

State of Arizona
Senate
Fifty-fifth Legislature
First Regular Session
2021

SENATE BILL 1824

AN ACT

AMENDING TITLE 8, CHAPTER 4, ARTICLE 4, ARIZONA REVISED STATUTES, BY ADDING SECTION 8-512.02; AMENDING TITLE 20, CHAPTER 1, ARTICLE 1, ARIZONA REVISED STATUTES, BY ADDING SECTION 20-126; AMENDING TITLE 23, CHAPTER 2, ARTICLE 1, ARIZONA REVISED STATUTES, BY ADDING SECTION 23-206; AMENDING SECTION 30-654, ARIZONA REVISED STATUTES; AMENDING TITLE 36, CHAPTER 1, ARTICLE 2, ARIZONA REVISED STATUTES, BY ADDING SECTIONS 36-147 AND 36-148; AMENDING SECTIONS 36-446.02, 36-446.04, 36-557, 36-591, 36-592, 36-594 AND 36-672, ARIZONA REVISED STATUTES; AMENDING TITLE 36, CHAPTER 6, ARIZONA REVISED STATUTES, BY ADDING ARTICLE 4.2; AMENDING SECTIONS 36-694, 36-694.01 AND 36-1201, ARIZONA REVISED STATUTES; AMENDING TITLE 36, ARIZONA REVISED STATUTES, BY ADDING CHAPTER 31; REPEALING SECTION 41-3021.11, ARIZONA REVISED STATUTES; AMENDING TITLE 41, CHAPTER 27, ARTICLE 2, ARIZONA REVISED STATUTES, BY ADDING SECTION 41-3022.26; AMENDING SECTION 46-452.02, ARIZONA REVISED STATUTES; APPROPRIATING MONIES; RELATING TO HEALTH BUDGET RECONCILIATION.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Title 8, chapter 4, article 4, Arizona Revised Statutes,
3 is amended by adding section 8-512.02, to read:

4 8-512.02. Comprehensive health plan expenditure authority
5 fund; reversion

6 A. THE DEPARTMENT SHALL ESTABLISH AND MAINTAIN A COMPREHENSIVE
7 HEALTH PLAN EXPENDITURE AUTHORITY FUND, WHICH IS A SEPARATE FUND TO
8 DISTINGUISH THE DEPARTMENT'S REVENUES AND THE DEPARTMENT'S EXPENDITURES
9 PURSUANT TO SECTION 8-512 FROM OTHER PROGRAMS THAT ARE FUNDED AND
10 ADMINISTERED BY THE DEPARTMENT. THE FUND SHALL BE USED TO PAY
11 ADMINISTRATIVE AND PROGRAM COSTS ASSOCIATED WITH PROVIDING COMPREHENSIVE
12 MEDICAL CARE, DENTAL CARE AND BEHAVIORAL HEALTH SERVICES PURSUANT TO
13 SECTION 8-512. THE COMPREHENSIVE HEALTH PLAN EXPENDITURE AUTHORITY FUND
14 CONSISTS OF:

15 1. MONIES PAID BY THE ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
16 ADMINISTRATION PURSUANT TO THE CONTRACT.

17 2. AMOUNTS PAID BY THIRD-PARTY PAYORS.

18 3. GIFTS, DONATIONS AND GRANTS FROM ANY SOURCE.

19 4. INTEREST ON MONIES DEPOSITED IN THE COMPREHENSIVE HEALTH PLAN
20 EXPENDITURE AUTHORITY FUND.

21 B. ALL MONIES FROM CAPITATED PAYMENTS IN THE COMPREHENSIVE HEALTH
22 PLAN EXPENDITURE AUTHORITY FUND THAT ARE UNEXPENDED AND UNENCUMBERED AT
23 THE END OF THE FISCAL YEAR REVERT TO THE STATE GENERAL FUND ON OR BEFORE
24 JUNE 30 OF THE FOLLOWING FISCAL YEAR. THE TRANSFER AMOUNT MAY BE ADJUSTED
25 TO PAY NONMEDICAID CLAIMS INCURRED BY THE DEPARTMENT.

26 Sec. 2. Title 20, chapter 1, article 1, Arizona Revised Statutes,
27 is amended by adding section 20-126, to read:

28 20-126. Department; annual medical loss ratio report;
29 posting; definition

30 A. ON OR BEFORE MARCH 31 OF EACH YEAR, THE DEPARTMENT SHALL PREPARE
31 AN ANNUAL REPORT ON THE MEDICAL LOSS RATIO FOR EACH DENTAL INSURER DOING
32 BUSINESS IN THIS STATE. IN CALCULATING THE MEDICAL LOSS RATIO, THE
33 DEPARTMENT SHALL USE DATA SUBMITTED BY DENTAL INSURERS IN EXISTING
34 REQUIRED REGULATORY FILINGS, INCLUDING ALL OF THE FOLLOWING:

35 1. ADJUSTED INCURRED ANNUAL DENTAL CLAIMS IN THIS STATE.

36 2. ANNUAL DENTAL INSURANCE PREMIUMS EARNED IN THIS STATE.

37 3. ANNUAL INCURRED FEDERAL AND STATE TAXES, LICENSING FEES AND
38 REGULATORY FEES ON DENTAL PREMIUMS IN THIS STATE.

39 B. THE DEPARTMENT SHALL POST THE CALCULATED ANNUAL MEDICAL LOSS
40 RATIO FOR EACH DENTAL INSURER ON THE DEPARTMENT'S WEBSITE.

41 C. FOR THE PURPOSES OF THIS SECTION, "DENTAL INSURER" MEANS A
42 DENTAL SERVICE CORPORATION PURSUANT TO CHAPTER 4, ARTICLE 3 OF THIS TITLE,
43 HEALTH CARE SERVICES ORGANIZATION PURSUANT TO CHAPTER 4, ARTICLE 9 OF THIS
44 TITLE, DISABILITY INSURER PURSUANT TO CHAPTER 6, ARTICLE 4 OF THIS TITLE

1 OR GROUP OR BLANKET DISABILITY INSURER PURSUANT TO CHAPTER 6, ARTICLE 5 OF
2 THIS TITLE THAT OFFERS, ISSUES OR RENEWS A CONTRACT, EVIDENCE OF COVERAGE
3 OR POLICY COVERING DENTAL SERVICES.

4 Sec. 3. Title 23, chapter 2, article 1, Arizona Revised Statutes,
5 is amended by adding section 23-206, to read:

6 23-206. Employers; accommodations required

7 IF AN EMPLOYER RECEIVES NOTICE FROM AN EMPLOYEE THAT THE EMPLOYEE'S
8 SINCERELY HELD RELIGIOUS BELIEFS, PRACTICES OR OBSERVANCES PREVENT THE
9 EMPLOYEE FROM TAKING THE COVID-19 VACCINATION, THE EMPLOYER SHALL PROVIDE
10 A REASONABLE ACCOMMODATION UNLESS THE ACCOMMODATION WOULD POSE AN UNDU
11 HARDSHIP AND MORE THAN A DE MINIMUS COST TO THE OPERATION OF THE
12 EMPLOYER'S BUSINESS.

13 Sec. 4. Section 30-654, Arizona Revised Statutes, is amended to
14 read:

15 30-654. Powers and duties of the department

16 A. The department may:

17 1. Accept grants or other contributions from the federal government
18 or other sources, public or private, to be used by the department to carry
19 out any of the purposes of this chapter.

20 2. Do all things necessary, within the limitations of this chapter,
21 to carry out the powers and duties of the department.

22 3. Conduct an information program, including:

23 (a) Providing information on the control and regulation of sources
24 of radiation and related health and safety matters, on request, to members
25 of the legislature, the executive offices, state departments and agencies
26 and county and municipal governments.

27 (b) Providing such published information, audiovisual
28 presentations, exhibits and speakers on the control and regulation of
29 sources of radiation and related health and safety matters to the state's
30 educational system at all educational levels as may be arranged.

31 (c) Furnishing to citizen groups, on request, speakers and such
32 audiovisual presentations or published materials on the control and
33 regulation of sources of radiation and related health and safety matters
34 as may be available.

35 (d) Conducting, sponsoring or cosponsoring and actively
36 participating in the professional meetings, symposia, workshops, forums
37 and other group informational activities concerned with the control and
38 regulation of sources of radiation and related health and safety matters
39 when representation from this state at such meetings is determined to be
40 important by the department.

41 B. The department shall:

42 1. Regulate the use, storage and disposal of sources of radiation.

