EXHIBIT J

DEPARTMENT OF HEALTH, ARKANSAS STATE BOARD OF NURSING

SUBJECT: Certified Medication Assistant or Medication Assistant-Certified, 17 CAR pt. 127

DESCRIPTION: The Department of Health, Arkansas State Board of Nursing proposes amendments to its Certified Medication Assistant or Medication Assistant-Certified rules, 17 CAR pt. 127:

Sections 101 - 114

Purpose
To incorporate the term "Certified Medication Assistant" into the rules pursuant to Act 265 of 2025.

Background
The main purpose of Act 265 of 2025 was to allow Medication Assistant-Certified persons to administer subcutaneous insulin injections if they are properly trained. The training program total hours and requirements are also added. However, the title "Medication Assistant-Certified" and acronym "MA-C" were replaced with the title "Certified Medication Assistant" and acronym "CMA." However, the Act allows a certified individual to use either title or the acronym for either title.

There is another commonly used title for another healthcare worker in Arkansas, "Certified Medical Assistant", that uses the acronym "CMA." This may create confusion.

MA-Cs are allowed to work in the long-term care and prison medical facilities. Stakeholders from the education and long-term care organizations have requested the board to continue with the use of the title "Medication assistant-certified, MA-C" in its rules to avoid confusion. Because the Act allows the certified individual to continue to use either title, the term "Certified Medication Assistant and CMA" has been added next to the term "Medication Assistant-Certified and MA-C" throughout Part 127 of the board's rule.

Key Points
The term "Certified Medication Assistant" was added to the statute.

Discussion
We believe that because certified individuals are allowed to continue the use of the title, "Medication Assistant-Certified" and the acronym, "MA-C", both titles are now included in the rules to assist with possible confusion over the reference to CMA.

Subdivisions 102(1)(A) and (B)

Purpose
To revise the qualifications for certification pursuant to Act 265 of 2025.

Background
Act 265 of 2025 made changes to the qualifications for certification. Subdivisions 102(1)(B) and (C) were deleted in the rule pursuant to the Act. The certified training course hours were added as new subdivision 102(1)(A)(v).

Key Points
Two of the previous requirements for certification qualification were removed. The training course hours have been increased to not less than 115 hours.

Discussion
These changes comply with Act 265 of 2025.

Subdivision 102(1)(B)

Purpose
To add rules regarding additional training requirements and regulations regarding subcutaneous insulin injections that are now allowed by Act 265 of 2025.

Background
Act 265 of 2025 now allows certified individuals to administer subcutaneous insulin injections after additional training.

Key Points
The additional training hours and injection authorization requirements are added.

Discussion
These changes comply with Act 265 of 2025.

Subdivision 105(b)(8)

Purpose
To add subcutaneous injections of insulin to the list of routes in which nonprescription and legend medications may be administered pursuant to Act 265 of 2025.

Background
Act 265 of 2025 now allows certified individuals to administer subcutaneous insulin injections after additional training.

Key Points
Certificate holders may now administer subcutaneous insulin injections.

Discussion
These changes comply with Act 265 of 2025.

Subdivision 105(c)(2)

Purpose
To except subcutaneous insulin injections from the task of “injectable medications” that a certificate holder is not allowed to perform.

Background
Act 265 of 2025 now allows certified individuals to administer subcutaneous insulin injections after additional training. Subdivision 105(c)(2) states that certificate holders may not administer injectable medications. Insulin injections are an injectable medication; therefore, the exception was added.

Key Points
Certificate holders may now administer subcutaneous insulin injections.

Discussion
These changes comply with Act 265 of 2025.

Section 109

Purpose
The amendments add the licensee's mailing address, residential address, email address, and telephone number to the list of information that is required to be updated with the board.

Background
Previously, the rule only required that licensees update their "address" when it changes. The board needs the mailing address, residential address, email address, and telephone number to effectively communicate with the licensee.

Key Points
This update fits with currently used communication methods.

Discussion
It is essential that the board be able to contact licensees for various reasons. Requiring the licensee to update their contact information will assist with the process.

Subdivision 110(a)(2)

Purpose
To make the renewal mailing notice timeline consistent with other renewal mailing notice provisions in the board's rules.

Background
Other rules regarding the timeline for mailing renewal notices use the time period of sixty (60) days. The time period was changed from thirty (30) days to sixty (60) days.

Key Points
This change is consistent with similar Board of Nursing rules.

Discussion
This change is consistent with similar Board of Nursing rules.

Subdivision 113(c)(6)

Purpose
To make changes to the training program requirements pursuant to Act 265 of 2025.

Background
Act 265 of 2025 revised the training requirements for certification and added the task of subcutaneous insulin injections to allowable tasks to be performed. Subdivision 113(c)(6)(B) changes the training hours pursuant to the Act. 113(c)(6)(C)(iv)(d) adds glucometer checks and subcutaneous insulin injections as part of the documented skills pursuant to the Act. 113(c)(6)(H) requires the clinical instructor to directly supervise and document that the student has successfully completed subcutaneous insulin injections.

Key Points
These amendments comply with the changes prescribed in Act 265 of 2025.

Discussion
These amendments will assure that certificate holders who desire to administer subcutaneous insulin injections are properly trained.

Subdivision 113(d)(2)(A)

Purpose
To change the minimum pass rate requirements from first time percentage to overall percentage.

Background
This amendment is proposed after consultation with the institutions that provide MA-C training. Overall rates are generally better than first time rates. This change will assist the institutions and prevent early warnings or closures. It will assist the programs with establishing overall success.

Key Points
This is proposed in response to feedback from education institutions.

Discussion
This will assist the programs with establishing overall success.

PUBLIC COMMENT: A public hearing was not held on this matter. The public comment period expired March 13, 2026. The agency provided the following public comment summary:

Commenter Name: Melinda Rhynes, M.Ed., CMA (AAMA), HITCH-PP, Arkansas Society of Medical Assistants, 4/13/26
COMMENT: The Arkansas Society of Medical Assistants is aware that the legislature added the title "Certified Medication Assistant" and the acronym "CMA" to statute in 2025. Nevertheless, the Arkansas Society of Medical Assistants recommends to the Arkansas Board of Nursing that "Medical Assistant-Certified" and "MA-C" be listed before "Certified Medication Assistant" and "CMA" in the proposed revision to 17 CAR Part 127. Medication Assistant-Certified. As the "background" to this proposed rule revision state, the phrase "certified medication assistant" and the acronym "CMA" is likely to cause confusion with "certified medical assistants" and CMA."

RESPONSE: Thank you for your public comment on the ADH - Arkansas State Board of Nursing proposed Rules changes. The legislative change mentioned in the comment changed the name to "Certified Medication Assistant" or "CMA." However, there was provision to allow the continued use of the title "Medication Assistant-Certified" or "MA-C." The rule must follow the statute, therefore, the official title of "Certified Medication Assistant" or "CMA" must be listed first.

Grant Wise, an attorney with the Bureau of Legislative Research, asked the following questions and was provided with the following responses:

1. 17 CAR § 127-102 – Arkansas Code § 17-87-704(a) appears to set out a list of two avenues by which an applicant may obtain certification as a certified medication assistant. The statute seems to provide that to be certified, an applicant shall submit written evidence that they meet all the requirements listed in subdivision (a)(1), or, as described in subdivision (a)(2), the applicant may have "[c]ompleted a portion of a nursing education program equivalent to the certified medication assistant training course; and [p]assed the certified medication assistant examination." (Emphasis added.) The rule appears to be based on this section but seems to add additional language at 17 CAR § 127-102(1)(B) not found in the statute. Is there a reason it differs?
   RESPONSE: In 2025, the scope of Certified Medication Assistants changed to allow administration of subcutaneous insulin injections and inhalants (see 17 CAR § 127-105(b)(7) and (b)(8). Certified Medication Assistant (CMA) programs added 15 additional hours to their instruction to properly prepare CMAs to administer these types of medication. 17 CAR § 127-102(B) establishes a pathway for CMAs educated prior to this addition in the programs to be able to safely administer these types of medications with proof of the additional education.

