

REFERENCE TITLE: health care providers; religious beliefs

State of Arizona
House of Representatives
Fifty-fourth Legislature
Second Regular Session
2020

HB 2068

Introduced by
Representatives Powers Hannley: Blanc, Fernandez

AN ACT

AMENDING TITLE 36, ARIZONA REVISED STATUTES, BY ADDING CHAPTER 33;
RELATING TO HEALTH CARE PROVIDERS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Title 36, Arizona Revised Statutes, is amended by adding
3 chapter 33, to read:

4 CHAPTER 33

5 PATIENT REPRODUCTIVE HEALTH CARE OPTIONS

6 ARTICLE 1. GENERAL PROVISIONS

7 36-3301. Definitions

8 IN THIS ARTICLE, UNLESS THE CONTEXT OTHERWISE REQUIRES:

9 1. "CLINICAL PRIVILEGES" MEANS PRIVILEGES WITH OR MEMBERSHIP ON THE
10 MEDICAL STAFF OF A HEALTH CARE ENTITY AND OTHER CIRCUMSTANCES PERTAINING
11 TO THE FURNISHING OF HEALTH CARE SERVICES UNDER WHICH THE HEALTH CARE
12 ENTITY ALLOWS A PHYSICIAN OR OTHER HEALTH CARE PRACTITIONER TO FURNISH
13 SUCH CARE.

14 2. "HEALTH CARE ENTITY" MEANS ANY OF THE FOLLOWING:

15 (a) A HOSPITAL THAT IS LICENSED TO PROVIDE HEALTH CARE SERVICES IN
16 THIS STATE.

17 (b) AN ENTITY THAT PROVIDES HEALTH CARE SERVICES AND THAT FOLLOWS A
18 FORMAL PEER REVIEW PROCESS TO FURTHER QUALITY HEALTH CARE.

19 (c) A HEALTH CARE FACILITY OR INSTITUTION THAT IS LICENSED PURSUANT
20 TO CHAPTER 4 OF THIS TITLE.

21 (d) A HEALTH PROFESSIONAL AS DEFINED IN SECTION 32-3201 WHO
22 PROVIDES REPRODUCTIVE HEALTH CARE SERVICES TO HUMANS.

23 3. "HEALTH CARE PRACTITIONER" MEANS AN INDIVIDUAL, OTHER THAN A
24 PHYSICIAN, WHO IS LICENSED OR OTHERWISE AUTHORIZED BY THIS STATE TO
25 PROVIDE ANY TYPE OF REPRODUCTIVE HEALTH CARE SERVICES.

26 4. "HEALTH CARE SERVICES" MEANS:

27 (a) INPATIENT HOSPITAL SERVICES, INCLUDING INPATIENT CRITICAL
28 ACCESS HOSPITAL SERVICES OR EXTENDED CARE SERVICES.

29 (b) OUTPATIENT DIAGNOSTIC OR THERAPEUTIC ITEMS OR SERVICES,
30 OUTPATIENT SURGICAL SERVICES OR OUTPATIENT MEDICAL SERVICES WITH A
31 PHYSICIAN OR OTHER LICENSED HEALTH CARE PRACTITIONER WHO HAS CLINICAL
32 PRIVILEGES.

33 (c) ANY SERVICES PROVIDED BY A HEALTH CARE PRACTITIONER.

34 5. "HOSPITAL" MEANS AN ENTITY THAT:

35 (a) PRIMARILY PROVIDES, BY OR UNDER THE SUPERVISION OF PHYSICIANS,
36 INPATIENT DIAGNOSTIC SERVICES AND THERAPEUTIC SERVICES TO MEDICALLY
37 DIAGNOSE, TREAT AND CARE FOR INJURED OR SICK PERSONS OR PERSONS WITH A
38 DISABILITY OR REHABILITATION SERVICES FOR INJURED OR SICK PERSONS OR
39 PERSONS WITH A DISABILITY.

40 (b) MAINTAINS CLINICAL RECORDS ON ALL PATIENTS.

41 (c) HAS BYLAWS IN EFFECT WITH RESPECT TO ITS STAFF OF PHYSICIANS.

42 6. "PHYSICIAN" MEANS A PHYSICIAN WHO IS LICENSED PURSUANT TO TITLE
43 32, CHAPTER 13 OR 17 AND WHO PROVIDES ANY TYPE OF REPRODUCTIVE HEALTH CARE
44 SERVICES.

1 7. "RELIGIOUS BELIEFS" MEANS ANY SET OF PHILOSOPHICAL OR RELIGIOUS
2 BELIEFS, GUIDELINES, DECREES OR DIRECTIVES OR OTHER INSTRUCTIONS
3 DETERMINING PATIENT CARE THAT ARE NOT BASED ON LEGAL, PEER-REVIEWED OR
4 SCIENTIFICALLY ACCEPTED STANDARDS OF HEALTH CARE AND THAT MAY BE IMPOSED
5 ON A HEALTH CARE ENTITY THROUGH EMPLOYMENT OR CLINICAL PRIVILEGES.

