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FIRST ENGROSSMENT

Sixty-seventh Legislative Assembly of North Dakota

ENGROSSED HOUSE BILL NO. 1465

Introduced by

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Representatives Westlind, Tveit, Weisz

A BILL for an Act to create and enact section 26.1-36-12.7 of the North Dakota Century Code,
relating to freedom of choice for health care services. for an Act to provide for a legislative
management study of health insurance networks.

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

enacted as follows:
26.1-36-12.7. Freedom of choice for health care services.
1. As used in this section:
a. "Health care provider" includes an individual licensed under chapter 43-05,
43-06, 43-12.1 as a registered nurse or as an advanced practice registered
nurse, 43-13, 43-15, 43-17, 43-26.1, 43-28, 43-32, 43-37, 43-40, 43-41, 43-42,
43-44, 43-45, 43-47, 43-58, or 43-60.
<u>b.</u> <u>"Policy" means a health insurance policy, contract, or evidence of coverage on a</u>
group, individual, blanket, franchise, or association basis.
2. A health insurer, including the North Dakota Medicaid program, may not obstruct
patient choice by excluding a health care provider licensed under the laws of this state
from participating on the health insurer's panel of providers if the provider is located
within the geographic coverage area of the health benefit plan and is willing and fully
qualified to meet the terms and conditions of participation, as established by the health
insurer.

SECTION 1. LEGISLATIVE MANAGEMENT STUDY - HEALTH INSURANCE NETWORKS.

1. During the 2021-22 interim, the legislative management shall consider studying health insurance networks, including narrow networks. The study must include:

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- a. Consideration of the use and regulation of broad and narrow networks in the state by individuals and employers, the sales and marketing of broad and narrow networks, consumer choice-of-provider implications, and premium differentials offered between broad and narrow networks;
- A review of legislative history regarding the exclusive provider organizations and preferred provider organizations and regulations that apply to health plans regulated by the federal Employee Retirement Income Security Act of 1974;
- c. A comparison of health maintenance organizations provider network designs and other health insurer provider network designs; and
- d. A comparison of premiums of health benefit plans offered in the individual and small group markets in relation to the provider network design associated with those plans along with the growth of value-based purchasing.
- 2. The legislative management shall report its finding and recommendations, together with any legislation required to implement the recommendations, to the sixty-eighth legislative assembly.