ARIZONA DEPARTMENT OF HEALTH SERVICES

"Health and Wellness for all Arizonans"







Introduction to A.A.C. R9-10 Article (The Nuts and Bolts of Licensure)

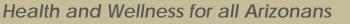






Tuesday, May 7th from 1-3 pm Thursday, May 16th from 1-3 pm Wednesday, May 22nd from 10-12 pm







ADMINISTRATIVE RULES

- SB2634 (April 13, 2011)
- Requires the Department on or before July 1, 2013
 - To *revise rules* to reduce costs and streamline the regulatory process for health care institutions, including those providing behavioral health services
 - To facilitate licensure of integrated health programs that provide both behavioral and physical health services





The new and revised articles and rules in 9 A.A.C. 10 will:

- \checkmark Focus on health and safety
- ✓ Provide regulatory consistency for all health care institutions
- ✓ Streamline the regulatory process
- ✓ Integrate behavioral and physical health services licensing
- ✓ Make changes delineated in applicable Five-Year-Review Reports





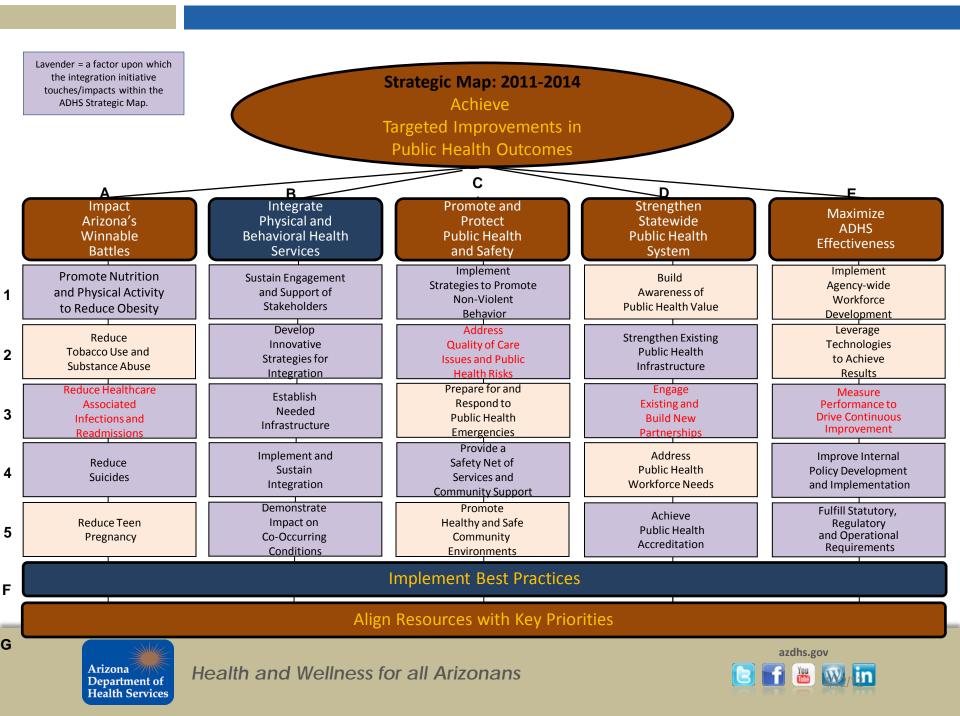
Strategic Planning & Public Health Accreditation

The Arizona Department of Health Services (Department) is presently pursuing accreditation through the Public Health Accreditation Board:

http://www.phaboard.org/







IMPORTANT DISCLAIMER ABOUT THIS PRESENTATION

Please bear in mind this important fact:

The Arizona Administrative Code, Title 9, Chapter 10 (the licensing rules) are under development at the present time.

Therefore, the content of the materials presented herein is in DRAFT form ONLY and the final version of these rules will not be valid until filed with the Secretary of State which are scheduled to go into affect on July 1, 2013.





TITLE 9 HEALTH SERVICES

CHAPTER 10 HEALTH CARE INSTITUTIONS: LICENSING

ARTICLE 1 GENERAL





Article 1

- R9-10-101. Definitions
- R9-10-102. Health Care Institution Classes and Subclasses; Requirements
- R9-10-103. Licensing Exceptions
- R9-10-104. Approval of Architectural Plans and Specifications
- R9-10-105. Initial License Application
- R9-10-106. Fees
- R9-10-107. Renewal License Application





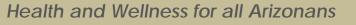
- R9-10-108. Time-frames
- R9-10-109. Changes Affecting a License
- R9-10-110. Enforcement Actions
- R9-10-111. Denial, Revocation, or Suspension of License
- R9-10-112. Tuberculosis Screening
- R9-10-113. Clinical Practice Restrictions for Hemodialysis Technician Trainees





