Sixty-second Legislative Assembly of North Dakota

SENATE BILL NO. 2276

Introduced by

Senators J. Lee, Dever, Heckaman

Representatives Kaldor, Weisz

- 1 A BILL for an Act to create and enact a new chapter to title 23 of the North Dakota Century
- 2 Code, relating to creating a state vaccine fund and a North Dakota vaccine group purchasing
- 3 board; to amend and reenact section 23-01-05.3 of the North Dakota Century Code, relating to
- 4 reporting immunization data; to provide a penalty; and to declare an emergency.

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

- SECTION 1. A new chapter to title 23 of the North Dakota Century Code is created and enacted as follows:
- 8 <u>Definitions.</u>

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- 9 As used in this chapter:
- 10 <u>1.</u> "Board" means the North Dakota vaccine group purchasing board.
- 11 <u>2.</u> "Department" means the state department of health.
- 12 <u>3.</u> "Director" means the director of the North Dakota vaccine group purchasing program.
- 13 <u>4.</u> "Fund" means the North Dakota vaccine fund.
 - 5. "Health insurance coverage" and "insurer" have the same meaning as provided under section 26.1-08-01.means any hospital and medical expense-incurred policy, nonprofit health care service plan contract, health maintenance organization subscriber contract, or any other health care plan or arrangement that pays for or furnishes benefits that pay the costs of or provide medical, surgical, or hospital care or, if selected by the eligible individual, chiropractic care.
 - a. Health insurance coverage does not include any one or more of the following:
- 21 (1) Coverage only for accident, disability income insurance, or any combination of the two;
- 23 (2) Coverage issued as a supplement to liability insurance;

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1	(3) Liability insurance, including general liability insurance and automobile
2	liability insurance;
3	(4) Workforce safety and insurance or similar insurance;
4	(5) Automobile medical payment insurance;
5	(6) Credit-only insurance;
6	(7) Coverage for onsite medical clinics; and
7	(8) Other similar insurance coverage, specified in federal regulations, under
8	which benefits for medical care are secondary or incidental to other
9	insurance benefits.
10	b. Health insurance coverage does not include the following benefits if the benefits
11	are provided under a separate policy, certificate, or contract of insurance or are
12	otherwise not an integral part of the plan:
13	(1) Limited scope dental or vision benefits;
14	(2) Benefits for long-term care, nursing home care, home health care,
15	community-based care, or any combination of this care; and
16	(3) Other similar limited benefits specified under federal regulations issued
17	under the Health Insurance Portability and Accountability Act of 1996
18	[Pub. L. 104-191; 110 Stat. 1936; 29 U.S.C. 1181 et seq.].
19	c. Health insurance coverage does not include any of the following benefits if the
20	benefits are provided under a separate policy, certificate, or contract of insurance;
21	there is no coordination between the provision of the benefits; any exclusion of
22	benefits under any group health insurance coverage maintained by the same
23	plan sponsor; and the benefits are paid with respect to an event without regard to
24	whether benefits are provided with respect to such an event under any group
25	health plan maintained by the same sponsor:
26	(1) Coverage only for specified disease or illness; and
27	(2) Hospital indemnity or other fixed indemnity insurance.
28	d. Health insurance coverage does not include the following if offered as a separate
29	policy, certificate, or contract of insurance:

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1		(1) Coverage supplemental to the coverage provided under chapter 55 of						
2		United States Code title 10 [10 U.S.C. 1071 et seq.] relating to armed forces						
3		medical and dental care; and						
4		(2) Similar supplemental coverage provided under a group health plan.						
5	<u>6.</u>	"Health officer" means the state health officer.						
6	<u>7.</u>	"Insurer" means any insurance company, nonprofit health service organization,						
7		fraternal benefit society, health maintenance organization, and any other entity						
8		providing or selling health insurance coverage or health benefits that are subject to						
9		state insurance regulation.						
10	8.	"North Dakota immunization advisory committee" means the group of private health						
11		care providers, local public health units, department staff, and other applicable						
12		individuals which makes immunization and vaccine selection recommendations to the						
13		North Dakota immunization program.						
14	<u>8.9.</u>	"North Dakota immunization information system" is the population-based						
15		computerized information system established under section 23-01-05.3.						
16	9. 10.	"North Dakota immunization program" means the program administered by the						
17		department to provide vaccinations to North Dakota children consistent with state and						
18		federal law.						
19	10. 11.	"Plan of operation" means the plan of operation of the fund as established by the						
20		board.						
21	11. 12.	"Program-eligible child" means any child, who is under nineteen years of age, whose						
22		custodial parent or legal guardian resides in this state, who receives vaccinations from						
23		a North Dakota provider, and who is not eligible for the federal vaccines for children						
24		program.						
25	13.	"Third-party administrator" means a person that administers payments for health care						
26		services on behalf of a client health plan in exchange for an administrative fee.						
27	12. 14.	"Vaccine" means any vaccine recommended by the federal advisory committee on						
28		immunization practices of the centers for disease control and prevention.						
29	13. 15.	"Vaccines for children program" is a federally funded program that provides vaccines						
30		at no cost to eligible children pursuant to section 1928 of the Social Security Act						
31		[42 U.S.C. 1396s].						

