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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Rules can be: made (all new text); amended (rules on file, changing text); repealed (removing text); or renumbered (moving rules to a different Section number).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 New rules in this publication (whether proposed or made) are denoted with underlining; repealed text is stricken.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 page.
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

START HERE

APA, statute or ballot proposition is passed. It gives an agency authority to make rules.

It may give an agency an exemption to the process or portions thereof.

Agency opens a docket.

Agency files a Notice of Rulemaking Docket Opening; it is published in the Register. Often an agency will file the docket with the proposed rulemaking.

Agency drafts proposed rule and Economic Impact Statement (EIS); informal public review/comment.


Notice of meetings may be published in Register or included in Preamble of Proposed Rulemaking.

Agency opens comment period.

Agency decides not to proceed and does not file final rule with G.R.R.C. within one year after proposed rule is published. A.R.S. § 41-1021(A)(4).

Agency decides not to proceed and files Notice of Termination of Rulemaking for publication in Register. A.R.S. § 41-1021(A)(2).


Oral proceeding and close of record. Comment period must last at least 30 days after publication of notice. Oral proceeding (hearing) is held no sooner than 30 days after publication of notice of hearing.

Agency decides not to proceed; files Notice of Termination of Rulemaking. May open a new Docket.

Substantial change?

If no change then

Rule must be submitted for review or terminated within 120 days after the close of the record.

A final rulemaking package is submitted to G.R.R.C. or A.G. for review. Contains final preamble, rules, and Economic Impact Statement.

G.R.R.C. has 90 days to review and approve or return the rule package, in whole or in part; A.G. has 60 days.

After approval by G.R.R.C. or A.G., the rule becomes effective 60 days after filing with the Secretary of State (unless otherwise indicated).

Final rule is published in the Register and the quarterly Code Supplement.
Definitions


Administrative Procedure Act (APA): A.R.S. Title 41, Chapter 6, Articles 1 through 10. Available online at www.azsos.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.

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.


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 Federal 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 Federal 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.

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

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.
NOTICE OF PROPOSED RULEMAKING

TITLE 4. PROFESSIONS AND OCCUPATIONS
CHAPTER 33. BOARD OF EXAMINERS FOR NURSING CARE INSTITUTION ADMINISTRATORS AND ASSISTED LIVING FACILITY MANAGERS

PREAMBLE

1. Article, Part, or Section Affected (as applicable)  Rulemaking Action
   R4-33-101  Amend
   R4-33-103  Amend
   Table 1  Amend
   R4-33-104  Amend
   R4-33-201  Amend
   R4-33-202  Amend
   R4-33-204  Amend
   R4-33-206  Amend
   R4-33-301  Amend
   R4-33-701  Amend
   R4-33-702  Amend
   R4-33-703  Amend
   R4-33-703.1  New Section
   R4-33-704  Amend
   R4-33-704.1  New Section
   R4-33-705  Amend
   R4-33-705.1  New Section
   R4-33-706  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. § 36-446.03(A)
   Implementing statute: A.R.S. §§ 36-446 and 36-446.03

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. 983, April 28, 2017

4. The agency's contact person who can answer questions about the rulemaking:
   Name: Allen Imig, Executive Director
   Address: Board of Examiners for Nursing Care Administrators and Assisted Living Facility Managers
            1740 W. Adams St., Suite 2490
            Phoenix, AZ 85007
   Telephone: (602) 364-2273
   Fax: (602) 542-8316
   E-mail: allen.imig@nciabd.state.az.us
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 Board is making changes to Article 2 that will increase the number of individuals qualified for licensure and make it easier for licensed administrators in other states to obtain licensure in Arizona.

The Board is amending Article 7 to:
• Reduce the number of hours in the required curriculum of an assistant living facility caregiver training program
• Increase the percentage of classroom hours in an assistant living facility caregiver training program that may be provided by distance learning
• Increase the percentage of curriculum hours in an assistant living facility caregiver training program that are required to involve skills training
• Make it easier for certified nursing assistants, licensed nursing assistants, certified medication assistants, and trained direct-care workers to become qualified as a caregiver, and
• Establish a first-time student examination pass rate for owners of assistant living facility caregiver training programs to achieve.

The Board is also making corrections identified as needed in a five-year-review report approved by the Council on March 7, 2017. An exemption from EO2016-01 was provided by Mara Mellstrom, Policy Advisor in the Governor’s Office, in an e-mail dated January 4, 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 Board does not intend to review or rely on a study in its evaluation of or justification for any rule in 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:
The rulemaking will have positive economic benefits for:
• Individuals who qualify for licensure by reciprocity in Arizona
• Certified nursing assistants, licensed nursing assistants, certified medication assistants, and trained direct-care workers wanting to become qualified as a caregiver in an assisted living facility
• Managers of assisted living facilities who will find it easier to have employed certified nursing assistants, licensed nursing assistants, and trained direct-care workers qualify as caregivers
• Health professionals who will have additional opportunities as instructors in medication management training programs
• Owners of assisted living facility caregiver training programs that will be able to reduce the number of hours in the training program curriculum and increase the percentage of hours provided by distance learning

The rulemaking may result in certified nursing assistants and licensed nursing assistants electing to participate in a medication management training program only, which is 16 hours of training, rather than an assisted living facility caregiver training program, which is 62 hours of training. This may negatively impact the business of owners of assisted living facility caregiver training programs. However, the rulemaking provides an opportunity for owners of approved assisted living facility caregiver training programs to obtain approval of a medication management training program at no cost.

Currently, many owners of assisted living facility caregiver training programs offer a reduced-hours training program, as described under R4-33-702, but they charge the same amount for it as for the full training program. With increased competition in reduced-hours training programs, these owners may have to reduce the cost of their reduced-hours training programs which should put downward pressure on training costs for students.

The Board is confident the reduced number of training hours for an assisted living facility caregiver will not negatively impact the quality of care provided because the revised training program continues to cover the same subjects and skills. Additionally, the caregiver student must pass the final examination given by the Board-approved provider. Students such as certified nursing assistants and licensed nursing assistants, who take only the 16 hours of medication management training, are required to pass the same final examination as students who take the entire 62 hours of training.

9. The agency's contact person who can answer questions about the economic, small business, and consumer impact statement:
Name: Allen Imig, Executive Director
Address: Board of Examiners for Nursing Care Administrators and Assisted Living Facility Managers
1740 W. Adams St., Suite 2490
Phoenix, AZ 85007
Telephone: (602) 364-2273
Fax: (602) 542-8316
E-mail: allen.imig@nciabd.state.az.us
Web site: www.aznciaboard.us
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 rules will be held as follows:

Date: Wednesday, May 23, 2018
Time: 9:00 a.m.
Location: 1740 W. Adams St., Board meeting room C
Phoenix, AZ 85007

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:

   None

   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 licenses listed in Table 1 are general permits consistent with A.R.S. § 41-1037 because they are issued to qualified individuals or entities to conduct activities that are substantially similar in nature.

   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:

      There are federal laws such as the Americans with Disabilities Act, OSHA, and employment-related laws that apply to all employers. There is no federal law specifically applicable to assisted living facilities.

   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 4. PROFESSIONS AND OCCUPATIONS
CHAPTER 33. BOARD OF EXAMINERS FOR NURSING CARE INSTITUTION ADMINISTRATORS AND ASSISTED LIVING FACILITY MANAGERS

ARTICLE 1. GENERAL

Section
R4-33-101. Definitions
R4-33-103. Time-frames Time Frames for Licenses, Certifications, and Approvals
Table 1. Time-frames Time Frames (in days)
R4-33-104. Fees

ARTICLE 2. NURSING CARE INSTITUTION ADMINISTRATOR LICENSING

Section
R4-33-201. Requirements for Initial License by Examination
R4-33-202. Requirements for Initial License by Reciprocity
R4-33-204. Initial Application
R4-33-206. Renewal Application

ARTICLE 3. ADMINISTRATOR-IN-TRAINING PROGRAM

Section
R4-33-301. Approval of an AIT Program

ARTICLE 7. ASSISTED LIVING FACILITY CAREGIVER TRAINING PROGRAMS

Section
R4-33-701. Definitions
R4-33-702. Minimum Standards for Assisted Living Facility Caregiver Training Program
R4-33-703. Curriculum for Assisted Living Facility Caregiver Training Program
R4-33-703.1. Minimum Standards and Curriculum for an Assisted Living Facility Caregiver Medication Management Training Program
R4-33-704. Application for Approval of an Assisted Living Facility Caregiver Training Program
R4-33-704.1. Application for Approval of an Assisted Living Facility Caregiver Medication Management Training Program
R4-33-705. Renewal of Approval of an Assisted Living Facility Caregiver Training Program
R4-33-705.1. Renewal of Approval of an Assisted Living Facility Caregiver Medication Management Training Program
R4-33-101. Definitions
The definitions in A.R.S. § 36-446 apply to this Chapter. Additionally, in this Chapter, unless otherwise specified:

- “Accredited” means approved by the North Central Association of Colleges and Secondary Schools, New England Association of Schools and Colleges, Middle States Association of Colleges and Secondary Schools, Northwest Association of Schools and Colleges, Southern Association of Colleges and Schools, or Western Association of Schools and Colleges.
- “ACHCA” means written evidence of completing the Professional Certification Program administered by the American College of Health Care Administrators.
- “Administrator” has the meaning prescribed at A.R.S. § 36-446 and means an individual licensed under this Chapter.
- “Administrator in training” or “AIT” means an individual who is taking an AIT program to be licensed as an administrator for a nursing care institution.
- “AIT program” means a training that the Board approves after determining that the training meets the standards at R4-33-302.
- “Application package” means the forms, documents, and fees that the Board requires an applicant to submit or have submitted on the applicant’s behalf.
- “Arizona examination” means a measure of an applicant’s knowledge of Arizona statutes and rules regarding nursing care institution administration or assisted living facility management.
- “Biennial period” means July 1 of an even-numbered year through June 30 of the next even-numbered year for a manager.
- “Contact hour” means an hour during which an administrator or manager is physically present at a continuing education or a manager is physically present at a required initial training.
- “Continuing education” means a planned educational course or program that the Board approves under R4-33-502.
- “Good standing” means that an individual licensed by the state is not subject to any disciplinary action or consent order, and not currently under investigation for alleged unprofessional conduct.
- “Health care institution” means every place, institution, building or agency, whether organized for profit or not, which provides facilities with medical services, nursing services, health screening services, other health-related services, supervisory care services, personal care services or directed care services and includes home health agencies as defined in A.R.S. § 36-151 and hospice services agencies. A.R.S. § 36-401.
- “Manager” means an assisted living facility manager, as defined at A.R.S. § 36-446, who is certified under this Chapter.
- “NAB” means the National Association of Board of Examiners for Nursing Home Administrators Long Term Care Administrat or Boards.
- “Party” has the same meaning as prescribed in A.R.S. § 41-1001.
- “Preceptor” means a practicing nursing care institution administrator who helps to develop a new professional in the field of long-term care administration by tutoring the new professional.
- “Qualified instructor” means a person who meets one or more of the following criteria:
  - A registered nurse, licensed under A.R.S. Title 32, Chapter 15;
  - An instructor employed by an accredited college or university, or health care institution to teach a health-care related course; or
  - A person or entity that has sufficient education and training to be qualified to teach a health-care related course.
- “Work experience in a health-related field” means employment in a health care institution or in the professional fields of medicine, nursing, social work, gerontology, or other closely related field.

R4-33-103. Time Frames
A. For each type of license, certification, or approval issued by the Board, the overall time frame described in A.R.S. § 41-1072(1) is listed in Table 1.
B. For each type of license, certification, or approval issued by the Board, the administrative completeness review time frame described in A.R.S. § 41-1072(1) is listed in Table 1 and begins on the date the Board receives an application package.
1. If an application package is not administratively complete, the Board shall send a deficiency notice to the applicant that specifies each piece of information or document needed to complete the application package. Within the time provided in Table 1 for response to a deficiency notice, beginning on the mailing date of the deficiency notice, the applicant shall submit to the Board the missing information or document specified in the deficiency notice. The time frame for the Board to finish the administrative completeness review is suspended from the date the Board mails the deficiency notice to the applicant until the date the Board receives the missing information or document.
2. If an application package is administratively complete, the Board shall send a written notice of administrative completeness to the applicant.
3. If an application package is not completed within the time provided to respond to the deficiency notice, the Board shall send a written notice to the applicant informing the applicant that the application is deemed withdrawn.
C. For each type of license, certification, or approval issued by the Board, the substantive review time frame described in A.R.S. § 41-1072(3) is listed in Table 1 and begins on the date the Board sends written notice of administrative completeness to the applicant.

1. During the substantive review time frame, the Board may make one comprehensive written request for additional information. Within the time provided in Table 1 for response to a comprehensive written request for additional information, beginning on the mailing date of the comprehensive written request for additional information, the applicant shall submit to the Board the requested additional information. The time frame for the Board to finish the substantive review is suspended from the date the Board mails the comprehensive written request for additional information to the applicant until the Board receives the requested additional information.

2. The Board shall issue a written notice informing the applicant that the application is deemed withdrawn if the applicant does not submit the requested additional information within the time provided in Table 1.

D. Within the overall time frame listed in Table 1, the Board shall:

1. Deny a license, certificate, or approval to an applicant if the Board determines that the applicant does not meet all of the substantive criteria required by statute and this Chapter; or

2. Grant a license, certificate, or approval to an applicant if the Board determines that the applicant meets all of the substantive criteria required by statute and this Chapter.

E. If the Board denies a license, certificate, or approval under subsection (D)(1), the Board shall provide a written notice of denial to the applicant that explains:

1. The reason for the denial, with citations to supporting statutes or rules;

2. The applicant’s right to seek a fair hearing to challenge the denial; and

3. The time for appealing the denial.

F. In computing any period of time prescribed in this Section, the day of the act, event, or default after which the designated period of time begins to run is not included. The last day of the period is included unless it is Saturday, Sunday, or a state holiday, in which event the period runs until the end of the next day that is not Saturday, Sunday, or a state holiday. The computation includes intermediate Saturdays, Sundays, and state holidays. The time begins on the date of personal service, date shown as received on a certified mail receipt, or postmark date.

Table 1 starts at the top of the next page
Table 1. Time-frames (in days)

<table>
<thead>
<tr>
<th>Type of License</th>
<th>Overall Time-frame</th>
<th>Administrative Review Time-frame</th>
<th>Time to Respond to Deficiency Notice</th>
<th>Substantive Review Time-frame</th>
<th>Time to Respond to Request for Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial License</td>
<td>R4-33-201 and R4-33-202 A.R.S. §§ 36-446.04(A) and 36-446.05</td>
<td>135</td>
<td>30</td>
<td>90</td>
<td>105</td>
</tr>
<tr>
<td>Renewal of License</td>
<td>R4-33-206 A.R.S. § 36-446.07(E)</td>
<td>75</td>
<td>30</td>
<td>15</td>
<td>45</td>
</tr>
<tr>
<td>Temporary License</td>
<td>R4-33-203 A.R.S. § 36-446.06</td>
<td>135</td>
<td>30</td>
<td>90</td>
<td>105</td>
</tr>
<tr>
<td>Continuing Education Program Approval</td>
<td>R4-33-502 A.R.S. § 36-446.07(E) and (F)</td>
<td>60</td>
<td>15</td>
<td>30</td>
<td>45</td>
</tr>
<tr>
<td>Administrator-in-Training Program Approval</td>
<td>R4-33-301 A.R.S. § 36-446.04</td>
<td>60</td>
<td>15</td>
<td>30</td>
<td>45</td>
</tr>
<tr>
<td>Initial Certification</td>
<td>R4-33-401 A.R.S. § 36-446.04(B)</td>
<td>135</td>
<td>30</td>
<td>90</td>
<td>105</td>
</tr>
<tr>
<td>Renewal of Certification</td>
<td>R4-33-405 A.R.S. § 36-446.07(F)</td>
<td>75</td>
<td>30</td>
<td>15</td>
<td>45</td>
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<tr>
<td>Temporary Certification</td>
<td>R4-33-402 A.R.S. § 36-446.06</td>
<td>135</td>
<td>30</td>
<td>90</td>
<td>105</td>
</tr>
<tr>
<td>Initial Approval of an Assisted Living Facility Manager or Caregiver Training Program</td>
<td>R4-33-604, R4-33-704, R4-33-704.1 A.R.S. § 36-446.03(O)</td>
<td>120</td>
<td>60</td>
<td>60</td>
<td>60</td>
</tr>
<tr>
<td>Renewal Approval of an Assisted Living Facility Manager or Caregiver Training Program</td>
<td>R4-33-605, R4-33-705, R4-33-705.1 A.R.S. § 36-446.03(O)</td>
<td>120</td>
<td>60</td>
<td>30</td>
<td>60</td>
</tr>
</tbody>
</table>

R4-33-104. Fees

A. Under the authority provided at A.R.S. § 36-446.12(A), the Board establishes and shall collect the following fees related to nursing care institution administrators. The fees are nonrefundable unless A.R.S. § 41-1077 applies:
1. Initial application, $150;
2. Arizona examination, $500;
3. Re-administer Arizona examination, $150;
4. Issuance of a license, $400 or $17 for each month remaining in the biennial period, whichever is less;
5. Duplicate license, $75;
6. Biennial active license renewal, $400;
7. Biennial inactive license renewal, $200;
8. Late renewal, $100;
9. Temporary license, $300;
10. Certify licensure status, $15;
11. Review sponsorship of a continuing education, $10 per credit hour;
12. Review a licensed administrator’s request for continuing education credit, $5 per credit hour.

B. Under the authority provided at A.R.S. § 36-446.03(B), the Board establishes and shall collect the following fees related to assisted living facility managers. The fees are nonrefundable unless A.R.S. § 41-1077 applies:
1. Initial application, $150;
2. Arizona examination, $150;
3. Re-administer Arizona examination, $150;
4. Issuance of a certificate, $150 or $7 for each month remaining in the biennial period, whichever is less;
5. Duplicate certificate, $75;
6. Biennial active certificate renewal, $150;
7. Biennial inactive certificate renewal, $100;
8. Late renewal, $75;
9. Temporary certificate, $100;
10. Review sponsorship of a continuing education, $10 per credit hour;
11. Review a certified manager’s request for continuing education credit, $5 per credit hour.

C. Under the authority provided at A.R.S. § 36-446.03(B), the Board establishes and shall collect the following fees related to approval of an assisted living facility manager training program. The fees are nonrefundable unless A.R.S. § 41-1077 applies:
   1. Initial approval, $1,000; and
   2. Renewal approval, $600.