- 1 2. Establish procedures for purposes of selecting any proposed
2 permanent disposal site located within this state for low-level
3 radioactive waste.
- 4 3. Coordinate with the department of transportation and the
5 corporation commission in regulating the transportation of sources of
6 radiation.
- 7 4. Assume primary responsibility for and provide necessary
8 technical assistance to handle any incidents, accidents and emergencies
9 involving radiation or sources of radiation occurring within this state.
- 10 5. Adopt rules deemed necessary to administer this chapter in
11 accordance with title 41, chapter 6.
- 12 6. Adopt uniform radiation protection and radiation dose standards
13 to be as nearly as possible in conformity with, and in no case
14 inconsistent with, the standards contained in the regulations of the
15 United States nuclear regulatory commission and the standards of the
16 United States public health service. In the adoption of the standards,
17 the department shall consider the total occupational radiation exposure of
18 individuals, including that from sources that are not regulated by the
19 department.
- 20 7. Adopt rules for personnel monitoring under the close supervision
21 of technically competent people in order to determine compliance with
22 safety rules adopted under this chapter.
- 23 8. Adopt a uniform system of labels, signs and symbols and the
24 posting of the labels, signs and symbols to be affixed to radioactive
25 products, especially those transferred from person to person.
- 26 9. By rule, require adequate training and experience of persons
27 using sources of radiation with respect to the hazards of excessive
28 exposure to radiation in order to protect health and safety.
- 29 10. Adopt standards for the storage of radioactive material and for
30 security against unauthorized removal.
- 31 11. Adopt standards for the disposal of radioactive materials into
32 the air, water and sewers and burial in the soil in accordance with 10
33 Code of Federal Regulations part 20.
- 34 12. Adopt rules that are applicable to the shipment of radioactive
35 materials in conformity with and compatible with those established by the
36 United States nuclear regulatory commission, the department of
37 transportation, the United States department of the treasury and the
38 United States postal service.
- 39 13. In individual cases, impose additional requirements to protect
40 health and safety or grant necessary exemptions that will not jeopardize
41 health or safety, or both.
- 42 14. Make recommendations to the governor and furnish such technical
43 advice as required on matters relating to the utilization and regulation
44 of sources of radiation.

1 15. Conduct or cause to be conducted off-site radiological
2 environmental monitoring of the air, water and soil surrounding any fixed
3 nuclear facility, any uranium milling and tailing site and any uranium
4 leaching operation, and maintain and report the data or results obtained
5 by the monitoring as deemed appropriate by the department.

6 16. Develop and utilize information resources concerning radiation
7 and radioactive sources.

8 17. Prescribe by rule a schedule of fees to be charged to
9 categories of licensees and registrants of radiation sources, including
10 academic, medical, industrial, waste, distribution and imaging categories.
11 The fees shall cover a significant portion of the reasonable costs
12 associated with processing the application for license or registration,
13 renewal or amendment of the license or registration and the costs of
14 inspecting the licensee or registrant activities and facilities, including
15 the cost to the department of employing clerical help, consultants and
16 persons possessing technical expertise and using analytical
17 instrumentation and information processing systems.

18 18. Adopt rules establishing radiological standards, personnel
19 standards and quality assurance programs to ensure the accuracy and safety
20 of screening and diagnostic mammography.

21 C. The department shall deposit, pursuant to sections 35-146 and
22 ~~35-147, the first \$300,000 in fees collected each fiscal year pursuant to~~
23 ~~subsection B, paragraph 17 of this section and section 32-2805 in the~~
24 ~~state general fund. The department shall deposit, pursuant to sections~~
25 ~~35-146 and 35-147,~~ ninety percent of the **remaining** monies received from
26 fees collected pursuant to subsection B, paragraph 17 of this section and
27 section 32-2805 in the health services licensing fund established by
28 section 36-414 and ten percent of the **remaining** monies received from fees
29 collected pursuant to subsection B, paragraph 17 of this section and
30 section 32-2805 in the state general fund.

31 Sec. 5. Title 36, chapter 1, article 2, Arizona Revised Statutes,
32 is amended by adding sections 36-147 and 36-148, to read:

33 36-147. Annual expenditure report; medical marijuana fund;
34 justice reinvestment fund

35 ON OR BEFORE JULY 1 OF EACH YEAR, THE DEPARTMENT SHALL SUBMIT TO THE
36 JOINT LEGISLATIVE BUDGET COMMITTEE AN EXPENDITURE REPORT FOR THE PRECEDING
37 FISCAL YEAR ON MONIES TRANSFERRED TO THE DEPARTMENT FROM THE MEDICAL
38 MARIJUANA FUND PURSUANT TO SECTION 36-2817 AND MONIES TRANSFERRED TO THE
39 DEPARTMENT FROM THE JUSTICE REINVESTMENT FUND PURSUANT TO SECTION 36-2863.
40 THE REPORT SHALL INCLUDE EXPENDITURES BY PROGRAM AND A LIST OF GRANTS
41 DISTRIBUTED BY THE DEPARTMENT. THE DEPARTMENT SHALL INDICATE WHEN ALL
42 MONIES FROM TRANSFERS MADE PURSUANT TO SECTION 36-2817 HAVE BEEN SPENT.

1 36-148. Annual distribution report; smart and safe Arizona
2 fund

3 ON OR BEFORE SEPTEMBER 1 OF EACH YEAR, THE STATE TREASURER SHALL
4 REPORT TO THE JOINT LEGISLATIVE BUDGET COMMITTEE AND THE GOVERNOR'S OFFICE
5 OF STRATEGIC PLANNING AND BUDGETING ON DISTRIBUTIONS MADE FROM THE SMART
6 AND SAFE ARIZONA FUND ESTABLISHED BY SECTION 36-2856 TO THE DEPARTMENT OF
7 HEALTH SERVICES, THE DEPARTMENT OF REVENUE, THE SUPREME COURT, THE
8 DEPARTMENT OF PUBLIC SAFETY AND THE STATE TREASURER PURSUANT TO SECTION
9 36-2856, SUBSECTION B. THE REPORT SHALL INCLUDE THE AMOUNT OF ACTUAL
10 DISTRIBUTIONS MADE TO EACH ENTITY IN THE PRIOR FISCAL YEAR AND THE AMOUNT
11 OF ESTIMATED DISTRIBUTIONS FOR THE CURRENT FISCAL YEAR.

12 Sec. 6. Section 36-446.02, Arizona Revised Statutes, is amended to
13 read:

14 36-446.02. Board of examiners; terms; meetings; quorum;
15 effect of vacancies; compensation

16 A. The board of examiners of nursing care institution
17 administrators and assisted living facility managers is established
18 consisting of ~~nine~~ ELEVEN members appointed by the governor.

19 B. The board shall include:

20 1. One administrator who holds an active license issued pursuant to
21 this article.

22 2. One manager who holds an active license issued pursuant to this
23 article.

24 3. One administrator of a nonprofit or faith-based skilled nursing
25 facility.

26 4. One administrator of a proprietary skilled nursing facility.

27 5. Two managers of an assisted living center as defined in section
28 36-401.

29 6. One manager of an assisted living home as defined in section
30 36-401.

31 7. Two public members who are not affiliated with a nursing care
32 institution or an assisted living facility.

33 8. ONE PUBLIC MEMBER WHO REPRESENTS AN ORGANIZATION THAT ADVOCATES
34 FOR THE ELDERLY.

35 9. ONE PERSON WHO IS A FAMILY MEMBER OF A RESIDENT IN EITHER A
36 SKILLED NURSING FACILITY OR AN ASSISTED LIVING FACILITY AT THE TIME THE
37 PERSON IS APPOINTED TO THE BOARD.

38 C. Board members who are not affiliated with a nursing care
39 institution or an assisted living facility shall not have a direct
40 financial interest in nursing care institutions or assisted living
41 facilities.

42 D. A board member shall not serve on any other board relating to
43 long-term care during the member's term with the board.

1 E. The term of a board member automatically ends when that member
2 no longer meets the qualifications for appointment to the board. The
3 board shall notify the governor of the board vacancy.

4 F. Board members who are not affiliated with a nursing care
5 institution or an assisted living facility shall be appointed for ~~two-year~~
6 **TWO-YEAR** terms. Board members who are the administrator of a nursing care
7 institution or the manager of an assisted living facility shall be
8 appointed for ~~three-year~~ **THREE-YEAR** terms.

9 G. A board member shall not serve for more than two consecutive
10 terms.

11 H. The board shall meet at least twice a year.

12 I. A majority of the board members constitutes a quorum.

13 J. Board members are eligible to receive compensation as determined
14 pursuant to section 38-611 for each day actually spent performing their
15 duties under this chapter.

16 K. A board member who is absent from three consecutive regular
17 meetings or who fails to attend more than fifty ~~per-cent~~ **PERCENT** of board
18 meetings over the course of one calendar year vacates the board member's
19 position. The board shall notify the governor of the vacancy.

20 Sec. 7. Section 36-446.04, Arizona Revised Statutes, is amended to
21 read:

22 36-446.04. Qualifications; period of validity; exemption

23 A. The board shall issue a license as a nursing care institution
24 administrator pursuant to its rules to any person who meets the following
25 qualifications:

26 1. Is of good character.

