



Arizona Administrative REGISTER

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Rules can be: made (all new text); amended (rules on file, changing text); repealed (removing text); or renumbered (moving rules to a different Section number).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 New rules in this publication (whether proposed or made) are denoted with underlining; repealed text is stricken.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

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This publication is available online for
free at www.azsos.gov.

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

PUBLICATION DEADLINES
Publication dates are published in the
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include file submittal dates with a
three-week turnaround from filing to
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Participate in the Process

Look for the Agency Notice

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

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

Attend a public hearing/meeting

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

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

Write the agency

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

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

Arizona Regular Rulemaking Process



Definitions

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Acronyms

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

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

APA – *Administrative Procedure Act*

A.R.S. – *Arizona Revised Statutes*

CFR – *Code of Federal Regulations*

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

FR – *Federal Register*

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

U.S.C. – *United States Code*

About Preambles

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

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

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



NOTICES OF PROPOSED RULEMAKING

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

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

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

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

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

**NOTICE OF PROPOSED RULEMAKING
TITLE 9. HEALTH SERVICES
CHAPTER 10. DEPARTMENT OF HEALTH SERVICES
HEALTH CARE INSTITUTIONS: LICENSING**

[R18-123]

PREAMBLE

<u>1. Article, Part, or Section Affected (as applicable)</u>	<u>Rulemaking Action</u>
R9-10-101	Amend
R9-10-102	Amend
R9-10-106	Amend
R9-10-120	Amend
R9-10-1021	Amend
R9-10-2001	New Section
R9-10-2002	New Section
R9-10-2003	New Section
R9-10-2004	New Section
R9-10-2005	New Section
R9-10-2006	New Section
R9-10-2007	New Section
R9-10-2008	New Section
R9-10-2009	New Section
R9-10-2010	New Section

2. Citations to the agency's statutory rulemaking authority to include authorizing statutes (general) and the implementing statutes (specific):

Authorizing statutes: A.R.S. §§ 36-132(A)(1), 36-136(G)

Implementing statutes: A.R.S. §§ 36-405, 36-132(A)(17), 36-406, 36-448.02, Laws 2018, Ch. 1, Laws 2018, Ch. 243

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. 513, March 9, 2018

4. The agency's contact person who can answer questions about the rulemaking:

Name: Colby Bower, Assistant Director
 Address: Arizona Department of Health Services
 Public Health Licensing Services
 150 N. 18th Ave., Suite 510
 Phoenix, AZ 85007
 Telephone: (602) 542-6383
 Fax: (602) 364-4808
 E-mail: Colby.Bower@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, to include an explanation about the rulemaking:

In order to ensure public health, safety, and welfare, Arizona Revised Statutes (A.R.S.) §§ 36-405 and 36-406 require the Arizona Department of Health Services (Department) to adopt rules establishing minimum standards and requirements for construction, modification, and licensure of health care institutions. Laws 2018, Ch. 1 requires the Department to license a pain management clinic as a health care institution and create rules for a pain management clinic that include informed consent requirements, the responsibilities of the medical director, reporting requirements, and physical examination requirements. To implement Laws 2018, Ch. 1, the Department plans to adopt the new rules in 9 A.A.C. 10, Article 20 and amend 9 A.A.C. 10, Articles 1 and 10. The 10 rules in Article 20 prescribe minimum standards for pain management clinics to ensure that opioids are prescribed and administered safely and ensure the health and safety of patients with regard to all aspects of a health care institution, including physical plant, equipment, sanitation, staffing, and recordkeeping. The Department received an exception from the rulemaking moratorium required by Executive Order 2018-2 and plans to complete a regular rulemaking to adopt rules for pain management clinics in 9 A.A.C. 10, Article 20 and to amend 9 A.A.C. 10, Article 1 and Article 10 as they relate to pain management clinics. The Department may make other changes to improve efficiency and effectiveness of the rules. During the regular rulemaking process, the Department plans to solicit comments from stakeholders on how the rules may be improved. The new rules will conform to rulemaking format and style requirements of the Governor's Regulatory Review Council and the Office of the Secretary of State. The Department may add additional Sections as necessary.

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 related to this rulemaking package.

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 Department believes that the benefits of the rulemaking outweigh the costs. Because the pain management clinics rules are new, there is not an economic, small business, and consumer statement (EIS) for the rules. The Department believes that affected persons include the Department, pain management clinics, medical practitioners, pain management clinic personnel members, and patients and their families. The annual costs and revenues are designated as minimal when less than \$1,000, moderate when between \$1,000 and \$10,000, and substantial when greater than \$10,000. A cost is listed as significant when meaningful or important, but not readily subject to quantification.

The Department will incur minimal-to-moderate costs as a result of adding a new class of health care institution because Department staff will oversee licensure and provide technical assistance and trainings. However, the addition of licensing fees from pain management clinics is expected to increase Department revenue and be used to cover increased costs. Pain management clinics will experience an increased regulatory burden as a result of the new licensure requirement; however, the rules are minimal and mostly specify practices that pain management clinics are already engaging in. Most pain management clinics will likely incur only minimal-to-moderate costs or no costs. A minority of pain management clinics may be required to undergo building renovations in response to the rules. For example, R9-10-2010 requires a bathroom on the premises if urine samples are collected and, while most pain management clinics already have one, some may have to add a bathroom.

Medical practitioners and pain management clinic personnel members are likely to incur no costs or only minimal additional costs as a result of the rules. For example, R9-10-2003 requires a personnel member certified in cardiopulmonary resuscitation to be available on the pain management clinic premises while patients are present and some personnel members may be required to undergo training to fulfill the requirement.

Patients and their families are unlikely to see cost increases because the rules are unlikely to increase pain management clinic costs enough for a pain management clinic to pass costs on to patients. Overall, the rules will potentially decrease opioid addiction as a result of additional safeguards on opioid prescribing and administration. Because addiction is expensive, patient costs will decrease minimally or even significantly as a result of reduced opioid use and fewer patients becoming addicted.

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

Name: Colby Bower, Assistant Director
Address: Arizona Department of Health Services
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150 N. 18th Ave., Suite 510
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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

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

The Department has scheduled the following oral proceeding:

Date and time: August 13, 2018, 10:00 a.m. - 11:00 a.m

Location: Conference Room 415B
150 N. 18th Ave.
Phoenix, AZ 85007

Close of record: 4:00 p.m., August 13, 2018

A person may submit written comments on the proposed rules no later than the close of record to either of the individuals listed in items #4 and #9. A person with a disability may request a reasonable accommodation, such as a sign language interpreter, by contacting Robert Lane at Robert.Lane@azdhs.gov or (602) 542-1020. Requests should be made as early as possible to allow time to arrange the accommodation.

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

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

A.R.S. § 36-407 prohibits a person from establishing, conducting, or maintaining “a health care institution or any class or subclass of health care institution unless that person holds a current and valid license issued by the [D]epartment specifying the class or subclass of health care institution the person is establishing, conducting or maintaining.” A health care institution license is specific to the licensee, class or subclass of health care institution, facility location, and scope of services provided. As such, a general permit is not applicable and is not used.

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

Not applicable

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

No business competitiveness analysis was received by the Department.

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

Not applicable

13. The full text of the rules follows:

**TITLE 9. HEALTH SERVICES
CHAPTER 10. DEPARTMENT OF HEALTH SERVICES
HEALTH CARE INSTITUTIONS: LICENSING**

ARTICLE 1. GENERAL

Section
R9-10-101. Definitions
R9-10-102. Health Care Institution Classes and Subclasses; Requirements
R9-10-106. Fees
R9-10-120. Opioid Prescribing and Treatment

ARTICLE 10. OUTPATIENT TREATMENT CENTERS

Section
R9-10-1021. Pain Management Services

ARTICLE 20. PAIN MANAGEMENT CLINICS

Section
R9-10-2001. Definitions
R9-10-2002. Application and Documentation Submission Requirements
R9-10-2003. Administration
R9-10-2004. Quality Management



- R9-10-2005. Medication Services
- R9-10-2006. Pain Management Services
- R9-10-2007. Patient Rights
- R9-10-2008. Medical Records
- R9-10-2009. Equipment and Safety Standards
- R9-10-2010. Environmental and Physical Plant Standards

ARTICLE 1.GENERAL

R9-10-101. Definitions

In addition to the definitions in A.R.S. § 36-401(A), the following definitions apply in this Chapter unless otherwise specified:

1. "Abortion clinic" has the same meaning as in A.R.S. § 36-449.01.
2. "Abuse" means:
 - a. The same:
 - i. For an individual 18 years of age or older, as in A.R.S. § 46-451; and
 - ii. For an individual less than 18 years of age, as in A.R.S. § 8-201;
 - b. A pattern of ridiculing or demeaning a patient;
 - c. Making derogatory remarks or verbally harassing a patient; or
 - d. Threatening to inflict physical harm on a patient.
3. "Accredited" has the same meaning as in A.R.S. § 36-422.
4. "Active malignancy" means a cancer for which:
 - a. A patient is undergoing treatment, such as through:
 - i. One or more surgical procedures to remove the cancer;
 - ii. Chemotherapy, as defined in A.A.C. R9-4-401; or
 - iii. Radiation treatment, as defined in A.A.C. R9-4-401;
 - b. There is no treatment; or
 - c. A patient is refusing treatment.
- 4-5. "Activities of daily living" means ambulating, bathing, toileting, grooming, eating, and getting in or out of a bed or a chair.
- 5-6. "Adjacent" means not intersected by:
 - a. Property owned, operated, or controlled by a person other than the applicant or licensee; or
 - b. A public thoroughfare.
- 6-7. "Administrative completeness review time-frame" has the same meaning as in A.R.S. § 41-1072.
- 7-8. "Administrative office" means a location used by personnel for recordkeeping and record retention but not for providing medical services, nursing services, or health related services.
- 8-9. "Admission" means, after completion of an individual's screening or registration by a health care institution, the individual begins receiving physical health services or behavioral health services and is accepted as a patient of the health care institution.
- 9-10. "Adult" has the same meaning as in A.R.S. § 1-215.
- 10-11. "Adult behavioral health therapeutic home" means a residence that provides room and board, assists in acquiring daily living skills, coordinates transportation to scheduled appointments, monitors behaviors, assists in the self administration of medication, and provides feedback to a case manager related to behavior for an individual 18 years of age or older based on the individual's behavioral health issue and need for behavioral health services and may provide behavioral health services under the clinical oversight of a behavioral health professional.
- 11-12. "Adverse reaction" means an unexpected outcome that threatens the health or safety of a patient as a result of a medical service, nursing service, or health-related service provided to the patient.
- 12-13. "Ancillary services" means services other than medical services, nursing services, or health-related services provided to a patient.
- 13-14. "Anesthesiologist" means a physician granted clinical privileges to administer anesthesia.
- 14-15. "Applicant" means a governing authority requesting:
 - a. Approval of a health care institution's architectural plans and specifications, or
 - b. A health care institution license.
- 15-16. "Application packet" means the information, documents, and fees required by the Department for the:
 - a. Approval of a health care institution's modification or construction, or
 - b. Licensing of a health care institution.
- 16-17. "Assessment" means an analysis of a patient's need for physical health services or behavioral health services to determine which services a health care institution will provide to the patient.
- 17-18. "Assistance in the self-administration of medication" means restricting a patient's access to the patient's medication and providing support to the patient while the patient takes the medication to ensure that the medication is taken as ordered.
- 18-19. "Attending physician" means a physician designated by a patient to participate in or coordinate the medical services provided to the patient.
- 19-20. "Authenticate" means to establish authorship of a document or an entry in a medical record by:
 - a. A written signature;
 - b. An individual's initials, if the individual's written signature appears on the document or in the medical record;
 - c. A rubber-stamp signature; or
 - d. An electronic signature code.
- 20-21. "Authorized service" means specific medical services, nursing services, or health-related services provided by a specific health care institution class or subclass for which the health care institution is required to obtain approval from the Department before providing the medical services, nursing services, or health-related services.



21-22. “Available” means:

- a. For an individual, the ability to be contacted and to provide an immediate response by any means possible;
- b. For equipment and supplies, physically retrievable at a health care institution; and
- c. For a document, retrievable by a health care institution or accessible according to the applicable timeframes in this Chapter.

22-23. “Behavioral care”:

- a. Means limited behavioral health services, provided to a patient whose primary admitting diagnosis is related to the patient's need for physical health services, that include:
 - i. Assistance with the patient's psychosocial interactions to manage the patient's behavior that can be performed by an individual without a professional license or certificate including:
 - (1) Direction provided by a behavioral health professional, and
 - (2) Medication ordered by a medical practitioner or behavioral health professional; or
 - ii. Behavioral health services provided by a behavioral health professional on an intermittent basis to address the patient's significant psychological or behavioral response to an identifiable stressor or stressors; and
- b. Does not include court-ordered behavioral health services.

23-24. “Behavioral health facility” means a behavioral health inpatient facility, a behavioral health residential facility, a substance abuse transitional facility, a behavioral health specialized transitional facility, an outpatient treatment center that only provides behavioral health services, an adult behavioral health therapeutic home, a behavioral health respite home, or a counseling facility.

24-25. “Behavioral health inpatient facility” means a health care institution that provides continuous treatment to an individual experiencing a behavioral health issue that causes the individual to:

- a. Have a limited or reduced ability to meet the individual's basic physical needs;
- b. Suffer harm that significantly impairs the individual's judgment, reason, behavior, or capacity to recognize reality;
- c. Be a danger to self;
- d. Be a danger to others;
- e. Be persistently or acutely disabled as defined in A.R.S. § 36-501; or
- f. Be gravely disabled.

25-26. “Behavioral health issue” means an individual's condition related to a mental disorder, a personality disorder, substance abuse, or a significant psychological or behavioral response to an identifiable stressor or stressors.

26-27. “Behavioral health observation/stabilization services” means crisis services provided, in an outpatient setting, to an individual whose behavior or condition indicates that the individual:

- a. Requires nursing services,
- b. May require medical services, and
- c. May be a danger to others or a danger to self.

27-28. “Behavioral health paraprofessional” means an individual who is not a behavioral health professional who provides, under supervision by a behavioral health professional, the following services to a patient to address the patient's behavioral health issue:

- a. Services that, if provided in a setting other than a health care institution would be required to be provided by an individual licensed under A.R.S. Title 32, Chapter 33; or
- b. Health-related services.

28-29. “Behavioral health professional” means:

- a. An individual licensed under A.R.S. Title 32, Chapter 33, whose scope of practice allows the individual to:
 - i. Independently engage in the practice of behavioral health as defined in A.R.S. § 32-3251; or
 - ii. Except for a licensed substance abuse technician, engage in the practice of behavioral health as defined in A.R.S. § 32-3251 under direct supervision as defined in A.A.C. R4-6-101;
- b. A psychiatrist as defined in A.R.S. § 36-501;
- c. A psychologist as defined in A.R.S. § 32-2061;
- d. A physician;
- e. A behavior analyst as defined in A.R.S. § 32-2091;
- f. A registered nurse practitioner licensed as an adult psychiatric and mental health nurse; or
- g. A registered nurse.

29-30. “Behavioral health residential facility” means a health care institution that provides treatment to an individual experiencing a behavioral health issue that:

- a. Limits the individual's ability to be independent, or
- b. Causes the individual to require treatment to maintain or enhance independence.

30-31. “Behavioral health respite home” means a residence where respite care services, which may include assistance in the self-administration of medication, are provided to an individual based on the individual's behavioral health issue and need for behavioral health services.

31-32. “Behavioral health specialized transitional facility” means a health care institution that provides inpatient behavioral health services and physical health services to an individual determined to be a sexually violent person according to A.R.S. Title 36, Chapter 37.

32-33. “Behavioral health staff” means a:

- a. Behavioral health paraprofessional,
- b. Behavioral health technician, or
- c. Personnel member in a nursing care institution or assisted living facility who provides behavioral care.

33-34. “Behavioral health technician” means an individual who is not a behavioral health professional who provides, with clinical oversight by a behavioral health professional, the following services to a patient to address the patient's behavioral health issue:



- a. Services that, if provided in a setting other than a health care institution would be required to be provided by an individual licensed under A.R.S. Title 32, Chapter 33; or
 - b. Health-related services.
- ~~35.~~ 35. “Benzodiazepine” means any one of a class of sedative-hypnotic medications, characterized by a chemical structure that includes a benzene ring linked to a seven-membered ring containing two nitrogen atoms, that are commonly used in the treatment of anxiety.
- ~~34-36.~~ 34-36. “Biohazardous medical waste” has the same meaning as in A.A.C. R18-13-1401.
- ~~35-37.~~ 35-37. “Calendar day” means each day, not including the day of the act, event, or default from which a designated period of time begins to run, but including the last day of the period unless it is a Saturday, Sunday, statewide furlough day, or legal holiday, in which case the period runs until the end of the next day that is not a Saturday, Sunday, statewide furlough day, or legal holiday.
- ~~36-38.~~ 36-38. “Case manager” means an individual assigned by an entity other than a health care institution to coordinate the physical health services or behavioral health services provided to a patient at the health care institution.
- ~~37-39.~~ 37-39. “Certification” means, in this Article, a written statement that an item or a system complies with the applicable requirements incorporated by reference in A.A.C. R9-1-412.
- ~~38-40.~~ 38-40. “Certified health physicist” means an individual recognized by the American Board of Health Physics as complying with the health physics criteria and examination requirements established by the American Board of Health Physics.
- ~~39-41.~~ 39-41. “Change in ownership” means conveyance of the ability to appoint, elect, or otherwise designate a health care institution's governing authority from an owner of the health care institution to another person.
- ~~40-42.~~ 40-42. “Chief administrative officer” or “administrator” means an individual designated by a governing authority to implement the governing authority's direction in a health care institution.
- ~~41-43.~~ 41-43. “Clinical laboratory services” means the biological, microbiological, serological, chemical, immunohematological, hematological, biophysical, cytological, pathological, or other examination of materials derived from the human body for the purpose of providing information for the diagnosis, prevention, or treatment of a disease or impairment of a human being, or for the assessment of the health of a human being, including procedures to determine, measure, or otherwise describe the presence or absence of various substances or organisms in the body.
- ~~42-44.~~ 42-44. “Clinical oversight” means:
- a. Monitoring the behavioral health services provided by a behavioral health technician to ensure that the behavioral health technician is providing the behavioral health services according to the health care institution's policies and procedures,
 - b. Providing on-going review of a behavioral health technician's skills and knowledge related to the provision of behavioral health services,
 - c. Providing guidance to improve a behavioral health technician's skills and knowledge related to the provision of behavioral health services, and
 - d. Recommending training for a behavior health technician to improve the behavioral health technician's skills and knowledge related to the provision of behavioral health services.
- ~~43-45.~~ 43-45. “Clinical privileges” means authorization to a medical staff member to provide medical services granted by a governing authority or according to medical staff bylaws.
- ~~44-46.~~ 44-46. “Collaborating health care institution” means a health care institution licensed to provide outpatient behavioral health services that has a written agreement with an adult behavioral health therapeutic home or a behavioral health respite home to:
- a. Coordinate behavioral health services provided to a resident at the adult behavioral health therapeutic home or a recipient at a behavioral health respite home, and
 - b. Work with the provider to ensure a resident at the adult behavioral health therapeutic home or a recipient at a behavioral health respite home receives behavioral health services according to the resident's treatment plan.
- ~~45-47.~~ 45-47. “Communicable disease” has the same meaning as in A.R.S. § 36-661.
- ~~46-48.~~ 46-48. “Conspicuously posted” means placed:
- a. At a location that is visible and accessible; and
 - b. Unless otherwise specified in the rules, within the area where the public enters the premises of a health care institution.
- ~~47-49.~~ 47-49. “Consultation” means an evaluation of a patient requested by a medical staff member or personnel member.
- ~~48-50.~~ 48-50. “Contracted services” means medical services, nursing services, health-related services, ancillary services, or environmental services provided according to a documented agreement between a health care institution and the person providing the medical services, nursing services, health-related services, ancillary services, or environmental services.
- ~~49-51.~~ 49-51. “Contractor” has the same meaning as in A.R.S. § 32-1101.
- ~~50-52.~~ 50-52. “Controlled substance” has the same meaning as in A.R.S. § 36-2501.
- ~~51-53.~~ 51-53. “Counseling” has the same meaning as “practice of professional counseling” in A.R.S. § 32-3251.
- ~~52-54.~~ 52-54. “Counseling facility” means a health care institution that only provides counseling, which may include:
- a. DUI screening, education, or treatment according to the requirements in 9 A.A.C. 20, Article 1; or
 - b. Misdemeanor domestic violence offender treatment according to the requirements in 9 A.A.C. 20, Article 2.
- ~~53-55.~~ 53-55. “Court-ordered evaluation” has the same meaning as “evaluation” in A.R.S. § 36-501.
- ~~54-56.~~ 54-56. “Court-ordered pre-petition screening” has the same meaning as in A.R.S. § 36-501.
- ~~55-57.~~ 55-57. “Court-ordered treatment” means treatment provided according to A.R.S. Title 36, Chapter 5.
- ~~56-58.~~ 56-58. “Crisis services” means immediate and unscheduled behavioral health services provided to a patient to address an acute behavioral health issue affecting the patient.
- ~~57-59.~~ 57-59. “Current” means up-to-date, extending to the present time.
- ~~58-60.~~ 58-60. “Daily living skills” means activities necessary for an individual to live independently and include meal preparation, laundry, housecleaning, home maintenance, money management, and appropriate social interactions.
- ~~59-61.~~ 59-61. “Danger to others” has the same meaning as in A.R.S. § 36-501.
- ~~60-62.~~ 60-62. “Danger to self” has the same meaning as in A.R.S. § 36-501.



- 61-63. "Detoxification services" means behavioral health services and medical services provided to an individual to:
- Reduce or eliminate the individual's dependence on alcohol or other drugs, or
 - Provide treatment for the individual's signs or symptoms of withdrawal from alcohol or other drugs.
- 62-64. "Diagnostic procedure" means a method or process performed to determine whether an individual has a medical condition or behavioral health issue.
- 63-65. "Dialysis" means the process of removing dissolved substances from a patient's body by diffusion from one fluid compartment to another across a semi-permeable membrane.
- 64-66. "Dialysis services" means medical services, nursing services, and health-related services provided to a patient receiving dialysis.
- 65-67. "Dialysis station" means a designated treatment area approved by the Department for use by a patient receiving dialysis or dialysis services.
- 66-68. "Dialyzer" means an apparatus containing semi-permeable membranes used as a filter to remove wastes and excess fluid from a patient's blood.
- 67-69. "Disaster" means an unexpected occurrence that adversely affects a health care institution's ability to provide services.
- 68-70. "Discharge" means a documented termination of services to a patient by a health care institution.
- 69-71. "Discharge instructions" means documented information relevant to a patient's medical condition or behavioral health issue provided by a health care institution to the patient or the patient's representative at the time of the patient's discharge.
- 70-72. "Discharge planning" means a process of establishing goals and objectives for a patient in preparation for the patient's discharge.
- 71-73. "Discharge summary" means a documented brief review of services provided to a patient, current patient status, and reasons for the patient's discharge.
- 72-74. "Disinfect" means to clean in order to prevent the growth of or to destroy disease-causing microorganisms.
- 73-75. "Documentation" or "documented" means information in written, photographic, electronic, or other permanent form.
- 74-76. "Drill" means a response to a planned, simulated event.
- 75-77. "Drug" has the same meaning as in A.R.S. § 32-1901.
- 76-78. "Electronic" has the same meaning as in A.R.S. § 44-7002.
- 77-79. "Electronic signature" has the same meaning as in A.R.S. § 44-7002.
- 78-80. "Emergency" means an immediate threat to the life or health of a patient.
- 79-81. "Emergency medical services provider" has the same meaning as in A.R.S. § 36-2201.
82. "End-of-life" means that a patient has a documented life expectancy of six months or less.
- 80-83. "Environmental services" means activities such as housekeeping, laundry, facility maintenance, or equipment maintenance.
- 81-84. "Equipment" means, in this Article, an apparatus, a device, a machine, or a unit that is required to comply with the specifications incorporated by reference in A.A.C. R9-1-412.
- 82-85. "Exploitation" has the same meaning as in A.R.S. § 46-451.
- 83-86. "Factory-built building" has the same meaning as in A.R.S. § 41-2142.
- 84-87. "Family" or "family member" means an individual's spouse, sibling, child, parent, grandparent, or another individual designated by the individual.
- 85-88. "Food services" means the storage, preparation, serving, and cleaning up of food intended for consumption in a health care institution.
- 86-89. "Garbage" has the same meaning as in A.A.C. R18-13-302.
- 87-90. "General consent" means documentation of an agreement from an individual or the individual's representative to receive physical health services to address the individual's medical condition or behavioral health services to address the individual's behavioral health issues.
- 88-91. "General hospital" means a subclass of hospital that provides surgical services and emergency services.
- 89-92. "Gravely disabled" has the same meaning as in A.R.S. § 36-501.
- 90-93. "Hazard" or "hazardous" means a condition or situation where a patient or other individual may suffer physical injury.
- 91-94. "Health care directive" has the same meaning as in A.R.S. § 36-3201.
- 92-95. "Hemodialysis" means the process for removing wastes and excess fluids from a patient's blood by passing the blood through a dialyzer.
- 93-96. "Home health agency" has the same meaning as in A.R.S. § 36-151.
- 94-97. "Home health aide" means an individual employed by a home health agency to provide home health services under the direction of a registered nurse or therapist.
- 95-98. "Home health aide services" means those tasks that are provided to a patient by a home health aide under the direction of a registered nurse or therapist.
- 96-99. "Home health services" has the same meaning as in A.R.S. § 36-151.
- 97-100. "Hospice inpatient facility" means a subclass of hospice that provides hospice services to a patient on a continuous basis with the expectation that the patient will remain on the hospice's premises for 24 hours or more.
- 98-101. "Hospital" means a class of health care institution that provides, through an organized medical staff, inpatient beds, medical services, continuous nursing services, and diagnosis or treatment to a patient.
- 99-102. "Immediate" means without delay.
- 100-103. "Incident" means an unexpected occurrence that harms or has the potential to harm a patient, while the patient is:
- On the premises of a health care institution, or
 - Not on the premises of a health care institution but directly receiving physical health services or behavioral health services from a personnel member who is providing the physical health services or behavioral health services on behalf of the health care institution.
- 101-104. "Infection control" means to identify, prevent, monitor, and minimize infections.



- ~~102-105.~~ "Informed consent" means:
 - a. Advising a patient of a proposed treatment, surgical procedure, psychotropic drug, or diagnostic procedure; alternatives to the treatment, surgical procedure, psychotropic drug, or diagnostic procedure; and associated risks and possible complications; and
 - b. Obtaining documented authorization for the proposed treatment, surgical procedure, psychotropic drug, or diagnostic procedure from the patient or the patient's representative.
- ~~103-106.~~ "In-service education" means organized instruction or information that is related to physical health services or behavioral health services and that is provided to a medical staff member, personnel member, employee, or volunteer.
- ~~104-107.~~ "Interval note" means documentation updating a patient's:
 - a. Medical condition after a medical history and physical examination is performed, or
 - b. Behavioral health issue after an assessment is performed.
- ~~105-108.~~ "Isolation" means the separation, during the communicable period, of infected individuals from others, to limit the transmission of infectious agents.
- ~~106-109.~~ "Leased facility" means a facility occupied or used during a set time period in exchange for compensation.
- ~~107-110.~~ "License" means:
 - a. Written approval issued by the Department to a person to operate a class or subclass of health care institution at a specific location; or
 - b. Written approval issued to an individual to practice a profession in this state.
- ~~108-111.~~ "Licensed occupancy" means the total number of individuals for whom a health care institution is authorized by the Department to provide crisis services in a unit providing behavioral health observation/stabilization services.
- ~~109-112.~~ "Licensee" means an owner approved by the Department to operate a health care institution.
- ~~110-113.~~ "Manage" means to implement policies and procedures established by a governing authority, an administrator, or an individual providing direction to a personnel member.
- ~~111-114.~~ "Medical condition" means the state of a patient's physical or mental health, including the patient's illness, injury, or disease.
- ~~112-115.~~ "Medical director" means a physician who is responsible for the coordination of medical services provided to patients in a health care institution.
- ~~113-116.~~ "Medical history" means an account of a patient's health, including past and present illnesses, diseases, or medical conditions.
- ~~114-117.~~ "Medical practitioner" means a physician, physician assistant, or registered nurse practitioner.
- ~~115-118.~~ "Medical record" has the same meaning as "medical records" in A.R.S. § 12-2291.
- ~~116-119.~~ "Medical staff" means physicians and other individuals licensed pursuant to A.R.S. Title 32 who have clinical privileges at a health care institution.
- ~~117-120.~~ "Medical staff by-laws" means standards, approved by the medical staff and the governing authority, that provide the framework for the organization, responsibilities, and self-governance of the medical staff.
- ~~118-121.~~ "Medical staff member" means an individual who is part of the medical staff of a health care institution.
- ~~119-122.~~ "Medication" means one of the following used to maintain health or to prevent or treat a medical condition or behavioral health issue:
 - a. Biologicals as defined in A.A.C. R18-13-1401,
 - b. Prescription medication as defined in A.R.S. § 32-1901, or
 - c. Nonprescription medication as defined in A.R.S. § 32-1901.
- ~~120-123.~~ "Medication administration" means restricting a patient's access to the patient's medication and providing the medication to the patient or applying the medication to the patient's body, as ordered by a medical practitioner.
- ~~121-124.~~ "Medication error" means:
 - a. The failure to administer an ordered medication;
 - b. The administration of a medication not ordered; or
 - c. The administration of a medication:
 - i. In an incorrect dosage,
 - ii. More than 60 minutes before or after the ordered time of administration unless ordered to do so, or
 - iii. By an incorrect route of administration.
- ~~122-125.~~ "Mental disorder" means the same as in A.R.S. § 36-501.
- ~~123-126.~~ "Mobile clinic" means a movable structure that:
 - a. Is not physically attached to a health care institution's facility;
 - b. Provides medical services, nursing services, or health related service to an outpatient under the direction of the health care institution's personnel; and
 - c. Is not intended to remain in one location indefinitely.
- ~~124-127.~~ "Monitor" or "monitoring" means to check systematically on a specific condition or situation.
- ~~125-128.~~ "Neglect" has the same meaning:
 - a. For an individual less than 18 years of age, as in A.R.S. § 8-201; and
 - b. For an individual 18 years of age or older, as in A.R.S. § 46-451.
- ~~126-129.~~ "Nephrologist" means a physician who is board eligible or board certified in nephrology by a professional credentialing board.
- ~~127-130.~~ "Nurse" has the same meaning as "registered nurse" or "practical nurse" as defined in A.R.S. § 32-1601.
- ~~128-131.~~ "Nursing personnel" means individuals authorized according to A.R.S. § Title 32, Chapter 15 to provide nursing services.
- ~~129-132.~~ "Observation chair" means a physical piece of equipment that:
 - a. Is located in a designated area where behavioral health observation/stabilization services are provided,
 - b. Allows an individual to fully recline, and



- c. Is used by the individual while receiving crisis services.
- ~~130-133.~~ “Occupational therapist” has the same meaning as in A.R.S. § 32-3401.
- ~~131-134.~~ “Occupational therapist assistant” has the same meaning as in A.R.S. § 32-3401.
- ~~132-135.~~ “Ombudsman” means a resident advocate who performs the duties described in A.R.S. § 46-452.02.
- ~~133-136.~~ “On-call” means a time during which an individual is available and required to come to a health care institution when requested by the health care institution.
- ~~137.~~ “Opioid” means a controlled substance, as defined in A.R.S. § 36-2501, that meets the definition of “opiate” in A.R.S. § 36-2501.
- ~~138.~~ “Opioid antagonist” means a prescription medication, as defined in A.R.S. § 32-1901, that:
- Is approved by the U.S. Department of Health and Human Services, Food and Drug Administration; and
 - When administered, reverses, in whole or in part, the pharmacological effects of an opioid in the body.
- ~~134-139.~~ “Opioid treatment” means providing medical services, nursing services, health-related services, and ancillary services to a patient receiving an opioid agonist treatment medication for opiate addiction.
- ~~135-140.~~ “Opioid agonist treatment medication” means a prescription medication that is approved by the U.S. Food and Drug Administration under 21 U.S.C. § 355 for use in the treatment of opiate addiction.
- ~~136-141.~~ “Order” means instructions to provide
- Physical health services to a patient from a medical practitioner or as otherwise provided by law; or
 - Behavioral health services to a patient from a behavioral health professional.
- ~~137-142.~~ “Orientation” means the initial instruction and information provided to an individual before the individual starts work or volunteer services in a health care institution.
- ~~138-143.~~ “Outing” means a social or recreational activity that:
- Occurs away from the premises,
 - Is not part of a behavioral health inpatient facility’s or behavioral health residential facility’s daily routine, and
 - Lasts longer than four hours.
- ~~139-144.~~ “Outpatient surgical center” means a class of health care institution that has the facility, staffing, and equipment to provide surgery and anesthesia services to a patient whose recovery, in the opinions of the patient’s surgeon and, if an anesthesiologist would be providing anesthesia services to the patient, the anesthesiologist, does not require inpatient care in a hospital.
- ~~140-145.~~ “Outpatient treatment center” means a class of health care institution without inpatient beds that provides physical health services or behavioral health services for the diagnosis and treatment of patients.
- ~~141-146.~~ “Overall time-frame” means the same as in A.R.S. § 41-1072.
- ~~142-147.~~ “Owner” means a person who appoints, elects, or designates a health care institution’s governing authority.
- ~~148.~~ “Pain management clinic” has the same meaning as in A.R.S. § 36-448.01.
- ~~143-149.~~ “Participant” means a patient receiving physical health services or behavioral health services from an adult day health care facility or a substance abuse transitional facility.
- ~~144-150.~~ Participant’s representative” means the same as “patient’s representative” for a participant.
- ~~145-151.~~ “Patient” means an individual receiving physical health services or behavioral health services from a health care institution.
- ~~146-152.~~ “Patient follow-up instructions” means information relevant to a patient’s medical condition or behavioral health issue that is provided to the patient, the patient’s representative, or a health care institution.
- ~~147-153.~~ “Patient’s representative” means:
- A patient’s legal guardian;
 - If a patient is less than 18 years of age and not an emancipated minor, the patient’s parent;
 - If a patient is 18 years of age or older or an emancipated minor, an individual acting on behalf of the patient with the written consent of the patient or patient’s legal guardian; or
 - A surrogate as defined in A.R.S. § 36-3201.
- ~~148-154.~~ “Person” means the same as in A.R.S. § 1-215 and includes a governmental agency.
- ~~149-155.~~ “Personnel member” means, except as defined in specific Articles in this Chapter and excluding a medical staff member, a student, or an intern, an individual providing physical health services or behavioral health services to a patient.
- ~~150-156.~~ “Pest control program” means activities that minimize the presence of insects and vermin in a health care institution to ensure that a patient’s health and safety is not at risk.
- ~~151-157.~~ “Pharmacist” has the same meaning as in A.R.S. § 32-1901.
- ~~152-158.~~ “Physical examination” means to observe, test, or inspect an individual’s body to evaluate health or determine cause of illness, injury, or disease.
- ~~153-159.~~ “Physical health services” means medical services, nursing services, health-related services, or ancillary services provided to an individual to address the individual’s medical condition.
- ~~154-160.~~ “Physical therapist” has the same meaning as in A.R.S. § 32-2001.
- ~~155-161.~~ “Physical therapist assistant” has the same meaning as in A.R.S. § 32-2001.
- ~~156-162.~~ “Physician assistant” has the same meaning as in A.R.S. § 32-2501.
- ~~157-163.~~ “Premises” means property that is designated by an applicant or licensee and licensed by the Department as part of a health care institution where physical health services or behavioral health services are provided to a patient.
- ~~164.~~ “Prescribe” means to issue written or electronic instructions to a pharmacist to deliver to the ultimate user, or another individual on the ultimate user’s behalf, a specific dose of a specific medication in a specific quantity and route of administration.
- ~~158-165.~~ “Professional credentialing board” means a non-governmental organization that designates individuals who have met or exceeded established standards for experience and competency in a specific field.
- ~~159-166.~~ “Progress note” means documentation by a medical staff member, nurse, or personnel member of:
- An observed patient response to a physical health service or behavioral health service provided to the patient,
 - A patient’s significant change in condition, or



- c. Observed behavior of a patient related to the patient’s medical condition or behavioral health issue.
- ~~160-167.~~ “PRN” means *pro re nata* or given as needed.
- ~~161-168.~~ “Project” means specific construction or modification of a facility stated on an architectural plans and specifications approval application.
- ~~162-169.~~ “Provider” means an individual to whom the Department issues a license to operate an adult behavioral health therapeutic home or a behavioral health respite home in the individual’s place of residence.
- ~~163-170.~~ “Provisional license” means the Department’s written approval to operate a health care institution issued to an applicant or licensee that is not in substantial compliance with the applicable laws and rules for the health care institution.
- ~~164-171.~~ “Psychotropic medication” means a chemical substance that:
 - a. Crosses the blood-brain barrier and acts primarily on the central nervous system where it affects brain function, resulting in alterations in perception, mood, consciousness, cognition, and behavior; and
 - b. Is provided to a patient to address the patient’s behavioral health issue.
- ~~165-172.~~ “Quality management program” means ongoing activities designed and implemented by a health care institution to improve the delivery of medical services, nursing services, health-related services, and ancillary services provided by the health care institution.
- ~~166-173.~~ “Recovery care center” has the same meaning as in A.R.S. § 36-448.51.
- ~~167-174.~~ “Referral” means providing an individual with a list of the class or subclass of health care institution or type of health care professional that may be able to provide the behavioral health services or physical health services that the individual may need and may include the name or names of specific health care institutions or health care professionals.
- ~~168-175.~~ “Registered dietitian” means an individual approved to work as a dietitian by the American Dietetic Association’s Commission on Dietetic Registration.
- ~~169-176.~~ “Registered nurse” has the same meaning as in A.R.S. § 32-1601.
- ~~170-177.~~ “Registered nurse practitioner” has the same meaning as A.R.S. § 32-1601.
- ~~171-178.~~ “Regular basis” means at recurring, fixed, or uniform intervals.
- ~~172-179.~~ “Research” means the use of a human subject in the systematic study, observation, or evaluation of factors related to the prevention, assessment, treatment, or understanding of a medical condition or behavioral health issue.
- ~~173-180.~~ “Resident” means an individual living in and receiving physical health services or behavioral health services from a nursing care institution, a behavioral health residential facility, an assisted living facility, or an adult behavioral health therapeutic home.
- ~~174-181.~~ “Resident’s representative” means the same as “patient’s representative” for a resident.
- ~~175-182.~~ “Respiratory care services” has the same meaning as “practice of respiratory care” as defined in A.R.S. § 32-3501.
- ~~176-183.~~ “Respiratory therapist” has the same meaning as in A.R.S. § 32-3501.
- ~~177-184.~~ “Respite services” means respite care services provided to an individual who is receiving behavioral health services.
- ~~178-185.~~ “Restraint” means any physical or chemical method of restricting a patient’s freedom of movement, physical activity, or access to the patient’s own body.
- ~~179-186.~~ “Risk” means potential for an adverse outcome.
- ~~180-187.~~ “Room” means space contained by a floor, a ceiling, and walls extending from the floor to the ceiling that has at least one door.
- ~~181-188.~~ “Rural general hospital” means a subclass of hospital having 50 or fewer inpatient beds and located more than 20 surface miles from a general hospital or another rural general hospital that requests to be and is licensed as a rural general hospital rather than a general hospital.
- ~~182-189.~~ “Satellite facility” has the same meaning as in A.R.S. § 36-422.
- ~~183-190.~~ “Scope of services” means a list of the behavioral health services or physical health services the governing authority of a health care institution has designated as being available to a patient at the health care institution.
- ~~184-191.~~ “Seclusion” means the involuntary solitary confinement of a patient in a room or an area where the patient is prevented from leaving.
- 192. “Sedative-hypnotic medication” means any one of several classes of drugs that have sleep-inducing, anti-anxiety, anti-convulsant, and muscle-relaxing properties.
- ~~185-193.~~ “Self-administration of medication” means a patient having access to and control of the patient’s medication and may include the patient receiving limited support while taking the medication.
- ~~186-194.~~ “Sexual abuse” means the same as in A.R.S. § 13-1404(A).
- ~~187-195.~~ “Sexual assault” means the same as in A.R.S. § 13-1406(A).
- ~~188-196.~~ “Shift” means the beginning and ending time of a continuous work period established by a health care institution’s policies and procedures.
- 197. “Short-acting opioid antagonist” means an opioid antagonist that, when administered, quickly but for a small period of time reverses, in whole or in part, the pharmacological effects of an opioid in the body.
- ~~189-198.~~ “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.
- ~~190-199.~~ “Significant change” means an observable deterioration or improvement in a patient’s physical, cognitive, behavioral, or functional condition that may require an alteration to the physical health services or behavioral health services provided to the patient.
- ~~191-200.~~ “Speech-language pathologist” means an individual licensed according A.R.S. Title 35, Chapter 17, Article 4 to engage in the practice of speech-language pathology, as defined in A.R.S. § 36-1901.
- ~~192-201.~~ “Special hospital” means a subclass of hospital that:
 - a. Is licensed to provide hospital services within a specific branch of medicine; or
 - b. Limits admission according to age, gender, type of disease, or medical condition.



