

## NOTICES OF PROPOSED RULEMAKING

Unless exempted by A.R.S. § 41-1005, each agency shall begin the rulemaking process by first submitting to the Secretary of State's Office a Notice of Rulemaking Docket Opening followed by a Notice of Proposed Rulemaking that contains the preamble and the full text of the rules. The Secretary of State's Office publishes each Notice in the next available issue of the *Register* according to the schedule of deadlines for *Register* publication. Under the Administrative Procedure Act (A.R.S. § 41-1001 et seq.), an agency must allow at least 30 days to elapse after the publication of the Notice of Proposed Rulemaking in the *Register* before beginning any proceedings for making, amending, or repealing any rule. (A.R.S. §§ 41-1013 and 41-1022)

### NOTICE OF PROPOSED RULEMAKING

#### TITLE 4. PROFESSIONS AND OCCUPATIONS

#### CHAPTER 19. BOARD OF NURSING

*Editor's Note: The following Notice of Proposed Rulemaking was exempt from Executive Order 2012-03 as issued by Governor Brewer. (See the text of the executive order on page 1458.)*

[R13-77]

#### PREAMBLE

- |                                    |                                 |
|------------------------------------|---------------------------------|
| <b><u>1. Sections Affected</u></b> | <b><u>Rulemaking Action</u></b> |
| R4-19-311                          | Amend                           |
- 2. The specific statutory authority for the rulemaking, including both the authorizing statutes (general) and the implementing statutes (specific):**

Authorizing statutes: A.R.S. §§ 32-1606(A)(1) and 32-1668

Implementing statutes: A.R.S. §§ 32-1668 and 32-1669
- 3. Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the proposed rule:**

Notice of Rulemaking Docket Opening: 19 A.A.R. 1455, May 31, 2013
- 4. The agency's contact person who can answer questions about the rulemaking:**

Name:	Pamela K. Randolph RN, MS, FRE Associate Director of Education and Evidence-based Regulation
Address:	4747 N. 7th St., Suite 200 Phoenix, AZ 85014
Telephone:	(602) 771-7803
Fax:	(602) 771-7888
E-mail:	prandolph@azbn.gov
- 5. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**

The Arizona State Board of Nursing (Board) is amending R4-19-311 for the sole purpose of updating the incorporation by reference from the 2008 version of model nurse licensure compact rules to the 2012 updated version of model nurse licensure compact rules. Adopting this latest version of the model rules is a condition of compact participation, which allows interstate mobility of nurses between Arizona and 23 other states. The sole change between the previous version of the model rules (2008) and the current version (2012) is that the current version extends the time a person who moves between compact party states may practice on the former home state compact license from 30 days to 90 days. This will be of benefit to nurses who relocate from another party state.
- 6. A reference to any study relevant to the rules that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rules, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

There were no relevant studies that were either relied upon or not relied upon in the Board's justification for this rule amendment.
- 7. A showing of good cause why the rules are necessary to promote a statewide interest if the rules will diminish a pre-**

**vious grant of authority of a political subdivision of this state:**

Not applicable

**8. The preliminary summary of the economic, small business, and consumer impact:**

The proposed amendment to Section R4-19-311 is not expected to have a negative economic impact on any regulated entity, the Board, or small businesses. The Arizona State Board of Nursing licenses approximately 75,000 registered nurses and 11,000 practical nurses. Of these nurses, approximately 72,000 hold compact RN or LPN licenses and approximately 11,000 hold single state only licenses. Amending this rule will allow Arizona to remain in the Nurse Licensure Compact with 23 other states. The compact allows nurses residing in Arizona who hold a compact license to practice in all compact states. Failure to amend this rule could result in loss of this privilege and subsequent economic harm to nurses. This rulemaking is actually less burdensome than the rule it is replacing because it allows nurses moving between compact party states an additional 60 days to practice on the former compact license before having to pay licensing fees for a new license in the current home state. This is expected to have an economic benefit to the licensee by delaying the payment of licensing fees. This rulemaking will also benefit the Board by reducing investigations of nurses who do not seek licensure in Arizona within 30 days of moving from a compact party state.