- R9-10-114. Behavioral Health Paraprofessionals, Behavioral Health Technicians
- R9-10-115. Nutrition and Feeding Assistant Training Programs
- R9-10-116. Counseling Facilities







In addition to the definitions in A.R.S. § 36-401(A), the following words have been defined in this rulemaking and occur in the following sections:

A

"Abuse" is used in the following sections: 101

"Accredited" is used in the following sections: 103, & 107

"Activities of daily living" is used in the following sections: 101

"Adjacent" is used in the following sections: 103, & 105

"Administrative completeness review time-frame" is used in the following sections: 108, & 115

"Administrative office" is used in the following sections: 103

"Admission" is used in the following sections: 101

"Adult" is used in the following sections: 102, & 106

"Adverse reaction" is used in the following sections: 101

"Ancillary services" is used in the following sections: 101, & 103

"Anesthesiologist" is used in the following sections: 101

"Applicant" is used in the following sections: 101, 104, 105, 106, 108, 110, 111, & 115

"Application packet" is used in the following sections: 101, 104, 105, 107, & 108





"Assessment" is used in the following sections: 101, & 112 "Assistance in the self-administration of medications" is used in the following sections: 101 "Attending physician" is used in the following sections: 101 "Authenticate" is used in the following sections: 101 "Available" is used in the following sections: 101, 104, & 112

B

"Behavioral health inpatient facility" is used in the following sections: 102, 105, & 114 "Behavioral health issue" is used in the following sections: 101 "Behavioral health observation/stabilization services" is used in the following sections: 104 "Behavioral health paraprofessional" is used in the following sections: 101, & 114 "Behavioral health professional" is used in the following sections: 101, & 114 "Behavioral health residential facility" is used in the following sections: 101, 102, 105, & 114 "Behavioral health residential facility" is used in the following sections: 101, 102, 105, & 114 "Behavioral health technician" is used in the following sections: 101, 102, 105, 109, & 114 "Behavioral health technician" is used in the following sections: 101, & 114 "Biohazardous medical waste" is used in the following sections: 101 "Biological" is used in the following sections: 101





"Calendar day" is used in the following sections: 108, 109, 112, & 115 "Certification" is used in the following sections: 104 "Certified health physicist" is used in the following sections: 104 "Change in ownership" is used in the following sections: 109 "Chief administrative officer" or "administrator" is used in the following sections: 101, 105, 107, 112, 114, & 116 "Clinical laboratory services" is used in the following sections: 101 "Clinical oversight" is used in the following sections: 114 "Clinical privileges" is used in the following sections: 101 "**Communicable disease**" is used in the following sections: 101 "**Conspicuously posted**" is used in the following sections: 101 "**Consultation**" is used in the following sections: 101 "**Contracted services**" is used in the following sections: 101 "Contractor" is used in the following sections: 104 "**Controlled substances**" is used in the following sections: 101 "**Counseling**" is used in the following sections: 101, 102, 114, & 116 "**Counseling facility**" is used in the following sections: 102, & 116





"Court-ordered alcohol treatment" is used in the following sections: 101
"Court-ordered alcohol treatment evaluation" is used in the following sections: 101
"Court-ordered evaluation" is used in the following sections: 101
"Court-ordered treatment" is used in the following sections: 101
"Crisis services" is used in the following sections: 101
"Current" is used in the following sections: 101

D

"Danger to others" is used in the following sections: 101
"Danger to self" is used in the following sections: 101
"Diagnostic procedure" is used in the following sections: 101
"Disaster" is used in the following sections: 101
"Discharge" is used in the following sections: 101
"Discharge planning" is used in the following sections: 101
"Discharge summary" is used in the following sections: 101





"Documentation" or "documented" is used in the following sections: 101, 104, 108, 109, 112, & 114 "Drill" is used in the following sections: 101 "Drug" is used in the following sections: 101

E

"Electronic" is used in the following sections: 101, & 114
"Electronic signature" is used in the following sections: 101
"Emergency" is used in the following sections: 101, & 115
"Environmental services" is used in the following sections: 101
"Equipment" is used in the following sections: 101, & 104
"Exploitation" is used in the following sections: 101

"Factory-built building" is used in the following sections: 101, & 104
 "Family" or "family member" is used in the following sections: 101, & 114
 "Food services" is used in the following sections: 101





"Garbage" is used in the following sections: 101 "General consent" is used in the following sections: 101 "General hospital" is used in the following sections: 101, & 102 "Gravely disabled" is used in the following sections: 101