The proposed effective date is pending legislative review and approval.

FINANCIAL IMPACT: The agency has indicated that the proposed rule does not have a financial impact. With respect to the total estimated cost by fiscal year to any private individual, private entity, or private business subject to the amended rule, the agency states that there will be an unknown cost for additional training if a certified individual desires to be allowed to administer subcutaneous insulin injections.

LEGAL AUTHORIZATION: The Arkansas State Board of Nursing shall have the power and responsibility to promulgate whatever rules it deems necessary for the implementation of Arkansas Code Title 17, Chapter 87, concerning nurses. *See* Arkansas Code § 17-87-203(1)(A).

The rules implement Act 265 of 2025, sponsored by Representative Mary Bentley, which replaced the defined term "medication assistive person" with the defined term "certified medication assistant" throughout Arkansas Code § 17-87-701 et seq. and set forth the certification requirements, qualifications, and the scope of practice for a certified medication assistant.

QUESTIONNAIRE FOR FILING PROPOSED RULES WITH THE ARKANSAS LEGISLATIVE COUNCIL

DEPARTMENT Arkansas Department of Health
BOARD/COMMISSION Division of Health Related Boards; State Board of Nursing
BOARD/COMMISSION DIRECTOR Matt Gilmore, ADH Boards and Commissions Coordinator
CONTACT PERSON Ashley Davis, Director / Matt Gilmore
ADDRESS 1123 S. University, Suite 800, Little Rock, AR 72204
PHONE NO. (501) 686-2703 **EMAIL** Ashley.Davis@arkansas.gov / Matt.Gilmore@arkansas.gov
NAME OF PRESENTER(S) AT SUBCOMMITTEE MEETING
Matt Gilmore, Ashley Davis, Director, and David Dawson, General Counsel
PRESENTER EMAIL(S) matt.gilmore@arkansas.gov; ashley.davis@arkansas.gov; david.dawson@arkansas.gov

INSTRUCTIONS

In order to file a proposed rule for legislative review and approval, please submit this Legislative Questionnaire and Financial Impact Statement, and attach (1) a summary of the rule, describing what the rule does, the rule changes being proposed, and the reason for those changes; (2) both a markup and clean copy of the rule; and (3) all documents required by the Questionnaire.

If the rule is being filed for permanent promulgation, please email these items to the attention of Rebecca Miller-Rice, miller-ricer@blr.arkansas.gov, for submission to the Administrative Rules Subcommittee.

If the rule is being filed for emergency promulgation, please email these items to the attention of Director Marty Garrity, garritym@blr.arkansas.gov, for submission to the Executive Subcommittee.

Please answer each question completely using layman terms.

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1. What is the official title of this rule?
17 CAR Part 127. Medication Assistant-Certified.

2. What is the subject of the proposed rule? Add changes from 2025 legislation regarding the added term of "C

3. Is this rule being filed under the emergency provisions of the Arkansas Administrative Procedure Act? Yes ☐ No ☑

If yes, please attach the statement required by Ark. Code Ann. § 25-15-204(c)(1).

If yes, will this emergency rule be promulgated under the permanent provisions of the Arkansas Administrative Procedure Act? Yes ☐ No ☐

4. Is this rule being filed for permanent promulgation? Yes ☑ No ☐

If yes, was this rule previously reviewed and approved under the emergency provisions of the Arkansas Administrative Procedure Act? Yes ☐ No ☑

If yes, what was the effective date of the emergency rule? _____

On what date does the emergency rule expire?_____

5. Is this rule required to comply with a *federal* statute, rule, or regulation? Yes ☐ No ☑

If yes, please provide the federal statute, rule, and/or regulation citation.

6. Is this rule required to comply with a *state* statute or rule? Yes ☑ No ☐

If yes, please provide the state statute and/or rule citation.

Act 265 of 2025.

7. Are two (2) rules being repealed in accord with Executive Order 23-02? Yes ☐ No ☑

If yes, please list the rules being repealed.
If no, please explain.

The addition or change is required in response to recently passed legislation. All remaining rules remain necessary for proper regulation of the Nurse Practice Act.

8. Is this a new rule? Yes ☐ No ☑

Does this repeal an existing rule? Yes ☐ No ☑
If yes, the proposed repeal should be designated by strikethrough. If it is being replaced with a new rule, please attach both the proposed rule to be repealed and the replacement rule.

Is this an amendment to an existing rule? Yes ☑ No ☐
If yes, all changes should be indicated by strikethrough and underline. In addition, please be sure to label the markup copy clearly as the markup.

9. What is the state law that grants the agency its rulemaking authority for the proposed rule, outside of the Arkansas Administrative Procedure Act? Please provide the specific Arkansas Code citation(s), including subsection(s).

A.C.A. § 17-87-203(1)

10. Is the proposed rule the result of any recent legislation by the Arkansas General Assembly?
Yes ☑ No ☐

If yes, please provide the year of the act(s) and act number(s).

Acts 265 of 2025.

11. What is the reason for this proposed rule? Why is it necessary?

Act 265 of 2025 replaced the term "Medication Assistive Person" with "Certified Medication Assistant", but allows the person to use either title. The stakeholders in the profession requested that "Medication Assistant-Certified (MA-C)" remain in the rules to avoid confusion with other healthcare workers already referred to as CMA's Therefore the term "Certified Medication Assistant (CMA)" has been added throughout part 127, along with MA-C. Subparts 102, 105, and 113 also make changes to the requirements of certification and allows administration of subcutaneous insulin injections pursuant to Act 265 of 2025. Subpart 109 adds email address and telephone number to the list of items that must be updated with the board. Subpart 113 makes changes to the training program hours pursuant to Act 265 of 2025.

12. Please provide the web address by which the proposed rule can be accessed by the public as provided in Ark. Code Ann. § 25-19-108(b)(1).

https://healthy.arkansas.gov/programs-services/topics/arsbn-laws-rules

13. Will a public hearing be held on this proposed rule? Yes ☐ No ☑

If yes, please complete the following:

Date: _____

Time: _____

Place: _____

Please be sure to advise Bureau Staff if this information changes for any reason.

14. On what date does the public comment period expire for the permanent promulgation of the rule? Please provide the specific date. 03/13/2026

15. What is the proposed effective date for this rule? To be determined upon approval

16. Please attach (1) a copy of the notice required under Ark. Code Ann. § 25-15-204(a)(1) and (2) proof of the publication of that notice.

17. Please attach proof of filing the rule with the Secretary of State, as required by Ark. Code Ann. § 25-15-204(e)(1)(A).

18. Please give the names of persons, groups, or organizations that you anticipate will comment on these rules. Please also provide their position (for or against), if known.

Employers and Certified individuals may comment that the term "Certified Medication Assistant" is confusing because there are other healthcare workers previously referred to as CMAs.

19. Is the rule expected to be controversial? Yes ☑ No ☐

If yes, please explain.

Possibly. Employers and Certified individuals may comment that the term "Certified Medication Assistant" is confusing because there are other healthcare workers previously referred to as CMAs.

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY.

DEPARTMENT Arkansas Department of Health
BOARD/COMMISSION Division of Health Related Boards; State Board of Nursing
PERSON COMPLETING THIS STATEMENT Ashley Davis, Director
TELEPHONE NO. (501) 686-2703 **EMAIL** ashley.davis@arkansas.gov

To comply with Ark. Code Ann. § 25-15-204(e), please complete the Financial Impact Statement and email it with the questionnaire, summary, markup and clean copy of the rule, and other documents. Please attach additional pages, if necessary.

TITLE OF THIS RULE 17 CAR Part 127. Medication Assistant-Certified.

