REFERENCE TITLE: abortion; repeals

State of Arizona Senate Fifty-seventh Legislature First Regular Session 2025

SB 1553

Introduced by Senator Ortiz: Representatives Abeytia, Liguori

AN ACT

REPEALING SECTIONS 1-219, 13-3603.01, 13-3603.02 AND 13-3605, ARIZONA REVISED STATUTES: AMENDING SECTIONS 15-115.01, 32-1401, 32-1408. 32-1451.04, 32-1601, 32-1606, 32-1607, 32-1807, 32-1854, 32-1901, 32-2501, 32-2508, 32-2531, 32-2532, 32-3217, 36-301, 36-402, 36-404 AND 36-427, ARIZONA REVISED STATUTES; REPEALING TITLE 36, CHAPTER 4, ARTICLE 10, ARIZONA REVISED STATUTES; AMENDING SECTION 36-2151, ARIZONA REVISED STATUTES; REPEALING SECTIONS 36-2153, 36-2153.01, 36-2154, 36-2155, 36-2156, 36-2157, 36-2158, 36-2159 AND 36-2160, ARIZONA REVISED STATUTES; REPEALING TITLE 36, CHAPTER 20, ARTICLE 2, ARIZONA REVISED STATUTES; REPEALING TITLE 36, CHAPTER 23, ARTICLES 1 AND 3, ARIZONA REVISED STATUTES; REPEALING SECTION 36-3604, ARIZONA REVISED STATUTES; AMENDING SECTIONS 41-1033, 41-1080.01 AND 41-1093, ARIZONA REVISED STATUTES; RELATING TO ABORTION.

(TEXT OF BILL BEGINS ON NEXT PAGE)

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Be it enacted by the Legislature of the State of Arizona: Section 1. \underbrace{\text{Repeal}}
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Sections 1-219, 13-3603.01, 13-3603.02 and 13-3605, Arizona Revised Statutes, are repealed.

Sec. 2. Section 15-115.01, Arizona Revised Statutes, is amended to read:

15-115.01. <u>Public educational institution facility;</u> <u>prohibition; definitions</u>

- A. A facility that is run by or that operates on the property of a public educational institution may not perform or provide an abortion, unless the abortion is necessary to save the life of the woman having the abortion.
 - B. For the purposes of this section:
 - 1. "Abortion" has the same meaning prescribed in section 36-2151.
- 2. "Medical emergency" has the same meaning prescribed in section 36-2151.
 - 3. "Public educational institution" means any of the following:
 - (a) A community college as defined in section 15-1401.
- (b) A university under the jurisdiction of the Arizona board of regents.
 - (c) A school district, including its schools.
 - (d) A charter school.
 - (e) An accommodation school.
 - (f) The Arizona state schools for the deaf and the blind.
- Sec. 3. Section 32–1401, Arizona Revised Statutes, is amended to read:

32-1401. <u>Definitions</u>

In this chapter, unless the context otherwise requires:

- 1. "Active license" means a valid and existing license to practice medicine.
- 2. "Adequate records" means legible medical records, produced by hand or electronically, containing, at a minimum, sufficient information to identify the patient, support the diagnosis, justify the treatment, accurately document the results, indicate advice and cautionary warnings provided to the patient and provide sufficient information for another practitioner to assume continuity of the patient's care at any point in the course of treatment.
- 3. "Advisory letter" means a nondisciplinary letter to notify a licensee that either:
- (a) While there is insufficient evidence to support disciplinary action, the board believes that continuation of the activities that led to the investigation may result in further board action against the licensee.
- (b) The violation is a minor or technical violation that is not of sufficient merit to warrant disciplinary action.

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- (c) While the licensee has demonstrated substantial compliance through rehabilitation or remediation that has mitigated the need for disciplinary action, the board believes that repetition of the activities that led to the investigation may result in further board action against the licensee.
- 4. "Approved hospital internship, residency or clinical fellowship program" means a program at a hospital that at the time the training occurred was legally incorporated and that had a program that was approved for internship, fellowship or residency training by the accreditation council for graduate medical education, the association of American medical colleges, the royal college of physicians and surgeons of Canada or any similar body in the United States or Canada approved by the board whose function is that of approving hospitals for internship, fellowship or residency training.
- 5. "Approved school of medicine" means any school or college offering a course of study that, on successful completion, results in the degree of doctor of medicine and whose course of study has been approved or accredited by an educational or professional association, recognized by the board, including the association of American medical colleges, the association of Canadian medical colleges or the American medical association.
 - 6. "Board" means the Arizona medical board.
- 7. "Completed application" means that the applicant has supplied all required fees, information and correspondence requested by the board on forms and in a manner acceptable to the board.
- 8. "Direct supervision" means that a physician, physician assistant licensed pursuant to chapter 25 of this title or nurse practitioner certified pursuant to chapter 15 of this title is within the same room or office suite as the medical assistant in order to be available for consultation regarding those tasks the medical assistant performs pursuant to section 32-1456.
- 9. "Dispense" means the delivery by a doctor of medicine of a prescription drug or device to a patient, except for samples packaged for individual use by licensed manufacturers or repackagers of drugs, and includes the prescribing, administering, packaging, labeling and security necessary to prepare and safeguard the drug or device for delivery.
- 10. "Doctor of medicine" means a natural person holding a license, registration or permit to practice medicine pursuant to this chapter.
- 11. "Full-time faculty member" means a physician who is employed full time as a faculty member while holding the academic position of assistant professor or a higher position at an approved school of medicine.
- 12. "Health care institution" means any facility as defined in section 36-401, any person authorized to transact disability insurance, as defined in title 20, chapter 6, article 4 or 5, any person who is issued a

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certificate of authority pursuant to title 20, chapter 4, article 9 or any other partnership, association or corporation that provides health care to consumers.

- 13. "Immediate family" means the spouse, natural or adopted children, father, mother, brothers and sisters of the doctor of medicine and the natural or adopted children, father, mother, brothers and sisters of the doctor of medicine's spouse.
- 14. "Letter of reprimand" means a disciplinary letter that is issued by the board and that informs the physician that the physician's conduct violates state or federal law and may require the board to monitor the physician.
- 15. "Limit" means taking a nondisciplinary action that alters the physician's practice or professional activities if the board determines that there is evidence that the physician is or may be mentally or physically unable to safely engage in the practice of medicine.
- 16. "Medical assistant" means an unlicensed person who meets the requirements of section 32-1456, has completed an education program approved by the board, assists in a medical practice under the supervision of a doctor of medicine, physician assistant or nurse practitioner and performs delegated procedures commensurate with the medical assistant's education and training but does not diagnose, interpret, design or modify established treatment programs or perform any functions that would violate any statute applicable to the practice of medicine.
- 17. "Medically incompetent" means a person who the board determines is incompetent based on a variety of factors, including:
- (a) A lack of sufficient medical knowledge or skills, or both, to a degree likely to endanger the health of patients.
- (b) When considered with other indications of medical incompetence, failing to obtain a scaled score of at least seventy-five percent on the written special purpose licensing examination.
 - 18. "Medical peer review" means:
- (a) The participation by a doctor of medicine in the review and evaluation of the medical management of a patient and the use of resources for patient care.
- (b) Activities relating to a health care institution's decision to grant or continue privileges to practice at that institution.
- 19. "Medicine" means allopathic medicine as practiced by the recipient of a degree of doctor of medicine.
- 20. "Office-based surgery" means a medical procedure conducted in a physician's office or other outpatient setting that is not part of a licensed hospital or licensed ambulatory surgical center.
- 21. "Physician" means a doctor of medicine who is licensed pursuant to this chapter.
 - 22. "Practice of medicine":

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- (a) Means the diagnosis, the treatment or the correction of or the attempt or the claim to be able to diagnose, treat or correct any and all human diseases, injuries, ailments, infirmities or deformities, physical or mental, real or imaginary, by any means, methods, devices or instrumentalities, except as the same may be among the acts or persons not affected by this chapter.
- (b) Includes the practice of medicine alone or the practice of surgery alone, or both.
- 23. "Restrict" means taking a disciplinary action that alters the physician's practice or professional activities if the board determines that there is evidence that the physician is or may be medically incompetent or guilty of unprofessional conduct.
- 24. "Special purpose licensing examination" means an examination that is developed by the national board of medical examiners on behalf of the federation of state medical boards for use by state licensing boards to test the basic medical competence of physicians who are applying for licensure and who have been in practice for a considerable period of time in another jurisdiction and to determine the competence of a physician who is under investigation by a state licensing board.
- 25. "Teaching hospital's accredited graduate medical education program" means that the hospital is incorporated and has an internship, fellowship or residency training program that is accredited by the accreditation council for graduate medical education, the American medical association, the association of American medical colleges, the royal college of physicians and surgeons of Canada or a similar body in the United States or Canada that is approved by the board and whose function is that of approving hospitals for internship, fellowship or residency training.
- 26. "Teaching license" means a valid license to practice medicine as a full-time faculty member of an approved school of medicine or a teaching hospital's accredited graduate medical education program.
- 27. "Unprofessional conduct" includes the following, whether occurring in this state or elsewhere:
- (a) Violating any federal or state laws, rules or regulations applicable to the practice of medicine.
- (b) Intentionally disclosing a professional secret or intentionally disclosing a privileged communication except as either act may otherwise be required by law.
- (c) Committing false, fraudulent, deceptive or misleading advertising by a doctor of medicine or the doctor of medicine's staff, employer or representative.
- (d) Committing a felony, whether or not involving moral turpitude, or a misdemeanor involving moral turpitude. In either case, conviction by any court of competent jurisdiction or a plea of no contest is conclusive evidence of the commission.

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- (e) Failing or refusing to maintain adequate records on a patient.
- (f) Exhibiting a pattern of using or being under the influence of alcohol or drugs or a similar substance while practicing medicine or to the extent that judgment may be impaired and the practice of medicine detrimentally affected.
- (g) Using controlled substances except if prescribed by another physician for use during a prescribed course of treatment.
- (h) Prescribing or dispensing controlled substances to members of the physician's immediate family.
- (i) Prescribing, dispensing or administering schedule II controlled substances as prescribed by section 36-2513 or the rules adopted pursuant to section 36-2513, including amphetamines and similar schedule II sympathomimetic drugs in the treatment of exogenous obesity for a period in excess of thirty days in any one year, or the nontherapeutic use of injectable amphetamines.
- (j) Prescribing, dispensing or administering any controlled substance or prescription-only drug for other than accepted therapeutic purposes.
- (k) Dispensing a schedule II controlled substance that is ar opioid, except as provided in sections 32-1491 and 32-3248.03.
 - (1) Signing a blank, undated or predated prescription form.
- (m) Committing conduct that the board determines is gross malpractice, repeated malpractice or any malpractice resulting in the death of a patient.
- (n) Representing that a manifestly incurable disease or infirmity can be permanently cured, or that any disease, ailment or infirmity can be cured by a secret method, procedure, treatment, medicine or device, if this is not true.
- (o) Refusing to divulge to the board on demand the means, method, procedure, modality of treatment or medicine used in the treatment of a disease, injury, ailment or infirmity.
- (p) Having action taken against a doctor of medicine by another licensing or regulatory jurisdiction due to that doctor of medicine's mental or physical inability to engage safely in the practice of medicine or the doctor of medicine's medical incompetence or for unprofessional conduct as defined by that jurisdiction and that corresponds directly or indirectly to an act of unprofessional conduct prescribed by this paragraph. The action taken may include refusing, denying, revoking or suspending a license by that jurisdiction or a surrendering of a license to that jurisdiction, otherwise limiting, restricting or monitoring a licensee by that jurisdiction or placing a licensee on probation by that jurisdiction.
- (q) Having sanctions imposed by an agency of the federal government, including restricting, suspending, limiting or removing a

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 person from the practice of medicine or restricting that person's ability to obtain financial remuneration.

- (r) Committing any conduct or practice that is or might be harmful or dangerous to the health of the patient or the public.
- (s) Violating a formal order, probation, consent agreement or stipulation issued or entered into by the board or its executive director under this chapter.
- (t) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate any provision of this chapter.
- (u) Knowingly making any false or fraudulent statement, written or oral, in connection with the practice of medicine or if applying for privileges or renewing an application for privileges at a health care institution.
- (v) Charging a fee for services not rendered or dividing a professional fee for patient referrals among health care providers or health care institutions or between these providers and institutions or a contractual arrangement that has the same effect. This subdivision does not apply to payments from a medical researcher to a physician in connection with identifying and monitoring patients for a clinical trial regulated by the United States food and drug administration.
 - (w) Obtaining a fee by fraud, deceit or misrepresentation.
- (x) Charging or collecting a clearly excessive fee. In determining whether a fee is clearly excessive, the board shall consider the fee or range of fees customarily charged in this state for similar services in light of modifying factors such as the time required, the complexity of the service and the skill requisite to perform the service properly. This subdivision does not apply if there is a clear written contract for a fixed fee between the physician and the patient that has been entered into before the provision of the service.
 - (y) Committing conduct that is in violation of section 36-2302.
- (z) (y) Using experimental forms of diagnosis and treatment without adequate informed patient consent, and without conforming to generally accepted experimental criteria, including protocols, detailed records, periodic analysis of results and periodic review by a medical peer review committee as approved by the United States food and drug administration or its successor agency.
- (aa) (z) Engaging in sexual conduct with a current patient or with a former patient within six months after the last medical consultation unless the patient was the licensee's spouse at the time of the contact or, immediately preceding the physician-patient relationship, was in a dating or engagement relationship with the licensee. For the purposes of this subdivision, "sexual conduct" includes:
- (i) Engaging in or soliciting sexual relationships, whether consensual or nonconsensual.

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- (ii) Making sexual advances, requesting sexual favors or engaging in any other verbal conduct or physical contact of a sexual nature.
- (iii) Intentionally viewing a completely or partially disrobed patient in the course of treatment if the viewing is not related to patient diagnosis or treatment under current practice standards.
- (bb) (aa) Procuring or attempting to procure a license to practice medicine or a license renewal by fraud, by misrepresentation or by knowingly taking advantage of the mistake of another person or an agency.
- $\frac{\text{(cc)}}{\text{(bb)}}$ Representing or claiming to be a medical specialist if this is not true.
- (dd) (cc) Maintaining a professional connection with or lending one's name to enhance or continue the activities of an illegal practitioner of medicine.
- (dd) Failing to furnish information in a timely manner to the board or the board's investigators or representatives if legally requested by the board.
- (ff) (ee) Failing to allow properly authorized board personnel on demand to examine and have access to documents, reports and records maintained by the physician that relate to the physician's medical practice or medically related activities.
- (gg) (ff) Knowingly failing to disclose to a patient on a form that is prescribed by the board and that is dated and signed by the patient or guardian acknowledging that the patient or guardian has read and understands that the doctor has a direct financial interest in a separate diagnostic or treatment agency or in nonroutine goods or services that the patient is being prescribed if the prescribed treatment, goods or services are available on a competitive basis. This subdivision does not apply to a referral by one doctor of medicine to another doctor of medicine within a group of doctors of medicine practicing together.
- (hh) (gg) Using chelation therapy in the treatment of arteriosclerosis or as any other form of therapy, with the exception of treatment of heavy metal poisoning, without:
 - (i) Adequate informed patient consent.
- (ii) Conforming to generally accepted experimental criteria, including protocols, detailed records, periodic analysis of results and periodic review by a medical peer review committee.
- (iii) Approval by the United States food and drug administration or its successor agency.
- (ii) (hh) Prescribing, dispensing or administering anabolic-androgenic steroids to a person for other than therapeutic purposes.
- (jj) (ii) Exhibiting a lack of or inappropriate direction, collaboration or direct supervision of a medical assistant or a licensed, certified or registered health care provider employed by, supervised by or assigned to the physician.

