

**CHAPTER 26.1-54
AMERICAN HEALTH BENEFIT EXCHANGE**

26.1-54-01. American health benefit exchange. (Effective through August 31, 2022)

To ensure that an American health benefit exchange is created in the state, the commissioner and the department of human services shall:

1. Plan for the implementation of an American health benefit exchange for the state that facilitates the purchase of qualified health benefit plans; provides for the establishment of a small business health options program that is designed to assist qualified small employers in facilitating the enrollment of their employees in qualified health benefit plans offered in the small group market; implements eligibility determination and enrollment of individuals in the state's medical assistance program and the state's children's health insurance program; provides simplification; provides coordination among medical assistance, the children's health insurance program, and the state health insurance exchange; and meets the requirements of the Patient Protection and Affordable Care Act of 2010 [Pub. L. 111-148] as amended by the Health Care and Education Reconciliation Act of 2010 [Pub. L. 111-152]. The legislative assembly may consider establishing one exchange that will provide services to both qualified individuals and qualified small employers;
2. Subject to section 3 of chapter 225 of the 2011 Session Laws, take all actions necessary to ensure that the exchange is determined, not later than January 1, 2013, by the federal government to be ready to operate not later than January 1, 2014, and that the exchange is operating on or after January 1, 2014;
3. Subject to section 3 of chapter 225 of the 2011 Session Laws, consider whether to seek federal grant funds for the planning and implementation of the exchange and administer all funds appropriated or made available for the purpose of carrying out the provisions of this chapter;
4. Subject to section 3 of chapter 225 of the 2011 Session Laws, contract with outside entities as necessary to provide services necessary to implement the exchange; and
5. Collaborate with the information technology department as necessary and appropriate in completing the responsibilities set forth in this section.

American health benefit exchange. (Effective after August 31, 2022)

To ensure that an American health benefit exchange is created in the state, the commissioner and the department of health and human services shall:

1. Plan for the implementation of an American health benefit exchange for the state that facilitates the purchase of qualified health benefit plans; provides for the establishment of a small business health options program that is designed to assist qualified small employers in facilitating the enrollment of their employees in qualified health benefit plans offered in the small group market; implements eligibility determination and enrollment of individuals in the state's medical assistance program and the state's children's health insurance program; provides simplification; provides coordination among medical assistance, the children's health insurance program, and the state health insurance exchange; and meets the requirements of the Patient Protection and Affordable Care Act of 2010 [Pub. L. 111-148] as amended by the Health Care and Education Reconciliation Act of 2010 [Pub. L. 111-152]. The legislative assembly may consider establishing one exchange that will provide services to both qualified individuals and qualified small employers;
2. Subject to section 3 of chapter 225 of the 2011 Session Laws, take all actions necessary to ensure that the exchange is determined, not later than January 1, 2013, by the federal government to be ready to operate not later than January 1, 2014, and that the exchange is operating on or after January 1, 2014;
3. Subject to section 3 of chapter 225 of the 2011 Session Laws, consider whether to seek federal grant funds for the planning and implementation of the exchange and administer all funds appropriated or made available for the purpose of carrying out the provisions of this chapter;

4. Subject to section 3 of chapter 225 of the 2011 Session Laws, contract with outside entities as necessary to provide services necessary to implement the exchange; and
5. Collaborate with the information technology department as necessary and appropriate in completing the responsibilities set forth in this section.

26.1-54-02. Rules. (Effective through August 31, 2022)

The commissioner and the department of human services may adopt rules necessary or desirable to carry out the provisions of this chapter.

Rules. (Effective after August 31, 2022)

The commissioner and the department of health and human services may adopt rules necessary or desirable to carry out the provisions of this chapter.

26.1-54-03. Cooperation of state agencies. (Effective through August 31, 2022)

State agencies shall cooperate with the commissioner and the department of human services to ensure the success of the exchange.

Cooperation of state agencies. (Effective after August 31, 2022)

State agencies shall cooperate with the commissioner and the department of health and human services to ensure the success of the exchange.

26.1-54-04. Records. (Effective through August 31, 2022)

Notwithstanding any provision of this code making records confidential, the commissioner or the commissioner's designee and the department of human services may receive from and provide to federal and state agencies information gathered in the administration of the exchange, including social security numbers, if the disclosure is necessary for the commissioner, the department of human services, or the receiving entity to perform its duties and responsibilities.

Records. (Effective after August 31, 2022)

Notwithstanding any provision of this code making records confidential, the commissioner or the commissioner's designee and the department of health and human services may receive from and provide to federal and state agencies information gathered in the administration of the exchange, including social security numbers, if the disclosure is necessary for the commissioner, the department of health and human services, or the receiving entity to perform its duties and responsibilities.