NOTICE OF FINAL RULEMAKING TITLE 4. PROFESSIONS AND OCCUPATIONS CHAPTER 6. BOARD OF BEHAVIORAL HEALTH EXAMINERS

PREAMBLE

1. Permission to proceed with this final rulemaking was granted under A.R.S. § 41-1039(B) by the governor

<u>on:</u>

(Date) (Editor's Note: Include a copy of the written approval from the governor.)

<u>2.</u>	Article, Part, or Section Affected (as applicable)	Rulemaking Action	
	R4-6-101	Amend	
	R4-6-206	Amend	
	R4-6-210	Amend	
	R4-6-211	Amend	
	R4-6-212	Amend	
	R4-6-214	Amend	
	R4-6-216	Amend	
	R4-6-217	New Section	
	R4-6-301	Amend	
	Table 1	Amend	
	R4-6-304	Amend	
	R4-6-305	Amend	
	R4-6-306	Amend	
	R4-6-307	Amend	
	R4-6-403	Amend	
	R4-6-404	Amend	
	R4-6-501	Amend	
	R4-6-503	Amend	
	R4-6-504	Amend	
	R4-6-601	Amend	
	R4-6-603	Amend	
	R4-6-604	Amend	
	Article 7	Amend	
	R4-6-701	Amend	
	R4-6-702	Amend	
	R4-6-703	Amend	
	R4-6-704	Amend	
	R4-6-705	Amend	
	R4-6-706	Amend	
	R4-6-801	Amend	

R4-6-802		Amend
R4-6-1101		Amend
R4-6-1102		Amend
R4-6-1105		Amend
R4-6-1106	Amend	

3. <u>Citations to the agency's statutory rulemaking authority to include the authorizing statute (general) and</u> the implementing statute (specific):

Authorizing statute: A.R.S. § 32-3253(A)(1)

Implementing statute: A.R.S. §§ 32-3275, 32-3279, 32-3251, 32-3291, 32-3292, 32-3293, 32-3301, 32-3303, 32-3311, 32-3313, 32-3321, and 36-3606

4. The effective date of the rule:

This rule will be effective 60 days after a certified original and preamble are filed in the Office of the Secretary of State under A.R.S. § 41-1032(A). The effective date is (to be filled in by *Register* editor).

a. If the agency selected a date earlier than the 60-day effective date as specified in A.R.S. § 41-1032(A), include the earlier date and state the reason the agency selected the earlier effective date as provided in A.R.S. § 41-1032(A)(1) through (5):

Not applicable

b. If the agency selected a date later than the 60-day effective date as specified in A.R.S. § 41-1032(A), include the later date and state the reason the agency selected the later effective date as provided in A.R.S. § 41-1032(B):

Not applicable

5. <u>Citations to all related notices published in the *Register* as specified in R1-1-409(A) that pertain to the current record of the final rule:</u>

Notice of Rulemaking Docket Opening: 30 A.A.R. 2238, Issue Date: July 5, 2024, Issue Number: 27, File number: R24-122

Notice of Proposed Rulemaking: 31 A.A.R. 829, Issue Date: March 21, 2025, Issue Number: 12, File number: R25-28

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

Name:Tobi Zavala Title: Executive Director Address: 1740 W. Adams Street, Suite 3600, Phoenix, AZ 85007 Telephone: (602) 542-1617 Fax: (602) 364-0890 Email: tobi.zavala@azbbhe.us

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

The Board is amending rules to address issues identified in a 5YRR approved by the Council on March 3, 2020, and to make the rules consistent with statutory changes.

Under Laws 2021, Chapter 320, the legislature amended A.R.S. § 32-3251 to provided that direct client contact includes providing therapeutic or clinical care by telehealth. The legislation also added A.R.S. § 36-3606 regarding registration of out-of-state providers of telehealth services.

Under Laws 2021, Chapter 62, the legislature amended A.R.S. §§ 32-3293 (social work), 32-3301 (counseling), 32-3311 (marriage and family therapy), and 32-3321 (addiction counseling) to remove the requirement that an applicant provide evidence of indirect client hours obtained during training. The applicant must provide evidence of direct client hours and clinical supervision.

Under Laws 2024, Chapter 77, the legislature enacted A.R.S. § 32-3306, which establishes a compact to facilitate interstate practice of licensed professional counselors.

Under Laws 2024, Chapter 169, the legislature changed the term "substance abuse counseling" to "addiction counseling" and expanded the scope to include compulsive dependence on a behavior and activities known as process addictions.

Under Laws 2024, Chapter 37, the legislature amended A.R.S. § 32-2372 to require the Board to waive a renewal fee for an associate level license if the licensee has an application for independent licensure pending when a renewal application is submitted.

Under Laws 2024, Chapter 227, the legislature added Article 5.1 to A.R.S. Title 32, Chapter 33. The new article establishes a compact to facilitate the interstate practice of and regulate social workers.

The Board is also updating Article 6 to align with the requirements of the Commission on Accreditation for Marriage and Family Therapy Education, removing provisions regarding a supervised private practice from R4-6-211 and moving them to a new Section, R4-6-217, and amending R4-6-306 regarding an application for a temporary license.

8. A reference to any study relevant to the rule that the agency reviewed and either relied on or did not 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: Not applicable

9. 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

10. A summary of the economic, small business, and consumer impact:

The Board believes the rulemaking has minimal economic impact because it makes no substantive changes other than those required to be consistent with statute. The amendment to R4-6-306 clarifies when a temporary license expires.

<u>11.</u> <u>A description of any changes between the proposed rulemaking, to include supplemental notices, and the final rulemaking:</u>

Due to a clerical error, the Notice of Proposed Rulemaking was published without numbers in R4-6-215(A)(12) and (A)(13). The numbers were fees for an application for a privilege to practice as a licensed professional counselor and for a multi-state license as a social worker. Because of this error, R4-6-215 has been removed from the Notice of Final Rulemaking. The clerical error was corrected in a Notice of Supplemental Proposed Rulemaking filed with the Office of the Secretary of State on XXX.

<u>12.</u> An agency's summary of the public or stakeholder comments made about the rulemaking and the agency response to the comments:

Not applicable

13. 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:

Not applicable

<u>a.</u> Whether the rule requires a permit, whether a general permit is used and if not, the reasons why a general permit is not used:

The Board does not issue general permits. Rather, the Board issues individual licenses as required by the Board's statutes to each person that is qualified by statute (See A.R.S. §§ 32-3275, 32-3291, 32-3292, 32-3293, 32-3301, 32-3303, 32-3311, 32-3313, and 32-3321) and rule.

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:

None of the rules is more stringent than federal law. No federal law is directly applicable to the subject of any of the rules in this rulemaking.

- <u>c.</u> 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: Not applicable
- 14. A list of any incorporated by reference material as specified in A.R.S. § 41-1028 and its location in the rules:

Not applicable

15. Whether the rule was previously made, amended or repealed as an emergency rule. If so, cite the notice published in the *Register* as specified in R1-1-409(A). Also, the agency shall state where the text was changed between the emergency and the final rulemaking packages:

Not applicable

<u>16. The full text of the rules follows:</u>

TITLE 4. PROFESSIONS AND OCCUPATIONS CHAPTER 6. BOARD OF BEHAVIORAL HEALTH EXAMINERS ARTICLE 1. DEFINITIONS

Section

R4-6-101. Definitions

ARTICLE 2. GENERAL PROVISIONS

Section

- R4-6-206. Change of Name; Use of Name
- R4-6-211. Direct Supervision: Supervised Work Experience: General
- R4-6-210. Practice Limitations
- R4-6-211. Direct Supervision: Supervised Work Experience: General
- R4-6-212. Clinical Supervision Requirements
- R4-6-214. Clinical Supervisor Educational Requirements
- R4-6-216. Foreign Equivalency Determination
- R4-6-217. Supervised Private Practice as defined at R4-6-101

ARTICLE 3. LICENSURE

Section

- R4-6-301. Application for a License by Examination
- Table 1. Time Frames (in Days)
- R4-6-304. Application for a License by Endorsement: <u>Application for a License by Universal Recognition</u>; <u>Application</u> <u>for a Privilege to Practice</u>
- R4-6-305. Inactive Status
- R4-6-306. Application for a Temporary License
- R4-6-307. Approval of an Educational Program

ARTICLE 4. SOCIAL WORK

Section

- R4-6-403. Supervised Work Experience for Clinical Social Worker Licensure
- R4-6-404. Clinical Supervision for Clinical Social Worker Licensure

ARTICLE 5. COUNSELING

Section

R4-6-501. Curriculum

- R4-6-503. Supervised Work Experience for Professional Counselor Licensure
- R4-6-504. Clinical Supervision for Professional Counselor Licensure

ARTICLE 6. MARRIAGE AND FAMILY THERAPY

Section

R4-6-601. Curriculum

- R4-6-603. Supervised Work Experience for Marriage and Family Therapy Licensure
- R4-6-604. Clinical Supervision for Marriage and Family Therapy Licensure

ARTICLE 7. SUBSTANCE ABUSE ADDICTION COUNSELING

- Section
- R4-6-701. Licensed Substance Abuse Addiction Technician Curriculum
- R4-6-702. Licensed Associate Substance Abuse Addiction Counselor Curriculum
- R4-6-703. Licensed Independent Substance Abuse Addiction Counselor Curriculum
- R4-6-704. Examination
- R4-6-705. Supervised Work Experience for Substance Abuse Addiction Counselor Licensure
- R4-6-706. Clinical Supervision for Substance Abuse Addiction Counselor Licensure

ARTICLE 8. LICENSE RENEWAL AND CONTINUING EDUCATION

Section

- R4-6-801. Renewal of Licensure
- R4-6-802. Continuing Education

ARTICLE 11. DOCUMENTATION AND STANDARDS OF PRACTICE

Section

R4-6-1101. Consent for Treatment R4-6-1102. Treatment Plan R4-6-1105. Confidentiality Release of Confidential Information

R4-6-1106. Telepractice Telehealth

ARTICLE 1. DEFINITIONS

R4-6-101. Definitions

- **A.** The definitions at A.R.S. §§ 32-3251, 32-3295, and 32-3306 apply to this Chapter. Additionally, the following definitions apply to this Chapter, unless otherwise specified:
 - 1. "Applicant" means:
 - An individual requesting a license by examination, <u>endorsement, or universal recognition, a temporary</u> license, <u>privilege to practice</u>, or <u>multistate license</u> a license by endorsement by submitting a completed application packet to the Board; or
 - A regionally accredited college or university seeking Board approval of an educational program under R4-6-307; or
 - c. A clinical supervisor training provider seeking Board approval of a clinical supervisor training under R4-6-802(F).
 - "Application packet" means the required documents, forms, fees, and additional information required by the Board of an applicant.
 - 3. "ARC" means an academic review committee established by the Board under A.R.S. § 32-3261(A).
 - "Assessment" means the collection and analysis of information to determine an individual's behavioral health treatment needs.
 - 5. "ASWB" means the Association of Social Work Boards.
 - 6. "Artificial intelligence" means computer systems or a set of algorithms able to perform tasks that normally require human intelligence, such as visual perception, speech recognition, decision-making, and translation between languages.
 - 6-7. "Behavioral health entity" means any organization, agency, business, or professional practice, including a for-profit private practice, which provides assessment, diagnosis, and treatment to individuals, groups, or families for behavioral health related issues.
 - 7:8. "Behavioral health service" means the assessment, diagnosis, or treatment of an individual's behavioral health issue.
 - 8.9. "CACREP" means the Council for Accreditation of Counseling and Related Educational Programs.
 - 9-10. "Client record" means collected documentation of the behavioral health services provided to and information gathered regarding a client.
 - 10.11. "Clinical social work" means social work involving clinical assessment, diagnosis, and treatment of individuals, couples, families, and groups.
 - 41.12. "Clinical supervision" means direction or oversight provided either face to face or by videoconference virtual video or teleconference or telephone by an individual qualified to evaluate, guide, and direct all behavioral health services provided <u>and clinical documentation produced</u> by a licensee <u>who is acquiring work experience hours through direct client care</u>, to assist the licensee to develop and improve the necessary knowledge, skills, techniques, and abilities to allow the licensee to engage in the practice of behavioral health ethically, safely, and competently.
 - 12.13. "Clinical supervisor" means an <u>a qualified</u> individual who provides clinical supervision.