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 (kk) (jj) Knowingly making a false or misleading statement to the board or on a form required by the board or in a written correspondence, including attachments, with the board.

(11) (kk) Failing to dispense drugs and devices in compliance with article 6 of this chapter.

(nm) (11) Committing conduct that the board determines is gross negligence, repeated negligence or negligence resulting in harm to or the death of a patient.

(nn) (mm) Making a representation by a doctor of medicine or the doctor of medicine's staff, employer or representative that the doctor of medicine is boarded or board certified if this is not true or the standing is not current or without supplying the full name of the specific agency, organization or entity granting this standing.

(nn) Refusing to submit to a body fluid examination or any other examination known to detect the presence of alcohol or other drugs as required by the board pursuant to section 32-1452 or pursuant to a board investigation into a doctor of medicine's alleged substance abuse.

(pp) (oo) Failing to report in writing to the Arizona medical board or the Arizona regulatory board of physician assistants any evidence that a doctor of medicine or a physician assistant is or may be medically incompetent, guilty of unprofessional conduct or mentally or physically unable to safely practice medicine or to perform as a physician assistant.

(qq) (pp) As a physician who is the chief executive officer, the medical director or the medical chief of staff of a health care institution, failing to report in writing to the board that the hospital privileges of a doctor of medicine have been denied, revoked, suspended, supervised or limited because of actions by the doctor of medicine that appear to show that the doctor of medicine is or may be medically incompetent, is or may be guilty of unprofessional conduct or is or may be unable to engage safely in the practice of medicine.

(rr) (qq) Claiming to be a current member of the board or its staff or a board medical consultant if this is not true.

(ss) (rr) Failing to make patient medical records in the physician's possession promptly available to a physician assistant, a nurse practitioner, a person licensed pursuant to this chapter or a podiatrist, chiropractor, naturopathic physician, osteopathic physician or homeopathic physician licensed under chapter 7, 8, 14, 17 or 29 of this title on receipt of proper authorization to do so from the patient, a minor patient's parent, the patient's legal guardian or the patient's authorized representative or failing to comply with title 12, chapter 13, article 7.1.

(tt) (ss) Prescribing, dispensing or furnishing a prescription medication or a prescription-only device as defined in section 32-1901 to a person unless the licensee first conducts a physical or mental health status examination of that person or has previously established a

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doctor-patient relationship. The physical or mental health status examination may be conducted through telehealth as defined in section 36-3601 with a clinical evaluation that is appropriate for the patient and the condition with which the patient presents, unless the examination is for the purpose of obtaining a written certification from the physician for the purposes of title 36, chapter 28.1. This subdivision does not apply to:

- (i) A physician who provides temporary patient supervision on behalf of the patient's regular treating licensed health care professional or provides a consultation requested by the patient's regular treating licensed health care professional.
 - (ii) Emergency medical situations as defined in section 41-1831.
- (iii) Prescriptions written to prepare a patient for a medical examination.
- (iv) Prescriptions written or prescription medications issued for use by a county or tribal public health department for immunization programs or emergency treatment or in response to an infectious disease investigation, public health emergency, infectious disease outbreak or act of bioterrorism. For the purposes of this item, "bioterrorism" has the same meaning prescribed in section 36-781.
- (v) Prescriptions written or antimicrobials dispensed to a contact as defined in section 36-661 who is believed to have had significant exposure risk as defined in section 36-661 with another person who has been diagnosed with a communicable disease as defined in section 36-661 by the prescribing or dispensing physician.
- (vi) Prescriptions written or prescription medications issued for administration of immunizations or vaccines listed in the United States centers for disease control and prevention's recommended immunization schedule to a household member of a patient.
- (vii) Prescriptions for epinephrine auto-injectors written or dispensed for a school district or charter school to be stocked for emergency use pursuant to section 15-157 or for an authorized entity to be stocked pursuant to section 36-2226.01.
- (viii) Prescriptions for glucagon written or dispensed for a school district or charter school to be stocked for emergency use pursuant to section 15-344.01.
- (ix) Prescriptions written by a licensee through a telehealth program that is covered by the policies and procedures adopted by the administrator of a hospital or outpatient treatment center.
- (x) Prescriptions for naloxone hydrochloride or any other opioid antagonist approved by the United States food and drug administration that are written or dispensed for use pursuant to section 36-2228 or 36-2266.
- (tt) Performing office-based surgery using sedation in violation of board rules.

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(vv) (uu) Practicing medicine under a false or assumed name in this state.

Sec. 4. Section 32-1408, Arizona Revised Statutes, is amended to read:

32-1408. Preceptorship awareness campaign; definitions

- A. The board shall develop a preceptorship awareness campaign that educates medical professionals who are licensed pursuant to this chapter on how to become and the benefits of being a medical preceptor for students.
 - B. For the purposes of this section:
- 1. "Medical preceptor" means a medical professional who is licensed pursuant to this chapter and who maintains an active practice in this state.
 - 2. "Preceptorship":

(a) means a mentoring experience in which a medical preceptor provides a program of personalized instruction, training and supervision to a student, which may include educating the student about dispensing drugs and devices, to enable the student to obtain a medical professional degree to become licensed pursuant to this chapter.

(b) Does not include mentoring for medical services that are prescribed in section 36-2301.01, subsection C, paragraph 1.

- 3. "Student" means an individual who is matriculating at the graduate level at an accredited institution of higher education in this state and who is seeking a medical professional degree to become licensed pursuant to this chapter.
- Sec. 5. Section 32-1451.04, Arizona Revised Statutes, is amended to read:

32-1451.04. Burden of proof

Except for disciplinary matters brought pursuant to section 32-1401, paragraph 27, subdivision $\frac{(aa)}{(aa)}$ (z), the board has the burden of proof by clear and convincing evidence for disciplinary matters brought pursuant to this chapter.

Sec. 6. Section 32-1601, Arizona Revised Statutes, is amended to read:

32-1601. Definitions

In this chapter, unless the context otherwise requires:

- 1. "Absolute discharge from the sentence" means completion of any sentence, including imprisonment, probation, parole, community supervision or any form of court supervision.
- 2. "Appropriate health care professional" means a licensed health care professional whose scope of practice, education, experience, training and accreditation are appropriate for the situation or condition of the patient who is the subject of a consultation or referral.

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- 3. "Approval" means that a regulated training or educational program to prepare persons for licensure, certification or registration has met standards established by the board.
 - 4. "Board" means the Arizona state board of nursing.
 - 5. "Certified nurse midwife" means a registered nurse who:
 - (a) Is certified by the board.
- (b) Has completed a nurse midwife education program approved or recognized by the board and educational requirements prescribed by the board by rule.
- (c) Holds a national certification as a certified nurse midwife from a national certifying body recognized by the board.
- (d) Has an expanded scope of practice in providing health care services for women from adolescence to beyond menopause, including antepartum, intrapartum, postpartum, reproductive, gynecologic and primary care, for normal newborns during the first twenty-eight days of life and for men for the treatment of sexually transmitted diseases. The expanded scope of practice under this subdivision includes:
- (i) Assessing patients, synthesizing and analyzing data and understanding and applying principles of health care at an advanced level.
- (ii) Managing the physical and psychosocial health care of patients.
- (iii) Analyzing multiple sources of data, identifying alternative possibilities as to the nature of a health care problem and selecting, implementing and evaluating appropriate treatment.
- (iv) Making independent decisions in solving complex patient care problems.
- (v) Diagnosing, performing diagnostic and therapeutic procedures and prescribing, administering and dispensing therapeutic measures, including legend drugs, medical devices and controlled substances, within the scope of the certified nurse midwife practice after meeting requirements established by the board.
- (vi) Recognizing the limits of the nurse's knowledge and experience by consulting with or referring patients to other appropriate health care professionals if a situation or condition occurs that is beyond the knowledge and experience of the nurse or if the referral will protect the health and welfare of the patient.
- (vii) Delegating to a medical assistant pursuant to section 32-1456.
- (viii) Performing additional acts that require education and training as prescribed by the board and that are recognized by the nursing profession as proper to be performed by a certified nurse midwife.
- 6. "Certified nursing assistant" means a person who is registered on the registry of nursing assistants pursuant to this chapter to provide or assist in delivering nursing or nursing-related services under the

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 supervision and direction of a licensed nursing staff member. Certified nursing assistant does not include a person who:

- (a) Is a licensed health care professional.
- (b) Volunteers to provide nursing assistant services without monetary compensation.
 - (c) Is a licensed nursing assistant.
- 7. "Certified registered nurse" means a registered nurse who has been certified by a national nursing credentialing agency recognized by the board.
- 8. "Certified registered nurse anesthetist" means a registered nurse who meets the requirements of section 32-1634.03 and who practices pursuant to the requirements of section 32-1634.04.
 - 9. "Clinical nurse specialist" means a registered nurse who:
 - (a) Is certified by the board as a clinical nurse specialist.
- (b) Holds a graduate degree with a major in nursing and completes educational requirements as prescribed by the board by rule.
- (c) Is nationally certified as a clinical nurse specialist or, if certification is not available, provides proof of competence to the board.
- (d) Has an expanded scope of practice based on advanced education in a clinical nursing specialty that includes:
- (i) Assessing clients, synthesizing and analyzing data and understanding and applying nursing principles at an advanced level.
- (ii) Managing directly and indirectly a client's physical and psychosocial health status.
- (iii) Analyzing multiple sources of data, identifying alternative possibilities as to the nature of a health care problem and selecting appropriate nursing interventions.
- (iv) Developing, planning and guiding programs of care for populations of patients.
- (v) Making independent nursing decisions to solve complex client care problems.
- (vi) Using research skills and acquiring and applying critical new knowledge and technologies to nursing practice.
 - (vii) Prescribing and dispensing durable medical equipment.
- (viii) Consulting with or referring a client to other health care providers based on assessment of the client's health status and needs.
- (ix) Facilitating collaboration with other disciplines to attain the desired client outcome across the continuum of care.
- (x) Performing additional acts that require education and training as prescribed by the board and that are recognized by the nursing profession as proper to be performed by a clinical nurse specialist.
- (xi) Prescribing, ordering and dispensing pharmacological agents subject to the requirements and limits specified in section 32-1651.
- 10. "Conditional license" or "conditional approval" means a license or approval that specifies the conditions under which the regulated party

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is allowed to practice or to operate and that is prescribed by the board pursuant to section 32-1644 or 32-1663.

- 11. "Delegation" means transferring to a competent individual the authority to perform a selected nursing task in a designated situation in which the nurse making the delegation retains accountability for the delegation.
- 12. "Disciplinary action" means a regulatory sanction of a license, certificate or approval pursuant to this chapter in any combination of the following:
- (a) A civil penalty for each violation of this chapter, not to exceed \$1,000 for each violation.
 - (b) Restitution made to an aggrieved party.
 - (c) A decree of censure.
- (d) A conditional license or a conditional approval that fixed a period and terms of probation.
 - (e) Limited licensure.
 - (f) Suspension of a license, a certificate or an approval.
 - (g) Voluntary surrender of a license, a certificate or an approval.
 - (h) Revocation of a license, a certificate or an approval.
- 13. "Health care institution" has the same meaning prescribed in section 36-401.
 - 14. "Licensed health aide" means a person who:
- (a) Is licensed pursuant to this chapter to provide or to assist in providing nursing-related services authorized pursuant to section 36-2939.
- (b) Is the parent, guardian or family member by affinity or consanguinity of the Arizona long-term care system member receiving services who may provide licensed health aide services only to that member and only consistent with that member's plan of care.
- (c) Has a scope of practice that is the same as a licensed nursing assistant and may also provide medication administration, tracheostomy care, enteral care and routine ventilator care and therapy and any other tasks approved by the board in rule.
- (d) Has supervision requirements that are the same as a certified nursing assistant.
- 15. "Licensed nursing assistant" means a person who is licensed pursuant to this chapter to provide or assist in delivering nursing or nursing-related services under the supervision and direction of a licensed nursing staff member. Licensed nursing assistant does not include a person who:
 - (a) Is a licensed health care professional.
- (b) Volunteers to provide nursing assistant services without monetary compensation.
 - (c) Is a certified nursing assistant.
- 16. "Licensee" means a person who is licensed pursuant to this chapter or in a party state as defined in section 32-1668.

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- 17. "Limited license" means a license that restricts the scope or setting of a licensee's practice.
- 18. "Medication order" means a written or verbal communication given by a certified registered nurse anesthetist to a health care professional to administer a drug or medication, including controlled substances.
- 19. "Practical nurse" means a person who holds a practical nurse license issued pursuant to this chapter or pursuant to a multistate compact privilege and who practices practical nursing as defined in this section.
- 20. "Practical nursing" includes the following activities that are performed under the supervision of a physician or a registered nurse:
- (a) Contributing to the assessment of the health status of individuals and groups.
- (b) Participating in the development and modification of the strategy of care.
- (c) Implementing aspects of the strategy of care within the nurse's scope of practice.
- (d) Maintaining safe and effective nursing care that is rendered directly or indirectly.
 - (e) Participating in the evaluation of responses to interventions.
- (f) Delegating nursing activities within the scope of practice of a practical nurse.
- (g) Performing additional acts that require education and training as prescribed by the board and that are recognized by the nursing profession as proper to be performed by a practical nurse.
- 21. "Presence" means within the same health care institution or office as specified in section 32-1634.04, subsection A, and available as necessary.
- 22. "Registered nurse" or "professional nurse" means a person who practices registered nursing and who holds a registered nurse license issued pursuant to this chapter or pursuant to a multistate compact privilege.
 - 23. "Registered nurse practitioner" means a registered nurse who:
 - (a) Is certified by the board.
- (b) Has completed a nurse practitioner education program approved or recognized by the board and educational requirements prescribed by the board by rule.
- (c) If applying for certification after July 1, 2004, holds national certification as a nurse practitioner from a national certifying body recognized by the board.
- (d) Has an expanded scope of practice within a specialty area that includes:
- (i) Assessing clients, synthesizing and analyzing data and understanding and applying principles of health care at an advanced level.

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- (ii) Managing the physical and psychosocial health status of patients.
- (iii) Analyzing multiple sources of data, identifying alternative possibilities as to the nature of a health care problem and selecting, implementing and evaluating appropriate treatment.
- (iv) Making independent decisions in solving complex patient care problems.
- (v) Diagnosing, performing diagnostic and therapeutic procedures, and prescribing, administering and dispensing therapeutic measures, including legend drugs, medical devices and controlled substances within the scope of registered nurse practitioner practice on meeting the requirements established by the board.
- (vi) Recognizing the limits of the nurse's knowledge and experience by consulting with or referring patients to other appropriate health care professionals if a situation or condition occurs that is beyond the knowledge and experience of the nurse or if the referral will protect the health and welfare of the patient.
- (vii) Delegating to a medical assistant pursuant to section 32-1456.
- (viii) Performing additional acts that require education and training as prescribed by the board and that are recognized by the nursing profession as proper to be performed by a nurse practitioner.
 - 24. "Registered nursing" includes the following:
- (a) Diagnosing and treating human responses to actual or potential health problems.
- (b) Assisting individuals and groups to maintain or attain optimal health by implementing a strategy of care to accomplish defined goals and evaluating responses to care and treatment.
 - (c) Assessing the health status of individuals and groups.
 - (d) Establishing a nursing diagnosis.
 - (e) Establishing goals to meet identified health care needs.
- (f) Prescribing nursing interventions to implement a strategy of care.
- (g) Delegating nursing interventions to others who are qualified to do so.
- (h) Providing for the maintenance of safe and effective nursing care that is rendered directly or indirectly.
 - (i) Evaluating responses to interventions.
 - (j) Teaching nursing knowledge and skills.
 - (k) Managing and supervising the practice of nursing.
- (1) Consulting and coordinating with other health care professionals in the management of health care.
- (m) Performing additional acts that require education and training as prescribed by the board and that are recognized by the nursing profession as proper to be performed by a registered nurse.

