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Sixty-ninth
Legislative Assembly
of North Dakota

SENATE BILL NO. 2172

Introduced by

Senators Patten, Cleary, Hogan, Roers

Representatives Dobervich, Frelich

A BILL for an Act to create and enact a new section to chapter 26.1-45 of the North Dakota Century Code, relating to long-term care insurance policy terms and claim payments.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. A new section to chapter 26.1-45 of the North Dakota Century Code is created and enacted as follows:

Defined term requirements - Claim payments.

1. A long-term care insurance policy delivered or issued for delivery in this state may not include the following terms, unless the terms are defined in the policy and consistent with the following requirements:
   a. "Activities of daily living" means bathing, continence, dressing, eating, toileting, and transferring.
   b. "Bathing" includes washing oneself by sponge bath, or in a tub or shower, and the process of getting into and out of the tub or shower.
   c. "Cognitive impairment" includes a deficiency in an individual's:
      (1) Short-term or long-term memory;
      (2) Orientation as to an individual, place, or time;
      (3) Deductive or abstract reasoning; or
      (4) Judgment as it relates to safety awareness.
   d. "Continence" includes the ability to maintain control of bowel and bladder function, or when unable to maintain control of bowel or bladder function, the ability to perform associated personal hygiene, including caring for a catheter or colostomy bag.
   e. "Dressing" includes putting on and taking off any item of clothing and any necessary brace, fastener, or artificial limb.

f. "Eating" includes feeding oneself from a receptacle, including a plate, cup, or table, or being fed through a feeding tube or intravenously.

g. "Toileting" includes getting to and from the toilet and on and off the toilet, and performing associated personal hygiene.

h. "Transferring" includes moving into or out of a bed, chair, or wheelchair.

2. A policy defined under this chapter may not prohibit or delay payment of policy benefits to a basic care facility as defined under section 23-09.3-01 if the insured:

a. Meets the criteria for eligibility for benefits under the policy for care or services that are medically necessary;

b. Is unable to perform two or more activities of daily living without supervision or direct assistance; or

c. Has cognitive impairment requiring continual supervision.