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Chairman Holmberg and Members of the Senate Appropriations Committee:

I write in **support** of HB 1435, which allows continuing health insurance coverage for the surviving spouse and dependent children of any police officer, firefighter, corrections officer, or emergency medical services personnel killed in the line of duty. This bipartisan bill arrives before you having previously received favorable consideration in the Employee Benefits Programs Committee (twice), the House Political Subdivisions Committee, the full House, and the Senate Government and Veterans Affairs Committee. I am proud that the bill also has the support of organizations representing North Dakota counties, cities, sheriffs, police chiefs, peace officers, firefighters, and the Department of Corrections and Rehabilitations. I hope your committee will concur and favorably recommend the bill, too. But as I have said every time I have spoken on this bill, I pray it will *never* be needed again in North Dakota

It is no coincidence that my co-sponsors and I brought forward this bill during this particular session. As this Committee is aware, we lost a North Dakota hero on May 27, 2020, when Grand Forks Police Department Officer Cody Holte was killed in the line of duty. Officer Holte's tragic death is a horrific reminder of the risks our emergency services workers face every day. We remember also other heroes recently killed in service to their communities, including Officer Jason Moszer of Fargo, Deputy Colt Allery of Rolette County, Deputy Bryan Sleeper of Burleigh County, and Sergeant Steven Kenner of Bismarck.

Try as we might, there are no laws we can pass to eliminate entirely the risk these heroes face on the job. But what we can do is to make sure we take care of surviving spouses and children of our fallen heroes when tragedy does strike. That's the intention of HB 1435, which provides an additional layer of protection to the families of fallen police officers, firefighters, corrections officers, and EMS workers killed in the line of duty. In that tragic event, HB 1435 would allow a surviving spouse and dependent children to continue receiving healthcare coverage by enrolling in the state employee insurance plan administered by NDPERS. It likewise extends retroactively to cover (prospectively) any families who lost loved ones in the line of duty since the start of 2010 (including the heroes I listed previously). These protections mirror similar benefits already offered in at least 17 other states nationwide, ranging from Alabama to California.

I refer the Committee to my written testimony submitted prior to the Senate Government and Veterans Affairs Committee hearing, as it discusses in-depth the details of the bill. In short, the bill allows qualifying beneficiaries to obtain health insurance coverage on the state employee plan until a spouse reaches age 65 or a dependent child reaches age 26. The coverage extends only to families of qualifying emergency personnel employed by a public entity (thus excluding, for example, volunteer firefighters and privately employed EMTs). Rather than belabor the details of the bill, I instead am more than happy to answer any questions this Committee might have regarding those details at the end of my testimony.

Let me turn instead to the bill's fiscal note. As initially filed, HB 1435 contemplated that the original employer (be it the state, a county, or a city) would incur the financial obligation to fund continuing coverage. After consulting with representatives from North Dakota cities and counties about how difficult that could be financially for small jurisdictions, the House Political Subdivisions Committee adopted a proposed amendment to instead allow all beneficiaries to obtain coverage under the state employee health insurance plan. Pursuant to this change, an updated fiscal note now indicates the estimated cost if all known possible beneficiaries opt to receive coverage starting on the bill's effective date. In that event, NDPERS estimates the additional State biennium premium for coverage would be approximately \$210,000, or a \$0.55 per contract per month cost. This figure would decrease if any of the existing pool of eligible beneficiaries declined coverage. After re-referral back to the Employee Benefits Program Committee, a new actuarial report concluded the current bill draft would increase the cost of the NDPERS plan by approximately 0.03%. Following receipt of this report, that committee again unanimously gave its favorable recommendation to the bill.

Mr. Chairman and members of the committee, even with this modest cost to the state and increased impact on the NDPERS plan, I continue to believe HB 1435 is both the right thing to do and something that our state can afford to do. So while the details of the bill have changed since its introduction, the values it represents have not. We still owe a great debt of gratitude to those heroes who put their lives on the line for us every day, and we should take this small step to protect the families they leave behind when tragedy strikes. Therefore, I urge this committee to support the measure, and I stand ready for any questions.