I	<u> 5tat</u>	te department of health - Duties.					
2	<u>1.</u>	There is established in the department a vaccine group purchasing program.					
3	<u>2.</u>	The	heal	th officer shall appoint the director of the North Dakota vaccine group			
4		puro	chasi	ng program who may be an employee of the department.			
5	<u>3.</u>	<u>The</u>	heal	th officer, or the health officer's designee, in consultation with the North			
6		Dak	ota ir	mmunization advisory committee shall determine which brands of vaccines			
7		are	purch	nased under this chapter.			
8	Nor	th Dakota vaccine group purchasing board.					
9	<u>1.</u>	There is created in the department the North Dakota vaccine group purchasing board,					
10		whi	ch sh	all operate as a governmental authority as defined in subsection 7 of section			
11		<u>32-</u>	12.2-0	<u>01.</u>			
12	<u>2.</u>	The	boar	rd consists of nine members:			
13		<u>a.</u>	Six	members must be appointed by the health officer and serve at the pleasure of			
14			the	health officer. In selecting the members of the board, the health officer shall			
15			<u>app</u>	oint:			
16			<u>(1)</u>	Three members representing insurers, one of whom shall represent			
17				administrators or third-party administrators;			
18			<u>(2)</u>	One member representing business managers of private health care			
19				practices:			
20	ı		<u>(3)</u>	One member representing local public health units; and			
21			<u>(4)</u>	One member representing the North Dakota business community involved			
22				in biotechnology with an emphasis in immunization vaccine research;			
23		<u>b.</u>	<u>The</u>	department's immunization program manager;			
24		<u>C.</u>	<u>One</u>	e member designated by the insurance commissioner; and			
25		<u>d.</u>	<u>The</u>	health officer, or the director as the health officer's designated			
26			repr	resentative, shall serve as an ex officio, nonvoting member of the board.			
27	<u>3.</u>	Board members appointed by the health officer pursuant to subdivision a of					
28		subsection 2 shall serve for terms of three years, except the initial board members					
29		app	<u>ointe</u>	d by the health officer pursuant to subdivision a of subsection 2 must be			
30		app	ointe	d as follows:			

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1		<u>a.</u>	Two members, as determined by the health officer, shall serve an initial term of			
2			two years;			
3		b. Two members, as determined by the health officer, shall serve an initial term of				
4			three years; and			
5		<u>C.</u>	Two members, as determined by the health officer, shall serve an initial term of			
6			four years.			
7	<u>4.</u>	The	health officer shall fill any vacancy on the board appointed by the health officer			
8		pur	suant to subdivision a of subsection 2.			
9	<u>5.</u>	Mer	mbers of the board who are not state employees or employees of a political			
10		sub	division are entitled to receive reimbursement for their necessary mileage and			
11		trav	el expenses as provided in sections 44-08-04 and 54-06-09 while attending board			
12		mee	etings.			
13	<u>Plar</u>	n of operation.				
14	<u>1.</u>	Annually, the board shall submit a plan of operation to the director. Amendments to the				
15		plar	n may be made as needed. The plan of operation, and any amendments to the			
16		plar	n, become effective upon board approval.			
17	<u>2.</u>	The plan of operation must:				
18		<u>a.</u>	Identify methodology and procedures for determining assessments that are fair			
19			and equitable for insurers and third-party administrators, including a third-party			
20			administrator for a self-insurance plan. The board may assess a subgroup of the			
21			insurers and third-party administrators to be assessed based on immunization			
22			volume or other factors as approved by the board;			
23		<u>b.</u>	Establish and approve procedures for the director to collect assessments from			
24			insurers and third-party administrators as identified in the plan of operation to			
25			fund vaccine purchases by the state;			
26		<u>C.</u>	Establish a policy for conducting a reconciliation process to ascertain that			
27			assessments were fair and equitable and to consider adjustments to future			
28			assessments;			
29		d.	Identify the frequency of board meetings; and			
30	<u>e</u>	l. e.	Provide for any additional matters necessary for the implementation and			
31			administration of the fund.			

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1 Administrative costs associated with establishing and operating the fund must be paid 2 out of the fund. 3 Power and liability of the board. 4 1. The board may: 5 Enter contracts necessary or proper to carry out this chapter; a. 6 <u>b.</u> Determine the method and frequency of assessment and assess insurers and 7 third-party administrators in accordance with rules adopted by the board; 8 Require insurers and third-party administrators to provide to the board all <u>C.</u> 9 statements and reports the board considers necessary to fulfill the board's duties 10 under this chapter; and 11 d. Establish policies and procedures as necessary or proper for the implementation 12 of this chapter and the collection and use of the assessments authorized by this 13 chapter. 14 <u>2.</u> Neither the board nor any member of the board is liable for any obligations of the 15 vaccine assessments. A member or employee of the board is not liable, and a cause 16 of action of any nature may not arise against the member or employee of the board, 17 for any act or omission related to the performance of the member's or employee of the 18 board's powers and duties under this chapter, unless the act or omission constitutes 19 willful or wanton misconduct. Participation by an insurer or third-party administrator in 20 the assessments authorized by this chapter or on the board under this chapter is not 21 grounds for any legal action, criminal or civil liability, or penalty against the fund or any 22 of its insurers, third-party administrators, or board members, either jointly or 23 separately. 24 <u>3.</u> The board is exempt from the requirements of chapter 28-32 if the board provides 25 notice and the opportunity to comment to any health insurer or third-party 26 administrator, subject to an assessment under this chapter, except that an insurer or 27 third-party administrator may appeal any assessment or rule of the board as provided 28 under section 28-32-47. 29 Assessments.

