

TITLE 9. HEALTH SERVICES

CHAPTER 10. HEALTH CARE INSTITUTIONS: LICENSING

ARTICLE 1. GENERAL

R9-10-101. Definitions

In addition to the definitions in A.R.S. § 36-401(A), the following definitions apply in this Chapter unless otherwise specified:

- ** "Abuse" has the same meaning:
 - a. For an adult, as in A.R.S. § 36-451 and includes emotional abuse as defined in A.R.S. § 13-3623; or
 - b. For a child, as in A.R.S. § 8-210.
- 1- "Accredited" means ~~accredited by a nationally recognized accreditation organization~~ has the same meaning as in A.R.S. § 36-422.
- 2- "Administrative completeness review time-frame" ~~means the number of days from agency receipt of an application for a license until the agency determines that the application contains all components required by statute or rule, including all information required to be submitted by other government agencies. The administrative completeness review time frame does not include the period of time during which an agency provides public notice of the license application or performs a substantive review of the application~~ has the same meaning as in A.R.S. § 41-1072.
- ** "Activities of daily living" means ambulating, bathing, toileting, grooming, eating, and getting in or out of a bed or a chair.
- 3- "Adjacent" means not intersected by:
 - a. Property owned or operated by a person other than the applicant or licensee, or
 - b. A public thoroughfare.
- 4- "Administrative office" means a ~~location~~ facility used by personnel for recordkeeping and record retention but not for providing medical services, nursing services, or health-related services.
- ** "Admission" means, after completion of an individual's screening or registration by a health care institution, the individual begins receiving physical health services or behavioral health services and is accepted as a patient of the health care institution.
- ** "Assistance in the self-administration of medications" means restricting a patient's access to the patient's medication and providing support to the patient while the patient takes the medication to ensure that the medication is taken as ordered.
- ** "Adult" has the same meaning as in A.R.S. § 1-215.
- ** "Adverse reaction" means an unexpected outcome that threatens the health or safety of a patient as a result of the medical service, nursing service, or health-related services provided to the patient.
- ** "Ancillary services" means services other than medical services, nursing services, or health-related services provided to a patient.
- ** "Anesthesiologist" means a physician granted clinical privileges to administer anesthesia.
- 5- "Adult day health care facility" means a facility providing adult day health services during a portion of a continuous twenty-four hour period for compensation on a regular basis for five or more adults not related to the proprietor. 36-401

6. "Applicant" means a governing authority requesting:
- a. Approval of architectural plans and specifications of a health care institution,
 - b. Licensure of a health care institution, or
 - e. ~~A change in a health care institution's license.~~
7. "Application packet" means the information, documents, and fees required by the Department for the:
- a. Approval of a health care institution's modification or construction, or
 - b. Licensure of a health care institution.
- ** "Assistance in the self-administration of medication" means
- ** "Attending physician" means a physician designated by a patient to participate in or coordinate the medical services provided to the patient.
- ** "Authenticate" means to establish authorship of a document or an entry in a medical record by:
- a. A written signature;
 - b. An individual's initials, if the individual's written signature appears on the document or in the medical record;
 - c. A rubber-stamp signature; or
 - d. An electronic signature code.
- ** "Available" means:
- a. For an individual, the ability to be contacted and provide an immediate response by any means possible;
 - b. For equipment and supplies, physically retrievable at a health care institution; and
 - c. For a document, retrievable at a health care institution or accessible according to the applicable time-frames in the Chapter.
- ** "Behavioral health inpatient facility" means a health care institution that provides continuous treatment to an individual experiencing a behavioral health issue that causes the individual to:
- a. Have a limited or reduced ability to meet the individual's basic physical needs;
 - b. Suffer harm that significantly impairs the individual's judgment, reason, behavior, or capacity to recognize reality;
 - c. Be a danger to self as defined in A.R.S. § 36-501;
 - d. Be a danger to others as defined in A.R.S. § 36-501;
 - e. Be persistently or acutely disabled as defined in A.R.S. § 36-501; or
 - f. Be gravely disabled as defined in A.R.S. § 36-501.
- ** "Behavioral health issue" means an individual's condition related to a mental disorder, a personality disorder, substance abuse, or a significant psychological or behavioral response to an identifiable stressor or stressors.
- ** "Behavioral health paraprofessional" means an individual who is qualified according to a facility's policies and procedures to provide at or for a facility behavioral health services that would require a license under A.R.S. Title 32, Chapter 33, while being supervised by a behavioral health professional.
- ** "Behavioral health professional" means an individual licensed under A.R.S. Title 32 whose scope of practice allows the individual to:

- a. Independently provide behavioral health services, or
- b. Provide behavioral health services under direct supervision as defined in A.A.C. R4-6-101.
- ** “Behavioral health residential facility” means a health care institution that provides treatment to an individual experiencing a behavioral health issue that:
 - a. Limits the individual’s ability to be independent, or
 - b. Causes the individual to require treatment to maintain or enhance independence.
- ** "Behavioral health services" medical services, nursing services, health-related services, or ancillary services provided to an individual to address the individual's behavioral health issue.
- ** "Behavioral health technician" means an individual who is qualified according to a health care institution's policies and procedures to provide at or for a health care institution, behavioral health services that would require a license under A.R.S. Title 32, Chapter 33, while receiving clinical oversight from a behavioral health professional.
- ** "Biohazardous waste" has the same meaning as in A.A.C. R18-13-1401.
- ** "Biological" has the same meaning as in A.A.C. R18-13-1401.
- ** "Calendar day" means each day, not including the day of the act, event, or default from which a designated period of time begins to run, but including the last day of the period unless it is a Saturday, Sunday, statewide furlough day, or legal holiday, in which case the period runs until the end of the next day that is not a Saturday, Sunday, statewide furlough day, or legal holiday.
- 8. ~~"Assisted living center" means an assisted living facility that provides resident rooms or residential units to eleven or more residents. 36-401~~
- 9. ~~"Assisted living facility" means a residential care institution, including adult foster care, that provides or contracts to provide supervisory care services, personal care services or directed care services on a continuing basis. 36-401~~
- 10. ~~"Behavioral health service agency" has the same meaning as "agency" in A.A.C. R9-20-101.~~
- 11. "Certification" means a written statement that an item or a system complies with the applicable requirements incorporated by reference in R9-1-412.
- 12. "Certified health physicist" means an individual recognized by the American Board of Health Physics as complying with the health physics criteria and examination requirements established by the American Board of Health Physics.
- 13. "Change in ownership" means conveyance of the ability to appoint, elect, or otherwise designate a health care institution's governing authority from an owner of the health care institution to another person.
- 14. "Chief administrative officer" or "administrator" means an individual designated by a governing authority to implement the governing authority's direction in a health care institution.
- ** "Clinical laboratory services" means the biological, microbiological, serological, chemical, immunohematological, hematological, biophysical, cytological, pathological, or other examination of materials derived from the human body for the purpose of providing information for the diagnosis, prevention, or treatment of a disease or impairment of a human being, or for the assessment of the health of a human being,

including procedures to determine, measure, or otherwise describe the presence or absence of various substances or organisms in the body.

**. "Clinical oversight" means:

- a. Monitoring the behavioral health services provided by a behavioral health technician to ensure that the behavioral health technician is providing the behavioral health services according to the health care institution's policies and procedures,
- b. Providing on-going review of a behavioral health technician's skills and knowledge related to the provision of behavioral health services,
- c. Providing guidance to improve a behavioral health technician's skills and knowledge related to the provision of behavioral health services, and
- d. Recommending training for a behavior health technician to improve the behavioral health technician's skills and knowledge related to the provision of behavioral health services.

**. "Clinical privileges" means authorization to a medical staff member to provide medical services granted by a governing authority or according to medical staff bylaws.

**. "Communicable disease" has the same meaning as in A.R.S. § 36-661.

**. "Conspicuously posted" means placed at a location that is visible and accessible within the area where the public enters the premises of a health care institution .

**. "Consultation" means an evaluation of a patient requested by a medical staff member or personnel member.

**. "Contracted services" means medical services, nursing services, health-related services, or environmental services provided according to a documented agreement between a health care institution and the person providing medical services, nursing services, health-related services, or environmental services.

15. "Contractor" has the same meaning as in A.R.S. § 32-1101.

16. ~~"Construction" means the building, erection, fabrication, or installation of a health care institution.~~ 36-401

**. "Controlled substances" has the same meaning as in A.R.S. § 36-2501.

**. "Counseling" has the same meaning as "practice of professional counseling" in A.R.S. § 32-3251.

**. "Court-ordered alcohol treatment" means detoxification services or treatment provided according to A.R.S. Title 36, Chapter 18, Article 2.

**. "Court-ordered alcohol treatment evaluation" has the same meaning as "evaluation" in A.R.S. § 36-2021.

**. "Court-ordered evaluation" has the same meaning as "evaluation" in A.R.S. §36-501.

**. "Court-ordered treatment" means treatment provided according to A.R.S. Title 36, Chapter 5.

**. "Crisis services" means immediate and unscheduled behavioral health services provided to a patient to address an acute behavioral health issue affecting the patient.