Η

"Hazard" is used in the following sections: 101
"Health care directive" is used in the following sections: 101
"Home health agency" is used in the following sections: 101, 102, 105, & 106
"Home health aide" is used in the following sections: 101
"Home health services" is used in the following sections: 101
"Hospice inpatient facility" is used in the following sections: 101, 102, & 106
"Hospital" is used in the following sections: 101, 102, & 106





"Immediate" is used in the following sections: 101, & 114
"Incident" is used in the following sections: 101
"Infection control" is used in the following sections: 101, 112, & 115
"Informed consent" is used in the following sections: 101
"In-service education" is used in the following sections: 101
"Interval note" is used in the following sections: 101
"Interval note" is used in the following sections: 101

L

"Leased facility" is used in the following sections: 101, 105, & 107 "License" is used in the following sections: 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 114, & 115 "Licensee" is used in the following sections: 101, 104, 107, 109, 110, 111,





Μ

"Manage" is used in the following sections: 101, & 105 "**Medical condition**" is used in the following sections: 101 "Medical history" is used in the following sections: 101 "Medical practitioner" is used in the following sections: 101 "Medical record" is used in the following sections: 101, & 113 "Medical staff" is used in the following sections: 101 "Medical staff by-laws" is used in the following sections: 101 "Medical staff member" is used in the following sections: 101 "Medication" is used in the following sections: 101 "Medication administration" is used in the following sections: 101 "Mental health disorder" is used in the following sections: 101 "Mental health care power of attorney" is used in the following sections: 101 "Mobile clinic" is used in the following sections: 101, & 103 "Monitor" is used in the following sections: 101





Ν

"Neglect" is used in the following sections: 101 "Nurse" is used in the following sections: 101 "Nursing personnel" is used in the following sections: 101

0

"Occupational therapist" is used in the following sections: 101
"Occupational therapist assistant" is used in the following sections: 101
"On-call" is used in the following sections: 101
"Order" is used in the following sections: 101
"Orientation" is used in the following sections: 101
"Outing" is used in the following sections: 101
"Outpatient surgical center" is used in the following sections: 101, 102, & 106
"Outpatient treatment center" is used in the following sections: 101, 102, 105, & 106
"Overall time-frame" is used in the following sections: 101, 108, & 115

"Owner" is used in the following sections: 101, 104, 105, 107, & 109





P

"Patient" is used in the following sections: 101, 102, 103, 104, 105, 106, 110, 111, 113, & 114 "Patient follow-up instructions" is used in the following sections: 101 "Patient's representative," is used in the following sections: 101 "Person" is used in the following sections: 101, 102, 104, 105, 110, 111, & 113 "Personnel member" is used in the following sections: 101 "Pest control program" is used in the following sections: 101 "**Pharmacist**" is used in the following sections: 101 "Physical examination" is used in the following sections: 101 "**Physical health services**" is used in the following sections: 101 "**Physical therapist**" is used in the following sections: 101 "**Physical therapist assistant**" is used in the following sections: 101 "Physician assistant" is used in the following sections: 101, 112, & 113 "Premises" is used in the following sections: 101, 103, 104, 105, & 109 "**Progress note**" is used in the following sections: 101





"PRN" is used in the following sections: 101
"Project" is used in the following sections: 101, 104, & 106
"Provisional license" is used in the following sections: 101, & 110
"Psychiatrist" is used in the following sections: 101
"Psychologist" is used in the following sections: 101
"Psychotropic medication" is used in the following sections: 101

Q

"Quality management program" is used in the following sections: 101

R

"Recovery care center" is used in the following sections: 101, 102, & 106 "Referral" is used in the following sections: 101 "Registered dietitian" is used in the following sections: 101





"Registered nurse" is used in the following sections: 101, 112, & 115
"Registered nurse practitioner" is used in the following sections: 101, 112, & 115
"Regular basis" is used in the following sections: 101
"Research" is used in the following sections: 101
"Respiratory care services" is used in the following sections: 101
"Restraint" is used in the following sections: 101
"Room" is used in the following sections: 101, 04, 105, & 115

S

"Satellite facility" is used in the following sections: 101, & 103 "Scope of services" is used in the following sections: 101, 102, 105, & 107 "Seclusion" is used in the following sections: 101 "Signature" is used in the following sections: 101, 105, 107, 109, 113, & 115 "Significant change" is used in the following sections: 101





"Social worker" is used in the following sections: 101
"Social work services" is used in the following sections: 101
"Student" is used in the following sections: 101
"Substantial" when used in connection with a modification is used in the following sections: 101, & 104
"Substance abuse" is used in the following sections: 101, 102, 105, & 114
"Substance abuse transitional facility" is used in the following sections: 101
"Substantive review time-frame" is used in the following sections: 101
"Substantive review time-frame" is used in the following sections: 101, 108, & 115
"Summing pool" is used in the following sections: 101, 104, & 105
"System" is used in the following sections: 101, 104, & 113