D. Under the authority provided at A.R.S. § 36-446.03(B), the Board establishes and shall collect the following fees related to approval of an assisted living facility caregiver training program. The fees are nonrefundable unless A.R.S. § 41-1077 applies:
   1. Initial approval, $1,500; and
   2. Renewal approval, $1,300.

E. Under the authority provided at A.R.S. § 36-446.03(B), the Board establishes and shall collect the following fees related to approval of an assisted living facility caregiver medication management training program. The fees are nonrefundable unless A.R.S. § 41-1077 applies:
   1. Initial approval, $300; and
   2. Renewal approval, $250.

The Board shall ensure that fees established under this subsection are not increased by more than 25 percent above the amounts previously prescribed by the Board.

ARTICLE 2. NURSING CARE INSTITUTION ADMINISTRATOR LICENSING

R4-33-201. Requirements for Initial License by Examination
To be eligible to receive an initial license by examination as a nursing care institution administrator, an individual shall:
1. Education and training.
   a. Hold a minimum of a baccalaureate degree from an accredited college or university and successfully complete an AIT program;
   b. Hold a minimum of a master’s degree in either a health-related field or business administration from an accredited college or university; or
   c. Hold a minimum of an associate of arts degree in nursing from an accredited college or university and:
      i. Be currently licensed as a registered nurse under A.R.S. § 32-1632,
      ii. Have worked as a registered nurse for five of the last seven years, and
      iii. Successfully complete an AIT program.
2. Examination.
   a. Obtain the scaled passing scores on both the NAB core of knowledge and line of service examinations or qualify with NAB as a Health Services Executive examination;
   b. Obtain a score of at least 80 percent on the Arizona examination;
3. Fingerprint clearance card. Have a valid fingerprint clearance card issued under A.R.S. Title 41, Chapter 12, Article 3.1; and
4. Application. Submit all applicable information required under R4-33-204.

R4-33-202. Requirements for Initial License by Reciprocity
To be eligible for an initial license by reciprocity as a nursing care institution administrator, an individual shall:
1. Substantially equivalent educational requirement.
   a. Meet the education and training requirement described in R4-33-201(1) and hold a minimum of a baccalaureate degree from an accredited college or university;
   b. Hold ACHCA certification;
2. Substantially equivalent examination requirement.
   a. Hold a valid and current license as a nursing care institution administrator issued by a state or territory, which was obtained by passing the NAB examination;
   b. Have evidence of qualification by NAB as a Health Services Executive and
   c. Obtain a score of at least 80 percent on the Arizona examination;
3. Be employed full-time as a nursing care institution administrator of record for the last two years in a state or territory with a licensing authority;
4. Never had a nursing care administrator license suspended, revoked, or otherwise restricted by any state or territory;
5. Fingerprint clearance card. Have a valid fingerprint clearance card issued under A.R.S. Title 41, Chapter 12, Article 3.1; and
6. Application.
   a. Submit all applicable information required under R4-33-204,
   b. Submit evidence of being employed full-time as a nursing care institution administrator of record for the last two years in a state or territory with a licensing authority;
   c. Have submitted a copy of the valid and current license issued by a state or territory, and
   d. Have submitted directly to the Board a certified copy of the valid and current license issued by a state or territory, and
R4-33-204. Initial Application

A. An individual who desires to be licensed as a nursing care institution administrator shall submit the following information to the Board on an application form, which is available from the Board:

1. Full name of the applicant;
2. Other names that the applicant has used;
3. Mailing address of the applicant;
4. E-mail address of the applicant;
5. Home, work, and mobile telephone numbers of the applicant;
6. Applicant’s date and place of birth;
7. Applicant’s Social Security number;
8. Address of every residence at which the applicant has lived in the last five years;
9. Name and address of every accredited college or university attended, dates of attendance, date of graduation, and degree or certificate received;
10. Information regarding professional licenses or certifications currently or previously held by the applicant, including:
   a. Name of issuing agency;
   b. License or certificate number;
   c. Issuing jurisdiction;
   d. Date on which the license or certificate was first issued;
   e. Whether the license or certificate is current; and
   f. Whether the license or certificate is in good standing and if not, an explanation;

II. Information regarding the applicant’s employment record for the last five years, including:

11. Name, address, and telephone number of each employer;
12. Title of position held by the applicant;
13. Name of applicant’s supervisor;
14. Dates of employment; and
15. Reason for employment termination;
16. Whether the applicant was ever denied a professional license or certificate and if so, the kind of license or certificate denied, licensing authority making the denial, and date; and
17. Whether the applicant ever voluntarily surrendered a professional license or certificate and if so, the kind of license or certificate surrendered, licensing authority, date, and reason for the surrender;
18. Whether the applicant ever allowed a professional license or certificate to lapse and if so, the kind of license or certificate that lapsed, licensing authority, date, reason for lapse, and whether the license or certificate was reinstated;
19. Whether the applicant ever had a limitation imposed on a professional license or certificate and if so, the kind of license or certificate limited, licensing authority, date, nature of limitation, reason for limitation, and whether the limitation was removed;
20. Whether the applicant ever had a professional license or certificate suspended or revoked and if so, the kind of license or certificate suspended or revoked, licensing authority, date, and reason for the suspension or revocation;
21. Whether the applicant ever was subject to disciplinary action with regard to a professional license or certificate and if so, the kind of license or certificate involved, licensing authority, date, and reason for and nature of the disciplinary action;
22. Whether any unresolved complaint against the applicant is pending with a licensing authority, professional association, health care facility, or nursing care institution and if so, the nature of and where the complaint is pending;
23. Whether the applicant ever had a professional license or certificate suspended or revoked, licensing authority, date, and reason for the suspension or revocation;
24. Whether the applicant ever was pardoned from or had expunged the record of a felony conviction and if so, the nature of the offense, jurisdiction, and date of pardon or expunging.

B. In addition to the application form required under subsection (A), an applicant shall submit or have the following submitted directly to the Board on the applicant’s behalf:

1. Official transcript submitted directly to the Board by each accredited college or university attended by the applicant;
2. Verifcation of license that is signed, authenticated by seal or notarization, and submitted directly to the Board by each agency that ever issued a professional license to the applicant;
3. “Character Certification” form submitted directly to the Board by two individuals who have known the applicant for at least three years and are not related to, employed by, or employing the applicant; and
4. If the applicant is certified by ACHCA, verification of certification submitted directly to the Board by ACHCA.

C. In addition to complying with subsections (A) and (B), an applicant shall submit:

1. If the applicant completed an AIT program, a copy of documents from the appropriate court showing the disposition of each charge;
2. For every felony or misdemeanor charge listed under subsection (A)(16) (A)(19), a copy of documents from the appropriate court showing whether the applicant met all judicially imposed sentencing terms;
3. For every felony or misdemeanor conviction listed under subsection (A)(18), a copy of documents from the appropriate court showing the disposition of each charge;
4. Fingerprint clearance card:
   a. Photocopy of the front and back of the applicant’s fingerprint clearance card,
   b. Proof of submission of an application for a fingerprint clearance card, or
   c. If denied a fingerprint clearance card, proof that the applicant qualifies for a good-cause exception hearing under A.R.S. § 41-619.55.
R4-33-206. Renewal Application

A. The Board shall provide a licensee with notice of the need for license renewal. Failure to receive notice of the need for license renewal does not excuse a licensee’s failure to renew timely.

B. An administrator license expires at midnight on June 30 of each even-numbered year.

C. To renew an administrator license, the licensee shall submit the following information to the Board, on or before June 30, on a renewal application, which is available from the Board:

1. Current address;
2. Current e-mail address;
3. Current home and business telephone numbers;
4. Whether within the last 24 months the licensee was convicted of or pled guilty or no contest to a criminal offense, other than a minor traffic violation, in any court and if so, attach a copy of the original arrest record and final court judgment;
5. Whether within the last 24 months the licensee was denied a professional license or had a professional license revoked, suspended, placed on probation, limited, or restricted in any way by a state or federal regulatory authority and if so, the kind of license, license number, issuing authority, nature of the regulatory action, and date;
6. An affirmation that the number of hours of continuing education required under R4-33-501 has been completed; and
7. The licensee’s dated and notarized signature affirming that the information provided is true and complete.

D. In addition to the renewal application required under subsection (C), a licensee shall submit:

1. A photocopy of the front and back of the licensee’s fingerprint clearance card;
2. A completed Arizona Statement of Citizenship and Alien Status for State Public Benefits, which is a form available from the Board;
3. The individual’s dated and notarized affidavit affirming that the information provided is true and complete;
4. A description of the procedure required under R4-33-302(2)(d) to measure the success of an AIT and a copy of any materials used to measure the success of an AIT;
5. A copy of the AIT program monitoring procedure required under R4-33-302(3) and any forms that are used in the monitoring;
6. A copy of the certificate of completion required under R4-33-302(2)(e);
7. A copy of the policy and procedures manual required under R4-33-302(4)(d), and
8. A completed Arizona Statement of Citizenship and Alien Status for State Public Benefits, which is a form available from the Board.

Fees required under R4-33-104(A)(1) and (A)(2).

D. If required by the Board under A.R.S. § 36-446.03(D), an applicant shall appear before the Board.

E. When the information required under subsections (A) and (B) through (C) is received and following an appearance before the Board required under subsection (C) (D), the Board shall provide notice regarding whether the applicant may take the licensing examinations required under R4-33-201 or R4-33-202.

F. Because of the time required for the Board to perform an administrative completeness review under R4-33-103, an applicant shall submit the information required under subsections (A) and (B) through (C) is submitted at least 30 days before the applicant expects to take the Arizona examination.

R4-33-301. Approval of an AIT Program

A. The Board approves an AIT internship provided at an educational institution with a NAB-accredited program.

B. The provider of an AIT program that does not meet the standard in subsection (A) may apply to the Board for approval of the AIT program. To apply for approval of an AIT program, the provider of the program shall submit to the Board:

1. A letter on official letterhead providing the following information:
   a. Name, address, e-mail address, and telephone and fax numbers of the provider; and
   b. Name, and telephone number, and e-mail address of an individual who can be contacted regarding the information provided;
2. A description of the procedure required under R4-33-302(2)(d) to measure the success of an AIT and a copy of any materials used to measure the success of an AIT;
3. A copy of the AIT program monitoring procedure required under R4-33-302(3) and any forms that are used in the monitoring;
4. A copy of the certificate of completion required under R4-33-302(2)(e);
5. A detailed outline of the training course required under R4-33-302(4)(d);
6. A copy of the policy and procedures manual required under R4-33-302(5), and
7. The signature of an authorized representative of the provider:
   a. Affirming that the information provided is true and complete, and
   b. Authorizing the Board to monitor the program’s compliance with the standards in R4-33-302.

C. The Board shall approve an AIT program that the Board determines meets the standards in R4-33-302. The Board’s approval of an AIT program is valid for one year if the program remains in compliance with the standards in R4-33-302.

D. To maintain approval of an AIT program, the provider of the AIT program shall, before the approval expires, submit:

1. The information required under subsection (B), or
2. The letter required under subsection (B)(1) and the signature of an authorized representative of the provider affirming that the materials previously submitted under subsections (B)(2) through (B)(6) continue to be true and complete and authorizing the Board to monitor the program’s compliance with the standards in R4-33-302:

ARTICLE 7. ASSISTED LIVING FACILITY CAREGIVER TRAINING PROGRAMS

R4-33-701. Definitions
A. The In addition to the definitions in R4-33-601 apply to this Article, the following definitions apply in this Article:

1. “CMA” means certified medication assistant, an LNA certified by the Arizona Board of Nursing under A.R.S. § 32-1650.02.
2. “CNA” means certified nursing assistant, an individual licensed by the Arizona Board of Nursing under A.R.S. § 32-1645.
3. “DCW” means direct-care worker, an individual who meets the standards and requirements specified in Section 1240(A) of the Arizona Health Care Cost Containment System policy manual.
4. “Distance learning” means the use of technology to teach students who may or may not be physically present in a classroom.
5. “LNA” means licensed nursing assistant, an individual licensed by the Arizona Board of Nursing under A.R.S. § 32-1645.
6. “Skills training” means experiential learning focused on acquiring the ability to provide caregiving services to residents.

R4-33-702. Minimum Standards for Assisted Living Facility Caregiver Training Program
A. Organization and administration. The owner of an assisted living facility caregiver training program shall:

1. Provide the Board with a written description of the training program that includes:
   a. Length of the training program in hours:
      i. Number of hours of classroom instruction,
      ii. Number of hours of skills training, and
      iii. Number of hours of distance learning, and
   b. Educational goals that demonstrate the training program is consistent with state requirements;
2. Develop and adhere to written policies and procedures regarding:
   a. Attendance. Ensure that a student receives at least 444 hours of instruction;
   b. Grading. Require a student to attain at least 75 percent on each theoretical examination or 75 percent on a comprehensive theoretical examination;
   c. Reexamination. Inform students that a reexamination:
      i. Addresses the same competencies examined in the original examination,
      ii. Contains items different from those on the original examination, and
      iii. Is documented in the student’s record;
   d. Student records. Include the following information:
      i. Records maintained,
      ii. Retention period for each record,
      iii. Location of records,
      iv. Documents required under subsections (G)(1) and (G)(2), and
      v. Procedure for accessing records and who is authorized to access records;
   e. Student fees and financial aid, if any;
   f. Withdrawal and dismissal;
   g. Student grievances including a chain of command for disputing a grade;
   h. Admission requirements including any criminal background or drug testing required;
   i. Criteria for training program completion; and
   j. Procedure for documenting that a student has received notice of the fingerprint clearance card requirement before the student is enrolled;
3. Date each policy and procedure developed under subsection (A)(2), review within one year from the date made and every year thereafter, update if necessary, and date the policy or procedure at the time of each review;
4. Provide each student who completes the training program with evidence of completion, within 15 days of completion, which includes the following:
   a. Name of the student;
   b. Name and classroom location of the training program;
   c. Number of classroom, skills training, and distance learning hours in the training program;
   d. Date on which the training program was completed;
   e. Board’s approval number of the training program; and
   f. Signature of the training program owner, administrator, or instructor;
5. Provide the Board, within 15 days of completion, the following information regarding each student who completed the training program:
   a. Student’s name, date of birth, Social Security number, address, and telephone number;
   b. Student’s examination score as provided by a Board-approved provider;
   c. Name and classroom location of the training program;
   d. Number of classroom hours in the training program;
   e. Number of distance learning hours in the training program;
   f. Number of skills training hours in the training program;
   g. Date on which the training program was completed; and
   h. Board’s approval number of the training program; and
6. Execute and maintain under subsections (G)(1) and (G)(2) the following documents for each student:
   a. A skills checklist containing documentation the student achieved competency in the assisted living facility caregiver skills listed in R4-33-703(C),
b. A copy of the current food-handler’s card issued to the student by the county in which the student lives, and
c. An evaluation form containing the student’s responses to questions about the quality of the instructional experiences provided by the training program.

B. Program administrator responsibilities. The owner of an assisted living facility caregiver training program shall ensure that a program administrator performs the following responsibilities:

1. Supervises and evaluates the training program,
2. Uses only instructors who are qualified under subsection (C), and
3. Makes the written policies and procedures required under subsection (A)(2) available to each student on or before the first day of the training program;

C. The owner of an assisted living facility caregiver training program shall ensure that a program instructor is qualified under subsection (C)(1), (C)(2), or (C)(3):

1. Is a certified assisted living facility manager:
   a. Holds an assisted living facility manager certificate that is in good standing and issued under A.R.S. Title 36, Chapter 4;
   b. Has held the assisted living facility manager certificate referenced in subsection (C)(1)(a) for at least two years;
   c. Has not been subject to disciplinary action against the assisted living facility manager certificate during the last two years;
   d. Has at least two years’ experience within the last five years as an assisted living facility manager of record immediately before becoming a training program instructor;

2. Is a licensed medical professional:
   a. Holds a license that is in good standing and issued under A.R.S. Title 32, Chapter 13, 15, 17, or 25;
   b. Has held the medical professional license referenced in subsection (C)(2)(a) for at least two years;
   c. Has not been subject to disciplinary action against the medical professional license during the last two years; and
   d. Has at least two years’ experience within the last five years in management, operation, or training in assisted living immediately before becoming a training program instructor;

3. Other qualified individual:
   a. Holds at least a baccalaureate degree in a health-related field from an accredited college or university;
   b. Has not been subject to disciplinary action against any professional or occupational license or certificate during the last two years; and
   c. Has at least two years’ experience within the last five years in management, operation, or training in assisted living immediately before becoming a training program instructor.

D. The owner of an assisted living facility caregiver training program shall ensure that a program instructor performs the following responsibilities:

1. Plans each learning experience,
2. Accomplishes educational goals of the training program and lesson objectives,
3. Ensures that the grading policy meets the requirement specified in subsection (A)(2)(b),
4. Requires satisfactory performance of all critical elements of each assisted living facility caregiver skill specified under R4-33-703(C),
5. Prevents a student from performing an activity unless the student has received instruction and been found able to perform the activity competently,
6. Is present in the classroom during all instruction,
7. Uses a maximum of 20 hours of distance learning,
8. Supervises health professionals who assist in providing training program instruction, and
9. Ensures that a health professional who assists in providing training program instruction:
   a. Is licensed or certified as a health professional,
   b. Has at least one year of experience in the field of licensure or certification, and
   c. Teaches only a learning activity that is within the scope of practice of the field of licensure or certification.

E. Skill training requirements. The owner of an assisted living facility caregiver training program shall:

1. Provide each student with at least 12 hours of instructor-supervised skills training, and
2. Ensure that each student develops skill proficiency in the subjects listed in R4-33-703(C).

