

**2023 HOUSE HUMAN SERVICES**

**HB 1047**

# 2023 HOUSE STANDING COMMITTEE MINUTES

## Human Services Committee Pioneer Room, State Capitol

HB 1047  
1/10/2023

Relating to the requirement that health insurers provide certain information to the department of health and human services.
--

Chairman Weisz called the meeting to order at 9:01am.

Chairman Robin Weisz, Vice Chairman Matthew Ruby, Reps. Karen A. Anderson, Mike Beltz, Kathy Frelich, Dawson Holle, Dwight Kiefert, Carrie McLeod, Todd Porter, Brandon Prichard, Karen M. Rohr, Jayme Davis, and Gretchen Dobervich present. Rep. Fegley not present.

### **Discussion Topics:**

- Health care coverage
- Changing health care plans
- Impact on health care contracts

Corey Kjos, Enterprise Operations Manager with the Department of Health and Human Services, introduced HB 1047 with supportive testimony (#12690).

Megan Houn, Policy Analyst for Health Care Public Policy, spoke in opposition to HB 1047.

Rick Clayberg, President and CEO of the North Dakota Bankers Association, spoke in opposition to HB 1047.

Chairman Weisz adjourned the meeting at 9:13am.

*Phillip Jacobs, Committee Clerk*

# 2023 HOUSE STANDING COMMITTEE MINUTES

## Human Services Committee Pioneer Room, State Capitol

HB 1047  
2/1/2023

Relating to the requirement that health insurers provide certain information to the department of health and human services.

Chairman Weisz called the meeting to order at 2:47 PM.

Chairman Robin Weisz, Reps. Karen A. Anderson, Mike Beltz, Clayton Fegley, Kathy Frelich, Dawson Holle, Carrie McLeod, Todd Porter, Brandon Prichard, Karen M. Rohr, Jayme Davis, and Gretchen Dobervich. Vice Chairman Ruby and Rep. Kiefert not present.

### Discussion Topics:

- Health care coverage
- Changing health care plans
- Impact on health care contracts

Representative Dobervich moved a DO PASS on HB 1047.

Seconded by Representative Fegley.

Roll call vote:

Representatives	Vote
Representative Robin Weisz	Y
Representative Matthew Ruby	AB
Representative Karen A. Anderson	Y
Representative Mike Beltz	Y
Representative Jayme Davis	Y
Representative Gretchen Dobervich	Y
Representative Clayton Fegley	Y
Representative Kathy Frelich	Y
Representative Dawson Holle	Y
Representative Dwight Kiefert	AB
Representative Carrie McLeod	Y
Representative Todd Porter	N
Representative Brandon Prichard	N
Representative Karen M. Rohr	Y

Motion carries 10-2-2.

Bill carrier: Representative Rohr.

Chairman Weisz adjourned the meeting at 2:51 PM.

*Phillip Jacobs, Committee Clerk By: Leah Kuball*

**REPORT OF STANDING COMMITTEE**

**HB 1047: Human Services Committee (Rep. Weisz, Chairman)** recommends **DO PASS** (10 YEAS, 2 NAYS, 2 ABSENT AND NOT VOTING). HB 1047 was placed on the Eleventh order on the calendar.

**2023 SENATE HUMAN SERVICES**

**HB 1047**

# 2023 SENATE STANDING COMMITTEE MINUTES

**Human Services Committee**  
Fort Lincoln Room, State Capitol

HB 1047  
2/20/2023

Regarding to the requirement that health insurers provide certain information to the department of health and human services.
---

10:40 AM **Madam Chair Lee** called the hearing to order. Senators Lee, Cleary, Clemens, K. Roers, Weston, Hogan were present.

### Discussion Topics:

- 60-day requirement
- Additional prior authorization
- Effectively identify and efficiently use Medicaid dollars

10:44 AM **Corey Kjos, Enterprise Operations Manager, North Dakota Department of Health and Human Services** introduced HB1047 testimony in favor #21126

10:47 AM **Madam Chair Lee** closed the hearing.

**Senator Hogan** moves **DO PASS**.

**Senator K. Roers** seconded.

Roll call vote.

<b>Senators</b>	<b>Vote</b>
Senator Judy Lee	Y
Senator Sean Cleary	Y
Senator David A. Clemens	Y
Senator Kathy Hogan	Y
Senator Kristin Roers	Y
Senator Kent Weston	Y

Motion passed 6-0-0.