Τ

"Tax ID number" is used in the following sections: 101, & 105 "**Telemedicine**" is used in the following sections: 101 "**Therapeutic diet**" is used in the following sections: 101





"Time out" is used in the following sections: 101
"Transfer" is used in the following sections: 101
"Transport" is used in the following sections: 101
"Treatment" is used in the following sections: 101, 102, 105, & 106

"Unclassified health care institution" is used in the following sections: 101, 102, & 106

V

"Volunteer" is used in the following sections: 101, & 112

W

"Working day" is used in the following sections: 101, 108, & 115





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

R9-10-102(A)

An entity may apply for a license as a/an:

Unclassified Health Care Institution (HCI); HCI class or subclass in A.R.S. Title 36, Chapter 4 or 9 A.A.C. 10; or One of the following 21 classes or subclasses:

- 1. General hospital,
- 2. Rural general hospital,
- 3. Special hospital,
- 4. Behavioral health inpatient facility,
- 5. Nursing care institution,
- 6. Recovery care center,
- 7. Hospice inpatient facility,
- 8. Hospice service agency,
- 9. Behavioral health residential facility,
- 10. Assisted living center,

11. Assisted living home,

12. Adult foster care home, 13. Outpatient surgical center,

- 14. Outpatient treatment center;
- 15. Adult day health care facility,
- 16. Home health agency,
- 17. Behavioral health specialized transitional facility
- 18. Substance abuse transitional facility,
- 19. Abortion clinic,
- 20. Unclassified health care institution, or
- 21. Counseling facility.





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

R9-10-102(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.

R9-10-102(C).

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

- 1. There are no specific rules in 9 A.A.C. 10 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.







No changes in class or subclass are being made in health care institutions currently licensed under Chapter 10. Some classes/subclasses may add the provision of behavioral health services.

Current Class/Subclass in Chapter 10	Proposed Changes		Proposed Licensing Process*	
			Initial	Renewals
Hospitals Nursing Care Institutions Hospices Outpatient Surgical Center Assisted Living Facilities Assisted living center Assisted living home Adult foster care home Adult Day Health Care Facilities	No change; already integrated Behavioral health services may be added Applications to provide behavioral health services can be submitted on or after 7/1/13: -Survey for the behavioral health services will be to new rules.		Submitted & surveyed before 7/1/13: -Initial compliance survey to current rules Surveyed on or after 7/1/13: -Initial compliance survey to new rules	Renew license as usual. Licensing cycle will remain the same. Surveyed before 7/1/13: -Compliance survey to current rules Surveyed on or after 7/1/13: -Compliance survey to new rules
Recovery Care Center Home Health Agency				
Outpatient Treatment Centers	Applications to provide ph services can be submitted o -Survey for these servic Physical health facilities may add: -opioid treatment -BH services -pre-petition screening -crisis services -court-ordered evaluation -court-ordered treatment -BH observation and stabilization services	on or after 7/1/13.	Submitted & surveyed before 7/1/13: -Initial compliance survey to current rules Surveyed on or after 7/1/13 -Initial compliance survey to new rules Counseling Only Outpatient Clinics Application for initial licensing MUST be submitted before 7/1/13: -automatic transfer to OTC on 7/1/13 with survey to rule set in place on day of survey** No initial applications will be accepted for counseling-only OTC facilities on or after 7/1/13.	Renew license as usual. Licensing cycle will remain the same. Surveyed before 7/1/13: -Compliance survey to current rules Surveyed on or after 7/1/13: -Compliance survey to new rules Counseling Only Outpatient Clinics licensed before 7/1/13 remaining as a licensed facility. -renew license as usual -automatic transfer to OTC on 7/1/13 with survey to rule set in place on day of survey**

*Complaints received on issues that occurred on or after July 1, 2013 will be surveyed to the new rules, regardless of previous initial or annual compliance survey.

**Facilities will receive license showing updated class at next renewal.

Chapter 20 facilities, requiring approval but choosing to stay licensed, will need to follow both the licensure and approval requirements.







