

Arizona Administrative REGISTER

Published by the Department of State ~ Office of the Secretary of State

Arizona Administrative Register

Volume 32

Issue 40

October 2, 2026

Contents

INFORMATION	Page 2390
PARTICIPATE IN RULEMAKING	Page 2391
DEFINITIONS AND ACRONYMS	Page 2392
RULES AND RULEMAKING	
NOTICE OF PROPOSED RULEMAKING	Page 2393
21 A.A.C. 7 Department of Child Safety - Child Welfare Agency Licensing	Page 2393
NOTICE OF PROPOSED EXEMPT RULEMAKING	Page 2400
9 A.A.C. 22 Arizona Health Care Cost Containment System - Administration	Page 2400
9 A.A.C. 22 Arizona Health Care Cost Containment System - Administration	Page 2405
9 A.A.C. 28 Arizona Health Care Cost Containment System - Arizona Long-term Care System.....	Page 2409
OTHER AGENCY NOTICES	
NOTICE OF RULEMAKING DOCKET OPENING	Page 2422
9 A.A.C. 22 Arizona Health Care Cost Containment System - Administration	Page 2422
9 A.A.C. 22 Arizona Health Care Cost Containment System - Administration	Page 2423
9 A.A.C. 28 Arizona Health Care Cost Containment System - Arizona Long-term Care System.....	Page 2424
14 A.A.C. 4 Corporation Commission - Securities	Page 2425
21 A.A.C. 7 Department of Child Safety - Child Welfare Agency Licensing	Page 2426
NOTICE OF PROPOSED DELEGATION AGREEMENT	Page 2428
Department of Environmental Quality	Page 2428
INDEXES	
Register Index Ledger	Page 2430
Register Page Guide for 2026 - Volume 32	Page 2431
Rulemaking Activity, Cumulative Index for 2026	Page 2432
Other Notices and Public Records, Cumulative Index for 2026.....	Page 2442
CALENDAR/DEADLINES	
Rules Effective Dates	Page 2445
Register Publishing Deadlines.....	Page 2449
GOVERNOR'S REGULATORY REVIEW COUNCIL	
Governor's Regulatory Review Council Deadlines	Page 2450

DIRECTOR
Administrative Rules Division
SCOTT CANCELOSI

PUBLISHER
Secretary of State
ADRIAN FONTES

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 Office of the Secretary of State's website is the official published version for rulemaking activity in the state of Arizona. The *Register* is published weekly by issue number, every Friday by the Administrative Rules Division.

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

The *Register* contains notices of docket openings, proposed, final, emergency, expedited, exempt, and terminated rules as defined in Arizona Revised Statutes known as the Arizona Administrative Procedure Act (APA), and A.R.S. Title 41, Chapter 6, Articles 1 through 10. Other "notice only" filings are published in the *Register* which includes Informal Public Meetings on an Open Rulemaking Docket, Formal Rulemaking Advisory Committees, Public Information, Oral Proceedings, Public Hearings, Public Meetings, Agency Guidance Documents, Substantive Policy Statements, Proposed Delegation Agreements, Final Delegation Agreements, and Agency Ombudsman.

ABOUT AMENDMENTS TO RULES

Rulemaking is defined in the APA. Rules can be made (all new text); amended (changed) or repealed (removed) as codified in the *Arizona Administrative Code*; or renumbered (moving rules to a different Section number). New rules published in the *Register*, whether proposed or made as a final rule, are underlined; repealed rules (text being removed), is stricken.

ABOUT THE TABLE OF CONTENTS

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.

ABOUT FILE NUMBERS

Notices filed in the Division are assigned a file number. This number is enclosed in brackets and located at the top right of the published documents in the *Register*. Original filed notices are available in pdf for free. For a copy, contact our Division with the file number.

ABOUT THE ADMINISTRATIVE CODE

The *Arizona Administrative Code* (A.A.C.) contains codified text of rules. When published, the underling and striking of text in notices as published in the *Register* are removed. The codified rules have either been approved by the Governor's Regulatory Review Council or Attorney General as prescribed under the APA. The *Code* also contains rules exempt from the rulemaking process, and emergency rules. The authenticated pdf of *Code* Chapters posted on the Office of the Secretary of State's website are the official published version of rules in the A.A.C. The *Code* is posted online for free.

Arizona Administrative **REGISTER**

October 2, 2026

Volume 32

Issue 40

PUBLISHER
SECRETARY OF STATE
Adrian Fontes

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
The *Arizona Administrative Code* is available online at www.azsos.gov.

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
Mailing Address:
ADMINISTRATIVE RULES DIVISION
Office of the Secretary of State
1700 W. Washington Street, Fl. 7
Phoenix, AZ 85007
(602) 364-3223

The Office of the Secretary of State is an equal opportunity employer.

Participate in Rulemaking

Review Published Notices

Those interested in participating in the rulemaking process should review notices published in the *Arizona Administrative Register*.

The Preamble at the beginning of a notice contains information about the rulemaking and provides agency justification and regulatory intent. Agency contact information is published in the Preamble for those interested in participating in the rulemaking process.

The Preamble 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.

Agency Contact Lists

Many agencies maintain stakeholder lists to contact those interested in proposed changes to rules. Check an agency's website and its newsletters for information about notices, oral proceedings, 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. Refer to A.R.S. § 41-1033 for more information.

Attend a Public Meeting

Stakeholders can attend an public meeting, known as an oral proceeding, being conducted by the agency on a Notice of Proposed Rulemaking. A proceeding may be listed in the Preamble of a Notice of Proposed Rulemaking or an agency may inform the public of the meeting in a Notice of Oral Proceeding. Attend the meeting and be prepared to speak and comment.

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

Refer to information in the Preamble.

Write the Agency

Put your comments in writing and send them 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, before the rules are filed with the Secretary of State.

THE REGULAR RULEMAKING PROCESS

Authority

An agency is given the authority to promulgate a rule under the APA, statute passed by the Legislature, or ballot proposition, which is passed by the voters.

An agency may be given certain exemptions to the APA or portions thereof.

Information about the exemptions are provided in the Preamble of the rulemaking.

Permission to Proceed

Before moving forward with any notice, an agency first receives permission from the governor's office to proceed with a rulemaking.

The governor's office provides the agency a written response to proceed that is filed with the notice.

Stakeholder and Public Notification

The agency opens a docket. It is filed as a Notice of Rulemaking Docket Opening for publication in the *Register*.

The notice includes agency contact information along with its intentions to make, amend, repeal, or renumber, a rule and its justification to perform the rulemaking action. Often an agency will file the docket with the proposed rulemaking.

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

Agency Proposes Rules, Public Reviews Proposal

The agency files a Notice of Proposed Rulemaking and the notice is published in the *Register*.

The public is given the opportunity to comment on the proposed rules. The agency opens the comment period to last at least 30 days. Written comments are accepted informally.

The notice *may* contain information about oral proceedings.

A proceeding is held no sooner than 30 days after the notice is published.

If no proceeding is scheduled, the agency provides information on how a person may request to speak to the agency in person at an oral proceeding.

Oral Proceeding

A person requests an agency to conduct an oral proceeding based on the information provided in its Notice of Proposed Rulemaking.

The agency prepares a Notice of Oral Proceeding on Proposed Rulemaking, schedules one or more proceeding, and files the notice for publication in the *Register*.

When it occurs, an agency extends the public comment period.

Close of Record

After evaluating public comments and conducting an internal review of the rule, an agency:

1. Determines whether the rulemaking requires a substantial change. When an agency decides to make substantial changes to a proposed rule, it continues the process as outlined under the APA. The agency obtains permission to proceed as stated under #2 of this timeline. The agency prepares a Notice of Supplemental Proposed Rulemaking with the changes and files it for publication in the *Register*. Comments are once again solicited and reviewed by the agency.
2. Prepares and submits for review a Notice of Final Rulemaking for review and approval by G.R.R.C. or Attorney General. The Notice of Final Rulemaking must be submitted for review within 120 days after the close of record; or
3. Terminates the rulemaking. The agency may decide to terminate its docket and files a notice for publication in the *Register* notifying stakeholders of the termination. Refer to A.R.S. § 41-1021(A)(2).

Time Frame for Approval or Disapproval of the Notice

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

The Approved Rule is Published in Register and Codified in the Code

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

The Notice of Final Rulemaking is published in the *Register* and codified in the *Arizona Administrative Code*.

Definitions and Acronyms

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

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

Arizona Revised Statutes (A.R.S.): The statutes are made by the Arizona State Legislature during a legislative session. They are compiled by Legislative Council, with the official publication codified by Thomson Reuters. 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.

Arizona Administrative Register
NOTICES OF PROPOSED RULEMAKING

Volume 32, Issue 40, October 2, 2026

NOTICES OF PROPOSED RULEMAKING

The Administrative Procedure Act (APA) requires an agency file a Notice of Rulemaking Docket Opening which outlines its rulemaking intentions under [A.R.S. § 41-1021](#). A docket opening and Notice of Proposed Rulemaking are often filed at the same time and published in the same *Register* issue. If they are not filed at the same time, information on where the docket opening was published is listed in the preamble of the proposed rulemaking.

An agency must allow at least 30 days to elapse after the publication of the Notice of Proposed Rulemaking in the *Register* before scheduling any oral proceedings. Written public comments shall be accepted for at least 30 days after the published notice. Refer to A.R.S. §§ [41-1013](#), [41-1022](#) and [41-1023](#).

Questions about the notice can be answered by the person listed in item #5 of the preamble.

Refer to item #11 of the preamble for information on how to comment on this notice, the close of record to comment, and information related to oral proceedings.

NOTICE OF PROPOSED RULEMAKING

TITLE 21. CHILD SAFETY

**CHAPTER 7. DEPARTMENT OF CHILD SAFETY
CHILD WELFARE AGENCY LICENSING**

File Number: R26-169

PREAMBLE

1. **Permission to proceed with this proposed rulemaking was granted under A.R.S. § 41-1039 by the governor on:**
June 19, 2026
2.

Article, Part, or Section Affected (as applicable)	Rulemaking Action
R21-7-101	Amend
R21-7-134	Amend
R21-7-207	Amend
R21-7-209	Amend
3. **Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):**
Authorizing statute: A.R.S. § 8-453
Implementing statute: A.R.S. §§ 8-503 and 8-810
4. **Citations to all related notices published in the *Register* that pertain to the current record of the proposed rule:**
Notice of Rulemaking Docket Opening: 32 A.A.R. 2426, October 2, 2026 (*in this issue*); File Number: R26-173
5. **The agency's contact person who can answer questions about the rulemaking:**
Name: Karen Wouters
Title: Rule Development Specialist
Division: DCS Office of Policy and Rules, Department of Child Safety
Address: PO Box 6030 - Site Code C010-23
Phoenix, AZ 85005-6030

Telephone: (602) 255-3461
Fax: (480) 681-4000
Email: Karen.Wouters@azdcs.gov
Website: <https://dcs.az.gov/about/dcs-rules-rulemaking>
6. **An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**
The rules under A.A.C. Title 21, Chapter 7, Article 1 and 2 pertain to child welfare agency licensing and group home

Arizona Administrative Register
NOTICES OF PROPOSED RULEMAKING

requirements. These rules need to be updated to clarify expectations and processes for notification of missing children. This will establish a quicker and more efficient process for ensuring proper notification and coordination between DCS, local law enforcement, the group home and the child placing agency occurs when a child is missing from a facility licensed by DCS. These amendments are necessary to ensure that efforts to locate missing children can begin and the health and safety of children is prioritized.

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

The Department of Child Safety did not review or rely on any study relevant to the proposed amended rules.

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

Not applicable

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

As of July 1, 2026, there are 59 licensed agencies, and of the 59 licensed agencies, 48 (81%) have a contract with the Department. As of July 1, 2026, those 59 licensed agencies have a total of 215 residential group care facilities in which 170 of those fall under a contract with the Department. Furthermore, as of July 1, 2026, there are eight child placing agencies licensed. Child placing agencies do not contract with the Department of Child Safety.

There is not expected to be an economic impact by these rule changes. The changes are minor and clarify communication processes. The Department does not propose any changes to the fees in this chapter. No new full-time staff will be needed based on these proposed rule changes.

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

Name: Karen Wouters
Title: Rule Development Specialist
Division: DCS Office of Policy and Rules, Department of Child Safety
Address: PO Box 6030 - Site Code C010-23
Phoenix, AZ 85005-6030
Telephone: (602) 255-3461
Fax: (480) 681-4000
Email: Karen.Wouters@azdcs.gov
Website: <https://dcs.az.gov/about/dcs-rules-rulemaking>

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 comments should be directed to the person listed in #5, Monday through Friday from 8 a.m. to 5 p.m., except for state holidays. Comments will also be accepted via email at the email address provided under item #5. All comments must be received by 5:00 p.m., on close of public record. Mailed written comments shall be postmarked within 30 days of this published notice. The Department has scheduled an oral proceeding for public comments:

Date: November 13, 2026
Time: 10:00 a.m.
Location: Virtual Oral Proceeding via Microsoft Teams
Meeting ID: 256 283 424 449 284
Passcode: KX9Db7KD
or
Dial in by phone
+1 480-561-6122
Phone conference ID: 728 449 557#

Public comment period ends: November 13, 2026

Close of record: November 13, 2026

Arizona Administrative Register
NOTICES OF PROPOSED RULEMAKING

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

None

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

The rules pertain to child welfare agency licensing and group home requirements. A license is required to operate a Child Welfare Agency but a general permit is not required.

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

Federal laws 42 U.S.C. 675. The rules are not more stringent than federal law.

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

Not applicable

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 21. CHILD SAFETY

**CHAPTER 7. DEPARTMENT OF CHILD SAFETY
CHILD WELFARE AGENCY LICENSING**

ARTICLE 1. LICENSING REQUIREMENTS FOR A CHILD WELFARE AGENCY

Section

R21-7-101. Definitions

R21-7-134. Licensing Complaint

ARTICLE 2. RESIDENTIAL GROUP CARE FACILITIES

Section

R21-7-207. Notification of Unusual Incidents and Other Occurrences

R21-7-209. ~~Runaway and~~ Missing Children

ARTICLE 1. LICENSING REQUIREMENTS FOR A CHILD WELFARE AGENCY

R21-7-101. Definitions

In addition to the definitions contained in A.R.S. § 8-501, the following definitions apply in this Chapter:

1. "Abuse" No change
2. "Administrative Completeness Review Time Frame" No change
3. "Adult" No change
4. "Adverse action" No change
5. "After care" No change
6. "Agency" No change
7. "Amendment" No change
8. "Applicant" No change
9. "Behavior management" No change
10. "Board of Directors" No change
11. "Calendar day" No change
12. "Central Registry" No change
13. "Centralized Intake Hotline" No change
14. "Chief Executive Officer" or "CEO" No change
15. "Child" No change
16. "Child in care" means a child that is placed in the physical custody of an Agency, licensee, or residential group care facility other than with the child's parent or guardian residing in a residential group care facility.
17. "Child Placement" or "placement activity" No change
18. "Child Placing Agency" No change
19. "Child safety worker" No change
20. "Corrective action" No change
21. "Corrective Action Plan" No change

Arizona Administrative Register
NOTICES OF PROPOSED RULEMAKING

- 22. "Criminal History self-disclosure" No change
 - a. No change
 - b. No change
 - c. No change
- 23. "DCS Report" No change
- 24. "De-escalation" No change
- 25. "Department" or "DCS" No change
- 26. "Developmentally appropriate" No change
 - a. No change
 - b. No change
- 27. "Direct care services" No change
- 28. "Direct care staff" No change
- 29. "Directive Corrective Action Plan" No change
- 30. "Discharge plan" No change
 - a. No change
 - b. No change
- 31. "Disqualifying act" No change
- 32. "Document" No change
- 33. "Exploitation" No change
- 34. "Facility" No change
 - a. No change
 - b. No change
 - c. No change
- 35. "File" No change
- 36. "Foster care" No change
- 37. "Good standing" No change
- 38. "Governing body" No change
- 39. "Health self-disclosure" No change
 - a. No change
 - i. No change
 - ii. No change
 - iii. No change
 - iv. No change
 - v. No change
 - b. No change
- 40. "Human services field" No change
- 41. "Individual Education Plan" or "IEP" No change
- 42. "Initial wellness screening" No change
- 43. "License" or "regular license" No change
- 44. "Licensee" No change
- 45. "Licensing year" No change
- 46. "Life Safety Inspection" No change
- 47. "Living unit" No change
- 48. "Medical professional" No change
- 49. "Medication" No change
- 50. "Missing" means that Agency staff has made reasonable attempts to locate the child including contact with the child's school, friends, and other places the child may frequent and has no information indicating when the child will return and:
 - a. The responsible agency staff is unaware of a child in care's whereabouts;
 - b. A child in care has left a facility without the permission of the responsible agency staff; or
 - c. A child in care has failed to return to a facility at an agreed upon time.
- ~~50-51.~~ "Mobile dwelling" No change
- ~~51-52.~~ "Multi-Purpose Premises" No change
 - a. No change
 - b. No change
 - i. No change
 - ii. No change
 - iii. No change
- ~~52-53.~~ "Neglect" No change
- ~~53-54.~~ "Non-ambulatory child" No change
- ~~54-55.~~ "Normalcy" No change
- ~~55-56.~~ "Operating certificate" No change
- ~~56-57.~~ "Out-of-home placement" No change
- ~~57-58.~~ "Overall time frame" No change
- ~~58-59.~~ "Person" No change

Arizona Administrative Register
NOTICES OF PROPOSED RULEMAKING

~~59-60.~~ “Personally identifiable information” No change

- a. No change
- b. No change
- c. No change
- d. No change
- e. No change
- f. No change
- g. No change
- h. No change
- i. No change
- ii. No change
- iii. No change
- iv. No change

~~60-61.~~ “Placing Entity” No change

~~61-62.~~ “Planning participants” No change

~~62-63.~~ “Pool” No change

~~63-64.~~ “Positive Discipline” No change

~~64-65.~~ “Premises” No change

- a. No change
- b. No change

~~65-66.~~ “Program director” No change

~~66-67.~~ “Provisional license” No change

~~67-68.~~ “Residential environment” No change

~~68-69.~~ “Residential group care facility” No change

~~69-70.~~ “Restrictive behavior management” No change

~~70.~~ “Runaway” means that:

- a. ~~The responsible agency staff is unaware of a child in care’s whereabouts, has made reasonable attempts to locate the child including contacting the child’s school, friends, and other places the child may frequent and has no information indicating when the child will return;~~
- b. ~~A child in care has left a facility without the permission of the responsible agency staff; or~~
- e. ~~A child in care has failed to return to a facility at an agreed upon time.~~

71. “Safeguard” No change

- a. No change
- b. No change
- c. No change
- d. No change
- e. No change
- f. No change

72. “Service plan” No change

73. “Shelter care facility” No change

74. “Significant person” No change

75. “Site inspection” No change

76. “Sleeping area” No change

77. “Staff” No change

78. “Substantial compliance with licensing requirements” No change

- a. No change
- b. No change
- c. No change

79. “Substantive review time frame” No change

80. “Threat” No change

81. “Time and temperature control for safety food standards” No change

82. “Transitional program” or “Independent living program” No change

83. “Unusual incident” No change

84. “Workday” No change

85. “Young adult” No change

R21-7-134. Licensing Complaint

- A. ~~If the Department receives a licensing complaint about a licensee, Agency, or facility, the Department shall ask the complaining party to submit the licensing complaint to the Department’s Centralized Intake Hotline. The Department shall investigate a licensing complaint under this Section when the complaining party does not contact the Centralized Intake Hotline. The Department shall investigate each licensing complaint the Department receives about a licensee, Agency, or facility under this Section.~~
- B. The Department shall refer a licensing complaint involving an allegation of child abuse or neglect to the Department’s Centralized Intake Hotline as required by A.R.S. § 13-3620 for investigation under A.R.S. § 8-455.
- C. The Department shall investigate a licensing complaint about a licensee through one or more of the following methods:

Arizona Administrative Register
NOTICES OF PROPOSED RULEMAKING

1. Telephone contact with the licensee,
 2. Interviews with the complaining party,
 3. Interviews with the licensee's management and staff,
 4. Interviews with the licensee's clients and children in care,
 5. Interviews of witnesses to the matters at issue,
 6. Inspections of records and documents related to the issues raised in the complaint,
 7. Announced and unannounced inspections of the Agency or a facility,
 8. Evaluation of a law enforcement or DCS report or investigation and supporting information for evidence of a licensing violation, and
 9. Any other activity necessary to validate or refute the allegations in the complaint.
- D.** The licensee shall cooperate in any Department investigation.
- E.** Upon completion of an investigation involving a licensing complaint under this Section, the Department shall:
1. Find that the licensing complaint is invalid, document the findings in the Agency's licensing file, and close the investigation;
 2. Find that the licensing complaint is valid and take action against the licensee if necessary under R21-7-114 or require corrective action under R21-7-113; or
 3. Find that the licensing complaint cannot be validated or refuted based on the available evidence and document the finding in the licensing file.
- F.** The Department shall provide the licensee with written notification of any findings made under subsection (E) and shall place a copy of the written findings in the licensee's file.
- G.** For purposes of this Section, a licensing complaint is an allegation that the Child Welfare Agency has violated any of the requirements set forth in this Chapter or in A.A.C. Title 21 Chapter 8.

ARTICLE 2. RESIDENTIAL GROUP CARE FACILITIES

R21-7-207. Notification of Unusual Incidents and Other Occurrences

- A.** The licensee shall have a written policy and procedure consistent with the requirements of this Chapter, regarding documentation of, and reporting requirements for unusual incidents.
- B.** The licensee shall maintain a record of each unusual incident in a separate log that permits the Department to easily locate the documentation of each incident that occurred.
- C.** The licensee shall immediately, but no later than two hours, notify the Centralized Intake Hotline:
1. Of any incident of alleged physical or sexual abuse of a child in care;
 2. Upon the death of a child in care;
 3. When a child in care suffers an injury, illness, or psychiatric episode that is severe enough to require emergency medical intervention, treatment, hospitalization or emergency services for the child;
 4. When a child in care attempts suicide;
 5. Substance abuse by the child in care that results in emergency medical treatment, hospitalization, or overdose;
 6. When a child in care is arrested by law enforcement;
 7. When ~~a child's~~ the whereabouts of a child in the custody of the Department of Child Safety are unknown, including a child who has run away from a facility;
 8. When the facility requires an emergency evacuation; or
 9. When the licensee is affected by a fire or natural disaster with or without the need of emergency evacuation.
- D.** The licensee shall immediately call emergency services and within two hours of the licensee's knowledge of the death of a child in care:
1. Notify the Placing Entity or, if no Placing Entity, parent or guardian who placed the child with the Agency;
 2. Cooperate in any arrangements for examination, autopsy, and burial; and
 3. Provide written notice to the Department.
- E.** If a child in care suffers a serious illness, serious injury, or a severe psychiatric episode requiring hospitalization, the licensee shall notify the Placing Entity or, if no Placing Entity, parent or guardian who placed the child with the Agency and the Department within 24 hours of the licensee's knowledge of the occurrence.
- F.** If a child suffers a severe psychotic episode, or exhibits suicidal ideation, homicidal ideation, a threat of self-harm, or other mental health crisis that places the child or others in immediate danger, the licensee shall immediately contact a crisis hotline or the licensee's internal licensed counselor with training in crisis management. The licensee shall notify the Placing Entity or, if there is no Placing Entity, parent or guardian who placed the child with the Agency within 24 hours of the licensee's knowledge of the occurrence.
- G.** The licensee shall comply with the statutory obligation to report child abuse or neglect, under A.R.S. § 13-3620.
- H.** The licensee shall comply with any reporting requirements set forth in the licensee's contracts and shall give the Department written documentation on the form provided by the Department within 48 hours:
1. Of any fire or a natural disaster affecting the licensee, Agency, or facility with or without the need for emergency evacuation;
 2. When pest infestation has been discovered at a facility;
 3. When law enforcement involvement occurs in which a formal complaint is filed by or against the licensee;
 4. When sexual contact or physical aggression occurs between children;
 5. When a threat or altercation occurs involving a child in care;
 6. When self-harming behavior occurs;
 7. When a child in care receives emergency medical treatment;
 8. When adverse medication reactions occur which may or may not result in medical intervention;
 9. When medication is administered in an emergency situation;

Arizona Administrative Register
NOTICES OF PROPOSED RULEMAKING

10. When an accident or incident occurs involving injury or trauma to a child in care, including transportation related accidents;
11. When damage or theft of property occurs to or by a child in care;
12. When a child in care is involved in an incident that results in law enforcement contact;
13. When restrictive behavior management is used on a child in care;
14. Knowledge of substance use or abuse; and
15. When a call is made to the Centralized Intake Hotline involving a child in care.

