CHAPTER 5
CONTINUING EDUCATION
[Prior to 8/26/87, Nursing Board[590] Ch 5]

655—5.1(272C) Definitions.
“Academic offering” means an extension course, independent study, or other course which is offered for academic credit or audit by an accredited institution of higher education.
“Approved provider” means a person, organization, or institution that holds an Iowa approved provider number and has met the criteria specified in subrule 5.3(4).
“Approved provider number” means the board-assigned number which identifies an Iowa approved provider.
“Audit” means the selection of licensees for verification of satisfactory completion of continuing education requirements during a specified time period; or the selection of Iowa approved providers for verification of adherence to continuing education approved provider requirements during a specified time period.
“Certification” means evidence of advanced credentials earned by a licensee who has met all eligibility criteria.
“Continuing education” means planned, organized learning activities which are designed to maintain, improve, or expand nurses’ knowledge and skills or to develop new knowledge and skills relevant to nursing for the enhancement of practice, education, administration, or theory development.
“Continuing education credit” means contact hours or continuing education units (CEUs) to show evidence of course attendance.
“Extended course” means an organized program of study offered in a series of sessions.
“Informal offering” means a workshop, seminar, webinar or online course, institute, conference, lecture, extended course, provider-designed self-study, or learner-designed self-study which is offered for credit in contact hours or continuing education units.
“Learner-designed self-study” means lecture development, research, preparation of articles for publication, development of patient care programs or patient education programs, or projects directed at resolving administrative problems in which the learner takes the initiative and the responsibility for assessing, planning, implementing, and evaluating an educational activity under the guidance of an Iowa approved provider.
“Nonapproved provider” means a person, organization, or institution that does not hold an Iowa approved provider number. The board may recognize credit from nonapproved providers as specified in subrule 5.2(7).
“Practicum” means a course-related, planned and supervised clinical experience which includes clinical objectives and assignment to practice in a laboratory setting or with patients/clients/families for attainment of the objectives.
“Provider-designed self-study” means a program that the provider designs for the nurse to complete at the nurse’s own pace, e.g., home study, programmed instruction.
[ARC 3311C; IAB 9/13/17, effective 1/1/18]

655—5.2(272C) Continuing education—licensees.
5.2(1) Board authority. The board derives its authority under Iowa Code chapter 272C to establish continuing education requirements as a prerequisite to obtain a current license and to establish an audit system to ensure compliance.
5.2(2) Requirements. To renew a license, the licensee shall verify the completion of 36 contact hours or 3.6 CEUs of credit or an exemption to the continuing education requirements. The hours shall be completed between the effective date and the expiration date of the license. The cost of continuing education is the responsibility of the licensee.
5.2(3) Accumulating hours or credit.
   a. Units of measurement used for continuing education courses shall be as follows:
      (1) One contact hour = 60 minutes of didactic instruction, work on learner-designed self-study, and clinical or laboratory practicum in an informal offering.
(2) One CEU = 10 contact hours.
(3) One academic semester hour = 15 contact hours.
(4) One academic quarter hour = 10 contact hours.

b. Continuing education credit will not be accepted for the same course more than once within a license period.

c. Continuing education credit shall not be carried over to a future license period.

d. Approved make-up credit shall not be used more than once.

5.2(4) Appropriate subject matter:

a. Appropriate subject matter for continuing education credits reflects the educational needs of the nurse learner and the health needs of the consumer. Appropriate subject matter is limited to offerings that are scientifically founded, applicable to the licensee’s practice area, and predominantly for professional growth. The following areas are deemed appropriate subject matter for continuing education credit:

(1) Nursing practice related to health care of patients/clients/families in any setting.
(2) Professional growth and development related to nursing practice roles with a health care focus.
(3) Sciences upon which nursing practice, nursing education, or nursing research is based, e.g., nursing theories and biological, physical, behavioral, computer, social, or basic sciences.

(4) Social, economic, ethical and legal aspects of health care.
(5) Management of or administration of health care, health care personnel, or health care facilities.
(6) Education of patients or patients’ significant others, students, or personnel in the health care field.

b. Continuing education credit shall not be awarded for the following:

(1) Self-help and self-care that are not scientifically supported.
(2) Cardiopulmonary resuscitation and basic life support classes.
(3) Orientation in-service activities.

