

MICROFILM DIVIDER

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SFN 2053 (2/85) 5M



ROLL NUMBER

DESCRIPTION

2252

2007 HOUSE HUMAN SERVICES

SB 2252

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2252

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 1-22-07

Recorder Job Number: 1541

Committee Clerk Signature

Mary K Monson

Minutes:

Senator J. Lee, Chairman, opened the hearing on SB 2252 relating to public employees retirement system health insurance coverage of suicide-related medical services; to require a report regarding coverage of suicide-related medical services; and to provide an expiration date.

Senator Mathern (Dist. 11) introduced SB 2252 and urged a do pass. (Attachment #1)

Senator Warner said there are other mental illness issues that are sometimes extraordinarily self destructive but don't quite reach the level of attempting suicide, for instance cutting behaviors. Are those types of behaviors generally covered under current insurance programs?

Sen. Mathern said he understood that those types of things are covered by BC/BS and ND PERS. There is also the potential that it can be defined as a behavior relating to the potential for suicide and, therefore, could be denied coverage by the 20 companies.

Senator Dever said he was confused, we are asking PERS to cover something they are already covering and then report on how it impacted.

Sen. Mathern replied, yes, that relates to Chapter 54.03.28 part of the century code. It essentially says we have this process we have to follow before we add another health insurance coverage. (Meter10:00)

Senator Dever asked if PERS can already give a report on what the cost is now.

Sen. Mathern suggested asking them.

There was some discussion on the need for a cost benefit analysis and the problems with getting one in time.

Senator Tom Seymour (Dist. 5) appeared in support of SB 2252.

Representative James Kerzman (Dist. 31) testified in support of SB 2252.

Chet Pulver (Public Policy Assistant with the Mental Health Association in ND) said they do support this legislation and recommend a do pass.

There was no opposing testimony.

Rod St. Aubyn (ND BC/BS) testified in a neutral manner. He wanted to explain the process a little further. Any health insurance mandate has several requirements. First it is supposed to go through the employee benefits committee. That's where the actuarial analysis starts and come up with the preliminary benefit analysis. Then, that's where section 2 comes in. It's supposed to apply strictly to PERS to give a real life example of what is the actual cost benefit analysis. It basically is suppose to be practice for two years to determine what has PERS actually experienced. At the conclusion of that, this is where the PERS mandate would cease. During the next legislative session a bill would be put in to apply to all health insurance companies.

They don't take a position on this because both PERS and BC plans do cover this particular service.

He talked about line 19. He was surprised that there are companies that exclude this. When medical providers bill for services they use a very intricate coding. Typically they code for the services they are rendering. (Meter 19:55)

For PERS to come up with a report of knowing and to say it is accurate is next to impossible.

The biggest concern they would have in terms of the reporting is the coding. The other thing that needs to be brought out is that 50% of the market they handle is self funded.

Senator J. Lee asked about the 50% and if it was 50% of the lives covered or 50% of what are self funded.

Mr. St. Aubyn said he wasn't sure but thought it was of the lives (Meter 23:35).

Senator Dever asked if they differentiate in their cost what the cost of providing that coverage is.

Mr. St. Aubyn replied they just know what their claims are and premiums are based on that.

Senator J. Lee asked Vance Magnuson from the insurance department if he could offer anything about the ERISA component and whether they have a lot of experience in their office with discussion about this being an excluded form of coverage.

Mr. Magnuson answered that there is a group mandate that all insurance companies writing in the group market as opposed to individual have to provide certain levels of benefits for mental illness and substance abuse. (Meter 27:07) The department has no knowledge how companies make the determination for suicide or attempted suicide.

Senator J. Lee asked if they have a lot of calls about this.

Mr. Magnuson said they did have an inquiry filed last summer. (Meter 30:45)

Senator J. Lee wondered what impact this would have.

Mr. Magnuson said the department could poll companies that are writing business in the state and find out if they do have suicide exclusions.