R21-7-209. ~~Runaway and Missing Children~~

- A. The Agency shall have written policy and procedures, consistent with the requirements of this Chapter, for responding to a child in care who has run away or is otherwise a missing child.
- B. The Agency's policy and procedure shall meet the following minimum requirements:
 1. The Agency's strategies for making children feel safe and welcomed;
 2. Notification shall be provided to the:
 - a. Local law enforcement agency,
 - b. Placing Entity or person who placed the child with the Agency, and
 - c. Administrator of the child's facility or that person's designee;
 3. Timeframes for notification to the entities detailed in R21-7-207;
 4. How to submit an incident report to the Placing Entity or person who placed the child with the Agency; and
 5. Ensure the safety of a runaway or missing child who returns to the licensee, including:
 - a. Interviewing the child to determine the factors that led to the child's absence from the facility;
 - b. Determining the child's experiences while absent from care, including whether the child is a victim of a crime or sex trafficking; and
 - c. Determining substance use by the child in care that could result in emergency medical treatment, hospitalization, or overdose.
- C. The Agency shall provide direct care staff information on reasons why children run away.

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

Volume 32, Issue 40, October 2, 2026

NOTICES OF PROPOSED EXEMPT RULEMAKING

An agency shall prepare and submit a Notice of Proposed Exempt Rulemaking to be published in the *Register* as specified in the Arizona Administrative Procedure Act (APA), by the Arizona State Legislature in statute, or under a referendum or initiative passed into law by Arizona voters.

The Office makes a distinction publishing certain exemptions as provided in these laws, on a case-by-case basis, as determined by an agency's exemption. Other rule exemption types are published elsewhere in the *Register*.

Notices of Proposed Exempt Rulemaking as published in this section have been proposed under specific conditions, such as requiring the notice to be published in the *Register* or on the agency's website, or requiring for written comments, oral proceedings, or a public hearings on the proposed rule.

The authority authorizing the exemption is provided under item #3 of the preamble.

Questions about the notice can be answered by the person listed in item #5 of the preamble.

NOTICE OF PROPOSED EXEMPT RULEMAKING

TITLE 9. HEALTH SERVICES

**CHAPTER 22. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ADMINISTRATION**

File Number: R26-176

PREAMBLE

1. **Permission to proceed with this exempt rulemaking was granted under A.R.S. § 41-1039 by the governor on:**
July 7, 2026
2.

Article, Part, or Section Affected (as applicable)	Rulemaking Action
R9-22-730	Amend
3. **Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):**
Authorizing statute: A.R.S. § 36-2901.08
Implementing statute: A.R.S. § 36-2901.08
Statute or session law authorizing the exemption: A.R.S. § 41-1005(A)(31)
4. **Citations to all related notices published in the *Register* as specified in R1-1-409(A) that pertain to the current record of the proposed exempt rule:**
Notice of Exempt Rulemaking Docket Opening: 32 A.A.R. 2422, October 2, 2026 (*in this issue*); File Number: R26-174
5. **The agency's contact person who can answer questions about the rulemaking:**

Name:	Sam McCue
Title:	Senior Rules Analyst
Division:	AHCCCS Office of the General Counsel
Address:	150 N. 18th Ave. Phoenix, AZ 85007
Telephone:	(602) 417-4232
Fax:	(602) 253-9115
Email:	AHCCCSRules@azahcccs.gov
Website:	www.azahcccs.gov
6. **An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**
Rulemaking for the Hospital Assessment was initially approved under Executive Order 2012-03, and this regulation was subsequently revised in April 2015 and each year thereafter. This rulemaking will continue the practice of modify-

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

ing the regulation by adjusting the per-discharge assessments and net patient outpatient revenue contributions from various hospital types, effective with invoices issued on October 15, 2026. Under A.R.S. § 36-2901.08, the Administration is responsible for administering and collecting hospital assessments to fund the non-federal share of costs for eligible persons enrolled under A.R.S. § 36-2901.01 (Proposition 204 population) and A.R.S. § 36-2901.07 (adults with incomes between 106% and 138% of the Federal Poverty Level).

The proposed rulemaking aligns with federal regulation 42 CFR 433.68, which includes a hold harmless provision. Under Arizona's current agreement with the federal government (the State Plan), the state is required to maintain this coverage unless the plan is amended. The Hospital Assessment serves as a funding mechanism for persons covered under Proposition 204, including those in federally mandated groups such as the elderly, blind, disabled, and certain parents. Without approval from the Centers for Medicare & Medicaid Services, Arizona would not receive federal funding to support healthcare coverage for these populations. Failure to secure funding could lead to a significant loss of health coverage for Arizona residents or require hospitals to contribute more than necessary to the assessment.

- 7. 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:**

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

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

Not applicable

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

The AHCCCS program is jointly funded by the state and the federal government through the Medicaid program. Depending on the eligibility category of the person, the federal government provides between two-thirds and 100% of the cost of care for persons described in A.R.S. § 36.2901.08(A). The Administration will use the amounts collected from the assessment combined with the federal financial participation to fund the cost of health care coverage for nearly 700,000 persons described in A.R.S. § 36.2901.08(A) through direct payments to health care providers and capitation payments to managed care organizations that, in turn, make payments to health care providers that render care to AHCCCS members. Many of these providers are small businesses located in Arizona. A.R.S. § 36-2901.08 prohibits the assessed hospitals from passing the cost of the assessment to patients or third parties who pay for care in the hospital.

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

Name: Sam McCue
Title: Senior Rules Analyst
Division: AHCCCS Office of the General Counsel
Address: 150 N. 18th Ave.
Phoenix, AZ 85007
Telephone: (602) 417-4232
Fax: (602) 253-9115
Email: AHCCCSRules@azahcccs.gov
Website: www.azahcccs.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:**

AHCCCS is providing a 30-day time frame for submission of public comments regarding the proposed exempt rulemaking beginning September 15, 2026, the date this Notice of Proposed Exempt Rulemaking was posted on the AHCCCS website at www.azahcccs.gov until October 15, 2026. All public comments are to be submitted to the person listed under item #5.

The agency is not required under A.R.S. § 41-1005(A)(31) to conduct an oral proceeding.

NOTICES OF PROPOSED EXEMPT RULEMAKING

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

There are no other matters prescribed by statute applicable specifically to the Administration or this specific rulemaking.

- 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:
The rules are not more stringent than federal law.
- c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:
Not applicable

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 9. HEALTH SERVICES

CHAPTER 22. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ADMINISTRATION

ARTICLE 7. STANDARDS FOR PAYMENTS

Section

R9-22-730. Hospital Assessment Fund - Hospital Assessment

ARTICLE 7. STANDARDS FOR PAYMENTS

R9-22-730. Hospital Assessment Fund - Hospital Assessment

- A. For purposes of this Section, the following terms are defined as provided below. In addition to definitions contained in R9-22-101 and A.R.S. § 36-2901, the words and phrases in this Section have the following meanings unless the context specifically explicitly requires another meaning:
1. "2023-2024 Medicare Cost Report" means: ~~The the Medicare Hospital Provider Cost Report for the hospital a hospital's fiscal year ending in calendar year 2023-2024 as reported in the CMS Healthcare Provider Cost Reporting Information System (HCRIS) release dated January 5, 2025 January 3, 2026.~~
 2. "2023-2024 Uniform Accounting Report" means the Uniform Accounting Report submitted to ~~the Arizona Department of Health Services ADHS~~ as of ~~December 15, 2024 November 19, 2025~~, for ~~the a~~ hospital's fiscal year ending in calendar year ~~2023-2024~~.
 3. "Quarter" means ~~the a three-month period beginning January 1, April 1, July 1, and October 1 each year.~~ "Annualized" means divided by a ratio equal to the number of months of data divided by 12 months.
 4. A ~~"new"~~ "New hospital" means a licensed hospital that did not hold a license from ~~the Arizona Department of Health Services ADHS~~ prior to ~~January 1, 2025 January 1, 2026~~.
 5. "Outpatient Net Patient Revenues"~~net patient revenues~~" means an amount, calculated using data in ~~the a~~ hospital's ~~2023-2024~~ Uniform Accounting Report or other data sources specified by subsection (N), that is equal to the hospital's ~~2023-2024~~ total net patient revenue multiplied by the ratio of the hospital's ~~2023-2024~~ gross outpatient revenue to the hospital's ~~2023-2024~~ total gross patient revenue.
 6. "Quarter" means a three-month period beginning January 1, April 1, July 1, and October 1, each year.
- B. Beginning January 1, 2014, ~~for each an~~ Arizona licensed hospital not excluded under subsection (L) shall be subject to an assessment payable on a quarterly basis. The assessment shall be levied against the legal owner of ~~each the~~ hospital as of the first day of the quarter, ~~and except as otherwise required by subsections (D), (E), (F), (G), (H) and through (I).~~ For the period beginning ~~October 1, 2025, October 1, 2026~~, the assessment for ~~each the~~ hospital shall be amount equal to the sum of: ~~(1) the~~
1. ~~The~~ number of discharges reported on the hospital's ~~2023 2024~~ Medicare Cost Report, excluding discharges reported on the Medicare Cost Report as "Other Long Term Care Discharges," multiplied by the following rates appropriate to the hospital's peer group; and ~~(2) the~~
 2. ~~The~~ amount of outpatient net patient revenues multiplied by the following rate appropriate to the hospital's peer group:
~~1-a. \$628.25 \$801.75 per discharge and 1.0634% 1.3548 percent of outpatient net patient revenues for a hospital located in a~~
county with a population less than 500,000 that are designated as type: hospital, subtype: short-term.

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

- 2-b. ~~\$628.25~~ \$801.75 per discharge and ~~0.4431%~~ 0.5645 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: critical access hospital.
- 3-c. ~~\$157.25~~ \$200.50 per discharge and ~~0.4431%~~ 0.5645 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: long term.
- 4-d. ~~\$157.25~~ \$200.50 per discharge and ~~0.4431%~~ 0.5645 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: psychiatric, that reported 2,500 or more discharges on the ~~2023~~ 2024 Medicare Cost Report.
- 5-e. ~~\$502.75~~ \$641.50 per discharge and ~~1.1520%~~ 1.4677 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: short-term with ~~20%~~ 20 percent of total licensed beds licensed as pediatric, pediatric intensive care and neonatal intensive care as reported in the hospital's ~~2023~~ 2024 Uniform Accounting Report.
- 6-f. ~~\$565.50~~ \$721.50 per discharge and ~~1.3292%~~ 1.6935 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: short-term with at least ~~10%~~ 10 percent but less than ~~20%~~ 20 percent of total licensed beds licensed as pediatric, pediatric intensive care and neonatal intensive care as reported in the hospital's ~~2023~~ 2024 Uniform Accounting Report.
- 7-g. ~~\$125.75~~ \$160.50 per discharge and ~~0.3545%~~ 0.4516 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: children's.
- 8-h. ~~\$628.25~~ \$801.75 per discharge and ~~1.7723%~~ 2.2580 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: short-term not included in another peer group.
- C. ~~Peer groups~~ A peer group for the four quarters beginning October 1 of each year ~~are~~ is established based on ~~hospitals~~ a hospital's license type and subtype designated in the Provider & Facility Database for Arizona Medical Facilities posted by the ~~Arizona Department of Health Services~~ ADHS Division of Licensing Services on its website on ~~January 1, 2025~~ January 1, 2026.
- D. ~~Notwithstanding~~ Except as provided in subsection (B), psychiatric discharges from a hospital that reported having a psychiatric sub-provider in the hospital's ~~2023~~ 2024 Medicare Cost Report, are assessed a rate of ~~\$157.25~~ \$200.50 for each discharge from the psychiatric sub-provider as reported in the ~~2023~~ 2024 Medicare Cost Report. All discharges other than those reported as discharges from the psychiatric sub-provider are assessed at the rate required by subsection (B).
- E. ~~Notwithstanding~~ Except as provided in subsection (B), rehabilitative discharges from a hospital that reported having a rehabilitative sub-provider in the hospital's ~~2023~~ 2024 Medicare Cost Report, are assessed a rate of \$0 for each discharge from the rehabilitative sub-provider as reported in the ~~2023~~ 2024 Medicare Cost Report. All discharges other than those reported as discharges from the rehabilitative sub-provider are assessed at the rate required by subsection (B).
- F. ~~Notwithstanding~~ Except as provided in subsection (B), for ~~any~~ a hospital that reported more than 22,800 discharges on the hospital's ~~2023~~ 2024 Medicare Cost Report, discharges ~~in excess of~~ greater than 22,800 are assessed a rate of ~~\$63.00~~ \$80.25 for each discharge ~~in excess of 22,800~~. The initial 22,800 discharges are assessed at the rate required by subsection (B).
- G. ~~Notwithstanding~~ Except as provided in subsection (B), for ~~any~~ a hospital that reported pediatric outpatient net patient revenues greater than \$375,000,000 on the hospital's ~~2023~~ 2024 Uniform Accounting Report, pediatric outpatient net patient revenues greater than \$375,000,000 are assessed a rate of ~~0.3544%~~ 0.0452 percent for pediatric outpatient net patient revenues greater than \$375,000,000 from a hospital designated as subtype children's. The initial \$375,000,000 ~~of in~~ pediatric outpatient net patient revenues are assessed at the rate required by subsection (B).
- H. ~~Notwithstanding~~ Except as provided in subsection (B), for ~~any~~ a short-term hospital with at least ~~10%~~ 10 percent but less than ~~20%~~ 20 percent of total licensed beds licensed as pediatric, pediatric intensive care and neonatal intensive care as reported in the hospital's ~~2023~~ 2024 Uniform Accounting Report that reported outpatient net patient revenues greater than \$375,000,000 on the hospital's ~~2023~~ 2024 Uniform Accounting Report, outpatient net patient revenues greater than \$375,000,000 are assessed a rate of ~~0.3544%~~ 0.1693 percent for outpatient net patient revenues greater than \$375,000,000 from a short-term hospital with at least ~~10%~~ 10 percent but less than ~~20%~~ 20 percent of total licensed beds licensed as pediatric, pediatric intensive care and neonatal intensive care as reported in the hospital's ~~2023~~ 2024 Uniform Accounting Report. The initial \$375,000,000 of outpatient net patient revenues are assessed at the rate required by subsection (B).
- I. ~~Notwithstanding~~ Except as provided in subsection (B), for ~~any~~ a short-term hospital not included in another peer group that reported outpatient net patient revenues greater than \$375,000,000 on the hospital's ~~2023~~ 2024 Uniform Accounting Report, outpatient net patient revenues greater than \$375,000,000 are assessed a rate of ~~1.7723%~~ 0.2258 percent for outpatient net patient revenues greater than \$375,000,000 from a short-term hospital not included in another peer group. The initial \$375,000,000 ~~of in~~ outpatient net patient revenues are assessed at the rate required by subsection (B).
- J. Assessment notice. On or before the 15th day of the first month of the quarter or upon CMS approval, whichever is later, the Administration shall send ~~to each~~ a hospital ~~a~~ notification that ~~the~~ a Hospital Assessment Fund assessment invoice is available ~~to be viewed~~ on a secure website. The invoice shall include the hospital's peer group assignment and the assessment due for the quarter.
- K. Assessment due date. ~~The Hospital Assessment Fund assessment must be~~ A hospital shall ensure that the assessment is received by the Administration no later than:
1. The 15th day of the second month of the quarter; or
 2. In the event CMS approves the assessment after the 15th day of the first month of the quarter, 30 days after notification by the Administration that the assessment invoice is available.
- L. Excluded hospitals. The following hospitals are excluded from the assessment based on the hospital's ~~2023~~ 2024 Medicare Cost Report and ~~Provider & Facility Database for Arizona Medical Facilities~~ ADHS Public Health Data Portal posted by the ~~Arizona Department of Health Services~~ ADHS Division of Licensing Services on its ~~the ADHS website for January 1, 2025~~ the ADHS website for January 1, 2026:
1. ~~Hospitals~~ A hospital owned and operated by the state, the United States, or an Indian tribe.
 2. ~~Hospitals~~ A hospital designated as type: hospital, subtype: short-term that ~~have~~ has a license number beginning "~~SH~~": "~~SH~~."

NOTICES OF PROPOSED EXEMPT RULEMAKING

3. ~~Hospitals~~ A hospital designated as type: hospital, subtype: psychiatric that reported fewer than 2,500 discharges on the ~~2023 hospital's~~ 2024 Medicare Cost Report.
 4. ~~Hospitals~~ A hospital designated as type: hospital, subtype: rehabilitation.
 5. ~~Hospitals~~ A hospital designated as type: hospital, subtype: special hospitals, not including subtype: children's.
 6. ~~Hospitals~~ A hospital designated as type: hospital, subtype: short-term located in a city with a population greater than one million, which on average have at least 15 percent of inpatient days for patients who reside outside of Arizona, and at least 50 percent of discharges as reported on the ~~2023 2024 Medicare Cost Report~~ are reimbursed by Medicare.
 7. ~~Hospitals~~ A hospital designated as type: hospital, subtype: short-term that ~~have~~ has at least 25 percent Medicare swing beds as percentage of total Medicare days, ~~per~~ according to the ~~2023 hospital's~~ 2024 Medicare Cost Report.
 8. ~~Hospitals~~ A hospital designated as type: hospital, subtype: short-term that ~~are~~ is an urban public acute care hospital.
- M. New hospitals. For ~~hospitals~~ a hospital that did not file a ~~2023 2024 Medicare Cost Report~~ because of the date the hospital began operations:
1. If the hospital was open on the January 2 preceding the October assessment start date, the hospital assessment ~~will~~ shall begin on October 1 following the date the hospital began operating.
 2. If the hospital began operating between January 3 and September 30, the assessment ~~will~~ shall begin on October 1 of the following calendar year.
 3. A hospital is not considered a new hospital based on a change in ownership.
 4. The assessment ~~will~~ shall be based on the discharges reported in the hospital's first Medicare Cost Report and Uniform Accounting Report, which includes 12 ~~months-worth~~ months of data, except when any of the following apply:
 - a. If there is not a complete 12 ~~months-worth~~ months of data available, the assessment ~~will~~ shall be based on the annualized number of discharges from the date hospital operations began through December 31 preceding the October assessment start date. The hospital shall ~~self-report-report~~ the discharge data and all other data requested by the Administration necessary to determine the appropriate assessment to the Administration no later than January preceding the assessment start date for ~~the a new hospital: hospital.~~ "Annualized" means divided by a ratio equal to the number of months of data divided by 12 months.
 - b. If more than 12 months of data is available, the assessment ~~will~~ shall be based on the most recent 12 months of ~~self-reported data reported by the hospital,~~ as of December 31.
 5. ~~For purposes of In calculating subpart 4, subsection (M)(4), if a new hospital shares a Medicare Identification Number with an existing hospital, the Administration shall base an assessment amount will be based on self-reported the reported data from the new hospital instead of the Medicare Cost Report. The data new hospital shall include the number of discharges and all other data requested by the Administration necessary to determine the appropriate assessment.~~
 6. For ~~hospitals providing self-reported a hospital reporting data,~~ described in ~~subpart 4 and 5: subsections (M)(4) and (5):~~
 - a. Psychiatric discharges ~~will~~ shall be annualized to determine if subsections ~~(B)(4) (B)(2)(d) or (L)(3)~~ apply to the assessment amount.
 - b. Discharges ~~will~~ shall be annualized to determine if subsection (F) applies to the assessment amount.
- N. Changes of ~~in~~ ownership. ~~The parties Parties~~ to a change of ~~in~~ ownership shall promptly provide written notice to the Administration of a change of ~~in~~ ownership and any agreement regarding the payment of the ~~an~~ assessment. The assessed amount ~~will~~ shall continue at the same amount applied to the prior owner. ~~Assessments are~~ The assessment is the responsibility of the owner of record as of the first day of the quarter; ~~however, this~~ This Section is not intended to prohibit the parties to a change of ~~in~~ ownership from entering into an agreement for a new owner to assume the assessment responsibility of the owner of record as of the first day of the prior quarter.
- O. Hospital closures. ~~Hospitals~~ A hospital that ~~close~~ closes shall pay a proportion of the ~~a~~ quarterly assessment equal to that portion of the quarter during which the hospital operated.
- P. Required information for ~~the an~~ inpatient assessment. For ~~any a~~ hospital that has not filed a ~~2023 2024 Medicare Cost report~~ Report, or if the ~~2023 2024 Medicare Cost report Report~~ does not include the reliable information sufficient for the Administration to calculate the ~~an~~ inpatient assessment, the Administration shall use data reported on the ~~2023 2024 Uniform Accounting Report~~ filed by the hospital in place of the ~~2023 2024 Medicare Cost report Report~~ to calculate the assessment. If the ~~2023 2024 Uniform Accounting Report~~ filed by the hospital does not include reliable information sufficient for the Administration to calculate the inpatient assessment ~~amounts; amount,~~ the hospital shall provide the Administration with data specified by the Administration ~~necessary~~ in place of the ~~2023 2024 Medicare Cost report Report~~ to calculate the assessment.
- Q. Required information for ~~the an~~ outpatient assessment. For ~~any a~~ hospital that has not filed a ~~2023 2024 Uniform Accounting Report~~, if the ~~2023 2024 Uniform Accounting Report~~ does not include reliable information sufficient for the Administration to calculate the ~~an~~ outpatient assessment ~~amounts; amount,~~ or if the ~~2023 2024 Uniform Accounting Report~~ does not reconcile to ~~2023 2024 Audited Financial Statements,~~ the Administration shall use the data reported on ~~2023 2024 Audited Financial Statements~~ to calculate the outpatient assessment. If the ~~2023 2024 Audited Financial Statements~~ do not include the reliable information sufficient for the Administration to calculate the outpatient assessment, the Administration shall use data reported on the ~~2023 2024 Medicare Cost report~~ Report. If the Medicare Cost ~~report Report~~ does not include reliable information sufficient for the Administration to calculate the outpatient assessment amounts, the hospital shall provide the Administration with data specified by the Administration ~~necessary~~ in place of the ~~2023 2024 Medicare Cost report Report~~ to calculate the outpatient assessment.
- R. The Administration will review and update as necessary rates and peer groups periodically to ensure the assessment is sufficient to fund the state match obligation to cover the cost of the populations as specified in A.R.S. § 36-2901.08.
- S. Enforcement. If a hospital does not comply with this Section, the ~~director~~ Director may suspend or revoke the hospital's provider agreement. If the hospital does not comply within 180 days after the hospital's provider agreement is suspended or revoked, the ~~diree-~~

File Number: R26-177

A study was not referenced or relied upon when revising these rules.

NOTICES OF PROPOSED EXEMPT RULEMAKING

8. **A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:**
Not applicable

9. **The preliminary summary of the economic, small business, and consumer impact:**
The AHCCCS Health Care Investment Fund hospital assessment established in A.R.S. § 36-2999.72 is matched by federal funds. The majority of the assessment funds and accompanying federal funds will be used to provide an increase for base reimbursement for services reimbursed under the dental fee schedule and physician fee schedule and for quarterly directed payments to Arizona hospitals. Many of the providers of that medical care are considered small businesses located in Arizona. A.R.S. § 36-2999.72 prohibits the assessed hospitals from passing the cost of the assessment on to patients or third parties who pay for care in the hospital.