27 2. Has satisfactorily completed a course of instruction and
28 training approved by the board that:

29 (a) Is designed and sufficiently administered to give the applicant
30 knowledge of the proper needs to be served by nursing care institutions.

31 (b) Includes a thorough background in the laws and rules governing
32 the operation of nursing care institutions and the protection of the
33 interests of the patients in nursing care institutions.

34 (c) Includes thorough training in elements of good health care
35 facilities administration.

36 3. Has passed an examination administered by the board designed to
37 test for competency in the subject matter referred to in this subsection.

38 4. Has met one of the following fingerprinting requirements:

39 (a) Has a valid fingerprint clearance card issued pursuant to title
40 41, chapter 12, article 3.1.

41 (b) Has provided proof of the submission of an application for a
42 fingerprint clearance card. An applicant who has been denied a
43 fingerprint clearance card must also provide proof that the applicant

1 qualifies for a good cause exception hearing pursuant to section
2 41-619.55.

3 B. A person who is licensed pursuant to this section must maintain
4 a valid fingerprint clearance card during the valid period of the person's
5 license.

6 C. The board shall issue a certificate as an assisted living
7 facility manager pursuant to its rules to a person who meets the following
8 qualifications:

9 1. Is of good character.

10 2. Has satisfactorily completed a course of instruction and
11 training approved by the board that:

12 (a) Is designed and sufficiently administered to give the applicant
13 knowledge of the proper needs to be served by an assisted living facility.

14 (b) Includes a thorough background in the laws governing the
15 operation of assisted living facilities and the protection of the
16 interests of the patients in assisted living facilities.

17 (c) Includes thorough training in elements of assisted living
18 facility administration.

19 3. Has passed an examination administered by the board that is
20 designed to test for competency in the subject matter prescribed in this
21 subsection.

22 4. Provides documentation satisfactory to the board that the
23 applicant has completed two thousand eighty hours of paid work experience
24 in a health related field within the preceding five years as prescribed by
25 board rule.

26 5. Has met one of the following fingerprinting requirements:

27 (a) Has a valid fingerprint clearance card issued pursuant to title
28 41, chapter 12, article 3.1.

29 (b) Has provided proof of the submission of an application for a
30 fingerprint clearance card. An applicant who has been denied a
31 fingerprint clearance card must also provide proof that the applicant
32 qualifies for a good cause exception hearing pursuant to section
33 41-619.55.

34 D. NOTWITHSTANDING ANY OTHER PROVISION OF THIS ARTICLE, BEGINNING
35 JULY 1, 2021, ALL NEW LICENSES AND CERTIFICATIONS ISSUED BY THE BOARD MUST
36 BE APPROVED BY BOTH THE BOARD AND THE DEPARTMENT OF HEALTH SERVICES.

37 ~~E.~~ E. A person who is certified pursuant to this section must
38 maintain a valid fingerprint clearance card during the valid period of the
39 person's certificate.

40 ~~F.~~ F. In lieu of the requirements contained in subsection A,
41 paragraph 2 or subsection C, paragraph 2, an applicant may present
42 satisfactory evidence to the board of sufficient education and training in
43 the areas listed in that paragraph.

1 C. Contracts between the department and a school district or
2 districts are subject to approval by the department of education.

3 D. This article does not make the department or the state
4 responsible for funding programs beyond the limits of legislative
5 appropriation for the programs. This article does not require a SERVICE
6 provider ~~of services~~ to provide unreimbursed services to the department or
7 its clients.

8 E. Contracts to provide community developmental disability services
9 shall require that:

10 1. The contractor is obligated to operate a program or service in
11 strict accordance with the standards adopted for that program or service
12 by the department.

13 2. If state funding is provided for a particular program the
14 contractor, to the extent of positions available that are being purchased
15 by the department, shall provide services to a client with a developmental
16 disability who has been evaluated and placed by the department.

17 3. All contractors must carry liability insurance in amounts
18 approved by the risk management division of the department of
19 administration and file proof of insurance with the risk management
20 division. The director may waive that requirement on a ~~case by case~~
21 CASE-BY-CASE basis on a finding that insurance for the program or service
22 is not practicably available at affordable rates and that it is necessary
23 that the program or service be provided by the contractor.

24 4. All clients enrolled in programs have all the same specified
25 rights as they would have if enrolled in a program operated directly by
26 the state.

27 5. Except for emergency placement pursuant to section 36-560,
28 subsection N, payment shall not be made based on program services provided
29 to a client if a placement evaluation has not been made, and no individual
30 program has been prepared and when, based on that placement evaluation, no
31 recommendation has been made to enroll the client in the particular
32 program service.

33 F. This article does not require a contracted agency to provide
34 unreimbursed services to the department or a client of the department.

35 G. Contracts ~~for the TO~~ purchase ~~of~~ residential care services other
36 than those community residential settings licensed pursuant to this
37 chapter, in addition to other general requirements applicable to purchase
38 of care contractors, shall:

39 1. Provide for mandatory inspection by the department every two
40 years for facilities other than group homes.

41 2. Provide for mandatory monitoring by the department for health,
42 safety, contractual and programmatic standards at least every six months,
43 unless the department has granted deemed status to the service provider or
44 the service provider received a score of at least ninety-five percent on

1 the most recent monitoring visit. If the department has granted deemed
2 status or awarded the service provider with a score of at least
3 ninety-five percent on the most recent monitoring visit, ~~it~~ THE DEPARTMENT
4 shall monitor that SERVICE provider once each year. On A determination by
5 the department that there is reasonable cause to believe a service
6 provider is not adhering to the department's programmatic or contractual
7 requirements, the department and any duly designated employee or agent of
8 the department may enter on and into the premises at any reasonable time
9 for the purpose of determining the SERVICE PROVIDER'S state of compliance
10 with the DEPARTMENT'S programmatic or contractual requirements ~~of the~~
11 ~~department.~~

12 3. Provide for mandatory investigation by the department in
13 response to complaints within ten working days, except that in those
14 instances that pose a danger to the client, the department shall conduct
15 the investigation immediately. Health and safety complaints related to
16 group homes shall be referred to the department of health services on
17 receipt. The department of health services shall share all incident
18 reports related to health and safety with the division of developmental
19 disabilities.

20 4. Except for group homes licensed by the department of health
21 services, specify the health and safety and sanitation codes and other
22 codes or standards applicable to the facility or to the operation of the
23 facility by the contractor other than group homes.

24 5. Provide for mandatory periodic reports to be filed by the
25 provider contractor with the department with respect to the operation of
26 the facility.

27 6. Provide that the facility and the books and records of the
28 facility and of the provider are subject to inspection at any time by
29 employees of the department or designees of the department.

30 7. Provide that parents and guardians of persons with developmental
31 disabilities residing at the facility, members of the developmental
32 disabilities advisory council, and members of other recognized and ongoing
33 advocacy groups for persons with developmental disabilities may inspect
34 the facility at reasonable times.

35 H. Contracts for the purchase of residential care services shall
36 require a community residential setting to be licensed pursuant to this
37 chapter other than group homes licensed by the department of health
38 services.

39 I. Contracts for the purchase of day program or employment
40 services, in addition to the other general requirements applicable to the
41 purchase of client services, must provide for mandatory monitoring by the
42 department for health, safety, contractual, programmatic and quality
43 assurance standards at least once every six months, unless the department
44 has granted deemed status to the service provider. If the department has

1 granted deemed status to the service provider, the department shall
2 monitor that SERVICE provider once each year. The department and any duly
3 designated employee or agent of the department may enter on or into the
4 service provider's premises at any reasonable time for the purpose of
5 determining the SERVICE PROVIDER'S state of compliance with the
6 department's programmatic, contractual and quality assurance requirements.

7 J. The division shall ensure that all contracted developmental
8 disabilities service providers rendering services pursuant to this chapter
9 are reimbursed in accordance with title XIX of the social security act.

10 K. Contracts for client services issued by the department shall
11 include language outlining the provisions for a grievance and appeal
12 procedure. The director shall provide notice to SERVICE providers not
13 less than thirty days before the issuance of an amendment to a qualified
14 vendor agreement. The decision of the director regarding qualified vendor
15 agreement amendments may be appealed pursuant to title 41, chapter 6,
16 article 10. The grievance process applicable to these contracts shall
17 comply with title XIX requirements.

18 L. As a condition of contracts with any developmental disabilities
19 service provider, the director shall require terms that conform with state
20 and federal laws, title XIX statutes and regulations and quality
21 standards. The director shall further require contract terms that ensure
22 performance by the provider of the provisions of each contract executed
23 pursuant to this article.