Senator J. Lee said part of the issue is you get what you pay for. What kind of requirements are there for the insurance agent to make sure people who are purchasing coverage know what it doesn't cover?

Mr. Magnuson said there is a disclosure mandate in the insurance code that does require the companies to provide basic information as far as what the coverage provides and also denoting what the exclusions are. (Meter 36:00)

Senator Dever said that it would be appropriate to ask the insurance department for information on if companies have the coverage available as a rider and what the cost would be.

Mr. Magnuson said he had never seen a suicide rider so it is either something they cover or not. It is not an option.

The hearing on SB 2252 was closed.

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2252

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 1-23-07

Recorder Job Number: 1717

Committee Clerk Signature

Mary K Moxson

Minutes:

Senator J. Lee, Chairman, opened SB 2252 for discussion. She reminded the committee that Mr. St. Aubyn had talked about the report being difficult to provide.

The committee discussed that PERS and BC/BS insured are already covered for this. This is a large group of people.

They talked about reporting and the coding procedures. (Meter 3:00)

Senator J. Lee asked what potential good they could actually make come out of this and, if they can, how do they do it. The major insurers are already covering it. None of them discuss the cause of the injury. There would have to be a whole new way of reporting, a change in the way they code.

Senator Warner brought up fraud and asked if suicide is a criminal offense in any way. This was followed by discussion. (Meter 8:15)

After more discussion on if there was a need for a suicide benefit the committee decided to wait for more information from the insurance department.

Senator J. Lee closed the discussion on SB 2252.

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2252

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 1-24-07

Recorder Job Number: 1829

Committee Clerk Signature *Mary K. Monson*

Minutes:

Senator J. Lee, Chairman, opened SB 2252 for discussion. She asked Vance Magnuson from the insurance department to share information.

Mr. Magnuson with the ND Insurance Department provided information that of the 18 companies that are available to write coverage in the major med market which would basically cover the carriers that would be affected under SB 2252 five do not exclude coverage for suicide or intentionally inflicted injuries. Nine companies do have exclusions. They weren't able to obtain information on the other four companies. (Meter 01:30)

Senator J. Lee said it seems appropriate that the cost of the care be covered. Can the whole cost benefit analysis for two years with PERS be excluded. This is a series of hoops to jump through for how many covered people. What is it going to take to make any difference?

Mr. Magnuson said the numbers of individuals affected by the companies that do exclude it is probably less than 5% of the total market. The prevalence of suicide is only a small percentage and this would only be the individuals that aren't successful.

Senator J. Lee asked about the person who attempts suicide unsuccessfully, is hospitalized for two weeks, and then dies. How do they fit into the picture?

Mr. Magnuson said their claims would not be covered.

There was discussion about the type of companies that exclude this coverage. Companies that write individual policies as opposed to employer group coverage are more likely to have the exclusion. In the group market there are more carriers that don't have exclusion or will allow the exclusion to be taken out.

Discussion about overstriking everything through line 22 and adding words about notwithstanding section 54. (Meter 11:00)

Senator Warner asked if there was the thought of suicide by the medical doctors treating the injury, wouldn't there be a psychiatric referral so there would be coding and billing for that.

Senator J. Lee said that doesn't say they wouldn't pay for that unless the policy doesn't cover mental health care.

Senator Warner asked Mr. Magnuson is there is a legitimate linkage between these suicide exclusions and excluding mental health care.

Mr. Magnuson said no there's not. (Meter 13:25)

Senator J. Lee asked how can this bill include a self insurance plan?

Mr. Magnuson replied that self insurance (ARISA) plans are exempt from mandates. However, PERS has an option of being self insured and PERS is not subject to ERISA.

(Meter 16:50) Discussion that the ultimate goal is to get medical costs of suicide attempts, successful or not, covered. The process they put in place about cost benefit analysis, PERS experience, etc. doesn't apply.

(Meter 22:50) They talked about reconstructing the bill to bypass PERS.

(Meter 30:55) Mental illness was discussed in relationship to suicide and insurance coverage.