Academic offerings shall meet the qualifications of appropriate subject matter as specified above or meet the requirements of a nursing education program which extends beyond the education completed for the original nursing license. The licensee shall retain a transcript exhibiting a passing grade for each academic offering.

5.2(5) Options for continuing education. The following are options to complete continuing education requirements:

a. Informal offerings approved by the following entities:

(1) Iowa board of nursing.
(2) Other state boards of nursing that have mandatory continuing education requirements.
(3) American Nurses Credentialing Center (ANCC) Commission on Accreditation.
(4) National League for Nursing (NLN).
(5) National Federation of Licensed Practical Nurses Continuing Education (NFLPN) and the NFLPN Education Foundation.

(6) National Association for Practical Nurse Education and Service, Inc. (NAPNES).
(7) American Association of Nurse Practitioners (AANP).
(8) National Association of Pediatric Nurse Practitioners (NAPNAP).
(9) Accreditation Council for Continuing Medical Education (ACCME).
(10) American Medical Association (AMA) Continuing Medical Education.
(11) International Association for Continuing Education and Training (IACET).
(12) American Psychological Association (APA).
(13) National Commission for Health Education Credentialing.
(14) National Board of Public Health Examiners.
(16) Commission for Case Manager Certification (CCMC).
(17) National Council for Behavioral Health.

b. National certification or recertification which is related to the practice of nursing and is current at the time of a license renewal. The national certification or recertification shall be recognized as 36 contact hours of continuing education.
c. Completion of a board-approved nurse refresher course. Hours of participation will be recognized as contact hours of continuing education.

d. Participation as a preceptor for a nursing student or employee transitioning into a new clinical practice area, for a minimum of 120 hours in a one-to-one relationship as part of an organized preceptorship program. A licensee shall maintain documentation issued by the institution supervising the student or employee demonstrating the objectives of the preceptorship and the hours completed. A preceptorship shall be recognized as 12 contact hours of continuing education.

e. Completion of a nurse residency program. A residency program shall be recognized as 36 contact hours of continuing education.

f. Academic offerings provided by the following entities:

(1) Community colleges.
(2) Public and private colleges and universities.
(3) Governmental academies.

5.2(6) Documentation. Licensees are required to keep the following documentation, as applicable, for a period of four years: certificates of attendance, letters verifying special approval for informal offerings from nonapproved providers, transcripts, proof of certification and documentation of compliance with an exemption. The certificates of attendance shall include licensee name, course date, course title, awarded hours, and provider approval information.

5.2(7) Special approval process. An informal offering from a nonapproved provider or an organization not specified in subrule 5.2(5) shall be accepted when the offering is specially approved by the board for an individual licensee. A licensee shall obtain special approval from the board staff, prior to the completion of the licensure period, in order to receive credit acceptable to fulfill the requirements. Special approval requires submission of a completed application and a brochure, advertisement, or course description and a certificate of attendance for the offering. Course content shall meet the qualifications of appropriate subject matter as specified in subrule 5.2(4). The licensee shall retain the approval letter from the board staff and the certificate of attendance received from the nonapproved provider. A denial of approval may be appealed to the board within 30 days of the denial.

5.2(8) Exemptions to continuing education. A licensee shall be exempt from continuing education requirements if the licensee:

a. Served honorably on active duty in the United States military services during the license period. A licensee who claims this exemption shall retain evidence of active duty to be presented upon request.

b. Possesses a current license to practice in another state that has mandatory continuing education requirements, so long as the license is active and the licensee resides in a state other than Iowa at the time of renewal or reactivation.

c. Worked as a registered nurse or licensed practical nurse for the government or foreign service or in missionary work, if the licensee was assigned to duty outside of the United States during the relevant time period. A licensee who claims this exemption shall retain evidence of employment outside of the United States to be presented upon request.

d. Had a physical or mental disability or illness during the relevant time period and applied for an extension of time to complete continuing education requirements or for a medical exemption from the continuing education requirements. An application is available upon request and requires the signature of a health care provider who can attest to the existence of a disability or illness during the license period. The application form shall be submitted prior to license expiration. A licensee shall not claim an extension of time or exemption from continuing education requirements on a license renewal application pursuant to this rule unless and until the licensee has received approval. A licensee who obtains approval shall retain a copy of the written approval to be presented upon request.

