House Engrossed

hospitals; physicians; dispensing opioids

State of Arizona House of Representatives Fifty-sixth Legislature First Regular Session 2023

CHAPTER 42

HOUSE BILL 2564

AN ACT

AMENDING SECTIONS 32-854.01, 32-1401, 32-1606, 32-1854 AND 32-2532, ARIZONA REVISED STATUTES; AMENDING TITLE 32, CHAPTER 32, ARTICLE 4, ARIZONA REVISED STATUTES, BY ADDING SECTION 32-3248.03; RELATING TO HEALTH CARE PROFESSIONALS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona: 2 Section 1. Section 32-854.01, Arizona Revised Statutes, is amended 3 to read: 4 32-854.01. Unprofessional conduct 5 Unprofessional conduct includes the following conduct, whether it 6 occurs in this state or elsewhere: 7 1. Requesting, listing, accepting or receiving any rebate or 8 commission for prescribing or recommending any footwear, drug, medicine, 9 or other article to the licensee's patients. 2. Prescribing, dispensing or pretending to use, in treating any 10 11 patient, any secret remedial agent, or manifesting or promoting its use in any way, or guaranteeing or implying to guarantee any treatment, therapy 12 13 or remedy. 14 Representing that a disease or infirmity can be permanently 3. cured, or that any disease, ailment or infirmity can be cured by a secret 15 16 method, procedure, treatment, medicine or device, if this is not true. 17 4. Practicing podiatry under a trade name, under the name of 18 another podiatrist, under any other name than that which appears on the 19 practitioner's license, or under any title that misrepresents the practice 20 of podiatry. 21 5. Advertising in a false, deceptive or misleading manner or 22 advertising the quality of podiatric service. 23 6. Employing a solicitor to obtain business. 24 7. Fee splitting under any guise whatsoever. 25 8. Failing to report required in section 32-852.01. as 26 subsection A. 9. Failing to obtain written informed consent from a patient before 27 28 the licensee performs any surgical procedure on the patient. 29 10. Committing a felony, whether or not involving moral turpitude, 30 or a misdemeanor involving moral turpitude. In either case, conviction by 31 any court of competent jurisdiction is conclusive evidence that the 32 licensee committed the crime. 33 11. Failing or refusing to maintain adequate records on: 34 (a) A patient who is eighteen years of age or older for at least 35 six years. 36 (b) A patient who is under eighteen years of age for the later of 37 either: 38 (i) Three years after the patient's eighteenth birthday. 39 (ii) Six years after the last date the patient received medical or 40 health care services from the licensee. 41 12. Failing or refusing to make a patient's records available to a 42 physician or another podiatrist within twenty-one days after a request and

43 the receipt of proper authorization.

1 13. Habitual intemperance in the use of alcohol or habitual 2 substance abuse.

3 14. Using controlled substances or prescription-only drugs except 4 if provided by a physician for use during a prescribed lawful course of 5 treatment.

6 15. Prescribing controlled substances to members of the 7 podiatrist's immediate family.

8 16. Providing any controlled substance or prescription-only drug 9 for other than accepted therapeutic purposes.

10 17. Dispensing a schedule II controlled substance that is an 11 opioid, EXCEPT AS PROVIDED IN SECTION 32-3248.03.

12 18. Committing gross malpractice, repeated malpractice or any13 malpractice resulting in the death of a patient.

14 19. Refusing to divulge to the board on demand the means, method, 15 procedure, modality of treatment or medicine used in treating a disease, 16 injury, ailment or infirmity.

17 20. Violating any federal or state law applicable to the practice 18 of podiatry.

19 21. Having the licensee's license refused, revoked or suspended by 20 any other licensing jurisdiction for inability to safely and skillfully 21 practice podiatry or for unprofessional conduct as defined by that 22 jurisdiction that directly or indirectly corresponds to any act of 23 unprofessional conduct as prescribed by this section or any act under 24 section 32-852.

25 22. Committing any conduct or practice that is or might be harmful 26 or dangerous to the health of a patient.

27 23. Violating any formal order, probation or stipulation issued by28 the board pursuant to this chapter.

29 24. Violating or attempting to violate, directly or indirectly, or 30 assisting in or abetting the violation of or conspiring to violate any 31 provision of this chapter.

32 25. Charging or collecting a clearly excessive fee. In determining 33 the reasonableness of a fee, the fee customarily charged in the locality for similar services shall be considered in light of modifying factors, 34 35 such as the time required, the complexity of the service and the skill 36 requisite to perform the service properly. This paragraph does not apply if there is a clear written contract for a fixed fee between the 37 podiatrist and the patient that has been entered into before the licensee 38 39 provides the service.

40 41 26. Obtaining a fee by fraud, deceit or misrepresentation.

27. Charging a fee for services not rendered.

42 28. Failing to dispense drugs and devices in compliance with 43 article 4 of this chapter.