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- 25. "Registry of nursing assistants" means the nursing assistants registry maintained by the board pursuant to the omnibus budget reconciliation act of 1987 (P.L. 100-203; 101 Stat. 1330), as amended by the medicare catastrophic coverage act of 1988 (P.L. 100-360; 102 Stat. 683).
- 26. "Regulated party" means any person or entity that is licensed, certified, registered, recognized or approved pursuant to this chapter.
- 27. "Unprofessional conduct" includes the following, whether occurring in this state or elsewhere:
- (a) Committing fraud or deceit in obtaining, attempting to obtain or renewing a license or a certificate issued pursuant to this chapter.
- (b) Committing a felony, whether or not involving moral turpitude, or a misdemeanor involving moral turpitude. In either case, conviction by a court of competent jurisdiction or a plea of no contest is conclusive evidence of the commission.
- (c) Aiding or abetting in a criminal abortion or attempting, agreeing or offering to procure or assist in a criminal abortion.
- (d) (c) Any conduct or practice that is or might be harmful or dangerous to the health of a patient or the public.
- (e) (d) Being mentally incompetent or physically unsafe to a degree that is or might be harmful or dangerous to the health of a patient or the public.
- (f) (e) Having a license, certificate, permit or registration to practice a health care profession denied, suspended, conditioned, limited or revoked in another jurisdiction and not reinstated by that jurisdiction.
- (g) (f) Wilfully or repeatedly violating a provision of this chapter or a rule adopted pursuant to this chapter.
- $\frac{\text{(h)}}{\text{(g)}}$ (g) Committing an act that deceives, defrauds or harms the public.
- $ext{(i)}$ (h) Failing to comply with a stipulated agreement, consent agreement or board order.
- (j) (i) Violating this chapter or a rule that is adopted by the board pursuant to this chapter.
- (k) (j) Failing to report to the board any evidence that a registered or practical nurse or a nursing assistant is or may be:
 - (i) Incompetent to practice.
 - (ii) Guilty of unprofessional conduct.
- (iii) Mentally or physically unable to safely practice nursing or to perform nursing-related duties. A nurse who is providing therapeutic counseling for a nurse who is in a drug rehabilitation program is required to report that nurse only if the nurse providing therapeutic counseling has personal knowledge that patient safety is being jeopardized.
- (t) Failing to self-report a conviction for a felony or undesignated offense within ten days after the conviction.

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 $\overline{\text{(m)}}$ (1) Cheating or assisting another to cheat on a licensure or certification examination.

Sec. 7. Section 32-1606, Arizona Revised Statutes, is amended to read:

32-1606. Powers and duties of board

- A. The board may:
- 1. Adopt and revise rules necessary to carry into effect this chapter.
- 2. Publish advisory opinions regarding registered and practical nursing practice and nursing education.
- 3. Issue limited licenses or certificates if it determines that an applicant or licensee cannot function safely in a specific setting or within the full scope of practice.
- 4. Refer criminal violations of this chapter to the appropriate law enforcement agency.
- 5. Establish a confidential program for monitoring licensees who are chemically dependent and who enroll in rehabilitation programs that meet the criteria established by the board. The board may take further action if the licensee refuses to enter into a stipulated agreement or fails to comply with its terms. In order to protect the public health and safety, the confidentiality requirements of this paragraph do not apply if the licensee does not comply with the stipulated agreement.
- 6. On the applicant's or regulated party's request, establish a payment schedule with the applicant or regulated party.
 - 7. Provide education regarding board functions.
 - 8. Collect or assist in collecting workforce data.
- 9. Adopt rules to conduct pilot programs consistent with public safety for innovative applications in nursing practice, education and regulation.
- 10. Grant retirement status on request to retired nurses who are or were licensed under this chapter, who have no open complaint or investigation pending against them and who are not subject to discipline.
- 11. Accept and spend federal monies and private grants, gifts, contributions and devises to assist in carrying out the purposes of this chapter. These monies do not revert to the state general fund at the end of the fiscal year.
 - B. The board shall:
- 1. Approve regulated training and educational programs that meet the requirements of this chapter and rules adopted by the board.
- 2. By rule, establish approval and reapproval processes for nursing and nursing assistant training programs that meet the requirements of this chapter and board rules.
- 3. Prepare and maintain a list of approved nursing programs to prepare registered nurses and practical nurses whose graduates are eligible for licensing under this chapter as registered nurses or as

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 practical nurses if they satisfy the other requirements of this chapter and board rules.

- 4. Examine qualified registered nurse and practical nurse applicants.
- 5. License and renew the licenses of qualified registered nurse and practical nurse applicants and licensed nursing assistants who are not qualified to be licensed by the executive director.
 - 6. Adopt a seal, which the executive director shall keep.
 - 7. Keep a record of all proceedings.
- 8. For proper cause, deny or rescind approval of a regulated training or educational program for failure to comply with this chapter or the rules of the board.
- 9. Adopt rules to approve credential evaluation services that evaluate the qualifications of applicants who graduated from an international nursing program.
- 10. Determine and administer appropriate disciplinary action against all regulated parties who are found guilty of violating this chapter or rules adopted by the board.
- 11. Perform functions necessary to carry out the requirements of the nursing assistant and nurse aide training and competency evaluation program as set forth in the omnibus budget reconciliation act of 1987 (P.L. 100-203; 101 Stat. 1330), as amended by the medicare catastrophic coverage act of 1988 (P.L. 100-360; 102 Stat. 683). These functions shall include:
 - (a) Testing and registering certified nursing assistants.
 - (b) Testing and licensing licensed nursing assistants.
 - (c) Maintaining a list of board-approved training programs.
- (d) Maintaining a registry of nursing assistants for all certified nursing assistants and licensed nursing assistants.
 - (e) Assessing fees.
- 12. Adopt rules establishing acts that may be performed by a registered nurse practitioner or certified nurse midwife, except that the board does not have authority to decide scope of practice relating to abortion as defined in section 36-2151.
- 13. Adopt rules that prohibit registered nurse practitioners, clinical nurse specialists or certified nurse midwives from dispensing a schedule II controlled substance that is an opioid, except for an implantable device or an opioid that is for medication-assisted treatment for substance use disorders or as provided in section 32-3248.03.
- 14. Adopt rules establishing educational requirements to certify school nurses.
- 15. Publish copies of board rules and distribute these copies on request.
- 16. Require each applicant for initial licensure or certification to submit a full set of fingerprints to the board for the purpose of

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 obtaining a state and federal criminal records check pursuant to section 41-1750 and Public Law 92-544. The department of public safety may exchange this fingerprint data with the federal bureau of investigation.

- 17. Except for a licensee who has been convicted of a felony that has been designated a misdemeanor pursuant to section 13-604, revoke a license of a person, revoke the multistate licensure privilege of a person pursuant to section 32-1669 or not issue a license or renewal to an applicant who has one or more felony convictions and who has not received an absolute discharge from the sentences for all felony convictions three or more years before the date of filing an application pursuant to this chapter.
- 18. Establish standards to approve and reapprove registered nurse practitioner and clinical nurse specialist programs and provide for surveys of registered nurse practitioner and clinical nurse specialist programs as the board deems necessary.
- 19. Provide the licensing authorities of health care institutions, facilities and homes with any information the board receives regarding practices that place a patient's health at risk.
- 20. Limit the multistate licensure privilege of any person who holds or applies for a license in this state pursuant to section 32–1668.
- 21. Adopt rules to establish competency standards for obtaining and maintaining a license.
 - 22. Adopt rules to qualify and certify clinical nurse specialists.
- 23. Adopt rules to approve and reapprove refresher courses for nurses who are not currently practicing.
- 24. Maintain a list of approved medication assistant training programs.
 - 25. Test and certify medication assistants.
- 26. Maintain a registry and disciplinary record of medication assistants who are certified pursuant to this chapter.
- 27. Adopt rules to establish the requirements for a clinical nurse specialist to prescribe and dispense drugs and devices consistent with section 32-1651 and within the clinical nurse specialist's population or disease focus.
- 28. Issue registrations to administer general anesthesia and sedation in dental offices and dental clinics pursuant to section 32-1272 to certified registered nurse anesthetists who have national board certification in anesthesiology.
- C. The board may conduct an investigation on receipt of information that indicates that a person or regulated party may have violated this chapter or a rule adopted pursuant to this chapter. Following the investigation, the board may take disciplinary action pursuant to this chapter.
- D. The board may limit, revoke or suspend the privilege of a nurse to practice in this state granted pursuant to section 32-1668.

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- E. Failure to comply with any final order of the board, including an order of censure or probation, is cause for suspension or revocation of a license or a certificate.
- F. The president or a member of the board designated by the president may administer oaths in transacting the business of the board.
- Sec. 8. Section 32-1607, Arizona Revised Statutes, is amended to read:

32-1607. Preceptorship awareness campaign; definitions

- A. The board shall develop a preceptorship awareness campaign that educates advance practice registered nurse professionals who are licensed pursuant to this chapter on how to become and the benefits of being a preceptor for graduate nursing students.
 - B. For the purposes of this section:
- 1. "Graduate NURSING student" means an individual who is matriculating at the graduate level at an accredited institution of higher education in this state and who is seeking an advance nursing degree to become licensed as an advance practice registered nurse pursuant to this chapter.
- 2. "Nursing preceptor" means a nursing professional who is licensed pursuant to this chapter and who maintains an active practice in this state.
 - 3. "Preceptorship":
- (a) Means a mentoring experience in which a nursing preceptor provides a program of personalized instruction, training and supervision to a graduate NURSING student to enable the GRADUATE NURSING student to obtain an advance nursing degree to become licensed as an advance practice registered nurse pursuant to this chapter.
- (b) Does not include mentoring for medical services that are prescribed in section 36-2301.01, subsection C, paragraph 1.
- Sec. 9. Section 32-1807, Arizona Revised Statutes, is amended to read:

32-1807. Preceptorship awareness campaign: definitions

- A. The board shall develop a preceptorship awareness campaign that educates medical professionals who are licensed pursuant to this chapter on how to become and the benefits of being a medical preceptor for students.
 - B. For the purposes of this section:
- 1. "Medical preceptor" means a medical professional who is licensed pursuant to this chapter and who maintains an active practice in this state.
 - 2. "Preceptorship":
- (a) means a mentoring experience in which a medical preceptor provides a program of personalized instruction, training and supervision to a student, which may include educating the student about dispensing

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 drugs and devices, to enable the student to obtain a medical professional degree to become licensed pursuant to this chapter.

(b) Does not include mentoring for medical services that are prescribed in section 36-2301.01, subsection C, paragraph 1.

3. "Student" means an individual who is matriculating at the graduate level at an accredited institution of higher education in this state and who is seeking a medical professional degree to become licensed pursuant to this chapter.

Sec. 10. Section 32-1854, Arizona Revised Statutes, is amended to read:

32-1854. <u>Definition of unprofessional conduct</u>

For the purposes of this chapter, "unprofessional conduct" includes the following acts, whether occurring in this state or elsewhere:

- 1. Knowingly betraying a professional secret or wilfully violating a privileged communication except as either of these may otherwise be required by law. This paragraph does not prevent members of the board from exchanging information with the licensing and disciplinary boards of other states, territories or districts of the United States or with foreign countries or with osteopathic medical organizations located in this state or in any state, district or territory of this country or in any foreign country.
- 2. Committing a felony or a misdemeanor involving moral turpitude. In either case conviction by any court of competent jurisdiction is conclusive evidence of the commission of the offense.
- 3. Practicing medicine while under the influence of alcohol, a dangerous drug as defined in section 13-3401, narcotic or hypnotic drugs or any substance that impairs or may impair the licensee's ability to safely and skillfully practice medicine.
- 4. Being diagnosed by a physician licensed under this chapter or chapter 13 of this title or a psychologist licensed under chapter 19.1 of this title as excessively or illegally using alcohol or a controlled substance.
- 5. Prescribing, dispensing or administering controlled substances or prescription-only drugs for other than accepted therapeutic purposes.
- 6. Engaging in the practice of medicine in a manner that harms or may harm a patient or that the board determines falls below the community standard.
 - 7. Impersonating another physician.
- 8. Acting or assuming to act as a member of the board if this is not true.
- 9. Procuring, renewing or attempting to procure or renew a license to practice osteopathic medicine by fraud or misrepresentation.
- 10. Having professional connection with or lending one's name to an illegal practitioner of osteopathic medicine or any of the other healing arts.

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- 11. Representing that a manifestly incurable disease, injury, ailment or infirmity can be permanently cured or that a curable disease, injury, ailment or infirmity can be cured within a stated time if this is not true.
- 12. Failing to reasonably disclose and inform the patient or the patient's representative of the method, device or instrumentality the licensee uses to treat the patient's disease, injury, ailment or infirmity.
- 13. Refusing to divulge to the board on demand the means, method, device or instrumentality used to treat a disease, injury, ailment or infirmity.
- 14. Charging a fee for services not rendered or dividing a professional fee for patient referrals. This paragraph does not apply to payments from a medical researcher to a physician in connection with identifying and monitoring patients for clinical trial regulated by the United States food and drug administration.
- 15. Knowingly making any false or fraudulent statement, written or oral, in connection with the practice of medicine or when applying for or renewing privileges at a health care institution or a health care program.
 - 16. Advertising in a false, deceptive or misleading manner.
- 17. Representing or claiming to be an osteopathic medical specialist if the physician has not satisfied the applicable requirements of this chapter or board rules.
- 18. Having a license denied or disciplinary action taken against a license by any other state, territory, district or country, unless it can be shown that this occurred for reasons that did not relate to the person's ability to safely and skillfully practice osteopathic medicine or to any act of unprofessional conduct as provided in this section.
- 19. Committing any conduct or practice contrary to recognized standards of ethics of the osteopathic medical profession.
- 20. Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate any of the provisions of this chapter.
- 21. Failing or refusing to establish and maintain adequate records on a patient as follows:
- (a) If the patient is an adult, for at least six years after the last date the licensee provided the patient with medical or health care services.
- (b) If the patient is a child, either for at least three years after the child's eighteenth birthday or for at least six years after the last date the licensee provided that patient with medical or health care services, whichever date occurs later.
- 22. Using controlled substances or prescription-only drugs unless they are provided by a medical practitioner, as defined in section 32-1901, as part of a lawful course of treatment.

