudsman's area code and telephone number, fax number and e-mail address, if available:**

Telephone: (602) 223-2265

Fax: (602) 223-2917

E-mail: afoster@azdps.gov



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**GOVERNOR EXECUTIVE ORDERS**

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The Administrative Procedure Act (APA) requires the full-text publication of Governor Executive Orders.

With the exception of egregious errors, content (including spelling, grammar, and punctuation) of these orders has been reproduced as submitted.

In addition, the Register shall include each statement filed by the Governor in granting a commutation, pardon or reprieve, or stay or suspension of execution where a sentence of death is imposed.

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**EXECUTIVE ORDER 2017-02****Internal Review of Administrative Rules; Moratorium to Promote Job Creation and Customer-Service-Oriented Agencies**

[M17-23]

*Editor's Note: This Executive Order is being reproduced in each issue of the Administrative Register until its expiration on December 31, 2017, as a notice to the public regarding state agencies' rulemaking activities.*

**WHEREAS**, burdensome regulations inhibit job growth and economic development;

**WHEREAS**, job creators and entrepreneurs are especially hurt by red tape and regulations;

**WHEREAS**, all government agencies of the State of Arizona should promote customer-service-oriented principles for the people that it serves;

**WHEREAS**, each State agency should undertake a critical and comprehensive review of its administrative rules and take action to reduce the regulatory burden, administrative delay, and legal uncertainty associated with government regulation;

**WHEREAS**, overly burdensome, antiquated, contradictory, redundant, and nonessential regulations should be repealed;

**WHEREAS**, Article 5, Section 4 of the Arizona Constitution and Title 41, Chapter 1, Article 1 of the Arizona Revised Statutes vests the executive power of the State of Arizona in the Governor;

**NOW, THEREFORE, I, Douglas A. Ducey**, by virtue of the authority vested in me by the Constitution and laws of the State of Arizona hereby declare the following:

1. A State agency subject to this Order, shall not conduct any rulemaking except as permitted by this Order.
2. A State agency subject to this Order, shall not conduct any rulemaking, whether informal or formal, without the prior written approval of the Office of the Governor. In seeking approval, a State agency shall address one or more of the following as justification for the rulemaking:
  - a. To fulfill an objective related to job creation, economic development, or economic expansion in this State.
  - b. To reduce or ameliorate a regulatory burden while achieving the same regulatory objective.
  - c. To prevent a significant threat to the public health, peace, or safety.
  - d. To avoid violating a court order or federal law that would result in sanctions by a court of the federal government against an agency for failure to conduct the rulemaking action.
  - e. To comply with a federal statutory or regulatory requirement if such compliance is related to a condition for the receipt of federal funds or participation in any federal program.
  - f. To comply with a state statutory requirement.
  - g. To fulfill an obligation related to fees or any other action necessary to implement the State budget that is certified by the Governor's Office of Strategic Planning and Budgeting.
  - h. To promulgate a rule or other item that is exempt from Title 41, Chapter 6, Arizona Revised Statutes, pursuant to section 41-1005, Arizona Revised Statutes.
  - i. To address matters pertaining to the control, mitigation, or eradication of waste, fraud, or abuse within an agency or wasteful, fraudulent, or abusive activities perpetrated against an agency.
  - j. To eliminate rules that are antiquated, redundant or otherwise no longer necessary for the operation of state government.
3. All directors of state agencies subject to this Order shall engage their respective regulated or stakeholder communities to solicit comment on which rules the regulated community believes to be overly burdensome and not necessary to protect consumers, public health, or public safety. Each agency shall submit a report regarding the aforementioned information to the Governor's Office no later than September 1, 2017.
4. For the purposes of this Order, the term "State agencies," includes without limitation, all executive departments, agencies, offices, and all state boards and commissions, except for: (a) any State agency that is headed by a single elected State official, (b) the Corporation Commission and (c) any board or commission established by ballot measure during or after the November 1998 general election. Those State agencies, boards and commissions excluded from this Order are strongly encouraged to voluntarily comply with this Order in the context of their own rulemaking processes.
5. This Order does not confer any legal rights upon any persons and shall not be used as a basis for legal challenges to rules, approvals, permits, licenses or other actions or to any inaction of a State agency. For the purposes of this Order, "person," "rule," and "rulemaking" have the same meanings prescribed in Arizona Revised Statutes Section 41-1001.



6. This Executive Order expires on December 31, 2017.

**IN WITNESS WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona.

**Douglas A. Ducey**  
**GOVERNOR**

**DONE** at the Capitol in Phoenix on this Eleventh day of January in the Year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

**ATTEST:**

**Michele Reagan**  
**SECRETARY OF STATE**




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## GOVERNOR PROCLAMATIONS

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The Administrative Procedure Act (APA) requires the publication of Governor proclamations of general applicability, and ceremonial dedications issued by the Governor.

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### CHILD CARE PROVIDER APPRECIATION DAY

[M17-210]

**WHEREAS**, our future depends on the quality of the early childhood experiences provided to young children today and high quality early childhood services represent a valuable commitment to our children's future; and

**WHEREAS**, annually, 2,984 child care providers work with the Arizona Department of Economic Security to serve 50,689 children so family members may accept or maintain employment thus reducing or avoiding dependence on public assistance; and

**WHEREAS**, the contribution of child care providers to our children's future is worthy of the highest respect; and

**WHEREAS**, by calling attention to the importance of high quality child care services for all children and families in the State of Arizona, we hope to improve the quality and availability of such services; and

**WHEREAS**, the State of Arizona encourages parents to take this day to show their child care providers how much they appreciate them.

**NOW, THEREFORE**, I, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 12, 2017 as

### CHILD CARE PROVIDER APPRECIATION DAY

and urge all citizens to join me in acknowledging Arizona's child care providers for their invaluable contributions made to the State of Arizona on this special day and throughout the year.

**IN WITNESS WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

**Douglas A. Ducey**

**GOVERNOR**

**DONE** at the Capitol in Phoenix on this seventh day of March in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

**ATTEST:**

**Michele Reagan**

**SECRETARY OF STATE**

### CONGENITAL DISORDERS OF GLYCOSYLATION AWARENESS DAY

[M17-211]

**WHEREAS**, Congenital Disorders of Glycosylation (CDG) are a group of rare metabolic disorders that affect normal organ development and the neurological system, leaving children, adolescents and adults impaired with significant physical and developmental disability; and

**WHEREAS**, CDG is severely under-diagnosed and misdiagnosed with only approximately 1,000 cases diagnosed with CDG globally, and only 150 cases currently reported in the United States; and

**WHEREAS**, lack of public awareness and visibility of CDG contributes to under-diagnosis and difficulties in accessing specialized services and proper rehabilitation and support; and

**WHEREAS**, early diagnosis of CDG is important to ensure timely management of clinical complications, genetic counseling and when available treatment and therapeutic remedies; and

**WHEREAS**, the goal is to raise awareness and increase the accurate and timely diagnosis of this rare group of inherited metabolic disorders, known as CDG.

**NOW, THEREFORE**, I, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 16, 2017 as

### CONGENITAL DISORDERS OF GLYCOSYLATION AWARENESS DAY

**IN WITNESS WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

**Douglas A. Ducey**

**GOVERNOR**

**DONE** at the Capitol in Phoenix on this twelfth day of April in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.



ATTEST:
Michele Reagan
SECRETARY OF STATE

CORNELIA DE LANGE SYNDROME AWARENESS DAY

[M17-212]

WHEREAS, the good health and general well-being of the people of Arizona, is strengthened by our knowledge and understanding of a little-known genetic disorder known as Cornelia de Lange Syndrome (CdLS); and

WHEREAS, children with CdLS are usually born with low birth weight and develop at a slower rate, both cognitively and physically, and experience many medical complications; and

WHEREAS, dedicated professionals are presently involved in valuable research to explore new therapies and diagnostic tools and to offer hope to children with CdLS; and

WHEREAS, an estimated 20,000 men, women and children in the United States have CdLS but remain undiagnosed or without support services; therefore, they miss out on critical medical services and support that can impact their quality of life; and

WHEREAS, Arizona is pleased to join people throughout our nation in promoting a special celebration which seeks to raise awareness of Cornelia de Lange Syndrome, designed to have a positive and productive impact on the lives of all people with CdLS and their caregivers.

NOW, THEREFORE, I, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 13, 2017 as

CORNELIA DE LANGE SYNDROME AWARENESS DAY

IN WITNESS WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

Douglas A. Ducey
GOVERNOR

DONE at the Capitol in Phoenix on this twelfth day of April in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

ATTEST:
Michele Reagan
SECRETARY OF STATE

CRI DU CHAT SYNDROME AWARENESS DAY

[M17-213]

WHEREAS, the 5p- Society of North America, along with support organizations from around the world are proud to announce that May 1 – 7, 2017 will be designated as International Cri Du Chat Syndrome Awareness Week; and

WHEREAS, May 5th has been designated internationally as Cri Du Chat Syndrome Day; and

WHEREAS, individuals with cri du chat deserve to be recognized for what they can do versus what they cannot do and our hope is that we can raise awareness of Cri Du Chat Syndrome, by spreading our message to each and every person we meet; and

WHEREAS, each year in the United States alone, approximately 50 to 60 children are born with 5p- syndrome (5p minus), also known as Cats Cry Syndrome or Cri Du Chat Syndrome. Some common characteristics of Cri Du Chat Syndrome at birth are high pitched cry, low birth weight, poor muscle tone, microcephaly, and potential medical complications. "5p-" is a term used by geneticists to describe a portion of chromosome number five that is missing in these individuals; and

WHEREAS, one of the goals of Cri Du Chat Awareness Week is to end the outdated misinformation given to families when their child is diagnosed with Cri Du Chat Syndrome; and

WHEREAS, children born with this rare genetic defect will most likely require ongoing support from a team of parents, therapists, and medical and educational professionals to help the child achieve his or her maximum potential; and

WHEREAS, there are many families with family members of Cri Du Chat Syndrome living in Arizona that are members of the 5p-society and over 1,200 families in the country.