- 13.14. "COAMFTE" means the Commission on Accreditation for Marriage and Family Therapy Education.
- 14.15. "Clock hour" means 60 minutes of instruction, not including breaks or meals.
- 15.16. "Contemporaneous" means documentation is made within 10 business days <u>after service is provided or</u> interaction occurs.
- 16.17. "Continuing education" means training that provides an understanding of current developments, skills, procedures, or treatments related to the practice of behavioral health, as determined by the Board.
- 47.18. "Co-occurring disorder" means a combination of substance use disorder or addiction and a mental or personality disorder.
- 18.19. "CORE" means the Council on Rehabilitation Education.
- 49-20. "Counseling related coursework" means education that prepares an individual to provide behavioral health services, as determined by the ARC.
- 20.21. "CSWE" means Council on Social Work Education.
- 21:22. "Date of service" means the postmark date applied by the U.S. Postal Service to materials addressed to an applicant or licensee at the address the applicant or licensee last placed on file in writing with the Board.
- 22.23. "Day" means calendar day.
- 23.24. "Direct client contact" means the performance of therapeutic or clinical functions related to the applicant's professional practice level of psychotherapy that includes diagnosis, assessment and treatment and that may include psychoeducation for mental, emotional and behavioral disorders based primarily on verbal or nonverbal communications and intervention with, and in the presence of, one or more clients. including through the use of telehealth pursuant to title 36. chapter 36. article 1. A.R.S. § 32-3251.
- 24-25. "Direct supervision" means responsibility and oversight for all services provided by a supervisee as prescribed in R4-6-211.
- 25-26. "Disciplinary action" means any action taken by the Board against a licensee, based on a finding that the licensee engaged in unprofessional conduct, including refusing to renew a license and or suspending or revoking a license.
- 26.27. "Documentation" means written or electronic supportive evidence.
- 27-28. "Educational program" means a degree program in counseling, marriage and family therapy, social work, or substance use or addiction counseling that is:
 - a. Offered by a regionally accredited college or university, and
 - b. Not accredited by an organization or entity recognized by the Board.
- 28-29. "Electronic signature" means an electronic sound, symbol, or process that is attached to or logically associated with a record and that is executed or adopted by an individual with the intent to sign the record.
- 29:30. "Family member" means a parent, sibling, half-sibling, child, cousin, aunt, uncle, niece, nephew, grandparent, grandchild, and present and former spouse, in-law, stepchild, stepparent, foster parent, or significant other.
- 30.31. "Gross negligence" means careless or reckless disregard of established standards of practice or repeated failure to exercise the care that a reasonable practitioner would exercise within the scope of professional practice.

- 32. "Group supervision" means a clinical supervisor provides clinical supervision to two to six supervisees simultaneously.
- 31.33. "Inactive status" means the Board has granted a licensee the right to suspend behavioral health practice temporarily by postponing license renewal for a maximum of 48 months.
- 32.34. "Independent practice" means engaging in the practice of marriage and family therapy, professional counseling, social work, or substance abuse addiction counseling without direct supervision.
- 33. "Indirect client service" means training for, and the performance of, functions of an applicant's professional practice level in preparation for or on behalf of a client for whom direct client contact functions are also performed, including case consultation and receipt of clinical supervision. Indirect client service does not include the provision of psychoeducation. A.R.S. § 32-3251.
- 34.35. "Individual clinical supervision" means clinical supervision provided by a clinical supervisor to one supervisee.
- 35.36. "Informed consent for treatment" means a written document authorizing treatment of a client that:
 - a. Contains meets the requirements of R4-6-1101;.
 - b. Is dated and signed by the client or the client's legal representative, and
 - e. Beginning on July 1, 2006, is dated and signed by an authorized representative of the behavioral health entity.
- 37. "Legal name" means the government-recognized name given to an individual at birth or subsequently changed and documented by the government on the individual's birth certificate or state or federal identification.
- 36.38. "Legal representative" means an individual authorized by law to act on a client's behalf.
- <u>37.39.</u> "License" means written authorization issued by the Board that allows an individual to engage in the practice of behavioral health in Arizona.
- 38.40. "License period" means the two years between the dates on which the Board issues a license and the license expires.
- <u>39-41.</u> "NASAC" means the National Addiction Studies Accreditation Commission.
- 42. "Practice of addiction counseling:
 - a. <u>Means the professional application of general counseling theories, principles, and techniques as</u> <u>specifically adapted, based on research and clinical experience, to the specialized needs and</u> <u>characteristics of person who are experiencing an addiction that is a persistent, compulsive</u> <u>dependence on a behavior or substance, including mood-altering behaviors or activities known as</u> <u>process addictions, and related problems and to the families of those persons.</u>
 - b. Includes the following:
 - *<u>i.</u>* <u>Assessment, appraisal, and diagnosis.</u>
 - *ii.* <u>The use of psychotherapy for the purpose of evaluation, diagnosis, and treatment</u> <u>of individuals, couples, families, and groups.</u> A.R.S. § 32-3251

40:43. "Practice of behavioral health" means the practice of marriage and family therapy, <u>practice of</u> professional counseling, <u>practice of</u> social work and substance abuse <u>practice of addiction</u> counseling pursuant to this Chapter. A.R.S. § 32-3251.

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- <u>41-44</u> "Practice of marriage and family therapy" means the professional application of family systems theories, principles and techniques to treat interpersonal relationship issues and nervous, mental and emotional disorders that are cognitive, affective or behavioral. The practice of marriage and family therapy includes:
 - a. Assessment, appraisal and diagnosis.
 - b. The use of psychotherapy for the purpose of evaluation, diagnosis and treatment of individuals, couples, families and groups. A.R.S. § 32-3251.

<u>42:45.</u> "Practice of professional counseling" means the professional application of mental health, psychological and human development theories, principles and techniques to:

- a. Facilitate human development and adjustment throughout the human life span.
- b. Assess and facilitate career development.
- c. Treat interpersonal relationship issues and nervous, mental and emotional disorders that are cognitive, affective or behavioral.
- d. Manage symptoms of mental illness.
- e. Assess, appraise, evaluate, diagnose and treat individuals, couples, families and groups through the use of psychotherapy. A.R.S. § 32-3251.
- 43:46. "Practice of social work" means the professional application of social work theories, principles, methods and techniques to:
 - a. Treat mental, behavioral and emotional disorders.
 - b. Assist individuals, families_groups and communities to enhance or restore the ability to function physically, socially, emotionally, mentally and economically.
 - c. Assess, appraise, diagnose, evaluate and treat individuals, couples, families and groups through the use of psychotherapy. A.R.S. § 32-3251.
- 44. "Practice of substance abuse counseling" means the professional application of general counseling theories, principles and techniques as specifically adapted, based on research and clinical experience, to the specialized needs and characteristics of persons who are experiencing substance abuse, chemical dependency and related problems and to the families of those persons. The practice of substance abuse counseling includes the following as they relate to substance abuse and chemical dependency issues: a. Assessment, appraisal, and diagnosis.
 - b. The use of psychotherapy for the purpose of evaluation, diagnosis and treatment of individuals, couples, families and groups. A.R.S. § 32-3251.
- 45.47. "Progress note" means contemporaneous documentation of a behavioral health service provided to an individual that is dated and signed or electronically acknowledged by the licensee.
- 46.48. "Psychoeducation" means the education of a client as part of a treatment process that provides the client with information regarding mental health, emotional disorders or behavioral health." A.R.S. § 32-3251.
- **47**.<u>49.</u> "Quorum" means a majority of the members of the Board or an ARC. Vacant positions do not reduce the quorum requirement.
- 48.50. "Regionally accredited college or university" means the institution has been approved by an entity recognized by the Council for Higher Education Accreditation as a regional accrediting organization.

- 49.51. "Significant other" means an individual whose participation a client considers to be essential to the effective provision of behavioral health services to the client.
- 52. "Supervised private practice" means a master's level licensee who:
 - Owns a behavioral health entity approved by the Board;
 - b. Provides behavioral health services under direct and clinical supervision; and
 - c. Is responsible for the behavioral health services provided by the supervised

master's level licensee.

<u>a.</u>

- 50.53. "Supervised work experience" means practicing clinical social work, marriage and family therapy, professional counseling, or substance abuse addiction counseling for remuneration or on a voluntary basis under direct supervision and while receiving clinical supervision as prescribed in R4-6-212 and Articles 4 through 7.
- 51. "Telepractice" means providing behavioral health services through interactive audio, video or electronic communication that occurs between a behavioral health professional and the client, including any electronic communication for evaluation, diagnosis and treatment, including distance counseling, in a secure platform, and that meets the requirements of telemedicine pursuant to A.R.S. § 36-3602. A.R.S. § 32-3251.
- 52.54. "Treatment" means the application by a licensee of one or more therapeutic practice methods to improve, eliminate, or manage a client's behavioral health issue symptoms or disorders.
- 53.55. "Treatment goal" means the desired result or outcome of treatment.
- 54.56. "Treatment method" means the specific approach a licensee used uses to achieve a treatment goal.
- 55.57. "Treatment plan" means a description of the specific behavioral health services that a licensee will provide to a client that is documented in the client record, and meets the requirements found in R4-6-1102.
- B. For the purposes of this Chapter, notifications or communications required to be "written" or "in writing" may be transmitted or received by mail, electronic transmission, facsimile transmission, or hand delivery and may not be transmitted or received orally. Documents requiring a signature may include a written signature or electronic signature as defined in subsection (A)(28).

ARTICLE 2. GENERAL PROVISIONS

R4-6-206. Change of Name: Use of Name

- **<u>A.</u>** A licensee or an applicant shall notify the Board in writing within 30 days after the applicant's or licensee's <u>legal</u> name is changed. The applicant or licensee shall attach to the written notice:
 - 1. A copy of a legal document that establishes the name change; or
 - 2. A copy of two forms of identification, one of which includes a picture of the applicant or licensee, reflecting the changed name.
- **B.** A licensee shall practice under the licensee's legal name. The Board shall issue a license using only the legal name provided by the applicant or licensee.

R4-6-210. Practice Limitations

The following licensees shall not engage in the independent practice of behavioral health but rather, shall practice behavioral health only under direct supervision as prescribed in R4-6-211:

- 1. Licensed baccalaureate social worker,
- 2. Licensed master social worker,
- 3. Licensed associate counselor,
- 4. Licensed associate marriage and family therapist,
- 5. Licensed substance abuse addiction technician,
- 6. Licensed associate substance abuse addiction counselor, or
- 7. Temporary licensee.

R4-6-211. Direct Supervision: Supervised Work Experience: General

- A. A license licensee listed in R4-6-210 is subject to practice limitations pursuant to R4-6-210 and shall practice in an a behavioral health entity with responsibility and that is responsible for and provides clinical oversight of the behavioral health services provided by the licensee.
- B. A masters level licensee working under direct supervision who operates or manages their own entity with immediate responsibility for the behavioral health services provided by the licensee shall provide the following to the board for approval prior to providing behavioral health services:
 - 1. The name of their clinical supervisor who meets the following:
 - a. Is independently licensed by the board in the same discipline as the supervisee, and who has practiced
 as an independently licensed behavioral health professional for a minimum of two years beyond the
 supervisor's licensure date;
 - b. Is in compliance with the clinical supervisor educational requirements specified in R4-6-214;
 - e. Is not prohibited from providing clinical supervision by a board consent agreement; and
 - 2. A copy of the agreement between the clinical supervisor and supervisee demonstrating:
 - a. The supervisee and supervisor will meet individually for one hour for every 20 hours of direct client contact provided, to include an onsite meeting every 60 days;
 - Supervisee's clients will be notified of clinical supervisor's involvement in their treatment and the means to contact the supervisor;
 - e. Supervision reports will be submitted to the board every six months;
 - d. A 30 day notice is required prior to either party terminating the agreement;
 - e. The supervisor and supervisee will notify the board within 10 days of the agreement termination date; and
 - f. The supervisee will cease practicing within 60 days of the agreement termination date until such time as a subsequent agreement is provided to the board and approved.
- **C.** A licensee complying with subsection (B) shall not provide clinical oversight and responsibility for the behavioral health services of another licensee subject to the practice limitations pursuant to R4-6-210.
- **D.B.** To meet the supervised work experience requirements for licensure, direct supervision shall an applicant shall ensure the applicant's work experience:

- Meet Meets the specific supervised work experience requirements contained in Articles 4, 5, 6, and or 7, as applicable;
- Be <u>Was</u> acquired after completing the degree required for licensure and receiving certification or licensure from a state regulatory entity;
- Be <u>Was</u> acquired before January 1, 2006, if acquired as an unlicensed professional practicing under an exemption provided in A.R.S. § 32-3271;
- Involve Involves the practice of behavioral health <u>under supervision by someone employed by the same entity</u>; and
- 5. Be for a term of Occurs in no fewer than 24 months.
- **C.** To meet the supervised work experience requirements for independent licensure, an applicant shall ensure that while working under direct or clinical supervision, the applicant:
 - Does not have an ownership interest in, operate, or manage the entity with immediate responsibility for the behavioral health services provided by the applicant unless the Board has approved the applicant for supervised private practice under R4-6-217;
 - 2. Does not receive direct or clinical supervision from:
 - a. <u>A family member,</u>
 - b. An individual whose objective assessment may be limited by a relationship with the applicant; or
 - c. An individual not employed or contracted by the same behavioral health entity as the applicant unless an exemption is granted for clinical supervision under R4-6-212.01:
 - 3. Does not engage in the independent practice of behavioral health; and
 - <u>4.</u> <u>Is not directly compensated by behavioral health clients unless supervised work experience is completed in a supervised private practice as authorized in R4-6-217.</u>
- E-D. An applicant who acquired supervised work experience outside of Arizona may submit that experience for approval as it relates to the qualifications of the supervisor and the <u>behavioral health</u> entity in which the supervision was acquired. The board <u>Board</u> may accept the supervised work experience as it relates to the supervisor and the <u>behavioral health</u> entity if it the supervised work experience met the requirements of the state in which the supervised work experience occurred. Nothing in this provision shall <u>This subsection does not</u> apply to the supervision requirements set forth in R4-6-403, R4-6-503, R4-6-603 and R4-6-705.
- F.E. If the Board determines that an applicant engaged in unprofessional conduct related to services rendered provided while acquiring hours under of supervised work experience, including clinical supervision, the Board shall not accept the hours to satisfy the requirements of R4-6-403, R4-6-503, R4-6-603, or R4-6-706. Hours accrued before and after the time during which the conduct that was the subject of the finding of unprofessional conduct occurred, as determined by the Board, may be used to satisfy the requirements of R4-6-403, R4-6-603, or R4-6-403, R4-6-503, R4-6-603, or R4-6-706 so long as the hours are not the subject of an additional finding of unprofessional conduct.