F. Instructional and educational resources. The owner of an assisted living facility caregiver training program shall provide, or provide access to, the following instructional and educational resources adequate to implement the training program for all students and staff:

1. Current reference materials related to the level of the curriculum;
2. Equipment in functional condition for simulating resident care, including:
   a. Patient bed, over-bed table, and nightstand;
   b. Privacy curtain and call bell;
   c. Thermometers, stethoscopes, including a teaching stethoscope, blood-pressure cuff, and balance scale;
   d. Hygiene supplies, elimination equipment, drainage devices, and linens;
   e. Hand-washing equipment and clean gloves; and
   f. Wheelchair, gait belt, walker, anti-embolic hose, and cane;
3. Computer in good working condition;
4. Audio-visual equipment and media; and
5. Designated space that provides a clean, distraction-free, learning environment for accomplishing educational goals of the training program;

G. Records. The owner of an assisted living facility caregiver training program shall:

1. Maintain the following training program records for three years:
   a. Curriculum and course schedule for each student cohort;
b. Results of state-approved written examination and manual skills testing checklist;
c. Evaluation forms completed by students, a summary of the evaluation forms for each student cohort, and measures taken, if any, to improve the training program based on student evaluations; and
d. Copy of all Board reports, applications, or correspondence related to the training program; and

2. Maintain the following student records for three years:
   a. Name, date of birth, and Social Security number;
   b. Completed skills checklist;
   c. Attendance record including a record of any make-up class sessions;
   d. Score on each test, quiz, and examination and, if applicable, whether a test, quiz, or examination was retaken;
   e. Documentation from the program instructor indicating the:
      i. Number of skills training hours completed by the student,
      ii. Student performance during the skills training, and
      iii. Verification of distance learning hours completed by the student; and
   f. Copy of the certificate evidence of completion issued to the student as required under subsection (A)(4);

H. Examination and evaluation requirements for students. The owner of an assisted living facility caregiver training program shall ensure that each student in the training program:

1. Takes an examination that covers each of the subjects listed in R4-33-703(C) and passes each examination using the standard specified in subsection (A)(2)(b);
2. Is evaluated and determined to possess the practical skills listed in R4-33-703(C);
3. Passes, using the standard specified in subsection (A)(2)(b), a final examination approved by the Board and given by a Board-approved provider; and
4. Does not take the final examination referenced in subsection (H)(3) more than two times. If a student fails the final examination referenced in subsection (H)(3) two times, the student is able to obtain evidence of completion only by taking the assisted living facility caregiver training program again;

I. Examination passing standard. The owner of an assisted living facility caregiver training program shall attain an annual first-time passing rate of 70 percent for all students who take the examination specified under subsection (H)(3). The Board may waive this requirement for a program if fewer than 10 students took the examination during the year.

J. Partial waiver of Reduced-hours training program hours. The owner of an assisted living facility caregiver training program may provide a reduced-hours training program for a student who, at the time of admission, is in good standing and a CNA, LNA, or DCW.

1. May waive the following:
   a. Hours of classroom instruction listed in subsections R4-33-703(C)(2) through (C)(4) and (C)(6) through (C)(13), and
   b. Sixteen hours of skills training;
2. Shall provide the following:
   a. Hours of classroom instruction listed in subsections R4-33-703(C)(1) through (C)(14); and
   b. Examination for a CNA, LNA, or DCW in a reduced-hours training program or a CMA complies fully with the examination and evaluation requirements in subsection (H).

R4-33-703. Curriculum for Assisted Living Facility Caregiver Training Program

A. The owner of an assisted living facility caregiver training program shall ensure that the training program consists of at least 404 hours of instruction including:

1. Eighty-eight Fifty hours of classroom instruction, of which a maximum of 26 hours may be provided by distance learning, and
2. Twelve hours of instructor-supervised skills training.
B. The owner of an assisted living facility caregiver training program shall provide a written curriculum plan to each student that includes overall educational goals and for each required subject:
   1. Measurable learner-centered objectives,
   2. Outline of the material to be taught,
   3. Time allotted to each unit of instruction, and
   4. Learning activities or reading assignments.

C. The owner of an assisted living facility caregiver training program shall ensure that the training program includes classroom instruction and skills training regarding each of the following subjects:
   1. Orientation to and overview of the assisted living facility caregiver training program (at least two classroom hours).
   a. Levels of care within an assisted living facility, and
   b. Impact of each level of care on residents;
   2. Legal and ethical issues and resident rights (at least five classroom hours).
      a. Confidentiality (HIPAA);
      b. Ethical principles;
      c. Resident rights specified in R9-10-710;
      d. Abuse, neglect, and exploitation;
      e. Mandatory reporting; and
      f. Do-not-resuscitate order and advanced directives;
   3. Communication and interpersonal skills (at least four classroom hours).
      a. Components of effective communication,
      b. Styles of communication,
      c. Attitude in communication,
      d. Barriers to effective communication:
         i. Culture,
         ii. Language, and
         iii. Physical and mental disabilities, and
      e. Techniques of communication;
   4. Job management skills (at least four classroom hours).
      a. Stress management, and
      b. Time management;
   5. Service plans (at least four classroom hours). Developing, using, and maintaining resident service plans;
   6. Infection control (at least five classroom hours).
      a. Common types of infectious diseases,
      b. Preventing infection,
      c. Controlling infection:
         i. Washing hands,
         ii. Using gloves, and
         iii. Disposing of sharps and other waste;
   7. Nutrition and food preparation (at least six classroom hours).
      a. Basic nutrition;
      b. Menu planning and posting;
      c. Procuring, handling, and storing food safely; and
      d. Special diets;
   8. Fire, safety, and emergency procedures (at least five classroom hours).
      a. Emergency planning,
      b. Medical emergencies,
      c. Environmental emergencies,
      d. Fire safety,
      e. Fire drills and evacuations, and
      f. Fire-code requirements;
   9. Home environment and maintenance (at least five classroom hours).
      a. Housekeeping,
      b. Laundry, and
      c. Physical plant;
   10. Basic caregiver skills (at least eight classroom hours).
      a. Taking vital signs and measuring height and weight;
      b. Maintaining a resident’s environment;
      c. Observing and reporting pain;
      d. Assisting with diagnostic tests;
      e. Providing assistance to residents with drains and tubes;
      f. Recognizing and reporting abnormal changes to a supervisor;
      g. Applying clean bandages;
      h. Providing peri-operative care;
      i. Assisting ambulation of residents including transferring and using assistive devices;
      j. Bathing, caring for skin, and dressing;
      k. Caring for teeth and dentures;
l. Shampooing and caring for hair;
m. Caring for nails;

n. Toileting, caring for perineum, and caring for ostomy;
o. Feeding and hydration including proper feeding techniques and use of assistive devices in feeding;
p. Preventing pressure sores; and
q. Maintaining and treating skin;

11. Mental health and social service needs (at least seven classroom hours).
a. Modifying the caregiver’s behavior in response to resident behavior,
b. Understanding the developmental tasks associated with the aging process,
c. Responding to resident behavior,
d. Promoting resident dignity,
e. Providing culturally sensitive care,
f. Caring for the dying resident, and
g. Interacting with the resident’s family;

12. Care of the cognitively impaired resident (at least eight classroom hours).
a. Anticipating and addressing the needs and behaviors of residents with dementia or Alzheimer’s disease,
b. Communicating with cognitively impaired residents,
c. Understanding the behavior of cognitively impaired residents, and
d. Reducing the effects of cognitive impairment;

13. Skills for basic restorative services (at least five classroom hours).
a. Understanding body mechanics;
b. Assisting resident self-care;
c. Using assistive devices for transferring, walking, eating, and dressing;
d. Assisting with range-of-motion exercises;
e. Providing bowel and bladder training;
f. Assisting with care for and use of prosthetic and orthotic devices; and
g. Facilitating family and group activities; and

14. Medication management (at least 16 classroom hours).
a. Determining whether a resident needs assistance with medication administration and if so, the nature of the assistance;
b. Assisting a resident to self-administer medication;
c. Observing, documenting, and reporting changes in resident condition before and after medication is administered;
d. Knowing the rights of a resident regarding medication administration;
e. Knowing classifications of and responses to medications;
f. Taking, reading, and implementing a physician’s medication and treatment orders;
g. Storing medication properly and securely;
h. Documenting medication and treatment services;
i. Maintaining records of medication and treatment services;
j. Using medication organizers properly;
k. Storing and documenting use of narcotic drugs and controlled substances;
l. Understanding how metabolism and physical conditions affect medication absorption;
m. Knowing the proper administration of all forms of medication;
n. Using drug-reference guides (Physician’s Desk Reference); and
o. Preventing, identifying, documenting, reporting, and responding to medication errors.

D. The owner of an assisted living facility caregiver training program shall ensure that the training program:

1. Provides a student with at least the number of classroom hours specified in subsection (C);
2. Provides no more than 26 of the Subject to the limitations specified, uses distance learning for a maximum of 20 hours only for the classroom hours specified in subsections (C)(1), (C)(4), (C)(5), (C)(7), (C)(8), and through (C)(9), (C)(11) and (C)(12), by distance learning; and
a. Only one of the classroom hours specified in subsection (C)(6) may be taught by distance learning; and
b. Only two of the classroom hours specified in subsection (C)(12) may be taught by distance learning;
3. Provides a student with at least the number of skills training hours specified in subsection (A)(2).

E. The owner of an assisted living facility caregiver training program shall ensure that the training program uses textbooks that are relevant to the subjects being taught and have been published within the last five years.

F. The owner of an assisted living facility caregiver training program shall ensure that any distance learning provided uses materials that are relevant to the subjects being taught and have been produced within the last five years.

R4-33-703.1 Minimum Standards and Curriculum for an Assisted Living Facility Caregiver Medication Management Training Program

A. An assisted living facility caregiver medication management training program may be established by:

1. The owner or manager of an assisted living facility, or
2. The owner of an assisted living facility caregiver training program.

B. A person under subsection (A) may offer an assisted living facility caregiver medication management training program to a CNA or LNA who is in good standing.

C. A person under subsection (A) that offers an assisted living facility caregiver medication management training program to individuals specified under subsection (B) shall ensure the assisted living facility caregiver medication management training program:

1. Consists of at least the 16 classroom hours specified under R4-33-703(C)(14);
2. Is not taught by distance learning;
3. Is taught by a health professional who holds a license in good standing and issued under A.R.S. Title 32, Chapter 13, 15, 17, 18, or 25; and
4. Complies fully with the examination and evaluation requirements specified in R4-33-702(H).

D. In addition to complying with subsection (C), a person under subsection (A) that offers an assisted living facility caregiver medication management training program to individuals specified under subsection (B) shall comply with the following subsections of R4-33-702:
1. (A)(4)(a), (b), and (d) through (f);
2. (A)(5)(a) through (d), (g), and (h);
3. (A)(6);
4. (G)(1)(b) through (d);
5. (G)(2)(a) through (d) and (f);
6. (I) and (J).

R4-33-704. Application for Approval of an Assisted Living Facility Caregiver Training Program
A. The owner of an assisted living facility caregiver training program shall ensure that no training is provided until the program is approved by the Board.
B. To obtain approval of an assisted living facility caregiver training program, the owner of the training program shall submit to the Board an application packet that contains the following:
1. Name, address, telephone number, and e-mail address of the owner;
2. Name, address, telephone and fax numbers, and web site of the training program;
3. Form of business organization under which the training program is operated and a copy of the establishing documents and organizational chart;
4. A statement of whether the training program is based within an assisted living facility or other location;
5. Name, telephone number, e-mail address, and license or certificate number of the program administrator required under R4-33-702(B);
6. Name, telephone number, e-mail address, and certificate/license number of each program instructor and evidence that each program instructor is qualified under R4-33-702(C);
7. A statement of whether the training program is accredited and if so, name of the accrediting body and date of last review;
8. For all assisted living facilities at which the training program will provide instruction:
   a. Name, address, and telephone number of the assisted living facility;
   b. Name, e-mail address, and telephone number of a contact person at the assisted living facility;
   c. License number of the assisted living facility issued by the Department of Health Services;
   d. A statement of whether the license of the assisted living facility is in good standing; and
   e. Date and results of the most recent compliance inspection conducted by the Department of Health Services;
9. Evidence of compliance with R4-33-702 and R4-33-703, including the following:
   a. Written training program description, consistent with R4-33-702(A)(1), and an implementation plan that includes timelines;
   b. Description of classroom facilities, equipment, and instructional tools available, consistent with R4-33-702(F);
   c. Written curriculum, consistent with R4-33-703(C);
   d. Skills checklist used to verify whether a student has acquired the necessary assisted living facility caregiver skills, consistent with R4-33-702(A)(6)(a);
   e. Evaluation form required under R4-33-702(A)(6)(c) to enable students to assess the quality of the instructional experience provided by the training program;
   f. Evidence of completion issued to a student under R4-33-702(A)(4);
   g. Name of textbook used, author, publication date, and publisher;
   h. Name of any distance learning materials used, producer of the material, and date produced; and
   i. Copy of written policies and procedures required under R4-33-702(A)(2);
10. Signature of the owner of the training program; and
11. The fee prescribed under R4-33-104(D)(1).
C. The owner of an assisted living facility caregiver training program shall ensure that the application materials submitted under subsection (B) are printed on only one side of white, letter-sized paper, and are not bound in any manner.
D. After review of the materials submitted under subsection (B), the Board shall schedule an onsite evaluation of the training program and take one of the following actions:
1. If requirements are met, approve the training program for one year; or
2. If requirements are not met, deny approval of the training program.
E. The owner of an assisted living facility caregiver training program that is denied approval by the Board may request a hearing regarding the denial by filing a written request with the Board within 30 days after service of the Board's order denying approval of the training program. The Board shall conduct hearings under A.R.S. Title 41, Chapter 6, Article 10.

R4-33-704.1 Application for Approval of an Assisted Living Facility Caregiver Medication Management Training Program
A. A person described under R4-33-703.1(A) shall ensure no training is provided until the assisted living facility medication management training program is approved by the Board.
B. To obtain approval of an assisted living facility medication management training program, a person described under R4-33-703.1(A) shall submit to the Board an application packet that contains the following:
1. Name, address, telephone number, and e-mail address of the person described under R4-33-703.1(A);
A statement of whether the training program is based within an assisted living facility or other location and address of the location;

Name, telephone number, e-mail address, and license number of each program instructor and evidence each program instructor is qualified under R4-33-703.1(C)(3);

The information required under R4-33-704(B)(8);

The following evidence of compliance with R4-33-703.1(D):

a. Skills checklist used to verify whether a student has acquired the necessary assisted living facility caregiver skills, consistent with R4-33-702(A)(6)(a);

b. Evaluation form required under R4-33-702(A)(6)(c) to enable students to assess the quality of the instructional experience provided by the training program; and

c. Evidence of completion issued to a student under R4-33-702(A)(4);

Signature of the person described under R4-33-703.1(A); and

The fee prescribed under R4-33-104(E)(1) except a person that has an assisted living facility caregiver training program approved under R4-33-704 is not required to pay a fee for approval under this Section.

C. R4-33-704(C) through (E) applies to this Section.

R4-33-705. Renewal of Approval of an Assisted Living Facility Caregiver Training Program

A. The approval of an assisted living facility caregiver training program expires one year from the date of approval. If the approval of an assisted living facility caregiver training program expires, the owner of the training program shall immediately stop all training program activity.

B. To renew approval of an assisted living facility caregiver training program, the owner of the training program shall submit to the Board, no fewer than 60 and no more than 120 days before expiration of the current approval, an application packet that contains the following:

1. Name, address, telephone number, and e-mail address of the owner;
2. Name, address, telephone and fax numbers, and web site of the training program;
3. Name, telephone number, e-mail address, and license number of the program administrator required under R4-33-702(B);
4. Name, telephone number, e-mail address, and license number of each program instructor and evidence that each program instructor is qualified under R4-33-702(C);
5. Written training program description, consistent with R4-33-702(A)(1);
6. Written curriculum, consistent with R4-33-703(C);
7. Since the time the training program was last approved:
   a. Number of student-cohort classes to which training was provided,
   b. Number of students who completed the training program,
   c. Results obtained on the Board-approved written examination and skills examinations checklist for each student, and
   d. Percentage of students who passed the examinations examination on the first attempt;
8. For an assisted living facility at which the training program has started to provide instruction since the training program was last approved, the information required under R4-33-704(B)(8);
9. Evaluation form required under R4-33-702(A)(6)(c) to enable students to assess the quality of the instructional experience provided by the training program;
10. Summary of evaluations for each student cohort, required under R4-33-702(G)(1)(c), and measures taken, if any, to improve the training program based on student evaluations;
11. Evidence of completion issued to a student under R4-33-702(A)(4);
12. Name of textbook used, author, publication date, and publisher;
13. Name of any distance learning materials used, producer of the material, and date produced;
14. Copy of written policies and procedures required under R4-33-702(A)(2);
15. Signature of the owner of the training program; and
16. The fee prescribed under R4-33-104(D)(2).

C. After review of the materials submitted under subsection (B), the Board shall ensure that the training program is evaluated at either an onsite or telephonic meeting. The program owner shall ensure that the program owner, program administrator, and all instructors are available to participate in the evaluation meeting.

D. The Board shall ensure that each training program receives an onsite evaluation at least every four years. An onsite evaluation includes visiting each assisted living facility at which the training program provides instruction.

E. If the Board approves a training program following an onsite evaluation, no deficiencies were identified during the onsite evaluation, and no complaints are filed with the Board, the Board shall evaluate the training program under subsection (C) using a telephonic meeting for at least two years.

F. After conducting the evaluation required under subsection (C), the Board shall:
1. Renew approval of a training program that the Board determines complies with R4-33-702 and R4-33-703, or
2. Issue a notice of deficiency under R4-33-706 to the owner of a training program that the Board determines does not comply with R4-33-702 or R4-33-703.

G. The owner of an assisted living facility training program that is issued a notice of deficiency by the Board under subsection (F)(2) may request a hearing regarding the deficiency notice by filing a written request with the Board within 30 days after service of the Board’s order. The Board shall conduct hearings under A.R.S. Title 41, Chapter 6, Article 10.

R4-33-705.1 Renewal of Approval of an Assisted Living Facility Caregiver Medication Management Training Program

A. The approval of an assisted living facility caregiver medication management training program expires one year from the date of approval. If the approval expires, the person described under R4-33-703.1(A) shall immediately stop all medication management training program activity.
B. To renew approval of an assisted living facility caregiver medication management training program, the person described under R4-33-703.1(A) shall submit to the Board, no fewer than 60 and no more than 120 days before expiration of the current approval, an application packet that contains the following:

1. Name, address, telephone number and e-mail address of the person described under R4-33-703.1(A);
2. Name, telephone number, e-mail address, and license number of each program instructor and evidence each program instructor is qualified under R4-33-703.1(C)(3);
3. The information required under R4-33-705(B)(7) through (11);
4. Signature of the person described under R4-33-703.1(A); and
5. The fee prescribed under R4-33-104(E)(2) except a person that has approval of an assisted living facility caregiver training program renewed under R4-33-705 is not required to pay a fee for approval under this Section.

