Southwest Telehealth Resource Center covers the states of Arizona, Colorado, Nevada, New Mexico & Utah.

A few notes about this report:
1. Bills are organized into specific telehealth “topic area”.
2. The Fiscal Note (FN) Outlook: The left hand column indicates the bill’s Pre-Floor Score, and the right hand column indicates the bill’s actual Floor Score of the last chamber it was in (either Senate or House).
3. Regulations are listed at the end in order of their publication date.
4. If you would like to learn more about any piece of legislation or regulation, the bill numbers and regulation titles are clickable and link out to additional information.

**All Bills (by Topic)**

**Cross-State Licensing (1)**

<table>
<thead>
<tr>
<th>State</th>
<th>Bill Number</th>
<th>Last Action</th>
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<tbody>
<tr>
<td>UT</td>
<td>HB 161</td>
<td>Governor Signed 2020 03 31</td>
<td>Enacted</td>
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**Title**
Audiology and Speech-language Pathology Interstate Compact

**Primary Sponsors**
Derrin Owens, Evan Vickers

**Bill Summary:** Enters Utah into the Audiology and Speech-language Pathology Interstate Compact.

**Introduction Date:** 2020-01-27

**Demonstrations, Grants & Pilot Projects (2)**
<table>
<thead>
<tr>
<th>State</th>
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<tbody>
<tr>
<td>CO</td>
<td>HB 20-1411</td>
<td>Introduced In House Assigned To State Veterans Military Affairs 2020 06 04</td>
<td>In House</td>
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</table>

**Title**
COVID-19 Funds Allocation For Behavioral Health

**Description**
Concerning the allocation of money the state received from the federal coronavirus relief fund for behavioral health services.

**Primary Sponsors**
Dafna Michaelson Jenet, Tracy Kraft-Tharp, Brittany Pettersen

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<tr>
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<tr>
<td>UT</td>
<td>SB 8</td>
<td>Governor Signed 2020 03 30</td>
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**Title**
State Agency and Higher Education Compensation Appropriations

**Bill Summary:** Allocates funds to the Utah Education and Telehealth Network.

**Primary Sponsors**
Don Ipson, Jefferson Moss

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**Online Prescribing (1)**

<table>
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<th>Bill Number</th>
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<tbody>
<tr>
<td>UT</td>
<td>HB 313</td>
<td>Governor Signed 2020 03 24</td>
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**Title**
Telehealth Parity Amendments

**Bill Summary:** This bill amends the definition of telemedicine services; clarifies the scope of telehealth practice; and requires certain health benefit plans to provide coverage parity and commercially reasonable reimbursement for telehealth services and telemedicine services.

**Introduction Date:** 2020-02-12

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**Private Payer Reimbursement (2)**
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<th>Bill Number</th>
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<tr>
<td>CO</td>
<td>SB 20-212</td>
<td>Senate Committee On State Veterans Military Affairs Refer Amended To Appropriations 2020 06 02</td>
<td>In Senate</td>
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</table>

**Title**
Reimbursement For Telehealth Services

**Description**
The bill prohibits a health insurance carrier from: Imposing specific requirements or limitations on the technologies used to deliver telehealth services; Requiring a covered person to have a previously established patient-provider relationship with a specific provider in order to receive medically necessary telehealth services from the provider; or Imposing additional certification, location, or training requirements as a condition of reimbursement for telehealth services. The bill specifies that, to the extent the state board of health adopts rules addressing supervision requirements for home care agencies, the rules must allow for supervision in person or by telemedicine or telehealth. For purposes of the medicaid program, the bill: Clarifies the methods of communication that may be used for telemedicine; Requires the department of health care policy and financing to reimburse rural health clinics, the federal Indian health service, and federally qualified health centers for telemedicine services provided to medicaid recipients and to do so at the same rate as the department reimburses those services when provided in person; and Specifies that health care and mental health care services include physical therapy, occupational therapy, hospice care, home health care, and pediatric behavioral health care. (Note: This summary applies to this bill as introduced.)

**Primary Sponsors**
Faith Winter, Jack Tate, Susan Lontine, Matt Soper

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**Title**
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**Introduction Date:** 2020-02-12

**Provider-Patient Relationship (1)**
Title
Telehealth Parity Amendments

Primary Sponsors
Melissa Ballard, Allen Christensen

Bill Summary: This bill amends the definition of telemedicine services; clarifies the scope of telehealth practice; and requires certain health benefit plans to provide coverage parity and commercially reasonable reimbursement for telehealth services and telemedicine services.