R4-6-212. Clinical Supervision Requirements

- **A.** The Board shall accept hours of clinical supervision submitted by an applicant if the clinical supervision meets the requirements specified in R4-6-404, R4-6-504, R4-6-604, or R4-6-706, as applicable to the license for which application is made, and was provided by one of the following:
 - 1. A clinical social worker, professional counselor, independent marriage and family therapist, or independent substance abuse addiction counselor who:
 - a. Holds an active and unrestricted license issued by the Board, and
 - b. Has complied with the educational requirements specified in R4-6-214;
 - A mental health professional who holds an active and unrestricted license issued under A.R.S. Title 32, Chapter 19.1 as a psychologist and has complied with the educational requirements specified in R4-6-214; or
 - 3. An individual who:
 - a. Holds an active and unrestricted license to practice behavioral health,
 - b. Is providing behavioral health services in Arizona:
 - i. Under a contract or grant with the federal government under the authority of 25 U.S.C. § 5301 or § 1601-1683, or
 - ii. By appointment under 38 U.S.C. § 7402 (8-11), and
 - c. Has complied with the educational requirements specified in R4-6-214.
- **B.** Unless an exemption was is obtained under R4-6-212.01, the Board shall accept hours of clinical supervision submitted by an applicant if the clinical supervision was provided by an individual who:
 - 1. Was qualified under subsection (A), and
 - 2. Was employed by the behavioral health entity at which the applicant obtained hours of clinical supervision.
- C. The <u>Through December 31, 2026, the</u> Board shall accept hours of clinical supervision submitted by an applicant if the <u>clinical supervisor verifies the evidence of</u> clinical supervision includes <u>accurately reflects the clinical supervisor performed</u> all of the following:
 - 1. Reviewing <u>Reviewed</u> ethical and legal requirements applicable to the supervisee's practice, including unprofessional conduct as defined in A.R.S. § 32-3251;
 - Monitoring Monitored the supervisee's activities to verify the supervisee is providing services safely and competently;
 - Verifying Verified in writing that the supervisee provides clients with appropriate written notice of clinical supervision, including the means to obtain the name and telephone number of the supervisee's clinical supervisor;
 - Contemporaneously written documentation by the clinical supervisor of at least <u>Documented</u> <u>contemporaneously and in writing</u> the following for each clinical supervision session at each entity:
 - a. Date and duration of the clinical supervision session;
 - b. A detailed description of topics discussed to include themes and demonstrated skills;
 - c. Beginning on July 1, 2006, name and signature of the individual receiving clinical supervision;
 - d. Name and signature of the clinical supervisor and the date signed; and
 - e. Whether the clinical supervision occurred on a group or individual basis;

- Maintaining the <u>Retained</u> documentation of <u>the</u> clinical supervision required under subsection (C)(4) for at least seven years;
- Verifying <u>Verified</u> that clinical supervision was not acquired from a family member, as prescribed in R4-6-101(A)(29).
- 7. Conducting <u>Conducted</u> on-going compliance review of the supervisee's clinical documentation to ensure the supervisee maintains adequate written documentation;
- 8. Providing Provided instruction regarding:
 - a. Assessment,
 - b. Diagnosis,
 - c. Treatment plan development, and
 - d. Treatment;
- 9. Rating <u>Rated</u> the supervisee's overall performance as at least satisfactory, using a form approved by the Board; and
- 10. Complying Complied with the discipline-specific requirements in Articles 4 through 7 regarding clinical supervision.
- D. Beginning January 1, 2027, the Board shall accept hours of clinical supervision submitted by an applicant if the clinical supervisor verifies the evidence of clinical supervision accurately reflects the clinical supervisor performed all of the following:
 - 1. Reviewed ethical and legal requirements applicable to the supervisee's practice, including unprofessional conduct as defined at A.R.S. § 32-3251;
 - Monitored the supervisee's activities to verify the supervisee provides services ethically, safely, and competently;
 - 3. Verified in writing that the supervisee provides clients with appropriate written notice of clinical supervision, including the means to obtain the name and telephone number of the supervisee's clinical supervisor;
 - 4. Documented contemporaneously and in writing the following for each clinical supervision session at which work experience was acquired:
 - a. Date and duration of the clinical supervision session;
 - b. Detailed description of topics discussed including ethics, documentation, clinical themes, and demonstrated skills:
 - c. Name and dated signature of the individual receiving clinical supervision;
 - d. Name and dated signature of the clinical supervisor; and
 - e. Whether the clinical supervision occurred on a group or individual basis;
 - 5. Retained documentation of the clinical supervision required under subsection (D)(4) for six years or until the supervisee is independently licensed if sooner than six years:
 - 6. Documented on-going compliance review of the supervisee's clinical documentation to ensure the supervisee maintains adequate written documentation;
 - 7. Provided instruction regarding:
 - <u>a.</u> <u>Assessment,</u>
 - <u>b.</u> <u>Diagnosis.</u>

- c. Treatment plan development, and
- d. <u>Treatment;</u>
- 8. Rated the supervisee's overall performance as at least satisfactory: and
- 9. Complied with the discipline-specific requirements in Articles 4 through 7 regarding clinical supervision.

Đ.<u>E.</u> The Board shall accept hours of clinical supervision submitted by an applicant for licensure if:

- At least two hours of the clinical supervision were provided in a face to face setting during each six month period;
- 2. No more than 90 hours of the clinical supervision were provided by videoconference and telephone;
- 3.1. No more than 15 of the 90 hours of clinical supervision provided by videoconference and telephone were provided by telephone;
- The hours of clinical supervision occurred during a month or months in which the applicant provided direct client contact; and
- 4.3. Each clinical supervision session was at least 30 minutes long: and
- 4. <u>At least 10 of the clinical supervision hours involve the clinical supervisor observing the supervisee providing</u> treatment and evaluation services to a client. The clinical supervisor may conduct the observation:
 - a. In a face-to-face setting,
 - b. In a virtual videoconference setting.
 - c. By teleconference, or
 - d. By review of audio or video recordings.
- E. Effective July 1, 2006, the Board shall accept hours of clinical supervision submitted by an applicant if at least 10 of the hours involve the clinical supervisor observing the supervisee providing treatment and evaluation services to a client. The clinical supervisor may conduct the observation:
 - 1. In a face-to-face setting,
 - 2. By videoconference,
 - 3. By teleconference, or
 - 4. By review of audio or video recordings.
- **F.** The Board shall accept hours of clinical supervision submitted by an applicant from a maximum of six clinical supervisors.
- **G.** The Board shall accept hours of clinical supervision obtained by an applicant in both individual and group sessions, subject to the following restrictions:
 - 1. At least 25 of the clinical supervision hours involve individual supervision, and
 - 2. Of the minimum 100 hours of clinical supervision required for licensure, the Board may accept:
 - a. Up to 75 of the clinical supervision hours involving a group of two supervisees, and
 - b. Up to 50 of the clinical supervision hours involving a group of three to six supervisees.
- **H.** If an applicant provides evidence that a catastrophic event prohibits the applicant from obtaining documentation of clinical supervision that meets the standard specified in subsection (C), the Board may consider alternate documentation.

R4-6-214. Clinical Supervisor Educational Requirements

- A. The <u>Through December 31, 2026, the</u> Board shall consider hours of clinical supervision submitted by an applicant only if the individual who provides the clinical supervision is qualified under R4-6-212(A) and complies with the following:
 - 1. Completes one of the following:
 - At least 12 hours of training, approved by the Board and completed within the last three years, that which meets the standard specified in R4-6-802(D), addresses clinical supervision, and includes the following:
 - i. Role and responsibilities of a clinical supervisor;
 - ii. Skills in providing effective oversight of and guidance to supervisees who diagnose, create treatment plans, and treat clients;
 - iii. Supervisory methods and techniques; and
 - iv. Fair and accurate evaluation of a supervisee's ability to plan and implement clinical assessment and treatment;
 - v. Knowledge of the provision of supervised private practice as described in R4-6-217; and
 - vi. Knowledge of statutes and rules of the Arizona Department of Health Services relating to exemptions to licensure.
 - An approved clinical supervisor certification from the National Board for Certified Counselors/Center for Credentialing and Education;
 - c. A clinical supervisor certification from the International Certification and Reciprocity Consortium; or
 - d. A clinical member with an approved supervisor designation from the American Association of Marriage and Family Therapy; and
 - 2. Completes the three clock hour Clinical Supervision Tutorial on Arizona Statutes/Regulations.
- **B.** Beginning January 1, 2027, the Board shall consider hours of clinical supervision submitted by an applicant if the individual who provides the clinical supervision:
 - 1. Is qualified under R4-6-212(A); and
 - <u>Completed within the last three years a Board-approved, 12-hour live in-person or live synchronous webinar</u> training that addresses the following:
 - <u>a.</u> <u>Role and responsibilities of a clinical supervisor including Arizona eligibility requirements for providing clinical supervision:</u>
 - b. Skills necessary to provide effective oversight of and guidance to a supervisee who diagnoses, creates treatment plans, and treats clients within the supervisee's scope of competence:
 - c. Supervisory methods and techniques;
 - d. Approaches to providing evaluation of a supervisee's ability to practice ethically and competently:
 - e. Arizona work experience and clinical supervision requirements for independent licensure;
 - <u>f.</u> <u>Arizona requirements for clinical supervision documentation:</u>
 - g. <u>Arizona requirements and process for completing work experience verification and clinical</u> <u>supervision verification forms:</u>
 - h. Arizona requirements of supervised private practice as described in R4-6-217; and
 - i. Arizona exemptions to licensure as related to Arizona Department of Health Services.

- **B.C.** To continue providing clinical supervision <u>through December 31, 2026</u>, an individual qualified under subsection (A)(1)(a) shall, at least every three years, complete a minimum of nine hours of continuing training that:
 - 1. Meets the standard specified in R4-6-802(D);
 - 2. Concerns clinical supervision;
 - 3. Addresses the topics listed in subsection (A)(1)(a); and
 - 4. Includes the three clock hour Clinical Supervision Tutorial on Arizona Statutes/Regulations.
- **G.D.** To continue providing clinical supervision <u>through December 31, 2026</u>, an individual qualified under subsections (A)(1)(b) through (d) shall:
 - 1. Provide documentation that the national certification or designation was renewed before it expired, and
 - 2. Complete the Clinical Supervision Tutorial on Arizona Statutes/Regulations.
- E. The Board shall not accept hours of clinical supervision provided by an individual who fails to remain qualified by complying with subsection (C) or (D) until the individual becomes qualified again by complying with subsection (A).
- **Đ.F.** An applicant submitting hours of clinical supervision by an individual qualified by meeting the clinical supervision education requirements in effect before the effective date of this Section shall provide documentation that the clinical supervisor was compliant with the education requirements during the period of supervision.

R4-6-216. Foreign Equivalency Determination

The Board shall accept as qualification for licensure a degree from an institution of higher education in a foreign country if the degree is substantially equivalent to the educational standards required in this Chapter for professional counseling, marriage and family therapy, and substance abuse addiction counseling licensure. To enable the Board to determine whether a foreign degree is substantially equivalent to the educational standards required in this Chapter, the applicant shall, at the applicant's expense, have the a course-by-course evaluation of the foreign degree evaluated performed by an evaluation service that is a member of the National Association of Credential Evaluation Services, Inc.

- 1. Any document that is in a language other than English shall be accompanied by a translation with notarized verification of the translation's accuracy and completeness;
- 2. The translation shall be completed by an individual, other than the applicant, and demonstrates no conflict of interest; and
- 3. The individual providing the translation may be college or university language faculty, a translation service, or an American consul.

