

PROPOSED AMENDMENTS TO ENGROSSED SENATE BILL NO. 2012

That the House recede from its amendments as printed on pages _____ of the Senate Journal and pages _____ of the House Journal and that Engrossed Senate Bill No. 2012 be amended as follows:

Page 1, line 2, after the second "to" insert "create and enact a new chapter to title 26.1 of the North Dakota Century Code, relating to value-based care for health care organizations; to"

Page 8, after line 2, insert:

"SECTION 16. A new chapter to title 26.1 of the North Dakota Century Code is created and enacted as follows:

Definitions.

As used in this chapter:

1. "Health care organization" means a private medical hospital required to be licensed under chapter 23-16.
2. "Health carrier" or "carrier" has the same meaning as provided for under section 26.1-36.3-01.
3. "Medical care" means services provided by a health care organization related to the diagnosis, care, mitigation, treatment, or prevention of disease or bodily ailment or for the purpose of affecting any structure or function of the body.
4. "Network plan" has the same meaning as provided under section 26.1-36.3-01.
5. "Value-based care" means a health care delivery model in which a health care organization is paid based on patient health outcomes.

Value-based care for health care organization contracts with health carriers - Requirements.

To be included in a network plan, a health care organization shall enter value-based care contracts with the health carrier in which at least fifty percent of the revenue derived from medical care provided requires the health care organization to meet quality and utilization standards as defined by the commissioner by rule in at least four of the following categories:

1. Preventative cancer screenings;
2. Hospital admissions and readmissions;
3. Emergency room utilization;
4. Behavioral health; and

5. Child and adolescent preventative care.

Good-faith negotiations.

A health carrier shall engage in good-faith negotiations with health care organizations seeking to be included in a health carrier's network plan. A health carrier that does not negotiate in good faith with a health care organization seeking to be included in the health carrier's network plan is in violation of this chapter and is subject to section 26.1-01-03.3.

Rulemaking authority.

The commissioner shall adopt rules to administer this chapter."

Page 10, line 20, replace "with the effective date of this Act" with "July 1, 2023"

Page 10, line 25, remove "with the"

Page 10, line 26, replace "effective date of this Act" with "July 1, 2023,"

Page 13, line 7, replace "19" with "20"

Renumber accordingly