NOW, THEREFORE, I, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 5, 2017 as

CRI DU CHAT SYNDROME AWARENESS DAY

IN WITNESS WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

Douglas A. Ducey
GOVERNOR



**DONE** at the Capitol in Phoenix on this first day of May in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

**ATTEST:**

**Michele Reagan**  
**SECRETARY OF STATE**

**DIFFUSE INTRINSIC PONTINE GLIOMA AWARENESS DAY**

[M17-214]

**WHEREAS**, Diffuse Intrinsic Pontine Glioma (DIPG) is a brain tumor found in the part of the brain stem that controls essential bodily functions and affects approximately 300 children in the United States annually; and

**WHEREAS**, according to the Centers for Disease Control brain tumors are the leading cause of cancer-related deaths in children; and

**WHEREAS**, DIPG is the second most common malignant brain tumor found in children, and is the leading cause of childhood death due to brain tumors; and

**WHEREAS**, 90% of children will die within two years of diagnosis with less than one percent surviving after five years; and

**WHEREAS**, leading Arizona-based medical institutions are on the forefront of fighting cancer and researching cures; and

**WHEREAS**, prognosis has not improved for children with DIPG in more than 35 years, but new technology and research offer hope for treatments for children with DIPG.

**NOW, THEREFORE, I, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 17, 2017 as**

**DIFFUSE INTRINSIC PONTINE GLIOMA AWARENESS DAY**

**IN WITNESS WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

**Douglas A. Ducey**  
**GOVERNOR**

**DONE** at the Capitol in Phoenix on this twenty-fifth day of April in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

**ATTEST:**

**Michele Reagan**  
**SECRETARY OF STATE**

**EMERGENCY MEDICAL SERVICES WEEK**

*and*

**EMERGENCY MEDICAL SERVICES FOR CHILDREN DAY**

[M17-215]

**WHEREAS**, Arizona's 18,000 Emergency Medical Services (EMS) providers faithfully respond to emergent calls from Arizona's 6.5 million citizens and visitors 24 hours a day, seven days a week, 365 days a year; and

**WHEREAS**, Arizona's EMS providers – working for fire services, ambulance services, law enforcement agencies, hospital emergency departments and trauma centers – maintain resiliency after repeated exposure to dangerous and difficult circumstances; and

**WHEREAS**, the resilience of Arizona's EMS and Trauma System providers enables them to think quickly, accurately, and skillfully in performing lifesaving procedures, day or night, in dangerous and sometimes grim situations; and

**WHEREAS**, Arizona's EMS and Trauma System, including EMS for Children, - comprised 190 fire services, 100 ambulance services, 20 air ambulance services, 40 designated trauma centers, and 150 hospitals, urgent care centers, and military bases – is an indispensable part of our state's public health and safety system; and

**WHEREAS**, a healthy EMS provider is also a resilient EMS provider, and therefore, available to assist others during emergencies.

**NOW, THEREFORE, I, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 21 – 27, 2017 as**

**EMERGENCY MEDICAL SERVICES WEEK**

*and May 24, 2017 as*

**EMERGENCY MEDICAL SERVICES FOR CHILDREN DAY**

**IN WITNESS WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

**Douglas A. Ducey**  
**GOVERNOR**



**DONE** at the Capitol in Phoenix on this seventeenth day of April in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

**ATTEST:**  
**Michele Reagan**  
**SECRETARY OF STATE**

**EXPERIENCE MATTERS COMMUNITY ENGAGEMENT MONTH**

[M17-216]

**WHEREAS**, Arizona has more than one million residents over the age of 60; and

**WHEREAS**, Arizona’s older adults are highly talented, motivated group of individuals seeking meaningful activities to help solve some of the community’s most challenging social problems; and

**WHEREAS**, research has confirmed there is a strong correlation between community engagement and health benefits, providing the opportunity for older adults to remain active, enjoy an improved quality of life, achieve physical and mental health benefits, and live independently; and

**WHEREAS**, Experience Matters plays a vital role in community engagement by matching social sector entities focused on solving challenging community social problems with skilled adult talent trained to improve the effectiveness and efficiency of services; and

**WHEREAS**, it is important to encourage all Arizonans to recognize the significant impact older adults make in the community and to support their well-being and vitality by helping to sustain meaningful volunteer engagement.

**NOW, THEREFORE, I**, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 2017 as

**EXPERIENCE MATTERS COMMUNITY ENGAGEMENT MONTH**

**IN WITNESS WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

**Douglas A. Ducey**  
**GOVERNOR**

**DONE** at the Capitol in Phoenix on this twenty-fifth day of April in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

**ATTEST:**  
**Michele Reagan**  
**SECRETARY OF STATE**

**FOOD ALLERGY AND ANAPHYLAXIS AWARENESS MONTH**

[M17-217]

**WHEREAS**, Anaphylaxis is a sudden, severe allergic reaction involving major organs in the body simultaneously. In severely allergic individuals it can cause death in a matter of minutes

**WHEREAS**, as many as 15 million Americans have food allergies; nearly 6 million are children under the age of 18; and

**WHEREAS**, research shows that the prevalence of food allergy is increasing among children; and

**WHEREAS**, teenagers and young adults with food allergies are at the highest risk of fatal food-induced anaphylaxis; and

**WHEREAS**, eight foods cause the majority of all food allergy reactions in the United States: shellfish, fish, milk, eggs, tree nuts, peanuts, soy, and wheat; and

**WHEREAS**, symptoms of a food-allergic reaction can include hives, flushed skin or rash, tingling or itchy sensation in the mouth, face, tongue, or lip swelling, vomiting, diarrhea, respiratory distress, and swelling of the throat; and

**WHEREAS**, according to the Centers for Disease Control and Prevention, each year in the United States, anaphylaxis to food results in 200,000 ambulatory care visits a year involving children under 18; and

**WHEREAS**, every 3 minutes a food allergy reaction sends someone to the emergency department and every 6 minutes the reaction is one of anaphylaxis; and

**WHEREAS**, there is no cure for food allergies. Strict avoidance of food allergens and early recognition and management of allergic reactions to food are important measures to prevent serious health consequences; and

**NOW, THEREFORE, I**, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 2017 as

**FOOD ALLERGY AND ANAPHYLAXIS AWARENESS MONTH**

and encourage the residents of Arizona to increase their understanding and awareness of food allergies and anaphylaxis.



**IN WITNESS WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

**Douglas A. Ducey**

**GOVERNOR**

**DONE** at the Capitol in Phoenix on this twenty-eighth day of March in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

**ATTEST:**

**Michele Reagan**

**SECRETARY OF STATE**

#### **FOSTER CARE AWARENESS MONTH**

[M17-218]

**WHEREAS**, all children deserve to grow up safe, loved and well-cared for; and

**WHEREAS**, children come into foster care through no fault of their own and need meaningful connection to a caring adult who becomes a supportive and lasting presence in their lives; and

**WHEREAS**, we, as Arizonans, have the essential task of ensuring our children grow up healthy and safe, by serving as mentors, teachers, faith leaders, caseworkers, advocates and individuals dedicated to making a difference; and

**WHEREAS**, foster families open their homes and hearts to children whose families are in crisis, thereby playing a vital role in helping children heal and preparing children to be successful adults; and

**WHEREAS**, foster families provide Arizona's children with the opportunity to be part of a caring family while helping them reconnect with their families through reunification; and

**WHEREAS**, throughout the year, Arizona strives to provide safety and stability for children in foster care by working with partners in the community, including courts, judges, attorneys, adoption professionals, child welfare agencies, advocates, community and faith-based organizations and others; and

**WHEREAS**, Foster Care Awareness Month is a time for all Arizonans to show their support in ensuring a bright future for Arizona's children in foster care by recognizing the people who take on the joys and responsibilities of caring for children who cannot remain safely in their homes.

**NOW, THEREFORE, I**, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 2017 as

#### **FOSTER CARE AWARENESS MONTH**

and urge all citizens to come forward and do something positive that will help improve the lives of children in foster care.

**IN WITNESS WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

**Douglas A. Ducey**

**GOVERNOR**

**DONE** at the Capitol in Phoenix on this first day of May in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

**ATTEST:**

**Michele Reagan**

**SECRETARY OF STATE**

#### **GOLD STAR AWARENESS MONTH**

[M17-219]

**WHEREAS**, the term "Gold Star" began during World War I when American families displayed flags in homes, businesses, schools and churches with a gold star for each loved one lost in military service; and

**WHEREAS**, today, the nation recognizes the sacrifices that all Gold Star family members make when a father, mother, brother, sister, son, daughter, or other loved one dies in active service to the nation; and

**WHEREAS**, less than one percent of our Nation serve in our military and we have an obligation to acknowledge the losses of our service men and women and ensure their families are not forgotten; and

**WHEREAS**, during the month of May, we honor those who lost a family member who died while in active service in the United States Armed Forces; and

**WHEREAS**, during this month, we remember our commitment to Gold Star Families, who carry on with pride and courage despite their tragic loss.

**NOW, THEREFORE, I**, Douglas A. Ducey, Governor of the State of Arizona, do hereby proclaim May 2017 as



**GOLD STAR AWARENESS MONTH**

**IN WITNESS WHEREOF**, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Arizona

**Douglas A. Ducey**

**GOVERNOR**

**DONE** at the Capitol in Phoenix on this third day of March in the year Two Thousand and Seventeen and of the Independence of the United States of America the Two Hundred and Forty-First.

**ATTEST:**

**Michele Reagan**

**SECRETARY OF STATE**



## REGISTER INDEXES

The *Register* is published by volume in a calendar year (See “General Information” in the front of each issue for more information).

