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# Arizona Administrative REGISTER

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**Vol. 26, Issue 29** **~ Administrative Register Contents ~** **July 17, 2020**

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**DIRECTOR**
*Administrative Rules Division*
Scott Cancelosi

**PUBLISHER**
***Secretary of State***
**KATIE HOBBS**

**RULES MANAGING EDITOR**
*Arizona Administrative Register*
Rhonda Paschal

# From the Publisher

## ABOUT THIS PUBLICATION

The authenticated pdf of the *Administrative Register* (A.A.R.) posted on the Arizona Secretary of State's website is the official published version for 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 *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 notices of rules terminated by the agency and rules that have expired.

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Rules can be: made (all new text); amended (rules on file, changing text); repealed (removing text); or renumbered (moving rules to a different Section number).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

New rules in this publication (whether proposed or made) are denoted with underlining; repealed text is stricken.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 authenticated pdf of *Code* chapters posted on the Arizona Secretary of State's website are the official published version of rules in the A.A.C. 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.

Arizona Administrative Register

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**PUBLISHER**
**Secretary of State**
Katie Hobbs

**ADMINISTRATIVE RULES STAFF**
**Director**
Scott Cancelosi

**Rules Managing Editor**
Rhonda Paschal

**Administrative Register**
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 back of the *Register.* These dates include file submittal dates with a three-week turnaround from filing to published document.

**CONTACT US**
Administrative Rules Division
Office of the Secretary of State
1700 W. Washington Street, Fl. 2
Phoenix, AZ 85007
(602) 364-3223

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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.

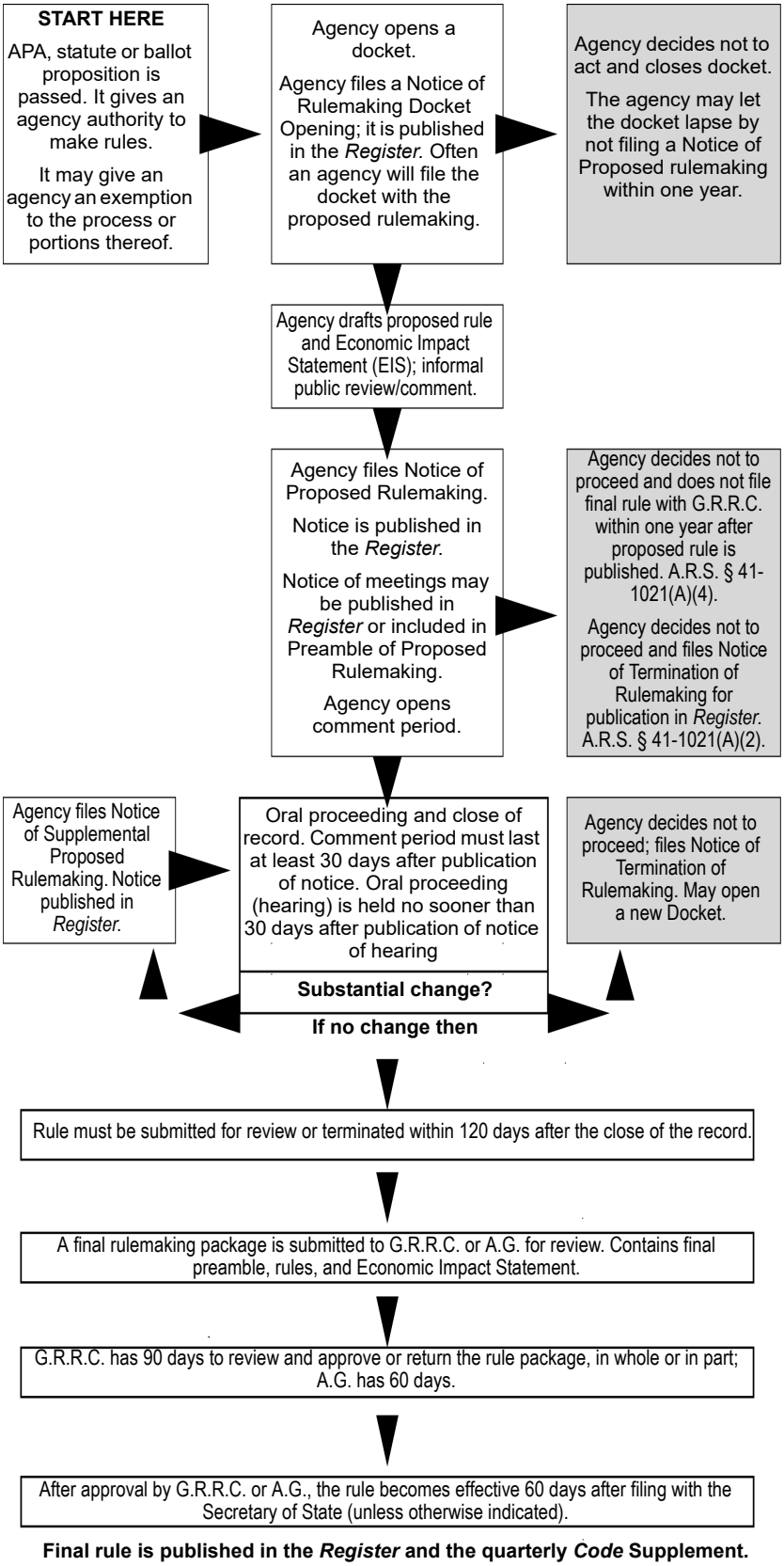
An agency may not have a public meeting scheduled on the Notice of Proposed Rulemaking. If not, you may request that the agency schedule a proceeding. This request must be put in writing within 30 days after the published Notice of Proposed Rulemaking.

### 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 complied 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 Rulemakings.

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

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

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

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

## NOTICE OF PROPOSED RULEMAKING
### TITLE 4. PROFESSIONS AND OCCUPATIONS
### CHAPTER 19. BOARD OF NURSING

[R20-112]

**PREAMBLE**

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

| Article, Part or Section Affected (as applicable) | Rulemaking Action |
|---|---|
| R4-19-101 | Amend |
| R4-19-102 | Amend |
| R4-19-207 | Amend |
| R4-19-208 | Amend |
| R4-19-209 | Amend |
| R4-19-210 | Amend |
| R4-19-216 | Amend |
| R4-19-301 | Amend |
| R4-19-304 | Amend |
| R4-19-305 | Amend |
| R4-19-308 | Amend |
| R4-19-501 | Amend |
| R4-19-502 | Amend |
| R4-19-503 | Amend |
| R4-19-504 | Amend |
| R4-19-505 | Amend |
| R4-19-506 | Amend |
| R4-19-507 | Amend |
| R4-19-508 | Amend |
| R4-19-511 | Amend |
| R4-19-512 | Amend |
| R4-19-513 | Amend |
| R4-19-514 | Amend |
| R4-19-604 | Amend |
| R4-19-804 | Amend |
| R4-19-806 | Amend |
| R4-19-809 | Amend |
| R4-19-815 | Amend |

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

Authorizing statutes: A.R.S. § 32-1606(A)(1)

Implementing statutes: A.R.S. §§ 32-1601(3), (5), (6), (7), (8), (9), (10), (12), (14), (15), (16), (21), (22), (23), (26); 32-1605.01(B)(1), (3), (4), (5), (8); 32-1606(B)(1), (2), (3), (5), (8), (10), (12), (13), (16), 18), (21), (22), (27); 32-1609; 32-1634(A)(28); 32-1634.04; 32-1635; 32-1635.01; 32-1636(D); 32-1640; 32-1644; 32-1651; 32-1660; 32-1663(G); 32-1663.01(A)(2); 32-1921(A)(1); and 32-3226.

**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: 26 A.A.R. 1432, July 17, 2020 (*in this issue*)

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


| | |
|---|---|
| Name: | Joey Ridenour RN, MS, FAAN<br>Executive Director |
| Address: | Board of Nursing<br>1740 W. Adams Ave., Suite 2000<br>Phoenix, AZ 85007 |
| Telephone: | (602) 771-7801 |
| Fax: | (602) 771-7888 |
| E-mail: | jridenour@azbn.gov |
| Website: | www.azbn.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:**

**R4-19-101. Definitions**

The Board approved amending this Section to include a definition of "advance practice registered nurse" for clarity throughout Arizona Administrative Code, Title 4, Chapter 19.

**R4-19-102. Time-frames for Licensure, Certification, or Approval**

The Board seeks to amend this section to align the references to address from the current "mailing address" to the new "address of record", which is defined in and consistent with new legislation, codified in A.R.S. § 32-3226.

**R4-19-207. New Programs, Proposal Approval; Provisional Approval**

The Board seeks to amend this section to reduce burdens on regulated parties by eliminating the requirement for submission to the Board of paper copies of documents.

**R4-19-208. Full Approval of a New Nursing Program**

The Board seeks to amend this section to reduce burdens on regulated parties by eliminating the requirement for submission to the Board of paper copies of documents.

**R4-19-209. Nursing Program Change**

The Board seeks to amend this section to reduce burdens on regulated parties by eliminating the requirement for submission to the Board of paper copies of documents.

**R4-19-210. Renewal of Approval of Nursing Programs Not Accredited by a National Nursing Accrediting Agency**

The Board seeks to amend this section to reduce burdens on regulated parties by eliminating the requirement for submission to the Board of paper copies of documents.

**R4-19-216. Approval of a Refresher Program**

The Board seeks to amend this section to reduce burdens on regulated parties by eliminating the requirement for submission to the Board of paper copies of documents.

**R4-19-301. Licensure by Examination**

The Board seeks to amend this section to align the references to address from the current "mailing address" to the new "address of record", which is defined in and consistent with new legislation, codified in A.R.S. § 32-3226.

**R4-19-304. Temporary License**

The Board seeks to amend this section to expedite processing temporary license applications to reduce regulatory burdens on stakeholders. By maintaining the applicant's requirement to submit fingerprints, but reducing the requirement to receive the report back from law enforcement, which can sometimes cause delays, the Board maintains a balance of public protection and efficiency to stakeholders, so that they may begin work earlier.

**R4-19-305. License Renewal**

The Board seeks to amend this section to align the references to address from the current "mailing address" to the new "address of record", which is defined in and consistent with A.R.S. § 32-3226.

**R4-19-308. Change of Name or Address**

The Board seeks to amend this section to align the references to address from the current "mailing address" to the new "address of record", which is defined in and consistent with A.R.S. § 32-3226. The Board is requiring licensees and applicants to submit a residential address due to nurse licensure compact requirements for "primary state of residence", and because most licensees and applicants already submit residential addresses. The Board does not anticipate this will be an increased burden on its regulated parties.

**R4-19-501. Roles and Population Foci of Advanced Practice Registered Nursing (APRN); Certification Programs**

Adding certified nurse midwife (CNM) as a separate APRN category, rather than as a subcategory under registered nurse practitioner (RNP). Consistent with legislative changes to A.R.S. §§ 32-1601(5) and 32-1636(D).

**R4-19-502. Requirements for APRN Programs**

Adding certified nurse midwife (CNM) as a separate APRN category, rather than as a subcategory under registered nurse practitioner (RNP). Consistent with changes to A.R.S. §§ 32-1601(5) and 32-1636(D).

**R4-19-503. Application for Approval of an Advanced Practice Registered Nursing Program; Approval by Board; Provisional Approval by Executive Director**

Adding certified nurse midwife (CNM) as a separate APRN category, rather than as a subcategory under registered nurse practitioner (RNP). Consistent with changes to A.R.S. §§ 32-1601(5) and 32-1636(D).
Also, section (F) will permit the Executive Director to issue a provisional approval to APRN nursing programs, which is intended to reduce regulatory burdens by allowing APRN nursing programs that have submitted complete applications and appear to meet criteria to begin to operate in Arizona between Board meetings, rather than to necessarily wait for full Board approval.

**R4-19-504. Notice of Deficiency; Unprofessional APRN Program Conduct**
Amendment limited to title, clarification that programs included in this rules are "APRN" programs.

**R4-19-505. Requirements for Initial APRN Certification**
These proposed amendments include the "address of record" language update to match A.R.S. § 32-3226, adding CNM as a separate APRN category, and some technical edits that are non-substantive.

**R4-19-506. Expiration of APRN Certificate; Practice Requirement; Renewal**
Proposed amendments include adding CNM as a separate APRN category, and consistency in use of "APRN" acronym.

**R4-19-507. Temporary Advanced Practice Certificate; Temporary Prescribing and Dispensing Authority**
Proposed amendments include adding CNM as a separate APRN category, consistency in use of "APRN" acronym, and adding clinical nurse specialists (CNS) as eligible to obtain temporary prescribing and dispensing authority, pursuant to A.R.S. § 32-1651, *inter alia*.

**R4-19-508. Standards Related to ~~Registered Nurse Practitioner~~ RNP, CNM, and CNS Scope of Practice**
Proposed amendments include adding CNM and CNS as APRN categories authorized to perform other functions as APRNs, including prescribing.

**R4-19-511. Prescribing and Dispensing Authority; Prohibited Acts**
Proposed amendments to this section, similar to sections 507 and 508, including adding CNM and CNS as separate categories; authorizing CNM and CNS to perform functions previously limited to RNPs; specifically adding CNS prescribing limitations referencing A.R.S. § 32-1651; and authorizing CRNAs to obtain prescribing-only certificates, consistent with A.R.S. § 32-1634.04, and other applicable laws.

**R4-19-512. Prescribing Drugs and Devices**
Proposed amendments add CNM and CNS to RNP as authorized APRNs eligible to be authorized to prescribe drugs and devices, with applicable limitations for CNS.

**R4-19-513. Dispensing Drugs and Devices**
Proposed amendments add CNM and CNS to RNP as authorized APRNs eligible to be authorized to dispense drugs and devices, with applicable limitations for CNS.

**R4-19-514. Standards Related to Clinical Nurse Specialist Scope of Practice**
Proposed technical amendment, and clarification of expanded eligibility of CNS to prescribe, order, administer and dispense therapeutic measures, pursuant to A.R.S. § 32-1651, *inter alia*.

**R4-19-604. Notice of Hearing; Response**
The Board seeks to amend this section to align the references to address from the current "mailing address" to the new "address of record", which is defined in and consistent with A.R.S. § 32-3226.

**R4-19-804. Initial Approval and Re-Approval of Training Programs**
Proposed technical amendment to title; elimination of requirement to submit paper documents to ease regulatory burden on regulated parties.

**R4-19-806. Initial Nursing Assistant Licensure (LNA) and Medication Assistant Certification**
The Board seeks to amend this section to align the references to address from the current "mailing address" to the new "address of record", which is defined in and consistent with A.R.S. § 32-3226.

**R4-19-809. Nursing Assistant Licensure and Medication Assistant Certificate Renewal**
The Board seeks to amend this section to align the references to address from the current "mailing address" to the new "address of record", which is defined in and consistent with A.R.S. § 32-3226.

**R4-19-815. Reissuance or Subsequent Issuance of a Nursing Assistant License or Medication Assistant Certificate**
Proposed technical amendment to add term "licensure" to current "certification". "Certification" refers to medication assistants and "licensure" is applicable to licensed nursing assistants, consistent with licensed nursing assistant existing title.

**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 rules, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**
There are no studies that Board either relied on or did not rely on in its evaluation or justification for the rules.

**7. A showing of good cause why the rules are necessary to promote a statewide interest if the rules 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 Board does not anticipate a substantial economic impact from the majority of the amendments in this rulemaking. The Board regulates approximately 95,921 Registered Nurses ("RNs"), 9,533 Registered Nurse Practitioners, 10,713 Licensed Practical Nurses ("LPNs"), 9,218 Licensed Nursing Assistants ("LNAs"), 19,516 Certified Nursing Assistants ("CNAs"), 169 Clinical Nurse Specialists, 290 Certified Nurse Midwives, 1004 Certified Registered Nurse Anesthetists, and 23 Certified Medical Assistants ("CMAs"). The Board regulates approximately five LPN programs, 31 RN programs, 101 CNA programs, 2 CMA programs

and 13 refresher programs.

The Board, regulated parties and the public are all expected to benefit from the clarity and reduced regulatory burden of this rulemaking.

The following amendments are not expected to have a substantial economic impact on the Board, regulated parties, or the general public.

- R4-19-101 was amended to provide a definition of "APRN" and is not expected to have any economic impact.
- R4-19-102 was amended to conform address terminology with new statutory language (A.R.S. § 32-3226) and is not expected to have any economic impact.
- R4-19-207 amendments may produce a minimal economic benefit for programs by decreasing costs associated with producing paper copies of documents for the Board.
- R4-19-208 amendments may produce a minimal economic benefit for programs by decreasing costs associated with producing paper copies of documents for the Board.
- R4-19-209 amendments may produce a minimal economic benefit for programs by decreasing costs associated with producing paper copies of documents for the Board.
- R4-19-210 amendments may produce a minimal economic benefit for programs by decreasing costs associated with producing paper copies of documents for the Board.
- R4-19-216 amendments may produce a minimal economic benefit for programs by decreasing costs associated with producing paper copies of documents for the Board.
- R4-19-301 – was amended to conform address terminology with new statutory language (A.R.S. § 32-3226) and is not expected to have any economic impact.
- R4-19-304 – is expected to have a positive economic impact by allowing applicants to being to work sooner on a temporary license, which may also benefit Arizona employers including small businesses.
- R4-19-305 – was amended to conform address terminology with new statutory language (A.R.S. § 32-3226) and is not expected to have any economic impact.
- R4-19-308 - was amended to conform address terminology with new statutory language (A.R.S. § 32-3226), clarify that licensees and applicants still need to submit residential addresses, and is not expected to have any economic impact.
- R4-19-501 – amendments include adding CNM as a separate APRN category, consistent with statute, and CNMs were already practicing as APRNs. This is a clarification but is not anticipated to have any economic impact.
- R4-19-502 – again, clarifying that CNM is a separate APRN category, and not expected to have any economic input.
- R4-19-503 – adding CNM as a separate APRN category, which is not expected to have any economic input. Proposed amendments would also permit the Executive Director to issue provisional approval pending application review by the Board, which is expected to have a minimal economic benefit by permitting programs to operate earlier in Arizona.
- R4-19-504 – title change only, which is not expected to create any economic impact.
- R4-19-505 – proposed changes to "address of record" language and technical edits that are not expected to create any economic impact.
- R4-19-506 – no economic impact anticipate with clarification of CNM as a separate APRN category and technical change regarding use of acronyms in the rules.
- R4-19-507 – again clarifying that CNM is a separate APRN category, and use of acronyms, that are not expected to have any economic impact. The proposed addition of CNS as being eligible to obtain temporary prescribing and dispensing authority is expected to create a modest economic benefit to the CNS certificate holders and their businesses or employers.
- R4-19-508 – same as above, section 507.
- R4-19-511 – same as above, section 507 and 508, and adding clarifications related to CRNA prescribing. This is expected to have a positive economic impact for the APRN categories that will now be eligible and/or have clarity with their prescribing authority.
- R4-19-512 and 513 – these proposed amendments are anticipated to have a positive economic impact, as described above, in section 507.
- R4-19-514 – anticipated positive economic benefit, as described above, in section 507. Technical amendment not anticipated to cause any economic impact.
- R4-19-604 – proposed change of wording related to "address of record" not anticipated to create any economic impact.
- R4-19-804 - amendments may produce a minimal economic benefit for applicants by decreasing costs associated with producing paper copies of documents for the Board.
- R4-19-806 - proposed change of wording related to "address of record" not anticipated to create any economic impact.
- R4-19-809 – proposed change of wording related to "address of record" not anticipated to create any economic impact.

