

119TH CONGRESS
2^D SESSION

H. R. 7064

To require the Secretary of Health and Human Services to conduct a study on strategies for the application of artificial intelligence technologies that can be used in the health care industry to improve administrative and clerical work and preserve the privacy and security of patient data, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 14, 2026

Mr. HERNÁNDEZ (for himself and Mr. LIEU) introduced the following bill;
which was referred to the Committee on Energy and Commerce

A BILL

To require the Secretary of Health and Human Services to conduct a study on strategies for the application of artificial intelligence technologies that can be used in the health care industry to improve administrative and clerical work and preserve the privacy and security of patient data, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “AI in Health Care Effi-
5 ciency and Study Act”.

1 **SEC. 2. FINDINGS.**

2 Congress finds the following:

3 (1) Administrative and clerical work contribute
4 significantly to health care costs and health care
5 provider burnout.

6 (2) Artificial intelligence technologies have the
7 potential to streamline clerical work and record
8 keeping, allowing health care providers to spend
9 more time with patients.

10 (3) Protection of patient privacy and compli-
11 ance with regulations promulgated pursuant to sec-
12 tion 264 of the Health Insurance Portability and Ac-
13 countability Act of 1996 (42 U.S.C. 1320d-2 note)
14 are essential in the development and deployment of
15 artificial intelligence tools in health care.

16 **SEC. 3. STUDY ON ARTIFICIAL INTELLIGENCE IN THE**
17 **HEALTH CARE INDUSTRY.**

18 (a) IN GENERAL.—Not later than 18 months after
19 the date of the enactment of this section, the Secretary
20 of Health and Human Services (in this Act referred to
21 as the “Secretary”) shall conduct a study on strategies
22 for the application of artificial intelligence technologies
23 that can be used across the health care industry, including
24 health care providers and health plans as defined under
25 section 262 of the Health Insurance Portability and Ac-
26 countability Act of 1996 (42 U.S.C. 1320d) and covered

1 entities and business associates as defined under section
2 160.103 of title 45, Code of Federal Regulations, to im-
3 prove administrative and clerical processes and protect the
4 privacy and security of patient data in programs and ac-
5 tivities within the jurisdiction of the Department of Health
6 and Human Services.

7 (b) CONTENTS.—In conducting the study under sub-
8 section (a), the Secretary shall evaluate existing strategies
9 and identify additional strategies to apply artificial intel-
10 ligence technologies to—

11 (1) reduce administrative burden and improve
12 efficiency in administrative and clerical tasks, in-
13 cluding scheduling, claims processing, documenta-
14 tion, prior authorization workflows, and other oper-
15 ational tasks performed by health care providers and
16 health plans;

17 (2) improve the accuracy, timeliness, and inter-
18 operability of patient record-keeping, including elec-
19 tronic health record documentation;

20 (3) ensure the privacy, security, and integrity of
21 patient data, including compliance with regulations
22 promulgated pursuant to section 264 of the Health
23 Insurance Portability and Accountability Act of
24 1996 (42 U.S.C. 1320d–2 note) and any applicable

1 standards established by the National Institute of
2 Standards and Technology; and

3 (4) evaluate how artificial intelligence tech-
4 nologies can be used to detect, prevent, and mitigate
5 cybersecurity attacks on health care providers, in-
6 cluding—

7 (A) ransomware incidents;

8 (B) data breaches; and

9 (C) other threats experienced by healthcare
10 providers.

11 (e) CONSULTATION.—In carrying out the study re-
12 quired under subsection (a), the Secretary shall seek to
13 consult with—

14 (1) the Director of the National Institute of
15 Standards and Technology;

16 (2) the Director of the National Institutes of
17 Health;

18 (3) the Director of the Agency for Healthcare
19 Research and Quality;

20 (4) the Assistant Secretary for Technology Pol-
21 icy/Office of the National Coordinator for Health In-
22 formation Technology for the Department of Health
23 and Human Services;

24 (5) the Director of the Office for Civil Rights
25 for the Department of Health and Human Services;

- 1 (6) academic institutions;
- 2 (7) artificial intelligence developers;
- 3 (8) civil rights experts;
- 4 (9) health care providers;
- 5 (10) hospital associations;
- 6 (11) information technology vendors that serve
- 7 the health care industry;
- 8 (12) nonprofit research institutions; and
- 9 (13) patient privacy experts.

10 (d) REPORT.—Not later than 6 months after the Sec-
11 retary completes the study required under subsection (a),
12 the Secretary shall submit to the Committee on Energy
13 and Commerce of the House of Representatives and the
14 Committee on Health, Education, Labor, and Pensions of
15 the Senate a report on the study conducted under sub-
16 section (a) that contains—

- 17 (1) the findings and conclusions of the study,
18 including identified risks, opportunities, and imple-
19 mentation challenges;
- 20 (2) an assessment of existing artificial intel-
21 ligence tools currently in use for administrative or
22 clerical functions in the health care industry, includ-
23 ing their effectiveness, limitations, and implications
24 for provider burden;

1 (3) recommendations for future research and
2 pilot programs led or supported by the Department
3 of Health and Human Services relating to the use
4 of artificial intelligence in administrative and clerical
5 functions within the health care industry; and

6 (4) policy options for Congress and the Sec-
7 retary to support the development, testing, imple-
8 mentation, and oversight of artificial intelligence
9 tools that enhance administrative efficiency in health
10 care while ensuring strong protections for patient
11 privacy and data security.

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