1. Does this proposed, amended, or repealed rule have a financial impact?
   Yes ☐ No ☑

2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule?
   Yes ☑ No ☐

3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered? Yes ☑ No ☐

   If no, please explain:

   (a) how the additional benefits of the more costly rule justify its additional cost;

   (b) the reason for adoption of the more costly rule;

   (c) whether the reason for adoption of the more costly rule is based on the interests of public health, safety, or welfare, and if so, how; and

   (d) whether the reason for adoption of the more costly rule is within the scope of the agency's statutory authority, and if so, how.

4. If the purpose of this rule is to implement a *federal* rule or regulation, please state the following:

   (a) What is the cost to implement the federal rule or regulation?

Current Fiscal Year		**Next Fiscal Year**	
General Revenue	$0.00	General Revenue	$0.00
Federal Funds	$0.00	Federal Funds	$0.00
Cash Funds	$0.00	Cash Funds	$0.00
Special Revenue	$0.00	Special Revenue	$0.00
Other (Identify)	$0.00	Other (Identify)	$0.00
Total	$0.00	Total	$0.00

(b) What is the additional cost of the state rule?

Current Fiscal Year		**Next Fiscal Year**	
General Revenue	$0.00	General Revenue	$0.00
Federal Funds	$0.00	Federal Funds	$0.00
Cash Funds	$0.00	Cash Funds	$0.00
Special Revenue	$0.00	Special Revenue	$0.00
Other (Identify)		Other (Identify)	$0.00
Total	$0.00	Total	$0.00

5. What is the total estimated cost by fiscal year to any private individual, private entity, or private business subject to the proposed, amended, or repealed rule? Please identify those subject to the rule, and explain how they are affected.

Current Fiscal Year $ 0.00

Next Fiscal Year $ 0.00

If a certified individual desires to be allowed to administer subcutaneous insulin injections, there will be an unknown cost for additional training.

6. What is the total estimated cost by fiscal year to a state, county, or municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

Current Fiscal Year $ 0.00

Next Fiscal Year $ 0.00

7. With respect to the agency's answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars ($100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

Yes ☐ No ☑

If yes, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

(1) a statement of the rule's basis and purpose;

(2) the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;

(3) a description of the factual evidence that:
(a) justifies the agency's need for the proposed rule; and
(b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule's costs;

(4) a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;

(5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;

(6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and

(7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
(a) the rule is achieving the statutory objectives;
(b) the benefits of the rule continue to justify its costs; and
(c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.

Arkansas Department of Health

Arkansas State Board of Nursing
1123 S. University Ave., #800 • Little Rock, AR 72204
(501) 686-2700 • Fax (501) 686-2714

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subparts 101 - 114

PURPOSE
To incorporate the term "Certified Medication Assistant" into the rules pursuant to Act 265 of 2025.

BACKGROUND
The main purpose of Act 265 of 2025 was to allow Medication Assistant-Certified persons to administer subcutaneous insulin injections if they are properly trained. The training program total hours and requirements are also added. However, the title "Medication Assistant-Certified" and acronym "MA-C" were replaced with the title "Certified Medication Assistant" and acronym "CMA." However, the Act allows a certified individual to use either title or the acronym for either title.

There is another commonly used title for another healthcare worker in Arkansas, "Certified Medical Assistant", that uses the acronym "CMA." This may create confusion.

MA-Cs are allowed to work in the long-term care and prison medical facilities. Stakeholders from the educational and Long-term care organizations have requested the Board to continue with the use of the title "Medication assistant-certified, MA-C" in its rules to avoid confusion. Because the Act allows the certified individual to continue to use either title, the term "Certified Medication Assistant and CMA" has been added next to the term "Medication Assistant-Certified and MA-C" throughout Part 127 of the board's rules.

KEY POINTS
The term "Certified Medication Assistant" was added to the statute.

DISCUSSION
We believe that because certified individuals are allowed to continue the use of the title, "Medication Assistant-Certified" and the acronym, "MA-C" both titles are now included in the rules to assist with possible confusion over the reference to CMA.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 102(1)(B) and (C)

PURPOSE
To revise the qualifications for certification pursuant to Act 265 of 2025.

BACKGROUND
Act 265 of 2025 made changes to the qualifications for certification. Subpart 102(1)(B) and (C) were deleted in the rule pursuant to the Act. The certified training course hours were added as new subpart 102(A)(v).

KEY POINTS
Two of the previous requirements for certification qualification were removed. The training course hours have been increased to not less than 115 hours.

DISCUSSION
These changes comply with Act 265 of 2025.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 102(1)(B) [new]

PURPOSE
To add rules regarding additional training requirements and regulations regarding subcutaneous insulin injections that are now allowed by Act 265 of 2025.

BACKGROUND
Act 265 of 2025 now allows certified individuals to administer subcutaneous insulin injections after additional training.

KEY POINTS
The additional training hours and injection authorization requirements are added.

DISCUSSION
These changes comply with Act 265 of 2025.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 105(b)(8)

PURPOSE
To add subcutaneous injections of insulin to the list of route in which nonprescription and legend medications my be administered pursuant to Act 265 of 2025.

BACKGROUND

Act 265 of 2025 now allows certified individuals to administer subcutaneous insulin injections after additional training.

KEY POINTS
Certificate holders may now administer subcutaneous insulin injections.

DISCUSSION
These changes comply with Act 265 of 2025.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 105(c)(2)

PURPOSE
To except subcutaneous insulin injections from the task of "injectable medications" that a certificate holder is not allowed to perform.

BACKGROUND
Act 265 of 2025 now allows certified individuals to administer subcutaneous insulin injections after additional training. Subpart 105(c)(2) states that certificate holders may not administer injectable medications. Insulin injections are a injectable medication, therefore, the exception was added.

KEY POINTS
Certificate holders may now administer subcutaneous insulin injections.

DISCUSSION
These changes comply with Act 265 of 2025.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 109

PURPOSE
The amendments add the licensee's mailing address, residential address, email address and telephone number to the list of information that is required to be updated with the board.

BACKGROUND

Previously, the rule only required that licensees update their "address" when it changes. The Board needs the mailing address, residential address, email address and telephone number to effectively communicate with the licensee.

KEY POINTS
This update fits with currently used communication methods.

DISCUSSION
It is essential that the Board be able to contact licensees for various reasons. Requiring the licensee to update their contact information will assist with this process.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 113(c)(6)

PURPOSE
To make the renewal mailing notice timeline consistent with other renewal mailing notice provisions in the board's rules.

BACKGROUND
Other rules regarding the timeline for mailing renewal notices use the time period of sixty (60) days. The time period was changed from thirty (30) days to sixty (60) days.

KEY POINTS
This change is consistent with similar Board of Nursing rules.

DISCUSSION
This change is consistent with similar Board of Nursing rules.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 115(c)(6)

PURPOSE
To make changes to the training program requirements pursuant to Act 265 of 2025.
BACKGROUND
Act 265 of 2025 revised the training requirements for certification and added the task of subcutaneous insulin injections to allowable tasks to be performed. Subpart 110(c)(6)(B) changes the training hours pursuant to the Act. 110(c)(6)(C)(iv)(d) adds glucometer checks and subcutaneous insulin injections as part of the documented skills pursuant to the Act.

110(c)(6)(H) requires the clinical instructor to directly supervise and document that the student has successfully completed subcutaneous insulin injections.

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DISCUSSION
These amendments will assure that certificate holders who desire to administer subcutaneous insulin injections are properly trained.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 115(d)(2)(A)

PURPOSE
To change the minimum pass rate requirements from first time percentage to overall percentage.

BACKGROUND
This amendment is proposed after consultation with the institutions that provide MA-C training. Overall rates are generally better than first time rates. This change will assist the institutions and prevent early warnings or closures. It will assist the programs with establishing overall success.

KEY POINTS
This is proposed in response to feedback from educational institutions.

DISCUSSION
This will assist the programs with establishing overall success.