6 36-3302. Health care entities; policy; religious beliefs;
7 excluded health care services; disclosure
8 requirements; applications for state grants

9 A. NOT LATER THAN TWELVE MONTHS AFTER THE EFFECTIVE DATE OF THIS
10 SECTION, A HEALTH CARE ENTITY THAT DOES NOT PROVIDE CERTAIN HEALTH CARE
11 SERVICES BASED ON THE ENTITY'S RELIGIOUS BELIEFS SHALL ADOPT A POLICY THAT
12 PROVIDES A COMPLETE LIST OF HEALTH CARE SERVICES THAT THE HEALTH CARE
13 ENTITY WILL NOT PROVIDE TO PATIENTS BASED ON THE ENTITY'S RELIGIOUS
14 BELIEFS. BEFORE INITIATING TREATMENT OR, IN THE CASE OF AN EMERGENCY, AS
15 SOON AS A PATIENT IS CAPABLE OR THE PATIENT'S REPRESENTATIVE IS AVAILABLE,
16 THE HEALTH CARE ENTITY SHALL PROVIDE A WRITTEN NOTICE TO THE PATIENT OR
17 THE PATIENT'S REPRESENTATIVE THAT INCLUDES THE LIST OF EXCLUDED HEALTH
18 CARE SERVICES. THE PATIENT OR PATIENT'S REPRESENTATIVE SHALL ACKNOWLEDGE
19 RECEIPT OF THE NOTICE THAT INCLUDES THE LIST OF EXCLUDED HEALTH CARE
20 SERVICES.

21 B. NOT LATER THAN TWELVE MONTHS AFTER THE EFFECTIVE DATE OF THIS
22 SECTION, A HEALTH CARE ENTITY THAT DOES NOT PROVIDE CERTAIN HEALTH CARE
23 SERVICES BASED ON THE ENTITY'S RELIGIOUS BELIEFS SHALL INFORM ANY STATE OR
24 FEDERAL AGENCY THAT LICENSES OR OTHERWISE REGULATES THE HEALTH CARE ENTITY
25 OF ALL HEALTH CARE SERVICES THAT THE ENTITY WILL NOT PROVIDE TO PATIENTS
26 BASED ON THE ENTITY'S RELIGIOUS BELIEFS. STATE AGENCIES THAT ENROLL OR
27 OTHERWISE OVERSEE THE APPLICATION OF HEALTH CARE ENTITIES INTO STATE OR
28 FEDERAL HEALTH CARE REIMBURSEMENT PROGRAMS SHALL AMEND THE APPLICATION
29 PROCESS TO INCLUDE A REQUIREMENT THAT HEALTH CARE ENTITIES DISCLOSE ANY
30 EXCLUDED HEALTH CARE SERVICES.

31 C. WHEN APPLYING FOR ANY STATE GRANT THAT IS RELATED TO PROVIDING
32 ANY KIND OF HEALTH CARE SERVICE, A HEALTH CARE ENTITY SHALL PROVIDE A LIST
33 OF THE HEALTH CARE SERVICES THAT THE HEALTH CARE ENTITY WILL NOT PROVIDE
34 TO PATIENTS BASED ON THE ENTITY'S RELIGIOUS BELIEFS.

35 36-3303. Health plan providers; insurers; religious beliefs;
36 excluded health care services; availability of
37 health care services

38 A. NOT LATER THAN EIGHTEEN MONTHS AFTER THE EFFECTIVE DATE OF THIS
39 SECTION, EACH GROUP HEALTH PLAN PROVIDER AND HEALTH INSURER OFFERING GROUP
40 OR INDIVIDUAL HEALTH INSURANCE COVERAGE SHALL:

41 1. PROVIDE ITS ENROLLEES WITH A LIST OF EACH HEALTH CARE ENTITY
42 WITHIN THE PROVIDER'S OR INSURER'S NETWORK OF HEALTH CARE PROVIDERS THAT
43 WILL NOT PROVIDE CERTAIN HEALTH CARE SERVICES BASED ON THE ENTITY'S
44 RELIGIOUS BELIEFS AND EACH HEALTH CARE SERVICE THAT THE ENTITY WILL NOT
45 PROVIDE.

1 2. POST ON ITS WEBSITE THE INFORMATION REQUIRED BY THIS SUBSECTION.
2 B. NOT LATER THAN TWELVE MONTHS AFTER THE EFFECTIVE DATE OF THIS
3 SECTION, EACH HEALTH CARE ENTITY SHALL PROVIDE A COMPLETE LIST OF HEALTH
4 CARE SERVICES THAT THE HEALTH CARE ENTITY WILL NOT PROVIDE TO PATIENTS
5 BASED ON THE ENTITY'S RELIGIOUS BELIEFS TO ALL GROUP HEALTH PLAN PROVIDERS
6 AND HEALTH INSURERS OFFERING GROUP OR INDIVIDUAL HEALTH INSURANCE COVERAGE
7 FROM WHOM THE HEALTH CARE ENTITY SEEKS AND ACCEPTS PAYMENTS. EACH HEALTH
8 CARE ENTITY SHALL PROMINENTLY POST ON THE ENTITY'S WEBSITE THE LIST OF
9 EXCLUDED HEALTH CARE SERVICES AND SHALL PROVIDE TO ANY PERSON ON REQUEST
10 THE LIST OF EXCLUDED HEALTH CARE SERVICES.

11 Sec. 2. Short title

12 This act may be cited as the "Patient's Right to Know Act".