- ~~193-202.~~ “Student” means an individual attending an educational institution and working under supervision in a health care institution through an arrangement between the health care institution and the educational institution.
- ~~203.~~ “Substance use disorder” means a condition in which the misuse or dependence on alcohol or a drug results in adverse physical, mental, or social effects on an individual.
- ~~204.~~ “Substance use risk” means an individual’s unique likelihood for addiction, misuse, diversion, or another adverse consequence resulting from the individual being prescribed or receiving treatment with opioids.
- ~~194-205.~~ “Substantial” when used in connection with a modification means:
- A change in a health care institution's licensed capacity, licensed occupancy, or the number of dialysis stations;
 - An addition or deletion of an authorized service;
 - A change in the physical plant, including facilities or equipment, that costs more than \$300,000; or
 - A change in the building where a health care institution is located that affects compliance with applicable physical plant codes and standards incorporated by reference in A.A.C. R9-1-412.
- ~~195-206.~~ “Substance abuse” means an individual’s misuse of alcohol or other drug or chemical that:
- Alters the individual’s behavior or mental functioning;
 - Has the potential to cause the individual to be psychologically or physiologically dependent on alcohol or other drug or chemical; and
 - Impairs, reduces, or destroys the individual’s social or economic functioning.
- ~~196-207.~~ “Substance abuse transitional facility” means a class of health care institution that provides behavioral health services to an individual over 18 years of age who is intoxicated or may have a substance abuse problem.
- ~~197-208.~~ “Supportive services” has the same meaning as in A.R.S. § 36-151.
- ~~198-209.~~ “Substantive review time-frame” means the same as in A.R.S. § 41-1072.
- ~~199-210.~~ “Surgical procedure” means the excision or incision of a patient’s body for the:
- Correction of a deformity or defect,
 - Repair of an injury, or
 - Diagnosis, amelioration, or cure of disease.
- ~~200-211.~~ “Swimming pool” has the same meaning as “semipublic swimming pool” in A.A.C. R18-5-201.
- ~~201-212.~~ “System” means interrelated, interacting, or interdependent elements that form a whole.
- ~~213.~~ “Tapering” means the gradual reduction in the dosage of a medication administered to a patient, often with the intent of eventually discontinuing the use of the medication for the patient.
- ~~202-214.~~ “Tax ID number” means a numeric identifier that a person uses to report financial information to the United States Internal Revenue Service.
- ~~203-215.~~ “Telemedicine” has the same meaning as in A.R.S. § 36-3601.
- ~~204-216.~~ “Therapeutic diet” means foods or the manner in which food is to be prepared that are ordered for a patient.
- ~~205-217.~~ “Therapist” means an occupational therapist, a physical therapist, a respiratory therapist, or a speech-language pathologist.
- ~~206-218.~~ “Time out” means providing a patient a voluntary opportunity to regain self-control in a designated area from which the patient is not physically prevented from leaving.
- ~~207-219.~~ “Transfer” means a health care institution discharging a patient and sending the patient to another licensed health care institution as an inpatient or resident without intending that the patient be returned to the sending health care institution.
- ~~208-220.~~ “Transport” means a licensed health care institution:
- Sending a patient to a receiving licensed health care institution for outpatient services with the intent of the patient returning to the sending licensed health care institution, or
 - Discharging a patient to return to a sending licensed health care institution after the patient received outpatient services from the receiving licensed health care institution.
- ~~209-221.~~ “Treatment” means a procedure or method to cure, improve, or palliate an individual’s medical condition or behavioral health issue.
- ~~210-222.~~ “Treatment plan” means a description of the specific physical health services or behavioral health services that a health care institution anticipates providing to a patient.
- ~~211-223.~~ “Unclassified health care institution” means a health care institution not classified or subclassified in statute or in rule.
- ~~212-224.~~ “Vascular access” means the point on a patient's body where blood lines are connected for hemodialysis.
- ~~213-225.~~ “Volunteer” means an individual authorized by a health care institution to work for the health care institution on a regular basis without compensation from the health care institution and does not include a medical staff member who has clinical privileges at the health care institution.
- ~~214-226.~~ “Working day” means a Monday, Tuesday, Wednesday, Thursday, or Friday that is not a state and federal holiday or a state-wide furlough day

R9-10-102. Health Care Institution Classes and Subclasses; Requirements

- A. A person may apply for a license as a health care institution class or subclass in A.R.S. Title 36, Chapter 4 or this Chapter, or one of the following classes or subclasses:
- General hospital,
 - Rural general hospital,
 - Special hospital,
 - Behavioral health inpatient facility,
 - Nursing care institution,
 - Recovery care center,
 - Hospice inpatient facility,
 - Hospice service agency,
 - Behavioral health residential facility,



- 10. Assisted living center,
- 11. Assisted living home,
- 12. Adult foster care home,
- 13. Outpatient surgical center,
- 14. Outpatient treatment center,
- 15. Abortion clinic,
- 16. Adult day health care facility,
- 17. Home health agency,
- 18. Substance abuse transitional facility,
- 19. Behavioral health specialized transitional facility,
- 20. Counseling facility,
- 21. Adult behavioral health therapeutic home,
- 22. Behavioral health respite home, ~~or~~
- 23. Unclassified health care institution, ~~or~~
- 24. Pain management clinic.

- B. A person shall apply for a license for the class or subclass that authorizes the provision of the highest level of physical care services or behavioral health services the proposed health care institution plans to provide. The Department shall review the proposed health care institution's scope of services to determine whether the requested health care institution class or subclass is appropriate.
- C. A health care institution shall comply with the requirements in Article 17 of this Chapter if:
 - 1. There are no specific rules in another Article of this Chapter for the health care institution's class or subclass, or
 - 2. The Department determines that the health care institution is an unclassified health care institution.

R9-10-106. Fees

- A. An applicant who submits to the Department architectural plans and specifications for the construction or modification of a health care institution shall also submit an architectural drawing review fee as follows:
 - 1. Fifty dollars for a project with a cost of \$100,000 or less;
 - 2. One hundred dollars for a project with a cost of more than \$100,000 but less than \$500,000; or
 - 3. One hundred fifty dollars for a project with a cost of \$500,000 or more.
- B. An applicant submitting an initial application or a renewal application for a health care institution license shall submit to the Department an application fee of \$50.
- C. Except as provided in subsection (D) or (E), an applicant submitting an initial application or a renewal application for a health care institution license shall submit to the Department a licensing fee as follows:
 - 1. For an adult day health care facility, assisted living home, or assisted living center:
 - a. For a facility with no licensed capacity, \$280;
 - b. For a facility with a licensed capacity of one to 59 beds, \$280, plus the licensed capacity times \$70;
 - c. For a facility with a licensed capacity of 60 to 99 beds, \$560, plus the licensed capacity times \$70;
 - d. For a facility with a licensed capacity of 100 to 149 beds, \$840, plus the licensed capacity times \$70; or
 - e. For a facility with a licensed capacity of 150 beds or more, \$1,400, plus the licensed capacity times \$70;
 - 2. For a behavioral health facility:
 - a. For a facility with no licensed capacity, \$375;
 - b. For a facility with a licensed capacity of one to 59 beds, \$375, plus the licensed capacity times \$94;
 - c. For a facility with a licensed capacity of 60 to 99 beds, \$750, plus the licensed capacity times \$94;
 - d. For a facility with a licensed capacity of 100 to 149 beds, \$1,125, plus the licensed capacity times \$94; or
 - e. For a facility with a licensed capacity of 150 beds or more, \$1,875, plus the licensed capacity times \$94;
 - 3. For a behavioral health facility providing behavioral health observation/stabilization services, in addition to the applicable fee in subsection (C)(2), the licensed occupancy times \$94;
 - 4. For a nursing care institution:
 - a. For a facility with a licensed capacity of one to 59 beds, \$290, plus the licensed capacity times \$73;
 - b. For a facility with a licensed capacity of 60 to 99 beds, \$580, plus the licensed capacity times \$73;
 - c. For a facility with a licensed capacity of 100 to 149 beds, \$870, plus the licensed capacity times \$73; or
 - d. For a facility with a licensed capacity of 150 beds or more, \$1,450, plus the licensed capacity times \$73;
 - 5. For a hospital, a home health agency, a hospice service agency, a hospice inpatient facility, an abortion clinic, a recovery care center, an outpatient surgical center, an outpatient treatment center that is not a behavioral health facility, a pain management clinic, or an unclassified health care institution:
 - a. For a facility with no licensed capacity, \$365;
 - b. For a facility with a licensed capacity of one to 59 beds, \$365, plus the licensed capacity times \$91;
 - c. For a facility with a licensed capacity of 60 to 99 beds, \$730, plus the licensed capacity times \$91;
 - d. For a facility with a licensed capacity of 100 to 149 beds, \$1,095, plus the licensed capacity times \$91; or
 - e. For a facility with a licensed capacity of 150 beds or more, \$1,825, plus the licensed capacity times \$91;
 - 6. For a hospital providing behavioral health observation/stabilization services, in addition to the applicable fee in subsection (C)(5), the licensed occupancy times \$91; and
 - 7. For an outpatient treatment center that is not a behavioral health facility and provides:
 - a. Dialysis services, in addition to the applicable fee in subsection (C)(5), the number of dialysis stations times \$91; and
 - b. Behavioral health observation/stabilization services, in addition to the applicable fee in subsection (C)(5), the licensed occupancy times \$91.



- D. In addition to the applicable fees in subsections (C)(5) and (C)(6), an applicant submitting an initial application or a renewal application for a single group hospital license shall submit to the Department an additional fee of \$365 for each of the hospital's satellite facilities and, if applicable, the fees required in subsection (C)(7).
- E. Subsections (C) and (D) do not apply to a health care institution operated by a state agency according to state or federal law or to an adult foster care home.
- F. All fees are nonrefundable except as provided in A.R.S. § 41- 1077.

R9-10-120. Opioid Prescribing and Treatment

A. This Section does not apply to a health care institution licensed under Article 20 of this Chapter.

AB. In addition to the definitions in A.R.S. § 36-401(A) and R9-10-101, the following definitions apply in this Section:

1. ~~“Active malignancy” means a cancer for which:~~
 - a. ~~A patient is undergoing treatment, such as through:~~
 - i. ~~One or more surgical procedures to remove the cancer;~~
 - ii. ~~Chemotherapy, as defined in A.A.C. R9-4-401; or~~
 - iii. ~~Radiation treatment, as defined in A.A.C. R9-4-401;~~
 - b. ~~There is no treatment; or~~
 - e. ~~A patient is refusing treatment.~~
2. ~~“Benzodiazepine” means any one of a class of sedative hypnotic medications, characterized by a chemical structure that includes a benzene ring linked to a seven-membered ring containing two nitrogen atoms, that are commonly used in the treatment of anxiety.~~
3. ~~“End of life” means that a patient has a documented life expectancy of six months or less.~~
4. ~~1. “Episode of care” means medical services, nursing services, or health-related services provided by a health care institution to a patient for a specific period of time, ending in discharge or the completion of the patient’s treatment plan, whichever is later.~~
5. ~~“Opioid” means a controlled substance, as defined in A.R.S. § 36-2501, that meets the definition of “opiate” in A.R.S. § 36-2501.~~
6. ~~2. “Order” means to issue written, verbal, or electronic instructions for a specific dose of a specific medication in a specific quantity and route of administration to be obtained and administered to a patient in a health care institution.~~
7. ~~“Prescribe” means to issue written or electronic instructions to a pharmacist to deliver to the ultimate user, or another individual on the ultimate user’s behalf, a specific dose of a specific medication in a specific quantity and route of administration.~~
8. ~~“Sedative hypnotic medication” means any one of several classes of drugs that have sleep-inducing, anti-anxiety, anti-convulsant, and muscle-relaxing properties.~~
9. ~~“Short acting opioid antagonist” means a drug approved by the U.S. Department of Health and Human Services, Food and Drug Administration, that, when administered, quickly but for a small period of time reverses, in whole or in part, the pharmacological effects of an opioid in the body.~~
10. ~~“Substance use disorder” means a condition in which the misuse or dependence on alcohol or a drug results in adverse physical, mental, or social effects on an individual.~~
11. ~~“Substance use risk” means an individual’s unique likelihood for addiction, misuse, diversion, or another adverse consequence resulting from the individual being prescribed or receiving treatment with opioids.~~
12. ~~“Tapering” means the gradual reduction in the dosage of a medication administered to a patient, often with the intent of eventually discontinuing the use of the medication for the patient.~~

BC. A medical director of a health care institution where opioids are prescribed or ordered as part of treatment shall:

1. Establish, document, and implement policies and procedures for prescribing or ordering an opioid as part of treatment, to protect the health and safety of a patient, that:
 - a. Cover which personnel members may prescribe or order an opioid in treating a patient and the required knowledge and qualifications of these personnel members;
 - b. As applicable and except when contrary to medical judgment for a patient, are consistent with the Arizona Opioid Prescribing Guidelines or national opioid-prescribing guidelines, such as guidelines developed by the:
 - i. Centers for Disease Control and Prevention, or
 - ii. U.S. Department of Veterans Affairs and the U.S. Department of Defense;
 - c. Include how, when, and by whom:
 - i. A patient’s profile on the Arizona Board of Pharmacy Controlled Substances Prescription Monitoring Program database is reviewed;
 - ii. An assessment is conducted of a patient’s substance use risk;
 - iii. The potential risks, adverse outcomes, and complications, including death, associated with the use of opioids are explained to a patient or the patient’s representative;
 - iv. Alternatives to a prescribed or ordered opioid are explained to a patient or the patient’s representative;
 - v. Informed consent is obtained from a patient or the patient’s representative and, if applicable, in what situations, described in subsection (F) or (G) (G) or (H), informed consent would not be obtained before an opioid is prescribed or ordered for a patient;
 - vi. A patient receiving an opioid is monitored; and
 - vii. The actions taken according to subsections (B)(1)(e)(i) through (vi) (C)(1)(c)(i) through (vi) are documented;
 - d. Address conditions that may impose a higher risk to a patient when prescribing or ordering an opioid as part of treatment, including:
 - i. Concurrent use of a benzodiazepine or other sedative-hypnotic medication,
 - ii. History of substance use disorder,
 - iii. Co-occurring behavioral health issue, or
 - iv. Pregnancy;



- e. Cover the criteria for co-prescribing a short-acting opioid antagonist for a patient;
 - f. Include that, if continuing control of a patient’s pain after discharge is medically indicated due to the patient’s medical condition, a method for continuing pain control will be addressed as part of discharge planning;
 - g. Include the frequency of the following for a patient being prescribed or ordered an opioid for longer than a 30-calendar-day period:
 - i. Face-to-face interactions with the patient,
 - ii. Conducting an assessment of a patient’s substance use risk,
 - iii. Renewal of a prescription or order for an opioid without a face-to-face interaction with the patient, and
 - iv. Monitoring the effectiveness of the treatment;
 - h. If applicable according to A.R.S. § 36-2608, include documenting a dispensed opioid in the Arizona Board of Pharmacy Controlled Substances Prescription Monitoring Program database;
 - i. Cover the criteria and procedures for tapering opioid prescription or ordering as part of treatment; and
 - j. Cover the criteria and procedures for offering or referring a patient for treatment for substance use disorder;
 - 2. Include in the plan for the health care institution’s quality management program a process for:
 - a. Review of known incidents of opioid-related adverse reactions or other negative outcomes a patient experiences or opioid-related deaths, and
 - b. Surveillance and monitoring of adherence to the policies and procedures in subsection ~~(B)(4)~~ (C)(1);
 - 3. Except as prohibited by Title 42 Code of Federal Regulations, Chapter I, Subchapter A, Part 2, or as provided in subsection ~~(G)(4)~~ (H)(1), ensure that, if a patient’s death may be related to an opioid prescribed or ordered as part of treatment, written notification, in a Department-provided format, is provided to the Department of the patient’s death within one working day after the health care institution learns of the patient’s death; and
 - 4. Ensure that informed consent required from a patient or the patient’s representative includes:
 - a. The patient’s:
 - i. Name,
 - ii. Date of birth or other patient identifier, and
 - iii. Condition for which opioids are being prescribed;
 - b. That an opioid is being prescribed or ordered;
 - c. The potential risks, adverse reactions, complications, and medication interactions associated with the use of an opioid;
 - d. If applicable, the potential risks, adverse outcomes, and complications associated with the concurrent use of an opioid and a benzodiazepine or another sedative-hypnotic medication;
 - e. Alternatives to a prescribed or ordered opioid;
 - f. The name and signature of the individual explaining the use of an opioid to the patient; and
 - g. The signature of the patient or the patient’s representative and the date signed.
- ED.** Except as provided in subsection ~~(G)~~ (H), a medical director of a health care institution where opioids are prescribed as part of treatment shall ensure that a medical practitioner authorized by policies and procedures to prescribe an opioid in treating a patient:
- 1. Before prescribing an opioid for a patient of the health care institution:
 - a. Conducts a physical examination of the patient or reviews the documentation from a physical examination conducted during the patient’s same episode of care;
 - b. Except as exempted by A.R.S. § 36-2606(G), reviews the patient’s profile on the Arizona Board of Pharmacy Controlled Substances Prescription Monitoring Program database;
 - c. Conducts an assessment of the patient’s substance use risk or reviews the documentation from an assessment of the patient’s substance use risk conducted during the same episode of care by an individual licensed under A.R.S. Title 32 and authorized by policies and procedures to conduct an assessment of the patient’s substance use risk;
 - d. Explains to the patient or the patient’s representative the risks and benefits associated with the use of opioids or ensures that the patient or the patient’s representative understands the risks and benefits associated with the use of opioids, as explained to the patient or the patient’s representative by an individual licensed under A.R.S. Title 32 and authorized by policies and procedures to explain to the patient or the patient’s representative the risks and benefits associated with the use of opioids;
 - e. Explains alternatives to a prescribed opioid; and
 - f. Obtains informed consent from the patient or the patient’s representative that meets the requirements in subsection ~~(B)(4)~~ (C)(4), including the potential risks, adverse outcomes, and complications associated with the concurrent use of an opioid and a benzodiazepine or another sedative-hypnotic medication, if the patient:
 - i. Is also prescribed or ordered a sedative-hypnotic medication, or
 - ii. Has been prescribed a sedative-hypnotic medication by another medical practitioner;
 - 2. Includes the following information in the patient’s medical record, an existing treatment plan, or a new treatment plan developed for the patient:
 - a. The patient’s diagnosis;
 - b. The patient’s medical history, including co-occurring disorders;
 - c. The opioid to be prescribed;
 - d. Other medications or herbal supplements being taken by the patient;
 - e. If applicable:
 - i. The effectiveness of the patient’s current treatment,
 - ii. The duration of the current treatment, and
 - iii. Alternative treatments tried by or planned for the patient;
 - f. The expected benefit of the treatment and, if applicable, the benefit of the new treatment compared with continuing the current treatment; and
 - g. Other factors relevant to the patient’s being prescribed an opioid; and



3. If applicable, specifies in the patient's discharge plan how medically indicated pain control will occur after discharge to meet the patient's needs.
- DE.** Except as provided in subsection ~~(F)~~ or ~~(G)~~ (G) or (H), a medical director of a health care institution where opioids are ordered for administration to a patient in the health care institution as part of treatment shall ensure that a medical practitioner authorized by policies and procedures to order an opioid in treating a patient:
1. Before ordering an opioid for a patient of the health care institution:
 - a. Conducts a physical examination of the patient or reviews the documentation from a physical examination conducted:
 - i. During the patient's same episode of care; or
 - ii. Within the previous 30 calendar days, at a health care institution transferring the patient to the health care institution or by the medical practitioner who referred the patient for admission to the health care institution;
 - b. Except as exempted by A.R.S. § 36-2606(G), reviews the patient's profile on the Arizona Board of Pharmacy Controlled Substances Prescription Monitoring Program database;
 - c. Conducts an assessment of the patient's substance use risk or reviews the documentation from an assessment of the patient's substance use risk conducted within the previous 30 calendar days by an individual licensed under A.R.S. Title 32 and authorized by policies and procedures to conduct an assessment of the patient's substance use risk;
 - d. Explains to the patient or the patient's representative the risks and benefits associated with the use of opioids or ensures that the patient or the patient's representative understands the risks and benefits associated with the use of opioids, as explained to the patient or the patient's representative by an individual licensed under A.R.S. Title 32 and authorized by policies and procedures to explain to the patient or the patient's representative the risks and benefits associated with the use of opioids;
 - e. If applicable, explains alternatives to an ordered opioid; and
 - f. Obtains informed consent from the patient or the patient's representative, according to subsection ~~(C)(1)(f)~~ (D)(1)(f); and
 2. Includes the following information in the patient's medical record, an existing treatment plan, or a new treatment plan developed for the patient:
 - a. The patient's diagnosis;
 - b. The patient's medical history, including co-occurring disorders;
 - c. The opioid being ordered and the reason for the order;
 - d. Other medications or herbal supplements being taken by the patient; and
 - e. If applicable:
 - i. The effectiveness of the patient's current treatment,
 - ii. The duration of the current treatment,
 - iii. Alternative treatments tried by or planned for the patient,
 - iv. The expected benefit of a new treatment compared with continuing the current treatment, and
 - v. Other factors relevant to the patient's being ordered an opioid.
- EE.** For a health care institution where opioids are administered as part of treatment or where a patient is provided assistance in the self-administration of medication for a prescribed opioid, including a health care institution in which an opioid may be prescribed or ordered as part of treatment, a medical director, a manager as defined in R9-10-801, or a provider, as applicable to the health care institution, shall:
1. Establish, document, and implement policies and procedures for administering an opioid as part of treatment or providing assistance in the self-administration of medication for a prescribed opioid, to protect the health and safety of a patient, that:
 - a. Cover which personnel members may administer an opioid in treating a patient and the required knowledge and qualifications of these personnel members;
 - b. Cover which personnel members may provide assistance in the self-administration of medication for a prescribed opioid and the required knowledge and qualifications of these personnel members;
 - c. Include how, when, and by whom a patient's need for opioid administration is assessed;
 - d. Include how, when, and by whom a patient receiving an opioid is monitored; and
 - e. Cover how, when, and by whom the actions taken according to subsections ~~(E)(1)(e)~~ and ~~(d)~~ (F)(1)(c) and (d) are documented;
 2. Include in the plan for the health care institution's quality management program a process for:
 - a. Review of incidents of opioid-related adverse reactions or other negative outcomes a patient experiences or opioid-related deaths, and
 - b. Surveillance and monitoring of adherence to the policies and procedures in subsection ~~(E)(1)~~ (F)(1);
 3. Except as prohibited by Title 42 Code of Federal Regulations, Chapter I, Subchapter A, Part 2, or as provided in subsection ~~(G)(1)~~ (H)(1), ensure that, if a patient's death may be related to an opioid administered as part of treatment, written notification, in a Department-provided format, is provided to the Department of the patient's death within one working day after the patient's death; and
 4. Except as provided in subsection ~~(G)~~ (H), ensure that an individual authorized by policies and procedures to administer an opioid in treating a patient or to provide assistance in the self-administration of medication for a prescribed opioid:
 - a. Before administering an opioid or providing assistance in the self-administration of medication for a prescribed opioid in compliance with an order as part of the treatment for a patient, identifies the patient's need for the opioid;
 - b. Monitors the patient's response to the opioid; and
 - c. Documents in the patient's medical record:
 - i. An identification of the patient's need for the opioid before the opioid was administered or assistance in the self-administration of medication for a prescribed opioid was provided, and
 - ii. The effect of the opioid administered or for which assistance in the self-administration of medication for a prescribed opioid was provided.



- FG.** A medical practitioner authorized by a health care institution’s policies and procedures to order an opioid in treating a patient is exempt from the requirements in subsection ~~(D)~~ (E), if:
 1. The health care institution’s policies and procedures, required in subsection ~~(B)(1)-(C)(1)~~ or the applicable Article in 9 A.A.C. 10, contain procedures for:
 - a. Providing treatment without obtaining the consent of a patient or the patient’s representative,
 - b. Ordering and administering opioids in an emergency situation, and
 - c. Complying with the requirements in subsection ~~(D)~~ (E) after the emergency is resolved;
 2. The order for the administration of an opioid is:
 - a. Part of the treatment for a patient in an emergency, and
 - b. Issued in accordance with policies and procedures; and
 3. The emergency situation is documented in the patient’s medical record.
- GH.** The requirements in subsections ~~(C), (D), and (E)(4)~~ (D), (E), and (F)(4), as applicable, do not apply to a health care institution’s:
 1. Prescribing, ordering, or administration of an opioid as part of treatment for a patient with an end-of-life condition or pain associated with an active malignancy;
 2. Prescribing an opioid as part of treatment for a patient when changing the type or dosage of an opioid, which had previously been prescribed by a medical practitioner of the health care institution for the patient according to the requirements in subsection ~~(C)~~ (D):
 - a. Before a pharmacist dispenses the opioid for the patient; or
 - b. If changing the opioid because of an adverse reaction to the opioid experienced by the patient, within 72 hours after the opioid was dispensed for the patient by a pharmacist;
 3. Ordering an opioid as part of treatment for no longer than three calendar days for a patient remaining in the health care institution and receiving continuous medical services or nursing services from the health care institution; or
 4. Ordering an opioid as part of treatment:
 - a. For a patient receiving a surgical procedure or other invasive procedure; or
 - b. When changing the type, dosage, or route of administration of an opioid, which had previously been ordered by a medical practitioner of the health care institution for a patient according to the requirements in subsection ~~(D)~~ (E), to meet the patient’s needs.

ARTICLE 10. OUTPATIENT TREATMENT CENTERS

R9-10-1021. Pain Management Services

- A medical director of an outpatient treatment center that is authorized to provide pain management services shall ensure that:
1. Pain management services are provided under the direction of:
 - a. ~~A physician;~~ or
 - b. A nurse practitioner licensed according to A.R.S. Title 32, Chapter 15 with advanced pain management certification from a nationally recognized accreditation or certification entity;
 2. A personnel member certified in cardiopulmonary resuscitation is available on the outpatient treatment center’s premise;
 3. If a controlled substance is used to provide pain management services:
 - a. A medical practitioner discusses the risks and benefits of using a controlled substance with a patient;
 - b. If the controlled substance is an opioid, the outpatient treatment center complies with the requirements in R9-10-2006; and
 - bc. The following information is included in a patient’s medical record:
 - i. ~~The patient’s history or alcohol and substance abuse of substance use disorder,~~
 - ii. Documentation of the discussion in subsection (3)(a),
 - iii. The nature and intensity of the patient’s pain, and
 - iv. The objectives used to determine whether the patient is being successfully treated; and
 4. If an injection or a nerve block is used to provide pain management services:
 - a. Before the injection or nerve block is initially used on a patient, an evaluation of the patient is performed by a physician or nurse anesthetist;
 - b. An injection or nerve block is administered by a physician or nurse anesthetist; and
 - c. The following information is included in a patient’s medical record:
 - i. The evaluation of the patient required in subsection (4)(a),
 - ii. A record of the administration of the injection or nerve block, and
 - iii. Any resuscitation measures taken; and
 5. An outpatient treatment center that is a pain management clinic, as defined in A.R.S. § 36-448.01, complies with 9 A.A.C. 10, Article 20.

ARTICLE 20. PAIN MANAGEMENT CLINICS

R9-10-2001. Definitions

In addition to the definitions in R9-10-101, the following definitions apply in this Article, unless otherwise specified:

1. “Order” means to issue written, verbal, or electronic instructions for a specific dose of a specific medication in a specific quantity and route of administration to be obtained and administered to a patient in a health care institution.
2. “Physician” means an individual licensed as a physician according to A.R.S. Title 32, Chapter 13, 14, or 17.

R9-10-2002. Application and Documentation Submission Requirements

- A.** An applicant shall submit an application for licensure that meets the requirements in A.R.S. § 36-422 and 9 A.A.C. 10, Article 1.
- B.** An applicant or licensee shall submit to the Department:
 1. The applicable fees required in R9-10-106(C), and



2. The documentation required according to 36-448.02(C)(1).

R9-10-2003. Administration

A. A licensee is responsible for the organization and management of a pain management clinic.

B. A licensee shall:

1. Adopt policies and procedures for the administration and operation of a pain management clinic;
2. Designate a medical director who:
 - a. Is licensed:
 - i. As a physician according to A.R.S. Title 32, Chapter 13 or 17; or
 - ii. As a nurse practitioner according to A.R.S. Title 32, Chapter 15 with advanced pain management certification from a nationally recognized accreditation or certification entity; and
 - b. May be the same individual as the licensee;
3. Ensure that there are a sufficient number of personnel members and employees with the required knowledge and qualifications to:
 - a. Meet the requirements of this Article,
 - b. Ensure the health and safety of a patient, and
 - c. Meet the needs of a patient based on the patient's medical evaluation; and
4. Ensure the following are conspicuously posted on the premises:
 - a. The current pain management clinic license issued by the Department;
 - b. The current telephone number and address of the unit in the Department responsible for licensing the pain management clinic;
 - c. An evacuation map posted in all hallways; and
 - d. A phone number for:
 - i. An opioid assistance and referral hotline, and
 - ii. A poison control hotline.

C. A medical director shall ensure that:

1. Pain management services are provided under the direction of:
 - a. A physician, or
 - b. A nurse practitioner licensed according to A.R.S. Title 32, Chapter 15 with advanced pain management certification from a nationally recognized accreditation or certification entity;
2. A record that includes cardiopulmonary resuscitation training is maintained for each personnel member, employee, volunteer, or student who is required by policies and procedures to obtain cardiopulmonary resuscitation training; and
3. A personnel member certified in cardiopulmonary resuscitation is available on the pain management clinic's premises while patients are present.

D. A medical director shall ensure that policies and procedures are established, documented, and implemented to protect the health and safety of a patient that:

1. Cover personnel member qualifications, duties, and responsibilities, including who may order, prescribe, or administer an opioid and the required knowledge and qualifications of those personnel members;
2. Cover cardiopulmonary resuscitation training, including:
 - a. The method and content of cardiopulmonary resuscitation training, including a demonstration of an individual's ability to perform cardiopulmonary resuscitation;
 - b. The qualifications required for an individual to provide cardiopulmonary resuscitation training;
 - c. The time-frame for renewal of cardiopulmonary resuscitation training; and
 - d. The documentation that verifies that an individual has received cardiopulmonary resuscitation training;
3. Cover the storage, accessibility, disposal, and documentation of a medication;
4. Cover the prescribing or ordering of an opioid:
 - a. Including how, when, and by whom:
 - i. A patient's profile on the Arizona Board of Pharmacy Controlled Substances Prescription Monitoring Program database is reviewed;
 - ii. An assessment is conducted of a patient's substance use risk;
 - iii. The potential risks, adverse outcomes, and complications, including death, associated with the use of opioids are explained to a patient or the patient's representative;
 - iv. Alternatives to a prescribed or ordered opioid are explained to a patient or the patient's representative;
 - v. Informed consent is obtained from a patient or the patient's representative;
 - vi. A patient receiving an opioid is monitored; and
 - vii. The actions taken according to subsections (D)(4)(a)(i) through (vi) are documented;
 - b. Addressing conditions that may impose a higher risk to a patient when prescribing or ordering an opioid, including:
 - i. Concurrent use of a benzodiazepine or other sedative-hypnotic medication,
 - ii. History of substance use disorder,
 - iii. Co-occurring behavioral health issue, or
 - iv. Pregnancy;
 - c. Addressing the criteria for co-prescribing a short-acting opioid antagonist for a patient;
 - d. Including the frequency of the following for a patient prescribed an opioid for longer than a 30-calendar-day period:
 - i. Face-to-face interactions with the patient,
 - ii. Assessment of a patient's substance use risk,
 - iii. Urine drug testing,
 - iv. Renewal of an opioid prescription without a face-to-face interaction with the patient, and



- v. Monitoring the effectiveness of the treatment;
- e. If applicable according to A.R.S. § 36-2608, including documenting a dispensed opioid in the Arizona Board of Pharmacy Controlled Substances Prescription Monitoring Program database;
- f. Addressing the criteria and procedures for tapering opioid prescription or ordering;
- g. Addressing the criteria and procedures for offering or referring a patient for treatment for substance use disorder; and
- h. If opioids are administered at the pain management clinic, including how, when, and by whom:
 - i. A patient's need for opioid administration is assessed,
 - ii. A patient receiving an opioid is monitored, and
 - iii. The actions taken according to subsections (D)(4)(h)(i) and (ii) are documented;
- 5. Cover accessibility and security of medical records;
- 6. Cover infection control, including methods for sterilizing equipment and supplies and methods for identifying, storing, and disposing of biohazardous medical waste; and
- 7. Cover emergency treatment, including:
 - a. A list of the medications, supplies, and equipment kept on the premises to provide treatment in response to an emergency caused by a procedure or medication administered at the pain management clinic;
 - b. A requirement that a cart or a container is available for emergency treatment that contains the medications, supplies, and equipment specified in the policies and procedures according to subsection (D)(7)(a);
 - c. A method to verify and document that the contents of the cart or container are available for emergency treatment; and
 - d. A method for ensuring a patient is transferred to a hospital or other health care institution to receive treatment for a medical emergency that the pain management clinic is not authorized or not able to provide.
- E. As applicable and except when contrary to medical judgment for a patient, a medical director shall ensure that the policies and procedures in subsection (D)(4) are consistent with the Arizona Opioid Prescribing Guidelines or national opioid-prescribing guidelines, such as guidelines developed by the:
 - 1. Centers for Disease Control and Prevention, or
 - 2. The U.S. Department of Veterans Affairs and the U.S. Department of Defense.
- F. A medical director shall, except as prohibited by Title 42 Code of Federal Regulations, Chapter I, Subchapter A, Part 2, ensure that:
 - 1. If an opioid may have contributed to a patient's death:
 - a. Written notification of the patient's death is provided to the Department in a Department-provided format if:
 - i. A personnel member of the pain management clinic prescribed, ordered, or administered the opioid that may have contributed to the patient's death, or
 - ii. The patient's death occurred while the patient was on the premises of the pain management clinic; and
 - b. The written notification required by subsection (F)(1)(a)(i) is provided within one working day:
 - i. After the patient's death, if an opioid administered as part of treatment may have contributed to the death; or
 - ii. After a personnel member of the pain management clinic learns of the patient's death, if a prescribed opioid may have contributed to the patient's death; and
 - c. The written notification required by subsection (F)(1)(a)(ii) is provided according to R9-4-602; and
 - 2. Written notification of a suspected opioid overdose is provided to the Department according to R9-4-602.
- G. If the Department requests a patient's medical record for review, the licensee:
 - 1. May provide the patient medical record to the Department either in paper or in an electronic format that is acceptable to the Department, and
 - 2. Shall ensure that documentation required by this Article is provided to the Department within two hours after a Department request.
- H. The Department may take enforcement action as specified in R9-10-111 if a pain management clinic:
 - 1. Is not in substantial compliance with applicable requirements in 9 A.A.C. 10, Article 1 or this Article; or
 - 2. Is in substantial compliance, but refuses to carry out a plan of correction acceptable to the Department.

R9-10-2004. Quality Management

A medical director shall ensure that:

- 1. A plan is established, documented, and implemented for an ongoing quality management program that, at a minimum, includes:
 - a. A method to identify, document, and evaluate opioid-related adverse reactions or other incidents;
 - b. A method to collect data on services provided to patients;
 - c. A method to use the data to identify concerns about the delivery of services related to patient care;
 - d. A method to make changes or take action in response to a concern identified according to subsection (1)(c); and
 - e. The frequency with which the documented report required in subsection (2) will be submitted to the licensee;
- 2. A documented report is submitted to the licensee that includes:
 - a. Each concern about the delivery of services related to patient care, and
 - b. Any changes made or actions taken in response to that concern; and
- 3. The report required in subsection (2) and the supporting documentation for the report are maintained for at least 12 months after the date the report is submitted to the licensee.

R9-10-2005. Medication Services

A medical director shall ensure that:

- 1. Medications are stored in a locked area on the premises;
- 2. Only personnel members designated by policies and procedures have access to the locked area containing medications;
- 3. Expired, mislabeled, or unusable medications are disposed of according to policies and procedures;
- 4. If an opioid is administered at a pain management clinic, an opioid antagonist is available on the premises;
- 5. A medication error or an adverse reaction, including any actions taken in response to the medication error or adverse reaction, is:



- a. Immediately reported to the medical director and licensee, and
- b. Recorded in the patient's medical record; and
6. Medication information for a patient is maintained in the patient's medical record.

R9-10-2006. Pain Management Services

- A.** A medical director shall ensure that a medical practitioner or nurse anesthetist remains on the premises until all patients who received a procedure at the pain management clinic are discharged.
- B.** A medical director shall ensure that, if a procedure other than the administration of an opioid is used to provide pain management services:
1. Before the procedure is initially used on a patient, the patient is evaluated by:
 - a. A medical practitioner or
 - b. A nurse anesthetist, according to A.R.S. § 32-1634.04;
 2. The procedure is performed by a personnel member qualified according to policies and procedures to perform the procedure; and
 3. The following information is included in the patient's medical record:
 - a. The evaluation of the patient required in subsection (B)(1),
 - b. A record of the procedure, and
 - c. Any adverse reaction to the procedure and any measures taken to address an adverse reaction.
- C.** Except as provided in subsection (E), a medical director shall ensure that a medical practitioner:
1. Before prescribing an opioid for a patient of the pain management clinic:
 - a. Conducts a physical examination of the patient;
 - b. Except as exempted by A.R.S. § 36-2606(G), reviews the patient's profile on the Arizona Board of Pharmacy Controlled Substances Prescription Monitoring Program database;
 - c. Conducts an assessment of the patient's substance use risk;
 - d. Explains to the patient or the patient's representative the risks and benefits associated with use of an opioid;
 - e. Explains alternatives to a prescribed opioid; and
 - f. Obtains informed consent from the patient or the patient's representative that meets the requirements in R9-10-2007(B), including the potential risks, adverse outcomes, and complications associated with the concurrent use of an opioid and a benzodiazepine or another sedative-hypnotic medication, if the patient:
 - i. Is also prescribed or ordered a sedative-hypnotic medication, or
 - ii. Has been prescribed a sedative-hypnotic medication by another medical practitioner;
 2. Before ordering an opioid for a patient of the pain management clinic:
 - a. Conducts a physical examination of the patient;
 - b. Except as exempted by A.R.S. § 36-2606(G), reviews the patient's profile on the Arizona Board of Pharmacy Controlled Substances Prescription Monitoring Program database;
 - c. Conducts an assessment of the patient's substance use risk;
 - d. Explains to the patient or the patient's representative the risks and benefits associated with the use of opioids or ensures that the patient or the patient's representative understands the risks and benefits associated with the use of an opioid as explained to the patient or the patient's representative by an individual licensed under A.R.S. Title 32 and authorized by policies and procedures to explain to the patient or the patient's representative the risks and benefits associated with the use of an opioid;
 - e. If applicable, explains alternatives to an ordered opioid; and
 - f. Obtains informed consent from the patient or the patient's representative, according to R9-10-2007(B);
 3. When administering or causing administration of an opioid to a patient:
 - a. Before administration, identifies the patient's need for the opioid; and
 - b. Monitors the patient's response to the opioid; and
 4. Documents the pain management services provided in the patient's medical record according to R9-10-2008.
- D.** A medical practitioner is exempt from the requirements in subsection (C)(2), if:
1. An order for an opioid is part of treatment for a patient in an emergency;
 2. The order is issued according to policies and procedures that include procedures for:
 - a. Providing treatment without obtaining the consent of a patient or the patient's representative,
 - b. Ordering and administering an opioid in an emergency situation, and
 - c. Complying with the requirements in subsection (C)(2) after the emergency is resolved; and
 3. The emergency situation is documented in the patient's medical record.
- E.** The requirements in subsections (C)(1), (2), and (3), as applicable, do not apply when:
1. A personnel member of a pain management clinic prescribes, orders, or administers an opioid as part of treatment for a patient with an end-of-life condition or pain associated with an active malignancy; or
 2. A prescription for an opioid changes only the type or dosage of an opioid previously prescribed to the patient according to subsection (C)(1):
 - a. Before a pharmacist dispenses the opioid for the patient; or
 - b. If changing the opioid because the patient experienced an adverse reaction to the opioid, within 72 hours after a pharmacist dispensed the opioid for the patient.

R9-10-2007. Patient Rights

- A.** A licensee shall ensure that a patient is afforded the following rights and is informed of these rights:
1. To refuse treatment or withdraw consent for treatment;
 2. To have patient medical records kept confidential; and



- 3. To be informed of proposed treatment and associated risks, possible complications, and alternatives before pain management services are provided.
- B.** A medical director shall ensure that before an opioid is prescribed or ordered for a patient, a medical practitioner obtains informed consent from the patient or patient’s representative that includes:
 - 1. The patient’s:
 - a. Name,
 - b. Date of birth or other patient identifier, and
 - c. Condition for which an opioid is being prescribed or ordered;
 - 2. That an opioid is being prescribed or ordered;
 - 3. The potential risks, adverse reactions, complications, and medication interactions associated with the use of an opioid;
 - 4. If applicable, the potential risks, adverse outcomes, and complications associated with the concurrent use of an opioid and a benzodiazepine or another sedative-hypnotic medication;
 - 5. Alternatives to a prescribed or ordered opioid;
 - 6. The name and signature of the individual explaining the use of an opioid to the patient; and
 - 7. The signature of the patient or the patient’s representative and the date signed.

R9-10-2008. Medical Records

- A.** A medical director shall ensure that a medical record is established and maintained for a patient that contains:
 - 1. Patient identification, including:
 - a. The patient’s name, address, and date of birth;
 - b. The patient’s representative, if applicable; and
 - c. The name and telephone number of an individual to contact in an emergency;
 - 2. The patient’s medical history;
 - 3. The patient’s physical examination;
 - 4. Laboratory test results;
 - 5. The patient’s diagnosis, including co-occurring disorders;
 - 6. The patient’s treatment plan;
 - 7. If applicable:
 - a. The effectiveness of the patient’s current treatment,
 - b. The duration of the current treatment,
 - c. Alternative treatments tried by or planned for the patient, and
 - d. The expected benefit of a new treatment compared with continuing the current treatment;
 - 8. Each consent form signed by the patient or the patient’s representative;
 - 9. The patient’s medication information, including:
 - a. The patient’s age and weight;
 - b. The medications and herbal supplements the patient is currently taking; and
 - c. Allergies or sensitivities to medications, antiseptic solutions, or latex;
 - 10. Prescriptions ordered for the patient and, if an opioid is prescribed or ordered:
 - a. The nature and intensity of the patient’s pain,
 - b. The specific opioid and the reason for the prescription or order,
 - c. The objectives used to determine whether the patient is being successfully treated, and
 - d. Other factors relevant to prescribing or ordering an opioid for the patient;
 - 11. Medications administered to the patient and, if an opioid is administered:
 - a. The patient’s need for the opioid before the opioid was administered, and
 - b. The effect of the opioid administered; and
 - 12. A record of services provided to the patient.
- B.** A licensee shall ensure that:
 - 1. A medical record is accessible only to the Department or personnel members authorized by policies and procedures;
 - 2. Medical record information is confidential and released only with the written informed consent of a patient or the patient’s representative or as otherwise permitted by law; and
 - 3. A medical record is protected from loss, damage, or unauthorized use and is retained according to A.R.S. § 12-2297.
- C.** A medical director shall ensure that:
 - 1. Only personnel authorized by policies and procedures record or sign an entry in a medical record;
 - 2. An entry in a medical record is dated and legible;
 - 3. An entry is authenticated;
 - 4. An entry is not changed after it has been recorded, but additional information related to an entry may be recorded in the medical record;
 - 5. When a verbal or telephone order is entered in the medical record, the entry is authenticated according to policies and procedures by the individual who issued the order;
 - 6. If a rubber-stamp signature or an electronic signature is used:
 - a. An individual’s rubber-stamp or electronic signature is not used by another individual; and
 - b. If a rubber-stamp signature or an electronic signature is used to authenticate an order, the individual whose signature the rubber-stamp signature or electronic signature represents is accountable for the use of the rubber-stamp signature or electronic signature; and



7. If a pain management clinic maintains medical records electronically, the date and time of an entry is recorded by the computer's internal clock.

R9-10-2009. Equipment and Safety Standards**A.** A medical director shall ensure that:

1. The equipment is:
 - a. Sufficient to accommodate:
 - i. The services stated in the pain management clinic's scope of services, and
 - ii. An individual accepted as a patient by the pain management clinic;
 - b. Maintained in working order;
 - c. Tested and calibrated at least once every 12 months or according to the manufacturer's recommendations; and
 - d. Used according to the manufacturer's recommendations;
2. Documentation of each equipment test, calibration, and repair is maintained on the premises for at least 12 months after the date of the testing, calibration, or repair;
3. Equipment and supplies are clean and, if applicable, sterile before each use;
4. Personnel members wash hands after each direct patient contact and after handling soiled linen, soiled clothing, or biohazardous medical waste; and
5. Biohazardous medical waste is identified, stored, and disposed of according to 18 A.A.C. 13, Article 14 and policies and procedures.

B. A medical director shall establish an infection control program and ensure that:

1. The infection control program includes:
 - a. A method to identify and document infections that occur at the pain management clinic;
 - b. Analysis of the types, causes, and spread of infections and communicable diseases at the pain management clinic;
 - c. The development of corrective measures to minimize or prevent the spread of infections and communicable diseases at the pain management clinic; and
 - d. Documentation of infection control activities, including:
 - i. The collection and analysis of infection control data,
 - ii. The actions taken related to infections and communicable diseases, and
 - iii. Reports of communicable diseases; and
2. Infection control documentation is maintained for at least 12 months after the date of documentation.

C. A medical director shall ensure that soiled linen and clothing are kept:

1. In a covered container, and
2. Separate from clean linen and clothing.

D. A licensee shall:

1. Obtain a fire inspection conducted according to the time-frame established by the local fire department or the State Fire Marshal;
2. Make and document any repairs or corrections stated on the fire inspection report;
3. Maintain documentation of a current fire inspection;
4. Ensure that a written emergency plan is established, documented, and implemented that includes procedures for protecting the health and safety of patients and other individuals if circumstances arise in the pain management clinic that immediately threaten the life or health of patients and other individuals, such as a fire, natural disaster, loss of electrical power, or threat or incidence of violence; and
5. Ensure that an evacuation drill is conducted at least once every six months that includes all personnel members on the premises on the day of the evacuation drill.

