

Senate Engrossed

dental anesthesia; requirements

State of Arizona  
Senate  
Fifty-sixth Legislature  
First Regular Session  
2023

# SENATE BILL 1602

AN ACT

AMENDING SECTIONS 32-1201 AND 32-1207, ARIZONA REVISED STATUTES; AMENDING TITLE 32, CHAPTER 11, ARTICLE 3, ARIZONA REVISED STATUTES, BY ADDING SECTION 32-1272; AMENDING SECTION 32-1403, ARIZONA REVISED STATUTES; AMENDING TITLE 32, CHAPTER 13, ARTICLE 3, ARIZONA REVISED STATUTES, BY ADDING SECTION 32-1459; AMENDING SECTIONS 32-1606, 32-1664 AND 32-1803, ARIZONA REVISED STATUTES; AMENDING TITLE 32, CHAPTER 17, ARTICLE 3, ARIZONA REVISED STATUTES, BY ADDING SECTION 32-1855.02; RELATING TO THE STATE BOARD OF DENTAL EXAMINERS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

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

2 Section 1. Section 32-1201, Arizona Revised Statutes, is amended to  
3 read:

4 32-1201. Definitions

5 In this chapter, unless the context otherwise requires:

6 1. "Affiliated practice dental hygienist" means any licensed dental  
7 hygienist who is able, pursuant to section 32-1289.01, to initiate  
8 treatment based on the dental hygienist's assessment of a patient's needs  
9 according to the terms of a written affiliated practice agreement with a  
10 dentist, to treat the patient without the presence of a dentist and to  
11 maintain a provider-patient relationship.

12 2. "Auxiliary personnel" means all dental assistants, dental  
13 technicians, dental x-ray technicians and other persons employed by  
14 dentists or firms and businesses providing dental services to dentists.

15 3. "Board" means the state board of dental examiners.

16 4. "Business entity" means a business organization that has an  
17 ownership that includes any persons who are not licensed or certified to  
18 provide dental services in this state, that offers to the public  
19 professional services regulated by the board and that is established  
20 pursuant to the laws of any state or foreign country.

21 5. "Dental assistant" means any person who acts as an assistant to  
22 a dentist, dental therapist or dental hygienist by rendering personal  
23 services to a patient that involve close proximity to the patient while  
24 the patient is under treatment or observation or undergoing diagnostic  
25 procedures.

26 6. "Dental hygienist" means any person who is licensed and engaged  
27 in the general practice of dental hygiene and all related and associated  
28 duties, including educational, clinical and therapeutic dental hygiene  
29 procedures.

30 7. "Dental incompetence" means lacking in sufficient dentistry  
31 knowledge or skills, or both, in that field of dentistry in which the  
32 dentist, dental therapist, denturist or dental hygienist concerned  
33 engages, to a degree likely to endanger the health of that person's  
34 patients.

35 8. "Dental laboratory technician" means any person, other than a  
36 licensed dentist, who, pursuant to a written work order of a dentist,  
37 fabricates artificial teeth, prosthetic appliances or other mechanical and  
38 artificial contrivances designed to correct or alleviate injuries or  
39 defects, both developmental and acquired, disorders or deficiencies of the  
40 human oral cavity, teeth, investing tissues, maxilla or mandible or  
41 adjacent associated structures.

42 9. "Dental therapist" means any person who is licensed and engaged  
43 in the general practice of dental therapy and all related and associated  
44 duties, including educational, clinical and therapeutic dental therapy  
45 procedures.

1           10. "Dental x-ray laboratory technician" means any person, other  
2 than a licensed dentist, who, pursuant to a written work order of a  
3 dentist, performs dental and maxillofacial radiography, including  
4 cephalometrics, panoramic and maxillofacial tomography and other dental  
5 related nonfluoroscopic diagnostic imaging modalities.

6           11. "Dentistry", "dentist" and "dental" mean the general practice  
7 of dentistry and all specialties or restricted practices of dentistry.

8           12. "Denturist" means a person practicing denture technology  
9 pursuant to article 5 of this chapter.

10           13. "Disciplinary action" means regulatory sanctions that are  
11 imposed by the board in combination with, or as an alternative to,  
12 revocation or suspension of a license and that may include:

13           (a) Imposition of an administrative penalty in an amount not to  
14 exceed two thousand dollars for each violation of this chapter or rules  
15 adopted under this chapter.

16           (b) Imposition of restrictions on the scope of practice.

17           (c) Imposition of peer review and professional education  
18 requirements.

19           (d) Imposition of censure or probation requirements best adapted to  
20 protect the public welfare, which may include a requirement for  
21 restitution to the patient resulting from violations of this chapter or  
22 rules adopted under this chapter.

23           14. "Irregularities in billing" means submitting any claim, bill or  
24 government assistance claim to any patient, responsible party or  
25 third-party payor for dental services rendered that is materially false  
26 with the intent to receive unearned income as evidenced by any of the  
27 following:

28           (a) Charges for services not rendered.

29           (b) Any treatment date that does not accurately reflect the date  
30 when the service and procedures were actually completed.

31           (c) Any description of a dental service or procedure that does not  
32 accurately reflect the actual work completed.

33           (d) Any charge for a service or procedure that cannot be clinically  
34 justified or determined to be necessary.

35           (e) Any statement that is material to the claim and that the  
36 licensee knows is false or misleading.

37           (f) An abrogation of the copayment provisions of a dental insurance  
38 contract by a waiver of all or a part of the copayment from the patient if  
39 this results in an excessive or fraudulent charge to a third party or if  
40 the waiver is used as an enticement to receive dental services from that  
41 provider. This subdivision does not interfere with a contractual  
42 relationship between a third-party payor and a licensee or business entity  
43 registered with the board.

44           (g) Any other practice in billing that results in excessive or  
45 fraudulent charges to the patient.

1           15. "Letter of concern" means an advisory letter to notify a  
2 licensee or a registered business entity that, while the evidence does not  
3 warrant disciplinary action, the board believes that the licensee or  
4 registered business entity should modify or eliminate certain practices  
5 and that continuation of the activities that led to the information being  
6 submitted to the board may result in board action against the  
7 practitioner's license or the business entity's registration. A letter of  
8 concern is not a disciplinary action. A letter of concern is a public  
9 document and may be used in a future disciplinary action.

