

Fifty-eighth  
Legislative Assembly  
of North Dakota

## ENGROSSED SENATE BILL NO. 2210

Introduced by

Senators Nelson, Grindberg, Kilzer

Representatives Keiser, Metcalf, Price

1 A BILL for an Act to amend and reenact section 26.1-36-08 of the North Dakota Century Code,  
2 relating to group health policy and health service contract substance abuse coverage; and to  
3 provide for application.

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

5 **SECTION 1. AMENDMENT.** Section 26.1-36-08 of the North Dakota Century Code is  
6 amended and reenacted as follows:

7 **26.1-36-08. Group health policy and health service contract substance abuse**  
8 **coverage.**

- 9 1. An insurance company, nonprofit health service corporation, or health  
10 maintenance organization may not deliver, issue, execute, or renew any health  
11 insurance policy or health service contract on a group or blanket or franchise or  
12 association basis unless the policy or contract provides benefits, of the same type  
13 offered under the policy or contract for other illnesses, for health services to any  
14 person covered under the policy or contract, for the diagnosis, evaluation, and  
15 treatment of alcoholism, drug addiction, or other related illness, which benefits  
16 meet or exceed the benefits provided in subsection 2.
- 17 2. The benefits must be provided for inpatient treatment and treatment by partial  
18 hospitalization, residential treatment, and outpatient treatment:
- 19 a. In the case of benefits provided for inpatient treatment, the benefits must be  
20 provided for a minimum of ~~sixty~~ forty-five days of services covered under this  
21 section and section 26.1-36-09 in any calendar year if provided by a hospital  
22 as defined in subsection 25 of section 52-01-01 and rules of the state  
23 department of health ~~pursuant thereto~~, or as licensed under section

- 1                   23-17.1-01 offering treatment ~~for the prevention or cure~~ of alcoholism, drug  
2                   addiction, or other related illness.
- 3                   b. In the case of benefits provided for partial hospitalization, the benefits must  
4                   be provided for a minimum of one hundred twenty days of services covered  
5                   under this section and section 26.1-36-09 in any calendar year if provided by  
6                   a hospital as defined in subsection 25 of section 52-01-01 and rules of the  
7                   state department of health ~~pursuant thereto~~, or as licensed under section  
8                   23-17.1-01, or by ~~a regional human service center~~ an addiction treatment  
9                   program licensed under section 50-06-05.2, offering treatment ~~for the~~  
10                  ~~prevention or cure~~ of alcoholism, drug addiction, or other related illness. For  
11                  services provided in regional human service centers, charges must be  
12                  reasonably similar to the charges for care provided by hospitals as defined in  
13                  this subsection.
- 14                  c. Benefits may also be provided for a combination of inpatient and partial  
15                  hospitalization treatment. For the purpose of computing the period for which  
16                  benefits are payable, each day of inpatient treatment is equivalent to two days  
17                  of treatment by partial hospitalization; ~~provided, however,~~ that no more than  
18                  ~~forty-six~~ twenty-three days of the inpatient treatment benefits required by this  
19                  section may be traded for treatment by partial hospitalization.
- 20                  d. In case of benefits provided for residential treatment, the benefits must be  
21                  provided for a minimum of sixty days of services covered under this section in  
22                  any calendar year. Residential treatment services must be provided by a  
23                  hospital as defined in subsection 25 of section 52-01-01 and rules of the state  
24                  department of health, or by a residential treatment program licensed pursuant  
25                  to rules adopted by the department of human services.
- 26                  e. An individual receiving residential treatment services who requires residential  
27                  treatment services beyond the minimum sixty days may trade unused  
28                  inpatient treatment benefits provided for under subsection b. For the purpose  
29                  of computing the period for which benefits are payable, each day of inpatient  
30                  treatment is equivalent to two days of treatment by a residential treatment  
31                  program, provided that no more than twenty-three days of inpatient treatment

1                   benefits required in subsection c may be traded for residential treatment  
2                   services.

3            f. In the case of benefits provided for outpatient treatment, the benefits must be  
4            provided for a minimum of twenty visits for services covered under this  
5            section in any calendar year, provided the diagnosis, evaluation, and  
6            treatment services are provided within the scope of licensure by a licensed  
7            physician, a licensed psychologist who is eligible for listing on the national  
8            register of health service providers in psychology, or the treatment services  
9            are provided within the scope of licensure by a licensed addiction counselor.  
10           The insurance company, nonprofit health service corporation, or health  
11           maintenance organization may not establish a deductible or a copayment for  
12           the first five visits in any calendar year, and may not establish a copayment  
13           greater than twenty percent for the remaining visits.

14           e. g. If the services are provided by a provider outside a preferred provider network  
15           without a referral from within the network, the insurance company, nonprofit  
16           health service corporation, or health maintenance organization may establish  
17           a copayment greater than twenty percent for only those visits after the first  
18           five visits in any calendar year.

19           "Partial hospitalization" means continuous treatment for at least three hours, but  
20           not more than twelve hours, in any twenty-four-hour period and includes the  
21           medically necessary treatment services provided by licensed professionals under  
22           the supervision of a licensed physician.

23           3. This section does not prevent any insurance company, nonprofit health service  
24           corporation, or health maintenance organization from issuing, delivering, or  
25           renewing, at its option, any policy or contract containing provisions similar to those  
26           required by this section, when the policy or contract is not subject to such  
27           provisions.

28           **SECTION 2. APPLICATION.** Notwithstanding any legislative measure approved by  
29           the fifty-eighth legislative assembly which could affect the application or expiration of this Act,  
30           this Act applies as of August 1, 2003, and does not expire until specifically repealed by the  
31           legislative assembly.