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

Name: Sam McCue
Title: Senior Rules Analyst
Division: AHCCCS Office of the General Counsel
Address: 150 N. 18th Ave.
Phoenix, AZ 85007
Telephone: (602) 417-4232
Fax: (602) 253-9115
Email: AHCCCSRules@azahcccs.gov
Website: www.azahcccs.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:**

AHCCCS is providing a 30-day time frame for submission of public comments regarding the proposed exempt rulemaking beginning September 15, 2026, the date this Notice of Proposed Exempt Rulemaking was posted on the AHCCCS website at www.azahcccs.gov until October 15, 2026. All public comments are to be submitted to the person listed under item #5.

Under Laws, 2026, Ch. 132, § 20, AHCCCS is exempt from the Administrative Procedures Act, Arizona Revised Statutes, Title 41, Chapter 6 and is not required to conduct an oral proceeding for this rulemaking.

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

There are no other matters prescribed by statute applicable specifically to the Administration or this specific rulemaking.

- a. **Whether the rule requires a permit, whether a general permit is used and if not, the reasons why a general permit is not used:**
The rule does not require a permit.
- b. **Whether a federal law is applicable to the subject of the rule, whether the rule is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of federal law:**
The rule is not more stringent than federal law.
- c. **Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:**
Not applicable

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:**

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

TITLE 9. HEALTH SERVICES

**CHAPTER 22. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ADMINISTRATION**

ARTICLE 7. STANDARDS FOR PAYMENTS

Section

R9-22-731. Health Care Investment Fund - Hospital Assessment

ARTICLE 7. STANDARDS FOR PAYMENTS

R9-22-731. Health Care Investment Fund - Hospital Assessment

- A. For purposes of this Section, terms Terms used in this Section are the same as defined in A.A.C. R9-22-730 unless the context specifically explicitly requires another meaning.
- B. Beginning ~~October 1, 2025~~ October 1, 2026, for each an Arizona licensed hospital not excluded under subsection (L) shall be subject to an assessment payable on a quarterly basis. The assessment shall be levied against the legal owner of ~~each~~ the hospital as of the first day of the quarter, ~~and except as otherwise required by subsections (D), (E), (F), (G), (H) and through (I).~~ For the period beginning ~~October 1, 2025~~ October 1, 2026, the assessment for ~~each~~ the hospital shall be amount equal to the sum of: ~~(1) the~~
1. The number of discharges reported on the hospital's 2023 2024 Medicare Cost Report, excluding discharges reported on the Medicare Cost Report as "Other Long Term Care Discharges," multiplied by the following rates appropriate to the hospital's peer group; and ~~(2) the~~
 2. The amount of outpatient net patient revenues multiplied by the following rate appropriate to the hospital's peer group:
 - 1-a. ~~\$1,110.50~~ \$1,033.00 per discharge and ~~5.0464%~~ 4.9114 percent of outpatient net patient revenues for a hospital located in a county with a population less than 500,000 ~~that are~~ and designated as type: hospital, subtype: short-term.
 - 2-b. ~~\$1,110.50~~ \$1,033.00 per discharge and ~~2.1026%~~ 2.0464 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: critical access hospital.
 - 3-c. ~~\$277.75~~ \$258.25 per discharge and ~~2.1026%~~ 2.0464 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: long term.
 - 4-d. ~~\$277.75~~ \$258.25 per discharge and ~~2.1026%~~ 2.0464 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: psychiatric, that reported 2,500 or more discharges on the ~~2023~~ 2024 Medicare Cost Report.
 - 5-e. ~~\$888.25~~ \$826.50 per discharge and ~~5.4669%~~ 5.3207 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: short-term with ~~20%~~ 20 percent of total licensed beds licensed as pediatric, pediatric intensive care and neonatal intensive care as reported in the hospital's ~~2022~~ 2024 Uniform Accounting Report.
 - 6-f. ~~\$999.25~~ \$929.75 per discharge and ~~6.3079%~~ 6.1393 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: short-term with at least ~~40%~~ 10 percent but less than ~~20%~~ 20 percent of total licensed beds licensed as pediatric, pediatric intensive care and neonatal intensive care as reported in the hospital's ~~2023~~ 2024 Uniform Accounting Report.
 - 7-g. ~~\$222.25~~ \$206.75 per discharge and ~~1.6821%~~ 1.6371 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: children's.
 - 8-h. ~~\$1,110.50~~ \$1,033.00 per discharge and ~~8.4106%~~ 8.1857 percent of outpatient net patient revenues for ~~hospitals~~ a hospital designated as type: hospital, subtype: short-term not included in another peer group.
- C. ~~Peer groups~~ A peer group for the four quarters beginning October 1 of each year ~~are~~ is established based on ~~hospitals~~ a hospital's license type and subtype designated in the Provider & Facility Database for Arizona Medical Facilities posted by the ~~Arizona Department of Health Services~~ ADHS Division of Licensing Services on its ~~the ADHS~~ website on January 1, ~~2025~~ 2026.
- D. ~~Notwithstanding~~ Except as provided in subsection (B), psychiatric discharges from a hospital that reported having a psychiatric sub-provider in the hospital's ~~2023~~ 2024 Medicare Cost Report, are assessed a rate of ~~\$277.75~~ \$258.25 for each discharge from the psychiatric sub-provider as reported in the ~~2023~~ 2024 Medicare Cost Report. All discharges other than those reported as discharges from the psychiatric sub-provider are assessed at the rate required by subsection (B).
- E. ~~Notwithstanding~~ Except as provided in subsection (B), rehabilitative discharges from a hospital that reported having a rehabilitative sub-provider in the hospital's ~~2023~~ 2024 Medicare Cost Report, are assessed a rate of \$0 for each discharge from the rehabilitative sub-provider as reported in the ~~2023~~ 2024 Medicare Cost Report. All discharges other than those reported as discharges from the rehabilitative sub-provider are assessed at the rate required by subsection (B).
- F. ~~Notwithstanding~~ Except as provided in subsection (B), for ~~any~~ a hospital that reported more than 22,800 discharges on the hospital's ~~2023~~ 2024 Medicare Cost Report, discharges ~~in excess of greater than~~ greater than 22,800 are assessed a rate of ~~\$111.25~~ \$103.50 ~~for each discharge in excess of 22,800.~~ The initial 22,800 discharges are assessed at the rate required by subsection (B).
- G. ~~Notwithstanding~~ Except as provided in subsection (B), for ~~any~~ a hospital that reported pediatric outpatient net patient revenues greater than \$375,000,000 on the hospital's ~~2023~~ 2024 Uniform Accounting Report, pediatric outpatient net patient revenues greater than \$375,000,000 are assessed a rate of ~~1.682%~~ 0.1637 percent for pediatric outpatient net patient revenues greater than \$375,000,000 from a hospital designated as subtype: children's. The initial \$375,000,000 ~~of in~~ in pediatric outpatient net patient revenues are assessed at the rate required by subsection (B).
- H. ~~Notwithstanding~~ Except as provided in subsection (B), for ~~any~~ a short-term hospital with at least ~~40%~~ 10 percent but less than ~~20%~~ 20 percent of total licensed beds licensed as pediatric, pediatric intensive care and neonatal intensive care as reported in the hospital's ~~2023~~ 2024 Uniform Accounting Report that reported outpatient net patient revenues greater than \$375,000,000 on the hospital's ~~2023~~ 2024

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

2024 Uniform Accounting Report, outpatient net patient revenues greater than \$375,000,000 are assessed a rate of ~~6308%~~ 0.6139 percent for outpatient net patient revenues greater than \$375,000,000 from a short-term hospital with at least ~~10%~~ 10 percent but less than ~~20%~~ 20 percent of total licensed beds licensed as pediatric, pediatric intensive care and neonatal intensive care as reported in the hospital's 2023 2024 Uniform Accounting Report. The initial \$375,000,000 ~~of in~~ outpatient net patient revenues are assessed at the rate required by subsection (B).

- I. ~~Notwithstanding~~ Except as provided in subsection (B), for ~~any~~ a short-term hospital not included in another peer group that reported outpatient net patient revenues greater than \$375,000,000 on the hospital's 2023 2024 Uniform Accounting Report, outpatient net patient revenues greater than \$375,000,000 are assessed a rate of ~~8411%~~ 0.8186 percent for outpatient net patient revenues greater than \$375,000,000 from a short-term hospital not included in another peer group. The initial \$375,000,000 ~~of in~~ outpatient net patient revenues are assessed at the rate required by subsection (B).
- J. Assessment notice. On or before the 10th day of the first month of the quarter or upon CMS approval, whichever is later, the Administration shall send ~~to each a~~ hospital a notification that ~~the a~~ a Health Care Investment Fund assessment invoice is available ~~to be viewed~~ on a secure website. The invoice shall include the hospital's peer group assignment and the assessment due for the quarter.
- K. Assessment due date. ~~The A hospital shall ensure that the~~ assessment ~~must be~~ is received by the Administration no later than the 10th day of the second month of the quarter.
- L. Excluded hospitals. The following hospitals are excluded from the assessment based on the hospital's 2023 2024 Medicare Cost Report and ~~Provider & Facility Database for Arizona Medical Facilities~~ ADHS Public Health Data Portal posted by the ~~Arizona Department of Health Services ADHS~~ Division of Licensing Services on its ~~the ADHS website for January 1, 2025~~ January 1, 2026:
1. ~~Hospitals A hospital~~ owned and operated by the state, the United States, or an Indian tribe.
 2. ~~Hospitals A hospital~~ designated as type: hospital, subtype: short-term that ~~have~~ has a license number beginning "SH". "SH."
 3. ~~Hospitals A hospital~~ designated as type: hospital, subtype: psychiatric that reported fewer than 2,500 discharges on the 2023 hospital's 2024 Medicare Cost Report.
 4. ~~Hospitals A hospital~~ designated as type: hospital, subtype: rehabilitation.
 5. ~~Hospitals A hospital~~ designated as type: hospital, subtype: special hospitals, not including subtype: children's.
 6. ~~Hospitals A hospital~~ designated as type: hospital, subtype: short-term located in a city with a population greater than one million, which on average ~~have~~ has at least 15 percent of inpatient days for patients who reside outside of Arizona, and at least 50 percent of discharges as reported on the 2023 2024 Medicare Cost Report are reimbursed by Medicare.
 7. ~~Hospitals A hospital~~ designated as type: hospital, subtype: short-term that ~~have~~ has at least 25 percent Medicare swing beds as percentage of total Medicare days, ~~per according to~~ the 2023 hospital's 2024 Medicare Cost Report.
 8. ~~Hospitals A hospital~~ designated as type: hospital, subtype: short-term that ~~are~~ is an urban public acute care hospital.
- M. New hospitals. For ~~hospitals a hospital~~ that did not file a 2023 2024 Medicare Cost Report because of the date the hospital began operations:
1. If the hospital was open on the January 2 preceding the October assessment start date, the hospital assessment ~~will~~ shall begin on October 1 following the date the hospital began operating.
 2. If the hospital began operating between January 3 and September 30, the assessment ~~will~~ shall begin on October 1 of the following calendar year.
 3. A hospital is not considered a new hospital based on a change in ownership.
 4. The assessment ~~will~~ shall be based on the discharges reported in the hospital's first Medicare Cost Report and Uniform Accounting Report, ~~which that~~ includes 12 ~~months-worth~~ months of data, except when any of the following apply:
 - a. If there is not a complete 12 ~~months-worth~~ months of data available, the assessment ~~will~~ shall be based on the annualized number of discharges from the date hospital operations began through December 31 preceding the October assessment start date. The hospital shall ~~self-report~~ report the discharge data and all other data requested by the Administration necessary to determine the appropriate assessment to the Administration no later than January preceding the assessment start date for ~~the a new hospitals: hospital.~~ "Annualized" means ~~divided by a ratio equal to the number of months of data divided by 12 months.~~
 - b. If more than 12 months of data is available, the assessment ~~will~~ shall be based on the most recent 12 months of ~~self-reported~~ data reported by the hospital, as of December 31;
 5. ~~For purposes of In calculating subpart 4, subsection (M)(4), if a new hospital shares a Medicare Identification Number with an existing hospital, the Administration shall base an assessment amount will be based on self-reported the reported data from the new hospital instead of the Medicare Cost Report. The data new hospital shall include the number of discharges and all other data requested by the Administration necessary to determine the appropriate assessment.~~
 6. For ~~hospitals providing self-reported a hospital reporting data, described in subpart 4 and 5: subsections (M)(4) and (5):~~
 - a. Psychiatric discharges ~~will~~ shall be annualized to determine if subsections ~~(B)(4) (B)(2)(d) or (L)(3)~~ apply to the assessment amount.
 - b. Discharges ~~will~~ shall be annualized to determine if subsection (F) applies to the assessment amount.
- N. Changes of in ownership. ~~The parties Parties~~ to a change of ~~in~~ ownership shall promptly provide written notice to the Administration of a change of ~~in~~ ownership and any agreement regarding the payment of ~~the an~~ assessment. The assessed amount ~~will~~ shall continue at the same amount applied to the prior owner. ~~Assessments are~~ The assessment is the responsibility of the owner of record as of the first day of the quarter; ~~however, this. This~~ Section is not intended to prohibit the parties to a change of ~~in~~ ownership from entering into an agreement for a new owner to assume the assessment responsibility of the owner of record as of the first day of the prior quarter.
- O. Hospital closures. ~~Hospitals A hospital~~ that ~~close~~ closes shall pay a proportion of ~~the a~~ quarterly assessment equal to that portion of the quarter during which the hospital operated.

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

- P. Required information for the an inpatient assessment. For ~~any~~ a hospital that has not filed a 2023 2024 Medicare Cost ~~report~~ Report, or if the 2023 2024 Medicare Cost ~~report~~ Report does not include the reliable information sufficient for the Administration to calculate the an inpatient assessment, the Administration shall use data reported on the 2023 2024 Uniform Accounting Report filed by the hospital in place of the 2023 2024 Medicare Cost ~~report~~ Report to calculate the assessment. If the 2023 2024 Uniform Accounting Report filed by the hospital does not include reliable information sufficient for the Administration to calculate the inpatient assessment ~~amounts; amount~~, the hospital shall provide the Administration with data specified by the Administration ~~neecessary~~ in place of the 2023 2024 Medicare Cost ~~report~~ Report to calculate the assessment.
- Q. Required information for the an outpatient assessment. For ~~any~~ a hospital that has not filed a 2023 2024 Uniform Accounting Report, if the 2023 2024 Uniform Accounting Report does not include reliable information sufficient for the Administration to calculate the an outpatient assessment ~~amounts; amount~~, or if the 2023 2024 Uniform Accounting Report does not reconcile to 2023 2024 Audited Financial Statements, the Administration shall use the data reported on 2023 2024 Audited Financial Statements to calculate the outpatient assessment. If the 2023 2024 Audited Financial Statements do not include the reliable information sufficient for the Administration to calculate the outpatient assessment, the Administration shall use data reported on the 2023 2024 Medicare Cost ~~report~~ Report. If the Medicare Cost ~~report~~ Report does not include reliable information sufficient for the Administration to calculate the outpatient assessment ~~amounts; amount~~, the hospital shall provide the Administration with data specified by the Administration ~~neecessary~~ in place of the 2023 2024 Medicare Cost ~~report~~ Report to calculate the outpatient assessment.
- R. Enforcement. If a hospital does not comply with this Section, the ~~director~~ Director may suspend or revoke the hospital's provider agreement. If the hospital does not comply within 180 days after the hospital's provider agreement is suspended or revoked, the ~~director~~ Director shall notify the director of the ~~Department of Health Services who shall~~ ADHS to suspend or revoke the hospital's license.

NOTICE OF PROPOSED EXEMPT RULEMAKING

TITLE 9. HEALTH SERVICES

**CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ARIZONA LONG-TERM CARE SYSTEM**

File Number: R26-170

PREAMBLE

1. **Permission to proceed with this exempt rulemaking was granted under A.R.S. § 41-1039 by the governor on:**
September 3, 2026
2.

Article, Part, or Section Affected (as applicable)	Rulemaking Action
Article 12	New Article
R9-28-1201	New Section
R9-28-1202	New Section
R9-28-1203	New Section
R9-28-1204	New Section
R9-28-1205	New Section
R9-28-1206	New Section
Table 1	New Table
Table 2	New Table
R9-28-1207	New Section
R9-28-1208	New Section
R9-28-1209	New Section
R9-28-1210	New Section
R9-28-1211	New Section
3. **Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):**
Authorizing statute: A.R.S. § 36-2970.01(D)
Implementing statute: A.R.S. § 36-2970.01(D)
Statute or session law authorizing the exemption: Laws, 2026, Ch. 132, § 19
4. **Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the current record of the proposed exempt rule:**
Notice of Exempt Rulemaking Docket Opening: 32 A.A.R. 2424, October 2, 2026 (*in this issue*); File Number: R26-171
Notice of Emergency Rulemaking: 31 A.A.R. 4227; Issue date: October 31, 2025; Issue Number: 44; File Number: R25-247

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

Notice of Emergency Rulemaking - Renewal: 32 A.A.R. 932; Issue Date: April 24, 2026; Issue Number: 17; File Number: R26-53

Notice of Rulemaking Docket Opening: 32 A.A.R. 893; Issue Date: April 17, 2026; Issue Number: 16; File Number: R26-49

Notice of Proposed Rulemaking: 32 A.A.R. 867; Issue Date: April 17, 2026; Issue Number: 16; File Number: R26-46

Notice of Termination of Rulemaking 32 A.A.R. 1862, Issue Date: August 21, 2026; Issue Number: 34; File Number: R26-139

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

Name: Sam McCue
Title: Senior Rules Analyst
Division: AHCCCS Office of the General Counsel
Address: 150 N. 18th Ave.
Phoenix, AZ 85007

Telephone: (602) 417-4232
Fax: (602) 253-9115
Email: AHCCCSRules@azahcccs.gov
Website: www.azahcccs.gov

6. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:

The Arizona Long Term Care System (ALTCS) is Arizona's Medicaid program administered by the AHCCCS Administration pursuant to Arizona Revised Statutes, Title 36, Chapter 29, Article 2 for individuals who are elderly or have physical or developmental disabilities. Individuals eligible for ALTCS are determined to be at risk of institutionalization. A.R.S. § 36-2970.01(D) directed AHCCCS, "[o]n or before October 1, 2025," to adopt "a strengthened standardized assessment tool to determine the need for extraordinary care for minor children."

In addition, ALTCS children under the age of 18 who are assessed for Home and Community Based Services (HCBS) using the HCBS Needs Tool (HNT) may benefit from an Extraordinary Care Review (ECR) in instances when the member and the member's health care decision maker disagree with the assessed hours for direct care services and/or habilitation services based on HNT age limitations. The HNT is a standardized assessment instrument to assess a member's need for direct care services and habilitation services to determine if a member may benefit from receiving HCBS to support activities of daily living (ADLs) or instrumental activities of daily living (IADLs).

This exempt rulemaking will describe with greater specificity the strengthened assessment tool for direct care and habilitation services for ALTCS members as well as the overall HNT and ECR processes. The proposed exempt rulemaking will incorporate substantial clarifications to, and support for, the assessment and review processes, the HNT tool, the ECR process, and the standards imposed on contractors and others such as case managers and clinicians. AHCCCS is including the following in the proposed exempt rulemaking:

- Enhanced descriptions of each task/service that are a part of the HNT
- Description of the ECR process Description of Managed Care Organization obligations both prior to, and upon implementation, of the ECR process
- Comprehensive listing of allowable clinician types for the ECR
- Required training for ECR clinicians, including annual training requirements for the person-centered service planning process
- Expansive description of the post implementation oversight process

This rulemaking will support the refined implementation of the strengthened assessment tool, consistent with Arizona statute, will improve care delivery for ALTCS members, promote uniformity in the assessment process and consistency in the administration of the HNT/ECR, and foster the long-term sustainability of the ALTCS program. In addition, the proposed exempt rules incorporate stakeholder input.

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

Not applicable

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

- 8. A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:**
Not applicable

- 9. The preliminary summary of the economic, small business, and consumer impact:**
The proposed exempt rules are estimated to have an annualized average fiscal impact of \$90 million total funds in medical expenditure savings for the program, with an 80% confidence that the annualized savings will range from approximately \$54 million to \$141 million statewide. On average, an estimated expected reduction of \$90.2 million on an annualized basis for direct care and habilitation services is projected as compared to the most recent complete contract year. The estimated projected savings are anticipated to be partially offset by a first-year increase in administrative costs of approximately \$17 million, with long-term administrative costs currently estimated to be under \$1 million per year.

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

Name: Sam McCue
Title: Senior Rules Analyst
Division: AHCCCS Office of the General Counsel
Address: 150 N. 18th Ave.
Phoenix, AZ 85007
Telephone: (602) 417-4232
Fax: (602) 253-9115
Email: AHCCCSRules@azahcccs.gov
Website: www.azahcccs.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:**

AHCCCS is providing a 30-day time frame for submission of public comments regarding the proposed exempt rulemaking beginning September 12, 2026, the date this Notice of Proposed Exempt Rulemaking was posted on the AHCCCS website at www.azahcccs.gov until October 12, 2026. All public comments are to be submitted to the person listed under item #5. Under Laws, 2026, Ch. 132, § 19, AHCCCS is exempt from the Administrative Procedures Act, Arizona Revised Statutes, Title 41, Chapter 6, and no oral proceeding will be conducted.

- 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:**

There are no other matters prescribed. This rulemaking is exempt from the Administrative Procedures Act, Arizona Revised Statutes, Title 41, Chapter 6, and not subject to Council review.

