FIRST ENGROSSMENT

Sixty-seventh Legislative Assembly of North Dakota

ENGROSSED HOUSE BILL NO. 1407

Introduced by

Representatives Louser, Brandenburg, Jones, Monson, J. Nelson, Vigesaa Senator Kannianen

1 A BILL for an Act to amend and reenact section 50-24.1-40 of the North Dakota Century Code,

2 relating to medical assistance tribal health care coordination agreements; to repeal section

3 50-24.1-40 of the North Dakota Century Code, relating to medical assistance tribal health care

4 coordination agreements; to provide for legislative management and legislative council reports;

5 to provide a continuing appropriation; and to provide a contingent effective date.

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

- 7 SECTION 1. AMENDMENT. Section 50-24.1-40 of the North Dakota Century Code is
- 8 amended and reenacted as follows:
- 9 50-24.1-40. Medical assistance Tribal health care coordination agreements -

10 **Continuing appropriation - Report to legislative management.**

- 11 1. As used in this section:
- a. "Care coordination agreement" means an agreement between a health care
 provider and tribal health care organization which will result in one hundred
 percent federal funding for eligible medical assistance provided to an American
 Indian.
- b. "Tribal health care organization" means Indian health services or a tribal entity
 providing health care under the federal Indian Self-Determination and Education
 Assistance Act of 1975 [Pub. L. 93-638; 88 Stat. 2203; 25 U.S.C. 5301 et seq.].
- The department of human services shall facilitate care coordination agreements. OfanyThe department shall deposit all federal funding received in excess of the state's regular share of federal medical assistance funding which results from care coordination agreements, the department shall deposit sixtyseventy percent in the tribal health care coordination fund and fortythirty percent in the general fund.
- 24 3. There is created in the state treasury a tribal health care coordination fund.

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1	a.	Moneys in the fund are appropriated to the department on a continuing basis for
2		distribution to a tribal government in accordance with an agreement between the
3		department and a tribal government. The agreement between the department
4		and a tribal government must require the tribe to:
5		(1) Use the money distributed under this section for health-related purposes
6		related to the ten essential services of public heath identified by the federal
7		centers for disease control and prevention and the development or
8		enhancement of community health representative programs or services;
9		however, through June 30, 2025, no more than seventy-five percent and
10		thereafter, no more than thirty-five percent may be used for capital
11		construction. Health-related purposes may include population health
12		programs or services, marketing or education related to health-related
13		programs or services, or developing or enhancing community health
14		representative programs or services. Health-related purposes may not
15		include capital construction, stipends to individuals for services, or services-
16		that are covered by Indian health services, Medicaid, or other third-party
17		payers, or state-funded programs.
18		(2) Submit to the department annual reports detailing the use of the money
19		distributed under this section.
20		(3) Submit to the department every two years an audit report, conducted by an
21		independent licensed certified public accountant, of the tribal government
22		use of the money distributed under this section. A tribal government may
23		use money distributed under this section to pay for this audit report. At the
24		discretion of a tribal government, an audit may be conducted more often
25		than every two years.
26	b.	The distribution of moneys from the fund to a tribal government must be in
27		proportion to the federal funding received from care coordination agreement
28		requests for services originating from within that tribal nation.
29	C.	At least annually, upon completion of any auditing and verification actions of the
30		department, the department shall distribute moneys from the fund to the tribal
31		government.

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1	d.	If a tribal government fails to file with the department a timely annual report or	
2		audit report, the department shall withhold distribution of moneys from the fund to	
3		the tribal government until the report is filed.	
4	e.	If an audit report or the department's review of the annual report finds a tribal	
5		government used moneys distributed from the fund for a purpose inconsistent	
6		with this section, the department shall withhold future distributions to that tribal	
7		government in an amount equal to the money used improperly. The department	
8		shall distribute money withheld from a tribal government under this subdivision if	
9		a future audit report indicates moneys distributed from the fund are used for	
10		purposes consistent with this section.	
11	4. Bet	ore August of each even-numbered year, the:	
12	<u> </u>	The department shall compile and summarize the annual reports and audit	
13		reports from the participating tribal governmentsdata and provide the legislative	
14		management with a biennial report on the fund and tribalstate government use of	
15		money distributed from the fund.	
16	<u> </u>	Each each participating tribe shall compile data and provide the legislative	
17		management with a biennial report on the tribe's use of money distributed from	
18		the fund.	
19	SECTION 2. REPEAL. Section 50-24.1-40 of the North Dakota Century Code is repealed.		
20	SECTIO	N 3. DEPARTMENT OF HUMAN SERVICES - REPORT TO LEGISLATIVE	
21	COUNCIL. On January 2, 2023, the executive director of the department of human services		
22	shall certify to the legislative council whether any care coordination agreements have been		
23	facilitated under section 50-24.1-40 by December 31, 2022. If no care coordination agreements		
24	have been facilitated, the executive director also shall certify this status to the secretary of state.		
25	SECTIO	N 4. CONTINGENT EFFECTIVE DATE. Section 2 of this Act becomes effective on	
26	January 3, 2023, if the executive director of the department of human services certifies to the		
27	secretary of state and to the legislative council that by December 31, 2022, no care coordination		
28	agreements have been facilitated under section 50-24.1-40.		