Most policies that cover mental illness will refer to coverage as a legitimate mental illness.

Suicide can be a result but it is not a covered mental illness.

Senator J. Lee closed discussion on SB 2252.

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2252

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 1-31-07

Recorder Job Number: 2365

Committee Clerk Signature

Mary K Monson

Minutes:

Senator J. Lee opened SB 2252 for discussion and consideration of an amendment.

Senator Warner explained that the amendment was prepared by the insurance department.

Senator J. Lee referred to a letter by Sparb Collins (Attachment #2) indicating that PERS already covers this.

Senator Warner reviewed with the committee that 54-03-38 is the provision put into code by the legislature to provide some insurance mandates. Mr. Collins letter indicates there are two provisions. One is that any proposed insurance mandate would have to be put into the state plan first. Then, after two years, the data that is collected would be used to prepare cost benefit analysis. Mr. Collins letter indicates that the state already does provide insurance for suicide related injuries or, at least, does not exclude them and further that there is no way of collecting the data required for a cost benefit analysis. Medical coding system used by all hospitals and insurance companies does not state the cause of the injury and so there is no way to differentiate between a self inflicted and an auto or sports or work related injury.

This is a hoghouse amendment and the prime sponsor deems this to be a friendly amendment.

It circumvents the entire process laid out in 54-03-28 and says that medical services related to suicide or self inflicted injury should not be discriminated against.

Senator Warner moved the Poolman amendment to SB 2252.

Senator Erbele seconded the motion. Roll call vote 6-0-0. Amendment accepted.

Senator Warner moved a Do Pass on SB 2252 as amended.

Second by Senator Erbele.

There was discussion that no one seems to be opposed to the concept. People don't take out health insurance policies with the intention of committing suicide. The owner couldn't possibly benefit.

Roll call vote 6-0-0. Passed. Carrier is Senator Warner.

FISCAL NOTE
Requested by Legislative Council
03/08/2007

Amendment to: Engrossed
 SB 2252

1A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2005-2007 Biennium		2007-2009 Biennium		2009-2011 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures						
Appropriations						

1B. **County, city, and school district fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

2005-2007 Biennium			2007-2009 Biennium			2009-2011 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

2A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

Requires coverage for injury resulting from suicide, attempted suicide or self inflicted injury

B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

This coverage is already provided by the PERS Health Plan so the provisions of this bill as amended will have no fiscal impact

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

Name:	Sparb Collins	Agency:	PERS
Phone Number:	328-3901	Date Prepared:	03/08/2007

FISCAL NOTE
Requested by Legislative Council
01/16/2007

Bill/Resolution No.: SB 2252

1A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2005-2007 Biennium		2007-2009 Biennium		2009-2011 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures						
Appropriations						

1B. **County, city, and school district fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

2005-2007 Biennium			2007-2009 Biennium			2009-2011 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

2A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

Requires coverage for injury resulting from suicide, attempted suicide or self inflicted injury

B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

This coverage is already provided by the PERS Health Plan so the provisions of this bill will have no fiscal impact

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

Name:	Sparb Collins	Agency:	NDPERS
Phone Number:	328-3901	Date Prepared:	01/19/2007

Date: 1-31-07

Roll Call Vote #: 1

2007 SENATE STANDING COMMITTEE ROLL CALL VOTES

BILL/RESOLUTION NO. SB 2252

Senate HUMAN SERVICES Committee

Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken Poolman Amendment

Motion Made By Sen. Warner Seconded By Sen. Erbele

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman	✓		Senator Joan Heckaman	✓	
Senator Robert Erbele, V. Chair	✓		Senator Jim Pomeroy	✓	
Senator Dick Dever	✓		Senator John M. Warner	✓	