**. "Current" means up-to-date, extending to the present time.

**. "Danger to others" has the same meaning as in A.R.S. § 36-501.

**. "Danger to self" has the same meaning as in A.R.S. § 36-501.

- **. "Disaster" means an unexpected occurrence that adversely affects a health care institution's ability to provide services.
- **. "Discharge" means a documented termination of services to a patient by a health care institution.
- **. "Discharge instructions" means documented information relevant to a patient's medical condition or behavioral health issue provided by a health care institution to the patient or the patient's representative at the time of the patient's discharge.
- **. "Discharge planning" means a process of establishing goals and objectives for a patient or resident in preparation for the patient's or resident's discharge.
- **. "Discharge summary" means a documented brief review of services provided to a patient, current patient status, and reasons for the patient's discharge.
- **. "Documentation" or "documented" means information in written, photographic, electronic, or other permanent form.
- **. "Drill" means a response to a planned, simulated event.
- **. "Drug" has the same meaning as in A.R.S. § 32-1901.
17. "Day" means calendar day.
18. "Department" means the Arizona Department of Health Services. 36-401
19. "Directed care services" means programs and services, including personal care services, provided to persons who are incapable of recognizing danger, summoning assistance, expressing need or making basic care decisions. 36-401
- **. "Electronic" has the same meaning as in A.R.S. § 44-7002.
- **. "Electronic signature" has the same meaning as in A.R.S. § 44-7002.
20. "Equipment" means an apparatus, a device, a machine, or a unit that is required to comply with the specifications incorporated by reference in R9-1-412.
- **. Exploitation" has the same meaning as in A.R.S. § 46-451.
21. "Facilities" means buildings used by a health care institution for providing any of the types of services as defined in A.R.S. Title 36, Chapter 4. 36-401
22. "Factory-built building" has the same meaning as in A.R.S. § 41-2142.
- **. "Family" means
- a. A patient's spouse, sibling, child, parent, grandparent, or an individual designated by the patient; or
 - b. For pre-petition screening, court-ordered evaluation, or court-ordered treatment, the same as defined in A.R.S. § 36-501.
- **. "Food services" means the storage, preparation, serving, and cleaning up of food intended for consumption in a health care institution.
- **. "Garbage" has the same meaning as in A.A.C. R18-13-302.
- **. "General consent" means a documented agreement between a patient and a health care institution for the health care institution to provide services to the patient signed by the patient or, if applicable, the patient's representative.
- **. "General hospital" means a subclass of hospital that provides surgical services and emergency services.
23. "Governing authority" means the individual, agency, group or corporation, appointed, elected or otherwise designated, in which the ultimate responsibility and authority for the conduct of the health care institution are vested. 36-401

- **. "Gravely disabled" has the same meaning as in A.R.S. § 36-501.
- **. "Hazard" means a condition or situation where a patient or other individual may suffer physical injury.
- **. "Health care directive" has the same meaning as in A.R.S. § 36-3201.
24. ~~"Health care institution" means every place, institution, building or agency, whether organized for profit or not, which provides facilities with medical services, nursing services, health screening services, other health related services, supervisory care services, personal care services or directed care services and includes home health agencies as defined in A.R.S. § 36-151 and hospice service agencies. 36-401~~
25. ~~"Health related services" means services, other than medical, pertaining to general supervision, protective, preventive and personal care services, supervisory care services or directed care services. 36-401~~
26. ~~"Home health agency" means an agency or organization, or a subdivision of such an agency or organization, which meets all of the following requirements:~~
- a- ~~Is primarily engaged in providing skilled nursing services and other therapeutic services.~~
- b- ~~Has policies, established by a group of professional personnel, associated with the agency or organization, including one or more physicians and one or more registered professional nurses, to govern the services referred to in subdivision (a), which it provides, and provides for supervision of such services by a physician or registered professional nurse.~~
- e- ~~Maintains clinical records on all patients~~ has the same meaning as in A.R.S. § 36-151.
- **. "Home health services" has the same meaning as in A.R.S. § 36-151.
27. ~~"Hospice" means a hospice service agency or the provision of hospice services in an inpatient facility. 36-401~~
28. ~~"Hospital" means a class of health care institution that provides, through an organized medical staff, inpatient beds, medical services, and continuous nursing services, diagnosis and treatment to a patient.~~
- **. "Immediate" means without delay.
- **. "Incident" means an unexpected occurrence that harms or has the potential to harm a patient.
- **. "Infection control" means to identify, prevent, monitor, and minimize infections.
- **. "Informed consent" means advising a patient of a proposed treatment, surgical procedure, psychotropic drug, or diagnostic procedure; alternatives to the treatment, surgical procedure, psychotropic drug, or diagnostic procedure; associated risks and possible complications; and obtaining documented authorization for the proposed treatment, surgical procedure, psychotropic drug, or diagnostic procedure from the patient or the patient's representative.
29. ~~"Inpatient beds" or "resident beds" means accommodations with supporting services, such as food, laundry and housekeeping, for patients or residents who generally stay in excess of twenty four hours. 36-401~~

- **. "Inservice education" means organized instruction or information related to the physical health services or behavioral health services provided to a medical staff member, personnel member, employee, or volunteer.
- **. "Interval note" means documentation updating a patient's:
- a. Medical condition after a medical history and physical examination is performed;
or
 - b. Behavioral health issue after an assessment is performed.
- ~~30.~~ "Leased facility" means a facility occupied or used during a set time in exchange for compensation.
- ~~31.~~ "License" means:
- a. Written approval issued by the Department to a person to operate a class or subclass of a health care institution, except for a behavioral health service agency, at a specific location;
 - b. Written approval issued by the Department to a person to operate one or more behavioral health service agency subclasses at a specific location; or
 - c. Written approval issued to an individual to practice a profession in this state.
- **. "Licensed nurse" means an individual licensed according to A.R.S. Title 32, Chapter 15.
- ~~32.~~ "Licensee" means an owner approved by the Department to operate a health care institution.
- **. "Medical condition" means the state of a patient's physical or mental health, including the patient's illness, injury, or disease.
- **. "Medical history" means an account of a patient's health, including past and present illnesses, diseases, or medical conditions.
- **. "Medical practitioner" means a physician, physician assistant, or registered nurse practitioner.
- **. "Medical record" has the same meaning as in A.R.S. § 12-2291.
- ~~33.~~ "Medical services" means the services pertaining to medical care that are performed at the direction of a physician on behalf of patients by physicians, dentists, nurses and other professional and technical personnel. 36-401
- **. "Medical staff" means physicians or other individuals licensed pursuant to A.R.S. Title 32 who have clinical privileges at a health care institution.
- **. "Medical staff by-laws" means standards, approved by the medical staff and the governing authority, that provide the framework for the organization, responsibilities, and self-governance of the medical staff.
- **. "Medical staff member" means an individual who is part of the medical staff of a health care institution.
- **. "Medication" means a prescription medication as defined in A.R.S. § 32-1901 or a nonprescription medication as defined in A.R.S. § 32-1901, used to maintain health or to prevent or treat an illness, injury, or disease.
- **. "Medication administration" means the provision or application of a medication to the body of a patient by a medical practitioner or a nurse or as otherwise provided by law.
- **. "Mental health disorder" has the same meaning as in A.R.S. § 36-501.
- **. "Mental health care power of attorney" has the same meaning as in A.R.S. § 36-3201.
- ~~34.~~ "Mobile clinic" means a movable structure that:

- a. Is not physically attached to a health care institution's facility,
 - b. Provides outpatient medical services under the direction of the health care institution's personnel, and
 - c. Is not intended to remain in one location indefinitely.
35. ~~"Modification" means the substantial improvement, enlargement, reduction, alteration of or other change in a health care institution. 36-401~~
- ** "Monitor" means to check systematically on a specific condition or situation.
- ** "Neglect" has the same meaning:
- i. For an individual less than 18 years of age, as in A.R.S. § 8-201; or
 - ii. For an individual 18 years of age or older, as in A.R.S. § 46-451.
- ** "Nurse" has the same meaning as registered nurse or practical nurse as defined in A.R.S. § 32-1601.
36. ~~"Nursing care institution" means a health care institution providing inpatient beds or resident beds and nursing services to persons who need nursing services on a continuing basis but who do not require hospital care or direct daily care from a physician. 36-401~~
- ** "Nursing personnel" means an individual authorized according to A.R.S. § Title 32, Chapter 15 to provided nursing services.
37. ~~"Nursing services" means those services pertaining to the curative, restorative and preventive aspects of nursing care that are performed at the direction of a physician by or under the supervision of a registered nurse licensed in this state. 36-401~~
- ** "Occupational therapist" has the same meaning as in A.R.S. § 32-3401.
- ** "Occupational therapist assistant" has the same meaning as in A.R.S. § 32-3401.
- ** "On-call" means a time during which an individual is available and required to come to a health care institution when requested by the health care institution.
- ** "Order" means instructions to provide
- a. Physical health services to a patient from physician, registered nurse practitioner, or a physician or as otherwise provided by law; or
 - b. Behavioral health services to a patient from a behavioral health professional.
- ** "Orientation" means the initial instruction and information provided to an individual before starting work or volunteer services in a health care institution.
38. ~~"Outpatient surgical center" means a type class of health care institution with facilities and limited hospital services for the diagnosis or treatment of patients by that has the facility, staffing, and equipment to provide surgery and anesthesia services to a patient whose recovery, in the concurring opinions of the surgeon and the anesthesiologist, does not require inpatient care in a hospital.~~
39. "Outpatient treatment center" means a health care institution class without inpatient beds that provides physical health services or behavioral health services for the diagnosis and treatment of patients.
40. ~~"Overall time-frame" means the number of days after receipt of an application for a license during which an agency determines whether to grant or deny a license. The overall time frame consists of both the administrative completeness review time frame and the substantive review time frame~~ has the same meaning as in A.R.S. § 41-1072.
41. "Owner" means a person who appoints, elects, or designates a health care institution's governing authority.