C. R4-33-705(C) through (G) applies to this Section.

R4-33-706. Notice of Deficiency; Correction Plan; Disciplinary Action; Voluntary Termination

A. Notice of deficiency. If the Board determines that an assisted living facility caregiver or medication management training program does not comply with the requirements in this Article, the Board shall issue a written notice of deficiency to the owner or person described under R4-33-703.1(A) of the training. The Board shall include the following in the notice of deficiency:

1. Description of each deficiency;
2. Citation to the requirement in this Article with which the training program is not in compliance; and
3. The time, to a maximum of three months, allowed by the Board for correction of the deficiencies.

B. Correction plan.

1. Within 10 days after service of a notice of deficiency under subsection (A), the owner or person described under R4-33-703.1(A) of the served training program shall submit to the Board a written plan to correct the identified deficiencies;
2. The Board may conduct onsite or telephonic evaluations during the time for correction to assess progress towards compliance;
3. The owner or person described under R4-33-703.1(A) of a training program implementing a correction plan shall notify the Board when all corrections have been made; and
4. After receiving notice under subsection (B)(3) or after the time provided under subsection (A)(3) has expired, the Board shall conduct an onsite evaluation to determine whether all deficiencies listed in the notice under subsection (A) have been corrected.
   a. If the Board determines that all deficiencies have been corrected, the Board shall renew approval of the training program;
   b. If the Board determines that all deficiencies have not been corrected, the Board shall take disciplinary action under subsection (C).

C. Disciplinary action.

1. Under A.R.S. § 36-446.03(P), the Board shall issue a civil money penalty, suspend or revoke approval of an assisted living facility caregiver or medication management training program, or place the training program on probation if, following a hearing, the Board determines that the owner or the person described under R4-33-703.1(A) of the assisted living facility caregiver training program:
   a. Failed to submit a plan of correction to the Board under R4-33-706(B) within 10 days after service of a notice of deficiency;
   b. Failed to comply with R4-33-702, or R4-33-703, as applicable, within the time set by the Board under R4-33-706(A)(3) for correction of deficiencies;
   c. Failed to comply with a federal or state requirement;
   d. Failed to allow the Board to conduct an evaluation under R4-33-702(J) or R4-33-703.1(D)(6);
   e. Failed to comply with R4-33-702(A) or R4-33-702(K);
   f. Lent or transferred training program approval to another individual or entity or another training program, including one owned by the same owner or person described under R4-33-703.1(A);
   g. Conducted an assisted living facility caregiver or medication management training program before obtaining Board approval;
   h. Conducted an assisted living facility caregiver or medication management training program after expiration of program approval without timely submitting an application for renewal under R4-33-705 or R4-33-705.1, as applicable;
   i. Falsified an application for assisted living facility caregiver or medication management training program approval under R4-33-704, or R4-33-704.1, R4-33-705, or R4-33-705.1;
   j. Violated an order, condition of probation, or stipulation issued by the Board; or
   k. Failed to respond to a complaint filed with the Board.
2. The Board shall conduct hearings under A.R.S. Title 41, Chapter 6, Article 10.
3. The Board shall include in an order suspending or revoking approval of an assisted living facility caregiver or medication management training program the time and circumstances under which the owner or person described under R4-33-703.1(A) of the suspended or revoked training program may apply again under R4-33-704 or R4-33-704.1 for training program approval.

D. Voluntary termination. If the owner or person described under R4-33-703.1(A) of an approved assisted living facility caregiver or medication management training program decides to terminate the training program, the owner or person described under R4-33-703.1(A) shall:
   1. Provide written notice of the planned termination to the Board; and
   2. Ensure that the training program, including the instructors, is maintained according to this Article until the last student is transferred or completes the training program.
NOTICE OF PROPOSED RULEMAKING

TITLE 21. CHILD SAFETY
CHAPTER 9. DEPARTMENT OF CHILD SAFETY
ADOPTION AGENCY LICENSING

[R18-65]

PREAMBLE

1. Article, Part, or Section Affected (as applicable) Rulemaking Action
R21-9-202 New Section
R21-9-207 New Section

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. § 8-453(A)(5)
   Implementing statute: A.R.S. §§ 8-120, 8-121, 8-126, 8-127, 8-129, 8-130, 8-132, 8-134, and 46-141

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: 24 A.A.R. 765, April 6, (in this issue)

4. The agency's contact person who can answer questions about the rulemaking:
   Name: Kathryn Blades, Deputy General Counsel
   Address: Department of Child Safety
            3003 N. Central Ave.
            Phoenix, AZ 85012
   Telephone: (602) 255-2527
   E-mail: Kathryn.blades@azdcs.gov
   Or
   Name: Angie Trevino, Rules Development Specialist
   Telephone: (602) 255-2569
   E-mail: Angelica.Trevino@azdcs.gov
   Web site: https://dcs.az.gov/about/dcs-rules-rulemaking

5. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:
   Chapter 9, Article 2 was made by final exempt rulemaking. A.R.S. § 41-1008(E) states that a fee established under an exempt rule making is effective for two years. A.R.S. § 8-126(4) grants the Department specific authority to charge fees for agency licensing and renewal. The Department charges a fee to provide licensing and licensing renewal for Adoption Agencies. These agencies assist in finding permanent homes for children in foster care. A regular rulemaking is required to re-establish the fees previously made by exempt rulemaking.

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 relevant to the rule.

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:
   The persons directly impacted by this rulemaking are individuals who are applying for an initial license or a renewal of license to operate an Adoption Agency. Re-establishing these rules will not have a significant economic impact for Adoption Agency applicants as the fees will not change from those established under exempt rulemaking. This rulemaking does not propose new or an increase in fees.

9. The agency's contact person who can answer questions about the economic, small business and consumer impact statement:
   Name: Kathryn Blades, Deputy General Counsel
   Address: Department of Child Safety
            3003 N. Central Ave.
            Phoenix, AZ 85012
   Telephone: (602) 255-2527
   E-mail: Kathryn.blades@azdcs.gov
   Or
   Name: Angie Trevino
   Address: Department of Child Safety
            3003 N. Central Ave.
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 does not intend to hold oral proceedings on these rules unless a written request for an oral proceeding is requested within 30-days of the publication of these rules. The Department will accept written comments on these rules for 30 days after the date of this publication. Comments may be submitted by:

- **Email:** PolicyUnit@azdcs.gov
- **Mail:**
  Department of Child Safety
  Family Resources and Policy Unit
  P.O. Box 6030
  Phoenix, AZ 85005

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:**

   - **None**

   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:**

      An individual license is required to operate an adoption agency. Adoption agency licenses are exempt under A.R.S. § 41-1037 and do not require a general 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:**

      42 U.S.C. 671. The rules are not more stringent than federal law.

   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 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:**

   - **Not applicable**

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

   **TITLE 21. CHILD SAFETY**
   **CHAPTER 9. DEPARTMENT OF CHILD SAFETY**
   **ADOPTION AGENCY LICENSING**

   **ARTICLE 2. ADOPTION AGENCY LICENSING REQUIREMENTS**

   Section
   R21-9-202. Adoption Agency License; Initial Application Package; Fee
   R21-9-207. Application for License Renewal; Fee

   **ARTICLE 2. ADOPTION AGENCY LICENSING REQUIREMENTS**

   **R21-9-202. Adoption Agency License; Initial Application Package; Fee**

   A. A person who wants to operate an adoption agency shall initiate the licensing process by completing an application package for an adoption agency license.

   B. A complete application package for an initial adoption agency license shall contain the information and the supporting documentation listed in this subsection:

   1. Identification and background information, including the following information for the adoption agency, facility, and administrators:

   a. Name, address, telephone, and fax numbers for the adoption agency and all offices operated by the adoption agency;

   b. Name, title, business address, telephone and fax numbers, and email address of:

      i. The person who serves as the adoption agency administrator as prescribed in R21-9-211;

      ii. The person who serves as the Social Services Director as prescribed in R21-9-212;

      iii. The person with delegated authority to act when the adoption agency administrator is absent;

      iv. The person in charge of each separate office;

      v. The registered agent, if applicable; and

      vi. Persons holding at least a 10 percent ownership interest in the adoption agency applicant;

   c. The educational qualifications and work history for each person identified in R21-9-214, with that person’s attached resume or employment application;

   d. A list of the members of the adoption agency’s governing body required by R21-9-210, including name, address, position in the adoption agency, term of membership, and any relationship to the adoption agency applicant.
Notices of Proposed Rulemaking

2. Business organization.
   a. An organizational chart for the adoption agency and each separate office, showing administrative structure, lines of authority, and staff.
   b. Business organization documents appropriate to the adoption agency applicant, including:
      i. Articles of incorporation,
      ii. By-laws,
      iii. Articles of organization, or
      iv. Partnership documents, such as the Partnership Agreement;
   c. Annual reports for the preceding three years if the adoption agency has been in existence for three or more years;
   d. For corporations, or limited liability companies, a certificate of good standing from the Arizona Corporation Commission;
   e. A copy of any license or authorization to perform adoption services in a foreign country; and
   f. A consent allowing any out-of-state or foreign licensing authority to release information on the adoption agency applicant to OLR.

3. Staff.
   a. A list of the adoption agency applicant’s paid or unpaid staff, including:
      i. Name,
      ii. Position or title,
      iii. Degrees,
      iv. Certificates,
      v. Licenses held,
      vi. Business address,
      vii. Date of hire,
      viii. Date of submission for fingerprinting and criminal background clearance, and
      ix. If contracted with the Department, a Central Registry check;
   b. Obtain and provide to the Department evidence that all staff, interns, and volunteers have submitted fingerprints and criminal background information as prescribed in A.R.S. § 46-141, R21-9-214, and R21-9-215.

   a. A written, proposed operating budget for startup and a projected or annual budget for the first year of operation;
   b. Verifiable documentation of funds available to pay start-up costs; the funds shall be in the form of cash or written authorization for a line of credit;
   c. Verifiable documentation of funds available to pay operating expenses for the first three months of operations; the funds shall be in the form of cash or written authorization for a line of credit;
   d. Verifiable documentation of financial resources to operate in accordance with the proposed operating budget for the remaining nine months of the licensing year; the resources may include:
      i. Cash,
      ii. Contracts for placement,
      iii. Donations,
      iv. Letters of commitment from financial backers or investors,
      v. Grants, and
      vi. Authorization for a line of credit;
   e. If the adoption agency applicant, the adoption agency administrator, a Board Member, or any adoption agency employee or partner has operated any adoption agency in this state or any other state during the past 10 years, the most recent financial statement and financial audit for that adoption agency, unless the most recent statement or audit is more than 10 years old; and
   f. A certificate of insurance, or letter of commitment from an insurer, showing that the adoption agency applicant has insurance coverage as prescribed in R21-9-223.

5. Program.
   a. Informational, marketing, or advertising material about the adoption agency;
   b. Program description, including:
      i. All adoption services the adoption agency applicant intends to provide;
      ii. The fee the adoption agency applicant will charge for each service;
      iii. The cost to the adoption agency applicant of providing each service;
      iv. The time in the adoption process when the adoption agency applicant will require a client to pay the fee described in R21-9-231;
      v. The anticipated number of clients the adoption agency applicant will serve; and
      vi. The methods the adoption agency applicant will use to recruit birth parents and prospective adoptive parents; and
c. A written explanation of how the adoption agency applicant will provide adoption services, including:
   i. The number and description of staff who will provide the service, and
   ii. Staff training requirements.

6. Documentation, Forms, and Notices. Samples of all documents, forms, and notices, which the adoption agency applicant will use with or provide to a client, including:
   a. Adoption agency application for services;
   b. Adoptive parent certification application;
   c. Fee policy and schedule as prescribed by R21-9-231;
   d. Sample birth parent relinquishment and consent form;
   e. Informational or advertising brochures;
   f. Sample fee agreement;
   g. Sample birth parent agreement letter;
   h. Intake form;
   i. Sample case file;
   j. Court report format; and
   k. Statistical report.

7. Sample Files. A sample of the type of filing format the adoption agency applicant will utilize for personnel files as prescribed in R21-9-216, and client files as prescribed in R21-9-226 and R21-9-227.


9. Physical site and environment.
   a. The floor plan for each office or location designated for conducting private discussions, interviews, and meetings;
   b. A description of the adoption agency applicant’s computer security system and the adoption agency applicant’s confidentiality safeguards; and
   c. Registration and inspection certificates for all vehicles used to transport a client or children.

10. Miscellaneous.
    a. A signed, written statement authorizing OLR to investigate the adoption agency applicant;
    b. The signature, under penalty of perjury, of the adoption agency administrator or authorized person submitting the application, attesting to the truthfulness of the information contained in the application;
    c. The date of application; and
    d. Board or partnership meeting minutes for the past three years if the adoption agency has been in existence for three or more years.

11. Fee. Pay a non-refundable, initial application fee of $400.

   C. An adoption agency that does not have or maintain all or part of the supporting documentation listed in this Section shall so indicate in a written statement filed with the application.

R21-9-207. Application for License Renewal; Fee

A. No earlier than 90 days and no later than 45 days prior to the expiration date of a license, an adoption agency may apply to OLR for license renewal.

B. The renewal application shall be on a Department form containing the information listed in R21-9-202 and R21-9-203, as applicable.

C. The adoption agency shall submit evidence that each current employee has obtained a new fingerprint clearance card every six years following original clearance.

D. An adoption agency shall submit copies of the supporting documents listed in R21-9-202 if the adoption agency has changed, amended, or updated such documents since the adoption agency last renewed its license.

E. With a renewal application, the adoption agency shall also submit a non-refundable renewal fee of $225 and the following documentation:
   1. A current financial statement;
   2. A copy of the adoption agency’s current operating budget and a recent audit report required by R21-9-222 or if applicable, the documentation required by R21-9-222 subsection (C);
   3. Copies of any written complaints the adoption agency has received about its performance during the expiring license year; and
   4. A written description of any changes in program services or locations, or the population served by the adoption agency.
NOTICES OF FINAL RULEMAKING

This section of the Arizona Administrative Register contains Notices of Final Rulemaking. Final rules have been through the regular rulemaking process as defined in the Administrative Procedures Act. These rules were either approved by the Governor’s Regulatory Review Council or the Attorney General’s Office. Certificates of Approval are on file with the Office.

The final published notice includes a preamble and text of the rules as filed by the agency. Economic Impact Statements are not published.

The Office of the Secretary of State is the filing office and publisher of these rules. Questions about the interpretation of the final rules should be addressed to the agency that promulgated them. Refer to Item #5 to contact the person charged with the rulemaking. The codified version of these rules will be published in the Arizona Administrative Code.

NOTICE OF FINAL RULEMAKING

CHAPTER 5. DEPARTMENT OF REVENUE
TRANSACTION PRIVILEGE AND USE TAX SECTION

PREAMBLE

1. Article, Part, or Section Affected (as applicable)
   R15-5-601

Rulemaking Action: Amend

2. Citations to the agency’s statutory rulemaking authority to include the authorizing statute (general), the implementing statute (specific):
   Authorizing statute: A.R.S. § 42-1005(A)(1)
   Implementing statute: A.R.S. § 42-5006

3. The effective date of the rule:
   May 13, 2018

4. Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the final rulemaking package:
   Notice of Rulemaking Docket Opening: 23 A.A.R. 2953, October 20, 2017
   Notice of Proposed Rulemaking: 23 A.A.R. 2893, October 20, 2017

5. The agency’s contact person who can answer questions about the rulemaking:
   Name: Christie Comanita
   Address: Department of Revenue
             1600 W. Monroe St., Mail Code 1300
             Phoenix, AZ 85007
   Telephone: (602) 716-6791
   Fax: (602) 716-7996
   E-mail: ccomanita@azdor.gov
   Web site: http://www.azdor.gov

6. 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’s justifications and reasons for making or amending the rule addressed by this Notice are as follows:
   A.R.S. § 42-5006 currently requires all new businesses taxable under the Prime Contracting statute (A.R.S. § 42-5075) to have in a bond in place for the first two years after getting a Transaction Privilege Tax (TPT) license. The statute also requires the same type of bond for prime contracting businesses that have a poor history of filing or paying TPT. As prescribed by statute, the Department promulgated R15-5-601 that set the bond amounts based upon the contractor’s business activity. The bond amounts currently are; $2,000, $7,000, $17,000, $22,000, and $102,000. The $102,000 bond is rarely used, and is a financial burden to new businesses in the prime contracting business.

   The rule has been in place since 1984, and was last reviewed in 2016. The proposed amendment to the rule became necessary when the Arizona Registrar of Contractors (AROC) revised their license structure and started issuing contracting licenses without the need of a TPT license. After the changes made by AROC, the Department started receiving TPT license requests from general contractors that require a $102,000 bond that do not intend to work on bridges, tunnels, or elevated highways, but their contracting license allows them to do this type of work. Because most of the businesses that are required to get this type of bond are new businesses, and most of the businesses getting bids on this type of work are established businesses, the requirement for the $102,000 bond is overstated. As a result, the Department is amending the rule to eliminate the highest bond amount and incorporating the activity under a lower bond amount.
7. A reference to any study relevant to the rule that the agency reviewed and either relied on or did not 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

8. 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

9. A summary of the economic, small business, and consumer impact, if applicable:

Data used in preparation of the economic, small business, and consumer impact statement includes figures based on current bond requests received at the time a business applies for a transaction privilege tax license. It is expected that the benefits of the amendment to the rule will be greater than the costs.

10. A description of any changes between the proposed rulemaking, to include supplemental notices, and the final rulemaking:

Technical changes were made at the request of Council staff.

11. An agency's summary of the public or stakeholder comments made about the rulemaking and the agency response to the comments:

Oral proceedings were not held for this rulemaking. The Department did not receive any stakeholder comments about the rulemaking.

12. 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 A.R.S. § 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 the federal law and if so, citation to the statutory authority to exceed the requirements of federal law:

No federal laws directly apply to the rule.

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 such analysis was submitted.

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

Not applicable

14. Whether the rule was previously made, amended or repealed as an emergency rule. If so, cite the notice published in the Register as specified in R1-1-409(A). Also, the agency shall state where the text changed between the emergency and the final rulemaking packages:

Not applicable

15. The full text of the rule follows:

TITLE 15. REVENUE
CHAPTER 5. DEPARTMENT OF REVENUE
TRANSACTION PRIVILEGE AND USE TAX SECTION

ARTICLE 6. PRIME CONTRACTING CLASSIFICATION

Section
R15-5-601. Taxpayer Bonds for Contractors

ARTICLE 6. PRIME CONTRACTING CLASSIFICATION

R15-5-601. Taxpayer Bonds for Contractors

A. For the purpose of this rule:

1. The principal place of business shall be Arizona if the licensee has continuously operated a facility with at least one full-time employee in Arizona for 12 consecutive months preceding the determination.