Total (Yes) 6 No 0

Absent 0

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

Date: 1-31-07

Roll Call Vote #: 2

2007 SENATE STANDING COMMITTEE ROLL CALL VOTES

BILL/RESOLUTION NO. SB 2252

Senate HUMAN SERVICES Committee

Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken Do Pass as Amended

Motion Made By Sen. Warner Seconded By Sen. Erbele

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman	✓		Senator Joan Heckaman	✓	
Senator Robert Erbele, V. Chair	✓		Senator Jim Pomeroy	✓	
Senator Dick Dever	✓		Senator John M. Warner	✓	

Total (Yes) 6 No 0

Absent 0

Floor Assignment Senator Warner

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

SB 2252: Human Services Committee (Sen. J. Lee, Chairman) recommends AMENDMENTS AS FOLLOWS and when so amended, recommends DO PASS (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2252 was placed on the Sixth order on the calendar.

Page 1, line 1, after "A BILL" replace the remainder of the bill with "for an Act to create and enact section 26.1-36-09.12 of the North Dakota Century Code, relating to health insurance coverage for suicide-related medical services.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. Section 26.1-36-09.12 of the North Dakota Century Code is created and enacted as follows:

26.1-36-09.12. Medical services related to suicide. An insurance company, nonprofit health service corporation, or health maintenance organization may not deliver, issue, execute, or renew any health insurance policy, health service contract, or evidence of coverage on an individual, group, blanket franchise, or association basis unless the policy, contract, or evidence of coverage provides benefits, of the same type offered under the policy or contract for illnesses, for health services to any individual covered under the policy or contract for injury or illness resulting from suicide, attempted suicide, or self-inflicted injury. The medical benefits provided for in this section are exempt from section 54-03-28."

Renumber accordingly

2007 HOUSE HUMAN SERVICES

SB 2252

2007 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2252

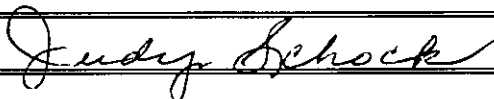
House Human Services Committee

Check here for Conference Committee

Hearing Date: March 5, 2007

Recorder Job Number: 4325

Committee Clerk Signature



Minutes:

Chairman Price: We will open the hearing on SB 2252.

Senator Tim Mathern, District 11 in Fargo: See attached testimony. We do have one question about the health insurance language. The insurance commissioner might clarify that further if you want.

Representative Jim Kerzman, District 31: I add my support for this. I think we have come a long ways in society in recognizing suicide is an illness. It is a big burden to families when someone attempts suicide and fails. We should allow them treatment and medication, and what ever we can do to save a life.

Christopher Dodson, ND Catholic Conference: When I first saw the original bill I was shocked there were policies out there that would not cover. The code already presumes that a self inflicted injury or suicide is not a rational act. It seems as though if it not a rational acts, why would a insurance policy exclude a non rational act? That is unfair to the families. We support this bill, and the changes made on the Senate side.

Vance Magnison, ND Insurance Department: the only possible problem might be the interpretation of health insurance. There are a number of policies typically are classified as accident health insurance. Companies will pay for accidents as well as illness under policies.

Sometime they don't have specific accident benefits. Those specific benefits are not ever intended to pay for intentional acts or suicide. Health insurance is better but not clear. In the insurances that were researched 5 did not exclude suicide and 9 do exclude. There is language specifically defined health insurance under chapter 26.1-36.3.

Representative Weisz: Could not understand his entire questions.

Chairman Price: Anyone else to testify for SB 2252? Any opposition? Hearing none we will close the hearing on SB 2252

2007 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2252

House Human Services Committee

Check here for Conference Committee

Hearing Date: March 6, 2007

Recorder Job Number: 4502

Committee Clerk Signature

Judy Schock

Minutes:

Vice Chair Pietsch: Take out SB 2252 for action.

Representative Uglem: I have proposed amendment and I will explain. We had input from Commissioner Poolman. See attached. If no questions I will move the amendment, seconded by **Representative Hofstad**. The verbal vote was unanimous. **Representative Hatlestad** moves a do pass as amended, seconded by **Representative Schneider**. The vote was 11 yeas, 0 nays, and 1 absent. **Representative Uglem** will carry the bill to the floor.