Annually, the department shall report to the board the total number of program-eligible

children in the North Dakota immunization information system who received vaccines,

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- 1 the doses administered, and the total cost of vaccines purchased through the North 2 Dakota vaccine fund for the previous state fiscal year.
- 3 <u>2.</u> Each insurer's or third-party administrator's proportion of the assessment and the dates upon which the insurer or third-party administrator must pay the assessment into 5 the fund must be determined by the board based on annual statements and other reports considered necessary by the board. In making the assessment determination, 7 the board also shall consider such factors as the number of vaccine doses administered in the pertinent time period and the number of program-eligible children in the pertinent time period, as well as any necessary costs and expenses to administer the fund and discharge the duties of the board.
 - Each insurer or third-party administrator shall pay the insurer's or third-party administrator's annual assessment in at a minimum of quarterly installments on the date specified by the board.
 - An insurer or third-party administrator shall pay an assessment made by the board <u>4.</u> within sixty days of the notice of assessment being sent to the insurer or third-party administrator.
 - <u>5.</u> For late or nonpayment of assessments by an insurer or third-party administrator, the board shall impose interest at the rate of one percent of the unpaid assessment due for each month or fraction of a month during which the assessment remains unpaid, computed from the due date of the assessment to the date paid, excepting the month in which the assessment was required to be paid or the assessment became due. If an insurer's or third-party administrator's assessment remains partly or fully unpaid for more than ninety days from the due date, the board may impose a penalty of up to two times the amount of the unpaid assessment. In addition, the board may refer the insurer or third-party administrator to the insurance commissioner who may use any sanctions available to penalize for nonpayment of the assessment.
 - <u>6.</u> For good cause, an insurer or third-party administrator may seek from the board a deferment from all or part of an assessment imposed by the board. The board may defer all or part of the assessment if the board determines that the payment of the assessment would place the insurer or third-party administrator in a financially impaired condition, as provided in title 26.1. If all or part of an assessment against an

- insurer or third-party administrator is deferred, the amount deferred must may be
 assessed against the other insurers and third-party administrators in a manner
 consistent with the basis for assessment provided under this section. The insurer or
 third-party administrator receiving the deferment remains liable to the fund for the
 amount deferred and may be referred to the insurance commissioner who may use
 any sanctions available.
 - 7. The initial assessments as determined by the board must be paid to the fund before October 1, 2011.
 - 8. The moneys raised by the assessment authorized in this section must be used solely for the purposes expressly authorized by this chapter.
 - 9. Notwithstanding any other provision of this section, if the market share of an insurer or third-party administrator changes by more than ten percent because of merger, withdrawal, or any other reason or the assessments are insufficient to pay for the costs for that year, the board may adjust the assessments of all insurers and third-party administrators for that year.

North Dakota vaccine fund.

There is created in the state treasury the North Dakota vaccine fund. Moneys in the fund must be appropriated by the legislative assembly solely for purposes established by this chapter. All interest and earnings of the fund must be retained in the fund. Any entity subject to this assessment is not entitled to a credit for this assessment against tax due under section 26.1-03-17.

SECTION 2. AMENDMENT. Section 23-01-05.3 of the North Dakota Century Code is amended and reenacted as follows:

23-01-05.3. Immunization data.

The state department of health may establish an immunization information system and may require the childhood immunizations specified in subsection 1 of section 23-07-17.1 and other information be reported to the department. The state department of health may only require the reporting of childhood immunizations and other data upon completion of the immunization information reporting system. A health care provider who administers a childhood immunization shall report the patient's identifying information, the immunization that is administered, and other required

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- information to the department. The report must be submitted using electronic media, and must contain the data content and use the format and codes specified by the department.
 - 2. A health care provider that fails to submit an required immunization report required by this section within four weeks of vaccination may not order or receive any vaccines from the North Dakota immunization program until the provider submits all reports required by this section.
 - 3. Notwithstanding any other provision of law, a health care provider, elementary or secondary school, early childhood facility, public or private postsecondary educational institution, city or county board of health, district health unit, and the state health officer may exchange immunization data in any manner with one another. Immunization data that may be exchanged under this section is limited to the date and type of immunization administered to a patient and may be exchanged regardless of the date of the immunization.
 - **SECTION 3. EMERGENCY.** This Act is declared to be an emergency measure.