

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1321

Page 1, line 2, remove "and"

Page 1, line 5, after "coverage" insert "; to provide an effective date; and to declare an emergency"

Page 2, line 4, remove "The majority leader of the house of representatives shall appoint three members of"

Page 2, remove lines 5 and 6

Page 2, line 7, remove "3."

Page 2, line 7, overstrike "One member" and insert immediately thereafter "The majority leader of the house of representatives shall appoint three members of the house of representatives and the majority leader of the senate shall appoint three members of the senate. The members appointed under this subsection shall serve a term of two years."

3. Three members"

Page 2, line 8, overstrike "The" and insert immediately thereafter "Each"

Page 2, line 8, after "appointee" insert "under this subsection"

Page 2, line 10, after "The" insert "governor shall appoint one"

Page 2, line 10, overstrike "is" and insert immediately thereafter "to serve as"

Page 2, line 11, remove "4."

Page 2, line 11, overstrike "One member of the board must be appointed by the attorney general from the"

Page 2, overstrike line 12

Page 2, line 15, overstrike "5. Three" and insert immediately thereafter:

"4. Two"

Page 2, line 25, overstrike "6."

Page 2, line 30, after "7." insert "5."

Page 3, line 4, replace "7." with "6."

Page 3, line 4, overstrike "a five-year term and"

Page 3, line 10, after "**for**" insert "**life**"

Page 3, line 10, after "**insurance**" insert "**, Medicare part D, employee assistance program services, dental plans, vision plans, and long-term care plans**"

Page 3, line 11, overstrike "hospital benefits coverage, medical"

- Page 3, line 12, overstrike "benefits coverage," and insert immediately thereafter "any"
- Page 3, line 12, after the second comma insert "Medicare part D prescription drug coverage, a dental plan, a vision plan, a long-term care plan,"
- Page 3, line 13, overstrike "may receive bids separately for all or part of the"
- Page 3, line 14, overstrike "prescription drug benefits coverage component of medical benefits coverage;"
- Page 4, overstrike lines 6 through 8
- Page 4, remove lines 9 and 10
- Page 4, line 22, overstrike "initial"
- Page 4, line 22, overstrike "or the renewal term"
- Page 4, line 26, overstrike "a."
- Page 4, line 26, after "may" insert "not"
- Page 4, line 26, overstrike "without soliciting a bid"
- Page 4, overstrike lines 27 through 31
- Page 5, overstrike lines 1 through 15
- Page 5, line 16, overstrike "solicit a bid under section 54-52.1-04"
- Page 5, line 17, replace "d." with "This subsection does not apply to a contract for Medicare part D prescription drug coverage, vision plans, dental plans, or long-term care plans."
- Page 5, line 21, after "1." insert "The board shall receive bids for the providing of hospital benefits coverage, medical benefits coverage, and prescription drug benefits coverage; may receive bids separately for all or part of the prescription drug benefits coverage component of medical benefits coverage; and subject to approval of the legislative assembly shall accept one or more bids with the carriers."
2. Solicitations must be made no later than ninety days before the expiration of an existing uniform group insurance contract. Bids must be solicited by advertisement in a manner selected by the board which will provide reasonable notice to prospective bidders. In preparing bid proposals and evaluating bids, the board may utilize the services of consultants on a contract basis in order that the bids received may be uniformly compared and properly evaluated. In reviewing bids, the board shall determine which bid or bids best serve the interests of the state and the state's eligible employees. In determining which bid, if any, will best serve the interests of eligible employees in the state, the board shall give adequate consideration to the following factors:
- a. The economy to be effected.
 - b. The ease of administration.
 - c. The adequacy of the coverages.
 - d. The financial position of the carrier, with special emphasis on the solvency of the carrier.

- e. The reputation of the carrier and any other information available tending to show past experience with the carrier in matters of claim settlement, underwriting, and services.
- 3. The board may reject any or all bids received under this section. If the board rejects all bids received, the board again shall solicit bids as provided under this section.
- 4. Under sections 54-52.1-04 and 54-52.1-04.2 the board may contract for health benefits coverage through a health maintenance organization or establish a self-insurance health plan.
- 5."

Page 5, line 21, replace "an initial or renewal" with "a"

Page 5, line 23, after the underscored period insert:

"a."

Page 5, line 25, after the underscored period insert "If the legislative assembly does not authorize the board's proposed action, the board again shall solicit bids as provided under this section.

- b. The majority leaders of the house of representatives and the senate each shall appoint a special oversight committee to hold a joint hearing on the legislation introduced by the board under this subsection."

Page 5, line 26, replace "2." with "6."

Page 5, line 27, after "coverage" insert ", a vision plan, a dental plan, or a long-term care plan"

Page 5, after line 28, insert:

"SECTION 5. EFFECTIVE DATE. Section 1 of this Act becomes effective June 1, 2023.

SECTION 6. EMERGENCY. This Act is declared to be an emergency measure."

Renumber accordingly