Abbreviations for rulemaking activity in this Index include:

### **PROPOSED RULEMAKING**

PN = Proposed new Section  
 PM = Proposed amended Section  
 PR = Proposed repealed Section  
 P# = Proposed renumbered Section

### **SUPPLEMENTAL PROPOSED RULEMAKING**

SPN = Supplemental proposed new Section  
 SPM = Supplemental proposed amended Section  
 SPR = Supplemental proposed repealed Section  
 SP# = Supplemental proposed renumbered Section

### **FINAL RULEMAKING**

FN = Final new Section  
 FM = Final amended Section  
 FR = Final repealed Section  
 F# = Final renumbered Section

### **SUMMARY RULEMAKING**

#### **PROPOSED SUMMARY**

PSMN = Proposed Summary new Section  
 PSMM = Proposed Summary amended Section  
 PSMR = Proposed Summary repealed Section  
 PSM# = Proposed Summary renumbered Section

#### **FINAL SUMMARY**

FSMN = Final Summary new Section  
 FSMM = Final Summary amended Section  
 FSMR = Final Summary repealed Section  
 FSM# = Final Summary renumbered Section

### **EXPEDITED RULEMAKING**

#### **PROPOSED EXPEDITED**

PEN = Proposed Expedited new Section  
 PEM = Proposed Expedited amended Section  
 PER = Proposed Expedited repealed Section  
 PE# = Proposed Expedited renumbered Section

#### **SUPPLEMENTAL EXPEDITED**

SPEN = Supplemental Proposed Expedited new Section  
 SPEM = Supplemental Proposed Expedited amended Section  
 SPER = Supplemental Proposed Expedited repealed Section  
 SPE# = Supplemental Proposed Expedited renumbered Section

#### **FINAL EXPEDITED**

FEN = Final Expedited new Section  
 FEM = Final Expedited amended Section  
 FER = Final Expedited repealed Section  
 FE# = Final Expedited renumbered Section

### **EXEMPT RULEMAKING**

#### **EXEMPT PROPOSED**

PXN = Proposed Exempt new Section  
 PXM = Proposed Exempt amended Section  
 PXR = Proposed Exempt repealed Section  
 PX# = Proposed Exempt renumbered Section

#### **EXEMPT SUPPLEMENTAL PROPOSED**

SPXN = Supplemental Proposed Exempt new Section  
 SPXR = Supplemental Proposed Exempt repealed Section  
 SPXM = Supplemental Proposed Exempt amended Section  
 SPX# = Supplemental Proposed Exempt renumbered Section

#### **FINAL EXEMPT RULEMAKING**

FXN = Final Exempt new Section  
 FXM = Final Exempt amended Section  
 FXR = Final Exempt repealed Section  
 FX# = Final Exempt renumbered Section

### **EMERGENCY RULEMAKING**

EN = Emergency new Section  
 EM = Emergency amended Section  
 ER = Emergency repealed Section  
 E# = Emergency renumbered Section  
 EEXP = Emergency expired

### **RECODIFICATION OF RULES**

RC = Recodified

### **REJECTION OF RULES**

RJ = Rejected by the Attorney General

### **TERMINATION OF RULES**

TN = Terminated proposed new Sections  
 TM = Terminated proposed amended Section  
 TR = Terminated proposed repealed Section  
 T# = Terminated proposed renumbered Section

### **RULE EXPIRATIONS**

EXP = Rules have expired  
*See also “emergency expired” under emergency rulemaking*

### **CORRECTIONS**

C = Corrections to Published Rules

## 2017 Arizona Administrative Register Volume 23 Page Guide

Issue 1, Jan. 6, 2017.....1-92	Issue 12, March 24, 2017.....643-688	Issue 23, June 9, 2017.....1515-1594
Issue 2, Jan. 13, 2017.....93-146	Issue 13, March 31, 2017.....689-758	Issue 24, June 16, 2017.....1595-1658
Issue 3, Jan. 20, 2017.....147-204	Issue 14, April 7, 2017.....759-822	Issue 25, June 23, 2017.....1659-1714
Issue 4, Jan. 27, 2017.....205-268	Issue 15, April 14, 2017.....823-856	Issue 26, June 30, 2017.....1715-1786
Issue 5, Feb. 3, 2017.....269-318	Issue 16, April 21, 2017.....857-890	Issue 27, July 7, 2017.....1787-1842
Issue 6, Feb. 10, 2017.....319-436	Issue 17, April 28, 2017.....891-1000	Issue 28, July 14, 2017.....1843-1926
Issue 7, Feb. 17, 2017.....437-460	Issue 18, May 5, 2017.....1001-1062	Issue 29, July 21, 2017.....1927-2028
Issue 8, Feb. 24, 2017.....461-482	Issue 19, May 12, 2017.....1063-1342	Issue 30, July 28, 2017.....2029-2110
Issue 9, March 3, 2017.....483-572	Issue 20, May 19, 2017.....1343-1402	Issue 31, Aug. 4, 2017.....2111-2154
Issue 10, March 10, 2017.....573-602	Issue 21, May 26, 2017.....1403-1464	
Issue 11, March 17, 2017.....603-642	Issue 22, June 2, 2017.....1465-1514	

### RULEMAKING ACTIVITY INDEX

Rulemakings are listed in the Index by Chapter, Section number, rulemaking activity abbreviation and by volume page number. Use the page guide above to determine the *Register* issue number to review the rule. Headings for the Subchapters, Articles, Parts, and Sections are not indexed.

#### THIS INDEX INCLUDES RULEMAKING ACTIVITY THROUGH ISSUE 31 OF VOLUME 23.

<p><b>Accountancy, Board of</b></p> <p>R4-1-101. PM-97; SPM-955</p> <p>R4-1-341. PM-97; SPM-955</p> <p>R4-1-345. PM-97; SPM-955</p> <p>R4-1-453. PM-97; SPM-955</p> <p>R4-1-454. PM-97; SPM-955</p> <p>R4-1-455. PM-97; SPM-955</p> <p>R4-1-455.01. PM-97; SPM-955</p> <p>R4-1-455.02. PM-97; SPM-955</p> <p>R4-1-455.03. PM-97; SPM-955; FM-1807</p> <p>R4-1-455.04. PM-97; SPM-955</p> <p><b>Achievement District Schools</b></p> <p>R7-8-101. PXN-661</p> <p>R7-8-201. PXN-661</p> <p><b>Administration, Department of - Benefit Services Division</b></p> <p>R2-6-101. PM-323; FM-1719</p> <p>R2-6-102. FR-1719</p> <p>R2-6-104. FR-1719</p> <p>R2-6-105. PM-323; FM-1719</p>	<p>R2-6-106. PM-323; FM-1719</p> <p>R2-6-107. PM-323; FM-1719</p> <p>R2-6-108. PM-323; FM-1719</p> <p>R2-6-201. FM-1719</p> <p>R2-6-204. PM-323; FM-1719</p> <p>R2-6-301. PM-323; FM-1719</p> <p>R2-6-302. PM-323; FM-1719</p> <p>R2-6-303. PM-323; FM-1719</p> <p><b>Administration, Department of - Risk Management Division</b></p> <p>R2-10-101. PM-1407</p> <p>R2-10-106. PM-1407</p> <p>R2-10-107. PM-1407</p> <p>R2-10-108. PM-1407</p> <p>R2-10-201. PM-1407</p> <p>R2-10-202. PM-1407</p> <p>R2-10-207. PM-1407</p> <p>R2-10-504. EXP-448</p> <p><b>Administration, Department of - State Procurement Office</b></p> <p>R2-7-205. PM-1407; EXP-1757</p> <p>R2-7-208. PM-1407; EXP-1757</p> <p>R2-7-701. PM-1407; EXP-1757</p>	<p>R2-7-1008. PM-1407; EXP-1757</p> <p><b>Agriculture, Department of - Animal Services Division</b></p> <p>R3-2-203. FXM-1937</p> <p>R3-2-205. EXP-135</p> <p>R3-2-403. EXP-135</p> <p>R3-2-621. EXP-135</p> <p>R3-2-622. EXP-135</p> <p>R3-2-701. FXM-1937</p> <p>R3-2-810. FXM-1937</p> <p><b>Agriculture, Department of - Environmental Services Division</b></p> <p>R3-3-702. FXM-1940</p> <p><b>Agriculture, Department of - Office of Commodity Development and Promotion</b></p> <p>R3-6-102. FXM-1943</p> <p><b>Agriculture, Department of - Pest Management Division</b></p> <p>R3-8-101. FXM-1949; RC-1976</p> <p>R3-8-102. FXM-1949; RC-1976</p> <p>R3-8-103. FXM-1949; RC-1976</p> <p>R3-8-104. FXM-1949; RC-1976</p> <p>R3-8-105. RC-1976</p> <p>R3-8-106. RC-1976</p> <p>R3-8-107. FXM-1949; RC-1976</p>
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R3-7-1002.	PM-895	R7-5-509.	FN-693	R14-2-A1203.	EN-865; E#-865; EM-865;
R3-7-1003.	PM-895	R7-5-510.	F#-693; FM-693		PN-1869;
R3-7-1004.	PM-895	R7-5-601.	F#-693; FM-693		P#-1869;
R3-7-1005.	PM-895	R7-5-602.	FN-693		PM-1869
R3-7-1007.	PM-895	R7-5-603.	FN-693	R14-2-1204.	E#-865; P#-1869
R3-7-1008.	PM-895	R7-5-604.	FN-693	R14-2-A1204.	EN-865; E#-865;
R3-7-1009.	PM-895	R7-5-605.	FN-693		EM-865;
R3-7-1010.	PM-895	R7-5-606.	FN-693		PN-1869;
R3-7-1011.	PM-895	R7-5-607.	FN-693		P#-1869;
R3-7-1012.	PM-895				PM-1869
R3-7-1013.	PM-895				E#-865; P#-1869
<b>Arizona Health Care Cost Containment System - Administration</b>		<b>Child Safety, Department of - Foster Home and Child Welfare Agency Facility Safety</b>		R14-2-1205.	EN-865; E#-865;
R9-22-712.35.	PM-1015	R21-8-112.	SPM-1025;	R14-2-A1205.	EM-865;
R9-22-712.60.	PM-1791		EM-1040		PN-1869;
R9-22-712.61.	PM-1015	R21-8-113.	SPM-1025;		P#-1869;
R9-22-712.62.	PM-1791		EM-1040		PM-1869
R9-22-712.63.	PM-1791	<b>Chiropractic Examiners, Board of</b>		R14-2-1206.	E#-865; P#-1869
R9-22-712.64.	PM-1791	R4-7-502.	PM-1847	R14-2-A1206.	EN-865; E#-865;
R9-22-712.65.	PM-1791	R4-7-503.	PM-1847		EM-865;
R9-22-712.66.	PM-1791	R4-7-602.	PM-1847		PN-1869;
R9-22-712.68.	PM-1791	R4-7-801.	PM-1847		P#-1869;
R9-22-712.71.	PM-1015	R4-7-1301.	PM-1847		PM-1869
R9-22-712.72.	PM-1791	R4-7-1401.	PM-1847	R14-2-1207.	E#-865; P#-1869
R9-22-712.80.	PM-1791	R4-7-1403.	PM-1847	R14-2-A1207.	EN-865; E#-865;
R9-22-712.90.	FN-22	R4-7-1404.	PM-1847		EM-865;
R9-22-730.	PXM-1633; FXM-1945	<b>Clean Elections Commission, Citizens</b>		R14-2-1208.	E#-865; P#-1869
<b>Barbers, Board of</b>		R2-20-101.	FXM-113	R14-2-A1208.	EN-865; E#-865;
R4-5-103.	FM-490	R2-20-104.	FXM-115		EM-865;
<b>Behavioral Health Examiners, Board of</b>		R2-20-105.	FXM-117		PN-1869;
R4-6-215.	PR-1007; PN-1007	R2-20-107.	FXM-119	R14-2-1209.	E#-865; P#-1869
<b>Charter Schools, State Board for</b>		R2-20-109.	FXM-121;	R14-2-A1209.	EN-865; E#-865;
R7-5-101.	FM-693		EXP-1757		EM-865;
R7-5-201.	FM-693	R2-20-110.	FXM-124		PN-1869;
R7-5-202.	FM-693	R2-20-111.	FXM-126;		P#-1869;
R7-5-203.	FM-693		EXP-1757		PM-1869
R7-5-204.	FM-693	R2-20-112.	FXM-128	R14-2-1210.	E#-865; P#-1869
R7-5-205.	FM-693	R2-20-402.01.	FXM-130;	R14-2-A1210.	EN-865; E#-865;
R7-5-206.	FM-693		PXM-1935		EM-865;
R7-5-207.	FM-693	R2-20-402.02.	FXN-131		PN-1869;
R7-5-208.	FN-693	R2-20-702.	PXM-610;		P#-1869;
R7-5-301.	F#-693; FN-693		PXM-658;		PM-1869
R7-5-302.	F#-693; FN-693		PXM-722	R14-2-1211.	E#-865; P#-1869
R7-5-303.	F#-693; FN-693	R2-20-703.	FXM-133	R14-2-A1211.	EN-865; E#-865;
R7-5-304.	F#-693	R2-20-703.01.	PXN-610		EM-865;
R7-5-401.	F#-693; FN-693	<b>Corporation Commission - Fixed Utilities</b>			PN-1869;
R7-5-402.	FN-693	R14-2-1201.	E#-865;		PM-1869
R7-5-403.	FN-693		P#-1869	R14-2-1212.	E#-865; P#-1869
R7-5-404.	FN-693	R14-2-A1201.	EN-865; E#-865;	R14-2-A1212.	EN-865; E#-865;
R7-5-501.	FR-693; F#-693; FM-693		EM-865;		EM-865;
R7-5-502.	FR-693; F#-693; FM-693		PN-1869;		PN-1869;
R7-5-503.	FR-693; FN-693		P#-1869;		PM-1869
R7-5-504.	FR-693; FN-693		PM-1869	R14-2-1213.	E#-865; P#-1869
R7-5-505.	FN-693	R14-2-1202.	E#-865; P#-1869	R14-2-A1213.	EN-865; E#-865;
R7-5-506.	FN-693	R14-2-A1202.	EN-865; E#-865;		EM-865;
R7-5-507.	FN-693		EM-865;		PN-1869;
R7-5-508.	FN-693		PN-1869;		P#-1869;
			P#-1869;		PM-1869
			PM-1869	R14-2-1214.	E#-865; P#-1869
				R14-2-A1214.	EN-865; E#-865;
		R14-2-1203.	E#-865; P#-1869		EM-865;
					PN-1869;