- R4-19-815 – the proposed technical amendment is not anticipated to create any economic impact.

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

Name: Joey Ridenour RN, MS, FAAN
Executive Director
Address: Board of Nursing
1740 W. Adams Ave., Suite 2000
Phoenix, AZ 85007
Telephone: (602) 771-7801
Fax: (602) 771-7888
E-mail: jridenour@azbn.gov
Website: azbn.gov

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

The Board will hold an oral proceeding on August 18, 2020 at 1 to 2 p.m., in Board Room A at 1740 W. Adams Ave., Phoenix, AZ 85007. The Board will accept written comments submitted to Joey Ridenour, Executive Director, 1740 W. Adams Ave., Suite 2000, Phoenix, AZ 85007 until the close of record at 5 p.m., August 18, 2020.

**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 question:**

There are no other matters prescribed by statute applicable to the Board or this specific class of rules.

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

This rulemaking does not require a permit; however, the rules in Articles 2, 3, 5, and 8 relate to issuing licenses, certificates and approvals, all of which can be considered a general permit under § 41-1001(10).

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

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

No analysis was submitted

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

There is no material incorporated by reference.

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

## TITLE 4. PROFESSIONS AND OCCUPATIONS

## CHAPTER 19. BOARD OF NURSING

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## ARTICLE 1. DEFINITIONS AND TIME-FRAMES

**R4-19-101. Definitions**

"Abuse" means a misuse of power or betrayal of trust, respect, or intimacy by a nurse, nursing assistant, or applicant that causes or is likely to cause physical, mental, emotional, or financial harm to a client.

"Administer" means the direct application of a medication to the body of a patient by a nurse, whether by injection, inhalation, ingestion, or any other means.

"Admission cohort" means a group of students admitted at the same time to the same curriculum in a regulated nursing, nursing assistant, or advanced practice nursing program or entering the first clinical course in a regulated program at the same time. "Same time" means on the same date or within a narrow range of dates pre-defined by the program.

"Advance practice registered nurse (APRN)" means either a registered nurse practitioner (RNP), certified nurse midwife (CNM), certified registered nurse anesthetist (CRNA), or clinical nurse specialist (CNS), certified by the Board.

"Applicant" means a person seeking licensure, certification, prescribing, or prescribing and dispensing privileges, or an entity seeking approval or re-approval, if applicable, of a:

CNS or RNP nursing program,

Credential evaluation service,

Nursing assistant training program,

Nursing program,

Nursing program change, or

Refresher program.

"Approved national nursing accrediting agency" means an organization recognized by the United States Department of Education as an accrediting agency for a nursing program.

"Assign" means a nurse designates nursing activities to be performed by another nurse that are consistent with the other nurse's scope of practice.

"Certificate or diploma in practical nursing" means the document awarded to a graduate of an educational program in practical nursing.

"Certified medication assistant" means a certified nursing assistant who meets Board qualifications and is additionally certified by the Board to administer medications under A.R.S. § 32-1650 et. seq.

"CES" means credential evaluation service.

"Client" means a recipient of care and may be an individual, family, group, or community.

"Clinical instruction" means the guidance and supervision provided by a nursing, nursing assistant or medication assistant program faculty member while a student is providing client care.

"CMA" means certified medication assistant.

"CNA" means a certified nursing assistant, as defined in A.R.S § 32-1601(4).

"CNS" means clinical nurse specialist, as defined in A.R.S. § 32-1601(7).

"Collaborate" means to establish a relationship for consultation or referral with one or more licensed physicians on an as-needed basis. Supervision of the activities of a registered nurse practitioner by the collaborating physician is not required.

"Contact hour" means a unit of organized learning, which may be either clinical or didactic and is either 60 minutes in length or is otherwise defined by an accrediting agency recognized by the Board.

"Continuing education activity" means a course of study related to nursing practice that is awarded contact hours by an accrediting agency recognized by the Board, or academic credits in nursing or medicine by a regionally or nationally accredited college or university.

"CRNA" means a certified registered nurse anesthetist as defined in A.R.S. § 32-1601(5).

"DEA" means the federal Drug Enforcement Administration.

"Dispense" means to deliver a controlled substance or legend drug to an ultimate user.

"Dual relationship" means a nurse or CNA simultaneously engages in both a professional and nonprofessional relationship with a patient or resident or a patient's or resident's family that is avoidable, non-incidental, and results in the patient or resident or the patient's or resident's family being exploited financially, emotionally, or sexually.

"Eligibility for graduation" means that the applicant has successfully completed all program and institutional requirements for receiving a degree or diploma but is delayed in receiving the degree or diploma due to the graduation schedule of the institution.

"Endorsement" means the procedure for granting an Arizona nursing license to an applicant who is already licensed as a nurse in another state or territory of the United States and has passed an exam as required by A.R.S. §§ 32-1633 or 32-1638 or an Arizona nursing assistant or medication assistant certificate to an applicant who is already listed on a nurse aide register or certified as a medication assistant in another state or territory of the United States.

"Episodic nursing care" means nursing care at nonspecific intervals that is focused on the current needs of the individual.

"Failure to maintain professional boundaries" means any conduct or behavior of a nurse or CNA that, regardless of the nurse's or CNA's intention, is likely to lessen the benefit of care to a patient or resident or a patient's or resident's family or places the patient, resident or the patient's or resident's family at risk of being exploited financially, emotionally, or sexually.

"Family," as applied to R4-19-511, means individuals who are related by blood, marriage, adoption, legal guardianship, or domestic partnership, or who are cohabitating or romantically involved.

"Full approval" means the status granted by the Board when a nursing program, after graduation of its first class, demonstrates the ability to provide and maintain a program in accordance with the standards provided by A.R.S. Title 32, Chapter 15 and this Chapter.

"Good standing" means the license of a nurse, or the certificate of a nursing assistant, is current, and the nurse or nursing assistant is not presently subject to any disciplinary action, consent order, or settlement agreement.

"Independent nursing activities" means nursing care within an RN's scope of practice that does not require authorization from another health professional.

"Initial approval" means the permission, granted by the Board, to an entity to establish a nursing assistant training program, after the Board determines that the program meets the standards provided by A.R.S. Title 32, Chapter 15 and this Chapter.

"Licensure by examination" means the granting of permission to practice nursing based on an individual's passing of a prescribed examination and meeting all other licensure requirements.

"LPN" means licensed practical nurse.

"NCLEX" means the National Council Licensure Examination.

"Nurse" means a licensed practical or registered nurse.

"Nursing diagnosis" means a clinical judgment, based on analysis of comprehensive assessment data, about a client's response to actual and potential health problems or life processes. Nursing diagnosis statements include the actual or potential problem, etiology or risk factors, and defining characteristics, if any.

"Nursing process" means applying problem-solving techniques that require technical and scientific knowledge, good judgment, and decision-making skills to assess, plan, implement, and evaluate a plan of care.

"Nursing program" means a formal course of instruction designed to prepare its graduates for licensure as registered or practical nurses.

"Nursing program administrator" means a nurse educator who meets the requirements of A.R.S. Title 32, Chapter 15 and this Chapter and has the administrative responsibility and authority for the direction of a nursing program.

"Nursing program faculty member" means an individual working full or part time within a nursing program who is responsible for either developing, implementing, teaching, evaluating, or updating nursing knowledge, clinical skills, or curricula.

"Nursing-related activities or duties" means client care tasks for which education is provided by a basic nursing assistant training program.

"P & D" means prescribing and dispensing.

"Parent institution" means the educational institution in which a nursing program, nursing assistant training program or medication assistant program is conducted.

"Patient" means an individual recipient of care.

"Pharmacology" means the science that deals with the study of drugs.

"Physician" means a person licensed under A.R.S. Title 32, Chapters 7, 8, 11, 13, 14, 17, or 29, or by a state medical board in the United States.

"Preceptor" means a licensed nurse or other health professional who meets the requirements of A.R.S. Title 32, Chapter 15 and this Chapter who instructs, supervises and evaluates a licensee, clinical nurse specialist, nurse practitioner or pre-licensure nursing student, for a defined period.

"Preceptorship" means a clinical learning experience by which a learner enrolled in a nursing program, nurse refresher program, clinical nurse specialist, or registered nurse practitioner program or as part of a Board order provides nursing care while assigned to a health professional who holds a license or certificate equivalent to or higher than the level of the learner's program or in the case of a nurse under Board order, meets the qualifications in the Board order.

"Prescribe" means to order a medication, medical device, or appliance for use by a patient.

"Private business" means any individual or sole proprietorship, partnership, limited liability partnership, limited liability company, corporation or other legal business entity.

"Proposal approval" means that an institution has met the standards provided by A.R.S. Title 32, Chapter 15 and this Chapter to proceed with an application for provisional approval to establish a pre-licensure nursing program in Arizona.

"Provisional approval" means that an institution has met the standards provided by A.R.S. Title 32, Chapter 15 and this Chapter to implement a pre-licensure nursing program in Arizona.

"Refresher program" means a formal course of instruction designed to provide a review and update of nursing theory and practice.

"Register" means a listing of Arizona certified nursing assistants maintained by the Board that includes the following about each nursing assistant:

Identifying demographic information;

Date placed on the register;

Date of initial and most recent certification, if applicable; and

Status of the nursing assistant certificate, including findings of abuse, neglect, or misappropriation of property made by the Arizona Department of Health Services, sanctions imposed by the United States Department of Health and Human Services, and disciplinary actions by the Board.

"Resident" means a patient who receives care in a long-term care facility or other residential setting.

"RN" means registered nurse.

"RNP" means a registered nurse practitioner as defined in A.R.S. § 32-1601(20).

"SBTPE" means the State Board Test Pool Examination.

"School nurse" means a registered nurse who is certified under R4-19-309.

"Secure examination" means a written test given to an examinee that:

Is administered under conditions designed to prevent cheating;

Is taken by an individual examinee without access to aides, textbooks, other students or any other material that could influence the examinee's score; and,

After opportunity for examinee review, is either never used again or stored such that only designated employees of the educational institution are permitted to access the test.

"Self-study" means a written self-evaluation conducted by a nursing program to assess the compliance of the program with the standards listed in Article 2.

"Standards related to scope of practice" means the expected actions of any nurse who holds the identified level of licensure.

"Substance use disorder" means misuse, dependence or addiction to alcohol, illegal drugs or other substances.

"Supervision" means the direction and periodic consultation provided to an individual to whom a nursing task or patient care activity is delegated.

"Unlicensed assistive personnel" or "UAP" means a CNA or any other unlicensed person, regardless of title, to whom nursing tasks are delegated.

"Verified application" means an affidavit signed by the applicant attesting to the truthfulness and completeness of the application and includes an oath that applicant will conform to ethical professional standards and obey the laws and rules of the Board.

**R4-19-102. Time-frames for Licensure, Certification, or Approval**

**A.** In this Section:

1. "Administrative completeness" or "administratively complete" means Board receipt of all application components required by statute or rule and necessary to begin the substantive review time-frame.
2. "Application packet" means an application form provided by the Board and the documentation necessary to establish an applicant's qualifications for licensure, certification, or approval.
3. "Comprehensive written request for additional information" means written communication after the administrative completeness time-frame by the Board to an applicant in person or at the ~~mailing~~ address of record or electronic address identified on the application notifying the applicant that additional information, including missing documents is needed before the Board can grant the license. The written communication shall:
   a. Contain a list of information required by statute or rule and necessary to complete the application or grant the license, and
   b. Inform the applicant that the request suspends the running of days within the time-frame, and
   c. Be effective on the date of issuance which is:
      i. The date of its postmark, if mailed;
      ii. The date of delivery, if delivered in person by a Board employee or agent; or
      iii. The date of delivery to the electronic address if delivered electronically.
4. "Deficiency notice" means written communication by the Board to an applicant in person or at the ~~mailing~~ address of record or electronic address identified on the application notifying the applicant that additional information, including missing documents, is needed to complete the application. The written communication shall:
   a. Contain a list of information required by statute or rule and necessary to complete the application or grant the license;
   b. Inform the applicant that the request suspends the running of days within the time-frame; and
   c. Be effective on the date of issuance which is:
      i. The date of its postmark, if mailed;
      ii. The date of delivery, if delivered in person by a Board employee or agent; or
      iii. The date of delivery to the electronic address if delivered electronically.
5. "Notice of administrative completeness" means written communication by the Board to an applicant in person or at the ~~mailing~~ address of record or electronic address identified on the application notifying the applicant the application contains all information required by statute or rule to complete the application.
6. "Overall time-frame" has the same meaning as A.R.S. § 41-1072(2).
7. "Substantive review time-frame" has the same meaning as A.R.S. § 41-1072(3).

**B.** In computing the time-frames in this Section, the day of the act or event from which the designated period begins to run is not included. The last day of the period is included unless it is a Saturday, Sunday, or official state holiday, in which event the period runs until the end of the next day that is not a Saturday, Sunday, or official state holiday.

**C.** For each type of licensure, certification, or approval issued by the Board, the overall time-frame described in A.R.S. § 41-1072(2) is listed in Table 1. An applicant may submit a written request to the Board for an extension of time in which to provide a complete application. The request for an extension of time shall be submitted to the Board office before the deadline for submission of a complete application and shall state the reason that the applicant is unable to comply with the time-frame requirements in Table 1 and the amount of additional time requested. The Board may grant an extension of time based on whether the Executive Director of the Board finds that the applicant is unable to comply within the time-frame due to circumstances beyond the applicant's control and that the additional information can reasonably be supplied during the extension of time.

**D.** For each type of licensure, certification, or approval issued by the Board, the administrative completeness review time-frame described in A.R.S. § 41-1072(1) is listed in Table 1 and begins to run when the Board receives an application packet.

1. If the application packet is not administratively complete, the Board shall send a deficiency notice to the applicant. The time for the applicant to respond to a deficiency notice begins to run on the date the deficiency notice is issued.
   a. The deficiency notice shall list each deficiency.
   b. The applicant shall submit to the Board the missing information listed in the deficiency notice within the period specified in Table 1 for responding to a deficiency notice. The time-frame for the Board to complete the administrative review is suspended until the Board receives the missing information.
   c. If an applicant fails to provide the missing information listed in the deficiency notice within the period specified in Table 1, the Board shall close the applicant's file and send a notice to the applicant by U.S. mail and electronically, if an electronic address is included in the application.
   d. If the applicant is the subject of an investigation, the Board may continue to process the application. Failure of the applicant to supply the requested information may result in denial of the license or certificate based on information gathered during the investigation.
2. If the application packet is administratively complete, the Board shall send a written notice of administrative completeness to the applicant.
3. If the Board issues a license, certificate, or approval during the administrative completeness review time-frame, the Board shall not send a separate written notice of administrative completeness.

**E.** For each type of licensure, certification, or approval issued by the Board, the substantive review time-frame described in A.R.S. § 41-1072(3) is listed in Table 1 and begins to run on the date the notice of administrative completeness is issued.

1. During the substantive review time-frame, an applicant may make a request to withdraw an application packet. The Board may deny the request to withdraw an application packet if the applicant is the subject of an investigation, based on information gathered during the investigation.
2. If an applicant discloses or the Board receives allegations of unprofessional conduct as described in A.R.S. § 32-1601 or this Chapter, the Board shall review the allegations and may investigate the applicant. The Board may require the applicant to pro-

vide additional information as prescribed in subsection (E)(3) based on its assessment of whether the conduct is or might be harmful or dangerous to the health of a client or the public.

3. During the substantive review time-frame, the Board may make one comprehensive written request for additional information. The applicant shall submit the additional information within the period specified in Table 1. The time-frame for the Board to complete the substantive review of the application packet is suspended from the date the comprehensive written request for additional information is issued until the Board receives the additional information.
4. If the applicant fails to provide the additional information identified in the comprehensive written request for additional information within the time specified in Table 1, the Board shall close the applicant's file and send a notice to the applicant by U.S. mail and electronically, if an electronic address is included in the application. The Board may continue to process the application if the applicant is the subject of an investigation. Failure of the applicant to supply the requested information may result in denial of the license or certificate based on information gathered during the investigation.
5. The Board shall grant licensure, conditional licensure, limited licensure, certification, or approval to an applicant:
   a. Who meets the substantive criteria for licensure, certification, or approval required by A.R.S. Title 32, Chapter 15 and this Chapter; and
   b. Whose licensure, certification, or approval is in the best interest of the public.
6. The Board shall deny licensure, certification, or approval to an applicant:
   a. Who fails to meet the substantive criteria for licensure, certification, or approval required by A.R.S. Title 32, Chapter 15 and this Chapter; or
   b. Who has engaged in unprofessional conduct as described in A.R.S. § 32-1601 or this Chapter; and
   c. Whose licensure, certification, or approval is not in the best interest of the public.
7. The Board's written order of denial shall meet the requirements of A.R.S. § 41-1076. The applicant may request a hearing by filing a written request with the Board within 30 days of receipt of the Board's order of denial. The Board shall conduct hearings in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

## ARTICLE 2. ARIZONA REGISTERED AND PRACTICAL NURSING PROGRAMS; REFRESHER PROGRAMS

**R4-19-207. New Programs; Proposal Approval; Provisional Approval**

**A.** At a minimum of one year before establishing a nursing program, a parent institution shall submit to the Board ~~one~~ an electronic copy ~~and one paper copy~~ of an application for proposal approval. The parent institution shall ensure that the proposal application was written by or under the direction of a registered nurse who meets the nursing program administrator requirements of R4-19-203(A) and includes the following information and documentation:

1. Name and address of the parent institution;
2. Statement of intent to establish a nursing program, including the academic and licensure level of the program; and:
   a. Organizational structure of the educational institution documenting the relationship of the nursing program within the institution and the role of the nursing program administrator consistent with R4-19-201 and R4-19-203;
   b. Evidence of institutional accreditation consistent with R4-19-201 and post-secondary approval, if applicable. The institution shall provide the most recent full reports including findings and recommendations of the applicable accrediting organization or approval agency. The Board may request additional accreditation or approval evidence.
   c. Curriculum development documentation to include:
      i. Student-centered outcomes for the program;
      ii. A plan that identifies the prescribed course sequencing and time required; and
      iii. Identification of established professional standards, guidelines or competencies upon which the curriculum will be based;
   d. Name, qualifications, and job description of a nursing program administrator who meets the requirements of R4-19-203 and availability and job description of faculty who meet qualifications of R4-19-204;
   e. Number of budgeted clinical and didactic faculty positions from the time of the first admission to graduation of the first class;
   f. Evidence that the program has secured clinical sites for its projected enrollment that meet the requirements of R4-19-206;
   g. Anticipated student enrollment per session and annually;
   h. Documentation of planning for adequate academic facilities and secretarial and support staff to support the nursing program consistent with the requirements of R4-19-202;
   i. Evidence of adequate program financial resources;
   j. Tentative time schedule for planning and initiating the nursing program including faculty hiring, entry date and size of student cohorts, and obtaining and utilizing clinical placements from the expected date of proposal approval to graduation of the first cohort.
   k. For a parent institution or owner corporation that has multiple nursing programs in one or more U.S. jurisdictions including Arizona, evidence for each of its nursing programs that includes:
      i. Program approval in good standing with no conditions, restrictions, ongoing investigations or deficiencies;
      ii. An NCLEX pass rate of at least 80% for the past two years or since inception; and
      iii. An on-time graduation rate consistent with the requirements of R4-19-206.

