Legislative summaries are prepared annually by the AzNA Lobbyist at the close of each legislative session. Dedicated staff and nurse volunteers work tirelessly during the session and throughout the year to advocate for our mission: Advancing the Nursing Profession and Promoting a Healthy Arizona.

The AzNA Public Policy Committee is chaired by Governmental Affairs Officer (GAO), Heather Ross PhD, DNP. The committee reviews bills during the legislative session. Committee review process: 1) Bills that address AzNA’s Public Policy Agenda are evaluated by several committee members 2) A position to support, oppose or monitor the bill is determined by the Public Policy leadership team (GAO, Chief Executive Officer, lobbyist).
Follow the progress of bills each year by accessing The Nurses List. AzNA members receive weekly updates during the legislative session via the Policy Pulse newsletter. For more information visit the Advocacy tab at www.aznurse.org

Introduction

The second session of the 55th Legislature adjourned on June 25th. At 166 days it was comparable to last year’s session but it also was longer than the last few sessions prior to 2020.

There were several bills directly impacting nursing as well as health care. Three of these were a primary focus on AzNA and our lobbying efforts. These will be described under “Major Bill Projects”. Other bills which AzNA supported and worked on which impact nursing and health care will be described under “Supported” bills. Finally, there is list of “Monitored” bills which also are of interest to nursing.

A number of contentious issues held up the budget this year and this extended the session. The debate over how to spend a $18 billion surplus was at the top of the list. Having a surplus always leads to longer sessions as legislators try to get their pet project funded or funding increased or, as in this session, to cut taxes. The Republican legislative leadership and Governor were unable to come up with a budget that would receive 16 (Senate) and 31 (House) votes from Republican legislators alone, which is what they have done in the last decade. Therefore, they reached out to Democrats and a deal was cut. This was the first bipartisan budget in years.

Of interest to nursing was the inclusion in the budget of $47.5 million per year for three years to the expand health care workforce, in particular nursing. This will be further described below.
Major Bill Projects

**HB2691 Health Care Workforce; Grant Programs**
This bill provides: 1) $15 million per year for three years to public universities and community college nursing programs to expand faculty and related items to increase enrollment of nursing students (CNA, LPN, RN and APRN); 2) $27 million per year for three years for grant program for health care institutions to expand student clinical rotations/preceptorships and new nurse transition to practice and nurse upskilling programs; 3) $500 per year for three years for stipends for preceptors for physicians, APRNs, PAs and dentists, primarily in rural and in primary care; and 4) $5 million per year for pilot program to expand entry level behavioral health training programs at Maricopa and Navajo community colleges, including student tuition and costs, and if successful to be expanded across State. The bill passed and funding was secured from both State general funds as well as American Rescue Plan Act (ARPA) funds. This culminated several years of effort by AzNA.

Activities: Lobbying efforts were led by AzNA lobbyist who worked closely with the Governor’s Office, the sponsor, Rep. Osborne, and with other health care groups and legislators in developing and drafting the bill language, testifying at hearings, and addressing concerns raised by legislators and Governor.
Outcome: Signed into Law; Chapter 330.

**SB1311 Health Care Workers; Assault; Prevention**
This bill is the culmination of 4 years effort to address the increasing problem of health care workers assaulted on the job. This has been championed by Rep. Shah for those years and he had a companion (mirror bill) this year, HB2635, and teamed up with Sen. Barto for this bill to ensure passage. The bill was scaled back to apply to hospital facilities and does not increase the penalty. With these changes it passed easily.

Activities: AzNA lobbyist worked with sponsors, Sen. Barto and Rep. Shah, and with other health care and legal interests in drafting and negotiating bill and changes to bill with various legislators and arranging testimony to ensure passage.
Outcome: Signed into Law; Chapter 190.
HB2434 Surgical Smoke Evacuation; Requirements
This bill will require hospitals and surgery centers to provide smoke evacuation additions to Bovee instruments to evacuate the extremely harmful smoke which is created during surgery and has impacted the health of nurses and other health care workers.