10           16. "Licensed" means licensed pursuant to this chapter.

11           17. "Place of practice" means each physical location at which a  
12 person who is licensed pursuant to this chapter performs services subject  
13 to this chapter.

14           18. "Primary mailing address" means the address on file with the  
15 board and to which official board correspondence, notices or documents are  
16 delivered in a manner determined by the board.

17           19. "QUALIFIED ANESTHESIA PROVIDER" MEANS ANY OF THE FOLLOWING:

18           (a) A LICENSEE WHO HOLDS A PERMIT TO ADMINISTER ANESTHESIA AND  
19 SEDATION FROM THE BOARD PURSUANT TO SECTION 32-1207.

20           (b) A PHYSICIAN WHO HAS COMPLETED RESIDENCY TRAINING IN  
21 ANESTHESIOLOGY, WHO IS LICENSED PURSUANT TO CHAPTER 13 OR 17 OF THIS TITLE  
22 AND WHO IS REGISTERED WITH THE ARIZONA MEDICAL BOARD OR THE ARIZONA BOARD  
23 OF OSTEOPATHIC EXAMINERS IN MEDICINE AND SURGERY TO ADMINISTER ANESTHESIA  
24 IN DENTAL OFFICES AND DENTAL CLINICS PURSUANT TO SECTION 32-1403 OR  
25 32-1803.

26           (c) A CERTIFIED REGISTERED NURSE ANESTHETIST WHO HAS A NATIONAL  
27 BOARD CERTIFICATION IN ANESTHESIOLOGY, WHO IS LICENSED PURSUANT TO CHAPTER  
28 15 OF THIS TITLE AND WHO IS REGISTERED WITH THE ARIZONA STATE BOARD OF  
29 NURSING TO ADMINISTER ANESTHESIA IN DENTAL OFFICES AND DENTAL CLINICS  
30 PURSUANT TO SECTION 32-1606.

31           ~~19.~~ 20. "Recognized dental hygiene school" means a school that has  
32 a dental hygiene program with a minimum two academic year curriculum, or  
33 the equivalent of four semesters, and that is approved by the board and  
34 accredited by the American dental association commission on dental  
35 accreditation.

36           ~~20.~~ 21. "Recognized dental school" means a dental school that is  
37 accredited by the American dental association commission on dental  
38 accreditation.

39           ~~21.~~ 22. "Recognized dental therapy school" means a school that is  
40 accredited or that has received initial accreditation by the American  
41 dental association commission on dental accreditation.

42           ~~22.~~ 23. "Recognized denturist school" means a denturist school  
43 that maintains standards of entrance, study and graduation and that is  
44 accredited by the United States department of education or the council on  
45 higher education accreditation.



1 (c) If the board has required additional nondisciplinary continuing  
2 education pursuant to section 32-1263.01 but has not taken further action,  
3 the record of the complaint shall be available to the public only for a  
4 period of five years after the licensee satisfies this requirement.

5 (d) If the board has assessed a nondisciplinary civil penalty  
6 pursuant to section 32-1208 but has not taken further action, the record  
7 of the complaint shall be available to the public only for a period of  
8 five years after the licensee satisfies this requirement.

9 4. Establish a uniform and reasonable standard of minimum  
10 educational requirements consistent with the accreditation standards of  
11 the American dental association commission on dental accreditation to be  
12 observed by dental schools, dental therapy schools and dental hygiene  
13 schools in order to be classified as recognized dental schools, dental  
14 therapy schools or dental hygiene schools.

15 5. Establish a uniform and reasonable standard of minimum  
16 educational requirements that are consistent with the accreditation  
17 standards of the United States department of education or the council on  
18 higher education accreditation and that must be observed by denture  
19 technology schools in order to be classified as recognized denture  
20 technology schools.

21 6. Determine the reputability and classification of dental schools,  
22 dental therapy schools, dental hygiene schools and denture technology  
23 schools in accordance with their compliance with the standard set forth in  
24 paragraph 4 or 5 of this subsection, whichever is applicable.

25 7. Issue licenses to persons who the board determines are eligible  
26 for licensure pursuant to this chapter.

27 8. Determine the eligibility of applicants for restricted permits  
28 and issue restricted permits to those found eligible.

29 9. Pursuant to section 32-1263.02, investigate charges of  
30 misconduct on the part of licensees and persons to whom restricted permits  
31 have been issued.

32 10. Issue a letter of concern, which is not a disciplinary action  
33 but refers to practices that may lead to a violation and to disciplinary  
34 action.

35 11. Issue decrees of censure, fix periods and terms of probation,  
36 suspend or revoke licenses, certificates and restricted permits, as the  
37 facts may warrant, and reinstate licenses, certificates and restricted  
38 permits in proper cases.

39 12. Collect and disburse monies.

40 13. Perform all other duties that are necessary to enforce this  
41 chapter and that are not specifically or by necessary implication  
42 delegated to another person.

43 14. Establish criteria for the renewal of permits issued pursuant  
44 to board rules relating to general anesthesia and sedation.