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- 23. Prescribing controlled substances to members of one's immediate family unless there is no other physician available within fifty miles to treat a member of the family and an emergency exists.
 - 24. Committing nontherapeutic use of injectable amphetamines.
- 25. Violating a formal order, probation or a stipulation issued by the board under this chapter.
- 26. Charging or collecting an inappropriate fee. This paragraph does not apply to a fee that is fixed in a written contract between the physician and the patient and entered into before treatment begins.
- 27. Using experimental forms of therapy without adequate informed patient consent or without conforming to generally accepted criteria and complying with federal and state statutes and regulations governing experimental therapies.
- 28. Failing to make patient medical records in the physician's possession promptly available to a physician assistant, a nurse practitioner, a person licensed pursuant to this chapter or a podiatrist, chiropractor, naturopathic physician, physician or homeopathic physician licensed under chapter 7, 8, 13, 14 or 29 of this title on receipt of proper authorization to do so from the patient, a minor patient's parent, the patient's legal guardian or the patient's authorized representative or failing to comply with title 12, chapter 13, article 7.1.
- 29. Failing to allow properly authorized board personnel to have, on presentation of a subpoena, access to any documents, reports or records that are maintained by the physician and that relate to the physician's medical practice or medically related activities pursuant to section 32-1855.01.
 - 30. Signing a blank, undated or predated prescription form.
 - 31. Obtaining a fee by fraud, deceit or misrepresentation.
- 32. Failing to report to the board an osteopathic physician and surgeon who is or may be guilty of unprofessional conduct or is or may be mentally or physically unable safely to engage in the practice of medicine.
- 33. Referring a patient to a diagnostic or treatment facility or prescribing goods and services without disclosing that the physician has a direct pecuniary interest in the facility, goods or services to which the patient has been referred or prescribed. This paragraph does not apply to a referral by one physician to another physician within a group of physicians practicing together.
- 34. Exhibiting a lack of or inappropriate direction, collaboration or supervision of a licensed, certified or registered health care provider or office personnel employed by or assigned to the physician in the medical care of patients.
- 35. Violating a federal law, a state law or a rule applicable to the practice of medicine.

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- 36. Prescribing or dispensing controlled substances or prescription-only medications without establishing and maintaining adequate patient records.
- 37. Dispensing a schedule II controlled substance that is an opioid, except as provided in sections 32-1871 and 32-3248.03.
- 38. Failing to dispense drugs and devices in compliance with article 4 of this chapter.
- 39. Committing any conduct or practice that endangers a patient's or the public's health or may reasonably be expected to do so.
- 40. Committing any conduct or practice that impairs the licensee's ability to safely and skillfully practice medicine or that may reasonably be expected to do so.
- 41. With the exception of heavy metal poisoning, using chelation therapy in the treatment of arteriosclerosis or as any other form of therapy without adequate informed patient consent and without conforming to generally accepted experimental criteria, including protocols, detailed records, periodic analysis of results and periodic review by a medical peer review committee.
- 42. Prescribing, dispensing or administering anabolic-androgenic steroids to a person for other than therapeutic purposes.
- 43. Engaging in sexual conduct with a current patient or with a former patient within six months after the last medical consultation unless the patient was the licensee's spouse at the time of the contact or, immediately preceding the physician-patient relationship, was in a dating or engagement relationship with the licensee. For the purposes of this paragraph, "sexual conduct" includes:
- (a) Engaging in or soliciting sexual relationships, whether consensual or nonconsensual.
- (b) Making sexual advances, requesting sexual favors or engaging in any other verbal conduct or physical conduct of a sexual nature.
 - 44. Committing conduct that is in violation of section 36-2302.
- 45. 44. Committing conduct that the board determines constitutes gross negligence, repeated negligence or negligence that results in harm or death of a patient.
- $\frac{46.}{45.}$ 45. Committing conduct in the practice of medicine that evidences unfitness to practice medicine.
- 47. 46. Engaging in disruptive or abusive behavior in a professional setting.
- 48. 47. Failing to disclose to a patient that the licensee has a direct financial interest in a prescribed treatment, good or service if the treatment, good or service is available on a competitive basis. This paragraph does not apply to a referral by one licensee to another licensee within a group of licensees who practice together. A licensee meets the disclosure requirements of this paragraph if both of the following are true:

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- (a) The licensee makes the disclosure on a form prescribed by the board.
- (b) The patient or the patient's guardian or parent acknowledges by signing the form that the licensee has disclosed the licensee's direct financial interest.
- 49. 48. Prescribing, dispensing or furnishing a prescription medication or a prescription-only device to a person if the licensee has not conducted a physical or mental health status examination of that person or has not previously established a physician-patient relationship. The physical or mental health status examination may be conducted through telehealth as defined in section 36-3601 with a clinical evaluation that is appropriate for the patient and the condition with which the patient presents, unless the examination is for the purpose of obtaining a written certification from the physician for the purposes of title 36, chapter 28.1. This paragraph does not apply to:
 - (a) Emergencies.
- (b) A licensee who provides patient care on behalf of the patient's regular treating licensed health care professional or provides a consultation requested by the patient's regular treating licensed health care professional.
- (c) Prescriptions written or antimicrobials dispensed to a contact as defined in section 36-661 who is believed to have had significant exposure risk as defined in section 36-661 with another person who has been diagnosed with a communicable disease as defined in section 36-661 by the prescribing or dispensing physician.
- (d) Prescriptions for epinephrine auto-injectors written or dispensed for a school district or charter school to be stocked for emergency use pursuant to section 15-157 or for an authorized entity to be stocked pursuant to section 36-2226.01.
- (e) Prescriptions for glucagon written or dispensed for a school district or charter school to be stocked for emergency use pursuant to section 15-344.01.
- (f) Prescriptions written by a licensee through a telehealth program that is covered by the policies and procedures adopted by the administrator of a hospital or outpatient treatment center.
- (g) Prescriptions for naloxone hydrochloride or any other opioid antagonist approved by the United States food and drug administration that are written or dispensed for use pursuant to section 36-2228 or 36-2266.
- 50. 49. If a licensee provides medical care by computer, failing to disclose the licensee's license number and the board's address and telephone number.
- Sec. 11. Section 32-1901, Arizona Revised Statutes, is amended to read:

32-1901. <u>Definitions</u>

In this chapter, unless the context otherwise requires:

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- 1. "Administer" means directly applying a controlled substance, prescription-only drug, dangerous drug or narcotic drug, whether by injection, inhalation, ingestion or any other means, to the body of a patient or research subject by a practitioner or by the practitioner's authorized agent or the patient or research subject at the direction of the practitioner.
- 2. "Advertisement" means all representations that are disseminated in any manner or by any means other than by labeling for the purpose of inducing, or that are likely to induce, directly or indirectly, the purchase of drugs, devices, poisons or hazardous substances.
- 3. "Advisory letter" means a nondisciplinary letter to notify a licensee or permittee that either:
- (a) While there is insufficient evidence to support disciplinary action, the board believes that continuation of the activities that led to the investigation may result in further board action against the licensee or permittee.
- (b) The violation is a minor or technical violation that is not of sufficient merit to warrant disciplinary action.
- (c) While the licensee or permittee has demonstrated substantial compliance through rehabilitation, remediation or reeducation that has mitigated the need for disciplinary action, the board believes that repeating the activities that led to the investigation may result in further board action against the licensee or permittee.
- 4. "Antiseptic", if a drug is represented as such on its label, means a representation that it is a germicide, except in the case of a drug purporting to be, or represented as, an antiseptic for inhibitory use as a wet dressing, ointment or dusting powder or other use that involves prolonged contact with the body.
- 5. "Authorized officers of the law" means legally empowered peace officers, compliance officers of the board of pharmacy and agents of the division of narcotics enforcement and criminal intelligence of the department of public safety.
- 6. "Automated prescription-dispensing kiosk" means a mechanical system that is operated as an extension of a pharmacy, that maintains all transaction information within the pharmacy operating system, that is separately permitted from the pharmacy and that performs operations that either:
- (a) Accept a prescription or refill order, store prepackaged or repackaged medications, label and dispense patient-specific prescriptions and provide counseling on new or refilled prescriptions.
- (b) Dispense or deliver a prescription or refill that has been prepared by or on behalf of the pharmacy that oversees the automated prescription-dispensing kiosk.
- 7. "Board" or "board of pharmacy" means the Arizona state board of pharmacy.

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- 8. "Certificate of composition" means a list of a product's ingredients.
- 9. "Certificate of free sale" means a document that authenticates a product that is generally and freely sold in domestic or international channels of trade.
 - 10. "Color additive" means a material that either:
- (a) Is any dye, pigment or other substance that is made by a process of synthesis or similar artifice or that is extracted, isolated or otherwise derived, with or without intermediate or final change of identity, from any vegetable, animal, mineral or other source.
- (b) If added or applied to a drug, or to the human body or any part of the human body, is capable of imparting color, except that color additive does not include any material that has been or may be exempted under the federal act. Color includes black, white and intermediate grays.
- 11. "Compounding" means preparing, mixing, assembling, packaging or labeling a drug by a pharmacist or an intern or pharmacy technician under the pharmacist's supervision, for the purpose of dispensing to a patient based on a valid prescription order. Compounding includes preparing drugs in anticipation of prescription orders prepared on routine, regularly observed prescribing patterns and preparing drugs as an incident to research, teaching or chemical analysis or for administration by a medical practitioner to the medical practitioner's patient and not for sale or dispensing. Compounding does not include preparing commercially available products from bulk compounds or preparing drugs for sale to pharmacies, practitioners or entities for the purpose of dispensing or distribution.
- 12. "Compressed medical gas distributor" means a person that holds a current permit issued by the board to distribute compressed medical gases to compressed medical gas suppliers and other entities that are registered, licensed or permitted to use, administer or distribute compressed medical gases.
- 13. "Compressed medical gases" means gases and liquid oxygen that a compressed medical gas distributor or manufacturer has labeled in compliance with federal law.
- 14. "Compressed medical gas order" means an order for compressed medical gases that is issued by a medical practitioner.
- 15. "Compressed medical gas supplier" means a person that holds a current permit issued by the board to supply compressed medical gases pursuant to a compressed medical gas order and only to the consumer or the patient.
- 16. "Controlled substance" means a drug, substance or immediate precursor that is identified, defined or listed in title 36, chapter 27, article 2 or the rules adopted pursuant to title 36, chapter 27, article 2.

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- 17. "Corrosive" means any substance that when it comes in contact with living tissue will cause destruction of the tissue by chemical action.
- 18. "Counterfeit drug" means a drug that, or the container or labeling of which, without authorization, bears the trademark, trade name or other identifying mark, imprint, number or device, or any likeness of these, of a manufacturer, distributor or dispenser other than the person that in fact manufactured, distributed or dispensed that drug.
- 19. "Dangerous drug" has the same meaning prescribed in section 13-3401.
 - 20. "Day" means a business day.
- 21. "Decree of censure" means an official action that is taken by the board and that may include a requirement for restitution of fees to a patient or consumer.
- 22. "Deliver" or "delivery" means the actual, constructive or attempted transfer from one person to another whether or not there is an agency relationship.
- 23. "Deputy director" means a pharmacist who is employed by the board and selected by the executive director to perform duties as prescribed by the executive director.
- 24. "Device", except as used in paragraph 18 of this section, section 32-1965, paragraph 4 and section 32-1967, subsection A, paragraph 15 and subsection C, means an instrument, apparatus or contrivance, including its components, parts and accessories, including all such items under the federal act, that is intended either:
- (a) For use in diagnosing, curing, mitigating, treating or preventing disease in the human body or other animals.
- (b) To affect the structure or any function of the human body or other animals.
- 25. "Director" means the director of the division of narcotics enforcement and criminal investigation of the department of public safety.
- 26. "Direct supervision of a pharmacist" means that the pharmacist is present. If relating to the sale of certain items, direct supervision of a pharmacist means that a pharmacist determines the legitimacy or advisability of a proposed purchase of those items.
- 27. "Dispense" means to deliver to an ultimate user or research subject by or pursuant to the lawful order of a practitioner, including prescribing, administering, packaging, labeling or compounding as necessary to prepare for that delivery.
 - 28. "Dispenser" means a practitioner who dispenses.
- 29. "Distribute" means to deliver, other than by administering or dispensing.
 - 30. "Distributor" means a person who distributes.
 - 31. "Drug" means:

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- (a) Articles that are recognized, or for which standards or specifications are prescribed, in the official compendium.
- (b) Articles that are intended for use in the diagnosis, cure, mitigation, treatment or prevention of disease in the human body or other animals.
- (c) Articles other than food that are intended to affect the structure or any function of the human body or other animals.
- (d) Articles that are intended for use as a component of any articles specified in subdivision (a), (b) or (c) of this paragraph but does not include devices or their components, parts or accessories.
- 32. "Drug enforcement administration" means the drug enforcement administration of the United States department of justice or its successor agency.
- 33. "Drug or device manufacturing" means producing, preparing, propagating or processing a drug or device, either directly or indirectly, by extraction from substances of natural origin or independently by means of chemical synthesis and includes any packaging or repackaging of substances or labeling or relabeling of its container and promoting and marketing the same. Drug or device manufacturing does not include compounding.
- 34. "Durable medical equipment" means technologically sophisticated medical equipment as prescribed by the board in rule that a patient or consumer may use in a home or residence and that may be a prescription-only device.
 - 35. "Durable medical equipment distributor":
- (a) Means a person that stores or distributes durable medical equipment other than to the patient or consumer.
- (b) Includes a virtual durable medical equipment distributor as prescribed in rule by the board.
 - 36. "Durable medical equipment supplier":
- (a) Means a person that sells, leases or supplies durable medical equipment to the patient or consumer.
- (b) Includes a virtual durable medical equipment supplier as prescribed in rule by the board.
- 37. "Economic poison" means any substance that alone, in chemical combination with or in formulation with one or more other substances is a pesticide within the meaning of the laws of this state or the federal insecticide, fungicide and rodenticide act and that is used in producing, storing or transporting raw agricultural commodities.
- 38. "Enteral feeding" means nourishment that is provided by means of a tube inserted into the stomach or intestine.
- 39. "Established name", with respect to a drug or ingredient of a drug, means any of the following:
 - (a) The applicable official name.

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- (b) If there is no such name and the drug or ingredient is an article recognized in an official compendium, the official title in an official compendium.
- (c) If neither subdivision (a) nor (b) of this paragraph applies, the common or usual name of the drug.
- 40. "Executive director" means the executive director of the board of pharmacy.
- 41. "Federal act" means the federal laws and regulations that pertain to drugs, devices, poisons and hazardous substances and that are official at the time any drug, device, poison or hazardous substance is affected by this chapter.
 - 42. "Full-service wholesale permittee":
- (a) Means a permittee who may distribute prescription-only drugs and devices, controlled substances and over-the-counter drugs and devices to pharmacies or other legal outlets from a place devoted in whole or in part to wholesaling these items.
 - (b) Includes a virtual wholesaler as defined in rule by the board.
- 43. "Good manufacturing practice" means a system for ensuring that products are consistently produced and controlled according to quality standards and covering all aspects of design, monitoring and control of manufacturing processes and facilities to ensure that products do not pose any risk to the consumer or public.
- 44. "Highly toxic" means any substance that falls within any of the following categories:
- (a) Produces death within fourteen days in half or more than half of a group of ten or more laboratory white rats each weighing between two hundred and three hundred grams, at a single dose of fifty milligrams or less per kilogram of body weight, when orally administered.
- (b) Produces death within fourteen days in half or more than half of a group of ten or more laboratory white rats each weighing between two hundred and three hundred grams, if inhaled continuously for a period of one hour or less at an atmospheric concentration of two hundred parts per million by volume or less of gas or vapor or two milligrams per liter by volume or less of mist or dust, provided the concentration is likely to be encountered by humans if the substance is used in any reasonably foreseeable manner.
- (c) Produces death within fourteen days in half or more than half of a group of ten or more rabbits tested in a dosage of two hundred milligrams or less per kilogram of body weight, if administered by continuous contact with the bare skin for twenty-four hours or less. If the board finds that available data on human experience with any substance indicate results different from those obtained on animals in the dosages or concentrations prescribed in this paragraph, the human data shall take precedence.