24 M. The division shall establish a rate structure that ensures an
25 equitable funding basis for private nonprofit or ~~for-profit~~ FOR-PROFIT
26 agencies for services pursuant to subsection B of this section and section
27 36-2943. In each fiscal year, the division shall review and adjust the
28 rate structure based on section 36-2959. A rate book shall be published
29 and updated by the division to announce the rate structure that shall be
30 incorporated by reference in contracts for client services.

31 N. The division shall disclose to a service provider in the
32 individual program plan, and in all meetings resulting from a response to
33 a vendor call, any historical and behavioral information necessary for the
34 SERVICE provider to be able to anticipate the client's future behaviors
35 and needs, including summary information from the program review
36 committee, unusual incident reports reviewed by the independent oversight
37 committee and behavioral treatment plans. The division shall redact the
38 client's identification from this information.

39 O. Service providers are authorized to engage in the following
40 activities in accordance with a client's individual program plan:

- 41 1. Administer medications, including assisting with the client's
- 42 self-administration of medications.
- 43 2. Log, store, remove and dispose of medications.
- 44 3. Maintain medications and protocols for direct care.

1 4. Serve as the client's representative payee if requested by the
2 client or the client's guardian and approved by the payer.

3 P. The department may adopt rules establishing procedures for
4 engaging in the activities listed in subsection 0 of this section.

5 Q. To protect the health and safety of a client, a SERVICE provider
6 must notify the division within twenty-four hours if an emergency
7 situation exists in which the SERVICE provider is unable to meet the
8 health or safety needs of the client.

9 R. On notification of an emergency situation, the department shall
10 hold an individual program plan meeting within fifteen days after
11 notification to recommend any changes, including whether there is a need
12 for temporary additional staffing to provide appropriate care for a
13 client, and develop a plan within thirty days after notification to
14 resolve the situation.

15 S. SERVICE PROVIDERS SHALL DEVELOP AND IMPLEMENT POLICIES AND
16 PROCEDURES REGARDING THE COMMUNICATION TO RESPONSIBLE PERSONS OF A SERIOUS
17 INCIDENT AFFECTING A CLIENT WHO IS LIVING IN A COMMUNITY RESIDENTIAL
18 SETTING WITHIN TWENTY-FOUR HOURS AFTER THE SERIOUS INCIDENT OCCURS.

19 Sec. 9. Section 36-591, Arizona Revised Statutes, is amended to
20 read:

21 36-591. Group homes; licensing; notification requirements

22 ~~A. An adult developmental home or child developmental home shall be~~
23 ~~licensed pursuant to this article.~~

24 ~~B.~~ A. Group homes, except for those described in subsection ~~E~~ D
25 of this section, shall be licensed for health and safety by the department
26 of health services pursuant to section 36-132.

27 ~~C.~~ B. The division shall notify the department of health services
28 of:

29 1. Service providers ~~who~~ THAT enter into contracts with the
30 division for group homes or intermediate care facilities for individuals
31 with intellectual disabilities.

32 2. Any violation of health and safety standards observed during
33 monitoring visits.

34 ~~D.~~ C. The department of health services shall immediately notify
35 the division:

36 1. When THE LICENSE OF a group home or intermediate care facility
37 for individuals with intellectual disabilities ~~license~~ has been denied,
38 suspended or revoked.

39 2. Of any other licensing action taken on a group home or
40 intermediate care facility for individuals with intellectual disabilities
41 by the department of health services.

42 3. Of substantiated complaints regarding health and safety.

43 ~~E.~~ D. The division shall ensure that state-operated residential
44 settings that are owned or leased facilities operated by the division meet

1 the same standards as group homes unless they are required to be licensed
2 and certified as intermediate care facilities for individuals with
3 intellectual disabilities pursuant to 42 Code of Federal Regulations part
4 483, subpart I. An intermediate care facility for individuals with
5 intellectual disabilities that is operated by the division or a private
6 entity is required to be licensed pursuant to chapter 4 of this title and
7 certified pursuant to 42 Code of Federal Regulations part 483, subpart I.

8 ~~F. The department shall annually visit each adult developmental~~
9 ~~home and child developmental home and inspect the premises used for the~~
10 ~~care of children or vulnerable adults for sanitation, fire and other~~
11 ~~actual and potential hazards.~~

12 E. The department shall take any action it deems necessary to carry
13 out the duties imposed by this section, including ~~the denial of~~ DENYING
14 the application for licensure and ~~the suspension~~ SUSPENDING or ~~revocation~~
15 REVOKING of the home's license.

16 Sec. 10. Section 36-592, Arizona Revised Statutes, is amended to
17 read:

18 36-592. Adult developmental homes; child developmental homes;
19 licensure requirements; inspections;
20 investigations; third-party contractors; rules;
21 definitions

22 A. AN ADULT DEVELOPMENTAL HOME OR CHILD DEVELOPMENTAL HOME SHALL BE
23 LICENSED PURSUANT TO THIS ARTICLE.

24 ~~A.~~ B. An applicant for an adult developmental home or child
25 developmental home license shall submit an application on a form
26 prescribed by the department.

27 ~~B.~~ C. Before issuing or renewing a license to an applicant, the
28 department shall investigate the activities and standards of care within
29 the setting, the financial stability of the applicant, the character and
30 training of the applicant and the adequacy of services. Before issuing or
31 renewing a license, the department shall determine that the applicant is
32 able to meet the emotional, physical, social, developmental, educational,
33 cultural and intellectual needs of clients. The department by rule shall
34 establish standards for licensure. The department shall maintain a system
35 of independent oversight of licensing. The department may contract with
36 third parties to perform services in connection with oversight and
37 licensing. The department may not contract with the same third party for
38 both oversight and licensure under this subsection.

39 ~~C.~~ D. Each license shall state in general terms the kind of
40 setting the licensee is authorized to operate and shall prescribe the
41 number, ages and sex of clients.

42 ~~D.~~ E. A licensee ~~who~~ THAT holds an adult developmental home or
43 child developmental home license shall:

- 1 1. Comply with applicable health, safety and sanitation codes or
2 standards and document its compliance.
- 3 2. File reports as prescribed by the department.
- 4 3. Allow the department to inspect or monitor its services and
5 facility and the facility's books and records.
- 6 4. Comply with rules adopted by the department.
- 7 5. Provide for the health, safety and welfare of the licensee's
8 clients.
- 9 6. Allow the inspection of the developmental home at reasonable
10 times pursuant to section 36-595.01.
- 11 ~~F.~~ F. A license expires one year from the date of issuance.
- 12 ~~F.~~ G. For each adult developmental home and child developmental
13 home, the department shall:
 - 14 ~~1. Conduct an annual licensing home visit.~~
 - 15 1. ANNUALLY VISIT AND INSPECT THE PREMISES USED FOR THE CARE OF
16 CHILDREN OR VULNERABLE ADULTS FOR SANITATION, FIRE AND OTHER ACTUAL AND
17 POTENTIAL HAZARDS. THE DEPARTMENT SHALL TAKE ANY ACTION IT DEEMS
18 NECESSARY TO CARRY OUT THE DUTIES IMPOSED BY THIS SECTION, INCLUDING
19 DENYING THE APPLICATION FOR LICENSURE AND SUSPENDING OR REVOKING THE
20 HOME'S LICENSE.
 - 21 2. Monitor the settings for compliance with health, safety,
22 contractual, programmatic and quality assurance standards at least two
23 times per year. The department shall maintain a system of independent
24 oversight of monitoring. The department may enter into a contract with
25 third parties to perform services in connection with oversight and
26 monitoring. The department may not contract with the same third party for
27 both oversight and monitoring under this paragraph.
 - 28 3. Investigate a complaint within ten working days after receiving
29 notice of the complaint, except that if there is a danger to a client, the
30 department shall conduct the investigation immediately.
 - 31 4. NOTIFY THE PARENT OR GUARDIAN OF A DEVELOPMENTAL HOME RESIDENT
32 OF ANY SERIOUS INCIDENT OR COMPLAINT AT THE DEVELOPMENTAL HOME INVOLVING
33 THE CLIENT FOR WHOM THE PARENT OR GUARDIAN IS RESPONSIBLE.
- 34 ~~G.~~ H. The department shall establish by rule minimum
35 qualifications, responsibilities and oversight for ~~the~~ licensing and
36 monitoring ~~of~~ adult developmental homes and child developmental homes.
37 The rules regarding minimum qualifications shall address professional
38 judgment, conflicts of interest and training. The rules shall establish
39 the frequency and type of visits for licensing and monitoring, maximum
40 caseload ratios for those performing licensing and monitoring services and
41 a system for appropriate public access to information regarding licensing
42 and monitoring findings.

1 DENIAL, SUSPENSION OR REVOCATION OF A DEVELOPMENTAL HOME LICENSE DUE TO
2 THE FAILURE TO OBTAIN OR MAINTAIN A LEVEL I FINGERPRINT CLEARANCE CARD AS
3 REQUIRED BY SECTION 36-594.02 IS NOT AN APPEALABLE AGENCY ACTION.