- 1           B. The board may:
- 2           1. Sue and be sued.
- 3           2. Issue subpoenas, including subpoenas to the custodian of patient
- 4 records, compel attendance of witnesses, administer oaths and take
- 5 testimony concerning all matters within the board's jurisdiction. If a
- 6 person refuses to obey a subpoena issued by the board, the refusal shall
- 7 be certified to the superior court and proceedings shall be instituted for
- 8 contempt of court.
- 9           3. Adopt rules:
- 10           (a) Prescribing requirements for continuing education for renewal
- 11 of all licenses issued pursuant to this chapter.
- 12           (b) Prescribing educational and experience prerequisites for
- 13 administering intravenous or intramuscular drugs for the purpose of
- 14 sedation or for using general anesthetics in conjunction with a dental
- 15 treatment procedure.
- 16           (c) Prescribing requirements for obtaining licenses for retired
- 17 licensees or licensees who have a disability, including the triennial
- 18 license renewal fee.
- 19           4. Hire consultants to assist the board in the performance of its
- 20 duties and employ persons to provide investigative, professional and
- 21 clerical assistance as the board deems necessary.
- 22           5. Contract with other state or federal agencies as required to
- 23 carry out the purposes of this chapter.
- 24           6. If determined by the board, order physical, psychological,
- 25 psychiatric and competency evaluations of licensed dentists, dental
- 26 therapists and dental hygienists, certified denturists and applicants for
- 27 licensure and certification at the expense of those individuals.
- 28           7. Establish an investigation committee consisting of not more than
- 29 eleven licensees who are in good standing, who are appointed by the board
- 30 and who serve at the pleasure of the board to investigate any complaint
- 31 submitted to the board, initiated by the board or delegated by the board
- 32 to the investigation committee pursuant to this chapter.
- 33           C. The executive director or the executive director's designee may:
- 34           1. Issue and renew licenses, certificates and permits to applicants
- 35 who meet the requirements of this chapter.
- 36           2. Initiate an investigation if evidence appears to demonstrate
- 37 that a dentist, dental therapist, dental hygienist, denturist or
- 38 restricted permit holder may be engaged in unprofessional conduct or may
- 39 be unable to safely practice dentistry.
- 40           3. Initiate an investigation if evidence appears to demonstrate
- 41 that a business entity may be engaged in unethical conduct.
- 42           4. Subject to board approval, enter into a consent agreement with a
- 43 dentist, dental therapist, denturist, dental hygienist or restricted
- 44 permit holder if there is evidence of unprofessional conduct.

1           5. Subject to board approval, enter into a consent agreement with a  
2 business entity if there is evidence of unethical conduct.

3           6. Refer cases to the board for a formal interview.

4           7. If delegated by the board, enter into a stipulation agreement  
5 with a person under the board's jurisdiction for the treatment,  
6 rehabilitation and monitoring of chemical substance abuse or misuse.

7           D. Members of the board are personally immune from liability with  
8 respect to all acts done and actions taken in good faith and within the  
9 scope of their authority.

10          E. The board by rule shall require that a licensee obtain a permit  
11 for applying general anesthesia, ~~semiconscious sedation or conscious~~ AND  
12 sedation, shall establish and collect a fee of not more than \$300 to cover  
13 administrative costs connected with issuing the permit and shall conduct  
14 inspections to ensure compliance.

15          F. A LICENSEE WHO HAS OBTAINED A PERMIT PURSUANT TO SUBSECTION E OF  
16 THIS SECTION MAY PERFORM DENTAL PROCEDURES ON A PATIENT WHO RECEIVES  
17 ANESTHESIA OR SEDATION ADMINISTERED BY A QUALIFIED ANESTHESIA PROVIDER WHO  
18 IS EXCLUSIVELY RESPONSIBLE FOR THE PREOPERATIVE, INTRAOPERATIVE AND  
19 POSTOPERATIVE ANESTHETIC MANAGEMENT OF THE PATIENT.

20          ~~F.~~ G. The board by rule may establish and collect fees for license  
21 verification, board meeting agendas and minutes, published lists and  
22 mailing labels.

23          ~~G.~~ H. This section does not prohibit the board from conducting its  
24 authorized duties in a public meeting.

25          ~~H.~~ I. For the purposes of this section:

26           1. "Good standing" means that a person holds an unrestricted and  
27 unencumbered license that has not been suspended or revoked pursuant to  
28 this chapter.

29           2. "Record of complaint" means the document reflecting the final  
30 disposition of a complaint or investigation.

31          Sec. 3. Title 32, chapter 11, article 3, Arizona Revised Statutes,  
32 is amended by adding section 32-1272, to read:

33          32-1272. Dental anesthesia; requirements

34          A. A DENTAL OFFICE OR DENTAL CLINIC AT WHICH GENERAL ANESTHESIA OR  
35 SEDATION IS ADMINISTERED MUST CONTAIN PROPERLY OPERATING EQUIPMENT AND  
36 SUPPLIES AS PRESCRIBED BY THE BOARD IN RULE AND HAVE PROPER EMERGENCY  
37 RESPONSE PROTOCOLS IN PLACE, INCLUDING ADVANCED CARDIAC LIFE SUPPORT AND  
38 AIRWAY MANAGEMENT, WHEN ADMINISTERING GENERAL ANESTHESIA OR SEDATION.

39          B. A QUALIFIED ANESTHESIA PROVIDER SHALL CONFIRM THAT THE DENTIST  
40 WHO OWNS THE DENTAL OFFICE OR DENTAL CLINIC WHERE GENERAL ANESTHESIA OR  
41 SEDATION IS BEING ADMINISTERED HOLDS THE REQUIRED PERMIT ISSUED BY THE  
42 BOARD.

43          C. A DENTAL OFFICE OR DENTAL CLINIC THAT USES A QUALIFIED  
44 ANESTHESIA PROVIDER SHALL CONFIRM THAT THE QUALIFIED ANESTHESIA PROVIDER  
45 HOLDS A VALID, CURRENT LICENSE IN GOOD STANDING WITH NO RESTRICTIONS AND



1 HOLDS A PERMIT OR IS REGISTERED TO ADMINISTER GENERAL ANESTHESIA OR  
2 SEDATION IN THAT SETTING.

3 D. A QUALIFIED ANESTHESIA PROVIDER WHO IS LICENSED BY THE BOARD AND  
4 WHO FAILS TO COMPLY WITH THE REQUIREMENTS OF THIS SECTION COMMITS AN ACT  
5 THAT CONSTITUTES A DANGER TO THE HEALTH, WELFARE OR SAFETY OF THE PUBLIC  
6 PURSUANT TO SECTION 32-1201.01.