E. A licensee shall ensure that a pain management clinic has either:

1. Both of the following that are tested and serviced at least once every 12 months:
 - a. A fire alarm system installed according to the National Fire Protection Association 72: National Fire Alarm and Signaling Code, incorporated by reference in A.A.C. R9-1-412, that is in working order; and
 - b. A sprinkler system installed according to the National Fire Protection Association 13 Standard for the Installation of Sprinkler Systems, incorporated by reference in A.A.C. R9-1-412, that is in working order; or
2. The following:
 - a. A smoke detector installed in each hallway of the pain management clinic that is:
 - i. Maintained in an operable condition;
 - ii. Either battery operated or, if hard-wired into the electrical system of the pain management clinic, has a back-up battery; and
 - iii. Tested monthly; and
 - b. A portable, operable fire extinguisher, labeled as rated at least 2A-10-BC by the Underwriters Laboratories, that:
 - i. Is available at the pain management clinic;
 - ii. Is mounted in a fire extinguisher cabinet or placed on wall brackets so that the top handle of the fire extinguisher is not over five feet from the floor and the bottom of the fire extinguisher is at least four inches from the floor;
 - iii. If a disposable fire extinguisher, is replaced when its indicator reaches the red zone; and
 - iv. If a rechargeable fire extinguisher, is serviced at least once every 12 months and has a tag attached to the fire extinguisher that specifies the date of the last servicing and the name of the servicing person.

R9-10-2010. Environmental and Physical Plant Standards**A.** A licensee shall ensure that the premises:

1. Provide lighting and ventilation to ensure the health and safety of a patient;
2. Are maintained in a clean condition;



- 3. Are free from a condition or situation that may cause a patient to suffer physical injury;
 - 4. Are maintained free from insects and vermin;
 - 5. Are smoke-free; and
 - 6. Are sufficient to accommodate:
 - a. The services stated in the pain management center’s scope of services, and
 - b. An individual accepted as a patient by the pain management center.
- B.** A licensee shall ensure that if a pain management clinic collects urine specimens from a patient, the pain management clinic has at least one bathroom on the premises that:
- 1. Contains:
 - a. A working sink with running water.
 - b. A working toilet that flushes and has a seat.
 - c. Toilet tissue.
 - d. Soap for hand washing.
 - e. Paper towels or a mechanical air hand dryer.
 - f. Lighting, and
 - g. A means of ventilation; and
 - 2. Is for the exclusive use of the pain management clinic.

NOTICE OF PROPOSED RULEMAKING
TITLE 9. HEALTH SERVICES
CHAPTER 10. DEPARTMENT OF HEALTH SERVICES
HEALTH CARE INSTITUTIONS: LICENSING

[R18-124]

PREAMBLE

1. <u>Article, Part, or Section Affected (as applicable)</u>	<u>Rulemaking Action</u>
R9-10-223	Amend
R9-10-1501	Amend
R9-10-1502	Amend
R9-10-1503	Amend
R9-10-1504	Renumber
R9-10-1504	New Section
R9-10-1505	Renumber
R9-10-1505	Amend
R9-10-1506	Renumber
R9-10-1506	Amend
R9-10-1507	Renumber
R9-10-1507	Amend
R9-10-1508	Renumber
R9-10-1508	Amend
R9-10-1509	Renumber
R9-10-1509	Amend
R9-10-1510	Renumber
R9-10-1510	Amend
R9-10-1511	Renumber
R9-10-1511	Amend
R9-10-1512	Renumber
R9-10-1512	Amend
R9-10-1513	Renumber
R9-10-1513	Amend
R9-10-1514	Renumber
R9-10-1514	Amend
R9-10-1515	Repeal
R9-10-1515	Renumber
R9-10-1515	Amend

2. Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):
 Authorizing statutes: A.R.S. §§ 36-132(A)(1), 36-136(G)
 Implementing statutes: A.R.S. §§ 36-132(A)(17), 36-405(A) and (B), 36-406, and 36-449.03 and Laws 2017, Ch. 133 and Laws 2017, Ch. 122

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. 310, February 9, 2018

**4. The agency's contact person who can answer questions about the rulemaking:**

Name: Colby Bower, Assistant Director
Address: Arizona Department of Health Services
Public Health Licensing Services
150 N. 18th Ave., Suite 510
Phoenix, AZ 85007

Telephone: (602) 542-6383

Fax: (602) 364-4808

E-mail: Colby.Bower@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, to include an explanation about the rulemaking:

In order to ensure public health, safety, and welfare, Arizona Revised Statutes (A.R.S.) §§ 36-405 and 36-406 require the Arizona Department of Health Services (Department) to adopt rules establishing minimum standards and requirements for construction, modification, and licensure of health care institutions. A.R.S. § 36-449.03 requires the Department to adopt rules that establish minimum standards and requirements for abortion clinics, a class of health care institutions. The Department has adopted minimum standards for hospitals in Arizona Administrative Code (A.A.C.) Title 9, Chapter 10, Article 2 and for abortion clinics in 9 A.A.C. 10, Article 15. Statutory changes made to A.R.S. §§ 36-449.03, 36-2161, and 36-2301 by Laws 2017, Ch. 133, make necessary the revision of requirements for abortion clinics and hospitals related to abortions at or after 20 weeks gestational age, measures to maintain the life of an aborted embryo or fetus born alive, equipment necessary to carry out these life-maintaining measures, and abortions when a fetus has a lethal fetal condition. After obtaining an exception from the rulemaking moratorium established by Executive Order 2017-02, the Department is revising rules in 9 A.A.C. 10, Articles 2 and 15 to comply with Laws 2017, Ch. 133. The Department is also making changes to Article 15 to comply with Laws 2017, Ch. 122, and to simplify and improve the efficiency and effectiveness of the rules. 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 rule that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:

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

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

Not applicable

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

Annual cost/revenue changes are designated as minimal when \$10,000 or less, moderate when between \$10,000 and \$50,000, and substantial when \$50,000 or greater in additional costs or revenues. A cost is listed as significant when meaningful or important, but not readily subject to quantification. The Department anticipates that persons affected by the rulemaking include the Department, hospitals and outpatient treatment centers in which abortions are performed, abortion clinics, patient care staff members, patients of a hospital or abortion clinic undergoing an abortion and their families, and the general public. This preliminary summary does not include costs or benefits of changes made that are directly required by statutes, since the costs imposed by or benefits derived from the changes are due to the statutes and not the rules.

The Department will receive a significant benefit from changes that clarify requirements, make requirements in Article 15 more consistent with requirements in other Articles in the Chapter, remove duplicative requirements, and correct grammatical errors and incorrect cross-references. Hospitals and outpatient treatment centers in which abortions are performed and abortion clinics may also receive a significant benefit from changes that clarify requirements, remove duplicative requirements, and correct grammatical errors and incorrect cross-references. Abortion clinics may incur minimal costs to comply with changes that make requirements in Article 15 more consistent with requirements in other Articles in the Chapter. These include using more consistent terminology; specifying that documentation required by Article 15, such as personnel records or policies and procedures, is to be provided to the Department within two hours after a Department request; and requiring an abortion clinic to establish and implement a quality management plan.

Patient care staff members include physicians, registered nurse practitioners, nurses, physician assistants, and surgical assistants who provide medical services, nursing services, or health-related services to a patient. The Department anticipates that the rule changes being made to improve the efficiency and effectiveness of the rules may provide a significant benefit to these individuals by enabling them to better understand requirements and, thus, better comply with the requirements. A patient undergoing an abortion procedure may receive better services from a patient care staff member that better understands and, thus, better complies with requirements in the rules. Therefore, the rule changes may provide a significant benefit to a patient undergoing an abortion



procedure and the patient’s family. Having rules that are more easily understood, complied with, and enforced may provide a significant benefit to the general public.

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

Name: Colby Bower, Assistant Director
Address: Arizona Department of Health Services
Public Health Licensing Services
150 N. 18th Ave., Suite 510
Phoenix, AZ 85007

Telephone: (602) 542-6383
Fax: (602) 364-4808
E-mail: Colby.Bower@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

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

The Department has scheduled the following oral proceeding:

Date and time: Tuesday, August 14, 2018, 11:00 a.m.
Location: 150 N. 18th Ave., 4th Floor Training Room
Phoenix, AZ 85007

Close of record: Tuesday, August 14, 2018, 4:00 p.m.

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

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

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

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

A.R.S. § 36-407 prohibits a person from establishing, conducting, or maintaining “a health care institution or any class or subclass of health care institution unless that person holds a current and valid license issued by the [D]epartment specifying the class or subclass of health care institution the person is establishing, conducting or maintaining.” A health care institution license is specific to the licensee, class or subclass of health care institution, facility location, and scope of services provided. As such, a general permit is not applicable and is not used.

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

Not applicable

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

No business competitiveness analysis was received by the Department.

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

Not applicable

13. The full text of the rules follows:

**TITLE 9. HEALTH SERVICES
CHAPTER 10. DEPARTMENT OF HEALTH SERVICES
HEALTH CARE INSTITUTIONS: LICENSING**

ARTICLE 2. HOSPITALS

Section
R9-10-223. Perinatal Services



ARTICLE 15. ABORTION CLINICS

Section

- R9-10-1501. Definitions
 R9-10-1502. Application and Documentation Submission Requirements
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 R9-10-1504. Quality Management
~~R9-10-1504~~.~~R9-10-1505~~. Incident Reporting
~~R9-10-1505~~.~~R9-10-1506~~. Personnel Qualifications and Records
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~~R9-10-1507~~.~~R9-10-1508~~. Patient Rights
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~~R9-10-1509~~.~~R9-10-1510~~. Patient Transfer and Discharge
~~R9-10-1510~~.~~R9-10-1511~~. Medications and Controlled Substances
~~R9-10-1511~~.~~R9-10-1512~~. Medical Records
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~~R9-10-1513~~.~~R9-10-1514~~. Equipment Standards
 R9-10-1515. Enforcement
~~R9-10-1514~~.~~R9-10-1515~~. Physical Facilities Plant Standards

ARTICLE 2. HOSPITALS

R9-10-223. Perinatal Services

- A. An administrator of a hospital that provides perinatal organized services shall ensure that:
1. Perinatal services are provided in a designated area under the direction of a medical staff member;
 2. Only medical and surgical procedures approved by the medical staff are performed in the perinatal services unit;
 3. The perinatal services unit has the capability to initiate an emergency cesarean delivery within the time-frame established by the medical staff and documented in policies and procedures;
 4. Only a patient in need of perinatal services or gynecological services receives perinatal services or gynecological services in the perinatal services unit;
 5. A patient receiving gynecological services does not share a room with a patient receiving perinatal services;
 6. A chronological log of perinatal services provided to patients is maintained that includes:
 - a. The patient's name;
 - b. The date, time, and mode of the patient's arrival;
 - c. The disposition of the patient including discharge, transfer, or admission time; ~~and~~
 - d. The following information for a delivery of a neonate:
 - i. The neonate's name or other identifier;
 - ii. The name of the medical staff member who delivered the neonate;
 - iii. The delivery time and date; and
 - iv. Complications of delivery, if any; and
 - e. If an abortion procedure was performed at or after 20 weeks gestational age, whether the fetus was delivered alive;
 7. The chronological log required in subsection (A)(6) is maintained by the hospital in the perinatal services unit for at least 12 months after the date the perinatal services are provided and then maintained by the hospital for at least an additional 12 months;
 8. The perinatal services unit provides fetal monitoring;
 9. The perinatal services unit has ultrasound capability;
 10. Except in an emergency, a neonate is identified as required by policies and procedures before moving the neonate from a delivery area;
 11. Policies and procedures specify:
 - a. Security measures to prevent neonatal abduction, and
 - b. How the hospital determines to whom a neonate may be discharged;
 12. A neonate is discharged only to an individual who:
 - a. Is authorized according to subsection (A)(11), and
 - b. Provides identification;
 13. A neonate's medical record identifies the individual to whom the neonate is discharged;
 14. A patient or the individual to whom the neonate is discharged receives perinatal education, discharge instructions, and a referral for follow-up care for a neonate in addition to the discharge planning requirements in R9-10-209;
 15. Intensive care services for neonates comply with the requirements in R9-10-221;
 16. At least one registered nurse is on duty in a nursery when there is a neonate in the nursery except as provided in subsection (A)(17);
 17. A nursery occupied only by a neonate, who is placed in the nursery for the convenience of the neonate's mother and does not require treatment as established in this Article, is staffed by a nurse;
 18. Equipment and supplies are available to a nursery, labor-delivery-recovery room, or labor-delivery-recovery-postpartum room to meet the needs of each neonate; and
 19. In a nursery, only a neonate's bed or bassinet is used for changing diapers, bathing, or dressing the neonate.
- B. An administrator of a hospital that does not provide perinatal organized services shall comply with the requirements in R9-10-217(C).
- C. In addition to applicable requirements in A.R.S. Title 36, Chapter 20, an administrator of a hospital in which an abortion procedure is performed shall ensure that:
1. Policies and procedures are established, documented, and implemented to protect the health and safety of a patient that require:



- a. For an abortion procedure performed at or after 20 weeks gestational age, a personnel member or medical staff member qualified according to policies and procedures to perform neonatal resuscitation, other than the physician performing the abortion procedure, is in the room in which the abortion procedure is performed before the delivery of the fetus;
- b. Compliance with A.R.S. § 36-2301.01, if applicable;
- c. Neonatal resuscitation of a fetus delivered alive, according to A.R.S. § 36-2301(D)(3); and
- d. A medical record to be established and maintained for a fetus delivered alive;
- 2. The medical record of a patient receiving an abortion procedure contains:
 - a. Documentation from the physician providing the abortion procedure and other personnel members present certifying that the fetus was not delivered alive, or
 - b. A link to the medical record of a fetus delivered alive; and
- 3. For a fetus delivered alive, a medical record contains:
 - a. An identification of the fetus, including:
 - i. The name of the patient from whom the fetus was delivered alive, and
 - ii. The date the fetus was delivered alive;
 - b. Orders issued by a physician, physician assistant, or registered nurse practitioner;
 - c. A record of medical services, nursing services, and health-related services provided to the fetus delivered alive;
 - d. If applicable, information about medication administered to the fetus delivered alive; and
 - e. If the fetus had a lethal fetal condition, the results of the confirmation of the lethal fetal condition.

ARTICLE 15. ABORTION CLINICS

R9-10-1501. Definitions

In addition to the definitions in A.R.S. §§ 36-401, 36-449.01, 36-449.03, 36-2151, 36-2158, and 36-2301.01 and R9-10-101, the following definitions apply in this Article, unless otherwise specified:

- ~~1.~~ “Admission” means documented acceptance by a hospital of an individual as an inpatient as defined in R9-10-201 on the order of a physician.
- ~~2.~~1. “Admitting privileges” means permission extended by a hospital to a physician to allow admission of a patient ~~an individual as an inpatient, as defined in R9-10-201:~~
 - a. By the patient’s own physician, or
 - b. Through a written agreement between the patient’s physician and another physician that states that the other physician has permission to personally admit the patient to a hospital in this state and agrees to do so.
- ~~3.~~ “Conspicuously posted” means placed at a location within an abortion clinic that is accessible and visible to patients and the public.
- ~~4.~~2. “Course” means training or education, including hands-on practice under the supervision of a physician, ~~training, or education.~~
- ~~5.~~ “Discharge” means a patient no longer requires the medical services, nursing services, or health-related services provided by the abortion clinic.
- ~~6.~~ Emergency means a potentially life-threatening occurrence that requires an immediate response or medical treatment.
- ~~7.~~3. “Employee” means an individual who receives compensation from a licensee, but does not provide medical services, nursing services, or health-related services.
- ~~8.~~4. “First trimester” means 1 through 14 weeks as measured from the first day of the last menstrual period or 1 through 12 weeks as measured from the date of fertilization.
- ~~9.~~5. “Incident” means an abortion-related patient death or serious injury to a patient or ~~viable~~ fetus delivered alive.
- ~~10.~~ “Licensee” means an individual, a partnership, an association, a limited liability company, or corporation authorized by the Department to operate an abortion clinic.
- ~~11.~~6. “Local” means under the jurisdiction of a city or county in Arizona.
- ~~12.~~7. “Medical director” means a physician who is responsible for the direction of the medical services, nursing services, and health-related services provided to patients at an abortion clinic.
- ~~13.~~8. “Medical evaluation” means obtaining a patient’s medical history, performing a physical examination of a patient’s body, and conducting laboratory tests as provided in ~~R9-10-1508~~ R9-10-1509.
- ~~14.~~9. “Monitor” means to observe and document, continuously or intermittently, the values of certain physiologic variables on a patient such as pulse, blood pressure, oxygen saturation, respiration, and blood loss.
- ~~15.~~ “Nationally recognized medical journal” means any publication distributed nationally that contains peer-reviewed medical information, such as the *American Journal of Radiology* or the *Journal of Ultrasound in Medicine*.
- ~~10.~~ “Neonatal resuscitation” means procedures to assist in maintaining the life of a fetus delivered alive, as described in A.R.S. § 36-2301(D)(3).
- ~~16.~~11. “Patient” means a female receiving medical services, nursing services, or health-related services related to an abortion.
- ~~17.~~12. “Patient care staff ~~member~~” means a physician, registered nurse practitioner, nurse, physician assistant, or surgical assistant who provides medical services, nursing services, or health-related services to a patient.
- ~~18.~~ “Patient’s representative” means a patient’s legal guardian, an individual acting on behalf of a patient with the written consent of the patient, or a surrogate according to A.R.S. § 36-3201.
- ~~19.~~13. “Patient transfer” means relocating a patient requiring medical services from an abortion clinic to another health care institution.
- ~~20.~~14. “Personally identifiable patient information” means:
 - a. The name, address, telephone number, e-mail address, Social Security number, and birth date of:
 - i. The patient,
 - ii. The patient’s representative,
 - iii. The patient’s emergency contact,



- iv. The patient's children,
 - v. The patient's spouse,
 - vi. The patient's sexual partner, and
 - vii. Any other individual identified in the patient's medical record other than patient care staff;
 - b. The patient's place of employment;
 - c. The patient's referring physician;
 - d. The patient's insurance carrier or account;
 - e. Any "individually identifiable health information" as proscribed in 45 CFR 164-514; and
 - f. Any other information in the patient's medical record that could reasonably lead to the identification of the patient.
- ~~21-15.~~ "Personnel" means patient care staff members, employees, and volunteers.
- ~~22.~~ "Physical facilities" means property that is:
- ~~a.~~ Designated on an application for a license by the applicant; and
 - ~~b.~~ Licensed to provide services by the Department according to A.R.S. Title 36, Chapter 4.
- ~~16.~~ "Serious injury" means a life-threatening physical condition related to an abortion procedure.
- ~~23-17.~~ "Surgical assistant" means an individual who is not licensed as a physician, physician assistant, registered nurse practitioner, or nurse who performs duties as directed by a physician, physician assistant, registered nurse practitioner, or nurse.
- ~~24-18.~~ "Volunteer" means an individual who, without compensation, performs duties as directed by a ~~member of the~~ member of the patient care staff member at an abortion clinic.

R9-10-1502. Application and Documentation Submission Requirements

- A.** An applicant shall submit an application for licensure that meets the requirements in A.R.S. § 36-422 and 9 A.A.C. 10, Article 1.
- B.** A licensee shall submit to the Department the documentation required according to A.R.S. § 36-449.02(B) with the applicable fees required in R9-10-106(C).

R9-10-1503. Administration

- A.** A licensee is responsible for the organization and management of an abortion clinic.
- B.** A licensee shall:
 - 1. Adopt policies and procedures for the administration and operation of an abortion clinic;
 - 2. Designate a medical director who:
 - ~~a.~~ is licensed according to A.R.S. Title 32, Chapter 13, 17, or 29; and
 - ~~b.~~ The licensee and the medical director may be the same individual as the licensee; and
 - 3. Ensure the following documents are conspicuously posted ~~at the physical facilities on the premises:~~
 - a. Current abortion clinic license issued by the Department;
 - b. Current telephone number and address of the unit in the Department responsible for licensing the abortion clinic;
 - c. Evacuation map; and
 - d. Signs that comply with A.R.S. § ~~36-2153(G)~~ 36-2153(H); and
 - 4. Except as specified in R9-10-1512(D)(4), ensure that documentation required by this Article is provided to the Department within two hours after a Department request.
- C.** A medical director shall ensure written policies and procedures are established, documented, and implemented to protect the health and safety of a patient including for:
 - 1. Personnel qualifications, duties, and responsibilities;
 - 2. Individuals qualified to provide counseling in the abortion clinic and the amount and type of training required for an individual to provide counseling;
 - 3. If the abortion clinic performs an abortion procedure at or after 20 weeks gestational age:
 - ~~a.~~ Individuals qualified in neonatal resuscitation and the amount and type of training required for an individual to provide neonatal resuscitation, and
 - ~~b.~~ Designation of an individual to arrange the transfer to a hospital of a fetus delivered alive;
 - ~~3-4.~~ Verification of the competency of the physician performing an abortion according to ~~R9-10-1505~~ R9-10-1506;
 - ~~4-5.~~ The storage, administration, accessibility, disposal, and documentation of a medication, ~~and a~~ or controlled substance;
 - ~~5-6.~~ Accessibility and security of ~~patient~~ medical records;
 - ~~6-7.~~ Abortion procedures including:
 - ~~a.~~ recovery Recovery and follow-up care; ~~and the~~
 - ~~b.~~ The minimum length of time a patient remains in the recovery room or area based on:
 - ~~a-i.~~ The type of abortion performed;
 - ~~b-ii.~~ The estimated gestational age of the fetus;
 - ~~e-iii.~~ The type and amount of medication administered; and
 - ~~d-iv.~~ The physiologic signs including vital signs and blood loss; and
 - ~~c.~~ If the abortion clinic performs an abortion procedure at or after 20 weeks gestational age, the requirements in A.R.S. § 36-2301(D);
 - ~~7-8.~~ Infection control including methods of sterilizing equipment and supplies;
 - ~~8-9.~~ Medical emergencies; and
 - ~~9-10.~~ Patient discharge and patient transfer.
- D.** For an abortion clinic that is not in substantial compliance or that is in substantial compliance but refuses to carry out a plan of correction acceptable to the Department, the Department may take enforcement action as specified in R9-10-111.

R9-10-1504. Quality Management

A medical director shall ensure that:



1. A plan is established, documented, and implemented for an ongoing quality management program that, at a minimum, includes:
 - a. A method to identify, document, and evaluate incidents;
 - b. A method to collect data to evaluate services provided to patients;
 - c. A method to evaluate the data collected to identify a concern about the delivery of services related to patient care;
 - d. A method to make changes or take action as a result of the identification of a concern about the delivery of services related to patient care; and
 - e. The frequency of submitting a documented report required in subsection (2) to the licensee;
2. A documented report is submitted to the licensee that includes:
 - a. An identification of each concern about the delivery of services related to patient care, and
 - b. Any changes made or actions taken as a result of the identification of a concern about the delivery of services related to patient care; and
3. The report required in subsection (2) and the supporting documentation for the report are maintained for at least 12 months after the date the report is submitted to the licensee.

~~R9-10-1504~~R9-10-1505. Incident Reporting

- A. A licensee shall ensure that the Department is notified of an incident as follows:
 1. For the death of a patient, verbal notification the next working day;
 2. ~~For fetus delivered alive, verbal notification the next working day;~~ and
 - 2-3. For a serious injury of a patient or viable fetus, written notification within 10 calendar days after the date of the serious injury.
- B. A medical director shall conduct an investigation of an incident and document an incident report that includes:
 1. The date and time of the incident₂;
 2. The name of the patient₂;
 3. A description of the incident₂;
 4. Names of individuals who observed the incident₂;
 5. Action taken by patient care staff members and employees during the incident and immediately following the incident₂; and
 6. Action taken by the patient care staff members and employees to prevent the incident from occurring in the future.
- C. A medical director shall ensure that the incident report is:
 1. Submitted to the Department and, if the incident involved a licensed individual, the applicable professional licensing board within 10 calendar days after the date of the notification in subsection (A); and
 2. Maintained ~~in the physical facilities on the premises~~ on the premises for at least two years after the date of the incident.

~~R9-10-1505~~R9-10-1506. Personnel Qualifications and Records

- A licensee shall ensure that:
1. A physician who performs an abortion demonstrates to the medical director that the physician is competent to perform an abortion by:
 - a. The submission of documentation of education and experience₂; and
 - b. Observation by or interaction with the medical director;
 2. Surgical assistants and volunteers who provide counseling and patient advocacy receive training in these specific responsibilities and any other responsibilities assigned and that documentation of the training received is maintained in the individual's personnel file ~~of the training received~~;
 3. An individual who performs an ultrasound provides documentation that the individual is:
 - a. A physician;
 - b. A physician assistant, registered nurse practitioner, or nurse who completed a ~~hands-on~~ course in performing ultrasounds under the supervision of a physician; or
 - c. An individual who:
 - i. Completed a ~~hands-on~~ course in performing ultrasounds under the supervision of a physician, and
 - ii. Is not otherwise precluded by law from performing an ultrasound;
 4. An individual has completed a course for the type of ultrasound the individual performs;
 5. If the abortion clinic performs an abortion procedure at or after 20 weeks gestational age, an individual who is available to perform neonatal resuscitation provides documentation that the individual:
 - a. Is a:
 - i. Physician,
 - ii. Physician assistant,
 - iii. Registered nurse practitioner, or
 - iv. Nurse; and
 - b. Has completed a course in performing neonatal resuscitation that is consistent with training provided by the American Academy of Pediatrics Neonatal Resuscitation Program and includes:
 - i. Instruction in the use of resuscitation devices for positive-pressure ventilation, tracheal intubation, medications that may be necessary for neonatal resuscitation and their administration, and resuscitation of pre-term newborns; and
 - ii. Assessment of the individual's skill in applying the information provided through the instruction in subsection (5)(b)(i);
 - 5-6. A personnel file for each ~~member of the~~ patient care staff member and each volunteer is maintained either electronically or in writing and includes:
 - a. The individual's name and position title;
 - b. The first and, if applicable, the last date of employment or volunteer service;
 - c. Verification of qualifications, training, or licensure, as applicable;
 - d. Documentation of cardiopulmonary resuscitation certification, as applicable;



- e. Documentation of verification of competency, as required in subsection (1), and signed and dated by the medical director;
 - f. Documentation of training for surgical assistants and volunteers; ~~and~~
 - g. Documentation of completion of a course as required in subsection (3), for an individual performing ultrasounds; and
 - h. Documentation of competency to perform neonatal resuscitation, as required in subsection (5), if applicable; and
- 6-7. Personnel files are maintained ~~in the physical facilities on the premises~~ for at least two years ~~from~~ after the ending date of employment or volunteer service.

~~R9-10-1506.~~R9-10-1507. Staffing Requirements

- A. A licensee shall ensure that there is a sufficient number of patient care staff members and employees to:
1. Meet the requirements of this Article;
 2. Ensure the health and safety of a patient;
 3. Meet the needs of a patient based on the patient's medical evaluation.
- B. A licensee shall ensure that:
1. A ~~member of the patient care staff member other than, except for~~ a surgical assistant, who is current in cardiopulmonary resuscitation certification, ~~is in the physical facilities on the premises~~ until all patients are discharged;
 2. A physician, with admitting privileges at a health care institution that is classified by the director as a hospital according to A.R.S. § 36-405(B), remains on the premises of the abortion clinic until all patients who received a medication abortion are stable and ready to leave;
 3. A physician, with admitting privileges at a health care institution that is classified by the director as a hospital according to A.R.S. § 36-405(B) and that is within 30 miles of the abortion clinic by road, as defined in A.R.S. § 17-451, remains on the abortion clinic's premises until all patients who received a surgical abortion are stable and ~~ready to leave~~ discharged from the recovery room; ~~and~~
 4. ~~A physician, a nurse, a registered nurse practitioner, a physician assistant, or, if a physician is able to provide direct supervision as defined in A.R.S. § 32-1401 or A.R.S. § 32-1800 as applicable, a medical assistant under the direct supervision of the physician:~~
 - a. ~~Monitors each patient during the patient's recovery following the abortion; and~~
 - b. ~~Remains in the abortion clinic until each patient is discharged by a physician.~~
 4. A patient care staff member is on the premises to comply with R9-10-1509(H); and
 5. If the abortion clinic performs an abortion procedure at or after 20 weeks gestational age, a patient care staff member qualified according to policies and procedures to perform neonatal resuscitation is available for the abortion procedure.

~~R9-10-1507.~~R9-10-1508. Patient Rights

- A licensee shall ensure that a patient is afforded the following rights, and is informed of these rights:
1. To refuse treatment, or withdraw consent for treatment;
 2. To have medical records kept confidential; and
 3. To be informed of:
 - a. Billing procedures and financial liability before abortion services are provided;
 - b. Proposed medical or surgical procedures, associated risks, possible complications, and alternatives;
 - c. Counseling services that are provided ~~in the physical facilities on the premises; and~~
 - d. The right to review the ultrasound results with a physician, a physician assistant, a registered nurse practitioner, or a registered nurse before the abortion procedure; ~~and~~
 - e. The right to receive a print of the ultrasound image.

~~R9-10-1508.~~R9-10-1509. Abortion Procedures

- A. A medical director shall ensure that a medical evaluation of a patient is conducted before the patient's abortion is performed that includes:
1. A medical history including:
 - a. Allergies to medications, antiseptic solutions, or latex;
 - b. Obstetrical and gynecological history;
 - c. Past surgeries;
 - d. Medication the patient is currently taking; and
 - e. Other medical conditions;
 2. A physical examination, performed by a physician that includes a bimanual examination to estimate uterine size and palpation of adnexa; ~~and~~
 3. The following laboratory tests:
 - a. A urine or blood test to determine pregnancy;
 - b. Rh typing, unless the patient provides written documentation of blood type acceptable to the physician;
 - c. Anemia screening; and
 - d. Other laboratory tests recommended by the physician or medical director on the basis of the physical examination; ~~and~~
 4. An ultrasound imaging study of the fetus, performed as required in A.R.S. §§ 36-2156 and 36-2301.02(A).
- B. If the medical evaluation indicates a patient is Rh negative, a medical director shall ensure that:
1. The patient receives information from a physician on this condition;
 2. The patient is offered RhO(d) immune globulin within 72 hours after the abortion procedure;
 3. If a patient refuses RhO(d) immune globulin, the patient signs and dates a form acknowledging the patient's condition and refusing the RhO(d) immune globulin;
 4. The form in subsection (B)(3) is maintained in the patient's medical record; and



- 5. If a patient refuses RhO(d) immune globulin or if a patient refuses to sign and date an acknowledgment and refusal form, the physician documents the patient's refusal in the patient's medical record.
- C. A physician ~~estimates~~ shall estimate the gestational age of the fetus, based on one of the following criteria, and ~~records~~ record the estimated gestational age in the patient's medical record. ~~The estimated age is based upon:~~
 - 1. Ultrasound measurements of the biparietal diameter, length of femur, abdominal circumference, visible pregnancy sac, or crown-rump length or a combination of these; or
 - 2. The date of the last menstrual period or the date of fertilization and a bimanual examination of the patient.
- D. A medical director shall ensure that:
 - 1. ~~An~~ The ultrasound of a patient required in subsection (A)(4) is performed by an individual who meets the requirements in ~~R9-10-1505(3)~~ R9-10-1506(3);
 - 2. An ultrasound estimate of gestational age of a fetus is performed using methods and tables or charts ~~published in a nationally recognized medical journal in a publication distributed nationally that contains peer-reviewed medical information, such as medical information derived from a publication describing research in obstetrics and gynecology or in diagnostic imaging;~~
 - 3. An original patient ultrasound print image is:
 - a. Interpreted by a physician; and
 - b. Maintained in the patient's medical record in either electronic or paper form; and
 - 4. If requested by the patient, the ultrasound image is reviewed with the patient by a physician, physician assistant, registered nurse practitioner, or registered nurse.
- E. A medical director shall ensure that before an abortion is performed on a patient:
 - 1. Written consent, that meets the requirements in A.R.S. § 36-2152 or 36-2153, as applicable, and A.R.S. § 36-2158, is signed and dated by the patient or the patient's ~~legal guardian representative;~~ and
 - 2. Information is provided to the patient on the abortion procedure, including alternatives, risks, and potential complications.
- F. A medical director shall ensure that an abortion is performed according to the abortion clinic's policies and procedures and this Article.
- G. ~~A medical director shall ensure that any medication, drug, or substance used to induce an abortion is administered in compliance with the protocol authorized by the United States Food and Drug Administration and that is outlined in the final printing labeling instructions for that medication, drug, or substance.~~
- ~~H.G.~~ A medical director shall ensure that:
 - 1. ~~Patient~~ A patient care staff ~~member~~ monitor the monitors a patient's vital signs throughout an abortion procedure to ensure the patient's health and safety;
 - 2. Intravenous access is established and maintained on a patient undergoing an abortion after the first trimester unless the physician determines that establishing intravenous access is not appropriate for the particular patient and documents that fact in the patient's medical record;
 - 3. If an abortion procedure is performed at or after 20 weeks gestational age, a patient care staff member qualified in neonatal resuscitation, other than the physician performing the abortion procedure, is in the room in which the abortion procedure takes place before the delivery of the fetus; and
 - 3.4. If a viable fetus shows signs of life is delivered alive:
 - a. Resuscitative measures, including the following, are used to support life:
 - i. Warming and drying of the fetus;
 - ii. Clearing secretions from and positioning the airway of the fetus;
 - iii. Administering oxygen as needed to the fetus; and
 - iv. Assessing and monitoring the cardiopulmonary status of the fetus;
 - b. A determination is made of whether the fetus is a viable fetus;
 - c. A viable fetus is provided treatment to support life;
 - b.d. ~~The~~ A viable fetus is transferred as required in ~~R9-10-1509~~ R9-10-1510; and
 - e.c. Resuscitative measures and the transfer, as applicable, are documented.
- ~~H.H.~~ To ensure a patient's health and safety, ~~A~~ a medical director shall ensure that following the abortion procedure:
 - 1. A patient's vital signs and bleeding are monitored by ~~a physician, nurse, registered nurse practitioner, physician assistant, or, if a physician is able to provide direct supervision as defined in A.R.S. § 32-1401 or A.R.S. § 32-1800, as applicable, a medical assistant under the direct supervision of the physician to ensure the patient's health and safety;~~
 - a. A physician;
 - b. A physician assistant;
 - c. A registered nurse practitioner;
 - d. A nurse; or
 - e. If a physician is able to provide direct supervision, as defined in A.R.S. § 32-1401 or A.R.S. § 32-1800, as applicable, to a medical assistant, as defined in A.R.S. § 32-1401 or A.R.S. § 32-1800, a medical assistant under the direct supervision of the physician; and
 - 2. A patient remains in the recovery room or recovery area until a physician, physician assistant, registered nurse practitioner, or nurse examines the patient and determines that the patient's medical condition is stable and the patient is ready to leave the recovery room or recovery area.
- ~~J.I.~~ A medical director shall ensure that follow-up care ~~includes:~~
 - 1. ~~With a patient's consent, a telephone call to the patient by a member of the patient care staff, except a surgical assistant, within 24 hours after the patient's discharge following a surgical abortion to assess the patient's recovery. If the patient care staff is unable to speak with the patient, for any reason, the attempt to contact the patient is documented in the patient's medical record;~~
 - 2. ~~Following a surgical abortion, a follow-up visit offered and scheduled, if requested, no more than 21 days after the abortion. The follow-up visit shall include:~~



- a. A physical examination;
 - b. A review of all laboratory tests as required in R9-10-1508(A)(3); and
 - e. A urine pregnancy test; and
3. Following a medication abortion, a follow-up visit offered and scheduled between seven and 21 days after the initial dose of a substance used to induce an abortion. The follow-up visit shall include:
- a. A urine pregnancy test; and
 - b. An assessment of the degree of bleeding.
1. For a surgical abortion is offered to a patient that includes:
- a. With a patient's consent, a telephone call made to the patient to assess the patient's recovery:
 - i. By a patient care staff member other than a surgical assistant; and
 - ii. Within 24 hours after the patient's discharge following a surgical abortion; and
 - b. A follow-up visit scheduled, if requested, no more than 21 calendar days after the abortion that includes:
 - i. A physical examination,
 - ii. A review of all laboratory tests as required in subsection (A)(3), and
 - iii. A urine pregnancy test;
2. For a medication abortion includes a follow-up visit, scheduled between seven and 21 calendar days after the initial dose of a substance used to induce an abortion, that includes:
- a. A urine pregnancy test, and
 - b. An assessment of the degree of bleeding; and
3. Is documented in the patient's medical record, including:
- a. A patient's acceptance or refusal of a follow-up visit following a surgical abortion;
 - b. If applicable, the results of the follow-up visit; and
 - c. If applicable, whether the patient consented to a telephone call and, if so, whether the patient care staff member making the telephone call to the patient:
 - i. Spoke with the patient about the patient's recovery, or
 - ii. Was unable to speak with the patient.

~~K, J.~~ If a continuing pregnancy is suspected as a result of the follow-up visit required in subsection ~~(J)(2) or (J)(3)~~ (I)(1)(b) or (I)(2), a physician who performs abortions shall be consulted.

~~R9-10-1509.~~R9-10-1510. Patient Transfer and Discharge

A. A medical director shall ensure that:

- 1. For a patient:
 - a. A patient is transferred to a hospital for an emergency involving the patient;
- 2. ~~A viable fetus requiring emergency care is transferred to a hospital;~~
 - ~~3-b.~~ A patient transfer is documented in the patient's medical record; and
 - ~~4-c.~~ Documentation of a medical evaluation, treatment given provided, and laboratory and diagnostic information is transferred with a patient; and
- 2. For a viable fetus:
 - a. A viable fetus requiring emergency care is transferred to a hospital.
 - b. The transfer of a viable fetus is documented in the viable fetus's medical record, and
 - c. Documentation of an assessment of cardiopulmonary function and treatment provided to a viable fetus is transferred with the viable fetus.

B. A medical director shall ensure that before a patient is discharged:

- 1. A physician signs the patient's discharge order; and
- 2. A patient receives follow-up instructions at discharge that include:
 - a. Signs of possible complications;
 - b. When to access medical services in response to complications;
 - c. A telephone number of an individual or entity to contact for medical emergencies;
 - d. Information and precautions for resuming vaginal intercourse after the abortion;
 - e. Information specific to the patient's abortion or condition.

~~R9-10-1510.~~R9-10-1511. Medications and Controlled Substances

A medical director shall ensure that:

- 1. The abortion clinic complies with the requirements for medications and controlled substances in A.R.S. Title 32, Chapter 18, and A.R.S. Title 36, Chapter 27;
- 2. A medication is administered in compliance with an order from a physician, physician assistant, registered nurse practitioner, or as otherwise provided by law;
- 3. A medication is administered to a patient or to a viable fetus by a physician or as otherwise provided by law;
- 4. Medications and controlled substances are maintained in a locked area ~~in the physical facilities on the premises;~~
- 5. Only personnel designated by policies and procedures have access to the locked area containing medications and controlled substances;
- 6. Expired, mislabeled, or unusable medications and controlled substances are disposed of according to policies and procedures;
- 7. A medication error or an adverse reaction, including any actions taken in response to the medication error or adverse reaction, is immediately reported to the medical director and licensee, and recorded in the patient's medical record;
- 8. Medication information for a patient is maintained in ~~a~~ the patient's medical record and contains:
 - a. The patient's name, age, and weight;
 - b. The medications the patient is currently taking; ~~and~~



- c. Allergies or sensitivities to medications, antiseptic solutions, or latex; and
- ~~9-d.~~ If medication is administered to a the patient, the following are documented in the patient's medical record:
 - ~~a-i.~~ The date and time of administration;
 - ~~b-ii.~~ The name, strength, dosage form, amount of medication, and route of administration; and
 - ~~e-iii.~~ The identification and signature of the individual administering the medication; and
- 9. If administered to a fetus delivered alive, the following are documented in the fetus's medical record:
 - a. The date and time of oxygen administration;
 - b. The amount and flow rate of the oxygen;
 - c. The identification and signature of the individual administering the oxygen; and
 - d. For a viable fetus:
 - i. The date and time of medication administration;
 - ii. The name, strength, dosage form, amount of medication, and route of administration; and
 - iii. The identification and signature of the individual administering the medication.