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- 45. "Hospital" means any institution for the care and treatment of the sick and injured that is approved and licensed as a hospital by the department of health services.
 - 46. "Intern" means a pharmacy intern.
- 47. "Internship" means the practical, experiential, hands-on training of a pharmacy intern under the supervision of a preceptor.
- 48. "Irritant" means any substance, other than a corrosive, that on immediate, prolonged or repeated contact with normal living tissue will induce a local inflammatory reaction.
- 49. "Jurisprudence examination" means a board-approved pharmacy law examination that is written and administered in cooperation with the national association of boards of pharmacy or another board-approved pharmacy law examination.
- 50. "Label" means a display of written, printed or graphic matter on the immediate container of any article that, unless easily legible through the outside wrapper or container, also appears on the outside wrapper or container of the article's retail package. For the purposes of this paragraph, the immediate container does not include package liners.
- 51. "Labeling" means all labels and other written, printed or graphic matter that either:
 - (a) Is on any article or any of its containers or wrappers.
 - (b) Accompanies that article.
- 52. "Letter of reprimand" means a disciplinary letter that is a public document issued by the board and that informs a licensee or permittee that the licensee's or permittee's conduct violates state or federal law and may require the board to monitor the licensee or permittee.
- 53. "Limited service pharmacy" means a pharmacy that is approved by the board to practice a limited segment of pharmacy as indicated by the permit issued by the board.
 - 54. "Manufacture" or "manufacturer":
- (a) Means every person who prepares, derives, produces, compounds, processes, packages or repackages or labels any drug in a place, other than a pharmacy, that is devoted to manufacturing the drug.
 - (b) Includes a virtual manufacturer.
 - 55. "Marijuana" has the same meaning prescribed in section 13-3401.
- 56. "Medical practitioner" means any medical doctor, doctor of osteopathic medicine, dentist, podiatrist, veterinarian or other person who is licensed and authorized by law to use and prescribe drugs and devices to treat sick and injured human beings or animals or to diagnose or prevent sickness in human beings or animals in this state or any state, territory or district of the United States.
- 57. "Medication order" means a written or verbal order from a medical practitioner or that person's authorized agent to administer a drug or device.

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- 58. "Narcotic drug" has the same meaning prescribed in section 13-3401.
 - 59. "New drug" means either:
- (a) Any drug of which the composition is such that the drug is not generally recognized among experts qualified by scientific training and experience to evaluate the safety and effectiveness of drugs as safe and effective for use under the conditions prescribed, recommended or suggested in the labeling.
- (b) Any drug of which the composition is such that the drug, as a result of investigations to determine its safety and effectiveness for use under such conditions, has become so recognized, but that has not, other than in the investigations, been used to a material extent or for a material time under those conditions.
- 60. "Nonprescription drug" or "over-the-counter drug" means any nonnarcotic medicine or drug that may be sold without a prescription and that is prepackaged and labeled for use by the consumer in accordance with the requirements of the laws of this state and federal law. Nonprescription drug does not include:
- (a) A drug that is primarily advertised and promoted professionally to medical practitioners and pharmacists by manufacturers or primary distributors.
 - (b) A controlled substance.
 - (c) A drug that is required to bear a label that states "Rx only".
 - (d) A drug that is intended for human use by hypodermic injection.
 - 61. "Nonprescription drug wholesale permittee":
- (a) Means a permittee who may distribute only over-the-counter drugs and devices to pharmacies or other lawful outlets from a place devoted in whole or in part to wholesaling these items.
 - (b) Includes a virtual wholesaler as defined in rule by the board.
- 62. "Notice" means personal service or the mailing of a copy of the notice by certified mail and email addressed either to the person at the person's latest address of record in the board office or to the person and the person's attorney using the most recent information provided to the board in the board's licensing database.
- 63. "Nutritional supplementation" means vitamins, minerals and caloric supplementation. Nutritional supplementation does not include medication or drugs.
- 64. "Official compendium" means the latest revision of the United States pharmacopeia and the national formulary or any current supplement.
- 65. "Other jurisdiction" means one of the other forty-nine states, the District of Columbia, the Commonwealth of Puerto Rico or a territory of the United States of America.
- 66. "Package" means a receptacle that is defined or described in the United States pharmacopeia and the national formulary as adopted by the board.

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- 67. "Packaging" means the act or process of placing a drug item or device in a container for the purpose or intent of dispensing or distributing the item or device to another.
- 68. "Parenteral nutrition" means intravenous feeding that provides an individual with fluids and essential nutrients the individual needs while the individual is unable to receive adequate fluids or feedings by mouth or by enteral feeding.
- 69. "Person" means an individual, partnership, corporation and association, and their duly authorized agents.
- 70. "Pharmaceutical care" means the provision of drug therapy and other pharmaceutical patient care services.
- 71. "Pharmacist" means an individual who is currently licensed by the board to practice the profession of pharmacy in this state.
- 72. "Pharmacist in charge" means the pharmacist who is responsible to the board for a licensed establishment's compliance with the laws and administrative rules of this state and of the federal government pertaining to the practice of pharmacy, the manufacturing of drugs and the distribution of drugs and devices.
- 73. "Pharmacist licensure examination" means a board-approved examination that is written and administered in cooperation with the national association of boards of pharmacy or any other board-approved pharmacist licensure examination.
 - 74. "Pharmacy" means:
- (a) Any place where drugs, devices, poisons or related hazardous substances are offered for sale at retail or where prescription orders are dispensed by a licensed pharmacist.
- (b) Any place that displays on or in the place or that displays a sign on the place the words "pharmaceutical chemist", "apothecary", "druggist", "pharmacy", "drugstore", "drugs" or "drug sundries", any combination of these words, or any words of similar meaning in any language.
- (c) Any place where the characteristic symbol of pharmacy or the characteristic prescription sign "Rx" is exhibited.
- (d) Any building or other structure or portion of a building or other structure that is leased, used or controlled by a permittee to conduct the business authorized by the board at the address specified on the permit issued to the permittee.
 - (e) A remote dispensing site pharmacy.
 - (f) A remote hospital-site pharmacy.
 - (g) A satellite pharmacy.
- 75. "Pharmacy intern" means a person who has all of the qualifications and experience prescribed in section 32-1923.
- 76. "Pharmacy technician" means a person who is licensed pursuant to this chapter.

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- 77. "Pharmacy technician trainee" means a person who is licensed REGISTERED pursuant to this chapter.
- 78. "Poison" or "hazardous substance" includes any of the following if intended and suitable for household use or use by children:
- (a) Any substance that, according to standard works on medicine, pharmacology, pharmacognosy or toxicology, if applied to, introduced into or developed within the body in relatively small quantities by its inherent action uniformly produces serious bodily injury, disease or death.
 - (b) A toxic substance.
 - (c) A highly toxic substance.
 - (d) A corrosive substance.
 - (e) An irritant.
 - (f) A strong sensitizer.
- (g) A mixture of any of the substances described in this paragraph, if the substance or mixture of substances may cause substantial personal injury or substantial illness during or as a proximate result of any customary or reasonably foreseeable handling or use, including reasonably foreseeable ingestion by children.
- (h) A substance that is designated by the board to be a poison or hazardous substance. This subdivision does not apply to radioactive substances, economic poisons subject to the federal insecticide, fungicide and rodenticide act or the state pesticide act, foods, drugs and cosmetics subject to state laws or the federal act or substances intended for use as fuels when stored in containers and used in the heating, cooking or refrigeration system of a house. This subdivision applies to any substance or article that is not itself an economic poison within the meaning of the federal insecticide, fungicide and rodenticide act or the state pesticide act, but that is a poison or hazardous substance within the meaning of this paragraph by reason of bearing or containing an economic poison or hazardous substance.
 - 79. "Practice of pharmacy":
- (a) Means furnishing the following health care services as a medical professional:
- (i) (a) Interpreting, evaluating and dispensing prescription orders in the patient's best interests.
- (ii) (b) Compounding drugs pursuant to or in anticipation of a prescription order.
- $\ensuremath{\text{(iii)}}$ (c) Labeling drugs and devices in compliance with state and federal requirements.
- (iv) (d) Participating in drug selection and drug utilization reviews, drug administration, drug or drug-related research and drug therapy monitoring or management.
- $\overline{(v)}$ (e) Providing patient counseling necessary to provide pharmaceutical care.

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(vi) (f) Properly and safely storing drugs and devices in anticipation of dispensing.

(vii) (g) Maintaining required records of drugs and devices.

(viii) (h) Offering or performing acts, services, operations or transactions that are necessary to conduct, operate, manage and control a pharmacy.

(ix) (i) Providing patient care services pursuant to a collaborative practice agreement with a provider as outlined in section 32-1970.

(x) (j) Initiating and administering immunizations or vaccines pursuant to section 32-1974.

(b) Does not include initiating a prescription order for any medication, drug or other substance used to induce or cause a medication abortion as defined in section 36-2151.

- 80. "Practitioner" means any physician, dentist, veterinarian, scientific investigator or other person who is licensed, registered or otherwise permitted to distribute, dispense, conduct research with respect to or administer a controlled substance in the course of professional practice or research in this state, or any pharmacy, hospital or other institution that is licensed, registered or otherwise permitted to distribute, dispense, conduct research with respect to or administer a controlled substance in the course of professional practice or research in this state.
- 81. "Preceptor" means a pharmacist who is serving as the practical instructor of an intern and who complies with section 32-1923.
 - 82. "Precursor chemical" means a substance that is:
- (a) The principal compound that is commonly used or that is produced primarily for use and that is an immediate chemical intermediary used or likely to be used in the manufacture of a controlled substance, the control of which is necessary to prevent, curtail or limit manufacture.
 - (b) Listed in section 13-3401, paragraph 26 or 27.
- 83. "Prescription" means either a prescription order or a prescription medication.
- 84. "Prescription medication" means any drug, including label and container according to context, that is dispensed pursuant to a prescription order.
 - 85. "Prescription-only device" includes:
- (a) Any device that is limited by the federal act to use under the supervision of a medical practitioner.
- (b) Any device required by the federal act to bear on its label essentially the legend "Rx only".
- 86. "Prescription-only drug" does not include a controlled substance but does include:

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- (a) Any drug that because of its toxicity or other potentiality for harmful effect, the method of its use, or the collateral measures necessary to its use is not generally recognized among experts, qualified by scientific training and experience to evaluate its safety and efficacy, as safe for use except by or under the supervision of a medical practitioner.
- (b) Any drug that is limited by an approved new drug application under the federal act or section 32-1962 to use under the supervision of a medical practitioner.
- (c) Every potentially harmful drug, the labeling of which does not bear or contain full and adequate directions for use by the consumer.
- (d) Any drug, other than a controlled substance, that is required by the federal act to bear on its label the legend "Rx only".
 - 87. "Prescription order" means any of the following:
- (a) An order to a pharmacist for drugs or devices that is issued and signed by a duly licensed medical practitioner in the authorized course of the practitioner's professional practice.
- (b) An order that is transmitted to a pharmacist through word of mouth, telephone or other means of communication directed by that medical practitioner. Prescription orders received by word of mouth, telephone or other means of communication shall be maintained by the pharmacist pursuant to section 32-1964, and the record so made by the pharmacist constitutes the original prescription order to be dispensed by the pharmacist. This paragraph does not alter or affect laws of this state or any federal act requiring a written prescription order.
- (c) An order that is initiated by a pharmacist pursuant to a collaborative practice agreement with a provider as outlined in section 32-1970, or immunizations or vaccines administered by a pharmacist pursuant to section 32-1974.
- (d) A diet order or an order for enteral feeding, nutritional supplementation or parenteral nutrition that is initiated by a registered dietitian or other qualified nutrition professional in a hospital pursuant to section 36-416.
 - 88. "Professionally incompetent" means:
- (a) Incompetence based on a variety of factors, including a lack of sufficient pharmaceutical knowledge or skills or experience to a degree likely to endanger the health of patients.
- (b) When considered with other indications of professional incompetence, a pharmacist or pharmacy intern who fails to obtain a passing score on a board-approved pharmacist licensure examination or a pharmacy technician or pharmacy technician trainee who fails to obtain a score on a board-approved pharmacy technician licensure passing examination.
- 89. "Radioactive substance" means a substance that emits ionizing radiation.

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- 90. "Remote dispensing site pharmacy" means a pharmacy where a pharmacy technician or pharmacy intern prepares, compounds or dispenses prescription medications under remote supervision by a pharmacist.
- 91. "Remote hospital-site pharmacy" means a pharmacy located in a satellite facility that operates under the license issued by the department of health services to the hospital of which it is a satellite.
- 92. "Remote supervision by a pharmacist" means that a pharmacist directs and controls the actions of pharmacy technicians and pharmacy interns through the use of audio and visual technology.
- 93. "Revocation" or "revoke" means the official cancellation of a license, permit, registration or other approval authorized by the board for a period of two years unless otherwise specified by the board. A request or new application for reinstatement may be presented to the board for review before the conclusion of the specified revocation period upon review of the executive director.
- 94. "Safely engage in employment duties" means that a permittee or the permittee's employee is able to safely engage in employment duties related to the manufacture, sale, distribution or dispensing of drugs, devices, poisons, hazardous substances, controlled substances or precursor chemicals.
- 95. "Satellite facility" has the same meaning prescribed in section 36-422.
- 96. "Satellite pharmacy" means a work area located within a hospital or on a hospital campus that is not separated by other commercial property or residential property, that is under the direction of a pharmacist, that is a remote extension of a centrally licensed hospital pharmacy, that is owned by and dependent on the centrally licensed hospital pharmacy for administrative control, staffing and drug procurement and that is not required to be separately permitted.
- 97. "Symbol" means the characteristic symbols that have historically identified pharmacy, including show globes and mortar and pestle, and the sign "Rx".
- 98. "Third-party logistics provider" means an entity that provides or coordinates warehousing or other logistics services for the following items, but that does not take ownership of the items, and that distributes those items as directed by a manufacturer, wholesaler, dispenser or durable medical equipment supplier that is permitted by the board:
 - (a) Narcotic drugs or other controlled substances.
 - (b) Dangerous drugs as defined in section 13-3401.
 - (c) Prescription-only drugs and devices.
 - (d) Nonprescription drugs and devices.
 - (e) Precursor chemicals.
 - (f) Regulated chemicals as defined in section 13-3401.

