

2007 HOUSE HUMAN SERVICES

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2007 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. HB 1155

House Human Services Committee

Check here for Conference Committee

Hearing Date: January 10, 2007

Recorder Job Number: 877

Committee Clerk Signature

Minutes:

Chairman Price: Opening up the hearing on HB 1155. The comprehensive health association of ND is a high risk pool that was established in the early 80's, for persons who can not get insurance for some other medical reason. It covers all ages and Medicare supplement policy.

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Rod St. Aubyn: Representing BC/BS of ND. Our company administers to the CHAND program. See attached testimony and proposed amendments. CHAND is an individual product. It is for a single person. Should a single mother become pregnant the child is automatically covered for 30 days. The mother is not notified that she needs a policy for the child, it is in the application. If you are on Medicaid you are not eligible for CHAND.

Representative Porter: With the newly born child page 16, was there any discussion on rather than after the birth of the child, after the discharge of a health care facility? If someone had a critically ill child, that would be the last thing on their mind. Also rather than 31 days of birth, why not 31 days after discharge.

Mr. Aubyn: That has not happened, but the CHAND board would probably waive that requirement. If you want specific language in there we could work with you. The flip side of that is the child id automatically eligible as a dependent. The problem is getting the application.

Page 2 House Human Services Committee Bill/Resolution No. HB 1155 Hearing Date: January 10, 2007

Chairman Price: Anyone else in favor or opposition of HB 1155? Close the hearing on HB

1155

2007 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. HB 1155

House Human Services Committee

Check here for Conference Committee

Hearing Date: January 10, 2007

Recorder Job Number: 882

Committee Clerk Signature

Minutes:

Chairman Price calls the committee to order to discuss.

Representative Porter: When we talked about the newly born child with out health insurance coverage, you made a comment about the digression of the board. Is that written somewhere in the existing law?

udy Jahock

Chairman Price: Not necessarily in the law. We have done it before. There have been some cases where a person has maybe not met a waving period. They have been fairly lenient on some of those things. I do have some concerns about gong out longer than 30 days. It is pretty standard. The child could transfer to the fathers plan. They are added on automatically if you have a family plan. Under CHAN the mother would have to get a policy after 30 days We won't take action right now.

2007 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. HB 1155

Н	louse	Human	Services	Committee
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☐ Check here for Conference Committee

Hearing Date: January 15, 2007

Recorder Job Number: 1134

Committee Clerk Signature

Minutes:

Chairman Price: Let's look at HB 1155. The language with the CHAN policy is the same as

udy School

BC/BS.

Representative Porter do pass, Representative Kaldor seconded. The vote was 12 yeas,

0 nays 0 absent. Representative Schneider to carry to the floor.

FISCAL NOTE

Requested by Legislative Council 03/02/2007

Amendment to:

HB 1155

1A. State fiscal effect: Identify the state fiscal effect and the fiscal effect on agency appropriations compared to

funding levels and appropriations anticipated under current law.

	2005-2007	Biennium	2007-2009	Biennium	2009-2011 Biennium		
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds	
Revenues	\$0	\$0	\$0	\$0	\$0	\$0	
Expenditures	\$0	\$0	\$0	\$0	\$0	\$0	
Appropriations	\$0	\$0	\$0	\$0	\$0	\$0	

1B. County, city, and school district fiscal effect: Identify the fiscal effect on the appropriate political subdivision.

	um 2009-2011 Biennium			2007-2009 Biennium 2009-2011 Biennium	
Counties Cities Districts Counties Cities Districts Counties	Cities	School Districts			
\$0 \$0 \$0 \$0 \$0 \$0	\$0	\$0			

2A. **Bill and fiscal impact summary:** Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).

The amended bill makes certain changes to the CHAND health insurance program for high risk individuals. The changes are for the most part administrative and are not expected to have a fiscal impact on the general fund.

B. **Fiscal impact sections:** Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.

See explanation above.

- 3. State fiscal effect detail: For information shown under state fiscal effect in 1A, please:
 - A. Revenues: Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.

See explanation above.

B. **Expenditures:** Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.

See explanation above.

C. **Appropriations:** Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.

See explanation above.

