Sixty-ninth Legislative Assembly of North Dakota

HOUSE BILL NO. 1481

Introduced by

Representatives Kasper, Dockter, Koppelman, Louser, Ostlie, D. Ruby Senators Bekkedahl, Cleary, Clemens, Hogan, Lee, Paulson

- 1 A BILL for an Act to create and enact a new section to chapter 26.1-36.9 of the North Dakota
- 2 Century Code, relating to dental insurer rate filing requirements.

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

- 4 **SECTION 1.** A new section to chapter 26.1-36.9 of the North Dakota Century Code is created and enacted as follows:
- 6 **Dental insurer rate filing Approval.**
- 7 <u>1. A dental insurer annually shall file proposed plan rates and any changes to group</u>
 8 rating factors that will be effective the following January first with the commissioner, as
- 9 <u>prescribed by the commissioner.</u>
- 10 <u>2.</u> <u>The commissioner shall disapprove a:</u>
- 11 <u>a. Proposed plan rate that is excessive, inadequate, or unreasonable in relation to</u>
 12 the benefits; and
- b. Group rating factor that is discriminatory or not actuarially sound.
- 14 3. The commissioner shall deem a proposed plan rate to be excessive and disapprove

 the proposed plan rate if the dental insurer files a rate change and the:
 - a. Reported contribution to surplus exceeds two percent of total revenue; or
 - b. Dental loss ratio for the plan is less than eighty-three percent.
- 18 <u>4. a. If the commissioner disapproves a proposed plan rate or group rating factor</u>
- 19 <u>under subsection 2, the commissioner shall provide notice of disapproval to the</u>
- dental insurer forty-five days before the proposed effective date of the proposed
- 21 <u>plan rate or group rating factor.</u>

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- b. Within ten days of the notice of disapproval being issued, the dental insurer may
- 23 request the commissioner hold a hearing.

1 If a dental insurer requests a hearing under this subsection, the commissioner 2 shall hold a hearing within fifteen days of receipt of the request. 3 <u>d.</u> The commissioner shall issue a decision within thirty days following the hearing. 4 A dental insurer may not implement the disapproved proposed plan rate or group 5 rating factor unless the commissioner reverses the disapproval decision following 6 the hearing. 7 5. If the commissioner disapproves a proposed plan rate under subsection 3, the a. 8 commissioner shall provide notice of disapproval to the dental insurer forty-five 9 days before the proposed effective date of the proposed plan rate and schedule a 10 public hearing. 11 Upon notice of the public hearing by the commissioner, the dental insurer shall <u>b.</u> 12 provide notice of the public hearing and the presumptive disapproval of the 13 proposed plan rate to all employers and individuals covered by the plan. 14 The commissioner shall issue a decision within thirty days following the public <u>C.</u> 15 hearing. A dental insurer may not implement the disapproved proposed plan rate 16 unless the commissioner reverses the presumptive disapproval decision following 17 the hearing. 18 <u>6.</u> <u>a.</u> If the annual dental loss ratio for a dental benefit plan is less than eighty-three 19 percent, the dental insurer offering the plan shall refund the excess premium to 20 covered individuals and groups. 21 <u>b.</u> A dental insurer shall provide notice to all individuals and groups that were 22 covered under the plan during the applicable twelve-month period that such 23 individuals and groups are entitled to a refund on the premium, or if the individual 24 or group remains covered by the dental insurer, that the individual or group is eligible for a credit on the premium for the following twelve-month period. 25 26 The total of all refunds issued under this subsection must equal the amount of the <u>C.</u> 27 dental insurer's earned premium which exceeds the amount necessary to 28 achieve a dental loss ratio of eighty-three percent, calculated using data reported 29 by the dental insurer, as prescribed by the commissioner. 30 <u>7.</u> The commissioner may:

Sixty-ninth Legislative Assembly

- a. Authorize a waiver or adjustment of the refund requirements in this section only if
 it is determined by the commissioner that issuing refunds would result in financial
 impairment for the dental insurer.
- 4 <u>b.</u> Adopt rules to implement and administer this section.