

REFERENCE TITLE: patients' bill of rights

State of Arizona
House of Representatives
Fifty-fifth Legislature
First Regular Session
2021

HB 2422

Introduced by
Representatives Carroll: Cobb, Dunn, Nutt, Wilmeth

AN ACT

AMENDING TITLE 36, CHAPTER 11, ARIZONA REVISED STATUTES, BY ADDING ARTICLE 2; RELATING TO HEALTH CARE SERVICES.

(TEXT OF BILL BEGINS ON NEXT PAGE)

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

2 Section 1. Title 36, chapter 11, Arizona Revised Statutes, is
3 amended by adding article 2, to read:

4 ARTICLE 2. PATIENTS' BILL OF RIGHTS

5 36-1305. Patients' bill of rights; signed receipt of copy

6 A. EACH PATIENT IS GUARANTEED THE FREEDOM TO:

7 1. SEEK CONSULTATION WITH THE PHYSICIAN OF THE PATIENT'S CHOICE.

8 2. CONTRACT WITH THE PATIENT'S PHYSICIANS ON MUTUALLY AGREEABLE
9 TERMS.

10 3. BE TREATED CONFIDENTIALLY AND HAVE ACCESS TO THE PATIENT'S
11 RECORDS LIMITED TO THOSE INVOLVED IN THE PATIENT'S CARE OR DESIGNATED BY
12 THE PATIENT.

13 4. USE THE PATIENT'S OWN RESOURCES TO PURCHASE THE CARE OF CHOICE.

14 5. REFUSE MEDICAL TREATMENT EVEN IF IT IS RECOMMENDED BY THE
15 PATIENT'S PHYSICIAN.

16 6. BE INFORMED ABOUT THE PATIENT'S MEDICAL CONDITION, THE RISKS AND
17 BENEFITS OF TREATMENT AND APPROPRIATE ALTERNATIVES.

18 7. REFUSE THIRD-PARTY INTERFERENCE IN THE PATIENT'S MEDICAL CARE
19 AND BE CONFIDENT THAT THE PATIENT'S ACTIONS IN SEEKING OR DECLINING
20 MEDICAL CARE WILL NOT RESULT IN THIRD-PARTY IMPOSED PENALTIES FOR THE
21 PATIENT OR THE PATIENT'S PHYSICIAN.

22 8. COMMUNICATE WITH THE PATIENT'S SPOUSE AND FAMILY MEMBERS.

23 9. RECEIVE FULL DISCLOSURE OF THE PATIENT'S HEALTH CARE INSURANCE
24 PLAN IN PLAIN LANGUAGE, INCLUDING ALL OF THE FOLLOWING:

25 (a) A COPY OF THE CONTRACT BETWEEN THE PATIENT'S PHYSICIAN AND
26 HEALTH CARE PLAN AND BETWEEN THE PATIENT OR EMPLOYER AND THE HEALTH CARE
27 PLAN.

28 (b) WHETHER PARTICIPATING PHYSICIANS ARE OFFERED FINANCIAL
29 INCENTIVES TO REDUCE TREATMENT OR RATION CARE.

30 (c) THE FULL COST OF THE HEALTH CARE PLAN, INCLUDING COPAYMENTS,
31 COINSURANCE AND DEDUCTIBLES.

32 (d) BENEFITS THAT ARE COVERED AND EXCLUDED UNDER THE HEALTH CARE
33 PLAN, INCLUDING AVAILABILITY AND LOCATION OF TWENTY-FOUR-HOUR EMERGENCY
34 CARE.

35 (e) A ROSTER AND THE QUALIFICATIONS OF PARTICIPATING PHYSICIANS.

36 (f) AUTHORIZATION PROCEDURES FOR SERVICES, WHETHER PHYSICIANS NEED
37 APPROVAL OF A COMMITTEE OR ANY OTHER INDIVIDUAL, AND WHO DECIDES WHAT IS
38 MEDICALLY NECESSARY.

39 (g) PROCEDURES FOR CONSULTING A SPECIALIST AND WHO MUST AUTHORIZE A
40 REFERRAL.

41 (h) GRIEVANCE PROCEDURES FOR CLAIM OR TREATMENT DENIALS.

42 (i) WHETHER PHYSICIANS ARE SUBJECT TO A GAG RULE THAT PREVENTS THEM
43 FROM CRITICIZING THE HEALTH CARE PLAN.

44 B. A HEALTH CARE PROVIDER SHALL HAVE EACH PATIENT SIGN THAT THE
45 PATIENT RECEIVED A COPY OF THE PATIENTS' BILL OF RIGHTS.