State of Arizona  
Senate  
Fifty-fourth Legislature  
First Regular Session  
2019

CHAPTER 111

SENATE BILL 1089

AN ACT

AMENDING SECTIONS 20-841.09, 20-1057.13, 20-1376.05 AND 20-1406.05, ARIZONA REVISED STATUTES; RELATING TO TELEMEDICINE.

(TEXT OF BILL BEGINS ON NEXT PAGE)
Be it enacted by the Legislature of the State of Arizona:

Section 1. Section 20-841.09, Arizona Revised Statutes, is amended to read:

20-841.09. Telemedicine; coverage of health care services; definition

A. All contracts issued, delivered or renewed on or after January 1, 2018 must provide coverage for health care services that are provided through telemedicine if the health care service would be covered were it provided through in-person consultation between the subscriber and a health care provider and provided to a subscriber receiving the service in this state. A CORPORATION MAY NOT LIMIT OR DENY THE COVERAGE OF HEALTH CARE SERVICES PROVIDED THROUGH TELEMEDICINE AND MAY APPLY ONLY THE SAME LIMITS OR EXCLUSIONS ON A HEALTH CARE SERVICE PROVIDED THROUGH TELEMEDICINE THAT ARE APPLICABLE TO AN IN-PERSON CONSULTATION FOR THE SAME HEALTH CARE SERVICE. The contract may limit the coverage to those health care providers who are members of the corporation's provider network.

B. This section does not prevent a corporation from imposing deductibles, copayment or coinsurance requirements for a health care service provided through telemedicine if the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation for the same health care service.

C. Services provided through telemedicine or resulting from a telemedicine consultation ARE SUBJECT TO ALL OF THIS STATE'S LAWS AND RULES THAT GOVERN PRESCRIBING, DISPENSING AND ADMINISTERING PRESCRIPTION PHARMACEUTICALS AND DEVICES AND shall comply with Arizona licensure requirements, accreditation standards and any practice guidelines of a national association of medical professionals promoting access to medical care for consumers via telecommunications technology or other qualified medical professional societies to ensure quality of care.

D. This section does not apply to limited benefit coverage as defined in section 20-1137.

E. For the purposes of this section,

1. "Health care services" means services provided for the following conditions or in the following settings:
   (a) Trauma.
   (b) Burn.
   (c) Cardiology.
   (d) Infectious diseases.
   (e) Mental health disorders.
   (f) Neurologic diseases including strokes.
   (g) Dermatology.
   (h) Pulmonology.
   (i) Beginning January 1, 2020, urology.
   (j) Beginning January 1, 2019, pain medicine.
   (k) Beginning January 1, 2019, substance abuse.
2. "telemedicine":
   1. Means the interactive use of audio, video or other electronic media, INCLUDING ASYNCHRONOUS STORE-AND-FORWARD TECHNOLOGIES AND REMOTE PATIENT MONITORING TECHNOLOGIES, for the purpose of diagnosis, consultation or treatment.
   2. Does not include the sole use of an audio-only telephone, a video-only system, a facsimile machine, instant messages or electronic mail.

Sec. 2. Section 20-1057.13, Arizona Revised Statutes, is amended to read:

20-1057.13. Telemedicine; coverage of health care services; definition

A. An evidence of coverage issued, delivered or renewed by a health care services organization on or after January 1, 2018 must provide coverage for health care services that are provided through telemedicine if the health care service would be covered were it provided through in-person consultation between the enrollee and a health care provider and provided to an enrollee receiving the service in this state. A HEALTH CARE SERVICES ORGANIZATION MAY NOT LIMIT OR DENY THE COVERAGE OF HEALTH CARE SERVICES PROVIDED THROUGH TELEMEDICINE AND MAY APPLY ONLY THE SAME LIMITS OR EXCLUSIONS ON A HEALTH CARE SERVICE PROVIDED THROUGH TELEMEDICINE THAT ARE APPLICABLE TO AN IN-PERSON CONSULTATION FOR THE SAME HEALTH CARE SERVICE. The evidence of coverage may limit the coverage to those health care providers who are members of the health care services organization's provider network.

B. This section does not prevent a health care services organization from imposing deductibles, copayment or coinsurance requirements for a health care service provided through telemedicine if the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation for the same health care service.

C. Services provided through telemedicine or resulting from a telemedicine consultation ARE SUBJECT TO ALL OF THIS STATE'S LAWS AND RULES THAT GOVERN PRESCRIBING, DISPENSING AND ADMINISTERING PRESCRIPTION PHARMACEUTICALS AND DEVICES AND shall comply with Arizona licensure requirements, accreditation standards and any practice guidelines of a national association of medical professionals promoting access to medical care for consumers via telecommunications technology or other qualified medical professional societies to ensure quality of care.

D. This section does not apply to limited benefit coverage as defined in section 20-1137.

E. For the purposes of this section, "Health care services" means services provided for the following conditions or in the following settings.
(a) Trauma.
(b) Burn.
(c) Cardiology.
(d) Infectious diseases.
(e) Mental health disorders.
(f) Neurologic diseases including strokes.
(g) Dermatology.
(h) Pulmonology.
(i) Beginning January 1, 2020, urology.
(j) Beginning January 1, 2019, pain medicine.
(k) Beginning January 1, 2019, substance abuse.

"telemedicine":
   1. Means the interactive use of audio, video or other
electronic media, INCLUDING ASYNCHRONOUS STORE-AND-FORWARD TECHNOLOGIES
AND REMOTE PATIENT MONITORING TECHNOLOGIES, for the purpose of diagnosis,
consultation or treatment.
   2. Does not include the sole use of an audio-only telephone, a
video-only system, a facsimile machine, instant messages or electronic
mail.