**B.** The Board shall grant proposal approval to any parent institution that meets the requirements of subsection (A) if the Board deems that such approval is in the best interests of the public. Proposal approval expires one year from the date of Board issuance.

**C.** A parent institution that is denied proposal approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for proposal approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6 of this Chapter.

**D.** At a minimum of 180 days before planned enrollment of students, a parent institution that received proposal approval within the previous year may submit to the Board ~~one~~ an electronic copy ~~and one paper copy~~ of an application for provisional approval. The parent

institution shall ensure that the provisional approval application was written by or under the direction of a registered nurse who meets the program administrator requirements of R4-19-203(A) and includes the following information and documentation:
1. Name and address of parent institution;
2. A self-study that provides evidence supporting compliance with R4-19-201 through R4-19-206, and
3. Names and qualifications of:
   a. The nursing program administrator;
   b. Didactic nursing faculty or one or more nurse consultants who are responsible for developing the curriculum and determining nursing program admission, progression and graduation criteria;
4. Plan for recruiting and hiring additional didactic faculty for the first semester or session of operation at least 60 days before classes begin;
5. Plan for recruiting and hiring additional clinical nursing faculty at least 30 days before the clinical rotation begins;
6. Final program implementation plan including dates and number of planned student admissions, recruitment and hire dates for didactic and clinical faculty for the period of provisional approval;
7. Descriptions of available and proposed physical facilities with dates of availability; and
8. Detailed written plan for clinical placements for all planned enrollments until graduation of the first class that is:
   a. Based on current clinical availability and curriculum needs;
   b. Confirms availability and commitment from proposed clinical agencies for the times and units specified.

**E.** Following an onsite evaluation conducted according to A.R.S. § 41-1009, the Board shall grant a two year provisional approval to a parent institution that meets the requirements of R4-19-201 through R4-19-206 if approval is in the best interest of the public. A parent institution that is denied provisional approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for provisional approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6 of this Chapter.

**F.** The provisional approval of a nursing program expires 12 months from the date of the grant of provisional approval if a class of nursing students is not admitted by the nursing program within that time.

**G.** One year after admission of the first nursing class into nursing courses, the program shall provide a report to the Board containing information on:
1. Implementation of the program including any differences from the plans submitted in the applications for proposal and provisional approval and an explanation of those differences; and
2. The outcomes of the evaluation of the program according to the program's systematic evaluation plan under R4-19-201;

**H.** Following receipt of the report described in subsection (G), a representative of the Board shall conduct a site survey visit in accordance with A.R.S. § 41-1009 to determine compliance with this Article. A report of the site visit shall be provided to the Board.

**I.** If a nursing program with provisional approval fails to comply with requirements of A.R.S. Title 32, Chapter 15, or 4 A.A.C. 19, Article 4, the Board may initiate a disciplinary action. Prior to imposition of discipline against a provisional approval, the nursing program is entitled to a hearing conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6 of this Chapter.

**R4-19-208. Full Approval of a New Nursing Program**

**A.** A nursing program seeking full approval shall submit an electronic ~~and one paper copy of an~~ application that includes the following information and documentation:
1. Name and address of the parent institution,
2. Date the nursing program graduated its first class of students, and
3. A self-study report that contains evidence the program is in compliance with R4-19-201 through R4-19-206.

**B.** Following an onsite evaluation conducted according to A.R.S § 41-1009, the Board shall grant full approval for a maximum of five years or the accreditation period for nationally accredited programs governed by R4-19-213, to a nursing program that meets the requirements of this Article and if approval is in the best interest of the public. A nursing program that is denied full approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for full approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**R4-19-209. Nursing Program Change**

**A.** A nursing program administrator shall receive approval from the Board before implementing any of the following nursing program changes:
1. Curriculum or program delivery method;
2. Increasing or decreasing the academic credits or units of the program excluding pre-requisite credits;
3. Adding a geographical location of the program;
4. Changing the level of educational preparation provided;
5. Transferring the nursing program from one parent institution to another; or
6. Establishing different admission, progression or graduation requirements for specific cohorts of the program.

**B.** The administrator shall submit ~~one~~ an electronic ~~and one paper~~ copy of the following materials with the request for nursing program changes:
1. The rationale for the proposed change and the anticipated effect on the program administrator, faculty, students, resources, and facilities;
2. A summary of the differences between the current practice and proposed change;
3. A timetable for implementation of the change; and
4. The methods of evaluation to be used to determine the effect of the change.

**C.** The Board shall approve a request for a nursing program change if the program meets the requirements of this Section and R4-19-201 through R4-19-206. A nursing program that is denied approval of program changes may request a hearing by filing a written request

with the Board within 30 days of service of the Board's order denying the application for program change. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6 of this Chapter.

**R4-19-210. Renewal of Approval of Nursing Programs Not Accredited by a National Nursing Accrediting Agency**

**A.** An approved nursing program that is not accredited by an approved national nursing accrediting agency shall submit an application packet to the Board at least four months before the expiration of the current approval that includes the following:
1. Name and address of the parent institution,
2. Evidence of current institutional accreditation status under R4-19-201,
3. Evidence that the program has secured clinical sites for its projected enrollment that meet the requirements of R4-19-206,
4. Copy or on-line access to:
   a. A current catalog of the parent institution,
   b. Current nursing program and institutional student and academic policies, and
   c. Institutional and nursing program faculty policies and job descriptions for nursing program faculty, and
5. ~~One~~ An electronic copy ~~and one paper copy~~ of a self-study report that contains evidence of compliance with R4-19-201 through R4-19-206.

**B.** Following an onsite evaluation conducted according to A.R.S. § 41-1009, the Board shall renew program approval for a maximum of five years if the nursing program meets the criteria in R4-19-201 through R4-19-206 and if renewal is in the best interest of the public. The Board shall determine the term of approval that is in the best interest of the public.

**C.** If the Board denies renewal of approval, the nursing program may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for renewal of approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6 of this Chapter.

**R4-19-216. Approval of a Refresher Program**

**A.** An applicant for approval of a refresher program for nurses whose licenses have been inactive or expired for five or more years, nurses under Board order to enroll in a refresher program, or nurses who have not met the nursing practice requirements of R4-19-312 shall submit ~~one~~ an electronic ~~and one paper copy~~ of a completed application that provides all of the following information and documentation:
1. Applicant's name, address, e-mail address, telephone number, web site address, if applicable, and fax number;
2. Proposed starting date for the program;
3. Name and qualifications of all instructors that meet the requirements of subsection (C);
4. Statement describing the facilities, staff, and resources that the applicant will use to conduct the refresher program;
5. A program and participant evaluation plan that includes student evaluation of the course, instructor, and clinical experience;
6. Evidence of a curriculum that meets the requirements of subsection (B);

**B.** A refresher program for registered and practice nurses shall provide:
1. Didactic instruction sufficient to ensure competent and safe practice to the applicable level of the nursing license, including the following subjects, at a minimum:
   a. Nursing process and patient centered care;
   b. Pharmacology, medication calculation, and medication administration;
   c. Communication and working with inter-professional teams;
   d. Critical thinking, clinical decision making and evidence-based practice;
   e. Delegation, management, and leadership;
   f. Meeting psychosocial and physiological needs of adult clients with medical-surgical conditions. Other populations of care may be added to the content at the program's discretion;
   g. Ethics; and
   h. Informatics, to include electronic health record documentation.
2. The program shall provide clinical experiences that, at a minimum:
   a. Ensure that each qualified student has a verified clinical placement within six months of course enrollment;
   b. Provide program policies for clinical placement in advance of enrollment that specify both the obligations of the school and the student regarding placement;
   c. Validate that a student has the necessary didactic and theoretical knowledge to function safely in the specific clinical setting before starting a clinical experience;
   d. Ensure that clinical experiences are of the type and duration to meet the course objectives.
3. Laboratory practice hours, at the program's discretion, including simulation experiences in accordance with the clinical objectives of the course, but may not replace clinical experiences.
4. Curriculum and other materials to students and prospective students that, include:
   a. An overall program description including student learning objectives;
   b. Objectives, content outline, and hours for didactic and clinical experience;
   c. Course policies that include but are not limited to admission requirements, passing criteria, cause for dismissal, clinical requirements, grievance process and student responsibilities, cost, and length of the program.

**C.** Refresher program personnel qualifications and responsibilities:
1. An administrator of a refresher program shall:
   a. Hold a graduate degree in nursing or a bachelor of science in nursing degree and a graduate degree in either education or a health-related field, and
   b. Be responsible for administering and evaluating the program.
2. A faculty member of a refresher program shall:
   a. Hold a minimum of a bachelor of science in nursing degree,

b. Be responsible for implementing the curriculum and supervising clinical experiences either directly or indirectly through the use of clinical preceptors.

3. Licensure requirements for program administrator and faculty: The administrator and faculty members shall hold a current Arizona RN license in good standing or a multi-state privilege under A.R.S., Title 32, Chapter 15.
4. If preceptors are used for clinical experiences, the program shall adhere to the preceptorship requirements of R4-19-206(E).
5. Licensed health care professionals not regulated by the Board may participate in course instruction consistent with their licensure and scope of practice, under the direction of the program administrator or faculty.

**D.** Program types; bonding:

1. A refresher program may be offered by:
   a. An educational institution licensed by the State Board for Private Postsecondary Education;
   b. A public post-secondary educational institution;
   c. A health care institution licensed by the Arizona Department of Health Services or a health care institution authorized by the Centers for Medicare & Medicaid Services; or
   d. A private business that meets the requirements of this Section and all other legal requirements to operate a business in Arizona;
   e. A program funded by a local, state or federal governmental agency, such as a program within a technical school or school of nursing.
2. If the refresher program is offered by a private business not licensed by the State Board for Private Postsecondary Education, the program shall meet the following requirements:
   a. Hold a minimum of $15,000 of insurance covering any potential or future claims for damages resulting from any aspect of the program or a hold a surety bond from a surety company with a rating of "A minus" or better by either Best's Credit Ratings, Moody's Investor Service, or Standard and Poor's rating service.
   b. The program shall ensure that:
      i. Bond or insurance distributions are limited to students or former students with a valid claim for instructional or program deficiencies;
      ii. The amount of the bond or insurance coverage is sufficient to reimburse the full amount of collected tuition and fees for all students during all enrollment periods of the program; and
      iii. The bond or insurance is maintained for an additional 24 months after program closure.

**E.** The Board shall approve a refresher program that meets the requirements of this Section, if approval is in the best interest of the public, for a maximum term of five years. An applicant who is denied refresher program approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and Article 6 of this Chapter.

**F.** The refresher program sponsor shall apply for renewal of approval in accordance with subsection (A) not later than 90 days before expiration of the current approval. The sponsor of a refresher program that is denied renewal of approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for renewal of approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, and 4 A.A.C. 19, Article 6 of this Chapter.

**G.** The sponsor of an approved refresher program shall provide written notification to the Board within 15 days of a participant's completion of the program of the following:

1. Name of the participant and whether the participant successfully completed or failed the program,
2. Participant's license number, and
3. End date of participant's participation in the program.

**H.** The Board may approve a refresher program application from another U.S. jurisdiction for an individual applicant on a case-by-case basis if the applicant provides verifiable evidence that the refresher program substantially meets the requirements of this Section. The acceptance of the program for an individual applicant does not confer approval status upon the program.

**I.** Within 30 days, a refresher program shall report to the Board changes in:

1. Name, address, email address, web site address or phone number of the program; or
2. Ownership including adding or deleting an owner.

**J.** The Board may take disciplinary action against the approval of a refresher program after offering a hearing conducted in accordance with A.R.S. Title 41, Chapter 6, and 4 A.A.C. 19, Article 6 of this Chapter.

## ARTICLE 3. LICENSURE

**R4-19-301. Licensure by Examination**

**A.** An applicant for licensure by examination shall:

1. Submit a verified application to the Board on a form furnished by the Board that provides the following information about the applicant:
   a. Full legal name and all former names used by the applicant;
   b. ~~Mailing address~~ Address of Record, including declared primary state of residence, e-mail address, and telephone number;
   c. Place and date of birth;
   d. Ethnic category and marital status, at the applicant's discretion;
   e. Social Security number for an applicant who lives or works in the United States;
   f. Post-secondary education, including the names and locations of all schools attended, graduation dates, and degrees received, if applicable;
   g. Current employer or practice setting, including address, position, and dates of service, if employed or practicing in nursing or health care;
   h. Information regarding the applicant's compliance with the practice or education requirements in R4-19-312;

i. Any state, territory, or country in which the applicant holds or has held a registered or practical nursing license and the license number and status of the license, including original state of licensure, if applicable;
j. The date the applicant previously filed an application for licensure in Arizona, if applicable;
k. Responses to questions regarding the applicant's background on the following subjects:
i. Current investigation or pending disciplinary action by a nursing regulatory agency in the United States or its territories;
ii. Action taken on a nursing license by any other state;
iii. Undesignated offenses, felony charges, convictions and plea agreements, including deferred prosecution;
iv. Misdemeanor charges, convictions and plea agreements, including deferred prosecution, that are required to be reported under A.R. S. § 32-3208;
v. Unprofessional conduct as defined in A.R.S. § 32-1601;
vi. Substance use disorder within the last 5 years;
vii. Current participation in an alternative to discipline program in any other state;
l. Explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background; and.
m. Certification in nursing including category, specialty, name of certifying body, date of certification, and expiration date.
2. Submit proof of United States citizenship or alien status as specified in A.R.S. § 41-1080;
3. Submit a completed fingerprint card on a form provided by the Board or prints for the purpose of obtaining a criminal history report under A.R.S. § 32-1606 if the applicant has not submitted a fingerprint card or prints to the Board within the last two years; and
4. Pay the applicable fees.

**B.** If an applicant is a graduate of a pre-licensure nursing program in the United States that has been assigned a program code by the National Council of State Boards of Nursing during the period of the applicant's attendance, the applicant shall submit one of the following:
1. If the program is an Arizona-approved program, the transcript required in subsection (B)(2) or a statement signed by a nursing program administrator or designee verifying that:
a. The applicant graduated from or is eligible to graduate from a registered nursing program for a registered nurse applicant; or
b. The applicant graduated from or is eligible to graduate from a practical nursing program or graduated from a registered nursing program and completed Board-prescribed role delineation education for a practical nurse applicant; or
2. If the program is located either in Arizona or in another state or territory and meets educational standards that are substantially comparable to Board standards for educational programs under Article 2 when the applicant completed the program, an official transcript sent directly from one of the following as:
a. Evidence of graduation or eligibility for graduation from a diploma registered nursing program, associate degree registered nursing program, or baccalaureate or higher degree registered nursing program for a registered nurse applicant.
b. Evidence of graduation or eligibility for graduation of a practical nursing program, associate degree registered nursing program, or baccalaureate or higher degree registered nursing program for a practical nurse applicant.

**C.** If an applicant is a graduate of a pre-licensure international nursing program and lacks items required in subsection (B), the applicant shall comply with subsection (A), submit a self report on the status of any international nursing license, and submit the following:
1. To demonstrate nursing program equivalency, one of the following:
a. If the applicant graduated from a Canadian nursing program, evidence of a passing score on the English language version of either the Canadian Nurses' Association Testing Service, the Canadian Registered Nurse Examination, NCLEX or an equivalent examination;
b. A Certificate or Visa Screen Certificate issued by the Commission on Graduates of Foreign Nursing Schools (CGFNS), or a report from CGFNS that indicates an applicant's program is substantially comparable to a U.S. program; or
c. A report from any other credential evaluation service (CES) approved by the Board.
2. If a graduate of an international pre-licensure nursing program subsequently obtains a degree in nursing from an accredited U.S. nursing program, the requirement for a CES equivalency report may be waived by the Board, however the applicant is not eligible for a multi-state compact license.
3. If an applicant's pre-licensure nursing program provided classroom instruction, textbooks, or clinical experiences in a language other than English, a test of written, oral, and spoken English is required. Clinical experiences are deemed to have been provided in a language other than English if the principal or official language of the country or region where the clinical experience occurred is a language other than English, according to the United States Department of State.
4. An applicant who is required to demonstrate English language proficiency shall ensure that one of the following is submitted to the Board directly from the testing or certifying agency:
a. Evidence of a minimum score of 84 with a minimum speaking score of 26 on the Internet-based Test of English as a Foreign Language (TOEFL),
b. Evidence of a minimum score of 6.5 overall with minimum of 6.0 on each module of the Academic Exam of the International English Language Test Service (IELTS) Examination,
c. Evidence of a minimum score of 55 overall with a minimum score of 50 on each section of the Pearson Test of English Academic exam.
d. A Visa Screen Certificate from CGFNS,
e. A CGFNS Certificate,
f. Evidence of a similar minimum score on another written and spoken English proficiency exam determined by the Board to be equivalent to the other exams in this subsection, or
g. Evidence of employment for a minimum of 960 hours within the past five years as a nurse in a country or territory where

the principal language is English, according to the United States Department of State.

**D.** An applicant for a registered nurse license shall attain one of the following:
1. A passing score on the NCLEX-RN;
2. A score of 1600 on the NCLEX-RN, if the examination was taken before July 1988; or
3. A score of not less than 350 on each part of the SBTPE for registered nurses.

**E.** An applicant for a practical nurse license shall attain:
1. A passing score on the NCLEX-PN;
2. A score of not less than 350 on the NCLEX-PN, if the examination was taken before October 1988; or
3. A score of not less than 350 on the SBTPE for practical nurses.

**F.** The Board shall grant a license to practice as a registered or practical nurse to any applicant who meets the criteria established in statute and this Article. An applicant who is denied a license by examination may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the license. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.

**G.** If the Board receives an application from a graduate of a nursing program and the program's approval was rescinded under R4-19-212 at any time during the applicant's nursing education, the Board shall ensure that the applicant has completed a basic curriculum that is equivalent to that of a Board-approved nursing program and may do any of the following:
1. Grant licensure, if the program's approval was reinstated during the applicant's period of enrollment and the program provides evidence that the applicant completed a curriculum equivalent to that of a Board-approved nursing program;
2. By order, require successful completion of remedial education while enrolled in a Board approved nursing program which may include clinical experiences, before granting licensure; or
3. Return or deny the application if the education was not equivalent and no remediation is possible.