1 Sec. 2. Section 32-1401, Arizona Revised Statutes, is amended to 2 read: 3 32-1401. Definitions 4 In this chapter, unless the context otherwise requires: 5 "Active license" means a valid and existing license to practice 1. 6 medicine. 7 2. "Adequate records" means legible medical records, produced by 8 hand or electronically, containing, at a minimum, sufficient information 9 to identify the patient, support the diagnosis, justify the treatment, accurately document the results, indicate advice and cautionary warnings 10 11 provided to the patient and provide sufficient information for another 12 practitioner to assume continuity of the patient's care at any point in 13 the course of treatment. 14 3. "Advisory letter" means a nondisciplinary letter to notify a 15 licensee that either: 16 (a) While there is insufficient evidence to support disciplinary 17 action, the board believes that continuation of the activities that led to 18 the investigation may result in further board action against the licensee. 19 (b) The violation is a minor or technical violation that is not of 20 sufficient merit to warrant disciplinary action. 21 (c) While the licensee has demonstrated substantial compliance 22 through rehabilitation or remediation that has mitigated the need for 23 disciplinary action, the board believes that repetition of the activities 24 that led to the investigation may result in further board action against 25 the licensee. 26 4. "Approved hospital internship, residency or clinical fellowship program" means a program at a hospital that at the time the training 27 occurred was legally incorporated and that had a program that was approved 28 29 for internship, fellowship or residency training by the accreditation 30 council for graduate medical education, the association of American 31 medical colleges, the royal college of physicians and surgeons of Canada 32 or any similar body in the United States or Canada approved by the board 33 whose function is that of approving hospitals for internship, fellowship 34 or residency training. 5. "Approved school of medicine" means any school or college 35 36 offering a course of study that, on successful completion, results in the degree of doctor of medicine and whose course of study has been approved 37 38 or accredited by an educational or professional association, recognized by 39 the board, including the association of American medical colleges, the 40 association of Canadian medical colleges or the American medical 41 association. "Board" means the Arizona medical board. 42 6. 43 7. "Completed application" means that the applicant has supplied 44 all required fees, information and correspondence requested by the board 45 on forms and in a manner acceptable to the board. - 3 -

8. "Direct supervision" means that a physician, physician assistant licensed pursuant to chapter 25 of this title or nurse practitioner certified pursuant to chapter 15 of this title is within the same room or office suite as the medical assistant in order to be available for consultation regarding those tasks the medical assistant performs pursuant to section 32-1456.

9. "Dispense" means the delivery by a doctor of medicine of a prescription drug or device to a patient, except for samples packaged for individual use by licensed manufacturers or repackagers of drugs, and includes the prescribing, administering, packaging, labeling and security necessary to prepare and safeguard the drug or device for delivery.

10. "Doctor of medicine" means a natural person holding a license,
 registration or permit to practice medicine pursuant to this chapter.

14 11. "Full-time faculty member" means a physician who is employed 15 full time as a faculty member while holding the academic position of 16 assistant professor or a higher position at an approved school of 17 medicine.

18 12. "Health care institution" means any facility as defined in 19 section 36-401, any person authorized to transact disability insurance, as 20 defined in title 20, chapter 6, article 4 or 5, any person who is issued a 21 certificate of authority pursuant to title 20, chapter 4, article 9 or any 22 other partnership, association or corporation that provides health care to 23 consumers.

13. "Immediate family" means the spouse, natural or adopted children, father, mother, brothers and sisters of the doctor OF MEDICINE and the natural or adopted children, father, mother, brothers and sisters of the doctor's DOCTOR OF MEDICINE'S spouse.

14. "Letter of reprimand" means a disciplinary letter that is issued by the board and that informs the physician that the physician's conduct violates state or federal law and may require the board to monitor the physician.

15. "Limit" means taking a nondisciplinary action that alters the physician's practice or professional activities if the board determines that there is evidence that the physician is or may be mentally or physically unable to safely engage in the practice of medicine.

36 16. "Medical assistant" means an unlicensed person who meets the 37 requirements of section 32-1456, has completed an education program approved by the board, assists in a medical practice under the supervision 38 39 of a doctor of medicine, physician assistant or nurse practitioner and 40 performs delegated procedures commensurate with the MEDICAL assistant's 41 education and training but does not diagnose, interpret, design or modify 42 established treatment programs or perform any functions that would violate 43 any statute applicable to the practice of medicine.

1 17. "Medically incompetent" means a person who the board determines 2 is incompetent based on a variety of factors, including:

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(a) A lack of sufficient medical knowledge or skills, or both, to a degree likely to endanger the health of patients.

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5 (b) When considered with other indications of medical incompetence, 6 failing to obtain a scaled score of at least seventy-five percent on the 7 written special purpose licensing examination.

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18. "Medical peer review" means:

9 (a) The participation by a doctor of medicine in the review and 10 evaluation of the medical management of a patient and the use of resources 11 for patient care.

(b) Activities relating to a health care institution's decision togrant or continue privileges to practice at that institution.

14 19. "Medicine" means allopathic medicine as practiced by the 15 recipient of a degree of doctor of medicine.

16 20. "Office based OFFICE-BASED surgery" means a medical procedure 17 conducted in a physician's office or other outpatient setting that is not 18 part of a licensed hospital or licensed ambulatory surgical center.

19 21. "Physician" means a doctor of medicine who is licensed pursuant 20 to this chapter.

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22. "Practice of medicine":

(a) Means the diagnosis, the treatment or the correction of or the attempt or the claim to be able to diagnose, treat or correct any and all human diseases, injuries, ailments, infirmities or deformities, physical or mental, real or imaginary, by any means, methods, devices or instrumentalities, except as the same may be among the acts or persons not affected by this chapter. The practice of medicine

28 (b) Includes the practice of medicine alone or the practice of 29 surgery alone, or both.

23. "Restrict" means taking a disciplinary action that alters the physician's practice or professional activities if the board determines that there is evidence that the physician is or may be medically incompetent or guilty of unprofessional conduct.

24. "Special purpose licensing examination" means an examination that is developed by the national board of medical examiners on behalf of the federation of state medical boards for use by state licensing boards to test the basic medical competence of physicians who are applying for licensure and who have been in practice for a considerable period of time in another jurisdiction and to determine the competence of a physician who is under investigation by a state licensing board.