42. “Patient” means an individual receiving medical services, nursing services, ~~or~~ health-related services, or ancillary services from a health care institution and includes a resident or a participant.
- ** “Patient’s representative” means a patient’s legal guardian, an individual acting on behalf of a patient with the written consent of the patient, or a surrogate as defined in A.R.S. § 36-3201.
43. "Person" has the same meaning as in A.R.S. § 1-215 and includes a governmental agency.
44. ~~"Personal care services" means assistance with activities of daily living that can be performed by persons without professional skills or professional training and includes the coordination or provision of intermittent nursing services and the administration of medications and treatments by a nurse who is licensed pursuant to Title 32, Chapter 15 or as otherwise provided by law. 36-401~~
45. "Personnel member" means, except as defined in specific Articles in this Chapter ~~or 9 A.A.C. 20~~ or a medical staff member, an individual providing medical services, nursing services, or health-related services to a patient.
- ** "Pharmacist" has the same meaning as in A.R.S. § 32-1901.
- ** "Physical examination" means to observe, test, or inspect an individual’s body to evaluate health or determine cause of illness, injury, or disease.
- ** "Physical therapist" has the same meaning as in A.R.S. § 32-2001.
- ** "Physical therapist assistant" has the same meaning as in A.R.S. § 32-2001.
- ** “Physician assistant” has the same meaning as in A.R.S. § 32-2501.
46. "Premises" means property that is licensed by the Department as part of ~~the~~ a health care institution where medical services, nursing services, ~~or~~ health-related services, or ancillary services are provided to a patient.
- ** "Progress note" means documentation by a medical staff member, nurse, or personnel member of:
- a. An observed patient response to a physical health service or behavioral health service provided to a patient.
 - b. A patient’s significant change in condition, or
 - c. Observed behavior of a patient related to the patient’s medical condition or behavioral health issue.
- ** "PRN" means pro re nata or given as needed.
47. "Project" means specific construction or modification of a facility stated on an architectural plans and specifications approval application.
48. "Provisional license" means the Department's written approval to operate a health care institution issued to an applicant or licensee that is not in substantial compliance with the applicable laws and rules for the health care institution.
- ** "Psychiatrist" has the same meaning as in A.R.S. § 36-501.
- ** "Psychologist" A.R.S. Title 32, Chapter 19.1
- ** "Quality management program" means ongoing activities designed and implemented by a health care institution to improve the delivery of medical services, nursing services, health-related services, and ancillary services provided by the health care institution.

49. ~~"Recovery care center" means a health care institution or subdivision of a health care institution that provides medical and nursing services limited to recovery care services has the same meaning as in A.R.S. § 36-448.51.~~
- ** "Registered dietitian" means an individual approved to work as a dietitian by the American Dietetic Association's Commission on Dietetic Registration.
- ** "Registered nurse" has the same meaning as in A.R.S. § 32-1601.
- ** "Registered nurse practitioner" has the same meaning as A.R.S. § 32-1601.
- ** "Regular basis" means at recurring, fixed, or uniform intervals.
- ** "Research" means the use of human subject in the systematic study, observation, or evaluation of factors related to the prevention, assessment, treatment, or understanding of a medical condition or behavioral health issue.
50. ~~"Residential care institution" means a health care institution other than a hospital or a nursing care institution which provides resident beds or residential units, supervisory care services, personal care service, directed care services or health related services for persons who do not need inpatient nursing care.~~
- ** Respiratory care services" has the same meaning as practice of respiratory care as defined in A.R.S. § 32-3501.
- ** "Restraint" means any physical or chemical method of restricting a patient's freedom of movement, physical activity, or access to the patient's own body.
- ** "Risk" means potential for an adverse outcome.
51. "Room" means space contained by walls from and including the floor to ceiling with at least one door.
52. ~~"Satellite facility" means an outpatient facility at which the hospital provides outpatient medical services.~~ has the same meaning as in A.R.S. § 36-422.
- ** "Scope of services" means a list of the behavioral health services or physical health services the governing authority has designated as being available to a patient at a health care institution.
- ** "Seclusion" means the involuntary solitary confinement of a patient in a room or an area where the patient is prevented from leaving.
- ** "Significant change" means an observable deterioration or improvement in a patient's physical, cognitive, behavioral, or functional condition that may require an alteration to the physical health services or behavioral health services provided to the patient.
- ** "Social worker" means an individual licensed according to A.R.S. Title 32, Chapter 33 to engage in the "practice of social work" as defined in A.R.S. § 32-3251.
- ** "Social work services" has the same meaning as "practice of social work" in A.R.S. § 32-3251.
- ** "Student" means an individual attending an educational institution and working under supervision in a health care institution through an arrangement between the health care institution and the educational institution.
53. "Substantial" when used in connection with a modification means:
- a. An addition or deletion of an inpatient bed or a change in the use of one or more of the inpatient beds;
 - b. A change in a health care institution's licensed capacity;

- c. A change in the physical plant, including facilities or equipment, that costs more than \$300,000; or
 - d. A change in a health care institution that affects compliance with applicable physical plant codes and standards incorporated by reference in R9-1-412.
54. ~~"Substantial compliance" means that the nature or number of violations revealed by any type of inspection or investigation of a licensed health care institution does not pose a direct risk to the life, health or safety of patients or residents. 36-401~~
55. ~~"Substantive review time-frame" means the number of days after the completion of the administrative completeness review time frame during which an agency determines whether an application or applicant for a license meets all substantive criteria required by statute or rule. Any public notice and hearings required by law shall fall within the substantive review time frame has the same meaning as in A.R.S. § 41-1072.~~
56. "Swimming pool" has the same meaning as "semipublic swimming pool" in A.A.C. R18-5-201.
57. "System" means interrelated, interacting, or interdependent elements forming a whole.
58. "Tax ID number" means a numeric identifier that a person uses to report financial information to the United States Internal Revenue Services.
- **. "Telemedicine" has the same meaning as in A.R.S. § 36-3601.
- **. "Therapeutic diet" means foods or the manner in which food is to be prepared that are ordered for a patient.
- **. "Time out" means providing a patient a voluntary opportunity to regain self-control in a designated area from which the patient is not physically prevented from leaving.
- **. "Transfer" means a health care institution discharging a patient and sending the patient to another licensed health care institution as an inpatient or resident without intending that the patient be returned to the sending health care institution.
- **. "Transport" means a health care institution sending a patient to another licensed health care institution for outpatient services with the intent of returning the patient to the sending health care institution.
59. "Treatment" means a procedure or method to cure, improve, or palliate ~~an injury, an illness, or a disease~~ medical condition or behavioral health issue.
60. "Unclassified health care institution" means a health care institution not classified or subclassified in statute or in rule ~~that provides medical services, nursing services, or health related services.~~
- **. "Volunteer" means an individual authorized by a health care institution to work without compensation for the health care institution.
- **. "Working day" means a Monday, Tuesday, Wednesday, Thursday, or Friday that is not a state and federal holiday or a statewide furlough day.

R9-10-102. Health Care Institution Classes and Subclasses; Requirements

- A. A person may apply for a license as an unclassified health care institution; a health care institution class or subclass in A.R.S. Title 36, Chapter 4 or 9 A.A.C. 10; or one of the following classes or subclasses:
- 1. General hospital,
 - 2. Rural general hospital,

3. Special hospital,
4. ~~Adult day health care facility~~ Behavioral health inpatient facility,
5. ~~Adult foster care~~ Nursing care institution,
6. ~~Assisted living center~~ Recovery care center,
7. ~~Assisted living home~~ Hospice inpatient facility,
8. ~~Home health agency~~ Hospice service agency,
9. ~~Hospice~~ Behavioral health residential facility,
10. ~~Hospice inpatient facility~~ Assisted living center,
11. ~~Nursing care institution~~ Assisted living home,
12. ~~Home health agency~~ Adult foster care home,
13. ~~Abortion clinic~~ Outpatient surgical center,
13. Outpatient treatment center;
14. ~~Recovery care center~~ Abortion clinic,
15. ~~Outpatient surgical center, or~~ Adult day health care facility,
16. ~~Outpatient treatment center.~~ Home health agency,
17. Substance abuse transitional facility,
18. Behavioral health specialized transitional facility, or
19. Unclassified health care institution;

B. A person shall apply for a license for the class or subclass that authorizes the provision of the highest level of physical care services or behavioral health services the proposed health care institution plans to provide. The Department shall review the proposed health care institution's scope of services to determine whether the requested health care institution class or subclass is appropriate.

