

HOUSE FLOOR AMENDMENT EXPLANATION



Bill Number: **HB 2175**

Willoughby

Substitute
Floor Amendment

- Removes language outlining the conditions in which a health care provider is not required to review each claim for health care services.
- Clarifies artificial intelligence may not be used to deny a claim or a prior authorization for medical necessity, experimental status or any other reason that involves the use of medical judgment.
- Restates that a health care provider must individually review each claim or prior authorization that involves medical necessity, experimental status or that requires the use of medical judgment before a health care insurer may deny a claim or a prior authorization.
- Adds that the requirement to review each claim or prior authorization applies to health care providers that hold a similar license in another state.

Amendment explanation prepared by Paul Benny

Phone Number 3848

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2/12/2025

WILLOUGHBY SUBSTITUTE FLOOR AMENDMENT
HOUSE OF REPRESENTATIVES AMENDMENTS TO H.B. 2175

I move the following SUBSTITUTE amendment to the COMMERCE Committee Amendment to
HOUSE BILL 2175 (Reference to printed bill)

Amendment instruction key:

[GREEN UNDERLINING IN BRACKETS] indicates text added to statute or previously enacted session law.

[Green underlining in brackets] indicates text added to new session law or text restoring existing law.

[GREEN STRIKEOUT IN BRACKETS] indicates new text removed from statute or previously enacted session law.

[Green strikeout in brackets] indicates text removed from existing statute, previously enacted session law or new session law.

<<Green carets>> indicate a section added to the bill.

<<Green strikeout in carets>> indicates a section removed from the bill.

1 The bill as proposed to be amended is reprinted as follows:
2 Section 1. Title 20, chapter 20, article 1, Arizona Revised
3 Statutes, is amended by adding section 20-3103, to read:
4 20-3103. Denial of claims or prior authorization; health care
5 provider review; unprofessional conduct; definition
6 A. [~~EXCEPT FOR DENIALS FOR LACK OF ADMINISTRATIVE COMPLETENESS, MEMBER ENROLLMENT STATUS OR A DETERMINATION THAT A SERVICE OR PROVIDER TYPE IS CATEGORICALLY EXCLUDED FROM COVERAGE UNDER THE PLAN,][ARTIFICIAL INTELLIGENCE MAY NOT BE USED TO DENY A CLAIM OR A PRIOR AUTHORIZATION FOR MEDICAL NECESSITY, EXPERIMENTAL STATUS OR ANY OTHER REASON THAT INVOLVES THE USE OF MEDICAL JUDGMENT.~~]
7 B.] A HEALTH CARE PROVIDER SHALL INDIVIDUALLY REVIEW EACH CLAIM
8 [FOR HEALTH CARE SERVICES] [OR PRIOR AUTHORIZATION THAT INVOLVES MEDICAL
9 NECESSITY, EXPERIMENTAL STATUS OR THAT REQUIRES THE USE OF MEDICAL
10 JUDGMENT] BEFORE A HEALTH CARE INSURER [DENIES] [MAY DENY] A CLAIM OR A
11 PRIOR AUTHORIZATION. [~~ARTIFICIAL INTELLIGENCE MAY NOT BE USED TO DENY A CLAIM OR A PRIOR AUTHORIZATION.~~]
12 [B.] [C.] A HEALTH CARE PROVIDER THAT DENIES A CLAIM OR A PRIOR
13 AUTHORIZATION WITHOUT AN INDIVIDUAL REVIEW OF THE CLAIM OR PRIOR
14 AUTHORIZATION COMMITS AN ACT OF UNPROFESSIONAL CONDUCT.
15 [C.] [D.] FOR THE PURPOSES OF THIS SECTION, "HEALTH CARE PROVIDER"
16 MEANS A PERSON WHO IS CERTIFIED OR LICENSED PURSUANT TO TITLE 32, CHAPTER
17 7, 8, 11, 13, 14, 15, 15.1, 16, 17, 18, 19, 19.1, 21, 25, 28, 29, 33, 34,
18 35, 39, 41 OR 42, TITLE 36, CHAPTER 4, ARTICLE 6, TITLE 36, CHAPTER 6,
19 ARTICLE 7 OR TITLE 36, CHAPTER 17 [OR WHO HOLDS A SIMILAR LICENSE IN
20 ANOTHER STATE].

House Amendments to H.B. 2175

- 1 Enroll and engross to conform
- 2 Amend title to conform

JULIE WILLOUGHBY

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02/07/2025

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