R4-6-217. Supervised Private Practice as Defined at R4-6-101

- <u>A.</u> <u>General provisions regarding supervised private practice:</u>
 - 1. A supervised private practice, the supervised licensee, and the supervised-private-practice supervisor shall be physically located in Arizona;
 - 2. A supervised licensee shall have only one supervised-private-practice supervisor at any given time;
 - 3. A supervised-private-practice supervisor shall not supervise more than five supervised private practices at any given time; and

- 4. Failure to comply fully with this Section may result in disciplinary action against both the supervised licensee and the supervised-private-practice supervisor.
- **B.** Before providing behavioral health services in a supervised private practice, as defined at R4-6-101, the supervised licensee shall provide the following to the Board for review and receive the Board's approval:
 - 1. The name of the supervised licensee's supervised-private-practice supervisor who meets the following:
 - a. Is independently licensed by the Board in the same discipline as the supervised licensee and has practiced as an independently licensed behavioral health professional for at least two years after initial licensure in Arizona or another jurisdiction;
 - b. Is in compliance with the supervised-private-practice supervisor educational requirements specified in R4-6-214; and
 - c. Is not prohibited from providing clinical supervision by a Board consent agreement;
 - 2. A copy of the agreement between the supervised-private-practice supervisor and supervised licensee demonstrating:
 - a. The supervised licensee and supervised-private-practice supervisor will meet individually:
 - i. For one hour for every 20 hours of direct client contact provided or at least one hour each month if fewer than 20 hours of direct client contact are provided in that month, and
 - ii. At the location of the supervised private practice at least once every 60 calendar days:
 - b. <u>The supervised licensee will notify clients of the supervised-private-practice supervisor's involvement in</u> the client's treatment and the means to contact the supervised-private-practice supervisor:
 - c. <u>The supervised-private-practice supervisor will submit supervision reports to the Board every six</u> <u>months:</u>
 - <u>d.</u> <u>The supervised licensee and supervised-private-practice supervisor will provide 30-days's notice to the other before terminating the agreement:</u>
 - e. <u>The supervised licensee and supervised-private-practice supervisor will notify the Board within 10 days</u> after providing the termination notice required under subsection (B)(2)(d): and
 - <u>f.</u> <u>The supervised licensee will cease providing behavioral health services within 30 days after termination</u> of the agreement unless another agreement is provided to and approved by the Board: and
 - Beginning January 1, 2026, evidence the supervised licensee completed three clock hours of training in business operations specific to behavioral health care including how to ensure the supervised private practice complies with all provisions of A.R.S. Title 32, Chapter 33.
- **C.** Supervised licensee responsibilities. A supervised licensee providing behavioral health services in a supervised private practice, as defined at R4-6-101, shall:
 - 1. Before providing any behavioral health services in the supervised private practice, submit evidence to the Board that the supervised licensee completed three clock hours of training in business operations specific to behavioral health care including how to ensure the supervised private practice complies with all provisions of A.R.S. Title 32, Chapter 33 and this Chapter;
 - 2. Not employ. contract with, provide clinical oversight of, or have any responsibility for the behavioral health services of another licensee;

3. Before Board approval of the supervised private practice, include notice in all advertising, marketing, and practice materials that clients are not being accepted; and

4. <u>After Board approval of the supervised private practice, include notice in all advertising, marketing,</u> and practice materials of the supervised-private-practice supervisor's involvement in the supervised private practice and the means to contact the supervised-private-practice supervisor.

D. <u>Supervised-private-practice supervisor responsibilities. A supervised-private-practice supervisor of a supervised private practice shall:</u>

<u>1.</u> Before providing any supervision, submit evidence to the Board that the supervised-private-practice supervisor completed three clock hours of training regarding how to supervise a supervised private practice:

2. Supervise all clinical and non-clinical aspects of the supervised private practice;

3. Regularly review the clinical and non-clinical documentation maintained by the licensed supervisee and attest to the Board that the review was thorough and the documentation complete; and

4. Submit all required reports to the Board within two weeks after the reports are due.

ARTICLE 3. LICENSURE

R4-6-301. Application for a License by Examination

An applicant for a license by examination shall <u>meet the requirements specified in A.R.S. § 32-3275 and submit a</u> completed application packet that contains the following:

- 1. A statement by the applicant certifying that all information submitted in support of the application is true and correct;
- 2. Identification of the license for which application is made;
- 3-2. The license application fee required under R4-6-215. In accordance with A.R.S. § 32-3272, the Board shall waive the application fee for an independent level license if the applicant paid the fee for an initial or renewal associate level license in this state and applies for the independent level license within 90 days after paying for the initial or renewal associate level associate level license;
- 4.3. The applicant's legal name, date of birth, social security number, and contact information;
- 5.4. Each name or alias previously or currently used by the applicant;
- 6.5. The name of each college or university the applicant attended and an official transcript for all education used to meet requirements;
- 7.6. Verification of current or previous licensure or certification from the licensing or certifying entity as follows:
 - a. Any license or certification ever held in the practice of behavioral health; and
 - b. Any professional license or certification not identified in subsection (7)(a) held in the last 10 years;
- Background information to enable the Board to determine whether, as required under A.R.S. § 32-3275(A)(3), the applicant is of good moral character;
- 9:8. A list of every entity for which the applicant has worked during the last 7 years;
- **10.**<u>9.</u> If the relevant licensing examination was previously taken, an official copy of the score the applicant obtained on the examination;
- 11.10. A report of the results of a self-query guery of the National Practitioner Data Bank;

- Documentation required under A.R.S. § 41-1080(A) showing that the applicant's presence in the U.S. is authorized under federal law;
- 43.12. A completed and legible fingerprint card for a state and federal criminal history background check and payment as prescribed under R4-6-215 if the applicant has not previously submitted a full set of fingerprints to the Board, or verification that the applicant holds a current fingerprint card issued by the Arizona Department of Public Safety; and
- 14.13. Other documents or information requested by the Board to determine the applicant's eligibility.

Type of License	Statutory Authority	Overall Time Frame	Administrative Completeness Time Frame	Substantive Review Time Frame
License by	A.R.S. § 32-3253	270	90	180
Examination	A.R.S. § 32-3275			
Temporary License	A.R.S. § 32-3253	90	30	60
	A.R.S. § 32-3279			
License by	A.R.S. § 32-3253	270	90	180
Endorsement <u>;</u>	A.R.S. § 32-3274			
License by Universal	<u>A.R.S. § 32-4302</u>			
Recognition; Privilege	<u>A.R.S. § 32-3306</u>			
to Practice; Multistate	<u>A.R.S. § 32-3295</u>			
<u>License</u>				
License Renewal	A.R.S. § 32-3253	270	90	180
	A.R.S. § 32-3273			
Application for	<u>A.R.S. § 32-3253</u>	270	<u>90</u>	<u>180</u>
registration as an	<u>A.R.S. § 36-3606</u>			
out-of-state health				
care provider of				
telehealth services				

Table 1. Time Frames (in Days)

R4-6-304. Application for a License by Endorsement: Application for a License by Universal Recognition; Application for a Privilege to Practice; Application for Multistate License

- A. License by endorsement. An applicant who meets the requirements specified under A.R.S. § 32-3274 for a license by endorsement shall submit a completed application packet, as prescribed in R4-6-301, and the following:
 - The name of one or more other jurisdictions where the applicant is certified or licensed as a behavioral health professional by a state or federal regulatory entity, and has been for at least three years <u>A statement</u> by the applicant certifying all information submitted in support of the application is true and correct;

- A verification of each certificate or license identified in subsection (1) by the state regulatory entity issuing the certificate or license that includes the following: <u>The license application fee required under R4-6-215</u>;
 - a. The certificate or license number issued to the applicant by the state regulatory entity;
 - b. The issue and expiration date of the certificate or license;
 - c. Whether the applicant has been the subject of disciplinary proceedings by a state regulatory entity; and
 - d. Whether the certificate or license is active and in good standing;
- 3. If applying at a practice level listed in A.R.S. § 32-3274(B), include: <u>The applicant's legal name, date of birth</u>, <u>social security number, and contact information</u>;
 - a. An official transcript as prescribed in R4-6-301(6); and
 - b. If applicable, a foreign degree evaluation prescribed in R4-6-216 or R4-6-401; and
- 4. Each name or alias previously or currently used by the applicant;
- 5. Verification of any current or previous licensure or certification ever held in the practice of behavioral health:
- 6. A list of every entity for which the applicant has worked during the last seven years;
- 7. <u>A report of the results of a query of the National Practitioner Data Bank</u>;
- 8. Documentation required under A.R.S. § 41-1080(A) showing the applicant's presence in the U.S. is authorized under federal law:
- 9. A complete and legible fingerprint card for a state and federal criminal history background check and payment as prescribed under R4-6-215 if the applicant has not previously submitted a full set of fingerprints to the Board, or verification that the applicant holds a current fingerprint card issued by the Arizona Department of Public Safety:
- 10. The name of all jurisdictions where the applicant is certified or licensed in the practice of behavior health by a state or federal regulatory entity and has been for at least one year:
- <u>11.</u> <u>A verification of each certificate or license identified in subsection (A)(10) by the state or federal regulatory entity issuing the certificate or license that includes the following:</u>
 - a. The certificate or license number issued to the applicant by the state or federal regulatory entity;
 - b. The issue and expiration date of the certificate or license:
 - c. Whether the applicant has been the subject of disciplinary proceedings by a state or federal regulatory entity:
 - d. Whether the certificate or license was ever surrendered to avoid discipline; and
 - e. Whether the certificate or license is active and in good standing:
- 12. If applying at a practice level listed in A.R.S. § 32-3274(B), include:
 - a. An official transcript as prescribed in R4-6-301(6); and
 - b. If applicable, a foreign degree evaluation prescribed in R4-6-216 or R4-6-401; and
- 4.13. Documentation of completion of the Arizona Statutes/Regulations Tutorial.
- **B.** License by universal recognition. An applicant who meets the requirements specified under A.R.S. § 32-4302 for a license by universal recognition shall submit:
 - 1. An application provided by the Board;

- 2. A list of all states in which the applicant is currently and has been licensed for at least one year and certification from the licensing states that the applicant's license is in good standing;
- 3. Proof of Arizona residency:
- <u>4.</u> A completed and legible fingerprint card for a state and federal criminal history background check and payment as prescribed under R4-6-215 if the applicant has not previously submitted a full set of fingerprints to the Board, or verification that the applicant holds a current fingerprint card issued by the Arizona Department of Public Safety:
- 5. The license application fee required under R4-6-215; and
- 6. Documentation of completion of the Arizona Statutes/Regulations Tutorial.
- **C.** Privilege to practice. An applicant who meets the requirements specified under A.R.S. § 32-3306, Section 4, for a privilege to practice professional counseling shall submit:
 - 1. An application provided by the Board;
 - 2. Documentation confirming the applicant notified the Commission the applicant is seeking the privilege to practice in a remote state or states;
 - 3. A list of all states in which the applicant is currently or has been licensed or granted a privilege to practice and certification from the licensing states that the applicant's license is:
 - a. An independent level license to practice counseling.
 - <u>b.</u><u>Valid,</u>
 - c. <u>Unencumbered</u>, and
 - d. Has not been restricted or encumbered within the previous two years;
 - 4. Identification of the applicant's home state:
 - 5. A completed and legible fingerprint card for a state and federal criminal history background check and payment as prescribed under R4-6-215 if the applicant has not previously submitted a full set of fingerprints to the Board, or verification that the applicant holds a current fingerprint card issued by the Arizona Department of Public Safety:
 - 6. Documentation of completion of the Arizona Statutes/Regulations Tutorial; and
 - 7. The application fee required under R4-6-215.
- D. Multi-state license. An applicant who meets the requirements specified under A.R.S. § 32-3295, Section 4, for a multistate license in social work shall submit:
 - 1. An application provided by the Board;
 - 2. Identification of the applicant's home state:
 - 3. A completed and legible fingerprint card for a state and federal criminal history background check and payment as prescribed under R4-6-215 if the applicant has not previously submitted a full set of fingerprints to the Board, or verification that the applicant holds a current fingerprint card issued by the Arizona Department of Public Safety:
 - 4. Documentation of completion of the Arizona Statutes/Regulations Tutorial; and
 - 5. The application fee required under R4-6-215.

R4-6-305. Inactive Status

- A. A licensee seeking inactive status shall submit:
 - 1. A written request to the Board before expiration of the current license, and
 - 2. The fee specified in R4-6-215 for inactive status request.
- **B.** To be placed on inactive status after license expiration, a licensee shall, within three months <u>90 days</u> after the date of license expiration, comply with subsection (A) and submit the fee specified in R4-6-215 for late request for inactive status.
- **C.** The Board shall grant a request for inactive status to a licensee upon receiving a written request for inactive status. The Board shall grant inactive status for a maximum of 24 months.
- D. The Board shall not grant a request for inactive status that is received more than three months <u>90 days</u> after license expiration.
- E. Inactive status does not change:
 - 1. The date on which the license of the inactive licensee expires, and
 - 2. The Board's ability to start or continue an investigation against the inactive licensee.
- F. To return to active status, a licensee on inactive status shall:
 - 1. Comply with all renewal requirements prescribed under R4-6-801; and
 - 2. Establish to the Board's satisfaction that the licensee is competent to practice safely and competently. To assist with determining the licensee's competence, the Board may order a mental or physical evaluation of the licensee at the licensee's expense.
- **G.** Upon a showing of good cause, the Board shall grant a written request for modification or reduction of the continuing education requirement received from a licensee on inactive status. The Board shall consider the following to show good cause:
 - 1. Illness or disability,
 - 2. Active military service, or
 - 3. Any other circumstance beyond the control of the licensee.
- H. The Board may, upon a written request filed before the expiration of the original 24 months of inactive status and for good cause, as described in subsection (G), permit an inactive licensee to remain on inactive status for one additional period not to exceed 24 months. To return to active status after being placed on a 24-month extension of inactive status, a licensee shall, comply with the requirements in subsection (F) and complete an additional 30 hours of continuing education during the 24-month extension.
- I. A licensee on inactive status shall not engage in the practice of behavioral health.