Date: 3/6
Roll Call Vote #: 1

2007 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. "Click here to type Bill/Resolution No."

House HUMAN SERVICES S.B. 2257 Committee

Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken Move Amendment

Motion Made By Rep. Uferm Seconded By Rep. Hofstad

Representatives	Yes	No	Representatives	Yes	No
Clara Sue Price – Chairman			Kari L Conrad		
Vonnie Pietsch – Vice Chairman			Lee Kaldor		
Chuck Damschen			Louise Potter		
Patrick R. Hatlestad			Jasper Schneider		
Curt Hofstad					
Todd Porter					
Gerry Uglen					
Robin Weisz					

Total (Yes) 11 "Click here to type Yes Vote" No 0 "Click here to type No Vote"

Absent 1

Floor Assignment Rep. _____

If the vote is on an amendment, briefly indicate intent:

Date: 3/6
Roll Call Vote #: 2

2007 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. "Click here to type Bill/Resolution No."

House HUMAN SERVICES SB 2252 Committee

Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken As pass Amended

Motion Made By Rep. Hatlestad Seconded By Rep. Schneider

Representatives	Yes	No	Representatives	Yes	No
Clara Sue Price – Chairman			Kari L Conrad	<input checked="" type="checkbox"/>	
Vonnie Pietsch – Vice Chairman	<input checked="" type="checkbox"/>		Lee Kaldor	<input checked="" type="checkbox"/>	
Chuck Damschen	<input checked="" type="checkbox"/>		Louise Potter	<input checked="" type="checkbox"/>	
Patrick R. Hatlestad	<input checked="" type="checkbox"/>		Jasper Schneider	<input checked="" type="checkbox"/>	
Curt Hofstad	<input checked="" type="checkbox"/>				
Todd Porter	<input checked="" type="checkbox"/>				
Gerry Uglem	<input checked="" type="checkbox"/>				
Robin Weisz	<input checked="" type="checkbox"/>				

Total (Yes) 11 "Click here to type Yes Vote" No 0 "Click here to type No Vote"

Absent 1

Floor Assignment Rep. Uglem

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

SB 2252, as engrossed: Human Services Committee (Rep. Price, Chairman) recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (11 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). Engrossed SB 2252 was placed on the Sixth order on the calendar.

Page 1, line 8, replace "health insurance policy, health service contract, or evidence of coverage" with "hospital, surgical, medical, or major medical benefit policy"

Renumber accordingly

2007 TESTIMONY

SB 2252

**Senate Bill 2252, Human Services Committee
January 22, 2007**

Madam Chairman Lee and Members of the Human Services Committee,

My name is Tim Mathern, Senator from District 11 in Fargo. I introduced SB 2252 relating to suicide related medical services.

Passage of this bill will begin a process with the hoped for outcome that health insurance companies be required to include in their benefits, coverage for illness and injury resulting from suicide, attempted suicide, or self inflicted injury. Section notes the requirement that this be covered by ND Public Employees health plan for the next biennium, that the costs be further determined by this plan and then that a bill be introduced to have all insurers cover this beginning the 2009 bennium. This is a complicated process the legislature set up in 2001 further described in the attachment about 54-03-28 of the NDCC. Essentially the process is in place to prevent health care mandates from going into place with no outcome cost experiece. You could circumvent this process and mandate coverage immediatly but that would take further amendment and might not get enough support by the full Senate as you would be taking on two battles, changing our legislative system and changing the coverage policy. I would be supportive of such a process in this case as we have two providers with this coverage in place.

Last summer I spent some time with OUT OF THE DARKNESS, a group of families that had dealt with a consequence of mental illness, suicide. Mental illness is potentially fatal, when it is, we call it suicide. The families who had a suicide attempt survivor member talked about the shock and fiancail ruin they experienced when the medical costs related to the suicide attempt were not covered by their insurance.