**R4-19-304. Temporary License**

**A.** Subject to subsection (B), the Board shall issue a temporary license if:
1. An applicant:
   a. Is qualified under:
      i. A.R.S. § 32-1635 and applies for a temporary registered nursing license, or is qualified under A.R.S. § 32-1640 and applies for a temporary practical nursing license; and
      ii. R4-19-301 for applicants for licensure by examination, or is qualified under R4-19-302 for applicants for licensure by endorsement; and
   b. Submits an application for a temporary license with the applicable fee required under A.R.S. § 32-1643(A)(9); and
   c. Submits an application for a license by endorsement or examination with the applicable fee required under A.R.S. § 32-1643(A).
2. An applicant is seeking a license by examination, meets the requirements of R4-19-312(D), and the Board receives ~~a report from the Arizona Department of Public Safety (DPS), verifying that DPS has no criminal history record information, as defined in A.R.S. § 41-1701, relating to the applicant or that any criminal history reported has been reviewed by the executive director or the director's designee and determined not to pose a threat to public health, safety, or welfare~~ the applicant's fingerprint card or fingerprints; or
3. An applicant is seeking a license by endorsement, meets the requirements in R4-19-312(B), and the applicant submits evidence that the applicant has a current license in good standing in another state or territory of the United States or, if no current license, a previous license in good standing that was not the subject of an investigation or pending discipline; or
4. An applicant who does not meet the practice requirements in R4-19-312(B) or (D), but provides evidence that the applicant has applied for enrollment in a refresher or other competency program approved by the Board, may practice nursing under a temporary license during the clinical portion of the program only.

**B.** An applicant who has a criminal history, a history of disciplinary action by a regulatory agency, a pending complaint before the Board, or answers affirmatively to any criminal background or disciplinary question in the application is not eligible for a temporary license or extension of a temporary license without Board approval.

**C.** A temporary license is valid for a maximum of 12 months unless extended for good cause under subsection (D) of this Section.

**D.** An applicant with a temporary license may apply for and the Board, the Executive Director or the Executive Director's designee may grant an extension of the temporary license period for good cause. Good cause means reasons beyond the control of the temporary licensee, such as unavoidable delays in obtaining information required for licensure.

**E.** An applicant who receives a temporary license but does not meet the criteria for a regular license within the established period under subsections (C) and (D) is no longer eligible for a temporary license except for the purpose of completing a refresher or other competency program under subsection (A)(4) of this Section.

**R4-19-305. License Renewal**

**A.** An applicant for renewal of a registered or practical nursing license shall:
1. Submit a verified application to the Board on a form furnished by the Board that provides all of the following information about the applicant:
   a. Full legal name, ~~mailing~~ address of record, e-mail address, telephone number and declared primary state of residence;
   b. A listing of all states in which the applicant is currently licensed, or, since the last renewal, was previously licensed or has been denied licensure;
   c. Marital status and ethnic category, at the applicant's discretion;
   d. Information regarding qualifications, including:
      i. Educational background;
      ii. Employment status;
      iii. Practice setting; and

iv. Other information related to the nurse's practice for the purpose of collecting nursing workforce data.

e. Responses to questions regarding the applicant's background on the following subjects:
   i. Criminal convictions for offenses involving drugs or alcohol since the time of last renewal;
   ii. Undesignated offenses and felony charges, convictions and plea agreements including deferred prosecution;
   iii. Misdemeanor charges, convictions and plea agreements, including deferred prosecution, that are required to be reported under A.R.S. § 32-3208;
   iv. Unprofessional conduct as defined in A.R.S. § 32-1601 since the time of last renewal;
   v. Substance use disorder within the last five years;
   vi. Current participation in an alternative to discipline program in any other state; and
   vii. Disciplinary action or investigation related to the applicant's nursing license by any other state nursing regulatory agency since the last renewal.

f. Explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;

g. Information related to the applicant's current or most recent nursing practice setting, including position, address, telephone number, and dates of practice;

h. Information regarding the applicant's compliance with the practice or education requirements in R4-19-312;

i. National certification in nursing including specialty, name of certifying body, date of certification, certification number, and expiration date, if applicable; and for an applicant certified as a registered nurse practitioner or clinical nurse specialist the patient population of the certification; and

2. Pay fees for renewal authorized by A.R.S. § 32-1643 (A)(6); and

3. Pay an additional fee for late renewal authorized by A.R.S. § 32-1643(A)(7) if the application for renewal is submitted after May 1 of the year of renewal.

**B.** A license expires on August 1 of the year of renewal indicated on the license.

**C.** A licensee who fails to submit a renewal application before expiration of a license shall not practice nursing until the Board issues a renewal license.

**D.** If the applicant holds a license or certificate that has been or is currently revoked, surrendered, denied, suspended or placed on probation in another jurisdiction, the applicant is not eligible to renew or reactivate a license until a review or investigation has been completed and a decision regarding eligibility for renewal or reactivation is made by the Board.

**E.** The Board shall renew the license of any registered or practical nurse applicant who meets the criteria established in statute and this Article. An applicant who is denied renewal of a license may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying renewal of the license. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.

**R4-19-308. Change of Name or Address**

**A.** A licensee or applicant shall notify the Board, in writing or electronically through the Board website, of any legal change in name within 30 days of the change, and submit a copy of the official document verifying the name change.

**B.** A licensee or applicant shall notify the Board in writing or electronically through the Board website of any change in ~~mailing~~ address of record, and residential address, if different, within 30 days.

## ARTICLE 5. ADVANCED PRACTICE REGISTERED NURSING

**R4-19-501. Roles and Population Foci of Advanced Practice Registered Nursing (APRN); Certification Programs**

**A.** The Board recognizes the following APRN roles;

1. Registered nurse practitioner (RNP) in a population focus ~~including Certified Nurse Midwife as a population focus of RNP~~;
2. Clinical Nurse Specialist (CNS) in a population focus; ~~and~~
3. Certified Registered Nurse Anesthetist (CRNA)~~.~~ ;
4. Certified Nurse Midwife (CNM).

**B.** RNPs and CNSs shall practice within one or more population foci, consistent with their education and certification. Population foci include:

1. Family-individual across the life span;
2. Adult-gerontology primary or acute care;
3. Neonatal;
4. Pediatric primary or acute care;
5. Women's health-gender related;
6. Psychiatric-mental health;

~~7. For Certified Nurse Midwives, women's health gender related including childbirth and neonatal care;~~

~~8~~7. Other foci that have been recognized by the Board previously and new foci that meet the following conditions:
   a. There is an accredited educational program and a national certifying process that meets the requirements of subsection (C); and
   b. The focus is broad enough for an educational program to be developed that prepares a registered nurse to function both within the scope of practice of the role and population focus.

**C.** Certified Nurse Midwives shall practice within a population focus consistent with their education, specifically women's health gender-related care, including childbirth and neonatal care.

**~~C~~D.** The Board shall accept advanced practice certifications from programs that meet the following qualifications:

1. The certification program:
   a. Is accredited by the National Commission for Certifying Agencies, the Accreditation Board for Specialty Nursing Certification, or an equivalent organization as determined by the Board;
   b. Establishes educational requirements for certification that are consistent with the requirements in R4-19-505;

c. Has an application process and credential review that requires an applicant to submit original source documentation of the applicant's education and clinical practice in the advanced practice role and population focus, if applicable, for which certification is granted; and
d. Is national in the scope of its credentialing.

2. The certification program uses an examination as a basis for certification in the advanced practice role and population focus, as applicable that meets all of the following criteria:
   a. The examination is based upon job analysis studies conducted using standard methodologies acceptable to the testing community both initially and every five years;
   b. The examination assesses entry-level practice in the advanced practice role and population focus, if applicable;
   c. The examination assesses the knowledge, skills, and abilities essential for the delivery of safe and effective advanced nursing care to clients;
   d. Examination items are reviewed for content validity, cultural sensitivity, and correct scoring using an established mechanism, both before first use and periodically; items are reviewed for currency at least every three years;
   e. The examination is evaluated for psychometric performance and conforms to psychometric standards that are routinely utilized for other types of high-stakes testing;
   f. The passing standard is established using accepted psychometric methods and is re-evaluated periodically;
   g. Examination security is maintained through established procedures;
   h. A re-take policy is in place; and
   i. Conditions for taking the certification examination are consistent with standards of the testing community;
3. Certification is issued upon passing the examination and meeting all other certification requirements;
4. The certification program periodically provides for re-certification that includes review of qualifications and continued competence;
5. The certification program provides timely communication to the Board regarding licensee or applicant certification status, changes in an individual's certification status, exam results and changes in the certification program, including qualifications, test plan, and scope of practice; and
6. The certification program has an evaluation process to provide quality assurance in its certificate program.

**~~D~~E.** The Board shall determine whether a certification program meets the requirements of this Section. The following certification programs meet the requirements of this Section as of the effective date of this rulemaking:

1. For RNP, and CNM (consistent with R4-19-501(C) and (D)):
   a. American Academy of Nurse Practitioner certification programs;
      i. Adult nurse practitioner,
      ii. Family nurse practitioner,
      iii. Gerontologic nurse practitioner,
      iv. Adult health-gerontological nurse practitioner.
   b. American Nurses Credentialing Center certification programs:
      i. Acute care nurse practitioner (adult/gerontology),
      ii. Adult nurse practitioner,
      iii. Family nurse practitioner,
      iv. Gerontological nurse practitioner,
      v. Pediatric nurse practitioner,
      vi. Adult psychiatric and mental health nurse practitioner,
      vii. Family psychiatric and mental health nurse practitioner,
      viii. Adult health-gerontological nurse practitioner,
   c. Pediatric Nursing Certification Board certification programs:
      i. Pediatric nurse practitioner primary care,
      ii. Pediatric nurse practitioner acute care,
   d. National Certification Corporation for Obstetric, Gynecological, and Neonatal Nursing Specialties certification programs;
      i. Women's health nurse practitioner,
      ii. Neonatal nurse practitioner,
   e. For a nurse-midwife, the American Midwifery Certification Board certification program in nurse midwifery,
   f. AACN Certification Corporation certification programs:
      i. Adult acute care nurse practitioner,
      ii. Adult-gerontology acute care nurse practitioner,
2. For CNS:
   a. AACN Certification Corporation certification programs:
      i. Adult acute and critical care CNS,
      ii. Pediatric acute and critical care CNS,
      iii. Neonatal acute and critical care CNS,
   b. American Nurses Credentialing Center certification:
      i. Adult psychiatric-mental health CNS,
      ii. Family psychiatric-mental health CNS,
      iii. Gerontological CNS,
      iv. Adult health CNS,
      v. Pediatric CNS.
3. For CRNA, the National Board of Certification and Recertification for Nurse Anesthetists.

~~E~~F. The Board shall approve a certification program that meets the criteria established in this Section. An entity that seeks approval of a certification program and is denied approval may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10.

**R4-19-502. Requirements for APRN Programs**

**A.** An educational institution or other entity that offers an APRN program in this state for RNP, CNM, or CNS roles shall ensure that the program:
1. Is offered by or affiliated with a college or university that is accredited under A.R.S. § 32-1644;
2. For new programs, the college or university offering the program has at least one additional nationally accredited nursing program as defined in R4-19-101 or otherwise provides substantial evidence of the ability to attain national APRN program accreditation for all graduating cohorts;
3. Is a formal educational program, that is part of a masters or doctoral program or a post-masters program in nursing with a concentration in an advanced practice registered nursing role and population focus under R4-19-501;
4. Is nationally accredited, or has achieved candidacy status for national accreditation by an approved national nursing accrediting agency as defined in R4-19-101;
5. Offers a curriculum that covers the scope of practice for both the role of advanced practice as specified in A.R.S. § 32-1601 and the population focus including;
   a. Three separate graduate level courses in:
      i. Advanced physiology and pathophysiology, including general principles across the lifespan;
      ii. Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches;
      iii. Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad category agents;
   b. Diagnosis and management of diseases across practice settings including diseases representative of all systems;
   c. Preparation that provides a basic understanding of the principles for decision making in the identified role;
   d. Preparation in the core competencies for the identified APRN role including legal, ethical and professional responsibilities; and
   e. Role preparation in an identified population focus under R4-19-501.
6. Verifies that each student has an unencumbered license to practice as an RN in the state of clinical practice;
7. Includes a minimum of 500 hours of faculty supervised clinical practice (programs that prepare students for more than one role or population focus shall have 500 hours of clinical practice in each role and population focus);
8. Notifies the Board of any changes in hours of clinical practice, accreditation status, denial or deferral of accreditation or program administrator and responds to Board requests for information;
9. Has financial resources sufficient to support accreditation standards and the educational goals of the program;
10. Establishes academic, professional, and conduct standards that determine admission to the program, progression in the program, and graduation from the program that are consistent with sound educational practices and recognized standards of professional conduct;
11. Establishes provisions for advanced placement for individuals holding a graduate degree in nursing who are seeking education in an APRN role and population focus, provided that advanced placement students master the same APRN competencies as students in the graduate-level APRN program; and
12. Provides the Board an application for approval under the provisions of R4-19-209(B) before making changes to the:
    a. Scope of the program, or
    b. Level of educational preparation provided.

**B.** A CNS, CNM, or RNP program shall appoint the following personnel:
1. An APRN program administrator who:
   a. Holds a current unencumbered RN license or multi-state privilege to practice in Arizona and a current unencumbered APRN certificate issued by the Board;
   b. Holds an earned doctorate in nursing or health-related field if appointed after the effective date of this Section;
   c. Has at least two years clinical experience as an APRN; and
   d. Holds current national certification as an APRN.
2. A lead faculty member who is educated and certified both nationally and by the Board in the same role and population focus to coordinate the educational component for the role and population focus in the advanced practice registered nursing program.
3. Nursing faculty to teach any APRN course that includes a clinical learning experience who have the following qualifications:
   a. A current unencumbered RN license or multi-state privilege to practice registered nursing in Arizona;
   b. A current unencumbered Arizona APRN certificate,
   c. A graduate degree in nursing or a health related field in the population focus,
   d. Two years of APRN clinical experience, and
   e. Current knowledge, competence and certification as an APRN in the role and population focus consistent with teaching responsibilities.
4. Adjunct or part-time clinical faculty employed solely to supervise clinical nursing experiences shall meet all of the faculty qualifications for the APRN program they are teaching.
5. Interdisciplinary faculty who teach non-clinical courses shall have advanced preparation in the areas of course content.
6. Clinical preceptors may be used to enhance faculty-directed clinical learning experiences, but not to replace faculty. A clinical preceptor shall be approved by program administration or faculty and:
   a. Hold a current unencumbered license or multistate privilege to practice as a registered nurse or physician in the state in which the preceptor practices or, if employed by the federal government, holds a current unencumbered RN or physician license in the United States;

b. Have at least one year clinical experience as a physician or an advanced practice nurse
c. Practice in a population focus comparable to that of the APRN program;
d. For nurse preceptors, have at least one of the following:
i. Current national certification in the advanced practice role and population focus of the course or program in which the student is enrolled;
ii. Current Board certification in the advanced practice role and population focus of the course or program in which the student is enrolled; or
iii. If an advanced practice preceptor cannot be found who meets the requirements of subsection (B)(6)(d)(i) or (ii), educational and experiential qualifications that will enable the preceptor to precept students in the program, as determined by the nursing program and approved by the Board.

**C.** An entity that offers a CRNA program in Arizona shall maintain full national program accreditation with no limitations from the Council on Accreditation of Nurse Anesthesia Educational Programs or an equivalent agency approved by the Board. The program shall notify the Board of all program accreditation actions within 30 days of official notification by the accrediting agency.

**R4-19-503. Application for Approval of an Advanced Practice Registered Nursing Program; Approval by Board; Provisional Approval by Executive Director**

**A.** An administrator of an educational institution that proposes to offer a CNS, CNM, or RNP program shall submit an application that includes all of the following information to the Board:
1. Role, population focus that meets the criteria in R4-19-501 program administrator and lead faculty member as required in R4-19-502(B);
2. Name, address, and evidence verifying institutional accreditation status of the affiliated educational institution and program accreditation status of current nursing programs offered by the educational institution;
3. The mission, goals, and objectives of the program consistent with generally accepted standards for advanced practice education in the role and population focus of the program;
4. List of the required courses, and a description, measurable objectives, and content outline for each required course consistent with curricular requirements in R4-19-502;
5. A proposed time schedule for implementation of the program and attaining national accreditation;
6. The total hours allotted for both didactic instruction and supervised clinical practicum in the program;
7. A program proposal that provides evidence of sufficient financial resources, clinical opportunities and available faculty and preceptors for the proposed enrollment and planned expansion;
8. A self-study that provides evidence of compliance with R4-19-502;

**B.** An entity that wishes to offer a CRNA program shall submit evidence of current accreditation by the Council on Accreditation of Nurse Anesthesia Education Programs or an equivalent organization.

**C.** The Board shall approve an advanced practice registered nursing program if approval is in the best interest of the public and the program meets the requirements of this Article. The Board may grant approval for a period of two years or less to an advanced practice nursing program where the program meets all the requirements of this Article except for accreditation by a national nursing accrediting agency, based on the program's presentation of evidence that it has applied for accreditation and meets accreditation standards.

**D.** An educational institution or entity that is denied approval of an advanced practice registered nursing program may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying its application for approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**E.** Approval of an advanced practice registered nursing program expires 12 months from the date of approval if a class of students is not admitted within that time.

**F.** An advanced practice registered nursing program that has submitted an application pursuant to this Section that meets the threshold requirements of the Nurse Practice Act, may receive a 90 day provisional approval from the Board, through Executive Director's delegated authority, prior to application review by the Board, as described in this Section. A program denied provisional approval may request a hearing, as described in subsection (D) of this Section.

**R4-19-504. Notice of Deficiency; Unprofessional APRN Program Conduct**

**A.** The Board may periodically survey an advanced practice registered nursing program under its jurisdiction to determine whether criteria for approval are being met.

**B.** The Board shall, upon determining that an advanced practice registered nursing program is not in compliance with this Article, provide to the program administrator a written notice of deficiencies that establishes a reasonable time, based upon the number and severity of deficiencies, to correct the deficiencies. The time for correction may not exceed 18 months.
1. The program administrator shall, within 30 days from the date of service of the notice of deficiencies, consult with the Board or designated Board representative and, after consultation, file a plan to correct each of the identified deficiencies.
2. The program administrator may, within 30 days from the date of service of the notice of deficiencies, submit a written request for a hearing before the Board to appeal the Board's determination of deficiencies. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.
3. If the Board's determination is not appealed or is upheld upon appeal, the Board may conduct periodic evaluations of the program during the time of correction to determine whether the deficiencies have been corrected.