~~R9-10-1511~~R9-10-1512. Medical Records

- A. A licensee shall ensure that:
 - ~~1-~~ A a medical record is established and maintained for a patient that contains:
 - ~~a-1.~~ Patient identification including:
 - ~~i-a.~~ The patient's name, address, and date of birth;
 - ~~ii-b.~~ The designated patient's representative, if applicable; and
 - ~~iii-c.~~ The name and telephone number of an individual to contact in an emergency;
 - ~~b-2.~~ The patient's medical history required in R9-10-1508(A)(1) R9-10-1509(A)(1);
 - ~~e-3.~~ The patient's physical examination required in R9-10-1508(A)(2) R9-10-1509(A)(2);
 - ~~d-4.~~ The laboratory test results required in R9-10-1508(A)(3) R9-10-1509(A)(3);
 - 5. The ultrasound results, including the original print, required in R9-10-1509(A)(4);
 - ~~e-6.~~ The physician's estimated gestational age of the fetus required in R9-10-1508(C) R9-10-1509(C);
 - ~~f-~~ The ultrasound results, including the original print, required in R9-10-1508(D);
 - ~~g-7.~~ Each consent form signed by the patient or the patient's legal guardian representative;
 - ~~h-8.~~ Orders issued by a physician, physician assistant, or registered nurse practitioner;
 - ~~i-9.~~ A record of medical services, nursing services, and health-related services provided to the patient; and
 - ~~j-10.~~ The patient's medication information; and
 - 11. Documentation related to follow-up care specified in R9-10-1509(I); and
 - 12. If the abortion procedure was performed at or after 20 weeks gestational age and the fetus was not delivered alive, documentation from the physician and other patient care staff member present certifying that the fetus was not delivered alive.
- B. A licensee shall ensure that a medical record is established and maintained for a fetus delivered alive that contains:
 - 1. An identification of the fetus, including:
 - a. The name of the patient from whom the fetus was delivered alive, and
 - b. The date the fetus was delivered alive;
 - 2. Orders issued by a physician, physician assistant, or registered nurse practitioner;
 - 3. A record of medical services, nursing services, and health-related services provided to the fetus delivered alive;
 - 4. If applicable, information about medication administered to the fetus delivered alive; and
 - 5. If the abortion procedure was performed at or after 20 weeks gestational age:
 - a. Documentation of the requirements in R9-10-1509(G)(4); and
 - b. If the fetus had a lethal fetal condition, the results of the confirmation of the lethal fetal condition.
- C. A licensee shall ensure that:
 - ~~2-1.~~ A medical record is accessible only to the Department or personnel authorized by policies and procedures;
 - ~~3-2.~~ Medical record information is confidential and released only with the written informed consent of a patient or the patient's representative or as otherwise permitted by law;
 - ~~4-3.~~ A medical record is protected from loss, damage, or unauthorized use and is maintained and accessible for at least seven years after the date of an adult patient's discharge or if the patient is a child, either for at least three years after the child's 18th birthday or for at least seven years after the patient's discharge, whichever date occurs last;
 - ~~5-4.~~ A medical record is maintained at the abortion clinic for at least six months after the date of the patient's discharge; and
 - ~~6-5.~~ Vital records and vital statistics are retained according to A.R.S. § 36-343.
- B. A licensee shall comply with Department requests for access to or copies of patient medical records as follows:
 - 1. Subject to the redaction permitted in subsection (B)(5), for patient medical records requested for review in connection with a compliance inspection, the licensee shall provide the Department with the following patient medical records related to medical services associated with an abortion, including any follow-up visits to the abortion clinic in connection with the abortion:
 - a. Patient identification including:
 - i. The patient's name, address, and date of birth;
 - ii. The designated patient's representative, if applicable; and
 - iii. The name and telephone number of an individual to contact in an emergency;
 - b. The patient's medical history required in R9-10-1508(A)(1);
 - e. The patient's physical examination required in R9-10-1508(A)(2);
 - d. The laboratory test results required in R9-10-1508(A)(3);
 - e. The physician's estimated gestational age of the fetus required in R9-10-1508(C);
 - f. The ultrasound results required in R9-10-1508(D);
 - g. Each consent form signed by the patient or the patient's representative;



- h. Orders issued by a physician, physician assistant, or registered nurse practitioner;
 - i. A record of medical services, nursing services, and health-related services provided to the patient; and
 - j. The patient's medication information.
2. For patient medical records requested for review in connection with an initial licensing or compliance inspection, the licensee is not required to produce for review by the Department any patient medical records created or prepared by a referring physician or any of that referring physician's medical staff; and
 3. The licensee is not required to provide patient medical records regarding medical services associated with an abortion that occurred before:
 - a. The effective date of these rules; or
 - b. A previous licensing or compliance inspection of the abortion clinic.
 4. The patient medical records may be provided to the Department in either paper or in an electronic format that is acceptable to the Department.
 5. When access to or copies of patient medical records are requested from a licensee by the Department, the licensee shall redact only personally identifiable patient information from the patient medical records before the disclosure of the patient medical records to the Department, except as provided in subsection (B)(8).
 6. For patient medical records requested for review in connection with an initial licensing or compliance inspection, the licensee shall provide the redacted copies of the patient medical records to the Department within two business days of the Department's request for the redacted medical records if the total number of patients for whom patient medical records are requested by the Department is from one to ten patients, unless otherwise agreed to by the Department and the licensee. The time within which the licensee shall produce redacted records to the Department shall be increased by two business days for each additional five patients for whom patient medical records are requested by the Department, unless otherwise agreed to by the Department and the licensee.
 7. Upon request by the Department, in addition to redacting only personally identifiable patient information, the licensee shall code the requested patient medical records by a means that allows the Department to track all patient medical records related to a specific patient without the personally identifiable patient information.
 8. For patient medical records requested for review in connection with a complaint investigation, the Department shall have access to or copies of unredacted patient medical records.
 9. If the Department obtains copies of unredacted patient medical records, the Department shall:
 - a. Allow the examination and use of the unredacted patient medical records only by those Department employees who need access to the patient medical records to fulfill their investigative responsibilities and duties;
 - b. Maintain all unredacted patient medical records in a locked drawer, cabinet, or file or in a password-protected electronic file with access to the secured drawer, cabinet, or file limited to those individuals who have access to the patient medical records according to subsection (B)(9)(a);
 - c. Destroy all unredacted patient medical records at the termination of the Department's complaint investigation or at the termination of any administrative or legal action that is taken by the Department as the result of the Department's complaint investigation, whichever is later;
 - d. If the unredacted patient medical records are filed with a court or other judicial body, including any administrative law judge or panel, file the records only under seal; and
 - e. Prevent access to the unredacted records by anyone except as provided in subsection (B)(9)(a) or subsection (B)(9)(d).
- D.** If the Department requests patient medical records for review, the licensee:
1. Is not required to produce any patient medical records created or prepared by a referring physician's office;
 2. May provide patient medical records to the Department either in paper or in an electronic format that is acceptable to the Department;
 3. Shall provide the Department with the following patient medical records related to medical services associated with an abortion, including any follow-up visits to the abortion clinic in connection with the abortion:
 - a. The patient's medical history required in R9-10-1509(A)(1);
 - b. The patient's physical examination required in R9-10-1509(A)(2);
 - c. The laboratory test results required in R9-10-1509(A)(3);
 - d. The physician's estimate of gestational age of the fetus required in R9-10-1509(C);
 - e. The ultrasound results required in R9-10-1509(D)(2);
 - f. Each consent form signed by the patient or the patient's representative;
 - g. Orders issued by a physician, physician assistant, or registered nurse practitioner;
 - h. A record of medical services, nursing services, and health-related services provided to the patient; and
 - i. The patient's medication information;
 4. If the Department's request is in connection with a licensing or compliance inspection:
 - a. Is not required to produce any patient medical records associated with an abortion that occurred before the licensing inspection or a previous compliance inspection of the abortion clinic; and
 - b. Shall:
 - i. Redact only personally identifiable patient information from the patient medical records before the licensee discloses the patient medical records to the Department;
 - ii. Upon request by the Department, code the requested patient medical records by a means that allows the Department to track all patient medical records related to a specific patient without the personally identifiable patient information; and
 - iii. Unless the Department and the licensee agree otherwise, provide redacted copies of patient medical records to the Department:
 - (1) For one to ten patients, within two working days after the request, and



(2) For every additional five patients, within an additional two working days; and

- 5. If the Department's request is in connection with a complaint investigation, shall:
 - a. Not redact patient information from the patient medical records before the licensee discloses the patient medical records to the Department; and
 - b. Ensure the patient medical records include:
 - i. The patient's name, address, and date of birth;
 - ii. The patient's representative, if applicable; and
 - iii. The name and telephone number of an individual to contact in an emergency;

~~C-E.~~ A medical director shall ensure that only personnel authorized by policies and procedures, records or signs an entry in a medical record and:

- 1. An entry in a medical record is dated and legible;
- 2. An entry is authenticated by:
 - a. A ~~written~~ signature; or
 - b. An individual's initials if the individual's ~~written~~ signature already appears in the medical record;
 - e. ~~A rubber stamp signature; or~~
 - d. ~~An electronic signature;~~
- 3. An entry is not changed after it has been recorded, but additional information related to an entry may be recorded in the medical record;
- 4. When a verbal or telephone order is entered in the medical record, the entry is authenticated within 21 calendar days by the individual who issued the order;
- 5. If a rubber-stamp signature or an electronic signature is used:
 - a. An individual's rubber stamp or electronic signature is not used by another individual;
 - b. The individual who uses a rubber stamp or electronic signature signs a statement that the individual is responsible for the use of the rubber stamp or the electronic signature; and
 - c. The signed statement is included in the individual's personnel record; and
- 6. If an abortion clinic maintains medical records electronically, the medical director shall ensure the date and time of an entry is recorded by the computer's internal clock.

~~D-F.~~ As required by A.R.S. § ~~36-449.03(I)~~ 36-449.03(J), the Department shall not release any personally identifiable patient or physician information.

~~R9-10-1512-R9-10-1513.~~ **Environmental and Safety Standards**

A licensee shall ensure that:

- 1. ~~Physical facilities~~ The premises:
 - a. Provide lighting and ventilation to ensure the health and safety of a patient;₂
 - b. Are maintained in a clean condition;₂
 - c. Are free from a condition or situation that may cause a patient to suffer physical injury;₂
 - d. Are maintained free from insects and vermin;₂ and
 - e. Are smoke-free;
- 2. A warning notice is placed at the entrance to a room or area where oxygen is in use;
- 3. Soiled linen and clothing are kept:
 - a. In a covered container, and
 - b. Separate from clean linen and clothing;
- 4. Personnel wash hands after each direct patient contact and after handling soiled linen, soiled clothing, or biohazardous medical waste;
- 5. A written emergency plan is established, documented, and implemented that includes procedures for protecting the health and safety of patients and other individuals in a fire, natural disaster, loss of electrical power, or threat or incidence of violence; ~~and~~
- 6. An evacuation drill is conducted at least once every six months that includes all personnel ~~in the physical facilities~~ on the premises on the day of the evacuation drill; ~~and~~
- 7. Documentation of the evacuation drill is maintained ~~in the physical facilities~~ on the premises for at least one year after the date of the evacuation drill and includes:
 - a. The date and time of the evacuation drill;₂ and
 - b. The names of personnel participating in the evacuation drill.

~~R9-10-1513-R9-10-1514.~~ **Equipment Standards**

A licensee shall ensure that:

- 1. Equipment and supplies are maintained in a:
 - a. Clean condition, and
 - b. ~~quantity~~ Quantity sufficient to meet the needs of patients present in the abortion clinic;
- 2. Equipment to monitor vital signs is in each room in which an abortion is performed;
- 3. A surgical or gynecologic examination table is used for an abortion;
- 4. The following equipment and supplies are available in the abortion clinic:
 - a. Equipment to measure blood pressure;
 - b. A stethoscope;
 - c. A scale for weighing a patient;
 - d. Supplies for obtaining specimens and cultures and for laboratory tests; and
 - e. Equipment and supplies for use in a medical emergency including:
 - i. Ventilatory assistance equipment;₂



- ii. Oxygen source~~s~~;
- iii. Suction apparatus~~s~~; and
- iv. Intravenous fluid equipment and supplies; and
- f. Ultrasound equipment;
- 5. In addition to the requirements in subsection (4), the following equipment is available for an abortion procedure performed after the first trimester:
 - a. Drugs to support cardiopulmonary function of a patient~~s~~; and
 - b. Equipment to monitor the cardiopulmonary status of a patient~~s~~;
- 6. In addition to the requirements in subsections (4) and (5), if the abortion clinic performs an abortion procedure at or after 20 weeks gestational age, the following equipment is available for the abortion procedure:
 - a. Equipment to provide warmth and drying of a fetus delivered alive.
 - b. Equipment necessary to clear secretions from and position the airway of a fetus delivered alive.
 - c. Equipment necessary to administer oxygen to a fetus delivered alive.
 - d. Equipment to assess and monitor the cardiopulmonary status of a fetus delivered alive, and
 - e. Drugs to support cardiopulmonary function in a viable fetus;
- ~~6.7.~~ Equipment and supplies are clean and, if applicable, sterile before each use;
- ~~7.8.~~ Equipment required in this Section is maintained in working order, tested and calibrated at least once every 12 months or according to the manufacturer's recommendations, and used according to the manufacturer's recommendations; and
- ~~8.9.~~ Documentation of each equipment test, calibration, and repair is maintained in the physical facilities on the premises for one year at least 12 months after the date of the testing, calibration, or repair and provided to the Department for review within two hours after the Department requests the documentation.

R9-10-1515. Enforcement

- ~~A.~~ For an abortion clinic that is not in substantial compliance or that is in substantial compliance but refuses to carry out a plan of correction acceptable to the Department, the Department may:
 - ~~1. Assess a civil penalty according to A.R.S. § 36-431.01;~~
 - ~~2. Impose an intermediate sanction according to A.R.S. § 36-427;~~
 - ~~3. Suspend or revoke a license according to A.R.S. § 36-427;~~
 - ~~4. Deny a license, or~~
 - ~~5. Bring an action for an injunction according to A.R.S. § 36-430.~~
- ~~B.~~ In determining the appropriate enforcement action, the Department shall consider the threat to the health, safety, and welfare of the abortion clinic's patients or the general public, including:
 - ~~1. Whether the abortion clinic has repeated violations of statutes or rules;~~
 - ~~2. Whether the abortion clinic has engaged in a pattern of noncompliance; and~~
 - ~~3. The type, severity, and number of violations.~~

R9-10-1514.R9-10-1515. Physical Facilities Plant Standards

- A. A licensee shall ensure that an abortion clinic complies with all local building codes, ordinances, fire codes, and zoning requirements. If there are no local building codes, ordinances, fire codes, or zoning requirements, the abortion clinic shall comply with the applicable codes and standards incorporated by reference in A.A.C. R9-1-412 that were in effect on the date the abortion clinic's architectural plans and specifications were submitted to the Department for approval.
- B. A licensee shall ensure that an abortion clinic provides areas or rooms:
 - 1. That provide privacy for:
 - a. A patient's interview, medical evaluation, and counseling;
 - b. A patient to dress; and
 - c. Performing an abortion procedure;
 - 2. For personnel to dress;
 - 3. With a sink and a flushable toilet in working order;
 - 4. For cleaning and sterilizing equipment and supplies;
 - 5. For storing medical records;
 - 6. For storing equipment and supplies;
 - 7. For hand washing before the abortion procedure; and
 - 8. For a patient recovering after an abortion.
- C. A licensee shall ensure that an abortion clinic has an emergency exit to accommodate a stretcher or gurney.



NOTICES OF SUPPLEMENTAL PROPOSED RULEMAKINGS

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

After an agency has filed a Notice of Proposed Rulemaking and it is published in the Register, an agency may decide to make substantial changes to the rule after it is proposed. The agency prepares a Notice of Supplemental Proposed Rulemaking with these proposed changes. When filed, the notice is published under the deadline schedule in the back of the Register.

The Notice of Supplemental Proposed Rulemaking shall be published in the Register before holding any oral proceedings (A.R.S. § 41-1022).

The Office of the Secretary of State is the filing office and publisher of these rules. Questions about the interpretation of the proposed rules should be addressed to the agency that promulgated the rules. Refer to item #4 below to contact the person charged with the rulemaking and item #11 for the close of record and information related to public hearings and oral comments.

NOTICE OF SUPPLEMENTAL PROPOSED RULEMAKING
TITLE 12. NATURAL RESOURCES
CHAPTER 4. GAME AND FISH COMMISSION

[R18-125]

PREAMBLE

1. Citations to the agency's Notice of Rulemaking Docket Opening, the Notice of Proposed Rulemaking, and any other Notices of Supplemental Proposed Rulemaking (if applicable) as published in the Register as specified in R1-1-409(A). A list of any other related notices published in the Register to include the as specified in R1-1-409(A):

Notice of Rulemaking Docket Opening: 24 A.A.R. 577, March 16, 2018

Notice of Proposed Rulemaking: 24 A.A.R. 529, March 16, 2018

2. Article, Part, or Section Affected (as applicable)

Rulemaking Action

Table with 2 columns: Article, Part, or Section Affected (as applicable) and Rulemaking Action. Rows include R12-4-101 through R12-4-401 with corresponding actions like Amend, New Section, and Repeal.

3. Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):

Authorizing statute: A.R.S. § 17-231(A)(1)

Implementing statute: A.R.S. §§ 13-3107, 13-3108, 17-102, 17-211(E)(4), 17-231(A)(1), 17-231(A)(2), 17-231(A)(3), 17-231(A)(4), 17-231(B)(8), 17-232, 17-233, 17-234, 17-235, 17-236, 17-239, 17-251, 17-301, 17-302, 17-305, 17-306, 17-307, 17-309, 17-331, 17-332, 17-333, 17-333.02, 17-335, 17-346, 17-361, and 17-371

**4. The agency's contact person who can answer questions about the rulemaking:**

Name: Celeste Cook, Rules and Policy Manager
Address: Arizona Game and Fish Department
5000 W. Carefree Highway
Phoenix, AZ 85086
Telephone: (623) 236-7390
Fax: (623) 236-7110
E-mail: CCook@azgfd.gov

Please visit the Department's website to track the progress of this rule; view the regulatory agenda and all previous Five-year Review Reports; and learn about any other agency rulemaking matters at <https://www.azgfd.com/agency/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:

The Arizona Game and Fish Commission proposes to amend its Article 3 rules, governing the taking and handling of wildlife, to enact amendments developed during the preceding Five-year Review Report. The amendments proposed in the five-year review report are designed to clarify current rule language; protect public health and safety and private property rights; facilitate job growth and economic development; support Fair Chase principles and the tenets of the North American Model of Wildlife Conservation; enable the Department to provide better customer service; and reduce regulatory and administrative burdens wherever possible. After evaluating the scope and effectiveness of the proposed amendments specified in the review, the Commission proposes additional amendments to further implement the original proposals.

Arizona's great abundance and diversity of native wildlife can be attributed to careful management and the important role of the conservation programs the Arizona Game and Fish Department has developed. The Department's management of both game and nongame species as a public resource depends on sound science and active management. As trustee, the state has no power to delegate its trust duties and no freedom to transfer trust ownership or management of assets to private establishments. Without strict agency oversight and management, the fate of many of our native species would be in jeopardy. Wildlife can be owned by no individual and is held by the state in trust for all the people.

An exemption from Executive Order 2015-01 was provided for this rulemaking by Hunter Moore, Natural Resource Policy Advisor, Governor's Office, in an email dated August 22, 2017.

In addition to replacing the term "buffalo" with "bison" and "individual" with "person", nonsubstantive amendments made to make rules clearer and more concise; the Commission proposes the following substantive amendments:

R12-4-101. Definitions

The objective of the rule is to establish definitions that assist persons regulated by the rule and members of the public in understanding the unique terms that are used throughout 12 A.A.C. 4. Game and Fish Commission Rules. The rule was adopted to facilitate consistent interpretation of Commission rules and to prevent persons regulated by the rule from misinterpreting the intent of Commission rules.

Because the terms "cervid," "nonprofit organization," and "person" are used in multiple Game and Fish Commission rules, the Commission proposes to amend the rule to define these terms under R12-4-101. The Commission proposes to amend the rule to define terms used in multiple Game and Fish Commission rules and Commission Orders: "bow," "crossbow," and "handgun." Defining these terms will aid in facilitating a consistent interpretation of Commission Orders and rules. In addition, the Commission proposes to amend the rule to define "export" and "import" to reduce regulatory ambiguity. It is often assumed the terms "import" and "export" mean something is being brought into or taken out of the country. For the purposes of Game and Fish Commission rules, "import" and "export" mean something is being brought into or taken out of the State. These changes are proposed as a result of customer comments received by the Department.

The Commission proposes to amend the rule to replace the term "animal" with "wildlife" to make the rule more concise.

R12-4-216. Crossbow Permit

The objective of the rule is to establish eligibility requirements, conditions, and restrictions for the crossbow permit. The permit allows a person, who cannot draw and hold a bow, to use a crossbow during an archery-only hunt.

The Commission proposes to amend the rule to allow a Crossbow Permit holder to use a pre-charged pneumatic weapon, as defined under R12-4-301, using bolts or arrows and with a capacity of holding and firing only one arrow or bolt at a time during an archery-only season. This change is proposed as a result of customer comments received by the Department.

R12-4-301. Definitions

The objective of the rule is to establish definitions that assist persons regulated by the rule and members of the public in understanding the unique terms that are used throughout Article 3. The rule was adopted to facilitate consistent interpretation of Article 3 rules and to prevent persons regulated by the rule from misinterpreting the intent of Commission rules.

The Commission proposes to amend the definition of "administer" to remove the phrase "pursue, capture, or otherwise restraining wildlife" as the language is unnecessarily restrictive.

In recent years, due to the affordability and availability of drones, their use has significantly increased. While the definition of "aircraft" includes any lighter-than-air contrivance designed for flight, confusion remains as to whether a drone is considered an aircraft. The Commission proposes to amend the definition of "aircraft" to clearly state that drones are considered aircraft.

Many anglers believe scented, flavored, and chemically treated devices are legal artificial lures because the definition of "artificial lures" does not specifically address them. Since this definition was adopted, the popularity of these types of baits, often marketed as "lures" and "artificial," has increased; and their use is causing unacceptable mortality rates in released trout caught in



some catch-and-release waters. The Commission proposes to amend the definition to clearly state that artificial flies and lures does not include chemical and organic attractants. The purpose of restricting scented, flavored, and chemically treated flies and lures is to minimize the mortality of fish, particularly trout mortalities because trout tend to gulp the lure deeper, resulting in a 30 to 90% mortality rate after being released. In addition, the Commission proposes to amend the definition of “artificial lures and flies” to increase consistency between Commission rules, Commission Orders and public outreach materials; Commission rules use the phrase “artificial lures and flies;” Commission Orders, and all other public outreach materials use the phrase “artificial flies and lures.”

The Commission proposes to repeal the definition of “cervid.” Because the term is used in multiple Game and Fish Commission rules, the Commission intends to define this term under R12-4-101.

Under A.R.S. § 13-3102(A)(4), a person commits misconduct involving weapons by knowingly possessing a deadly weapon or prohibited weapon if such person is a prohibited possessor. Under A.R.S. § 13-3101(A)(1), “deadly weapon” means anything that is designed for lethal use. As a result of amendments made to R12-4-303 (Unlawful Devices, Methods, and Ammunition), the Commission proposes to define “deadly weapon,” “prohibited possessor,” and “prohibited weapon.”

The Commission also proposes to define “edible portions of game meat” to increase consistency between statute, Commission Orders, and rules. While A.R.S. § 17-340 defines edible portions of bighorn sheep, bison, deer, elk, game fish, javelina, migratory game birds, pronghorn antelope, upland game birds, and wild turkey, the statute does not address bear or mountain lion, which are considered big game. This change is in response to customer comments received by the Department.

A.R.S. §§ 17-231(A)(3) and 17-301(D)(2) authorizes the Commission to adopt rules establishing the taking of wildlife with firearms, fishing equipment, archery equipment, or other implements in hand as may be defined. The Commission also proposes to amend the rule to define “device,” “hybrid device,” “muzzleloading shotgun,” “pneumatic weapon,” “rifle,” and “shotgun.” Defining these terms will aid in facilitating a consistent interpretation of Commission Orders and rules.

In addition, the Commission is aware of devices that use lasers and computers that enable a person with no hunting or shooting experience to easily hit a target up to 500 yards away. As a result of amendments made to R12-4-303 (Unlawful Devices, Methods, and Ammunition), the Commission proposes to define “smart device.” This change is in response to customer comments received by the Department.

R12-4-302. Use of Tags

The objective of the rule is to establish requirements for the possession and lawful use of tags issued by the Department. A.R.S. § 17-332 authorizes the Commission to prescribe the manner in which a licensee shall attach a tag to a big game animal. The rule was adopted to establish the manner and method in which a person shall attach a tag to wildlife and ensure consistent interpretation of and compliance with A.R.S. § 17-332.

The Commission is aware of a problem with the enforcement of the rule. The rule establishes that only the hunter listed on the tag shall use the tag and attach it to game lawfully harvested by the hunter listed on the tag. When two persons are hunting, and knowingly deviate from this mandate - both parties are involved in the violation. There is a circumstance within the current rule that results in only one of the two persons unlawfully using a tag to be in violation of the rule. For example: Hunter A harvests an elk. Hunter A then allows Hunter B to place Hunter B's tag on the elk, enabling Hunter A to continue hunting for another elk after having reached their bag limit for elk. Even though both parties were involved in the unlawful tagging of the elk, only Hunter B would be cited under this rule. The Commission proposes to amend the rule to establish that it is unlawful for a person to allow another person's tag to be attached to wildlife that person harvested.

The Commission proposes to amend the rule to replace the term “hunt area” with “taking wildlife” to clarify unlawful uses of a tag.

R12-4-303. Unlawful Devices, Methods, and Ammunition

The objective of the rule is to establish those devices, methods, and ammunition that are unlawful for taking of any wildlife in Arizona. A.R.S. § 17-301(D)(2) authorizes the Commission to adopt rules establishing the taking of wildlife with firearms, archery equipment, or other implements in hand as may be defined. The rule was adopted to establish methods and devices that are unlawful for the take of wildlife and ensure consistent interpretation of and compliance with 17-301(D)(2). The Commission believes the reason the rule exists is to prohibit those devices and methods that compromise safe hunting practices or the spirit of fair chase. “Fair Chase” means the ethical and lawful pursuit and take of free-range wildlife in a manner that does not give the hunter or angler improper or unfair advantage over such wildlife. The following criteria are used to evaluate whether a new technology or practice violates the Fair Chase ethic; does the technology or practice allow a hunter or angler to: locate or take wildlife without acquiring necessary hunting and angling skills or competency; pursue or take wildlife without being physically present and pursuing wildlife in the field; or almost guarantee the harvest of wildlife when the technology or practice prevents wildlife from eluding take.

The Commission is aware that confusion exists regarding the use of full-jacketed ammunition. Full-jacketed ammunition is sold by sporting goods stores and is often labeled by the manufacturer for use in target practice, but there are manufacturers who also label the ammunition for use in hunting. Confusion exists because full-jacketed ammunition is readily available in sporting goods stores and the rule prohibits the use of full-jacketed ammunition “designed for military use.” A person could assume the ammunition sold by a sporting goods store may be used for hunting purposes because it is readily available to the public for purchase. The use of full-jacketed ammunition for hunting is prohibited because it does not create a substantial wound for the humane harvest of an animal. The uniform and aerodynamic design means the ammunition is more likely to penetrate the animal and keep going out the other side, possibly injuring people or wildlife farther downrange and leaving only a small wound in the animal, resulting in wounding loss. This would impact hunter opportunity, because a person who wounds an animal may not be aware the animal was wounded and would continue to hunt and possibly wound or take another animal. Ammunition designed to expand creates a wound cavity and slows the bullet down so that it will not continue beyond the target with much force, if at all. The Commis-



sion proposes to amend the rule to remove “designed for military use” and specify that any ammunition that does not expand on impact shall not be used for the take of wildlife to make the rule more concise.

The Commission is aware of arrows or bolts capable of being fitted with explosive tips that discharge upon impact, some allow the user to insert a bullet into a modified broadhead and others are manufactured with a small broadhead inside a shotgun shell. Under R12-4-303, a person is prohibited from using any projectile that contains explosives because the Commission believes they compromise the spirit of fair chase. The Commission proposes to amend the rule to include projectiles that contain a secondary propellant to proactively address emerging technology.

Due to technological advances in hunting scopes (for any lawful hunting device), the Commission proposes to clarify the rule to address laser range finders that project a non-visible light onto an animal. A laser distance meter emits a pulse of laser at a target. The pulse then reflects off the target and back to the sending device (in this case, a laser distance meter). This “time of flight” principle is based on the fact that laser light travels at a fairly constant speed through the Earth’s atmosphere. Inside the meter, a simple computer quickly calculates the distance to target. The Commission does not believe these types of hunting scopes compromise the spirit of fair chase because the hunter still must possess the necessary hunting skills or competency in order to take an animal. This change is in response to customer comments received by the Department.

Smart devices are becoming more prevalent in the firearm and hunting industries (devices equipped with a target-tracking system or an electronically-controlled, electronically-assisted, or computer-linked trigger or release). These smart devices enable a person with little or no experience to easily hit a target more than 500 yards away with very high accuracy; once a target is selected, the smart device controls the trigger mechanism and discharges only when the weapon is pointed at the designated target, taking into account dozens of variables, including wind, barometric pressure, elevation, inclination or declination, ballistic performance, etc. Normally, it takes years of practice to hit a target at that distance, but a smart device can make a person into a sharpshooter in a matter of hours or even less. Because the Commission believes these devices compromise the spirit of fair chase and the Commission’s Fair Chase Policy, the Commission proposes to amend the rule to prohibit the use a smart device while taking wildlife. This change is in response to customer comments received by the Department.

While the current use of self-guided ammunition is not popular due to limited availability and the high costs involved, the Commission believes it is necessary to proactively address concerns about the use of self-guided ammunition and prohibit its use for taking or aiding in the take of wildlife.

The Commission is aware of instances where a person will use a watercraft to chase and harass waterfowl in an effort to force the waterfowl to take flight so they may be hunted by another person. The Commission proposes to amend the rule to clarify federally prohibited activities to ensure consistent interpretation of A.R.S. § 17-301 as it applies to migratory birds and prevent persons from inadvertently violating federal regulations applicable to migratory bird hunting.

Under A.R.S. § 17-309(A)(4), it is unlawful to discharge a firearm while taking wildlife within one-fourth mile of an occupied farmhouse or other residence, cabin, lodge or building without permission of the owner or resident. Under R12-4-303(A)(3)(h), it is unlawful to discharge a pneumatic weapon .30 caliber or larger while taking wildlife within one-fourth mile of an occupied farmhouse or other residence, cabin, lodge or building without permission of the owner or resident. In addition, the Commission is aware of instances where a hunter who lives on the edge of a municipal boundary is unable to archery hunt on his own property because Commission Order closes areas within one-fourth mile of an occupied residence. For example, a hunter who lives on the edge of a forest boundary and who is miles away from the nearest residence is unable to archery hunt on their own property because of the location of their own home. In addition, the Commission and Department have received a number of complaints about persons archery hunting near their private property. The Commission proposes to amend the rule to prohibit the discharge of hybrid device, arrow, or bolt while taking wildlife within one-fourth mile of an occupied farmhouse or other residence, cabin, lodge or building without permission of the owner or resident, to increase consistency between statute and rules. This language mirrors statutory language under A.R.S. § 17-309, which prohibits a person from discharging a firearm while taking wildlife within one-fourth mile of an occupied farmhouse or other residence, cabin, lodge, or building without permission of the owner or resident. This change is in response to customer comments received by the Department.

In addition, the Commission is aware confusion exists as to what distance constitutes “one-fourth mile” and “one-half mile.” The Commission proposes to clarify this distance by also referencing this distance in yards (440 or 880, as applicable) to reduce regulatory uncertainty. This change is in response to customer comments received by the Department.

The Commission recognized the need to evaluate regulatory measures pertaining to the use of trail cameras, as they relate to the ‘take of wildlife’ and the Fair Chase hunting ethic, and directed the Department to evaluate current rule language as it pertains to trail cameras. The team benchmarked with other states and spoke with members of industry and ultimately made recommendations to prohibit the use of trail cameras capable of sending a wireless remote signal to another electronic device for the purpose of taking or aiding in the taking of wildlife or taking or aiding in the take of wildlife, or locating wildlife for the purpose of taking or aiding in the take of wildlife.

While the current use of satellite imagery for hunting is not popular due to the costs involved, the Commission believes it is necessary to proactively address concerns about the use of satellite imagery and prohibit its use for taking or aiding in the take of wildlife. The Commission proposes to amend the rule to prohibit the use of images of wildlife produced or transmitted from a satellite or other device that orbits the earth; this prohibition does not include mapping systems or programs. This change is in response to customer comments received by the Department.

Under A.R.S. § 13-3102(A)(4), a person commits misconduct involving weapons by knowingly possessing a deadly weapon or prohibited weapon if such person is a prohibited possessor. Under A.R.S. § 13-3101(A)(1), “deadly weapon” means anything that is designed for lethal use. The Commission proposes to amend the rule to prohibit a person who is a prohibited possessor from using a deadly weapon or prohibited weapon to take wildlife to remove regulatory uncertainty.



R12-4-304. Lawful Methods for Taking Wild Mammals, Birds, and Reptiles

The objective of the rule is to establish lawful devices and methods a person may use to take wild mammals, birds, and reptiles during seasons established by Commission Order. A.R.S. § 17-301(D)(2) authorizes the Commission to adopt rules establishing the taking of wildlife with firearms, archery equipment, or other implements in hand as may be defined. The rule was adopted to establish methods and devices that may be used for the take of specific wildlife and ensure consistent interpretation of and compliance with A.R.S. § 17-301(D)(2).

The availability of hybrid devices (weapons with components from two or more different devices) is increasing. Depending on the species, some hybrid devices may be used for the take of wildlife, while others cannot. The Commission proposes to amend the rule to allow the use of a hybrid device for the taking of wildlife provided all components of the device are authorized for the take of that species. This change is in response to customer comments received by the Department.

The Commission proposes to amend the rule to replace references to "antelope" with "pronghorn antelope" to reflect language used in Commission Order and public outreach materials.

In 2013, the Commission amended the rule to allow the use of pre-charged pneumatic weapons for the take of all wildlife, except bison, elk, and turkey due to concerns that pre-charged pneumatic weapons would not create a substantial wound for the humane harvest of a large animal (bison and elk) and public safety concerns (turkey). Subsequent discussions with persons in the pre-charged pneumatic weapon industry indicate that it is also necessary to reference the caliber of the bullet. This change enables the Commission to establish a lethal standard for the take of bison and elk using a pre-charged pneumatic weapon. These changes are in response to customer comments received by the Department.

The Commission believes technological advances in ceramic or ceramic coated broadheads have proven they can be as effective as traditional metal broadheads. A ceramic broadhead is typically produced by dry-pressing zirconia powder and then hardening the broadheads through the process of compacting and forming a solid mass of material by heat or pressure to make the ceramic as hard as metal. The broadhead is then sharpened by grinding the edges with a diamond-dust-coated grinding wheel. Zirconia is 8.5 on the Mohs scale of mineral hardness, compared to 4.5 for normal steel and 7.5 to 8 for hardened steel and 10 for diamond. This very hard edge significantly reduces the need for sharpening, making them a desirable product for archery hunters. The Commission proposes to amend the rule to allow the use of ceramic and ceramic-coated broadheads. This change is in response to customer comments received by the Department.

The Commission proposes to allow the use of pre-charged pneumatic weapons using arrows or bolts for the take of wildlife during a general season wherever a bow or crossbow is listed as a lawful method of take for that species: bear, bighorn sheep, bison, deer, elk, javelina, mountain lion, pronghorn antelope, and turkey. The Commission believes these types of devices do not compromise the spirit of fair chase. This change is in response to customer comments received by the Department.

Under A.R.S. § 17-235, the Commission is required to prescribe seasons, bag limits, possession limits and other regulations pertaining to taking migratory birds in accordance with the Migratory Bird Treaty Act and regulations issued thereunder. The Commission proposes to incorporate by reference the most recent version of 50 C.F.R. 20.21 and reflect the most recent Government Printing Office contact information.

The Commission proposes to amend the rule to replace references to "handguns using black powder or synthetic black powder" with "muzzleloading handguns" to make the rule more concise.

R12-4-305. Possessing, Transporting, Importing, Exporting, and Selling Carcasses or Parts of Wildlife

The objective of the rule is to conserve wildlife resources by establishing requirements for the lawful possession, transport, import, export, or sale of wildlife. The Commission's rule protects native wildlife by preventing the spread of disease, reducing the risk of released animals competing with native wildlife, discouraging illegal trade of native wildlife, and preventing interactions between humans and wildlife that may threaten public health or safety. The rule was adopted to prevent the unlawful possession, transport, import, export, or sale of wildlife and allow for lawful possession by establishing the methods for complying with governing statutes.

The Commission proposes to amend the rule to state the tag shall be attached in the manner indicated on the tag to increase consistency between Commission rules.

In addition, the Commission proposes to amend the rule to specify the manner in which a person may provide evidence of legality for Eurasian collared-doves to reduce regulatory ambiguity.

The rule requires a person who receives a portion of wildlife to provide the identity of the person who took and gave the wildlife, but does not state under what circumstances this action is required. The Commission proposes to amend the rule to add "upon request to any peace officer, wildlife manager, or game ranger" to reduce ambiguity and increase consistency between Commission rules.

The Department issues both permit-tags (through computer draw) and nonpermit-tags (over the counter) for the take of wildlife. The Commission proposes to amend the rule to reflect both types of tags issued by the Department to make the rule more concise.

Under A.R.S. § 17-302(A), a landowner or lessee who is a livestock operator and whose livestock were recently attacked or killed by bear or mountain lion may lawfully exercise such measures as necessary to prevent further damage from the offending bear or mountain lion, including the taking of such bear or mountain lion; and further states that dogs may be used to facilitate the pursuit of the depredating bear or mountain lion. The statute also states that no portion of an animal taken pursuant to A.R.S. § 17-302 shall be retained or sold by any person except as authorized by the Commission. In response to comments made by hunters, the Commission amended R12-4-305(H) to allow a person who takes a depredating bear or mountain lion to retain the carcass pro-



vided the person has a valid hunting license and the carcass is immediately tagged with a valid hunt permit-tag or nonpermit-tag (unless the person has already taken the applicable bag limit for that big game animal). This change also prevents the animal from going to waste.

The Commission proposes to amend the rule to restrict the import of velvet antlers of cervids to address Chronic Wasting Disease (CWD) concerns. Growing antlers of cervids are covered by a highly innervated and vascularized apical skin layer, referred to as velvet, which is shed after an increase in testosterone and ossification of antlers. In a recent study, findings of prions in antler velvet of CWD-affected elk suggest that this tissue may play a role in disease transmission among cervids. At this time, the most effective management approach has to be to take measures to ensure, to the greatest extent possible, that the disease does not enter into Arizona. If it does, there will be substantial financial impact to the Department, captive cervid breeders, and the rural economy that is supported, in part, by hunting.

The Commission proposes to amend the rule to clarify that, when possessing, transporting, or importing cervid meat that has been cut and packaged, the meat may be personally or commercially cut and packaged. This change is in response to customer comments received by the Department.

The Commission also proposes to replace the phrase "wild mammal, bird, or reptile" with "wildlife" to indicate the rule applies to all wildlife, unless otherwise specified, to make the rule more concise.

R12-4-306. Buffalo Hunt Requirements

The objective of the rule is to establish rules of practice governing bison hunts, which are conducted by the Department to harvest bison appropriate to management objectives and land carrying capacity. In Arizona, bison are found on two wildlife areas operated solely by the Department; Raymond, located east of Flagstaff, and House Rock, located east of the North Kaibab National Forest. Both wildlife areas are managed to provide viewing opportunities as well as hunting opportunity. The rule was adopted to ensure the Department manages these herds on a sustainable basis.

In the past, the hunts on Raymond and House Rock were managed differently to allow the Department greater flexibility in conducting these hunts. Over time, the Department has implemented more effective control measures for these hunts and, as a result, now manages both areas in the same manner. The Commission proposes to amend the rule to combine bison hunt requirements into one subsection to make the rule more concise.

Currently, a hunter who takes a bison, or their designee, is required to present the bison in person to the Department for inspection. The Commission proposes to amend the rule to allow the hunter to check out either in person or by telephone to reduce the burden and costs on persons regulated by the rule. This change is in response to customer comments received by the Department.

The Commission is aware of electronic methods implemented by other fish and wildlife agencies that allow a person to check-in or check-out electronically, such as an online system or mobile device application. The Commission proposes to amend the rule to allow a person to check-in and check-out electronically, when made available by the Department, to reduce the costs and burdens to persons regulated by the rule. This change is in response to customer comments received by the Department.

R12-4-307. Trapping Regulations, Licensing; Methods; Tagging of Bobcat Pelts

The objective of the rule is to establish requirements and restrictions necessary to regulate trapping in a fair and humane manner with the utmost regard for wildlife management principles and public safety. In addition, the rule establishes trapping reporting requirements as required under A.R.S. § 17-361(D). Trapping is the use of a device to remotely catch an animal. Fur-bearing and predatory animals may be trapped for a variety of purposes, including food, the fur trade, pest control, and wildlife management. Under A.R.S. § 17-301, it is unlawful to take wildlife with any leghold trap, instant kill body gripping design trap, or by a poison or a snare on any public land. The rule was adopted to establish requirements and restrictions to ensure responsible trapping and safeguard the future of trapping and ensure consistent interpretation of and compliance with A.R.S. § 17-301.

The Commission proposes to amend the rule to remove redundant language regarding the issuance of a trapping registration number.

In 2013, the Legislature amended A.R.S. Title 17 to allow the Arizona Game and Fish Commission to establish license classifications and fees. As a result of the subsequent rulemaking, any person age 10 and older is required to possess a license in order to lawfully take wildlife; this change was consistent with other Western states. The Commission proposes to amend the rule to require a person age 10 or older to possess a trapping license in order to trap in Arizona to increase consistency between Commission rules. In addition, under A.R.S. § 17-361(D) a person who possesses a trapping license is required to submit a trapping report. A trapper under the age of 14 was not required to submit a trapping report because they were not required to possess a trapping license. Reducing the trapping license age requirement will also enable the Department to gather additional valuable harvest data.

The Commission has amended license rules within Article 2 (licenses; permits; stamps; tags) and 4 (live wildlife) to increase consistency in format between application requirements. The Commission proposes to amend the rule to reflect changes made to other license application rules to increase consistency between Commission rules.

The Commission is aware of some confusion as to the daily trap check requirement prescribed under A.R.S. § 17-361(B). The statute requires a trapper to inspect all traps in use daily. Some trappers have asked if a trail camera could be used to meet this statutory mandate. Because "inspect" and "view" are very different actions, the Commission believes a trapper should be physically present in the trap area when inspecting their traps in order to meet the inspection requirements prescribed in statute.

Under R12-4-321, a city, county, or town may limit or prohibit any person from hunting within one-fourth mile (440 yards) or trapping within one-half mile (880 yards) of any developed picnic area, campground, boat ramp, shooting range, occupied structure, or golf course. The Commission also proposes to amend the rule to incorporate other areas developed for public use, as referenced under R12-4-321, to increase consistency between rules within Article 3.



In addition, under A.R.S. § 17-309 and R12-4-303, a person is prohibited from conducting certain activities involving the take of wildlife within a specific distance from "an occupied farmhouse or other residence, cabin, lodge or building," while this rule references "occupied residence or building." The Commission proposes to amend the rule to mirror statutory language to increase consistency between statute and Commission rule.

In addition, the Commission is aware confusion exists as to what distance constitutes "one-fourth mile" and "one-half mile." The Commission proposes to clarify this distance by also referencing this distance in yards (440 or 880, as applicable) to reduce regulatory uncertainty. This change is in response to customer comments received by the Department.

To comply with CITES (Convention on International Trade in Endangered Species), which aims to protect against over-exploitation of certain species, a person is required to obtain and attach a bobcat seal to all bobcats exported (trapped or hunted) out of Arizona. The information gathered from persons obtaining these seals is used to record population and biological information that helps in conservation management decisions. Currently, a person who traps a bobcat in Arizona is required to obtain a bobcat seal from the Department and attach the seal to the bobcat pelt within ten days of the end of the bobcat trapping season. The Commission proposes to amend the rule to require a trapper to ensure a bobcat seal is attached to a bobcat no later than April 1 of each year to reduce the burden on persons regulated by the rule; this is approximately 30 days after the close of the trapping season and coincides with the date the annual trapping report is due.

Since the rule was last amended, the Department implemented a new organizational structure; the Game Branch is now referred to as the Terrestrial Wildlife Branch. The Commission proposes to amend the rule to reference the Terrestrial Wildlife Branch to make the rule more concise.

In light of comments received by the Department, the Commission proposes to amend the rule to allow a trapper to use a trail camera for the purpose of remotely observing traps they have lawfully set. While this change will allow the trapper to view their traps without disturbing the immediate area, this change does not allow the trapper to use the trail camera to meet the daily inspection requirement prescribed under A.R.S. § 17-361(B).

R12-4-308. Wildlife Inspections, Check Stations, and Roadblocks

The objective for the rule is to establish requirements for wildlife check stations and wildlife inspections, as authorized by the Director. Wildlife check stations and inspections enable the Department to obtain biological data and verify evidence of legality. Under A.R.S. § 17-211(E), game rangers and wildlife managers may inspect all wildlife taken or transported and seize all wildlife taken or possessed in violation of law, or showing evidence of illegal taking. The rule was adopted to ensure consistent interpretation of and compliance with A.R.S. § 17-211(E) and all applicable laws and rules.

The Commission believes that to have a successful hunt, one does not have to harvest wildlife; whether a person takes a bull elk, a spike deer, a limit of dove, or goes home empty-handed, the Commission believes the times spent in the field with friends and family are some of the best times a person can ever have. The Commission proposes to amend the rule to replace the phrase "successful hunter" with "hunter who harvests" because the Commission believes a harvest is not required in order to have a "successful" hunt.

In addition, the Commission proposes to replace the phrase "produce and display any license, tag, stamp, or permit required for taking or transporting wildlife" with "provide evidence of legality as defined under R12-4-301" to make the rule more concise.

The Commission is aware of electronic methods implemented by other fish and wildlife agencies that allow a person to check-in or check-out electronically, such as an online system or mobile device application. The Commission proposes to amend the rule to allow a person to check-in and check-out electronically, when made available by the Department, to reduce the costs and burdens to persons regulated by the rule. This change is in response to customer comments received by the Department.

R12-4-309. Authorization for Use of Drugs on Wildlife

The objective of the rule is to establish the restrictions, application, reporting, and exemption from requirements for the authorization for use of drugs on wildlife, including but not limited to, fertility drugs, growth hormones, and tranquilizers. Such drugs are used in research and population management for fertility control, disease prevention or treatment, immobilization, or growth stimulation. The rule was adopted to proactively provide the Department with measures designed to ensure the necessary regulatory measures are in place for the use of drugs on wildlife.