R6-5-6013. EXP-581  
 R6-5-6014. EXP-581  
 R6-5-6015. EXP-581  
 Exhibit 1. EXP-581

**Economic Security, Department of -  
 Unemployment Insurance**

R6-3-51140. PM-1627  
 R6-3-5205. PM-1627  
 R6-3-5240. PM-1627  
 R6-3-52235. PM-1627  
 R6-3-55460. PM-1627

**Education, State Board of**

R7-2-205. FXM-725  
 R7-2-318. FXN-1637  
 R7-2-607.01. FXN-725  
 R7-2-612. FXM-725  
 R7-2-614. FXM-725  
 R7-2-617. FXM-231  
 R7-2-701. FXM-725  
 R7-2-705. FXM-725  
 R7-2-1304. FXM-725  
 R7-2-1307. FXM-725  
 R7-2-1308. FXM-725

**Emergency and Military Affairs,  
 Department of - Division of Military  
 Affairs**

R8-3-201. EXP-840  
 R8-3-202. EXP-840  
 R8-3-203. EXP-840  
 R8-3-204. EXP-840  
 R8-3-205. EXP-840  
 R8-3-206. EXP-840  
 Exhibits. EXP-840

**Emergency and Military Affairs,  
 Department of - Project ChalleNGe**

R8-5-101. EXP-840  
 R8-5-102. EXP-840  
 R8-5-103. EXP-840  
 R8-5-104. EXP-840  
 R8-5-105. EXP-840  
 R8-5-106. EXP-840

**Environmental Quality, Department  
 of - Administration**

R18-1-201. EXP-1575  
 R18-1-202. EXP-1575  
 R18-1-203. EXP-1575  
 R18-1-204. EXP-1575  
 R18-1-206. EXP-1575  
 R18-1-207. EXP-1575

**Environmental Quality, Department  
 of - Air Pollution Control**

R18-2-101. FM-333  
 R18-2-102. FM-333  
 R18-2-201. FM-333  
 R18-2-203. FM-333  
 R18-2-217. FM-333  
 R18-2-218. FM-333  
 R18-2-301. FM-333  
 R18-2-302. FM-333  
 R18-2-302.01. FM-333

R18-2-303. FM-333  
 R18-2-304. FM-333  
 R18-2-306. FM-333  
 R18-2-306.01. FM-333  
 R18-2-307. FM-333  
 R18-2-311. FM-333  
 R18-2-312. FM-333  
 R18-2-319. FM-333  
 R18-2-320. FM-333  
 R18-2-324. FM-333  
 R18-2-326. FM-333  
 R18-2-326.01. EXP-613  
 R18-2-327. FM-333  
 R18-2-330. FM-333  
 R18-2-332. FM-333  
 R18-2-334. FM-333  
 R18-2-401. FM-333  
 R18-2-402. FM-333  
 R18-2-403. FM-333  
 R18-2-404. FM-333  
 R18-2-405. FM-333  
 R18-2-406. FM-333  
 R18-2-407. FM-333  
 R18-2-408. FM-333  
 R18-2-410. FM-333  
 R18-2-411. FN-333  
 R18-2-412. FM-333  
 R18-2-502. FM-333  
 R18-2-503. FM-333  
 R18-2-504. FM-333  
 R18-2-507. FR-333  
 R18-2-508. FR-333  
 R18-2-512. FM-333  
 R18-2-513. FM-333  
 R18-2-514. FN-333  
 R18-2-515. FN-333  
 R18-2-715. FM-767  
 R18-2-715.01. FM-767  
 R18-2-715.02. FM-767  
 R18-2-731. PM-827  
 R18-2-901. PM-827  
 R18-2-1205. FM-333  
 Appendix 1. FR-333  
 R18-2-B1301. FN-767  
 R18-2-B1301.01. FN-767  
 R18-2-B1302. FN-767  
 R18-2-C1301. FN-767  
 R18-2-C1302. FN-767  
 Appendix 14. FN-767  
 Appendix 15. FN-767  
 R18-2-1701. EXP-135  
 Table 1. EXP-135  
 R18-2-1702. EXP-135  
 R18-2-1703. EXP-135  
 R18-2-1704. EXP-135  
 R18-2-1705. EXP-135  
 R18-2-1706. EXP-135  
 R18-2-1707. EXP-135  
 R18-2-1708. EXP-135  
 Table 3. EXP-135  
 R18-2-1709. EXP-135

**Environmental Quality, Department  
 of - Environmental Reviews and  
 Certification**

R18-5-201. PM-1882

R18-5-202. PM-1882  
 R18-5-203. PM-1882  
 R18-5-204. PM-1882  
 R18-5-205. PR-1882  
 R18-5-206. PR-1882  
 R18-5-207. PR-1882  
 R18-5-208. PR-1882  
 R18-5-209. PR-1882  
 R18-5-210. PR-1882  
 R18-5-211. PR-1882  
 R18-5-212. PR-1882  
 R18-5-213. PR-1882  
 R18-5-214. PR-1882  
 R18-5-215. PR-1882  
 R18-5-217. PR-1882  
 R18-5-218. PR-1882  
 R18-5-219. PR-1882  
 R18-5-220. PR-1882  
 R18-5-221. PR-1882  
 R18-5-222. PR-1882  
 R18-5-223. PR-1882  
 R18-5-224. PR-1882  
 R18-5-225. PR-1882  
 R18-5-226. PR-1882  
 R18-5-227. PR-1882  
 R18-5-228. PR-1882  
 R18-5-229. PR-1882  
 R18-5-230. PR-1882  
 R18-5-231. PR-1882  
 R18-5-232. PR-1882  
 R18-5-233. PR-1882  
 R18-5-234. PR-1882  
 R18-5-235. PR-1882  
 R18-5-236. PR-1882  
 R18-5-237. PR-1882  
 R18-5-238. PR-1882  
 R18-5-239. PR-1882  
 R18-5-240. PR-1882  
 R18-5-241. PR-1882  
 R18-5-242. PR-1882  
 R18-5-243. PR-1882  
 R18-5-244. PR-1882  
 R18-5-245. PR-1882  
 R18-5-246. PR-1882  
 R18-5-247. PR-1882  
 R18-5-248. PR-1882  
 R18-5-249. PM-1882