Name:	Charles E. Johnson	Agency:	Insurance Department
Phone Number:	328-2440	Date Prepared:	03/02/2007

FISCAL NOTE

Requested by Legislative Council 01/05/2007

Bill/Resolution No.:

HB 1155

1A. State fiscal effect: Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.

	2005-2007	Biennium	2007-2009	Biennium	2009-2011 Biennium		
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds	
Revenues	\$0	\$0	\$0	\$0	\$0	\$0	
Expenditures	\$0	\$0	\$0	\$0	\$0	\$0	
Appropriations	\$0	\$0	\$0	\$0	\$0	\$0	

1B. County, city, and school district fiscal effect: Identify the fiscal effect on the appropriate political subdivision.

2005-2007 Biennium			2007-2009 Biennium			2009-2011 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

2A. **Bill and fiscal impact summary:** Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).

This bill makes certain changes to the CHAND health insurance program for high risk individuals. The changes are for the most part administrative and are not expected to have a fiscal impact on the general fund.

B. **Fiscal impact sections:** Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.

See explanation above.

- 3. State fiscal effect detail: For information shown under state fiscal effect in 1A, please:
 - A. **Revenues:** Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.

See explanation above.

B. **Expenditures:** Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.

See explanation above.

C. **Appropriations:** Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.

See explanation above.

Name:	Charles E. Johnson	Agency:	Insurance Department	
Phone Number:	328-2440	Date Prepared:	01/08/2007	

Date: //5
Roll Call Vote #: /

2007 HOUSE STANDING COMMITTEE ROLL CALL VOTES BILL/RESOLUTION NO. "Click here to type Bill/Resolution No."

House HUMAN SERVICES		14 B	1155	Comi	mittee
Check here for Conference C	ommitte	ee			
Legislative Council Amendment Num	-				
Action Taken	pan	7			
Motion Made By Warte		Se	econded By Kaldon	<u> </u>	
Representatives	Yes	No	Representatives	Yes	No
Clara Sue Price – Chairman			Kari L Conrad	i/	
Vonnie Pietsch – Vice Chairman			Lee Kaldor		
Chuck Damschen	i/		Louise Potter	1	
Patrick R. Hatlestad	V		Jasper Schneider		
Curt Hofstad	ر ا			Ť	
Todd Porter	1				
Gerry Uglem	اس	<u></u>			
Robin Weisz	1				
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Total (Yes) "Click here to type	Yes Vo	te" No	"Click here to type No Vo	te"	
Absent	D				
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If the vote is on an amendment, brief	ly indica	ite inter	nt;		

REPORT OF STANDING COMMITTEE (410) January 15, 2007 3:52 p.m.

Module No: HR-09-0600 Carrier: Schneider Insert LC: Title:

REPORT OF STANDING COMMITTEE

HB 1155: Human Services Committee (Rep. Price, Chairman) recommends DO PASS (12 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HB 1155 was placed on the Eleventh order on the calendar.

2007 SENATE HUMAN SERVICES

HB 1155

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. HB 1155

Senate Human	Services	Committee
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Check here for Conference Committee

Hearing Date: 2-27-07

Recorder Job Number: 3944

Committee Clerk Signature

Mary K Monson

Minutes:

Chairman Senator J. Lee opened the hearing on HB 1155 relating to the comprehensive health association of North Dakota.

Senator J. Lee explained that she and Representative Price were the prime sponsors of this.

The health association of ND is the high risk pool which makes insurance coverage available to those people who have been denied coverage by regular insurance companies and there is some updating that needs to be done. There will be amendments to consider.

Rod St. Aubyn (BC/BS) testified in support of HB 1155 and went through the proposed changes to the CHAND Statute (attachment #1). He also gave some history on the high risk pool CHAND (meter 2:00). Group coverage is guaranteed issue. In the individual market the applicant has to medically qualify. If the insurance company denies a person, CHAND is a high risk pool that would basically be their safety net.

(Meter 4:40) He explained the four different types of CHAND applications.

He said the most significant change in the bill would be expanding the authority of the CHAND Board to make exceptions for terminating CHAND members for reasons other than just for verifiable medical reasons such as residency questions. (Meter 6:10) He provided an example.