In 2015, the Commission amended Article 4 special license rules to notice license holders that a special license does not exempt the license holder from any municipal, county, state or federal code, ordinance, statute, regulation, or rule or authorize the license holder to engage in any activity using wildlife that is protected by federal regulation. The Commission proposes to amend the rule to state the authorization does not exempt a person from any municipal, county, state or federal code, ordinance, statute, regulation, or rule or authorize a person to engage in any activity using wildlife that is protected by federal regulation to increase consistency between Commission rules.

The Commission proposes to amend the rule to remove the requirement that the applicant include information regarding federal approvals and/or permits because having this language in rule implies the Department verifies that the applicant possesses all of the necessary approvals and/or permits and that those approvals and/or permits are valid. The Commission believes it is the applicant's responsibility to ensure they apply for and obtain all required federal approvals and/or permits.

The Commission proposes to amend the rule to require the written endorsement to be signed by a person who has the authority to sign documents on behalf of a government agency, university, or institution to ensure the applicant has sufficient permission to conduct the activities noted on the application and associated documents.

Statute and rules that require a person to present a license, stamp, permit, or authorization to members of law enforcement also reference the terms "wildlife manager" and "game ranger." The Commission proposes to amend the rule to reference "wildlife manager" and "game ranger" to increase consistency between Commission rules.



The rule requires a person who is authorized to use drugs on wildlife by the Department to submit an annual and final report; however, the rule does not establish a time-frame for either of these reports. The Commission proposes to establish due dates for the annual and final report to make the rule more concise.

The Commission proposes to amend the rule to require a person applying for authorization to use drugs on wildlife to indemnify the Department against any injury or damage resulting from the use of animal drugs in light of recent law suits taking place at the federal level.

In 2013, the Commission amended R12-4-428 (captivity standards) to remove the annual veterinary inspection requirement for all wildlife from R12-4-428 and reference the inspection requirement only in those rules where an annual veterinary inspection should be required and when wildlife is held for more than one year. Subsection (E) establishes the rule does not prohibit the treatment of wildlife by a licensed veterinarian or holder of a special license; the Commission proposes to amend the rule to replace the reference to R12-4-428 with R12-4-413 and R12-4-420 to make the rule more concise and increase consistency between Commission rules.

R12-4-310. Fishing Permits

The objective of the rule is to establish requirements for the fishing permit available to governmental agencies and nonprofit organizations that provide rehabilitation and treatment services for persons with disabilities. The Commission recognizes fishing and hunting as a fundamental requirement of wildlife conservation in Arizona and introductory fishing or hunting events actively promote participation in a variety of recreational opportunities. The rule was adopted to permit these agencies to provide outdoor fishing opportunities to persons with physical, developmental, or mental disabilities, without requiring them to obtain a fishing license.

The Commission proposes to amend the rule to remove the requirement that a nonprofit be licensed or contracted with the Department of Economic Security (DES) or Department of Health Services (DHS) to provide physical or mental rehabilitation or training to persons with physical, developmental, or mental disabilities and replace the terms "rehabilitation or training" with "treatment and care." The Department receives approximately 100 fishing permit applications annually. Of those 100 applications, approximately 50% are denied either because the agency, department, or nonprofit is not contracted with DES or DHS or they provide "habilitative care and treatment" instead of "rehabilitative care and treatment." The Fishing Permit was originally established to provide unlicensed fishing opportunities to a segment of the public that has difficulty engaging in this recreational activity. The Commission believes the rule with the proposed amendments will continue to meet the original intent of the rule, while expanding unlicensed fishing opportunities to additional agencies, departments, and nonprofits.

The Commission proposes to amend the rule to specify the permit is valid for any two days within a 30 day period. An agency, department, or nonprofit is required to submit a report no later than 30 days after the end of the authorized fishing dates; and an agency, department, or nonprofit that fails to submit the report is not eligible for another permit until the reporting requirement has been met. Currently, a Fishing Permit applicant may choose any two days within a within a calendar year; some applicants have chosen dates more than six months apart, which can be problematic when the agency, department, or nonprofit submits a subsequent application before the second date listed on the first permit has passed.

Currently, the Fishing Permit allows up to 20 persons to fish without a license. When an applicant proposed to hold an event for more than 20 persons, the applicant was required to submit an additional application. In these scenarios, the Department also issued and administered additional fishing permits. The Commission proposes to amend the rule to remove the twenty person limit to reduce the burdens and costs to persons regulated by the rule.

The Commission proposes to amend the rule to require a nonprofit to provide a copy of its Articles of Incorporation and a document identifying its mission at the time of application. Because the rule is being amended to remove the requirement that a nonprofit be contracted or licensed by DES or DHS, the Department will use these documents to determine the applicant's eligibility for the fishing permit.

The Commission proposes to amend the rule to replace the reference to "lesson plan" with "curriculum outline" to make the rule more concise. The Department's Education Branch is responsible for the issuance of the fishing permit; their internal documents and outreach information refers to the instructional document as a curriculum outline, rather than a lesson plan: a lesson plan is a detailed description of topics to be covered in a single class (to include what information is provided when); a curriculum outline establishes the key points that must be covered in a single class. The order and manner in which the instruction is provided should be left to the judgment of the instructor as more or less information on a particular key point may be required depending on the individuals receiving the instruction.

R12-4-311. Exemptions from Requirement to Possess an Arizona Fishing License or Hunting License While Taking Wildlife

The objective of the rule is to establish the circumstances under which a person is not required to possess a fishing or hunting license while taking wildlife. A.R.S. § 17-331 states, "Except as provided by this title, rules prescribed by the Commission or Commission Order, a person shall not take any wildlife in this state without a valid license or a Commission approved proof of purchase." The rule was adopted to identify the circumstances under which a fishing or hunting license is not required due to statutory exemptions or when determined necessary by the Commission. The Commission recognizes fishing or hunting as a fundamental requirement of wildlife conservation in Arizona and introductory fishing or hunting events actively promote participation in a variety of recreational opportunities.

The Commission proposes to amend the rule to reference "trapping license" as one of the licenses that may be revoked by the Commission; provide examples of terrestrial mollusks and crustaceans; and remove the reference to "sport fishing contractor" as the Department no longer contracts this service to make the rule more concise.

The Commission proposes to amend the rule to provide examples of nonnative terrestrial mollusks to reduce regulatory ambi-



guilty.

A.R.S. § 17-215 states, each employee and volunteer who has contact with children or vulnerable adults as part of their regular duties must have a valid fingerprint clearance card issued pursuant to A.R.S. § 41-1758.07 or provide the Department documentation of the person's application for a fingerprint clearance card. The Commission proposes to amend the rule to allow a person to provide documentation of the person's application for a fingerprint clearance card as prescribed under A.R.S. § 17-215 to reflect statutory requirements.

R12-4-313. Lawful Methods of Taking Aquatic Wildlife

The objective of the rule is to establish lawful devices and methods a person may use to take aquatic wildlife during seasons established by Commission Order. A.R.S. § 17-301 authorizes the Commission to determine lawful methods for the taking of fish. The rule was adopted to establish additional devices and methods by which a person may lawfully take aquatic wildlife and ensure consistent interpretation of and compliance with A.R.S. § 17-301.

The Commission proposes to combine R12-4-313 and R12-4-317 (Seasons for Lawfully Taking Fish, Mollusks, Crustaceans, Amphibians, and Aquatic Reptiles) to increase consistency between Commission Orders, rules, and Department publications; with this amendment R12-4-317 will be repealed.

The Commission proposes to amend the title of the rule to Lawful Methods of Take and Seasons for Aquatic Wildlife to more accurately reflect the subject matter of the rule as amended.

The Commission recently amended R12-4-609 Commission Orders to authorize the Commission to establish a special season allowing fish to be taken by additional methods on waters where a fish die-off is imminent. This change was made as a result of an incident involving Tempe Town Lake that gave light to the fact that the Commission did not have sufficient authority to issue an Order to allow the take of fish by additional methods on waters where a fish die-off was imminent. The Commission proposes to amend the rule to increase consistency between Commission rules.

Because scientific terms are italicized in other Commission rules, the Commission proposes to italicize scientific terms referenced in this rule to increase consistency in formatting with other Commission rules.

In 2014, the Commission amended its license and stamp rules as a result of legislation that authorized the Commission to simplify its license structure. In an effort to simplify the licensing process and increase value, the Department decided to eliminate the "two-pole" stamp and roll the simultaneous fishing privilege into the fishing license. As a result of eliminating the two-pole stamp, there is some confusion as to how many poles are lawful for one person to use while fishing. The Commission proposes to amend the rule to state a person may not use more than two lines at any one time while fishing to facilitate a consistent interpretation of simultaneous fishing.

The availability of hybrid devices (weapons with components from two or more different devices) is increasing. Depending on the species, some hybrid devices may be used for the take of aquatic wildlife, while others cannot. The Commission proposes to amend the rule to allow the use of a hybrid device for the taking of aquatic wildlife provided all components of the device are authorized for the take of that species. This change is in response to customer comments received by the Department.

In addition, under A.R.S. § 17-211(E)(4), a game ranger may seize all wildlife taken or possessed in violation of law or showing evidence of illegal taking. The Commission proposes to amend the rule to state aquatic wildlife taken in violation of Title 17 or this rule is unlawfully taken.

The Commission proposes to amend the rule to prohibit a person from snagging aquatic wildlife or using a bow and arrow, crossbow, snare, gig, spear or spear gun within 200 yards of a designated swimming area, as indicated by way of posted signs or notices, and fishing pier to protect public health and safety.

R12-4-315. Possession of Live Fish; Unattended Live Boxes and Stringers

The objective of the rule is to establish requirements necessary for the temporary possession of live fish. All freshwater game fish are listed as restricted live wildlife. Under R12-4-406, a person must possess a valid special license and any required federal authorization or have a lawful exemption in order to lawfully possess restricted live wildlife. The rule was adopted to provide a lawful mechanism by which a person can temporarily hold live freshwater game fish.

The Commission proposes to combine R12-4-315 and R12-4-316 (Possession, Transportation, or Importation of Live Baitfish, Crayfish, or Waterdogs) to increase consistency between Commission Orders, rules, and Department publications; with this amendment the Commission will adopt a new rule, R12-4-314, and both R12-4-315 and R12-4-316 will be repealed.

The Commission proposes to amend the title of the rule to Possession, Transportation, or Importation of Aquatic Wildlife to more accurately reflect the subject matter of the rule as amended.

The Commission proposes to amend the rule to add the following native fish to the list of live baitfish that a person may use for live bait: Longfin Dace (*Agosia chrysogaster*), Sonora Sucker (*Catostomus insignis*), Speckled Dace (*Rhynchithys osculus*), and Desert Sucker (*Catostomus clarki*). As a result of the Department's Statewide Sport Fish Stocking Consultation with the U.S. Fish and Wildlife Service, a conservation measure was developed within the Conservation and Mitigation Program to conduct a statewide live bait use assessment and complete a risk analysis to identify recommendations for live bait management in Arizona. The Live Bait Team evaluated the potential to minimize the risk and threats to native aquatic species, while continuing to maintain live bait use opportunities that have social and economic importance to the angling community. The goal of the live bait management team's recommendations is to prevent the transport and introduction of nonnative live bait and aquatic invasive species, pathogens, and parasites that impinge on the Department's ability to manage the State's aquatic resources. Because the unlawful release or improper use of nonnative live baitfish has resulted in established populations, to better protect native aquatic wildlife and its habitat, the team recommends allowing the use of certain native live baitfish for use in angling.

Both A.R.S. § 17-236(C) and R12-4-307 prohibit a person from disturbing the trap of another unless permitted by the owner.



The Commission proposes to amend the rule to prohibit a person from knowingly disturbing the crayfish net, live box, minnow trap, or stringer of another unless authorized to do so by the owner to increase consistency between statute and Commission rules.

With this rulemaking, the Commission proposes to combine R12-4-315 (Possession of Live Fish; Unattended Live Boxes and Stringers) and R12-4-316 to increase consistency between Commission Orders, rules, and Department publications; and renumber the rule to R12-4-314 and repeal both R12-4-315 and R12-4-316.

R12-4-316. Possession, Transportation, or Importation of Live Baitfish, Crayfish, or Waterdogs

The objective of the rule is to establish restrictions designed to control the introduction of undesirable species and to reduce the likelihood that baitfish, crayfish, and waterdogs (larval salamanders) may be released in waters where they could establish populations that compete with existing and native aquatic wildlife. The rule was adopted to protect and preserve native aquatic wildlife and habitat.

With this rulemaking, the Commission proposes to combine R12-4-315 (Possession of Live Fish; Unattended Live Boxes and Stringers) and R12-4-316 to increase consistency between Commission Orders, rules, and Department publications; and renumber the rule to R12-4-314 and repeal both R12-4-315 and R12-4-316.

R12-4-317. Seasons for Lawfully Taking Fish, Mollusks, Crustaceans, Amphibians, and Aquatic Reptiles

The objective of the rule is to establish special restrictions and requirements for various seasons to allow the Department to achieve management plans and goals for the preservation and harvest of aquatic wildlife, while providing maximum hunt opportunities for the public. A.R.S. § 17-301(D)(2) authorizes the Commission to adopt rules establishing the taking of wildlife with firearms, fishing equipment, archery equipment, or other implements in hand as may be defined. The rule was adopted to ensure consistent interpretation of and compliance with A.R.S. § 17-301(D)(2).

With this rulemaking, the Commission proposes to combine R12-4-313 (Lawful Methods of Taking Aquatic Wildlife) and R12-4-317 to increase consistency between Commission Orders, rules, and Department publications; and repeal this rule.

R12-4-318. Seasons for Lawfully Taking Wild Mammals, Birds, and Reptiles

The objective of the rule is to establish special restrictions and requirements for various hunt structures in order to allow the Department to achieve management goals for the preservation and harvest of wildlife, while at the same time providing maximum wildlife-oriented recreational opportunities for the public. Under A.R.S. § 17-301(D)(2), the Commission has the authority to adopt rules establishing the taking of wildlife with firearms, fishing equipment, archery equipment, or other implements in hand as may be defined. The rule was adopted to ensure consistent interpretation of and compliance with A.R.S. § 17-301(D)(2).

The Commission proposes to amend the rule to reference rules where lawful devices are defined to ensure consistent interpretation of terms used within Commission Orders and rules. In the current rule, R12-4-301 is referenced under each season. The Commission proposes to amend the rule to reference R12-4-301 only under subsection (A) to remove redundant language. These changes are made to make the rule more concise.

The availability of hybrid devices (weapons with components from two or more different devices) is increasing. Depending on the species, some hybrid devices may be used for the take of wildlife, while others cannot. The Commission proposes to amend the rule to allow the use of a hybrid device for the taking of wildlife provided all components of the device are authorized for the take of that species. This change is in response to customer comments received by the Department.

The Commission proposes to amend the rule to provide the devices and methods listed under each season by their range of effectiveness, from greatest range to least range to assist persons regulated by the rule; knowing which devices and methods are most effective may aid a person in choosing a device or method for their hunt.

The Commission proposes to amend the rule to reference "muzzleloading handguns" under subsection (C)(7) to ensure persons regulated by the rule are aware that only a muzzleloading handgun is lawful under that season to remove regulatory ambiguity.

The Commission proposes to amend the rule to allow a person to use a pre-charged pneumatic weapon capable of holding and discharging a single projectile .35 caliber or larger as a lawful method of take during a "handgun, archery, and muzzleloader (HAM)" season to provide persons regulated by the rule additional hunter opportunity.

The Commission proposes to amend the rule to allow a person to use a muzzleloading shotgun as a lawful method of take during a "limited weapon-shotgun" season to provide persons regulated by the rule additional hunter opportunity.

The Commission proposes to amend the rule to allow a person to use a muzzleloading shotgun shooting shot as a lawful method of take during a "limited weapon-shotgun shooting shot" season to provide persons regulated by the rule additional hunter opportunity.

R12-4-319. Use of Aircraft to Take Wildlife

The objective of the rule is to prohibit the use of aircraft for the purpose of hunting or harassing wildlife to provide for fair chase and pursuit of game animals. A.R.S. § 17-301(B) states, "A person shall not take wildlife, except aquatic wildlife, or discharge a firearm or shoot any other device from a motor vehicle, including an automobile, aircraft, train or powerboat, or from a sailboat, boat under sail, or a floating object towed by powerboat or sailboat except as expressly permitted by the commission." The rule was adopted to ensure consistent interpretation of and compliance with A.R.S. § 17-301(B).

In recent years, the availability and use of drones has increased significantly. The Commission proposes to amend R12-4-319 to clarify drones are considered to be aircraft and are not lawful to use for the purpose of locating or assisting in locating wildlife.

R12-4-320. Harassment of Wildlife

The objective of the rule is to prohibit the use of vehicles for the purpose of hunting or harassing wildlife to provide for fair chase and pursuit of game animals. A.R.S. § 17-301(B) states, "A person shall not take wildlife, except aquatic wildlife, or dis-



charge a firearm or shoot any other device from a motor vehicle, including an automobile, aircraft, train or powerboat, or from a sailboat, boat under sail, or a floating object towed by powerboat or sailboat except as expressly permitted by the commission.” The rule was adopted to ensure consistent interpretation of and compliance with A.R.S. § 17-301(B).

The rule prohibits the use of vehicles for the purpose of hunting or harassing wildlife to provide for fair chase and pursuit of game animals. The Commission proposes to amend the rule to provide further clarity to the term “aircraft” by referencing drones. The Commission anticipates these changes will result in a rule that is more understandable.

The Commission proposes to amend R12-4-320 to replace the term “individual” with “person” to increase consistency between Commission rules.

R12-4-321. Restrictions for Taking Wildlife in City, County, or Town Parks and Preserves

The objective of the rule is to establish restrictions for hunting in city, county, or town parks and preserves. The rule was adopted to allow a person to hunt in city, county, or town parks and preserves where possible. The Maricopa County Parks and Recreation Commission and the Arizona Game and Fish Commission entered into an agreement in 1976 with the following stated objective: “To recognize hunting, fishing and trapping as practical methods for harvesting wildlife resources and to limit restrictions on such methods of harvest to recreational facilities and other developments where people are congregated and require safety precautions.” The agreement further specifies restrictions necessary to meet the objectives of the agreement. Because the restrictions affect the public and are more restrictive than methods commonly established under R12-4-304, R12-4-313, R12-4-317, and R12-4-318, they are appropriately established within this rule as well as within the agreement. The agreement remains in effect to date without change.

Under R12-4-307(H)(2)(a), a trapper shall not set a trap within one-half mile of certain public use areas. The Commission proposes to amend the rule to incorporate trapping restrictions and increase consistency between Commission rules.

Because some parks have replaced a physical check in station with an online check-in system, the Commission proposes to amend the rule to clarify a hunter shall declare their intent to hunt when the park or preserve has established a check-in process.

The Commission believes the distance restrictions provided in rule are needed to ensure public health and safety. Persons participating in a reptile and amphibian limited weapon hand or hand-held implement season established by Commission Order use their hand or a catch-pole, snake hook, or snake tongs. Because these methods and devices do not use projectiles, they do not pose the same type of hazard; the Commission proposes to amend the rule to exempt persons participating in a reptile and amphibian limited weapon hand or hand-held implement season from the one fourth and one half mile (440 or 880 yards, as applicable) prohibition when hunting in a city, county, or town park or preserve.

R12-4-322. Pickup and Possession of Wildlife Carcasses or Parts

The objective of the rule is to allow persons to pick up and possess naturally shed antlers, horns, or other wildlife parts that are not fresh without a Department inspection. In addition, the rule prohibits a person from collecting or possessing fresh wildlife parts unless a Department officer has inspected the wildlife parts and determined the animal died from natural causes. The possession of any threatened or endangered species carcass or its parts is prohibited.

The Commission proposes to amend the rule to allow a Department employee or agent to assist in determining whether an inspection by a law enforcement officer is required to reduce the burden on the Department and persons regulated by the rule. In the event a law enforcement officer is not available, a Department employee or agent who has experience in determining whether an animal died from natural causes may conduct the inspection.

R12-4-401. Live Wildlife Definitions

The objective of the rule is to establish definitions that assist persons regulated by the rule and members of the public in understanding the unique terms that are used throughout Article 4. The rule was adopted to facilitate consistent interpretation of Article 4 rules and to prevent persons regulated by the rule from misinterpreting the intent of Commission rules.

The Commission proposes to transfer the definition of “cervid” under R12-4-401 to R12-4-101 as the term “cervid” is used in Articles 1 and 3.

The Commission also proposes to remove the definition of “person” as person is defined under R12-4-101.

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:

Angers RC, Seward TS, Napier D, Green M, Hoover E, Spraker T, et al. Chronic Wasting Disease Prions in Elk Antler Velvet. *Emerg Infect Dis.* 2009;15(5):696-703. <https://dx.doi.org/10.3201/eid1505.081458>

7. An explanation of the substantial change which resulted in the supplemental notice:

The Commission felt the need to evaluate regulatory measures pertaining to the use of trail cameras as they related to the ‘take of wildlife’ and the Fair Chase hunting ethic after receiving multiple comments from the public opposing the use of trail cameras for hunting. In the Notice of Proposed Rulemaking published March 16, 2018, the Commission proposed to amend R12-4-303 (Unlawful Devices, Methods, and Ammunition) to prohibit the use of any trail camera within one-fourth mile of the outer perimeter of a developed water source for the purpose of taking or aiding in the taking of wildlife. However, after receiving significant opposition to the proposed amendment from persons regulated by the rule, the Commission chose to remove this prohibition from the original rulemaking proposals. As a result, the following language was removed from R12-4-303(A)(5), “Within one-fourth mile (440 yards) of the outer perimeter of a developed water source, a person shall not use any trail camera, or images from a trail camera, for the purpose of taking or aiding in the take of wildlife.” Because the proposed prohibition is being removed, the definition of “developed water source” was deemed unnecessary and was removed from R12-4-301.



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:

Not applicable

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

The Commission's intent in proposing the amendments listed above is to address the ethical taking and handling of wildlife, increase hunter opportunity, and encourage hunter recruitment and retention. These areas include the use of tags, lawful and unlawful methods of taking and possessing wildlife and wildlife parts, seasons, check-in/check-out requirements, and reporting requirements. The Commission believes the majority of the rulemaking is intended to benefit persons regulated by the rule and the Department by increasing consistency between Commission Order and rule, reducing regulatory ambiguity, clarifying rule language to ease enforcement, creating consistency among existing Commission rules, providing greater opportunities for hunting and fishing, reducing the burden on persons regulated by the rules where practical, allowing the Department additional oversight to handle advances in hunting and angling technology and protecting the spirit of fair chase. As areas within Arizona become increasingly urbanized, more people are now living isolated from nature and outdoor activities such as hunting. As hunters represent a smaller percentage of the overall population, growing segments of society are questioning the validity of hunting including its benefits, how it is conducted, and if it should continue as a legal activity. Regulated hunting fundamentally supports wildlife conservation efforts in North America. The loss of hunting would equate to a measureable loss in conservation efforts. Hunting and angling are the cornerstones of the North American Model of Wildlife Conservation and continue to be the primary source of funding for conservation efforts in Arizona. Hunters and anglers support 18,220 jobs in Arizona; this especially benefits rural communities. Spending by sportsmen and women in Arizona generated \$132 million in State and local taxes in 2011; enough to support the average salaries of 2,311 police and sheriff's patrol officers. The economic stimulus of hunting and fishing equates to \$3.4 million a day being pumped into Arizona's economy. ~ *Congressional Sportsmen's Foundation: 2013 Sportsman's Economic Report - Arizona*. Fair Chase issues can erode public support of hunting and angling and threaten the funding that drives Arizona's conservation mission and the economic benefit of those activities to our State. In addition, there exists a general expectation that hunting be conducted under appropriate conditions; animals are taken for legitimate purposes such as food, to accomplish wildlife agency management goals, and to mitigate property damage. It is also expected that the hunting is done sustainably and legally, and that hunters show respect for the land and animals they hunt. In the broadest sense, hunters are guided by a conservation ethic, but the most common term used to describe the actual ethical pursuit of an animal is "fair chase." "Fair Chase" means the ethical and lawful pursuit and take of free-range wildlife in a manner that does not give the hunter or angler improper or unfair advantage over such wildlife. The following criteria are used to evaluate whether a new technology or practice violates the Fair Chase ethic; does the technology or practice allow a hunter or angler to: locate or take wildlife without acquiring necessary hunting and angling skills or competency; pursue or take wildlife without being physically present and pursuing wildlife in the field; or almost guarantee the harvest of wildlife when the technology or practice prevents wildlife from eluding take. The Commission anticipates the rulemaking will result in an overall benefit to persons regulated by the rule. The Commission anticipates the rulemaking will result in no significant impact, if any, to political subdivisions of this state, private and public employment in businesses, agencies or political subdivisions, or state revenues. The Commission has determined the rulemaking will not require any new full-time employees. The Commission has determined that there are no less intrusive or costly alternative methods of achieving the purpose of the rulemaking. The Department will incur costs related to the cost of rulemaking, developing an electronic check-in/check-out system, and implementing rule changes (administration, training, forms, etc.); although the Department believes that implementing these changes now will result in resource savings in the future. Therefore, the Commission has determined that the benefits of the rulemaking outweigh any costs.

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

Name: Celeste Cook, Rules and Policy Manager
Address: Arizona Game and Fish Department
5000 W. Carefree Highway
Phoenix, AZ 85086
Telephone: (623) 236-7390
Fax: (623) 236-7110
E-mail: CCook@azgfd.gov

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

Date: September 21, 2018
Time: 8:00 a.m. to 5:00 p.m.
Location: 2188 W. Country Club Drive,
Overgaard, AZ 85933
Close of record: September 21, 2018

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 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 reason why a general permit is not used:

For R12-4-307, the rule complies with A.R.S. § 41-1037. The trapping license and bobcat seal described in the rule falls within the definition of "general permit" as defined under A.R.S. § 41-1001(11).



For R12-4-309, the rule complies with A.R.S. § 41-1037. The authorization described in the rule falls within the definition of “general permit” as defined under A.R.S. § 41-1001(11).

For R12-4-310, the rule complies with A.R.S. § 41-1037. The permits described in the rule falls within the definition of “general permit” as defined under A.R.S. § 41-1001(11).

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:

Except for the rules listed below, federal law is not directly applicable to the subject of the rules. The rules are based on state law.

For R12-4-303 and R12-4-304, Federal regulation 50 C.F.R. 20.21 is applicable to the subject of the rule. 50 C.F.R. 20.21 establishes general requirements, exceptions, and specific provisions for migratory bird hunting. The Commission has determined the rule is not more stringent than the corresponding federal law.

For R12-4-319, Federal regulation 50 C.F.R. 19 is applicable to the subject of the rule. The Commission has determined the rule is not more stringent than the corresponding federal law. 50 C.F.R. 19 establishes general prohibitions and exceptions for the use of aircraft for the taking of wildlife, requirements for the contents and filing of annual reports by the States regarding permits issued for such shooting or harassing, and regulations necessary for effective enforcement of the Fish and Wildlife Act of 1956 as amended. The Commission has determined the rule is not more stringent than the corresponding federal law.

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:

The agency has not received an analysis that compares the rule’s impact of competitiveness of business in this state to the impact on business in other states.

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

Under R12-4-101, C.F.R. 17.11, revised October 1, 2013.

Under R12-4-101, 50 C.F.R. 10.13 revised October 1, 2014.

Under R12-4-303 and R12-4-304, 50 C.F.R. 20.21, revised October 1, 2015.

14. The full text of the rules follows:

**TITLE 12. NATURAL RESOURCES
CHAPTER 4. GAME AND FISH COMMISSION**

ARTICLE 1. DEFINITIONS AND GENERAL PROVISIONS

Section
R12-4-101. Definitions

ARTICLE 2. LICENSES; PERMITS; STAMPS; TAGS

Section
R12-4-216. Crossbow Permit

ARTICLE 3. TAKING AND HANDLING OF WILDLIFE

Section
R12-4-301. Definitions
R12-4-302. Use of Tags
R12-4-303. Unlawful Devices, Methods, and Ammunition
R12-4-304. Lawful Methods for Taking Wild Mammals, Birds, and Reptiles
R12-4-305. Possessing, Transporting, Importing, Exporting, and Selling Carcasses or Parts of Wildlife
R12-4-306. Buffalo Hunt Requirements
R12-4-307. Trapping Regulations, Licensing; Methods; Tagging of Bobcat Pelts
R12-4-308. Wildlife Inspections, Check Stations, and Roadblocks
R12-4-309. Authorization for Use of Drugs on Wildlife
R12-4-310. Fishing Permits
R12-4-311. Exemptions from Requirement to Possess an Arizona Fishing License or Hunting License While Taking Wildlife
R12-4-313. Lawful Methods of ~~Taking~~ Take and Seasons for Aquatic Wildlife
R12-4-314. ~~Possession, Transportation, or Importation of Aquatic Wildlife~~
R12-4-315. ~~Possession of Live Fish; Unattended Live Boxes and Stringers~~ Repeal
R12-4-316. ~~Possession, Transportation, or Importation of Live Baitfish, Crayfish, or Waterdogs~~ Repeal
R12-4-317. ~~Seasons for Lawfully Taking Fish, Mollusks, Crustaceans, Amphibians, and Aquatic Reptiles~~ Repeal
R12-4-318. Seasons for Lawfully Taking Wild Mammals, Birds, and Reptiles
R12-4-319. Use of Aircraft to Take Wildlife
R12-4-320. Harassment of Wildlife
R12-4-321. Restrictions for Taking Wildlife in City, County, or Town Parks and Preserves
R12-4-322. Pickup and Possession of Wildlife Carcasses or Parts



ARTICLE 4. LIVE WILDLIFE

Section

R12-4-401. Live Wildlife Definitions

ARTICLE 1. DEFINITIONS AND GENERAL PROVISIONS

R12-4-101. Definitions

A. In addition to the definitions provided under A.R.S. § 17-101, R12-4-301, R12-4-401, and R12-4-501, the following definitions apply to this Chapter, unless otherwise specified:

“Bobcat seal” means the tag a person is required to attach to the raw pelt or unskinned carcass of any bobcat taken by trapping in Arizona or exported out of Arizona regardless of the method of take.

“Bonus point” means a credit that authorizes the Department to issue an applicant an additional computer-generated random number.

“Bow” means a long bow, flat bow, recurve bow, or compound bow of which the bowstring is drawn and held under tension entirely by the physical power of the shooter through all points of the draw cycle until the shooter purposely acts to release the bowstring either by relaxing the tension of the toes, fingers, or mouth or by triggering the release of a hand-held release aid.

“Certificate of insurance” means an official document, issued by the sponsor's and sponsor's vendors, or subcontractors insurance carrier, providing insurance against claims for injury to persons or damage to property which may arise from, or in connection with, the solicitation or event as determined by the Department.

“Cervid” means a mammal classified as a Cervidae, which includes but is not limited to caribou, elk, moose, mule deer, reindeer, wapiti, and whitetail deer; as defined in the taxonomic classification from the Integrated Taxonomic Information System, available online at www.itis.gov.

“Commission Order” means a document adopted by the Commission that does one or more of the following:

- Open, close, or alter seasons,
- Open areas for taking wildlife,
- Set bag or possession limits for wildlife,
- Set the number of permits available for limited hunts, or
- Specify wildlife that may or may not be taken.

“Crossbow” means a device consisting of a bow affixed on a stock having a trigger mechanism to release the bowstring.

“Day-long” means the 24-hour period from one midnight to the following midnight.

“Department property” means those buildings or real property and wildlife areas under the jurisdiction of the Arizona Game and Fish Commission.

“Export” means to carry, send, or transport wildlife or wildlife parts out of Arizona to another state or country.

“Firearm” means any loaded or unloaded handgun, pistol, revolver, rifle, shotgun, or other weapon that will discharge, is designed to discharge, or may readily be converted to discharge a projectile by the action of an explosion caused by the burning of smokeless powder, black powder, or black powder substitute.

“Handgun” means a firearm designed and intended to be held, gripped, and fired by one or more hands, not intended to be fired from the shoulder, and that uses the energy from an explosive in a fixed cartridge to fire a single projectile through a barrel for each single pull of the trigger.

“Hunt area” means a management unit, portion of a management unit, or group of management units, or any portion of Arizona described in a Commission Order and not included in a management unit, opened to hunting.

“Hunt number” means the number assigned by Commission Order to any hunt area where a limited number of hunt permits are available.

“Hunt permits” means the number of hunt permit-tags made available to the public as a result of a Commission Order.

“Hunt permit-tag” means a tag for a hunt for which a Commission Order has assigned a hunt number.

“Identification number” means the number assigned to each applicant or license holder by the Department as established under R12-4-111.

“Import” means to bring, send, receive, or transport wildlife or wildlife parts into Arizona from another state or country.

“License dealer” means a business authorized to sell hunting, fishing, and other licenses as established under ~~to~~ R12-4-105.

“Live baitfish” means any species of live freshwater fish designated by Commission Order as lawful for use in taking aquatic wildlife under R12-4-317.

“Management unit” means an area established by the Commission for management purposes.

“Nonpermit-tag” means a tag for a hunt for which a Commission Order does not assign a hunt number and the number of tags is not limited.

“Nonprofit organization” means an organization that is recognized under Section 501(c) of the U.S. Internal Revenue Code.

“Person” has the meaning as provided under A.R.S. § 1-215.

“Proof of purchase,” for the purposes of A.R.S. § 17-331, means an original, or any authentic and verifiable form of the original, of any Department-issued license, permit, or stamp that establishes proof of actual purchase.



- “Restricted nonpermit-tag” means a tag issued for a supplemental hunt as established under R12-4-115.
 - “Solicitation” means any activity that may be considered or interpreted as promoting, selling, or transferring products, services, memberships, or causes, or participation in an event or activity of any kind, including organizational, educational, public affairs, or protest activities, including the distribution or posting of advertising, handbills, leaflets, circulars, posters, or other printed materials for these purposes.
 - “Solicitation material” means advertising, circulars, flyers, handbills, leaflets, posters, or other printed information.
 - “Sponsor” means the person or persons conducting a solicitation or event.
 - “Stamp” means a form of authorization in addition to a license that authorizes the license holder to take wildlife specified by the stamp.
 - “Tag” means the Department authorization a person is required to obtain before taking certain wildlife as established under A.R.S. Title 17 and 12 A.A.C. 4.
 - “Waterdog” means the larval or metamorphosing stage of a salamander.
 - “Wildlife area” means an area established under 12 A.A.C. 4, Article 8.
- B.** If the following terms are used in a Commission Order, the following definitions apply:
- “Antlered” means having an antler fully erupted through the skin and capable of being shed.
 - “Antlerless” means not having an antler, antlers, or any part of an antler erupted through the skin.
 - “Bearded turkey” means a turkey with a beard that extends beyond the contour feathers of the breast.
 - “Buck antelope” means a male pronghorn antelope.
 - “Adult bull ~~buffalo~~ bison” means a male ~~buffalo~~ bison of any age or any ~~buffalo~~ bison designated by a Department employee during an adult bull ~~buffalo~~ bison hunt.
 - “Adult cow ~~buffalo~~ bison” means a female ~~buffalo~~ bison of any age or any ~~buffalo~~ bison designated by a Department employee during an adult cow ~~buffalo~~ bison hunt.
 - “Bull elk” means an antlered elk.
 - “Designated” means the gender, age, or species of ~~an animal~~ wildlife or the specifically identified ~~animal~~ wildlife the Department authorizes to be taken and possessed with a valid tag.
 - “Ram” means any male bighorn sheep.
 - “Rooster” means a male pheasant.
 - “Yearling ~~buffalo~~ bison” means any ~~buffalo~~ bison less than three years of age or any ~~buffalo~~ bison designated by a Department employee during a yearling ~~buffalo~~ bison hunt.

ARTICLE 2. LICENSES; PERMITS; STAMPS; TAGS

R12-4-216. Crossbow Permit

- A.** For the purposes of this Section, “healthcare provider” means a person who is licensed to practice by the federal government, any state, or U.S. territory with one of the following credentials:
 Medical Doctor,
 Doctor of Osteopathy,
 Doctor of Chiropractic,
 Nurse Practitioner, or
 Physician Assistant.
- B.** A crossbow permit allows a person to use ~~a crossbow or any bow to be drawn and held with an assisting device~~, the following devices during an archery-only season, as prescribed under R12-4-318, when authorized under R12-4-304 as lawful for the species hunted:
1. A crossbow as defined under R12-4-101.
 2. Any bow to be drawn and held with an assisting device, or
 3. Pre-charged pneumatic weapons, as defined under R12-4-301, using arrows or bolts and with a capacity of holding and firing only one arrow or bolt at a time.
- C.** The crossbow permit does not exempt the permit holder from any other applicable method of take or licensing requirement. The permit holder shall be responsible for compliance with all applicable regulatory requirements.
- D.** The crossbow permit does not expire, unless:
1. The medical certification portion of the application indicates the person has a temporary physical disability; then the crossbow permit shall be valid only for the period of time indicated on the crossbow permit as specified by the healthcare provider,
 2. The permit holder no longer meets the criteria for obtaining the crossbow permit, or
 3. The Commission revokes the person’s hunting privileges under A.R.S. § 17-340. A person whose crossbow permit is revoked by the Commission may petition the Commission for a rehearing as established under R12-4-607.
- E.** An applicant for a crossbow permit shall apply by submitting an application to the Department. The application form is furnished by the Department and is available at any Department office and online at www.azgfd.gov. A crossbow permit applicant shall provide all of the following information on the application:
1. The applicant's:
 - a. Name;
 - b. Date of birth;
 - c. Physical description, to include the applicant's eye color, hair color, height, and weight;
 - d. Department identification number, when applicable;



- e. Residency status;
 - f. Mailing address, when applicable;
 - g. Physical address;
 - h. Telephone number, when available; and
 - i. E-mail address, when available;
2. Affirmation that:
 - a. The applicant meets the requirements of this Section, and
 - b. The information provided on the application is true and accurate, and
 3. Applicant's signature and date.
 4. The certification portion of the application shall be completed by a healthcare provider. The healthcare provider shall:
 - a. Certify the applicant has one or more of the following physical limitations:
 - i. An amputation involving body extremities required for stable function to use conventional archery equipment;
 - ii. A spinal cord injury resulting in a disability to the lower extremities, leaving the applicant nonambulatory;
 - iii. A wheelchair restriction;
 - iv. A neuromuscular condition that prevents the applicant from drawing and holding a bow;
 - v. A failed functional draw test that equals 30 pounds of resistance and involves holding it for four seconds;
 - vi. A failed manual muscle test involving the grading of shoulder and elbow flexion and extension or an impaired range-of-motion test involving the shoulder or elbow; or
 - vii. A combination of comparable physical disabilities resulting in the applicant's inability to draw and hold a bow.
 - b. Indicate whether the disability is temporary or permanent and, when temporary, specify the expected duration of the physical limitation; and
 - c. Provide the healthcare provider's:
 - i. Typed or printed name,
 - ii. License number,
 - iii. Business address,
 - iv. Telephone number, and
 - v. Signature and date;
 5. A person who holds a valid Challenged Hunter Access/Mobility Permit (CHAMP) and who is applying for a crossbow permit is exempt from the requirements of subsection (E)(4) and shall indicate "CHAMP" in the space provided for the medical certification on the crossbow permit application.
- F.** All information and documentation provided by the applicant is subject to Department verification. The Department shall return the original or certified copy of a document to the applicant after verification.
- G.** The Department shall deny a crossbow permit when the applicant:
1. Fails to meet the criteria prescribed under this Section,
 2. Fails to comply with the requirements of this Section, or
 3. Provides false information during the application process.
- H.** The Department shall provide written notice to the applicant stating the reason for the denial. The applicant may appeal the denial to the Commission as prescribed under A.R.S. Title 41, Chapter 6, Article 10.
- I.** The applicant claiming a temporary or permanent disability is responsible for all costs associated with obtaining the medical documentation, re-evaluation of the information, or a second medical opinion.
- J.** When acting under the authority of a crossbow permit, the crossbow permit holder shall possess the permit, and exhibit the permit upon request to any peace officer, wildlife manager, or game ranger.
- K.** A crossbow permit holder shall not:
1. Transfer the permit to another person, or
 2. Allow another person to use or possess the permit.

ARTICLE 3. TAKING AND HANDLING OF WILDLIFE

R12-4-301. Definitions

In addition to the definitions provided under A.R.S. § 17-101 and R12-4-101, the following definitions apply to this Article unless otherwise specified:

"Administer" means to ~~pursue, capture, or otherwise restrain wildlife in order to directly~~ apply a drug directly to wildlife by injection, inhalation, ingestion, or any other means.

"Aircraft" means any contrivance used for flight in the air or any lighter-than-air contrivance, including unmanned aircraft systems also known as drones.

"Artificial ~~lures and flies and lures~~" means man-made devices intended as visual attractants ~~for to catch fish and~~ Artificial flies and lures does not include living or dead organisms or edible parts of those organisms, natural or prepared food stuffs, ~~artificial salmon eggs, artificial corn, or artificial marshmallows~~ chemicals or organic materials intended to create a scent, flavor, or chemical stimulant to the device regardless of whether it is added or applied during or after the manufacturing process.

"Barbless hook" means any ~~fishhook~~ fish hook manufactured without barbs or on which the barbs have been completely closed or removed.

"Body-gripping trap" means a device designed to capture an animal by gripping the animal's body.

"Cervid" means ~~any member of the deer family (Cervidae); which includes caribou, elk, moose, mule deer, reindeer, wapiti, and whitetail deer.~~

"Confinement trap" means a device designed to capture wildlife alive and hold it without harm.



“Crayfish net” means a net that does not exceed 36 inches on a side or in diameter and is retrieved by means of a hand-held line.

“Deadly weapon” has the same meaning as provided under A.R.S. § 13-3101.

“Device” has the same meaning as provided under A.R.S. § 17-101.

“Dip net” means any net, excluding the handle, that is no greater than ~~3~~ three feet in the greatest dimension, that is hand-held, non-motorized, and the motion of the net is caused by the physical effort of the ~~individual person~~.

“Drug” means any chemical substance, other than food or mineral supplements, ~~which~~ that affects the structure or biological function of wildlife.

“Edible portions of game meat” means, for:

Upland game birds, migratory game birds and wild turkey: breast.

Bear, bighorn sheep, bison, deer, elk, javelina, mountain lion, and pronghorn antelope: front quarters, hind quarters, loins (backstraps), neck meat, and tenderloins.

Game fish: fillets of the fish.

“Evidence of legality” means the wildlife is accompanied by the applicable license, tag, stamp, or permit required by law and is identifiable as the “legal wildlife” prescribed by Commission Order, which may include evidence of species, gender, antler or horn growth, maturity, and size.

“Foothold trap” means a device designed to capture an animal by the leg or foot.

“Hybrid device” means a device with a combination of components from two or more lawful devices and is used for the take of wildlife, such as but not limited to a firearm, pneumatic weapon, or slingshot that shoots arrows or bolts.

“Instant kill trap” means a device designed to render an animal unconscious and insensitive to pain quickly with inevitable subsidence into death without recovery of consciousness.

“Land set” means any trap used on land rather than in water.

“Live-action trail camera” means an unmanned device capable of transmitting images, still photographs, video, or satellite imagery, wirelessly to a remote device such as but not limited to a computer, smart phone, or tablet. This does not include a trail camera that only records photographic or video data and stores the data for later use, provided the device is not capable of transmitting data wirelessly.

“Minnow trap” means a trap with dimensions that do not exceed 12 inches in depth, 12 inches in width, and 24 inches in length.

“Muzzleloading handgun” means a firearm intended to be fired from the hand, incapable of firing fixed ammunition, ~~having a single barrel,~~ and loaded ~~through the muzzle~~ with black powder or synthetic black powder and a single projectile.