**9. The agency's contact person who can answer questions about the economic, small business, and consumer impact statement:**

Name: Pamela K. Randolph RN, MS, FRE  
Associate Director of Education and Evidence-based Regulation

Address: 4747 N. 7th St., Suite 200  
Phoenix, AZ 85014

Telephone: (602) 771-7803

Fax: (602) 771-7888

E-mail: prandolph@azbn.gov

Web site: azbn.gov

**10. The time, place, and nature of the proceedings to make, repeal or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rules:**

The Board will hold an oral proceeding on July 2, 2013, at 4 p.m. in the Board offices at 4747 N. 7th St., Suite 200, Phoenix, AZ 85014. The Board will accept written comments submitted to Pamela Randolph, Associate Director of Education and Evidence-based Regulation, 4747 N. 7th St., Suite 200, Phoenix, AZ 85014 until the close of record at 5 p.m., July 2, 2012.

**11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. § § 41-1052 and 41-1055 shall respond to the following question:**

There are no other matters prescribed by statute applicable to the Board or this specific class of rules

**a. Whether the rules requires a permit, whether a general permit is used and if not the reasons why a general permit is not used:**

This rulemaking does not require a permit.

**b. Whether a federal law is applicable to the subject of the rule, whether the rules is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of the federal law:**

Federal law is not applicable to the subject of the rule.

**c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:**

No analysis was submitted

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

The material incorporated by reference is the "Nurse Licensure Compact Model Rules and Regulations" as amended November 13, 2012, by National Council of State Boards of Nursing (NCSBN), 111 E. Wacker Drive, Suite 2900, Chicago, IL 60601 and is available at the Board offices. Copies may be obtained by contacting the person named in item 9. This incorporation by reference is contained in R4-19-311.

**13. The full text of the rules follows:**

Notices of Proposed Rulemaking

TITLE 4. PROFESSIONS AND OCCUPATIONS

CHAPTER 19. BOARD OF NURSING

ARTICLE 3. LICENSURE

Section

R4-19-311. Nurse Licensure Compact

ARTICLE 3. LICENSURE

**R4-19-311. Nurse Licensure Compact**

The Board shall implement A.R.S. §§ 32-1668 and 32-1669 according to the provisions of the Nurse Licensure Compact: Model Rules and Regulations for RNs and LPN/VNs, published by the National Council of State Boards of Nursing, Inc., 111 E. Wacker Dr., Suite 2900, Chicago, IL, 60601, www.ncsbn.org, ~~August 4, 2008~~ November 13, 2012, and no later amendments or editions, which is incorporated by reference and on file with the Board.

NOTICE OF PROPOSED RULEMAKING

TITLE 9. HEALTH SERVICES

CHAPTER 22. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)  
ADMINISTRATION

*Editor's Note: The following three Notices of Proposed Rulemaking were reviewed per Executive Order 2012-03 as issued by Governor Brewer. (See the text of the executive order on page 1458.) The Governor's Office authorized the notices to proceed through the rulemaking process on May 2, 2013.*

[R13-83]

PREAMBLE

**1. Article, Part, or Section Affected (as applicable) Rulemaking Action:**

R9-22-301	Reserved
R9-22-302	Reserved
R9-22-303	New Section
R9-22-703	Amend
R9-22-1407	Amend
R9-22-1501	Amend
R9-22-1910	New Section
R9-22-2007	Amend

**2. Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):**

Authorizing statute: A.R.S. § 36-2903  
Implementing statute: A.R.S. § 36-2903(A)

**3. Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the proposed rule:**

Notice of Rulemaking Docket Opening: 19 A.A.R. 1455, May 31, 2013

**4. The agency's contact person who can answer questions about the rulemaking:**

Name: Mariaelena Ugarte  
Address: AHCCCS  
Office of Administrative Legal Services  
701 E. Jefferson, Mail Drop 6200  
Phoenix, AZ 85034  
Telephone: (602) 417-4693  
Fax: (602) 253-9115  
E-mail: AHCCCSRules@azahcccs.gov

Web site: www.azahcccs.gov

**5. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**

42 CFR 435.914 requires the Administration to provide Prior Quarter (PQ) eligibility. A.R.S. § 36-2903(A) provides reimbursement responsibility for care provided during an eligibility period. Currently, the Administration is waived from providing PQ eligibility. The waiver expires December 31, 2013. The Administration will need to implement prior quarter eligibility requirements effective January 1, 2014.

**6. A reference to any study relevant to the rule that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

A study was not referenced or relied upon when implementing PQ eligibility.