R4-6-306. Application for a Temporary License

- A. To be eligible for a temporary license, an applicant shall:
 - 1. Have applied under R4-6-301 for a license by examination or R4-6-304 for a license by endorsement,
 - 2-1. Have submitted an application for a temporary license using a form approved by the Board and paid the fee required under R4-6-215, and
 - 3.2. Be one of the following:
 - a. Applying for a license by endorsement or universal recognition;
 - b. Applying for a license by examination, not currently licensed, registered, or certified by a state

behavioral health regulatory entity, and:

- i. Within 12 months after obtaining a degree from the education program on which the applicant is relying to meet licensing requirements,
- ii. Has completed all licensure requirements except passing the required examination, and or
- iii. Has not previously taken the required examination; or
- c. Applying for a license by examination and currently licensed, registered, or certified by another state behavioral health regulatory entity.
- B. An individual is not eligible for a temporary license if the individual:
 - 1. Is the subject of a complaint pending before any state behavioral health regulatory entity,
 - 2. Has had a license or certificate to practice a health care profession suspended or revoked by any state regulatory entity,
 - 3. Has a criminal history or history of disciplinary action by a state behavioral health regulatory entity unless the Board determines the history is not of sufficient seriousness to merit disciplinary action, or
 - 4. Has been previously denied a license by the Board.
- **<u>C.</u>** The Board shall not issue a temporary license to an applicant until the Board completes a background investigation and resolves any issue identified to the Board's satisfaction.
- **G.D.** A temporary license issued to an applicant expires one year after issuance by the Board.
- **Đ.<u>E.</u>**A temporary license issued to an applicant who has not previously passed the required examination for licensure expires immediately if the temporary licensee:
 - 1. Fails to take the required examination by the expiration date of the temporary license; or
 - 2. Takes but fails Fails to pass the required examination by the expiration date of the authorization to test.
- **E.F.** A temporary licensee shall provide written notice and return the temporary license to the Board if the temporary licensee fails the required examination.
- **F.G.** An applicant who is issued a temporary license shall practice as a behavioral health professional only under direct supervision. The temporary license may contain restrictions as to time, place, and supervision that the Board deems appropriate.
- **G.H.** The Board shall issue a temporary license only in the same discipline for which application is made under subsection (A).
- **H.I.** The Board shall not extend the time of a temporary license or grant an additional temporary license based on the application submitted under subsection (A).
- **H.J.** A temporary licensee is subject to disciplinary action by the Board under A.R.S. § 32-3281. A temporary license may be summarily revoked without a hearing under A.R.S. § 32-3279(C)(4).
- J. If the Board denies a license by examination or endorsement to a temporary licensee, the temporary licensee shall return the temporary license to the Board within five days of receiving the Board's notice of the denial.
- **K.** If a temporary licensee withdraws the license application submitted under R4-6-301 for a license by examination or R4-6-304 for a license by endorsement <u>or universal recognition</u>, the temporary license expires.
- L. Work experience hours, clinical supervision hours, and continuing education hours may be accumulated while the temporary license is active.

R4-6-307. Approval of an Educational Program

- A. Under A.R.S. 32-3253(A)(14), a regionally accredited college or university with an educational program not otherwise accredited by an organization or entity recognized by the Board shall obtain the Board's approval of the educational program. To obtain the Board's approval of an the educational program. To obtain the Board's approval of an the educational program, an authorized representative of the regionally accredited college or university shall submit:
 - 1. An application, using a form approved by the Board;
 - 2. The fee prescribed under R4-6-215; and
 - 3. Documentary evidence that the educational program is consistent with the curriculum standards specified in A.R.S. Title 32, Chapter 33, and this Chapter.
- **B.** The Board shall review the application materials for administrative completeness and determine whether additional information is necessary.
 - If the application packet is incomplete, the Board shall send a written deficiency notice to the applicant specifying the missing or incomplete information. The applicant shall provide the additional information within 60 days after the deficiency notice is served.
 - 2. The applicant may obtain a 60-day extension of time to provide the deficient information by submitting a written request to the Board before expiration of the time specified in subsection (B)(1).
 - 3. If an applicant fails to provide the deficient information within the time specified in the written notice or as extended under subsection (B)(2), the Board shall administratively close the applicant's file with no recourse to appeal. To receive further consideration for approval of an educational program, an applicant whose file is administratively closed shall comply with subsection (A).
- **C.** When an application for approval of an educational program is administratively complete, the ARC shall substantively review the application packet.
 - 1. If the ARC finds that additional information is needed, the ARC shall provide a written comprehensive request for additional information to the applicant.
 - 2. The applicant shall provide the additional information within 60 days after the comprehensive request of additional information is served.
 - 3. If an applicant fails to provide the additional information within the time specified under subsection (C)(2), the Board shall administratively close the applicant's file with no recourse to appeal. To receive further consideration for approval of an educational program, an applicant whose file is administratively closed shall comply with subsection (A).
- **D.** After the ARC determines the substantive review is complete:
 - 1. If the ARC finds the applicant's educational program is eligible for approval, the ARC shall recommend to the Board that the educational program be approved.
 - 2. If the ARC finds the applicant's educational program is ineligible for approval, the ARC shall send written notice to the applicant of the finding of ineligibility with an explanation of the basis for the finding. An applicant may appeal a finding of ineligibility for educational program approval using the following procedure:
 - a. Submit to the ARC a written request for an informal review meeting within 30 days after the notice of ineligibility is served. If the applicant does not request an informal review meeting within the time

provided, the ARC shall recommend to the Board that the educational program be denied approval and the applicant's file be closed with no recourse to appeal.

- b. If the ARC receives a written request for an informal review meeting within the 30 days provided, the ARC shall schedule the informal review meeting and provide at least 30 days' notice of the informal review meeting to the applicant.
- c. At the informal review meeting, the ARC shall provide the applicant an opportunity to present additional information regarding the curriculum of the educational program.
- d. When the informal review is complete, the ARC shall make a second finding whether the educational program is eligible for approval and send written notice of the second finding to the applicant.
- e. An applicant that receives a second notice of ineligibility under subsection (D)(2)(d), may appeal the finding by submitting to the Board, within 30 days after the second notice is served, a written request for a formal administrative hearing under A.R.S. Title 41, Chapter 6, Article 10.
- f. The Board shall either refer a request for a formal administrative hearing to the Office of Administrative Hearings or schedule the hearing before the Board. If no request for a formal administrative hearing is made under subsection (D)(2)(e), the ARC shall recommend to the Board that the educational program be denied approval and the applicant's file be closed with no recourse to appeal.
- g. If a formal administrative hearing is held before the Office of Administrative Hearings, the Board shall review the findings of fact, conclusions of law, and recommendation of the Administrative Law Judge and issue an order either granting or denying approval of the educational program.
- h. If a formal administrative hearing is held before the Board, the Board shall issue findings of fact and conclusions of law and issue an order either granting or denying approval of the educational program.
- i. The Board shall send the applicant a copy of the findings of fact, conclusions of law, and order.
- **E.** The Board shall add an approved educational program to the list of approved educational programs that the Board maintains.
- F. The Board's approval of an educational program is valid for five years unless the accredited college or university makes a change to the educational program that is inconsistent with the curriculum standards specified in A.R.S. Title 32, Chapter 33, and this Chapter.
- **G.** An authorized representative of a regionally accredited college or university with a Board-approved educational program shall certify annually, using a form available from the Board, that there have been no changes to the approved educational program.
- **H.** If a regionally accredited college or university makes one of the following changes to an approved educational program, the regionally accredited college or university shall notify the Board within 60 days after making the change and request approval of the educational program change under subsection (I):
 - 1. Change to more than 25 percent of course competencies;
 - 2. Change to more than 25 percent of course learning objectives;
 - 3. Addition of a course in one of the core content areas specified in R4-6-501, R4-6-601, or R4-6-701; or
 - 4. Deletion of a course in one of the core content areas specified in R4-6-501, R4-6-601, or R4-6-701.
- I. To apply for approval of an educational program change, an authorized representative of the regionally accredited college or university shall submit:

- 1. An approved educational program change form available from the Board;
- 2. The fee prescribed under R4-6-215; and
- 3. Documentary evidence that the change to the approved educational program is consistent with the curriculum standards specified in A.R.S. Title 32, Chapter 33, and this Chapter.
- J. To maintain approved status of an educational program after five years, an authorized representative of the regionally accredited college or university shall make application under subsection (A).
- **K.** The Board shall process the materials submitted under subsections (I) and (J) using the procedure specified in subsections (B) through (D).
- L. Unless an educational program is currently approved by the Board under this Section, the regionally accredited college or university shall not represent that the educational program is Board approved in any program or marketing materials.

ARTICLE 4. SOCIAL WORK

R4-6-403. Supervised Work Experience for Clinical Social Worker Licensure

- A. An applicant for <u>licensure as a</u> clinical social worker licensure shall demonstrate completion of at least 3200 hours of supervised work experience in the practice of clinical social work in no less than 24 months. Supervised work experience in the practice of clinical social work shall include <u>of supervised work experience in the practice of clinical social work shall include of supervised work experience in the practice of clinical social work shall include <u>of supervised work experience in the practice of clinical social work that includes</u>:</u>
 - 1. At least 1600 hours of direct client contact involving the use of psychotherapy;
 - 2. No more than 400 of the 1600 hours of direct client contact are in provided by psychoeducation; and
 - 3. At least 100 hours of clinical supervision as prescribed under R4-6-212 and R4-6-404; and
 - For the purpose of licensure, no more than 1600 hours of indirect client contact related to psychotherapy services.
- **B.** For any month in which an applicant provides direct client contact, the applicant shall obtain at least one hour of clinical supervision.
- **C.** An applicant may submit more than the required 3200 <u>1600</u> hours of <u>direct client contact and 100 hours of</u> supervised work experience <u>clinical supervision</u> for consideration by the Board.
- **D.** During the period of required supervised work experience specified in subsection (A), an applicant for clinical social worker licensure shall practice behavioral health under the limitations specified in R4-6-210.
- E. There is no supervised work experience requirement for licensure as a baccalaureate or master social worker.

R4-6-404. Clinical Supervision for Clinical Social Worker Licensure

- A. An applicant for clinical social worker licensure shall demonstrate that the applicant received at least 100 hours of clinical supervision that meet the requirements specified in subsection (B) and R4-6-212 during the supervised work experience required under R4-6-403.
- **B.** The Board shall accept hours of clinical supervision for clinical social worker licensure if the hours required under subsection (A) meet the following:
 - 1. At least 50 hours are supervised by a clinical social worker licensed by the Board <u>who meets the supervisor</u> <u>education requirements under R4-6-214</u>, and

- 2. The remaining hours are supervised by an individual qualified under R4-6-212(A), or from the following behavioral health professionals who meet the educational requirements under R4-6-214:
 - <u>a.</u> <u>A licensed professional counselor:</u>
 - b. <u>A licensed clinical social worker;</u>
 - c. <u>A licensed marriage and family therapist;</u>
 - d. <u>A licensed psychologist; or</u>
 - e. An individual for whom an exemption was obtained under R4-6-212.01.
- 3. The hours are supervised by an individual for whom an exemption was obtained under R4-6-212.01.
- C. The Board shall not accept hours of clinical supervision for clinical social worker licensure provided by a substance abuse an addiction counselor.

ARTICLE 5. COUNSELING

R4-6-501. Curriculum

- **A.** An applicant for licensure as an associate or professional counselor shall have a master's or higher degree with a major emphasis in counseling from:
 - 1. A program accredited by CACREP or CORE that consists of at least 60 semester or 90 quarter credit hours, including a supervised counseling practicum as prescribed under subsection (E);
 - An educational program previously approved by the Board under A.R.S. § 32-3253(A)(14) that consists of at least 60 semester or 90 quarter credit hours, including a supervised counseling practicum as prescribed under subsection (E); or
 - A program from a regionally accredited college or university that consists of at least 60 semester or 90 quarter credit hours, meets the requirements specified in subsections (C) and (D), and includes a supervised counseling practicum as prescribed under subsection (E).
- **B.** To assist the Board to evaluate a program under subsection (A)(3), an applicant who obtained a degree from a program under subsection (A)(3) shall attach the following to the application required under R4-6-301:
 - 1. Published college or university course descriptions for the year and semester enrolled for each course submitted to meet curriculum requirements,
 - 2. Verification, using a form approved by the Board, of completing the supervised counseling practicum required under subsection (E); and
 - 3. Other documentation requested by the Board.
- **C.** The Board shall accept for licensure the curriculum from a program not accredited by CACREP or CORE if the curriculum includes at least 60 semester or 90 quarter credit hours in counseling-related coursework, of which at least three semester or 4 quarter credit hours are in each of the following eight core content areas:
 - 1. Professional orientation and ethical practice: Studies that provide a broad understanding of professional counseling ethics and legal standards, including but not limited to:
 - a. Professional roles, functions, and relationships;
 - b. Professional credentialing;
 - c. Ethical standards of professional organizations; and

- d. Application of ethical and legal considerations in counseling;
- 2. Social and cultural diversity: Studies that provide a broad understanding of the cultural context of relationships, issues, and trends in a multicultural society, including but not limited to:
 - a. Theories of multicultural counseling, and
 - b. Multicultural competencies and strategies;
- Human growth and development: Studies that provide a broad understanding of the nature and needs of individuals at all developmental stages, including but not limited to:
 - a. Theories theories of individual and family development across the life-span, and
 - b. Theories of personality development;
- Career development: Studies that provide a broad understanding of career development and related life factors, including but not limited to:
 - a. Career development theories, and
 - b. Career decision processes;
- Helping Counseling and helping relationship: Studies that provide a broad understanding of counseling processes, including but not limited to:
 - a. Counseling theories and models,
 - b. Essential interviewing and counseling skills, and
 - c. Therapeutic processes;
- Group <u>counseling and group</u> work: Studies that provide a broad understanding of group development, dynamics, counseling theories, counseling methods and skills, and other group work approaches, including but not limited to:
 - a. Principles of group dynamics,
 - b. Group leadership styles and approaches, and
 - c. Theories and methods of group counseling;
- 7. Diagnosis and treatment: Studies that provide a broad understand of diagnostic process including but not limited to:
 - a. Differential diagnosis, and
 - <u>b.</u> <u>The use of diagnostic classification systems such as the Diagnostic and Statistical Manual of</u> <u>Mental Disorders and the International Classification of Diseases:</u>
- 7.8. Assessment and testing: Studies that provide a broad understanding of individual and group approaches to assessment and evaluation, including but not limited to:
 - a. Diagnostic process including differential diagnosis and use of diagnostic classification systems such as the Diagnostic and Statistical Manual of Mental Disorders and the International Classification of Diseases,
 - b.a. Use of assessment for diagnostic and intervention planning purposes, and
 - e.b. Basic concepts of standardized and non-standardized testing; and
- 8.9. Research and program evaluation: Studies that provide a broad understanding of recognized research methods and design and basic statistical analysis, including but not limited to:
 - a. Qualitative and quantitative research methods, and