2. A surety bond shall include a bond issued by a company authorized to execute and write bonds in Arizona as a surety or composed of securities or cash which are deposited with the Department of Revenue.

B. The businesses subject to these bonds are grouped in accordance with the standard industry classifications by average business activity. The business classes and bond amounts are as follows:

1. Two thousand dollars for:
   a. General contractors of residential buildings other than single family;
   b. Operative builders;
   c. Plumbing, air conditioning, and heating, except electric;
   d. Painting, paper hanging;
e. Decorating;
f. Electrical work;
g. Masonry stonework and other stonework;
h. Plastering, drywall, acoustical and insulation work;
i. Terrazzo, tile, marble and mosaic work;
j. Carpentry;
k. Roofing and other floor work;
l. Roofing and sheet metal work;
m. Concrete work;
n. Water well drilling;
o. Structural steel erection;
p. Glass and glazing work;
q. Excavating and foundation work;
r. Wrecking and demolition work;
s. Installation and erection of building equipment;
t. Special trade contractors; and
u. Manufacturers of mobile homes.

2. Seven thousand dollars for:
a. General contractors of single family housing;
b. Water, sewer, pipeline, communication and powerline construction.

3. Seventeen thousand dollars for:
a. General contractors of industrial buildings and warehouses;
b. General contractors of nonresidential buildings other than single family;
c. Highways and street construction except elevated highways.

4. Twenty-two thousand dollars for:
a. Heavy construction;
b. Bridge construction;
c. Tunnel construction; and
d. Elevated highway construction.

5. One hundred two thousand dollars for bridge, tunnel and elevated highway construction.

C. Except as provided in subsection (D) of this rule, any applicant whose principal place of business is outside Arizona or who has conducted business in Arizona for less than one year shall post a bond before the transaction privilege tax license shall be issued.

D. Any taxpayer subject to bonding requirements may submit a written request to the Director of the Department of Revenue for an exemption from the bond. The exemption request shall provide at least one of the following:

1. Any taxpayer who has been actively engaged in business for at least two years immediately preceding the exemption request may submit statements from an authorized state employee from each state in which the business has been licensed in the last two years verifying that the taxpayer has, for at least two years immediately preceding the date of the statement, made timely payment of all sales taxes and other transaction privilege taxes incurred.
2. Two-year reporting history as described above in subsection (D)(1) and an explanation of good cause for late or insufficient payment of the tax;
3. Documentation which verifies that no potential for Arizona tax liability exists;
4. Bond for a previously issued Arizona transaction privilege license that adequately covers the licensee’s expected transaction privilege tax liability for Arizona for both the previously issued license and for this license.

E. The bond shall not expire prior to two years after the transaction privilege license is issued. Upon lapse or forfeiture of any bond by any licensee, the licensee shall deposit with the Department another bond within five business days of the licensee’s receipt of written notification by the Department.

F. Any licensee, who has had a bond posted for at least two years and fulfills any exception listed in subsection (D), or whose principal place of business becomes Arizona, may request a written waiver and that the bond be returned.
NOTICES OF PROPOSED EXPEDITED RULEMAKING

This section of the Arizona Administrative Register contains Notices of Proposed Expedited Rulemaking. The Office of the Secretary of State is the filing office and publisher of these rules.

Questions about the interpretation of the proposed expedited rule should be addressed to the agency proposing the rule. Refer to Item #5 to contact the person charged with the rulemaking.

NOTICE OF PROPOSED EXPEDITED RULEMAKING

TITLE 9. HEALTH SERVICES
CHAPTER 6. DEPARTMENT OF HEALTH SERVICES
COMMUNICABLE DISEASES AND INFESTATIONS

[R18-69]

PREAMBLE

1. Article, Part, or Section Affected (as applicable) | Rulemaking Action
--- | ---
R9-6-701 | Amend
R9-6-702 | Amend
Table 7.1 | New Table
Table 7.2 | New Table
R9-6-703 | Amend
R9-6-704 | Amend
R9-6-705 | Amend
R9-6-706 | Amend
R9-6-707 | Amend
Table 1 | Repeal
Table 2 | Repeal
R9-6-708 | Amend

2. Citations to the agency’s statutory authority for the rulemaking to include the authorizing statute (general) and the implementing statute (specific):
   - Authorizing statutes: A.R.S. §§ 36-136(A)(7) and 36-136(G)

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 expedited rulemaking:
   - Notice of Rulemaking Docket Opening: 24 A.A.R. 683, March 23, 2018

4. The agency’s contact person who can answer questions about the rulemaking:
   - Name: Dana Goodloe, Office Chief
   - Address: Arizona Department of Health Services
   - Bureau of Epidemiology and Disease Control
   - 150 N. 18th Ave., Suite 120
   - Phoenix, AZ 85007-3248
   - Telephone: (602) 364-3630
   - Fax: (602) 364-3285
   - E-mail: Dana.Goodloe@azdhs.gov
   - or
   - Name: Robert Lane, Chief
   - Address: Arizona 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

5. An agency’s justification and reason why a rule should be made, amended, repealed or renumbered, under A.R.S. § 41-1027, to include an explanation about the rulemaking:
   - Arizona Revised Statutes (A.R.S.) § 36-136(I)(1) requires the Arizona Department of Health Services (Department) to “define and prescribe reasonably necessary measures for detecting, reporting, preventing and controlling communicable and preventable diseases.” A.R.S. § 36-672 requires the Department to adopt rules specifying immunization requirements for school attendance. A.R.S. § 15-872 requires the development by rule of standards for documentary proof of immunization or exemption from immunization. A.R.S. § 15-873 authorizes exemptions from school immunization requirements for personal beliefs or medical reasons, and A.R.S. § 36-883(C) authorizes exemptions from child care immunization requirements for religious beliefs. The Department...
has adopted in Arizona Administrative Code (A.A.C.) Title 9, Chapter 6, Article 7, rules to implement these and related statutes. These rules were last revised in 2008 and contain antiquated, obsolete, and redundant requirements, as well as presenting requirements in a manner that is very difficult to understand. Some requirements conflict with state statutes, while others are inconsistent with standard medical practice, causing a burden on physicians and registered nurse practitioners attempting to reconcile the inconsistencies. They also impose a burden on schools, child care administrators, parents, and anyone else who attempts to use the rules. As described in a five-year-review report for 9 A.A.C. 6, Article 7, approved by the Governor’s Regulatory Review Council on October 3, 2017, the Department is revising the rules in 9 A.A.C. 6, Article 7, by expedited rulemaking to remove obsolete and redundant requirements, simplify the rules, make the rules more consistent with standard medical practices, and better allow for electronic records and recordkeeping. This includes allowing the federally required VIS document, describing a vaccine, the disease it protects against, description of risks and benefits, and contraindications, to be provided “in writing,” as defined in R9-6-701. The proposed amendments will 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 rules 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:**
   Under A.R.S. § 41-1055(D)(2), the Department is not required to provide an economic, small business, and consumer impact statement.

9. **The agency’s contact person who can answer questions about the economic, small business, and consumer impact statement:**
   Not applicable

10. **Where, when, and how persons may provide written comment to the agency on the proposed expedited rules under A.R.S. § 41-1027(C):**
    Close of record: April 26, 2018, 4:00 p.m.
    A person may submit written comments on the proposed expedited rules no later than the close of record to either of the individuals listed in item 4.

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 the issuance of a regulatory permit. Therefore, a general permit is not applicable.

    **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 laws do not apply to the rules.

    **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 such 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 9. HEALTH SERVICES

### CHAPTER 6. DEPARTMENT OF HEALTH SERVICES

#### COMMUNICABLE DISEASES AND INFESTATIONS

#### ARTICLE 7. REQUIRED IMMUNIZATIONS FOR CHILD CARE OR SCHOOL ENTRY

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ARTICLE 7. REQUIRED IMMUNIZATIONS FOR CHILD CARE OR SCHOOL ENTRY

R9-6-701. Definitions
In addition to the definitions in A.R.S. § 36-671 and R9-6-101, the following definitions apply in this Article, unless otherwise specified:

1. “Administration of vaccine” means the inoculation of a child with an immunizing agent by an individual authorized by federal or state law.
3. “ASIIS” means the Arizona State Immunization Information System, an immunization reporting system that collects, stores, analyzes, releases, and reports immunization data.
4. “Case” has the same meaning as in R9-6-101.
5. “Catch-up immunization schedule” means the times established in Table 2 for the immunization of a child who has not completed the vaccine series required in Table 1 before entry into a child care or school.
6. “CDC” means the Centers for Disease Control and Prevention.
7. “Charter school” has the same meaning as in A.R.S. § 15-101.
8. “Child” means:
   a. An individual 18 years of age or less, or
   b. An individual more than 18 years of age attending school.
9. “Child care” means:
   a. A child care facility as defined in A.R.S. § 36881; or
   b. A child care group home as defined in A.R.S. § 36897.
10. “Child care administrator” means an individual, or the individual’s designee, having daily control and supervision of a child care.
11. “Communicable period” means the time during which an individual is capable of infecting another individual with a communicable disease.
12. “Contact person” means an individual who, on behalf of a school or child care and upon request of the Department, provides information to the Department.
13. “Day” means a calendar day, and excludes the:
   a. Day of the act, or event, from which a designated period of time begins to run, and
   b. Last day of the period if a Saturday, Sunday, or official state holiday.
15. “DTaP” means diphtheria, tetanus, and acellular pertussis vaccine.
16. “DTP” means diphtheria, tetanus, and pertussis vaccine.
17. “Entry” means the first day of attendance at a child care or at a specific grade level in a school.
22. “Immunization” has the same meaning as in A.R.S. § 36-671.
23. “Immunization registry” means an electronic database maintained by a governmental health agency for the storage of immunization data for vaccines.
24. “Immunization registry administrator” means an individual, or the individual’s designee, having daily control and supervision of an immunization registry.
25. “Imported” means entered through a fully automated process without electronic manipulation of the data.
26. “IRMS number” means a numeric identifier the Department issues to a person whose information is stored in ASIIS.
27. “KidsCare” means a federally funded program administered by AHCCCS under A.R.S. § 36-2982.
28. “Kindergarten” means the grade level in a school that precedes first grade.
29. “Laboratory evidence of immunity” has the same meaning as in A.R.S. § 36-671.
30. “Local health agency” has the same meaning as “health agency” in A.R.S. § 36-671.
31. “Local health officer” means an individual or the individual’s designee having daily control and supervision of a local health agency.
32. “Medical exemption” means to excuse a child from immunization against a specified disease if the required immunization may be detrimental to the child’s health, as determined by a physician the written certification described in A.R.S. § 15-873(A)(2).
33. “Medical services” has the same meaning as in A.R.S. § 36-401.
34. “MMR” means measles, mumps, and rubella vaccine.
35. “MV” means meningococcal vaccine.
36. “Nurse” means a:
   a. Registered nurse, as defined in A.R.S. § 32-1601; or
   b. Practical nurse, as defined in A.R.S. § 32-1601.
“Outbreak” means an unexpected increase in the incidence of a disease as determined by the Department or local health agency.

“Parent” means:
   a. A natural or adoptive mother or father,
   b. A legal guardian appointed by a court of competent jurisdiction, or

“Physician” has the same meaning as in A.R.S. § 15-871.

“Polio” means poliomyelitis vaccine.

“Practical nurse” has the same meaning as in A.R.S. § 32-1601.

“Provider” means an individual who administers a vaccine, or an entity that is responsible for administering a vaccine.

“Public school” has the same meaning as “school” in A.R.S. § 15-101.

“Registered nurse” has the same meaning as in A.R.S. § 32-1601.

“Registered nurse practitioner” has the same meaning as in A.R.S. § 32-1601.

“Responsible person” has the same meaning as “parent” in R9-5-101.

“Route of administration” means a method of inoculation with a vaccine.

“School” has the same meaning as in A.R.S. § 36-671.

“School administrator” has the same meaning as in A.R.S. § 36-671.

“School-based or child care-based vaccination information system” means an electronic database used and maintained by a school, child care, or group of schools or child cares for the storage of immunization data for vaccines.

“Signature” means:
   a. A handwritten or stamped representation of an individual’s name or a symbol intended to represent an individual’s name, or
   b. An electronic signature as defined in A.R.S. § 44-7002.

“Suspect case” has the same meaning as in R9-6-101.

“Td” means tetanus and diphtheria vaccine.

“Tap” means tetanus, diphtheria, and acellular pertussis vaccine.

“Temporary” means lasting for a limited time.

“Underinsured” means having medical insurance that does not cover all or part of the cost of a vaccination.

“Uninsured” means not having medical insurance.

“Vaccine” has the same meaning as “biological product” defined in 21 CFR 600.3h (April 1, 2000).

“VAR” means varicella vaccine.

“VFC” means Vaccines for Children, a federal program administered by the Department.

“VFC PIN number” means a numeric identifier that the VFC issues to a person participating in the VFC.

“WIC” means Women, Infants, and Children, a federal program administered by the Department.

“WIC administrator” means an individual, or the individual’s designee, having daily control and supervision of a WIC.

R9-6-702. Required Immunizations for Child Care or School Entry

A. Except as provided in R9-6-706, the school administrator or child care administrator shall:
   1. Ensure that a child attending a school or child care has been immunized for each of the following diseases according to Table 1 or Table 2:
      a. Diphtheria;
      b. Tetanus;
      c. Hepatitis A, for a child 1 through 5 years of age in child care in Maricopa County;
      d. Hepatitis B;
      e. Pertussis;
      f. Poliomyelitis;
      g. Measles (rubeola);
      h. Mumps;
      i. Rubella (German Measles);
      j. Haemophilus influenzae type b;
      k. Varicella; and
      l. Meningococcal; and
   2. If a child does not have proof of immunization according to Table 1 or Table 2, exclude the child from:
      a. School entry; or
      b. Child care, unless the child is immunized against the diseases listed in subsection (A)(1) within 15 days following entry.

B. Unless exempt according to R9-6-706, a child who has not received VAR according to Table 1 or Table 2 shall:
   1. Receive VAR according to the following:
      a. By September 1, 2005 for a child who is entering kindergarten, first grade, or seventh grade;
      b. By September 1, 2006 for a child who is entering kindergarten through second grade, seventh grade, or eighth grade;
      c. By September 1, 2007 for a child who is entering kindergarten through third grade, or seventh grade through ninth grade;
      d. By September 1, 2008 for a child who is entering kindergarten through fourth grade, or seventh grade through tenth grade;
      e. By September 1, 2009 for a child who is entering kindergarten through fifth grade, or seventh grade through 11th grade; and
      f. By September 1, 2010 for a child who is entering kindergarten through 12th grade; and
   2. Be excluded from school entry by a school administrator until the child meets the requirements in Table 2.

C. Unless exempt according to R9-6-706, a child, 11 years of age or older, who has not received MV according to Table 1 or Table 2 shall:
   1. Receive MV according to the following:
a. By September 1, 2008 for a child entering sixth grade;
b. By September 1, 2009 for a child entering sixth and seventh grade;
c. By September 1, 2010 for a child entering sixth through eighth grade;
d. By September 1, 2011 for a child entering sixth through ninth grade;
e. By September 1, 2012 for a child entering sixth through tenth grade;
f. By September 1, 2013 for a child entering sixth through eleventh grade; and
g. By September 1, 2014 for a child entering sixth through twelfth grade; and

2. Be excluded from school entry by a school administrator until the child meets the requirements in this Section.

D. Unless exempt according to R9-6-706, a child, 11 years of age or older, who has not received Tdap according to Table 1 or Table 2 shall:
1. Receive the Tdap according to the following:
a. By September 1, 2008 for a child entering sixth grade;
b. By September 1, 2009 for a child entering sixth and seventh grade;
c. By September 1, 2010 for a child entering sixth through eighth grade;
d. By September 1, 2011 for a child entering sixth through ninth grade;
e. By September 1, 2012 for a child entering sixth through tenth grade;
f. By September 1, 2013 for a child entering sixth through eleventh grade; and
g. By September 1, 2014 for a child entering sixth through twelfth grade; and
2. Be excluded from school entry by a school administrator until the child meets the requirements in this Section.

E. If the Department receives written notification from the CDC that there is a shortage of a vaccine for a disease listed in subsection (A)(1), or that the CDC is limiting the amount of a vaccine for a disease listed in subsection (A)(1), the Department shall:
1. Provide written notification to each school and child care in this state of the shortage or limitation of the vaccine;
2. Suspend compliance with subsections (A), (B), (C), and (D); and
3. Upon receiving written notification from the CDC that the vaccine is available, notify each school and child care in this state:
   a. That the vaccine is available, and
   b. Of the time by which an individual is required to comply with subsections (A), (B), (C), and (D).

F. The Department shall notify each school and child care in this state that the Department no longer requires compliance with subsections (A), (B), (C), and (D) for a disease listed in subsection (A)(1) if:
1. The disease is declared eradicated by:
   a. The World Health Organization, and
   b. The Advisory Committee on Immunization Practices; and
2. The Department no longer recommends immunization against the disease.

Except as provided in R9-6-706, documentary proof of immunization, according to Table 7.1 or Table 7.2, for each of the following diseases is required for child care or school entry:

1. Diphtheria;
2. Tetanus;
3. Pertussis;
4. Hepatitis A, for a child 1 through 5 years of age in child care in Maricopa County;
5. Hepatitis B;
6. Poliomyelitis;
7. Measles (rubeola);
8. Mumps;
9. Rubella (German Measles);
10. *Haemophilus influenzae* type b, for a child two months through 59 months of age;
11. Varicella; and
12. Meningococcal disease.

