

**TELEMEDICINE AMENDMENTS**

2024 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Melissa G. Ballard**

Senate Sponsor: \_\_\_\_\_

---

---

**LONG TITLE**

**General Description:**

This bill amends provisions relating to reimbursement for telemedicine services.

**Highlighted Provisions:**

This bill:

▸ requires a health benefit plan to reimburse a provider for certain telemedicine services at the same rate the plan reimburses the provider for the same services delivered in-person; and

▸ makes technical corrections.

**Money Appropriated in this Bill:**

None

**Other Special Clauses:**

None

**Utah Code Sections Affected:**

AMENDS:

**31A-22-649.5**, as last amended by Laws of Utah 2023, Chapter 328

---

---

*Be it enacted by the Legislature of the state of Utah:*

Section 1. Section **31A-22-649.5** is amended to read:

**31A-22-649.5. Insurance parity for telemedicine services -- Method of technology used.**



28 (1) As used in this section:

29 (a) "Mental health condition" means a mental disorder or a substance-related disorder  
30 that falls under a diagnostic category listed in the [~~Diagnostic and Statistical Manual~~]  
31 Diagnostic and Statistical Manual of Mental Disorders, as periodically revised.

32 (b) "Telemedicine services" means the same as that term is defined in Section  
33 26B-4-704.

34 (2) Notwithstanding the provisions of Section 31A-22-618.5, a health benefit plan  
35 offered in the individual market, the small group market, or the large group market shall:

36 (a) provide coverage, at a minimum, for:

37 (i) telemedicine services that are covered by Medicare; and

38 (ii) treatment of a mental health condition through telemedicine services if:

39 (A) the health benefit plan provides coverage for the treatment of the mental health  
40 condition through in-person services; and

41 (B) the health benefit plan determines treatment of the mental health condition through  
42 telemedicine services meets the appropriate standard of care; [~~and~~]

43 (b) reimburse a network provider that provides the telemedicine services described in  
44 Subsection (2)(a) at a negotiated commercially reasonable rate[-]; and

45 (c) for a health benefit plan entered into or renewed on or after January 1, 2025, if a  
46 network provider delivers health care services at an in-person location in the state, reimburse  
47 telemedicine services that are delivered by the network provider, other than for telemedicine  
48 services that are specifically included as part of a contracted arrangement that shares risk or  
49 bundles payment, at a rate that is:

50 (i) for services for treatment of a mental health condition, the same rate that is  
51 contracted with the network provider for the same health care services that are delivered  
52 in-person; or

53 (ii) for services other than for treatment of a mental health condition, at least 90% of  
54 the rate that is paid to the network provider for the same health care services that are delivered  
55 in-person.

56 (3) (a) Notwithstanding Section 31A-45-303, a health benefit plan providing coverage  
57 under Subsection (2)(a) may not impose originating site restrictions, geographic restrictions, or  
58 distance-based restrictions.

59 (b) A network provider that provides the telemedicine services described in Subsection  
60 (2)(a) may utilize any synchronous audiovisual technology for the telemedicine services that is  
61 compliant with the federal Health Insurance Portability and Accountability Act of 1996.

62 Section 2. **Effective date.**

63 This bill takes effect on May 1, 2024.