- b. Statistical methods used in conducting research and program evaluation.
- D. In evaluating the curriculum required under subsection (C), the Board shall assess whether a core content area is embedded or contained in more than one course. The applicant shall provide information the Board requires to determine whether a core content area is embedded in multiple courses. The Board shall not accept a core content area embedded in more than two courses unless the courses are succession courses. The Board shall allow subject matter in a course to qualify in only one core content area.
- **E.** The Board shall accept a supervised counseling practicum <u>and internship</u> that is part of a master's or higher degree program if the supervised counseling practicum <u>and internship</u> meets the following standards:
 - 1. Consists of at least 700 clock hours in a professional counseling setting,
 - 2. Includes at least 240 hours of direct client contact,
 - Provides an opportunity for the supervisee to perform all activities associated with employment as a professional counselor,
 - 4. Oversight of the counseling practicum is provided by a faculty member, and
 - 5. Onsite supervision is provided by an individual approved by the college or university.
- F. The Board shall require that an applicant for professional counselor licensure who received a master's or higher degree before July 1, 1989, from a program that did not include a supervised counseling practicum complete three years of post-master's or higher degree work experience in counseling under direct supervision. One year of a doctoral-clinical internship may be substituted for one year of supervised work experience.
- **G.** The Board shall accept for licensure only courses that the applicant completed with a passing grade.
- **H.** The Board shall deem an applicant to meet the curriculum requirements for professional counselor licensure if the applicant:
 - 1. Holds an active and in good standing associate counselor license issued by the Board; and
 - Met the curriculum requirements with <u>Has</u> a master's degree in a behavioral health field from a regionally accredited university when the associate counselor license was issued.

R4-6-503. Supervised Work Experience for Professional Counselor Licensure

- A. An applicant for <u>licensure as a</u> professional counselor licensure shall demonstrate completion of at least 3200 hours of supervised work experience in the practice of professional counseling in no less than 24 months. The applicant shall ensure that the <u>of</u> supervised work experience <u>in the practice of professional counseling that</u> includes:
 - 1. At least 1600 hours of direct client contact involving the use of psychotherapy;
 - 2. No more than 400 of the 1600 hours of direct client contact are in psychoeducation; and
 - 3. At least 100 hours of clinical supervision as prescribed under R4-6-212 and R4-6-504; and
 - 4. For the purpose of licensure, no more than 1600 hours of indirect client contact related to psychotherapy services.
- **B.** For any month in which an applicant provides direct client contact, the applicant shall obtain at least one hour of clinical supervision.
- **C.** An applicant may submit more than the required 3200 hours of supervised work experience for consideration by the Board.

- **D.** During the period of supervised work experience specified in subsection (A), an applicant for professional counselor licensure shall practice behavioral health under the limitations specified in R4-6-210.
- E. There is no supervised work experience requirement for licensure as an associate counselor.

R4-6-504. Clinical Supervision for Professional Counselor Licensure

- A. An applicant for professional counselor licensure shall demonstrate that the applicant received at least 100 hours of clinical supervision that meet the requirements specified in subsection (B) and R4-6-212 during the supervised work experience required under R4-6-503.
- **B.** The Board shall accept hours of clinical supervision for professional counselor licensure from the following behavioral health professionals who meet the educational requirements under R4-6-214:
 - 1. A licensed professional counselor;
 - 2. A licensed clinical social worker;
 - 3. A licensed marriage and family therapist;
 - 4. A licensed psychologist; or
 - 5. An individual for whom an exemption was obtained under R4-6-212.01.
- **C.** The Board shall not accept hours of clinical supervision provided by a substance abuse an addiction counselor for professional counselor licensure.

ARTICLE 6. MARRIAGE AND FAMILY THERAPY

R4-6-601. Curriculum

- **A.** An applicant for licensure as an associate marriage and family therapist or a marriage and family therapist shall have a master's or higher degree from a regionally accredited college or university in a behavioral health science program that:
 - 1. Is accredited by COAMFTE;
 - 2. Was previously approved by the Board under A.R.S. § 32-3253(A)(14); or
 - Includes at least three semester or four quarter credit hours in each of the number of courses specified in the six core content areas listed in subsection (B).
- **B.** A <u>Through December 31, 2029, a</u> program under subsection (A)(3) shall include:
 - 1. Marriage and family studies: Three courses from a family systems theory orientation that collectively contain at minimum the following elements:
 - a. Introductory family systems theory;
 - b. Family development;
 - c. Family systems, including marital, sibling, and individual subsystems; and
 - d. Gender and cultural issues;
 - 2. Marriage and family therapy: Three courses that collectively contain at <u>a</u> minimum the following elements:
 - a. Advanced family systems theory and interventions;
 - b. Major systemic marriage and family therapy treatment approaches;
 - c. Communications; and
 - d. Sex therapy;

- 3. Human development: Three courses that may integrate family systems theory that collectively contain at minimum the following elements:
 - a. Normal and abnormal human development;
 - b. Human sexuality; and
 - c. Psychopathology and abnormal behavior;
- 4. Professional studies: One course including at minimum:
 - a. Professional ethics as a therapist, including legal and ethical responsibilities and liabilities; and
 - b. Family law;
- 5. Research: One course in research design, methodology, and statistics in behavioral health science; and
- Supervised practicum: Two courses that supplement the practical experience gained under subsection (D)(<u>F</u>).
- C. Beginning January 1, 2030, a program under subsection (A)(3) shall include:
 - <u>1.</u> Foundations of relational/systemic practice, theories, and models: Two courses that collectively contain at a minimum the following elements:
 - a. <u>Historical development of the MFT relational/systemic philosophy:</u>
 - b. Contemporary conceptual foundations of MFT; and
 - c. Evidence-based practice and the biopsychosocial framework;
 - <u>Clinical treatment with individuals, couples, and families: Two courses that collectively contain at a minimum</u> the following elements:
 - a. Developing competencies in treatment approaches designed for use with a wide range of diverse individuals, couples, and families (i.e. same-sex couples and interfaith couples, and young children, adolescents, and the elderly);
 - b. Crisis and trauma intervention:
 - c. Sex therapy; and
 - d. Evidenced-based practice:
 - 3. Biopsychosocial health and development across the life span: One course including at a minimum individual and family development, human sexuality, and biopsychosocial health across the life span;
 - 4. Professional identity, law, ethics, and social responsibility: One course including at a minimum:
 - a. Development of a MFT identity and socialization:
 - b. Ethics in MFT practice, including understanding and applying the AAMFT Code of Ethics; and
 - c. Understanding legal responsibilities:
 - 5. Research and evaluation: One course in research and evaluation methods and evidence based practice;
 - 6. Systemic or relational assessment and mental health diagnosis and treatment: One course including at a minimum:
 - a. Understanding the traditional psycho-diagnostic categories:
 - b. Understanding psychopathology;
 - c. Assessing, diagnosing, and treating major mental health issues;
 - <u>d.</u> <u>Using a MFT relational or systemic philosophy to address common presenting problems including</u> addiction, suicide, trauma, abuse, and intro-familial violence; and

e. Providing therapy for individuals, couples, and families managing acute chronic medical conditions; and

- 7. Supervised practicum: Two courses that supplement the practical experience gained under subsection (F).
- **D.** Beginning January 1, 2030, in addition to the core content areas specified in subsection (C), a MFT curriculum shall include the following. There is no minimum course requirement for these areas:
 - <u>Contemporary issues in MFT: Developing awareness of emerging or evolving challenges, problems, or</u> recent developments at the interface of MFT knowledge and practice and the broader local, regional, and global context;
 - <u>Community intersections and collaboration: Practicing within defined contexts such as healthcare settings</u>, schools, military settings, and private practice or nontraditional MFT practice using therapeutic competencies;
 - 3. Telehealth practice: Developing competencies required to comply with R4-6-1106; and
 - 4. Diverse, multicultural, and underserved communities:
 - a. <u>Understanding and applying knowledge of diversity, power, privilege, and oppression as these</u> relate to race. age. gender. ethnicity. sexual orientation, gender identity. socioeconomic status. disability. health status, religion, spiritual beliefs, nation of origin, or other relevant social identities;
 - b. Practicing with diverse, international, multicultural, marginalized, or underserved communities:
 - c. Developing competencies in working with sexual and gender minorities and their families; and
 - d. Developing and implementing anti-racist practices.
- **G.E.** In evaluating the curriculum required under subsection subsections (B) and (C), the Board shall assess whether a core content area is embedded or contained in more than one course. The applicant shall provide information the Board requires to determine whether a core content area is embedded in multiple courses. The Board shall not accept a core content area embedded in more than two courses unless the courses are succession courses. The Board shall allow subject matter in a course to qualify in only one core content area.

Đ.F. A program's supervised practicum shall meet the following standards:

- Provides an opportunity for the enrolled student to provide marriage and family therapy services to individuals, couples, and families, or other systems in an educational or professional setting under the direction of a faculty member or supervisor designated by the college or university;
- 2. Occurs over a minimum of two semesters of clinical practice:
- 2.3. Includes at least 300 client-contact hours, 100 of which are relational hours, provided under direct supervision; and
- 3.4. Has supervision provided by a designated licensed marriage and family therapist Includes clinical supervision provided by an AAMFT-approved supervisor or an LMFT licensed by the Board.
- **E.G.** An applicant may submit a written request to the ARC for an exemption from the requirement specified in subsection (D)(3) (<u>F)(4</u>). The request shall include the name of the behavioral health professional proposed by the applicant to act as supervisor of the practicum, a copy of the proposed supervisor's transcript and curriculum vitae, and any additional documentation requested by the ARC. The ARC shall grant the exemption if the ARC determines the proposed supervisor is qualified by education, experience, and training to provide supervision.

- **F.G.** The Board shall deem an applicant to meet the curriculum requirements for marriage and family therapist licensure if the applicant:
 - Holds an active and in good standing associate marriage and family therapist license issued by the Board; and
 - 2. Met the curriculum requirements with a master's degree in a behavioral health field from a regionally accredited university when the associate marriage and family therapist license was issued.

R4-6-603. Supervised Work Experience for Marriage and Family Therapy Licensure

- A. An applicant for licensure as a marriage and family therapist shall demonstrate completion of at least 3200 hours of supervised work experience in the practice of marriage and family therapy in no less than 24 months. The applicant shall ensure that the of supervised work experience in the practice of marriage and family therapy that includes:
 - 1. At least 1600 hours of direct client contact involving the use of psychotherapy:
 - a. At least 1000 of the 1600 hours of direct client contact are with couples or families; and
 - No more than 400 of the 1600 hours of direct client contact are in provided by psychoeducation and at least 60 percent of psychoeducation hours are with couples or families; and
 - 2. At least 100 hours of clinical supervision as prescribed under R4-6-212 and R4-6-604; and
 - For the purpose of licensure, no more than 1600 hours of indirect client contact related to psychotherapy services.
- **B.** For any month in which an applicant provides direct client contact, the applicant shall obtain at least one hour of clinical supervision.
- **C.** An applicant may submit more than the required 3200 hours of supervised work experience for consideration by the Board.
- **D.** During the period of supervised work experience specified in subsection (A), an applicant for marriage and family therapist licensure shall practice behavioral health under the limitations specified in R4-6-210.
- E. There is no supervised work experience requirement for licensure as an associate marriage and family therapist.

R4-6-604. Clinical Supervision for Marriage and Family Therapy Licensure

- A. An applicant for marriage and family therapy licensure shall demonstrate that the applicant received at least 100 hours of clinical supervision that meets the requirements specified in subsection (B) and R4-6-212 during the supervised work experience required under R4-6-603.
- B. The Board shall accept hours of clinical supervision for marriage and family therapist licensure if:
 - 1. The hours are supervised by an individual who meets the educational requirements under R4-6-214;
 - 2. At least 50 of the hours are supervised by:
 - a. A marriage and family therapist licensed by the Board, or
 - b. An independently licensed behavioral health professional who holds an Approved Supervisor designation from the American Association for Marriage and Family Therapy; and
 - 3. The remaining hours are supervised by one or more of from the following behavioral health professionals:
 - a. A licensed professional counselor licensed by the Board;
 - b. A licensed clinical social worker licensed by the Board;

- c. A licensed marriage and family therapist licensed by the Board; or
- d. A licensed psychologist licensed under A.R.S. Title 32, Chapter 19.1; or
- 4. <u>e.</u> The hours are supervised by an <u>An</u> individual for whom an exemption is <u>was</u> obtained under R4-6-212.01.
- **C.** The Board shall not accept hours of clinical supervision provided by a substance abuse an addiction counselor for marriage and family therapy licensure.

