HB 527 2026

1 A bill to be entitled 2 An act relating to mandatory human reviews of 3 insurance claim denials; creating s. 627.4263, F.S.; 4 defining terms; requiring that insurers' decisions to 5 deny a claim or any portion of a claim be made by 6 qualified human professionals; specifying the duties 7 of qualified human professionals; requiring an insurer 8 to maintain certain records; prohibiting the use of 9 algorithms, artificial intelligence, or machine 10 learning systems as the sole basis for determining 11 whether to adjust or deny a claim; requiring insurers 12 to include certain information in denial communications to claimants; requiring that certain 13 14 insurers detail certain information in their claimshandling manual; authorizing the Office of Insurance 15 16 Regulation to conduct market conduct examinations and investigations under certain circumstances; 17 authorizing the Financial Services Commission to adopt 18 19 rules; providing an effective date. 20 21 Be It Enacted by the Legislature of the State of Florida:

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Section 627.4263, Florida Statutes, is created to read:

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627.4263 Mandatory human reviews of claim denials.-

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(1) As used in this section, the term:

- (a) "Algorithm" means a clearly specified mathematical process for computation which uses rules designed to give prescribed results.
- (b) "Artificial intelligence system" means a machine-based system that may have varying levels of autonomy and that can, for a given set of objectives, generate outputs, such as predictions, recommendations, or content, influencing decisions made in real or virtual environments.
- (c) "Machine learning system" means an artificial intelligence system that has the ability to learn from provided data without being explicitly programmed.
- (d) "Qualified human professional" means an individual who, under the Florida Insurance Code, has the authority to adjust or deny a claim or a portion of a claim and may exercise such authority over a particular claim.
- (2) An insurer's decision to deny a claim or any portion of a claim must be made by a qualified human professional.
- (3) A qualified human professional shall, before determining whether to adjust or deny a claim or a portion of a claim, do all of the following:
- (a) Analyze the facts of the claim and the terms of the insurance policy independently of any artificial intelligence system, machine learning system, or algorithm.
  - (b) Review the accuracy of any output generated by such a

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system or algorithm.

- (c) Conduct any review of a claim adjustment or claim decision that was made by another qualified human professional.
- (4) An insurer shall maintain detailed records of the actions of qualified human professionals who are required to perform the actions under subsection (3), including:
- (a) The name and title of the qualified human professional who made the decision to deny a claim or a portion of a claim and of any qualified human professional who reviewed a claim adjustment or claim decision.
- (b) The date and time of the claim decision and of any review of the claim adjustment.
- (c) Documentation of the basis for the denial of the claim or a portion of the claim, including any information provided by an algorithm, an artificial intelligence system, or a machine learning system.
- (5) An algorithm, an artificial intelligence system, or a machine learning system may not serve as the sole basis for determining whether to adjust or deny a claim.
- (6) In all denial communications to a claimant, an insurer shall:
- (a) Clearly identify the qualified human professional who made the decision to deny the claim or a portion of the claim; and
  - (b) Include a statement affirming that an algorithm, an

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artificial intelligence system, or a machine learning system did not serve as the sole basis for determining whether to deny the claim or a portion of the claim.

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- (7) An insurer that uses an algorithm, an artificial intelligence system, or a machine learning system as part of its claims-handling process shall detail in its claims-handling manual the manner in which such systems are to be used and the manner in which the insurer complies with this section.
- (8) The office may conduct market conduct examinations and investigations or use any method it deems necessary to verify compliance with this section.
- (9) The commission may adopt rules to implement this section.
  - Section 2. This act shall take effect July 1, 2026.

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