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- 99. "Toxic substance" means a substance, other than a radioactive substance, that has the capacity to produce injury or illness in humans through ingestion, inhalation or absorption through any body surface.
- 100. "Ultimate user" means a person who lawfully possesses a drug or controlled substance for that person's own use, for the use of a member of that person's household or for administering to an animal owned by that person or by a member of that person's household.
- 101. "Virtual manufacturer" means an entity that contracts for the manufacture of a drug or device, including a private label distributor as defined in 21 Code of Federal Regulations part SECTION 207.1, and that meets all of the following:
 - (a) Owns either:
- (i) The new drug application or abbreviated new drug application number as defined by the United States food and drug administration for a drug.
- (ii) The unique device identification number as defined by the United States food and drug administration for a prescription device.
- (b) Is not involved in the physical manufacture of the drug or device.
- (c) Contracts with a United States food and drug administration registered manufacturing entity for the physical manufacture of the drug or device.
- Sec. 12. Section 32-2501, Arizona Revised Statutes, is amended to read:

32-2501. <u>Definitions</u>

In this chapter, unless the context otherwise requires:

- 1. "Active license" means a regular license issued pursuant to this chapter.
- 2. "Adequate records" means legible medical records containing, at a minimum, sufficient information to identify the patient, support the diagnosis, justify the treatment, accurately document the results, indicate advice and cautionary warnings provided to the patient and provide sufficient information for another practitioner to assume continuity of the patient's care at any point in the course of treatment.
- 3. "Advisory letter" means a nondisciplinary letter to notify a physician assistant that either:
- (a) While there is insufficient evidence to support disciplinary action, the board believes that continuation of the activities that led to the investigation may result in further board action against the licensee.
- (b) The violation is a minor or technical violation that is not of sufficient merit to warrant disciplinary action.
- (c) While the licensee has demonstrated substantial compliance through rehabilitation or remediation that has mitigated the need for disciplinary action, the board believes that repetition of the activities

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that led to the investigation may result in further board action against the licensee.

- 4. "Approved program" means a physician assistant educational program accredited by the accreditation review commission on education for physician assistants, or one of its predecessor agencies, the committee on allied health education and accreditation or the commission on the accreditation of allied health educational programs.
- 5. "Board" means the Arizona regulatory board of physician assistants.
- 6. "Collaborating physician or entity" means a physician, physician group practice, physician private practice or licensed health care institution that employs or collaborates with a physician assistant who has at least eight thousand hours of clinical practice as certified by the board pursuant to section 32-2536 and does not require a supervision agreement and that designates one or more physicians by name or position who $\frac{1}{15}$ ARE responsible for the oversight of the physician assistant.
- 7. "Completed application" means an application for which the applicant has supplied all required fees, information and correspondence requested by the board on forms and in a manner acceptable to the board.
- 8. "Immediate family" means the spouse, natural or adopted children, father, mother, brothers and sisters of the physician assistant and the natural or adopted children, father, mother, brothers and sisters of the physician assistant's spouse.
- 9. "Letter of reprimand" means a disciplinary letter that is issued by the board and that informs the physician assistant that the physician assistant's conduct violates state or federal law and may require the board to monitor the physician assistant.
- 10. "Limit" means a nondisciplinary action that is taken by the board and that alters a physician assistant's practice or medical activities if there is evidence that the physician assistant is or may be mentally or physically unable to safely engage in health care tasks.
- 11. "Medically incompetent" means that a physician assistant lacks sufficient medical knowledge or skills, or both, in performing delegated health care tasks to a degree likely to endanger the health or safety of patients.
 - 12. "Minor surgery":
- (a) means those invasive procedures that may be performed by a physician assistant, that are consistent with the training and experience of the physician assistant, that are normally taught in courses of training approved by the board, that have been approved by the board as falling within the scope of practice of a physician assistant and that are consistent with the practice setting requirements of the physician assistant.
 - (b) Does not include a surgical abortion.

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- 13. "Physician" means a physician who is licensed pursuant to chapter 13 or 17 of this title.
- 14. "Physician assistant" means a person who is licensed pursuant to this chapter.
- 15. "Regular license" means a valid and existing license that is issued pursuant to section 32-2521 to perform health care tasks.
- 16. "Restrict" means a disciplinary action that is taken by the board and that alters a physician assistant's practice or medical activities if there is evidence that the physician assistant is or may be medically incompetent or guilty of unprofessional conduct.
- 17. "Supervising physician" means a physician who holds a current unrestricted license, who supervises a physician assistant who has less than eight thousand hours of clinical practice and who assumes legal responsibility for health care tasks performed by the physician assistant.
- 18. "Supervision" means a physician's opportunity or ability to provide or exercise direction and control over the services of a physician assistant. Supervision does not require a physician's constant physical presence if the supervising physician is or can be easily in contact with the physician assistant by telecommunication.
- 19. "Supervision agreement" means a written or electronic signed agreement that both:
- (a) Describes the scope of practice for a physician assistant who has less than eight thousand hours of clinical practice.
- (b) Is between the physician assistant and a physician or the physician assistant's employer that employs or has on medical staff at least one physician who may provide oversight, as applicable, and who holds a current unrestricted license. For the purposes of this subdivision, "employer" means a physician, physician group practice, physician private practice or licensed health care institution.
- 20. "Unprofessional conduct" includes the following acts by a physician assistant that occur in this state or elsewhere:
- (a) Violating any federal or state law or rule that applies to the performance of health care tasks as a physician assistant. Conviction in any court of competent jurisdiction is conclusive evidence of a violation.
- (b) Claiming to be a physician or knowingly allowing another person to represent that person as a physician.
- (c) Performing health care tasks that do not meet the supervision or collaboration requirements, as applicable, pursuant to section 32-2531.
- (d) Exhibiting a pattern of using or being under the influence of alcohol or drugs or a similar substance while performing health care tasks or to the extent that judgment may be impaired and the ability to perform health care tasks detrimentally affected.
 - (e) Signing a blank, undated or predated prescription form.
- (f) Committing gross malpractice, repeated malpractice or any malpractice resulting in the death of a patient.

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- (g) Representing that a manifestly incurable disease or infirmity can be permanently cured or that a disease, ailment or infirmity can be cured by a secret method, procedure, treatment, medicine or device, if this is not true.
- (h) Refusing to divulge to the board on demand the means, method, procedure, modality of treatment or medicine used in treating a disease, injury, ailment or infirmity.
- (i) Prescribing or dispensing controlled substances or prescription-only drugs for which the physician assistant is not approved or in excess of the amount authorized pursuant to this chapter.
- (j) Committing any conduct or practice that is or might be harmful or dangerous to the health of a patient or the public.
- (k) Violating a formal order, probation or stipulation issued by the board.
- (1) Failing to clearly disclose the person's identity as a physician assistant in the course of the physician assistant's employment.
- (m) Failing to use and affix the initials "P.A." or "P.A.-C." after the physician assistant's name or signature on charts, prescriptions or professional correspondence.
- (n) Procuring or attempting to procure a physician assistant license by fraud, misrepresentation or knowingly taking advantage of the mistake of another.
- (o) Having professional connection with or lending the physician assistant's name to an illegal practitioner of any of the healing arts.
 - (p) Failing or refusing to maintain adequate records for a patient.
- (q) Using controlled substances that have not been prescribed by a physician, physician assistant, dentist or nurse practitioner for use during a prescribed course of treatment.
- (r) Prescribing or dispensing controlled substances to members of the physician assistant's immediate family.
- (s) Prescribing, dispensing or administering any controlled substance or prescription-only drug for other than accepted therapeutic purposes.
- (t) Dispensing a schedule II controlled substance that is an opioid, except as provided in section 32-2532.
- (u) Knowingly making any written or oral false or fraudulent statement in connection with the performance of health care tasks or when applying for privileges or renewing an application for privileges at a health care institution.
- (v) Committing a felony, whether or not involving moral turpitude, or a misdemeanor involving moral turpitude. In either case, conviction by a court of competent jurisdiction or a plea of no contest is conclusive evidence of the commission.
- (w) Having a certification or license refused, revoked, suspended, limited or restricted by any other licensing jurisdiction for the

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inability to safely and skillfully perform health care tasks or for unprofessional conduct as defined by that jurisdiction that directly or indirectly corresponds to any act of unprofessional conduct as prescribed by this paragraph.

- (x) Having sanctions including restriction, suspension or removal from practice imposed by an agency of the federal government.
- (y) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate a provision of this chapter.
- (z) Using the term "doctor" or the abbreviation "Dr." on a name tag or in a way that leads the public to believe that the physician assistant is licensed to practice as an allopathic or osteopathic physician in this state.
- (aa) Failing to furnish legally requested information to the board or its investigator in a timely manner.
- (bb) Failing to allow properly authorized board personnel to examine on demand documents, reports and records of any kind relating to the physician assistant's performance of health care tasks.
- (cc) Knowingly making a false or misleading statement on a form required by the board or in written correspondence or attachments furnished to the board.
- (dd) Failing to submit to a body fluid examination and other examinations known to detect the presence of alcohol or other drugs pursuant to an agreement with the board or an order of the board.
- (ee) Violating a formal order, probation agreement or stipulation issued or entered into by the board or its executive director.
- (ff) Except as otherwise required by law, intentionally betraying a professional secret or intentionally violating a privileged communication.
- (gg) Allowing the use of the licensee's name in any way to enhance or allow the continuance of the activities of, or maintaining a professional connection with, an illegal practitioner of medicine or the performance of health care tasks by a person who is not licensed pursuant to this chapter.
- (hh) Committing false, fraudulent, deceptive or misleading advertising by a physician assistant or the physician assistant's staff or representative.
- (ii) Knowingly failing to disclose to a patient on a form that is prescribed by the board and that is dated and signed by the patient or guardian acknowledging that the patient or guardian has read and understands that the licensee has a direct financial interest in a separate diagnostic or treatment agency or in nonroutine goods or services that the patient is being prescribed and whether the prescribed treatment, goods or services are available on a competitive basis. This subdivision does not apply to a referral by one physician assistant to another

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physician assistant or to a doctor of medicine or a doctor of osteopathic medicine within a group working together.

- (jj) With the exception of heavy metal poisoning, using chelation therapy in the treatment of arteriosclerosis or as any other form of therapy without adequate informed patient consent or without conforming to generally accepted experimental criteria, including protocols, detailed records, periodic analysis of results and periodic review by a medical peer review committee, or without approval by the United States food and drug administration or its successor agency.
- (kk) Prescribing, dispensing or administering anabolic or androgenic steroids for other than therapeutic purposes.
- (11) Prescribing, dispensing or furnishing a prescription medication or a prescription-only device as defined in section 32-1901 to a person unless the licensee first conducts a physical examination of that person or has previously established a professional relationship with the person. This subdivision does not apply to:
- (i) A physician assistant who provides temporary patient care on behalf of the patient's regular treating licensed health care professional.
 - (ii) Emergency medical situations as defined in section 41-1831.
- (iii) Prescriptions written to prepare a patient for a medical examination.
- (iv) Prescriptions written or antimicrobials dispensed to a contact as defined in section 36-661 who is believed to have had significant exposure risk as defined in section 36-661 with another person who has been diagnosed with a communicable disease as defined in section 36-661 by the prescribing or dispensing physician assistant.
- (mm) Engaging in sexual conduct with a current patient or with a former patient within six months after the last medical consultation unless the patient was the licensee's spouse at the time of the contact or, immediately preceding the professional relationship, was in a dating or engagement relationship with the licensee. For the purposes of this subdivision, "sexual conduct" includes:
- (i) Engaging in or soliciting sexual relationships, whether consensual or nonconsensual.
- (ii) Making sexual advances, requesting sexual favors or engaging in other verbal conduct or physical contact of a sexual nature with a patient.
- (iii) Intentionally viewing a completely or partially disrobed patient in the course of treatment if the viewing is not related to patient diagnosis or treatment under current practice standards.
- (nn) Performing health care tasks under a false or assumed name in this state.

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Sec. 13. Section 32-2508, Arizona Revised Statutes, is amended to read:

32-2508. Preceptorship awareness campaign; definitions

- A. The board shall develop a preceptorship awareness campaign that educates medical professionals who are licensed pursuant to this chapter on how to become and the benefits of being a medical preceptor for students.
 - B. For the purposes of this section:
- 1. "Medical preceptor" means a medical professional who is licensed pursuant to this chapter and who maintains an active practice in this state.
 - 2. "Preceptorship":
- (a) means a mentoring experience in which a medical preceptor provides a program of personalized instruction, training and supervision to a student to enable the student to obtain a medical professional degree to become licensed pursuant to this chapter.
- (b) Does not include mentoring for medical services that are prescribed in section 36-2301.01, subsection C, paragraph 1.
- 3. "Student" means an individual who is matriculating at the graduate level at an accredited institution of higher education in this state and who is seeking a medical professional degree to become licensed pursuant to this chapter.
- Sec. 14. Section 32-2531, Arizona Revised Statutes, is amended to read:

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32-2531. Physician assistant scope of practice; health care tasks; supervision agreements; supervising physician duties; civil penalty
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- A. Except as prohibited in subsection E of this section, A physician assistant may provide any legal medical service for which the physician assistant has been prepared by education, training and experience and that the physician assistant is competent to perform, including:
- 1. Obtaining comprehensive health histories and performing physical examinations.
- 2. Evaluating and diagnosing patients and managing and providing medical treatment and therapeutic interventions.
- 3. Ordering, performing and interpreting diagnostic studies and therapeutic procedures.
- 4. Educating patients on health promotion and disease prevention and providing counseling and education to meet patient needs.
 - 5. Providing consultation on request.
 - 6. Writing medical orders.
 - 7. Obtaining informed consent.
 - 8. Assisting in surgery.

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- 9. Delegating and assigning therapeutic and diagnostic measures to and supervising licensed or unlicensed personnel.
 - 10. Making appropriate referrals.
- 11. Ordering, prescribing, dispensing and administering drugs and medical devices.
 - 12. Prescribing prescription-only medications.
- 13. Prescribing schedule IV or schedule V controlled substances as defined in the controlled substances act (P.L. 91-513; 84 Stat. 1242; 21 United States Code section 802).
- 14. Prescribing schedule II and schedule III controlled substances as defined in the controlled substances act.
 - 15. Performing minor surgery.
- 16. Performing nonsurgical health care tasks that are normally taught in courses of training approved by the board and that are consistent with the physician assistant's education, training and experience.
- 17. Certifying the health or disability of a patient as required by any local, state or federal program.
 - 18. Ordering home health services.
- B. Pursuant to the requirements of this chapter and the standard of care, a physician assistant who has at least eight thousand hours of clinical practice certified by the board pursuant to section 32-2536 is not required to practice pursuant to a supervision agreement but shall continue to collaborate with, consult with or refer to the appropriate health care professional as indicated by the patient's condition and by the physician assistant's education, experience and competencies. The level of collaboration required by this subsection is determined by the policies of the practice setting at which the physician assistant is employed, including a physician employer, physician group practice or health care institution. Collaboration, consultation or а referral pursuant to this subsection may occur through electronic means and does not require the physical presence of the appropriate health care professional at the time or place the physician assistant provides medical services. This subsection does not prohibit a physician assistant who has at least eight thousand hours of clinical practice certified by the board pursuant to section 32-2536 from practicing pursuant to a supervision agreement.
- C. A physician assistant who has less than eight thousand hours of clinical practice certified by the board shall work in accordance with a supervision agreement that describes the physician assistant's scope of practice. A physician assistant may not perform health care tasks until the physician assistant has completed and signed a supervision agreement. Under a supervision agreement, supervision may occur through electronic means and does not require the physical presence of the supervising physician at the time or place the physician assistant provides medical

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services. The supervision agreement must be kept on file at the main location of the physician assistant's practice and, on request, be made available to the board or the board's representative. On receipt of board certification of the physician assistant's completion of at least eight thousand hours of clinical practice, a physician assistant is no longer subject to the requirements of this subsection. The board may count practice hours earned in another jurisdiction toward the hours of clinical practice required by this subsection.