**Table 7.1. Immunization Requirements for Child Care or School Entry**

<table>
<thead>
<tr>
<th>Key:</th>
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<tbody>
<tr>
<td>DTap = Diphtheria, tetanus, and acellular pertussis vaccine</td>
</tr>
<tr>
<td>DTP = Diphtheria, tetanus, and pertussis vaccine</td>
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<tr>
<td>Hep A = Hepatitis A vaccine</td>
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<tr>
<td>Hep B = Hepatitis B vaccine</td>
</tr>
<tr>
<td>Hib = <em>Haemophilus influenzae</em> type b vaccine</td>
</tr>
<tr>
<td>MMR = Measles, mumps, and rubella vaccine</td>
</tr>
<tr>
<td>MCV4 = quadrivalent meningococcal vaccine</td>
</tr>
<tr>
<td>Polio = inactivated poliomyelitis vaccine (IPV) or trivalent oral poliomyelitis vaccine (OPV)</td>
</tr>
<tr>
<td>Td = Tetanus and diphtheria vaccine</td>
</tr>
<tr>
<td>Tdap = Tetanus, diphtheria, and acellular pertussis vaccine</td>
</tr>
<tr>
<td>VAR = Varicella vaccine</td>
</tr>
<tr>
<td>Kindergarten = The grade level in a school that precedes first grade.</td>
</tr>
</tbody>
</table>
## Notices of Proposed Expedited Rulemaking

### Arizona Administrative Register

#### A. Vaccine Doses Required for Child Care Attendance

<table>
<thead>
<tr>
<th>Vaccine Against</th>
<th>Age</th>
<th>2 months</th>
<th>4 months</th>
<th>6 months</th>
<th>12 months</th>
<th>15 months</th>
<th>18 months</th>
<th>19-59 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diphtheria, Tetanus, Pertussis</td>
<td>DTaP 1</td>
<td>DTaP 2</td>
<td>DTaP 3</td>
<td>---</td>
<td>DTaP 4</td>
<td>---</td>
<td>---</td>
<td>Documented 4 DTaP</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Hep B 1</td>
<td>Hep B 2</td>
<td>Hep B 3</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>Documented 3 Hep B</td>
</tr>
<tr>
<td>Haemophilus influenzae type b</td>
<td>Hib 1</td>
<td>Hib 2</td>
<td>Hib 3 ²</td>
<td>---</td>
<td>Hib 3 or 4 ²</td>
<td>---</td>
<td>---</td>
<td>Documented 3-4 Hib, as specified in Note 3</td>
</tr>
<tr>
<td>Poliomyelitis</td>
<td>Polio 1²</td>
<td>Polio 2²</td>
<td>---</td>
<td>Polio 3²</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>Documented 3 Polio</td>
</tr>
<tr>
<td>Measles, Mumps, Rubella</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Varicella</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>(Maricopa County only)</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
</tbody>
</table>

1. The recommended schedule for a four-dose Hib vaccine is two, four, and six months of age with a booster dose at 12-15 months of age. The recommended schedule for a three-dose Hib vaccine is two and four months of age with a booster dose at 12-15 months of age.

2. Bivalent and monovalent oral poliomyelitis vaccines do not meet these immunization requirements. An oral poliomyelitis vaccine received before April 2016 is assumed to be trivalent oral poliomyelitis vaccine, unless otherwise specified, and to satisfy immunization requirements.

#### B. Vaccine Doses Required for School Attendance

A child at any age within the range designated by the black bar is required to have documentation of the indicated number of doses of the specified vaccine.

<table>
<thead>
<tr>
<th>Vaccine Against</th>
<th>Age</th>
<th>4 - 6 years and attendance in Kindergarten or 1st grade</th>
<th>7 - 10 years</th>
<th>11 years or older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diphtheria, Tetanus, Pertussis</td>
<td>4 to 6 DTP/DTaP¹</td>
<td>3 or 4 tetanus-diphtheria-containing vaccines¹</td>
<td>3 to 5 tetanus-diphtheria-containing vaccines, including 1 Tdap²,³</td>
<td></td>
</tr>
<tr>
<td>Meningococcal invasive disease</td>
<td>---</td>
<td>---</td>
<td>1 MCV4</td>
<td></td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>3 to 4 Hep B⁴</td>
<td>---</td>
<td>2 to 4 Hep B⁴,⁵</td>
<td></td>
</tr>
<tr>
<td>Poliomyelitis</td>
<td>3 or 4 Polio⁶</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Measles, Mumps, Rubella</td>
<td>2 MMR</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Varicella zoster</td>
<td>1-2 var⁷</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
</tbody>
</table>

1. Only four doses of DTP/DTaP are required if the fourth dose of DTP/DTaP was received after the child’s fourth birthday; otherwise an additional dose is required after the child’s fourth birthday, up to a maximum of six doses.

2. Only three doses of tetanus-diphtheria-containing vaccine are required if the first dose of tetanus-diphtheria-containing vaccine was received on or after the child’s first birthday; otherwise four are required.

3. One dose of Tdap is required if five years have passed since the date of the child’s last dose of tetanus-diphtheria-containing vaccine and the child has not received Tdap. At least one dose of a tetanus-diphtheria-containing vaccine is required to have been administered within the previous 10 years.

4. Only three doses are required if the third dose was received at or after the child was 24 weeks of age; otherwise four are required.

5. Only two doses, at least four months apart, are required if the child received the adolescent series using the Merck Recombivax HB Adult Formulation vaccine when the child was 11-15 years of age.

6. Bivalent and monovalent oral poliomyelitis vaccines do not meet these immunization requirements. An oral poliomyelitis vaccine received before April 2016 is assumed to be trivalent oral poliomyelitis vaccine, unless otherwise specified, and to satisfy immunization requirements. Only three doses are required if the third dose was received after the child’s fourth birthday and at least six months after the second dose; otherwise four doses are required, with the last received after the child’s fourth birthday. Poliomyelitis vaccine is not required for individuals 18 years of age or older.
One dose is required if received by a child between 12 months and 12 years of age. A child who received a first dose of VAR at 13 years of age or older is required to receive a second dose if at least four weeks have passed since the date of the first dose.

Table 7.2. Immunization Schedule for a Child Who Has Not Completed the Vaccine Series Required in Table 7.1 before Entry into a Child Care or School

A. If a child does not meet the applicable requirements in Table 7.1, the child is required to have the first dose of vaccine for each of the diseases indicated in R9-6-702 before school entry or no later than 15 calendar days after child care entry.

B. If a child does not meet the applicable requirements in Table 7.1, the child is required to have the second and subsequent doses of vaccine for each of the diseases indicated in R9-6-702 either:
1. Before school entry or no later than 15 calendar days after child care entry, or
2. At the intervals specified below.

<table>
<thead>
<tr>
<th>Vaccine Against</th>
<th>Intervals between Doses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diphtheria, Tetanus, Pertussis</td>
<td></td>
</tr>
<tr>
<td>Child &lt; 7 years of age (DTP or a combination of DTP and DTaP)</td>
<td>No sooner than four weeks after the first dose</td>
</tr>
<tr>
<td>Child 7 through 10 years of age (Tetanus-diphtheria containing vaccines)</td>
<td>No sooner than four weeks after the first dose</td>
</tr>
<tr>
<td>Child &gt; 10 years of age (Tetanus-diphtheria containing vaccine, including one Tdap)</td>
<td>No sooner than four weeks after the first dose</td>
</tr>
<tr>
<td>Poliomyelitis</td>
<td></td>
</tr>
<tr>
<td>Child &lt; 4 years of age</td>
<td>No sooner than four weeks after the first dose</td>
</tr>
<tr>
<td>Child between 4 and 18 years of age</td>
<td>No sooner than four weeks after the first dose</td>
</tr>
<tr>
<td>Measles, Mumps, Rubella</td>
<td></td>
</tr>
<tr>
<td>Child 4 years of age or older</td>
<td>No sooner than one month after the first dose</td>
</tr>
</tbody>
</table>
R9-6-703. Responsibilities of Individuals and Local Health Agencies for Administering Vaccines

A. Upon request of a responsible person’s parent, a local health agency shall provide for the immunization of a child against any disease listed in R9-6-702(A)(1) R9-6-702.

B. An individual administering a vaccine shall ensure that the dosage and route of administration of each vaccine are provided by which the vaccine is administered is:
   1. As recommended by the Centers for Disease Control and Prevention, or
   2. According to the manufacturer’s recommendations.

C. Before administering a vaccine to a child, the individual administering the vaccine shall:
   1. Provide the responsible person’s child’s parent with the following written information in writing:
      a. A description of the disease,
      b. A description of the vaccine,
      c. A statement of the risks of the disease and the risks and benefits of immunization, and
      d. Contraindications for administering the vaccine; and
   2. Obtain a statement signed by documentation from the responsible person’s child’s parent confirming that the responsible person’s child’s parent:
      a. Was provided the written information described in subsection (C)(1),
      b. Was provided an opportunity to read the written information described in subsection (C)(1),
      c. Was provided an opportunity to ask questions, and
      d. Requests that the designated vaccine be administered to the child.

D. Following the administration of a vaccine, the individual administering the vaccine shall provide written information to the responsible person’s child’s parent or, if a child is immunized at school, to the child to give to the responsible person, that includes child’s parent:
   1. Information in writing about:
      a. The vaccine administered,
      b. The reactions to the vaccine that might be expected, and
      c. The course of action if a severe reaction to the vaccine occurs that may require medical attention; and

---

**Haemophilus influenzae type b**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Dosage Required</th>
<th>Time After First Dose</th>
<th>Time After Second Dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child 7-11 months of age</td>
<td>No sooner than two months after the first dose</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Child 12-14 months of age</td>
<td>No sooner than two months after the first dose</td>
<td>No sooner than two months after the second dose if the first or second dose was received at &lt; 12 months of age</td>
<td>---</td>
</tr>
<tr>
<td>Child 15-59 months of age</td>
<td>(A child 15 through 59 months of age is required to have one dose of vaccine.)</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>No sooner than four weeks after the first dose (Only two doses, at least four months apart, are required if the child received the adolescent series using the Merck Recombivax HB Adult Formulation vaccine when the child was 11-15 years of age.)</td>
<td>No sooner than four months after the first dose and two months after the second dose for a child ≥ 24 weeks of age who did not receive the adolescent series.</td>
<td>---</td>
</tr>
<tr>
<td>Hepatitis A (Maricopa County only)</td>
<td>No sooner than six months after the first dose</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Varicella (A child 12 months through 12 years of age is required to have one dose of vaccine.)</td>
<td>No sooner than one month after the first dose for a child ≥ 13 years of age or older</td>
<td>---</td>
<td>---</td>
</tr>
</tbody>
</table>
R9-6-704. Standards for Documentary Proof of Immunization or Immunity

A. An individual may establish proof of a child’s immunity to a disease listed in R9-6702(A)(1) by one of the following: An administrator of a school or a child care administrator shall accept any of the following as documentary proof of immunization for a child:

1. An immunization record A document recording the immunizations administered to the child that contains:
   a. The child’s name;
   b. The child’s date of birth;
   c. The type of vaccine administered;
   d. The month and year of each immunization, other than MMR, for a child who received an immunization before January 1, 2003;
   e. The month, day, and year of MMR immunization for a child who received an immunization before January 1, 2002;
   f. The month, day, and year of each immunization for a child who received an immunization on or after January 1, 2003; and
   g. The name of the individual administering the vaccine or the name of the entity that the individual administering the vaccine represents;

2. Laboratory evidence of immunity;

3. An Arizona school immunization record A document from an Arizona school recording the child’s immunizations that includes:
   a. The child’s name;
   b. The child’s date of birth;
   c. The grade of the child on the date of enrollment;
   d. Whether the child is male or female;
   e. The type of vaccine administered;
   f. The month and year of each immunization, other than MMR, for a child who received an immunization before January 1, 2003;
   g. The month, day, and year of MMR immunization for a child who received an immunization before January 1, 2002; and
   h. The month, day, and year of each immunization for a child who received an immunization on or after January 1, 2003;

4. A statement of immunity as described in subsection (B).
   a. A local health officer;
   b. A school administrator;
   c. A child care administrator;
   d. A WIC administrator;
   e. An immunization registry administrator or immunization registry administrator’s designee;
   f. A physician, physician’s designee, practical nurse, or registered nurse;
   g. An electronic version of the child’s immunization record generated by a school, signed and dated by any of the following:
      a. A local health officer;
      b. A school administrator;
      c. A child care administrator;
      d. A WIC administrator;
      e. An immunization registry administrator or immunization registry administrator’s designee;

5. An electronic version of the child’s immunization record containing the information in subsection (A)(1)(a) through (f) generated by an immunization registry, and signed and dated by any of the following:
   a. A local health officer;
   b. A school administrator;
   c. A child care administrator;
   d. A WIC administrator;
   e. An immunization registry administrator or immunization registry administrator’s designee;
   f. A physician, physician’s designee, practical nurse, or registered nurse;
   g. An electronic version of the child’s immunization record generated by a school, signed and dated by the school administrator or the school administrator’s designee, and containing the information in subsection (A)(1)(a) through (f); or

6. A statement of immunity as described in subsection (B).
   a. A local health officer;
   b. A school administrator;
   c. A child care administrator;
   d. A WIC administrator;
   e. An immunization registry administrator or immunization registry administrator’s designee;
   f. A physician, physician’s designee, practical nurse, or registered nurse;
   g. An electronic version of the child’s immunization record generated by a school, signed and dated by the school administrator or the school administrator’s designee, and containing the information in subsection (A)(1)(a) through (f); or

7. A statement of immunity as described in subsection (B).
   a. A local health officer;
   b. A school administrator;
   c. A child care administrator;
   d. A WIC administrator;
   e. An immunization registry administrator or immunization registry administrator’s designee;
   f. A physician, physician’s designee, practical nurse, or registered nurse;

R9-6-705. Responsibilities of Schools and Child Care Administrators of Schools, Child Care Administrators, and the Department

A. Except as provided in R9-6-706, a school administrator or a child care administrator shall ensure that an immunization record for each child attending a school or child care is maintained at the school or child care and contains the applicable documentary proof of immunity in R9-6-704.

B. If a child does not meet the requirements for immunization according to Table 1 or Table 2 or requirements for exemption from immunization according to R9-6-706, a school administrator shall:
   1. Not allow the child to enter the school, or
   2. If the child is already attending the school, remove the child from school as authorized by A.R.S. § 15872.

C. If a child does not meet the requirements for immunization according to Table 1 or Table 2 or requirements for exemption from immunization according to R9-6-706, a child care administrator shall notify the responsible person in writing at the time of entry that:
   1. The child may attend the child care for not more than 15 days from the date of the notification; and
   2. If the child is not immunized by the 15th day following notification, the child is not permitted to attend the child care.

D. A school administrator or child care administrator shall determine that a child is in compliance with an immunization requirement in this Article for a specific disease if:
   1. The child’s immunization record contains proof of immunity required in R9-6704, and the child has received the required immunizations according to Table 1 or Table 2; or
A responsible person has submitted to the school or child care documentation of an exemption from immunization according to R9-6-706.

If an administrator of a school or a child care administrator questions the accuracy of a document provided for a child as documentary proof of:

- The responsible person is required to send the child to a physician or local health agency to review the child’s immunization history and provide immunizations as needed.
- For a child enrolling in a school, all immunizations are required to be completed according to Table 1 or Table 2 and proof provided to the school before entry; or
- For a child enrolling in a school, all immunizations required in Table 1 or Table 2 are required to be completed and proof provided to the child care within 15 days of the notification; and
- For a child attending a child care, that, beginning 15 days following the notification, the child is not allowed to attend the child care, unless the child’s immunization record meets the standards of documentary proof in R9-6-704 and is presented to the child care.

A school administrator or child care administrator shall maintain a list that contains the name of each child who:

- Is exempt from providing proof of immunity according to R9-6-706, or
- Has not provided proof of immunity in compliance with R9-6-704.

A school administrator or child care administrator shall not allow a child who lacks proof of immunity against a disease listed in R9-6-702(A) to attend the school or child care during an outbreak of the disease for which the child lacks proof of immunity. The Department of public health agency shall determine the start and termination of an outbreak.

An administrator of a school or a child care administrator shall ensure that:

1. For each child attending the school or child care, one of the following is maintained at the school or child care for each disease listed in R9-6-702:
   a. Documented proof of immunization, as specified in R9-6-704(A), according to Table 7.1;
   b. Documented proof of immunization, as specified in R9-6-704(A), demonstrating compliance with Table 7.2;
   c. Documented proof of immunity, as specified in R9-6-704(B) and according to R9-6-706(D); or
   d. A statement of exemption from immunization, as specified in R9-6-706(A) through (C).

2. Lists are maintained at the school or child care of children who:
   a. Do not have documentary proof of:
      i. Immunization for each disease listed in R9-6-702, according to Table 7.1; or
      ii. Immunity for each disease listed in R9-6-702, according to R9-6-706(D); or
   b. Do not have documentary proof according to subsection (A)(1)(a) or (c) but are in compliance with Table 7.2; or
   c. Have a statement of exemption from immunization, according to R9-6-706(A), (B), or (C), for any of the diseases listed in R9-6-702;
   d. Except as provided in subsection (D), for a child enrolled in school who does not have one of the documents in subsection (A)(1) for each disease listed in R9-6-702:
      i. The child’s parent is notified in writing at the time of school enrollment or, for an enrolled child, at the time of review of immunization documentation that the child:
         a. Is not in compliance with Arizona immunization requirements; and
         b. Except as required by 42 U.S.C. 11301, will be excluded from school entry, according to A.R.S. § 15-872(B), unless the documentation required in subsection (A)(1) is provided for each disease listed in R9-6-702 before school entry; and
      ii. May attend the child care for not more than 15 days from the date of child care entry without providing one of the documents in subsection (A)(1) for each disease listed in R9-6-702; and
   e. The child is excluded from school entry if the required documentation is not provided before school entry; and
   f. Except as provided in subsection (D), for a child enrolled in a child care who does not have one of the documents in subsection (A)(1) for each disease listed in R9-6-702:
      i. The child’s parent is notified in writing before or at the time of child care entry or, for an enrolled child, at the time of review of immunization documentation that the child:
         a. Is not in compliance with Arizona immunization requirements, and
         b. The child is excluded from child care entry if the required documentation is not provided for the child within 15 days following child care entry.

If an administrator of a school or a child care administrator questions the accuracy of a document provided for a child as documentary proof of immunization or immunity and is unable to verify the accuracy of the document, the administrator of the school or the child care administrator shall notify the child’s parent in writing that:

1. For a child attending a school:
   a. The child is not in compliance with immunization requirements;
a. The administrator of the school cannot verify compliance with Arizona immunization requirements on the basis of the documents provided; and

b. Except as required by 42 U.S.C. 11301, the child will be excluded from school entry, according to A.R.S. § 15-872(B), until the child's parent provides to the school documentation that meets the requirements in R9-6-704 or R9-6-706;

2. For a child attending a child care:
   a. The child care administrator cannot verify compliance with Arizona immunization requirements on the basis of the documents provided; and
   b. The child may attend the child care for not more than 15 days after the date of child care entry without the child's parent providing to the child care documentation that meets the requirements in R9-6-704 or R9-6-706; and

3. The child's parent may bring the child to a physician, a registered nurse practitioner, a local health agency, or, as authorized under A.R.S. § 32-1974, a pharmacist as defined in A.R.S. § 32-1901 to:
   a. Review the child's immunization history,
   b. Provide needed immunizations, and
   c. Provide the required documentation.