**Environmental Quality, Department  
 of - Water Pollution Control**

R18-9-601. PR-1663  
 R18-9-602. PR-1663  
 R18-9-603. PR-1663  
 R18-9-701. P#-1663  
 R18-9-702. P#-1663  
 R18-9-703. P#-1663  
 R18-9-704. P#-1663  
 R18-9-705. P#-1663  
 R18-9-706. P#-1663  
 R18-9-707. P#-1663  
 R18-9-708. P#-1663  
 R18-9-709. P#-1663  
 R18-9-710. P#-1663  
 R18-9-711. P#-1663  
 R18-9-712. P#-1663  
 R18-9-713. P#-1663



R18-9-714.	P#-1663	R12-4-501.	PM-273;	R1-6-401.	PM-1347
R18-9-715.	P#-1663		FM-1732	R1-6-402.	PN-1347
R18-9-716.	P#-1663	R12-4-502.	PM-273;	R1-6-403.	PN-1347
R18-9-717.	P#-1663		FM-1732	R1-6-404.	PN-1347
R18-9-718.	P#-1663	R12-4-503.	PM-273;	R1-6-501.	PR-1347
R18-9-719.	P#-1663		FM-1732	R1-6-502.	PR-1347
R18-9-720.	PR-1663	R12-4-504.	PM-273;	R1-6-601.	PR-1347
R18-9-A701.	P#-1663;		FXM-1034;	R1-6-701.	PR-1347
	PM-1663		FM-1732	R1-6-801.	PR-1347
R18-9-A702.	P#-1663;	R12-4-505.	PM-273;	R1-6-802.	PR-1347
	PM-1663		FM-1732		
R18-9-A703.	P#-1663;	R12-4-506.	PM-273;		
	PM-1663		FM-1732		
R18-9-A704.	P#-1663;	R12-4-507.	PM-273;		
	PM-1663		FXM-1034;		
R18-9-A705.	P#-1663;		FM-1732		
	PM-1663	R12-4-509.	PM-273;	R9-6-101.	PM-1524
R18-9-A706.	P#-1663;		FM-1732	R9-6-201.	PM-1524
	PM-1663	R12-4-510.	PM-273;	R9-6-202.	PM-1524
R18-9-A707.	PN-1663		FM-1732	Table 1.	PR-1524
R18-9-B701.	P#-1663;	R12-4-511.	PM-273;	Table 2.1.	PN-1524
	PM-1663		FM-1732	R9-6-203.	PM-1524
R18-9-B702.	P#-1663;	R12-4-513.	PM-273;	Table 2.	PM-1524
	PM-1663		FM-1732	R9-6-204.	PM-1524
R18-9-B703.	P#-1663;	R12-4-514.	PM-273;	Table 3.	PR-1524
	PM-1663		FM-1732	Table 2.3.	PN-1524
R18-9-B704.	P#-1663;	R12-4-515.	PM-273;	R9-6-205.	PM-1524
	PM-1663		FM-1732	R9-6-206.	PM-1524
R18-9-B705.	P#-1663;	R12-4-516.	PM-273	Table 4.	PR-1524
	PM-1663	R12-4-517.	PM-273;	Table 2.4.	PN-1524
R18-9-B706.	P#-1663;		FM-1732	R9-6-207.	PM-1524
	PM-1663	R12-4-520.	PM-273;	R9-6-301.	PM-1524
R18-9-B707.	P#-1663;		FM-1732	R9-6-302.	PM-1524
	PM-1663	R12-4-521.	PM-273;	R9-6-303.	PM-1524
R18-9-B708.	P#-1663;		FR-1732	R9-6-304.	PM-1524
	PM-1663	R12-4-522.	PR-273;	R9-6-305.	P#-1524;
R18-9-B709.	P#-1663;		FR-1732		PN-1524
	PM-1663	R12-4-524.	PM-273;	R9-6-306.	P#-1524;
R18-9-B710.	P#-1663;		FM-1732		PM-1524
	PM-1663	R12-4-526.	PM-273;	R9-6-307.	PR-1524;
R18-9-C701.	P#-1663;		FM-1732	R9-6-308.	PN-1524
	PM-1663	R12-4-527.	PM-273;		P#-1524;
R18-9-D701.	P#-1663;		FXM-1034;	R9-6-309.	PN-1524
	PM-1663	R12-4-529.	FM-1732	R9-6-310.	P#-1524;
R18-9-D702.	P#-1663;		PM-273;		PN-1524
	PM-1663	R12-4-530.	FM-1732	R9-6-311.	P#-1524;
R18-9-E701.	PN-1663		PN-273;		PM-1524
			FN-1732	R9-6-312.	P#-1524;

**Health Services, Department of - Communicable Diseases and Infections**

**Financial Institutions, Department of**

R20-4-301.	EXP-841
R20-4-303.	EXP-841
R20-4-304.	EXP-841
R20-4-309.	EXP-841
R20-4-318.	EXP-841
R20-4-324.	EXP-841
R20-4-325.	EXP-841
R20-4-326.	EXP-841
R20-4-327.	EXP-841
R20-4-328.	EXP-841
R20-4-330.	EXP-841

**Game and Fish Commission**

R12-4-402.	FM-492
R12-4-414.	PM-1472

**Governor's Regulatory Review Council**

R1-6-101.	PM-1347
R1-6-102.	PM-1347
R1-6-103.	PM-1347
R1-6-104.	PM-1347
R1-6-201.	PM-1347
R1-6-202.	PM-1347
R1-6-203.	PM-1347
R1-6-204.	PM-1347
R1-6-205.	PM-1347
R1-6-206.	PM-1347
R1-6-207.	PR-1347
R1-6-301.	PM-1347
R1-6-302.	PM-1347
R1-6-303.	PM-1347
R1-6-304.	PR-1347

R9-6-313.	P#-1524;
R9-6-314.	PM-1524
R9-6-315.	P#-1524;
R9-6-316.	PN-1524
R9-6-317.	P#-1524;
R9-6-318.	PM-1524
R9-6-319.	P#-1524;
R9-6-320.	PM-1524

R9-6-321.	P#-1524; PN-1524	R9-6-354.	P#-1524; PM-1524	R9-6-386.	P#-1524; PM-1524
R9-6-322.	P#-1524; PM-1524	R9-6-355.	P#-1524; PM-1524	R9-6-387.	PR-1524; P#-1524; PM-1524
R9-6-323.	P#-1524; PM-1524	R9-6-356.	P#-1524; PM-1524	R9-6-388.	P#-1524; PM-1524
R9-6-324.	P#-1524; PM-1524	R9-6-357.	P#-1524; PM-1524	R9-6-389.	P#-1524; PM-1524
R9-6-325.	P#-1524; PM-1524	R9-6-358.	P#-1524; PN-1524	R9-6-390.	P#-1524; PM-1524
R9-6-326.	P#-1524; PM-1524	R9-6-359.	P#-1524; PM-1524	R9-6-391.	P#-1524; PM-1524
R9-6-327.	P#-1524; PM-1524	R9-6-360.	P#-1524; PM-1524	R9-6-392.	P#-1524; PM-1524
R9-6-328.	P#-1524; PM-1524	R9-6-361.	P#-1524; PN-1524	R9-6-393.	P#-1524; PM-1524
R9-6-329.	P#-1524; PM-1524	R9-6-362.	P#-1524; PM-1524	R9-6-394.	P#-1524; PM-1524
R9-6-330.	P#-1524; PM-1524	R9-6-363.	P#-1524; PM-1524	R9-6-395.	P#-1524; PM-1524
R9-6-331.	P#-1524; PM-1524	R9-6-364.	PR-1524; P#-1524; PM-1524	R9-6-396.	P#-1524; PM-1524
R9-6-332.	P#-1524; PM-1524	R9-6-365.	P#-1524; PM-1524	R9-6-397.	P#-1524; PM-1524
R9-6-333.	P#-1524; PM-1524	R9-6-366.	P#-1524; PM-1524	R9-6-398.	PN-1524
R9-6-334.	P#-1524; PM-1524	R9-6-367.	P#-1524; PM-1524	R9-6-1002.	PM-1524
R9-6-335.	P#-1524; PM-1524	R9-6-368.	P#-1524; PM-1524	R9-6-1102.	PM-1524
R9-6-336.	P#-1524; PM-1524	R9-6-369.	PR-1524; P#-1524; PM-1524	R9-6-1103.	PM-1524
R9-6-337.	P#-1524; PN-1524			R9-6-1202.	PM-1524
R9-6-338.	P#-1524; PM-1524	R9-6-370.	P#-1524; PN-1524	<b>Health Services, Department of - Emergency Medical Services</b>	
R9-6-339.	P#-1524; PM-1524	R9-6-371.	P#-1524; PM-1524		
R9-6-340.	P#-1524; PM-1524	R9-6-372.	P#-1524; PM-1524	Table 5.2.	FXM-1161
R9-6-341.	P#-1524; PM-1524	R9-6-373.	P#-1524; PM-1524	R9-25-601.	PM-577; FM-1728
R9-6-342.	P#-1524; PM-1524	R9-6-374.	P#-1524; PM-1524	R9-25-602.	PM-577; FM-1728
R9-6-343.	P#-1524; PM-1524	R9-6-375.	P#-1524; PM-1524	R9-25-1301.	PM-1067
R9-6-344.	P#-1524; PM-1524	R9-6-376.	P#-1524; PM-1524	R9-25-1302.	PM-1067
R9-6-345.	P#-1524; PM-1524	R9-6-377.	P#-1524; PN-1524	R9-25-1303.	P#-1067; PM-1067
R9-6-346.	P#-1524; PM-1524	R9-6-378.	P#-1524; PM-1524	R9-25-1303.01.	PN-1067
R9-6-347.	P#-1524; PM-1524	R9-6-379.	P#-1524; PM-1524	R9-25-1304.	P#-1067; PM-1067
R9-6-348.	P#-1524; PM-1524	R9-6-380.	P#-1524; PM-1524	R9-25-1305.	PR-1067; P#-1067; PM-1067
R9-6-349.	P#-1524; PM-1524	R9-6-381.	P#-1524; PM-1524	R9-25-1306.	PR-1067; PN-1067
R9-6-350.	P#-1524; PM-1524	R9-6-382.	P#-1524; PM-1524	R9-25-1307.	PR-1067; P#-1067; PM-1067
R9-6-351.	P#-1524; PM-1524	R9-6-383.	P#-1524; PM-1524	R9-25-1308.	P#-1067; PM-1067
R9-6-352.	P#-1524; PM-1524	R9-6-384.	P#-1524; PM-1524	Table 1.	PR-1067
R9-6-353.	P#-1524; PM-1524	R9-6-385.	P#-1524; PM-1524	Exhibit I.	PR-1067
				Table 13.1.	PN-1067
				R9-25-1309.	P#-1067; PN-1067
				R9-25-1310.	PR-1067; P#-1067; PM-1067
				R9-25-1311.	PR-1067
				R9-25-1312.	P#-1067