41 25. "Teaching hospital's accredited graduate medical education 42 program" means that the hospital is incorporated and has an internship, 43 fellowship or residency training program that is accredited by the 44 accreditation council for graduate medical education, the American medical 45 association, the association of American medical colleges, the royal 1 college of physicians and surgeons of Canada or a similar body in the 2 United States or Canada that is approved by the board and whose function 3 is that of approving hospitals for internship, fellowship or residency 4 training.

5 26. "Teaching license" means a valid license to practice medicine 6 as a full-time faculty member of an approved school of medicine or a 7 teaching hospital's accredited graduate medical education program.

8 27. "Unprofessional conduct" includes the following, whether 9 occurring in this state or elsewhere:

10 (a) Violating any federal or state laws, rules or regulations 11 applicable to the practice of medicine.

(b) Intentionally disclosing a professional secret or intentionally
 disclosing a privileged communication except as either act may otherwise
 be required by law.

15 (c) Committing false, fraudulent, deceptive or misleading 16 advertising by a doctor of medicine or the doctor's DOCTOR OF MEDICINE'S 17 staff, employer or representative.

(d) Committing a felony, whether or not involving moral turpitude, or a misdemeanor involving moral turpitude. In either case, conviction by any court of competent jurisdiction or a plea of no contest is conclusive evidence of the commission.

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(e) Failing or refusing to maintain adequate records on a patient.

(f) Exhibiting a pattern of using or being under the influence of alcohol or drugs or a similar substance while practicing medicine or to the extent that judgment may be impaired and the practice of medicine detrimentally affected.

(g) Using controlled substances except if prescribed by anotherphysician for use during a prescribed course of treatment.

29 (h) Prescribing or dispensing controlled substances to members of 30 the physician's immediate family.

(i) Prescribing, dispensing or administering schedule II controlled substances as prescribed by section 36-2513 or the rules adopted pursuant to section 36-2513, including amphetamines and similar schedule II sympathomimetic drugs in the treatment of exogenous obesity for a period in excess of thirty days in any one year, or the nontherapeutic use of injectable amphetamines.

(j) Prescribing, dispensing or administering any controlled
 substance or prescription-only drug for other than accepted therapeutic
 purposes.

40 (k) Dispensing a schedule II controlled substance that is an 41 opioid, except as provided in section SECTIONS 32-1491 AND 32-3248.03.

(1) Signing a blank, undated or predated prescription form.

43 (m) Committing conduct that the board determines is gross 44 malpractice, repeated malpractice or any malpractice resulting in the 45 death of a patient. 1 (n) Representing that a manifestly incurable disease or infirmity 2 can be permanently cured, or that any disease, ailment or infirmity can be 3 cured by a secret method, procedure, treatment, medicine or device, if 4 this is not true.

5 (o) Refusing to divulge to the board on demand the means, method, 6 procedure, modality of treatment or medicine used in the treatment of a 7 disease, injury, ailment or infirmity.

8 (p) Having action taken against a doctor of medicine by another 9 licensing or regulatory jurisdiction due to that doctor's DOCTOR OF MEDICINE'S mental or physical inability to engage safely in the practice 10 11 of medicine or the doctor's DOCTOR OF MEDICINE'S medical incompetence or 12 for unprofessional conduct as defined by that jurisdiction and that 13 corresponds directly or indirectly to an act of unprofessional conduct The action taken may include refusing, 14 prescribed by this paragraph. denying, revoking or suspending a license by that jurisdiction or a 15 16 surrendering of a license to that jurisdiction, otherwise limiting, 17 restricting or monitoring a licensee by that jurisdiction or placing a 18 licensee on probation by that jurisdiction.

(q) Having sanctions imposed by an agency of the federal government, including restricting, suspending, limiting or removing a person from the practice of medicine or restricting that person's ability to obtain financial remuneration.

(r) Committing any conduct or practice that is or might be harmful
or dangerous to the health of the patient or the public.

25 (s) Violating a formal order, probation, consent agreement or 26 stipulation issued or entered into by the board or its executive director 27 under this chapter.

(t) Violating or attempting to violate, directly or indirectly, or
 assisting in or abetting the violation of or conspiring to violate any
 provision of this chapter.

31 (u) Knowingly making any false or fraudulent statement, written or 32 oral, in connection with the practice of medicine or if applying for 33 privileges or renewing an application for privileges at a health care 34 institution.

(v) Charging a fee for services not rendered or dividing a professional fee for patient referrals among health care providers or health care institutions or between these providers and institutions or a contractual arrangement that has the same effect. This subdivision does not apply to payments from a medical researcher to a physician in connection with identifying and monitoring patients for a clinical trial regulated by the United States food and drug administration.

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(w) Obtaining a fee by fraud, deceit or misrepresentation.

43 (x) Charging or collecting a clearly excessive fee. In determining
44 whether a fee is clearly excessive, the board shall consider the fee or
45 range of fees customarily charged in this state for similar services in

1 light of modifying factors such as the time required, the complexity of 2 the service and the skill requisite to perform the service properly. This 3 subdivision does not apply if there is a clear written contract for a 4 fixed fee between the physician and the patient that has been entered into 5 before the provision of the service.

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(y) Committing conduct that is in violation of section 36-2302.

7 (z) Using experimental forms of diagnosis and treatment without 8 adequate informed patient consent, and without conforming to generally 9 accepted experimental criteria, including protocols, detailed records, 10 periodic analysis of results and periodic review by a medical peer review 11 committee as approved by the United States food and drug administration or 12 its successor agency.