RECEIVED
By Arkansas Secretary of State at 12:23 pm, Feb 09, 2026

ARKANSAS REGISTER

Proposed Rule Cover Sheet

Secretary of State
Cole Jester
500 Woodlane Street, Suite 026
Little Rock, Arkansas 72201-1094
(501) 682-5070
www.sos.arkansas.gov

Name of Department Arkansas Department of Health

Agency or Division Name Board of Nursing

Other Subdivision or Department, If Applicable

Previous Agency Name, If Applicable

Contact Person Christine Lewis

Contact E-mail christine.lewis@arkansas.gov

Contact Phone 501.686.2704

Name of Rule Title 17. Chapter XXII. Subchapter A., Part 127 Certified Medication Assistant or Medication Assistant-Certfied, Subpart 1. Generally

Newspaper Name Arkansas Democrat Gazette

Date of Publishing February 11, 2026

Final Date for Public Comment March 13, 2026

Location and Time of Public Meeting TBD

Arkansas Department of Health

Arkansas State Board of Nursing
1123 S. University Ave., #800 • Little Rock, AR 72204
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Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subparts 101 - 114

PURPOSE
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BACKGROUND
The main purpose of Act 265 of 2025 was to allow Medication Assistant-Certified persons to administer subcutaneous insulin injections if they are properly trained. The training program total hours and requirements are also added. However, the title "Medication Assistant-Certified" and acronym "MA-C" were replaced with the title "Certified Medication Assistant" and acronym "CMA." However, the Act allows a certified individual to use either title or the acronym for either title.

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We believe that because certified individuals are allowed to continue the use of the title, "Medication Assistant-Certified" and the acronym, "MA-C" both titles are now included in the rules to assist with possible confusion over the reference to CMA.

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Subpart 102(1)(B) and (C)

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KEY POINTS
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DISCUSSION
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Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 102(1)(B) [new]

PURPOSE
To add rules regarding additional training requirements and regulations regarding subcutaneous insulin injections that are now allowed by Act 265 of 2025.

BACKGROUND
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KEY POINTS
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Subpart 105(b)(8)

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KEY POINTS
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DISCUSSION
These changes comply with Act 265 of 2025.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 105(c)(2)

PURPOSE
To except subcutaneous insulin injections from the task of "injectable medications" that a certificate holder is not allowed to perform.

BACKGROUND
Act 265 of 2025 now allows certified individuals to administer subcutaneous insulin injections after additional training. Subpart 105(c)(2) states that certificate holders may not administer injectable medications. Insulin injections are a injectable medication, therefore, the exception was added.

KEY POINTS
Certificate holders may now administer subcutaneous insulin injections.

DISCUSSION
These changes comply with Act 265 of 2025.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 109

PURPOSE
The amendments add the licensee's mailing address, residential address, email address and telephone number to the list of information that is required to be updated with the board.

BACKGROUND

Previously, the rule only required that licensees update their "address" when it changes. The Board needs the mailing address, residential address, email address and telephone number to effectively communicate with the licensee.

KEY POINTS
This update fits with currently used communication methods.

DISCUSSION
It is essential that the Board be able to contact licensees for various reasons. Requiring the licensee to update their contact information will assist with this process.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 113(c)(6)

PURPOSE
To make the renewal mailing notice timeline consistent with other renewal mailing notice provisions in the board's rules.

BACKGROUND
Other rules regarding the timeline for mailing renewal notices use the time period of sixty (60) days. The time period was changed from thirty (30) days to sixty (60) days.

KEY POINTS
This change is consistent with similar Board of Nursing rules.

DISCUSSION
This change is consistent with similar Board of Nursing rules.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 115(c)(6)

PURPOSE
To make changes to the training program requirements pursuant to Act 265 of 2025.
BACKGROUND
Act 265 of 2025 revised the training requirements for certification and added the task of subcutaneous insulin injections to allowable tasks to be performed. Subpart 110(c)(6)(B) changes the training hours pursuant to the Act. 110(c)(6)(C)(iv)(d) adds glucometer checks and subcutaneous insulin injections as part of the documented skills pursuant to the Act.

110(c)(6)(H) requires the clinical instructor to directly supervise and document that the student has successfully completed subcutaneous insulin injections.

KEY POINTS
These amendments comply with the changes prescribed in Act 265 of 2025.

DISCUSSION
These amendments will assure that certificate holders who desire to administer subcutaneous insulin injections are properly trained.

Rule Revision
17 CAR Part 127. Medication Assistant-Certified.

Subpart 115(d)(2)(A)

PURPOSE
To change the minimum pass rate requirements from first time percentage to overall percentage.

BACKGROUND
This amendment is proposed after consultation with the institutions that provide MA-C training. Overall rates are generally better than first time rates. This change will assist the institutions and prevent early warnings or closures. It will assist the programs with establishing overall success.

KEY POINTS
This is proposed in response to feedback from educational institutions.

DISCUSSION
This will assist the programs with establishing overall success.

NO FINANCIAL IMPACT ANTICIPATED

Outlook

For Publication: Notice of Public Comment Period for Amended Rules

From Christine Lewis <Christine.Lewis@arkansas.gov>
Date Mon 2/9/2026 9:55 AM
To legalads@arkansasonline.com <legalads@arkansasonline.com>
Cc Ashley Davis, PhD., RN <Ashley.Davis@arkansas.gov>; Matt Gilmore <Matt.Gilmore@arkansas.gov>; David Dawson, JD <David.Dawson@arkansas.gov>

1 attachment (236 KB)

Notice Via Dem Gaz.17CARpt120,121,122,123,124,126,127,130,131.pdf;

Please run the attached Notice of Amended Rules as shown in Memorandum for three (3) consecutive days beginning Wednesday, February 11, 2026, and confirm receipt and scheduled publication by emailing Christine.Lewis@arkansas.gov.

Thank you for your assistance.

Christine Lewis
Executive Assistant
Nursing Board | ADH
e: Christine.Lewis@arkansas.gov
t: 501-686-2704

Arkansas Department of Health

Arkansas State Board of Nursing
1123 S. University Ave., #800 • Little Rock, AR 72204
(501) 686-2700 • Fax (501) 686-2714

MEMORANDUM

TO: Legal Notices
Arkansas Democrat-Gazette

VIA EMAIL: legalads@arkansasonline.com

FROM: Christine Lewis, Executive Assistant to the Director

DATE: February 9, 2026

RE: Legal Notice

Please run the following ad for three (3) consecutive days, beginning Wednesday, February 11, 2026.

NOTICE OF AMENDED *RULES*
ARKANSAS STATE BOARD OF NURSING

On Wednesday, February 11, 2026, the Arkansas State Board of Nursing (ASBN) will begin the thirty-day public comment period regarding the proposed revisions to the following:

ASBN *Rules:*
17 CAR pt. 120 General Provisions
17 CAR pt. 121 Licensure: Registered Nurse, Licensed Practical Nurse, and Licensed Psychiatric Technician Nurse
17 CAR pt. 122 Registered Nurse Practitioner
17 CAR pt. 123 Advanced Practice Registered Nurse
17 CAR pt. 124 Delegation
17 CAR pt. 126 Rules of Procedure
17 CAR pt. 127 Certified Medication Assistant or Medication Assistant-Certified
17 CAR pt. 130 Full Independent Practice Credentialing Committee
17 CAR pt. 131 Dialysis Patient Care Technicians

Copies of the proposed *Rules* are available at the ASBN office or you may view them at https://healthy.arkansas.gov/boards-commissions/boards/nursing-arkansas-state-board/laws-rules/. Written comments should be submitted to the Director, Arkansas State Board of Nursing, 1123 South University Ave.; Suite 800, Little Rock, AR 72204; no later than **Friday, March 13, 2026.**

Please email me at Christine.Lewis@arkansas.gov to confirm that you received this notice and that it will begin running on Wednesday, February 11, 2026, for three (3) consecutive days. Thanks for your kind assistance.

Arkansas Department of Health

Arkansas State Board of Nursing
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Outlook

Re: For Publication: Notice of Public Comment Period for Amended Rules

From Legal Ads <legalads@arkansasonline.com>
Date Tue 2/10/2026 9:26 AM
To Christine Lewis <Christine.Lewis@arkansas.gov>

Scheduled for Wed 2/11, Thurs 2/12, and Fri 2/13.