C. A health care institution shall comply with the requirements in ~~R9-10-115-9~~ 9 A.A.C. 10, Article 16 if:

1. There are no specific rules in ~~9 A.A.C. 10 or 9 A.A.C. 20~~ for the health care institution's class or subclass, or
2. The Department determines that the health care institution is an unclassified health care institution.

R9-10-103. Licensure Exceptions

A. ~~Except for R9-10-122, this Article does not apply to a behavioral health service agency regulated under 9 A.A.C. 20.~~

B. A health care institution license is required for each health care institution except:

1. A facility exempt from licensure under A.R.S. § 36-402, or
2. A health care institution's administrative office.

C. B. The Department does not require a separate health care institution license for:

1. A satellite facility of a hospital under A.R.S. § 36-422 (F);
- ~~4~~ 2. An accredited facility of an accredited hospital under A.R.S. § 36-422(F) or (G);
- ~~2~~ 3. A facility operated by a licensed health care institution that is:
 - a. Adjacent to and contiguous with the licensed health care institution premises; or
 - b. Not adjacent to or contiguous with the licensed health care institution but is connected to the licensed health care institution facility by an all-weather enclosure and that is:

- i. Owned by the health care institution, or
 - ii. Leased by the health care institution with exclusive rights of possession;
- 3 4. A mobile clinic operated by a licensed health care institution; or
- 5. A facility located on grounds that are not adjacent to or contiguous with the health care institution premises where only ancillary services are provided to a patient of the health care institution.

R9-10-104. Approval of Architectural Plans and Specifications

- A.** For approval of architectural plans and specifications for the construction or modification of a health care institution that is required by this Chapter to comply with any of the physical plant codes and standards incorporated by reference in R9-1-412, an applicant shall submit to the Department an application packet including:
- 1. An application form provided by the Department that contains:
 - a. For construction of a new health care institution:
 - i. The health care institution's name, street address, city, state, zip code, telephone number, and fax number;
 - ii. The name and address of the health care institution's governing authority;
 - iii. The requested health care institution class or subclass; and
 - iv. The requested licensed capacity for the health care institution;
 - b. For modification of a licensed health care institution:
 - i. The health care institution's license number,
 - ii. The name and address of the licensee,
 - iii. The health care institution's class or subclass, and
 - iv. The health care institution's existing licensed capacity and the requested licensed capacity for the health care institution;
 - c. The health care institution's contact person's name, street address, city, state, zip code, telephone number, and fax number;
 - d. If the application includes architectural plans and specifications:
 - i. A statement signed by the governing authority or the licensee that the architectural plans and specifications comply with applicable licensure requirements in A.R.S. Title 36, Article 4 and 9 A.A.C. 10 and the health care institution is ready for an onsite inspection by a Department representative;
 - ii. The project architect's name, street address, city, state, zip code, telephone number, and fax number; and
 - iii. A statement signed and sealed by the project architect, according to the requirements in 4 A.A.C. 30, Article 3, that the project architect has complied with A.A.C. R4-30-301 and the architectural plans and specifications are in substantial compliance with applicable licensure requirements in A.R.S. Title 36, Article 4 and 9 A.A.C. 10;
 - e. A narrative description of the project; and
 - f. If providing or planning to provide medical services, which require compliance with specific physical plant codes and standards incorporated by reference in R9-

- 1-412, the number of rooms or inpatient beds designated for providing the medical services;
2. If the health care institution is located on land under the jurisdiction of a local governmental agency, one of the following:
 - a. A building permit for the construction or modification issued by the local governmental agency; or
 - b. If a building permit issued by the local governmental agency is not required, zoning clearance issued by the local governmental agency that includes:
 - i. The health care institution's name, street address, city, state, zip code, and county;
 - ii. The health care institution's class or subclass and each type of medical services to be provided; and
 - iii. A statement signed by a representative of the local governmental agency stating that the address listed is zoned for the health care institution's class or subclass;
 3. The following information on architectural plans and specifications that is necessary to demonstrate that the project described on the application form complies with applicable codes and standards incorporated by reference in R9-1-412:
 - a. A table of contents containing:
 - i. The architectural plans and specifications submitted,
 - ii. The physical plant codes and standards incorporated by reference in R9-1-412 that apply to the project or are required by a local governmental agency,
 - iii. An index of the abbreviations and symbols used in the architectural plans and specifications, and
 - iv. The facility's specific International Building Code construction type and International Building Code occupancy type;
 - b. If the facility is larger than 3,000 square feet and is or will be occupied by more than 20 individuals, the seal of an architect on the architectural plans and drawings according to the requirements in A.R.S. Title 32, Chapter 1;
 - c. A site plan, drawn to scale, of the entire premises showing streets, property lines, facilities, parking areas, outdoor areas, fences, swimming pools, fire access roads, fire hydrants, and access to water mains;
 - d. For each facility, on architectural plans and specifications:
 - i. A floor plan, drawn to scale, for each level of the facility, showing the layout and dimensions of each room, the name and function of each room, means of egress, and natural and artificial lighting sources;
 - ii. A diagram of a section of the facility, drawn to scale, showing the vertical cross-section view from foundation to roof and specifying construction materials;
 - iii. Building elevations, drawn to scale, showing the outside appearance of each facility;
 - iv. The materials used for ceilings, walls, and floors;

- v. The location, size, and fire rating of each door and each window and the materials and hardware used, including safety features such as fire exit door hardware and fireproofing materials;
 - vi. A ceiling plan, drawn to scale, showing the layout of each light fixture, each fire protection device, and each element of the mechanical ventilation system;
 - vii. An electrical floor plan, drawn to scale, showing the wiring diagram and the layout of each lighting fixture, each outlet, each switch, each electrical panel, and electrical equipment;
 - viii. A mechanical floor plan, drawn to scale, showing the layout of heating, ventilation, and air conditioning systems;
 - ix. A plumbing floor plan, drawn to scale, showing the layout and materials used for water and sewer systems including the water supply and plumbing fixtures;
 - x. A floor plan, drawn to scale, showing the communication system within the health care institution including the nurse call system, if applicable;
 - xi. A floor plan, drawn to scale, showing the automatic fire extinguishing, fire detection, and fire alarm systems; and
 - xii. Technical specifications describing installation and materials used in the health care institution;
4. The estimated total project cost including the costs of:
 - a. Site acquisition,
 - b. General construction,
 - c. Architect fees,
 - d. Fixed equipment, and
 - e. Movable equipment;
 5. The following, as applicable:
 - a. If the health care institution is located on land under the jurisdiction of a local governmental agency, one of the following provided by the local governmental agency:
 - i. A copy of the Certificate of Occupancy,
 - ii. Documentation that the facility was approved for occupancy, or
 - iii. Documentation that a certificate of occupancy for the facility is not available;
 - b. A certification and a statement that the construction or modification of the facility is in substantial compliance with applicable licensure requirements in A.R.S. Title 36, Article 4 and 9 A.A.C. 10 signed by the project architect, the contractor, and the owner;
 - c. A written description of any work necessary to complete the construction or modification submitted by the project architect;
 - d. If the construction or modification affects the health care institution's fire alarm system, a contractor certification and description of the fire alarm system on a form provided by the Department;

- e. If the construction or modification affects the health care institution's automatic fire extinguishing system, a contractor certification of the automatic fire extinguishing system on a form provided by the Department;
 - f. If the construction or modification affects the health care institution's heating, ventilation, or air conditioning, a copy of the heating, ventilation, air conditioning, and air balance tests and a contractor certification of the heating, ventilation, or air conditioning systems;
 - g. If draperies, cubicle curtains, or floor coverings are installed or replaced, a copy of the manufacturer's certification of flame spread for the draperies, cubicle curtains, or floor coverings;
 - h. For a health care institution using inhalation anesthetics or nonflammable medical gas, a copy of the Compliance Certification for Inhalation Anesthetics or Nonflammable Medical Gas System required in the National Fire Codes incorporated by reference in R9-1-412;
 - i. If a generator is installed, a copy of the installation acceptance required in the National Fire Codes incorporated by reference in R9-1-412;
 - j. For a health care institution providing radiology, a written report from a certified health physicist of the location, type, and amount of radiation protection; and
 - k. If a factory-built building is used by a health care institution:
 - i. A copy of the installation permit and the copy of a certificate of occupancy for the factory-built building from the Office of Manufactured Housing; or
 - ii. A written report from an individual registered as an architect or a professional structural engineer under 4 A.A.C. 30, Article 2, stating that the factory-built building complies with applicable design standards;
6. A statement signed by the project architect that final architectural drawings and specifications have been submitted to the person applying for a health care institution license or the licensee of the health care institution; and
7. The applicable fee required by ~~R9-10-122~~ R9-10-106.
- B.** Before an applicant submits an application for approval of architectural plans and specifications for the construction or modification of a health care institution, an applicant may request an architectural evaluation by submitting the documents in subsection (A)(3) to the Department.
- C.** The Department shall approve or deny an application for approval of architectural plans and specifications of a health care institution in this Section according to R9-10-108.
- D.** In addition to obtaining an approval of a health care institution's architectural plans and specifications, a person shall obtain a health care institution license before operating the health care institution.