**7. A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:**

Not applicable.

**8. The preliminary summary of the economic, small business, and consumer impact:**

The Administration anticipates a moderate economic impact on the implementing agency, small businesses and consumers. The increased eligibility period is estimated to cost \$13.8 million, with approximately 500,000 members affected if the Governors Medicaid proposal is approved. For SFY2014 we estimate the cost to be \$7 million since one of the goals for Health Care Reform mandatory coverage for everyone should eliminate gaps in coverage minimizing PQ eligibility.

**9. The agency's contact person who can answer questions about the economic, small business and consumer impact statement:**

Name: Mariaelena Ugarte  
Address: AHCCCS  
Office of Administrative Legal Services  
701 E. Jefferson, Mail Drop 6200  
Phoenix, AZ 85034  
Telephone: (602) 417-4693  
Fax: (602) 253-9115  
E-mail: AHCCCSRules@azahcccs.gov  
Web site: www.azahcccs.gov

**10. The time, place, and nature of the proceedings to make, amend, repeal, or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rule:**

Proposed rule language will be available on the AHCCCS web site www.azahcccs.gov the week of May 6, 2013. Please send written or email comments to the above address by the close of the comment period, 5:00 p.m., July 1, 2013.

Date: July 1, 2013  
Time: 10:00 a.m.  
Location: AHCCCS  
701 E. Jefferson  
Phoenix, AZ 85034  
Nature: Public Hearing

Date: July 1, 2013  
Time: 10:00 a.m.  
Location: ALTCS: Arizona Long-Term Care System  
1010 N. Finance Center Dr., Suite 201  
Tucson, AZ 85710  
Nature: Public Hearing

Date: July 1, 2013

Notices of Proposed Rulemaking

Time: 10:00 a.m.  
Location: 2717 N. 4th St., Suite 130  
Flagstaff, AZ 86004  
Nature: Public Hearing

**11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. §§ 41-1052 and 41-1055 shall respond to the following questions:**

No other matters have been prescribed.

**a. Whether the rule requires a permit, whether a general permit is used and if not, the reasons why a general permit is not used:**

Not applicable

**b. Whether a federal law is applicable to the subject of the rule, whether the rule is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of federal law:**

Not applicable

**c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:**

No analysis was submitted.

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

None

**13. The full text of the rules follows:**

**TITLE 9. HEALTH SERVICES**

**CHAPTER 22. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)  
ADMINISTRATION**

**ARTICLE 3. ~~REPEALED~~ GENERAL ELIGIBILITY REQUIREMENTS**

Section

R9-22-301. Reserved  
R9-22-302. Reserved  
R9-22-303. ~~Repeated~~ Prior Quarter Eligibility

**ARTICLE 5. GENERAL PROVISIONS AND STANDARDS**

Section

R9-22-502. Pre-existing Conditions

**ARTICLE 7. STANDARDS FOR PAYMENTS**

Section

R9-22-703. Payments by the Administration

**ARTICLE 14. AHCCCS MEDICAL COVERAGE FOR FAMILIES AND INDIVIDUALS**

Section

R9-22-1407. Deceased Applicants

**ARTICLE 15. AHCCCS MEDICAL COVERAGE FOR PEOPLE WHO ARE AGED, BLIND, OR DISABLED**

Section

R9-22-1501. General Information

**ARTICLE 19. FREEDOM TO WORK**

Section

R9-22-1910. ~~Repeated~~ Prior Quarter Eligibility

**ARTICLE 20. BREAST AND CERVICAL CANCER TREATMENT PROGRAM**

Section

R9-22-2007. Effective and End Date of Eligibility

**ARTICLE 3. ~~REPEALED~~ GENERAL ELIGIBILITY REQUIREMENTS**

**R9-22-301. Reserved**

**R9-22-302. Reserved**

**R9-22-303. Prior Quarter Eligibility**

- A.** Prior Quarter eligibility shall be effective no earlier than January 1, 2014. An applicant may be eligible during any of the three months prior to application if the applicant:
1. Received one or more covered services described in 9 A.A.C. 22, Article 2 and Article 12, and 9 A.A.C. 28, Article 2 during the month; and
  2. Would have qualified for Medicaid at the time services were received if the person had applied regardless whether the person was alive when the application was made.
- B.** The Prior Quarter requirements do not apply to:
1. QMB
  2. Kids Care