R4-19-312. FM-1420  
 R4-19-511. FM-1420  
 R4-19-801. FM-1420  
 R4-19-802. FM-1420

**Osteopathic Examiners in Medicine and Surgery, Board of**

R4-22-104. FM-763  
 Table 1. FM-763  
 R4-22-207. FM-763

**Pest Management, Office of**

R4-29-101. RC-1976  
 R4-29-102. RC-1976  
 R4-29-103. RC-1976  
 R4-29-104. RC-1976  
 R4-29-105. RC-1976  
 R4-29-106. RC-1976  
 R4-29-107. RC-1976  
 Table 1. RC-1976  
 R4-29-108. RC-1976  
 R4-29-201. RC-1976  
 R4-29-202. RC-1976  
 R4-29-203. RC-1976  
 R4-29-204. RC-1976  
 R4-29-205. RC-1976  
 R4-29-206. RC-1976  
 R4-29-207. RC-1976  
 R4-29-208. RC-1976  
 R4-29-209. RC-1976  
 R4-29-210. RC-1976  
 R4-29-211. RC-1976  
 R4-29-212. RC-1976  
 R4-29-213. RC-1976  
 R4-29-214. RC-1976  
 R4-29-215. RC-1976  
 R4-29-216. RC-1976  
 R4-29-301. RC-1976  
 R4-29-302. RC-1976  
 R4-29-303. RC-1976  
 R4-29-304. RC-1976  
 R4-29-305. RC-1976  
 R4-29-306. RC-1976  
 R4-29-307. RC-1976  
 R4-29-308. RC-1976  
 R4-29-309. RC-1976  
 R4-29-310. RC-1976  
 R4-29-311. RC-1976  
 R4-29-312. RC-1976  
 R4-29-313. RC-1976  
 R4-29-314. RC-1976  
 R4-29-315. RC-1976  
 R4-29-316. RC-1976  
 R4-29-317. RC-1976  
 R4-29-318. RC-1976  
 R4-29-319. RC-1976  
 R4-29-320. RC-1976  
 R4-29-401. RC-1976  
 R4-29-402. RC-1976  
 R4-29-403. RC-1976  
 R4-29-404. RC-1976  
 R4-29-405. RC-1976  
 R4-29-406. RC-1976  
 R4-29-407. RC-1976  
 R4-29-408. RC-1976  
 R4-29-409. RC-1976

R4-29-410. RC-1976  
 R4-29-411. RC-1976  
 R4-29-412. RC-1976  
 R4-29-413. RC-1976  
 R4-29-414. RC-1976  
 R4-29-415. RC-1976  
 R4-29-416. RC-1976  
 R4-29-417. RC-1976  
 R4-29-418. RC-1976  
 R4-29-501. RC-1976  
 R4-29-502. RC-1976  
 R4-29-503. RC-1976  
 R4-29-504. RC-1976  
 R4-29-505. RC-1976  
 Appendix A. RC-1976  
 R4-29-601. RC-1976  
 R4-29-602. RC-1976  
 R4-29-603. RC-1976  
 R4-29-604. RC-1976  
 R4-29-605. RC-1976  
 R4-29-606. RC-1976  
 R4-29-607. RC-1976  
 R4-29-608. RC-1976  
 R4-29-609. RC-1976  
 R4-29-701. RC-1976  
 R4-29-702. RC-1976  
 R4-29-703. RC-1976  
 R4-29-704. RC-1976  
 R4-29-705. RC-1976  
 R4-29-706. RC-1976  
 R4-29-707. RC-1976  
 R4-29-708. RC-1976

**Pharmacy, Board of**

R4-23-205. FXM-2058  
 R4-23-402. PM-1009  
 R4-23-407.1. PN-5;  
 EN-31; FN-967  
 R4-23-411. FM-211  
 R4-23-703. SPM-607  
 R4-23-1104. PM-1009  
 R4-23-1104.01. PN-1009

**Psychologist Examiners, Board of**

R4-26-401. FM-215  
 R4-26-403. FM-215  
 R4-26-404. FM-215  
 R4-26-404.1. FN-215  
 R4-26-405. FM-215  
 R4-26-406. FM-215  
 R4-26-407. FM-215  
 R4-26-408. FM-215  
 R4-26-409. FM-215  
 R4-26-410. FM-215  
 R4-26-414. FM-215  
 R4-26-417. FM-215

**Racing Commission, Arizona**

R19-2-205. FXM-837

**Registrar of Contractors**

R4-9-102. FM-1029;  
 PM-1599  
 R4-9-103. PM-1599  
 R4-9-104. PM-1599  
 R4-9-106. PM-1599

R4-9-108. PM-1599  
 R4-9-109. PM-1599  
 R4-9-111. PN-1599  
 R4-9-113. PM-1599  
 R4-9-115. PM-1599  
 R4-9-117. PM-1599  
 R4-9-118. PN-1599

**Respiratory Care Examiners, Board of**

R4-45-102. FXM-834  
 R4-45-208. FXM-834  
 R4-45-209. FXM-834  
 R4-45-201. FXR-834

**Retirement System Board, State**

R2-8-117. FN-209  
 R2-8-124. PN-647  
 R2-8-125. PN-647  
 R2-8-201. EXP-34;  
 FN-1414  
 R2-8-202. FN-1414  
 R2-8-203. FN-1414  
 R2-8-204. FN-1414  
 R2-8-205. FN-1414  
 R2-8-206. FN-1414  
 R2-8-207. EXP-34;  
 FN-1414  
 R2-8-301. PN-441  
 R2-8-302. PN-441  
 R2-8-303. PN-441  
 R2-8-304. PN-441  
 R2-8-305. PN-441  
 R2-8-306. PN-441  
 R2-8-401. FM-487;  
 PM-1005  
 R2-8-403. FM-487  
 R2-8-405. FM-487  
 R2-8-801. PN-444  
 R2-8-802. PN-444  
 R2-8-803. PN-444  
 R2-8-804. PN-444  
 R2-8-805. PN-444  
 R2-8-806. PN-444  
 R2-8-807. PN-444  
 R2-8-808. PN-444  
 R2-8-809. PN-444  
 R2-8-810. PN-444  
 R2-8-901. PN-1469  
 R2-8-902. PN-1469  
 R2-8-903. PN-1469  
 R2-8-904. PN-1469  
 R2-8-905. PN-1469

**Revenue, Department of - General Administration**

R15-10-301. PM-108;  
 FM-1899  
 R15-10-302. PM-108;  
 FM-1899;  
 PM-1931  
 R15-10-303. PM-108;  
 FM-1899;  
 PM-1931

R15-10-304.	PM-108; FM-1899	R17-1-712.	PN-2033	R17-5-902.	FR-223; FN-223
R15-10-305.	PM-108; FM-1899	R17-1-713.	PN-2033	R17-5-903.	FR-223; FN-223
R15-10-306.	PM-108; FM-1899	R17-1-714.	PN-2033	R17-5-904.	FR-223; FN-223
R15-10-505.	PM-1931	<b>Transportation, Department of - Commercial Programs</b>		R17-5-905.	FR-223; FN-223
<b>Revenue, Department of - Income and Withholding Tax Section</b>		R17-5-301.	PM-7; FM-2045	R17-5-906.	FR-223; FN-223
R15-2C-206.	EXP-1044	R17-5-302.	PM-7; FM-2045	R17-5-1001.	FN-223
R15-2C-207.	EXP-1044	R17-5-303.	PM-7; FM-2045	R17-5-1002.	FN-223
R15-2C-210.	EXP-1044	R17-5-305.	PM-7; FM-2045	R17-5-1003.	FN-223
R15-2C-304.	EXP-1044	R17-5-306.	PM-7; FM-2045	R17-5-1004.	FN-223
<b>Secretary of State, Office of</b>		R17-5-307.	PM-7; FM-2045	R17-5-1005.	FN-223
R2-12-1102.	PM-2115	R17-5-308.	PM-7; FM-2045	R17-5-1006.	FN-223
Exhibit 1.	PN-2115	R17-5-309.	PM-7; FM-2045	R17-5-1007.	FN-223
<b>Transportation, Department of - Administration</b>		R17-5-311.	PM-7; FM-2045	R17-5-1008.	FN-223
R17-1-701.	PN-2033	R17-5-313.	PM-7; FM-2045	R17-5-1009.	FN-223
R17-1-702.	PN-2033	R17-5-315.	PM-7; FM-2045	<b>Transportation, Department of - Title, Registration, and Driver Licenses</b>	
R17-1-703.	PN-2033	R17-5-318.	PM-7; FM-2045	R17-4-703.	EXP-34
R17-1-704.	PN-2033	R17-5-323.	PM-7; FM-2045	R17-4-711.	EXP-34
R17-1-705.	PN-2033	R17-5-401.	PN-16; FN-1434	<b>Water Resources, Department of</b>	
R17-1-706.	PN-2033	R17-5-402.	PM-16; FM-1434	R12-15-105.	PM-650
R17-1-707.	PN-2033	R17-5-405.	PM-16; FM-1434	R12-15-401.	PM-650
R17-1-708.	PN-2033	R17-5-406.	PM-16; FM-1434		
R17-1-709.	PN-2033	R17-5-407.	PM-16; FM-1434		
R17-1-710.	PN-2033	R17-5-408.	PM-16; FM-1434		
R17-1-711.	PN-2033	R17-5-901.	FR-223; FN-223		

**OTHER NOTICES AND PUBLIC RECORDS INDEX**

Other notices related to rulemakings are listed in the Index by notice type, agency/county and by volume page number. Agency policy statements and proposed delegation agreements are included in this section of the Index by volume page number. Public records, such as Governor Office executive orders, proclamations, declarations and terminations of emergencies, summaries of Attorney General Opinions, and county notices are also listed in this section of the Index as published by volume page number.