Senator Warner asked what creditable means.

Mr. St. Aubyn explained that a person get credit for the time they have it such as waiting periods. (Meter 12:55) He gave an example.

Senator Warner referred to "is not enrolled in health benefits in the state's medical assistance program". Is there some convergence here of the Katie Becket waivers high risk children would not be able to get service?

Mr. St. Aubyn said Medicaid has always been a disqualifier for high risk pool.

Senator Warner said they were changing the language on page 12 from "is not eligible for" to "is not enrolled". Are we creating a crack for people to fall through?

Mr. St. Aubyn responded that part of the problem is, how do they know if someone is eligible?

A person can be eligible and not be enrolled in Medicaid. He said most of this is patterned after a model act by the National Association of Insurance Commissioners. Under the model act a person can't be on Medicaid and also receive the high risk pool.

Mr. St. Aubyn talked about the CHAND Board. The insurance commissioner is the chairman of the board. There is a representative from the health department, from OMB, and the top 3 or 4 insurers. There is a representative from the senate and also a representative from the house. They meet three or four times a year or as needed.

Senator J. Lee asked Mr. St. Aubyn if he would address the proposed amendments. (Attachment #2)

Mr. St. Aubyn said the amendments do three or four things. Creditable coverage on the top of page 1 down to line 18 on page 2 is really the same as qualifying previous coverage. This amendment will strike out all of those things, because qualifying previous coverage is already in the century code. This will really say creditable coverage has the same meaning as

qualifying previous coverage as defined under section 26.1-36.3-01. The last part of the amendments is that section being referred to.

He also addressed some drafting errors.

(Meter 31:35) Mr. St. Aubyn talked about the HIPAA requirements and that it is geared towards group plans. There is concern about individuals having individual coverage in another state and coming into ND not being able to apply for CHAND for 183 days. He addressed the residency issue. He talked about different options if this creates a problem

Another issue he talked about was an individual on a high risk pool in other state moving into ND not being eligible to apply for CHAND for 183 days.

Senator J. Lee – Is there any discussion in the national association about that. It's almost like reciprocity. Is ND consistent with other states with 183 days?

Mr. St. Aubyn said generally it is a 30 day residency rule.

Senator J. Lee thought there could be the possibility of giving the board some latitude with the idea that there would be a report back for the next session. She didn't like to think that if somebody is a legitimate purchaser of CHAND is prevented from purchasing it and has to go uninsured for six months.

Rod St. Aubyn said he would concur. It is a matter of if the legislature wants to grant some authority to the board. It is reasonable to let the board identify and investigate a little and make an exception.

Norbert Mayer (ND Association of Insurance and Financial Advisors) supports the changes being made to the CHAND program. They are concerned about the number of uninsured individuals in the state. CHAND is one important piece of the entire puzzle. With this program, anybody sincerely desiring to purchase health insurance can do it.

Senator J. Lee asked if he had any observations about the residency issue.

Mr. Mayer said many years ago the residency issue was much shorter. At that time there were people who took advantage of it. He would concur with giving the board some latitude to investigate. It is important to make it available to people with a genuine desire and yet prevent people from taking total advantage of the program.

Senator Warner – Would you anticipate that the investigation come at the front end during the application process or at the back end during the claims process.

Mr. Mayer said he would assume that it would have to come at the front end.

There was no opposing testimony.

Senator J. Lee asked representatives from the insurance dept. for their input on the residency issue. Is it legal to give the board some latitude?

Chuck Johnson (General Counsel, ND Insurance Dept.) thought it could be done if the legislature is willing to grant that discretion. The question is "How much guideline do you want to give the board in exercising that discretion?" It would be up to the legislature whether or not to add any guidelines or to just allow the discretion unhindered for the first two years and see how that works. He offered suggestions for wording (meter 43:00).

Senator Warner – If the board is given discretion, would you anticipate there might be litigation over discrimination?

(Meter 44:45) Mr. Mayer said these situations come up so seldom and didn't see it would be a problem.

Senator J. Lee read from code the section that deals with residency (meter 40).

(Meter 48:30) Discussion about when a person becomes a legal residency and if the 183 days starts after that.