R9-10-105. Initial License Application

- A.** A person applying for a health care institution license shall submit to the Department an application packet that contains:
- 1. An application form provided by the Department including:
 - a. The health care institution's:

- i. Name, street address, mailing address, telephone number, fax number, and e-mail address;
- ii. Tax ID number; and
- iii. Class or subclass listed in R9-10-102 for which licensure is requested;
- b. As applicable, the specific services for which authorization is requested;
- ~~b.c.~~ Except for a home health agency, ~~or a hospice service agency,~~ a behavioral health inpatient facility, a behavioral health residential facility, a substance abuse transitional facility, a behavioral health specialized transitional facility, or an outpatient treatment center that provides only behavioral health services, whether the health care institution is located within 1/4 mile of agricultural land;
- ~~e.d.~~ Whether the health care institution is located in a leased facility;
- ~~d.e.~~ Whether the health care institution is ready for a licensing inspection by the Department;
- ~~e.f.~~ If the health care institution is not ready for a licensing inspection by the Department, the date the health care institution will be ready for a licensing inspection;
- ~~f.g.~~ Owner information including:
 - i. The owner's name, address, telephone number, and fax number;
 - ii. Whether the owner is a sole proprietorship, a corporation, a partnership, a limited liability partnership, a limited liability company, or a governmental agency;
 - iii. If the owner is a partnership or a limited liability partnership, the name of each partner;
 - iv. If the owner is a limited liability company, the name of the designated manager or, if no manager is designated, the names of any two members of the limited liability company;
 - v. If the owner is a corporation, the name and title of each corporate officer;
 - vi. If the owner is a governmental agency, the name and title of the individual in charge of the governmental agency or the name of an individual in charge of the health care institution designated in writing by the individual in charge of the governmental agency;
 - vii. Whether the owner or any person with 10% or more business interest in the health care institution has had a license to operate a health care institution denied, revoked, or suspended; the reason for the denial, suspension, or revocation; the date of the denial, suspension, or revocation; and the name and address of the licensing agency that denied, suspended, or revoked the license;
 - viii. Whether the owner or any person with 10% or more business interest in the health care institution has had a health care professional license or certificate denied, revoked, or suspended; the reason for the denial, suspension, or revocation; the date of the denial, suspension, or revocation; and the name and address of the licensing agency that denied, suspended, or revoked the license or certificate; and

- ix. The name, title, address, and telephone number of the owner's statutory agent or the individual designated by the owner to accept service of process and subpoenas;
- g. The name and address of the governing authority;
- h. The chief administrative officer's:
 - i. Name,
 - ii. Title,
 - iii. Highest educational degree, and
 - iv. Work experience related to the health care institution class or subclass for which licensure is requested; and
 - i. Signature required in A.R.S. § 36-422(B) ~~that is notarized~~;
- 2. If the health care institution is located in a leased facility, a copy of the lease showing the rights and responsibilities of the parties and exclusive rights of possession of the leased facility;
- 3. If applicable, a copy of the owner's articles of incorporation, partnership or joint venture documents, or limited liability documents;
- 4. If applicable, the name and address of each owner or lessee of any agricultural land regulated under A.R.S. § 3-365 and a copy of the written agreement between the applicant and the owner or lessee of agricultural land as prescribed in A.R.S. § 36-421(D);
- 5. Except for a home health agency or a hospice, one of the following:
 - a. If the health care institution is required by this Chapter to comply with any of the physical plant codes and standards incorporated by reference in R9-1-412, documentation of the health care institution's architectural plans and specifications approval in R9-10-104; or
 - b. If the health care institution is not required by this Chapter to comply with any of the physical plant codes and standards incorporated by reference in R9-1-412:
 - i. One of the following:
 - (1) Documentation from the local jurisdiction of compliance with all applicable local building codes and zoning ordinances; or
 - (2) Documentation of a general contractor's inspection of the facility that states the facility is safe for occupancy as a health care institution;
 - ii. The licensed capacity requested by the applicant for the health care institution;
 - iii. A site plan showing each facility, the property lines of the health care institution, each street and walkway adjacent to the health care institution, parking for the health care institution, fencing and each gate on the health care premises, and, if applicable, each swimming pool on the health care premises; and
 - iv. A floor plan showing, for each story of a facility, the room layout, room usage, each door and each window, plumbing fixtures, each exit, and the location of each fire protection device; ~~and~~
- 6. The health care institution proposed scope of services; and

- ~~6-7.~~ The applicable application fee required by ~~R9-10-122~~ R9-10-106.
- B.** In addition to the initial application requirements in this Section, an applicant shall comply with the initial application requirements in specific rules in 9 A.A.C. 10 for the health care institution class or subclass for which licensure is requested.
- C.** The Department shall approve or deny an application in this Section according to R9-10-108.

R9-10-122. R9-10-106. Fees

- A.** An applicant who submits to the Department architectural plans and specifications for the construction or modification of a health care institution shall also submit an architectural drawing review fee as follows:
1. Fifty dollars for a project with a cost of \$100,000 or less;
 2. One hundred dollars for a project with a cost of more than \$100,000 but less than \$500,000; or
 3. One hundred fifty dollars for a project with a cost of \$500,000 or more.
- B.** An applicant submitting an initial application or a renewal application for a health care institution license shall submit to the Department an application fee of \$50.
- C.** Except as provided in subsection (D) or (E), an applicant submitting an initial application or a renewal application for a health care institution license shall submit to the Department a license fee as follows:
1. For an adult day health care facility, assisted living home, or assisted living center:
 - a. For a facility with no licensed capacity, \$280;
 - b. For a facility with a licensed capacity of one to 59 beds, \$280, plus the licensed capacity times \$70;
 - c. For a facility with a licensed capacity of 60 to 99 beds, \$560, plus the licensed capacity times \$70;
 - d. For a facility with a licensed capacity of 100 to 149 beds, \$840, plus the licensed capacity times \$70; or
 - e. For a facility with a licensed capacity of 150 beds or more, \$1,400, plus the licensed capacity times \$70;
 2. For a behavioral health service agency:
 - a. For a facility with no licensed capacity, \$375;
 - b. For a facility with a licensed capacity of one to 59 beds, \$375, plus the licensed capacity times \$94;
 - c. For a facility with a licensed capacity of 60 to 99 beds, \$750, plus the licensed capacity times \$94;
 - d. For a facility with a licensed capacity of 100 to 149 beds, \$1,125, plus the licensed capacity times \$94; or
 - e. For a facility with a licensed capacity of 150 beds or more, \$1,875, plus the licensed capacity times \$94;
 3. For a nursing care institution:
 - a. For a facility with a licensed capacity of one to 59 beds, \$290, plus the licensed capacity times \$73;
 - b. For a facility with a licensed capacity of 60 to 99 beds, \$580, plus the licensed capacity times \$73;

- c. For a facility with a licensed capacity of 100 to 149 beds, \$870, plus the licensed capacity times \$73; or
- d. For a facility with a licensed capacity of 150 beds or more, \$1,450, plus the licensed capacity times \$73; or
- 4. For a hospital, a home health agency, a hospice, a hospice inpatient facility, an abortion clinic, a recovery care center, an outpatient surgical center, an outpatient treatment center, or an unclassified health care institution:
 - a. For a facility with no licensed capacity, \$365;
 - b. For a facility with a licensed capacity of one to 59 beds, \$365, plus the licensed capacity times \$91;
 - c. For a facility with a licensed capacity of 60 to 99 beds, \$730, plus the licensed capacity times \$91;
 - d. For a facility with a licensed capacity of 100 to 149 beds, \$1,095, plus the licensed capacity times \$91; or
 - e. For a facility with a licensed capacity of 150 beds or more, \$1,825, plus the licensed capacity times \$91.
- D. Subsection (C) does not apply to a health care institution operated by a state agency according to state or federal law or to an adult foster care home.
- E. All fees are nonrefundable except as provided in A.R.S. § 41-1077.