After some research I learned that this indeed is the case as we do not have such a requirement of coverage in place in North Dakota. I learned that this coverage is granted by Blue Cross Blue Shield and our ND Public Employees health insurance plan. However the Insurance Commissioner office confirmed for me that there are about 20 other insurers licensed in this state that do not have this coverage.

Ladies and gentleman, mental illness already does not have parity in coverage with other illness. Now we have uncovered another consequence when people do not get the help they need, suicide. This bill only addresses one aspect of this problem. When there is an attempt of suicide and we are able to save the persons life lets make sure that coverage of the related medical bills do not cause a further burden that makes people wonder if their continued living is too big a burden for themselves or their family. People can get well, whether the illness is heart disease, cancer, or mental illness, lets give them the support they need to make this possible.

Committee members, I urge a do pass recommendation for SB 2252. Thank you.

54-03-28. Health insurance mandated coverage of services — Cost-benefit analysis requirement.

1. A legislative measure mandating health insurance coverage of services or payment for specified providers of services may not be acted on by any committee of the legislative assembly unless the measure is accompanied by a cost-benefit analysis provided by the legislative council. Factors to consider in this analysis include:

a. The extent to which the proposed mandate would increase or decrease the cost of the service.

b. The extent to which the proposed mandate would increase the appropriate use of the service.

c. The extent to which the proposed mandate would increase or decrease the administrative expenses of insurers and the premium and administrative expenses of insureds.

d. The impact of the proposed mandate on the total cost of health care.

2. A legislative measure mandating health insurance coverage of services or payment for specified providers of services may not be acted on by any committee of the legislative assembly unless the measure as recommended by the committee provides:

a. The measure is effective through June thirtieth of the next odd-numbered year following the year in which the legislative assembly enacted the measure, and after that date the measure is ineffective.

b. The application of the mandate is limited to the public employees health insurance program and the public employee retiree health insurance program. The application of such mandate begins with every contract for health insurance which becomes effective after June thirtieth of the year in which the measure becomes effective.

c. That for the next legislative assembly, the public employees retirement system shall prepare and request introduction of a bill to repeal the expiration date and to extend the mandated coverage or payment to apply to accident and health insurance policies. The public employees retirement system shall append to the bill a report regarding the effect of the mandated coverage or payment on the system's health insurance programs. The report must include information on the utilization and costs relating to the mandated coverage or payment and a recommendation on whether the coverage or payment should continue. For purposes of this section, the bill is not a legislative measure mandating health insurance coverage of services or payment for specified providers of services, unless the bill is amended following introduction so as to change the bill's mandate.

3. A majority of the members of the committee, acting through the chairman, has sole

authority to determine whether a legislative measure mandates coverage of services under this section.

4. Any amendment made during a legislative session to a measure which mandates health insurance coverage of services may not be acted on by a committee of the legislative assembly unless the amendment is accompanied by a cost-benefit analysis provided by the legislative council.

5. The legislative council shall contract with a private entity, after receiving one or more recommendations from the insurance commissioner, to provide the cost-benefit analysis required by this section. The insurance commissioner shall pay the cost of the contracted services to the entity providing the services.

Source. S.L. 2001, ch. 471, § 1; 2003, ch. 240, § 6.

Effective Date. - The 2003 amendment of this section by section 6 of chapter 240, S.L. 2003 became effective August 1, 2003.

This section became effective July 1, 2001.



**North Dakota
Public Employees Retirement System**

400 E. Broadway, Suite 505 • PO Box 1657
Bismarck, North Dakota 58502 - 1657

Attachment # 2

Sparb Collins
Executive Director
(701) 328-3900
1-800-803-7377

FAX: (701) 328-3920 • EMAIL: NDPERS@state.nd.us • discovernd.com/NDPERS

January 25, 2007

Honorable Judy Lee
State Senator
600 E Boulevard Ave
Bismarck, ND 58505

Dear Senator Lee:

I am writing concerning SB 2252. This bill mandates health insurance coverage of suicide related medical services. The PERS plan, which is covered by BCBS, does provide this coverage and has for many years.