**C.** The Board shall, following a Board-conducted survey and report, rescind the approval or limit the ability of a program to admit students if the program fails to comply with R4-19-502 within the time set by the Board in the notice of deficiencies provided to the program administrator.
1. The Board shall serve the program administrator with a written notice of proposed rescission of approval or limitation of admission of students that states the grounds for the rescission or limitation. The program administrator has 30 days to submit a written request for a hearing to show cause why approval should not be rescinded or admissions limited. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

2. Upon the effective date of a decision to rescind program approval, the affected advanced practice registered nursing program shall immediately cease operation and be removed from the official approved-status listing. An advanced practice registered nursing program that is ordered to cease operations shall assist currently enrolled students to transfer to an approved nursing program.

**D.** A disciplinary action, denial of approval, or notice of deficiency may be issued against an RNP or CNS nursing program for any of the following acts of unprofessional conduct:
1. Failure to maintain minimum standards of acceptable and prevailing educational practice;
2. For a program that was served with a notice of deficiencies within the preceding three years and timely corrected the noticed deficiencies, subsequent noncompliance with the standards in this Article;
3. Utilization of students to meet staffing needs in health care facilities;
4. Non-compliance with the program or parent institution mission or goals, program design, objectives, or policies;
5. Failure to provide the variety and number of clinical learning opportunities necessary for students to achieve program outcomes or minimal competence;
6. Student enrollments without adequate faculty, facilities, or clinical experiences;
7. Ongoing or repetitive employment of unqualified faculty;
8. Failure to comply with Board requirements within designated time-frames;
9. Fraud or deceit in advertising, promoting or implementing a nursing program;
10. Material misrepresentation of fact by the program in any advertisement, application or information submitted to the Board;
11. Failure to allow Board staff to visit the program or conduct an investigation;
12. Any other evidence that gives the Board reasonable cause to believe the program's conduct may be a threat to the safety and well-being of students, faculty or potential patients.

**R4-19-505. Requirements for Initial APRN Certification**

**A.** An applicant for certification as an advanced practice registered nurse, shall:
1. Hold a current Arizona registered nurse (RN) license in good standing or an RN license in good standing from a compact party state with multistate privileges, and not be a participant in an alternative to discipline program in any jurisdiction; and
2. Submit a verified application to the Board on a form provided by the Board that provides all of the following:
   a. Full legal name and all former names used by the applicant;
   b. Current ~~mailing~~ address of record, including primary state of residence and telephone number;
   c. Place and date of birth:
   d. RN license number, application for RN license, or copy of a multistate compact RN license;
   e. Social security number for an applicant who lives or works in the United States;
   f. Current e-mail address;
   g. Educational background, including the name and location of basic nursing program, the institution that awarded the highest degree held and any and all advanced practice registered nursing education programs or schools attended including the number of years attended, the length of each program, the date of graduation or completion, and the type of degree or certificate awarded;
   h. Role and population focus, as applicable for which the applicant is applying;
   i. Current employer or practice setting, including address, position, and dates of service, if employed or practicing in nursing or health care;
   j. Evidence of national certification or recertification as an advanced practice registered nurse in the role and population focus, if applicable, of the application and by a certification program that meets the requirements of R4-19-501(C). The applicant shall include the name of the certifying organization, population focus, certification number, date of certification, and expiration date;
   k. For applicants holding a multistate compact RN license in a state other than Arizona:
      i. State of original licensure and license number;
      ii. State of current compact RN license, license number and expiration date;
      iii. Date of taking RN licensure exam and name of exam;
      iv. Whether the applicant ever submitted an application for and was granted an Arizona license and, if applicable, the date of Arizona licensure;
      v. Other information related to the nurse's practice for the purpose of collecting nursing workforce data; and
      vi. State of licensure and license number of all RN licenses held,
   l. Responses regarding the applicant's background on the following subjects:
      i. Current investigation or pending disciplinary action by a nursing regulatory agency in the United States or its territories;
      ii. Undesignated offense and felony charges, convictions and plea agreements including deferred prosecution;
      iii. Misdemeanor charges, convictions, and plea agreements, including deferred prosecution, that are required to be reported under A.R.S. § 32-3208;
      iv. Actions taken on a nursing license by any other state;
      v. Unprofessional conduct as defined in A.R.S. § 32-1601;
      vi. Substance use disorder within the last five years;
      vii. Current participation in an alternative to discipline program in any other state; and
   m. Information that the applicant meets the criteria in R4-19-506(A) or (C).
3. Submit a fingerprint card on a form provided by the Board or prints if the applicant has not submitted fingerprints to the Board within the last two years.
4. Submit an official transcript from an institution accredited under A.R.S. § 32-1644 either sent directly from the institution or obtained from a Board-approved database that provides evidence of:

a. A graduate degree with a major in nursing for RNP, CNM, and CNS Applicants, or
b. A graduate degree associated with a CRNA program for a CRNA applicant.

5. The applicant shall cause the program to provide the Board with evidence of completion of an APRN program in the role and population focus of the application through submission of an official letter or other official program document sent either directly from the program, or from a Board-approved data base. The APRN program shall meet one of the following criteria during the period of the applicant's attendance in the program:
   a. The program was part of a graduate degree, or post-masters program at an institution accredited under A.R.S. § 32-1644; or
   b. The program was approved or recognized in the U.S jurisdiction of program location for the purpose granting APRN licensure or certification.
6. For an applicant who completed an advanced practice or graduate program in a foreign jurisdiction, submit an evaluation from the Commission on Graduates of Foreign Nursing Schools or a Board-approved credential evaluation service that indicates the applicant's program is comparable to a U.S. graduate nursing or APRN program.
7. Submit the required fee.

**B.** If the applicant satisfies all other requirements, the Board shall continue to certify:
1. An RNP or CNM without a graduate degree with a major in nursing if the applicant:
   a. Meets all other requirements for certification; and
   b. Ensures that the U.S. jurisdiction of an applicant's previous RNP or CNM licensure or certification submits evidence of the applicant's certification or licensure in the nurse practitioner role and population focus that either is current or was current at least six months before the application was received by the Board, and was originally issued:
      i. Before January 1, 2001, if the RNP or CNM applicant lacks a graduate degree; or
      ii. Before November 13, 2005 if the RNP's or CNM's graduate degree is in a health-related area other than nursing.
2. An RNP, CNM, or CNS applicant without evidence of national certification who received initial advanced practice certification or licensure in another state not later than July 1, 2004 and provides evidence, directly from the jurisdiction, that the certification or licensure is current.
3. A CNS applicant without evidence of completion of a CNS program who received initial certification or advanced practice licensure in this or another state not later than November 13, 2005 and provides evidence, directly from the jurisdiction, that the certificate or license is current.
4. A CRNA who completed a CRNA program before the effective date of this Section without evidence of a graduate degree.
5. A CNS applicant who completed a women's health clinical nurse specialist program that was part of a graduate degree in nursing program under subsection (A), without evidence of national certification upon submission of the following:
   a. A description of the applicant's scope of practice that is consistent with A.R.S. § 32-1601(7);
   b. One of the following:
      i. A letter from a faculty member who supervised the applicant during the graduate program attesting to the applicant's competence to practice within the defined scope of practice;
      ii. A letter from a current supervisor verifying the applicant's competence in the defined scope of practice; or
      iii. A letter from a physician, RNP, CNM, or CNS who has worked with the applicant within the past two years attesting to the applicant's competence in the defined scope of practice; and
   c. A form verifying that the applicant has practiced a minimum of 500 hours in the population focus within the past two years, which may include clinical practice time in a CNS program.

**C.** The Board shall issue a certificate to practice as an RNP, CNM, or CNS in a population focus, ~~a CNS in a population focus,~~ or as a registered nurse anesthetist, to a registered nurse who meets the criteria in this Section. An applicant who is denied a certificate may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying certification. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6 of this Chapter.

**R4-19-506. Expiration of APRN Certificate; Practice Requirement; Renewal**

**A.** An advanced practice certificate issued after July 1, 2004, expires when the certificate holder's RN license expires, or when national certification expires, whichever occurs first. Certificates issued on or before July 1, 2004, or those issued without proof of national certification under R4-19-505(B)(5) and (B)(2) do not expire unless the RN license expires under A.R.S. § 32-1642 or the nurse has not practiced advanced practice nursing at the applicable level of certification for a minimum of 960 hours in the five years before the date the application is received. This requirement is satisfied if the applicant verifies that the applicant has:
1. Completed an advanced practice nursing education program within the past five years; or
2. Practiced for a minimum of 960 hours within the past five years where the nurse:
   a. Worked for compensation or as a volunteer, as an APRN and performed one or more acts under A.R.S. § 32-1601(7) for a CNS, A.R.S. § 32-1601(20) for an RNP, A.R.S. § 32-1601(5) for a CNM, or A.R.S. § 32-1634.04 for a CRNA; or
   b. Held a position for compensation or as a volunteer that required, preferred or recommended, in the job description, the level of advanced practice certification being sought or renewed.

**B.** A registered nurse requesting renewal of an ~~advanced practice certificate or an RNP~~ APRN certificate issued after July 1, 2004 shall provide evidence of current national certification or recertification under R4-19-505(A)(2)(j). This provision does not apply to a CNS granted a waiver of certification.

**C.** An ~~advanced practice nurse~~ APRN who does not satisfy the practice requirement of subsection (A) shall complete coursework or continuing education activities at the graduate or advanced practice level that include, at minimum, 45 contact hours of advanced pharmacology and 45 contact hours in a subject or subjects related to the role and population focus of certification. Upon completion of the coursework, the nurse shall engage in a period of precepted clinical practice as specified in this subsection;
1. Precepted clinical practice shall be directly supervised by an ~~advanced practice nurse~~ APRN in the same role and population focus as the certification being renewed or a physician who engages in practice with the same population focus as the certification being renewed.

2. Practice hours completed during the time-frame specified below may be applied to reduce the number of precepted clinical practice hours, except that in no case shall the hours be reduced by more than half the requirement. The nurse shall complete hours according to the following schedule:
   a. 300 hours if the applicant has practiced less than 960 hours in only the last five years;
   b. 600 hours if the applicant has not practiced 960 hours in the last five years, but has practiced at least 960 hours in the last six years;
   c. 1000 hours if the applicant has not practiced at least 960 hours in the last six years, but has practiced 960 hours in the last seven to 10 years; or
   d. If the nurse has not practiced 960 hours of advanced practice nursing in the role and population focus being renewed in more than 10 years, complete a program of study as recommended by an approved advanced practice nursing program that includes, at minimum, 500 hours of faculty supervised clinical practice in the role and population focus of certification. An applicant who qualifies for any option in subsection (C)(2)(a) through (c) may complete the requirements of this subsection to satisfy the practice requirement.

**D.** An applicant who, in addition to not meeting the requirements for continued APRN certification, does not meet the requirements for RN renewal, shall fulfill all RN renewal requirements before satisfying the requirements of this Section.

**E.** The Board shall renew a certificate to practice as a registered nurse practitioner in a population focus, a clinical nurse specialist in a population focus, or a registered nurse anesthetist for a registered nurse who meets the criteria in this Section. An applicant who is denied renewal of a certificate may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying renewal of certification. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6 of this Chapter.

**R4-19-507. Temporary Advanced Practice Certificate; Temporary Prescribing and Dispensing Authority**

**A.** Based on the registered nurse's qualifications, the Board may issue a temporary certificate to practice as a ~~registered nurse practitioner~~ RNP, CNM, or a ~~clinical nurse specialist~~ CNS in a population focus or a registered nurse anesthetist. A registered nurse who is applying for a temporary certificate shall:
1. Apply for certification as an ~~advanced practice nurse~~ APRN;
2. Submit an application for a temporary certificate;
3. Demonstrate authorization to practice as a registered nurse in Arizona on either a permanent or temporary Arizona license in good standing or a multistate compact privilege;
4. Meet all requirements of R4-19-505 or meet the requirements of R4-19-505 with the exception of national certification for RNP, CNM, and CNS applicants unless exempt under R4-19-505(B); and
5. Submit evidence that the applicant:
   a. Has applied for and is eligible to take an approved national advanced practice certification exam in the role and population focus of the application;
   b. Has requested that the certification program transmit all exam results directly to the Board; or
   c. For a CRNA, holds national certification according to R4-19-501.

**B.** If an applicant fails to meet criteria for national advanced practice certification or has failed a certification exam, the applicant is not eligible for a temporary certificate.

**C.** The Board may issue temporary prescribing and dispensing authority for RNP, CNM, or CNS applicants, if the applicant:
1. Meets all application requirements for temporary certification in this Section,
2. Applies for and meets all requirements for prescribing and dispensing authority under R4-19-511,
3. Has been certified or licensed as ~~a nurse practitioner or nurse midwife~~ an RNP, CNM, or CNS with prescribing and dispensing authority in the same role and population focus in another state or territory of the United States,
4. Either holds current national certification as ~~a registered nurse practitioner or nurse midwife~~ an RNP, CNM, or CNS in the population focus of the application or is exempt from national certification under R4-19-505(B), and
5. Meets the practice requirement of R4-19-506(A)(2).

**D.** Temporary certification as an ~~advanced practice nurse~~ APRN and temporary prescribing and dispensing authority expire in six months and may be renewed for an additional six months for good cause. Good cause means reasons beyond the control of the temporary certificate holder such as unavoidable delays in obtaining information required for certification.

**E.** Notwithstanding subsection (D), the Board shall withdraw a temporary ~~advanced practice~~ APRN certificate and temporary prescribing and dispensing authority under any one of the following conditions. The temporary certificate holder:
1. Does not meet requirements for RN licensure in this state or the RN license is suspended or revoked,
2. Fails to renew the RN license upon expiration,
3. Loses the multistate compact privilege,
4. Fails the national certifying examination, fails to maintain current national certification, as required by R4-19-505, or
5. Violates a statute or rule of the Board.

**F.** An applicant who is denied a temporary certificate or temporary prescribing and dispensing authority may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the temporary certification or authority. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6 of this Chapter.

**R4-19-508. Standards Related to ~~Registered Nurse Practitioner~~ RNP, CNM, and CNS Scope of Practice**

**A.** An RNP, CNM, or CNS shall refer a patient to a physician or another health care provider if the referral will protect the health and welfare of the patient and consult with a physician and other health care providers if a situation or condition occurs in a patient that is beyond the RNP's, CNM's, or CNS's knowledge and experience.

**B.** In addition to the scope of practice permitted a registered nurse, ~~a registered nurse practitioner~~ the additional certification of an RNP, CNM, and CNS, under A.R.S. §§ 32-1601 (5), (9), and (20), as applicable, and 32-1606(B)(12), ~~may~~ permits the RNP, CNM, and CNS to perform the following acts within the limits of the population focus of certification:

1. Examine a patient and establish a medical diagnosis by client history, physical examination, and other criteria.
2. For a patient who requires the services of a health care facility:
   a. Admit the patient to the facility,
   b. Manage the care the patient receives in the facility, and
   c. Discharge the patient from the facility.
3. Order and interpret laboratory, radiographic, and other diagnostic tests, and perform those tests that the RNP, CNM, or CNS is qualified to perform.
4. Prescribe, order, administer and dispense therapeutic measures including pharmacologic agents and devices if authorized under R4-19-511, and non-pharmacological interventions including, but not limited to, durable medical equipment, nutrition, home health care, hospice, physical therapy and occupational therapy. (For the CNS, all prescribing is restricted pursuant to A.R.S. § 32-1651.)
5. Identify, develop, implement, and evaluate a plan of care for a patient to promote, maintain, and restore health.
6. Perform therapeutic procedures that the RNP, CNM, or CNS is qualified to perform.
7. Delegate therapeutic measures to qualified assistive personnel including medical assistants under R4-19-509.
8. Perform additional acts that the RNP, CNM, or CNS is qualified to perform and that are generally recognized as being within the role and population focus of certification.

**C.** An RNP, CNM, or CNS shall only provide health care services including prescribing and dispensing within the RNP's population focus and role and for which the RNP is educationally prepared and for which competency has been established and maintained. Educational preparation means academic coursework or continuing education activities that include both theory and supervised clinical practice.

**R4-19-511. Prescribing and Dispensing Authority; Prohibited Acts**

**A.** The Board shall authorize ~~a registered nurse practitioner (RNP)~~ an RNP, CNM, or CNS to prescribe and dispense (P&D) drugs and devices within the RNP's, CNM's, or CNS's population focus only if the RNP, CNM, or CNS does all of the following:
1. Obtains authorization by the Board to practice as an RNP, CNM, or CNS;
2. Applies for prescribing and dispensing privileges on the application for RNP, CNM, or CNS certification;
3. Submits a completed verified application on a form provided by the Board that contains all of the following information:
   a. Name, address, e-mail address and home telephone number;
   b. Arizona registered nurse license number, or copy of compact license;
   c. RNP, CNM, or CNS population focus;
   d. RNP, CNM, or CNS certification number issued by the Board; and
   e. Business address and telephone number;
4. Submits evidence of a minimum of 45 contact hours of education within the three years immediately preceding the application, covering one or both of the following topics consistent with the population focus of education and certification:
   a. Pharmacology, or
   b. Clinical management of drug therapy, and
5. Submits the required fee.

**B.** An applicant who is denied P & D authority may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the P & D authority. Board hearings shall comply with A.R.S. Title 41, Chapter 6, Article 10, and 4 A.A.C. 19, Article 6, of this Chapter.

**C.** An RNP, CNM, or CNS shall not prescribe or dispense drugs or devices without Board authority or in a manner inconsistent with law. The Board may impose an administrative or civil penalty for each violation, suspend the RNP's, CNM's, or CNS's P & D authority, or impose other sanctions under A.R.S. § 32-1606(C). In determining the appropriate sanction, the Board shall consider factors such as the number of violations, the severity of each violation, and the potential for or existence of patient harm.

**D.** In addition to acts listed under R4-19-403, for an RNP, CNM, or CNS who prescribes or dispenses a drug or device, a practice that is or might be harmful to the health of a patient or the public, includes one or more of the following:
1. Prescribing a controlled substance to oneself, a member of the RNP's, CNM's, or CNS's family or any other person with whom the RNP, CNM, or CNS has a relationship that may affect the RNP's, CNM's, or CNS's ability to use independent, objective and sound judgment when prescribing;
2. Providing any controlled substance or prescription-only drug or device for other than accepted therapeutic purposes;
3. Delegating the prescribing and dispensing of drugs or devices to any other person;
4. Prescribing for a patient that is not in the RNP's, CNM's, or CNS's population focus of education and certification except as authorized in subsection (D)(5)(d); and
5. Prescribing, dispensing, or furnishing a prescription drug or a prescription-only device to a person unless the RNP, CNM, or CNS has examined the person and established a professional relationship, except when ~~the RNP is~~ engaging in one or more of the following:
   a. Providing temporary patient care on behalf of the patient's regular treating and licensed health care professional;
   b. Providing care in an emergency medical situation where immediate medical care or hospitalization is required by a person for the preservation or health, life, or limb;
   c. Furnishing a prescription drug to prepare a patient for a medical examination; or
   d. Prescribing antimicrobials to a person who is believed to be at substantial risk as a contact of a patient who has been examined and diagnosed with a communicable disease by the prescribing RNP, CNM, or CNS even if the contact is not in the population focus of the RNP's, CNM's, or CNS's certification.
6. Prescribing or dispensing any controlled substance or prescription-only drug or device in a manner that is inconsistent with other state or federal requirements.