**ARTICLE 5. GENERAL PROVISIONS AND STANDARDS**

**R9-22-502. Pre-existing Conditions**

- A.** ~~Except as otherwise provided in Article 2 of this Chapter, a contractor shall be responsible for providing the full scope of covered services to each member from the effective date of eligibility until the termination of enrollment or transfer of the member to another contractor. A contractor shall not impose a pre-existing condition exclusion with respect to covered services.~~
- B.** No change

**ARTICLE 7. STANDARDS FOR PAYMENTS**

**R9-22-703. Payments by the Administration**

- A.** No change
- B.** No change
- C.** No change
- D.** No change
- E.** No change
- F.** No change
- G.** No change
- H.** Prior quarter reimbursement. A provider shall:
1. Bill the Administration for services provided during a prior quarter eligibility period upon verification of eligibility or upon notification from member of AHCCCS eligibility.
  2. Reimburse a member when payment has been received from the Administration for covered services during a prior quarter eligibility period. All funds paid by the member shall be reimbursed.
  3. Accept payment received by the Administration as payment in full.

**ARTICLE 14. AHCCCS MEDICAL COVERAGE FOR FAMILIES AND INDIVIDUALS**

**R9-22-1407. Deceased Applicants**

- A.** No change
- B.** The Administration or Administration's designee shall complete an eligibility determination on an application filed on behalf of a deceased applicant, ~~if the application is filed in the same month as the applicant's death.~~

**ARTICLE 15. AHCCCS MEDICAL COVERAGE FOR PEOPLE WHO ARE AGED, BLIND, OR DISABLED**

**R9-22-1501. General Information**

- A.** No change
- B.** No change
- C.** No change
- D.** No change
- E.** No change
- F.** Eligibility effective date. Eligibility is effective on the first day of the month that all eligibility requirements are met, ~~but~~

Notices of Proposed Rulemaking

~~no earlier than the month of application, including the period described under R9-22-303.~~

- G. No change
- H. No change
- I. No change
- J. No change
- K. No change
- L. No change
- M. No change

ARTICLE 19. FREEDOM TO WORK

**R9-22-1910. ~~Repealed~~ Prior Quarter Eligibility**

A person may be made eligible during a prior quarter period when applying for the Freedom to Work program, as described under Chapter 22, Article 3.

ARTICLE 20. BREAST AND CERVICAL CANCER TREATMENT PROGRAM

**R9-22-2007. Effective and End Date of Eligibility**

**A.** Eligibility is effective on the first day of the month that all eligibility requirements are met, including the period described under R9-22-303.

The effective date of eligibility is the later of:

- 1. The first day of the month in which a application is made; or
- 2. The first day of the first month the woman meets all the eligibility requirements in this Article.

**B.** No change.

NOTICE OF PROPOSED RULEMAKING

TITLE 9. HEALTH SERVICES

CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)  
ARIZONA LONG-TERM CARE SYSTEM

[R13-85]

PREAMBLE

**1. Article, Part, or Section Affected (as applicable) Rulemaking Action:**

R9-28-401.01 Amend

**2. Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the implementing statute (specific):**

Authorizing statute: A.R.S. § 36-2932

Implementing statute: A.R.S. §§ 36-2933, 36-2934

**3. Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the proposed rule:**

Notice of Rulemaking Docket Opening: 19 A.A.R. 1456, May 31, 2013

**4. The agency's contact person who can answer questions about the rulemaking:**

Name: Mariaelena Ugarte  
Address: AHCCCS  
Office of Administrative Legal Services  
701 E. Jefferson, Mail Drop 6200  
Phoenix, AZ 85034  
Telephone: (602) 417-4693  
Fax: (602) 253-9115  
E-mail: AHCCCSRules@azahcccs.gov  
Web site: www.azahcccs.gov

**5. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**

42 CFR 435.914 requires the Administration to provide Prior Quarter (PQ) eligibility. A.R.S. § 36-2903 (A) provides reimbursement responsibility for care provided during an eligibility period. Currently, the Administration is waived from providing PQ eligibility. The waiver expires December 31, 2013. The Administration will need to implement prior quarter eligibility requirements effective January 1, 2014.

**6. A reference to any study relevant to the rule that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

A study was not referenced or relied upon when implementing PQ eligibility.

**7. A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:**

Not applicable.