ARTICLE 7. SUBSTANCE ABUSE ADDICTION COUNSELING

R4-6-701. Licensed Substance Abuse Addiction Technician Curriculum

- A. An applicant for licensure as a substance abuse an addiction technician shall have:
 - 1. An associate's or bachelor's degree from a regionally accredited college or university in a program accredited by NASAC;
 - 2. An associate's or bachelor's degree from a regionally accredited college or university in an educational program previously approved by the Board under A.R.S. § 32-3253(A)(14); or
 - 3. An associate's or bachelor's degree from a regionally accredited college or university in a behavioral health science program that includes coursework from the seven core content areas listed in subsection (B).
- **B.** An associate's or bachelor's degree under subsection (A)(3), shall include at least three semester or four quarter credit hours in each of the following core content areas:
 - 1. Psychopharmacology, including but not limited to effects on mood, behavior, cognition and physiology;
 - Models of treatment and relapse prevention <u>and/or recovery management</u>, including but not limited to philosophies and practices of generally accepted and evidence-supported models;
 - 3. Group work: Group dynamics and processes as they relate to addictions and substance use disorders;
 - Working with diverse populations: Issues and trends in a multicultural and diverse society as they relate to substance use disorder and addiction Social and cultural diversity focused on understanding cultural belief systems, cultural identity development, and counseling strategies;
 - 5. Co-occurring disorders, including but not limited to philosophies and practices of generally accepted and evidence-supported models;
 - 6. Ethics, including but not limited to:
 - a. Legal and ethical responsibilities and liabilities;
 - b. Standards of professional behavior and scope of practice;
 - e. Client rights, responsibilities, and informed consent; and
 - d.c. Confidentiality and other legal considerations in the practice of behavioral health informed consent; and
 - 7. Assessment, diagnosis, and treatment. Use of assessment and diagnosis to develop appropriate treatment interventions for substance use disorders or addictions.
- C. The Board shall waive the education requirement in subsection (A) for an applicant requesting licensure as a substance abuse an addiction technician if the applicant demonstrates all of the following:
 - The applicant provides services under a contract or grant with the federal government under the authority of 25 U.S.C. § 5301 or § 1601 – 1683;

- 2. The applicant has obtained at least the equivalent of a high school diploma;
- Because of cultural considerations, obtaining the degree required under subsection (A) would be an extreme hardship for the applicant; and
- 4. The applicant has completed at least 6400 hours of supervised work experience in substance abuse addiction counseling, as prescribed in R4-6-705(C), in no less than 48 months within the seven years immediately preceding the date of application.
- D. In evaluating the curriculum required under subsection (B), the Board shall assess whether a core content area is embedded or contained in more than one course. The applicant shall provide information the Board requires to determine whether a core content area is embedded in multiple courses. The Board shall not accept a core content area embedded in more than two courses unless the courses are succession courses. The Board shall allow subject matter in a course to qualify in only one core content area.
- E. An applicant for licensure as a substance abuse an addiction technician who completed the applicant's educational training before the effective date of this Section or <u>coursework</u> no later than October 31, 2017, may request that the Board evaluate the applicant's <u>educational training coursework</u> using the standards in effect before the effective date of this Section.

R4-6-702. Licensed Associate Substance Abuse Addiction Counselor Curriculum

- A. An applicant for licensure as an associate substance abuse <u>addiction</u> counselor shall have one of the following:
 - A bachelor's degree from a regionally accredited college or university in a program accredited by NASAC and supervised work experience that meets the standards specified in R4-6-705(A);
 - A master's or higher degree from a regionally accredited college or university in a program accredited by NASAC;
 - A bachelor's degree from a regionally accredited college or university in a behavioral health science program that meets the core content standards specified in R4-6-701(B) and supervised work experience that meets the standards specified in R4-6-705(A);
 - 4. A master's or higher degree from a regionally accredited college or university in a behavioral health science program that meets the core content standards specified in R4-6-701(B) and includes at least 300 hours of supervised practicum as prescribed under subsection (C); or
 - A bachelor's degree from a regionally accredited college or university in an educational program previously approved by the Board under A.R.S. § 32-3253(A)(14) and supervised work experience that meets the standards specified in R4-6-705(A); or
 - A master's or higher degree from a regionally accredited college or university in an educational program previously approved by the Board under A.R.S. § 32-3253(A)(14) and includes at least 300 hours of supervised practicum as prescribed under subsection (C).
- B. In evaluating the curriculum required under subsection (A)(3) or (4), the Board shall assess whether a core content area is embedded or contained in more than one course. The applicant shall provide information the Board requires to determine whether a core content area is embedded in multiple courses. The Board shall not accept a core content area embedded in more than two courses unless the courses are succession courses. The Board shall allow subject matter in a course to qualify in only one core content area.

- C. Supervised practicum. A supervised practicum shall integrate didactic learning related to substance use disorders addiction with face-to-face, direct counseling experience. The counseling experience shall include intake and assessment, treatment planning, discharge planning, documentation, and case management activities.
- **D.** The Board shall deem an applicant to meet the curriculum requirements for associate substance abuse addiction counselor licensure if the applicant:
 - Holds an active and in good standing substance abuse <u>addiction</u> technician license issued by the Board; and
 - 2. Met the curriculum requirements with a bachelor's degree when the substance abuse addiction technician license was issued.
- E. An applicant for licensure as an associate substance abuse addiction counselor who completed the applicant's educational training before the effective date of this Section or <u>coursework</u> no later than October 31, 2017, may request that the Board evaluate the applicant's educational training <u>coursework</u> using the standards in effect before the effective date of this Section.

R4-6-703. Licensed Independent Substance Abuse Addiction Counselor Curriculum

- **A.** An applicant for licensure as an independent substance abuse <u>addiction</u> counselor shall have a master's or higher degree from a regionally accredited college or university in one of the following:
 - 1. A program accredited by NASAC;
 - 2. A behavioral health science program that meets the core content standards specified in R4-6-701(B) and includes at least 300 hours of supervised practicum as prescribed under subsection (D); or
 - 3. An educational program previously approved by the Board under A.R.S. § 32-3253(A)(14) that includes at least 300 hours of supervised practicum as prescribed under subsection (D).
- B. In addition to the degree requirement under subsection (A), an applicant for licensure as an independent substance abuse <u>addiction</u> counselor shall complete the supervised work experience requirements prescribed under R4-6-705(B).
- C. In evaluating the curriculum required under subsection (A)(2), the Board shall assess whether a core content area is embedded or contained in more than one course. The applicant shall provide information the Board requires to determine whether a core content area is embedded in multiple courses. The Board shall not accept a core content area embedded in more than two courses unless the courses are succession courses. The Board shall allow subject matter in a course to qualify in only one core content area.
- D. Supervised practicum. A supervised practicum shall integrate didactic learning related to substance use disorders addiction with face-to-face, direct counseling experience. The counseling experience shall include intake and assessment, treatment planning, discharge planning, documentation, and case management activities.
- **E.** The Board shall deem an applicant to meet the curriculum requirements for independent substance abuse <u>addiction</u> counselor licensure if the applicant:
 - Holds an active and in good standing associate substance abuse addiction counselor license issued by the Board; and

- 2. Met the curriculum requirements with a master's degree when the associate substance abuse addiction counselor license was issued.
- F. An applicant for licensure as an independent substance abuse <u>addiction</u> counselor who completed the applicant's educational training before the effective date of this Section or <u>coursework</u> no later than October 31, 2017, may request that the Board evaluate the applicant's <u>educational training coursework</u> using the standards in effect before the effective date of this Section.

R4-6-704. Examination

- A. The Board approves the following licensure examinations for an applicant for substance abuse addiction technician licensure:
 - 1. Alcohol and Drug Counselor and Advanced Alcohol and Drug Counselor Examinations offered by the International Certification and Reciprocity Consortium, and
 - 2. Level I or higher examinations offered by the NAADAC, the Association of Addiction Professionals; and
 - 3. Other examinations approved by the Board.
- **B.** The Board approves the following licensure examinations for an applicant for associate or independent substance abuse addiction counselor licensure:
 - 1. Advanced Alcohol and Drug Counselor Examination offered by the International Certification and Reciprocity Consortium
 - 2. Level II or higher examinations offered by the NAADAC, the Association of Addiction Professionals, and;
 - 3. Examination for Master Addictions Counselors offered by the National Board for Certified Counselors: and
 - 4. Other examinations approved by the Board.
- **C.** The Board shall deem an applicant for independent substance abuse addiction counselor licensure as meeting the examination requirements if all of the following apply:
 - 1. The applicant has an active associate substance abuse addiction counselor license;
 - 2. The applicant passed a written examination listed in subsection (A) before November 1, 2015; and
 - 3. The applicant submitted an application to the Board on or after November 1, 2015.
- D. An applicant shall pass an approved examination within 12 months after receiving written examination authorization from the Board. An applicant shall not take an approved examination more than three times during the 12-month testing period.
- E. If an applicant does not receive a passing score on an approved licensure examination within the 12 months referenced in subsection (D), the Board shall close the applicant's file with no recourse to appeal. To receive further consideration for licensure, an applicant whose file is closed shall submit a new application and fee.
- **F.** The Board may grant a one-time 90-day examination extension request to an applicant who demonstrates good cause as specified under R4-6-305(G).

R4-6-705. Supervised Work Experience for Substance Abuse Addiction Counselor Licensure

A. An applicant for associate substance abuse addiction counselor licensure who has a bachelor's degree and is required under R4-6-702(A) to participate in a supervised work experience shall complete at least 3200 hours of supervised work experience in substance abuse counseling in no less than 24 months. The applicant shall

ensure that the of supervised work experience that relates to substance use disorder and addiction and meets the following standards:

- 1. At least 1600 hours of direct client contact involving the use of psychotherapy related to substance use disorder and addiction issues,
- 2. No more than 400 of the 1600 hours of direct client contact are in provided by psychoeducation,
- For the purpose of licensure, no more than 1600 hours of indirect client contact related to psychotherapy services,
- 4.3. At least 100 hours of clinical supervision as prescribed under R4-6-212 and R4-6-706, and
- 5.4. At least one hour of clinical supervision in any month in which the applicant provides direct client contact.
- B. An applicant for independent substance abuse <u>addiction</u> counselor licensure shall demonstrate completion of at least 3200 hours of supervised work experience in substance abuse counseling in no less than 24 months <u>of</u> <u>supervised work experience in addiction counseling</u>. The applicant shall ensure that the supervised work experience meets the standards specified in subsection (A).
- C. An applicant for substance abuse addiction technician qualifying under R4-6-701(C) shall complete at least 6400 3400 hours of supervised work experience in no less than 48 months. The applicant shall ensure that the supervised work experience includes:
 - 1. At least 3200 hours of direct client contact;
 - 2. Using psychotherapy to assess, diagnose, and treat individuals, couples, families, and groups for issues relating to substance use disorder and addiction; and
 - 3. At least 200 hours of clinical supervision as prescribed under R4-6-212 and R4-6-706.
- **D.** An applicant may submit more than the required number of hours of supervised work experience for consideration by the Board.
- **E.** During the period of required supervised work experience, an applicant for substance abuse addiction licensure shall practice behavioral health under the limitations specified in R4-6-210.
- F. There is no supervised work experience requirement for an applicant for licensure as:
 - 1. A substance abuse An addiction technician qualifying under R4-6-701(A), or
 - 2. An associate substance abuse addiction counselor qualifying under R4-6-702(A) with a master's or higher degree.

R4-6-706. Clinical Supervision for Substance Abuse Addiction Counselor Licensure

- A. During the supervised work experience required under R4-6-705, an applicant for substance abuse <u>addiction</u> counselor licensure shall demonstrate that the applicant received, for the level of licensure sought, at least the number of hours of clinical supervision specified in R4-6-705 that meets the requirements in subsection (B) and R4-6-212.
- **B.** The Board shall accept hours of clinical supervision for substance abuse <u>addiction</u> licensure if the focus of the supervised hours relates to substance use disorder and addiction and:
 - 1. The supervision is provided by someone who meets the educational requirements under R4-6-214.
 - 1.2. At least 50 hours are supervised by:
 - a. An independent substance abuse addiction counselor licensed by the Board; or

- b. An independently licensed behavioral health professional who:
 - i. Provides evidence of knowledge and experience in substance use disorder addiction treatment; and
 - ii. Is approved by the ARC or designee, and
- 2. The remaining hours are supervised by an individual qualified under R4-6-212(A), or
- The <u>remaining</u> hours are supervised by an individual for whom an exemption was obtained under R4-6-212.01 from the following behavioral health professionals who meet the educational requirements under R4-6-214:
 - a. <u>A licensed professional counselor.</u>
 - b. <u>A licensed clinical social worker</u>,
 - c. A licensed marriage and family therapist.
 - d. <u>A licensed psychologist, or</u>
 - e. <u>An individual for whom an exemption was obtained under R4-6-212.01</u>.