C. An administrator of a school or a child care administrator shall not allow a child to attend the school or child care during an outbreak of a disease listed in R9-6-702, as determined by the Department or a local health agency, for which the child lacks:
   1. Documentary proof of immunization, according to R9-6-704(A); or
   2. Documentary proof of immunity, according to R9-6-704(D).

D. If the Department receives notification from the Centers for Disease Control and Prevention that there is a shortage of a vaccine for a disease listed in R9-6-702, or that the amount of a vaccine for a disease listed in R9-6-702 is being limited, the Department shall:
   1. Determine whether:
      a. Compliance with exclusion requirements in subsections (A)(3) and (4) is suspended for the vaccine in limited supply, or
      b. A different vaccine or a combination of different vaccines may substitute for the vaccine in limited supply;
   2. Provide notification in writing to each school and child care in this state:
      a. Of the shortage or limitation of the vaccine;
      b. Whether the Department is:
         i. Suspending compliance with exclusion requirements in subsections (A)(3) and (4) on the basis of the vaccine in limited supply; or
         ii. Recommending an alternative vaccine or combination of vaccines to satisfy the requirement R9-6-702 for the vaccine in limited supply and, if so, the Department’s recommendation; and
      c. If known, when the shortage or limitation of the vaccine is expected to end and the vaccine to be available; and
   3. Upon receiving notification from the Centers for Disease Control and Prevention that the vaccine is available, notify each school and child care in this state:
      a. That the vaccine is available, and
      b. If applicable, the date that compliance with exclusion requirements in subsections (A)(3) and (4) will be reinstated.

E. The Department shall notify each school and child care in this state if the Department no longer requires compliance with subsection (A) for a disease listed in R9-6-702:

R9-6-706. Exemptions from Immunizations
A. A child who has reached a fifth birthday is exempt from the Hib immunization requirement.
B. A child who is 7 through 10 years of age is exempt from the pertussis immunization requirement.
C. A child:
   1. Until September 1, 2011, is exempt from the VAR immunization requirement if the child’s responsible person states, verbally or in writing, that the child has had varicella; and
   2. After September 1, 2011, is not exempt from the VAR immunization requirement unless the child provides laboratory evidence of immunity to varicella.
D. A child who submits laboratory evidence of immunity to a disease to a school or child care is not required to be immunized against that disease as a condition for school or child care entry.
E. For a child attending a school, a parent or guardian shall submit to the school a written statement of exemption from immunization for personal beliefs as required in A.R.S. § 15-873(A)(1) or written certification of medical exemption as required in A.R.S. § 15-873(A)(2) on a form provided by the Department that contains:
   1. The child’s name;
   2. The child’s date of birth;
   3. The type of exemption requested;
   4. The immunizations from which the parent or guardian is requesting an exemption;
   5. Whether the medical exemption is permanent or temporary, if applicable;
   6. The date the medical exemption terminates, if applicable;
   7. The parent or guardian’s signature and the date signed; and
   8. The parent or guardian’s signature and the date signed, if applicable.
F. For a child attending a child care, a responsible person shall submit to the child care a written statement of exemption from immunization on a form provided by the Department that includes:
   1. The child’s name;
   2. The child’s date of birth;
   3. The type of exemption;
   4. The immunizations from which the responsible person is requesting an exemption;
   5. If a medical exemption, whether the medical exemption is permanent or temporary;
   6. If temporary, the date the medical exemption terminates, if applicable.
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7. The responsible person’s signature and the date signed, and
8. The physician’s or registered nurse practitioner’s signature and the date signed, if applicable.

G. A child care administrator or school administrator shall:
1. Record an exemption on a child’s immunization record,
2. Allow a child with a temporary medical exemption to attend a child care or school until the date the temporary exemption terminates, and
3. Notify a child’s responsible person in writing of the date the child is required to complete all immunizations before the temporary medical exemption terminates.

A. For a child attending a school, the child is exempt from the applicable immunization requirements in R9-6-702 for personal beliefs, as allowed by A.R.S. § 15-873(A)(1), if the child’s parent submits to the school a statement of exemption from immunization for personal beliefs, in a Department-provided format, that contains:
1. The parent’s name,
2. The child’s name,
3. The child’s date of birth,
4. The immunizations from which the child’s parent is requesting an exemption,
5. That the parent is requesting the exemption based on personal beliefs, and
6. The signature of the child’s parent and the date signed.

B. For a child attending a child care, the child is exempt from the applicable immunization requirements in R9-6-702 for religious beliefs, as allowed in A.R.S. § 36-883(C), if the child’s parent submits to the child care a statement of exemption from immunization for religious beliefs, in a Department-provided format, that contains:
1. The parent’s name,
2. The child’s name;
3. The child’s date of birth;
4. The immunizations from which the child’s parent is requesting an exemption;
5. That the parent is requesting the exemption based on religious beliefs, and
6. The signature of the child’s parent and the date signed.

C. A child is exempt from the applicable immunization requirements in R9-6-702, as allowed by A.R.S. § 15-873(A)(2), if the child’s parent submits to a school or child care a certification of medical exemption from immunization, in a Department-provided format, that contains:
1. The parent’s name;
2. The child’s name;
3. The child’s date of birth;
4. The immunizations from which the child’s parent is requesting an exemption;
5. That the parent is requesting a medical exemption according to A.R.S. § 15-873(A)(2);
6. Statements from a physician or registered nurse practitioner that:
   a. The immunizations specified according to subsection (C)(4) may be harmful to the child’s health;
   b. Indicate the specific nature of the medical condition or circumstance that precludes immunization;
   c. Indicate whether the medical exemption is permanent or temporary; and
   d. If the medical exemption is temporary, provide the date the medical exemption ends;
7. The signature of the physician or registered nurse practitioner providing the medical exemption and the date signed; and
8. The signature of the child’s parent and the date signed;

D. A child is exempt from the applicable immunization requirements in R9-6-702 due to immunity if the child’s parent submits to a school or child care:
1. A certification of medical exemption from immunization due to immunity, in a Department-provided format, that contains:
   a. The parent’s name;
   b. The child’s name;
   c. The child’s date of birth;
   d. The name of each disease for which the child’s parent is requesting an exemption from immunization requirements;
   e. That the parent is requesting a medical exemption from immunization due to the child’s immunity to a disease;
   f. A statement from a physician or registered nurse practitioner that the physician or registered nurse practitioner has determined that the child is immune to the disease specified according to subsection (D)(1)(d), for which an exemption from immunization requirements is being requested, based on:
      i. For measles, rubella, or varicella, a review by the physician or registered nurse practitioner of laboratory evidence of immunity for the child; or
      ii. For a disease other than measles, rubella, or varicella, a review by the physician or registered nurse practitioner of laboratory evidence of immunity for the child; or
   g. The signature of the physician or registered nurse practitioner providing the medical exemption and the date signed; and
   h. The signature of the child’s parent and the date signed; and
2. If applicable, a copy of the laboratory evidence of immunity.

E. An administrator of a school or a child care administrator shall:
1. Include a child’s exemption from the requirements in R9-6-702 in the documentation required in R9-6-705(A)(1); and
2. If a child has a temporary medical exemption:
   a. Allow the child to attend a school or child care until the date the temporary exemption ends; and
b. At least 30 calendar days before the temporary medical exemption ends, notify the child’s parent in writing of the date by which the child is required to complete all immunizations.

R9-6-707. Reporting Requirements

A. By November 15 of each year, a school administrator shall submit a report to the Department or local health agency on a form provided by the Department that contains:
   1. The name and address of the school;
   2. An identification of whether it is a public school, private school, or charter school;
   3. The name, telephone number, and fax number of a contact person;
   4. The name and district number of the school district, if applicable;
   5. The county the school is located in;
   6. Each grade taught at the school;
   7. The number of children enrolled at the school in designated grades as of the date of the report;
   8. The number of children with documentary proof of immunization status, including the number of children who are in each of the following categories:
      a. Have received each immunization required for their age;
      b. Have a medical exemption;
      c. Are exempt for personal beliefs according to A.R.S. §15-873, and
      d. Have submitted laboratory evidence of immunity as defined in A.R.S. §36-671, and
   9. The number of doses received per child of each vaccine required in Table 1.

B. If requested by the Department or local health agency, a school administrator or child care administrator shall provide the following outbreak, case, or suspect case information:
   1. Immunization information in R9-6-704;
   2. Attendance information specifying each date each child was present at the school or child care during the communicable period; and
   3. Any other information relating to the outbreak, case, or suspect case that is requested by the Department or local health agency.

C. A school administrator that has an individual authorized by law to administer vaccines and receives vaccines provided by the Department shall:
   1. Prepare a report on a form provided by the Department each calendar month that contains:
      a. A VFC PIN number;
      b. The provider name or business name, address, telephone number, and fax number;
      c. The beginning date and end date of the report;
      d. The number of children immunized during the preceding calendar month;
      e. The age and date of birth of each child immunized during the preceding calendar month;
      f. Whether each child immunized during the preceding calendar month is:
         i. Covered by KidsCare;
         ii. Covered by AHCCCS;
         iii. Uninsured;
         iv. A Native American or an Alaskan native;
         v. Underinsured; and
         vi. Non-VFC eligible, if applicable;
   2. Send the report required in subsection (C)(1) by the fifth day of the following month to:
      a. The local health agency, if the vaccine was provided by the local health agency; or
      b. The Department, if the vaccine was provided by the Department.

D. By November 15 of each year, a child care administrator shall submit to the Department or local health agency a report on a form provided by the Department that contains:
   1. The name, mailing address, and telephone number of the child care;
   2. The date of the report;
   3. The name of a contact person;
   4. The Department license or certificate number of the child care, if applicable;
   5. The name of the child care administrator;
   6. Whether the children are in child care;
   7. Whether the children in child care are in a Head Start program;
   8. The number of children attending the child care who were less than 5 years of age as of October 1; and
   9. The number of children less than five years of age as of October 1, for whom the child care has immunization records on file specifying the number of children who are in each of the following categories:
      a. Have received each immunization required for their age;
      b. Have medical exemptions;
      c. Are exempt for religious beliefs according to the rules in 9 A.A.C. 5 regulating child care facilities or child care group homes; and
      d. Have submitted laboratory evidence of immunity.

E. In addition to the report required in subsection (D), by November 15 of each year, a child care administrator shall submit to the Department or local health agency a report on a form provided by the Department that contains:
   1. The information in subsection (D)(1) through (D)(4),
The information in subsection (D)(6), and
Children who have received each immunization required according to Table 7.1; have received an immunization required according to Table 7.1 or submitted a certification of medical exemption from
For each vaccine listed in Table 1 except MMR, the month, day, and year of the most recent immunization;
Whether each child has a medical or religious exemption.
By March 30 of each year, a local health officer shall forward to the Department the information contained in the reports received by the local health agency according to subsections (A) and (D).
A local health officer who receives and distributes vaccine provided by the Department shall submit to the Department the report required in subsection (C) every calendar month.
As required by A.R.S. § 36-135, a health care professional shall submit for each vaccine administered to a child the information required in A.R.S. § 36-135(B), the IRMS number, and the VPC PIN number, if applicable, to the Department as follows:
1. If reporting by mail or fax, the health care professional shall use a form provided by the Department.
2. If reporting by telephone, the health care professional shall call a telephone number provided by the Department for this purpose between 8:00 a.m. and 5:00 p.m., Monday through Friday, except state holidays.
3. If reporting electronically, the health care professional shall:
a. Connect to the ASIIS web page through a secure Internet connection and enter the information; or
b. Ensure that the information is submitted in a format that can be imported into ASIIS and:
   i. Provide a compact disk or digital video disk that contains the information to the Department; or
   ii. Transfer the information to the Department through a secure file transfer protocol.
A. By November 15 of each year, an administrator of a school shall submit to the Department a report, in a Department-provided format, that contains:
1. The name, the physical address, and, if different, the mailing address of the school;
2. The date of the report;
3. Whether the school is a:
   a. Charter school, as defined in A.R.S. § 15-101;
   b. Private school, as defined in A.R.S. § 15-101; or
   c. Public school, as defined in A.R.S. § 15-101;
4. The name, email address, and telephone number of an individual to contact for the school;
5. The name and district number of the school district, if applicable;
6. The county in which the school is located;
7. The number of children enrolled at the school in designated grades, as of the date of the report; and
8. The number of children in each of the designated grades who:
   a. Have received each immunization required according to Table 7.1;
   b. Have received an immunization required according to Table 7.1 or submitted a certification of medical exemption from immunization due to immunity, according to R9-6-706(D), for each of the diseases in R9-6-702, including the number for each disease for which certification of medical exemption from immunization due to immunity was submitted;
   c. Have an exemption from immunization due to personal beliefs, according to R9-6-706(A), for one or more of the diseases in R9-6-702, including the number for each disease;
   d. Have a medical exemption from immunization, according to R9-6-706(C) for one or more of the diseases in R9-6-702, including:
      i. The number for each disease, and
      ii. Whether the medical exemption is temporary or permanent; or
   e. Are receiving immunizations required according to Table 7.2, and the number of doses of each vaccine received.
B. By November 15 of each year, a child care administrator shall submit to the Department a report, in a Department-provided format, that contains:
1. The name, the physical address, and, if different, the mailing address of the child care;
2. The date of the report;
3. The name, email address, and telephone number of an individual to contact for the child care;
4. The Department license or certificate number of the child care, as applicable;
5. The name of the child care administrator;
6. The number of children attending the child care who are at least 18 months of age and not attending a school, as of the date of submission of the report, in each of the following categories:
   a. Children who have received each immunization required according to Table 7.1;
   b. Children who have received an immunization required according to Table 7.1 or submitted a certification of medical exemption from immunization due to immunity, according to R9-6-706(D), for each of the diseases in R9-6-702, including the number for each disease for which laboratory evidence of immunity was submitted;
   c. Children who have an exemption from immunization for religious beliefs, according to R9-6-706(B), for one or more of the diseases in R9-6-702, including:
      i. The number for each disease, and
      ii. Whether the medical exemption is temporary or permanent; or
e. Children who are receiving immunizations required according to Table 7.2, and the number of doses of each vaccine received.

Table 1. **Immunization Requirements for Child Care or School Entry**

<table>
<thead>
<tr>
<th>Age at Entry into a Child Care or School</th>
<th>Number of Doses of Vaccine Required</th>
<th>Special Notes and Exceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;2 months</td>
<td>1 Hep B</td>
<td>(See Note 1)</td>
</tr>
<tr>
<td>2 through 3 months</td>
<td>1 DTP or DTaP</td>
<td>(See Note 1)</td>
</tr>
<tr>
<td></td>
<td>1 Polio</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Hib</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Hep B</td>
<td></td>
</tr>
<tr>
<td>4 through 5 months</td>
<td>2 DTP or DTaP</td>
<td>(See Note 1)</td>
</tr>
<tr>
<td></td>
<td>2 Polio</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 Hib</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 Hep B</td>
<td></td>
</tr>
<tr>
<td>6 through 11 months</td>
<td>4 DTP or DTaP</td>
<td>(Hib exception—See Note 2 for a child 7 months through 59 months of age.)</td>
</tr>
<tr>
<td></td>
<td>3 Polio</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3 Hib</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 Hep B</td>
<td></td>
</tr>
<tr>
<td>12 through 11 months</td>
<td>4 DTP or DTaP</td>
<td>(See Note 2)</td>
</tr>
<tr>
<td></td>
<td>3 Polio</td>
<td>(See Note 3)</td>
</tr>
<tr>
<td></td>
<td>1-4 Hib</td>
<td>(See Note 1)</td>
</tr>
<tr>
<td></td>
<td>1 MMR</td>
<td>(See Note 2)</td>
</tr>
<tr>
<td></td>
<td>3 Hep B</td>
<td>(See Note 8)</td>
</tr>
<tr>
<td></td>
<td>1 Varicella</td>
<td></td>
</tr>
<tr>
<td>15 through 59 months</td>
<td>4 DTP or DTaP</td>
<td>(See Note 2)</td>
</tr>
<tr>
<td></td>
<td>3 Polio</td>
<td>(See Note 3)</td>
</tr>
<tr>
<td></td>
<td>1-4 Hib</td>
<td>(See Note 1)</td>
</tr>
<tr>
<td></td>
<td>12 MMR</td>
<td>(See Note 2)</td>
</tr>
<tr>
<td></td>
<td>3 Hep B</td>
<td>(See Note 8)</td>
</tr>
<tr>
<td></td>
<td>1 Varicella</td>
<td></td>
</tr>
<tr>
<td>1 through 5 years (Only required for Maricopa County child care)</td>
<td>2 Hep A</td>
<td>(See Note 1)</td>
</tr>
<tr>
<td>Kindergarten or 1st grade entry</td>
<td>5 DTP or DTaP</td>
<td>Exception—A 5th dose is not required if the 4th dose of diphtheria-tetanus-containing vaccine was received after the 4th birthday.</td>
</tr>
<tr>
<td>4 through 6 years</td>
<td>4 Polio</td>
<td>Exception—A 4th dose is not required if the 3rd dose of polio was received after the 4th birthday.</td>
</tr>
<tr>
<td></td>
<td>2 MMR</td>
<td>(See Note 3)</td>
</tr>
<tr>
<td></td>
<td>2 Hep B</td>
<td>A child entering school shall receive a 2nd dose, 1 month or more after the date of the 1st dose.</td>
</tr>
<tr>
<td></td>
<td>1 Varicella</td>
<td>(See Note 8)</td>
</tr>
</tbody>
</table>
1. A child shall receive the 1st dose of Hep B no later than 15 days following child care entry. A child shall receive the 2nd dose of Hep B 4 weeks or more after the date of the 1st dose. A child who is 6 months of age or older shall receive the 3rd dose 25 months after the date of the 2nd dose and 4 months or more after the date of the 1st dose. For a child 11-15 years of age who receives the optional Merck Recombivax HB Adult Formulation vaccine, only 2 doses are required 4 or more months apart.

2. The recommended schedule for 4 dose Hib vaccine is 2, 4, and 6 months of age with a booster dose at 12-15 months of age. The optimal schedule for 3 dose Hib vaccine is 2 and 4 months of age with a booster dose at 12-15 months of age. There shall be a minimum interval of 4 weeks between each of the first 3 doses. A child shall receive a booster dose no earlier than 12 months of age and no earlier than 8 weeks after the previous dose. A child who starts the Hib series after 7 months of age may be required to complete a full 3 or 4 dose series. A child who starts Hib at 15 months of age or older shall receive 1 dose at 15-59 months of age.