(aa) Engaging in sexual conduct with a current patient or with a former patient within six months after the last medical consultation unless the patient was the licensee's spouse at the time of the contact or, immediately preceding the physician-patient relationship, was in a dating or engagement relationship with the licensee. For the purposes of this subdivision, "sexual conduct" includes:

19 (i) Engaging in or soliciting sexual relationships, whether20 consensual or nonconsensual.

21 (ii) Making sexual advances, requesting sexual favors or engaging 22 in any other verbal conduct or physical contact of a sexual nature.

(iii) Intentionally viewing a completely or partially disrobed
 patient in the course of treatment if the viewing is not related to
 patient diagnosis or treatment under current practice standards.

(bb) Procuring or attempting to procure a license to practice
medicine or a license renewal by fraud, by misrepresentation or by
knowingly taking advantage of the mistake of another person or an agency.

29 (cc) Representing or claiming to be a medical specialist if this is 30 not true.

31 (dd) Maintaining a professional connection with or lending one's 32 name to enhance or continue the activities of an illegal practitioner of 33 medicine.

34 (ee) Failing to furnish information in a timely manner to the board 35 or the board's investigators or representatives if legally requested by 36 the board.

37 (ff) Failing to allow properly authorized board personnel on demand 38 to examine and have access to documents, reports and records maintained by 39 the physician that relate to the physician's medical practice or medically 40 related activities.

41 (gg) Knowingly failing to disclose to a patient on a form that is 42 prescribed by the board and that is dated and signed by the patient or 43 guardian acknowledging that the patient or guardian has read and 44 understands that the doctor has a direct financial interest in a separate 45 diagnostic or treatment agency or in nonroutine goods or services that the patient is being prescribed if the prescribed treatment, goods or services are available on a competitive basis. This subdivision does not apply to a referral by one doctor of medicine to another doctor of medicine within a group of doctors of medicine practicing together.

5 (hh) Using chelation therapy in the treatment of arteriosclerosis 6 or as any other form of therapy, with the exception of treatment of heavy 7 metal poisoning, without:

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(i) Adequate informed patient consent.

9 (ii) Conforming to generally accepted experimental criteria, 10 including protocols, detailed records, periodic analysis of results and 11 periodic review by a medical peer review committee.

12 (iii) Approval by the United States food and drug administration or 13 its successor agency.

(ii) Prescribing, dispensing or administering anabolic-androgenic
 steroids to a person for other than therapeutic purposes.

16 (jj) Exhibiting a lack of or inappropriate direction, collaboration 17 or direct supervision of a medical assistant or a licensed, certified or 18 registered health care provider employed by, supervised by or assigned to 19 the physician.

20 (kk) Knowingly making a false or misleading statement to the board 21 or on a form required by the board or in a written correspondence, 22 including attachments, with the board.

23 (11) Failing to dispense drugs and devices in compliance with 24 article 6 of this chapter.

25 (mm) Committing conduct that the board determines is gross 26 negligence, repeated negligence or negligence resulting in harm to or the 27 death of a patient.

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

33 (oo) Refusing to submit to a body fluid examination or any other 34 examination known to detect the presence of alcohol or other drugs as 35 required by the board pursuant to section 32-1452 or pursuant to a board 36 investigation into a doctor of medicine's alleged substance abuse.

37 (pp) Failing to report in writing to the Arizona medical board or 38 the Arizona regulatory board of physician assistants any evidence that a 39 doctor of medicine or a physician assistant is or may be medically 40 incompetent, guilty of unprofessional conduct or mentally or physically 41 unable to safely practice medicine or to perform as a physician assistant.

42 (qq) As a physician who is the chief executive officer, the medical 43 director or the medical chief of staff of a health care institution, 44 failing to report in writing to the board that the hospital privileges of 45 a doctor of medicine have been denied, revoked, suspended, supervised or

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1 limited because of actions by the doctor OF MEDICINE that appear to show 2 that the doctor OF MEDICINE is or may be medically incompetent, is or may 3 be guilty of unprofessional conduct or is or may be unable to engage 4 safely in the practice of medicine.

5 (rr) Claiming to be a current member of the board or its staff or a 6 board medical consultant if this is not true.

7 (ss) Failing to make patient medical records in the physician's physician assistant, a nurse 8 possession promptly available to a 9 practitioner, a person licensed pursuant to this chapter or a podiatrist, chiropractor, naturopathic physician, osteopathic physician or homeopathic 10 11 physician licensed under chapter 7, 8, 14, 17 or 29 of this title on 12 receipt of proper authorization to do so from the patient, a minor 13 patient's parent, the patient's legal guardian or the patient's authorized 14 representative or failing to comply with title 12, chapter 13, 15 article 7.1.

16 (tt) Prescribing, dispensing or furnishing а prescription 17 medication or a prescription-only device as defined in section 32-1901 to 18 a person unless the licensee first conducts a physical or mental health 19 status examination of that person or has previously established a 20 doctor-patient relationship. The physical or mental health status 21 examination may be conducted through telehealth as defined in section 22 36-3601 with a clinical evaluation that is appropriate for the patient and 23 the condition with which the patient presents, unless the examination is 24 for the purpose of obtaining a written certification from the physician 25 for the purposes of title 36, chapter 28.1. This subdivision does not 26 apply to:

(i) A physician who provides temporary patient supervision on
behalf of the patient's regular treating licensed health care professional
or provides a consultation requested by the patient's regular treating
licensed health care professional.

(ii) Emergency medical situations as defined in section 41-1831.

32 (iii) Prescriptions written to prepare a patient for a medical 33 examination.

