

Sixty-first
Legislative Assembly
of North Dakota

ENGROSSED SENATE BILL NO. 2362

Introduced by

Senators Mathern, Heckaman, Potter

Representatives Conrad, Kaldor, Schneider

1 A BILL for an Act to create and enact three new sections to chapter 50-29 of the North Dakota
2 Century Code, relating to children's health insurance buy-in and premium assistance programs
3 to be established by the department of human services and the creation of a children's health
4 insurance program advisory committee; and to amend and reenact section 50-29-04 of the
5 North Dakota Century Code, relating to eligibility for the children's health insurance program.

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

7 **SECTION 1.** A new section to chapter 50-29 of the North Dakota Century Code is
8 created and enacted as follows:

9 **Children's health insurance buy-in program.** The department shall establish a
10 buy-in program through which a parent or guardian whose family net income exceeds the
11 income eligibility limit provided for under section 50-29-04 may purchase a plan of coverage for
12 a child who is uninsured. The coverage, copayments, and deductibles for a plan of coverage
13 purchased under this section must be comparable to the coverage, copayments, and
14 deductibles under the children's health insurance program. The premium for coverage may not
15 exceed the amount the children's health insurance program pays per month for a child of
16 comparable age whose family income is within the income eligibility limit provided for under
17 section 50-29-04. The department shall reimburse the county for any costs incurred by the
18 county in the implementation and administration of the buy-in program.

19 **SECTION 2. AMENDMENT.** Section 50-29-04 of the North Dakota Century Code is
20 amended and reenacted as follows:

21 **50-29-04. Plan requirements.** The plan:

- 22 1. Must be provided through private contracts with insurance carriers;
23 2. Must allow conversion to another health insurance policy;
24 3. Must be based on an actuarial equivalent of a benchmark plan;

- 1 4. Must incorporate every state-required waiver approved by the federal government;
- 2 5. Must include community-based eligibility outreach services; and
- 3 6. Must provide:
- 4 a. A net income eligibility limit of ~~one~~ two hundred ~~fifty~~ percent of the poverty
- 5 line;
- 6 b. A copayment requirement for each pharmaceutical prescription and for each
- 7 emergency room visit;
- 8 c. A deductible for each inpatient hospital visit;
- 9 d. Coverage for:
- 10 (1) Inpatient hospital, medical, and surgical services;
- 11 (2) Outpatient hospital and medical services;
- 12 (3) Psychiatric and substance abuse services;
- 13 (4) Prescription medications;
- 14 (5) Preventive screening services;
- 15 (6) Preventive dental and vision services; and
- 16 (7) Prenatal services; and
- 17 e. A coverage effective date that is the first day of the month, following the date
- 18 of application and determination of eligibility.
- 19 7. The department shall seek a federal waiver to increase the net income eligibility
- 20 level provided under subsection 6 to three hundred percent of the poverty line.
- 21 Upon approval of the waiver, the income eligibility limit in subsection 6 is increased
- 22 to the limit approved by the waiver.

23 **SECTION 3.** A new section to chapter 50-29 of the North Dakota Century Code is

24 created and enacted as follows:

25 **Premium for coverage.** Upon approval of the waiver requested under subsection 7 of

26 section 50-29-04, the department shall charge a monthly premium for coverage for an eligible

27 applicant whose net income exceeds two hundred percent of the poverty line but does not

28 exceed three hundred percent of the poverty line. The monthly premium must be equivalent to

29 the amount expended monthly in state funds for an eligible applicant whose net income is two

30 hundred percent of the poverty line or less.

1 **SECTION 4.** A new section to chapter 50-29 of the North Dakota Century Code is
2 created and enacted as follows:

3 **Children's health insurance program advisory committee - Membership - Duties.**

4 The children's health insurance program advisory committee is composed of seven members
5 appointed by the governor. The members of the committee must be individuals who advocate
6 for children's health care and must include at least one member of the legislative assembly and
7 at least one parent with children under the age of eighteen. The term of office is four years
8 expiring on July thirty-first with no more than two terms expiring in any one year. Of the first
9 members appointed one member must be appointed for a term of one year, two members must
10 be appointed for terms of two years, two members must be appointed for terms of three years,
11 and two members must be appointed for terms of four years. A vacancy occurring other than
12 by reason of the expiration of a term must be filled in the same manner as original
13 appointments, except that the appointment may be made for only the remainder of the
14 unexpired term. The members are entitled to be paid for mileage and actual expenses incurred
15 in attending meetings and in performance of their official duties in amounts provided by law for
16 other state officers and employees. The children's health insurance program advisory
17 committee shall advise the department regarding the children's health insurance program and
18 the children's health insurance buy-in program.