Public Health Services Licensing - Classification Structure & Licensing Process Crosswalk

	D 101	Proposed Licensing Process*		
Current Subclass in Chapter 20	Proposed Changes	Initial	Renewal/Annual	
Level 1 Residential Treatment Center Level 1 Sub-acute	Chapter 10: Behavioral Health Inpatient Facility Already integrated	Submitted & surveyed before 7/1/13: -Initial compliance survey to current rules	Renew license as usual. Licensing cycle will remain the same.	
Level 2 BH Residential Agency Level 3 BH Residential Agency	Chapter 10: Behavioral Health Residential Facility Personal care services may be added. Applications to provide personal care services can be submitted on or after 7/1/13. -Survey for the personal care services will be to new rules.	Surveyed on or after 7/1/13: -Initial compliance survey to new rules	Surveyed before 7/1/13: -Annual/Renewal Compliance survey to current rules Surveyed on or after 7/1/13: -Annual/Renewal Compliance survey to new rules	
Outpatient Clinic - meets the definition of health care institution or is currently licensed under Chapter 20 Opioid Treatment Center	Chapter 10: Outpatient Treatment Center (see above)	See initial licensing process for Outpatient Treatment Centers above.	See renewal licensing process for Outpatient Treatment Centers above.	
Level 1 Specialized Transitional Agency	Chapter 10: Behavioral Health Specialized Transitional Agency	Submitted & surveyed before 7/1/13: -Initial compliance survey to current rules Surveyed on or after 7/1/13: -Initial compliance survey to new rules	Renew license as usual. Licensing cycle will remain the same. Surveyed before 7/1/13: -Compliance survey to current rules	
Rural Substance Abuse Transitional Agency	Chapter 10: Substance Abuse Transitional Agency		Surveyed on or after 7/1/13: -Compliance survey to new rules	
DUI Services	Chapter 20: DUI Services Approved, not licensed	Submitted & surveyed before 7/1/13: -Initial compliance survey to current rules	Renew license as usual. Cycle will remain the same.	
Misdemeanor DV Offender Treatment	Chapter 20: Misdemeanor DV Offender Treatment Approved, not licensed	Applications submitted after 7/1/13: -Approval per new rules. Inform the Department, in writing, of desired status as of 7/1/13: -licensed: Automatic transfer to OTC on 7/1/13 with survey to rule set in place on day of survey.** # -approval: Licensed until 7/1/13 with automatic transfer to approval.	Inform the Department, in writing, of desired status as of 7/1/13: -licensed: Automatic transfer to OTC on 7/1/13 with survey to rule set in place on day of survey.** # -approval: Licensed until 7/1/13 with automatic transfer to approval.	

The following are the changes being made to the subclasses of behavioral health service agencies currently licensed under Chapter 20.

*Complaints received on issues that occurred on or after July 1, 2013 will be surveyed to the new rules, regardless of previous initial or annual compliance survey. **Facilities will receive license showing updated class at next renewal.

Chapter 20 facilities, requiring approval but choosing to stay licensed, will need to follow both the licensure and approval requirements.







Public Health Services Licensing - Classification Structure & Licensing Process Crosswalk

The following are the changes being made to the subclasses of behavioral health service agencies currently licensed under Chapter 20.

Commit Scholaufe Chart 10	Provent Channe	Proposed Licensing Process*	
Current Subclass in Chapter 20	Proposed Changes	Initial	Renewal/Annual
Shelter for Victims of Domestic Violence	No longer regulated by the Department	Submitted & surveyed before 7/1/13: -Initial compliance survey to current rules No initial applications will be accepted for Shelter for Victims of Domestic Violence on or after 7/1/13.	
Level 4 Transitional Agency	No longer regulated by the Department	Submitted & surveyed before 7/1/13: -Initial compliance survey to current rules No initial applications will be accepted for Level 4 Transitional Agencies on or after 7/1/13.	Currently licensed Level 4 Transitional Agencies interested in becoming a BH Residential Agency: Please contact the Office of Behavioral Health Licensing at 602-364- 2595.
Adult Therapeutic Foster Home	Chapter 20: Adult Therapeutic Foster Home Approved, not licensed	Submitted & surveyed before 7/1/13: -Initial compliance survey to current rules - Facility will remain licensed until 7/1/2013 with automatic transfer to approval. ** Applications submitted on or after 7/1/13: -Approval per new rules	Renew license as usual. Cycle will remain the same. Facility will remain licensed until 7/1/13 with automatic transfer to approval. **

*Complaints received on issues that occurred on or after July 1, 2013 will be surveyed to the new rules, regardless of previous initial or annual compliance survey.

**Facilities will receive license showing updated class at next renewal.

Chapter 20 facilities, requiring approval but choosing to stay licensed, will need to follow both the licensure and approval requirements.





R9-10-103. Licensing Exceptions

R9-10-103(A). 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.17 4/4/2013 8:45 AM

R9-10-103(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);
- 2. An accredited facility of an accredited hospital under A.R.S. § 36-422(G);
- 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 connected to the licensed health care institution facility by an all-weather enclosure and:
 - i. Owned by the health care institution, or
 - ii. Leased by the health care institution with exclusive rights of possession;
- 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

R9-10-104(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 in a format 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 **and**, **if applicable**, **licensed occupancy** 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 or licensed occupancy and** the requested licensed capacity **or licensed occupancy** 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;

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; and





g. If providing or planning to provide behavioral health observation/stabilization services, the number of observation/stabilization chairs designated for providing the behavioral health observation/stabilization 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 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 in a format 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 in a format 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 R9-10-106.