(iv) Prescriptions written or prescription medications issued for use by a county or tribal public health department for immunization programs or emergency treatment or in response to an infectious disease investigation, public health emergency, infectious disease outbreak or act of bioterrorism. For the purposes of this item, "bioterrorism" has the same meaning prescribed in section 36-781.

40 (v) Prescriptions written or antimicrobials dispensed to a contact 41 as defined in section 36-661 who is believed to have had significant 42 exposure risk as defined in section 36-661 with another person who has 43 been diagnosed with a communicable disease as defined in section 36-661 by 44 the prescribing or dispensing physician. 1 (vi) Prescriptions written or prescription medications issued for 2 administration of immunizations or vaccines listed in the United States 3 centers for disease control and prevention's recommended immunization 4 schedule to a household member of a patient.

5 (vii) Prescriptions for epinephrine auto-injectors written or 6 dispensed for a school district or charter school to be stocked for 7 emergency use pursuant to section 15-157 or for an authorized entity to be 8 stocked pursuant to section 36-2226.01.

9 (viii) Prescriptions written by a licensee through a telehealth 10 program that is covered by the policies and procedures adopted by the 11 administrator of a hospital or outpatient treatment center.

12 (ix) Prescriptions for naloxone hydrochloride or any other opioid 13 antagonist approved by the United States food and drug administration that 14 are written or dispensed for use pursuant to section 36-2228 or 36-2266.

15 (uu) Performing office based OFFICE-BASED surgery using sedation in 16 violation of board rules.

17 (vv) Practicing medicine under a false or assumed name in this 18 state.

19 Sec. 3. Section 32–1606, Arizona Revised Statutes, is amended to 20 read:

21 22 32-1606. Powers and duties of board

A. The board may:

23 1. Adopt and revise rules necessary to carry into effect this 24 chapter.

2. Publish advisory opinions regarding registered and practical
 26 nursing practice and nursing education.

27 3. Issue limited licenses or certificates if it determines that an 28 applicant or licensee cannot function safely in a specific setting or 29 within the full scope of practice.

30 4. Refer criminal violations of this chapter to the appropriate law31 enforcement agency.

5. Establish a confidential program for monitoring licensees who are chemically dependent and who enroll in rehabilitation programs that meet the criteria established by the board. The board may take further action if the licensee refuses to enter into a stipulated agreement or fails to comply with its terms. In order to protect the public health and safety, the confidentiality requirements of this paragraph do not apply if the licensee does not comply with the stipulated agreement.

6. On the applicant's or regulated party's request, establish a payment schedule with the applicant or regulated party.

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Provide education regarding board functions.
 Collect or assist in collecting workforce data.

42 8. Collect or assist in collecting workforce data.
43 9. Adopt rules to conduct pilot programs consistent with public
44 safety for innovative applications in nursing practice, education and
45 regulation.

1 10. Grant retirement status on request to retired nurses who are or 2 were licensed under this chapter, who have no open complaint or 3 investigation pending against them and who are not subject to discipline.

4 11. Accept and spend federal monies and private grants, gifts, 5 contributions and devises to assist in carrying out the purposes of this 6 chapter. These monies do not revert to the state general fund at the end 7 of the fiscal year.

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B. The board shall:

9 1. Approve regulated training and educational programs that meet 10 the requirements of this chapter and rules adopted by the board.

2. By rule, establish approval and reapproval processes for nursing
 and nursing assistant training programs that meet the requirements of this
 chapter and board rules.

3. Prepare and maintain a list of approved nursing programs to prepare registered NURSES and practical nurses whose graduates are eligible for licensing under this chapter as registered nurses or as practical nurses if they satisfy the other requirements of this chapter and board rules.

19 4. Examine qualified registered NURSE and practical nurse 20 applicants.

5. License and renew the licenses of qualified registered NURSE and practical nurse applicants and licensed nursing assistants who are not qualified to be licensed by the executive director.

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6. Adopt a seal, which the executive director shall keep.

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7. Keep a record of all proceedings.

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

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

32 10. Determine and administer appropriate disciplinary action 33 against all regulated parties who are found guilty of violating this 34 chapter or rules adopted by the board.

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

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(a) Testing and registering certified nursing assistants.

42 43 (b) Testing and licensing licensed nursing assistants.

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

44 (d) Maintaining a registry of nursing assistants for all certified45 nursing assistants and licensed nursing assistants.

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

6 13. Adopt rules that prohibit registered nurse practitioners, 7 clinical nurse specialists or certified nurse midwives from dispensing a 8 schedule II controlled substance that is an opioid, except for an 9 implantable device or an opioid that is for medication-assisted treatment 10 for substance use disorders OR AS PROVIDED IN SECTION 32-3248.03.

11 14. Adopt rules establishing educational requirements to certify 12 school nurses.

13 15. Publish copies of board rules and distribute these copies on 14 request.

15 16. Require each applicant for initial licensure or certification 16 to submit a full set of fingerprints to the board for the purpose of 17 obtaining a state and federal criminal records check pursuant to section 18 41-1750 and Public Law 92-544. The department of public safety may 19 exchange this fingerprint data with the federal bureau of investigation.

20 17. Except for a licensee who has been convicted of a felony that 21 has been designated a misdemeanor pursuant to section 13-604, revoke a 22 license of a person, revoke the multistate licensure privilege of a person pursuant to section 32-1669 or not issue a license or renewal to an 23 24 applicant who has one or more felony convictions and who has not received 25 an absolute discharge from the sentences for all felony convictions three 26 or more years before the date of filing an application pursuant to this 27 chapter.