5.2(9) Failure to meet requirement or qualify for an exemption. A licensee who fails to meet continuing education requirements or qualify for an exemption prior to license expiration cannot renew the license and has the following options:

a. Complete the continuing education requirements or qualify for an exemption during the late renewal period. The licensee may be required to submit to an audit of continuing education following
the late renewal and may be reaudited in the next renewal period when late credit has been accepted. Continuing education credit shall not be used more than once.

b. If the licensee does not renew within 30 days after license expiration, the license shall be placed on inactive status. An inactive license may be reactivated pursuant to 655—subrule 3.7(5).

5.2(10) Audit of licensees. The board may select licensees for audit following a period of licensure.

a. The licensee must submit verification of compliance with continuing education requirements or of exemptions for the period of licensure being audited. Verification for satisfactory completion of the audit includes legible copies of certificates of attendance, transcripts, proof of certification, documentation of special approval of informal offerings from nonapproved providers, documentation of compliance with exemptions in subrule 5.2(8), or other appropriate documentation.

b. The licensee must submit verification of completion of the mandatory reporter training course(s) provided by the Iowa department of human services in the previous three years as specified in 655—subrule 3.7(3). The proof of completion issued by the Iowa department of human services shall satisfy the documentation requirements of subrule 5.2(6).

c. Verification must be submitted within 30 days after the date of the audit notification. An extension of time may be granted on an individual basis.

d. If submitted materials are incomplete or unsatisfactory, the licensee shall be notified. The licensee shall be given the opportunity to submit make-up credit to cover the deficit found through the audit. The licensee may be reaudited during the next renewal period when make-up credit has been accepted. The make-up credit shall not be reused for the current renewal period.

e. The board shall notify the licensee of satisfactory completion of the audit.

f. Failure to complete the audit satisfactorily or falsification of information may result in board action as described in 655—Chapter 4.

g. Failure to notify the board of a current mailing address will not absolve the licensee of the audit requirement.

[ARC 3311C, IAB 9/13/17, effective 1/1/18; ARC 4927C, IAB 2/12/20, effective 3/18/20]

655—5.3(272C) Continuing education—providers.

5.3(1) Board authority. The board derives its authority under Iowa Code chapter 272C to establish requirements for becoming an Iowa approved provider and maintaining that status. The board also has the authority to audit approved providers.

5.3(2) Initial approval process for providers. Initial approval is granted upon the submission of required materials and the determination by the board or its representative that the materials fulfill the criteria for approved providers specified in subrule 5.3(4).

a. An application for Iowa provider approval, including the procedural instructions and requirements, is available on the board’s Web site.

b. Upon receipt of three copies of the completed application materials, a review is held by a committee composed of at least three appointees of the board.

(1) The review is held at the board office within 60 days of receipt of the application.

(2) The committee review is based on the criteria specified in subrule 5.3(4).

(3) If the submitted materials meet the requirements, the committee shall approve the provider for five years and issue a provider number to the provider. The approved provider shall be notified by staff of the decision within two weeks of the committee review.

(4) If the committee finds submitted materials are incomplete or unsatisfactory, staff shall notify the provider applicant of the decision within two weeks of the committee review. The applicant is given the opportunity to meet the criteria and for an additional review to be held at the board office within six weeks of receipt of the revised application materials.

(5) If the applicant is unable to meet the criteria within two committee reviews or one year from the receipt of the initial application at the board office, whichever comes first, the committee shall recommend nonapproval at the next regularly scheduled board meeting.

(6) Notice of this recommendation of nonapproval shall be provided to the applicant by staff at least 30 days before the board meeting.
(7) The board shall make a decision regarding each recommendation of nonapproval at a board meeting.

c. A provider applicant who wishes to appeal the board’s decision regarding nonapproval shall file an appeal within 30 days of the board’s decision of nonapproval. A timely appeal shall initiate a contested case proceeding regarding the provider applicant’s approval status. The contested case shall be conducted according to the provisions of Iowa Code chapter 17A and 655—Chapter 20. The written decision issued at the conclusion of a contested case hearing shall be considered final agency action.

d. A provider applicant who has been denied approved provider status may apply no sooner than one year after denial to become an approved provider by starting the initial approval process.

