

Introduced by

Representative Karls

1 A BILL for an Act to create and enact a new section to chapter 54-52.1 of the North Dakota
2 Century Code, relating to diagnostic breast examination and supplemental screening breast
3 examination cost-sharing restrictions; to provide for a report to the legislative assembly; to
4 provide for application; and to provide an expiration date.

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

6 **SECTION 1.** A new section to chapter 54-52.1 of the North Dakota Century Code is created
7 and enacted as follows:

8 **Diagnostic and supplemental screening breast examination coverage - Cost-sharing**
9 **restriction.**

10 1. As used in this section:

11 a. "Diagnostic breast examination" means a medically necessary and appropriate
12 examination of the breast, in accordance with the national comprehensive cancer
13 network guidelines, including an examination using contrast-enhanced
14 mammography, diagnostic mammography, breast magnetic resonance imaging,
15 molecular breast imaging, and breast ultrasound, to evaluate an abnormality
16 seen or suspected from a mammogram examination or detected by another
17 means of examination.

18 b. "Supplemental screening breast examination" means a medically necessary and
19 appropriate examination of the breast, in accordance with the national
20 comprehensive cancer network guidelines, including an examination using
21 contrast-enhanced mammography, breast magnetic resonance imaging,
22 molecular breast imaging, and breast ultrasound, to screen for breast cancer
23 when there is no abnormality seen or suspected and which is based on personal

1 or family medical history or other factors that may increase the risk of breast
2 cancer, including dense breast.

3 2. Except as provided in subsection 3, the health insurance benefits coverage provided
4 by the board may not impose a deductible, copayment, coinsurance, or other cost-
5 sharing requirement that causes out-of-pocket costs for a diagnostic breast
6 examination or a supplemental screening breast examination provided to an individual
7 enrolled under the plan.

8 3. If application of subsection 2 would result in the ineligibility of a health benefit plan that
9 is a qualified high-deductible health plan to qualify as a health savings account under
10 section 223 of the Internal Revenue Code [26 U.S.C. 223], the requirements of
11 subsection-2 do not apply with respect to the deductible of a health benefit plan until
12 after the enrollee has met the minimum deductible under section 26 U.S.C. 223,
13 except for items or services that are preventive care under section 223(c)(2)(C), in
14 which case the requirements of subsection 2 apply regardless of whether the minimum
15 deductible under section 26 U.S.C. 223 has been met.

16 **SECTION 2. PUBLIC EMPLOYEES RETIREMENT SYSTEM - DIAGNOSTIC AND**
17 **SUPPLEMENTAL SCREENING BREAST EXAMINATION BENEFITS - REPORT TO**

18 **LEGISLATIVE ASSEMBLY.** Pursuant to section 54-03-28, the public employees retirement
19 system shall provide a report to the legislative assembly regarding the effect of the cost-sharing
20 restriction for a diagnostic breast examination or a supplemental screening breast examination
21 on the system's health insurance programs, information on the utilization and costs relating to
22 the cost-sharing restriction, and a recommendation regarding whether the cost-sharing
23 restriction should be continued for the system's health insurance programs.

24 **SECTION 3. APPLICATION.** This Act applies to health benefits coverage that begins after
25 June 30, 2027, and which does not extend past June 30, 2029.

26 **SECTION 4. EXPIRATION DATE.** This Act is effective through June 30, 2029, and after that
27 date is ineffective.