

SENATE BILL NO. 2059

Introduced by

Senators Watne, C. Nelson

Representatives Delmore, Wentz

1 A BILL for an Act to create and enact a new section to chapter 26.1-36 of the North Dakota
2 Century Code, relating to insurance coverage for reconstructive breast surgery.

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

4 **SECTION 1.** A new section to chapter 26.1-36 of the North Dakota Century Code is
5 created and enacted as follows:

6 **Health insurance policy and health service contract - Reconstructive breast**
7 **surgery coverage.**

- 8 1. An insurance company, nonprofit health service corporation, or health maintenance
9 organization may not deliver, issue, execute, or renew any health insurance policy,
10 health service contract, limited benefit policy, or evidence of coverage that provides
11 coverage for mastectomy on an individual, group, blanket, franchise, or association
12 basis unless the policy, contract, or evidence of coverage provides benefits, of the
13 same type offered under the policy or contract for illnesses, for health services to
14 any person covered under the policy or contract for reconstructive breast surgery.
- 15 2. Reconstructive breast surgery coverage includes coverage for all stages and
16 revisions of surgery performed on a nondiseased breast to establish symmetry
17 when reconstructive surgery on a diseased breast is performed. If a patient elects
18 breast reconstruction, reconstruction coverage under this section must allow the
19 patient and physician to choose the method and manner of reconstruction.
- 20 3. As long as the coverage provided under this section is consistent with the
21 coverage provided under the policy or contract for other illnesses, the coverage
22 required under this section may be limited to policy aggregate limits and an
23 insurance company, nonprofit health service corporation, or health maintenance
24 organization may impose deductibles, coinsurance, or other cost sharing in relation

1 to benefits for hospital lengths of stay relating to reconstructive breast surgery
2 under the policy or contract. An insurance company, nonprofit health service
3 corporation, health maintenance organization, or provider may not:

4 a. Deny coverage described in this section on the basis that the coverage is for
5 cosmetic surgery;

6 b. Deny to a person eligibility or continued eligibility to enroll or to renew
7 coverage under the terms of the contract, policy, or plan, solely for the
8 purpose of avoiding the requirements of this section;

9 c. Provide monetary payments or rebates to any insured person to encourage
10 the insured to request less than the minimum protections required under this
11 section;

12 d. Penalize or otherwise reduce or limit the reimbursement of an attending
13 physician or health care provider for recommending or providing care that is
14 covered under this section;

15 e. Provide any type of incentive to an attending physician or health care provider
16 to induce the physician or health care provider to provide care to an individual
17 participant or beneficiary in a manner inconsistent with this section.