R9-10-104(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.

R9-10-104(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.

R9-10-104(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.





HIGHLIGHTS of the changes made to:

A.A.C. TITLE 9, CHAPTER 1, ARTICLE 4: CODES AND STANDARDS REFERENCED §R9-1-412: Physical Plant Health and Safety Codes and Standards

A. The following physical plant health and safety codes and standards are incorporated by reference as modified, are on file with the Department, and include no future editions or amendments:

- 1. Guidelines for Design and Construction of Health Care Facilities (2010 ed.), published by the American Society for Healthcare Engineering and available from The Facility Guidelines Institute at www.fgiguidelines.org;
- 2. The following National Fire Codes (2012), published by and available from the National Fire Protection Association, 1 Batterymarch Park, Quincy, MA 02269, and at www.nfpa.org/catalog:
 - a. NFPA70 National Electrical Code,
 - b. NFPA101 Life Safety Code, and
 - c. 2012 Supplements;
- **3.** International Building Code (**2012**), published by and available from the International Code Council, Inc., Publications, 4051 W. Flossmoor Road, Country Club Hills, IL 60478-5795, **and at www.iccsafe.org**, with the following modifications: ... "a" through "r" amending sections 101.1 through 116.5 and section 3401; Appendices "A", "B", "C", "D", "G", "K", "L", & M"



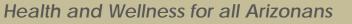


HIGHLIGHTS of the changes made to:

A.A.C. TITLE 9, CHAPTER 1, ARTICLE 4: CODES AND STANDARDS REFERENCED §R9-1-412: Physical Plant Health and Safety Codes and Standards

- International Mechanical Code (2012), published by and available from the International Code Council, Inc., Publications, 4051 W. Flossmoor Road, Country Club Hills, IL 60478-5795, and at www.iccsafe.org, with the following modifications: . . . "a" through "j" amending sections 101.1 through 110.4 and Appendix "B".
- 5. International Plumbing Code (2012), published by and available from the International Code Council, Inc., Publications, 4051 W. Flossmoor Road, Country Club Hills, IL 60478-5795, and at www.iccsafe.org, with the following modifications: . . . "a" through "j" amending sections 101.1 through 110.4 and Appendix "A".
- 6. International Fire Code (**2012**), published by and available from the International Code Council, Inc., Publications, 4051 W. Flossmoor Road, Country Club Hills, IL 60478-5795, **and at www.iccsafe.org**, with the following modifications: . . . "a" through "I" amending sections 101.1 through 113.5 and Appendix "A".







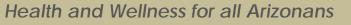
HIGHLIGHTS of the changes made to:

A.A.C. TITLE 9, CHAPTER 1, ARTICLE 4: CODES AND STANDARDS REFERENCED §R9-1-412: Physical Plant Health and Safety Codes and Standards

- ICC/A117.1-2009, American National Standard: Accessible and Usable Buildings and Facilities (2009), published by and available from the International Code Council, Inc., Publications, 4051 W. Flossmoor Road, Country Club Hills, IL 60478-5795, and at www.iccsafe.org;
- 8. International Fuel Gas Code (2012), published by and available from the International Code Council, Inc., Publications, 4051 W. Flossmoor Road, Country Club Hills, IL 60478-5795, and at www.iccsafe.org, with the following modifications: . . . "a" through "j" amending sections 101.1 through 110.4.
- 9. International Private Sewage Disposal Code (2012), published by and available from the International Code Council, Inc., Publications, 4051 W. Flossmoor Road, Country Club Hills, IL 60478-5795, and at www.iccsafe.org, with the following modifications: . . . "a" through "i" amending sections 101.1 through 110.4.

Subsection B was unchanged.







R9-10-105(A).

A person applying for a health care institution license shall submit to the Department an application packet that contains:

1. An application in a format 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;

c. Except for a home health agency, 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;

d. Whether the health care institution is located in a leased facility;

e. Whether the health care institution is ready for a licensing inspection by the Department;

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;





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 licensing is requested; and

v. Signature required in A.R.S. § 36-422(B);





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 service agency**, one of the following:

a. If the health care institution or a part of 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 a health care institution or a part of 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:

 Documentation from the local jurisdiction of compliance with applicable local building codes and zoning ordinances; or
 Documentation of a general contractor's inspection of the facility that states the facility is safe for occupancy as a health care institution class or subclass:

ii. The licensed capacity requested by the applicant for the health care institution;

iii. If applicable, the licensed occupancy requested by the applicant for the health care institution;

iv. 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 institution premises, and, if applicable, each swimming pool on the health care institution premises; and

v. 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;





6. The health care institution proposed scope of services; and

7. The applicable application fee required **by R9-10-106**.

R9-10-105(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.

