



Arizona Medical Board

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DRAFT MINUTES FOR ADMINISTRATIVE JOINT LEGISLATION AND RULES COMMITTEE TELECONFERENCE MEETING

Held on Thursday, February 12, 2026
1740 W. Adams St., Phoenix, Arizona

Committee Members

Jodi A. Bain, M.A., J.D., LL.M., Chair

Katie S. Artz, M.D., M.S.

Bruce Bethancourt, M.D.

Laura Dorrell, M.S.N., R.N.

R. Screven Farmer, M.D.

Gary R. Figge, M.D.

GENERAL BUSINESS

A. CALL TO ORDER

Dr. Figge called the Committee's meeting to order at 5:05 p.m.

B. ROLL CALL

The following Committee members participated virtually: Dr. Bethancourt, Dr. Artz, Ms. Dorrell, Dr. Farmer and Dr. Figge.

The following Committee member was absent: Ms. Bain.

The following Board staff participated in the virtual meeting: Raquel Rivera, Executive Director; and Michelle Robles, Board Operations Manager. Carrie Smith, Assistant Attorney General ("AAG") was also present.

C. GENERAL CALL TO THE PUBLIC

No individuals addressed the Committee during the Public Statements.

D. APPROVAL OF MINUTES

- September 22, 2025 Administrative Joint Legislation and Rules Committee
- October 30, 2025 Administrative Joint Legislation and Rules Committee

MOTION: Dr. Bethancourt moved for adjournment.

SECOND: Dr. Artz.

VOTE: The following Committee members voted in favor of the motion: Dr. Bethancourt, Dr. Artz, Ms. Dorrell, Dr. Farmer and Dr. Figge. The following Committee member was absent: Ms. Bain.

VOTE: 5-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

E. REVIEW OF AMB ALL MEETINGS CALENDAR

Ms. Rivera noted that the 2026 AMB All Meetings calendar has been provided for the Committee's review and reference. The Biannual Joint Officers' Meeting will be on February 25th prior to the PA Board Meeting and on August 5th prior to the AMB Meeting.

F. REVIEW, DISCUSSION AND POSSIBLE RECOMMENDATION REGARDING FIVE YEAR REVIEW AND RULEMAKING CALENDAR

Ms. Rivera reported that she has not been able to add historical details to the rulemaking calendar; however, this does have important information regarding upcoming deadlines and rulemaking status. The next 5YRRs are not due until August 2027 for Article 4 – Medical Assistants and Article 1 – General Provisions.

G. UPDATE ON FIVE YEAR REVIEW

1. ARTICLE 2, LICENSURE – STATUS UPDATE REGARDING FIVE-YEAR REVIEW REPORT

Ms. Rivera reported that she submitted the 5YRR on September 26, 2025, well in advance of the extension deadline of December 29, 2025. This was considered at GRRC's November 25, 2025 study session then approved at their December 2, 2025 meeting.

H. UPDATE ON RULEMAKING

1. ARTICLE 7, OFFICE BASED SURGERY - REVIEW, DISCUSSION AND UPDATE REGARDING RULEMAKING STATUS

Ms. Rivera reported that the Article 7 rules were considered at the GRRC council meeting on November 4, 2025 and approved. The rules were provided to the Secretary of State to be published in the Administrative Register to be effective within 60 days. Ms. Rivera provided the Notice of Final Rulemaking posted to the Arizona Administrative Register on November 21, 2025. Ms. Rivera noted that the rules haven't been updated yet and the rules editor reported that the Code hasn't been released yet but is being worked on.

2. ARTICLE 2, LICENSURE -REVIEW, DISCUSSION AND CONSIDERATION OF PURSUING RULEMAKING

Ms. Rivera reported that she obtained authorization to proceed with rulemaking on November 15, 2025. Ms. Rivera provided the Draft Article 2 Notice of Proposed Rulemaking changes as described in the Article 2 5YRR. If approved by the committee, she will file the agency certificate of notice of proposed rulemaking then hold a public comment meeting in March or April. The comments related to the rule changes will come back to the committee for us to address before we move to the next step of the rulemaking process.

I. REVIEW, DISCUSSION AND CONSIDERATION OF MA SCOPE OF PRACTICE INQUIRIES AND WHETHER TO PURSUE RULEMAKING

Dr. Joe Giancola, Dr. Michael Huether and Dr. Josh Tournas participated virtually.

Ms. Rivera reported that in prior meetings, the Committee received information and requests related to scope of practice for MAs and specifically, whether MAs are authorized to administer anesthetic injections. There was discussion about the potential need for rulemaking to address this issue. At the last meeting, the Committee directed the AAG to review the questions posed by Dr. Tournas regarding the lack of prohibition of MAs administering anesthetic injections in statute and whether rulemaking was required or if the MA FAQs could be amended to include some draft language for the JLRC and stakeholder input. Ms. Rivera informed the Committee of other states that she identified and provided sample wording for consideration.

Ms. Rivera read the sample language on the FAQ for the record. Ms. Rivera noted that the citation may require some finesse by the Committee or stakeholders, but it does capture the discussion and input from the last Committee meeting.

Dr. Huether stated that the parameters are agreeable and the language is appropriate. Dr. Giancola agreed that the language is consistent with what was discussed with his anesthesia colleagues. Dr. Tournas also agreed and appreciated the background research.

Dr. Farmer inquired if clarification need to be made that this is limited to adults only.

Dr. Huether agreed that it would be adults only.

Dr. Artz inquired if the cut off age for “adults” is 18 or 13. Dr. Farmer stated that a weight and age cut off can be set.

Dr. Huether noted that he remembers discussing adults, aged 18 up, but agreed that there are some adolescents who are higher in weight who can tolerate the dose.

