Fifty-fifth
Legislative Assembly
of North Dakota

SENATE BILL NO. 2040

Introduced by

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Legislative Council

(Insurance and Health Care Committee)

(Senators Mathern, Thane, Lee) (Representatives Glassheim, Mahoney)

- 1 A BILL for an Act to amend and reenact section 26.1-36-09 of the North Dakota Century Code,
- 2 relating to group health policy and health service contract mental disorder coverage.

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

4 **SECTION 1. AMENDMENT.** Section 26.1-36-09 of the North Dakota Century Code is amended and reenacted as follows:

26.1-36-09. Group health policy and health service contract mental disorder coverage.

- 1. An insurance company, nonprofit health service corporation, or health maintenance organization may not deliver, issue, execute, or renew any health insurance policy or health service contract on a group or blanket or franchise or association basis unless the policy or contract provides benefits, of the same type offered under the policy or contract for other illnesses, for health services to any person covered under the policy or contract, for the diagnosis, evaluation, and treatment of mental disorder and other related illness, which benefits meet or exceed the benefits provided in subsection 2.
- 2. a. The benefits must be provided for inpatient treatment and, treatment by partial hospitalization, residential treatment, and outpatient treatment.
 - b. In the case of benefits provided for inpatient treatment, the benefits must be provided for a minimum of sixty days of services covered under this section and section 26.1-36-08 in any calendar year if provided by a hospital as defined in subsection 25 of section 52-01-01 and rules of the state department of health pursuant thereto offering treatment for the prevention or cure of mental disorder or other related illness.

- c. In the case of benefits provided for partial hospitalization <u>or residential</u> <u>treatment</u>, the benefits must be provided for a minimum of one hundred twenty days of services covered under this section and section 26.1-36-08 in any calendar year if provided by a hospital as defined in subsection 25 of section 52-01-01 and rules of the state department of health pursuant thereto or by a regional human service center licensed under section 50-06-05.2, offering treatment for the prevention or cure of mental disorder or other related illness, or by a residential treatment program. For services provided in regional human service centers, charges must be reasonably similar to the charges for care provided by hospitals as defined in this subsection.
- d. Benefits may also must be provided for a combination of inpatient and hospitalization, partial hospitalization, and residential treatment. For the purpose of computing the period for which benefits are payable, each day of inpatient treatment is equivalent to two days of treatment by partial hospitalization or residential treatment; provided, however, that no more than forty-six days of the inpatient treatment benefits required by this section may be traded for treatment by partial hospitalization or residential treatment.
- e. (1) In the case of benefits provided for outpatient treatment, the benefits must be provided for a minimum of thirty hours for services covered under this section in any calendar year if the treatment services are provided within the scope of licensure by a nurse who holds advanced licensure with a scope of practice within mental health or if the diagnosis, evaluation, and treatment services are provided within the scope of licensure by a licensed physician, a licensed psychologist who is eligible for listing on the national register of health service providers in psychology, or a licensed certified social worker who:
 - (a) Possesses a master's or doctorate degree in social work from an institution accredited by the council of social work education;
 - (b) Has at least one year of direct clinical social work practice during graduate school or one year of postgraduate supervised clinical social work practice in a structured teaching environment;

1			(c)	Has completed at least the equivalent of four years of full-time
2				supervised clinical social work experience within the last seven
3				years;
4			(d)	Has passed the clinical examination or its equivalent offered by
5				the North Dakota board of social work examiners; and
6			(e)	If not licensed in this state, is licensed, certified, or registered at
7				the highest level of social work practice in another state.
8		(2)	A per	son who is qualified for third-party payment by the board of social
9			work	examiners on August 1, 1995, is exempt from subparagraphs c
10			and d	l. Supervision under subparagraph c may be provided by a
11			qualif	ied clinical social worker, a licensed psychologist, or a licensed
12			psych	niatrist, but the preferred supervisor is the qualified clinical social
13			worke	er.
14		(3)	Upon	the request of an insurance company, a nonprofit health service
15			corpo	ration, or a health maintenance organization the North Dakota
16			board	of social work examiners shall provide to the requesting entity
17			inforn	nation to certify that a licensed certified social worker meets the
18			qualif	ications required under this section.
19		(4)	The in	nsurance company, nonprofit health service corporation, or health
20			maint	enance organization may not establish a deductible or a
21			copay	ment for the first five hours in any calendar year, and may not
22			estab	lish a copayment greater than twenty percent for the remaining
23			hours).
24		(5)	If the	services are provided by a provider outside a preferred provider
25			netwo	ork without a referral from within the network, the insurance
26			comp	any, nonprofit health service corporation, or health maintenance
27			orgar	nization may establish a copayment greater than twenty percent for
28			only t	hose hours after the first five hours in any calendar year.
29	f.	"Partial hospitalization" means continuous treatment for at least three hours,		
30		but no	ot mor	e than twelve hours, in any twenty-four-hour period and includes

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- the medically necessary treatment services provided by licensed professionals under the supervision of a licensed physician.
 - 3. This section does not prevent any insurance company, nonprofit health service corporation, or health maintenance organization from issuing, delivering, or renewing, at its option, any policy or contract containing provisions similar to those required by this section, where the policy or contract is not subject to such provisions.