**THIS INDEX INCLUDES OTHER NOTICE ACTIVITY THROUGH ISSUE 31 OF VOLUME 23.**

<b>Agency Guidance Document, Notices of</b>	M17-71); 673-676 (M17-72 through M17-78); 1383-1388 (M17-89 through M17-98); 1444-1449 (M17-100 through M17-109); 1493-1500 (M17- 110 through M17-123); 1764- 1770 (M17-146 through M17- 158); 1819-1824 (M17-161 through M17-170); 2063-2070 (M17-172 through M17-185); 2125-2135 (M17-188 through M17-207)	Insurance, Department of; pp. 234- 235
Health Services, Department of; pp. 417, 1048		
<b>Agency Ombudsman, Notice of</b>		<b>Proposed Delegation Agreement, Notices of</b>
Game and Fish Commission; p. 449		Environmental Quality, Department of; pp. 35-36; 525-526; 617- 621; 669; 875; 1378, 1812; 2119-2120
Transportation, Department of; p. 309		Health Services, Department of; pp. 526-537
<b>County Notices Pursuant to A.R.S. § 49-112</b>		<b>Public Information, Notices of</b>
Maricopa County; pp. 37-71; 236- 256; 542-561, 2011, 2071-2092	<b>Governor's Regulatory Review Council</b>	Board of Regents, Arizona; pp. 418- 427
Pima County; pp. 1170-1329	Notices of Action Taken at Monthly Meetings; pp. 264-265; 479-480; 639-640; 996-997; 1461-1462; 1839-1840	Clean Elections Commission, Citi- zens; p. 1761
<b>Governor's Office</b>		Corporation Commission - Fixed Utilities; p. 2121
<b>Executive Order:</b> pp. 540 (E.O. #2017-01); 540-541 (E.O. #2017-02)	<b>Oral Proceeding on Proposed Rulemaking, Notice of</b>	Economic Security, Department of; p. 622
<b>Governor Proclamations:</b> pp. 586-592 (M17-44 through M17- 56); 625-629 (M17-64 through	Administration, Department of - Ben- efit Services Division; p. 450	Environmental Quality, Department of; pp. 300-306, 1440



Environmental Quality, Department of - Pesticides and Water Pollution Control; pp. 2006-2008  
 Game and Fish Commission; p. 2121-2122  
 Health Services, Department of - Emergency Medical Services; p. 538  
 Industrial Commission of Arizona; p. 467  
 Real Estate, Department of; p. 1814

**Rulemaking Docket Opening, Notices of**

Administration, Department of - Benefit Services Division; 2 A.A.C. 6; pp. 415-416  
 Administration, Department of - Public Buildings Maintenance; 2 A.A.C. 11; p. 1759  
 Administration, Department of - Risk Management Division; 2 A.A.C. 10; p. 873  
 Agriculture, Department of - Weights and Measures Services Division; 3 A.A.C. 7; p. 982  
 Arizona Health Care Coast Containment System - Administration; 9 A.A.C. 22; pp. 1046, 1811  
 Behavioral Health Examiners, Board of; 4 A.A.C. 6; p. 1045  
 Child Safety, Department of - Child Welfare Agency Licensing; 21 A.A.C. 7; p. 1377  
 Chiropractic Examiners, Board of; 4 A.A.C. 7; p. 1905

Corporation Commission - Fixed Utilities; 14 A.A.C. 2; p. 1906  
 Cosmetology, Board of; 4 A.A.C. 10; p. 1576  
 Criminal Justice Commission, Arizona; 10 A.A.C. 4; p. 1640  
 Environmental Quality, Department of - Air Pollution Control; 18 A.A.C. 2; p. 842  
 Environmental Quality, Department of - Environmental Reviews and Certification; 18 A.A.C. 5; p. 1907  
 Environmental Quality, Department of - Water Pollution Control; 18 A.A.C. 9; p. 1687  
 Examiners for Nursing Care Institution Administrators and Assisted Living Facility Managers, Board of; 4 A.A.C. 33; p. 983  
 Game and Fish Commission; 12 A.A.C. 4; pp. 299, 1489  
 Governor's Regulatory Review Council; 1 A.A.C. 6; p. 1376  
 Health Services, Department of - Health Programs Services; 9 A.A.C. 13; p. 1810  
 Health Services, Department of - Medical Marijuana Program; 9 A.A.C. 17; p. 614  
 Industrial Commission of Arizona; 20 A.A.C. 5; p.1047  
 Law Enforcement Merit System Council; 13 A.A.C. 5; p. 1489  
 Pharmacy, Board of; 4 A.A.C. 23; p. 137

Psychologist Examiners, Board of; 4 A.A.C. 26; p. 524  
 Registrar of Contractors; 4 A.A.C. 9; p. 1639  
 Retirement System Board, State; 2 A.A.C. 8; pp. 667; 1045  
 Revenue, Department of; 15 A.A.C. 10; pp. 138, 2005  
 Secretary of State, Office of; 2 A.A.C. 12; p. 2118  
 Technical Registration, Board of; 4 A.A.C. 30; p. 1488  
 Transportation, Department of - Title, Registration, and Driver Licenses; 17 A.A.C. 4; p. 1760  
 Water Infrastructure Finance Authority of Arizona; 18 A.A.C. 15; p. 615  
 Water Resources, Department of; 12 A.A.C. 15; p. 667

**Substantive Policy Statement, Notices of**

Contractors, Registrar of; p. 468  
 Environmental Quality, Department of; pp. 1380, 1577, 1689  
 Health Services, Department of; p. 193  
 Insurance, Department of; pp. 194, 1815  
 Land Department, State; pp. 469-470  
 Psychologist Examiners, Department of; p. 539  
 Real Estate, Department of; p. 1815  
 Water Infrastructure Finance Authority; pp. 307-308



**RULES EFFECTIVE DATES CALENDAR**

A.R.S. § 41-1032(A), as amended by Laws 2002, Ch. 334, § 8 (effective August 22, 2002), states that a rule generally becomes effective 60 days after the day it is filed with the Secretary of State's Office. The following table lists filing dates and effective dates for rules that follow this provision. Please also check the rulemaking Preamble for effective dates.

January		February		March		April		May		June	
Date Filed	Effective Date										
1/1	3/2	2/1	4/2	3/1	4/30	4/1	5/31	5/1	6/30	6/1	7/31
1/2	3/3	2/2	4/3	3/2	5/1	4/2	6/1	5/2	7/1	6/2	8/1
1/3	3/4	2/3	4/4	3/3	5/2	4/3	6/2	5/3	7/2	6/3	8/2
1/4	3/5	2/4	4/5	3/4	5/3	4/4	6/3	5/4	7/3	6/4	8/3
1/5	3/6	2/5	4/6	3/5	5/4	4/5	6/4	5/5	7/4	6/5	8/4
1/6	3/7	2/6	4/7	3/6	5/5	4/6	6/5	5/6	7/5	6/6	8/5
1/7	3/8	2/7	4/8	3/7	5/6	4/7	6/6	5/7	7/6	6/7	8/6
1/8	3/9	2/8	4/9	3/8	5/7	4/8	6/7	5/8	7/7	6/8	8/7
1/9	3/10	2/9	4/10	3/9	5/8	4/9	6/8	5/9	7/8	6/9	8/8
1/10	3/11	2/10	4/11	3/10	5/9	4/10	6/9	5/10	7/9	6/10	8/9
1/11	3/12	2/11	4/12	3/11	5/10	4/11	6/10	5/11	7/10	6/11	8/10
1/12	3/13	2/12	4/13	3/12	5/11	4/12	6/11	5/12	7/11	6/12	8/11
1/13	3/14	2/13	4/14	3/13	5/12	4/13	6/12	5/13	7/12	6/13	8/12
1/14	3/15	2/14	4/15	3/14	5/13	4/14	6/13	5/14	7/13	6/14	8/13
1/15	3/16	2/15	4/16	3/15	5/14	4/15	6/14	5/15	7/14	6/15	8/14
1/16	3/17	2/16	4/17	3/16	5/15	4/16	6/15	5/16	7/15	6/16	8/15
1/17	3/18	2/17	4/18	3/17	5/16	4/17	6/16	5/17	7/16	6/17	8/16
1/18	3/19	2/18	4/19	3/18	5/17	4/18	6/17	5/18	7/17	6/18	8/17
1/19	3/20	2/19	4/20	3/19	5/18	4/19	6/18	5/19	7/18	6/19	8/18
1/20	3/21	2/20	4/21	3/20	5/19	4/20	6/19	5/20	7/19	6/20	8/19
1/21	3/22	2/21	4/22	3/21	5/20	4/21	6/20	5/21	7/20	6/21	8/20
1/22	3/23	2/22	4/23	3/22	5/21	4/22	6/21	5/22	7/21	6/22	8/21
1/23	3/24	2/23	4/24	3/23	5/22	4/23	6/22	5/23	7/22	6/23	8/22
1/24	3/25	2/24	4/25	3/24	5/23	4/24	6/23	5/24	7/23	6/24	8/23
1/25	3/26	2/25	4/26	3/25	5/24	4/25	6/24	5/25	7/24	6/25	8/24
1/26	3/27	2/26	4/27	3/26	5/25	4/26	6/25	5/26	7/25	6/26	8/25
1/27	3/28	2/27	4/28	3/27	5/26	4/27	6/26	5/27	7/26	6/27	8/26
1/28	3/29	2/28	4/29	3/28	5/27	4/28	6/27	5/28	7/27	6/28	8/27
1/29	3/30			3/29	5/28	4/29	6/28	5/29	7/28	6/29	8/28
1/30	3/31			3/30	5/29	4/30	6/29	5/30	7/29	6/30	8/29
1/31	4/1			3/31	5/30			5/31	7/30		