18. Establish standards to approve and reapprove REGISTERED nurse practitioner and clinical nurse specialist programs and provide for surveys of REGISTERED nurse practitioner and clinical nurse specialist programs as it THE BOARD deems necessary.

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

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

37 21. Adopt rules to establish competency standards for obtaining and38 maintaining a license.

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

40 23. Adopt rules to approve and reapprove refresher courses for 41 nurses who are not currently practicing.

42 24. Maintain a list of approved medication assistant training 43 programs. 25. Test and certify medication assistants.
 26. Maintain a registry and disciplinary record of medication
 3 assistants who are certified pursuant to this chapter.

4 27. Adopt rules to establish the requirements for a clinical nurse 5 specialist to prescribe and dispense drugs and devices consistent with 6 section 32-1651 and within the clinical nurse specialist's population or 7 disease focus.

8 C. The board may conduct an investigation on receipt of information 9 that indicates that a person or regulated party may have violated this 10 chapter or a rule adopted pursuant to this chapter. Following the 11 investigation, the board may take disciplinary action pursuant to this 12 chapter.

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

15 E. Failure to comply with any final order of the board, including 16 an order of censure or probation, is cause for suspension or revocation of 17 a license or a certificate.

18 F. The president or a member of the board designated by the 19 president may administer oaths in transacting the business of the board.

20 Sec. 4. Section 32–1854, Arizona Revised Statutes, is amended to 21 read:

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32-1854. Definition of unprofessional conduct

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

1. Knowingly betraying a professional secret or wilfully violating 25 26 a privileged communication except as either of these may otherwise be 27 required by law. This paragraph does not prevent members of the board 28 from exchanging information with the licensing and disciplinary boards of 29 other states, territories or districts of the United States or with foreign countries or with osteopathic medical organizations located in 30 31 this state or in any state, district or territory of this country or in 32 any foreign country.

2. Committing a felony or a misdemeanor involving moral turpitude.
 In either case conviction by any court of competent jurisdiction is
 conclusive evidence of the commission of the offense.

36 3. Practicing medicine while under the influence of alcohol, a 37 dangerous drug as defined in section 13-3401, narcotic or hypnotic drugs 38 or any substance that impairs or may impair the licensee's ability to 39 safely and skillfully practice medicine.

40 4. Being diagnosed by a physician licensed under this chapter or 41 chapter 13 of this title or a psychologist licensed under chapter 19.1 of 42 this title as excessively or illegally using alcohol or a controlled 43 substance. 5. Prescribing, dispensing or administering controlled substances
 or prescription-only drugs for other than accepted therapeutic purposes.

6. Engaging in the practice of medicine in a manner that harms or may harm a patient or that the board determines falls below the community standard.

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7. Impersonating another physician.

7 8. Acting or assuming to act as a member of the board if this is 8 not true.

9 9. Procuring, renewing or attempting to procure or renew a license 10 to practice osteopathic medicine by fraud or misrepresentation.

10. Having professional connection with or lending one's name to an 12 illegal practitioner of osteopathic medicine or any of the other healing 13 arts.

14 11. Representing that a manifestly incurable disease, injury, 15 ailment or infirmity can be permanently cured or that a curable disease, 16 injury, ailment or infirmity can be cured within a stated time if this is 17 not true.

18 12. Failing to reasonably disclose and inform the patient or the 19 patient's representative of the method, device or instrumentality the 20 licensee uses to treat the patient's disease, injury, ailment or 21 infirmity.

13. Refusing to divulge to the board on demand the means, method,
device or instrumentality used to treat a disease, injury, ailment or
infirmity.

25 14. Charging a fee for services not rendered or dividing a 26 professional fee for patient referrals. This paragraph does not apply to 27 payments from a medical researcher to a physician in connection with 28 identifying and monitoring patients for clinical trial regulated by the 29 United States food and drug administration.

30 15. Knowingly making any false or fraudulent statement, written or 31 oral, in connection with the practice of medicine or when applying for or 32 renewing privileges at a health care institution or a health care program.

33

16. Advertising in a false, deceptive or misleading manner.

34 17. Representing or claiming to be an osteopathic medical 35 specialist if the physician has not satisfied the applicable requirements 36 of this chapter or board rules.

18. Having a license denied or disciplinary action taken against a license by any other state, territory, district or country, unless it can be shown that this occurred for reasons that did not relate to the person's ability to safely and skillfully practice osteopathic medicine or to any act of unprofessional conduct as provided in this section. 21

1 19. Committing any conduct or practice contrary to recognized 2 standards of ethics of the osteopathic medical profession.

20. Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate any of the provisions of this chapter.

6 21. Failing or refusing to establish and maintain adequate records 7 on a patient as follows:

8 (a) If the patient is an adult, for at least six years after the 9 last date the licensee provided the patient with medical or health care 10 services.

11 (b) If the patient is a child, either for at least three years 12 after the child's eighteenth birthday or for at least six years after the 13 last date the licensee provided that patient with medical or health care 14 services, whichever date occurs later.

15 22. Using controlled substances or prescription-only drugs unless
16 they are provided by a medical practitioner, as defined in section
17 32-1901, as part of a lawful course of treatment.

18 23. Prescribing controlled substances to members of one's immediate 19 family unless there is no other physician available within fifty miles to 20 treat a member of the family and an emergency exists.

24. Committing nontherapeutic use of injectable amphetamines.

22 25. Violating a formal order, probation or a stipulation issued by 23 the board under this chapter.

26. Charging or collecting an inappropriate fee. This paragraph 25 does not apply to a fee that is fixed in a written contract between the 26 physician and the patient and entered into before treatment begins.