Dr. Farmer opined that it is more of a weight issue and since we are making changes now should include it.

Dr. Giancola noted that they discussed adults but for our general dermatology colleagues may use it on adolescents.

Dr. Bethancourt commented that just doing a biopsy will not require that amount of dosage. Dr. Farmer agreed that if it is a rare thing we can just identify an adult as age of 18 and with the rare patients the physician can inject it themselves.

Ms. Smith clarified that this is a practice recommendation and should be phrased as such and not a prohibition, and there is not rule or statute language that would support a prohibition. Ms. Smith explained that this is not a rule but something that would be added to the FAQs as a general recommendation.

Ms. Rivera noted that if the Board approves the language at the March meeting staff can update the FAQs immediately on the Board’s website.

Dr. Huether inquired about whether the language is also mentioned in the third FAQ as well.

Dr. Farmer noted that this discussion is available to the public and the Committee has come to a carefully thought out recommendation that the anesthesiologists and dermatologists have agreed on.

Ms. Smith recommended that the Committee should revise the whole document to be consistent.

Ms. Rivera stated that she and Ms. Smith can draft suggested language when taking this to the full Board.

MOTION: Dr. Farmer moved to approve the discussed modifications to the FAQs to the full Board for consideration.

SECOND: Dr. Bethancourt.

VOTE: The following Committee members voted in favor of the motion: Dr. Bethancourt, Dr. Artz, Ms. Dorrell, Dr. Farmer and Dr. Figge. The following Committee member was absent: Ms. Bain.

VOTE: 5-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

J. UPDATE REGARDING NEED FOR LEGISLATION AND DISCUSSION ON PENDING LEGISLATION

Ms. Rivera reported that the JLRC directed her to seek legislation this session to give the Board the authority to perform Committee level formal interviews and take any of the actions the full Board may take after conducting a formal interview. At this current time, we are unable to conduct Committee level formal interviews due to quorum limitations. Ms. Rivera reported that she has entered the Board’s positions on legislation as directed at last week’s Board meeting and continues to be present at hearings to discuss the Board’s concerns and make herself available to legislative staff to address their inquiries related to pending legislation. Ms. Rivera provided update on HB2687 and informed the Committee that the bill was not placed on the last committee agenda and will not be moving forward. Ms. Rivera provided an update on HB2435, noting that an amendment was filed on February 6. The amendment creates a provisional licensure pathway that would allow certain internationally trained physicians to obtain a provisional license, practice under supervision

in counties with populations under one million and automatically convert to full licensure after four years if specified conditions are met. Ms. Rivera noted that this framework may be unnecessary because the existing equivalency pathway already allows qualified international physicians to obtain full licensure following a thorough, individualized review. This would establish an automatic conversion mechanism tied primarily to time in practice rather than the level of front-end evaluation currently applied to these applicants. Additionally, the amendments allow provisional licensure without requiring certification processes that assess English language and communication competency. Ms. Rivera expressed concern about the practical implementation of the supervision requirements. Rural and underserved areas already experience physician workforce shortages, and it may be difficult to identify supervising physicians who are both available and willing to assume supervisory responsibility, particularly when supervision must occur within the same specialty. In addition, the amendments do not clearly define the level, frequency, or scope of required supervision, which may create variability in oversight and uncertainty for supervising physicians, employers, and licensees. These implementation challenges could limit the effectiveness of the provisional licensure model while creating additional administrative and compliance burdens.

Dr. Figge agreed with the expressed concerns and noted that provisional licensees may not get any additional education but will get a full license. Dr. Bethancourt agreed and noted that physicians in rural communities have expressed that they don't have time for it and asked how these individuals would get paid if they couldn't bill insurance. Dr. Figge noted that most of these rural physicians don't have hospital privileges and their patients have Medicare, Medicaid and Tricare. Otherwise, the person can't see those patients.

Ms. Rivera noted that when this went to the hearing last week, Dr. Heap was concerned about the lack of ECFMG certification. After she spoke, someone asked why is no one using this licensure pathway if it was a reasonable option. Ms. Rivera confirmed that she will keep following this bill and bring an update in March.

K. REVIEW, DISCUSSION AND UPDATE REGARDING FY27 FUNDING REQUEST

Ms. Rivera reported that the two FY27 funding requests were reviewed by OSPB and they approved our request for \$150,000 to modernize the MD and PA websites. Ms. Rivera reported that she anticipated starting this project at the end of the summer in alignment with FY27. The request for \$161,520 for three investigative aides was denied, citing a lack of data to support that additional staff would impact investigative timeframes. Ms. Rivera stated that she is confident that we can establish more specific performance metrics, productivity measures, and SMAART goals to demonstrate this need. Ms. Rivera stated that she intends to re-request this funding in FY28 with more supportive data. She is also working with the health policy advisor for the House of Representatives to see if it is possible to include the 3 investigative aide funding within the PA Compact legislation.

Dr. Figge expressed concern about the rationale for denial, in light of legislative calls for more efficient investigations and the Board's high case volume.

Ms. Rivera stated that she hasn't given up and is trying to get the funding within the PA Compact bill that is being passed.

L. DISCUSSION OF FUTURE TOPICS

Ms. Rivera stated that at a future meeting, she will bring up PIP metrics and data that need updating. Ms. Rivera noted that there will still be a dual DO Board meeting later this year.

M. ADJOURNMENT

MOTION: Dr. Bethancourt moved for adjournment.

SECOND: Ms. Dorrell.

VOTE: The following Committee members voted in favor of the motion: Dr. Bethancourt, Dr. Artz, Ms. Dorrell, Dr. Farmer and Dr. Figge. The following Committee member was absent: Ms. Bain.

VOTE: 5-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

The meeting adjourned at: 5:42 p.m.



Raquel Rivera, Executive Director

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