R9-10-107. Renewal License

- A. A licensee applying to renew a health care institution license shall submit an application packet to the Department at least 60 days but not more than 120 days before the expiration date of the current license that contains:
 - 1. A renewal application on a form provided by the Department including:
 - a. The health care institution's:
 - i. Name, license number, mailing address, telephone number, fax number, and e-mail address; ~~and~~
 - ii. Class or subclass; and
 - iii. Scope of services;
 - b. Owner information including:
 - i. The owner's name, address, telephone number, and fax number;
 - ii. Whether the owner is a sole proprietorship, a corporation, a partnership, a limited liability partnership, a limited liability company, or a governmental agency;
 - iii. If the owner is a partnership or a limited liability partnership, the name of each partner;
 - iv. If the owner is a limited liability company, the name of the designated manager or, if no manager is designated, the names of any two members of the limited liability company;
 - v. If the owner is a corporation, the name and title of each corporate officer;
 - vi. If the owner is a governmental agency, the name and title of the individual in charge of the governmental agency or the individual

- designated in writing by the individual in charge of the governmental agency;
- vii. Whether the owner or any person with 10% or more business interest in the health care institution has had a license to operate a health care institution denied, revoked, or suspended since the previous license application was submitted; the reason for the denial, suspension, or revocation; the date of the denial, suspension, or revocation; and the name and address of the licensing agency that denied, suspended, or revoked the license;
 - viii. Whether the owner or any person with 10% or more business interest in the health care institution has had a health care professional license or certificate denied, revoked, or suspended since the previous license application was submitted; the reason for the denial, suspension, or revocation; the date of the denial, suspension, or revocation; and the name and address of the licensing agency that denied, suspended, or revoked the license or certificate; and
 - ix. The name, title, address, and telephone number of the owner's statutory agent or the individual designated by the owner to accept service of process and subpoenas;
- c. The name and address of the governing authority;
 - d. The chief administrative officer's:
 - i. Name,
 - ii. Title,
 - iii. Highest educational degree, and
 - iv. Work experience related to the health care institution class or subclass for which licensure is requested; and
 - e. Signature required in A.R.S. § 36-422(B) ~~that is notarized;~~
2. If the health care institution is located in a leased facility, a copy of the lease showing the rights and responsibilities of the parties and exclusive rights of possession of the leased facility; and
 3. The applicable renewal application and licensure fees required by ~~R9-10-122~~ R9-10-106.
- B.** In addition to the renewal application requirements in this Section, a licensee shall comply with the renewal application requirements in specific rules in 9 A.A.C. 10 ~~or 9 A.A.C. 20~~ for the health care institution's class or subclass.
- C.** If a licensee submits a health care institution's current accreditation report from a nationally recognized accrediting organization, the Department shall not conduct an onsite compliance inspection of the health care institution as part of the substantive review for a renewal license during the time the accreditation report is valid.
- D.** The Department shall approve or deny a renewal license according to R9-10-108.
- E.** The Department shall issue a renewal license for:
1. One year, ~~if a licensee is in substantial compliance with the applicable statutes and this Chapter, and the licensee agrees to implement a plan acceptable to the Department to eliminate any deficiencies; or~~

2. ~~Two years, if a licensee has no deficiencies at the time of the Department's licensure inspection; or~~
- 3.2. ~~The duration of the accreditation period~~ Three years, if:
 - a. A licensee's health care institution is a hospital accredited by a nationally recognized accreditation organization, and
 - b. The licensee submits a copy of the hospital's current accreditation report.

R9-10-108. Time-frames

- A. The overall time-frame for each type of approval granted by the Department is listed in Table 1. The applicant and the Department may agree in writing to extend the substantive review time-frame and the overall time-frame. The substantive review time-frame and the overall time-frame may not be extended by more than 25% of the overall time-frame.
- B. The administrative completeness review time-frame for each type of approval granted by the Department as prescribed in this Article is listed in Table 1. The administrative completeness review time-frame begins on the date the Department receives a complete application packet or a written request for a change in a health care institution license according to R9-10-109(E):
 1. The application packet for an initial health care institution license is not complete until the applicant provides the Department with written notice that the health care institution is ready for a licensing inspection by the Department.
 2. If the application packet or written request is incomplete, the Department shall provide a written notice to the applicant specifying the missing document or incomplete information. The administrative completeness review time-frame and the overall time-frame are suspended from the date of the notice until the date the Department receives the missing document or information from the applicant.
 3. When an application packet or written request is complete, the Department shall provide a written notice of administrative completeness to the applicant.
 4. For an initial health care institution application, the Department shall consider the application withdrawn if the applicant fails to supply the missing documents or information included in the notice described in subsection (B)(2) within 180 days from the date of the notice described in subsection (B)(2).
 5. If the Department issues a license or grants an approval during the time provided to assess administrative completeness, the Department shall not issue a separate written notice of administrative completeness.
- C. The substantive review time-frame is listed in Table 1 and begins on the date of the notice of administrative completeness.
 1. The Department may conduct an onsite inspection of the facility:
 - a. As part of the substantive review for approval of architectural plans and specifications;
 - b. As part of the substantive review for issuing a health care institution initial or renewal license; or
 - c. As part of the substantive review for approving a change in a health care institution's license.
 2. During the substantive review time-frame, the Department may make one comprehensive written request for additional information or documentation. If the Department and the

applicant agree in writing, the Department may make supplemental requests for additional information or documentation. The time-frame for the Department to complete the substantive review is suspended from the date of a written request for additional information or documentation until the Department receives the additional information or documentation.

3. The Department shall send a written notice of approval or a license to an applicant who is in substantial compliance with applicable requirements in A.R.S. Title 36, Chapter 4 and 9 A.A.C. 10.
4. After an applicant for an initial health care institution license receives the written notice of approval in subsection (C)(3), the applicant shall submit the applicable license fee in R9-10-122 to the Department within 60 days of the date of the written notice of approval.
5. The Department shall provide a written notice of denial that complies with A.R.S. § 41-1076 to an applicant who does not:
 - a. For an initial health care institution application, submit the information or documentation in subsection (C)(2) within 120 days of the Department's written request to the applicant;
 - b. Comply with the applicable requirements in A.R.S. Title 36, Chapter 4 and 9 A.A.C. 10; or
 - c. Submit the fee required in R9-10-122.
6. An applicant may file a written notice of appeal with the Department within 30 days after receiving the notice described in subsection (C)(5). The appeal shall be conducted according to A.R.S. Title 41, Chapter 6, Article 10.
7. If a time-frame's last day falls on a Saturday, a Sunday, or an official state holiday, the Department shall consider the next business day to be the time-frame's last day.

Table 1

Type of Approval	Statutory Authority	Overall Time-frame	Administrative Completeness Time-frame	Substantive Review Time-frame
Approval of architectural plans and specifications R9-10-104	A.R.S. §§ 36-405, 36-406(1)(b), and 36-421	105 days	45 days	60 days
Health care institution initial license R9-10-105	A.R.S. §§ 36-405, 36-407, 36-421, 36-422, 36-424, and 36-425	120 days	30 days	90 days
Health care institution renewal license R9-10-107	A.R.S. §§ 36-405, 36-407, 36-422, 36-424, and 36-425	180 <u>60</u> days	30 days	150 <u>90</u> days
Approval of a change to a health care institution license R9-10-109(E)	A.R.S. §§ 36-405, 36-407, and 36-422	75 days	15 days	60 days

R9-10-109. Changes Affecting a License

- A.** A licensee shall ensure that the Department is notified in writing at least 30 days before the effective date of:
1. A change in the name of:
 - a. A health care institution, or
 - b. The licensee; or
 2. A change in the address of a health care institution that does not provide medical services, nursing services, or health-related services on the premises.
- B.** A licensee of a health care institution that is required by this Chapter to comply with any of the physical plant codes and standards incorporated by reference in R9-1-412 shall submit an application for approval of architectural plans and specifications for a modification of the health care institution.
- C.** A governing authority shall submit ~~a~~ an initial license application required in R9-10-105 for:
1. A change in ownership of a health care institution;
 2. A change in the address or location of a health care institution that provides medical services, nursing services, or health-related services on the premises; or
 3. A change in a health care institution's class or subclass.
- D.** A governing authority is not required to submit documentation of a health care institution's architectural plans and specifications required in R9-10-105(A)(5) for an initial license application if:
1. The health care institution has not ceased operations for more than 30 days,
 2. A modification has not been made to the health care institution,
 3. The services the health care institution is authorized by the Department to provide are not changed, and
 4. The location of the health care institution's premises is not changed.
- E.** A licensee of a health care institution that is not required to comply with the physical plant codes and standards incorporated by reference in R9-1-412 shall submit a written request for a change in the services the health care institution is authorized by the Department to provide or a modification of the health care institution including documentation of compliance with requirements in this Chapter for the change or the modification that contains:
1. The health care institution's name, address, and license number;
 2. A narrative description of the change or modification;
 3. The governing authority's name and dated signature; and
 4. Any documentation that demonstrates that the requested change or modification complies with applicable requirements in this Chapter.
- F.** The Department shall approve or deny a request for a change or modification in this Section according to R9-10-108.
- G.** A licensee shall not implement a change or modification described in this Section until an amended license or a new license is issued by the Department.

R9-10-110. Enforcement Actions

- A.** If the Department determines that an applicant or licensee is not in substantial compliance with applicable laws and rules, the Department may:

1. Issue a provisional license to the applicant or licensee under A.R.S. § 36-425,
2. Assess a civil penalty under A.R.S. § 36-431.01,
3. Impose an intermediate sanction under A.R.S. § 36-427,
4. Remove a licensee and appoint another person to continue operation of the health care institution pending further action under A.R.S. § 36-429,
5. Suspend or revoke a license under R9-10-111 and A.R.S. § 36-427,
6. Deny a license under R9-10-111, or
7. Issue an injunction under A.R.S. § 36-430.

B. In determining which action in subsection (A) is appropriate, the Department shall consider the threat to the health, safety, and welfare of patients in the health care institution based on:

1. Repeated violations of statutes or rules,
2. Pattern of non-compliance,
3. Types of violation,
4. Severity of violation, and
5. Number of violations.

R9-10-111. Denial, Revocation, or Suspension of License

The Department may deny, revoke, or suspend a license to operate a health care institution if an applicant, a licensee, or a person with a business interest of 10% or more in the health care institution:

1. Provides false or misleading information to the Department;
2. Has had in any state or jurisdiction any of the following:
 - a. An application or license to operate a health care institution denied, suspended, or revoked, unless the denial was based on failure to complete the licensing process within a required time-frame; or
 - b. A health care professional license or certificate denied, revoked, or suspended; or
3. Has operated a health care institution, within the ten years preceding the date of the license application, in violation of A.R.S. Title 36, Chapter 4 or this Chapter, endangering the health and safety of patients.