4 8. An employee, applicant, licensee, volunteer or adult household
5 member of an adult developmental home or child developmental home is
6 alleged to have abused, neglected or exploited a vulnerable adult and the
7 department of economic security intends to enter, pursuant to section
8 46-458, a substantiated finding of abuse, neglect or exploitation of a
9 vulnerable adult in the adult protective services registry.

10 B. For the purposes of this section, "vulnerable adult" has the
11 same meaning prescribed in section 13-3623.

12 Sec. 12. Section 36-672, Arizona Revised Statutes, is amended to
13 read:

14 36-672. Immunizations; department rules; prohibitions

15 A. Consistent with section 15-873, the director shall adopt rules
16 prescribing required immunizations for school attendance, the approved
17 means of immunization and indicated reinforcing immunizations for
18 diseases, and identifying types of health agencies and health care
19 providers ~~which~~ THAT may sign a laboratory evidence of immunity. The
20 rules shall include the required doses, recommended optimum ages for
21 administration of the immunizations, persons who are authorized
22 representatives to sign on behalf of a health agency and other provisions
23 necessary to implement this article.

24 B. The director, in consultation with the superintendent of public
25 instruction, shall develop by rule standards for documentary proof.

26 C. ~~Immunization against the human papillomavirus is~~ THE FOLLOWING
27 IMMUNIZATIONS ARE not required for school attendance:

28 1. THE IMMUNIZATION AGAINST THE HUMAN PAPILOMAVIRUS.

29 2. AN IMMUNIZATION FOR WHICH A UNITED STATES FOOD AND DRUG
30 ADMINISTRATION EMERGENCY USE AUTHORIZATION HAS BEEN ISSUED.

31 D. AN IMMUNIZATION MUST BE PRESCRIBED BY A RULE ADOPTED PURSUANT TO
32 SUBSECTION A OF THIS SECTION BEFORE THE IMMUNIZATION MAY BE REQUIRED FOR
33 IN-PERSON SCHOOL ATTENDANCE.

34 E. PURSUANT TO SECTION 1-602, THIS SECTION DOES NOT PRECLUDE A
35 PARENT'S RIGHT TO MAKE HEALTH CARE DECISIONS FOR THE PARENT'S MINOR CHILD.

36 Sec. 13. Title 36, chapter 6, Arizona Revised Statutes, is amended
37 by adding article 4.2, to read:

38 ARTICLE 4.2. VACCINE PASSPORT PROHIBITIONS

39 36-681. COVID-19 vaccine passport; prohibitions

40 A. NOTWITHSTANDING ANY OTHER LAW, THIS STATE AND ANY CITY, TOWN OR
41 COUNTY OF THIS STATE ARE PROHIBITED FROM ESTABLISHING A COVID-19 VACCINE
42 PASSPORT OR REQUIRING EITHER OF THE FOLLOWING:

43 1. ANY PERSON TO BE VACCINATED FOR COVID-19.

1 2. A BUSINESS TO OBTAIN PROOF OF THE COVID-19 VACCINATION STATUS OF
2 ANY PATRON ENTERING THE BUSINESS ESTABLISHMENT.

3 B. ANY LAW OR ORDINANCE ESTABLISHING A COVID-19 VACCINE PASSPORT IS
4 VOID AND IS NOT ENFORCEABLE AGAINST ANY PERSON OR BUSINESS LOCATED IN THIS
5 STATE.

6 36-682. Article application; exceptions

7 THIS ARTICLE DOES NOT DO EITHER OF THE FOLLOWING:

8 1. LIMIT AN INDIVIDUAL'S ABILITY TO REQUEST THAT THE INDIVIDUAL'S
9 OWN VACCINATION RECORDS BE PROVIDED TO THAT INDIVIDUAL OR TO A THIRD PARTY
10 TO WHOM THE INDIVIDUAL REQUESTS THE RECORDS BE RELEASED.

11 2. PROHIBIT A HEALTH CARE INSTITUTION LICENSED PURSUANT TO CHAPTER
12 4 OF THIS TITLE FROM REQUIRING THE INSTITUTION'S EMPLOYEES TO BE
13 VACCINATED.

14 Sec. 14. Section 36-694, Arizona Revised Statutes, is amended to
15 read:

16 36-694. Report of blood tests; newborn screening program;
17 committee; fee; definitions

18 A. When a birth or stillbirth is reported, the attending physician
19 or other person required to ~~make a~~ report ~~of~~ the birth shall state on the
20 certificate whether a blood test for syphilis was made on a specimen of
21 blood taken from the woman who bore the child or from the umbilical cord
22 at delivery, as required by section 36-693, and the approximate date when
23 the specimen was taken.

24 B. When a birth is reported, the attending physician or person who
25 is required to ~~make a~~ report ~~on~~ the birth shall order or cause to be
26 ordered tests for certain congenital disorders, including hearing
27 disorders. The results of tests for these disorders must be reported to
28 the department of health services. The department of health services
29 shall specify in rule the disorders, the process for collecting and
30 submitting specimens and the reporting requirements for test results.

31 C. When a hearing test is performed on a newborn, the initial
32 hearing test results and any subsequent hearing test results must be
33 reported to the department of health services as prescribed by department
34 rules.

35 D. The director of the department of health services shall
36 establish a newborn screening program within the department to ensure that
37 the testing for congenital disorders and the reporting of hearing test
38 results required by this section are conducted in an effective and
39 efficient manner. THE NEWBORN SCREENING PROGRAM SHALL INCLUDE ALL
40 CONGENITAL DISORDERS THAT ARE INCLUDED ON THE RECOMMENDED UNIFORM
41 SCREENING PANEL ADOPTED BY THE SECRETARY OF THE UNITED STATES DEPARTMENT
42 OF HEALTH AND HUMAN SERVICES FOR BOTH CORE AND SECONDARY CONDITIONS.
43 BEGINNING JANUARY 1, 2022, DISORDERS THAT ARE ADDED TO THE CORE AND
44 SECONDARY CONDITIONS LIST OF THE RECOMMENDED UNIFORM SCREENING PANEL SHALL

1 BE ADDED TO THIS STATE'S NEWBORN SCREENING PANEL WITHIN TWO YEARS AFTER
2 THEIR ADDITION TO THE RECOMMENDED UNIFORM SCREENING PANEL. The newborn
3 screening program shall include an education program for the general
4 public, the medical community, parents and professional groups. The
5 director shall designate the state laboratory as the only testing facility
6 for the program, except that the director may designate other laboratory
7 testing facilities for conditions or tests added to the newborn screening
8 program on or after July 24, 2014. If the director designates another
9 laboratory testing facility for any condition or test, the director shall
10 require the facility to follow all of the privacy and sample destruction
11 time frames that are required of the state laboratory.

12 E. The newborn screening program shall establish and maintain a
13 central database of newborns and infants who are tested for hearing loss
14 and congenital disorders that includes information required in rule. Test
15 results are confidential subject to the disclosure provisions of sections
16 12-2801 and 12-2802.

17 F. If tests conducted pursuant to this section indicate that a
18 newborn or infant may have a hearing loss or a congenital disorder, the
19 screening program shall provide follow-up services to encourage the
20 child's family to access evaluation services, specialty care and early
21 intervention services.

22 G. The director shall establish a committee to provide
23 recommendations and advice to the department on at least an annual basis
24 regarding NEWBORN SCREENING BEST PRACTICES AND EMERGING TRENDS. ~~tests that~~
25 ~~the committee believes should be included in the newborn screening~~
26 ~~program. Any recommendation by the committee that a test be added to the~~
27 ~~newborn screening program shall be accompanied by a cost-benefit analysis.~~

28 ~~H. The committee shall include the following members who are~~
29 ~~appointed by the director and who serve without compensation or~~
30 ~~reimbursement of expenses at the pleasure of the director:~~

31 ~~1. Seven physicians who are licensed pursuant to title 32, chapter~~
32 ~~13 or 17 and who represent the medical specialties of endocrinology,~~
33 ~~pediatrics, neonatology, family practice, otology and obstetrics.~~

34 ~~2. A neonatal nurse practitioner who is licensed and certified~~
35 ~~pursuant to title 32, chapter 15.~~

36 ~~3. An audiologist who is licensed pursuant to chapter 17, article 4~~
37 ~~of this title.~~

38 ~~4. A representative of an agency that provides services under part~~
39 ~~6 of the individuals with disabilities education act.~~

40 ~~5. At least one parent of a child with a hearing loss or a~~
41 ~~congenital disorder.~~

42 ~~6. A representative from the insurance industry who is familiar~~
43 ~~with health care reimbursement issues.~~

1 ~~7. The director of the Arizona health care cost containment system~~
2 ~~administration or the director's designee.~~

3 ~~8. A representative of the hospital or health care industry.~~

4 ~~i.~~ H. The director may establish by rule a fee that the department
5 may collect for ~~operation of~~ OPERATING the newborn screening program,
6 including contracting for the testing pursuant to this section. ~~The fee~~
7 ~~for the first specimen and hearing test shall not exceed thirty-six~~
8 ~~dollars.~~ THE DIRECTOR SHALL PRESENT ANY CHANGE TO THE FEE FOR THE NEWBORN
9 SCREENING PROGRAM TO THE JOINT LEGISLATIVE BUDGET COMMITTEE FOR REVIEW.