I note that if this bill is passed it would ask PERS to conduct a study regarding the effect of the suicide related services coverage requirement on the system's health insurance programs, and information on the utilization and costs relating to the coverage. This bill also requires us to report our findings to the next legislative session. In reviewing this provision and discussing it with our carrier BCBS, we have concluded that it would be very difficult to develop the data for such a study. Specifically, the claims payment system is programmed to pay based on the primary diagnosis submitted on the claim. Due to limitations of the diagnosis coding system, a diagnosis code for actual suicide attempt does not exist. Nearly all claims involving suicides will be submitted with the underlying reason (i.e. major depression) for the suicidal event as the primary medical or psychiatric diagnosis. While the medical condition may have been caused as a result of a suicide attempt, it would not be coded as such but rather based upon the condition presented. Consequently, we would not have data that could be drawn upon that specifically would allow for a meaningful study.

I hope the above information is helpful to your consideration of this bill, and if I can be of any other assistance please let me know.

Sparb Collins
Executive Director

FlexComp Program
Employee Health & Life Insurance
Dental/Vision Program

• Retirement Programs

- Public Employees
- Highway Patrol
- National Guard/Law Enforcement
- Judges
- Prior Service
- Job Services

• Retiree Health Insurance Credit
• Deferred Compensation Program
• Long Term Care Program

DRAFT

PROPOSED AMENDMENTS TO SENATE BILL NO. 2252

Page 1, line 1, after "A BILL" replace the remainder of the bill with "for an Act to create and enact section 26.1-36-09.12 of the North Dakota Century Code, relating to a mandate to provide health insurance coverage for suicide-related medical services and to provide for an exemption.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. Section 26.1-36-09.12 of the North Dakota Century Code is created and enacted as follows:

26.1-36-09.12. Medical services related to suicide. An insurance company, nonprofit health service corporation, or health maintenance organization may not deliver, issue, execute, or renew any health insurance policy, health service contract, or evidence of coverage on an individual, group, blanket franchise, or association basis unless the policy contract, or evidence of coverage provides benefits, of the same type offered under the policy or contract for illnesses, for health services to any person covered under the policy or contract for injury or illness resulting from suicide, attempted suicide, or self-inflicted injury. The medical benefits provided for in this section are exempt from section 54-03-28."

Renumber accordingly

Senate Bill 2252
Human Services Committee
March 5, 2007 10:45 AM

Madam Chairman Price and Members of the Human Services Committee,

My name is Tim Mathern, Senator from District 11 in Fargo. I introduced SB 2252 relating to suicide related medical services.

Passage of this bill will require health insurance companies to include in their benefits, coverage for illness and injury resulting from suicide or attempted suicide. This coverage is already in place with Blue Cross Blue Shield and with the North Dakota Public Employees Health Care plan. The Senate exempted going through the 54-03-28 process because the cost of the benefit was negligible or maybe not able to be determined as there are no billing codes that relate to suicide attempts.

Last summer I spent some time with OUT OF THE DARKNESS, a group of families that had dealt with a consequence of mental illness, suicide. Mental illness is potentially fatal, when it is, we call it suicide. The families who had a suicide attempt survivor member talked about the shock and financial problems they experienced when the medical costs related to the suicide attempt were not covered by their insurance.

After some research I learned that this indeed is the case as we do not have such a requirement of coverage in place in North Dakota. The Insurance Commissioner office confirmed for me that there are about 20 insurers licensed in this state that do not have this coverage. This bill however does not cover self insured plans.

Ladies and gentleman, mental illness already does not have parity in coverage with other illness. This bill only addresses one aspect of this problem. When there is an attempt of suicide and we are able to save the persons life lets make sure that medical bills do not cause a further burden that makes people wonder if their continued living is too big a burden for their family.

People can get well, whether the illness is heart disease, cancer, or mental illness, lets assure their family has the support they need to make this possible.

Committee members, I urge a do pass recommendation for SB 2252. Thank you.