This substantive policy statement is advisory only. A substantive policy statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedures Act. If you believe that this substantive policy statement does impose additional requirements or penalties on regulated parties you may petition the agency under Arizona Revised Statutes section 41-1033 for a review of the statement.

ARIZONA MEDICAL BOARD SUBSTANTIVE POLICY STATEMENT #10

Delegating to the Executive Director the Authority to Enter into Interim Consent Agreements for Participation in the Board's Monitored Aftercare Program

The Arizona Medical Board (Board) is authorized to delegate certain duties to its Executive Director. A.R.S. § 32-1403(A)(10). The Board may delegate the authority to enter into consent agreements if there is evidence of a danger to the public health and safety. A.R.S. § 32-1405(C)(25). The Board has codified this delegation into administrative rule authorizing the Executive Director to enter an interim consent agreement if there is evidence that a restriction is needed to mitigate imminent danger to the public health and safety. A.A.C. R4-16-504. The Board may also delegate to the Executive Director the authority to order a physician to undergo an evaluation. A.R.S. § 32-1451(C). The Board has codified this delegation in administrative rule. A.A.C. R4-16-501.

If the Executive Director orders a physician suspected of being impaired by drugs or alcohol to undergo an evaluation, and the evaluation determines that the physician is impaired, the physician represents an imminent danger to the public health and safety. Accordingly, the Executive Director may enter into an interim consent agreement for a practice restriction removing the physician from practice until the physician completes treatment and is determined safe to return to practice. A.A.C. R4-16-504. When the treatment is completed the physician is often determined safe to return to practice, *provided* the physician enters the Board's Monitored Aftercare Program for the treatment and rehabilitation of doctors of medicine who are impaired by alcohol or drug abuse. Placement in the Monitored Aftercare Program allows the Board to monitor the physician's recovery and learn of any relapse by the physician.

The Executive Director may only enter an interim consent agreement with a physician if the agreement restricts the physician's license. A.A.C. R4-16-504. Participation in the Monitored Aftercare Program is not a restriction on a physician's license. Accordingly, absent further delegation, the Executive Director may not enter into an Interim Consent Agreement to place a physician in the Monitored Aftercare Program pending final resolution of the Board's investigation. This inability creates a danger to the public health and safety because the Board cannot monitor the physician and would be unaware of any relapse. Accordingly, the Board has delegated to the Executive Director the authority to enter into interim consent agreements requiring a physician's participation in the Monitored Aftercare Program pending final resolution of the underlying investigation. This substantive policy statement is in effect until an administrative rule codifying this delegation is in effect. A.R.S. § 32-1403(A)(10).