10 I. NOT LATER THAN SIXTY DAYS AFTER THE DEPARTMENT ADJUSTS THE
11 NEWBORN SCREENING PROGRAM FEE ESTABLISHED PURSUANT TO SUBSECTION H OF THIS
12 SECTION:

13 1. EACH HEALTH INSURER THAT IS SUBJECT TO TITLE 20 SHALL UPDATE ITS
14 HOSPITAL RATES THAT INCLUDE NEWBORN SCREENING TO REFLECT THE INCREASE.

15 2. FOR THE ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM AND
16 CONTRACTORS ACTING PURSUANT TO CHAPTER 29, ARTICLE 1 OF THIS TITLE THAT
17 ARE NOT SUBJECT TO TITLE 20, THE ARIZONA HEALTH CARE COST CONTAINMENT
18 SYSTEM SHALL UPDATE ITS HOSPITAL RATES THAT INCLUDE NEWBORN SCREENING TO
19 REFLECT THE INCREASE.

20 J. For the purposes of this section:

21 1. "Infant" means a child who is twenty-nine days of age to two
22 years of age.

23 2. "Newborn" means a child who is not more than twenty-eight days
24 of age.

25 Sec. 15. Section 36-694.01, Arizona Revised Statutes, is amended to
26 read:

27 36-694.01. Newborn screening program fund; use; exemption

28 A. The newborn screening program fund is established. The
29 department of health services shall administer the fund. The fund
30 consists of fees collected pursuant to section 36-694 and gifts, GRANTS
31 and donations received by the department.

32 B. Subject to legislative appropriation, the department shall use
33 fund monies to support the operation of the newborn screening program
34 prescribed under section 36-694 and rules adopted under that section.

35 C. Monies in the fund are exempt from the provisions of section
36 35-190 relating to lapsing of appropriations.

37 Sec. 16. Section 36-1201, Arizona Revised Statutes, is amended to
38 read:

39 36-1201. Juvenile group homes; service contracts; registry;
40 definitions

41 A. State agencies that contract directly with group homes or
42 regional behavioral health authorities that, as part of their contracts
43 with the department of health services, subcontract with group homes shall

1 require in each contract awarded, renewed or amended the following minimum
2 provisions:

3 1. The group home shall provide a safe, clean and humane
4 environment for the residents.

5 2. The group home is responsible for ~~the supervision of~~ SUPERVISING
6 the residents while in the group home environment or while residents are
7 engaged in any off-site activities organized or sponsored by and under the
8 direct supervision and control of the group home or affiliated with the
9 group home.

10 3. All group home contractors shall be licensed by either the
11 department of health services, the department of child safety or the
12 department of economic security.

13 4. The award of a group home contract from an appropriate
14 contracting authority is not a guarantee that children will be placed at
15 the group home.

16 5. A ~~license~~ LICENSING violation by the group home that is not
17 corrected pursuant to this section may also be considered a contract
18 violation.

19 6. State agencies and regional behavioral health authorities may
20 share information regarding group home contractors. The shared
21 information shall not include information that personally identifies
22 residents of group homes.

23 7. The following contract remedies:

24 (a) A schedule of financial sanctions in an amount of up to \$500
25 per violation that the contracting authority, after completing an
26 investigation, may assess against the group home contractor for a
27 substantiated contract violation relating to the health, care or safety of
28 a resident or the safety of a neighbor. A financial sanction may be
29 imposed for a contract violation related to the safety of a neighbor only
30 if the conduct that constitutes the violation would be sufficient to form
31 the basis for a civil cause of action for damages on the part of the
32 neighbor whether or not such a civil action has been filed. These
33 sanctions may be imposed by either deducting the amount of the sanction
34 from any payment due or withholding future payments. The deduction or
35 withholding may occur after any hearing available to the contractor.

36 (b) The contracting authority's right to remove residents from the
37 group home or suspend new placements to the group home until the
38 ~~contracting~~ CONTRACT violation is corrected.

39 (c) The contracting authority's right to cancel the contract.

40 8. Within ten business days after the contracting authority
41 receives a complaint relating to a group home, the contracting authority
42 shall notify the group home provider and either initiate an investigation
43 or refer the investigation to the licensing authority. If any complaint
44 concerns an immediate threat to the health and safety of a child, the

1 complaint shall be immediately referred to the licensing authority. If
2 the contracting authority determines that a violation has occurred, it
3 shall:

4 (a) Notify all other contracting authorities of the violation.

5 (b) Coordinate a corrective action plan consistent with the
6 severity of the violation.

7 (c) Require the corrective action plan to be implemented within
8 ninety days.

9 9. If a licensing deficiency is not corrected in a timely manner to
10 the satisfaction of the licensing authority, the contracting authority may
11 cancel the contract immediately on notice to the group home and may remove
12 the residents.

13 10. A person may bring a complaint against any state agency that
14 violates this section pursuant to title 41, chapter 6, article 6 or 10, as
15 applicable. In addition to any costs or fees awarded to a person
16 resulting from a complaint of a violation of this section, the agency
17 shall revert the sum of \$5,000 from its general fund operating
18 appropriation to the state treasurer for deposit in the state general fund
19 for each violation that is upheld by an administrative law judge or
20 hearing officer. The legislature shall appropriate monies that revert
21 under this section to a similar program that provides direct services to
22 children.

23 B. When a licensing authority has determined that a ~~license~~
24 LICENSING violation has occurred or is occurring, the licensing authority
25 shall notify the appropriate contracting authority of the licensing
26 violation.

27 C. A group home's record of contract violations and licensing
28 violations may be considered by any contracting authority when it
29 evaluates any request for proposals.

30 D. The department of health services shall establish a central
31 registry of juvenile group homes licensed by this state. Each agency that
32 is subject to the requirements of this section shall provide updated
33 information for the registry to the department of health services every
34 six months. The registry shall include the following information
35 regarding each group home:

36 1. The location of the group home, including satellite facilities.

37 2. The number of residents at the group home and its satellite
38 facilities.

39 3. The current, updated emergency contacts for the group home and
40 its satellite facilities.

41 4. The current, updated contacts for the group home's licensing
42 authority.

43 E. If the municipality in which a group home is located requests
44 the department of health services to provide information from the

1 registry, the department shall provide the information every six months to
2 the municipality.

3 F. For the purposes of this article:

4 1. "Contract violation" means a licensing violation or a failure of
5 the group home to comply with those provisions of its contract relating to
6 subsection A, paragraphs 1, 2 and 3 of this section.

7 2. "Contracting authority" means a regional behavioral health
8 authority or the state agency or its division, office, section, bureau or
9 program that is responsible for ~~the administration~~ ADMINISTERING and
10 monitoring ~~of~~ contracts with group homes.

11 3. "Group home":

12 (a) Means a residential facility that is licensed to serve more
13 than four minors at any one time, that is licensed by the department of
14 health services pursuant to chapter 4 of this title or section 36-591,
15 subsection ~~B~~ A or by the department of child safety pursuant to title 8,
16 chapter 4, article 4 and that provides services pursuant to a contract for
17 minors determined to be dependent as defined in section 8-201 or
18 delinquent or incorrigible pursuant to section 8-341, or for minors with
19 developmental disabilities, mental health or substance abuse needs. ~~Group~~
20 ~~home~~

21 (b) Does not include hospitals, nursing homes, child crisis and
22 domestic violence shelters, adult homes, foster homes, facilities subject
23 to any transient occupancy tax or behavioral health service agencies that
24 provide twenty-four hour or continuous physician availability.

25 4. "Licensing authority" means the state agency or its division,
26 office, section, bureau or program that is responsible for licensing group
27 homes.

28 5. "Licensing violation" means a determination by the licensing
29 authority that the group home is not in compliance with licensing
30 requirements as prescribed in statute or rule.

31 6. "Neighbor" means a person residing within a one-quarter mile
32 radius of the group home.

33 7. "Resident" means any person who is placed in a group home
34 pursuant to a contract with a contracting authority.