The hearing on HB 1155 was closed.

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. HB 1155

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 2-28-07

Recorder Job Number: 4133

Committee Clerk Signature

Mary K Mouson

Minutes:

Chairman Senator J. Lee opened HB for discussion and consideration of amendments.

(Meter 01:55) Senator J. Lee referred to that amendment giving the board authority to waive the residency requirement. (Attachment #3)

Senator Warner – Does this indicate that the board itself would be meeting and having an agenda item on each individual policy or does it mean the board would promulgate rules to allow their executive authority to make those decisions.

Senator J. Lee said her expectations would be that they would look at any individual application.

Rod St. Aubyn agreed (meter 3:15).

Senator Warner asked how often the board meets.

Senator J. Lee said quarterly and occasionally a conference call if there is something that comes up in between.

(Meter 6:00) Senator J. Lee recognized Rod St. Aubyn for some clarification of the amendments and adding Medicaid. Medicaid would allow an individual to apply for HIPAA.

Page 2 Senate Human Services Committee Bill/Resolution No. HB 1155 Hearing Date: 2-28-07

Senator Heckaman moved to accept both amendments.

Senator Warner seconded the motion.

Roll call vote 6-0-0. Amendments accepted

Senator Warner moved a Do Pass on HB 1155 as amended.

Senator Pomeroy seconded the motion.

Roll call vote 6-0-0. Carrier is Senator J. Lee.

Prepared by the Legislative Council staff for Senator J. Lee
February 21, 2007

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1155

- Page 1, line 1, replace "subdivision" with "subdivisions h and"
- Page 1, line 3, remove the second "and"
- Page 1, line 4, after "26.1-08-13" insert ", and subsection 28 of section 26.1-36.3-01"
- Page 1, line 5, after "Dakota" insert "and a definition applicable to the small employer employee health insurance law"
- Page 1, line 20, overstrike "means, with respect to an individual, coverage of the"
- Page 1, overstrike lines 21 through 23
- Page 2, overstrike lines 1 through 11
- Page 2, line 12, overstrike "h. A public health plan as defined in federal regulations" and remove ", including a plan"
- Page 2, remove line 13
- Page 2, line 14, remove "government" and overstrike the semicolon
- Page 2, overstrike lines 15 through 17
- Page 2, line 18, overstrike "87-293; 75 Stat. 613; 22 U.S.C. 2504(e)]" and insert immediately thereafter "has the same meaning as "qualifying previous coverage" as defined under section 26.1-36.3-01"
- Page 4, line 12, overstrike "or" and insert immediately thereafter "and"
- Page 6, line 19, replace "Subdivision" with "Subdivisions h and"
- Page 6, line 20, replace "is" with "are"
- Page 6, after line 20, insert:
 - "h. Develop and implement a program to publicize the existence of the association, the eligibility requirement requirements, and procedures for enrollment and to maintain public awareness of the association;"
- Page 11, line 17, remove "or c"
- Page 11, line 18, after "5" insert "or under subparagraph a of paragraph 1 of subdivision c of subsection 5"

Page 13, line 7, after "under" insert "medicare or"

Page 13, line 8, overstrike ", medicare, or"

Page 13, line 9, overstrike "medicaid"

Page 18, after line 17, insert:

"SECTION 11. AMENDMENT. Subsection 28 of section 26.1-36.3-01 of the North Dakota Century Code is amended and reenacted as follows:

- 28. "Qualifying previous coverage" and "qualifying existing coverage" mean, with respect to an individual, health benefits or coverage provided under any of the following:
 - a. A group health benefit plan;
 - b. A health benefit plan;
 - c. Medicare;
 - d. Medicaid;
 - e. Civilian health and medical program for uniformed services;
 - f. A medical care program of the Indian health service or of a tribal organization;
 - g. A state health benefit risk pool, including coverage issued under chapter 26.1-08;
 - h. A health plan offered under 5 U.S.C. 89;
 - i. A public health plan as defined in federal regulations, including a plan maintained by a state government, the United States government, or a foreign government; and
 - j. A health benefit plan under section 5(e) of the Peace Corps Act [Pub. L. 87-293; 75 Stat. 612; 22 U.S.C. 2504(e)]; and
 - k. A state's children's health insurance program funded through title XXI of the federal Social Security Act [42 U.S.C. 1397aa et seq.].