7 E. IF A QUALIFIED ANESTHESIA PROVIDER WHO IS NOT LICENSED BY THE  
8 STATE BOARD OF DENTAL EXAMINERS FAILS TO COMPLY WITH THE REQUIREMENTS OF  
9 THIS SECTION, THE STATE BOARD OF DENTAL EXAMINERS SHALL PROMPTLY REPORT  
10 THE QUALIFIED ANESTHESIA PROVIDER'S CONDUCT TO THE REGULATORY BOARD THAT  
11 LICENSES THE QUALIFIED ANESTHESIA PROVIDER. IF AN ADVERSE ANESTHESIA  
12 OUTCOME INVOLVES A QUALIFIED ANESTHESIA PROVIDER WHO IS NOT LICENSED BY  
13 THE STATE BOARD OF DENTAL EXAMINERS, THE STATE BOARD OF DENTAL EXAMINERS  
14 SHALL PROMPTLY REPORT THE ADVERSE ANESTHESIA OUTCOME TO THE REGULATORY  
15 BOARD THAT LICENSES THE QUALIFIED ANESTHESIA PROVIDER.

16 F. IF A DEATH OR AN INCIDENT REQUIRING EMERGENCY MEDICAL RESPONSE  
17 OCCURS IN A DENTAL OFFICE OR DENTAL CLINIC DURING THE ADMINISTRATION OF OR  
18 RECOVERY FROM GENERAL ANESTHESIA OR SEDATION BY A QUALIFIED ANESTHESIA  
19 PROVIDER, THE TREATING DENTIST SHALL SUBMIT A COMPLETE REPORT OF THE  
20 INCIDENT TO THE STATE BOARD OF DENTAL EXAMINERS WITHIN THREE BUSINESS DAYS  
21 AFTER THE OCCURRENCE. IF THE INCIDENT INVOLVES A QUALIFIED ANESTHESIA  
22 PROVIDER WHO IS NOT LICENSED BY THE STATE BOARD OF DENTAL EXAMINERS, THE  
23 STATE BOARD OF DENTAL EXAMINERS SHALL IMMEDIATELY FORWARD A COPY OF THE  
24 INCIDENT REPORT TO THE REGULATORY BOARD THAT LICENSES THE QUALIFIED  
25 ANESTHESIA PROVIDER.

26 Sec. 4. Section 32-1403, Arizona Revised Statutes, is amended to  
27 read:

28 32-1403. Powers and duties of the board; compensation;  
29 immunity; committee on executive director  
30 selection and retention

31 A. The primary duty of the board is to protect the public from  
32 unlawful, incompetent, unqualified, impaired or unprofessional  
33 practitioners of allopathic medicine through licensure, regulation and  
34 rehabilitation of the profession in this state. The powers and duties of  
35 the board include:

36 1. Ordering and evaluating physical, psychological, psychiatric and  
37 competency testing of licensed physicians and candidates for licensure as  
38 may be determined necessary by the board.

39 2. Initiating investigations and determining on ~~its~~ THE BOARD'S own  
40 motion whether a doctor of medicine has engaged in unprofessional conduct  
41 or provided incompetent medical care or is mentally or physically unable  
42 to engage in the practice of medicine.

43 3. Developing and recommending standards governing the profession.

1           4. Reviewing the credentials and the abilities of applicants whose  
2 professional records or physical or mental capabilities may not meet the  
3 requirements for licensure or registration as prescribed in article 2 of  
4 this chapter in order for the board to make a final determination whether  
5 the applicant meets the requirements for licensure pursuant to this  
6 chapter.

7           5. Disciplining and rehabilitating physicians.

8           6. Engaging in a full exchange of information with the licensing  
9 and disciplinary boards and medical associations of other states and  
10 jurisdictions of the United States and foreign countries and the Arizona  
11 medical association and its components.

12           7. Directing the preparation and circulation of educational  
13 material the board determines is helpful and proper for licensees.

14           8. Adopting rules regarding the regulation and the qualifications  
15 of doctors of medicine.

16           9. Establishing fees and penalties as provided pursuant to section  
17 32-1436.

18           10. Delegating to the executive director the board's authority  
19 pursuant to section 32-1405 or 32-1451. The board shall adopt substantive  
20 policy statements pursuant to section 41-1091 for each specific licensing  
21 and regulatory authority the board delegates to the executive director.

22           11. Determining whether a prospective or current Arizona licensed  
23 physician has the training or experience to demonstrate the physician's  
24 ability to treat and manage opiate-dependent patients as a qualifying  
25 physician pursuant to 21 United States Code section 823(g)(2)(G)(ii).

26           12. ISSUING REGISTRATIONS TO ADMINISTER GENERAL ANESTHESIA AND  
27 SEDATION IN DENTAL OFFICES AND DENTAL CLINICS PURSUANT TO SECTION 32-1272  
28 TO DOCTORS OF MEDICINE WHO HAVE COMPLETED RESIDENCY TRAINING IN  
29 ANESTHESIOLOGY.

30           B. The board may appoint one of its members to the jurisdiction  
31 arbitration panel pursuant to section 32-2907, subsection B.

32           C. There shall be no monetary liability on the part of and no cause  
33 of action shall arise against the executive director or such other  
34 permanent or temporary personnel or professional medical investigators for  
35 any act done or proceeding undertaken or performed in good faith and in  
36 furtherance of the purposes of this chapter.

37           D. In conducting its investigations pursuant to subsection A,  
38 paragraph 2 of this section, the board may receive and review staff  
39 reports relating to complaints and malpractice claims.

40           E. The board shall establish a program that is reasonable and  
41 necessary to educate doctors of medicine regarding the uses and advantages  
42 of autologous blood transfusions.

43           F. The board may make statistical information on doctors of  
44 medicine and applicants for licensure under this article available to  
45 academic and research organizations.