35 Sec. 17. Title 36, Arizona Revised Statutes, is amended by adding
36 chapter 31, to read:

37 CHAPTER 31

38 SEXUAL VIOLENCE SERVICES

39 ARTICLE 1. GENERAL PROVISIONS

40 36-3101. Definitions

41 IN THIS CHAPTER, UNLESS THE CONTEXT OTHERWISE REQUIRES:

42 1. "DEPARTMENT" MEANS THE DEPARTMENT OF ECONOMIC SECURITY.

1 Sec. 19. Title 41, chapter 27, article 2, Arizona Revised Statutes,
2 is amended by adding section 41-3022.26, to read:

3 41-3022.26. Board of examiners of nursing care institution
4 administrators and assisted living facility
5 managers; termination March 31, 2022

6 A. THE BOARD OF EXAMINERS OF NURSING CARE INSTITUTION
7 ADMINISTRATORS AND ASSISTED LIVING FACILITY MANAGERS TERMINATES ON
8 MARCH 31, 2022.

9 B. TITLE 36, CHAPTER 4, ARTICLE 6 AND THIS SECTION ARE REPEALED ON
10 JANUARY 1, 2023.

11 Sec. 20. Section 46-452.02, Arizona Revised Statutes, is amended to
12 read:

13 46-452.02. State long-term care ombudsman; duties; immunity
14 from liability

15 A. A representative of the office of the state long-term care
16 ombudsman who performs the official duties of the long-term care ombudsman
17 ~~shall~~ IS not ~~be~~ liable under state law for the good faith performance of
18 official duties.

19 B. Official duties of the office of the state long-term care
20 ombudsman include authority to:

21 1. Enter long-term care facilities to communicate with residents.

22 2. Hear, investigate and attempt to resolve complaints by
23 agreement, mediation or conciliation.

24 3. Render advice to residents of facilities.

25 4. Refer cases involving abuse, neglect, exploitation or health and
26 safety to adult protective services or the appropriate licensing agency.

27 5. Make appropriate referrals to legal services or other community
28 services.

29 6. ASSUME such other responsibilities as required pursuant to the
30 older Americans act of 1965, as amended (P.L. ~~100175, sec. 307 (A) (12)~~
31 ~~100-175~~; 42 United States Code ~~3027(A) (12)~~ SECTION 3027(a)(12)).

32 C. SUBJECT TO AVAILABLE MONIES, THE OFFICE OF THE STATE LONG-TERM
33 CARE OMBUDSMAN SHALL VISIT EACH LONG-TERM CARE FACILITY IN THIS STATE
34 WITHOUT PRIOR NOTICE AT LEAST TWO TIMES EACH CALENDAR YEAR TO SPEAK WITH
35 RESIDENTS OF THE LONG-TERM CARE FACILITY, OR THE RESIDENT'S REPRESENTATIVE
36 IF THE RESIDENT IS NONVERBAL, WITHOUT THE PRESENCE OF THE FACILITY'S
37 STAFF. THE REQUIREMENTS OF THIS SUBSECTION ARE IN ADDITION TO ANY
38 FOLLOW-UP IN RESPONSE TO A COMPLAINT.

39 ~~C.~~ D. Official duties of the office of the state long-term care
40 ombudsman do not include activities performed by a licensed health care
41 provider as defined in section 12-561.

1 Sec. 21. Nursing care institution and assisted living
2 facility study committee; membership; duties;
3 report; delayed repeal

4 A. The nursing care institution and assisted living facility study
5 committee is established consisting of the following members:

6 1. Two members of the house of representatives who represent
7 different political parties and who are appointed by the speaker of the
8 house of representatives. The speaker of the house of representatives
9 shall designate one of these members to serve as cochairperson of the
10 study committee.

11 2. Two members of the senate who represent different political
12 parties and who are appointed by the president of the senate. The
13 president of the senate shall designate one of these members to serve as
14 cochairperson of the study committee.

15 3. One representative of the governor's office.

16 4. The director of the department of health services or the
17 director's designee.

18 5. The state long-term care ombudsman or the ombudsman's designee.

19 6. Two representatives from organizations that advocate for the
20 elderly who are appointed by the governor.

21 7. Two licensed nursing care institution administrators who are
22 currently employed as administrators of skilled nursing facilities, one of
23 whom is from a nonprofit facility and one of whom is from a proprietary
24 facility. The president of the senate shall appoint both of these
25 members.

26 8. Two licensed assisted living facility managers who are currently
27 employed as managers of assisted living facilities, one of whom is from a
28 nonprofit facility and one of whom is from a proprietary facility. The
29 speaker of the house of representatives shall appoint both of these
30 members.

31 9. Two licensed assisted living facility managers who are currently
32 employed as managers of assisted living facility homes and who are
33 appointed by the president of the senate.

34 10. Four family members of residents of a skilled nursing facility,
35 assisted living facility or assisted living facility home who are
36 appointed by the governor.

37 11. One health care professional who treats the elderly and who is
38 appointed by the governor.

39 B. The study committee shall:

40 1. Consider whether the board of examiners of nursing care
41 institution administrators and assisted living facility managers should be
42 administered independently or the duties should be moved to the department
43 of health services or another successor agency or licensing board.

1 2. Review and discuss the statutes related to disclosure of all
2 felonies regardless of the applicants' fingerprint clearance card
3 requirement.

4 3. Receive an update from the auditor general's office and the
5 executive director of the board of examiners of nursing care institution
6 administrators and assisted living facility managers on the auditor
7 general's recommendations and the board's compliance with the
8 recommendations to date.

9 4. Hear testimony about operational changes from the executive
10 director of the board.

11 5. Discuss and research best practices to administer licenses.

12 6. Identify any additional efficiencies to make the board more
13 responsive to the public and its licensees.

14 7. Review best practices relating to answering and investigating
15 complaints.

16 8. Review and analyze the regulatory oversight of skilled nursing
17 facilities and assisted living facilities by the state and federal
18 government and the future needs of the industry.

19 C. Public members of the study committee are eligible to receive
20 reimbursement of expenses pursuant to title 38, chapter 4, article 2,
21 Arizona Revised Statutes.

22 D. On or before December 1, 2021, the study committee shall submit
23 a report of its findings and recommendations to the governor, the
24 president of the senate and the speaker of the house of representatives
25 and shall provide a copy of this report to the secretary of state.

26 E. This section is repealed from and after June 30, 2022.

27 Sec. 22. ALICS; county contributions; fiscal year 2021-2022

28 A. Notwithstanding section 11-292, Arizona Revised Statutes, county
29 contributions for the Arizona long-term care system for fiscal year
30 2021-2022 are as follows:

31	1. Apache	\$ 662,900
32	2. Cochise	\$ 4,551,700
33	3. Coconino	\$ 1,990,400
34	4. Gila	\$ 2,327,100
35	5. Graham	\$ 1,328,000
36	6. Greenlee	\$ 0
37	7. La Paz	\$ 357,100
38	8. Maricopa	\$184,272,900
39	9. Mohave	\$ 9,154,300
40	10. Navajo	\$ 2,744,100
41	11. Pima	\$ 44,073,400
42	12. Pinal	\$ 12,109,900
43	13. Santa Cruz	\$ 2,242,800

1	14. Yavapai	\$ 7,677,800
2	15. Yuma	\$ 9,701,600

3 B. If the overall cost for the Arizona long-term care system
4 exceeds the amount specified in the general appropriations act for fiscal
5 year 2021-2022, the state treasurer shall collect from the counties the
6 difference between the amount specified in subsection A of this section
7 and the counties' share of the state's actual contribution. The counties'
8 share of the state's contribution must comply with any federal maintenance
9 of effort requirements. The director of the Arizona health care cost
10 containment system administration shall notify the state treasurer of the
11 counties' share of the state's contribution and report the amount to the
12 director of the joint legislative budget committee. The state treasurer
13 shall withhold from any other monies payable to a county from whatever
14 state funding source is available an amount necessary to fulfill that
15 county's requirement specified in this subsection. The state treasurer
16 may not withhold distributions from the Arizona highway user revenue fund
17 pursuant to title 28, chapter 18, article 2, Arizona Revised Statutes.
18 The state treasurer shall deposit the amounts withheld pursuant to this
19 subsection and amounts paid pursuant to subsection A of this section in
20 the long-term care system fund established by section 36-2913, Arizona
21 Revised Statutes.