“Muzzleloading rifle” means a firearm intended to be fired from the shoulder, incapable of firing fixed ammunition, having a single barrel ~~and single chamber,~~ and loaded through the muzzle with black powder or synthetic black powder and a single projectile.

“Muzzleloading shotgun” means a firearm intended to be fired from the shoulder, incapable of firing fixed ammunition, having a single or double smooth barrel and loaded through the muzzle with black powder or synthetic black powder and using ball shot as a projectile.

“Nonprofit organization” means ~~an organization that is recognized as nonprofit under Section 501(c) of the U.S. Internal Revenue Code.~~

“Paste-type bait” means a partially liquefied substance used as a lure for animals.

“Person” means ~~any individual, corporation, partnership, limited liability company, non-governmental organization or club, licensed animal shelter, government entity other than the Department, and any officer, employee, volunteer, member or agent of a person.~~

“Pneumatic weapon” means a device that fires a projectile by means of air pressure or compressed gas. This does not include tools that are common in the construction and art trade such as, but not limited to, nail and rivet guns.

“Pre-charged pneumatic weapon” means an air gun or pneumatic weapon that is charged from ~~an external~~ a high compression source such as an air compressor, air tank, or internal external hand pump.

“Prohibited possessor” has the same meaning as provided under A.R.S. § 13-3101.

“Prohibited weapon” has the same meaning as provided under A.R.S. § 13-3101.

“Rifle” means a firearm intended to be fired from the shoulder that uses the energy from an explosive in a fixed cartridge to fire a single projectile through a rifled bore for each single pull of the trigger. This does not include a pre-charged pneumatic weapon.

“Shotgun” means a firearm intended to be fired from the shoulder and that uses the energy from an explosive in a fixed shotgun shell to fire either ball shot or a single projectile through a smooth bore or rifled barrel for each pull of the trigger.

“Sight-exposed bait” means a carcass, or parts of a carcass, lying openly on the ground or suspended in a manner so that it can be seen from above by a bird. This does not include a trap flag, dried or bleached bone with no attached tissue, or less than two ounces of paste-type bait.

“Simultaneous fishing” means taking fish by using only two lines at one time and not more than two hooks or two artificial flies or lures ~~or flies~~ per line.



“Single-point barbless hook” means a fishhook with a single point, manufactured without barbs, or on which the barbs have been completely closed or removed. This does not include a treble fishhook.

“Sinkbox” means a low-floating device with a depression that affords a hunter a means of concealment beneath the surface of the water.

“Smart device” means any device equipped with a target-tracking system or an electronically-controlled, electronically-assisted, or computer-linked trigger or release. This includes but is not limited to smart rifles.

“Trap flag” means an attractant made from materials other than animal parts that is suspended at least three feet above the ground.

“Water set” means any trap used and anchored in water rather than on land.

R12-4-302. Use of Tags

- A. In addition to meeting requirements prescribed under A.R.S. § 17-331, ~~an individual~~ a person who takes wildlife shall have in possession any tag required for the particular season or hunt area.
- B. A tag obtained in violation of statute or rule is invalid and shall not be used to take, transport, or possess wildlife.
- C. ~~An individual~~ A person who lawfully possesses both a nonpermit-tag and a hunt permit-tag shall not take a genus or species in excess of the bag limit established by Commission Order for that genus or species.
- D. ~~An individual~~ A person shall:
 1. Take and tag only the wildlife identified on the tag ~~and~~.
 2. Use a tag only in the season and hunt for which the tag is valid, as specified by Commission Order.
- E. Except as permitted under R12-4-217, ~~an individual~~ a person shall not:
 1. Allow their tag to be attached to wildlife killed by another ~~individual~~ person,
 2. Allow their tag to be possessed by another ~~individual who is in a hunt area~~ person while taking wildlife,
 3. Allow wildlife killed by that person to be tagged with another person's tag.
 - ~~3.4. Attach their tag to wildlife killed by another individual person,~~
 4. Attach a tag issued to another individual to wildlife, or
 5. Possess a tag issued to another ~~individual~~ person while in a hunt area taking wildlife.
- F. Except as permitted under R12-4-217, immediately after ~~an individual~~ a person kills wildlife, the ~~individual~~ person shall attach the tag to the wildlife carcass in the manner indicated on the tag.
- G. ~~An individual~~ A person who lawfully takes wildlife with a valid tag and authorizes another ~~individual~~ person to possess, transport, or ship the tagged portion of the carcass shall complete the Transportation and Shipping Permit portion of the original tag authorizing the take of that ~~animal~~ wildlife.
- H. If a tag is cut, notched, mutilated, or the Transportation and Shipping Permit portion of the tag is signed or filled out, the tag is no longer valid for the take of wildlife.

R12-4-303. Unlawful Devices, Methods, and Ammunition

- A. In addition to the prohibitions prescribed under A.R.S. §§ 17-301 and 17-309, the following devices, methods, and ammunition are unlawful for taking any wildlife in this state:
 1. ~~An individual~~ A person shall not use any of the following to take wildlife:
 - a. Fully automatic firearms, including firearms capable of selective automatic fire; or
 - b. Tracer, armor-piercing, or full-jacketed ~~ammunition~~ bullets that are not designed for military use to expand upon impact,
 - c. Any smart device as defined under R12-4-301, or
 - d. Any self-guided projectiles.
 2. ~~An individual~~ A person shall not use or possess any of the following while taking wildlife:
 - a. Poisoned projectiles or projectiles that contain explosives or a secondary propellant;
 - b. Pitfalls of greater than 5-gallon size, explosives, poisons, or stupefying substances, except as permitted under A.R.S. § 17-239 or as allowed by a scientific collecting permit issued under A.R.S. § 17-238;
 - c. Any lure, attractant, or cover scent containing any cervid urine; ~~or~~
 - d. Electronic night vision equipment, electronically enhanced light-gathering devices, thermal imaging devices or laser sights projecting a visible light; except for devices such as laser range finders projecting a non-visible light, scopes with self-illuminating reticles, and fiber optic sights with self-illuminating sights or pins that do not project a visible light onto an animal.
 3. ~~An individual~~ A person shall not by any means:
 - a. Hold wildlife at bay other than during daylight hours, unless authorized by Commission Order.
 - b. Injure, confine, ~~or place,~~ or use a tracking device in or on wildlife for the purpose of taking or aiding another individual to ~~in the take of~~ wildlife.
 - c. Place any substance, device, or object in, on, or by any water source to prevent wildlife from using that water source.
 - d. Place any substance in a manner intended to attract bears.
 - e. Use a manual or powered jacking or prying device to take reptiles or amphibians.
 - f. Use dogs to pursue, tree, corner or hold at bay any wildlife for a hunter, unless that hunter is present for the entire hunt.
 - g. Take migratory game birds, except Eurasian ~~Collared~~ collared-doves, ~~using a shotgun larger than 10 gauge, a shotgun of any description capable of holding more than three shells unless it is plugged with a one piece filler that cannot be removed without disassembling the shotgun so that its total capacity does not exceed three shells, electronically amplified bird calls, or baits, as prohibited under 50 CFR 20.21, revised October 1, 2009. The material incorporated by reference in this Section does not include any later amendments or editions. The incorporated material is available at any Department office, online from the Government Printing Office web site www.gpoaccess.gov, or may be ordered from the Superintendent of Documents, U.S. Government Printing Office, 732 N. Capitol St. N.W., Stop IDCC, Washington, D.C. 20401;~~



- i. Using a shotgun larger than 10 gauge, a shotgun of any description capable of holding more than three shells unless it is plugged with a one-piece filler that cannot be removed without disassembling the shotgun so that its total capacity does not exceed three shells;
- ii. Using electronically amplified bird calls or baits;
- iii. By means or aid of any motordriven land, water, or air conveyance, or any sailboat used for the purpose of or resulting in the concentrating, driving, rallying, or stirring up of any migratory bird.
- iv. Activities described under subsections (g)(i) through (g)(iii) are prohibited under 50 C.F.R. 20.21, revised October 1, 2015. The material incorporated by reference in this Section does not include any later amendments or editions. The incorporated material is available at any Department office, online from the Government Printing Office website www.gpoaccess.gov, or may be ordered from the Superintendent of Documents, P.O. Box 979050, St. Louis, MO 63197-9000.
- h. Discharge a ~~pneumatic weapon .30 caliber or larger~~ any of the following devices while taking wildlife within one-fourth mile (440 yards) of an occupied farmhouse or other residence, cabin, lodge or building without permission of the owner or resident;
 - i. Arrow or bolt,
 - ii. Hybrid device, or
 - iii. Pneumatic weapon .35 caliber or larger.
- 4. A person shall not use a live-action trail camera, or images from a live-action trail camera, for the purpose of:
 - a. Taking or aiding in the take of wildlife, or
 - b. Locating wildlife for the purpose of taking or aiding in the take of wildlife.
- 5. A person shall not use images of wildlife produced or transmitted from a satellite or other device that orbits the earth for the purpose of:
 - a. Taking or aiding in the take of wildlife, or
 - b. Locating wildlife for the purpose of taking or aiding in the take of wildlife.
 - c. This subsection does not prohibit the use of mapping systems or programs.
- 4-6. An individual A person shall not use edible or ingestible substances to aid in taking big game. The use of edible or ingestible substances to aid in taking big game is unlawful when:
 - a. An individual A person places edible or ingestible substances for the purpose of attracting or taking big game, or
 - b. An individual A person knowingly takes big game with the aid of edible or ingestible substances placed for the purpose of attracting wildlife to a specific location.
- 5-7. Subsection (A)(4) (A)(6) does not limit Department employees or Department agents in the performance of their official duties.
- 6-8. For the purposes of subsection (A)(4) (A)(6), edible or ingestible substances do not include any of the following:
 - a. Water.
 - b. Salt.
 - c. Salt-based materials produced and manufactured for the livestock industry.
 - d. Nutritional supplements produced and manufactured for the livestock industry and placed during the course of livestock or agricultural operations.

B. It is unlawful for a person who is a prohibited possessor to take wildlife with a deadly weapon or prohibited weapon.

BC. Wildlife taken in violation of this Section is unlawfully taken.

CD. This Section does not apply to any activity allowed under A.R.S. § 17-302, to an individual a person acting within the scope of their official duties as an employee of the state or United States, or as authorized by the Department.

R12-4-304. Lawful Methods for Taking Wild Mammals, Birds, and Reptiles

A. A hybrid device is lawful for the take of wildlife provided all components of the device are authorized for the take of that species under this Section.

B. An individual A person may only use the following methods to take big game when authorized by Commission Order and subject to the restrictions under R12-4-303 and R12-4-318.

- 1. To take antelope:
 - a. Centerfire rifles;
 - b. Muzzleloading rifles;
 - c. All other rifles using black powder or synthetic black powder;
 - d. Centerfire handguns;
 - e. Handguns using black powder or synthetic black powder;
 - f. Shotguns shooting slugs, only;
 - g. Pre-charged pneumatic weapons .35 caliber or larger;
 - h. Bows with a standard pull of 30 or more lbs, using arrows with broadheads no less than 7/8 inch in width with metal cutting edges; and
 - i. Crossbows with a minimum draw weight of 125 lbs, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal cutting edges or bows as described in subsection (A)(1)(h) to be drawn and held with an assisting device.
- 2. To take bear:
 - a. Centerfire rifles;
 - b. Muzzleloading rifles;
 - c. All other rifles using black powder or synthetic black powder;
 - d. Centerfire handguns;
 - e. Handguns using black powder or synthetic black powder Muzzleloading handguns;
 - f. Shotguns shooting slugs, only;



- g. Pre-charged pneumatic weapons .35 caliber or larger;
 - ~~h.~~ Pre-charged pneumatic weapons using arrows or bolts with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges and capable of firing a minimum of 250 feet per second;
 - ~~h-i.~~ Bows with a standard pull of 30 or more ~~lbs~~ pounds, using arrows with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges;
 - ~~i-j.~~ Crossbows with a minimum draw weight of 125 ~~lbs~~ pounds, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges or bows as described in subsection ~~(A)(2)(h)~~ (B)(1)(i) to be drawn and held with an assisting device; and
 - ~~j-k.~~ Pursuit with dogs only between August 1 and December 31, provided the ~~individual person~~ shall immediately kill or release the bear after it is treed, cornered, or held at bay. For the purpose of this subsection, "release" means the ~~individual person~~ removes the dogs from the area so the bear can escape on its own after it is treed, cornered, or held at bay.
32. To take bighorn sheep:
- a. Centerfire rifles;
 - b. Muzzleloading rifles;
 - c. All other rifles using black powder or synthetic black powder;
 - d. Centerfire handguns;
 - e. ~~Handguns using black powder or synthetic black powder~~ Muzzleloading handguns;
 - f. Shotguns shooting slugs, only;
 - g. Pre-charged pneumatic weapons .35 caliber or larger;
 - ~~h.~~ Pre-charged pneumatic weapons using arrows or bolts with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges and capable of firing a minimum of 250 feet per second;
 - ~~h-i.~~ Bows with a standard pull of 30 or more ~~lbs~~ pounds, using arrows with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges; and
 - ~~i-j.~~ Crossbows with a minimum draw weight of 125 ~~lbs~~ pounds, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges or bows as described in subsection ~~(A)(3)(h)~~ (B)(2)(i) to be drawn and held with an assisting device.
43. To take ~~buffalo~~ bison:
- a. ~~State-wide~~ Statewide, except for the ~~game~~ management units identified under subsection ~~(A)(4)(b)~~ (B)(3)(b):
 - i. Centerfire rifles;
 - ii. Muzzleloading rifles;
 - iii. All other rifles using black powder or synthetic black powder;
 - iv. Centerfire handguns no less than .41 Magnum or centerfire handguns with an overall cartridge length of no less than two inches;
 - v. Pre-charged pneumatic weapons 40 caliber or larger a minimum of 500 foot pounds of energy;
 - vi. Pre-charged pneumatic weapons using arrows or bolts with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges and capable of firing a minimum of 250 feet per second; and
 - ~~vii.~~ Bows with a standard pull of 40 or more lbs pounds, using arrows with broadheads of no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges; and
 - ~~viii.~~ Crossbows with a minimum draw weight of 125 lbs pounds, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges or bows as described in subsection (A)(4)(a)(-) (B)(3)(a)(vi) to be drawn and held with an assisting device.
 - b. In ~~game management units~~ Management Units 5A and 5B:
 - i. Centerfire rifles,
 - ii. Muzzleloading rifles, and
 - iii. All other rifles using black powder or synthetic black powder.
54. To take deer:
- a. Centerfire rifles;
 - b. Muzzleloading rifles;
 - c. All other rifles using black powder or synthetic black powder;
 - d. Centerfire handguns;
 - e. ~~Handguns using black powder or synthetic black powder~~ Muzzleloading handguns;
 - f. Shotguns shooting slugs, only;
 - g. Pre-charged pneumatic weapons .35 caliber or larger;
 - ~~h.~~ Pre-charged pneumatic weapons using arrows or bolts with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges and capable of firing a minimum of 250 feet per second;
 - ~~h-i.~~ Bows with a standard pull of 30 or more ~~lbs~~ pounds, using arrows with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges; and
 - ~~i-j.~~ Crossbows with a minimum draw weight of 125 ~~lbs~~ pounds, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges or bows as described in subsection ~~(A)(5)(h)~~ (B)(4)(i) to be drawn and held with an assisting device.
65. To take elk:
- a. Centerfire rifles;
 - b. Muzzleloading rifles;
 - c. All other rifles using black powder or synthetic black powder;
 - d. Centerfire handguns;
 - e. ~~Handguns using black powder or synthetic black powder~~ Muzzleloading handguns;



- f. Shotguns shooting slugs, only;
 - g. Pre-charged pneumatic weapons 40 caliber or larger and capable of firing a minimum of 500 foot pounds of energy;
 - h. Pre-charged pneumatic weapons using arrows or bolts with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges and capable of firing a minimum of 250 feet per second;
 - gi. Bows with a standard pull of 30 or more ~~lbs~~ pounds, using arrows with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges; and
 - hj. Crossbows with a minimum draw weight of 125 ~~lbs~~ pounds, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges or bows as described in subsection ~~(A)(6)(g)~~ (B)(5)(h) to be drawn and held with an assisting device.
76. To take javelina:
- a. Centerfire rifles;
 - b. Muzzleloading rifles;
 - c. All other rifles using black powder or synthetic black powder;
 - d. Centerfire handguns;
 - e. ~~Handguns using black powder or synthetic black powder~~ Muzzleloading handguns;
 - f. Shotguns shooting slugs, only;
 - g. Pre-charged pneumatic weapons .35 caliber or larger;
 - h. Pre-charged pneumatic weapons using arrows or bolts with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges and capable of firing a minimum of 250 feet per second;
 - hi. Bows with a standard pull of 30 or more ~~lbs~~ pounds, using arrows with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges;
 - ij. Crossbows with a minimum draw weight of 125 ~~lbs~~ pounds, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges or bows as described in subsection ~~(A)(7)(h)~~ (B)(6)(i) to be drawn and held with an assisting device;
 - jk. .22 rimfire magnum rifles; and
 - kl. 5 mm rimfire magnum rifles.
87. To take mountain lion:
- a. Centerfire rifles;
 - b. Muzzleloading rifles;
 - c. All other rifles using black powder or synthetic black powder;
 - d. Centerfire handguns;
 - e. ~~Handguns using black powder or synthetic black powder~~ Muzzleloading handguns;
 - f. Shotguns shooting slugs or shot;
 - g. Pre-charged pneumatic weapons .35 caliber or larger;
 - h. Pre-charged pneumatic weapons using arrows or bolts with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges and capable of firing a minimum of 250 feet per second;
 - hi. Bows with a standard pull of 30 or more ~~lbs~~ pounds, using arrows with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges;
 - ij. Crossbows with a minimum draw weight of 125 ~~lbs~~ pounds, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges or bows as described in subsection ~~(A)(8)(h)~~ (B)(7)(i) to be drawn and held with an assisting device;
 - jk. Artificial light, during seasons with day-long hours, provided the light is not attached to or operated from a motor vehicle, motorized watercraft, watercraft under sail, or floating object towed by a motorized watercraft or a watercraft under sail; and
 - kl. Pursuit with dogs, provided the ~~individual person~~ shall immediately kill or release the mountain lion after it is treed, cornered, or held at bay. For the purpose of this subsection, "release" means the ~~individual person~~ removes the dogs from the area so the mountain lion can escape on its own after it is treed, cornered, or held at bay.
8. To take pronghorn antelope:
- a. Centerfire rifles;
 - b. Muzzleloading rifles;
 - c. All other rifles using black powder or synthetic black powder;
 - d. Centerfire handguns;
 - e. Muzzleloading handguns;
 - f. Shotguns shooting slugs, only;
 - g. Pre-charged pneumatic weapons .35 caliber or larger;
 - h. Pre-charged pneumatic weapons using arrows or bolts with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges and capable of firing a minimum of 250 feet per second;
 - i. Bows with a standard pull of 30 or more pounds, using arrows with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges; and
 - j. Crossbows with a minimum draw weight of 125 pounds, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges or bows as described in subsection (B)(8)(i) to be drawn and held with an assisting device.
9. To take turkey:
- a. Shotguns shooting shot;
 - b. Bows with a standard pull of 30 or more ~~lbs~~ pounds, using arrows with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges; and



- c. Crossbows with a minimum draw weight of 125 ~~lbs~~ pounds, using bolts with a minimum length of 16 inches and broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges or bows as described in subsection ~~(A)(9)(b)~~ (B)(9)(b) to be drawn and held with an assisting device.
- d. Pre-charged pneumatic weapons using arrows or bolts with broadheads no less than 7/8 inch in width with metal, ceramic-coated metal, or ceramic cutting edges and capable of firing a minimum of 250 feet per second;
- BC.** ~~An individual~~ A person may only use the following methods to take small game, when authorized by Commission Order and subject to the restrictions under R12-4-303 ~~and~~ R12-4-318, and R12-4-422.
1. To take cottontail rabbits and tree squirrels:
 - a. Firearms,
 - b. Bow and arrow,
 - c. Crossbow,
 - d. Pneumatic weapons,
 - e. Slingshots,
 - f. Hand-held projectiles,
 - g. Falconry, and
 - h. Dogs.
 2. To take all upland game birds and Eurasian ~~Collared~~ collared-dove:
 - a. Bow and arrow;
 - b. Falconry;
 - c. Pneumatic weapons;
 - d. Shotguns shooting shot, only;
 - e. Handguns shooting shot, only;
 - f. Crossbow;
 - g. Slingshot;
 - h. Hand-held projectiles; and
 - i. Dogs.
 3. To take migratory game birds, except Eurasian ~~Collared~~ collared-dove:
 - a. Bow and arrow;
 - b. Crossbow;
 - c. Falconry;
 - d. Dogs;
 - e. Shotguns shooting shot:
 - i. Ten gauge or smaller, except that lead shot shall not be used or possessed while taking ducks, geese, swans, mergansers, common moorhens, or coots; and
 - ii. Incapable of holding more than a total of three shells; as prescribed under 50 ~~CFR C.F.R.~~ CFR C.F.R. 20.21, published October 1, ~~2009~~ 2015. The material incorporated by reference in this subsection does not include any later amendments or editions. The material is available at any Department office, online from the Government Printing Office ~~web site~~ website www.gpoaccess.gov, or may be ordered from the Superintendent of Documents, ~~U.S. Government Printing Office, 732 N. Capitol St. N.W., Stop: IDCC, Washington, D.C. 20401~~ P.O. Box 979050, St. Louis, MO 63197-9000.
- CD.** ~~An individual~~ A person may take waterfowl from any watercraft, except a sinkbox, subject to the following conditions:
1. The motor is shut off, the sail is furled, as applicable, and any progress from a motor or sail has ceased;
 2. The watercraft may be:
 - a. Adrift as a result of current or wind action;
 - b. Beached;
 - c. Moored;
 - d. Resting at anchor; or
 - e. Propelled by paddle, oars, or pole; and
 3. The ~~individual~~ person may only use the watercraft under power to retrieve dead or crippled waterfowl; shooting is prohibited while the watercraft is underway under power.
- DE.** ~~An individual~~ A person may take predatory and ~~fur-bearing~~ fur-bearing animals by using the following methods, when authorized by Commission Order and subject to the restrictions under R12-4-303 and R12-4-318:
1. Firearms;
 2. Pre-charged pneumatic weapons .22 caliber or larger;
 3. Bow and arrow;
 4. Crossbow;
 5. Traps not prohibited under R12-4-307;
 6. Artificial light while taking raccoon provided the light is not attached to or operated from a motor vehicle, motorized watercraft, watercraft under sail, or floating object towed by a motorized watercraft or a watercraft under sail;
 7. Artificial light while taking coyote during seasons with day-long hours, provided the light is not attached to or operated from a motor vehicle, motorized watercraft, watercraft under sail, or floating object towed by a motorized watercraft or a watercraft under sail; and
 8. Dogs.
- EF.** ~~An individual~~ A person may take nongame mammals and birds by any method authorized by Commission Order and not prohibited under R12-4-303 ~~or~~ R12-4-318, and R12-4-422, subject to the following restrictions. ~~An individual~~ A person:
1. Shall not take nongame mammals and birds using foothold traps;
 2. Shall check pitfall traps of any size daily, release non-target species, remove pitfalls when no longer in use, and fill any holes;



- 3. Shall not use firearms at night; and
- 4. May use artificial light while taking nongame mammals and birds, if the light is not attached to or operated from a motor vehicle, motorized watercraft, watercraft under sail, or floating object towed by a motorized watercraft or a watercraft under sail.

FG. ~~An individual~~ A person may take reptiles by any method not prohibited under R12-4-303 or R12-4-318 subject to the following restrictions. ~~An individual~~ A person:

- 1. Shall check pitfall traps of any size daily, release non-target species, remove pitfalls when no longer in use, and fill any holes;
- 2. Shall not use firearms at night; and
- 3. May use artificial light while taking reptiles provided the light is not attached to or operated from a motor vehicle, motorized watercraft, watercraft under sail, or floating object towed by a motorized watercraft or a watercraft under sail.

R12-4-305. Possessing, Transporting, Importing, Exporting, and Selling Carcasses or Parts of Wildlife

- A. ~~An individual~~ A person shall ensure that evidence of legality remains with the carcass or parts of a carcass of any ~~wild mammal, bird, or reptile~~ wildlife that the ~~individual~~ person possesses, transports, or imports until arrival at the ~~individual's~~ person's permanent abode, a commercial processing plant, or the place where the wildlife is to be consumed.
- B. In addition to the requirement ~~in~~ under subsection (A), ~~an individual~~ a person possessing or transporting the following wildlife shall ensure each:
 - 1. Big game animal, sandhill crane, and pheasant has the required valid tag attached ~~as prescribed under R12-4-302~~ in the manner indicated on the tag;
 - 2. Migratory game bird, except sandhill cranes, has one fully feathered wing attached;
 - 3. Sandhill crane and Eurasian-collared dove has either the fully feathered head or one fully feathered wing attached; ~~and~~
 - 4. Quail has attached a fully feathered head, or a fully feathered wing, or a leg with foot attached, when the current Commission Order has established separate bag or possession limits for any species of quail; and
 - 5. Freshwater fish has the head, tail, or skin attached so the species can be identified and the total number and required length determined.
- C. ~~An individual~~ A person who has lawfully taken wildlife that requires a valid tag when prescribed by the Commission may authorize its transportation or shipment by completing and signing the Transportation and Shipping Permit portion of the valid tag for that animal. A separate Transportation and Shipping Permit issued by the Department is necessary to transport or ship to another state or country any big game taken with a resident license. Under A.R.S. § 17-372(B), ~~an individual~~ a person may ship other lawfully taken wildlife by common carrier after obtaining a valid Transportation and Shipping Permit issued by the Department. ~~The individual~~ person shall provide the following information ~~on the permit form~~:
 - 1. Number and description of the wildlife to be transported or shipped;
 - 2. Name, address, license number, and license class of the ~~individual~~ person who took the wildlife;
 - 3. Tag number;
 - 4. Name and address of the ~~individual~~ person receiving a portion of the carcass of the wildlife as authorized under subsection (D), if applicable;
 - 5. Address of destination where the wildlife is to be transported or shipped; and
 - 6. Name and address of transporter or shipper.
- D. ~~An individual~~ A person who lawfully takes wildlife under a tag may authorize another individual to possess the head or carcass of the wildlife by separating and attaching the tag as prescribed under R12-4-302.
- E. ~~An individual~~ A person who receives a portion of the wildlife shall provide the identity of the ~~individual~~ person who took and gave the portion of the wildlife upon request to any peace officer, wildlife manager, or game ranger.
- F. ~~An individual~~ A person shall not possess the horns of a bighorn sheep, taken by a hunter in this state, unless the horns are marked or sealed as ~~prescribed~~ established under R12-4-308.
- G. Except as provided under R12-4-307, before ~~an individual~~ a person may sell, offer for sale, or export the raw pelt or unskinned carcass of a bobcat taken in this state, the ~~individual~~ person shall:
 - 1. Present the bobcat for inspection at any Department office, and
 - 2. Purchase a bobcat seal by paying the fee established under R12-4-102 at any Department office or other location as determined and published by the Department. Department personnel or an authorized agent shall attach and lock the bobcat seal only to a pelt or unskinned carcass presented with a validated transportation tag.
- H. ~~An individual~~ A person who takes bear or mountain lion under A.R.S. § 17-302 ~~during a closed season~~ may retain the carcass of the wildlife if the ~~individual~~ person has a valid hunting license and the carcass is immediately tagged with a nonpermit-tag or a valid hunt permit-tag as required under R12-4-114 and R12-4-302, ~~unless provided~~ the individual person has already taken not reached the applicable bag limit for that big game animal. An animal retained under this subsection shall count ~~towards~~ toward the applicable bag limit for bear or mountain lion as authorized by Commission Order. The ~~individual~~ person shall comply with inspection and reporting requirements established under R12-4-308.
- I. ~~An individual~~ A person may possess, transport, or import only the following portions of a cervid lawfully taken in another state or country:
 - 1. Boneless portions of meat, or meat that has been cut and packaged either personally or commercially;
 - 2. Clean hides and capes with no skull or soft tissue attached, except as required for proof of legality;
 - 3. Clean skulls with antlers, clean skull plates, or antlers with no meat or soft tissue attached, this includes velvet antlers;
 - 4. Finished taxidermy mounts or products; and
 - 5. Upper canine teeth with no meat or tissue attached.
- J. A private game farm license holder may transport a cervid lawfully killed or slaughtered at the license holder's game farm to a licensed meat processor.
- K. ~~An individual~~ A person may possess or transport only the following portions of a cervid lawfully killed or slaughtered at a private game farm authorized under R12-4-413:
 - 1. Boneless portions of meat, or meat that has been cut and packaged either personally or commercially;



2. Clean hides and capes with no skull or soft tissue attached;
 3. Clean skulls with antlers, clean skull plates, or antlers with no meat or soft tissue attached, this includes velvet antlers;
 4. Finished taxidermy mounts or products; and
 5. Upper canine teeth with no meat or tissue attached.
- L.** ~~An individual~~ A person who obtains buffalo bison meat as authorized under R12-4-306 may sell the meat.
- M.** Except for cervids, which are subject to requirements established under subsections (I), (J), and (K), ~~an individual~~ a person may import into this state the carcasses or parts of wildlife, including aquatic wildlife, lawfully taken in another state or country if transported and exported in accordance with the laws of the state or country of origin.
- N.** ~~An individual in possession of or transporting the carcass of any freshwater fish taken within this state shall ensure that the head, tail, or skin is attached so that the species can be identified, numbers counted, and any required length determined.~~
- O.** ~~An individual~~ A person shall not transport live crayfish from the site where taken, except as permitted under R12-4-316.
- P.** ~~An individual~~ A person in possession of a common carp (*Cyprinus carpio*), buffalofish (*Ictiobus* spp.), or crayfish (families *Astacidae*, *Cambaridae*, and *Parastacidae*) carcass taken under Commission Order may sell the carcass.

R12-4-306. **Buffalo Bison Hunt Requirements**

- A.** When authorized by Commission Order, the Department shall conduct a hunt to harvest buffalo bison from the state's buffalo bison herds.
- B.** A hunter with a buffalo bison permit-tag or nonpermit-tag shall, when required:
1. Provide a signed written acknowledgment that the hunter received, read, understands, and agrees to comply with the requirements of this Section.
 2. Hunt in the order scheduled.
 2. ~~Be accompanied by an authorized Department employee, when required, and~~
 3. Be accompanied by an authorized Department employee who:
 - a. Shall designate the bison to be harvested, and
 - b. May assist in taking the bison if the hunter fails to dispatch a wounded bison within a reasonable period of time.
 - 3.4. ~~Take only the buffalo bison designated by the Department employee, when required.~~
- C.** ~~For the House Rock Herd (Units 12A, 12B, and 13A): when required by the Department, a hunter with a nonpermit tag shall:~~
1. ~~Hunt in the order scheduled.~~
 2. ~~Be accompanied by a Department employee who:~~
 - a. ~~Shall designate the buffalo to be harvested, and~~
 - b. ~~May assist in taking the buffalo if the hunter fails to dispatch a wounded buffalo within a reasonable period.~~
- D.** ~~For the Raymond Herd (Units 5A and 5B):~~
1. ~~A hunter with a permit tag shall:~~
 - a. ~~Hunt in the order scheduled, and~~
 - b. ~~Be accompanied by an authorized Department employee who:~~
 - i. ~~Shall designate the buffalo to be harvested, and~~
 - ii. ~~May assist in taking the buffalo if the hunter fails to dispatch a wounded buffalo within a reasonable period.~~
 2. ~~When required by the Department, a hunter with a nonpermit tag shall:~~
 - a. ~~Hunt in the order scheduled,~~
 - b. ~~Be accompanied by a Department employee who:~~
 - i. ~~Shall designate the buffalo to be harvested.~~
 - ii. ~~May assist in taking the buffalo if the hunter fails to dispatch a wounded buffalo within a reasonable period.~~
- E.** A hunter issued a buffalo bison permit-tag or ~~non-permit~~ nonpermit-tag shall check out no more than three days after the end of the hunt, regardless of whether the hunter ~~was successful, unsuccessful, harvested a bison, did not harvest a bison,~~ or did not participate in a buffalo the bison hunt.
1. House Rock Herd (Units 12A, 12B, and 13A): a hunter may check out either in person, electronically, or by telephone ~~at the House Rock Wildlife Area headquarters, with the Department's Flagstaff regional office or Jacob Lake Check station,~~ when open during deer season, or the Department's Flagstaff regional office.
 2. Raymond Herd (Units 5A and 5B):
 - a. ~~A successful hunter shall may check out either in person, electronically, or by telephone at with the Department's Flagstaff regional office, or when required, with the Raymond Wildlife Area headquarters or the Department's Flagstaff regional office. The hunter shall present the buffalo harvested bison to the Department for the purpose of gathering biological data.~~
 - b. ~~An unsuccessful hunter shall check out by telephone at the Raymond Wildlife Area headquarters or the Department's Flagstaff regional office. A hunter may be required to present the harvested bison to the Department for the purpose of gathering biological data when the bison was taken in Units 5A or 5B and a Department employee did not accompany the hunter during the bison hunt.~~
 3. At the time of ~~check-out~~ check out, the hunter shall provide all of the following information:
 - a. Hunter's name,
 - b. Hunter's contact number,
 - c. Tag number,
 - d. Sex of buffalo bison taken,
 - e. Age of the buffalo bison taken: adult or yearling,
 - f. Number of days hunted, and
 - g. Number of buffalo bison seen while hunting.
 4. ~~When accompanied by an An~~ An authorized Department employee who accompanies the hunter, the employee shall conduct the check-out check out at the end of the hunt.



FD. Failure to comply with the requirements of this Section shall result in the invalidation of the hunter's permit-tag or nonpermit-tag, consistent with the written acknowledgment signed and agreed to by the hunter.

R12-4-307. Trapping Regulations, Licensing; Methods; Tagging of Bobcat Pelts

- A. An Arizona trapping license permits ~~an individual~~ a person to trap predatory and fur-bearing animals. ~~The Department shall issue a registration number to a trapper and enter the number on the trapping license at the time the trapper purchases the license. The trapper registration number is not transferable.~~
- B. A trapping license is required for any ~~individual~~ person ~~14~~ 10 years of age and older. ~~An individual~~ A person under the age of ~~14~~ 10 is not required to purchase a trapping license, but shall apply for and obtain a registration number. The trapper registration number is not transferable.
- C. ~~An individual~~ A person born on or after January 1, 1967 shall successfully complete a Department-approved trapping education course before applying for a trapping license.
- D. ~~An individual~~ A person applying for a trapping registration number or trapping license shall pay the applicable fees established under R12-4-102.
- E. ~~An individual~~ A person applying for a trapping registration number or trapping license shall apply using a form furnished by the Department. The form is available at any Department office and online at www.azgfd.gov. The ~~individual~~ person shall provide all of the following information on the form:
 - 1. ~~Applicant's:~~
 - a. ~~Full name, address, and telephone number;~~
 - b. ~~Date of birth and physical description;~~
 - 2. ~~Identification number assigned by the Department;~~
 - 1. The applicant's personal information:
 - a. Name;
 - b. Date of birth;
 - c. Physical description, to include the applicant's eye color, hair color, height, and weight;
 - d. Department identification number;
 - e. Residency status and number of years of residency immediately preceding application, when applicable;
 - f. Mailing address, when applicable;
 - g. Physical address;
 - h. Telephone number, when available; and
 - i. E-mail address, when available;
 - 3-2. Category of license:
 - a. Resident,
 - b. Nonresident, or
 - c. Juvenile Youth, and
 - 43. The applicant's signature and date.
- F. A trapper may only trap predatory and fur-bearing animals during trapping seasons established by Commission Order.
- G. A trapper shall:
 - 1. Inspect traps daily;
 - 2. Kill or release all predatory and fur-bearing animals;
 - 3. Possess a choke restraint device that enables the trapper to release a javelina from a trap when trapping in a javelina hunt unit, as designated by Commission Order;
 - 4. Possess a device that is designed or manufactured to restrain a trapped animal while it is being removed from a trap when its release is required ~~by~~ under this Section; and
 - 5. Release, without additional injury, all animals that cannot lawfully be taken by trap.
 - 6. Subsections (G)(3) and (G)(4) do not apply when the trapper is using a confinement trap.
- H. A trapper shall not:
 - 1. Bait a confinement trap with:
 - a. A live animal;
 - b. Any edible parts of small game, big game, or game fish; or
 - c. Any part of any game bird or nongame bird.
 - 2. Set any trap within:
 - a. One-half mile (880 yards) of any of the following areas developed for public use:
 - i. Boat ram or launching area,
 - ii. Camping area,
 - iii. Picnic area, ~~or~~
 - iv. Roadside rest area, or
 - v. Developed wildlife viewing platform.
 - b. One-half mile of any occupied ~~residence~~ farmhouse or other residence, cabin, lodge or building without permission of the owner or resident.
 - c. One-hundred yards of an interstate highway or any other highway maintained by the Arizona Department of Transportation.
 - d. Fifty feet of any trail maintained for public use by a government agency.
 - e. Seventy-five feet of any other road as defined under A.R.S. § 17-101.
 - f. Subsections (H)(2)(b), (H)(2)(c), (H)(2)(d), and (H)(2)(e) do not apply when the trapper is using a confinement trap.
 - 3. Set a foothold trap within 30 feet of sight-exposed bait.
 - 4. Use any:



- a. Body-gripping or other instant kill trap with an open jaw spread that exceeds 5 inches for any land set or 10 inches for any water set;
 - b. Foothold trap with an open jaw spread that exceeds 7 1/2 inches for any water set;
 - c. Snare, unless authorized under subsection (I);
 - d. Trap with an open jaw spread that exceeds 6 1/2 inches for any land set; or
 - e. Trap with teeth.
- I. A trapper who uses a foothold trap to take wildlife with a land set shall use commercially manufactured traps that meet the following specifications:
1. A padded or rubber-jawed trap or an unpadded trap with jaws permanently offset to a minimum of 3/16 inch and a device that allows for pan tension adjustment;
 2. A foothold trap that captures wildlife by means of an enclosed bar or spring designed to prevent the capture of non-targeted wildlife or domestic animals; or
 3. A powered cable device with an inside frame hinge width no wider than 6 inches, a cable loop stop size of at least 2 inches in diameter to prevent capture of small non-target species, and a device that allows for a pan tension adjustment.
- J. A trapper who uses a foothold trap to take wildlife with a land set shall ensure that the trap has an anchor chain equipped with at least two swivels as follows:
1. An anchor chain 12 inches or less in length shall have a swivel attached at each end.
 2. An anchor chain greater than 12 inches in length shall have one swivel attached at the trap and one swivel attached within 12 inches of the trap. The anchor chain shall be equipped with a shock-absorbing spring that requires less than 40 pounds of force to extend or open the spring.
- K. A trapper shall ensure that each trap has either the name and address or the registration number of the trapper marked on a metal tag attached to the trap. The registration number assigned by the Department is the only acceptable registration number.
- L. A trapper shall immediately attach a valid bobcat transportation tag to the pelt or unskinned carcass of a bobcat taken in this state. The trapper shall validate the transportation tag by providing all of the following information on the bobcat transportation tag:
1. Current trapping license number,
 2. ~~Game management~~ Management unit where the bobcat was taken,
 3. Sex of the bobcat, and
 4. Method by which the bobcat was taken.
- M. The Department shall provide transportation tags with each trapping license. Additional transportation tags are available at any Department office at no charge.
- N. A trapper shall ensure that all bobcats taken in this state have a bobcat seal attached and locked either through the mouth and an eye opening or through both eye openings no later than ~~10 days after the close of trapping season~~ April 1 of each year.
1. When available, bobcat seals are issued on a first-come, first-served basis at Department offices and other locations at those times and places as determined and published by the Department.
 2. The trapper shall pay the bobcat seal fee established under R12-4-102.
 3. Department personnel or an authorized agent shall attach and lock a bobcat seal only to a pelt or unskinned carcass presented with a validated transportation tag and a complete lower jaw identified with labels provided with the transportation tag. Department personnel or authorized agents shall collect the transportation tags and jaws before attaching the bobcat seal.
- O. Department personnel shall attach a bobcat seal to a bobcat pelt seized under A.R.S. § 17-211(E)(4) before disposal by the Department to the public.
- P. A licensed trapper shall file the annual report prescribed under A.R.S. § 17-361(D). The report form is available at any Department office and online at www.azgfd.gov.
1. The trapper shall submit the report to Arizona Game and Fish Department, ~~Game~~ Terrestrial Wildlife Branch, 5000 W. Carefree Highway, Phoenix, AZ 85086 by April 1 of each year.
 2. A report is required even when trapping activities were not conducted. ~~The report form is available at any Department office and online at www.azgfd.gov.~~
 3. The Department shall deny a trapping license to any trapper who fails to submit an annual report until the trapper complies with reporting requirements.
- Q. Persons suffering property loss or damage due to wildlife and who take responsive measures as permitted under A.R.S. §§ 17-239 and 17-302 are exempt from this Section. This exemption does not authorize any form of trapping prohibited under A.R.S. § 17-301.

R12-4-308. Wildlife Inspections, Check Stations, and Roadblocks

- A. The Department has the authority to establish mandatory wildlife check stations.
1. The Department shall publish in the Commission Order establishing the season the:
 - a. Location,
 - b. Check in requirements, and
 - c. ~~Check out~~ Check out requirements for that specific season.
 2. The Department shall ensure a wildlife check station with a published:
 - a. Check in requirement is open:
 - i. 8:00 a.m. the day before the season until 8:00 p.m. the first day of the season, and
 - ii. 8:00 a.m. to 8:00 p.m. during each day of the season.
 - b. ~~Check out~~ Check out requirement is open:
 - i. 8:00 a.m. to 8:00 p.m. during each day of the season, and
 - ii. Until 12:00 ~~noon~~ p.m. on the day after the close of the season.
 3. A hunter shall:
 - a. Check in at a wildlife check station in person before hunting when the Department includes a check in requirement in the Commission Order for that season;



- b. Check out at a wildlife check station in person after hunting when the Department includes a ~~check-out~~ check out requirement in the Commission Order for that season and shall:
 - i. Present for inspection any wildlife taken; and
 - ii. Display any license, tag, or permit required for taking or transporting wildlife.
- B. The Department may conduct inspections of lawfully taken wildlife at the Department's Phoenix and regional offices or designated locations during the posted business hours.
 - 1. A bighorn sheep hunter shall check out either in person or by designee within three days after the close of the season. The hunter or designee shall submit the intact horns and skull for inspection and photographing. A Department representative shall affix a mark or seal to one horn of each bighorn sheep lawfully taken under Commission Order. It is unlawful for any person to remove, alter, or obliterate the mark or seal.
 - 2. A ~~successful hunter who harvests a~~ bear or mountain lion ~~hunter~~ shall:
 - a. Report information about the kill to the Department either in person or by telephone within 48 hours of taking the wildlife. The report shall include the:
 - i. Name of the hunter,
 - ii. Hunter's hunting license number,
 - iii. Sex of the wildlife taken,
 - iv. Management unit where the wildlife was taken,
 - v. Telephone number where the hunter can be reached for additional information, and
 - vi. Any additional information required by the Department.
 - b. Present either in person or by designee the skull, hide, and attached proof of sex for inspection within 10 days of taking the wildlife. If a hunter freezes the skull or hide before presenting it for inspection, the hunter shall prop the jaw open to allow access to the teeth and ensure that the attached proof of sex is identifiable and accessible.
 - 3. For seasons other than bear, bighorn sheep, or mountain lion, ~~where a hunter who harvests wildlife for which~~ a harvest objective is established, ~~a successful hunter~~ shall report information about the kill either in person or by telephone within 48 hours of taking the wildlife. The report shall include the information required under subsection (B)(2)(a).
- C. The Director may establish vehicle roadblocks at specific locations when necessary to ensure compliance with applicable wildlife laws. Any occupant of a vehicle at a roadblock shall, upon request, present for inspection all wildlife in possession, and ~~produce and display any license, tag, stamp, or permit required for taking or transporting wildlife~~ provide evidence of legality as defined under R12-4-301.
- D. This Section does not limit the game ranger or wildlife manager's authority to conduct stops, searches, and inspections authorized under A.R.S. §§ 17-211(E), 17-250(A)(4), and 17-331, or to establish voluntary wildlife survey stations to gather biological information.