5.3(3) Reapproval process for approved providers. Reapproval is granted upon the submission of required materials and the determination by the board or its representatives that the materials fulfill the criteria for approved providers specified in this chapter.

a. The board staff shall send an application for reapproval to an approved provider six months before the expiration of the current approval. The completed application shall be submitted to the board office no later than three months prior to the expiration of the current approval.

b. Upon receipt of the application for reapproval, a review shall be made by board staff at the board office within 30 days of receipt of the application.

(1) The review is based on the criteria specified in subrule 5.3(4).

(2) If the submitted materials meet the requirements, staff shall issue a renewal of the approved provider status for a five-year period.

(3) If the submitted materials are incomplete or unsatisfactory, staff shall notify the provider of the decision within two weeks of the review. The provider shall be given the opportunity to meet the criteria within 30 days of the receipt of the board office notification. If the provider is unable to meet the requirements, staff shall recommend nonapproval at the next regularly scheduled board meeting.

(4) Notice of this recommendation of nonapproval shall be provided to the applicant at least 30 days before the board meeting.

(5) The board shall make a decision regarding each recommendation of nonapproval at the board meeting.

(6) A renewal applicant who wishes to appeal the board’s decision regarding nonapproval shall file an appeal within 30 days of the board’s decision of nonapproval. A timely appeal shall initiate a contested case proceeding regarding the provider applicant’s approval status. The contested case shall be conducted according to the provisions of Iowa Code chapter 17A and 655—Chapter 20. The written decision issued at the conclusion of a contested case hearing shall be considered final agency action.

(7) A reapproval applicant who has been denied reapproval may reapply no sooner than one year after denial. The initial approval process must be followed to reapply.

5.3(4) Criteria for approved providers. Approved providers shall adhere to criteria indicative of quality continuing education for nurses. Provider approval applies to all programs regardless of geographic location.

a. Criteria related to appropriate subject matter. Appropriate subject matter for continuing education credits reflects both the educational needs of the nurse learner and the health needs of the consumer. Subject matter is limited to offerings that are scientifically founded and predominantly for professional growth. The following areas are deemed appropriate subject matter for continuing education credit:

(1) Nursing practice related to health care of patients/clients/families in any setting.

(2) Professional growth and development related to nursing practice roles with a health care focus.

(3) Sciences upon which nursing practice, nursing education, or nursing research is based, e.g., nursing theories and biological, physical, behavioral, computer, social, or basic sciences.

(4) Social, economic, ethical and legal aspects of health care.

(5) Management of or administration of health care, health care personnel, or health care facilities.

(6) Education of patients or patients’ significant others, students, or personnel in the health care field.

b. Continuing education credit shall not be awarded for the following:
(1) Self-help or self-care that is not scientifically supported.
(2) Cardiopulmonary resuscitation and basic life support classes.
(3) Orientation in-service activities.
   c. Criteria related to operation of an approved continuing education providership. The provider shall:
      (1) Have a consistent, identifiable authority who has overall responsibility for the operation of the providership. The authority shall be knowledgeable in administration and have the capability to organize, execute, and evaluate the overall operations of the providership.
      (2) Have an organizational chart to delineate lines of authority and communication within the providership, including any other cooperative or advisory committees. The organizational chart must illustrate the reporting structure of the providership within the parent organization, if applicable.
      (3) Develop and implement mission, vision and values statements specific to the providership, and a strategic plan for their implementation.
      (4) Maintain financial integrity so that participants receive the continuing education for which they have paid.
      (5) Maintain participant and program records.
      (6) Demonstrate and guarantee active nursing participation in the planning and administration of informal offerings. Nursing participation shall be documented in a written statement of policy, in denotation on the organizational chart, and in planning minutes.
      (7) Develop a subject matter plan which indicates the mechanism of assessing the practice gaps of the nurse learner and describes how the provider shall meet the appropriate subject matter criteria as specified in subparagraphs 5.3(4)‘a ‘(1) to (6).
      (8) Demonstrate planning for each offering that includes a statement of purpose and measurable and observable learning outcomes. The outcomes shall address the educational needs and shall result in narrowing or closing the identified practice gap(s).
      (9) Provide notification to licensees of the availability of informal offerings. A brochure or written advertisement shall be developed for all informal offerings other than learner-designed self-study, and an electronic copy shall be sent to the board prior to each offering. The brochure or written advertisement shall accurately describe the activities by including the date, time, and location of the informal offering, a statement of purpose, educational objectives, the intended audience, credentials of instructors, the amount of continuing education credit to be awarded, and, if applicable, costs and items covered by the fee and refund policy. The board-approved provider number shall appear on the brochure or written advertisement.
      (10) Structure the program content and learning experience to relate to the stated purpose and objectives. Program content shall cover one topic or a group of closely related topics. Current, relevant, scientifically based supportive materials shall be used.
      (11) Develop policies and procedures for verification of satisfactory completion of the activity by each participant. Policy shall include a system for verification of satisfactory completion, the control methods to ensure completion and a method to inform participants that completion of the offering is required prior to the awarding of credit. The provider may make an exception and award partial credit in extreme emergency conditions. The provider may award credit to other members of the providership who attend but do not serve as organizers during the actual offering. The provider may base the verification of satisfactory completion of an extended course on the participant’s meeting the course objectives rather than on the number of sessions attended. The provider may award credit to a nurse for learner-designed self-study such as lecture development, research, preparation of articles for publication, development of patient care programs or patient education programs, or projects directed at resolving administrative problems.
      (12) Develop policies and procedures for management of continuing education programs, including registration procedures, tuition refund, and enrollee grievances.
      (13) Assign credit according to a uniform measure of credit: One contact hour equals 60 minutes. Credit shall not be awarded for courses less than one contact hour.
(14) If desired, cosponsor an offering provided by a nonapproved provider. When cosponsoring is pursued, the approved provider is responsible for ensuring that all criteria are met. A cosponsorship contract or letter of agreement shall delineate responsibilities of all parties, which include the approved provider awarding the credit and maintaining the program and participant records. Cosponsoring is not acceptable for learner-designed self-study.