- 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:**
Not applicable

- 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:**

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

TITLE 9. HEALTH SERVICES

**CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ARIZONA LONG-TERM CARE SYSTEM**

ARTICLE 12. ~~REPEALED~~ HCBS NEEDS TOOL AND EXTRAORDINARY CARE REVIEW

Section	
<u>R9-28-1201.</u>	<u>Definitions</u>
<u>R9-28-1202.</u>	<u>Person-Centered Service Plan</u>
<u>R9-28-1203.</u>	<u>HCBS Needs Tool</u>
<u>R9-28-1204.</u>	<u>Direct Care Services</u>
<u>R9-28-1205.</u>	<u>Habilitation Services and Goals</u>
<u>R9-28-1206.</u>	<u>HNT Criteria and Requirements</u>
<u>Table 1.</u>	<u>Direct Care Services for Members Under Age 18</u>
<u>Table 2.</u>	<u>Habilitation Service for Members Under Age 18</u>
<u>R9-28-1207.</u>	<u>Extraordinary Care Review - ALTCS Contractor Requirements</u>
<u>R9-28-1208.</u>	<u>Extraordinary Care Review - Process</u>
<u>R9-28-1209.</u>	<u>Extraordinary Care Review - Decisions</u>
<u>R9-28-1210.</u>	<u>Extraordinary Care Review - Time Frames</u>
<u>R9-28-1211.</u>	<u>Reporting and Oversight</u>

ARTICLE 12. ~~REPEALED~~ HCBS NEEDS TOOL AND EXTRAORDINARY CARE REVIEW

R9-28-1201. Definitions

The following words and phrases apply to Article 12, in addition to definitions contained in A.R.S. §§ 36-2901 and 36-2931, and 9 A.A.C. 22, Article 1, unless the context explicitly requires another meaning:

1. “Activities of daily living” or “ADLs” means activities a member performs daily for the member’s regular day-to-day necessities, including mobility, transferring, bathing, dressing, grooming, eating, and toileting.
2. “ASD module” means a specialized version of the PEDI-CAT and is a structured, evidence-based online assessment tool that can be used to determine member-specific functional abilities for a person who has an autism spectrum disorder diagnosis.
3. “Case manager” means a person responsible for locating, accessing, and monitoring the provision of services to a member in conjunction with a clinical team.
4. “Change in condition” means a major decline or improvement in a member’s health status that does not normally resolve without further intervention by staff or by implementing a standard disability-related clinical or behavioral intervention, or by which current services are no longer effective due to the change of the member’s health status. A change in condition has an impact on one or more areas and requires review or revision of the PCSP or HNT.
5. “Clinician” means a person who is licensed, certified, registered, or otherwise authorized under applicable federal or state law to provide healthcare services and who practices within the scope of the clinician’s professional credentials. A clinician is the person responsible for reviewing documentation and making extraordinary care determinations for a member who chooses to engage in the ECR process.
6. “Cost effectiveness study” or “CES” means a method of evaluation to determine if a member’s needed HCBS exceed 100% of the net cost of institutional care for that member and to determine appropriate allowable HCBS within the member’s CES or alternate care options.
7. “Direct care services” means the services provided by a person employed or contracted by a provider agency to provide attendant care, personal care or homemaker services to a member. Direct care services include tasks described in R9-28-1206(A) through (R).
8. “Extraordinary care” means care that exceeds the range of activities that a legally responsible person of a minor child would ordinarily perform in a household on behalf of a member if the member did not have a disability or chronic illness, and that is necessary to ensure the health and welfare of the member.
9. “Extraordinary care review” or “ECR” means a review process available to an ALTCS member under the age of 18 or the member’s HCDM who disagrees with the number of assessed hours for direct care services or habilitation services as a result of an HNT age limitation or hourly service cap.
10. “Habilitation services” means services provided to a member as described in A.R.S. § 36-2939.
11. “HCBS needs tool” or “HNT” means a standardized assessment instrument to assess a member’s need for direct care services and habilitation services to determine if the member may benefit from receiving HCBS to support ADLs and IADLs.
12. “Health care decision maker” or “HCDM” means a person who is authorized to make health care treatment decisions for a member, including a legally responsible person of an unemancipated minor or person lawfully authorized to make health care treatment decisions as specified in Arizona Revised Statutes, Title 14, Chapter 5 and A.R.S. §§ 8-514.05, 36-3221, 36-3231 and 36-3281.
13. “Home and community based services” or “HCBS” means services provided to a member as described in A.R.S. § 36-2939.
14. “Informal supports” means non-billable services provided to a member by a family member, friend, or volunteer to assist or perform functions, including:
 - a. Housekeeping;
 - b. Personal care;

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

- c. Food preparation;
 - d. Shopping;
 - e. Pet care; or
 - f. Non-medical comfort measures.
- 15. "Instrumental activities of daily living" or "IADL" means activities a member performs that are more complex in nature and necessary for independent living and community participation, including managing money, preparing meals, shopping, doing laundry, and using transportation.
 - 16. "Legally responsible person" means a parent or legal guardian, with formal physical or legal custody.
 - 17. "Licensed health aide services" means services provided to a member as described in A.R.S. § 36-2939.
 - 18. "Parents as a paid caregiver" or "PPCG" means a service delivery model that permits a legally responsible person to receive compensation for providing paid direct care and habilitation services to a minor child who is an ALTCS member.
 - 19. "Pediatric evaluation of disability-computer adaptive test" or "PEDI-CAT" means a test used to measure a child's functional abilities in daily activities, mobility, cognition, and social functioning.
 - 20. "Person-centered service plan" or "PCSP" means a written plan developed through an assessment of functional needs that reflects paid and unpaid services and supports that are important for a member in meeting the identified needs, goals, and preferences for the delivery of services and supports.

R9-28-1202. Person-Centered Service Plan

- A. An ALTCS contractor case manager shall conduct a PCSP at least annually, with direct involvement from a member, and an HCDM when appropriate.
- B. An ALTCS contractor case manager shall conduct and document a PCSP in each instance prescribed by 42 CFR 441.725. A member's HNT may be updated without a full PCSP revision being required.
- C. A PCSP shall reflect a member's strengths and preferences that meet the member's social, cultural, and linguistic needs, individually identified and prioritized goals and desired outcomes, and reflect risk factors, including risks to member rights and measures in place to minimize the risks, including individualized back-up plans and other strategies.
- D. When a PCSP is created or revised, a case manager shall:
 - 1. Schedule a PCSP meeting with a member and HCDM, and any other person included in the planning;
 - 2. Determine if a member resides at home, whether the member or HCDM is interested in receiving HCBS, and if the care team has determined that HCBS services are appropriate;
 - 3. Assess a member for direct care services and habilitation services using an HNT when the member or HCDM indicates interest in direct care services or habilitation services;
 - 4. Provide documentation to support the assessment and hours authorized; and
 - 5. Incorporate by reference any documentation of a member's needs on the HNT and the PCSP.
- E. The Administration shall not differentiate or discriminate in the type or frequency of a service authorized based on a member's status as a family member or caregiver or the caregiver's residence.

R9-28-1203. HCBS Needs Tool

- A. An ALTCS contractor case manager shall conduct an HNT assessment for an ALTCS member before authorizing direct care services or habilitation services.
- B. An HNT may be updated outside of the annual PCSP process. An ALTCS contractor case manager shall determine if a full PCSP process is required at the time of each HNT assessment;
- C. Before authorizing approved services, an ALTCS contractor case manager shall:
 - 1. Determine a member's living situation;
 - 2. Discuss informal supports with a member and HCDM to determine the member's preference for caregivers and whether care will be given by formal paid caregivers or informal supports or a combination of formal and informal supports;
 - 3. Determine and document if a member is receiving care from another source, such as Medicare home health or hospice;
 - 4. Review the current HNT if a member has one;
 - 5. Complete a new HNT, or an updated HNT, when appropriate; and
 - 6. Verify that a member's PCSP and HNT both accurately reflect the member's functional abilities and service needs.
- D. An ALTCS contractor case manager shall complete an HNT, with direct involvement from a member, and an HCDM when appropriate, if the member or HCDM is interested in receiving HCBS:
 - 1. At least annually if the member is currently receiving a direct care or habilitation service;
 - 2. If any discussion with the member or HCDM indicates a potential need for a service;
 - 3. If the member experiences a significant change in condition that causes the member's health to improve or decline;
 - 4. At any time the member or HCDM requests to receive an updated assessment; and
 - 5. When the member or HCDM requests to be evaluated for HCBS in place of institutional care.
- E. An HNT shall assess a member's specific HCBS needs for ADL or IADLs specific to direct care services and habilitation services.
- F. An ALTCS contractor case manager shall determine through the use of an HNT, if direct care services or habilitation services are medically necessary and appropriate for a member's unique needs and circumstances. The HNT shall:
 - a. Be reviewed during each quarterly case management review meeting;
 - b. Be completed in collaboration with the member, HCDM or any person requested by the member or HCDM to participate;
 - c. Include the member's or HCDM's description of the need for each task assessed;
 - d. Identify each direct care or habilitation service needed regardless of cost-effectiveness or service delivery method; and
 - e. Be incorporated by reference into the member's PCSP.

NOTICES OF PROPOSED EXEMPT RULEMAKING

- G.** An ALTCS contractor case manager may directly engage a member who is a minor in the assessment process, if appropriate for the member's age and developmental stage.
- H.** An ALTCS contractor case manager and a member or HCDM shall discuss the care needed for the member, and the amount of time it may take to complete the care.
- I.** After the HNT is completed, the ALTCS contractor case manager shall discuss with a member or HCDM the availability of informal supports and community services to meet the member's needs, including stressors informal supports may experience in providing care and available supports through community resources.
- J.** Service time on an HNT is a guideline that reflects the time it may take a member to complete a task based on general and reasonable expectations in home care. Member-specific care needs for a direct care task may exceed the service time guidelines shown on the HNT. An ALTCS case manager shall:
 - 1.** Base the time assessed for each category on the evaluation of the member's individual needs;
 - 2.** Document comments on the HNT to support the time allotment when services are authorized;
 - 3.** If time for a direct care task beyond the HNT guideline in a category is assessed, include in the comments section of the HNT:
 - a.** An explanation for assessing time beyond the HNT guideline;
 - b.** A reason for any change in assessing the task, including the number of tasks per day and minutes each task takes, to reflect the member's current condition; and
 - c.** Any comments or concerns raised by the member or HCDM.
- K.** An ALTCS contractor case manager shall consider the age of a member when assessing a task. An ALTCS contractor case manager shall:
 - 1.** Not assess the task if the member does not meet the age threshold established in the HNT for the task;
 - 2.** Provide clear documentation regarding the member's age as rationale for not assessing the task;
 - 3.** Document concerns from the member's HCDM regarding the assessment limit; and
 - 4.** Check habilitation goals against age appropriateness.
- L.** An ALTCS contractor case manager shall note an HCDM's concerns on a member's HNT and provide written communication and education materials about an ALTCS contractor's ECR process for a member under age 18.
- M.** If a member or HCDM decides not to pursue an ECR process, an ALTCS contractor case manager shall:
 - 1.** Document the member and HCDM's decision not to pursue an ECR;
 - 2.** Inform the member and HCDM that electing not to pursue the ECR process does not prevent the member or HCDM from pursuing the ECR at a later date; and
 - 3.** Meet the time frames for authorization or discontinuation of HNT services.
- N.** A member or HCDM may request an ECR at a later date if time is needed to review an HNT document and determine if there is interest in pursuing an ECR, if the member has a change in condition, or the member's care needs change.
- O.** An ALTCS contractor shall conduct a CES to determine services that may be provided within ALTCS cost effectiveness standards after a member's needs are assessed and documented. Services with total costs that are at or below 100 percent of the cost of institutionalized care or those that are predicted to be at or below 100 percent within six months may be authorized.

R9-28-1204. Direct Care Services

- A.** An ALTCS contractor case manager shall authorize only direct care services determined medically necessary and based on an assessment of a member's unique needs documented in the member's PCSP or HNT.
- B.** For a member under 18 years, an ALTCS contractor case manager shall authorize only direct care services determined to be extraordinary care in nature.
- C.** An ALTCS contractor case manager shall evaluate extraordinary care for each task independently based on a member's age, developmental milestones, and the type of support the member requires.
- D.** If a member's age indicates the member may be assessed for a task under the age range specified in R9-28-1206, an ALTCS contractor case manager shall base the direct care services determination on the member's ability to complete the task, the time it takes to complete the task, and the level of support needed to complete the task.
- E.** If a member's age does not indicate the member may be assessed for a task under the age range specified in R9-28-1206, an ALTCS contractor case manager shall document any needs, comments or concerns from the member's HCDM specific to a task to support the extraordinary care review should the HCDM request an ECR after completion of the assessment.
- F.** Direct care services and habilitation services shall not be provided at the same time.
- G.** Direct care services shall not be authorized by an ALTCS contractor or Tribal ALTCS while a member is engaging in, participating in, or receiving privately or publicly funded K-12 educational services, programs or grants.
- H.** Direct care services, including supervision, shall be discussed as appropriate based on a member's needs as part of the assessment process.
- I.** Parents of a member under 18 years may be paid to provide care for a member between the hours of 6:00 a.m. and 10:00 p.m. Paid overnight attendant care between the hours of 10:00 p.m. and 6:00 a.m. may be authorized only if:
 - 1.** An HNT indicates that paid attendant care between the hours of 10:00 p.m. and 6:00 a.m. is necessary;
 - 2.** An ALTCS contractor case manager documents the specific need that requires paid overnight attendant care; and
 - 3.** Parents being paid for care are awake and actively engaged in caring for and supporting the member during the documented time of care.

R9-28-1205. Habilitation Services and Goals

- A.** Habilitation services facilitate the learning of new skills and foster greater independence for a member and may be provided in the home or in the community, based upon where the skill is most likely to be used, according to the following:
 - 1.** Habilitation services shall not be assessed for a member under age 3;

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

2. Habilitation services shall be assessed when a case manager determines that a member has the capacity to increase the member's independence in the completion of a task with instruction and assistance;
 3. Habilitation services shall not exceed 14 hours in a 7-day period;
 4. If a member cannot be assessed for attendant care services, then the member shall not be assessed for habilitation services. A member shall not receive attendant care during the same day and time that habilitation services are delivered;
 5. Assessed time for habilitation services shall consider a member's age-defined capacity to absorb, learn, practice, and retain information; and
 6. Ongoing assessment and monitoring of a member's progress shall occur for each habilitation goal to ensure it remains appropriate.
- B. Habilitation goals.**
1. Habilitation goals are not limited to ADLs and may include IADLs.
 2. Habilitation goals shall not be considered for age-appropriate learning or include education that is part of a school or home school curriculum.
- R9-28-1206. HNT Criteria and Requirements**
- A. Housekeeping and cleaning.** Housekeeping and cleaning shall not be assessed for a member under age 18. Housekeeping and cleaning tasks include performing an activity necessary to attain and maintain sanitary living conditions. Housekeeping and cleaning are appropriate habilitation goals for a member age 13 or older to support skill building and preparation for transition to adulthood.
- B. Laundry.** Laundry tasks shall not be assessed for a member under age 18. Laundry tasks include preparing clothing or linens for washing, placing laundry in a washer, placing laundry in a dryer or on a clothesline, and folding and putting away laundry, with a goal of maintaining a member's laundry in a clean and neat appearance. Laundry is an appropriate habilitation goal for a member age 16 or older to support skill building and preparation for transition to adulthood.
- C. Incontinence laundry.** Incontinence laundry needs shall not be assessed for a member under age 4. Incontinence laundry is specific to extraordinary care when a member age 4 or older needs laundry support due to incontinence episodes. Laundry tasks include preparing clothing or linens for washing, placing laundry in a washer, placing laundry in a dryer or on a clothesline, and folding and putting away laundry, with a goal of maintaining a member's laundry in a clean and neat appearance. Incontinence laundry tasks apply only to the member's clothing and linens and do not include bathing, re-dressing, or other tasks specific to the member's cleanliness.
- D. Shopping.** Shopping tasks shall not be assessed for a member under age 18. Shopping tasks include grocery shopping, obtaining household items, travel time and putting away groceries. Shopping is an appropriate habilitation goal for a member age 16 or older to support skill building and preparation for transition to adulthood.
- E. Medication pick up.** There is no age requirement for assessment of medication pick up. Medication pick up is specific to obtaining medications for a member's chronic conditions when home delivery of medication is not an option. Medication pick up for a one-time prescription for an acute illness shall not be assessed.
- F. Meal preparation and meal clean up.** Meal preparation and meal clean up shall not be assessed for a member under age 12.
1. Meal preparation includes meal planning, preparing food for cooking or preparing uncooked food, and cooking and serving food for a member who is:
 - a. Able to be home alone for short periods of time but is unable to prepare food due to physical, behavioral, or safety limitations;
 - b. Safely home with a sibling who cannot support the member's specific needs related to food preparation; or
 - c. Home with a caregiver during a mealtime and a family member is not available to prepare a meal.
 2. Meal clean up includes storing food and leftover food, and cleaning dishes involved in preparing and presenting food.
- G. Specialty meal preparation and clean up.** There is no age requirement for assessment of specialty meal preparation and clean up.
1. Specialty meal preparation includes meal planning, preparing food for cooking or preparing uncooked food, and cooking and serving food, and food modifications to safely consume food, such as blending, pureeing and thickening, for a member who:
 - a. Is unable to eat the same meal as the family due to a prescribed specialty diet or if the meal requires special preparation due to documented medical, physical, or behavioral limitations; or
 - b. Has restrictive dietary needs, with documented food aversions or inability to eat certain textures, or specific nutritional requirements including low carb, gluten free, lactose free, and food allergies.
 2. Specialty meal clean up includes storing food and leftover food, and cleaning dishes involved in preparing and presenting food.
 3. Alternative meal schedule. Alternative meal schedule is for a member with diabetes or other medical condition that requires a specific meal or nutrition to maintain proper nutritional intake for medical reasons. Alternative meal schedule includes small meals throughout the day to help regulate the body outside of regular meals with family members.
- H. Eating and feeding.** Eating and feeding shall not be assessed for a member under age 5. Eating and feeding is the process of transferring oral nourishment from a vessel to a member after it is cooked or prepared for eating, and includes simple meal set up, cutting up food, or cueing the member to eat.
- I. Specialty eating and feeding.** There is no age requirement for assessment of specialty eating and feeding. Specialty eating and feeding is for a member with a documented need for specialty assistance related to a medical, physical, or behavioral condition impacting the member's ability consume food, including a gastronomy tube, chewing or swallowing impairments, choking risks, and other conditions that impact the member's ability to eat safely or effectively.
- J. Bathing.** Bathing shall not be assessed for a member under age 5. Bathing is the process of washing, rinsing, and towel drying the body or body parts and transferring a member in and out of a bathtub or shower. Bathing includes preparing the bath water or equipment ready for bathing in a bathtub, shower, sink or bedside and using assistive devices such as a bathtub or shower chair, pedal or knee-controlled faucets, or long-handled brushes.

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

- K.** Dressing. Dressing shall not be assessed for a member under age 5. Dressing includes laying out, taking off, putting on, and fastening clothing and footwear.
- L.** Grooming. Grooming shall not be assessed for a member under age 5. Grooming includes oral hygiene, nail care, face cleaning, shaving, and arranging hair.
- M.** Toileting. Toileting shall not be assessed for a member under age 4. Toileting tasks include providing reminders, removing clothing and redressing, diapering, post-toilet hygiene, and use of toileting equipment.
- N.** Specialty toileting. There is no age requirement for specialty toileting. Specialty toileting includes care needed when a member has a catheter or ostomy bag, demonstrates digging or smearing behaviors that require personal or environmental cleaning, demonstrates chronic constipation or holding behaviors, or follows a prescribed formal toileting schedule developed by a physician, occupational therapist, or behavioral therapist.
- O.** Mobility. Mobility shall not be assessed for a member under age 2. Mobility is the extent of a member's purposeful movement within the member's residence, independently or using assistive devices including a wheelchair, walker, or quad cane.
- P.** Transferring. Transferring shall not be assessed for a member under age 2. Transferring is a member's ability to move horizontally or vertically between furnishings or movables, including a bed, chair, wheelchair, or commode.
- Q.** General supervision:
1. General supervision shall not be assessed for a member under age 10. Members under the age of 10 shall be assessed for specialty supervision needs.
 2. Supervision shall be assessed according to established age requirements and guidelines related to each type of supervision. Time assessed encompasses the time between a specific task a caregiver is performing and the time a member is engaged in other activities or programs where supervision is provided.
 3. A member's need for supervision shall be based on safety concerns related to the member's specific medical or behavioral needs and limitations and shall be clearly documented. Supervision shall not be authorized solely for the purpose of adult presence without a member-specific need present. A member's needs include:
 - a. Complex medical conditions requiring consistent monitoring for safety, including frequent seizure activity, high risk for choking, and ventilator dependence;
 - b. Behavioral needs including elopement, placing inappropriate items in the mouth and eating non-food items, self-injurious behaviors, and aggressive behaviors;
 - c. If a member has a physical limitation that prevents the member from safely leaving the home in the event of an emergency;
or
 - d. Any needs not described in subsection (a) or (b) but that are outlined in subsection (R).
 4. Types of general supervision include:
 - a. Active supervision. Active supervision is when a responsible adult has direct sight on a member at all times. A member age 0 to 9, with or without a medical condition requires active supervision and shall not be assessed for general supervision.
 - b. Direct supervision. Direct supervision is when a responsible adult is readily and easily accessible in the home.
 5. A member may be supervised through the night if the member has sleep issues due to a documented medical or behavioral condition that makes it unsafe for the member to be left unattended.
 6. Environmental modifications such as specialty locks, life/safety alert systems, and assistive technology shall be considered to lessen the need for paid supervision.
 7. Paid general supervision shall not be authorized for the administration of medications to a member.
 8. Paid general supervision shall not be authorized for a member requiring active or direct supervision whose legally responsible person works from the home, unless supervision is provided by a non-legally responsible person or by a legally responsible person not working during the hours requiring supervision.
 9. Paid general supervision shall not be authorized for a member during hours when the caregiver is asleep.
 10. Paid general supervision is not to replace childcare obligations; supervision shall be medically necessary and based on a member's unique care needs to maintain the member's health and safety.
- R.** Specialty supervision.
1. Specialty supervision for a member under age 10 shall only be assessed when the member requires a caregiver within arm's reach at all times due to documented medical or behavioral risks, including:
 - a. Environmental risk-taking, including eating of non-food objects, unsafe climbing, property destruction, mouthing electrical cords, unsafe interaction with electrical outlets despite use of reasonable safety precautions including outlet covers, and elopement risk despite use of reasonable safety precautions;
 - b. Frequent and severe self-injurious behavior, including head banging, self-biting, or other forms of self-harm, and physical aggression towards others; or
 - c. Uncontrolled seizures that require a caregiver to physically intervene to prevent harm, including airway risk due to trachea ventilator dependence, and risk of choking.
 2. A member's need for supervision shall be based on safety concerns related to the member's specific medical or behavioral needs and limitations and shall be clearly documented. Supervision shall not be authorized solely for the purpose of adult presence without a member-specific need present.
 3. A member may be supervised through the night if the member has sleep issues due to a documented medical or behavioral condition that makes it unsafe for the member to be left unattended.
 4. Environmental modifications shall be considered to lessen the need for paid supervision.
 5. Paid specialty supervision shall not be authorized for a member requiring active or direct supervision whose parent works from the home, unless supervision is provided by a nonparent or a parent not working during the hours requiring supervision.
 6. Paid specialty supervision shall not be authorized for a member during hours when the caregiver is asleep.

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

7. Paid specialty supervision is not intended to replace childcare obligations; supervision shall be medically necessary and based on a member's unique care needs to maintain the member's health and safety.
- S. Habilitation services shall be conducted as outlined in R9-28-1205.

Table 1. Direct Care Services for Members Under Age 18

<u>Direct Care Services Task</u>	<u>Age Limitation</u>
Housekeeping	<u>Shall not be assessed for children under age 18</u>
Laundry	<u>Shall not be assessed for children under age 18</u>
Incontinence-Based Laundry	<u>Shall not be assessed for children under age 4</u>
Food Shopping	<u>Shall not be assessed for children under age 18</u>
Medication Pick Up	<u>No age limitation</u>
Meal Preparation and Clean Up	<u>Shall not be assessed for children under age 12</u>
Specialty Meal Preparation	<u>No age limitation</u>
Eating and Feeding	<u>Shall not be assessed for children under age 5</u>
Specialty Eating and Feeding	<u>No age limitation</u>
Bathing	<u>Shall not be assessed for children under age 5</u>
Dressing	<u>Shall not be assessed for children under age 5</u>
Grooming	<u>Shall not be assessed for children under age 5</u>
Toileting	<u>Shall not be assessed for children under age 4</u>
Specialty Toileting Needs	<u>No age limitation</u>
Mobility	<u>Shall not be assessed for children under age 2</u>
Transferring	<u>Shall not be assessed for children under age 2</u>
General Supervision	<u>Shall not be assessed for children under age 10</u>
Specialty Supervision	<u>No age limitation</u>

Table 2. Habilitation Services for Members Under Age 18

<u>Member Ages</u>	<u>Weekly Service Limits</u>
<u>Members under age 3</u>	<u>Habilitation Service shall not be assessed</u>
<u>Members aged 3-17</u>	<u>Not to exceed 14 hours in a 7-day period</u>

R9-28-1207. Extraordinary Care Review - ALTCS Contractor Requirements

- A. Each ALTCS contractor shall develop and implement a process to administer an ECR and submit the process to the Administration for review and approval prior to implementation. The process shall include all of the following:
1. A purpose statement.
 2. The contractor's methodology for the ECR process, including a description of:
 - a. How determinations will be made regarding the appropriate clinician to be assigned to each review;
 - b. How the clinician will receive the documentation including all information submitted by a member's HCDM and all information outlined in R9-28-1208(H);
 - c. How the clinician will conduct the review and account for the available documentation;
 - d. The criteria that the clinician will use to determine if there is a need to connect with a member's HCDM to complete the review;
 - e. How the clinician will evaluate the holistic needs of a member, ensuring child-specific considerations; and
 - f. How the clinician will document the outcome of the ECR.
 3. The contractor's description of the contractor's notification and education processes to inform a member of the ECR including:
 - a. The plan for methods of member education including proactive notification of the ECR process ahead of an HNT assessment;
 - b. Contractor website content;
 - c. Contact information for ECR questions or support; and
 - d. How to obtain additional information.
 4. When and how an ECR may be requested, including time frames, and information regarding how to request reasonable accommodations and language access requests.