Sec. 3. Section 20-1376.05, Arizona Revised Statutes, is amended to
read:
   20-1376.05. Telemedicine; coverage of health care services;
definition

A. All policies issued, delivered or renewed by a disability
insurer on or after January 1, 2018 must provide coverage for health care
services that are provided through telemedicine if the health care service
would be covered were it provided through in-person consultation between
the insured and a health care provider and provided to an insured
receiving the service in this state. A DISABILITY INSURER MAY NOT LIMIT
OR DENY THE COVERAGE OF HEALTH CARE SERVICES PROVIDED THROUGH TELEMEDICINE
AND MAY APPLY ONLY THE SAME LIMITS OR EXCLUSIONS ON A HEALTH CARE SERVICE
PROVIDED THROUGH TELEMEDICINE THAT ARE APPLICABLE TO AN IN-PERSON
CONSULTATION FOR THE SAME HEALTH CARE SERVICE. The policy may limit the
coverage to those health care providers who are members of the disability
insurer's provider network.

B. This section does not prevent a disability insurer from imposing
deductibles, copayment or coinsurance requirements for a health care
service provided through telemedicine if the deductible, copayment or
coinsurance does not exceed the deductible, copayment or coinsurance
applicable to an in-person consultation for the same health care service.

C. Services provided through telemedicine or resulting from a
telemedicine consultation ARE SUBJECT TO ALL OF THIS STATE'S LAWS AND
RULES THAT GOVERN PRESCRIBING, DISPENSING AND ADMINISTERING PRESCRIPTION
PHARMACEUTICALS AND DEVICES AND shall comply with Arizona licensure
requirements, accreditation standards and any practice guidelines of a
national association of medical professionals promoting access to medical care for consumers via telecommunications technology or other qualified medical professional societies to ensure quality of care.

D. This section does not apply to limited benefit coverage as defined in section 20-1137.

E. For the purposes of this section, "Health care services" means services provided for the following conditions or in the following settings:

   (a) Trauma.
   (b) Burn.
   (c) Cardiology.
   (d) Infectious diseases.
   (e) Mental health disorders.
   (f) Neurologic diseases including strokes.
   (g) Dermatology.
   (h) Pulmonology.
   (i) Beginning January 1, 2020, urology.
   (j) Beginning January 1, 2019, pain medicine.
   (k) Beginning January 1, 2019, substance abuse.

2. "Telemedicine":

   (a) Means the interactive use of audio, video or other electronic media, INCLUDING ASYNCHRONOUS STORE-AND-FORWARD TECHNOLOGIES AND REMOTE PATIENT MONITORING TECHNOLOGIES, for the purpose of diagnosis, consultation or treatment.

   (b) Does not include the sole use of an audio-only telephone, a video-only system, a facsimile machine, instant messages or electronic mail.

Sec. 4. Section 20-1406.05, Arizona Revised Statutes, is amended to read:

   20-1406.05. Telemedicine; coverage of health care services; definition

A. All policies issued, delivered or renewed by a group disability insurer or a blanket disability insurer on or after January 1, 2018 must provide coverage for health care services that are provided through telemedicine if the health care service would be covered were it provided through in-person consultation between the insured and a health care provider and provided to an insured receiving the service in this state. A BLANKET DISABILITY INSURER MAY NOT LIMIT OR DENY THE COVERAGE OF HEALTH CARE SERVICES PROVIDED THROUGH TELEMEDICINE AND MAY APPLY ONLY THE SAME LIMITS OR EXCLUSIONS ON A HEALTH CARE SERVICE PROVIDED THROUGH TELEMEDICINE THAT ARE APPLICABLE TO AN IN-PERSON CONSULTATION FOR THE SAME HEALTH CARE SERVICE. The policy may limit the coverage to those health care providers who are members of the insurer's provider network.

B. This section does not prevent a group or blanket disability insurer from imposing deductibles, copayment or coinsurance requirements...
for a health care service provided through telemedicine if the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation for the same health care service.

C. Services provided through telemedicine or resulting from a telemedicine consultation ARE SUBJECT TO ALL OF THIS STATE'S LAWS AND RULES THAT GOVERN PRESCRIBING, DISPENSING AND ADMINISTERING PRESCRIPTION PHARMACEUTICALS AND DEVICES AND shall comply with Arizona licensure requirements, accreditation standards and any practice guidelines of a national association of medical professionals promoting access to medical care for consumers via telecommunications technology or other qualified medical professional societies to ensure quality of care.

D. This section does not apply to limited benefit coverage as defined in section 20-1137.

E. For the purposes of this section, —

1. “Health care services” means services provided for the following conditions or in the following settings:
   (a) Trauma.
   (b) Burn.
   (c) Cardiology.
   (d) Infectious diseases.
   (e) Mental health disorders.
   (f) Neurologic diseases including strokes.
   (g) Dermatology.
   (h) Pulmonology.
   (i) Beginning January 1, 2020, urology.
   (j) Beginning January 1, 2019, pain medicine.
   (k) Beginning January 1, 2019, substance abuse.

2. “telemedicine”:
   1. Means the interactive use of audio, video or other electronic media, INCLUDING ASYNCHRONOUS STORE-AND-FORWARD TECHNOLOGIES AND REMOTE PATIENT MONITORING TECHNOLOGIES, for the purpose of diagnosis, consultation or treatment.
   2. Does not include the sole use of an audio-only telephone, a video-only system, a facsimile machine, instant messages or electronic mail.

Sec. 5. Effective date

This act is effective from and after December 31, 2020.