R9-10-112. Tuberculosis Screening

A health care institution's chief administrative officer shall ensure that the health care institution complies with the following if tuberculosis screening is required at the health care institution:

1. For each individual required to be screened for infectious tuberculosis:
 - a. On or before the starting date of the individual's employment by, volunteer service for, or admission to the health care institution, one of the following as evidence of freedom from infectious pulmonary tuberculosis:
 - i. Documentation of a negative Mantoux skin test or other tuberculosis screening test recommended by the U.S. Centers for Disease Control and Prevention administered within six months before the starting date of the individual's employment, volunteer service, or admission that includes the date and the type of tuberculosis screening test; or
 - ii. If the individual had a positive Mantoux skin test or other tuberculosis screening test, a written statement that the individual is free from infectious pulmonary tuberculosis signed by a physician, physician

assistant, or registered nurse practitioner dated within six months before the starting date of the individual's employment, volunteer service, or admission; and

- b. Every 12 months after the anniversary date of the individual's employment by, volunteer service for, or admission to the health care institution, one of the following as evidence of freedom from infectious pulmonary tuberculosis:
 - i. Documentation of a negative Mantoux skin test or other tuberculosis screening test recommended by the U.S. Centers for Disease Control and Prevention administered to the individual before or within 30 days after the anniversary date of the most recent tuberculosis screening test or written statement that includes the date and the type of tuberculosis screening test; or
 - ii. If the individual has had a positive Mantoux skin test or other tuberculosis screening test, a written statement that the individual is free from infectious pulmonary tuberculosis signed by a physician, physician assistant, or registered nurse practitioner dated before or within 30 days after the anniversary date of the most recent tuberculosis screening test or written statement; or

2. Establish, document, and implement a tuberculosis infection control program that complies with the Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-care Settings, 2005 published by the Centers for Disease Control and Prevention (CDC), U.S. Department of Health and Human Services, Atlanta, GA 30333 available at <http://www.cdc.gov/mmwr/PDF/rr/rr5417.pdf>, incorporated by reference, on file with the Department, and including no future editions or amendments and includes:

- a. Conducting tuberculosis risk assessments, conducting tuberculosis screening testing, screening for signs or symptoms of tuberculosis, and providing training and education related to recognizing the signs and symptoms of tuberculosis; and
- b. Maintaining documentation of any:
 - i. Tuberculosis risk assessment;
 - ii. Tuberculosis screening test of an individual who is employed by the health care institution, provides volunteer services for the health care institution, or is admitted to the health care institution ; and
 - iii. Screening for signs or symptoms of tuberculosis of an individual who is employed by the health care institution, provides volunteer services for the health care institution, or is admitted to the health care institution.

~~R9-10-112.~~R9-10-113. Clinical Practice Restrictions for Hemodialysis Technician Trainees

- A. The following definitions apply in this Section:
 - 1. "Assess" means collecting data about a patient by:
 - a. Obtaining a history of the patient,
 - b. Listening to the patient's heart and lungs, and
 - c. Checking the patient for edema.

2. "Blood-flow rate" means the quantity of blood pumped into a dialyzer per minute of hemodialysis.
3. "Blood lines" means the tubing used during hemodialysis to carry blood between a vascular access and a dialyzer.
4. "Central line catheter" means a vascular access created by surgically implanting a tube into a large vein.
5. "Clinical practice restriction" means a limitation on the hemodialysis tasks that may be performed by a hemodialysis technician trainee.
6. "Conductivity test" means a determination of the electrolytes in a dialysate.
7. "Dialysate" means a mixture of water and chemicals used in hemodialysis to remove wastes and excess fluid from a patient's body.
8. "Dialysate-flow rate" means the quantity of dialysate pumped per minute of hemodialysis.
9. "Dialyzer" means a blood filter used in hemodialysis to remove wastes and excess fluid from a patient's blood.
10. "Directly observing" or "direct observation" means a medical person stands next to an inexperienced hemodialysis technician trainee and watches the inexperienced hemodialysis technician trainee perform a hemodialysis task.
11. "Direct supervision" means a nurse or a physician is physically present within sight or hearing of the patient and readily available to provide care to a patient.
12. "Electrolytes" means compounds, such as sodium, potassium, and calcium that break apart into electrically charged particles when dissolved in water.
13. "Experienced hemodialysis technician trainee" means an individual who has passed all didactic, skills, and competency examinations provided by a health care institution that measure the individual's knowledge and ability to perform hemodialysis.
14. "Fistula" means a vascular access created by a surgical connection between an artery and vein.
15. "Fluid-removal rate" means the quantity of wastes and excess fluid eliminated from a patient's blood per minute of hemodialysis to achieve the patient's prescribed weight, determined by:
 - a. Dialyzer size,
 - b. Blood-flow rate,
 - c. Dialysate-flow rate, and
 - d. Hemodialysis duration.
16. "Germicide-negative test" means a determination that a chemical used to kill microorganisms is not present.
17. "Germicide-positive test" means a determination that a chemical used to kill microorganisms is present.
18. "Graft" means a vascular access created by a surgical connection between an artery and vein using a synthetic tube.
19. "Hemodialysis" means a process for removing wastes and excess fluids from a patient's blood by passing the blood through a dialyzer.
20. "Hemodialysis machine" means a mechanical pump that controls:
 - a. The blood-flow rate,

- b. The mixing and temperature of dialysate,
 - c. The dialysate-flow rate,
 - d. The addition of anticoagulant, and
 - e. The fluid-removal rate.
21. "Hemodialysis technician" has the same meaning as in A.R.S. § 36-423.
 22. "Hemodialysis technician trainee" means an individual who is working in a health care institution ~~after March 31, 2003~~ to assist in providing hemodialysis and who is not certified as a hemodialysis technician according to A.R.S. § 36-423(A).
 23. "Inexperienced hemodialysis technician trainee" means an individual who has not passed all didactic, skills, and competency examinations provided by a health care institution that measure the individual's knowledge and ability to perform hemodialysis.
 24. "Medical person" means:
 - a. A doctor of medicine licensed under A.R.S. Title 32, Chapter 13, and experienced in dialysis;
 - b. A doctor of osteopathy licensed under A.R.S. Title 32, Chapter 17, and experienced in dialysis;
 - c. A registered nurse practitioner licensed under A.R.S. Title 32, Chapter 15, and experienced in dialysis;
 - d. A nurse licensed under A.R.S. Title 32, Chapter 15, and experienced in dialysis;
 - e. A hemodialysis technician who meets the requirements in A.R.S. § 36-423(A) approved by the governing authority; and
 - f. An experienced hemodialysis technician trainee approved by the governing authority.
 25. "Medical records" has the same meaning as in A.R.S. § 12-2291.
 26. "Nephrologist" means a physician who specializes in the structure, function, and diseases of the kidney.
 27. "Not established" means not approved for use by the patient's nephrologist.
 28. "Patient" means an individual who receives hemodialysis.
 29. "pH test" means a determination of the acidity of a dialysate.
 30. "Preceptor course" means a health care institution's instruction and evaluation provided to a nurse or a hemodialysis technician trainee that enables the nurse or the hemodialysis technician trainee to provide direct observation and education to other hemodialysis technician trainees.
 31. "Respond" means to mute, shut off, reset, or troubleshoot an alarm.
 32. "Safety check" means successful completion of all tests recommended by the manufacturer of a hemodialysis machine, a dialyzer, or a water system used for hemodialysis before initiating a patient's hemodialysis.
 33. "Vascular access" means the point created on a patient's body where blood lines are connected for hemodialysis.
 34. "Water-contaminant test" means a determination of the presence of chlorine or chloramine in a water system used for hemodialysis.
- B.** An experienced hemodialysis technician trainee may:
1. Perform hemodialysis under direct supervision after passing all didactic, skills and competency examinations; and