Activities: Lobbying efforts were led by AzNA lobbyist and working with sponsor, Rep. Shah, negotiating with hospitals and educating legislators, arranging testimony, drafting language.
Outcome: Signed into law; Chapter 57.

Other Bills We Supported

HB2098 Psychiatric Assessment; Nurse Practitioners; Reporting
This bill allows Nurse Practitioners to provide assessments of juvenile for the Juvenile Court and child welfare systems. Previously only psychiatrists could perform such assessments which are used in court dependency and correctional proceedings.

Activities: AzNA lobbyist worked closely with the bill sponsor, Rep. Cobb, and the Department of Child Services, who wished to expand the types of professionals who may provide assessments, and developed language and testified at hearing.
Outcome: Signed into Law; Chapter 122.

HB2429 Health Professional Wellness Programs; Confidentiality
This bill allows a health professional association, such as AzNA, to offer a wellness program for professionals to seek treatment such as for mental health or substance use disorder exempts their participation from subpoena to the professional’s licensing board and prohibits disclosure except under limited circumstances which are spelled out.

Activities: AzNA lobbyist worked closely with sponsor, Rep. Shah, and Az Medical Association to amend bill to expand the provisions to cover all health care professionals to the physicians which originally the bill applied.
Outcome: Signed into law; Chapter 224.
SB1272 Postpartum Care; Eligibility: Appropriations
This bill expanded AHCCCS eligibility for postpartum care from 60 days to one year and added Certified Nurse Midwives as those practitioners who may provide these services (NPs were already allowed).
Activities: AzNA lobbyist identified the issue of CNMs not listed in bill and drafted language and worked with sponsor, Sen. Pace, to add as well as lobbied other legislators to support the bill. The bill itself did not pass but it was incorporated into the budget
Outcome: Not passed but included in budget so has become law.

HB2083 AHCCCS Services; Diabetes Management
This bill adds diabetes management to the list of covered AHCCCS services. This is already covered by Medicare and commercial insurers and has shown to reduce costs by providing these services to diabetics. There as minimal cost to AHCCCS program (less than a million a year).
Activities: AzNA lobbyist worked with the sponsor, Rep. Osborne, to move the legislation through process and though it did not ultimately pass as separate bill, it was added to the budget, so the services are now covered.
Outcome: Not passed but included in budget so has become law.

SB2622 Eligibility: AHCCCS
This bill provides automatic extension of AHCCCS eligibility to foster children from ages 18-26 unless the person specifically opts out of coverage or has other health insurance coverage. Previously as foster children “aged out” they could only maintain eligibility if they affirmatively opted into coverage, and many were no aware of the option or how to do it. -party contractors were not held to the same standard.
Activities: AzNA supported the bill at hearings; monitored.
Outcome: Signed into law; Chapter 339.

SB1234 Board of Nursing; Continuation
This bill was result of the sunset process and continues the BON for 4 years, and not the usual 8-10 years extension given other licensing boards.
Activities: AzNA lobbyist testified at sunset hearing at request of the sponsor, Sen. Barto, and in other committee hearings regarding problems, such as timeliness of complaint resolution, that were identified in Auditor
General report as well as from nurse complaints. Because of degree of concern, legislators amended bill to reduce the continuation so that more monitoring can be provided.
Outcome: Signed into law; Chapter 76.

**SB1568 Health Professionals; Complaints; Investigations**
This bill provided investigation and complaint timelines, restrictions on use of anonymous complaints and written notice to the licensee requirements. The investigation timelines and other limits would have expedited the resolution of disciplinary actions.
Activities: The bill as it passed through the Senate was confusing in some sections and there was pushback from various licensing boards who argued for the need for some exceptions to requirements to assure boards did not have to arbitrarily dismiss serious and legitimate complaints. AzNA lobbyist worked with sponsor, Sen. Barto, and attorney for Board of Nursing to amend the problematic sections, however, because this impacted all boards and would require funds to be authorized in the budget to pay for additional resources, the amended bill failed to move forward in the end of session rush.
Outcome: Failed to pass.