NOTICES OF PROPOSED EXEMPT RULEMAKING

5. Information required to be documented and submitted by an HCDM when requesting an ECR, and how to submit the information.
6. Information that may be submitted by an HCDM for review during the ECR process, and how to submit the information.
7. The contractor's process to administer the PEDI-CAT and ASD Module to a member when appropriate, if the member's HCDM chooses to participate in the PEDI-CAT, and if completed, how the results of the PEDI-CAT shall be shared with an ECR clinician.
8. The type of clinician used to conduct an ECR, including how the contractor determines the selection of a clinician to conduct an ECR for specific members.
9. Training an ECR clinician is required to receive prior to conducting an ECR, and the continued training required for a clinician that conducts ECRs.
10. The method of notifying a member's HCDM of:
 - a. The contractor's time frame extension to engage a member's care team or specialty clinicians in an ECR;
 - b. The date and time for a meeting with an ECR clinician when clinically appropriate; and
 - c. The outcome of the ECR.
11. The time frame for completing an ECR and notifying a member's HCDM of the outcome.
12. Template forms for providing information or notifying a member's HCDM about the ECR, including the standardized form to document an ECR decision.
13. The plan and time frame for training all staff involved in an ECR.
14. A description of how ECR records are maintained.
15. A description of how ECR data required by the Administration is collected.
16. A workflow and timeline of the proposed ECR process that clearly describes the review from beginning to end.
- B.** The ECR process shall be conducted by a clinician with relevant professional experience, and current licensure or certification. The following clinician types meet this requirement:
 1. Developmental pediatricians;
 2. Child and adolescent psychiatrists;
 3. Registered nurses with additional training in behavioral health or complex medical conditions;
 4. Licensed psychologists;
 5. Board-certified physical medicine and rehabilitative physicians;
 6. Board-certified internal medicine physicians;
 7. Board-certified family medicine physicians;
 8. Licensed occupational or physical therapists;
 9. Speech/language pathologists;
 10. Board-certified behavior analysts; or
 11. Other appropriately licensed clinicians as approved by the Administration.
- C.** An ALTCS contractor shall verify that an ECR clinician, regardless of background, is trained on person-centered service planning at the beginning of the ECR process and annually thereafter. An ALTCS contractor may also require additional training for the ECR clinician as appropriate for the scope of the role.
- D.** An ALTCS contractor shall authorize an ECR clinician to consult with other ECR-approved clinicians in instances where a member's specific case has complex, multi-factorial considerations. An ALTCS contractor shall provide an ECR clinician access to the following when necessary:
 1. A person who can provide a whole person care perspective in addition to bringing awareness of available community supports;
 2. A person who holds a nationally recognized certification such as a qualified intellectual disability professional, a NAQ-certified intellectual/developmental disability specialist, a National Association for the Dually Diagnosed dual diagnosis specialist, or a licensed master social worker for a review involving a member with an intellectual or developmental disability; and
 3. A member's case manager.
- E.** An ALTCS contractor shall only use a clinician that is either an employee or contracted by the contractor to participate in the ECR process. The contractor shall take measures to mitigate conflict of interest by verifying that a clinician or expert has no direct benefit as a result of the outcome of an ECR. A case manager that meets the requirements for an ECR-approved clinician may not serve as the ECR clinician conducting the review for a child on the case manager's assigned caseload.
- F.** If an ALTCS contractor uses multiple clinicians for the contractor's ECR process, the contractor shall outline and implement procedures for each clinician ensuring interrater reliability, including the process for implementing interrater reliability standards and the frequency of interrater reliability activities as well as steps to remediate inconsistencies if any are discovered during an interrater reliability exercise.
- G.** An ALTCS contractor shall verify that any service provided to a member under age 18 is extraordinary in nature and medically necessary. Requested services that are not assessed due to age based or maximum hourly limitations shall be evaluated to determine if:
 1. The services are an ordinary requirement of a legally responsible person, versus services that are extraordinary and would not be needed in absence of a disability or other medical condition;
 2. The member may benefit from the services; and
 3. The services are medically necessary.
- H.** An ALTCS contractor shall provide a clinician conducting an ECR with full access to all relevant portions of a member's record. If an ECR clinician has additional questions or requests information available to the contractor, the contractor shall have a process to provide the clinician with the information in a timely manner.
- I.** An ALTCS contractor shall establish a process to administer the PEDI-CAT to a member as part of the ECR process as well as a process to make the results available to the ECR clinician when the member's HCDM chooses to complete the PEDI-CAT. For a member

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

with an autism spectrum disorder diagnosis, the ASD module of the PEDI-CAT shall be made available to the HCDM to complete instead of the standard PEDI-CAT.

- J.** An ALTCS contractor shall verify and document that services are not:
 - 1. Co-occurring unless clinically appropriate; or
 - 2. Billed during the time a member is sleeping unless there is a present medical or behavioral condition that requires awake, one-to-one care or frequent or continuous monitoring by a caregiver during sleeping hours.
- K.** An ALTCS contractor shall adhere to time frames outlined in R9-28-1210 regarding decision making and notification of the outcome to a member and the member's HCDM.
- L.** An ALTCS contractor shall provide reasonable accommodations and language access to a member or the member's HCDM who needs assistance, in whole or part, with the ECR process.

R9-28-1208. Extraordinary Care Review - Process

- A.** A member under age 18 may be eligible for an ECR process if the member's HCDM disagrees with the hours in the HNT when:
 - 1. The member was not assessed, regardless of any services that may or may not have been authorized for one or more direct care service tasks due to an age limitation; or
 - 2. The member was not assessed for habilitation services, regardless of any services that may or may not have been authorized, due to age limitations or was assessed and received limited habilitation hours due to weekly hourly limits on the HNT.
- B.** An ALTCS contractor case manager shall note a member's or HCDM's areas of concern on the HNT, specific to each task reviewed to support an ECR review if one is requested.
- C.** An ALTCS contractor case manager shall provide a member and the member's HCDM with additional documentation and resources on the ECR process, including:
 - 1. That requesting an ECR does not mean that the member is automatically eligible for an ECR;
 - 2. The annual limits of the ECR process; and
 - 3. That an ECR shall occur once every 12 months, unless the member has a change in condition, or the member receives a service assessment of a task that was not previously reviewed in an ECR.
- D.** A member may be eligible for an ECR outside the annual time frame of the PCSP. Service authorization time frames must be adhered to when conducting ECRs for the following reasons:
 - 1. The member has experienced a change in condition that necessitates an update to the HNT to determine a reduction or increase in assessed and authorized services or service hours, and the member's HCDM has a concern with a revision due to the change in condition; or
 - 2. A specific service need was not addressed in a previous ECR and the member's HCDM has a concern.
- E.** A member's HCDM shall request an ECR in writing to the member's contractor.
- F.** If a member's HCDM has a concern that does not meet the ECR criteria in subsection (A), or when the HCDM has a concern about the assessment but does not want to pursue an ECR, an ALTCS contractor shall issue a Notice of Adverse Benefit Determination under the requirements and time frames outlined in 42 CFR 438.404.
- G.** If a member's HCDM elects to pursue the ECR process, the HCDM shall:
 - 1. Submit to the member's contractor a formal request in writing for an ECR that includes:
 - a. Whether the member is seeking additional direct care services, habilitation services, or both;
 - b. The reason the member is requesting additional time and details that make the care need extraordinary;
 - c. The number of additional hours requested for each service type; and
 - d. A task-specific rationale describing the need for additional direct care services.
 - 2. Submit supporting documentation for the ECR within the required time frame, if willing to do so.
 - 3. Complete a PEDI-CAT, if willing to do so.
- H.** If a member's HCDM decides to pursue an ECR process, an ECR clinician shall:
 - 1. Meet with the member and HCDM in-person, by phone, or virtually if necessary to better understand member-specific needs.
 - 2. Review the results of the HNT and hours assessed by a case manager as well as any comments or documentation regarding the HCDM or care team's concerns about the assessment and assessed hours.
 - 3. Consider the member's PCSP including unique diagnoses, needs and personal goals, the time and effort it takes to support the member with ADLs, IADLs, or skill building that supports the member in obtaining or maintaining age-appropriate skills, exceeding what a parent or caregiver of a member without disability needs for assessed tasks including circumstances when the member might need multiple caregivers to support a particular task, need or skill.
 - 4. Consider the member's daily schedule to determine the hours in the day the member may be available to receive services including:
 - a. Other services the member receives in addition to direct care or habilitation services; or
 - b. The member's time spent in educational activities.
 - 5. Consider the risk of institutionalization or out-of-home placement if the member does not receive the services.
 - 6. Determine the availability of other services that may be more appropriate to address the member's needs.
 - 7. Consider other services or supports that were authorized but did not benefit the member.
 - 8. Determine the member's ability to benefit from the services or hours of service received.
 - 9. Determine the member's risk of functional ability or skills regression.
 - 10. Review the member's use of other services, including:
 - a. Inpatient hospitalization;
 - b. Emergency department visits;
 - c. Crisis observation visits;

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

- d. Out-of-home placements;
- e. Incident reports; and
- f. Other services covered by an ALTCS contractor.
- 11. Document a consultation between clinicians or a clinician and a subject matter expert as part of an ECR record. A consultation serves as informational only, with the final ECR decision to be the sole responsibility of the assigned ECR clinician.
- 12. Complete an ECR for direct care services, habilitation services, or both consistent with the request.
- 13. Render a decision in writing.
- 14. Inform the member, HCDM and case manager of the ECR determination, and incorporate the decision provisions into the member's HNT and PCSP.
 - a. If the total time assessed for direct care services or habilitation services is increased from the previous authorized hours, the case manager shall authorize the increased hours for service delivery.
 - b. If the total time assessed for direct care services or habilitation services is less than the amount of time requested by the HCDM in the ECR process, including when the time remains unchanged from the HNT assessment or when time is approved but not at the amount or duration requested by the HCDM.

R9-28-1209. Extraordinary Care Review - Decisions

- A.** An ECR clinician shall meet the decision time frames outlined in this Article.
- B.** An ECR clinician shall document the clinician's findings, rationale, and decision for an ECR on a standardized template developed by the ALTCS contractor. When the outcome of the ECR results in approved changes to the assessed hours or services, the ECR clinician shall work with the case manager to update the HNT as part of the outcome decision documentation process.
- C.** A revised HNT, with hours documented as determined appropriate by an ECR clinician, shall become the basis for a member's next HNT and PCSP update. If the member's needs have not changed during the time of reassessment, the ECR clinician decision shall be carried forward until such time the member's needs have changed or other requirements have been met as outlined in R9-28-1208.
- D.** ECR outcomes shall result in a decision that:
 - 1. Current services and service hours assessed on an HNT are appropriate and no change to the HNT is required;
 - 2. An increase to the current services and service hours assessed on an HNT is approved and a member's HNT shall be updated by a case manager with direction from an ECR clinician to include the additional services or service hours; or
 - 3. Current services and service hours assessed on an HNT are appropriate, and no change is required, but additional services that are not a part of the HNT assessment may be appropriate for a member's HCDM and case manager to discuss, including:
 - a. Home health or licensed health aide services;
 - b. Therapies;
 - c. Applied behavior analysis; or
 - d. Other services as determined by an ECR clinician.
- E.** ECR outcomes resulting in additional services or service hours shall be evaluated for cost effectiveness and shall not exceed the member's allowable CES.
- F.** Rationale for approving an ECR request shall specify at least one of the following:
 - 1. Evidence and supporting documentation that a member's unique needs and circumstances are extraordinary in nature and receipt of additional services or service hours may alleviate the member's complex care needs or improve the member's safety, health, and well-being;
 - 2. The presence of an immediate threat, or a high probability of immediate danger to the life, health, property, or environment of a member or another person due to the member's medical or mental health diagnosis, or behavioral condition;
 - 3. A risk of removal from the family home by an authorized agency due to concerns regarding a member's care related to the member's complex condition;
 - 4. Evidence that an out-of-home placement is not as cost effective as increasing services to support a member in remaining safe at home; or
 - 5. Other evidence-based clinical rationale that justifies additional services or the increase in service hours.
- G.** Rationale for denying an ECR request shall specify at least one of the following:
 - 1. Evidence that a member's unique needs and circumstances are not extraordinary in nature and do not require additional services or service hours;
 - 2. Evidence that the services or service hours determined on an HNT are appropriate due to a member's needs and abilities;
 - 3. Evidence that additional services or service hours are not medically necessary;
 - 4. Evidence that a member cannot benefit from additional services or service hours; or
 - 5. Other clinical rationale specific to a member's unique condition and circumstances as determined and documented by the reviewer.
- H.** An ECR decision shall be provided to a member's HCDM in writing and specify:
 - 1. The decision rendered for the ECR;
 - 2. Evidence-based documentation and rationale that supports the review decision and outcomes; and
 - 3. Relevant ECR clinician notes and considerations based on professional expertise.
- I.** ECR findings and decision shall be entered into a member's HNT and incorporated into the member's PCSP.
- J.** An ECR decision shall be provided to a member's HCDM in writing by email and mail. If the HCDM does not have access to email, a mailed decision shall be sufficient.

Arizona Administrative Register
NOTICES OF PROPOSED EXEMPT RULEMAKING

- K.** If a member's HCDM still has concerns with the outcome of an HNT or the ECR process, the contractor shall issue a Notice of Adverse Benefit Determination under the requirements and time frames outlined in 42 CFR 438.404. Concerns regarding the outcome of the ECR must be documented in the member's PCSP and HNT.

R9-28-1210. Extraordinary Care Review - Time Frames

- A.** An ALTCS contractor's ECR process shall adhere to the service authorization time frames under 42 CFR 438.210.
- B.** An ECR clinician shall have seven days from the completion of an HNT or, in instances where the ECR request is made outside of the HNT assessment process, seven days from the date of the ECR request, to complete the ECR and issue a decision, in alignment with service authorization time frames under 42 CFR 438.210, based on the completion date of the HNT.
- 1.** An ALTCS contractor may request an extension of up to an additional 14 days in instances when the extra time will be of benefit to a member to engage the member's care team or specialty clinicians in the ECR.
 - 2.** When an ECR is initially declined by a member's HCDM but later requested as allowable, an ALTCS contractor shall initiate the ECR under service authorization time frames described in 42 CFR 438.210, with the HNT completion date as the starting date.
- C.** If an ECR decision includes other services that may more effectively meet the needs of a member, an ALTCS contractor's case manager shall schedule a follow-up discussion with the member and HCDM within 14 days of the review decision.
- D.** An ALTCS contractor shall implement the actions determined by the ECR process within the time frames under 42 CFR 438.210.

R9-28-1211. Reporting and Oversight

- A.** An ALTCS contractor shall maintain a complete record of all ECR requests and outcomes.
- B.** An ALTCS contractor's records shall include:
- 1.** Member demographic information including name, AHCCCS ID number, and age at the date of request;
 - 2.** Date of the HNT, date of the ECR request, date of the ECR, date of the ECR decision, and date a member or HCDM is made aware of the ECR decision;
 - 3.** All information and documentation submitted as part of the ECR request including the written request and supporting documentation provided by a member, HCDM, the member's care team, or the member's providers;
 - 4.** Specific clinicians assigned to the ECR as well as the clinicians' professional qualifications;
 - 5.** Documentation or evidence referenced in the ECR;
 - 6.** The outcome of the ECR;
 - 7.** Communications regarding the ECR and the ECR's outcome;
 - 8.** The date that communication and follow-up activities were completed; and
 - 9.** Data related to the following:
 - a.** The number of reviews completed;
 - b.** The number of decisions made by category type, including:
 - i.** Requests approved;
 - ii.** Requests where no services or service hours were added to the HNT but where other services outside of those covered on the HNT were recommended, including capturing data when a member's HCDM declined recommended services;
 - iii.** Requests denied;
 - iv.** Approval of additional direct care services and total additional number of hours associated with each task where additional time was approved; and
 - v.** Approval of the total additional habilitation service hours during the reporting period;
 - c.** The total and average increases in service hours by service as well as other services recommended outside of those covered on the HNT;
 - d.** The average time to conduct an ECR, data specific to each phase of the ECR process, and overall average time frame for the ECR process; and
 - e.** Analysis of any trends that support review and oversight of the ECR process.
- C.** An ALTCS contractor shall report requested information and data to the Administration at periodic intervals.
- D.** The Administration shall conduct a periodic audit to ensure compliance and evaluate the effectiveness of an ALTCS contractor's ECR process.
- E.** An ALTCS contractor shall provide additional information requested by the Administration to support periodic audits of the contractor's ECR process.

Arizona Administrative Register
NOTICES OF RULEMAKING DOCKET OPENING

Volume 32, Issue 40, October 2, 2026

NOTICES OF RULEMAKING DOCKET OPENING

The Administrative Procedure Act (APA) requires an agency file a Notice of Rulemaking Docket Opening which outlines its rulemaking intentions under [A.R.S. § 41-1021](#).

A docket opening and Notice of Proposed Rulemaking are often filed at the same time and published in the same *Register* issue.

If a Notice of Proposed Rulemaking is not published in this *Register* that corresponds with a published docket in this week's issue, it simply means the agency has not filed the notice for consideration and public review.

An agency has one year from the publishing of this notice to propose a rule; after one year the docket expires.

Questions about the notice can be answered by the person listed in item #5 of the preamble.

Refer to item #6 in the preamble for information on how to comment on this notice.

NOTICE OF EXEMPT RULEMAKING DOCKET OPENING

**ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ADMINISTRATION**

File Number: R26-174

1. **Permission to proceed with this docket was granted under A.R.S. § 41-1039 by the governor on:**
July 7, 2026
2. **Title and its heading:**
9. Health Services

Chapter and its heading:
22. Arizona Health Care Cost Containment System - Administration

Article and its heading:
7. Standards for Payments

Section number:
R9-22-730
3. **The subject matter of the exempt rule:**
Hospital Assessment Fund
4. **A citation to all published notices relating to the current proceeding:**
Notice of Proposed Exempt Rulemaking: 32 A.A.R. 2400, October 2, 2026 (*in this issue*); File Number: R26-176
5. **The name and address of agency personnel with whom persons may communicate regarding the rule:**

Name:	Sam McCue
Title:	Senior Rules Analyst
Division:	AHCCCS Office of the General Counsel
Address:	150 N. 18th Ave. Phoenix, AZ 85007
Telephone:	(602) 417-4232
Fax:	(602) 253-9115
Email:	AHCCCSRules@azahcccs.gov
Website:	www.azahcccs.gov
6. **The time during which the agency will accept written comments and the time and place where oral comments may be made:**

AHCCCS is providing a 30-day time frame for submission of public comments regarding the proposed exempt rulemaking beginning September 15, 2026, the date the Notice of Proposed Exempt Rulemaking was posted on the AHCCCS website at www.azahcccs.gov, until October 15, 2026. All public comments are to be submitted to the person

NOTICES OF RULEMAKING DOCKET OPENING

listed under item #5.

The agency is not required under A.R.S. § 41-1005(A)(31) to conduct an oral proceeding.

7. **A timetable for agency decisions or other action on the current proceeding, if known:**
Not applicable

NOTICE OF EXEMPT RULEMAKING DOCKET OPENING
ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ADMINISTRATION

File Number: R26-175

1. **Permission to proceed with this docket was granted under A.R.S. § 41-1039 by the governor on:**
May 28, 2026
2. **Title and its heading:**
9. Health Services

Chapter and its heading:
22. Arizona Health Care Cost Containment System - Administration

Article and its heading:
7. Standards for Payments

Section number:
R9-22-731
3. **The subject matter of the exempt rule:**
Health Care Investment Fund
4. **A citation to all published notices relating to the current proceeding:**
Notice of Proposed Exempt Rulemaking: 32 A.A.R. 2405, October 2, 2026 (*in this issue*); File Number: R26-177
5. **The name and address of agency personnel with whom persons may communicate regarding the rule:**
Name: Sam McCue
Title: Senior Rules Analyst
Division: AHCCCS Office of the General Counsel
Address: 150 N. 18th Ave.
Phoenix, AZ 85007

Telephone: (602) 417-4232
Fax: (602) 253-9115
Email: AHCCCSRules@azahcccs.gov
Website: www.azahcccs.gov
6. **The time during which the agency will accept written comments and the time and place where oral comments may be made:**
AHCCCS is providing a 30-day time frame for submission of public comments regarding the proposed exempt rulemaking beginning September 15, 2026, the date the Notice of Proposed Exempt Rulemaking was posted on the AHCCCS website at www.azahcccs.gov, until October 15, 2026. All public comments are to be submitted to the person listed under item #5. Under Laws, 2026, Ch. 132, § 20, AHCCCS is exempt from the Administrative Procedures Act, Arizona Revised Statutes, Title 41, Chapter 6, and no oral proceeding will be conducted.
7. **A timetable for agency decisions or other action on the current proceeding, if known:**
Not applicable

NOTICE OF EXEMPT RULEMAKING DOCKET OPENING

Arizona Administrative Register
NOTICES OF RULEMAKING DOCKET OPENING

**ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ARIZONA LONG-TERM CARE SYSTEM**

File Number: R26-171

1. **Permission to proceed with this docket was granted under A.R.S. § 41-1039 by the governor on:**
September 3, 2026

2. **Title and its heading:**
9. Health Services

Chapter and its heading:

28. Arizona Health Care Cost Containment System - Arizona Long-term Care System

Article and its heading:

12. HCBS Needs Tool and Extraordinary Care Review

Section number:

R9-28-1201, R9-28-1202, R9-28-1203, R9-28-1204, R9-28-1205, R9-28-1206, R9-28-1207, R9-28-1208, R9-28-1209, R9-28-1210, R9-28-1211

Sections may be added, amended, repealed, or renumbered as necessary.

3. **The subject matter of the exempt rule:**
HCBS Needs Tool and Extraordinary Care Review

4. **A citation to all published notices relating to the current proceeding:**
Notice of Proposed Exempt Rulemaking: 32 A.A.R. 2409, October 2, 2026 (*in this issue*); File Number: R26-170
Notice of Emergency Rulemaking: 31 A.A.R. 4227; Issue Date: October 31, 2025; Issue Number: 44; File Number: R25-247
Notice of Emergency Rulemaking - Renewal: 32 A.A.R. 932; Issue Date: April 24, 2026; Issue Number: 17; File Number: R26-53
Notice of Rulemaking Docket Opening: 32 A.A.R. 893; Issue Date: April 17, 2026; Issue Number: 16; File Number: R26-49
Notice of Proposed Rulemaking: 32 A.A.R. 867; Issue Date: April 17, 2026; Issue Number: 16; File Number: R26-46
Notice of Termination of Rulemaking 32 A.A.R. 1862; Issue Date: August 21, 2026; Issue Number: 34; File Number: R26-139

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

Name: Sam McCue
Title: Senior Rules Analyst
Division: AHCCCS Office of the General Counsel
Address: 150 N. 18th Ave.
Phoenix, AZ 85007
Telephone: (602) 417-4232
Fax: (602) 253-9115
Email: AHCCCSRules@azahcccs.gov
Website: www.azahcccs.gov

6. **The time during which the agency will accept written comments and the time and place where oral comments may be made:**
AHCCCS is providing a 30-day time frame for submission of public comments regarding the proposed exempt rulemaking beginning September 12, 2026, the date the Notice of Proposed Exempt Rulemaking was posted on the AHCCCS website at www.azahcccs.gov, until October 12, 2026. All public comments are to be submitted to the person listed under item #5. Under Laws, 2026, Ch. 132, § 19, AHCCCS is exempt from the Administrative Procedures Act, Arizona Revised Statutes, Title 41, Chapter 6, and no oral proceeding will be conducted.