**Senator Weston** will carry HB 1047

11:50 AM **Madam Chair Lee** adjourned the hearing.

*Patricia Lahr, Committee Clerk*

**REPORT OF STANDING COMMITTEE**

**HB 1047: Human Services Committee (Sen. Lee, Chairman)** recommends **DO PASS** (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HB 1047 was placed on the Fourteenth order on the calendar. This bill does not affect workforce development.

**TESTIMONY**

**HB 1047**



**Testimony  
House Bill No. 1047  
House Human Services Committee  
Representative Weisz, Chairman  
January 10, 2023**

Chairman Weisz, and members of the House Human Services Committee, I am Corey Kjos, Enterprise Operations Manager with the Department of Health and Human Services (Department). I appear before you in support of House Bill No. 1047, which was introduced at the request of the Department.

The Department is requesting updates to information that insurers must provide to the Department for individuals who are eligible for medical assistance to be in line with recent Federal legislative changes for the same purpose which were signed into law on March 15, 2022.

**Section 1:**

The proposed changes in Section 1 of this Bill amend section 50-24.1-29 of the North Dakota Century Code regarding certain information insurers are to provide to the department. These changes provide clarification to, or additional requirements for items that insurers are already doing as a part of doing business in the State.

Page 1, line 22 through 23 clarifies that insurers must also provide the duration of the health insurance coverage. This would allow the department to know if a Medicaid recipient has/had active insurance coverage so the Department can correctly notify providers of that coverage or seek reimbursement from the insurer for services that were paid by the Department.

Page 2, line 23 adds that insurers accept the departments entitlement to payment. This payment would be as reimbursement to expenses that the Department had previously made for the insured individual.

Page 2, line 27 adds language to include a 60-day timeframe to the already existing requirement that insurers respond to inquiries made by the department.

Page 3, lines 7 through 11 add additional language that insurers accept an authorization made by Medicaid as if the prior authorization was made by the insurer and that they also agree not to deny a request for reimbursement by the department solely for failure to obtain a prior authorization for the item or service.

With the additions and clarifications to 50-24.1-29 the Department will be able to more effectively identify and recover payments from liable third-party insurers, which will allow the State to more effectively and efficiently use our Medicaid dollars to support individuals' health and wellness.

This concludes my testimony. I would be happy to try to answer any questions the committee may have. Thank you.

**Testimony  
House Bill No. 1047  
Senate Human Services Committee  
Senator Lee, Chairman  
February 20, 2023**

Chairman Lee, and members of the Senate Human Services Committee, I am Corey Kjos, Enterprise Operations Manager with the Department of Health and Human Services (Department). I appear before you in support of House Bill No. 1047, which was introduced at the request of the Department.

The Department is requesting updates to information that insurers must provide to the Department for individuals who are eligible for medical assistance to be in line with recent Federal legislative changes for the same purpose which were signed into law on March 15, 2022.

**Section 1:**

The proposed changes in Section 1 of this Bill amend section 50-24.1-29 of the North Dakota Century Code regarding certain information insurers are to provide to the department. These changes provide clarification to, or additional requirements for items that insurers are already doing as a part of doing business in the State.

Page 1, line 22 through 23 clarifies that insurers must also provide the duration of the health insurance coverage. This would allow the department to know if a Medicaid recipient has/had active insurance coverage so the Department can correctly notify providers of that coverage or seek reimbursement from the insurer for services that have been paid for by the Department.

Page 2, line 23 adds that insurers accept the departments entitlement to payment. This payment would be as reimbursement to expenses that the Department had previously made for the insured individual.

Page 2, line 27 adds language to include a 60-day timeframe to the already existing requirement that insurers respond to inquiries made by the department.

Page 3, lines 7 through 11 adds additional language that insurers accept an authorization made by Medicaid as if the prior authorization was made by the insurer and that they also agree not to deny a request for reimbursement by the department solely for failure to obtain a prior authorization for the item or service.

With the additions and clarifications to 50-24.1-29 the Department will be able to more effectively identify and recover payments from liable third-party insurers, which will allow the State to more effectively and efficiently use our Medicaid dollars to support individuals' health and wellness.

This concludes my testimony. I would be happy to try to answer any questions the committee may have. Thank you.