(15) An approved provider shall notify the board within 30 days of changes in the administrative authority or address of the providership, or the provider’s inability to meet the approved provider criteria.

d. Criteria related to record system and maintenance of continuing education programs. The provider shall:

(1) Maintain participant records for a minimum of four years from the date of program completion. The participant records shall include the name of the licensee, license number, contact hours awarded, titles of offerings, and dates of offerings. The record system policy and procedure shall provide for secure storage and retrieval of the participant records, shall limit employee access and shall describe security measures. Upon request from an individual nurse or the board, individual attendance and information regarding each offering shall be available within two weeks after the request. If individual nurses are assessed a fee for this retrieval service, the fee shall be specified. The board may not be charged for record retrieval requests.

(2) Maintain program records for a minimum of four years from the date of program completion. Program records for all informal offerings, other than learner-designed self-study, shall include a brochure or advertising, roster of participants to whom credit was awarded, and a summary of the program including participant and provider evaluations. The approved provider shall submit records for one informal offering in the most recent year for renewal of the approved provider status. Program records for learner-designed self-study shall include the written agreement between the learner and provider, date of completion, and learner and provider evaluations.

(3) Furnish a certificate to each participant documenting the date the credit was earned. The front of the certificate shall display: participant’s name, provider number, contact hours awarded, date(s) of the offering, program title, and a reminder to the participant to retain the certificate for four years. A certificate issued by electronic means must be a print-only file.

e. Criteria related to faculty who teach informal offerings. The faculty shall:

(1) Be current, knowledgeable, and skillful in the subject matter of the offering by supplying evidence of further education in the subject. Such education shall be acquired through course completion or an advanced degree, experience in teaching in the specialized area within the three years preceding the offering, or one year of work experience in the specialized area within the three years preceding the offering.

(2) If applicable, be skillful in assisting a nurse in designing a learner-designed self-study program by having experience or education in course design.

(3) Include an actively licensed nurse if the subject matter is nursing or if the informal offering is learner-designed self-study.

(4) Utilize teaching methodologies appropriate to the subject, audience, and time allotment.

(5) Utilize current supportive materials by drawing from resources that are predominantly less than five years old unless the topic is of an historical nature.

(6) Not receive credit when teaching participants unless the faculty is presenting the offering for the first time. Faculty may receive partial credit for other presentations attended as part of the same offering.

(7) Not receive credit for learner-designed self-study from a provider which employs the faculty in the regular administration of the providership.

f. Criteria related to evaluation of continuing education programs. The provider shall include:

(1) A design for participants to assess achievement of program objectives, faculty effectiveness, and teaching-learning methodologies, resources and facilities for each offering.

(2) A summary evaluation process to assess the effectiveness of the offering and identify how results may be used to plan future offerings.
(3) A method of notifying the participants that the evaluation may be submitted directly to the board.