Introduction Date: 2020-02-12

Title
Sunset Occupational Therapy Practice Act

Description
Sunset Process - House Public Health Care and Human Services Committee. The bill implements, with amendments, the recommendations of the department of regulatory agencies (department) in its sunset review and report on the licensing of occupational therapists and occupational therapy assistants (OTAs) by the director of the division of professions and occupations in the department. Specifically: Sections 1 and 2 of the bill continue the "Occupational Therapy Practice Act" (act) for 10 years, until 2030, rather than for 7 years, as recommended by the department; Sections 3 and 4 modify the legislative declaration and certain definitions related to the scope of practice of occupational therapy; Section 5 designates "occupational therapy consultant", "M.O.T.", "M.O.T./L.", "occupational therapy assistant", and "O.T.A." as protected titles under the act and clarifies that individuals who legally practice temporarily as occupational therapists in Colorado may use protected titles; Sections 7, 8, and 14 15 reorder and amend certain provisions of the act concerning examinations and applications for licensure by occupational therapists and OTAs; Sections 11 and 13 12 and 14 add certain prohibited behaviors as grounds for discipline and reorder certain provisions concerning disciplinary proceedings; and Sections 6, 9, 10, 11, and 12 13 make technical corrections throughout the act. Section 10 also states that the act does not authorize an occupational therapist to practice optometry. (Note: Italicized words indicate new material added to the original summary; dashes through words indicate deletions from the original summary.) (Note: This summary applies to the reengrossed version of this bill as introduced in the second house.)

Primary Sponsors
Jonathan Singer, Colin Larson, Rhonda Fields

Bill Summary: Defines telehealth and telerehabilitation for occupational therapy practice.

Introduction Date: 2020-01-31
<table>
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<th>State</th>
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<td>UT</td>
<td>SB 135</td>
<td>Governor Signed 2020 03 28</td>
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**Title**  
Dental Practice Act Amendments

**Primary Sponsors**  
Allen Christensen, Steve Eliason

**Bill Summary:** Provides for practice standards for the practice of teledentistry.

**Introduction Date:** 2020-02-13
### SWTRC Regulatory Update - May 2020

**Jun 05, 2020**

**Total State Regs Exported : 6**

<table>
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**Issues**
Demonstrations, Grants & Pilot Projects

**Labels**

**Title**
MEDICAL ASSISTANCE - STATEMENTS OF BASIS AND PURPOSE AND RULE HISTORY

**Agency**
Medical Services Board (Volume 8; Medical Assistance, Children's Health Plan) (CO)

**Description**
see attachment

**Regulation Summary**
Proposes to remove the face-to-face requirement under the Primary Care Fund rule, allowing for telemedicine appointments to be acceptable in the Primary Care Fund grant program.

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<td>Proposed Rule</td>
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**Issues**
Private Payer Reimbursement, Coronavirus

**Labels**

**Title**
LIFE, ACCIDENT AND HEALTH, Series 4-2 Accident and Health (General)

**Agency**
Division of Insurance (CO)

**Description**
4-2-72 - CONCERNING COVERAGE AND COST SHARING REQUIREMENTS FOR COMMERCIAL INSURANCE MARKET COVERAGE OF COVID-19 CLAIMS - The purpose of this regulation is to establish coverage and cost-sharing requirements for commercial insurance carriers related to claims arising from the testing and treatment of COVID-19 and to ensure covered persons have access to prescription drugs during the COVID-19 emergency.

**Regulation Summary**
Requires carriers to provide coverage for in-network telehealth services for COVID-19-related testing and treatment with no cost share for the covered person.

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**Issues**
Regulatory, Licensing & Advisory Boards

**Labels**

**Title**
4 A.A.C. 6 BOARD OF BEHAVIORAL HEALTH EXAMINERS [R20-78]

**Agency**

**Description**

**Regulation Summary**
Updates the telepractice rules to align with national trends.

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**Issues**
Private Payer Reimbursement, Coronavirus, Medicaid Reimbursement

**Labels**

**Title**
Establishes provisions governing cost sharing, prescriptions and information relating to COVID-19

**Agency**
Commissioner of Insurance; Division of Insurance (NV)

**Description**

**Regulation Summary**
Requires an insurer that issues a policy of group health insurance shall provide information concerning available benefits, options for medical advice and treatment through telehealth and preventative measures related to COVID-19 to each insured and provider of health care that participates in the network plan of the insurer.
Some Office of Behavioral Health (OBH) rules limit the ability for agencies to provide behavioral health services via telehealth amid the COVID-19 crisis and require in-person or face-to-face contact. This emergency rule update allows the utilization of verbal consent to treatment, receipt of behavioral health services through video technology, emergency license modification for agencies to continue to provide behavioral health services in the event of a statewide emergency, and modification of on-site inspection requirements for agency license and designation reviews.