R12-4-309. Authorization for Use of Drugs on Wildlife

- A. A person shall not administer any drug to any wildlife under the jurisdiction of the state, including but not limited to drugs used for fertility control, disease prevention or treatment, immobilization, or growth stimulation without written authorization from the Department or as otherwise provided under subsection (E). This authorization does not:
 - 1. Exempt a person from any state or federal statute, rule, or regulation, or any municipal or county code or ordinance; or
 - 2. Authorize a person to engage in any activity using federally protected wildlife.
- B. A person requesting written authorization for the use of drugs on wildlife shall submit the request in writing to the Department at 5000 W. Carefree Hwy Highway, Phoenix, AZ 85086 and at least 120 days before the anticipated start date of the activity ~~and provide.~~ The written request shall include all of the following:
 - 1. A plan that includes:
 - a. The purpose and need for the proposed activity;
 - b. A clear statement of the objectives; for fertility control the statement shall include the target wildlife population goals or densities and the anticipated time-frame for meeting these objectives;
 - c. A description of the agent, drug, or method ~~including federal approvals or permits obtained, as applicable,~~ and any mandated labeling restrictions or limitations designed to reduce or minimize detrimental effects to wildlife and humans;
 - ~~d. Required approvals, including, but not limited to, any federal or state agency approvals for specific use;~~
 - ~~e.d.~~ Citations of published scientific literature documenting field studies on the efficacy and safety for both target and non-target species, including predators, scavengers, and humans;
 - ~~f.e.~~ A description of the activity area;
 - ~~g.f.~~ A description of the target species population and current status;
 - ~~h.g.~~ A description of the field methodology for delivery that includes the following, as applicable:
 - i. Timing,
 - ii. Sex and number of animals to be treated,
 - iii. Percentage of the population to be treated,
 - iv. Calculated population effect, and
 - v. Short and long term monitoring and evaluation procedures.
 - 2. Documentation regarding the experience and credentials of the applicant or the applicant's agents as it applies to the requested activity;
 - 3. ~~Written endorsement from the agency or institution; required when the applicant is a government agency, university, or other institution; and~~
 - 4.3. ~~Written permission from landowners or lessees in all locations where the drug will be administered; and~~
 - 4. ~~Written endorsement from the agency or institution; required when the applicant is a government agency, university, or other institution. The person signing the written endorsement shall have the authority to execute the written endorsement on behalf of the agency or institution.~~



- C. The Department shall notify the applicant of the Department's decision to grant or deny the request within 90 days. The Department has the authority to place conditions on the written authorization regarding:
1. Locations and time-frames,
 2. Drugs and methodology,
 3. Limitations,
 4. Reporting requirements, and
 5. Any other conditions deemed necessary by the Department.
- D. A person with authorization shall:
1. Carry written authorization while engaged in the activity and exhibit it upon request to any peace officer, wildlife manager or game ranger;
 2. Allow Department personnel to be present to monitor activities for compliance, public safety, and proper treatment of animals;
 3. Adhere to all drug label restrictions and precautions;
 4. Provide an annual and final report:
 - a. The annual report ~~must~~ shall include the number of animals treated, the level of treatment effect obtained to date, and any problems including mortalities or morbidities of target animals. The person shall submit the annual report to the Department by January 31 of each year or as otherwise specified in the written authorization.
 - b. The final report ~~must~~ shall include the end results, including the number of wildlife treated and treatment effects on target and non-target wildlife, including mortalities, morbidities, and reproductive rate changes. The person shall submit the final report to the Department no later than 90 days after the completion of the project for which the permit was issued.
 5. Comply with all conditions and requirements set forth in the written authorization.
- E. This Section does not prohibit the treatment of wildlife by a licensed veterinarian or holder of a special license in accordance with ~~R12-4-407(A)(2)~~ R12-4-407(B)(2) and (8), ~~R12-4-428(B)(13)~~, R12-4-413(K)(5), R12-4-420(J)(3), activities as authorized under R12-4-418, R12-4-420, R12-4-421, and R12-4-423, ~~an individual~~ a person exempt from special licensing under R12-4-407(A)(4) and (5), or reasonable lethal removal activities for wildlife control as authorized under A.R.S. § 17-239(A).
- F. This Section does not limit:
1. Department employees or Department agents in the performance of their official duties related to wildlife management,
 2. The practices of aquaculture facilities administered by the ~~US~~ U.S. Fish and Wildlife Service, and commercial aquaculture facilities operating under a valid license from the Arizona Department of Agriculture, or
 3. The use of supplements or drugs as a part of conventional livestock operations where those supplements may incidentally be consumed by wildlife.
- G. The Department shall take possession of and dispose of any remaining wildlife drugs administered in violation of this Section and any devices and paraphernalia used to administer those drugs, as authorized under A.R.S. §§ 17-211(E), 17-231(A), and 17-240(B).
- H.** Require the person with authorization to indemnify the Department against any injury or damage resulting from the use of animal drugs.

R12-4-310. Fishing Permits

- A. The Department may issue a fishing permit to state, county, or municipal agencies or departments and to nonprofit organizations ~~licensed by or contracted with the Department of Economic Security or Department of Health Services~~, whose primary purpose is to provide ~~physical or mental rehabilitation or training~~ treatment and care for ~~individuals~~ persons with physical, developmental, or mental disabilities.
- B. The permit:
1. Is valid for ~~the any~~ two days ~~specified on the permit~~ within a 30 day period;
 2. Authorizes ~~up to 20 individuals~~ persons with physical, developmental, or mental disabilities to fish without a fishing license upon any public waters except that fishing in the waters of the Colorado River is restricted to fishing from the Arizona shoreline only, unless the persons fishing under the authority of the permit also possess a valid Colorado River stamp from the adjacent state; and
 3. Does not exempt ~~individuals~~ persons fishing under the authority of the permit from compliance with other statutes, Commission Orders, and rules not contained in this Section.
- C. An applicant for a fishing permit shall submit a properly completed application to the Department. The application is furnished by the Department and is available from any Department office and online at www.azgfd.gov.
1. The applicant shall provide all of the following information:
 - a. The name, address, and telephone number of the agency, department, or nonprofit organization requesting the permit;
 - b. The name, position title, and telephone number of the ~~individuals~~ persons responsible for supervising the ~~individuals~~ persons fishing under the authority of the permit;
 - c. The total number of ~~individuals~~ persons who will be fishing under the authority of the permit;
 - d. The dates ~~of the two days~~ for which the permit will be ~~valid~~ used; and
 - e. The location for which the permit will be valid.
 2. In addition to the information required under subsection (C)(1), nonprofit organizations shall also submit ~~documentation that they are licensed by or have a contract with the Department of Economic Security or the Department of Health Services for the purpose of providing rehabilitation or treatment services to individuals or groups with physical, developmental, or mental disabilities~~:
 - a. A copy of the organization's articles of incorporation and evidence that the organization has tax-exempt status under Section 501(c) of the Internal Revenue Code, unless a current and correct copy is already on file with the Department; and
 - b. Document identifying the organization's mission.
- D. The Department shall ~~issue either grant~~ or deny the fishing permit ~~to an applicant within 30 calendar days of receiving an application within the applicable overall time-frame established under R12-4-106.~~



- E. The fishing permit holder shall provide instruction on fish identification, fishing ethics, safety, and techniques to the individuals persons who will be fishing under authority of the permit. ~~The Department shall provide the lesson plan for this instruction to the permit holder curriculum outline provided by the Department.~~
- F. Each individual person fishing without a license under the sole authority of the fishing permit may take only one-half the regular bag limit established by Commission Order for any species, unless the regular bag limit is one, in which case the permit authorizes the regular bag limit.
- G. The permit holder shall submit a report to the Department ~~not~~ no later than 30 days after the end of the authorized fishing dates. The report form is furnished by the Department and is available at any Department office. The permit holder shall report all of the following information on the form:
 1. The fishing permit number and the information contained in the permit;
 2. The total number of individuals persons who fished and total hours fished;
 3. The total number of fish caught, kept, and released, by species.
- H. The Department may deny future fishing permits to a permit holder who failed to submit the report required under subsection (G) until the permit holder complies with reporting requirements.

R12-4-311. Exemptions from Requirement to Possess an Arizona Fishing License or Hunting License While Taking Wildlife

In addition to the exemptions prescribed under A.R.S. § 17-335, R12-4-206(E), R12-4-207(E), and R12-4-209(E) and provided the person's fishing ~~and~~, hunting, or trapping license privileges are not currently revoked by the Commission:

1. A fishing license is not required when a person is:
 - a. Fishing from artificial ponds, tanks, and lakes contained entirely on private lands that are not:
 - i. Open to the public, and
 - ii. Managed by the Department.
 - b. Taking ~~terrestrial mollusks or crustaceans~~ from private property nonnative terrestrial mollusks, such as but not limited to brown garden snails (*Helix aspersa*) and decollata snails (*Rumina decollata*), or crustaceans, such as crayfish.
 - c. Fishing in Arizona on any designated Saturday occurring during National Fishing and Boating Week, except in waters of the Colorado River forming the common boundaries between Arizona and California, Nevada, or Utah where fishing without a license is limited to the shoreline, unless the state with concurrent jurisdiction removes licensing requirements on the same day.
 - d. Participating in an introductory fishing education program sanctioned by the Department, during scheduled program hours, only. A sanctioned program shall have a Department employee, ~~sport fishing contractor,~~ or authorized volunteer instructor present during scheduled program hours. For the purposes of this subsection, "authorized volunteer instructor" means a person who has successfully passed the Department's required background check, or provided documentation of the person's application for a fingerprint clearance card, and sport fishing education workshop.
2. A hunting license is not required when a person is participating in an introductory hunting event organized, sanctioned, or sponsored by the Department. The person may hunt small game, ~~fur-bearing~~ fur-bearing, predator, and designated mammals during scheduled event hours, only. To hunt migratory game birds, the individual person shall have any stamps required by federal regulation. The introductory hunting event shall have a Department employee, certified hunter education instructor, or authorized volunteer present during scheduled hunting hours. For the purposes of this subsection, "authorized volunteer" means a person who has successfully passed the Department's required background check, or provided documentation of the person's application for a fingerprint clearance card, and Department event best practices training ~~or provide documentation of the person's application for a fingerprint clearance card.~~ This subsection does not apply to any event that requires ~~participants~~ a participant to obtain a permit-tag or nonpermit-tag.

R12-4-313. Lawful Methods of ~~Taking~~ Take and Seasons for Aquatic Wildlife

- A. ~~An individual may take aquatic wildlife as defined under A.R.S. § 17-101, subject Subject to the restrictions prescribed under R12-4-303, R12-4-317, and of this Section. Aquatic, a person may take aquatic wildlife may be taken during the day or night and may be taken~~ using artificial light as prescribed under A.R.S. § 17-301. When a fish die-off is imminent or when otherwise deemed appropriate, the Commission may designate a special season by Commission Order to allow fish to be taken by hand or by any hand-held, non-motorized implement that does not discharge a projectile.
- B. ~~The Commission may, through Commission Order, prescribe legal sizes for possession of aquatic wildlife.~~
- CB.** ~~An individual~~ A person who possesses a valid Arizona fishing license may take aquatic wildlife by angling or simultaneous fishing as defined under R12-4-301 with any bait, artificial ~~lure fly,~~ fly lure subject to the following restrictions, ~~an individual:~~
 1. ~~Shall not possess aquatic wildlife other than aquatic wildlife prescribed by Commission Order;~~
 21. ~~Shall not use~~ Except for sunfish of the genus *Lepomis*, the flesh of game fish may not be used as bait, except sunfish of the genus *Lepomis*;
 32. ~~May use live Live~~ Live baitfish, as defined under R12-4-101, may only be used in designated areas designated prescribed by Commission Order; and designated areas may subsequently be closed or restricted by Commission Order.
 43. ~~Shall Waterdogs may not use waterdogs be used~~ as live bait in that portion of Santa Cruz County lying east and south of State Highway 82 or that portion of Cochise County lying west of the San Pedro River and south of State Highway 82.
 4. ~~Shall not use more than two lines at any one time.~~
 5. The Commission may further restrict the lawful methods of take on particular waters by designating one or more of the following special seasons by Commission Order:
 - a. An "artificial flies and lures" season in which only artificial flies and lures may be used in designated areas.
 - b. A "barbless hooks" season in which only the use of barbless or single-point barbless hooks may be used in designated areas.
 - c. An "immediate kill or release" season in which a person must kill and retain the designated species as part of the person's bag limit or immediately release the wildlife.



- d. A “catch and immediate release” in which a person must immediately release the designated species, or
- e. An “immediate kill” season in which a person must immediately kill and retain the designated species as part of the person’s bag limit.

DC. In addition to angling, ~~an individual~~ a person who possesses a valid Arizona fishing license may also take the following aquatic wildlife using the following methods, ~~subject to the restrictions established under R12-4-303, R12-4-317, and this Section:~~

1. A hybrid device is lawful for the take of aquatic wildlife provided all components of the device are authorized for the take of that species under this subsection.
12. Carp (Cyprinus carpio), buffalofish, mullet, tilapia, goldfish, and shad may be taken by:
 - a. Bow and arrow,
 - b. Crossbow,
 - c. Snare,
 - d. Gig,
 - e. Spear or spear gun, or
 - f. Snagging,
3. A person shall not use any of the methods of take listed under subsection (C)(2) within 200 yards of a designated swimming area as indicated by way of posted signs or notices.
24. Except for snagging, ~~an individual a person~~ shall not use any of the methods of take listed under subsection ~~(D)(1)~~ (C)(2) within 200 yards of any boat dock or ~~designated swimming area~~ fishing pier.
35. Striped bass may be taken by spear or spear gun in waters designated by Commission Order.
4. ~~Live baitfish may be taken for personal use as bait by:~~
 - a. ~~A cast net not to exceed a radius of 4 feet measured from the horn to the leadline;~~
 - b. ~~A minnow trap, as defined under R12-4-301;~~
 - e. ~~A seine net not to exceed 10 feet in length and 4 feet in width; or~~
 - d. ~~A dip net.~~
56. Catfish may be taken by bow and arrow or crossbow in waters designated by Commission Order.
67. Amphibians, soft-shelled turtles, mollusks, and crustaceans may be taken by minnow trap, crayfish net, hand, or with any hand-held, non-motorized implement that does not discharge a projectile, unless otherwise permitted under this Section.
78. In addition to the methods described under subsection ~~(D)(6)~~ (C)(7), bullfrogs may be taken by:
 - a. Bow and arrow,
 - b. Crossbow,
 - c. Pneumatic weapon, or
 - d. Slingshot.
9. Live baitfish may be taken for personal use as bait by:
 - a. A cast net not to exceed a radius of 4 feet measured from the horn to the leadline;
 - b. A minnow trap, as defined under R12-4-301;
 - c. A seine net not to exceed 10 feet in length and 4 feet in width; or
 - d. A dip net.
- 8-10. In addition to the methods described under subsection ~~(D)(6)~~ (C)(7), crayfish may be taken with the following devices:
 - a. A trap not more than 3 feet in the greatest dimension,
 - b. A dip net as defined under R12-4-301, or
 - c. A seine net not larger than 10 feet in length and 4 feet in width.

E. ~~An individual who uses a crayfish net and minnow trap shall:~~

1. ~~Attach a water resistant identification tag to the trap when it is unattended. The tag shall include the individual's:~~
 - a. ~~Name,~~
 - b. ~~Address, and~~
 - e. ~~Fishing license number.~~
2. ~~Raise and empty the trap daily.~~
11. The Commission may further restrict the lawful methods of take on particular waters by designating one or more of the following special seasons by Commission Order:
 - a. A “snagging” season in which a person may use this method only at times and locations designated by Commission Order, or
 - b. A “spear or spear gun” season in which a person may use this method only at times and locations designated by Commission Order.

D. Aquatic wildlife taken in violation of this Section is unlawfully taken.

R12-4-314. Repealed Possession, Transportation, or Importation of Aquatic Wildlife

A. The Commission may prescribe legal sizes for possession of aquatic wildlife through Commission Order.

B. A person who possesses a valid Arizona fishing license may possess live aquatic wildlife lawfully taken on the waters where taken, but the person shall not transport the aquatic wildlife alive from the waters where taken except that:

1. A person may transport live baitfish listed in subsection (C)(1);
2. A person may transport live waterdogs except in the portion of Santa Cruz County lying east and south of State Highway 82 or the portion of Cochise County lying west of the San Pedro River and south of State Highway 82; and
3. Any crayfish taken on waters within Yuma or La Paz Counties may be transported alive for use as live bait in that portion of La Paz County west of Highway 95 and south of Interstate 10, Yuma County, and on the Colorado River from the Palo Verde Diversion Dam downstream to the Southern international boundary with Mexico.

C. A person who possesses a valid Arizona fishing license may import, transport, or possess live baitfish, crayfish, or waterdogs for personal use as live bait only as follows:



- 1. A person may possess or transport only the following live baitfish for personal use as live bait:
 - a. Fathead minnow (*Pimephales promelas*).
 - b. Golden shiners (*Notemigonus crysoleucas*).
 - c. Goldfish (*Carassius auratus*).
 - d. Longfin Dace (*Agosia chrysogaster*).
 - e. Sonora Sucker (*Catostomus insignis*).
 - f. Speckled Dace (*Rhynchithys osculus*), and
 - g. Desert Sucker (*Catostomus clarkii*).
- 2. A person may import for personal use live baitfish listed in subsection (C)(1) from:
 - a. California or Nevada, or
 - b. From any other state with accompanying documentation certifying that the fish are free of Furunculosis.
- 3. A person may import, transport, or possess live waterdogs for personal use as bait, except in the portion of Santa Cruz County lying east and south of State Highway 82 or the portion of Cochise County lying west of the San Pedro River and south of State Highway 82.
- 4. A person shall not import, transport, or move live crayfish between waters for personal use as live bait except as allowed in 12 A.A.C. 4, Article 4, or except as allowed in subsection (B)(3).
- D.** A person shall attach water-resistant identification to any unattended live boxes or stringers holding fish and ensure the identification bears the person's:
 - 1. Name.
 - 2. Address, and
 - 3. Fishing license number.
- E.** A person who uses a crayfish net or a minnow trap shall raise and empty the trap daily and shall attach water-resistant identification to any unattended traps and ensure the identification bears the person's:
 - 1. Name.
 - 2. Address, and
 - 3. Fishing license number.
- F.** A person shall not knowingly disturb the crayfish net, live box, minnow trap, or stringer of another unless authorized to do so by the owner.

R12-4-315. Possession of Live Fish, Unattended Live Boxes and Stringers Repealed

- A:** ~~An individual may possess fish taken alive as provided under R12-4-313 on the waters where taken, except when the take or possession is expressly prohibited under R12-4-313 or R12-4-317, but the individual shall not transport the fish alive from the waters where taken except as authorized under R12-4-316.~~
- B:** ~~An individual shall attach water resistant identification to any unattended live boxes or stringers holding fish and ensure the identification bears the individual's:~~
 - 1. ~~Name,~~
 - 2. ~~Address, and~~
 - 3. ~~Fishing license number.~~

R12-4-316. Possession, Transportation, or Importation of Live Baitfish, Crayfish, or Waterdogs Repealed

- A:** ~~An individual may possess live baitfish, crayfish, or waterdogs for use as live bait only as established under R12-4-317 and this Section.~~
- B:** ~~An individual may possess or transport the following live baitfish for personal use as live bait as established under R12-4-317:~~
 - 1. ~~Fathead minnow (*Pimephales promelas*);~~
 - 2. ~~Mosquitofish (*Gambusia affinis*);~~
 - 3. ~~Threadfin shad (*Dorosoma petenense*);~~
 - 4. ~~Golden shiners (*Notemigonus crysoleucas*), and~~
 - 5. ~~Goldfish (*Carassius auratus*).~~
- C:** ~~An individual who possesses a valid Arizona fishing license may:~~
 - 1. ~~Import, transport, or possess live waterdogs for personal use as bait, except in the portion of Santa Cruz County lying east and south of State Highway 82 or the portion of Cochise County lying west of the San Pedro River and south of State Highway 82.~~
 - 2. ~~Import live baitfish listed under subsection (B) from California or Nevada without accompanying documentation certifying the fish are free of disease.~~
 - 3. ~~Import live baitfish listed under subsection (B) from any other state with accompanying documentation certifying that the fish are free of Furunculosis.~~
- D:** ~~An individual may:~~
 - 1. ~~Trap or capture live crayfish as provided under R12-4-313.~~
 - 2. ~~Use live crayfish as bait only in the body of water where trapped or captured, not in an adjacent body of water, except for the portion of La Paz County west of Highway 95 and south of Interstate 10, Yuma County, and on the Colorado River from the Palo Verde Diversion Dam downstream to the Southern international boundary with Mexico.~~
- E:** ~~An individual shall not:~~
 - 1. ~~Import, transport, move between waters, or possess live crayfish for personal use as live bait except as allowed in 12 A.A.C. 4, Article 4, and except for the portion of La Paz County west of Highway 95 and south of Interstate 10, Yuma County, and on the Colorado River from the Palo Verde Diversion Dam downstream to the southern international boundary with Mexico.~~
 - 2. ~~Transport crayfish alive from the site where taken except for the portion of La Paz County west of Highway 95 and south of Interstate 10, Yuma County, and on the Colorado River from the Palo Verde Diversion Dam downstream to the southern international boundary with Mexico.~~



3. Import, transport, move between waters, or possess live red shiner (*Cyprinella lutrensis*) for personal use.

R12-4-317. Seasons for Lawfully Taking Fish, Mollusks, Crustaceans, Amphibians, and Aquatic Reptiles Repealed

- A.** Methods of lawfully taking aquatic wildlife during seasons designated by Commission Order as “general” seasons are designated under R12-4-313.
- B.** Other seasons designated by Commission Order have specific requirements and lawful methods of take more restrictive than those for general seasons, as prescribed under this Section. While taking aquatic wildlife under R12-4-313 an individual participating in:
1. An “artificial lures and flies only” season shall use only artificial lures and flies as defined under R12-4-301. The Commission may further restrict “artificial lures and flies only” season to the use of barbless or single barbless hooks as defined under R12-4-301.
 2. A “live baitfish” season shall not possess or use any species of fish as live bait at, in, or upon any waters unless that species is specified as a live baitfish for those waters by Commission Order. Live baitfish shall not be transported from the waters where taken except as authorized under R12-4-316.
 3. An “immediate kill or release” season shall kill and retain the designated species as part of the bag limit or immediately release the wildlife. Further fishing is prohibited after the legal bag limit is killed.
 4. A “catch and immediate release” season shall immediately release the designated species.
 5. An “immediate kill” season shall immediately kill and retain the designated species as part of the bag limit.
 6. A “snagging” season shall use this method only at times and locations designated by Commission Order.
 7. A “spear or spear gun” season shall use this method only at times and locations designated by Commission Order.
- C.** A “special” season may be designated by Commission Order to allow fish to be taken by hand or by any hand held, non-motorized implement that does not discharge a projectile. The “special” season may apply to any waters where a fish die off is imminent due either to poor or low water conditions, Department fish renovation activities, or as designated by Commission Order.

R12-4-318. Seasons for Lawfully Taking Wild Mammals, Birds, and Reptiles

- A.** Methods of lawfully taking wild mammals, birds, and reptiles during seasons designated by Commission Order as “general” seasons are designated under R12-4-304.
1. Lawful devices are defined under R12-4-101 and R12-4-301.
 2. Lawful devices are listed under this Section by the range of effectiveness, from greatest range to least range.
 3. A hybrid device may be used in a general season, provided:
 - a. All components of the hybrid device are designated as lawful for a given species under R12-4-304, and
 - b. No components are prohibited under R12-4-303.
- B.** Methods of lawfully taking big game during seasons designated by Commission Order as “special” are designated under R12-4-304. “Special” seasons are open only to a person who possesses a special big game license tag authorized under A.R.S. § 17-346 and R12-4-120.
- C.** When designated by Commission Order, the following seasons have specific requirements and lawful methods of take more restrictive than those for general and special seasons; as ~~prescribed~~ established under this Section. While taking the species authorized by the season, a person participating in:
1. A “CHAMP” season shall be a challenged hunter access/mobility permit holder as established under R12-4-217.
 2. A “youth-only hunt” shall be under the age of 18. A youth hunter whose 18th birthday occurs during a “youth-only hunt” for which the youth hunter has a valid permit or tag may continue to participate for the duration of that “youth-only hunt.”
 3. A “pursuit-only” season may use dogs to pursue bears, mountain lions, or raccoons as designated by Commission Order, but shall not kill or capture the quarry. A person participating in a “pursuit-only” season shall possess and, at the request of Department personnel, produce an appropriate and valid hunting license and any required tag for taking the animal pursued, even though there shall be no kill.
 4. A “restricted season” may use any lawful method authorized for a specific species under R12-4-304, except dogs may not be used to pursue the wildlife for which the season was established.
 5. An “archery-only” season shall not use any other weapons, including crossbows or bows with a device that holds the bow in a drawn position except as authorized under R12-4-216. A person participating in an “archery-only” season may use one or more of the following methods or devices if authorized under R12-4-304 as lawful for the species hunted:
 - a. Bows and arrows, and
 - b. Falconry.
 6. A “handgun, archery, and muzzleloader (HAM)” season may use one or more of the following methods or devices if authorized under R12-4-304 as lawful for the species hunted:
 - a. ~~Bows and arrows;~~
 - b. ~~Crossbows or bows to be drawn and held with an assisting device;~~
 - e. ~~Handguns;~~ and
 - d. ~~Muzzle loading rifles as defined under R12-4-301.~~
 - a. Muzzleloading rifles.
 - b. Handguns.
 - c. Muzzleloading handguns.
 - d. Bows and arrows.
 - e. Crossbows or bows to be drawn and held with an assisting device. and
 - f. Pre-charged pneumatic weapons capable of holding and discharging a single projectile .35 caliber or larger.
 7. A “muzzleloader” season may use one or more of the following methods or devices if authorized under R12-4-304 as lawful for the species hunted:
 - a. ~~Bows and arrows;~~
 - b. ~~Crossbows or bows to be drawn and held with an assisting device;~~ and



- e. ~~Muzzleloading rifles or handguns, as defined under R12-4-301.~~
 - a. Muzzleloading rifles or muzzleloading handguns.
 - b. Bows and arrows, and
 - c. Crossbows or bows to be drawn and held with an assisting device.
8. A “limited weapon” season may use one or more of the following methods or devices for taking wildlife, if authorized under R12-4-304 as lawful for the species hunted:
- a. ~~Any trap except foothold traps,~~
 - b. ~~Bows and arrows,~~
 - e. ~~Capture by hand,~~
 - d. ~~Crossbows or bows to be drawn and held with an assisting device,~~
 - e. ~~Dogs,~~
 - f. ~~Falconry,~~
 - g. ~~Hand-propelled projectiles,~~
 - h. ~~Nets,~~
 - i. ~~Pneumatic weapons discharging a single projectile .25 caliber or smaller, or~~
 - j. ~~Slingshots.~~
 - a. Bows and arrows.
 - b. Crossbows or bows to be drawn and held with an assisting device.
 - c. Pneumatic weapons capable of holding and discharging a single projectile .25 caliber or smaller.
 - d. Hand-propelled projectiles.
 - e. Any trap except foothold traps.
 - f. Slingshots.
 - g. Dogs.
 - h. Falconry.
 - i. Nets, or
 - j. Capture by hand.
9. A “limited weapon hand or hand-held implement” season may use one or more of the following methods or devices for taking wildlife, if authorized under R12-4-304 as lawful for the species hunted:
- a. Catch-pole,
 - b. Hand,
 - c. Snake hook, or
 - d. Snake tongs.
10. A “limited weapon-pneumatic” season may use one or more of the following methods or devices for taking wildlife, if authorized under R12-4-304 as lawful for the species hunted:
- a. ~~Capture by hand,~~
 - b. ~~Dogs,~~
 - e. ~~Falconry,~~
 - d. ~~Hand-propelled projectiles,~~
 - e. ~~Nets,~~
 - f. ~~Pneumatic weapons discharging a single projectile .25 caliber or smaller, or~~
 - g. ~~Slingshots.~~
 - a. Pneumatic weapons discharging a single projectile .25 caliber or smaller.
 - b. Hand-propelled projectiles.
 - c. Slingshots.
 - d. Dogs.
 - e. Falconry.
 - f. Nets, or
 - g. Capture by hand.
11. A “limited weapon-rimfire” season may use one or more of the following methods or devices for taking wildlife, if authorized under R12-4-304 as lawful for the species hunted:
- a. ~~Any trap except foothold traps,~~
 - b. ~~Bows and arrows,~~
 - e. ~~Capture by hand,~~
 - d. ~~Crossbows or bows to be drawn and held with an assisting device,~~
 - e. ~~Dogs,~~
 - f. ~~Falconry,~~
 - g. ~~Hand-propelled projectiles,~~
 - h. ~~Nets,~~
 - i. ~~Pneumatic weapons,~~
 - j. ~~Rifled firearms using rimfire cartridges,~~
 - k. ~~Shotgun shooting shot or slug, or~~
 - l. ~~Slingshots.~~
 - a. Rifled firearms using rimfire cartridges.
 - b. Shotgun shooting shot or slug.
 - c. Bows and arrows.
 - d. Crossbows or bows to be drawn and held with an assisting device.



- e. Pneumatic weapons.
 - f. Hand-propelled projectiles.
 - g. Any trap except foothold traps.
 - h. Slingshots.
 - i. Dogs.
 - j. Falconry.
 - k. Nets, or
 - l. Capture by hand.
12. A “limited weapon-shotgun” season may use one or more of the following methods or devices for taking wildlife, if authorized under R12-4-304 as lawful for the species hunted:
- a. ~~Any trap except foothold traps;~~
 - b. ~~Bows and arrows;~~
 - e. ~~Capture by hand;~~
 - d. ~~Crossbows or bows to be drawn and held with an assisting device;~~
 - e. ~~Dogs;~~
 - f. ~~Falconry;~~
 - g. ~~Hand-propelled projectiles;~~
 - h. ~~Nets;~~
 - i. ~~Pneumatic weapons;~~
 - j. ~~Shotgun shooting shot or slug, or~~
 - k. ~~Slingshots.~~
 - a. Shotgun shooting shot or slug.
 - b. Muzzleloading shotgun.
 - c. Bows and arrows.
 - d. Crossbows or bows to be drawn and held with an assisting device.
 - e. Pneumatic weapons.
 - f. Hand-propelled projectiles.
 - g. Any trap except foothold traps.
 - h. Slingshots.
 - i. Dogs.
 - j. Falconry.
 - k. Nets, or
 - l. Capture by hand.
13. A “limited weapon-shotgun shooting shot” season may use one or more of the following methods or devices for taking wildlife, if authorized under R12-4-304 as lawful for the species hunted:
- a. ~~Any trap except foothold traps;~~
 - b. ~~Bows and arrows;~~
 - e. ~~Capture by hand;~~
 - d. ~~Crossbows or bows to be drawn and held with an assisting device;~~
 - e. ~~Dogs;~~
 - f. ~~Falconry;~~
 - g. ~~Hand-propelled projectiles;~~
 - h. ~~Nets;~~
 - i. ~~Pneumatic weapons;~~
 - j. ~~Shotgun shooting shot, or~~
 - k. ~~Slingshots.~~
 - a. Shotgun shooting shot.
 - b. Muzzleloading shotgun shooting shot.
 - c. Bows and arrows.
 - d. Crossbows or bows to be drawn and held with an assisting device.
 - e. Pneumatic weapons.
 - f. Hand-propelled projectiles.
 - g. Any trap except foothold traps.
 - h. Slingshots.
 - i. Dogs.
 - j. Falconry.
 - k. Nets, or
 - l. Capture by hand.
14. A “falconry-only” season shall be a falconer licensed under R12-4-422 unless exempt under A.R.S. § 17-236(C) or R12-4-407. A falconer participating in a “falconry-only” season shall use no other method of take except falconry.
15. A “raptor capture” season shall be a falconer licensed under R12-4-422 unless exempt under R12-4-407.

R12-4-319. Use of Aircraft to Take Wildlife

~~A.~~ For the purposes of this Section, “locate” means any act or activity that does not take or harass wildlife and is directed at locating or finding wildlife in a hunt area.

~~B.~~ A person shall not take or assist in taking wildlife from or with the aid of aircraft, including drones.



- ~~CB.~~ Except in hunt units with Commission-ordered special seasons under R12-4-115 and R12-4-120 and hunt units with seasons only for mountain lion and no other concurrent big game season, ~~an individual a person~~ shall not locate or assist in locating wildlife from or with the aid of an aircraft, including drones, in a hunt unit with an open big game season. This restriction begins 48 hours before the opening of a big game season in a hunt unit and extends until the close of the big game season for that hunt unit.
- ~~DC.~~ ~~An individual A person~~ who possesses a special big game license tag for a special season under R12-4-115 or R12-4-120 or ~~an individual a person~~ who assists or will assist such a licensee shall not use an aircraft, including drones, to locate wildlife beginning 48 hours before and during a Commission-ordered special season.
- ~~ED.~~ This Section does not apply to any ~~individual person~~ acting within the scope of official duties as an employee or authorized agent of the state or the United States to manage or protect or aid in the management or protection of land, water, wildlife, livestock, domesticated animals, human life, or crops.
- E. For the purposes of this Section, “locate” means any act or activity that does not take or harass wildlife and is directed at locating or finding wildlife in a hunt area.

R12-4-320. Harassment of Wildlife

- A. In addition to the provisions established under A.R.S. § 17-301, it is unlawful to harass, molest, chase, rally, concentrate, herd, intercept, torment, or drive wildlife with or from any aircraft, including drones, as defined under R12-4-301, or with or from any motorized terrestrial or aquatic vehicle.
- B. This Section does not apply to ~~individual’s person’s~~ acting:
 1. In accordance with the provisions established under A.R.S. § 17-239; or
 2. Within the scope of official duties as an employee or authorized agent of the state or the United States to manage or protect or aid in the management or protection of land, water, wildlife, livestock, domesticated animals, human life, or crops.

R12-4-321. Restrictions for Taking Wildlife in City, County, or Town Parks and Preserves

- A. All city, county, and town parks and preserves are closed to hunting and trapping, unless open by Commission Order.
- B. Unless otherwise provided under Commission Order or rule, a city, county, or town may:
 1. Limit or prohibit any ~~individual person~~ from hunting ~~or trapping~~ within 1/4 one-fourth mile (440 yards) or trapping within one half mile (880 yards) of any:
 - a. Developed picnic area,
 - b. Developed campground,
 - c. Developed trailhead.
 - d. Developed wildlife viewing platform.
 - ee. Boat ramp,
 - df. Shooting range,
 - eg. Occupied structure, or
 - fh. Golf course.
 2. Require ~~an individual a person~~ entering a city, county, or town park or preserve, for the purpose of hunting, to declare the ~~individual’s person’s~~ intent to hunt within when entering the park or preserve, if the park or preserve has an entry station in operation a check in process established.
 3. Allow ~~an individual a person~~ to take wildlife in a city, county, or town park or preserve only during the posted park or preserve hours.
- C. The requirements of subsection (B)(1) do not apply to a reptile and amphibian limited weapon hand or hand-held implement season established by Commission Order.

R12-4-322. Pickup and Possession of Wildlife Carcasses or Parts

- A. For the purposes of this Section, the following definitions apply:
 1. “Fresh” means the majority of the wildlife carcass or part is not exposed dry bone and is comprised mainly of hair, hide, or flesh.
 2. “Not fresh” means the majority of the wildlife carcass or part is exposed dry bone due to natural processes such as scavenging, decomposition, or weathering.
- B. If not contrary to federal law or regulation, ~~an individual a person~~ may pick up and possess naturally shed antlers or horns or other wildlife parts that are not fresh without a permit or inspection by a Department law enforcement officer.
- C. If not contrary to federal law or regulation, ~~an individual a person~~ may only pick up and possess a fresh wildlife carcass or its parts under this Section if the ~~individual person~~ notifies the Department prior to pick up and possession and:
 1. The Department’s first report or knowledge of the carcass or its parts is voluntarily provided by the ~~individual person~~ wanting to possess the carcass or its parts;
 2. A Department law enforcement officer or an authorized Department employee or agent is able to observe the carcass or its parts at the site where the animal was found in the same condition and location as when the animal was originally found by the ~~individual person~~ wanting to possess the carcass or its parts; and
 3. A Department law enforcement officer, using the officer’s education, training, and experience, determines the animal died from natural causes. The Department may require the ~~individual person~~ to take the officer to the site where the animal carcass or parts were found when an adequate description or location cannot be provided to the officer.
- D. If a Department law enforcement officer determines that the ~~individual person~~ wanting to possess the carcass or its parts is authorized to do so under subsection (C), the officer may authorize possession of the carcass or its parts.
- E. Wildlife parts picked up and possessed from areas under control of jurisdictions that prohibit such activity, such as other states, reservations, or national parks, are illegal to possess in this state.
- F. This Section does not authorize the pickup and possession of a threatened or endangered species carcass or its parts.

R12-4-401. Live Wildlife Definitions

In addition to definitions provided under A.R.S. § 17-101, and for the purposes of this Article, the following definitions apply:



“Adoption” means the transfer of custody of live wildlife to a member of the public, initiated by either the Department or its authorized agent, when no special license is required.

“Agent” means the person identified on a special license and who assists a special license holder in performing activities authorized by the special license to achieve the objectives for which the license was issued. “Agent” has the same meaning as “sublicensee” and “subpermittee” as these terms are used for the purpose of federal permits.

“Aquarium trade” means the commercial industry and its customers who lawfully trade in aquatic live wildlife.

“Aversion training” means behavioral training in which an aversive stimulus is paired with an undesirable behavior in order to reduce or eliminate that behavior.

“Captive live wildlife” means live wildlife held in captivity, physically restrained, confined, impaired, or deterred to prevent it from escaping to the wild or moving freely in the wild.

“Captive-reared” means wildlife born, bred, raised, or held in captivity.

~~“Cervid” means a mammal classified as a Cervidae or member of the deer family found anywhere in the world as defined in the taxonomic classification from the Integrated Taxonomic Information System, available online at www.itis.gov.~~

“Circus” means a scheduled event where a variety of entertainment is the principal business, primary purpose, and attraction.

“Circus” does not include animal displays or exhibits held as an attraction for a secondary commercial endeavor.

“Commercial purpose” means the bartering, buying, leasing, loaning, offering to sell, selling, trading, exporting or importing of wildlife or their parts for monetary gain.

“Domestic” means an animal species that does not exist in the wild, and includes animal species that have only become feral after they were released by humans who held them in captivity or individuals or populations that escaped from human captivity.

“Educational display” means a display of captive live wildlife to increase public understanding of wildlife biology, conservation, and management without requiring or soliciting payment from an audience or an event sponsor. For the purposes of this Article, “to display for educational purposes” refers to display as part of an educational display.

“Educational institution” means any entity that provides instructional services or education-related services to persons.

“Endangered or threatened wildlife” means wildlife listed under 50 C.F.R. 17.11, revised October 1, 2013, which is incorporated by reference. A copy of the list is available at any Department office, online at www.gpoaccess.gov, or may be ordered from the U.S. Government Printing Office, Superintendent of Documents, P.O. Box 979050, St. Louis, MO 63197-9000. This incorporation by reference does not include any later amendments or editions of the incorporated material.

“Evidence of lawful possession” means any license or permit authorizing possession of a specific live wildlife species or individual, or other documentation establishing lawful possession. Other forms of documentation may include, but are not limited to, a statement issued by the country or state of origin verifying a license or permit for that specific live wildlife species or individual is not required.

“Exhibit” means to display captive live wildlife in public or to allow photography of captive live wildlife for any commercial purpose.

“Exotic” means wildlife or offspring of wildlife not native to North America.

“Fish farm” means a commercial operation designed and operated for propagating, rearing, or selling aquatic wildlife for any purpose.

“Game farm” means a commercial operation designed and operated for the purpose of propagating, rearing, or selling terrestrial wildlife or the parts of terrestrial wildlife for any purpose stated under R12-4-413.

“Health certificate” means a certificate of an inspection completed by a licensed veterinarian verifying the animal examined appears to be healthy and free of infectious, contagious, and communicable diseases.

“Hybrid wildlife” means an offspring from two different wildlife species or genera. Offspring from a wildlife species and a domestic animal species are not considered wildlife.

“Live baitfish” means any species of live freshwater fish designated by Commission Order as lawful for use in taking aquatic wildlife under R12-4-313 and R12-4-317.

“Live bait” means aquatic live wildlife used or intended for use in taking aquatic wildlife.

“Migratory birds” mean all species listed under 50 C.F.R. 10.13 revised October 1, 2014, and no later amendments or editions. The incorporated material is available from the U.S. Government Printing Office, Superintendent of Documents, P.O. Box 979050, St. Louis, MO 63197-9000, and is on file with the Department.

“Noncommercial purpose” means the use of products or services developed using wildlife for which no compensation or monetary value is received.

“Nonhuman primate” means any nonhuman member of the order Primate of mammals including prosimians, monkeys, and apes.

“Nonnative” means wildlife or its offspring that did not occur naturally within the present boundaries of Arizona before European settlement.

~~“Person” has the same meaning as defined under A.R.S. § 1-215.~~

“Photography” means any process that creates durable images of wildlife or parts of wildlife by recording light or other electromagnetic radiation, either chemically by means of a light-sensitive material or electronically by means of an image sensor.



“Rehabilitated wildlife” means live wildlife that is injured, orphaned, sick, or otherwise debilitated and is provided care to restore it to a healthy condition suitable for release to the wild or for lawful captive use.

“Research facility” means any association, institution, organization, school, except an elementary or secondary school, or society that uses or intends to use live animals in research.

“Restricted live wildlife” means wildlife that cannot be imported, exported, or possessed without a special license or lawful exemption.

“Shooting preserve” means any operation where live wildlife is released for the purpose of hunting.

“Special license” means any license issued under this Article, including any additional stipulations placed on the license authorizing specific activities normally prohibited under A.R.S. § 17-306 and R12-4-402.

“Species of greatest conservation need” means any species listed in the Department’s Arizona’s State Wildlife Action Plan list Tier 1a and 1b published by the Arizona Game and Fish Department. The material is available for inspection at any Department office and online at www.azgfd.gov.

“Stock” and “stocking” means to release live aquatic wildlife into public or private waters other than the waters where taken.

“Taxa” means groups of animals within specific classes of wildlife occurring in the state with common characteristics that establish relatively similar requirements for habitat, food, and other ecological, genetic, or behavioral factors.

“Unique identifier” means a permanent marking made of alphanumeric characters that identifies an individual animal, which may include, but is not limited to, a tattoo or microchip.

“USFWS” means the United States Fish and Wildlife Service.

“Volunteer” means a person who:

- Assists a special license holder in conducting activities authorized under the special license,
- Is under the direct supervision of the license holder at the premises described on the license,
- Is not designated as an agent, and
- Receives no compensation.

“Wildlife disease” means any disease that poses a health risk to wildlife in Arizona.

“Zoo” means any facility licensed by the Arizona Game and Fish Department under R12-4-420 or, for facilities located outside of Arizona, licensed or recognized by the applicable governing agency.