Thank you.

Gregg Sterne, Legal Advertising
Arkansas Democrat-Gazette
legalads@arkansasonline.com

From: "Christine Lewis" <Christine.Lewis@arkansas.gov>
To: "legalads" <legalads@arkansasonline.com>
Cc: "Ashley Davis, PhD., RN" <Ashley.Davis@arkansas.gov>, "Matt Gilmore" <Matt.Gilmore@arkansas.gov>, "David Dawson, JD" <David.Dawson@arkansas.gov>
Sent: Monday, February 9, 2026 9:55:29 AM
Subject: For Publication: Notice of Public Comment Period for Amended Rules

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Thank you for your assistance.

Christine Lewis
Executive Assistant
Nursing Board | ADH
e: Christine.Lewis@arkansas.gov
t: 501-686-2704

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Stricken language would be deleted from and underlined language would be added to the Code of Arkansas Rules.

Proposed Rulemaking

Title

Promulgated by:
Arkansas State Board of Nursing

Title 17. Professions, Occupations, and Businesses
Chapter XXII. Arkansas State Board of Nursing, Department of Health
Subchapter A. Generally
Part 127. Certified Medication Assistant or Medication Assistant-Certified
Subpart 1. Generally

17 CAR § 127-101. Definitions.

As used in this part:

(1) "Certified medication assistant (CMA) or "Medication assistant-certified (MA-C)" means a person who is certified by the Arkansas State Board of Nursing to administer certain nonprescription and legend drugs in designated facilities; and

(~~1~~ 2) "Designated facility" means any Arkansas State Board of Nursing-approved facility to include a nursing home or a facility operated as a local correctional facility as defined by Arkansas Code § 12-41-107;

(~~2~~ 3) "Initial medication" means:

(A) A new medication that the patient has not been receiving; and/or

(B) Changes in dosage, route, or frequency of a medication that a patient is currently receiving;

(~~3~~ 4) "Legend drug" means a drug limited by Section 503(b)(1) of the Federal Food, Drug, and Cosmetic Act to being dispensed by or upon a medical practitioner's prescription;

~~(4) "Medication assistant certified (MA-C)" means a person who is certified by the Arkansas State Board of Nursing to administer certain nonprescription and legend drugs in designated facilities; and~~

(5) "Supervision" means the oversight of the certified medication assistant or medication assistant-certified by a licensed nurse on the premises of a designated facility.

17 CAR § 127-102. Qualifications.

Qualifications:

(1) (A) In order to be certified as a certified medication assistant or medication assistant-certified, an applicant shall submit to the Arkansas State Board of Nursing written evidence, verified by oath, that the applicant:

(~~A~~ i) Is currently listed in good standing on the state's certified nurse aide registry;

~~(B) Has maintained registration on the state's certified nurse aide registry continuously for a minimum of one (1) year;~~

~~(C) Has completed at least one (1) continuous year of full-time experience as a certified nurse aide in this state~~;

(~~D~~ ii) Is currently employed at a designated facility;

(~~E~~ iii) Has a high school diploma or the equivalent;

(~~F~~ iv) Has successfully completed a literacy and reading comprehension screening process approved by the board;

(~~G~~ v) Has successfully completed a certified medication assistant or medication assistant-certified training course of not less than one hundred fifteen (115) hours approved by the board; and

(~~H~~ vi) Has successfully passed a board-approved certification examination on subjects the board determines~~; or~~.

(B) (i) Any certified medication assistant or medication assistant-certified who completed the training program prior to September 2025, and who wants to

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administer subcutaneous insulin injections, shall obtain an additional fifteen (15) hours of training focused on proper administration of subcutaneous insulin injections.

(ii) Evidence of training shall be submitted to the board.

(iii) Administration of subcutaneous insulin injections shall not start until the subcutaneous insulin injection authorization is noted on the board verification; or

(2) Has completed a portion of a nursing education program equivalent to the certified medication assistant or medication assistant person training course and passed the board's certified medication assistant ~~certification~~ examination; and

(3) Has been issued a valid United States Social Security number or has been issued a federal Form I-766 United States Citizenship and Immigration Services-issued Employment Authorization Document.

17 CAR § 127-103. Examination.

(a) **Eligibility.** The applicant shall meet the certification requirements of the Arkansas State Board of Nursing.

(b) **Application.**

(1) Applications for examination shall be completed and filed with the board prior to the examination.

(2) Verification of successful completion of the certified medication assistant or medication assistant-certified program including date of completion shall be received in the board office directly from the institution that provided the program.

(c) **Fee.**

(1) The examination fee shall accompany the application.

(2) The examination fee (first time or retake) is not refundable.

(d) **Passing score.** The passing score on the certification examination shall be determined by the board.

(e) **Failing score and eligibility to retake the examination.**

(1) Any applicant whose score falls below the passing score shall fail the examination.

(2) The frequency and number of retests by unsuccessful candidates shall be determined by the board.

(f) **Results.** Examination results shall be available to all applicants and to their respective schools.

17 CAR § 127-104. CMA or MA-C identification.

(a)(1) Any person who holds ~~an~~ a CMA or MA-C certification in this state shall use the legal title or abbreviation as set forth in Arkansas Code § 17-87-101 et seq.

(2) No other person shall assume any other name, title, or abbreviation or any words, letters, signs, or devices that would cause a reasonable person to believe the user is certified as ~~an~~ a CMA or MA-C.

(b) Any person certified as ~~an~~ a CMA or MA-C shall wear a name badge with name and appropriate legal title or abbreviation during times when such person is administrating medications.

(c) The name badge shall be prominently displayed and clearly legible such that the person receiving medications may readily identify the type of personnel administering such medications.

17 CAR § 127-105. Scope of work.

(a)(1) ~~An~~ A CMA or MA-C may perform the delegated function of medication administration and related tasks under the supervision of a licensed nurse.

(2) ~~An~~ A CMA or MA-C shall not administer any medication that requires nursing assessment or judgment prior to administration, evaluation, and follow up, even if the medication is given by an approved medication route.

(3) ~~An~~ A CMA or MA-C shall not administer medications to more than forty (40) patients during a shift in a facility regulated by the Office of Long-Term Care.

(b) **Approved medication routes.** The routes in which nonprescription and legend drugs may be administered by ~~an~~ a CMA or MA-C when delegated by a licensed nurse include:

(1) Orally;

(2) Topically;

(3) Drops for:

(A) Eye;

(B) Ear; or

(C) Nose;

(4) Vaginally;

(5) Rectally;

(6) Transdermally; ~~and~~

(7) ~~Oral inhaler~~ Inhalation; and

(8) Subcutaneous injections of insulin.

(c) **Tasks not within the scope of work.** Tasks that shall not be delegated to the CMA or MA-C include, but are not limited to:

(1) Receiving, having access to, or administering controlled substances;

(2) Administering parenteral, enteral, or injectable medications, except as authorized under Arkansas Code § 17-87-701 et seq.;

(3) Administering any substance by nasogastric or gastrostomy tube;

(4) Calculating drug doses;

(5) Destroying medications;

(6) Receiving written or verbal orders;

(7) Transcribing orders from the medical record;

(8) Ordering initial medications (refer to 17 CAR § 127-101, definitions);

(9) Evaluating medication error reports;

(10) Performing treatments;

(11) Conducting patient assessments or evaluations;

(12) Engaging in patient teaching activities; and

(13) Ordering or receiving medications by a route that the ~~medication assistant-certified~~ CMA or MA-C cannot administer.

17 CAR § 127-106. Supervision.

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A licensed nurse shall not supervise more than two (2) certified medication assistant or medication assistant-certified persons during a shift.

17 CAR § 127-107. Designated facilities utilizing CMAs or ~~MA-C~~ MA-Cs.

(a) Designated facilities utilizing CMAs or ~~MA-C persons~~ MA-Cs shall notify the Arkansas State Board of Nursing on forms supplied by the board.