1 G. The committee on executive director selection and retention is  
2 established consisting of the Arizona medical board and the chairperson  
3 and vice chairperson of the Arizona regulatory board of physician  
4 assistants. The committee is a public body and is subject to the  
5 requirements of title 38, chapter 3, article 3.1. The committee is  
6 responsible for appointing the executive director pursuant to section  
7 32-1405. All members of the committee are voting members of the  
8 committee. The committee shall elect a chairperson and a vice chairperson  
9 when the committee meets but ~~no~~ NOT more frequently than once a year. The  
10 chairperson shall call meetings of the committee as necessary, and the  
11 vice chairperson may call meetings of the committee that are necessary if  
12 the chairperson is not available. The presence of eight members of the  
13 committee at a meeting constitutes a quorum. The committee meetings may  
14 be held using communications equipment that allows all members who are  
15 participating in the meeting to hear each other. If any discussions occur  
16 in an executive session of the committee, notwithstanding the requirement  
17 that discussions made at an executive session be kept confidential as  
18 specified in section 38-431.03, the chairperson and vice chairperson of  
19 the Arizona regulatory board of physician assistants may discuss this  
20 information with the Arizona regulatory board of physician assistants in  
21 executive session. This disclosure of executive session information to  
22 the Arizona regulatory board of physician assistants does not constitute a  
23 waiver of confidentiality or any privilege, including the attorney-client  
24 privilege.

25 H. The officers of the Arizona medical board and the Arizona  
26 regulatory board of physician assistants shall meet twice a year to  
27 discuss matters of mutual concern and interest.

28 I. The board may accept and expend grants, gifts, devises and other  
29 contributions from any public or private source, including the federal  
30 government. Monies received under this subsection do not revert to the  
31 state general fund at the end of a fiscal year.

32 Sec. 5. Title 32, chapter 13, article 3, Arizona Revised Statutes,  
33 is amended by adding section 32-1459, to read:

34 32-1459. Duty to report

35 IF A DEATH OR AN INCIDENT REQUIRING EMERGENCY MEDICAL RESPONSE  
36 OCCURS IN A DENTAL OFFICE OR DENTAL CLINIC DURING THE ADMINISTRATION OF OR  
37 RECOVERY FROM GENERAL ANESTHESIA OR SEDATION BY A DOCTOR OF MEDICINE, THE  
38 DOCTOR OF MEDICINE SHALL, AND ANY OTHER PERSON MAY, REPORT THE DEATH OR  
39 INCIDENT TO THE BOARD WITHIN THREE BUSINESS DAYS AFTER THE OCCURRENCE.

40 Sec. 6. Section 32-1606, Arizona Revised Statutes, is amended to  
41 read:

42 32-1606. Powers and duties of board

43 A. The board may:

44 1. Adopt and revise rules necessary to carry into effect this  
45 chapter.

- 1           2. Publish advisory opinions regarding registered and practical  
2 nursing practice and nursing education.
- 3           3. Issue limited licenses or certificates if it determines that an  
4 applicant or licensee cannot function safely in a specific setting or  
5 within the full scope of practice.
- 6           4. Refer criminal violations of this chapter to the appropriate law  
7 enforcement agency.
- 8           5. Establish a confidential program for monitoring licensees who  
9 are chemically dependent and who enroll in rehabilitation programs that  
10 meet the criteria established by the board. The board may take further  
11 action if the licensee refuses to enter into a stipulated agreement or  
12 fails to comply with its terms. In order to protect the public health and  
13 safety, the confidentiality requirements of this paragraph do not apply if  
14 the licensee does not comply with the stipulated agreement.
- 15           6. On the applicant's or regulated party's request, establish a  
16 payment schedule with the applicant or regulated party.
- 17           7. Provide education regarding board functions.
- 18           8. Collect or assist in collecting workforce data.
- 19           9. Adopt rules to conduct pilot programs consistent with public  
20 safety for innovative applications in nursing practice, education and  
21 regulation.
- 22           10. Grant retirement status on request to retired nurses who are or  
23 were licensed under this chapter, who have no open complaint or  
24 investigation pending against them and who are not subject to discipline.
- 25           11. Accept and spend federal monies and private grants, gifts,  
26 contributions and devises to assist in carrying out the purposes of this  
27 chapter. These monies do not revert to the state general fund at the end  
28 of the fiscal year.
- 29           B. The board shall:
  - 30           1. Approve regulated training and educational programs that meet  
31 the requirements of this chapter and rules adopted by the board.
  - 32           2. By rule, establish approval and reapproval processes for nursing  
33 and nursing assistant training programs that meet the requirements of this  
34 chapter and board rules.
  - 35           3. Prepare and maintain a list of approved nursing programs to  
36 prepare registered **NURSES** and practical nurses whose graduates are  
37 eligible for licensing under this chapter as registered nurses or as  
38 practical nurses if they satisfy the other requirements of this chapter  
39 and board rules.
  - 40           4. Examine qualified registered **NURSE** and practical nurse  
41 applicants.
  - 42           5. License and renew the licenses of qualified registered **NURSE** and  
43 practical nurse applicants and licensed nursing assistants who are not  
44 qualified to be licensed by the executive director.
  - 45           6. Adopt a seal, which the executive director shall keep.

1           7. Keep a record of all proceedings.

2           8. For proper cause, deny or rescind approval of a regulated  
3 training or educational program for failure to comply with this chapter or  
4 the rules of the board.

5           9. Adopt rules to approve credential evaluation services that  
6 evaluate the qualifications of applicants who graduated from an  
7 international nursing program.

8           10. Determine and administer appropriate disciplinary action  
9 against all regulated parties who are found guilty of violating this  
10 chapter or rules adopted by the board.

11           11. Perform functions necessary to carry out the requirements of  
12 THE nursing assistant and nurse aide training and competency evaluation  
13 program as set forth in the omnibus budget reconciliation act of 1987  
14 (P.L. 100-203; 101 Stat. 1330), as amended by the medicare catastrophic  
15 coverage act of 1988 (P.L. 100-360; 102 Stat. 683). These functions shall  
16 include:

17           (a) Testing and registering certified nursing assistants.

18           (b) Testing and licensing licensed nursing assistants.

19           (c) Maintaining a list of board-approved training programs.

20           (d) Maintaining a registry of nursing assistants for all certified  
21 nursing assistants and licensed nursing assistants.

22           (e) Assessing fees.

23           12. Adopt rules establishing ~~those~~ acts that may be performed by a  
24 registered nurse practitioner or certified nurse midwife, except that the  
25 board does not have authority to decide scope of practice relating to  
26 abortion as defined in section 36-2151.

27           13. Adopt rules that prohibit registered nurse practitioners,  
28 clinical nurse specialists or certified nurse midwives from dispensing a  
29 schedule II controlled substance that is an opioid, except for an  
30 implantable device or an opioid that is for medication-assisted treatment  
31 for substance use disorders.