**E.** An RNP, CNM, or CNS shall not dispense a Schedule II Controlled Substance that is an opioid, except for an opioid that is for medication assisted treatment for substance use disorders.

**F.** A CNS's prescribing is additionally limited pursuant to A.R.S. § 32-1651.

**G.** A CRNA may apply for and obtain a prescribing-only certificate upon successful completion of all application requirements that are applicable to prescribing, as listed for other APRNs, and follow the same prescribing restrictions and administrative processes, as described in subsections A-D, above; and consistent with A.R.S. § 32-1634.04, and all other applicable laws.

**R4-19-512. Prescribing Drugs and Devices**

**A.** An RNP, CNM, or CNS granted P & D authority by the Board may, within restrictions provided by law and applicable to each certificate:
1. Prescribe drugs and devices;
2. Provide for refill of prescription-only drugs and devices for one year from the date of the prescription.

**B.** An RNP, CNM, or CNS with P & D authority who wishes to prescribe a controlled substance shall obtain a DEA registration number before prescribing a controlled substance~~.~~, ~~The RNP~~ and shall file the DEA registration number with the Board.

**C.** An RNP, CNM, or CNS with a DEA registration number may prescribe, but may not exceed the limitations of each certification:
1. A Schedule II controlled substance as defined in the federal Controlled Substances Act, 21 U.S.C. § 801 et seq., or Arizona's Uniform Controlled Substances Act, A.R.S. Title 36, Chapter 27, but shall not prescribe refills of the prescription, and shall follow all other restrictions provided by law;
2. A Schedule III or IV controlled substance, as defined in the federal Controlled Substances Act or Arizona's Uniform Controlled Substances Act, and may prescribe a maximum of five refills in six months; and
3. A Schedule V controlled substance, as defined in the federal Controlled Substances Act or Arizona's Uniform Controlled Substances Act, and may prescribe refills for a maximum of one year.

**D.** An RNP, CNM, or CNS whose DEA registration is revoked or expires shall not prescribe controlled substances. An RNP, CNM, or CNS whose DEA registration is revoked or limited shall report the action to the Board within 10 days of the revocation or limitation.

**E.** In all outpatient settings or at the time of hospital discharge, an RNP, CNM, or CNS with P & D authority, who prescribed medication to a patient, shall personally provide ~~a~~ the patient or the patient's representative with the name of the drug, directions for use, and any special instructions, precautions, or storage requirements necessary for safe and effective use of the drug if any of the following occurs:
1. A new drug is prescribed or there is a change in the dose, form, or direction for use in a previously prescribed drug;
2. In the RNP's, CNM's, or CNS's professional judgment, these instructions are warranted; or
3. The patient or patient's representative requests instruction.

**F.** An RNP, CNM, or CNS with P & D authority shall ensure that all prescription orders contain the following:
1. The RNP's, CNM's, or CNS's name, address, telephone number, and population focus;
2. The prescription date;
3. The name of the patient and either the address of the patient or a blank for the address if the prescription is not being dispensed by the RNP, CNM, or CNS;
4. The full name of the drug, strength, dosage form, and directions for use;
5. The letters "DAW", "dispense as written", "do not substitute", "medically necessary" or any similar statement on the face of the prescription form if intending to prevent substitution of the drug;
6. The RNP's, CNM's, or CNS's DEA registration number, if applicable; and
7. The RNP's, CNM's, or CNS's signature.

**R4-19-513. Dispensing Drugs and Devices**

**A.** ~~A registered nurse practitioner (RNP)~~ An RNP, CNM, or CNS granted prescribing and dispensing authority by the Board may, within restrictions provided by law and applicable to each certificate:
1. Dispense drugs and devices to patients;
2. Dispense samples of drugs packaged for individual use without a prescription order or additional labeling;
3. Only dispense drugs and devices obtained directly from a pharmacy, manufacturer, wholesaler, or distributor; and
4. Allow other personnel to assist in the delivery of medications provided that the RNP, CNM, or CNS retains responsibility and accountability for the dispensing process.

**B.** If dispensing a drug or device, an RNP, CNM, or CNS with dispensing authority shall:
1. Ensure that the patient has a written prescription that complies with R4-19-512(F) and contains the address of the patient and inform the patient that the prescription may be filled by the prescribing RNP, CNM, or CNS or by a pharmacy of the patient's choice;
2. Affix a prescription number to each prescription that is dispensed;
3. Ensure that all original prescriptions are preserved for a minimum of seven years and make the original prescriptions available at all times for inspection by the Board of Nursing, Board of Pharmacy, and law enforcement officers in performance of their duties; and
4. Report the dispensing of controlled substances to the Board of Pharmacy's Controlled Substance Prescription Monitoring Program ~~as required in~~ pursuant to A.R.S. § 36-2608.

**C.** An RNP, CNM, or CNS practicing in a public health facility operated by this state or a county or in a qualifying community health center under A.R.S. § 32-1921(D) and (F) may dispense drugs or devices to patients without a written prescription if the public health facility or the qualifying community health center adheres to all storage, labeling, safety, and recordkeeping rules of the Board of Pharmacy.

**D.** An RNP, CNM, or CNS who dispenses a drug shall ensure that a label is affixed that contains all of the following information:
1. Dispensing RNP's, CNM's, or CNS's name and population focus;
2. Address and telephone number of the location from which the drug is dispensed;
3. Date dispensed;
4. Patient's name and address;

5. Name and strength of the drug, quantity in the container, directions for use, and any cautionary statements necessary for the safe and effective use of the drug;
6. Manufacturer and lot number; and
7. Prescription order number.

**E.** An RNP, CNM, or CNS who dispenses a drug or device shall ensure that the following information about the drug or device is entered into the patient's medical record:
1. Name of the drug, strength, quantity, directions for use, and number of refills;
2. Date dispensed;
3. Therapeutic reason;
4. Manufacturer and lot number; and
5. Prescription order number.

**F.** An RNP, CNM, or CNS with dispensing authority shall:
1. Keep all drugs in a locked cabinet or room in an area that is not accessible to patients;
2. If dispensing a controlled substance:
   a. Control access by a written policy that specifies:
      i. Those persons allowed access, and
      ii. Procedures to report immediately the discovery of a shortage or illegal removal of drugs to a local law enforcement agency and provide that agency and the DEA with a written report within seven days of the discovery.
   b. Maintain and make available to the Board upon request an ongoing inventory and record of:
      i. A Schedule II controlled substance, as defined in the federal Controlled Substances Act or Arizona's Uniform Controlled Substances Act, separately from all other records, and a prescription for a Schedule II controlled substance in a separate prescription file; and
      ii. A Schedule III, IV, or V controlled substance, as defined in the federal Controlled Substances Act or Arizona's Uniform Controlled Substances Act, in a form that is readily retrievable from other records.

**G.** If a prescription order is refilled, an RNP, CNM, or CNS with P & D authority shall record the following information on the back of the prescription order or in the patient's medical record:
1. Date refilled,
2. Quantity dispensed if different from the full amount of the original prescription,
3. RNP's, CNM's, or CNS's name or identifiable initials, and
4. Manufacturer and lot number.

**H.** Under the supervision of an RNP, CNM, or CNS with P & D authority, other personnel may:
1. Receive and record a prescription refill request from a patient or a patient's representative;
2. Receive and record a verbal refill authorization from the RNP including:
   a. The RNP's, CNM's, or CNS's name;
   b. Date of refill;
   c. Name, directions for use, and quantity of drug; and
   d. Manufacturer and lot number;
3. Prepare and affix a prescription label; and
4. Prepare a drug or device for delivery, provided that the dispensing RNP, CNM, or CNS:
   a. Inspects the drug or device and initials the label before issuing to the patient to ensure compliance with the prescription; and
   b. Ensures that the patient is informed of the name of the drug or device, directions for use, precautions, and storage requirements.

**R4-19-514. Standards Related to Clinical Nurse Specialist Scope of Practice**

In addition to the functions of a registered nurse, a CNS, ~~under~~ according to A.R.S. § 32-1601(7), may perform one or more of the following for an individual, family, or group within the population focus of certification and for which competency has been maintained:
1. Conduct an advanced assessment, analysis, and evaluation of a patient's complex health needs;
2. Establish primary and differential health status diagnoses;
3. Direct health care as an advanced clinician;
4. Develop, implement, and evaluate a treatment plan according to a patient's need for specialized nursing care;
5. Establish nursing standing orders, algorithms, and practice guidelines related to interventions and specific plans of care;
6. Manage health care according to written protocols;
7. Facilitate system changes on a multidisciplinary level to assist a health care facility and improve patient outcomes cost-effectively;
8. Consult with the public and professionals in health care, business, and industry in the areas of research, case management, education, and administration;
9. Perform psychotherapy if certified as a clinical nurse specialist in psychiatric and mental health nursing;
10. ~~Prescribe and dispense durable medical equipment~~ Prescribe, order, administer, and dispense therapeutic measures including pharmacologic agents and devices if authorized under R4-19-511, and within the limitations of A.R.S. § 32-1651; ~~or~~ and
11. Perform additional acts that the clinical nurse specialist is qualified to perform.

## ARTICLE 6. RULES OF PRACTICE AND PROCEDURE

**R4-19-604. Notice of Hearing; Response**

**A.** The Board, in consultation with the Office of Administrative Hearings, as necessary shall prepare and serve a written notice of hearing on all parties under A.R.S. § 41-1092.05.

**B.** In addition to the notice requirements in A.R.S. § 41-1092.05(D), the Board shall include the following in the notice:

1. The full name, address, and license number, if any, of the licensee, certificate holder, program, or applicant;
2. The name, ~~mailing~~ address of record, and telephone number of the Board's executive director or Board designee if the hearing is to be conducted by the Board;
3. A statement that a hearing will proceed without a party's presence if a party fails to attend or participate in the hearing;
4. The names and ~~mailing~~ addresses of record of persons to whom notice is being given, including the Attorney General representing the state at the hearing; and
5. Any other matters relevant to the proceedings.

**C.** The party named in the notice of hearing shall file a written response under A.R.S. § 32-1664 within 30 days after service of the notice of hearing. The response shall contain:
1. The party's name, address, and telephone number;
2. Whether the party has legal representation and, if so, the name and address of the attorney;
3. A response to the allegations contained in the notice of hearing; and
4. Any other matters relevant to the proceedings.

## ARTICLE 8. CERTIFIED AND LICENSED NURSING ASSISTANTS AND CERTIFIED MEDICATION ASSISTANTS

**R4-19-804. Initial Approval and Re-Approval of Training Programs**

**A.** An applicant for initial training program approval shall submit an application packet to the Board at least 90 days before the expected starting date of the program. An applicant shall submit application documents ~~that are unbound, typed or word processed, single-sided, and on white, letter-size paper plus one electronic copy of the entire packet. The Board does not accept notebooks, spiral bound documents, manuals or books~~ in an electronic format.

**B.** The Board may impose disciplinary action including denial on any training program that has advertised, conducted classes, recruited or collected money from potential students before receiving Board approval or after expiration of approval except for completing instruction to students who enrolled before the expiration date.

**C.** A program applying for initial approval shall include all of the following in their application packet:
1. Name, address, web address, telephone number, e-mail address and fax number of the program;
2. Identity of all program owners or sponsoring institutions;
3. Name, license number, telephone number, e-mail address and qualifications of the program coordinator as required in R4-19-802;
4. Name, license number, telephone number, e-mail address and qualifications of each program instructor including clinical instructors as required in either R4-19-802 for NA programs or R4-19-803 for CMA programs;
5. Name, telephone number, e-mail address and qualifications any person with administrative oversight of the training program, such as an owner, supervisor or director;
6. Accreditation status of the training program, if any, including the name of the accrediting body and date of last review;
7. Name, address, telephone number and contact person, for all health care institutions which will be clinical sites for the program;
8. Medicare certification status of all clinical sites, if any;
9. Evidence of program compliance with this Article including all of the following:
   a. Program description that includes the length of the program, number of hours of clinical, laboratory and classroom instruction, and program goals consistent with federal, state, and if applicable, private postsecondary requirements;
   b. A list and description of classroom facilities, equipment, and instructional tools the program will provide;
   c. Written curriculum and course schedule according to the provisions of this Article;
   d. A copy of the documentation that the program will use to verify student attendance, instructor presence and skills;
   e. Copy of signed, current clinical contracts;
   f. The title, author, name, year of publication, and publisher of all textbooks the program will require students to use;
   g. A copy of course policies and any other materials that demonstrate compliance with this Article and the statutory requirements in Title 32, Chapter 15;
   h. A plan to evaluate the program that meets requirements in R4-19-801(A)(10);
   i. An implementation plan including start date and a description of how the program will provide oversight to ensure all requirements of this Article are met;
   j. A self-assessment checklist of the application contents and their location in the application, on a form provided by the Board; and
   k. Other requirements as requested consistent with R4-19-802 for nursing assistant programs and R4-19-803 for medication assistant programs.

**D.** Re-approval of Training Programs
1. A training program applying for re-approval shall submit ~~a paper and~~ an electronic application and accompanying materials to the Board before expiration of the current approval. ~~The applicant program shall ensure that all documents submitted are unbound, typed or word processed, single-sided, and on white, letter-size paper. The Board does not accept notebooks, spiral bound documents, manuals or books.~~ A program or site of a consolidated program that did not hold any classes in the previous approval period is not eligible for renewal of approval.
2. The program shall include the following with the renewal application:
   a. A program description and course goals;
   b. Name, license number, and qualifications of current program personnel;
   c. A copy of the current curriculum which meets the applicable requirements in either R4-19-802 or R4-19-803;
   d. The dates of each program offering, number of students who have completed the program, and the results of the state-approved written and manual skills tests, including first-time pass rates since the last program review;
   e. A copy of current program policies, consistent with R4-19-801;

f. Any change in resources, contracts, or clinical facilities since the previous approval or changes that were not previously reported to the Board;
g. The program evaluation plan with findings regarding required evaluation elements under R4-19-801(A)(10);
h. The title, author, year of publication, and publisher of the textbook used by the program;
i. Copies of the redacted records of one program graduate;
j. The total number of enrolled students and graduates for each year since the last approval;
k. The total number of persons taking the state-approved exam in the past two years; if the number is less than 10, a comprehensive plan to increase program enrollment;
l. A self-assessment checklist of the application contents and their location in the application, on a form provided by the Board; and
m. Other requirements as requested consistent with R4-19-802 for nursing assistant programs and R4-19-803 for medication assistant programs.

**E.** Upon determination of administrative completeness of either an initial or renewal application, the Board, through its authorized representative, shall schedule and conduct a site visit of a NA program, unless one year only approval is granted on an initial application. The Board may conduct a site visit of a CMA program. Site visits are for the purpose of verifying compliance with this Article. Site visits may be conducted in person or through the use of distance technology.

**F.** Following an evaluation of the program application and a site visit, if applicable, the Board may approve or renew the approval of the program for two years for a nursing assistant program and up to four years for a medication assistant program, if the program renewal application and site visit findings, as applicable, meet the requirements of this Article, and A.R.S. Title 32, Chapter 15 and renewal is in the best interest of the public. If the program does not meet these requirements, the Board may issue a notice of deficiency under R4-19-805 or take disciplinary action.

**G.** A program may request an administrative hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for program approval or renewal of approval. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**H.** The owner, operator, administrator or coordinator of a program that is denied approval or renewal of approval shall not be eligible to conduct, own or operate a new or existing program for a period of two years from the date of denial.

**R4-19-806. Initial Nursing Assistant Licensure (LNA) and Medication Assistant Certification**

**A.** An applicant for initial licensed nursing assistant (LNA) licensure or CMA certification shall submit the following to the Board:
1. A verified application on a form furnished by the Board that provides the following information about the applicant:
   a. Full legal name and any and all former names used by the applicant;
   b. Current ~~mailing~~ address of record, including county of residence, e-mail address and telephone number;
   c. Place and date of birth;
   d. Social Security number;
   e. Ethnic category and marital status at the applicant's discretion;
   f. Educational background, including the name of the training program attended, and date of graduation and for medication assistant, proof of high school or equivalent education completion as required in A.R.S. § 32-1650-02(A)(4);
   g. Current employer, including address and telephone number, type of position, and dates of employment, if employed in health care;
   h. A list of all states in which the applicant is or has been included on a nursing assistant registry or been licensed or certified as a nursing or medication assistant and the license or certificate number, if any;
   i. For medication assistant, proof of LNA licensure and 960 hours or 6 months full time employment as a CNA or LNA in the past year, as required in A.R.S. § 32-1650.02;
   j. Responses to questions regarding the applicant's background on the following subjects:
      i. Current investigation or pending disciplinary action by a nursing, nursing assistant or medication assistant regulatory agency in the United States or its territories;
      ii. Action taken on a nursing assistant or medication assistant license, certification or registry designation in any other state;
      iii. Felony conviction or conviction of an undesignated or other similar offense and the date of absolute discharge of sentence;
      iv. Unprofessional conduct as defined in A.R.S. § 32-1601;
      v. Explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;
2. Proof of satisfactory completion of a nursing assistant or medication assistant training program that meets the requirements of this Article;
3. Proof of United States citizenship or alien status as specified in A.R.S. § 41-1080;
4. For LNA applicants, one or more fingerprint cards or fingerprints;
5. For CMA applicants, one or more fingerprint cards or fingerprints, as required by A.R.S. § 32-1606(B)(15) if a fingerprint background report has not been received by the Board in the past two years; and
6. Applicable fees under A.R.S. § 32-1643 and R4-19-808.

**B.** An applicant for licensure as a nursing assistant shall submit a passing score on a Board-approved nursing assistant examination and provide one of the following criteria:
1. Proof that the applicant has completed a Board-approved nursing assistant training program within the past two years:
2. Proof that the applicant has completed a nursing assistant training program approved in another state or territory of the United States consisting of at least 120 hours within the past two years;

3. Proof that the applicant has completed a nursing assistant program approved in another state or territory of the United States of at least 75 hours of instruction in the past two years and proof of working as a nursing assistant for an additional number of hours in the past two years that together with the hours of instruction, equal at least 120 hours;
4. Proof that the applicant either holds a nursing license in good standing in the U.S. or territories, has graduated from an approved nursing program, or otherwise meets educational requirements for a registered or practical nursing license in Arizona;
5. Documentation sent directly from the program that the applicant successfully completed a nursing course or courses as part of an RN or LPN program approved in either this or another state in the last 2 years that included:
   a. Didactic content regarding long-term care clients; and
   b. Forty hours of instructor-supervised direct patient care in a long-term care or comparable facility; or
6. Documentation of a minimum of 100 hours of military health care training, as evidenced by military records, and proof of working in health care within the past 2 years.