(b) The notification shall be signed by the:

(1) Facility administrator; and

(2) Director of nursing.

17 CAR § 127-108. Certification/verification to another jurisdiction generally.

Upon payment of a certification/verification fee, ~~an~~ a CMA or MA-C seeking certification in another jurisdiction may have a certified statement of Arkansas certification issued to the appropriate entity in that jurisdiction.

17 CAR § 127-109. Name or address change.

(a) ~~An~~ A CMA or MA-C whose name is legally changed shall submit:

(1) A name change request;

(2) A copy of the marriage license or court action; and

(3) The required fee.

(b) ~~An~~ a CMA or MA-C shall immediately notify the Arkansas State Board of Nursing in writing of a change in:

(1) mailing address, ~~or~~

(2) residential address,

(3) email address, or

(4) telephone number.

17 CAR § 127-110. Renewals.

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(a)(1) Each person certified under the provisions of Arkansas Code § 17-87-701 et seq., shall renew certification biennially.

(2) ~~Thirty (30)~~ Sixty (60) days prior to the expiration date, the Arkansas State Board of Nursing shall mail a renewal notification to the last known address of each CMA or MA-C to whom a certificate was issued or renewed during the current period.

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(3) An application shall be completed before the certification renewal is processed.

(4) The certificate holder must attest to being currently listed in good standing on the state's certified nurse aide registry, have completed the required continuing education, and are currently employed.

(5) The nonrefundable fee for renewal shall accompany the application.

(6)(A) Pursuant to Acts 2003, No. 996, and upon written request and submission of appropriate documentation, members of the United States Armed Forces who are Arkansas residents and are ordered to active duty to a duty station located outside of this state shall be allowed an extension without penalty or assessment of a late fee for renewing the service member's certification.

(B) The extension shall be effective for:

(i) The period that the service member is serving on active duty at a duty station located outside of this state; and

(ii) A period not to exceed six (6) months after the service member returns to the state.

(b) **Expired certificate.**

(1) The certificate is expired if not renewed by the expiration date.

(2) Failure to receive the renewal notice at the last address of record in the board office shall not relieve the CMA or MA-C of the responsibility for renewing the certificate by the expiration date.

(3) Any CMA or MA-C whose certificate is expired shall file a renewal application and pay the current renewal fee and the late fee.

(4) Any person practicing during the time the certificate has lapsed shall be:

(A) Considered to be providing services illegally; and

(B) Subject to the penalties provided for violation of Arkansas Code § 17-87-701 et seq.

(5) When disciplinary proceedings have been initiated against ~~an~~ a CMA or MA-C whose certificate has expired, the certificate shall not be reinstated until the proceedings have been completed.

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(6) ~~An~~ A CMA or MA-C applying to reinstate an expired certificate to active status shall:

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(A) Complete the continuing education requirements prior to reinstatement of the certificate; and

(B) Attest to being currently listed in good standing on the state's certified nurse aide registry.

(7) If the expired period exceeds five (5) years, the person must:

(A) Repeat a certified medication assistant or medication assistant-certified personnel training program approved by the board; and

(B) Successfully pass a board-approved certification examination.

17 CAR § 127-111. Continuing education.

(a) Each person holding an active certificate or applying for reactivation of a certificate under the provisions as stated in this part shall be required to complete certain continuing education requirements prior to certification renewal or reactivation.

(b) **Declaration of compliance.**

(1) Each CMA or MA-C shall declare his or her compliance with the requirements for continuing education at the time of certification renewal or reactivation.

(2) The declaration shall be made on the form supplied by the Arkansas State Board of Nursing.

(c) **Requirements.**

(1) An CMA or MA-C who holds an active certificate shall document completion of eight (8) contact hours of continuing education approved by the board during each renewal period.

(2) Expired certifications have no requirements for continuing education.

(3) Certification reactivation within two (2) years or less shall require documented completion of the following:

(A) Ten (10) contact hours of continuing education related to medication administration within the past two (2) years approved by the board; and

(B) Provide other evidence as requested by the board.

(4) Certification reactivation greater than two (2) years, but less than five (5) years, shall require documented completion of the following:

(A) Ten (10) contact hours of continuing education related to medication administration within the past two (2) years approved by the board, or a medication-related academic course; and

(B) Provide other evidence as requested by the board.

(5) Continuing education hours beyond the required contact hours shall not be carried over to the next renewal period.

(d) **Responsibilities of the individual certified.**

(1) It shall be the responsibility of each CMA or MA-C to select and participate in those continuing education activities that will meet the criteria.

(2) It shall be the CMA's or MA-C's responsibility to:

(A) Maintain records of continuing education as well as documented proof such as original:

(i) Certificates of attendance;

(ii) Contact hour certificates;

(iii) Academic transcripts; or

(iv) Grade slips; and

(B) Submit copies of this evidence when requested by the board.

(3) Records shall be maintained by the CMA or MA-C for a minimum of:

(A) Two (2) consecutive renewal periods; or

(B) Four (4) years.

(e) **Recognition of providers.**

(1) The board shall approve all continuing education programs for the CMA or ~~medication assistant certified~~ MA-C.

(2) The board shall work with the professional organizations, approved schools, and other providers of continuing educational programs to ensure that continuing education activities are available to CMAs or ~~MA-Cs~~ MA-Cs.

(f) **Activities acceptable for continuing education.**

(1) The educational activity shall be at least one (1) contact hour in length.

(2) The content shall:

(A) Be medication related;

(B) Be relevant to the CMA's or ~~MA-C~~ MA-C's scope of work; and

(C) Provide for educational growth.

(3) If participation is in an academic course or other program in which grades are given, a grade equivalent of "C" or better shall be required, or "pass" on a pass/fail grading system.

(g) **Activities that are not acceptable as continuing education.**

(1)(A) In-service programs.

(B) Activities intended to assist the CMA or MA-C to acquire, maintain, and/or increase the competence in fulfilling the assigned responsibilities specific to the expectations of the employer.

(2)(A) Orientation programs.

(B) A program by which new staff are introduced to the philosophy, goals, policies, procedures, role expectations, physical facilities, and special services in a specific work setting.

(C) Orientation is provided at the time of employment and at other times when changes in roles and responsibilities occur in a specific work setting.

(3) Courses designed for lay people.

(h) **Individual review of a continuing education activity provided by a nonrecognized agency/organization.**

(1) ~~An~~ A CMA or MA-C may request an individual review by:

(A) Submitting an Application for Individual Review; and

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(B) Paying a fee.

(2) Approval of a nonrecognized continuing educational activity shall be limited to the specific event under consideration.

(i) **Audits.**

(1) The board may perform random audits of CMAs or ~~MA-Cs~~ MA-Cs for compliance with the continuing education requirement.

(2) If audited, the CMA or MA-C shall prove completion of the required continuing education during the twenty-four (24) months immediately preceding the renewal date, presenting photocopies of original certificates of completion to the board.

(3) The CMA or MA-C shall provide evidence of continuing education requirements within thirty (30) calendar days from the mailing date of the audit notification letter sent from the board to the last known address of the certified.

(4) Certificate holders may be subject to disciplinary action by the board if noncompliant with the audit.

(j) **Failure to comply.**

(1) Any CMA or MA-C who fails to complete continuing education or who falsely certifies completion of continuing education shall be subject to disciplinary action, nonrenewal of the certificate, or both, pursuant to Arkansas Code § 17-87-706 and § 17-87-707(a)(1)(A) and (a)(5).

(2) If the board determines that ~~an~~ a CMA or MA-C has failed to comply with continuing education requirements, the CMA or MA-C will be:

(A) Allowed to meet continuing education requirements within ninety (90) days of notification of noncompliance; and

(B)(i) Assessed a late fee for each contact hour that requirements are not met after the ninety (90) day grace period and be issued a Letter of Reprimand.