ARTICLE 8. LICENSE RENEWAL AND CONTINUING EDUCATION

R4-6-801. Renewal of Licensure

- A. Under A.R.S. § 32-3273, a license issued by the Board under A.R.S. Title 32, Chapter 33 and this Chapter is renewable every two years. A licensee who has more than one license may request in writing that the Board synchronize the expiration dates of the licenses. The licensee shall pay any prorated fees required to accomplish the synchronization.
- B. A licensee holding an active license to practice behavioral health in this state shall complete 30 clock hours of continuing education as prescribed under R4-6-802 between the date the Board received the licensee's last renewal application and the next license expiration date. A licensee may not carry excess continuing education hours from one license period to the next.
- **C.** To renew licensure, a licensee shall submit the following to the Board on or before the date of license expiration or as specified in A.R.S. § 32-4301:
 - 1. A renewal application form, approved by the Board. The licensee shall ensure that the renewal form:
 - Includes a list of 30 clock hours of continuing education that the licensee completed during the license period;
 - b. If the documentation previously submitted under R4-6-301(12) (11) was a limited form of work authorization issued by the federal government, includes evidence that the work authorization has not expired; and
 - c. Is signed by the licensee attesting that all information submitted is true and correct;
 - Payment of the renewal fee as prescribed in R4-6-215. In accordance with A.R.S. § 32-3272, the Board shall waive the renewal fee for an associate level license if the licensee has submitted the renewal application and the licensee's application for independent licensure is pending; and
 - Other documents requested by the Board to determine that the licensee continues to meet the requirements under A.R.S. Title 32, Chapter 33 and this Chapter.

- D. The Board may audit a licensee to verify compliance with the continuing education requirements under subsection (B). A licensee shall maintain documentation verifying compliance with the continuing education requirements as prescribed under R4-6-803.
- E. A licensee whose license expires <u>shall immediately stop the practice of behavioral health in settings that require</u> a license and stop representation as a licensee. A may have the license <u>may be</u> reinstated <u>within 90 days of</u> <u>expiration</u> by complying with subsection (C) and paying a late renewal penalty within 90 days of the license expiration date the reinstatement fee. A license reinstated under this subsection is effective with no lapse in licensure. A licensee who engages in the practice of behavioral health between the dates of license expiration and license reinstatement may be subject to disciplinary action for practicing unlicensed.

R4-6-802. Continuing Education

- A. A licensee who maintains more than one license may apply the same continuing education hours for renewal of each license if the content of the continuing education relates to the scope of practice of each license. <u>A licensee who obtained continuing education hours while practicing under a temporary license may apply the continuing education hours for license renewal.</u>
- B. For each license period, a licensee may report a maximum of:
 - 1. Ten clock hours of continuing education for first-time presentations by the licensee that deal with current developments, skills, procedures, or treatments related to the practice of behavioral health. The licensee may claim one clock hour for each hour spent preparing, writing, and presenting information;
 - 2. Six clock hours of continuing education for attendance at a Board meeting where the licensee is not:
 - a. A member of the Board,
 - b. The subject of any matter on the agenda, or
 - c. The complainant in any matter that is on the agenda; and
 - 3. Ten clock hours of continuing education for service as a Board or ARC member.
- C. For each license period, a licensee shall report:
 - 1. A minimum of three clock hours of continuing education sponsored, approved, or offered by an entity listed in subsection (D) in:
 - a. Behavioral health ethics or mental health law, and :
 - b. Cultural competency and diversity considerations in psychotherapy; and
 - c. <u>Technology related to behavioral health such as telehealth, electronic communication, and use of</u> <u>artificial intelligence;</u> and
 - 2. Completion of the three clock hour Arizona Statutes/Regulations Tutorial.
- D. A licensee shall participate in continuing education that relates to the scope of practice of the license held and to maintaining or improving will maintain, improve, and build on the skill and competency of the licensee. The Board has determined that in addition to the continuing education listed in subsections (B) and (C), the following continuing education meets this standard:
 - Activities sponsored or approved by national, regional, or state professional associations or organizations in the specialties of marriage and family therapy, professional counseling, social work, substance abuse

<u>addiction</u> counseling, or in the allied professions of psychiatry, psychiatric nursing, psychology, or pastoral counseling;

- 2. Programs in behavioral health sponsored or approved by a regionally accredited college or university;
- 3. In-service training, courses, or workshops in behavioral health sponsored by federal, state, or local social service agencies, public school systems, or licensed health facilities or hospitals;
- Graduate or undergraduate courses in behavioral health offered by a regionally accredited college or university. One semester-credit hour or the hour equivalent of one semester hour equals 15 clock hours of continuing education;
- 5. Publishing a paper, report, or book that deals with current developments, skills, procedures, or treatments related to the practice of behavioral health. For the license period in which publication occurs, the licensee may claim one clock hour for each hour spent preparing and writing materials; and
- 6. Programs in behavioral health sponsored by a state superior court, adult probation department, or juvenile probation department.
- E. The Board has determined that a substance abuse technician, associate substance abuse counselor, or an independent substance abuse counselor shall ensure that at least 20 of the 30 clock hours of continuing education required under R4-6-801(B) are in the following categories:
 - 1. Pharmacology and psychopharmacology;
 - 2. Addiction processes,
 - 3. Models of substance use disorder and addiction treatment,
 - 4. Relapse prevention,
 - 5. Interdisciplinary approaches and teams in substance use disorder and addiction treatment,
 - 6. Substance use disorder and addiction assessment and diagnostic criteria,
 - 7. Appropriate use of substance use disorder and addiction treatment modalities,
 - 8. Substance use disorder and addiction as it related to diverse populations,
 - 9. Substance use disorder and addiction treatment and prevention,
 - 10. Clinical application of current substance use disorder and addiction research, or
 - 11. Co-occurring disorders.
- E. Beginning January 1, 2027, individuals qualified to provide clinical supervision for licensure shall have complied with the requirements prescribed in R4-6-212 and R4-6-214, including completion of a Board-approved clinical supervisor training.
- F. Board approval of clinical supervision training.
 - 1. <u>To obtain Board approval of a clinical supervision training, the training provider shall submit to the Board:</u>
 - a. An application, using a form approved by the Board,
 - b. The fee prescribed under R4-6-215, and

c. Documentary evidence the training program is consistent with the standards and topics specified in R4-6-214(B).

2. The Board shall review the materials submitted under subsection (F)(1) and notify the training provider whether the clinical supervision training is approved or denied for deficiencies. If the training is denied for deficiencies, the Board shall allow the training provider 90 days in which to resubmit the materials required

under subsection (F)(1) for further review. If the Board denies approval of the clinical supervision training a second time, the training provider may seek approval only by complying again with subsection (F)(1). 3. When the Board approves a clinical supervision training, the Board shall add the training to the list of approved clinical supervision trainings maintained by the Board.

<u>4. Board approval of a clinical supervision training is valid for three years unless the training provider makes</u> changes to the training that are inconsistent with the specifications in R4-6-214(B).

5. To maintain approval of a clinical supervision training after three years, the training provider shall comply with subsection (F)(1).

ARTICLE 11. DOCUMENTATION AND STANDARDS OF PRACTICE

R4-6-1101. Consent for Treatment

A licensee shall:

- 1. Provide treatment to a client only in the context of a professional relationship based on informed consent for treatment;
- 2. Document in writing, including by electronic means, for each client the following elements of informed consent for treatment:
 - a. Purpose of treatment;
 - b. General procedures to be used in treatment, including benefits, limitations, and potential risks;
 - c. The client's right to have the client's records and all information regarding the client kept confidential and an explanation of the limitations on confidentiality;
 - d. Notification of the licensee's supervision or involvement with a treatment team of professionals;
 - e. Methods for the client to obtain information about the client's records or information about the client's records;
 - f. The client's right to participate in treatment decisions and in the development and periodic review and revision of the client's treatment plan;
 - g. The client's right to refuse any recommended treatment or to withdraw consent to treatment and to be advised of the consequences <u>and risks</u> of refusal or withdrawal; and
 - h. The client's right to be informed of all fees that the client is required to pay and the licensee's refund and collection policies and procedures; and
 - <u>Beginning January 1, 2027, notification of the extent, if any, to which clinical services are provided</u> through, recorded or documented with, or involve the use of artificial intelligence, machine learning, deep learning, or any other human simulation modality; and
 - i. Beginning January 1, 2027, a description of the professional nature of the therapeutic relationship.
- Obtain a dated and signed Except as provided in subsection (5), obtain written informed consent for treatment from a client or the client's legal representative before providing treatment to the client and when a change occurs in an element listed in subsection (2) that might affect the client's consent for treatment;

- Obtain a dated and signed Except as provided in subsection (5), obtain written informed consent for treatment from a client or the client's legal representative before audio or video taping the client or permitting a third party to observe treatment provided to the client; and
- 5. Include a dated signature from an authorized representative of the behavioral health entity If treatment of a client is by telehealth, the informed consent for treatment required under subsections (3) and (4) may be:
 - a. Obtained verbally, and
 - b. <u>Contemporaneously documented in the client's record</u>.

R4-6-1102. Treatment Plan

A licensee shall:

- Work By the fourth session, work jointly with each client or the client's legal representative to prepare an integrated, individualized, written treatment plan, based on the licensee's provisional or principal diagnosis and assessment of behavior and the treatment needs, abilities, resources, and circumstances of the client, that includes:
 - a. One or more treatment goals;
 - b. One or more treatment methods;
 - c. The date, within a maximum of 12 months, when the client's treatment plan will be reviewed and reassessed;
 - d. If a discharge date has been determined, the aftercare needed, if applicable;
 - e. The dated signature of the client or the client's legal representative; and
 - f. The dated signature of the licensee;
- 2. Review and reassess reassessment of the treatment plan:
 - a. According to the review date specified in the treatment plan as required under subsection (1)(c); and
 - b. At least annually the licensee shall document a review of the treatment plan with the client or the client's legal representative to ensure the continued viability and effectiveness of the treatment plan and, where appropriate, add a description of the services the client may need after terminating treatment with the licensee update the treatment plan as applicable; and
- Ensure that all treatment plan revisions include the dated signature of the client or the client's legal representative and the licensee;
- 4. Upon written request, provide a client or the client's legal representative an explanation of all aspects of the client's condition and treatment; and
- 5. Ensure that a client's treatment is in accordance with the client's treatment plan.

R4-6-1105. Confidentiality Release of Confidential Information

- A. A licensee shall release or disclose client records or any information regarding a client only:
 - 1. In accordance with applicable federal or state law that authorizes release or disclosure; or
 - 2. With written authorization from the client or the client's legal representative.
- **B.** A licensee shall ensure that written authorization for release of client records or any information regarding a client is obtained before a client record or any information regarding a client is released or disclosed unless otherwise allowed by state or federal law.

- **C.B.** Written authorization includes:
 - 1. The name of the person disclosing the client record or information;
 - 2. The purpose of the disclosure;
 - 3. The individual, agency, or entity requesting or receiving the record or information;
 - 4. A description of the client record or information to be released or disclosed;
 - 5. A statement indicating authorization and understanding that authorization may be revoked at any time;
 - 6. The date or circumstance when the authorization expires, not to exceed 12 months;
 - 7. The date the authorization was signed; and
 - 8. The dated signature of the client or the client's legal representative.
- **Đ.C.** A licensee shall ensure that any written authorization to release a client record or any information regarding a client is maintained in the client record.
- **E**-<u>D</u>. If a licensee provides behavioral health services to multiple members of a family, each legally competent, participating family member shall independently provide written authorization to release client records regarding the family member. Without authorization from a family member, the licensee shall not disclose the family member's client record or any information obtained from the family member <u>unless otherwise allowed by state or federal law</u>.

R4-6-1106. Telepractice Telehealth

- A. Except as otherwise provided by statute under A.R.S. § 32-3271(A)(2), an individual who provides counseling, social work, marriage and family therapy, or substance abuse addiction counseling via telepractice by telehealth to a client located in Arizona shall: be
 - 1. Be licensed by the Board.
 - 2. Be competent in providing behavioral health services by telehealth, and
 - 3. Ensure that providing behavioral health services by telehealth is appropriate for the client's needs.
- B. Under A.R.S. § 32-3271(A)(2), an individual who is licensed in good standing in another state but who is not licensed by the Board shall not provide counseling, social work, marriage and family therapy, or addiction counseling by telehealth to a client located in Arizona for more than ninety days. The individual providing behavioral health services under A.R.S. § 32-3271(A)(2) by telehealth to a client in Arizona shall ensure the 90 days are consecutive and occur in one calendar year.
- **B.C.** Except as otherwise provided by statute, <u>a licensee an individual</u> who provides counseling, social work, marriage and family therapy, or substance abuse <u>addiction</u> counseling via telepractice <u>by telehealth only</u> to a client located outside Arizona shall comply with not only A.R.S. Title 32, Chapter 33, and this Chapter but also the laws and rules of the jurisdiction in which the client is located.
- **C.D.** An individual who provides counseling, social work, marriage and family therapy, or substance abuse addiction counseling via telepractice by telehealth shall:
 - 1. In addition to complying with the requirements in R4-6-1101, document the limitations and risks associated with telepractice telehealth, including but not limited to the following;
 - a. Inherent confidentiality risks of electronic communication,
 - b. Potential for technology failure,

- c. Emergency procedures when the licensee is unavailable, and
- d. Manner of identifying the client when using electronic communication that does not involve video; and
- e. Local emergency contacts or services; and
- 2. In addition to complying with the requirements in R4-6-1103, include the following in the progress note required under R4-6-1103(H):
 - a. Mode of session, whether interactive audio, video, or electronic communication; and
 - b. Verification of the client's:
 - i. Physical location during the session; and
 - ii. Local emergency contacts if difference from those provided under subsection (D)(1).