D. A physician assistant who does not practice pursuant to a supervision agreement is legally responsible for the health care services performed by the physician assistant.

E. A physician assistant shall not perform surgical abortions as defined in section 36-2151.

F. E. A physician assistant may pronounce death and may authenticate, by the physician assistant's signature, certification, stamp, verification, affidavit or endorsement, any form that may be authenticated by a physician's signature, certification, verification, affidavit or endorsement.

6. F. The board by rule may prescribe a civil penalty for a violation of this article. The penalty shall not exceed \$50 for each violation. The board shall deposit, pursuant to sections 35-146 and 35-147, all monies it receives from this penalty in the state general fund. A physician assistant and the supervising physician or collaborating physician or entity may contest the imposition of this penalty pursuant to board rule. The imposition of a civil penalty is public information, and the board may use this information in any future disciplinary actions.

Sec. 15. Section 32-2532, Arizona Revised Statutes, is amended to read:

32-2532. <u>Prescribing, administering and dispensing drugs;</u>
<u>limits and requirements; notice</u>

A. Except as provided in subsection G of this section, a physician assistant shall not prescribe, dispense or administer:

- 1. A schedule II or schedule III controlled substance as defined in the controlled substances act (P.L. 91-513; 84 Stat. 1242; 21 United States Code section 802) without board approval and United States drug enforcement administration registration. If the physician assistant has less than eight thousand clinical practice hours, the supervision agreement shall specify the physician assistant's ability to prescribe, dispense or administer a schedule II or schedule III controlled substance.
- 2. A schedule IV or schedule V controlled substance as defined in the controlled substances act without United States drug enforcement administration registration. If the physician assistant has less than eight thousand clinical practice hours, the supervision agreement shall

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 specify the physician assistant's ability to prescribe, dispense or administer a schedule IV or schedule V controlled substance.

3. Prescription medication intended to perform or induce ar abortion.

- B. If the physician assistant has less than eight thousand clinical practice hours, the supervision agreement shall specify the physician assistant's ability to prescribe, dispense or administer prescription-only medication.
- C. All prescription orders issued by a physician assistant shall contain the name, address and telephone number of the physician assistant. A physician assistant shall issue prescription orders for controlled substances under the physician assistant's own United States drug enforcement administration registration number.
- D. If the physician assistant is certified for prescription privileges pursuant to section 32-2504, subsection A, initial prescriptions by the physician assistant for schedule II controlled substances that are opioids are subject to the limits prescribed in sections 32-3248 and 32-3248.01. For each schedule IV or schedule V controlled substance, the physician assistant may not prescribe the controlled substance more than five times in a six-month period for each patient.
- E. A prescription by a physician assistant for a schedule III controlled substance that is an opioid or benzodiazepine is not refillable without the written consent of a physician.
- F. A physician assistant may not dispense, prescribe or refill prescription-only drugs for a period exceeding one year for each patient.
- G. Except in an emergency, a physician assistant may dispense schedule II or schedule III controlled substances for a period of use of not to exceed seventy-two hours with board approval or any other controlled substance for a period of use of not to exceed ninety days and may administer controlled substances without board approval if it is medically indicated in an emergency dealing with potential loss of life or limb or major acute traumatic pain. Notwithstanding the authority granted in this subsection, a physician assistant may not dispense a schedule II controlled substance that is an opioid, except for an implantable device or an opioid that is for medication-assisted treatment for substance use disorders or as provided in section 32-3248.03.
- H. Except for samples provided by manufacturers, all drugs dispensed by a physician assistant shall be labeled to show the name of the physician assistant.
- I. A physician assistant shall not obtain a drug from any source other than a physician or a pharmacist. A physician assistant may receive manufacturers' samples.
- J. If a physician assistant is approved by the board to prescribe, administer or dispense schedule II and schedule III controlled substances,

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 the physician assistant shall maintain an up-to-date and complete log of all schedule II and schedule III controlled substances the physician assistant administers or dispenses. The board may not grant a physician assistant the authority to dispense schedule II controlled substances that are opioids, except for implantable devices or opioids that are for medication-assisted treatment for substance use disorders.

- K. The Arizona regulatory board of physician assistants shall advise the Arizona state board of pharmacy and the United States drug enforcement administration of all physician assistants who are authorized to prescribe or dispense drugs and any modification of their authority.
- L. The Arizona state board of pharmacy shall notify all pharmacies at least quarterly of physician assistants who are authorized to prescribe or dispense drugs.

Sec. 16. Section 32-3217, Arizona Revised Statutes, is amended to read:

32-3217. <u>Volunteer health services registration; health professionals; free medical clinic</u>

- A. A health profession regulatory board in this state may issue a volunteer health services registration to allow a health professional who is not a licensee to practice in this state for a total of up to fourteen days each calendar year if the health professional meets all of the following requirements:
- 1. Holds an active and unrestricted license in a state, territory or possession of the United States.
 - 2. Has never had a license revoked or suspended.
 - 3. Is not the subject of an unresolved complaint.
- 4. Applies for registration every two years as prescribed by the board.
- 5. Agrees to render services at a free medical clinic that does not provide abortions and restricts the health professional's authorized services and duties to the provision of care or service at a free medical clinic.
- 6. Provides only the care or services that the health professional is licensed or authorized to provide by the health professional's regulatory agency or this state's regulatory board for the same health profession, whichever is more stringent.
- B. The fourteen days of practice prescribed by subsection A of this section may be performed consecutively or cumulatively during each calendar year.
- C. For the purpose of meeting the requirements of subsection A of this section, an applicant shall provide the appropriate health profession regulatory board the name of each state in which the person is licensed or has held a license and the board shall verify with the applicable regulatory agency of each state that the applicant is licensed or has held

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a license, has never had the license revoked or suspended and is not the subject of an unresolved complaint. The board may accept the verification of the information required by subsection A, paragraphs 1, 2 and 3 of this section from each of the other state's regulatory agencies either electronically or by hard copy.

- D. A health profession regulatory board issuing a volunteer health services registration pursuant to this section may not charge a fee.
- E. A health profession regulatory board may immediately suspend or revoke a registration issued pursuant to this section on receiving proof satisfactory to the health profession regulatory board that the holder of the registration has engaged in practice in this state that is outside the scope of the registration or that grounds exist for action against the holder of the registration under the relevant chapter of this title. The holder of a registration may request a hearing to challenge the suspension or revocation of a registration in the manner permitted for appealable agency actions under title 41, chapter 6, article 10.
- Sec. 17. Section 36-301, Arizona Revised Statutes, is amended to read:

36-301. <u>Definitions</u>

In this chapter, unless the context otherwise requires:

- 1. "Administrative order" means a written decision issued by an administrative law judge or quasi-judicial entity.
- 2. "Amend" means to make a change, other than a correction, to a registered certificate by adding, deleting or substituting information on that certificate.
- 3. "Birth" or "live birth" means the complete expulsion or extraction of an unborn child from the child's mother, irrespective of the duration of the pregnancy, that shows evidence of life, with or without a cut umbilical cord or an attached placenta, such as breathing, heartbeat, umbilical cord pulsation or definite voluntary muscle movement after expulsion or extraction of the unborn child.
 - 4. "Certificate" means a record that documents a birth or death.
- 5. "Certified copy" means a written reproduction of a registered certificate that a local registrar, a deputy local registrar or the state registrar has authenticated as a true and exact written reproduction of a registered certificate.
- 6. "Correction" means a change made to a registered certificate because of a typographical error, including misspelling and missing or transposed letters or numbers.
 - 7. "Court order" means a written decision issued by:
- (a) The superior court, an appellate court or the supreme court or an equivalent court in another state.
- (b) A commissioner or judicial hearing officer of the superior court.
 - (c) A judge of a tribal court in this state.

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- 8. "Current care" means that a health care provider has examined, treated or provided care for a person for a chronic or acute condition within eighteen months preceding that person's death. Current care does not include services provided in connection with a single event of emergency or urgent care. For the purposes of this paragraph, "treated" includes prescribing medication.
 - 9. "Custody" means legal authority to act on behalf of a child.
 - 10. "Department" means the department of health services.
- 11. "Electronic" means technology that has electrical, digital, magnetic, wireless, optical or electromagnetic capabilities or technology with similar capabilities.
- 12. "Evidentiary document" means written information used to prove the fact for which the document is presented.
 - 13. "Family member" means:
- (a) A person's spouse, natural or adopted offspring, father, mother, grandparent, grandchild to any degree, brother, sister, aunt, uncle or first or second cousin.
- (b) The natural or adopted offspring, father, mother, grandparent, grandchild to any degree, brother, sister, aunt, uncle or first or second cousin of the person's spouse.
- 14. "Fetal death" means the cessation of life before the complete expulsion or extraction of an unborn child from the child's mother that is evidenced by the absence of breathing, heartbeat, umbilical cord pulsation or definite voluntary muscle movement after expulsion or extraction.
- 15. "Final disposition" means the interment, cremation, removal from this state or other disposition of human remains.
 - 16. "Foundling" means:
- (a) A newborn infant WHO IS left with a safe haven provider pursuant to section 13-3623.01.
 - (b) A child whose father and mother cannot be determined.
- 17. "Funeral establishment" has the same meaning prescribed in section 32-1301.
- 18. "Health care institution" has the same meaning prescribed in section 36-401.
 - 19. "Health care provider" means:
- (a) A physician WHO IS licensed pursuant to title 32, chapter 13 or 17.
- (b) A doctor of naturopathic medicine WHO IS licensed pursuant to title 32, chapter 14.
- (c) A midwife WHO IS licensed pursuant to chapter 6, article 7 of this title.
- 42 (d) A nurse midwife WHO IS certified pursuant to title 32, 43 chapter 15.
 - (e) A nurse practitioner WHO IS licensed and certified pursuant to title 32, chapter 15.

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- (f) A physician assistant WHO IS licensed pursuant to title 32, chapter 25.
- (g) A health care provider who is licensed or certified by another state or jurisdiction of the United States and who works in a federal health care facility.
- 20. "Human remains" means a lifeless human body or parts of a human body that permit a reasonable inference that death occurred.
 - 21. "Issue" means:
 - (a) To provide a copy of a registered certificate.
- (b) An action taken by a court of competent jurisdiction, administrative law judge or quasi-judicial entity.
- 22. "Legal age" means a person who is at least eighteen years of age or who is emancipated by a court order.
- 23. "Medical certification of death" means the opinion of the health care provider who signs the certificate of probable or presumed cause of death that complies with rules adopted by the state registrar of vital records and that is based on any of the following that is reasonably available:
 - (a) Personal examination.
 - (b) Medical history.
 - (c) Medical records.
 - (d) Other reasonable forms of evidence.
- 24. "Medical examiner" means a medical examiner or alternate medical examiner as defined in section 11-591.
- 25. "Name" means a designation that identifies a person, including a first name, middle name, last name or suffix.
- 26. "Natural causes" means those causes that are due solely or nearly entirely to disease or the aging process.
- 27. "Presumptive death" means a determination by a court that a death has occurred or is presumed to have occurred but the human remains have not been located or recovered.
- 28. "Register" means to assign an official state number and to incorporate into the state registrar's official records.
 - 29. "Responsible person" means a person listed in section 36-831.
 - 30. "Seal" means to bar from access.
- 31. "Submit" means to present, physically or electronically, a certificate, evidentiary document or form provided for in this chapter to a local registrar, a deputy local registrar or the state registrar.
- 32. "System of public health statistics" means the processes and procedures for:
- (a) Tabulating, analyzing and publishing public health information derived from vital records data and other sources authorized pursuant to section 36-125.05 or section 36-132, subsection A, paragraph 3.
- (b) Performing other activities related to public health information.

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- 33. "System of vital records" means the statewide processes and procedures for:
- (a) Electronically or physically collecting, creating, registering, maintaining, copying and preserving vital records.
- (b) Preparing and issuing certified and noncertified copies of vital records.
 - (c) Performing other activities related to vital records.
- 34. "Unborn child" has the same meaning prescribed in section 36-2151.
- 35. 34. "Vital record" means a registered birth certificate or a registered death certificate.
- Sec. 18. Section 36-402, Arizona Revised Statutes, is amended to read:

36-402. Exemptions

- A. This chapter and the rules adopted by the director pursuant to this chapter do not authorize the licensure, supervision, regulation or control of:
- 1. The remedial care or treatment of residents or patients in any home or institution conducted only for those who rely solely on treatment by prayer or spiritual means in accordance with the creed or tenets of any well-recognized church or religious denomination.
- 2. Establishments, such as motels, hotels and boarding houses, that provide domiciliary and ancillary commercial services but do not provide adaptive, medical, hospital, nursing, behavioral health, health-related or supervisory care services.
- 3. Private offices and clinics of health care providers licensed under title 32 that are not freestanding urgent care centers, unless:
- (a) Patients of the office or clinic are kept overnight as bed patients or treated otherwise under general anesthesia, except when treatment by general anesthesia is regulated by title 32, chapter 11.
- (b) The office or clinic is an abortion clinic. For the purposes of this subdivision, "abortion clinic" has the same meaning prescribed in section 36-449.01.
- (c) (b) The office or clinic is a pain management clinic. For the purposes of this subdivision, "pain management clinic" has the same meaning prescribed in section 36-448.01.
- 4. Dispensaries and first aid stations that are located within business or industrial establishments and that are maintained solely for the use of employees if the facility does not contain inpatient beds and is under the supervision of a physician or a registered nurse practitioner.
- 5. The collection, processing or distribution of whole human blood, blood components, plasma, blood fractions or derivatives that are procured, processed or distributed by federally licensed and regulated blood banks.