(ii) Failure to pay the fee may result in further disciplinary action.

17 CAR § 127-112. Endorsement.

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(a) The Arkansas State Board of Nursing may issue certification as ~~an~~ a CMA or MA-C by endorsement to an applicant who has been licensed or certified as ~~an~~ a CMA or MA-C under the laws of another state or territory, regardless of title, if:

(1) In the opinion of the board, the applicant meets the qualifications of a CMA or MA-C in this state; and

(2) The board recommends certification.

(b) **Application.**

(1) Applications must be:

(A) Completed;

(B) Certified;

(C) Signed by the applicant; and

(D) Filed with the board.

(2) Endorsement verifications will be accepted from the state of original certification only.

(c) **Fee.**

(1) The endorsement fee must accompany the application.

(2) The fees are not refundable.

17 CAR § 127-113. Standards for training programs.

(a) **New program approval.**

(1) CMA or MA-C training programs shall be Arkansas State Board of Nursing-approved prior to implementation of the program.

(2) The parent institution shall be a:

(A) Postsecondary educational institution, hospital, or consortium of such institutions that currently offers a nursing program; or

(B) Consortium of five (5) or more skilled nursing facilities.

(3) **Approval.**

(A) The institution shall submit a proposal that is signed by the appropriate administrative officers, and includes:

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(i) Evidence of adequate and appropriate faculty/resources to provide for the program and the requirements listed in this part; and

(ii) A plan and timeline for meeting the program requirements.

(B) The board shall conduct an initial survey.

(C) The board may grant, defer, or deny initial approval of the CMA or MA-C training program.

(D) After being granted approval, the institution may advertise and enroll students.

(b) **Established program approval.**

(1) **Continued approval.**

(A)(i) A survey will be conducted every five (5) years to review the program for continued compliance with the standards.

(ii) The survey report and documentation shall be submitted to the board and reviewed.

(B) The board may:

(i) Grant or defer continued approval; or

(ii) Place the program on conditional approval.

(2) **Conditional approval.**

(A) If areas of noncompliance with standards are not corrected within the timeframe established by the board, the board shall award conditional approval.

(B) The conditional approval status shall be in effect for a maximum of one (1) year to correct noncompliance deviations from the standards, unless otherwise determined by the board.

(3) The board may:

(A) Grant continued conditional approval;

(B) Grant full approval; or

(C) Withdraw the CMA or MA-C training program's approval.

(4) Satellite and distance learning sites shall:

(A) Be approved by the board prior to implementation; and

(B) Meet the same standards as the parent program.

(c) **Program requirements.**

(1) **Administration and organization.** The parent institution shall be approved by the appropriate state body.

(2) **Financial resources.** There shall be adequate financial support to provide stability, development, and effective operation of the program.

(3) **Facilities.**

(A) Each program and satellite campus shall have a clinical skills laboratory equipped with necessary educational resources.

(B) Classrooms and laboratories shall be:

(i) Available at the scheduled time;

(ii) Adequate in size for number of students; and

(iii) Climate controlled, ventilated, lighted, and equipped with seating, furnishings, and equipment conducive to learning and program goals.

(C) Adequate storage space shall be available.

(D) Facilities shall be in compliance with applicable local, state, and federal rules and regulations related to safety and the Americans with Disabilities Act.

(E) **Offices.**

(i) There shall be adequate office space for instructors.

(ii) There shall be secure space for:

(a) Records;

(b) Files;

(c) Equipment; and

(d) Supplies.

(iii) There shall be office equipment and supplies to meet the needs of faculty and clerical staff.

(F) **Clinical facilities.**

(i) Designated facilities shall provide adequate clinical learning experiences to meet course objectives.

(ii) Students shall receive orientation at each clinical site.

(4) **Personnel.**

(A) The program shall have at least one (1) instructor.

(B) The instructor shall hold a current unencumbered registered nurse license to practice in Arkansas with at least two (2) years clinical experience and/or education experience in a designated facility.

(C) The program may have clinical instructors who shall:

(i) Be licensed to practice nursing in Arkansas; and

(ii) Have at least one (1) year recent experience in a designated facility.

(D) An instructor or preceptor shall be onsite and available at all times during the student's clinical experience.

(E) There shall be secretarial and other support staff sufficient to meet the needs of the program.

(5) **Students.** There shall be written policies for admission, readmission, progression, and completion for students that include documentation of the student's qualifications that comply with Arkansas Code § 17-87-704.

(6) **Training program.**

(A) The training program shall include curriculum and learning experiences essential for the expected entry level and scope of work of the CMA or MA-C.

(B) The training program shall have at least one hundred fifteen (~~100~~ 115) hours to include:

(i) ~~Forty-five~~ Fifty (~~45~~ 50) hours of didactic study;

(ii) ~~Fifteen~~ Twenty (~~15~~ 20) hours of skills lab practice; and

(iii) Forty five (~~40~~ 45) hours of supervised progressive clinical.

(C) The didactic content shall include, but not be limited to:

(i) Role and scope of work of the CMA or MA-C;

(ii) The legal and ethical issues of medication administration;

(iii) Principles of medication properties, uses, and action;

(iv) Principles of medication administration, including:

(a) Safety;

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(b) Infection control;

(c) Communication; and

(d) Documentation skills, to include glucometer checks and subcutaneous insulin injections; and

(v) Appropriate reporting of changes in clients' condition.

(D) The skills lab shall include activities that focus on achieving the course objectives.

(E) Consideration shall be given to safety, patient acuity, and the clinical area in determining the necessary faculty-to-student ratio for clinical experiences.

(F) The faculty-to-student ratio during clinical experiences shall be no greater than 1:6.

(G)(i) There shall be a supervised progressive clinical experience with the first twenty-four (24) hours under the direct supervision of the clinical instructor.

(ii) A preceptor may supervise the remaining clinical hours.

(H) The clinical instructor shall directly supervise and document that the student has successfully completed subcutaneous insulin injections.

(7) **Preceptors.**

(A) Preceptors shall:

(i) Be licensed to practice nursing in Arkansas; and

(ii) Have at least one (1) year recent experience in a designated facility.

(B) The ratio of preceptor to student shall not exceed one-to-one (1:1).

(C) There shall be written policies for the use of preceptors that include:

(i) Communications between the program and preceptor concerning students;

(ii) Duties, roles, and responsibilities of the program, preceptor, and student; and

(iii) An evaluation process.

(D) All preceptors shall be listed on the annual report.

(8) **Program evaluation.**

(A) Appropriate records shall be maintained to assist in overall evaluation of the program.

(B) Students shall evaluate the:

(i) Courses;

(ii) Instructors;

(iii) Preceptors; and

(iv) Clinical experience.

(9) **Records.**

(A) Current program records shall be safely stored in a secure area.

(B) The final record of all students enrolled in the program shall be maintained according to the policies of the parent institution.

(C) The final record shall:

(i) Reflect courses taken and include information as indicated by the board;

(ii) Be an official documentation of program completion; and

(iii) Be printed on security paper or an official electronic document.

(D) Permanent student records shall be safely stored to prevent loss by destruction and unauthorized use.

(d) **Reports, certification examination performance, and closure reports.**

(1) **Reports.**

(A) An annual report shall be submitted in a format and date determined by the board.

(B) The board shall be notified in writing of changes affecting the program, including but not limited to:

(i) Curriculum;

(ii) School name;

(iii) Instructor; and

(iv) Ownership or merger of parent institution.

(C) Curriculum and program changes shall be approved by the board prior to implementation.

(2) **Certification examination performance.**

(A) The program shall maintain a minimum pass rate of seventy-five percent (75%) overall for ~~first time~~ certification examination candidates.

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(B) Any program with an annual pass rate below seventy-five percent (75%) shall be required to submit a plan and a progress report that includes evaluation and implementation of changes to the program to achieve the minimum pass rate.

