

**SECOND ENGROSSMENT  
with Senate Amendments**

Sixty-first  
Legislative Assembly  
of North Dakota

**REENGROSSED HOUSE BILL NO. 1478**

Introduced by

Representatives Carlson, Boucher

Senators Stenehjem, O'Connell

(At the request of the Governor)

1 A BILL for an Act to amend and reenact section 50-29-04 of the North Dakota Century Code,  
2 relating to eligibility under the state children's health insurance program; and to provide  
3 legislative intent.

4 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

5 **SECTION 1. AMENDMENT.** Section 50-29-04 of the North Dakota Century Code is  
6 amended and reenacted as follows:

7 **50-29-04. Plan requirements.** The plan:

- 8 1. Must be provided through private contracts with insurance carriers;
- 9 2. Must allow conversion to another health insurance policy;
- 10 3. Must be based on an actuarial equivalent of a benchmark plan;
- 11 4. Must incorporate every state-required waiver approved by the federal government;
- 12 5. Must include community-based eligibility outreach services; and
- 13 6. Must provide:
  - 14 a. A net income eligibility limit of ~~one~~ two hundred ~~fifty~~ percent of the poverty
  - 15 line;
  - 16 b. A copayment requirement for each pharmaceutical prescription and for each
  - 17 emergency room visit;
  - 18 c. A deductible for each inpatient hospital visit;
  - 19 d. Coverage for:
    - 20 (1) Inpatient hospital, medical, and surgical services;
    - 21 (2) Outpatient hospital and medical services;
    - 22 (3) Psychiatric and substance abuse services;
    - 23 (4) Prescription medications;
    - 24 (5) Preventive screening services;

1 (6) Preventive dental and vision services; and

2 (7) Prenatal services; and

3 e. A coverage effective date that is the first day of the month, following the date  
4 of application and determination of eligibility.

5 **SECTION 2. LEGISLATIVE INTENT.** It is the intent of the sixty-first legislative  
6 assembly that public school districts and private schools help ensure that families of enrolled  
7 school-age children are aware of available health care coverage. Health care coverage may be  
8 available from individual student policies or from state or federally funded programs, such as  
9 medicaid or the children's health insurance program. It is expected that schools will provide  
10 information and applications to families as part of annual enrollment efforts. The department of  
11 human services and the superintendent of public instruction may offer assistance to schools  
12 with this effort.