“Zoonotic” means a disease that can be transmitted from animals to humans or, more specifically, a disease that normally exists in animals but that can infect humans.



report approved by the Governor’s Regulatory Review Council on March 6, 2018.

- 6. **A reference to any study relevant to the rule that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**
The Department did not review or rely on any study for this rulemaking.
- 7. **A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:**
Not applicable
- 8. **The preliminary summary of the economic, small business, and consumer impact:**
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 rule under A.R.S. § 41-1027(C):**
Close of record: Monday, July 23, 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 rule follows:**

TITLE 9. HEALTH SERVICES

CHAPTER 6. DEPARTMENT OF HEALTH SERVICES
COMMUNICABLE DISEASES AND INFESTATIONS

ARTICLE 10. HIV-RELATED TESTING AND NOTIFICATION

Section

R9-6-1001.	Definitions
R9-6-1002.	Local Health Agency Requirements
R9-6-1004.	Court-ordered HIV-related Testing
R9-6-1005.	Anonymous HIV Testing
R9-6-1006.	Notification

ARTICLE 10. HIV-RELATED TESTING AND NOTIFICATION

R9-6-1001. Definitions

In this Article, unless otherwise specified:

- 1. “Governing board” means a group of individuals, elected as specified in A.R.S. Title 15, Chapter 4, Article 2, to carry out the duties and functions specified in A.R.S. Title 15, Chapter 3, Article 3.
- 2. “Informed consent” means ~~permission to conduct an HIV-related test obtained from a subject who has capacity to consent or an individual authorized by law to consent for a subject without capacity to consent after an explanation that complies with A.R.S. § 36-663(B).~~
- 3. “Physician” means an individual licensed as a doctor of:
 - a. Allopathic medicine under A.R.S. Title 32, Chapter 13;
 - b. Osteopathic medicine under A.R.S. Title 32, Chapter 17; or
 - e. Homeopathic medicine under A.R.S. Title 32, Chapter 29.
- 4. “School district” means the same as in A.R.S. § 15-101.



- 5.3. "Superintendent of a school district" means an individual appointed by the governing board of a school district to oversee the operation of schools within the school district.
6. ~~"Works" means materials, such as cotton balls or a spoon, required when preparing or using a drug that requires injection.~~

R9-6-1004. Court-ordered HIV-related Testing

- A. A health care provider who receives the results of a test, ordered by the health care provider to detect HIV infection and performed as a result of a court order issued under A.R.S. § 13-1210, shall comply with the requirements in 9 A.A.C. 6, Article 8.
- B. A health care provider who receives the results of a test, ordered by the health care provider to detect HIV infection and performed as a result of a court order issued under A.R.S. § 32-3207, shall comply with the requirements in 9 A.A.C. 6, Article 9.
- C. When a court orders a test under ~~A.R.S. §§ 8-341~~ A.R.S. § 8-341 or 13-1415 to detect HIV infection, the prosecuting attorney who petitioned the court for the order shall provide to the Department:
1. A copy of the court order, including an identifying number associated with the court order;
 2. The name and address of the victim; and
 3. The name and telephone number of the prosecuting attorney or the prosecuting attorney's designee.
- D. A person who tests a specimen of blood or another body fluid from a subject to detect HIV infection as authorized by a court order issued under ~~A.R.S. §§ 8-341~~ A.R.S. § 8-341 or 13-1415 shall:
1. Use a screening test; and
 2. If the test results from a screening test on the specimen indicate a positive result, retest the specimen using a confirmatory test.
- E. A person who performs a test described in subsection (D) shall report the test results for each subject to the submitting entity within five working days after obtaining the test results.
- F. A submitting entity that receives the results of a test to detect HIV infection that was performed for a subject as a result of a court order issued under ~~A.R.S. §§ 8-341~~ A.R.S. § 8-341 or 13-1415 shall:
1. Notify the Department within five working days after receiving the results of the test to detect HIV infection;
 2. Provide to the Department:
 - a. A written copy of the court order,
 - b. A written copy of the results of the test to detect HIV infection, and
 - c. The name and telephone number of the submitting entity or submitting entity's designee; and
 3. Either:
 - a. Comply with the requirements in:
 - i. R9-6-802(A)(2)(a) and (b), R9-6-802(D), and R9-6-802(F) through (J) for a subject who is not incarcerated or detained; and
 - ii. R9-6-802(B), R9-6-802(D) through (G), and R9-6-802(J) for a subject who is incarcerated or detained; or
 - b. Provide to the Department or the local health agency in whose designated service area the subject is living:
 - i. The name and address of the subject;
 - ii. A written copy of the results of the test to detect HIV infection, if not provided as specified in subsection (F)(2)(b); and
 - iii. Notice that the submitting entity did not provide notification as specified in subsection (F)(3)(a).
- G. If the Department or a local health agency is notified by a submitting entity as specified in subsection (F)(3)(b), the Department or local health agency shall comply with the requirements in:
1. R9-6-802(A)(2)(a) and (b), R9-6-802(D), and R9-6-802(F) through (J) for a subject who is not incarcerated or detained; and
 2. R9-6-802(B), R9-6-802(D) through (G), and R9-6-802(J) for a subject who is incarcerated or detained.
- H. When the Department receives a written copy of the results of a test to detect HIV infection that was performed for a subject as a result of a court order issued under ~~A.R.S. §§ 8-341~~ A.R.S. § 8-341 or 13-1415, the Department shall either:
1. Provide to the victim:
 - a. A description of the results of the test to detect HIV-infection;
 - b. The information specified in R9-6-802(D); and
 - c. A written copy of the test results; or
 2. Provide to the local health agency in whose designated service area the victim is living:
 - a. The name and address of the victim,
 - b. A written copy of the results of the test to detect HIV infection, and
 - c. Notice that the Department did not provide notification as specified in subsection (H)(1).
- I. If a local health agency is notified by the Department as specified in subsection (H)(2), the local health agency shall:
1. Provide to the victim:
 - a. A description of the results of the test to detect HIV infection;
 - b. The information specified in R9-6-802(D); and
 - c. A written copy of the test results; or
 2. If the local health agency is unable to locate the victim, notify the Department that the local health agency did not inform the victim of the results of the test to detect HIV infection.

R9-6-1005. Anonymous HIV Testing

- A. A local health agency and the Department shall offer anonymous HIV testing to individuals.
- B. If an individual requests anonymous HIV testing, the Department or a local health agency shall:
1. Provide to the individual requesting anonymous HIV testing:
 - a. ~~health~~ Health education about HIV,
 - b. ~~the~~ The meaning of HIV test results, and
 - c. ~~the~~ The risk factors for becoming infected with HIV or transmitting HIV to other individuals;



- ~~2. Record in a format specified by the Department information about the individual's risk factors for becoming infected with or transmitting HIV and submit the information to the Department;~~
- ~~32. Collect a specimen of blood from the individual;~~
- ~~43. Record the following information on a form provided by the Department in a Department-provided format:~~
 - a. The individual's date of birth;
 - b. The individual's race and ethnicity;
 - c. The individual's gender;
 - d. The date and time the blood specimen was collected; ~~and~~
 - e. The type of screening test;
 - f. Information about the individual's risk factors for becoming infected with or transmitting HIV; and
 - ~~e.g.~~ The name, address, and telephone number of the person collecting the blood specimen; ~~and~~
- ~~54. Before the individual leaves the building occupied by the Department or local health agency:~~
 - a. Test the individual's specimen of blood using ~~a~~ the screening test for HIV specified in subsection (B)(3);
 - b. Provide the results of the screening test to the individual;
 - c. ~~Record~~ Enter the test results ~~on the form specified in the record established according to subsection (B)(4) (B)(3); and~~
 - d. If the test results from the screening test on the specimen of blood indicate that the individual may be HIV-infected;
 - i. ~~Assist the individual to connect with persons that may have additional resources available for the individual; and~~
 - ii. Provide confirmatory testing or submit the specimen of blood to the Arizona State Laboratory for confirmatory testing by:
 - ~~i-(1) Assigning to the blood specimen an identification number corresponding to the pre-printed number on the form specified in record established according to subsection (B)(4) (B)(3);~~
 - ~~ii-(2) Giving the individual requesting anonymous HIV testing the identification number assigned to the blood specimen and information about how to obtain the results of the confirmatory test; and~~
 - ~~iii-(3) Sending the blood specimen and the form record specified in subsection (B)(4) (B)(3) to the Arizona State Laboratory for confirmatory testing; and~~
- ~~5. If anonymous HIV testing is provided by a local health agency, submit the record specified in subsection (B)(3) to the Department.~~

R9-6-1006. Notification

- A. The Department or the Department's designee shall confidentially notify an individual reported to be at risk for HIV infection, as required under A.R.S. § ~~36-664(J)~~ 36-664(I), if all of the following conditions are met:
 - 1. The Department receives the report of risk for HIV infection in a document that includes the following:
 - a. The name and address of the individual reported to be at risk for HIV infection or enough other identifying information about the individual to enable the individual to be recognized and located,
 - b. The name and address of the HIV-infected individual placing the individual named under subsection (A)(1)(a) at risk for HIV infection,
 - c. The name and address of the individual making the report, and
 - d. The type of exposure placing the individual named under subsection (A)(1)(a) at risk for HIV infection;
 - 2. The individual making the report is in possession of confidential HIV-related information; and
 - 3. The Department determines that the information provided in the report is accurate and contains sufficient detail to:
 - a. Indicate that the exposure described as required in subsection (A)(1)(d) constitutes a significant exposure for the individual reported to be at risk for HIV infection, and
 - b. Enable the individual reported to be at risk for HIV infection to be recognized
- B. As authorized under A.R.S. § ~~36-136(L)~~ 36-136(M), the Department shall notify the superintendent of a school district in a confidential document that a pupil of the school district tested positive for HIV if the Department determines that:
 - 1. The pupil places others in the school setting at risk for HIV infection; and
 - 2. The school district has an HIV policy that includes the following provisions:
 - a. That a school shall not exclude a pupil who tested positive for HIV from attending school or school functions or from participating in school activities solely due to HIV infection;
 - b. That school district personnel who are informed that a pupil tested positive for HIV shall keep the information confidential; and
 - c. That the school district shall provide HIV-education programs to pupils, parents or guardians of pupils, and school district personnel through age-appropriate curricula, workshops, or in-service training sessions.



NOTICE OF PROPOSED EXPEDITED RULEMAKING

TITLE 9. HEALTH SERVICES CHAPTER 10. DEPARTMENT OF HEALTH SERVICES HEALTH CARE INSTITUTIONS: LICENSING

[R18-127]

PREAMBLE

1. **Article, Part, or Section Affected (as applicable)** **Rulemaking Action**

R9-10-1302	Amend
R9-10-1307	Amend
R9-10-1309	Amend
R9-10-1310	Amend
R9-10-1312	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. §§ 36-132(A)(1), 36-136(G)
 Implementing Statutes: A.R.S. §§ 36-132(A)(17) and 36-405(A) and (B)

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. 1821, June 29, 2018

4. **The agency's contact person who can answer questions about the rulemaking:**

Name:	Colby Bower, Assistant Director
Address:	Arizona Department of Health Services Public Health Licensing Services 150 N. 18th Ave., Suite 510 Phoenix, AZ 85007
Telephone:	(602) 542-6383
Fax:	(602) 364-4808
E-mail:	Colby.Bower@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:**
 In order to ensure public health, safety, and welfare, Arizona Revised Statutes (A.R.S.) §§ 36-405 and 36-406 require the Arizona Department of Health Services (Department) to adopt rules establishing minimum standards and requirements for construction, modification, and licensure of health care institutions. Pursuant to Arizona Administrative Code (A.A.C.) R9-10-101(31), a "[b]ehavioral health specialized transitional facility" means a health care institution that provides inpatient behavioral health services and physical health services to an individual determined to be a sexually violent person according to A.R.S. Title 36, Chapter 37." Specific rules for Arizona's sole behavioral health specialized transitional facility, the Arizona Community Protection and Treatment Center (ACPTC), may be found in A.A.C. Title 9, Chapter 10, Article 13. Although the rules were made in 2013 and all but two revised in 2014, several issues have arisen that need to be addressed. Among them is that ACPTC is prohibited, according to the current requirement in R9-10-1309, from placing patients in seclusion (locked rooms) under emergency circumstances. Instead, staff must immediately resort to physically restraining patients, a more punitive and severe alternative than seclusion. The inability to place patients in seclusion has resulted in ACPTC receiving complaints from patients, potentially increasing costs and incurring unnecessary liability. As described in a five-year-review report for 9 A.A.C. 10, Article 13, approved by the Governor's Regulatory Review Council on January 9, 2018, the Department is revising the rules in 9 A.A.C. 10, Article 13, by expedited rulemaking to clarify the permissible use of seclusion in behavioral health specialized transitional facility clinical environments and address other issues described in the five-year-review report. 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: July 23, 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:**
A.R.S. § 36-407 prohibits a person from establishing, conducting, or maintaining “a health care institution or any class or subclass of health care institution unless that person holds a current and valid license issued by the [D]epartment specifying the class or subclass of health care institution the person is establishing, conducting or maintaining.” A health care institution license is specific to the licensee, class or subclass of health care institution, facility location, and scope of services provided. As such, a general permit is not applicable and is not used.
 - 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 10. DEPARTMENT OF HEALTH SERVICES
HEALTH CARE INSTITUTIONS: LICENSING

ARTICLE 13. BEHAVIORAL HEALTH SPECIALIZED TRANSITIONAL FACILITY

Section

R9-10-1302.	Administration
R9-10-1307.	Discharge or Conditional Release to a Less Restrictive Alternative
R9-10-1309.	Patient Rights
R9-10-1310.	Behavioral Health Services
R9-10-1312.	Medical Records

ARTICLE 13. BEHAVIORAL HEALTH SPECIALIZED TRANSITIONAL FACILITY

- R9-10-1302. Administration**
- A. The governing authority for a behavioral health specialized transitional facility:
 - 1. Is the superintendent of the state hospital; and
 - 2. Shall:
 - a. Establish, in writing:
 - i. A behavioral health specialized transitional facility's scope of services, and
 - ii. Qualifications for an administrator;
 - b. Designate, in writing, an administrator who has the qualifications established in subsection (A)(2)(a)(ii);
 - c. Adopt a quality management program according to R9-10-1303;
 - d. Review and evaluate the effectiveness of the quality management program at least once every 12 months;
 - e. Designate an acting administrator, in writing, who has the qualifications established in subsection (A)(2)(a)(ii), if the administrator is:
 - i. Expected not to be present on the behavioral health specialized transitional facility's premises for more than 30 calendar days, or



- ii. Not present on the behavioral health specialized transitional facility's premises for more than 30 calendar days; and
 - f. Except as provided in subsection (A)(2)(e), notify the Department according to A.R.S. § 36-425(I) when there is a change in the administrator and identify the name and qualifications of the new administrator.
- B.** An administrator:
- 1. Is directly accountable to the superintendent of the state hospital for the daily operation of the behavioral health specialized transitional facility and for all services provided by or at the behavioral health specialized transitional facility;
 - 2. Has the authority and responsibility to manage the behavioral health specialized transitional facility; and
 - 3. Except as provided in subsection (A)(2)(e), designates, in writing, an individual who is present on the behavioral health specialized transitional facility's premises and accountable for the behavioral health specialized transitional facility when the administrator is not present on the behavioral health specialized transitional facility's premises.
- C.** An administrator shall ensure that:
- 1. Policies and procedures are established, documented, and implemented to protect the health and safety of a patient that:
 - a. Cover job descriptions, duties, and qualifications, including required skills, knowledge, education, and experience for personnel members, employees, volunteers, and students;
 - b. Cover orientation and in-service education for personnel members, employees, volunteers, and students;
 - c. Cover patient admission, assessment, treatment plan, transfer, discharge planning, ~~discharge~~, and recordkeeping;
 - d. Cover discharge, including the amount of medication provided to a patient at discharge, based on an assessment of the patient's medical condition;
 - ~~d.e.~~ Cover patient rights, including assisting a patient who does not speak English or who has a physical or other disability to become aware of patient rights;
 - ~~e.f.~~ Cover the requirements in A.R.S. §§ 36-3708, 36-3709, and 36-3714;
 - ~~f.g.~~ Establish the process for warning an identified or identifiable individual, as described in A.R.S. § 36-517.02 (B) through (C), if a patient communicates to a personnel member a threat of imminent serious physical harm or death to the identified or identifiable individual and the patient has the apparent intent and ability to carry out the threat;
 - ~~g.h.~~ Cover when informed consent is required and how informed consent is obtained;
 - ~~h.i.~~ Cover the criteria and process for conducting research using patients or patients' medical records;
 - ~~i.j.~~ Include the establishment of, disbursing from, and recordkeeping for a patient personal funds account;
 - ~~j.k.~~ Include a method of patient identification to ensure a patient receives the services ordered for the patient;
 - ~~k.l.~~ Cover contracted services;
 - ~~l.m.~~ Cover health care directives;
 - ~~m.n.~~ Cover medical records, including electronic medical records;
 - ~~n.o.~~ Cover medication procurement, storage, inventory monitoring and control, and disposal;
 - ~~o.p.~~ Cover infection control;
 - ~~p.q.~~ Cover and designate which personnel members or employees are required to have current certification in cardiopulmonary resuscitation and first aid training;
 - ~~q.r.~~ Cover environmental services that affect patient care;
 - ~~r.s.~~ Cover reporting suspected or alleged abuse, neglect, exploitation, or other criminal activity;
 - ~~s.t.~~ Cover quality management, including incident reports and supporting documentation;
 - ~~t.u.~~ Cover emergency treatment and disaster plan;
 - ~~u.v.~~ Cover how personnel members will respond to a patient's sudden, intense, or out-of-control behavior to prevent harm to the patient or another individual;
 - ~~v.w.~~ Include security of the facility, patients and their possessions, personnel members, and visitors at the behavioral health specialized transitional facility;
 - ~~w.x.~~ Include preventing unauthorized patient absences;
 - ~~x.y.~~ Cover transportation of patients, including the criteria for using a locking mechanism to restrict a patient's movement during transportation;
 - ~~y.z.~~ Cover specific steps for:
 - i. A patient to file a complaint, and
 - ii. The behavioral health specialized transitional facility to respond to a patient's complaint;
 - ~~z.aa.~~ Cover visitation, telephone usage, sending or receiving mail, computer usage, and other recreational activities; and
 - ~~aa.bb.~~ Include equipment inspection and maintenance;
 - 2. Policies and procedures are available to each personnel member;
 - 3. Laboratory services are provided by a laboratory that holds a certificate of accreditation or certificate of compliance issued by the U.S. Department of Health and Human Services under the 1988 amendments to the Clinical Laboratories Improvement Act of 1967;
 - 4. Food services are provided as specified in R9-10-1314;
 - 5. The following individuals have access to a patient:
 - a. The patient's representative,
 - b. An individual assigned by a court of law to provide services to the patient, and
 - c. An attorney hired by the patient or patient's family;
 - 6. Labor performed by a patient for the behavioral health specialized transitional facility is consistent with A.R.S. § 36-510 and applicable state and federal law; and
 - 7. The following information is posted in an area easily viewed by a patient or an individual entering or leaving the behavioral health specialized transitional facility:
 - a. Patient rights,
 - b. Telephone number for the Department and the Office of Human Rights,



- c. Location of inspection reports,
 - d. Complaint procedures, and
 - e. Visitation hours and procedures;
- D.** An administrator shall:
- 1. Provide written notification to the Department of a patient's:
 - a. Death, if the patient's death is required to be reported according to A.R.S. § 11-593, within one working day after the patient's death;
 - b. Self-injury, within two working days after the patient inflicts a self-injury that requires immediate intervention by an emergency medical service provider; and
 - c. Absence, within one working day after an unauthorized patient absence from the behavioral health specialized transitional facility is discovered;
 - 2. Maintain the documentation required in subsection (D)(1) for at least 12 months after the date of the notification; and
 - 3. Ensure that sufficient personnel are present at the behavioral health specialized transitional facility at all times to maintain safe and secure conditions.
- E.** If an administrator has a reasonable basis, according to A.R.S. § 46-454, to believe abuse, neglect, or exploitation has occurred on the premises or while the patient is receiving services from an employee or personnel member of the behavioral health specialized transitional facility, the administrator shall:
- 1. If applicable, take immediate action to stop the suspected abuse, neglect, or exploitation;
 - 2. Report the suspected abuse, neglect, or exploitation of the patient according to A.R.S. § 46-454;
 - 3. Document:
 - a. The suspected abuse, neglect, or exploitation of the patient;
 - b. Any action taken according to subsection (E)(1); and
 - c. The report in subsection (E)(2);
 - 4. Maintain the documentation required in ~~subsections (E)(1) and (E)(2)~~ subsection (E)(3) for at least 12 months after the date of the report;
 - 5. Initiate an investigation of the suspected abuse, neglect, or exploitation and document the following information within five working days after the report required in subsection (E)(2):
 - a. The dates, times, and description of the suspected abuse, neglect, or exploitation;
 - b. A description of any injury to the patient related to the abuse or neglect and any change to the patient's physical, cognitive, functional, or emotional condition;
 - c. The names of witnesses to the suspected abuse, neglect, or exploitation; and
 - d. The actions taken by the administrator to prevent the suspected abuse, neglect, or exploitation from occurring in the future; and
 - 6. Maintain a copy of the documented information required in subsection ~~(C)(4)(e)~~ (E)(5) and any other information obtained during the investigation for at least 12 months after the date the investigation was initiated.
- F.** An administrator shall:
- 1. Unless otherwise stated, ensure that:
 - a. Documentation required by this Article is provided to the Department within two hours after a Department request; and
 - b. When documentation or information is required by this Chapter to be submitted on behalf of a behavioral health specialized transitional facility, the documentation or information is provided to the unit in the Department that is responsible for licensing and monitoring the behavioral health specialized transitional facility;
 - 2. Appoint a medical director, to direct the medical and nursing services provided by or at the behavioral health specialized transitional facility, who:
 - a. Is a medical staff member, and
 - b. Has at least two years of experience providing services in an organized psychiatric services unit of a hospital or in a behavioral health facility; and
 - 3. Appoint a clinical director, to provide direction for the behavioral health services provided by or at the behavioral health specialized transitional facility, who:
 - a. Is a psychiatrist or a psychologist;
 - b. Has at least two years of experience providing services in an organized psychiatric services unit of a hospital or in a behavioral health facility; and
 - c. May, if qualified, also serve as the medical director.
- G.** A medical director:
- 1. Is responsible for the medical services, nursing services, and physical health-related services provided to patients consistent with the patients behavioral treatment plan; and
 - 2. Shall ensure that policies and procedures are established, documented, and implemented to protect the health and safety of a patient that cover:
 - a. Restraint and seclusion, according to ~~R9-10-224~~ R9-10-225;
 - b. The process for patient assessments, including the identification of and criteria for the on-going monitoring of a patient's physical health conditions;
 - c. Dispensing and administration of medications, including the process and criteria for determining whether a patient is capable of and eligible to self-administer medication;
 - d. The process by which emergency medical treatment will be provided to a patient; and
 - e. The requirements for completion of medication records and recording of adverse events.
- H.** A clinical director:
- 1. Is responsible for the behavioral health services provided to patients;



2. Shall ensure that policies and procedures are established, documented, and implemented to protect the health and safety of a patient that cover:
 - a. Assessing the competency and proficiency of a behavioral health personnel member for each type of service the personnel member provides and each type of patient to which the personnel member is assigned;
 - b. Providing:
 - i. Supervision to behavioral health paraprofessionals, according to R9-10-115(1); and
 - ii. Clinical oversight to behavioral health technicians, according to R9-10-115(2);
 - c. The qualifications for personnel members who provide clinical oversight;
 - d. The process for patient assessments, including the identification of and criteria for the on-going monitoring of a patient's behavioral health issues;
 - e. The process for developing and implementing a patient's treatment plan;
 - f. The frequency of and process for reviewing and modifying a patient's treatment plan, based on the ongoing monitoring of the patient's response to treatment; and
 - g. The process for determining whether a patient is eligible for discharge or conditional release to a less restrictive alternative;
3. Shall ensure that patient services are provided by personnel competent and proficient in providing the services; and
4. Shall ensure that clinical oversight of personnel members is provided according to the policies and procedures.

R9-10-1307. Discharge or Conditional Release to a Less Restrictive Alternative

- A. An administrator shall ensure that annual written notice is given to a patient's right to petition for:
 1. Conditional release to a less restrictive alternative under A.R.S. § 36-3709, or
 2. Discharge under A.R.S. § 36-3714.
- B. An administrator shall ensure that a patient who is detained at or committed to the behavioral health specialized transitional facility is transported to a hearing to determine the patient's continued detention at or commitment to the behavioral health specialized transitional facility.
- C. An administrator shall ensure that a patient is not discharged or conditionally released to a less restrictive alternative before the behavioral health specialized transitional facility receives documentation from a court of competent jurisdiction of the patient's:
 1. Conditional release to a less restrictive alternative, or
 2. Discharge including the disposition of the patient upon discharge.
- D. A clinical director shall ensure that before a patient is discharged or conditionally released to a less restrictive alternative:
 1. The clinical director or the clinical director's designee, as specified in the behavioral health specialized transitional facility's discharge policies and procedures, receives the name of the health care provider or behavioral health professional to whom a copy of the patient's discharge summary will be sent; and
 2. The patient receives:
 - a. Written follow-up instructions including as applicable to the patient:
 - i. On-going behavioral health issues and physical health conditions;
 - ii. A list of the patient's medications and, for each medication, directions for taking the medication, possible side-effects, and possible results of not taking the medication; and
 - iii. Counseling goals; and
 - b. A supply of medications ~~sufficient to last the patient for at least 14 calendar days~~ determined according to the policies and procedures specified in R9-10-1302(C)(1)(d).

R9-10-1309. Patient Rights

An administrator shall ensure that:

1. A patient:
 - a. Has privacy in treatment and personal care needs;
 - b. Has the opportunity for and privacy in correspondence, communications, and visitation unless:
 - i. Restricted by court order; or
 - ii. Contraindicated on the basis of clinical judgment, as documented in the patient's medical record;
 - c. Is given the opportunity to seek, speak to, and be assisted by legal counsel:
 - i. Whom the court assigns to the patient, or
 - ii. Whom the patient obtains at the patient's own expense; and
 - d. Is not subjected to:
 - i. Abuse;
 - ii. Neglect;
 - iii. Exploitation;
 - iv. Coercion;
 - v. Manipulation;
 - vi. Seclusion, if not necessary to prevent imminent harm to self or others;
 - vii. Restraint, if not necessary to prevent imminent harm to self or others;
 - viii. Sexual abuse according to A.R.S. § 13-1404; or
 - ix. Sexual assault according to A.R.S. § 13-1406; and
2. A patient or the patient's representative:
 - a. Is provided with the opportunity to participate in the development of the patient's treatment plan and in treatment decisions before the treatment is initiated, except in a medical emergency;
 - b. Is provided with information about proposed treatments, alternatives to treatments, associated risks, and possible complications;



- c. Is allowed to control the patient’s finances and have access to the patient’s personal funds account according to the behavioral health specialized transitional facility’s policies and procedures specified in ~~R9-10-1302(C)(1)(i)~~ R9-10-1302(C)(1)(j);
- d. Has an opportunity to review the medical record for the patient according to the behavioral health specialized transitional facility’s policies and procedures; and
- e. Receives information about the behavioral health specialized transitional facility’s policies and procedures for:
 - i. Health care directives;
 - ii. Filing complaints, including the telephone number of an individual at the behavioral health specialized transitional facility to contact about a complaint and the Department’s telephone number; and
 - iii. Petitioning a court for a patient’s discharge or conditional release to a less restrictive alternative.

R9-10-1310. Behavioral Health Services

- A. A clinical director shall ensure that:
 - 1. A treatment plan is developed and implemented for the patient:
 - a. According to the behavioral health specialized transitional facility’s policies and procedures;
 - b. Based on the assessment conducted under R9-10-1306(C)(4) and on-going changes to the assessment of the patient’s behavioral health issues, mental disorders, and physical health conditions, as applicable; and
 - c. Including:
 - i. The physical health services, behavioral health services, and ancillary services to be provided to the patient until completion of the treatment plan;
 - ii. The type, frequency, and duration of counseling or other treatment ordered for the patient;
 - iii. The name of each individual who ordered medication, counseling, or other treatment for the patient;
 - iv. The signature of the patient or the patient’s representative and dated signed, or documentation of the refusal to sign;
 - v. The date when the patient’s treatment plan will be reviewed;
 - vi. If a discharge date has been determined, the treatment needed after discharge; and
 - vii. The signature of the personnel member who developed the treatment plan and the date signed; and
 - 2. A patient’s treatment plan is reviewed and updated:
 - a. According to the review date specified in the treatment plan,
 - b. When a treatment goal is accomplished or changes,
 - c. When additional information that affects the patient’s assessment is identified, and
 - d. When a patient has a significant change in condition or experiences an event that affects treatment.
- B. A clinical director shall ensure that treatment is:
 - 1. Offered to a patient according to the patient’s treatment plan;
 - 2. Except for a patient obtaining treatment under A.R.S. § 36-512, only provided after obtaining informed consent to the treatment from the patient; and
 - 3. Documented in the patient’s medical record as specified in R9-10-1312.
- C. The clinical director shall ensure that restraint and seclusion ~~is-are~~ used, performed, and documented according to the behavioral health specialized transitional facility’s policies and procedures.
- D. A clinical director shall ensure that:
 - 1. A patient receives the annual examination required by A.R.S. § 36-3708, and
 - 2. A report of the patient’s annual examination is prepared according to the behavioral health specialized transitional facility’s policies and procedures.

R9-10-1312. Medical Records

- A. An administrator shall ensure that:
 - 1. A medical record is established and maintained for each patient according to A.R.S. Title 12, Chapter 13, Article 7.1;
 - 2. An entry in a patient’s medical record is:
 - a. Recorded only by an individual authorized by facility policies and procedures to make the entry;
 - b. Dated, legible, and authenticated; and
 - c. Not changed to make the initial entry illegible;
 - 3. An order is:
 - a. Dated when the order is entered in the patient’s medical record and includes the time of the order;
 - b. Authenticated by a medical practitioner or behavioral health professional according to facility policies and procedures; and
 - c. If the order is a verbal order, authenticated by the medical practitioner or behavioral health professional issuing the order;
 - 4. If a rubber-stamp signature or an electronic signature is used to authenticate an order, the individual whose signature the rubber-stamp signature or electronic signature represents is accountable for the use of the rubber-stamp signature or the electronic signature;
 - 5. A patient’s medical record is available to an individual:
 - a. Authorized according to policies and procedures to access the patient’s medical record;
 - b. If the individual is not authorized according to policies and procedures, with the written consent of the patient or the patient’s representative; or
 - c. As permitted by law;
 - 6. A patient’s medical record is available to the patient or patient’s representative upon request at a time agreed upon by the patient or patient’s representative and the administrator; and
 - 7. A patient’s medical record is protected from loss, damage, or unauthorized use.
- B. If a behavioral health specialized transitional facility maintains patient’s medical records electronically, an administrator shall ensure that:



1. Safeguards exist to prevent unauthorized access, and
 2. The date and time of an entry in a patient's medical record is recorded by the computer's internal clock.
- C. An administrator shall ensure that a patient's medical record contains:
1. A copy of the court order requiring the patient to be detained at or committed to the behavioral health specialized transitional facility;
 2. The date the patient was detained at or committed to the behavioral health specialized transitional facility;
 3. Patient information that includes:
 - a. The patient's name;
 - b. The patient's address;
 - c. The patient's date of birth; and
 - d. Any known allergies, including medication allergies;
 4. Documentation of the patient's freedom from infectious tuberculosis as required in R9-10-1306(C)(2);
 5. Documentation of general consent and, if applicable, informed consent for treatment by the patient or the patient's representative, except in an emergency;
 6. If applicable, the name and contact information of the patient's representative and:
 - a. The document signed by the patient consenting for the patient's representative to act on the patient's behalf; or
 - b. If the patient's representative:
 - i. Is a legal guardian, a copy of the court order establishing guardianship; or
 - ii. Has a health care power of attorney established under A.R.S. § 36-3221 or a mental health care power of attorney executed under A.R.S. § 36-3282, a copy of the health care power of attorney or mental health care power of attorney;
 7. Documentation of medical history and physical examination of the patient;
 8. A copy of patient's health care directives, if applicable;
 9. Orders;
 10. The patient's assessment including updates;
 11. The patient's treatment plan including updates;
 12. Progress notes;
 13. Documentation of transportation provided to the patient;
 14. Documentation of behavioral health services and physical health services provided to the patient;
 15. Documentation of patient's annual examination and report required by A.R.S. § 36-3708;
 16. Documentation of the annual written notice of the patient of the patient's right to petition for:
 - a. Conditional release to a less restrictive alternative as required by A.R.S. § 36-3709, or
 - b. Discharged as required by A.R.S. § 36-3714;
 17. A copy of any petition for discharge or conditional release to a less restrictive alternative filed by the patient and provided to the behavioral health specialized transitional facility and the outcome of the petition;
 18. Documentation of the patient's, if applicable:
 - a. Conditional release to a less restrictive alternative; or
 - b. Discharge, including the disposition of the patient upon discharge;
 19. If a patient has been discharged, a discharge summary that includes:
 - a. A summary of the treatment provided to the patient;
 - b. The patient's progress in meeting treatment goals, including treatment goals that were and were not achieved;
 - c. The name, dosage, and frequency of each medication for the patient ordered at the time of the patient's discharge from the behavioral health specialized transitional facility;
 - d. A description of the disposition of the patient's possessions, funds, or medications; and
 - e. The date the patient was discharged from the behavioral health specialized transitional facility;
 20. If applicable:
 - a. Laboratory reports,
 - b. Radiologic reports,
 - c. Diagnostic reports,
 - d. Documentation of restraint or seclusion,
 - e. Patient follow-up instructions, and
 - f. Consultation reports; and
 21. Documentation of a medication administered to the patient that includes:
 - a. The date and time of administration;
 - b. The name, strength, dosage, and route of administration;
 - c. For a medication administered for pain:
 - i. An assessment of the patient's pain before administering the medication, and
 - ii. The effect of the medication administered;
 - d. For a psychotropic medication:
 - i. An assessment of the patient's behavior before administering the psychotropic medication, and
 - ii. The effect of the psychotropic medication administered;
 - e. The identification, signature, and professional designation of the individual administering or observing the self-administration of the medication;
 - f. Any adverse reaction a patient has to the medication; and
 - g. If applicable, a patient's refusal to take medication ordered for the patient.



GOVERNOR EXECUTIVE ORDER

Executive Order 2018-02 is being reproduced in each issue of the Administrative Register as a notice to the public regarding state agencies' rulemaking activities.

This order will appear in the Register until its expiration on December 31, 2018, and has been reproduced in its entirety as submitted.

EXECUTIVE ORDER 2018-02

Internal Review of Administrative Rules; Moratorium to Promote Job Creation and Customer-Service-Oriented Agencies

[M18-46]

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

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

WHEREAS, in 2015 the State of Arizona implemented a moratorium on all new regulatory rulemaking by State agencies through executive order, and renewed the moratorium in 2016 and 2017; and

WHEREAS, in 2017 the State of Arizona eliminated or repealed 676 needless regulations; and

WHEREAS, estimates show these eliminations saved job creators more than \$48 million in operating costs; and

WHEREAS, 161,000 private sector jobs have been added to Arizona since January 2015; and

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

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

WHEREAS, each State agency should evaluate its administrative rules using any available and reliable data and performance metrics; and

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

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

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

- 2. A State agency subject to this Order, shall not conduct any rulemaking, whether informal or formal, without the prior written approval of the Office of the Governor. In seeking approval, a State agency shall address one or more of the following as justification for the rulemaking:
a. To fulfill an objective related to job creation, economic development, or economic expansion in this State.
b. To reduce or ameliorate a regulatory burden while achieving the same regulatory objective.
c. To prevent a significant threat to the public health, peace, or safety.
d. To avoid violating a court order or federal law that would result in sanctions by a federal court for failure to conduct the rulemaking action.
e. To comply with a federal statutory or regulatory requirement if such compliance is related to a condition for the receipt of federal funds or participation in any federal program.
f. To comply with a state statutory requirement.
g. To fulfill an obligation related to fees or any other action necessary to implement the State budget that is certified by the Governor's Office of Strategic Planning and Budgeting.
h. To promulgate a rule or other item that is exempt from Title 41, Chapter 6, Arizona Revised Statutes, pursuant to section 41-1005, Arizona Revised Statutes.
i. To address matters pertaining to the control, mitigation, or eradication of waste, fraud, or abuse within an agency or wasteful, fraudulent, or abusive activities perpetrated against an agency.
j. To eliminate rules that are antiquated, redundant or otherwise no longer necessary for the operation of state government.
3. A State agency subject to this Order, shall not publicize any directives, policy statements, documents or forms on its website unless such are explicitly authorized by Arizona Revised Statutes or Arizona Administrative Code.
4. A State agency subject to this Order, shall coordinate with the Office of Economic Opportunity to prepare a statement of estimated regulatory costs analyzing the economic impact of agency rules, including an analysis of the effort of such rules on the creation and retention of jobs within the State of Arizona.
5. A State agency subject to this Order, shall review the agency's rules related to license reciprocity and identify opportunities to decrease burdens for qualified professionals who relocate to Arizona, whether administrative or legislative, and report these opportunities to the office of the Governor no later than July 1, 2018.



- 6. A State agency subject to this Order, shall review the agency’s rules to identify opportunities for veterans by recognizing the skills, credentials, and training received during military service in place of some or all of the training requirements for a specific license, and include additional opportunities in the report to the office of the Governor no later than July 1, 2018.
- 7. For the purposes of this Order, the term “State agencies,” includes without limitation, all executive departments, agencies, offices, and all state boards and commissions, except for: (a) any State agency that is headed by a single elected State official, (b) the Corporation Commission and (c) any board or commission established by ballot measure during or after the November 1998 general election. Those State agencies, boards and commissions excluded from this Order are strongly encouraged to voluntarily comply with this Order in the context of their own rulemaking processes.
- 8. This Order does not confer any legal rights upon any persons and shall not be used as a basis for legal challenges to rules, approvals, permits, licenses or other actions or to any inaction of a State agency. For the purposes of this Order, “person,” “rule,” and “rulemaking” have the same meanings prescribed in Arizona Revised Statutes Section 41-1001.
- 9. This Executive Order expires on December 31, 2018.

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

Douglas A. Ducey
GOVERNOR

DONE at the Capitol in Phoenix on this Twelfth day of February in the Year Two Thousand and Eighteen and of the Independence of the United States of America the Two Hundred and Thirty-Sixth.

ATTEST:
Michele Reagan
SECRETARY OF STATE

REGISTER INDEXES

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

Abbreviations for rulemaking activity in this Index include:

PROPOSED RULEMAKING

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

SUPPLEMENTAL PROPOSED RULEMAKING

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

FINAL RULEMAKING

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

SUMMARY RULEMAKING**PROPOSED SUMMARY**

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

FINAL SUMMARY

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

EXPEDITED RULEMAKING**PROPOSED EXPEDITED**

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

SUPPLEMENTAL EXPEDITED

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

FINAL EXPEDITED

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

EXEMPT RULEMAKING**EXEMPT PROPOSED**

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

EXEMPT SUPPLEMENTAL PROPOSED

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

FINAL EXEMPT RULEMAKING

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

EMERGENCY RULEMAKING

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

RECODIFICATION OF RULES

RC = Recodified

REJECTION OF RULES

RJ = Rejected by the Attorney General

TERMINATION OF RULES

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

RULE EXPIRATIONS

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

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RULES EFFECTIVE DATES CALENDAR

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

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



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



REGISTER PUBLISHING DEADLINES

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

Deadline Date (paper only) Friday, 5:00 p.m.	Register Publication Date	Oral Proceeding may be scheduled on or after
March 23, 2018	April 13, 2018	May 14, 2018
March 30, 2018	April 20, 2018	May 21, 2018
April 6, 2018	April 27, 2018	May 29, 2018
April 13, 2018	May 4, 2018	June 4, 2018
April 20, 2018	May 11, 2018	June 11, 2018
April 27, 2018	May 18, 2018	June 18, 2018
May 4, 2018	May 25, 2018	June 25, 2018
May 11, 2018	June 1, 2018	July 2, 2018
May 18, 2018	June 8, 2018	July 9, 2018
May 25, 2018	June 15, 2018	July 16, 2018
June 1, 2018	June 22, 2018	July 23, 2018
June 8, 2018	June 29, 2018	July 30, 2018
June 15, 2018	July 6, 2018	August 6, 2018
June 22, 2018	July 13, 2018	August 13, 2018
June 29, 2018	July 20, 2018	August 20, 2018
July 6, 2018	July 27, 2018	August 27, 2018
July 13, 2018	August 3, 2018	September 4, 2018
July 20, 2018	August 10, 2018	September 10, 2018
July 27, 2018	August 17, 2018	September 17, 2018
August 3, 2018	August 24, 2018	September 24, 2018
August 10, 2018	August 31, 2018	October 1, 2018
August 17, 2018	September 7, 2018	October 9, 2018
August 24, 2018	September 14, 2018	October 15, 2018
August 31, 2018	September 21, 2018	October 22, 2018
September 7, 2018	September 28, 2018	October 29, 2018
September 14, 2018	October 5, 2018	November 5, 2018
September 21, 2018	October 12, 2018	November 13, 2018
September 28, 2018	October 19, 2018	November 19, 2018
October 5, 2018	October 26, 2018	November 26, 2018
October 12, 2018	November 2, 2018	December 3, 2018



GOVERNOR’S REGULATORY REVIEW COUNCIL DEADLINES

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

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

GOVERNOR’S REGULATORY REVIEW COUNCIL DEADLINES FOR 2018

[M18-01]

DEADLINE FOR PLACEMENT ON AGENDA*	FINAL MATERIALS SUBMITTED TO COUNCIL	DATE OF COUNCIL STUDY SESSION	DATE OF COUNCIL MEETING
Tuesday November 21, 2017	Tuesday December 19, 2017	Wednesday January 3, 2018	Tuesday January 9, 2018
Tuesday December 19, 2017	Tuesday January 23, 2018	Tuesday January 30, 2018	Tuesday February 6, 2018
Tuesday January 23, 2018	Tuesday February 20, 2018	Tuesday February 27, 2018	Tuesday March 6, 2018
Tuesday February 20, 2018	Tuesday March 20, 2018	Tuesday March 27, 2018	Tuesday April 3, 2018
Tuesday March 20, 2018	Tuesday April 17, 2018	Tuesday April 24, 2018	Tuesday May 1, 2018
Tuesday April 17, 2018	Tuesday May 22, 2018	Wednesday May 30, 2018	Tuesday June 5, 2018
Tuesday May 22, 2018	Tuesday June 19, 2018	Tuesday June 26, 2018	Tuesday July 10, 2018
Tuesday June 19, 2018	Tuesday July 24, 2018	Tuesday July 31, 2018	Tuesday August 7, 2018
Tuesday July 24, 2018	Tuesday August 21, 2018	Tuesday August 28, 2018	Wednesday September 5, 2018
Tuesday August 21, 2018	Tuesday September 18, 2018	Tuesday September 25, 2018	Tuesday October 2, 2018
Tuesday September 18, 2018	Tuesday October 23, 2018	Tuesday October 30, 2018	Tuesday November 6, 2018
Tuesday October 23, 2018	Tuesday November 20, 2018	Tuesday November 27, 2018	Tuesday December 4, 2018
Tuesday November 20, 2018	Tuesday December 18, 2018	Thursday January 3, 2019	Tuesday January 8, 2019
Tuesday December 18, 2018	Tuesday January 22, 2019	Tuesday January 29, 2019	Tuesday February 5, 2019

* 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.