3. A child who is 12 months of age or older, shall receive measles, mumps, and rubella vaccines as individual antigens or as a combined MMR vaccine. A child shall receive the 1st dose of MMR before school entry, or no later than 15 days following child care entry. A child who is 4 years of age or older and who is entering school shall receive a 2nd dose of MMR 1 month or more after the date of the 1st dose.

4. A child who is 1 through 5 years of age shall receive the 1st dose of hepatitis A vaccine no later than 15 days following child care entry in Maricopa County. A child shall receive a 2nd dose 6 months following the date of the 1st dose.

5. A child shall receive MV according to R9-6-702(C) no later than 15 days following school entry.

6. A child shall receive a dose of Tdap before the 2 doses of tetanus-diphtheria containing vaccine.

7. Polio vaccine is not required for individuals 18 years of age or older.
8. A child shall receive VAR according to R9-6-702(B) no later than 15 days following child care or school entry. A child who receives VAR at 12 months through 12 years of age shall receive one dose. A child who receives the 1st dose of VAR at 13 years of age or older shall receive the 2nd dose if 4 weeks or more have passed since the date of the 1st dose.

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Dose</th>
<th>Time Intervals, Special Notes, and Exceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. For a Child Younger Than 7 Years of Age: DTP or any combination of DTP or DTaP</td>
<td>1st</td>
<td>A child shall receive the 1st dose before school entry, or no later than 15 days following child care entry.</td>
</tr>
<tr>
<td></td>
<td>2nd</td>
<td>If 4 weeks or more have passed since the date of the 1st dose, a child shall receive the 2nd dose before school entry, or no later than 15 days following child care entry.</td>
</tr>
<tr>
<td></td>
<td>3rd</td>
<td>If 4 weeks or more have passed since the date of the 2nd dose, a child shall receive the 3rd dose before continued attendance at school, or no later than 15 days following continued attendance at child care.</td>
</tr>
<tr>
<td></td>
<td>4th</td>
<td>If 6 months or more have passed since the date of the 3rd dose, a child shall receive the 4th dose before continued attendance at school, or no later than 15 days following continued attendance at child care.</td>
</tr>
<tr>
<td></td>
<td>5th or more</td>
<td>A child shall receive a 5th dose before continued attendance at school, or no later than 15 days following continued attendance at child care. Exception — A 5th dose is not required if the child received the 4th dose after the child’s 4th birthday.</td>
</tr>
<tr>
<td>b. For a Child 7 through 10 Years of Age: Tetanus-diphtheria containing vaccines (no pertussis)</td>
<td>1st</td>
<td>A child shall receive a 1st dose before school entry.</td>
</tr>
<tr>
<td></td>
<td>2nd</td>
<td>If 4 weeks or more have passed since the date of the 1st dose, a child shall receive the 2nd dose before school entry.</td>
</tr>
<tr>
<td></td>
<td>3rd</td>
<td>If 6 months or more have passed since the date of the 2nd dose, a child shall receive the 3rd dose before school entry.</td>
</tr>
<tr>
<td></td>
<td>4th</td>
<td>A 4th dose is not required if the 1st dose of diphtheria-tetanus containing vaccine was received after 12 months of age.</td>
</tr>
<tr>
<td>c. For a Child 11 Years of Age and Older: Tetanus-diphtheria containing vaccines including 1 Tdap</td>
<td>1st</td>
<td>(See Note 2 below) A child shall receive a 1st dose before school entry.</td>
</tr>
<tr>
<td></td>
<td>2nd</td>
<td>If 4 weeks or more have passed since the date of the 1st dose, a child shall receive the 2nd dose before school entry.</td>
</tr>
<tr>
<td></td>
<td>3rd</td>
<td>If 6 months or more have passed since the date of the 2nd dose, a child shall receive the 3rd dose before school entry.</td>
</tr>
<tr>
<td></td>
<td>4th</td>
<td>Exception — A 4th dose is not required if the 1st dose of diphtheria-tetanus containing vaccine was received after 12 months of age.</td>
</tr>
</tbody>
</table>
2. Polio

<table>
<thead>
<tr>
<th>Dose</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>A child shall receive the 1st dose before school entry, or no later than 15 days following child care entry. (See Note 4 below.)</td>
</tr>
<tr>
<td>2nd</td>
<td>If 4 weeks or more have passed since the date of the 1st dose, a child shall receive the 2nd dose before school entry, or no later than 15 days following child care entry.</td>
</tr>
<tr>
<td>3rd</td>
<td>If 4 weeks or more have passed since the date of the 2nd dose, the child shall receive the 3rd dose before school entry, or no later than 15 days following child care entry.</td>
</tr>
<tr>
<td>4th</td>
<td>If 8 weeks or more have passed since the date of the 3rd dose, the child shall receive the 4th dose before school entry. Exception—A 4th dose is not required if the 3rd dose was received after the 4th birthday.</td>
</tr>
</tbody>
</table>

3. MMR—Measles, Mumps, Rubella

<table>
<thead>
<tr>
<th>Dose</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>A child who is 12 months of age or older shall receive the 1st dose before school entry, or no later than 15 days following child care entry.</td>
</tr>
<tr>
<td>2nd</td>
<td>If 1 month or more has passed since the date of the 1st dose, a child who is 4 years of age or older, entering kindergarten through 12th grade, shall receive the 2nd dose before school entry.</td>
</tr>
</tbody>
</table>

4. Hib—Haemophilus influenzae type b (Not required for individuals aged 5 years of age and older.)

<table>
<thead>
<tr>
<th>Dose</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st through 4th</td>
<td>A child who is younger than 5 years of age shall receive a dose no later than 15 days following child care entry. (See Note 4 below.)</td>
</tr>
</tbody>
</table>

5. Hep B—Hepatitis B

<table>
<thead>
<tr>
<th>Dose</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>A child shall receive the 1st dose before school entry, or no later than 15 days following child care entry.</td>
</tr>
<tr>
<td>2nd</td>
<td>If 4 weeks or more have passed since the date of the 1st dose, a child shall receive the 2nd dose before school entry, or no later than 15 days following child care entry.</td>
</tr>
<tr>
<td>3rd</td>
<td>If 2 months or more have passed since the date of the 2nd dose, and 4 months or more have passed since the date of the 1st dose and the child is at least 6 months of age, a child shall receive the 3rd dose before school entry, or no later than 15 days following child care entry. Exception—A child who is 11 through 15 years of age who is receiving the Merck Recombivax HB Adult Formulation vaccine is not required to receive a 3rd dose.</td>
</tr>
</tbody>
</table>

6. Hep A—Hepatitis A

Only required for Maricopa County child care

<table>
<thead>
<tr>
<th>Dose</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>A child who is 1 through 5 years of age shall receive the 1st dose no later than 15 days following child care entry.</td>
</tr>
<tr>
<td>2nd</td>
<td>If 6 months or more have passed since the date of the 1st dose, a child shall receive the 2nd dose no later than 15 days following child care entry.</td>
</tr>
</tbody>
</table>
A child shall receive MV according to R9-6-702(C) no later than 15 days following school entry.

2. A child shall receive a dose of Tdap before the 2 doses of tetanus-diphtheria containing vaccine.

3. Polio vaccine is not required for individuals 18 years of age or older.

4. A child who begins the Hib series at 7 months of age or older shall receive Hib according to the following schedule:

5. A child shall receive VAR according to R9-6-702(B) no later than 15 days following child care entry.

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### Varicella

**1st**

A child who is 12 months of age through 12 years shall receive one dose before school entry, or no later than 15 days following child care entry.

**2nd**

If one month or more has passed since the date of the first dose, a child who is 13 years of age or older shall receive a second dose.

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### Meningococcal

**1st**

A child who is 11 years old shall receive one dose of MV before school entry.

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#### Current Age (months) | Prior Immunization History | Recommended Regimen
---|---|---
7-11 | 1 dose | 1 dose at 7-11 months of age and a booster at least 2 months later at 12-15 months of age
7-11 | 2 doses | 4 dose at 7-11 months of age and a booster at least 2 months later at 12-15 months of age
12-14 | 1 dose before 12 months | 2 doses administered at least 2 months apart
12-14 | 2 doses before 12 months | 1 dose
15-59 | Any incomplete schedule | 1 dose

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**R9-6-708. Release of Immunization Information**

In addition to the persons who have access to immunization information according to A.R.S. § 36135(D), and consistent with the limitations in A.R.S. § 36135(E) and (H), the Department may release immunization information to:

1. An authorized representative of a state or local health agency for the control, investigation, analysis, or follow-up of disease;
2. A child care administrator, to determine the immunization status of a child in the child care;
3. An authorized representative of WIC, the federal Women, Infants, and Children Program administered by the Department, to determine the immunization status of children enrolled in WIC, the federal Women, Infants, and Children Program;
4. An individual or organization authorized by the Department, to conduct medical research to evaluate medical services and health-related services, as defined in A.R.S. § 36-401, health quality, immunizations data quality, and efficacy; or
5. An authorized representative of an out-of-state agency, including:
   a. a state health department,
   b. a local health agency,
   c. a school or child care,
   d. a health care provider, or
   e. a state agency that has legal custody of a child.
NOTICES OF EXPIRATION OF RULES
UNDER A.R.S. § 41-1056(J)

This section of the Arizona Administrative Register contains Notices of Expiration of Rules. Under A.R.S. § 41-1056(J), if an agency does not file a five-year rule review report with the Governor’s Regulatory Review Council (including a revised report); or if an agency does not file an extension before the due date of the report; or if an agency files an extension but does not submit a report within the extension period; the rules scheduled for review expire. The Council is required to notify the Secretary of State that the rules have expired and are no longer enforceable. The notice is published in the Register, and the rules are removed from the Code.

GOVERNOR’S REGULATORY REVIEW COUNCIL
NOTICE OF EXPIRATION OF RULES UNDER A.R.S. § 41-1056(J)

STATE LAND DEPARTMENT

1. Agency name: State Land Department
2. Title and its heading: 12, Natural Resources
3. Chapter and its heading: 5, State Land Department
4. Article and its heading: 9, Exchanges
5. As required by A.R.S. § 41-1056(J), the Council provides notice that the following rule expired as of July 31, 2017:

R12-5-921. Exchange of Road Rights-of-way over State Land

6. Signature is of Nicole O. Colyer

/s/
Nicole Ong Colyer
Chairwoman

Date of Signing
March 20, 2018
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 CHILD SAFETY
ADOPTION AGENCY LICENSING
[R18-67]

1. Title and its heading: 21, Child Safety
   Chapter and its heading: 9, Department of Child Safety - Adoption Agency Licensing
   Article and its heading: 2, Adoption Agency Licensing Requirements
   Section numbers: R21-9-202 and R21-9-207

2. The subject matter of the proposed rule: A.R.S. § 41-1008(E) states that a fee established under an exempt rulemaking is effective for two years. The Department charges a fee to provide licensing and licensing renewal for Adoption Agencies. These agencies assist in finding permanent homes for children in foster care. A regular rulemaking is required to re-establish the fees.

3. A citation to all published notices relating to the proceeding: Notice of Proposed Rulemaking: 24 A.A.R. 738, April 6, 2018 (in this issue)

4. The name and address of agency personnel with whom persons may communicate regarding the rule: Name: Kathryn Blades, Deputy General Counsel
   Department of Child Safety
   Address: 3003 N. Central Ave.
   Phoenix, AZ 85012
   Telephone: (602) 255-2527
   E-mail: Kathryn.Blades@azdcs.gov
   Or
   Name: Angie Trevino, Rules Development and Policy Specialist
   Telephone: (602) 255-2569
   E-mail: Angelica.Trevino@azdcs.gov
   Web site: https://dcs.az.gov/about/dcs-rules-rulemaking

5. The time during which the agency will accept written comments and the time and place where oral comments may be made: The Department does not intend to hold oral proceedings on these rules unless a written request for an oral proceeding is requested within 30-days of the publication of these rules. The Department will accept written comments on these rules for 30 days after the date of this publication. Comments may be submitted by:
   Email: PolicyUnit@azdcs.gov
   Mail: Department of Child Safety
   Family Resources and Policy Unit
   P.O. Box 6030
   Phoenix, AZ 85005

6. A timetable for agency decisions or other action on the proceeding, if known: A Notice of Final Rulemaking will be published upon the approval by the Governor’s Regulatory Review Council.
NOTICES OF PROPOSED DELEGATION AGREEMENTS

This section of the Arizona Administrative Register contains Notices of Proposed Delegation Agreements. Delegation agreements are not intergovernmental agreements pursuant to A.R.S. Title 11, Chapter 7, Article 3. For at least 30 days after publication of the Notice of Proposed Delegation Agreement in the Register, the agency shall provide persons the opportunity to submit in writing statements, arguments, data, and views on the proposed delegation agreement and shall provide an opportunity for a public hearing if there is sufficient interest. The delegating agency shall follow the procedures for delegation agreements specified in A.R.S. Title 41, Chapter 6, Article 8.

NOTICE OF PROPOSED DELEGATION AGREEMENT (AMENDMENT #1)

DEPARTMENT OF HEALTH SERVICES

[M18-37]

1. **Name of agency proposing the delegation agreement:**
   Arizona Department of Health Services

2. **The name of the political subdivision to which functions, powers, or duties of the agency are proposed to be delegated:**
   Pima County

3. **The name and address of agency personnel to whom persons may direct questions or comments:**
   Name: Eric Thomas, Office Chief
   Address: Arizona Department of Health Services, Public Health Preparedness, Office of Environmental Health
   150 N. 18th Ave., Suite 140
   Phoenix, AZ 85007
   Telephone: (602) 364-3142
   Fax: (602) 364-3146
   E-mail: Eric.Thomas@azdhs.gov
   or
   Name: Robert Lane, Chief
   Address: Arizona 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

4. **A summary of the delegation agreement and the subjects and issues involved:**
   On June 13, 2017, the Arizona Department of Health Services (Department) and Pima County (County) entered into a delegation agreement (AGR2017-052) authorizing the County to perform functions, powers, and duties on behalf of the Department for the enforcement of Food Safety and General Sanitation Control, Pure Food Control, and the Smoke-Free Arizona Act. According to Section 7 of AGR2017-052, the Department and the County by mutual approval may amend AGR2017-052. The Department is amending AGR2017-052 with the County to revise Appendix B, Section 1 and 3, to exclude County delegated responsibilities for food establishments for state prisons. Other minor changes to AGR2017-052 include updating a statutory citation, subsection references, and contact information for Department's Office of Environmental Health.

5. **Copies of the proposed delegation agreement may be obtained from the agency as follows:**
   Copies of the proposed delegation agreement may be requested, in writing, from the Arizona Department of Health Services, Office of Environmental Health, 150 N. 18th Ave., Suite 140, Phoenix, AZ 85007, or by telephone at (602) 364-3118.

6. **The schedule of public hearing on the proposed delegation agreement:**
   A person may submit written comments on the proposed delegation agreement to an individual listed in item #3 until the close of record on May 15, 2018 at 4:00 p.m. The Arizona Department of Health Services will hold a public hearing for the proposed delegation agreement on May 15, 2018 at 2:00 p.m. in Conference Room 215 A at the Arizona Department of Health Services, 150 N. 18th Ave., Phoenix, AZ 85007.
NOTICES OF SUBSTANTIVE POLICY STATEMENT

The Administrative Procedure Act (APA) requires the publication of Notices of Substantive Policy Statement issued by agencies (A.R.S. § 41-1013(B)(9)).

Substantive policy statements are written expressions which inform the general public of an agency's current approach to rule or regulation practice.

Substantive policy statements are advisory only. A substantive policy statement does not include internal procedural documents that only affect an agency's internal procedures and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the APA.

If you believe that a substantive policy statement does impose additional requirements or penalties on regulated parties, you may petition the agency under A.R.S. § 41-1033 for a review of the statement.

NOTICE OF SUBSTANTIVE POLICY STATEMENT
BOARD OF PSYCHOLOGIST EXAMINERS

1. Title of the Substantive Policy Statement and the substantive policy statement number by which the substantive policy statement is referenced:
   Calculation of Face-to-Face Patient Client Contact for Supervised Postdoctoral Experience (SP. 01-18)

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
   March 3, 2018

3. Summary of the contents of the substantive policy statement:
   This statement provides the public with general guidelines used by the Board in the consideration of applications wherein the applicant is requesting supervised postdoctoral experience to qualify for licensure. The Board is not limited by these guidelines.

4. Federal or state constitutional provision; federal or state statute, administrative rule, or regulation or final court judgment that underlies the substantive policy statement
   A.R.S. §§ 32-2061(13) and 32-2081

5. A statement as to whether the substantive policy statement is a new statement or review:
   This is a new substantive policy statement

6. The agency contact person who can answer questions about the substantive policy statement:
   Name: Jenna Jones
   Address: Arizona Board of Psychologist Examiners
   1740 W. Adams St., Suite 3403
   Phoenix, AZ 85007
   Telephone: (602) 542-3018
   Fax: (602) 542-8279
   Email: jenna.jones@psychboard.az.gov
   Web site: www.psychboard.az.gov

7. Information about where a person may obtain a copy of the substantive policy statement and the cost for obtaining the policy statement:
   This substantive policy statement is available at no charge at www.psychboard.az.gov or copies are available at the Arizona Board of Psychologist Examiners at a cost of $.25 per page
## 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
- **PS#** = Proposed Summary renumbered Section

#### FINAL SUMMARY
- **FSMN** = Final Summary new Section
- **FSMM** = Final Summary amended Section
- **FSMR** = Final Summary repealed Section
- **FS#** = 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
- **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
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**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.

<table>
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<tr>
<th>Deadline Date (paper only) Friday, 5:00 p.m.</th>
<th>Register Publication Date</th>
<th>Oral Proceeding may be scheduled on or after</th>
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**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.

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**GOVERNOR’S REGULATORY REVIEW COUNCIL DEADLINES FOR 2018**

<table>
<thead>
<tr>
<th>DEADLINE FOR PLACEMENT ON AGENDA*</th>
<th>FINAL MATERIALS SUBMITTED TO COUNCIL</th>
<th>DATE OF COUNCIL STUDY SESSION</th>
<th>DATE OF COUNCIL MEETING</th>
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* Materials must be submitted by **5 PM** on dates listed as a deadline for placement on a particular agenda. Placement on a particular agenda is not guaranteed.