R9-10-105(C).

The Department shall approve or deny an application in this Section according to R9-10-108.





R9-10-106. Fees

R6-10-106 was renumbered, none of the "fees" section body (text) was changed.





R9-10-107(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 in a format 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;

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 licensing is requested; and

e. Signature required in A.R.S. § 36-422(B);

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 licensing fees required by R9-10-106.

R9-10-107(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 for the health care institution's class or subclass.





R9-10-107(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 during the time the accreditation report is valid.**

R9-10-107(D).

The Department shall approve or deny a renewal license according to R9-10-108.

R9-10-107(E).

The Department shall issue a renewal license for:

- 1. One year; or
- 2. 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

Nothing in the body (text) of the "timeframes" section was changed. However the highlighted parts of the "timeframes" Table 1 were added for clarity:

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 calendar days	45 calendar days	60 calendar 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 calendar days	30 calendar days	90 calendar days
Health care institution renewal license R9-10-107	A.R.S. §§ 36-405, 36-407, 36-422, 36-424, and 36- 425	90 calendar <mark>days</mark>	30 calendar days	<mark>60 calendar</mark> 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 calendar days	15 calendar days	<mark>60 calendar</mark> days





R9-10-109. Changes Affecting a License

A. A licensee shall ensure that the Department is notified in writing at least 30 **calendar** 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 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, health-related services, or **behavioral health 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 **calendar** 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.

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F. The Department shall approve or deny a request for a change or modification in subsection (E) 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, the health care institution obtains from the individual:

a. On or before the date the individual begins providing services at or on behalf of the health care institution or is admitted to the health care institution, one of the following as evidence of freedom from infectious 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 (CDC) administered** within six months before the date the individual begins providing services at or on behalf of the health care institution or is admitted to the health care institution 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 tuberculosis signed by a physician, physician assistant, or registered nurse practitioner dated within six months before the date the individual begins providing services at or on behalf of the health care institution or is admitted to the health care institution; and





b. Every 12 months after the date of the individual's most recent tuberculosis screening test or written statement, one of the following as evidence of freedom from infectious tuberculosis:

i. Documentation of a negative Mantoux skin test or other tuberculosis screening test recommended by the CDC administered to the individual within 30 calendar days before or 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 tuberculosis signed by a physician, physician assistant, or registered nurse practitioner dated within 30 calendar days before or 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 **U.S. Department of Health and Human** Services, Atlanta, GA 30333 and 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.



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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.



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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.



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6. "Conductivity test" means a determination of the electrolytes in a dialysate.

 "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 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 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.





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 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 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 germicidepositive 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.





R9-10-114. Behavioral Health Paraprofessionals

BHP

 An individual who is qualified according to a healthcare institution's policies and procedures to provide behavioral health services at or for the healthcare institution that would require a license under A.R.S. Title 32, Chapter 33.





R9-10-114. Behavioral Health Technicians

BHT

• An individual who is not a Behavioral Health Professional who provides behavioral health services at or for a healthcare institution that would require a license under A.R.S. Title 32, Chapter 33.





- A. For the purposes of this Section, "agency" means an entity other than a nursing care institution that provides the nutrition and feeding assistant training required in *A.R.S § 36-413*.
- B. An agency shall apply for approval to operate a nutrition and feeding assistant training program by submitting:
 - 1. An application for approval that contains:
 - a. The name of the individual in charge of the proposed nutrition and feeding assistant training program;
 - b. The address where the nutrition and feeding assistant training program records are maintained;
 - c. A description of the training course being offered by the nutrition and feeding assistant training program

including for each topic in subsection (I):





- *i.* The information presented for each topic,
- *ii.* The amount of time allotted to each topic,
- *iii.* The skills an individual is expected to acquire for each topic, and
- *iv.* The testing method used to verify an individual has acquired the stated skills for each topic; and
- d. The signature of the individual in charge of the proposed nutrition and feeding assistant training program and the date signed;
- 2. A copy of the materials used for providing the nutrition and feeding program.
- C. For an application for an approval of a nutrition and feeding assistant training program, the administrative review time-frame is 30 calendar days, the substantive review time-frame is 30 calendar days, and the overall time-frame is 60 calendar days.





D. Within 30 calendar days of the receipt of an application in subsection (B), the Department shall:

- 1. Issue an approval of the agency's nutrition and feeding assistant training program;
- 2. Provide a notice of administrative completeness to the agency that submitted the application; or
- 3. Provide a notice of deficiencies to the agency that submitted the application, including a list of the information or documents needed to complete the application.

