Sixty-sixth **HOUSE BILL NO. XXX**

Legislative Assembly

of North Dakota

Introduced by

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A BILL for an Act to create and enact a new section to chapter 26.1-36 of the North Dakota Century Code, relating to mental disorder and substance abuse parity.

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

 **Section 1.** A new section to chapter 26.1-36 of the North Dakota Century Code is created and enacted as follows:

1. The commissioner shall implement and enforce applicable provisions of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, and any amendments to, and any federal guidance or regulations relevant to, that act, including 45 CFR 146.136, 45 CFR 147.136, 45 CFR 147.160, and 45 CFR 156.115(a)(3), which includes:
	1. Proactively ensuring compliance by each insurance company, nonprofit health service corporation, or health maintenance organization that issues, executes, or renews any health insurance policy or health service contract on an individual, group, blanket, franchise, or association basis that provides mental disorder or substance abuse benefits.
	2. Evaluating all consumer or provider complaints regarding mental disorder and substance abuse coverage for possible parity violations.
	3. Performing parity compliance market conduct examinations of each insurance company, nonprofit health service corporation, or health maintenance organization that issues, executes, or renews any health insurance policy or health service contract on an individual, group, blanket, franchise, or association basis that provides mental disorder or substance abuse benefits, particularly market conduct examinations that focus on nonquantitative treatment limitations such as prior authorization, concurrent review, retrospective review, step-therapy, network admission standards, reimbursement rates, and geographic restrictions, among other nonquantitative treatment limitations.
	4. Requesting that each insurance company, nonprofit health service corporation, or health maintenance organization that issues, executes, or renews any health insurance policy or health service contract on an individual, group, blanket, franchise, or association basis that provides mental disorder or substance abuse benefits submit comparative analyses during the form review process demonstrating how they design and apply nonquantitative treatment limitations, both as written and in operation, for mental disorder and substance abuse benefits as compared to how they design and apply nonquantitative treatment limitations, as written and in operation, for medical and surgical benefits.
	5. The Commissioner may adopt rules, under 28-32-02, as may be necessary to effectuate any provisions of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 that relate to the business of insurance.
2. Not later March 31, 2021, the commissioner shall issue a report and educational presentation to the Legislative Assembly, which shall:
	1. Cover the methodology the commissioner is using to check for compliance with the federal Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), and any federal regulations or guidance relating to the compliance and oversight of MHPAEA.
	2. Cover the methodology the commissioner is using to check for compliance with 26.1-36-08, 26.1-36-08.1, and 26.1-36-09.
	3. Identify market conduct examinations conducted or completed during the preceding 12-month period regarding compliance with parity in mental disorder and substance abuse benefits under state and federal laws and summarize the results of such market conduct examinations.
	4. Detail any educational or corrective actions the commissioner has taken to ensure insurance company, nonprofit health service corporation, or health maintenance organization compliance with MHPAEA and 26.1-36-08, 26.1-36-08.1, and 26.1-36-09.
	5. The report must be written in non-technical, readily understandable language and shall be made available to the public by, among such other means as the commissioner finds appropriate, posting the report on the Internet website of the insurance department.