

REFERENCE TITLE: **claims; prior authorization; conduct**

State of Arizona
House of Representatives
Fifty-seventh Legislature
First Regular Session
2025

HB 2175

Introduced by
Representative Willoughby

AN ACT

**AMENDING TITLE 20, CHAPTER 20, ARTICLE 1, ARIZONA REVISED STATUTES, BY
ADDING SECTION 20-3103; RELATING TO TIMELY PAYMENT OF HEALTH CARE
INSURANCE CLAIMS.**

(TEXT OF BILL BEGINS ON NEXT PAGE)

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

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;
6 definition

7 A. EXCEPT FOR DENIALS FOR LACK OF ADMINISTRATIVE COMPLETENESS,
8 MEMBER ENROLLMENT STATUS OR A DETERMINATION THAT A SERVICE OR PROVIDER
9 TYPE IS CATEGORICALLY EXCLUDED FROM COVERAGE UNDER THE PLAN, A HEALTH CARE
10 PROVIDER SHALL INDIVIDUALLY REVIEW EACH CLAIM FOR HEALTH CARE SERVICES
11 BEFORE A HEALTH CARE INSURER DENIES A CLAIM OR A PRIOR AUTHORIZATION.
12 ARTIFICIAL INTELLIGENCE MAY NOT BE USED TO DENY A CLAIM OR A PRIOR
13 AUTHORIZATION.

14 B. A HEALTH CARE PROVIDER THAT DENIES A CLAIM OR A PRIOR
15 AUTHORIZATION WITHOUT AN INDIVIDUAL REVIEW OF THE CLAIM OR PRIOR
16 AUTHORIZATION COMMITS AN ACT OF UNPROFESSIONAL CONDUCT.

17 C. FOR THE PURPOSES OF THIS SECTION, "HEALTH CARE PROVIDER" MEANS A
18 PERSON WHO IS CERTIFIED OR LICENSED PURSUANT TO TITLE 32, CHAPTER 7, 8,
19 11, 13, 14, 15, 15.1, 16, 17, 18, 19, 19.1, 21, 25, 28, 29, 33, 34, 35,
20 39, 41 OR 42, TITLE 36, CHAPTER 4, ARTICLE 6, TITLE 36, CHAPTER 6, ARTICLE
21 7 OR TITLE 36, CHAPTER 17.