22 Sec. 23. AHCCCS; disproportionate share payments; fiscal year
23 2021-2022

24 A. Disproportionate share payments for fiscal year 2021-2022 made
25 pursuant to section 36-2903.01, subsection 0, Arizona Revised Statutes,
26 include:

27 1. \$113,818,500 for a qualifying nonstate operated public hospital.
28 The Maricopa county special health care district shall provide a certified
29 public expense form for the amount of qualifying disproportionate share
30 hospital expenditures made on behalf of this state to the Arizona health
31 care cost containment system administration on or before May 1, 2022 for
32 all state plan years as required by the Arizona health care cost
33 containment system state plan standard terms and conditions. The
34 administration shall assist the district in determining the amount of
35 qualifying disproportionate share hospital expenditures. Once the
36 administration files a claim with the federal government and receives
37 federal financial participation based on the amount certified by the
38 Maricopa county special health care district, if the certification is
39 equal to or less than \$113,818,500 and the administration determines that
40 the revised amount is correct pursuant to the methodology used by the
41 administration pursuant to section 36-2903.01, Arizona Revised Statutes,
42 the administration shall notify the governor, the president of the senate
43 and the speaker of the house of representatives, shall distribute
44 \$4,202,300 to the Maricopa county special health care district and shall

1 deposit the balance of the federal financial participation in the state
2 general fund. If the certification provided is for an amount less than
3 \$113,818,500 and the administration determines that the revised amount is
4 not correct pursuant to the methodology used by the administration
5 pursuant to section 36-2903.01, Arizona Revised Statutes, the
6 administration shall notify the governor, the president of the senate and
7 the speaker of the house of representatives and shall deposit the total
8 amount of the federal financial participation in the state general fund.
9 If the certification provided is for an amount greater than \$113,818,500,
10 the administration shall distribute \$4,202,300 to the Maricopa county
11 special health care district and shall deposit \$75,482,000 of the federal
12 financial participation in the state general fund. The administration may
13 make additional disproportionate share hospital payments to the Maricopa
14 county special health care district pursuant to section 36-2903.01,
15 subsection P, Arizona Revised Statutes, and subsection B of this section.

16 2. \$28,474,900 for the Arizona state hospital. The Arizona state
17 hospital shall provide a certified public expense form for the amount of
18 qualifying disproportionate share hospital expenditures made on behalf of
19 this state to the administration on or before March 31, 2022. The
20 administration shall assist the Arizona state hospital in determining the
21 amount of qualifying disproportionate share hospital expenditures. Once
22 the administration files a claim with the federal government and receives
23 federal financial participation based on the amount certified by the
24 Arizona state hospital, the administration shall deposit the entire amount
25 of federal financial participation in the state general fund. If the
26 certification provided is for an amount less than \$28,474,900, the
27 administration shall notify the governor, the president of the senate and
28 the speaker of the house of representatives and shall deposit the entire
29 amount of federal financial participation in the state general fund. The
30 certified public expense form provided by the Arizona state hospital must
31 contain both the total amount of qualifying disproportionate share
32 hospital expenditures and the amount limited by section 1923(g) of the
33 social security act.

34 3. \$884,800 for private qualifying disproportionate share
35 hospitals. The Arizona health care cost containment system administration
36 shall make payments to hospitals consistent with this appropriation and
37 the terms of the state plan, but payments are limited to those hospitals
38 that either:

39 (a) Meet the mandatory definition of disproportionate share
40 qualifying hospitals under section 1923 of the social security act.

41 (b) Are located in Yuma county and contain at least three hundred
42 beds.

43 B. After the distributions made pursuant to subsection A of this
44 section, the allocations of disproportionate share hospital payments made

1 pursuant to section 36-2903.01, subsection P, Arizona Revised Statutes,
2 shall be made available first to qualifying private hospitals located
3 outside the Phoenix metropolitan statistical area and the Tucson
4 metropolitan statistical area before being made available to qualifying
5 hospitals within the Phoenix metropolitan statistical area and the Tucson
6 metropolitan statistical area.

7 Sec. 24. AHCCCS transfer; counties; federal monies; fiscal
8 year 2021-2022

9 On or before December 31, 2022, notwithstanding any other law, for
10 fiscal year 2021-2022 the Arizona health care cost containment system
11 administration shall transfer to the counties the portion, if any, as may
12 be necessary to comply with section 10201(c)(6) of the patient protection
13 and affordable care act (P.L. 111-148), regarding the counties'
14 proportional share of this state's contribution.

15 Sec. 25. County acute care contributions; fiscal year 2021-2022

16 A. Notwithstanding section 11-292, Arizona Revised Statutes, for
17 fiscal year 2021-2022 for the provision of hospitalization and medical
18 care, the counties shall contribute the following amounts:

19	1. Apache	\$ 268,800
20	2. Cochise	\$ 2,214,800
21	3. Coconino	\$ 742,900
22	4. Gila	\$ 1,413,200
23	5. Graham	\$ 536,200
24	6. Greenlee	\$ 190,700
25	7. La Paz	\$ 212,100
26	8. Maricopa	\$17,603,700
27	9. Mohave	\$ 1,237,700
28	10. Navajo	\$ 310,800
29	11. Pima	\$14,951,800
30	12. Pinal	\$ 2,715,600
31	13. Santa Cruz	\$ 482,800
32	14. Yavapai	\$ 1,427,800
33	15. Yuma	\$ 1,325,100

34 B. If a county does not provide funding as specified in subsection
35 A of this section, the state treasurer shall subtract the amount owed by
36 the county to the Arizona health care cost containment system fund and the
37 long-term care system fund established by section 36-2913, Arizona Revised
38 Statutes, from any payments required to be made by the state treasurer to
39 that county pursuant to section 42-5029, subsection D, paragraph 2,
40 Arizona Revised Statutes, plus interest on that amount pursuant to section
41 44-1201, Arizona Revised Statutes, retroactive to the first day the
42 funding was due. If the monies the state treasurer withholds are
43 insufficient to meet that county's funding requirements as specified in
44 subsection A of this section, the state treasurer shall withhold from any

1 other monies payable to that county from whatever state funding source is
2 available an amount necessary to fulfill that county's requirement. The
3 state treasurer may not withhold distributions from the Arizona highway
4 user revenue fund pursuant to title 28, chapter 18, article 2, Arizona
5 Revised Statutes.

6 C. Payment of an amount equal to one-twelfth of the total amount
7 determined pursuant to subsection A of this section shall be made to the
8 state treasurer on or before the fifth day of each month. On request from
9 the director of the Arizona health care cost containment system
10 administration, the state treasurer shall require that up to three months'
11 payments be made in advance, if necessary.

12 D. The state treasurer shall deposit the amounts paid pursuant to
13 subsection C of this section and amounts withheld pursuant to subsection B
14 of this section in the Arizona health care cost containment system fund
15 and the long-term care system fund established by section 36-2913, Arizona
16 Revised Statutes.

17 E. If payments made pursuant to subsection C of this section exceed
18 the amount required to meet the costs incurred by the Arizona health care
19 cost containment system for the hospitalization and medical care of those
20 persons defined as an eligible person pursuant to section 36-2901,
21 paragraph 6, subdivisions (a), (b) and (c), Arizona Revised Statutes, the
22 director of the Arizona health care cost containment system administration
23 may instruct the state treasurer either to reduce remaining payments to be
24 paid pursuant to this section by a specified amount or to provide to the
25 counties specified amounts from the Arizona health care cost containment
26 system fund and the long-term care system fund established by section
27 36-2913, Arizona Revised Statutes.

28 F. The legislature intends that the Maricopa county contribution
29 pursuant to subsection A of this section be reduced in each subsequent
30 year according to the changes in the GDP price deflator. For the purposes
31 of this subsection, "GDP price deflator" has the same meaning prescribed
32 in section 41-563, Arizona Revised Statutes.

33 Sec. 26. Department of health services; fee reduction

34 The department of health services shall reduce the revenue generated
35 from fees collected for services provided by the bureau of radiation
36 control by \$300,000.

37 Sec. 27. Proposition 204 administration; exclusion; county
38 expenditure limitations

39 County contributions for the administrative costs of implementing
40 sections 36-2901.01 and 36-2901.04, Arizona Revised Statutes, that are
41 made pursuant to section 11-292, subsection 0, Arizona Revised Statutes,
42 are excluded from the county expenditure limitations.

1 operating the newborn screening program, including contracting for
2 testing, not exceed the direct cost of the tests and the direct costs of
3 operating the program, excluding any gifts, grants or donations or state
4 or federal funding received by the department.

5 Sec. 34. Legislative intent; implementation of program

6 The legislature intends that for fiscal year 2021-2022 the Arizona
7 health care cost containment system administration implement a program
8 within the available appropriation.

9 Sec. 35. Purpose

10 Pursuant to section 41-2955, subsection B, Arizona Revised Statutes,
11 the legislature continues the board of examiners of nursing care
12 institution administrators and assisted living facility managers to
13 promote the safe and professional regulation of nursing care institutions
14 and assisted living facilities in this state.

15 Sec. 36. Retroactivity

16 Section 36-446.04, Arizona Revised Statutes, as amended by this act,
17 section 41-3021.11, Arizona Revised Statutes, as repealed by this act, and
18 section 41-3022.26, Arizona Revised Statutes, as added by this act, apply
19 retroactively to from and after July 1, 2021.