Fifty-seventh Legislative Assembly of North Dakota

HOUSE BILL NO. 1314

Introduced by

Representatives Porter, Pollert, Severson

Senator Kilzer

- 1 A BILL for an Act to amend and reenact section 26.1-47-03 of the North Dakota Century Code,
- 2 relating to provisions of health care preferred provider arrangements.

3 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

4 **SECTION 1. AMENDMENT.** Section 26.1-47-03 of the North Dakota Century Code is 5 amended and reenacted as follows:

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26.1-47-03. Health benefits plans.

- Health care insurers may issue policies or subscriber agreements which provide for
 incentives for covered persons to use the health care services of preferred
 providers. These policies or subscriber agreements must contain all of the
 following provisions:
- 11a.A provision that if a covered person receives emergency care and cannot12reasonably reach a preferred provider in that community, care will be13reimbursed as though the covered person had been treated by a preferred14provider.
- b. A provision that if covered services are not available through a preferred
 provider <u>in that community</u>, reimbursement for those services will be made as
 though the covered person had been treated by a preferred provider.
- c. A provision which clearly discloses differentials between benefit levels for
 health care services of preferred providers and benefit levels for health care
 services of other providers.
- 21d.A provision that entitles the covered person, if any health care services22covered under the health benefit plan are not available through a preferred23provider within fifty miles [80.47 kilometers] of the policyholder's legal24residence, to the provision of those covered services under the health benefit

1		plan by a health care provider not under contract with the health care insurer
2		and located within fifty miles [80.47 kilometers] of the policyholder's legal
3		residence. For the covered person to be eligible for benefits under this
4		subdivision, the health care provider not under contract with the health care
5		insurer must furnish the health care services at the same cost or less that
6		would have been incurred had the covered person secured the health care
7		services through a preferred provider.
8	2.	If the policy or subscriber agreement provides differences in benefit levels payable
9		to preferred providers compared to other providers, the differences may not unfairly
10		deny payment for covered services and may be no greater than necessary to

11 provide a reasonable incentive for covered persons to use the preferred provider.