27 27. Using experimental forms of therapy without adequate informed 28 patient consent or without conforming to generally accepted criteria and 29 complying with federal and state statutes and regulations governing 30 experimental therapies.

31 28. Failing to make patient medical records in the physician's 32 possession promptly available to a physician assistant, a nurse 33 practitioner, a person licensed pursuant to this chapter or a podiatrist, 34 chiropractor, naturopathic physician, physician or homeopathic physician 35 licensed under chapter 7, 8, 13, 14 or 29 of this title on receipt of 36 proper authorization to do so from the patient, a minor patient's parent, 37 the patient's legal guardian or the patient's authorized representative or 38 failing to comply with title 12, chapter 13, article 7.1.

39 29. Failing to allow properly authorized board personnel to have, 40 on presentation of a subpoena, access to any documents, reports or records 41 that are maintained by the physician and that relate to the physician's 42 medical practice or medically related activities pursuant to section 43 32-1855.01. 1

30. Signing a blank, undated or predated prescription form.

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31. Obtaining a fee by fraud, deceit or misrepresentation.

3 32. Failing to report to the board an osteopathic physician and 4 surgeon who is or may be guilty of unprofessional conduct or is or may be 5 mentally or physically unable safely to engage in the practice of 6 medicine.

7 33. Referring a patient to a diagnostic or treatment facility or 8 prescribing goods and services without disclosing that the physician has a 9 direct pecuniary interest in the facility, goods or services to which the 10 patient has been referred or prescribed. This paragraph does not apply to 11 a referral by one physician to another physician within a group of 12 physicians practicing together.

13 34. Exhibiting a lack of or inappropriate direction, collaboration 14 or supervision of a licensed, certified or registered health care provider 15 or office personnel employed by or assigned to the physician in the 16 medical care of patients.

17 35. Violating a federal law, a state law or a rule applicable to 18 the practice of medicine.

19 36. Prescribing or dispensing controlled substances or 20 prescription-only medications without establishing and maintaining 21 adequate patient records.

22 37. Dispensing a schedule II controlled substance that is an 23 opioid, except as provided in section SECTIONS 32-1871 AND 32-3248.03.

24 38. Failing to dispense drugs and devices in compliance with 25 article 4 of this chapter.

26 39. Committing any conduct or practice that endangers a patient's 27 or the public's health or may reasonably be expected to do so.

40. Committing any conduct or practice that impairs the licensee's
ability to safely and skillfully practice medicine or that may reasonably
be expected to do so.

41. With the exception of heavy metal poisoning, using chelation therapy in the treatment of arteriosclerosis or as any other form of therapy without adequate informed patient consent and without conforming d to generally accepted experimental criteria, including protocols, detailed records, periodic analysis of results and periodic review by a medical peer review committee.

42. Prescribing, dispensing or administering anabolic-androgenic
 steroids to a person for other than therapeutic purposes.

39 43. Engaging in sexual conduct with a current patient or with a 40 former patient within six months after the last medical consultation 41 unless the patient was the licensee's spouse at the time of the contact 42 or, immediately preceding the physician-patient relationship, was in a 43 dating or engagement relationship with the licensee. For the purposes of 44 this paragraph, "sexual conduct" includes: 1 (a) Engaging in or soliciting sexual relationships, whether 2 consensual or nonconsensual.

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(b) Making sexual advances, requesting sexual favors or engaging in 4 any other verbal conduct or physical conduct of a sexual nature.

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44. Committing conduct that is in violation of section 36-2302.

6 45. Committing conduct that the board determines constitutes gross 7 negligence, repeated negligence or negligence that results in harm or 8 death of a patient.

9 46. Committing conduct in the practice of medicine that evidences 10 unfitness to practice medicine.

11 47. Engaging in disruptive or abusive behavior in a professional 12 setting.

13 48. Failing to disclose to a patient that the licensee has a direct financial interest in a prescribed treatment, good or service if the 14 treatment, good or service is available on a competitive basis. This 15 16 paragraph does not apply to a referral by one licensee to another licensee 17 within a group of licensees who practice together. A licensee meets the 18 disclosure requirements of this paragraph if both of the following are 19 true:

20

(a) The licensee makes the disclosure on a form prescribed by the 21 board.

22 (b) The patient or the patient's guardian or parent acknowledges by signing the form that the licensee has disclosed the licensee's direct 23 24 financial interest.

25 Prescribing, dispensing or furnishing a prescription medication 49. 26 a prescription-only device to a person if the licensee has not or 27 conducted a physical or mental health status examination of that person or has not previously established a physician-patient relationship. The 28 29 physical or mental health status examination may be conducted through telehealth as defined in section 36-3601 with a clinical evaluation that 30 31 is appropriate for the patient and the condition with which the patient presents, unless the examination is for the purpose of obtaining a written 32 33 certification from the physician for the purposes of title 36, 34 chapter 28.1. This paragraph does not apply to:

35

(a) Emergencies.

36 (b) A licensee who provides patient care on behalf of the patient's 37 regular treating licensed health care professional or provides a 38 consultation requested by the patient's regular treating licensed health 39 care professional.

40 (c) Prescriptions written or antimicrobials dispensed to a contact 41 as defined in section 36-661 who is believed to have had significant exposure risk as defined in section 36-661 with another person who has 42 43 been diagnosed with a communicable disease as defined in section 36-661 by 44 the prescribing or dispensing physician.

1 (d) Prescriptions for epinephrine auto-injectors written or 2 dispensed for a school district or charter school to be stocked for 3 emergency use pursuant to section 15-157 or for an authorized entity to be 4 stocked pursuant to section 36-2226.01.