**8. The preliminary summary of the economic, small business, and consumer impact:**

The Administration anticipates a moderate economic impact on the implementing agency, small businesses and consumers. The increased eligibility period is estimated to cost \$13.8 million, with approximately 500,000 members in all Medicaid programs affected if the Governors Medicaid proposal is approved. For SFY2014 we estimate the cost to be \$7 million since one of the goals for Health Care Reform mandatory coverage for everyone should eliminate gaps in coverage minimizing PQ eligibility.

**9. The agency's contact person who can answer questions about the economic, small business and consumer impact statement:**

Name: Mariaelena Ugarte  
Address: AHCCCS  
Office of Administrative Legal Services  
701 E. Jefferson, Mail Drop 6200  
Phoenix, AZ 85034  
Telephone: (602) 417-4693  
Fax: (602) 253-9115  
E-mail: AHCCCSRules@azahcccs.gov  
Web site: www.azahcccs.gov

**10. The time, place, and nature of the proceedings to make, amend, repeal, or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rule:**

Proposed rule language will be available on the AHCCCS web site www.azahcccs.gov the week of May 6, 2013. Please send written or email comments to the above address by the close of the comment period, 5:00 p.m., July 1, 2013.

Date: July 1, 2013  
Time: 10:00 a.m.  
Location: AHCCCS  
701 East Jefferson  
Phoenix, AZ 85034  
Nature: Public Hearing

Date: July 1, 2013  
Time: 10:00 a.m.  
Location: ALTCS: Arizona Long-Term Care System  
1010 N. Finance Center Dr., Suite 201  
Tucson, AZ 85710  
Nature: Public Hearing

Date: July 1, 2013  
Time: 10:00 a.m.  
Location: 2717 N. 4th St. Suite 130



Notices of Proposed Rulemaking

Flagstaff, AZ 86004

Nature: Public Hearing

**11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. §§ 41-1052 and 41-1055 shall respond to the following questions:**

No other matters have been prescribed.

**a. Whether the rule requires a permit, whether a general permit is used and if not, the reasons why a general permit is not used:**

Not applicable

**b. Whether a federal law is applicable to the subject of the rule, whether the rule is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of federal law:**

Not applicable

**c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:**

No analysis was submitted.

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

None

**13. The full text of the rules follows:**

**TITLE 9. HEALTH SERVICES**

**CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)  
ARIZONA LONG-TERM CARE SYSTEM**

**ARTICLE 4. ELIGIBILITY AND ENROLLMENT**

Section

R9-28-401.01. General

**ARTICLE 4. ELIGIBILITY AND ENROLLMENT**

**R9-28-401.01. General**

A. No change

B. No change

C. No change

D. No change

E. No change

F. Eligibility effective date. Eligibility is effective the first day of the month that all eligibility requirements are met ~~but no earlier than the month of application.~~ including the period described under R9-22-303.

G. No change

H. No change

**NOTICE OF PROPOSED RULEMAKING**

**TITLE 9. HEALTH SERVICES**

**CHAPTER 29. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)  
MEDICARE COST SHARING PROGRAM**

[R13-86]

**PREAMBLE**

**1. Article, Part, or Section Affected (as applicable) Rulemaking Action:**

R9-29-210

Amend

**2. Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and the imple-**

**menting statute (specific):**

Authorizing statute: A.R.S. § 36-2972

Implementing statute: A.R.S. § 36-2972

**3. Citations to all related notices published in the Register as specified in R1-1-409(A) that pertain to the record of the proposed rule:**

Notice of Rulemaking Docket Opening: 19 A.A.R. 1457, May 31, 2013

**4. The agency's contact person who can answer questions about the rulemaking:**

Name: Mariaelena Ugarte  
Address: AHCCCS  
Office of Administrative Legal Services  
701 E. Jefferson, Mail Drop 6200  
Phoenix, AZ 85034  
Telephone: (602) 417-4693  
Fax: (602) 253-9115  
E-mail: AHCCCSRules@azahcccs.gov  
Web site: www.azahcccs.gov

**5. An agency's justification and reason why a rule should be made, amended, repealed or renumbered, to include an explanation about the rulemaking:**

42 CFR 435.914 requires the Administration to provide Prior Quarter (PQ) eligibility. A.R.S. § 36-2903(A) provides reimbursement responsibility for care provided during an eligibility period. Currently, the Administration is waived from providing PQ eligibility. The waiver expires December 31, 2013. The Administration will need to implement prior quarter eligibility requirements effective January 1, 2014.