32           14. Adopt rules establishing educational requirements to certify  
33 school nurses.

34           15. Publish copies of board rules and distribute these copies on  
35 request.

36           16. Require each applicant for initial licensure or certification  
37 to submit a full set of fingerprints to the board for the purpose of  
38 obtaining a state and federal criminal records check pursuant to section  
39 41-1750 and Public Law 92-544. The department of public safety may  
40 exchange this fingerprint data with the federal bureau of investigation.

41           17. Except for a licensee who has been convicted of a felony that  
42 has been designated a misdemeanor pursuant to section 13-604, revoke a  
43 license of a person, revoke the multistate licensure privilege of a person  
44 pursuant to section 32-1669 or not issue a license or renewal to an  
45 applicant who has one or more felony convictions and who has not received

1 an absolute discharge from the sentences for all felony convictions three  
2 or more years before the date of filing an application pursuant to this  
3 chapter.

4 18. Establish standards to approve and reapprove REGISTERED nurse  
5 practitioner and clinical nurse specialist programs and provide for  
6 surveys of REGISTERED nurse practitioner and clinical nurse specialist  
7 programs as ~~+~~ THE BOARD deems necessary.

8 19. Provide the licensing authorities of health care institutions,  
9 facilities and homes with any information the board receives regarding  
10 practices that place a patient's health at risk.

11 20. Limit the multistate licensure privilege of any person who  
12 holds or applies for a license in this state pursuant to section 32-1668.

13 21. Adopt rules to establish competency standards for obtaining and  
14 maintaining a license.

15 22. Adopt rules to qualify and certify clinical nurse specialists.

16 23. Adopt rules to approve and reapprove refresher courses for  
17 nurses who are not currently practicing.

18 24. Maintain a list of approved medication assistant training  
19 programs.

20 25. Test and certify medication assistants.

21 26. Maintain a registry and disciplinary record of medication  
22 assistants who are certified pursuant to this chapter.

23 27. Adopt rules to establish the requirements for a clinical nurse  
24 specialist to prescribe and dispense drugs and devices consistent with  
25 section 32-1651 and within the clinical nurse specialist's population or  
26 disease focus.

27 28. ISSUE REGISTRATIONS TO ADMINISTER GENERAL ANESTHESIA AND  
28 SEDATION IN DENTAL OFFICES AND DENTAL CLINICS PURSUANT TO SECTION 32-1272  
29 TO CERTIFIED REGISTERED NURSE ANESTHETISTS WHO HAVE NATIONAL BOARD  
30 CERTIFICATION IN ANESTHESIOLOGY.

31 C. The board may conduct an investigation on receipt of information  
32 that indicates that a person or regulated party may have violated this  
33 chapter or a rule adopted pursuant to this chapter. Following the  
34 investigation, the board may take disciplinary action pursuant to this  
35 chapter.

36 D. The board may limit, revoke or suspend the privilege of a nurse  
37 to practice in this state granted pursuant to section 32-1668.

38 E. Failure to comply with any final order of the board, including  
39 an order of censure or probation, is cause for suspension or revocation of  
40 a license or a certificate.

41 F. The president or a member of the board designated by the  
42 president may administer oaths in transacting the business of the board.

1           Sec. 7. Section 32-1664, Arizona Revised Statutes, is amended to  
2 read:

3           32-1664. Investigation; hearing; notice

4           A. In connection with an investigation, the board or its duly  
5 authorized agents or employees may obtain any documents, reports, records,  
6 papers, books and materials, including hospital records, medical staff  
7 records and medical staff review committee records, or any other physical  
8 evidence that indicates that a person or regulated party may have violated  
9 this chapter or a rule adopted pursuant to this chapter:

10           1. By entering the premises, at any reasonable time, and inspecting  
11 and copying materials in the possession of a regulated party that relate  
12 to nursing competence, unprofessional conduct or ~~THE~~ mental or physical  
13 ability of a licensee to safely practice nursing.

14           2. By issuing a subpoena under the board's seal to require the  
15 attendance and testimony of witnesses or to demand the production for  
16 examination or copying of documents or any other physical evidence.  
17 Within five days after a person is served with a subpoena, that person may  
18 petition the board to revoke, limit or modify the subpoena. The board  
19 shall do so if in its opinion the evidence required does not relate to  
20 unlawful practices covered by this chapter, is not relevant to the charge  
21 that is the subject matter of the hearing or investigation or does not  
22 describe with sufficient particularity the physical evidence whose  
23 production is required.

24           3. By submitting a written request for the information.

25           4. In the case of an applicant's or a regulated party's personal  
26 medical records, as defined in section 12-2291, by any means ~~permitted~~  
27 ~~ALLOWED~~ by this section if the board either:

28           (a) Obtains from the applicant or regulated party, or the health  
29 care decision maker of the applicant or regulated party, a written  
30 authorization that satisfies the requirements of title 12, chapter 13,  
31 article 7.1.

32           (b) Reasonably believes that the records relate to information  
33 already in the board's possession regarding the competence, unprofessional  
34 conduct or mental or physical ability of the applicant or regulated party  
35 as it pertains to safe practice. If the board adopts a substantive policy  
36 statement pursuant to section 41-1091, it may authorize the executive  
37 director, or a designee in the absence of the executive director, to make  
38 the determination of reasonable belief.

39           B. A regulated party and a health care institution as defined in  
40 section 36-401 shall, and any other person may, report to the board any  
41 information the licensee, certificate holder, health care institution or  
42 individual may have that appears to show that a regulated party or  
43 applicant is, was or may be a threat to the public health or safety.

1 C. IF A DEATH OR AN INCIDENT REQUIRING EMERGENCY MEDICAL RESPONSE  
2 OCCURS IN A DENTAL OFFICE OR DENTAL CLINIC DURING THE ADMINISTRATION OF OR  
3 RECOVERY FROM GENERAL ANESTHESIA OR SEDATION BY A CERTIFIED REGISTERED  
4 NURSE ANESTHETIST, THE CERTIFIED REGISTERED NURSE ANESTHETIST SHALL, AND  
5 ANY OTHER PERSON MAY, REPORT THE DEATH OR INCIDENT TO THE BOARD WITHIN  
6 THREE BUSINESS DAYS AFTER THE OCCURRENCE.