(3) **Program closure.**

(A) Voluntary:

(i) The parent institution shall submit a letter of intent and plan for closure at least six (6) months prior to the closure;

(ii) The board shall approve the closure plan prior to implementation;

(iii) All classes and clinical experiences shall be provided until current students complete the program; and

(iv)*(a)* Records of a closed program shall be maintained by the parent institution.

(b) The institution shall notify the board of arrangements for the storage of permanent student and graduate records.

(B) Mandatory:

(i)*(a)* Upon board determination that a program has failed to comply with educational standards and approval has been withdrawn, the parent institution shall receive written notification for closure of the program.

(b) The notification shall include a requirement for a plan for:

(1) Completion of currently enrolled students; or

(2) Transfer of students to another acceptable program; and

(ii)*(a)* Records of a closed program shall be maintained by the parent institution.

(b) The institution shall notify the board of arrangements for the storage of permanent student and graduate records.

(C) **Reapplication of training programs.**

(i) A closed program may submit reapplication for ~~an~~ a CMA or MA-C Training Program after two (2) years.

(ii) Reapplication shall follow same procedure as initial program applicant.

17 CAR § 127-114. Discipline.

(a) **Grounds for discipline.**

(1) The Arkansas State Board of Nursing shall have sole authority to deny, suspend, revoke, or limit any CMA or MA-C certification issued by the board or applied for in accordance with the provisions of this part, or to otherwise discipline ~~an~~ a CMA or MA-C upon proof that the person:

(A) Has been found guilty of or pleads guilty or nolo contendere to:

(i) Fraud or deceit in procuring or attempting to procure ~~an~~ a CMA or MA-C certificate;

(ii) Providing services as ~~an~~ a CMA or MA-C without a valid certificate; or

(iii) Committing a crime ~~of moral turpitude~~;

(B) Is unfit or incompetent by reason of:

(i) Negligence;

(ii) Habits; or

(iii) Other causes;

(C) Is habitually intemperate or is addicted to the use of habit-forming drugs;

(D) Is mentally incompetent;

(E) Is guilty of unprofessional conduct;

(F) Has had a certificate or registration revoked or suspended;

(G) Has been placed on probation or under disciplinary order in any jurisdiction;

(H) Has voluntarily surrendered a certification or registration and has not been reinstated in any jurisdiction; or

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(I) Has willfully or repeatedly violated any of the provisions of this part.

(2) The board shall refuse to issue or shall revoke the certification of any person who would be disqualified from employment under the provisions of Arkansas Code § 20-38-105.

(b) **Investigative determination — Notice of finding.**

(1) The board shall have jurisdiction to investigate all cases of suspected violation of Arkansas Code § 17-87-701 et seq.

(2) Upon completion of an investigation, the board shall determine that an allegation against a ~~certificant~~ CMA or MA-C is either:

(A) Unfounded, a finding that shall be entered if the allegation is not supported by substantial evidence; or

(B) Founded, a finding that shall be entered if the allegation is supported by substantial evidence.

(3) After making an investigative determination, the board shall provide notice of the following in writing to the ~~certificant~~ CMA or MA-C at the last known address of record:

(A) The investigative determination;

(B) The disciplinary action taken against the ~~certificant~~ CMA or MA-C;

(C) Statement that the ~~certificant~~ CMA or MA-C with the founded report has the right to an administrative hearing upon a timely written request;

(D) A statement that the written request for an administrative hearing shall be made to the board within thirty (30) days of receipt of the notice of determination;

(E) The fact that the ~~certificant~~ CMA or MA-C has the right to be represented by an attorney at the ~~certificant's~~ CMAs or MA-Cs own expense;

(F) A statement that the ~~certificant's~~ CMA's or MA-C's failure to request an administrative hearing in writing within thirty (30) days from the date of receipt of the notice will result in submission of the investigative report, including the investigative determination, to all interested parties; and

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(G) The consequences of a finding by substantial evidence through the administrative hearing process that violation of Arkansas Code § 17-87-701 et seq., has occurred.

(c) **Final determination of findings.** If the board's investigative determination of founded is upheld during the administrative hearing process or if the offender does not make a timely appeal for or waives the right to an administrative hearing, the board shall report the final investigative determination in writing to all interested parties.

(d) **Subpoenas and subpoenas duces tecum.**

(1) The board shall have the power to issue subpoenas and subpoenas duces tecum in connection with its investigations and hearings.

(2) A subpoena duces tecum may require any book, writing, document, or other paper or thing that is germane to an investigation or hearing conducted by the board to be transmitted to the board.

(3) Service of subpoena shall be as provided by law for the service of subpoenas in civil cases in the circuit courts of this state, and the fees and mileage of officers serving the subpoenas and of witnesses appearing in answer to the subpoenas shall be the same as provided by law for proceedings in civil cases in the circuit courts of this state.

(4) The board shall issue a subpoena or subpoena duces tecum upon the request of any party to a hearing before the board.

(5) The fees and mileage of the officers serving the subpoena and of the witness shall be paid by the party at whose request a witness is subpoenaed.

(6) In the event a person shall have been served with a subpoena or subpoena duces tecum as provided in this section and fails to comply therewith, the board may apply to the circuit court of the county in which the board is conducting its investigation or hearing for an order causing the arrest of the person and directing that the person be brought before the court.

(7) The court shall have the power to punish the disobedient person for contempt as provided by law in the trial of civil cases in the circuit courts of this state.

(e) **Civil penalties.**

(1) The board may, after providing notice and a hearing, levy civil penalties in an amount not to exceed one thousand dollars ($1,000) for each violation against those individuals or entities found to be in violation of Arkansas Code § 17-87-101 et seq., and rules promulgated thereunder.

(2) Each day of violation shall be a separate offense.

(3) These penalties shall be in addition to other penalties which may be imposed by the board pursuant to Arkansas Code § 17-87-101 et seq.

(4) Unless the penalty assessed under this subsection is paid within fifteen (15) calendar days following the date for an appeal from the order, the board shall have the power to file suit in the Pulaski County Circuit Court to obtain a judgment for the amount of penalty not paid.

17 CAR § 127-115. Certification for uniformed service members, veterans, and spouses.

(a) **Automatic certification.**

(1) Temporary permits for individuals listed in subdivision (a)(2) of this section shall be issued within twenty-four (24) hours of receipt of all required documents.

(2) The Arkansas State Board of Nursing will give preference in the order of processing to applications for full certification filed by the following individuals:

(A) A uniformed service member stationed in the State of Arkansas;

(B) A uniformed service veteran who resides in or establishes residency in the State of Arkansas; or

(C) The spouse of a:

(i) Person under subdivision (a)(2)(A) or (B) of this section;

(ii) Uniformed service member who is assigned a tour of duty that excludes the uniformed service member's spouse from accompanying the uniformed service member and the spouse relocates to Arkansas; or

(iii) Uniformed service member who is killed or succumbs to his or her injuries or illness in the line of duty if the spouse establishes residency in Arkansas.

(b) **Extension of certification expiration date.**

(1) Upon written request and submission of appropriate documentation, a deployed uniformed service member or spouse shall be allowed an extension of the expiration date without penalty or assessment of a late fee for renewing the certification.

(2) The extension shall be effective for one hundred eighty (180) days after the service member or spouse returns from active deployment.

(c) **Consideration of military training and experience.** When considering an application for certification the board shall:

(1) Consider whether or not the applicant's military education, training, national certification, service-issued credential, and experience in the practice as a medication assistant is substantially similar to the experience or education required for certification; and

(2) Accept the applicant's military education, training, national certification, service-issued credential, and experience in the practice as a medication assistant in lieu of experience or education required for certification, if the board determines that the military training and experience is a satisfactory substitute for the experience or education required for certification.

(d) **Waiver of continuing education.**

(1) Upon written request and submission of appropriate documentation the continuing education requirements for certification renewal shall be waived for:

(A) A uniformed service member deployed; or

(B) The spouse of a deployed uniformed service member.

(2) This waiver shall be extended until one hundred eighty (180) days following the date of the uniformed service member's return from deployment.