Arizona Administrative Register
NOTICES OF RULEMAKING DOCKET OPENING

7. **A timetable for agency decisions or other action on the current proceeding, if known:**
Not applicable

NOTICE OF EXEMPT RULEMAKING DOCKET OPENING

**CORPORATION COMMISSION
SECURITIES**

File Number: R26-172

1. **Permission to proceed with this docket was granted under A.R.S. § 41-1039 by the governor on:**
Pursuant to A.R.S. § 41-1039(E)(2)(b), the rules proposed by the Corporation Commission are expressly exempt from the provisions of A.R.S. § 41-1039.
2. **Title and its heading:**
14. Public Service Corporations; Corporations and Associations; Securities Regulation

Chapter and its heading:
4. Corporation Commission - Securities

Article and its heading:
1. In General Relating to the Arizona Securities Act

Section number:
R14-4-114
3. **The subject matter of the exempt rule:**
Agency docket number: RS-00000A-26-0048
Subject matter: Revisions to Section R14-4-114
4. **A citation to all published notices relating to the current proceeding:**
Notice of Proposed Exempt Rulemaking: 32 A.A.R. 1610; Issue Date: July 17, 2026; Issue Number: 29; File Number: R26-116
5. **The name and address of agency personnel with whom persons may communicate regarding the rule:**
Name: Ryan Millecam
Title: Senior Registration and Compliance Counsel
Division: Securities
Address: 1300 W. Washington St., 3rd Floor
Phoenix, AZ 85007
Telephone: (602) 542-3229
Email: rmillecam@azcc.gov
Website: www.azcc.gov
6. **The time during which the agency will accept written comments and the time and place where oral comments may be made:**
Please reference docket number RS-00000A-26-0048 on all documents submitted.
Interested persons can submit written comments on the proposed rulemaking by mail to the Commission's Docket Control at 1200 W. Washington St., Phoenix, AZ 85007. Electronically submitted requests and comments and mailed written requests and comments must be postmarked by October 17, 2026, 90 days from publication of the Notice of Proposed Exempt Rulemaking in the July 17, 2026 Administrative Register. To file written comments electronically and receive notice of all filings made in this rulemaking, go to www.azcc.gov and select the header "Meetings & Cases;" select "eDocket" then "eFiling." Creation of a free ACC Portal account is required to eFile or follow a docket.
7. **A timetable for agency decisions or other action on the current proceeding, if known:**
Unknown.

NOTICE OF RULEMAKING DOCKET OPENING

Arizona Administrative Register
NOTICES OF RULEMAKING DOCKET OPENING

**DEPARTMENT OF CHILD SAFETY
CHILD WELFARE AGENCY LICENSING**

File Number: R26-173

1. **Permission to proceed with this docket was granted under A.R.S. § 41-1039 by the governor on:**
June 19, 2026

2. **Title and its heading:**
21. Child Safety

Chapter and its heading:
7. Department of Child Safety – Child Welfare Agency Licensing

Article and its heading:
1. Licensing Requirements For A Child Welfare Agency
2. Residential Group Care Facilities

Section number:
R21-7-101, R21-7-134, R21-7-207 and R21-7-209
Sections may be added, amended, repealed, or renumbered as necessary.

3. **The subject matter of the proposed rule:**
The rules under Title 21, Chapter 7, Article 1 and 2 pertain to child welfare agency licensing and group home requirements. These rules need to be updated to clarify expectations and processes for notification of missing children. This will establish a quicker and more efficient process for ensuring that proper notification and coordination between DCS, local law enforcement, the group home and the child placing agency occurs when a child is missing from a facility licensed by DCS. These amendments are necessary to ensure that efforts to locate missing children can begin and the health and safety of children is prioritized.

4. **A citation to all published notices relating to the current proceeding:**
Notice of Proposed Rulemaking: 32 A.A.R. 2393, October 2, 2026 (*in this issue*); File Number: R26-169

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

Name: Karen Wouters
Title: Rule Development Specialist
Division: DCS Office of Policy and Rules, Department of Child Safety
Address: P.O. Box 6030 - Site Code C010-23
Phoenix, AZ 85005-6030

Telephone: (602) 255-3461
Fax: (602) 255-3262
Email: Karen.Wouters@azdcs.gov
Website: dcs.az.gov/about/policy/rulemaking

6. **The time during which the agency will accept written comments and the time and place where oral comments may be made:**
Written comments should be directed to the person listed in #5, Monday through Friday from 8 a.m. to 5 p.m., except for state holidays. Comments will also be accepted via email at the email address provided under item #5. All comments must be received by 5:00 p.m. on close of public record. Mailed written comments shall be postmarked within 30 days of this published notice. The Department has scheduled an oral proceeding for public comments:

Date: November 13, 2026
Time: 10:00 a.m.
Location: Virtual Oral Proceeding via Microsoft Teams
Meeting ID: 256 283 424 449 284
Passcode: KX9Db7KD

NOTICES OF RULEMAKING DOCKET OPENING

or

Dial in by phone

+1 480-561-6122

Phone conference ID: 728 449 557#

- 7. A timetable for agency decisions or other action on the current proceeding, if known:**
To be determined.

Arizona Administrative Register
NOTICES OF PROPOSED DELEGATION AGREEMENT

Volume 32, Issue 40, October 2, 2026

NOTICES OF PROPOSED DELEGATION AGREEMENT

Summaries and Location of Documents

Some agencies have been given legislative authority to delegate functions, powers, or duties to political subdivisions in Arizona.

An agency that seeks to delegate functions, powers or duties shall file with the Office a summary of its proposed delegation agreement under [A.R.S. § 41-1081\(B\)](#).

Agencies shall provide a contact person to answer questions or accept comments on the notice. This information is listed under Item #3 of the notice.

The notice shall also state where interested persons may obtain, upon request, a copy of the proposed delegation agreement from the agency.

NOTICE OF PROPOSED DELEGATION AGREEMENT

DEPARTMENT OF ENVIRONMENTAL QUALITY

File Number: M26-71

1. Agency initiating the agreement:

Arizona Department of Environmental Quality

2. The political subdivision to which functions, powers, or duties are proposed to be delegated:

La Paz Unified Fire-Medical District

3. Contact information:

Name: Balaji Vaidyanathan
Title: Deputy Assistant Director
Division: Air Quality Department
Address: 1110 W. Washington St.
Phoenix, AZ 85007
Telephone: (602) 771-4527
Email: Vaidyanathan.balaji@azdeq.gov
Website: www.azdeq.gov

4. Summary of agreement including subjects and issues:

Arizona Department of Environmental Quality (ADEQ) delegates some of its functions and duties when those local authorities and ADEQ have agreed that doing so is in the best interest of the State. Pursuant to A.R.S. §§ 49-107 & 49-501(D), the Arizona Department of Environmental Quality proposes to delegate functions and duties with La Paz Unified Fire-medical District related to open burn permits, identified by A.R.S. § 49-501 and A.A.C. R18-2-602. Open burn permits are issued to provide permission for the public to set and control fires under certain circumstances.

Functions and duties that are delegated by ADEQ to local authorities must continue to be regulated consistent with ADEQ's regulatory authority. When delegating authority, ADEQ enters into an individual delegation agreement with the local authority. Each individual delegation agreement identifies exactly which functions and duties are delegated.

5. An electronic copy of this agreement can be viewed at:

<https://azdeq.gov/delegation-agreements>

6. A paper copy of this agreement can be obtained at:

Physical address: ADEQ Records Center, 1110 W. Washington St., Phoenix, AZ 85007
Copy or other fees: Black and White copies \$.25 per side. Color copies \$.75 per side.

7. Schedule of public hearings:

Where there is sufficient public interest, ADEQ will hold a public hearing to receive public comments, in accordance with A.R.S. § 41-1081. The time, place, and location of the hearings will be provided in the corresponding Notice of Hearing according to A.A.C. R18-1-401 and R18-1-402.

NOTICES OF PROPOSED DELEGATION AGREEMENT

ADEQ accepts written statements, arguments, data, and views on the proposed delegation agreement that are received within 30 days after the date of the publication of this notice in the Register by end of day 12:00 p.m. or post-marked no later than that date.

After the conclusion of the public comment period and hearing, if any, the agency shall prepare a written summary responding to the comments received, whether oral or written. The agency shall consider the comments received from the public in determining whether to enter into the proposed delegation agreement. The agency shall give written notice to those persons who submitted comments of the agency's decision on whether to enter into the proposed delegation agreement.

ADEQ will take reasonable measures to provide access to department services to individuals with limited ability to speak, write or understand English and/or to those with disabilities. Requests for language translation, ASL interpretation, CART captioning services or disability accommodations must be made at least 48 hours in advance by contacting the Title VI Non-discrimination Coordinator at 520-628-6744 or marruffjo.joaquin@azdeq.gov. For a TTY or other device, Telecommunications Relay Services are available by calling 711.

ADEQ tomará las medidas razonables para proveer acceso a los servicios del departamento a personas con capacidad limitada para hablar, escribir o entender inglés y/o para personas con discapacidades. Las solicitudes de servicios de traducción de idiomas, interpretación ASL (lengua de signos americano), subtitulado de CART, o adaptaciones por discapacidad deben realizarse con al menos 48 horas de anticipación comunicándose con el Coordinador de Anti-Discriminación del Título VI al 520-628-6744 o marruffjo.joaquin@azdeq.gov. Para un TTY u otro dispositivo, los servicios de retransmisión de telecomunicaciones están disponible llamando al 711.

2026 REGISTER INDEXES

Volume 32, Issue 40, October 2, 2026

Volume 32, Issue 40, October 2, 2026

2026 REGISTER INDEXES

The *Register* is published by volume in a calendar year. Refer to the “Information” pages in the front of each issue for more details.

Abbreviations for rulemaking activity in this Index include:

PROPOSED RULEMAKING

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

SUPPLEMENTAL PROPOSED RULEMAKING

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

FINAL RULEMAKING

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

SUMMARY RULEMAKING

PROPOSED SUMMARY

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

FINAL SUMMARY

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

EXPEDITED RULEMAKING

PROPOSED EXPEDITED

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

SUPPLEMENTAL EXPEDITED

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

FINAL EXPEDITED

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

EXEMPT RULEMAKING

EXEMPT

XN means Exempt new Section
XM means Exempt amended Section
XR means Exempt repealed Section
X# means Exempt renumbered Section

EXEMPT PROPOSED

PXM means Proposed Exempt new Section
PXM means Proposed Exempt amended Section
PXR means Proposed Exempt repealed Section
PX# means Proposed Exempt renumbered Section

EXEMPT SUPPLEMENTAL PROPOSED

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

FINAL EXEMPT RULEMAKING

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

EMERGENCY RULEMAKING

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

RECODIFICATION OF RULES

RC means Recodified

REJECTION OF RULES

RJ means Rejected by the Attorney General

TERMINATION OF RULES

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

RULE EXPIRATIONS

EXP means Rules have expired
Refer to “emergency expired” under emergency rulemaking

CORRECTIONS

C means Corrections to Published Rules

Issue Page Guide

Issue 1, Friday, January 2, 2026	pages 1-166	Issue 27, Friday, July 3, 2026.....	pages 1473-1520
Issue 2, Friday, January 9, 2026	pages 167-210	Issue 28, Friday, July 10, 2026.....	pages 1521-1602
Issue 3, Friday, January 16, 2026	pages 211-240	Issue 29, Friday, July 17, 2026.....	pages 1603-1638
Issue 4, Friday, January 23, 2026	pages 241-278	Issue 30, Friday, July 24, 2026.....	pages 1639-1710
Issue 5, Friday, January 30, 2026	pages 279-302	Issue 31, Friday, July 31, 2026.....	pages 1711-1740
Issue 6, Friday, February 6, 2026	pages 303-386	Issue 32, Friday, August 7, 2026	pages 1741-1798
Issue 7, Friday, February 13, 2026	pages 387-412	Issue 33, Friday, August 14, 2026	pages 1799-1848
Issue 8, Friday, February 20, 2026	pages 413-466	Issue 34, Friday, August 21, 2026	pages 1849-1890
Issue 9, Friday, February 27, 2026	pages 467-546	Issue 35, Friday, August 28, 2026	pages 1891-2010
Issue 10, Friday, March 6, 2026.....	pages 547-600	Issue 36, Friday, September 4, 2026	pages 2011-2132
Issue 11, Friday, March 13, 2026	pages 601-664	Issue 37, Friday, September 11, 2026.....	pages 2133-2168
Issue 12, Friday, March 20, 2026.....	pages 665-710	Issue 38, Friday, September 18, 2026	pages 2169-2270
Issue 13, Friday, March 27, 2026.....	pages 711-780	Issue 39, Friday, September 25, 2026	pages 2271-2388
Issue 14, Friday, April 3, 2026	pages 781-826	Issue 40, Friday, October 2, 2026	TBD
Issue 15, Friday, April 10, 2026.....	pages 827-862	Issue 41, Friday, October 9, 2026	TBD
Issue 16, Friday, April 17, 2026	pages 863-916	Issue 42, Friday, October 16, 2026	TBD
Issue 17, Friday, April 24, 2026	pages 917-954	Issue 43, Friday, October 23, 2026	TBD
Issue 18, Friday, May 1, 2026	pages 955-984	Issue 44, Friday, October 30, 2026	TBD
Issue 19, Friday, May 8, 2026	pages 985-1020	Issue 45, Friday, November 6, 2026	TBD
Issue 20, Friday, May 15, 2026	pages 1021-1060	Issue 46, Friday, November 13, 2026	TBD
Issue 21, Friday, May 22, 2026	pages 1061-1162	Issue 47, Friday, November 20, 2026	TBD
Issue 22, Friday, May 29, 2026	pages 1163-1280	Issue 48, Friday, November 27, 2026	TBD
Issue 23, Friday, June 5, 2026	pages 1281-1330	Issue 49, Friday, December 4, 2026	TBD
Issue 24, Friday, June 12, 2026	pages 1331-1366	Issue 50, Friday, December 11, 2026.....	TBD
Issue 25, Friday, June 19, 2026	pages 1367-1402	Issue 51, Friday, December 18, 2026	TBD
Issue 26, Friday, June 26, 2026	pages 1403-1472	Issue 52, Friday, December 25, 2026	TBD

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

RULEMAKING ACTIVITY INDEX

THIS INDEX INCLUDES RULEMAKING ACTIVITY THROUGH ISSUE 39 OF VOLUME 32.

Rulemakings are listed in the Index by Chapter, Section number, rulemaking activity abbreviation and volume page number. Use the page guide to determine the *Register* issue number and publish date to review the rule. Subchapter, Article, Part, and Section headings are not indexed.

Accountancy, Board of		Agriculture, Department of - Pest Management Division		R20-5-1202.	PM-1417
R4-1-115.	PEM-249; FEM-1254	R3-8-308.	FM-443	R20-5-1208.	PM-1417
R4-1-226.01.	PEM-1661	R3-8-309.	FM-443	R20-5-1212.	PM-1417
R4-1-341.	PEM-1661	Agriculture, Department of - Plant Services Division		R20-5-1214.	PM-1417
R4-1-343.	PEM-1661			R20-5-1215.	P#-1417; PN-1417
R4-1-345.	PEM-249; FEM-1254	R3-4-205.	PM-1853	R20-5-1216.	P#-1417; PN-1417
R4-1-453.	PEM-249; FEM-1254	R3-4-229.	PM-1857	R20-5-1217.	P#-1417; PN-1417
R4-1-454.	PEM-249; FEM-1254; PEM-1661	Agriculture, Department of - Weights and Measures Services Division		R20-5-1218.	P#-1417; PN-1417
R4-1-455.	PEM-249; FEM-1254; PEM-1661	R3-7-101.	PM-1895	R20-5-1219.	P#-1417; PN-1417
Administration, Department of - State Procurement Office		R3-7-108.	PM-1895	R20-5-1220.	P#-1417; PN-1417
R2-7-101.	PEM-1477	R3-7-402.	PM-1895	R20-5-1221.	PN-1417
R2-7-202.	PEM-1477	R3-7-506.	PM-1895	R20-5-1222.	PN-1417
R2-7-203.	PEM-1477	R3-7-601.	PM-1895	R20-5-1223.	PN-1417
R2-7-B301.	PEM-1477	R3-7-602.	PM-1895	R20-5-1224.	PN-1417
R2-7-B312.	PEM-1477	R3-7-702.	PM-1895	R20-5-1225.	PN-1417
R2-7-C301.	PEM-1477	Table 1.	PM-1895	R20-5-1226.	PN-1417
R2-7-D301.	PEM-1477	R3-7-716.	PM-1895	R20-5-1227.	P#-1417; PM-1417
R2-7-D302.	PEM-1477	R3-7-751.	PM-1895	R20-5-1228.	P#-1417; PM-1417
R2-7-D303.	PEM-1477	R3-7-1004.	PM-1895	R20-5-1229.	P#-1417
R2-7-D304.	PEM-1477	R3-7-1005.	PM-1895	R20-5-1230.	P#-1417
R2-7-E301.	PEM-1477	R3-7-1010.	PM-1895	R20-5-1231.	P#-1417
R2-7-G305.	PEM-1477	Table 1.	PM-1895	R20-5-1232.	P#-1417
R2-7-506.	PEM-1477	Arizona, Industrial Commission of		Barbering and Cosmetology Board	
R2-7-507.	PEM-1477	R20-5-601.	FM-126	R4-10-101.	PM-417; FM-2283
R2-7-508.	PEM-1477	R20-5-602.	FM-126	R4-10-102.	PM-417; FM-2283
R2-7-509.	PEM-1477	R20-5-603.	PM-1916	R4-10-103.	PM-417; FM-2283
R2-7-510.	PEM-1477	R20-5-604.	PM-1916	R4-10-106.	PM-417; FM-2283
R2-7-A901.	PEM-1477	R20-5-902.	PM-1417	R4-10-111.	PM-417; FM-2283
R2-7-A903.	PEM-1477	R20-5-903.	P#-1417; PN-1417	R4-10-112.	PM-417; FM-2283
R2-7-A907.	PEM-1477	R20-5-904.	P#-1417; PM-1417	R4-10-113.	PM-417; FM-2283
R2-7-A910.	PEM-1477	R20-5-905.	P#-1417; PM-1417	R4-10-114.	PM-417; FM-2283
R2-7-1001.	PEM-1477	R20-5-906.	P#-1417; PM-1417	Part A.	PR-417; FR-2283
R2-7-1002.	PEM-1477	R20-5-907.	P#-1417; PM-1417	R4-10-A101.	PR-417; FR-2283
R2-7-1003.	PEM-1477	R20-5-908.	P#-1417		
R2-7-1004.	PEM-1477	R20-5-909.	P#-1417; PN-1417		
Agriculture, Department of - Animal Services Division		R20-5-1002.	PM-1417		
R3-2-801.	XM-2141	R20-5-1003.	PM-1417		
Agriculture, Department of - Environmental Services Division		R20-5-1004.	PM-1417		
R3-3-402.	PM-171; FM-989	R20-5-1006.	PM-1417		
		R20-5-1008.	PM-1417		
		R20-5-1010.	PN-1417		

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

Table A1.	PR-417; FR-2283	R4-10-B307.	PM-417; FM-2283	R14-2-908. R14-2-909.	FR-215 FR-215
Part B.	PR-417; FR-2283	R4-10-401.	PM-417; FM-2283	R14-2-2501. R14-2-2502.	FR-1335 FR-1335
Table B1.	PM-417; FM-2283	R4-10-402.	PM-417; FM-2283	R14-2-2503. R14-2-2504.	FR-1335 FR-1335
R4-10-201.	PM-417; FM-2283	R4-10-403.	PM-417; FM-2283	Table 1.	FR-1335
R4-10-202.	PM-417; FM-2283	R4-10-404.	PM-417; FM-2283	Table 2.	FR-1335
R4-10-203.	PM-417; FM-2283	R4-10-405.	PM-417; FM-2283	Table 3.	FR-1335
R4-10-204.	PM-417; FM-2283	Part A.	PR-417; FR-2283	Table 4.	FR-1335
R4-10-205.	P#-417; PM-417; F#-2283; FM-2283	R4-10-A401.	P#-417; F#-2283	R14-2-2505. R14-2-2506.	FR-1335 FR-1335
R4-10-206.	PN-417; FN-2283	R4-10-406.	P#-417; PM-417; F#-2283; FM-2283	R14-2-2507. R14-2-2508. R14-2-2509. R14-2-2510.	FR-1335 FR-1335 FR-1335 FR-1335
R4-10-207.	P#-417; PM-417; F#-2283; FM-2283	Part B.	PR-417; FR-2283	R14-2-2511. R14-2-2512.	FR-1335 FR-1335
Part A.	PR-417; FR-2283	R4-10-B401.	P#-417; F#-2283	R14-2-2513. R14-2-2514.	FR-1335 FR-1335
R4-10-A201.	PR-417; FR-2283	R4-10-407.	P#-417; PM-417; F#-2283; FM-2283	R14-2-2515. R14-2-2516. R14-2-2517.	FR-1335 FR-1335 FR-1335
R4-10-A202.	PR-417; FR-2283	R4-10-B402.	P#-417; F#-2283	R14-2-2518. R14-2-2519. R14-2-2520.	FR-1335 FR-1335 FR-1335
Part B.	PR-417; FR-2283	R4-10-408.	P#-417; PM-417; F#-2283; FM-2283	Corporation Commission, Arizona - Power Plant and Transmission Line Siting Committee	
R4-10-B201.	P#-417; F#-2283		PM-417; F#-2283; FM-2283	R14-7-101.	RC-997
R4-10-B202.	P#-417; F#-2283			R14-7-102.	RC-997
R4-10-301.	PM-417; FM-2283	Child Safety, Department of - Per- manency and Support Services		R14-7-103.	RC-997
R4-10-302.	PM-417; FM-2283	R21-5-502.	FM-582	R14-7-104.	RC-997
R4-10-303.	PM-417; FM-2283	R21-5-507.	FM-582	R14-7-105.	RC-997
R4-10-304.	PM-417; FM-2283	R21-5-508.	FM-582	R14-7-106.	RC-997
R4-10-304.1.	PM-417; FM-2283	R21-5-510.	FM-582	R14-7-107.	RC-997
R4-10-305.	PM-417; FM-2283	R21-5-511.	FM-582	R14-7-108.	RC-997
R4-10-306.	PM-417; FM-2283			R14-7-109.	RC-997
R4-10-A301.	PM-417; FM-2283			R14-7-110.	RC-997
R4-10-A302.	PM-417; FM-2283	Clean Elections Commission, Citi- zens		R14-7-111.	RC-997
R4-10-A303.	PM-417; FM-2283	R2-20-106.	FM-807	R14-7-112.	RC-997
R4-10-B305.	PM-417; FM-2283	R2-20-113.	PM-669; FM-1773	R14-7-113.	RC-997
R4-10-B306.	PM-417; FM-2283	R2-20-702.	PM-245; FM-1430	R14-7-114.	RC-997
		R2-20-706.	FN-807	R14-7-115.	RC-997
		Corporation Commission, Arizona - Fixed Utilities		R14-7-116.	RC-997
		R14-2-901.	FR-215	R14-7-117.	RC-997
		R14-2-902.	FR-215	R14-7-118.	RC-997
		R14-2-903.	FR-215	R14-7-119.	RC-997
		R14-2-904.	FR-215	R14-7-120.	RC-997
		R14-2-905.	FR-215	Corporation Commission, Arizona - Rules of Practice and Procedure	
		R14-2-906.	FR-215	R14-3-201.	RC-997
		R14-2-907.	FR-215	R14-3-202.	RC-997
				R14-3-203.	RC-997
				R14-3-204.	RC-997
				R14-3-205.	RC-997
				R14-3-206.	RC-997