**6. A reference to any study relevant to the rule that the agency reviewed and proposes either to rely on or not to rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:**

A study was not referenced or relied upon when implementing PQ eligibility.

**7. A showing of good cause why the rulemaking is necessary to promote a statewide interest if the rulemaking will diminish a previous grant of authority of a political subdivision of this state:**

Not applicable.

**8. The preliminary summary of the economic, small business, and consumer impact:**

The Administration anticipates a moderate economic impact on the implementing agency, small businesses and consumers. The increased eligibility period is estimated to cost \$13.8 million, with approximately 500,000 members in all Medicaid programs affected if the Governors Medicaid proposal is approved. For SFY2014 we estimate the cost to be \$7 million since one of the goals for Health Care Reform mandatory coverage for everyone should eliminate gaps in coverage minimizing PQ eligibility.

**9. The agency's contact person who can answer questions about the economic, small business and consumer impact statement:**

Name: Mariaelena Ugarte  
Address: AHCCCS  
Office of Administrative Legal Services  
701 E. Jefferson, Mail Drop 6200  
Phoenix, AZ 85034  
Telephone: (602) 417-4693  
Fax: (602) 253-9115  
E-mail: AHCCCSRules@azahcccs.gov  
Web site: www.azahcccs.gov

**10. The time, place, and nature of the proceedings to make, amend, repeal, or renumber the rule, or if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rule:**

Proposed rule language will be available on the AHCCCS web site www.azahcccs.gov the week of May 6, 2013. Please send written or email comments to the above address by the close of the comment period, 5:00 p.m., July 1, 2013.

Date: July 1, 2013

Notices of Proposed Rulemaking

Time: 10:00 a.m.  
Location: AHCCCS  
701 East Jefferson  
Phoenix, AZ 85034

Nature: Public Hearing

Date: July 1, 2013

Time: 10:00 a.m.

Location: ALTCS: Arizona Long-Term Care System  
1010 N. Finance Center Dr., Suite 201  
Tucson, AZ 85710

Nature: Public Hearing

Date: July 1, 2013

Time: 10:00 a.m.

Location: 2717 N. 4th St., Suite 130  
Flagstaff, AZ 86004

Nature: Public Hearing

**11. All agencies shall list other matters prescribed by statute applicable to the specific agency or to any specific rule or class of rules. Additionally, an agency subject to Council review under A.R.S. §§ 41-1052 and 41-1055 shall respond to the following questions:**

No other matters have been prescribed.

**a. Whether the rule requires a permit, whether a general permit is used and if not, the reasons why a general permit is not used:**

Not applicable

**b. Whether a federal law is applicable to the subject of the rule, whether the rule is more stringent than federal law and if so, citation to the statutory authority to exceed the requirements of federal law:**

Not applicable

**c. Whether a person submitted an analysis to the agency that compares the rule's impact of the competitiveness of business in this state to the impact on business in other states:**

No analysis was submitted.

**12. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:**

None

**13. The full text of the rules follows:**

**TITLE 9. HEALTH SERVICES**

**CHAPTER 29. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)  
MEDICARE COST SHARING PROGRAM**

**ARTICLE 2. ELIGIBILITY**

Section  
R9-29-210. Effective Date of Eligibility

**ARTICLE 2. ELIGIBILITY**

**R9-29-210. Effective Date of Eligibility**

**A.** QMB. The effective date of eligibility is the first day of the month following the month in which AHCCCS makes the eligibility decision.

**B.** SLMB. ~~The effective date of eligibility is the first day of the first month AHCCCS determines the person is eligible under~~

~~this Article, but no earlier than the first day of the month of application. Eligibility is effective on the first day of the month that all eligibility requirements are met, including the period described under R9-22-303.~~

- C. ~~QI-1. The effective date of eligibility is the first day of the first month AHCCCS determines the person is eligible under this Article, but no earlier than the first day of the month of application. Eligibility is effective on the first day of the month that all eligibility requirements are met, including the period described under R9-22-303 and no earlier than the first day of the current calendar year.~~ QI-1 members are entitled to receive cost sharing assistance through the end of the calendar year in which they qualified for the program.