

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:

6 **26.1-47-03. Health benefits plans.**

- 7 1. Health care insurers may issue policies or subscriber agreements which provide for
8 incentives for covered persons to use the health care services of preferred
9 providers. These policies or subscriber agreements must contain all of the
10 following provisions:
- 11 a. A provision that if a covered person receives emergency care and cannot
12 reasonably reach a preferred provider in that community, care will be
13 reimbursed as though the covered person had been treated by a preferred
14 provider.
- 15 b. A provision that if covered services are not available through a preferred
16 provider in that community, reimbursement for those services will be made as
17 though the covered person had been treated by a preferred provider.
- 18 c. A provision which clearly discloses differentials between benefit levels for
19 health care services of preferred providers and benefit levels for health care
20 services of other providers.
- 21 d. A provision that entitles the covered person, if any health care services
22 covered under the health benefit plan are not available through a preferred
23 provider within fifty miles [80.47 kilometers] of the policyholder's legal
24 residence, 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.