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- 6. Places where four or fewer adults who are not related to the administrator or owner receive adult day health services for compensation on a regular basis.
- 7. Places at which persons receive health-related services only from relatives or from legal guardians or places that do not purport to be establishments that regularly provide health-related services and at which one or two persons receive health-related services on a twenty-four-hour basis.
- 8. The personal residence of a terminally ill person, or the personal residence of that person's relative or guardian, where that person receives hospice services from a hospice service agency.
- 9. All medical and health-related facilities and services that are provided to inmates who are confined in a state prison. department of corrections shall annually evaluate the medical health-related facilities and services that are provided to inmates to determine that the facilities and services meet the applicable standards that are adopted by the director of the department of health services. The state department of corrections shall report the results of its annual evaluation and the actual findings, including a plan of correction for any deficiencies, to the director of the department of health services. department of health services shall conduct validation surveys on a percentage of the medical and health-related facilities, the number of which shall be determined by the state department of corrections and the department of health services. The director of the state department of corrections shall maintain the annual evaluation reports. This paragraph does not apply to licensed behavioral or mental health inpatient treatment facilities that the state department of corrections operates.
- 10. A facility that provides medical and health services to inmates who are confined in a county jail. The sheriff shall annually evaluate the facility to determine if it meets the applicable standards that are adopted by either a national corrections commission on health care or an American correctional association, or the sheriff shall annually submit the facility to a similar separate inspection by an outside agency with medical standards. The sheriff must submit the certificate of accreditation or proof of successful inspection to the department annually and keep a copy of the certificate or proof of inspection.
- 11. Community education, advocacy or recovery support groups that are not owned or operated by or contracted to provide services with a health care institution.
- 12. An outpatient treatment center that has the same direct owner or indirect owner as a hospital licensed pursuant to this chapter, that is staffed by health care providers who are licensed pursuant to title 32 and that provides notice to the department of its decision to be exempt from licensure under this chapter, unless:

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- (a) Patients are kept overnight in the outpatient treatment center or are treated under general anesthesia, except when the treatment by general anesthesia is regulated pursuant to title 32, chapter 11.
- (b) The outpatient treatment center is an abortion clinic as defined in section 36-449.01.
- (c) (b) The outpatient treatment center is a pain management clinic as defined in section 36-448.01.
- B. A medical and health-related facility that provides medical and health services exclusively to persons who are incarcerated, detained or confined under court order or court jurisdiction is exempt from the patient-per-room capacity requirements provided in rule if the facility:
 - 1. Does not exceed its intended medical and custodial purposes.
- 2. Adopts policies and procedures to comply with the national commission on correctional health care standards, or equivalent standards.
- 3. As soon as practicable, becomes accredited by the national commission on correctional health care, or by an equivalent organization.
- 4. Once accreditation is obtained, submits a certificate of accreditation to the department of health services annually.
 - 5. Maintains a copy of the certificate of accreditation.
- 6. Maintains patient and custodial records, including on-site current photographs and fingerprints, if permitted by applicable law.
- 7. Makes patient lists with inmate identifiers available to the state department of corrections on reasonable request.
- 8. Provides timely notice of any major incident involving public safety to the appropriate law enforcement agency and allows that agency access to the facility for the purposes of law enforcement and investigation.
- C. Subsection B of this section does not apply to health care institutions that exclusively provide behavioral health services.
- Sec. 19. Section 36-404, Arizona Revised Statutes, is amended to read:

36-404. <u>Limitation of disclosure of information</u>

- A. Information received and records kept by the department for the purpose of administering this chapter are available to the public except:
- 1. Information obtained for purposes of $\frac{1}{2}$ and $\frac{1}{2}$ ARTICLE 5 of this chapter.
- 2. Personally identifiable medical information or any information from which a patient or the patient's family might be identified.
- 3. Sources of information that cause the department to believe that an inspection of an institution is needed to determine the extent of compliance with this chapter and rules adopted pursuant to this chapter.
- 4. Personally identifiable information of a physician that is received and any records kept regarding the physician's admitting privileges pursuant to section 36-449.02.

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 B. The department may release information listed under subsection A of this section to an officer of the court pursuant to a court order, a department or agency of this state or the federal government, a law enforcement agency or a county medical examiner if the release of this information is necessary and pertinent to an investigation or proceeding unless the release of this information is prohibited by federal or state law. The recipient shall maintain patient and source name confidentiality.

Sec. 20. Section 36-427, Arizona Revised Statutes, is amended to read:

36-427. <u>Suspension or revocation; intermediate sanctions</u>

- A. The director, pursuant to title 41, chapter 6, article 10, may suspend or revoke, in whole or in part, the license of any health care institution if its owners, officers, agents or employees:
- 1. Violate this chapter or the rules of the department adopted pursuant to this chapter.
- 2. Knowingly aid, permit or abet the commission of any crime involving medical and health-related services.
- 3. Have been, are or may continue to be in substantial violation of the requirements for licensure of the institution, as a result of which the health or safety of one or more patients or the general public is in immediate danger.
 - 4. Fail to comply with section 36-2901.08.
 - 5. Violate section 36-2302.
- B. If the licensee, the chief administrative officer or any other person in charge of the institution refuses to permit the department or its employees or agents the right to inspect the institution's premises as provided in section 36-424, such action shall be deemed reasonable cause to believe that a substantial violation under subsection A, paragraph 3 of this section exists.
- C. If the director reasonably believes that a violation of subsection A, paragraph 3 of this section has occurred and that life or safety of patients will be immediately affected, the director, on written notice to the licensee, may order the immediate restriction of admissions or readmissions, selected transfer of patients out of the facility, reduction of capacity and termination of specific services, procedures, practices or facilities.
- D. The director may rescind, in whole or in part, sanctions imposed pursuant to this section on correction of the violation or violations for which the sanctions were imposed.

Sec. 21. Repeal

Title 36, chapter 4, article 10, Arizona Revised Statutes, is repealed.

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1 Sec. 22. Section 36-2151, Arizona Revised Statutes, is amended to 2 read: 3 36-2151. Definition of abortion In this article, unless the context otherwise requires, : 4 5 1. "abortion": 6 Means the use of any means to terminate the clinically 7 diagnosable pregnancy of a woman with knowledge that the termination by 8 those means will cause, with reasonable likelihood, the death of the 9 unborn child. Abortion 2. Does not include birth control devices, oral contraceptives used 10 11 to inhibit or prevent ovulation, conception or the implantation of a fertilized ovum in the uterus or the use of any means to save the life or 12 preserve the health of the unborn child, to preserve the life or health of 13 the child after a live birth, to terminate an ectopic pregnancy or to 14 15 remove a dead fetus. "Auscultation" means the act of listening for sounds made by 16 17 internal organs of the unborn child, specifically for a heartbeat, using 18 an ultrasound transducer and fetal heart rate monitor. 19 3. "Bodily remains" means the physical remains, corpse or body 20 parts of an unborn child who has been expelled or extracted from his or 21 her mother through abortion. 22 4. "Conception" means the fusion of a human spermatozoon with a 23 human ovum. 24 5. "Final disposition" has the same meaning prescribed in section 25 26 6. "Genetic abnormality" has the same meaning prescribed in section 27 13-3603.02. 28 "Gestational age" means the age of the unborn child as 29 calculated from the first day of the last menstrual period of the pregnant 30 woman. 31 8. "Health professional" has the same meaning prescribed in section 32 32-3201. 33 9. "Medical emergency" means a condition that, on the basis of the 34 physician's good faith clinical judgment, so complicates the medical 35 condition of a pregnant woman as to necessitate the immediate abortion of 36 her pregnancy to avert her death or for which a delay will create serious 37 risk of substantial and irreversible impairment of a major bodily 38 function. "Medication abortion" means the use of any medication, drug or 39 40 other substance that is intended to cause or induce an abortion. 41 11. "Physician" means a person who is licensed pursuant to title 42 32, chapter 13 or 17.

12. "Pregnant" or "pregnancy" means a female reproductive condition

of having a developing unborn child in the body and that begins with

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conception.

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13. "Probable gestational age" means the gestational age of the unborn child at the time the abortion is planned to be performed and as determined with reasonable probability by the attending physician.
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- 14. "Surgical abortion" means the use of a surgical instrument or a machine to terminate the clinically diagnosable pregnancy of a woman with knowledge that the termination by those means will cause, with reasonable likelihood, the death of the unborn child. Surgical abortion does not include the use of any means to increase the probability of a live birth, to preserve the life or health of the child after a live birth, to terminate an ectopic pregnancy or to remove a dead fetus. Surgical abortion does not include patient care incidental to the procedure.
- 15. "Ultrasound" means the use of ultrasonic waves for diagnostic or therapeutic purposes to monitor a developing unborn child.
- 16. "Unborn child" means the offspring of human beings from conception until birth.

Sec. 23. Repeal

- A. Sections 36-2153, 36-2153.01, 36-2154, 36-2155, 36-2156, 36-2157, 36-2158, 36-2159 and 36-2160, Arizona Revised Statutes, are repealed.
- B. Title 36, chapter 20, article 2, Arizona Revised Statutes, is repealed.
- C. Title 36, chapter 23, articles 1 and 3, Arizona Revised Statutes, are repealed.
 - D. Section 36-3604, Arizona Revised Statutes, is repealed.
- Sec. 24. Section 41-1033, Arizona Revised Statutes, is amended to read:
 - 41-1033. Petition for a rule or review of an agency practice.

 substantive policy statement. final rule or unduly burdensome licensing requirement; notice
 - A. Any person may petition an agency to do either of the following:
 - 1. Make, amend or repeal a final rule.
- 2. Review an existing agency practice or substantive policy statement that the petitioner alleges to constitute a rule.
- B. An agency shall prescribe the form of the petition and the procedures for the petition's submission, consideration and disposition. The person shall state on the petition the rulemaking to review or the agency practice or substantive policy statement to consider revising, repealing or making into a rule.
- C. Not later than sixty days after submission of the petition, the agency shall either:
- 1. Reject the petition and state its reasons in writing for rejection to the petitioner.
 - 2. Initiate rulemaking proceedings in accordance with this chapter.
 - 3. If otherwise lawful, make a rule.

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- D. The agency's response to the petition is open to public inspection.
- E. If an agency rejects a petition pursuant to subsection C of this section, the petitioner has thirty days to appeal to the council to review whether the existing agency practice or substantive policy statement constitutes a rule. The petitioner's appeal may not be more than five double-spaced pages.
- F. A person may petition the council to request a review of a final rule based on the person's belief that the final rule does not meet the requirements prescribed in section 41-1030. A petition submitted under this subsection may not be more than five double-spaced pages.
- G. A person may petition the council to request a review of an existing agency practice, substantive policy statement, final rule or regulatory licensing requirement that the petitioner alleges is not specifically authorized by statute, exceeds the agency's statutory authority, is unduly burdensome or is not demonstrated to be necessary to specifically fulfill a public health, safety or welfare concern. On receipt of a properly submitted petition pursuant to this section, the council shall review the existing agency practice, substantive policy statement, final rule or regulatory licensing requirement as prescribed by this section. A petition submitted under this subsection may not be more than five double-spaced pages. This subsection does not apply to an individual or institution that is subject to title 36, chapter 4, article 10 or chapter 20.
- H. If the council receives information that alleges an existing agency practice or substantive policy statement may constitute a rule, that a final rule does not meet the requirements prescribed in section 41-1030 or that an existing agency practice, substantive policy statement, final rule or regulatory licensing requirement exceeds the agency's statutory authority, is not specifically authorized by statute or does not meet the guidelines prescribed in subsection G of this section, or if the council receives an appeal under subsection E of this section, and at least three council members request of the chairperson that the matter be heard in a public meeting:
- 1. Within ninety days after receiving the third council member's request, the council shall determine whether any of the following applies:
- (a) The agency practice or substantive policy statement constitutes a rule.
- (b) The final rule meets the requirements prescribed in section 41-1030.
- (c) An existing agency practice, substantive policy statement, final rule or regulatory licensing requirement exceeds the agency's statutory authority, is not specifically authorized by statute or meets DOES NOT MEET the guidelines prescribed in subsection G of this section.

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- 2. Within ten days after receiving the third council member's request, the council shall notify the agency that the matter has been or will be placed on the council's agenda for consideration on the merits.
- 3. Not later than thirty days after receiving notice from the council, the agency shall submit a statement of not more than five double-spaced pages to the council that addresses whether any of the following applies:
- (a) The existing agency practice or substantive policy statement constitutes a rule.
- (b) The final rule meets the requirements prescribed in section 41-1030.
- (c) An existing agency practice, substantive policy statement, final rule or regulatory licensing requirement exceeds the agency's statutory authority, is not specifically authorized by statute or meets the guidelines prescribed in subsection G of this section.
- I. At the hearing, the council shall allocate the petitioner and the agency an equal amount of time for oral comments not including any time spent answering questions raised by council members. The council may also allocate time for members of the public who have an interest in the issue to provide oral comments.
- J. For the purposes of subsection H of this section, the council meeting shall not be scheduled until the expiration of the agency response period prescribed in subsection H, paragraph 3 of this section.
- K. An agency practice, substantive policy statement, final rule or regulatory licensing requirement considered by the council pursuant to this section shall remain in effect while under consideration of the council. If the council determines that the agency practice, substantive policy statement or regulatory licensing requirement exceeds the agency's statutory authority, is not authorized by statute or constitutes a rule or that the final rule does not meet the requirements prescribed in section 41–1030, the practice, policy statement, rule or regulatory licensing requirement shall be void. If the council determines that the existing agency practice, substantive policy statement, final rule or regulatory licensing requirement is unduly burdensome or is not demonstrated to be necessary to specifically fulfill a public health, safety or welfare concern, the council shall modify, revise or declare void any such existing agency practice, substantive policy statement, final rule or regulatory licensing requirement. If an agency decides to further pursue practice, substantive policy statement or regulatory licensing requirement that has been declared void or has been modified or revised by the council, the agency may do so only pursuant to a new rulemaking.
- L. A council decision pursuant to this section shall be made by a majority of the council members who are present and voting on the issue. Notwithstanding any other law, the council may not base any decision concerning an agency's compliance with the requirements of section 41-1030

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 in issuing a final rule or substantive policy statement on whether any party or person commented on the rulemaking or substantive policy statement.

- M. A decision by the council pursuant to this section is not subject to judicial review, except that, in addition to the procedure prescribed in this section or in lieu of the procedure prescribed in this section, a person may seek declaratory relief pursuant to section 41-1034.
- N. Each agency and the secretary of state shall post prominently on their websites notice of an individual's right to petition the council for review pursuant to this section.

Sec. 25. Section 41-1080.01, Arizona Revised Statutes, is amended to read:

41-1080.01. <u>Licensing fees; waiver; annual report;</u> <u>definitions</u>

- A. Except for an individual who applies for a license pursuant to title 36, chapter 4, article 10 or chapter 28.1, an agency shall waive any fee charged for an initial license for any of the following individuals if the individual is applying for that specific license in this state for the first time:
- 1. Any individual applicant whose family income does not exceed two hundred percent of the federal poverty guidelines.
 - 2. Any active duty military service member's spouse.
- 3. Any honorably discharged veteran who has been discharged not more than two years before application.
- B. On or before March 1 of each year, the department of administration shall report to the president of the senate, the speaker of the house of representatives, the joint legislative budget committee and the governor's office of strategic planning and budgeting the total number of waived licensing fees by each agency. The report shall specify for which purpose the fee was waived pursuant to this section.
- C. For the purposes of this section, "agency" and "license" have the same meanings prescribed in section 41-1080.
- Sec. 26. Section 41-1093, Arizona Revised Statutes, is amended to read:

41-1093. <u>Definitions</u>

In this article, unless the context otherwise requires:

- 1. "Health, safety or welfare":
- (a) Means the protection of members of the public against harm, fraud or loss, including the preservation of public security, order or health.
- (b) Does not include the protection of existing businesses or agencies, whether publicly or privately owned, against competition.
 - 2. "Individual" means a natural person.

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- 3. "Occupational regulation":
- (a) Means a rule, regulation, practice or policy that allows an individual to use an occupational title or work in a lawful occupation, trade or profession or a cease and desist demand or other regulatory requirement that prevents an individual from using an occupational title or working in a lawful occupation, trade or profession.
 - (b) Does not include:
- (i) A business license, facility license, building permit or zoning and land use regulation.
- (ii) Any rule or regulation relating to an institution or individual that is subject to title 36, chapter 4, article 10 or chapter 20.
- (iii) Any license or regulation that is required by federal law.
- $\frac{\text{(iv)}}{\text{(iii)}}$ Any rule or regulation adopted by an agency that is authorized by statute and has been approved by the council pursuant to section 41-1052.
- (v) (iv) Any rule or regulation relating to emergency medical and transportation services that originated with a public access system or medical transportation requested by a medical authority or by the patient for which a certificate of necessity is required under section 36-2233.
- (vi) (v) Any rule relating to the licensing of a securities dealer, securities salesman, investment adviser or investment adviser representative.

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