July		August		September		October		November		December	
Date Filed	Effective Date										
7/1	8/30	8/1	9/30	9/1	10/31	10/1	11/30	11/1	12/31	12/1	1/30
7/2	8/31	8/2	10/1	9/2	11/1	10/2	12/1	11/2	1/1	12/2	1/31
7/3	9/1	8/3	10/2	9/3	11/2	10/3	12/2	11/3	1/2	12/3	2/1
7/4	9/2	8/4	10/3	9/4	11/3	10/4	12/3	11/4	1/3	12/4	2/2
7/5	9/3	8/5	10/4	9/5	11/4	10/5	12/4	11/5	1/4	12/5	2/3
7/6	9/4	8/6	10/5	9/6	11/5	10/6	12/5	11/6	1/5	12/6	2/4
7/7	9/5	8/7	10/6	9/7	11/6	10/7	12/6	11/7	1/6	12/7	2/5
7/8	9/6	8/8	10/7	9/8	11/7	10/8	12/7	11/8	1/7	12/8	2/6
7/9	9/7	8/9	10/8	9/9	11/8	10/9	12/8	11/9	1/8	12/9	2/7
7/10	9/8	8/10	10/9	9/10	11/9	10/10	12/9	11/10	1/9	12/10	2/8
7/11	9/9	8/11	10/10	9/11	11/10	10/11	12/10	11/11	1/10	12/11	2/9
7/12	9/10	8/12	10/11	9/12	11/11	10/12	12/11	11/12	1/11	12/12	2/10
7/13	9/11	8/13	10/12	9/13	11/12	10/13	12/12	11/13	1/12	12/13	2/11
7/14	9/12	8/14	10/13	9/14	11/13	10/14	12/13	11/14	1/13	12/14	2/12
7/15	9/13	8/15	10/14	9/15	11/14	10/15	12/14	11/15	1/14	12/15	2/13
7/16	9/14	8/16	10/15	9/16	11/15	10/16	12/15	11/16	1/15	12/16	2/14
7/17	9/15	8/17	10/16	9/17	11/16	10/17	12/16	11/17	1/16	12/17	2/15
7/18	9/16	8/18	10/17	9/18	11/17	10/18	12/17	11/18	1/17	12/18	2/16
7/19	9/17	8/19	10/18	9/19	11/18	10/19	12/18	11/19	1/18	12/19	2/17
7/20	9/18	8/20	10/19	9/20	11/19	10/20	12/19	11/20	1/19	12/20	2/18
7/21	9/19	8/21	10/20	9/21	11/20	10/21	12/20	11/21	1/20	12/21	2/19
7/22	9/20	8/22	10/21	9/22	11/21	10/22	12/21	11/22	1/21	12/22	2/20
7/23	9/21	8/23	10/22	9/23	11/22	10/23	12/22	11/23	1/22	12/23	2/21
7/24	9/22	8/24	10/23	9/24	11/23	10/24	12/23	11/24	1/23	12/24	2/22
7/25	9/23	8/25	10/24	9/25	11/24	10/25	12/24	11/25	1/24	12/25	2/23
7/26	9/24	8/26	10/25	9/26	11/25	10/26	12/25	11/26	1/25	12/26	2/24
7/27	9/25	8/27	10/26	9/27	11/26	10/27	12/26	11/27	1/26	12/27	2/25
7/28	9/26	8/28	10/27	9/28	11/27	10/28	12/27	11/28	1/27	12/28	2/26
7/29	9/27	8/29	10/28	9/29	11/28	10/29	12/28	11/29	1/28	12/29	2/27
7/30	9/28	8/30	10/29	9/30	11/29	10/30	12/29	11/30	1/29	12/30	2/28
7/31	9/29	8/31	10/30			10/31	12/30			12/31	3/1



## REGISTER PUBLISHING DEADLINES

The Secretary of State's Office publishes the Register weekly. There is a three-week turnaround period between a deadline date and the publication date of the Register. The weekly deadline dates and issue dates are shown below. Council meetings and Register deadlines do not correlate. Also listed are the earliest dates on which an oral proceeding can be held on proposed rulemakings or proposed delegation agreements following publication of the notice in the Register.

Deadline Date (paper only) Friday, 5:00 p.m.	Register Publication Date	Oral Proceeding may be scheduled on or after
March 3, 2017	March 24, 2017	April 24, 2017
March 10, 2017	March 31, 2017	May 1, 2017
March 17, 2017	April 7, 2017	May 8, 2017
March 24, 2017	April 14, 2017	May 15, 2017
March 31, 2017	April 21, 2017	May 22, 2017
April 7, 2017	April 28, 2017	May 30, 2017
April 14, 2017	May 5, 2017	June 5, 2017
April 21, 2017	May 12, 2017	June 12, 2017
April 28, 2017	May 19, 2017	June 19, 2017
May 5, 2017	May 26, 2017	June 26, 2017
May 12, 2017	June 2, 2017	July 3, 2017
May 19, 2017	June 9, 2017	July 10, 2017
May 26, 2017	June 16, 2017	July 17, 2017
June 2, 2017	June 23, 2017	July 24, 2017
June 9, 2017	June 30, 2017	July 31, 2017
June 16, 2017	July 7, 2017	August 7, 2017
June 23, 2017	July 14, 2014	August 14, 2017
June 30, 2017	July 21, 2017	August 21, 2017
July 7, 2017	July 28, 2017	August 28 2017
July 14, 2014	August 4, 2017	September 5, 2017
July 21, 2017	August 11, 2017	September 11, 2017
July 28, 2017	August 18, 2017	September 18, 2017
August 4, 2017	August 25, 2017	September 25, 2017
August 11, 2017	September 1, 2017	October 2, 2017
August 18, 2017	September 8, 2017	October 10, 2017
August 25, 2017	September 15, 2017	October 16, 2017
September 1, 2017	September 22, 2017	October 23, 2017
September 8, 2017	September 29, 2017	October 30, 2017
September 15, 2017	October 6, 2017	November 6, 2017
September 22, 2017	October 13, 2017	November 13, 2017



## GOVERNOR’S REGULATORY REVIEW COUNCIL DEADLINES

The following deadlines apply to all Five-Year-Review Reports and any adopted rule submitted to the Governor’s Regulatory Review Council. Council meetings and *Register* deadlines do not correlate. We publish these deadlines as a courtesy.

All rules and Five-Year Review Reports are due in the Council office by 5 p.m. of the deadline date. The Council’s office is located at 100 N. 15th Ave., Suite 402, Phoenix, AZ 85007. For more information, call (602) 542-2058 or visit [www.grrc.state.az.us](http://www.grrc.state.az.us).

### GOVERNOR’S REGULATORY REVIEW COUNCIL DEADLINES FOR 2017

[M16-300]

DEADLINE FOR PLACEMENT ON AGENDA	FINAL MATERIALS SUBMITTED TO COUNCIL	DATE OF COUNCIL STUDY SESSION	DATE OF COUNCIL MEETING
Tuesday November 22, 2016	Tuesday December 20, 2016	Wednesday December 28, 2016	Wednesday January 4, 2017
Tuesday December 27, 2016	Tuesday January 24, 2017	Tuesday January 31, 2017	Tuesday February 7, 2017
Tuesday January 24, 2017	Tuesday February 21, 2017	Tuesday February 28, 2017	Tuesday March 7, 2017
Tuesday February 21, 2017	Tuesday March 21, 2017	Tuesday March 28, 2017	Tuesday April 4, 2017
Tuesday March 21, 2017	Tuesday April 18, 2017	Tuesday April 25, 2017	Tuesday May 2, 2017
Tuesday April 25, 2017	Tuesday May 23, 2017	Wednesday May 31, 2017	Tuesday June 6, 2017
Tuesday May 23, 2017	Tuesday June 20, 2017	Tuesday June 27, 2017	Thursday July 6, 2017
Tuesday June 20, 2017	Tuesday July 18, 2017	Tuesday July 25, 2017	Tuesday August 1, 2017
Tuesday July 25, 2017	Tuesday August 22, 2017	Tuesday August 29, 2017	Wednesday September 6, 2017
Tuesday August 22, 2017	Tuesday September 19, 2017	Tuesday September 26, 2017	Tuesday October 3, 2017
Tuesday September 26, 2017	Tuesday October 24, 2017	Tuesday October 31, 2017	Tuesday November 7, 2017
Tuesday October 24, 2017	Tuesday November 21, 2017	Tuesday November 28, 2017	Tuesday December 5, 2017
Tuesday November 21, 2017	Tuesday December 19, 2017	Wednesday December 27, 2017	Wednesday January 3, 2018

\*Materials must be submitted by **5 P.M.** on dates listed as a deadline for placement on a particular agenda. Placement on a particular agenda is not guaranteed.