5.3(5) Voluntary relinquishment of an approved providership. An approved provider may voluntarily relinquish its provider number in one of two ways: Method one is to notify the board in writing that it no longer wants to be an Iowa approved provider. Method two is when an approved provider does not submit the required materials for reapproval or is unable to be located by the board, by certified mail, the board will consider that the provider has voluntarily relinquished its approved provider status.

a. When the approved providership has been voluntarily relinquished, the provider shall discontinue providing continuing education as an Iowa approved provider.

b. The provider shall maintain the records as required in subrule 5.3(4) for four years after the last credit was granted or shall transfer the records to the custody of the board.

c. The board staff shall notify other states which have mandatory nursing continuing education of the relinquishment of the approved provider status and the reason(s) for relinquishment.

d. The provider whose approved provider status has been voluntarily relinquished may apply to become an approved provider by starting the initial approval process.

5.3(6) Audit of approved providers. The board shall monitor approved providers for adherence to criteria as established in this chapter.

a. The board may order an audit of an approved provider or may audit as a result of a written complaint. A written complaint may be filed with the board against a provider for acts or omissions which indicate a failure to meet the criteria established in this chapter.

b. The board may revoke the approved-provider status for willful or repeated failure to meet one or more of the criteria specified in subrule 5.3(4).

c. A notice of revocation shall be issued to the provider. A provider who wishes to appeal the board’s decision regarding revocation shall file an appeal within 30 days of the board’s decision of revocation. A timely appeal shall initiate a contested case proceeding regarding the provider’s revocation. The contested case shall be conducted according to the provisions of Iowa Code chapter 17A and 655—Chapter 20. The written decision issued at the conclusion of a contested case hearing shall be considered final agency action.

d. A provider whose approved-provider status has been revoked shall no longer advertise that the provider is an approved provider. The provider number shall no longer be used or appear in brochures, advertisements, certificates, or other materials.

e. A provider whose approved-provider status has been revoked shall maintain the records required in subrule 5.3(4) for four years after the last credit was granted or shall transfer the records to the custody of the board.

f. The board shall notify other states that have mandatory nursing continuing education of the revocation of the approved-provider status and the reason(s) for revocation.

g. A provider whose approved-provider status has been revoked may reapply no sooner than one year after the revocation of approval. The initial approval process must be followed to reapply.

[ARC 3311C, IAB 9/13/17, effective 1/1/18]

These rules are intended to implement Iowa Code sections 272C.2 and 272C.3.

[Filed 3/28/78, Notice 2/8/78—published 4/19/78, effective 5/24/78]
[Filed 12/11/78, Notice 10/18/78—published 12/27/78, effective 1/31/79]
[Filed 2/22/85, Notice 1/2/85—published 3/13/85, effective 6/1/85]
[Filed without Notice 3/28/85—published 4/24/85, effective 6/1/85]
[Filed 1/21/86, Notice 10/23/85—published 2/12/86, effective 3/19/86]
[Filed 4/15/86, Notice 2/26/86—published 5/7/86, effective 6/11/86]
[Filed 7/23/86, Notice 5/21/86—published 8/13/86, effective 9/17/86]
[Filed emergency 7/29/87—published 8/26/87, effective 7/29/87]
[Filed 5/26/89, Notice 2/22/89—published 6/14/89, effective 7/19/89]
[Filed 12/19/91, Notice 7/24/91—published 1/8/92, effective 2/12/92]
[Filed emergency 2/20/92—published 3/18/92, effective 2/20/92]
[Filed emergency 11/9/00—published 11/29/00, effective 11/9/00]
[Filed emergency 7/20/01—published 8/8/01, effective 7/20/01]
[Filed 9/28/01, Notice 8/8/01—published 10/17/01, effective 11/21/01]
[Filed 10/1/04, Notice 7/7/04—published 10/27/04, effective 1/3/05]
[Filed ARC 2339C (Notice ARC 2109C, IAB 8/19/15), IAB 1/6/16, effective 2/10/16]
[Filed ARC 3311C (Notice ARC 3046C, IAB 5/10/17), IAB 9/13/17, effective 1/1/18]
[Filed ARC 4927C (Notice ARC 4744C, IAB 11/6/19), IAB 2/12/20, effective 3/18/20]