7 ~~E.~~ D. The board retains jurisdiction to proceed with an  
8 investigation or a disciplinary proceeding against a regulated party whose  
9 license or certificate expired not more than five years before the board  
10 initiates the investigation.

11 ~~D.~~ E. Any regulated party, health care institution or other person  
12 that reports or provides information to the board in good faith is not  
13 subject to civil liability. If requested the board shall not disclose the  
14 name of the reporter unless the information is essential to proceedings  
15 conducted pursuant to this section.

16 ~~E.~~ F. Any regulated party or person who is subject to an  
17 investigation may obtain representation by counsel.

18 ~~F.~~ G. On determination of reasonable cause, the board, or if  
19 delegated by the board the executive director, may require a licensee,  
20 certificate holder or applicant to undergo at the expense of the licensee,  
21 certificate holder or applicant any combination of mental, physical or  
22 psychological examinations, assessments or skills evaluations necessary to  
23 determine the person's competence or ability to practice safely. These  
24 examinations may include bodily fluid testing and other examinations known  
25 to detect the presence of alcohol or drugs. If the executive director  
26 orders the licensee, applicant or certificate holder to undertake an  
27 examination, assessment or evaluation pursuant to this subsection, and the  
28 licensee, certificate holder or applicant fails to affirm to the board in  
29 writing within fifteen days after receipt of the notice of the order that  
30 the licensee, certificate holder or applicant intends to comply with the  
31 order, the executive director shall refer the matter to the board to  
32 ~~permit~~ ALLOW the board to determine whether to issue an order pursuant to  
33 this subsection. At each regular meeting of the board the executive  
34 director shall report to the board data concerning orders issued by the  
35 executive director pursuant to this subsection since the last regular  
36 meeting of the board and any other data requested by the board.

37 ~~G.~~ H. The board shall provide the investigative report if  
38 requested pursuant to section 32-3206.

39 ~~H.~~ I. If after completing its investigation the board finds that  
40 the information provided pursuant to this section is not of sufficient  
41 seriousness to merit disciplinary action against the regulated party or  
42 applicant, it may take either of the following actions:

- 43 1. Dismiss if in the opinion of the board the information is  
44 without merit.



1           2. File a letter of concern if in the opinion of the board there is  
2 insufficient evidence to support disciplinary action against the regulated  
3 party or applicant but sufficient evidence for the board to notify the  
4 regulated party or applicant of its concern.

5           ~~I.~~ J. Except as provided pursuant to section 32-1663, subsection F  
6 and subsection ~~J.~~ K of this section, if the investigation in the opinion  
7 of the board reveals reasonable grounds to support the charge, the  
8 regulated party is entitled to an administrative hearing pursuant to title  
9 41, chapter 6, article 10. If notice of the hearing is served by  
10 certified mail, service is complete on the date the notice is placed in  
11 the mail.

12           ~~J.~~ K. A regulated party shall respond in writing to the board  
13 within thirty days after notice of the hearing is served as prescribed in  
14 subsection ~~I.~~ J of this section. The board may consider a regulated  
15 party's failure to respond within this time as an admission by default to  
16 the allegations stated in the complaint. The board may then take  
17 disciplinary actions allowed by this chapter without conducting a hearing.

18           ~~K.~~ L. An administrative law judge or a panel of board members may  
19 conduct hearings pursuant to this section.

20           ~~L.~~ M. In any matters pending before it, the board may issue  
21 subpoenas under its seal to compel the attendance of witnesses.

22           ~~M.~~ N. Patient records, including clinical records, medical  
23 reports, laboratory statements and reports, any file, film, other report  
24 or oral statement relating to diagnostic findings or treatment of  
25 patients, any information from which a patient or a patient's family might  
26 be identified or information received and records kept by the board as a  
27 result of the investigation procedure outlined in this chapter are not  
28 available to the public and are not subject to discovery in civil or  
29 criminal proceedings.

30           ~~N.~~ O. Hospital records, medical staff records, medical staff  
31 review committee records, testimony concerning these records and  
32 proceedings related to the creation of these records shall not be  
33 available to the public. They shall be kept confidential by the board and  
34 shall be subject to the same provisions concerning discovery and use in  
35 legal actions as are the original records in the possession and control of  
36 hospitals, their medical staffs and their medical staff review committees.  
37 The board shall use these records and testimony during the course of  
38 investigations and proceedings pursuant to this chapter.

39           ~~O.~~ P. If the regulated party is found to have committed an act of  
40 unprofessional conduct or to have violated this chapter or a rule adopted  
41 pursuant to this chapter, the board may take disciplinary action.

42           ~~P.~~ Q. The board may subsequently issue a denied license or  
43 certificate and may reissue a revoked or voluntarily surrendered license  
44 or certificate.

1           ~~Q.~~ R. On application by the board to any superior court judge, a  
2 person who without just cause fails to comply with a subpoena issued  
3 pursuant to this section may be ordered by the judge to comply with the  
4 subpoena and punished by the court for failing to comply. Subpoenas shall  
5 be served by regular or certified mail or in the manner required by the  
6 Arizona rules of civil procedure.

7           ~~R.~~ S. The board may share investigative information that is  
8 confidential under subsections ~~M~~ N and ~~N~~ O of this section with other  
9 state, federal and international health care agencies and with state,  
10 federal and international law enforcement authorities if the recipient is  
11 subject to confidentiality requirements similar to those established by  
12 this section. A disclosure made by the board pursuant to this subsection  
13 is not a waiver of the confidentiality requirements established by this  
14 section.

15           Sec. 8. Section 32-1803, Arizona Revised Statutes, is amended to  
16 read:

17           32-1803. Powers and duties

18           A. The board shall:

19           1. Protect the public from unlawful, incompetent, unqualified,  
20 impaired and unprofessional practitioners of osteopathic medicine.