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

R14-3-207.	RC-997	R6-2-202.	F#-477;	R6-5-7435.	EXP-1004
R14-3-208.	RC-997		FN-477;	R6-5-7436.	EXP-1004
R14-3-209.	RC-997		FM-477	R6-5-7437.	EXP-1004
R14-3-210.	RC-997	R6-2-203.	FN-477	R6-5-7438.	EXP-1004
R14-3-211.	RC-997	R6-2-204.	FN-477	R6-5-7439.	EXP-1004
R14-3-212.	RC-997	R6-2-301.	FN-477	R6-5-7440.	EXP-1004
R14-3-213.	RC-997	R6-2-302.	FN-477	R6-5-7441.	EXP-1004
R14-3-214.	RC-997	R6-2-303.	FN-477	R6-5-7442.	EXP-1004
R14-3-215.	RC-997	R6-2-401.	FN-477	R6-5-7443.	EXP-1004
R14-3-216.	RC-997	R6-2-402.	FN-477	R6-5-7444.	EXP-1004
R14-3-217.	RC-997	R6-2-403.	FN-477	R6-5-7445.	EXP-1004
R14-3-218.	RC-997	Economic Security, Department of - Social Services		R6-5-7446.	EXP-1004
R14-3-219.	RC-997			R6-5-7447.	EXP-1004
R14-3-220.	RC-997			R6-5-7448.	EXP-1004
Corporation Commission, Arizona - Securities		R6-5-6901.	EXP-1003	R6-5-7449.	EXP-1004
		R6-5-6902.	EXP-1003	R6-5-7450.	EXP-1004
		R6-5-6903.	EXP-1003	R6-5-7451.	EXP-1004
R14-4-114.	PXM-1610	R6-5-6904.	EXP-1003	R6-5-7452.	EXP-1004
Corporation Commission, Arizona - Transportation		R6-5-6905.	EXP-1003	R6-5-7453.	EXP-1004
		R6-5-6906.	EXP-1003	R6-5-7454.	EXP-1004
		R6-5-6907.	EXP-1003	R6-5-7455.	EXP-1004
R14-5-201.	FM-1806	R6-5-6908.	EXP-1003	R6-5-7456.	EXP-1004
R14-5-202.	FM-1806	R6-5-6909.	EXP-1003	R6-5-7457.	EXP-1004
R14-5-203.	FM-1806	R6-5-6910.	EXP-1003	R6-5-7458.	EXP-1004
R14-5-204.	FM-1806	R6-5-7401.	EXP-1004	R6-5-7459.	EXP-1004
R14-5-207.	FM-1806	R6-5-7402.	EXP-1004	R6-5-7460.	EXP-1004
Criminal Justice Commission, Ari- zona		R6-5-7403.	EXP-1004	R6-5-7461.	EXP-1004
		R6-5-7404.	EXP-1004	R6-5-7462.	EXP-1004
R10-4-502.	PEM-1717	R6-5-7405.	EXP-1004	R6-5-7463.	EXP-1004
Dental Examiners, State Board of		R6-5-7406.	EXP-1004	R6-5-7464.	EXP-1004
		R6-5-7407.	EXP-1004	R6-5-7465.	EXP-1004
R4-11-303.	PM-1065	R6-5-7408.	EXP-1004	R6-5-7466.	EXP-1004
R4-11-1102.	PM-1065	R6-5-7409.	EXP-1004	R6-5-7467.	EXP-1004
R4-11-1203.	PM-2275	R6-5-7410.	EXP-1004	R6-5-7468.	EXP-1004
R4-11-1204.	PM-2275	R6-5-7411.	EXP-1004	R6-5-7469.	EXP-1004
Economic Security, Department of - Developmental Disabilities		R6-5-7412.	EXP-1004	R6-5-7470.	EXP-1004
		R6-5-7413.	EXP-1004	R6-5-7471.	EXP-1004
R6-6-1401.	FN-1170	R6-5-7414.	EXP-1004	Appendix 1.	EXP-1004
R6-6-1402.	FN-1170	R6-5-7415.	EXP-1004	Education, State Board of	
R6-6-1403.	FN-1170	R6-5-7416.	EXP-1004		
R6-6-1404.	FN-1170	R6-5-7417.	EXP-1004	R7-2-701.	FXM-221
R6-6-1405.	FN-1170	R6-5-7418.	EXP-1004	R7-2-703.	FXM-221
R6-6-1406.	FN-1170	R6-5-7419.	EXP-1004	R7-2-704.	FXM-221
R6-6-1407.	FN-1170	R6-5-7420.	EXP-1004	R7-2-709.	FXM-221
Economic Security, Department of - Employment Service		R6-5-7421.	EXP-1004	R7-2-712.	FXM-221
		R6-5-7422.	EXP-1004	R7-2-1301.	FXM-221
R6-2-101.	FM-477	R6-5-7423.	EXP-1004	R7-2-1302.	FXM-221
R6-2-102.	FR-477; FN-477	R6-5-7424.	EXP-1004	R7-2-1303.	FXM-221
		R6-5-7425.	EXP-1004	R7-2-1304.	FXM-221
R6-2-103.	FR-477; FN-477; FM-477	R6-5-7426.	EXP-1004	R7-2-1305.	FXM-221
		R6-5-7427.	EXP-1004	R7-2-1306.	FXM-221
		R6-5-7428.	EXP-1004	R7-2-1307.	FXM-221
R6-2-104.	F#-477	R6-5-7429.	EXP-1004	R7-2-1308.	FXM-221
R6-2-201.	F#-477; FN-477; FM-477	R6-5-7430.	EXP-1004	R7-2-1309.	FXM-221
		R6-5-7431.	EXP-1004	Environmental Quality, Department of - Administration	
		R6-5-7432.	EXP-1004		
		R6-5-7433.	EXP-1004	Table 10.	PM-2173
		R6-5-7434.	EXP-1004		

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

Environmental Quality, Department of - Air Pollution Control		Environmental Quality, Department of - Permit and Compliance Fees		R18-13-1701.	PM-872
R18-2-101.	FM-55	R18-14-101.	PM-283;	R18-13-1702.	PN-872
R18-2-301.	FM-55		FM-1434	R18-13-1703.	PM-872
R18-2-302.	FM-55	R18-14-102.	PM-283;	R18-13-1704.	PM-872
R18-2-302.01.	FM-55		FM-1434	Environmental Quality, Department of - Water Pollution Control	
R18-2-304.	FM-55	R18-14-104.	PM-283;	Part A.	
R18-2-306.	FM-55		FM-1434	R18-9-A801.	PM-2185
R18-2-306.01.	FM-55	R18-14-106.	PM-283;	R18-9-A802.	PM-2185
R18-2-306.02.	FN-55		FM-1434	R18-9-A803.	PM-2185
R18-2-306.03.	FN-55	R18-14-108.	PM-283;	Part B.	
R18-2-307.	FM-55		FM-1434	R18-9-B804.	PM-2185
R18-2-309.	FM-55	R18-14-109.	PM-283;	R18-9-B805.	PM-2185
R18-2-310.01.	FM-55		FM-1434	R18-9-B806.	PM-2185
R18-2-317.01.	FM-55	R18-14-110.	PM-283;	R18-9-B809.	PM-2185
R18-2-320.01.	FM-55		FM-1434	R18-9-B811.	PM-2185
R18-2-324.01.	FM-55	R18-14-111.	PM-283;	Part C.	
R18-2-501.	FM-55		FM-1434	R18-9-C812.	PM-2185
R18-2-513.	FM-55	R18-14-112.	PM-283;	R18-9-C813.	PM-2185
A14. Appendix 14.	FM-93		FM-1434	R18-9-C814.	PM-2185
R18-2-610.03.	FXM-1131	R18-14-113.	PR-283;	R18-9-C815.	PM-2185
R18-2-611.03.	FXM-1131		FR-1434	R18-9-C816.	PM-2185
Part B.		R18-14-202.	PM-283;	R18-9-C817.	PM-2185
R18-2-B1301.	FM-93		FM-1434	R18-9-C818.	PM-2185
R18-2-B1301.01.	FM-93	R18-14-301.	PM-283;	Part D.	
R18-2-B1302.	FM-93		FM-1434;	R18-9-D819.	PM-2185
R18-2-1407.	EXP-1686	R18-14-302.	PM-2244	R18-9-D821.	PM-2185
R18-2-1408.	EXP-1686	Environmental Quality, Department of - Environmental Reviews and Certification		R18-9-D822.	PM-2185
R18-2-1409.	EXP-1686			Part E.	
R18-2-1410.	EXP-1686	R18-5-103.	PM-2180	R18-9-E824.	PM-2185
R18-2-1411.	EXP-1686	Environmental Quality, Department of - Safe Drinking Water		R18-9-E825.	PM-2185
R18-2-1412.	EXP-1686			R18-9-E826.	PM-2185
R18-2-1413.	EXP-1686	R18-4-102.	PEM-448;	R18-9-E828.	PM-2185
R18-2-1414.	EXP-1686		FEM-1491	R18-9-E829.	PM-2185
R18-2-1415.	EXP-1686	R18-4-107.	PEM-448;	R18-9-E830.	PM-2185
R18-2-1416.	EXP-1686		FEM-1491	R18-9-E831.	PM-2185
R18-2-1417.	EXP-1686	R18-4-111.	PEM-448;	Part F.	
R18-2-1418.	EXP-1686		FEM-1491	R18-9-F832.	PM-2185
R18-2-1419.	EXP-1686	R18-4-117.	PEM-448;	R18-9-F833.	PM-2185
R18-2-1420.	EXP-1686		FEM-1491	R18-9-1101.	PM-671
R18-2-1421.	EXP-1686	Environmental Quality, Department of - Solid Waste Management		R18-9-1102.	PM-671
R18-2-1422.	EXP-1686			R18-9-1103.	PM-671
R18-2-1423.	EXP-1686	R18-13-401.	PM-872	R18-9-1104.	PM-671
R18-2-1424.	EXP-1686	R18-13-402.	PM-872	R18-9-1105.	PM-671
R18-2-1425.	EXP-1686	R18-13-403.	PN-872	R18-9-1106.	PM-671
R18-2-1426.	EXP-1686	R18-13-404.	PN-872	R18-9-1107.	PM-671
R18-2-1427.	EXP-1686	R18-13-405.	PN-872	Environmental Quality, Department of - Water Quality Standards	
R18-2-1428.	EXP-1686	R18-13-406.	PN-872	R18-11-112.	PM-391;
R18-2-1429.	EXP-1686	R18-13-501.	P#-872;		FM-2318
R18-2-1430.	EXP-1686		PN-872;	Appendix B.	FM-612
R18-2-1431.	EXP-1686		PM-872	Table B.	FM-612
R18-2-1432.	EXP-1686	R18-13-502.	P#-872	Forestry and Fire Management, Department of	
R18-2-1433.	EXP-1686	R18-13-503.	PN-872	R4-36-201.	FM-558
R18-2-1434.	EXP-1686	R18-13-504.	PN-872	R4-36-302.	FM-558
Table 2.	EXP-1686	R18-13-505.	PN-872		
R18-2-1435.	EXP-1686	R18-13-506.	PN-872		
Table 3.	EXP-1686				
R18-2-1436.	EXP-1686				

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

Exhibit A.	FM-558	R12-4-205.	FM-560	R9-28-1202.	PN-867;
R4-36-501.	XN-691	R12-4-206.	FM-560		EN-932;
R4-36-502.	XN-691	R12-4-207.	FM-560		TN-1862
R4-36-503.	XN-691	R12-4-208.	FM-560	R9-28-1203.	PN-867;
R4-36-504.	XN-691	R12-4-210.	FM-560		EN-932;
R4-36-505.	XN-691	R12-4-211.	FM-560	R9-28-1204.	TN-1862
Funeral Directors and Embalmers, Board of		R12-4-213.	FM-560		PN-867;
		R12-4-215.	FM-560		EN-932;
		R12-4-216.	FM-560		TN-1862
R4-12-101.	RC-177	R12-4-217.	FM-560	Table 1.	PN-867;
R4-12-106.	RC-177	R12-4-402.	FM-7		EN-932;
Table 1.	RC-177	R12-4-403.	FM-7	Table 2.	TN-1862
R4-12-108.	RC-177	R12-4-404.	FM-7		PN-867;
R4-12-202.	RC-177	R12-4-406.	FM-7		EN-932;
R4-12-204.	RC-177	R12-4-407.	FM-7	R9-28-1205.	TN-1862
R4-12-205.	RC-177	R12-4-409.	FM-7		PN-867;
R4-12-207.	RC-177	R12-4-410.	FM-7		EN-932;
R4-12-210.	RC-177	R12-4-411.	FM-7	R9-28-1206.	TN-1862
R4-12-211.	RC-177	R12-4-412.	FM-7		PN-867;
R4-12-212.	RC-177	R12-4-413.	FM-7		EN-932;
R4-12-301.	RC-177	R12-4-414.	FM-7	R9-28-1207.	TN-1862
R4-12-302.	RC-177	R12-4-417.	FM-7		PN-867;
R4-12-303.	RC-177	R12-4-418.	FM-7		EN-932;
R4-12-304.	RC-177	R12-4-420.	FM-7		TN-1862
R4-12-305.	RC-177	R12-4-421.	FM-7	Health Services, Department of - Communicable Diseases and Infes- tations	
R4-12-306.	RC-177	R12-4-422.	FM-7		
R4-12-307.	RC-177	R12-4-423.	FM-7	R9-6-501.	PM-2277
R4-12-311.	RC-177	R12-4-424.	FM-7	R9-6-502.	PM-2277
R4-12-312.	RC-177	R12-4-425.	FM-7	R9-6-503.	PM-2277
R4-12-413.	RC-177	R12-4-430.	FM-7	R9-6-504.	PM-2277
R4-12-414.	RC-177	R12-4-801.	XM-256	Health Services, Department of - Emergency Medical Services	
R4-12-415.	RC-177	R12-4-802.	XM-256		
R4-12-416.	RC-177	R12-4-1001.	FM-959	R9-25-506.	XN-993
R4-12-523.	RC-177	R12-4-1002.	FM-959	Health Services, Department of - Food, Recreational, and Institu- tional Sanitation	
R4-12-541.	RC-177	R12-4-1004.	FM-959		
R4-12-545.	RC-177	R12-4-1005.	FM-959	R9-8-119.	FR-488
R4-12-546.	RC-177	Health Care Cost Containment Sys- tem, Arizona (AHCCCS) - Adminis- tration		R9-8-901.	FN-488
R4-12-548.	RC-177			R9-8-902.	FN-488
R4-12-551.	RC-177	R9-22-101.	PM-1525	R9-8-903.	FN-488
R4-12-552.	RC-177	R9-22-201.	PM-1525	R9-8-904.	FN-488
R4-12-554.	RC-177	R9-22-207.	PM-1525	R9-8-905.	FN-488
R4-12-556.	RC-177	R9-22-209.	PM-1525	R9-8-906.	FN-488
R4-12-559.	RC-177	R9-22-212.	PM-1525	R9-8-907.	FN-488
R4-12-561.	RC-177	R9-22-213.	PM-1525	R9-8-908.	FN-488
R4-12-565.	RC-177	R9-22-215.	PM-1525	R9-8-909.	FN-488
R4-12-612.	RC-177	R9-22-712.35.	PM-1540	R9-8-910.	FN-488
R4-12-613.	RC-177	R9-22-712.61.	PM-1540	Table 9.1.	FN-488
R4-12-614.	RC-177	R9-22-712.71.	PM-1540	R9-8-911.	FN-488
R4-12-615.	RC-177	R9-22-712.90.	PM-1540	Table 9.2.	FN-488
R4-12-631.	RC-177			Table 9.3.	FN-488
R4-12-633.	RC-177			R9-8-912.	FN-488
Game and Fish Commission		Health Care Cost Containment Sys- tem, Arizona (AHCCCS) - Arizona Long-term Care System		R9-8-913.	FN-488
R12-4-114.	FM-679			Health Services, Department of - Health Care Institution Facility Data;	
R12-4-201.	FM-560	R9-28-1201.	PN-867;		
R12-4-202.	FM-560		EN-932;	R9-11-101.	PEM-1288
R12-4-203.	FM-560		TN-1862		
R12-4-204.	FM-560				

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

R9-11-201.	PEM-1288	R9-10-2307.	PN-1068; FN-1920	R9-10-2417.	PN-1068; FN-1920
R9-11-204.	PEM-1288				
R9-11-301.	PEM-1288	R9-10-2308.	PN-1068; FN-1920	R9-10-2418.	PN-1068; FN-1920
R9-11-304.	PEM-1288				
R9-11-305.	PEM-1288	R9-10-2309.	PN-1068; FN-1920	R9-10-2419.	PN-1068; FN-1920
R9-11-401.	PEM-1288				
R9-11-402.	PEM-1288	R9-10-2310.	PN-1068; FN-1920	Health Services, Department of - Human Remains	
R9-11-501.	PEM-1288	R9-10-2311.	PN-1068; FN-1920		
R9-11-502.	PEM-1288			Subchapter B. Funeral Industry	
Health Services, Department of - Health Care Institutions: Licensing		R9-10-2312.	PN-1068; FN-1920	R9-9B-101.	RC-177; PM-307; FM-1177
		R9-10-2313.	PN-1068; FN-1920		
Table 1.3.	FM-1920	R9-10-2314.	PN-1068; FN-1920	R9-9B-102.	RC-177; PM-307; FM-1177
R9-10-701.	PM-1068; FM-1920	R9-10-2315.	PN-1068; FN-1920	Table 1.1.	RC-177; PM-307; FM-1177
R9-10-702.	PM-1068; FM-1920	R9-10-2316.	PN-1068; FN-1920		
R9-10-703.	PM-1068; FM-1920	R9-10-2317.	PN-1068; FN-1920	R9-9B-103.	RC-177; PM-307; FM-1177
R9-10-706.	PM-1068; FM-1920	R9-10-2318.	PN-1068; FN-1920	R9-9B-104.	RC-177; PM-307; FM-1177
R9-10-707.	PM-1068; FM-1920	R9-10-2319.	PN-1068; FN-1920		
R9-10-708.	PM-1068; FM-1920	R9-10-2320.	PN-1068; FN-1920	R9-9B-201.	PN-307; FN-1177
R9-10-709.	PM-1068; FM-1920	R9-10-2401.	PN-1068; FN-1920	R9-9B-202.	PN-307; FN-1177
R9-10-711.	PM-1068; FM-1920	R9-10-2402.	PN-1068; FN-1920	R9-9B-203.	RC-177; PM-307; FM-1177
R9-10-712.	PM-1068; FM-1920	R9-10-2403.	PN-1068; FN-1920	R9-9B-204.	RC-177; PM-307; FM-1177
R9-10-716.	PM-1068; FM-1920	R9-10-2404.	PN-1068; FN-1920		
R9-10-718.	PM-1068; FM-1920	R9-10-2405.	PN-1068; FN-1920	R9-9B-205.	RC-177; PM-307; FM-1177
R9-10-722.	PM-1068; FM-1920	R9-10-2406.	PN-1068; FN-1920	R9-9B-206.	RC-177; PR-307; PN-307; FR-1177; FN-1177
R9-10-2002.	FM-504	R9-10-2407.	PN-1068; FN-1920		
R9-10-2003.	FM-504	R9-10-2408.	PN-1068; FN-1920	R9-9B-207.	RC-177; PR-307; PN-307; FR-1177; FN-1177
R9-10-2005.	F#-504; FM-504	R9-10-2409.	PN-1068; FN-1920		
R9-10-2006.	F#-504; FM-504	R9-10-2410.	PN-1068; FN-1920	R9-9B-208.	RC-177; PR-307; FR-1177
R9-10-2007.	F#-504; FM-504	R9-10-2411.	PN-1068; FN-1920		
R9-10-2008.	F#-504	R9-10-2412.	PN-1068; FN-1920	R9-9B-209.	RC-177; PR-307; FR-1177
R9-10-2009.	FM-504	R9-10-2413.	PN-1068; FN-1920		
R9-10-2301.	PN-1068; FN-1920	R9-10-2414.	PN-1068; FN-1920	R9-9B-301.	RC-177; PM-307; FM-1177
R9-10-2302.	PN-1068; FN-1920	R9-10-2415.	PN-1068; FN-1920	R9-9B-302.	RC-177; PM-307; FM-1177
R9-10-2303.	PN-1068; FN-1920	R9-10-2416.	PN-1068; FN-1920	R9-9B-303.	PN-307; FN-1177
R9-10-2304.	PN-1068; FN-1920				
R9-10-2305.	PN-1068; FN-1920				
R9-10-2306.	PN-1068; FN-1920				

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

R9-9B-304.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-322.	RC-177; PR-307; FR-1177	R9-16-215. R9-16-301. R9-16-302. R9-16-303. R9-16-304. R9-16-305. R9-16-306. R9-16-307. R9-16-308. R9-16-309. R9-16-310. R9-16-312. R9-16-314.	FEM-521 FM-511 FM-511 FM-511 FM-511 FM-511 FM-511 FR-511 FM-511 FM-511 FM-511 FM-511 FM-511
R9-9B-305.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-323.	RC-177; PR-307; FR-1177		
R9-9B-306.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-324.	RC-177; PR-307; FR-1177		
R9-9B-307.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-325.	RC-177; PR-307; FR-1177		
R9-9B-308.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-326.	RC-177; PR-307; FR-1177		
R9-9B-309.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-401.	RC-177; PR-307; PN-307; FR-1177; FN-1177	Table 3.1.	
R9-9B-310.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-402.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-16-315. R9-16-316. R9-16-501. R9-16-502. R9-16-503. R9-16-504. R9-16-505. R9-16-507.	FM-511 FM-511 FEM-521 FEM-521 FEM-521 FEM-521 FEM-521 FEM-521
R9-9B-311.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-403.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
R9-9B-312.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-404.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
R9-9B-313.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-405.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
R9-9B-314.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-406.	RC-177; PR-307; PN-307; FR-1177; FN-1177	Health Services, Department of - Radiation Control	
R9-9B-315.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-407.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-7-1302. R9-7-1401. R9-7-1402. R9-7-1403. R9-7-1404. R9-7-1405. R9-7-1406. R9-7-1407. R9-7-1408. R9-7-1409. R9-7-1410. R9-7-1411. R9-7-1412. R9-7-1413. R9-7-1414.	FEM-721 FE#-721; FEM-721 FE#-721; FEM-721 FER-721; FEN-721 FER-721; FE#-721; FEM-721 FER-721; FEN-721 FER-721; FE#-721; FEM-721 FER-721; FE#-721; FEM-721
R9-9B-316.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-408.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
R9-9B-317.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-409.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
R9-9B-318.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-410.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
R9-9B-319.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-411.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
R9-9B-320.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-412.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
R9-9B-321.	RC-177; PR-307; PN-307; FR-1177; FN-1177	R9-9B-413.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
		R9-9B-414.	RC-177; PR-307; PN-307; FR-1177; FN-1177		
		Health Services, Department of - Occupational Licensing			
		R9-16-201.	FEM-521		
		R9-16-202.	FEM-521		
		R9-16-203.	FEM-521		
		R9-16-205.	FEM-521		
		R9-16-207.	FEM-521		
		R9-16-208.	FEM-521		
		R9-16-209.	FEM-521		
		R9-16-211.	FEM-521		
		R9-16-214.	FEM-521		