2. Provide direct observation to another hemodialysis technician trainee only after completing the health care institution's preceptor course approved by the governing authority.
- C.** An experienced hemodialysis technician trainee shall not access a patient's:
1. Fistula that is not established; or
 2. Graft that is not established;
- D.** An inexperienced hemodialysis technician trainee may perform the following hemodialysis tasks only under direct observation:
1. Access a patient's central line catheter;
 2. Respond to a hemodialysis-machine alarm;
 3. Draw blood for laboratory tests;
 4. Perform a water-contaminant test on a water system used for hemodialysis;
 5. Inspect a dialyzer and perform a germicide-positive test before priming a dialyzer;
 6. Set up a hemodialysis machine and blood lines before priming a dialyzer;
 7. Prime a dialyzer;
 8. Test a hemodialysis machine for germicide presence;
 9. Perform a hemodialysis machine safety check;
 10. Prepare a dialysate;
 11. Perform a conductivity test and a pH test on a dialysate;
 12. Assess a patient;
 13. Check and record a patient's vital signs, weight, and temperature;
 14. Determine the amount and rate of fluid removal from a patient;
 15. Administer local anesthetic at an established fistula or graft, administer anticoagulant, or administer replacement saline solution;
 16. Perform a germicide-negative test on a dialyzer before initiating hemodialysis;
 17. Initiate or discontinue a patient's hemodialysis;
 18. Adjust blood-flow rate, dialysate-flow rate, or fluid-removal rate during hemodialysis; or
 19. Prepare a blood, water, or dialysate culture to determine microorganism presence;
- E.** An inexperienced hemodialysis technician trainee may perform, under direct supervision, any of the hemodialysis tasks listed in subsection (D) after the inexperienced hemodialysis technician trainee has passed the didactic, skills and competency examination applicable to the hemodialysis task.
- F.** An inexperienced hemodialysis technician trainee shall not:
1. Access a patient's:
 - a. Fistula that is not established, or
 - b. Graft that is not established; or
 2. Provide direct observation.
- G.** When a hemodialysis technician trainee performs hemodialysis tasks for a patient, the patient's medical record shall include:
1. The name of the hemodialysis technician trainee,
 2. The date, time, and hemodialysis task performed,
 3. The name of the medical person directly observing or the nurse or physician directly supervising the hemodialysis technician trainee, and

4. The initials or signature of the medical person directly observing or the nurse or physician directly supervising the hemodialysis technician trainee.
- H.** If the Department determines that a health care institution is not in substantial compliance with this Section, the Department may take enforcement action according to R9-10-110.
- I.** ~~The effective date of this Section is April 1, 2003.~~

R9-10-114. Behavioral Health Paraprofessionals, Behavioral Health Technicians

If a health care institution is licensed as a behavioral health inpatient facility, behavioral health residential facility, substance abuse transitional facility, or behavioral health specialized transitional facility, or is authorized to provide behavioral health services an administrator shall ensure that policies and procedures are established, documented, and implemented that:

1. For a behavioral health paraprofessional providing services at the health care institution:
 - a. Delineate the services a behavioral health paraprofessional is allowed to provide at or for the health care institution;
 - b. If a behavioral health paraprofessional provides services under the practice of marriage and family therapy, the practice of professional counseling, the practice of social work, or the practice of substance abuse counseling as defined in A.R.S. § 32-3251, ensure that the behavioral health paraprofessional is under the supervision of an individual licensed pursuant to A.R.S. Title 32, Chapter 33 to provide the specific service being provided by the behavioral health paraprofessional;
 - c. Establish the qualifications for individuals providing supervision to a behavioral health paraprofessional; and
 - d. Establish documentation requirements for the supervision required in subsection (1)(b);
2. For a behavioral health technician providing services at the health care institution:
 - a. Delineate the services a behavioral health technician is allowed to provide at or for the health care institution;
 - b. Establish the qualifications for a behavioral health professional providing clinical oversight to a behavioral health technician;
 - c. If the behavioral technician provides services under the practice of marriage and family therapy, the practice of professional counseling, the practice of social work, or the practice of substance abuse counseling as defined in A.R.S. § 32-3251, ensure that the behavioral health technician is under the clinical oversight of a behavioral health professional licensed pursuant to A.R.S. Title 32, Chapter

33 to provide the specific service being provided by the behavioral health technician;

- d. Delineate the methods used to provide clinical oversight including when clinical oversight is provided on an individual basis or in a group setting;
- e. If clinical oversight is provided electronically, ensure that:
 - i. The clinical oversight is provided verbally with direct and immediate interaction between the behavioral health professional providing and the behavioral health technician receiving the clinical oversight,
 - ii. A secure connection is used, and
 - iii. The identities of the behavioral health professional providing and the behavioral health technician receiving the clinical oversight are verified before clinical oversight is provided;
- f. For each week that a behavioral health technician provides services related to patient care at the health care institution, ensure that the behavioral health technician receives clinical oversight at least once during that week;
- g. Establish the duration of clinical oversight provided to a behavioral health technician to ensure that patient needs are met based on, for each behavioral health technician:
 - i. The scope and extent of the services provided,
 - ii. The acuity of the patients receiving services, and
 - iii. The number of patients receiving services; and
- h. Establish documentation requirements for the supervision required in subsection (2)(c);
- i. Establish the process by which information pertaining to services provided by a behavioral health technician is provided to the behavioral health professional who is responsible for the clinical oversight of the behavioral health technician.

R9-10-115. Unclassified Health Care Institutions

~~An administrator for a health care institution not otherwise classified or subclassified in A.R.S. Title 36, Chapter 4, 9 A.A.C. 10 or 9 A.A.C. 20 shall:~~

- ~~1. Adequately equip and staff the health care institution with qualified personnel to meet the needs and ensure the health and safety of patients and comply with applicable statutes and rules for the provision of medical services, nursing services or health related services;~~

2. Establish and maintain a record of each inpatient and outpatient that documents the assessment of the patient's health needs and the medical services, nursing services and health-related services the patient receives;
3. Ensure that the facility premises, including the facility's equipment, are clean, and free of insects, rodents, litter and rubbish;
4. Establish, document and implement policies and procedures for cleaning, sanitizing or sterilizing and storing equipment and supplies;
5. Ensure that the facility's physical plant and equipment are periodically inspected and, where appropriate, tested, calibrated, serviced or repaired so that the facility's plant and equipment are functioning properly and reliably;
6. Maintain physical plant and equipment inspection and maintenance records to assure that appropriate inspections and maintenance of equipment are accomplished by a qualified person;
7. Comply with applicable regulations adopted pursuant to A.R.S. § 36-136(G) for the control of communicable disease and maintenance of proper sanitation;
8. Comply with applicable fire and building codes;
9. Establish, document and implement policies and procedures that delineate the scope of services offered, hours of operation, admission and discharge criteria and type of personnel provided; and
10. If the health care institution meets the definition of "abortion clinic" in A.R.S. § 36-449.01, ensure that abortions and related services are provided in compliance with the requirements in 9 A.A.C. 10, Article 15.

R9-10-122. Fees

- A.** An applicant who submits to the Department architectural plans and specifications for the construction or modification of a health care institution shall also submit an architectural drawing review fee as follows:
1. Fifty dollars for a project with a cost of \$100,000 or less;
 2. One hundred dollars for a project with a cost of more than \$100,000 but less than \$500,000; or
 3. One hundred fifty dollars for a project with a cost of \$500,000 or more.
- B.** An applicant submitting an initial application or a renewal application for a health care institution license shall submit to the Department an application fee of \$50.
- C.** Except as provided in subsection (D) or (E), an applicant submitting an initial application or a renewal application for a health care institution license shall submit to the Department a license fee as follows:
1. For an adult day health care facility, assisted living home, or assisted living center:
 - a. For a facility with no licensed capacity, \$280;
 - b. For a facility with a licensed capacity of one to 59 beds, \$280, plus the licensed capacity times \$70;
 - c. For a facility with a licensed capacity of 60 to 99 beds, \$560, plus the licensed capacity times \$70;
 - d. For a facility with a licensed capacity of 100 to 149 beds, \$840, plus the licensed capacity times \$70; or

- e. For a facility with a licensed capacity of 150 beds or more, \$1,400, plus the licensed capacity times \$70;
- 2. For a behavioral health service agency:
 - a. For a facility with no licensed capacity, \$375;
 - b. For a facility with a licensed capacity of one to 59 beds, \$375, plus the licensed capacity times \$94;
 - c. For a facility with a licensed capacity of 60 to 99 beds, \$750, plus the licensed capacity times \$94;
 - d. For a facility with a licensed capacity of 100 to 149 beds, \$1,125, plus the licensed capacity times \$94; or
 - e. For a facility with a licensed capacity of 150 beds or more, \$1,875, plus the licensed capacity times \$94;
- 3. For a nursing care institution:
 - a. For a facility with a licensed capacity of one to 59 beds, \$290, plus the licensed capacity times \$73;
 - b. For a facility with a licensed capacity of 60 to 99 beds, \$580, plus the licensed capacity times \$73;
 - c. For a facility with a licensed capacity of 100 to 149 beds, \$870, plus the licensed capacity times \$73; or
 - d. For a facility with a licensed capacity of 150 beds or more, \$1,450, plus the licensed capacity times \$73; or
- 4. For a hospital, a home health agency, a hospice, a hospice inpatient facility, an abortion clinic, a recovery care center, an outpatient surgical center, an outpatient treatment center, or an unclassified health care institution:
 - a. For a facility with no licensed capacity, \$365;
 - b. For a facility with a licensed capacity of one to 59 beds, \$365, plus the licensed capacity times \$91;
 - c. For a facility with a licensed capacity of 60 to 99 beds, \$730, plus the licensed capacity times \$91;
 - d. For a facility with a licensed capacity of 100 to 149 beds, \$1,095, plus the licensed capacity times \$91; or
 - e. For a facility with a licensed capacity of 150 beds or more, \$1,825, plus the licensed capacity times \$91.
- D.** A person who has paid a health care institution license fee for a facility and submits a behavioral health service agency application for the same facility shall submit an application fee but is not required to submit an additional license fee.
- E.** Subsection (C) does not apply to a health care institution operated by a state agency according to state or federal law or to an adult foster care home.
- F.** All fees are nonrefundable except as provided in A.R.S. § 41-1077.