If the Department provides a notice of deficiencies to an applicant:

1. The administrative completeness review time-frame and the overall time-frame are suspended from the date of the notice of deficiencies until the date the Department receives the missing information or documents from the applicant;



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- 2. If the applicant does not submit the missing information or documents to the Department within 30 calendar days, the Department shall consider the application withdrawn; and
- 3. If the applicant submits the missing information or documents to the Department within the time-frame in Table 1.1, the substantive review time-frame begins on the date the Department receives the missing information or documents.
- F. Within the substantive review time-frame, the Department:
 - 1. Shall issue or deny an approval of a nutrition and feeding assistant program; and
 - 2. May make one written comprehensive request for more information, unless the Department and the applicant agree in writing to allow the Department to submit supplemental requests for information.





- G. If the Department issues a written comprehensive request or a supplemental request for information:
 - 1. The substantive review time-frame and the overall timeframe are suspended from the date of the written comprehensive request or the supplemental request for information until the date the Department receives the information requested, and
 - 2. The applicant shall submit to the Department the information and documents listed in the written comprehensive request or supplemental request for information within 10 working days after the date of the comprehensive written request or supplemental request for information.





H. The Department shall issue:

- 1. An approval for an agency to operate a nutrition and feeding assistant training program, if the Department determines that the agency and the application complies with **A.R.S. § 36-413** and this Section:
- 2. A denial for an agency that includes the reason for the denial and the process for appeal the Department's decision if:
 - a. The Department determines that the applicant does not comply with *A.R.S. § 36-413* and this Section; or
 - b. The applicant does not submit information and documents listed in the written comprehensive request or supplement request for information within 10 working days after the date of the comprehensive written request or supplemental request for information.





- I. An individual in charge of a nutrition and feeding assistant training program shall ensure that:
 - The materials and coursework for the nutrition and feeding assistant training program demonstrate includes the following topics:
 - a. Feeding techniques,
 - b. Assistance with feeding and hydration,
 - c. Communication and interpersonal skills,
 - d. Appropriate responses to resident behavior
 - e. Safety and emergency procedures, including the Heimlich maneuver,
 - f. Infection control,





- g. Resident rights,
- h. Recognizing a change in a resident that is inconsistent with the resident's normal behavior, and
- i. Reporting a change in subsection (C)(4) to a nurse at a nursing care institution
- 2. An Individual providing the training course is:
 - a. A physician,
 - b. A physician assistant,
 - c. A registered nurse practitioner,
 - d. A registered nurse,
 - e. A licensed practical nurse,
 - f. A speech-language pathologist, or
 - g. An occupation therapist





- 3. An individual taking the training course completes:
 - a. At least eight hours of classroom time, and
 - b. Demonstrates that the individual has acquired the skills the individual was expected to acquire
- J. An individual in charge of a nutrition and feeding assistant training program shall issue a certificate of completion to an individual who completes the training course and demonstrates the skills the individual was expected to acquire as a result of completing the training course that contains:
 - 1. The name of the agency approved to operate the nutrition and feeding assistant training program,
 - 2. The name of the individual completing the training course,
 - 3. The date of completion,





- 4. The name, signature, and professional license of the individual providing the training course, and
- 5. The name and signature of the individual in charge of the nutrition and feeding assistant training program.
- K. The Department may deny, revoke, or suspend an approval to operate a nutrition and feeding assistant training program if an applicant for or an agency operating a nutrition and feeding assistance training program.
 - 1. Provides false or misleading information to the Department;
 - 2. Does not comply with the applicable statutes and rules;
 - Issues a training completion certificate to an individual who did not;





- a. Complete the nutrition and feeding assistant training program, or
- b. Demonstrate the skills the individual was expected to acquire;
- 4. Does not implement the nutrition and feeding assistant training program as described in or use the materials submitted with agency's application.
- L. In determining which action in subsection (D) is appropriate, the Department shall consider the following:
 - 1. Repeated violations of statutes or rules,
 - 2. Pattern of non-compliance,
 - 3. Types of violations,
 - 4. Severity of violations, and
 - 5. Number of violations.





R9-10-116. Counseling Facilities

An Outpatient Treatment Center that only provides and was licensed before July 1, 2013 to provide one or more of the following services

- Counseling
- DUI screening, education, or treatment according to the requirements in 9 A.A.C. 20, Article 1; and
- Misdemeanor domestic violence offender treatment provided according to the requirements in 9 A.A.C. 20, Article 2.





Next steps

- Final Rules filed with Secretary of State
- JULY 1- New Rules become in effect!





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Questions?

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Resources:

This is the link to the Department's/Division's Integration Rules website:

http://www.azdhs.gov/als/integrated/



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