Regulation Summary

This emergency rule update allows the utilization of verbal consent to treatment, receipt of behavioral health services through video technology, emergency license modification for agencies to continue to provide behavioral health services in the event of a statewide emergency, and modification of on-site inspection requirements for agency license and designation reviews.
The proposed substantive amendments in this filing are as follows: In Section R156-17b-102, adds definitions for the terms "Area of need", "Mail service retail pharmacy", "MPJE", "Remote Dispensing Pharmacist in Charge"/"RDPIC", "Remote dispensing pharmacy", "Retail Pharmacy", "Supervising pharmacy", and "Telepharmacy system". In Section R156-17b-106, clarifies the use of "shall" or "may" as used in this rule. Although these conventions are understood for Utah laws and rules, adding this special clarification to the pharmacy rule is important because there are other standards that apply in the pharmacy profession when using the terms shall and may. In Section R156-17b-203, creates an Advisory Pharmacy Compounding Education Committee (Committee). The Committee shall be composed of seven members, diversified between retail pharmacy, hospital pharmacy, and other pharmacy specialties deemed pertinent by the Division in collaboration with the Board. In Section R156-17b-302, clarifies that Class A pharmacies include retail pharmacies, mail service retail pharmacies, and remote dispensing pharmacies, and that a Class A pharmacy needs a PIC or a remote dispensing pharmacist in charge (RDPIC). In Section R156-17b-303a, clarifies that an applicant may prove current college admission by written verification from "a" dean of the college. In Section R156-17b-303c, clarifies that a pharmacist applicant will need to take the Utah MPJE exam. In Section R156-17b-304, clarifies that a temporary pharmacist will need to submit evidence of having secured employment in Utah conditioned upon issuance of the temporary license, and that the employment is under the direct, on-site supervision of a pharmacist with an active, non-temporary Utah license that includes a controlled substance license. In Section R156-17b-305, clarifies licensure by endorsement requirements for a pharmacist. In Section R156-17b-309, updates the continuing education topics and requirements for pharmacists and pharmacy technicians, including requiring two CE hours in immunizations or vaccine-related topics for pharmacy technicians who engage in the administration of immunizations or vaccines. In Section R156-17b-402, replaces all administrative penalty subsections with a fine schedule. In Section R156-17b-502, formats certain provisions to fit with the new fine schedule, and adds to the definition of unprofessional conduct "failing to comply with the operating standards for a remote dispensing pharmacy as established in Section R156-17b-614g". In Section R156-17b-601, clarifies the scope of practice for pharmacy technicians and pharmacy technician trainees. In particular, this amendment will allow pharmacy technicians to administer vaccines and emergency medications pursuant to delegation by a pharmacist under the Vaccine Administration Protocol: Standing Order to Administer Immunizations and Emergency Medications adopted March 26, 2019, if the pharmacy technician completes certain required initial training and CE, and is under direct, on-site supervision by the delegating pharmacist. In Section R156-17b-610, clarifies that patient counseling may be provided through a telepharmacy system. In Section R156-17b-612, minor wording changes were made in this section regarding prescriptions operating standards. In Section R156-17b-614a, clarifies that a remote dispensing pharmacy may dispense a prescription drug or device to a patient if a pharmacist or DMP is physically present and immediately available in the facility, or supervising through a telepharmacy system. Section R156-17b-614g is new and establishes and clarifies the qualifications and operating standards for a remote dispensing pharmacy. In Section R156-17b-615, clarifies that a Class C pharmacy may be located in the same building as a separately licensed Class A, B, D, or E third-party logistics provider. Section R156-17b-617g in new and establishes operating standards for a third party logistics provider. In Section R156-17b-621, allows pharmacy interns and pharmacy technicians to administer immunizations and emergency medications pursuant to delegation by a pharmacist under the March 26, 2019, Vaccine Administration Protocol, and establishes and clarifies the required training for pharmacists, pharmacy interns, and pharmacy technicians who will be engaging in the administration of a prescription drug or device, or engaging in the administration of vaccines. In Section R156-17b-623, clarifies the drugs that may be dispensed by a dispensing medical practitioner in accordance with Subsection S8-17b-802(1) and Section S8-17b-803.

Clarifies the requirements and operating standards for the practice of telepharmacy through a remote dispensing pharmacy.