**C.** An applicant for medication assistant shall meet the qualifications of A.R.S. §§ 32-1650.02 and 32-1650.03. An applicant who wishes to use part of a nursing program in lieu of completion of a Board approved medication assistant training program under A.R.S. § 32-1650.02 shall submit the following:
1. An official transcript from a Board approved nursing program showing a grade of C or higher in a 45 hour or 3 semester credit, or equivalent, pharmacology course; and
2. A document signed by both the applicant's clinical instructor and the nursing program administrator verifying that the applicant completed 40 hours of supervised medication administration in a long-term care facility.

**D.** Certifying Exam
1. A LNA applicant shall take and pass both portions of the certifying exam within 2 years:
   a. Of program completion for graduates of nursing assistant programs approved in Arizona or another state, or
   b. Of the date of the first test for all other applicants.
2. A CMA applicant shall take and pass both portions of the certifying exam within one year:
   a. Of program completion for graduates of Board-approved programs, or
   b. Of the date of the first test for all other applicants.
3. An applicant may re-take the failed portion or portions of a certifying exam, under conditions prescribed in written policy by the exam vendor, until a passing score is achieved or their time expires under subsections (D)(1) or (2).

**E.** An applicant who does not take or pass an examination within the time period specified in subsection (D) shall enroll in and successfully complete a Board approved training program in the certification category before being permitted to retake an examination.

**F.** The Board may license a nursing assistant or certify a medication assistant applicant who meets the applicable criteria in this Article and A.R.S. Title 32, Chapter 15 if licensure or certification is in the best interest of the public.

**G.** An applicant who is denied licensure or certification may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying the application for certification. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6.

**H.** Medication assistant certification expires when nursing assistant licensure expires.

**R4-19-809. Nursing Assistant Licensure and Medication Assistant Certificate Renewal**

**A.** An applicant for renewal of a LNA license or a CMA certificate shall:
1. Submit a verified application to the Board on a form furnished by the Board that provides all of the following information about the applicant:
   a. Full legal name, ~~mailing~~ address of record including county of residence, e-mail address and telephone number;
   b. Marital status and ethnicity at the applicant's discretion;
   c. Current health care employer including name, address, telephone number, dates of employment and type of setting;
   d. If the applicant fails to meet the practice requirements in subsections (A)(2) for nursing assistant or (A)(3) for medication assistant renewal, documentation that the applicant has completed a Board-approved training program for the licensure or certification sought and passed both the written and manual skills portions of the competency examination within the past two years;
   e. Responses to questions that address the applicant's background:
      i. Any investigation or disciplinary action by a nursing regulatory agency or nursing assistant regulatory agency in the United States or its territories not previously disclosed by the applicant to the Board;
      ii. Felony conviction or conviction of undesignated offense and date of absolute discharge of sentence since licensed, certified or last renewed, and
      iii. Unprofessional conduct committed by the applicant as defined in A.R.S. § 32-1601 since the time of last renewal and not previously disclosed by the applicant to the Board;
      iv. Any disciplinary action or investigation related to the applicant's nursing or nursing assistant license or medication assistant certificate, nursing assistant certificate or registry listing by any other state regulatory agency since issuance of the license or certificate, or since last renewal and not previously disclosed to the Board.
      v. Explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;
   f. For LNA renewal, employment as a nursing assistant, performing nursing assistant tasks for an employer or the applicant's performance of nursing assistant activities as part of a nursing or allied health program for a minimum of 160 hours every two years since the last license or certificate was issued, or
   g. For CMA renewal, employment as a medication assistant for a minimum of 160 hours within the last 2 years, and
   h. Pay applicable fees pursuant to A.R.S. § 32-1643 and R4-19-808.

**B.** An applicant's license or certificate expires every two years on the last day of the applicant's birth month. If an applicant fails to timely renew the license or certificate, the applicant shall;
1. Not work or practice as an LNA or CMA until the Board issues a renewal license or certificate; and

2. Pay any late fee imposed by the Board.

**C.** If an applicant's license or certificate was, or is currently, revoked, surrendered, denied, suspended or placed on probation in another jurisdiction, the applicant is not eligible to renew or reactivate the applicant's Arizona license or certificate until a review or investigation has been completed and a decision made by the Board.

**D.** The Board may renew an LNA license and CMA certificate of an applicant who meets the criteria established in statute and this Article. An applicant who is denied renewal of a license or certificate may request a hearing by filing a written request with the Board within 30 days of service of the Board's order denying renewal of the license or certificate. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6 of this Chapter.

**R4-19-815. Reissuance or Subsequent Issuance of a Nursing Assistant License or Medication Assistant Certificate**

**A.** A person whose LNA license or CMA certificate was denied, revoked, or voluntarily surrendered pursuant to A.R.S. § 32-1663 may apply to the Board to issue or re-issue the license or certificate:

1. Five years from the date of denial or revocation, or
2. In accordance with the terms of a voluntary surrender agreement.

**B.** A person who applies for issuance or re-issuance of a license or certificate under the conditions of subsection (A) is subject to the following terms and conditions:

1. The applicant shall submit a written application for issuance or re-issuance of the license or certificate that contains substantial evidence that the basis for surrendering, denying, or revoking the license or certificate has been removed and that the issuance or re-issuance of the license or certificate will not be a threat to public health or safety.
2. Safe practice:
   a. Pursuant to A.R.S. § 32-1664(F), the Board for reasonable cause may require a combination of mental, physical, nursing competency, psychological, or psychiatric evaluations, or any combination of evaluations, reports, and affidavits that the Board considers necessary to determine the person's competence and conduct to safely practice as an LNA or CMA.
   b. The Board may require the applicant to be tested for competency, or retake and successfully complete a Board approved training program and pass the required examination, all at the applicant's expense.

**C.** The Board shall consider the application, and may designate a time for the applicant to address the Board at a regularly scheduled meeting.

**D.** After considering the application, the Board may:

1. Grant certification <u>or licensure</u>, with or without conditions or limitations, or
2. Deny the application.

**E.** An applicant who is denied issuance or re-issuance of LNA licensure or CMA certification may request a hearing by filing a written request with the Board within 30 days of service of the Board's order. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6, of this Chapter.

# NOTICES OF SUPPLEMENTAL PROPOSED RULEMAKING

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 4. PROFESSIONS AND OCCUPATIONS
## CHAPTER 30. BOARD OF TECHNICAL REGISTRATION

[R20-113]

### PREAMBLE

**1. Citations to the agency's Notice of Rulemaking Docket Opening, the Notice of Proposed Rulemaking, and any other Notices of Supplemental 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* as specified in R1-1409(A):**

Notice of Rulemaking Docket Opening: 25 A.A.R. 3291, November 8, 2019

Notice of Proposed Rulemaking: 25 A.A.R. 3477, December 6, 2019

**2.**

| Article, Part, or Section Affected (as applicable) | Rulemaking Action |
|---|---|
| R4-30-106 | Amend |
| R4-30-247 | Amend |

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

Authorizing statutes: A.R.S. §§ 32-106(A)(1), (9); 32-106(F); 32-111(D)(7) and 32-121

Implementing statutes: A.R.S. §§ 32-101 and 32-122.02(A)(5)

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

Name: Kurt Winter, Communications Manager

Address: Board of Technical Registration
1110 W. Washington, Suite 240
Phoenix, AZ 85007

Telephone: (602) 364-4930

Fax: (602) 364-4931

E-mail: Kurt.winter@azbtr.gov

Web site: www.azbtr.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:**

R4-30-106 requires that Board fees be paid by cash, check, money order or credit card payments. The Board has experienced circumstances in which not all forms of payment established in rule could actually be accepted and processed. In addition, the Board has been the victim of theft of cash by an employee during a period of time when appropriate controls for cash acceptance were lacking. The Board has researched the fee payment statutes and rules for Title 32 boards and other agencies, and found that 21 of the 28 boards and agencies do not define type of payment in statute or rule, giving those agencies the ability to adapt to circumstances that may be outside of the agency's control. The Board intends to amend the rule to be consistent with the 21 agencies that do not define type of payment in law.

In addition, the Board has received requests for clarification related to the financial assurance home inspectors are required to obtain and retain per A.R.S. § 32-122.02 in the event a home inspector applies to place the certification on inactive status. The statute does not waive the financial assurance requirement for home inspectors who choose to put a certificate on inactive status. However, the Board recognizes a home inspector may choose inactive status either for a limited period of time, or as a permanent retirement vehicle. The Board's proposed rule requires a home inspector who chooses to place a certificate in inactive status to retain the financial assurance for at least two years from the date the inactive application is approved. The rule amendment is intended to keep the public welfare intent of the financial assurance in place for a reasonable period of time, but allow a home inspector to enter retirement without a permanent burden of financial assurance.

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

The Board did not rely on any studies related to this rulemaking.

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

The proposed rulemaking struck the payment option of cash from the rule. The supplemental rulemaking does not strike cash from being an option for payment and does not specify a form of payment to be consistent with Title 32 agencies in general.

The proposed rulemaking clarified that statute requires a home inspector to maintain financial assurance when placing a certification on inactive status. The supplemental rulemaking specifies a period of time during which documentation of financial assurance must be retained after a certificate is placed on inactive status.

**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:**

The proposed amendments will not diminish a previous grant of authority of a political subdivision of the state.

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

The Board does not anticipate any negative economic impact upon the public as a result of this rulemaking. The Board's customers usually, and in the majority, pay for Board services with credit cards or personal checks. The Board absorbs the credit card fee, offsetting any financial burden to the payor. A person who chooses to make payment by money order or cashier's check or who would need to purchase a money order or cashiers check, if cash is not being accepted, will incur a minor fee for the service.

Home inspectors are required by statute to bear the burden of obtaining and retaining financial assurance (professional liability insurance/bond) to protect the public. The rulemaking does not add to the burden and provides a two-year termination option if the home inspector permanently retires the certificate. Without this rulemaking, a home inspector who maintains a license by placing it on inactive status would be required by statute to retain the financial assurance permanently. This rule will financially benefit retired home inspectors.

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


| | |
|---|---|
| Name: | Patrice Pritzl, Deputy Director |
| Address: | Board of Technical Registration<br>1110 W. Washington, Ste. 240<br>Phoenix, AZ 85007 |
| Telephone: | (602) 364-4955 |
| Fax: | (602) 364-4931 |
| E-mail: | patrice.pritzl@azbtr.gov |


**11. 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:**

Written comment can be submitted to the Board office at 1110 W. Washington, Suite 240, Phoenix, AZ 85007 between 8:00 a.m. and 5:00 p.m., Monday through Friday, for 30 days from the date of this published notice in the *Register*. The Board will schedule opportunity for oral comment if a request is submitted within that time-frame.

**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 reasons why a general permit is not used:**

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:**

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 one submitted an analysis to the Board regarding either of these rules.

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

Not applicable

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

## TITLE 4. PROFESSIONS AND OCCUPATIONS

## CHAPTER 30. BOARD OF TECHNICAL REGISTRATION

### ARTICLE 1. GENERAL PROVISIONS

Section
R4-30-106. Fees

## ARTICLE 2. REGISTRATION PROVISIONS

Section
R4-30-247. Home Inspector Certification

## ARTICLE 1. GENERAL PROVISIONS

**R4-30-106. Fees**

**A.** The Board shall charge the following fees:
1. A computer generated list of registrants for a non-commercial purpose is $0.25 per name, with a maximum fee of $300.00.
2. A computer generated list of registrants for a commercial purpose is $0.25 per name, with a minimum fee of $250.00.
3. The photocopy fee is $1.00 for up to three pages followed by a $0.25 fee for each additional page.
4. The replacement certificate fee for registrants and certificate holders is $10.00 per certificate.
5. The recording medium copy fee is $15.00 per recording.
6. The local examination review fee is $30.00 per hour.
7. The returned check fee is $25.00 per check.
8. The verification of registration or certification fee is $25.00 per verification.
9. The laminated pocket card fee is $10.00 per card.

**B.** A person paying fees shall remit them in United States dollars. ~~in the form of cash, check, money order, or credit card~~. If a check is returned for insufficient funds, repayment, including payment of the returned check charge, shall be made in the form of ~~cash,~~ money order, or certified check.

**C.** Upon written request, the Board shall waive renewal fees for registrants whose registration is in inactive status.

**D.** Application fee refunds are not allowed after the application has been assigned an application number and processing commences.

## ARTICLE 2. REGISTRATION PROVISIONS

**R4-30-247. Home Inspector Certification**

**A.** An applicant for certification as a home inspector shall submit an original completed application package that contains the following:
1. Evidence of successful completion, within two years before the date of application, of the National Home Inspector Examination as administered by the Examination Board of Professional Home Inspectors;
2. The information in subsections (B) and (C);
3. A completed fingerprint card;
4. Applicable fees;
5. Evidence of successful completion of 84 hours of classroom training or an equivalent course conducted by an educational facility that is licensed by the Arizona State Board for Private Postsecondary Education, or accredited by the Distance Education Accrediting Commission, or by an accrediting agency approved by the United States Department of Education. The course of study shall encompass all of following major content areas:
   a. Structural Components,
   b. Exterior,
   c. Roofing,
   d. Plumbing,
   e. Heating,
   f. Cooling,
   g. Electrical,
   h. Insulation and Ventilation,
   i. Interiors,
   j. Fireplaces and Solid Fuel-Burning Devices,
   k. Swimming Pools & Spas, and
   l. Professional Practice;
6. Evidence of completion of 30 parallel inspections. The 30 parallel inspections and home inspection report shall meet the standards in R4-30-301.01 and be retained by the applicant for at least two years from the date of application. The applicant shall conduct these inspections on separate residential dwelling units and shall list them on a log provided by the Board. The log shall include, with respect to each inspection, the address of the property, the date of the inspection, and the name and certification number of the supervising home inspector. The Board may hold the applicant's package for a period of one year based solely on the need for time to permit the applicant to complete the required parallel inspections. All timeframes promulgated under A.R.S. Title 41, Chapter 6, Article 7.1 are suspended during this period.

**B.** A certified home inspector is not required to inspect a pool and/or spa as part of a home inspection. If a certified home inspector conducts a pool and/or spa inspection, it shall be conducted in accordance with the "Standards of Professional Practice for the Inspection of Swimming Pools & Spas for Arizona Home Inspectors," ("Standards") adopted and published by the Board on February 28, 2012. Copies of the Standards are available at the Board's office.

**C.** The application package shall contain the following:
1. Name, residence address, mailing address if different from residence address, and telephone number;
2. Date of birth and Social Security number of the applicant;
3. Citizenship or legal residence;
4. A detailed explanatory statement regarding:
   a. Any disciplinary action, including suspension and revocation, taken by any state or jurisdiction on any professional or occupational registration, license, or certification held by the applicant in any state or jurisdiction;
   b. Refusal of any professional or occupational registration, license, or certification by any state or jurisdiction;

c. Any pending disciplinary action in any state or jurisdiction on any professional or occupational registration, license, or certification held by the applicant;
d. Any alias or other name used by the applicant;
e. Any conviction for a felony or misdemeanor, other than a minor traffic violation.

5. Documentation of absolute discharge from sentence at least five years before the date of application if an applicant has been convicted of one or more felonies; evidence of having a valid fingerprint clearance card issued according to Title 41, Chapter 12, Article 3.1;
6. State or jurisdiction in which any professional or occupational registration, license or certification is held; type of registration, license, or certification; number; year granted, and how registration, license, or certification was granted (that is, by examination, education, experience, or reciprocity); June 30, 2018 Page 18 Supp. 18-2 4 A.A.C. 30 *Arizona Administrative Code* Title 4, Ch. 30 Board of Technical Registration
7. The current status of any application for any type of professional or occupational registration, license, or certification pending in another state or jurisdiction;
8. A release authorizing the Board to investigate the applicant's education, experience, and moral character and repute;
9. Certification that the information provided to the Board is accurate, true, and complete;
10. Copy of one home inspection report that meets the standards in R4-30-301.01 and reports on at least one immediate major repair as defined in the standards, along with the Report Checklist Supplement; and
11. Sworn statement or statements by the supervising certified home inspector or inspectors that the parallel inspections conducted by the applicant meet the standards in R4-30-301.01.

**D.** The Board staff shall review all applications and, if necessary, refer completed applications to the Home Inspector Rules and Standards Committee or a certified home inspector evaluator for evaluation. If the application is complete and in the proper form, the Board staff, committee, or evaluator is satisfied that all statements on the application are true, and the applicant is eligible in all other aspects to be certified as a home inspector, the Board staff, committee, or evaluator shall recommend that the Board certify the applicant. If the evidence is not clear and convincing of qualification for certification, the matter shall be reviewed by the committee and the committee may request additional information regarding any issue upon which the applicant has not established qualification by clear and convincing evidence.

**E.** A certified home inspector shall notify the Board in writing within five business days of any loss of, or change in, financial assurance. The Board shall suspend the certificate holder's certification immediately and prohibit further home inspections until current proof of financial assurance is provided to the Board. The Board shall revoke a certificate if the certificate holder fails to provide proof of financial assurance within 90 days of loss of financial assurance or lapse of policy. All certified home inspectors shall provide proof of financial assurance at the time of each annual certification renewal. The Board shall not renew a home inspector certification unless the financial assurance is in full force and effect.

**F.** A home inspector who places a home inspector certificate on inactive status shall retain the proof of financial assurance for at least two years after the date that the certificate becomes inactive. A home inspector who fails to retain financial assurance for the required two years is subject to suspension and revocation of the home inspection certificate according to subsection (E). In order to reactivate an inactive home inspection certificate, a home inspector shall provide proof of financial assurance to the Board with the application for reactivation. An inactive home inspector certification shall not qualify for reactivation until proof of financial assurance has been submitted to the Board.

**~~F~~G.** In order to reactivate an inactive home inspector certificate, a home inspector who has not practiced as a certified home inspector during that time in another state requiring registration for the previous five years shall take and pass the National Home Inspector Examination.