21           2. Issue licenses, conduct hearings, place physicians on probation,  
22 revoke or suspend licenses, enter into stipulated orders, issue letters of  
23 concern or decrees of censure and administer and enforce this chapter.

24           3. Maintain a record of its acts and proceedings, including the  
25 issuance, denial, renewal, suspension or revocation of licenses to  
26 practice according to this chapter. The board shall delete records of  
27 complaints only as follows:

28           (a) If the board dismisses a complaint, the board shall delete the  
29 public record of the complaint five years after ~~it~~ THE BOARD dismissed the  
30 complaint.

31           (b) If the board has issued a letter of concern but has taken no  
32 further action on the complaint, the board shall delete the public record  
33 of the complaint five years after ~~it~~ THE BOARD issued the letter of  
34 concern.

35           (c) If the board has required additional continuing medical  
36 education pursuant to section 32-1855 but has not taken further action,  
37 the board shall delete the public record of the complaint five years after  
38 the person satisfies this requirement.

39           4. Maintain a public directory of all ~~osteopathic~~ physicians and  
40 surgeons who are or were licensed pursuant to this chapter that includes:

41           (a) The name of the physician.

42           (b) The physician's current or last known address of record.

43           (c) The date and number of the license issued to the physician  
44 pursuant to this chapter.

1 (d) The date the license is scheduled to expire if not renewed or  
2 the date the license expired or was revoked, suspended or canceled.

3 (e) Any disciplinary actions taken against the physician by the  
4 board.

5 (f) Letters of concern, remedial continuing medical education  
6 ordered and dismissals of complaints against the physician until deleted  
7 from the public record pursuant to paragraph 3 of this subsection.

8 5. Adopt rules regarding the regulation, qualifications and  
9 training of medical assistants. The training requirements for a medical  
10 assistant may be satisfied through a training program that meets all of  
11 the following:

12 (a) Is designed and offered by a physician.

13 (b) Meets or exceeds any of the approved training program  
14 requirements specified in rule.

15 (c) Verifies the entry-level competencies of a medical assistant as  
16 prescribed by rule.

17 (d) Provides written verification to the individual of successful  
18 completion of the program.

19 6. Discipline and rehabilitate osteopathic physicians.

20 7. Determine whether a prospective or current Arizona licensed  
21 physician has the training or experience to demonstrate the physician's  
22 ability to treat and manage opiate-dependent patients as a qualifying  
23 physician pursuant to 21 United States Code section 823(g)(2)(G)(ii).

24 8. ISSUE REGISTRATIONS TO ADMINISTER GENERAL ANESTHESIA AND  
25 SEDATION IN DENTAL OFFICES AND DENTAL CLINICS PURSUANT TO SECTION 32-1272  
26 TO PHYSICIANS WHO HAVE COMPLETED RESIDENCY TRAINING IN ANESTHESIOLOGY.

27 B. The public records of the board are open to inspection at all  
28 times during office hours.

29 C. The board may:

30 1. Adopt rules necessary or proper to administer this chapter.

31 2. Appoint one of its members to the jurisdiction arbitration panel  
32 pursuant to section 32-2907, subsection B.

33 3. Accept and spend federal monies and private grants, gifts,  
34 contributions and devises. These monies do not revert to the state  
35 general fund at the end of a fiscal year.

36 4. Develop and publish advisory opinions and standards governing  
37 the profession.

38 D. The board shall adopt and use a seal, the imprint of which,  
39 together with the signature of either the president, vice president or  
40 executive director, is evidence of its official acts.

41 E. In conducting investigations pursuant to this chapter, the board  
42 may receive and review confidential internal staff reports relating to  
43 complaints and malpractice claims.

1 F. The board may make available to academic and research  
2 organizations public records regarding statistical information on doctors  
3 of osteopathic medicine and applicants for licensure.

4 Sec. 9. Title 32, chapter 17, article 3, Arizona Revised Statutes,  
5 is amended by adding section 32-1855.02, to read:

6 32-1855.02. Physicians; duty to report

7 IF A DEATH OR AN INCIDENT REQUIRING EMERGENCY MEDICAL RESPONSE  
8 OCCURS IN A DENTAL OFFICE OR DENTAL CLINIC DURING THE ADMINISTRATION OF OR  
9 RECOVERY FROM GENERAL ANESTHESIA OR SEDATION BY A PHYSICIAN, THE PHYSICIAN  
10 SHALL, AND ANY OTHER PERSON MAY, REPORT THE DEATH OR INCIDENT TO THE BOARD  
11 WITHIN THREE BUSINESS DAYS AFTER THE OCCURRENCE.

12 Sec. 10. State board of dental examiners; anesthesia and  
13 sedation committee; recommendations; rulemaking  
14 exemption; delayed repeal

15 A. On or before September 1, 2023, the state board of dental  
16 examiners' anesthesia and sedation committee shall submit to the state  
17 board of dental examiners its final recommendations to improve the general  
18 anesthesia and sedation permit requirements as provided in the state board  
19 of dental examiners' existing administrative rules for the purpose of  
20 increasing patient safety when general anesthesia or sedation is being  
21 administered by an anesthesia provider within a dental practice or a  
22 similar setting that is under the jurisdiction of the state board of  
23 dental examiners. The recommendations shall ensure that at least two  
24 people are properly trained in advanced cardiac life support and airway  
25 management and pediatric advanced life support, as applicable, in any  
26 dental office or dental clinic at which general anesthesia or sedation is  
27 administered. The recommendations shall include a methodology to expedite  
28 the review of and response to deaths and incidents requiring emergency  
29 medical response during the administration of or recovery from general  
30 anesthesia or sedation. Within sixty days after receipt of the anesthesia  
31 and sedation committee's final recommendations, the state board of dental  
32 examiners shall approve, modify or reject the recommendations.

33 B. Notwithstanding any other law, for the purposes of this act and  
34 to address general anesthesia and sedation permit requirements, the state  
35 board of dental examiners is exempt from the rulemaking requirements of  
36 title 41, chapter 6, Arizona Revised Statutes, for one year after the  
37 effective date of this act.

38 C. This section is repealed from and after December 31, 2024.