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(e) Prescriptions written by a licensee through a telehealth program that is covered by the policies and procedures adopted by the 6 7 administrator of a hospital or outpatient treatment center.

8 (f) Prescriptions for naloxone hydrochloride or any other opioid 9 antagonist approved by the United States food and drug administration that 10 are written or dispensed for use pursuant to section 36-2228 or 36-2266.

11 50. If a licensee provides medical care by computer, failing to 12 disclose the licensee's license number and the board's address and telephone number. 13

14 Sec. 5. Section 32-2532, Arizona Revised Statutes, is amended to 15 read:

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32-2532. Prescribing, administering and dispensing drugs; limits and requirements; notice

18 A. Except as provided in subsection F of this section, a physician 19 assistant shall not prescribe, dispense or administer:

20 1. A schedule II or schedule III controlled substance as defined in 21 the federal controlled substances act of 1970 (P.L. 91-513; 84 Stat. 1242; 22 21 United States Code section 802) without delegation by the supervising 23 physician. board approval and United States drug enforcement 24 administration registration.

25 2. A schedule IV or schedule V controlled substance as defined in 26 the federal controlled substances act of 1970 without United States drug 27 enforcement administration registration and delegation by the supervising 28 physician.

29 medication 3. Prescription-only without delegation by the 30 supervising physician.

31 4. Prescription medication intended to perform or induce an 32 abortion.

B. All prescription orders issued by a physician assistant shall 33 contain the name, address and telephone number of the physician 34 assistant. A physician assistant shall issue prescription orders for 35 36 controlled substances under the physician assistant's own United States 37 drug enforcement administration registration number.

C. If certified for prescription privileges pursuant to section 38 32-2504, subsection A, initial prescriptions for schedule II controlled 39 40 substances that are opioids are subject to the limits prescribed in 41 sections 32-3248 and 32-3248.01 if the physician assistant has been 42 delegated to prescribe schedule II controlled substances by the 43 supervising physician pursuant to this section. For each schedule IV or 44 schedule V controlled substance, the physician assistant may not prescribe 1 the controlled substance more than five times in a six-month period for 2 each patient.

D. A prescription for a schedule III controlled substance that is an opioid or benzodiazepine is not refillable without the written consent of the supervising physician.

6 E. Prescription-only drugs shall not be dispensed, prescribed or 7 refillable for a period exceeding one year.

8 F. Except in an emergency, a physician assistant may dispense 9 schedule II or schedule III controlled substances for a period of use of not to exceed seventy-two hours with board approval or any other 10 11 controlled substance for a period of use of not to exceed ninety days and 12 may administer controlled substances without board approval if it is 13 medically indicated in an emergency dealing with potential loss of life or limb or major acute traumatic pain. Notwithstanding the authority granted 14 15 in this subsection, a physician assistant may not dispense a schedule II 16 controlled substance that is an opioid, except for an implantable device 17 or an opioid that is for medication-assisted treatment for substance use 18 disorders OR AS PROVIDED IN SECTION 32-3248.03.

19 G. Except for samples provided by manufacturers, all drugs 20 dispensed by a physician assistant shall be labeled to show the name of 21 the physician assistant.

H. A physician assistant shall not obtain a drug from any source other than the supervising physician or a pharmacist. A physician assistant may receive manufacturers' samples if delegated to do so by the supervising physician.

26 I. If a physician assistant is approved by the board to prescribe, 27 administer or dispense schedule II and schedule III controlled substances, the physician assistant shall maintain an up-to-date and complete log of 28 29 all schedule II and schedule III controlled substances the physician 30 assistant administers or dispenses. The board may not grant a physician 31 assistant the authority to dispense schedule II controlled substances that 32 are opioids, except for implantable devices or opioids that are for 33 medication-assisted treatment for substance use disorders.

J. The ARIZONA REGULATORY board OF PHYSICIAN ASSISTANTS shall advise the Arizona state board of pharmacy and the United States drug enforcement administration of all physician assistants who are authorized to prescribe or dispense drugs and any modification of their authority.

38 K. The Arizona state board of pharmacy shall notify all pharmacies 39 at least quarterly of physician assistants who are authorized to prescribe 40 or dispense drugs.

1 Sec. 6. Title 32, chapter 32, article 4, Arizona Revised Statutes, 2 is amended by adding section 32-3248.03, to read: 3 32-3248.03. <u>Health professionals; hospitals; dispensing</u> controlled substances; opioids; definition 4 5 A. A HOSPITAL OR A HEALTH PROFESSIONAL WHO IS WORKING IN A HOSPITAL 6 THAT IS NOT WITHIN FIFTY MILES OF A TWENTY-FOUR-HOUR PHARMACY, WHEN 7 DISCHARGING A PATIENT WITH AN ACUTE ILLNESS OR INJURY AFTER REGULAR PHARMACY BUSINESS HOURS, MAY DISPENSE A TWELVE-HOUR SUPPLY OF A SCHEDULE 8 9 II CONTROLLED SUBSTANCE THAT IS AN OPIOID TO THE PATIENT. B. FOR THE PURPOSES OF THIS SECTION, "HEALTH PROFESSIONAL" MEANS A 10 11 PERSON WHO IS LICENSED PURSUANT TO CHAPTER 7, 13, 15, 17 OR 25 OF THIS 12 TITLE AND WHO HOLDS A VALID UNITED STATES DRUG ENFORCEMENT ADMINISTRATION 13 **REGISTRATION NUMBER.**

APPROVED BY THE GOVERNOR APRIL 12, 2023.

FILED IN THE OFFICE OF THE SECRETARY OF STATE APRIL 12, 2023.