

Following Legislative Council staff drafting of Health Care Reform Review Committee bill draft 11.0806.01000, a review of the bill draft and receipt of comments from stakeholders have led to the following suggested amendments:

Page 1, line 1, after the semicolon insert "to provide an effective date; and"

Page 1, line 2, remove "; and to declare an emergency"

Page 3, line 24, replace "9" with "10"

Page 3, line 30, remove "small business health options programs"

Page 4, line 1, remove "small business health options"

Page 4, line 19, remove "; however, by rule the"

Page 4, remove line 20

Page 4, line 21, remove "employees in excess of fifty employees"

Page 9, line 16, replace "certification provided in subdivision a" with "following certification by the commissioner's qualified actuary: "In my opinion, the premium rates to which this certification applies have been calculated according to generally accepted actuarial practices and are neither excessive, inadequate, nor unfairly discriminatory""

Page 15, remove lines 13 through 15

Page 15, line 16, replace "4." with "3."

Page 20, after line 22, insert:

"SECTION 14. EFFECTIVE DATE. This Act becomes effective December 1, 2011."

Page 20, remove line 31

DISCUSSION: As the discussion moves forward it may be valuable to review the bill draft language to affirm the bill draft is clear about the timing of when steps need to be taken, for example, clarify the exchange is not required to be in effect until January 1, 2014.

DISCUSSION: Although page 5, line 18, provides the board is an administrative agency and therefore subject to the Administrative Agencies Practice Act under North Dakota Century Code Chapter 28-32, Section 28-32-01(2)(a) should be amended to ensure this point is clear.

DISCUSSION: Section 3 of the Act, beginning on page 5, line 24, provides for a 5-member board, made up of the Insurance Commissioner, executive director of the Department of Human Services, a representative of the health insurance industry, a representative of employer interests, and a representative of consumer interests. The ACA may require additional consumer representation on this governing body.

DISCUSSION: The conflict of interest provisions on page 6, lines 25 through 31, may need to be reviewed to ensure they reflect a workable mechanism to address conflicts of interest.

North Dakota State Government Agencies, Departments or other State Entities may not enter into any agreement, contract or other relationship with the U.S. Federal Government or its agents to establish, manage, operate or form any other relationship to provide a Health Insurance exchange serving North Dakota residents without statutory authority from the legislature regarding the design, implementation or funding of a health insurance exchange.