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

R9-7-1415.	FER-721; FE#-721; FEM-721	R9-19-206. R9-19-207. R9-19-208.	PEM-2336 PEM-2336 PEM-2336	R19-1-325. R19-1-403. R19-1-405.	PM-785 PM-785 PM-785
R9-7-1416.	FER-721; FE#-721; FEM-721	R9-19-210. R9-19-211. R9-19-212.	PEM-2336 PEM-2336 PEM-2336	R19-1-502. R19-1-604. R19-1-801.	PM-785 PM-785 PM-785
R9-7-1418.	FER-721	R9-19-302.	PEM-2336	R19-1-802.	PR-785
R9-7-1421.	FER-721	R9-19-303.	PEM-2336	R19-1-804.	PM-785
R9-7-1422.	FER-721	R9-19-310.	PEM-2336	Lottery Commission, Arizona State	
R9-7-1423.	FER-721	R9-19-315.	PM-1909	R19-3-204.	PM-1025
R9-7-1425.	FE#-721	R9-19-316.	PEM-2336	R19-3-801.	PN-1025
R9-7-1426.	FER-721	R9-19-317.	PEM-2336	R19-3-802.	PN-1025
R9-7-1427.	FER-721	Insurance and Financial Institutions, Department of - Insurance Division		R19-3-803.	PN-1025
R9-7-1429.	FER-721	R20-6-101.	FM-637	R19-3-804.	PN-1025
R9-7-1433.	FER-721	R20-6-209.	FM-645	R19-3-805.	PN-1025
R9-7-1434.	FE#-721	R20-6-601.	FM-637	R19-3-806.	PN-1025
R9-7-1435.	FER-721	R20-6-602.	FM-637	R19-3-807.	PN-1025
R9-7-1436.	FE#-721	R20-6-1902.	FM-637	R19-3-808.	PN-1025
R9-7-1437.	FER-721	Insurance and Financial Institutions, Department of - Financial Institutions Division - Real Estate Appraisal		R19-3-809.	PN-1025
R9-7-1438.	FE#-721	R4-46-107.	FR-5	R19-3-810.	PN-1025
R9-7-1439.	FE#-721	R4-46-201.	PM-174; FM-1167	R19-3-811.	PN-1025
R9-7-1440.	FE#-721	Insurance and Financial Institutions, Department of - Financial Institutions Division		R19-3-812.	PN-1025
R9-7-1441.	FE#-721	Table A.	FM-123	R19-3-813.	PN-1025
R9-7-1442.	FER-721	R20-4-602.	FM-123	Manufactured Housing, Board of	
R9-7-1443.	FER-721	Investment, State Board of		R4-34-101.	PM-551
R9-7-1444.	FER-721	R2-13-204.	PEM-1715	R4-34-102.	PM-551
Appendix A.	FER-721	Liquor Licenses and Control, Department of		R4-34-201.	PM-551
Appendix B.	FER-721	R19-1-101.	PM-785	R4-34-204.	PM-551
Appendix C.	FE#-721	R19-1-102.	PM-785	R4-34-401.	PM-551
Appendix D.	FE#-721	R19-1-103.	PM-785	R4-34-402.	PM-551
Health Services, Department of - Sober Living Homes		R19-1-105.	PM-785	R4-34-403.	PM-551
R9-12-101.	PEM-1668	R19-1-110.	PM-785	R4-34-603.	PM-551
R9-12-103.	PEM-1668	R19-1-202.	PM-785	R4-34-606.	PM-551
R9-12-104.	PEM-1668	R19-1-205.	PM-785	R4-34-701.	PM-551
R9-12-105.	PEM-1668	R19-1-206.	PM-785	R4-34-802.	PM-551
R9-12-106.	PEM-1668	R19-1-207.	PM-785	Medical Board, Arizona	
R9-12-107.	PEM-1668	R19-1-209.	PM-785	R4-16-201.	PM-1371
Table 1.1.	PEM-1668	R19-1-304.	PM-785	R4-16-201.1.	PM-1371
Table 1.2.	PEN-1668	R19-1-305.	PM-785	R4-16-201.2.	PN-1371
R9-12-201.	PEM-1668	R19-1-307.	PM-785	R4-16-201.3.	PN-1371
R9-12-202.	PEM-1668	R19-1-317.	PM-785	R4-16-204.	PN-1371
R9-12-203.	PEM-1668	R19-1-318.	PR-785	R4-16-204.1.	PN-1371
R9-12-204.	PEM-1668	R19-1-319.	PM-785	R4-16-205.	PM-1371
R9-12-205.	PEM-1668	R19-1-320.	PM-785	Table 1.	PM-1371
R9-12-206.	PE#-1668; PEN-1668	R19-1-321.	PM-785	Osteopathic Examiners in Medicine and Surgery, Board of	
R9-12-207.	PE#-1668; PEM-1668	R19-1-324.	PM-785	R4-22-106.	PM-1407
R9-12-208.	PE#-1668; PEM-1668			R4-22-202.	PM-1407
Health Services, Department of - Vital Records and Statistics				R4-22-207.	PM-1407
R9-19-101.	PEM-2336			R4-22-208.	PN-1407
R9-19-105.	PM-1909			R4-22-301.	PM-1407
R9-19-201.	PEM-2336			R4-22-302.	PM-1407
R9-19-205.	PEM-2336			R4-22-304.	PM-1407
				R4-22-401.	PM-1407
				R4-22-402.	PM-1407

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

R4-22-501.	PM-1407	R19-2-122.	PM-2015	Retirement System Board, State	
R4-22-503.	PM-1407	R19-2-123.	PM-2015	R2-8-104.	FM-605
R4-22-504.	PM-1407	R19-2-124.	PM-2015	R2-8-301.	PM-921;
R4-22-505.	PM-1407	R19-2-125.	PM-2015		FM-1803
R4-22-506.	PM-1407	R19-2-126.	PM-2015	R2-8-304.	PM-921;
R4-22-507.	PM-1407	R19-2-201.	PM-2015		FM-1803
R4-22-508.	PM-1407	R19-2-202.	PM-2015	R2-8-403.	FM-608
Pharmacy, Board of		R19-2-204.	PM-2015	R2-8-804.	PM-921;
		R19-2-205.	PM-2015		FM-1803
R4-23-205.	FM-1649	R19-2-401.	PM-2065	R2-8-807.	PM-921;
R4-23-407.	PM-715;	R19-2-402.	PM-2065		FM-1803
	FM-1643	R19-2-403.	PM-2065	R2-8-903.	FM-610
R4-23-410.	FM-1649	R19-2-404.	PM-2065	Revenue, Department of -	
R4-23-411.	FM-471	R19-2-405.	PM-2065	Unclaimed Property	
R4-23-670.	FM-1649	R19-2-406.	PM-2065	R15-8-101.	PN-2137
Physicians Medical Board, Naturo-		R19-2-407.	PM-2065	R15-8-102.	PN-2137
pathic		R19-2-408.	PM-2065	R15-8-103.	PN-2137
R4-18-101.	TM-840	R19-2-409.	PM-2065	R15-8-104.	PN-2137
R4-18-603.	FM-1285	R19-2-410.	PM-2065		
Psychologist Examiners, Board of		R19-2-411.	PM-2065	Technical Registration, Board of	
		R19-2-412.	PM-2065	R4-30-284.	SPM-1033;
R4-26-101.	PM-831	R19-2-413.	PM-2065		FM-2309
R4-26-207.	PM-831	R19-2-414.	PM-2065	R4-30-301.	SPM-1033;
Table 1.	PM-831	R19-2-415.	PM-2065		FM-2309
R4-26-405.	PM-831	R19-2-416.	PM-2065	R4-30-305.	SPN-1033;
R4-26-409.	PM-831	R19-2-417.	PM-2065		FN-2309
R4-26-417.	PM-831	R19-2-418.	PM-2065	Transportation, Department of -	
Table 2.	PN-831	R19-2-419.	PM-2065	Commercial Programs	
Public Safety, Department of -		R19-2-420.	PM-2065	R17-5-401.	PEM-1607
School Buses		R19-2-501.	PM-2065	R17-5-402.	PEM-1607
R13-13-301.	FN-925	R19-2-502.	PM-2065	R17-5-601.	PM-1745
R13-13-302.	FN-925	R19-2-503.	PM-2065	R17-5-602.	PM-1745
R13-13-303.	FN-925	R19-2-504.	PM-2065	R17-5-603.	PM-1745
R13-13-304.	FN-925	R19-2-505.	PM-2065	R17-5-604.	PM-1745
Racing Commission, Arizona		R19-2-506.	PM-2065	R17-5-605.	PM-1745
R19-2-101.	PM-2015	R19-2-507.	PM-2065	R17-5-606.	PM-1745
R19-2-102.	PM-2015	R19-2-508.	PM-2065	R17-5-607.	PM-1745
R19-2-103.	PM-2015	R19-2-509.	PM-2065	R17-5-608.	PR-1745
R19-2-104.	PM-2015	R19-2-510.	PM-2065	R17-5-609.	PM-1745
R19-2-105.	PM-2015	R19-2-511.	PM-2065	R17-5-610.	PM-1745
R19-2-106.	PM-2015	R19-2-512.	PM-2065	R17-5-611.	PM-1745
R19-2-107.	PM-2015	R19-2-513.	PM-2065	R17-5-612.	PM-1745
R19-2-108.	PM-2015	R19-2-514.	PM-2065	R17-5-613.	PM-1745
R19-2-109.	PM-2015	R19-2-515.	PM-2065	R17-5-614.	PM-1745
R19-2-110.	PM-2015	R19-2-516.	PM-2065	R17-5-615.	PM-1745
R19-2-111.	PM-2015	R19-2-517.	PM-2065	R17-5-616.	PM-1745
R19-2-112.	PM-2015	R19-2-518.	PM-2065	R17-5-617.	PM-1745
R19-2-113.	PM-2015	R19-2-519.	PM-2065	R17-5-618.	PM-1745
R19-2-114.	PM-2015	R19-2-520.	PM-2065	R17-5-619.	PM-1745
R19-2-115.	PM-2015	R19-2-523.	PM-2065	R17-5-620.	PM-1745
R19-2-116.	PM-2015	Table 1.	PM-2065	R17-5-621.	PM-1745
R19-2-117.	PM-2015	Table 2.	PM-2065	R17-5-622.	PM-1745
R19-2-118.	PM-2015	Table 3.	PM-2065	R17-5-623.	P#-1745;
R19-2-119.	PM-2015	Table 4.	PM-2065		PN-1745;
R19-2-120.	PM-2015	Table 5.	PM-2065		PM-1745
R19-2-121.	PM-2015	Table 6.	PM-2065	R17-5-624.	PN-1745;
		Table 7.	PM-2065		PM-1745

RULEMAKING ACTIVITY INDEX

Volume 32, Issue 40, October 2, 2026

R17-5-701.	PR-1745
R17-5-702.	PR-1745
R17-5-706.	P#-1745

**Transportation, Department of -
Title, Registration, and Driver
Licenses**

R17-4-351.	FM-683
------------	--------

OTHER NOTICES AND PUBLIC RECORDS INDEX

Volume 32, Issue 40, October 2, 2026

OTHER NOTICES AND PUBLIC RECORDS INDEX

Other legal notices required to be published under the Administrative Procedure Act, such as Rulemaking Docket Openings, are included in this Index by volume page number. Notices of Agency Ombudsman, Substantive Policy Statements, Proposed Delegation Agreements, and other applicable public records as required by law are also listed in this Index by volume page number.

THIS INDEX INCLUDES OTHER NOTICE ACTIVITY THROUGH ISSUE 39 OF VOLUME 32.

**Agency Guidance Document,
Notices of**

Health Services, Department of;
Pages 374-375,
Pages 696-697

Agency Ombudsman, Notices of

Child Safety, Department of;
Page 230

Dental Examiners, State Board of;
Page 202

Health Services, Department of;
Page 941

Medical Board, Arizona;
Page 1776

Osteopathic Examiners in Medicine
and Surgery, Board of;
Page 1776

Physical Therapy, Board of;
Page 269

Psychologist Examiners, Board of;
Page 269

Transportation, Department of;
Page 130

Water Resources, Department of;
Page 230

Governor's Office

**Governor's Regulatory Review
Council**

Notices of Action Taken at Monthly
Meetings and Study Sessions:
Pages 544-546,
Pages 708-709,
Pages 983-984,
Pages 1279-1280
Page 1472
Pages 1708-1709
Pages 1889-1890
Pages 2387-2388

**Final Delegation Agreement,
Notices of**

Health Services, Department of;
Pages 896-898

**Proposed Delegation Agreement,
Notices of**

Environmental Quality, Department
of;

Pages 231-232,

Pages 398-401,

Pages 844-845,

Pages 899-900,

Pages 1043-1044;

Pages 1307-1312;

Pages 1349-1350

Health Services, Department of;
Pages 454-455

Public Information, Notices of

Agriculture, Department of - Animal
Services Division;

Page 456

Page 1500

Agriculture, Department of - Environ-
mental Services Division;
Page 1582

Arizona, Industrial Commission of;
Page 2147

Dental Examiners, State Board of;
Page 203

Environmental Quality, Department
of;

Pages 131-141,

Page 1006

Pages 1454-1455

Environmental Quality, Department
of - Pesticides and Water Pollu-
tion Control;

Pages 1384-1386

Environmental Quality, Department
of - Safe Drinking Water;

Pages 846-847

Environmental Quality, Department
of - Solid Waste Management;

Pages 967-968

Gaming, Department of
Page 2363

Health Care Cost Containment Sys-
tem, Arizona (AHCCCS);

Pages 1817-1827

Health Services, Department of;
Page 901

Office of the Governor;

Page 402

Page 902

Page 1455

Pages 1500-1501

Page 1616

Pages 2363-2364

Physical Therapy, Board of;
Pages 1581-1582

Real Estate Department, State;
Page 1045

**Rulemaking Docket Opening,
Notices of**

Accountancy, Board of;

4 A.A.C. 1;

Pages 267-268

Pages 1688-1690

Administration, Department of - State
Procurement Office;

2 A.A.C. 7;

Pages 1496-1497

Agriculture, Department of - Environ-
mental Services Division;

3 A.A.C. 3;

Pages 199-200

Agriculture, Department of - Plant
Services Division;

3 A.A.C. 4;

Pages 1864-1866

Agriculture, Department of - Weights
and Measures Services Division;

3 A.A.C. 7;

Pages 1990-1991

Arizona, Industrial Commission of;

20 A.A.C. 5;

Pages 1452-1453

Pages 1991-1992

Barbering and Cosmetology Board;

4 A.A.C. 10;

Pages 452-453

Clean Elections Commission, Citi-
zens;

2 A.A.C. 20;

Pages 266-267;

Pages 694-695

Dental Examiners, State Board of;
4 A.A.C. 11;

OTHER NOTICES AND PUBLIC RECORDS INDEX

Volume 32, Issue 40, October 2, 2026

Pages 1143-1144 Pages 2361-2362	Health Services, Department of - Child Care Facilities; 9 A.A.C. 5; Pages 1347-1348	19 A.A.C. 1; Pages 811-812
Environmental Quality, Department of - Administration; 18 A.A.C. 1; Pages 1448-1449	Health Services, Department of - Child Care Group Homes; 9 A.A.C. 3; Pages 1447-1448	Lottery Commission, Arizona State 19 A.A.C. 3; Pages 1041-1042
Environmental Quality, Department of - Air Pollution Control; 18 A.A.C. 2; Pages 588-589 Pages 1261-1262 Pages 1497-1498	Health Services, Department of - Communicable Diseases and Infestations; 9 A.A.C. 6; Pages 2144-2145	Manufactured Housing, Board of; 4 A.A.C. 34; Pages 587-588
Environmental Quality, Department of - Emergency Planning and Hazardous Materials; 18 A.A.C. 18; Pages 1498-1499	Health Services, Department of - Food, Recreational, and Institu- tional Sanitation; 9 A.A.C. 8; Pages 2106-2107	Medical Board, Arizona; 4 A.A.C. 16; Pages 1379-1380
Environmental Quality, Department of - Environmental Reviews and Certification; 18 A.A.C. 5; Pages 533-534 Pages 1449-1450	Health Services, Department of - Health Care Institution Facility Data; 9 A.A.C. 11; Pages 939-940	Pharmacy, Board of; 4 A.A.C. 23; Pages 764-765
Environmental Quality, Department of - Hazardous Waste Manage- ment; 18 A.A.C. 8; Pages 842-843	Health Services, Department of - Health Care Institutions: Licens- ing; 9 A.A.C. 10; Pages 1144-1145; Pages 1304-1305; Pages 2107-2111	Private Postsecondary Education, Board for; 4 A.A.C. 39; Pages 1720-1721
Environmental Quality, Department of - Permit and Compliance Fees; 18 A.A.C. 14; Pages 1451-1452	Health Services, Department of - Health Care Institutions: Occupa- tional Licensing; 9 A.A.C. 16; Pages 1815-1816 Pages 1867-1868	Psychologist Examiners, Board of; 4 A.A.C. 26; Pages 841-842
Environmental Quality, Department of - Solid Waste Management; 18 A.A.C. 13; Pages 1721-1722	Health Services, Department of - Radiation Control; 9 A.A.C. 7; Pages 1577-1578	Public Safety, Department of; 13 A.A.C. 13; Pages 1305-1306
Environmental Quality, Department of - Underground Storage Tanks; 18 A.A.C. 12; Pages 1145-1146	Health Services, Department of - Sober Living Homes; 9 A.A.C. 12; Pages 892-893	Racing Commission, Arizona; 19 A.A.C. 2; Pages 2111-2113
Environmental Quality, Department of - Water Pollution Control; 18 A.A.C. 9; Pages 1450-1451	Health Services, Department of - Vital Records and Statistics; 9 A.A.C. 19; Pages 1613-1615	Retirement System Board, State; 2 A.A.C. 8; Pages 938-939
Health Care Cost Containment Sys- tem, Arizona (AHCCCS) - Admin- istration; 9 A.A.C. 22; Pages 1578-1580	Insurance and Financial Institutions, Department of - Financial Institu- tions Division - Real Estate Appraisal; 4 A.A.C. 46; Pages 200-201	Revenue, Department of - Unclaimed Property; 15 A.A.C. 8; Pages 2145-2146
Health Care Cost Containment Sys- tem, Arizona (AHCCCS) - Arizona Long-term Care System; 9 A.A.C. 28; Pages 893-894	Liquor Licenses and Control, Depart- ment of	Transportation, Department of - Administration; 17 A.A.C. 1; Pages 1380-1381
		Transportation, Department of - Commercial Programs; 17 A.A.C. 5; Pages 1381-1383
		Water Resources, Arizona Depart- ment of; 12 A.A.C. 15; Pages 894-895
		Substantive Policy Statement, Notices of
		Agriculture, Department of - Animal Services Division; Pages 1502-1503
		Agriculture, Department of - Plant Services Division;

Arizona Administrative Register
OTHER NOTICES AND PUBLIC RECORDS INDEX
Volume 32, Issue 40, October 2, 2026

Pages 1584-1585

Arizona, Industrial Commission of;
Page 1585

Environmental Quality, Department
of;
Page 1314
Pages 1778-1779
Pages 2365-2366

Insurance and Financial Institutions,
Department of;
Pages 293-294;
Page 903
Pages 1869-1870

Physical Therapy, Board of;
Pages 1583-1584;
Pages 1617-1620;
Pages 1828-1829

Psychologist Examiners, Board of;
Pages 376-377;
Pages 1313-1314

Real Estate, State Department of;
Page 767

Arizona Administrative Register
RULES EFFECTIVE DATES CALENDAR

Volume 32, Issue 40, October 2, 2026

RULES EFFECTIVE DATES CALENDAR

A.R.S. § 41-1032(A), as amended by Laws 2002, Ch. 334, § 8 (effective August 22, 2002), states 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 notice's preamble for effective dates.

January

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

February

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

March

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

Arizona Administrative Register
RULES EFFECTIVE DATES CALENDAR

April

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

May

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

June

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

Arizona Administrative Register
RULES EFFECTIVE DATES CALENDAR

July

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

August

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

September

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

Arizona Administrative Register
RULES EFFECTIVE DATES CALENDAR

October

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

November

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

December

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

Arizona Administrative Register
RULES EFFECTIVE DATES CALENDAR

REGISTER DEADLINES

The Secretary of State's Office publishes the *Register* weekly. There is a three-week delay between the deadline date to file a notice and the *Register* date in which the notice is published. The weekly deadline dates are listed in the first column and issue dates are provided in the second column. Listed in the third column 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*. Governor Regulatory Review Council meetings and *Register* deadlines do not correlate.

Deadline Date Friday, 5:00 p.m.	<i>Register</i> Publication Date	Oral Proceeding may be scheduled on or after
March 13, 2026	April 3, 2026	May 4, 2026
March 20, 2026	April 10, 2026	May 11, 2026
March 27, 2026	April 17, 2026	May 18, 2026
April 3, 2026	April 24, 2026	May 26, 2026 Later date due to a holiday
April 10, 2026	May 1, 2026	June 1, 2026
April 17, 2026	May 8, 2026	June 8, 2026
April 24, 2026	May 15, 2026	June 15, 2026
May 1, 2026	May 22, 2026	June 22, 2026
May 8, 2026	May 29, 2026	June 29, 2026
May 15, 2026	June 5, 2026	July 6, 2026
May 22, 2026	June 12, 2026	July 13, 2026
May 29, 2026	June 19, 2026	July 20, 2026
June 5, 2026	June 26, 2026	July 27, 2026
June 12, 2026	July 3, 2026	August 3, 2026
June 19, 2026	July 10, 2026	August 10, 2026
June 26, 2026	July 17, 2026	August 17, 2026
July 3, 2026	July 24, 2026	August 24, 2026
July 10, 2026	July 31, 2026	August 31, 2026
July 17, 2026	August 7, 2026	September 8, 2026 Later date due to a holiday
July 24, 2026	August 14, 2026	September 14, 2026
July 31, 2026	August 21, 2026	September 21, 2026
August 7, 2026	August 28, 2026	September 28, 2026
August 14, 2026	September 4, 2026	October 5, 2026
August 21, 2026	September 11, 2026	October 13, 2026 Later date due to a holiday
August 28, 2026	September 18, 2026	October 19, 2026
September 4, 2026	September 25, 2026	October 26, 2026
September 11, 2026	October 2, 2026	November 2, 2026
September 18, 2026	October 9, 2026	November 9, 2026
September 25, 2026	October 16, 2026	November 16, 2026
October 2, 2026	October 23, 2026	November 23, 2026
October 9, 2026	October 30, 2026	November 30, 2026
October 16, 2026	November 6, 2026	December 7, 2026
October 23, 2026	November 13, 2026	December 14, 2026

GOVERNOR'S REGULATORY REVIEW COUNCIL DEADLINES

Volume 32, Issue 40, October 2, 2026

GOVERNOR'S REGULATORY REVIEW COUNCIL DEADLINES

MEETING DATES ARE SUBJECT TO CHANGE

The deadlines provided in the following table apply to all Five-Year Review Reports and any rulemaking notice submitted for review to the Governor's Regulatory Review Council (Council). The Office publishes these deadlines under A.R.S. § [41-1013](#)(B)(15).

Council meetings and *Register* deadlines do not correlate.

All rulemaking notices submitted for review 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 the Council's [website](#).

File Number: M25-79

DEADLINE FOR PLACEMENT ON AGENDA Materials must be submitted by 5 p.m. on dates listed in this column as a deadline for placement on a particular agenda. Placement on a par- ticular agenda is not guaran- teed.	DEADLINE FOR FINAL MATERIALS SUBMITTED TO COUNCIL	DATE OF COUNCIL STUDY SESSION	DATE OF COUNCIL MEETING
Tuesday March 24, 2026	Tuesday April 21, 2026	Tuesday April 28, 2026	Tuesday May 5, 2026
Tuesday April 21, 2026	Tuesday May 19, 2026	Wednesday May 27, 2026	Tuesday June 2, 2026
Tuesday May 19, 2026	Tuesday June 23, 2026	Tuesday June 30, 2026	Tuesday July 7, 2026
Tuesday June 23, 2026	Tuesday July 21, 2026	Tuesday July 28, 2026	Tuesday August 4, 2026
Tuesday July 21, 2026	Tuesday August 18, 2026	Tuesday August 25, 2026	Tuesday September 1, 2026
Tuesday August 18, 2026	Tuesday September 22, 2026	Tuesday September 29, 2026	Tuesday October 6, 2026
Tuesday September 22, 2026	Tuesday October 20, 2026	Tuesday October 27, 2026	Tuesday November 3, 2026
Tuesday October 20, 2026	Tuesday November 17, 2026	Tuesday November 24, 2026	Tuesday December 1, 2026
Tuesday November 17, 2026	Tuesday December 22, 2026	Tuesday December 29, 2026	Tuesday January 5, 2027
Tuesday December 22, 2026	Tuesday January 19, 2027	Tuesday January 26, 2027	Tuesday February 2, 2027