**SB1309 Temporary Licenses; Health Professionals; Extension**
This bill extends any temporary health professional license that was granted by licensing board under Governor Order during pandemic to January, 2023. Because the temporary licenses would expire after the end of the emergency was declared, but licensing boards did not have sufficient time or information to process the licenses in normal fashion, this bill was necessary. It has emergency clause to go into effect upon signing.
Activities: This bill was originally about another subject but sponsor, Sen. Barto, agreed to let it be used as a “striker” to prevent temporary licenses from expiring at end of March 2022. Governor’s office reached out to AzNA lobbyist about the striker and requested support and testimony which was provided. Bill became effective because of emergency clause on March 25, 2022.
Outcome: Signed into law; Chapter 77.
SB1640 Nursing Assistants; Minimum Age
This bill clarifies that the minimum age for individual to enroll in CNA training and sit for the exam is 16.
Activities: The bill was developed after sponsor, Sen. Pace, had conversations with AzNA lobbyist regarding the confusion as to the age to enroll in CNA program and exam. There was nothing clear in statute or regulation although Board of Nursing allowed 16 years old to take exam and long-term care facilities hired at 16. Some schools mistakenly thought 18 was minimum age. It was determined the best way to resolve the issue was to clarify in statute. AzNA lobbyist worked on drafting, lobbying legislators and testifying.
Outcome: Signed into law; Chapter 52.

SB1637 Health Professionals; Business Entities; Interference
This bill allows health professionals to practice in any form of business entity as employee, independent contractor or owner. Case law had required professionals to be employees and in other states this has become an issue. This would prevent any interference with a business ability to allow health professionals to practice whether as employee, owner, contractor or other status.
Activities: AzNA lobbyist worked closely with sponsor Sen. Pace, to expand the bill to apply to all APRNS as it was limited to physicians originally. The sponsor, after this consultation, expanded the bill to apply to all health professionals unless other specific statutes already were applicable.
Outcome: Signed into law; Chapter 216.

Other Bills We Monitored

HB2635 Breast Implant Surgery; Informed Consent
This bill requires a surgeon, prior to breast implant surgery, to provide written information and receive informed consent from the patient regarding risks or surgery, manufacturer information, and other specific topics listed in the bill.
Activities: This bill was originally the House version of the Health Care Worker Assault bill sponsored by Rep. Shah but after the Senate version of that bill was moving, he allowed this bill to be used as a “strike everything”
amendment by Sen. Ugenti Rita for the purposes now in the bill. AzNA supported and monitored
Outcome: Signed into law; Chapter 297.

SB2431 Emergency Medical Services; Patient Transport
This bill, sponsored by Rep. Shah, after negotiations with stakeholders and amendments, requires emergency medical personnel to comply with jurisdiction’s policy on transport and to not diagnose or counsel against transport.
Activities: Monitored
Outcome: Signed into law; Chapter 274.

SB1162 Opioid Prescriptions; Intractable Pain; Exceptions
This bill expands the list of exemptions from the 90-morphine milligram equivalent (MME) limit on opioids prescriptions to include patients experiencing intractable or chronic intractable pain or receiving opioid treatment for perioperative surgical pain.
Activities: AzNA lobbyist worked with sponsor, Sen. Barto, to clarify definition of intractable pain and exceptions to 90-morphine milligram equivalent. Monitored
Outcome: Signed into law; Chapter 134

SB1639 Controlled Substances; Medical Record Integration
This bill requires vendors that provides electronic medical records services to a medical practitioners in Arizona to integrate the vendor's electronic records system with the Controlled Substances Prescription Monitoring Program's (CSPMP) central database tracking system by Dec. 32, 2026.
Activities: Monitored.
Outcome: Signed into law; Chapter 78.