The term "qualifying previous coverage" does not include coverage of benefits excepted from the definition of a "health benefit plan" under subsection 17."

Renumber accordingly

February 27, 2007

PROPOSED AMENDMENT TO HOUSE BILL NO. 1155

Page 5, line 21, after the period insert "The board may waive the residency requirement upon a showing of good cause."

Renumber accordingly

Adopted by the Human Services Committee February 21, 2007

2.28.07

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1155

- Page 1, line 1, replace "subdivision" with "subdivisions h and"
- Page 1, line 3, remove the second "and"
- Page 1, line 4, after "26.1-08-13" insert ", and subsection 28 of section 26.1-36.3-01"
- Page 1, line 5, after "Dakota" insert "and to a definition applicable to small employer employee health insurance"
- Page 1, line 20, overstrike "means, with respect to an individual, coverage of the"
- Page 1, overstrike lines 21 through 23
- Page 2, overstrike lines 1 through 11
- Page 2, line 12, overstrike "h. A public health plan as defined in federal regulations" and remove ", including a plan"
- Page 2, remove line 13
- Page 2, line 14, remove "government" and overstrike the semicolon
- Page 2, overstrike lines 15 through 17
- Page 2, line 18, overstrike "87-293; 75 Stat. 613; 22 U.S.C. 2504(e)]" and insert immediately thereafter "has the same meaning as "qualifying previous coverage" as defined under section 26.1-36.3-01"
- Page 4, line 12, overstrike "or" and insert immediately thereafter "and"
- Page 5, line 21, after the period insert "The board may waive the residency requirement upon a showing of good cause."
- Page 6, line 19, replace "Subdivision" with "Subdivisions h and"
- Page 6, line 20, replace "is" with "are"
- Page 6, after line 20, insert:
 - "h. Develop and implement a program to publicize the existence of the association, the eligibility requirement requirements, and procedures for enrollment and to maintain public awareness of the association;"

Page 11, line 17, remove "or c"

Page 11, line 18, after "5" insert "or under subparagraph a of paragraph 1 of subdivision c of subsection 5"

Page 13, line 7, after "under" insert "medicare or"

Page 13, line 8, overstrike ", medicare, or"

Page 13, line 9, overstrike "medicaid"

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 - c. Medicare;
 - d. Medicaid;
 - e. Civilian health and medical program for uniformed services;
 - f. A medical care program of the Indian health service or of a tribal organization;
 - g. A state health benefit risk pool, including coverage issued under chapter 26.1-08;
 - h. A health plan offered under 5 U.S.C. 89;
 - i. A public health plan as defined in federal regulations, including a plan maintained by a state government, the United States government, or a foreign government; and
 - j. A health benefit plan under section 5(e) of the Peace Corps Act [Pub. L. 87-293; 75 Stat. 612; 22 U.S.C. 2504(e)]; and
 - k. A state's children's health insurance program funded through title XXI of the federal Social Security Act [42 U.S.C. 1397aa et seq.].

The term "qualifying previous coverage" does not include coverage of benefits excepted from the definition of a "health benefit plan" under subsection 17."

Renumber accordingly

			Roll Call Vote #:	,	·
2007 SENATE STA	NDING	COMN	NITTEE ROLL CALL VOTES		
BILL/RESOL	LUTION	NO	HB 1155		
Senate HUMAN SERVICES				_ Com	mittee
☐ Check here for Conference C	ommitte	ee			
Legislative Council Amendment Nun	nber				
	-	10	12 A 12 + 2/2		
Action Taken Do Po Motion Made By Sen. Loc	kama	Se	econded By Sen. L	aine	<u> </u>
Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman Senator Robert Erbele, V. Chair	V		Senator Joan Heckaman Senator Jim Pomeroy	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Senator Dick Dever	V		Senator John M. Warner		
	<u> </u>				
Total (Yes)		No	0		
Absent					
Floor Assignment					·

If the vote is on an amendment, briefly indicate intent:

Date: <u>2-28-07</u>

			Roll Call Vote #:	<u> </u>	
2007 SENATE STA	ANDING	COM	MITTEE ROLL CALL VOTES		
BILL/RESO	LUTION	NO	HB 1155		
Senate HUMAN SERVICES		· <u></u>		Com	mittee
Check here for Conference (Committ	ee		_	
_egislative Council Amendment Nu	mber	7	0392.0102	Title	2.02
Action Taken OoP	ass	as	amended		
Motion Made By Sen. Wa	mer	Se	econded By Sen. F	mero]
Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman		<u> </u>	Senator Joan Heckaman	1./	
Senator Robert Erbele, V. Chair	V		Senator Jim Pomeroy	1./	
Senator Dick Dever			Senator John M. Warner	/	
					
	<u> </u>				
		-,,-			
otal (Yes)		No	0		

Date: <u>2-28-07</u>

If the vote is on an amendment, briefly indicate intent:

Total

Absent

Floor Assignment

Module No: SR-39-4148

Carrier: J. Lee

insert LC: 70392.0102 Title: .0200

REPORT OF STANDING COMMITTEE

HB 1155: Human Services Committee (Sen. J. Lee, Chairman) recommends AMENDMENTS AS FOLLOWS and when so amended, recommends DO PASS (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HB 1155 was placed on the Sixth order on the calendar.

Page 1, line 1, replace "subdivision" with "subdivisions h and"

Page 1, line 3, remove the second "and"

Page 1, line 4, after "26.1-08-13" insert ", and subsection 28 of section 26.1-36.3-01"

Page 1, line 5, after "Dakota" insert "and to a definition applicable to small employer employee health insurance"

Page 1, line 20, overstrike "means, with respect to an individual, coverage of the"

Page 1, overstrike lines 21 through 23

Page 2, overstrike lines 1 through 11

Page 2, line 12, overstrike "h. A public health plan as defined in federal regulations" and remove ", including a plan"

Page 2, remove line 13

Page 2, line 14, remove "government" and overstrike the semicolon

Page 2, overstrike lines 15 through 17

Page 2, line 18, overstrike "87-293; 75 Stat. 613; 22 U.S.C. 2504(e)]" and insert immediately thereafter "has the same meaning as "qualifying previous coverage" as defined under section 26.1-36.3-01"

Page 4, line 12, overstrike "or" and insert immediately thereafter "and"

Page 5, line 21, after the period insert "The board may waive the residency requirement upon a showing of good cause."

Page 6, line 19, replace "Subdivision" with "Subdivisions h and"

Page 6, line 20, replace "is" with "are"

Page 6, after line 20, insert:

"h. Develop and implement a program to publicize the existence of the association, the eligibility requirement requirements, and procedures for enrollment and to maintain public awareness of the association;"

Page 11, line 17, remove "or c"

Page 11, line 18, after "5" insert "or under subparagraph a of paragraph 1 of subdivision c of subsection 5"

Page 13, line 7, after "under" insert "medicare or"

Page 13, line 8, overstrike ", medicare, or"

March 1, 2007 8:12 a.m.

Module No: SR-39-4148

Carrier: J. Lee

Insert LC: 70392.0102 Title: .0200

Page 13, line 9, overstrike "medicaid"

Page 18, after line 17, insert:

"SECTION 11. AMENDMENT. Subsection 28 of section 26.1-36.3-01 of the North Dakota Century Code is amended and reenacted as follows:

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 - d. Medicaid;
 - e. Civilian health and medical program for uniformed services;
 - f. A medical care program of the Indian health service or of a tribal organization;
 - g. A state health benefit risk pool, including coverage issued under chapter 26.1-08;
 - h. A health plan offered under 5 U.S.C. 89;
 - A public health plan as defined in federal regulations, including a plan maintained by a state government, the United States government, or a foreign government; and
 - j. A health benefit plan under section 5(e) of the Peace Corps Act [Pub. L. 87-293; 75 Stat. 612; 22 U.S.C. 2504(e)]; and
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The term "qualifying previous coverage" does not include coverage of benefits excepted from the definition of a "health benefit plan" under subsection 17."

Renumber accordingly

2007 TESTIMONY

HB 1155