

HOUSE BILL NO. 1283

Introduced by

Representatives Karls, Conmy, Dobervich, Grindberg, Kiefert, McLeod, Meier, Schauer

Senators Barta, Cleary, Mathern, Hogan

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 breast examination
3 cost-sharing restrictions; to provide for a report to the legislative assembly; to provide for
4 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 breast examination coverage - Cost-sharing restriction.**

9 1. As used in this section:

- 10 a. "Diagnostic breast examination" means a medically necessary and appropriate
11 examination of the breast, including an examination using contrast-enhanced
12 mammography, diagnostic mammography, breast magnetic resonance imaging,
13 and breast ultrasound, to evaluate an abnormality seen or suspected from a
14 mammogram examination or detected by another means of examination.
- 15 b. "Supplemental breast examination" means a medically necessary and
16 appropriate examination of the breast, including an examination using contrast-
17 enhanced mammography, diagnostic mammography, breast magnetic resonance
18 imaging, and breast ultrasound, to screen for breast cancer when there is no
19 abnormality seen or suspected and is based on personal or family medical
20 history or other factors that may increase the risk of breast cancer.
- 21 2. Except as provided in subsection 3, the health insurance benefits coverage provided
22 by the board may not impose a deductible, copayment, coinsurance, or other cost-
23 sharing requirement that causes out-of-pocket costs for a diagnostic breast

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

11 **SECTION 2. PUBLIC EMPLOYEES RETIREMENT SYSTEM - DIAGNOSTIC AND**
12 **SUPPLEMENTAL BREAST EXAMINATION BENEFITS - REPORT TO LEGISLATIVE**

13 **ASSEMBLY.** Pursuant to section 54-03-28, the public employees retirement system shall
14 prepare and submit for introduction a bill to the seventieth legislative assembly to repeal the
15 expiration date for this Act and to extend the cost-sharing restriction for a diagnostic breast
16 examination or a supplemental breast examination to all group and individual health insurance
17 policies. The public employees retirement system shall append a report to the bill regarding the
18 effect of the cost-sharing restriction for a diagnostic breast examination or a supplemental
19 breast examination on the system's health insurance programs, information on the utilization
20 and costs relating to the cost-sharing restriction, and a recommendation regarding whether the
21 cost-sharing restriction should be continued.

22 **SECTION 3. APPLICATION.** This Act applies to health benefits coverage that begins after
23 June 30, 2025, and which does not extend past June 30, 2027.

24 **SECTION 4. EXPIRATION DATE.** This Act is effective through June 30, 2027, and after that
25 date is ineffective.