# NOTICES OF RULEMAKING DOCKET OPENING

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

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

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

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

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

## NOTICE OF RULEMAKING DOCKET OPENING

### BOARD OF NURSING

[R20-114]

**1. Title and its heading:** 4, Professions and Occupations

**Chapter and its heading:** 19, Board of Nursing

**Article and its heading:** 1, Definitions and Time-frames

2, Arizona Registered and Practical Nursing Programs; Refresher Programs

3, Licensure

5, Advanced Practice Registered Nursing

6, Rules of Practice and Procedure

8, Certified and Licensed Nursing Assistants and Certified Medication Assistants

**Section numbers:** R4-19-101, R4-19-102, R4-19-207, R4-19-208, R4-19-209, R4-19-210, R4-19-216, R4-19-301, R4-19-304, R4-19-305, R4-19-308, R4-19-501, R4-19-502, R4-19-503, R4-19-504, R4-19-505, R4-19-506, R4-19-507, R4-19-508, R4-19-511, R4-19-512, R4-19-513, R4-19-514, R4-16-604, R4-19-804, R4-19-806, R4-19-809, R4-19-815 (*Sections may be added, modified or deleted as necessary).*

**2. The subject matter of the proposed rule:**

The Arizona State Board of Nursing is opening a docket on these Sections for the following reasons:

1. To modify existing rules consistent with statutory changes, including clinical nurse specialist prescribing and dispensing authority, certified registered nurse anesthetist prescribing authority, certified nurse midwives as separate category, use of "address of record" terminology
2. To decrease regulatory burdens by eliminating requirements to submit documents in paper
3. To expedite temporary license applications by eliminating fingerprint results requirement
4. To permit the Executive Director to grant provisional approval to advanced practice nursing programs pending Board review
5. To adopt a definition of "advanced practice registered nurse"
6. Technical edits including use of acronyms and correcting terminology

**3. A citation to all published notices relating to the procedure:**

Notice of Proposed Rulemaking: 26 A.A.R. 1399, July 17, 2020 (*in this issue*)

**4. The name and address of agency personnel with whom persons may communicate regarding the rules:**

Name: Joey Ridenour, Executive Director
Address: Board of Nursing
1740 W. Adams St., Suite 2000
Phoenix, AZ 85007
Telephone: (602) 771-7801
Fax: (602) 771-7888
E-mail: jridenour@azbn.gov

**5. The time during which the agency will accept written comments and the time and place where oral comments may be made:**

The Board will hold an oral proceeding on August 18, 2020, from 1 to 2 p.m., in Board Room A at 1740 W. Adams St., Suite 2000, Phoenix, AZ 85007. The Board will accept written comments submitted to Joey Ridenour, Executive Director, at the above address, until the close of record at 5 p.m., August 18, 2020.

**6. A time table for agency decisions or other action on the proceeding, if known:**

See the Notice of Proposed Rulemaking on page 1399 of this issue.

# GOVERNOR EXECUTIVE ORDER

Executive Order 2020-02 is being reproduced in each issue of the *Administrative Register* as a notice to the public regarding state agencies' rulemaking activities.

This order has been reproduced in its entirety as submitted.

## EXECUTIVE ORDER 2020-02

### Moratorium on Rulemaking to Promote Job Creation and Economic Development; Implementation of Licensing Reform Policies

[M20-01]

**WHEREAS**, government regulations should be as limited as possible; and

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

**WHEREAS**, protecting the public health, peace and safety of the residents of Arizona is a top priority of state government; 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, 2017, 2018 and 2019; and

**WHEREAS**, the State of Arizona eliminated or improved 637 burdensome regulations in 2019 and a total of 2,289 needless regulations have been eliminated or improved since 2015; and

**WHEREAS**, estimates show these eliminations saved job creators $53.9 million in operating costs in 2019 and a total of over $134.3 million in savings since 2015; and

**WHEREAS**, in 2019, for every one new necessary rule added to the Administrative Code, five have been repealed or improved; and

**WHEREAS**, approximately 354,000 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 to conduct 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 while protecting the health and safety of residents; and

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

1. 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 justifications 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 which are antiquated, redundant or otherwise no longer necessary for the operation of state government.
2. A State agency that submits a rulemaking request pursuant to this Order shall recommend for consideration by the Office of the Governor at least ***three*** existing rules to eliminate for every ***one*** additional rule requested by the agency.

3. A State agency that submits a rulemaking exemption request pursuant to this Order shall include with their request an analysis of how small businesses may be impacted by any newly proposed rules or rule modifications.
4. 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 the Arizona Revised Statutes or Arizona Administrative Code. Any material that is not specifically authorized must be removed immediately.
5. A State agency that issues occupational or professional licenses shall prominently post on the agency's website landing page all current state policies that ease licensing burdens and the exact steps applicants must complete to receive their license using these policies. State agencies should provide information that applies to all applicants, but have a designated area on such landing page that includes licensing information specifically for military spouses, active duty service members and veterans and all policies that make it easier for these applicant groups to receive their license. Examples of reduced licensing burdens include universal recognition of out-of-state licenses, availability of temporary licenses, fee waivers, exam exemptions and/or allowing an applicant to substitute military education or experience for licensing requirements. A landing page feature may link to an internal agency web page with more information, if necessary. All information must be easy to locate and written in clear and concise language.
6. All state agencies that are required to issue occupational or professional licenses by universal recognition (established by section 32-4302, Arizona Revised Statutes) must track all applications received for this license type. Before any agency denies a professional or occupational license applied for under section 32-4302, Arizona Revised Statutes, the agency shall submit the application and justification for denial to the Office of the Governor for review before any official action is taken by the agency. The Office of the Governor should be notified of any required timeframes, whether in statute or rule, for approval or denial of the license by the agency.
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 section 41-1001, Arizona Revised Statutes.

**IN WITNESS THEREOF**, 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 13th day of January in the Year Two Thousand and Twenty and of the Independence of the United States of America the Year Two Hundred and Forty-Fourth.

**ATTEST:**

**Katie Hobbs**
**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**
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PSMM = Proposed Summary amended Section
PSMR = Proposed Summary repealed Section
PSM# = Proposed Summary renumbered Section
**FINAL SUMMARY**
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FSMM = Final Summary amended Section
FSMR = Final Summary repealed Section
FSM# = Final Summary renumbered Section

**EXPEDITED RULEMAKING**
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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**
XN = Exempt new Section
XM = Exempt amended Section
XR = Exempt repealed Section
X# = Exempt renumbered Section
**EXEMPT PROPOSED**
PXN = Proposed Exempt new Section
PXM = Proposed Exempt amended Section
PXR = Proposed Exempt repealed Section
PX# = Proposed Exempt renumbered Section
**EXEMPT SUPPLEMENTAL PROPOSED**
SPXN = Supplemental Proposed Exempt new Section
SPXR = Supplemental Proposed Exempt repealed Section
SPXM = Supplemental Proposed Exempt amended Section
SPX# = Supplemental Proposed Exempt renumbered Section
**FINAL EXEMPT RULEMAKING**
FXN = Final Exempt new Section
FXM = Final Exempt amended Section
FXR = Final Exempt repealed Section
FX# = Final Exempt renumbered Section

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

**RECODIFICATION OF RULES**
RC = Recodified

**REJECTION OF RULES**
RJ = Rejected by the Attorney General

**TERMINATION OF RULES**
TN = Terminated proposed new Sections
TM = Terminated proposed amended Section
TR = Terminated proposed repealed Section
T# = Terminated proposed renumbered Section

**RULE EXPIRATIONS**
EXP = Rules have expired
*See also "emergency expired" under emergency rulemaking*

**CORRECTIONS**
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R2-20-701. PM-101; FM-886; FM-1259
R2-20-702. FM-309; FM-1132
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R9-16-204. PER-129; PEN-129; FER-816; FEN-816
R9-16-205. PER-129; PEN-129; FER-816; FEN-816
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R9-7-302. PEM-431; FEM-1067
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R9-7-313. PEM-431; FEM-1067
R9-7-318. PEM-431; FEM-1067
R9-7-448. PEM-431; FEM-1067
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R9-7-1927. PEM-431; FEM-1067
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R9-19-306. PEM-891
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R20-5-507. FM-311
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R12-5-101. PM-1305
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R12-5-105. PM-1305
R12-5-106. PM-1305
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R12-5-210. PM-1305
R12-5-211. PM-1305
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**Manufactured Housing, Board of**

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R4-34-805. PM-529

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R4-23-110. FM-223
R4-23-204. FM-223
R4-23-205. FM-223
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R4-23-408. FM-223
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R4-23-607. FM-223
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R4-25-103. PM-645
R4-25-104. PM-645
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R4-25-502. PM-645
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**Psychologist Examiners, Board of**

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| R4-26-407. | PR-187; FR-1017 |
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| R2-8-122. | FM-371 |
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| R2-8-127. | PN-947 |
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| R2-8-132. | PN-947 |
| R2-8-133. | PN-947 |

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| R7-6-201. | PEM-1363 |
| R7-6-202. | PEN-1363 |
| R7-6-205. | PEM-1363 |
| R7-6-210. | PEM-1363 |
| R7-6-211. | PEM-1363 |
| R7-6-212. | PEM-1363 |
| R7-6-213. | PEM-1363 |
| R7-6-214. | PEM-1363 |
| R7-6-215. | PEM-1363 |
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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 | Date Filed | Effective Date | Date Filed | Effective Date | Date Filed | Effective Date | Date Filed | Effective Date | Date Filed | Effective Date |
| 1/1 | 3/1 | 2/1 | 4/1 | 3/1 | 4/30 | 4/1 | 5/31 | 5/1 | 6/30 | 6/1 | 7/31 |
| 1/2 | 3/2 | 2/2 | 4/2 | 3/2 | 5/1 | 4/2 | 6/1 | 5/2 | 7/1 | 6/2 | 8/1 |
| 1/3 | 3/3 | 2/3 | 4/3 | 3/3 | 5/2 | 4/3 | 6/2 | 5/3 | 7/2 | 6/3 | 8/2 |
| 1/4 | 3/4 | 2/4 | 4/4 | 3/4 | 5/3 | 4/4 | 6/3 | 5/4 | 7/3 | 6/4 | 8/3 |
| 1/5 | 3/5 | 2/5 | 4/5 | 3/5 | 5/4 | 4/5 | 6/4 | 5/5 | 7/4 | 6/5 | 8/4 |
| 1/6 | 3/6 | 2/6 | 4/6 | 3/6 | 5/5 | 4/6 | 6/5 | 5/6 | 7/5 | 6/6 | 8/5 |
| 1/7 | 3/7 | 2/7 | 4/7 | 3/7 | 5/6 | 4/7 | 6/6 | 5/7 | 7/6 | 6/7 | 8/6 |
| 1/8 | 3/8 | 2/8 | 4/8 | 3/8 | 5/7 | 4/8 | 6/7 | 5/8 | 7/7 | 6/8 | 8/7 |
| 1/9 | 3/9 | 2/9 | 4/9 | 3/9 | 5/8 | 4/9 | 6/8 | 5/9 | 7/8 | 6/9 | 8/8 |
| 1/10 | 3/10 | 2/10 | 4/10 | 3/10 | 5/9 | 4/10 | 6/9 | 5/10 | 7/9 | 6/10 | 8/9 |
| 1/11 | 3/11 | 2/11 | 4/11 | 3/11 | 5/10 | 4/11 | 6/10 | 5/11 | 7/10 | 6/11 | 8/10 |
| 1/12 | 3/12 | 2/12 | 4/12 | 3/12 | 5/11 | 4/12 | 6/11 | 5/12 | 7/11 | 6/12 | 8/11 |
| 1/13 | 3/13 | 2/13 | 4/13 | 3/13 | 5/12 | 4/13 | 6/12 | 5/13 | 7/12 | 6/13 | 8/12 |
| 1/14 | 3/14 | 2/14 | 4/14 | 3/14 | 5/13 | 4/14 | 6/13 | 5/14 | 7/13 | 6/14 | 8/13 |
| 1/15 | 3/15 | 2/15 | 4/15 | 3/15 | 5/14 | 4/15 | 6/14 | 5/15 | 7/14 | 6/15 | 8/14 |
| 1/16 | 3/16 | 2/16 | 4/16 | 3/16 | 5/15 | 4/16 | 6/15 | 5/16 | 7/15 | 6/16 | 8/15 |
| 1/17 | 3/17 | 2/17 | 4/17 | 3/17 | 5/16 | 4/17 | 6/16 | 5/17 | 7/16 | 6/17 | 8/16 |
| 1/18 | 3/18 | 2/18 | 4/18 | 3/18 | 5/17 | 4/18 | 6/17 | 5/18 | 7/17 | 6/18 | 8/17 |
| 1/19 | 3/19 | 2/19 | 4/19 | 3/19 | 5/18 | 4/19 | 6/18 | 5/19 | 7/18 | 6/19 | 8/18 |
| 1/20 | 3/20 | 2/20 | 4/20 | 3/20 | 5/19 | 4/20 | 6/19 | 5/20 | 7/19 | 6/20 | 8/19 |
| 1/21 | 3/21 | 2/21 | 4/21 | 3/21 | 5/20 | 4/21 | 6/20 | 5/21 | 7/20 | 6/21 | 8/20 |
| 1/22 | 3/22 | 2/22 | 4/22 | 3/22 | 5/21 | 4/22 | 6/21 | 5/22 | 7/21 | 6/22 | 8/21 |
| 1/23 | 3/23 | 2/23 | 4/23 | 3/23 | 5/22 | 4/23 | 6/22 | 5/23 | 7/22 | 6/23 | 8/22 |
| 1/24 | 3/24 | 2/24 | 4/24 | 3/24 | 5/23 | 4/24 | 6/23 | 5/24 | 7/23 | 6/24 | 8/23 |
| 1/25 | 3/25 | 2/25 | 4/25 | 3/25 | 5/24 | 4/25 | 6/24 | 5/25 | 7/24 | 6/25 | 8/24 |
| 1/26 | 3/26 | 2/26 | 4/26 | 3/26 | 5/25 | 4/26 | 6/25 | 5/26 | 7/25 | 6/26 | 8/25 |
| 1/27 | 3/27 | 2/27 | 4/27 | 3/27 | 5/26 | 4/27 | 6/26 | 5/27 | 7/26 | 6/27 | 8/26 |
| 1/28 | 3/28 | 2/28 | 4/28 | 3/28 | 5/27 | 4/28 | 6/27 | 5/28 | 7/27 | 6/28 | 8/27 |
| 1/29 | 3/29 | 2/29 | 4/29 | 3/29 | 5/28 | 4/29 | 6/28 | 5/29 | 7/28 | 6/29 | 8/28 |
| 1/30 | 3/30 | | | 3/30 | 5/29 | 4/30 | 6/29 | 5/30 | 7/29 | 6/30 | 8/29 |
| 1/31 | 3/31 | | | 3/31 | 5/30 | | | 5/31 | 7/30 | | |

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

# 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 |
|---|---|---|
| February 7, 2020 | February 28, 2020 | March 30, 2020 |
| February 14, 2020 | March 6, 2020 | April 6, 2020 |
| February 21, 2020 | March 13, 2020 | April 13, 2020 |
| February 28, 2020 | March 20, 2020 | April 20, 2020 |
| March 6, 2020 | March 27, 2020 | April 27, 2020 |
| March 13, 2020 | April 3, 2020 | May 4, 2020 |
| March 20, 2020 | April 10, 2020 | May 11, 2020 |
| March 27, 2020 | April 17, 2020 | May 18, 2020 |
| April 3, 2020 | April 24, 2020 | May 26, 2020 |
| April 10, 2020 | May 1, 2020 | June 2, 2020 |
| April 17, 2020 | May 8, 2020 | June 8, 2020 |
| April 24, 2020 | May 15, 2020 | June 15, 2020 |
| May 1, 2020 | May 22, 2020 | June 22, 2020 |
| May 8, 2020 | May 29, 2020 | June 29, 2020 |
| May 15, 2020 | June 5, 2020 | July 6, 2020 |
| May 22, 2020 | June 12, 2020 | July 13, 2020 |
| May 29, 2020 | June 19, 2020 | July 20, 2020 |
| June 5, 2020 | June 26, 2020 | July 27, 2020 |
| June 12, 2020 | July 3, 2020 | August 3, 2020 |
| June 19, 2020 | July 10, 2020 | August 10, 2020 |
| June 26, 2020 | July 17, 2020 | August 17, 2020 |
| July 3, 2020 | July 24, 2020 | August 24, 2020 |
| July 10, 2020 | July 31, 2020 | August 31, 2020 |
| July 17, 2020 | August 7, 2020 | September 8, 2020 |
| July 24, 2020 | August 14, 2020 | September 14, 2020 |
| July 31, 2020 | August 21, 2020 | September 21, 2020 |
| August 7, 2020 | August 28, 2020 | September 28, 2020 |
| August 14, 2020 | September 4, 2020 | October 5, 2020 |
| August 21, 2020 | September 11, 2020 | October 13, 2020 |
| August 28, 2020 | September 18, 2020 | October 19, 2020 |

# 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 under A.R.S. § 41-1013(B)(15).

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 305, Phoenix, AZ 85007. For more information, call (602) 542-2058 or visit http://grrc.az.gov.

## GOVERNOR'S REGULATORY REVIEW COUNCIL DEADLINES FOR 2019/2020

*(MEETING DATES ARE SUBJECT TO CHANGE)*

[M19-118]

| DEADLINE FOR PLACEMENT ON AGENDA* | FINAL MATERIALS SUBMITTED TO COUNCIL | DATE OF COUNCIL STUDY SESSION | DATE OF COUNCIL MEETING |
|---|---|---|---|
| *Tuesday* November 19, 2019 | *Tuesday* December 24, 2019 | *Tuesday* January 7, 2020 | *Tuesday* January 14, 2020 |
| *Tuesday* December 24, 2019 | *Tuesday* January 21, 2020 | *Tuesday* January 28, 2020 | *Tuesday* February 4, 2020 |
| *Tuesday* January 21, 2020 | *Tuesday* February 18, 2020 | *Tuesday* February 25, 2020 | *Tuesday* March 3, 2020 |
| *Tuesday* February 18, 2020 | *Tuesday* March 24, 2020 | *Tuesday* March 31, 2020 | *Tuesday* April 7, 2020 |
| *Tuesday* March 24, 2020 | *Tuesday* April 21, 2020 | *Tuesday* April 28, 2020 | *Tuesday* May 5, 2020 |
| *Tuesday* April 21, 2020 | *Tuesday* May 19, 2020 | ***Wednesday*** May 27, 2020 | *Tuesday* June 2, 2020 |
| *Tuesday* May 19, 2020 | *Tuesday* June 23, 2020 | *Tuesday* June 30, 2020 | *Tuesday* July 7, 2020 |
| *Tuesday* June 23, 2020 | *Tuesday* July 21, 2020 | *Tuesday* July 28, 2020 | *Tuesday* August 4, 2020 |
| *Tuesday* July 21, 2020 | *Tuesday* August 18, 2020 | *Tuesday* August 25, 2020 | *Tuesday* September 1, 2020 |
| *Tuesday* August 18, 2020 | *Tuesday* September 22, 2020 | *Tuesday* September 29, 2020 | *Tuesday* October 6, 2020 |
| *Tuesday* September 22, 2020 | *Tuesday* October 20, 2020 | *Tuesday* October 27, 2020 | *Tuesday* November 3, 2020 |
| *Tuesday* October 20, 2020 | *Tuesday* November 17, 2020 | *Tuesday* November 24, 2020 | *Tuesday* December 1, 2020 |
| *Tuesday* November 17, 2020 | *Tuesday* December 22, 2020 | *Tuesday* December 29, 2020 | *Tuesday* January 5, 2021 |
| *Tuesday* December 29, 2020 | *Tuesday* January 19, 2021 | *Tuesday* January 26, 2021 | *Tuesday* February 2, 2021 |

* 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.